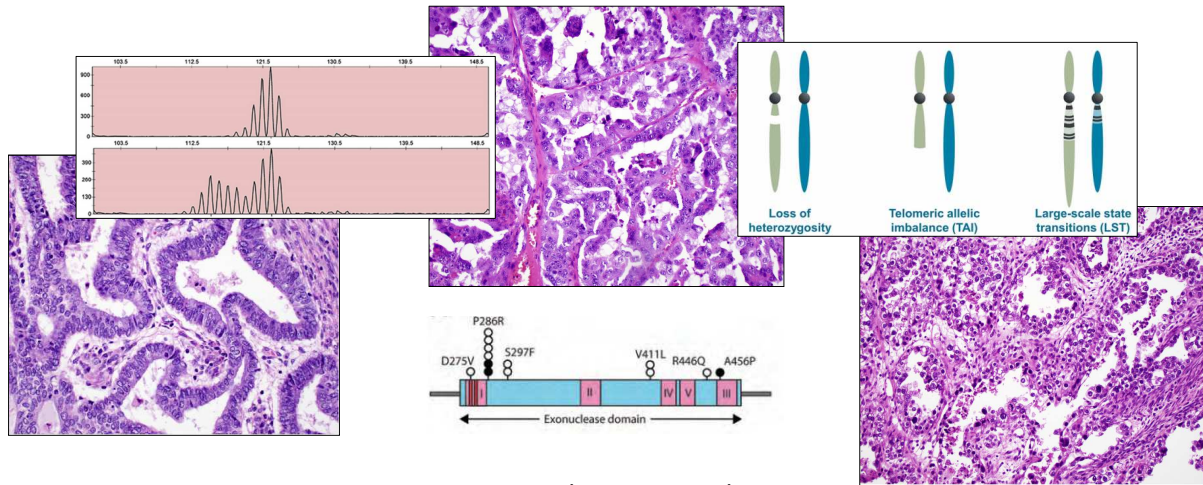


Molecular diagnostics of gynecologic tumors



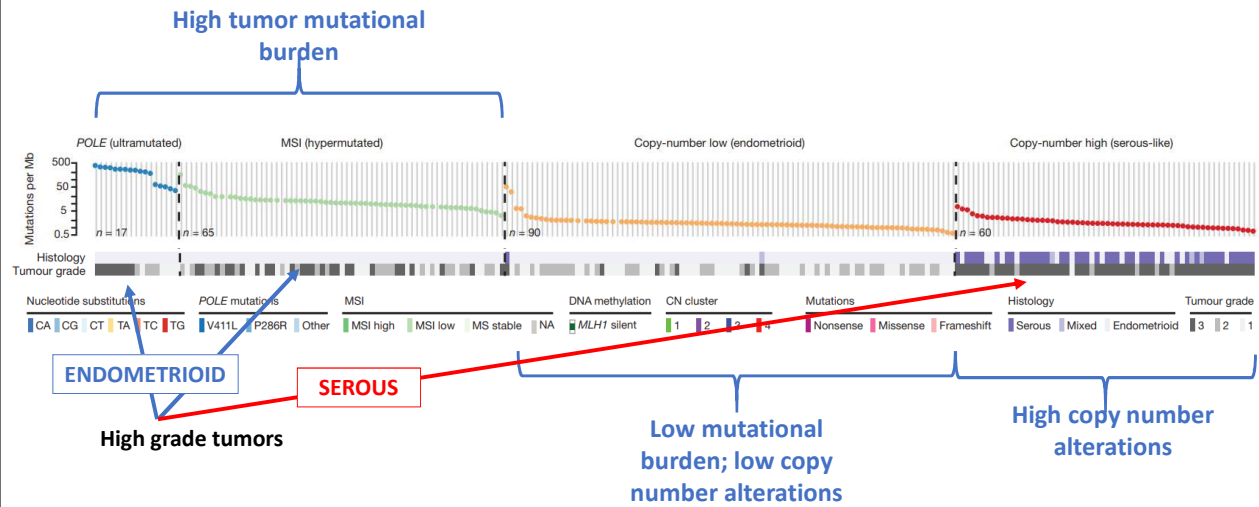
Lauren Ritterhouse, MD, PhD

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Department of Pathology, Massachusetts General Hospital

Outline

- Uterine tumors
 - Endometrial
 - Molecular classification
 - *POLE* mutated
 - Microsatellite unstable (MSI/dMMR)
 - Copy number high
 - Copy number low
 - Malignant Mesenchymal Neoplasms
 - Leiomyosarcoma
 - Endometrial Stromal Sarcoma
 - Ovarian tumors
 - Serous carcinomas
 - Homologous recombination deficiency (HRD)
 - Endometrioid/Clear cell carcinomas
 - Inherited gynecologic tumors

Endometrial carcinomas: Molecular classification



TCGA Nature. 2013 May 2;497(7447):67-73.

Endometrial carcinomas: Molecular classification

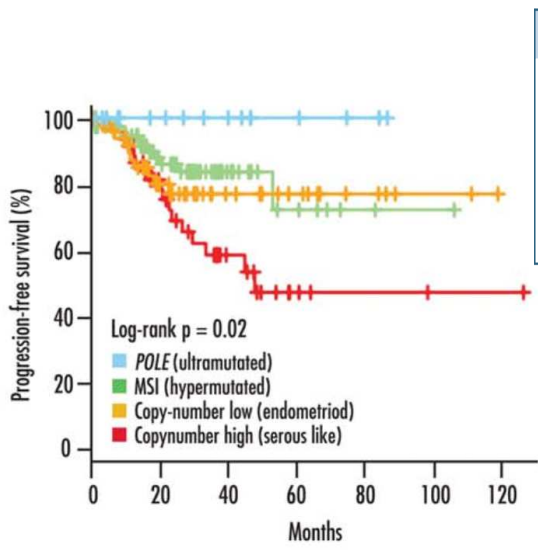
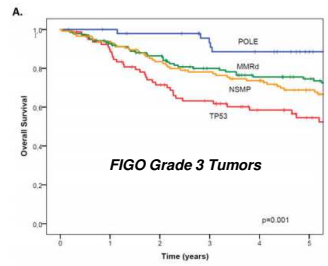


Table 1
TCGA molecular subtypes of endometrial carcinoma

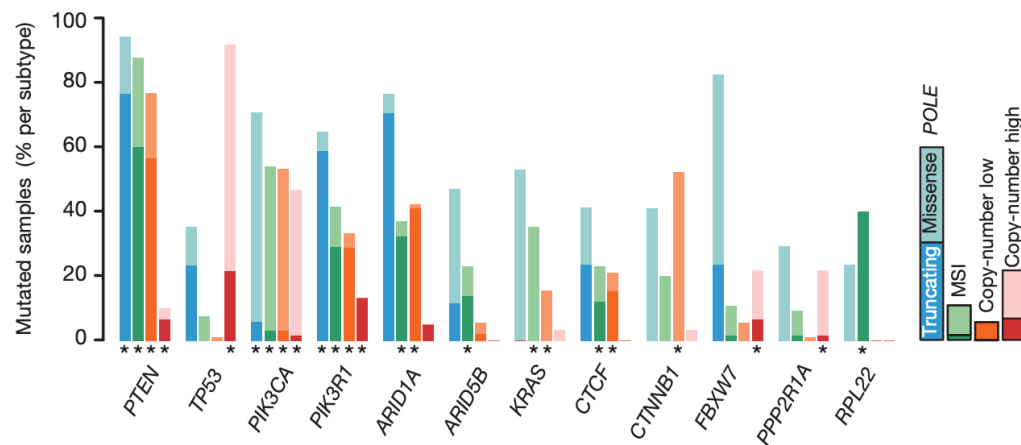
	Histotypes	Number of Mutations	Copy Number Alterations	Specific Genes Recurrently Altered
POLE-mutated (ultramutated)	Endometrioid (G3 > G2-1)	Very high	Low	POLE, PTEN, PIK3R1, PIK3CA, FBXW7, KRAS, TP53
MSI (hypermuted)	Endometrioid (G2-3 > G1)	High	Variable (low to intermediate)	PTEN, KRAS, ARID1A
Copy number: low	Endometrioid (G1-2 > G3)	Low	Variable (low to intermediate)	CTNNB1, PTEN
Copy number: high (serous-like)	Serous	Low	High	TP53, FBXW7, PPP2R1A



Am J Surg Pathol. 2018 May; 42(5): 561–568.

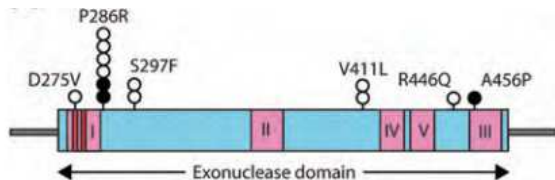
Surg Pathol Clin. 2016 Sep;9(3):405-26.
TCGA Nature. 2013 May 2;497(7447):67-73.

Endometrial carcinomas: Molecular classification



TCGA Nature. 2013 May 2;497(7447):67-73.

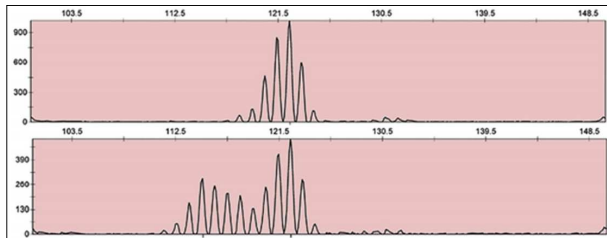
Endometrial carcinomas: *POLE*-mutated



<i>POLE</i> -mutated Carcinomas (Key Points)		
Molecular Features	Morphologic Features	Clinical Features
Ultramutated (mutation rate: median 232 mutations per megabase pair) Minimal CNVs Mutation in the exonuclease domain of <i>POLE</i> (hotspots at P286R and V411L) Increased C > A transversion frequency <i>PTEN</i> , <i>PIK3R1</i> , <i>PIK3CA</i> , <i>FBXW7</i> , <i>KRAS</i> mutations common <i>TP53</i> mutation common, rare indels Increased predicted neoantigen load Majority are microsatellite stable	Endometrioid, but may have high-grade features bordering on serous carcinoma (nuclear atypia) Eosinophilic cytoplasm Lymphovascular invasion common Increased tumor infiltrating lymphocytes levels Higher mitotic index	5%–10% of all endometrial carcinomas Wide age range Favorable prognosis in most studies

[Hum Mol Genet.](#) 2013 Jul 15;22(14):2820-8.
[Surg Pathol Clin.](#) 2016 Sep;9(3):405-26.

Endometrial carcinomas: Microsatellite Instability

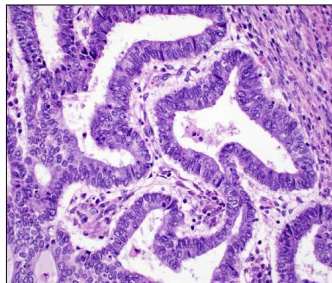


MSI (Hypermutated) (Key Points)

Molecular Features	Morphologic Features	Clinical Features
Hypermutated (mutation rate: median 18 mutations per megabase pair; 10-fold higher than MSS tumors) C > T at NpCpG sites and numerous small indels Low numbers of CNVs <i>KRAS</i> , <i>ARID1A</i> , <i>ARID5B</i> , <i>PTEN</i> mutations <i>RPL22</i> deletions Few <i>TP53</i> , <i>FBXW7</i> , <i>CTNNB1</i> , <i>PPP2R1A</i> mutations <i>MLH1</i> hypermethylation Increased predicted neoantigen load	Most are endometrioid FIGO grades 2–3 > grade 1 Increased TIL levels	Subset are caused by hereditary endometrial cancer (Lynch syndrome) 20%–40% of all endometrial carcinomas Prognosis similar to low copy number; intermediate between <i>POLE</i> -mutated and high-copy-number carcinomas

[Surg Pathol Clin.](#) 2016 Sep;9(3):405-26.

Endometrial carcinomas: Low Copy Number

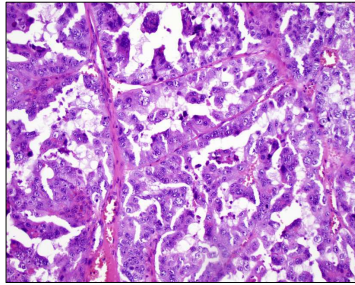


Low Copy Number (Key Points)

Molecular Features	Morphologic Features	Clinical Features
Few CNVs Few SNVs Frequent <i>CTNNB1</i> mutations (>50%), only gene mutated more frequently in low-copy-number group compared with MSI group <i>PTEN</i> , <i>PIK3CA</i> , <i>PIK3R1</i> , and <i>ARID1A</i> are common mutations	Endometrioid, predominantly FIGO grade 1–2	Most common subtype Prognosis similar to MSI; intermediate between <i>POLE</i> -mutated and high-copy-number carcinomas

[Surg Pathol Clin.](#) 2016 Sep;9(3):405-26.

Endometrial carcinomas: High Copy Number



High Copy Number (Key Points)		
Molecular Features	Morphologic Features	Clinical Features
High levels of CNVs Low numbers of SNVs Frequent TP53 mutation (>90%) <i>PIK3CA</i> , <i>FBXW7</i> , <i>PPP2R1A</i> mutations Uncommon <i>PTEN</i> and <i>ARID1A</i> mutations Gene amplifications: <i>CCNE1</i> , <i>MYC</i> , <i>PIK3CA</i> , <i>CDKN2A</i> , <i>ERBB2</i>	Predominantly serous histotype Prominent nuclear atypia Subset of high-grade endometrioid carcinoma (FIGO grade 3)	Older age at presentation Higher stage at presentation Poor prognosis

[Surg Pathol Clin](#). 2016 Sep;9(3):405-26.

Endometrial carcinomas: Prognostic/Predictive biomarkers

Key Points PROGNOSTIC BIOMARKERS IN UTERINE CANCER		
Biomarker	Histotype	Prognosis
High copy number	Serous, high-grade endometrioid	Worse PFS
ER/PR loss	All	Worse DSS
<i>TP53</i> mutation	All	Worse PFS and DSS
<i>PIK3CA</i> mutation	High-grade endometrioid	Worse DSS
<i>CCNE1</i> amplification	High-grade endometrioid	Worse PFS and OS
<i>POLE</i> mutation	Endometrioid	Improved PFS

Abbreviations: DSS, disease-specific survival; OS, overall survival; PFS, progression-free survival.

FDA NEWS RELEASE

FDA approves first cancer treatment for any solid tumor with a specific genetic feature

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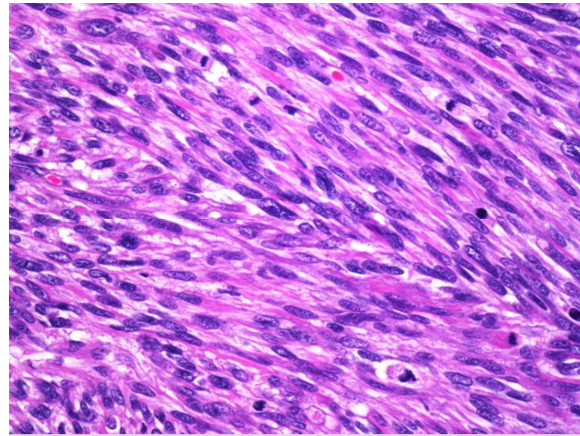
For Immediate Release: May 23, 2017

FDA approved **pembrolizumab** on May 23, 2017, for the treatment of adult and pediatric patients with: unresectable or metastatic, microsatellite instability-high (**MSI-H**) or mismatch repair deficient (**dMMR**) solid tumors
progressed following prior treatment
who have no satisfactory alternative treatment options

[Surg Pathol Clin](#). 2016 Sep;9(3):405-26.

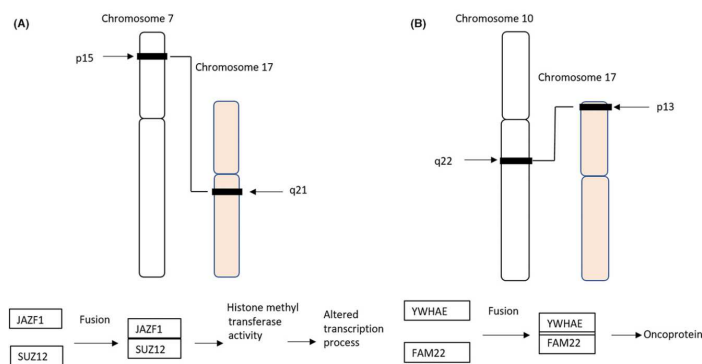
Mesenchymal Tumors: Leiomyosarcomas

- Markedly complex karyotypes
- Recurrent karyotypic alterations include **gain** of **1q**, **17p**, and **Xp**
- Loss of heterozygosity for **10q** (containing *PTEN*) and/or **13q** (containing *RB1*) is present in greater than 50% of LMS
- *TP53* mutations may also be present in greater than 50% of cases

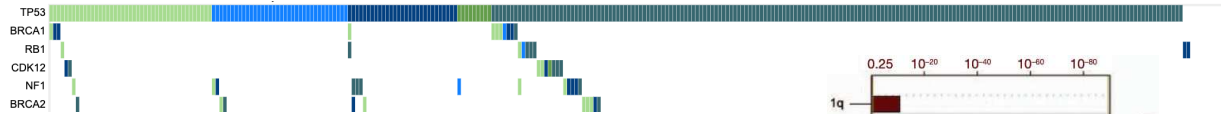


Mesenchymal Tumors: Endometrial Stromal Sarcoma

- Highly recurrent translocations resulting in gene fusions
- *JAZF1-SUZ12* is the most common gene fusion in low-grade (LG) ESS (25% to >90% of cases)
- *JAZF1-PHF1* gene fusion, is present in up to 28% of ESS
- Small subset of ESS may have *PHF1* rearrangements resulting in fusion with genes other than *JAZF1* or *MEAF6*, most notably *EPC1* on 10p11
- *YWHAE-FAM22A/B* gene fusions high-grade ESS (HGESS)



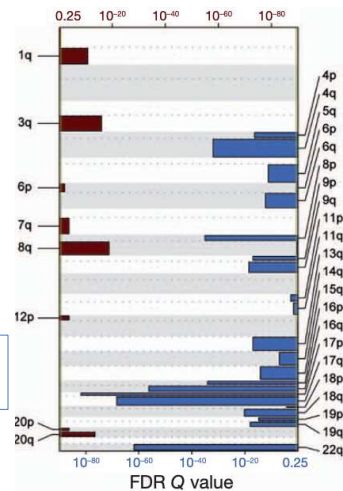
High Grade Serous Ovarian Carcinoma



Significantly mutated genes in HGS-OvCa

- *TP53* 96%
- *BRCA1*, *BRCA2* 11-12%
- *NF1* 4%
- *RB1* 2%
- *CDK12* 3%

Numerous copy number alterations



[Nature](#), 2011 Jun 29;474(7353):609-15.

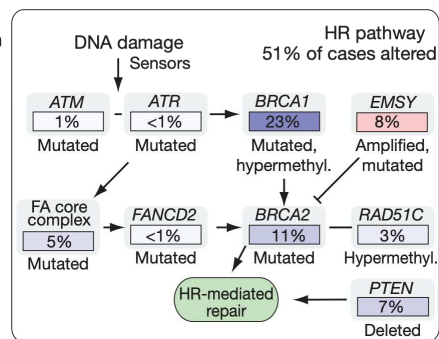
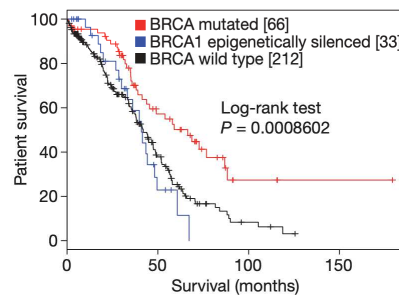
High Grade Serous Ovarian Carcinoma: Homologous Recombination Deficiency

c HR alterations

BRCA altered cases, *N* = 103 (33%)

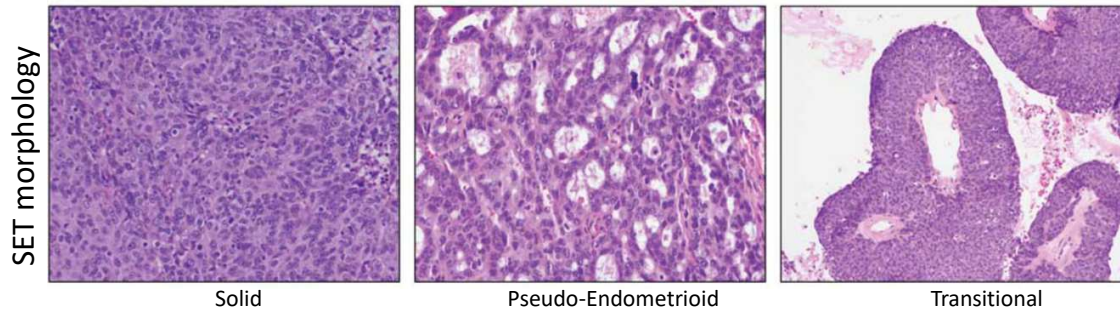


Germline mutation Somatic mutation Epigenetic silencing via hypermethylation



[Nature](#), 2011 Jun 29;474(7353):609-15.

High Grade Serous Ovarian Carcinoma: Molecular / Morphologic Correlation



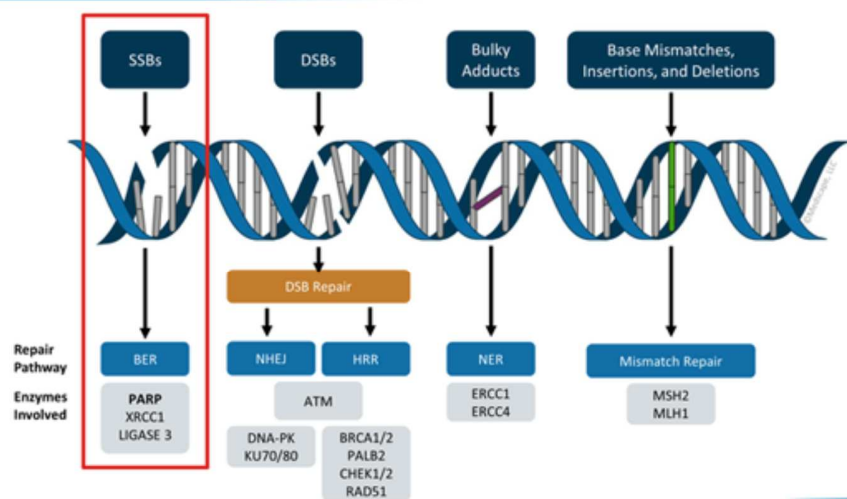
Histotype	HR	BRCA1/2	Non-BRCA HR
High-grade serous carcinoma (n = 138)	45%	25%	10%
Classic (n = 40)	28%	8%	8%
Non-classic (n = 40)	70%	45%	10%
Endometrioid carcinoma (n = 12)	25%	0%	25%
Clear cell carcinoma (n = 10)	30%	20%	10%
Low-grade serous carcinoma (n = 7)	0%	0%	0%
Mucinous carcinoma (n = 4)	25%	25%	0%

ATM (6), BRIP1 (5), FANCC, FANCE, FANCG
ATM, FANCC, FANCE
ATM (2), BRIP1 (2)
ATM (2), RAD21
ATM

[Mod Pathol.](#) 2016 Aug;29(8):893-903.

[Mod Pathol.](#) 2012 Apr;25(4):625-36.

DNA Repair: Homologous Recombination

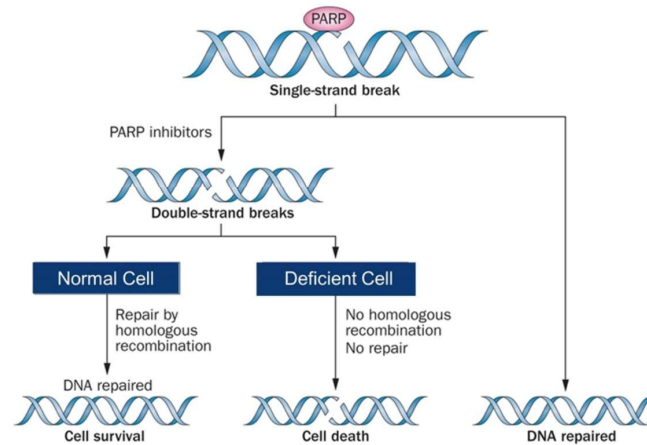


Lord CJ, Ashworth A. *Nature*. 2012;481:287-294; O'Connor MJ. *Mol Cell*. 2015;60:547-560.

Homologous Recombination Deficiency: Therapeutic Relevance



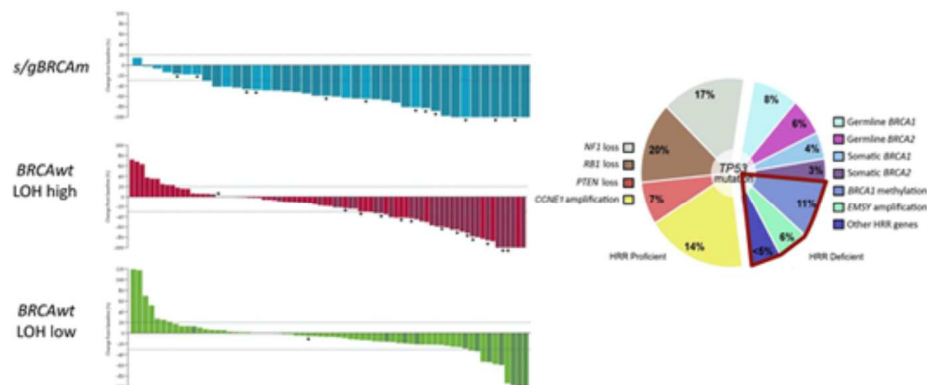
PARP Mechanism of Action



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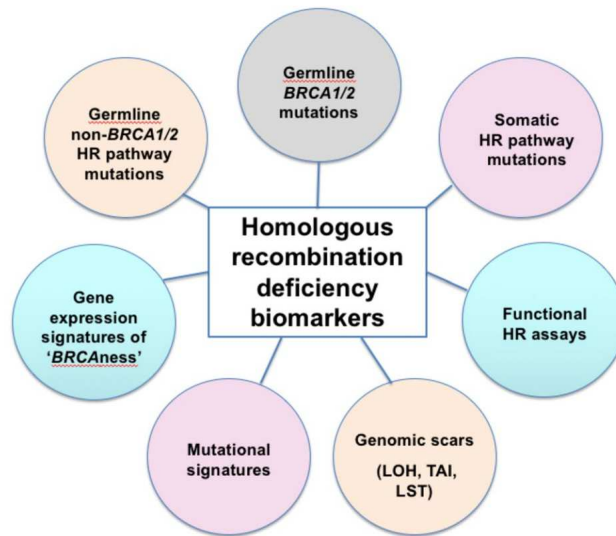
Homologous Recombination Deficiency: Predict Response to PARP Inhibitors

ARIEL2 Study: Rucaparib

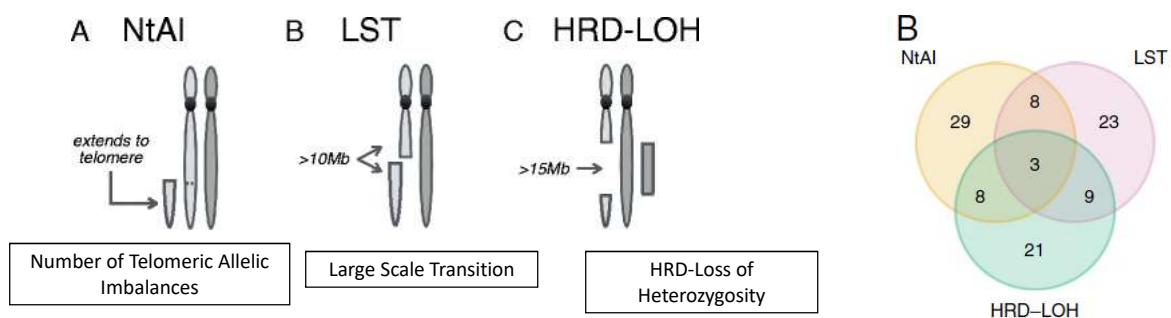


Reprinted from Lancet Oncol, 18, Swisher EM, et al., Rucaparib in relapsed, platinum-sensitive high-grade ovarian carcinoma (ARIEL2 Part 1): an international, multicentre, open-label, phase 2 trial, 75-87., Copyright 2017, with permission from Elsevier.; Hollis RL, et al. *Cancer Biol Med.* 2016;13:236-247.

Homologous Recombination Deficiency : Biomarkers

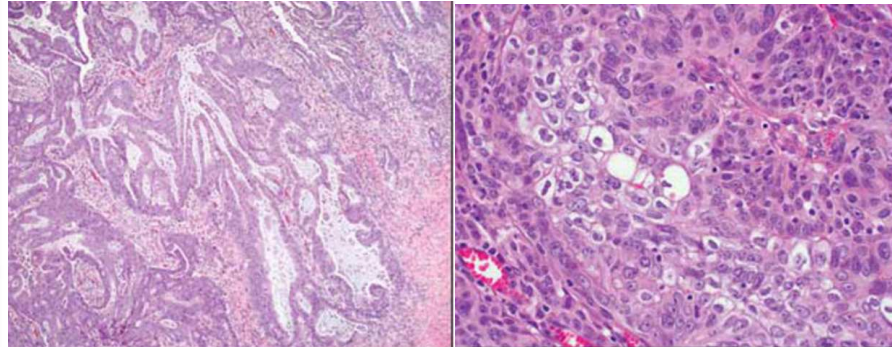
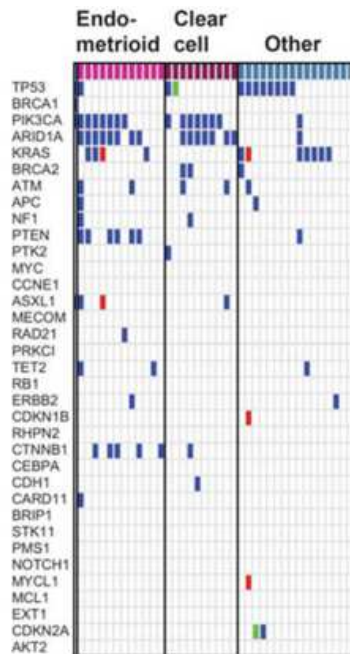


Homologous Recombination Deficiency Scores



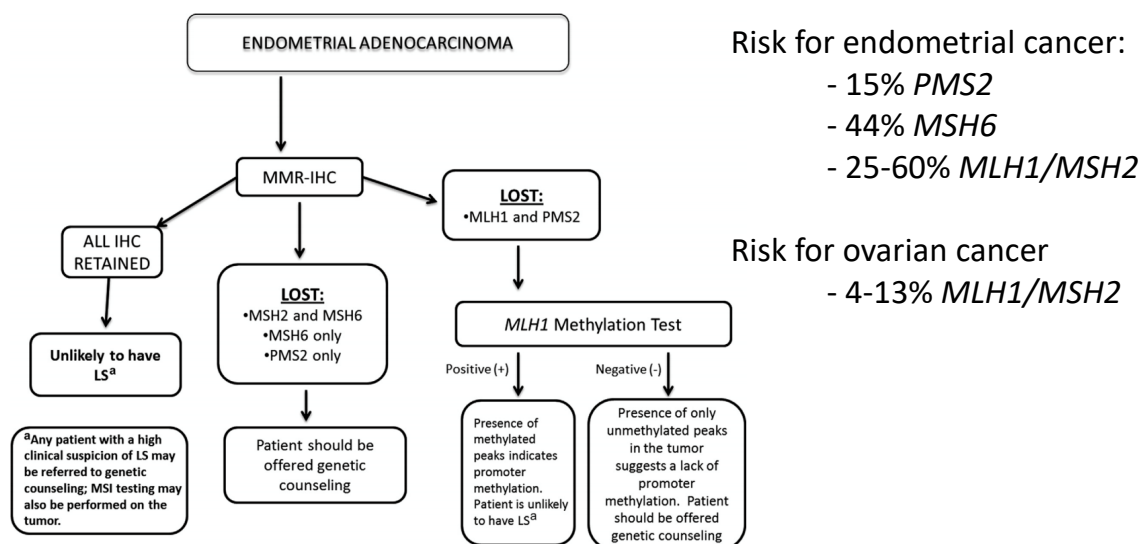
- All 3 signatures are defined differently, although there is some overlap
- All based on assumption that the measures are proportional to the number of times a tumor experienced error-prone DNA repair

Non-serous Ovarian Carcinomas



[Mod Pathol.](#) 2016 Aug;29(8):893-903.

Inherited Gynecologic Tumors: Lynch syndrome



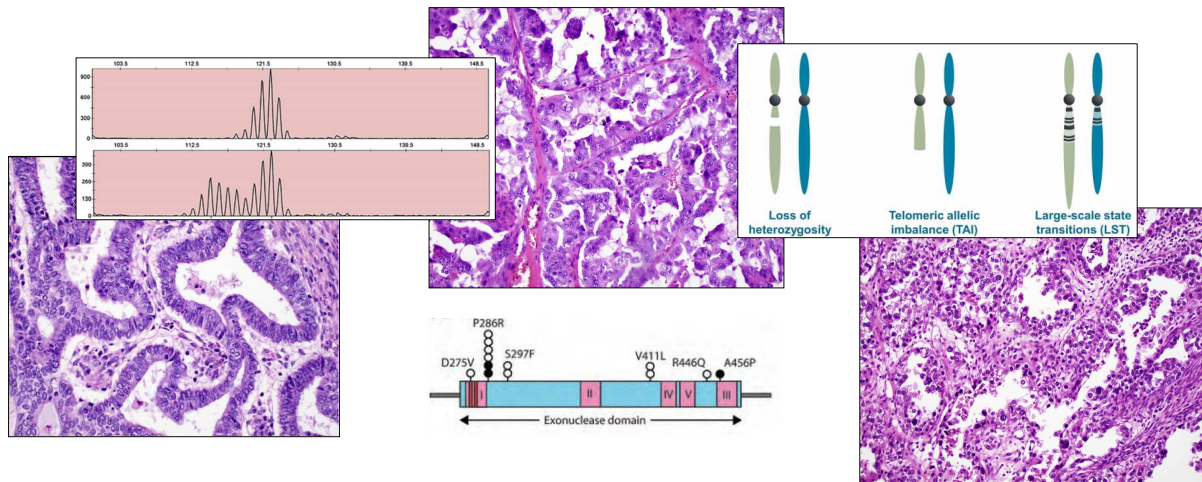
[Surg Pathol Clin.](#) 2016 Sep;9(3):405-26.

Inherited Gynecologic Tumors: Hereditary Breast and Ovarian Cancer Syndrome

Syndrome	Gene	Incidence	Cancers
Hereditary breast and ovarian cancer syndrome	BRCA1 BRCA2	1/300-800 Ashkenazi: 1/40	Breast, ovary, melanoma, prostate, pancreatic
Hereditary ovarian cancer syndrome	RAD51C RAD51D BRIP1	Unknown	Ovary
Lynch syndrome	MLH1 MSH2 MSH6 PMS2 EPCAM	1/660-2000	Uterine, colon, ovary, pancreatic, gastric, small intestine, central nervous system, renal, sebaceous
Cowden syndrome	PTEN	1/200,000	Breast, uterine, thyroid, colon, renal, sebaceous
Li-Fraumeni syndrome (LFS)	P53	Unknown	Sarcomas, breast, adrenal, brain, lung, endometrial
Peutz-Jeghers	STK11	1/25,000-300,00	Gastrointestinal, breast, ovarian, sex cord stromal, uterine, cervical (adenoma malignum)

[Obstet Gynecol Clin North Am.](#) 2018 Mar;45(1):155-173.

Molecular diagnostics of gynecologic tumors



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