

the increased risk was mostly owed to the cardia GC subcategory (OR: 3.255, 95% CI: 1.009-10.503, $P=0.048$) in this age stratum.

Conclusion: In conclusion, due to the high incidence and mortality of GC in Iran, non-invasive screening for joint possession of single nucleotide polymorphism in genes causing susceptibility to GC, is recommended for early detection of gastric cancer. In which case, timely preventive measures may help increase the overall survival rates in at risk populations like ours.

P-0029 CHARACTERISTICS OF GASTRIC ADENOCARCINOMA IN DEPARTMENT OF MEDICAL ONCOLOGY OF CENTER REGION IN ALGERIA (BLIDA)

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Background: The second most common cause of death worldwide is gastric cancer (GC) and often diagnosed at a late stage, in Algeria the GC is in second position of digestive cancer.

Aims: To evaluated clinical, endoscopic and histologic profile of gastric adenocarcinoma in center region of Algeria (Blida).

Patients and methods: It was retrospective and uncentric study from 01/2000 to 12/2010. 424 patients (277 men-147 women, mean age 52.8) have been included. Each patient had had an interrogator, an clinical investigation, an upper endoscopy and biopsies for histology. The diagnostic of gastric adenocarcinoma was established on OMS Classification, and the staging was based on UCCI 2009 classification.

Results: Symptoms were; epigastralgia 73%, vomiting 26% and amaigrissement 18.6%. At endoscopy, the most frequent lesion was ulcerobourgenonte 40.8%, adenocarcinoma was low differentiated in 31.3%, middle differentiated in 23.3% and high differentiated in 34%. The stage IV has been observed in 80% of cases.

Conclusion: In department of medical oncology anticancer center Blida (Algeria), the most frequent stage of gastric adenocarcinoma is stage IV. To ameliorate the prognostic we must make a diagnostic at stage I and II.

P-0030 SIGNIFICANT RELATIONSHIP BETWEEN MTHFR C677T POLYMORPHISM AND GASTRIC CANCER IN ARDABIL

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Background: Gastric Cancer (GC) as the third most common malignancy in Iran, accounts for ~50% of all GI cancers who cause 55% of all cancer-related deaths in Iran. The rates of GC reported from Ardabil Province are among the highest in the world. Upper gastrointestinal cancer accounts for more than 50% of all cancer deaths in this area. Methylene tetrahydrofolate reductase (MTHFR) enzyme reductase catalyzes the conversion of 5, 10-methylene tetrahydrofolate to 5-methyl tetrahydrofolate, a cosubstrate for homocysteine remethylation to methionine. Genetic variation in this gene influences susceptibility to occlusive vascular disease, neural tube defects, and some types of cancer, and mutations in this gene are associated with methylene tetrahydrofolate reductase deficiency. Individual with two copies of 677C (677CC) have the "normal" or "wildtype" genotype. Individuals of 677TT are predisposed to mild hyperhomocysteinemia, because they have less active MTHFR available to produce 5-methyl tetrahydrofolate (which is used to decrease homocysteine). We aimed to study the association between this polymorphism and GC in our province.

Methods: We enrolled 100 patients with mean age 65.9 Yrs. affected with primary GC and same age- and sex- matched healthy control participants. The analysis has been carried out by PCR-RFLP on DNA extractions from peripheral blood.

Results: In the case group, the genotype was 45%, 51.5%, and 4% for CC, CT, and TT, respectively. And for controls were 62%, 33%, and 5%. In comparing case and control group, a significant association was found ($P=0.006$).

Conclusion: Because of high frequency of GC in our province, the investigations about the role of genetic susceptibilities for GC are very important. Finding relationships could help us to find prognostic factors for persons who are at the risk of affecting to GC in.

P-0031 ANY SIGNIFICANT ASSOCIATION BETWEEN THE ANGIOTENSIN-CONVERTING ENZYME INSERTION/DELETION POLYMORPHISM AND GASTRIC CANCER IN ARDABIL PROVINCE, IRAN

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Background: Gastric cancer as the 3rd most common malignancy in Iran, accounts for ~50% of all GI cancers who cause 55% of all cancer-related deaths in Iran. The rates of

gastric cancer reported from Ardabil province, Iran, are among the highest in the world. Upper gastrointestinal cancer accounts for more than 50% of all cancer deaths in this area. The angiotensin-converting enzyme (ACE) plays an important role not only in the regulation of vascular homeostasis but also in stimulation of hematopoiesis. The insertion/deletion polymorphism of ACE gene has recently been linked to the pathogenesis and progression of human cancers. We aimed to evaluate the association between insertion/deletion (I/D) polymorphism of the ACE gene and susceptibility to gastric cancer in our province.

Methods: We enrolled 97 patients with gastric cancer and 97 age- and sex-matched healthy control participants. This length polymorphism was revealed by conventional PCR method on DNA extracted from peripheral blood.

Results: Among cases, there were 18.6% homozygous for II, 26.8% homozygous for DD, and the remaining 54.6% were ID. The resulted Controls data were 19.2% homozygous for II, 46.5% homozygous for DD, and 34.3% for ID. Any significant correlations were not found between cases and controls ($p=0.47$) or pathologic values in case group.

Conclusion: Finding any correlation in this investigation could results from the reported relationships between the noted polymorphism and some disorders such as Diabetes which were undetected in some of our participants. But, theoretically this length polymorphism seems to offer the susceptibility to Gastric cancer.

P-0032 EPIDEMIOLOGICAL AND CLINICO-PATHOLOGICAL CHARACTERISTICS OF GASTRIC CARCINOMA IN THE DEPARTMENT OF GASTROENTEROLOGY: REVIEW OF 113 CASES

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Background: Gastric cancer is one of the most common cancers and one of the most frequent causes of cancer related deaths. Its incidence has decreased over the last decade in developed countries. Recent advances have clarified the ethiopathogenic confirming the relationship between non cardia gastric cancer and *Helicobacter Pylori*. The prognosis remains poor with a five year survival rate of 25%.

Material and methods: This retrospective study is about 113 cases of gastric carcinoma collected in the department of Gastroenterology at Hassan II university hospital over a period of six years from January 2002 to December 2007.

Results: 113 cases of gastric carcinoma were collected representing 80% of gastric neoplasm. The sex ratio is 1,8 (73 men, 40 women). The median age at time of diagnosis is 57,65 years (range: 26-86 years). Onset of symptoms occurred over a period ranging from 1 to 6 months.

The clinical symptomatology was dominated by epigastric pains (76,1%) and weight loss (88,5%), vomiting was noted in 68,14% and digestive bleeding in 23%.

All patients underwent upper digestive fibroscopy which has objectified an ulcerative budding process in 67,25% of cases. The tumor was localized on the antropyloric region in 44,24% of the cases.

Histopathological study confirmed the diagnosis of gastric carcinoma: poorly differentiated or undifferentiated in 47%, moderately differentiated in 35,4% and well differentiated in 12,4% of cases. *Helicobacter Pylori* has been isolated at histology in 17 cases.

Conclusion: this study shows that gastric cancer is a major public health problem. Prognosis is extremely poor. A screening by endoscopic examination in a population at high risk is needed. Systemic eradication of *Helicobacter Pylori* should reduce the frequency of the disease.

P-0033 CORRELATION BETWEEN QUALITY OF LIFE AND CLINICAL OUTCOMES IN GASTRIC CANCER

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Background: According to the World Health Organization, each year, almost one million new cases of gastric cancer are diagnosed worldwide and 700,000 deaths are attributed to it. As a result of poor survival, quality of life in these patients is likely to be of considerable importance. A handful of validated, patient-reported outcomes instruments are available to assess health-related quality of life (QoL) in gastric cancer.

Aim: To identify and understand the correlation between conventional tumor treatment outcomes in gastric cancer and specific QoL measures.

Method: A literature search was conducted using PubMed and EMBASE. Approximately 200 citations were retrieved using key words of "burden", "quality of life", "patient reported outcomes", and "gastric cancer [MESH]" and limits of "English language", "title and abstract" and "published within the last five years". Additional articles were obtained through ancestral and related article searches. All