

20TH ANNUAL CONFERENCE
OF THE EGYPTIAN GROUP
OF COLON AND RECTAL SURGEONS



25-27 JULY 2018



HILTON CAIRO HELIOPOLIS - Cairo



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Prognostic significances of Cox-2, Cyclin D1 and P21 expression in colorectal cancer patients

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Introduction


- * Colorectal cancer (CRC) is the 3rd commonest cancer and the 4th most frequent cause of cancer related death worldwide.**
- * It is important to detect novel prognostic markers for CRC patients to detect recent targeted therapy and to improve patients' survival.**

- * **Cyclooxygenase-2 (COX-2) is an enzyme that is upregulated in response to inflammation and carcinogenesis.**
- * **Cyclin D1 is an oncogene which regulates cell cycle progression.**
- * **Cyclin D1 is blocked by cyclin D1-dependent kinase (CDK) inhibitors, such as p27 and p21.**

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- * Many studies have evaluated Cox-2, cyclin D1& p21 expression as prognostic factors for survival of patients with CRC.**
 - * However, the results of the studies are conflicting.**




AIM of the work

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- * To evaluate immunohistochemical expression of COX-2 in colon cancer patients correlating its expression with the cell cycle markers cyclin D1, and p21.**
 - * To analyze the relationship between their expression, clinicopathological criteria and the prognosis of patients.**



MATERIAL & METHOD

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- * Expressions of Cox-2, Cyclin D1 and P21 were evaluated using immunohistochemistry in 60 patients of colon cancer, that were followed up for 3 years.**
 - * The relationship between their level of expressions and prognosis of patients was analyzed.**



RESULTS

□ **Cox-2& Cyclin-D expression in the studied cases:**

- * **The expression of Cox-2& Cyclin-D in CRC was positively associated with higher grade and advanced stage of the tumor, presence of L.N spread, peritoneal dissemination ($p<0.001$), and distant metastases ($p=0.012$)& ($p=0.009$)respectively.**

□ P-21 expression in the studied cases

- * The expression of P21 in CC was significantly correlated with lower grade & early stage of the tumor, absence of L.N, distant metastases ($p < 0.001$), bilaterality and ascites.

Follow up and clinical results

- * **Low Cox-2 & Cyclin D1 and high P21 expression were associated with;**
- * **Optimal surgical eradication of the tumor.**
- * **Increased 3-year overall survival (OS) rate.**
- * **Low incidence of recurrence after therapy ($P < 0.001$).**

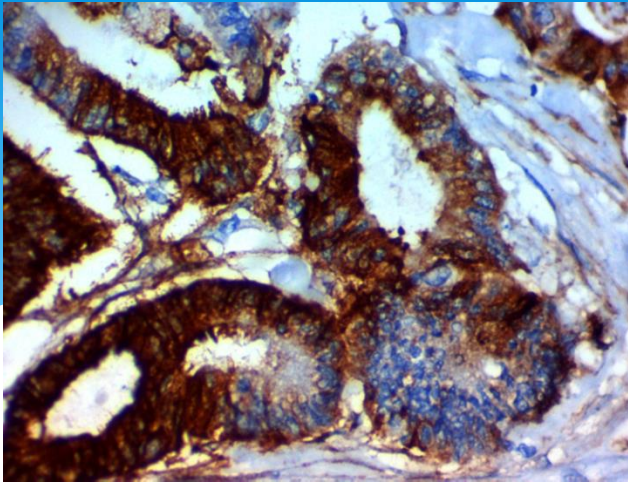


Fig 1 B

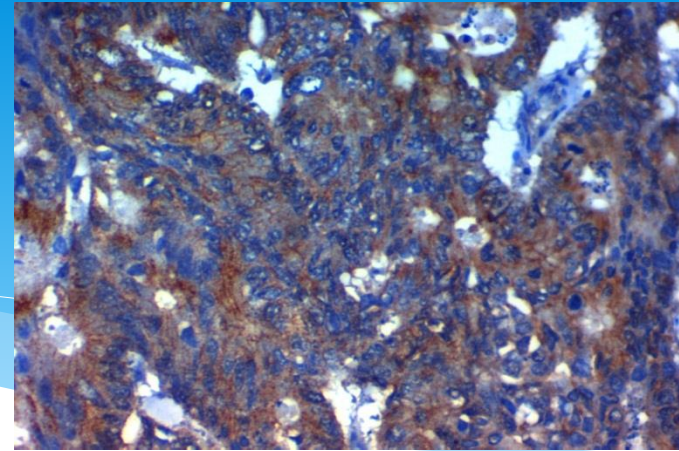


Fig 1 A

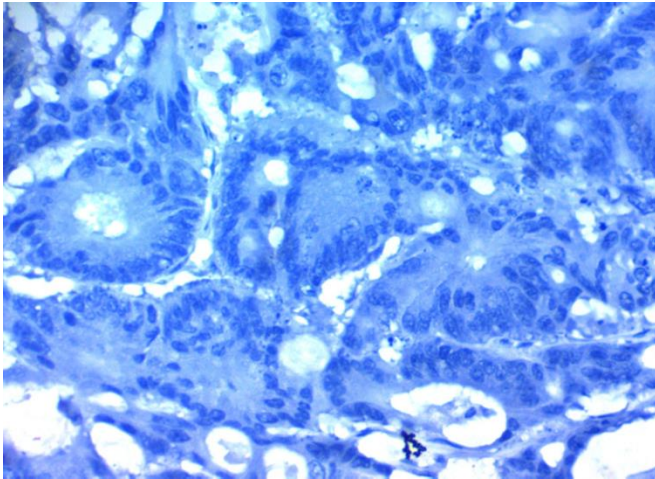


Fig 1 D

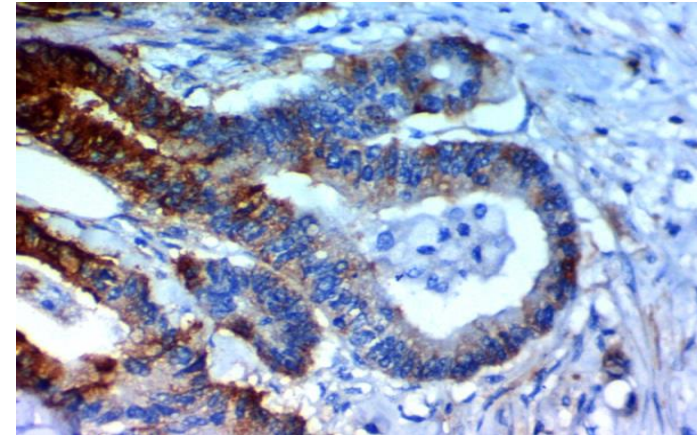


Fig 1 C

Fig 1 immunohistochemical expression of Cox-2 in colorectal carcinoma (CRC)A; High expression in the cytoplasm of poorly differentiated CRC x400, B; High expression in the cytoplasm of moderately differentiated CRCx400, C; low expression in the cytoplasm of well differentiated CRCx400, D; negative expression in the cytoplasm of well differentiated CRCx400.

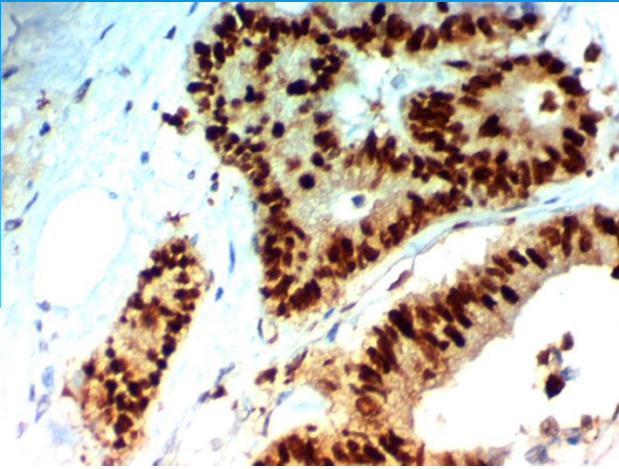


Fig 1 B

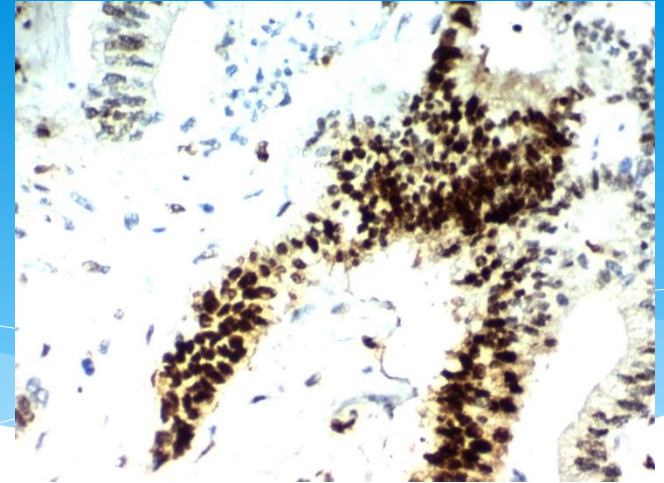


Fig 1 A

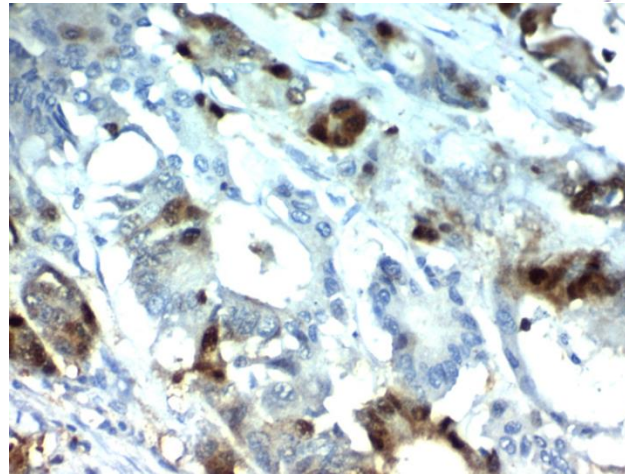


Fig 1 C

Fig 2 immunohistochemical expression of Cyclin D 1 in colorectal carcinoma (CRC)A; High expression in the nucleus of poorly differentiated CRC x400, B; High expression in the nucleus of moderately differentiated CRCx400, C; low expression in the nucleus of well differentiated CRCx400 ,

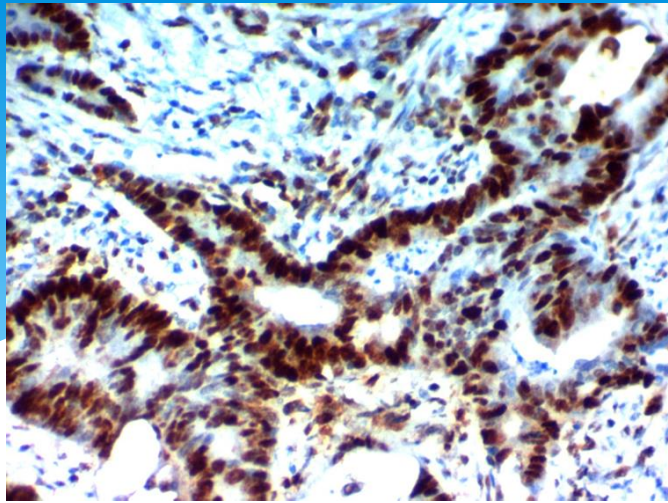


Fig 1 C

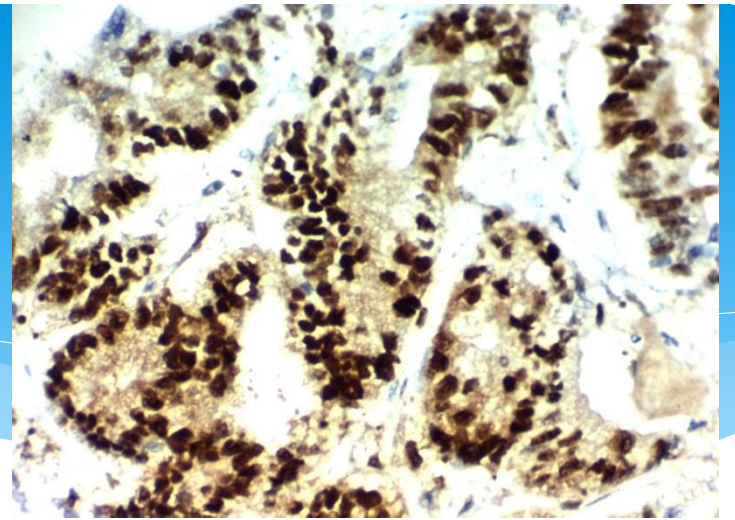


Fig 1 C

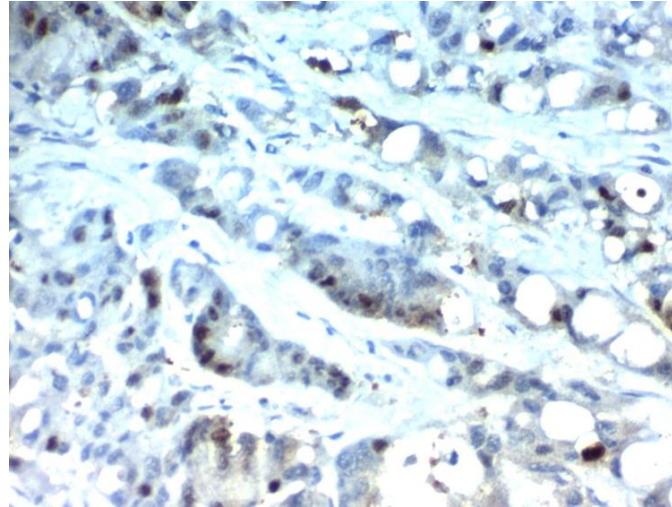



Fig 1 C

Fig 3 immunohistochemical expression of P21 in colorectal carcinoma (CRC)A; High expression in the nucleus of well differentiated CRC x400, B; High expression in the nucleus of moderately differentiated CRCx400, C; low expression in the nucleus of poorly



Summery & conclusion

- * High levels of expression of Cox-2 & Cyclin D1 in poorly differentiated and advanced stage CRC suggests that they play a role in tumor initiation & progression.**
- * Cox-2 & Cyclin D1 are markers of poor prognosis in CRC patients.**
- * P21 is a marker of good prognosis in CRC patients.**



*** These results clarified the roles of inflammation and disturbances in cell cycle control in progression and poor prognosis of CRC patients.**



Recommendations

*** We recommend that a large scale study on large number of patients with CRC to prove our results and detect the value of IHC in prediction of CRC patients prognosis and response to therapy.**



Thank you

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