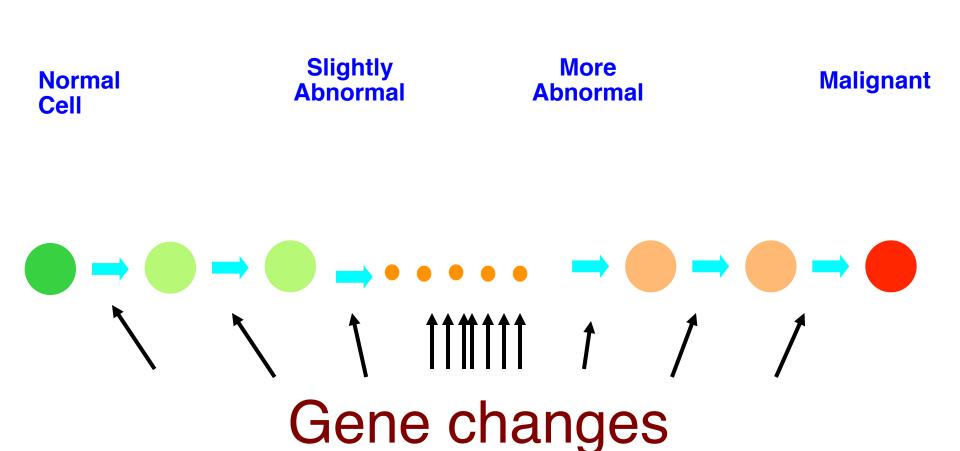
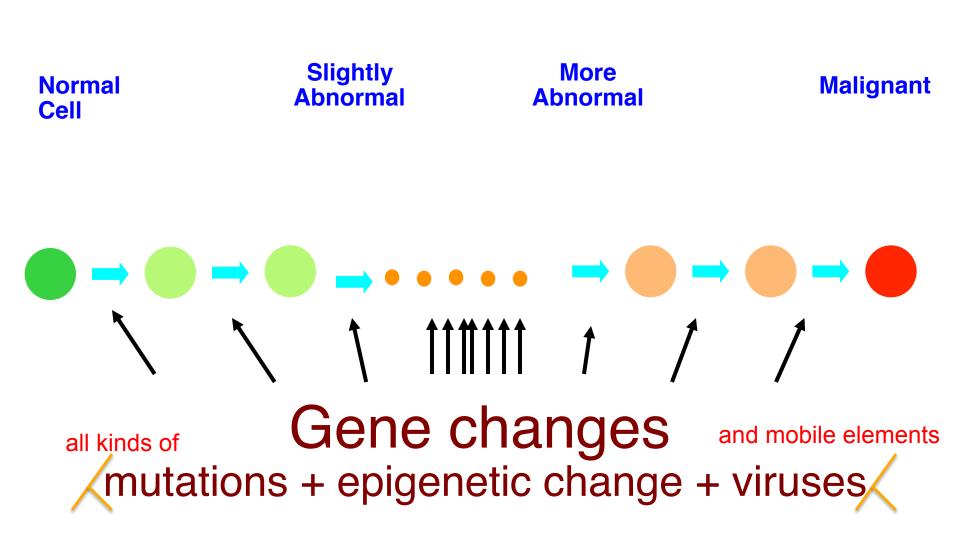


Paul Edwards

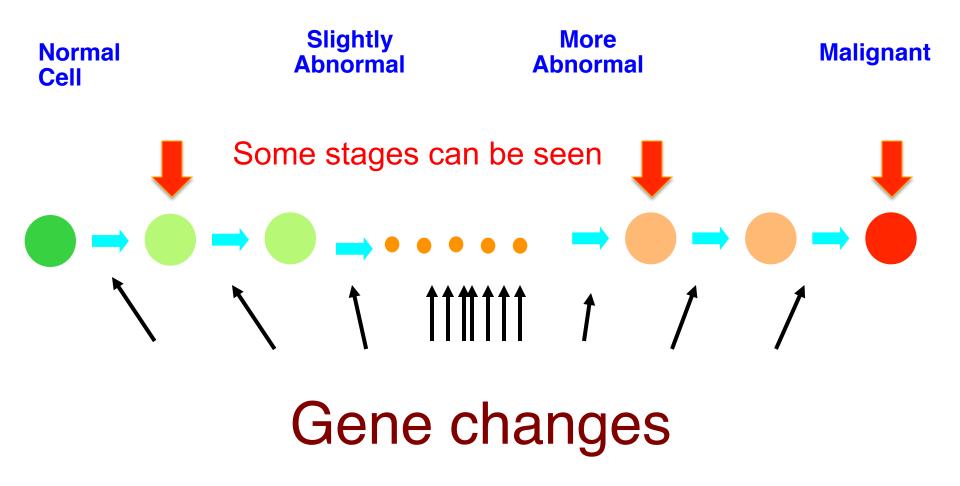
Department of Pathology and CRUK Cambridge Institute, University of Cambridge

1. How does cancer develop?



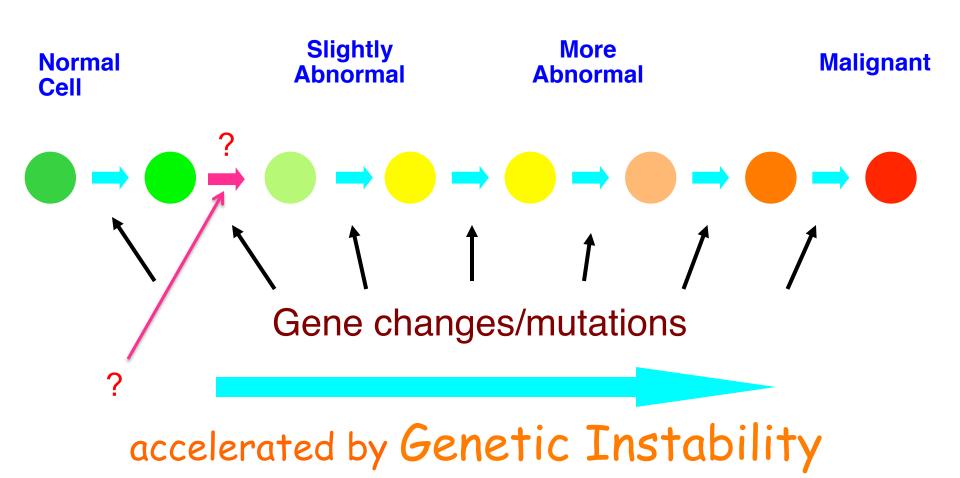


Cancer develops in multiple stages

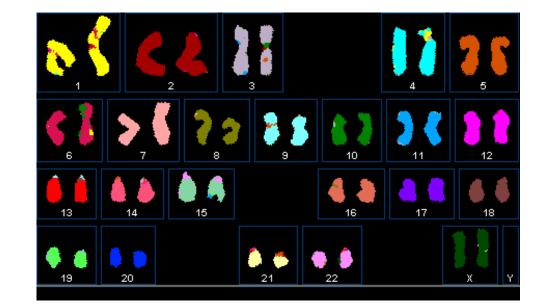


Colon/rectum cancer: malignant Malignant

Precursor



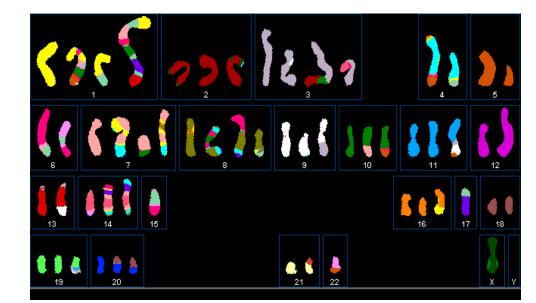
Many different types of Genetic Instability



chromosomes stable

Sequence instability

100X rate sequence mutations



chromosome instability 'CIN'

Sequences (nearly) stable

Tumour A

Tumour B

How could genetic instability come about?

	Sequence instabi <mark>lity</mark>		chromosome instability				
Failure to repair DNA damage	\checkmark	e.g. mism repair	atch	\checkmark	e.g. E	BRCA1, BF	RCA2
Errors in replication or mitosis	\checkmark	e.g. polyn epsilon m	nerase utant		e.g. la chror	agging nosomes	

.....and there is probably *Epi*genetic instability as well e.g. DNMT, IDH mutations

=> Genetic instability may determine the pattern of mutation and be a target for therapy, so it's one of the things we can look for

hereditary predisposition

NOT QUITE Normal Cell

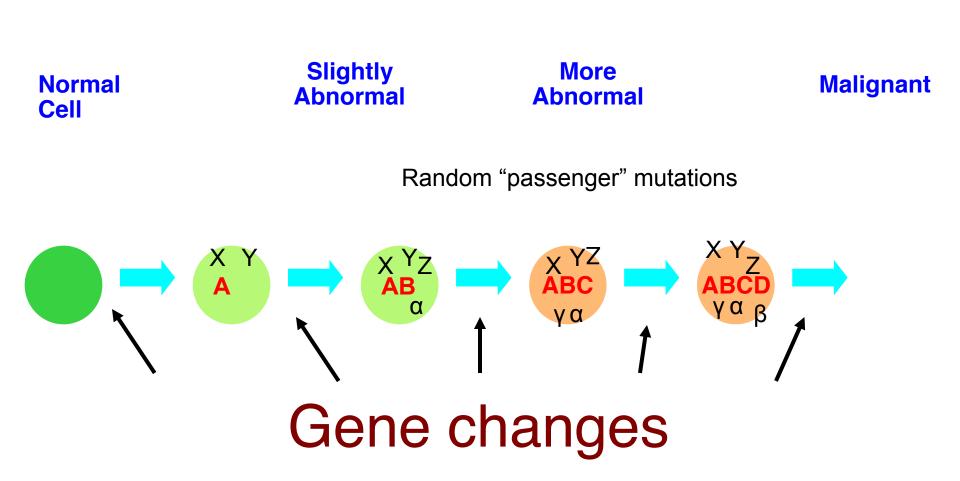
Slightly Abnormal

More Abnormal

Malignant

Genetic Instability

Passengers versus Drivers



We usually distinguish gain of function and loss of function mutations:

Oncogenes and Tumour Suppressor genes

Definitions vary but one is:

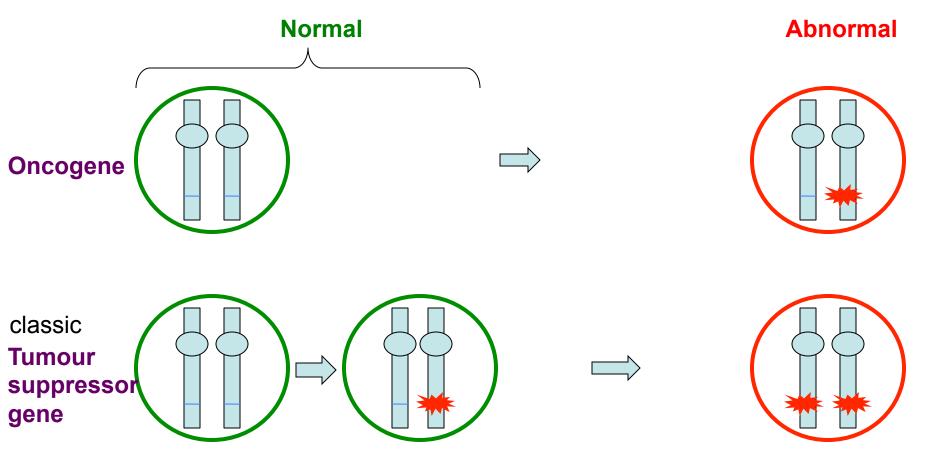
Oncogene mutations are overactivity mutations

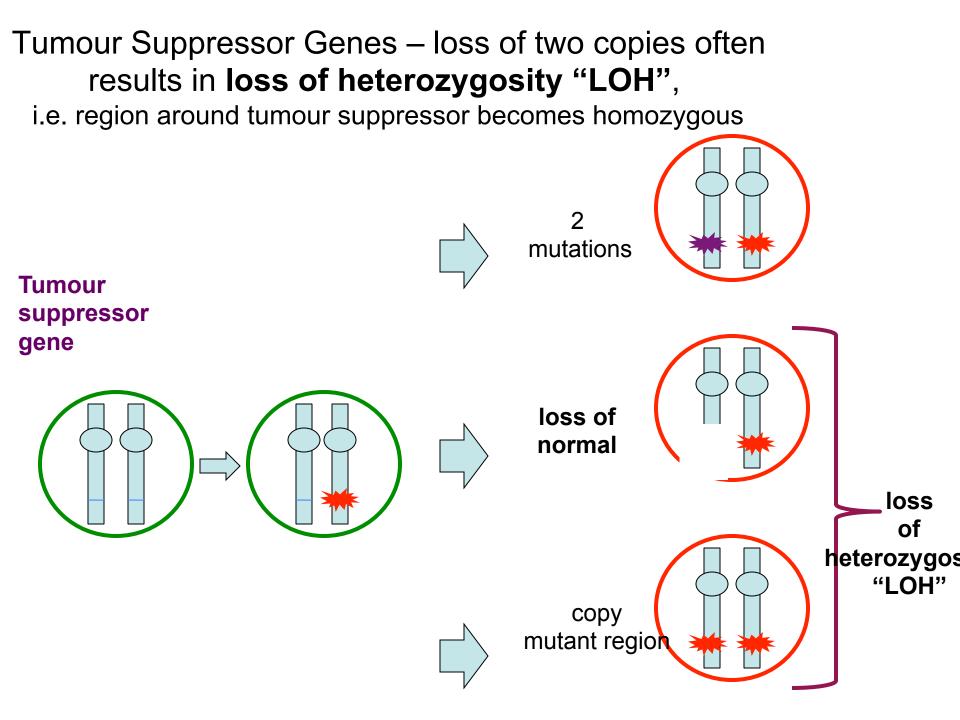
- dominant in the cell, I.e. only one copy mutated

Tumour Suppressor Gene mutations are loss of function mutations

- generally both copies are mutated, recessive in the cell

Oncogenes versus Tumour Suppressor Genes



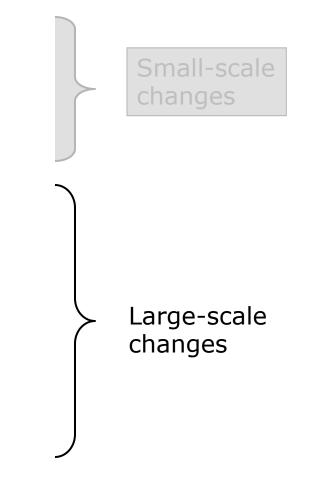


2. What do cancer mutations look like?

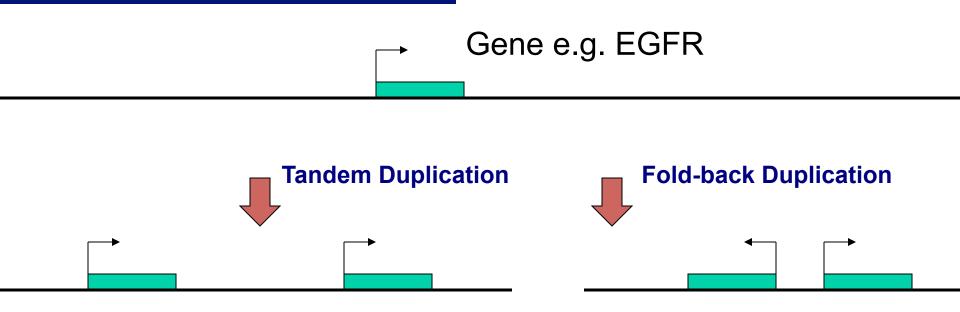


STRUCTURAL changes

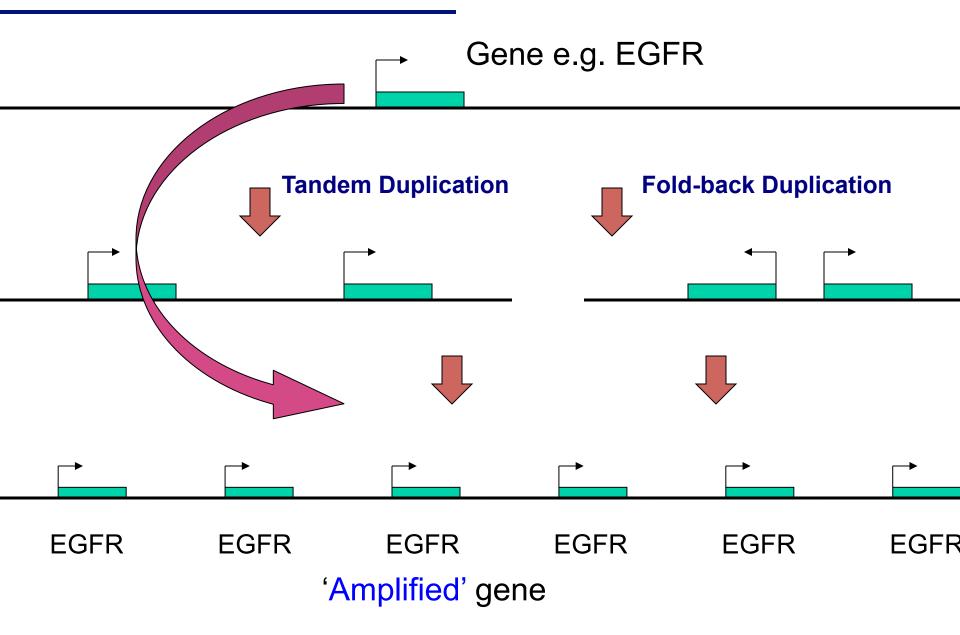
- -Deletion
- -Duplication, Tandem or Foldback
- -Amplification (lot of copies of gene)
- -Inversion
- -Chromosome translocation
- -Mobile element insertion



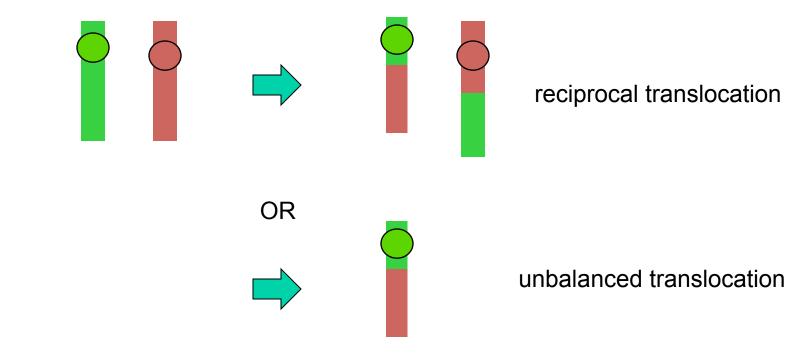
Duplication and amplification



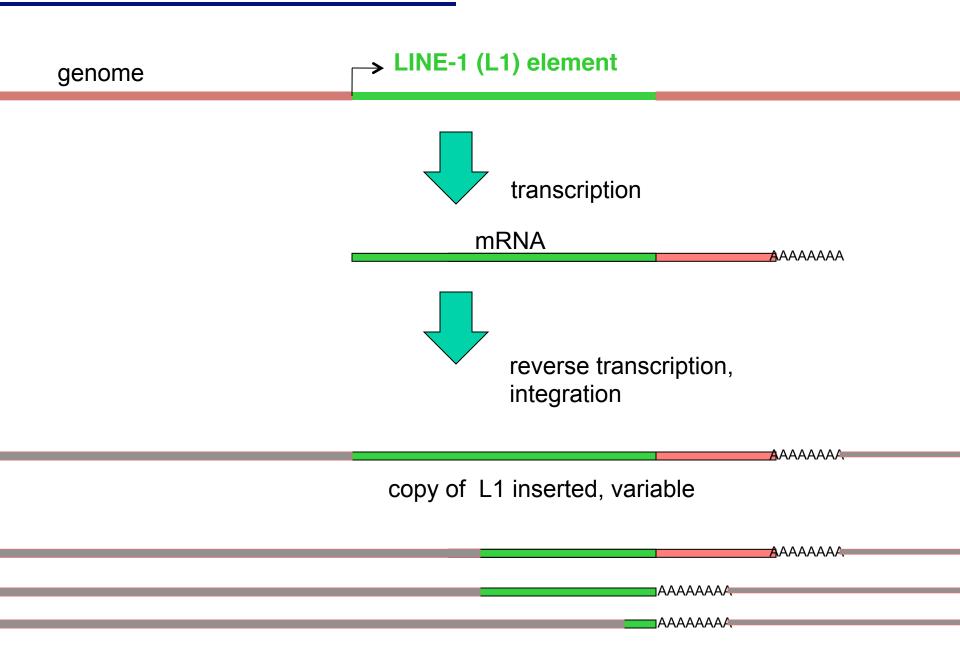
Duplication and amplification



Chromosome translocation



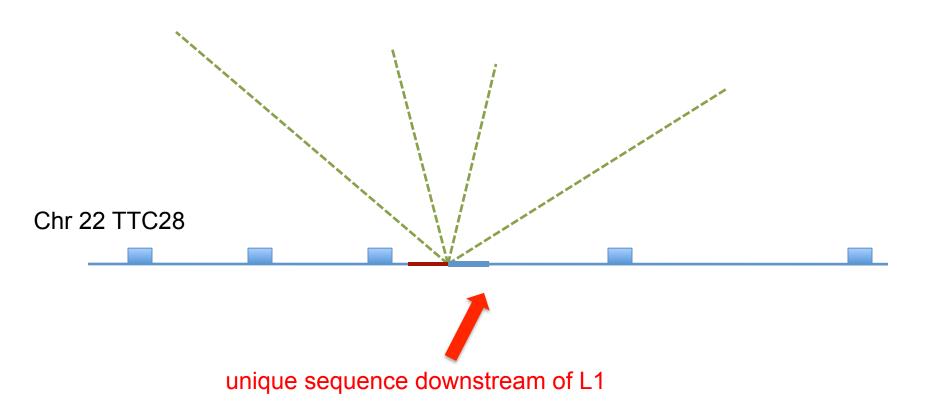
Mobile element insertion



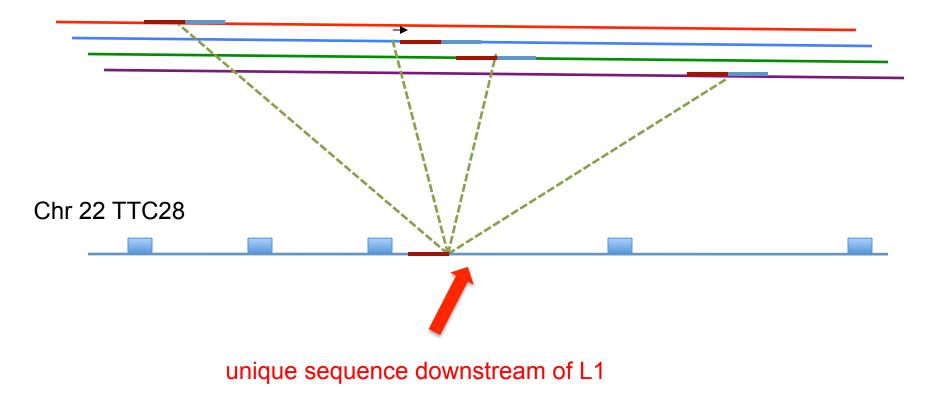
L1 transduction looks like multiple translocations



L1 transduction looks like multiple translocations



L1 transduction looks like multiple translocations

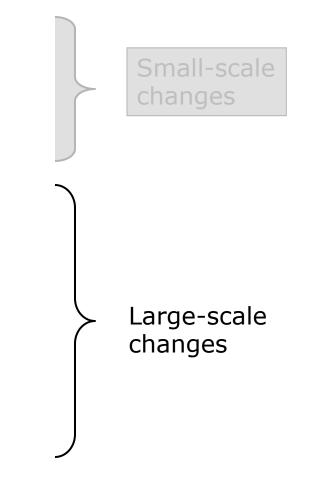


2. What do cancer mutations look like?



STRUCTURAL changes

- -Deletion
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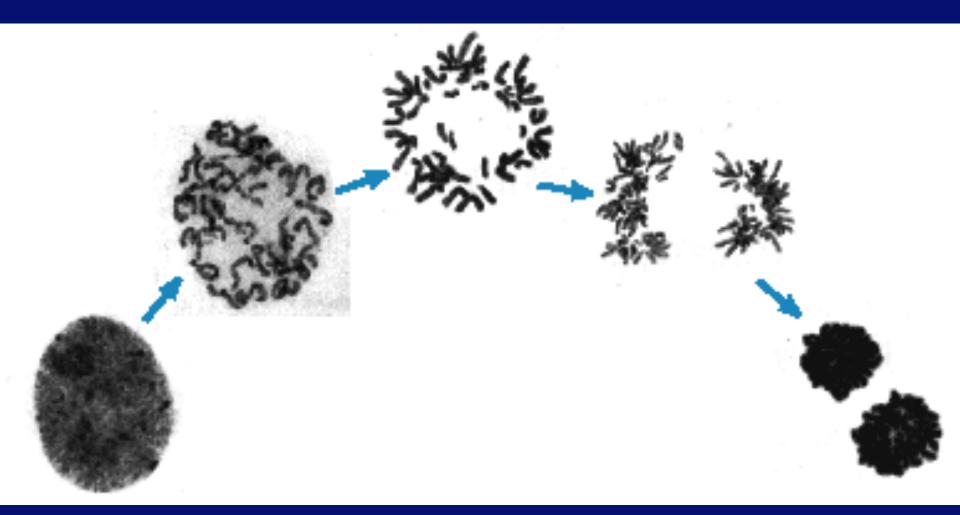


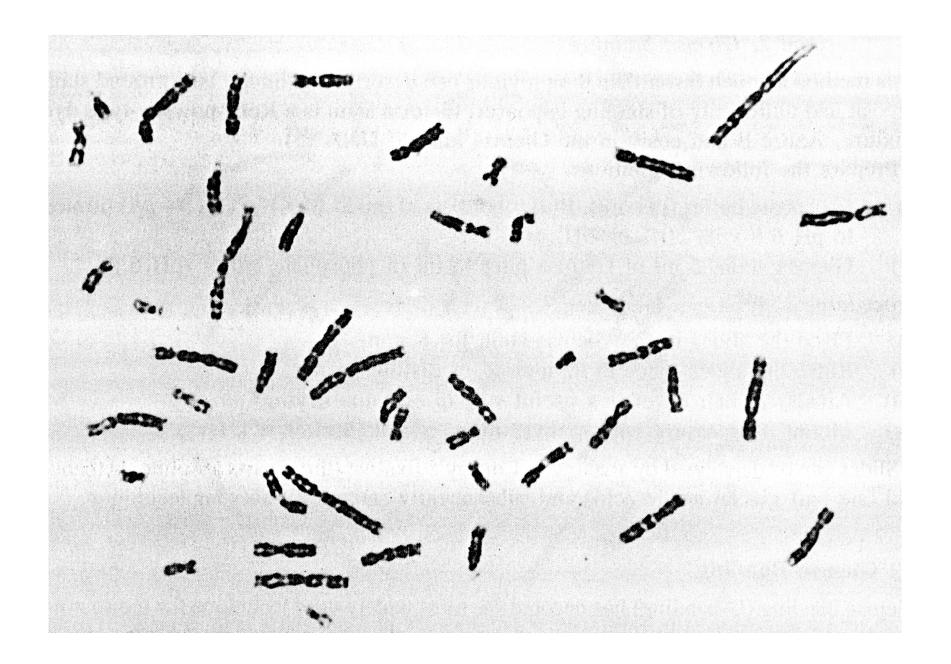
3.Methods available

Sequencing: PCR+Sanger, Illumina, long-read methods Cytogenetics FISH Chromsosome sorting Arrays: CGH, SNP arrays (mainly copy number counting) Mapping, HAPPY mapping and 10X

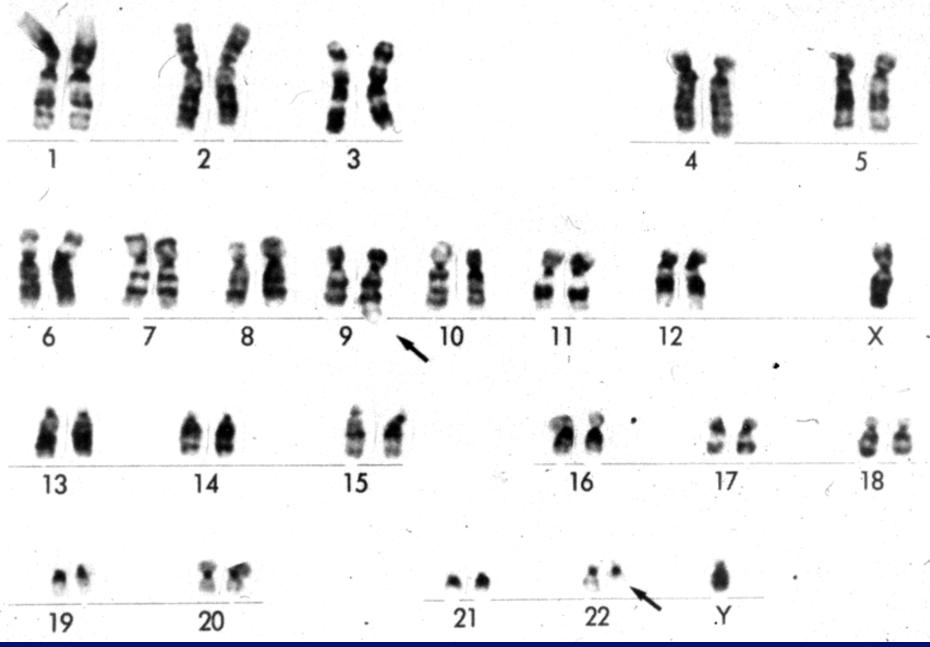
Epigenetics: bisulphite sequencing

Metaphase chromosomes

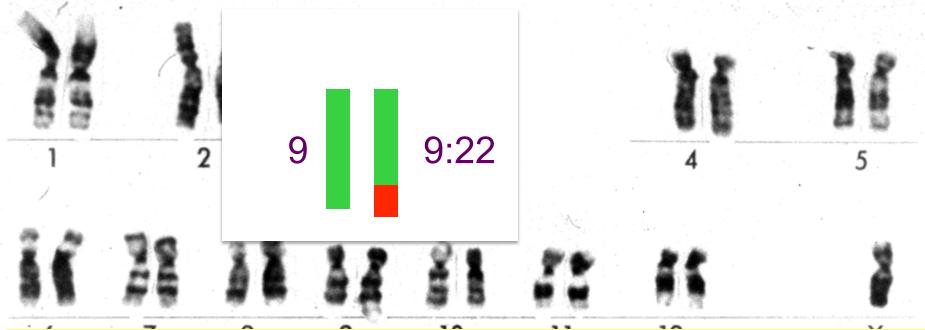




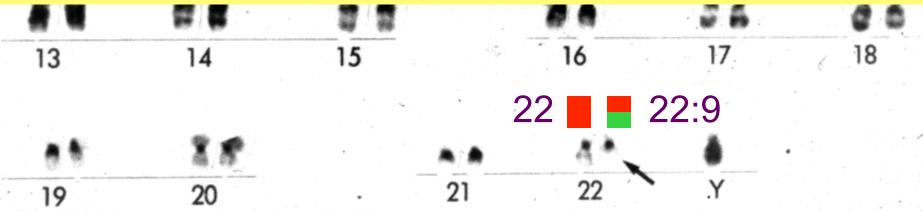
Philadelphia chromosome



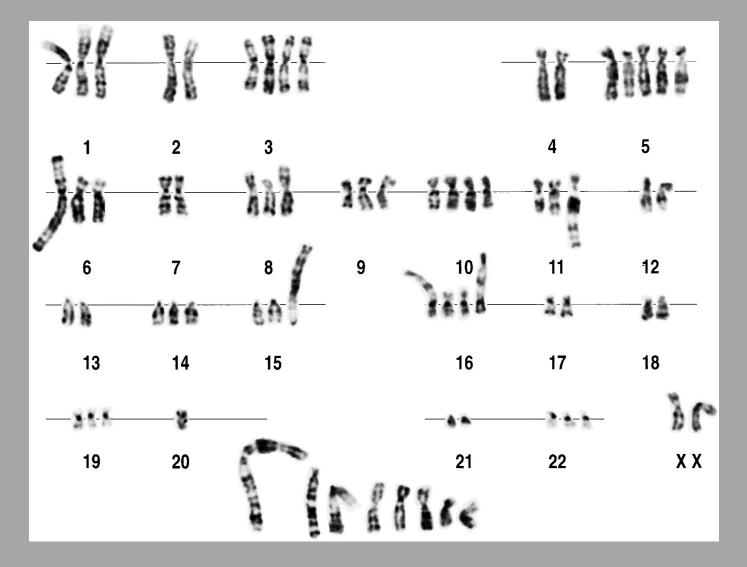
Philadelphia chromosome



(reciprocal) chromosome translocation t(9:22) of chronic myeloid leukaemia, creates *BCR-ABL*



Breast Cancer Karyotype, from primary culture

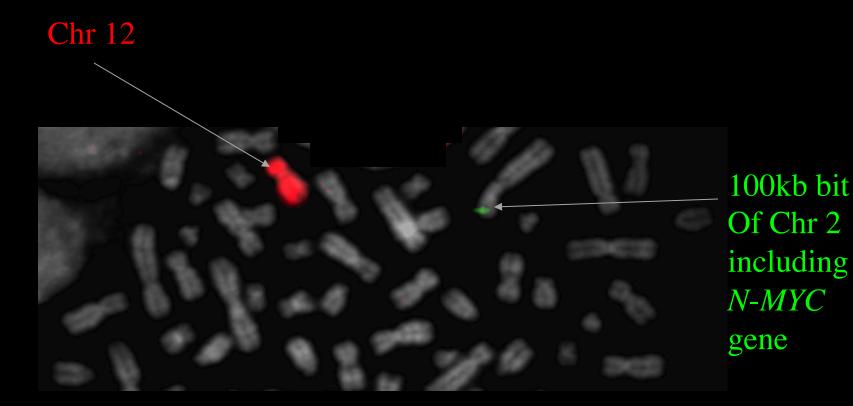


Pandis et al (1998) Genes Chromosomes Cancer 22, 122

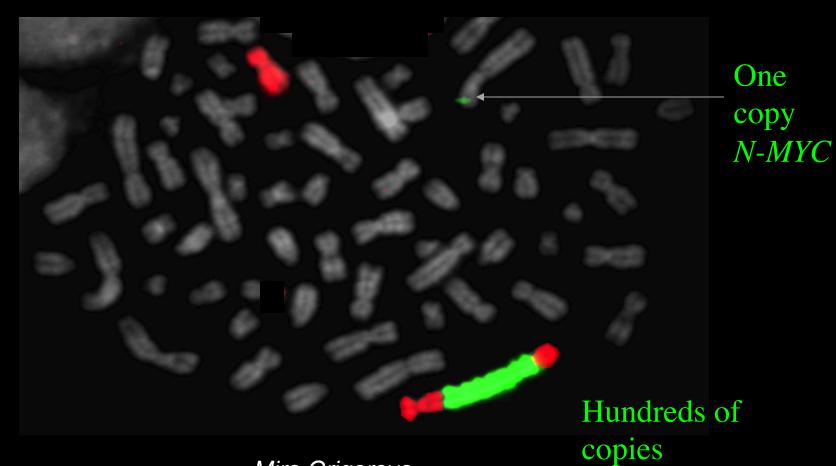
' FISH' fluorescence-in situ hybridisation



' FISH' fluorescence-in situ hybridisation

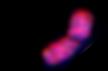


'Amplification' of N-MYC



Mira Grigorova







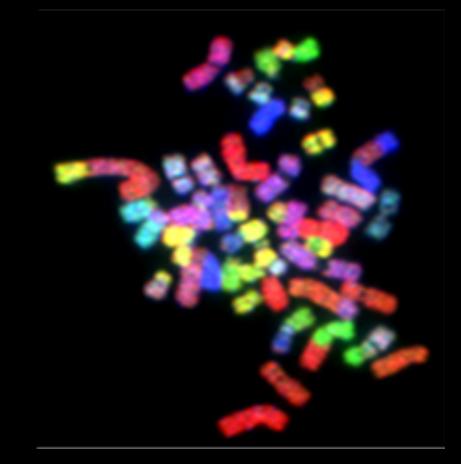




Joanne Davidson

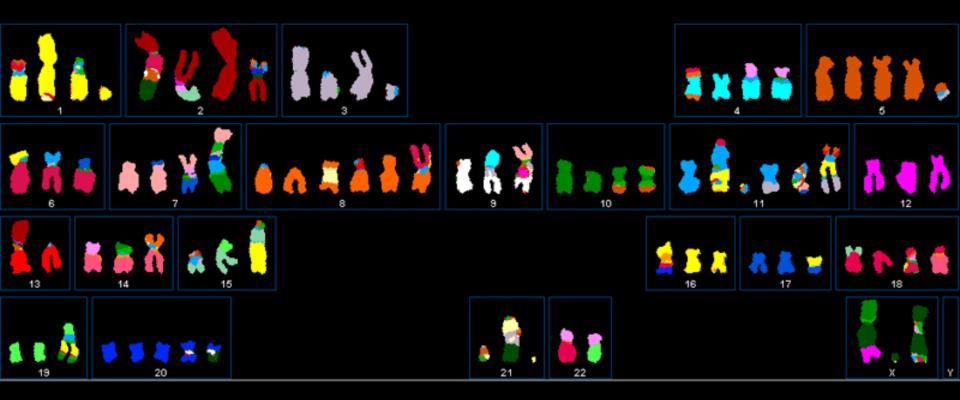
'SKY" or 'M-FISH'





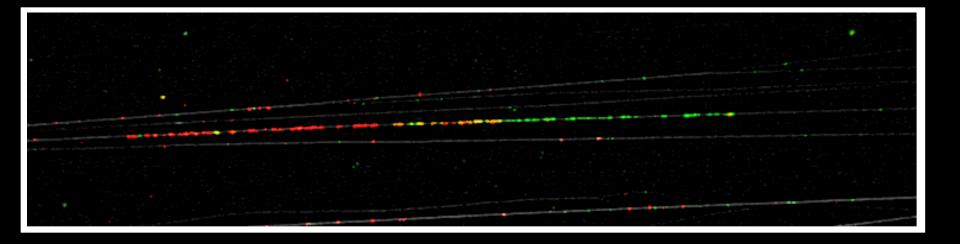
Joanne Davidson

Breast Cancer Cell Line HCC1143



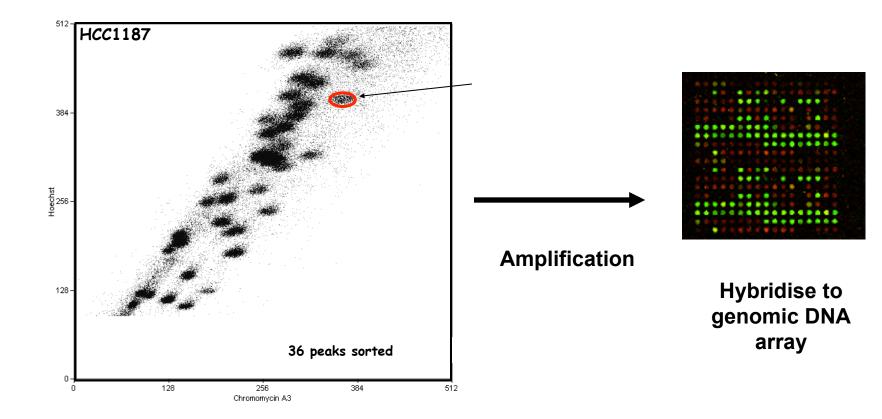
Mira Grigorova





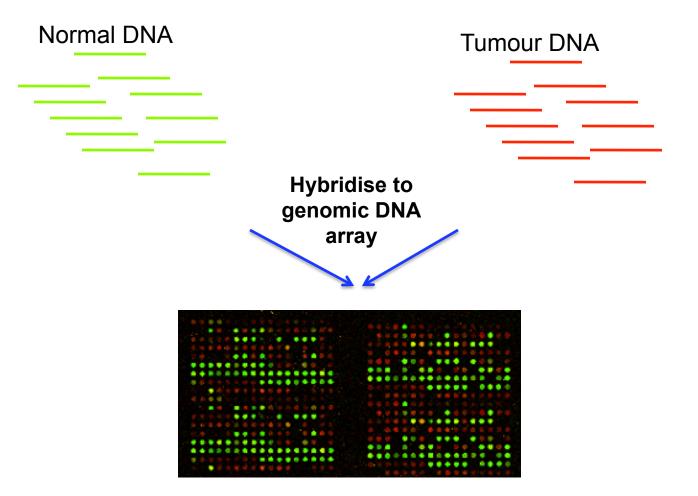


Chromosome sorting and Array Painting



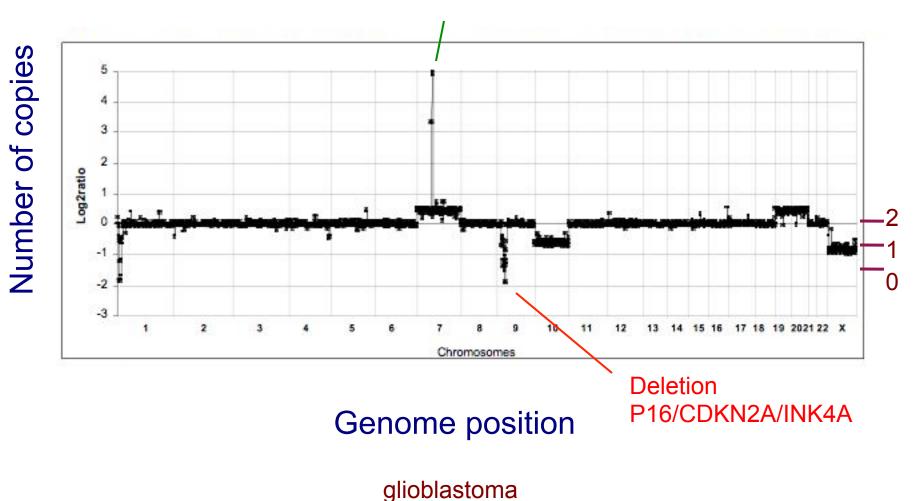
Karen Howarth

Copy number by hybridization: CGH



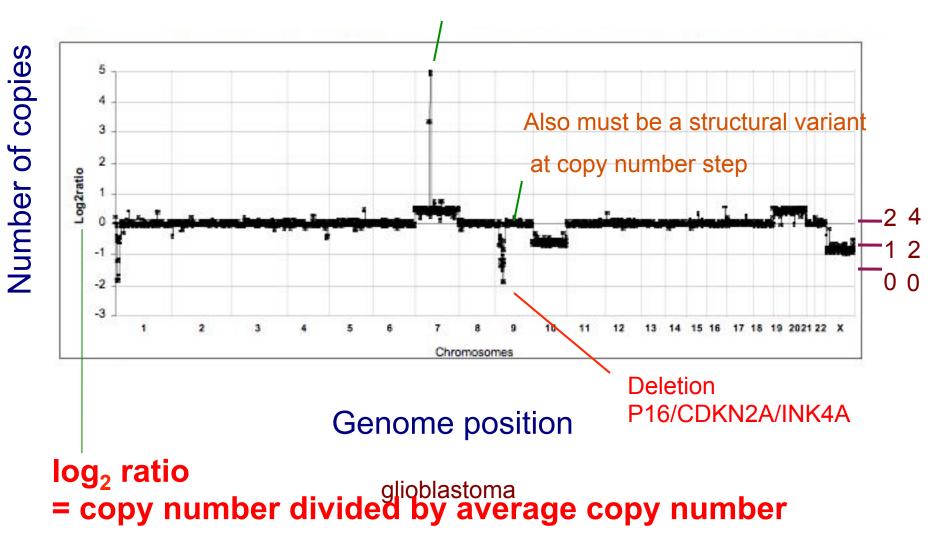
Search for deletions and amplifications: measure copy number

Amplification EGFreceptor (ERBB/HER-1)

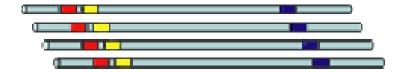


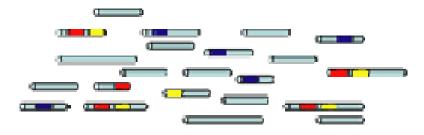
Search for deletions and amplifications: measure copy number

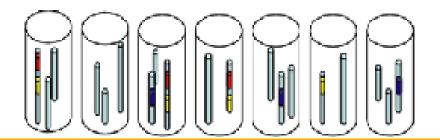
Amplification EGFreceptor (ERBB/HER-1)



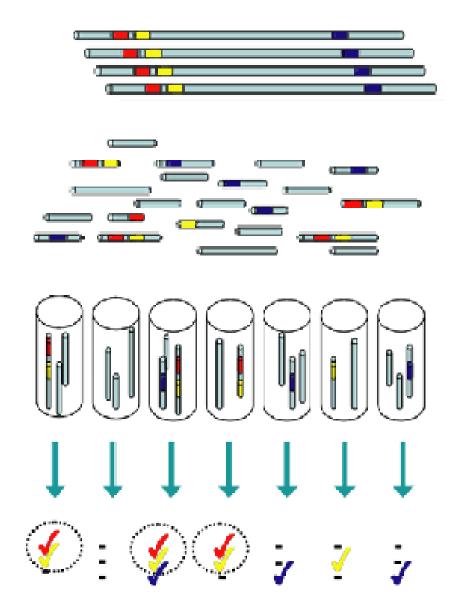
Mapping approaches





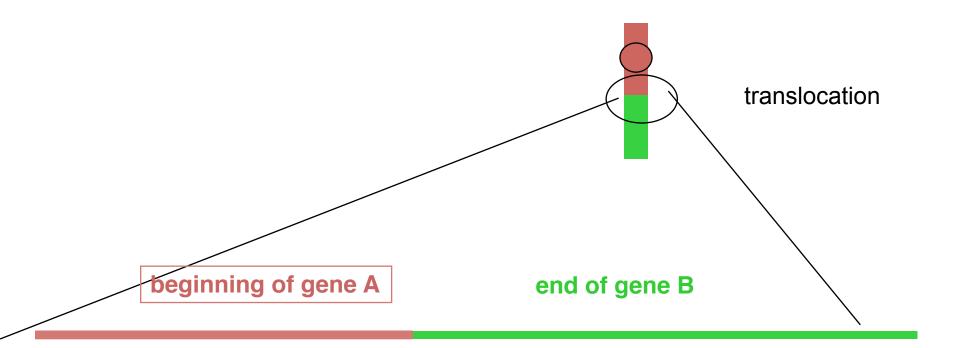


HAPPY mapping, also 10X, GAM

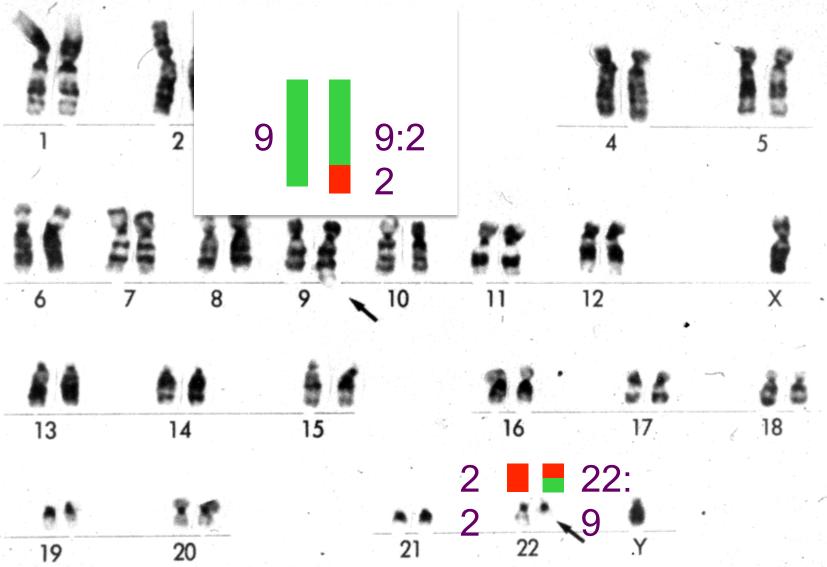


Fusion genes

Chromosome translocation: classic source of fusion genes



Philadelphia chromosome

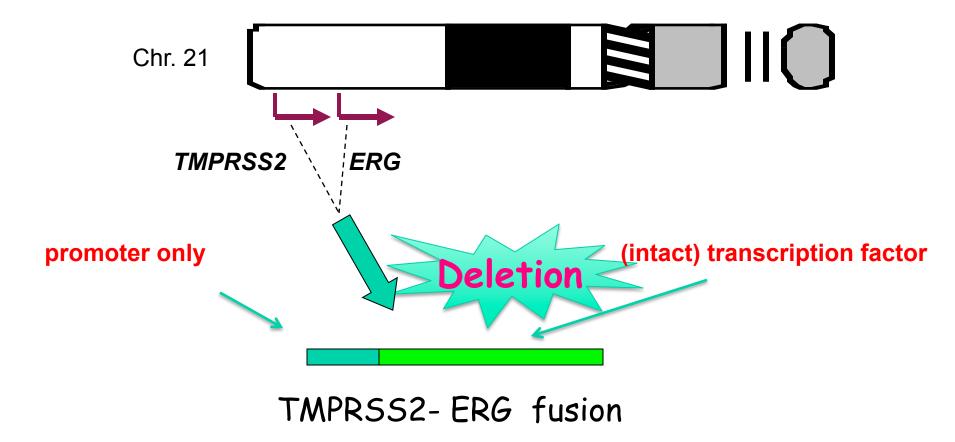


Creates BCR-ABL fusion

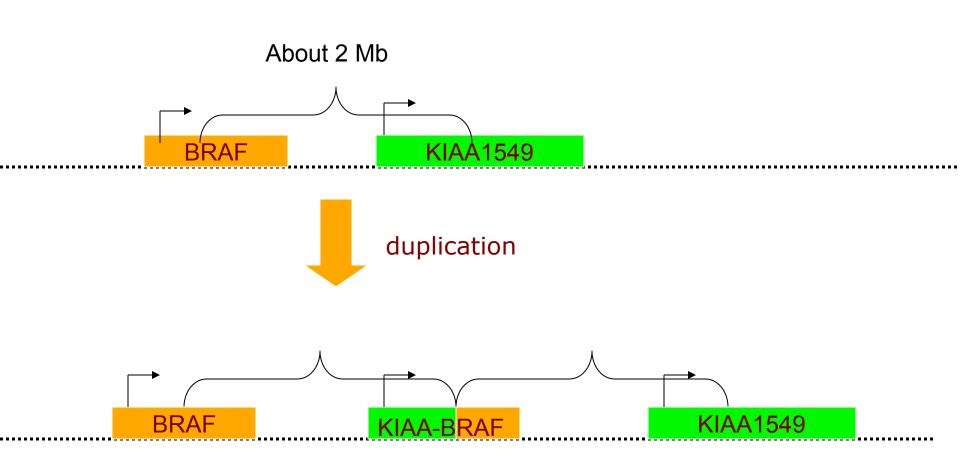
There are fusion genes in common epithelial cancers (not just leukaemias) **and not just translocations**

TMPRSS2-ERG

~50% prostate cancers



Tandem duplications causing gene fusion of BRAF



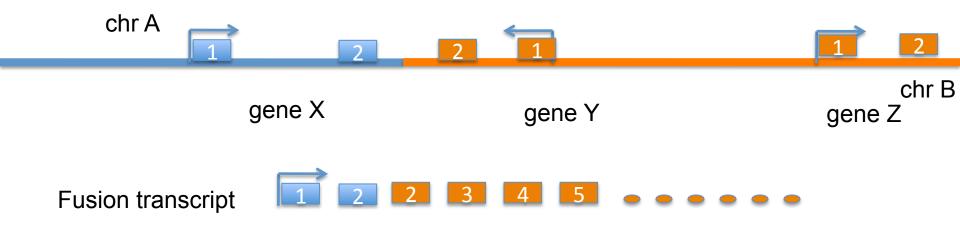
Astrocytomas

Fusions aren't the only consequence of interest!

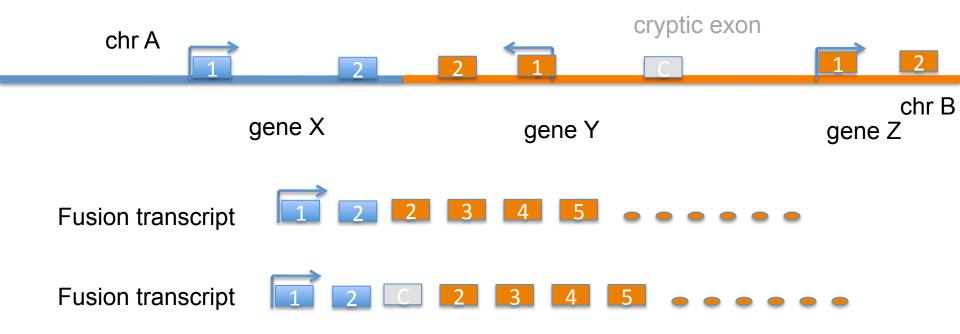


Most often, genes are simply disabled

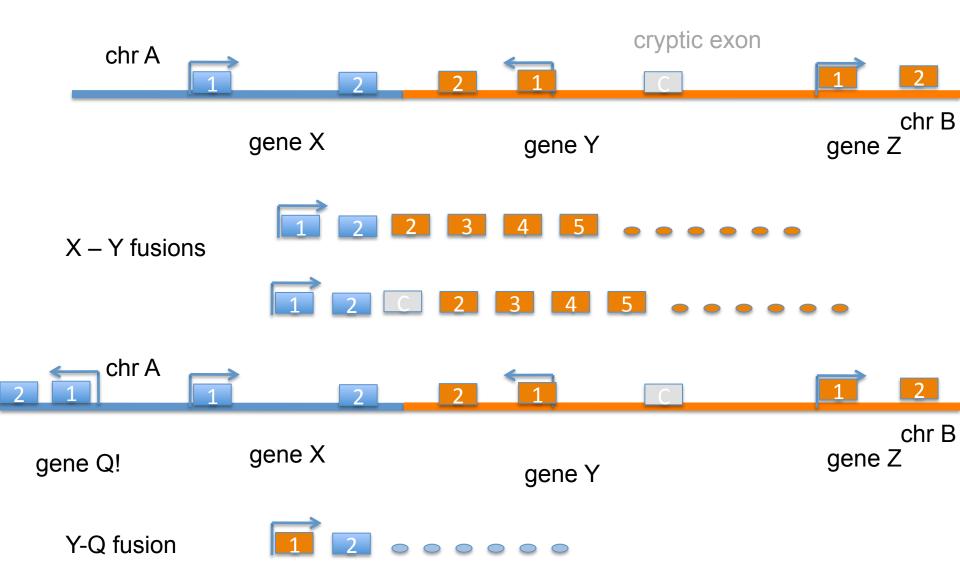
Fusions may not be immediately obvious, e.g. 'Run-through' Fusions*



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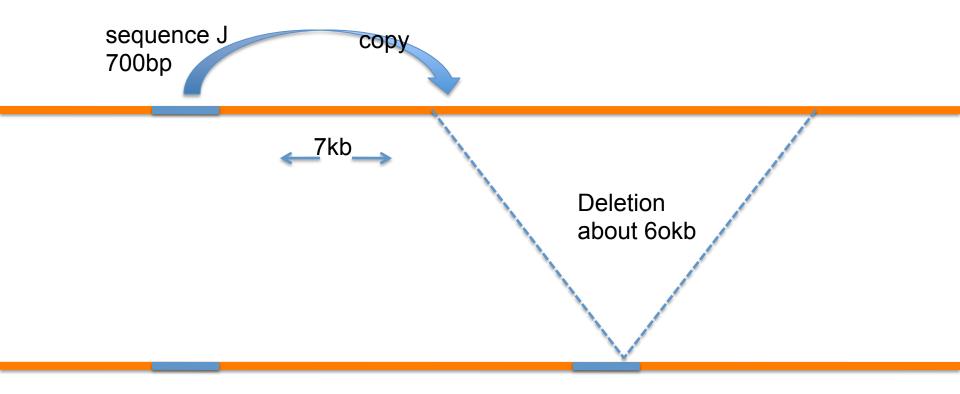


Rearrangements are often complex

- Shards
- Fragile sites
- L1 insertions in rearrangement junctions
- Breakage-fusion-bridge cycles
- Chromothripsis
- Kataegis

Shards

Rearrangements often have small fragments inserted into the junctions, from somehwere else, e.g.



copy of J inserted into deletion junction

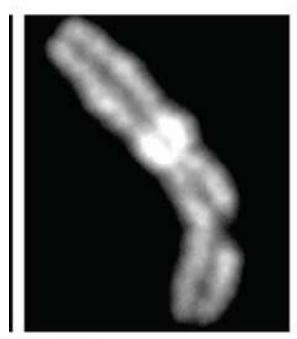
Alsop et al, Genes Chromosomes Cancer, 2008

Common Fragile Sites

Sites in the genome which are prone to breakage in cells under 'replication stress'

Debatisse et al: regions with few replication origins

High density of rearrangements in the region, not clear whether passengers or not





Breakage-fusion-bridge cycles (BFB)

• one of the known mechanisms of amplification

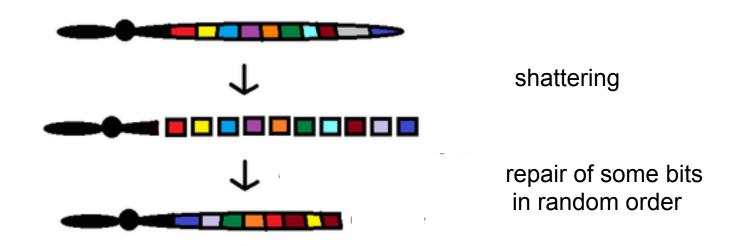
chromosome breakage -> joining of chromatids -> dicentric chr. -> breaks again



-> repeated fold-back duplications, amplification of region C

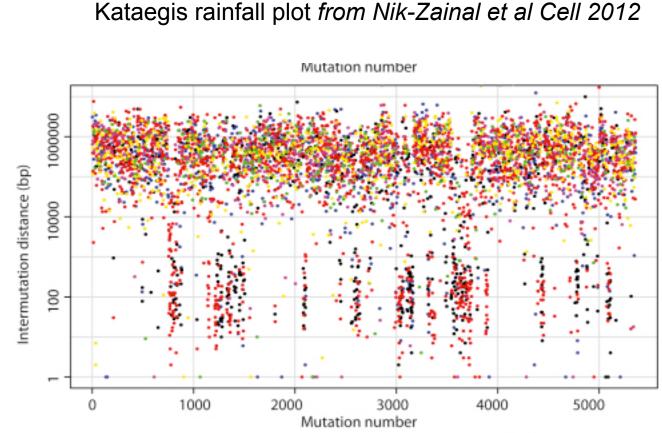
Chromothripsis

- Shattering and repair of a chromosome
 - or regions of (a) chromosome(s)



Kataegis

• Cluster of SNVs, sometimes close to a rearrangement



how close neighbouring mutations are, log scale