

ONCOLOGÍA DE PRECISIÓN: Papel de la biopsia líquida

DIA DEL BIOQUÍMICO
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CIBERONC



DISCLOSURES

Personal financial interests

Honoraria scientific advice- speaker: BMS, Roche, Amgen, Merck, Astra Zeneca, Takeda, Thermofisher Scientific

Institutional financial interests

Research grants: Lilly, Astra Zeneca, Merck, Thermofisher Scientific

Non-financial interests

Leadership role: Executive Board International Society of Liquid Biopsy

I declare no conflict of interests



1

Oncología de Precisión: biomarcadores

2

La muestra

3

La tecnología

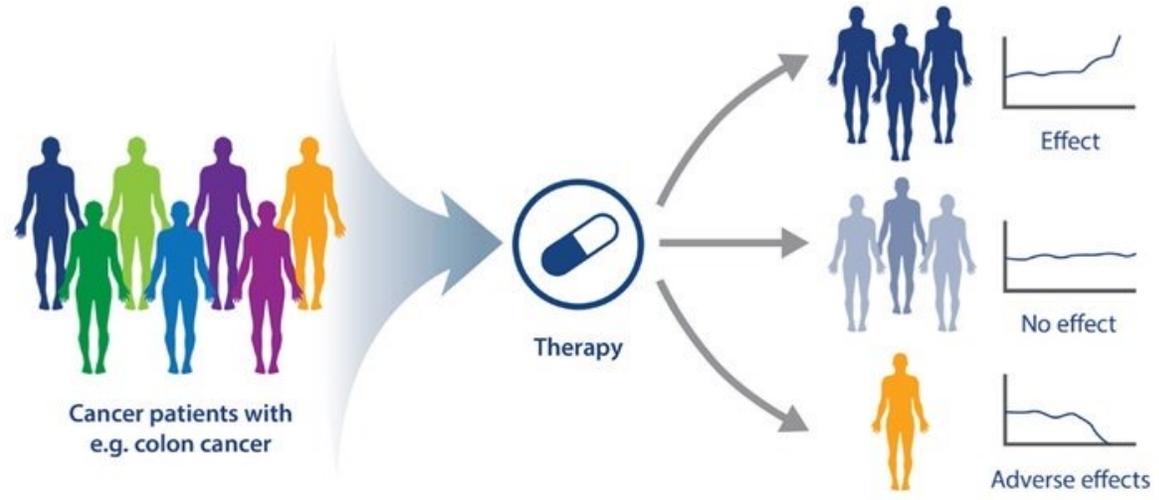
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Aplicaciones clínicas



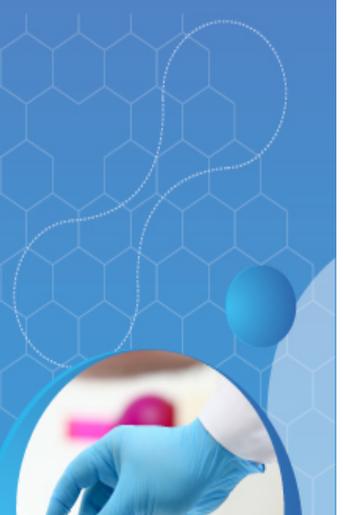
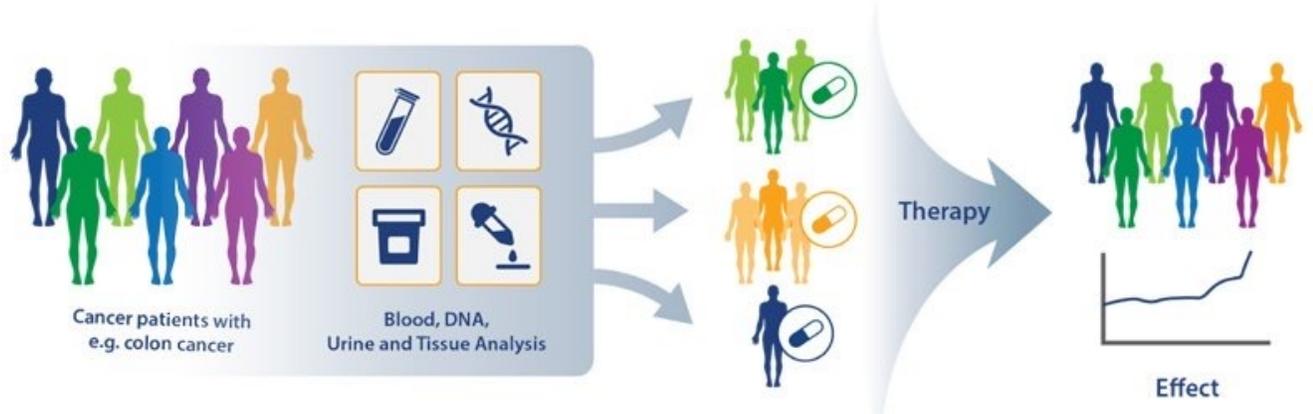
PASADO

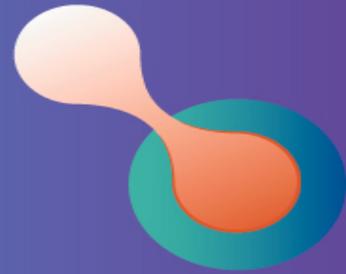
One Treatment Fits All



PRESENTE

More Personalized Diagnostics





PRECISION ONCOLOGY consists of a **treatment tailored to the tumor's genomic alterations**, assuming that the identified genomic alterations are **cancer driving** and a **matched targeted therapy** is available^{1,2}



Genomic testing



Biomarkers



Genomic reporting



Genomic matching



¹. Arnedos, M., et al. (2014) *J Pathol.* 232:274–82; ². Schwartzberg, L., et al. (2017) *Am Soc Clin Oncol Educ Book* 37:160-9.

BIOMARCADORES EN CÁNCER: estado del arte – terapias dirigidas



Bladder

FGFR2/3 fusions

Breast

PIK3CA mutations

ERBB2(HER2) amplification

BRCA1/2 germline and somatic mutations

ESR1 mutations

Cholangiocarcinoma

FGFR2 fusions

IDH1 mutations



Colorectal

MSI-High

RAS mutations

BRAF V600E

ERBB2(HER2) amplification

EGFR mutations

Endometrial

MSI-high

ERBB2(HER2) amplification

Gastric/Gastroesophageal

ERBB2(HER2) amplification



GIST

KIT mutations

PDGFRA mutations

BRAF mutations

NSCLC

EGFR driver mutations

ALK fusions

ROS1 fusions

BRAF V600E mutations

RET fusions

KRAS G12C

MET exon 14 skipping

EGFR/ERBB2 exon 20 insertions



Melanoma

BRAF V600E/K

Ovarian

BRCA1/2 germline and somatic mutations

Pancreatic

BRCA1/2 germline and somatic mutations

Prostate

BRCA1/2 germline and somatic mutations

Thyroid

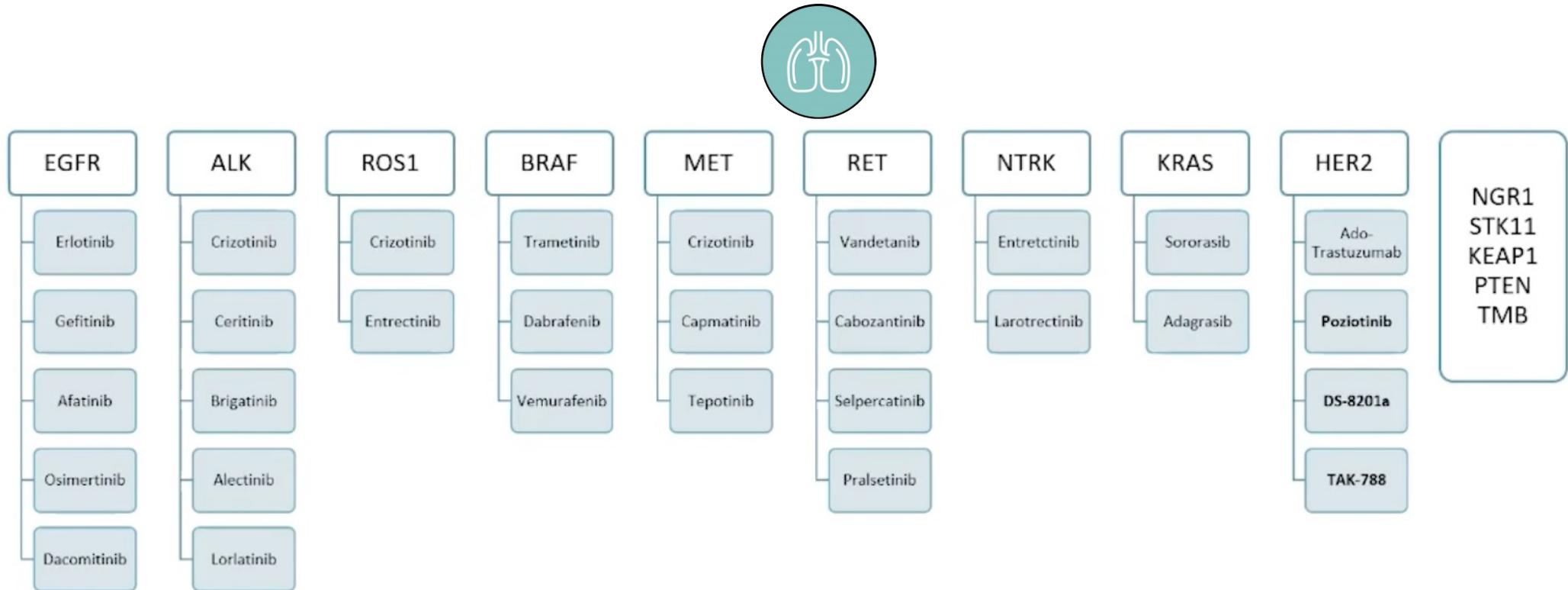
RET fusions

BRAF V600E





Cáncer de pulmón -> creciente número de dianas terapéuticas y de tratamientos dirigidos



Lung cancer genotyping is a challenge

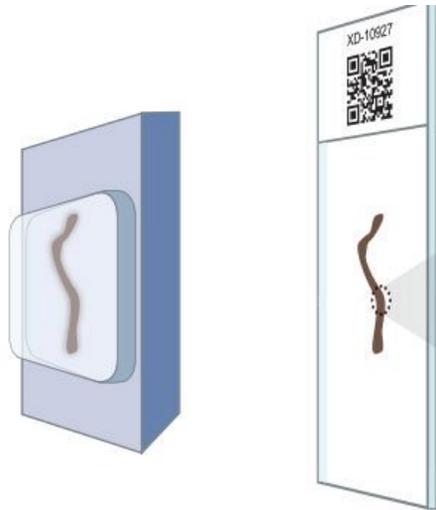


2

LA MUESTRA

BIOMARCADORES: selección de la muestra

TEJIDO



- Es el estándar en la práctica en AP
- Información histológica completa
- Se puede analizar tumor y microambiente tumoral
- Cantidad de material para análisis molecular depende del tipo de tumor, estadio, abordaje para la toma de muestra, etc.
- Heterogeneidad plantea un problema
- Muestra invasiva / rebiopsias no siempre son posibles (-> no captura la plasticidad de los tumores)

Data from NSCLC



In real NSCLC cohort, 20- 30% of patients are NOT tested, because insufficient or NO tissue availability

Gutierrez – Clin Lung Cancer 2017



Lo Frecuente

Una Rareza

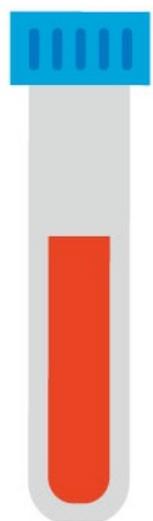
→ **~30%** of tissue failure rates for tumor genotyping (NGS) in routine pathological samples



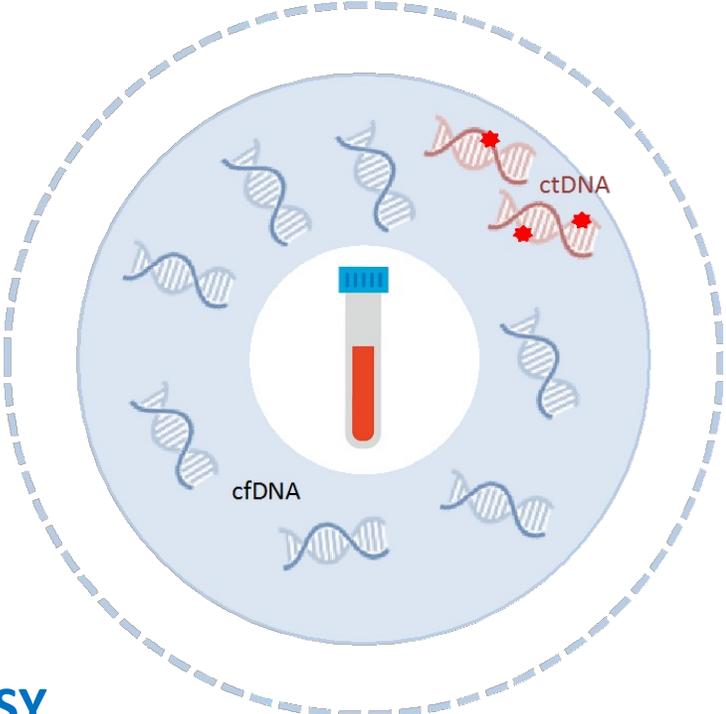
Is still possible to implement a **PRECISION ONCOLOGY** approach in those patients w/o tissue samples for molecular testing??



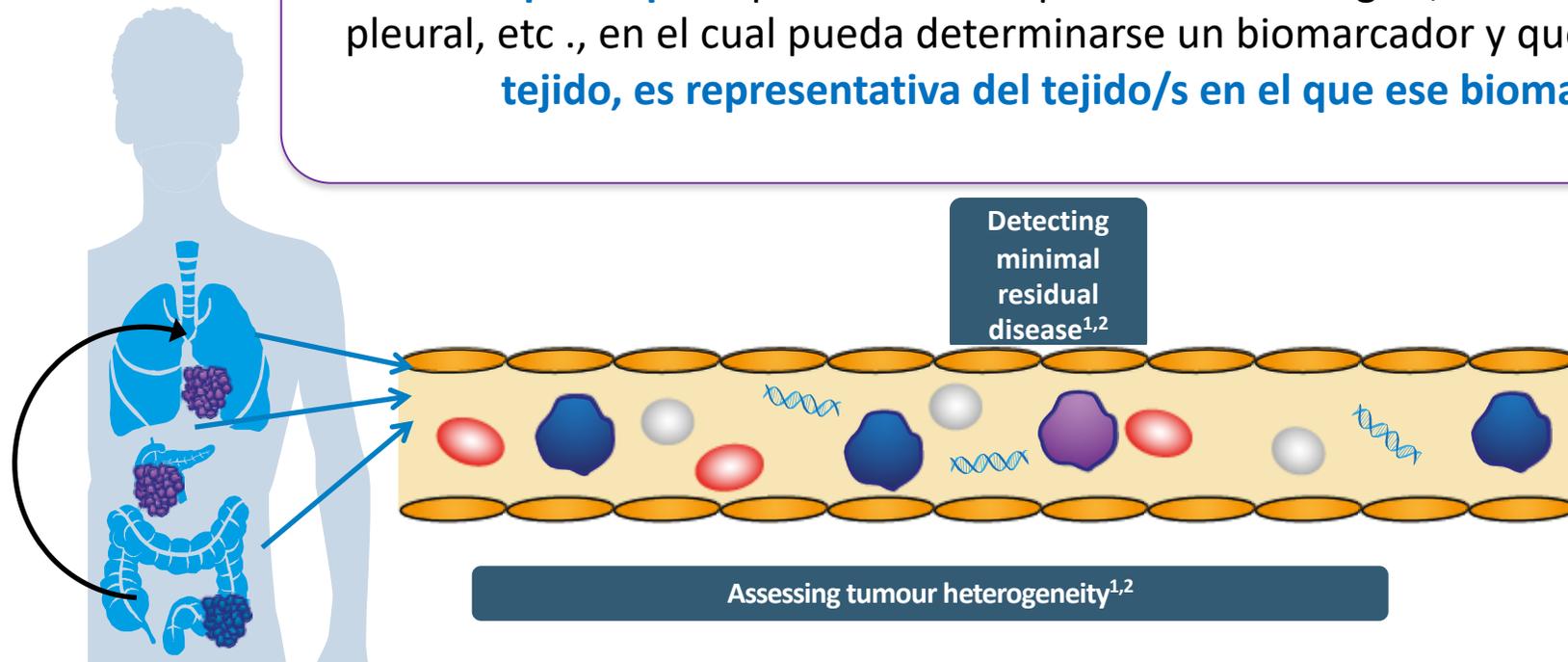
We need a **Complementary/ Alternative** option to fill this gap



LIQUID BIOPSY



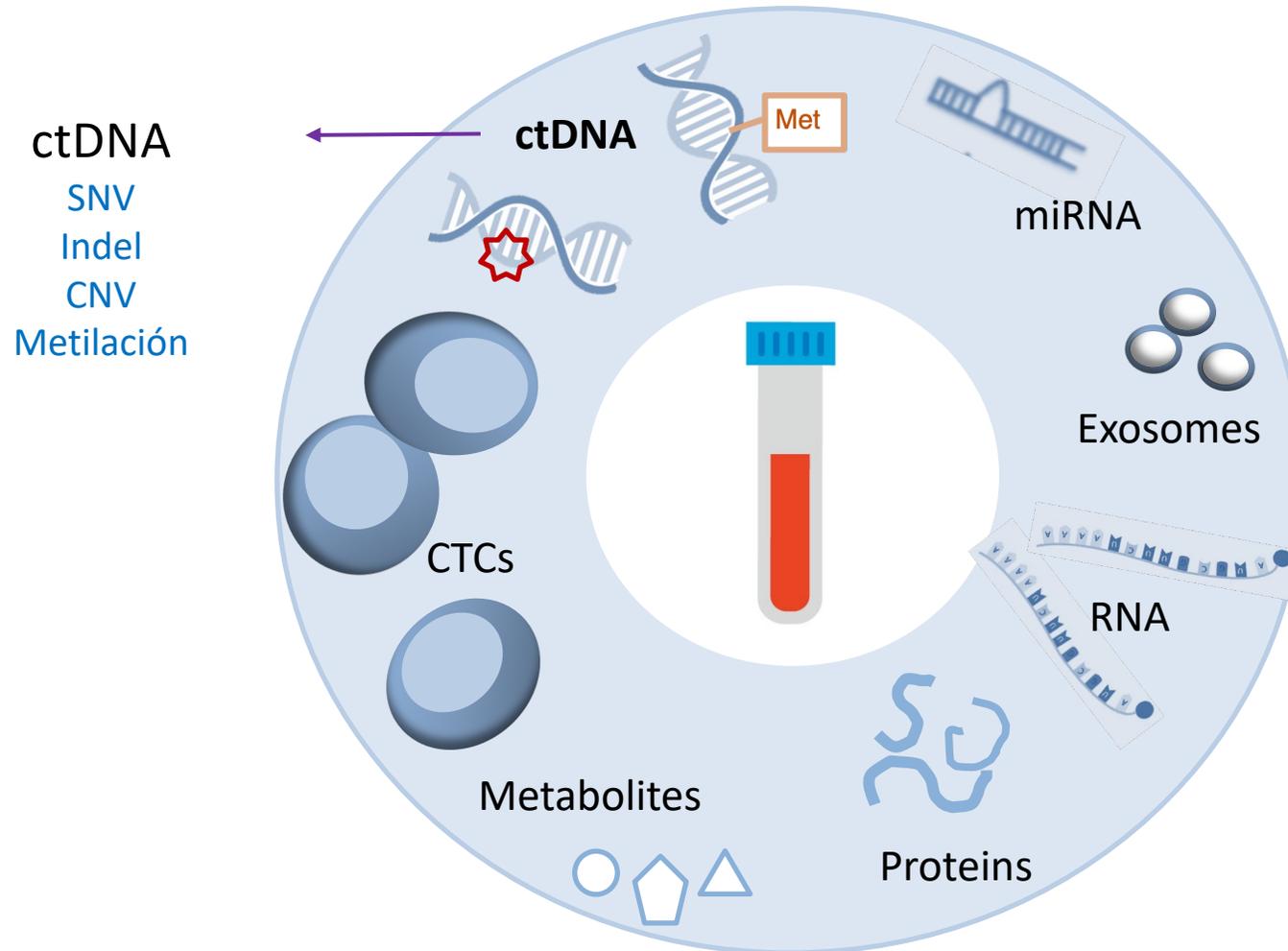
Una **biopsia líquida** puede ser cualquier fluido biológico, como la sangre, orina, ascitis, líquido pleural, etc., en el cual pueda determinarse un biomarcador y que al **igual que en una biopsia de tejido, es representativa del tejido/s en el que ese biomarcador se ha producido**



Please note: clinical utility data may not be available for all applications described above.

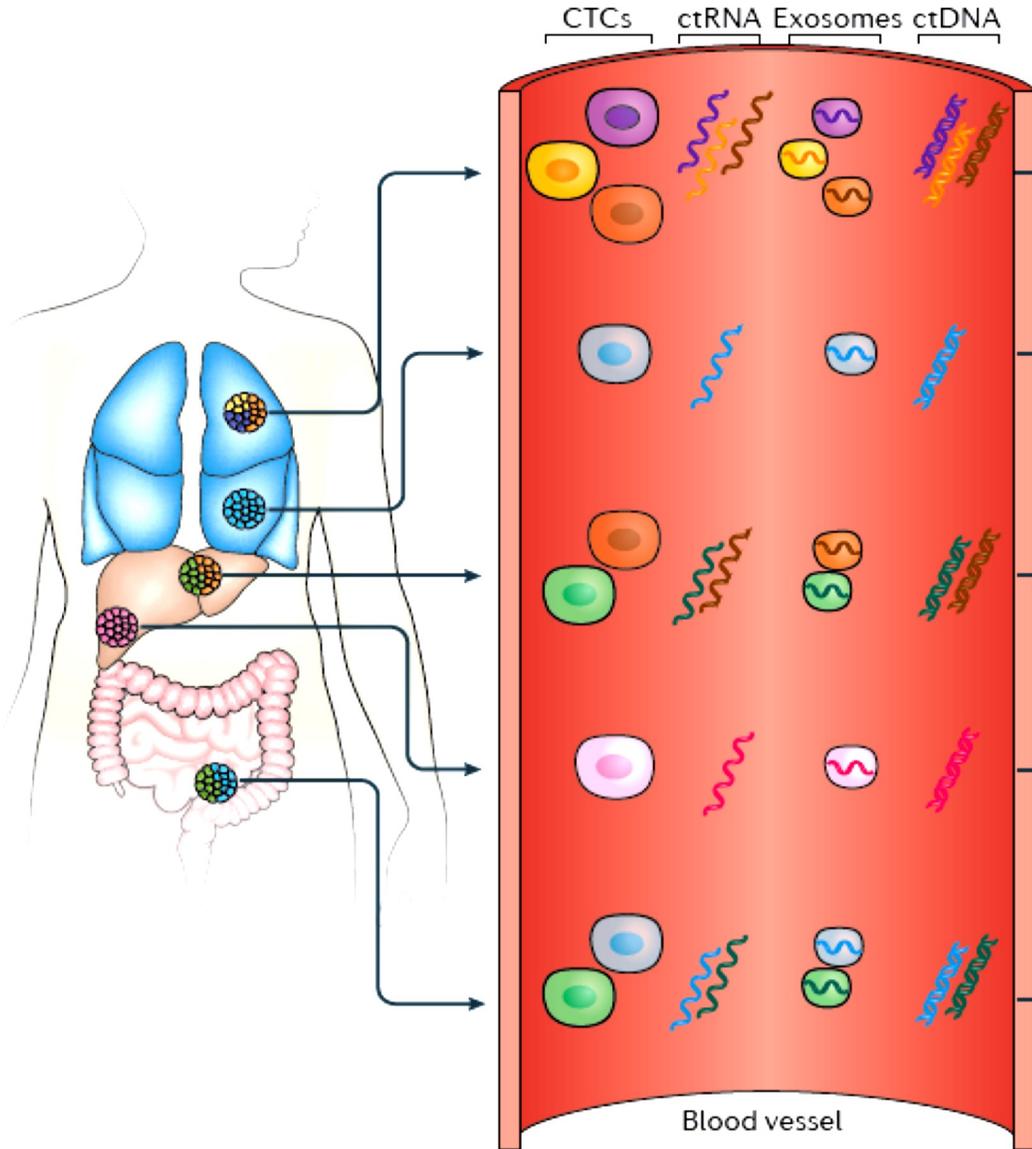
● Primary tumour cell ● Metastatic tumour cell

¿Qué entendemos por Biopsia Líquida? -> SANGRE

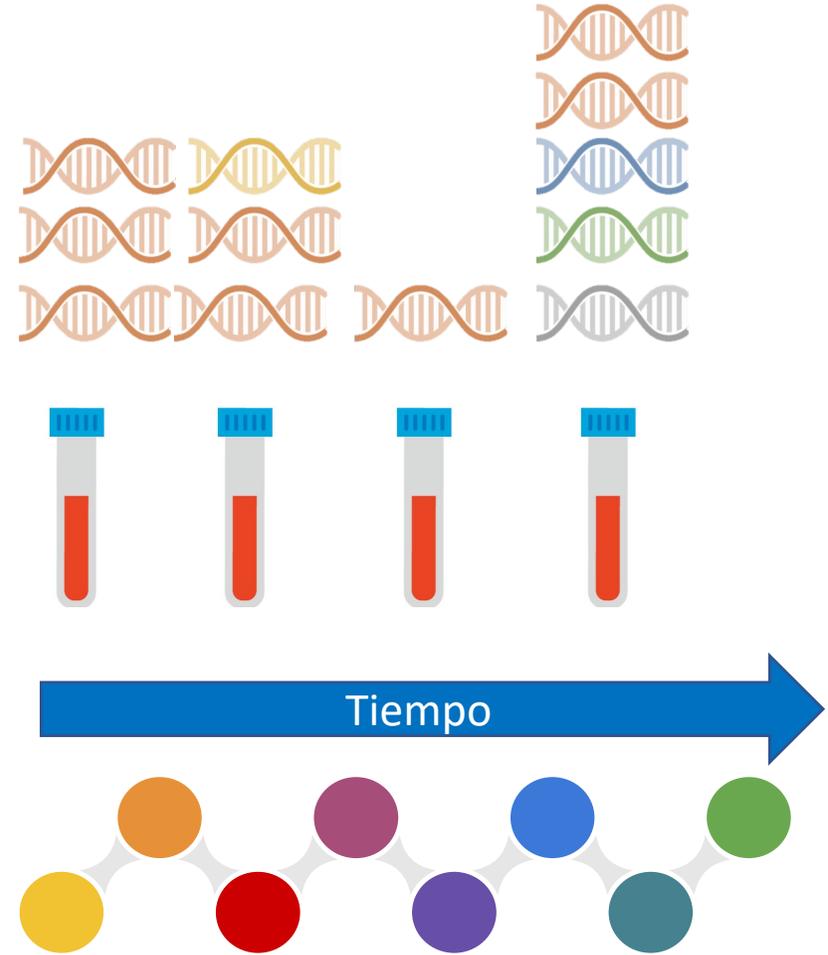




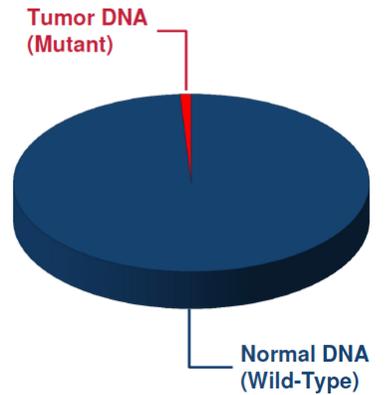
Heterogeneidad



Plasticidad



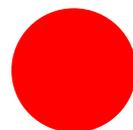
PERO... La sensibilidad es importante





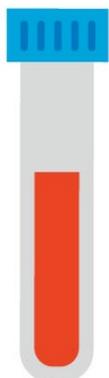
VENTAJAS

- Mínimamente invasiva/ menor morbilidad
- Simple de obtener/ resultados más rápidos
- Se puede repetir-> monitorización en tiempo real
- Recapitula mejor la heterogeneidad tumoral



LIMITACIONES

- No todos los pacientes tienen ctDNA
- Resultados negativos deben confirmarse en tejido





3

Tecnologías para análisis de Biopsia Líquida.

BIOMARCADORES: tecnologías disponibles

Análisis de biomarcadores de forma individual

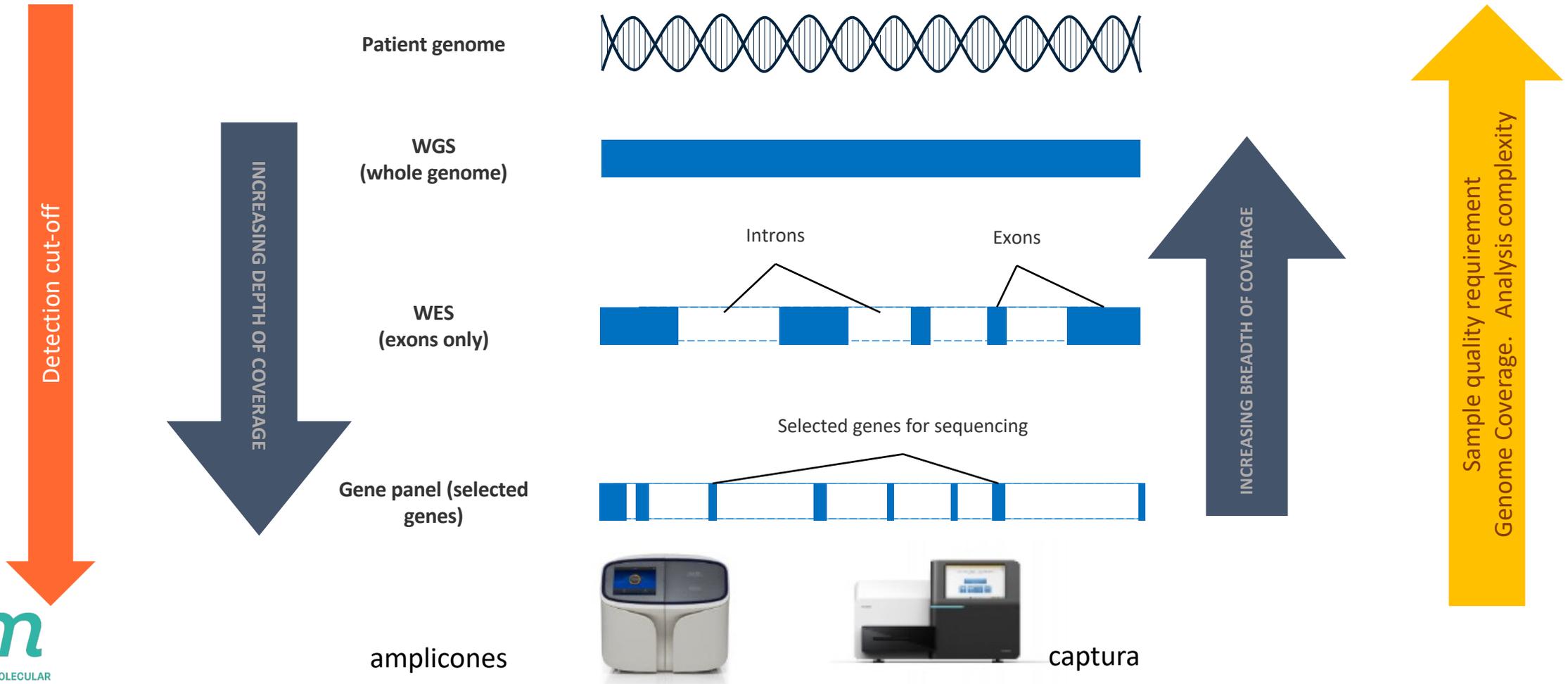


Análisis de multigénico (NGS)





Tecnologías para el análisis de biomarcadores: NGS



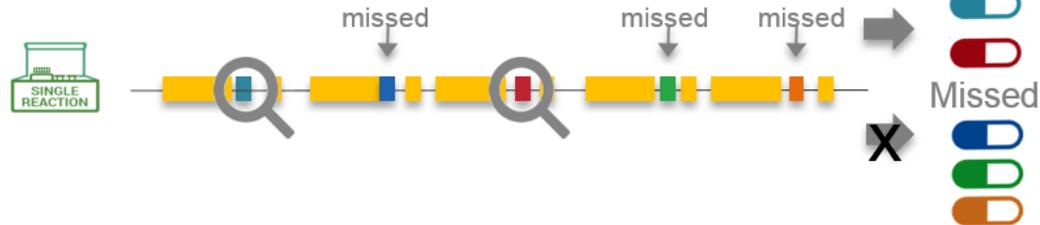


Tecnologías para el análisis de biomarcadores: NGS

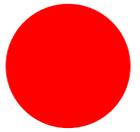


Hot-Spot Testing

1 sample, therapeutic options for some genes

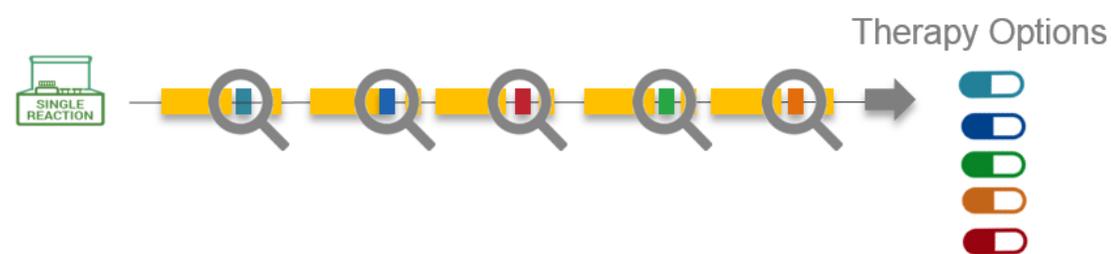


10-30%
actionability



Comprehensive Genomic Profiling

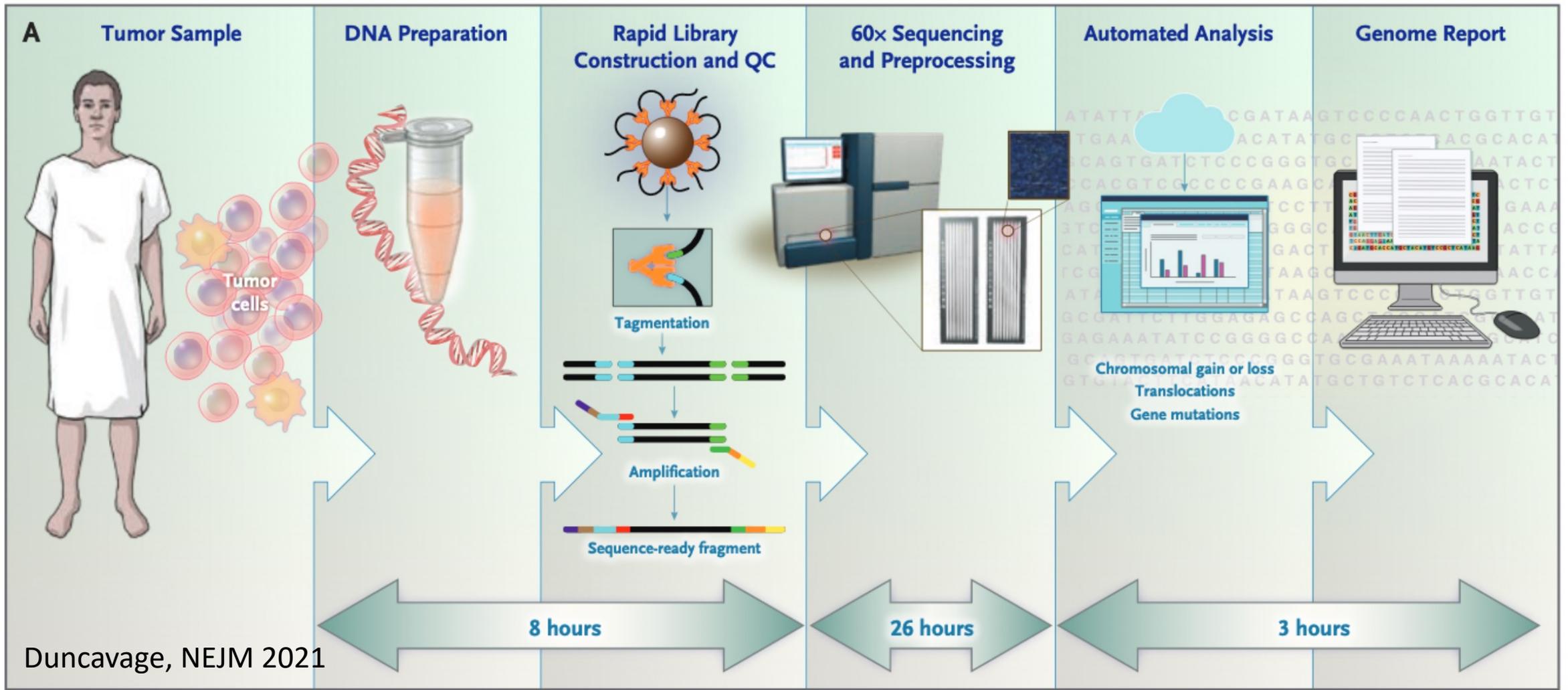
1 samples, therapeutic options for many genes



25-55% actionability



Tecnologías para el análisis de biomarcadores: NGS





Biopsia Líquida -> selección de la metodología adecuada

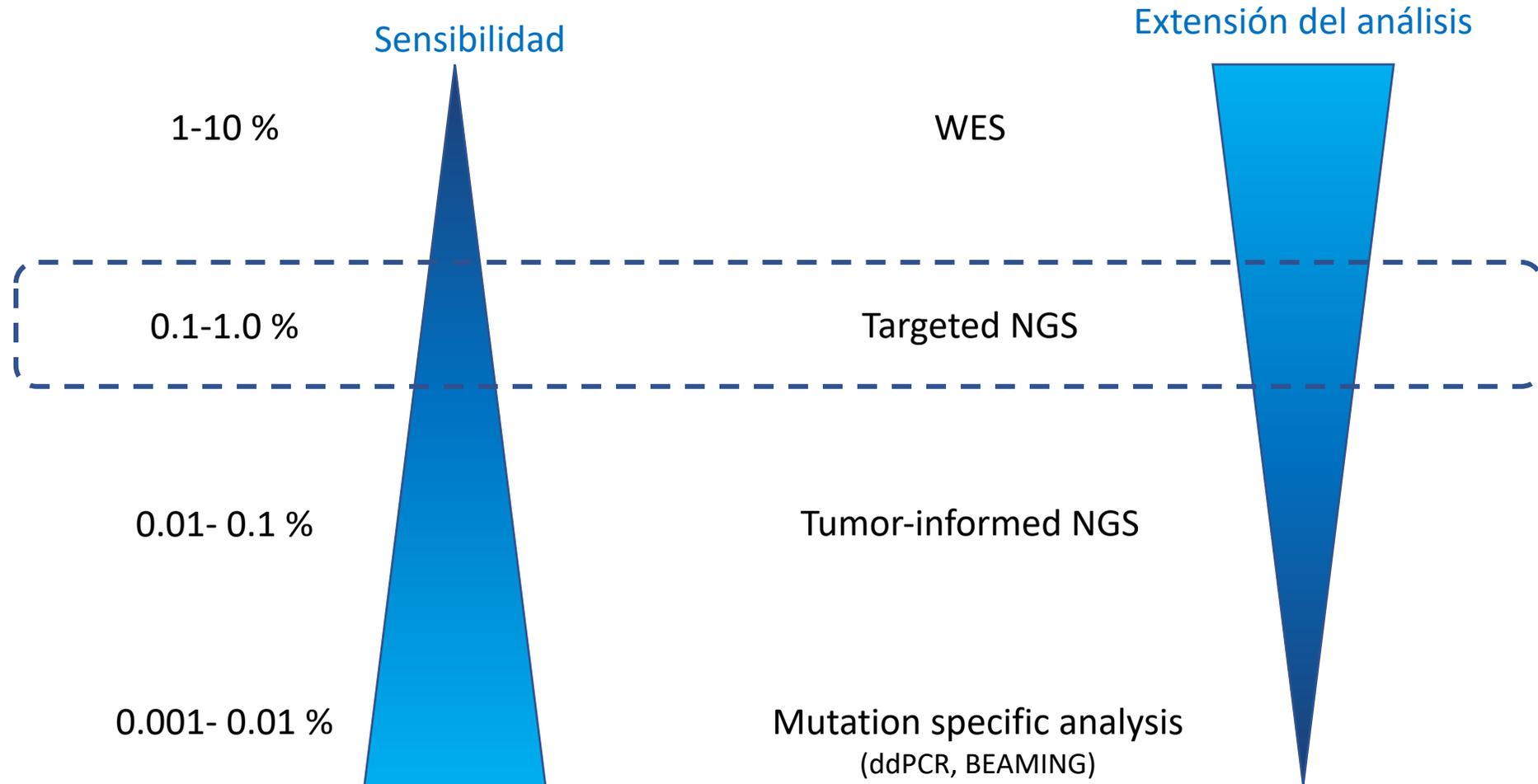




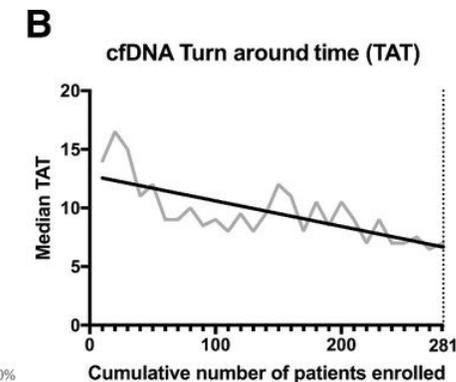
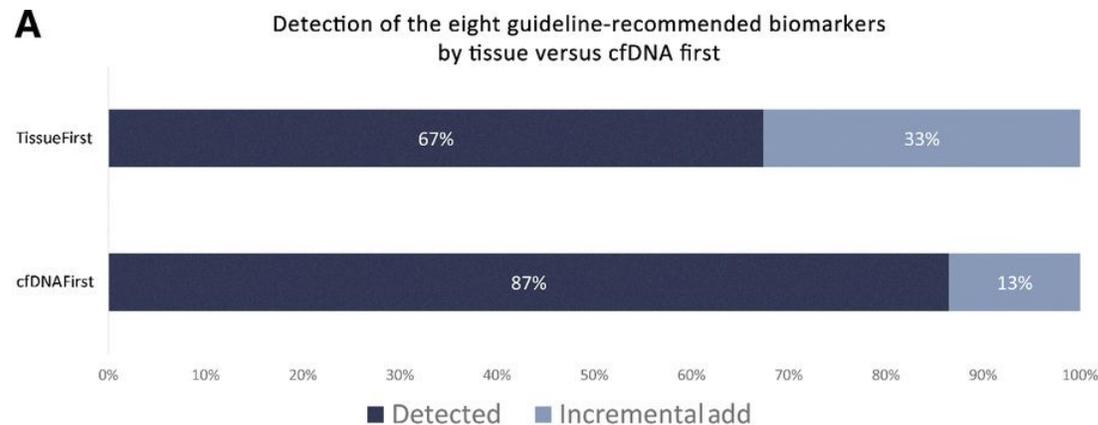
Table 1. Comparison of different ctDNA testing methodologies.

	Technologies		
	Allele-specific PCR	Emulsion PCR	Capture-Based Targeted NGS
Advantages	Fast results and easy to understand FDA approved kits Low cost of reagents Less labourious	Fast results easy to understand High sensitivity and specificity Low cost of reagents Absolute quantification	High-throughput of multigenetic detection (CNV, exonic mutations, etc) High specificity and sensitivity
Disadvantages	Detection of a small number of alterations Lower sensitivity Qualitative and semi-quantitative tests, not for absolute quantification of the mutation	Detection of a small number of alterations Specialized instruments necessary	Consumables and reagents more expensive Most time-consuming Specialized instruments necessary
Limit of detection	0.1–1%	0.001–0.1%	0.01–2%
Examples	Therascreen(Qiagen); Cobas (Roche)	BEAMing (Sysmex Inostic); dPCR (Thermofisher)	Oncomine Ion Torrent (Thermo Fisher); FoundationOne (Foundation Medicine); Guardant360 (Guardant)
References	[17–20]	[21–25]	[26–28]

CNV: copy number variation; NGS: next-generation sequencing. BEAMing: Beads, Emulsion, Amplification, and Magnetics; ddPCR: digital polymerase chain reaction.



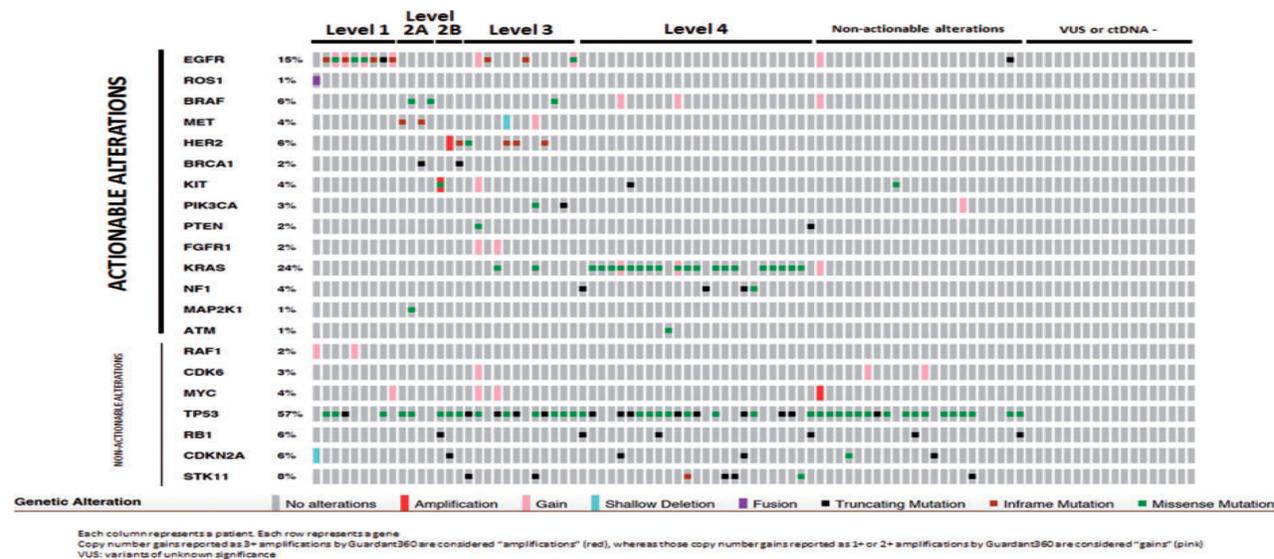
NILE



BFASt

Blood First Assay Screening Trial (BFASt) in Treatment-Naive Advanced or Metastatic NSCLC: Initial Results of the Phase 2 ALK-Positive Cohort

Zugazagoitia et al



Leighl, N.B. et al . Clin. Cancer Res. 2019, 25, 4691–4700; Rolfo, C. et al. Crit. Rev. Oncol. Hematol. 2020, 151, 102978; Zugazagoitia et al, Ann Oncol 2019, 30 :290-296; Dziadziuszko R, et al J Thorac Oncol. 2021,16: 2040–2050

a		Tissue SOC result		
Plasma BEAMing result		Mutation detected	No mutation detected	Total
	Mutation detected	113	8	121
	No mutation detected	18	97	115
	Total	131	105	236
	Overall percent agreement = 89.0%			
	Positive percent agreement = 86.3%			
	Negative percent agreement = 92.4%			

b		Tissue SOC + Tissue BEAMing result		
Plasma BEAMing result		Mutation detected	No mutation detected	Total
	Mutation detected	115	6	121
	No mutation detected	13	102	115
	Total	128	108	236
	Overall percent agreement = 92.0%			
	Positive percent agreement = 89.8%			
	Negative percent agreement = 94.4%			

Fig. 1 Concordance between plasma and tissue results obtained by SOC (a) or SOC + BEAMing (b). SOC standard of care

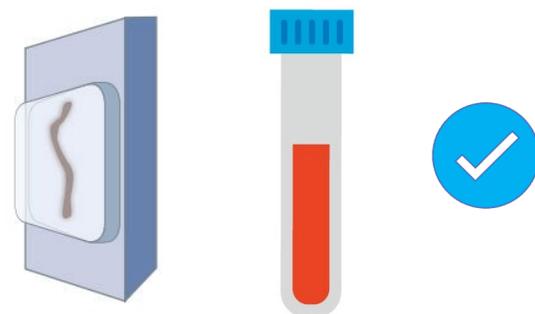


ARTICLE

Clinical Study

Prospective multicenter real-world *RAS* mutation comparison between OncoBEAM-based liquid biopsy and tissue analysis in metastatic colorectal cancer

Jesús García-Foncillas¹, Josep Tabernero^{2,3}, Elena Élez^{2,3}, Enrique Aranda⁴, Manuel Benavides⁵, Carlos Camps^{6,7}, Eloisa Jantus-Lewintre^{8,9}, Rafael López¹⁰, Laura Muínelo-Romay¹⁰, Clara Montagut¹¹, Antonio Antón¹², Guillermo López¹³, Eduardo Díaz-Rubio¹⁴, Federico Rojo¹⁵ and Ana Vivancos¹⁶



Incorporating BEAMing technology as a liquid biopsy into clinical practice for the management of colorectal cancer patients: an expert taskforce review



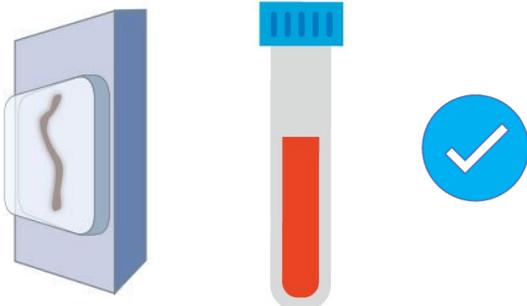
J. García-Foncillas^{1*}, E. Alba², E. Aranda³, E. Díaz-Rubio⁴, R. López-López⁵, J. Tabernero⁶ & A. Vivancos⁷

NGS en BIOPSIA LÍQUIDA: concordancia con tejido, utilidad clínica

Cell-free DNA NGS

G360	Tissue Reference		Total
	Positive	WT	
Positive	159	38	197
Not Det.	28	8.685	8.713
TOTAL	187	8.723	8.910

- **Sensitivity:** 85%
- **Specificity:** 99,6%
- **Accuracy:** 99,3%



Analytical and clinical validation of a digital sequencing panel for quantitative, highly accurate evaluation of cell-free circulating tumor DNA.

Lanman RB, Mortimer SA, Zill OA, et al

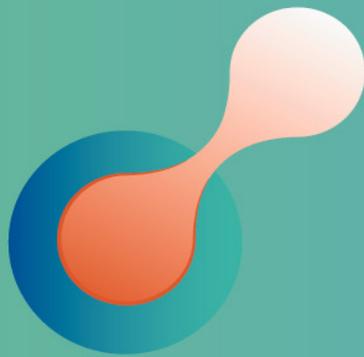
- >700 patients with positive and negative concordance **>99%** for all 4 target genomic alterations (ALK, EGFR, ROS1 y BRAF V600E).

Clinical utility of plasma-based digital next-generation sequencing in patients with advanced-stage lung adenocarcinomas with insufficient tumor samples for tissue genotyping

Zugazagoitia J, Jantus-Lewintre, et al.

Lanman RB, et al. PLoS One. 2015;16:10.

Zugazagoitia J, et al. Ann Oncol. 2019; 30(2):290-296

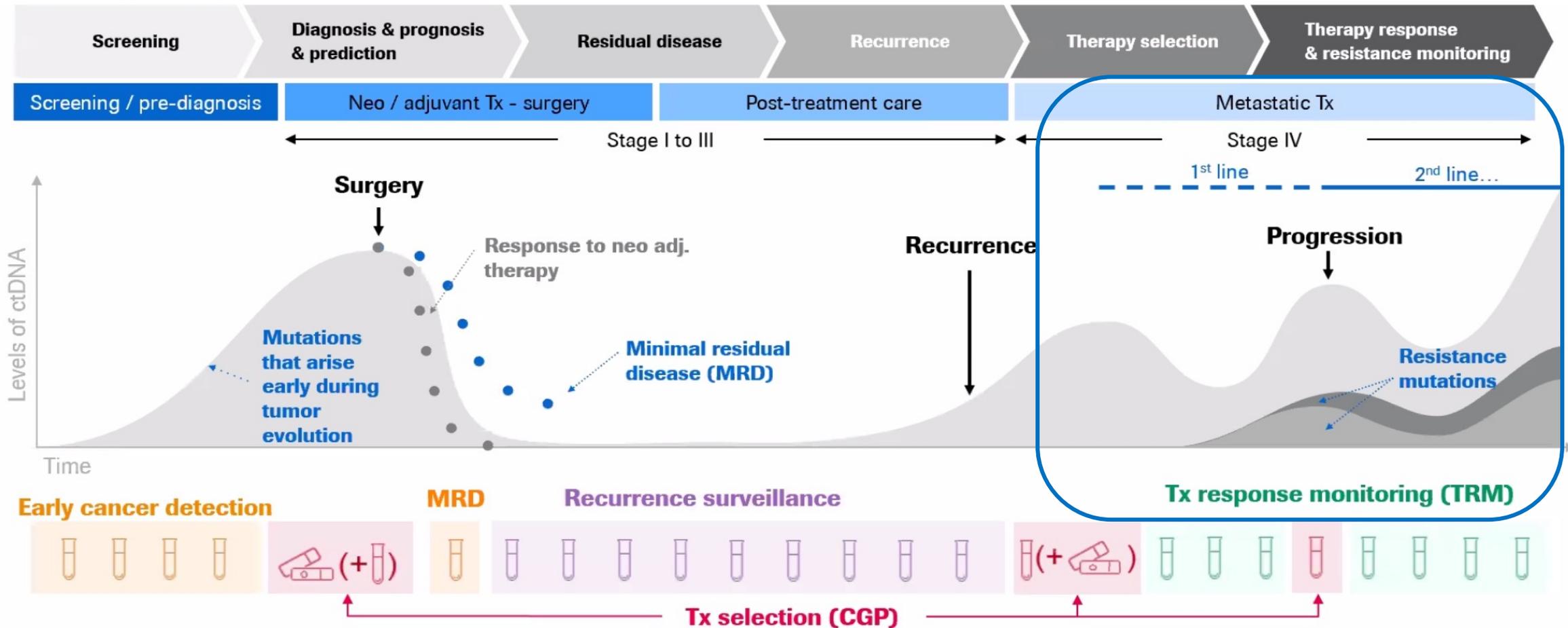


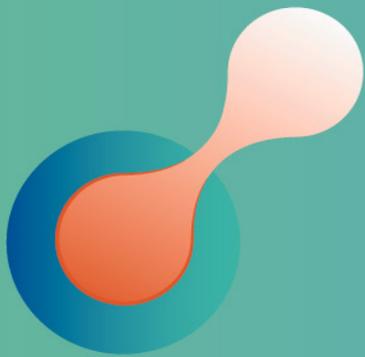
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Aplicaciones clínicas

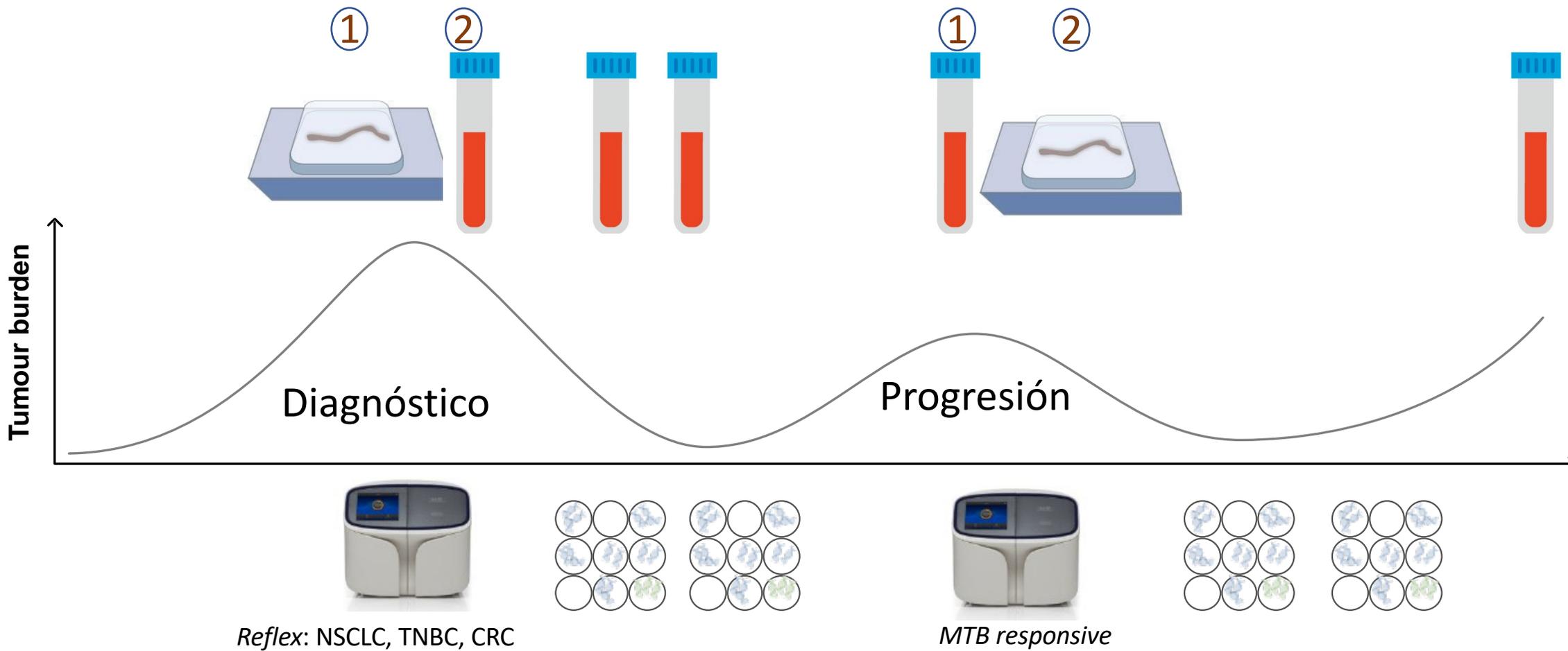


Biopsia Líquida -> ¿en qué momento?

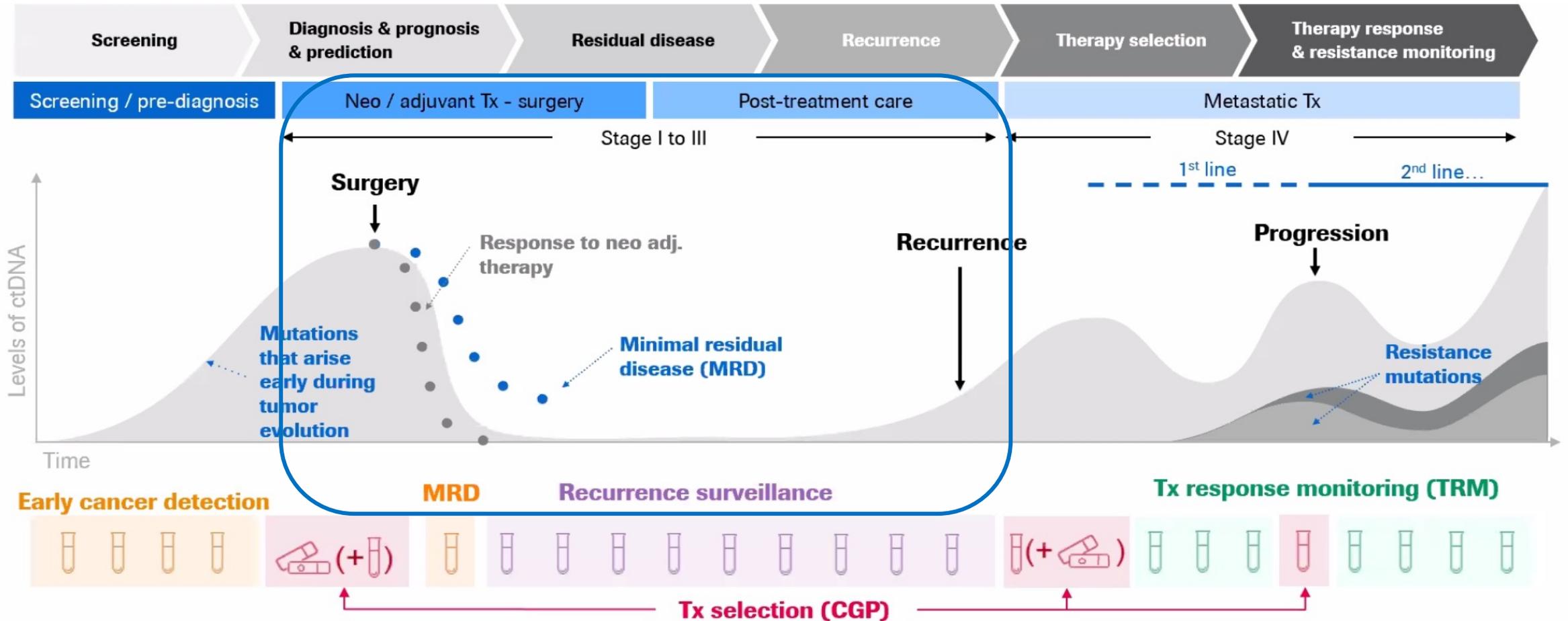




NUESTRA ESTRATEGIA



Biopsia Líquida -> ¿en qué momento?



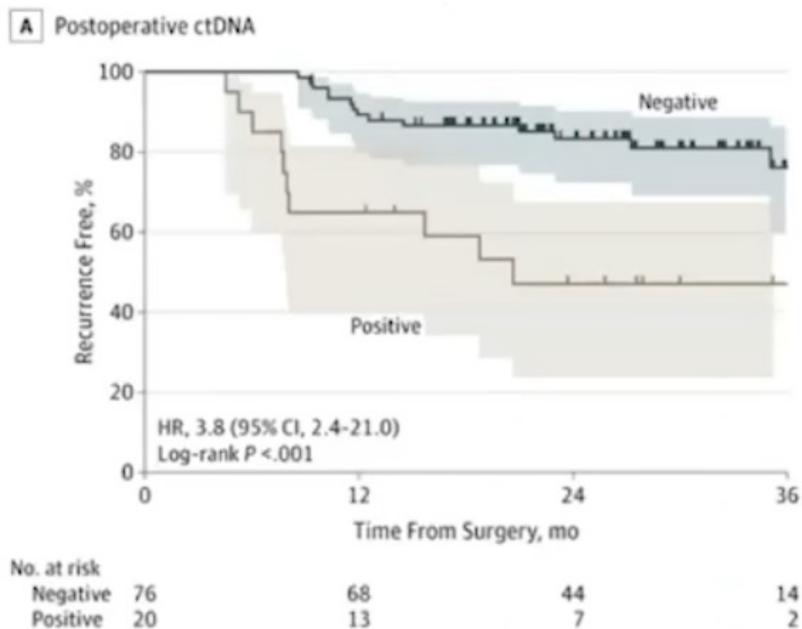


BL-> Aplicaciones en CRC -> post cirugía

Detección de MRD -> riesgo de recaída



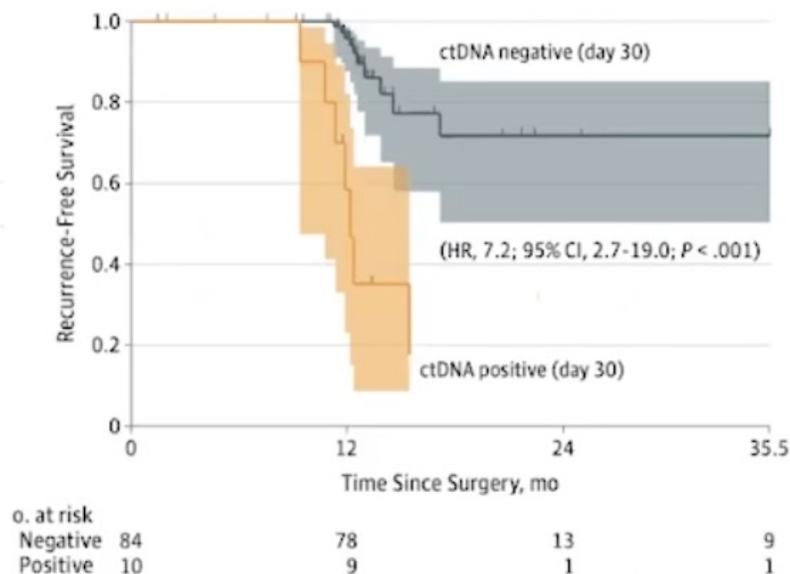
RFS



Tie et al, JAMA Oncol 2019

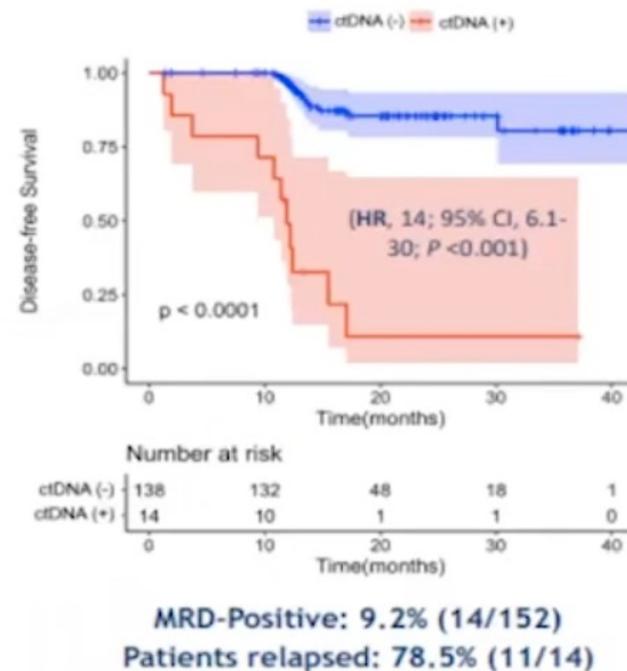
Tumor informed

Post-operative ctDNA



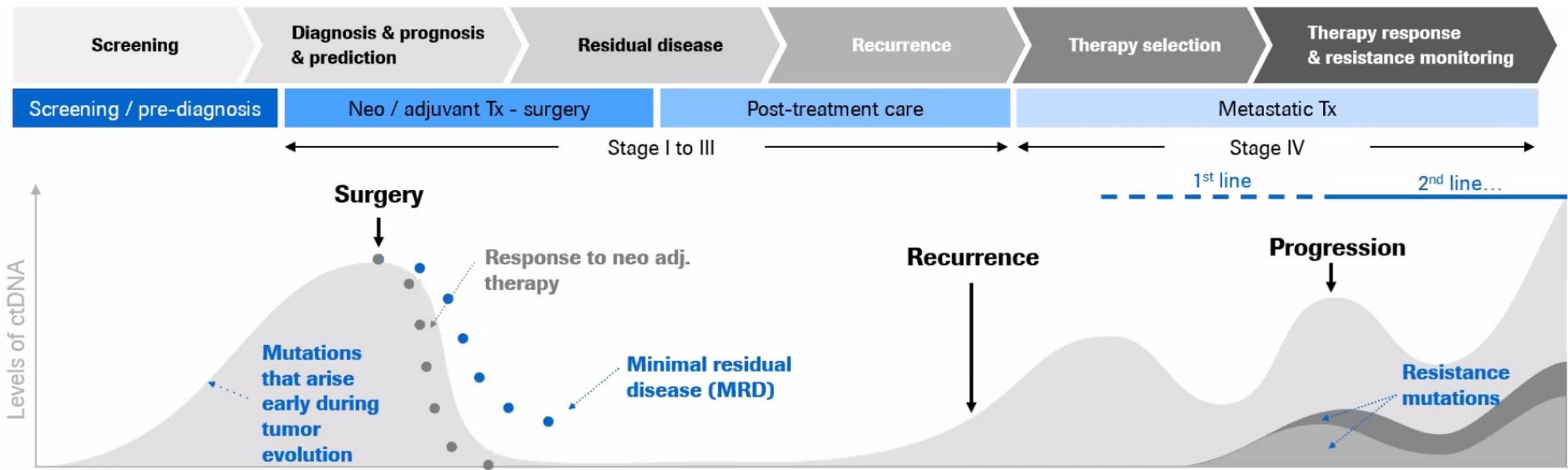
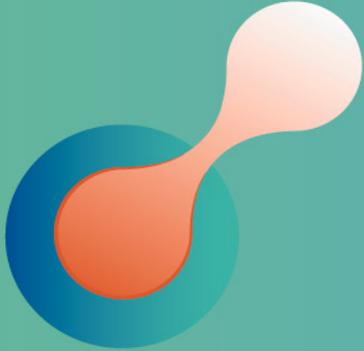
Reinert et al, JAMA Oncol 2019

Tumor informed



Tarazona et al, ASCO 2019

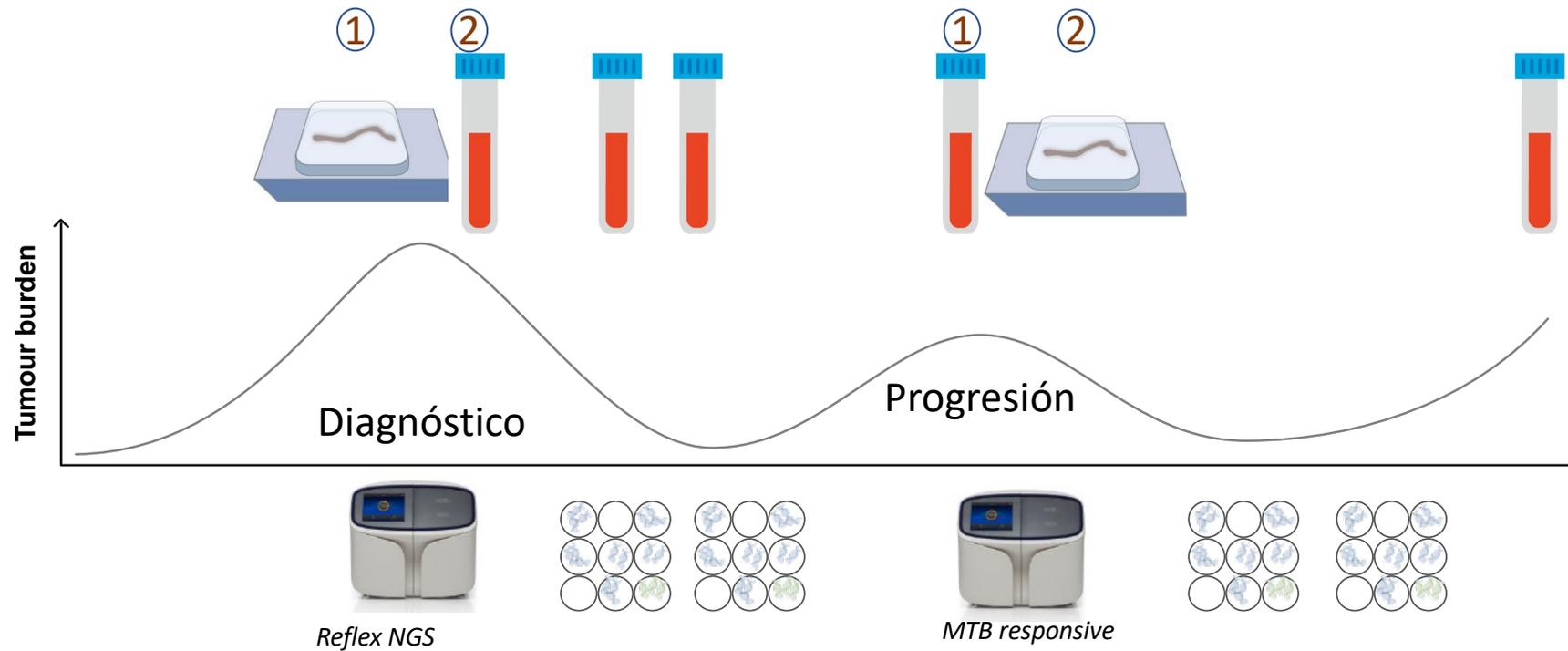
Tumor informed



**“ONGOING” -> ENORME
IMPACTO EN EL TRATAMIENTO**

EN PRACTICA CLINICA

La BIOPSIA LÍQUIDA cambiará la forma en que el cáncer es DETECTADO, MONITORIZADO Y TRATADO en forma personalizada **Solo cuestión de tiempo**







SAVE THE DATE

20 – 22 October, 2022
Miami, Florida



4TH ANNUAL CONGRESS
Liquid Biopsy
20 – 22 October 2022 | Miami, Florida



ISLB

INTERNATIONAL SOCIETY
OF LIQUID BIOPSY