Prognostic value of Nestin, TGFβ1 and epithelialmesenchymal transition markers in non small cell lung cancer

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Abstract

Background: Lung carcinoma is a major trigger of cancer related morbidity and mortality. Better understanding of the clinical and molecular features of NSCLC will lead to development of new therapeutic modalities. EMT is a complex process triggered by various stimuli including TGF β 1. Nestin is an intermediate filament protein that interacts with cytoskeleton components, necessary for cell motility.

The aim: This work aims at analyzing the relation between nestin, TGF β 1 & EMT and clinicopathological features of non small cell lung cancer, as well as evaluating their role as prognostic factors in these cases.

Patients and methods: Nestin, TGF β 1, E-Cadherin & Vimentin proteins were assessed by immunohistochemistry in 43 cases of non small cell lung cancer. They were correlated to patients' clinic-pathological features, progression free survival and overall survival.

Results: A significant direct relationship was found between EMT and TNM stage of NSCLC (P-value = 0.018). All of the cases that did not show EMT were negative for Nestin immunohistochemical staining, whereas 72.7% cases with complete EMT were positive for Nestin protein expression (P = < 0.001). Similarly, TGF-β1 immunoreactivity was directly related to EMT (P-value < 0.001). A significant direct relationship was observed between Nestin and TGFβ1 immunopositivity (p-value = 0.001). Kaplan Meier curves interpretation illustrated a highly significant relation between Nestin, TGFβ1 and EMT and PFS of our cases (p-value < 0.001). However, shorter overall patients' survival was related to Nestin and TGF-β1 immunoreactivity, but not to EMT (p-value = 0.022, 0.058 & 0.188 respectively).

Conclusion: Nestin and TGF β 1 are strongly associated with EMT. Also, they are promising markers for stratification of NSCLC patients regarding their prognosis.

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