

Citogenética del mieloma



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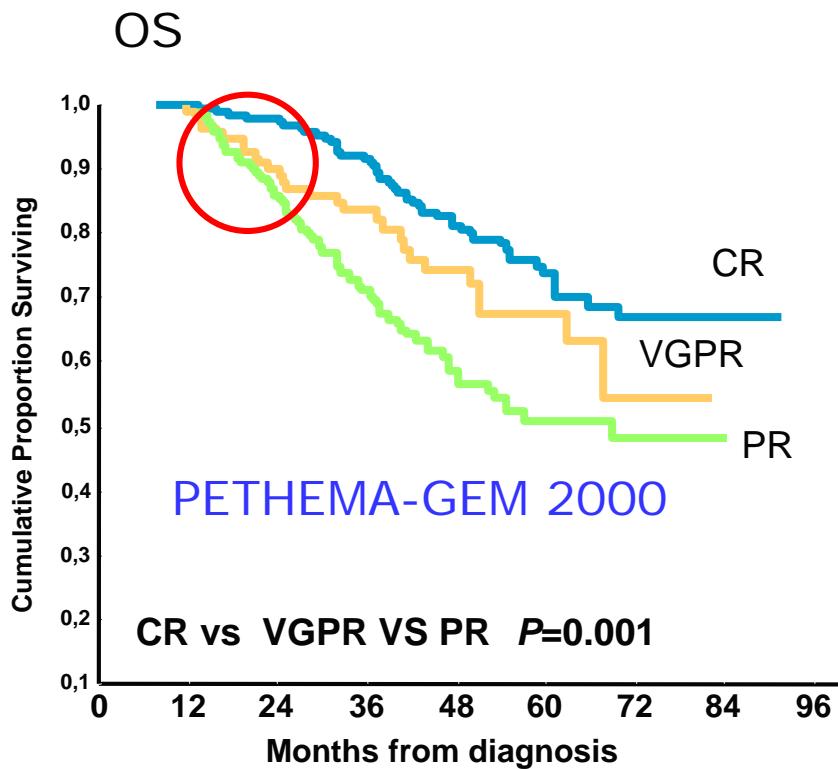
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Universidad de Salamanca.

MM is a heterogeneous disease

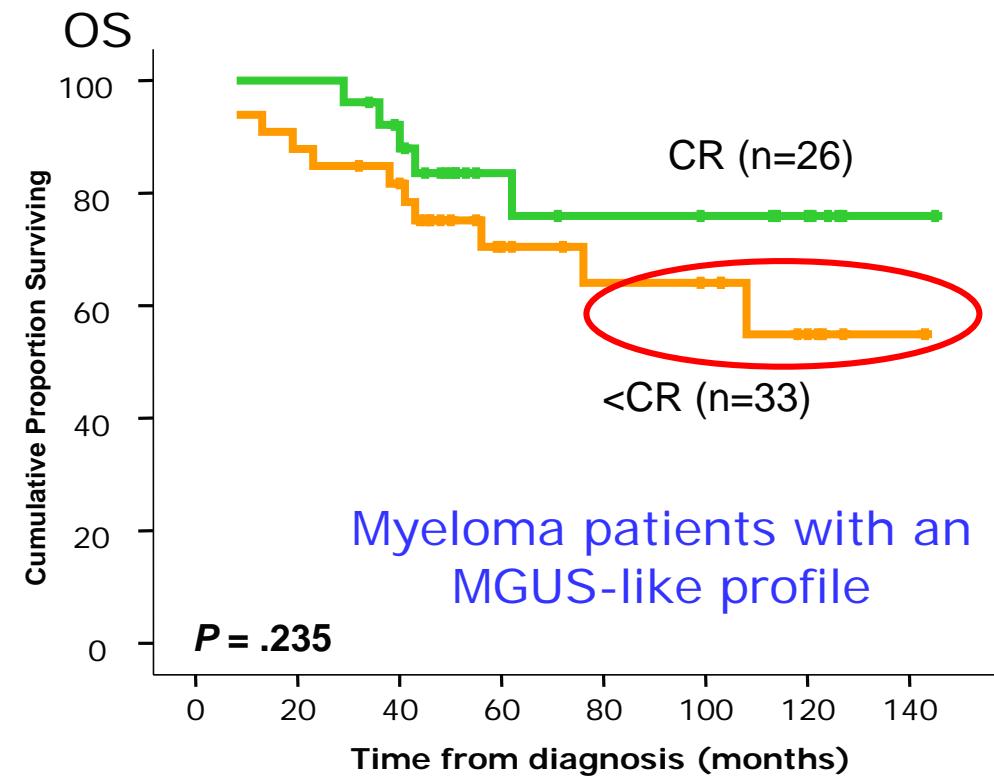
Median survival around 6 years



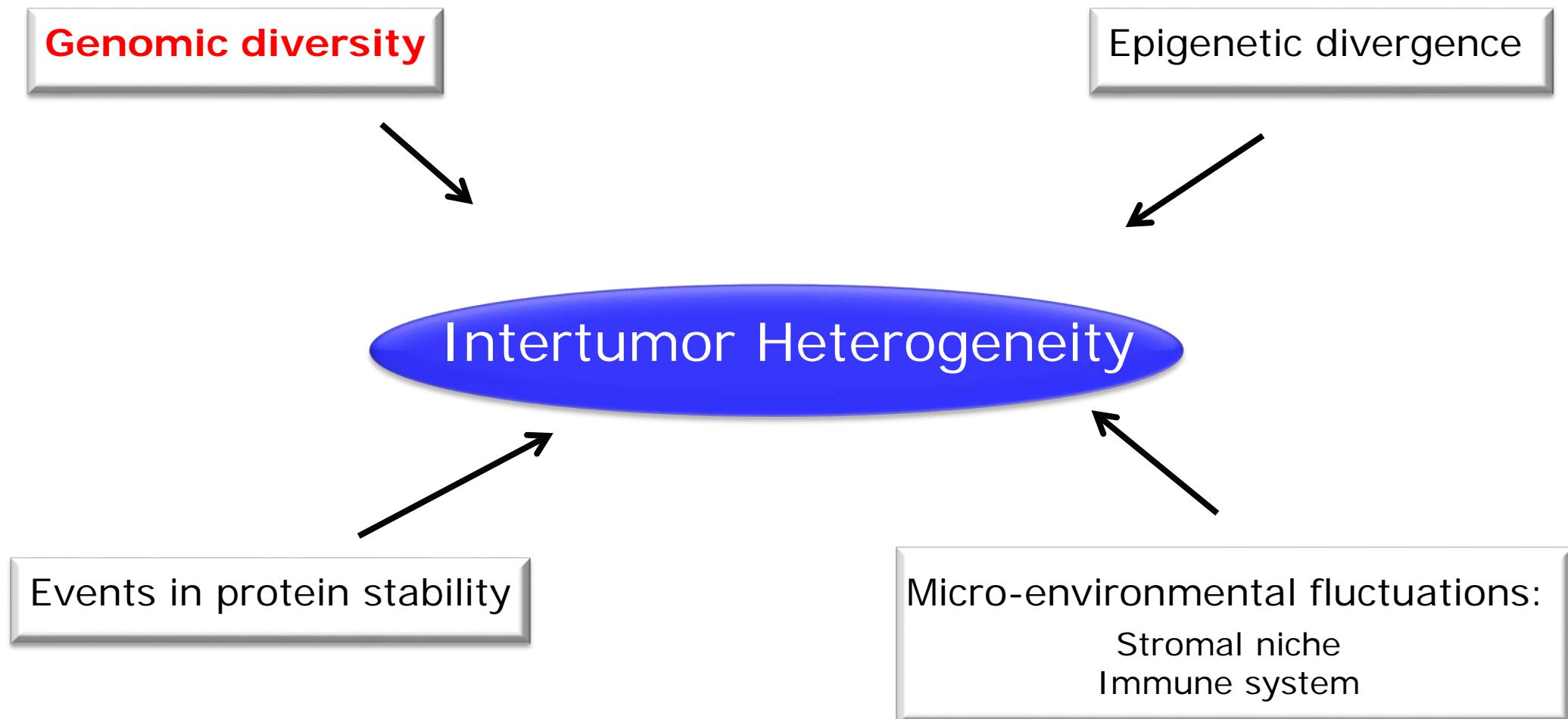
1-2 years



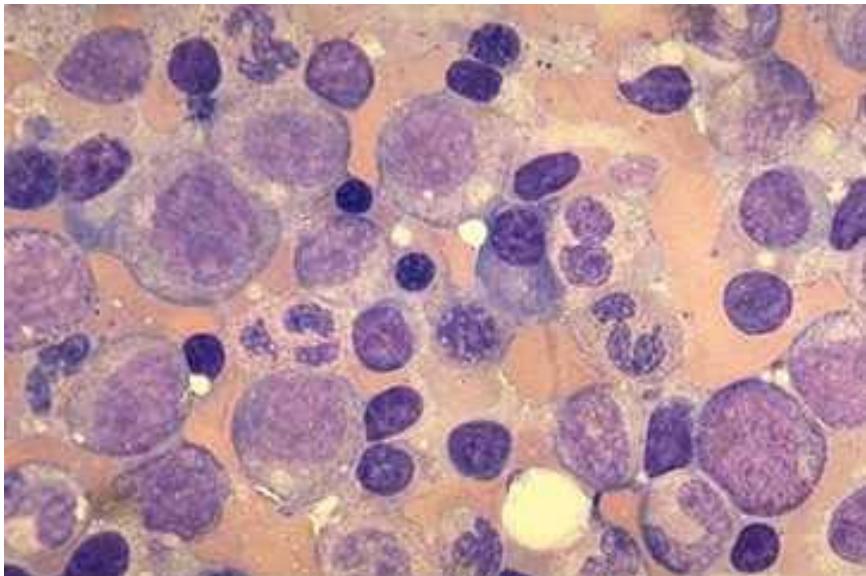
More than 15 years



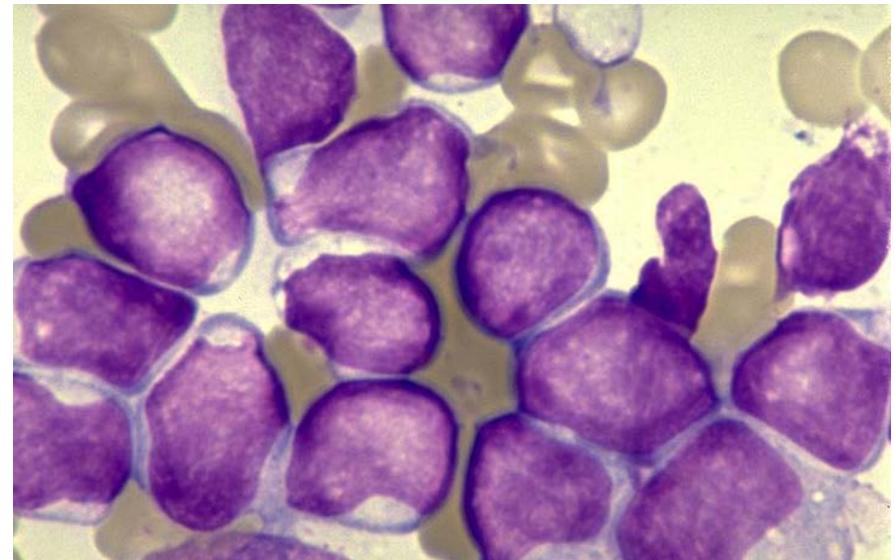
Different entities with distinct clinical evolution



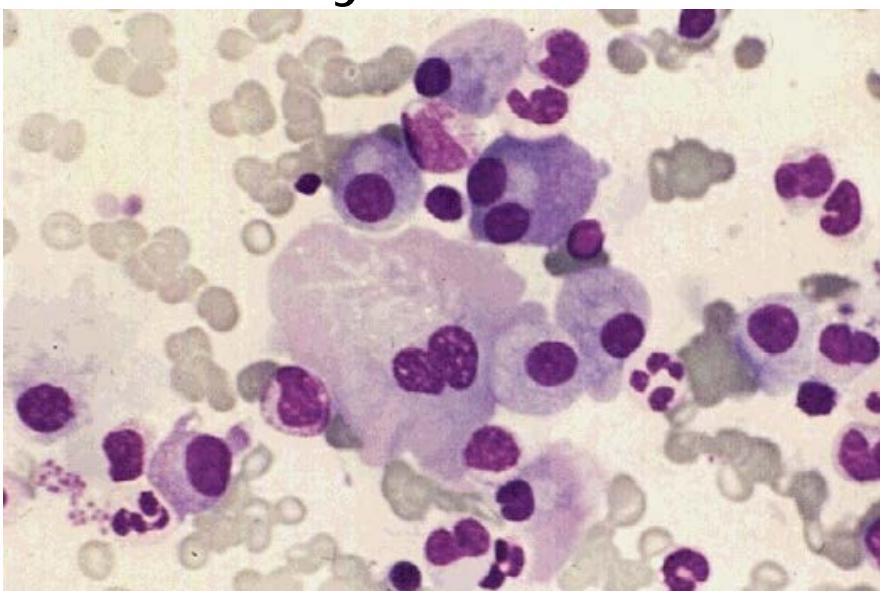
Normal BM



Acute leukemia

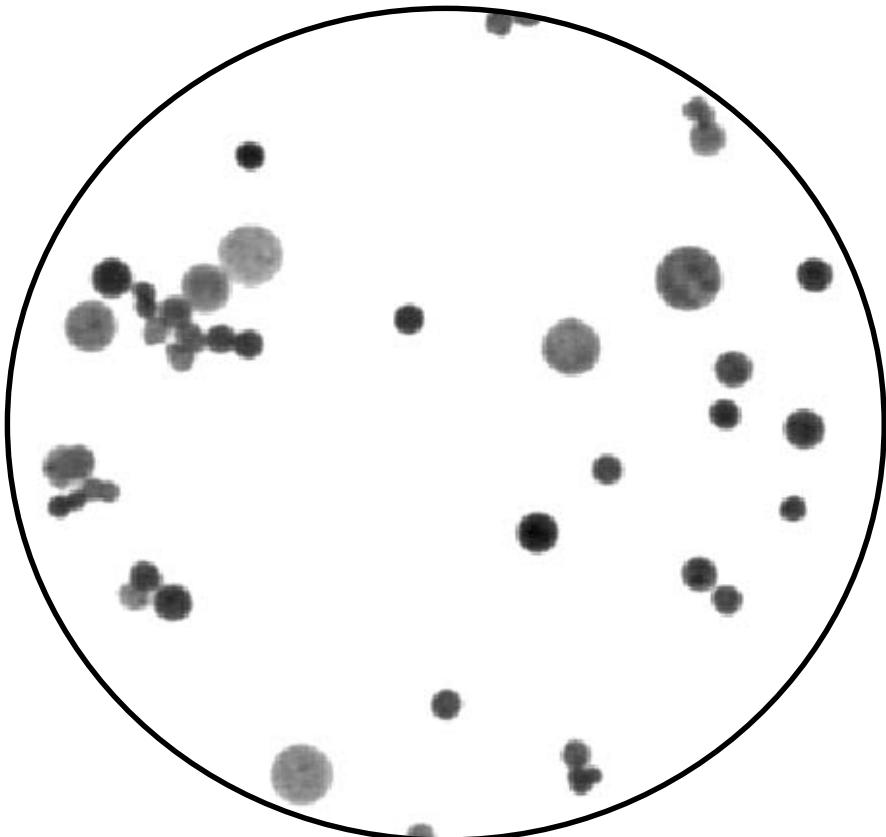


Myeloma

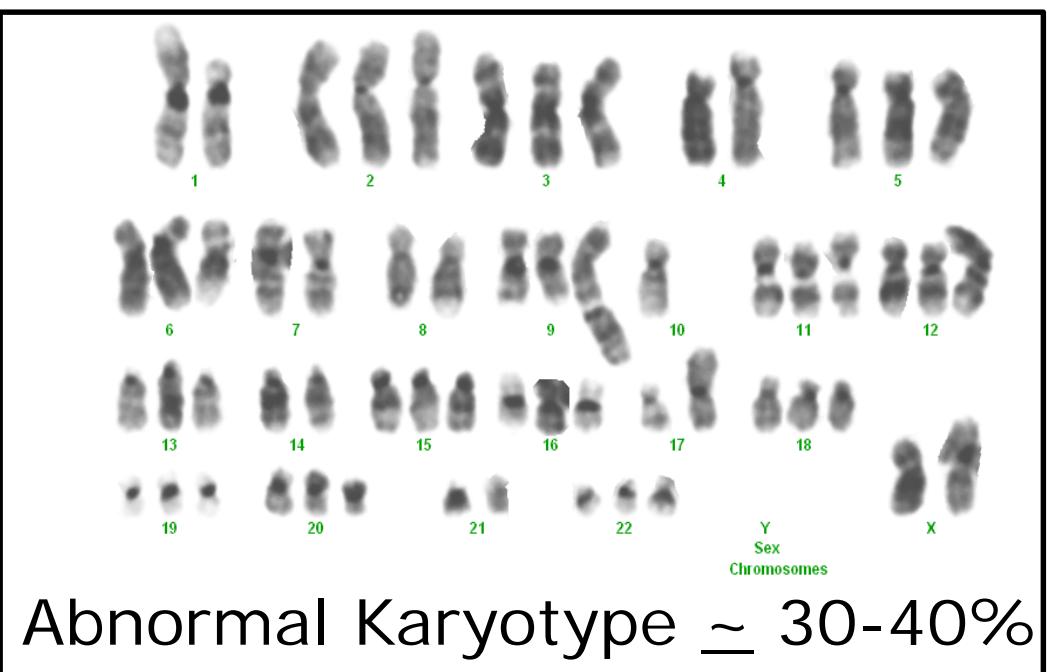
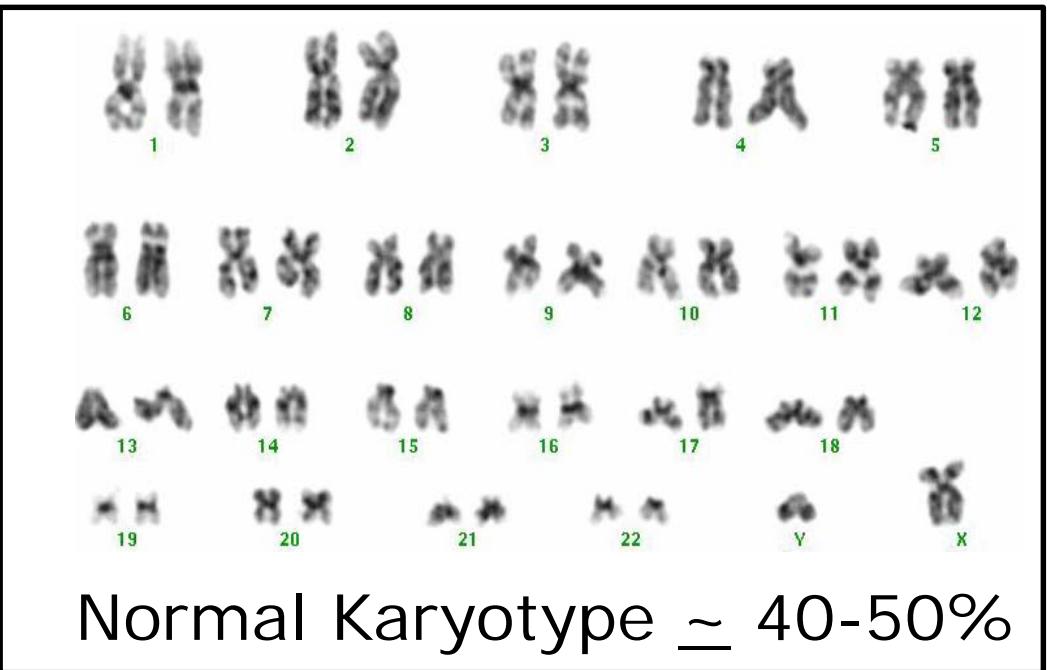


Low infiltration of
tumoral cells in
the bone marrow

Low mitotic index

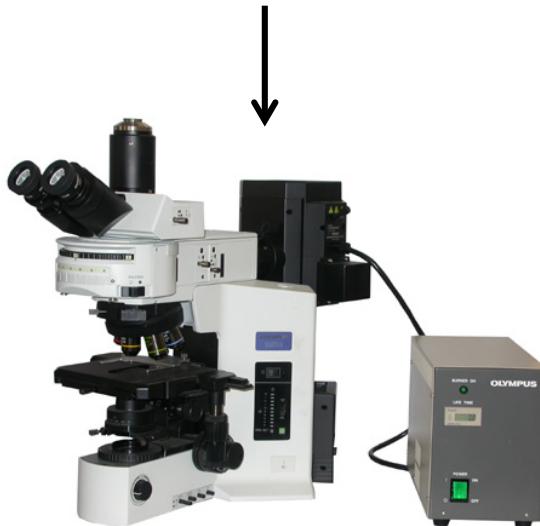
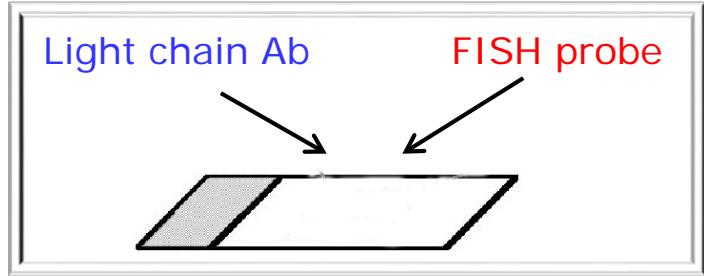


Failure \simeq 10-25%



The plasma cells need to be selected enabling an unambiguous identification

Concomitant labeling of the cytoplasmic immunoglobulin light chain



Immunomagnetic separation



Flow cytometry,
FACSaria II cell sorter

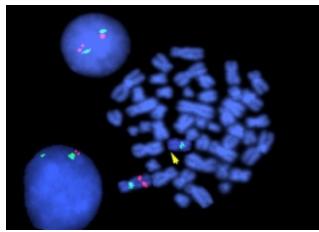


Cell sorting results in a **pure PC population** which enables further analyses to be performed

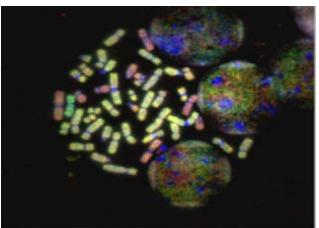
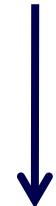


Conventional Cytogenetics

5-10 Mb



Fluorescence *in situ* hybridization



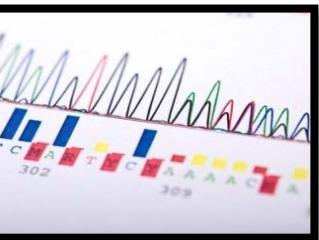
Comparative genomic hybridization (CGH)

100 Kb-5 Mb



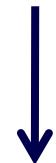
SNP-arrays

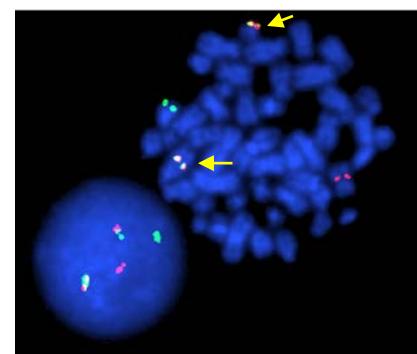
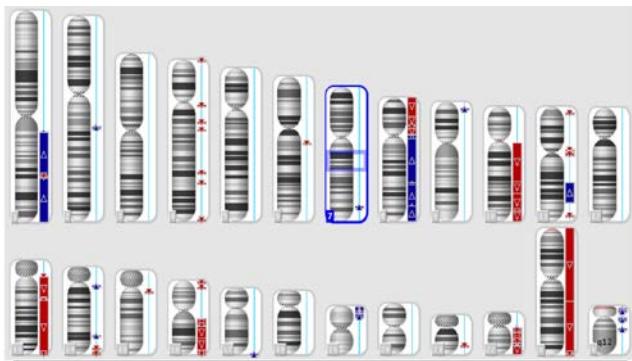
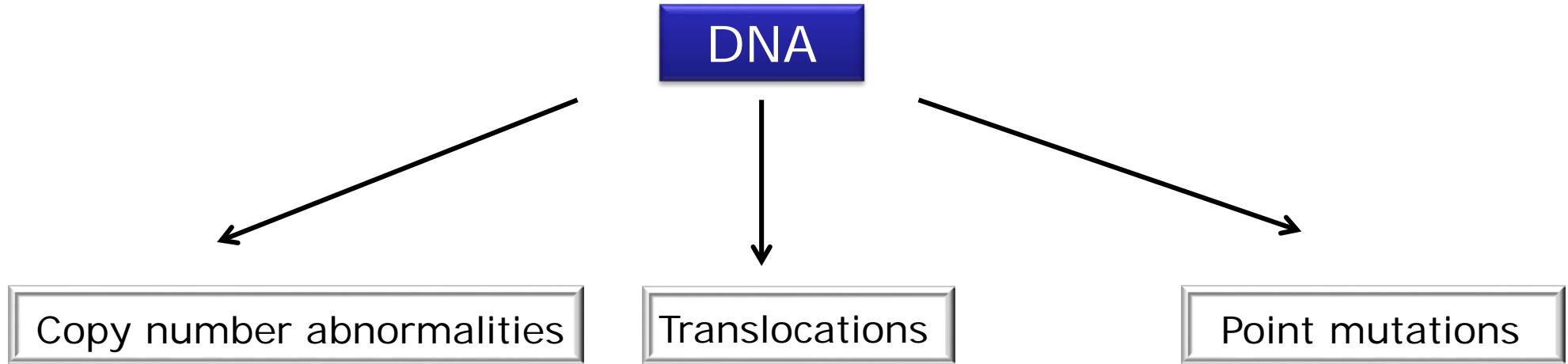
50 Kb



NGS

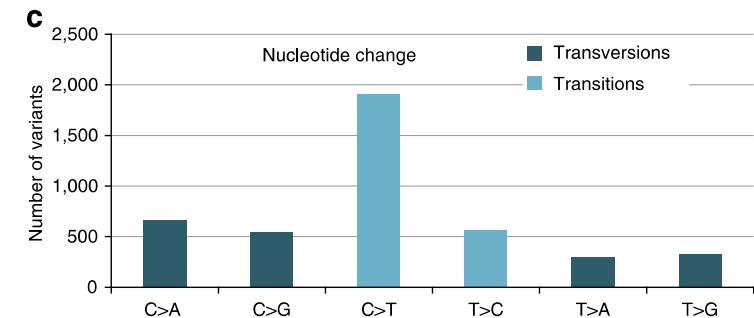
base-pair





Array comparative genomic
hybridization (aCGH)
SNP-arrays

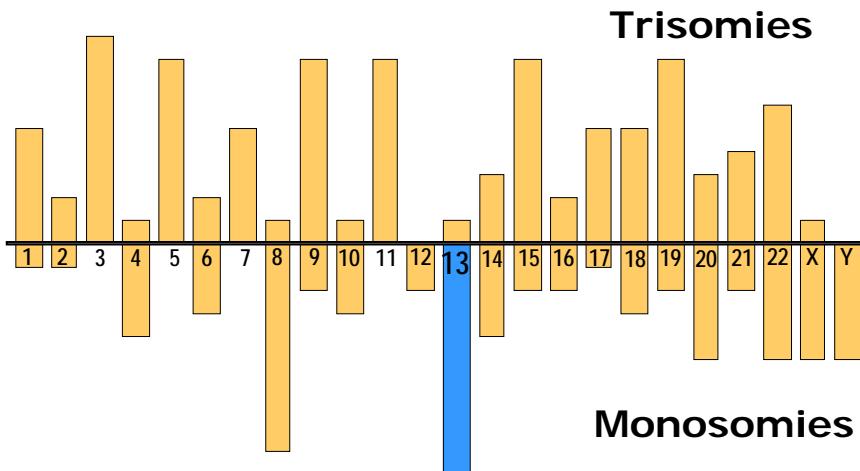
FISH



Next-generation
sequencing

Numerical abnormalities in MM

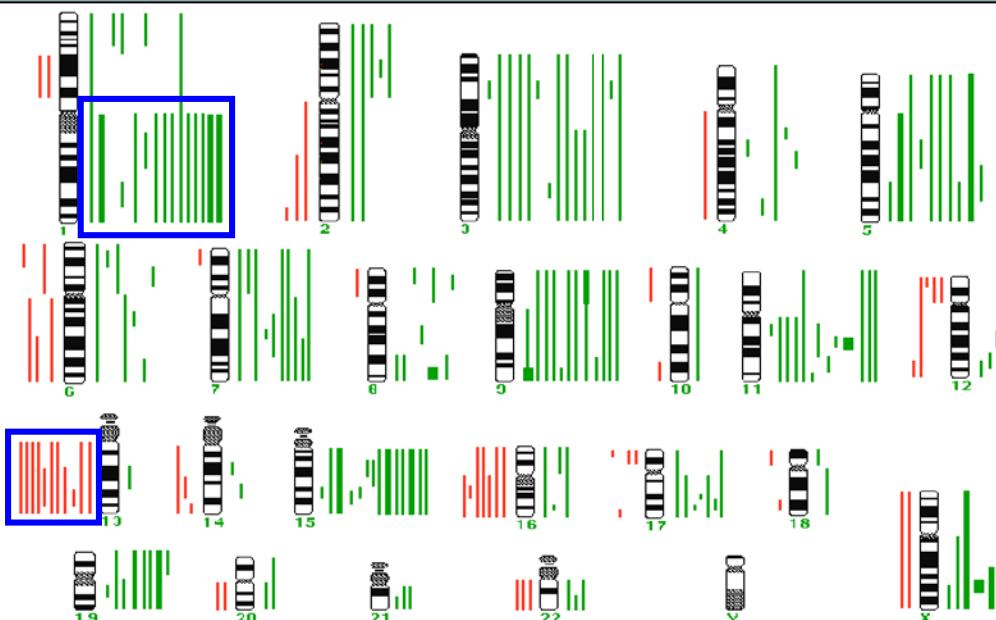
Structural abnormalities in MM



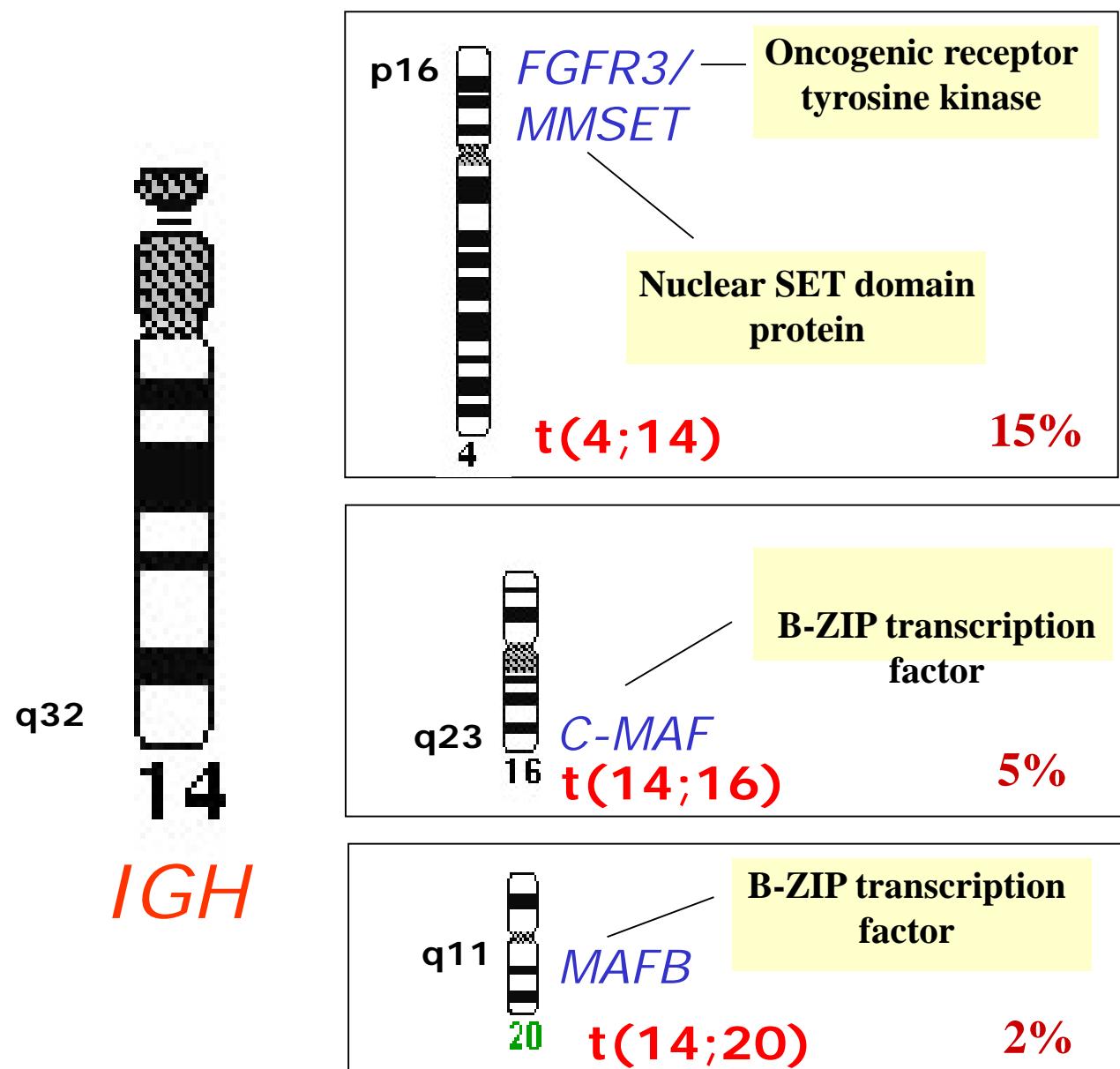
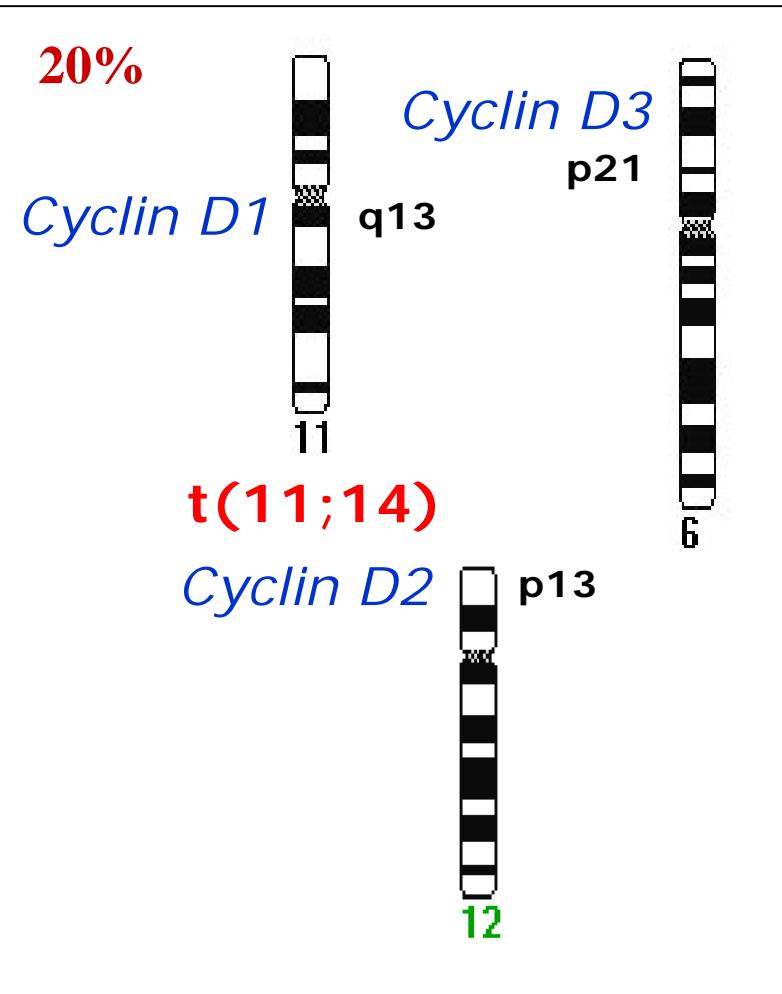
p

q

Almost all MM cases are cytogenetically abnormal



IGH translocations



MYC rearrangements in myeloma

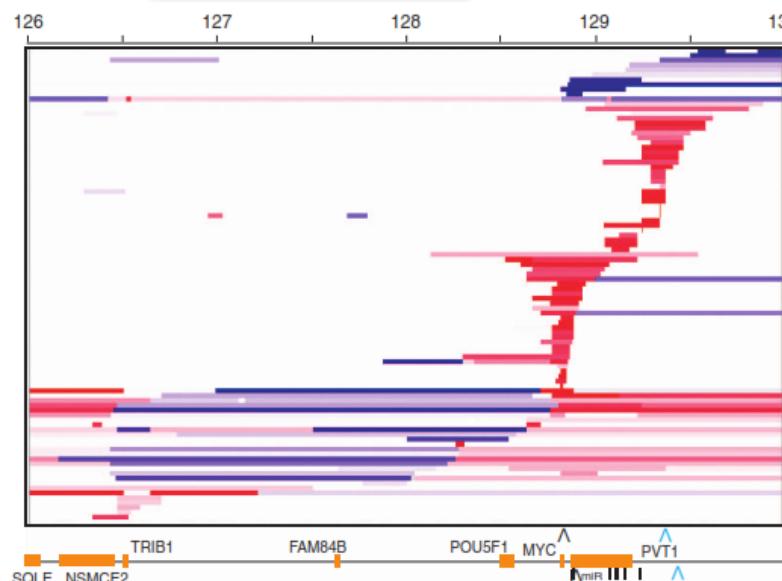
Rearrangements of the *MYC* detected by FISH are present in 15% of primary human multiple myeloma tumors and more than half of HMCLs (Avet-Loiseau et al, Blood 2001)

218 patients

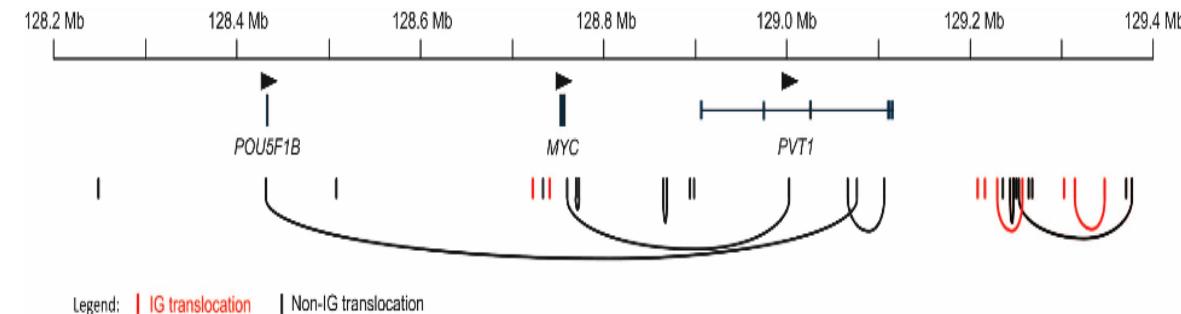
104 patients

FISH
CGH arrays

Capture assay followed
by massively parallel sequencing



MYC locus rearrangements: 49%



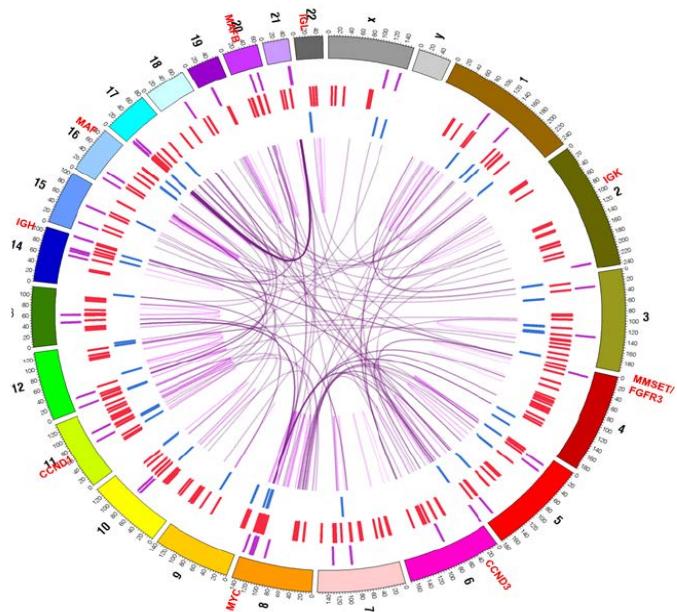
MYC translocation in 21% of samples

Whole-exome/genome sequencing



Hairy-cell leukemia

BRAF mutations $\simeq 100\%$

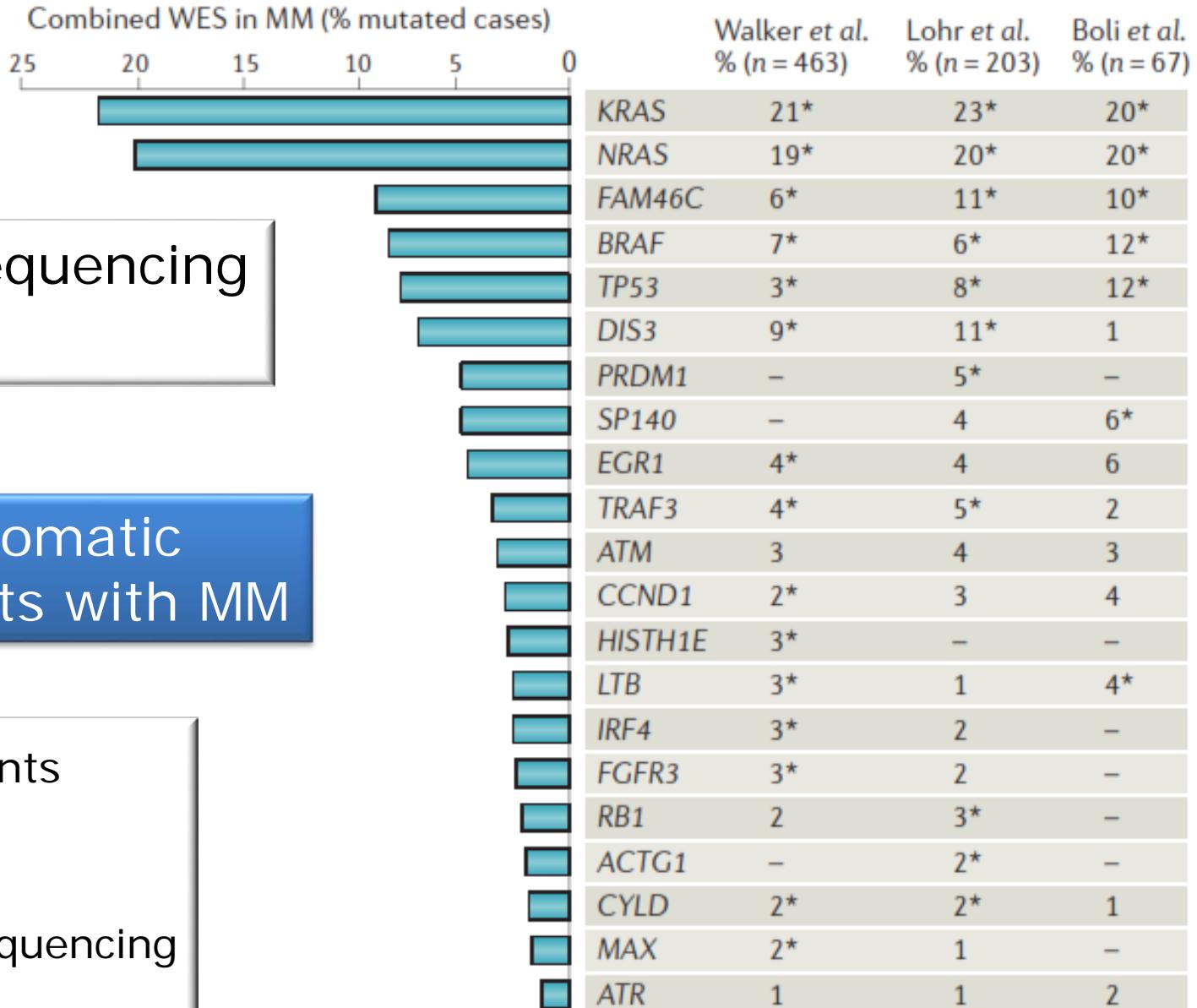


Waldenstrom's Macroglobulinemia

MYD88 mutations $\simeq 90\%$

Multiple myeloma

?



Massively parallel sequencing

Paired tumor/normal samples

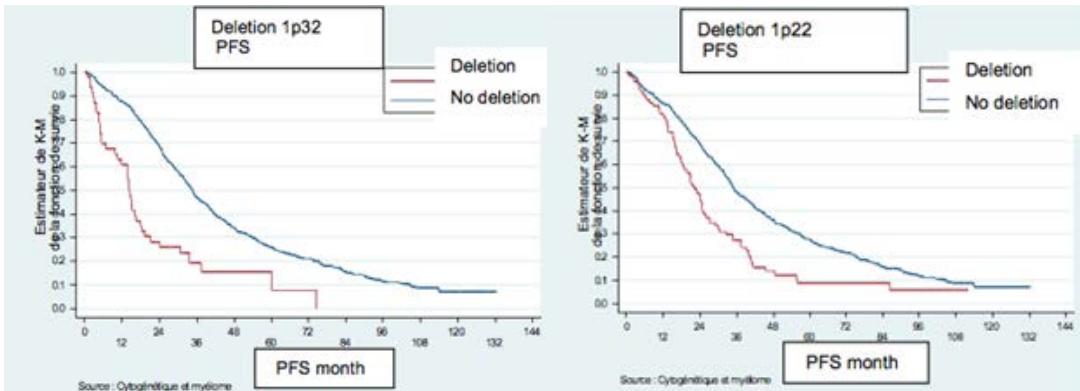
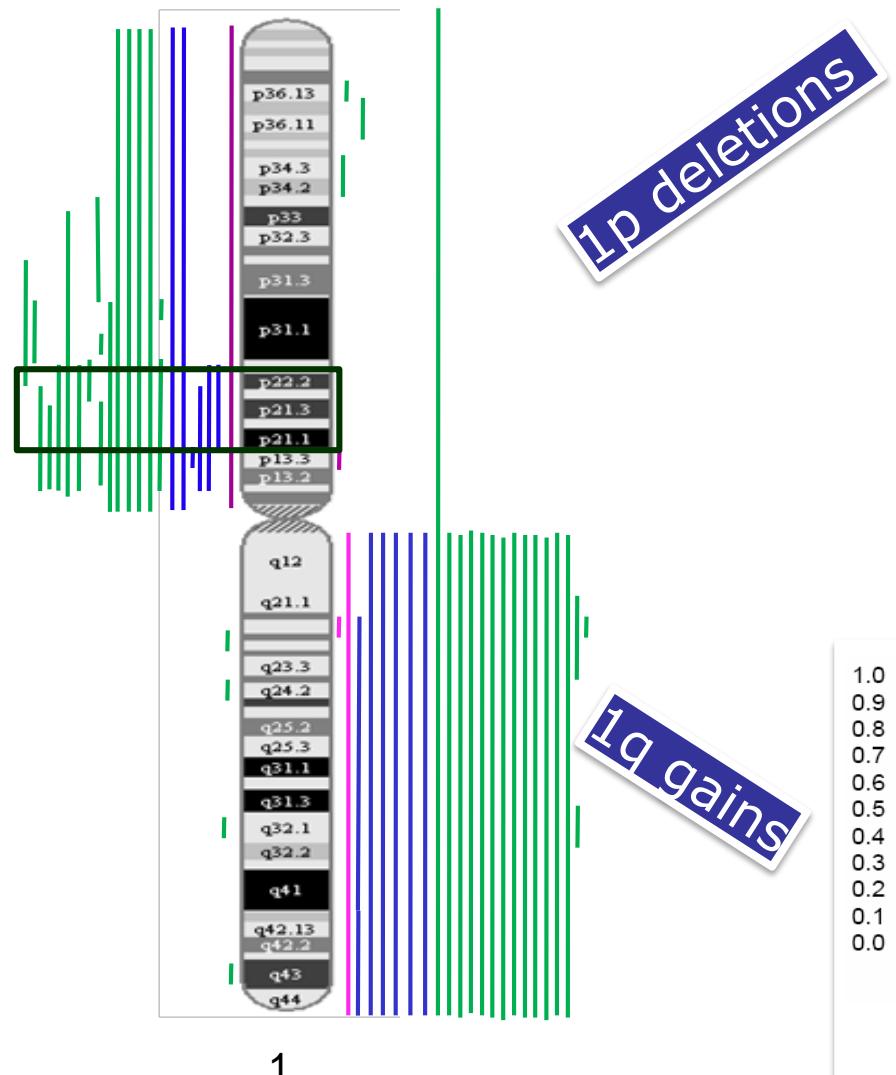
Most frequent somatic mutations in patients with MM

733 MM patients

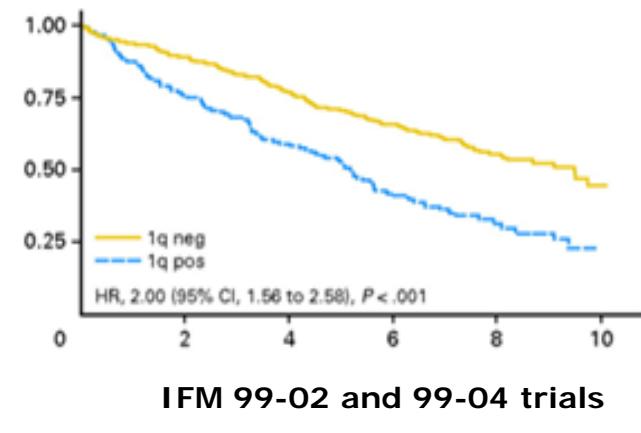
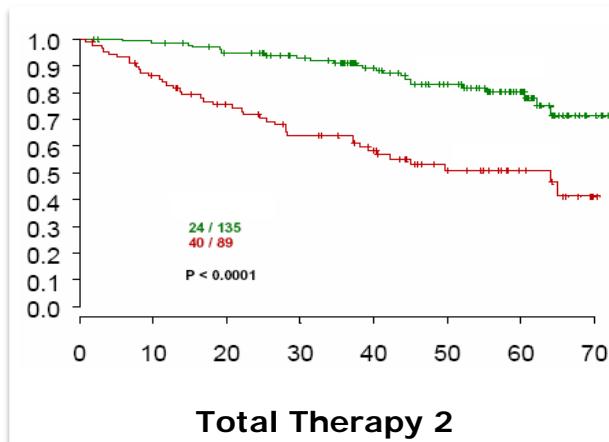


Whole-exome sequencing

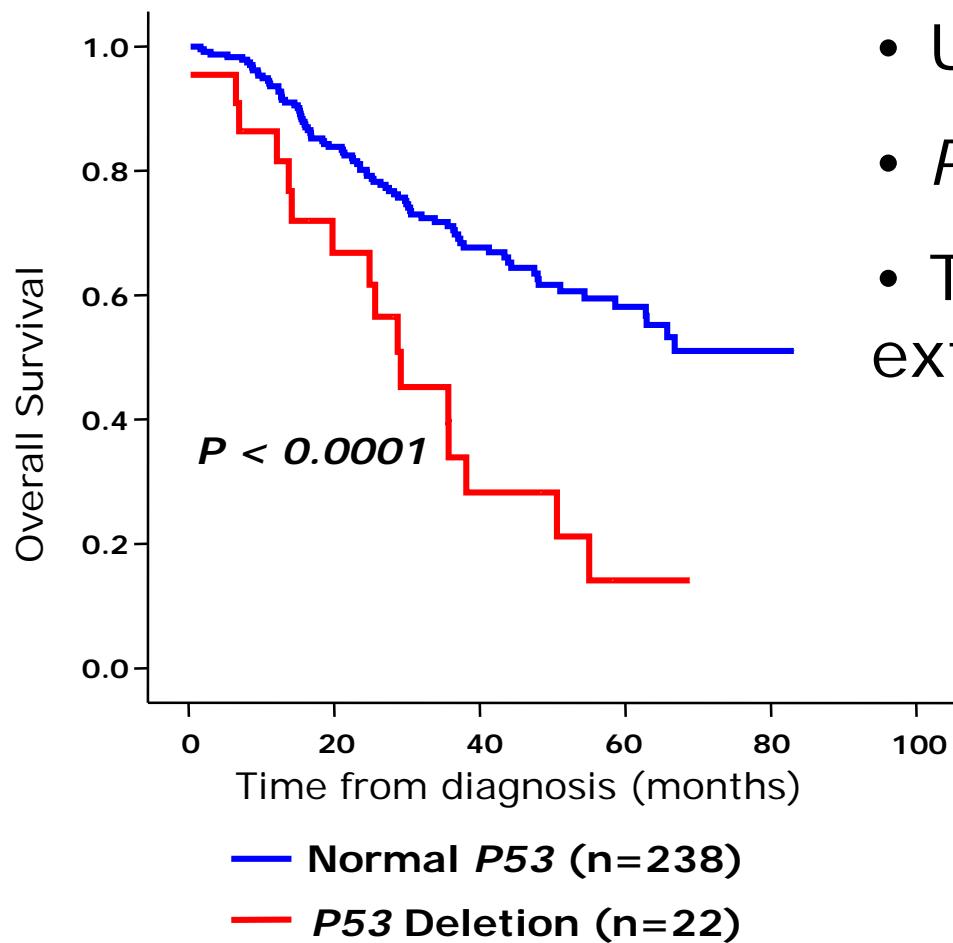
Chromosome 1 abnormalities



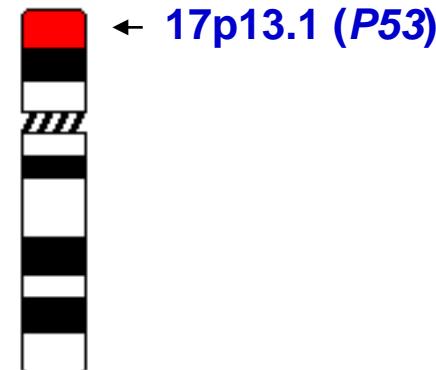
- 1195 patients in IFM trial
- Major negative prognostic factors for OS and PFS
- Confirms importance of **1p deletion** from previous studies



17p (*P53*) deletion is associated with adverse prognosis



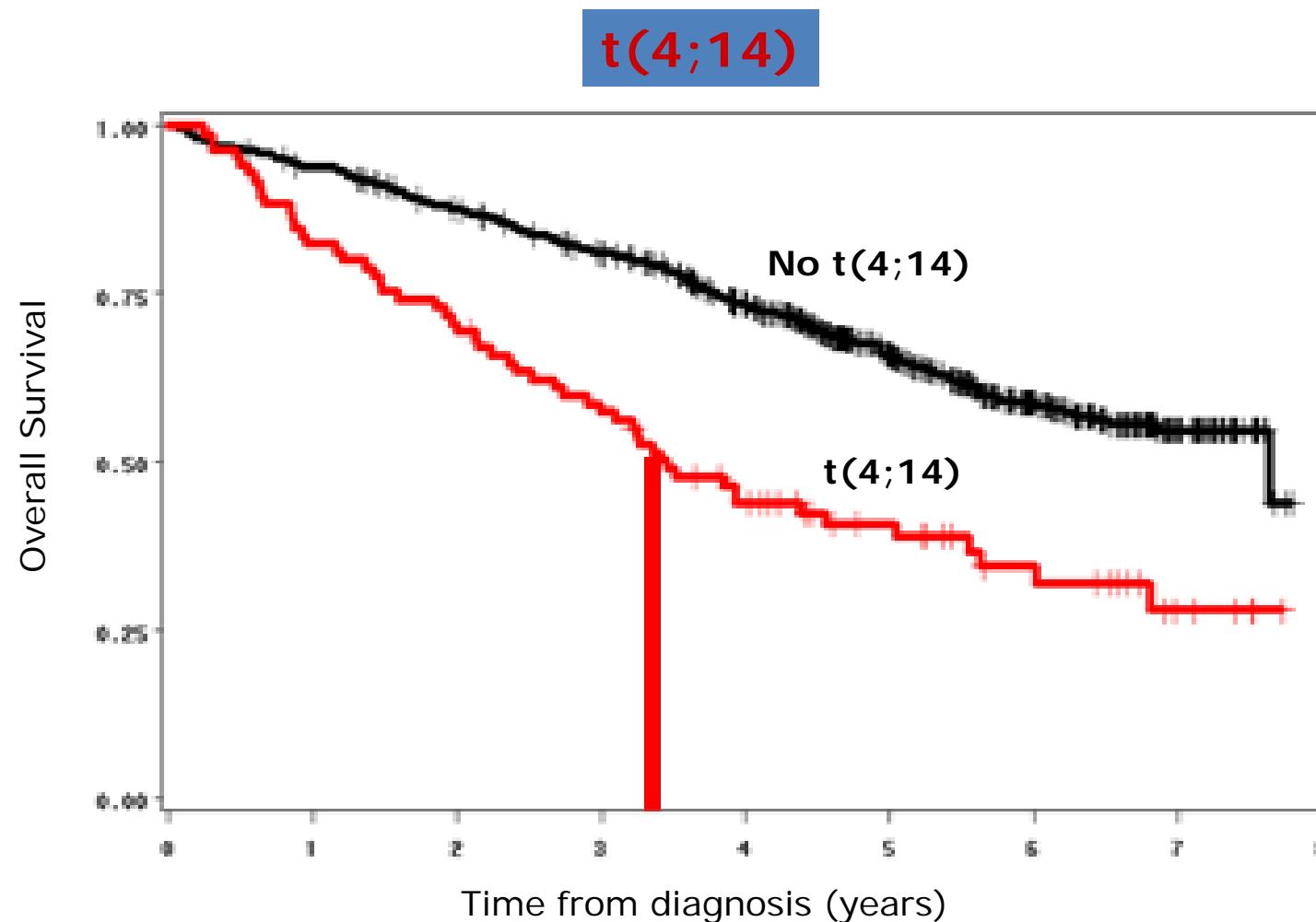
- Uncommon in newly diagnosed MM
- *P53* mutations: rare
- The lack of *P53* may promote the extramedullary disease



PETHEMA/GEM (Spanish MM group): 260 patients undergoing autologous transplantation

Chang et al, Blood 2005; Chng et al, Leukemia 2007; Tiedemann, Leukemia 2008; López-Anglada, Eur J Haematol 2009

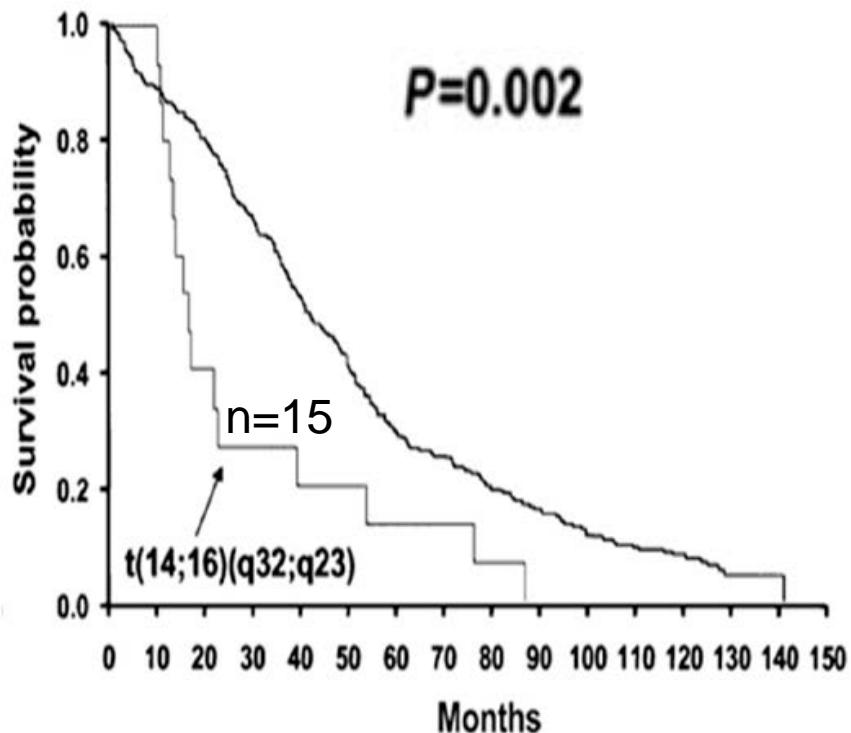
Prognostic implications of *IGH* translocations



Patients with t(4;14) respond to treatment but early relapses

Prognostic implications of *IGH* translocations

t(14;16)



Conventional Chemotherapy

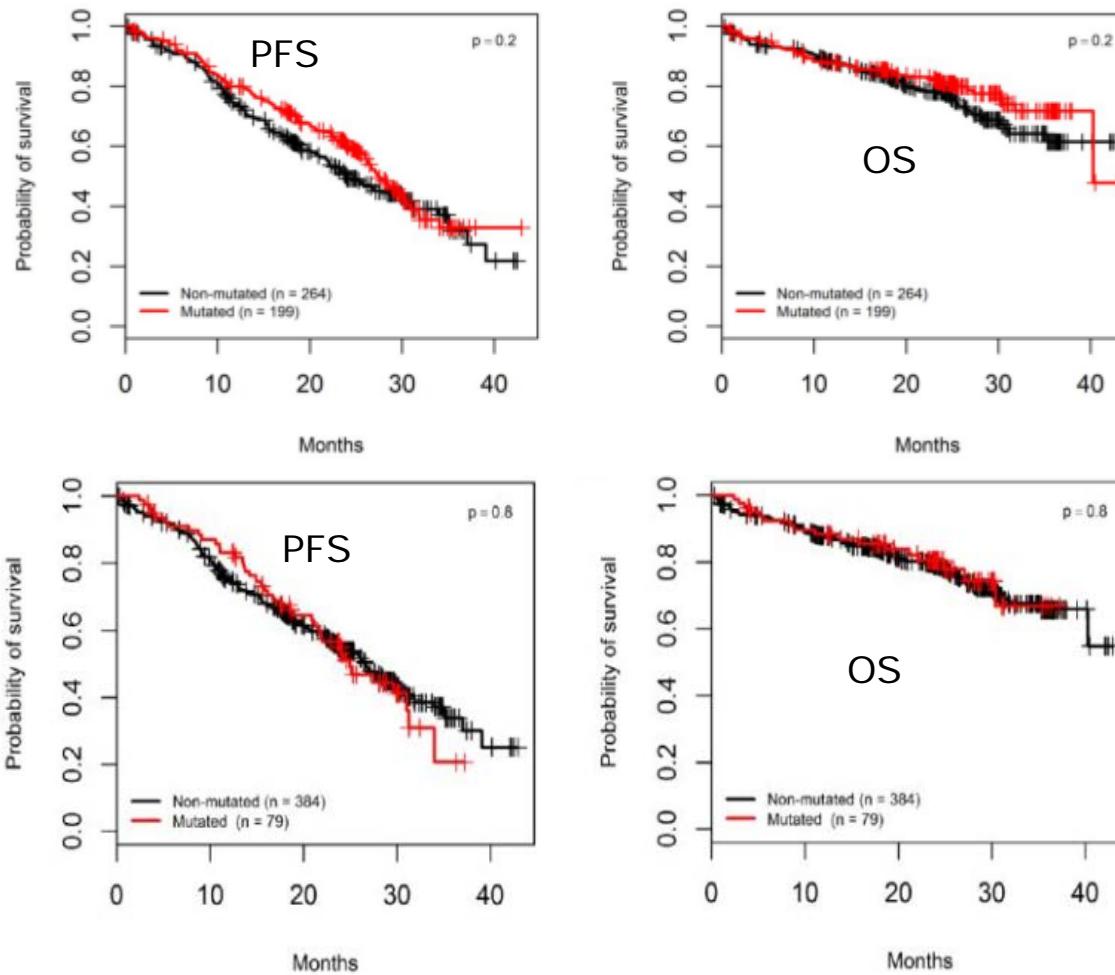
Double-intensive regimen

Parameter	n=32	Univariate analysis	
		HR (95% CI)	P
Age (n = 697)		1.03 (1.02-1.05)	< .0001
β_2 -microglobulin ≥ 4 vs < 4		2.02 (1.65-2.47)	< .0001
<i>t(4;14)</i> positive vs negative		2.24 (1.72-2.92)	< .0001
<i>del(17p)</i> ≥ 60 vs < 60		2.57 (1.88-3.50)	< .0001
<i>del13</i> > 0 vs 0		1.63 (1.34-1.97)	< .0001
<i>t(14;16)</i> positive vs negative		1.28 (0.82-2.01)	.281

Mutations in the RAS and NF- κ B pathways are prognostically neutral

Mutations
KRAS
NRAS
BRAF

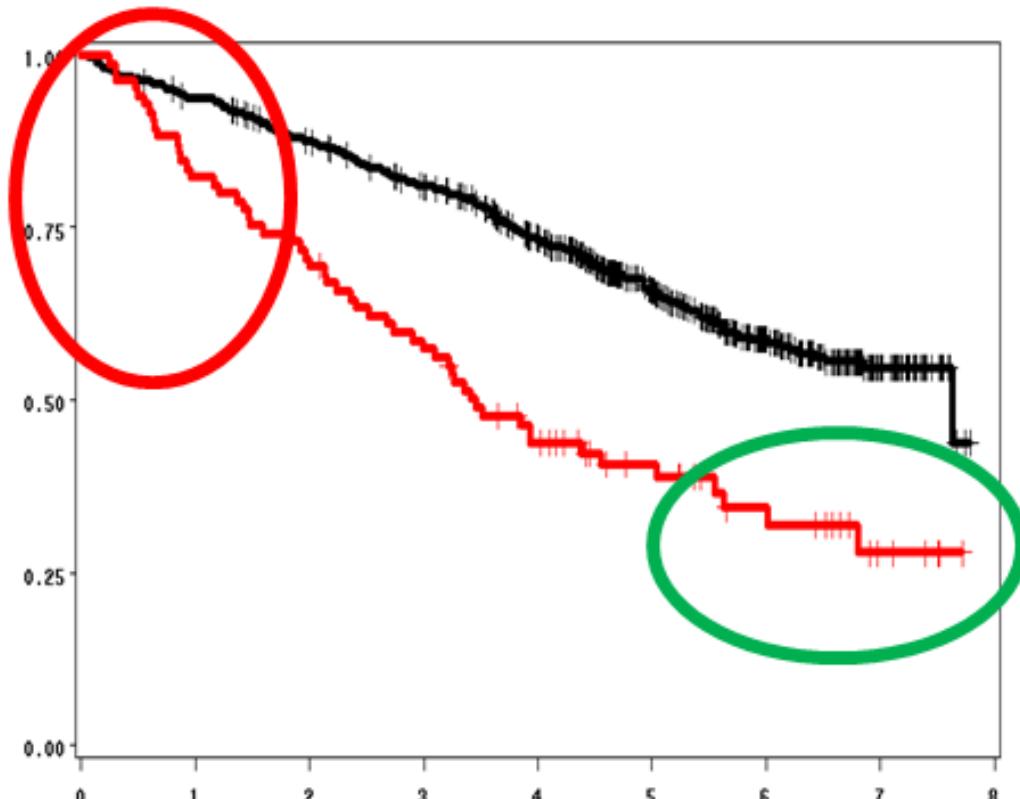
NF- κ B
pathway
mutations



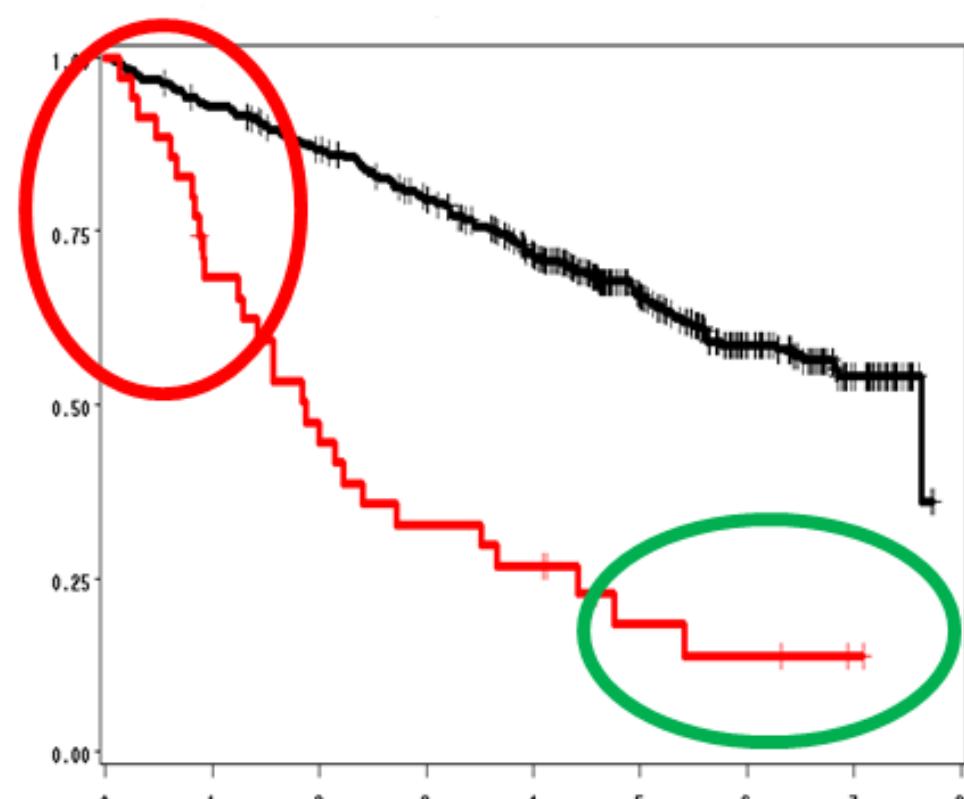
The mutational spectrum is dominated by mutations in the RAS (43%) and NF- κ B (17%) pathways, but although they are prognostically neutral, they could be targeted therapeutically

Heterogeneity in high-risk patients

t(4;14) overall survival



del(17p) overall survival

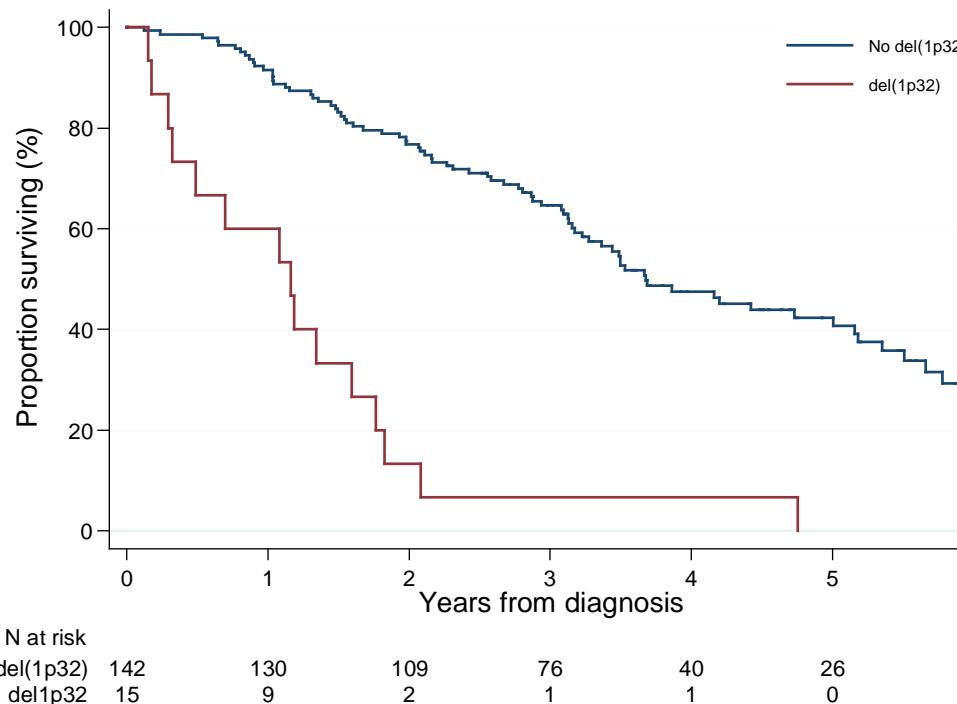


Patients < 65 years, double HDM/ASCT

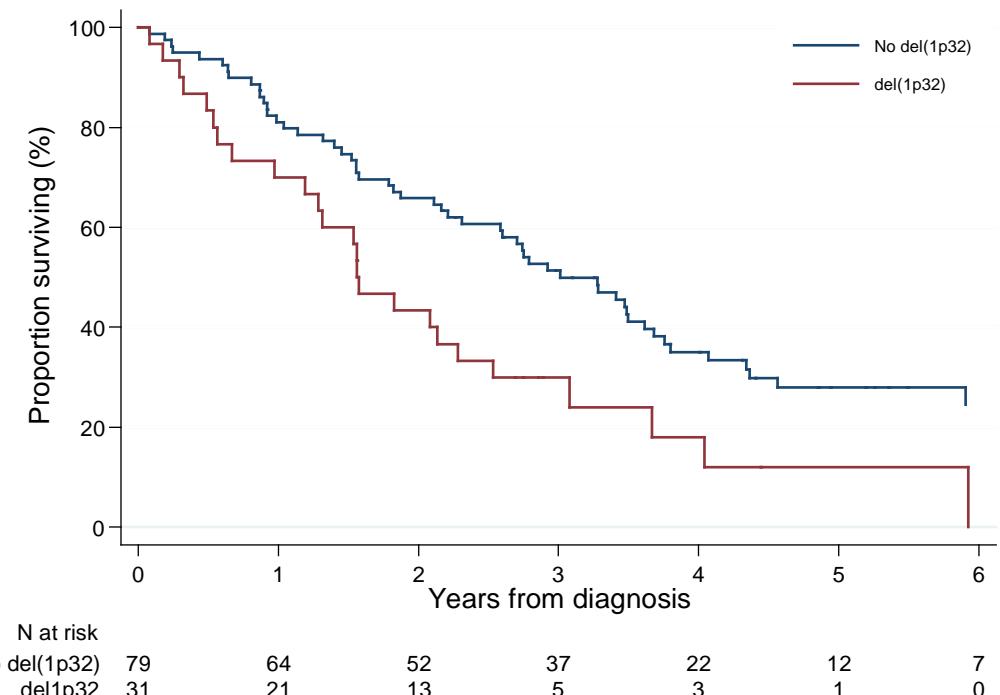
Do other chromosomal changes impact the outcome?

Heterogeneity in high-risk patients

Overall survival according to del(1p32)

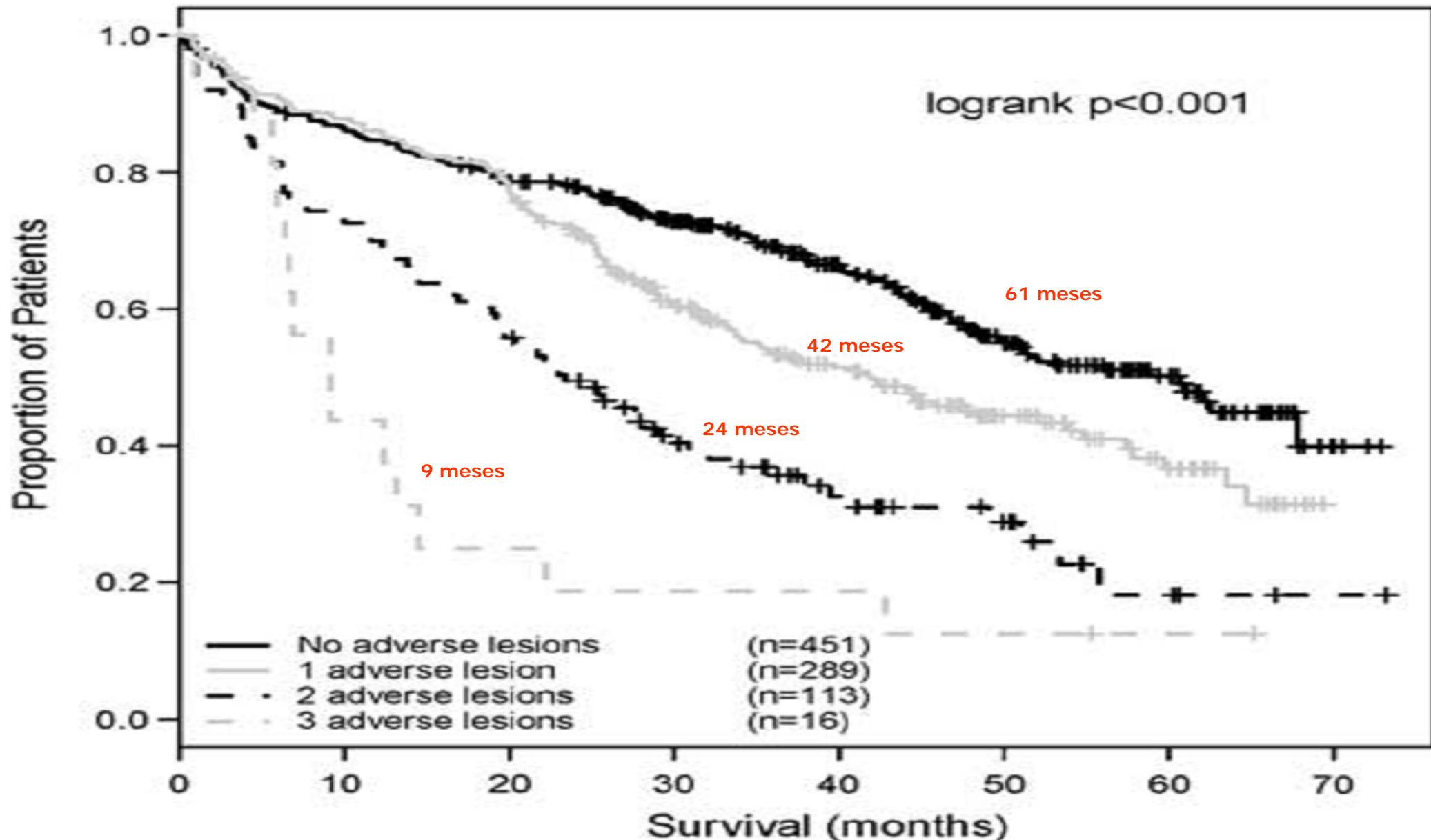


t(4;14)



del(17p)

Overall survival graded by number of adverse lesions

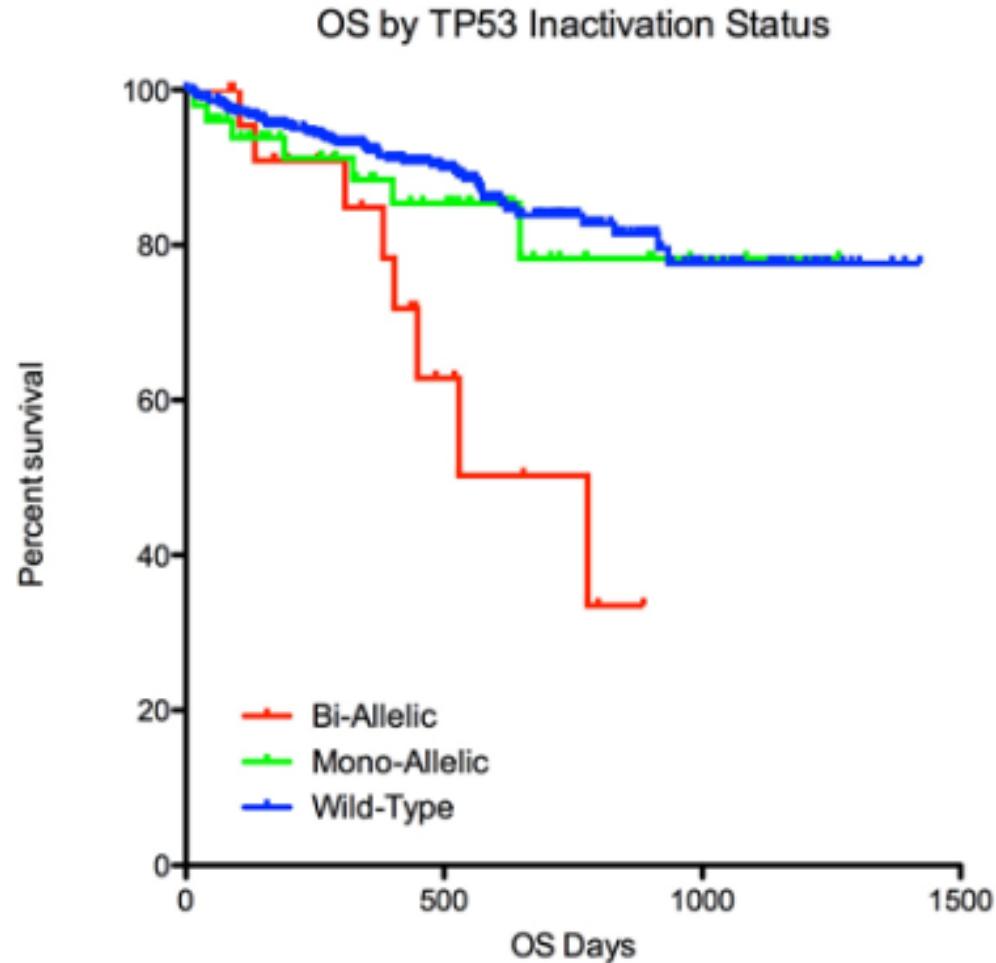


Bi-allelic TP53 inactivation is associated with poorer prognosis

CoMMpass Trial

Over 1,000 MM patients analyzed by NGS:

- Whole Exome Sequencing (WES)
- RNA sequencing (RNA-seq)

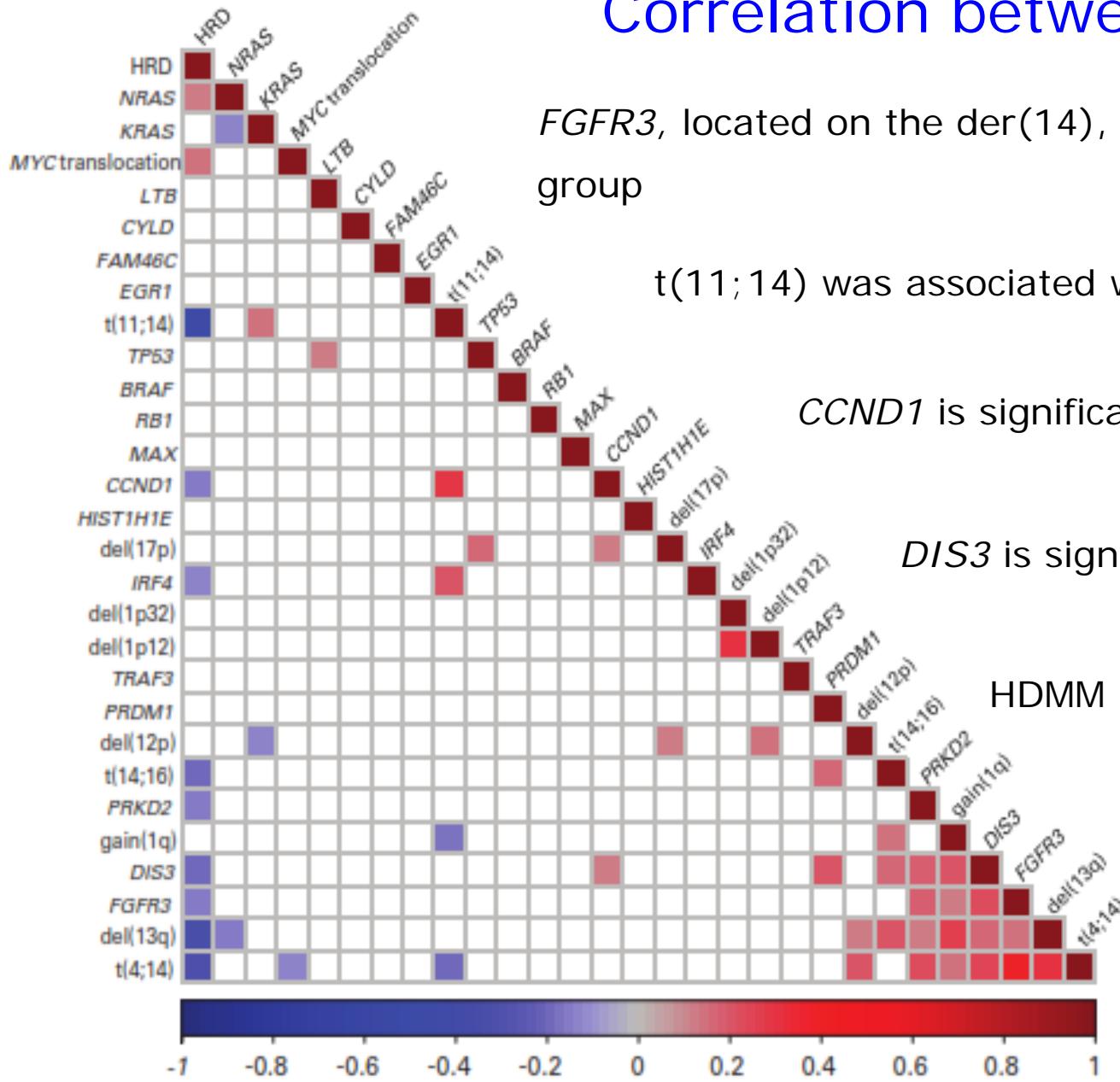


Bi-Allelic = Del + Del, Del + Mut, or Mut + Mut

Mono-Allelic = Deletion or Mutation alone

Wild-Type = No Deletion and No Mutation Detected

Correlation between genomic events



FGFR3, located on the der(14), is only mutated in the t(4;14) group

t(11;14) was associated with KRAS and IRF4 mutations

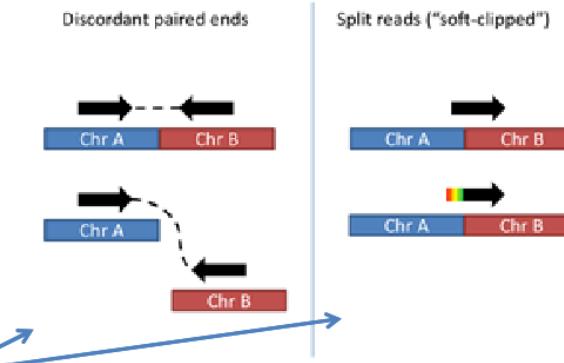
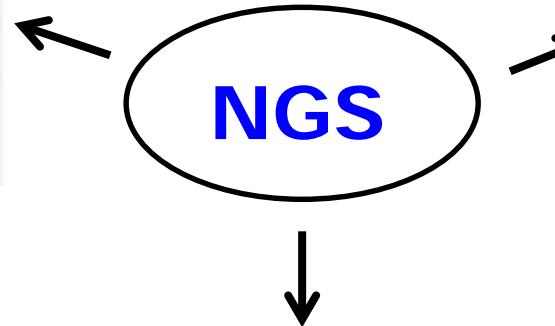
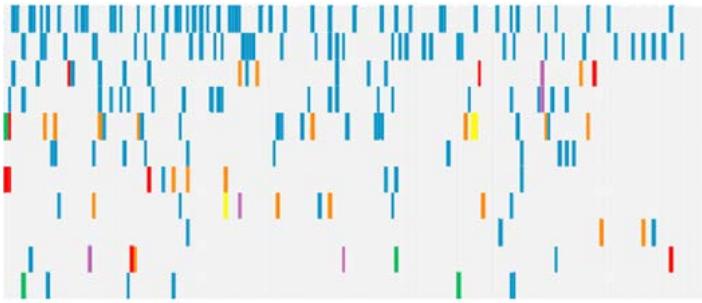
CCND1 is significantly mutated in the t(11;14) group

DIS3 is significantly mutated in the t(4;14) group

HDMM is enriched for FAM46C mutations

KRAS and NRAS mutations were mutually exclusive between each other but not with BRAF mutations

Oportunity for detection of mutations, translocations and CNAs using a single NGS assay



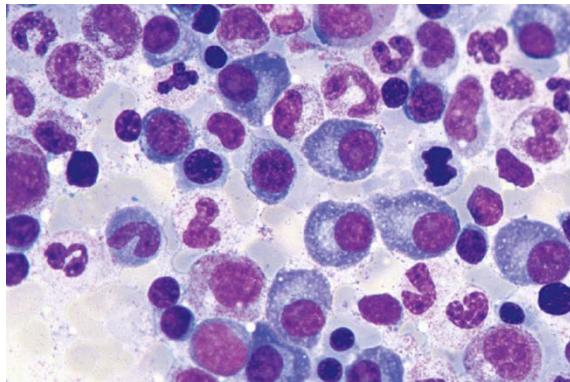
Detection of translocations



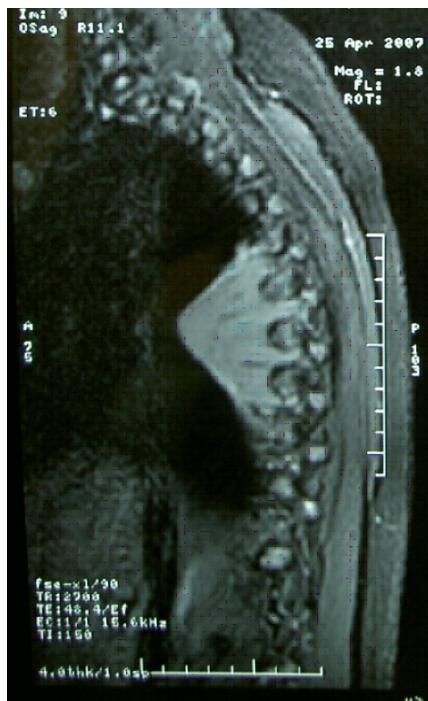
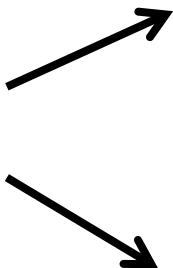
Detection of CNAs

Translocations and CNAs have a preponderant contribution over gene mutations in defining the genotype and prognosis of each case.
Bolli et al, Leukemia 2018

Intratumor Heterogeneity



MM IgG lambda
with light chain
proteinuria and
a paraspinal
plasmacytoma



Complete
remission at BM



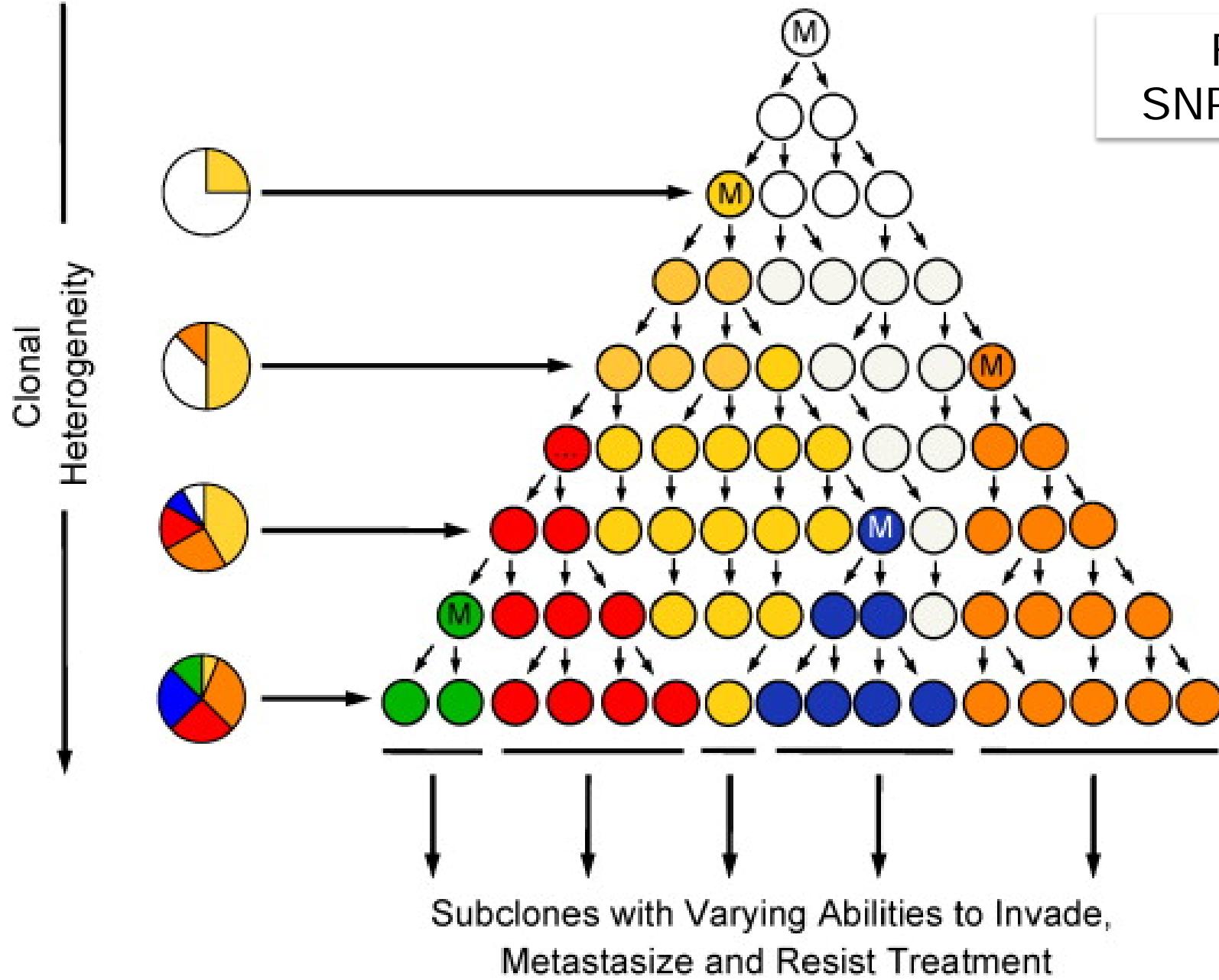
t(4;14)
Monosomy 13

Extramedullary
plasmacytomas
appeared during
therapy and were
refractory to every
line of treatment



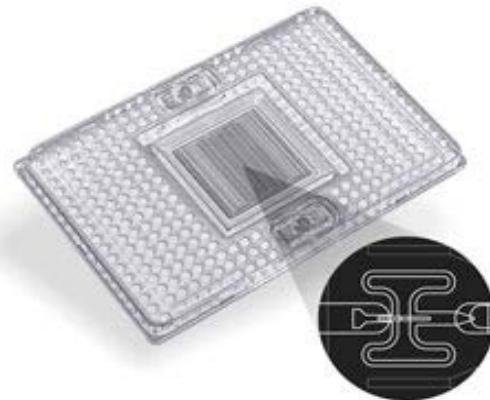
t(4;14)
Monosomy 13
17p deletion

FISH
SNP arrays



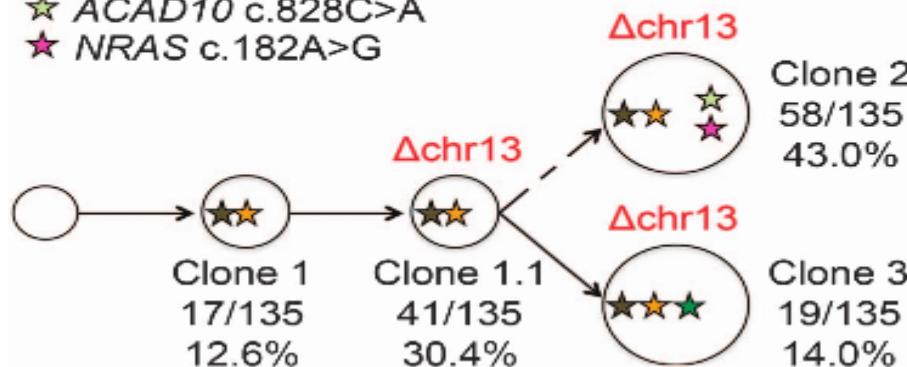
Intraclonal heterogeneity demonstrated by Massively Parallel Sequencing

Single cell genetic analysis



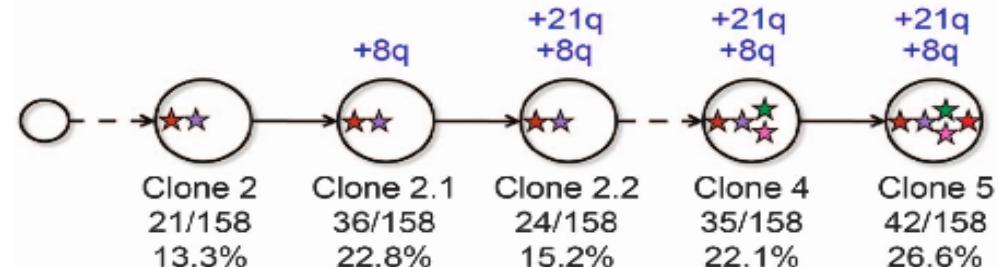
- ★ *TRPA1* c.2272C>T
- ★ *PCDH15* mutation*
- ★ *STK24* c.12200C>T
- ★ *ACAD10* c.828C>A
- ★ *NRAS* c.182A>G

Branching evolution



- ★ *ATM* c.428A>G
- ★ *KLK8* c.356A>G
- ★ *POLE* c.776G>A
- ★ *GMEB1* c.478A>T
- ★ *KRAS* c.182A>G

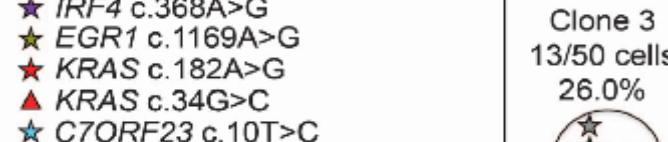
Linear evolution



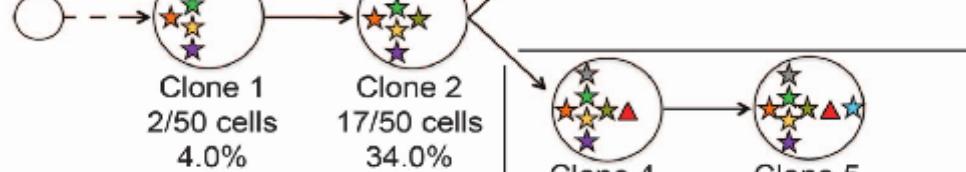
Parallel evolution

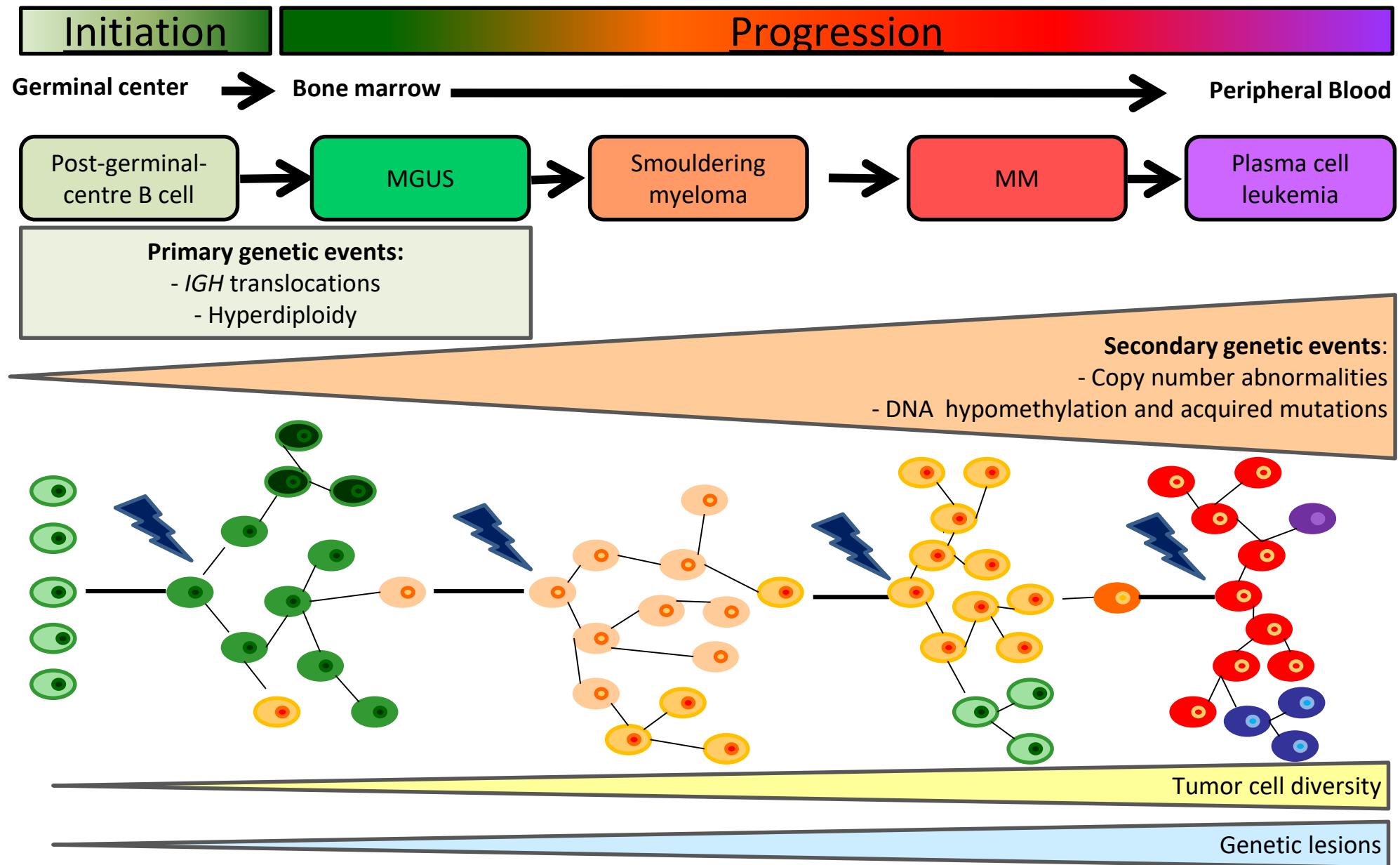
- ★ t(11;14)
- ★ *CYP4A22* c.356C>T
- ★ *LRRK1* c.2116T>A
- ★ *MUC16* c.42872A>G
- ★ *IRF4* c.368A>G
- ★ *EGR1* c.1169A>G
- ★ *KRAS* c.182A>G
- ▲ *KRAS* c.34G>C
- ★ *C7ORF23* c.10T>C

KRAS c.182A>G clone lineage



KRAS c.34G>C clone lineage



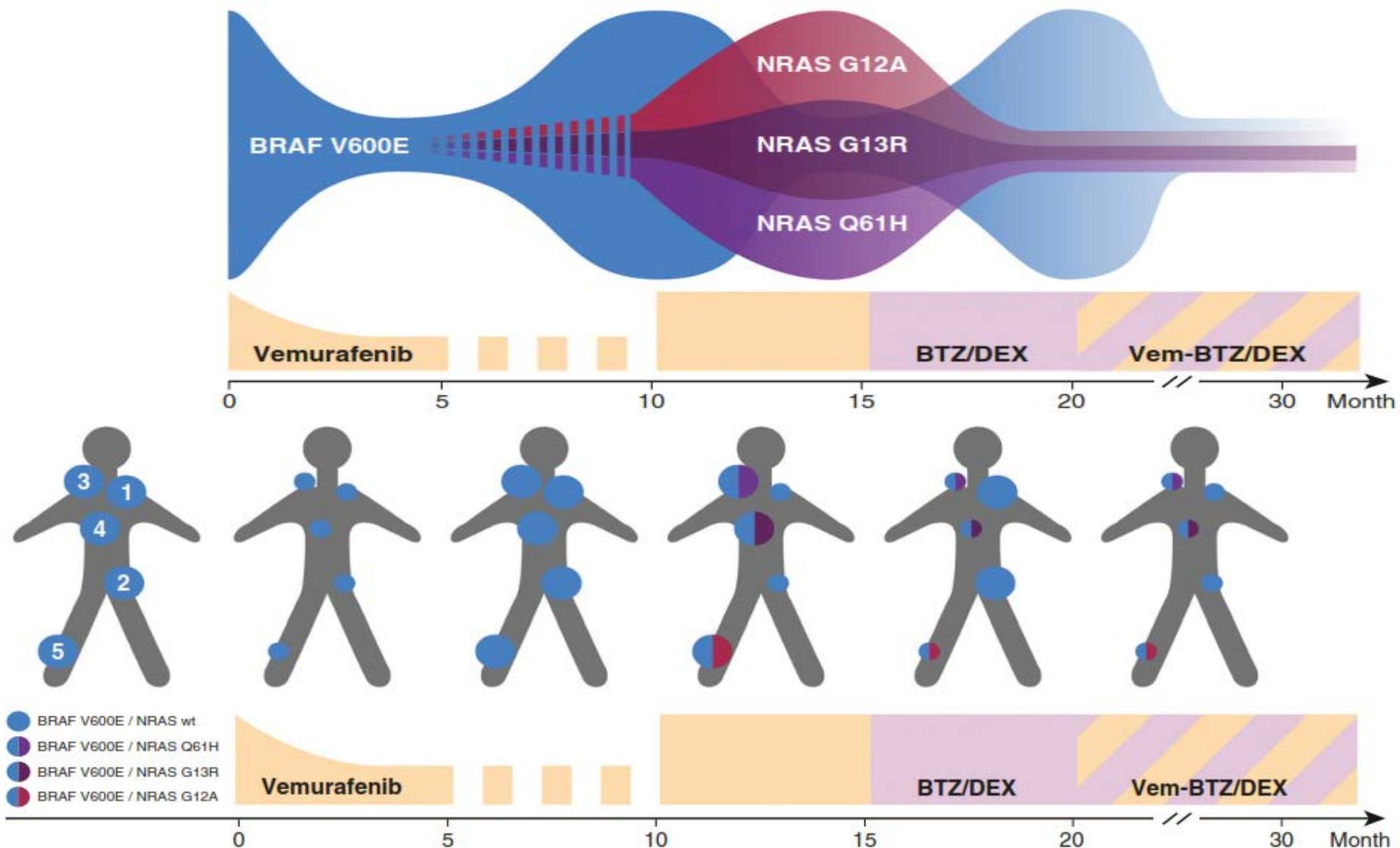


The impact of genomic diversity and intra-clonal heterogeneity on the treatment of myeloma

Challenge for cancer therapy

- ✓ Targeted therapy might have a paradoxically stimulatory effect on the subclones lacking the relevant mutation.
- ✓ Multi-drug combination with different mechanism of action in order to eradicate dominant as well as minor clones.
- ✓ Limitations of basing treatment decisions on the findings derived from a single bone marrow biopsy.

The clinical course and management of a patient with BRAF V600E-mutant MM developing resistance to treatment with vemurafenib



The impact of genomic diversity and intra-clonal heterogeneity on the treatment of myeloma

Challenge for cancer therapy

- ✓ Targeted therapy might have a paradoxically stimulatory effect on the subclones lacking the relevant mutation.
- ✓ **Multi-drug combination** with different mechanism of action in order to eradicate dominant as well as minor clones.
- ✓ Limitations of basing treatment decisions on the findings derived from a single bone marrow biopsy.



DNA

Genome



Transcription



mRNA

Transcriptome



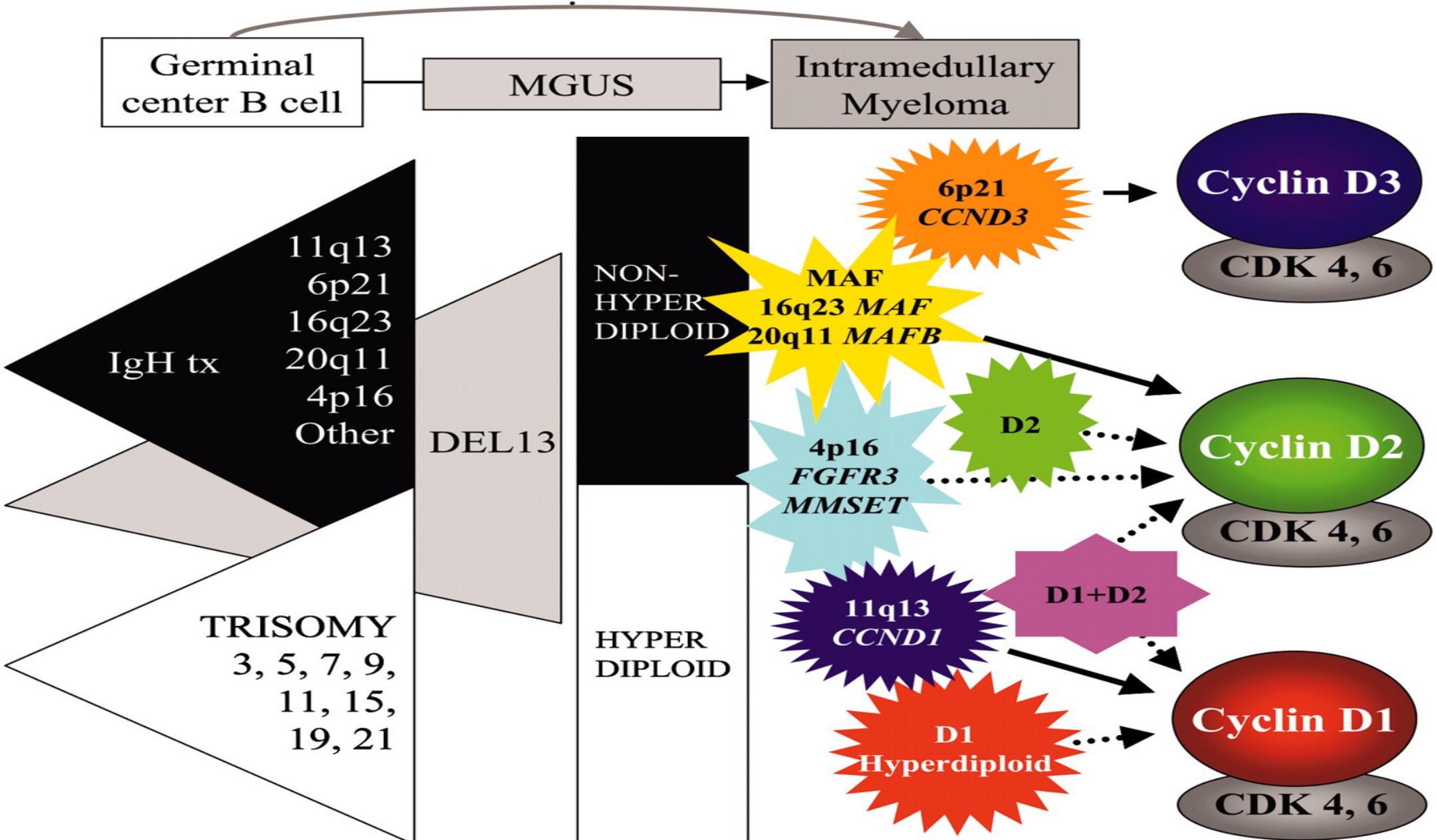
Translation



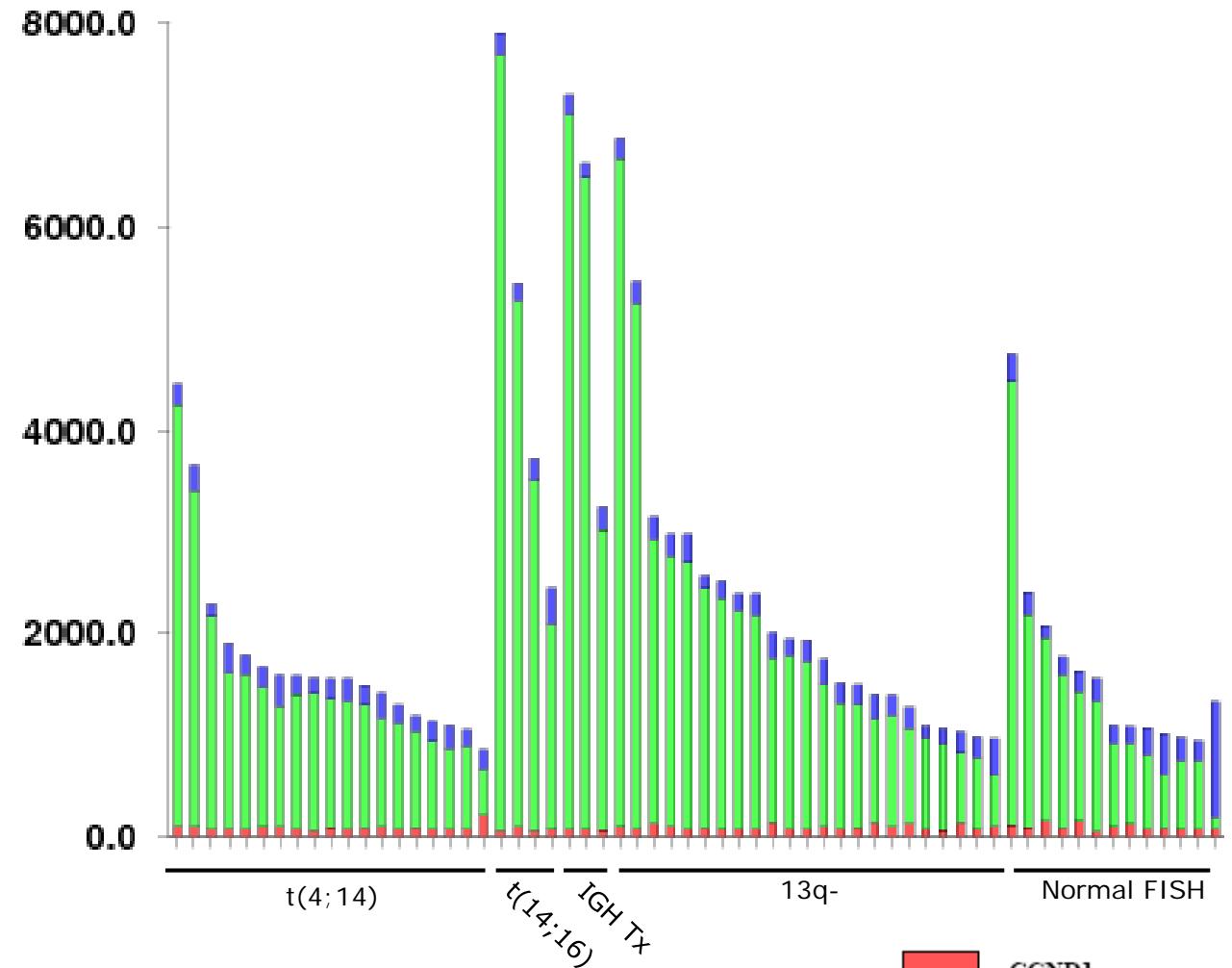
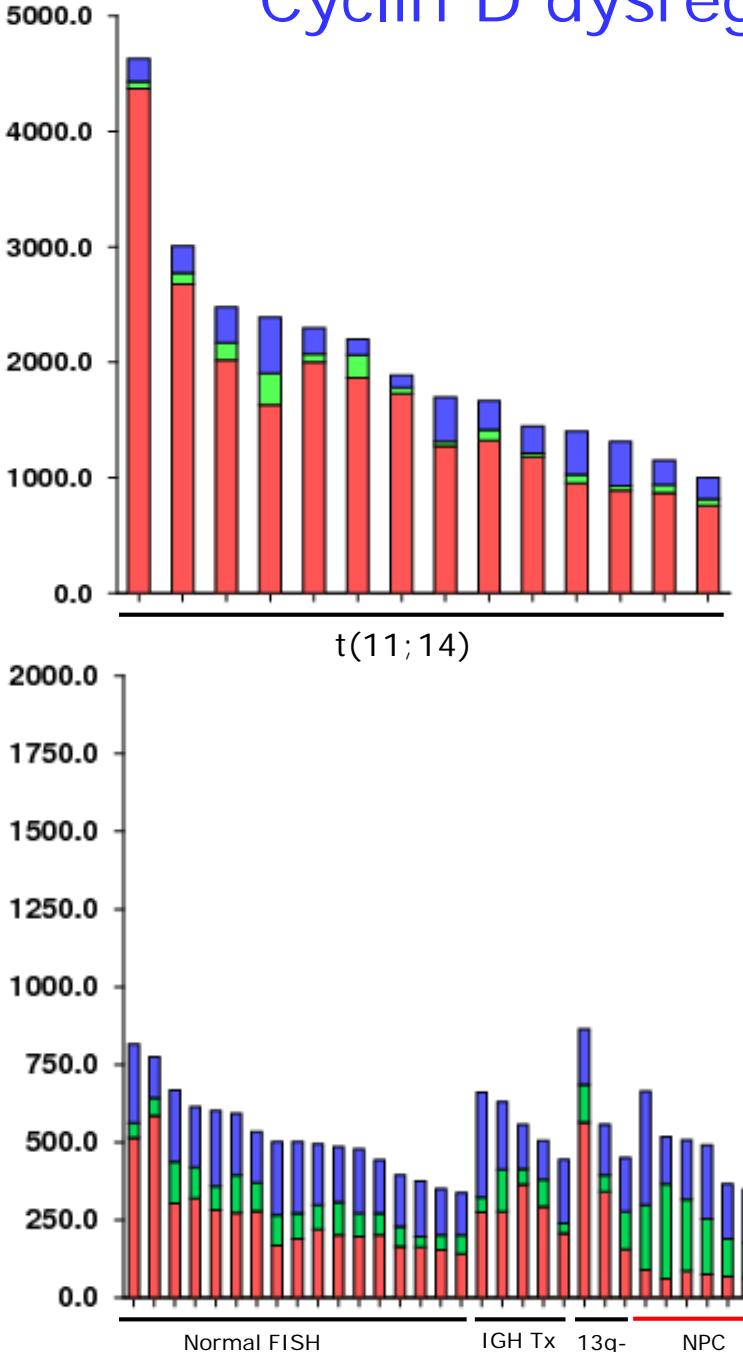
Protein

Proteome

Cyclin D dysregulation: an early and unifying pathogenic event



Cyclin D dysregulation in 100 myeloma samples



**Expression by
microarray analysis**

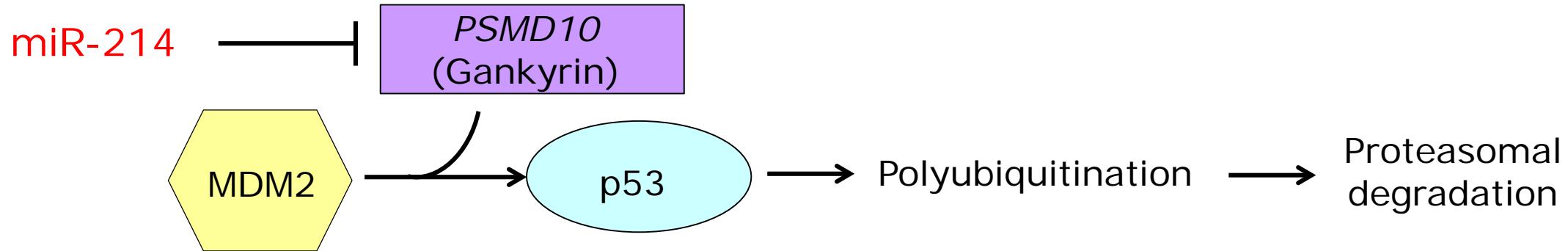
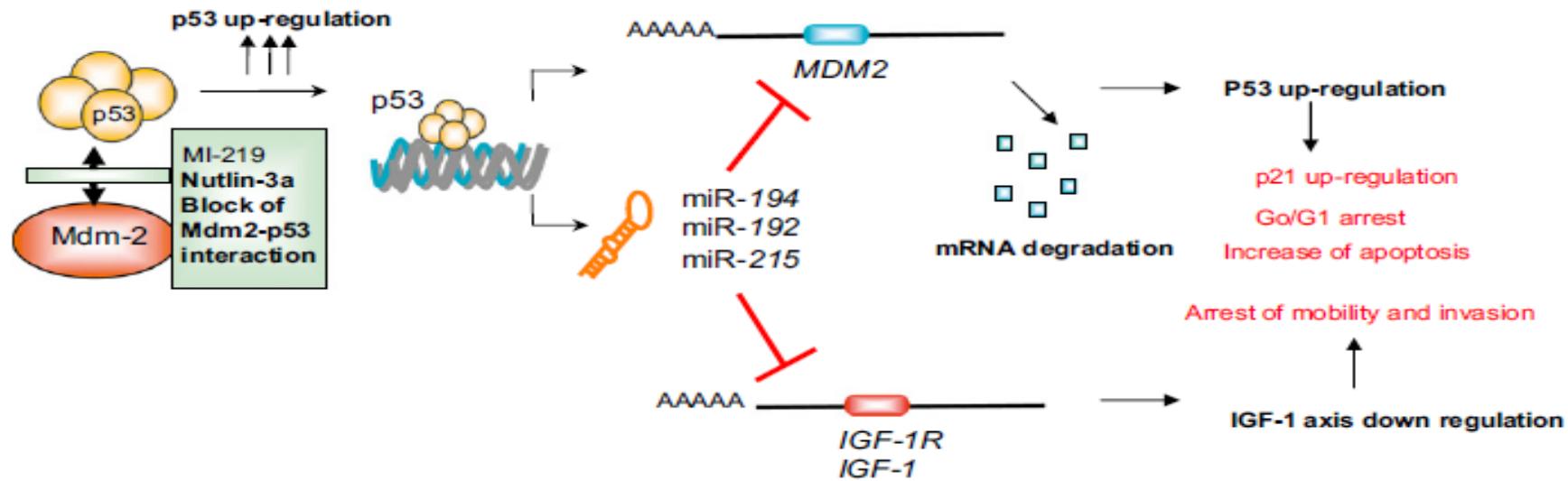
- CCND1
- CCND2
- CCND3

Post-Transcriptional Modifications Explain the Overexpression of CCND2 in Multiple Myeloma

- ✓ CCND2 is highly expressed in most of the multiple myeloma samples without CCND1 or CCND3 overexpression
- ✓ The mechanisms by which CCND2 is upregulated in a set of MMs are not completely deciphered
- ✓ Role of post-transcriptional regulation through the interaction between miRNAs and their binding sites at 3'UTR in CCND2 overexpression in MM

P53 inactivation induced by the deregulation of miRNAs targeting P53

miR-192, 215, and 194 Impair the p53/MDM2 Autoregulatory Loop





DNA

Genome



Transcription



mRNA

Transcriptome



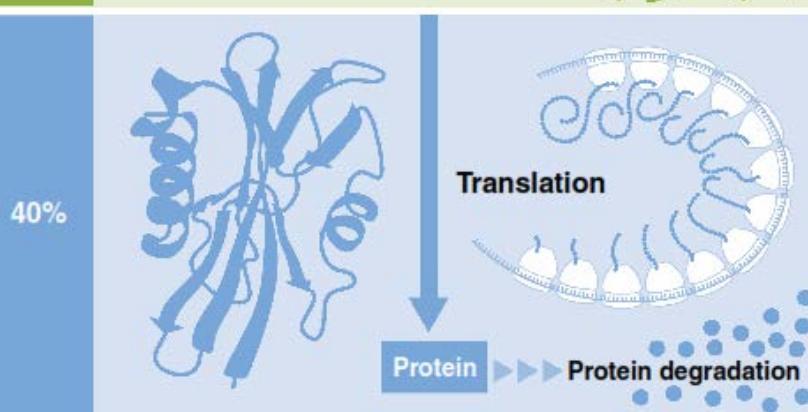
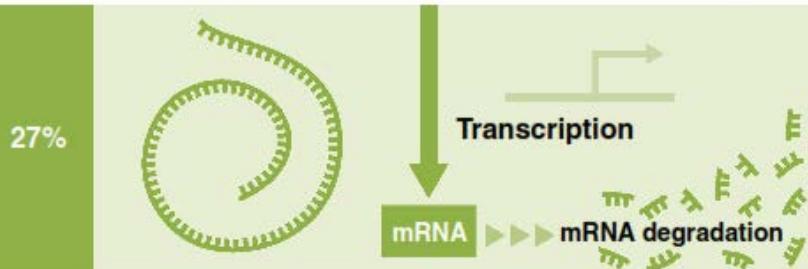
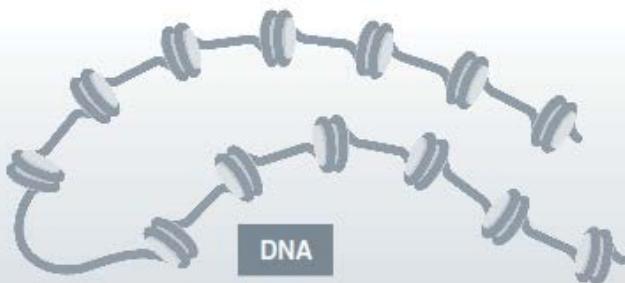
Translation



Protein

Proteome

Relative influence of transcriptional and translational regulation on protein abundance



The unresolved difficulties in studying the proteome have made the quantification of messenger RNA (mRNA) an indirect measure of protein expression, although many studies have shown that protein levels cannot be predicted from mRNA measurements



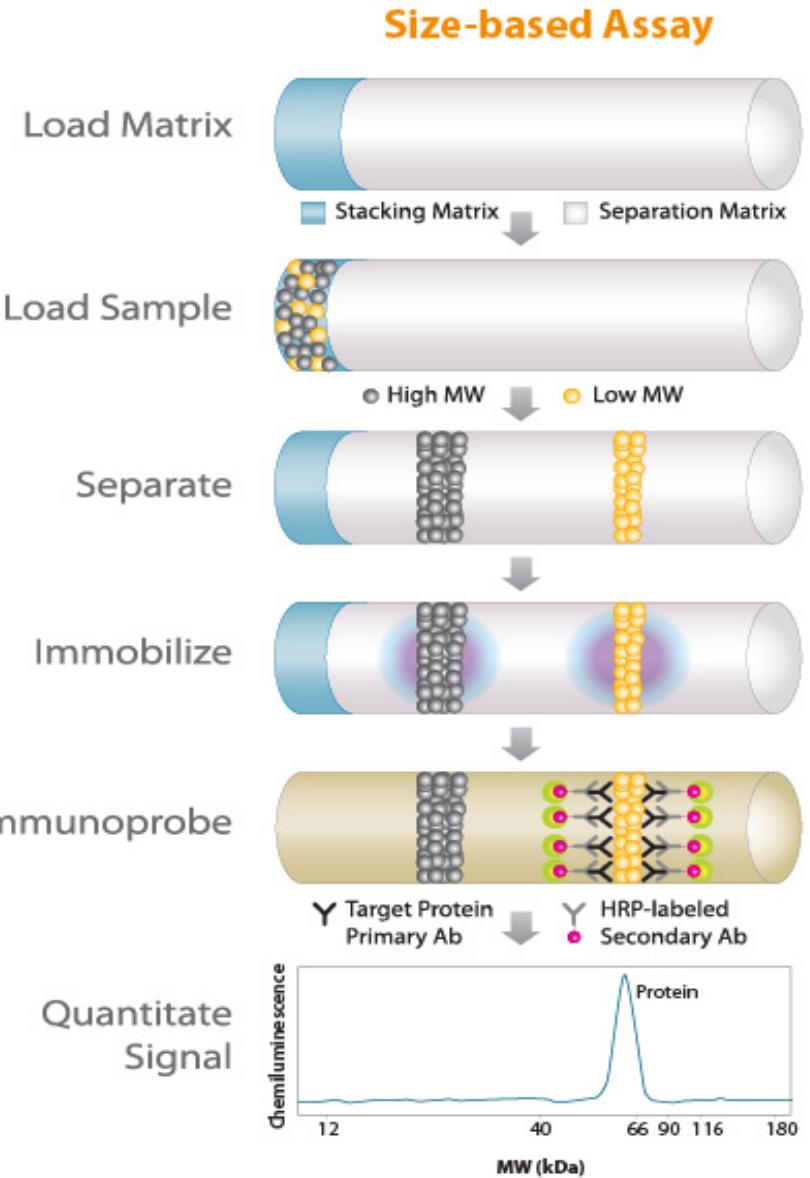
mRNA levels cannot be used as surrogates for protein levels

Combination of capillary electrophoresis with immunoassay

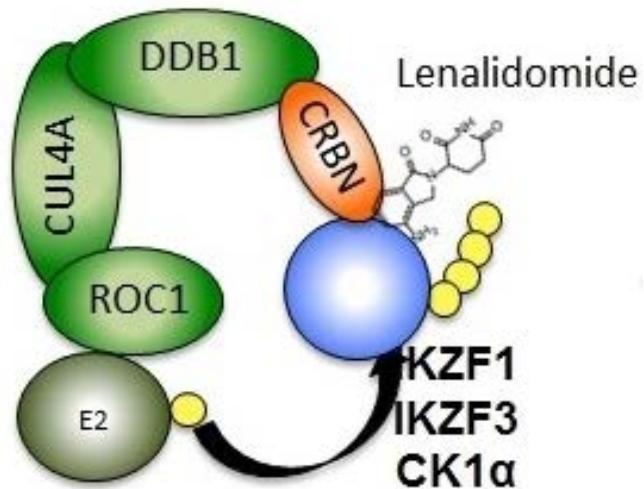
Simple Western



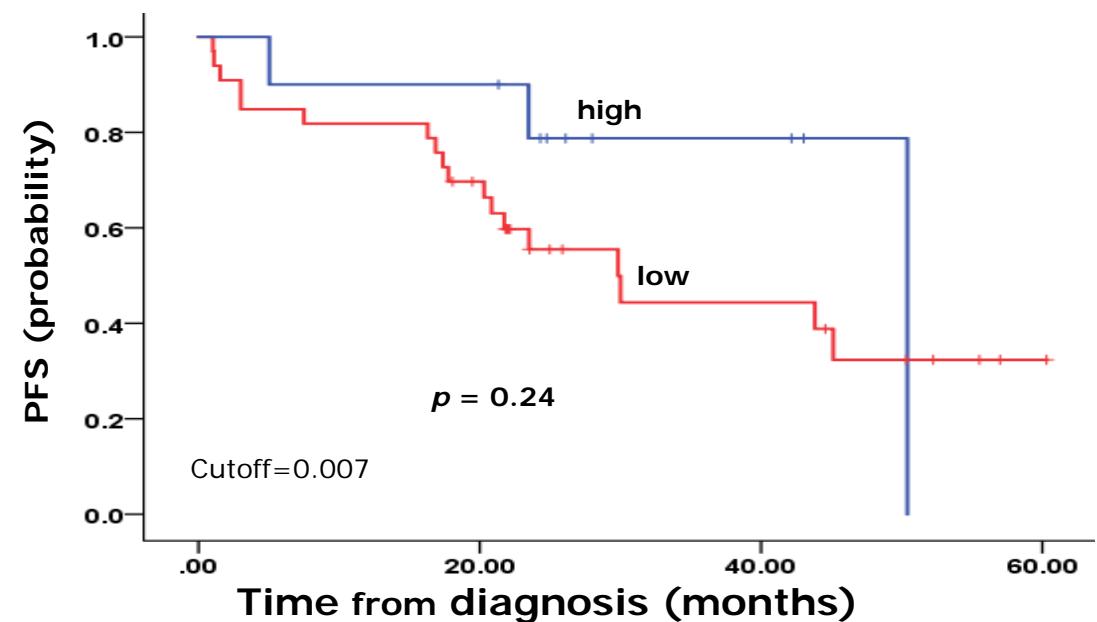
Sufficient protein to analyze over 50 proteins from one single MM sample.



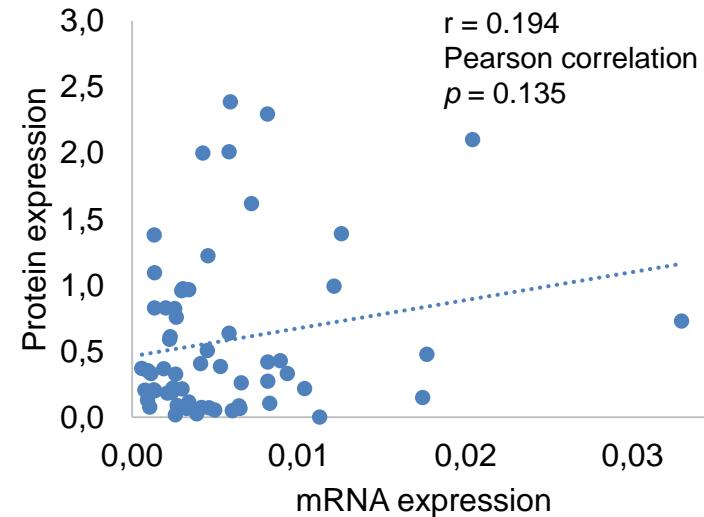
Cereblon (CRBN)



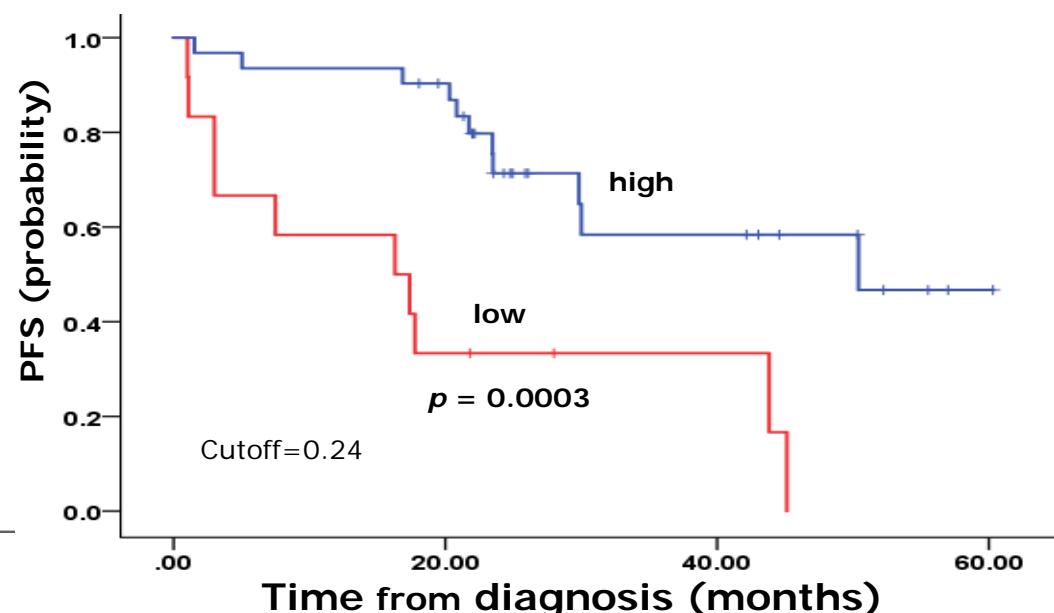
CRBN mRNA



Cereblon

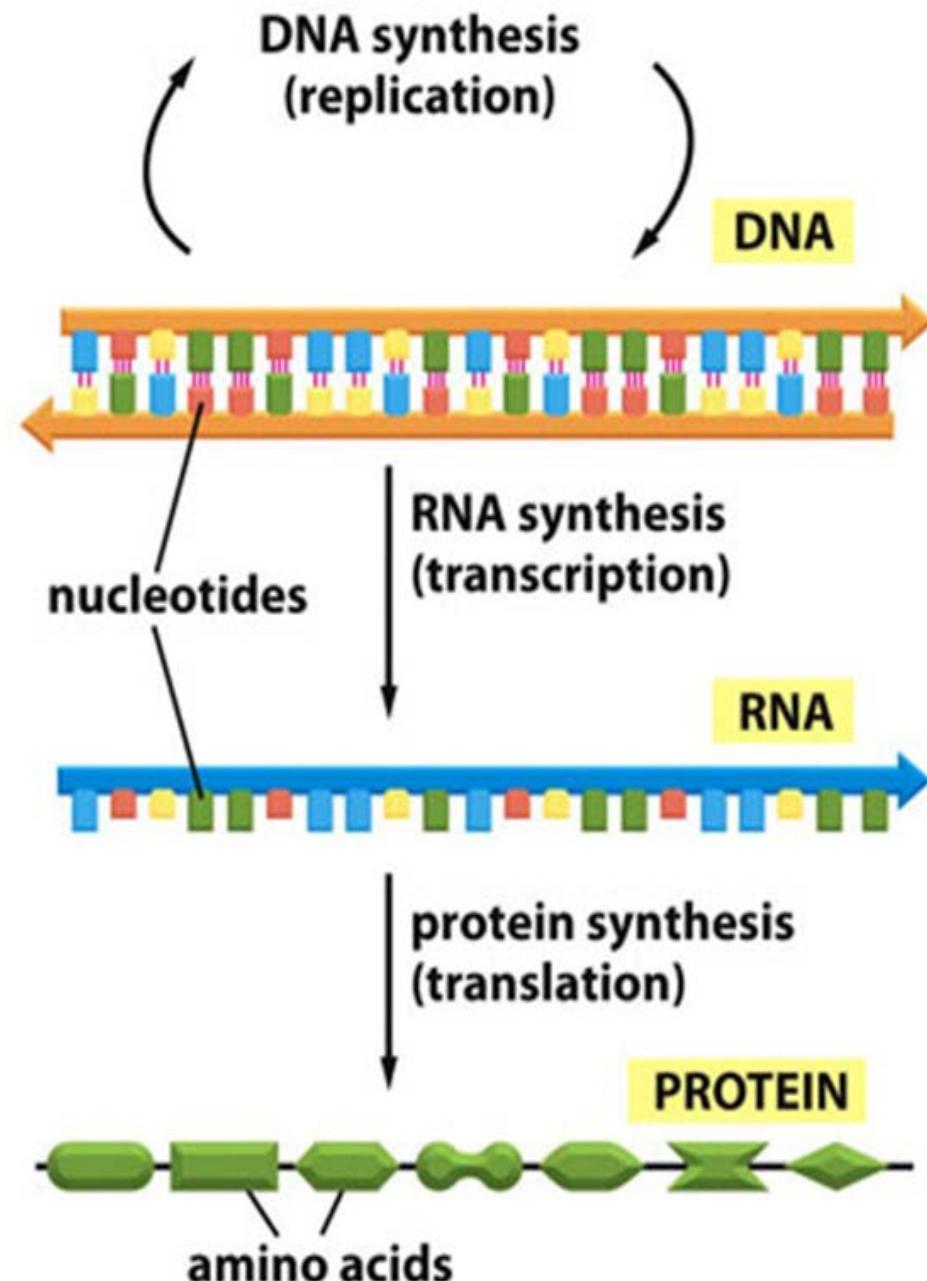


CRBN protein

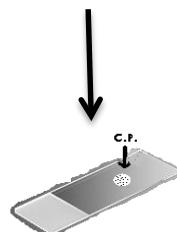
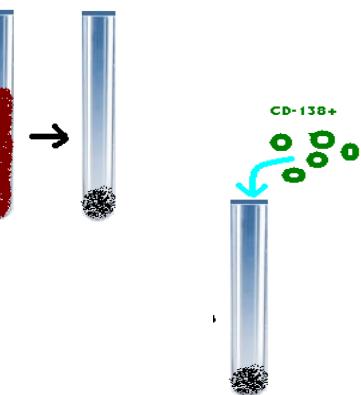


Central Dogma of Molecular Biology

"Genomics involves the study of all genes at the DNA, mRNA, and proteome level as well as the cellular or tissue level"



Methodology overview: everything from the same ONE sample



FISH

CD138+
in RLT+
-80°C
for years

AllPrep
(Qiagen)

In-house
protocol

DNA

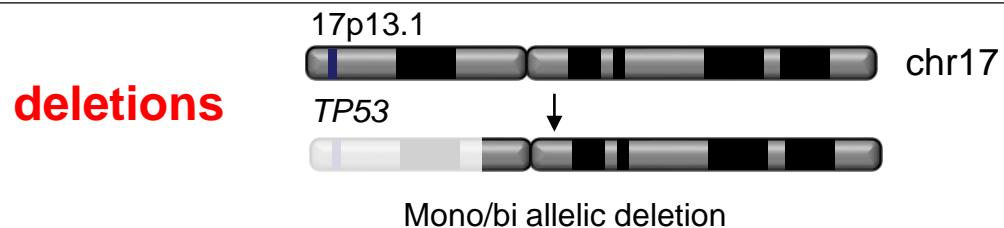
RNA

protein

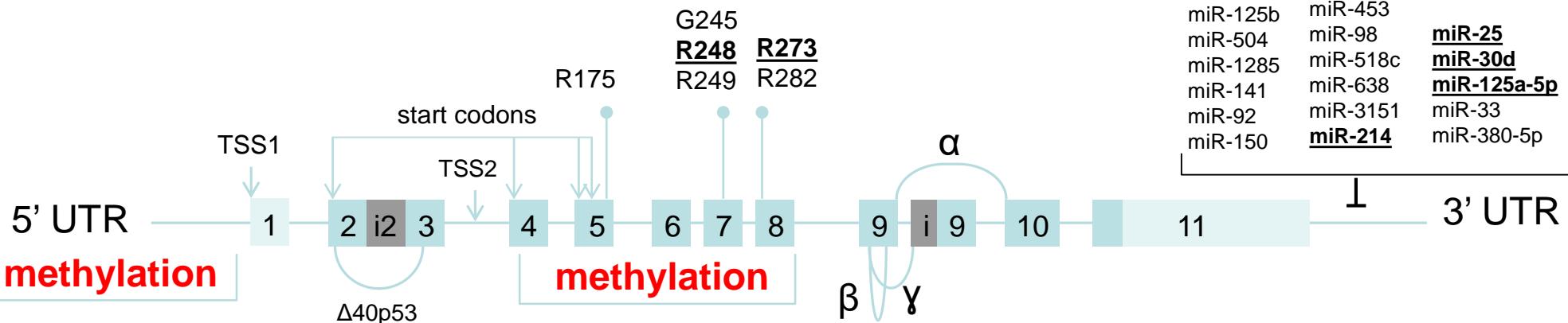
SNP arrays,
NGS, epigenetic
analysis

GEP, RNA seq, qRT-
PCR, mRNA
isoforms analysis,
posttranscriptional
modifications

Simple western
for expression
level and isoform
identification

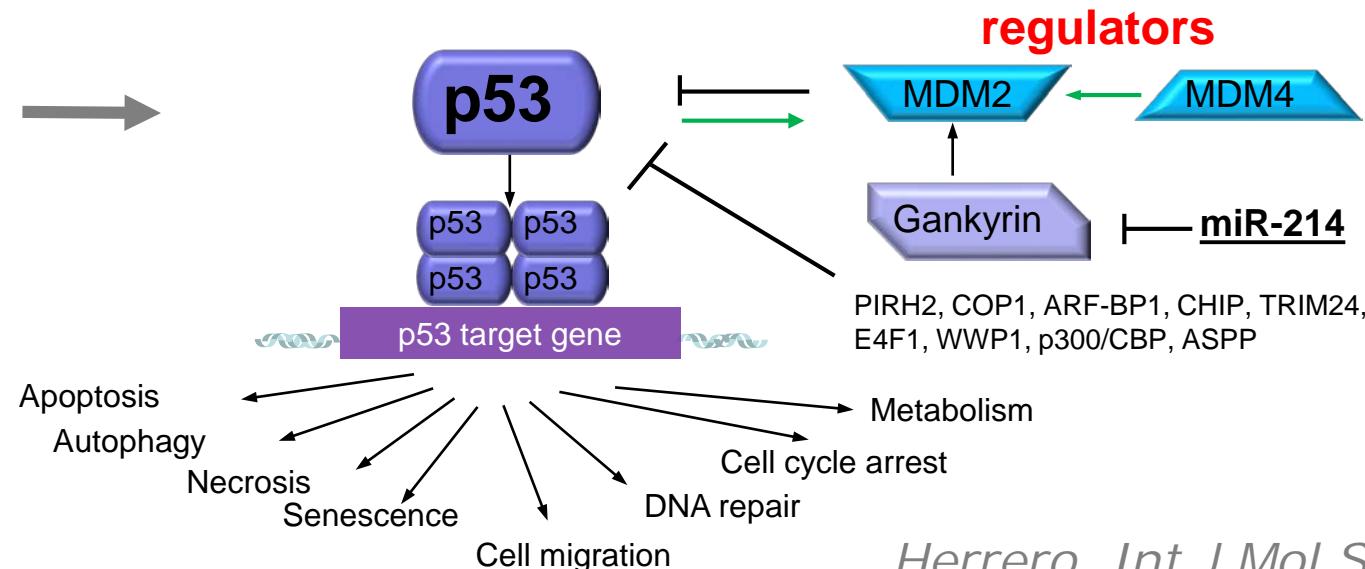


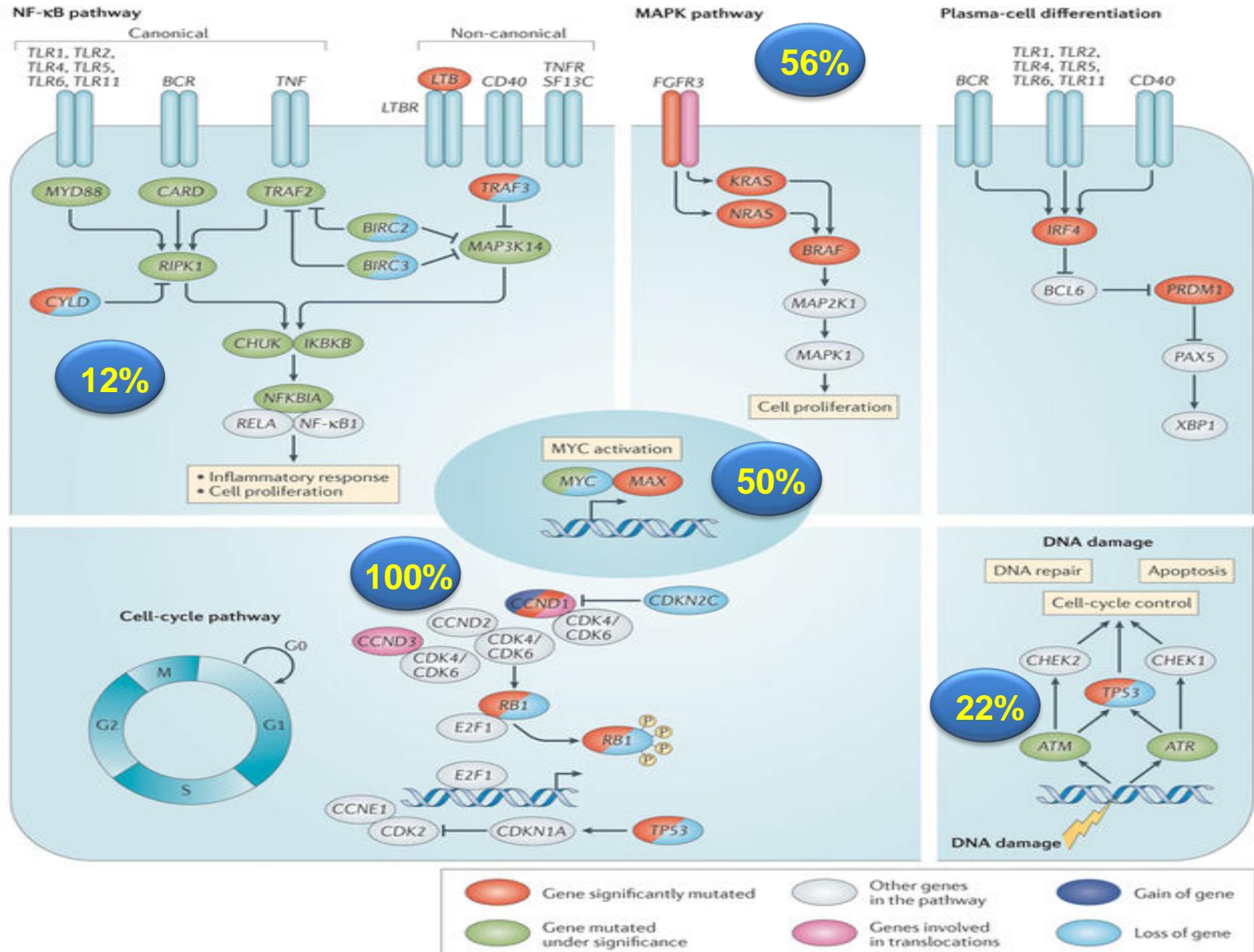
mutations



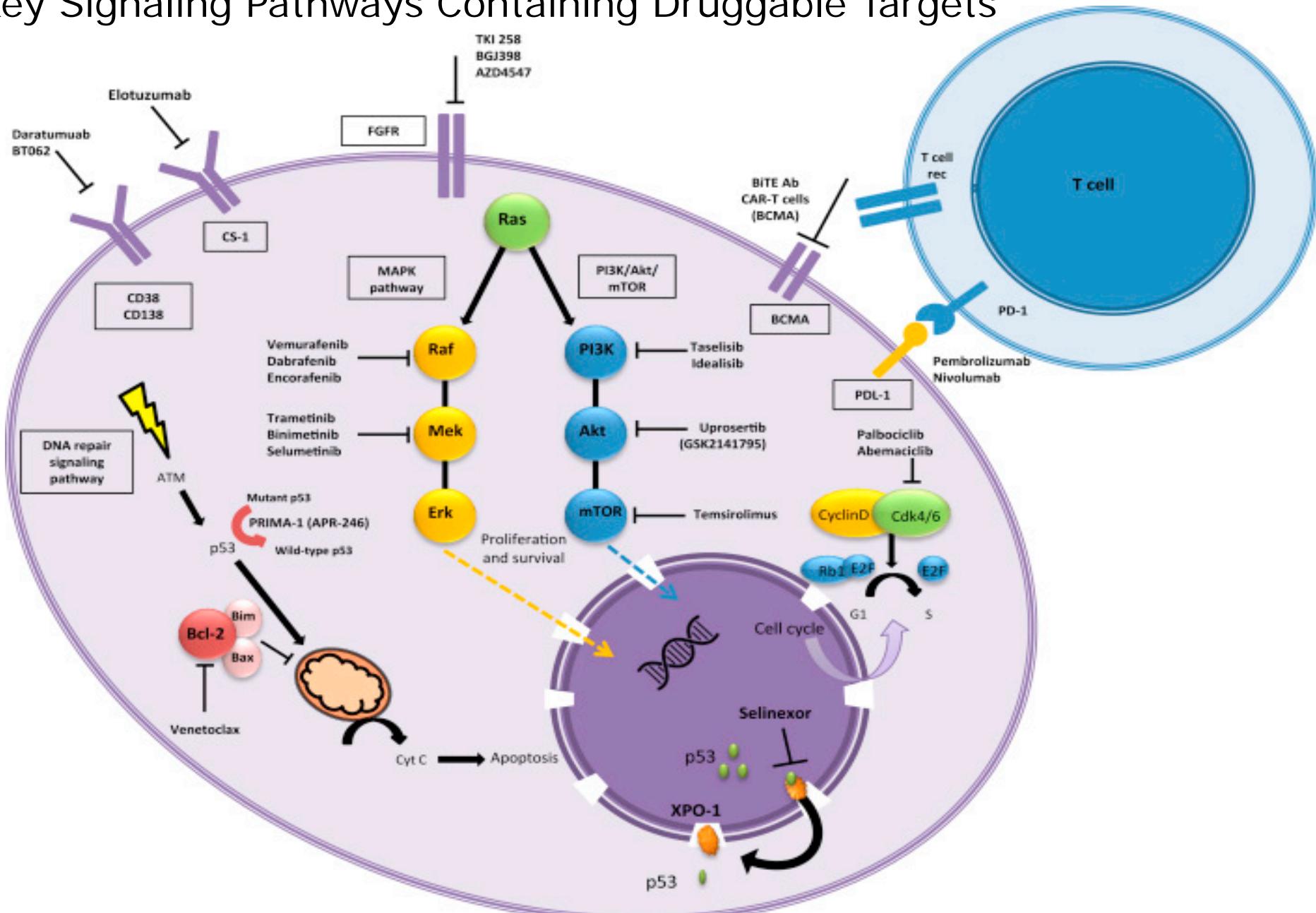
p53 isoforms

- p53 α (p53 wt)
- Δ 40p53 α
- Δ 133p53 α
- Δ 160p53 α
- p53 β
- Δ 40p53 β
- Δ 133p53 β
- Δ 160p53 β
- p53 γ
- Δ 40p53 γ
- Δ 133p53 γ
- Δ 160p53 γ





Key Signaling Pathways Containing Druggable Targets



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www.hematosalamanca.es

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