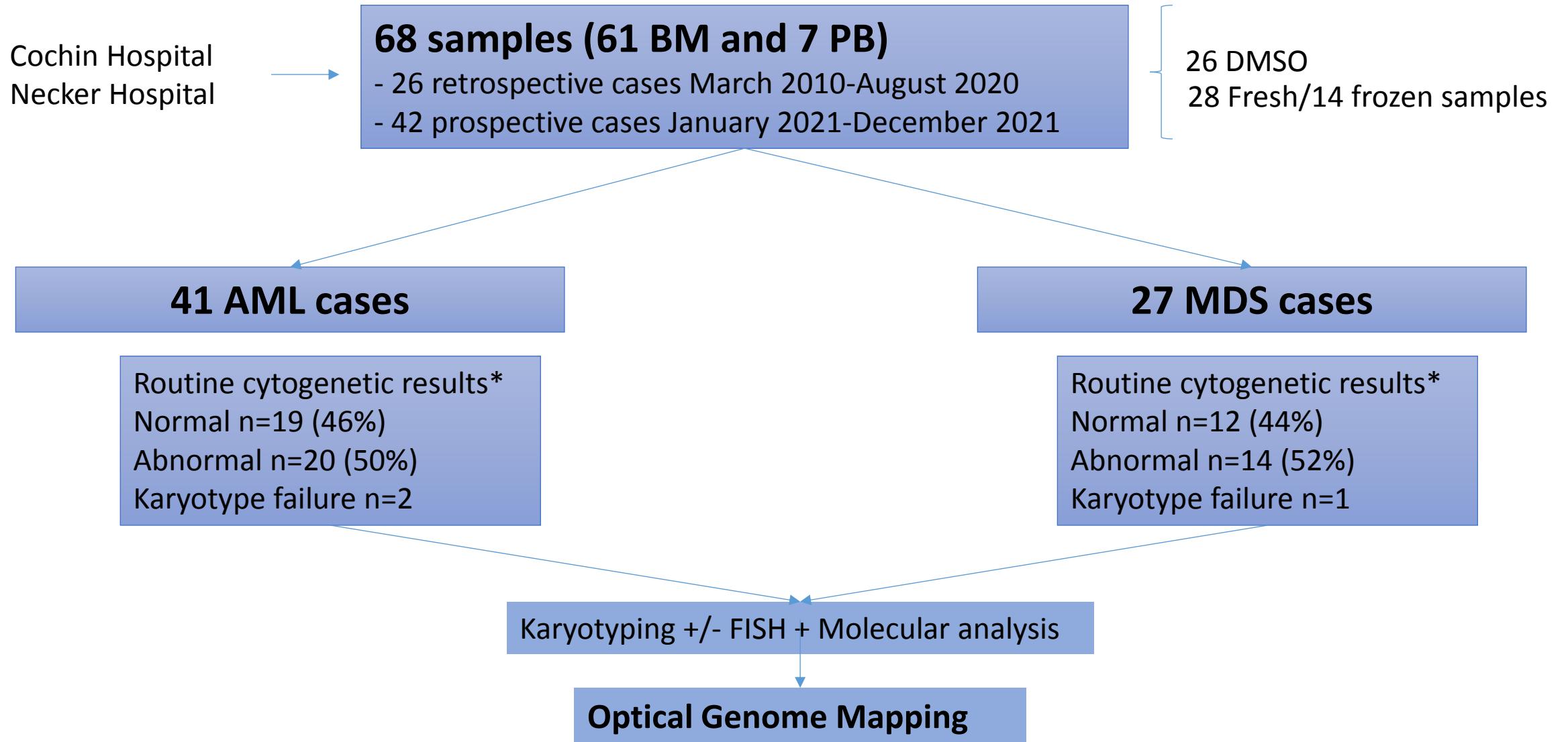


Optical genome mapping refines cytogenetic diagnostics, prognostic stratification and provides new molecular insights in adult MDS/AML patients

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Patients and samples



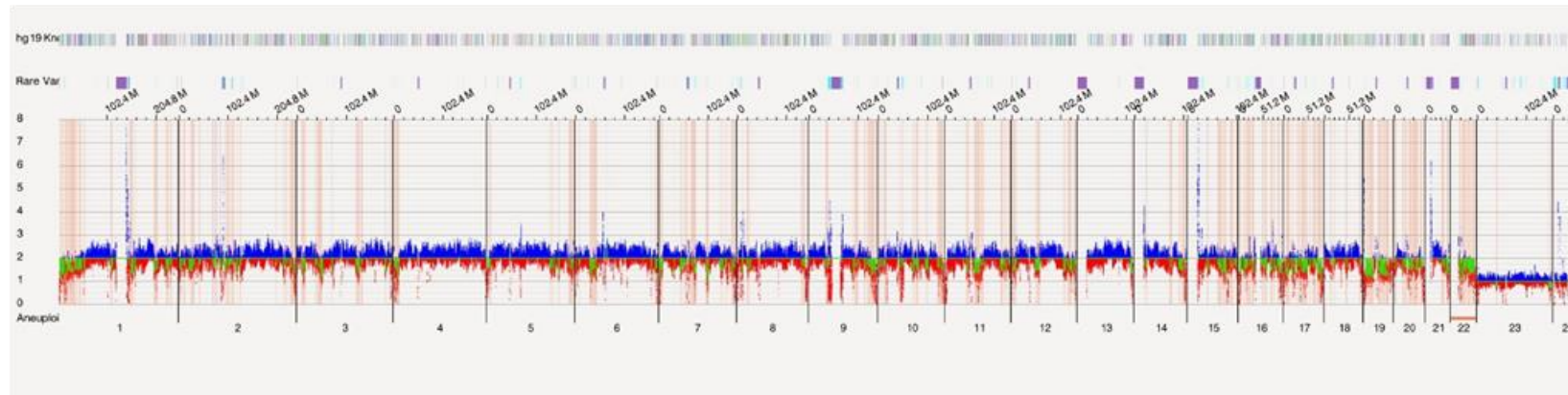
*Adult MDS/AML Patients were selected based on their cytogenetic profile to include a roughly equivalent number of patients with normal or abnormal karyotype in each entity

Purpose of the study

- Evaluation of the performances of OGM in the detection of somatic cytogenetic abnormalities in MDS/AML
- Assessment of the clinical utility of OGM in the risk stratification based on the established international prognostic risk scores in MDS/AML
- Identification of new candidates in MDS/AML pathogenesis

OGM quality data

- Average coverage: 386X (124-581X)
- 12/68 samples: fragmented DNA samples
- For 6 of these cases: background noise made the interpretation of the CNV tool impossible



➤ Artefactual CNVs due to low quality DNA, $N50(>150Kb)=0.21$ (Patient 19).

➤ Examples of artefactual abnormalities rendered by OGM

Data interpretation

Step 1: Prefiltration according to the Bionano Genomics recommended criteria



Step 2: Exclusion of artefactual and polymorphic variants



Step 3: Inclusion of relevant SV and CNVs

- Confidence scores: insertion, 0; deletion, 0; inversion, 0.7; duplication, -1; intra-translocation, 0.3; inter-translocation, 0.65, and copy number, 0.99 (low stringency, filter set to 0)
- Size cutoff: 5Kb for insertions/deletions detected by the SV tool, and 500Kbp for the CNV tool
- CNV fractional analysis: <1.8 for deletions > 2.2 for duplications

- Variants supported by less than 5 self molecules
- Variants detected in healthy individuals by comparison to the Bionano Genomics database of 200 human control samples and to the Database of Genomic Variants (DGV)
- Variants overlapping with difficult-to-map regions by comparison to the Bionano Genomics database of masked genomic regions
- Translocations with an incorrect mapping or close to difficult-to-map regions

- All CNVs with size > 500Kb
- All translocations not considered as artefactual in step 2
- All variants regardless of their size if they overlap one of the genes defined as relevant in malignant hematological diseases

OGM precisely detects most of the significant cytogenetic abnormalities observed by routine cytogenetics

➤ Examples of variants detected by OGM

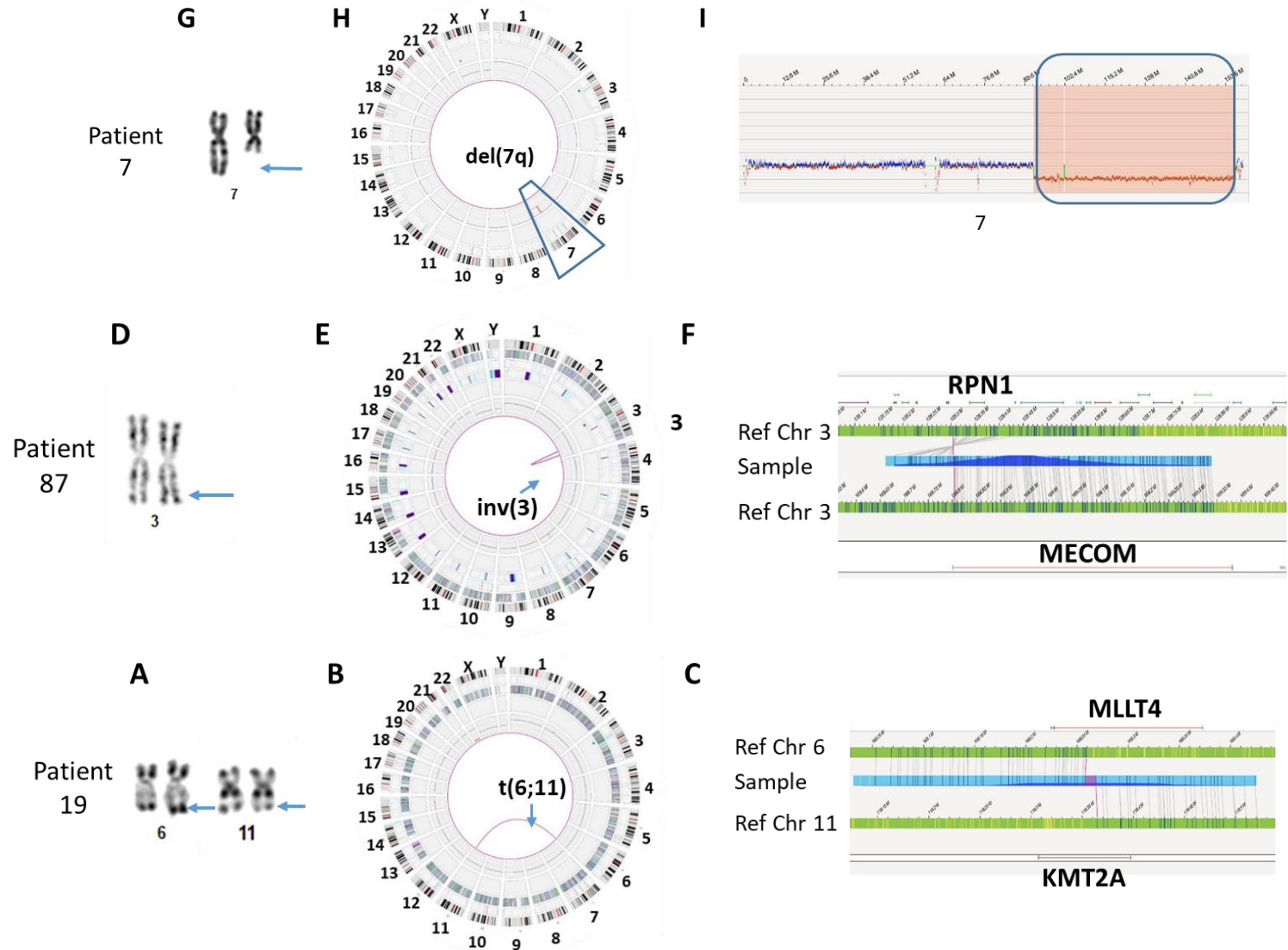
Concordance rate
= 95% (53/56)*

*Calculated on cytogenetic abnormalities influencing the MDS and AML risk scores.

Discordant results :

-Y n=1

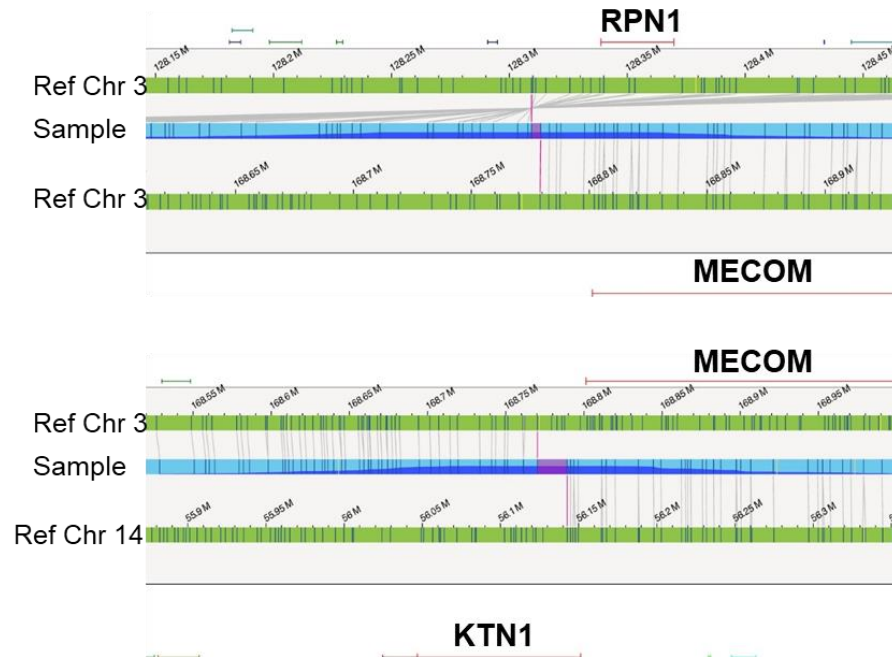
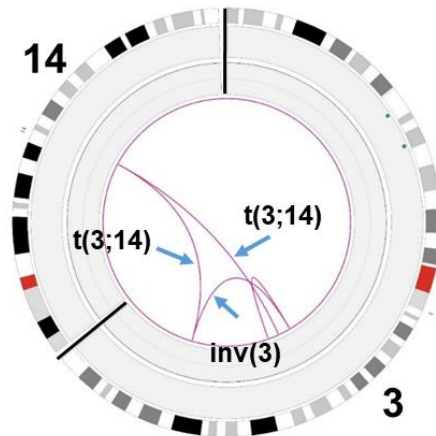
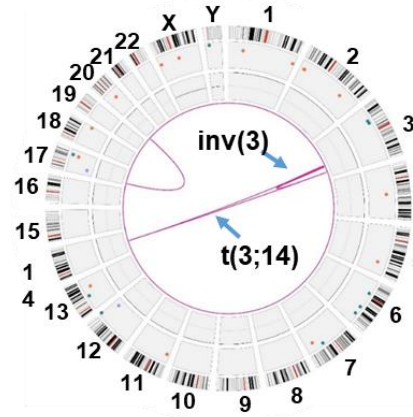
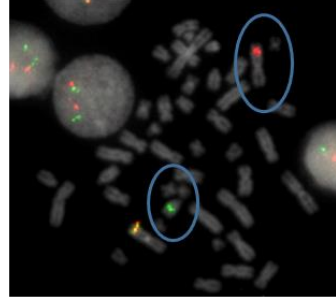
+8 n=2



Abnormalities missed by OGM analysis

Patient ID	Diagnosis	Karyotype results*	Probable cause for missing the cytogenetic abnormalities
Low subclonal CNVs involving a whole chromosome			
1	AML	47,XX,add(1)(p31),del(6)(q14q22),+8,add(15)(q?),add(18)(p11),add(22)(q21)[12]/47,idem,add(8)(p?21)[6]/48,idem,+5[2]	Selective advantage of tumor sub-clone under culture
25	AML	47,XY,+8[4]/92,XXYY[7]/46,XY[14]	Below the limit of detection of OGM
112	AML	47,XY,+8[18]/48,idem,+13[1]/46,XY[1]	Below the limit of detection of OGM
222	MDS	46,XX,der(21)t(?1;21)(?q12;p11)[12]/47,idem,+8[3]/46,XX[6]	Below the limit of detection of OGM
234	MDS	45,X,-Y[4]/46,XY[16]	Below the limit of detection of OGM
Clone with a gain of a whole batch of chromosomes			
25	AML	47,XY,+8[4]/92,XXYY[7]/46,XY[14]	Tetraploidy not currently detected by OGM
145	MDS	44,XX,add(4)(q32),-7,del(9)(p12),-18[5]/44,idem,del(5)(q13q34)[5]/75,idemx2,-X,-X,-3,-3,-5,-5,-11,-11,-12,-12,-14,-14,-16,-16[cp4]/46,XX[3]	Triploidy not currently detected by OGM
Low subclones			
58	MDS	45~49,XY,t(4;6)(q2?;q2?),del(5)(q11),del(12)(p11p13),-21,+2~4mar[8]/46,XY,add(1)(q31)[2]/46,XY[4]	Below the limit of detection of OGM
59	AML	43,XY,-5,del(6)(q21q25),-7,-17,-18,+mar[16]/42,idem,-6,add(12)(q24),-13,-14,-16,+3mar[3]/46,XY[1]	Below the limit of detection of OGM
SVs which breakpoints located in poorly covered areas			
130	MDS	46,XY,del(5)(q15q34),del(7)(q22q36),add(14)(p10)[5]/46,XY[2]	Breakpoint localized in a non-covered area with the OGM
198	AML	54,XY,+1,del(5)(q21q34),+8,+8,+9,+10,add(14)(p11),+21,+22[6]/46,idem,+i(11q10)[5]	Breakpoint localized in a non-covered area with the OGM
222	MDS	46,XX,der(21)t(?1;21)(?q12;p11)[12]/47,idem,+8[3]/46,XX[6]	Breakpoint localized in a non-covered area with the OGM

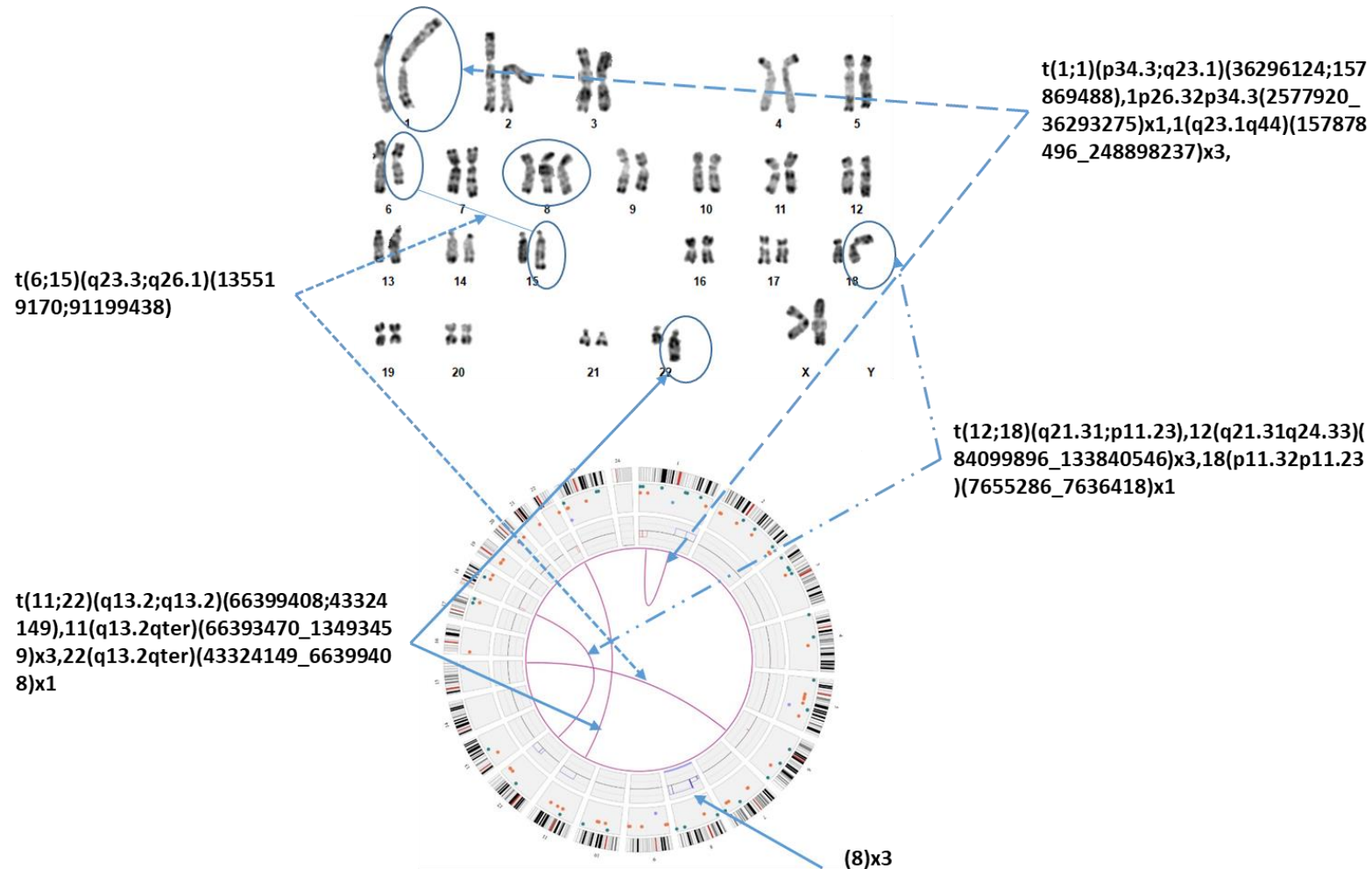
OGM reveals unexpected complexity of some cytogenetic abnormalities



- Example of complex SV affecting *MECOM* gene revealed by OGM (Patient 122)

OGM resolves chromosomal abnormalities not identifiable by karyotype

47,XX,add(1)(p31),del(6)(q14q22),+8,add(15)(q?),add(18)(p11),add(22)(q21)

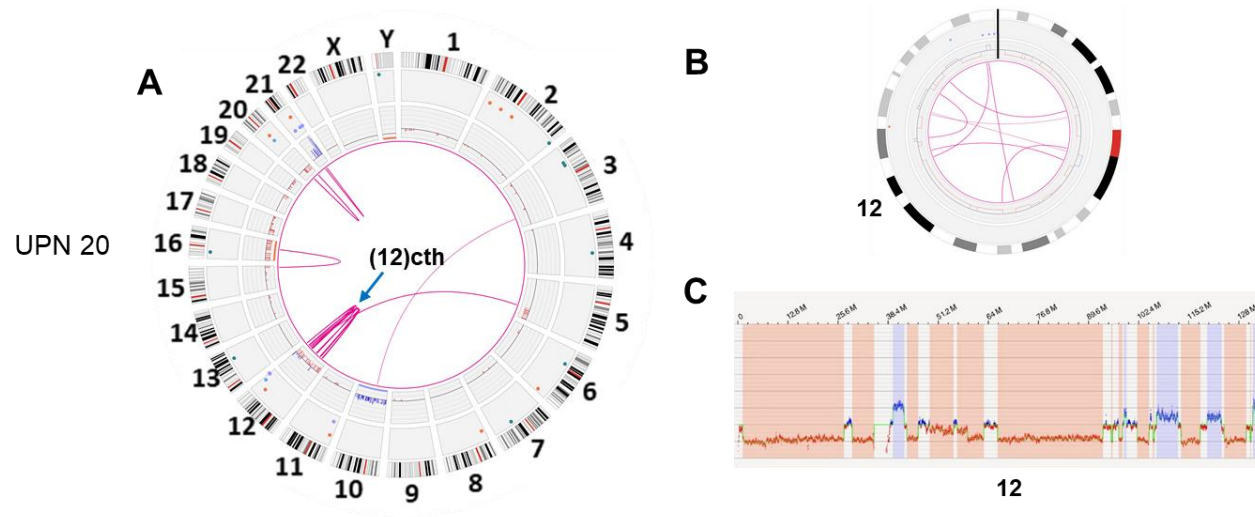


➤ Example of complex karyotype analyzed by OGM in Patient 1

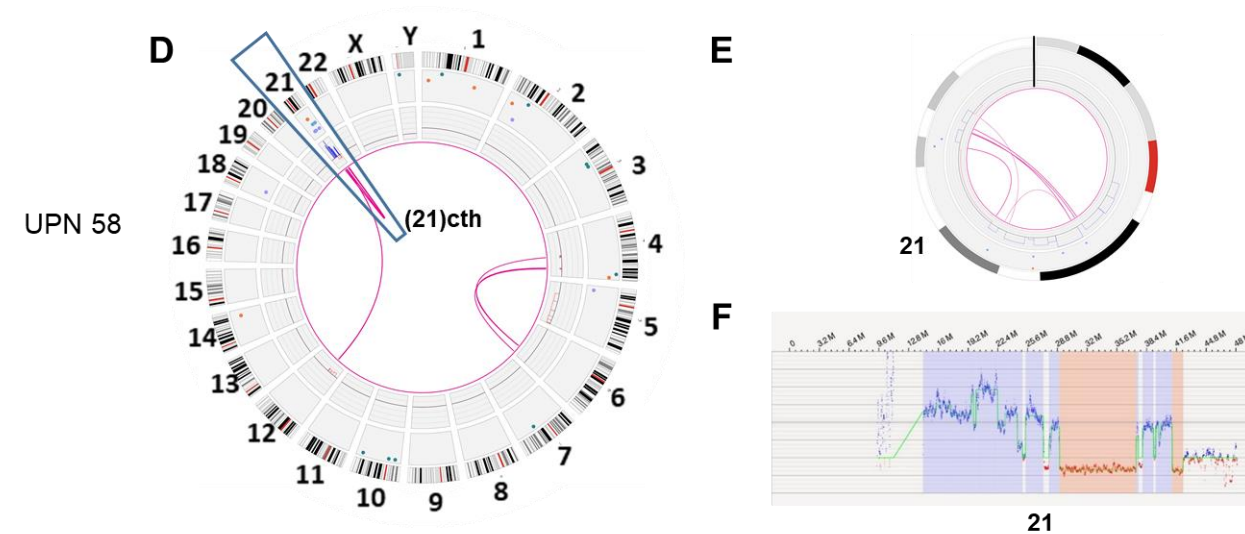
OGM identifies recurrent complex rearrangements in complex karyotype

➤ Complex rearrangements involving chromosome 12
n=3/13 pts with complex karyotype

➤ Complex rearrangements involving chromosome 21
n=4/13 pts with complex karyotype



ETV6 deletion: 3/3



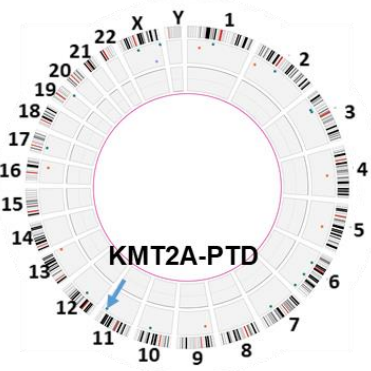
ERG amplification: 4/4 pts
RUNX1 amplification: 3/4 cases

OGM identifies other relevant cytogenetic abnormalities not seen at karyotype

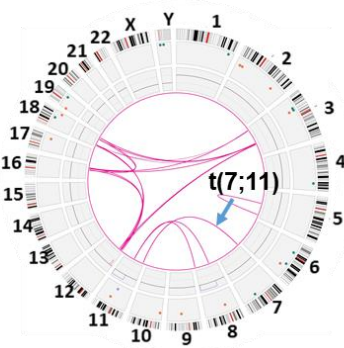
	AML n=41	MDS n=27
Normal karyotype	47.3% (9/19)	16.7% (2/12)
Simple abnormal karyotype (<3 abn)	50% (6/12)	22.2% (2/9)
Complex karyotype (≥3 abn)	87,5% 7/8	100% (5/5)

- KMT2A-PTD
n=7/41 AML cases

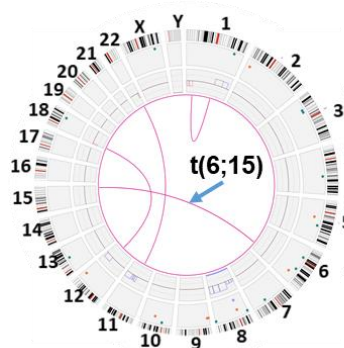
UPN 17



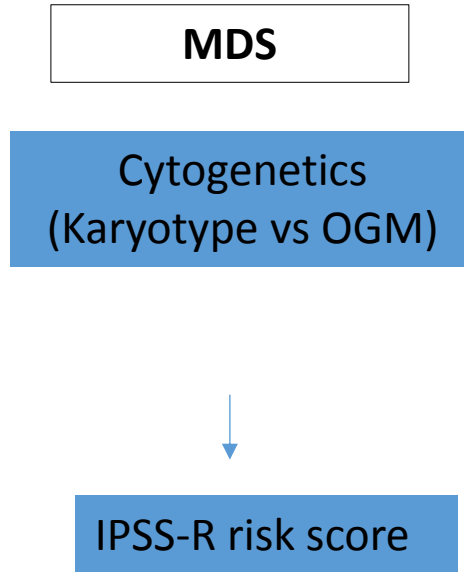
UPN 157



UPN 1

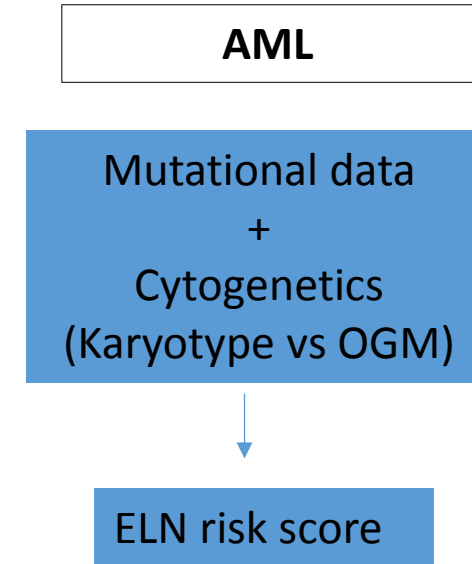


OGM successfully predicts risk score as karyotype in most AML/MDS cases and refines it in a subset of patients



Concordance: 21/27

Favorable → Poor n=2
Intermediate → very poor n=1
Intermediate → Poor n=1
Intermediate → Favorable n=1
Very Favorable → Favorable n=1



Concordance: 39/41

Adverse → Intermediate n=1
Favorable → Intermediate n= 1

Discussion

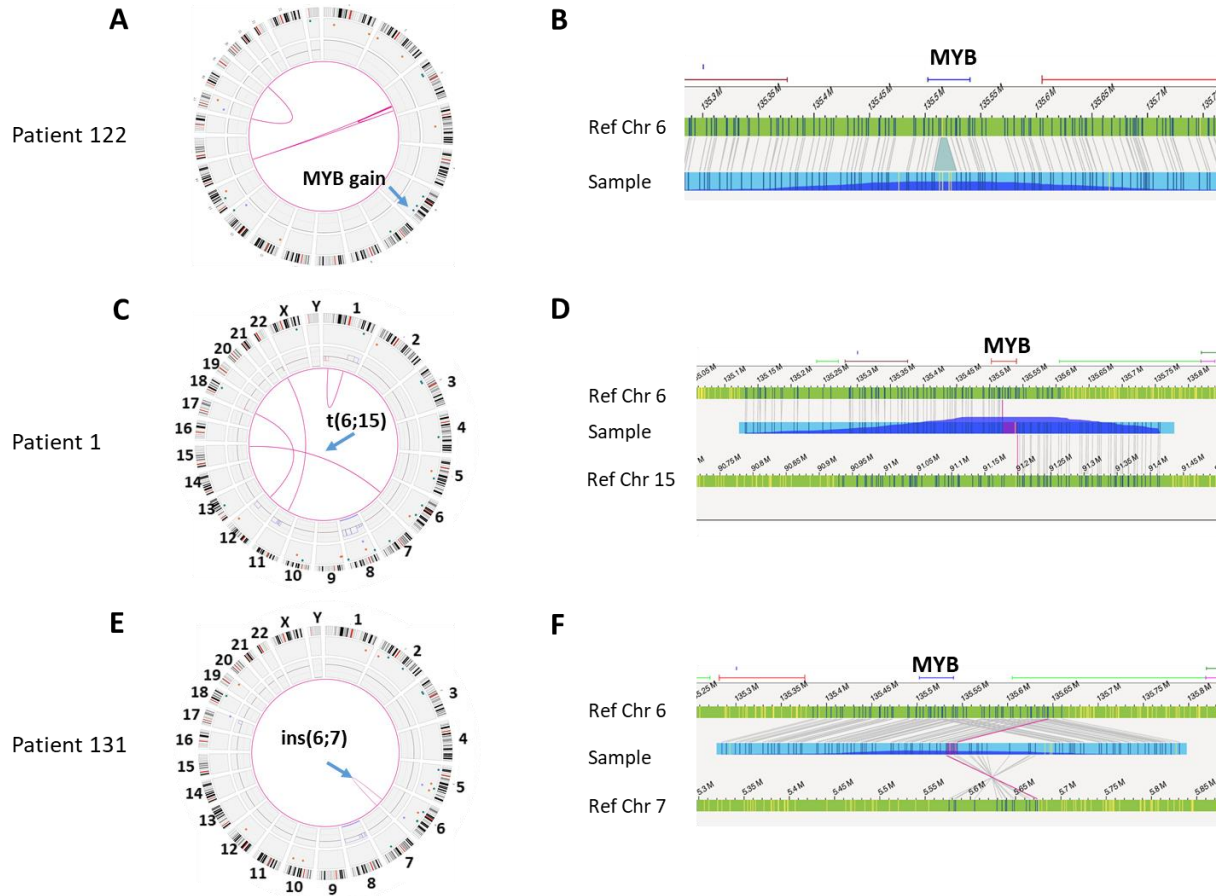
- Technical advantages of OGM
 - Minimum technical delay for OGM results is 6-7 days
 - Useful in case of karyotype failures (1,5 million cells, non-cultured cells)
- Technical limitations of OGM
 - Dependent on the quality of the DNA
 - Difficulty to map abnormalities in poorly covered areas of the genome
 - No detection of low subclonal CNVs involving whole chromosomes
 - No detection of independent clones

Discussion

- Biological advantages of OGM
 - detection of balanced cytogenetic abnormalities, unlike CGH/SNP array technology.
 - detection of unbalanced cytogenetic abnormalities, with a higher sensitivity than CGH/SNP array analysis.
→ Concordance rate = 95% (53/56)
- elucidation of poorly identified or unidentified karyotype abnormalities due to poor karyotype quality and/or complex nature of abnormalities.
 - e.g. complex rearrangement and chromothripsis of chromosome 12 (n=3) or 21 (n=4)
- detection of cryptical balanced and unbalanced cytogenetic abnormalities not observed in the karyotype.
 - Detection of cytogenetic abnormalities not seen at routine cytogenetics in 33% (9/27) and 53% (22/41) of the MDS and AML respectively.
 - Detection of recurrent pathogenic SVs such as *NUP98* rearrangement, KMT2A-PTD, and MYB cytogenetic abnormalities.

Discussion

- Detection of new candidates as MYB gene



RESEARCH LETTER



TO THE EDITOR:

Myb drives B-cell neoplasms and myeloid malignancies in vivo

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May 2022

Perspectives

- Identification of new cytogenetic abnormalities
 - Significance
 - Prognosis
 - Interpretation of variants of unknown significance
- Integration of OGM in the diagnostic workup of hematological diseases
 - International rules for OGM interpretation and nomenclature
 - Definition of complexity for OGM vs karyotype
 - New prognostic risk scores integrating OGM and mutational data
 - Place of OGM in the diagnostic work-up of AML and MDS samples

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