REDUCED EXPRESSION OF SMOC1 IS ASSOCIATED WITH PROGRESSION OF COLORECTAL TRADITIONAL SERRATED ADENOMAS AND CONVENTIONAL ADENOMAS

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Immunohistochemical analysis of SMOC1 expression in 199 colorectal lesions showed significant downregulation in traditional serrated adenomas and high-grade lesions compared to normal colon, hyperplastic polyps, and sessile serrated lesions, suggesting potential as a diagnostic and risk stratification biomarker.

KEY POINTS

- SMOC1 expression was significantly downregulated in traditional serrated adenomas (mean IHC score 7.3 training, 3.1 validation), high-grade adenomas (11.7), high-grade dysplasia (12.1), and early invasive cancer (10.9) compared to normal colon (24.2), hyperplastic polyps (21.6 training, 17.7 validation), and sessile serrated lesions (24.8 training, 22.8 validation), with p less than 0.05.
- Among traditional serrated adenomas containing both flat and protruding components, SMOC1 expression was significantly lower in protruding components in both training (p less than 0.001) and validation (p less than 0.05) sets, suggesting reduced expression is associated with lesion progression.
- The study used immunohistochemistry on specimens from 173 patients, with an IHC scoring system (maximum 30) based on staining intensity (0-3) multiplied by proportion of positive cells (0-10), evaluated by blinded gastrointestinal pathologists.
- The authors conclude that SMOC1 may serve as a diagnostic marker for serrated lesions and a predictive marker for colorectal tumors at high risk of developing into cancer.

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