



DOI:10.3872/j.issn.1007-385x.2018.06.013

·临床研究·

Flotillin-2 在胃癌组织中的表达及其临床意义

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[摘要] 目的:检测脂筏标记蛋白-2(Flotillin-2, Flot-2)在胃癌组织中的表达水平,分析Flot-2的表达与胃癌临床病理特征及预后的关系。**方法:**选取南昌大学第二附属医院胃肠外科于2009年1月至2010年4月行手术切除的胃癌组织112例及与其配对的癌旁组织,采用免疫组织化学法检测肿瘤组织中Flot-2的表达水平,采用Spearman检验Flot-2表达与胃癌临床病理特征及预后的关系,采用Kaplan-Meier法及Log-Rank检验分析其生存数据。**结果:** Flot-2阳性表达呈黄色颗粒,主要在细胞质中表达,胃癌组织中的表达量明显高于癌旁组织(53.57% vs 46.43%, $P<0.05$)。Flot-2表达与患者的性别、年龄、肿瘤位置、分化程度无显著关联($P>0.05$),与肿瘤大小、浸润深度、淋巴结转移、远处转移及AJCC分期均显著关联(均 $P<0.01$)。Flot-2低表达组患者的5年总体生存率明显高于高表达组($P<0.01$)。Cox回归分析显示,远处转移、AJCC分期和Flot-2蛋白表达水平为胃癌患者预后的独立危险因素。**结论:** 胃癌组织中高表达Flot-2,其与患者不良预后密切相关,是胃癌预后的独立危险因素,有望成为胃癌治疗的潜在新靶点。

[关键词] 脂筏标记蛋白-2;胃癌;预后

[中图分类号] R730.23; R735.2 **[文献标识码]** A **[文章编号]** 1007-385X(2018)06-0629-05

Expression and clinical significance of Flotillin-2 in gastric cancer tissues

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[Abstract] **Objective:** To investigate the expression of Flotillin-2 (Flot-2) protein in gastric cancer tissues and its relationship with clinicopathological features and prognosis of gastric cancer (GC) patients. **Methods:** 112 samples of gastric cancer tissue and the corresponding paracancerous tissue that resected at the gastrointestinal surgery department of the Second Affiliated Hospital of Nanchang University between January 2009 and April 2010 were collected for this study. The expression of Flot-2 protein in tumor tissues was detected by immunohistochemistry. The survival data were analyzed by Kaplan-Meier and Log-Rank test, and the survival curve was plotted. Spearman correlation analysis was used to examine the relationship between Flot-2 protein expression and clinicopathological characteristics and prognosis of GC patients. **Results:** In gastric cancer tissues, Flot-2 was primarily stained in cytoplasm. Level of Flot-2 was significantly higher in gastric cancer tissues compared with that in paracancerous tissues (53.57% vs 46.43%, $P<0.05$). Expression of Flot-2 in tumor tissues was significantly associated with tumor size, depth of invasion, lymph node metastasis, distant metastasis and AJCC stage (all $P<0.01$), but not with gender, age, differentiation degree and tumor location ($P>0.05$). Moreover, survival analysis showed that the overall survival of patients with low Flot-2 expression was significantly higher than that of the patients with high level ($P<0.01$). Cox regression analysis indicated that distant metastasis, AJCC stage and Flot-2 expression were the independent risk factors for the prognosis of GC patients. **Conclusion:** Flot-2 protein was highly expressed in gastric cancer tissues and closely correlated with the poor prognosis of GC patients; Flot-2 is an independent risk factor for GC prognosis and may be served as a potential therapeutic target for gastric cancer.

[Key words] Flotillin-2 (Flot-2); gastric cancer; prognosis

[Chin J Cancer Bioter, 2018, 25(6): 629-633. DOI:10.3872/j.issn.1007-385X.2018.06.013]

[基金项目] 国家自然科学基金资助项目(No.81760438);江西省科技厅青年基金资助项目(No.2017BAB215038);江西省卫计委资助项目(No.20175202)。Project supported by the National Natural Science Foundation of China (No.81760438), the Youth Foundation project of the Jiangxi provincial science and Technology Department (No. 2017BAB215038), and the Jiangxi Provincial Health Planning Committee Foundation (No.20175202)

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胃癌是危害人类健康的常见恶性肿瘤之一,其死亡人数在全球恶性肿瘤中位居第二,严重威胁人类的生命健康。全世界每年新发胃癌病例约100万,死亡约80万,在中国每年每10万人中就有16个人死于胃癌^[1]。目前,侵袭和转移被认为是胃癌致死的主要原因。胃癌治疗的主要手段是手术、化疗、放疗等,但胃癌患者的生存情况并没有得到显著改善,原因是胃癌早期症状不明显,且胃癌容易向周围组织、淋巴结等转移,大多数患者病情进展迅速,治疗效果不理想。因此,寻找一种新的分子标志物来进一步了解胃癌发生发展的过程将有助于胃癌的早期诊断和靶向治疗。脂筏标记蛋白-2(Flotillin-2, Flot-2)是SPFH蛋白超家族中的重要一员,它首次在金鱼视神经损伤的轴突再生中被发现,是小窝蛋白和脂筏的主要成分,在上皮细胞黏附和丝状伪足的形成中发挥着重要作用^[2]。Flot-2可以与一些信号分子直接相互作用,例如受体、激酶、黏附分子、G蛋白等,它作为一种肿瘤调节因子通过调控细胞增殖、分化、凋亡、黏附、侵袭等行为来调控肿瘤的发生和发展^[3]。本研究通过免疫组化技术检测了胃癌及癌旁组织中Flot-2的表达,探讨Flot-2表达与胃癌临床病理特征的关系及其临床意义。

1 材料与方法

1.1 临床资料

选取南昌大学第二附属医院胃肠外科于2009年1月至2010年4月行手术切除的胃癌组织112例及其配对的癌旁组织(距离癌组织边缘>2 cm)。所有组织标本均经组织病理学检查确诊为胃癌组织,患者术前均未接受放化疗。112例胃癌患者中,男性79例、女性33例,年龄19~79岁、平均(54.8±13.0)岁。根据2010年AJCC胃癌分期进行TNM分期:I期25例、II期15例、III期39例、IV期33例。

1.2 主要试剂与仪器

Flot-2抗体(PA5-21296)一抗购自赛默飞世尔公司,PV-9000通用型二步法免疫组化检测试剂盒、DAB显色试剂盒均购自北京中杉金桥公司。仪器主要有LEICA的石蜡切片机和Leica Autostainer XL全自动染色机。

1.3 免疫组化检测胃癌组织中Flot-2的表达

胃癌石蜡标本在经过脱蜡脱水处理后,用3%H₂O₂溶液阻断内源性过氧化物酶,0.01 mol/L枸橼酸钠缓冲液(pH 6.0)进行抗原修复,之后用10%的非免疫山羊血清封闭10 min以降低非特异结合。每张切片滴加30 μl 1:100稀释的Flot-2一抗,将其置于密封湿盒中4℃过夜,PBS漂洗3次,每次8 min;Envision TM(二抗)室温孵育30 min,PBS洗3遍,每次

3 min;加入辣根过氧化物酶37℃孵育30 min,PBS洗3遍,每次3 min;DAB染色,在显微镜下控制染色反应强度,PBS漂洗后,苏木精复染,最后中性树胶封片。

1.4 免疫组化结果判定

Flot-2表达结果判定方法参照文献[4]。由2名病理科医生采用双盲法独立完成,结果以胞质内出现黄色颗粒为Flot-2阳性表达。Flot-2表达水平的高低通过阳性细胞百分率及染色强度两个指标进行综合评分。判断步骤如下:在低倍显微镜下观察整张切片,分别在肿瘤细胞及肿瘤间质细胞随机选取5个高倍视野(×400),每个视野计数100个细胞,染色细胞率(%)=染色细胞数/观察细胞数×100%。染色细胞数低于5%记0分、5%~25%记1分、25%~75%记2分、高于75%记3分;而基本不着色为0分、淡黄色为1分、深黄色为2分、棕黄色为3分。每张切片的最终得分为染色细胞百分率与染色强度分值相加之和,根据Flot-2表达水平,将总分值<3分的胃癌患者为低表达组,总分值≥3分的为高表达组。

1.5 统计学处理

采用SPSS 21.0统计学软件,Spearman检验Flot-2高表达组和低表达组之间的差异,Mann-Whitney U秩和检验分析Flot-2的表达水平与临床病理参数的相关性,Kaplan-Meier法分析累积总体生存率,Cox比例风险回归模型评估总体生存率预后的危险因素。以P<0.05或P<0.01为差异有统计学意义。

2 结果

2.1 Flot-2在胃癌组织中高表达

Flot-2在胃癌细胞中主要表达在肿瘤细胞质内,胃癌细胞胞质内黄色颗粒为阳性表达,癌旁组织中Flot-2基本没有表达(图1)。112例胃癌组织中Flot-2低表达(免疫组化最终评分低于3分)的有60例(53.57%),高表达(评分高于或等于3分)的有52例(46.43%),差异有统计学意义(P<0.05)。

2.2 胃癌组织中Flot-2的表达水平与患者临床病理特征的关系

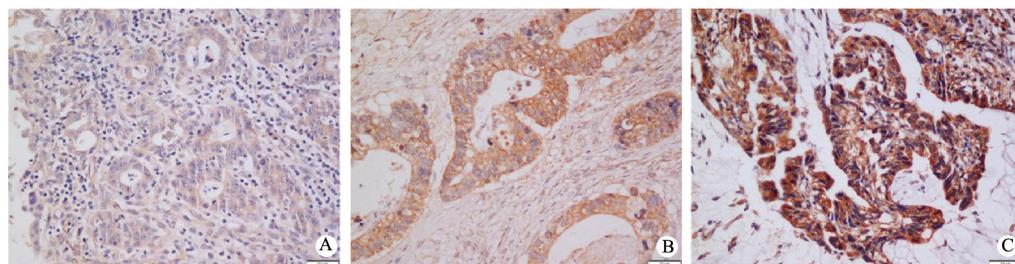
Flot-2表达与胃癌临床病理参数间的差异性检测显示,Flot-2表达的阳性率明显高于癌旁组织。Flot-2表达水平与患者的性别、年龄、肿瘤位置、分化程度无明显相关(P>0.05);与肿瘤大小、浸润深度、淋巴结转移、远处转移及AJCC分期均显著相关(P<0.01,表1)。

2.3 Flot-2低表达组的患者5年总体生存率明显提高

Kaplan-Meier生存分析结果(图2)显示,Flot-2低表达组的患者5年总体生存率明显高于高表达组



(62.7% vs 29.3%, $P<0.01$)。



A: Paracancerous tissue; B: Low expression of Flot-2 in gastric cancer tissue;

C: High expression of Flot-2 in gastric cancer tissue

图1 免疫组化检测Flot-2在胃癌组织和癌旁组织中的表达($\times 400$)

Fig.1 Expression of Flot-2 in paracancerous tissues and gastric cancer tissues by immunohistochemical analysis ($\times 400$)

表1 Flot-2的表达水平与患者临床病理特征的关系(n)

Tab. 1 Relationship between expression of Flot-2 protein and clinicopathological characteristics of GC patients(n)

Feature	N	Expression of Flot-2		P
		Low expression	High expression	
Sex				0.778
Male	79	43	36	
Female	33	17	16	
Age(t/a)				0.644
<55	50	28	22	
≥55	62	32	30	
Tumor size(l/cm)				<0.001
<4	47	34	13	
≥4	65	26	39	
Tumor site				0.057
Gastric cardia	24	11	13	
Body stomach	25	15	10	
Gastric antrum	59	34	25	
Full stomach	4	0	4	
Degree of differentiation				0.952
Well	2	1	1	
Medium	20	11	9	
Poorly	90	48	42	
Depth of infiltration				0.005
T1+T2+T3+T4a	81	50	31	
T4b	31	10	21	
Lymph node metastasis				<0.001
Without(N0)	28	24	4	
With(N1~3)	84	36	48	
Distant metastasis				<0.001
Without(M0)	77	52	25	
With(M1)	35	8	27	
AJCC staging				<0.001
I	25	22	3	
II	15	9	6	
III	39	21	18	
IV	33	8	25	

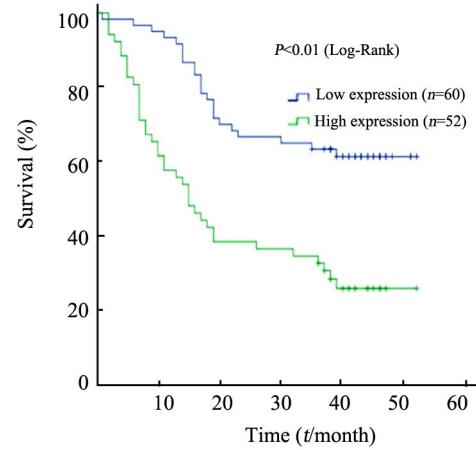


图2 Flot-2不同表达水平对胃癌患者总体生存率的影响

Fig.2 Effect of Flot-2 expression on the overall survival rate of gastric cancer patients

2.4 Flot-2的表达与胃癌患者预后的关系

将可能影响胃癌患者预后的因素(性别、年龄、肿瘤大小、分化程度、有无脉管癌栓、肿瘤浸润深度、有无远处转移、淋巴结转移等)纳入Cox比例风险回归模型,单因素分析显示:胃癌患者的预后与肿瘤大小、浸润深度、淋巴结转移、远处转移、AJCC分期及Flot-2表达水平显著相关(均 $P<0.01$),与患者的性别、年龄、肿瘤部位、分化程度无显著相关($P>0.05$)。将上述6个有显著相关性的因素进行多因素分析,显示远处转移、AJCC分期、Flot-2表达水平为胃癌患者预后的独立危险因素($P<0.05$,表2)。

3 讨 论

Flotillin蛋白超家族包括Flot-1和Flot-2 2个成员,是一类高度保守且广泛存在于多种生物体中的蛋白质,与Flot-1相比,Flot-2更为广泛地表达于各种组织中,并且在不同的细胞中几乎均有表达。Flot-2基因位于17q11-12上,是P63和P73的目标基因(属

于p53转录因子家族),其编码的Flot-2由379个氨基酸残基组成,在人体的不同组织和细胞中发挥着不同的作用,如参与物质的膜运输、轴突再生^[5]、T细胞

和B细胞的激活、细胞黏附^[6]、参与调控与细胞生长和恶性转化相关的信号通路、维持上皮细胞的结构、形成丝状伪足等。

表2 胃癌患者预后独立危险因素的单因素和多因素分析

Tab.2 Univariate and multivariate analysis of independent risk factors for prognosis in patients with gastric cancer

Parameter	Univariate analysis			Multifactor analysis		
	HR	95% CI	P	HR	95% CI	P
Sex	1.324	0.780-2.247	0.298			
Age	1.499	0.892-2.518	0.126			
Tumor size	3.256	1.810-5.858	<0.001	1.278	0.682-2.396	0.444
Tumor site	1.154	0.843-1.579	0.371			
Degree of differentiation	1.087	0.606-1.950	0.779			
Depth of infiltration	2.889	1.722-4.844	<0.001	1.001	0.573-1.749	0.997
Lymph node metastasis	10.691	3.339-34.230	<0.001	1.492	0.325-6.851	0.607
Distant metastasis	14.031	7.908-24.894	<0.001	3.228	1.182-8.819	0.022
AJCC staging	5.292	3.462-8.090	<0.001	2.460	1.169-5.177	0.018
Flot-2 expression	2.929	1.739-4.931	<0.001	1.875	1.069-3.290	0.028

近来有研究^[3, 7-9]证明,在一些人类肿瘤细胞系和肿瘤组织中发现了Flot-2的高表达,并且与患者的不良预后和肿瘤转移有关。Flot-2可以与一些信号分子直接相互作用,例如受体、激酶、黏附分子、G蛋白等,它作为一种肿瘤调节因子通过调控细胞增殖、分化、凋亡、黏附、侵袭^[3]等来调控肿瘤的发生和发展。LIU等^[3]发现Flot-2上调与人黑色素瘤的发展和淋巴结转移有关;有研究^[10-11]显示,Flot-2高表达的乳腺癌患者不论早期还是晚期生存时间均短于Flot-2低表达患者;YANG等^[12]发现转移性的鼻咽癌细胞系中Flot-2表达量高于非转移性鼻咽癌细胞系;研究^[13-14]显示,在裸鼠的移植瘤模型中转入Flot-2基因,SB2黑色素瘤细胞转变成了高致瘤性和高转移性的细胞;非小细胞肺癌中Flot-2表达量高于癌旁组织^[15]。

本研究采用免疫组化方法检测了112例胃癌及对应非癌组织中Flot-2的表达情况,结果表明胃癌组织中Flot-2的表达量明显高于非癌组织,其表达主要定位在胃癌细胞中的细胞质中,Flot-2的表达与肿瘤大小、浸润深度、淋巴结转移、远处转移及AJCC分期显著相关;生存分析显示,Flot-2高表达的患者生存周期明显低于低表达的患者,将可能影响患者预后的因素纳入Cox风险回归模型发现,Flot-2高表达是胃癌预后的独立危险因素,Flot-2对胃癌患者预后评估具有重要意义。

综上所述,胃癌的发生和发展涉及多因素、多分子机制的共同作用,通过检测Flot-2在胃癌和癌旁组织中的表达及其与临床病理参数及预后的关系,表明Flot-2高表达与胃癌的发展、转移密切相关,可作

为胃癌预后判断的指标之一。Flot-2也有望成为免疫药物治疗的靶点及其疗效评估的标准,后续的研究可以从细胞水平对其作用机制进行进一步的探究,为未来的临床研究提供有效的依据。

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[收稿日期] 2018-01-07

[修回日期] 2018-03-11

[本文编辑] 王映红