
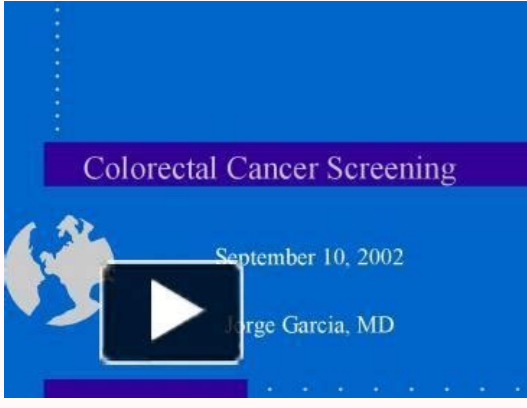
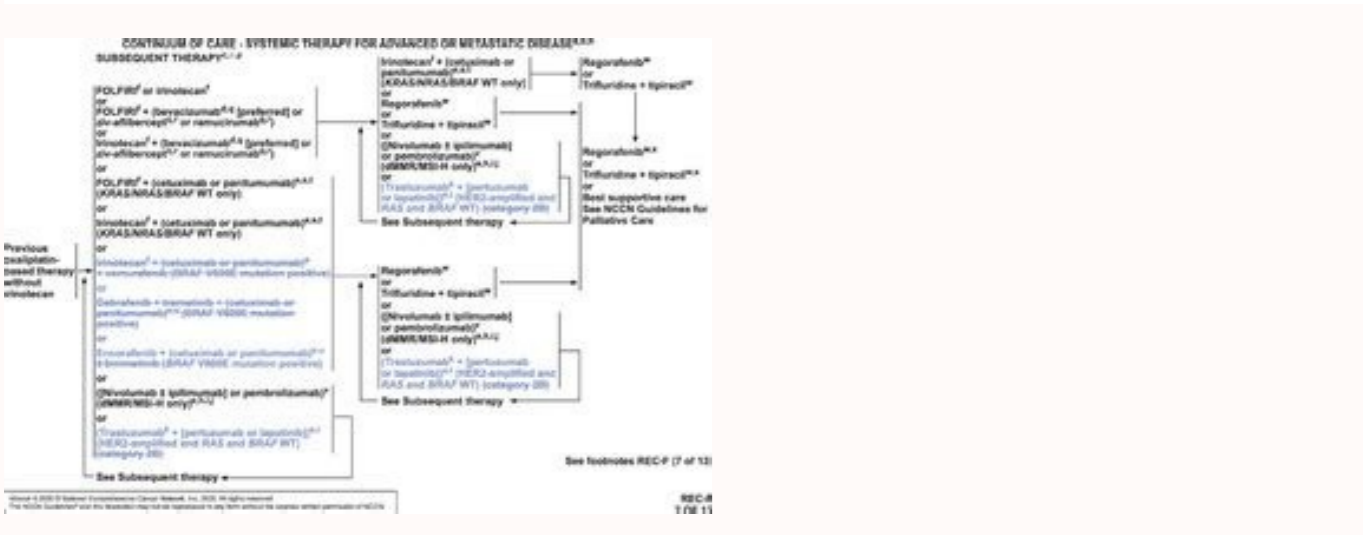
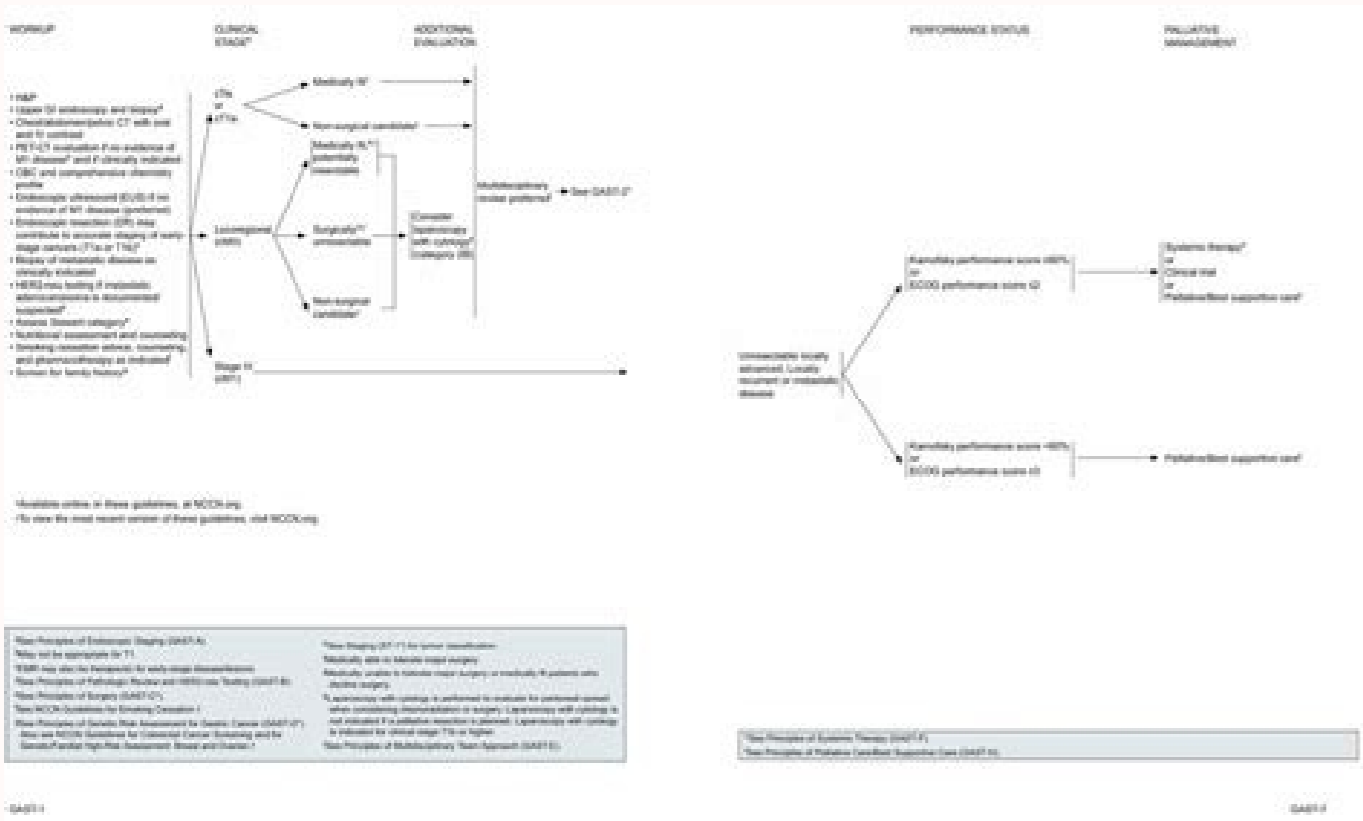


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FIGO Stage	Recommended Treatment
Stage I (FIGO 2017)	Radical hysterectomy with bilateral salpingo-oophorectomy, pelvic lymphadenectomy, and vaginectomy (type III) or type IV hysterectomy with bilateral salpingo-oophorectomy and vaginectomy
Stage II (FIGO 2017)	Radical hysterectomy with bilateral salpingo-oophorectomy, pelvic lymphadenectomy, and vaginectomy (type III) or type IV hysterectomy with bilateral salpingo-oophorectomy and vaginectomy
Stage III (FIGO 2017)	Radical hysterectomy with bilateral salpingo-oophorectomy, pelvic lymphadenectomy, and vaginectomy (type III) or type IV hysterectomy with bilateral salpingo-oophorectomy and vaginectomy
Stage IV (FIGO 2017)	Systemic therapy with palliative intent

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Original Research Article

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Clinicopathological and prognostic significance of metastasis-associated in colon cancer-1 in gastric cancer: A meta-analysis

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Abstract

Background: The gene metastasis-associated in colon cancer-1 (MACC1) has been reported to be overexpressed in diverse human malignancies, and an increasing amount of evidence suggests that its overexpression is associated with the development and progression of many human tumors. However, the prognostic and clinicopathological value of MACC1 in gastric cancer remains inconclusive. Therefore, we conducted this meta-analysis to investigate the effect of positive MACC1 expression on clinicopathological features and survival outcomes in gastric cancer.
Methods: Medline, Web of Science, and EMBASE databases were searched for relevant articles published up to 10 April 2018. The correlation of MACC1 expression levels with overall survival and clinicopathological features was analyzed.
Results: In this meta-analysis, nine studies with a total of 2103 gastric cancer patients were included. Our results showed that high expression of MACC1 was significantly related to a poor overall survival. Moreover, our meta-analysis showed that MACC1 overexpression was significantly linked to distant metastasis and vascular invasion. There were no significant correlations between positive MACC1 expression and gender, localization, tumor-node-metastasis (TNM) stage, tumor extent (T stage) and lymph node involvement (N stage)
Conclusions: MACC1 expression levels can serve as a novel prognostic factor in gastric cancer patients.

Keywords
 MACC1, gastric cancer, meta-analysis, prognosis

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Introduction

Gastric cancer (GC) is a malignant disease arising from gastric tissue. It is the fifth most common cancer in the world and the second leading cause of cancer-related death globally.¹ Although the last decade has witnessed a decrease in the prevalence of GC in some developed countries, it is estimated that 951,600 new stomach cancer cases and 723,100 deaths occurred in 2012.¹ Given that the tumorigenesis of GC is attributable to the interactions between environmental and genetic factors, it often demonstrates high morbidity in Asian countries, especially China. Because the mechanism of GC carcinogenesis is still not fully understood, GC has become a major public health problem. Prognosis is usually assessed by tumor-node-metastasis (TNM) staging. However, this approach

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Reckamp, a € hyles, ms, from the center of Câ € ncity of Hope, Duarte, Califã€™RRIA. The company that these horny abnormalities are mainly - that is, its combination - affects the prognostic. The testing for germ and/or somatic mutations should be considered in all men with high risk, very high-risos, regional or metastata-olestats. MATTHIAS HOLDHOFF, MD, PhD the highest of evidence for the treatment of newly diagnosed anaplastic oligodendrogliomas with 1P and 19Q co-delirage and has the PCV radiation and chemotherapy regime (Procarbazine, Lomustine, VINHCRISTINA). Rectal Câ € nance à € elt is now very interested in providing all total neoadjuvant therapy, ie chemotherapy, surgery or chemoradia, then chemotherapy, then surgery. According to the 2018 NCCN guidelines, patients with a method of metastasted to assignate; They must be aware of a possible small exchange in the general survival to improve the quality of life during the off cycle. Men with BRCA1, BRCA2, ATM, PALB2 and FAKE should be referred for genes and early use of chemotherapy or inscription in platinum in a clinical test. Covey, MD, of the Sloan Kettering Cancer Center, New York, described the updates of the guidelines for screening and diagnosis of hepatocellular carcinoma: patients considered at high risk of hepatocellular carcinoma (ie those with cirrhosis or hepatitis bron Ultrasound with or without alpha-fetoproteinal evaluation (AFP) as a business screening tool (with certain exceptions). Reckamp, à € hydons, Mrs. Karen L. The guidelines of 2018 NCCN provides routine bioning alternatives in men with high promnata -specific (PSA), including the use of serum and urine biomarkers and magnetic resonance and trica before moving to biopsy; monitoring with ultrasound with or without AFP in 3 to 6 months is recommended if a

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