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## ■背景资料

原发性肝癌是我国最常见的恶性肿瘤之一,我国每年新发病例约占全球的45%,已成为世界上肝癌发病最集中的地区。经过近半个世纪的努力,我国医务工作者在肝癌的防治上已取得了举世瞩目的成绩。但肝癌发生发展迅猛,复发率和转移率很高,要提高肝癌患者生存率应加强肝癌的基础研究,促进肝癌早期诊断技术和生物治疗的发展。

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## 摘要

在肝细胞癌(HCC)发生发展过程中,伴随着原癌基因和抑癌基因的突变,各种参与调控的细胞因子表达也发生异常并最终影响疾病的进程和转归。目前对肝细胞癌的分子病理学研究已经集中在这些细胞因子的异常表达及其相互关系网络上,HBx蛋白 SAM TGF等细胞因子的研究已经十分深入,而且,随着各种新技术的应用,更多的低丰度调控蛋白也逐渐被发现,其在肝细胞癌细胞增殖调控 异常分化 衰老和凋亡调节以及肿瘤演进等方面起着重要作用。

**关键词:** 肝细胞癌; 癌基因; 抑癌基因; 突变; 细胞因子

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## 0 引言

(SELDI)  
fmol

## 1 细胞增殖的调控

(HCV) (HBV) B1  
HBV (HBV) X  
HBV (S) HBV p53  
FAK Src [2-3] DNA  
HBx p53 E-box p53 PTEN  
AKT HBV p53  
HBx HBV  
Zhu *et al*<sup>[4]</sup> HBx  
C57-TgN(HBx)  
C57BL/6 (DEN) DEN C57BL/6

HCV ( )

, 2 a , 1 a [14].

[5]. HCV IFN , , G<sub>1</sub> , , G<sub>1</sub>

, 5A(NS5A) . Peng *et al* [15]

[6]. NS5A ,

3 (STAT3) D1 (>2.5 cm)

, ( - ) ,

, STAT3 HCV E

NS5A , ,

, NS5A STAT3 D1 E

Bcl-xL p21 , NS5A p53 , G<sub>1</sub>

Jak1 STAT3, p53

. -γ- (DCP) ,

Met Janus 1 .

STAT3 [7], DCP

Myc ,

3- /Akt . ,

, p53 ,

249 (p53mt249), . (

AAG AGT<sup>[8]</sup>. p53 )

, , DNA

(IGF- receptor, IGF-IR) , S- (SAM) ;

(insulin-like growth factor , IGF- )P3 6 moSAM ,

, IGF- SAM

IGF-IR , [16]. (1) SAM

. p53mt249 SAM

IGF- IGF-IR ; (2) , DNA

, [9], G<sub>0</sub> SAM/SAH(S- ) ;

G<sub>1</sub> . Kong *et al* [10] , (3)DNA 5- SAM

, (RZ) p53 , DNA ; (4)c-Ha-ras

42%, p53, c-Ki-ras c-myc

, SAM/SAH ;

(5)SAM DNA .

IGF- “

, ” , ,

, IGF- .

, (PCNA) , ,

(HCC) , “ ” . ,

[11-12].

Alexia *et al* HepG<sub>2</sub> Huh-7 . Oh *et al* [17] (CH)

, (LGDNs)

IGF- , IGF- / (HGDNs) HCC

/ HCC , (TRFL) (TA) ,

[13]. , IGF- TRFL TA LGDNs HGDNs

IR h7C10 . LGDNs TRFL TA CH,

# ■ 研发前沿

肝癌研究热点主要集中在肝炎病毒感染、细胞凋亡、癌基因和抑癌基因与肝癌的关系、肝癌演进的分子机制、细胞因子在肝癌发生发展中的作用等方面。

# ■同行评价

本文介绍了肝细胞癌发生发展过程中一些细胞因子的异常表达及其相互关系,内容丰富,新颖,能反映涉及到的肝细胞癌基础研究的前沿进展,具有先进性,文字流畅,可读性强。

HGDNs, LGDNs TRFL 17%, ; , P-gp  
7%LGDNs TA, HGDNs TRFL  
TA HCC , , P-gp 87%,  
, , LGDNs p53  
HGDNs , 12.5%, 52%,  
HGDNs HCCs. 82.5%, ,  
, HBV X , P-gp p53  
(hTERT) mRNA ; , :  
, HBV P-gp  
[18] p53 [25]  
(IFN) , p53 HCC  
[19] [26]  
,  
JAK/STAT S  
MEK/ERKt [20]  
,  
, IFN- $\beta$  (DHEA-  
IFN- $\alpha$ , S ST)  
[21] [22]  $\alpha$  Con1(IFN- $\alpha$  DHEA-ST  
Con1) KIM-1 HAK-1B DHEA-ST  
, IFN- $\alpha$   
Con1 EBAG9 ,  
, IFN- $\alpha$  , RCAS1 ,  
Con1 RCAS1, T  
,  $\alpha$  (TILs)  
[27] EBAG9/RCAS1  
[23]. , IFN- $\alpha$  8  
IFN- $\alpha$ 2, - $\alpha$ 5 - $\alpha$ 10 , IFN- $\alpha$ 1 [28], EBAG9/RCAS1  
, EBAG9/RCAS1  
, EBAG9/RCAS1  
2',5'- (2'5'-OAS)  
, HAK-3 , KYN-3 RCAS1  
2'5'-OAS.

## 2 癌细胞的去分化

[29]. RCAS1  
RCAS1  
A<sub>2</sub>( PLA<sub>2</sub>)  
Nakano *et al* [24]  
41 P- PLA<sub>2</sub>  
(P-gp) P53  
P-gp ; , Ohshima *et al* [30]  
, P-gp PLA<sub>2</sub>

PLA<sub>2</sub> , MT

PLA<sub>2</sub> , : , [33]

MT MT1 MT2

MT Zn-MT

HCC HCC(<40 mm) , MT Cu ;

HCC(> = 40 mm) , MT Cu Zn

(CD-Ks), cyclin D , SOD Cu Zn [34]

; cyclin-CDK

(cyclin-dependent kinasein-hibitors, CKIs)

### 3 癌细胞衰老及凋亡调节

7 CKIs, ,

: Ink4 (inhibitor of cdk4) , *caspase bcl-2* p53

p15 p16 p18 p19, , [35]

cdk4/cdk6-cyclin D ;

Cip/Kip(CDK-interacting protein/kinase inhibitor protein) , P21<sup>kip1</sup>, P27<sup>kip1</sup> P57, ,

cyclin-CDK . HCC , HCC 1p, 4q, 6q, 8p, 13q 16p

cyclin D1 . p16 (loss of heterozygosity,

CKIs , LOH)<sup>[36-38]</sup> ,

, HCC (MSI) , LOH [39]

,

HCC CKIs. *et al*<sup>[31]</sup>

38 P16 P21 , HCC

, P16 [40] *et al*<sup>[41]</sup>

(58%) ; Edmondson DNA , 56 HCC 1p36

- Edmondson - 10

HCC, >3 cm HCC 3 cm , LOH 69%, LOH RIZ ,

HCC, . P21 , D1S199. LOH AFP HBsAg

Edmondson

; D1S2893 D1S507 ,

HBsAg LOH HBsAg

, P16 HCC ; D1S199 , AFP LOH

AFP ; D1S468 ,

(MT) , LOH

HCC lp36 LOH, HCC

,

1957

[32], MT p53 ,

,

, P53 , p21

, MT *bax* , p53

p53

CD95 ,

. MT Fas [42]

,

*et al*<sup>[43]</sup>

(PCNA) p53 Fas

(AI)  
PCNA (LI) p53 Fas HCC  
; AI P53 . SJ-8026  
Fas HCC ;  
LI HCC : [50]  
; Edmondson TNM  
; AI , LI p53 , HCC Hsp-70  
, Fas . HCC (DCs),  
PCNA HCC T [51].

#### 4 肝细胞癌的演进

(TGF)- $\beta$ 1  
. TGF- $\beta$ 1  
TGF- $\beta$  II (TGR2)  
. Park *et al* [44]  
TGF- $\beta$ 1 , TGR2  
. TGF- $\beta$ 1  
TGR2 ,  
, TGR2 TGF- $\beta$ 1  
NF-kappaB c-Src  $\beta$ 1  
MAP TGF- $\beta$ 1  $\alpha$ 5 CD44  
uPA  
[45-47].  
[48] syndecan-1 p27 KAI 1 nm23 -H1  
(PBR) HCC galectin-3  
PBR  
caspase-3 -1  
, PBR Bcl -2 (MMP)-1 MMP-7  
Bcl-xl . PBR ;  
G<sub>1</sub>/S G<sub>2</sub>/M , MMP-3 MMP-9  
PBR HCC  
, Yu *et al* [49]  
MK , MK MMPs  
HCC [52]  
. E1A MK  
(AdMK)  
AdMK  
, AdMK Torimura *et al* [53]  
AdMK , b1  
MK

MMPs, bFGF

Zhang *et al*<sup>[54]</sup>,  $\beta 1$ , MAP, bFGF 0.22 71.2 ng/L

$\beta 1$ , TNM, bFGF >10.8 ng/L

et al<sup>[55]</sup>, Frachon, adiponectin, HCC

CD34 BNH9, CD31, FGF adiponectin<sup>[60]</sup>

29% 47%, 75%<sup>[61]</sup>, (MDR), MDR

100%, Ets-1 c-Met HGF

3, iNOS MDR

, CD31, CD34 BNH9, 27(HSP27)

et al<sup>[56]</sup>, 2  $\beta$ -1<sup>[62]</sup>, S

(Ang21) Angiopoietin 21, Angiopoietin 22(Ang22)<sup>[63]</sup>, Yasuda *et al*<sup>[64]</sup>, HCC

HSP27

: Ang21 mRNA (Ser-15, Ser-78, and Ser-82)HSP27

HSP27, HSP27

Ang22mRNA, Ang22, TNM, HSP27

Ang22, HSP27

, C, HSP27<sup>[65]</sup>

, Ang22, HCC, 70(HSP70)

(VEGF), HSP27, Ki-67

<sup>[57]</sup>, HCC

et al<sup>[58]</sup>, HCC LOH<sup>[66]</sup>, APC,

VEGF flk1 flt1, OGG1 DCC LOH, p53

RB1 LOH

8p12 HTPAP

VEGF flk1 flt1 826 bp, NH2 175

; VEGF, HCC

, VEGF flk1/flt1, HTPAP

, HCC, 8p

(bFGF)<sup>[67]</sup>

, Poon *et al*<sup>[59]</sup>

LCM(

Endo *et al*<sup>[68]</sup>

[74]

 $\alpha$ -,  $\beta$ -,  $\gamma$ -

13

(13 752 kDa)

 $\alpha$ -,  $\beta$ -,  $\gamma$ - 11 472 kDa) $\gamma$ - $\beta$ -Endo *et al*

5

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 $\alpha$ - $\beta$ -

sLeX

Zhang *et al*<sup>[69]</sup>

sLeX

AFP

CK19<sup>[70]</sup>osteopontin<sup>[71]</sup>

COX-2

MMPs

Ozaki *et al*<sup>[72]</sup>

RT-PCR

MMPs

HGF c-Met

Ets

mRNA

MMP-1, -3, -7

MMP-2, -9

MMPs HGF

Ets-1

[73]

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## 1 稿件要求

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