## Clinical Significance of Serum Des-Gamma Carboxy Prothrombin in Hepatocellular Carcinoma

Chesis

Submitted for Partial Fulfillment of Master Degree in Clinical and Chemical Pathology

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# الأهمية الإكلينيكية لبروتين قصر جاما كربوكسي البروثرومبين في مصل الدم في حالات سرطان الكبد

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#### List of abbreviations

**AASLD** : American association of the study of liver disease

**AFP** : Alpha fetoprotein

**AFU** : Alpha -L- fucosidase

AJCC : American Joint Committee on Cancer

**ALP** : Alkaline phosphotase

**ALT** : Alanine aminotransferase

**AMP** : Amino-2-methyl-1-propanol

**AST** : Aspartate aminotransferase

**AU** : Arbitrary unit

**AUC** : Area under the curve

**BCL-2**: B-cell lymphoma 2

**BCLC** : Barcelona clinic liver cancer

**BCP** : Bromocresol purple

CA 125 : Cancer antigen 125

**Cdks** : Cyclin dependant kinases

**CEA** : Carcinoembryonic antigen

**CEUS** : Contrast enhanced ultrasound

**CLD** : Chronic liver disease

**CLIP** : Cancer Liver Italian Programme

**CNB** : Core needle biopsy

**CT** : Computed tomography

**CV** : Coefficient Variation

**DAB** : Diamino-benzidine

**DCP**: Des- gamma carboxyprothrombin

**DN** : Dysplastic nodule

**DNA** : Deoxy ribonucleic acid

**EASL** : European association of study of liver disease

**ECF** : Epithelial fibroblastoid conversion

**ECLIA** : Electrochemiluminescence immunoassay

**EDTA** : Ethylene diamine tetra acetate

**EIA** : Enzyme immunoassay

**ELISA** : Enzyme linked immunosorbant assay

**EMT** : Epithelial to mesenchymal transition

**FHCC**: Fibrolamellar hepato cellular carcinoma

**FNAB** : Fine needle aspiration

**GGT** : Gamma-glutamyl transferase

**GPC3** : Glypican-3

**HBV**: Hepatitis B virus

**HCC**: Hepatocellular carcinoma

**HCV**: Hepatitis C virus

**HGF** : Hepatocyte derived growth factor

**HIF-1a** : Hypoxia inducible factor-1 a

**HRP**: Horseradish Peroxidase

**HTEP1** : Human telomerase associated protein 1

**hTERT** : Human telomerase reverse transcriptase

**HUVEC**: Human umbilical vein endothelial cells

**IC** : Immune complex

**IEP** : Immuno electrophoresis

**IFN**: Interferon

**IGF-II** : Insulin like growth factor –II

**INR** : International Normalized Ratio

**JAK** : Jenus Kinase activator system

**KDR** : Kinase insert domain receptor

LDH : Lactate dehydrogenaseLDL : Lower detection limit

**LDLT** : Living donor liver transplantation

**MAPK**: Mitogen activated protein kinase

**MPCT** : Multiphasic helical CT

MRI : Magnetic resonance imaging

MRN : Macroregenerative nodule

mRNA : Messenger ribonucleic acid

**NAFLD**: Non alcoholic fatty liver disease

**NASH** : Non alcoholic steatohepatitis

NCI : National cancer institute

**NHL** : Non Hodgkin lymphoma

**NPV** : Negative Predictive Value

**PBS**: Phosphate buffered saline

**PCL-y**: Phospholipase C-y

**PCR** : Polymerized chain reaction

**PET** : Positron emission tomography

**PHC**: Primary hepatic cancer

**PIVKA-II**: Protein induced by vitamin K absence or antagonist –II

**PPV** : Positive Predictive Value

**PT** : Prothrombin time

**PVT** : Portal vein thrombosis

**ROC** : Receiver-operating characteristic

**RT-PCR**: Reverse Transcriptase PCR

**SCCA** : Squamous cell carcinoma antigen

**SD** : Standard deviation

**SHF** : Schistosomal hepatic fibrosis

**STAT 3** : Signal transforming activation transducer 3

**TGF- β1** : Transforming growth factor beta 1

**TNF-**  $\alpha$  : Tumor necrosis factor –  $\alpha$ 

**TNM**: Tumor node metastasis

**US** : Ultrasonography

**USA** : United States of America

**VEGF** : Vascular endothelial growth factor

**VEGFR** :Vascular endothelial growth factor receptor

**VKOR** : Vitamin K epoxide reductase

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I would like to dedicate this Thesis to my **Father** and my **Mother**; to them I will never find adequate words to express my gratitude.

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### Introduction

Hepatocellular carcinoma (HCC) is a major health problem worldwide. It is the fifth most common cancer and the third leading cause of cancer-related death (*Lau and Lai*, 2008).

Patients with hepatitis B and C related liver cirrhosis are at high risk of developing HCC. The prognosis of patients with HCC is poor when diagnosed at an advanced stage but when diagnosed and treated at an early stage, the 5-year survival rate may reach up to 70-80 %. Therefore early detection of HCC is a critical goal to improve the patient outcome (*Sonia et al.*, 2008).

Histo-pathological examination of tumor biopsy is considered the golden standard for diagnosis of HCC. However, it is considered an invasive technique with high risk of seeding the tumor along the biopsy tract (*Change et al.*, 2008).

As regards serologic screening, alpha fetoprotein (AFP) still represents the currently used test for HCC even though its sensitivity of 39 to 65% is not very satisfactory and there is a high rate of false negative and false positive results (*Wei et al., 2006 and Shariff et al., 2009*). Hence, there is an urgent need for more reliable noninvasive recent biomarkers with better sensitivity and specificity for early diagnosis of HCC.