Comparison of Serum CA72-4, CEA, TPA, CA19-9 and CA125 Levels in Gastric Cancer Patients and Correlation with Recurrence

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摘要

Abstract

BACKGROUND/AIMS: Serum tumor markers were investigated as prognostic factors for recurrence in patients with gastric cancers. METHODOLOGY: Preoperative serum levels of CEA, CA72-4, CA19-9, TPA and CA125 were sampled in 196 patients with gastric cancers undergoing curative surgery. The results were compared with the clinical recurrence and various clinicopathological factors. RESULTS: CA72-4, CEA, CA19-9, TPA and CA125 had sensitivities of 16.4%, 31.4%, 16.1%, 31.6%, and 6%, respectively. Sensitivity of two combinations was as high as 56.5%. Seventy-seven patients (39.9%) had clinical recurrence in the follow-up periods. For those with preoperatively elevated serum tumor markers, 38% (12/32) had CA72-4, 42% (13/31) had CA19-9, 48% (29/60) and had CEA, 54% (6/11) had CA125, and 62% (37/61) had TPA, and remained disease-free. Univariate analysis showed that TNM staging, Tumor size, Borrmann classification of tumor growth, and preoperative serum CA72-4 level were correlated with recurrenceof disease. Multivariate analysis showed that independent prognostic factor of recurrence was TNM staging (P = 0.0007). CONCLUSIONS: Preoperative serum CA72-4 level is correlated with staging of disease, but is not an independent predictor for clinical recurrence of disease in patients with gastric cancers that undergo surgery.