

By Dr. Hafsa Waseela Abbas

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Understanding Cancer

A SERIES OF SIMPLE EDUCATIONAL VIDEOS FOR THE GENERAL PUBLIC

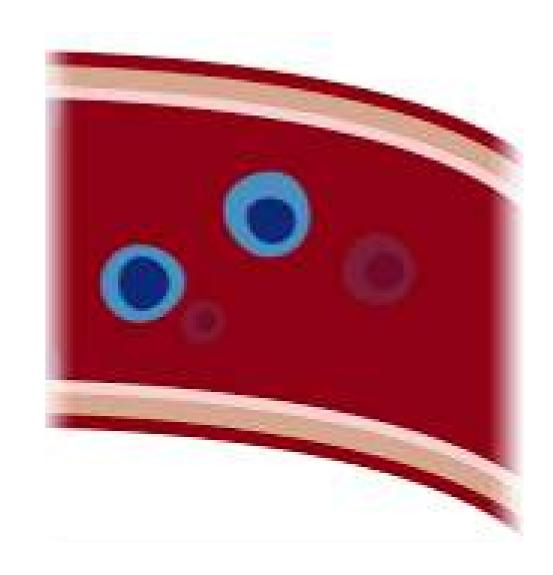
Part 8: Diagnosis - Blood test

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The blood

Our blood contains many substances that help provide energy, support, protection and ensure our body is working well.

70% of our body is made of water.



Red blood cells

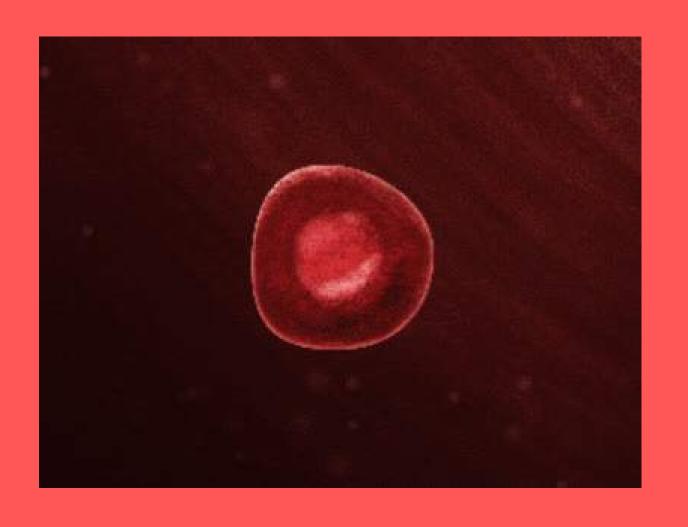
They carry oxygen to allow us to breathe.

They are red because of a protein called:

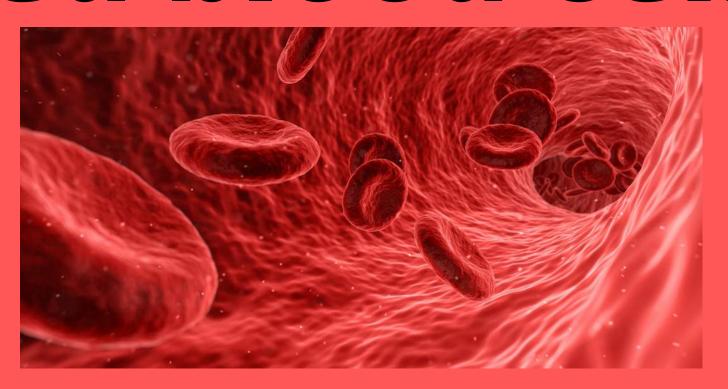
HAEMOGLOBIN

Iron

Protein



Red blood cells



The oxygen binds to the haemoglobin to form OXYHAEMOGLOBIN.

When there is low levels of iron, haemoglobin or vitamin B12 it can cause ANAEMIA.

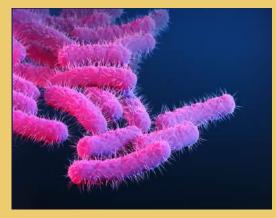
White blood cells

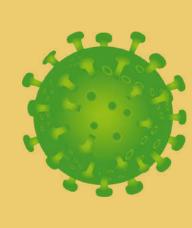
They protect the body from infection caused by:

MICROORGANISM

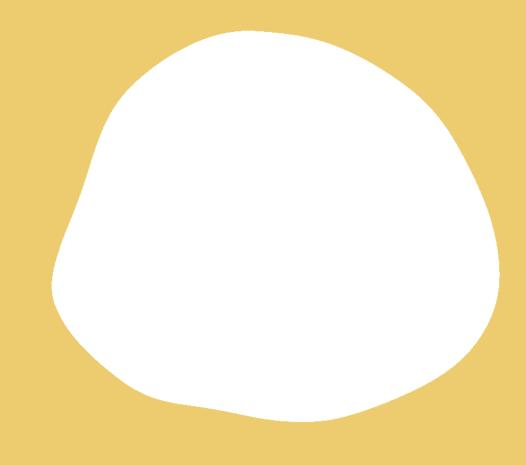
Very small

Bacteria. Virus. Fungi









How do white blood cells remove pathogens?

Pathogens are microorganisms that cause disease.

- Engulf/eat pathogens and break them down.
- They produce proteins called antibodies that recognise and bind to specific pathogens and turn them off and kill them.

Platelets

- They are colourless small fragments.
- They clot the blood to stop the loss of blood when there is a cut/injury.
- Clotting is the joining or clumping of substances.





The red blood cells, white blood cells and platelets are produced in the bone marrow. A sponge-like tissue in the bones.

The plasma is a liquid found in the blood.

Hormones: Chemicals that regulate body functions.

Nutrients:

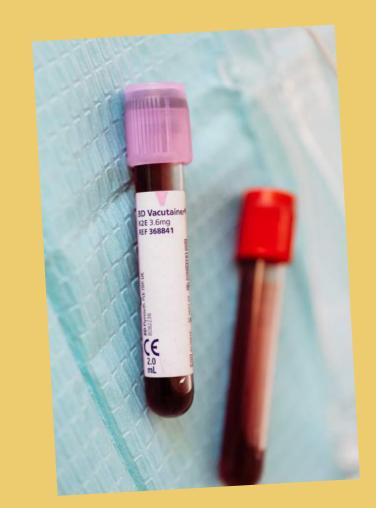
Glucose needed for energy.

Amino acids to make protein for growth and repair.

Fatty acids to make fat molecules.

immune cells and proteins for defence.

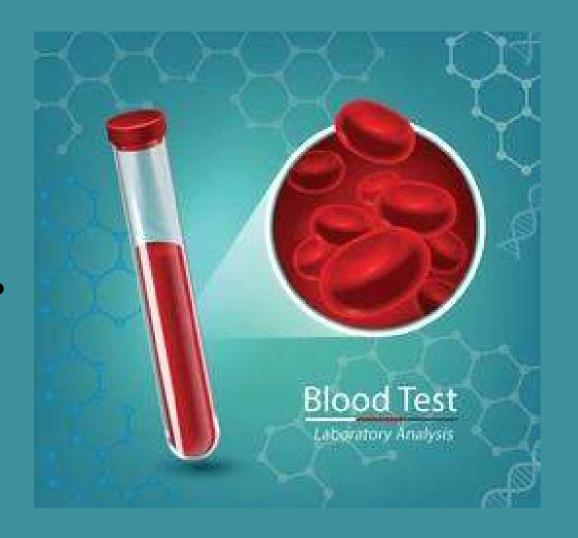
Other substances found in the blood



What is a blood test?

Blood is taken from the vein in the arm for analysis/investigation at the laboratory.

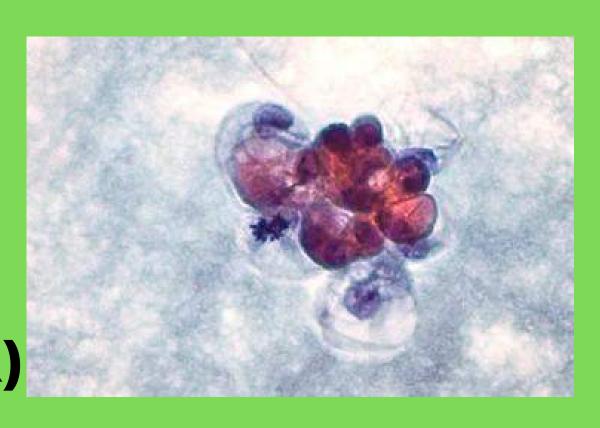
This will help find out what is wrong with the patient.



Common investigations

The following are common tests doctors look for.

- Full blood count (FBC)
- White cell count (WCC)
- Platelets
- C-reactive protein (CRP)
- Urea and Electrolytes (U and E)
- Liver Function tests (LFT)
- Erthrocyte sedimentation rate (ESR)



Urea and Electrolytes

Urea is a chemical that is made in the liver and removed from the body as URINE.

Electrolytes are minerals that are found in plasma. 70% of our body is made of water.

Water inside the cells are called INTRACELLULAR FLUID (ICF). Water outside the cells are called EXTRACELLULAR FLUID (ECF).

ElectrolytesThe mineral found in ICF is POTASSIUM.

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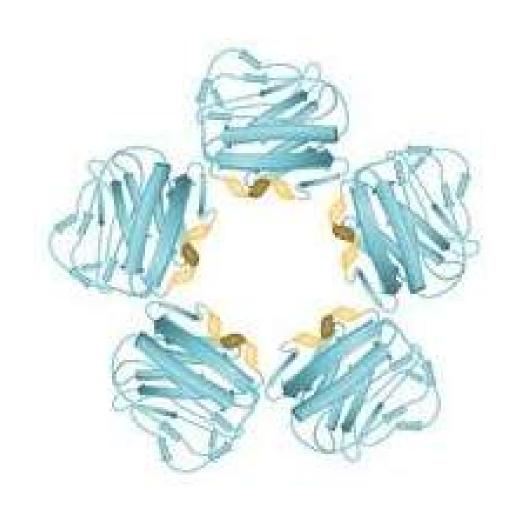
The mineral found in ECF is SODIUM and CHLORIDE.

To maintain levels, there is a pump called sodium-potassium pump.

This is important for the nerves, cardiac and muscles.





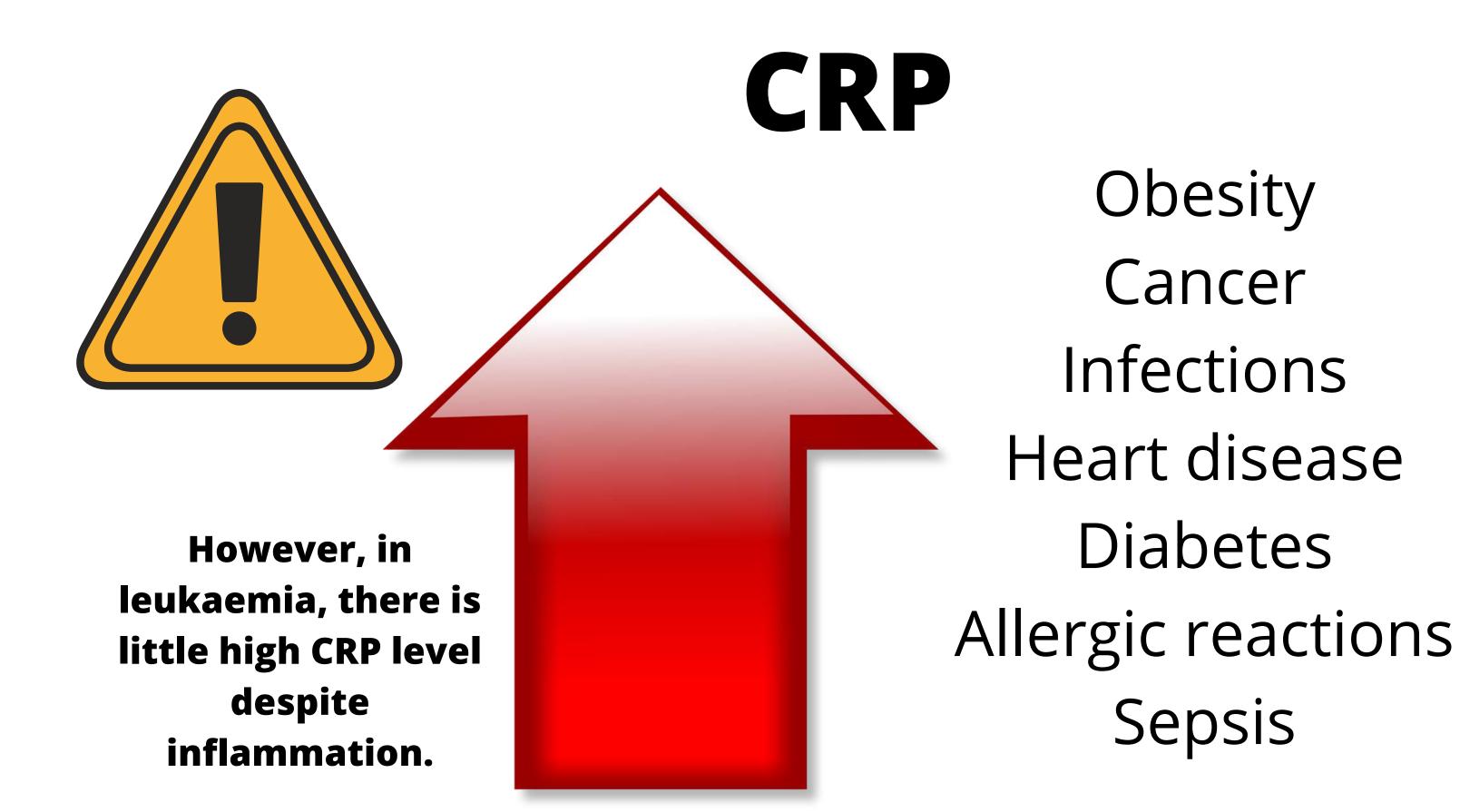


It is an inflammatory marker.

This means when there is an infection or inflammation, levels increase within 6 hours.

It can be used to monitor disease.

High levels 50-150 mg/l. Severe >300 mg/l.





ESR

Erthrocyte sedimentation rate.

An indirect meaasure of the rate of red blood cells.

Red blood cells have a negative charge Plasma protein have a positive charge. The red blood cells stack up in an infection

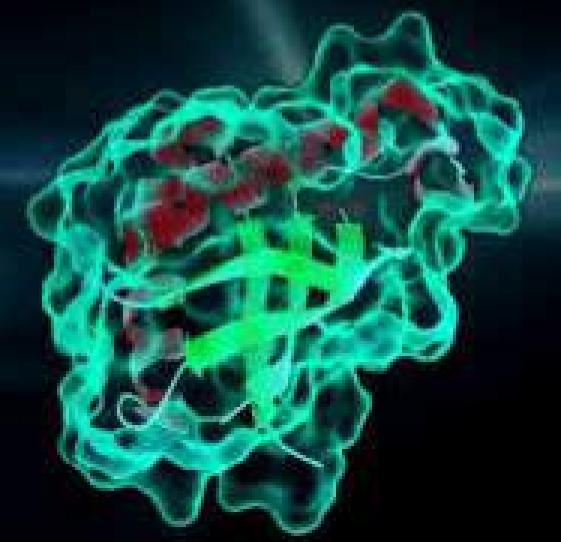
Tests depend on type of cancer.

Depending on what the patient is experiencing in terms of symptoms, physical examination and medical history, certain tests are specifically done.

Hodgkin's lymphoma would do extra tests on LDH,
Alkaline phosphatase and creatinine.
Non-Hodgkin lymphoma would not and would test for
CD25 level.

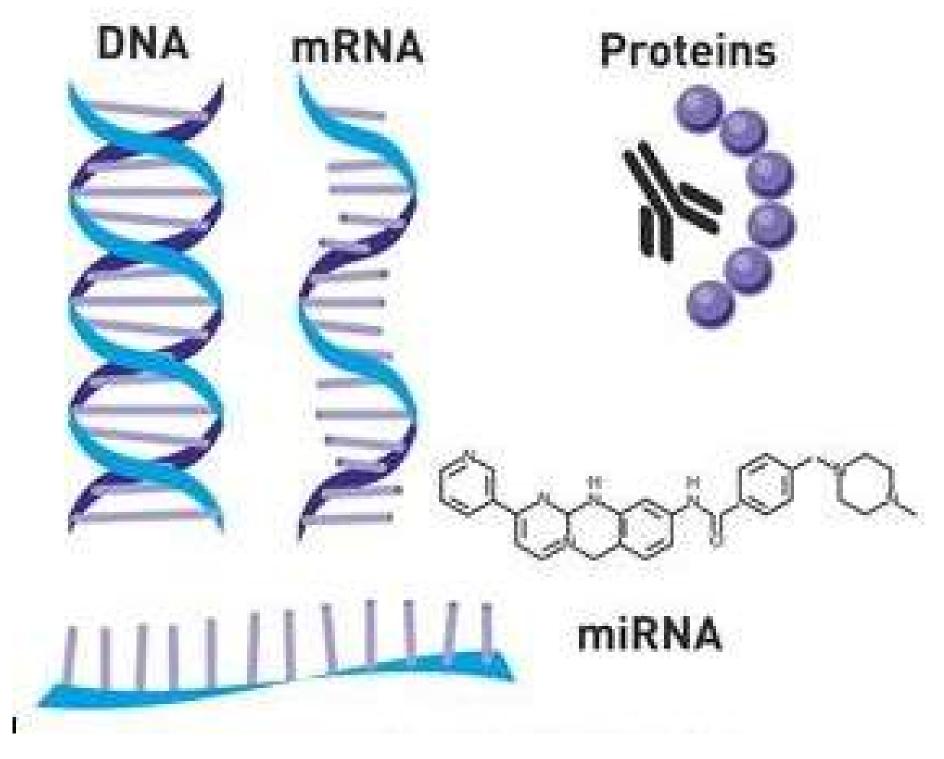
What is a tumour biomarker

CA 15-3 breast cancer



A tumor marker is a substance found in the body tissues that can be elevated only in cancer cells

Types of tumour biomarker



Types of tumour biomarker

Diagnostic Specific for cancer.

Prognostic This increases with disease

Predictive The level is based on response to therapy.

Response assessment

Efficacy of the treatment

CA-125

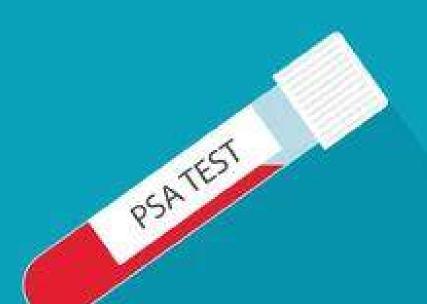


Monitor response to therapy.

80% of patients who had high levels of CA-125 had ovarian cancer.

PSA

Prostate-specific antigen



It is a protein produced by normal prostate cells and also prostate cancer cells.

The PSA test are done on patients who have symptoms or at risk and above aged 45

Total PSA - screen and monitor prostate cancer.

Free PSA - tell difference of prostate cancer with enlarged prostate.

PSA

The amount of PSA is measured in nanogram of PSA per millilitre of blood (ng/ml)

A raised PSA level is 3 ng/ml or higher for a patient aged 50 to 69.



PSA

A raised PSA level could indicate:

Large prostate
Urine infection
Cancer
Inflamed prostate (prostatitis)

ABOUT 3 IN 4 MEN WITH HIGH PSA WILL NOT HAVE CANCER!

Tumour markers for germ cell tumours



E.g. testicular cancer

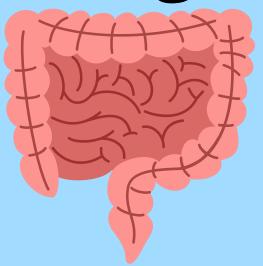
Monitor treatment of patients using the following prognostic markers.

Serum Alpha-fetaprotein (AFP)
Human chorionic gonadatrophin (HCG)
Lactate dehydrogenase (LDH)

CEA

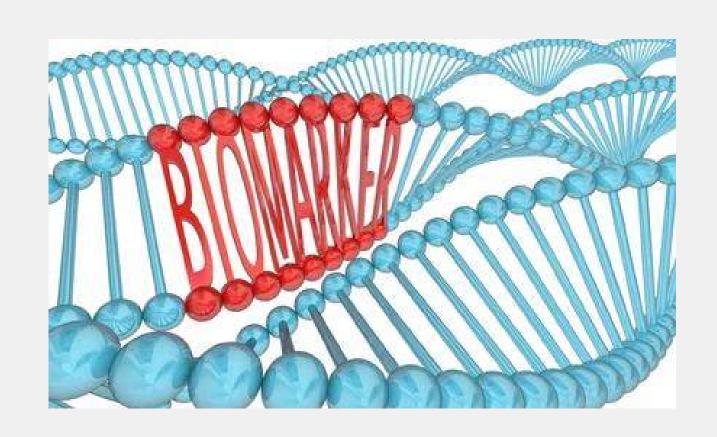
Serum carcinoembryonic antigen (CEA)





Other tumour biomarkers

- NMP22 monitor bladder cancer.
- AFP liver cancer
- CA15-3 monitor recurrence of breast cancer.
- serum thyroglobulin and calcitonin thyroid cancer.
- Urinary 5-hydroxyindoleacetic acid (5-HAA) carcinoid tumours.



Circulating Tumour cells

These are cells that circulate in the blood.

High levels in prostate and breast cancer cells.

They help predict survival in patients with advanced cancer.

They help in response to chemotherapy.

Advantages of tumour markers

Early signs of cancer get early treatment.

Increase survival.





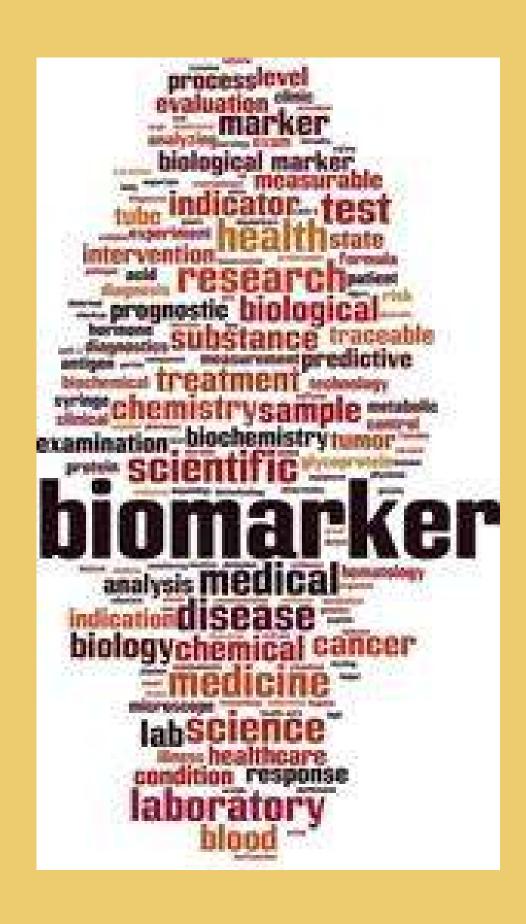
Disadvantages of tumour markers

- There is a chance it can miss cancer.
- It may lead to further tests when there is no cancer.
- Low marker levels in early stage cancer.
- Normal and tumour cells can produce most tumour markers and not specific enough.
- Proteins vary in cell types, disease states for each patient.

Blood and urine tests to detect biomarkers is an indication and further tests are required to confirm the cancer.

New biomarkers

Researchers are looking at other ways of finding biomarkers using: circulating miRNAs genomics - study of genes proteomics - study of proteins

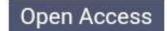


Potential prognostic markers!

New research has shown that MT1 and MT2 have low expression in advanced stages of nonsmall cell lung cancer









New Biomarkers in Cancers

by **Oaniel Novak** 1,2 ☐ and **Oachen Utikal** 1,2,* ☐ **Oaniel Novak** 1,2 ☐ and

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Potential biomarkers!

Three genes FCN3, CLEC1B, PRC1 have been found to help liver cancer patients of different survival rates: Overall, Progression-Free, Disease-Free survival.



ORIGINAL RESEARCH article

Front. Genet., 10 January 2020 | https://doi.org/10.3389/fgene.2019.0130



Identification of Platform-Independent Diagnostic Biomarker Panel for Hepatocellular Carcinoma Using Large-Scale Transcriptomics Data

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....and plenty more new research out there on biomarkers!



Overall, there are many tumour markers and more are investigated to help diagnose cancer and monitor treatment.

COMMON TUMOR MARKERS

- CEA Monitor colorectal, breast, lung cancer
- CA-125 Ovarian cancer monitoring
- CA15-3 Monitor recurrences of breast cancer
- AFP Germ cell tumors, liver cancer
- Total PSA Screen and monitor prostate cancer
- Free PSA Distinguish prostate cancer from BPH
- HCG Germ cell and trophoblastic tumors
- Hormone receptors Breast cancer therapy
- NMP 22 Monitor recurrences of bladder cancer

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Part 9: Diagnosis - X-ray
UPCOMING VIDEO RELEASING SOON!

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Acknowledgements

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