AVALIATION OF PROFILE LIPIDIC AND GLUCOSE LEVELS IN PATIENTS WITH CUTANEOUS MELANOMA

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Introduction: Cutaneous Melanoma (CM) is a skin cancer that originates in melanocytes, pigment-producing cells on skin with high possibility at metastasis. Patient metabolism with cancer changes, affecting all metabolic pathways. In metabolism carbohydrates there is excessive glucose consumption by the tumor. Moreover increased lipolysis associated with reduced lipogenesis and increased turnover of glycerol, free fatty acids and triglycerides are metabolic changes induced by tumors developed. There are no studies showing the fundamental importance profiles lipid and glucose in CM patients. Then, our aim study was evaluated the glucose, triglycerides, low density lipoprotein, high density lipoprotein and total cholesterol in this patients. Methods: This study was submitted to the Ethics Committee Federal University Southern Frontier and approved under the following opinion: 822,782. The sample consisted 23 patients with MC and 37 patients as control group. The confidence interval was 95%, with p-value <0.05. Experimental protocol was performed according to established protocols and automated equipment. Results: The analyzes show that total cholesterol did not change between the groups (CM group 206.7±8.594 n=23 and control group 208.8±7.890 n=37). However, in relation to triglycerides can observed a significant increase in CM patients (150.6±10.10 mg/dL n=33) when compared to control patients (124.0±10.39 mg/dL n=23). The glucose leve was decreased in patients with CM (78.63±1.292 mg/dL n=33) when compared with control group (88.04 ± 4.201 mg/dL n=23). Other results did not show significant difference between the groups. Conclusions: These results show patients with MC even after surgical removal tumor still had metabolic changes. These changes may be result from metabolic stress caused by therapy and similarly caused by inflammatory response. Besides, the inflammatory response increases the production of pro-inflammatory cytokines responsible for metabolic disorders, including hyperglycemia, hypertriglyceridemia and decreased albumin synthesis.

Key words: Cancer; Profile Glucose, Profile Lipid.

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