

Thanks

Hadassah Medical Center

Tamar Hamburger

A. Hubert

L. Kadouri

N. Halpern

I. Ben Shahr

E. Pikarsky

D. Abeliovich

I. Lerer

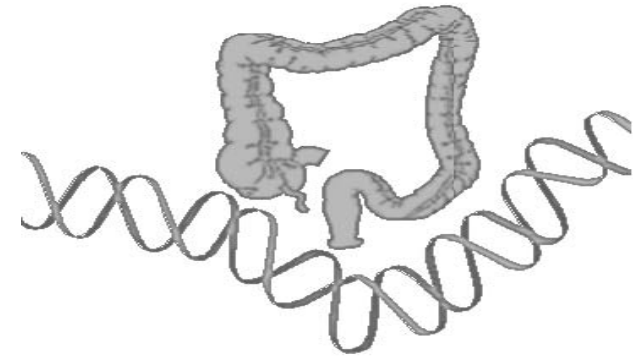
V. Meiner

M. Sagi

A. Eilat

M. Plessner

Tamar Peretz



TASMC

R. Kariv

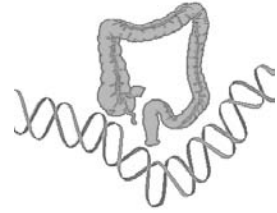
Rabin Medical Center

Z. Levi

I. Kedar-Barnes

ICA

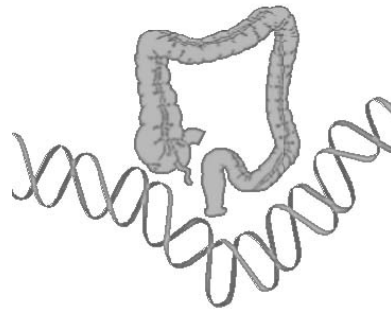
LS Diagnosis in Israel



Goals of this presentation:

1. Introduce the extent of Lynch syndrome in Israel
2. Provide data about the genetic and clinical heterogeneity of LS in Israel
3. Show the unique features of LS in the Israeli & the Jewish populations
4. Show why LS work-up requires collaboration of multidisciplinary expert teams

Genetic Aspects of Lynch Syndrome (HNPCC) in the Israeli population

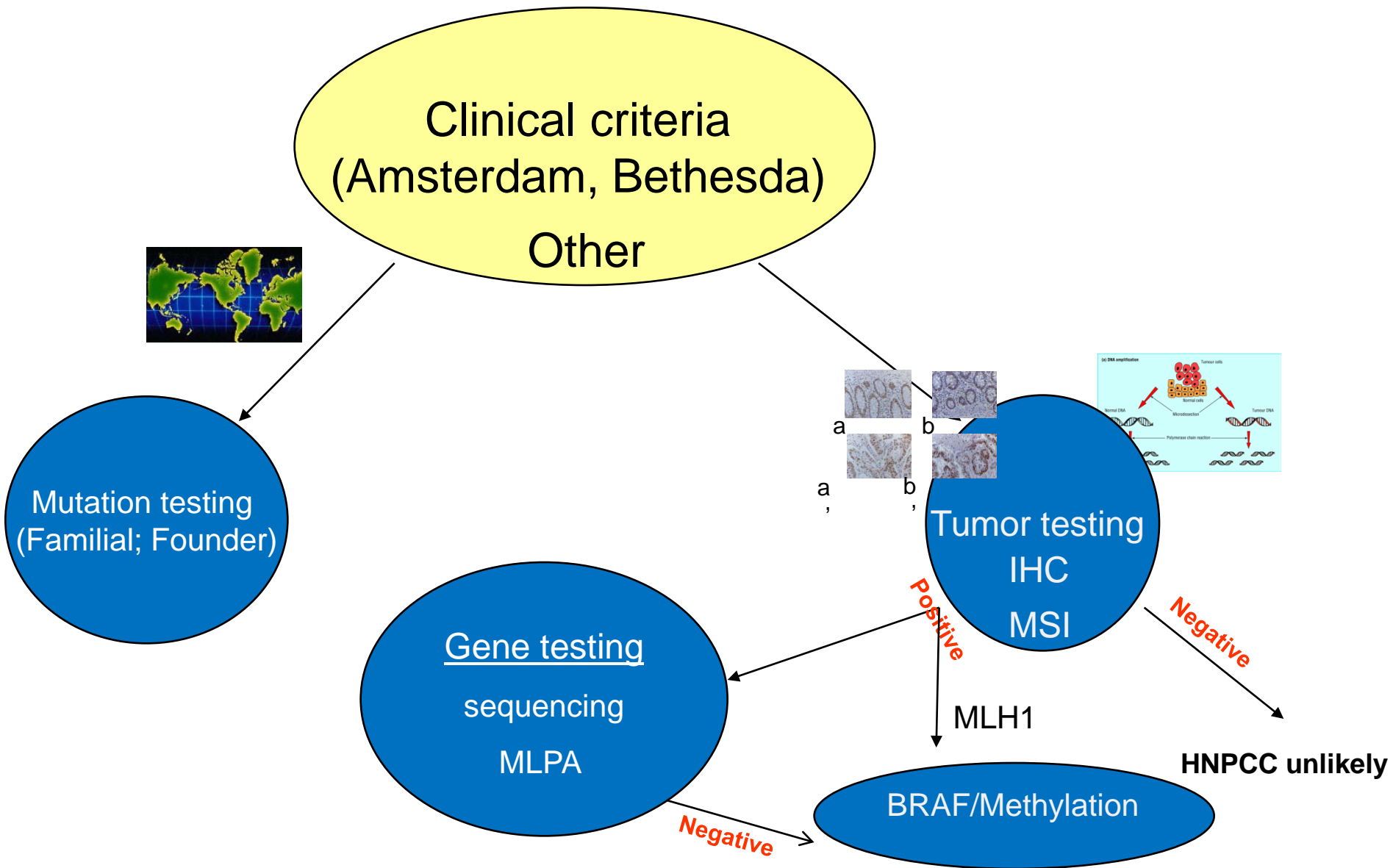


2004-2012

Integrative data

Hadassah, Rabin, TASMC

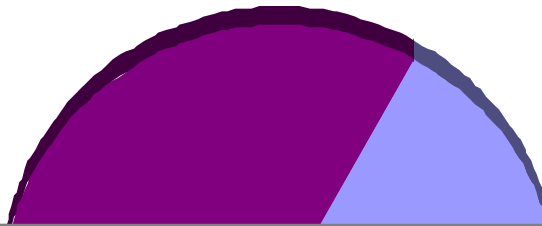
LS - Diagnostic Algorithm



141 LS Families

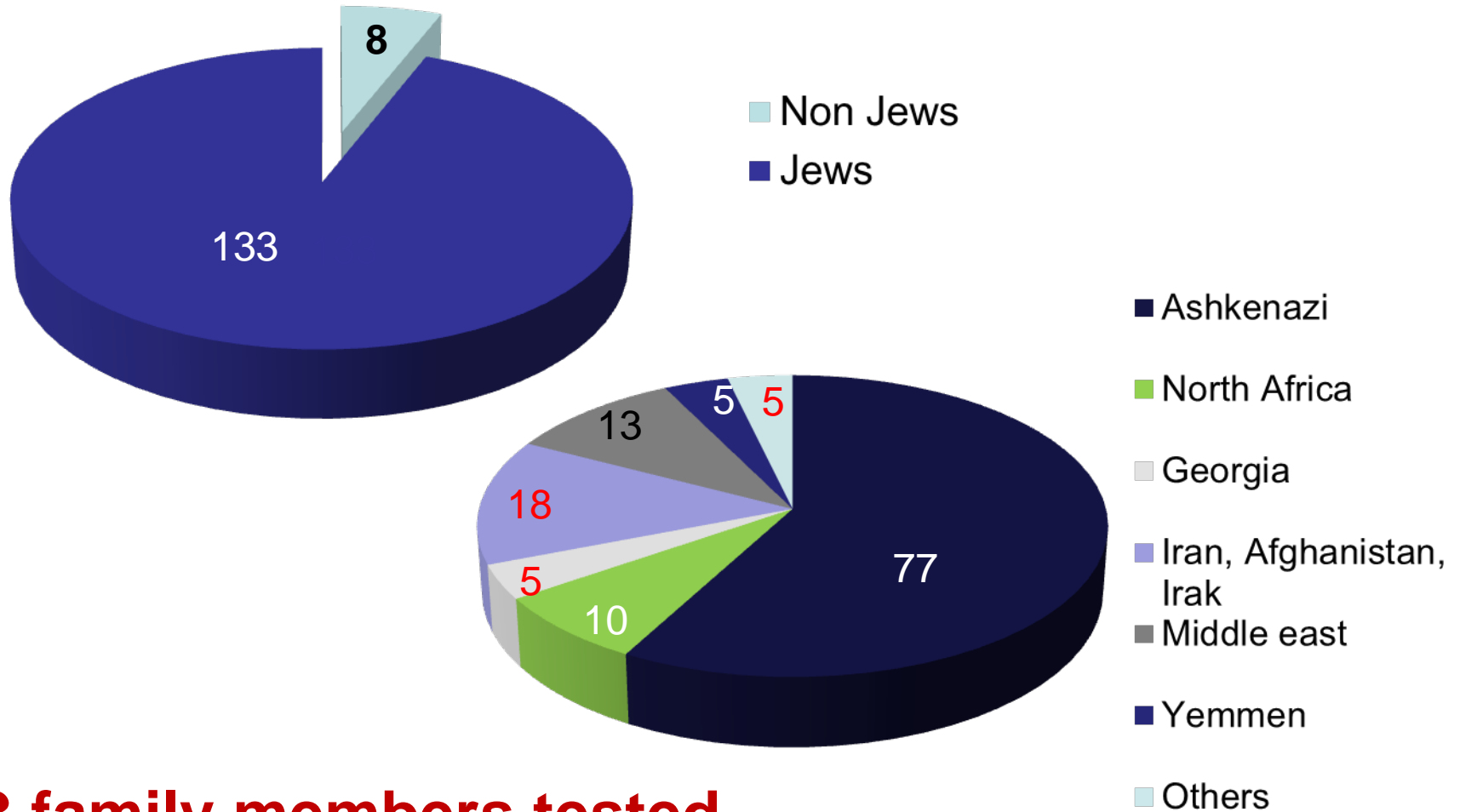
81 (58%) mutation carriers

60(42%) Positive tumor
testing with no mutation



**Positive Tumor testing
and/or
Disease causing mutation**

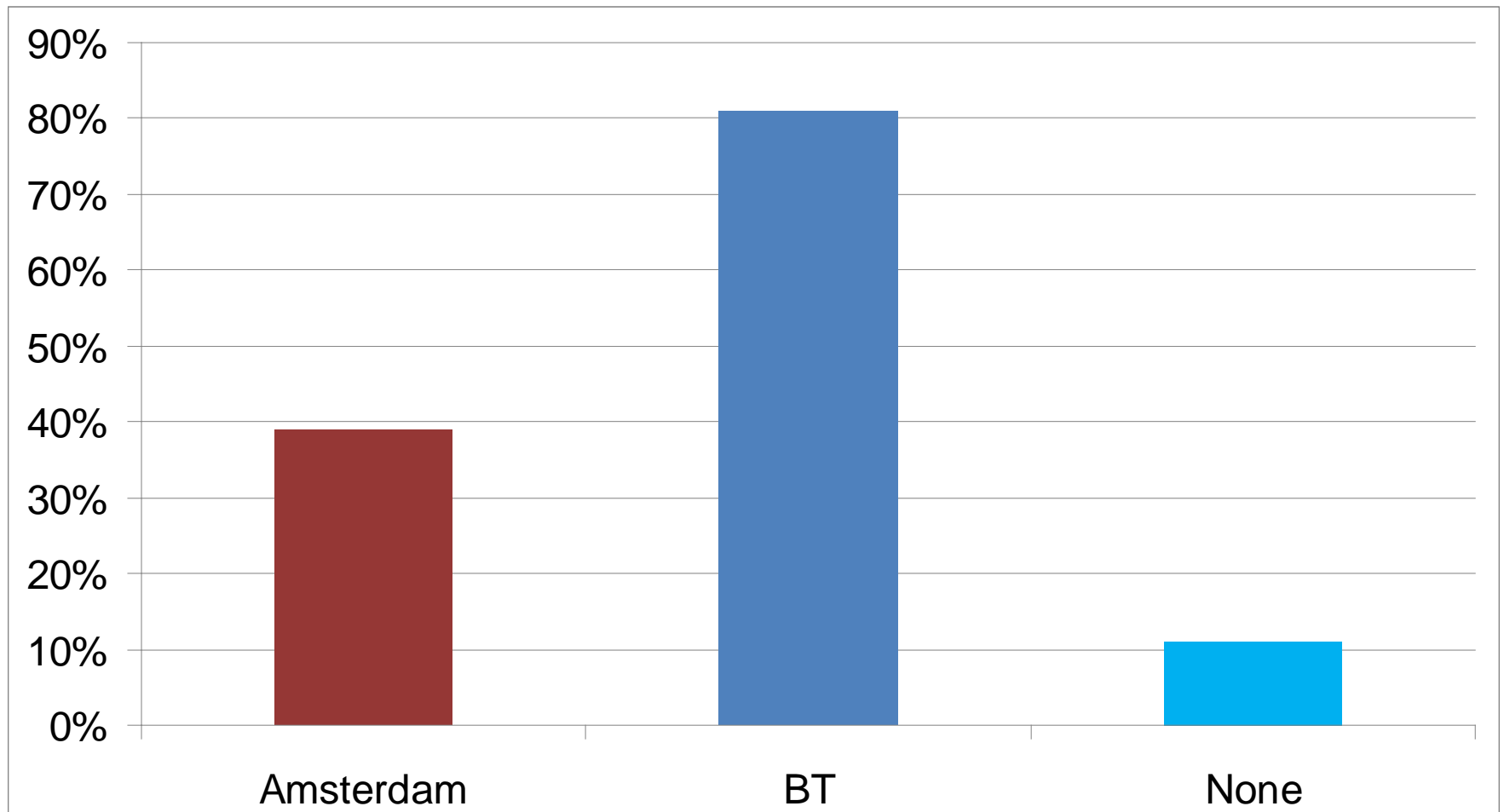
141 LS Families - Ethnicity



303 family members tested
234 (77%) are carriers

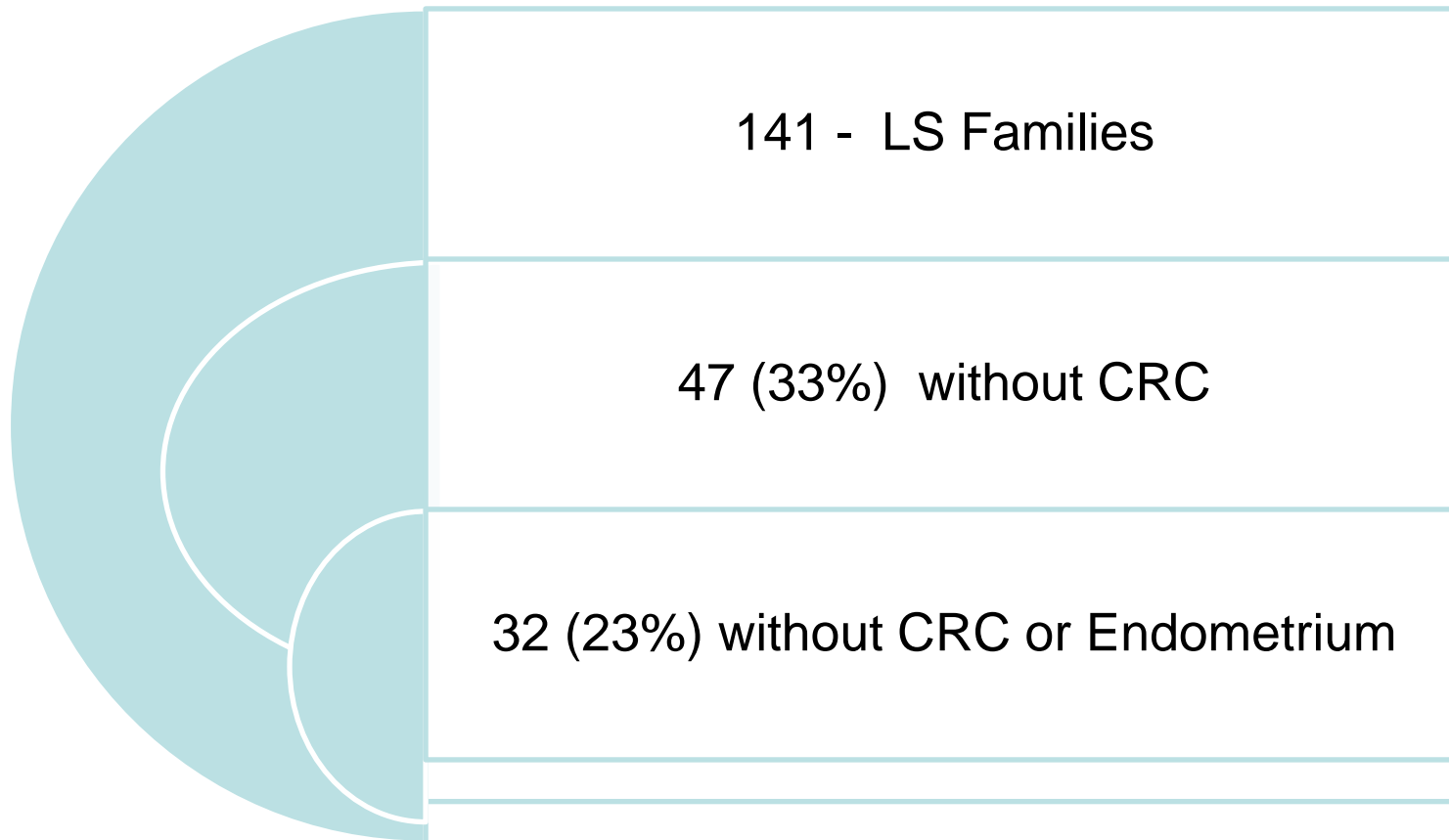
141 LS Families

Clinical criteria

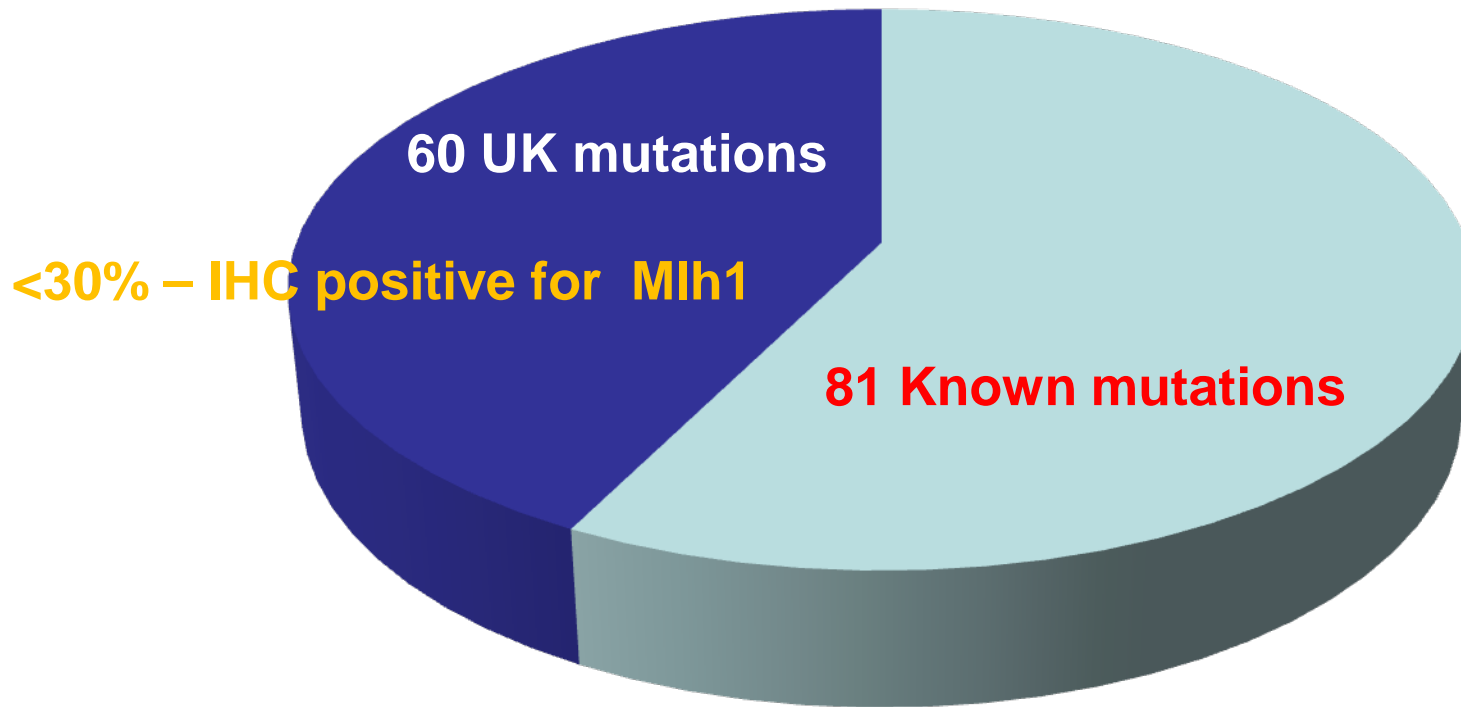


141 LS Families

Phenotype

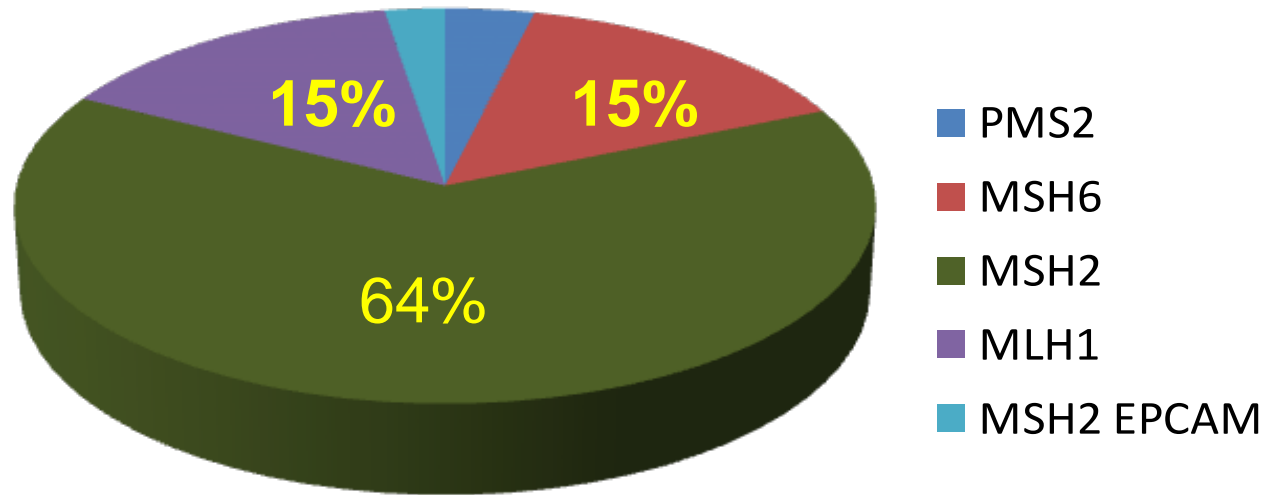


Mutations identified in 81/141 (57%) Families



Spectrum of Mutations

| Mutation number | Number of families |
|-----------------|--------------------|
| 35 | 1 family |
| 3 | 2 families |
| 4 | founder |



Iranian Jews – 3 different mutations

Spectrum of Mutations

| Gene | Mutations | Splice mutations | Big Deletion | Amsterdam | BT | None |
|---------------|-----------|------------------|--------------|-----------|------------|------|
| MSH2 | 52 (64%) | 4 | 4 (10%) | 25 (48%) | 48 (82.7%) | 5 |
| MLH1 | 12 (15%) | 4 | 1 (0.8%) | 7 (58%) | 10 (83%) | 2 |
| MSH6 | 12 (15%) | 0 | 0 | 1 (8%) | 9 (75%) | 1 |
| PMS2 | 3 (4%) | 0 | 0 | 2 (66.6%) | 3 (100%) | |
| MSH2 EPCAM | 2 (2%) | 2 | 2 (100%) | 2 (100%) | 2 (100%) | |
| | 81 (100%) | 10/81 (12%) | 7/81 (9%) | | | |

* 2 mutations (MLH1, MSH2) are classified as variants of unknown significance

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*** 2 mutations (MLH1, MSH2) are classified as variants of unknown significance**

Founder mutations



| Gene | Mutation | Number families | Ethnicity | Amsterdam | BT |
|------|---------------------|-----------------|-------------|-----------|----|
| MSH2 | c.970-971delCA | 5 | 5 Georgian | 3 | 2 |
| MLH1 | c.1770-1771delAG | 2 | Afghanistan | 2 | 0 |
| MSH2 | del exons 9-10 | 1 + | Ethiopia | 0 | 1 |
| MSH2 | 1906G>C | 27 | Ash | 10 | 17 |
| MSH6 | c.3984_3987dup GTCA | 6 | Ash | 0 | 4 |
| MSH6 | c.3959_3962del CAAG | 2 | Ash | 0 | 1 |

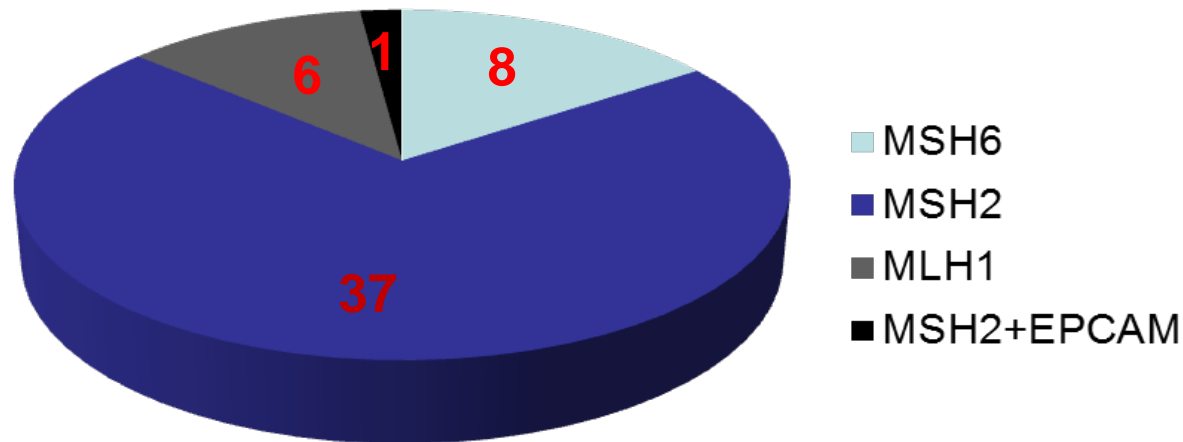
Ashkenazi, Georgian, Afghan, Ethiopia

LS Ashkenazi families



LS was diagnosed among 77 Ashkenazi families.

Mutations detected in 52/77 (67%)



3 founder mutations in Ashkenazi

2002 - A founder mutation in MSH2 (c.1906G>C)

- 0.6% of CRC
- 0.04-0.06% in the general population
- 18-33% of Amsterdam Criteria positive cases
- Highly penetrant.



2009 – A founder mutation in MSH6 c.3984_3987dupGTCA

- 0.3% of CRC 0.6% Endometrial Cancer
- 0.03% in the general population
- Tumors tend to occur later in life –late penetrance

2010 – A founder mutation in MSH6 - c.3959_3962delCAAG

- Tumors tend to occur later in life – low/late penetrance
- 0.1% of CRC 0.6% Endometrial Cancer
- Tumors tend to occur later in life –late penetrance

LS Ashkenazi families



The 3 founder mutations detected in 35/ 77
(45%) LS positive families

The 3 founder mutations detected in 35/52
(67%) mutation positive families

c.1906G>C (35%)

c.3984_3987dupGTCA (7%)

c.3959_3962delCAAG (3%)

* Bias!

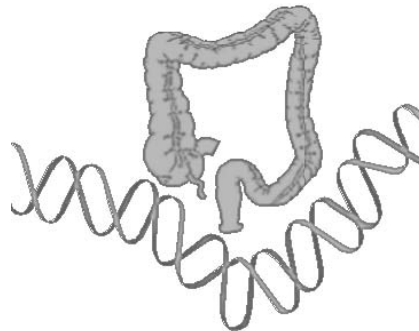
LS in Ashkenazi families – unique approach

HBOC

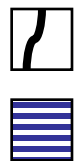
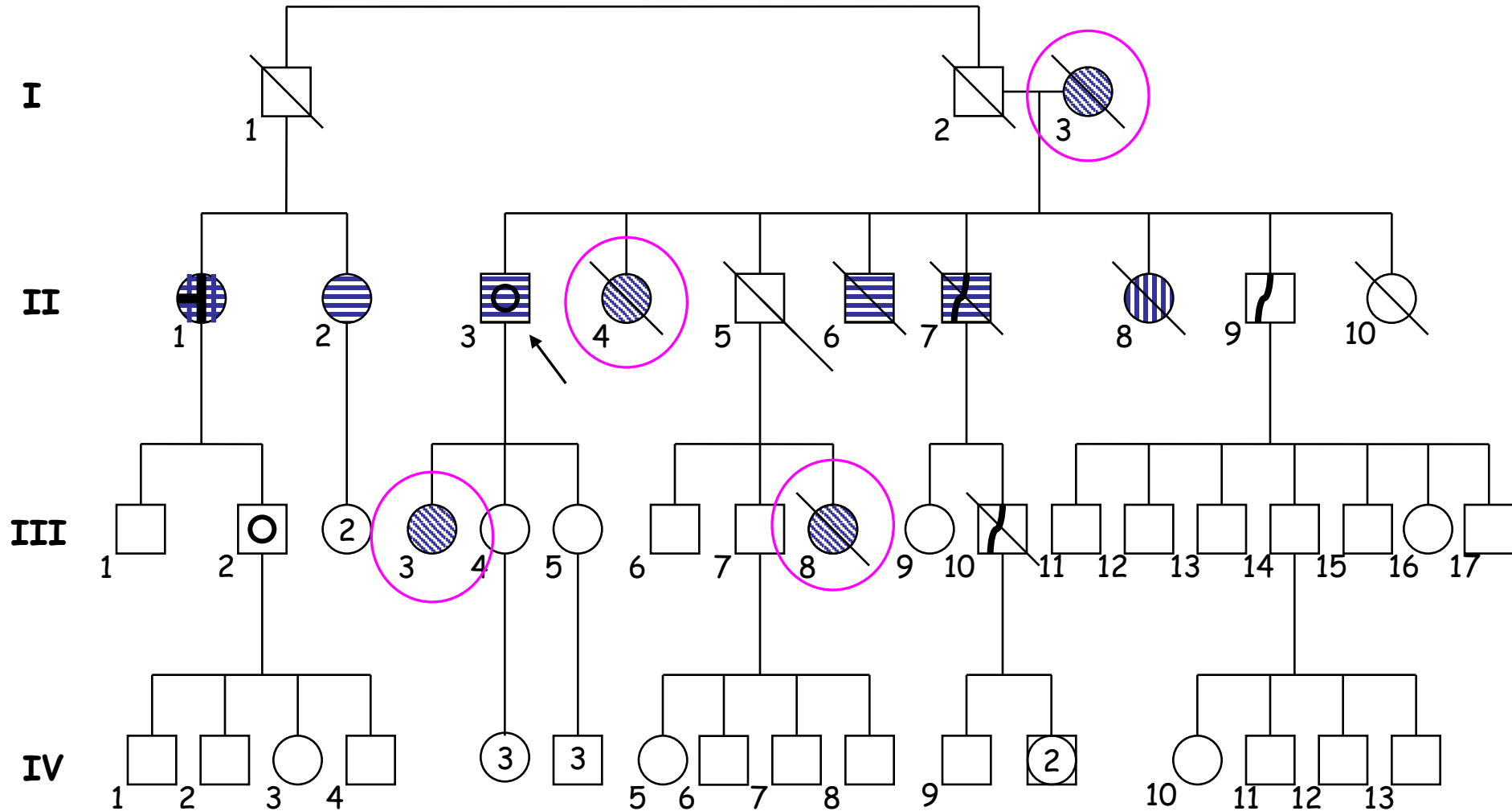
Hereditary Breast Ovarian Cancer

MMRD

Constitutional Mismatch Repair Deficiency



MSH6 c.3984-3987dup Ashkenazi Mutation



Urothelial
Cancer
CRC



Breast Cancer



Gastric Cancer



Ovarian Cancer



Uterine Cancer



colonic polyps

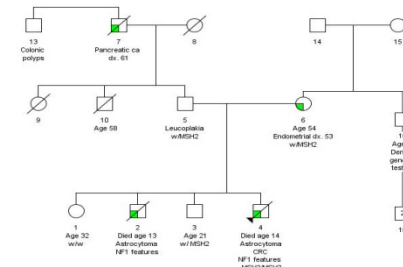
C-MMRD

(Autosomal recessive LS)

- Prevalence higher among consanguineous populations
- Prevalence higher among ethnic groups with founder mutations
- Deserves special genetic counseling (spouse testing; Prenatal diagnosis)

C-MMRD in Israel

7/28/08  Other Cancer



Familial Cancer (2009) 8:187-194
DOI: 10.1007/s10689-008-9227-3

3 MMRD Families

Homozygosity of *MSH2* c.1906G→C germline mutation is associated with childhood colon cancer, astrocytoma and signs of Neurofibromatosis type I

Helen Toledano · Yael Goldberg · Inbal Kedar-Barnes · Hagit Baris · Rinnat M. Porat · Chen Shochat · Dani Bercovich · Eli Pikarsky · Israella Lerer · Isaac Yaniv · Dvorah Abellovich · Tamar Peretz

III

1 Muslim (consanguineous) - PMS2 - Biallelic for c.686_687delCT

II

2 Ashkenazi:

MSH2 - Biallelic for c.1906G>C

MSH6 - Biallelic for

c.3984_3987dupGTCA/c.3959_3962delCAAG

LS Diagnosis in Israel - Summary

A genetic heterogeneous condition

5 Genes (EPCAM, MSH2, MLH1, MSH6, PMS2)

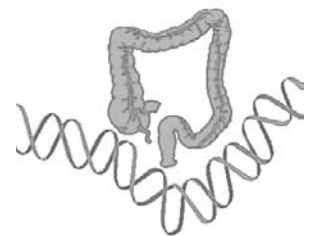
Over 50 private mutations
(splice mutations, deletions)

Founder mutations

Reliable diagnosis

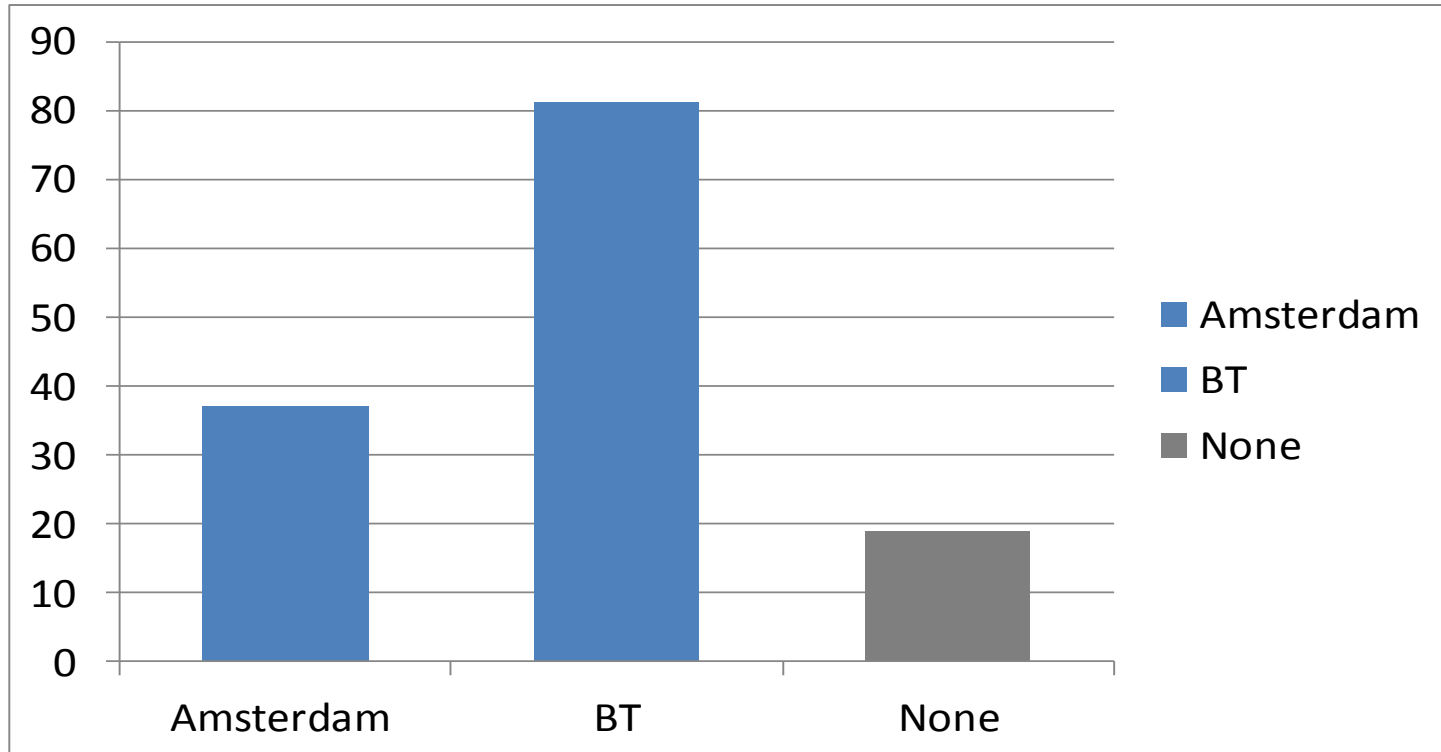
(DM vs UV; sporadic MSI; Inherited methylation)

Other syndromes



1906G>C Ashkenazi Mutation

Genotype -Phenotype



10/27 (37%) AC

22/27 (81%) BT

5 (18%) – no clinical criteria

37/55 (67%) AC positive
67/114 (59%) BT positive

As mentioned before, having AC does not necessarily mean LS. Testing was positive in 70%. Dr. Kariv will speak more about the other 30%. Note that the % of LS among BT positive families is quite high in our cohort.