

Prolactin receptor expression in breast cancer

Thesis

Submitted for master degree
In Obstetrics and Gynecology

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M. B.B.Ch 2003

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2013**

Acknowledgements

First and Foremost thanks to **God** for helping me to fulfill this work.

No words express my sincerest appreciation and profound gratitude to **Prof. Dr. Salah Taha Fayed**, professor of Obstetrics and Gynecology Department, Faculty of Medicine, Ain Shams University, to whom I owe so much for his supervision, instructive criticism, invaluable assistance and meticulous revision of all details of this thesis. I am extremely indebted to him for getting me closer to the wonderful world of knowledge and imagination.

My words fail me to express my deepest thanks and gratitude to **Dr. Ahmed Hamdy Nagib Abdel Rahman**, assistant professor of Obstetrics and Gynecology, Faculty of Medicine, Ain Shams University, for his great help starting from giving me the chance to work in this field with his direction throughout the work and ending by his prominent finger print during the finalization of this work and continuous much privileged and honored to have him as my supervisor and to work under his guidance and supervision.

I would like to express my deepest thanks to **Dr. Amany M. Maher**, Faculty of medicine, Ain Shams University, for giving me this chance to carry out my work

under her supervision. My deepest thanks for her generous help in diagnosis and selection of patients for the present study, and for her valuable guidance, and for her great efforts during performing the statistical part of this study.

I would like also to thank **Prof. Dr. Naglaa A. Samir**, Professor of Pathology Department, Faculty of Medicine, Ain Shams University for her efforts and help during this work.

List of Contents

Page No.

• Acknowledgment	
• List of tables	I
• List of Figures	III
• List of Abbreviation	IV
• Introduction	1
• Aim of the work	7
• Chapter 1 Breast cancer	8
Epidemiology of breast cancer	12
Risk factors for developing breast cancer	15
Pathology of breast cancer	28
Histology of breast cancer	37
Diagnosis and Treatment of breast cancer	42
• Chapter 2 Hormonal receptors and markers in breast cancer	48
Molecular and Genetic Profile	52
Hormonal treatment	59
Prognostic Factors in breast cancer	63

• Chapter 3 Prolactin receptor in breast cancer	66
Structure and Signaling capabilities of PRLR	68
Prolactin receptor in breast cancer	74
• Material and Method	79
• Results	84
• Discussion	101
• Summary	109
• References	111
• Arabic Summary	—

List of Tables

<i>Table No.</i>	<i>Page No.</i>
1- Histopathologic findings of the 70 cases of breast carcinomas included in the study	85
2- Classification of breast cancer according to the type	86
3- The relationship between PRLR expression and type of breast cancer	91
4- The relationship between PRL expression and age of patients	92
5- The relationship between PRLR expression and grade of breast cancer	92
6- The relationship between PRLR expression and lymph node status	92
7- The relationship between PRLR expression and ER expression	93
8- The relationship between PRLR expression and PR expression	94
9- The relationship between PRLR expression and Her-2 neu expression	94

10- The relationship between PRLR positivity grading and type of breast cancer	96
11- The relationship between PRLR positivity grading and grade of breast cancer	96
12- The relationship between PRLR positivity grading and lymph node status of breast cancer	96
13- The relationship between PRLR positivity grading and ER expression	97
14- The relationship between PRLR grading and ER grading.....	98
15- The relationship between PRLR positivity grading and PR expression	98
16- The relationship between PRLR grading and PR grading	99
17- The relationship between PRLR positivity grading and Her-2 neu expression	99
18- The relationship between PRLR grading and Her-2 neu grading	100

List of Figures

<i>Figure No.</i>	<i>Page No.</i>
1- Showing percentage of pathological types of breast cancer	86
2- A case of IDC, grade II, showing PRLR +ve expression	87
3- A case of ILC, grade II, showing PRLR +ve expression	87
4- A case of IDC, grade II, showing PRLR +ve expression	88
5- A case of IDC, grade II, showing PRLR +ve expression	88
6- A case of IDC, grade II, showing PRLR -ve expression ...	89
7- A case of ILC, grade II, showing PRLR -ve expression....	89
8- PRL receptor expression among breast cancer	91

Abbreviation List

Aa	.....	Aminoacid
AC	.....	Alkylating agent chemotherapy
AIs	.....	Aromatase inhibitors
AJCC	.....	American Joint Committee on Cancer
Asn	.....	Glycosylation site of PRLR
ASR	.....	Age Standardized Rates
BCIS	.....	Breast Cancer in situ
Bcl2	.....	Anti apoptatic gene
BMI	.....	Body Mass Index
BRCA1	.....	Breast Cancer Gene 1
BRCA2	.....	Breast Cancer Gene 2
CBE	.....	Clinical breast examination
CMF	.....	Cyclophosphamide Methotrexate Flurouracil
C-Src	.....	Cellular Tyrosine Kinase Protein encoded by CSK gene
Cyclin-E	...	One of the key regulators of the G1/S transition in the cell cycle
DCIS	.....	Ductal Cancer in situ
EBCTCG	..	Early Breast Cancer Trialists' Collaborative Group

ECD Extracellular ligand-binding domain
EGF Epidermal growth factor
EGFR Epidermal growth factor receptor
EHBCCG . Endogenous Hormones and Breast Cancer Collaborative Group
EPIC European prospective investigation in cancer
EpoR Erythropoietin receptor
ER Estrogen receptor
GHR Growth hormone receptor
HL 100 ... Human breast epithelial cell line
Her-2 Human epidermal growth factor receptor2
HT Hormonal Therapy
ICD Intracellular signalling domain
IDC Invasive duct carcinoma
IFNAR1 Interferone receptor type 1
IGF Insulin-like growth factor
IGFBP Insulin growth factor binding protein
IHC Immunohistochemistry
ILC Invasive lobular carcinoma
JAK2 Janus Kinase

KI 67Protein encoded on the MKi67 gene for cellular proliferation

LCISLobular Cancer in situ

m(Ab)Monoclonal antibody

MECCMiddle East Cancer Consotrium

MRIMagnetic resonant image

NCINational Cancer Institute

Nek 3Serine/thereonine-protein kinase encoded by the NEK3 gene

NHSNurse Health Study

P53Protein 53 (tumor suppressor protein) encoded by TP5 gene

PALB2Partner and localizer of BRCA2 gene

PBSPhosphate buffered saline

PCRPolymerase chain reaction

PRProgesterone receptor

PRLProlactin

PRLBPProlactin binding protein

PRLRProlactin Receptor

PRLRiIntermediate Prolactin Receptor isoform

PS2The human pS2 gene is specifically expressed under estrogen transcriptional control in a subclass of estrogen receptor-containing human breast cancer cells

S1Short form of prolactin receptor

SEERSurveillance, Epidemiology, and End Results Program

SERMsSelective estrogen receptor modulators

SHBGSex hormone binding globulin

SHP-2SHP-1 and SHP-2 are two SH2 domain-containing tyrosine phosphatases

SPFS-Phase Fraction

STAT5Signal transducer and activator of transcription

T47DHuman ductal breast epithelial tumour cell line

TMTrans membrane domain

TPoRThrombopoietin receptor

WHSWomen Health Study

Introduction

Breast cancer in women is a major public health problem throughout the world as it is the most common cancer among women in both developed and developing countries. One in ten of all new cancers diagnosed worldwide each year is a cancer of the female breast. It is also the principal cause of death from cancer among women worldwide. More than 1.1 million cases are diagnosed and more than 410,000 patients die of it worldwide (**Ferlay et al., 2004**).

Breast cancer in Egypt

Over the last few years, Cancer Registries in North Africa (Morocco, Algeria, Tunisia, Libya and Egypt) increased in number from one to nine (**Roberto et al., 2009**).

In Egypt, breast cancer is the most common cancer among women, representing 18.9% of total cancer cases (**Elatar, 2002**).

Histologic types of breast tumor

The most common histologic types of breast cancer are ductal and lobular carcinoma. Ductal carcinoma in situ constitutes 80-85%, while lobular carcinoma accounts for only about 5% (**Li & Daling, 2007**).

Introduction

With respect to tumor biology, ductal carcinoma in situ is considered a precursor of invasive breast cancer (**Warnberg et al., 2001 & Li et al., 2006**).

With respect to invasive disease, approximately 70-73% of invasive breast cancers in developed countries are invasive ductal carcinoma and 13-16% are invasive lobular carcinomas. The remaining 15% of invasive cases is composed of a heterogenous group of several histological variants, each of which account for no more than 2% of all invasive cases (**Levi et al., 2003**).

Molecular / genetics profile

Molecular and genetics markers are widely used to discriminate subtypes of breast cancer. The distinction of tumor subtypes on the basis of tumor marker expression, particularly the distinction between tumors that express estrogen receptor (ER+) and those that do not (ER-), Correlates well with previously described phenotypic classification and has prognostic significance. Individual assays for tumor markers, including PR, HER2, P53, epidermal growth factor receptor, and especially ER, have become common clinical practice because of their utility in selecting targeted therapies and in predicting clinical course (**Li et al., 2003**).

Prolactin

PRL is a polypeptide hormone secreted by the anterior pituitary. It functions systemically as a classical endocrine factor. PRL is known since many decades to be a potent differentiation factor for the mammary epithelium **(Ben-Jonathan et al., 2008)**.

It is a 598 amino acid residues (aa) glycoprotein with an electrophoretic mobility of 80-85 kDa. Upon ligand binding and sequential dimerisation it activates multiple signalling systems including Jak2/STAT5, STAT3, MAPKp44/42 and PI3K pathways **(Ben-Jonathan et al., 2008)**.

PRL exerts its actions via prolactin receptor (PRLR), a member of the cytokine receptor superfamily. These receptors are nontyrosine kinases, single-pass transmembrane proteins organized into three domains: an extracellular ligand binding domain (ECD), a hydrophobic transmembrane domain (TM) and an intracellular signalling domain (ICD). Multiple PRLR isoforms resulting from alternative splicing events have been identified. Most of them are similar in their ECD, but differ in the intracellular part **(Clevenger et al., 2003)**.

Thus, multiple isoforms potentially can activate distinct intracellular signalling events. The long receptor isoform was studied in details **(Clevenger et al., 2003)**. It has been suggested that the long isoform is responsible for the pro-