16TH WORLD CONFERENCE ON LUNG CANCER



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MicroRNA Profiling of a Familial Primary Pulmonary Enteric Adenocarcinoma

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- pulmonary enteric adenocarcinoma (PEAC) is a rare lung adenocarcinoma with a predominant component (>50%) of intestinal differentiation and tumor cells positive for at least one intestinal marker (CDX2, CK20, MUC2)
- only 31 cases in literature and occurrence in two family members has never been reported before
- PEAC should be distinguished from metastatic colorectal carcinoma because of the different treatment strategy and prognosis
- due to its rarity and pecularity, no specific guidelines for therapy exist

Aim of the study

 molecular and histological characterization of a PEAC from a patient with another family member affected by the same tumor

Methods

Journal of Pathology

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ORIGINAL PAPER

MicroRNA profiling for the identification of cancers with unknown primary tissue-of-origin

Manuela Ferracin, ^{1,2} Massimo Pedriali, ¹ Angelo Veronese, ^{1,3} Barbara Zagatti, ¹ Roberta Gafà, ¹ Eros Magri, ¹ Maria Lunardi, ¹ Gardenia Munerato, ¹ Giulia Querzoli, ¹ Iva Maestri, ¹ Linda Ulazzi, ¹ Italo Nenci, ¹ Carlo M Croce, ³ Giovanni Lanza, ¹ Patrizia Querzoli ^{1*} and Massimo Negrini ^{1,2*}

The molecular characteristics of proband's PEAC were evaluated applying a previously validated 47-miRNA diagnostic classifier to predict tumor primary origin.

It has high overall accuracy of 100% for primary cancers and 78% for metastases.

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Results

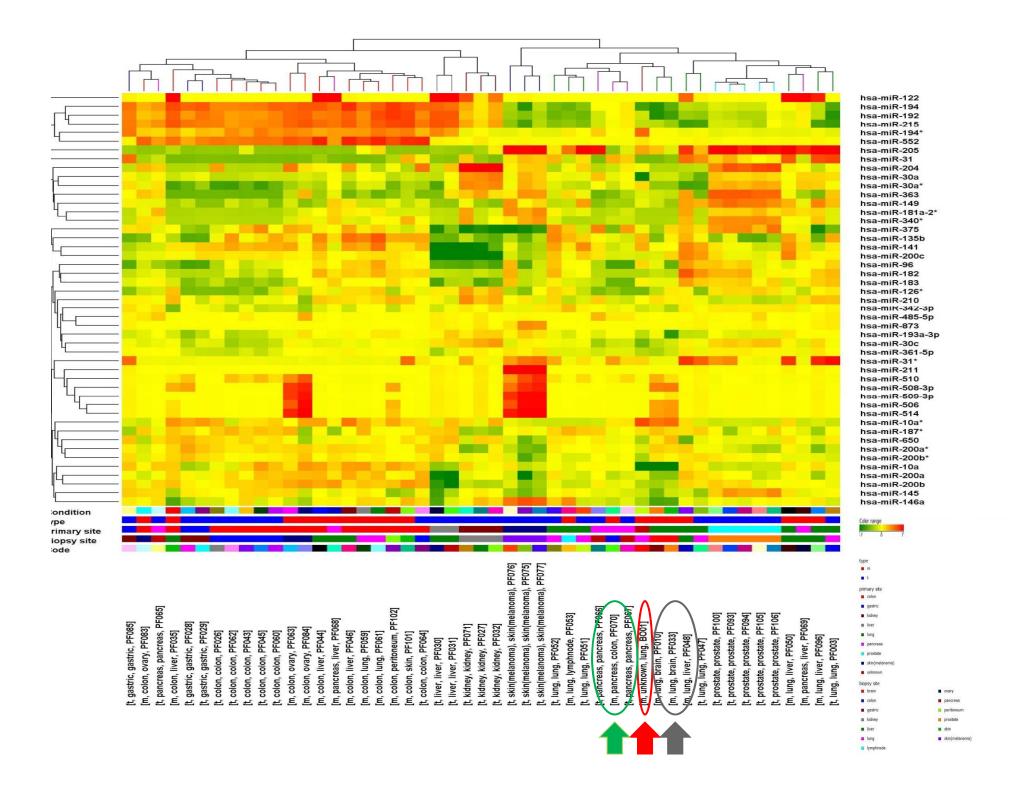
Characteristic	Proband	His sister		
General				
Age at diagnosis (years)	68	71		
Smoking habit	Yes	Yes		
Primary localization	lung: right/lower lobe	lung: right/lower lobe		
Colonoscopy	multiple benign polyps (N<10), diverticulosis	multiple benign polyps (N<10), diverticulosis		
Radical surgery (R0)	Yes	Yes		
Metastases/DFS (months)	bone / 1.5	lung, adrenal glands / 12		
Histological findings				
Histology	PEAC	PEAC		
Stage (pTNM)	pT2apN1	pT2apN0		
IHC analyses				
TTF-1	NEG	NEG		
Napsin A	NEG	NA		
CK7	POS	NEG		
CK20	NEG	POS		
CDX2	POS	POS		
MUC1	POS	NA		
MUC2	NEG	NA		
MUC5A	POS	NA		
MUC6	NEG	NA		
Genetic aberrations				
EGFR	wild type	wild type		
K-RAS	Gly12Asp mutation	Gly12Asp mutation		
ALK	wild type	wild type		

Familial aggregation of PEAC was associated with:

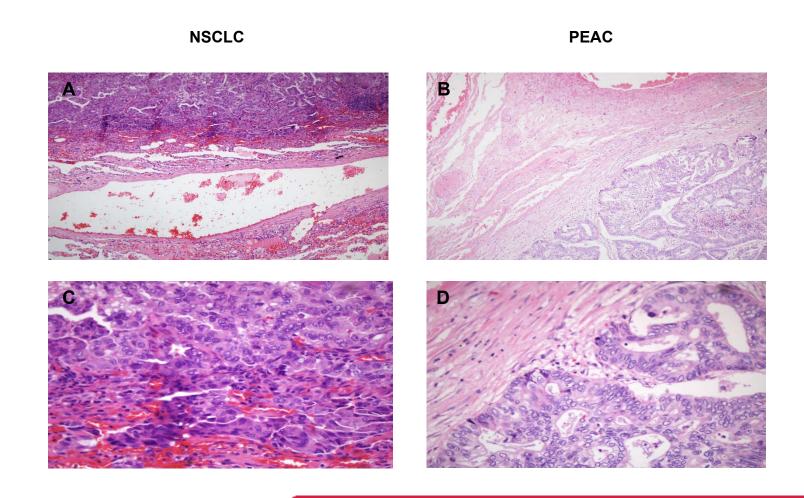
- similar clinicopathological features
- age at diagnosis
- smoking-habit
- tumor localization
- multiple benign colon polyps
- histologic findings
- TTF-1 negativity
- CDX2 positivity
- genetic findings
- K-RAS(Gly12Asp) mutation
- no EGFR/ALK aberrations

• miRNA profiling revealed main similarities with <u>lung cancer</u> (75.98%), and partial overlap <u>with pancreatic cancer</u> (23.34%), but not with colorectal cancer (less than 0.5%)

- PEAC shares with pancreatic cancer key miRNAs associated with tumor aggressiveness:
 - miR-31
 - miR-126
 - miR-506
 - miR-508-3p
 - miR-514



Histological analyses revealed the presence of two different phenotypes in the lung lesion of the proband: NSCLC (30%) and PEAC (70%).



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IHC Marker	NSCLC Phenotype	PEAC Phenotype				
TTF1	+	-				
CK7	+	+	NSCLC 10x	NSCLC 40x	PEAC 10x	PEAC 40x
CDX2	-	+	NGCLC TOX	NGCLC 40X	PEAC IUX	PEAC 40X
CK20	-	-		37.	1/1/2	
		TTF-				
		CK 7				
		CDX	2			
		CK20				

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Conclusions

 we described, for the first time, a case of PEAC in two members of the same family, associated with similar clinicopathological feature and histological/genetic findings

- miRNA profiling of PEAC resembled mostly NSCLC, with a partial overlap with PDAC's pattern that could explain:
 - aggressive behavior compared to most NSCLC
 - guide future tailored-therapy approaches

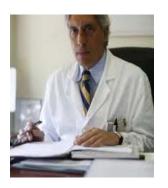
Thank you for your attention!

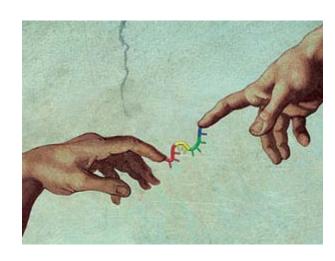
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