percentage, a semi-quantitative evaluation of Glasgow Microenvironment Score\(^2\) was performed. Also, Glasgow Prognostic Score,\(^2\) Shahram Teimourian\(^2\) 4, H.R. Caires\(\text{[cited 24.01.17].}\) [cited 24.01.17].

Results: Diabetic patients presented a significant higher glycaemia than the control patients (190.1 ± 13.6 mg/dL vs 98.2 ± 3.6 mg/dL, p < 0.001, respectively). Decreased survival rates were observed in diabetic patients (611.5 vs 916.0, p = ns). Tumours exhibited increased fibrosis relatively to the adjacent mucosa in both groups and diabetic patients (N: 9.362 ± 1.337; T: 12.29 ± 1.407) presented higher fibrosis levels than the non-diabetic patients (N: 7.165 ± 1.017; T: 10.97 ± 1.076).

Conclusion: Expected results: Identifying the distinct features that characterize GC of DM2 patients compared to non-diabetic patients (namely fibrosis, angiogenesis, inflammation, and oxidative stress biomarkers) will enable to study this subset of GC patients and unravel key mechanisms behind the relationship between DM2 and GC.

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PS229

Circulating EVs for AML minimal residual disease biomarkers detection

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A size-exclusion chromatography (SEC) method was optimized to separate EVs isolated from AML patients' blood into fractions of EVs with decreasing size. EVs with decreasing size were successfully isolated between SEC fractions 3 to 6, with a size ranging from 300 nm to 30 nm, respectively. Fraction 7 presented the smaller EVs, although mixed with some plasmatic protein contaminants. The expression of EV markers such as CD63, HSP70 or Syntenin-1 was confirmed between SEC fractions 3 to 7. The expression of leukemia-specific markers is currently being studied in the EVs isolated from the paired AML blood samples.

Conclusion: The presented EV-based liquid biopsy proposed method for AML monitoring could unravel biomarkers for diagnostic and prognostic purposes in AML patients.

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PS232

The association of Generalized Epilepsy with Febrile Seizures plus (GEFS+) with FEB1 gene: A new insight to the etiology of GEFS+

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