ABSTRACTS

Chinese Abstracts – Volume 8 Issue 3*

Consensus statement (专家共识)
Strategies and Recommendations for Management of Gastrointestinal Surgery During the COVID-19 Pandemic: Experience Shared by Chinese Surgeons

疫情防控期间胃肠外科的应对策略与诊疗推荐：中国外科医师的经验分享

由严重急性呼吸综合征冠状病毒2（SARS-CoV-2）引起的COVID-19正在全球暴发。尽管SARS-CoV-2被认为主要是通过呼吸道飞沫传播，但最新研究发现其也可以通过粪/口途径传播，这也引起了大家对胃肠道病毒感染的担忧。作为抗疫一线的中国胃肠外科医师，我们愿意分享一些抗疫期间的经验和教训。在疫情期间建立一个科学、合理的应对策略是非常必要的。本文中，我们尝试在继续提供胃肠外科医疗服务的同时尽可能从各个方面减少病毒传播，采取了中国多家机构的共识，包括胃肠外科门诊防护、胃肠外科病房防护、胃肠内镜中心防护以及手术期管理的优化，我们的经验分享和治疗推荐有助于全国乃至全球的胃肠外科建立自己的病毒防控策略。

Editorial (述评)
Strategies for management of gastrointestinal surgery in the COVID-19 pandemic
COVID-19 疫情期间胃肠外科实践策略

Review (综述)
Anti-EGFR therapy in metastatic colorectal cancer: mechanisms and potential regimens of drug resistance
抗EGFR治疗转移性结直肠癌：耐药机制及潜在对策

作为表皮生长因子受体（EGFR）的高效靶向药物，西妥昔单抗和帕尼单抗常用于转移性结直肠癌（mCRC）患者的临床治疗。尽管这些药物取得良好的疗效，但耐药现象也常伴随出现。目前，研究人员已经明确了Kras, Nras, Braf突变以及HER2扩增对上述药物疗效的影响，并提出了相应的对策。但EGFR及其实体的异常，PI3KCA, PTEN, TP53, MET, HER3, IRS2, FGFR1和MAP2K1等基因的改变或扩增、胰岛素样生长因子-1（IGF-1）的过表达、Ids-1介导的细胞凋亡调节蛋白（Bim）的低表达、错配修复基因缺陷（dMMR），以及表观遗传不稳定等因素，也可能导致mCRC的耐药。尽管耐药的出现具有遗传或表观遗传的异质性，但上述与此有关的分子改变大都集中在某些关键的信号通路上，如RAS/RAF/MAPK通路和PI3K/Akt/mTOR通路。因此，许多研究开始尝试靶向这些信号以期开发出新的治疗方案。本文中，我们对抗EGFR治疗耐药性的产生机制进行了述评，并提出了临床实验中的潜在对策。

BRAF and KRAS mutations in metastatic colorectal cancer: future perspectives for personalized therapy
BRAF和KRAS突变型转移性结直肠癌：个体化治疗的前景

结直肠癌是世界上最常见的恶性肿瘤之一。30%的结直肠癌患者有转移，转移性结直肠癌（mCRC）患者5年总生存率不足10%。临床研究显示，抗EGFR药物用于mCRC的一线治疗，疗效有限。因此，许多研究聚焦到了BRAF和KRAS突变。过去对于转移性结直肠癌患者的治疗，不考虑BRAF或KRAS突变与否，但后来在临床研究中发现，这两种基因突变的mCRC患者预后极差。因此，有必要筛选出BRAF或KRAS突变的mCRC患者，制定合理的治疗策略，以改善其预后和生存。mCRC患者BRAF和KRAS突变率大概分别为10%和44%。尽管mCRC患者整体生存率近年来有所改善，但伴有这两种基因突变的患者对治疗的反应及预后仍然很差。因此，亟需制定出针对BRAF或KRAS突变型mCRC的前瞻性个体化治疗策略。本文中，我们重点关注mCRC患者的BRAF和KRAS突变，以了解其耐药机制，思考如何提高这些突变患者的治疗反应、临床疗效及远期预后，并探讨了BRAF和KRAS突变型mCRC的前瞻性个体化治疗策略。

*This article abstract was originally published in English. This translation has not been verified and should not be relied upon—it is provided for reference purposes only. The Publishers have not checked this translation and accept no liability for completeness or accuracy of this translation or the use of this translation for whatever purpose. This translation may be incomplete and inaccurate in whole or in part. If you need to rely upon a translation of this abstract, a professional human translator should be engaged to supply an accurate translation of the original English. When referencing articles from this journal, please always refer to the original English version, rather than a translated equivalent.

本文摘要最初是用英文发表。中文翻译未经认证，仅供参考。出版社没有对中文翻译进行校对，不负责译文的完整性和准确性，也不会将此用作其他目的。中文翻译可能会出现部分不完整或不准确的情况。如果你需要准确获悉摘要，最好能请一位专业译者针对英文原文进行翻译。阅读杂志文章，请参考英文原文，不推荐中文翻译。
Influence of microbiota on immunity and immunotherapy for gastric and esophageal cancers

Cancer cells also show many heterogeneous signals that disrupt the TME, which are potent stimulators of tumor progression and immune escape. These signals may include factors such as cytokines, chemokines, and growth factors that are released by cancer cells and their microenvironment. These factors can create an immunosuppressive microenvironment that inhibits the activation and function of immune cells, thus facilitating tumor growth and progression.

The influence of mitochondrial-directed regulation of Wnt signaling on tumorigenesis

Wnt signaling plays a critical role in tumorigenesis and cancer progression. Mitochondrial dysfunction has been linked to several aspects of Wnt signaling, including the regulation of Wnt receptors, Wnt ligands, and downstream effectors. Understanding the relationship between mitochondrial dysfunction and Wnt signaling could provide new insights into the development and progression of cancer.

Culture and application of conditionally reprogrammed primary tumor cells

Conditionally reprogrammed primary tumor cells represent a novel approach for understanding tumorigenesis and developing novel therapeutic strategies. These cells allow the study of the cancer cell-intrinsic and extrinsic factors that contribute to cancer development and progression, providing new opportunities for personalized medicine and cancer therapy.

Original article

Nomogram for predicting pathological complete response and tumor downstaging in patients with locally advanced rectal cancer on the basis of a randomized clinical trial

The nomogram is designed to predict the probability of achieving pathological complete response and tumor downstaging in patients with locally advanced rectal cancer (LARC) after preoperative chemotherapy. The nomogram includes clinical and pathological variables that are known to influence the outcomes of preoperative chemotherapy, allowing clinicians to estimate the likelihood of achieving a good response and downstaging, which can guide the selection of treatment options and improve patient outcomes.

**Downloaded from https://academic.oup.com/gastro/article-abstract/8/3/C1/5867082 by guest on 08 July 2020**