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and pathological

characteristics of

gastrointestinal stromal tumor

(GIST) in China]. To analyze

the clinical and pathological

characteristics of

gastrointestinal stromal tumor

(GIST) in China. Medical records and pathology specimen of the GIST patients treated from January 1999 to December 2002 at 22 centers of GIST in China were analyzed. There were 77 cases of GIST treated. The age of the patients ranged from 4 to 81 years with a median age of 54.0 years. The sex ratio was 1:1.1. The most common site was stomach (70.2%), and the tumors of small intestine

accounted for 18.1% (15/80).
Larger tumors occupied more
than half of the cases.

Tumors larger than 2 cm
accounted for more than 50%
of the total cases. The

pathological subtypes of
GIST were as follows:

spindle cell types 66.7%

(53/80), epithelioid cell types

14.6% (12/80), mixed types

11.3% (9/80) and round cell

types 5.0% (4/80). Metastatic

lymph node and liver

invasion occurred in 12.3%

(10/80) of the patients, and angioinvasion was identified in 51.2% (42/80). Lymph node metastasis was the most common site of distant metastasis. Microscopically positive rates of CD117, CD34 and SMA were 86.2%, 86.2% and 33.2%, respectively. Ki-67 index of the GIST patients ranged from 0.5% to 90.8%, with a median of 11.5%. The average clinical course was 35.8 months, and the median

was 30.0 months. There were 3 (3.8%) patients died of GIST within a year. Tumor size, mitotic count, lymph node and liver metastasis, infiltration and recurrence were independent prognostic factors. GIST is a mesenchymal neoplasm which belongs to KIT-positive gastrointestinal stromal tumor (GIST). Tumor size, mitotic count, lymph node and liver metastasis, infiltration and

recurrence were independent
prognostic factors. Actions
Yes, Iowa's Democratic
caucuses were chaotic. But is
it

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language. Subtitles search:
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language: Simulating a
growing epidemic of hepatitis
A. In a previous study (J. A.
Criscitiello and R. W. C.
Dorling, 2001), we developed
a stochastic model of the
transmission of hepatitis A in
a defined population. In this
paper we consider the issue
of how the simulated model
should be applied to an
epidemic of hepatitis A. In

the initial phases of an epidemic, several questions arise concerning the significance of stochastic variation, for example: when should a simulation be run to estimate the rate of spread of the disease? Is a particular value of r such that the final proportion of the population infected by the epidemic is almost surely close to r significantly greater than $r=1/2$, where $1/2$ is the final proportion of the population

infected by a classic
deterministic
epidemic? DNA: it is more
than a genetic code. It is the
symbol of life and of
evolution of life. It transmits
the information about
heredity from one generation
to another. We always look at
DNA as a sequence of A, T,
C and G but we must
remember that the most
important one of these four
bases is C. This is because
90% of the nucleotides are C

and it is this base that
determines the protein
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