



Fig. 1







Fig. 2









Fig. 7



Fig. 8



- Fig. 1. Light microscopic photograph showing the immunohistochemical localization of FGF-2 in papillary carcinoma. Reaction products were observed in the cytoplasm of the tumor cells (arrows) (× 400).
- Fig. 2. Light microscopic photograph showing the immunohistochemical localization of FGFR-1 in papillary carcinoma. Reaction products were observed in the cytoplasm (arrows) (× 400).
- Fig. 3. Light microscopic photograph showing the immunohistochemical localization of FGF-2 in follicular carcinoma. Reaction products were mainly observed in the cytoplasm and some were seen in the nucleus (arrows) (× 400).
- Fig. 4. Light microscopic photograph showing the immunohistochemical localization of FGFR-1 in follicular carcinoma. Reaction products were mainly observed in the cytoplasm (× 400).
- Fig. 5. Light microscopic photograph showing the immunohistochemical localization of FGF-2 in anaplastic carcinoma. Reaction products were mainly observed in the cytoplasm and some were seen in the nucleus (arrows)(× 400).
- Fig. 6. Light microscopic photograph showing the immunohistochemical localization of FGFR-1 in anaplastic carcinoma. Reaction products are observed in the cytoplasm (× 400).
- Fig. 7. Light microscopic photograph showing the immunohistochemical localization of FGF-2 in adenomatous goiter. No immunoreactivity was evident in the cytoplasm of the follicular cells (× 400).
- Fig. 8. Light microscopic photograph showing the immunohistochemical localization of FGFR-1 in adenomatous goiter. Reaction products were observed in the cytoplasm (× 400).
- Fig. 9. Light microscopic photograph showing the immunohistochemical localization of FGF-2 in normal thyroid tissue adjacent to papillary carcinoma. Both the endothelial cells of microvessels in the stroma (arrows) and the papillary carcinoma cells invading the stroma showed positive staining for FGF-2 in the cytoplasm (× 200).

Comparison of FGF-2 and FGFR-1 expression in neoplasms and hyperplastic lesions

According to the histopathological diagnosis, thyroid diseases were divided into three groups: carcinoma, adenoma, and adenomatous goiter. FGF-2 and FGFR-1 expression in these three groups was compared. As shown in Table 2, the positive rates of FGF-2 and FGFR-1 in carcinoma were more than 80%. Those in adenoma were more than 50%. In contrast, in adenomatous goiter, although the FGF-2-positive rate was 16.7%, that of FGFR-1 was 66.7%.