

# Assessment of Homologous Repair Deficiency status in Triple Negative Breast and Ovarian Carcinoma using Genetic and Epigenetic Next Generation Sequencing Assays



Muhammad Hussain<sup>1</sup>, MD; Katerina Kearns<sup>1</sup>, MD; Kassaye Firde<sup>1</sup>, MD; Yinfei Tan<sup>2</sup>, Ph.D; Reza Nejati<sup>2</sup>, MD; Anjali Seth<sup>1,2</sup>, PhD

<sup>1</sup>Department of Pathology and Laboratory Medicine, Temple University Hospital, Philadelphia, PA

<sup>2</sup>Molecular Diagnostics Lab, Department of Pathology, Fox Chase Cancer Center at Temple Health, Philadelphia, PA, USA

# Introduction

- Analyzing deficiencies in homologous recombination repair (HRR)
  machinery has become increasingly important to identify patients
  who respond to poly (adenosine diphosphate [ADP]-ribose)
  polymerase (PARP) inhibitors.
- It is well-documented that deleterious germline or somatic genetic variants in certain genes lead to the phenotype of homologous recombination deficiency (HRD).
- However, there is sparse information on the role of epigenetic silencing of the BRCA1, RAD51C, or XRCC3 genes by promoter hypermethylation in contributing to HRD.
- In this study, we have evaluated a quantitative NGS-based oncoReveal Methylation Assay for detection of methylation in promoter regions of BRCA1, RAD51C, and XRCC3.
- This assay was complemented with Pillar's oncoReveal HRDv2 assay to detect causal single nucleotide variants (SNVs) and indels for analyzing HRD.
- Based on identified genetic variants and a quantitative methylation value, we predicted an HRD status for the tumor specimens.
- The assays were performed on retrospective ovarian and triple negative breast cancer (TNBC) specimens at Temple University Hospital.

# Methods

- A total of 71 formalin-fixed paraffin-embedded (FFPE) specimens (43 ovarian cancer and 28 TNBC) were evaluated for both methylation and mutation analysis.
- The ovarian cancer specimens were histologically classified as follows: 26 high-grade serous, 4 clear cells, 3 mucinous, 4 endometrioid, 1 poorly differentiated, and 1 mixed tumor specimen.
- FFPE specimens were microdissected, and DNA was extracted using standard laboratory protocols.
- The oncoReveal NGS assay was performed to detect mutations on the Illumina MiSeq platform.
- The methylation assay involved bisulfite conversion using the EpiTect Fast DNA Bisulfite kit, followed by NGS analysis using the methylation panel on the Illumina MiSeq.
- Bioinformatic analysis was conducted using PIVAT.

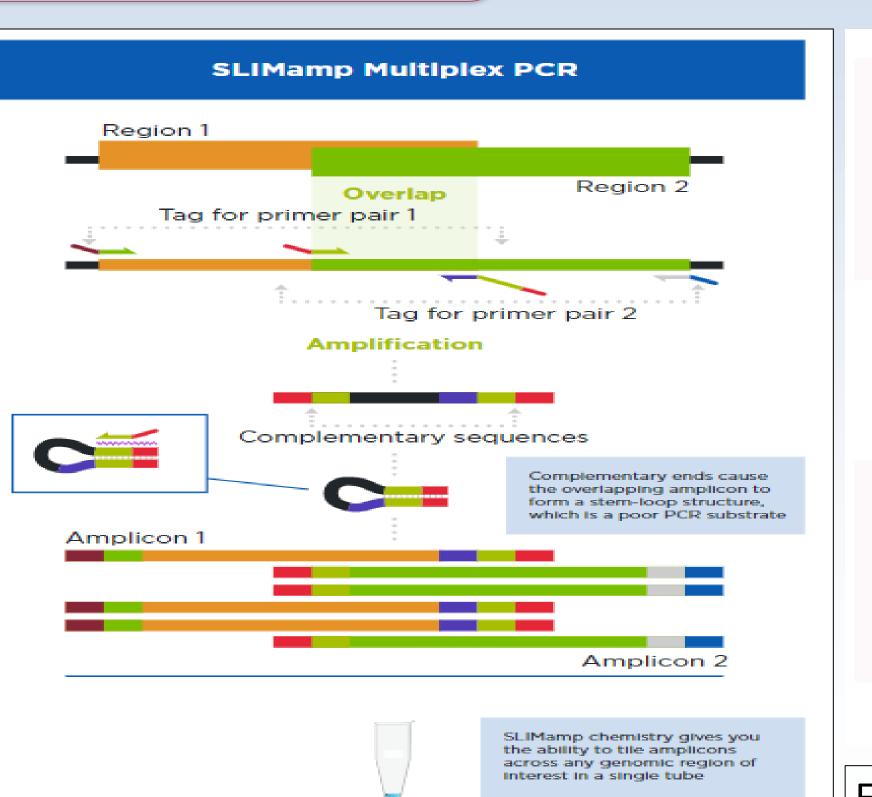
	TUMOR TYPE		Overall SNV/Indel Calls^		Methylat	tion		MAID A		EANOE 4046 400 1 40	EANORO OL CELLI 10 007	NI C	h1
	TOWION TIPE	P	VUS	Benign	BRCA1	RAD51C	44	TNBC		FANCE c.1316+19G>A 49	FANCD2 p.Gln65His 49.2%	Negative	Negative
1	ENDOMETROID	ARID1A D1850Tfs*33 16.2%	ATM L612F 50.3%				45	TNBC		FANCC p.Ser264Gly 51.6%		Negative	Negative
2	SEROUS	PTEN R130Q 29.3%  TP53 L289Pfs*56 4.7%  BRCA1 Q1756Pfs*74 50.4%	ATR R1451W 47.7%				46	TNBC	PIK3CA p.His1047Arg 55.9% TP53 p.Arg110Pro 56.5%	FANCE p.Arg69Gln 50.9%	ERBB2 p.lle655Val 59%	Negative	Negative
3	SEROUS	TP53 P58Qfs*65 91.2% BRCA2 G1376Afs*11 89.4%	FANCA A746V 10.8% BARD1 R150G 5.8%				47	TNBC		TP53 p.Gln144Pro 44.4% FANCE p.Ser204Leu 63.9%		Negative	Negative
4	SEROUS		MRE11 E600Q 41.4% ATM T2333I 63.2%				10	TNDC		FAINCE p.3e1204Leu 03.3%		Mogativo	Magativ
5	CLEAR CELL	PIK3CA H1047R 34%	CDK12 S987F 37.1%				48	TNBC	BRCA2 p.Lys2950Asn 54.1%	FANCE - C - 2041 20 770/		Negative	Negative
6	SEROUS	ARID1A Y417Tfs*16 76.3%  BRIP1 R798* 84.7%  TP53 H179Y 65.9%	FANCD2 M782T 49.3% ATM R2580S 35.9%				49	TNBC		FANCE p.Ser204Leu 29.77% TP53 p.Phe109Ser 51.2%		Negative	Negative
7	ENDOMETROID	KRAS G12V 43.4%	MRE11 V646I 47.9% BARD1 L239Q 48.5%				50	TNBC		PTEN c.802-51_802-14del 25.6% FANCE p.Ser204Leu 51%		Negative	Negative
8	SEROUS SEROUS	TP53 Y220C 59.8% TP53 E271* 68.9%	BRCA2 E2599del 55% PALB2 L332H 59.8%	BRCA2 Y42C 77.9%	29.44%		<b>51</b>	TNBC	TP53 p.His179Arg 39.58%	17/11/02 p.30120+200 31/0		Negative	Negative
10	SEROUS	TP53 N239Pfs*16 72.2%	FANCA R756C 14.7%		51.50%		52	TNBC	1 -	TDE2 n Clu266Clu 20 10/			
10	JEROU3		ATR Y291D 16.4%		31.30%		52 E2			TP53 p.Gly266Glu 28.1%	[DDD2 n HaCCCVal 700/	Negative	Negative
11	CLEAR CELL	ARID1A Q878* 38.8% PTEN T167Lfs*16 13.4% PTEN P248Tfs*5 14.2%	RAD50 R327H 53%				54	TNBC	TP53 p.Arg175His 51.6%	BRCA1 p.Thr826Lys 61.66%	ERBB2 p.lle655Val 76%	Negative Negative	66%
12	SEROUS	TP53 c.920-1G>T 91.4%	ATM T2333I 8.1%				<b>91</b>	IIIDC		TP53 p.Glu258Lys 25.2%		ine Sucre	0070
13	SEROUS	TP53 C242F 4.2% TP53 C124* 39.9%					55	TNBC	TP53 p.Ser303AlafsTer42 71.39%	BRCA1 p.Arg979His 15.5%		Negative	Negative
14	MIXED	PIK3CA E542K 27.6% KRAS G12A 61.8%					56	TNBC	PIK3CA p.His1047Arg 19.86%			  Negative	Negative
15	SEROUS	TP53 H193R 86.1%	FANCD2 P732L 45%				J0	INDC	TP53 p.Glu224= 29.91%			INCEGUIVE	Ivegative
.6	SEROUS	CDK12 c.2964-1G>A 13.9%	FANCD2 R1452I 48.4%					57 TNBC		BRCA1 p.Gly813Arg 2.72%			
7	SEROUS	TP53 R280G 33.3% TP53 C242S 82.8%	BRCA1 E1494K 18.1% BRCA1 M1783T 81.9%						PIK3CA p.His104/Arg 16.5%  TP53 p.Leu111PhefsTer40 6.38%  TP53 p.Trp91Ter 23.56%  ERBB2 5%	p.His1326Tyr 2.97% p.Pro897Ser 2.9%		Negative	Negativ
8	SEROUS	BRCA2 N404Mfs*26 20.8% TP53 Y107* 37.3%	BRCA1 A1708V 60.7%				57			BRCA2 p.Tyr2726Cys 2.9%			
19	SEROUS	TP53 R175H 31.2%	ATR R668W 48.3%							p.Arg2787His 3.6% p.Arg2842Cys			
.0	ENDOMETROID	CTNNB1 S37C 26.7%	FANCE R69Q 31.4%	FANCE G246del 46.5%					211352 3/0	4.35%			
1	SEROUS	TP53 P75Lfs*48 74.7% BRCA1 E23Vfs*17 90.2% TP53 G245S 21.5%	NBN P199S 94.2% ATR K764E 69.3%							FANCA p.Met415lle 8.6% BRCA2 p.Asn1279Asp 2.7%			
2	MUCINOUS	KRAS G12V 15%								FANCE p.Ser204Leu 55.69%		Negative	
3	SEROUS	TP53 W146* 40.8%	ARID1A A45V 18.3%		34.90%		58	TNBC		MRE11 p.Gly579Glu 42.44%			Negativ
4	SEROUS	TP53 L111R 20.5%	ATR Y2132D 52.4%							ARID1Ap.Pro120Ser 23.33%			
5	CLEAR CELL	TP53 C141Afs*29 63.9% KRAS G12V 40.5%	BRCA2 S1115P 14.7% RAD50 R726H 48.3%				59	TNBC	PTEN p.Lys183ArgfsTer16 11.85%			Negative	Negativ
6	MUCINOUS	TP53 L330Ffs*15 49.2%	FANCD2 R779H 29.9%	FANCD2 F386V 30.3%			60	TNBC		FANCC p.Cys35Ser 36.5%		Negative	Negativ
7	SEROUS			TP53 P72R 99.9%	46.91%		61	TNBC	'		ERBB2 p.lle655Val 51.78%	Negative	Negativ
8	CLEAR CELL			BRCA1 P871L 47.3%			62	TNBC	None	None		Negative	Negativ
9	MUCINOUS	TP53 Q38KFS*6 62.7 BRAF V600E 38.3					63	TNBC	BRCA1 p.Glu1781AsnfsTer12 40.42%		FANCD2 p.Gln65His 71.3%	44.30%	Negativ
0	SEROUS	TP53 R273H 45.8					CA	TAIDA	TP53 p.Arg248Gln 40%	ADID1A n Dro11000 ar 400/	CDK12 p.Leu1189Gln 71%	Mogathyo	Morethy
1	SEROUS			BRCA1 P871L 84.9%	24.05		64	TNBC	'	ARID1A p.Pro120Ser 40%	CDI/42 a Thu440CAALL 000/	Negative	Negativ
32	SEROUS	BRCA1 p.Asn1255LysfsTer12 69.4% TP53 p.Arg273His 40.8%		Undefined	Negative	Negative	65	TNBC	TP53 p.Ser241Tyr 53.93%	DADD1 a TurF070 47 70/	CDK12 p.Thr1195Met 80%	Negative	Negativ
33	ENDOMETROID	PTEN p.Arg233Ter 17.3%	BRCA1 p.Lys654SerfsTer47 18.2%		Negative	Negative				BARD1 p.Tyr597Cys 47.7%		M. C	AL. I
4	POORLY DIFFERENTIATED		MRE11 p.Glu600Gln 49.17% BRCA2 p.Asp980Tyr 43.4%		Negative	Negative	66 TNBC		MRE11 p.Arg628Lys 34.9% FANCD2 p.Pro852Arg 45.7%		Negative	Negativ	
5 6	SEROUS POORLY DIFFERENTIATED	None	None	ATR p.lle774TyrfsTer5 20.2%	Negative Negative	Negative Negative	67	TNBC		, 0	CDK12 p.Leu1189Gln 35.62%	Negative	Negativ
37	SEROUS		FANCE c.1316+19G>A 50.89%		Negative	Negative				RAD51D p.Glu307Lys 52.79%			
38 20	SEROUS SEROUS	None	None FANCE c 1316±19G>A 40.0%		Negative	Negative Negative	68	TNBC	TP53 c.994-1G>C 56.39%	FANCE p.Ser204Leu 56.56%		Negative	Negative
39 40	SEROUS	TP53 p.Ser241Phe 15.4%	FANCE c.1316+19G>A 40.9% FANCE p.Ser204Leu		Negative Negative	Negative 38.5	69	TNBC				Monativo	Mogative
14		BARD1 p.Cys557Ser 54.2%	BARD1 p.Asp612Val 52.1%				70		None  NDN n Arg/2Tor 56 19/	None		Negative	Negative
41	ENDOMETROID  ENDOMETROID	TP53 p.Arg337Cys 3.3% CTNNB1 p.Asp32Tyr 33.17% NBN p.Lys219AsnfsTer16 88.91%	BRCA2 p.Pro46Ser 23.8%	RAD51B p.Pro365Arg 82.3%	Negative Negative	Negative Negative	70	TNBC	NBN p.Arg43Ter 56.1% BRCA1 p.Gln1200ArgfsTer18 16.3%	[ANICE & AvaCOCI = 25 450/		Negative	Negative
42 43	CLEAR CELL	None	None	ארחסחיי hינוחסחיאון סדייםעיי	Negative	Negative	/1	TNBC	TP53 p.Arg213Ter 6.6%	FANCE p.Arg69Gln 25.15%		Negative	Negative

Table 1: DNA mutations and methylation detected by NGS in the ovarian study cases

Table 2: DNA mutations and methylation detected by NGS in the Triple Negative Breast Cancer (TNBC) study cases

### Conclusions

This study provides encouraging preliminary evidence for the possibility of implementing in house based HRD testing in routine clinical practice. The oncoReveal methylation assay also provides a unique approach to investigate HRD in ovarian carcinoma and triple negative breast cancers.



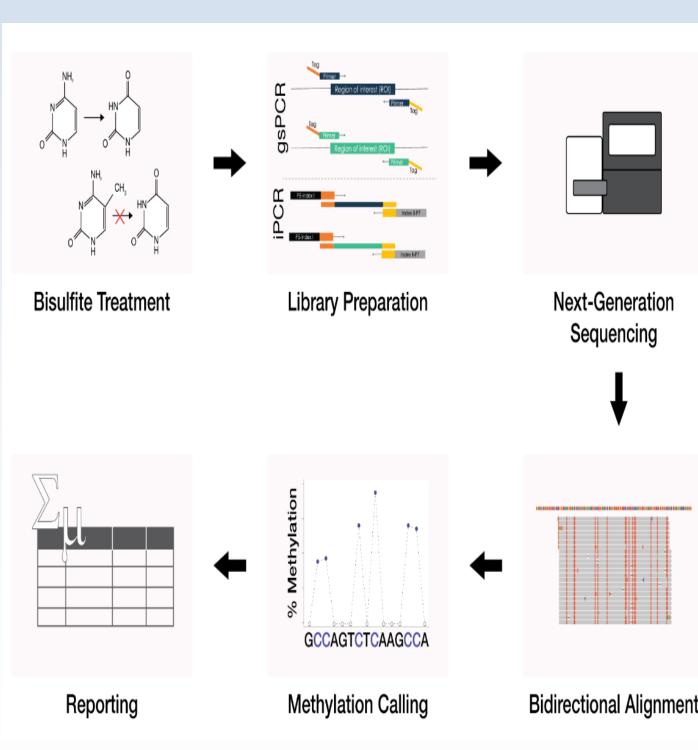


Fig 1:Workflow process for SLIMamp tumor panel methylation panel

SAMPLE NO	TUMOR TYPE	PATHOGENIC MUTATIONS	METHYLATION		
			BRCA	RAD 51	
2	SEROUS	TP53 L289Pfs*56 4.7%			
2	SEROUS	BRCA1 Q1756Pfs*74 50.4%	Neg	Neg	
3	SEROUS	TP53 P58Qfs*65 91.2%			
3	SEROUS	BRCA2 G1376Afs*11 89.4%	Neg	Neg	
6	SEROUS	BRIP1 R798* 84.7%			
8	SEROUS	TP53 H179Y 65.9%	Neg	Neg	
18	SEROUS	BRCA2 N404Mfs*26 20.8%			
18	SEROUS	TP53 Y107* 37.3%	Neg	Neg	
21	SEROUS	TP53 P75Lfs*48 74.7%			
21	SEROUS	BRCA1 E23Vfs*17 90.2%	Neg	Neg	
71	TNBC	BRCA1 p.Gln1200ArgfsTer18 16.3%			
71	INBC	TP53 p.Arg213Ter 6.6%	Neg	Neg	
32	SEROUS	BRCA1 p.Asn1255LysfsTer12 69.4%			
32	3EKOO3	TP53 p.Arg273His 40.8%			
9	SEROUS		29.44		
10	SEROUS		51.5		
23	SEROUS		34.9		
27	SEROUS		46.91		
31	SEROUS		24.05		
40	SEROUS			38.5	
48	TNBC	BRCA2 p.Lys2950Asn 54.1%			
54	TNBC			66%	
		BRCA1 p.Glu1781AsnfsTer12 40.42%			
63	TNBC	TP53 p.Arg248Gln 40%			
		17 33 p.Aig246diii 40%	44.30%		

Table 3: Specimens detected by NGS that exhibit HRD and benefit from PARP inhibitors

### Results

- The NGS results were analyzed by the Pillar PIVAT pipeline.
- Table 1 and 2 shows pathogenic HRD mutations were detected in 56/71 (79%) specimens.
- The most common mutations detected were in TP53 (52%) and BRCA1/2 (11%), followed by mutations in genes such as ARID1A, KRAS, PTEN, CTNNB1, BRIP1, PIK3CA, and CDK12
- Methylation analysis showed that five high-grade serous carcinoma specimens harbored promoter methylation in BRCA1, and one in RAD51C.
- In the TNBC cohort, one specimen each was methylated for BRCA1 and RAD51C.
- The level of promoter methylation varied across the methylated specimens.
- Table 3 is a compilation of patient specimens that will show HRD using the Pillar HRD assay.
- These specimens either harbor a HRD related mutation or show promoter methylation in HRD genes.