



US 20100248256A1

(19) **United States**

(12) **Patent Application Publication**
Minagawa et al.

(10) **Pub. No.: US 2010/0248256 A1**
(43) **Pub. Date: Sep. 30, 2010**

(54) **HEPATOCELLULAR CARCINOMA PROTEIN MARKER, AND METHOD FOR DETECTION OF HEPATOCELLULAR CARCINOMA USING THE SAME**

(86) PCT No.: **PCT/JP2008/061375**

§ 371 (c)(1),
(2), (4) Date: **Dec. 22, 2009**

(30) **Foreign Application Priority Data**

(76) Inventors: **Hirota** **Minagawa**, Tokyo (JP);
Kenji Miyazaki, Tokyo (JP); **Yo Tabuse**, Tokyo (JP); **Kenichi Kamijo**, Tokyo (JP); **Shuichi Kaneko**, Ishikawa (JP)

Jun. 20, 2007 (JP) 2007-162857

Publication Classification

(51) **Int. Cl.**
G01N 33/53 (2006.01)
C07K 14/435 (2006.01)

(52) **U.S. Cl.** **435/7.1; 530/350; 436/501**

(57) **ABSTRACT**

Correspondence Address:
MCGINN INTELLECTUAL PROPERTY LAW GROUP, PLLC
8321 OLD COURTHOUSE ROAD, SUITE 200
VIENNA, VA 22182-3817 (US)

Provided are: a method of assessing hepatocellular carcinoma by using a protein with a different phosphorylated state in hepatocellular carcinoma cells compared with non-hepatocellular carcinoma cells; and a hepatocellular carcinoma protein marker for detecting hepatocellular carcinoma formed of the protein. The hepatocellular carcinoma protein marker for detecting hepatocellular carcinoma includes tumor rejection antigen gp96 formed of the amino acid represented by SEQ ID NO: 1, and is measured for its phosphorylated state to detect the presence or absence of hepatocellular carcinoma.

(21) Appl. No.: **12/452,216**

(22) PCT Filed: **Jun. 16, 2008**

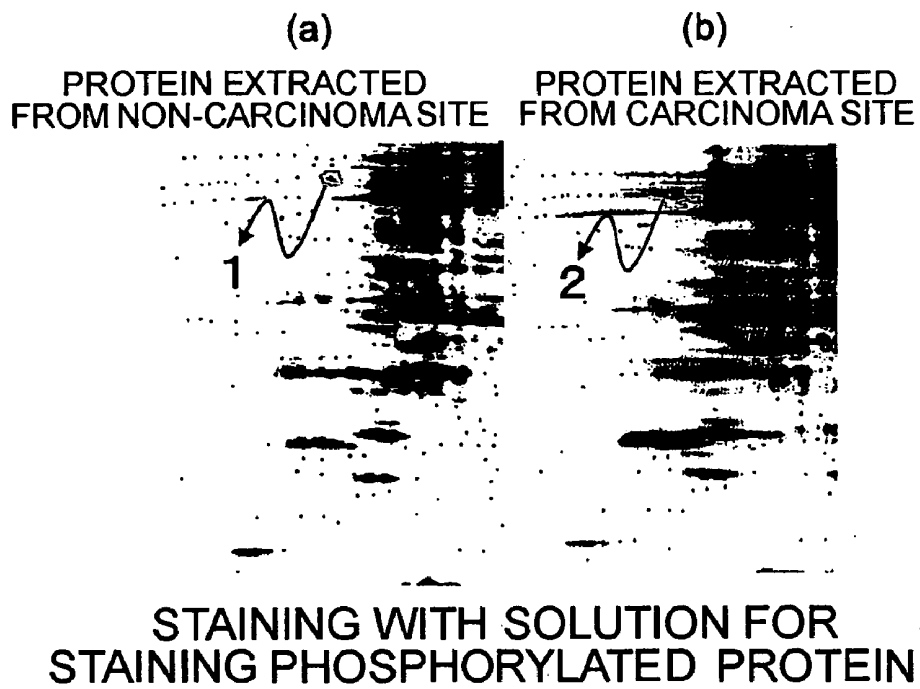


FIG. 1

1 MRALWVLGLC CVLLTFGSVR ADDEVVDVGT VEEDLGKSRE GSRTDDEVVQ
51 REEEAIQLDG LNASQIRELR EKSEKFAFQA EVNRMMKLI NSLYKNKEIF
101 LRELISNASD ALDKIRLISL TDENALSGNE ELTVKIKCDK EKNLLHVTDT
151 GVGMTREELV KNLGIAKSG TSEFLNKMTE AQEDGQSTSE LIGQFGVGFY
201 SAFLVADKVI VTSKHNDTQ HIWESDSNEF SVIADPRGNT LGRGTTITLV
251 LKEEASDYLE LDTIKNLVKK YSQFINFPIY VWSSKTETVE EPMEEEEAAK
301 EEKEESDDEA AVEEEEEKK PKTKKVEKTV WDWELMNDIK PIWQRPSKEV
351 EEDEYKAFYK SFSKESDDPM AYIHFTAEGE VTFKSILFVP TSAPRGLFDE
401 YGSKKSDYIK LYVRRVFITD DFHDMMPKYL NFKGVVDS DPLNVSRET
451 LQQHKLLKVI RKKLVRKTL D MIKKIADDKY NDTFWKEFGT NIKLGVIEDH
501 SNRTRLAKLL RFQSSHPTD ITSLDQYVER MKEKQDKIYF MAGSSRKEAE
551 SSPFVERLLK KGYEVIYLTE PVDEYCIQAL PEFDGKRFQN VAKEGVKFDE
601 SEKTESREA VEKEFEPLLN WMKDKALKDK IEKAVVSQRL TESPICALVAS
651 QYGWSGNMER IMKAQAYQTG KDISTNYAS QKKTFEINPR HPLIRDMLRR
701 IKEDDDKTV LDLAWLLET ATLRSGYLLP DTKAYGDRIE RMLRSLNID
751 PDAKVEEPE EEPETAEDT TEDTEQDEDE EMDVGTDEEE ETAKESTAEK
801 DEL

FIG. 2

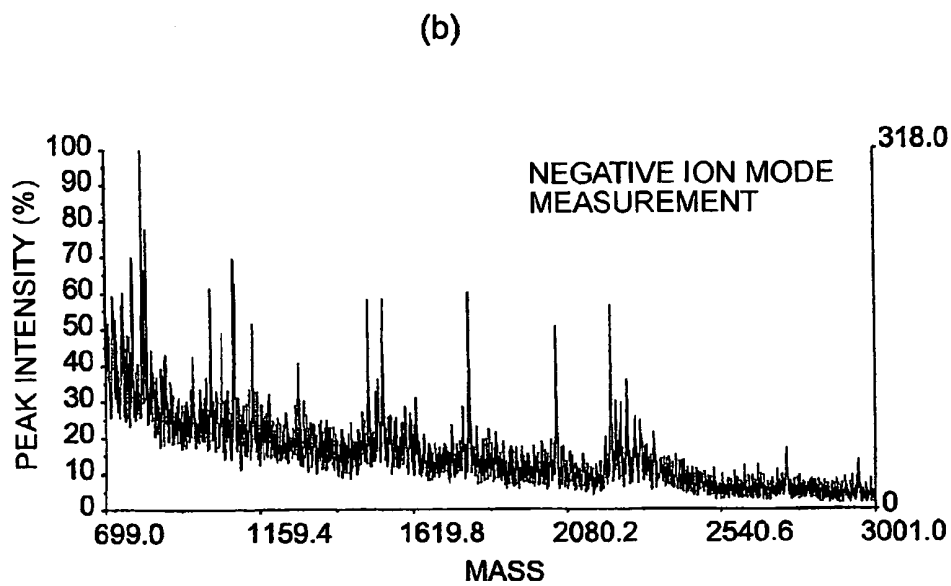
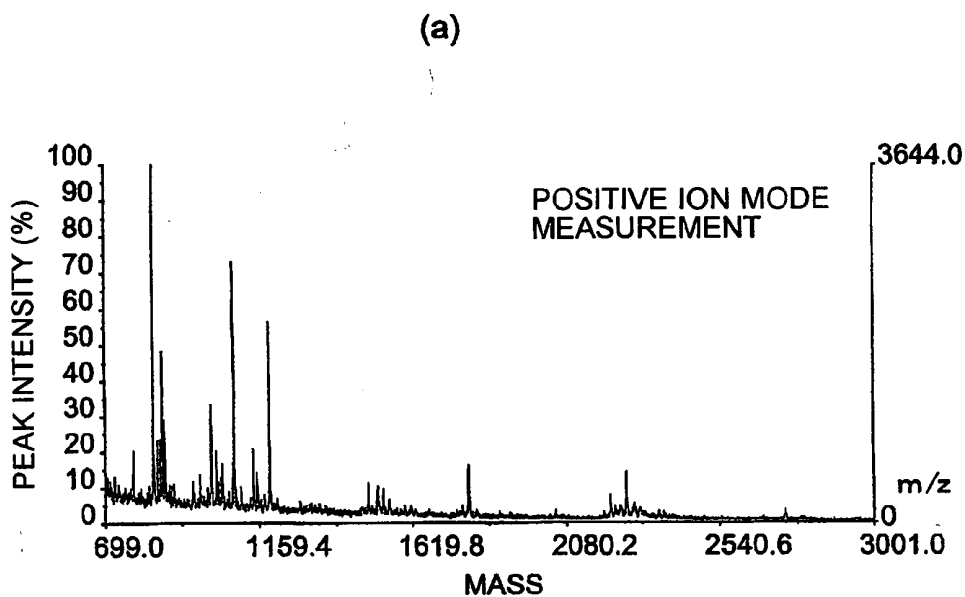


FIG. 3

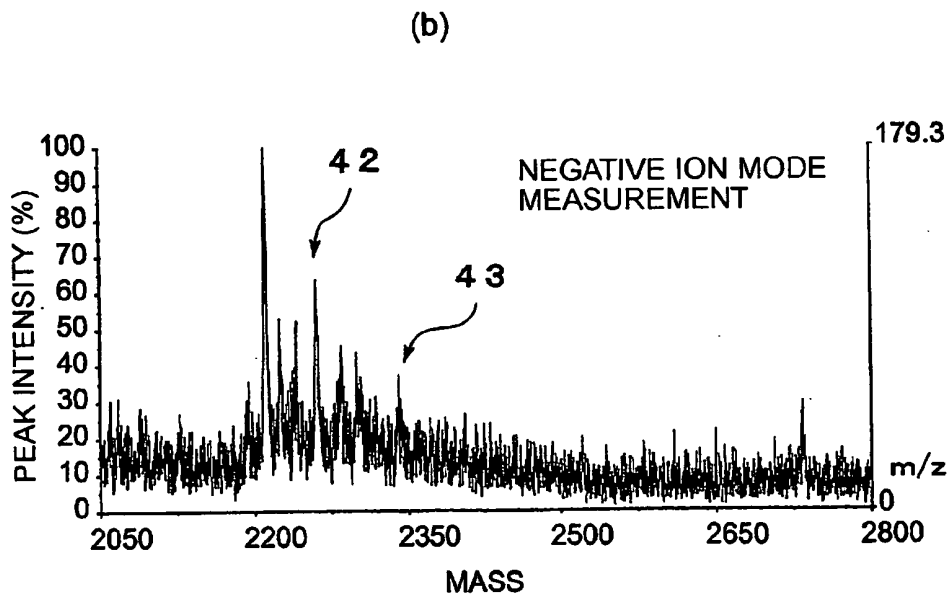
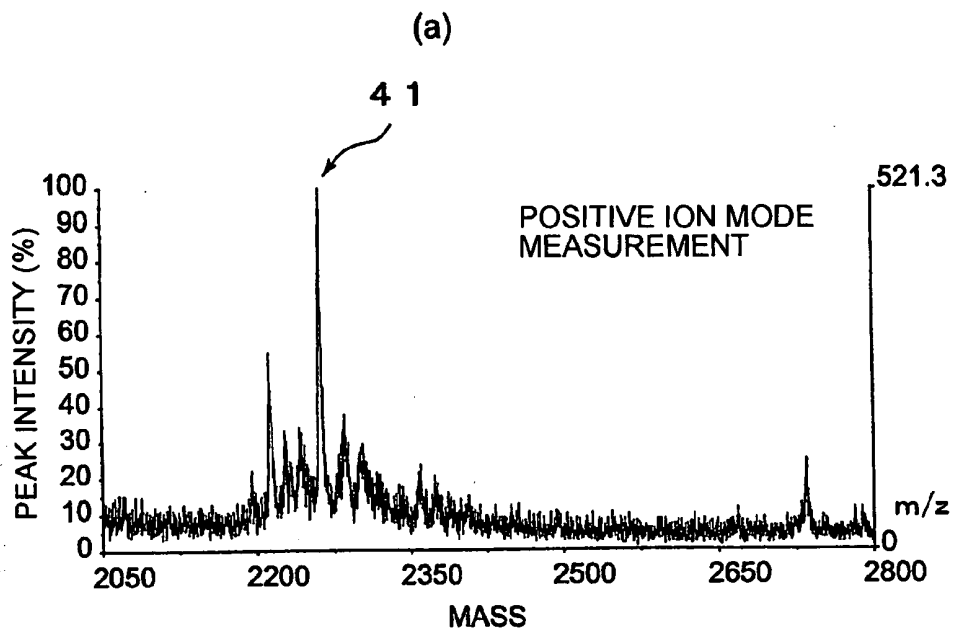


FIG. 4

**HEPATOCELLULAR CARCINOMA PROTEIN
MARKER, AND METHOD FOR DETECTION
OF HEPATOCELLULAR CARCINOMA
USING THE SAME**

TECHNICAL FIELD

[0001] This invention relates to a phosphorylating-modified, i.e. phosphorylated, protein marker that can be used in detection of hepatocellular carcinoma and a method of detecting a hepatocellular carcinoma including a step of using the protein marker.

BACKGROUND ART

[0002] The hepatocellular carcinoma is one of epithelial malignant tumors developed as a primary carcinoma in a liver and formed of tumor cells similar to hepatocytes. In general, a large number of tumors are formed in a liver and are likely to grow and progress in a hepatic vessel, and a tumor thrombosis is frequently formed in a portal vein. The hepatocellular carcinoma often breaks out in the Asian region including Japan and the African region, and cirrhosis concurs in many cases.

[0003] As a marker for detecting hepatocellular carcinoma, use is made have been conventionally of α -fetoprotein (AFP) and PIVKA-II (see Non-patent Document 1), KM-2 (see Non-patent Document 2), CA125 (see Non-patent Document 3), and the like.

[0004] Meanwhile, it is known that a post-translational modified, in particular, phosphorylated protein reflects conditions of various organs and tissues. For example, a phosphorylated troponin I protein for recognizing a condition of a muscle tissue that has suffered damage (see Patent Document 1); and phosphorylated urokinase to be used for detecting various types of carcinoma (see Patent Document 2).

[Non-patent Document 1] Liebman H A, Furie B C, Tong M J, Blanchard R A, Lo K J, Lee S D, Coleman M S, and Furie B., *New Engl. J. Med.* 310, pp. 1427-1431. (1984)

[Non-patent Document 2] Kumagai Y, Chiba J, Sata T, Ohtaki S, and Mitamura K. *Cancer Res.* 52, pp 4987-4994. (1992)

[0005] [Non-patent Document 3] Elias J, Kew M C. *Int. J. Cancer.* 46, pp 805-807. (1990)

[Patent Document 1] JP-A-2006-502203, Title of the Invention "ISOLATED POST-TRANSLATIONALLY MODIFIED PROTEINS FOR MONITORING AND DIAGNOSING MUSCLE DAMAGE"

[Patent Document 2] JP-B-3129430, Title of the Invention "METHOD FOR DETECTING TUMOR DISEASE"

DISCLOSURE OF THE INVENTION

Problem to be Solved by the Invention

[0006] However, markers disclosed in Non-patent Documents 1 to 3 have not been sufficient in assessment rate of positive results.

[0007] For example, the screening rates of AFP and PIVKA-II in hepatocellular carcinoma assessment are 60% to 70%. Therefore, there is a demand for a marker with additional reliability.

[0008] An object of this invention is to provide a protein other than those described in the above-mentioned Patent Documents 1 and 2, including a method of assessing hepatocellular carcinoma by using a protein which is present in a

hepatocellular carcinoma cell in a different phosphorylated state from that in a non-hepatic carcinoma cell.

[0009] Further, another object of this invention is to provide a hepatocellular carcinoma protein marker for detecting the hepatocellular carcinoma, including a protein having a different phosphorylated state.

Means to Solve the Problem

[0010] According to an aspect of this invention, there is provided a hepatocellular carcinoma protein marker, including tumor rejection antigen gp96 formed of an amino acid represented by SEQ ID NO: 1, in which the protein marker is phosphorylated.

[0011] According to another aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, which includes using the hepatocellular carcinoma protein marker as above-described.

[0012] According to still another aspect of this invention, there is provided a method of detecting hepatocellular carcinoma as above described in which the using the protein marker is verifying phosphorylation of the protein marker.

[0013] According to yet another aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, in which the using verification is performed based on measurement of any one of a serine residue, a threonine residue, and a tyrosine residue of the protein marker for its phosphorylation.

[0014] According to a further aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, in which using the protein marker is extracted from a surgically sampled biological sample.

[0015] According to a still further aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, in which the biological sample includes any one kind of a biopsy sample, blood, plasma, serum, and urine.

[0016] According to a yet further aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, which includes: measuring phosphorylation of tumor rejection antigen gp96 formed of an amino acid represented by SEQ ID NO: 1; and judging the measurements as positive based on a comparison with a normal value.

[0017] According to another aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, which comprises measuring phosphorylation of tumor rejection antigen gp96 as the hepatocellular carcinoma protein marker as above-described in a biological sample, wherein the measuring is performed by a method selected from the group consisting of an enzyme immunoassay, a fluorescence-labeled antibody method, a western blot method, a radioimmunoassay, an immunoprecipitation method, electrophoresis, liquid chromatography, and mass spectrometry.

[0018] According to still another aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, in which the phosphorylation is measured with respect to any one of a serine residue, a threonine residue, and a tyrosine residue of the hepatocellular carcinoma protein marker.

[0019] According to yet another aspect of this invention, there is provided a method of detecting hepatocellular carcinoma as above-described, in which the measuring comprises: extracting a protein from a surgically sampled biological sample; subjecting the protein to a multicycle of electrophoresis with different dimensions; fixing and staining the protein on a solid carrier; and comparing an increase or decrease in the tumor rejection antigen gp96 in a protein spot.

[0020] According to a further aspect of this invention, there is provided a method of detecting hepatocellular carcinoma,

in which the biological sample includes any one kind of a biopsy sample, blood, plasma, serum, and urine.

[0021] According to a still further aspect of this invention, there is provided a method of detecting hepatocellular carcinoma as above-described, in which judging a presence or absence of hepatocellular carcinoma based on a comparison of the results obtained from measuring phosphorylation of a digestion product of the tumor rejection antigen gp96 obtained from a surgically sampled biological sample in positive ion mode measurement and in negative ion mode measurement by using a mass spectrometer.

[0022] According to a yet further aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, in which the biological sample includes any one kind of a biopsy sample, blood, plasma, serum, and urine.

[0023] According to another aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, in which an antibody that recognizes a phosphorylated site of the tumor rejection antigen gp96 is used.

[0024] According to still another aspect of this invention, there is provided a method of detecting hepatocellular carcinoma, in which the antibody recognizes any one of a phosphorylated serine residue, a phosphorylated threonine residue, and a phosphorylated tyrosine residue.

EFFECT OF THE INVENTION

[0025] The measurement of phospholation the tumor rejection antigen gp96 formed of the amino acid represented by SEQ ID NO: 1 can distinct hepatocellular carcinoma.

BRIEF DESCRIPTION OF THE DRAWINGS

[0026] FIG. 1 shows a comparison between gels each stained with a solution for staining a phosphorylated protein after a protein sample extracted from a non-carcinoma site (a) and a protein sample extracted from a carcinoma site (b), which are obtained from 18 patients, have been developed by two-dimensional electrophoresis.

[0027] FIG. 2 is a view showing the whole amino acid sequence of tumor rejection antigen gp 96.

[0028] FIG. 3 includes charts each showing a MALDI-TOF/MS spectrum of a product obtained by digesting tumor rejection antigen gp96 with trypsin. (a) shows the results in positive ion mode measurement and (b) shows the results in negative ion mode measurement.

[0029] FIG. 4 includes charts each showing a MALDI-TOF/MS spectrum of a product obtained by digesting tumor rejection antigen gp96 with trypsin, and showing a comparison between the results in positive ion mode measurement (a) and the results in negative ion mode measurement (b) in a mass range of 2,050 Da to 2,800 Da.

DESCRIPTION OF REFERENCE NUMBERS

[0030] 1 spot of tumor rejection antigen gp96 of sample derived from non-carcinoma site

[0031] 2 spot of tumor rejection antigen gp96 of sample derived from carcinoma site

[0032] 41 peak derived from FQSSHHPT-DITSLDQYVER peptide of tumor rejection antigen gp96 measured in positive ion mode

[0033] 42 peak derived from FQSSHHPT-DITSLDQYVER peptide of tumor rejection antigen gp96 measured in negative ion mode

[0034] 43 peak derived from FQSSHHPT-DITSLDQYVER peptide of phosphorylated tumor rejection antigen gp96 measured in negative ion mode

BEST MODE FOR CARRYING OUT THIS INVENTION

[0035] Hereinafter, this invention is described in more detail.

[0036] The inventors of this invention have researched a protein whose phosphorylation is accelerated in hepatocellular carcinoma tissues compared with non-carcinoma cells. As a result, the inventors have found that the phosphorylation amount of a specified protein may be measured to distinguish hepatocellular carcinoma cells from non-carcinoma cells. Thus, this invention has been completed.

[0037] That is, this invention relates to a method of assessing hepatocellular carcinoma by measuring the variation in phosphorylation of tumor rejection antigen gp96 formed of the amino acid represented by SEQ ID NO: 1 in a biological sample obtained from a subject.

[0038] Specifically, this invention provides a method of measuring tumor rejection antigen gp96 formed of the amino acid represented by SEQ ID NO: 1 for its phosphorylation by a method selected from the group consisting of an enzyme immunoassay, a fluorescence-labeled antibody method, a western blot method, a radioimmunoassay, an immunoprecipitation method, electrophoresis, liquid chromatography, and mass spectrometry.

[0039] In this case, the biological sample, such as a biopsy sample, blood, plasma, serum, and urine, can be used in this invention.

[0040] Examples of the method of measuring such variation in protein phosphorylation as described above in such a biological sample include: a method using in combination two-dimensional electrophoresis for separating a protein from the biological sample, which is a combination of isoelectric point electrophoresis and SDS polyacrylamide gel electrophoresis, and a staining method for allowing a phosphorylated state of the separated protein to be visualized; a method involving separating the biological sample by multi-dimensional chromatography, which is a combination of various types of chromatography such as ion-exchange chromatography, reverse-phase chromatography, and gel filtration chromatography, and determining the phosphorylation of the separated protein by mass spectrometry; and a method using a specified antibody that recognizes a phosphorylated site of a protein.

[0041] Further, the specified antibody according to this invention is an antibody which recognizes a phosphorylated serine residue, a phosphorylated threonine residue, and a phosphorylated tyrosine residue. The protein phosphorylation in a sample may be detected by using those antibodies alone or in combination, and employing a known method such as an enzyme immunoassay (ELISA), a western blotting method, a radioimmunoassay, and an immunoprecipitation method.

EXAMPLES

[0042] This invention is described in detail by way of examples, but this invention is not limited by those examples.

Example 1

[0043] In Example 1 of this invention, a two-dimensional electrophoresis analysis of proteins extracted from carcinoma

cells and proteins extracted from non-carcinoma cells, which are derived from hepatocellular carcinoma patients, is described.

[0044] Carcinoma site tissues and non-carcinoma site tissues, which were obtained from tissues surgically excised from 18 hepatocellular carcinoma patients and were diagnosed pathologically, each were crushed in a cell lysis solution (30 mM Tris-Cl (pH 8.5), 7 M urea, 2 M thiourea, 4% (w/v) CHAPS, 0.5 mM EDTA, PMSF, Aprotinin, and Pepstatin) by using a glass homogenizer, followed by incubation at 37° C. for 1 hour. After the sample was centrifuged (13,000 rpm, 20 minutes), the supernatant was collected. The protein concentration in the supernatant was measured using a protein assay kit (manufactured by Bio-Rad Laboratories, Inc.) by a Bradford method. 25 µg of the protein extracted from a carcinoma site and 25 µg of the protein extracted from a non-carcinoma site, which had been sampled from each of the patients, were mixed to prepare a protein sample extracted from a carcinoma site (total: 450 µg) and a protein sample extracted from a non-carcinoma site (total: 450 µg). The protein samples extracted from a carcinoma site and the protein samples extracted from a non-carcinoma site were subjected to an isoelectric point electrophoresis at 71,500 Volt/hour by using an immobilized pH gradient gel (Immobililine DryStrip pH 3-10, 24 cm: GE Healthcare) (one-dimensional electrophoresis). The gel after being subjected to the one-dimensional electrophoresis was reduced-alkylated, a two-dimensional SDS electrophoresis was performed by using a 12.5% polyacrylamide gel (24 cm×20 cm). The gel subjected to the above-mentioned separation was stained with a solution for staining a phosphorylated protein (Pro-Q Diamond phosphoprotein gel stain: Invitrogen Corporation). The stained gel was detected for its protein spots with an image analyzer (Typhoon 9400: GE Healthcare UK Ltd).

[0045] A protein spot at which the staining with the solution for staining a phosphorylated protein varied more greatly in the carcinoma site compared with the non-carcinoma site was specified. The specified protein spot was cut out from the gel, and converted into a peptide by in-gel tryptic digestion. The in-gel digested peptide was measured with an ion spray mass spectrometer (ESI-MS, LCQ-Deca: Thermoelectron Corporation), and the protein at the spot was identified by a peptide mass fingerprint method (PMF method) using a Mascot software (MATRIX SCIENCE Ltd.).

[0046] The results revealed that the staining of the protein spot of the tumor rejection antigen gp96 with the solution for staining a phosphorylated protein varied more greatly in the carcinoma site compared with the non-carcinoma site.

[0047] FIG. 1 shows a comparison between gels each stained with the solution for staining a phosphorylated protein after the protein sample extracted from a carcinoma site and the protein sample extracted from a non-carcinoma site has been developed by two-dimensional electrophoresis. The reference numeral 1 in FIG. 1 denotes a spot of the tumor rejection antigen gp96 of a sample derived from the non-carcinoma site, and the reference numeral 2 denotes a spot of the tumor rejection antigen gp96 of a sample derived from the carcinoma site. With regard to the respective spots denoted as the reference numerals 1 and 2, the sample derived from the non-carcinoma site (1) and the sample derived from the carcinoma site (2) differ from each other in the staining with the solution for staining a phosphorylated protein. The spot denoted as the reference numeral 2 in FIG. 1 was cut out and subjected to in-gel tryptic digestion. After that, the protein was identified by the PMF method. As a result, as underlined in FIG. 2, a peptide having mass that corresponds to a partial peptide of the tumor rejection antigen gp96 was observed as a peptide obtained by subjecting the protein spot gel to tryptic digestion.

Example 2

[0048] In Example 2 of this invention, there is described the verification of the tumor rejection antigen gp96 for its phosphorylation by MALDI-TOF/MS measurement.

[0049] A product obtained by digesting the tumor rejection antigen gp96 with trypsin was dissolved in 10 µl of an aqueous solution containing 0.1% TFA and 50% methanol to obtain a sample solution. 1 µl of the sample solution was dropped onto a target plate for a mass spectrometer, and dried at room temperature. To the dried sample spot, dropped were 0.7 µl of a matrix solution (a solution obtained by dissolving α-cyano-4-hydroxycinnamic acid (α-CHCA) in a solution containing 0.1% trifluoroacetic acid (TFA), 70% methanol, and 4 mM mono ammonium phosphate so that the concentration would be a saturated concentration), followed by drying at room temperature. The target plate was measured with a time-of-flight mass spectrometer (MALDI-TOF/MS, Voyager DE STR: Applied Biosystems, Inc.) in a linear mode, and the ion polarity to be measured was measured in two ways, i.e., a positive ion mode and a negative ion mode. The mass in the spectrum was calibrated by an external standard method using a standard peptide.

[0050] FIG. 3 includes charts showing a comparison between the results in positive ion mode measurement and the results in negative ion mode measurement in a mass range of 699 Da to 3,001 Da. The negative ion mode can measure a mass spectrum of a phosphorylated peptide difficult to be measured in the positive ion mode.

[0051] FIG. 4 includes charts showing a comparison between mass spectra in a mass range of 2,050 Da to 2,800 Da. In FIG. 4, the reference numeral 41 denotes a peak derived from the FQSSHPTDITSLDQYVER peptide of the tumor rejection antigen gp96 measured in the positive ion mode. Further, the reference numeral 42 denotes a peak derived from the FQSSHPTDITSLDQYVER peptide of the tumor rejection antigen gp96 measured in the negative ion mode. Still further, 43 denotes a peak derived from the FQSSHPTDITSLDQYVER peptide of the phosphorylated tumor rejection antigen gp96 measured in the negative ion mode. As clear from FIG. 4, there is a peak observed only in the negative ion mode measurement (43 in FIG. 4) by a mass difference of +80 Da from a peak commonly observed in both of the positive ion mode measurement and the negative ion mode measurement (41 in FIGS. 4 and 42 in FIG. 4). The mass of the peak commonly observed in both of the positive ion mode measurement and the negative ion mode measurement (41 in FIGS. 4 and 42 in FIG. 4) coincides with the mass of the peptide of 512th to 530th residues (FQSSHPTDITSLDQYVER) in the tumor rejection antigen gp96, and it is conceivable that any one of a serine residue (S), a threonine residue (T), and a tyrosine residue (Y) in FQSSHPTDITSLDQYVER has been subjected to phosphorylation.

[0052] Accordingly, the measurement of the tumor rejection antigen gp96 for its phosphorylation is useful for diagnosis of hepatocellular carcinoma.

INDUSTRIAL APPLICABILITY

[0053] This invention can provide the hepatocellular carcinoma protein marker and the method of detecting hepatocellular carcinoma cells using the hepatocellular carcinoma protein marker.

[0054] Note that the application of this invention insists advantage thereof based on the priority of Japanese Patent Application No. 2007-162857 filed on 20 Jun. 2007, and the disclosure of the filed application is taken into the whole of this application.

 SEQUENCE LISTING

<160> NUMBER OF SEQ ID NOS: 1

<210> SEQ ID NO 1

<211> LENGTH: 803

<212> TYPE: PRT

<213> ORGANISM: homo sapiens

<400> SEQUENCE: 1

```

Met Arg Ala Leu Trp Val Leu Gly Leu Cys Cys Val Leu Leu Thr
1          5          10          15
Phe Gly Ser Val Arg Ala Asp Asp Glu Val Asp Val Asp Gly Thr
20         25         30
Val Glu Glu Asp Leu Gly Lys Ser Arg Glu Gly Ser Arg Thr Asp
35         40         45
Asp Glu Val Val Gln Arg Glu Glu Glu Ala Ile Gln Leu Asp Gly
50         55         60
Leu Asn Ala Ser Gln Ile Arg Glu Leu Arg Glu Lys Ser Glu Lys
65         70         75
Phe Ala Phe Gln Ala Glu Val Asn Arg Met Met Lys Leu Ile Ile
80         85         90
Asn Ser Leu Tyr Lys Asn Lys Glu Ile Phe Leu Arg Glu Leu Ile
95         100        105
Ser Asn Ala Ser Asp Ala Leu Asp Lys Ile Arg Leu Ile Ser Leu
110        115        120
Thr Asp Glu Asn Ala Leu Ser Gly Asn Glu Glu Leu Thr Val Lys
125        130        135
Ile Lys Cys Asp Lys Glu Lys Asn Leu Leu His Val Thr Asp Thr
140        145        150
Gly Val Gly Met Thr Arg Glu Glu Leu Val Lys Asn Leu Gly Thr
155        160        165
Ile Ala Lys Ser Gly Thr Ser Glu Phe Leu Asn Lys Met Thr Glu
170        175        180
Ala Gln Glu Asp Gly Gln Ser Thr Ser Glu Leu Ile Gly Gln Phe
185        190        195
Gly Val Gly Phe Tyr Ser Ala Phe Leu Val Ala Asp Lys Val Ile
200        205        210
Val Thr Ser Lys His Asn Asn Asp Thr Gln His Ile Trp Glu Ser
215        220        225
Asp Ser Asn Glu Phe Ser Val Ile Ala Asp Pro Arg Gly Asn Thr
230        235        240
Leu Gly Arg Gly Thr Thr Ile Thr Leu Val Leu Lys Glu Glu Ala
245        250        255
Ser Asp Tyr Leu Glu Leu Asp Thr Ile Lys Asn Leu Val Lys Lys
260        265        270
Tyr Ser Gln Phe Ile Asn Phe Pro Ile Tyr Val Trp Ser Ser Lys
275        280        285
Thr Glu Thr Val Glu Glu Pro Met Glu Glu Glu Glu Ala Ala Lys
290        295        300
Glu Glu Lys Glu Glu Ser Asp Asp Glu Ala Ala Val Glu Glu Glu
305        310        315
Glu Glu Glu Lys Lys Pro Lys Thr Lys Lys Val Glu Lys Thr Val

```


-continued

Asp	Asp	Lys	Thr	Val	Leu	Asp	Leu	Ala	Val	Val	Leu	Phe	Glu	Thr
				710					715					720
Ala	Thr	Leu	Arg	Ser	Gly	Tyr	Leu	Leu	Pro	Asp	Thr	Lys	Ala	Tyr
				725					730					735
Gly	Asp	Arg	Ile	Glu	Arg	Met	Leu	Arg	Leu	Ser	Leu	Asn	Ile	Asp
				740					745					750
Pro	Asp	Ala	Lys	Val	Glu	Glu	Glu	Pro	Glu	Glu	Glu	Pro	Glu	Glu
				755					760					765
Thr	Ala	Glu	Asp	Thr	Thr	Glu	Asp	Thr	Glu	Gln	Asp	Glu	Asp	Glu
				770					775					780
Glu	Met	Asp	Val	Gly	Thr	Asp	Glu	Glu	Glu	Glu	Thr	Ala	Lys	Glu
				785					790					795
Ser	Thr	Ala	Glu	Lys	Asp	Glu	Leu							
				800										

1. A hepatocellular carcinoma protein marker, comprising tumor rejection antigen gp96 formed of an amino acid represented by SEQ ID NO: 1, wherein the protein marker is phosphorylated.

2. A method of detecting hepatocellular carcinoma, comprising using the hepatocellular carcinoma protein marker according to claim 1.

3. A method of detecting hepatocellular carcinoma according to claim 2, wherein said using the protein marker includes extracting from a surgically sampled biological sample.

4. A method of detecting hepatocellular carcinoma according to claim 3, wherein said using the protein marker further comprises preparing the biological sample comprising any one kind of a biopsy sample, blood, plasma, serum, and urine.

5. A method of detecting hepatocellular carcinoma according to claim 2, wherein said using the protein marker includes verifying phosphorylation of the protein marker.

6. A method of detecting hepatocellular carcinoma according to claim 5, wherein said using the protein marker further includes extracting from a surgically sampled biological sample.

7. A method of detecting hepatocellular carcinoma according to claim 6, wherein said using the protein marker further comprises preparing the biological sample comprising any one kind of a biopsy sample, blood, plasma, serum, and urine.

8. A method of detecting hepatocellular carcinoma according to claim 5, wherein the verifying is performed based on measurement of any one of a serine residue, a threonine residue, and a tyrosine residue of the protein marker for its phosphorylation.

9. A method of detecting hepatocellular carcinoma according to claim 8, wherein said using the protein marker comprises extracting the protein marker from a surgically sampled biological sample.

10. A method of detecting hepatocellular carcinoma according to claim 9, wherein said using the protein marker further comprises preparing the biological sample comprising any one kind of a biopsy sample, blood, plasma, serum, and urine.

11. A method of detecting hepatocellular carcinoma, comprising:

measuring phosphorylation of tumor rejection antigen gp96 formed of an amino acid represented by SEQ ID NO: 1; and

judging the measurements as positive based on a comparison with a normal value.

12. A method of detecting hepatocellular carcinoma, comprising measuring phosphorylation of tumor rejection antigen gp96 as the hepatocellular carcinoma protein marker according to claim 1 in a biological sample, wherein the measuring is performed by a method selected from the group consisting of an enzyme immunoassay, a fluorescence-labeled antibody method, a western blot method, a radioimmunoassay, an immunoprecipitation method, electrophoresis, liquid chromatography, and mass spectrometry.

13. A method of detecting hepatocellular carcinoma according to claim 12, wherein said measuring comprises:

extracting a protein from a surgically sampled biological sample;

subjecting the protein to a multicycle of electrophoresis with different dimensions;

fixing and staining the protein on a solid carrier; and

comparing an increase or decrease in the tumor rejection antigen gp96 in a protein spot.

14. A method of detecting hepatocellular carcinoma according to claim 13, wherein said measuring further comprises preparing the biological sample comprising any one kind of a biopsy sample, blood, plasma, serum, and urine.

15. A method of detecting hepatocellular carcinoma according to claim 12, wherein said measuring comprises judging a presence or absence of hepatocellular carcinoma based on a comparison of the results obtained from measuring phosphorylation of a digestion product of the tumor rejection antigen gp96 obtained from a surgically sampled biological sample in positive ion mode measurement and in negative ion mode measurement by using a mass spectrometer.

16. A method of detecting hepatocellular carcinoma according to claim 15, wherein said measuring further comprises preparing the biological sample comprising any one kind of a biopsy sample, blood, plasma, serum, and urine.

17. A method of detecting hepatocellular carcinoma according to claim 12, wherein said measuring phosphorylation of the hepatocellular carcinoma protein marker is per-

formed with respect to any one of a serine residue, a threonine residue, and a tyrosine residue of the protein marker.

18. A method of detecting hepatocellular carcinoma according to claim **17**, wherein said measuring comprises:

extracting a protein from a surgically sampled biological sample;

subjecting the protein to a multicycle of electrophoresis with different dimensions;

fixing and staining the protein on a solid carrier; and

comparing an increase or decrease in the tumor rejection antigen gp96 in a protein spot.

19. (canceled)

20. A method of detecting hepatocellular carcinoma according to claim **17**, wherein said measuring comprises

judging a presence or absence of hepatocellular carcinoma based on a comparison of the results obtained from measuring phosphorylation of a digestion product of the tumor rejection antigen gp96 obtained from a surgically sampled biological sample in positive ion mode measurement and in negative ion mode measurement by using a mass spectrometer.

21. (canceled)

22. A method of detecting hepatocellular carcinoma according to claim **17**, wherein said measuring further comprises using an antibody that recognizes a phosphorylated site of the tumor rejection antigen gp96.

23. (canceled)

* * * * *

专利名称(译)	肝细胞癌蛋白质标记物和使用其的肝细胞癌检测方法		
公开(公告)号	US20100248256A1	公开(公告)日	2010-09-30
申请号	US12/452216	申请日	2008-06-16
[标]申请(专利权)人(译)	皆川孝 宫崎KENJI 田卧勇太YO KAMIJO KENICHI 金子SHUICHI		
申请(专利权)人(译)	皆川孝 宫崎KENJI 田卧勇太YO KAMIJO KENICHI 金子SHUICHI		
当前申请(专利权)人(译)	皆川孝 宫崎KENJI 田卧勇太YO KAMIJO KENICHI 金子SHUICHI		
[标]发明人	MINAGAWA HIROTAKA MIYAZAKI KENJI TABUSE YO KAMIJO KENICHI KANEKO SHUICHI		
发明人	MINAGAWA, HIROTAKA MIYAZAKI, KENJI TABUSE, YO KAMIJO, KENICHI KANEKO, SHUICHI		
IPC分类号	G01N33/53 C07K14/435		
CPC分类号	G01N33/57438 C07K14/4748		
优先权	2007162857 2007-06-20 JP		
其他公开文献	US8207301		
外部链接	Espacenet USPTO		

摘要(译)

提供了一种与非肝细胞癌细胞相比，通过在肝细胞癌细胞中使用具有不同磷酸化状态的蛋白质来评估肝细胞癌的方法。用于检测由该蛋白质形成的肝细胞癌的肝细胞癌蛋白质标记物。用于检测肝细胞癌的肝细胞癌蛋白质标记物包括由SEQ ID NO：1代表的氨基酸形成的肿瘤排斥抗原gp96，并测量其磷酸化状态以检测肝细胞癌的存在或不存在。

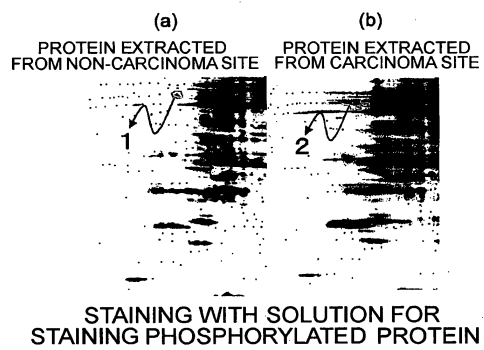


FIG. 1