

2019



# Progetto Ematologia Romagna

***Il *bcl2* è il gene della “vita”; le sue alterazioni (mutazione, traslocazioni e amplificazioni) inducono malattie linfomieloproliferative***

Nicoletta Testoni

**Localizzato sul cromosoma 18q21**

**Gene regolatore dell'apoptosi**

**Contribuisce alla tumorigenesi bloccando la morte cellulare programmata (apoptosi)**

Espressione deregolata sia come evento oncogenetico primario o secondario



Sviluppo del tumore



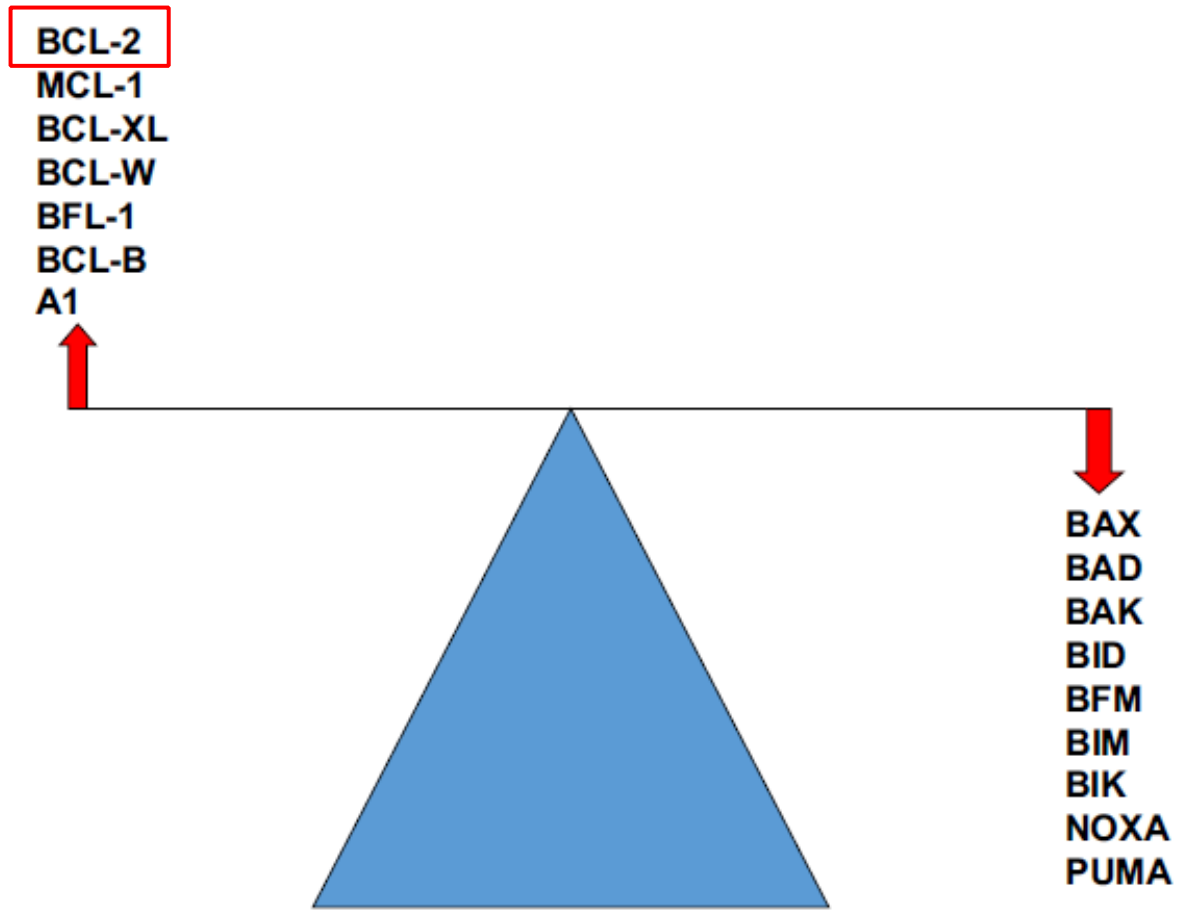
Mantenimento del tumore



Resistenza alla terapia



# BCL-2 family of apoptotic proteins



Fegan C and Pepper C, British Journal of Haematology, 2019



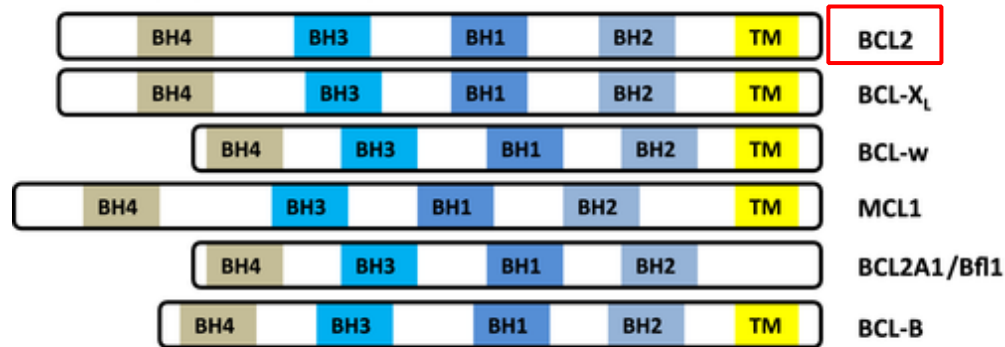
# APOPTOSIS and BCL-2 family proteins

- Apoptosis (programmed cell death) is critical for normal development and homeostasis<sup>[a]</sup>
- The BCL2 family of proteins plays a major role in the intrinsic apoptosis pathway<sup>[b]</sup>
- Each protein contains up to 4 BCL2 homology (BH) regions (BH1, BH2, BH3, and BH4)<sup>[b]</sup>
- BCL2-family proteins regulate mitochondrial outer membrane permeability and release of cytochrome c, leading to caspase activation<sup>[b]</sup>

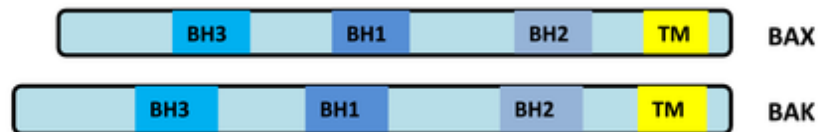
a. Levenson JD, et al. *Cancer Discov.* 2017;7:1-18  
b. Taylor RC, et al. *Nat Rev Mole Cell Biol.* 2008;9:231-241  
Kumar C, et al *Blood* 2017; 130:2401-2409

# BCL2 family proteins

## 1. Anti-apoptotic BCL2 proteins

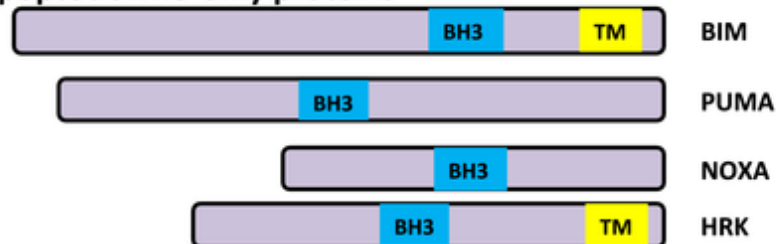


## 2. Pro-apoptotic multidomain BCL2 proteins



Effector proteins

## 3. Pro-apoptotic BH3-only proteins

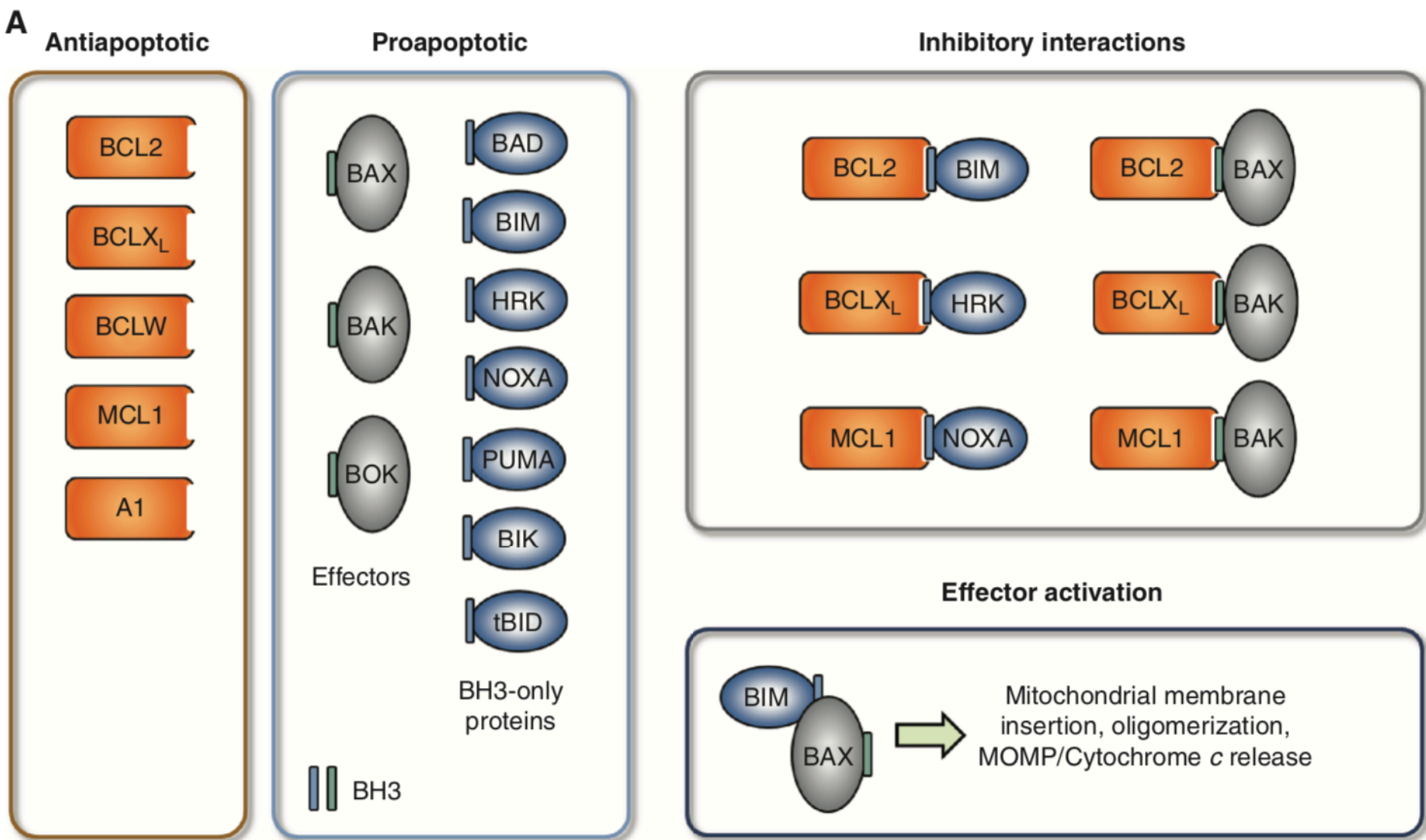


Initiators proteins



2019

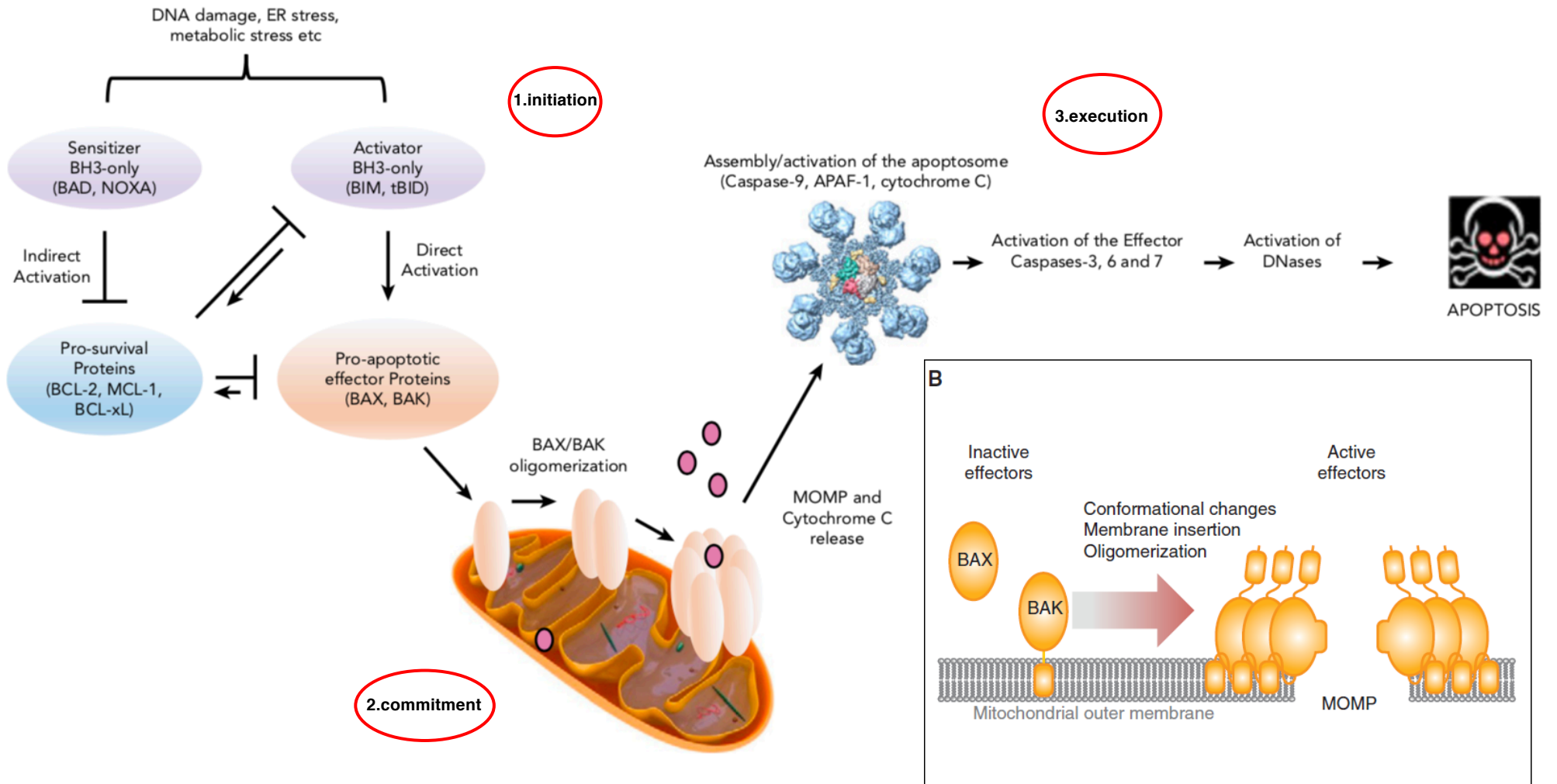
# BCL2 family proteins



Leverson JD, et al. Cancer Discov. 2017;7:1-18



# Intrinsic apoptotic pathway



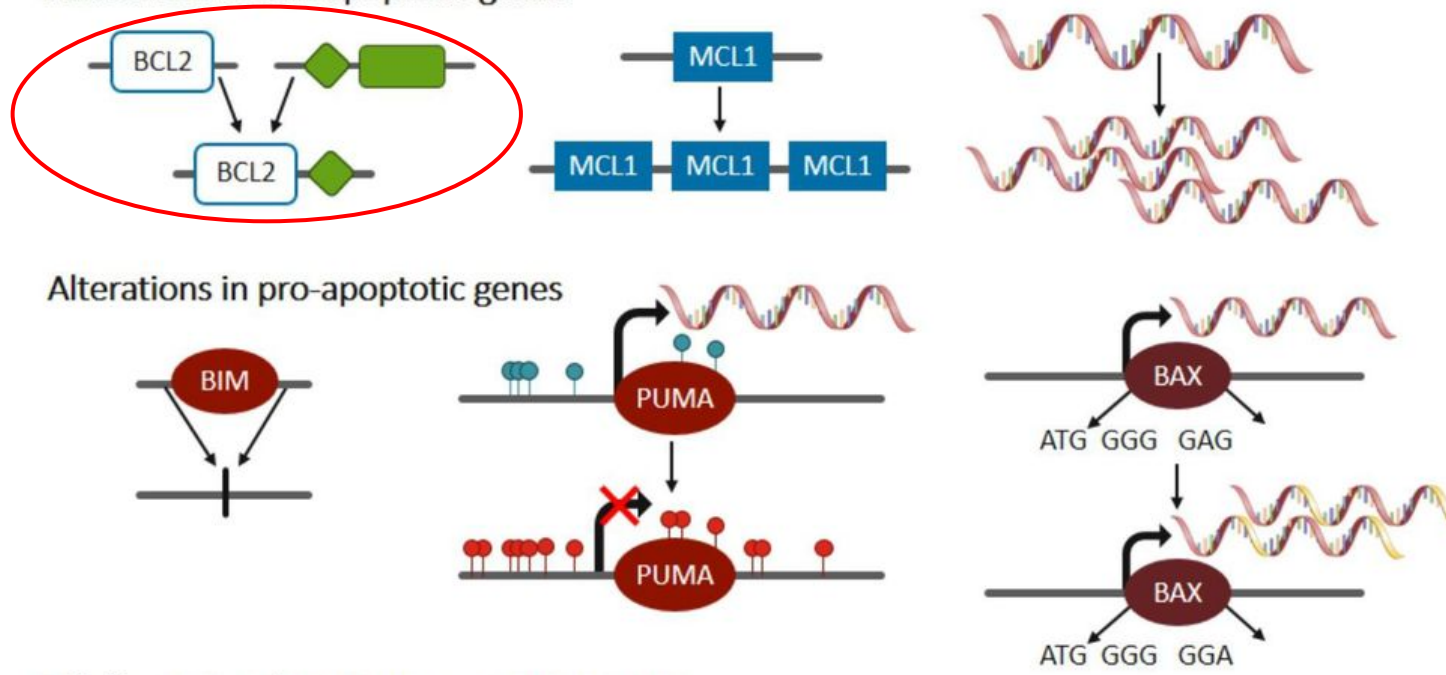


2019

# Mechanisms of BCL-2 family dysregulation

- Dysregulation of BCL2-family proteins plays a key role in cancer development

Alterations in anti-apoptotic genes

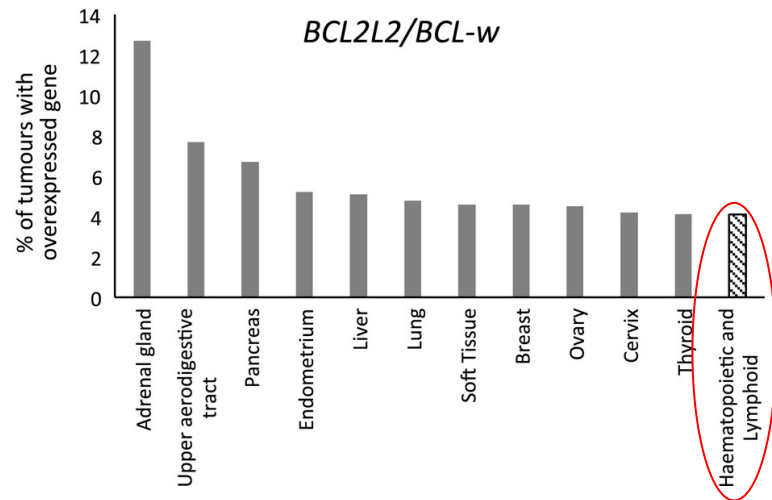
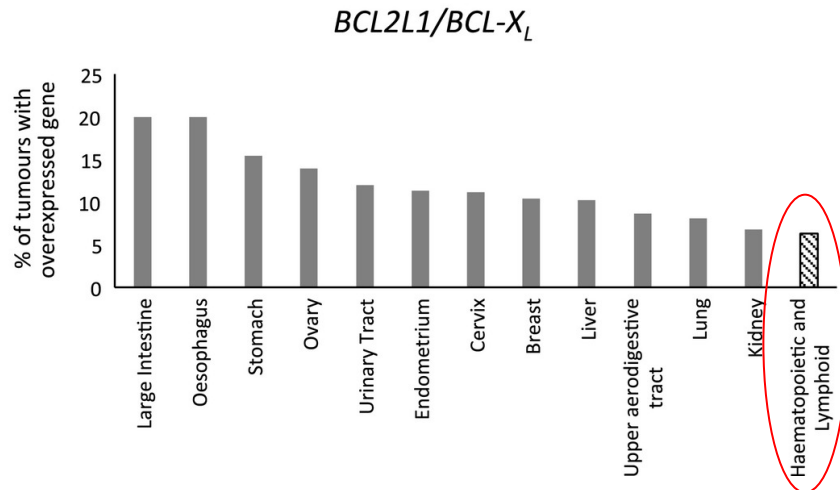
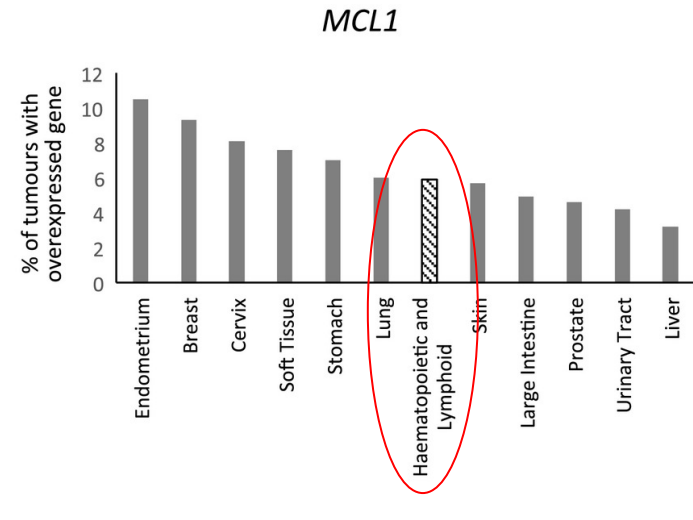
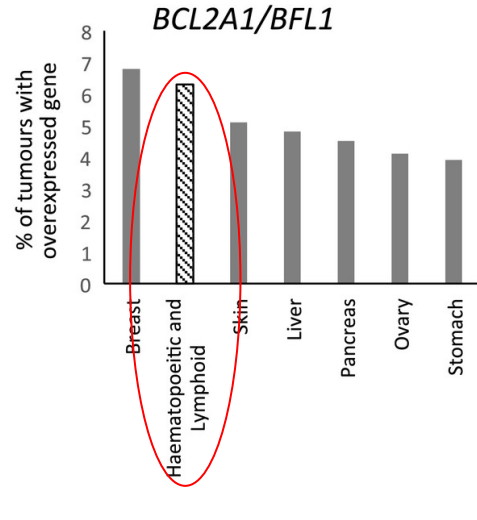
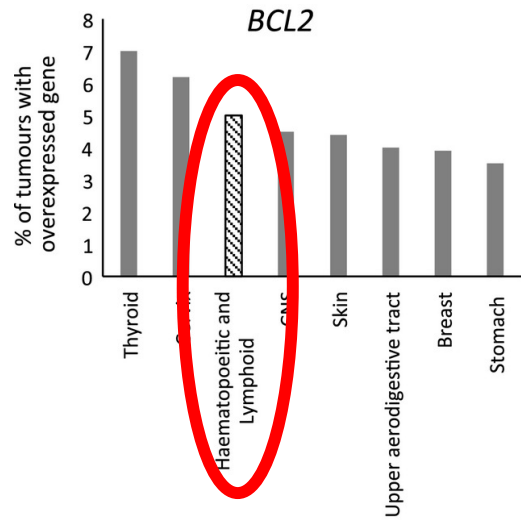


Delbridge ARD, et al., Nat Rev Cancer 2016;16:99-109



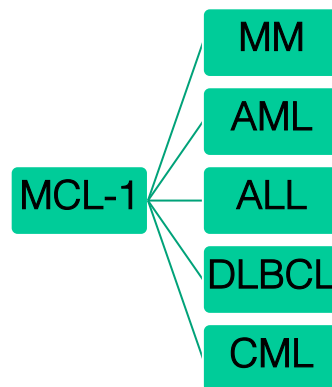
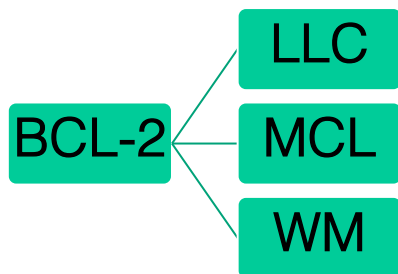


# Overexpression of anti-apoptotic BCL-2 genes



Voegler et al., British Journal of Haematology, 2017; 178:364-379

# BCL-2 family proteins



BCL-XL

# BCL-2/IGH t(14;18)(q32;q21)

BCL-2: gene driver del linfoma follicolare

presente nel 90% dei FL e nel 30% dei DLCL

marker citogenetico del linfoma follicolare

giustappone il locus delle catene pesanti delle Ig (14q32) al locus del gene BCL-2 (18q21)

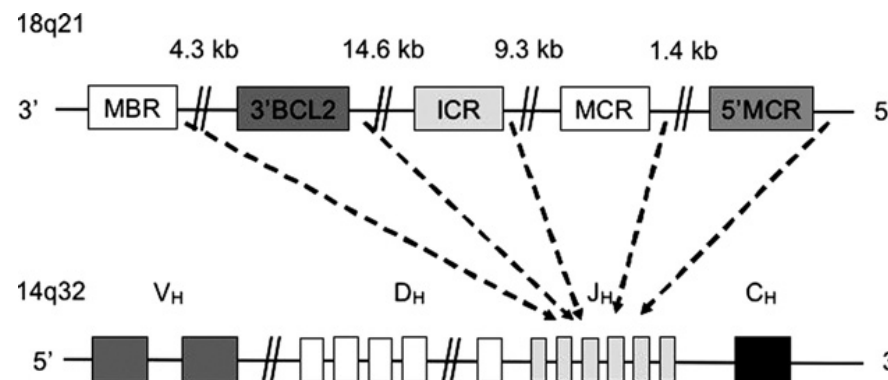
conseguente controllo trascrizionale sull'espressione della proteina

più rare le traslocazioni varianti: t(2;18)(p11;q21) e t(18;22)(q21;q21)

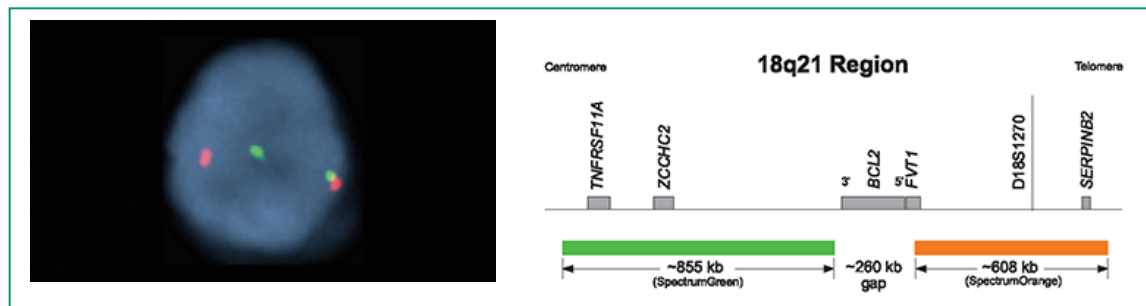
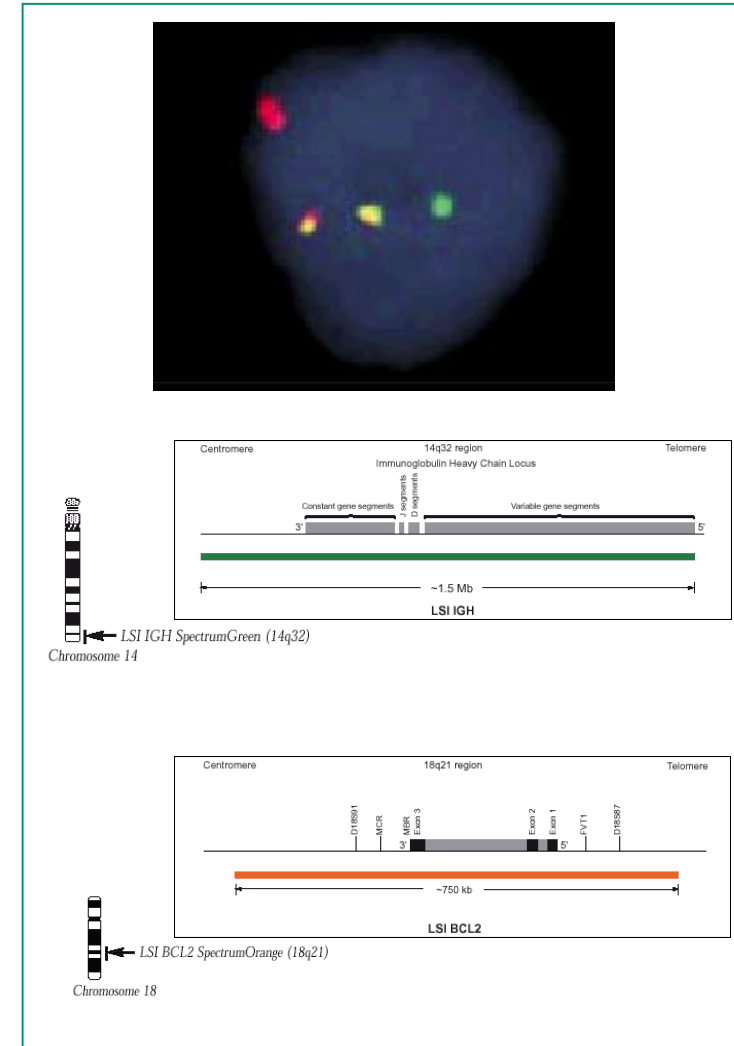
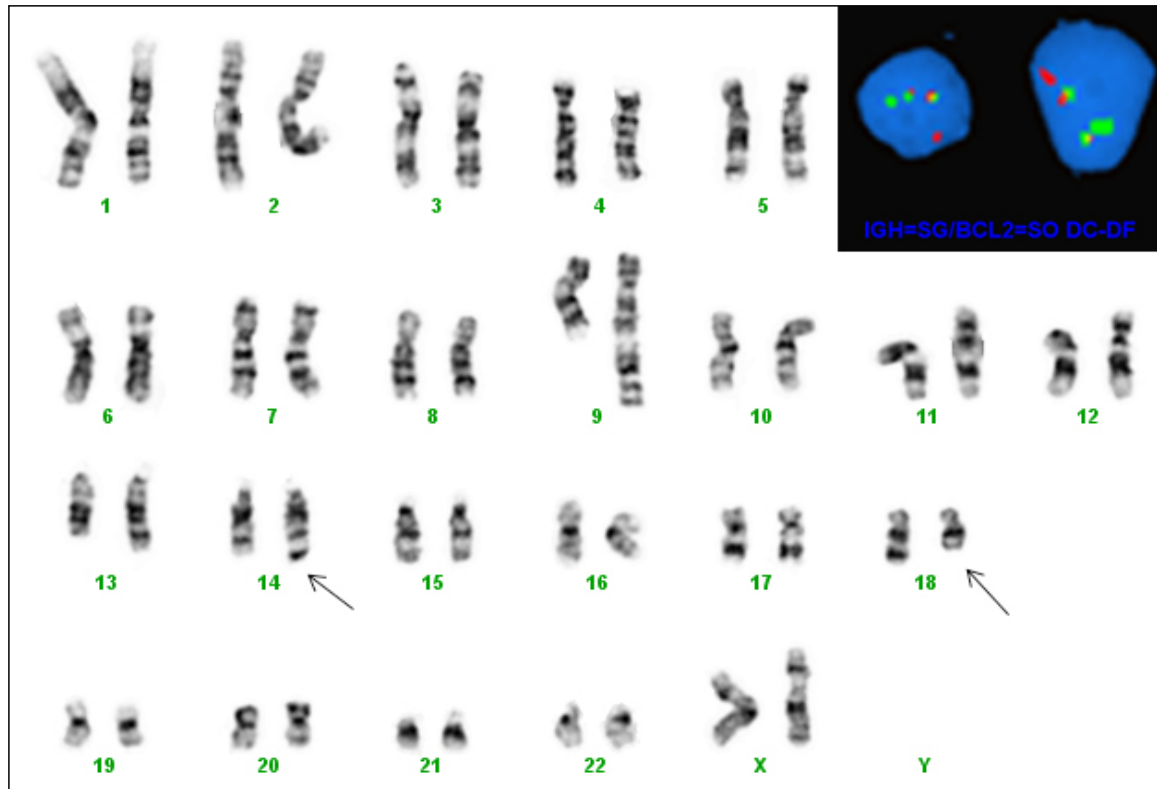
Major Breakpoint Region (MBR): 150 bp 3' al terzo esone BCL-2 (50-70%)

minor cluster region: regione a 20-30kb (circa 5%)

intermediate cluster region (icr) (circa 10%) – 3'BCL2 (6-10%)– 5' mcr (1-3%)



# BCL-2/IGH t(14;18)(q32;q21)



## 2008 WHO Classification

Provisional Category:

*“B-cell-lymphoma, unclassifiable, with features intermediate between DLBCL and BL”*

Dual expression of MYC and BCL2 is now considered a negative prognostic indicator in *“DLBCL, NOS”*, but not a separate category!

MYC and BCL2 immunohistochemistry cannot be used as a surrogate marker for DH cytogenetic status:

- Most DH lymphomas are also DE but
- Most DE are not DH lymphomas!

## 2016 Update of 4<sup>th</sup> WHO Classification

New Category:

*“High-grade B-cell lymphoma with MYC and BCL2 and/or BCL6 rearrangements (HGBL-DH/TH)”*

- Exclusively defined by presence of breakpoints/rearrangements!
- Not including high-level amplifications, CN alterations, **protein expression!**
- Not including low-grade follicular lymphomas with DH/TH

New Category:

*“High-grade B-cell lymphoma (HGBL), NOS”*

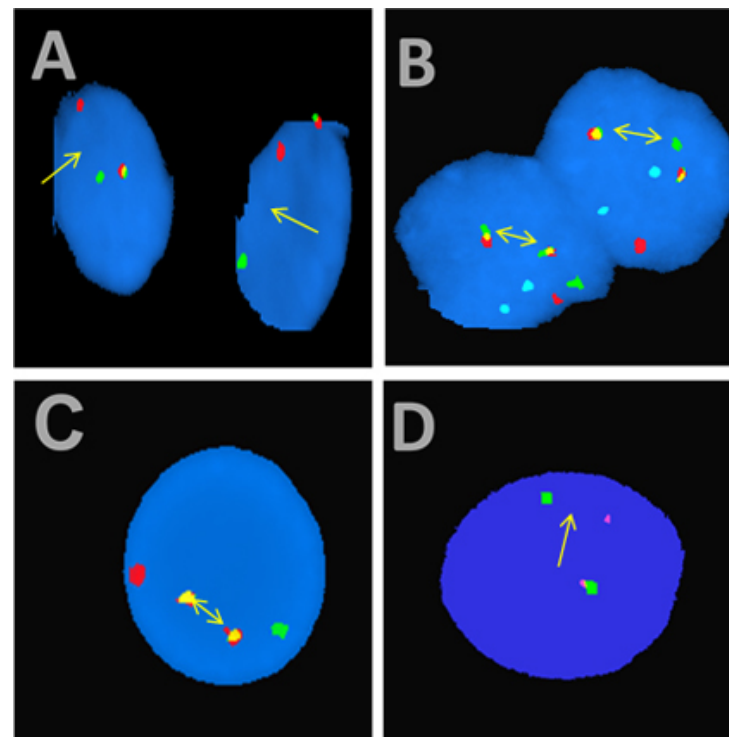
- May carry isolated MYC rearrangements or BCL2 and/or BCL6 breakpoints
- Amplification of MYC may be seen
- Lymphomas with classical DLBCL morphology harboring isolated MYC translocation continue to be diagnosed as *“DLBCL”*



# Linfoma Double (Triple) Hit HGBL-DH/TH



- spesso cariotipi complessi
- 2/3 casi doppia traslocazione con coinvolgimento di 8q24/MYC e t(14;18) con breakpoints in BCL-2
- meno comune traslocazioni di 8q24/MYC e 3q27/BCL6
- rari TH

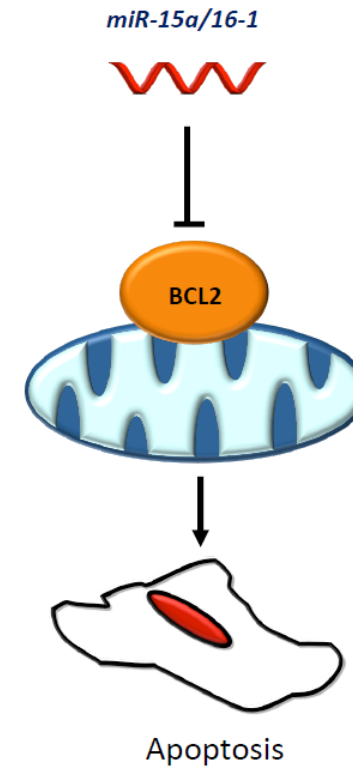
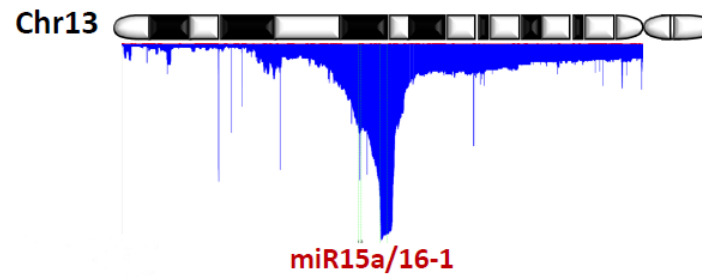
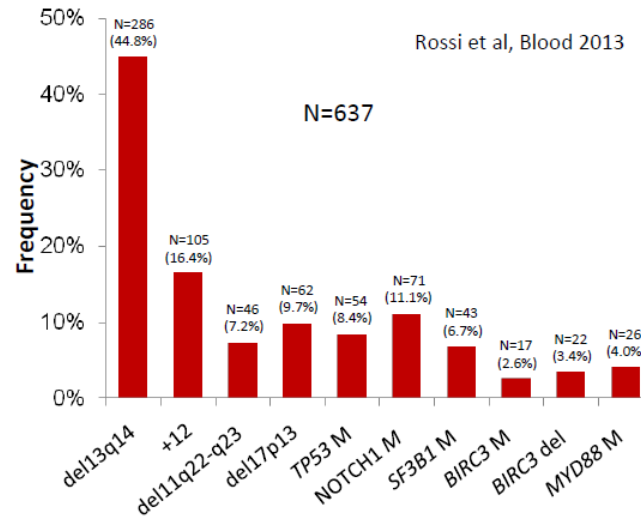


- A) MYC ba
- B) IGH/MYC, CEP8
- C) IGH/BCL2
- D) BCL6 ba

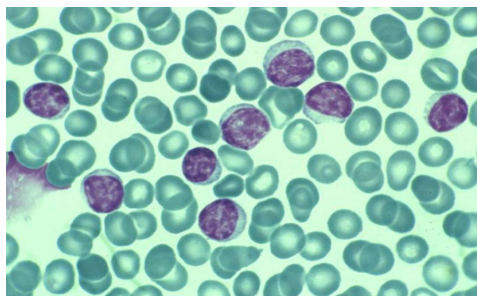


2019

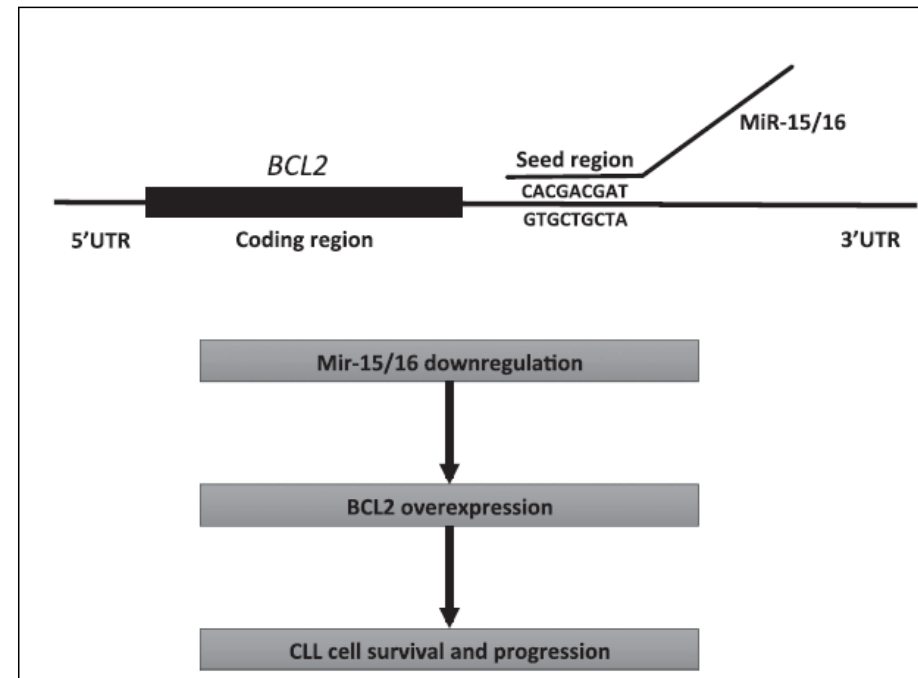
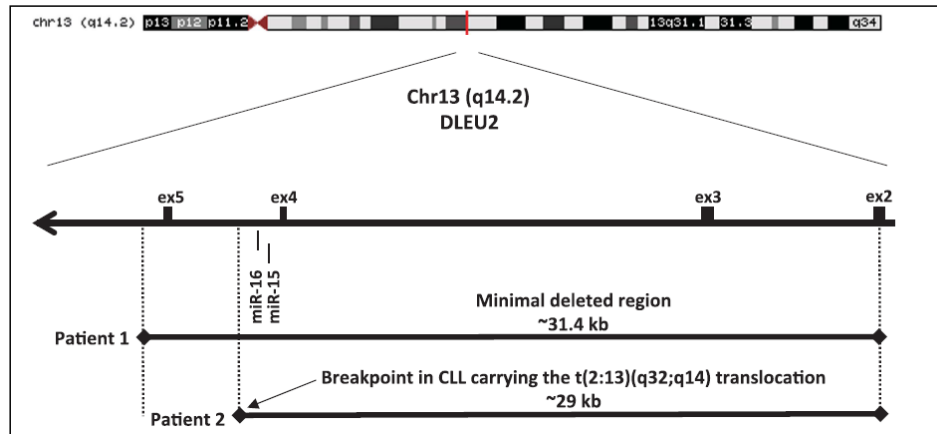
# 13q14 deletion: the most frequent genetic lesion in CLL



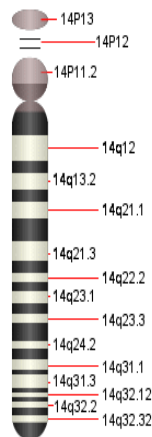
Cimmino et al, PNAS 2005



# Deletion 13q and BCL-2



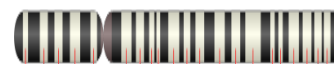
# Mieloma multiplo e traslocazioni (14)(q32)



- Circa 40% dei casi
- Coinvolgono la regione 14q32 con diversi partner cromosomici:

IGH

4p16 (FGFR3/MMSET)



t(4;14) (11-15% dei casi)

6p21 (CCND3)



t(6;14) (2% dei casi)

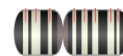
**11q13 (CCND1)****t(11;14) (15-20% dei casi)**

16q26 (c-MAF)



t(14;16) (5% dei casi)

20q12 (MAFB)



t(14;20) (2% dei casi)

t(6;14), t(11;14) fattori prognostici favorevoli.  
 t(14;16), t(14;20) fattori prognostici sfavorevoli  
 t(4;14) fattore prognostico intermedio.

## Myeloma and t(11;14)

- 40% of myeloma patients have translocations, usually involving chromosome 14<sup>[a]</sup>
- Approximately 20% of myeloma patients have t(11;14)<sup>[a]</sup>
- t(11;14) is associated with intermediate risk<sup>[b,c]</sup>

## t(11;14) and BCL2 in Myeloma

- In myeloma cells, t(11;14) confers increased dependence on BCL2<sup>[d]</sup>
- BCL2 inhibition is particularly effective in myeloma patients with t(11;14)<sup>[e]</sup>
- Therefore, testing patients for the presence of t(11;14) may be particularly relevant when considering anti-BCL2 therapy

a. Avet-loiseau H, et al. Blood 2007;109:3489-3495

b. Lakshman A, et al. Leukemia 2017

c. Kaufman GP, et al. Leukemia 2016;30:633-639

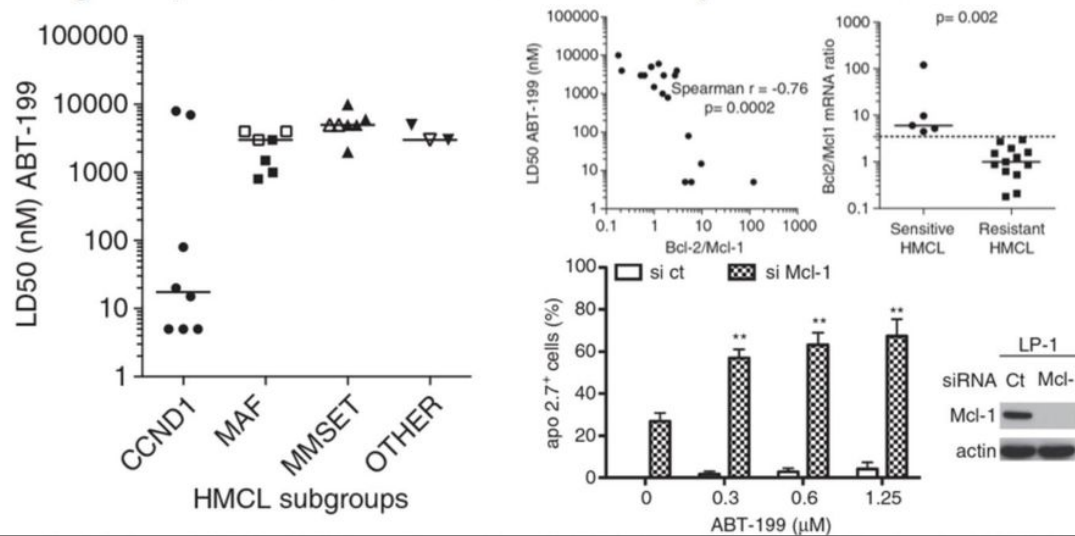
d. Touzeau C, et al. Leukemia 2014;28:210-212

e. Kumar C, et al Blood 2017;130:2401-2409



# BCL-2 inhibition and t(11;14)

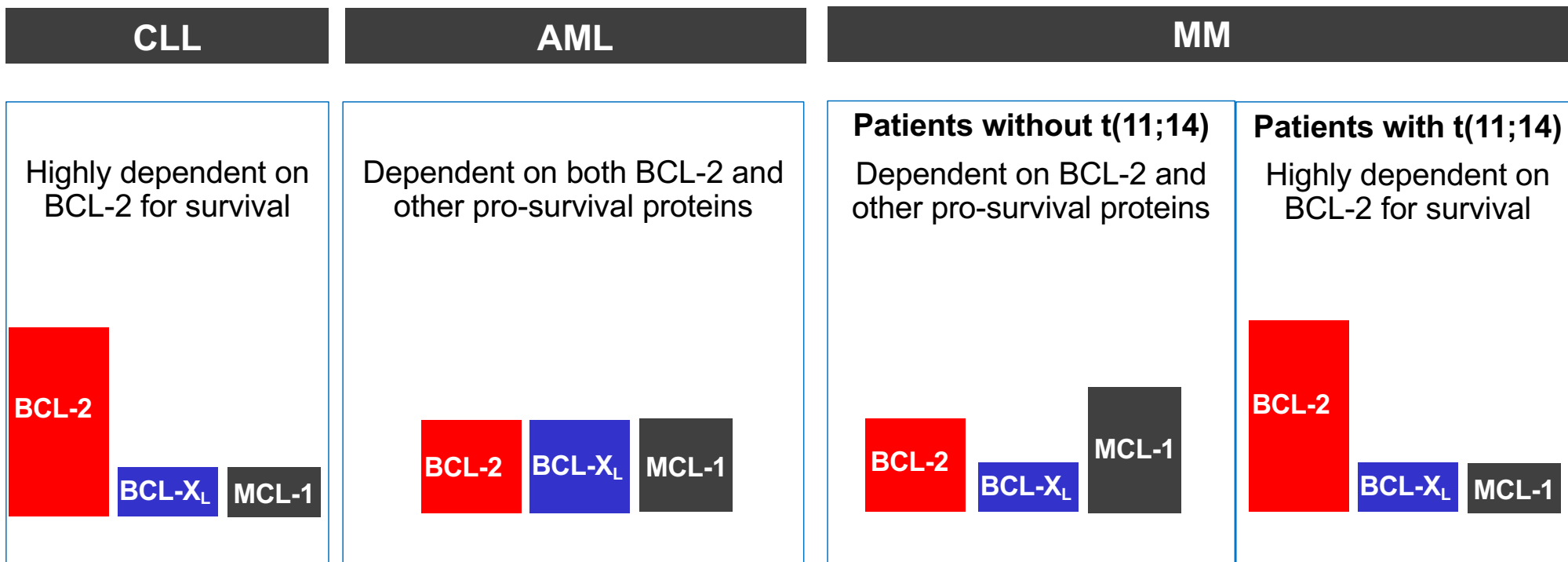
- Myeloma cell lines with t(11;14) (CCND1 subgroup) were the most sensitive to BCL2 inhibition
- A high Bcl2/Mcl1 mRNA ratio indicates sensitivity to BCL2 inhibition



## t(11;14)

- Patients with t(11;14) are more likely to respond to anti-BCL-2 therapy
- High BCL-2/MCL1 and BCL-2/BCLX<sub>L</sub> ratios indicate sensitivity to BCL-2 inhibition

# Malignant cells dependency on BCL-2 for survival across hematologic malignancies



Size of rectangles indicates relative dependency on specific protein for survival

**Malignant cells' dependence on pro-survival proteins makes the BCL-2 family members rational targets for anti-cancer therapy**