miR 26a

The expression levels of MicroRNA-26a and -24 turned out to be promising predictors of further clinical course in patients with glioblastoma¹⁾.

Although pituitary neuroendocrine tumor is a malignant tumor, it can present as invasive growth in some cases. MicroRNA (miR)-26a has been found to be abnormally highly expressed in pituitary neuroendocrine tumor, indicating possible involvement in pathogenesis. As a known target gene of miR-26a, PLAG1 has abnormally low expression in pituitary neuroendocrine tumor. The correlation between miR-26a or PLAG1 expressional abnormality and occurrence of pituitary neuroendocrine tumor.

pituitary neuroendocrine tumor tissues, including both invasive and non-invasive subtypes, were collected from the Neurosurgery Department Yantaishan Hospital, Yantai, Shandong, China, in parallel with normal pituitary tissues from postmortem autopsy. qRT-PCR was used to detect mRNA expression of miR-26a and PLAG1, while Western blotting was used to test PLAG1 protein expression. The correlation between miR-26a and PLAG1, and with pathological features, were analyzed. ROC analysis revealed the utility of miR-26a and PLAG1 in differential diagnosis of invasive/non-invasive pituitary tumors and in analyzing their effects on patient prognosis. RESULTS MiR-26a was remarkably upregulated in pituitary tumors, while PLAG1 was downregulated, especially in invasive pituitary tumors. miR-26a and PLAG1 had higher diagnostic values for differentiating between invasive and non-invasive pituitary tumors (AUC=0.889 and 0.818, respectively). Those patients with miR-26 overexpression and PLAG1 downregulation had unfavorable prognosis. miR-26 and PLAG1 are independent factors affecting patient diagnosis.

MiR-26a can facilitate occurrence of pituitary tumor and invasiveness, probably via inhibiting PLAG1 expression ²⁾.

1)

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