

Letters to the Editor

## Correspondence re: Giovannucci *et al.*, A Prospective Study of Plasma Insulin-like Growth Factor-1 and Binding Protein-3 and Risk of Colorectal Neoplasia in Women. *Cancer Epidemiol. Biomark. Prev.*, 9: 345–349, 2000

Letter

**Rudolf Kaaks,<sup>1</sup> Sabina Rinaldi, Annie Lukanova, Arslan Akhmedkhanov, Anne Zeleniuch-Jacquotte, and Paolo Toniolo**

International Agency for Research on Cancer, 69372 Lyon, Cedex 08, France [R. K., S. R., A. L.], and Department of Obstetrics and Gynecology [A. A., P. T.] and Department of Environmental Medicine [A. Z.-J.], New York University, New York, New York 10016

Giovannucci *et al.* showed an increased risk of colorectal cancer in women with elevated prediagnostic blood levels of IGF-I,<sup>2</sup> but only when an adjustment was made for levels of IGFBP-3, IGF's principal plasmatic binding protein. In other studies, by the same Harvard group, adjustment for IGFBP-3 also strengthened the association of IGF-I risk of colorectum and prostate cancer in men (1, 2). In univariate analyses, cancer risk was either unassociated or mildly reduced at elevated levels of IGFBP-3, but multivariate models systematically showed a significant inverse association of risk with IGFBP-3 adjusted for IGF-I. By contrast, in a different series of prospective studies, we systematically observed increases in risk of cancers of the colorectum<sup>3</sup> (3) and prostate (4) in subjects with elevated IGFBP-3, and adjustment for IGFBP-3 reduced or even abolished the associations of risk with IGF-I levels.

We speculated that these discrepancies might be related to differences in the specificity of IGFBP-3 assays. In the Harvard studies, IGFBP-3 was measured by an ELISA method from Diagnostic Systems Laboratories (Webster, TX). In our studies, an IRMA from Immunotech (Marseilles, France) was used<sup>2</sup> (3, 4). IGFBP-3 in blood and tissues undergoes proteolytic cleavage by specific enzymes. We hypothesized that subjects at increased cancer risk might have elevated levels of IGFBP-3, intact and proteolytically cleaved forms combined, and our

Immunotech assays would measure the sum of these. However, subjects at increased cancer risk might have reduced levels of intact (uncleaved) IGFBP-3, and the DSL-ELISA assay would be more specific for intact IGFBP-3.

To test this hypothesis, we remeasured IGFBP-3 by the DSL-ELISA method in our prospective study on colorectal cancer (3). IGF-I had been measured by an assay from Immunotech, which uses acid-ethanol to precipitate the IGFs. IGFBP-3 levels for cases and controls were  $3019.8 \pm 587.6$  and  $2921.7 \pm 575.3$  ng/ml (mean  $\pm$  SD), respectively, for IRMA-Immunotech and  $4074.3 \pm 938.6$  and  $3951.7 \pm 778.8$  ng/ml (mean  $\pm$  SD), respectively, for ELISA-DSL. Spearman's correlations between the two IGFBP-3 assays were 0.82. The odds ratio of colorectal cancer for the top quintile of IGFBP-3 was lower (1.24) for the DSL-ELISA measurement than for the measurements by Immunotech, somewhat in line with our speculation, but did not reflect a possible inverse association of risk with IGFBP-3 (Table 1). Furthermore, with neither of the IGFBP-3 assays used was there any clear increase in risk for elevated IGF-I levels adjusted for IGFBP-3, nor was there any inverse association of risk with IGFBP-3 adjusting for IGF-I (data not shown).

These data provide only weak support for the hypothesis that differences in assay specificity would explain the discrepant relationships between cancer and IGFBP-3 in different cohorts. However, the present evaluation is based on small numbers (102 cases, 200 matched controls), and should be repeated with larger studies.

**References**

1. Ma, J., Pollak, M. N., Giovannucci, E., Chan, J. M., Tao, Y., Hennekens, C. H., and Stampfer, M. J. Prospective study of colorectal cancer risk in men and plasma levels of insulin-like growth factor (IGF)-I and IGF-binding protein-3. *J. Natl. Cancer Inst.* (Bethesda), 91: 620–625, 1999.
2. Chan, J. M., Stampfer, M. J., Giovannucci, E., Gann, P. H., Ma, J., Wilkinson, P., Hennekens, C. H., and Pollak, M. Plasma insulin-like growth factor-I and prostate cancer risk: a prospective study. *Science* (Wash. DC), 279: 563–566, 1998.
3. Kaaks, R., Toniolo, P., Akhmedkhanov, A., Lukanova, A., Biessy, C., Dechaud, H., Rinaldi, S., Zeleniuch-Jacquotte, A., Shore, R. E., and Riboli, E. Serum C-peptide, insulin-like growth factor (IGF)-I, IGF-binding proteins, and colorectal cancer risk in women. *J. Natl. Cancer Inst.* (Bethesda), 92: 1592–1600, 2000.
4. Stattin, P., Bylund, A., Rinaldi, S., Biessy, C., Dechaud, H., Stenman, U. H., Egevad, L., Riboli, E., Hallmans, G., and Kaaks, R. Plasma insulin-like growth factor-I, insulin-like growth factor-binding proteins, and prostate cancer risk: a prospective study. *J. Natl. Cancer Inst.* (Bethesda), 92: 1910–1917, 2000.

Received 4/13/01; revised 6/15/01; accepted 7/27/01.

The costs of publication of this article were defrayed in part by the payment of page charges. This article must therefore be hereby marked *advertisement* in accordance with 18 U.S.C. Section 1734 solely to indicate this fact.

<sup>1</sup> To whom requests for reprints should be addressed, at International Agency for Research on Cancer, 150 Cours Albert Thomas, 69372 Lyon, Cedex 08, France.

<sup>2</sup> The abbreviations used are: IGF, insulin-like growth factor; IGFBP, IGF-binding protein; IRMA, immunoradiometric assay; DSL, Diagnostic Systems Laboratories.

<sup>3</sup> R. Palmqvist, G. Hallmans, S. Rinaldi, C. Biessy, R. Stenling, E. Riboli, and R. Kaaks. Plasma IGF-I, IGF-binding protein-3 and risk of colorectal cancer: a prospective study in Northern Sweden. *Gut*, in press, 2001.

Table 1 Odds ratios of colorectal cancer for quintiles of serum IGF-I, and of three different measures of IGFBP-3<sup>a</sup>

	Quintiles					P for trend
	1	2	3	4	5	
IGF-I	1.00	1.49 (0.63–3.52)	1.30 (0.56–3.02)	1.52 (0.67–3.47)	1.88 (0.72–4.91)	0.25
IGFBP-3						
IRMA-Immunotech	1.00	1.70 (0.78–3.70)	1.15 (0.50–2.66)	0.92 (0.40–2.12)	2.46 (1.09–5.57)	0.19
ELISA-DSL	1.00	0.89 (0.41–1.94)	0.69 (0.30–1.57)	1.23 (0.55–2.76)	1.24 (0.54–2.86)	0.49
IGF-I adjusted for IGFBP-3; IGFBP-3 measured by						
IRMA-Immunotech	1.00	1.59 (0.73–3.47)	0.56 (0.23–1.39)	1.43 (0.61–3.36)	1.23 (0.47–3.22)	0.70
ELISA-DSL	1.00	1.48 (0.65–3.35)	1.07 (0.47–2.43)	1.23 (0.52–2.95)	1.03 (0.39–2.69)	0.93

<sup>a</sup> Study based on 102 cases of colorectal cancer and 200 matched controls; see Kaaks *et al.*, (3) for details.

# Cancer Epidemiology, Biomarkers & Prevention

AACR American Association  
for Cancer Research

## Correspondence re: Giovannucci *et al.*, A Prospective Study of Plasma Insulin-like Growth Factor-1 and Binding Protein-3 and Risk of Colorectal Neoplasia in Women. *Cancer Epidemiol. Biomark. Prev.*, 9: 345-349, 2000

Rudolf Kaaks, Sabina Rinaldi, Annie Lukanova, et al.

*Cancer Epidemiol Biomarkers Prev* 2001;10:1103-1104.

**Updated version** Access the most recent version of this article at:  
<http://cebp.aacrjournals.org/content/10/10/1103>

**Cited articles** This article cites 4 articles, 1 of which you can access for free at:  
<http://cebp.aacrjournals.org/content/10/10/1103.full#ref-list-1>

**Citing articles** This article has been cited by 4 HighWire-hosted articles. Access the articles at:  
<http://cebp.aacrjournals.org/content/10/10/1103.full#related-urls>

**E-mail alerts** [Sign up to receive free email-alerts](#) related to this article or journal.

**Reprints and Subscriptions** To order reprints of this article or to subscribe to the journal, contact the AACR Publications Department at [pubs@aacr.org](mailto:pubs@aacr.org).

**Permissions** To request permission to re-use all or part of this article, use this link  
<http://cebp.aacrjournals.org/content/10/10/1103>.  
Click on "Request Permissions" which will take you to the Copyright Clearance Center's (CCC) Rightslink site.