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非小细胞肺癌化疗前后外周血LUNX mRNA检测的临床意义

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Clinical Significance to Detect Lunx mRNA of Pre- and Post- chemotherapy in Peripheral Blood of Non-small Cell Lung Cancer Patients

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摘要 目的

通过检测中晚期非小细胞肺癌(NSCLC)患者外周血中循环癌细胞的Lunx mRNA表达情况,探讨全身化疗对外周血循环癌细胞的影响。

方法

NSCLC组为63例中晚期NSCLC患者,化疗方案为含铂类的两药联合方案,化疗2周期后评价客观疗效。分别在化疗前、化疗1周期后、化疗2周期后抽取外周血静脉血。肺部良性疾病患者10例和健康志愿者10例为对照组。用RT PCR法检测外周血中循环癌细胞Lunx mRNA的表达情况。

结果

NSCLC组化疗前外周血Lunx mRNA阳性表达率为 73.02% ,而肺部良性疾病患者和健康志愿者外周血均没有表达。外周血循环癌细胞Lunx mRNA表达情况与年龄、性别、不同病理类型、行为状态评分的关系不密切,而与临床分期密切相关(P=0.04)。化疗完成2周期的60例中CR 0例,PR 21例、SD 23例、PD16例。外周血Lunx mRNA阳性率在化疗1周期和2周期后均为 38.33% ,较化疗前显著降低(P=0.00)。Lunx mRNA阳性率在PR、SD、PD三个亚组分别为 23.81%、26.09% 、75.00% ,PR组和SD组的阳性率较化疗前显著降低(P=0.01 、P=0.00),而PD组与化疗前

相比差异无统计学意义 (P = 0.65)。

结论

Lunx mRNA是检测NSCLC外周血微转移的良好分子标志物。患者临床分期越晚,外周血循环癌细胞阳性率越高。全身化疗可显著降低有效或稳定患者的外周血循环癌细胞检出率,对病情进展的患者则没有作用,而且这种变化在化疗初始阶段即已出现,可帮助我们提前判断化疗对病情的控制情况,从而制定更合理的治疗计划。

关键词: 肺肿瘤 血液 循环癌细胞 肺特异性蛋白X 化疗

Abstract: Objective

To detect the expression of Lunx mRNA in circulating tumor cells in peripheral blood of no small cell lung cancer (NSCLC) patients with metaphase and advanced stage and to investigate the effect and clinical significance of chemotherapy on circulating tumor cells.

Methods

Sixty three patients with NSCLC of metaphase and advanced stage were treated with platinum based chemotherapy. Lunx mRNA of their peripheral blood prior and posterior to the first course and the second course chemotherapy was detected and the curative effect after 2 cycles of chemotherapy was evaluated. Peripheral blood of 10 patients with pulmonary benign lesions and 10 healthy volunteers was used as control. Results

Nesuits

The positive rate of Lunx mRNA in NSCLC patients was 73.02% before chemotherapy, and in the control

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group was zero. The expression of Lunx mRNA had no close correlation with age, gender, pathological types and performance status score, and was closely related to clinical stages (P=0.05). After two cycles of chemotherapy, the patients reached CR, PR, SD and PD were 0,21,23,16 respectively. The positive rates of NSCLC patients after first and second cycles of chemotherapy were both 38.33%, which was significant decreased compared with those before therapy (P=0.00). The expression rates of Lunx mRNA in patients with PR, SD and PD were 23.81%, 26.09% and 75.00% respectively. The positive rates of PR and SD were significantly decreased compared with that prior to therapy (P=0.01 and P=0.00, respectively). But the positive rates of PD was similar to that of prior treatment (P=0.65).

Conclusion

Lunx mRNA was a favourable tumor marker to predict micrometastases in NSCLC patients. Lunx mRNA expression in peripheral blood was highly correlated with clinical stage of NSCLC patients. The positive rate of circulating tumor cells in peripheral blood was markedly decreased in patients with PR or SD, rather than that with PD. The descent of positive rate was not a course depended. It suggests that the detection of Lunx mRNA in peripheral blood should be able to optimize therapeutic strategies.

Key words. Lung Neoplasms Blood Circulating tumor cells Lunx Chemotherapy

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