
Tumor suppressor protein [p53] and multidrug transport protein [p170] in hodgkins disease

Naeem Goda Ouf

The present study was performed on 50 children categorized as follows: • Fifteen children with chronic liver disease 11 males and 4 females with their age ranging from 6 months to 13 years. According to histopathological findings in the liver biopsy this group included patients with glycogen storage disease, chronic persistent hepatitis, bilharzial portal fibrosis, posthepatitic cirrhosis, mixed type (chronic active hepatitis plus bilharzial portal fibrosis) and a case of intrahepatic biliary cirrhosis and congenital hepatic fibrosis. • Fifteen children with hepatitis E virus infection, 9 males and 6 females with their age ranging from 6 to 13 years. • Twenty apparently healthy children as reference group, 10 males and 10 females with their age ranging from 5 to 13 years. A few children were from Benha city, but most were residents of nearby rural communities. Two serum samples were obtained from every patient with a 6 months interval between the first and the second samples. In addition to history and clinical examination, all children were subjected to the following investigations: liver function tests, hepatitis B surface antigen, histopathological examination of liver biopsy (SII¥¥AI?Y M'J) ct1;VCZII.570;Vliver disease group), and quantitative measurement of serum TNF- α by enzyme linked immunosorbent assay. As regards the liver function tests, most of them showed a significant difference between the reference group and the chronic liver disease and HEV +ve groups. They are markedly affected in the chronic liver disease group than in HEV +ve group. The disease group, also showed a higher rate of increase in serum ALT level (53.2%) than the HEV+ve group (23.5%) at $P < 0.03$. However, the alkaline phosphatase level showed no significant rate of change between the two groups. Serum AST level showed a higher rate of increase (43.6%) in the chronic liver disease group than the HEV +ve group (21.5%) at $P < 0.03$. Total serum bilirubin and serum direct bilirubin showed no significant difference between the reference group and the two pathological groups. They also showed no significant rate of change between the two groups. Considering serum albumin level, the chronic liver disease group showed a significant larger rate of decrease in the serum albumin (-7.3%) than the HEV+ve group (-4.2%) at $P < 0.01$. The chronic liver disease group also showed a larger rate of decrease in A/G ratio (-12.5%) than the HEV+ve group (-5.7%) at $P < 0.0002$. At p