

HS-AFP 对肝癌病情及TACE 术疗效预后判断的价值

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The Value of HS-AFP for Judgement of Severity and Post-TACE Prognosis in Hepatocellular Carcinoma

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摘要 目的 探讨肝癌特异性甲胎蛋白 (HS-AFP) 对肝癌病情、肝动脉化疗栓塞术 (TACE) 术后疗效及预后判断的临床价值。方法 HS-AFP采用聚丙烯酰胺凝胶电泳方法 (PAGE) 结合免疫印迹技术 (Western blot) 分离检测。对41例肝癌患者行TACE术前后血清HS-AFP进行动态观察, 分析HS-AFP与肿瘤大小、分期以及TACE术后疗效及生存期之间的关系。结果 TACE术前, HS-AFP阳性率在肿瘤 $\geq 5\text{cm}$ 组高于肿瘤 $< 5\text{cm}$ 组, 临床分期II a+b组高于I期组。TACE术治疗有效率在HS-AFP阳性组为4. 5% 低于阴性组73. 7% ($P < 0. 001$)。单因素分析及多因素分析均显示术后HS-AFP与肝癌患者预后有关。结论 HS-AFP有助于术前肝癌的病情判断, 对TACE术后肝癌预后判断具有重要价值。

关键词: 甲胎蛋白 异质体 肝细胞肝癌 预后

Abstract: Objective To investigate the clinical value of hepatoma-specific alpha-fetoprotein (HS-AFP) for judgment of severity, treatment response and prognosis in patients with hepatocellular carcinoma (HCC) undergoing transcatheter arterial chemoembolization. (TACE). Methods HS-AFP was separated with PAGE and determined with Western blot. HS-AFP was measured in 41 cases with HCC before and after TACE. The correlations were analyzed between HS-AFP and tumor size, stage, response to treatment as well as survival time. Results The positive rate of HS-AFP was higher in HCC cases with tumor sizes larger than 5 cm than those with tumor size less than 5 cm, and higher in the cases at stage II a + b than those at stage I. The response rate to TACE was lower in cases with positive HS-AFP than those with negative HS-AFP after operation (4. 5 % vs. 73. 6 %, $P < 0. 001$). Both univariate and multivariate analysis revealed that HS-AFP after TACE was related to the prognosis. Conclusion HS-AFP is useful to judgment of severity of HCC before TACE. Particularly, it is valuable for judgment of prognosis after TACE.

Key words: Alpha-fetoprotein (AFP) Heterogeneity Hepatocellular Carcinoma Prognosis

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