

regarding "picking up the pieces" of their life before cancer. (eg, Ganz et al. 2004, Cimprich et al. 2005).

Various different studies have examined ways of making the progression from the end of adjuvant treatment easier for patients. Psycho-educational groups have been proposed as an effective method of easing the transition.

Methods: A literature review identified the topics that patients describe as difficult to cope with, effective formats of intervention and the predictors of distress at the end of treatment. A focus group was conducted with a sample of patients who had finished active treatment in the previous year. The focus group was structured by the findings of the literature review, but participants were also able to comment freely on their own experiences.

The results of this were compiled with the evidence base and a six session group programme was developed. Each week would consist of a psycho-educational slot covering a different topic, with guest speakers, followed by a therapeutic session. The topics highlighted by the literature and the focus group included diet and exercise, relaxation, managing emotions, family relationships, returning to work and preparation for ongoing symptoms.

The group was evaluated using the Hospital Anxiety and Depression Scale and the Mental Adjustment to Cancer Scale, administered pre and post group. This would be followed up at six months post group to assess whether improvements were maintained.

Participants were also asked to feedback their own feelings about the effect of the group.

Results: The overall usefulness of the group was rated on a Likert Scale of 0 = not useful, to 10 = extremely useful. The average rating from the group was 8.4 (n=23) indicating members had subjectively found it very beneficial.

The group was shown to be beneficial in all areas of assessment pre and post, including anxiety, depression and mental adjustment (n=23). (Up to date data will be presented)

Conclusion: Preliminary results are encouraging and suggest that patients find a combination of psychoeducation and psychotherapeutic support to be beneficial at this point in their cancer journey. Results will become more robust as further data is collected but it is hypothesised that the improvements in mood and mental adjustment will be sustained.

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Poster

#### Modulation of PKC delta and epsilon distribution by plant phenols in mouse epidermis

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Protein kinase C (PKC) is thought to be a major intracellular receptor for the mouse skin tumor promoter 12-O-tetradecanoylphorbol-13-acetate (TPA). PKC is a serine-threonine-specific kinase and represents a family of at least 11 isozymes, which can be divided into three main groups: the Ca<sup>2+</sup>-dependent or conventional PKCs (alpha, beta and gamma), the Ca<sup>2+</sup>-independent or novel PKCs (delta, epsilon and  $\eta$ ) and atypical PKCs (zeta). The diversity of PKC isoforms and their central role in many signaling pathways makes them important targets for potential chemopreventive agents. Our previous studies showed that three structurally diverse phenolic acids: protocatechuic acid, chlorogenic acid and tannic acid and trihydroxystilbene – resveratrol, altered the TPA-stimulated distribution and activity of PKC alpha, beta, gamma and zeta in mouse epidermis. Their effect on other PKC isozymes: delta and epsilon, might be of interest since transgenic mice with over-expressed PKC delta showed resistance to tumor promotion by TPA, while over-expression of PKC epsilon caused a reduction in the papilloma burden, although enhanced carcinoma formation. Better understanding of different epidermal expression of PKC isoform patterns and substrate proteins is needed to explain their opposing effects on skin carcinogenesis and its modulation by plant phenols.

Thus, the aim of current study was the evaluation of the effect of plant phenols on TPA-stimulated PKC delta and epsilon distribution. Phenolic acids and resveratrol were applied topically at the dose of 16 micromoles 15 minutes before a single application of 3.4 nmoles of TPA in acetone. Control mice were treated with acetone only. Forty eight hours after TPA treatment animals were sacrificed and the cytosolic and particulate fractions were isolated. The distribution of PKC isozymes was determined by Western blot analysis.

TPA treatment resulted in the translocation of both estimated PKC isozymes from cytosolic to particulate fractions. All tested phenolic compounds affected the TPA-induced PKC isozymes translocation. The observed effects, however, were depended on the phenol structure and to a certain extent were isozyme specific. Protocatechuic acid and chlorogenic acid significantly inhibited the TPA stimulated translocation of PKC delta. For PKC epsilon the similar effect was observed after treatment with chlorogenic acid, tannic acid and resveratrol.

The results of the present study may point out the significant role of PKC isozymes in the promotion of mouse skin tumorigenesis by TPA and suggest that antipromotional activity of plant phenols may result from the modulation of PKC isozymes distribution, including PKC delta and epsilon.

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#### Immunohistochemical study of intratumoral microvessels in resected non-small cell lung carcinomas, N-status, pTNM-stage and survival period of the patients

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Goal: Study of intratumoral microvessels in resected non-small cell lung carcinomas (NSCLC), N-status, pTNM-stage and survival period.

Material and method: Resected material from 54 patients radically operated for NSCLC is observed. 21 cases concern N0-status, 33-N1,2 – status. 48 cases concern I, II and IIIA, and 6-IIIB and IV pTNM stage. The number of intratumoral microvessels (NITMV) is determined through application of CD31. There is an account of high (NITMV=>75), and a low (NITMV<75) degree of vascularisation. Intratumoral vessel invasion is determined. Statistical methods: t-test, chi-square, survival according to Kaplan-Meier, logistic regression analyses.

Results: The average survival period in low vascularisation is 1731 days, and in high vascularisation – 1158 days (a 573 days difference, p=1067). NITMV has statistically significant influence on the N-status: chi-square-p=0.041, logistic regression analyses – p=0.045. A significant dependency between the average NITMV and pTNM stage (p=0.029) has been proven. In vessel invasion (in 27.4% of the cases) the survival period is shorter with 478 days. In 28 cases (54.9%) intratumoral vessels immediately bordering tumor cells are observed, while in 5 NSCLC there are intratumoral vessels, in part of whose walls endothelial cells are not found.

Conclusion: NITMV has a statistically significant influence on the N-status. The survival period is longer in NSCLC with low vascularisation.

## POSTER SESSION

### Tumour immunology

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Poster

#### Regulatory T cells are recruited and activated within primary breast tumors with an adverse clinical outcome

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Background: Breast Cancer (breast adenocarcinoma) is the most common cause of cancer in women in developed countries and the second leading cause of cancer death in women. Clearance of primary breast tumors by immune mechanisms is rare despite the fact that some of them contains T cells infiltrates. Regulatory T cells (Treg) are increased in peripheral blood of patients with breast cancer and present in tumor environment. In this work we assessed the role of Treg in breast tumor progression.

Materials and methods: Immunohistochemical analysis of Foxp3 expression by TMA and ex-vivo analysis of Tumor-infiltrating Treg (Ti-Treg) were performed on patients suffering from primary breast carcinoma.

Results: Immunohistochemical analysis of Foxp3 expression in primary human breast tumors showed that the presence of Ti-Treg within the tumor bed had no influence on tumor progression in opposition to Ti-Treg within lymphoid infiltrates that was predictive of relapse and death, in particular in ER+ patients. Moreover, our ex-vivo analyses demonstrated that these tumors are highly infiltrated by CD4<sup>+</sup>CD25<sup>high</sup>CD127<sup>low</sup>Foxp3<sup>+</sup> Ti-Treg that suppress the functions of conventional T cells (Tconv). Ti-Treg are selectively recruited through CCR4 or CCR7 as suggested by their down-regulation at cell-surface and the presence of their ligands in tumor environment. Furthermore, Ki67 and Hoechst 33342 stainings demonstrated their local expansion. Importantly, in contrast to Ti-Tconv and circulating Treg, Ti-Treg expressed high levels of GITR, ICOS, HLA-DR,