Novel Platforms to Assess the Cancer Continuum Using Liquid Biopsy

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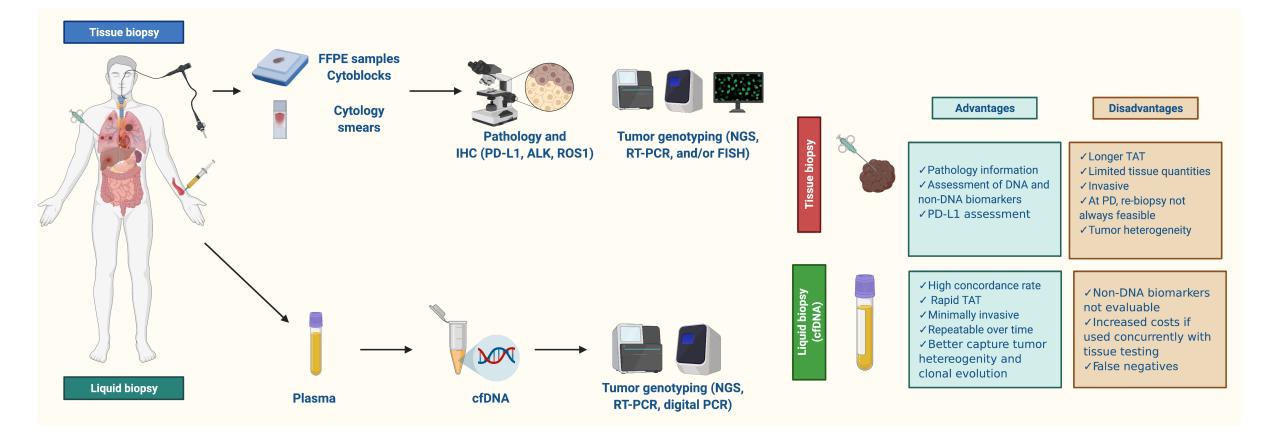
**Center for Thoracic Oncology** 

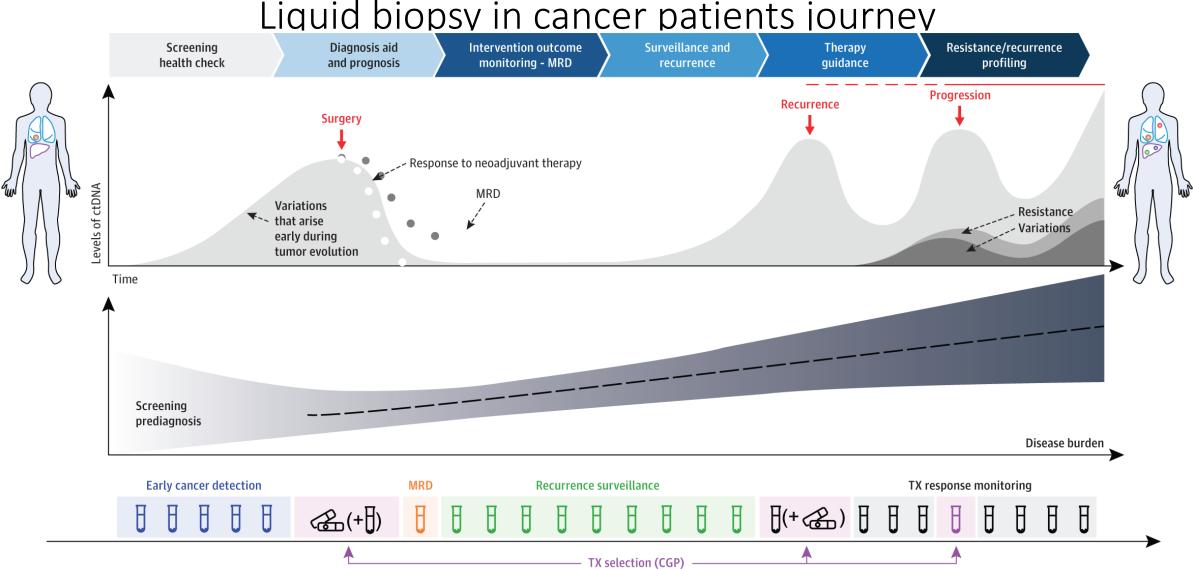




### Mount Sinai The Tisch Cancer Institute

## Tissue vs. Liquid biopsy



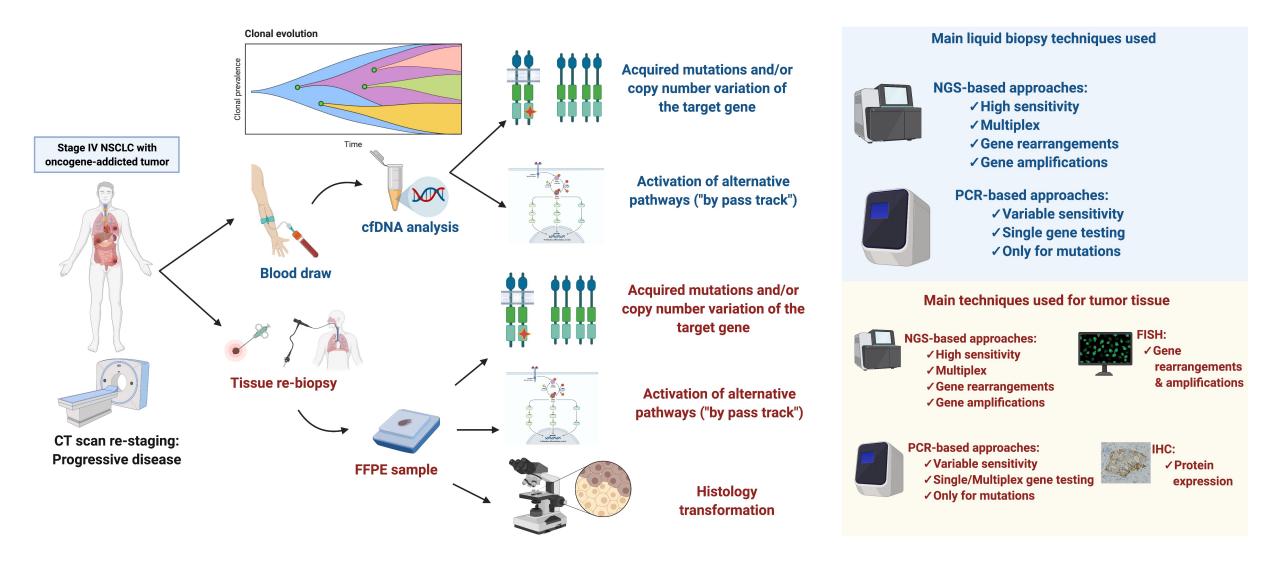


## Liquid biopsy in cancer patients journey

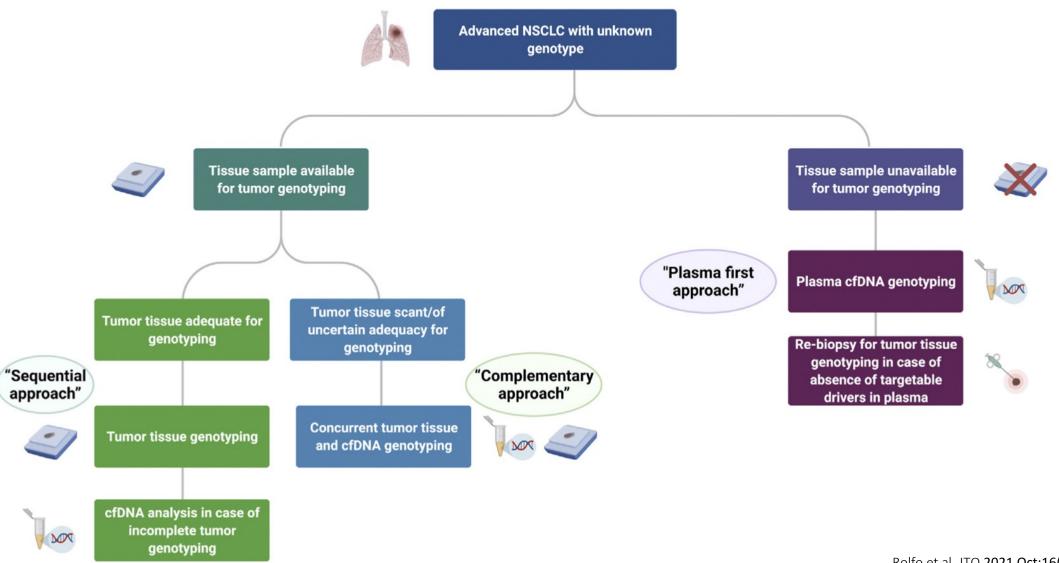
Krebs et al (Rolfo), JAMA Oncology OCT 2022

Clinical utility of liquid biopsy in oncogene-addicted NSCLC

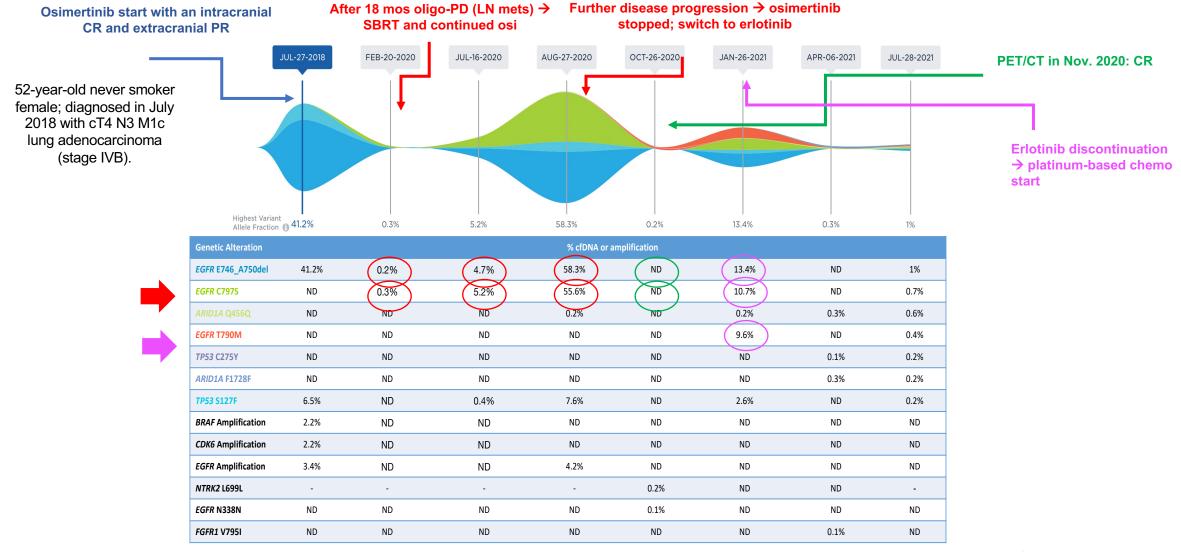
## Clinical utility of liquid biopsy in oncogene-addicted NSCLC



#### Diagnostic algorithm for liquid biopsy use in treatment-naive advanced/metastatic NSCLC



### Monitoring and tailoring treatment with Liquid Biopsy



## Monitoring and tailoring treatment with Liquid Biopsy

**RET - KIF5B** fusion and TP53 mutation; PDL-L1 high (TPS 70%);

10/2020 Started Selpercatinib by FDA emergency authorization ECOG 2-3

Hb 8.2, PLT 36.000, LDH 1496. Reduced dose to 80 mg BID due to general condition

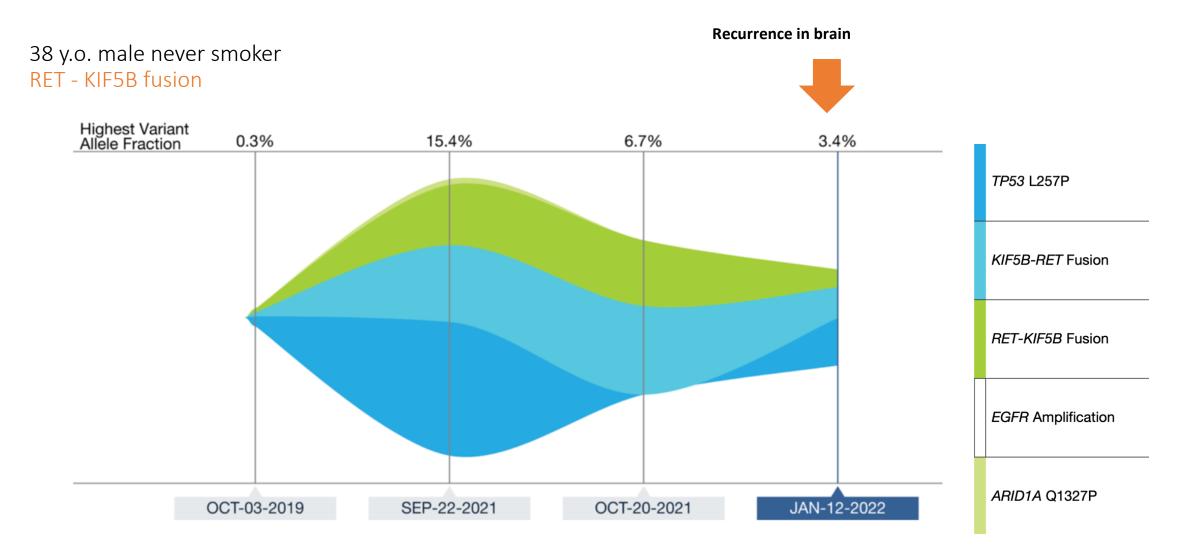
#### 38 y.o. male never smoker RET - KIF5B fusion

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Complete resolution of bone marrow invasion, ECOG 0, continue in response, 04/2020 : Hb 14.9, PLT 240.000, LDH 91 current dose 160 mg BID since 12/2020

Courtesy of Christian Rolfo

### Monitoring and tailoring treatment with Liquid Biopsy



Courtesy of Christian Rolfo

## Liquid biopsy – a not plasma only approach! CSF NGS analysis at recurrence

38 y.o. male never smoker RET - KIF5B fusion

IMPAKT NGS CSF by MSKCCC

GeneTypeAlterationLocationAdditional InformationMutationsTP53Missense MutationL257P (c.770T>C)exon 7MAF: 45.7%Copy Number AlterationsPHF6Whole geneAmplificationXq26.2FC: 3.2CCNQWhole geneAmplificationXq28FC: 3.2	n ()	<b>í</b>
TP53Missense MutationL257P (c.770T>C)exon 7MAF: 45.7%Copy Number AlterationsPHF6Whole geneAmplificationXq26.2FC: 3.2	0	M
Copy Number AlterationsPHF6Whole geneAmplificationXq26.2FC: 3.2	0	M
PHF6 Whole gene Amplification Xq26.2 FC: 3.2		
CCNQ Whole gene Amplification Xg28 FC: 3.2		
Structural Variants		
KIF5B-RET   Fusion   c.1725+1180:KIF5B_c.2136+909:RE Tinv   KIF5B exon 15 to RET exon 12   Image: Comparison of the comparison	0	а

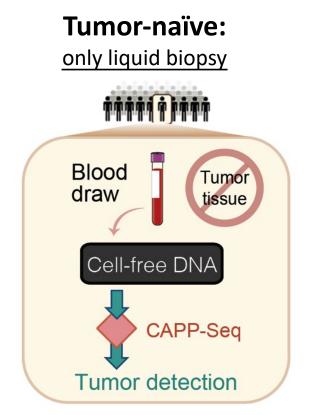
Minimal Residual Disease assessment by Liquid Biopsy

### Retrospective Data From ~900 NSCLC Patients demonstrate that pre- and posttreatment MRD is a strongly prognostic biomarker

Study	N	Stage	Treatment(s)	ctDNA assay
Chaudhuri Cancer Discov 2017	37	IB-IIIB	RT and/or surgery +/- chemo	CAPP-Seq
Abbosh <i>Nature</i> 2017	24	IA-IIIB	Surgery +/- chemo	Natera
Chen <i>CCR</i> 2019	25	-	Surgery +/- chemo	cSMART
Moding Cancer Discov 2020	48	IIB-IIIB	chemoRT +/- IO	CAPP-Seq
Abbosh AACR 2020	88	-	Surgery +/- chemo	ArcherDx
Zviran Nat Med 2020	22	-	Surgery +/- chemo	MRDetect
Waldeck Mol Oncol 2021	16	IA-IIIB	Surgery +/- chemo, RT	Custom NGS
Xia CCR 2021	329	-	Surgery +/- chemo	Custom NGS
Gale Ann Oncol 2022	59	-	RT and/or surgery +/- chemo	Inivata
Zhang Cancer Discov 2022	245	-	Surgery +/- chemo, IO, TKI	Custom NGS

\*\*\*Several studies including different population, treatment and assays

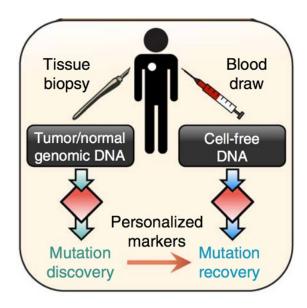
### Different types of ctDNA MRD Assays



- Genotyping with no knowledge of tumor mutations ("off the shelf")
- Faster, less expensive
- Limit of detection ~0.1%

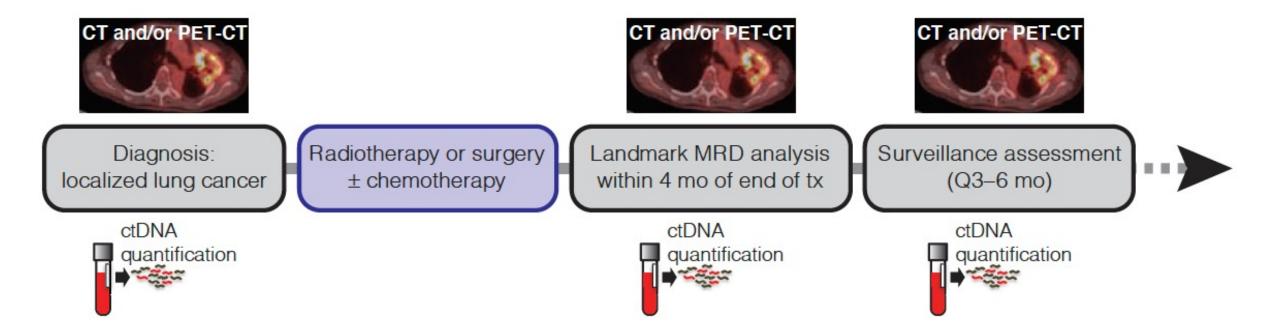
### Tumor-informed:

Departing from tissue biopsy and following with liquid biopsy



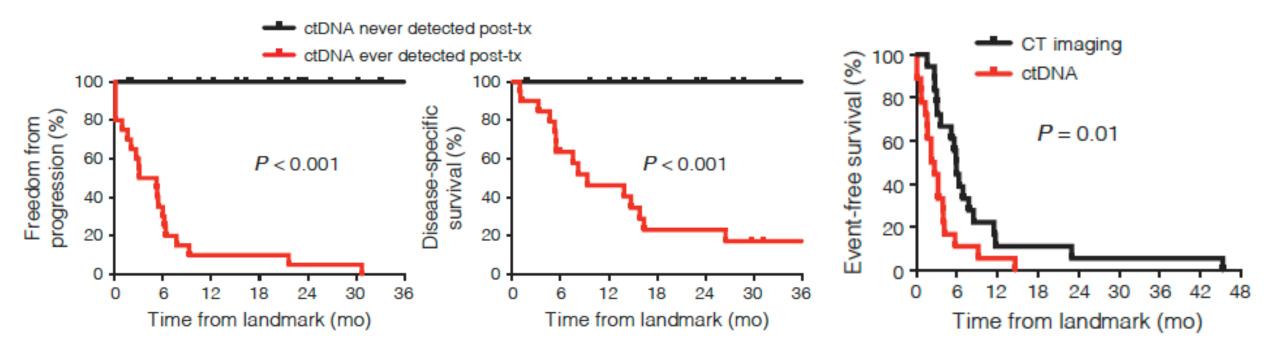
- Tracking <u>multiple</u> <u>known</u> mutations (bespoke or personalized)
- Requires tumor tissue, time, \$\$
- Limit of detection ~0.01%

### Early Detection of MRD in Localised Lung Cancer by CAPP-Seq



ctDNA analysis can robustly identify posttreatment MRD in patients with localized lung cancer, identifying residual/recurrent disease earlier than standard-of-care radiologic imaging, and thus could facilitate personalized adjuvant treatment

## Application of ctDNA analysis for post-treatment surveillance in patients with localised lung cancer

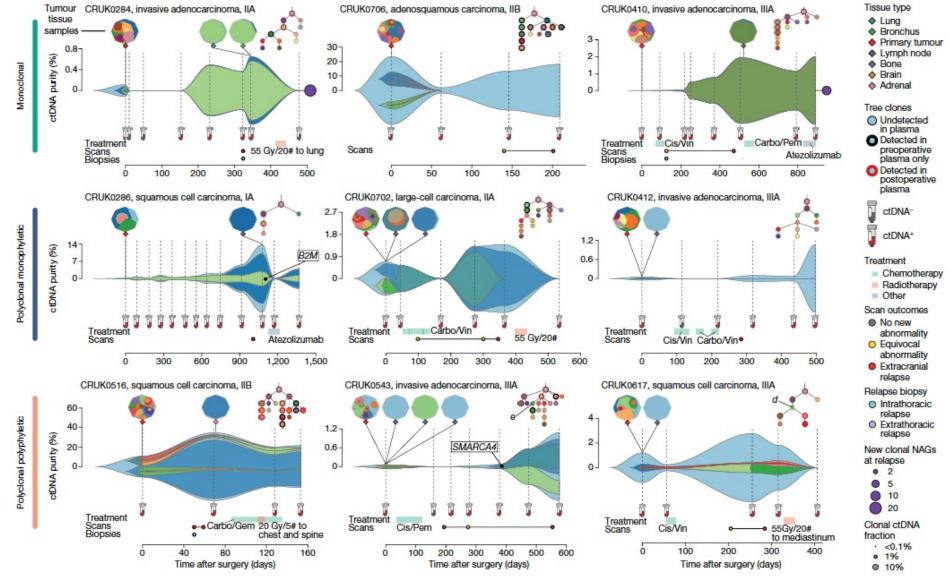


#### KM curves stratified by ctDNA detection status during posttreatment surveillance

ctDNA detection and time to imaging progression

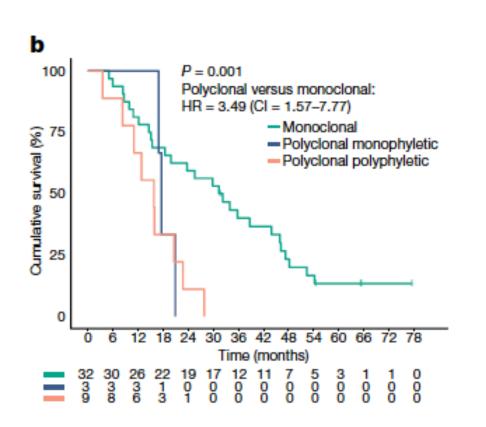
## Longitudinal measurements of clonal evolution in the plasma from surgery to therapy and recurrence

Depictions of longitudinal tumour evolution for examples of monoclonal, polyclonal monophyletic and polyclonal polyphyletic metastatic dissemination patterns.



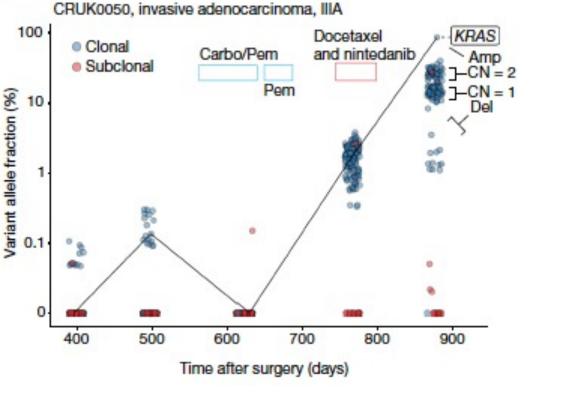
# Longitudinal measurements of clonal evolution in the plasma from surgery to therapy and recurrence

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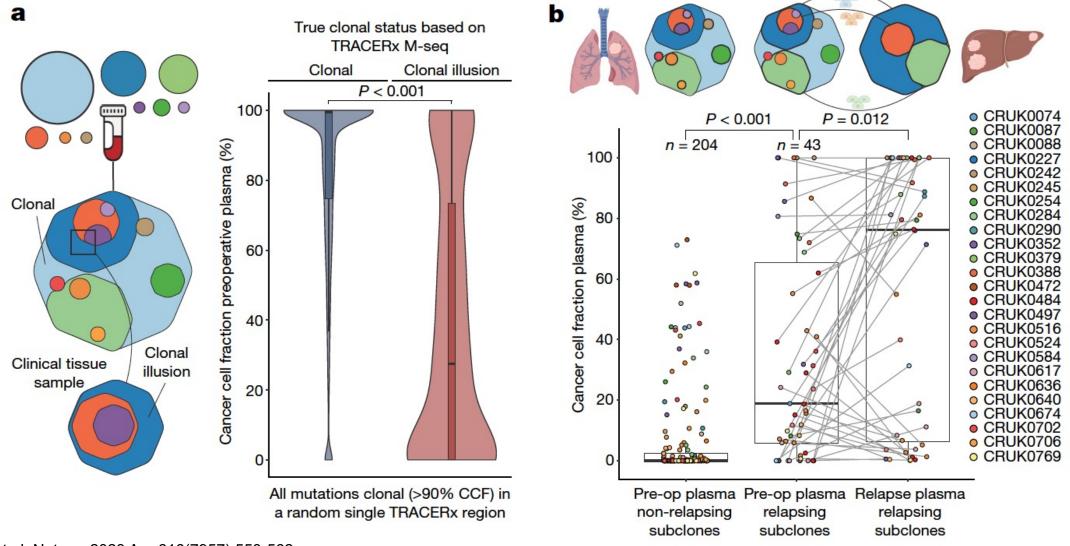


Kaplan–Meier plot depicting differences in the overall survival between metastatic dissemination classes

Variant allele fractions for mutations tracked in patient CRUK0050 at recurrence.

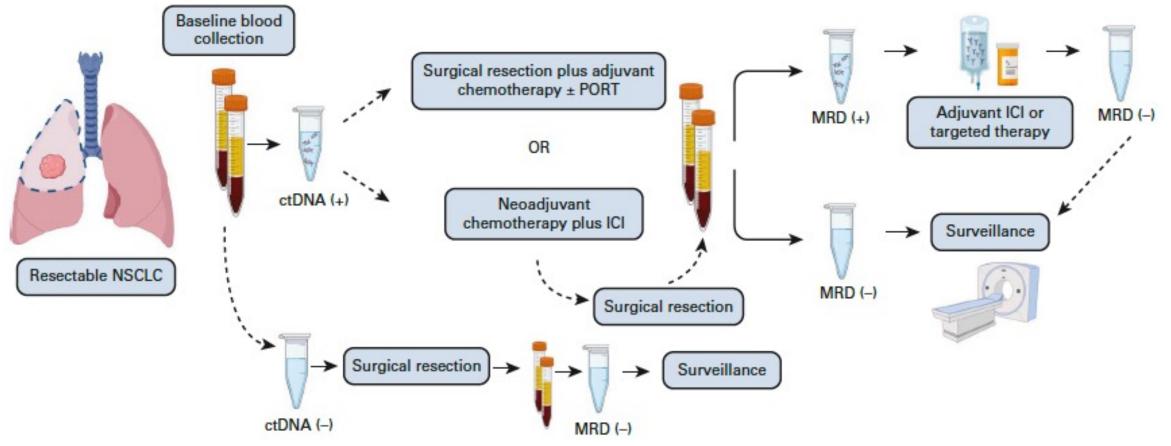


## **Clonality measurements in preoperative plasma overcome sampling bias from a single tissue sample and predict metastatic seeding**

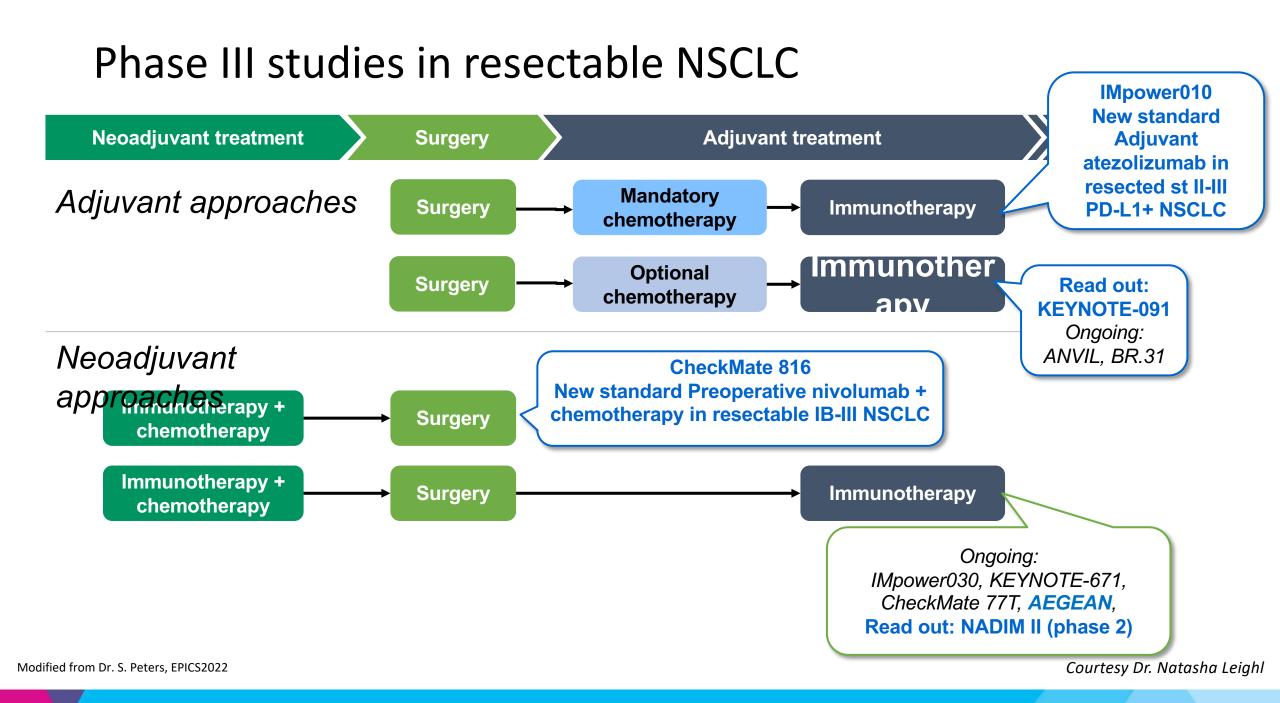


Abbosh C, et al. Nature. 2023 Apr;616(7957):553-562

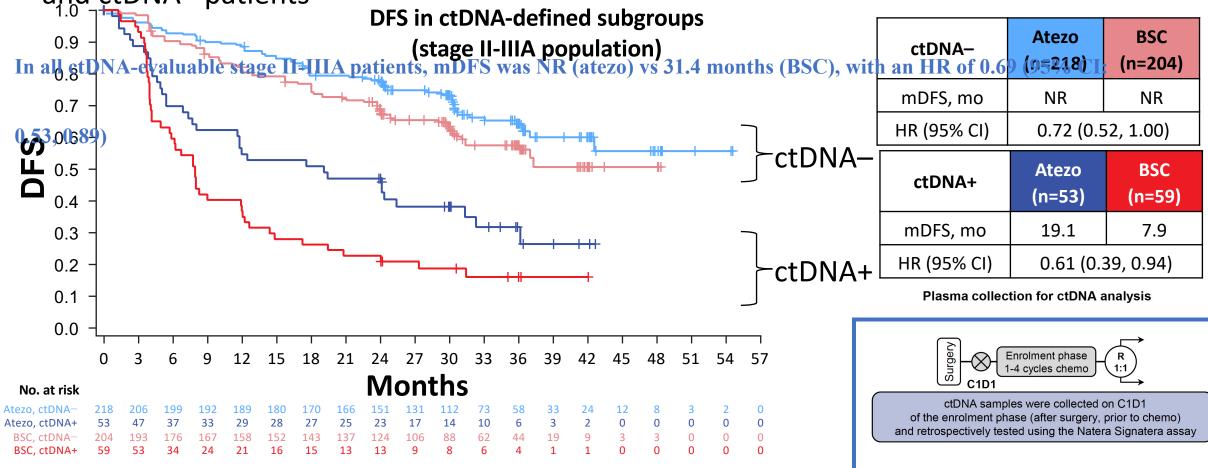
Proposed clinical trial designs for early-stage NSCLC using ctDNA as a biomarker for treatment personalization



Pellini B & Chaudhuri AA. JCO 2022

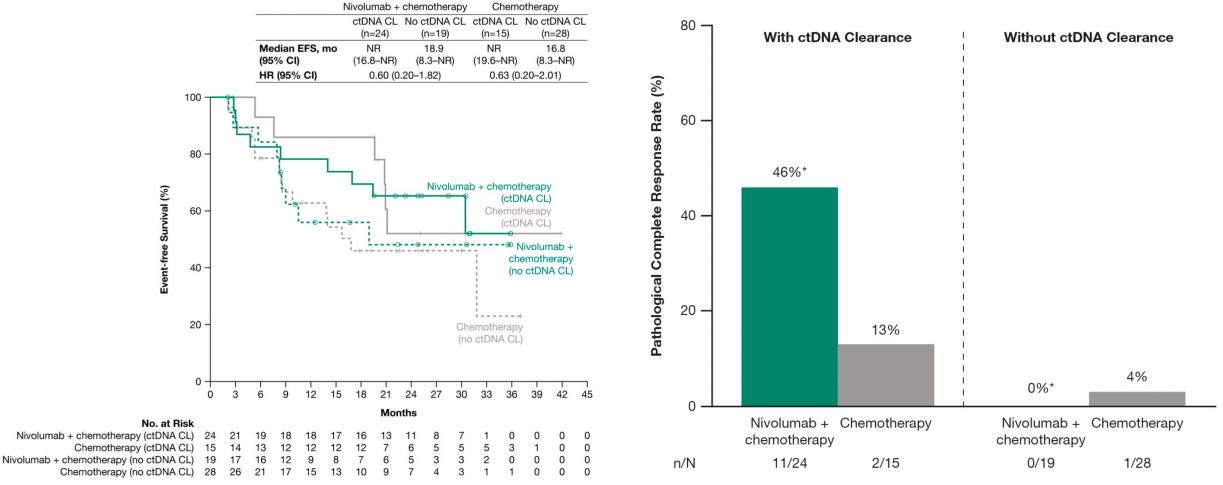


### ctDNA positivity was strongly prognostic, with DFS favouring atezo in both ctDNA+ and ctDNA- patients



Clinical cutoff: 21 January 2021. Unstratified HRs are

## Liquid Biopsy in Neoadjuvant IO + chemo combination WES ctDNA in 89 pts

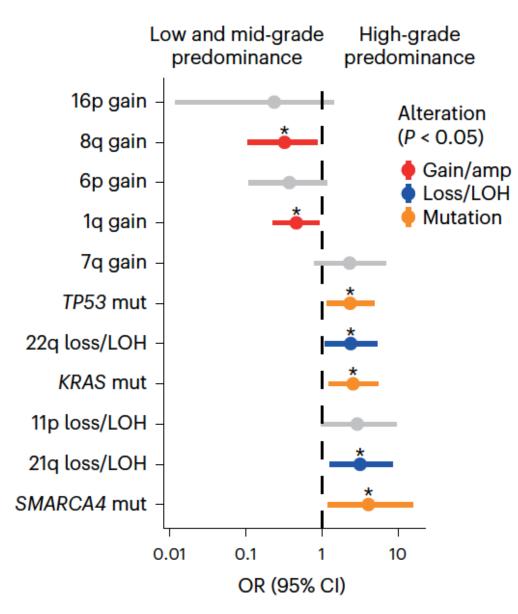


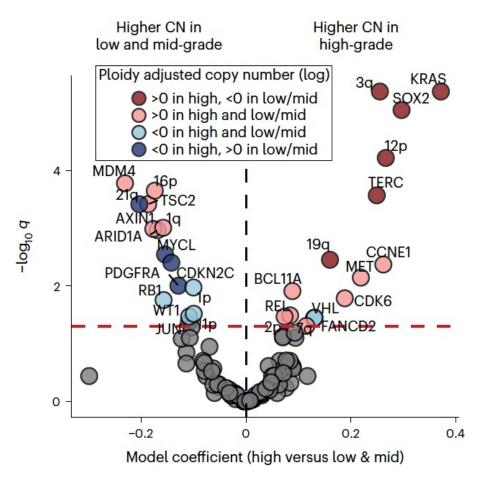
Mount Sinai / Presentation NacourtesyeDr. Natasha Leighl

### Forde P. et al, NEJM, APR 20

The example of the evolutionary characterization of lung adenocarcinoma morphology in TRACERx

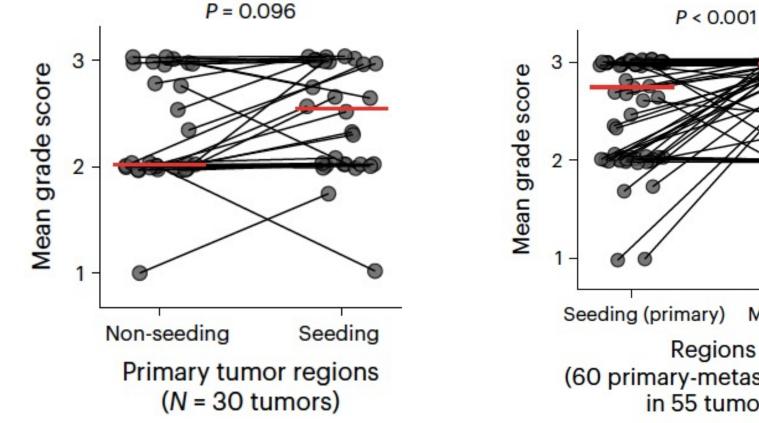
## Genomic determinants of predominant growth pattern



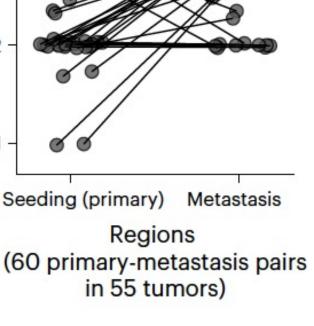


Comparison of ploidy-adjusted mean copy number of chromosomal arm and driver genes between high-grade and low-/mid-grade predominant tumors.

## Growth pattern evolution from primary tumor to metastasis

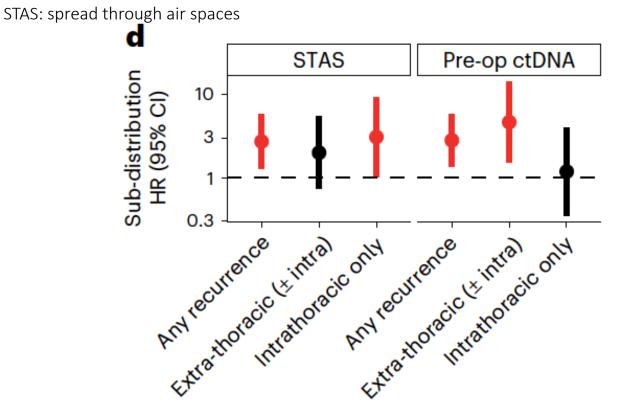


Comparison of mean grade scores between seeding and non-seeding regions in primary tumors.



Comparison of growth pattern between metastasis and the primary tumor seeding regions.

## Impact of tumor morphology upon site and risk of recurrence



Site of relapse Extra-thoracic Intra & extra Intrathoracic No rec 1.00 33 37 10 0.75 9 0.50 0.25 6 0 STAS' STAS' STAS' STAS' STAS' STAS'

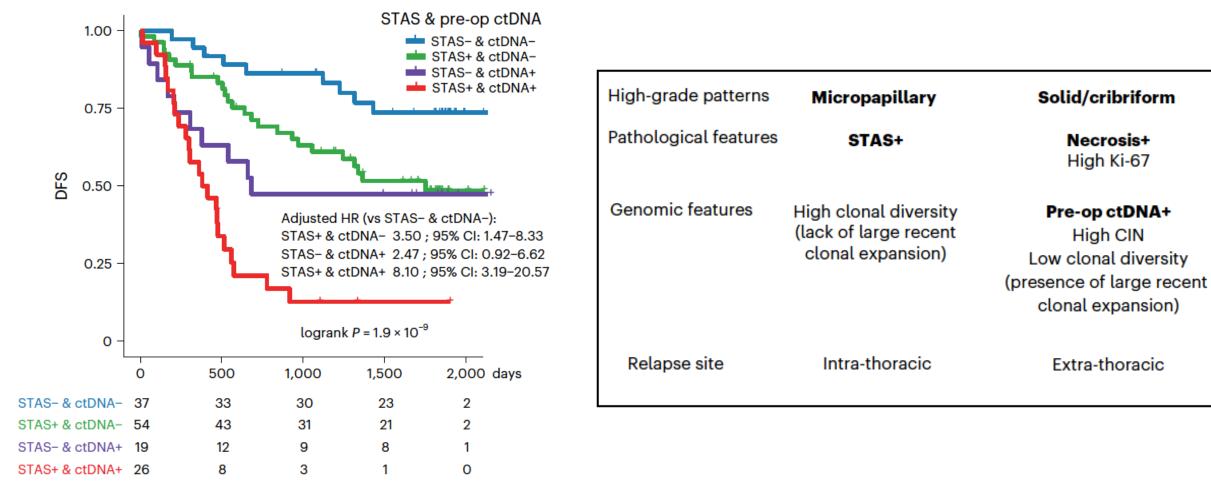
Proportion

Relapse-site-specific HR for the presence of the positivity of STAS and preoperative ctDNA detection.

Frequency of the site of relapse stratified by the positivity of STAS and preoperative ctDNA detection.

Frankell AM, et al. Nature 2023 Apr;616(7957):525-533

Kaplan–Meier curves of DFS and summary of the findings related to high-grade patterns, pathological and genomic features, and relapse site.



Frankell AM, et al. Nature 2023 Apr;616(7957):525-533

## Take home message

- Liquid and tissue biopsy have a high concordance
- Liquid Biopsy is a great tool for real time monitoring in advance disease
- Liquid Biopsy is a perfect tool for MRD
- Tissue informed approach advantage , but also limitations
- Integrating liquid biopsy in clinical trials is a necessity

