



2018年11月30日 星期五

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中国肿瘤临床 > 2015, Vol. 42 > Issue (1): 56-60 DOI: doi:10.3969/j.issn.1000-8179.20141672

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胞浆-5'-核苷酸酶-II在非小细胞肺癌组织中的表达及其临床意义*

曲莉莉①, 刘晓晴①, 王伟霞①, 汤传昊①, 李俭杰①, 李晓燕①, 高红军①, 李晓兵②, 刘广贤③

作者单位: ①军事医学科学院附属医院肺部肿瘤内科(北京市100071); ②病理科; ③血液内科

Expression and clinical significance of CN- II in non-small cell lung cancer tissues

Lili QU¹,Xiaoqing LIU¹,Weixia WANG¹,Chuanhao TANG¹,Jianjie LI¹,Xiaoyan LI¹,Hongjun GAO¹,Xiaobing LI²,Guangxian LIU³

1Department of Lung Cancer,

2Department of Pathology,

3Department of Hematology, the Affiliated Hospital of the Academy of Military Medical Science, Beijing 100071, China

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摘要

目的: 胞浆-5'-核苷酸酶-II(CN-II)是一种核苷酸酶, 具有水解酶及磷酸转移酶的活性, 其异常表达可能与多种核苷类药物耐药有一定相关性。本研究旨在探讨CN-II在非小细胞肺癌(non-smallcelllungcancer, NSCLC)组织中的表达及其与临床病理因素的关系。方法: 应用免疫组织化学方法检测116例NSCLC原发及转移病灶中CN-II的表达并分析其中67例曾接受过吉西他滨方案化疗的患者其CN-II表达与吉西他滨近期疗效及生存的相关性, 采用χ²检验及Fisher精确检验分析其表达水平与临床病理因素的相关性, 采用Kaplan-Meier方法分析TTP及OS(overallsurvival, OS), 采用对数秩和检验比较不同CN-II表达情况之间的差异。结果: 116例NSCLC标本中CN-II阳性表达率为53.4%, 其表达水平与患者的年龄、性别、KPS评分、临床分期、肿瘤病理类型及分化程度等均无显著相关性。NSCLC原发病灶与淋巴结等转移病灶中CN-II的表达水平亦无显著性差异。对67例接受吉西他滨方案化疗NSCLC患者肿瘤组织标本的检测发现, 吉西他滨治疗有效组(CR+PR)、疾病控制组(CR+PR+SD)及无效组(PD)的CN-II阳性表达率分别为30.4%、36.7%及57.6%, 前两者与后者相比均有显著性差异(CR+PR vs. PD组, P=0.008; CR+PR+SD vs. PD组, P=0.013); 28例CN-II阳性及39例阴性患者中位肿瘤进展时间(progressionfreesurvival, PFS)分别为4.0个月及5.5个月, 有显著性差异(95%CI: 4.452-6.148, P=0.041), 两组患者中位OS分别为9.5个月及11.0个月, 无显著性差异(95%CI: 8.667-13.333, P=0.282)。结论: CN-II异常表达与吉西他滨治疗疗效有一定相关性, 有可能成为潜在的疗效预测因子。

关键词: 5'-核苷酸酶, 吉西他滨, 耐药性, 非小细胞肺癌

Abstract:

Objective: Cytosolic 5'-nucleotidase (CN-II), a nucleotide kinase, exhibits both 5'-nucleotidase and nucleoside phosphotransferase activities. Abnormal CN-expression may be correlated with the resistance of nucleoside analogs in anticancer drugs. This study was designed to investigate CN-II expression in human non-small cell lung cancer (NSCLC) tissues and its correlation with the clinicopathological parameters as well as the prognosis of patients treated with gemcitabine. Methods: Immunohistochemistry was used to detect CN-II expression in 116 cases of paraffin-embedded NSCLC samples. The correlations with the clinicopathological parameters and the response to gemcitabine chemotherapy of CN-II were analyzed through the Chi-square test. Log-rank test was used to determine whether or not CN-II expression is correlated with the overall survival of patients. Results: The positive rate of CN-II was 53.4% in 116 NSCLC tissues. No significant correlation existed between CN-II expression and the clinicopathological parameters. Among the 67 of the 116 patients who received gemcitabine chemotherapy, those with tumor progression (positive rate of 57.6%) exhibited higher CN-II expression than those with therapeutic efficacy (positive rate of 30.4%, P=0.008) and disease-control chemotherapy (positive rate of 36.7%, P=0.013). The progression-free survival was 4.5 and 5.5 months in the CN-II-positive and CN-II-negative groups, respectively, with significant differences (95% CI: 4.452 to 6.148, P=0.041). Correspondingly, the overall survival was 9.5 and 11.0 months in the two groups (95% CI: 8.667 to 13.333, P=0.282). Conclusion: CN-II may be a prognostic factor for gemcitabine chemotherapy in NSCLC patients.

Key words: cytosolic 5'-nucleotidase gemcitabine resistance non-small cell lung cancer

收稿日期: 2014-10-07 出版日期: 2015-01-15

基金资助:

本文课题受首都医学发展科研基金(编号: 2007-3042)资助

通讯作者: 刘晓晴 E-mail: liuxq@medmail.com.cn

引用本文:

曲莉莉①, 刘晓晴①, 王伟霞①, 汤传昊①, 李俭杰①, 李晓燕①, 高红军①, 李晓兵②, 刘广贤③. 胞浆-5'-核苷酸酶-II在非小细胞肺癌组织中的表达及其临床意义[J]. 中国肿瘤临床, 2015, 42(1): 56-60. Lili QU¹,Xiaoqing LIU¹,Weixia WANG¹,Chuanhao TANG¹,Jianjie LI¹,Xiaoyan LI¹,Hongjun GAO¹,Xiaobing LI²,Guangxian LIU³. Expression and clinical significance of CN-II in non-small cell lung cancer tissues. Chinese Journal of Clinical Oncology, 2015, 42(1): 56-60.

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地址 : 天津市河西区体院北环湖西路肿瘤医院内 300060

电话/传真 : (022)23527053 E-mail: cjco@cjco.cn cjcotj@sina.com 津ICP备09011441号-3