

# [실습 강의] MeSH 색인

의편협 MeSH 소위원회

김수영

# 실습 순서

- 논문 정독(주로 초록)
- 저자 키워드 MeSH 여부 확인
- 비슷한 논문 찾기
  - 참고문헌에서 주요 참조 문헌 검색
  - PubMed에서 직접 찾기

## Clinicopathologic Characteristics and Prognostic Factors of Long-term Survivors of Borrmann Type 4 Gastric Cancer

Je Ho Ryu, M.D., Jeong Hwan Yook, M.D., Byung Sik Kim, M.D., Sung Tae Oh, M.D.,  
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**Background/Aims:** Prognosis of Borrmann type 4 gastric cancer is still poor. To improve the prognosis of patients with Borrmann type 4 gastric cancer, it is important to understand the clinicopathological features of patients with a long-term survival. Thus, we compared the characteristics of the patients with a long-term survival (survival duration more than 5 years) with patients with a short-term survival. **Methods:** We analyzed retrospectively 370 patients who were diagnosed as having Borrmann type 4 gastric cancer and underwent gastric resection between 1989 to 1997 at our hospital. Twenty-one percent of the patients survived longer than 5 years. For comparison of clinicopathological factors, the chi-square test was used and multivariate analysis was performed in order to focus on prognostic factors. **Results:** The 5-year survival rate of the total 370 patients was 21%. Significant difference was noted in the following variables: location of tumor, size, peritoneal metastasis, hepatic metastasis, lymph node metastasis, depth of invasion, stage and curability. In multivariate analysis, the location of tumor was the most significant independent prognostic factor. **Conclusions:** These results suggest that even in Borrmann type 4 gastric cancer, a localized disease can be cured by a radical resection. (*Korean J Gastroenterol* 2003;41:9-14)

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**Key Words:** Stomach neoplasms; Borrmann type 4; Prognosis; Long-term survivors

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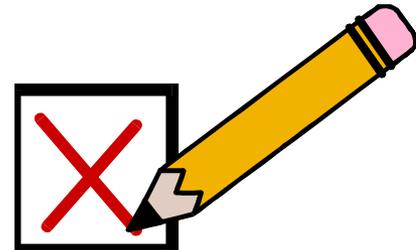
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**1:** [Peptic Ulcer](#)

Ulcer that occurs in those portions of the alimentary tract which come into contact with gas containing pepsin and acid. It occurs when the amount of acid and pepsin is sufficient to o gastric mucosal barrier.

# 용어 자체

- Stomach neoplasm(O)
- Borrmann type 4(X)
  - Neoplasm stagings
- Prognosis(O)
- Long-term Survivors(O)



# 참고문헌에서 찾기

에서 left upper abdominal evisceration과 Appleby 술식을 시행함으로써 림프절 광청술이 훨씬 용이할 뿐 아니라, 3년 생존율도 병기가 2, 3기인 경우 위전절제술을 시행한 그룹보다 좋은 것으로 보고하고 있다. 많은 보고들이 경성 위암 환자에 대해 화학요법, 내분비요법, 다병합 치료를 시행하여 효과가 있음을 보고하고 있다.<sup>16-18</sup>

근치적 절제 후에 단기 및 장기 생존자에 대한 비교 분석에서 어떠한 임상병리학적 인자도 두 군 간의 중요한 차이를 보여 주지 않았다. 따라서 근치적 절제를 시행한 후에는 장기 생존을 예측하기가 어렵다고 생각한다.

4형 위암이 많은 부위를 침범하고 병기가 진행된 상태에서 진단되고 복막 전이가 빈번하게 일어나는 예후가 불량한 암일지라도, 국소 부위를 절제한 크기가 작은 4형 위암에서는 근치적 절제술을 시행함으로써 생존 기간의 연장을 기대할 수 있을 것으로 생각한다.

## 요 약

목적: 4형 위암은 뚜렷한 종양의 돌출이나 케양 소견 없이 암세포의 미만성 침윤과 그로 인한 위벽의 비후라는 특

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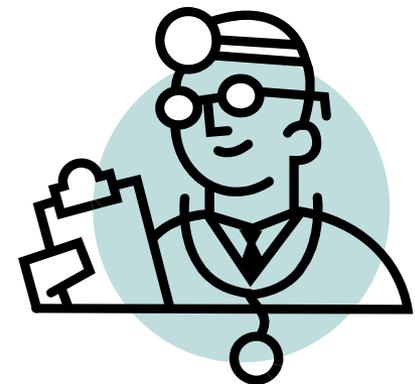
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**Lower survival rate for patients with carcinoma of the stomach of Borrmann type IV after gastric resection.**

**Maehara Y, Moriguchi S, Orita H, Kakeji Y, Haraguchi M, Korenaga D, Sugimachi K.**

MeSH Terms:

- Comparative Study
- Female
- Gastrectomy
- Human
- Male
- Middle Age
- Neoplasm Staging
- Prognosis
- Retrospective Studies
- Stomach Neoplasms/pathology\*
- Stomach Neoplasms/surgery\*
- Survival Analysis



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Long-term results of a phase-II-pilot trial on preoperative high chemotherapy with stem cell rescue in patients with cancer of gastrointestinal tract. Oncol Rep. 2001 Mar-Apr;8(2):341-2. PMID: 11182052 [PubMed - indexed for MEDLINE]

2: [Hochwald SN, Kim S, Klimstra DS, Brennan MF, Karpeh MS.](#)

Analysis of 154 actual five-year survivors of gastric cancer. J Gastrointest Surg. 2000 Sep-Oct 4(5):520-5. PMID: 11077328 [PubMed - indexed for MEDLINE]

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**Analysis of 154 actual five-year survivors of gastric cancer.**

**Hochwald SN, Kim S, Klimstra DS, Brennan MF, Karpeh MS.**

MeSH Terms:

- Female
- Gastrectomy
- Human
- Lymphatic Metastasis
- Male
- Middle Age
- Multivariate Analysis
- Neoplasm Staging
- Prognosis
- Retrospective Studies
- Stomach Neoplasms/mortality\*
- Stomach Neoplasms/surgery
- Survival Analysis
- Survivors\*

# GSTP1 Polymorphism, Cigarette Smoking and Cervical Cancer Risk in Korean Women

Sun Ha Jee<sup>1</sup>, Jong Eun Lee<sup>2</sup>, Sook Kim<sup>2</sup>, Ji Hyun Kim<sup>2</sup>, Soo Jong Um<sup>3</sup>, Sung Jong Lee<sup>4</sup>, Sung Eun Namkoong<sup>4</sup>, and Jong Sup Park<sup>4</sup>

<sup>1</sup>*Department of Epidemiology and Health Promotion, Graduate School of Health Science and Management, Yonsei University, Seoul, Korea;*

<sup>2</sup>*DNA Link, Inc., Seoul, Korea;*

<sup>3</sup>*Department of Bioscience and Biotechnology, Sejong University, Seoul, Korea;*

<sup>4</sup>*Department of Obstetrics and Gynecology, The Catholic University of Korea, Seoul, Korea.*

Previous studies have suggested that glutathione S-transferase (GST) genotypes may play a role in determining susceptibility to cervical cancer, though the data have often been conflicting. The objective of this study was to examine the effect of GSTP1 polymorphism on cervical carcinogenesis. The studied subjects, patients who were pathologically diagnosed with invasive cervical cancer yielding positive results for human papillomavirus (HPV) (n=342), were compared to healthy, normal, female controls (n=707). DNA from peripheral blood samples from studied subjects whose GSTP1 specific sequences had been determined by PCR with allele-specific primers were reviewed in comparison with the normal controls. The genetic susceptibility of GSTP1 (11q13.1) in cervical carcinogenesis was determined by examining the effect of gene and environmental factors by the different histopathologic types of invasive cervical cancers. In assessing polymorphism GSTP1, the percentages of individuals homozygous for the A allele, homozygous for the G allele, and heterozygous for the two alleles were 66.8%, 3.9%, and 29.3%, respectively, in the control group, and 64.3%, 4.1%, and 31.6%, respectively, among in women with cervical cancer. Compared with GSTP1 G allele positive (GA or G/G), the odds ratio (OR) (95% confidence interval) for GSTP1 A/A was 1.0 (0.7 - 1.4) for invasive cervical cancer. However, the risk increased with GSTP1 A/A among ever

smokers (3.9, 1.7 - 8.9, *p*-value=0.0012) compared with GSTP1 G allele positive among nonsmokers. In particular, this risk was higher among women with squamous cell carcinoma (4.7, 2.0 - 10.8, *p*=0.0003). Polymorphism of GSTP1 among smoking women was associated with a higher risk of developing cervical cancer.

**Key Word:** Polymorphism, GSTP1, cervical cancer, smoking

## INTRODUCTION

A number of genetic and biochemical studies have shown that human papillomavirus (HPV) E6 and E7 proteins cooperatively exert cellular immortality and transformation by interfering with the function of the cellular tumor suppressor proteins.<sup>1,2</sup> A polymorphism in the GSTP1 gene in which valine replaces isoleucine has been reported to affect the activity of the enzyme for some but not all electrophilic substrates.<sup>3,4</sup> The GSTP1 gene appears to be particularly susceptible to carcinogen from cigarette smoking, and cigarette smoking is an epidemiologic risk factor

1: Yonsei Med J. 2002 Dec;43(6):712-6.

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### GSTP1 polymorphism, cigarette smoking and cervical cancer risk in Korean women.

Jee SH, Lee JE, Kim S, Kim JH, Um SJ, Lee SJ, Namkoong SE, Park JS.

#### MeSH Terms:

- Adult
- Aged
- Cervix Neoplasms/etiology\*
- Cervix Neoplasms/genetics
- Female
- Glutathione Transferase/genetics\*
- Human
- Isoenzymes/genetics\*
- Loss of Heterozygosity
- Middle Age
- Polymorphism (Genetics)
- Risk
- Smoking
- Support, Non-U.S. Gov't

#### Substances:

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- Glutathione Transferase