

# Consistency and mechanistic implications of genomic risk prediction studies for cancer regimen-related mucosal injury: A systematic review

**Petra Bachour<sup>1,2</sup> and Stephen Sonis<sup>1,2,3</sup>**

<sup>1</sup> Harvard School of Dental Medicine, Boston, MA

<sup>2</sup> The Dana-Farber Cancer Institute and Brigham and Women's Hospital, Boston, MA

<sup>3</sup> Primary Endpoint Solutions, Watertown, MA



**2018**

**28-30 JUNE**  
**VIENNA, AUSTRIA**

**SUPPORTIVE CARE**  
**MAKES EXCELLENT**  
**CANCER CARE POSSIBLE**



# Disclosure

- I disclose no conflict of interest.



**2018**

**28-30 JUNE**  
**VIENNA, AUSTRIA**

**SUPPORTIVE CARE  
MAKES EXCELLENT  
CANCER CARE POSSIBLE**



# Introduction

- What is the role of genomics in assessing individual risk?
  - Early studies focused on chemotherapy drug-metabolizing enzyme deficiencies (<5% incidence)
  - Emphasis has shifted to pathogenesis-related genomic investigations



# Objectives

- To search the literature for publications assessing genomic variables in mucositis risk
- To evaluate the concordance of genes which may predict oral or GI mucositis risk between candidate gene (CGS) and GWAS studies and to validate their functional relevance
- To assess the feasibility of final common pathways for shared phenotypes using IBS with diarrhea as a model

# Methods: Literature Review

## PubMed Search combinations of:

- Mucositis
- Enteritis
- Toxicity
- Radiation
- Chemotherapy
- Gene
- Genetics
- Genomics
- SNPs
- Genome-wide association study (GWAS)
- Head and neck cancer

1,383 papers

57 papers

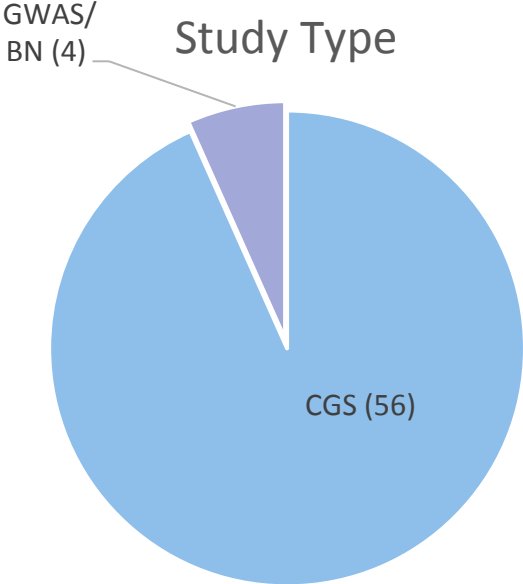
60 papers

## Exclude:

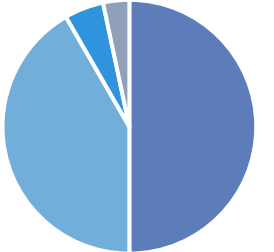
- Duplicate studies
- Non-English studies
- Non-human studies
- Case reports, meta-analyses, reviews
- Letters to the editor
- Non-genomic association studies
- Irrelevant phenotype
- Mucositis/enteritis not investigated as independent outcomes
- Allogeneic bone marrow transplant studies

3 papers added from **review of references**

# Results

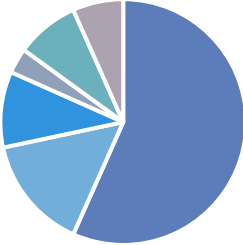


### Mucositis Type



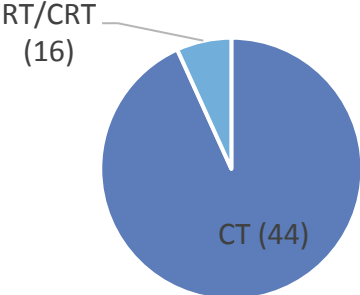
- Oral (30)
- Unspecified (25)
- GI (3)
- Oral and GI (2)

### Toxicity Scale



- CTCAE (34)
- WHO (9)
- RTOG/EORTC (6)
- Seattle Criteria (2)
- Other (5)
- Unspecified (4)

### Therapy

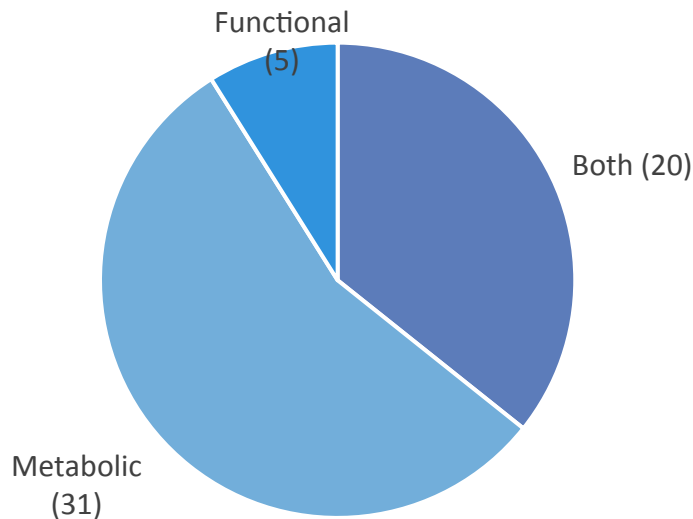


# Results: Candidate Gene Studies

Gene Symbol	Gene Name
ATCB1	ATP Binding Cassette Subfamily B Member 1
ABCC2	ATP Binding Cassette Subfamily C Member 2
ABCC4	ATP Binding Cassette Subfamily C Member 4
APC	APC, WNT Signaling Pathway Regulator
BRCA1	BRCA1, DNA Repair Associated
CAT	Catalase
CCND1	Cyclin D1
CDKN1A	Cyclin Dependent Kinase Inhibitor 1A
CNOT1	CCR4-NOT Transcription Complex Subunit 1
CYP1A1	Cytochrome P450 Family 1 Subfamily A Member 1
DCK	Deoxycytidine Kinase
DPYD	Dihydropyrimidine Dehydrogenase
DPYS	Dihydropyrimidinase
EDN1	Endothelin 1
EGF	Epidermal Growth Factor
EGFR	Epidermal Growth Factor Receptor
ERCC1	ERCC Excision Repair 1, Endonuclease Non-Catalytic Subunit
GSTM1	Glutathione S-Transferase Mu 1
GSTP1	Glutathione S-Transferase Pi 1
GSTT1	Glutathione S-Transferase Theta 1
KDR	Kinase Insert Domain Receptor
MIR1206	MicroRNA 1206
MIR2053	MicroRNA 2053
MTHFR	Methylenetetrahydrofolate Reductase
NBN	Nibrin
NOD2	Nucleotide Binding Oligomerization Domain Containing 2
RAD51	RAD51 Recombinase
RB1	RB Transcriptional Corepressor 1
SLC19A1	Solute Carrier Family 19 Member 1
SLCO1B1	Solute Carrier Organic Anion Transporter Family Member 1B1
TGFB1	Transforming Growth Factor Beta 1
TNF	Tumor Necrosis Factor
TNFRSF1A	TNF Receptor Superfamily Member 1A
TYMS	Thymidylate Synthetase
UPB1	Beta-Ureidopropionase 1
XRCC1	X-Ray Repair Cross Complementing 1
XRCC3	X-Ray Repair Cross Complementing 3
XRCC6	X-Ray Repair Cross Complementing 6

**38 genes found to have an association with mucositis/enteritis in candidate gene studies**

Type of Candidate Genes Studied



# Results

- CGS identified 38 genes associated with mucositis
- GWAS studies identified 400 SNPs mapped to 222 genes
  - Gene attribution methods variable
- **No overlap** between genes identified in GWAS/BN studies and CGS



# Conclusion 1

- Studies investigating the genomic variables contributing to mucositis risk are largely **heterogeneous** in design, methods, and results
- Most studies are **CGS**
- There is **no concordance** between genes found to be associated with mucositis in CGS and GWAS/BN studies

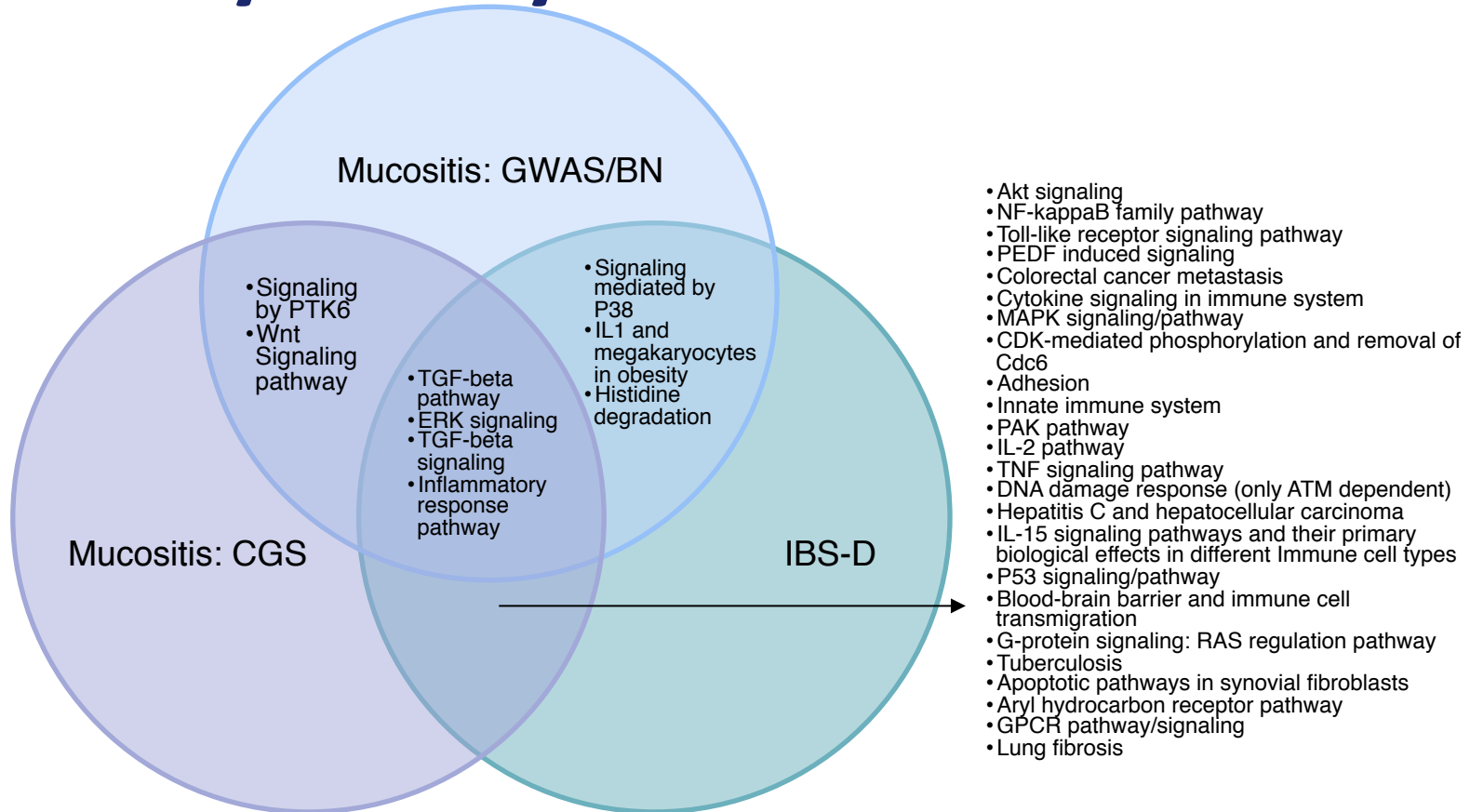
# Pathways Analysis

- Although there is little concordance between genes identified among different types of mucositis studies, is there concordance in genomically-derived **biological pathways**?
- Is there overlap among pathways derived from genes associated with mucositis, and those associated with a **similar phenotype** (IBS- diarrhea)?

# Pathways Analysis: Methods

- Used GeneAnalytics to identify biological pathways associated with identified gene sets:
  - Mucositis– candidate gene
  - Mucositis– GWAS/BN
  - IBS-diarrhea (Camilleri et al 2016)

# Pathways Analysis: Results



# Conclusion 2

- Although there was no overlap among genes identified by genome-wide and candidate gene approaches in the literature, pathways analyses based on these genes revealed common underlying processes.
- The overlap in genomically-derived pathways observed in mucositis and IBS-D suggests common **pathobiology is also associated with similar clinical phenotypes.**

# Thank you

- Questions?
- Contact:  
petra\_bachour@hsdm.harvard.edu



**2018**

**28-30 JUNE**  
**VIENNA, AUSTRIA**

**SUPPORTIVE CARE**  
**MAKES EXCELLENT**  
**CANCER CARE POSSIBLE**



# Future Directions

- Well-controlled, prospective studies are needed to better understand genomic variables in mucositis risk
  - Genome-wide approaches
  - Learning and validation cohorts
- Comparison of diseases with shared phenotypes or common underlying biological pathways could lead to the identification of unknown underlying genes