

Prognostic Value Of Ki67 In Patients With Locally Advanced Cervical Cancer

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Actuality: A study conducted in patients with locally advanced cervical cancer showed that a high level of expression of the Ki67 proliferation marker in primary patients after neoadjuvant chemotherapy correlated with an unfavorable prognosis, which makes it possible to use these indicators in monitoring the course of the disease. It was shown that before the start of antitumor treatment, the level of Ki67 expression was as high as possible in those patients who subsequently experienced disease progression, and reached 85%. It was revealed that in patients with locally advanced cervical cancer with an expression level of Ki67<50%, the indicators of 5-year overall survival are statistically significantly higher than in patients with locally advanced cervical cancer with an expression level of Ki67>50%.

The aim of the study was to study the prognostic value of Ki67 indicators in patients with locally advanced cervical cancer who received combined treatment using neoadjuvant chemotherapy.

Material and methods. The possibilities of the marker of proliferative activity Ki67 in determining the prognosis of locally advanced cervical cancer were studied. The study material was cervical tumor tissue obtained from 50 patients. The average age of the patients was 40.04 ± 1.7 years.

The initial expression of the immunohistochemical marker in the tumor and after 2 courses of platinum-containing neoadjuvant chemotherapy was evaluated. Immunohistochemical examination was performed according to a standard technique on dewaxed sections from blocks of cervical tissue obtained from cervical resections or biopsies. All preparations were reviewed by a pathologist to clarify the histological diagnosis and the correspondence of the blocks to the selected sections.

Results: It was found that the average proliferation index in patients with locally advanced cervical cancer was 60% . A high and very high level of expression (more than 50%) was observed in 32 (64%) patients with locally advanced cervical cancer, a weak level of Ki67 expression in 8 (16%) patients . The results obtained are consistent with the data of the authors, who claim that the level of proliferative activity of squamous cell carcinoma of the cervix determines the long-term results of treatment, and is also a predictive factor for determining sensitivity to chemotherapy and radiation therapy. In order to study the prognostic value of Ki67 parameters, the dynamics of these indicators in patients with locally advanced cervical cancer before treatment and after 2 courses of polychemotherapy was analyzed. After 2 courses of non–adjuvant chemotherapy, complete regression of the tumor was observed in 2 (4%) patients, partial regression in 44 (88%), stabilization of the process in 4 (8%) patients. The clinical effect of non-adjuvant chemotherapy in patients with locally advanced cervical cancer was manifested in a statistically significant decrease in the volume of the cervical tumor, a decrease in the frequency of intermenstrual spotting, pain syndrome, and contact spotting.

Conclusion. Thus, a high level of Ki67 proliferative activity in primary patients after neoadjuvant chemotherapy is correlated with an unfavorable prognosis. High levels of Ki67 significantly affect 5-year overall survival. The results of the study emphasize the importance of these parameters and confirm their predictive role in the prognosis of locally advanced cervical cancer.

References:

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