GASTROINTESTINAL NEWS

Newsletter di aggiornamento sui tumori gastrointestinali



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GASTROINTESTINAL NEWS nel 2007 si presenta rinnovato sia nella veste che nel contenuto. Nato per iniziativa del comitato scientifico e coordinato da Intermedia, mantiene la pubblicazione quindicinale e continua ad occuparsi di cancro gastrointestinale. Le news non verranno più tradotte in italiano, ma pubblicate in lingua inglese e, una volta al mese, verrà proposto un commento su un particolare articolo, preparato da un componente del comitato scientifico.

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Different faecal sampling methods alter the acceptability of faecal occult blood testing: A cross sectional community survey - European Journal of Cancer 2007; Volume 43, Issue 10, July: Pages 1437 - 1444 (abstract)

Prognosis and risk factors of metastasis in colorectal carcinoids: results of a nationwide registry over 15 years - Gut 2007; Volume 56, Number 6 June: Pages 863 - 868 (abstract)

Meat and meat-mutagen intake, doneness preference and the risk of colorectal polyps: The Tennessee colorectal polyp study - International Journal of Cancer 2007; Volume 121, Issue 1, 1 July: Pages 136 - 142 (abstract)

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NEWS DALLA RICERCA

Different faecal sampling methods alter the acceptability of faecal occult blood testing: A cross sectional community survey

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Background A bowel cancer screening programme is being introduced in the UK. The programme will screen men and women aged 60–69 using faecal occult blood testing (FOBt). Uptake rates in the pilot evaluation were <60%. This study aimed to determine whether the acceptability of FOBt is associated with the sampling method or previous exposure to FOBt.

Methods Postal questionnaire assessing the perceived acceptability of three potential methods of FOBt sampling: (1) sterile transport swab; (2) smear card [as used in the national screening roll-out]; (3) faecal specimen pot [routinely used in the NHS for stool samples]. Study population comprised those aged 50–69.

Results Response rate was 63%. FOBt was reported as acceptable by 94.5%. Acceptability fell significantly when sampling methods were detailed. The swab was rated more acceptable than the card or the pot (90.2% versus 62.9% versus 63.0%, p < 0.0005). FOBt acceptability did not vary with previous experience of FOBt.

Conclusions The acceptability of FOBt varied by the sampling method described. The smear card, such as that used in the national screening programme, was the least preferred method. To increase the uptake of screening, alternative methods of faecal sampling should be considered.

Prognosis and risk factors of metastasis in colorectal carcinoids: results of a nationwide registry over 15 years

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Background: Colorectal carcinoids are often described as low-grade malignant. However, no study has compared the survival between patients with colorectal carcinoids and those with carcinomas, in a large series. In addition, no global consensus has been established on the crucial determinants of metastasis in colorectal carcinoids.

Aim: To determine the predictive factors for metastasis in colorectal carcinoids and clarify their prognosis compared with adenocarcinomas.

Methods: Data of all patients diagnosed as having colorectal carcinoids were extracted from a large nationwide database of colorectal tumours, the Multi-Institutional Registry of Large-Bowel Cancer in Japan, for the period from 1984 to 1998. Risk factors for lymph node (LN) metastases and distant metastases were analysed among those who were undergoing surgery, by univariate and multivariate analysis. Cancer-specific survival was also compared between patients with colorectal carcinoids and those with adenocarcinomas registered in the same period.

Results: Among the 90,057 cases of colorectal tumours that were diagnosed, a total of 345 cases of carcinoids were identified, including 247 colorectal carcinoids of those undergoing surgery. Risk factors for LN metastasis were tumour size ≥ 11 mm and lymphatic invasion, whereas those for distant metastasis were tumour size ≥ 21 mm and venous invasion. Colorectal carcinoids without these risk factors exhibited no LN metastasis or distant metastasis. Cancer-specific survival of patients with colorectal carcinoids without metastasis was better than that of those with adenocarcinomas. However, the survival was similar between carcinoids and adenocarcinomas if the tumours had LN metastasis or distant metastasis.

Conclusions: The presence of metastasis in colorectal carcinoids could lead to survival that is as poor as in adenocarcinomas. Tumours ≤ 10 mm and without lymphatic invasion could be curatively treated by local resection, but others would need radical LN dissection.

Meat and meat-mutagen intake, doneness preference and the risk of colorectal polyps: The Tennessee colorectal polyp study

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Although meat intake has been fairly consistently linked to the risk of colorectal cancer, only a few studies have evaluated meat intake by doneness level and the heterocyclic amines (HCAs) and polycyclic aromatic hydrocarbons (PAHs) produced by high temperature cooking of meat in relation to colorectal adenomatous and hyperplastic polyps. We evaluated these associations in a large colonoscopy-based case-control study. Included in this study were participants with adenomatous polyp only (n = 573), hyperplastic polyp only (n = 256), or both adenomatous and hyperplastic polyps (n = 199), and 1.544 polyp-free controls. In addition to information related to demographic and other lifestyle factors, meat intake by cooking method and doneness preference were obtained through telephone interviews. Polytomous logistic regression models were used to estimate odds ratios (OR) and 95% confidence intervals for the association between exposures and colorectal polyp risks. Presence of hyperplastic polyp was found to be positively associated with high consumption of total meat ($p_{\rm trend} = 0.076$) or red meat ($p_{\rm trend} = 0.060$), with an approximate 50-60% elevated risk observed in the highest vs. the lowest intake group. High intake of 2-amino-I-methyl-6-phenylimidazo[4,5-b]pyridine (PhIP) and 2-amino-3,4,8-trimethylimidazo [4,5]quinoxaline (DiMeIQx) were associated with increased risk for hyperplastic polyp ($p_{\rm trend} = 0.036$ and 0.038, respectively). With a possible exception of the intake of total well-done meats ($p_{\rm trend} = 0.055$) or well-done red meats ($p_{\rm trend} = 0.074$) with the risk of large adenomas, no other positive association was found specifically for the risk of adenomas with any of the exposure variables aforementioned. This study provides additional support for a positive association of high intake of red meat with colorectal adenomas, and suggests that high intake of meats and meat carcinogens may also be associated with hyperplastic polyps.

Comparison of oxaliplatin- and curcumin-mediated antiproliferative effects in colorectal cell lines

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Abstract Colorectal cancer remains a leading cause of cancer death worldwide, despite markedly improved response rates to current systemic therapies. Oxaliplatin either alone or incorporated into 5-fluorouracil/leucovorin regimes has resulted in increased survival rates, particularly with regards to metastatic colorectal carcinoma. The chemopreventive polyphenol curcumin, which is currently in clinical trial, has been advocated for use in colorectal cancer either singly or in combination with chemotherapeutic drugs. In this study, the antiproliferative capacity of both compounds was compared in HCEC (normal-derived), HT29 (p53 mutant adenocarcinoma) and HCT116 (p53wt adenocarcinoma) colorectal cell lines to determine whether effects were cell-type specific at pharmacologically achievable doses, and whether the combination resulted in enhanced efficacy. Both oxaliplatin and curcumin displayed marked antiproliferative capacity at therapeutic concentrations in the two tumor cell lines. Order of sensitivity to oxaliplatin was HCT116>HT29>HCEC, whereas order of sensitivity to curcumin was HT29>HCT116>HCEC. HCT116 cells underwent induction of G2/M arrest in response to both oxaliplatin (irreversible) and curcumin (reversible). Apoptosis was induced by both agents, and up to 16-fold induction of p53 protein was observed in response to the combination. Antiproliferative effects in HT29 cells were largely cell cycle independent, and were mediated by induction of apoptosis. Effects were greatly enhanced in both cell lines when agents were combined. This study provides further evidence that curcumin may be of use in therapeutic regimes directed against colorectal cancer, and suggests that in combination with oxaliplatin it may enhance efficacy of the latter in both p53wt and p53 mutant colorectal tumors.

APPUNTAMENTI

XV Conferenza Nazionale AIOM

Le neoplasie del tratto gastro-enterico superiore Bari, 6-8 settembre 2007 Hotel Sheraton Nicolaus

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