

# 术前NLR、PLR与三阴性乳腺癌患者预后的相关性分析

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**Title:** Correlation between preoperative NLR,PLR and prognosis of three negative breast cancer patients

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**摘要:** 目的:探讨术前外周血中性粒细胞与淋巴细胞计数比值(NLR)联合血小板与淋巴细胞计数比值(PLR)对三阴性乳腺癌(TNBC)患者预后的评估价值。方法:收集155例TNBC患者,根据NLR水平分为低NLR组和高NLR组,根据PLR水平分为低PLR组和高PLR组,分别分析NLR和PLR与TNBC患者临床特征和预后的关系,采用 $\chi^2$ 检验进行影响患者预后的单因素分析,Kaplan-Meier法绘制生存曲线,Cox回归模型分析影响患者预后的独立危险因素。结果:术前外周血NLR与TNBC患者的淋巴结转移、病理分期及复发转移有关( $P < 0.05$ ),与年龄、肿瘤大小、组织学分级及月经均无关( $P > 0.05$ )。PLR与TNBC患者的临床特征无关( $P > 0.05$ )。单因素分析结果显示:淋巴结转移、病理分期、NLR、复发转移与患者的3年无病进展期相关。Cox回归模型多因素分析结果显示,病理分期、淋巴结转移、NLR是影响TNBC患者预后的独立危险因素。结论:NLR与TNBC患者的病理分期、淋巴结转移及复发转移密切相关,高NLR可作为判断患者预后的独立危险因素;PLR与TNBC患者的临床特征及预后无明显相关性。

**Abstract:** Objective: To investigate the prognostic value of peripheral blood neutrophils/lymphocyte ratio (NLR) and platelet/lymphocyte ratio (PLR) in triple-negative breast cancer (TNBC) patients. Methods: Clinical data of 155 patients with TNBC were collected. The differences between groups were compared using chi-square test. The Kaplan-Meier method was used to drawing the survival curve. The Cox regression model was applied to analyze the independent prognostic risk factors, which may affect the survival rate. Results: The high NLR value was related with the pathological stage, lymph node metastasis, recurrence and metastasis ( $P < 0.05$ ). However, NLR was not correlated with age, tumor size, histological grade or menstruation ( $P > 0.05$ ). PLR was not correlated with clinical characteristics ( $P > 0.05$ ). Univariate analysis showed that lymph node metastasis, pathological stage, recurrence and metastasis and NLR value were related to the 3 years disease-free progression in TNBC patients. Cox multivariate analysis showed that lymph node metastasis, pathological stage and NLR value were independent predictors of prognosis in TNBC patients. Conclusion: In TNBC patients, the NLR level is related to lymph node metastasis and pathological stage significantly. High level of NLR value can be used as independent predictors of prognosis in TNBC patients. However, there is no significant correlation among PLR, clinical characteristics and prognosis.

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