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论著

p73 基因多态性与乳腺癌临床病理参数的关系

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摘要:

目的: 研究p73 基因G4C14-A4T14 多态性与乳腺癌临床病理参数的关系。方法: 利用Sequenom Mass Array iPLEX GOLD 系统, 对170 例原发性乳腺癌患者进行p73 基因G4C14-A4T14 多态性检测, 并以t 检验分析不同基因型与乳腺癌患者年龄、原发灶大小的相关性; 以 χ^2 检验分析不同基因型与乳腺癌临床病理参数的相关性; 应用非条件logistic 回归分析比较不同基因型与乳腺癌化学治疗疗效之间的关系。结果: p73 基因多态性与乳腺癌患者的年龄、原发灶大小、绝经状况、TNM 分期、病理类型、腋窝淋巴结转移、雌激素受体、孕激素受体、人表皮生长因子受体2 以及p53 均无明显相关性($P>0.05$); 三阴性乳腺癌(雌激素受体、孕激素受体及人表皮生长因子受体2 均阴性) 中GC/GC 基因型频率明显高于非三阴性乳腺癌 (78.9% vs 57.6%, $\chi^2=5.741$, $P=0.017$) ; p73 基因多态性与乳腺癌对蒽环类药物的化学治疗敏感性无明显关系($P>0.05$)。结论: p73 基因G4C14-A4T14 多态性与三阴性乳腺癌显著相关, 携带GC/GC 基因型的乳腺癌患者可能预后不良。

关键词: 三阴性乳腺癌 p73 基因 多态性 化学治疗敏感性

p73 polymorphisms and clinicopathologic characteristics in breast cancer

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Abstract:

Objective: To evaluate the correlations between p73 G4C14-A4T14 polymorphisms and clinicopathologic characteristics of patients with breast cancer.

Methods: A total of 170 patients with breast cancer were genotyped for p73 G4C14-A4T14 polymorphisms by Sequenom MassArray? iPLEX GOLD System. The correlations between polymorphisms and the age of patients with breast cancer, or tumor size were analyzed by t-test; the correlations between polymorphisms and clinicopathologic characteristics in patients with breast cancer were analyzed by χ^2 test; and the relation between polymorphisms and the efficacy of chemotherapy for breast cancer was assessed by logistic regression.

Results: There was negative correlation between p73 polymorphisms and several clinicopathological characteristics, including age, tumor size, menopausal status, TNM classification, pathological type, axillary lymph node metastasis, estrogen receptor, progesterone receptor, human epidermal growth factor receptor 2, and p53($P>0.05$). The frequency of GC/GC genotype in patients with "triple negative" breast cancer (estrogen receptor -negative, progesterone receptor-negative, and human epidermal growth factor receptor 2-negative) was higher than that of patients with non-triple negative breast cancer (78.9% vs 57.6%, $\chi^2=5.741$, $P=0.017$). P73 polymorphism was negatively correlated with chemosensitivity for anthracycline-based chemotherapy ($P>0.05$).

Conclusion: P73 G4C14-A4T14 polymorphisms are positively correlated with triple negative breast cancer, and the patients with breast cancer who carry GC/GC genotype may have bad prognosis.

Keywords: triple negative breast cancer p73 gene polymorphism chemosensitivity

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