

*Critically Appraised Topic*

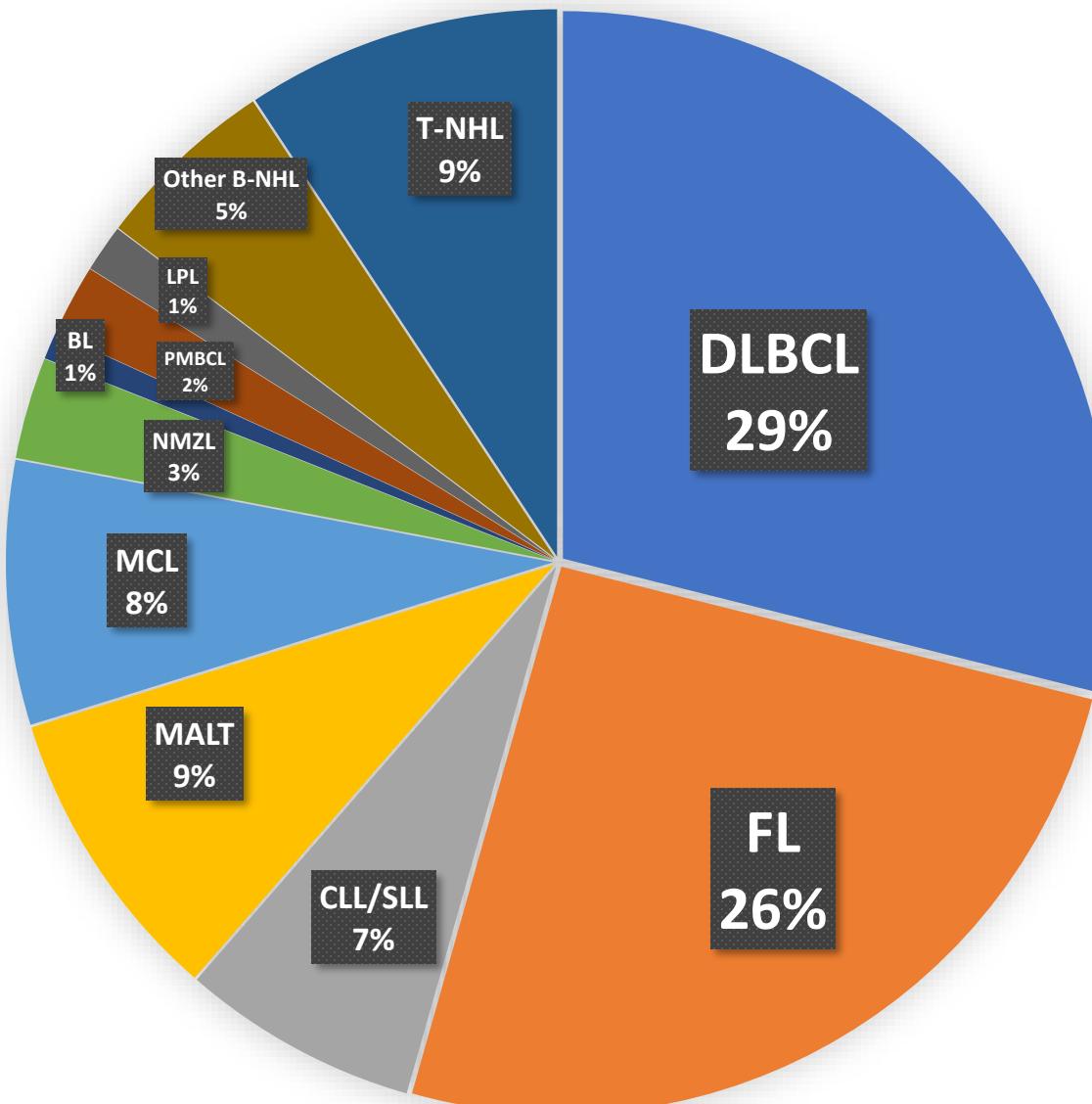
# **Next-generation sequencing panel for mature lymphoid malignancies**

12 May 2020  
Louis NEVEJAN

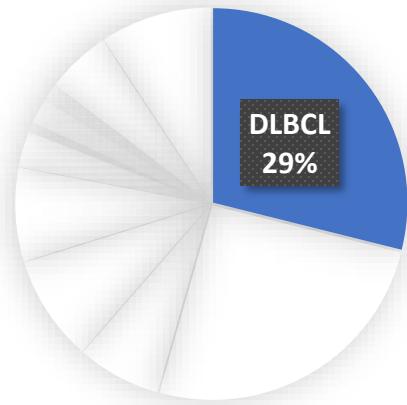
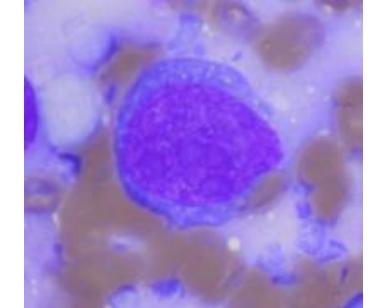


# Clinical & diagnostic scenario

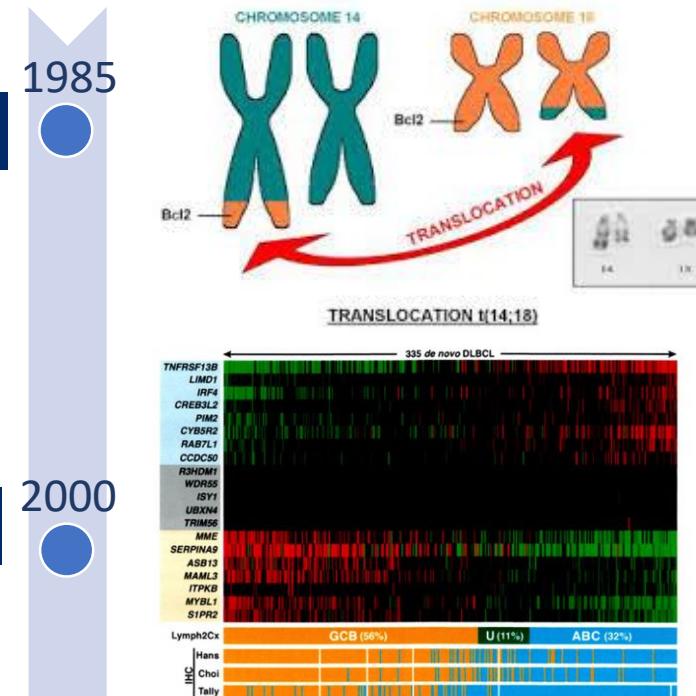
## Relative frequencies of *non-Hodgkin lymphoma* subtypes in developed regions



# DLBCL, NOS



## Chromosomal translocations



## Gene expression profiling

2000

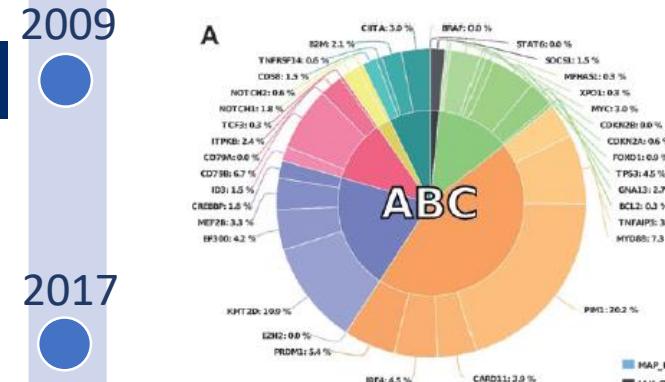
## Next-generation sequencing

2009

2017

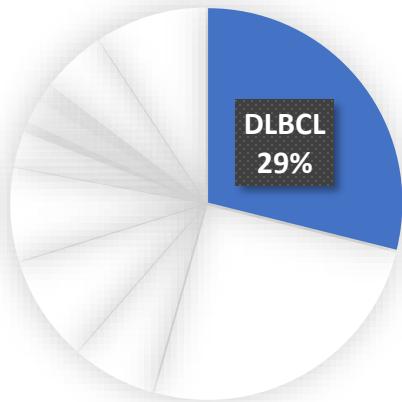
## WHO Classification of Tumours of Haematopoietic and Lymphoid Tissues

2017 WHO Classification	DLBCL-NOS
Gene Expression Subtypes	ABC GCB



JARDIN P. Next Generation Sequencing and targeted genotyping as tools for personalized medicine in lymphoma. Presentation BHS 2017  
DUBOIS S. Clin Cancer Res (2016), 22(12); 2919–28.

# DLBCL, NOS



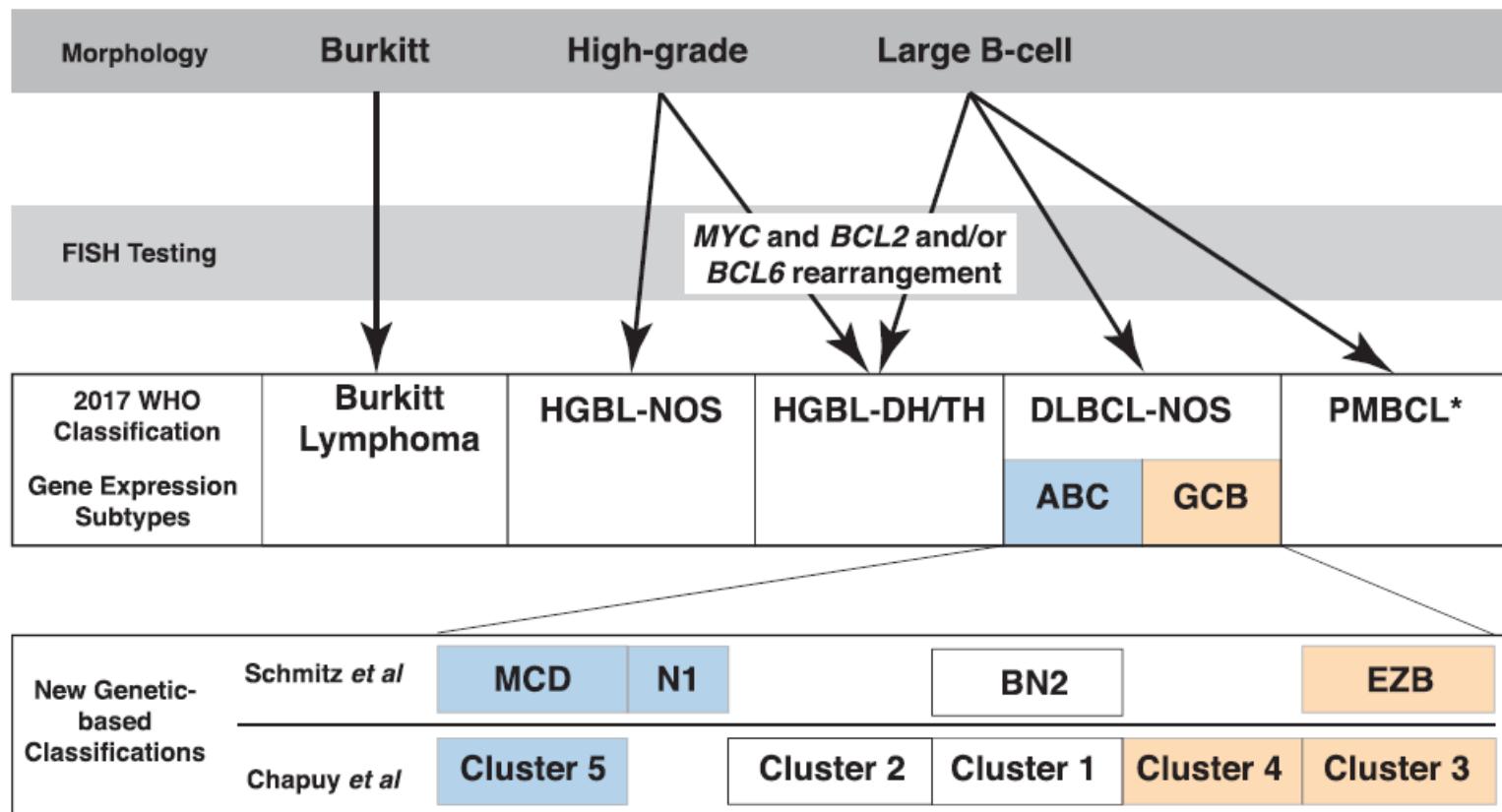
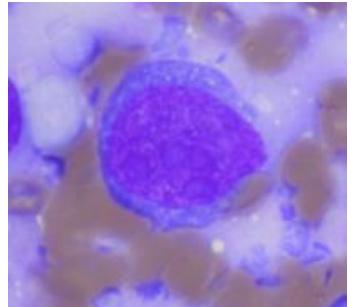
## WHO Classification of Tumours of Haematopoietic and Lymphoid Tissues

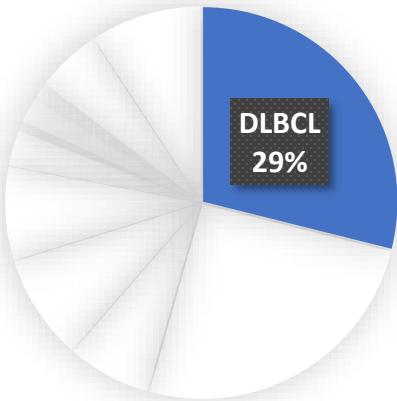
2017

nature  
medicine

2018

The NEW ENGLAND  
JOURNAL of MEDICINE





Chromosomal translocations

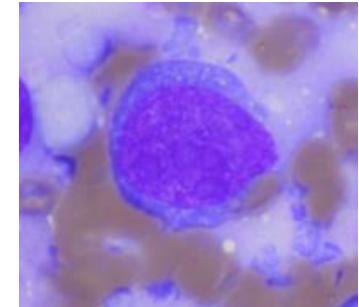


CHOP  
*chemotherapy*

R-CHOP  
*Immuno-  
chemotherapy*

R-CHOP + ...  
*Precision  
therapy*

**DLBCL, NOS**



### WHO Classification of Tumours of Haematopoietic and Lymphoid Tissues

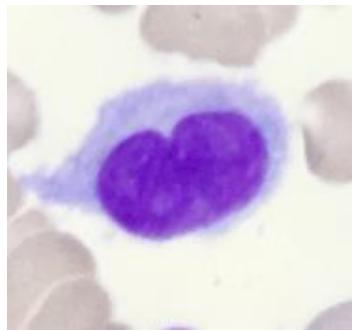
2017 WHO  
Classification  
Gene Expression  
Subtypes

DLBCL-NOS  
ABC      GCB

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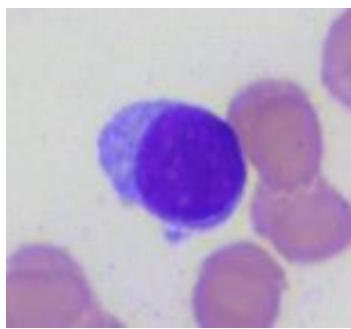
# **WHO Classification of Tumours of Haematopoietic and Lymphoid Tissues**

**HCL**



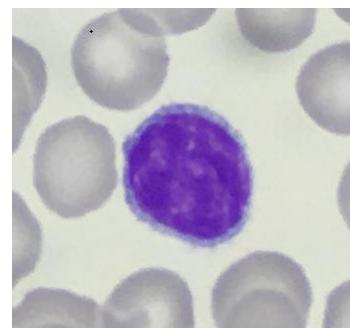
**BRAF V600E**

**LPL**



**MYD88 L265P**

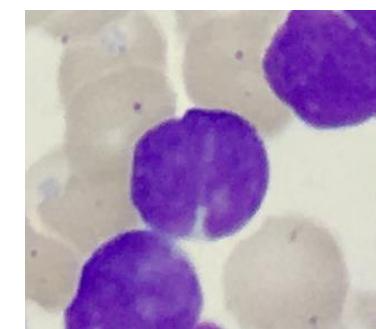
**CLL**



**TP53**

*NOTCH1*  
*SF3B1*  
*BIRC3*

**FL**



*EZH2*

**Diagnostic**

**Prognostic**

**Therapeutic**



[Home](#) » [Professional](#) » [Labogids](#) » NGS myeloïd 21-genen panel (Qiaseq): nieuw - vanaf oktober 2018

## NGS myeloïd 21-genen panel (Qiaseq): nieuw - vanaf oktober 2018





# Questions

1.

Which **genes** should be included  
in a next-generation sequencing panel  
for mature lymphoid malignancies providing  
**diagnostic, prognostic** and **therapeutic** information?

2.

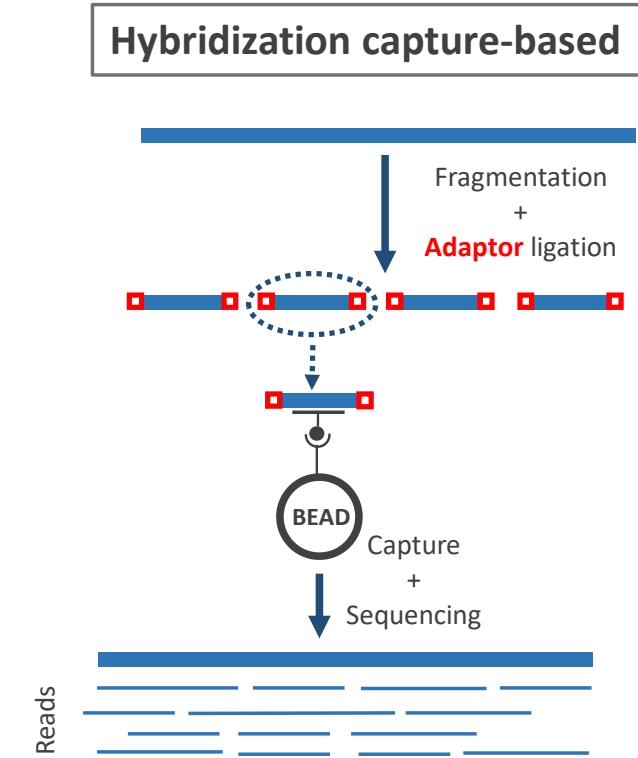
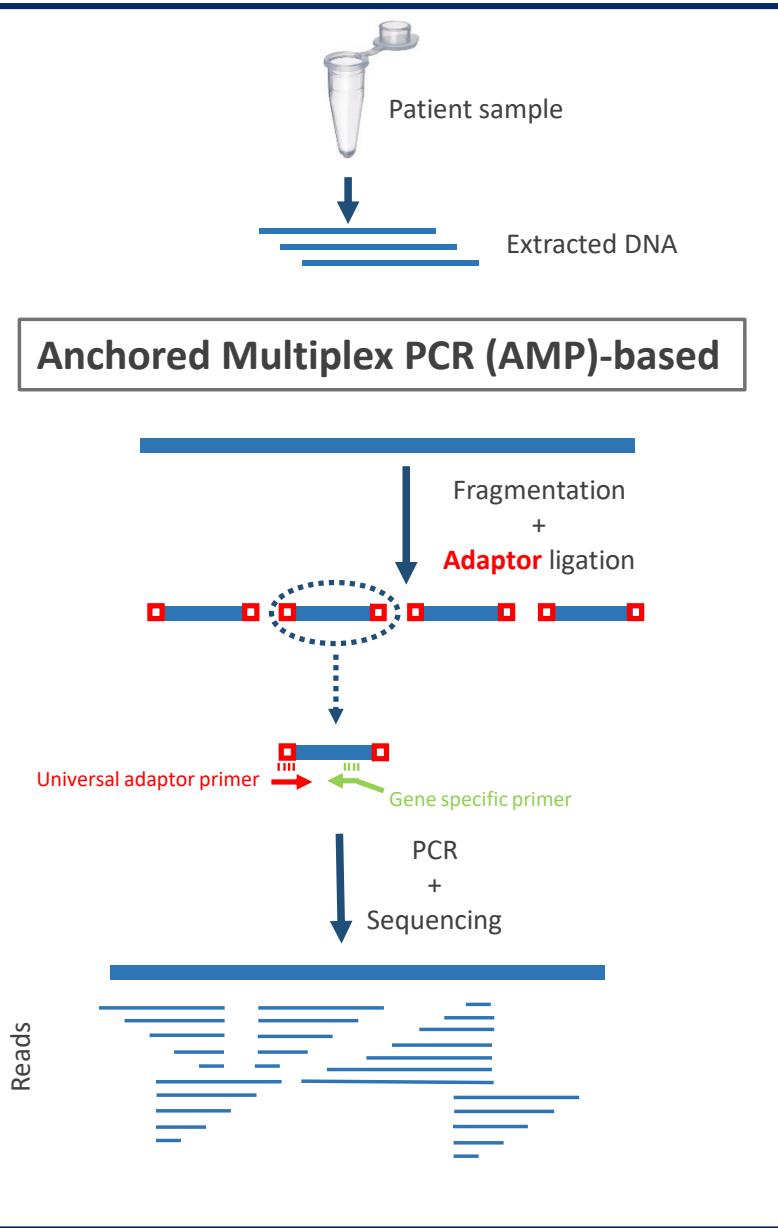
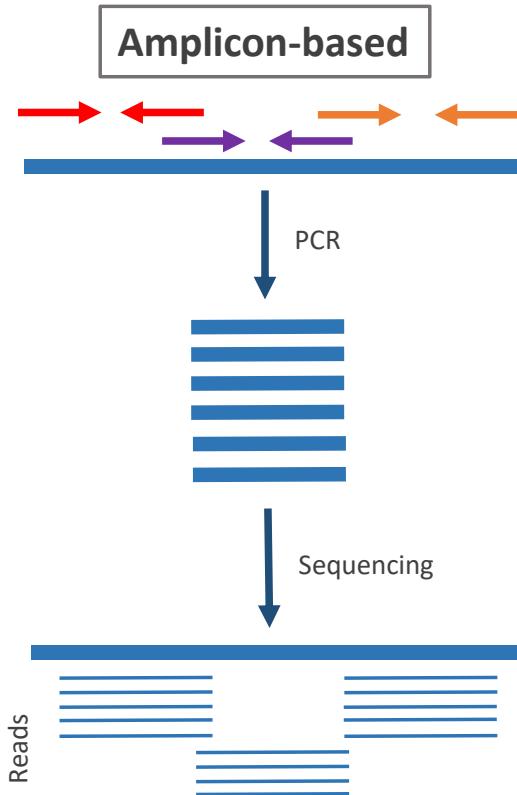
How can such panel be **implemented** in  
routine clinical practice?

Q1.

## Composition

Lymphoid gene panel

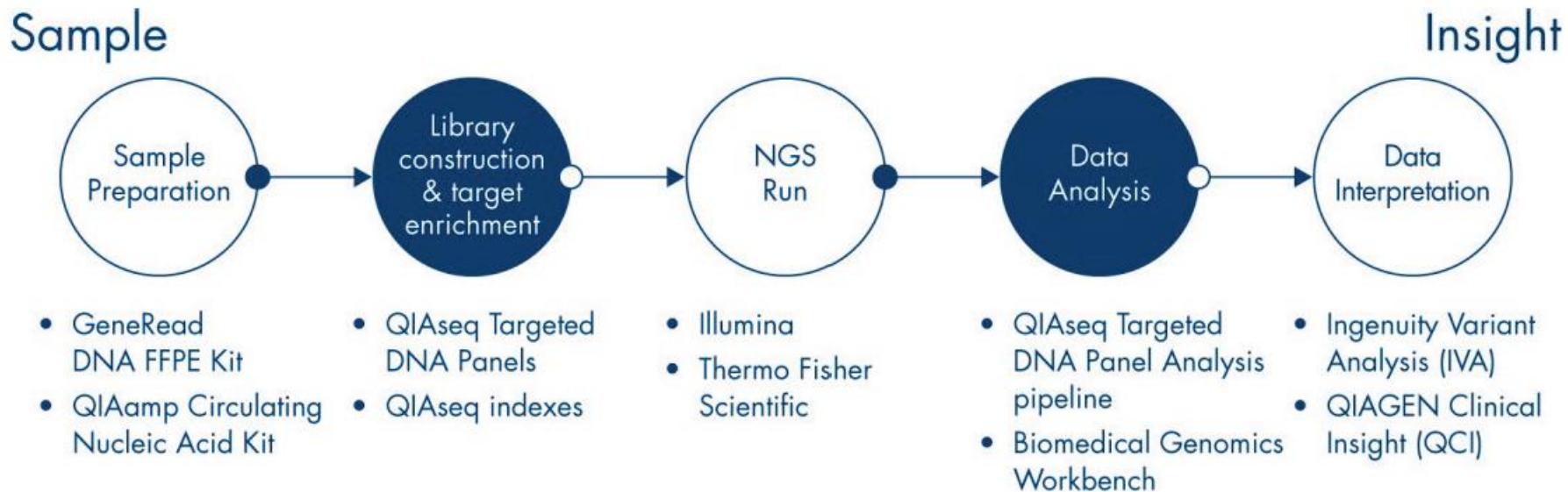
## NGS techniques for DNA variant detection



## Q1.

### Composition

#### Lymphoid gene panel



**Figure 1. Overview of the sample-to-insight NGS workflow with QIAseq Targeted DNA Panels.** The complete sample-to-insight procedure begins with DNA extraction. Next is library construction and target enrichment with QIAseq Targeted DNA Panels. Following NGS, data analysis is performed using the QIAseq Targeted DNA Panel Analysis Software pipeline or Biomedical Genomics Workbench. Ultimately, detected variants can be interpreted with the Ingenuity® Variant Analysis (IVA) tool or with QIAGEN Clinical Insight (QCI™).

Q1.

## Composition

Lymphoid gene panel

# Literature search

## REVIEW ARTICLE



EUROPEAN  
HEMATOLOGY  
ASSOCIATION



### Clinical impact of recurrently mutated genes on lymphoma diagnostics: state-of-the-art and beyond

Richard Rosenquist,<sup>1</sup> Andreas Rosenwald,<sup>2</sup> Ming-Qing Du,<sup>3</sup> Gianluca Gaidano,<sup>4</sup> Patricia Groenen,<sup>5</sup> Andrew Wotherspoon,<sup>6</sup> Paolo Ghia,<sup>7</sup> Philippe Gaulard,<sup>8</sup> Elias Campo,<sup>9</sup> Kostas Stamatopoulos,<sup>10</sup> on behalf of the European Research Initiative on CLL (ERIC) and the European Association for Haematopathology (EAHP)

Haematologica 2016  
Volume 101(9):1002-1009

European Expert Group on NGS-based Diagnostics in Lymphoma (EGNL)

HemaSphere  
Powered by EHA



Perspective  
OPEN ACCESS

### The Need for a Consensus Next-generation Sequencing Panel for Mature Lymphoid Malignancies

Pierre Sujobert<sup>1,2</sup>, Yannick Le Bris<sup>3,21</sup>, Laurence de Leval<sup>4</sup>, Audrey Gros<sup>5</sup>, Jean Philippe Merlio<sup>5</sup>, Cedric Pastoret<sup>6</sup>, Sarah Huet<sup>1,2,20</sup>, Clémentine Sarkozy<sup>2,7</sup>, Frédéric Davi<sup>8</sup>, Mary Callanan<sup>9,10</sup>, Catherine Thieblemont<sup>11,12,13</sup>, David Sibon<sup>14</sup>, Vahid Asnafi<sup>15</sup>, Claude Preudhomme<sup>16</sup>, Philippe Gaulard<sup>17,18</sup>, Fabrice Jardin<sup>19</sup>, Gilles Salles<sup>2,7</sup>, Elizabeth Macintyre<sup>15</sup>

HemaSphere, 2019;3:1. <http://dx.doi.org/10.1097/HS9.0000000000000169>.

LYmphoma Study Association (LYSA)

Groupe de Biologistes Moléculaires des Hémopathies Malignes (GBMHW)

Q1.

## Composition

### Lymphoid gene panel

# Literature search

HemaSphere  
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Perspective  
OPEN ACCESS

### The Need for a Consensus Next-generation Sequencing Panel for Mature Lymphoid Malignancies

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Consensus panel **B-cell lymphomas** (33 genes)  
Consensus panel **T-cell lymphomas** (11 genes)

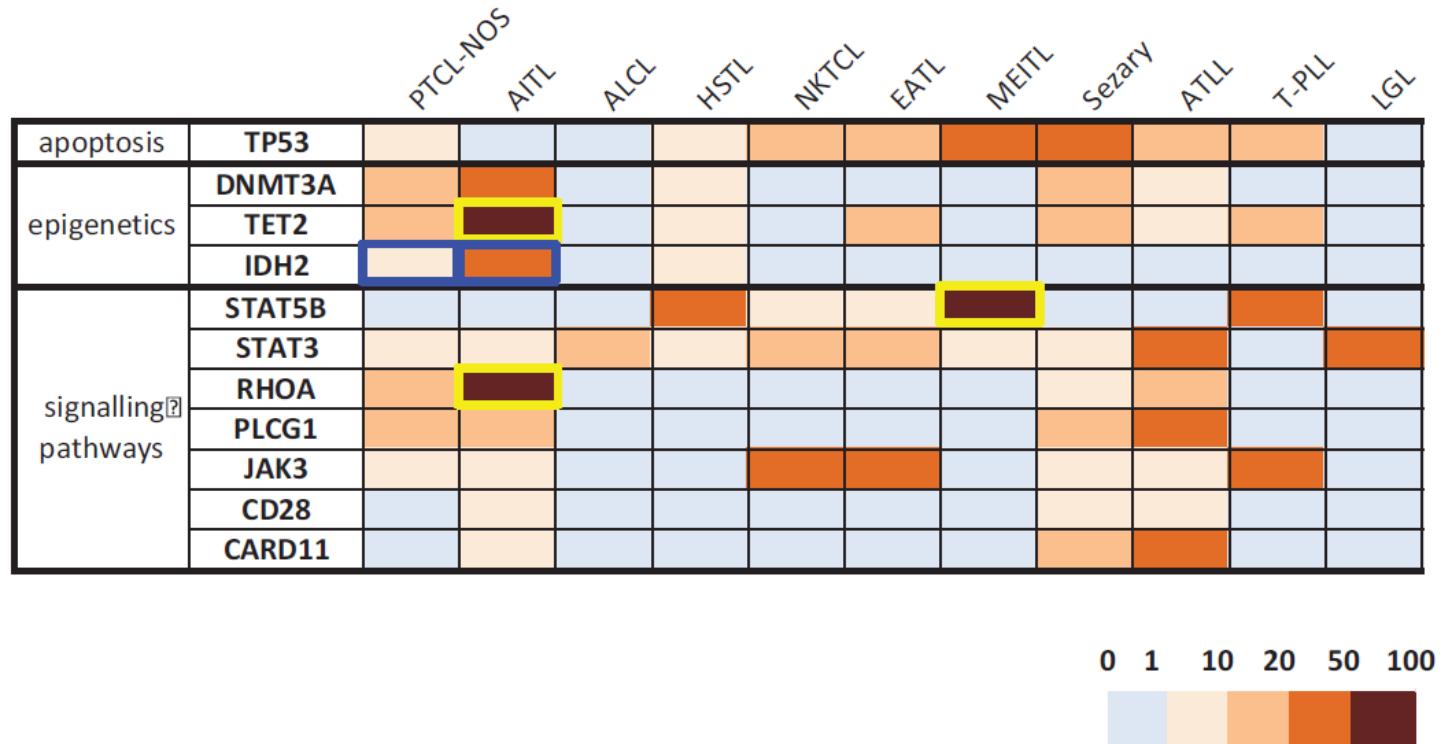


Figure 2. A heatmap representation of the prevalence of gene mutations in mature T lymphoid malignancies from the LYSA/GBMHM consensus panel. The borders of the squares are colored when the alteration has a clinical impact in a particular lymphoma subtype (diagnostic in yellow, theranostic in blue). AITL = angio-immunoblastic T lymphoma, ALCL = anaplastic large cell lymphoma, ATLL = adult T leukemia/lymphoma, EATL = enteropathy associated T lymphoma, HSTL = hepatosplenitic T lymphoma, LGL = large granular lymphocytic leukemia, MEITL = monomorphic epitheliotropic intestinal T lymphoma, NK/TCL = nasal type NK/T cell lymphoma, PTCL-NOS = peripheral T cell lymphoma, not otherwise specified, PTCL-TFH = nodal peripheral T cell lymphoma derived from T<sub>FH</sub> cells, Sezary = Sezary syndrome, T-PLL = T-prolymphocytic leukemia.

**Q1.**

# Composition

## Lymphoid gene panel

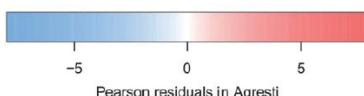
# Literature search

DUBOIS et al.

## Lymphopanel (34 genes)

DLBCL

	ABC n = 81	GCB n = 83	PMBL n = 18	other n = 33	FDR
STAT6	0%	14%	72%	6%	6.8e-14
XPO1	1%	1%	39%	3%	4.8e-10
SOCS1	6%	16%	56%	12%	2.5e-05
BCL2	1%	24%	0%	3%	2.5e-05
CITA	12%	10%	56%	9%	3.1e-05
TNFAIP3	15%	11%	61%	15%	3.1e-05
CD79B	25%	2%	0%	3%	3.2e-05
PIM1	33%	8%	0%	6%	3.3e-05
GNA13	9%	12%	50%	12%	2.8e-04
CD58	6%	10%	39%	6%	1.2e-03
CREBBP	6%	31%	11%	24%	1.2e-03
B2M	9%	18%	50%	24%	1.2e-03
EZH2	0%	18%	6%	9%	1.8e-03
TNFRSF14	2%	17%	0%	24%	1.8e-03
MFHAS1	1%	10%	28%	9%	3.9e-03
MYD88	28%	10%	0%	15%	4.7e-03
ITPKB	9%	16%	39%	9%	1.4e-02
PRDM1	16%	6%	0%	3%	5.1e-02
NOTCH2	2%	10%	0%	15%	7.6e-02
IRF4	14%	5%	11%	0%	8.7e-02
MEF2B	12%	23%	11%	6%	1.4e-01
BRAF	0%	0%	0%	3%	2.1e-01
FOXO1	4%	12%	6%	3%	2.1e-01
KMT2D	41%	46%	17%	42%	2.2e-01
CARD11	14%	7%	0%	9%	3.5e-01
NOTCH1	7%	1%	6%	6%	3.7e-01
CD79A	0%	2%	0%	0%	4.5e-01
TP53	19%	16%	11%	6%	4.6e-01
CDKN2B	0%	1%	0%	3%	5.4e-01
ID3	5%	2%	6%	9%	5.5e-01
MYC	5%	10%	6%	3%	5.5e-01
CDKN2A	2%	1%	0%	0%	7.4e-01
TCF3	1%	2%	0%	0%	7.4e-01
EP300	15%	14%	17%	18%	9.6e-01

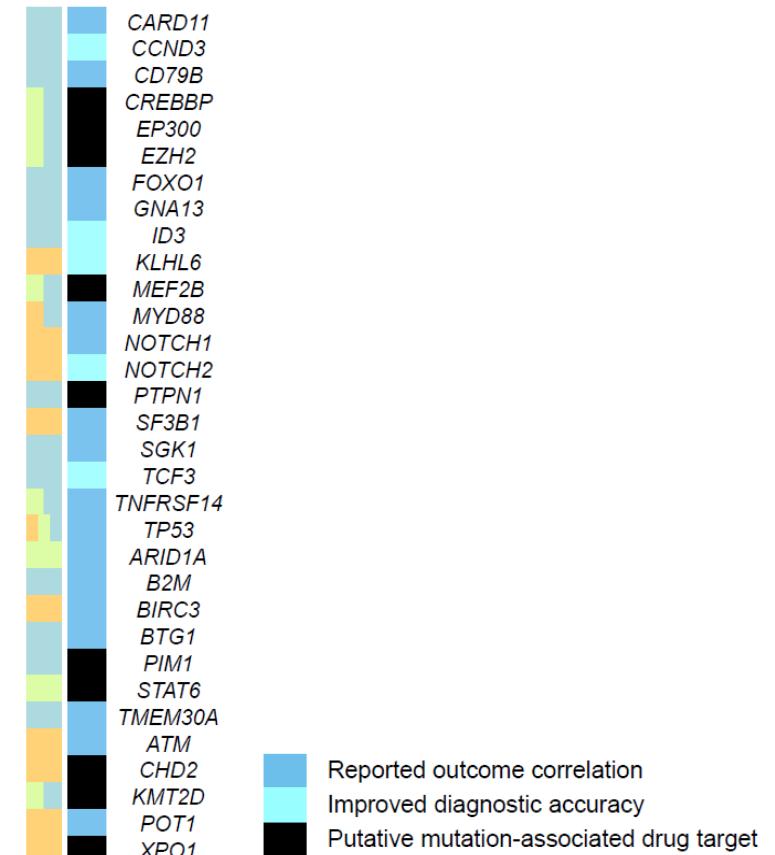


DUBOIS ET AL. Clin Cancer Res. 2016;22(12):2919-28

HUNG et al.

### Lymphopanel (32 genes)

CLL - FL - DLBCL



HUNG et al. J Mol Diagnostics (2018) 20(2):203-14

**Q1.**

## Composition

### Lymphoid gene panel

#### Genetic landscape and deregulated pathways in B-cell lymphoid malignancies

R. Rosenquist <sup>1,2,\*</sup>, S. Beà<sup>3,\*</sup>, M.-Q. Du<sup>4</sup>, B. Nadel<sup>5</sup> & Q. Pan-Hammarström<sup>6</sup>

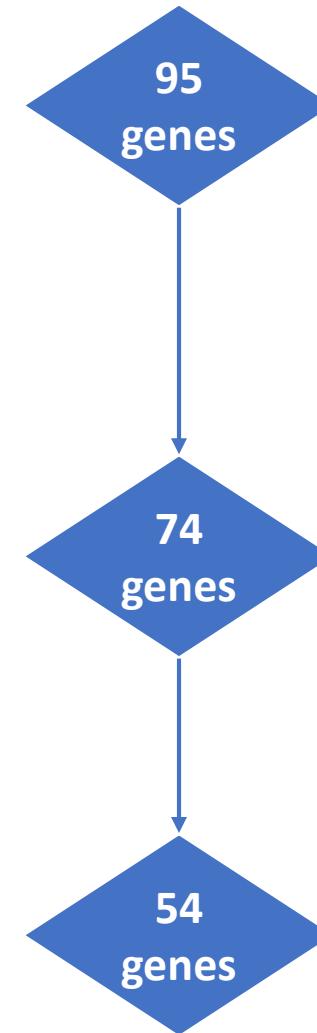
#### Genetic aberrations in small B-cell lymphomas and leukemias: molecular pathology, clinical relevance and therapeutic targets

Agata M. Bogusz & Adam Bagg

#### Frequent Mutations in Natural Killer/T Cell Lymphoma

Yanjie Zhang Chaoping Li Weili Xue Mingzhi Zhang Zhaoming Li

## Literature search



**Exclusion of genes based on:**  
occurrence in only one gene panel without any references

BCL6	FGFR3	ITPKB	PRKDC
BCL10	GNAI2	JAK1	SYK
CDH2	IDH1	JAK2	TMEM30A
FAS	IKZF1	KMT2C	
FGFR1	IKZF3	MTOR	
FGFR2	IRF8	PDGFRA	

**Exclusion of genes based on:**  
No clear diagnostic/prognostic/theranostic information

BTG1	KIT	POT1	SGK1
CCND3	KLHL6	PRDM1/BLIMP1	ZMYM3
CDKN2B	MAPK7	PTEN	
CHD2	MFHAS1	PTPN1	
CIITA	PIK3CA	PTPN6	
IRF4/MUM1	PIK3CD	SAMHD1	

Q1.

## Composition

Lymphoid gene panel

# Literature search

54  
genes

 Catalogue Of Somatic Mutations In Cancer

Projects ▾ Data ▾ Tools ▾ News ▾ Help ▾ About ▾ Genome Version ▾ Search COSMIC... **SEARCH** Login ▾

### COSMIC search results

Your search term "**cxcr4**" was an exact match for the COSMIC gene [CXCR4](#).

A search of the whole COSMIC database returned results in 3 sections of the database. [More...](#)

Genes (2 hits) Legacy Mutations (0) Mutations (810) SNPs (0) Cancer (0) Tumour Site (0) Samples (0) Pubmed (30) Studies (0)

Show 10 ▾ entries

Gene	Alternate IDs	Tested samples	Simple Mutations	Fusions	Coding Mutations
<a href="#">CXCR4</a> ENST00000241393	<a href="#">CXCR4</a> ENST00000241393,ENST00000241393.3, <a href="#">CXCR4</a>	52189	646	0	646
<a href="#">CXCR4</a>	<a href="#">CXCR4</a> .ENST00000409817.1, <a href="#">CXCR4</a>	52189	602	0	602

Showing 1 to 2 of 2 entries First Previous **1** Next Last

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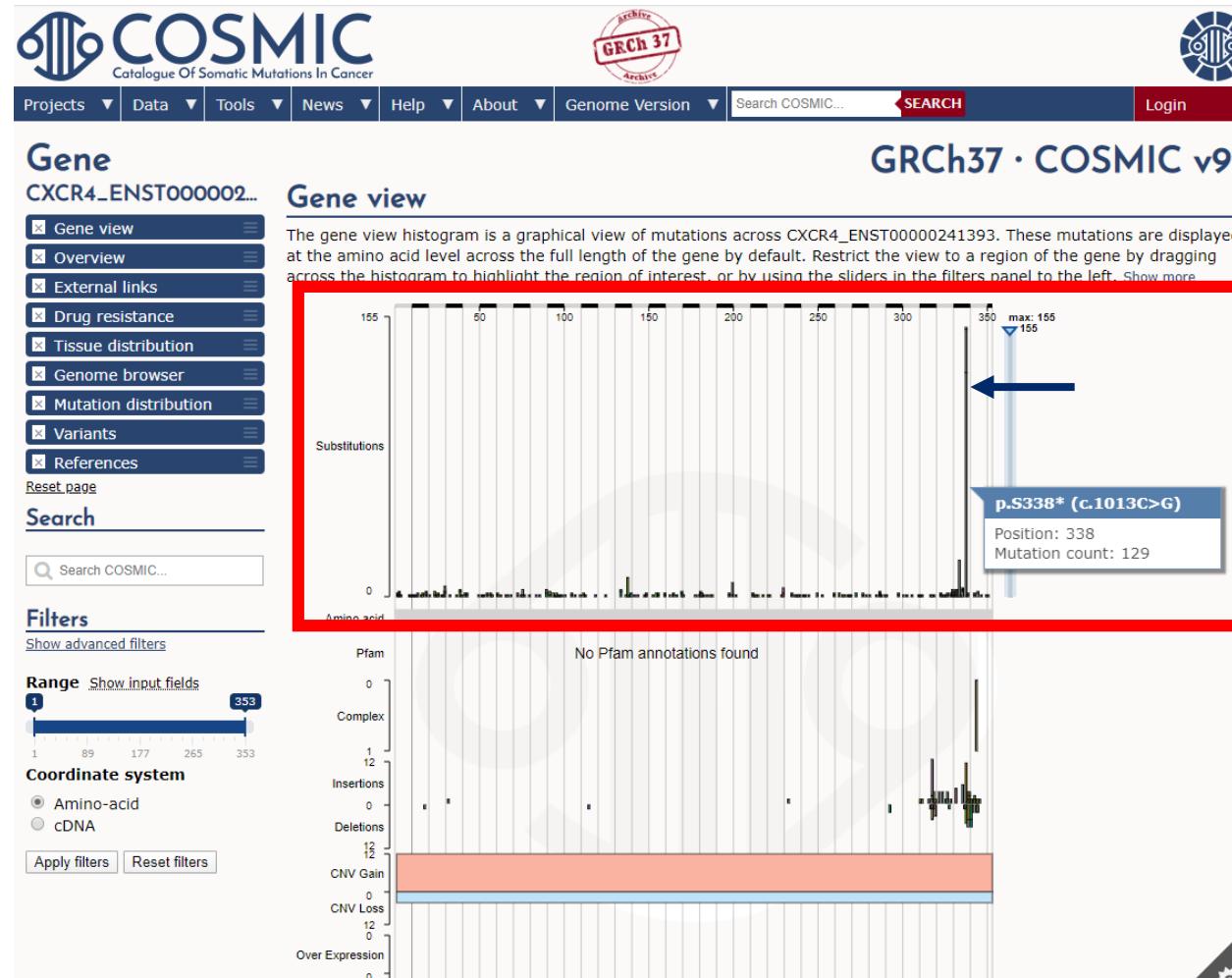
Q1.

## Composition

Lymphoid gene panel

# Literature search

54  
genes



## Q1.

# Composition

## Lymphoid gene panel

# Literature search

54  
genes

Q1.

## Composition

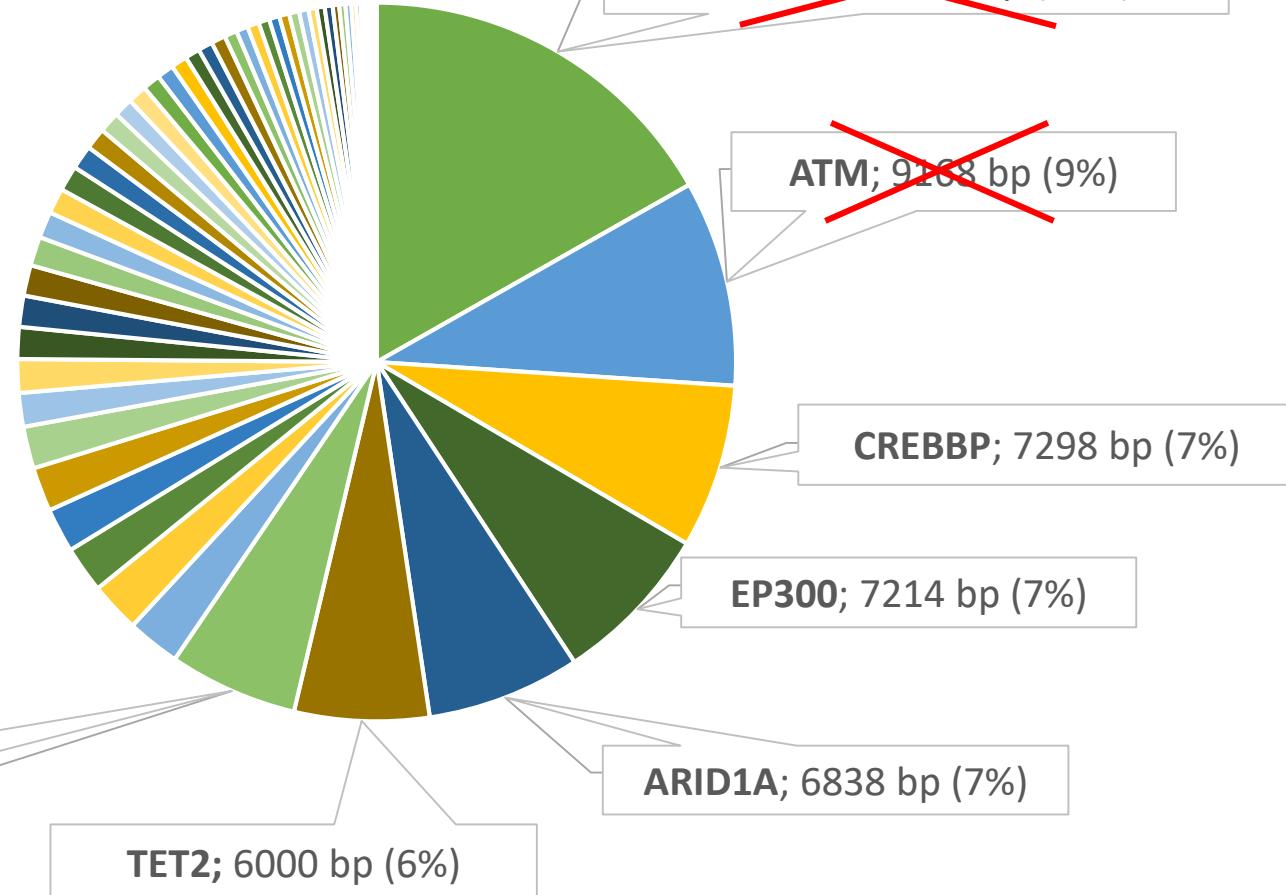
Lymphoid gene panel

# Literature search

54  
genes

= 98,933 base pairs

↔ 21-gene myeloid panel  
21,645 base pairs

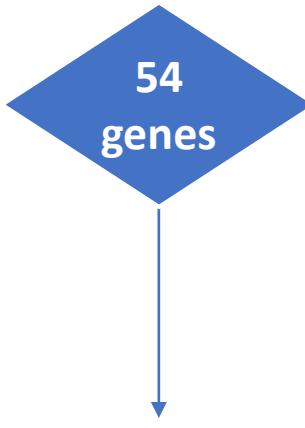


Q1.

## Composition

### Lymphoid gene panel

98,933 base pairs



67,418 base pairs

#### REVIEW ARTICLE



Haematologica 2016  
Volume 101(9):1002-1009

#### Clinical impact of recurrently mutated genes on lymphoma diagnostics: state-of-the-art and beyond

Richard Rosenquist,<sup>1</sup> Andreas Rosenwald,<sup>2</sup> Ming-Qing Du,<sup>3</sup> Gianluca Gaidano,<sup>4</sup> Patricia Groenen,<sup>5</sup> Andrew Wotherspoon,<sup>6</sup> Paolo Ghia,<sup>7</sup> Philippe Gaulard,<sup>8</sup> Elias Campo,<sup>9</sup> Kostas Stamatopoulos,<sup>10</sup> on behalf of the European Research Initiative on CLL (ERIC) and the European Association for Haematopathology (EAHP)

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#### The Need for a Consensus Next-generation Sequencing Panel for Mature Lymphoid Malignancies

Pierre Sujobert<sup>1,2</sup>, Yannick Le Bris<sup>3,21</sup>, Laurence de Leval<sup>4</sup>, Audrey Gros<sup>5</sup>, Jean Philippe Merlin<sup>6</sup>, Cedric Pastore<sup>6</sup>, Sarah Huet<sup>1,28</sup>, Clémentine Sarkozy<sup>7,8</sup>, Frédéric Davy<sup>9</sup>, Mary Callanan<sup>9,10</sup>, Catherine Thieblemont<sup>11,12,13</sup>, David Sibon<sup>14</sup>, Vahid Asnafi<sup>15</sup>, Claude Preudhomme<sup>16</sup>, Philippe Gaulard<sup>17,18</sup>, Fabrice Jardin<sup>19</sup>, Gilles Salles<sup>3,7</sup>, Elizabeth Macintyre<sup>15</sup>

Exclusion of genes based on: Size of the gene does not outweigh the diagnostic/prognostic/theranostic information		
ATM <sup>2</sup>	KMT2D/MLL2	PTPRD <sup>1</sup>

Genes included			
ARID1A <sup>1</sup>	DDX3X <sup>2</sup>	MYD88 <sup>1,2</sup>	TET2 <sup>1,2</sup>
B2M <sup>1</sup>	DNMT3A <sup>1,2</sup>	NFKBIE <sup>1,2</sup>	TNFAIP3 <sup>1</sup>
BCL2 <sup>1</sup>	EP300 <sup>1</sup>	NOTCH1 <sup>1,2</sup>	TNFRSF14
BIRC3 <sup>1,2</sup>	EZH2 <sup>1,2</sup>	NOTCH2 <sup>1,2</sup>	TP53 <sup>1,2</sup>
BRAF <sup>1,2</sup>	FBXW7	NRAS	TRAF2 <sup>1</sup>
BTK <sup>1,2</sup>	FOXO1 <sup>1</sup>	PIM1	XPO1 <sup>1</sup>
CARD11 <sup>1,2</sup>	GNA13	PLCG1 <sup>1</sup>	
CCND1 <sup>1</sup>	ID3 <sup>1,2</sup>	PLCG2 <sup>1,2</sup>	
CD28 <sup>1</sup>	IDH2 <sup>1,2</sup>	RHOA <sup>1,2</sup>	
CD58	JAK3 <sup>1</sup>	SF3B1 <sup>1,2</sup>	
CD79A <sup>1</sup>	KLF2 <sup>1,2</sup>	SOCS1	
CD79B <sup>1,2</sup>	KRAS	STAT3 <sup>1,2</sup>	
CDKN2A <sup>1</sup>	MAP2K1	STAT5B <sup>1</sup>	
CREBBP <sup>1</sup>	MEF2B <sup>1</sup>	STAT6 <sup>1</sup>	
CXCR4 <sup>1,2</sup>	MYC <sup>1</sup>	TCF3 <sup>1,2</sup>	

<sup>1</sup> included in panel of SUJOBERT et al.

<sup>2</sup> Included in panel of ROSENQUIST et al.

## Q1.

### Composition

#### Lymphoid gene panel

## Literature search

Genes included			
ARID1A <sup>1</sup>	DDX3X <sup>2</sup>	MYD88 <sup>1,2</sup>	TET2 <sup>1,2</sup>
B2M <sup>1</sup>	DNMT3A <sup>1,2</sup>	NFKBIE <sup>1,2</sup>	TNFAIP3 <sup>1</sup>
BCL2 <sup>1</sup>	EP300 <sup>1</sup>	NOTCH1 <sup>1,2</sup>	TNFRSF14
BIRC3 <sup>1,2</sup>	EZH2 <sup>1,2</sup>	NOTCH2 <sup>1,2</sup>	TP53 <sup>1,2</sup>
BRAF <sup>1,2</sup>	FBXW7	NRAS	TRAF2 <sup>1</sup>
BTK <sup>1,2</sup>	FOXO1 <sup>1</sup>	PIM1	XPO1 <sup>1</sup>
CARD11 <sup>1,2</sup>	GNA13	PLCG1 <sup>1</sup>	
CCND1 <sup>1</sup>	ID3 <sup>1,2</sup>	PLCG2 <sup>1,2</sup>	
CD28 <sup>1</sup>	IDH2 <sup>1,2</sup>	RHOA <sup>1,2</sup>	
CD58	JAK3 <sup>1</sup>	SF3B1 <sup>1,2</sup>	
CD79A <sup>1</sup>	KLF2 <sup>1,2</sup>	SOCS1	
CD79B <sup>1,2</sup>	KRAS	STAT3 <sup>1,2</sup>	
CDKN2A <sup>1</sup>	MAP2K1	STAT5B <sup>1</sup>	
CRFRD1	MEF2B <sup>1</sup>	STAT6 <sup>1</sup>	
<b>CXCR4<sup>1,2</sup></b>	MYC <sup>1</sup>	TCF3 <sup>1,2</sup>	

<sup>1</sup> included in panel of SUJOBERT et al.  
<sup>2</sup> Included in panel of ROSENQUIST et al.

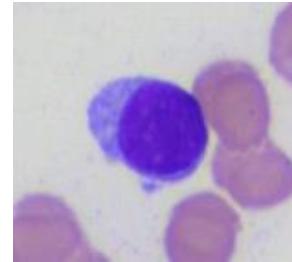
Functie gen	Gen	Type	pathologie	mutatie frequentie (%)	CNV frequentie (%)	Diagnostisch belang	Prognostisch belang	Therapeutisch belang	Referentie
<i>Signalisatie pathways</i>									
andere	<b>CXCR4</b>	OC	WM	27		1	0	2 (respons ibrutinib afh van mutatie MYD88 en CXCR4)	Sujobert 2018, Rosenquist 2016
			DLBCL	4		?	?	?	Rosenquist 2017

Q1.

## Composition

Lymphoid gene panel

LPL



## Literature search

MYD88<sup>L265P</sup>

triggers tumor-cell growth through Bruton's tyrosine kinase  
(target ibrutinib)

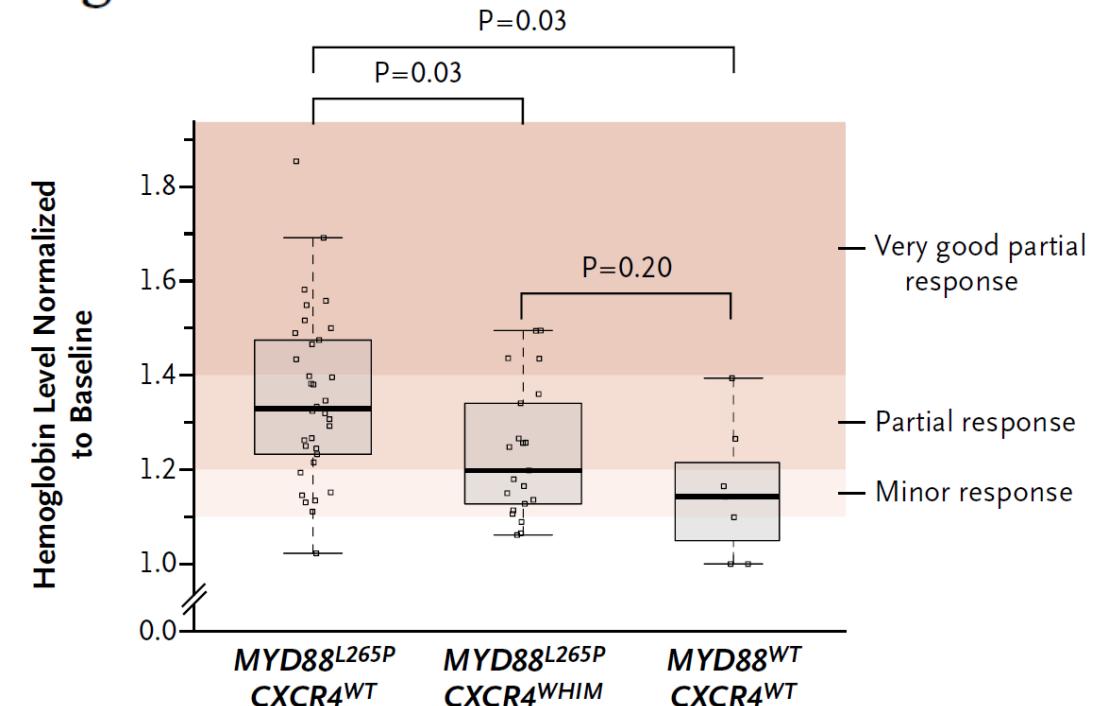
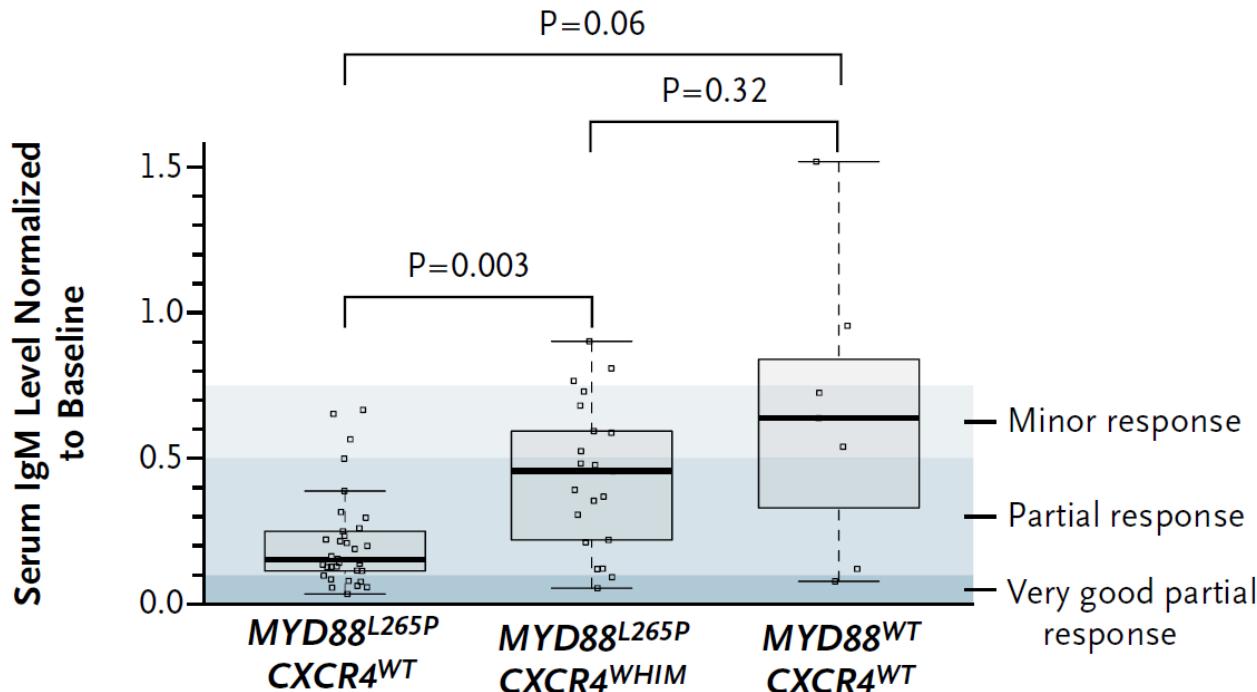
CXCR4<sup>WHIM</sup>

in vitro resistance ibrutinib

The NEW ENGLAND JOURNAL of MEDICINE

### Ibrutinib in Previously Treated Waldenström's Macroglobulinemia

A



# Q1.

## Composition

### Lymphoid gene panel

## Literature search

Gene	Exon	transcript	refseq	Gene	Exon	transcript	refseq
ARID1A	1-20	ENST00000324856.7	NM_006015	KRAS	2-5	ENST00000311936.3	NM_004985
B2M	1-3	ENST00000558401.1	NM_004048	MAP2K1	2-3	ENST00000307102.5	NM_002755
BCL2	1-2	ENST00000398117.1	NM_000633	MEF2B	2-9	ENST00000424583.2	NM_001145785
BIRC3	4-10	ENST00000532808.1	NM_182962	MYC	1-3	ENST00000377970.2	NM_002467
BRAF	15	ENST00000288602.6	NM_004333	MYD88	3-5	ENST00000396334.3	NM_002468
BTK	15	ENST00000308731.7	NM_000061	NFKBIE	1-6	ENST00000275015.5	NM_004556
CARD11	4-10	ENST00000396946.4	NM_032415	NOTCH1	26-27,34	ENST00000277541.6	NM_017617
CCND1	1	ENST00000227507.2	NM_053056	NOTCH2	34	ENST00000256646.2	NM_024408
CD28	1-4	ENST00000324106.8	NM_001243077	NRAS	2-3	ENST00000369535.4	NM_002524
CD58	1-6	ENST00000369489.5	NM_001779	PIM1	1-6	ENST00000373509.5	NM_001243186
CD79a	4-5	ENST00000221972.3	NM_001783	PLCG1	1,11,29	ENST00000373272.2	NM_002660
CD79b	5-6	ENST00000392795.3	NM_001039933	PLCG2	19,20,22,24,26,27	ENST00000359376.3	NM_002661
CDKN2A	1-2	ENST00000361570.3	NM_058195	RHOA	2-3	ENST00000418115.1	NM_001664
CREBBP	1-31	ENST00000262367.5	NM_004380	SF3B1	13-16	ENST00000335508.6	NM_012433
CXCR4	2	ENST00000241393.3	NM_003467	SOCS1	2	ENST00000332029.2	NM_003745
DDX3X	1-17	ENST00000399959.2	NM_001193416	STAT3	19-21	ENST00000264657.5	NM_139276
DNMT3A	8-23	ENST00000264709.3	NM_17562	STAT5B	14-17	ENST00000293328.3	NM_012448
EP300	1-31	ENST00000263253.7	NM_001429	STAT6	12-18	ENST00000300134.3	NM_001178078
EZH2	2-20	ENST00000320356.2	NM_001203247	TCF3	16-18	ENST00000344749.5	NM_001136139
FBXW7	8-10	ENST00000281708.4	NM_033632	TET2	3-11	ENST00000380013.4	NM_001127208
FOXO1	1-2	ENST00000379561.5	NM_002015	TNFAIP3	2-9	ENST00000237289.4	NM_001270507
GNA13	1-4	ENST00000439174.2	NM_006572	TNFRSF14	1-8	ENST00000355716.4	NM_003820
ID3	1-2	ENST00000374561.5	NM_002167	TP53	2-11	ENST00000269305.4	NM_000546
IDH2	4	ENST00000330062.3	NM_002168	TRAF2	2-11	ENST00000247668.2	NM_021138
JAK3	10-19	ENST00000458235.1	NM_000215	XPO1	15,19	ENST00000401558.2	NM_003400
KLF2	1-3	ENST00000248071.5	NM_016270				



# Questions

1.

Which **genes** should be included  
in a next-generation sequencing panel  
for mature lymphoid malignancies providing  
**diagnostic, prognostic** and **therapeutic** information?

2.

How can such panel be **implemented** in  
routine clinical practice?

# Variant analysis



*Project Report*

## **Standardization of Somatic Variant Classifications in Solid and Haematological Tumours by a Two-Level Approach of Biological and Clinical Classes: An Initiative of the Belgian ComPerMed Expert Panel**

Guy Froyen <sup>1,\*†</sup>, Marie Le Mercier <sup>2,†</sup>, Els Lierman <sup>3,†</sup>, Karl Vandepoele <sup>4,†</sup>, Friedel Nollet <sup>5,†</sup>,  
Elke Boone <sup>6,†</sup>, Joni Van der Meulen <sup>7,†</sup>, Koen Jacobs <sup>8</sup>, Suzan Lambin <sup>9</sup>, Sara Vander Borght <sup>10</sup>,  
Els Van Valckenborgh <sup>11</sup>, Aline Antoniou <sup>12</sup> and Aline Hébrant <sup>11</sup>

*Cancers* 2019, 11, 2030; doi:10.3390/cancers11122030

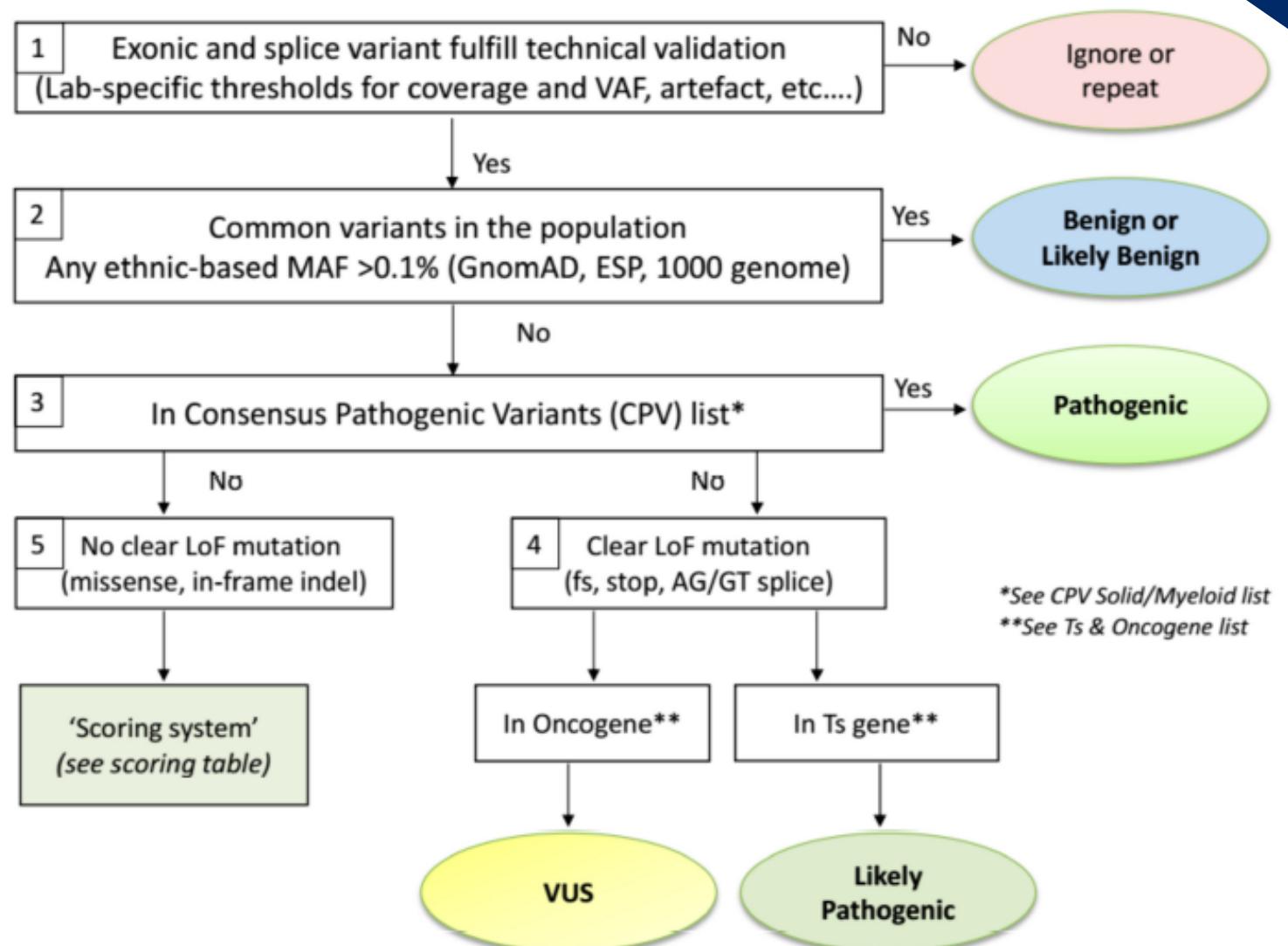
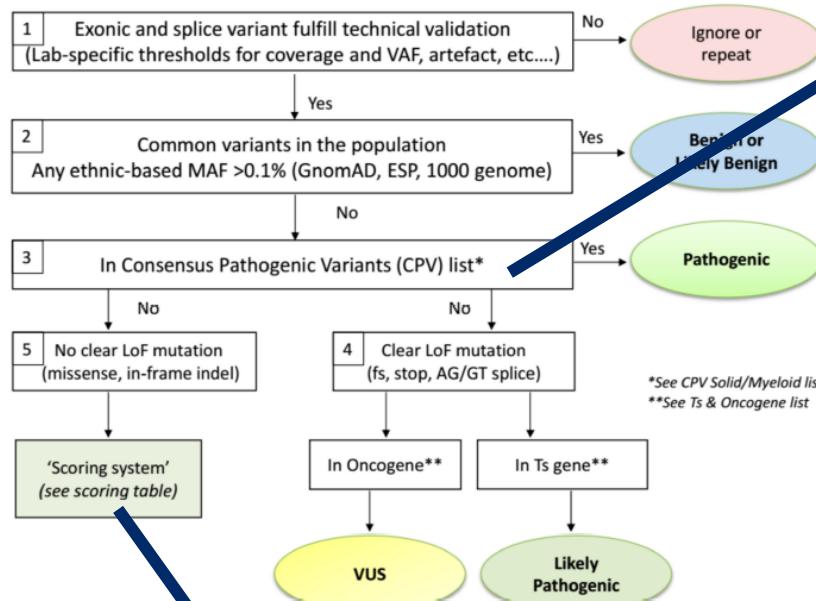


Figure 1. ComPerMed workflow for the biological classification of somatic variants.



# Variant analysis

Table 2. Consensus Pathogenic Variant (CPV) list of the ComPerMed genes selected for myeloid tumours.

Gene	Transcript ID	Hs1	Hs2	Hs3	Hs4	Hs5	Hs6
ASXL1	NM_015338.5	none					
CALR	NM_004343.3	ex9of-del		ex9of-ins			
CEBPA	NM_004364.3	none					
CSF3R	NM_156039.3	T618I					
DNMT3A	NM_175629.2	R882C/H					
EZH2	NM_004456.4	Y646F/H/N/S					
FLT3	NM_004119.2	ex14if-dup		D835A/E/H/V/Y			
IDH1	NM_005896.3	R132C/G/H/L/S					
IDH2	NM_002168.3	R140L/Q/W		R172K/M/S			
JAK2	NM_004972.3	ex12 if-del/if-dup		V617F			
KIT	NM_000222.2	see CPV Solid list					
MPL	NM_005373.2	S505N		W515any ms			
NPM1	NM_002520.6	ex11of-ins					
RUNX1	NM_001754.4	none					
SETBP1	NM_015559.3	D868N		G870S			
SF3B1	NM_012433.3	E622D		R625C/H			
SRSF2	NM_003016.4	P95H/L/R		P95_R102del			
TET2	NM_001127208.2	none					
TP53	NM_000546.5	R175H		Y220C			
U2AF1	NM_006758.2	S34F/Y		G245S			
WT1	NM_024426.5	none		Q157P/R			

Hs: Hotspot; if-del: inframe deletion; if-dup: inframe duplication; of-del: out of frame deletion; of-ins: out of frame insertion; any ms: any missense variant; none: no consensus pathogenic variants present.

Table 3. Scoring Table for the biological variant classification of non-loss-of-function (LoF) variants.

Parameter	Score +2	Score +1	Score +0.5	Score 0	Score -1
Total # of entries of that particular AA change at that position in COSMIC	Solid: $\geq 50$ Hemato: $\geq 10$	$50 > x > 10$ $10 > x > 5$	/	$\leq 10$ $\leq 5$	/
In silico prediction tools SIFT and MutationTaster	/	/	Both damaging and deleterious	Other	/
Harmful in functional studies (PubMed, JAX-CKB, MDA, MCG)	/	/	Yes	Not reported	No
Described in at least one genomic db (CIVIC, ClinVar, OncoKb, VarSome)	/	/	As (Likely) Pathogenic	Not described/unknown	As (Likely) Benign

Variants with a score  $\geq 2$  will be classified as "Likely Pathogenic". Variants with a score  $< 2$  are classified as "VUS".

# Implementation

## Lymphoid gene panel



### AZ SINT-JAN BRUGGE-OOSTENDE AV

Laboratoriumgeneeskunde

Ruddershove 10, 8000 Brugge

Dr.B.Cauwelier, Dr.H.Devos, Dr.J.Emmerechts, Dr.K.Floré  
Prof.Dr.M.Langlois, Dr.E.Nulens, Dr.M.Reynders  
Dr.S.Roggeman, Dr.T.Vanwynsberghe, Prof.Dr.M.Vercammen

Tel: 050/45.99.00 Fax: 050/45.26.19



03783024

Patientnr 5102223580

#### Hematologie

Voorschrijvende arts: Snaeuwaert Sylvia

Geboortedatum: 22/02/1951

Bloedgroep : A Positief

Voorschrift: 09/01/20

Ontvangst: 09/01/20 om 16:10

Afnname: 09/01/20 om 16:00

#### Selectief

SJ JA09 1463

van 23/04/20 om 11:30

Pagina 1 / 4

Materiaal: 1 x BM Cytogenetica (PCG), 1 x BM op EDTA (BED), 1 x Beenmerg

Klinische geg.: Vermoeden therapie-gerelateerde acute leukemie

Naam	Resultaat	Vorig resultaat	Eenheid	Referentiewaarden
------	-----------	-----------------	---------	-------------------

Beenmergonderzoek

NGS myeloid panel

#### Genen panel en toestel

QiaSeq myeloid custom DNA panel v1.0 (Qiagen) op MiSeq  
Achtergrond: Volgende genen worden via targeted NGS resequencing onderzocht: ASXL1, CALR, CEBPA, CSF3R, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, MPL, NPM1, RUNX1, SETBP1, SF3B1, SRSF2 (=SFRS2), TET2, TP53, U2AF1 en WT1. Enkel varianten tot een waargenomen allel frequentie van 2% worden gerapporteerd. De gevoeligheid van de analyse is minstens 5% allel frequentie voor substitutievarianten en kleine indels (<25 bp, zoals bv. NPM1 type A,B,D hotspot en CALR typ 10<sup>-2</sup> mutaties). Grote indels (zoals bv. CALR typ 10<sup>-1</sup> mutaties) vertonen een verminderde gevoeligheid, alsook de detectie van grote ITD mutaties. Daarom wordt volgens indicatie een Flt3-ITD PCR-fragmentanalyse ter bevestiging uitgevoerd. Deze test kan geen onderscheid maken tussen een verworven en een germline mutatie. Voor meer informatie over de doelwitregios en de gebruikte transcripties zie <http://www.azsintjan.be/labogids>. Gedetailleerde informatie over de analyse is te vinden in het laboratorium beschikbaar.

Variant-1

DNMT3A	c.2645G>A p.(Arg882His)	42% VAF
--------	-------------------------	---------

Variant-1 classificatie

Pathogeen, gekende hotspot mutatie

Besluit

Een pathogene mutatie in het DNMT3A gen werd waargenomen.

Het waargenomen mutatieprofiel past bij de diagnose van therapy related myeloïd neoplasm.

#### Klinische info pathogene mutaties

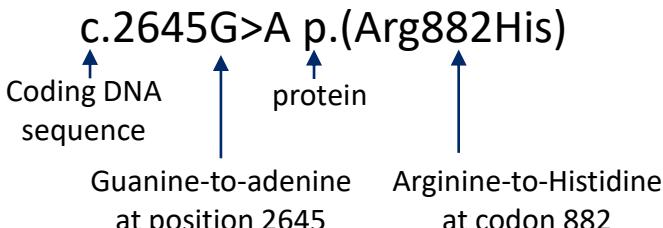
DNMT3A mutaties komen voornamelijk voor bij AML (20-30%) en MDS (10-15%) en in mindere mate bij CMML en andere myeloproliferatieve aandoeningen. Ook bij gezonde oudere personen worden mutaties van het DNMT3A gen waargenomen (Clonal Hematopoiesis of Indeterminate Potential - CHIP, 10% op de leeftijd van 80j). Mutaties in dit gen zouden prognostisch ongunstig zijn.

NGS VUS varianten

Volgende variant van onbekende betekenis (VUS) werd vastgesteld: DNMT3A, c.1648G>A p.(Gly550Arg), 46% VAF

## Section test results

### HGVS-nomenclature (Human Genome Variation Society)



## Section conclusion & interpretation

VUS

(Likely) benigne variants must **not** be reported

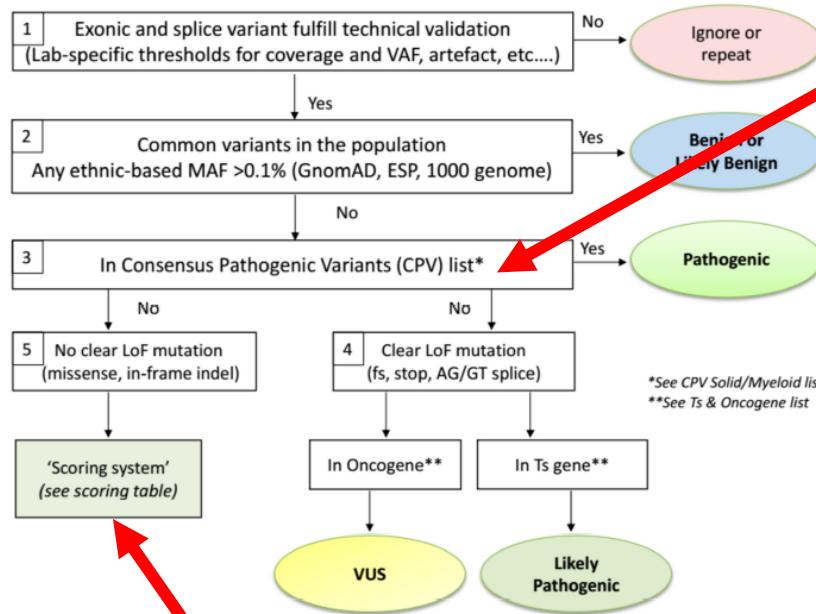


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Harmful in functional studies (PubMed, JAX-CKB, MDA, MCG)	/	/	Yes	Not reported	No
Described in at least one genomic db (CIVIC, ClinVar, OncoKb, VarSome)	/	/	As (Likely) Pathogenic	Not described/unknown	As (Likely) Benign

Variants with a score ≥2 will be classified as "Likely Pathogenic". Variants with a score <2 are classified as "VUS".

# Total costs per sample

	<b>Price per sample (€)</b>
	<b>51-gene Lymphoid Panel</b>
<b>Extraction</b>	3.63
<b>Concentration calculation</b>	0.66
<b>Qiaseq (custom panel + index set)</b>	82.24
<b>Sequencing</b>	127.87
<b>Instruments</b>	18.89
<b>Bioinformatic software</b>	8.84
<b>Maintenance contracts</b>	10.87
<b>Working time</b>	64.68
<b>validation &amp; quality control</b>	42.96
<b>Total</b>	<b>360.65</b>
<b>21% VAT + 56,6% overhead costs</b>	<b>680.76</b>

*Price per sample (€)*  
**21-gene Myloid Panel**

239.52
452.12

# Clinical indications

Genes included			
ARID1A <sup>1</sup>	DDX3X <sup>2</sup>	MYD88 <sup>1,2</sup>	TET2 <sup>1,2</sup>
B2M <sup>1</sup>	DNMT3A <sup>1,2</sup>	NFKBIE <sup>1,2</sup>	TNFAIP3 <sup>1</sup>
BCL2 <sup>1</sup>	EP300 <sup>1</sup>	NOTCH1 <sup>1,2</sup>	TNFRSF14
BIRC3 <sup>1,2</sup>	EZH2 <sup>1,2</sup>	NOTCH2 <sup>1,2</sup>	TP53 <sup>1,2</sup>
BRAF <sup>1,2</sup>	FBXW7	NRAS	TRAF2 <sup>1</sup>
BTK <sup>1,2</sup>	FOXO1 <sup>1</sup>	PIM1	XPO1 <sup>1</sup>
CARD11 <sup>1,2</sup>	GNA13	PLCG1 <sup>1</sup>	
CCND1 <sup>1</sup>	ID3 <sup>1,2</sup>	PLCG2 <sup>1,2</sup>	
CD28 <sup>1</sup>	IDH2 <sup>1,2</sup>	RHOA <sup>1,2</sup>	
CD58	JAK3 <sup>1</sup>	SF3B1 <sup>1,2</sup>	
CD79A <sup>1</sup>	KLF2 <sup>1,2</sup>	SOCS1	
CD79B <sup>1,2</sup>	KRAS	STAT3 <sup>1,2</sup>	
CDKN2A <sup>1</sup>	MAP2K1	STAT5B <sup>1</sup>	
CREBBP <sup>1</sup>	MEF2B <sup>1</sup>	STAT6 <sup>1</sup>	
CXCR4 <sup>1,2</sup>	MYC <sup>1</sup>	TCF3 <sup>1,2</sup>	

<sup>1</sup> included in panel of SUJOBERT et al.  
<sup>2</sup> Included in panel of ROSENQUIST et al.



**1. Inconclusive tentative diagnosis**

[+ lymphomas of very rare entities]

decision: **MOC**

**2. New guidelines/targeted therapies?**

# Clinical indications

Genes included			
ARID1A <sup>1</sup>	DDX3X <sup>2</sup>	MYD88 <sup>1,2</sup>	TET2 <sup>1,2</sup>
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B-cell lymphomas

T-cell lymphomas



1. Inconclusive tentative diagnosis

[+ lymphomas of very rare entities]

decision: MOC

2. New guidelines/targeted therapies?

# Clinical indications

Genes included			
ARID1A <sup>1</sup>	DDX3X <sup>2</sup>	MYD88 <sup>1,2</sup>	TET2 <sup>1,2</sup>
B2M <sup>1</sup>	DNMT3A <sup>1,2</sup>	NFKBIE <sup>1,2</sup>	TNFAIP3 <sup>1</sup>
BCL2 <sup>1</sup>	EP300 <sup>1</sup>	NOTCH1 <sup>1,2</sup>	TNFRSF14
BIRC3 <sup>1,2</sup>	EZH2 <sup>1,2</sup>	NOTCH2 <sup>1,2</sup>	TP53 <sup>1,2</sup>
BRAF <sup>1,2</sup>	FBXW7	NRAS	TRAF2 <sup>1</sup>
BTK <sup>1,2</sup>	FOXO1 <sup>1</sup>	PIM1	XPO1 <sup>1</sup>
CARD11 <sup>1,2</sup>	GNA13	PLCG1 <sup>1</sup>	
CCND1 <sup>1</sup>	ID3 <sup>1,2</sup>	PLCG2 <sup>1,2</sup>	
CD28 <sup>1</sup>	IDH2 <sup>1,2</sup>	RHOA <sup>1,2</sup>	
CD58	JAK3 <sup>1</sup>	SF3B1 <sup>1,2</sup>	
CD79A <sup>1</sup>	KLF2 <sup>1,2</sup>	SOCS1	
CD79B <sup>1,2</sup>	KRAS	STAT3 <sup>1,2</sup>	
CDKN2A <sup>1</sup>	MAP2K1	STAT5B <sup>1</sup>	
CREBBP <sup>1</sup>	MEF2B <sup>1</sup>	STAT6 <sup>1</sup>	
CXCR4 <sup>1,2</sup>	MYC <sup>1</sup>	TCF3 <sup>1,2</sup>	

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2020

*TO DO – verification study*

**1. Inconclusive tentative diagnosis**

[+ lymphomas of very rare entities]

decision: **MOC**

...

**2. New guidelines/targeted therapies?**

...

*TO DO – cell free DNA panel*

# *Critically Appraised Topic*

## Next-generation sequencing panel for mature lymphoid malignancies



**az sint-jan**  
brugge - oostende av

A large, colorful word cloud centered around the words "thank you" in various languages. The words are arranged in a radial pattern, with "thank" at the top and "you" at the bottom. The languages include German (danke), Chinese (謝謝), English (thank you), Spanish (gracias), Turkish (teşekkür ederim), French (merci), Russian (спасибо), Korean (감사합니다), Japanese (ありがとうございます), Italian (grazie), Portuguese (obrigado), Polish (dziękuje), Dutch (dank u), and many others like Arabic, Persian, and others. Each word is in a different color and font style.

Helena DEVOS, MD  
Friedel NOLLET, PhD