

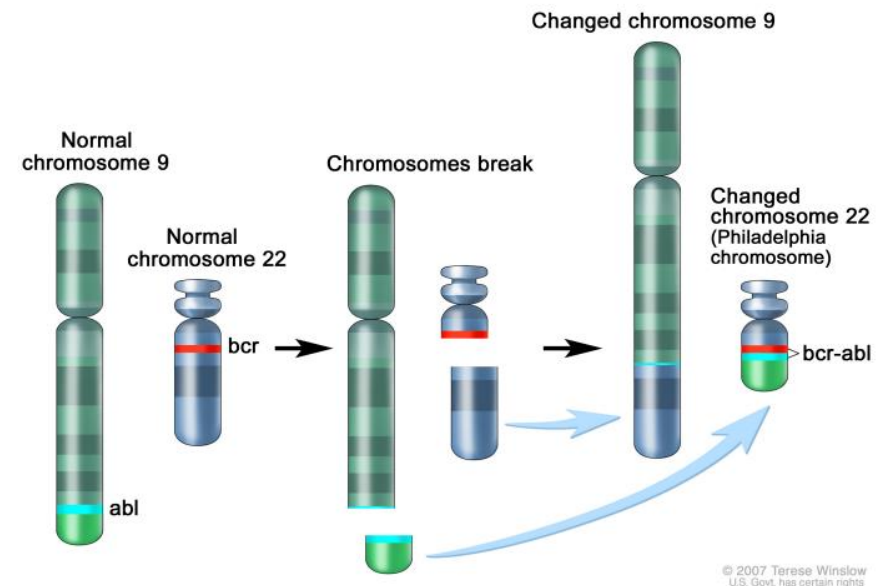
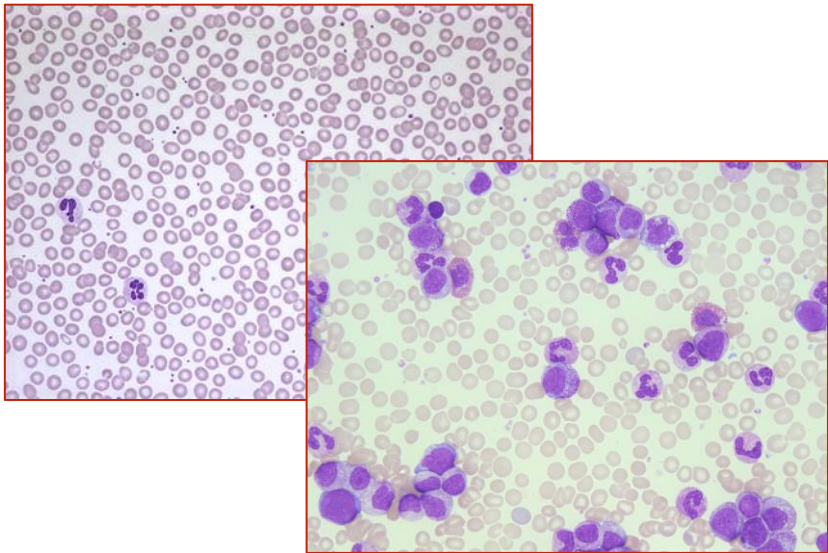
IL MONITORAGGIO DELLA MRD E LA DIGITAL PCR

Dr. Simona Bernardi

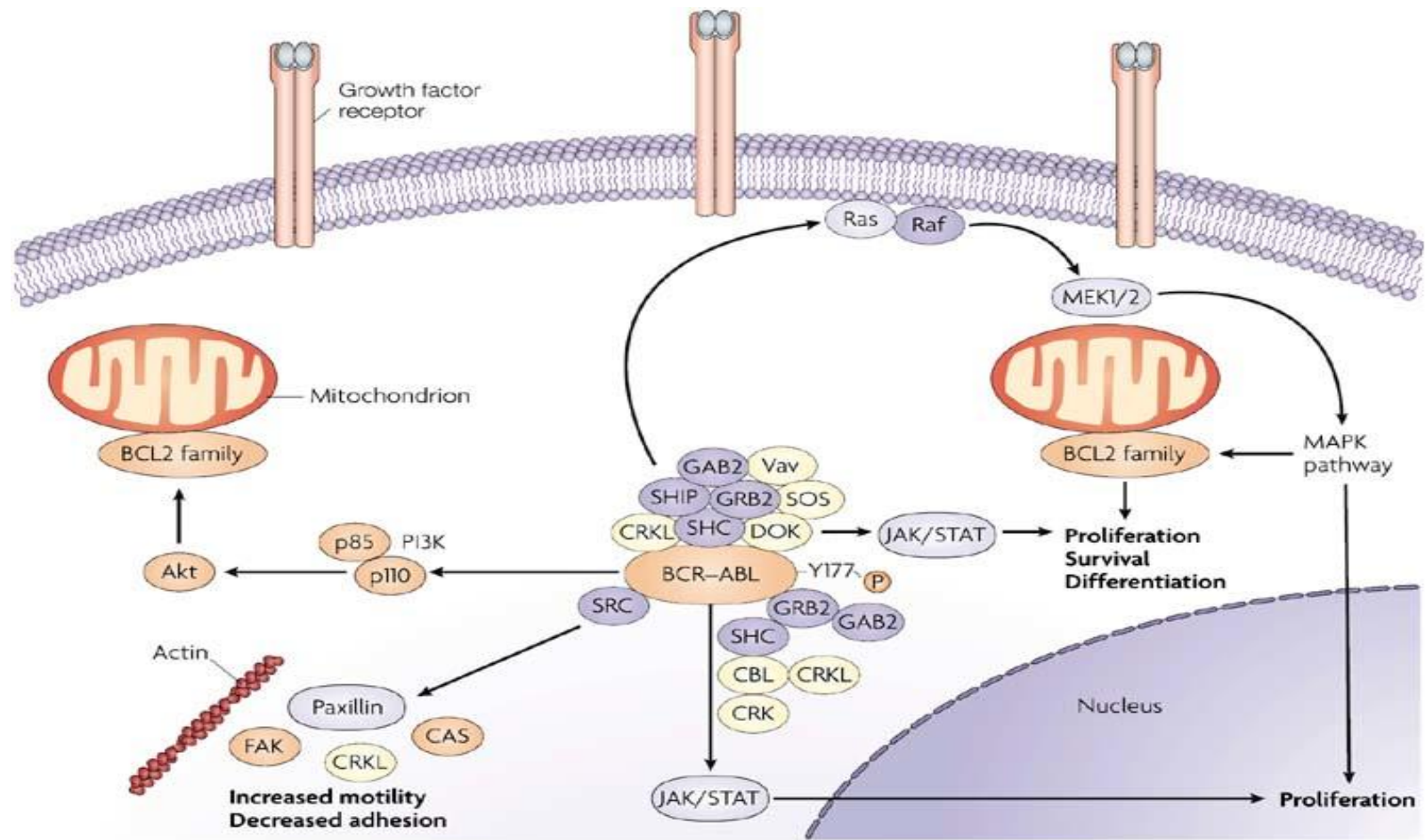
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CHRONIC MYELOID LEUKEMIA: BACKGROUND

- Philadelphia+ Chronic Myeloid Leukemia (Ph+ CML) is an hematologic malignancy arising from the chromosomal alteration t(9;22).
- The fusion gene BCR-ABL1 is generated by this translocation and it is the hallmark of Ph+ CML.

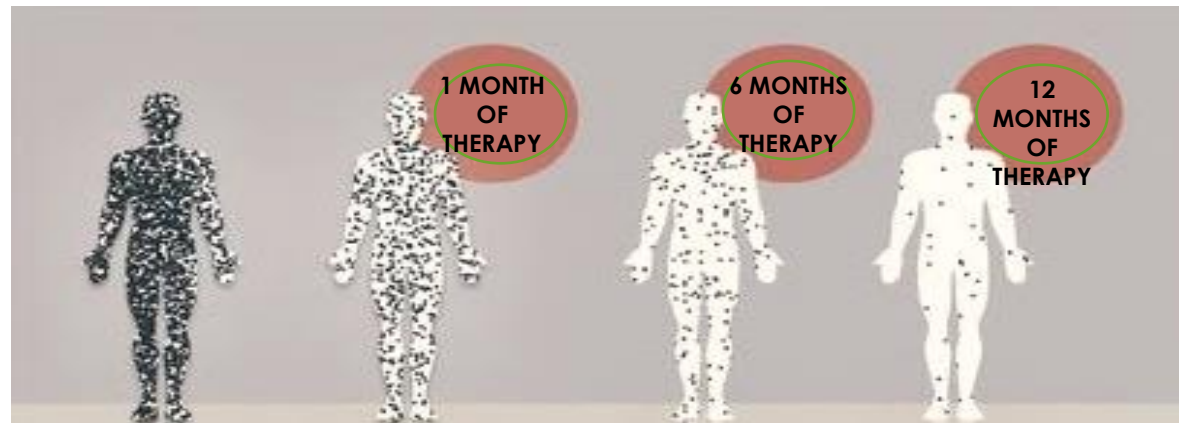


BCR-ABL1

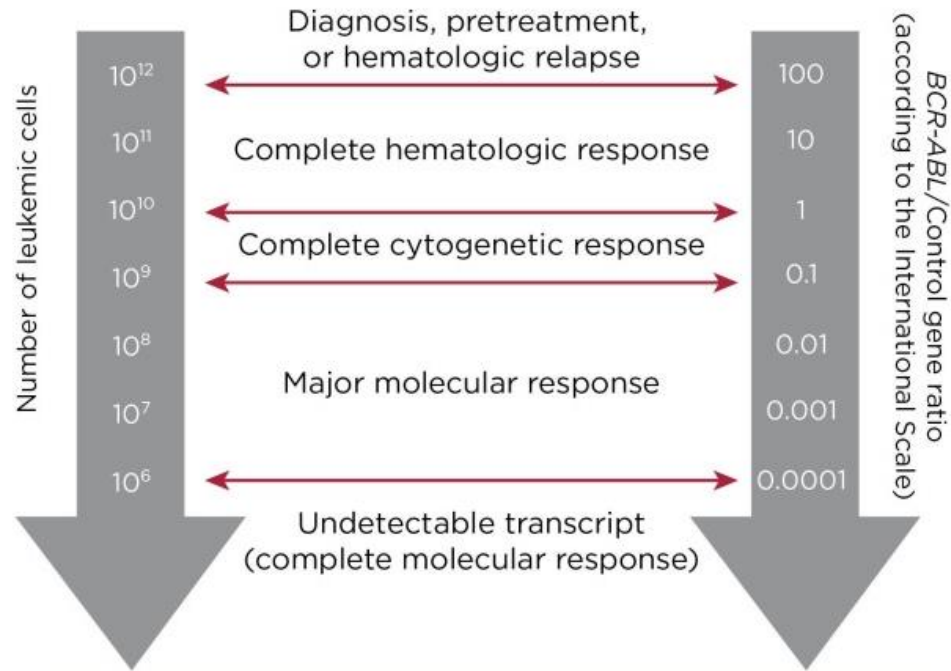


Ph+ CML THERAPY

- Tyrosine-kinase inhibitors (TKIs) molecules selectively targeted against BCR-ABL1 protein have been developed about 20 YEARS AGO.
- TKIs transformed Ph+ CML to a real chronic disease.
- The key goal of the TKIs treatment is to achieve a Minimal Residual Disease so low that CML may be clinically “cured”.



Ph+ CML MONITORING



Baccarani et al, 2006

	MMR	DMR		
	MR ^{3.0}	MR ^{4.0}	MR ^{4.5}	MR ^{5.0}
Minimum sum of ABL1 transcripts irrespective of whether BCR-ABL1 is detected or not	-	10.000 ABL1 copies	32.000 ABL1 copies	100.000 ABL1 copies
BCR-ABL1 IS levels for positive samples	≤ 0.1%	≤ 0.01%	≤ 0.0032%	≤ 0.001%

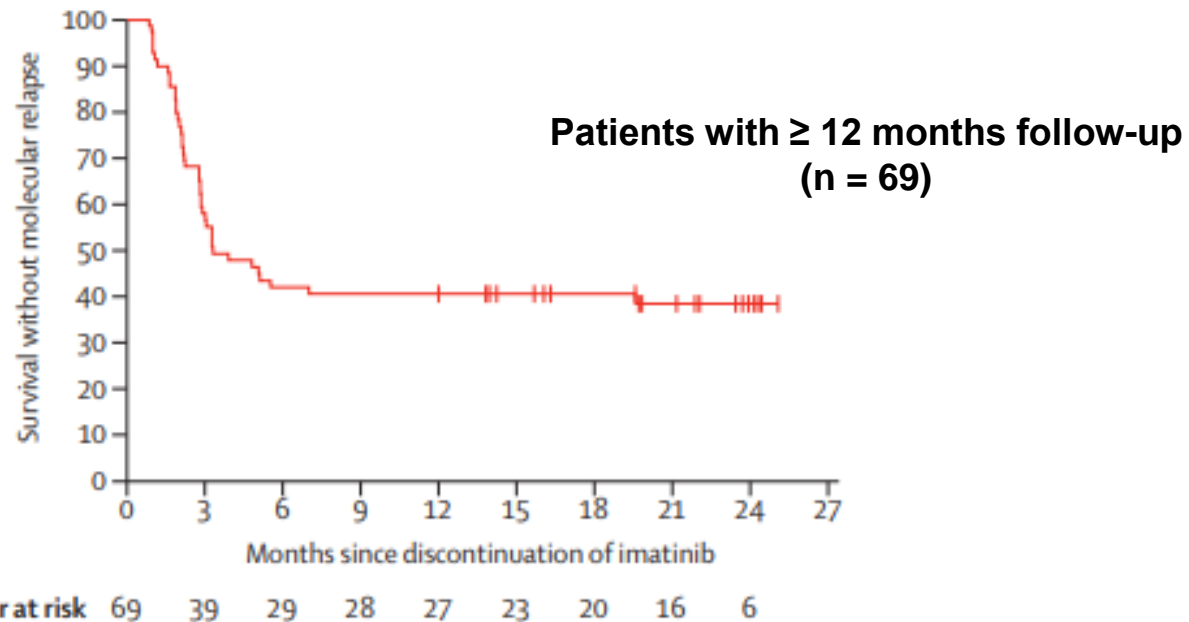
Current definition of MR classes following the last IS guide lines.

THE AVAILABILITY OF POWERFUL NEW GENERATION TKIs INCREASED THE ACHIEVEMENT OF DURABLE UNDETECTABLE DMR IN MANY PATIENTS.



...MIGHT THEY BE REALLY CURED?

THE *TREATMENT FREE REMISSION (TFR)*



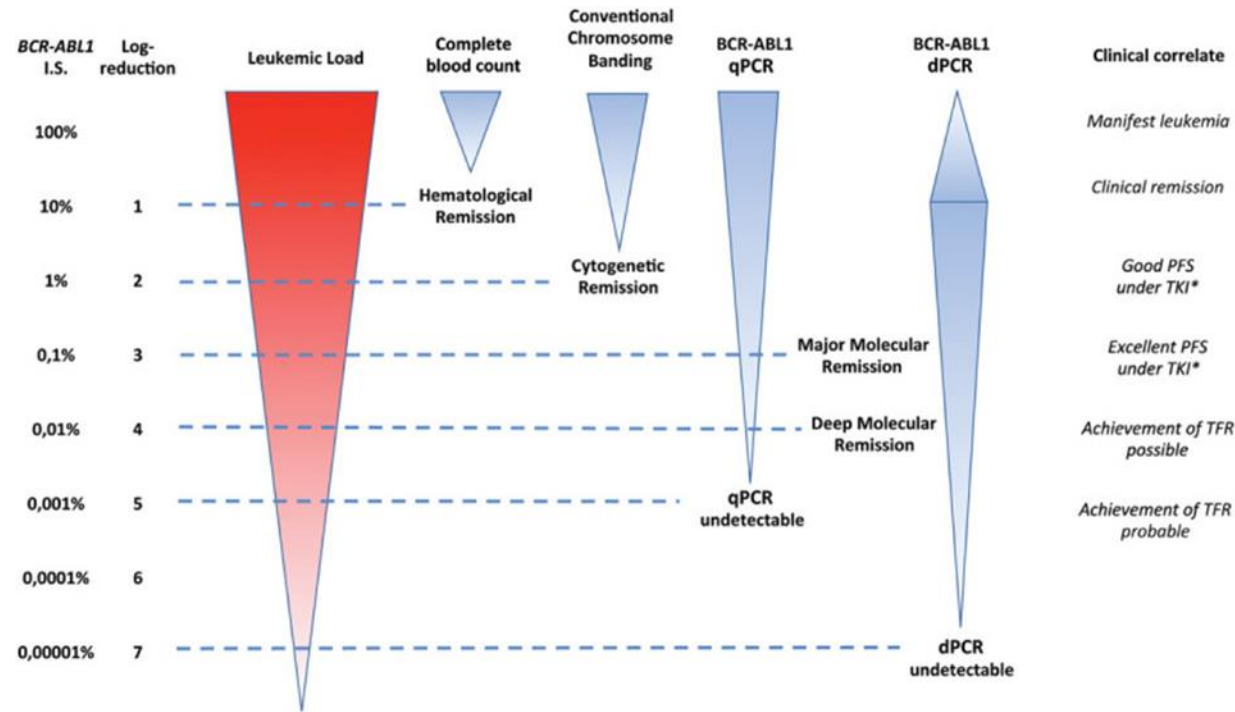
STIM study, Mahon et al, 2010

DEFINITION OF MOLECULAR RELAPSE:
loss of DMR or 1Log increased BLR-ABL1 transcript ratio for 2 consecutive quantification

TKI discontinuation has been conventionally conducted **IN THE REAL LIFE** for about 3 years

TKI discontinuation **IS NOT A TOTALLY SAFE POLICY**

NEW TOOLS FOR THE MRD: THE DIGITAL PCR

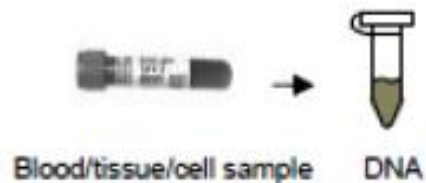


- Increased accuracy and precision
- Absolute quantification
- Reduced effect of PCR inhibitors
- Potentially improved sensitivity

BCR-ABL1 ABSOLUTE QUANTIFICATION

SAMPLE PREPARATION

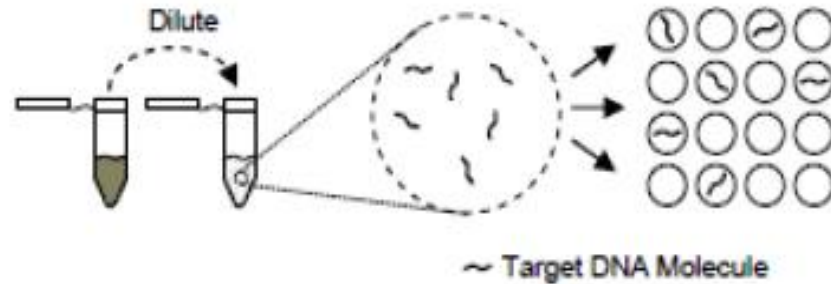
Illustration:



Description:

- Isolate nucleic acid starting material for analysis

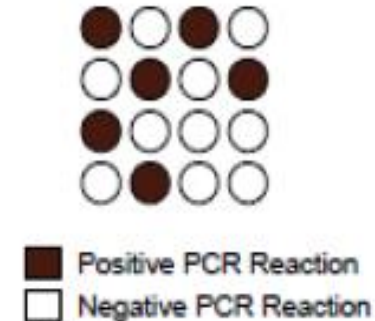
DILUTION AT 50ng/ μ l



- Dilute DNA to achieve a single copy of template per reaction once distributed

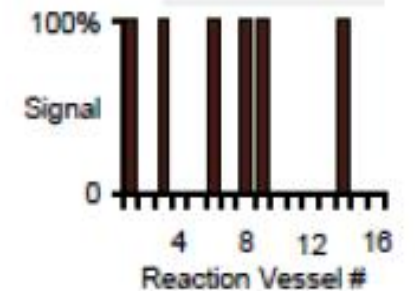
PARTITIONS by DROPLETS or CHIPS

REACTION OF AMPLIFICATION



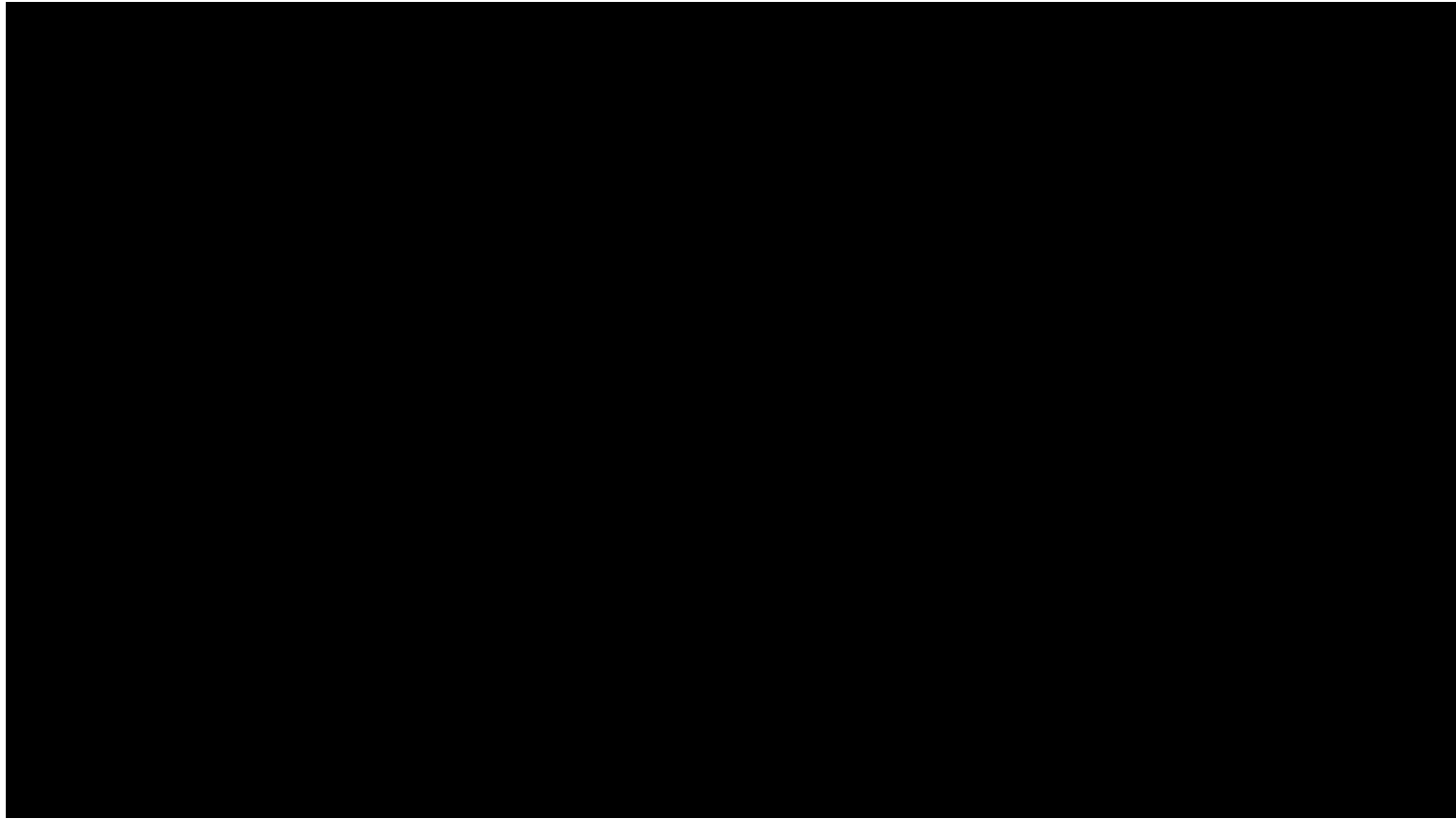
- Perform PCR reactions to amplify single template molecules


DATA ANALYSIS



- Determine the number of template molecules present

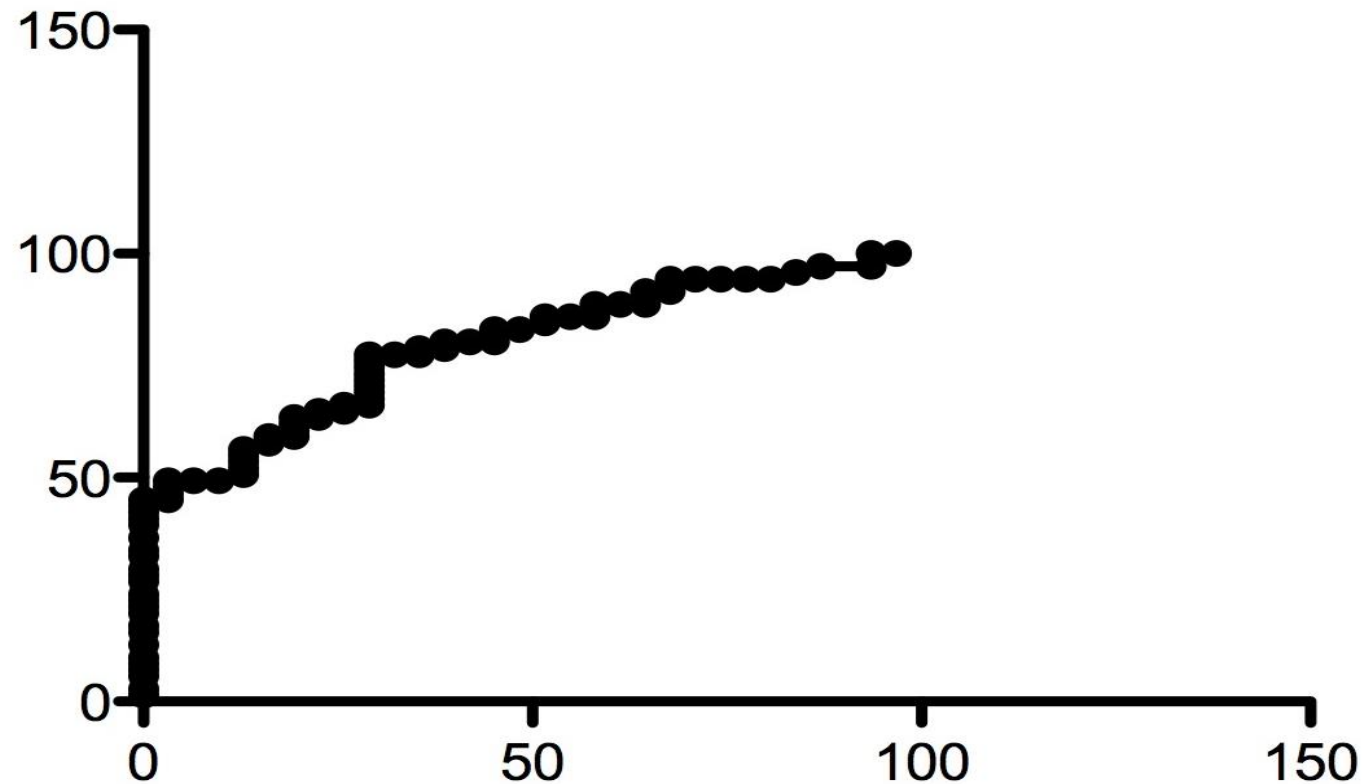






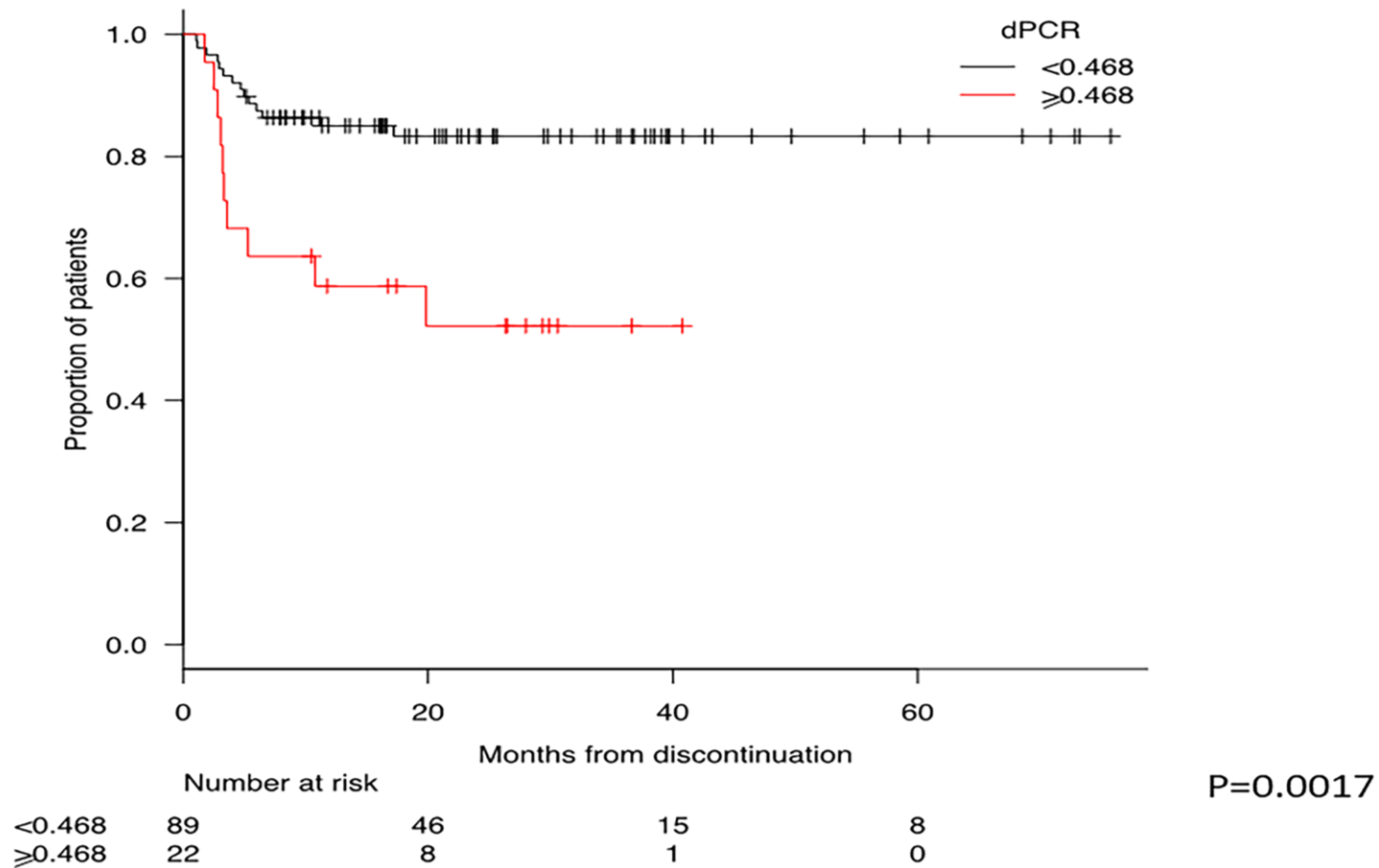
IS **DIGITAL PCR** SUITABLE FOR THE
IDENTIFICATION OF CML PATIENTS WHO
MAY SUCCESSFULLY ATTEMPT AN EARLY
TKI DISCONTINUATION?

NEW CUT-OFF



0,468 BCR-ABL1 copies/ul = 6 copies of transcript
(spec.= 71%, sens.= 78%, AUC=0,79)

BCR-ABL1 QUANTIFIED by digital PCR QS3D



BCR-ABL1 QUANTIFIABLE by both CHIP- and DROPLET-BASED dPCR

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DOI: 10.1002/cam4.2087

ORIGINAL RESEARCH

WILEY **Cancer Medicine**

Digital PCR improves the quantitation of DMR and the selection of CML candidates to TKIs discontinuation

Simona Bernardi^{1,2}  | Michele Malagola¹ | Camilla Zanaglio^{1,2} | Nicola Polverelli¹  |
Elif Dereli Eke^{1,2}  | Mariella D'Adda³ | Mirko Farina³ | Cristina Bucelli⁴ |
Luigi Scaffidi⁵ | Eleonora Toffoletti⁶ | Clara Deambrogi⁷ | Fabio Stagno⁸ |
Micaela Bergamaschi⁹ | Luca Franceschini¹⁰ | Elisabetta Abruzzese¹¹ |
Maria Domenica Divona¹⁰ | Marco Gobbi⁹ | Francesco Di Raimondo⁸ |
Gianluca Gaidano⁷ | Mario Tiribelli⁶ | Massimiliano Bonifacio⁵  |
Chiara Cattaneo³  | Alessandra Iurlo⁴  | Domenico Russo¹

Clinical Trials: Targeted Therapy

Clinical
Cancer
Research



Evaluation of Residual Disease and TKI Duration Are Critical Predictive Factors for Molecular Recurrence after Stopping Imatinib First-line in Chronic Phase CML Patients

Franck Emmanuel Nicolini^{1,2,3}, Stéphanie Dulucq^{3,4}, Lisa Boureau⁴, Pascale Cony-Makhoul^{3,5}, Aude Charbonnier^{3,6}, Martine Escoffre-Barbe^{3,7}, Françoise Rigal-Huguet^{3,8}, Valérie Coiteux^{3,9}, Bruno Varet^{3,10}, Viviane Dubruille^{3,11}, Pascal Lenain^{3,12}, Philippe Rousselot^{3,13}, Delphine Rea^{3,14}, Agnès Guerci-Bresler^{3,15}, Laurence Legros^{3,16}, Jixing Liu^{3,17}, Martine Gardembas^{3,18}, Jean-Christophe Ianotto^{3,19}, Pascal Turlure^{3,20}, Hyacinthe Johnson-Ansah^{3,21}, Juliana Martiniuc²², Henry Jardej²³, Bertrand Joly²⁴, Patricia Zunic^{3,25}, Tawfiq Henni²⁶, Bruno Villemagne²⁷, Marc G. Berger^{3,28}, Emilie Cayssials^{3,29}, François Guilhot^{3,29}, Fabrice Larosa^{3,30}, Joëlle Guilhot^{3,29}, Gabriel Etienne^{3,31}, and François-Xavier Mahon^{3,31}

RESEARCH ARTICLE

Age and dPCR can predict relapse in CML patients who discontinued imatinib: The ISAV study

Silvia Mori,¹ Elisabetta Vagge,^{1†} Philipp le Coutre,² Elisabetta Abruzzese,³ Bruno Martino,⁴ Ester Pungolino,⁵ Chiara Elena,⁶ Ivana Pierri,⁷ Sarit Assouline,⁸ Anna D'Emilio,⁹ Antonella Gozzini,¹⁰ Pilar Giraldo,¹¹ Fabio Stagno,¹² Alessandra Iurlo,¹³ Michela Luciani,¹ Giulia De Riso,¹ Sara Redaelli,¹ Dong-Wook Kim,¹⁴ Alessandra Pirola,¹ Caterina Mezzatesta,¹ Anna Petroccione,¹⁵ Agnese Lodolo D'Oria,¹⁵ Patrizia Crivori,¹⁵ Rocco Piazza,¹ and Carlo Gambacorti-Passerini^{1,16*}

AJH



Hematological
ONCOLOGY

LETTER TO THE EDITOR

Digital droplet PCR at the time of TKI discontinuation in chronic-phase chronic myeloid leukemia patients is predictive of treatment-free remission outcome

Gioia Colafigli, Emilia Scalzulli, Marika Porrazzo, Daniela Diverio, Maria Giovanna Loglisci, Roberto Latagliata, Anna Guarini, Robin Foà, Massimo Breccia ✉

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Peer Review:

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Funding information: Associazione Italiana per la Ricerca sul Cancro (AIRC), Grant/Award Number: 21198

META-ANALYSIS: the DESIGN by PRISMA-IPD guideline

1. Eligibility criteria: Adult CP-CML patients who discontinued TKI therapy, with a prior BCR-ABL1 digital PCR assessment

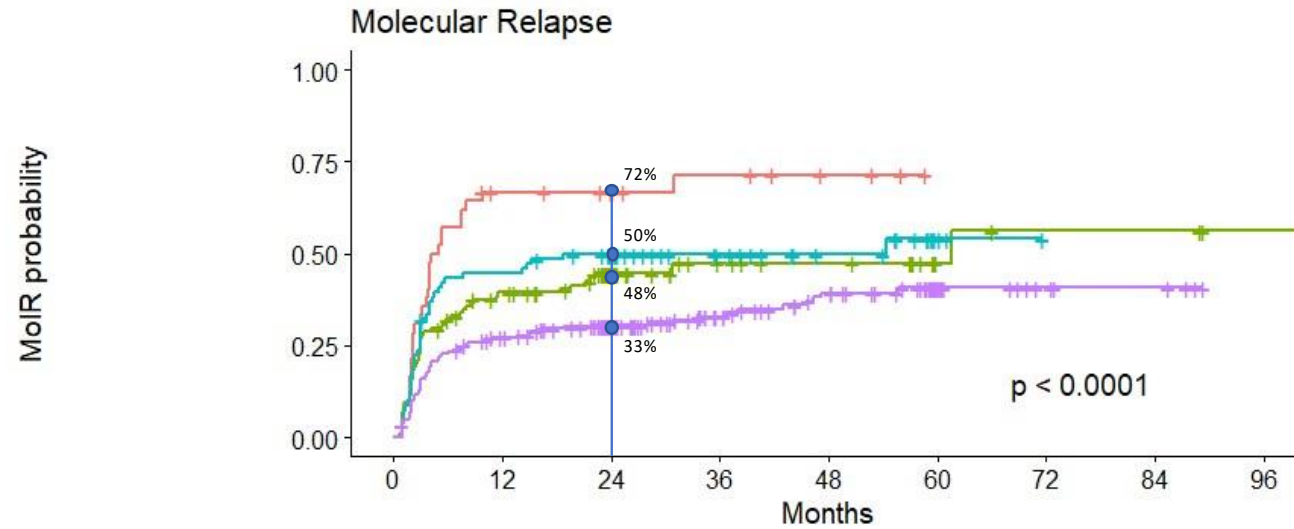
2. Identifying studies: Five published and one unpublished cohort

3. Collecting and pooling patient-level data
Digital PCR result dichotomized

4. Data-analysis: one-stage approach correcting for study heterogeneity including a frailty term in regression models

Total patient number: 483

INDIVIDUAL PATIENT DATA META-ANALYSIS: PRELIMINARY RESULTS



Number at risk

Strata	0	12	24	36	48	60	72	84	96
Treat <6y and dPCR above	42	12	10	6	3	0	0	0	0
Treat <6y and dPCR below	118	65	36	17	14	6	4	4	2
Treat >6y and dPCR above	81	44	33	20	13	3	0	0	0
Treat >6y and dPCR below	240	165	118	73	53	22	6	4	0

Months

The STANDARDIZATION



Article

Alignment of Qx100/Qx200 Droplet Digital (Bio-Rad) and QuantStudio 3D (Thermofisher) Digital PCR for Quantification of BCR-ABL1 in Ph+ Chronic Myeloid Leukemia

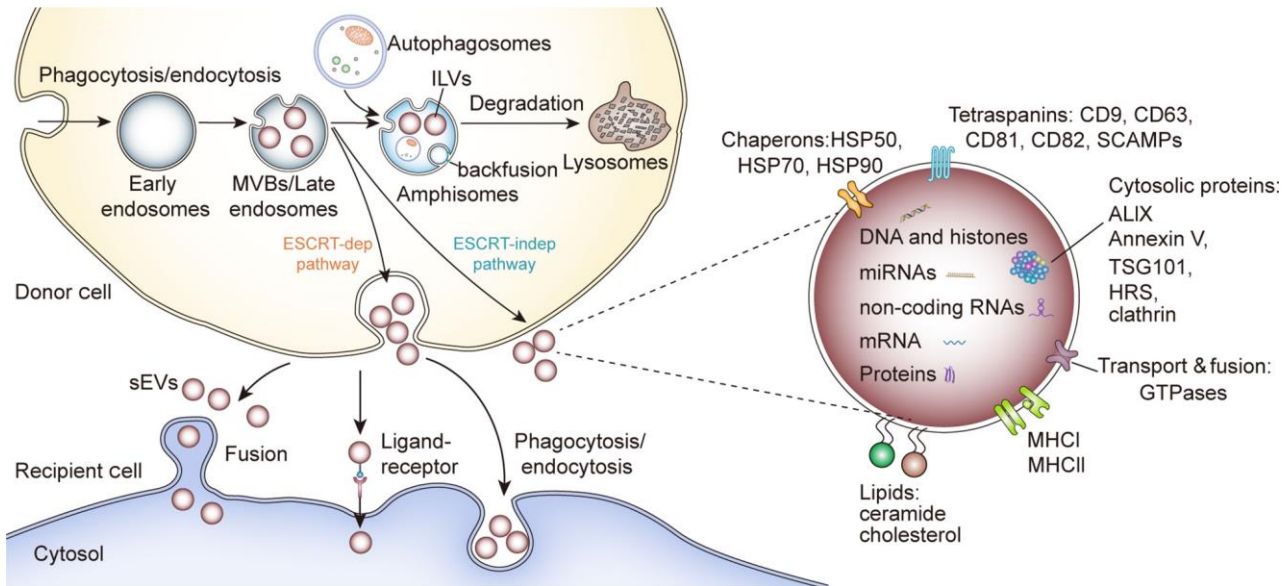
Carmen Fava ^{1,*}, Simona Bernardi ², Enrico Marco Gottardi ³, Roberta Lorenzatti ³, Laura Galeotti ⁴, Francesco Ceccherini ⁴, Francesco Cordoni ⁴, Filomena Daraio ³, Emilia Giugliano ³, Aleksandar Jovanovski ¹, Jessica Petiti ¹, Marta Varotto ⁵, Davide Barberio ⁵, Giovanna Rege-Cambrin ³, Paola Berchialla ¹, Veronica Sciannameo ⁶, Michele Malagola ², Giuseppe Saglio ¹ and Domenico Russo ²

First study about the interlaboratory standardization of BCR-ABL1 transcript quantification by dPCR:

- chip-based and droplet-based platforms present compatible results
- An alignment factor is computable and helps in the improvement of the quantifications' comparability
- It opens to further studies for international standardization, considering also additional platforms



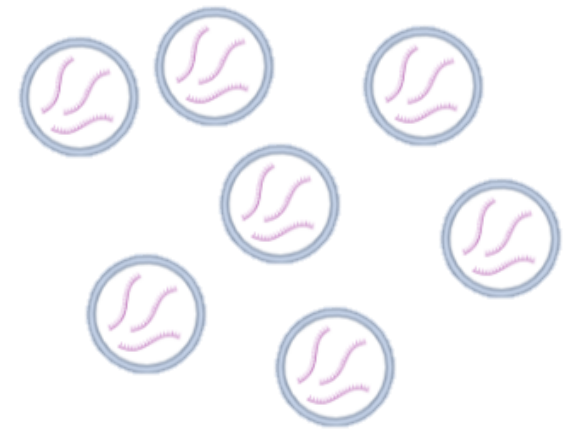
Small EXTRACELLULAR VESICLES (sEVs)



sEVs in Ph⁺ CML:

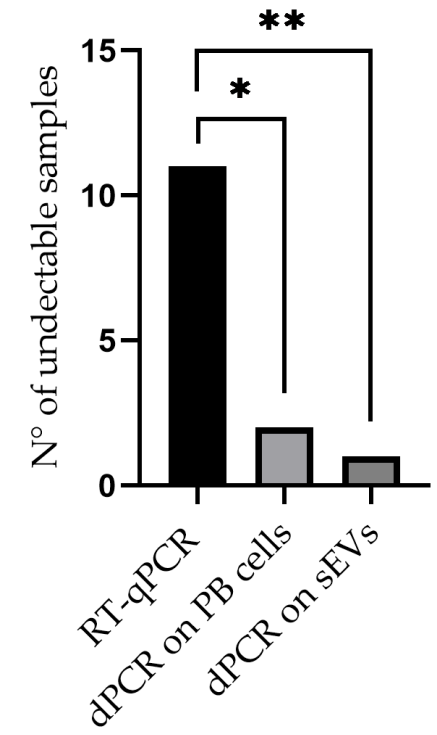
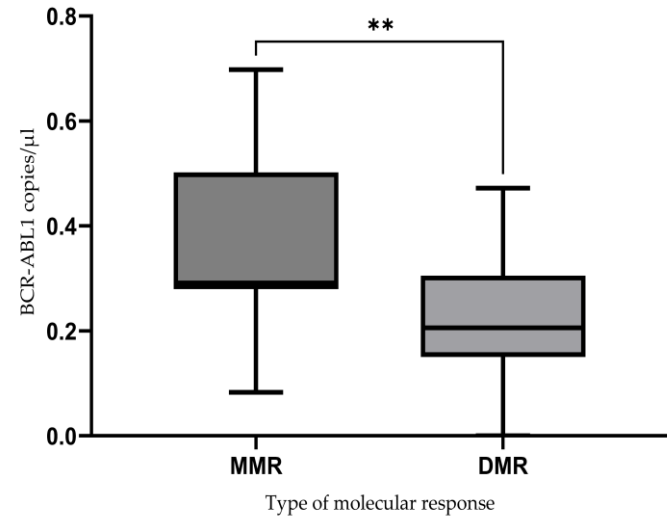
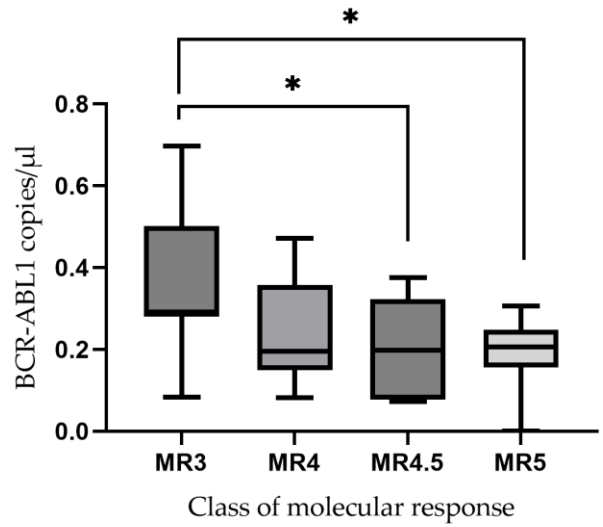
- LEUKEMIC CELLS PROLIFERATION
- PRO-LEUKEMIC MICROENVIRONMENT
- ANGIOGENESIS

What about *BCR-ABL1*⁺ sEVs?



BCR-ABL1⁺ vesicles

BCR-ABL1+ sEVs: PRELIMINARY DATA



CONCLUSIONS

- MRD monitoring in Ph+ CML patients MUST BE IMPROVED
- dPCR IS A VALUABLE TOOL FOR MRD MONITORING IN ADULT PATIENTS AFFECTED BY Ph+ CML
- dPCR HELPS IN THE SELECTION OF PATIENTS FOR THERAPY DISCONTINUATION
- dPCR STANDARDIZATION IS POSSIBLE AND OPENS TO A WIDE CLINICAL APPLICATION
- WOULD NEW BIOLOGICAL MATRIXES IMPROVE THE DETECTION OF BCR-ABL1+ LEUKEMIC CELLS?

