



Universidad
de Navarra

CIMA LAB
DIAGNOSTICS

Exploring the Impact of Comprehensive Genomic Profiling in Solid Tumor Testing



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Clínica Universidad de Navarra (CUN, Spain)



- A small academic and research private hospital:
 - **Personalized Medicine:**
 - Patient have a reference doctor to whom the other professionals who collaborate in the comprehensive diagnosis and treatment will report.
 - **Up-to-date-technology and research:**
 - A non-profit organization that reinvest in promoting implementation of newest technologies as well as research and clinical trials
 - This allows us to offer new opportunities and new responses to our patients.
 - **Comfort and results:**
 - Streamline the process of consultations, treatments and tests for its patients.
 - Diagnostic speed, efficiency in the appointment and accessibility to results and treatment.
 - A single hospital in two different locations, **but molecular diagnostics centralized in Pamplona.**

The Role of CIMA LAB Diagnostics

- CIMA LAB Diagnostics is the genetic and phenotypic diagnostic laboratory of the Clínica Universidad de Navarra (CUN).

<https://www.unav.edu/web/cimalab>



- **Collaborate** side by side with clinicians in order to **improve the quality of medical care**

The Role of CIMA LAB Diagnostics

- ... by making the newest biomarkers available to medical professionals to support diagnosis.
 - Quality Control & Assurance (QC & QA)
 - Turnaround time (TAT)
 - Newest technology.



- **How?** With the implementation of Comprehensive Genome Profiling (**CGP**), which has positively impacted **our communication** with clinicians directly benefitting patient care



Agenda



- Exploring the Impact of Comprehensive Genomic Profiling (**CGP**) in Solid Tumor Testing
 - Section 1: The impact of CGP in everyday cases
 - What is CGP?
 - Three examples:
 - Patients with **inherited pathogenic sequence changes**
 - Patients with a chance to enter a **clinical trial**
 - **Improved chances** by providing MSI, TMB, mutation signatures, HRD, ...
 - Final thoughts
 - Section 2: The impact of CGP in how we work in **CIMA LAB Diagnostics in clinical research**
 - Two examples:
 - **Sample preparation** to be molecularly tested by the pathologist
 - **Biomarker identification** by the molecular laboratory.



Agenda

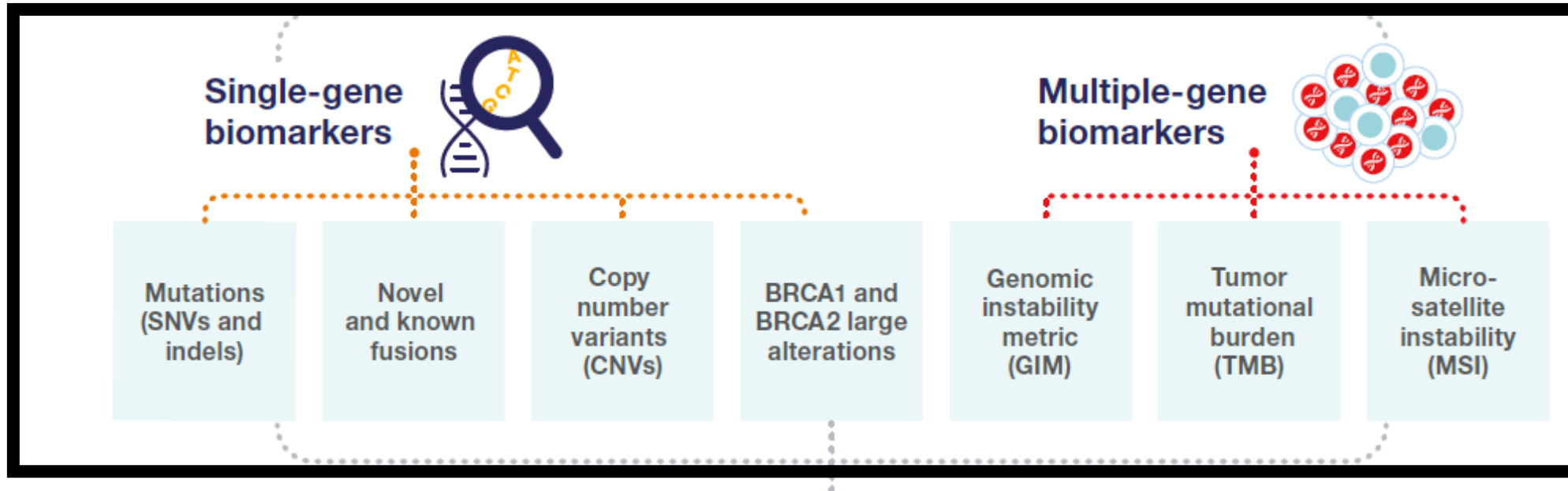


- Exploring the Impact of Comprehensive Genomic Profiling (**CGP**) in Solid Tumor Testing
 - Section 1: The impact of CGP in everyday cases
 - What is CGP?
 - Three examples:
 - Patients with **inherited pathogenic sequence changes**
 - Patients with a chance to enter a **clinical trial**
 - **Improved chances** by providing MSI, TMB, mutation signatures, HRD, ...
 - Final thoughts



Section 1: Comprehensive Genomic Profiling (CGP)

- A single test based on NGS technology that provides both single- as well as multiple-gene biomarkers; **reducing the need for more sample, time and cost.**





Section 1: CGP impacting **everyday cases**

Example 1. Patients with-inherited pathogenic sequence changes

- **Patients with ovarian cancer**
 - up to 10% with confirmed inherited pathogenic sequence change

Hindawi Publishing Corporation
BioMed Research International
Volume 2015, Article ID 341723, 11 pages
<http://dx.doi.org/10.1155/2015/341723>

Review Article

Hereditary Ovarian Cancer: Not Only *BRCA* 1 and 2 Genes

**Angela Toss,¹ Chiara Tomasello,¹ Elisabetta Razzaboni,¹ Giannina Contu,²
Giovanni Grandi,² Angelo Cagnacci,² Russell J. Schilder,³ and Laura Cortesi¹**

Section 1: CGP impacting **everyday cases**

Example 1. Patients with inherited pathogenic sequence changes

- Patients with ovarian cancer
 - up to 10% with confirmed inherited pathogenic sequence change
- **Other cancer types too**
 - Pancreatic cancer patients too

The screenshot shows the National Cancer Institute (NCI) website. At the top, the NCI logo and name are visible. Below the logo is a search bar and a navigation menu with links for 'About Cancer', 'Cancer Types', 'Research', 'Grants & Training', 'News & Events', and 'About NCI'. A breadcrumb trail indicates the current page: 'Home > About Cancer > Cancer Treatment > A to Z List of Cancer Drugs > Drugs Approved for Pancreatic Cancer'. On the left side, there is a sidebar menu with 'Cancer Treatment' selected, showing sub-links for 'Types of Cancer Treatment', 'Side Effects of Cancer Treatment', 'Clinical Trials Information', 'A to Z List of Cancer Drugs', and 'Drugs Approved for Different Types of Cancer'. The main content area is titled 'Drugs Approved for Pancreatic Cancer' and contains a paragraph explaining that the page lists FDA-approved cancer drugs for pancreatic cancer, including generic names and brand names, as well as common drug combinations. It notes that while individual drugs are FDA-approved, the combinations themselves are not. Below the paragraph, there is a note stating that drug names link to NCI's Cancer Drug Information summaries and that some drugs used in pancreatic cancer may not be listed here.

Section 1: CGP impacting **everyday cases**

Example 1. Patients with inherited pathogenic sequence changes

- **Patients with ovarian cancer**
 - up to 10% with confirmed inherited pathogenic sequence change
- Other cancer types too
 - Pancreatic cancer patients too
 - **Olaparib**, for example.

Drugs Approved for Pancreatic Cancer

Abraxane (Paclitaxel Albumin-stabilized Nanoparticle Formulation)
Afinitor (Everolimus)
Capecitabine
Erlotinib Hydrochloride
Everolimus
5-FU (Fluorouracil Injection)
Fluorouracil Injection
Gemcitabine Hydrochloride
Gemzar (Gemcitabine Hydrochloride)
Infugem (Gemcitabine Hydrochloride)
Irinotecan Hydrochloride Liposome
Lynparza (Olaparib)
Mitomycin
Olaparib



Section 1: CGP impacting **everyday cases**

Example 1. Pati

- Patients with
 - up to 10
- Other cancer
 - Pancreat
 - Olaparib

Olaparib is approved to treat:

- **Breast cancer** that is HER2 negative and has certain germline mutations in the BRCA1 or BRCA2 gene. Olaparib is used after surgery in adults with:
 - High-risk early-stage breast cancer that has been treated with chemotherapy before or after surgery.
 - Metastatic cancer that has been treated with chemotherapy before or after the cancer spread.
- **Ovarian epithelial, fallopian tube, or primary peritoneal cancer**. Olaparib is used as maintenance therapy in adults who are having a complete or partial response to platinum chemotherapy. It is used:
 - As the first maintenance therapy in patients with advanced cancer that has certain germline or somatic mutations in the BRCA1 or BRCA2 gene.
 - With bevacizumab as the first maintenance therapy in patients with advanced cancer that has genomic instability and/or certain germline or somatic mutations in the BRCA1 or BRCA2 gene.
 - In patients with recurrent cancer.
- **Pancreatic cancer**. Olaparib is used as maintenance therapy in adults with metastatic cancer that has not progressed after first-line therapy with platinum chemotherapy and has certain germline mutations in the BRCA1 or BRCA2 gene.
- **Prostate cancer** that has spread to other parts of the body and is castrate resistant (has not responded to treatments that lower testosterone levels). Olaparib is used:
 - Alone in adults with germline or somatic mutations in certain genes involved in the homologous recombination repair pathway whose cancer has gotten worse after treatment with enzalutamide or abiraterone.
 - With abiraterone and prednisone or prednisolone in adults with certain mutations in the BRCA1 or BRCA2 gene.

Olaparib is also being studied in the treatment of other types of cancer.

Section 1: CGP impacting **everyday cases**

Example 1. Patients with inherited pathogenic sequence changes

- **Patients with ovarian cancer**
 - up to 10% with confirmed inherited pathogenic sequence change
- Other cancer types too
 - Pancreatic cancer patients to
 - **Olaparib**, for example (but not for all)
 - Colon cancer
 - **MSI**, for example,



Section 1: CGP impacting **everyday cases**

Example 1. Patients with inherited pathogenic sequence changes

- **Patients with ovarian cancer**
 - up to 10% with confirmed inherited pathogenic sequence change
- Other cancer types too
 - Pancreatic cancer patients too
 - **Olaparib**, for example (but also for prostate cancer etc).
 - Colon cancer
 - **MSI**, for example,

But, we are talking about identification of patients that have inherited a pathogenic sequence change, so MSI?

Section 1: CGP impacting **everyday cases**

Example 1. Patients with inherited pathogenic sequence changes

- **Patients with ovarian cancer**
 - up to 10% with confirmed inherited pathogenic sequence change
- Other cancer types too
 - Pancreatic cancer patients too
 - **Olaparib**, for example (but also for prostate cancer etc).
 - Colon cancer
 - **MSI**, for example.

Analysis	Sample	MSI Status	MSI Score	MSI Coverage	MSI Algorithm version	MSI QC
TMF00530_8_MB10300_c2922	2021-10-13-17-25-32-352			TMF00530_8_MB10300_DNA	MSI-High	56.59 139923 MSI_IR 2.0.2

Section 1: CGP impacting **everyday cases**

Example 1. Patients with inherited pathogenic sequence changes

- **Patients with ovarian cancer**
 - up to 10% with confirmed inherited pathogenic sequence change
- Other cancer types too
 - Pancreatic cancer patients too
 - **Olaparib**, for example (but also for prostate cancer etc).
 - Colon cancer
 - **MSI**, for example.
 - However, CGP also sequenced *MSH2*.

Mutation Signature Identification Report		Sample Name:	Analysis Name:	
		TMF00530_8_MB10300_DNA	TMF00530_8_MB10300_DNA_20211013152724159	
Signature specific gene mutations				
SBS6				
Locus	Type	Gene	Frequency	Protein
chr2:47637291	SNV	MSH2	48.25	p.Ser142Ter
chr2:47703631	SNV	MSH2	21.97	p.Arg711Ter

Section 1: CGP impacting **everyday cases**

Example 2. Patients with a chance to enter a clinical trial

- For example, *NRG1* gene fusion
- We did have a case, just because the solid biopsy had been characterized with **CGP** (161 gene panel)
- We entered the clinical trial as a molecular diagnostic lab and many patients benefitted from **CGP** testing (161 and >500 genes panels)

Do you or someone you know have cancer with an [NRG1 gene fusion](#)? Here you'll find information about Merus' [clinical trial for MCLA-128](#), an experimental medicine, for cancer patients with solid tumors with an NRG1 Fusion. You can also learn about the [science behind MCLA-128](#).

MCLA-128 is an investigational drug that has not been approved by the FDA for treatment of cancer.



Clinical Trial Information

1-833-NRG-1234

clinicaltrials.gov/ct2/show/NCT02912949

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Section 1: CGP impacting **everyday cases**

Example 3. Improved chances by providing MSI, TMB, mutation signatures, HRD, ...

- **MSI**, but inherited *MSH2* pathogenic sequence change - colon cancer.
- **TMB** high case, but MSS and *POLE* pathogenic sequence change - glioblastoma.

Other studies; for example, [A.B. Schrock](#) et al., 2017

“Mutations of the DNA polymerase epsilon (POLE) can lead to a hypermutated tumor phenotype, in the absence of microsatellite instability (MSI). Exceptional responses to ICPIs in POLE-mutated endometrial adenocarcinoma (EA), colorectal (CRC), and glioblastoma (GBM) are described.”



Section 1: Final thoughts

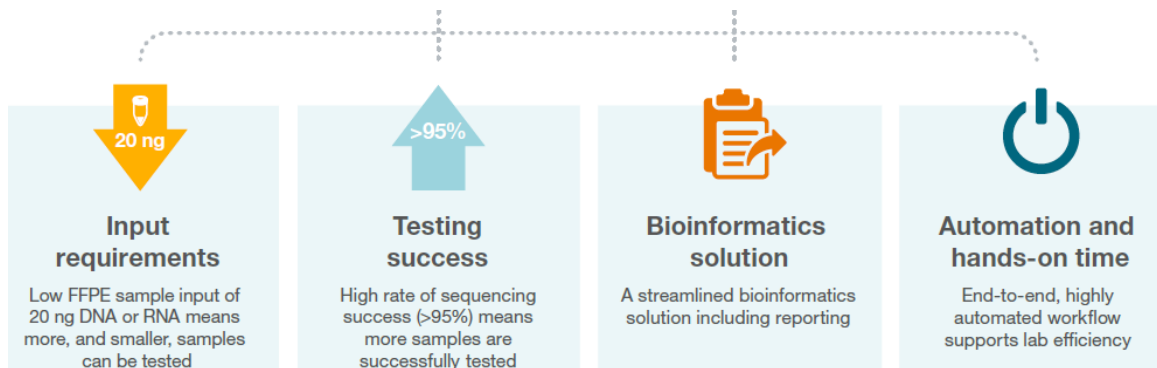
Section 1. CGP is impacting patient care

- Providing more comprehensive information from each solid (or liquid) biopsy tested
- However,
 - **ACCURACY**
 - Proficiency testing programs as well as accreditations need to be mandatory
 - Case by case variant validation using techniques such as dPCR will be key (**false positives**).
 - **SPEED**
 - Shorter turnaround time is definitively desired.
 - **COST**
 - Less expensive is desired too.
 - **MORE COMPREHENSIVE**
 - For example, genomic markers (TMB, MSI, HRD, ...)

Section 2: CGP in CIMA LAB

Oncomine Comprehensive Assay Plus (**OCA Plus**)

- From one sample, in one assay run, you can achieve CGP based on DNA and RNA analysis of **>500 genes** without having to compromise on:



- **165** genes with recurrent hotspot mutations
- **333** genes with focal CNV gains or loss
- **227** genes with full-coding DNA sequence (CDS)
- **46** genes in Homologous Recombination Repair pathway
- **49** Fusion driver genes
- **MET** exon skipping detection at DNA and RNA level
- **Others:**
 - **Cellularity** (Tumor fraction) calculation
 - **Tumor Mutational Burden (TMB)**
 - **Microsatellite Instability (MSI)**
 - **Loss of heterozygosity (gene LOH)**
 - **Large genomic alterations in *BRCA1* and *BRCA2***
 - **Genomic Instability Metric (GIM)**

Section 2: CGP in CIMA LAB

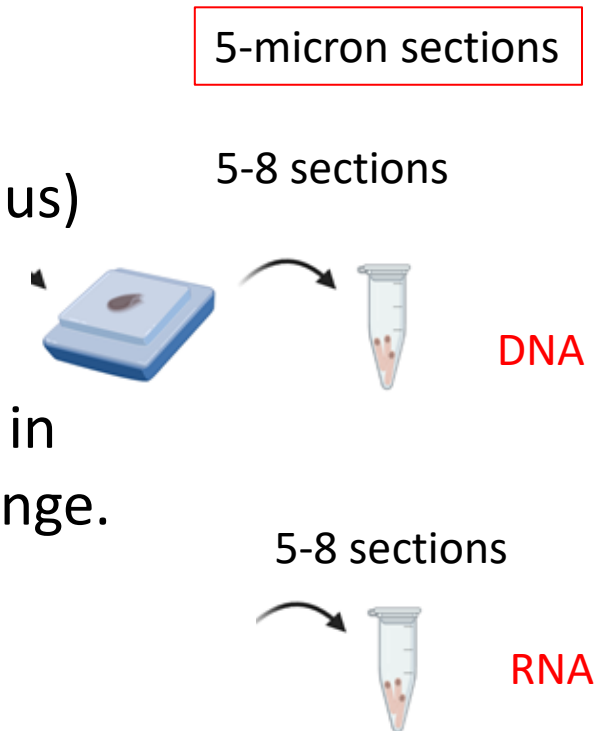
Example 1. Impacting **sample preparation** for pathologist? **NO.**

- 52 gene panel - Oncomine Focus Assay (OFA)
- 161 gene panel - Oncomine Comprehensive Assay (OCA)
- 500+ gene panel - Oncomine Comprehensive Assay Plus (OCA Plus)

Please, careful with:

- The first time you implement the sample quantity requirements in collaboration with the pathologist, but after that no need to change.

Two eppendorf tubes with between 5 and 8 (5-micron) FFPE sections (**with higher than 50% tumor content**) each



Section 2: CGP in CIMA LAB Diagnostics

Example 1. Impacting **sample preparation** for lab technicians? **NO.**

- 52 gene panel - Oncomine Focus Assay (OFA)
- 161 gene panel - Oncomine Comprehensive Assay (OCA)
- 500+ gene panel - Oncomine Comprehensive Assay Plus (OCA Plus)
- **OCA Plus analyzes both DNA as well as RNA**
 - SNV, indels and CNVS – DNA sample
 - Fusions – RNA sample



Maxwell RSC (Promega)

Please, careful with:

- FFPE sample processing (and storage)
- Nucleic acid isolation (and storage)



Qubit (ThermoFisher)



TapeStation (Agilent)

Section 2: CGP in CIMA LAB Diagnostics

Example 2. Impacting **biomarker identification** for lab technicians? **NO MUCH!**

- 52 gene panel - Oncomine Focus Assay (OFA)
- 161 gene panel - Oncomine Comprehensive Assay (OCA)
- 500+ gene panel - Oncomine Comprehensive Assay Plus (OCA Plus)

Please, careful with:

- Adapting the S5 to be able to use ION 550 sequencing chips
- Only 4 cases per chip.

Otherwise, no other change!



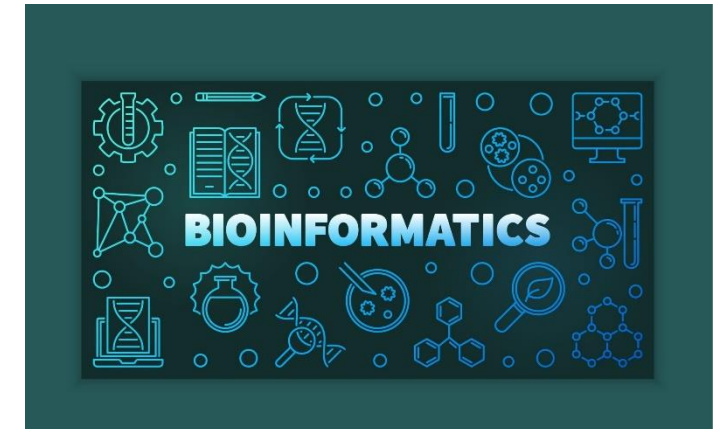
Section 2: CGP in CIMA LAB Diagnostics

Example 2. Impacting **biomarker identification** for bioinformaticians? **YEP!**

- 52 gene panel - Oncomine Focus Assay (OFA)
- 161 gene panel - Oncomine Comprehensive Assay (OCA)
- 500+ gene panel - Oncomine Comprehensive Assay Plus (OCA Plus)

Please, careful with:

- data storage – significantly more raw data.
- the verification process - more complex



Section 2: CGP in CIMA LAB Diagnostics

Example 2. Impacting **biomarker identification** for geneticists? **YEP!**

- 52 gene panel - Oncomine Focus Assay (OFA)
- 161 gene panel - Oncomine Comprehensive Assay (OCA)
- 500+ gene panel - Oncomine Comprehensive Assay Plus (OCA Plus)

Please, careful with:

- the amount of new information that has to be included in each report (including the material and method section with the assay limitations)
- the communication with other colleagues



Section 2: CGP in CIMA LAB Diagnostics

Example 2. Impacting **biomarker identification** for high-risk cancer research samples? **YEP!**

Pre-CGP implementation:

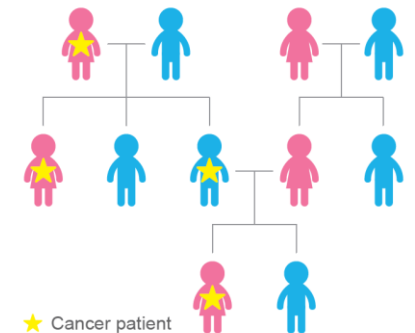
- Germline-testing from blood samples

However, CGPs **do sequence the genomic region of relevant cancer predisposition genes.**

- 161 gene panel - Oncomine Comprehensive Assay (OCA)
- 500+ gene panel - Oncomine Comprehensive Assay Plus (OCA Plus)

Post-CGP implementation:

- Careful with samples with inherited pathogenic sequence changes



Section 2: CGP in CIMA LAB Diagnostics

Example 2. Impacting **biomarker identification** for clinical research trials? **YEP!**

- 52 gene panel - Oncomine Focus Assay (OFA)
- 161 gene panel - Oncomine Comprehensive Assay (OCA)
- 500+ gene panel - Oncomine Comprehensive Assay Plus (OCA Plus)

Please, careful with:

- the amount of information received - ask if you have any question
- the requirements that clinical research trials have (**clinical trial unit**)





Final conclusions

Section 1. CGP is impacting patient care

- Providing more comprehensive information from each solid (or liquid) biopsy tested

Section 2. CGP has impacted CIMA LAB Diagnostics in clinical research

- No much:
 - Sample preparation
 - DNA/RNA isolation
 - NGS library preparation and sequencing
- Significantly,
 - **Biomarker identification**

Section 2: CGP in CIMA LAB

Oncomine Comprehensive Assay Plus (**OCA Plus**)

- Positive control samples are being used to assess OCA Plus ability to detect:
 - SNV, indels,
 - CNVs
 - Fusions
 - TMB
 - MSI
 -
- **But, what about HRD?**

- **165** genes with recurrent hotspot mutations
- **333** genes with focal CNV gains or loss
- **227** genes with full-coding DNA sequence (CDS)
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Section 2: CGP in CIMA LAB Diagnostics

Oncomine Comprehensive Assay Plus (**OCA Plus**)

- Positive control samples are being used to assess OCA Plus ability to detect:
 - SNV, indels,
 - CNVs
 - Fusions
 - TMB
 - MSI
 -
- **But, what about HRD?**

- HRD is the inability of a cell to effectively repair DNA double-strand breaks using the homologous recombination repair (HRR) pathway.
- **Tumors with HRD sensitive to PARP inhibitors**
- CGP assays can report Genomic Instability that quantifies genomic scarring associated with HRD, for example, **OCA Plus provides: Genomic Instability Metric (GIM) values per analyzed sample.**
 - Does GIM may reliably detect HRD status? **Dr. Staebler's talk**

Exploring the Impact of Comprehensive Genomic Profiling in Solid Tumor Testing

Thanks



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<https://www.unav.edu/web/cimalab>