

155

# ONE-STAGE EMERGENCY CURATIVE TREATMENT OF COLONIC OBSTRUCTION versus ELECTIVE CURATIVE TREATMENT OF COLON CANCER : COMPARED ANALYSIS OF SURVIVAL AND RECURRENCE PATTERNS.

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Over a period of ten years (1980-89) 528 patients with colon cancer were treated at one institution. One hundred and seventy nine (33.9%) were obstructed (O) and underwent emergency surgery, while 349 received elective (E) treatment; 321 patients survived one-stage curative surgery : 87(49%) were (O) (M:F,48:39) and 234 (67%) were (E) (M:F, 109:125)(P=.8); their mean age (SD) was 68.4 (11.6) and 64.3 (13.1) respectively (P=.01). Dukes' stages were evenly distributed within the two groups (P=.3), but sites of the primary were not (P=.005). All patients entered regular follow up under the care of the same surgeon (PSC). During the follow up (median 96, range 1-159 months) local recurrence occurred in 9 (12.9%) (O) and 27 (14.8%) (E) patients (P=.85). Thirty nine percent of (O) and 27% of (E) patients developed metastatic disease (P=.25) including liver recurrence in 25% (O) and 15.6% (E) (P=.125). The median intervals from surgery to local recurrence were 12 (range 1-47)(O) and 18 (range 2-77)(E) months (P=.8) and to metastatic disease 19 (range 7-84)(O) and 21 (range 7-105)(E) months (P=.89). The cumulative disease-free survival probability at 5 years was 0.52 (E) and 0.39 (O)(P=.196). Despite one-stage curative treatment, obstructed patients have higher risk of liver recurrence, suggesting that obstruction enhances portal dissemination and that these patients may benefit from intra-portal per-operative chemotherapy.

157

# A NEW AFFINITY CHROMATOGRAPHY SUPPORT FOR ISOLATION OF TUMOR-ASSOCIATED ANTIGENS FROM COLON CANCER TUMORS AND SERA OF TUMOR-BEARING RATS. I. Zusman, R. Zusman and D. Korol. Koret School of Veterinary Medicine, Hebrew University of Jerusalem, Rehovot, Israel.

A new, effective support for the isolation of proteins has been invented utilizing a gel fiberglass (R. Zusman,1992). This support was used to isolate TAA from rat colon tumors (Zusman and Zusman,1993) and from sera of tumor-bearing rats (Korol et al.,1994). Antigen containing solutions were percolated through GFG columns with entrapped anti-rat colon cancer IgG from rabbits. TAA were eluted in a large amount, up to 13 mg/column/ 1 ml of tumorous extract and up to 3 mg/column/ 1 ml of sera. The 53 kD antigen was isolated from tumors and p21 and p53-proteins were isolated from sera. Concentrations of both TAA isolated were much higher (up to 1000 times) in sera from tumor-bearing rats compared with controls. Similar results was found in sera from colon cancer patients (not published). At present, we perform clinical examinations of this method.

156

# IDENTIFICATION OF SUBJECTS AT RISK FOR COLORECTAL CARCINOMA THROUGH A SCREENING TEST ON DNA DERIVED FROM STOOL. Dugani A., Rebecchi AM, Trande P., Perini M. Manenti F., Villa E. Chair of Gastroenterology, University of Modena, Italy.

The goal of our study was to set up a screening tests for identifying subjects at high risk of developing colorectal carcinoma, exploiting the genetic changes (i.e. K-Ras mutation) observed during colorectal carcinogenesis (CRC). We examined for K-ras mutation the DNA extracted from the stool of 25 patients (12 males, 13 females; age 32 to 84; of these 14 with adenomatous polyps, 5 operated for cancer and 6 first degree relatives of cancer patients) and of 7 controls. Identification of K-ras mutation was achieved through PCR and oligomer-specific hybridization (Asp<sup>12</sup> mutation). Our preliminary results showed : a) K-ras was amplified in the stool of 44% (12/25) of patients; b) in 2/5 cancer patients and in 5/6 relatives Asp<sup>12</sup> ras mutation was detected in DNA from stools; 4/5 of these pts. had adenomatous polyps; c) none of the controls showed K-ras mutation. In conclusion, our preliminary data indicate that this screening test , although it has to be validated on larger series and probably completed with amplification of other genes related to CRC (i.e. APC gene) could be very useful in identifying subjects at risk of developing colorectal carcinoma.