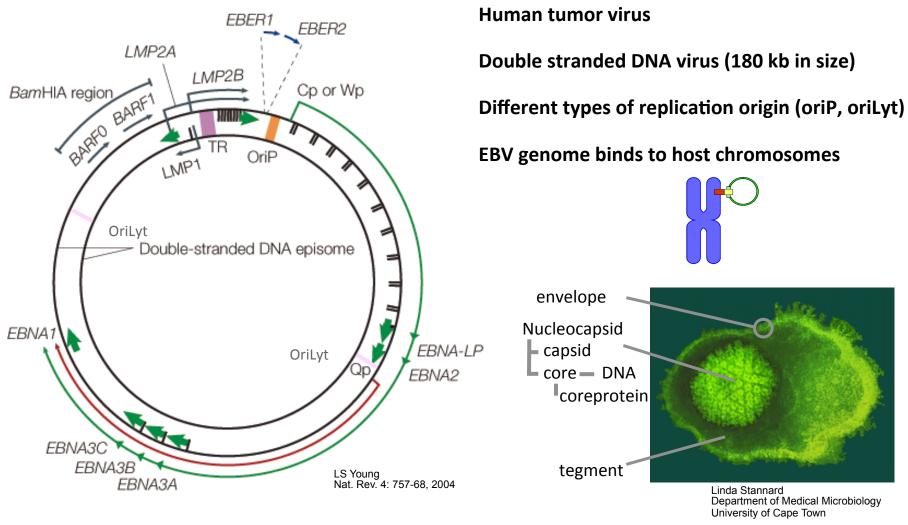
## **Epstein-Barr Virus (EBV)**



**EBV** genome and latent genes

Virion of herpes virus

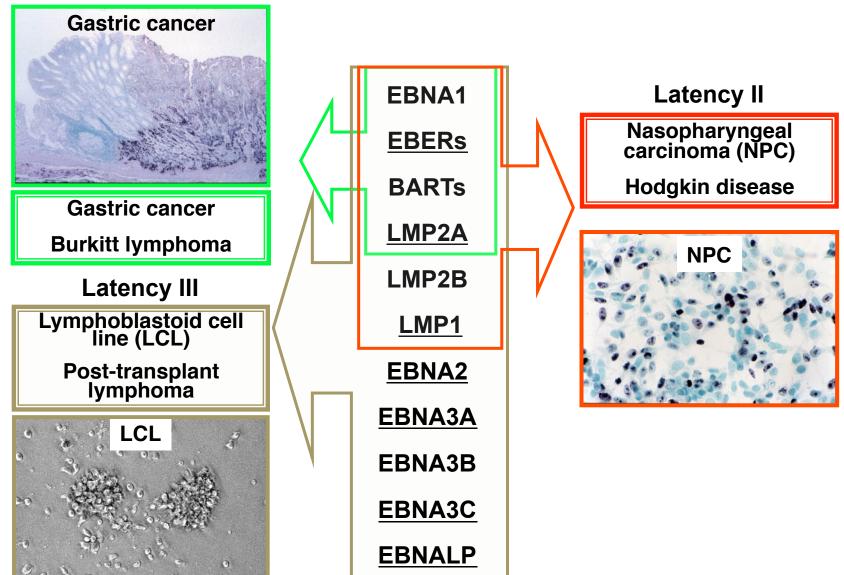
# Number of patients bearing EBV associated cancer (2011)

Cancer	No. of cases	No. of cases attributable to EBV
Burkitt lymphoma		
Sporadic	400	100
Endemic	7,800	6,600
Gastric carcinoma	933,900	84,050
Hodgkin lymphoma	62,400	28,600
Nasopharyngeal carcinoma	80,000	78,100
Total		197,450

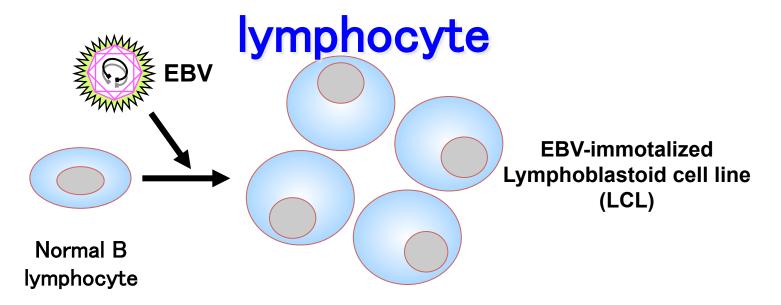
JI Cohen Sci. Transl. Med. 3(107): 107fs7, 2011.

### EBV associated cancers & types of latency

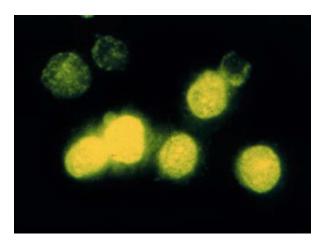
#### Latency I



## EBV infection immortalizes B



#### LCL(EBNA1 + )



#### **EBV** latent genes

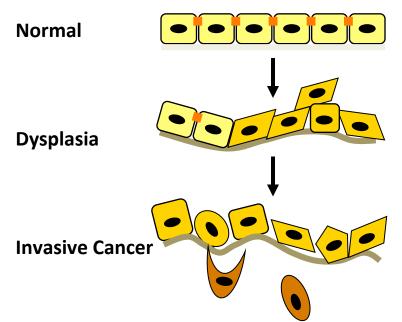
6 EBV nuclear antigens (EBNAs 1, 2, 3A, 3B, 3C and LP)

3 latent membrane proteins (LMPs 1, 2A and 2B)

untranslated RNAs (EBER 1, EBER 2, BART miRNAs)

Others (BHRF1, BARF1)

## Genesis of EBV-associated epithelial tumors 5



Epithelial cells form monolayer construct by tight junction and adherent junction, which make cell polarity.

Cell polarity is important to protect molecular permeation, to form cell to cell communications, and to receive signals from outside of cells, etc.

Epithelial to mesenchymal transition (EMT) is an initial stage of cancer progression, where epithelial cells no more form tight junction important for its functions, but acquires mesenchymal cell phenotype.

Progression of EMT is accompanied by malignant transformation of cancer cells. Cancer cells stop to grow as a mass, but start to migrate individually to other organs.

