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食道癌における血中循環腫瘍細胞測定と予後の評価

(Evaluation of the circulating tumor cell (CTC) measurement and prognosis in esophageal cancer)

北野 裕巳 (きたの ひろみ)

博士 (医学)

<u>Abstract</u>

Esophageal cancer is a disease of poor prognosis compared with other cancers. It has been on an increase due to the changes in lifestyle.

In some patients who showed no sign of distant metastases in conventional preoperative investigations, relapse occurs in distant organs within a few years after the radical resection of esophageal cancer. There are various recurrence forms, however, hematogenous metastasis has become one of the most important prognostic factor in recurrence in radical resection.

In order to demonstrate the presence of cancer cells in the peripheral blood of advanced cancer, it has been investigated by PCR and immunohistochemical method, no detection method has been established yet.

In recent years, there have been many studies in blood circulating tumor cells (CTC) of prostate cancer, breast cancer, and colon cancer. If the presence of CTC in metastatic patients peripheral blood has been confirmed, the prognosis is reported to be poor.

We evaluated whether CTC can be a prognostic factor in esophageal cancer.

We examined 45 cases that were treated since April 2013 at Juntendo University.

The analysis was carried out on the following end-points; tissue type, lesion site, invasion depth, lymph node metastasis and staging, and tumor marker, all of which could influence the prognosis.

As a result, CTC did not affect the prognosis directly, however it showed a correlation with CYFRA, the tumor marker. It has been reported that CYFRA positives could be one of the poor prognostic factors of recurrence in esophageal squamous cell cancer. Therefore, it is possible for CTC to be a prognostic factor in esophageal cancer.

It is necessary to continue tracking the recurrence and prognosis of the present cases, moreover, it is also important to increase the number of cases in the future.

It has been suggested the possibility of CTC, along with CYFRA, becoming a prognostic factor in esophageal cancer.