Diagnostic and prognostic value of UHRF1 in breast cancer patients

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Ubiquitin-like, containing PHD and RING finger domains 1 (UHRF1) has been reported to play an important role in breast carcinogenesis. This work investigated the correlation of UHRF1 DNA level in plasma with clinical characteristics of breast cancer and its clinical significance in breast cancer diagnosis. The expression of UHRF1 in primary breast cancer tissue was examined by western blot. The UHRF1 DNA levels in plasma and UHRF1 mRNA expression in tissues were determined by accurate real-time quantitative PCR. The associations of UHRF1 levels with clinical variables were evaluated using standard statistical methods. The UHRF1 DNA in plasma of 229 breast cancer patients showed higher expression than healthy controls, which showed high specificity up to 76.2% at a sensitivity of 79.2%, and was significantly associated with c-erbB2 positive status, cancer stage and lymph node metastasis. High UHRF1 DNA level in plasma was significantly associated with short progression-free survival. The UHRF1 DNA level in plasma is highly correlative with breast cancer and its status and stage, and may be a potential independent diagnostic and prognostic factor for both breast cancer and the survival of breast cancer patients.

Biography
Afshin Amini completed his doctoral degree in Medicine in 1997. Being interested in cancer research, he was granted a competitive international postgraduate scholarship by the University of New South Wales (Sydney, Australia) in 2012. As a member of Professor Morris’s research team at St George Hospital, Afshin is currently involved in some key projects aimed to develop novel approaches to cancer therapy.

Clinical features and pathological analysis on intraoperative tumour bed bleeding in atypical pituitary adenoma

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Background: Atypical pituitary adenoma (APA) as a rare subtype of pituitary adenoma exhibit aggressive and invasive histological and radiological features, it is unclear whether or not excessive intraoperative tumour bed bleeding (TBB) predominantly occurs in APA.

Methods: A series of 20 cases with APA was retrospectively investigated. In addition, the volume of TBB between 20 patients with APA and 174 cases with typical pituitary adenoma (TPA) was compared in present study.

Results: The incidence of APA was accounted for 10.3% (20/194) in pituitary adenomas, 10% (2/20) of cases with APA experienced severe TBB which blood loss surpass 1000 ml. The average volume of bleeding in APA group was 318±282 ml, Whereas, the volume of TBB in TPA was 240±184 ml, There was significant difference between APA group and TPA group (p<0.01). The number of CD-34 positive expression was 26.3±15.2 and 18.1±11.8 in APA group and TPA group respectively, which is significantly elevated in APA group compared with TPA group (p<0.01).

Conclusions: Present data conclude that elevated TBB was easily occur in APA group compared with TPA, increased TBB may be associated with high CD34-positive cell count.