blood

MYC/BCL2 protein co-expression contributes to the inferior survival of activated B-cell subtype of diffuse large B-cell lymphoma and demonstrates high-risk gene expression signatures: a report from The International DLBCL Rituximab-CHOP Consortium Program Study.

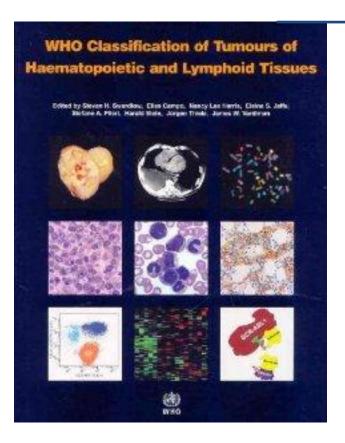
Hu S, Xu-Monette ZY, Tzankov A, Green T, Wu L, Balasubramanyam A, Liu WM, Visco C, Li Y, Miranda RN, Montes-Moreno S, Dybkær K, Chiu A, Orazi A, Zu Y, Bhagat G, Richards KL, Hsi ED, Choi WW, Zhao X, van Krieken JH, Huang Q, Huh J, Ai W, Ponzoni M, Ferreri AJ, Zhou F, Slack GW, Gascoyne RD, Tu M, Variakojis D, Chen W, Go RS, Piris MA, Møller MB, Medeiros LJ, Young KH.

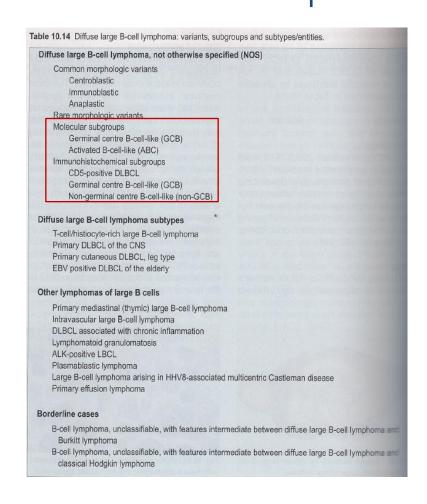
Blood. 2013 May 16;121(20):4021-31

ΒΙΒΛΙΟΓΡΑΦΙΚΗ ΕΝΗΜΕΡΩΣΗ ΓΝΑ ΕΥΑΓΓΕΛΙΣΜΟΣ Θ. ΚΑΝΕΛΛΟΠΟΥΛΟΥ

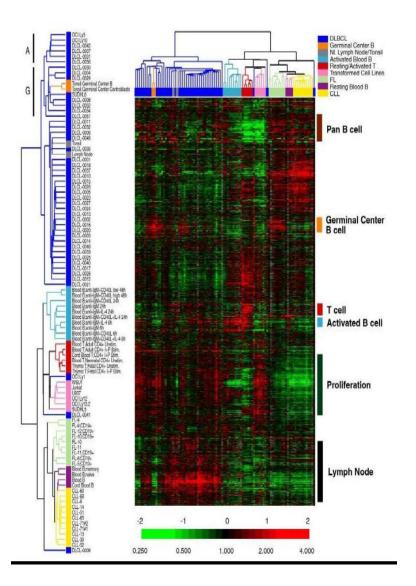
ΕΙΣΑΓΩΓΗ

Ταξινόμηση WHO 2008 - DLBCL





Gene-expression profiles



DLBCL - NOS

- Τύπος βλαστικού κέντρου (GCB)
 - *CD10, BCL6*
- Τύπος ενεργοποιημένου β-λεμφοκυττάρου (ABC)
 - MYC, BCL2, MUM1, CD44FLIP, cyclinD2
 - Ενεργοποίηση NF-κΒ
 - Ο Χειρότερη πρόγνωση

Gene-expression profiles

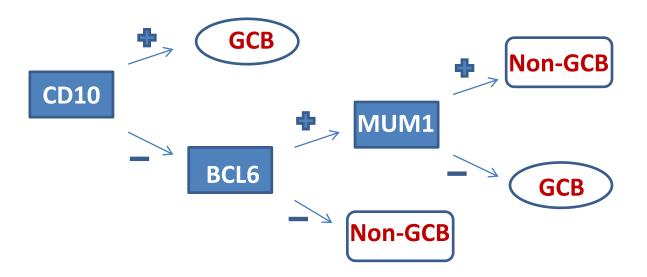
• Περιορισμοί ...

- Η τεχνολογία GEP δεν είναι διαθέσιμη στην καθημερινή κλινική πράξη
- Αναπαραγωγιμότητα;;;
- Παραμένει άγνωστο ποια γονιδιακά προϊόντα συμβάλλουν στη χειρότερη πρόγνωση των ασθενών με ABC-DLBCL

Εναλλακτικές λύσεις ;;;

Ανοσοϊστοχημεία

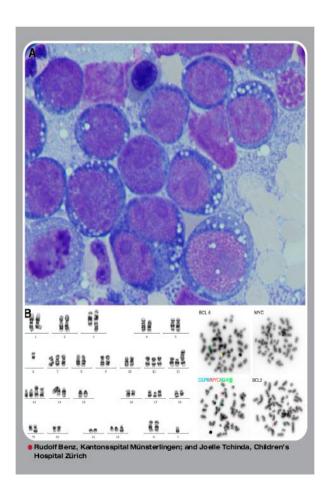
Αλγόριθμος του Hans



Hans CP, et al. Confirmation of the molecular classification of diffuse large B-cell lymphoma by immunohistochemistry using a tissue microarray. Blood. 2004 Jan 1;103(1):275-82

• Συμφωνία με GEP 80%

"Double-Hit"



- •Λεμφώματα με επαναλαμβανόμενες μεταλλαγές που ενεργοποιούν πολλαπλά ογκογονίδια
- •Επιθετική κλινική πορεία και αντοχή στη θεραπεία
- •BCL2+/MYC+, BCL6+/MYC+, BCL3+/MYC+
- Συνήθως GCB φαινότυπος
 CD10+, BCL6+, MUM1/IRF4-



Νεότερα βιβλιογραφικά δεδομένα

 Ασθενείς με DLBCL με συνέκφραση BCL2/MYC με ή χωρίς αναδιατάξεις MYC ή BCL2 έχουν χειρότερη πρόγνωση

- Johnson NA, et al. Concurrent expression of MYC and BCL2 in diffuse large B-cell lymphoma treated with rituximab plus cyclophosphamide, doxorubicin, vincristine, and prednisone. J Clin Oncol. 2012 Oct 1;30(28):3452-9
- Green TM, et al. Immunohistochemical double-hit score is a strong predictor of outcome in patients with diffuse large B-cell lymphoma treated with rituximab plus cyclophosphamide, doxorubicin, vincristine, and prednisone. J Clin Oncol. 2012 Oct 1;30(28):3460-7

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Blood. 2013 Feb 28. [Epub ahead of print]

ΥΛΙΚΑ & ΜΕΘΟΔΟΙ

Ασθενείς

International DLBCL R-CHOP Consortium Program Study

893 ασθενείς
De novo DLBCL
MYC+/BCL2+
(ανοσοϊστοχημικά)
R-CHOP



Χαμηλής κακοήθειας B-NHL HIV DLBCL δέρματος/ΚΝΣ EBV (+) DLBCL

466 training set

234 validation set #1

193 validation set #2

GEP σε 451 ασθενείς

9% αταξινόμητα

ΑΠΟΤΕΛΕΣΜΑΤΑ

Χαρακτηριστικά Overall N (%) OP Non-DP Non

	N (%)	(p-value)	PFS (p-value)	N (%)	N (%)	p-value
Patients	466 (100%)			157 (100%)	309 (100%)	
Gender Male Female	272 (58%) 194 (42%)	0.7477	0.4730	90 (57%) 67 (43%)	182 (59%) 127 (41%)	0.7445
Age ≤60 >60	194 (42%) 272 (58%)	0.0004	0.0016	49 (31%) 108 (69%)	145 (47%) 164 (53%)	0.0011
B symptoms* Absence Presence	276 (68%) 127 (32%)	0.0015	0.0014	88 (62%) 53 (38%)	188 (72%) 74 (28%)	0.0541
ECOG performance status* <2 ≥2	350 (88%) 50 (12%)	<0.0001	<0.0001	111 (83%) 23 (17%)	239 (90%) 27 (10%)	0.0453
Stage* I-II III-IV	219 (49%) 228 (51%)	<0.0001	<0.0001	50 (33%) 100 (67%)	169 (57%) 128 (43%)	<0.0001
Extranodal Sites* <2 ≥2	346 (78%) 96 (22%)	<0.0001	<0.0001	106 (72%) 42 (28%)	240 (82%) 54 (18%)	0.0160
LDH* Normal Elevated	168 (40%) 252 (60%)	0.0003	<0.0001	51 (36%) 89 (64%)	117 (42%) 163 (58%)	0.2908
IPI risk group* 0-2 3-5	263 (64%) 148 (36%)	<0.0001	<0.0001	70 (51%) 67 (49%)	193 (70%) 81 (30%)	0.0001
Tumor size (cm)* <7.5 ≥7.5	253 (77%) 77 (23%)	0.0100	0.0172	81 (73%) 30 (27%)	172 (79%) 47 (21%)	0.2587
Treatment response CR Others	354 (76%) 112 (24%)	<0.0001	<0.0001	103 (66%) 54 (34%)	251 (84%) 48 (15%)	<0.0001
COO Classification GCB ABC	241 (52%) 225 (48%)	0.0080	0.0075	53 (34%) 104 (65%)	188 (61%) 121 (39%)	<0.0001
KI-57* <70% ≥70%	158 (34%) 304 (66%)	0.2998	0.3434	41 (26%) 116 (74%)	117 (38%) 188 (62%)	0.0086
TP53 mutations Absence Presence	357 (77%) 109 (23%)	0.0005	0.0004	117 (75%) 40 (25%)	240 (78%) 69 (22%)	0.4480

Χαρακτηριστικά ασθενών

Table 2. Multivariate analysis of clinicopathological parameters in DLBCLs treated with R-CHOP

	os			PFS		
	HR	95% CI	P	HR	95% CI	P
B symptoms	1.47	1.04-2.09	.0310	1.45	1.03-2.03	.0314
Tumor size, ≥7.5 cm	1.22	0.87-1.71	.2467	1.21	0.86-1.69	.2708
IPI risk, >2	2.38	1.67-3.38	<.0001	2.22	1.59-3.11	<.0001
COO classification, ABC	1.17	0.79-1.72	.4329	1.18	0.82-1.71	.3750
TP53 mutation	1.72	1.17-2.52	.0057	1.63	1.12-2.37	.0105
MYC/BCL2 coexpression	2.52	1.73-3.67	<.0001	2.45	1.71-3.51	<.0001

CI, confidence interval; HR, hazard ratio.

Prognostic impact of MYC/BCL2 coexpression in DLBCL. (A-B) OS (A) and PFS (B) of patients with DLBCL with MYC/BCL2 coexpression (MYC+BCL2+) in the training set. В C All cases 80-80-80-MYC-negative (n=166) All others (n=309) All others (n=309) PFS (%) (%) SO 60-60 JOURN/ MYC+ (n=300) 20-20-20 MYC+BCL2+ (n=157) MYC+BCL2+ (n=157) THE AME p<.0001 p<.0001 p<.0001 SOCIET 80 100 120 140 160 180 20 40 60 80 100 120 140 160 180 60 80 100 120 140 160 180 40 40 Months Months Months HEMATO **BCL2-negative cases MYC-negative cases** D Ε All cases 100-80-80 MYC+ (n=143) 80-BCL2-negative (n=233) BCL2+ (n=76) (%) SO (%) SO 60-(%) SO 60 60-40-40-MYC-negative (n=90) BCL2-negative (n=90) 20 20 20-BCL2+ (n=233) p=.6292 p<.0001 p=.7569 100 120 140 160 180 80 100 120 140 160 180 20 40 60 40 40 80 100 120 140 160 180 Months Months Months

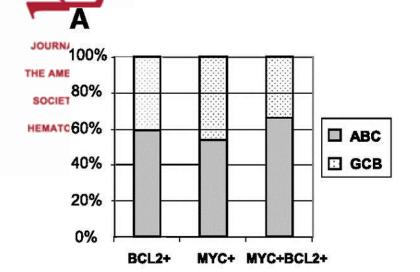
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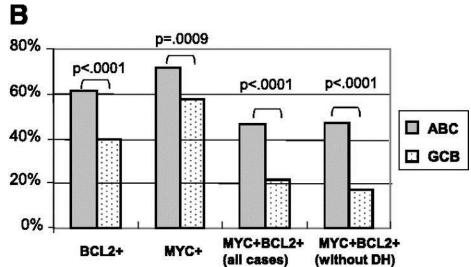
clinicopathologic parameters. В C **GCB** ABC 80 80-80-All others (n=188) All others (n=188) All others (n=121) PFS (%) (%) SO 60-60-60-% JOURN O 40-MYC+BCL2+ (n=53) MYC+BCL2+ (n=53) THE AME 20-20-20-MYC+BCL2+ (n=104) p<.0001 p<.0001 p<.0001 SOCIET 80 100 120 140 160 180 80 100 120 140 160 180 80 100 120 140 160 180 20 40 20 60 20 60 HEMATO Months Months Months F E D 1. IPI <2 Non-DP (n=193) 1. IPI ≤2 Non-DP (n=193) 100 2. IPI ≤2 DP (n=70) 2. IPI <2 DP (n=70) 3. IPI >2 Non-DP (n=81) 3. IPI >2 Non-DP (n=81) 80-80 80 4. IPI >2 DP (n=67) 4. IPI >2 DP (n=67) All others (n=121) PFS (%) (%) SO PFS (%) 60-40-1 vs 2: p<.0001 1 vs 2: p<.0001 20-20-20-3 vs 4: p=.0020 3 vs 4: p=.0010 MYC+BCL2+ (n=104) p<.0001 80 100 120 140 160 180 80 100 120 140 160 180 20 20 40 60 80 100 120 140 160 180 20 40 60 Months Months Months

Prognostic impact of MYC/BCL2 coexpression in DLBCL risk-stratified according to

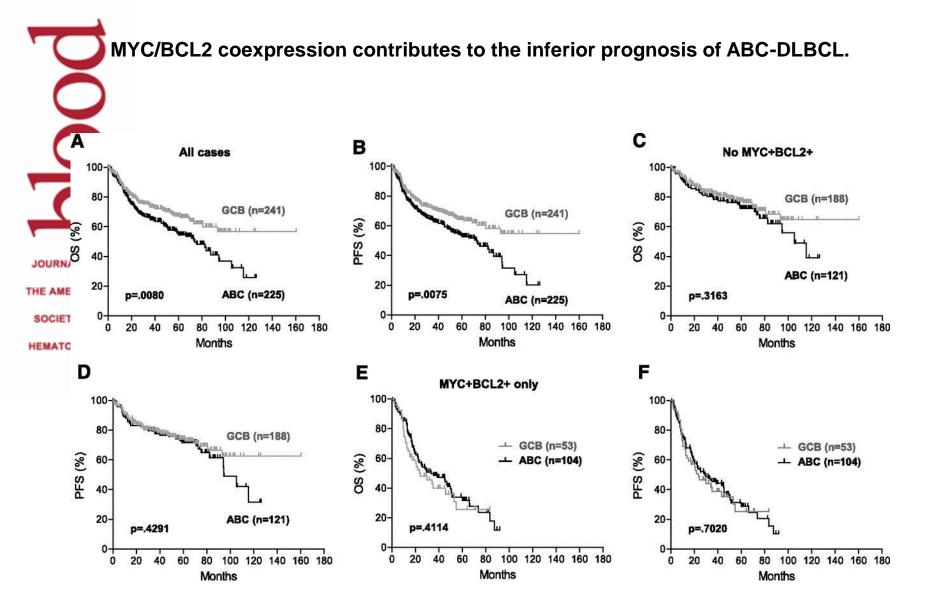
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Frequency of BCL2 and MYC expression in COO subtypes of DLBCL. (A) Relative frequency of the ABC vs GCB subtype in DLBCL positive for BCL2 expression, MYC expression, or MYC/BCL2 coexpression in the training set.





Hu S et al. Blood 2013;121:4021-4031



Hu S et al. Blood 2013;121:4021-4031

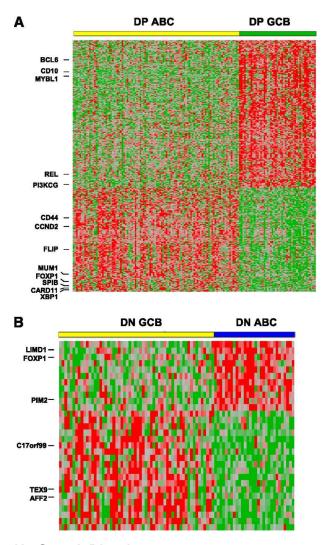
corearrangement and TP53 mutation status. В C No MYC/BCL2 DH 80-80-80-All others (n=260) All others (n=384) All others (n=384) PFS (%) (%) SO 40p<.0001 p<.0001 20-20-20-MYC+BCL2+ MYC/BCL2 DH (n=10) THE AME MYC/BCL2 DH (n=10) p<.0001 (n=124) SOCIET 120 120 100 20 100 20 20 40 100 120 Months HEMATO Months Months E F D No MYC/BCL2 DH TP53 wild-type MYC+BCL2+ 80-80-All others (n=260) All others (n=240) PFS (%) (%) SO (%) SO TP53 wild-type (n=117) MYC+BCL2+ (n=117) 20-20-20-MYC+BCL2+ TP53 mutation p<.0001 p<.0001 p = .0271(n=124) (n=40)20 20 20 100 80 100 120 140 160 180 40 100 120 40 120 Months Months Months

Prognostic impact of MYC/BCL2 coexpression in DLBCL is independent of MYC/BCL2

Hu S et al. Blood 2013;121:4021-4031

MYC/BCL2 coexpression contributes to the different gene expression profiles between GCB and ABC subtypes of DLBCL.





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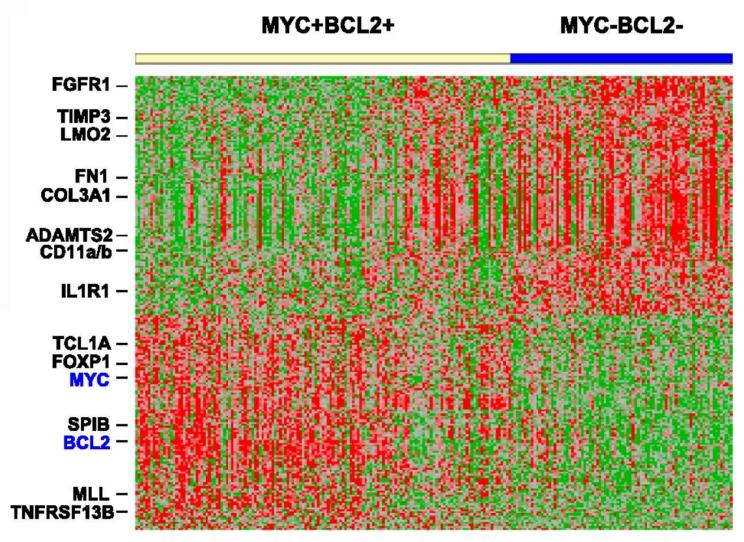
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HEMATOLOGY

Gene expression signature of DLBCL with MYC/BCL2 coexpression.



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Table 3. Differentially expressed genes in MYC⁺BCL2⁺ de novo DLBCL

Gene functional categories	No. of genes	Representative genes
Downregulated genes		
ECM, ECM production and remodeling	33	COL3A1, VCAN, TNS1, FN1, THBS2, TIMP3, SPARC, SULF1, SPINK2, MMP2, ADAM12, FGFR1, FAP
Cell adhesion and cytoskeletal organization	21	CD11A/CD11B, CD58, THY1, RFTN1, ANTXR1, RHOB, MICAL2
Cell growth regulation	16	LM02, TRAF1, CDK14, SGK1, RGS1, NBL, PDE4D
Others, including unknown	18	PSAP, LYZ, LOC115110, ZNF662
Upregulated genes		
Cell proliferation	20	MYC, BCL2, TCL1A, MLL, FOXP1, SPIB, TCF4, TNFRSF13B, PMDAIP1, GAB1, PLOR3G
Cell metabolism	5	DCTPP1, CYB5R2, HK2 _, TMEM97, CYB5R2
Miscellaneous cell functions	13	PPIL1, PIGW, FUT8, SPINK5
Unknown	27	KIAA0664, C9orf91, ZNF107

ΣΥΖΗΤΗΣΗ

Συζήτηση

- Ασθενείς με DLBCL και συνέκφραση MYC/BCL2 έχουν κακή πρόγνωση με 5ετή επιβίωση <30% ανεξαρτήτως αν πρόκειται για GCB ή ABC φαινότυπο
- 30% των ασθενών με DLBCL έχουν συνέκφραση MYC/BCL2 ενώ μόνο το 3% αντιπροσωπεύει DH λέμφωμα που αναδεικνύει ότι <u>η</u> επιθετικότητα των παραπάνω λεμφωμάτων είναι πέρα από το γενετικό επίπεδο
- Ασθενείς με MYC-/BCL2- έχουν μη στατιστικά σημαντική διαφορά στην επιβίωση ανεξαρτήτως GCB ή ABC φαινοτύπου
- Η συνέκφραση MYC/BCL2 παρατηρείται πιο συχνά στον ABC
 φαινότυπο που πιθανόν να ευθύνεται για την χειρότερη πρόγνωση αυτής της κατηγορίας ασθενών

LYMPHOID NEOPLASIA



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Disclosures

The authors, Associate Editor A. Keith Stewart, and CME questions author Charles P. Vega, Associate Professor and Residency Director, Department of Family Medicine, University of California-Irvine, declare no competing financial interests.

Learning objectives

Upon completion of this activity, participants will be able to:

- 1. Assess genetic abnormalities associated with diffuse large B-cell lymphoma (DLBCL).
- 2. Analyze the prevalence and survival impact of MYC and BCL2 co-expression in the current study.
- 3. Distinguish the relationship between MYC/BCL2 co-expression and other negative prognostic variables in the current study.
- 4. Evaluate the relative effect of MYC/BCL2 co-expression on survival in the context of DLBCL subtypes.

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