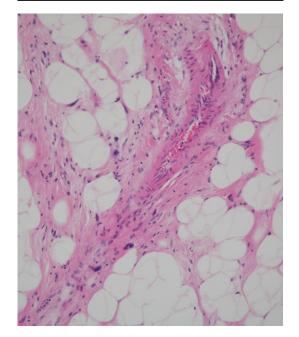
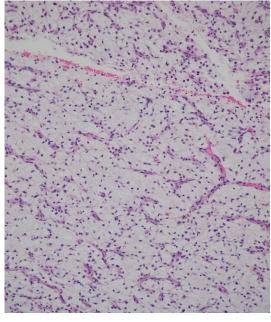
#### Well differentiated Liposarcoma



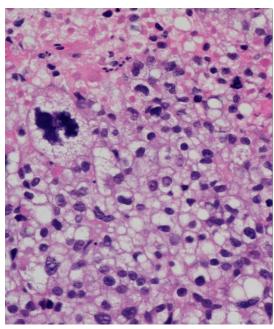
MDM2 /CDK4 amplification

#### Myxoid liposarcoma



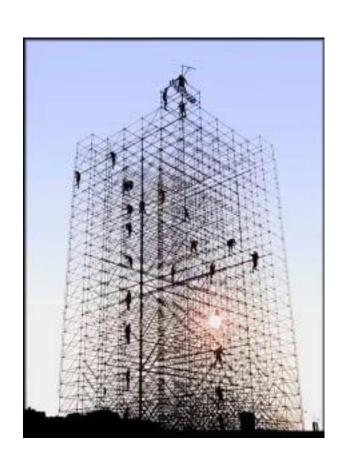
FUS-DDIT3 chimeric fusion gene

#### **Pleomorphic Liposarcoma**



Complex rearrangements and copy number changes

# Mutational catalogues –TCGA, ICGC and others....



Bone tumours:

 Chondrosarcoma,
 Osteosarcoma,
 Chondroblastoma, Giant cell tumour of bone.

 Soft tissue tumours: SFT, LGFMS, Angiosarcoma, Radiation induced sarcoma, Leiomyosarcoma, haemangioendotheliomas, MPNST

#### Output from genome sequencing studies

- Biological processes implicated in cancer development.
- Tumour heterogeneity.
- Evolution of metastasis.
- Mutational processes involved in carcinogenesis.
- Identification of drug targets.
- Outcome and response to therapy.
- Identification of new cancer genes.

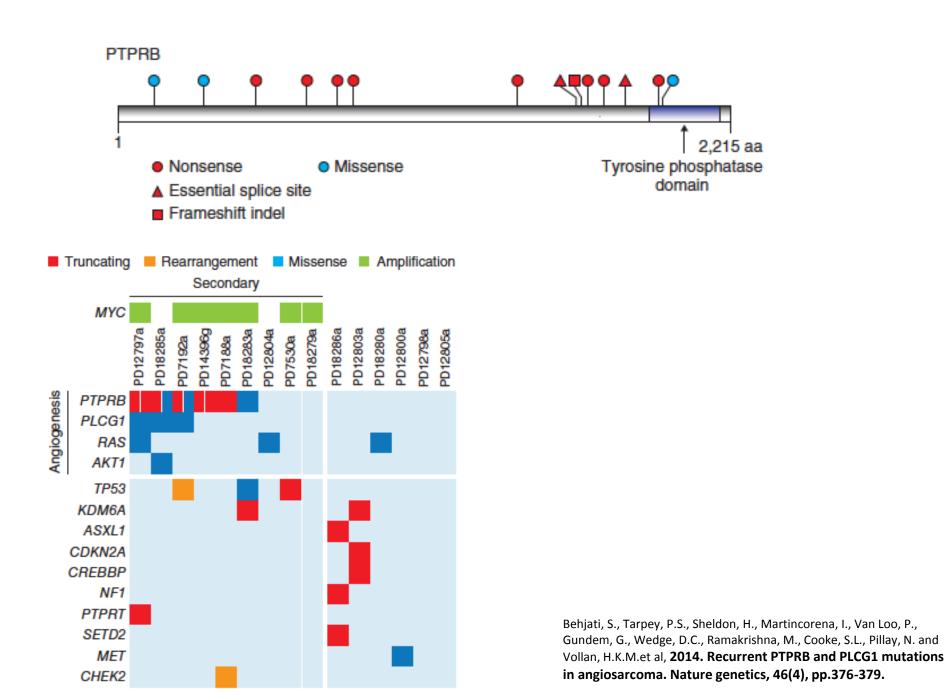
# Identifying new biomarkers to delineate high grade sarcomas

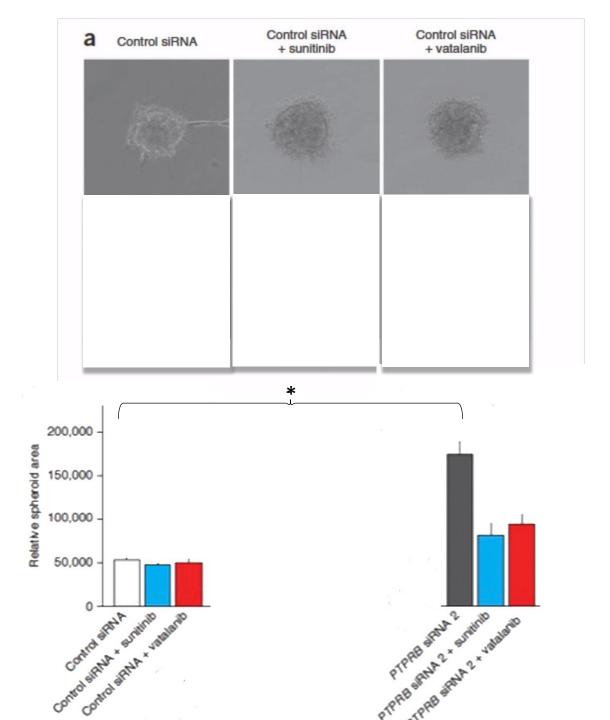
Angiosarcoma MPNST

### Angiosarcoma







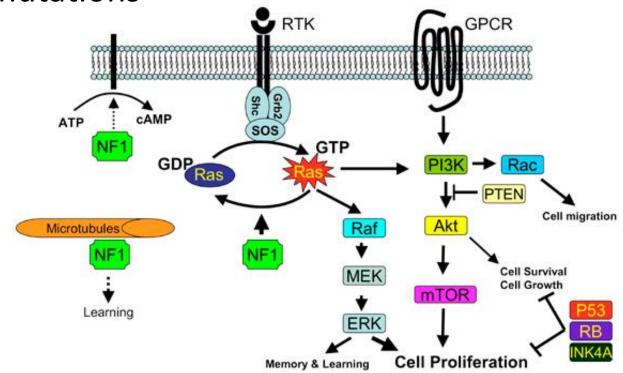


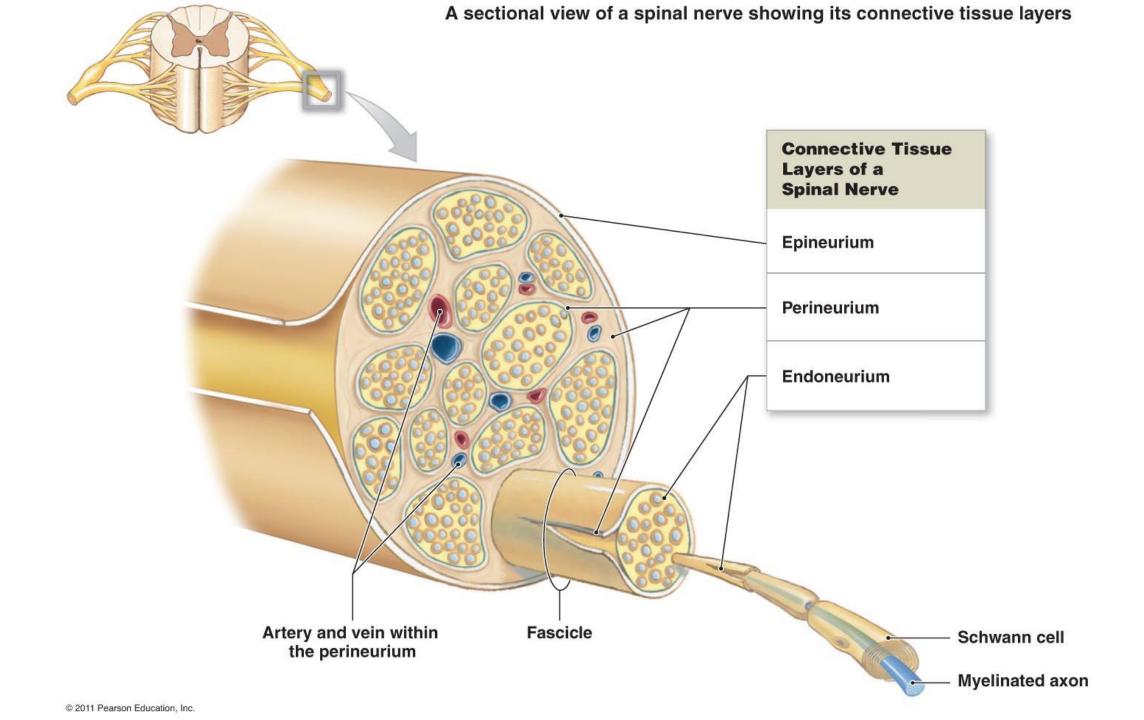
Dramatic increase in our understanding of genomic events that characterise cancer but...

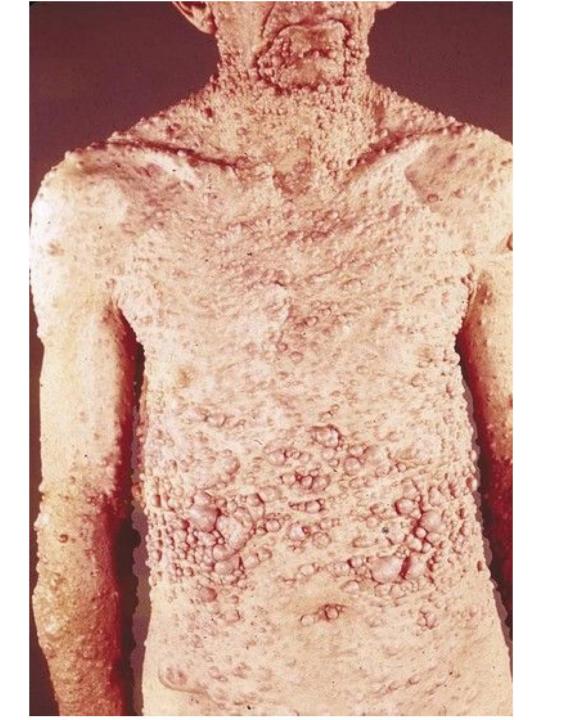
- 1) Clinical implementation of this knowledge to inform decision making is a major challenge.
- 1) Do not fully understand the interaction between molecular therapeutic agents and the genetic mutations they target...

#### Neurofibromatosis Type I

- Common genetic disease.
- 1 in 3500 people. AD with high penetrance.
- NF1 deletions, insertions, splice site mutations, mis-sense, nonsense mutations



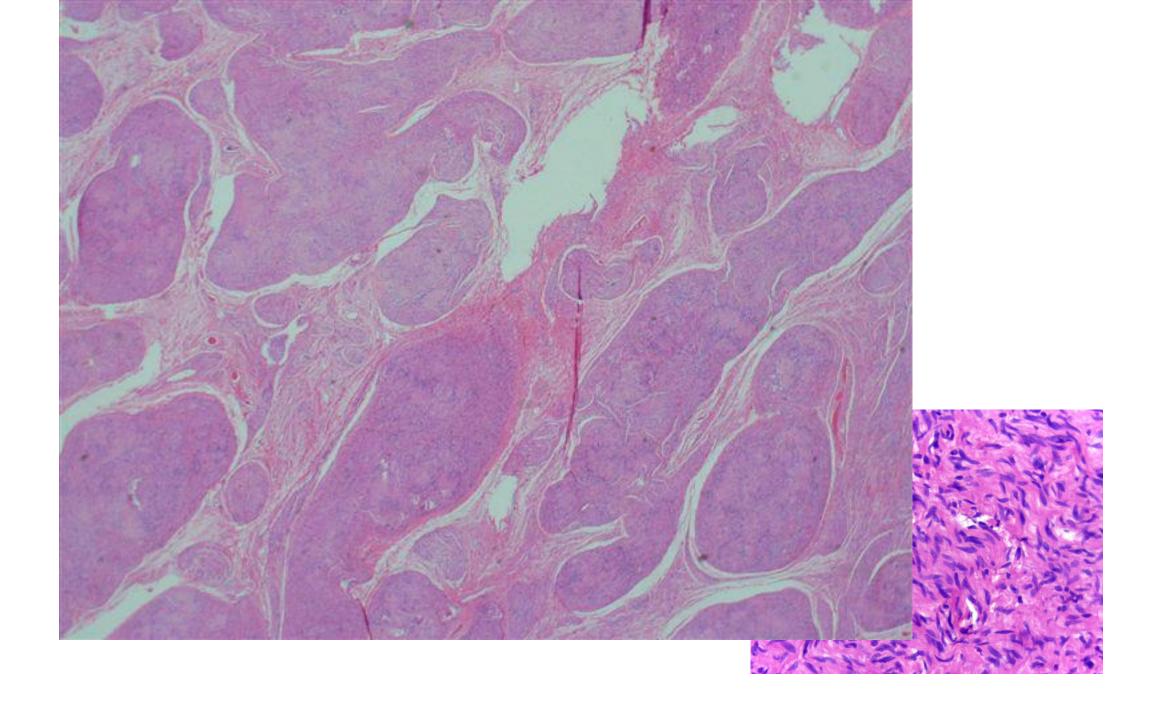




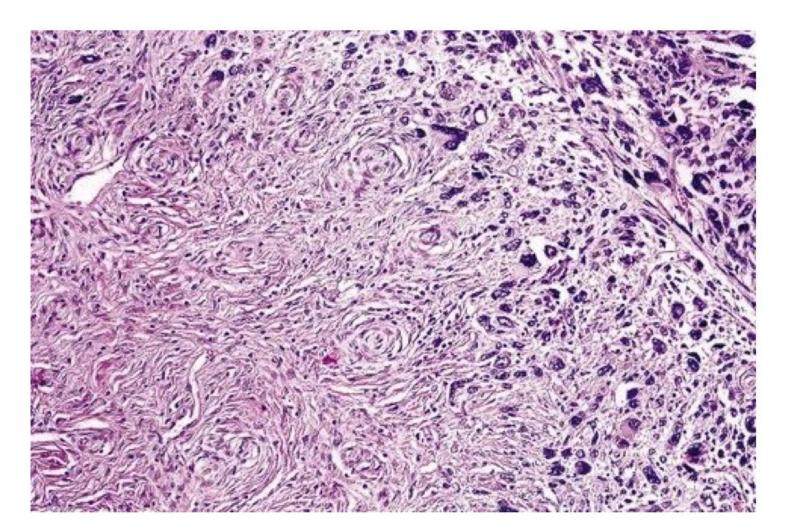
Enzinger and Weiss's Soft Tissue Tumors, 6th Edition

#### PLEXIFORM NEUROFIBROMA

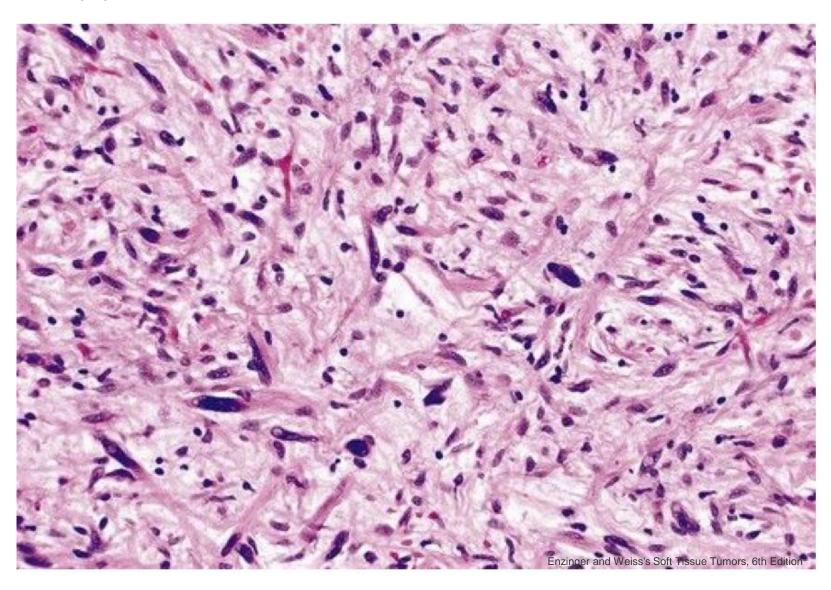




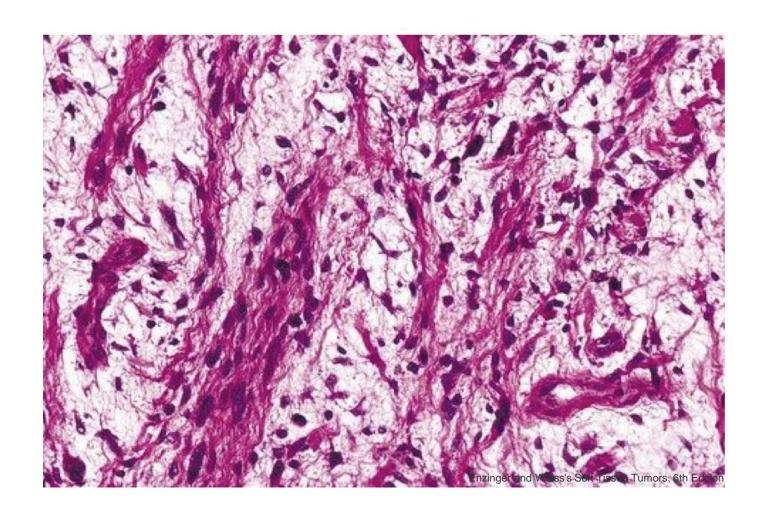
 Distinction between a neurofibroma with atypical features and MPNST Grade 1 is one of the most difficult – histological continuum.



## "Atypical" neurofibroma



## Low grade MPNST





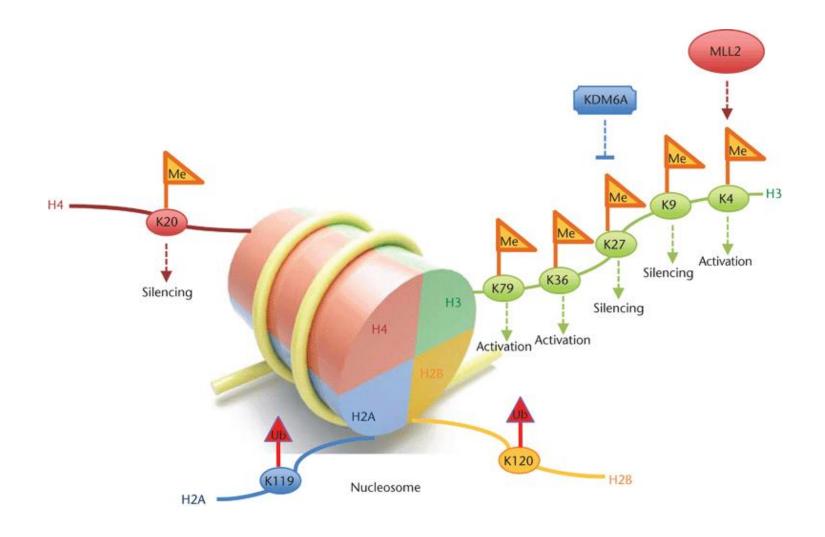
#### PRC2 is recurrently inactivated through *EED* or *SUZ12* loss in malignant peripheral nerve sheath tumors

William Lee<sup>1,2,17</sup>, Sewit Teckie<sup>2,3,17</sup>, Thomas Wiesner<sup>3,17</sup>, Leili Ran<sup>3,17</sup>, Carlos N Prieto Granada<sup>4</sup>, Mingyan Lin<sup>5</sup>, Sinan Zhu<sup>3</sup>, Zhen Cao<sup>3</sup>, Yupu Liang<sup>3</sup>, Andrea Sboner<sup>6–8</sup>, William D Tap<sup>9,10</sup>, Jonathan A Fletcher<sup>11</sup>, Kety H Huberman<sup>12</sup>, Li-Xuan Qin<sup>13</sup>, Agnes Viale<sup>12</sup>, Samuel Singer<sup>14</sup>, Deyou Zheng<sup>5,15,16</sup>, Michael F Berger<sup>3,4</sup>, Yu Chen<sup>3,9,10</sup>, Cristina R Antonescu<sup>4</sup> & Ping Chi<sup>3,9,10</sup>

# Somatic mutations of *SUZ12* in malignant peripheral nerve sheath tumors

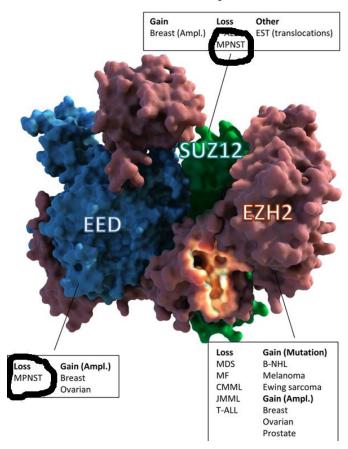
Ming Zhang<sup>1,2</sup>, Yuxuan Wang<sup>1,2</sup>, Sian Jones<sup>3</sup>, Mark Sausen<sup>3</sup>, Kevin McMahon<sup>1,2</sup>, Rajni Sharma<sup>4</sup>, Qing Wang<sup>1,2</sup>, Allan J Belzberg<sup>5</sup>, Kaisorn Chaichana<sup>5</sup>, Gary L Gallia<sup>5</sup>, Ziya L Gokaslan<sup>5</sup>, Greg J Riggins<sup>5</sup>, Jean-Paul Wolinksy<sup>5</sup>, Laura D Wood<sup>4</sup>, Elizabeth A Montgomery<sup>4</sup>, Ralph H Hruban<sup>4</sup>, Kenneth W Kinzler<sup>1,2</sup>, Nickolas Papadopoulos<sup>1,2</sup>, Bert Vogelstein<sup>1,2</sup> & Chetan Bettegowda<sup>1,2,5</sup>

#### The nucleosome



#### MPNST have mutations in the PRC2 complex

#### **Core PRC2 Complex**



- H3K27me3
- Transcriptional repression

•

### Loss of H3K27me3 Expression Is a Highly Sensitive Marker for Sporadic and Radiation-induced MPNST

Carlos N. Prieto-Granada, MD,\*† Thomas Wiesner, PhD,‡ Jane L. Messina, MD,† Achim A. Jungbluth, MD,\* Ping Chi, MD, PhD,‡§|| and Cristina R. Antonescu, MD\*

Am J Surg Pathol • Volume 40, Number 4, April 2016

**TABLE 2.** H3K27me3 Monoclonal Antibody IHC Results of the Different Entities Included in the MPNST Differential Diagnosis and Miscellaneous Tumors

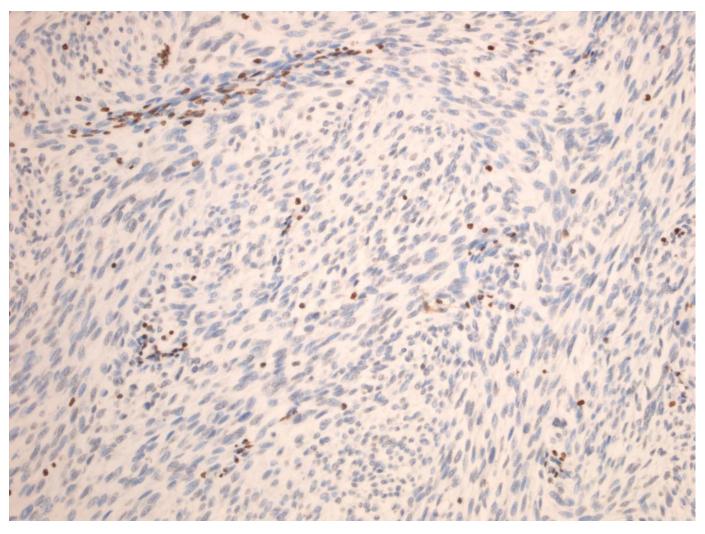
	H3K27me3 IHC Loss/Total
Diagnosis	Cases
Cutaneous melanoma	
Pure desmoplastic melanoma	0/37
Mixed desmoplastic melanoma	0/11
Spindle cell melanoma	0/5
Synovial sarcoma (MF, BF, and PD)	0/113
GIST	
KIT/PDGFRA mutant	0/109
SDHB-deficient WT pediatric and	0/13
adult	
WT dedifferentiated GIST	0/1
Liposarcoma	
Well differentiated	0/31
Dedifferentiated	0/44
Ossifying fibromyxoid tumor	0/6
Soft tissue myoepithelial carcinomas	0/6
MFS	0/63

H3K27Me3 loss in >90% of MPNST

In the case of GIST, *KIT* and *PDGFRA* were WT. BF indicates biphasic; MF, monophasic; PD, poorly differentiated.

#### MPNST Grade 3

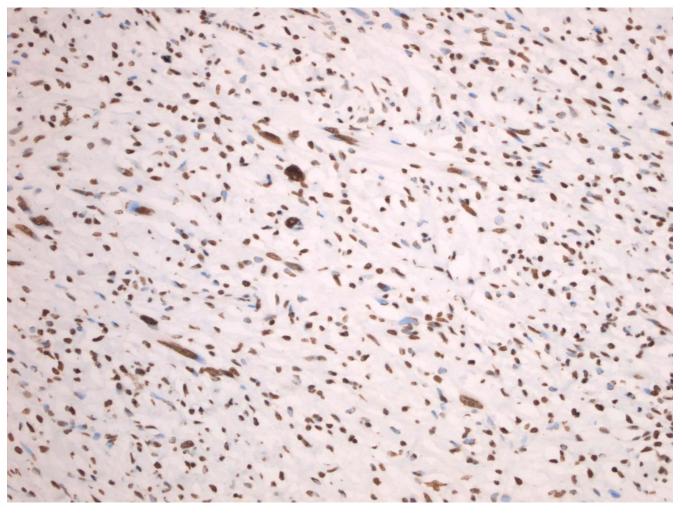
## H3K27me3 - immunohistochemistry



Courtesy of Dr. Roberto Tirabosco

#### Atypical Neurofibroma

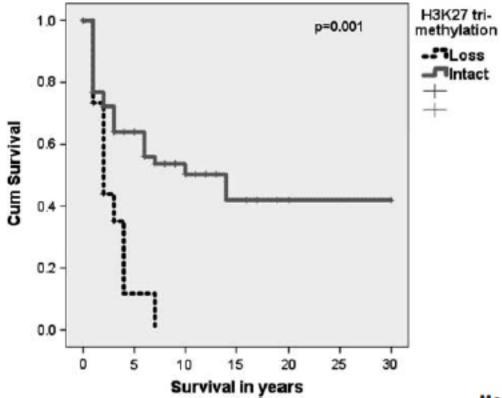
## H3K27me3 - immunohistochemistry



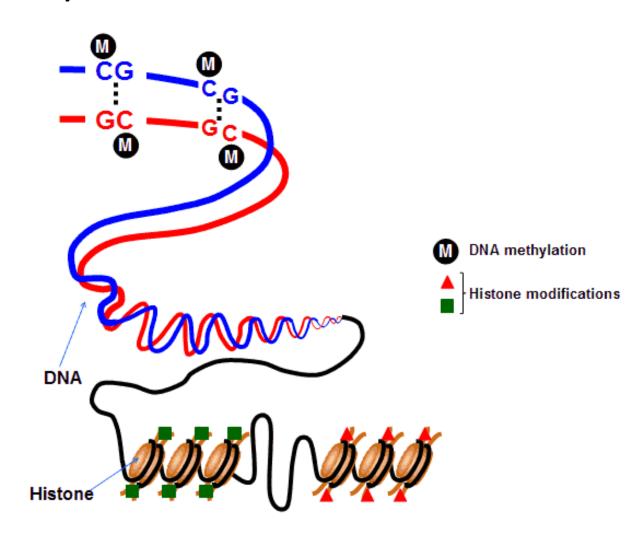
Courtesy of Dr. Roberto Tirabosco

#### H3K27me3

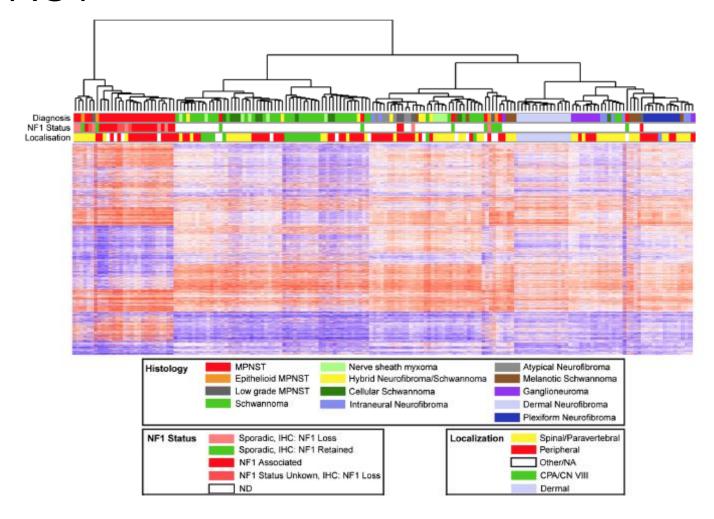
Prognostic utility



### DNA methylation



#### **MPNST**

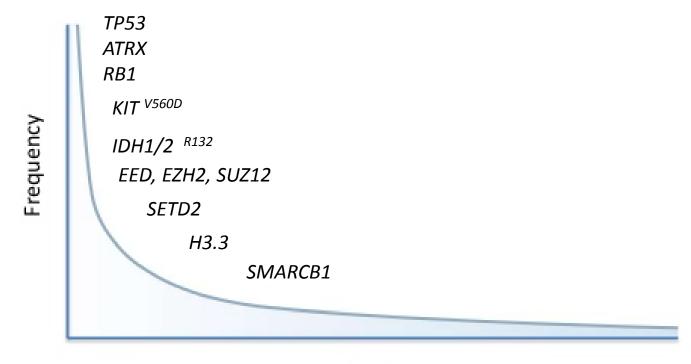




Methylation-based classification of benign and malignant peripheral nerve sheath tumors

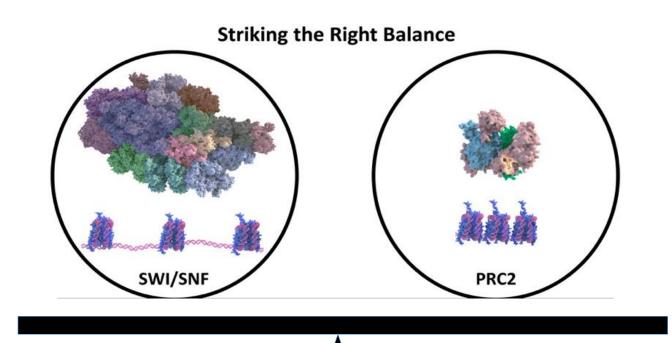
Manuel Rührich<sup>12</sup> - Christian Koelsche<sup>12</sup> - Daniel Schrimpf<sup>12</sup> - David Capper<sup>12</sup> - Felix Sahm<sup>12</sup> - Amekathrik Krafz<sup>12</sup> - Jana Rense<sup>2</sup> - Volker Hovestaff\* - David T. W. Jones<sup>4</sup> - Meinine Bewermerge-Sindler\* - Albert Besche<sup>2</sup> - Josabin Meis\*, Christian Sawarine mer<sup>13</sup> - Christian Hartmann<sup>12</sup> - All Fund Chabolicus<sup>12</sup> - Mitto Arph<sup>4</sup> - Morro Seth Koenslagen<sup>23</sup> - Daniel Hinggi<sup>12</sup> - Schanla Helm<sup>12</sup> - Werner Paulun<sup>12</sup> - Les Schüttlecht<sup>12</sup> - Berran Almundi<sup>13</sup> - Christia Hevold-Mende<sup>13</sup> - Andreas Unterberg<sup>13</sup> - Siefan M. Plister<sup>5,33</sup> - Andreas von Delming <sup>12</sup> - Nadreas Von Delming <sup>13</sup> - Paul R. Rense<sup>13</sup> - Radreas Von Delming <sup>13</sup> - Paul R. Rense<sup>13</sup> - Paul Rense<sup></sup>

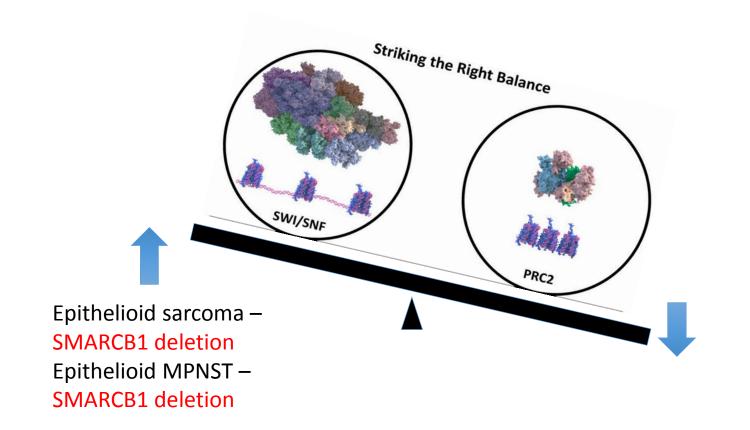
### Sarcoma hotspot mutations



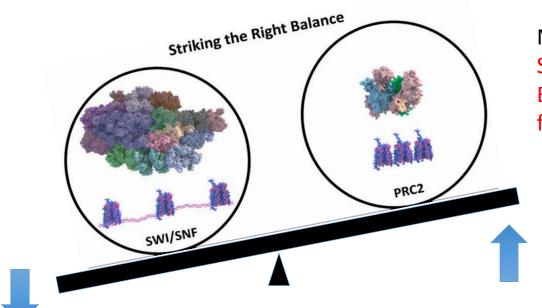
**Rank**Long tail distribution of cancer hotspots

Balance between chromatin remodelling and histone modification has biological implications for sarcomas





Synovial
Sarcoma –
SYS-SSX
fusion



MPNST – SUZ12, EED, EZH2 loss of function

#### Take home points

- 1. Sarcomas are a collection of diverse diseases with different phenotypes, genetics and clinical outcomes.
- 2. Sarcoma classification refined by genetics and epigenetics with rapid application in clinical diagnostics.
- 3. Urgent need to identify more biomarkers and more research is needed likely to be gains from epigenetic profiling.