

VISUALIZATION OF DNA DAMAGE RESPONSE AND ITS ASSOCIATION WITH CLINICOPATHOLOGICAL FEATURES IN ULCERATIVE COLITIS

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Immunofluorescence study of 53BP1 nuclear foci in ulcerative colitis shows DNA damage response correlates with disease activity, and co-localization with Ki67 may distinguish dysplasia from non-dysplastic tissue.

KEY POINTS

- Abnormal 53BP1 expression pattern was significantly increased in UC compared to controls (43.99% vs 10.80%, $p=0.026$) and positively correlated with c-reactive protein, Mayo endoscopic score, Mayo score, and histological severity.
- 53BP1 expression alone did not increase between UC and dysplasia, but co-localization of 53BP1 and Ki67 showed stepwise increase during progression from UC to dysplasia to colitic cancer.
- Significant difference in 53BP1 and Ki67 co-localization was observed between non-dysplastic epithelium versus dysplasia/cancer ($p=0.0327$), suggesting potential utility in distinguishing dysplasia.
- Study used immunofluorescence staining on 69 colorectal tissue specimens (18 controls, 51 UC) with abnormal pattern defined as 3 or more nuclear foci and/or foci larger than $1\mu\text{m}$ in diameter.
- Findings suggest DNA damage response associates with disease activity in UC and may inform surveillance strategies for dysplasia detection in this patient population.

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