

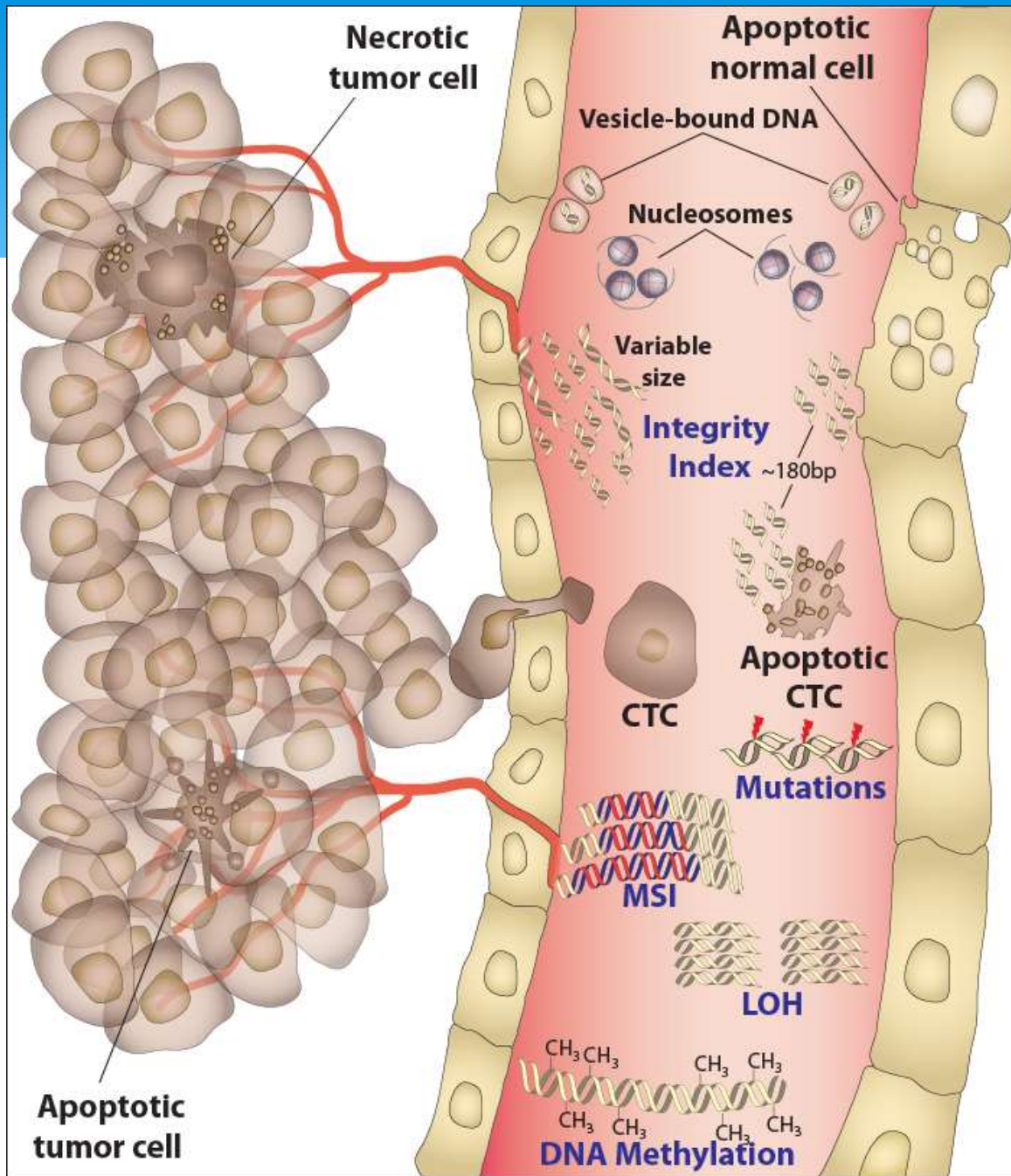
OverView Circulating Nucleic Acids (CFNA) in Cancer Patients



Dave S.B. Hoon

John Wayne Cancer Institute

Santa Monica, CA, USA



**cfNA
Blood
Assays**

DNA

Microsatellite (LOH)
Mutation
CpG site(s) promotor
hypermethylation
DNA Integrity

RNA

mRNA
miR

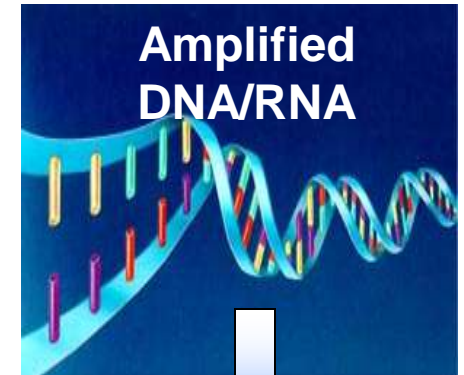
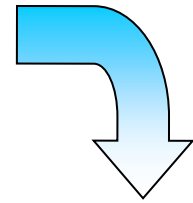
CFNA Direct Quantitative PCR Assays



Clinic

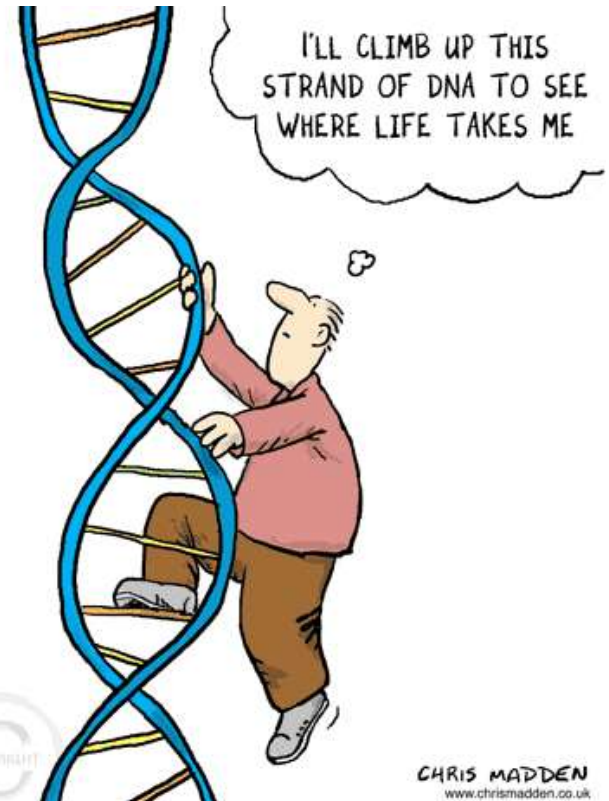


Laboratory

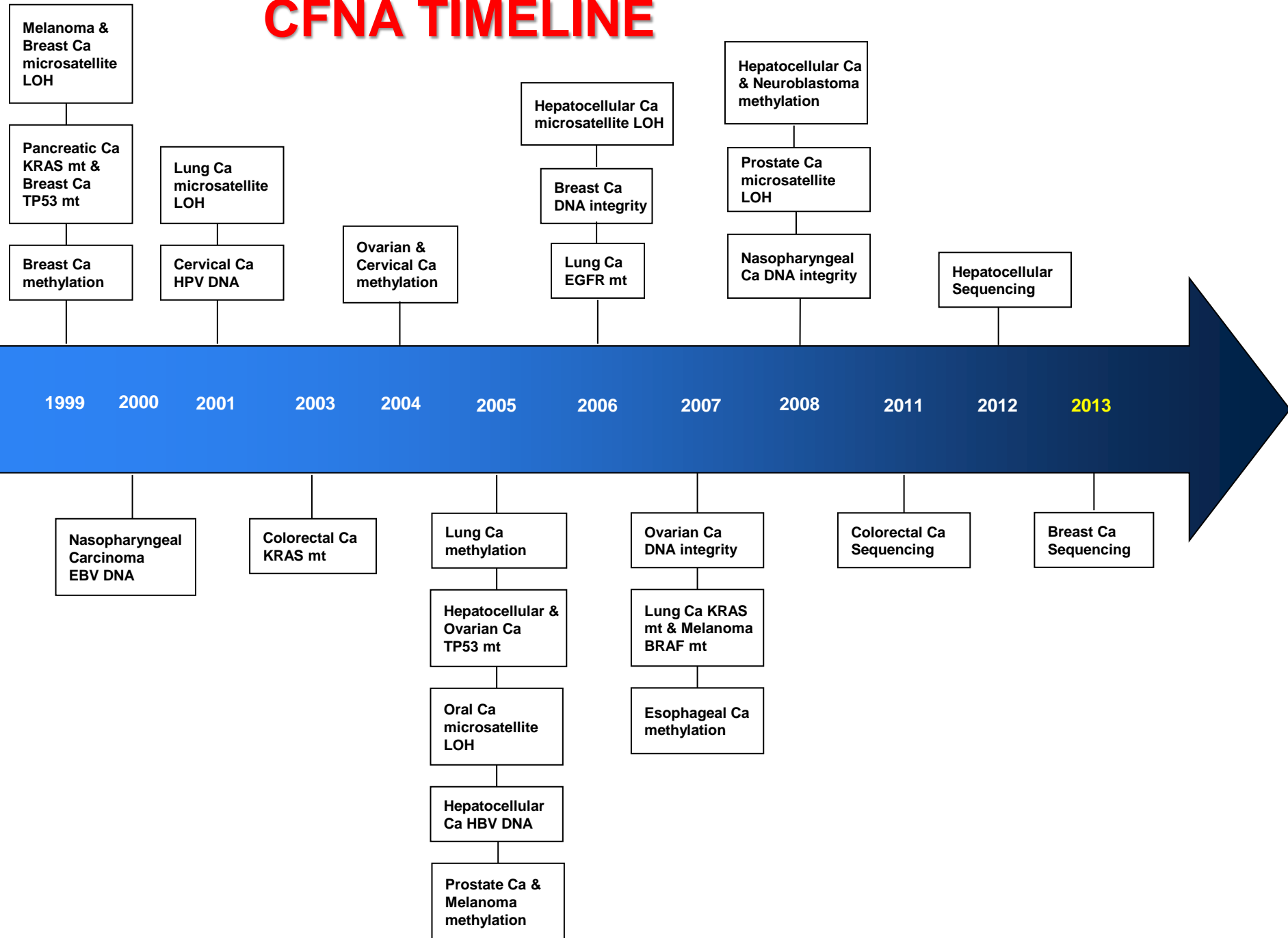


Thermocycler

CFNA Genomic Sequencing

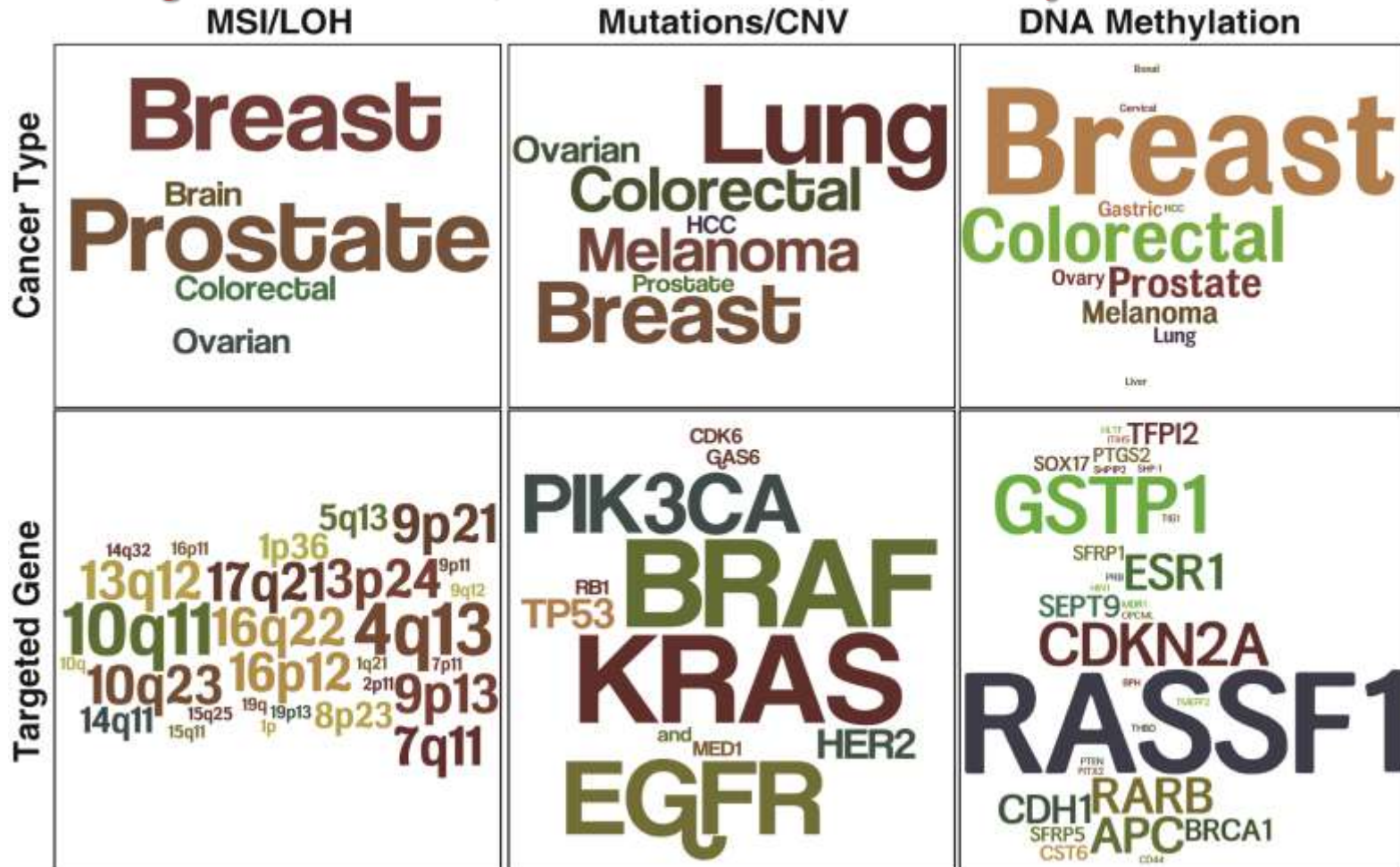


CFNA TIMELINE

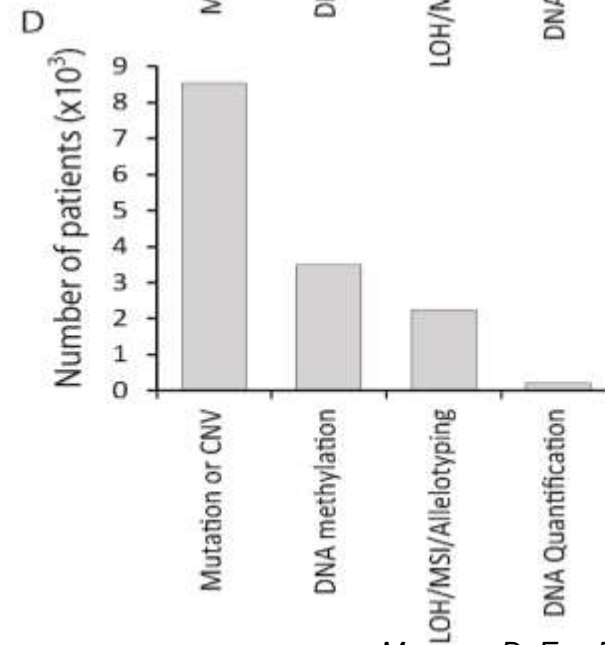
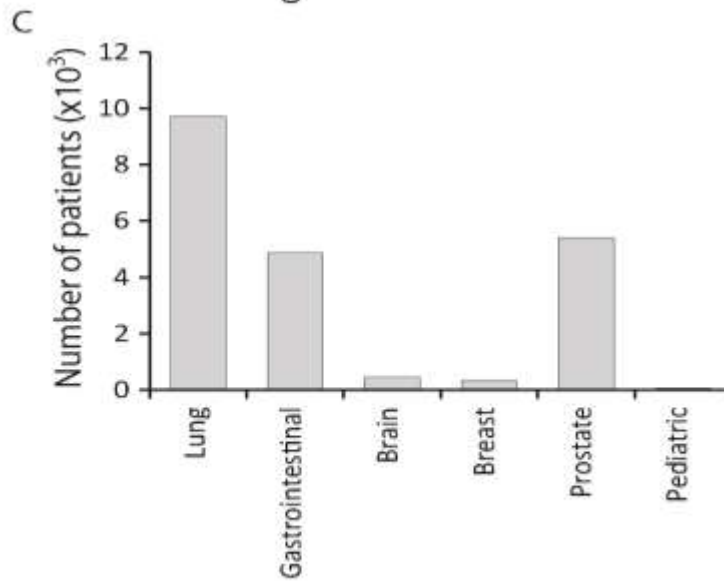
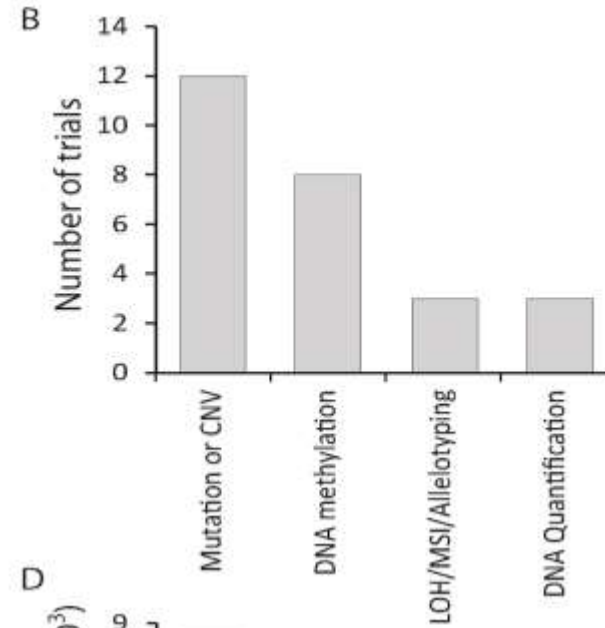
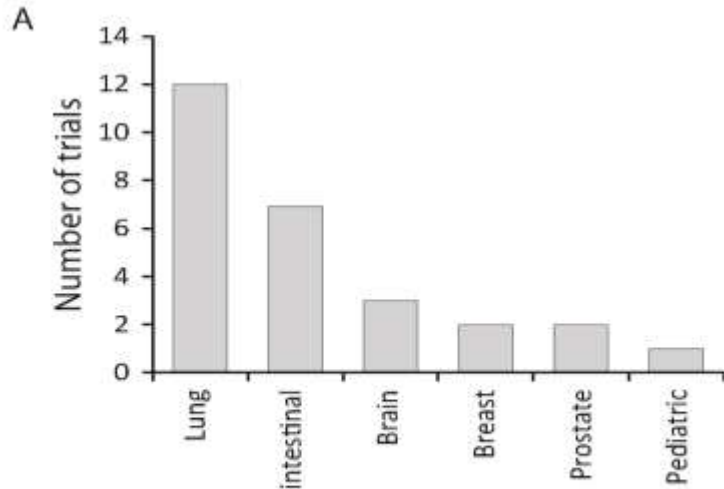


Word Analysis of Recent Papers

More than 50 patients, newer than >2008, Focused on three categories: MSI/LOH, Mutations/CNV, DNA methylation



Trends in Cancer Types and Technological Approaches of Ongoing and Complete cfDNA Clinical Trials



Utility of CFNA as Biomarkers

Detection

Prognostic

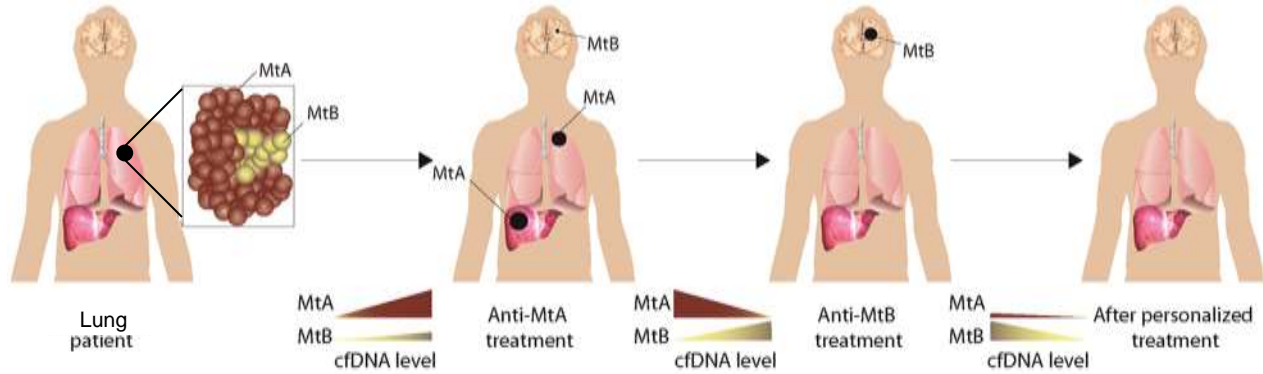
Predictive

CFNA Utility

- ✓ **Different forms of genetic/epigenetic biomarkers can be detected in serum/plasma**
- ✓ **Have clinic utility as single or multiple biomarkers involving different forms**
- ✓ **Identify early disease recurrence**
- ✓ **Used to monitor cancer patients during treatment**

Potential Advantages and Applications of cfDNA Analysis

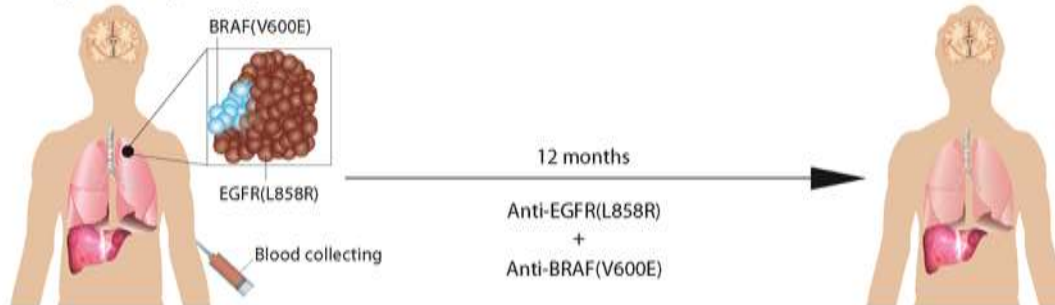
A- Follow-up of cancer patient using monitoring of cfDNA genomic changes



B- Current genomic analysis of DNA extracted from biopsy or surgically resected tissue



C- Whole-genome sequencing of cfDNA



Sources of Circulating Tumor-Related DNA?

Tumors: Primary/Metastasis

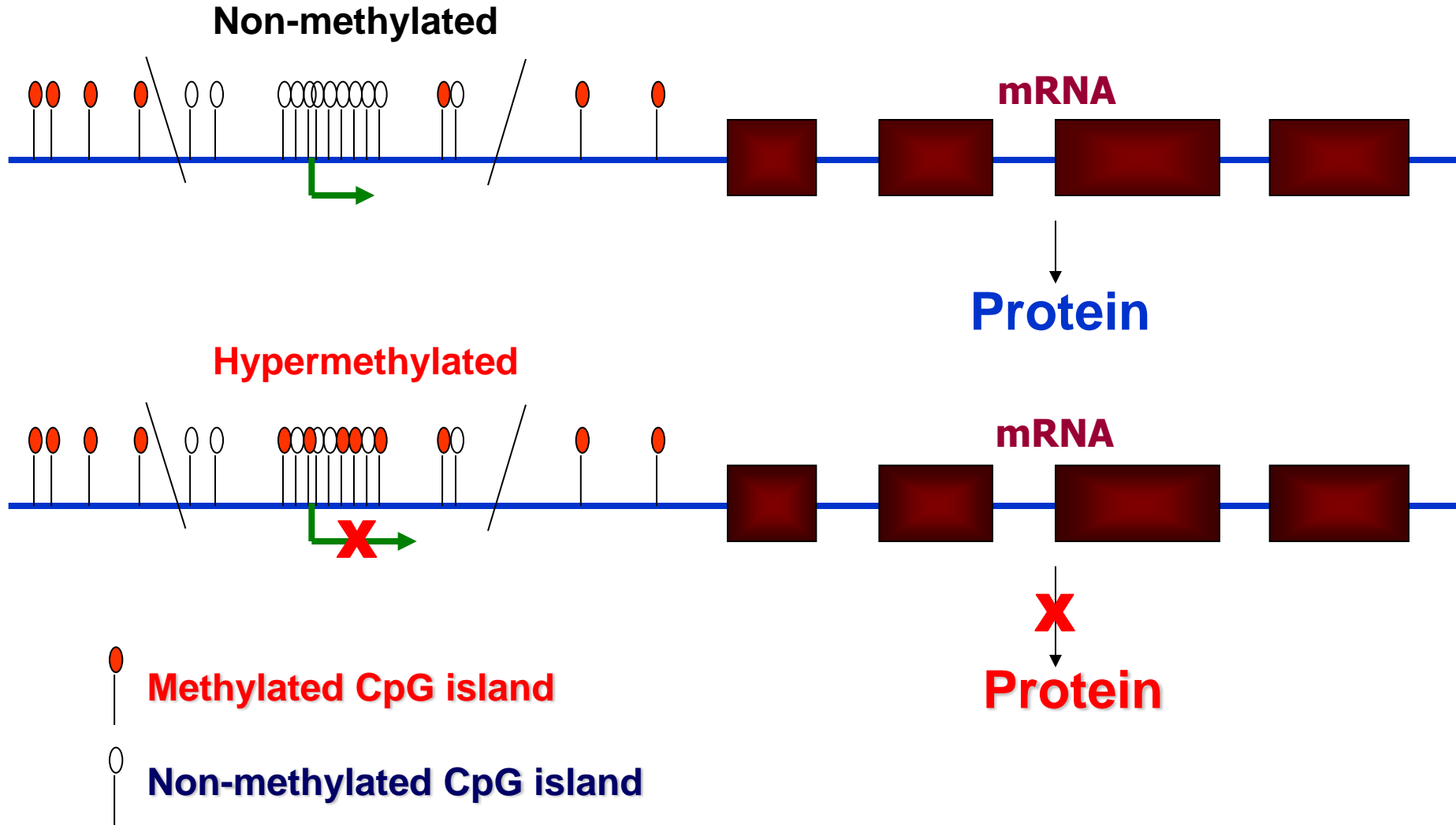
**Cancer Cells Programmed and Non Programmed
Death**

Cancer Cells Secreting

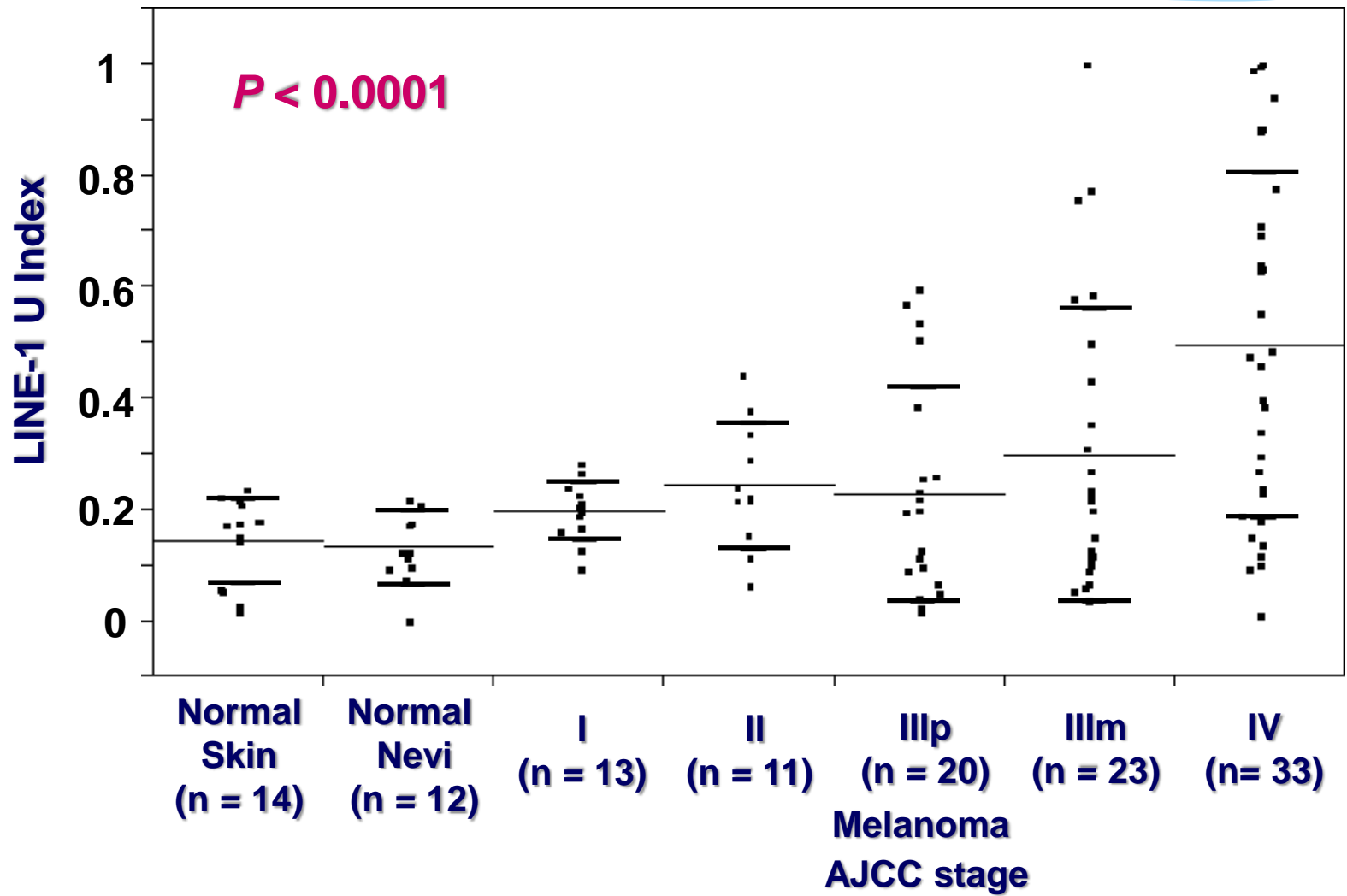
CTC in blood



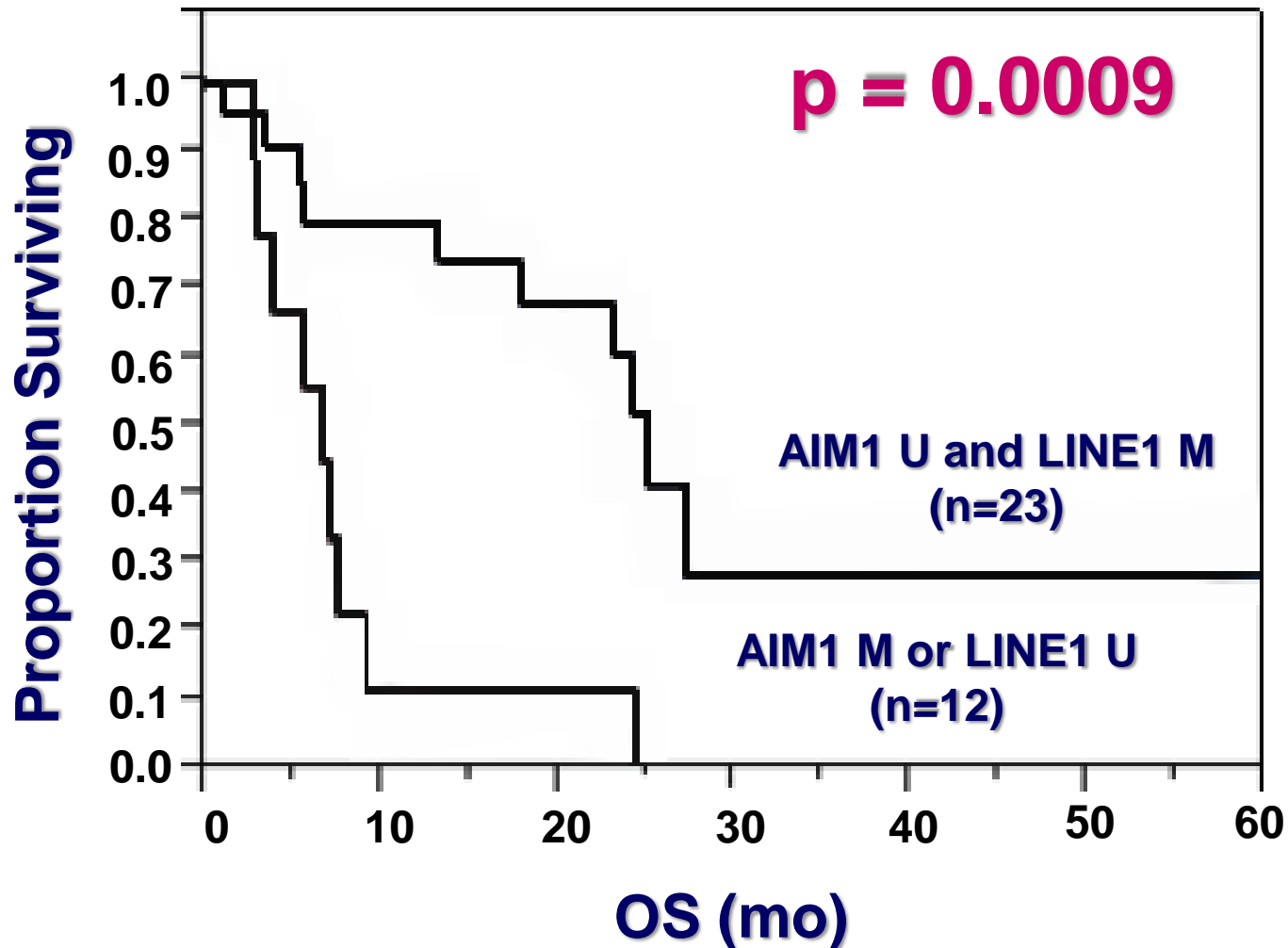
Silencing: Hypermethylated CpG Islands of Promoter Region of Coding and Non-Coding Sequencing



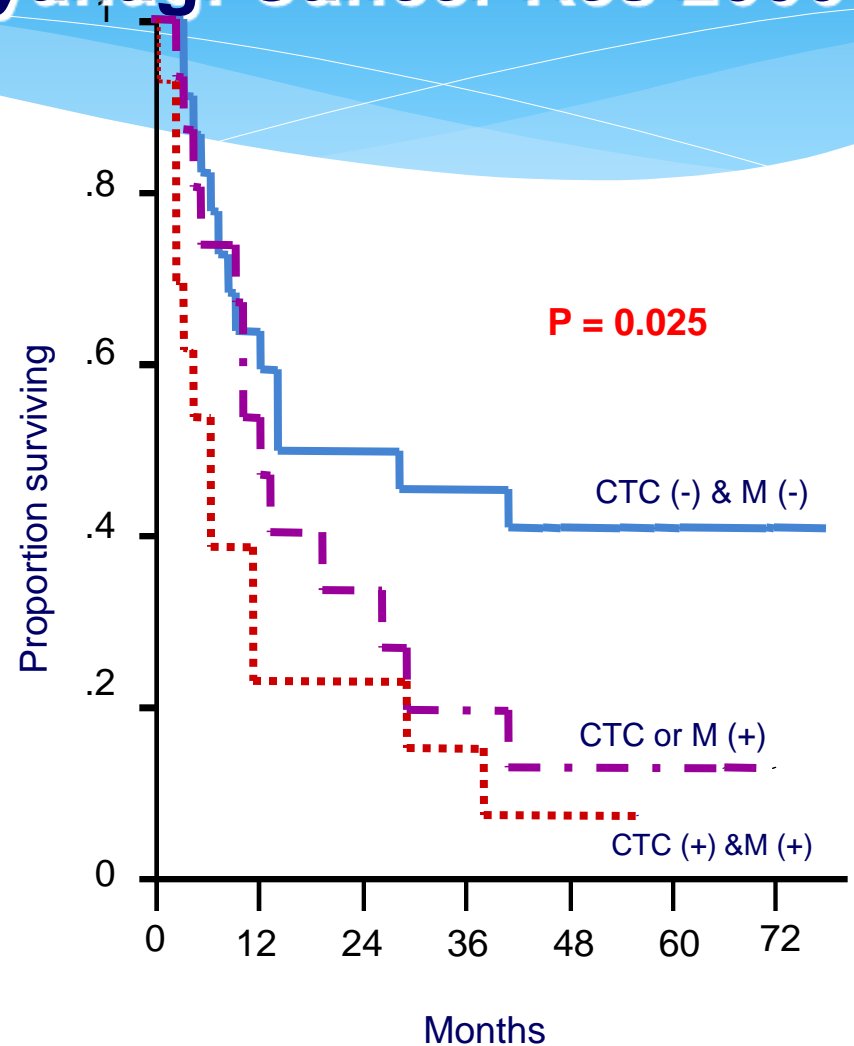
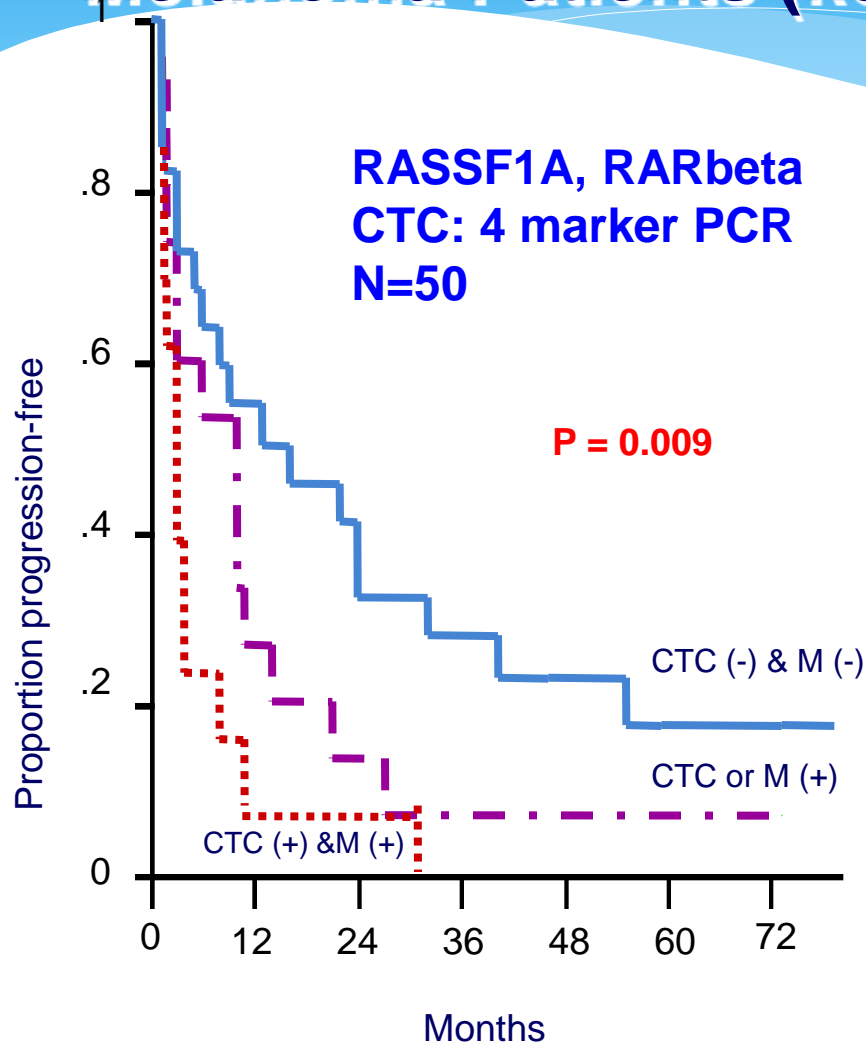
LINE-1 Unmethylated-Index for Melanoma According to AJCC stage



CFNA Analysis of Overall Survival of Stage IV Melanoma Patients: LINE1 Unmethylated and/or AIM1 Methylated CFDNA vs. Methylated LINE-1 and Unmethylated AIM1 CFDNA in Serum

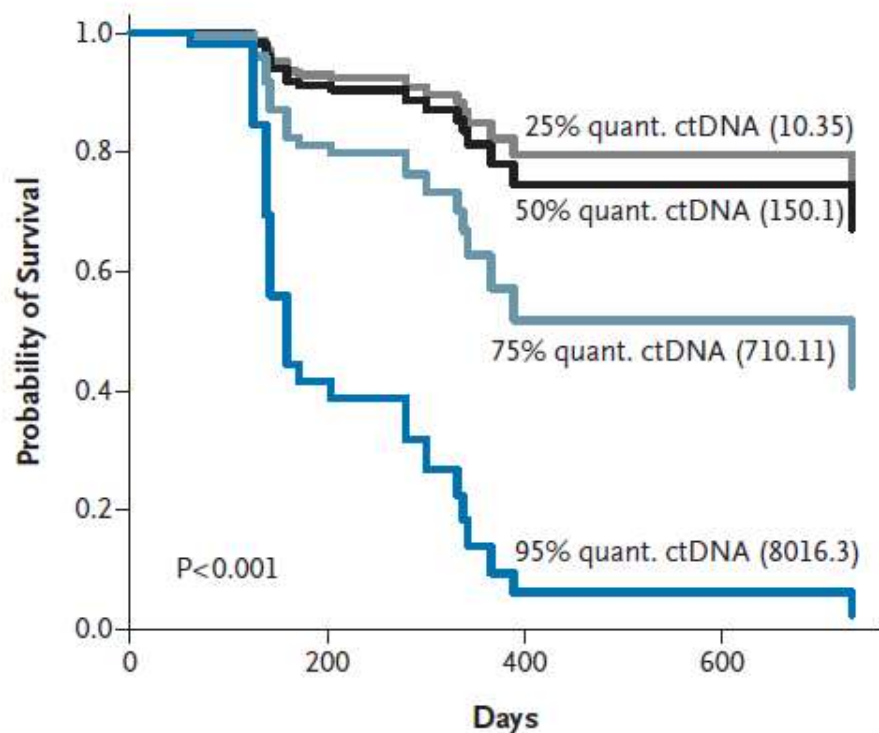


Analysis of Time to Progression and Overall Survival: CTC and Serum DNA Methylation Detection in Stage IV Biochemotherapy Melanoma Patients (koyanagi Cancer Res 2006)

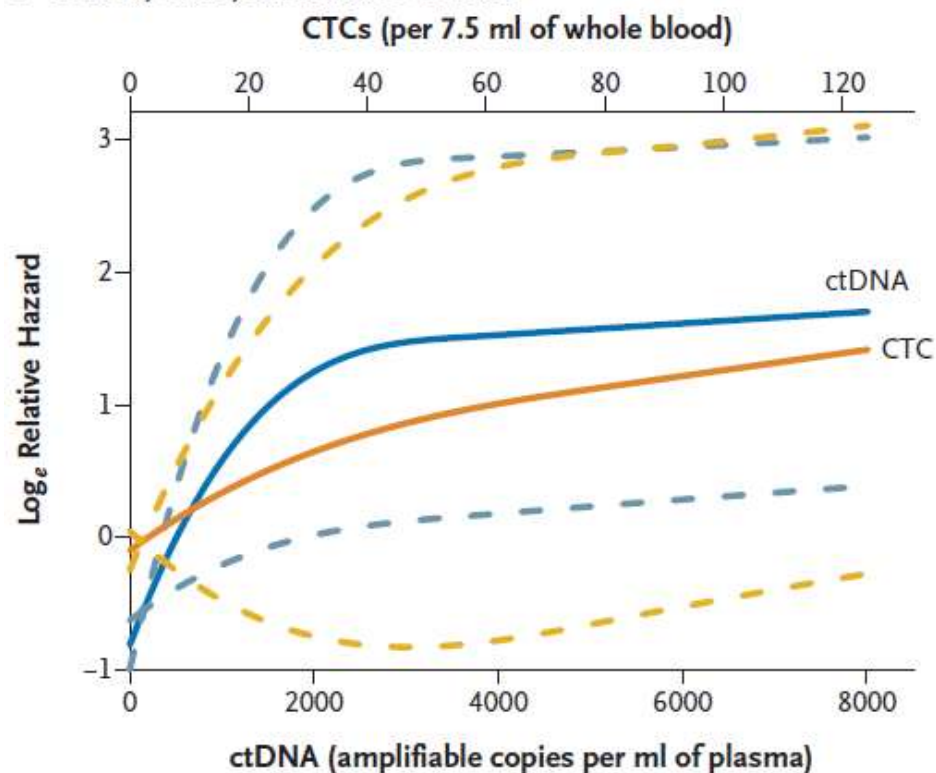


Monitoring Multiple Point Mutations and Structural Variants in cfDNA

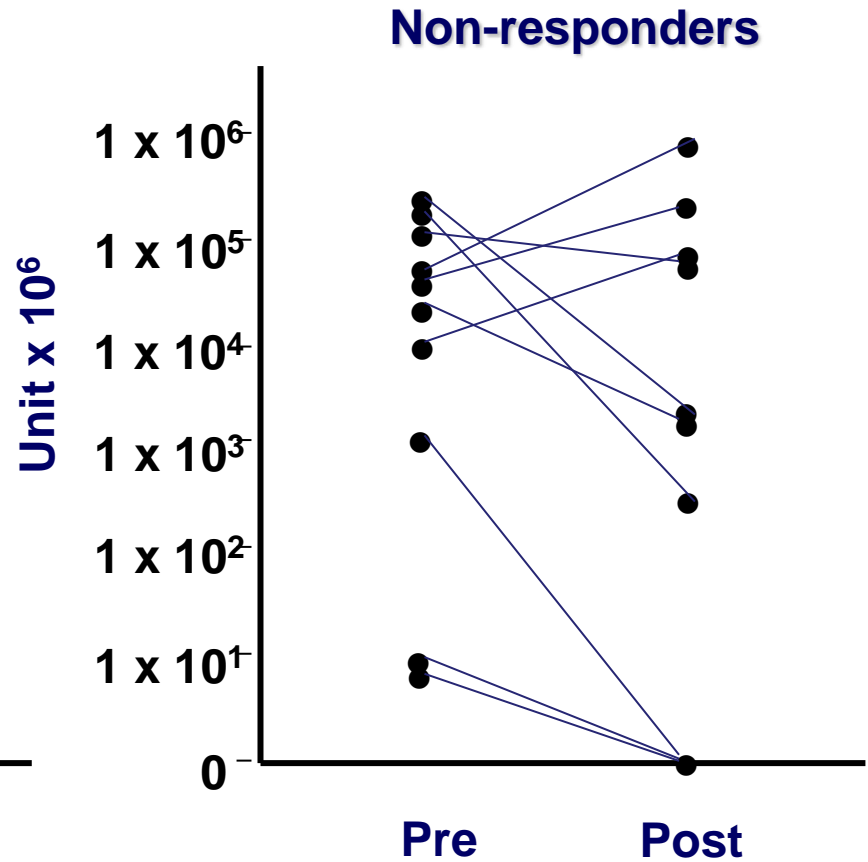
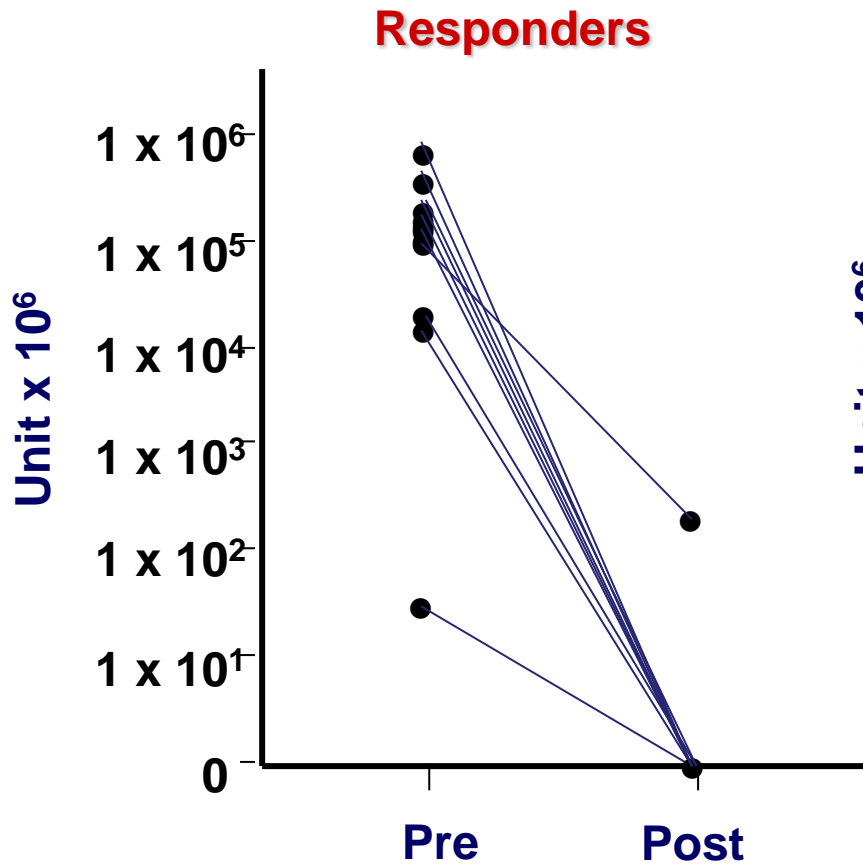
E Quantiles of ctDNA and Overall Survival



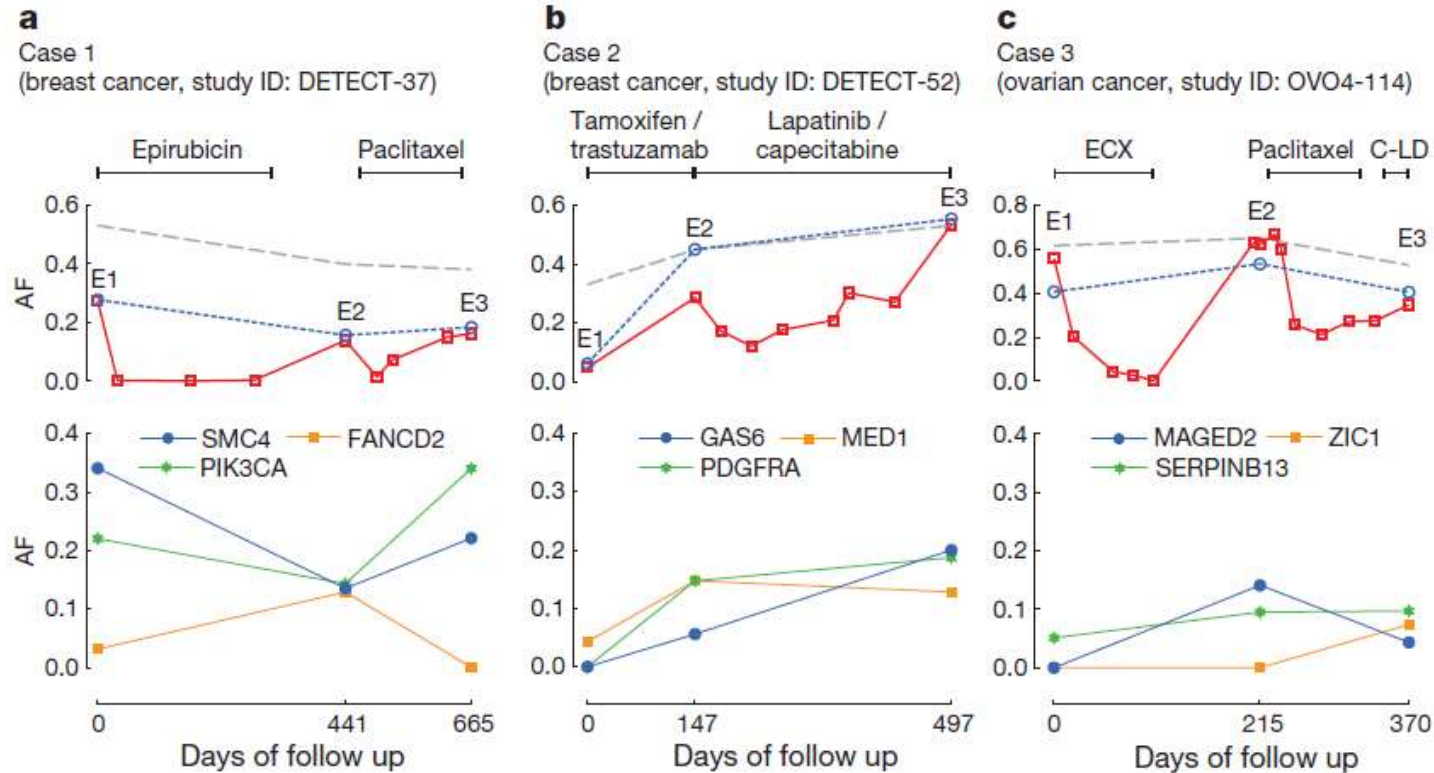
F ctDNA, CTCs, and Relative Hazard



Circulating B-RAF V600E in Stage IV Melanoma Patients' Sera: Biochemotherapy Patients Responses



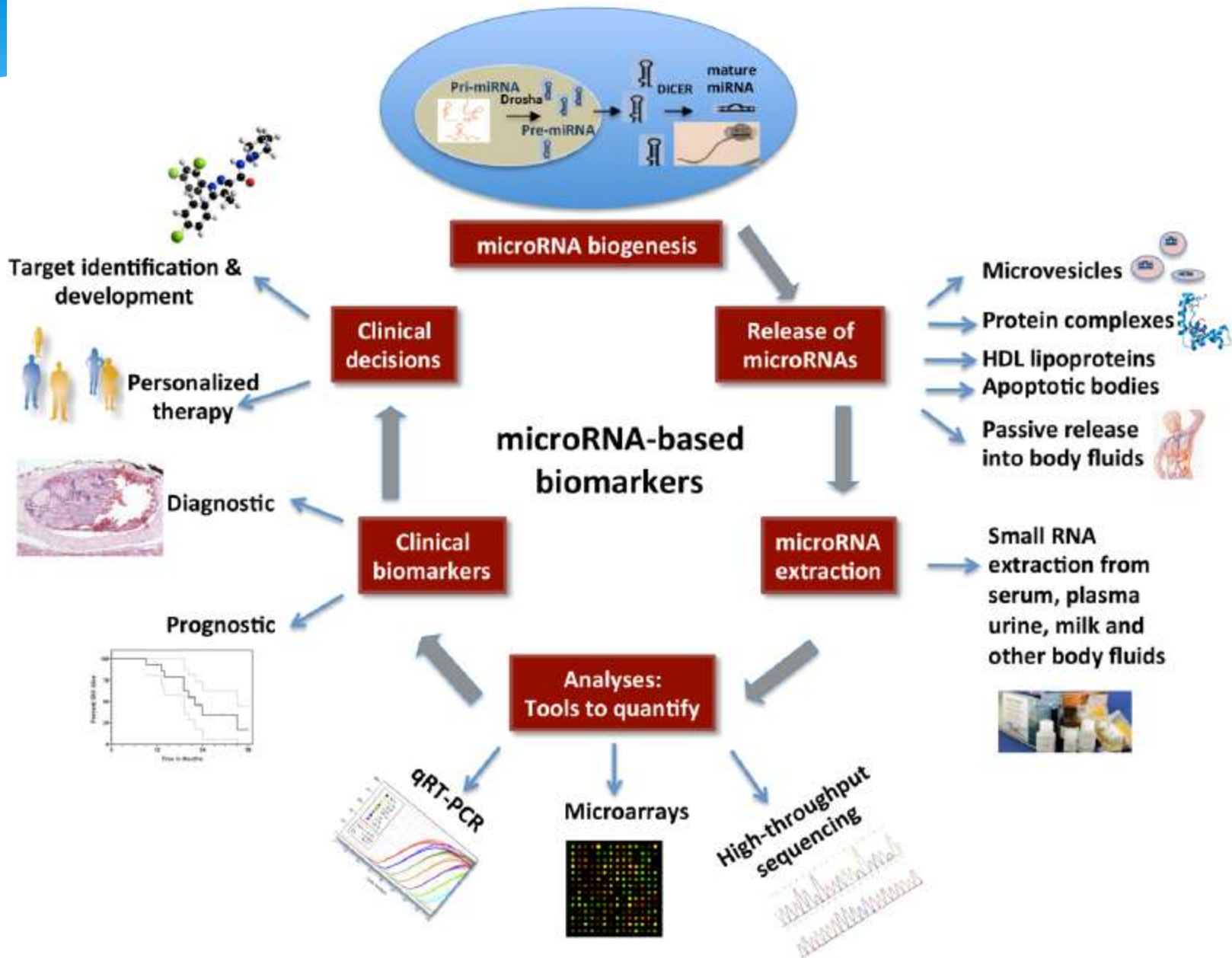
Analysis of Acquired Resistance to Cancer Therapy by cfDNA Sequencing



■ 'Anchor' mutations (TAm-Seq / digital PCR)
 ○ 'Anchor' mutations (exome sequencing)
 - - - Tumour burden in plasma (exome-wide estimate)
 ●, ■, ▲ Examples of mutations showing significant changes in AF, genes indicated separately for each case

Mutations showing evidence of genomic tumor evolution

Initial allele fractions (Anchor mutations) used for initial cfDNA screening decreasing and tumor burden increasing during therapy.



Advantages of miRs for Blood Assays

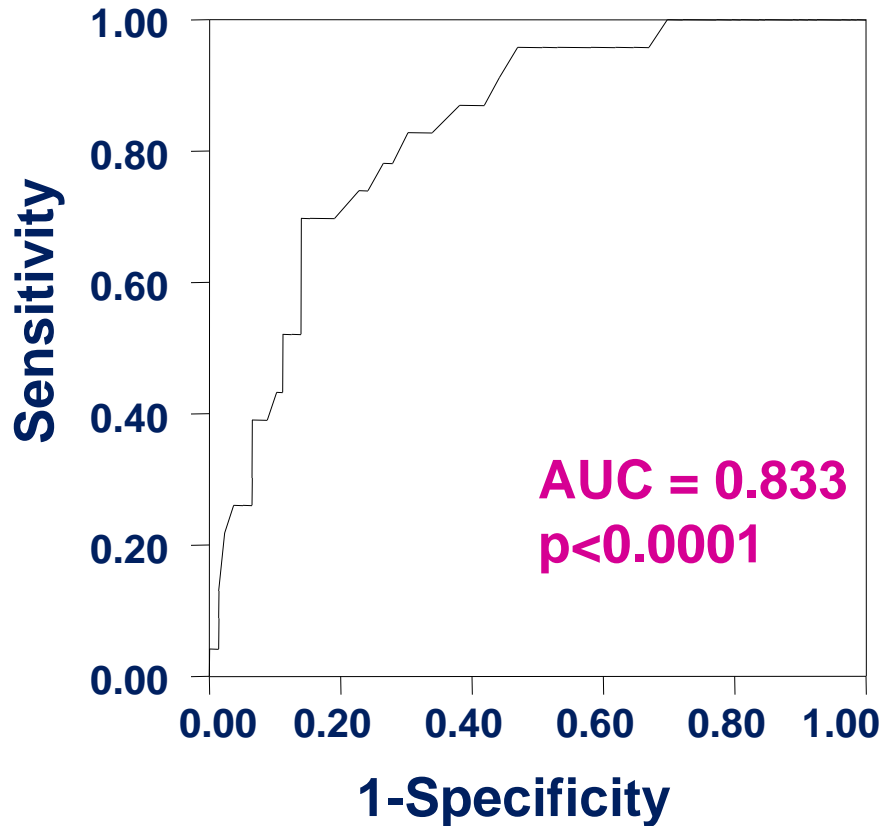
- **Low degradation rate (mRNA degrades rapidly)**
- **Stable at room temperature**
- **Does not require special blood handling logistics: limited volume**
- **Functional targets of tumor-related genes**

Disadvantages of miRs for Blood Assays

- **Specificity and robustness of assays**
- **Normal healthy donors or other disease effects**
- **Cut-off quantification values; standardization**
- **Isolation/detection processes; robustness**

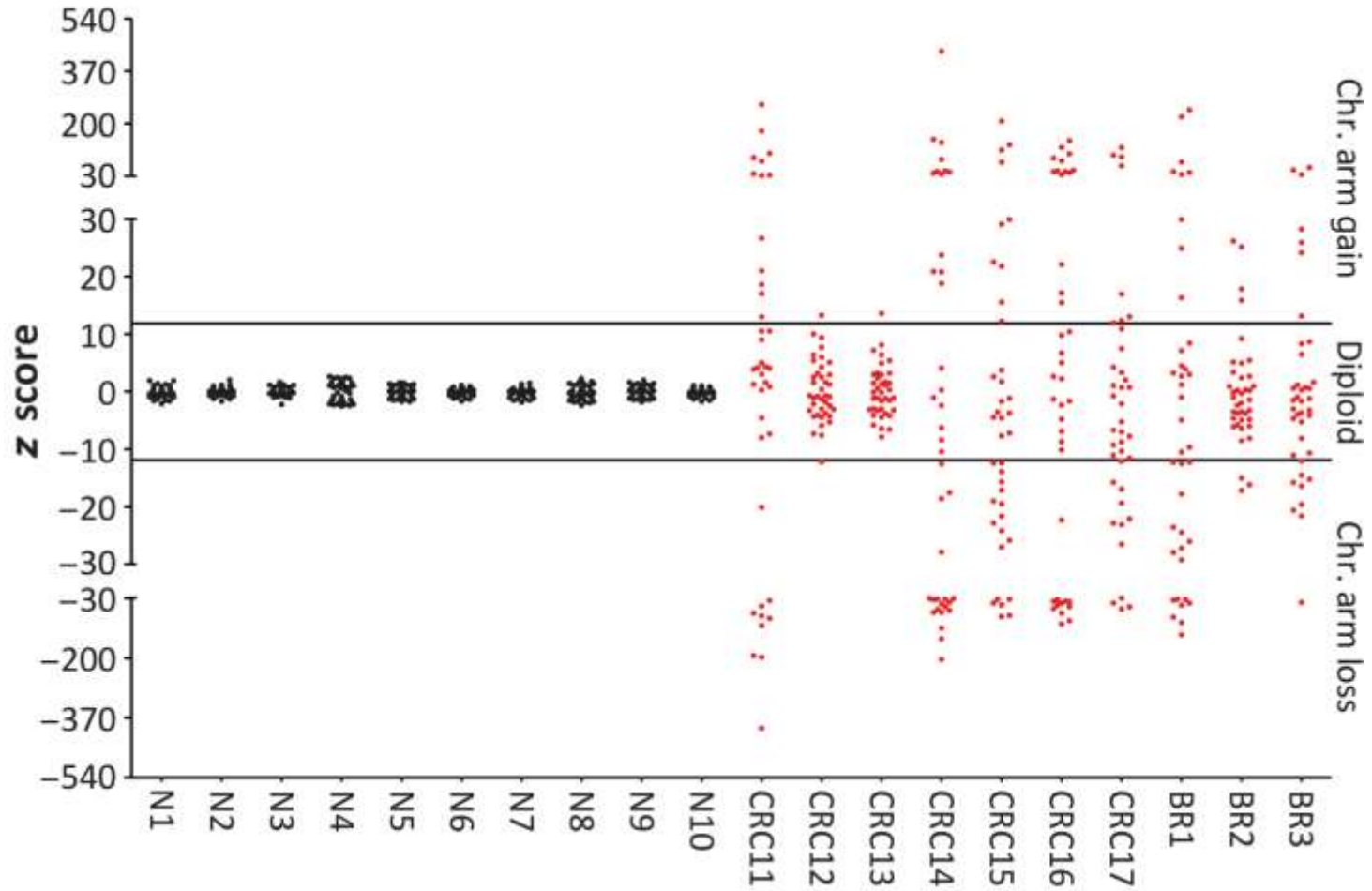
Identification of Circulating miR-21 in Breast Cancer by RT-qPCR-DS(Direct Serum Assay) of Circulating miR-21

AJCC Stage IV vs. Stage I, II, or III Breast Cancer Patients



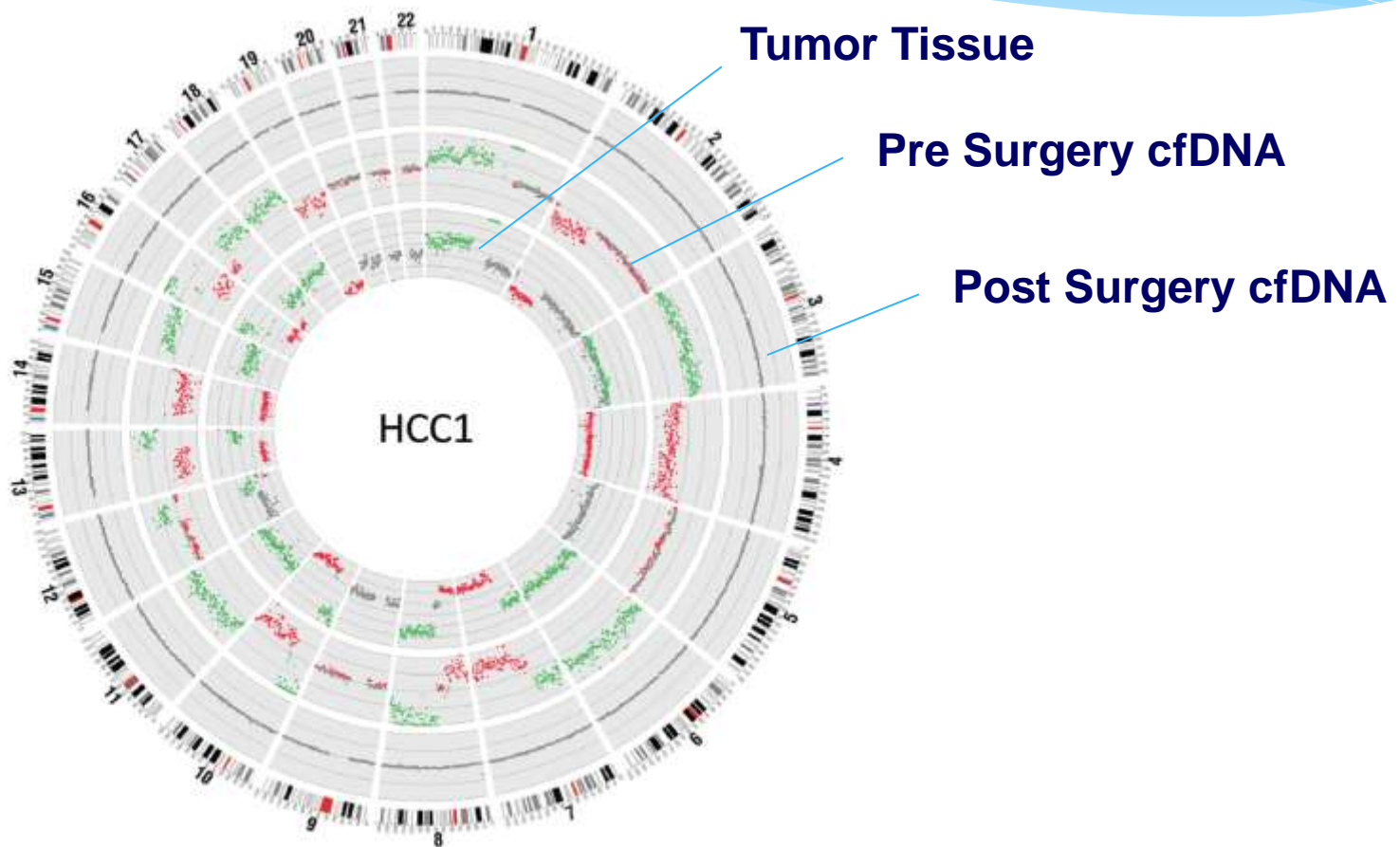
Patients' status and $-dC_q$
AJCC Stage IV vs. Stage I-III breast cancer
N=102 patients

Detection of Chromosomal Alterations in cfDNA of Cancer Patients by Whole-Genome Sequencing



Detection of Chromosomal aberrations in all the cancer patients

cfDNA Clearance After HepatoCellular Carcinoma Surgery



Copy number aberrations detected in the tumor tissue sample (inner ring), presurgery plasma sample (middle ring), and postsurgery plasma sample (outer ring) for a HCC case

Issues of CFNA That Need to be Addressed

- **Degradation** and **Half-life** of CFNA in blood
- **Isolation** of CFNA: tedious process and losses
- **Quantification** of CFNA after extraction; how much is put into each assay, **robustness**, **reproducibility**, **standardization**
- **Sensitivity** and **specificity** of assays: certain CFNA types better than others
- Regardless of how interesting CFNA are they must follow standard cancer biomarker validation regulatory requirements for clinical approval. Competition with other biomarkers; analytes, proteins, etc.

CFNA vs CTC Utility

- ✓ **CTC represents a detection of a realtime “metastasis” event occurring. CFNA does not**
- ✓ **CFNA detection occurs at any stage; CTC very limited in earlier tumor stages.**
- ✓ **Tumor volume often relates to CFNA levels whereas CTC does not.**
- ✓ **Both differ in utility relative to cancer type and natural disease history**
- ✓ **CFNA analysis requires far less amount of blood and less logistic problems in multicenter trials.**

