

stage IV disease showed negative p53 expression (Figure 7). There was no statistically significant difference in relationship between p53 protein expression with tumor grade and stage as shown in (Table 1).

P53 immunostaining in at least 10% of the cell nuclei of tumor cells was regarded as p53 overexpression.

The extent of staining of p53 expression in gastric carcinoma in the present study (according to Sophia K. 1999⁽⁸⁾) and Roviello F.1999⁽⁹⁾ was done at x40 objective as follows: (Table 2)

A) 22(55%) of negative cases were within score 0.

B) 7(17.5%) of positive cases were within score 1.

C) 5(12.5%) of positive cases were within score 2.

D) 2(5%) of positive cases were within score 3.

E) 4(10%) of positive cases were within score 4.

The pattern of positive p53 staining was diffuse in 6 (33%), regional in 8(45%), and focal in 4(22%). (Table 2)

The intensity of p53 staining was weak in 6(33%) (Figure8), moderate in 7 (39%), and strong in 5 (28%) (Figure 9) of gastric carcinoma cases (Table 2).

Table 1: Distribution of p53 expression in gastric carcinoma cases in relation to different studied parameters.

p53		Age		Gender		Site		Histological type		Histological grade		Pathological stage		
		<50	≥50	M	F	Antrum	Cardia	Diffuse	Intestinal	Moderate	Poor	I	III	IV
	positive	6	12	13	5	15	3	4	14	12	6	0	17	1
	negative	6	16	15	7	17	5	6	16	13	9	1	20	1
	total	12	28	28	12	32	8	10	30	25	15	1	37	2
	P-value	0.701		0.812		0.709		0.471		0.870		0.653		