Sociedad de Biología de Cuyo

XXXVII Reunión Científica Anual

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Centro Cultural José La Vía

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operative findings showed an appendicular mucocele (13x5 cm) with the presence of mucus in the peritoneal cavity. The anatomopathological examination described a mucinous cystadenocarcinoma of the cecal appendix, associated with peritoneal metastasis of mucinous cystadenocarcinoma. Therefore, in a second surgery, right hemicolectomy and intraperitoneal chemotherapy were performed. In addition to the case report, we expose a brief update of the current knowledge about the histopathological features and the molecular biology of this neoplasm.

61. ANGIOTENSINOGEN M235T POLYMORPHISM AND HYPERTENSION IN A SAN LUIS POPULATION

Correa MM[1, 2], Arce ME[1], Fuentes LB[1,2].
1 Laboratorio de Farmacología - Facultad de Química, Bioquímica y Farmacia - Universidad Nacional de San Luis;
2 IMIBIOSL, CONICET. mariamilagroscorrea@gmail.com

Hypertension (HTA) is a polygenic disorder resulting from the interaction of several genetic and environmental factors. Renin angiotensin system (RAS) gene polymorphisms have relevant participation to develop HTA. The study of RAS polymorphisms is very controversial, and its identification in HTA patients is required. The aim was to investigate a possible association between theM235T polymorphism of the angiotensinogen (AGT) gene and hypertension in a San Luis-Argentina population. A case-control study was performed in 107 hypertensive patients (51% women) and 58 controls subjects (67% women) from Juana Koslay Hospital (2014-2015). Blood pressure and body measurements were recorded. A blood sample was obtained and polymorphism AGT M235T was performed by Polymerase Chain Reaction combined with Restriction Fragment Length Polymorphism (PCR-RFLP). Mean age (years): 54.2 ± 9.3 HTA and 39.2 ± 13.7 control (P<0.0001), Body Mass Index (kg/m2): 31.7 ± 5.3 HTA and 27.1 ± 4.8 control (P<0.0001). Systolic and diastolic blood pressure (mm Hg): 152.4 ± 15.3 / 90.1 ± 9.9 HTA and 118.0 ± 11.2 / 71.0 ± 9.4 control subjects (P<0.0001). We found Hardy-Weinberg equilibrium in all groups studied (P>0.05). The genotype frequency of M235T was: MM 12.1%, MT 48.5% and TT 39.2% in HTA patients and MM 15.5%, MT 51.7% and TT 32.5% in control individuals, no significant difference was found in the patients studied. The allele frequency was M 0.36 and T 0.63 in hypertensive patients and M 0.41 and T 0.58 in control subjects. Chi square analysis showed T allele was statistically significant in HTA patients (P<0.0002). The carriers of T allele had a significantly increased risk of hypertension (OR= 2.47, 95%CI: 1.55–3.92; P<0.0002) in the population studied. The AGT M235T could be relevant role in the genetic predisposition to develop essential hypertension in San Luis population.

62. PHOSPHORYLATED HSP90α AS PREDICTIVE AND PROGNOSTIC BIOMARKER IN TUMORS FROM PATIENTS TREATED WITH PLATINUM ANALOGS

Cuello Carrión FD[1], Semino S[2], Ibarra J[3], González L[3], García MB[3], Vargas Roig LM[4], Nadin, SB[4].
[1]Laboratorio de Oncología, IMBECU-CCT-CONICET-Mendoza, UNCuyo. [2]Hospital Universitario Mendoza. [3]Centro Oncológico de Integración Regional, Mendoza, Argentina. [4]Laboratorio de Biología Tumoral, IMBECU-CCT-CONICET-Mendoza, UNCuyo. snadin@mendoza-conicet.gob.ar

The heat shock protein HSP90α is a ubiquitous molecular chaperone specially required for cancer cells as it chaperones proteins involved in oncogenesis, making it an attractive target for anticancer therapy. Phosphorylated HSP90α (P-HSP90α) on the threonine 7 (Thr-7) accumulates at the sites of DNA damage, involving this protein in DNA damage response. In addition, the basal level of P-HSP90α has been proposed as a surrogate biomarker for genetic instability in tumor cells. Platinum analogs (cisplatin, carboplatin) that are widely used for the treatment of many solid tumors damage DNA by forming covalent adducts. Platinum-DNA adducts are bulky lesions that interfere with DNA replication machinery, resulting in the formation of DNA double strand breaks. These lesions can lead to genomic instability and cell death. Unfortunately, the development of resistance to platinum-based agents may limit efficacy of the chemotherapy. Thus, it remains a need for biomarkers of cisplatin-response and prognosis for cancer patients. Our aim was to determine the predictive and prognostic ability of P-HSP90α in primary tumors from cancer patients who received platinum-based chemotherapy (cisplatin/carboplatin). P-HSP90α expression was determined by immunohistochemistry in paraffin-embedded tumor tissues from 51 cancer patients before chemotherapy, with a mean follow-up of 19.2 months. The expression of the protein was evaluated according to a staining intensity score and proportion of positive tumor cells. Clinical response was assessed after the third cycle of chemotherapy. Disease-free (DFS) and overall survival (OS) were periodically determined. Patients with complete clinical response or partial response to chemotherapy showed nuclear expression of P-HSP90α in contrast with tumors from patients with stable disease or progressive disease (P<0.01). In addition, patients with high cytoplasmic proportion of P-HSP90α had a significantly worse OS (P<0.05). No statistically significant relationship was found between P-HSP90α expression and DFS. Our preliminary results provide evidence that P-HSP90α could be a potentially valuable biomarker in predicting response to platinum-based chemotherapy and, may also be useful for defining the prognosis of the disease.