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Three Items Of Gastric Function

PGI / PGII / G-17

Gastric cancer (Stomach cancer, gastric cancer) is a malignant tumor derived from gastric mucosal epithelium, accounting for the third of all malignant tumors, the first place of digestive tract malignant tumors, and 95% of gastric malignant tumors.



Clinical Significance Of Serological Screening Of Gastric Function

Background

Gastric cancer (Stomach cancer, gastric cancer) is a malignant tumor derived from gastric mucosal epithelium, accounting for the third of all malignant tumors, the first place of digestive tract malignant tumors, and 95% of gastric malignant tumors.

According to the Global Cancer Statistics Report (GLOBOCAN, 2020) released by the WHO, gastric cancer is still the fifth most common cancer and the fourth leading cause of cancer death in the world, and the proportion of deaths / cases is about 0.7 (0.769 / 1.089 million).

According to the WHO 's International Agency for Research on Cancer, if the risk factors of gastric cancer cannot be effectively controlled and continue to develop according to the current trend, the global burden of gastric cancer will be 70% higher than it was in 2020 by 2040, therefore there is still a need to promote early screening and early diagnosis of gastric cancer.

According to the guidelines for the diagnosis and treatment of gastric cancer published by the European Society for Medical Oncology (ESMO): the incidence of gastric cancer is twice as high in men as in women. Risk factors vary by anatomical subsite of disease; non-cardia gastric cancer which is more common in East Asia and Latin America, represents 80% of gastric tumors globally and has been associated with Helicobacter pylori (H. pylori) infection, alcohol use, high salt intake and low consumption.

Evolution History Of Gastric Cancer



Pepsinogen (PG) is an inactive precursor of pepsin and it is synthesized by gastric enzyme cells of the gastric acid glands. It contains 375 amino acids and the average relative molecular weight is 42,000 Da. Pepsinogen can be divided into two subgroups.

Pepsinogen I (PGI): Pepsinogen I is secreted mainly by the chief cells and mucus cells of the fundic glands, it is an indicator of the function (secrete gastric acid) of the fundic gland cells.

Pepsinogen II (PGII): Pepsinogen II is secreted mainly by the gastric cardia glands, the pyloric glands of the gastric antrum and the proximal duodenal gland cells. Pepsinogen II is distributed throughout the stomach and is therefore a biomarker of the overall condition of the gastric mucosa. Studies have shown that the change of PGII value is closely related to gastritis, and the increase of PGII represents inflammation.

Gastrin-17 (G-17): G-17 is a hormone secreted by G cells in the gastric antrum. It is a sensitive indicator reflecting the secretory function of the gastric antrum. It is used to screen and diagnose atrophic gastritis and gastric cancer. The G17 value of patients with early gastric cancer is abnormally elevated or decreased.

Products Information

PGI / PGII / G-17

Methodology:time-resolved immunofluorescence assay Packing specification: 25 tests/box

Products Advantage

①Easy to operate, just one step

(2) It has high sensitivity, wide linear range and good repeatability. ③The sample size is less than 80 μL.

Matching Instruments

CJ-G200/CJ-G800

Application Scene

All levels of hospital laboratory, outpatient and emergency, digestive medicine, physical examination, physical examination center, etc.

Check gastric disease, distinguish gastric cancer, all you need is one tube of blood!