P53 EXPRESSION AS A RISK FACTOR IN TYPE 1 ENDOMETRIAL CANCER ¹Mahmoud El Sayed Hanfy Meleis, ¹Ahmed Samy El Agwany, ²Rania Gaber Mohamed Hassan Aly, ¹Thacien Ndisebuye ¹Department of Obstetrics and Gynecology, ² Department of Pathology, Faculty of Medicine, Alexandria University

Tumor genesis has been thought to be significantly influenced by mutations of the tumor suppressor gene p53. In several types of cancer, clinically excessive p53 expression or the complete absence of p53 detection are predictive of TP53 mutations and have been linked to a poor prognosis. P53-abnormal proteins are one of the prognostic factors associated with a poor outcome in endometrial cancer. Type 1 endometrial carcinoma is the most frequent type of endometrial carcinoma and is generally associated with better clinical outcomes. Despite this, the incidence of recurrence is increasing. Few studies have explored the prevalence of p53 expression in this type of cancer in routine clinical practice. Immunohistochemistry for p53 is accurate and can help stratify those who could have aggressive molecular p53 mutants but with favourable clinicopathologic features.

Aim of the work.

The aim of this study was to investigate the prevalence of P53 expression by immunohistochemistry among patients with type 1 endometrial cancer.

An observational, analytical cross-sectional study was conducted over one year and three months on 113 patients with primary type 1 endometrial carcinoma who were consecutively diagnosed by D&C and histopathology or confirmed on hysterectomy specimens. Preoperative evaluation for staging was done with ultrasound and MRI when indicated; D&C biopsy and paraffin-embedded tissues were examined for histopathological features and expression of P53 using immunohistochemical staining techniques on endometrial tissues or hysterectomy specimens, and this was done on 63 patients.

Data were fed to the computer and analyzed using the IBM SPSS software package, version 20.0. (Armonk, NY: IBM Corp).

Results

Table (1): Relation between P53 expression with different parameters (n=63#)					Postoperative /Pathological	Wild type	Mutant			
	Wild type	Mutant			specimen characteristics	(n=41)	(n=22)	C2	р	
	(n=41)	(n=22)	Test of	р	- Tumor stage	INO. (%)	INO. (%)			
	No. (%)	No. (%)	sig.		N/A	7 (17.1%)	7 (31.8%)	1.801	FEp=0.213	
Age (years)					Ĭ	28 (68.3%)	10 (45.5%)	3.120	0.077	
<60	18 (43.9%)	3 (13.6%)	$c^2 =$	0.015*	IA	19 (46.3%)	4 (18.2%)	4.898*	0.027*	
≥60	23 (56.1%)	19 (86.4%)	5.902*	0.015	IB	9 (22%)	6 (27.3%)	0.224	0.636	
Median (Min. – Max.)	60 (35 - 75)	62 (4 - 76)	t=	0.125	II	3 (7.3%)	2 (9.1%)	0.062	FEp=1.000	
Mean ± SD.	59 ± 8.3	62.1 ± 6.6	1.515	0.155	III	3 (7.3%)	3 (13.6%)	0.664	FEp=0.413	
BMI (kg/m ²)					IIIA	2 (4.9%)	3 (13.6%)	1.503	FEp=0.333	
<30	0 (0%)	2 (9.1%)	$c^2 =$	^{FE} p=	IIIB	1 (2.4%)	0 (0%)	0.545	FEp=1.000	
≥30	41 (100%)	20 (90.9%)	3.849	0.118	Histology grade					
Median (Min. – Max.)	40 (30 - 69)	40 (22 - 52)	t=	0.916	N/A	7 (17.1%)	7 (31.8%)	7.052	MCp= 0.072	
Mean ± SD.	39.6 ± 7.5	39.8 ± 7.7	0.106		I	13 (31.7%)	1 (4.5%)			
Disease stage					II	16 (39%)	11 (50%)			
I	32 (78%)	15 (68.2%)	c ² =0.736	0.391	III	5 (12.2%)	3 (13.6%)			
IA	27 (65.9%)	9 (40.9%)	c ² =3.638	0.056	Lymph vascular space invasion					
IB	5 (12.2%)	6 (27.3%)	c ² =2.258	FEp=0.170	N/A	7 (17.1%)	7 (31.8%)	1.803	MCp=	
II	5 (12.2%)	2 (9.1%)	c ² =0.140	FEp=1.000	Negative	27 (65.9%)	12 (54.5%)			
III	4 (9.8%)	5 (22.7%)	c ² =1.967	FEp=0.256	Positive	7 (17.1%)	3 (13.6%)		0.570	
IIIA	2 (4.9%)	1 (4.5%)	c ² =0.003	FEp=1.000	Lymph node metastasis					
IIIB	1 (2.4%)	1 (4.5%)	c ² =0.207	FEp=1.000	Not submitted	19 (55.9%)	9 (60%)	0.072	0 788	
IIIC1	1 (2.4%)	1 (4.5%)	c ² =0.207	FEp=1.000	Negative	15 (44.1%)	6 (40%)	0.072	0.700	
IIIC2	0 (0%)	2 (9.1%)	c ² =3.849	FEp=0.118	χ^2 : Chi square test FE: Fisher Exact MC: Monte Carlo					
Tumor grade					p: p value for comparing between the two studied P53 expression categories					
I	14 (34.1%)	1 (4.5%)	c ²	0.031*	*• Statistically significant at $n < 0.05$					
II	21 (51.2%)	16 (72.7%)	6.03/*		· Stadstreamy significant at p _	0.00				
III	6 (14.6%)	5 (22.7%)	0.954		Completion					
Endometrioid carcinoma						n.				
-Endometrioid	27 (65 9%)	16 (72 7%)		0.576	0011011010					
adenocarcinoma	27 (05.970)	10 (12.170)	$c^2 =$		This study showed that the P53 null-type pattern is also found in type 1					
-Endometrioid	14 (34 1%)	6 (27.3%)	0.312		endometrial carcinoma and non-testing of p53 expression could result in					
adenocarcinoma Variants	1+(3+.170)	0(27.370)			under or overtreatment. It also revealed that n53 expression and mutant					
- with villoglandular	10(24.4%)	1 (18 2%)	$c^2 =$	^{FE} p=	time are directly related to adverse d and a history					
variant	10 (24.470)	4 (10.270)	0.319	0.753	type are directly related to advanced age and a higher preoperative					
-with squamous diferentiation	4 (9.8%)	2 (9.1%)	c ² =0.007	FEp=1.000	histology grade.					

 χ^2 : Chi square test

FE: Fisher Exact t: Student t-test p: p value for comparing between the two studied P53 expression categories *: Statistically significant at $p \le 0.05$

Table (2): Relation between p53 wild type and mutant with postoperative /histopathological specimen characteristics (n=63[#])

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