Gleason 3+3=6. It’s the Best Biopsy Gleason Score You Can Have.

by Jan Manarite, VP of Advocacy & Education

Hi everyone. I think I do my best advocacy & education when I can help clarify misinformation, and fill in missing information. Patients don’t need another Google search – we already have that. So here’s a common misunderstanding, which often turns into misinformation – for prostate cancer patients who are NEWLY DIAGNOSED, or on ACTIVE SURVEILLANCE.

The Gleason Score for prostate biopsy tissue really ranges from 6-10 (not 2-10). So Gleason 6 is the lowest, and the best you can have. I am not a pathologist, nor am I a physician, but I am an advocate for accurate information (especially for men trying to make a cancer treatment decision), and a 13 year advocate for my husband’s advanced prostate cancer, among other things. I am also a 14 year advocate and educator in the prostate cancer community.

As an advocate, I have found this issue to be very significant. Many men and their advocates do not understand that their Gleason Score 3+3=6 is the best (least aggressive) Gleason they can have. I believe this ties into the problem of ‘overtreatment’ in prostate cancer. At the very least, cancer patients deserve clear and accurate information.

If patients and caregivers think their Gleason of 3+3=6 is in the middle of the range of Gleason Scores, it becomes almost
psychologically impossible to consider Active Surveillance, and not choose immediate treatment with surgery or radiation. But if they understand that Gleason 3+3=6 is the best (least aggressive) type of cancer tissue, the whole understanding of a man’s cancer changes, and becomes clearer. It also helps him to slow down in his research, and take the time he needs to make the treatment decision he really wants. Isn’t this our goal in patient empowerment, and Shared Decision Making? The simple truth is that after diagnosis, and receiving their Gleason Score, men were left to think that a Gleason of 6 was in the middle – that a biopsy Gleason could be 2 through 10. This has not been the case since somewhere around the ISUP (International Society of Urological Pathologists) meeting and consensus statement in 2005.

The background & references for this information came from a meeting in 2005. **The International Society of Urological Pathologists** met and came to agreement about some issues in prostate biopsy pathology. The resulting article and consensus statement is complicated for the lay person, but you can [find it here](#). See more references below, which are easier to understand.

Gleason scores from radical prostatectomy (surgery) are different. In reality, a patient may receive a lower Gleason (5 or lower), but even then, these are usually rare.

As always, discuss this with your nurses and physicians. I will always argue that the treatment decision ultimately belongs to the cancer patient. It is our job to help empower them with clear and accurate information, as best as we can.
References:

* Epstein, JL. *Gleason Score 2–4 Adenocarcinoma of the Prostate on Needle Biopsy: A Diagnosis That Should Not Be Made*

* Stanford Health System. *Gleason system*. “The lowest Gleason grade assigned in clinical practice is 3+3=6.”

* Johns Hopkins. *Prostate Cancer on Needle Biopsy*. “The lowest Gleason score (least aggressive) tumor that is typically present on prostate biopsy is a 6 with higher grades (maximum Gleason score 10) corresponding to progressively more aggressive tumors.”