

Genomic profiling of circulating tumour DNA in East Asian head and neck squamous cell carcinoma

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Introduction

- Novel effective therapy is limited in head and neck squamous cell carcinoma (HNSCC).
- Next generation sequencing (NGS) with sophisticated bioinformatics allows the distinct identification of tumour-specific DNA mutations in circulating tumor DNA (ctDNA).
- CtDNA may represent the real-time genomic profile and biology of cancers to be treated. Identification of molecular characterization of ctDNA may potentially provide a way to precisely treat the patients with novel options.

Methods

Study design

- A retrospective analysis at Peking Union Medical College Hospital.

Patient eligibility

- Patients had pathologically confirmed squamous cell carcinoma of the oropharynx, oral cavity, hypopharynx, or larynx.

Sample collection

- Peripheral blood samples were collected in tubes from Streck and stored for up to 5 days at room temperature before plasma preparation and DNA extraction.

Circulating tumor DNA analysis

- Target-capture deep sequencing with a panel covering 1021 genes was performed to detected somatic mutations in ctDNA.

Methods (continued)

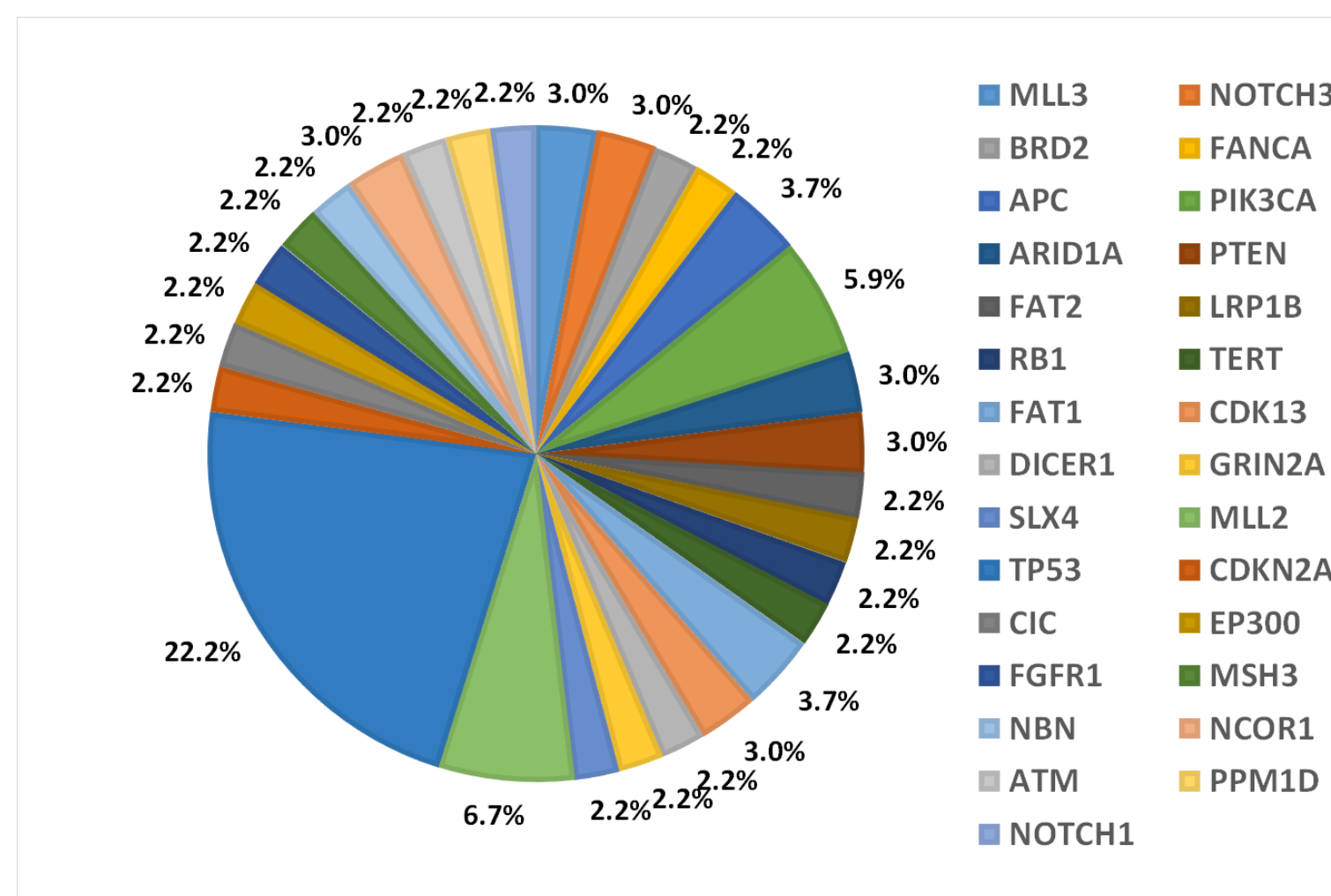
- Tumour mutation burden (TMB) analysis interrogated SNVs and small indels with the variant allele frequency (VAF) $\geq 0.5\%$.
- TMB-U (unknown) is defined as the maximum VAF $< 0.5\%$. TMB-H was defined as the top quartile of all TMB values.

Statistical analysis

- SPSS Statistics and GraphPad Prism were used for statistical analysis.
- P* values of < 0.05 were considered significant.

Results

Frequencies of genomic mutations in ctDNA observed more than 5% in the overall samples (N=51)

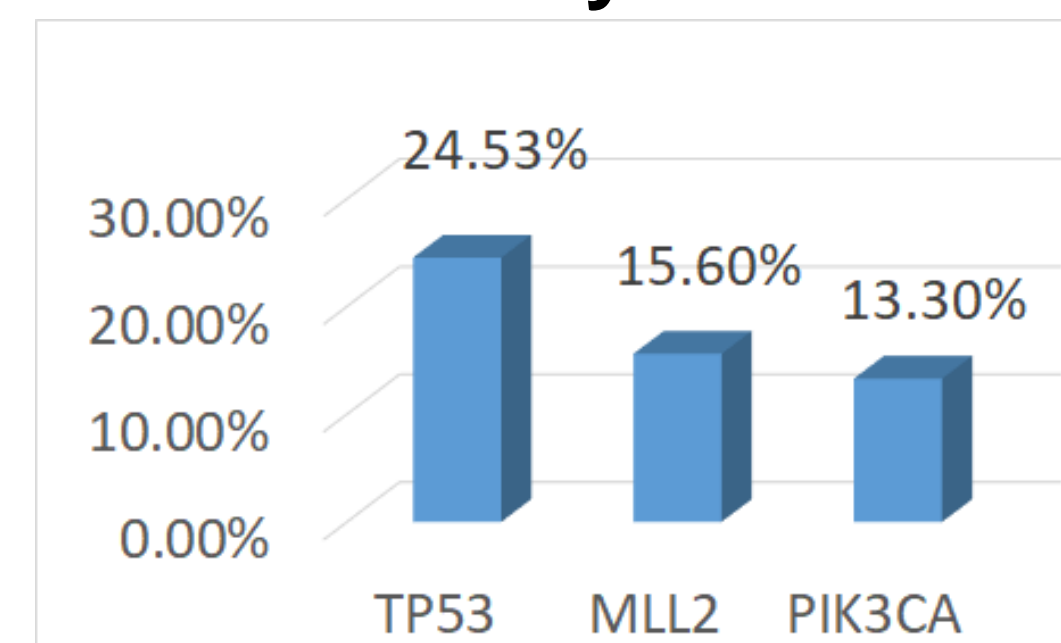


Results (continued)

Patient characteristics

Characteristic	N (%)	bTMB (mutations/Mb) Median (IQR)	P Value
All patients	45	3.00(2.00-9.00)	
Age (years), median	61(36-92)		
Age group			
<65	26(57.8)	3.00(1.75-7.20)	-
65+	13(28.9)	4.00(2.00-14.20)	0.35
UNK	6(13.3)		
Gender			
Female	9(20.0)	3.00(2.00- 11.50)	-
Male	36(80.0)	3.42(1.25-8.91)	0.86
Primary tumor site			
Oral cavity	15(33.3)	2.88(1.00-5.00)	-
Oropharynx	10(22.2)	4.32(1.75-14.10)	-
Larynx	11(24.4)	6.00(3.00-14.00)	-
Hypopharynx	9(20)	3.84(2.44-8.50)	0.50

The three most common altered genes identified by ctDNA analysis



Results (continued)

Patients with bTMB-H had been identified genetic alteration in either MLL3, NOTCH3, BRD2, or FANCA genes.

Conclusions

- Analysis of ctDNA may provide novel and clinically relevant insights into precise therapeutic decisions in HNSCC.
- Some genetic mutation might associate with high bTMB status.
- The potential utility and validity of large-scale ctDNA genomic profiling approaches should be explored in future studies.

Acknowledgements

Study sponsored by National Natural Science Foundation of China (81472785, 61435001), CAMS Innovation Fund for Medical Sciences (No. 2016-I2M-1-001).

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