

The Correlation of *KRAS* Gene Expression and *P53* Immunoexpression in Colorectal Adenocarcinoma

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Abstract

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BACKGROUND: Colorectal Adenocarcinoma (ADCCR) is the third most cancer not only in the world but also in Indonesia. There were 623 cases of ADCCR at Dr Hasan Sadikin hospital within 2015-2017. Both *KRAS* and *TP53* mutation are known as genes which involve in carcinogenesis through the same pathway, namely the chromosomal instability pathway. In West Java, researches focusing on mutation *KRAS* and *p53* also a correlation between both biomarkers among ADCCR patients are still limited.

AIM: Therefore, this research aimed to perceive a correlation between *KRAS* gene expression with *p53* immunoexpression in ADCCR.

METHODS: Cross section research design was performed to 62 cases of ADCCR as paraffin block taken from 4 hospitals in West Java, including Dr Hasan Sadikin hospital Bandung, Santosa hospital Bandung, Borromeus hospital Bandung and Syamsudin hospital Sukabumi from January 1st 2014 to 31st November 2018. *KRAS* mutation gene data taken from secondary data at molecular laboratory in Ciptomangunkusumo Hospital Jakarta and Dr Sardjito Hospital Jogjakarta, while the detection of *p53* immunoexpression data using immunohistochemical staining was carried out in the Laboratorium of Anatomical Pathology of Padjadjaran University (Dr Hasan Sadikin Hospital). All data were analysed using Chi-Square test with p-value < 0,05 of significant level then proceeded with Stata ver.11 for windows.

RESULTS: The results of this study showed that *KRAS* gene expressions from 62 sample consist of 39 wild type *KRAS* (62.39%) and 23 mutant *KRAS* (37.1%). The *p53* immunoexpression consists of 27 negative cases (non-mutant *p53*) and 35 mutant *p53*, which includes 10 cases as focal expression (16.33%) and 25 cases as diffuse expressions (40.33%). There is a significant association between *KRAS* gene expression and *p53* immunoexpressions in ADCCR ($p = 0.04$), with mild positive correlation ($Rho = 0.28$).

CONCLUSION: This study concluded that *KRAS* and *p53* mutations are involved in carcinogenesis, and the *p53* mutation is a more dominant risk factor than *KRAS* mutation among West Java people. *P53* mutations with diffuse pattern tend to express mutant *KRAS* while *p53* negative and having a focal pattern tend to express wt *KRAS*.

Introduction

Colorectal carcinoma (CRC) is a malignant epithelial tumour originating in the large bowel. Colorectal carcinoma ranks as the third most frequent cancer not only in the world but also in Indonesia [1], [2]. The worldwide mortality rate is about 608.000 deaths [2]. In Indonesia, the mortality rate is about 9.5% of all cancer deaths [3], [4]. According to data from the Department of Anatomy Pathology Dr Hasan

Sadikin Hospital Bandung, the frequency of CRC is about 224 cases in 2015, 187 cases in 2016 and 212 cases in 2017.

Colorectal Adenocarcinoma (ADCCR) is the most frequent type of CRC in the world [1]. There are many mutation genes occur in ADCCR, such as Adenomatous Polyposis Coli (APC), *TP53*, Kirsten rat sarcoma virus (*KRAS*), *PIK3CA*, etc. [5]. These genes are involved in carcinogenesis through three major pathways such as chromosomal instability, mismatch repair and CpG island methylator phenotype (CIMP).