血清VEGF-C和CA125联合检测对卵巢癌淋巴结转移的预测价值

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Serum VEGF-C Combined with CA125 Assay for Detecting Lymph Node Metastasis of Ovarian Cancer

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摘要

目的
探讨卵巢癌患者血清VEGF-C（血管内皮生长因子C）及CA125（癌胚抗原125）水平与卵巢癌腹膜后淋巴结转移之间的相关性。旨在发现预测上皮性卵巢癌腹膜后淋巴结转移的血清学指标。方法上皮性卵巢癌患者治疗前采用酶联免疫吸附测定法（enzyme linked immunosorbent assay，ELISA）检测血清VEGF-C水平；采用电化学发光法（electrochemiminescence）检测血清CA125水平。卵巢癌行腹膜后淋巴结清扫术患者66例为实验组，卵巢良性肿瘤53例为对照组。结果血清CA125与VEGF-C水平之间呈正相关（$r=0.36$，$P<0.05$）；卵巢癌患者血清CA125水平明显高于良性对照组（$P<0.01$），VEGF-C水平明显高于良性对照组（$P<0.05$）；血清CA125≤756 ku/L组腹膜后淋巴结转移率（32.4%）低于CA125>756 ku/L组（59.4%）（$P=0.028$）；上皮性卵巢癌患者初诊时血清VEGF-C≤2 400 pg/ml组腹膜后淋巴结转移率（34.37%）低于VEGF-C>2 400 pg/ml组（55.9%），但差异无统计学意义（$P=0.079$）；上皮性卵巢癌患者初诊时血清VEGF-C≤2 400 pg/ml且CA125≤756 ku/L组18例，腹膜后淋巴结转移率27.78%。血清VEGF-C>2 400 pg/ml且CA125>756 ku/L组18例，腹膜后淋巴结转移率77.78%,两组比较差异有统计学意义（$P=0.022$）。结论血清CA125水平可以作为预测卵巢癌腹膜后淋巴结转移的参考指标；血清VEFG-C水平联合CA125水平检测能更好地预测卵巢癌腹膜后淋巴结转移。

关键词： 血管内皮生长因子C　癌胚抗原125　血清　卵巢肿瘤　淋巴结转移

Abstract：

Objective
To investigate the correlation between serum VEGF-C, CA125 level and retroperitoneal lymph node metastasis of ovarian cancer patients. Aiming at finding the serological indicator which can predict retroperitoneal lymph node metastasis of ovarian epithelial cancer. MethodsBefore the treatment, ovarian epithelial cancer patients' serum VEGF-C and CA125 level were tested by ELISA and electrochemiluminescence respectively. Experimental group consisted of 66 cases of ovarian cancer patients who had accepted the retroperitoneal lymph node cleaning surgery, and the control group were 53 cases of benign ovarian tumor patients.
ResultsPositive correlation was found between serum CA125 and VEGF-C level ($r=0.36$，$P<0.05$). Both serum levels of CA125 and VEGF-C in ovarian cancer patients were significantly higher than those in patients with benign ovarian tumor（$P<0.01$ and $P<0.05$, respectively）；
serum CA125≤756 ku/L group, retroperitoneal lymph node metastasis rate（32.4%）was less than（59.4%）（$P=0.028$） of CA125>756 ku/L group.
At the initial diagnosis, the rate（34.37%）of retroperitoneal lymph node metastasis of ovarian

epithelial cancer patients with serum VEGF-C≤2 400 pg/ml was less than that （55.9%） of patients with serum VEGF-C>2 400 pg/ml，but the difference was not statistically significant （P=0.079）.As for ovarian epithelial cancer patients, there were 18 cases in serum VEGF-C≤2400pg/ml and CA125≤756 group, and the retroperitoneal lymph node metastasis rate was 27.78% at the initial diagnosis. meanwhile, there were also 18 cases in serum VEGF-C>2400pg/ml and CA125>756 group, but the retroperitoneal lymph node metastasis rate was 77.78%, the difference was statistically significant （P=0.022）.ConclusionThe serum level of CA125 might play as the reference indicator for the prediction of retroperitoneal lymph node metastasis in patients with ovarian cancer. Combination detection of serum CA125 and VEGF-C will do better in predicting retroperitoneal lymph node metastasis of ovarian cancer.

Key words： Vascular endothelial growth factor-c（VEGF-C） CA125 Serum Ovarian cancer Lymph node metastasis

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