# Focus on the frequencies of serological HLA antigens in 4,094 Japanese people

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#### **Abstract**

Between 1987 and 2005 we performed serological HLA typing in 4,094 Japanese people to evaluate the frequencies of HLA antigens among cancer patients, non-cancer patients and normal subjects. Among these cancer patients compared with non-cancer and normal patients, there were significantly lower frequencies for HLA-24, -A33, -B35, -B44, -DR8, and -DR9, but there was only one significantly lower frequency for HLA-DR8, even after the Bonferroni correction. In cases of gastric cancer, there was a significantly lower frequency for HLA-A33 and -B44 than among non-cancer subjects, even after the Bonferroni correction. In cases of esophageal cancer, significantly lower frequencies for HLA-A33, -B44, -DR6, -DR8, and -DQ4 were found. In cases of hepatoma, the frequency of HLA-DQ3 was significantly lower. In lung cancer, HLA-DR8 and DQ4, and in breast cancer, HLA-Cw3, -DR8, and -DR9 were also significantly lower after the Bonferroni correction. The data demonstrated here shows that there may be an association between different cancers and different antigens. The frequencies of HLA-A33, -B44, -Cw3, -DR6, -DR8, -DR9 and -DQ4 antigens were lower in total; therefore, these antigens may act as defensive factors of carcinogenesis.

Key Words: Serological HLA typing, cancer, HLA-DR8, Frequency of HLA antigens, Japanese people

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# Introduction

Human leukocyte antigens (HLA) are glycoproteins that are present on the surface membranes of nearly every cell in the body and are on chromosome number six. Their main function is to help the immune system defend against invaders such as bacteria, viruses, and parasites as well as against cancers. In cases of cancers, however, many reports that evaluated the serological or DNA-typing HLA antigens failed to confirm that the HLA antigens are responsive to cancers. We previously reported that based on a study of 3,219 Japanese individuals that cancer subjects showed a significantly lower frequency of HLA- A33, -B44, and -DR9 than non-cancer subjects<sup>1)</sup>.

In this study, we re-examined serological HLA typing to clarify the association between cancer risk and HLA antigens in Japanese people. To our knowledge, this is

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the largest study in terms of numbers that has used serological HLA typing.

# **Materials and Methods**

# **Patients**

The subjects consisted of 4,094 Japanese individuals (2,897 males and 1,197 females). Among them, 3,651 epithelial cancers, excluding non-epithelial malignant diseases, were confirmed pathologically by means of resected or biopsied specimens. These included gastric cancer (n=2027), esophageal cancer (n=247), colorectal cancer (n=448), hepatoma (n=133), gall bladder and common bile duct cancer (n=23), pancreatic cancer (n=27), lung cancer (n=200), breast cancer (n=135), other cancers (n=21), and double cancers (n=236). It also included 318 who had benign diseases and 125 normal control subjects.

Blood samples were broadly collected throughout Japan from 1987 to 2005 at hospitals of the members of the Japanese Society of Strategies for Cancer Research and Therapy.

# **HLA typing**

HLA antigens were serologically tested using the NIH standard microlymphocytotoxicity method for HLA-A, B, C, DR and DQ antigens. Eight HLA-A antigens, 20 HLA-B antigens, 5 HLA-C antigens, 12 HLA-DR antigens, and 4 HLA-DQ antigens were examined.

Heparinized peripheral blood samples were obtained from a number of research groups, transferred to a single reference laboratory, and centrifuged for 5 min at 2000 RPM. After collecting the buffy coat, B lymphocytes were separated from T lymphocytes using the nylon wool adherence method and HLA class I and II Dynabeads

(Dynal AS, Oslo, Norway). Peripheral blood lymphocytes were separated by layering them onto Lymphoprep (Nycomed, Oslo, Norway), followed by centrifugation. For class I typing, cryopreserved peripheral blood lymphocytes were subjected to a complement-dependent microcytotoxicity assay using antisera to HLA-A, -B and -C locus antigens. Class II typing was carried out on cells enriched for class II-positive lymphocytes using magnetic beads coated with a class II monoclonal antibody (Dynal). These cells were subjected to a complement-dependent microcytotoxicity assay using antisera to HLA-DR and -DQ antigens.

Table Frequency of HLA-A antigens in Japanese patients with gastric, esophageal, colorectal, hepatobilial, pancreatic, lung, breast, others, double, and non-epithelial cancer and in normal healthy subjects.

		Gastric car	ncer		Esophageal cance	er		Colorec	tal canc	er		He	patoma		Gall bladd	er and com	mon bile du	uct cacner		Pacreatic	cancer	r
a b				283 247			532 448				149 133				34 23				63 57			
D C				566			1064				298				68				126			
d	4054			494			896				266				46				114			
Antigen	N0.	% pVal	ue correct p value		% p Value	correct p value	N0.	%	p Value	correct p value	N0.	%	p Value	correct p value	N0.	%	p Value	correct p value	N0.	% р	Value C	correct p value
A1 C	19	0.42%	p	2	0.35%		3	0.28%			1	0.34%			1	1.47%			1	0.79%		
a				114	0.40% 20.14%		3 214	0.33%			60	0.38%			1 15	2.17% 22.06%			1 22	0.88% 17.46%		
A2 c		20.52%		104	21.05%		186	20.76%			54	20.30%			11	23.91%			22	19.30%		
A3 d	15			0	0.00%		4	0.38%			2 2	0.67%			0	0.00%			1	0.79% 0.88%		
A11 °				65	11.48%		68	6.39%			22	7.38%			6	8.82%			9	7.14%		
7'' d			15	50	10.12%		50	5.58%			18	6.77%			3	6.52%			9	7.89%		
A24 C	1362	30.43% B:p=0.0 C:p=0.0	15, 14	165	29.15%		310	29.14%			l .	26.85%			16	23.53%				30.16%		
d	1228	30.29% B:p=0.0	21	143	28.95%		264	29.46%			71	26.69%			10	21.74%			33	28.95%		
С	472	10.55%		61	10.78%		123	11.56%			36	12.08%			11	16.18%			15	11.90%		
A26																						
d	432	10.66%		58	11.74%		110	12.28%			33	12.41%			4	8.70%			13	11.40%		
													A:p=0.01,									
A31	373	8.33%		48	8.48%		95	8.93%			37		B:p=0.027, C:P=0.009		3	4.41%			10	7.94%		
d	338	8.34%		43	8.70%		79	8.82%			33	12.41%	A:p=0.003		3	6.52%			10	8.77%		
			01										A:p=0.011, B:p=0.034									
A33 C	312	C:p=0.0	01, 08 B:p<0.05		5.83% B:p=0.002, C:p=0.013	B:p<0.05	83	7.80%			22	7.38%			7	10.29%			11	8.73%		
d	28	6.93% B:p=0.0 13.61%	01 B:p<0.05	5 29 78	5.87% B:p=0.004 13.78%	B:p<0.05	71 164	7.92% 15.41%			19 38	7.14% 12.75%			6 9	13.04% 13.24%			10 19	8.77% 15.08%		
A blank d		13.44%		65	13.16%		129	14.40%			35	13.16%			8	17.39%			15	13.16%		
C	229	5.12%		31	5.48%		59	5.55%			13	4.36%			4	5.88%			3	2.38%		
B/ d	202	4.98%		26	5.26%		49	5.47%			- 11	4.14%			1	2.17%			3	2.63%		
B13 c				3	0.53% A:p=0.018 0.61% A:p=0.024		9	0.85%	A:p=0.022		5	1.68%			1	1.47% 2.17%			4	3.17% B:p 3.51% B:p		
R17 C	2	0.49%	-1	1	0.18%		5	0.47%			i	0.34%			i	1.47%			1	0.79%	-0.021	
d d	_			1	0.20%		5	0.56%			1	0.38%			0	0.00%			1	0.88%		
B27 C					0.00%		2	0.19%			1	0.34%			1	1.47%			1	0.79%		
d			100	0.7	0.00%		1	0.11%			1	0.38%			1 4	2.17%			1	0.88%		
B35 ,	328		123	37 34	6.54% C:p=0.045 6.88%		79 71	7.42%			23	7.72% 7.89%				5.88% 6.52%			12 10	9.52%		
d					0.88%			7.92%			21	0.67%			3	1.47%				8.77% 0.79%		
B37 d	13			4	0.71%		3	0.28%			2 2	0.67%			1	2.17%			1	0.79%		
В39 С	173	3.87%		26	4.59%		38	3.57%			6	2.01%	C:p=0.046		3	4.41%			3	2.38%		
a		3.72% B·n=0.0	01	23	4.66% B:n<0.001		31	3.46%			5	1.88%			3	6.52%			3	2.63%		
B44	28	C:p=0.0	11 B:p<0.05	5 26	4.59% B:p<0.001, C:p=0.002	B:p<0.05	95	8.93%	A:p=0.042		26	8.72%			5	7.35%			14	11.11% A:p	=0.03	
d	26	6.44% B:p=0.0 C:p=0.0	01, 11 B:p<0.05	<mark>5</mark> 21	4.25% B:p<0.001	B:p<0.05	81	9.04%	A:p=0.04		24	9.02%			5	10.87%			12	10.53%		
B46 °,		4.74%		29	5.12%		40	3.76%	A:p=0.045		7	2.35%	A:p=0.014		3	4.41%			2	1.59% A:p	=0.04	
d d	199	4.91% B:p=0.0	35	26	5.26%		32	3.57%	A:p=0.034		6	2.26%	A:p=0.015 A:p=0.031,		3	6.52%			2	1.75%		
B48 <sup>C</sup>	115	2.57%		13	2.30%		21	1.97%			2	0.67%	B:p=0.024,		1	1.47%			7	5.56%		
	10			12	2.43%		17	1.90%			2		C:p=0.019		0	0.00%			6	5.26%		
d DE1 C			18	44	2.43% 7.77%		91	8.55%			33		B:p=0.038 A:p=0.009		6	0.00% 8.82%			8	6.35%		
B51 c	374	9.23% A:p=0.0	21	41	8.30%		72	8.04%			28	10.53%	A:p=0.019		4	8.70%			8	7.02%		
B52 C	53	12.00% B:p=0.0 C:p=0.0	18, 4	54	9.54%		115	10.81%			l .	10.40%			8	11.76%			16	12.70%		
d	478	11.79% B:p=0.0	3	45	9.11%		95	10.60%			27	10.15%	0.000		6	13.04%			14	12.28%		
B54 <sup>c</sup>	342	7.64%		46	8.13%		66	6.20%			34	11.41%	A:p=0.028, C:p=0.035		3	4.41%			10	7.94%		
d				41	8.30%		59	6.58%			31	11.65%	A:p=0.025		1	2.17%			10	8.77%		
B55 c	94			19 16	3.36% 3.24%		29 26	2.73% 2.90%			5 4	1.68% 1.50%			2	2.94% 2.17%			1	0.79% 0.88%		
B56 C	3	0.78%		4	0.71%		15	1.41%			3	1.01%			Ó	0.00%			Ö	0.00%		
d	3	0.76% 1.27%		3 4	0.61% 0.71%		12 11	1.34%			3	1.13% 0.34%			0	0.00%			0	0.00% 0.79%		
B59 d	5			3	0.61%		9	1.00%			6		B:p=0.045		ő	0.00%			0	0.00%		
B60 C	260	5.81%		45	7.95% B:p=0.021, C:p=0.011		61	5.73%			18	6.04%			3	4.41%			11	8.73%		
B00 d	234	5.77%		39	7.89% B:p=0.029		49	5.47%			16	6.02%			3	6.52%			9	7.89%		
																				A:p	=0.014,	
B61 <sup>C</sup>	42	9.41%		61	10.78%		97	9.12%			41	13.76%			7	10.29%			6	4.76% B:p C:p	=0.04, =0.027	
d	379			54	10.93%		81	9.04%			37	13.91%			2	4.35%			6	5.26% A:p		
B62 d				51 44	9.01% 8.91%		84 73	7.89% 8.15%			17 17	5.70% 6.39%			7 4	10.29% 8.70%			12 11	9.52% 9.65%		
u C	4			5	0.88%		3	0.28%			3	1.01%			0	0.00%			1	0.79%		
	1	0.048		4	0.81%		1		A:p=0.044,			0.00%			0	0.00%			1	0.88%		
B67 d	3	0.91%																				
B67		10.30%		63	11.13%		141	13.25%	3:p=0.034		26	8.72%			8	11.76%			12	9.52%		

# Statistical analysis

All of the statistical analyses that follows was carried out using SPSS software, version 13 (SPSS Inc., Chicago, USA.). The chi-square test with the Bonferroni correction was used to compare the prevalence of the incidence of HLA antigens; Fisher's exact test was used if the number was less than 5. The odds ratio (relative risk (RR)) and 95% confidence intervals (CI) were calculated. Results were considered significant when the value was less than 0.05.

## Results

The most frequent specificities were HLA-DQ1

(phenotype frequency = 33.3%) followed by HLA-DQ3 (29.7%), HLA-A24 (29.6%), HLA-Cw3 (23.1%), HLA-A2 (20.5%), HLA-DR4 (19.3%) and HLA-DR2 (17.4%). Among non-cancer, normal subjects and cancer patients, there were significantly lower frequencies for HLA-24, -A33, -B35, -B44, -DR8, and -DR9, but there was only one significantly lower frequency for HLA-DR8 even after the Bonferroni correction.

In patients with gastric cancer, there was a significantly lower frequency for HLA-A33 and -B44 than for non-cancer subjects even after the Bonferroni correction. In the case of esophageal cancer, significantly lower frequencies for HLA-A33, -B44, -DR6, -DR8, and -DQ4 were found. In cases of hepatoma, the frequency

Table continued

		Lung cancer					Others					Doubl	e cance	r		Normal healthy						
a b	: T	229 200				150 135			93 21				236				427				140	
c d	,	458 400				300 270			186 42				472				854				280	
Antigen		N0.	%	p Value	correct p value	N0.	% p Value	correct p value	N0.	%	p Value	correct p value	N0.	%	p Value	correct p value	N0.	%	p Value	correct p value	N0.	%
A1 G		2 2	0.44% 0.50%			3	1.00% 1.11%		0	0.00%			1	0.21%			5	0.59%			0	0.00
Δ2 C	,	92	20.09%			64	21.33%		36	19.35%												
A3 G		81 0	20.25% 0.00%			2	21.11% 0.67%		11 0	26.19% 0.00%			80		B:p=0.037		180	21.08%			60	21.43
^3 d	i l	0 38	0.00%			2 28	0.74% 9.33%		0 18	0.00% 9.68%			0	0.00%			5	0.59%			1	0.36
A11 d		32	8.00%			26	9.63%		1	2.38%			54	11.44%			76	8.90%			30	10.71
A24 C	,		28.82%			96	32.00% B:p=0.045		59	31.72%												
d	1	114	28.50%			85	31.48% A:p=0.013,		12	28.57%			148	31.36%	B:p=0.042		233	27.28%			80	28.57
A26	,	53	11.57%			22	7.33% B:p=0.032,		17	9.14%												
A20 d	,	47	11.75%			18	C:p=0.016 A:p=0.007, B:p=0.016		4	9.52%			45	9.53%			98	11.48%			37	13.2
	'	47	11.75%			10			1	3.32 N			45	3.33/8			30	11.40/			"	10.2
	,	36	7.86%			14	4.67% B:p=0.03, C:p=0.48		19	10.22%												
A31	.	32	0.000			10			4	0.539			39	8.26%			71	8.31%			18	6.4
d	'		8.00%			12	4.44% B:p=0.027			9.52%			39	8.20%			/'	8.31%			18	0.4
A33	١ ا	32		B:p=0.043	3	24	8.00%		11	5.91%												
, , , c		25 73	6.25% 15.94%			21 47	7.78% 15.67%		2 26	4.76% 13.98%			35	7.42%			87	10.19%	A:p=0.029		17	6.0
A blank d	j	67	16.75%			46	17.04%		8	19.05%			70	14.83%			99	11.59%			37	13.2
В7		15 13	3.28%	C:p=0.05		13 11	4.33%		14 4	7.53% 9.52%			30	6.36%			46	5.39%			17	6.0
D12 C	,	5	1.09%			3	1.00%		0	0.00%	A:p=0.044											
B17 C	- 1	4	1.00%			3 2	1.11% 0.67%		0	0.00% 0.54%			3	0.64%	A:p=0.044		6	0.70%	A:p=0.014		7	2.5
BI/	j	3	0.75%	D-n=0.010	,	2	0.74%		0	0.00%			0	0.00%			2	0.23%			7	2.5
B27 C	,	3	0.66%	B:p=0.018 C:p=0.006	), 3	0	0.00%		0	0.00%												
d		3 30	0.75% 6.55%	B:p=0.032	2	0 22	0.00% 7.33%		0 13	0.00% 6.99%			0	0.00%			1	0.12%			0	0.0
B35		28	7.00%			17	6.30%		7	16.67%			27	5.72%	A:p=0.023 B:p=0.025		77	9.02%			28	10.0
B37		2	0.44%			4	1.33%		1	0.54%					D.p-0.023							
0		2 23	0.50% 5.02%			4 8	1.48% 2.67%		0 12	0.00% 6.45%			1	0.21%			5	0.59%				0.0
B39 d		20	5.00%			6	2.22%		2	4.76%			24	5.08%			38	4.45%			13	4.6
B44	,	32	6.99%			23	7.67%		9	4.84%	B:p=0.032											
d	1	26	6.50%			19	7.04%		1	2.38%			33	6.99%			81	9.48%	A:p=0.024		15	5.3
B46 d		18 15	3.93% 3.75%			8 8	2.67% A:p=0.025		8 2	4.30% 4.76%			17	3.60%			28	2 200	A.==0.010		18	6.4
ď	'						2.96% A:p=0.05						''	3.00%			20	3.20%	A:p=0.018		10	0.4
B48 C	٠	11	2.40%			6	2.00%		1	0.54%	C:p=0.047											
d		9 32	2.25%			6 25	2.22%		0 18	0.00% 9.68%			9	1.91%			25	2.93%			9	3.2
B51 d		25	6.25%			25 25	8.33% A:p=0.041 9.26%		4	9.52%			48	10.17%			75	8.78%			15	5.3
B52 C	,	59	12.88%	B:p=0.036	i	41	13.67% B:p=0.026, C:p=0.05		21	11.29%												
d	i	51	12.75%			36	13.33% B:p=0.047		3	7.14%			62	13.14%	B:p=0.024		80	9.37%			33	11.3
B54 C	,	26	5.68%			22	7.33%		10	5.38%												
DEE 0		23 12	5.75% 2.62%			19 6	7.04% 2.00%		3 4	7.14%			27	5.72%			70	8.20%			18	6.4
Doo d	i	9	2.25%			6	2.22%		1	2.38%			11	2.33%			15	1.76%			7	2.5
B56 d		8 7	1.75% 1.75%			4	1.33% 1.48%		5 1	2.69%	B:p=0.046		6	1.27%			7	0.82%			4	1.4
B59 d		5 4	1.09%			4	1.33% 1.48%		1 0	0.54%			4	0.85%			13	1.52%			4	1.4
		35	7.64%	B:p=0.049 C:p=0.03	),	14	4.67%		8	4.30%			1	0.00%				1.02/0				1
B60 c		33	8.25%	C:p=0.03 B:p=0.021		13	4.81%		1	2.38%			28	5.93%			43	5.04%			13	4.6
De1 C		46	10.04%			32	10.67%		18	9.68%												
D01																						
Don d		43 49	10.75% 10.70%			31 24	11.48% 8.00%		2 17	4.76% 9.14%			46	9.75%	A:p=0.016		87	10.19%			34	12.1
B62 d	1	43	10.75%			23	8.52%		3	7.14%			37	7.84%			68	7.96%			23	8.2
B67		3	0.66%			3	1.00%		2	1.08%			4	0.050			7	0.00				1.0
	·	3 41	0.75% 8.95%			3 36	1.11%		1 23	2.38% 12.37%			4	0.85%			′	0.82%			3	1.0
3 blank d	_	36	9.00%				11.11%		7	16.67%			55	11.65%			80	9.37%			12	4.2

of HLA-DQ3 was significantly lower. In cases of lung cancer, the frequencies of HLA-DR8 and DQ4 were also significantly lower after the Bonferroni correction. The same was true in cases of breast cancer for frequencies of HLA-Cw3, -DR8, and -DR9.

## **Discussion**

It has been proposed that disease-associated imbalances in HLA allele frequencies between diseased and healthy populations may signify efficient immune responses<sup>2)</sup>. It has also been well known that HLA antigen expression loss in malignant cells has been demonstrated by immunohistochemistry. Abnormally decreased HLA antigen expression may not permit the immune system to avoid or survive an attack, and consequently the clinical course of a disease would be not so good.

Wank et al. reported an association between squamous cell carcinoma of the cervix for women and HLA-DQw3<sup>3</sup>). Cancer diseases whose carcinogenesis may be

induced by viral infections such as squamous cell carcinoma of the cervix for women or head and neck carcinoma have been associated with HLA antigen<sup>4, 5)</sup>, but others failed to have been significantly associated with HLA antigens.

In the case of gastric cancer, Lee et al. reported that the frequency of HLA-DQB1\*0301 in patients with gastric adenocarcinoma was higher than in controls but were not associated with colorectal or pancreatic adenocarcinoma<sup>6</sup>. Ohmori et al. reported that after the Bonferroni correction the difference in frequencies of HLA alleles and haplotypes between gastric cancer patients and controls was of no statistical significance<sup>7</sup>.

We reported that among cancer patients the frequencies of HLA-A33, -B44, and -DR9 were lower, but the hypothesis of overdominant selection ("heterozygote advantage") at MHC has more correlation with carcinogenesis<sup>2)</sup>. It has been suggested that the hypothetical advantage of heterozygosity at HLA with respect to increased resistance to cancer may be responsible, at least

#### Table continued

	Gastric cancer	Esophageal cancer	Colorectal cancer	Hepatoma	Gall bladder and common bile duct cacner	Pacreatic cancer
a b	2238 2027	283 247	532 448	149 133	34 23	63 57
С	4476	566	1064	298	68	126
Antigen	NO. % p Value correct			NO. % p Value correct p		N0. % p Value correct p
Cw1 C	740 16.53% p value	98 17.31%	164 15.41%	54 18.12%	11 16.18%	16 12.70%
d	686 16.92% 1016 22.70%	88 17.81% 138 24.38%	141 15.74% 238 22.37%	49 18.42% 75 25.17%	9 19.57%	16 14.04% 29 23.02%
Cw3					18 26.47%	
d	913 22.52%	124 25.10%	201 22.43%	65 24.44%	8 17.39%	26 22.81% 0 7.14% B:p=0.038,
Cw4 <sup>c</sup>	186 4.16%	30 5.30%	41 3.85%	14 4.70%	1 1.47%	9 7.14% C:p=0.049
d o c c	172 4.24% 19 0.42% A:p=0.19	24 4.86% 3 0.53%	36 4.02% 4 0.38%	14 5.26% 4 1.34%	1 2.17% 1 1.47%	6 5.26% 2 1.59%
Cw6 d	18 0.44% A:p=0.025	3 0.61%	4 0.45%	4 1.50%	1 2.17%	2 1.75%
c Cw7	523 11.68%	76 13.43%	125 11.75%	A:p=0.02, 22 7.38% B:p=0.017, C:p=0.011	10 14.71%	11 8.73%
d	465 11.47%	65 13.16%	107 11.94%	19 7.14% A:p=0.019, B:p=0.016	6 13.04%	11 9.65%
Cw blank d	1992 44.50% 1800 44.40%	221 39.05% 190 38.46%	492 46.24% 407 45.42%	129 43.29% 115 43.23%	27 39.71% 21 45.65%	59 46.83% 53 46.49%
DR1 c	208 4.65% 190 4.69%	26 4.59% 23 4.66%	52 4.89% 45 5.02%	10 3.36% 8 3.01%	6 8.82% 3 6.52%	3 2.38% 3 2.63%
DR2 C	801 17.90% B:p=0.042	105 18.55%	165 15.51%	47 15.77%	17 25.00% B:p=0.02, C:p=0.029	25 19.84%
d	714 17.61%	93 18.83%	132 14.73%	40 15.04%	11 23.91%	24 21.05%
DR3 c	4 0.09% 4 0.10%	0 0.00%	0 0.00% 0 0.00%	0 0.00% 0 0.00%	0 0.00%	0 0.00% 0 0.00%
DR4 c	889 19.86% 808 19.93%	102 18.02% 84 17.00%	202 18.98% 172 19.20%	70 23.49% C:p=0.044 63 23.68%	8 11.76% 4 8.70% B:p=0.048	22 17.46% 22 19.30%
DR5 <sup>C</sup>	311 6.95%	44 7.77%	69 6.48%	11 3.69%	3 4.41%	8 6.35%
d	282 6.96%	39 7.89%	58 6.47%	10 3.76%	3 6.52%	7 6.14%
DR6 c	581 12.98% B:p=0.034	53 9.36% B:p<0.001, B:p<0.0 C:p=0.001 C:p<0.0	167 15.70%	46 15.44%	11 16.18%	18 14.29%
d	533 13.15%	49 9.92% B:p=0.002 B:p<0.0	143 15.96%	42 15.79%	5 10.87%	15 13.16%
DR7 c	10 0.22% 10 0.25%	1 0.18% 1 0.20%	1 0.09% 1 0.11%	2 0.67% 2 0.75%	0 0.00%	2 1.59% 2 1.75%
c	385 8.60%	A:p=0.001, A:p<0.0 28 4.95% B:p=0.001, B:p<0.0	A:p=0.021,	20 6.71%	4 5.88%	A:p=0.026, 5 3.97% B:p=0.033,
DR8		C:p<0.001 C:p<0.0	A =0.001	A =0.004D		C:p=0.025
d	345 8.51%	24 4.86% A:p=0.001, A:p<0.0	60 6.70% A:p=0.021, B:p=0.031	15 5.64% A:p=0.024B: p=0.045	2 4.35%	3 2.63% A:p=0.006, B:p=0.008
DR9	583 13.03% B:p=0.01, C:P=0.006	87 15.37%	155 14.57%	34 11.41% B:p=0.033, C:p=0.034	8 11.76%	12 9.52% B:p=0.036, C:p=0.038
d	529 13.05% B:p=0.011	75 15.18%	130 14.51%	32 12.03%	7 15.22%	8 7.02% A:p=0.015, B:p=0.005
DR blank c	704 15.73% 639 15.76%	120 21.20% 106 21.46%	181 17.01% 155 17.30%	58 19.46% 54 20.30%	11 16.18% 11 23.91%	31 24.60% 30 26.32%
DQ1 C	1489 33.27%	183 32.33%	344 32.33%	106 35.57%	25 36.76%	43 34.13%
DO3 C	1349 33.28% 12 0.27%	162 32.79% 1 0.18%	287 32.03% 1 0.09% A:p=0.03	94 35.34% 2 0.67%	15 32.61% 0 0.00%	39 34.21% 2 1.59%
DQ2 c	12 0.30%	1 0.20%	1 0.11% A:p=0.044	2 0.75%	0 0.00%	2 1.75%
DQ3 d	1337 29.87% A:p=0.016 1211 29.87% A:p=0.016	166 29.33% A:p=0.023 145 29.35% A:p=0.027	319 29.98% A:p=0.029 270 30.13% A:p=0.038	79 26.51% A:p=0.003 A:p<0.05 69 25.94% A:p=0.002 A:p<0.05	17 25.00% A:p=0.027 12 26.09%	36 28.57% 31 27.19% A:p=0.037
DQ4 c	539 12.04% B:p=0.049	59 10.42% B:p=0.021	131 12.31%	41 13.76% A:p=0.035, C:p=0.04	6 8.82%	10 7.94% B:p=0.034
d	488 12.04% 1099 24.55%	48 9.72% B:p=0.008 B:p<0.0	111 12.39% 269 25.28%	39 14.66% A:p=0.017 70 23.49%	3 6.52% 20 29.41%	10 8.77% 35 27.78%
DQ blank c	994 24.52%	138 27.94%	209 25.28% 227 25.33%	62 23.31%	16 34.78%	32 28.07%

in part, for maintaining the tremendous variety of HLA alleles that exists in the human population<sup>8)</sup>. On the other hand, we also reported that the HLA-Cw3 antigen resulted from subsequent malignancies after gastrectomy in cases of gastric cancer<sup>9)</sup>. The data demonstrated here shows that there may be an association between different cancers and different antigens. The frequencies of HLA-A33, -B44, -Cw3, -DR6, -DR8, -DR9 and -DQ4 antigens were lower in total. Therefore, they may be act as defensive factors of carcinogenesis.

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# Table continued

			ng cancer	r		Brea	st cance			0	thers			Doubl	e cance	r		Non-	-cancer		Normal	healthy
	a b	229 200			150 135				93 21				236				427				140	
	c	458			300				186								854				280	
Antigen	d	400 N0. %	p Value	correct p	270 N0.	%	p Value	correct p	42 N0.	%	p Value	correct	472 N0.	%	p Value	correct p	N0.	%	p Value	correct p	N0.	%
	С	72 15.7:	2%	value	48	16.00%		value	29	15.59%		p value				value				value		
Cw1	d	62 15.50			44	16.30%	A:p=0.008,	A:p<0.05,	8	19.05%			63	13.35%			132	15.46%			47	16.79%
Cw3	С	111 24.2	1%		52	17.33%	B:p=0.003, C:p=0.001	B:p<0.05, C:p<0.05	48	25.81%												
	d	99 24.7	5%		49	10 15%	A:p=0.022, B:p=0.01		11	26.19%			112	23.73%			209	24.47%			70	25.00%
Cw4	с	23 5.0	2%		14	4.67%			9	4.84%												
	d	19 4.7			13	4.81%			2	4.76%			20	4.24%			29	3.40%			12	4.29%
	d d	1 0.2 1 0.2			4	1.33% 1.48%			'	0.54% 0.00%			1	0.21%			5	0.59%			4	1.43%
Cw7	c	54 11.7	9%		31	10.33%			31	16.67%												
	d	49 12.2	5%		26	9.63%			6	14.29%			64	13.56%			103	12.06%			36	12.86%
Cw blank	c d	197 43.0 170 42.5			151 134	50.33% 49.63%			68 15	36.56% 35.71%			212	44.92%			376	44.03%			111	39.64%
	c	16 3.4	9%		16	5.33%			11	5.91%												
	d c	14 3.50 82 17.90			15 58	5.56% 19.33%			3 36	7.14% 19.35%			21	4.45%			39	4.57%			16	5.71%
DRZ	d	72 18.0			52	19.26%			8	19.05%			94	19 92%	B:p=0.017		131	15.34%			50	17.86%
DR3	С	0 0.0	0%		0	0.00%			0	0.00%			"		D.p 0.017							
	d c	0 0.00 81 17.69			0 51	0.00% 17.00%			0 34	0.00%				0.00%			3	0.35%			0	0.00%
DIV4	d	72 18.0			45	16.67%	B:p=0.024,		7	16.67%			89	18.86%			162	18.97%			53	18.93%
DRO	c .	30 6.5			29	9.07%	C:p=0.023		14	7.53%				0.000				E 0.70			40	0.400
	d -	24 6.0			26	9.63%	B:p=0.031		3	7.14%	B:p=0.044		33	6.99%			51	5.97%			18	6.43%
DRO	d	69 15.0° 59 14.7			40 35	12.96%			19	9.52%			58	12.29%			132	15.46%			37	13.21%
	c	1 0.2	2%		1	0.33%			0	0.00%											37	
5117	d	1 0.2	5% A:p=0.009	9.	1	0.37%	A:p=0.001,		0	0.00%			0	0.00%			3	0.35%			3	1.07%
DR8	С	26 5.6	3% B:p=0.014 C:p=0.006	4,	12		B:p=0.002, C:p=0.001	A:p<0.05, C:p<0.05	14	7.53%												
	d	19 4.7	A:p=0.002	2, A:p<0.05, 3 B:p<0.05	10	3.70%	A:p=0.001, B:p=0.002	A:p<0.05	3	7.14%			42	8.90%			80	9.37%			30	10.71%
							A:p=0.011,	B:p<0.05,														
DR9	С	63 13.7	3%		27		B:p=0.001, C:p=0.001	C:p<0.05	26	13.98%												
	d	55 13.7	5%		25		A:p=0.019, B:p=0.002		4	9.52%			64	13.56%			137	16.04%			43	15.36%
DR blank	c d	90 19.6 84 21.0			66 61	22.00% 22.59%			32 10	17.20% 23.81%			71	15.04%			116	13.58%			12	4.29%
וטעו	c	152 33.19			101	33.67%			57	30.65%			157	00.00*				04.000			00	04.000
DO2	d c	132 33.0 0 0.0	0%		90 1	33.33% 0.33%			13 0	30.95% 0.00%				33.26%			296	34.66%			96	34.29%
	d c	0 0.00 133 29.0	0% 4% A:p=0.022	2	1 82	0.37%	A:p=0.007		0 56	0.00%			0	0.00%			3	0.35%			3	1.07%
	d	115 28 7	5% A:n=0.019	9	74		A:p=0.007 A:p=0.009		10		B:p=0.042		143	30.30%			255	29.86%	A:p=0.029		98	35.00%
DQ4	С		B:p<0.001 C:p=0.004	*	31	10.33%			21	11.29%												
	d c	33 8.2 136 29.6	5% B:p<0.001	1 B:p<0.05	27 85	10.00% 28.33%	B:p=0.049		5 52	11.90% 27.96%			53	11.23%			122	14.29%			24	8.57%
DQ blank	d	120 30.0			78	28.89%			14	33.33%			119	25.21%			178	20.84%			59	21.07%

B: vs patients with benign diseases C: vs non cancer

No. of cases included double cancers

a. No. 01 dasses excluded double cancers
b: No. of cases excluded double cancers
c: No. of examined samples included double cancers
d: No. of examined samples excluded double cancers