

population. Oral Carcinogenesis is a multi stage process involving changes such as initiation, promotion and progression of the potential cells. Habit intervention before the stages of irreversible cell damage would prevent the potential cells from progressing into a malignant neoplasm.

Prediction of prognosis of potentially malignant oral lesions is mainly based on histopathological features. Although histopathological grading of dysplasia has a positive correlation to the risk of malignant transformation of potentially malignant lesions, early recognition of those lesions that would eventually undergo malignant transformation has still been proven to be difficult. Similarly, well-differentiated carcinomas are generally known to have a better prognosis than poorly or undifferentiated carcinomas. Further, the Clearance of tumour margins, depth of invasion, vascular and nerve involvement, lymph node metastasis and pericapsular spread from the lymph nodes bear tremendous importance in prognostic prediction. Such information would be essential for the clinician for planning appropriate treatment and prevent progression of disease at secondary and tertiary levels.

SY12-02

KLK6/KLK7/KLK10 Genes of Oral Squamous Cell Carcinoma

Tien-Yu Shieh

Kaohsiung Medical University, Taiwan

Objectives: According to Health Statistics of Department of Health in 2007, the mortality of oral cancer in Taiwan has ranked sixth cancer in the entire population.

Our aim is to investigate the association between KLK6/KLK7/KLK10 expressions and oral squamous cell carcinoma (OSCC).

Methods: Between October, 2007 and April, 2009, oral precancerous and cancerous patients were recruited from the Department of Oral and Maxillofacial Surgery and Pathology, Kaohsiung Medical University Hospital, Taiwan. Health controls were recruited from OSCC survey in a southern Taiwan community. After getting the inform consent, 10ml peripheral blood were collected for plasma and DNA extraction. Protein levels were determined using ELISA. JMP statistical software was used to analyze the association.

Results: Sixty-one oral precancer patients, 67 OSCC patients and 30 health controls were recruited in the present study. Table 2 was the demographic data of OSCC, OPL, and health control participants. The mean age in OSCC, OPL, and health control were 52.53, 50.32, 48.43 years, respectively. In these data, all participants were all males, and they had habits of cigarette smoking, betel quid chewing, and alcohol drinking. Protein level data are presented in table 3. KLK6 and 7 protein levels in oral diseases had been trending upper than in health control. KLK6 protein concentration was significantly different between OSCC, oral precancer, and control ($p=0.0178$). We used median in control group protein

concentration be a cut point and separate protein level be two groups. Logistic regression analysis showed that the risk of KLK10 higher than 8.25 ng/ml was 2.53 (95 %CI, 1.04-6.23) for OSCC development from health control. Furthermore, there was a significant correlation between KLK6 and KLK7 protein expression level and the clinical stage of OSCC ($p = 0.048$, $p = 0.0294$, respectively).

Conclusion: We suggest that KLK6, 7, and 10 protein level are associated with an increased risk of the occurrence of oral cancer. Moreover, we observed KLK6 and KLK7 protein level may associated with oral cancer stage. However, further studies are required to clarify the association of these genes with OSCC in other populations.

SY12-03

Practical Technique of Screening for Oral Cancer

Liang-Jiunn Hahn

National Taiwan University School of Dentistry

The author will present a practical and correct technique of screening for oral cancer. The traditional and common method of screening for oral cancer in Taiwan is as follows:

The examiner and the person who is examined sit face to face on 2 chairs, and the examiner use only 1 or 2 disposable tongue depressors to examine the limited "oral mucosa" of that person. Such a method is prone to cause false negative results, so we had better abandon such practice.

The method used by the author is following:

Let the person who undergoes examination takes a supine position on a special flexible examination chair, the examiner sit at 7-11 o'clock position of his head, and examine his oral mucosa by inspection and palpation, using 2 mouth mirrors in definite order of the sites examined. By such technique, the screening of oral cancer can be performed efficiently and correctly, avoiding to cause false negative results, which is the most important concern in screening for oral cancer.

SY12-04

How to Improve the Efficiency of Oral Cancer Screening-the Experience from the Special Clinic for Betel Quid Chewing Related Diseases

Hsin-Ming Chen

School of Dentistry, National Taiwan University

Department of Dentistry, Division of Oral and

Maxillofacial Surgery, National Taiwan University Hospital

Objective: Oral cancer is the sixth leading cancer in Taiwan, which makes it as one of the important public issues in this country. For the best strategy to increase the five-year survival rate of oral cancer being early diagnosis and treatment, therefore, how to improve the