

votinje su žrtvovane 1., 2., 3. i 4. tjedna nakon aplikacije ispitivanoga sredstva. Histološki pripravci eksplantiranih tumora bojeni su hematoksilin-eozinom te imunohistokemijski s anti-CD34 protutijelima radi procjene tumorske neoangiogeneze. U usporedbi s PO skupinom, tumorski rast i angiogeneza bili su sniženi u 1,25-D3 i NAVS skupinama. NAVS vjerojatno smanjuje rast OPCC-a inhibicijom vaskularne proliferacije potrebne za tumorski rast.

The Effect of Nonaromatic Naphthalene on Mice Oral Planocellular Carcinoma - a Pilot Study

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Summary

Nonaromatic naphthalene (NAVS) is a specific fraction of Croatian oil, extremely rich in steranes from which the aromatic system is removed. Steranes are attributed with bioactivity similar to steroid hormones, modulators of tumour growth. Encouraged by the results of earlier *in vitro* and *in vivo* studies on the inhibitory effect of NAVS on the growth of planocellular carcinoma, we carried out a study on its effect on oral planocellular carcinoma (OPCC) in mice.

Aims: 1) To test the validity of the simple experimental model OPCC, 2) to test possible antiproliferative effect of NAVS on the above model by monitoring tumour growth, 3) to test the antineoangiogenic effect of NAVS to explain the possible antiproliferative effect, and to estimate the possibility of crisis reactivity of anti-human immunohistochemical markers with mice tissue. A suspension of 100 µl s 10⁵ SCC VII cell was inoculated intraorally under the buccal mucous membrane in 48 syngeneic C3H mice. Seven days after inoculation the animals were divided in six equal groups and the mice, depending on the group, were intratumorously injected with 100 µl of the following substances: paraf-

fin oil (PO) as a negative control, NAVS (in one group 7 days, and in the second group 14 days, after inoculation of the tumour), 1.25 dihydroxyergotamine (1.25-D3) as a positive control, and a combination of NAVS with 1.25-D3 and PO with 1.25-D3. Tumour growth was monitored weekly by measuring with callipers. The animals were sacrificed 1, 2, 3 and 4 week after application of the tested substance. Histological specimens of explanted tumours were stained with hematoxylin-eosine, and immunohistochemically with anti-CD34 antibodies for estimation of tumour neoangiogenesis. Compared with the PO group, tumour growth and angiogenesis were decreased in the 1.25-D3 and NAVS groups. NAVS probably reduced growth by OPCC inhibition of vascular proliferation, needed for tumour growth.

Mukoepidermoidni karcinom male žlijezde slinovnice

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Sažetak

Sluznica usne šupljine prekrivena višeslojnim pločastim epitelom izvorište je benignih i malignih promjena, od jednostavnog fibroma pa do karcinoma usne šupljine. Doktor stomatologije mogu, s obzirom na dostupnost patoloških promjena rutinskom kliničkom pregledu, bez dodatnih dijagnostičkih metoda postaviti dijagnozu i uputiti bolesnika oralnom ili maksilofacijalnom kirurgu. U ranom otkrivanju i liječenju različitih tvorbi najvažnije je bolesnika uputiti pravodobno, kako bi se i manjim kirurškim zahvatima mogao izliječiti.

Na sluznici se manifestiraju i patološki procesi dubljih slojeva. U malim žlijezdama slinovnicama svih dijelova usne šupljine mogu se razviti mukozne ciste, benigni i maligni tumori. Tumori žlijezda slinovnica čine oko 3% svih tumora u tijelu, dakle razmjerno su rijetki. No važno je znati da 10 do 20% svih navedenih tumora nastaje u malim žlijezdama, najčešće na nepcu. Jednako tako važan je podatak da razmjerna čestoća malignih tumora raste kako se veličina žlijezda u kojima se pojavljuje smanjuje.