

Patient Counseling Information Urology Pathology Report

Patient Name:

Date of Testing:

Birth Date:

Social Security #:

Your Pathology Test Result

Prostatic Intraepithelial Neoplasia (PIN)

Pathologist Description of Your Diagnosis

Prostatic intraepithelial neoplasia (PIN) is a pre-cancerous/pre-malignant growth of prostatic cells that is considered a precursor lesion to invasive prostate carcinoma. It doesn't cause elevation of the PSA blood test levels. PIN is divided into two grades, namely:

1. Low grade PIN (PIN 1) - not associated with greater risk of carcinoma on repeat biopsy and,
2. High grade PIN (PIN 2-3) - highly predictive of nearby or concurrent cancer in 50%-85% of cases.

The finding of high grade PIN in needle or core biopsy mandates a systematic and vigorous diagnostic follow-up with your physician.

Your Options For Treatment

1. "Watchful waiting" (low grade PIN 1)
2. Medication(s)
3. Serial PSA blood tests
4. TRUS guided sextant biopsies
5. Close clinical follow up

Patients' Frequently Asked Questions

1. Can the progression of high grade PIN into cancer be reversed?
2. What is the treatment for high grade PIN?
3. Does heredity play a role in high grade PIN and cancer?
4. Is it safe to engage in sexual activities?
5. What changes in dietary habits and lifestyle can help in the successful treatment of high grade PIN?
6. What is "watchful waiting"?

Suggestions For Your Urological Health Maintenance

Don't Miss Your Follow Up Appointments

Report any changes in your routine bladder or sexual habits to your physician

Have your PSA checked every 6 months along with a digital rectal exam and repeat biopsy for 2 years (high grade PIN only)

If no evidence of cancer, repeat biopsy and PSA once per year for another 2 years

Additional Urology Patient Resources and Support

American Urology Foundation www.prostatehealth.com
Health & Wellness Hotline 800-394-7546

American Urology Association Hotline – 800-978-
BPHH website: www.aua.org

Urologic Health Initiative – 800-668-5237

American Cancer Society – 800-ACS-2345

National Cancer Institute Information Service –

800-4 CANCER website: www.nci.nih.gov

www.cancernews.com/male

www.oncodiagnostic.com

This report is provided to help you understand your pathology test result and to review your treatment options. Other treatment options and additional information may also be available. Please consult your doctor with any questions you may have. Only you and your doctor can decide which treatment is best for your condition based on your medical history and condition.

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