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La complessità genetica e molecolare dei linfomi diffusi a grandi cellule

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Conflict of interest



Research Support:	Gilead, Abbvie, Janssen, Cellestia, Xeneticbio
Employee	No
Consultant	No
Major Stockholder	No
Speakers Bureau	No
Honoraria	Gilead, Abbvie, Janssen, Roche, AstraZeneca, Loxo
Scientific Advisory Board	Gilead, Abbvie, Janssen, AstraZeneca, MSD, Loxo, Verastem

Diffuse large B-cell (NOS)

Germinal Centre B-cell type

Activated B-cell type

T-cell/histiocyte rich large B-cell

Primary DLBCL of central nervous system

Primary cutaneous DLBCL leg type

EBV+ DLBCL, NOS

EBV+ mucocutaneous ulcer

Primary mediastinal lymphoma

Intravascular large B-cell lymphoma

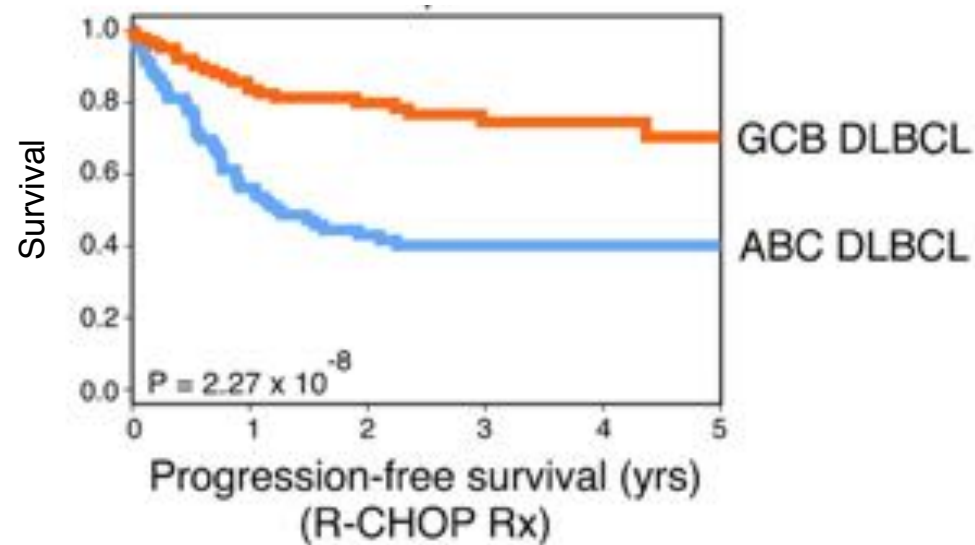
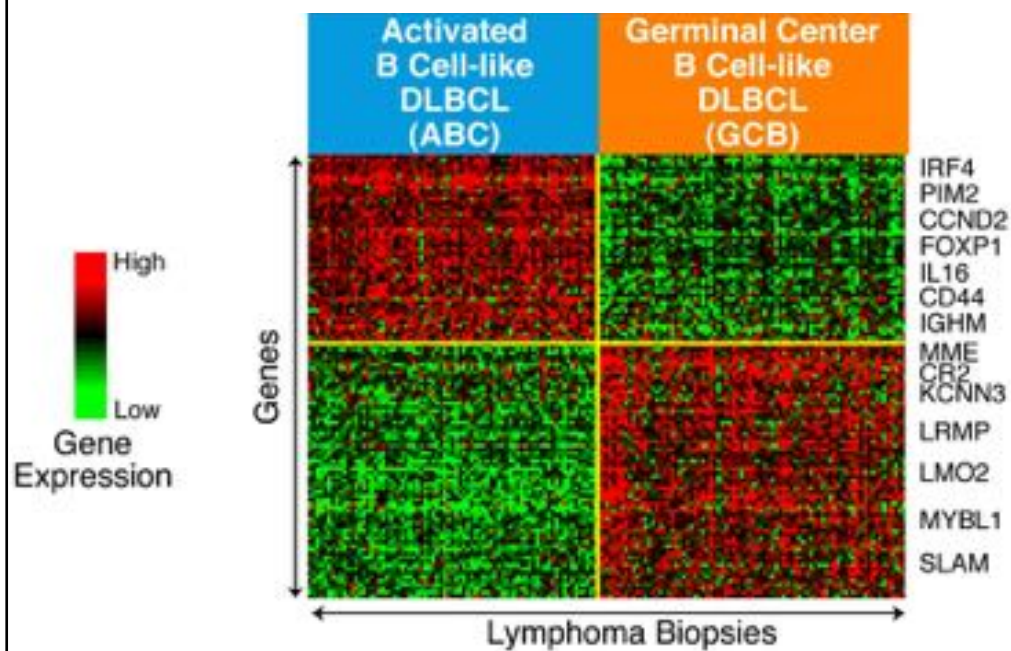
Primary effusion lymphoma

Plasmablastic lymphoma

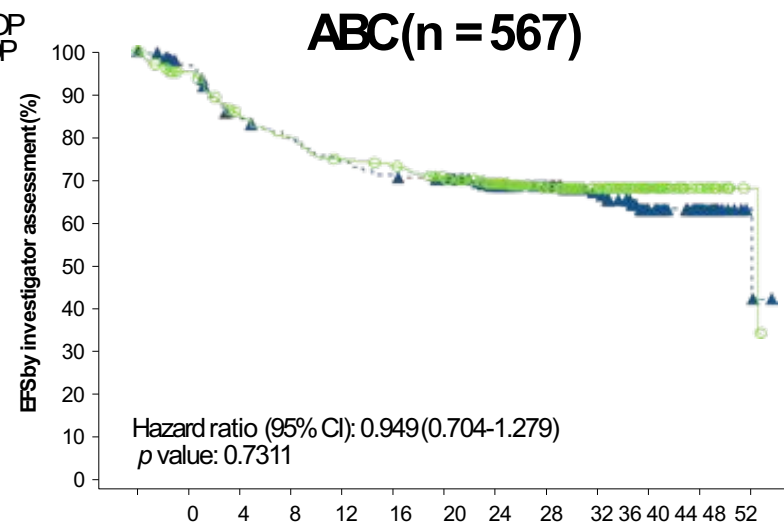
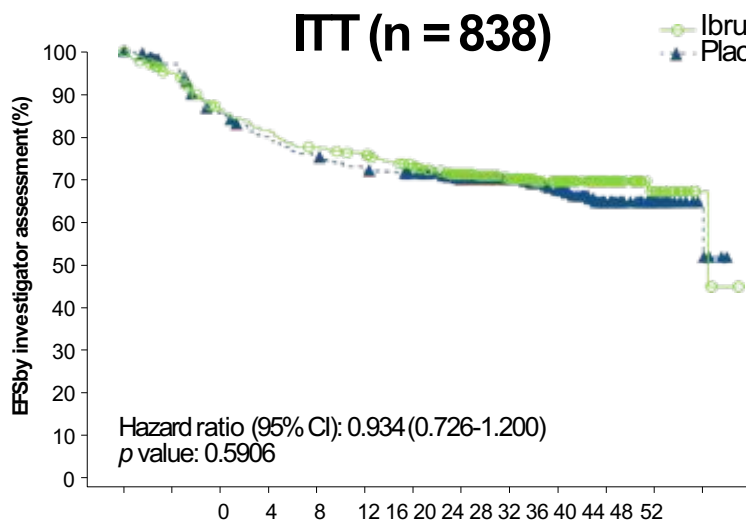
High-grade B-cell lymphoma with *MYC* and *BCL2* and/or *BCL6* rearrangement

High-grade B-cell lymphoma (NOS)

Phenotypic subtypes of DLBCL



No benefit from the addition of ibrutinib to R-CHOP in non-GC DLBCL



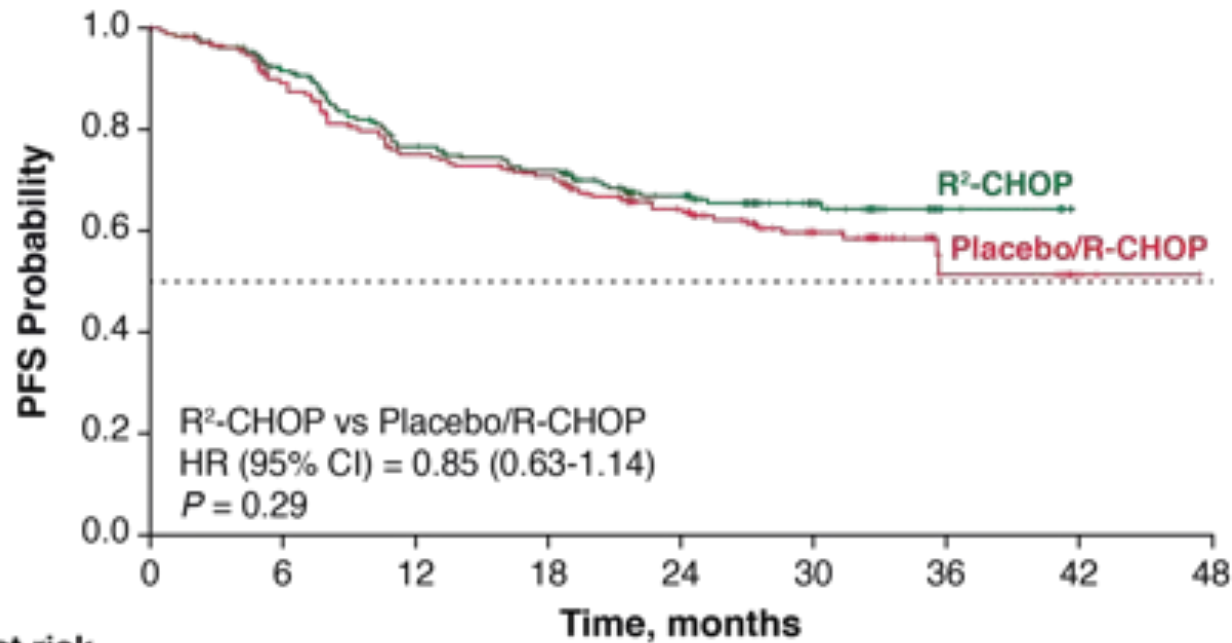
Patients at risk

	0	4	8	12	16	20	24	28	32	36	40	44	48	52
Ibrutinib + R-CHOP	419	374	336	316	300	291	276	233	179	120	63	25	3	0
Placebo + R-CHOP	419	390	341	316	297	286	277	244	184	118	60	33	5	0

Patients at risk

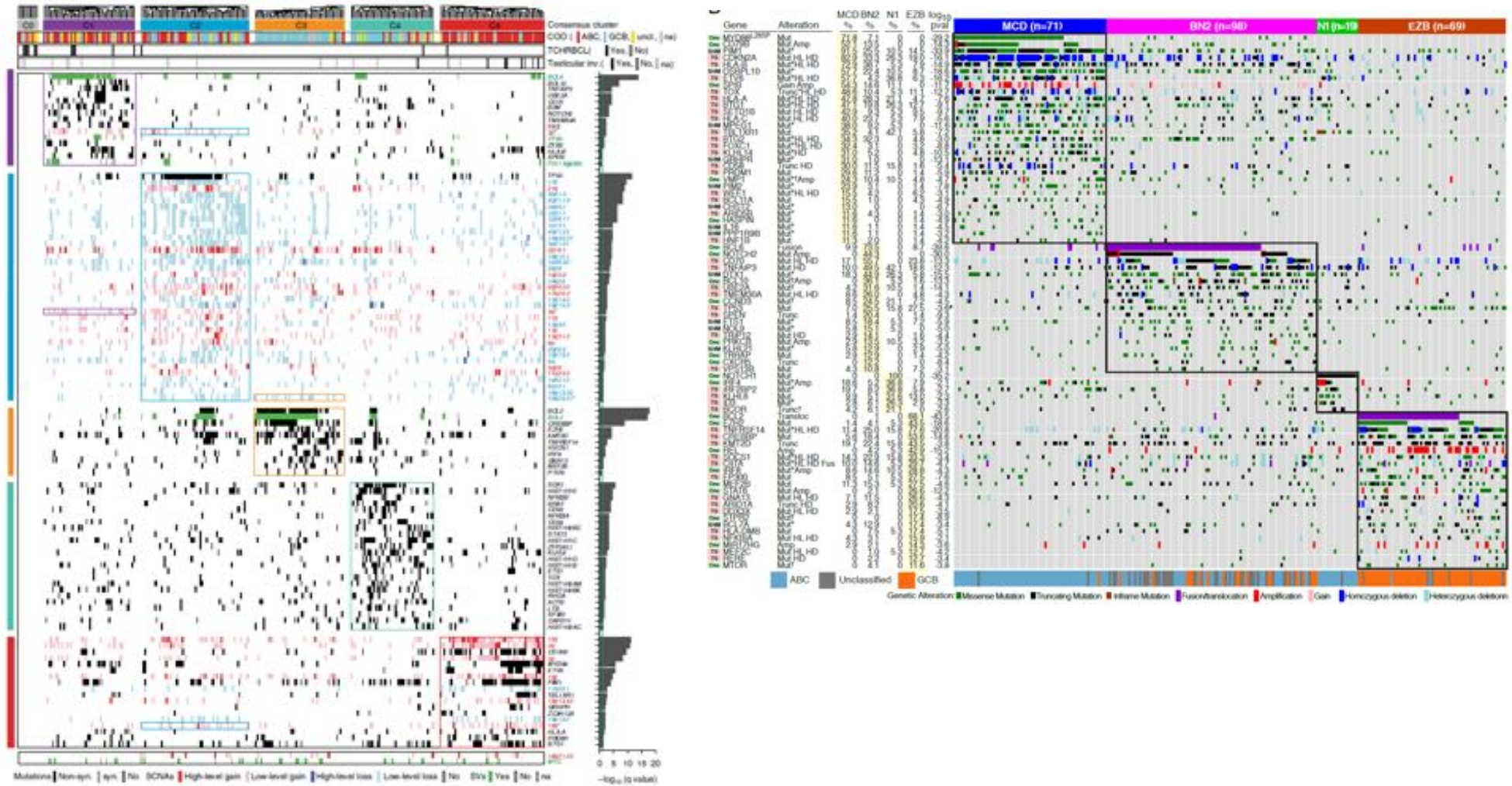
	0	4	8	12	16	20	24	28	32	36	40	44	48	52
Ibrutinib + R-CHOP	285	256	225	211	197	191	181	149	111	77	39	15	2	0
Placebo + R-CHOP	282	260	225	212	196	188	183	160	125	78	41	25	3	0

No benefit from the addition of lenalidomide to R-CHOP in ABC DLBCL

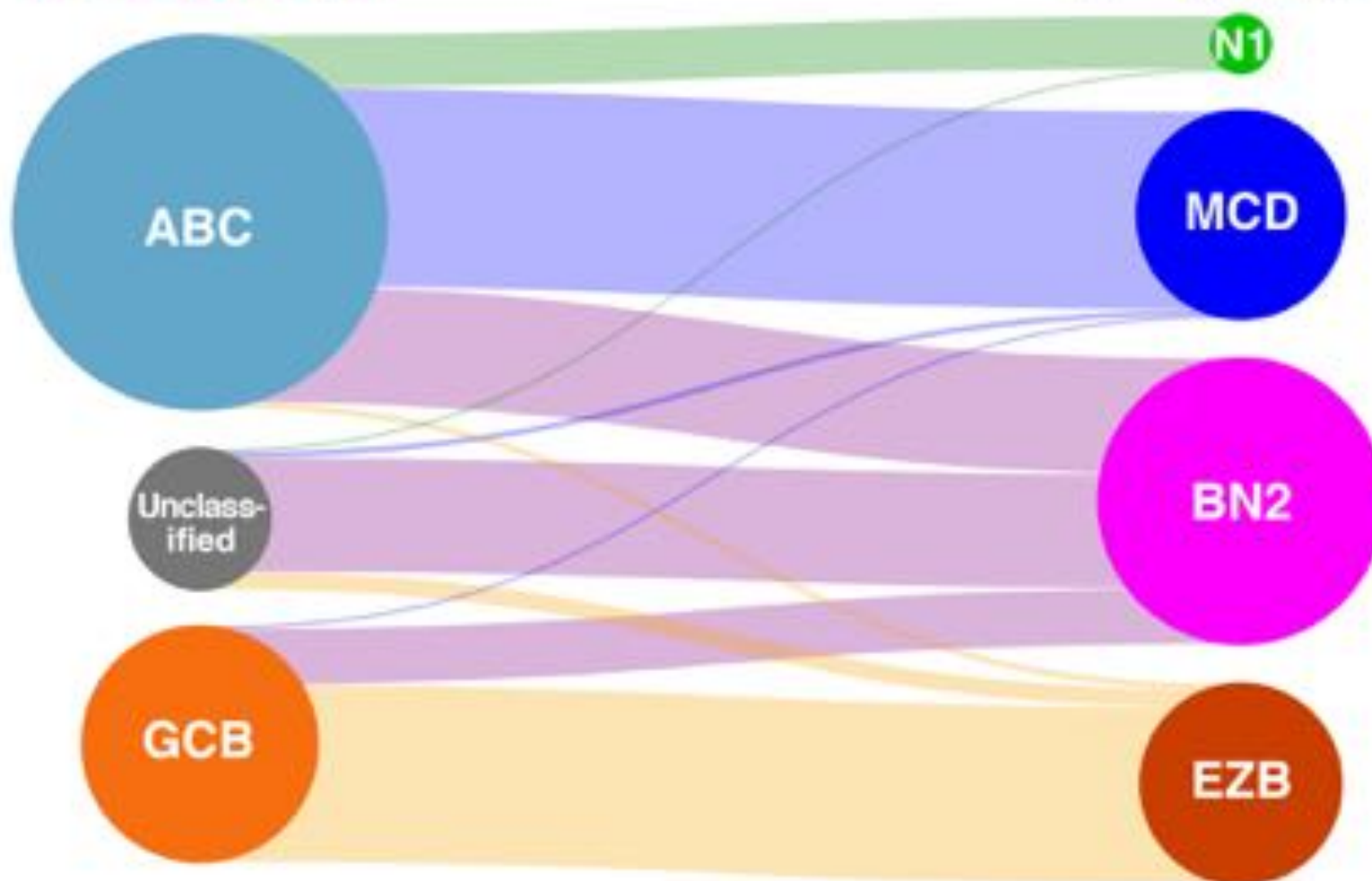
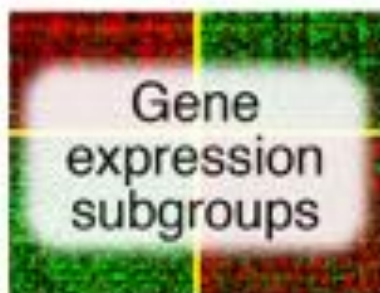


Number at risk		Time, months								
		0	6	12	18	24	30	36	42	48
R ² -CHOP	285	221	178	162	119	57	10	0		
Placebo/R-CHOP	285	229	187	173	111	55	10	3	0	

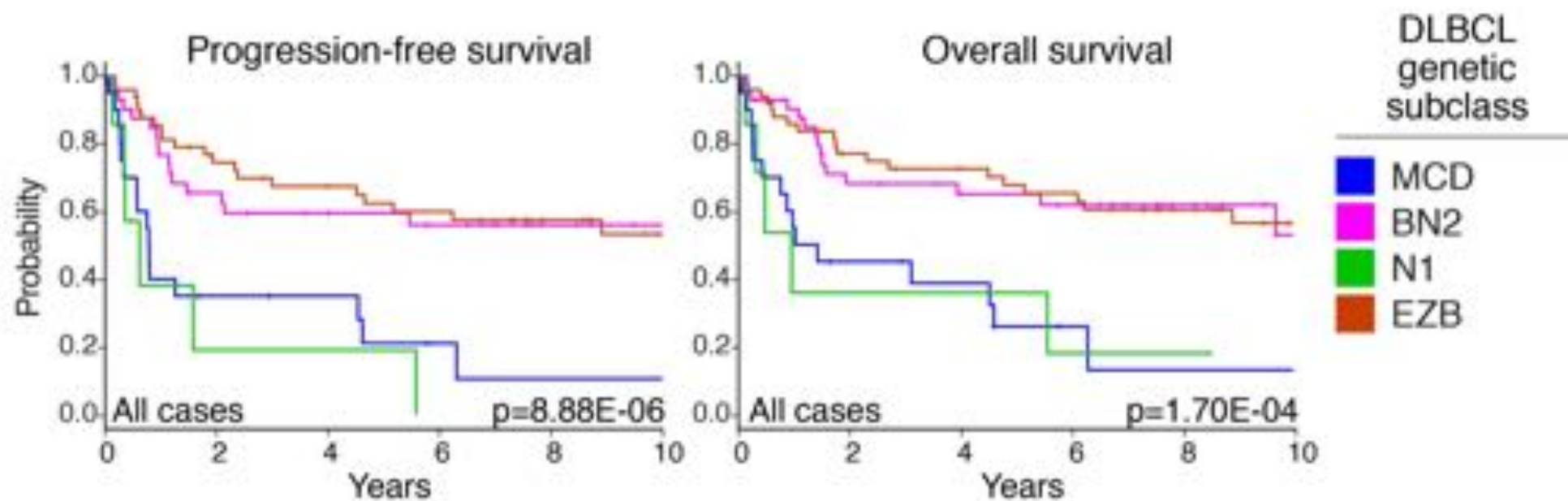
Molecular subtypes of DLBCL



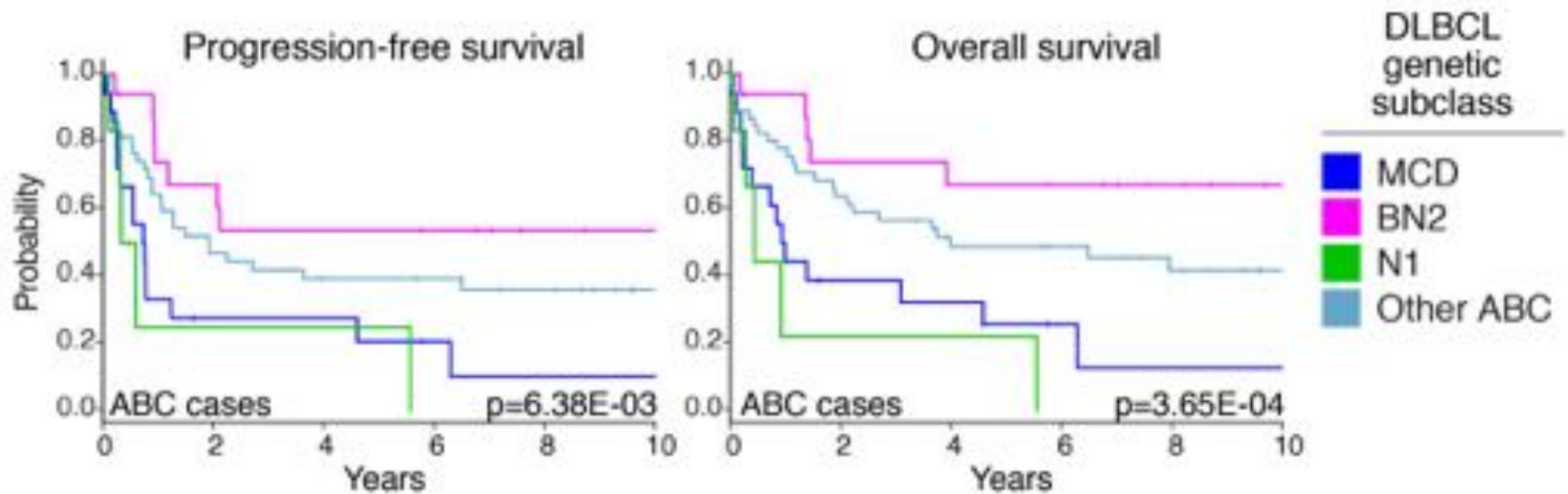
The Molecular Diagnosis of Diffuse Large B Cell Lymphoma v.2.0



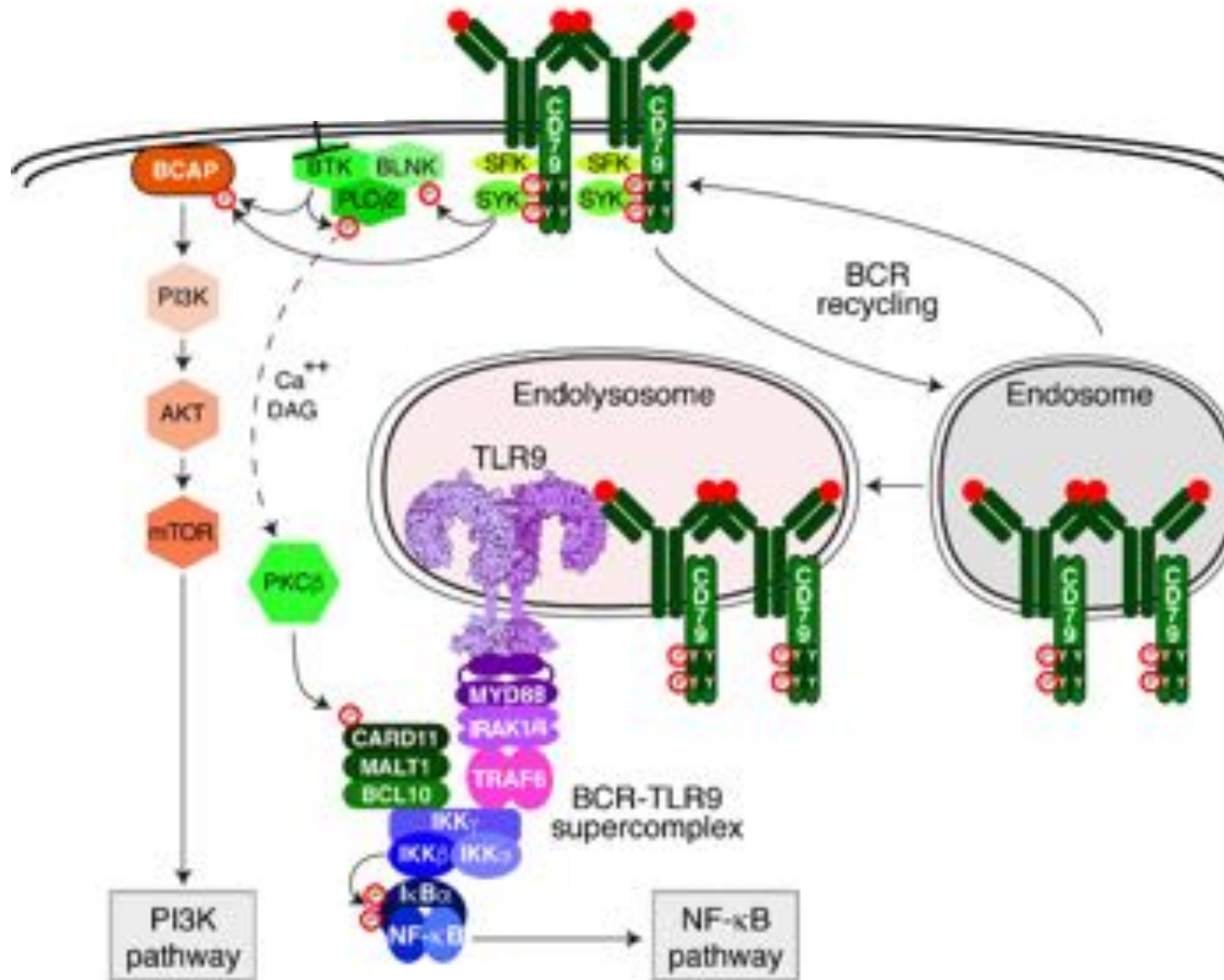
DLBCL Genetic Subtypes Predict Survival Following R-CHOP



DLBCL Genetic Subtypes Predict Survival Within ABC DLBCL



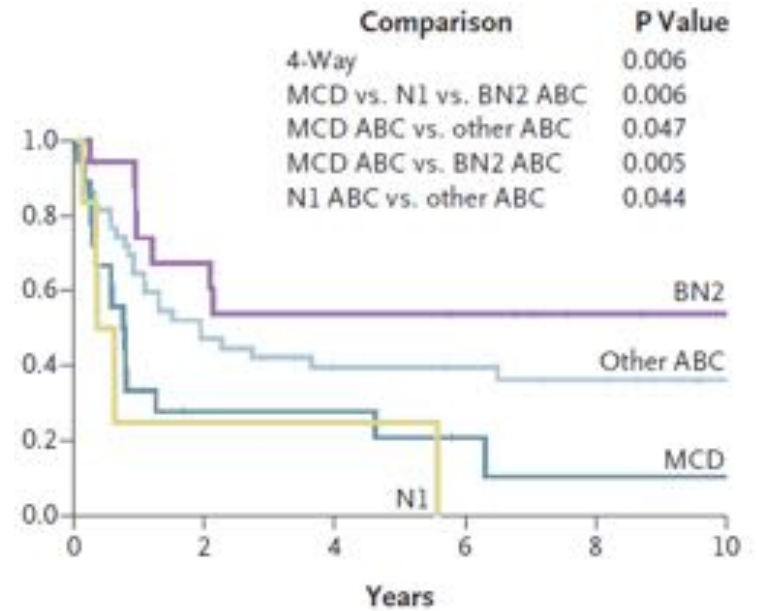
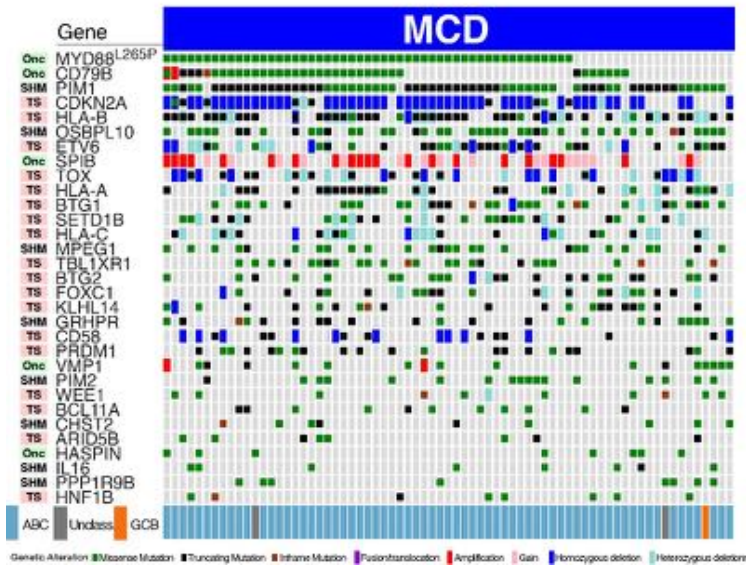
MYD88 co-localizes with the BCR to form a signaling supercomplex in ABC DLBCL



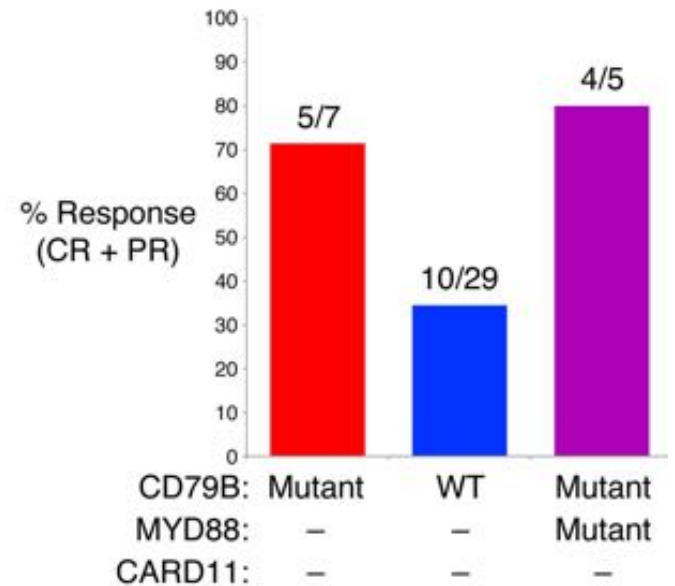
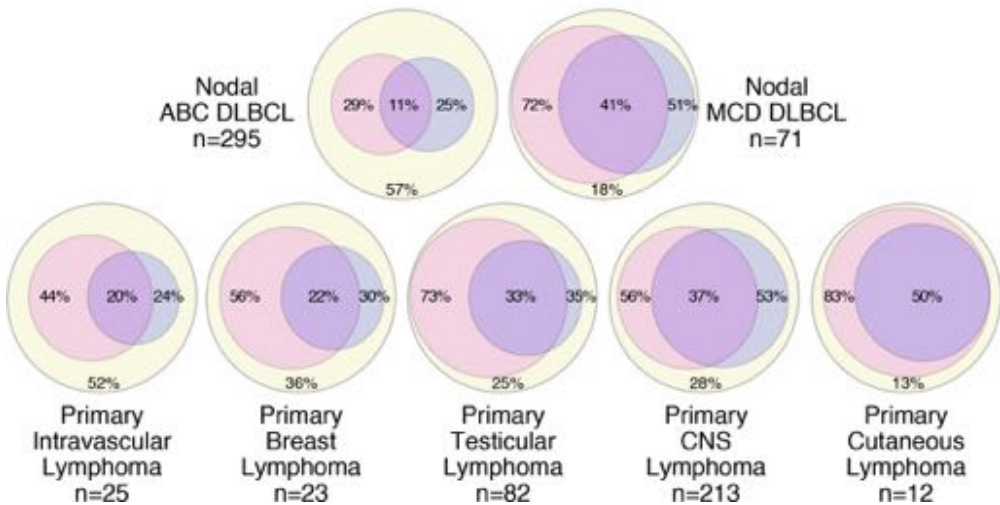
The MCD subtype of DLBCL



The MCD Genetic Subtype of DLBCL

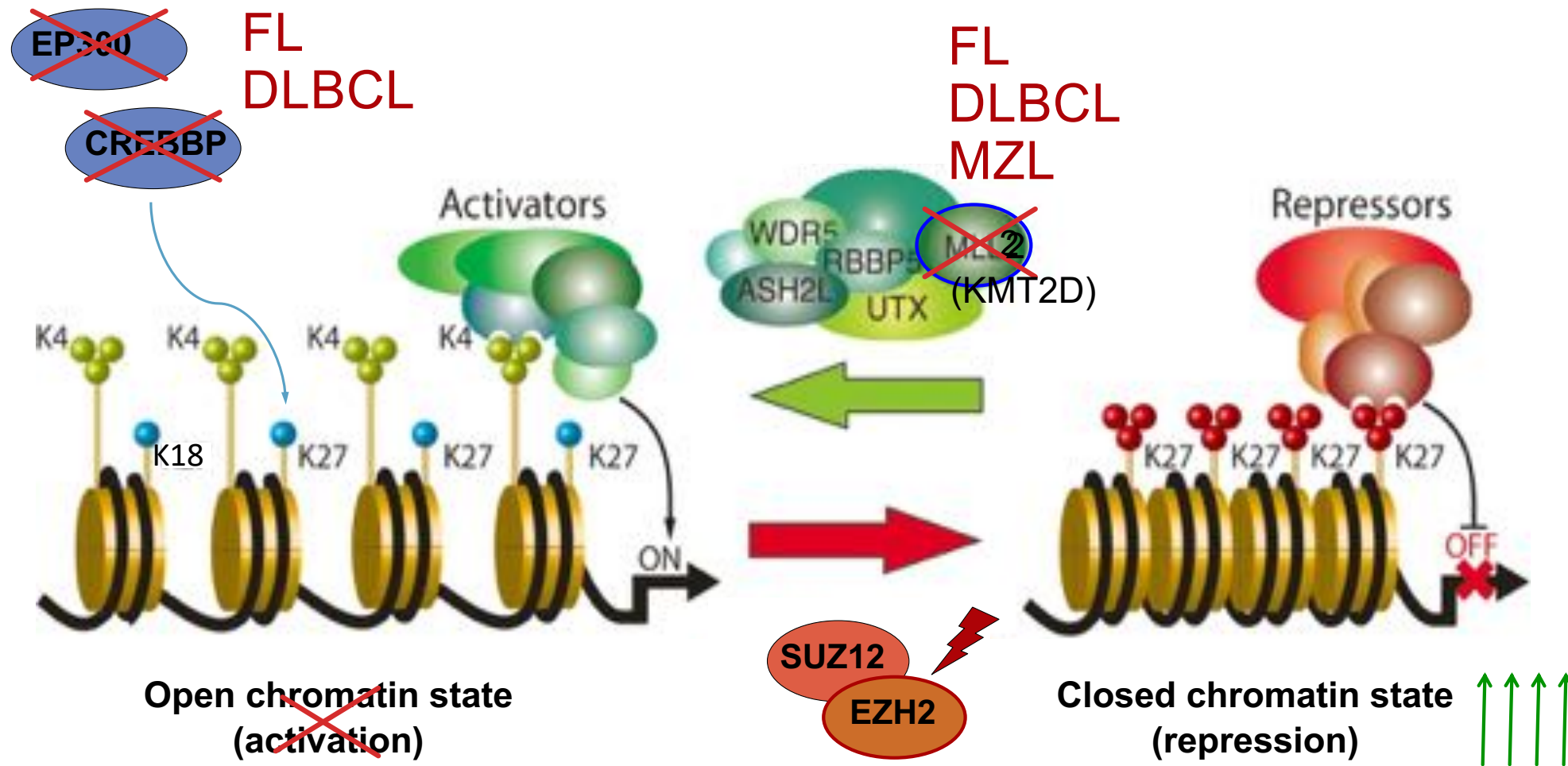


Enrichment for CD79B and MYD88^{L265P} Mutations in MCD DLBCL and in Extranodal Lymphomas



Schmitz et al. New Engl J Med 2018

Lymphoma driver genes in the chromatin organization pathway



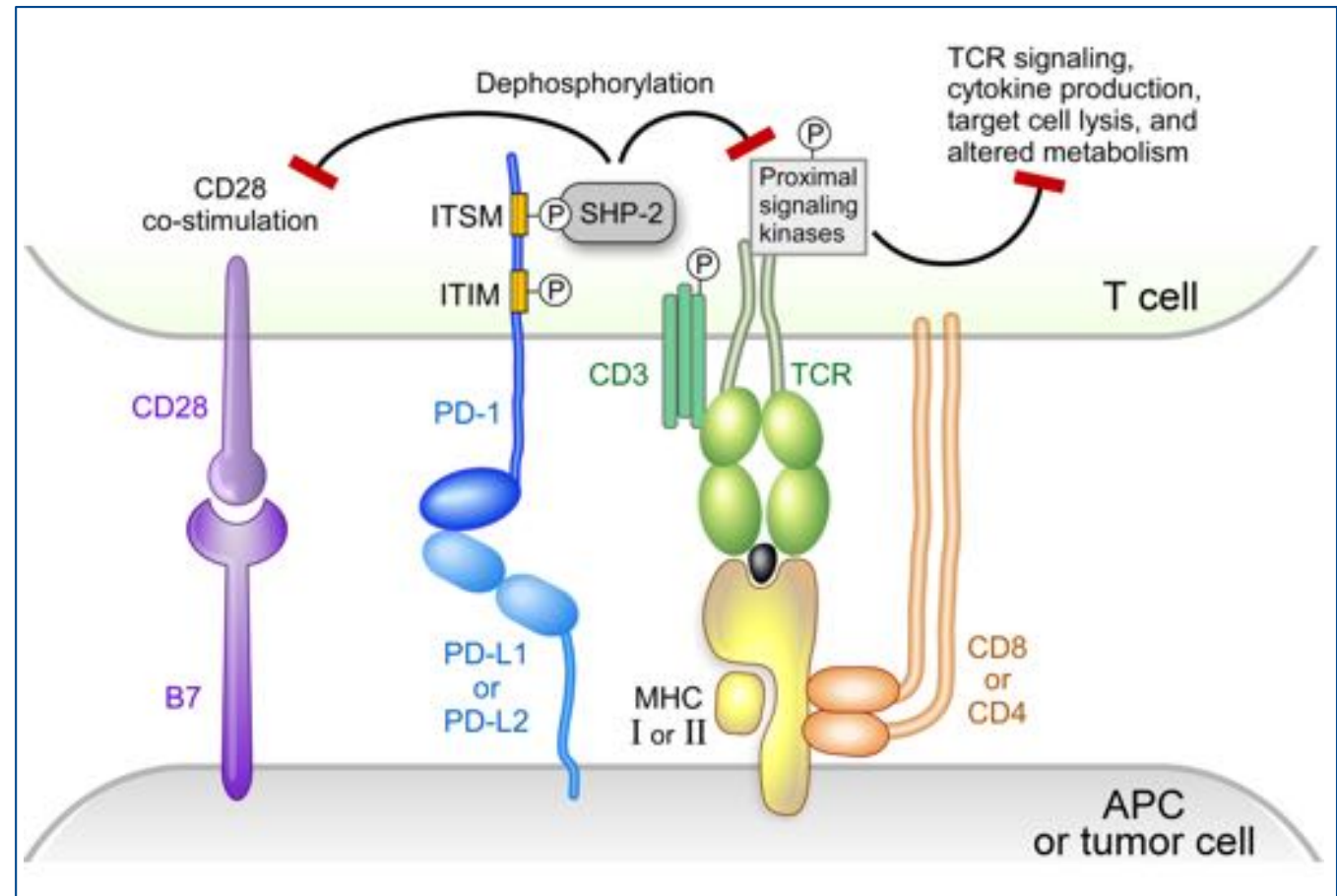
- H3K27Ac, H3K18Ac
- H3K4me1 (enhancer)/H3K4me3 (promoters)
- H3K27me3

FL DLBCL

Lymphoma driver genes in the immune evasion pathway



- 9p24.1/ PD-L1/ PD-L2 alterations
- $\beta 2M$ inactivating mutations/ deletions (perturb MHC class I)
- *CIITA* inactivating alterations (perturb MHC class II)
- Evaluate expression of antigen presentation pathway components in cHL



DLBCL
PMBL
cHL

Modified from Baumeister, S.H. *et al.* 2016;
Annu. Rev. Immunol. 34:539-73

Reichel *et al.*, *Blood* 2015; 125:1061-72
Steidl *et al.*, *Nature* 2011; 471:377-81

Oncogenic TLR and BCR Signaling and PD-1 Ligand Deregulation in PTL and EBV- PCNSL

Oncogenic TLR and BCR Signaling

	PTL	EBV - PCNSL
<i>MYD88</i> ^{L265P}	78% (38/49) ^a	60% (33/55) ^b
<i>CD79B</i> ^{Y196mut}		
Total	49% (22/45) ^c	38% (19/50) ^d
With <i>MYD88</i> ^{L265P}	91% (20/22)	89% (17/19)

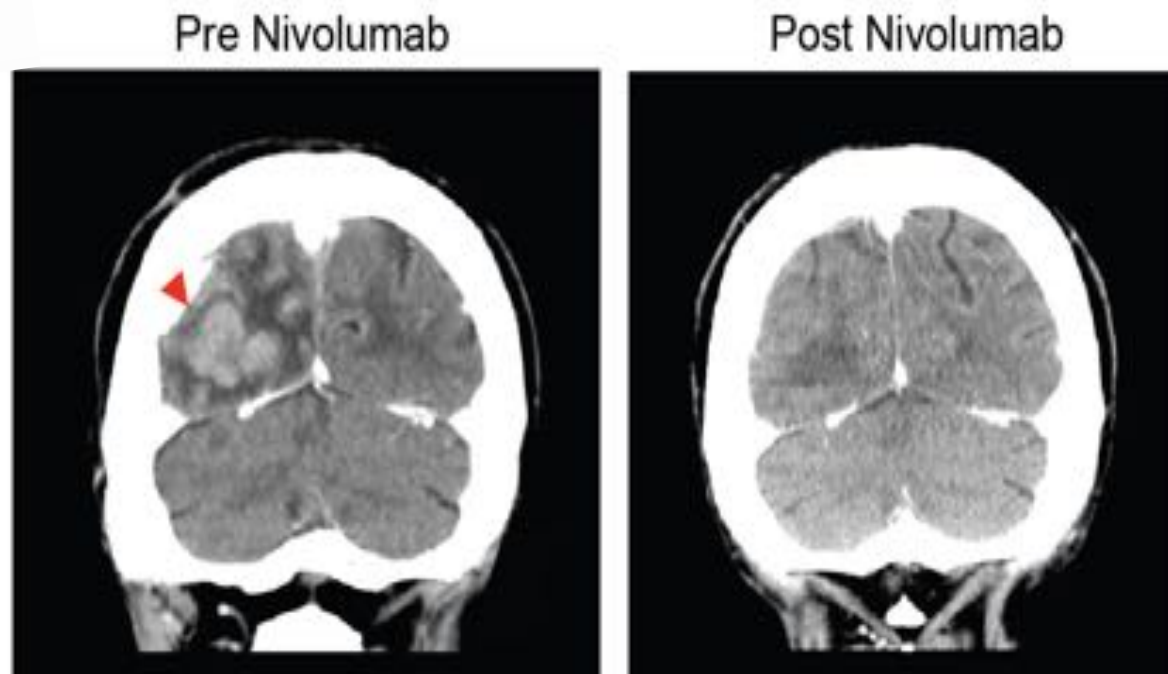
PD-1 Ligand Deregulation

9p24.1/ <i>PD-L1</i> and/or <i>PD-L2</i> gain	54% (26/50) ^e	52% (33/63) ^f
<i>PD-L1</i> or <i>PD-L2</i> translocation	4% (2/50) ^g	6% (4/66) ^h

PCNSL/ SCNSL Case Series

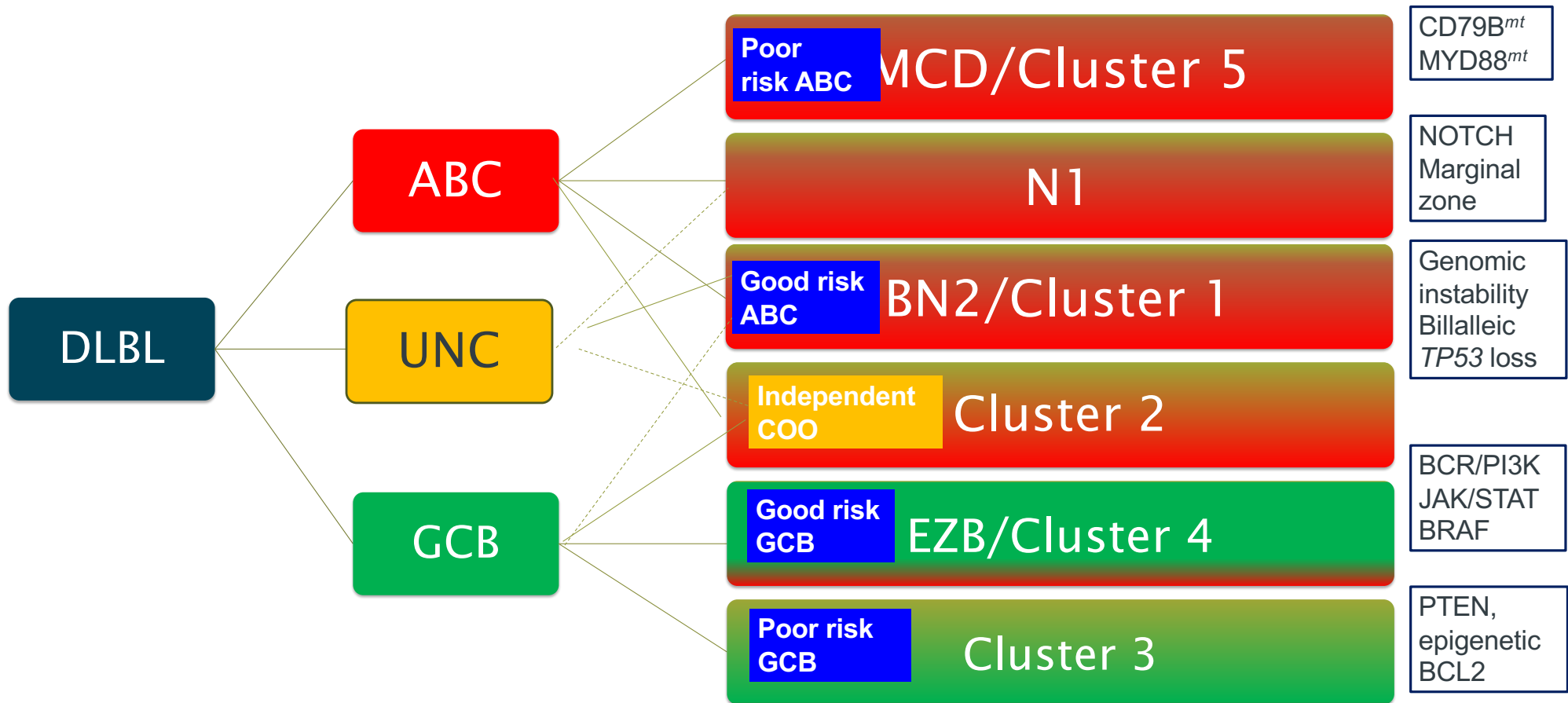
- N= 5 pts (2 women, 3 men)
 - Recurrent PCNSL 3
 - Primary refractory PCNSL 1
 - Recurrent PTL (SCNSL) 1
- Median Age = 64 yrs (range, 54-85 yrs)
- Median KPS = 70% (range, 40-80 %)

Nivolumab in PCNSL and PTL

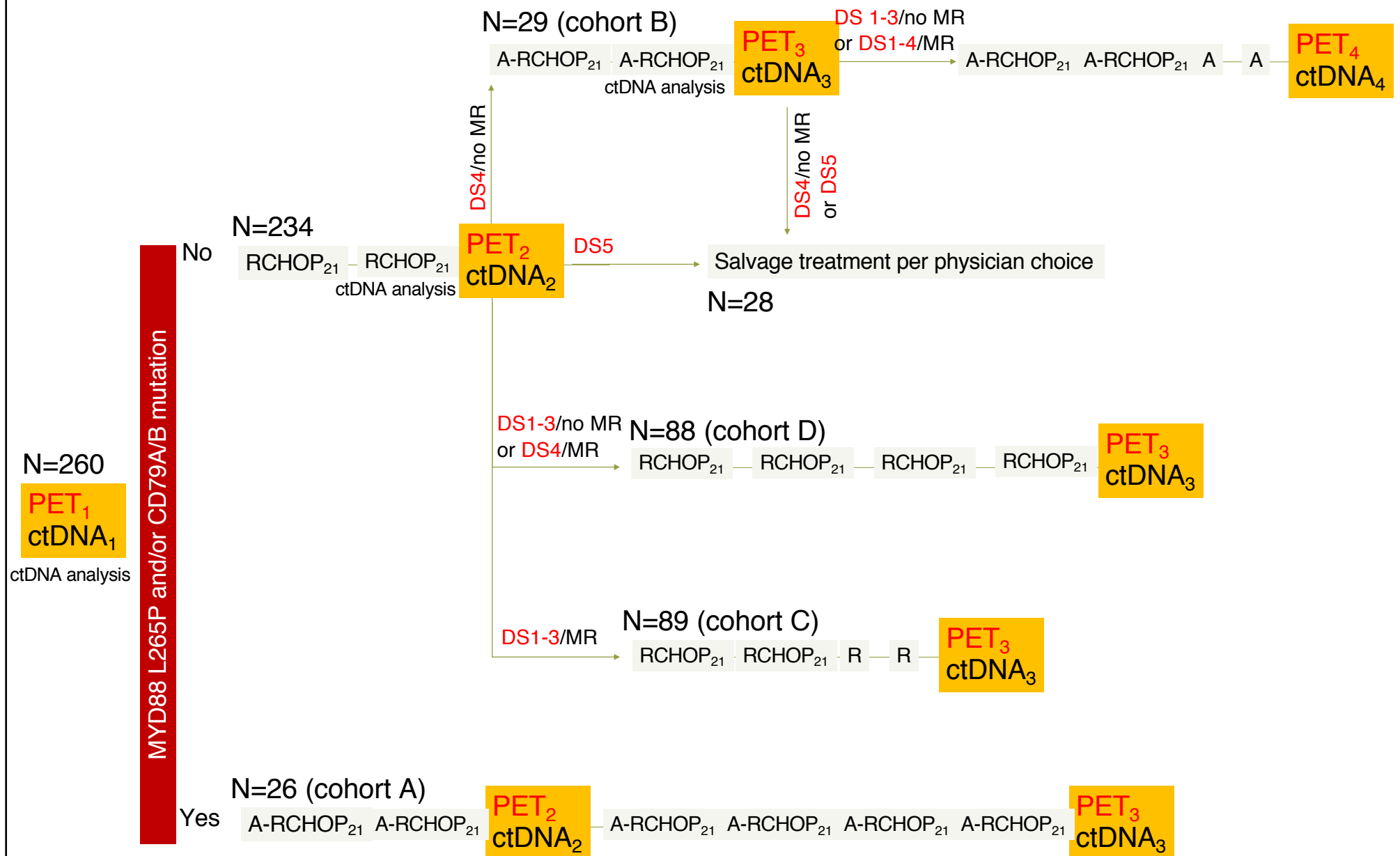


- All 5 pts had clinical and radiographic responses to PD-1 blockade – 4 CRs and 1 PR
- 3 pts remain progression – free (PF) at 13+-17+mos; 2 pts PF for 14 and 17 mos.
- National/ international trial of PD-1 blockade (Nivolumab therapy) in relapsed/refractory PCNSL and PTL underway – CA209-647

A new taxonomy and new targets



ctDNA-driven therapy of DLBCL: SAKK 38





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