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Determination of gastrin levels in the serum and cancer cells in patients with large intestinal carcinoma and its clinical significance

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Abstract Objective: To determine gastrin levels in the serum and cancer cells in patiens with large intestinal carcinoma (LIC) and explore its clinical significance. Methods: The gastrin levels in the serum, cancer cells (CCs) and cancer-adjacent mucosa cells (CAMCs) were determined with radioimmunoassay for 35 patients with LIC. Results: ① Before and after operation, no significant differences of the gastrin level in the serum were found between the patients with LIC and the control ($P > 0.05$). However, it was significantly lower before than after the operation ($P < 0.01$). Marked difference was found between the patients with highly differentiated adenocarcinoma and those with poorly differentiated ones ($P < 0.05$). ② The gastrin level was significantly higher in CCs than in CAMCs and normal mucosa cells ($P < 0.01$ and 0.05). It was markedly higher in patients with highly differentiated adenocarcinoma than in those with poorly differentiated or mucinous carcinoma ($P < 0.05$). ③ The gastrin levels in the serum and CCs were not correlated to Duke's grades. Conclusion: The LIC cells produce gastrin through autocrine and the elevation of gastrin levels might serve as a marker of well-differentiation of LIC.

Key words large intestinal carcinoma; gastrin; serum; cell

血清III型前胶原在肝纤维化诊断中的意义

The significance of serum typeⅢ precollagen in the diagnosis of hepatic fibrosis

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近年来随着血清诊断学的发展,有研究报道血清III型前胶原(TypeIII precollagen, PcIII)可用来诊断肝纤维化[1]。本研究应用放射免疫法检测各种胃肠道疾病及各类肝病患者血清中PcIII含量,以探讨PcIII在纤维化诊断中的意义。

1 材料与方法

检测对象: 正常对照组 30例,来自我院血库献血员;慢性胃炎 30例消化性溃疡 30例,急性病毒性肝炎 16例,慢性活动性肝炎 21例,肝硬化 38例,原发性肝癌 33例,诊断标准符合 1990年全国病毒性肝炎学术会议修订的诊断标准。胃肠道疾病及原发性肝癌患者全部为本院住院病人。

检测方法: 人III型前胶原放射免疫试剂由重庆肿瘤研究所提供,操作按试剂说明书进行。

统计学处理: 采用 t 检验。

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Treatment of esophageal cancer with external radiotherapy combined with high-dose-rate intraluminal brachytherapy: An analysis of 398 cases

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Abstract **Objective**: To explore the clinical value of external radiotherapy (ERT) combined with high-dose-rate intraluminal brachytherapy (HDRIBT) in treatment of esophageal cancer. **Methods**: The data of 398 cases of esophageal cancer treated with ERT combined with HDRIBT from May, 1990 to December, 1996 in our department were retrospectively analyzed and compared with those of 220 cases treated with ERT alone in the same period. The total dose of ERT was 60 Gy and that of HDRIBT was 5~8 Gy in 2~3 fractions in 2~3 weeks. **Results**: ① The 1-, 3- and 5-year survival rates of the patients treated with ERT combined with HDRIBT were 64%, 38% and 21% whereas those of the patients treated with ERT alone were 53.18%, 21.18% and 16.36% respectively. There was significant difference between the two groups of patients ($P < 0.05$). ② No marked difference of the survival rates was found between the patients received HDRIBT before ERT and those received HDRIBT after ERT. ③ The incidence of complications was higher in patients treated by ERT combined with HDRIBT than in those with ERT alone. ④ The incidence of complications was associated with the dose of HDRIBT. **Conclusion**: The combination of ERT and HDRIBT can improve the survival rate of the patients with esophageal cancer. Since the incidence of complications is increased, the indications should be strictly selected and irradiating dose and times be controlled to assure the quality of life of the patients.

Key words brachytherapy; esophageal cancer; complication; radiotherapy

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2 结果

检测胃肠道疾病,各类肝病及正常对照组血清 PdIII含量,结果显示,慢性胃炎、消化性溃疡与正常对照组比较差异均不显著($P > 0.05$);急性病毒性肝炎与对照组比较差异显著($P < 0.05$);慢性活动性肝炎,肝硬化,原发性肝癌血清 PcIII含量显著升高,与正常照组比较差异非常显著($P < 0.01$)。

3 讨论

目前肝纤维化的诊断主要依据病理检查,但肝脏穿刺活组织检查为损伤性手段,无法准确地判断肝纤维化活动度,更难以动态观察[2], 1985年 Galambos等建立了血清 PcIII放免法, 1992年李伟道等从人胎皮层中提取抗原制成试剂盒,提高了结果的准确性,近年来国内外许多学者报道血清 PdII是反应肝纤维程度和活动度的良好指标,可弥补肝活检不能动态观察肝纤维化进展及局部取样误差等不足。

本研究发现:慢性胃炎、消化性溃疡患者血清中 PcIII无明显升高及降低,慢性肝炎、肝硬化、原发性肝癌患者血清中 PdII明显升高,与正常人对比差异显著,从检测结果可以看出,随着肝病的进展,血清中 PdII的含量也随之升高,与肝纤维化程度密切相关。此外,在急性肝炎时, PdII含量也较对照组增高,与贾因堂等[3]报道一致,提示 PcIII与肝细胞损伤及坏死硬有关,因此, PdIII是诊断肝纤维化的良好指标,其测定方法简单、敏感、无创伤性、且能动态观察肝纤维化的过程,因而对肝纤维化的诊断有一定意义。

关键词　III型前胶原;肝纤维化
中图法分类号　R575.2

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