

Genomic discoveries in CLL

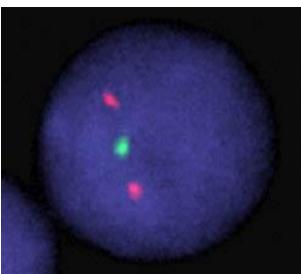
Richard Rosenquist Brandell, MD, PhD
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Evolution of genetic techniques

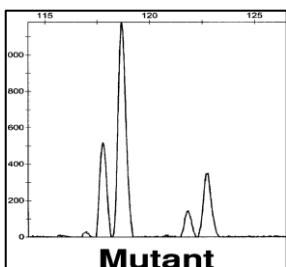
G-banding



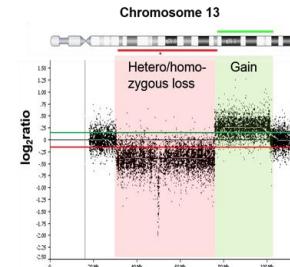
FISH



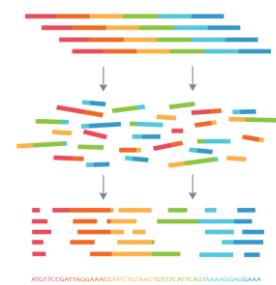
PCR



Microarrays



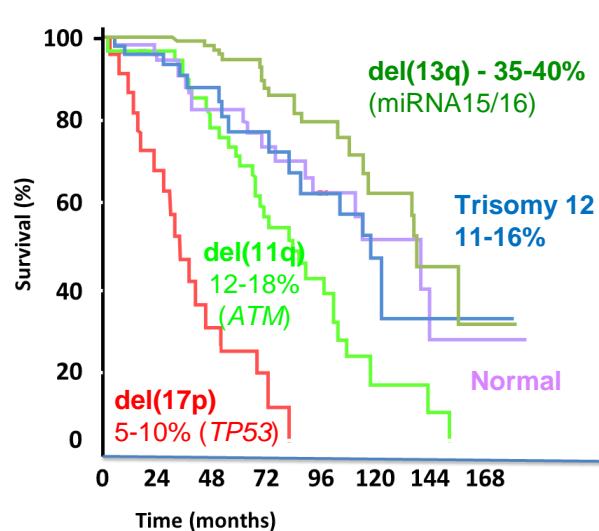
Next-generation sequencing



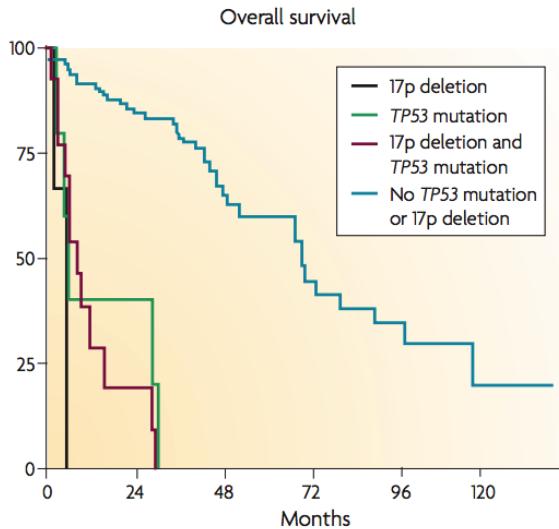
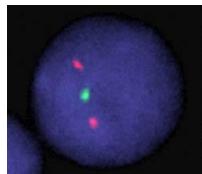
1970

2010

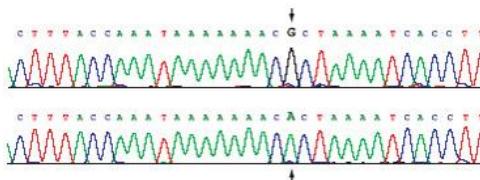
Genetic aberrations in clinical diagnostics



CLL-FISH

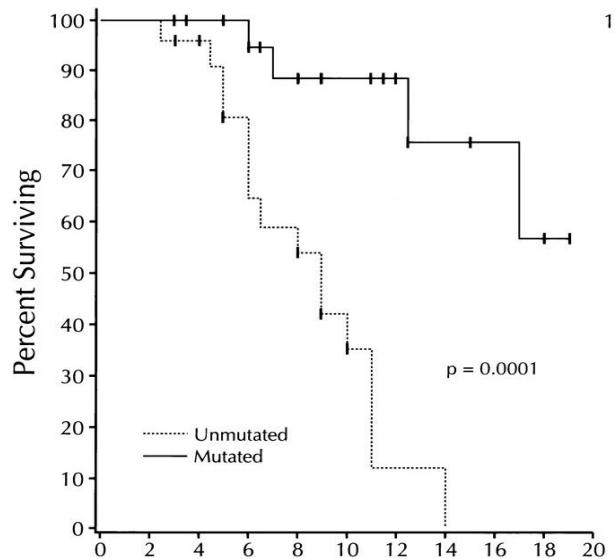


TP53 screening (exons 2-11)



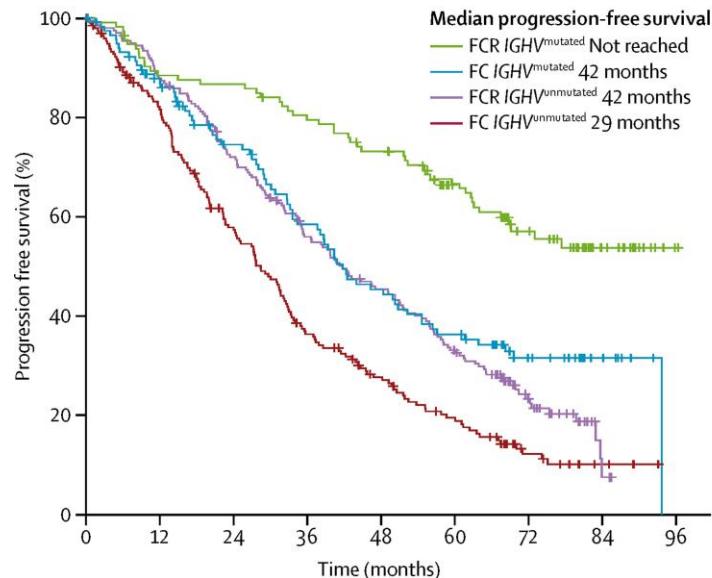
IGHV gene mutational status in CLL

Prognostic marker



Damle et al, Blood 1999

Predictive marker



Fischer et al, Blood 2016

Table 1. Baseline Evaluation of Patients with CLL



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Diagnostic test	General practice	Clinical trial
Tests to establish the diagnosis		
Complete blood count and differential count	Always	Always
Immunophenotyping of peripheral blood lymphocytes	Always	Always
Assessment prior to treatment		
History and physical, performance status	Always	Always
Complete blood count and differential count	Always	Always
Marrow aspirate and biopsy	When clinically indicated (unclear cytopenia)	Desirable
Serum chemistry, serum immunoglobulin, and direct antiglobulin test	Always	Always
Chest radiograph	Always	Always
Infectious disease status	Always	Always
Additional tests prior to treatment		
Molecular cytogenetics (FISH) for del(13q), del(11q), del(17p), add(12) in peripheral blood lymphocytes	Always	Always
Conventional karyotyping in peripheral blood lymphocytes (with specific stimulation)	NGI*	Desirable
TP53 mutation	Always	Always
IGHV mutational status	Always	Always
Serum β_2 -microglobulin	Desirable	Always
CT scan of chest, abdomen, and pelvis	NGI	Desirable
MRI, PET scans	NGI	NGI
Abdominal ultrasound**	Possible	NGI

New iwCLL guidelines

CLL-IPI

New tool box for diagnostics & research

Whole-genome



Exome



Gene panels

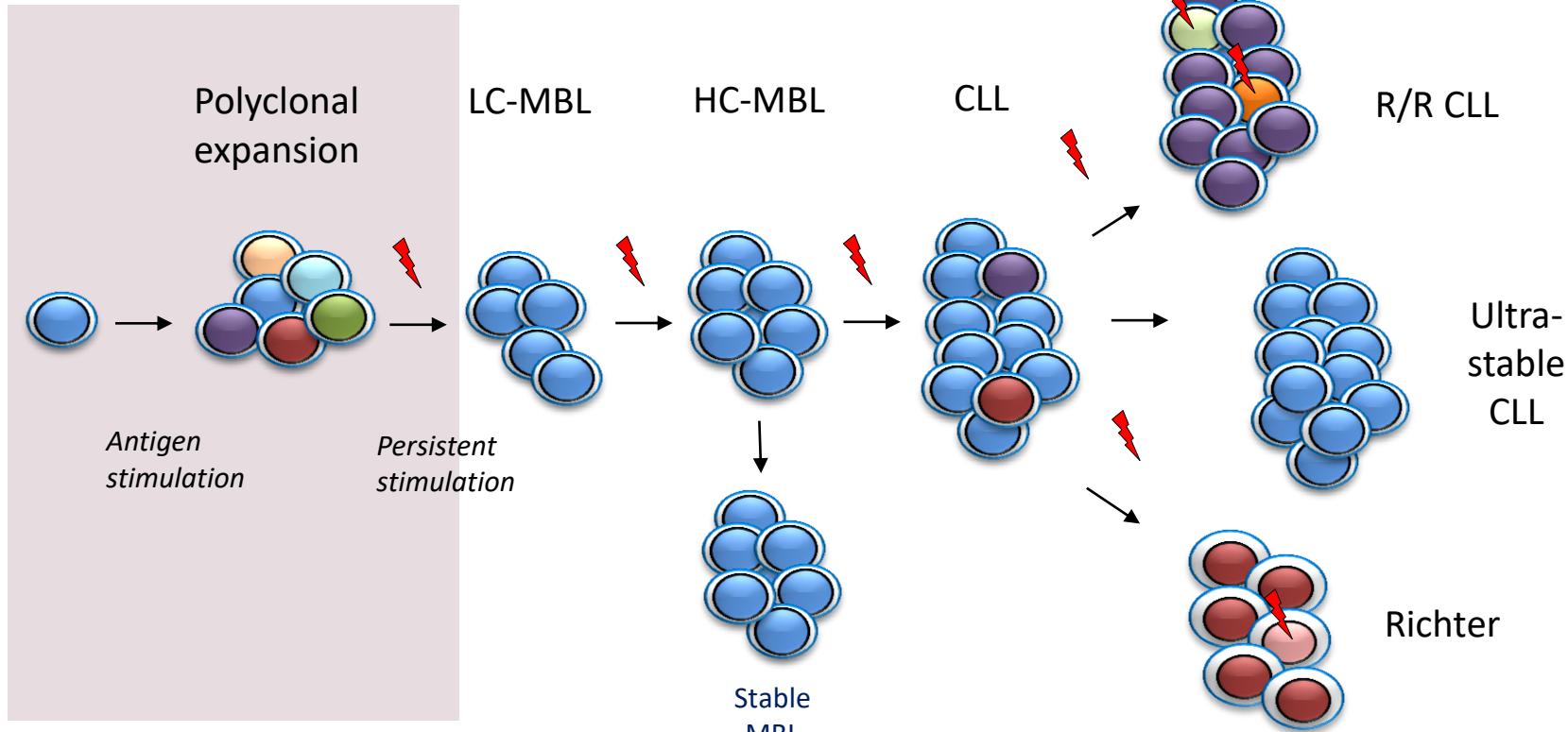


3 000 000 000 bp

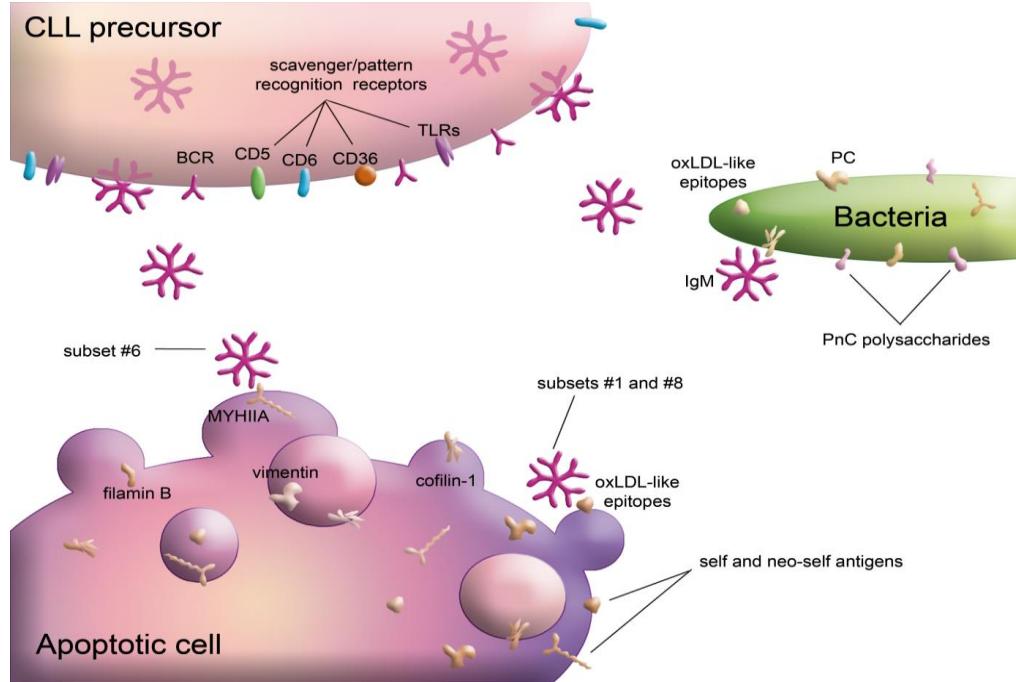
21 000 genes

50-500 genes

CLL pathogenesis

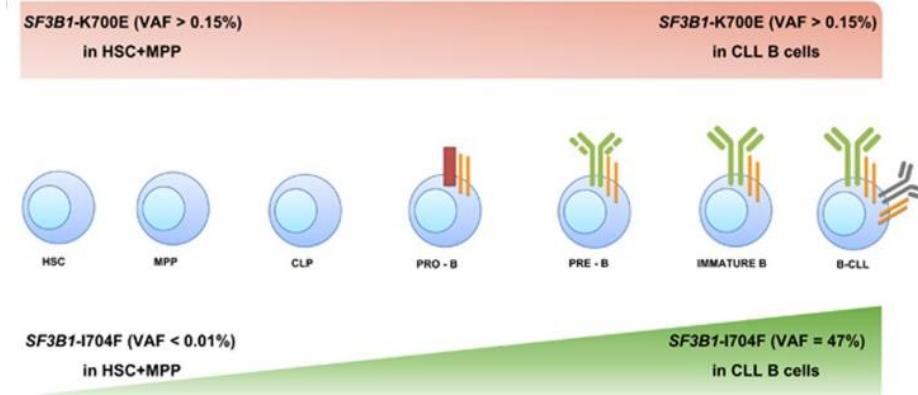
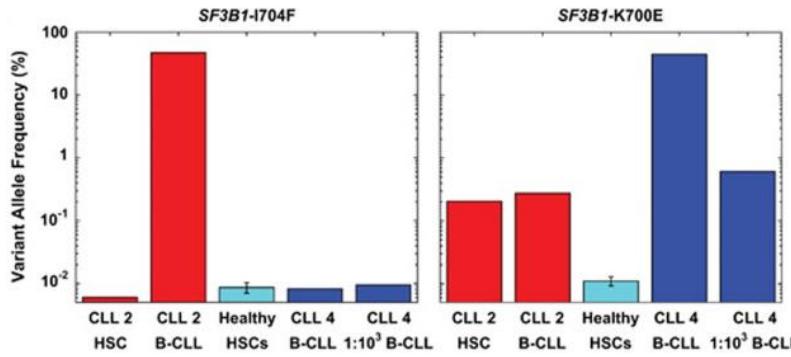
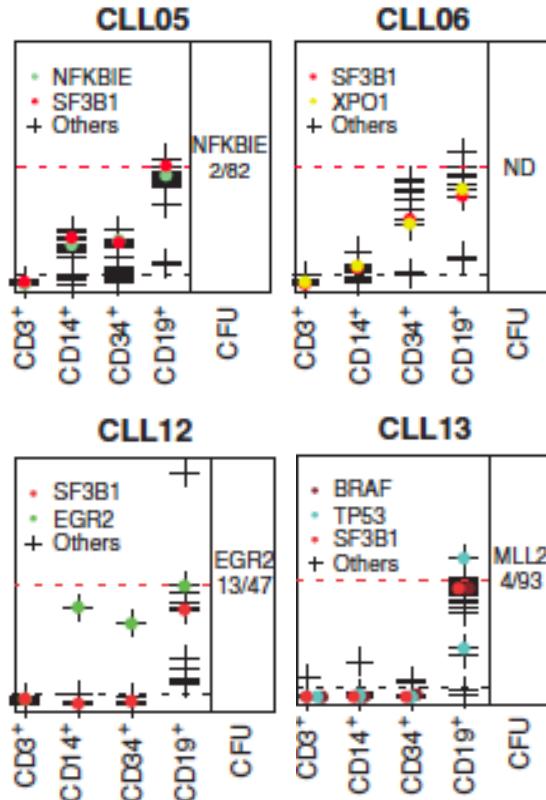


Antigens are involved in CLL development

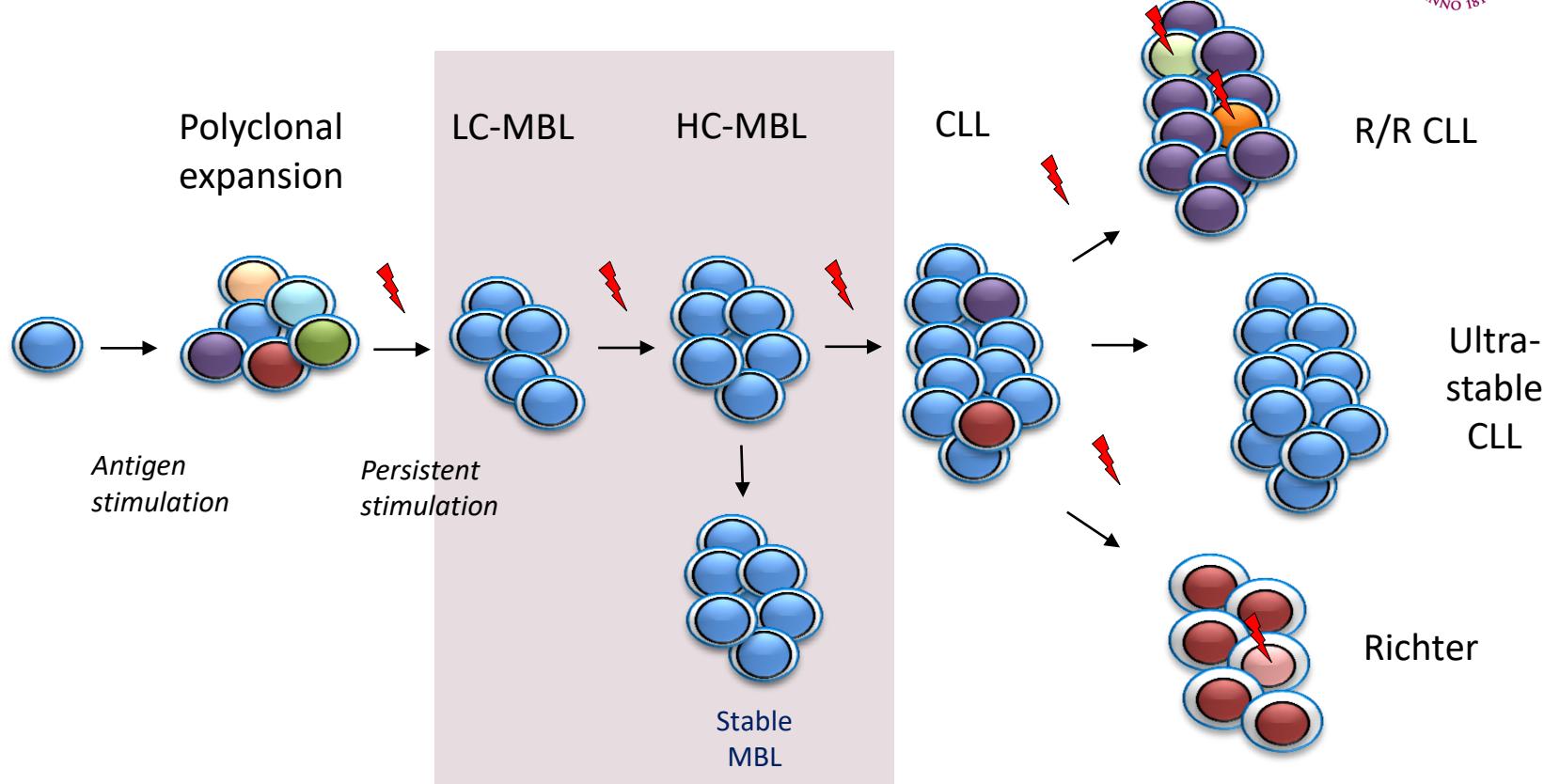


- Gene mutations can be found in hematopoietic progenitor cells
- Enrichment of specific genetic aberrations in patients carrying stereotyped B cell receptors

Gene mutations in progenitor cells

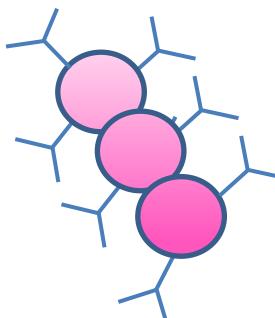


CLL pathogenesis

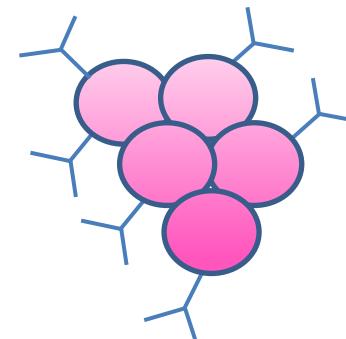


Whole-genome sequencing in MBL and ultra-stable CLL

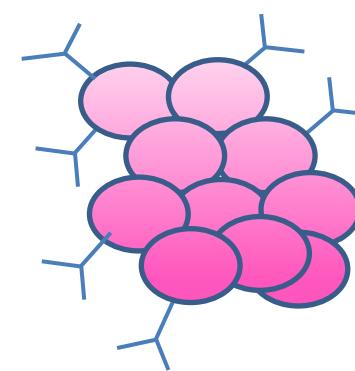
Low-count
MBL (n=6)



High-count
MBL (n=5)

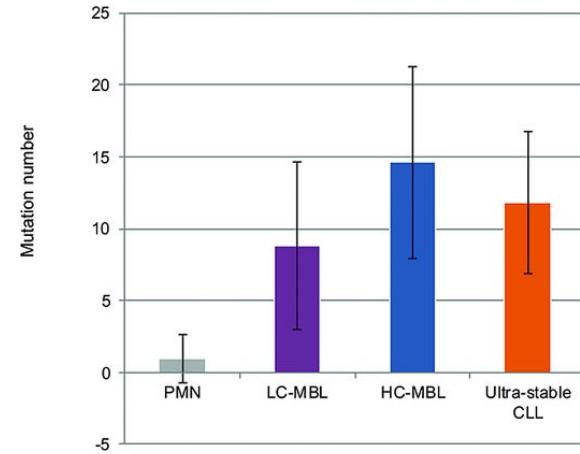
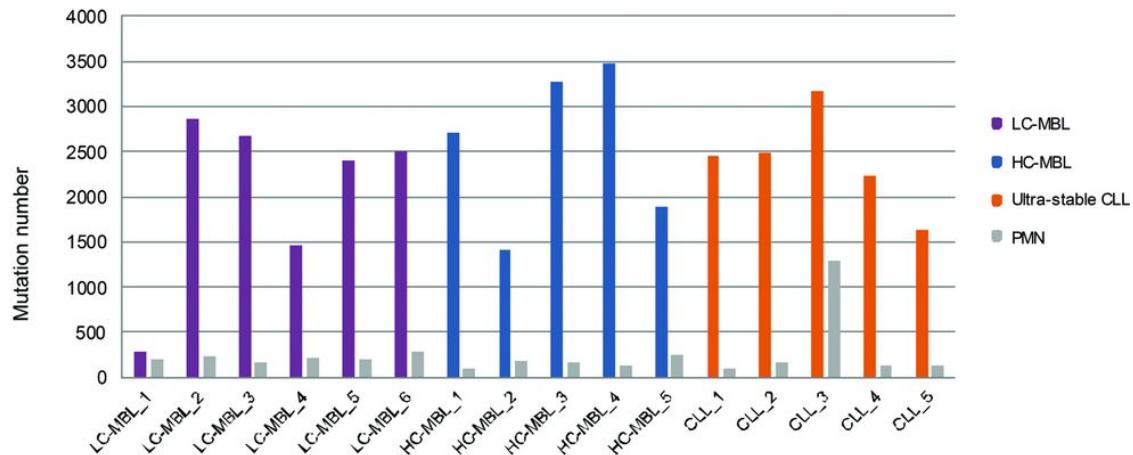


Ultra-stable
CLL (n=5)



- WGS (30x) on CLL/MBL cells, PMN cells and buccal cells
- Ultradeep sequencing (11 genes) in 28 MBL/CLL cases

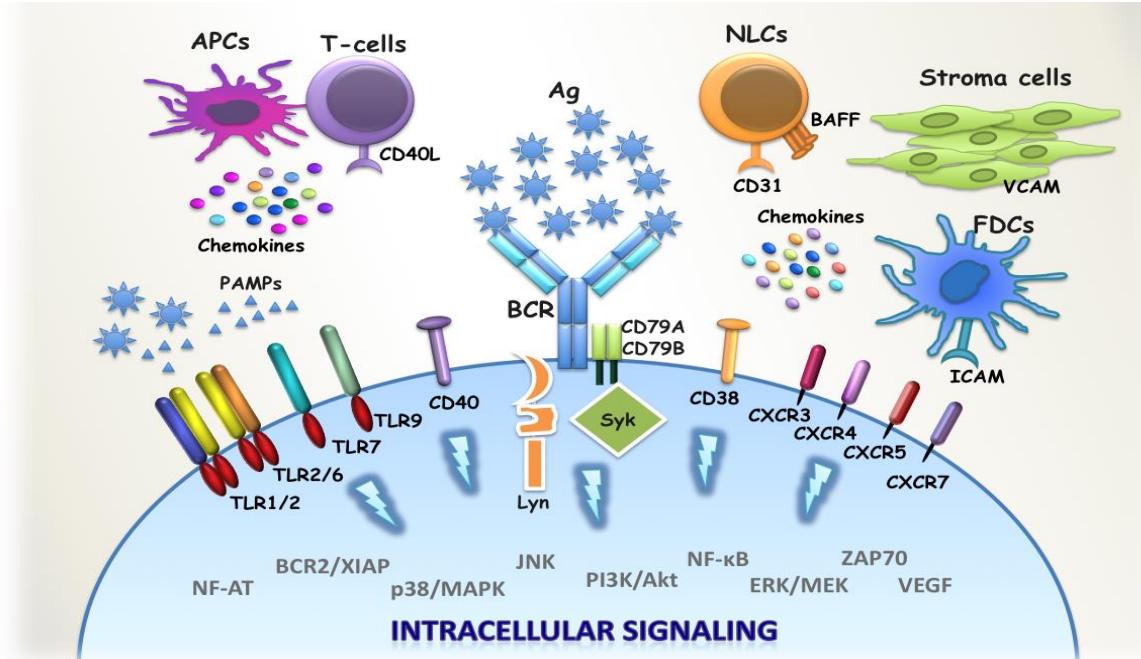
Indistinguishable genomic landscapes in MBL and ultra-stable CLL with low frequency of driver mutations



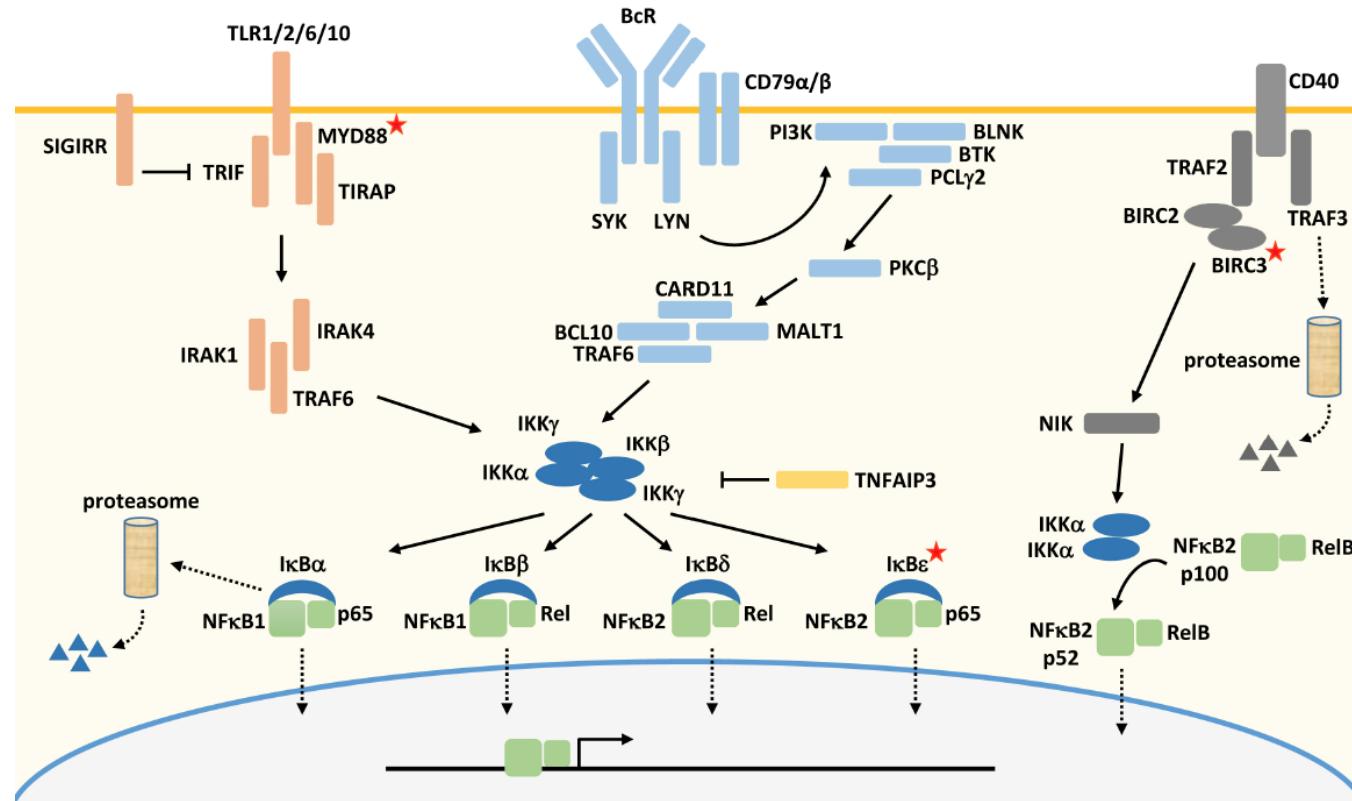
- WGS: on average 2000-2500 somatic mutations per case
- Few CLL 'driver' mutations detected

B-cell receptors in CLL

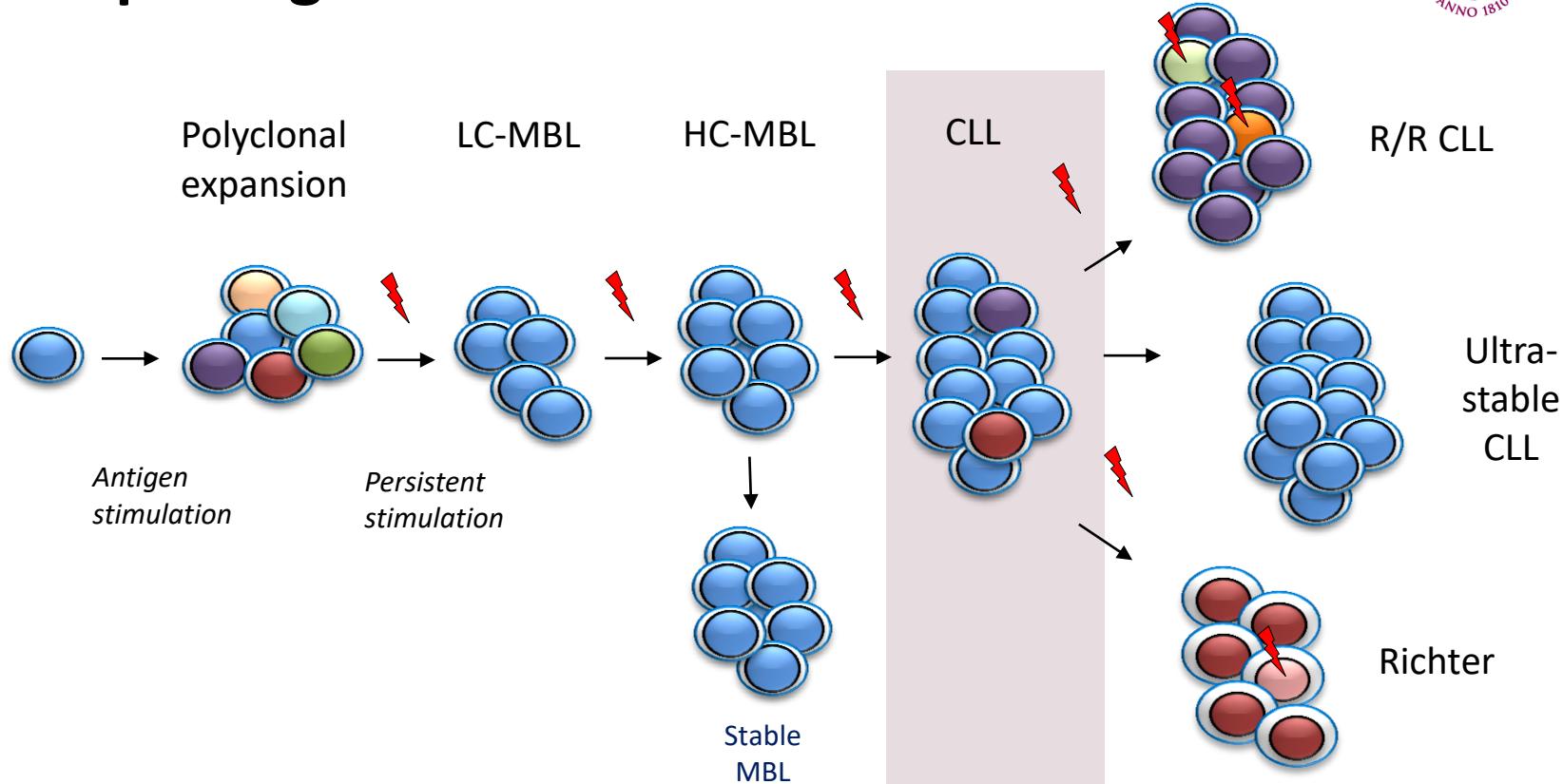
Linking the outside with the inside



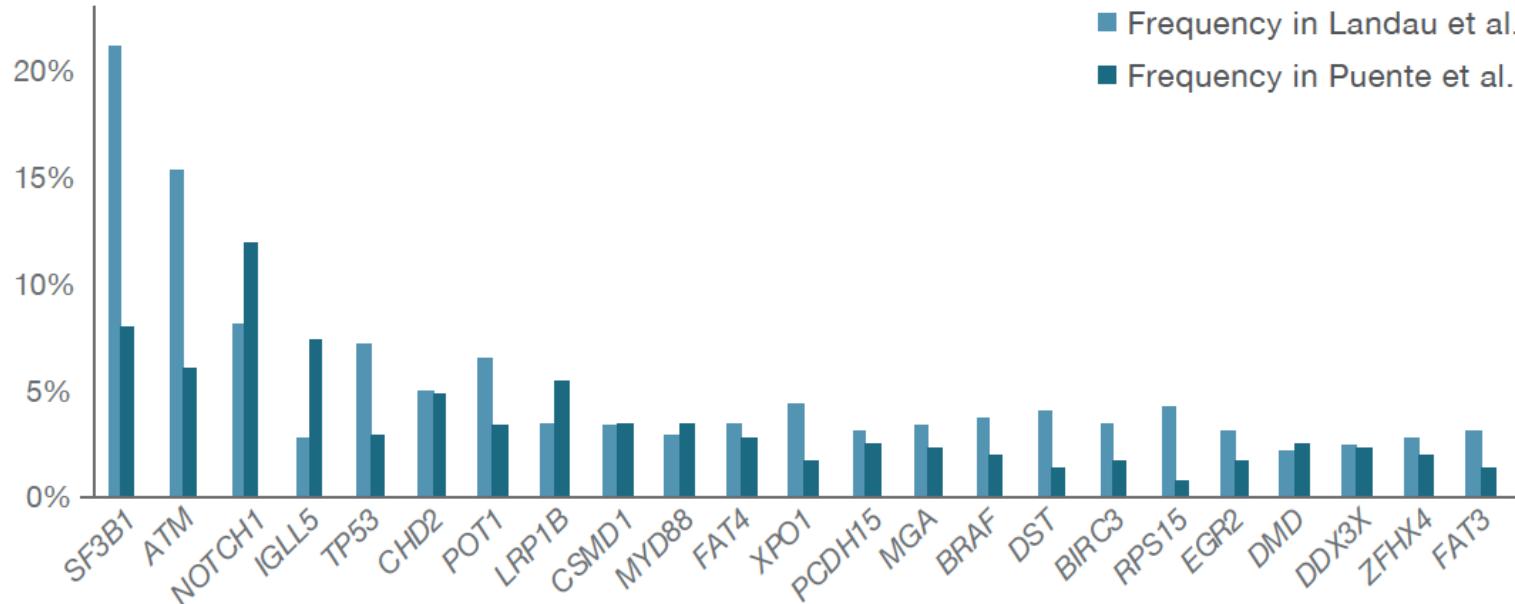
Few mutations in the B-cell receptor pathway



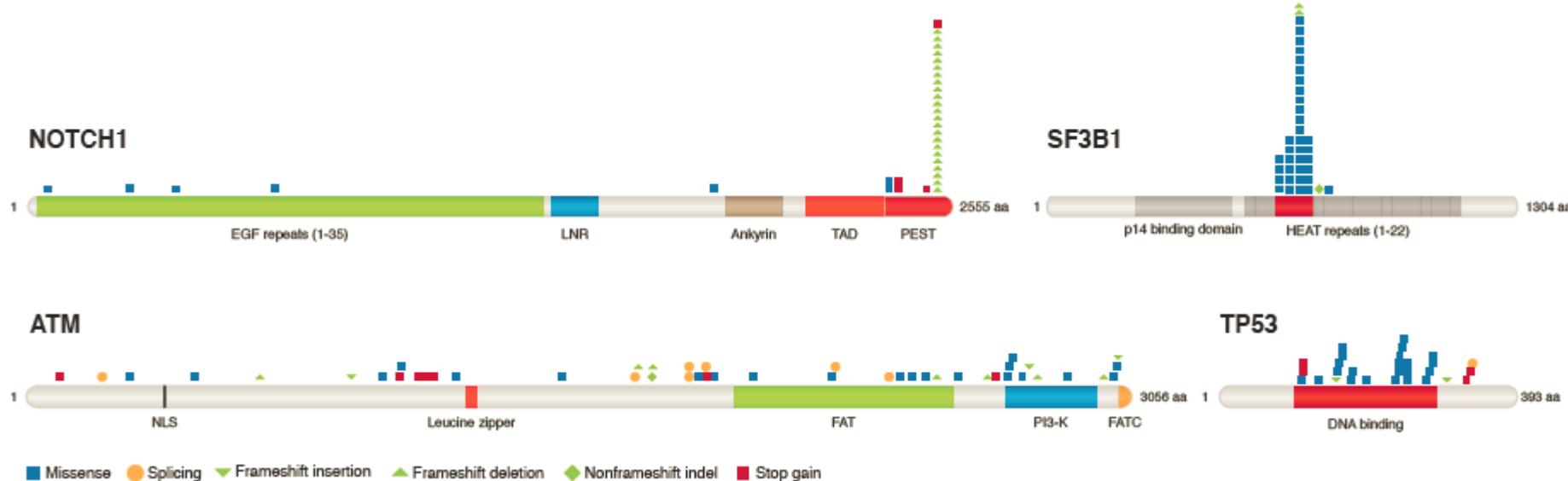
CLL pathogenesis



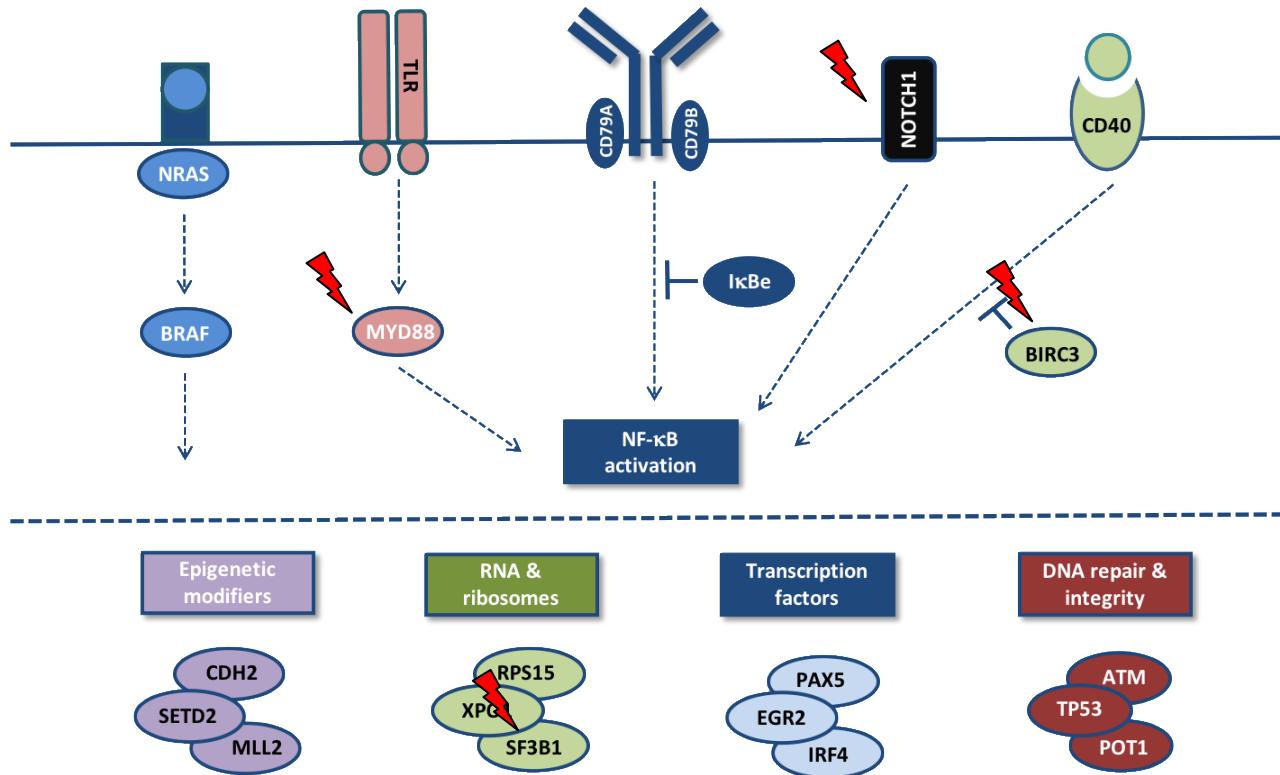
The landscape of CLL 'driver' gene mutations



Peaks in the CLL landscape

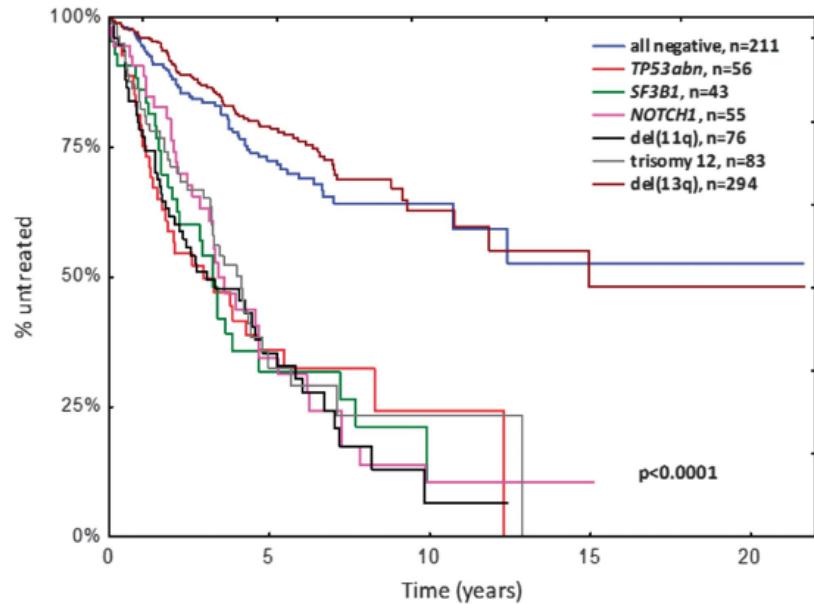
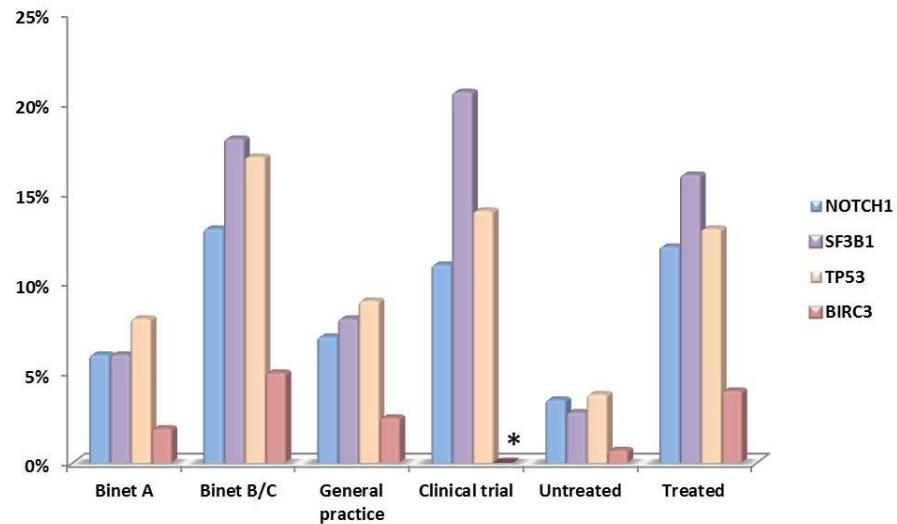


Recurrently affected pathways/processes

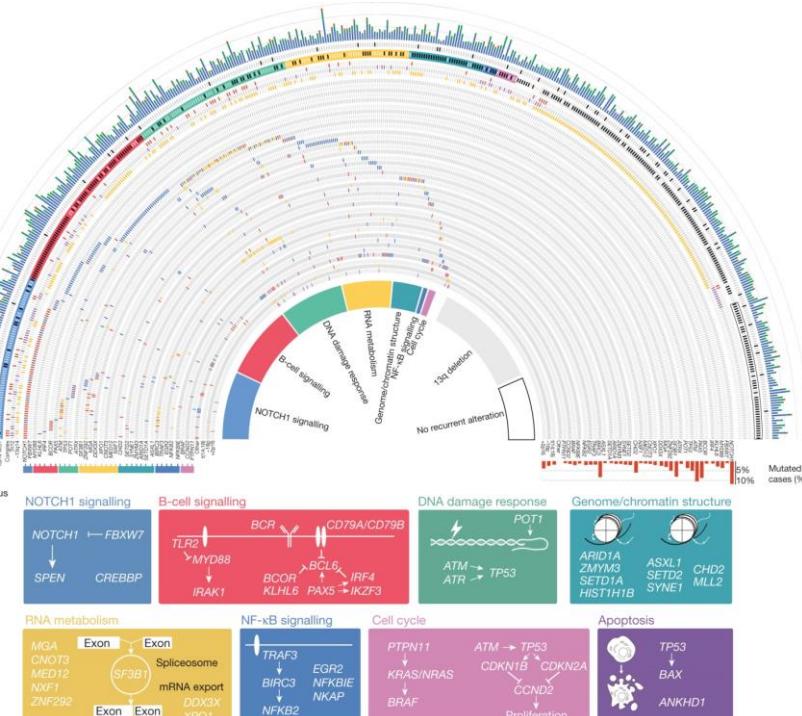
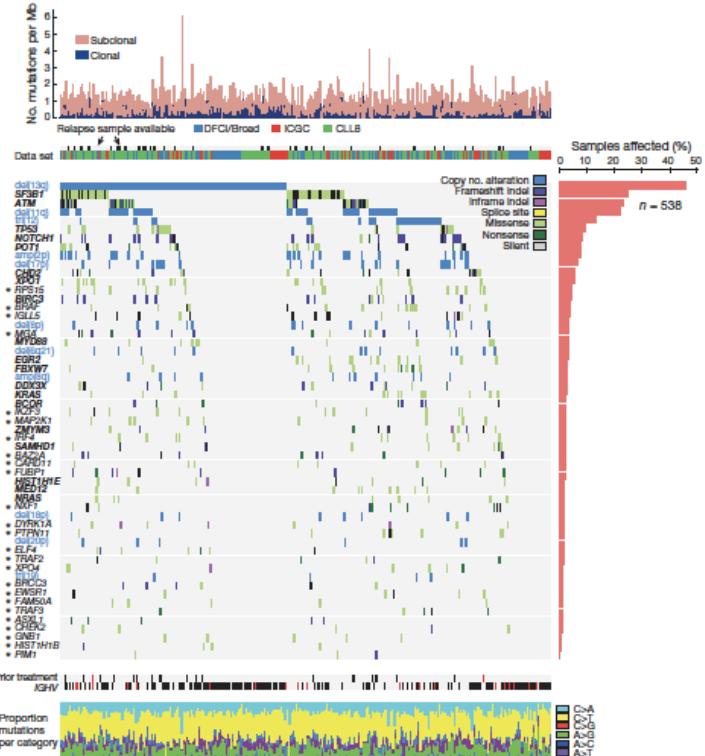


Recurrent mutations refine prognosis in CLL

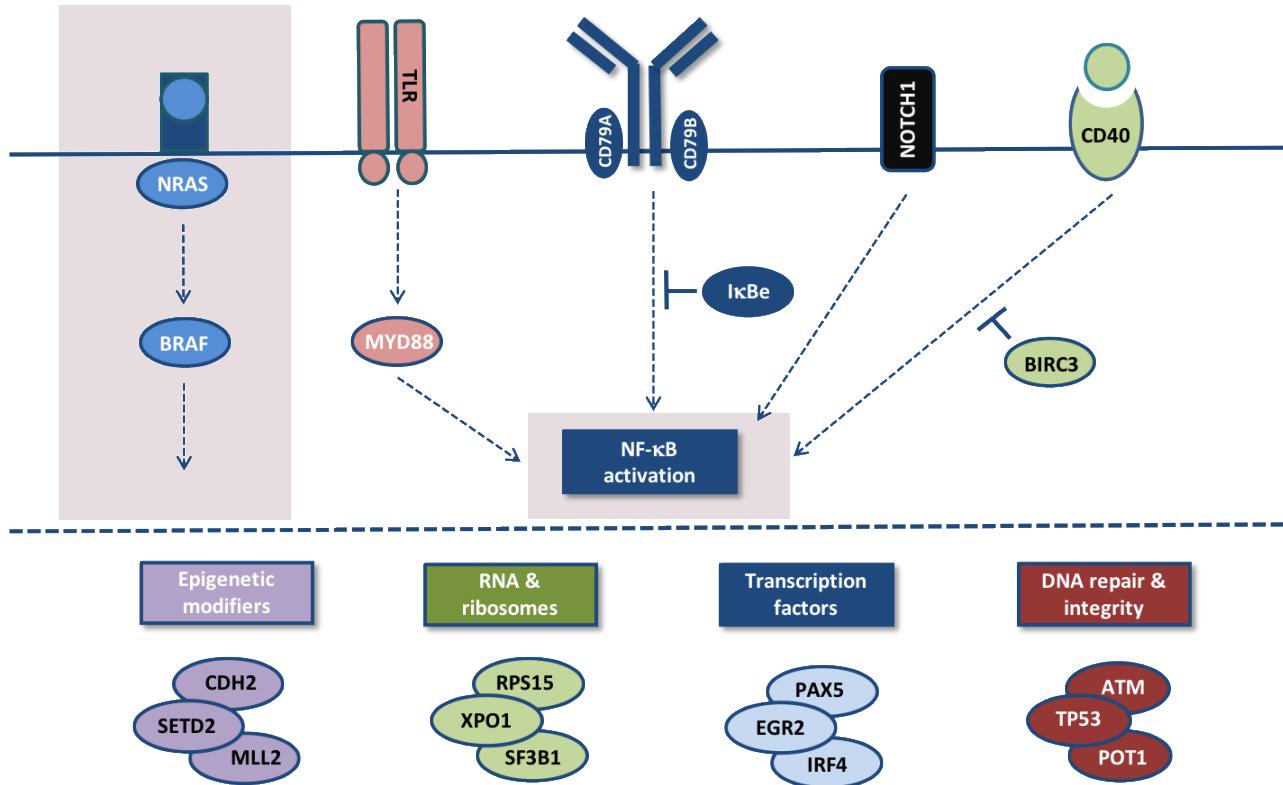
n=3490 pts



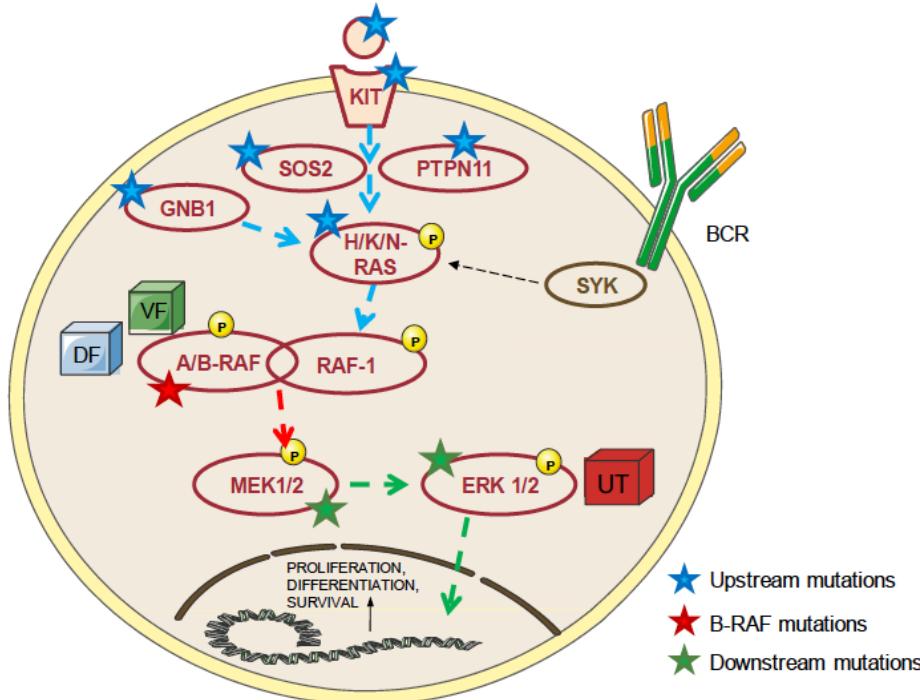
>1000 pts - reaching completion?



Relevance of 'tail genes'?

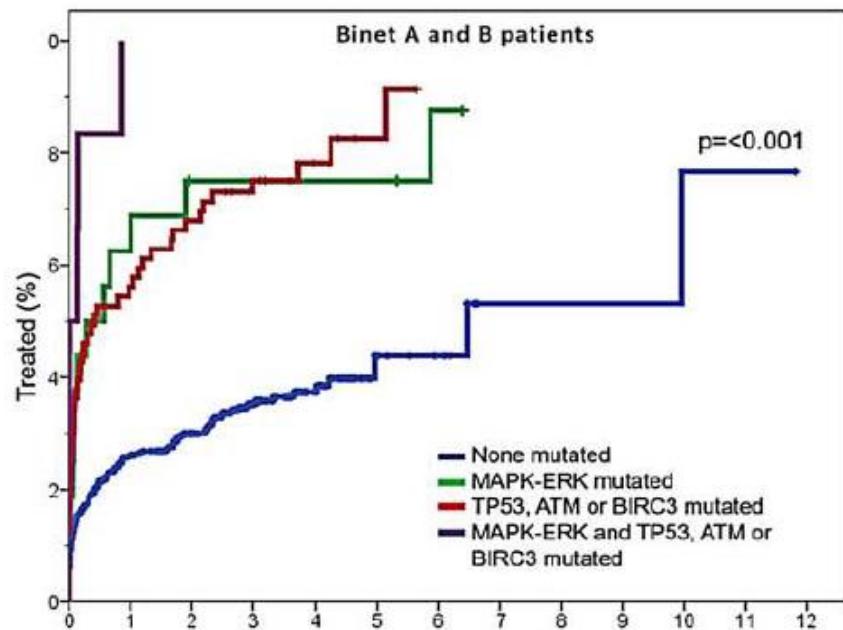
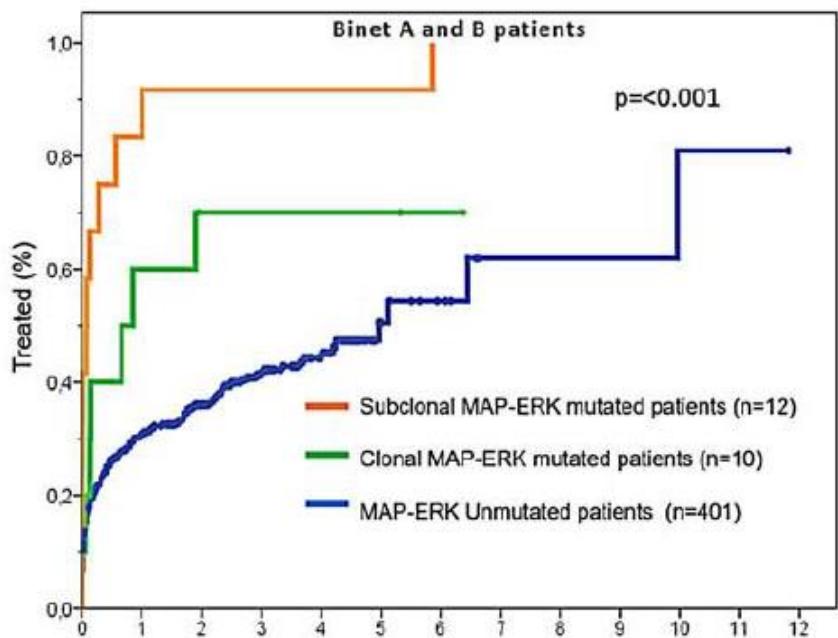


RAS-BRAF-MAPK-ERK pathway mutations define a clinically aggressive subgroup



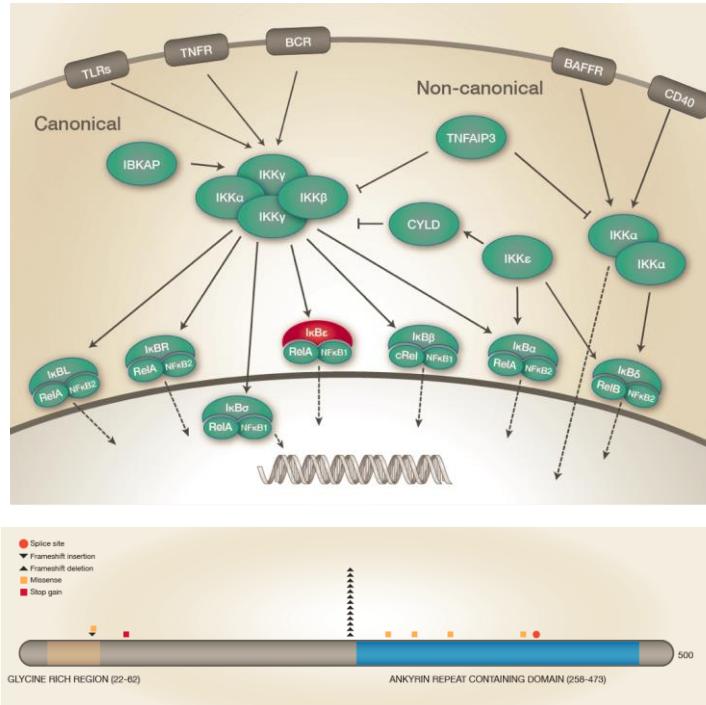
- 25 of 452 patients (5.5%)
- *BRAF* mutations in 9 patients
- Upstream: *KITLG*, *KIT*, *PTPN11*, *GNB1*, *KRAS* and *NRAS* mutations in 12 patients
- Downstream: *MAPK2K1*, *MAPK2K2*, and *MAPK1* mutations in 5 patients

RAS-BRAF-MAPK-ERK pathway mutations associated with short time to first treatment

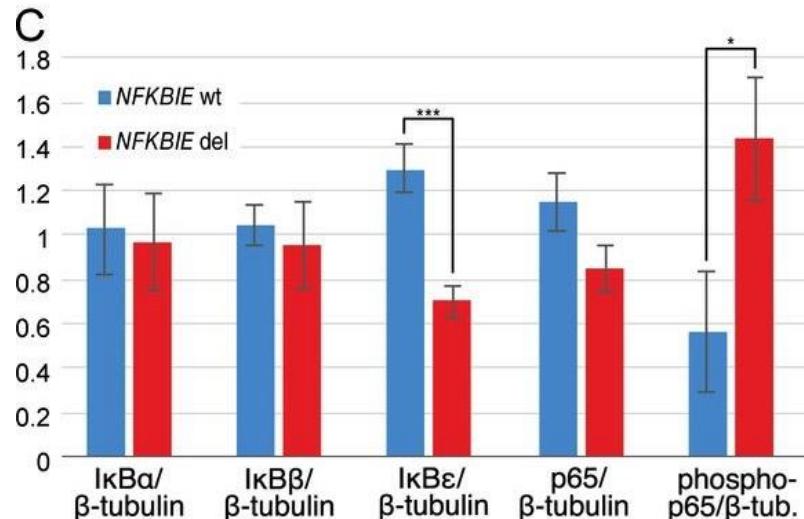
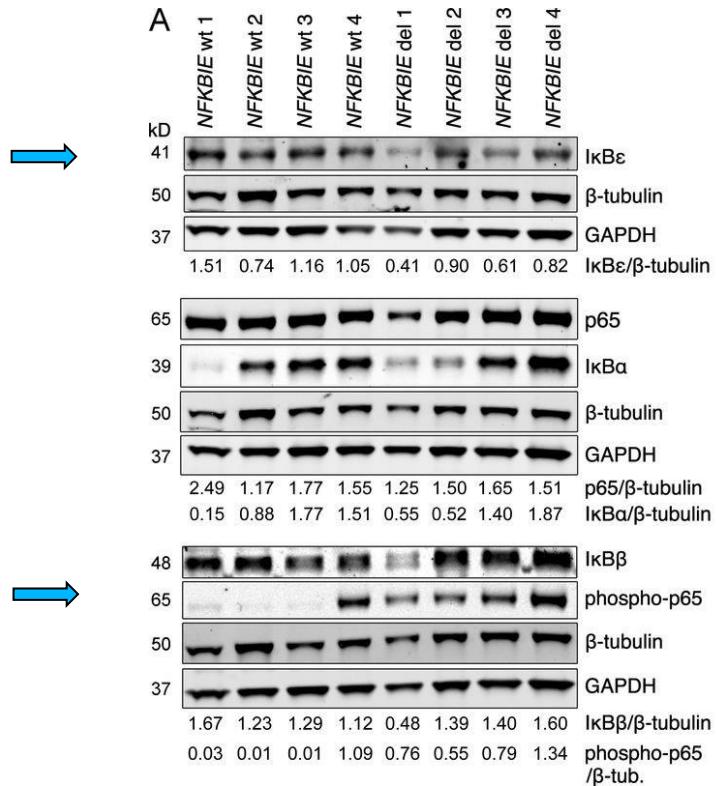


Targeted sequencing of NF-κB in CLL

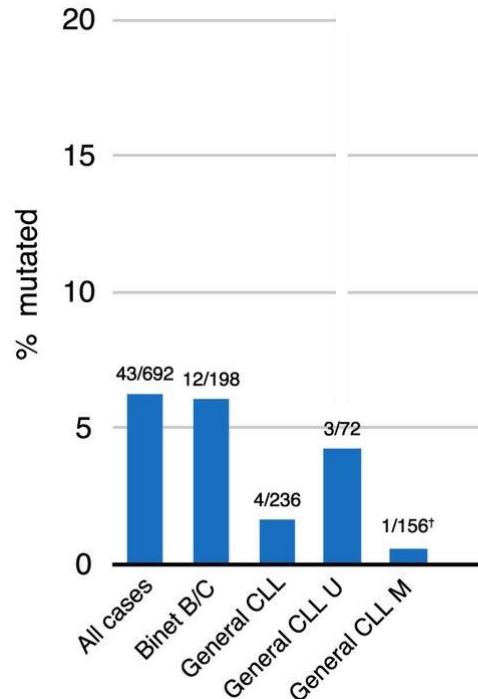
- 18 NF-κB genes
- HaloPlex gene panel
- 315 CLL patients
- **Recurrent 4-bp *NFKBIE* deletion**
- Encodes a negative regulator i.e. IκB ϵ



Reduced I κ B ϵ leads to increased p65

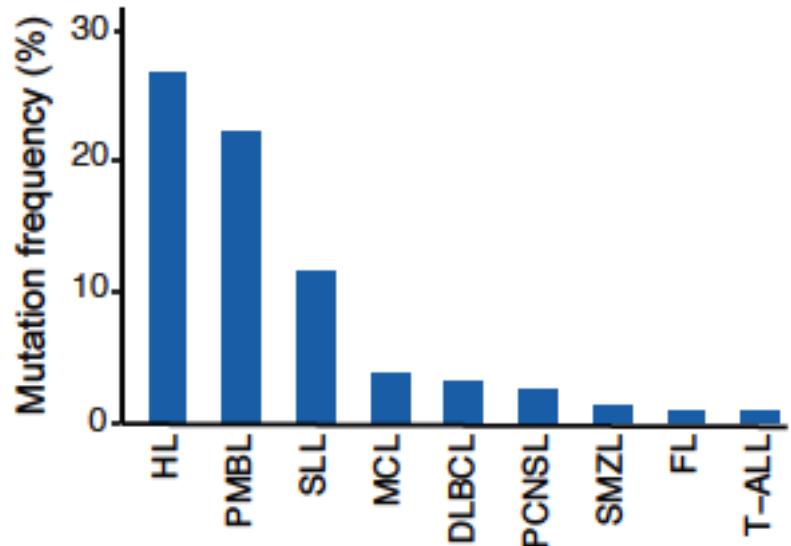


Frequency of *NFKBIE* deletion in CLL

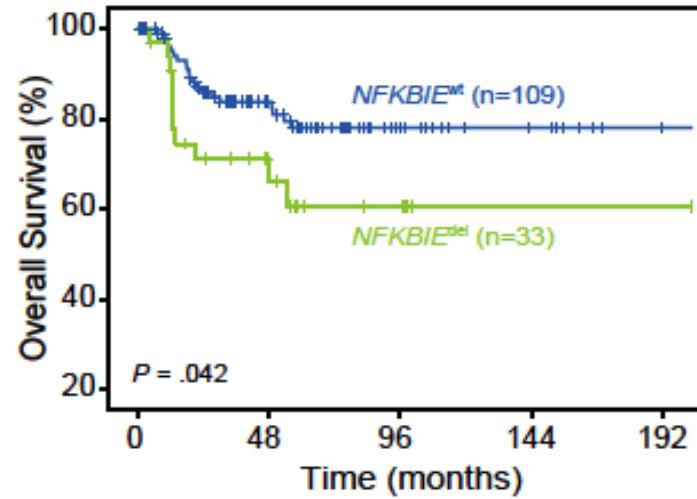


Associated with aggressive disease & enriched in patients carrying stereotyped B-cell receptors

NFKBIE deletion in lymphomas

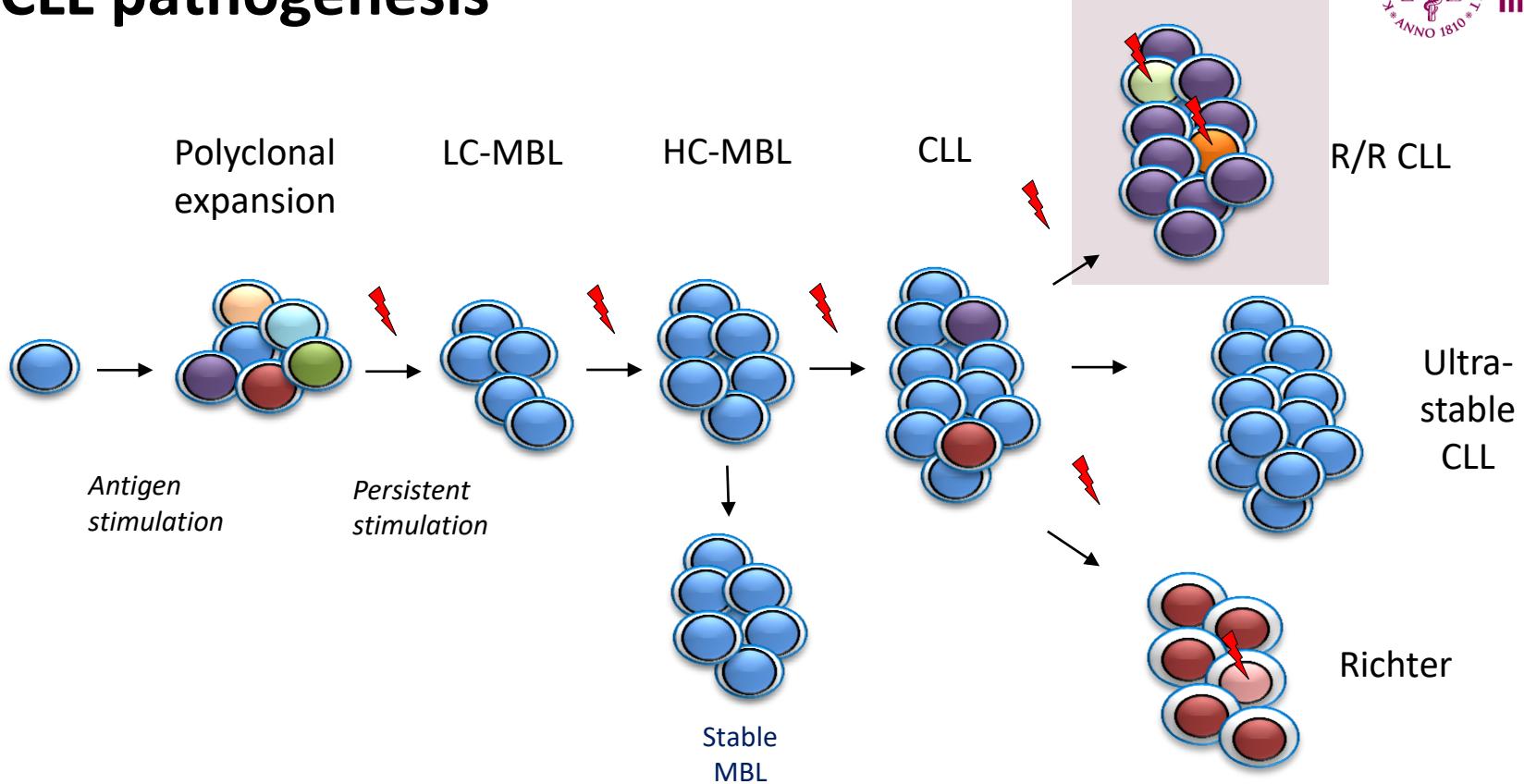


Primary mediastinal B-cell lymphomas

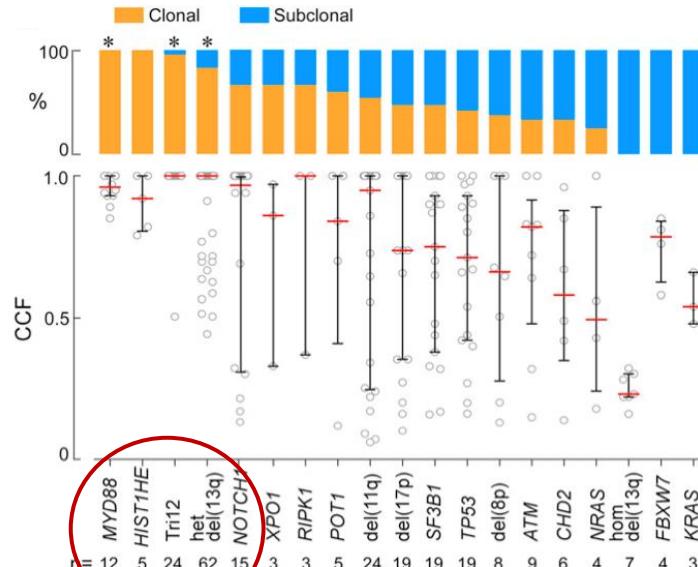
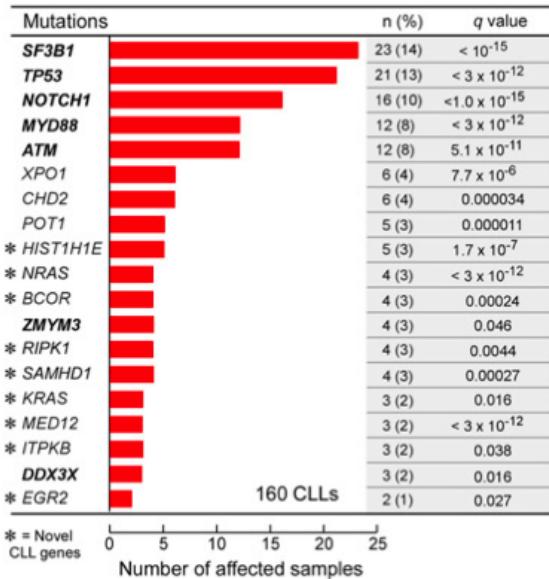


NFKBIE-deleted pts more likely to be refractory to primary chemotherapy compared to wildtype patients (25% vs. 6%, $P=.022$).

CLL pathogenesis



Driver versus passenger in CLL?

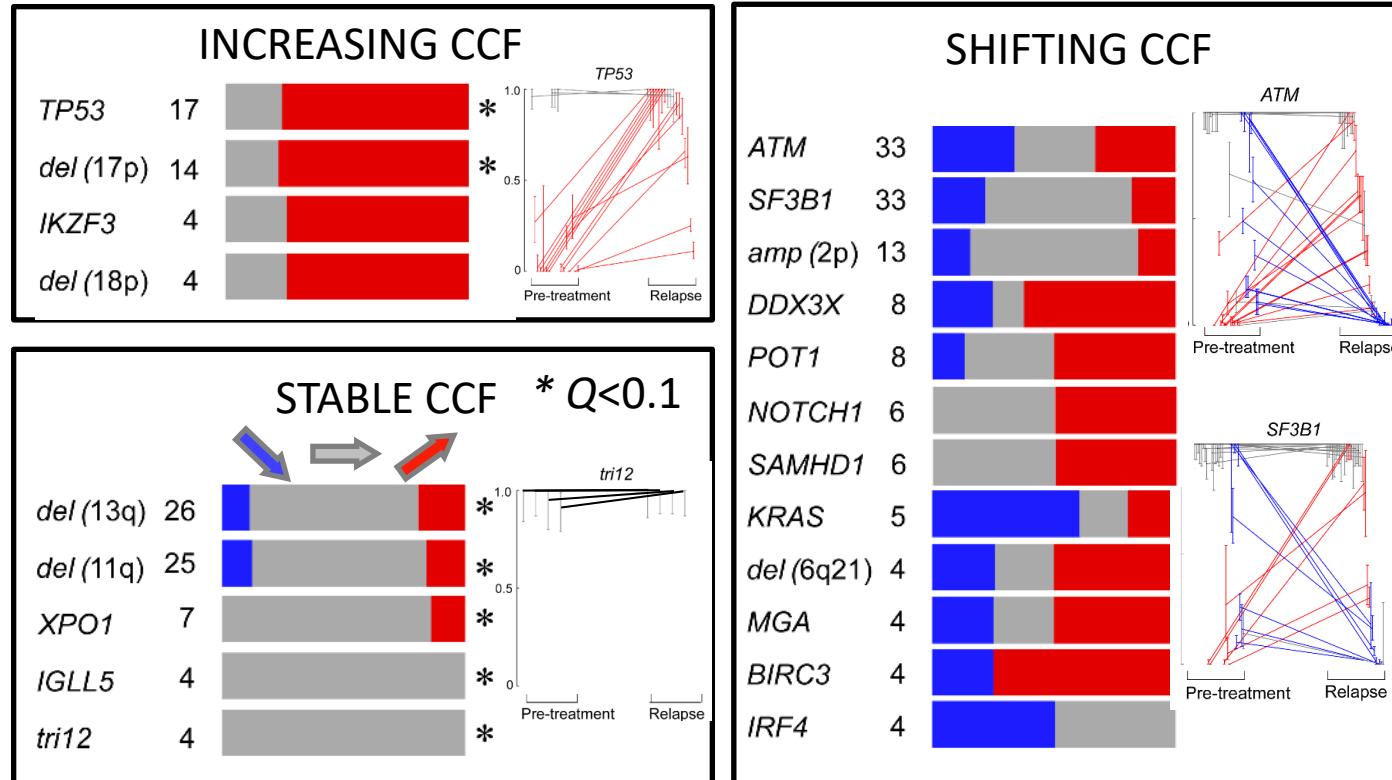


Presence of subclonal driver impacts outcome.

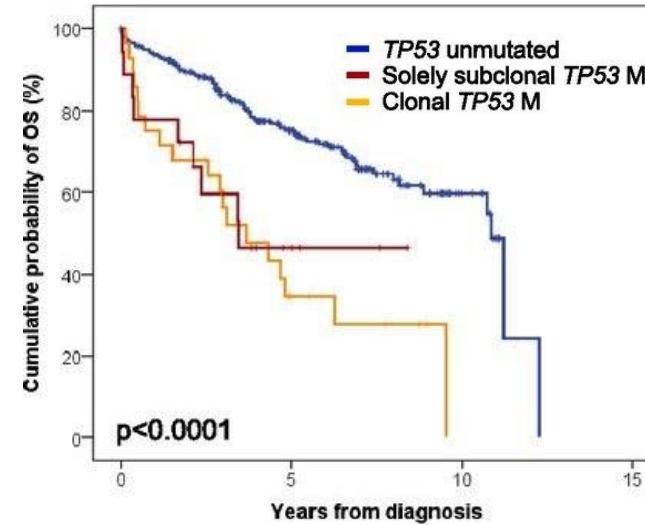
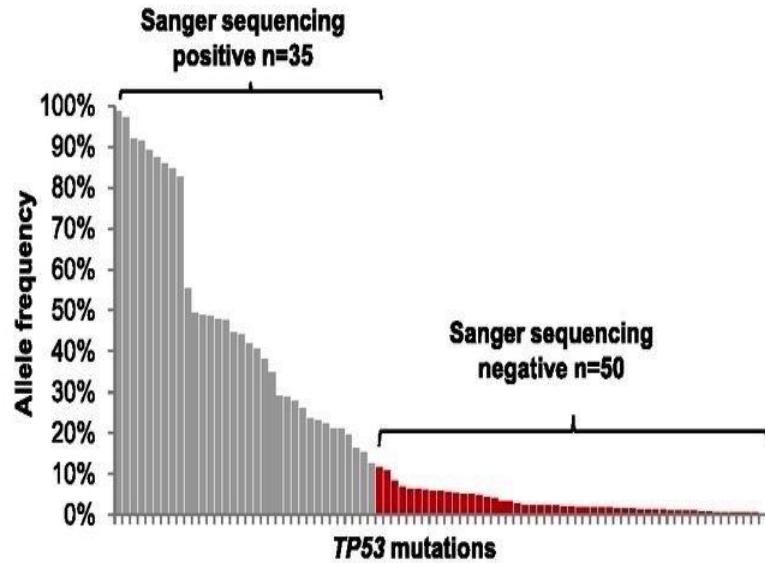
Subclonal evolution in CLL treated within the CLL8 trial



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Small clones matter: the case of *TP53*

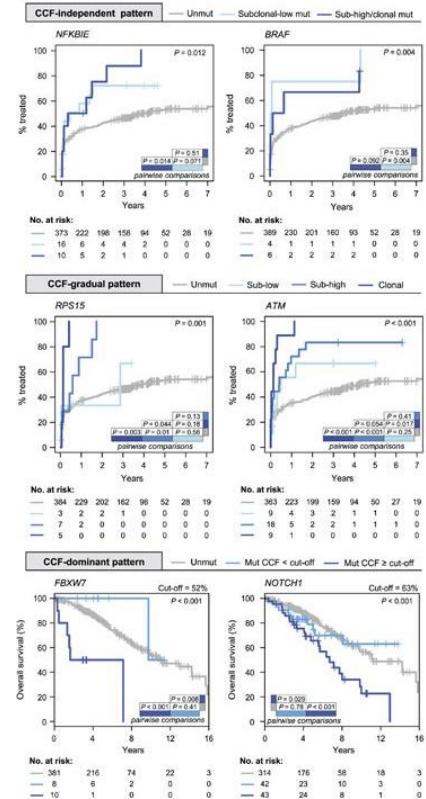
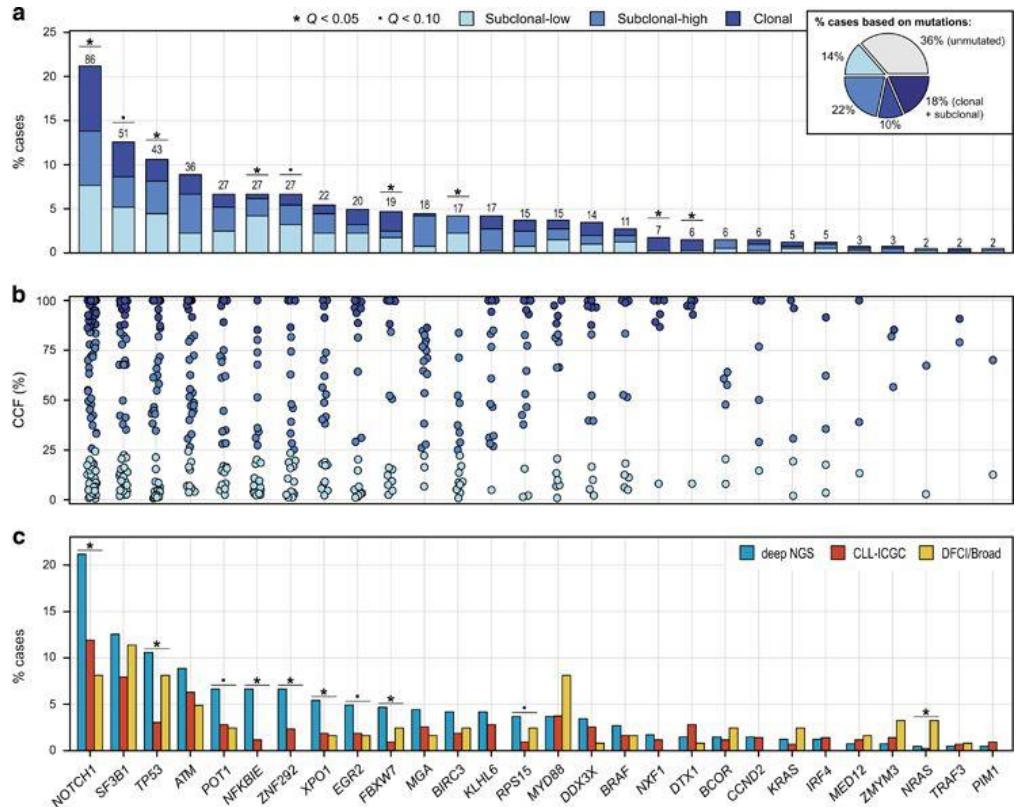


28/309 (9%) untreated CLL (median allele frequency: 2%)

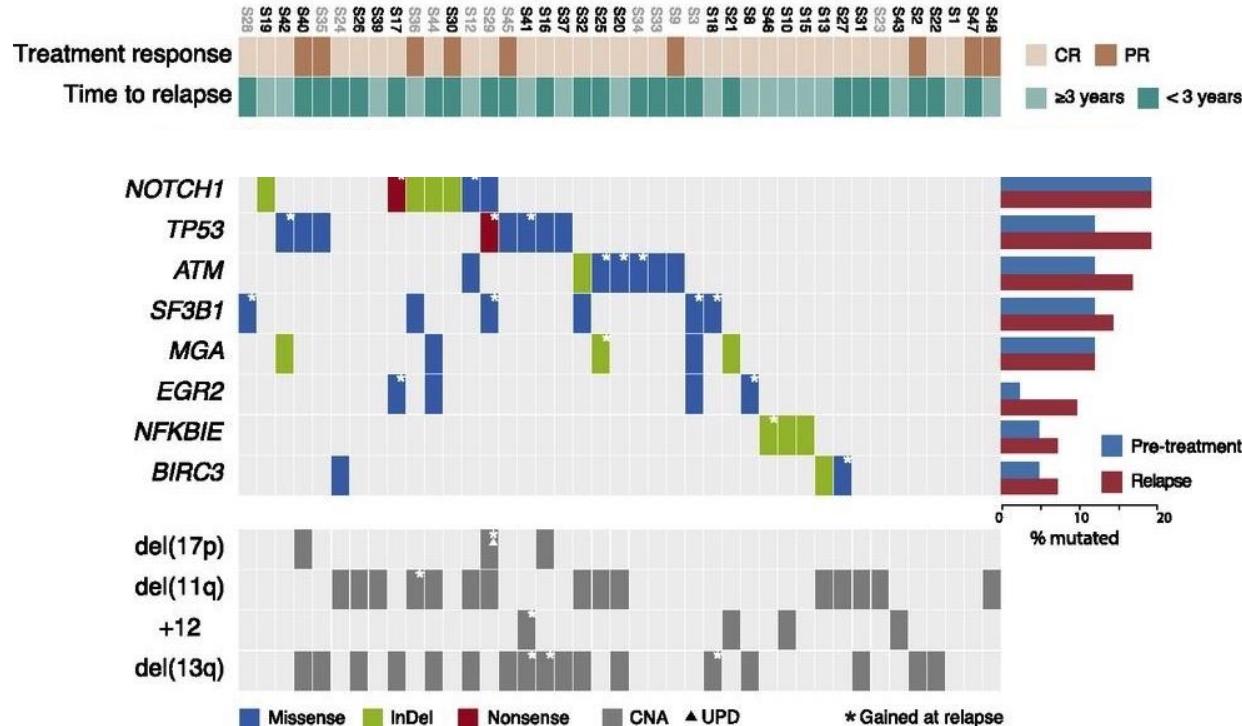
Not only *TP53*...



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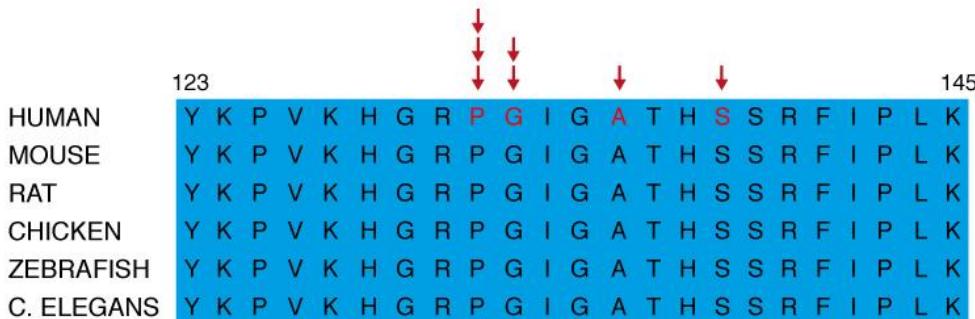
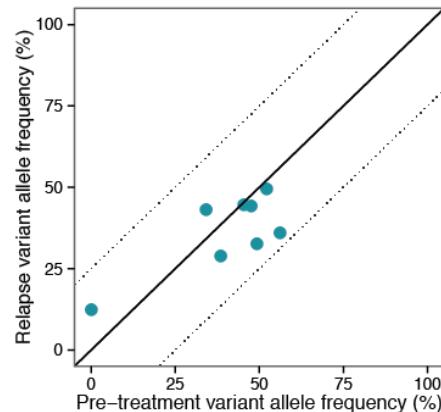
Mutation spectra in FCR-relapsing patients



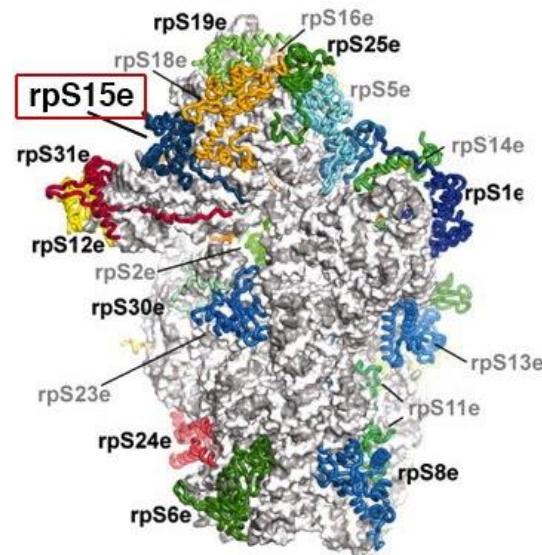
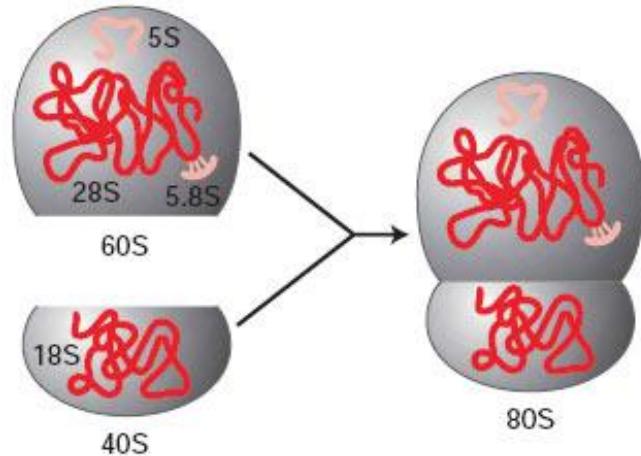
RPS15 mutations in a ‘hotspot’ region

- Missense mutations, majority stable at clonal level
 - 7/8 clustered to a 7 amino acid long, evolutionarily conserved region

RPS15

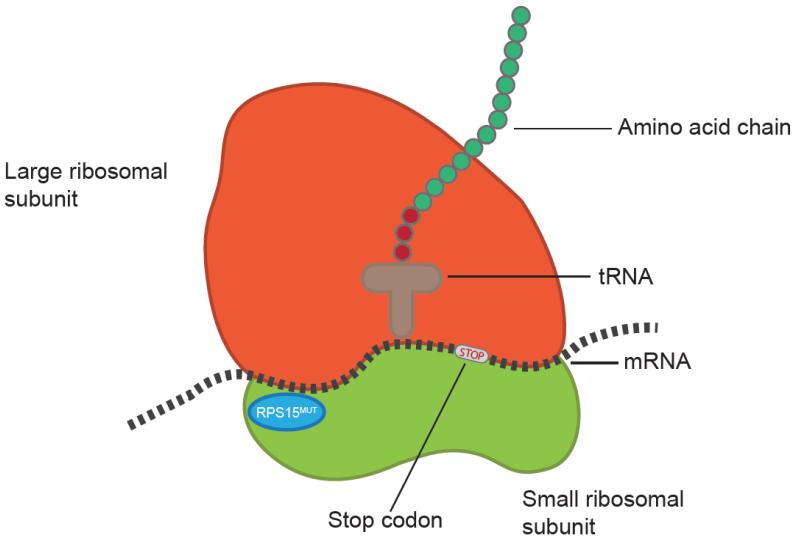
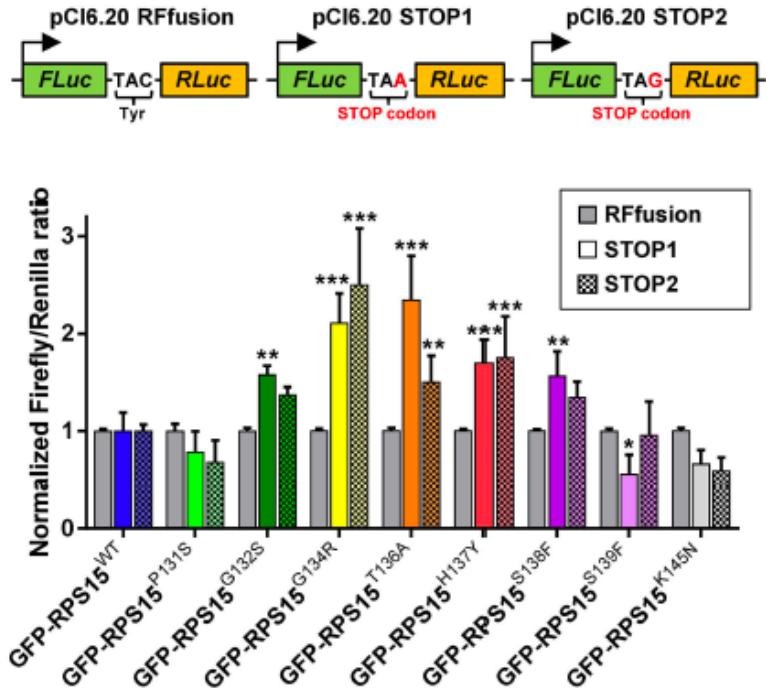


RPS15 – a component of the 40S subunit

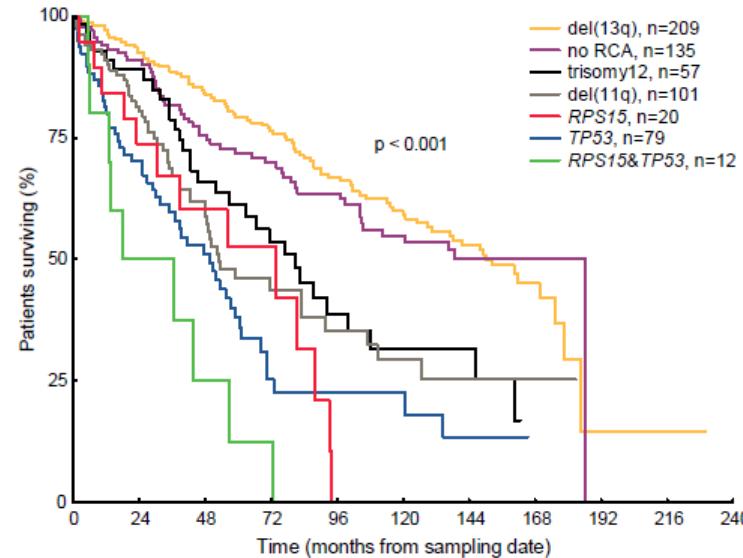
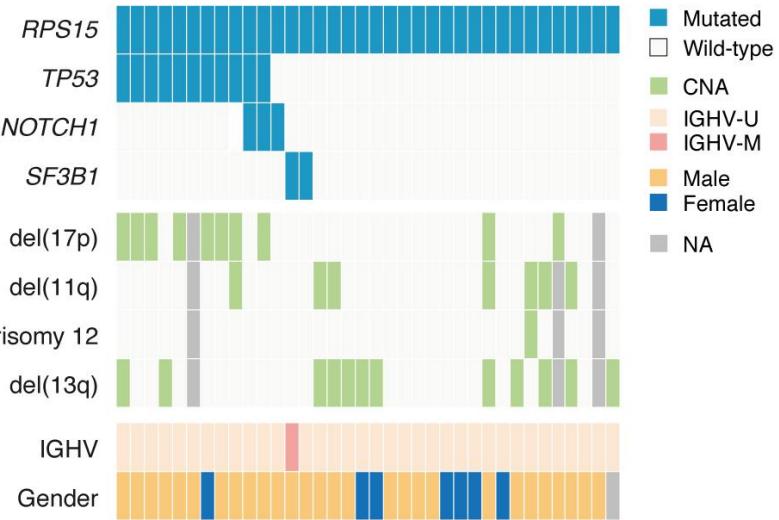


- Protein translation
- Potential role in regulating the MDM2-p53 axis

Altered ribosome activity/fidelity linked to *RPS15* mutations

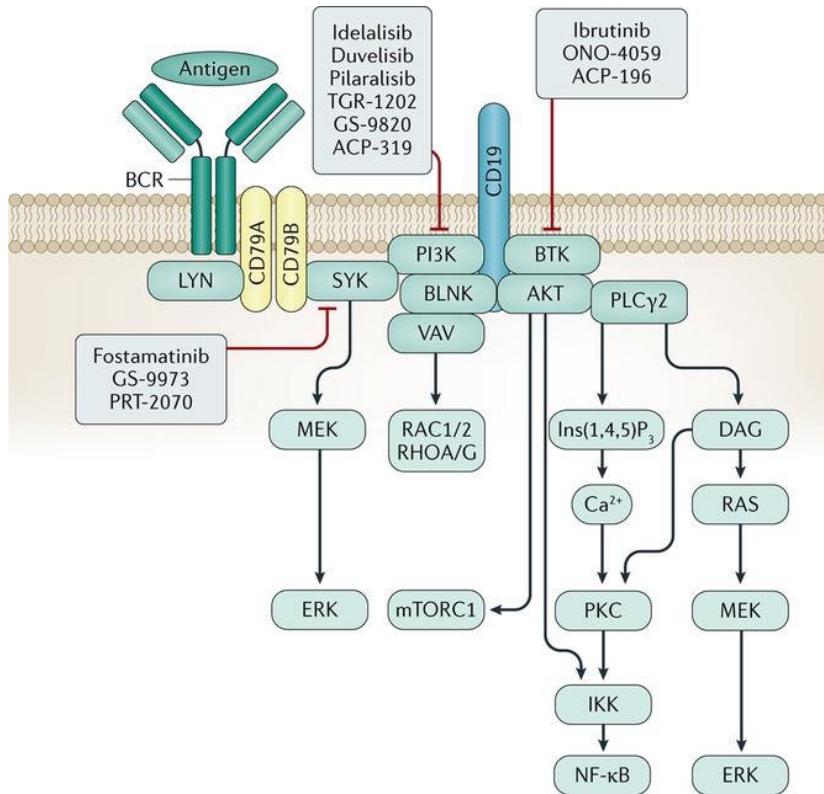


Clinicobiological associations - *RPS15* mutations



The new era...

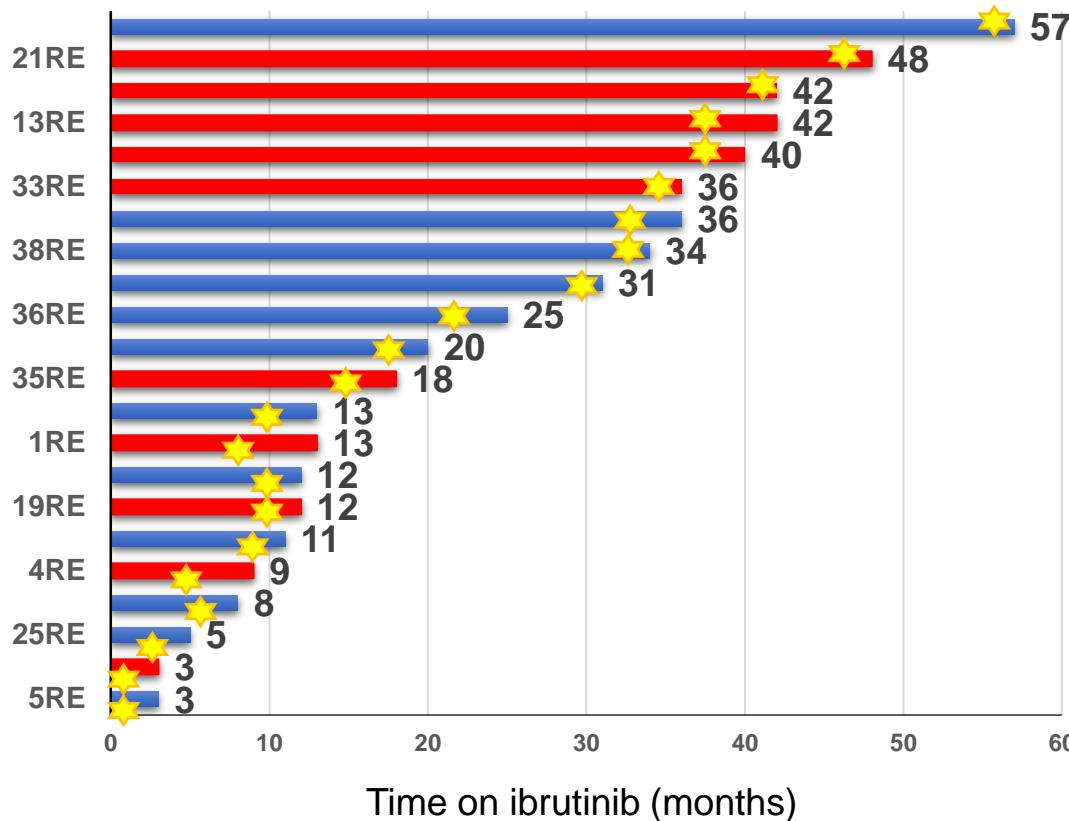
- BTK inhibitors
- PI3K δ inhibitors
- BCL2 inhibitors



Resistance mutations on ibrutinib in relapsed CLL

Ref.	Pts with mut/total	Analytical Method	BTK mutations	VAF, %	PLCγ2 mutations	VAF, %
Woyach, 2014	6/6	WES	C481S	17-60	R665W; L845F S707Y	38 29 8
Ahn, 2017	9/10	High sensitivity NGS; ddPCR	C481S C481R	1.6-78.2 15.8	6nt del; R665W P664S; S707Y; L845F	0.1-18.3
Woyach, 2017 (retrospective); 8/8 (prospective)	40/46 8/8	Targeted Deep Sequencing	C481S C481R C481F C481A	0.2-94.8 18.1 1.1-100 45.3	R665W; S707P; S707F; S707Y; L845F; D993Y; L845/846del	3.6-44
Burger, 2016	2/4	WES; ddPCR	C481S	NR	M1141R; S707F; M1141K; D993H	12.0-35.0 (CCF)
Landau, 2017	5/7	Targeted Deep Sequencing	C481S	2.2-78.2	R665W; S707Y; L845F	0.2-4.7
Kadri, 2017	1/3	Targeted Deep Sequencing	C481S C481R	8.5-90.0 2.5	NR	NR

Multicenter study on ibrutinib resistance



- Deep sequencing of *BTK* and *PLCG2*
- Relapsing (n=22) and responding pts (n=34)
- 10/22 relapsed cases showed *BTK* (10 pts) or *PLCG2* (4 pts) mutations.

★ Progression and sampling
■ *BTK* mutated +/- *PLCG2* mutated
■ *BTK* and *PLCG2* wildtype

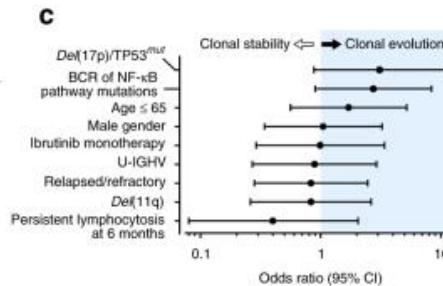
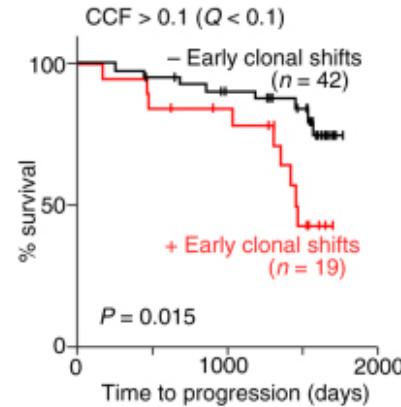
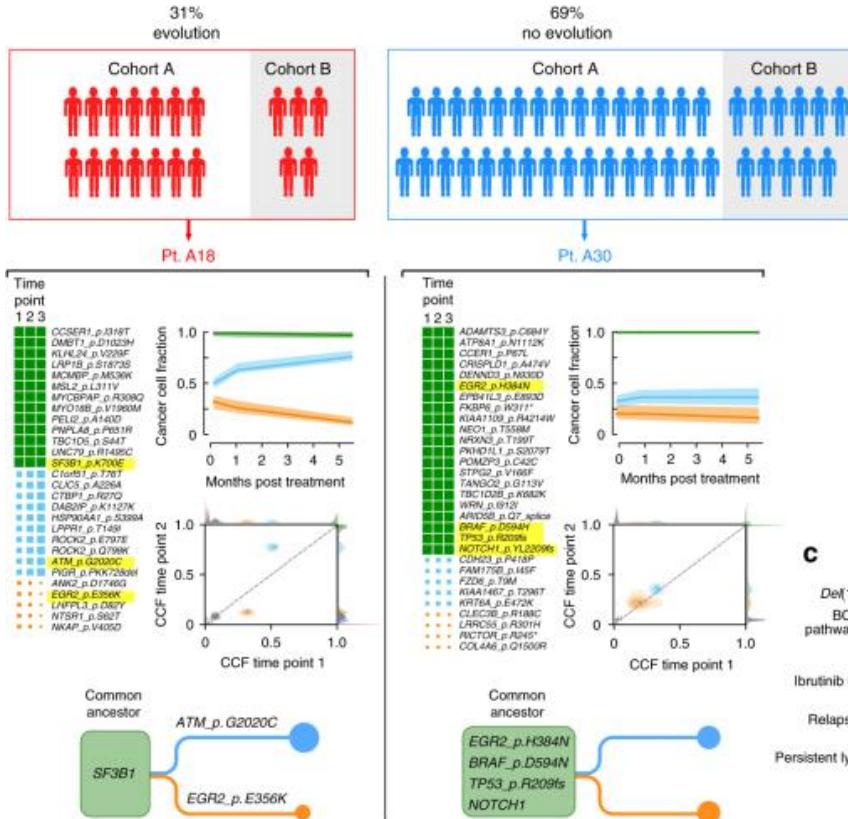
BTK mutations

Pt #	Gene	Exon	AA change	WT/MT codon	VAF, %
35RE	<i>BTK</i>	15	C481R	c.T1441C	36.57
19RE	<i>BTK</i>	15	C481S	c.T1441A	51.80
		15	C481S	c.G1442C	13.20
21RE	<i>BTK</i>	15	C481S	c.G1442C	29.30
13RE	<i>BTK</i>	15	C481S	c.G1442C	34.48
1RE	<i>BTK</i>	15	C481S	c.G1442C	4.37
4RE	<i>BTK</i>	15	C481S	c.G1442C	19.29
7RE	<i>BTK</i>	15	C481S	c.G1442C	35.22
16RE	<i>BTK</i>	15	C481S	c.G1442C	33.22
39RE	<i>BTK</i>	15	C481S	c.G1442C	8.04
33RE	<i>BTK</i>	15	C481S	c.G1442C	2.67
		15	C481S	c.T1441A	1.98

The evolutionary landscape of CLL treated with ibrutinib



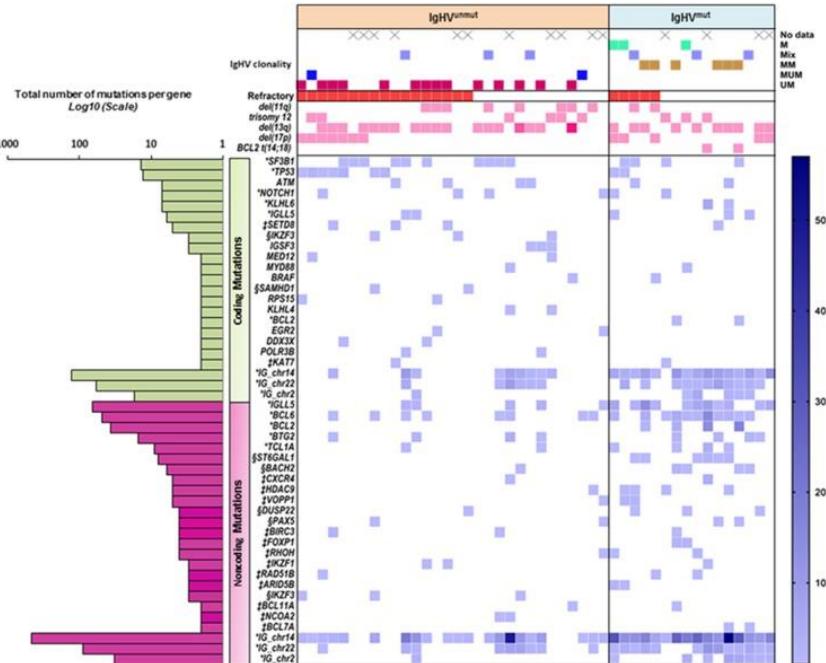
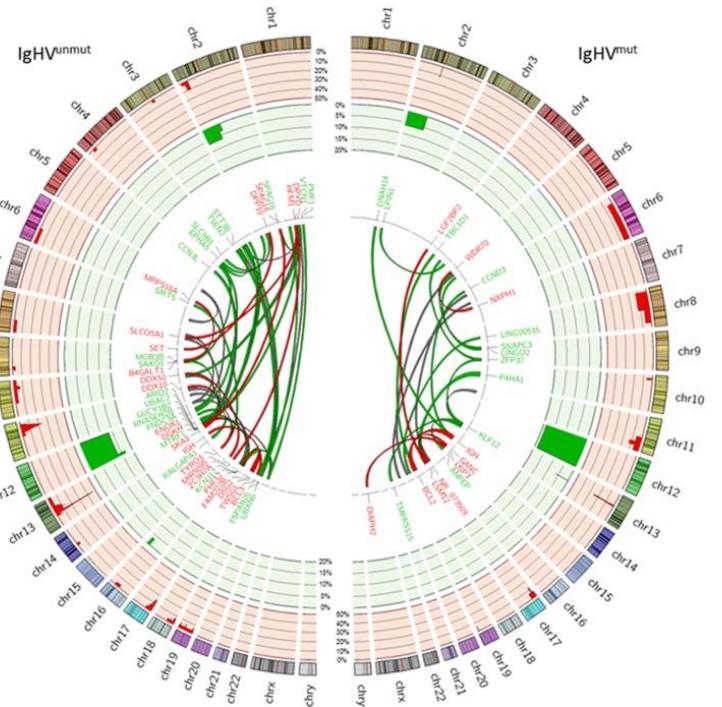
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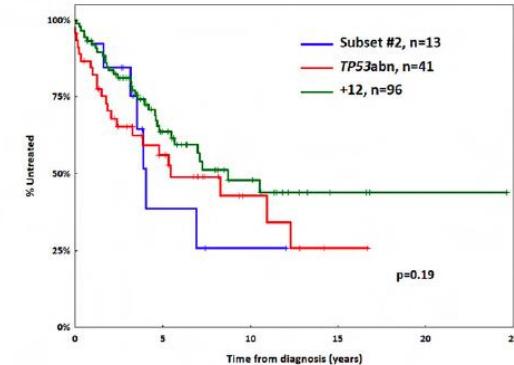
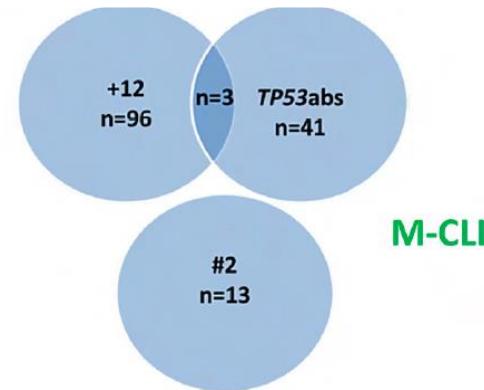
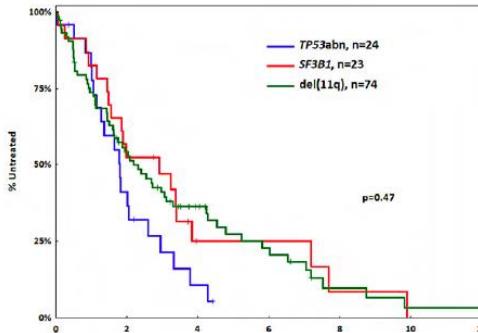
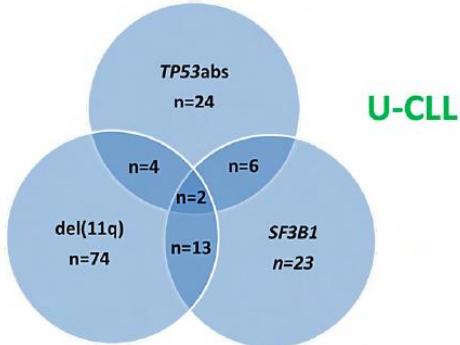


**Can we subgroup patients in a
better way?**

WGS reveals distinct differences in the mutational landscape between IGHV-M and IGHV-UM^t CLL

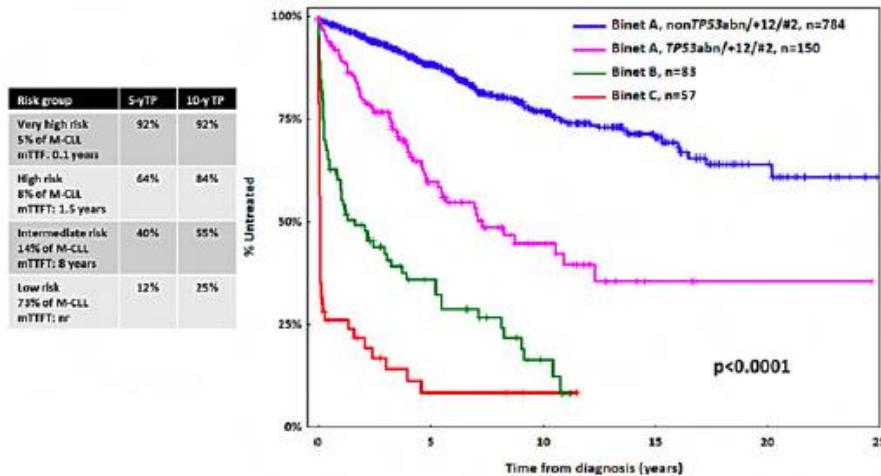


Are the same factors linked to poor prognosis in IGHV-M and IGHV-U CLL?

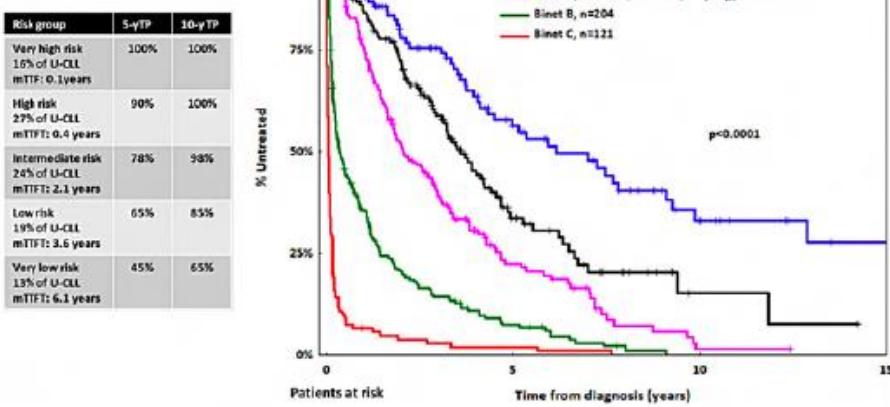


Tailored approaches based on immunogenetic features for refined prognostication in CLL

A



B



M-CLL

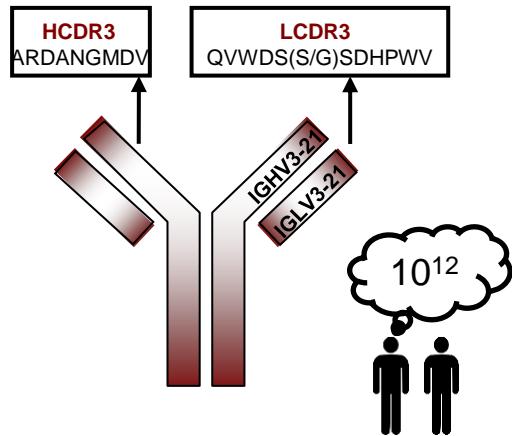
N=3015

U-CLL

Baliakas et al, Haematologica 2018

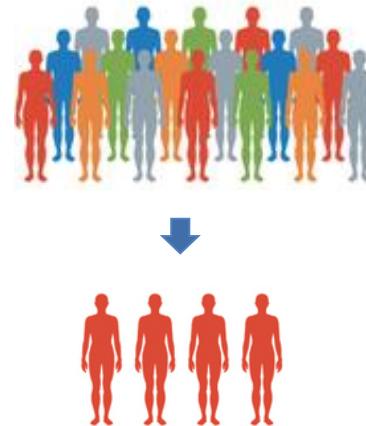
Stereotyped B-cell receptors in CLL

Highly similar B-cell receptors



>30% of CLL patients
Recognize similar epitopes

More homogenous subgroups



Share clinical and biological profiles

SUBSET #1

2.4% of all CLL

Very aggressive
(TTFT 1-9 years)

U-CLL

Significantly up-regulated EZH2 levels

Recurrent *NFKBIE* gene mutations

Pronounced BcR and TLR signaling

SUBSET #2

2.8 % of all CLL

Very aggressive
(TTFT 1-6 years)

Both U-CLL and M-CLL

High incidence of del(11)(q22q23)

Significant enrichment of *SF3B1* mutations

Low frequency of *TP53* aberrations

SUBSET #4

1% of all CLL

Very indolent
(TTFT 11 years)

M-CLL

Few genetic aberrations

Ongoing SHM

IG features of anti-DNA Abs

Signature of B-cell anergy

SUBSET #8

0.5% of all CLL

Very aggressive-highest risk for RT
(TTFT 1-5 years)

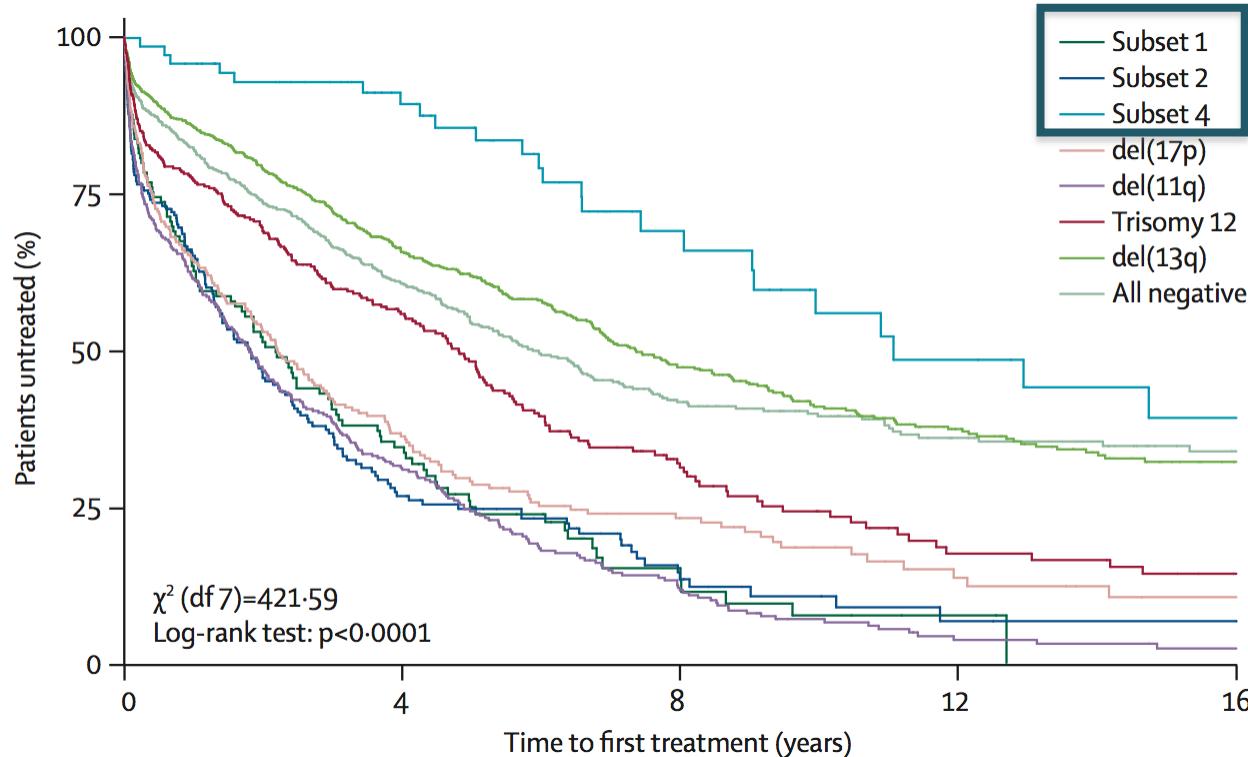
U-CLL

High frequency of trisomy 12

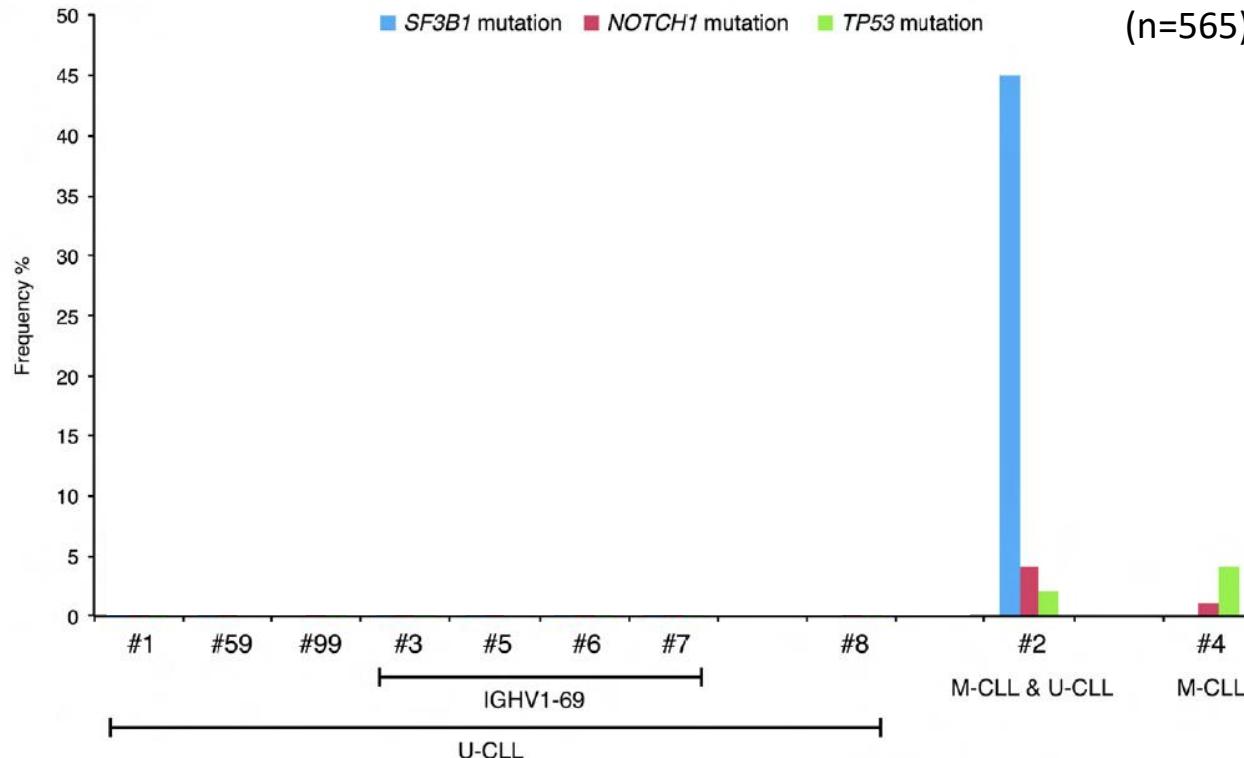
Prevalence of *NOTCH1* mutations

Promiscuous antigen binding reactivity

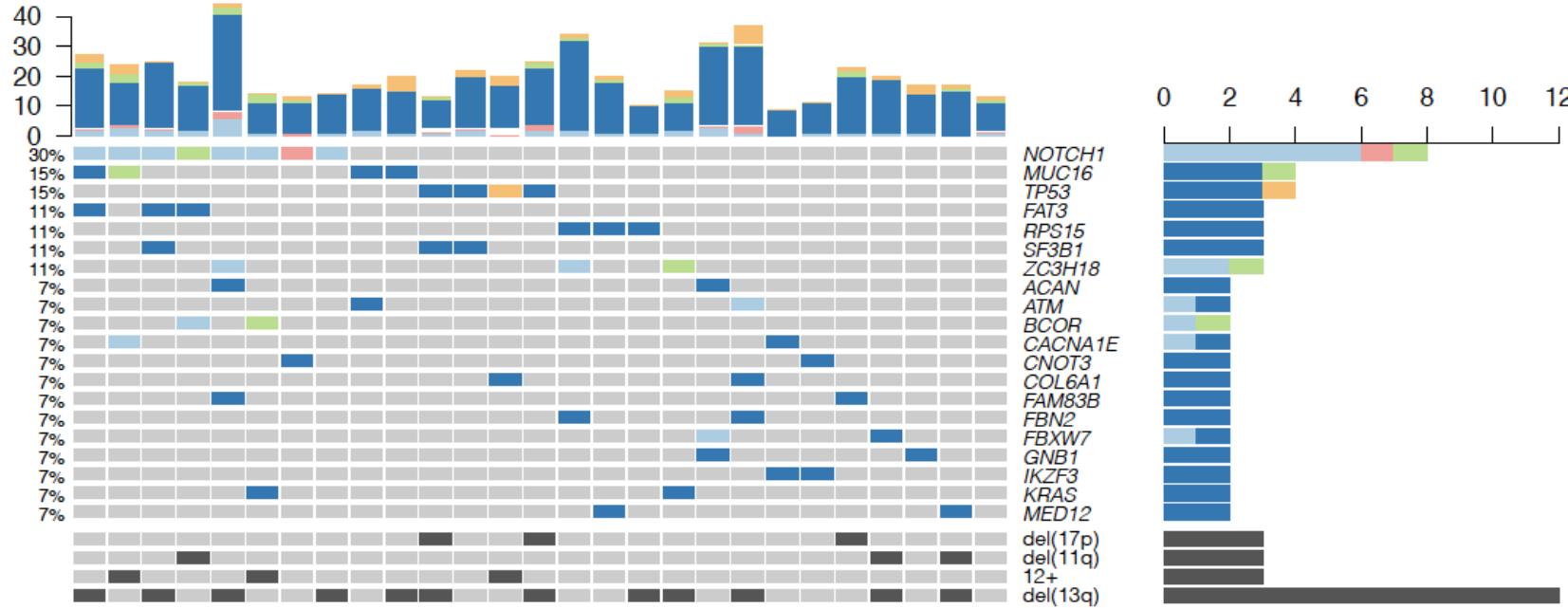
Subsets are distinct clinical entities



Different subsets, distinct recurrent mutation profiles



Whole-genome sequencing of subset #1

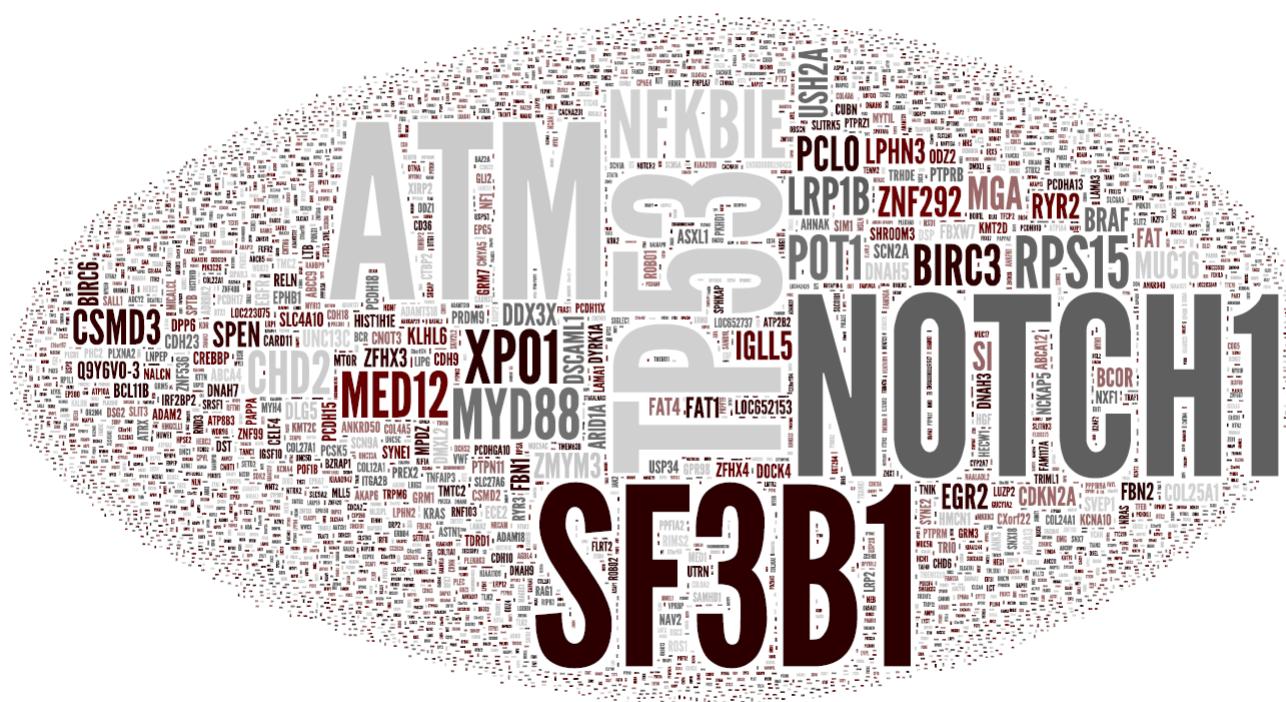


26/27 cases carry a known CLL driver gene mutation

How to bring order out of this?



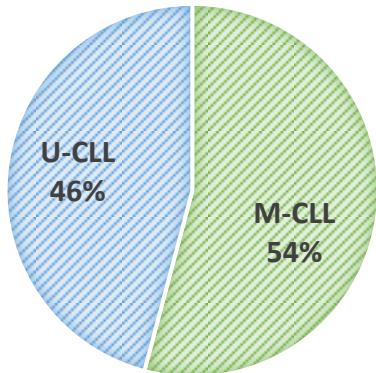
Karolinska
Institutet



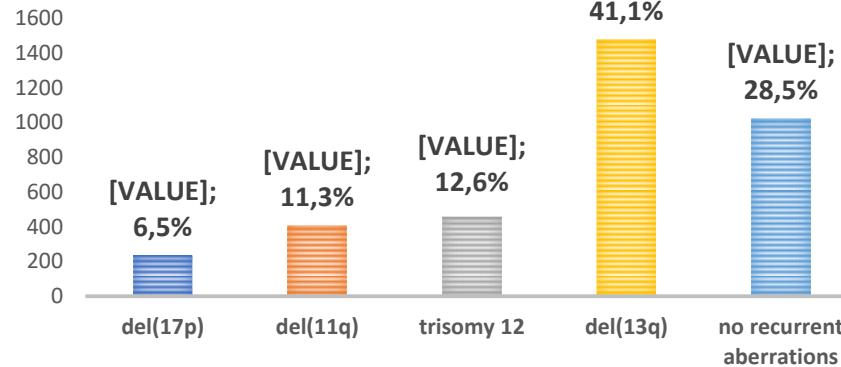
Large-scale project on CLL gene mutations

- >20 centers, 4800 pts
- 10 genes, full clinical data required

IGHV MUTATIONAL STATUS
(N=3493)

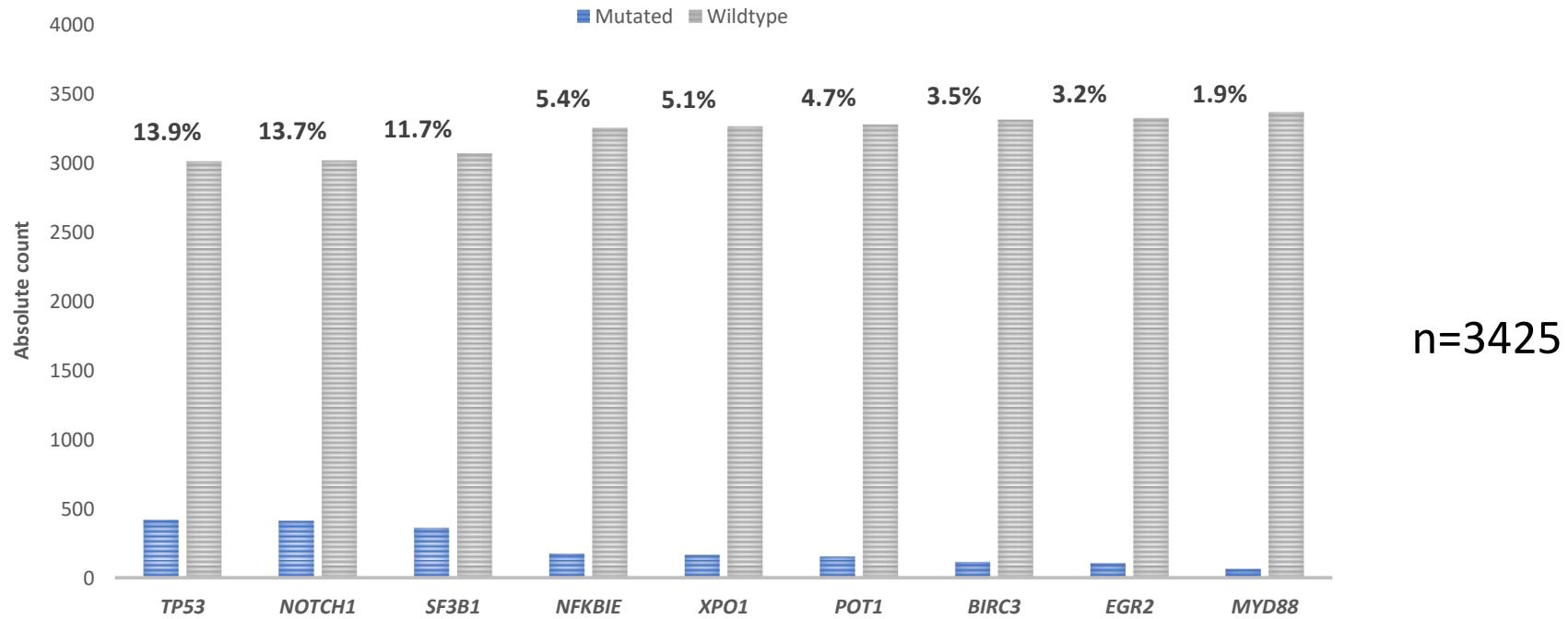


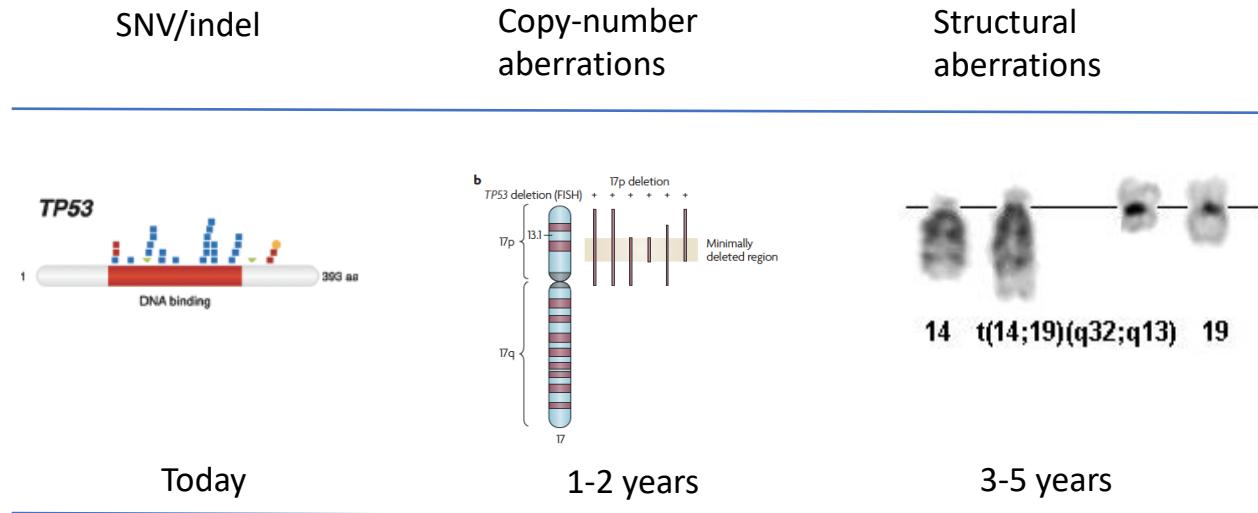
HIERARCHICAL FISH (N=3592)



ATM
BIRC3
MYD88
NOTCH1
SF3B1
TP53
EGR2
POT1
NFKBIE
XPO1

Large-scale project on CLL gene mutations





Molecular profiling

FISH + NGS panel
Arrays/cytogenetics

Broad gene panels (IG/TR)

Whole-genome sequencing

Overtime analysis

FISH
NGS panel

NGS panel
ddPCR

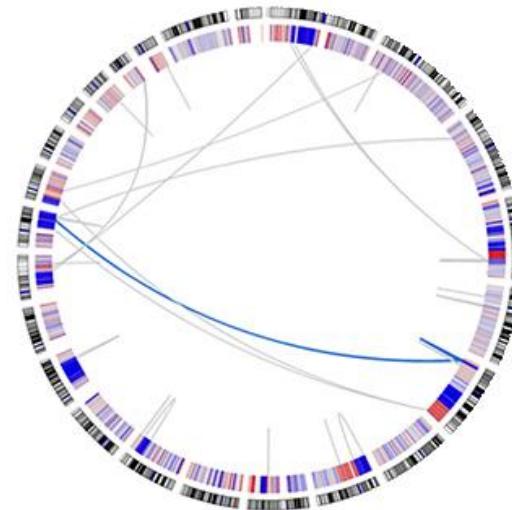
Whole-genome sequencing?

Extracting information from WGS in CLL

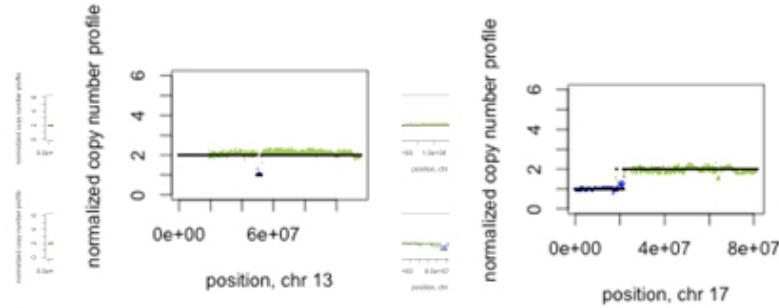
SMALL MUTATIONS

Chr	Start	End	Ref	Varlant	Gene	Type	Exonic_type	VAR %
chr2	198266834	198266834	T	C	SF3B1	exonic	nonsynonymous SNV	11,45
chr11	108183167	108183167	A	G	ATM	exonic	nonsynonymous SNV	48,2
chr17	7579472	7579472	G	C	TP53	exonic	nonsynonymous SNV	46,32

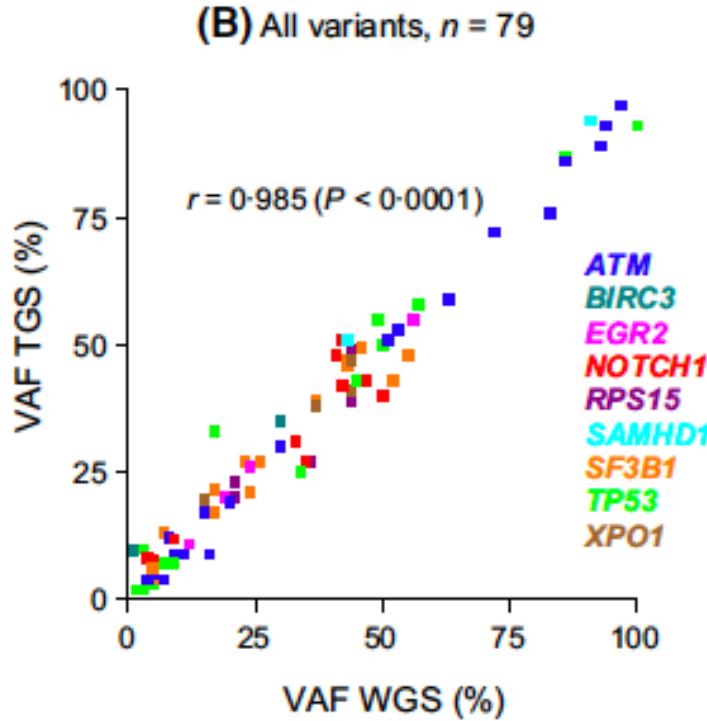
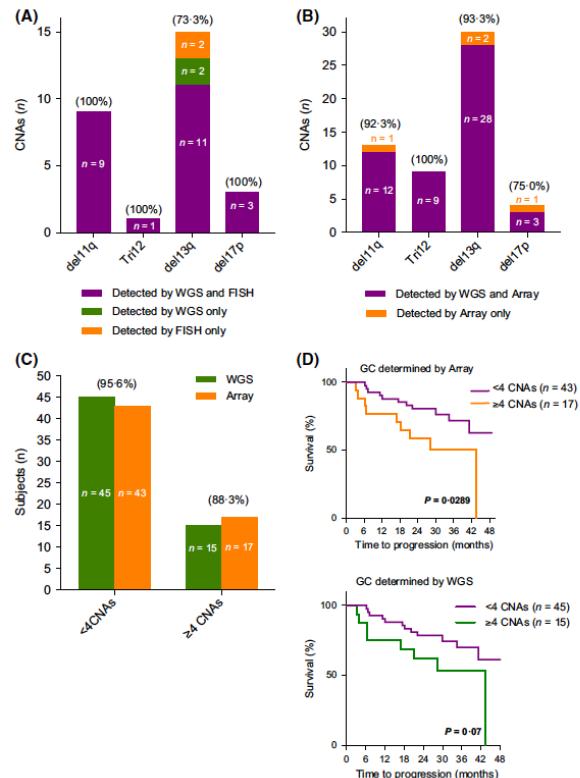
STRUCTURAL VARIANTS



COPY NUMBER ABERRATIONS



Validation of WGS reveals robust detection of low-frequency variants and copy number alterations in CLL



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Uppsala University**

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