6th World Congress and Expo on BREAST PATHOLOGY AND CANCER DIAGNOSIS

&

20th International Conference on MEDICINAL CHEMISTRY AND RATIONAL DRUGS July 25-26, 2018 | Vancouver, Canada

Differential expression of rage, EGFR and Ki-67 in primary tumors and lymph node deposits of breast carcinoma

Tarek Aboushousha, Olfat Hammam, Gehan Safwat, Ahmed Eesa, Shaza Ahmed, M Emad Esmat and Ahmed Hazem Helmy Theodor Bilharz Research Institute, Egypt

Background: Breast cancer is a complex disease that results from the inheritance of a number of susceptible genes. Intensive search wok was conducted world-wide on molecular bases of breast cancer in order to achieve the best therapeutic modalities; however, breast cancer still remains a challengeable task. It is very important to determine if the biological parameters in metastatic regional lymph nodes are similar to that in the primary breast cancer because therapy is indicated for patients with synchronous metastatic regional lymph nodes of breast cancer. Difference in therapeutic response in cases of breast cancer may be assumed partially to variability in the biological behavior of tumor tissue in primary breast cancer and lymph node metastasis.

Aim: Our aim is to evaluate any variability in the expression of three types of tissue markers in both the primary breast tumors and corresponding axillary lymph nodes in order to expect the targeted therapeutic effect on both sites.

Material & Methods: Three markers from different categories; RAGE, EGFR and Ki-67 were immunohistochemically studied for their expression in biopsy specimens from primary breast tumors and their corresponding axillary lymph nodes.

Results: There was a statistically significant difference in the expression of these markers between benign and malignant breast lesions. Although we found some differences in the expression of the three studied markers between primary breast cancer and corresponding axillary lymph nodes, yet these variations were mostly not statistically significant.

Conclusion: Our findings support the validity of anti-RAGE and anti-EGFR therapy for treatment of both primary and nodal metastatic breast cancer in immunopositive cases.

t.aboushousha@tbri.gov.eg