

DEVELOPMENT OF NOVEL GENETIC SIGNATURE FOR PREDICTING SURVIVAL IN PATIENTS WITH LARYNGEAL SQUAMOUS CELL CARCINOMA

¹Agnė Pašvenskaitė, ²Rasa Liutkevičienė,
²Alvita Vilkevičiūtė, ²Greta Gedvilaitė,
¹Vykintas Liutkevičius, ¹Virgilijus Uloza

¹Lithuanian University of Health Sciences, Department of Otorhinolaryngology,
Kaunas, Lithuania

²Lithuanian University of Health Sciences, Neuroscience Institute, Kaunas, Lithuania

Introduction. Results of laryngeal squamous cell carcinoma (LSCC) treatment and five-year survival rate of these patients remain poor. To purify therapeutic targets, investigation of new specific and prognostic specific blood- or tissue-based biomarkers of LSCC is required.

Research objectives. This study aimed to evaluate the impact on selected single nucleotide polymorphisms (SNPs) (*IL-6* rs1800795, *IL-9*: rs2069884, rs2069885, rs1859430, rs2069870, rs11741137, *IL-10*: rs1800872, rs1800871, rs1800896, *BLK* rs13277113, *TIMP3* rs9621532, *IL1RL1* rs1041973, and *IL1RAP* rs4624606) on LSCC development and to analyse associations of selected SNPs with patients' five-year survival rate.

Material and methods. 300 LSCC patients and 533 controls were included in the study. Genotyping of selected SNPs was carried out using the RT-PCR.

Results. Significant associations were identified between *IL-10* rs1800871 variants and advanced stage of LSCC patients' group in the codominant, recessive and additive models ($p=0.027$, $p=0.040$ and $p=0.037$). Significant variants of *IL-10* rs1800872 were determined in the codominant, recessive and additive models ($p=0.027$, $p=0.040$ and $p=0.037$). Significant genotype distribution was identified between *TIMP3* rs9621532 variants and LSCC in the codominant, overdominant and additive models ($p=0.020$, $p=0.020$ and $p=0.045$). Also, significant variants of *IL1RAP* rs4624606 were determined in the codominant, overdominant and additive models ($p=0.030$, $p=0.037$ and $p=0.025$). Multivariable Cox regression analysis revealed a significant association between the patients' survival rate and distribution of *IL-9* rs1859430 and *IL1RAP* rs4624606 variants: patients carrying AA genotype at *IL-9* rs1859430 and AA or TT at *IL1RAP* rs4624606 had a higher risk of dying ($p=0.005$; $p=0.044$).

Conclusions. *IL-10*:rs1800871, rs1800872 SNPs are associated with the development of advanced stages of LSCC. *TIMP3* rs9621532 and *IL1RAP* rs4624606 SNPs play a significant role in the development of LSCC. The genotypic distribution of *IL-9* rs1859430 and *IL1RAP* rs4624606 negatively influences the five-year survival rate of LSCC patients, suggesting that they could contribute to developing blood-based biomarkers of LSCC.