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XIAP、c-jun在肺癌组织中的表达及其意义(PDF) 分享到

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Title: Expression and clinical significance of XIAP and c-jun in human lung cancer tissues

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关键词: [XIAP](#); [c-jun](#); [肺癌](#); [组织芯片](#); [预后](#)

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摘要: 目的 探讨XIAP及c-jun在原发性肺癌组织中的表达水平及其临床意义。 方法 选用组织芯片应用免疫组化S-P法检测XIAP、c-jun蛋白在正常肺组织、肺良性病变、肺癌旁组织和原发性肺癌组织中的表达。 结果 XIAP、c-jun在肺癌组织中的阳性表达率均明显升高,恶性组显著高于正常组、良性组和癌旁组($P<0.05$),XIAP、c-jun在肺癌临床晚期(III期和IV期)组的阳性表达水平(MOD值)均明显高于临床早期(I期和II期)组($P<0.05$),XIAP、c-jun的阳性表达水平在有淋巴结转移组均高于无淋巴结转移组($P<0.05$),XIAP与c-jun在肺癌组织中阳性表达呈正相关($r=0.232$, $P<0.05$),术后生存期小于1年患者的XIAP、c-jun阳性表达率均明显高于生存期超过1年患者($P<0.05$)。XIAP、c-jun的MOD值与患者性别、年龄、肿块直径和组织学类型均无关($P>0.05$)。 结论 XIAP、c-jun蛋白阳性水平的高表达提示患者预后较差,联合检测XIAP、c-jun蛋白阳性表达水平可作为临床诊断及患者预后预测的参考指标。

Abstract: **Objective** To investigate the expression levels and clinical significance of X-linked inhibitor of apoptosis protein (XIAP) and c-jun in primary lung cancer tissues. **Methods** Immunohistochemical SP method was used to detect the expression levels of XIAP and c-jun in normal lung tissues, lung benign lesions, adjacent tissues of lung cancer and primary lung cancer tissues. **Results**

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The positive expression rates of XIAP and c-jun in the primary lung cancer tissues were significantly higher than those in the normal lung tissues, lung benign lesions and adjacent tissues of lung cancer ($P<0.05$). The positive expression levels (MOD value) of XIAP and c-jun in advanced lung cancer tissues (Stage III and IV) were significantly higher than those in the early-stage lung cancer tissues (Stage I and II) ($P<0.05$). The positive expression levels of XIAP and c-jun in the lung cancer tissues with lymph node metastasis were significantly higher than those in the lung cancer tissues without lymph node metastasis ($P<0.05$). The positive expression levels (MOD value) of XIAP and c-jun were positively correlated in the lung cancer tissues ($r=0.232$, $P<0.05$). The positive expression levels of XIAP and c-jun in the patients with postoperative survival time less than 1 year were significantly higher than those in the patients with postoperative survival time more than 1 year ($P<0.05$). The positive expression levels (MOD value) of XIAP and c-jun were not correlated with patients' age, sex, tumor diameter or histopathological type ($P<0.05$). Conclusion High expression of XIAP and c-jun indicates poor prognosis of patients with lung cancer. XIAP and c-jun expression levels can be used as reference indices for clinical diagnosis and prognosis prediction in patients with lung cancer.

参考文献/REFERENCES:

刘晓丽, 马礼鸿, 王全义, 等. XIAP、c-jun在肺癌组织中的表达及其意义[J]. 第三军医大学学报, 2012, 34(23): 2408-2410.

相似文献/REFERENCES:

[1] 刘琼, 叶秀峰, 张徽. 熊果酸抑制胶质瘤裸鼠移植瘤生长及其机制的初步探讨[J]. 第三军医大学学报, 2009, 31(11): 1041.

LIU Qiong, YE Xiu-feng, ZHANG Hui. Effects of ursolic acid on proliferation of transplanted glioma in nude mice and its mechanisms[J]. J Third Mil Med Univ, 2009, 31(23): 1041.