

# Peran faktor inflamasi kronis dan lingkungan mikro tumor di stroma peritumor dan hubungannya dengan invasi parametrium dan metastasis KGB pada karsinoma sel skuamosa serviks stadium IB-IIA = The role of chronic inflammation and tumor microenvironment factors in parametrial invasion and pelvic lymph node metastasis in stage IB- IIA of cervical squamous cell carcinoma

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## Abstrak

<b>ABSTRAK</b><br>

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Program Studi : Program Doktor Ilmu Biomedik  
Judul Disertasi : Peran Faktor Inflamasi Kronis dan Lingkungan Mikro Tumordi Stroma Peritumor dan Hubungannya dengan InvasiParametrium dan Metastasis KGB pada Karsinoma SelSkuamosa Serviks Stadium IB-IIA  
Pendahuluan: Salah satu penyebab tingginya angka kematian kanker serviksadalah kemampuan invasi dan metastasis sel kanker. Lesi di serviks sering disertaidengan inflamasi kronis dan peran inflamasi kronis dalam karsinogenesis telahdiketahui. Tujuan penelitian adalah mengeksplorasi faktor respons inflamasi danlingkungan mikro tumor LMT sebagai faktor prediksi invasi parametrium danmetastasis pada KGB pelvis.Metode: Terseleksi 75 kasus karsinoma sel skuamosa KSS serviks stadium IBIIAyang telah dihisterektomi dan limfadenektomi di RSUP Dr. CiptoMangunkusumo, Jakarta dan RSUP Dr. Hasan Sadikin RSHS , Bandung.Terdapat 15 kasus dengan invasi parametrium dan 18 kasus dengan metastasisKGB. Semua kasus dipulas H E dan imunohistokimia IHK yang dilakukan dilaboratorium PA-RSHS. Penanda untuk faktor inflamasi adalah CD4, CD8,CD68, IgG, dan penanda LMT adalah ?-SMA, TSP-1, CD31, VEGF-C. Semuapenanda dinilai pada stroma di 5 area LPB. Ekspresi IHK untuk sel inflamasikronis dihitung secara kuantitatif dan semikuantitatif untuk LMT. Hubunganantara reaksi inflamasi kronis dengan invasi parametrium dan metastasis KGBdianalisis dengan uji Mann-Whitney dan untuk faktor LMT dengan uji Chisquare.Hasil: Tiga variabel respons inflamasi kronis yaitu jumlah sel CD8 , CD68 ,IgG dan tiga faktor LMT yaitu immunoekspresi TSP-1, CD31, VEGF-C lebihrendah pada KSS serviks yang disertai invasi parametrium dibandingkan tanpainvasi parametrium. Terdapat hubungan jumlah sel CD8  $p=0,015$  dan VEGF-Cimunoekspresi yang rendah  $p=0,032$  dengan kejadian invasi parametrium. Hasilanalisis ROC, didapatkan bahwa jumlah sel CD8 dengan titik potong

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<b>ABSTRACT</b><br>

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Title The role of chronic inflammation and tumormicroenvironment factors in parametrial invasion andpelvic lymph node metastasis in stage IB IIA of cervicalsquamous cell carcinoma  
Introduction One of the causes of the high mortality rate of cervical cancer is theability of cancer cells to invade and metastasis. Cervical lesions oftenaccompanied by chronic inflammation and the role of chronic inflammation incarcinogenesis is known. The objectives of this study is to explore inflammationresponse and tumor micro environment TME as predictors for parametrialinvasion PI and pelvic lymph node metastasis LNM .Methods Seventy five cases of cervical squamous cell carcinoma CSCC stageIB IIA which had underwent radical hysterectomy and

lymphadenectomy at Dr. Cipto Mangunkusumo Hospital RSCM, Jakarta and Dr. Hasan Sadikin Hospital RSHS, Bandung were selected. There were 15 cases with PI and 18 cases with LNM. All slides were stained at pathological anatomy laboratory of RSHS, using H E and immunohistochemistry IHC staining methods. Markers for inflammation factors are CD4, CD8, CD68, IgG and TME markers are SMA, TSP 1, CD31, VEGF C. All markers were evaluated in five fields of the stroma under HPF magnification. The IHC expression of immune cells were quantitatively evaluated and semiquantitatively for TME. The association between inflammation response with PI and LNM were analyzed using non parametrical Mann Whitney test and Chi square test for TME. Results Three variables of chronic inflammation response, CD8, CD68, IgG cell count and three TME expression variables, i.e., TSP 1, CD31, VEGF C, were lower in CSCC with parametrium invasion compared to in CSCC without parametrium invasion. A significant association between CD8 cell p 0,015 and VEGF C low expression p 0,032 with PI is identified. The ROC showed that cut off of CD8 cell count