

A potential therapeutic target for colon cancer

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A research team from China investigated the association between peroxisome proliferator-activated receptor- γ (PPAR- γ) gene polymorphism 34 C>G and colorectal cancer (CRC) through a meta-analysis. They found PPAR- γ 34 C>G is associated with colon cancer risk, but not associated with CRC and rectal cancer risk.

Colorectal cancer (CRC) is one of the major causes of cancer death in the developed countries. Accumulated evidences indicate that lipid metabolism, especially the one in the arachidonic acid (AA)-pathway, appears to play a critical role in the development of CRC. The peroxisome proliferator-activated receptor- γ (PPAR- γ) gene, one of the most important components of the AA-pathway, has been verified to express in a variety of tumor cells. Many studies have been performed about the association between the polymorphism 34 C>G of PPAR- γ gene and CRC, but got conflicting results.

A research article to be published on May 7, 2010 in the *World Journal of Gastroenterology* addresses this question. A research team led by Professor Li-Cheng Dai, confirmed the former data of the association between PPAR- γ gene 34 C>G and CRC in the meta-analysis.

In this report, the association between PPAR- γ gene [polymorphism](#) 34 C>G and colon cancer risk was observed, and the G allele decreased the colon cancer risk, which is meaningful to early diagnosis, prevention and individual-based treatment of colon cancer. Furthermore, 34 C>G of PPAR- γ gene might be a potential therapeutic target for [colon cancer](#).

More information: Lu YL, Li GL, Huang HL, Zhong J, Dai LC. Peroxisome proliferator-activated receptor- γ 34C>G polymorphism and colorectal cancer risk: A meta-analysis. World J Gastroenterol 2010; 16(17): 2170-2175 www.wjgnet.com/1007-9327/full/v16/i17/2170.htm

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