

胃癌患者血清白细胞介素6、肿瘤坏死因子 α 的测定及其临床意义

Detection of serum IL-6 and TNF- α in patients with gastric cancer and its clinical significance

中文关键词: [胃癌](#) [IL-6](#) [TNF- \$\alpha\$](#)

英文关键词: [Gastric cancer](#) [Interleukin-6](#) [Tumor necrosis factor- \$\alpha\$](#)

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中文摘要:

背景与目的: 胃癌的发生、发展与宿主抗肿瘤免疫功能状态密切相关。当宿主免疫功能低下时, 免疫监视作用下降, 胃癌发生率升高。无论是定位生长还是远处转移, 肿瘤细胞始终受机体免疫系统的监视。肿瘤坏死因子 α (tumour necrosis factor- α , TNF- α)和白细胞介素6(interleukin-6, IL-6)分别是Th1型和Th2型免疫反应的关键分子。本研究通过测定胃癌患者血清TNF- α 、IL-6水平, 阐明其与胃癌患者免疫状况及进展、预后的关系。**方法:** 应用酶联免疫法(ELISA)测定73例胃癌患者和59名正常对照者血清中IL-6、TNF- α 水平, 并对手术前1天和手术后10天以及不同分期的胃癌患者血清IL-6、TNF- α 水平进行比较。**结果:** 胃癌患者术前血清IL-6、TNF- α 水平与术后及正常对照组相比差异具有统计学意义, 术后血清TNF- α 水平与正常对照组相比差异具有统计学意义($P < 0.05$), 术后血清IL-6水平与正常对照组相比差异无统计学意义($P > 0.05$)。III期、IV期胃癌患者血清IL-6、TNF- α 水平高于I-II期患者($P < 0.05$), III期与IV期相比, 血清IL-6、TNF- α 水平差异无统计学意义($P > 0.05$)。**结论:** 提示IL-6、TNF- α 可能是反映胃癌进展及预后的新的标志物。

英文摘要:

Background and purpose: Incidence and development of gastric cancer are closely related to the health of the host. The increased incidence of gastric cancer and the depressed function of immune surveillance correspond to the host's anti-tumor immunity. The immune system is always working whether the tumor cells are growing or metastasizing. Tumor necrosis factor- α (TNF- α) and interleukin-6 (IL-6) are the key molecules of the Th1 and Th2 type immune response. In this study, we measured serum level of IL-6 and TNF- α in order to interpret the correlation between the status of immune, progress, prognosis and the serum level of the two markers mentioned above. **Methods:** The levels of serum tumor IL-6, TNF- α were detected by ELISA in 73 cases of gastric cancer and 59 cases of normal controls. Then the levels of serum IL-6, TNF- α in the gastric cancer patients were compared 1 day before and ten days after operation. Patients in different stages were also compared. **Results:** There was a statistical significance of the serum level of IL-6, TNF- α during the preoperative, postoperative and normal control group. Compared to the normal control group, the serum level of TNF- α in the postoperative group was much higher ($P < 0.05$), but there was no difference of the serum level of IL-6 in this 2 groups. Compared to the gastric cancer patients in stage I and II, the serum level of IL-6, TNF- α of the patients in stage III and IV was much higher ($P < 0.05$). However there was no difference between the stage III and stage IV patients ($P > 0.05$). **Conclusion:** It is suggested that IL-6 and TNF- α may be the new tumor markers which may be associated with genesis and development of gastric cancer.

吴骏, 徐斌, 蒋敬庭. 胃癌患者血清白细胞介素6、肿瘤坏死因子 α 的测定及其临床意义[J]. 中国癌症杂志, 2011, (9):681-683

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