

# Genomic Landscape and Immune Phenotype of Malignant Pleural Mesothelioma

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ASCO 2020 Abstract # 9056

## BACKGROUND

- Malignant pleural mesothelioma (MPM) is a relatively uncommon malignancy with poor prognosis and no major therapeutic breakthroughs over the past decade.
- Better understanding of the genomic landscape and distribution of immune biomarkers in this disease has the potential to enable development of novel therapies.

## STUDY OBJECTIVES

- Investigate the genomic landscape of MPM.
- Analyze the differences of TMB and PD-L1 expression in MPM.
- Assess the differences in genomic alterations and TMB/PD-L1 in the context of age, gender, and molecular pathway alterations.

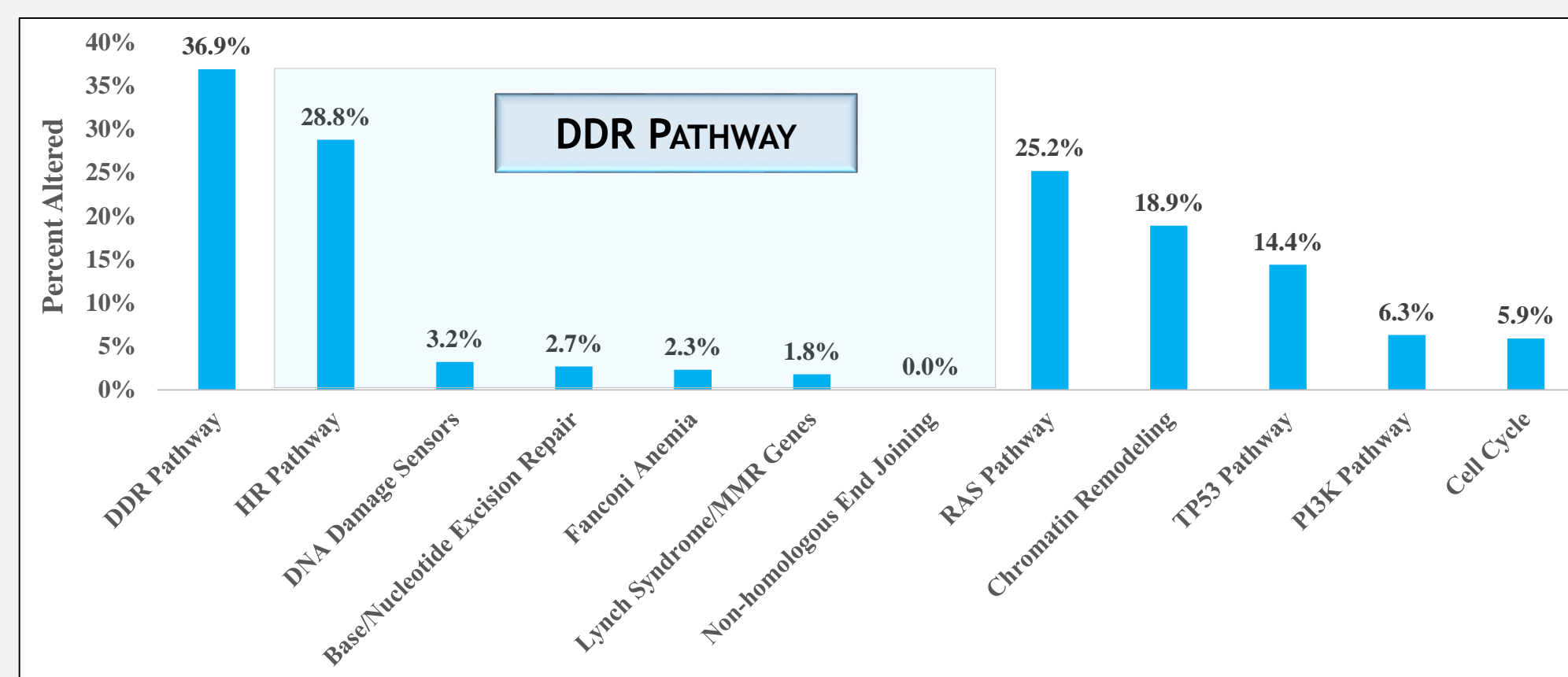
## METHODS

- We retrospectively analyzed molecular profiles of MPM tumors (N=222) submitted to Caris Life Sciences.
- Profiling included next-generation sequencing (NGS) of 592 genes, Tumor Mutational Burden (TMB), and PD-L1 expression by immunohistochemistry using SP142 antibody.
- Analyzed pathways:
  - DNA damage response and repair (DDR): *ATM, ATRX, BAP1, BARD1, BLM, BRCA1/2, BRIP1, CDK12, CHEK1/2, ERCC1/2/3/4/5, FANCA/C/D2/E/F/G/L, MLH1, MRE11, MSH2/6, MUTYH, NBN, PALB2, PMS2, POLE, PRKDC, RAD50/51B, WRN, XPA, XPC*
  - Cell cycle regulation: *CCND1/2/3, CCNE1, CDKN2A, CDK4/6, CDKN1B/2A, MAX, MYC, RB1*
  - Chromatin remodeling (CR): *ARID1A/2, ASXL1, BCL11A/B, BCL7A, BRD3/4, DNMT3A, EP300, EZH2, KDM5A/5C/6A, KMT2A/C/D, NSD1/2/3, PBRM1, SETD2, SMARCB1/A4, SS18, SS18L1*
  - RAS/MAPK: *ARAF, BRAF, CRKL, H/K/NRAS, MAP2K1/2/4, MAP3K1, NF1/2, RAF1*
  - PI3K/AKT: *AKT1/2/3, MTOR, PIK3CA/G, PIK3R1/2, PTEN, RICTOR, TSC1/2, ZNF703*
  - TP53 Pathway: MDM2, PRDM1, TP53*
- Available clinical information: Age and gender

## RESULTS

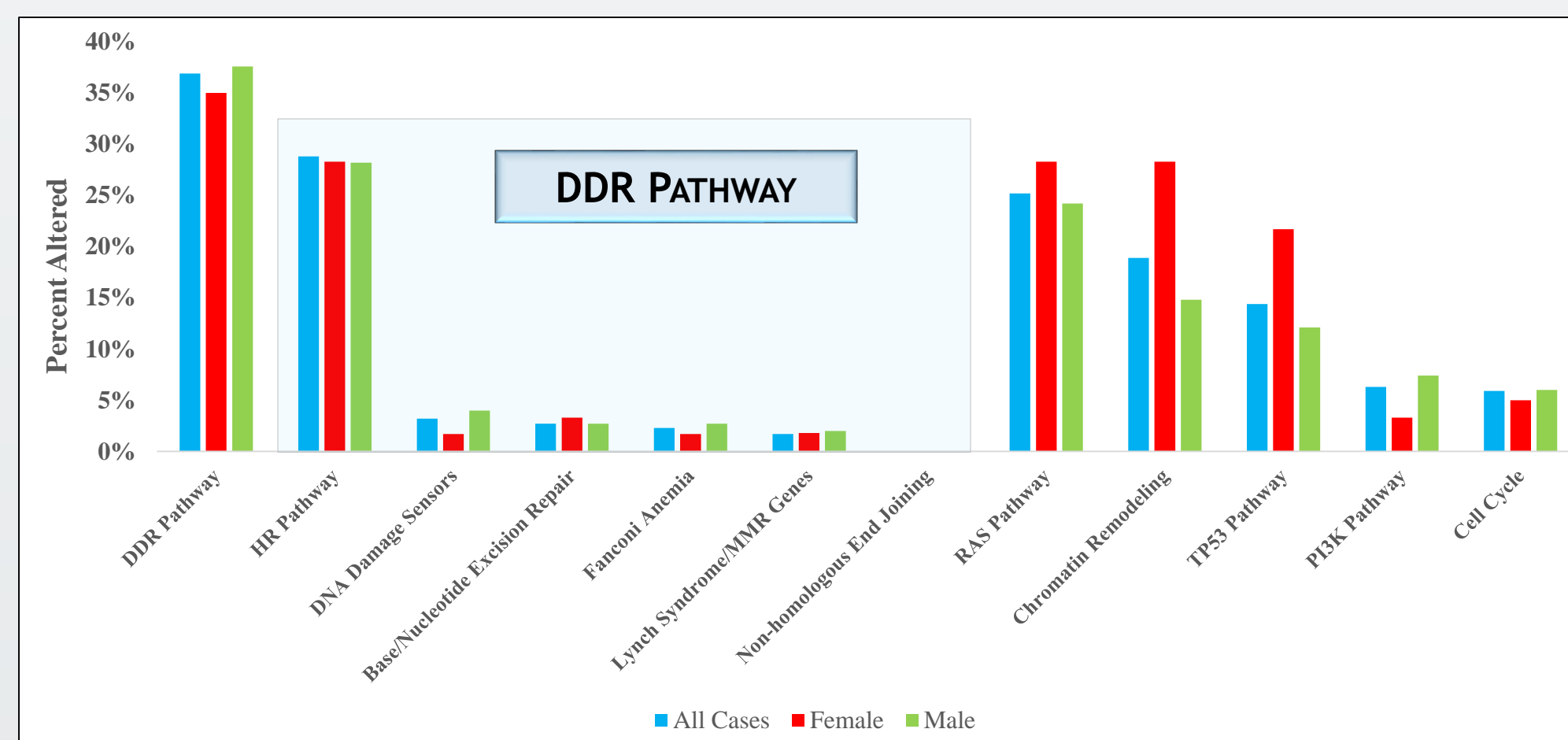
- Median age - 72 years (range, 37-90) • 73% men, 27% women

### Gene Alterations by Pathway



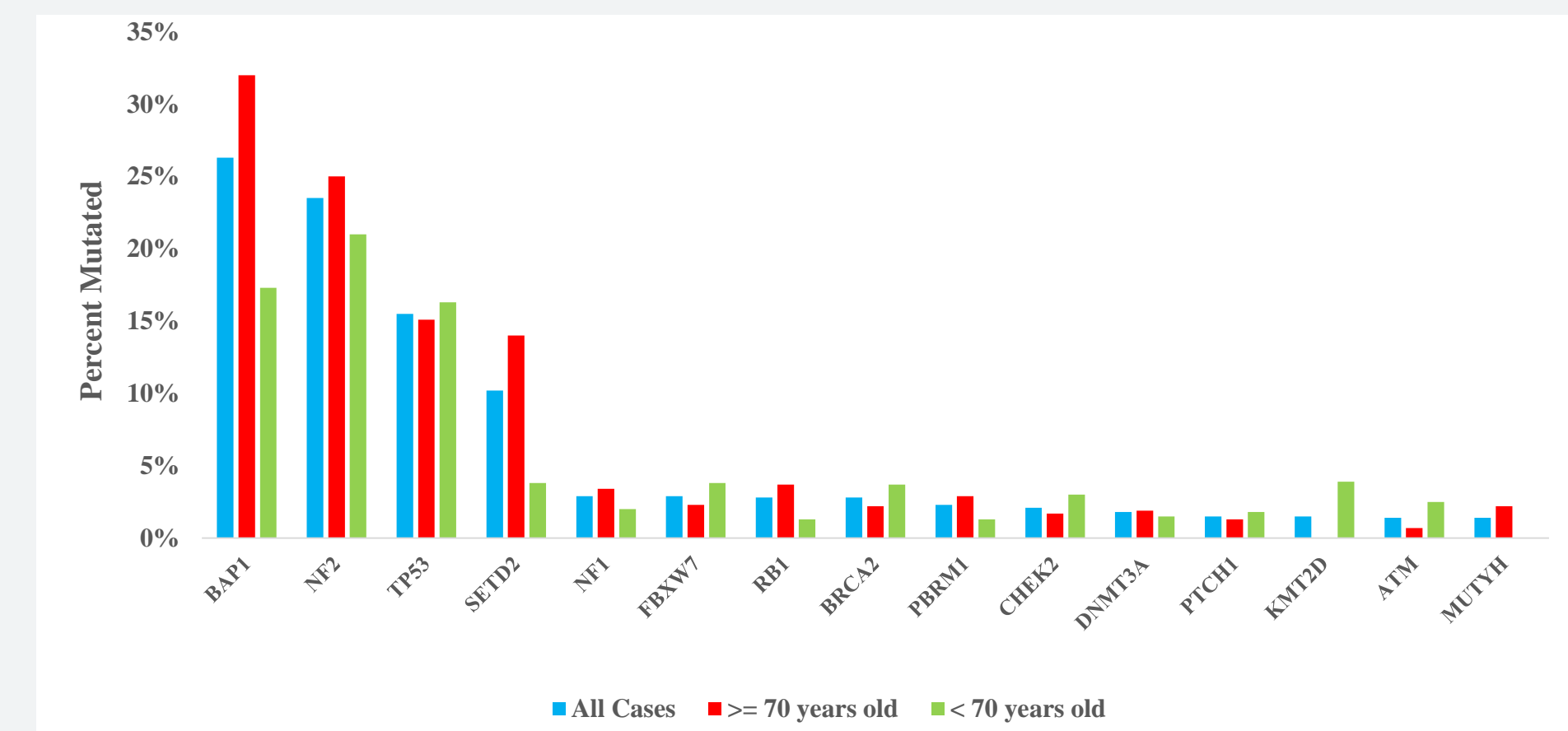
81% of cases had at least one pathway alteration. DDR, especially homologous recombination (HR), was the most commonly mutated pathway.

### Pathway Alterations by Gender



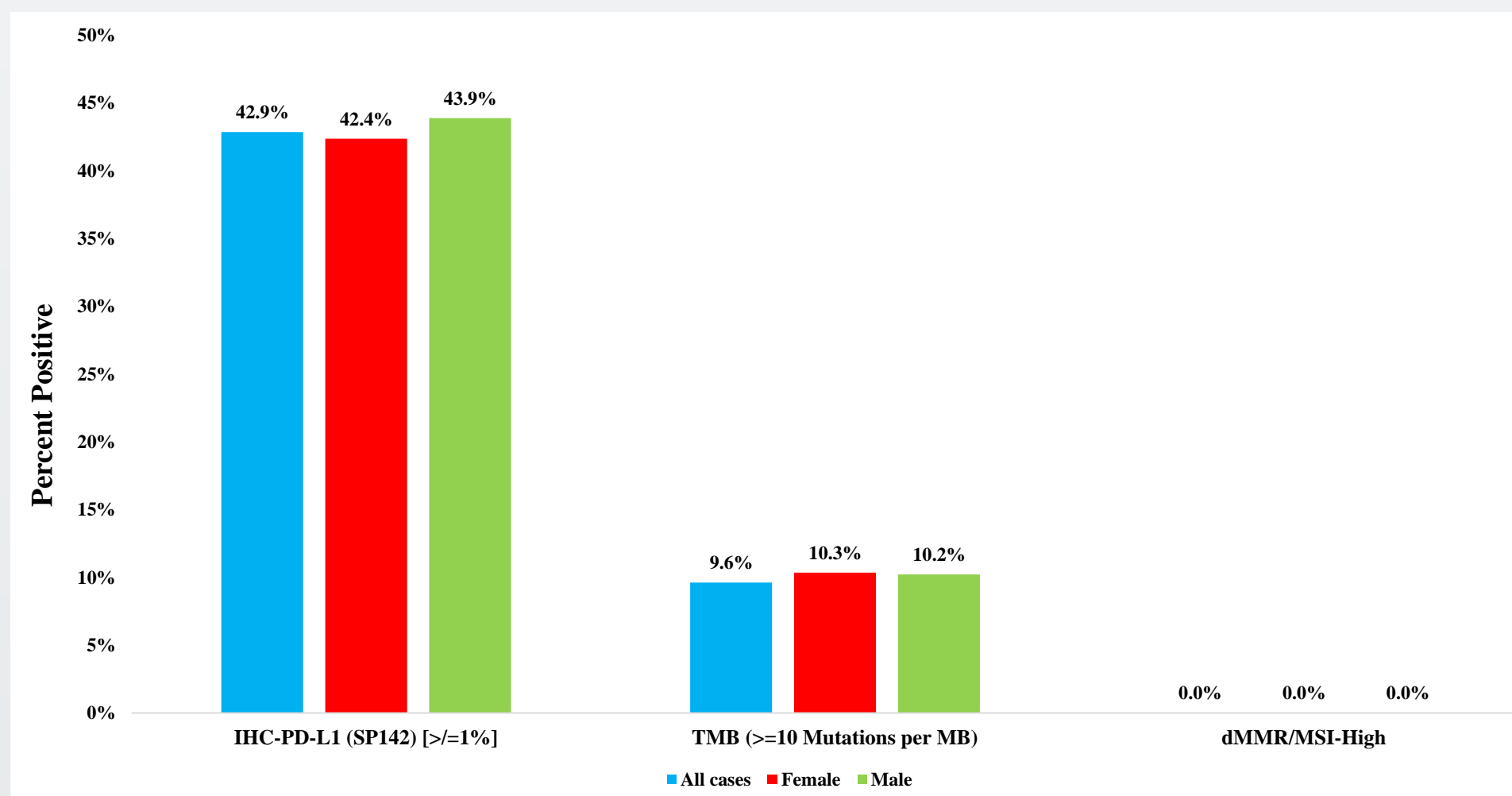
No statistically significant differences were found, except for CR pathway being more commonly mutated in women ( $p=0.02$ )

## PATHOGENIC AND PRESUMED PATHOGENIC MUTATIONS BY AGE



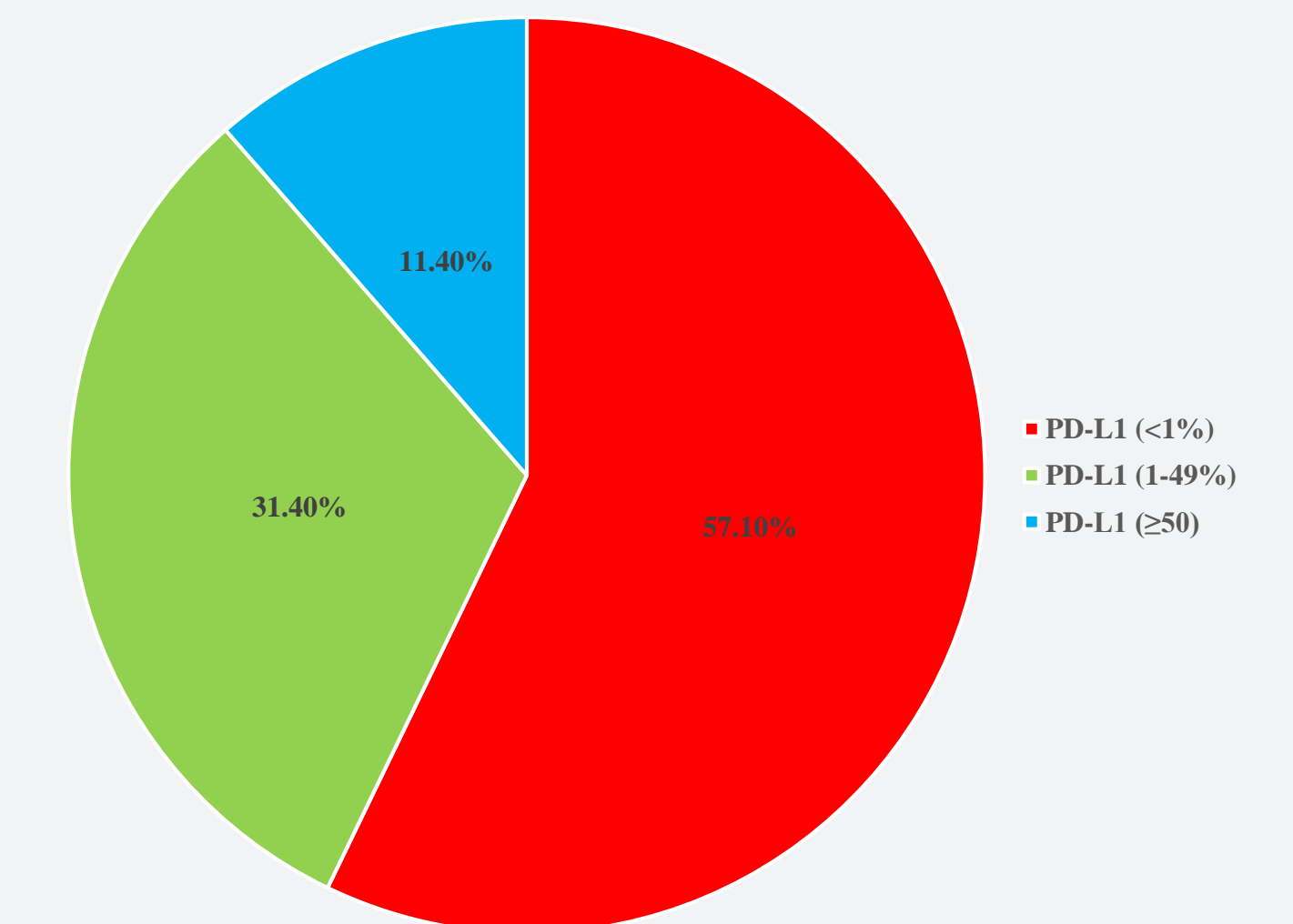
Genes mutated in  $\geq 5\%$  of cases included *BAP1* (26.3%), *NF2* (23.5%), *TP53* (15.5%), *SETD2* (10.2%). HR gene *BAP1* and CR gene *SETD2* mutations trended to be more prevalent in pts  $\geq 70$  yo ( $p=0.02$ ).

## PD-L1, TMB, and MSI



TMB was high ( $>10$  mutations/Mb) in 9.6% of tumors ( $n=20$ ). None of the tumors were Mismatch Repair Deficient/Microsatellite Instability-High (dMMR/MSI-H).

## Distribution of PD-L1 Expression (SP142 IHC)



No statistically significant difference in PD-L1 expression among different pathways

## CONCLUSION

- The majority of MPM tumors harbor alteration in one of the key cellular pathways.
- HR pathway mutations are the most common.
- The majority of tumors were PD-L1 negative and carry low TMB indicating low immunogenicity. No age and gender specific differences exist except for *BAP1* and *SETD2* mutations.

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