## **Conflict of interest: None**



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# ER+/HER2+ and ER-/HER2+ breast cancers are molecularly distinct but immune gene signatures are prognostic and predictive in both groups

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# Background

- In HER2-positive breast cancer, estrogen-receptor (ER) positive and negative tumors represent molecularly distinct entities (Loi S et al IMPAKT 2010; Bianchini G et al. ASCO 2011)
- ER+/HER2+ and ER-/HER2+ tumors showed a different clinical behavior
  - The pCR rate after neoadjuvant chemotherapy alone or in combination with targeted agents was significantly lower in ER+ tumors (Gianni L Lancet 2010; von Minckwitz G JCO 2012, Untch M Lancet Oncol 2012, Gianni L Lancet Oncol 2012, Baselga J Lancet 2012)
  - pCR was associated with improved DFS in ER-/HER2+ but not ER+/HER2+ tumors (von Minckwitz G JCO 2012)
- In HER2-negative tumors, different biological processes are associated with prognosis and chemotherapy response in ER+ and ER- (Iwamoto T. JNCI 2011). This aspect has not been addressed in HER2-positive tumors



# Aims

- We examined gene expression differences among HER2 positive breast cancers by ER status
- We also assessed the prognostic and chemotherapy response predictive values of over 3000 *a priori* defined gene sets separately in HER2+/ER positive and HER2+/ER negative tumors





# Publically available, clinically annotated Affymetrix gene expression data sets used in this analysis

		ked pies†	Pure Prognostic‡	Predictive (Neoadjuvant chemo) §		
	Cohort 1 (U133a)	Cohort 2 (Plus2)	(Node negative, untreated)	Taxane	Anthracycline	
Overall	594	1291	781	613	114	
HER2-neg						
ER-pos	381	739	495	228	1	
ER-neg	169	425	168	324	86	
HER2-pos						
ER-pos	44	127	58	27	2	
ER-neg	31	131	60	34	25	

† GEO: GSE1456, GSE1561, GSE2603, GSE31519, GSE3494, GSE10780, GSE12276, GSE12763, GSE13787, GSE16391, GSE19615, GSE20711, GSE2109, GSE21653, GSE3744, GSE5460

**‡** GEO: GSE11121, GSE2034, GSE2990, GSE5327, GSE7390

§ GEO: GSE20194, GSE20271, GSE23988, GSE25066, GSE16464

## **Methods**

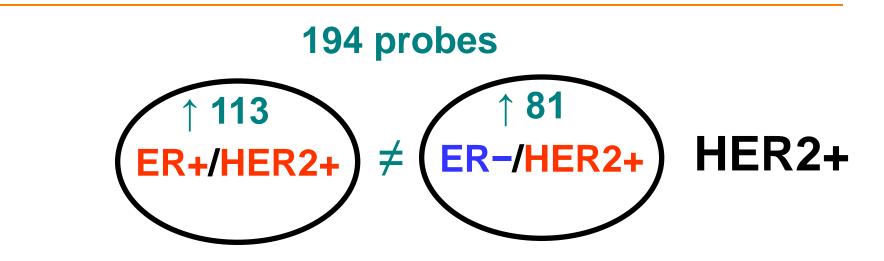
- MAS5 normalization was performed to a median target array intensity of 600 and data was transformed to log2 values
- ER and HER2 status were defined by gene expression data as previously reported (Gong Lancet Oncol 2007, Bianchini JCO 2010, Iwamoto JNCI 2011)
- We assessed prognostic and predictive values of ~3000 gene pathways from Gene Ontology, KEGG, BioCarta, and Lymphoid signatures using the Efron's Tibshirani method implemented in BRB-ArrayTools (developed by Richard Simon and BRB-ArrayTools Development Team)
- Distant Metastasis Free Survival was the endpoint used to assess gene sets associated with prognosis
- Pathological complete response in breast and axilla was the endpoint used to assess the predictive value of gene sets

# Gene expression differences between ER+/HER2+ and ER-/HER2+ breast cancers

- Gene expression differences between ER+ and ER- cancers were defined in two independent discovery datasets for which outcome annotation was not available (put here the GEO accession numbers)
- Probe sets were defined as differentially expressed if p<0.001 in both discovery datasets (combined p value ≤ 1.00E-05 by Fisher's Chi-squared combined probability test)



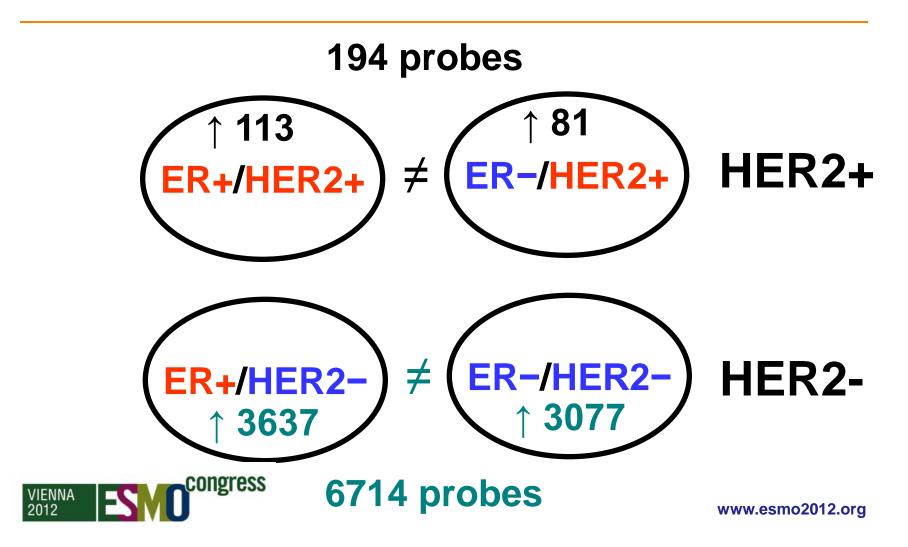
## Gene expression differences between ER+/HER2+ and ER-/HER2+ breast cancers



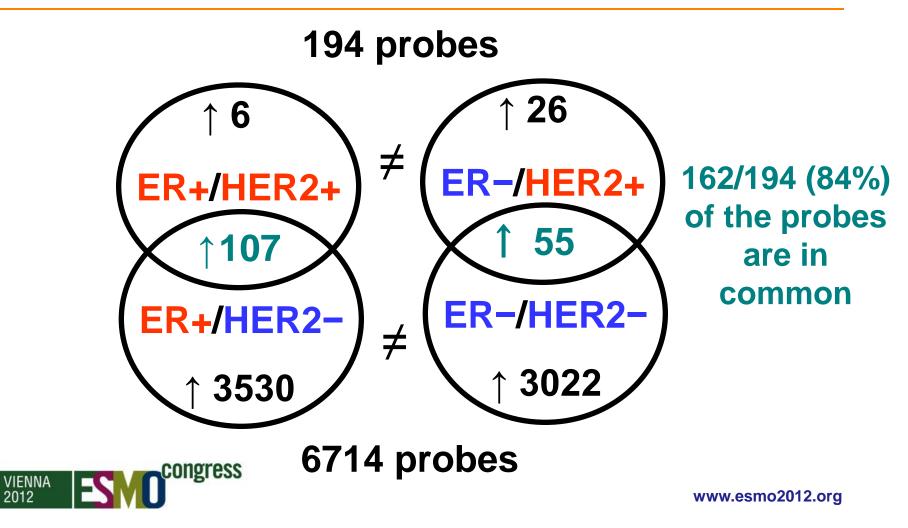




## Gene expression differences between ER+/HER2- and ER-/HER2- breast cancers

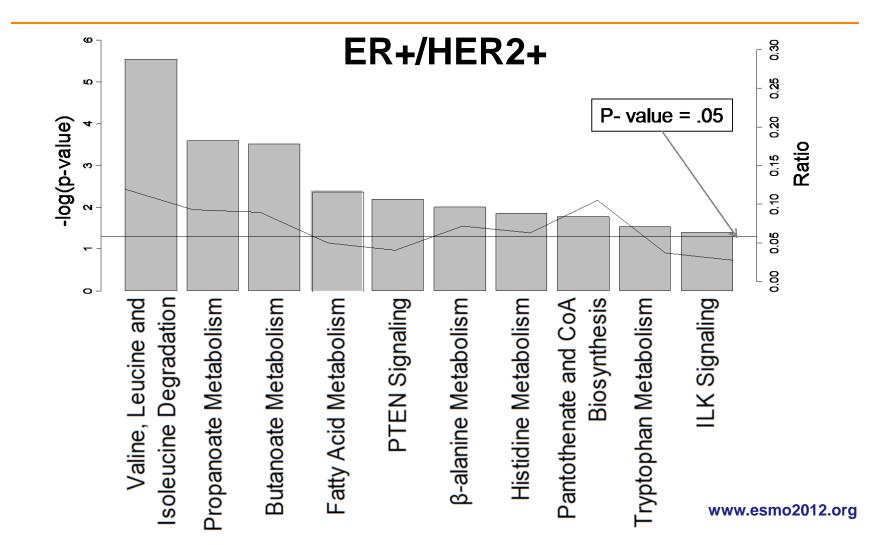


### Genes that distinguished ER+ from ER- cases significantly overlapped for HER2+ and HER2- cancers

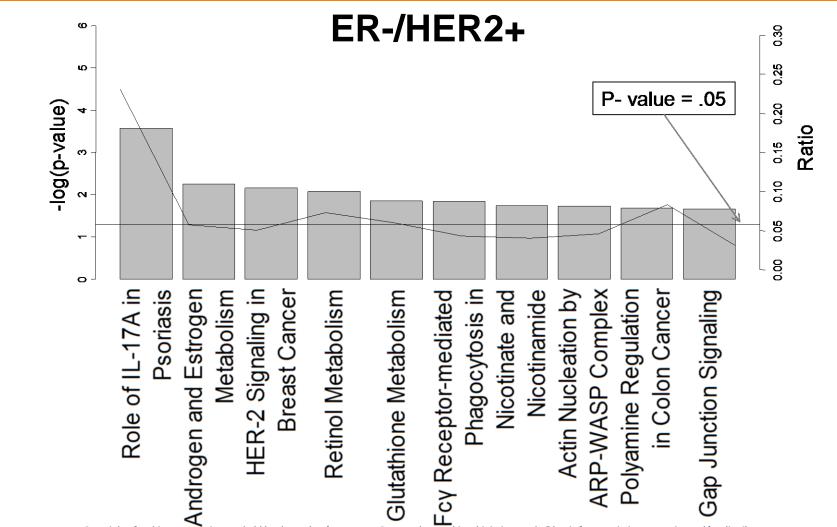


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Canonical pathways (using IPA® software) for genes overexpressed in ER+/HER2+

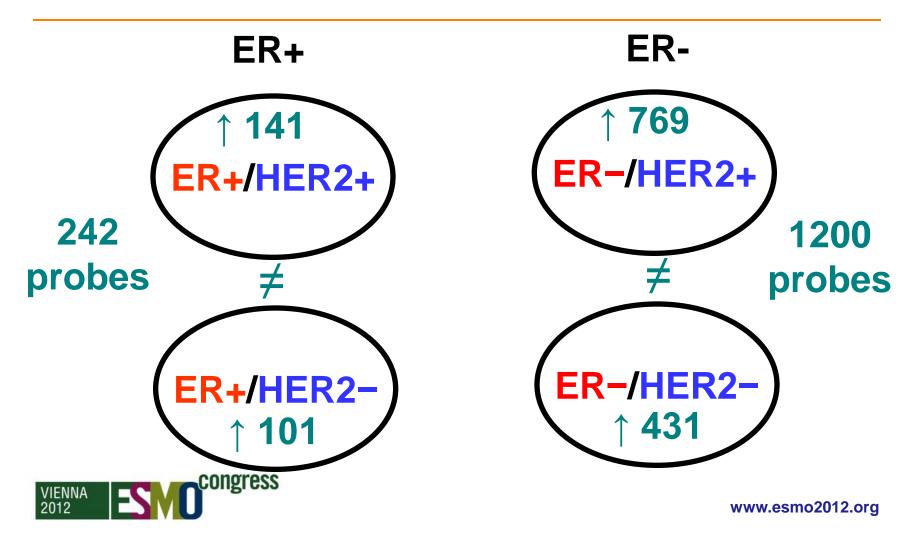


Canonical pathways (using IPA® software) for genes overexpressed in ER-/HER2+

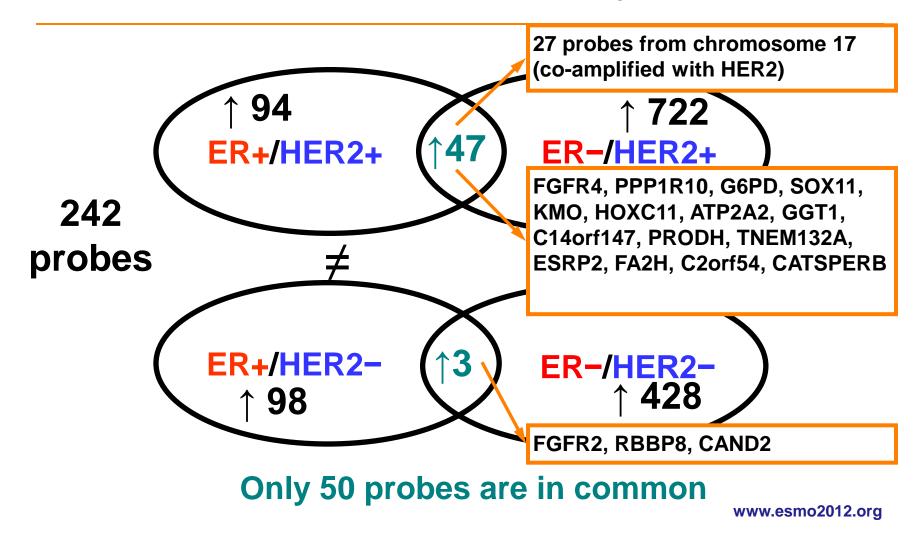


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# Gene expression differences between HER2+ and HER2- by ER status



# Gene expression differences between HER2+ and HER2- by ER status

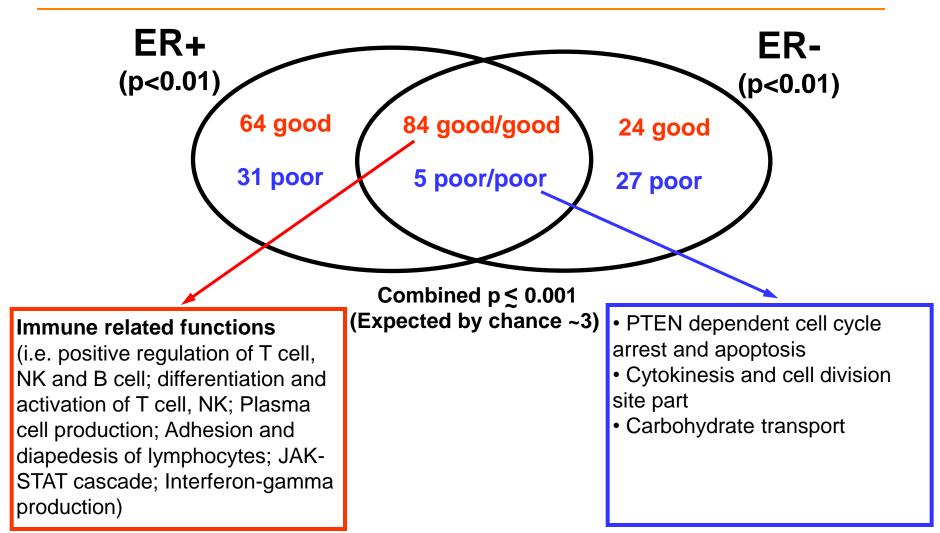


### Consistency of differentially expressed genes in Independent validation cohort

- Reproducibility of differentially expressed genes by ER and HER2 status was tested in independent validation cohorts, the prognostic data sets
- 90 to 100% of probes identified as differentially expressed in our discovery cohorts were also significantly differentially expressed in the validation sets

	Discovery	Validation cohort			
Class comparison	No. of probes	Probes with p<0.05	%		
ER+ vs ER- (HER2+)	194	184	94.8		
ER+ vs ER- (HER2-)	6750	6169	91.3		
ER+ vs ER- (HER2+ and HER2-)	162	156	96.3		
HER2+ vs HER2- (ER+)	242	216	89.2		
HER2+ vs HER2- (ER-)	1200	1149	95.7		
HER2+ vs HER2- (ER+ and ER-)	50	50	100		

#### Gene Set analysis to define prognostic biological processes in ER+ and ER-, HER2+ cancers



# Cox univariate analysis for association with prognosis of previously published immune metagenes

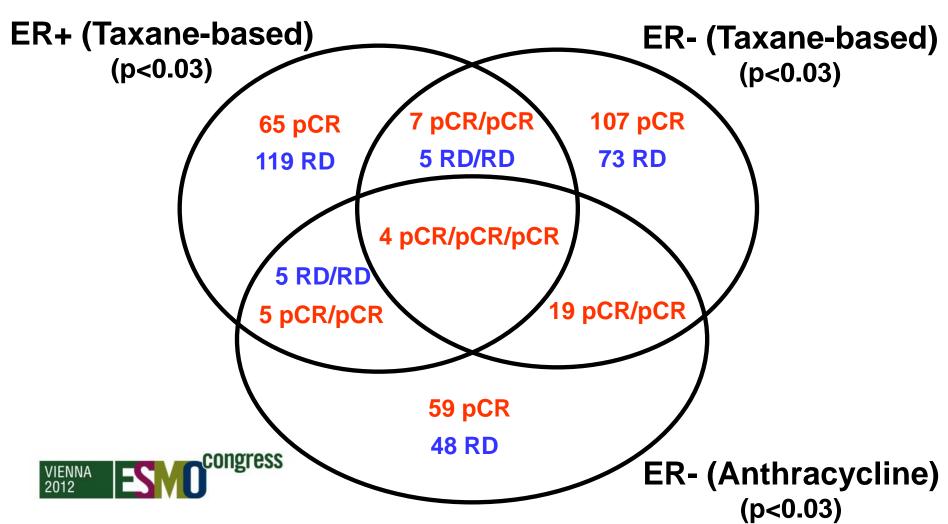
	HER2+ (N=118)			ER+ / HER2+ (N=58)			ER- / HER2+ (N=60)		
Metagene	HR	95%Cl	$\rho^{*}$	HR	95%Cl	<i>p</i> *	HR	95%Cl	p
Dendritic†	0.58	0.41 - 0.83	0.003	0.62	0.40 - 0.96	0.033	0.52	0.28 - 0.99	0.047
B-cell/Plasma cell†	0.64	0.50 - 0.80	0.0001	0.67	0.47 - 0.94	0.022	0.60	0.44 - 0.84	0.003
CD8A (~NK/CD8)	0.54	0.38 - 0.76	0.0004	0.61	0.40 - 0.93	0.022	0.45	0.25 - 0.81	0.008
GZMK (~NK/CD8)	0.58	0.41 - 0.82	0.002	0.60	0.40 - 0.92	0.018	0.55	0.30 - 1.01	0.053
Interferon inducible	0.50	0.34 - 0.74	0.001	0.41	0.22 - 0.76	0.005	0.51	0.28 - 0.91	0.024
MHC1	0.42	0.26 - 0.69	0.001	0.38	0.19 - 0.74	0.004	0.48	0.23 - 1.04	0.062
MHC2	0.62	0.44 - 0.88	0.008	0.64	0.42 - 0.98	0.042	0.62	0.33 - 1.14	0.122
STAT1	0.61	0.43 - 0.85	0.003	0.58	0.38 - 0.90	0.015	0.64	0.38 - 1.08	0.097

† Metagenes adopted from Bianchini G et al. JCO 2010

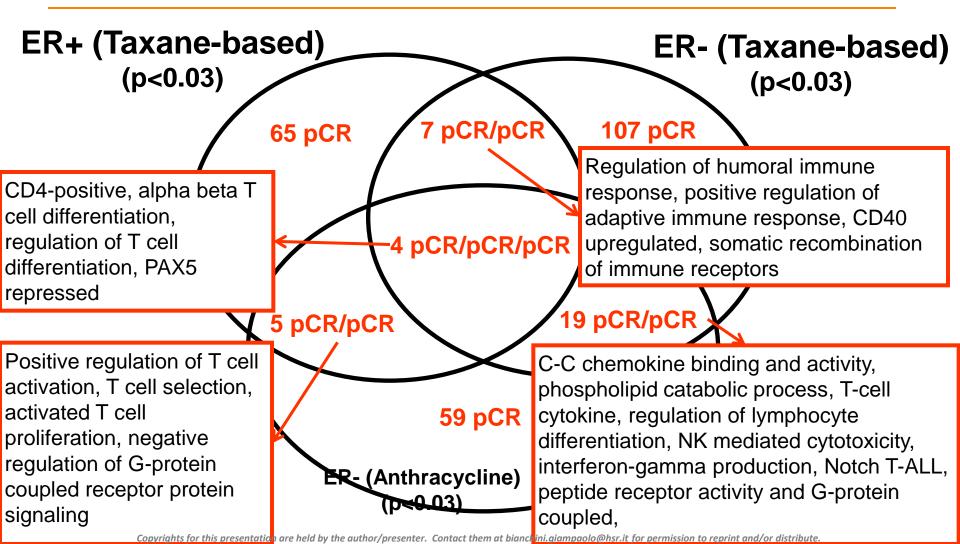
\* Cox univariate analysis. Metagenes were considered as continuous variables



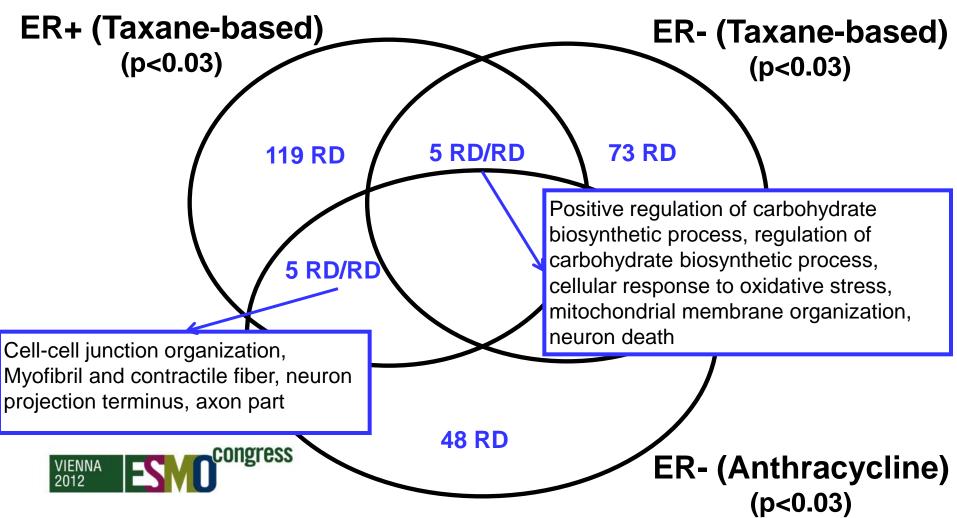
Gene sets associated with response to neoadjuvant chemotherapy in ER+ and ER-, HER2+ breast cancer



### In HER2-positive cancers immunological functions are consistently associated with pCR regardless of treatment regimen and ER status



# Diverse metabolic functions associated with residual disease (lesser chemotherapy sensitivity)



### Conclusions

- Among HER2+ tumors, ER- and ER+ cancers represent distinct molecular subtypes.
- Immune signatures strongly and consistently predict for good prognosis and to a lesser extent for higher chemotherapy sensitivity in HER2+ cancers regardless of ER status.
- Tumor immune infiltration was associated with pCR as well as good prognosis.
- Biosynthetic and metabolic processes are associated with poor prognosis and lesser response to chemotherapy that warrant further study in the laboratory.

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