

论著

胃癌和癌旁组织中PTTG和FHIT表达相关性及其与肿瘤浸润、转移的关系

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摘要 目的: 研究胃癌及其癌旁组织中垂体肿瘤转化基因(PTTG)和脆性组氨酸三联体(FHIT)表达水平及其相关性。方法: 49例胃癌手术切除标本和20例癌旁组织常规制作石蜡包埋切片, PTTG和FHIT染色方法均为SP免疫组化法。结果: 胃癌组织PTTG表达阳性率及其评分明显高于癌旁组织($P < 0.05$, $P < 0.01$), 但FHIT则明显低于癌旁组织($P < 0.05$, $P < 0.01$), PTTG阳性和FHIT阴性表达的癌旁组织均呈重度不典型增生。浸润深度 T_1 - T_2 和无远处转移病例PTTG表达阳性率及其评分明显高于浸润深度 T_3 - T_4 和远处转移病例($P < 0.05$, $P < 0.01$); 浸润深度 T_1 - T_2 、无区域淋巴结转移、第1站淋巴结转移和无远处转移病例FHIT表达阳性率及其评分明显高于浸润深度 T_3 - T_4 、区域淋巴结转移、第3站淋巴结转移及远处转移病例($P < 0.05$, $P < 0.01$)。PTTG和FHIT表达评分之间存在明显负相关($r = -0.36$, $P < 0.01$)。结论: PTTG和FHIT表达变化与胃癌发生、进展、浸润潜力、转移有关, PTTG和FHIT表达明显不一致性可能是胃癌发生机制之一。检测胃良性病变组织中PTTG和FHIT表达水平对预防和早期发现胃癌可能有重要临床价值。

关键词 [胃肿瘤; 基因; 垂体肿瘤转化; 基因; 脆性组氨酸三联体; 肿瘤浸润; 肿瘤转移](#)

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Study on the expression of pituitary tumor-transforming (PTTG) and fragile histidine triad (FHIT) in gastric cancer and pericancerous tissues

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Abstract

AIM: To study on the expressive levels of PTTG and FHIT and detect their clinicopathological significances in gastric cancer and pericancerous tissues.
METHODS: Immunohistochemical method was used on routinely paraffin-embedded sections of 49 cases with gastric cancer and 20 subjects with pericancerous tissues. RESULTS: The positive rate and score of PTTG in gastric cancer were significantly higher than those in pericancerous tissues ($P < 0.05$, $P < 0.01$), but those of FHIT were opposite ($P < 0.05$, $P < 0.01$), the positive cases of PTTG and negative subjects of FHIT showed severely-atypical hyperplasia. The positive rate and score of PTTG were significantly lower in the cases of infiltrating depth T_1 - T_2 and without-metastasis of distant organs than those in the subjects of infiltrating depth T_3 - T_4 and with-metastasis of distant organs ($P < 0.05$, $P < 0.01$). The positive rate and score of FHIT were significantly higher in the cases of infiltrating depth T_1 - T_2 , without-metastasis of lymphnodes, with-metastasis of the first site lymphnodes, and without metastasis of distant organs than those in the subjects of infiltrating depth T_3 - T_4 , with-metastasis of lymphnodes, with-metastasis of the third site lymphnodes, and with-metastasis of distant organs ($P < 0.05$, $P < 0.01$). The significantly negative correlation was found between the score of PTTG and FHIT in gastric cancer tissues ($r = -0.36$, $P < 0.01$). CONCLUSION: The expression of PTTG and FHIT might be important biological markers for reflecting the carcinogenesis, progression, invasive potential, metastatic status and prognosis of gastric cancer. The assays of PTTG and FHIT in benign lesions might have clinical values for the prevention and early-stage finding of gastric cancer.

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