



PROGNOSTIC IMPORTANCE OF MOLECULAR GENETIC MARKERS: Ki67, Bcl2, and p53 IN PATIENTS WITH LOCALLY ADVANCED CERVICAL CANCER

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Abstract:

Summary. In biopsy preparations, there are 30 patients with cervical cancer at the IIB-IIIb clinical stages. A study in patients with locally advanced cervical cancer showed that a high expression level of Ki67 proliferation in primary patients, elevated levels of p53 protein before carrying out correlate with an unfavorable prognosis, which makes it possible to use these indicators in monitoring the course of the disease. It was shown that prior to the initiation of antitumor treatment, the expression level of Ki67 was as high as possible in those patients who subsequently showed progression of the disease, and reached 85%. The expression level of Ki67 and p53 protein was shown to correlate with indicators of tumor progression.

The aim of the study was: In accordance with the purpose of the study outlined above, the expression level of molecular biological markers Ki67, Bcl2, p53 and their prognostic value in patients with locally advanced cervical cancer who received complex treatment were assessed.

Material and methods: 30 patients with locally advanced cervical cancer with IIB – IIIA-B stage who received chemoradiotherapy in cancer center from 2014 to 2017 were examined. The stages of the disease before the start of treatment were carried out in accordance with the international classification of TNM (seventh revision 2009) and in accordance with the classification of the International Federation of Obstetricians-Gynecologists classification (FIGO, 2011). The diagnosis of the disease in all cases verified histological. Morphologically, all women were diagnosed with squamous cell carcinoma. The possibilities of the proliferative activity marker Ki67, p53 protein, Bcl2 in determining the prognosis of the disease, locally advanced cervical cancer were studied. The material of the study was cervical



All patients underwent 3 courses of neoadjuvant polychemotherapy with 21 day intervals, according to the scheme: Cisplatin 100 mg 1 day, Fluorouracil 1000 mg 1-4 days. Then, after computerized topometry of the pelvic organs, planning of combined radiation therapy was carried out, including remote gamma therapy and intracavitary brachytherapy. Remote irradiation was carried out on a gamma therapeutic apparatus (TERABALT type 80 model SCS 2012 Czech Republic) in the standard fractionation mode (daily 5 times a week Single Focal Dose 2 Gy to Total Focal Dose 46 Gy). Intracavitary radiotherapy was performed on a BEBIG brachytherapy device - MULTISOURCE Co60 2013. (Germany) in fractional mode Single Focal Dose 5 Gy, eq Total Focal Dose to point A up to 70-90 Gy, to point B 50-58 Gy.

The initial expression of the listed immunohistochemical markers in the tumor and prior to chemo-radiotherapy was evaluated. The immunohistochemical study was carried out according to a standard procedure on dewaxed sections of cervical tissue blocks obtained from resection specimens or cervical biopsies. A pathologist to clarify the histological diagnosis and the correspondence of the blocks to the selected sections reviewed all drugs.

Biography:

She is the radiation oncologist. She has published more than 15 papers in reputed journals and has been serving as an editorial board member of reputed.

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