



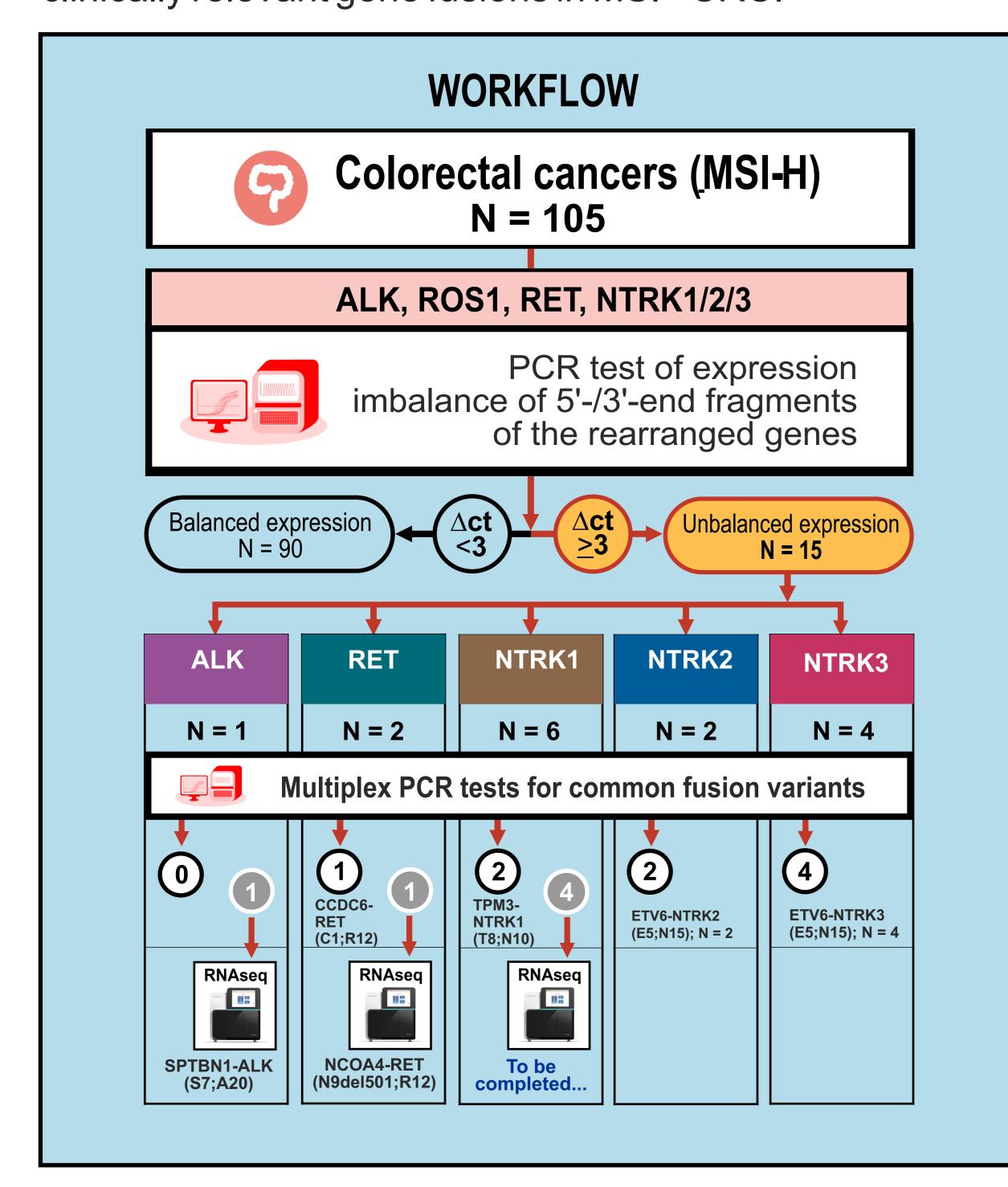
121P - Spectrum of druggable gene fusions in microsatellite-unstable colorectal tumors

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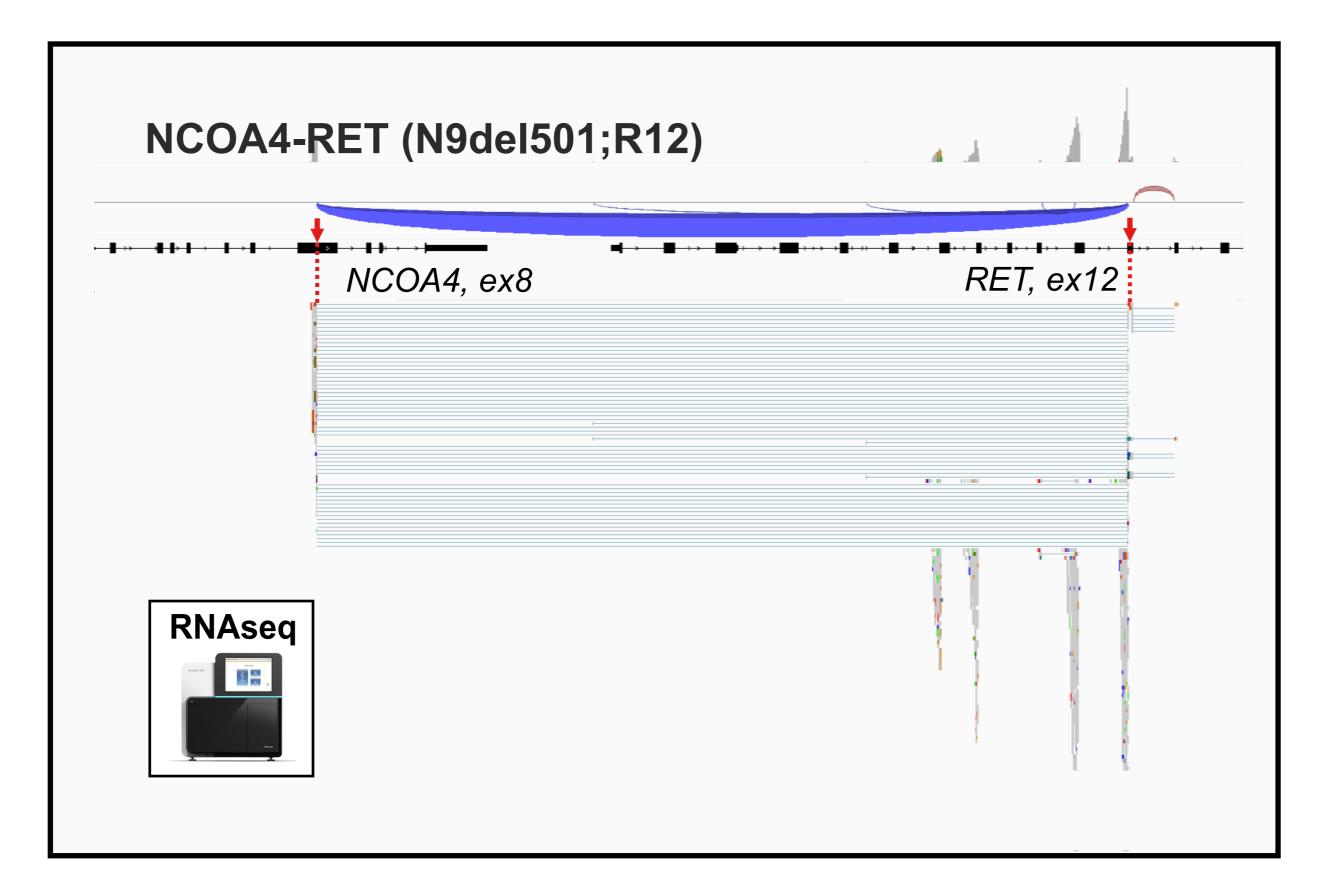
Background & Purpose

Colorectal carcinomas (CRCs) with high-level microsatellite instability (MSI-H) often contain gene fusions, which involve receptor tyrosine kinases. We aimed to determine the frequency of NTRK and other types of clinically relevant gene fusions in MSI+ CRC.



Patients & Methods

- The study included 105 MSI-H CRCs. NTRK1/2/3, ALK, ROS1 and RET gene fusions were analyzed by PCR test for 5'/3'end unbalanced expression, which is capable of detecting all translocation variants.
- The type of rearrangements was subsequently determined by variant-specific PCR for common fusions, and, whenever necessary, by targeted RNA nextgeneration sequencing (NGS).



Results

- NTRK1/2/3 translocations were the most common, being detected in 8/105 (8%) CRCs (TPM3-NTRK1 (T8;N10): n = 2; ETV6-NTRK2 (E5;N15): n = 2; ETV6-NTRK3 (E5;N15): n = 4).
- There were 2 tumors with RET rearrangements (CCDC6-RET (C1;R12) and NCOA4-RET (N8del501;R12), respectively) and 1 instance of SPTBN1-ALK (S7;A20) chimera.
- KRAS, NRAS or BRAF mutations.
- Gene rearrangements were detected in 10 (13%) of these tumors. 29/105 (28%) carcinomas carried activating lesions in RAS/RAF oncogenes; one of these CRCs had both ETV6-NTRK3 (E5;N15) translocation and BRAF V600E substitution.

Microsatellite-unstable CRCs have high frequency of druggable gene rearrangements, with NTRK1/2/3 deserving particular attention.

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