## **Book Review**

Mahul B Amin, David J Grignon, Peter Allen Humphrey and John R Srigley: Gleason Grading of Prostate Cancer. A Contemporary Approach, 116 pp, Philadelphia, PA, Lippincott Williams & Wilkins 2004 (\$150).

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In 2003, the World Health Organization finally accepted the Gleason system as the standard for grading prostate cancer. It has taken some 40 years to accomplish this, from the early 1960s when Gleason developed his grading up to now! Gleason developed his concept primarily on the basis of transurethral resection material and only a few biopsies and simple prostatectomies. At that time, most prostate cancer patients came to therapy in an advanced disease stage. Thus, the surgical and other treatments were performed only to palliate the symptoms, not to cure the disease. In the meantime, however, the situation has changed dramatically. As a result of PSA screening, more than a million prostate biopsies are performed worldwide each year. In the US and western Europe, the total number of radical prostatectomies amounts to about 300 000 per year. And the basis for manifold types of therapy is the Gleason grading! Against this background, it is not surprising that interest in the pathology of prostate cancer has increased and the number of articles and books on the subject is increasing exponentially.

Without doubt, Gleason grading is now accepted as the most predictive of all grading systems. Since the grading is not based on cytological but on architectural ('pattern') morphological criteria, its application in biopsy material is not easy. Moreover, many pathologists get only a limited number of prostate biopsies—not enough to become familiar with the problems of this classification. This book is conceived as a typical 'workbook' that can help beginners but also experts in the field to solve the sometimes tricky problems of a correct application of Gleason grading. The history of the development of this classification and the 'philosophy' behind it will open the mind of the reader to a deeper understanding of Gleason's concept.

The book is written like a basic elementary school reader that teaches the ABCs of the Gleason grading. At the same time, however, it is also a book for superspecialists, to be consulted in difficult cases. For each Gleason pattern, the application of the grading in biopsy specimens as well as in transurethral resection and prostatectomy material is described and documented with superb photographs and schematic drawings. For each pattern, the pitfalls are discussed in detail. The illustrations show standard situations, special cancer types and difficult cases, always with a clear explanatory note. One can use the book like a 'morphological dictionary'-the photograph depicts the problem and the caption 'translates' it to a Gleason grade. In additional chapters, the reproducibility of the grading and the clinical importance are presented and discussed.

Practicing pathologists should keep the book close to their microscope—they will probably find in it the solution to their problem or the answer to their question. Urologists should keep the book in their library to better understand prostate cancer and the diagnoses of their pathologists.

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