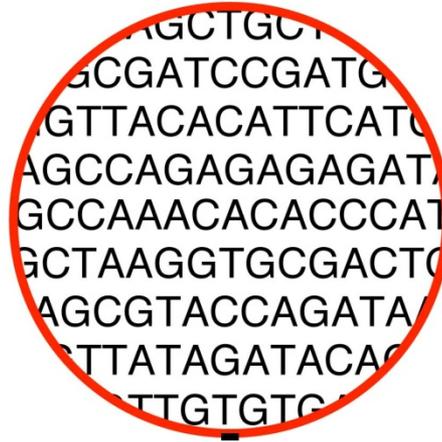




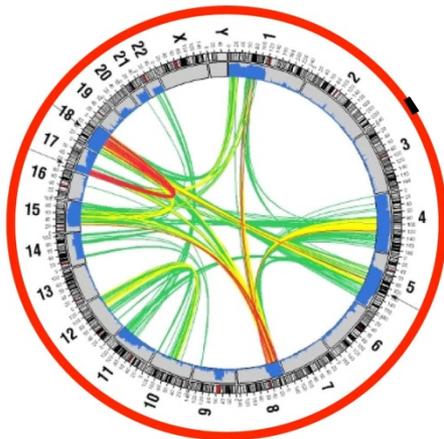
# Vanquishing Cancer Through Genomics

...and by genomics I mean any systematic (genome-wide) approach to define the molecular basis of malignancy and identify curative strategies

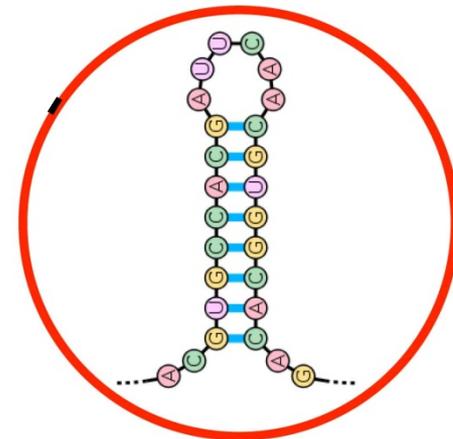
# Structural Genomics

A circular diagram with a red border containing a DNA sequence. The sequence is:

AGCTGCT  
GCGATCCGATG  
GTTACACATTCATC  
AGCCAGAGAGAGAT  
GCCAAACACACCCAT  
GCTAAGGTGCGACTC  
AGCGTACCAGATA  
TTATAGATACAC  
TTGTGTC



Computational Genomics

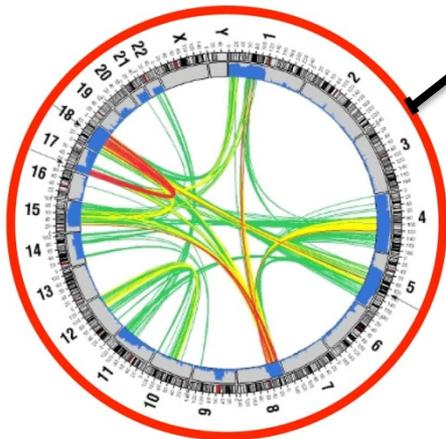


Functional Genomics

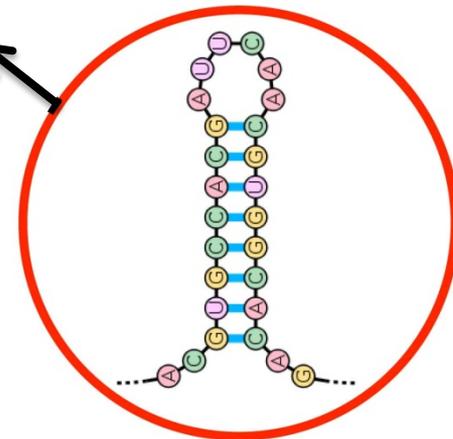
# Structural Genomics

AGCTGCT  
GCGATCCGATG  
GTTACACATTCATC  
AGCCAGAGAGAGAT  
GCCAAACACACCCAT  
GCTAAGGTGCGACTC  
AGCGTACCAGATA  
TTATAGATACAC  
TTGTGTC

Essential  
cancer  
pathways



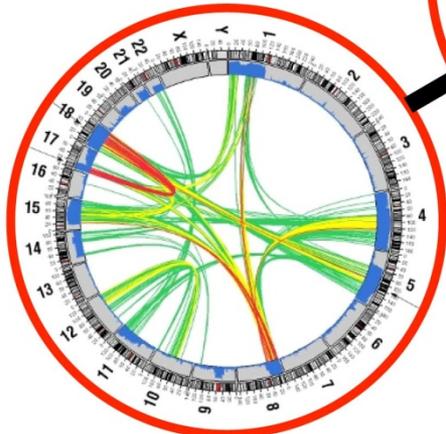
Computational Genomics



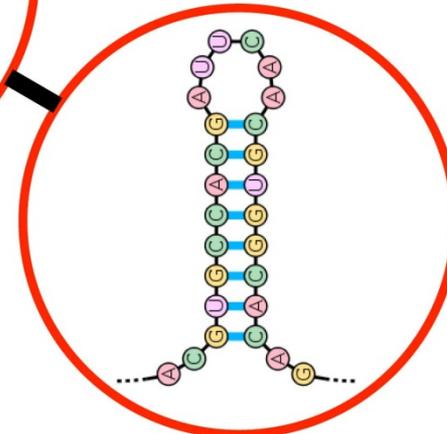
Functional Genomics

# Structural Genomics

AGCTGCT  
GCGATCCGATG  
GTTACACATTCATC  
AGCCAGAGAGAGAT  
GCCAAACACACCCAT  
GCTAAGGTGCGACTC  
AGCGTACCAGATA  
TTATAGATACAC  
TTGTGTC



Computational Genomics



Functional Genomics

# Metaphors of Cancer

❖ Cancer is a genetic disease

Pathways

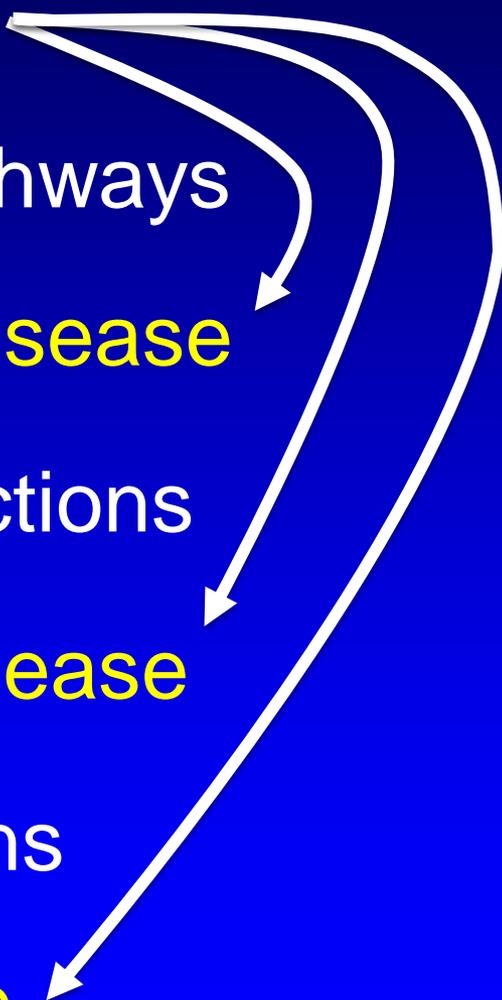
❖ Cancer is a cell biological disease

Cellular interactions

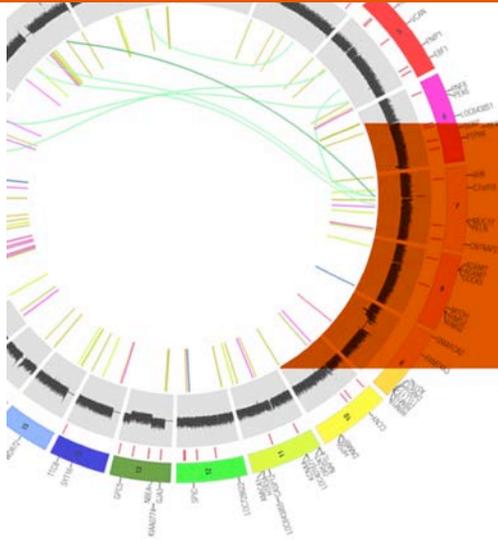
❖ Cancer is an organismal disease

Environmental interactions

❖ Cancer is a societal disease



# NCI Center for Cancer Genomics: Current Initiatives



The Cancer Genome Atlas 

TCGA

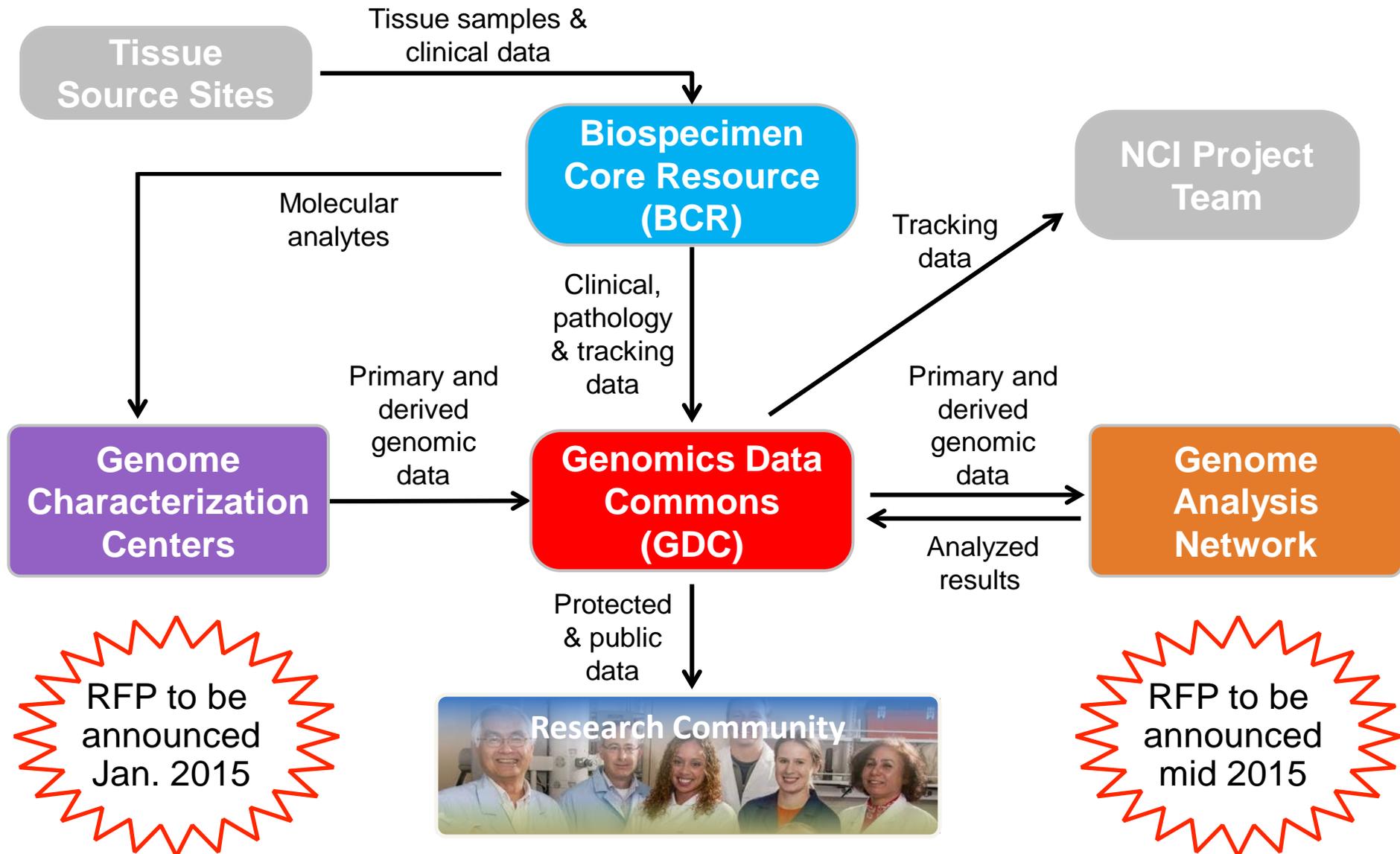
**TARGET**  
Therapeutically Applicable Research  
to Generate Effective Treatments

The banner features a young girl with blue eyes and a DNA double helix structure. The text 'TARGET' is in large red letters, and the tagline is in blue and green. The background includes a chemical structure diagram.

CTD<sup>2</sup>: A Bridge from Genomics to  
Cancer Therapeutics



# NCI Center for Cancer Genomics: Genomic pipeline

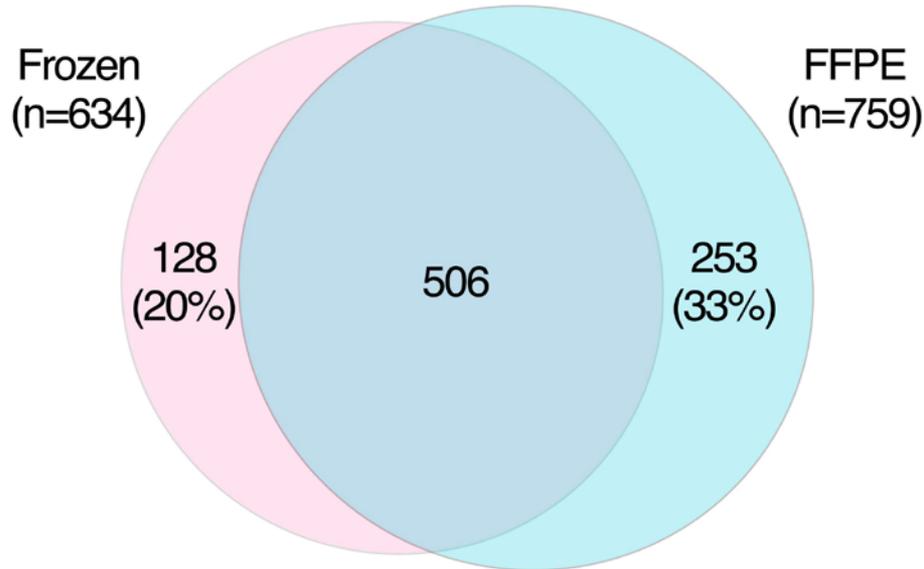


# Structural Genomics of Cancer: Two Game Changers

Analysis of formalin-fixed paraffin-embedded biopsies

Decreased cost of whole genome sequencing

SNV Mutation Discovery



# NCI Center for Cancer Genomics: Future Initiatives

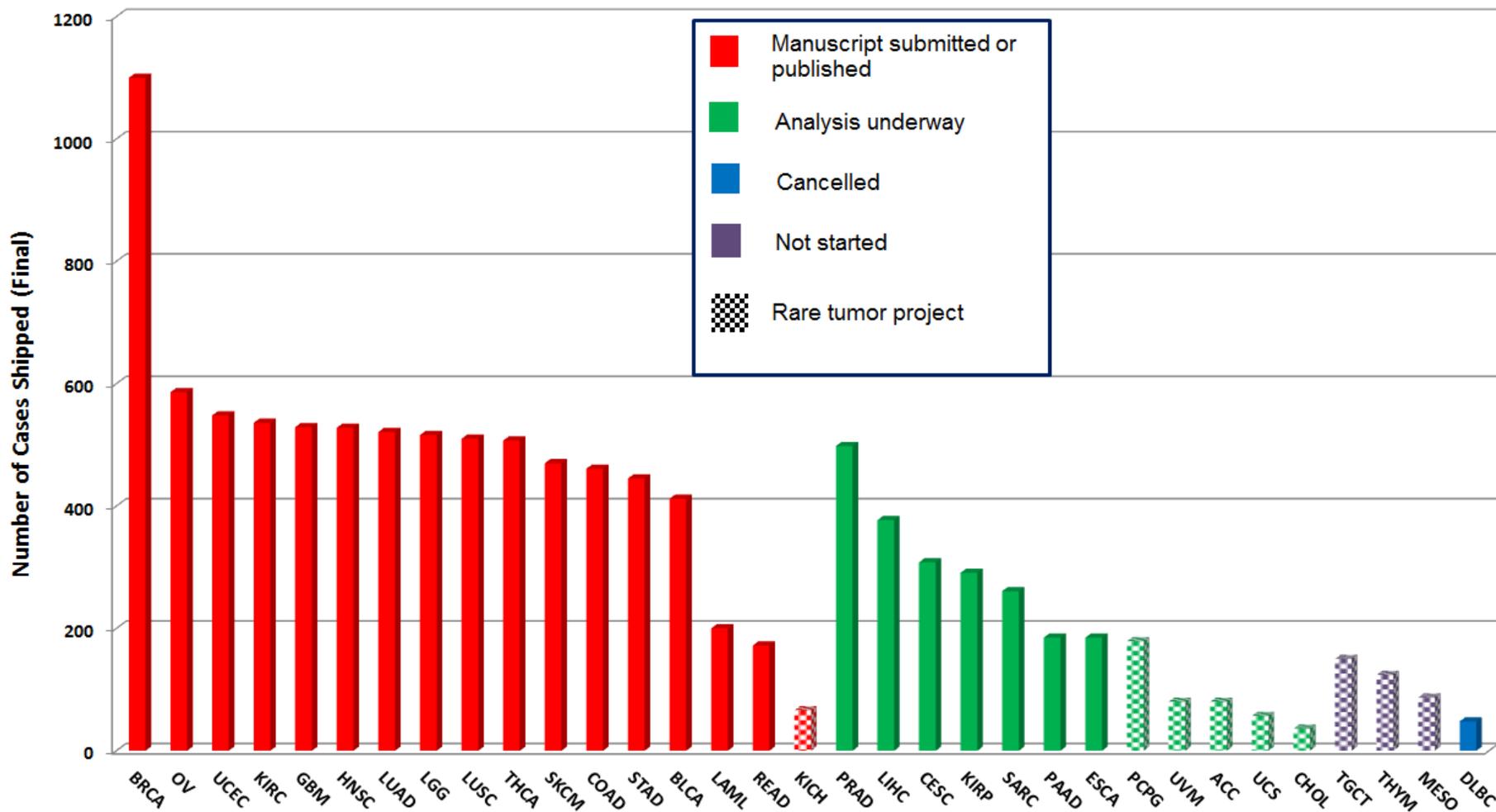
- Define the molecular basis for clinical phenotypes
  - Analyze completed clinical trials of NCI cooperative groups
    - Colorectal cancer
    - Lung adenocarcinoma
    - RFP to be announced to NCTN for genomic analysis of trial samples
  - Alchemist trial in lung adenocarcinoma
  - Exceptional responders initiatives
- Define the “full” set of genetic drivers in cancer
  - Pilot projects in colorectal, lung adeno, and ovarian cancer
- Next generation cancer models for functional genomics
- Develop NCI Genomics Data Commons (GDC)



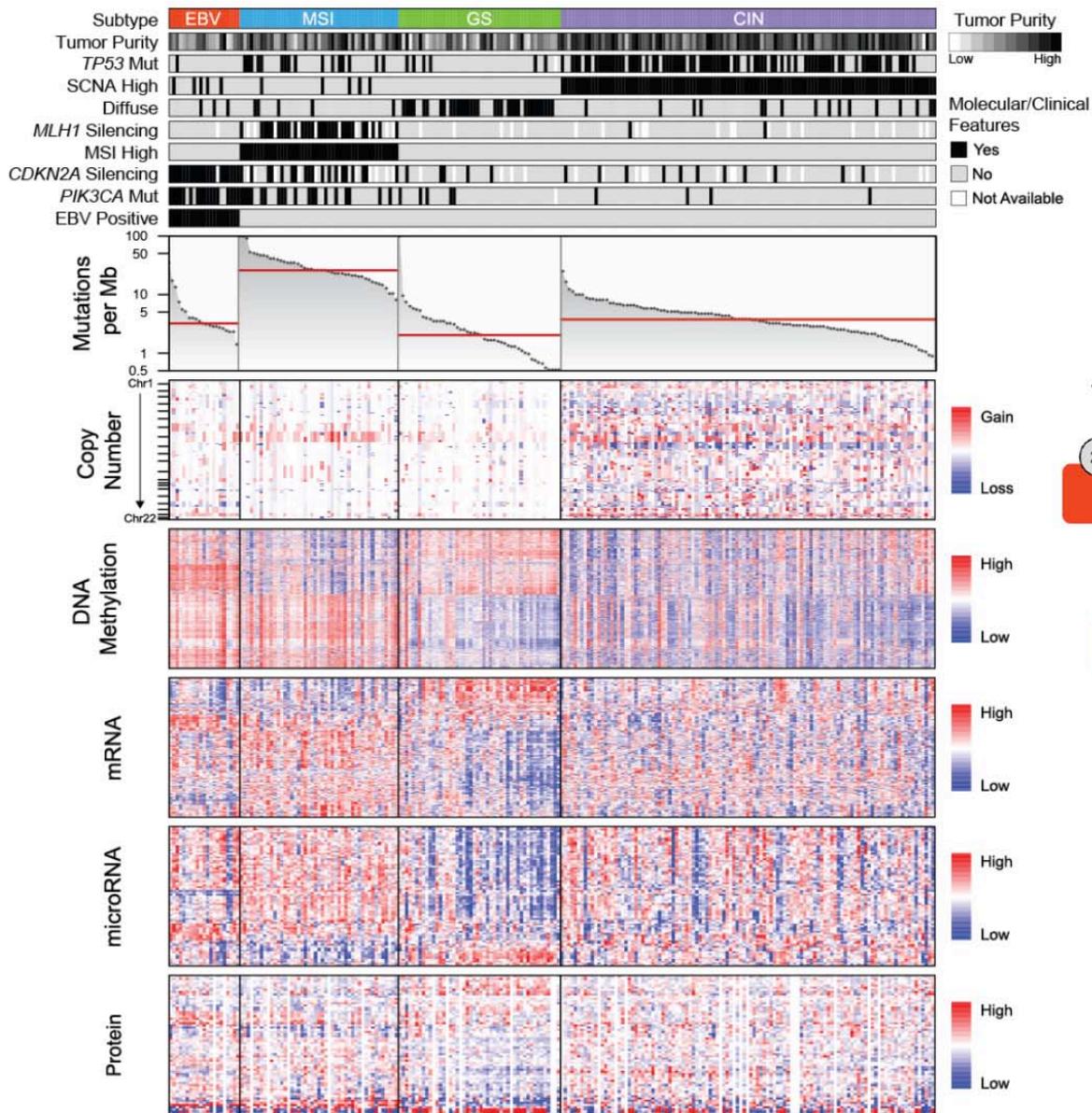
# Case Accrual and Analysis Status



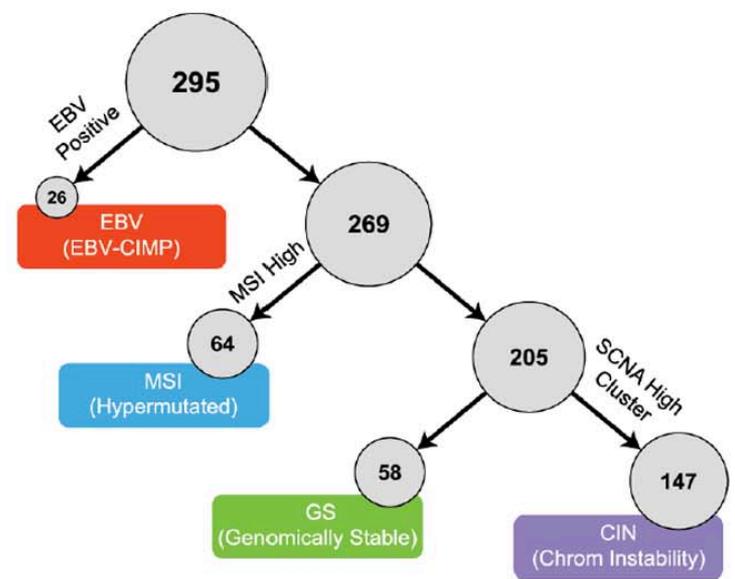
TCGA Tumor Project Progress as of November 2014



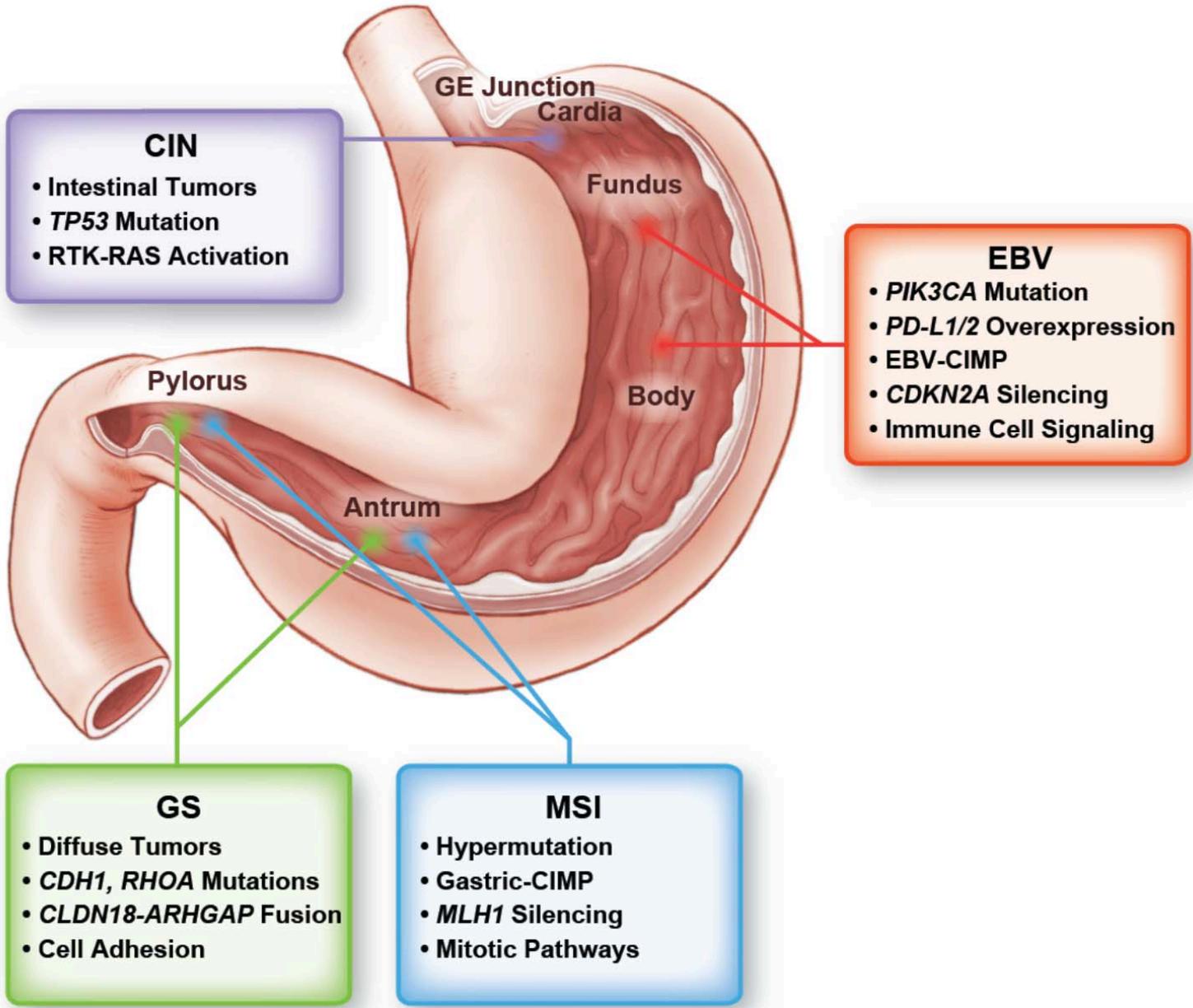
# TCGA Gastric Cancer Project – The Power of Integrative Analysis



244 Tumors



# TCGA Gastric Cancer Project – The Power of Integrative Analysis

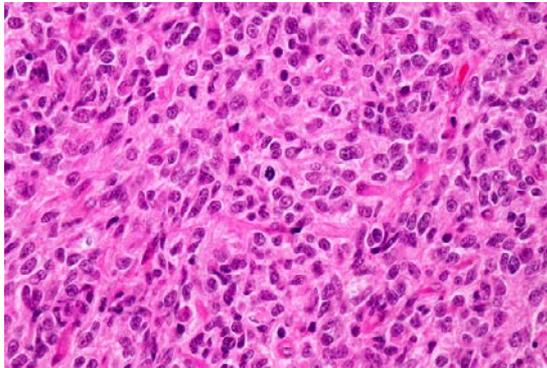


# Histopathology of Gliomas

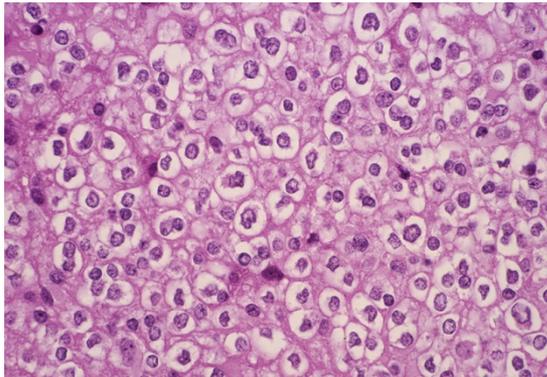


## Low grade gliomas

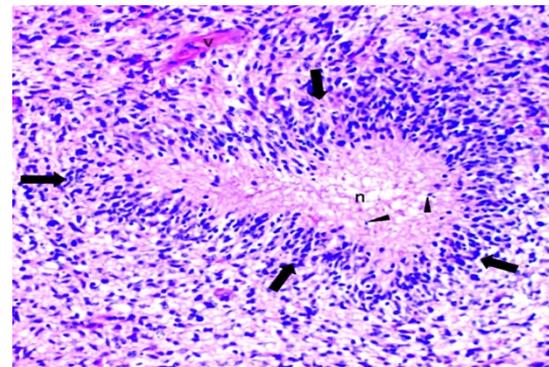
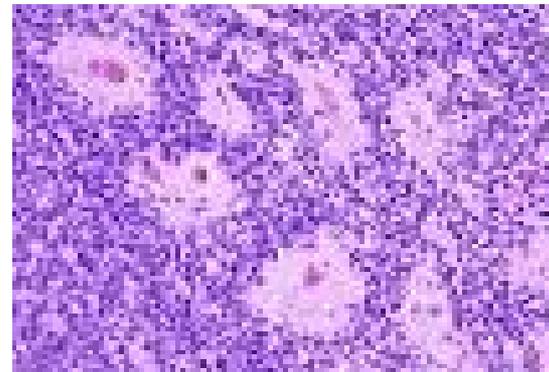
### Astrocytoma



### Oligodendroglioma

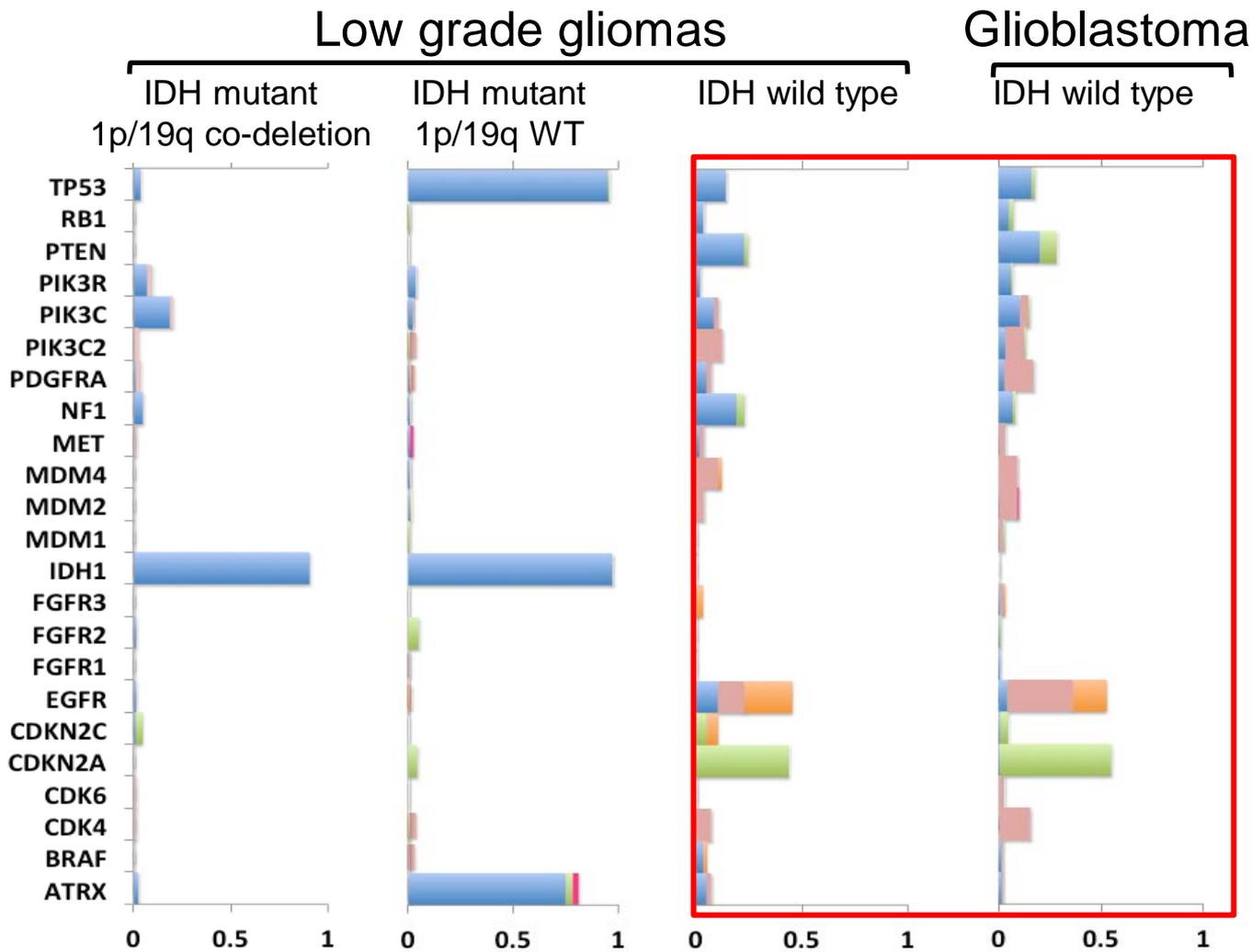
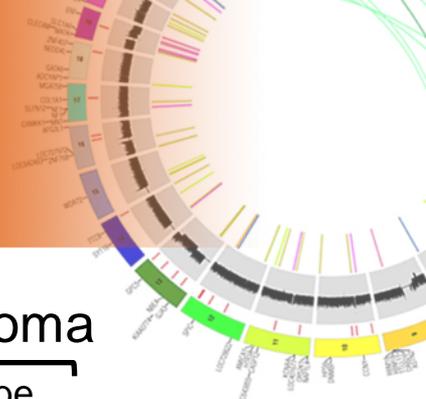


## Glioblastoma Multiforme





# Common Genetic Profiles in Glioblastoma and a Subset of Low Grade Gliomas





# TARGET

Therapeutically Applicable Research  
to Generate Effective Treatments



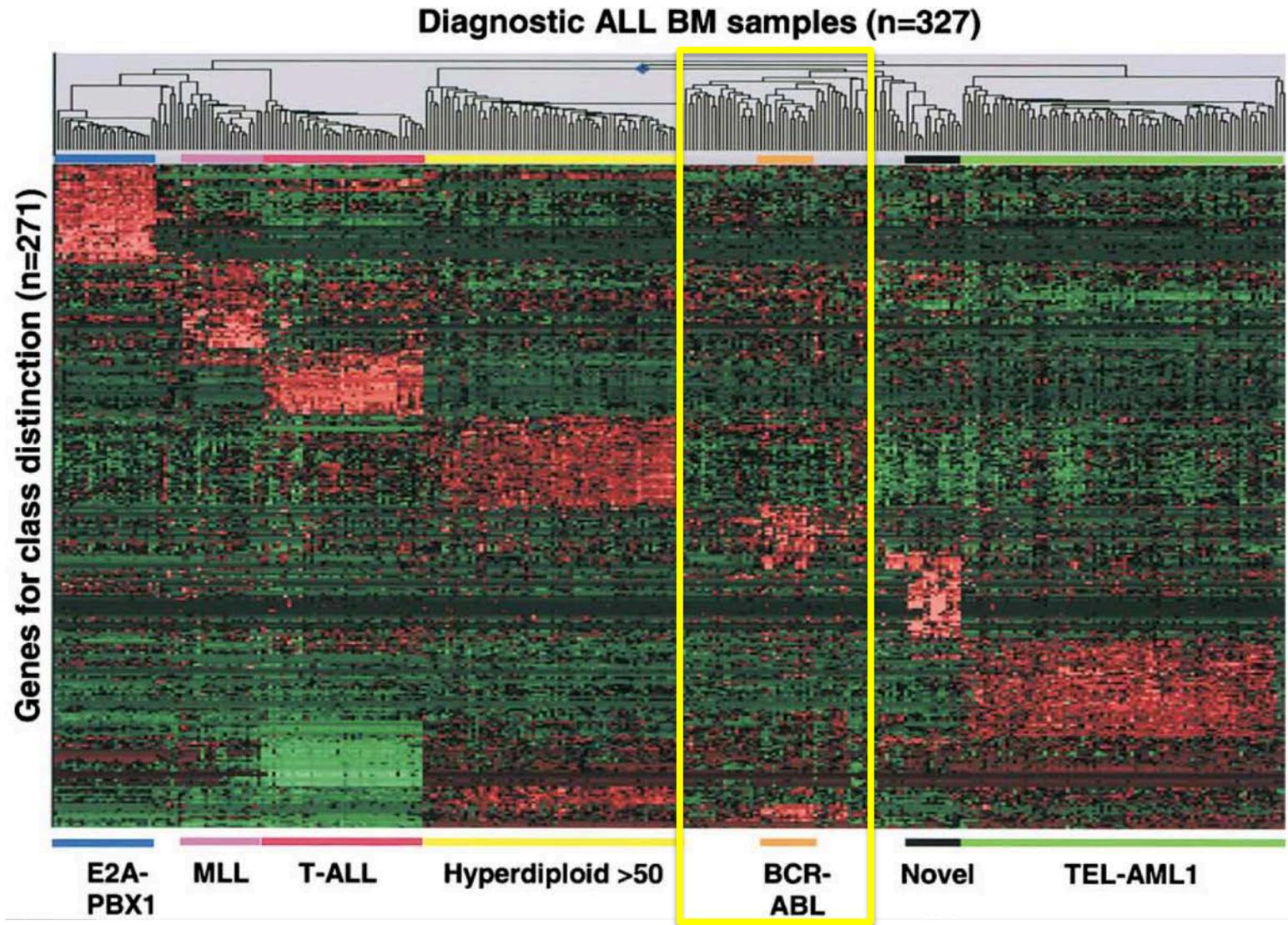
***Daniela Gerhard, Ph.D.***

***Director***

***Office of Cancer Genomics***

***National Cancer Institute***

# The Ph-like subtype of B cell Acute Lymphoblastic Leukemia



Ph-like



## Kinase Fusions Discovered in Ph-like ALL

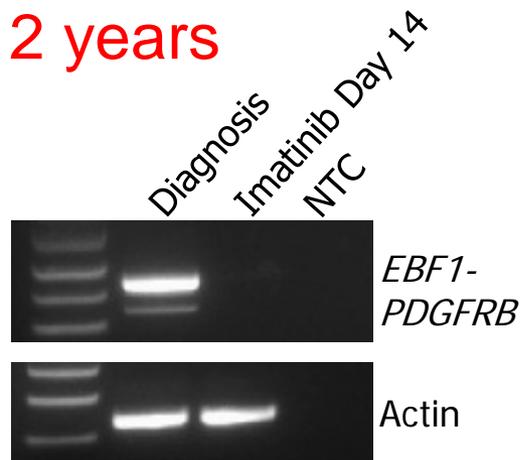
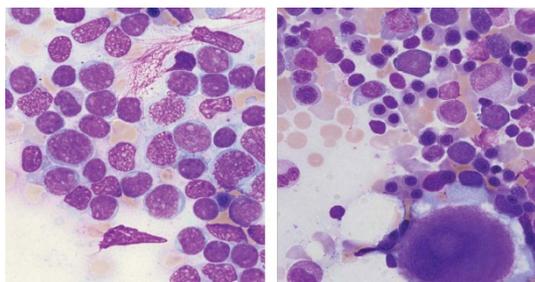
Kinase Gene	Tyrosine Kinase Inhibitor	Fusion Partners	Patients	
			<i>number</i>	
<i>ABL1</i>	Dasatinib	6	14	
<i>ABL2</i>	Dasatinib	3	7	
<i>CSF1R</i>	Dasatinib	1	4	
<i>PDGFRB</i>	Dasatinib	4	11	
<i>CRLF2</i>	JAK2 inhibitor	2	30	
<i>JAK2</i>	JAK2 inhibitor	10	19	
<i>EPOR</i>	JAK2 inhibitor	2	9	
<i>DGKH</i>	Unknown	1	1	
<i>IL2RB</i>	JAK1 inhibitor, JAK3 inhibitor, or both	1	1	
<i>NTRK3</i>	Crizotinib	1	1	
<i>PTK2B</i>	FAK inhibitor	2	1	
<i>TSLP</i>	JAK2 inhibitor	1	1	
<i>TYK2</i>	TYK2 inhibitor	1	1	

# Response of Pediatric B-ALL With a EBF1-PDGFRB Translocation to Imatinib

- 10 year old male with refractory B-ALL – 70% blasts at day 29
- Cytogenetics: 5q alteration  
=> interstitial deletion by array CGH disrupting EBF1 and PDGFRB genes
- *EBF1-PDGFRB* fusion translocation detected by RT-PCR
- Commenced imatinib
- Immediate clinical improvement
- 1 week: morphological remission
- 2 weeks: MRD 0.017%
- Consolidation chemotherapy added

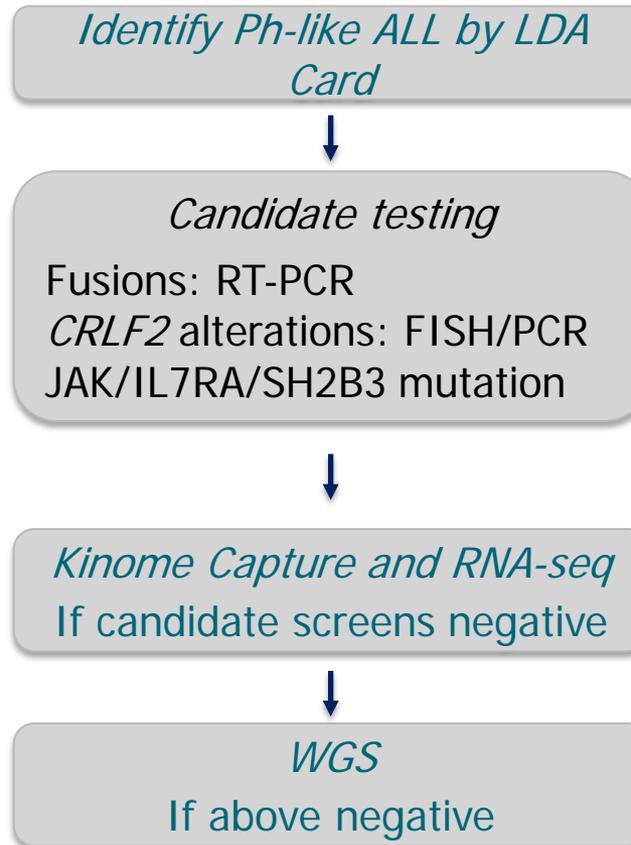
=> Patient remains in CR > 2 years

Before imatinib      After imatinib



# Identification and Treatment of Ph-Like ALL

## ***Plans for COG AALL1131 in 2015***



**ABL1/ABL2/PDGRFB/CSF1R fusion positive:**  
Add dasatinib in prospective phase and compare outcome to that of pts from retrospective phase

# Important Open Questions in Cancer Structural Genomics



What is the molecular basis of clinical phenotypes?

Aggressive vs. indolent disease

Metastatic vs. localized disease

Response to therapy

Mechanisms of resistance

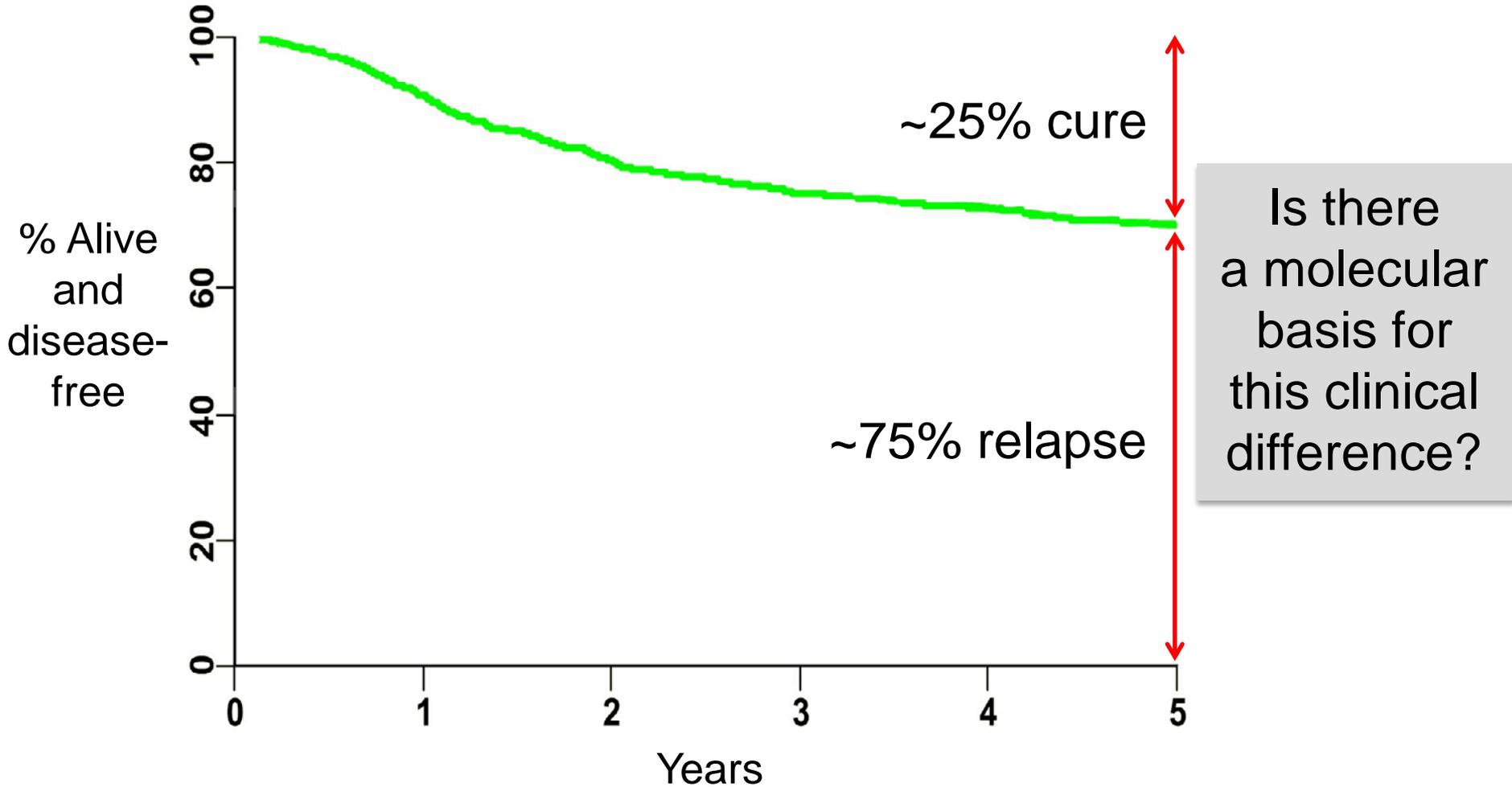
# Important Open Questions in Cancer Structural Genomics



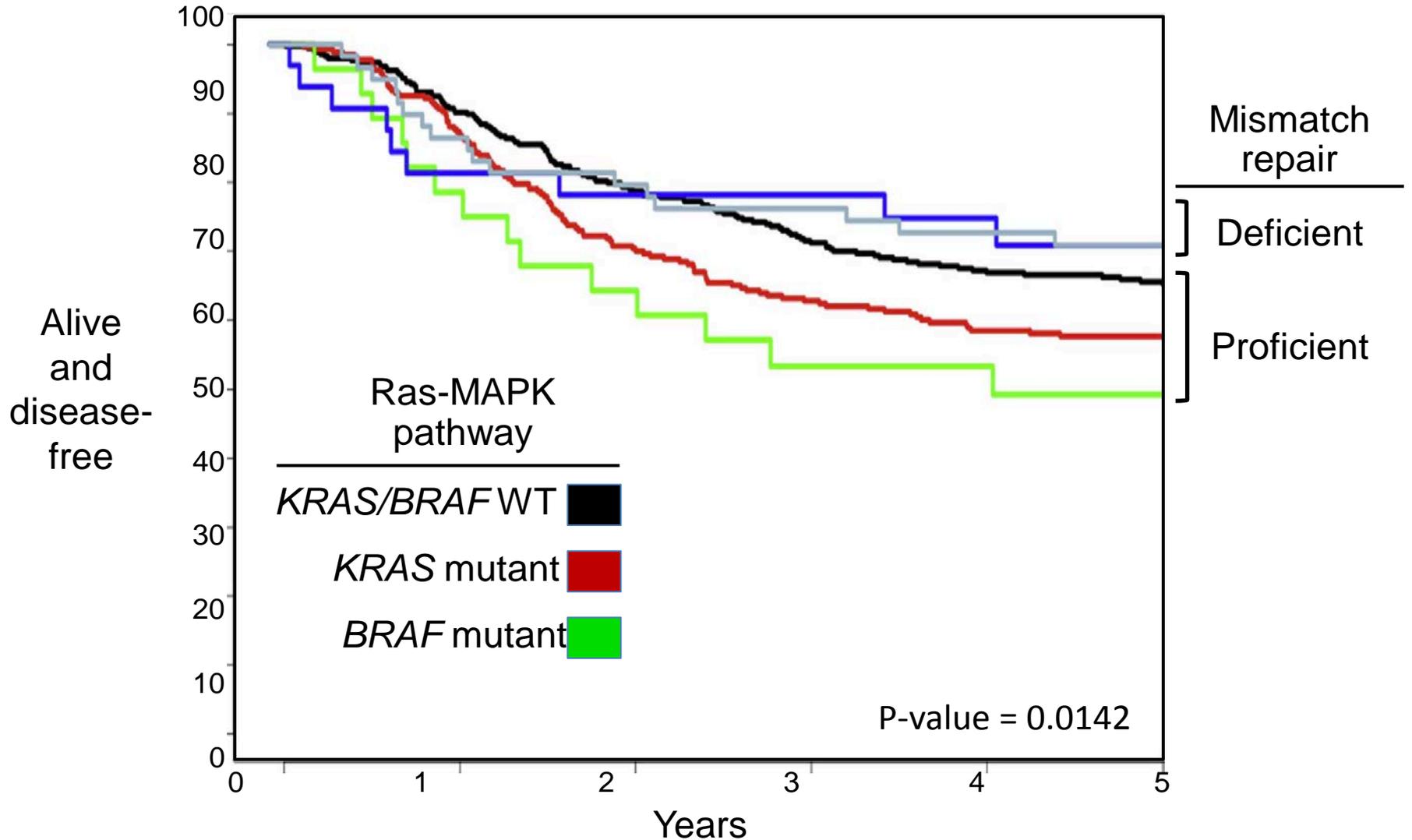
What is the molecular basis for cure vs. relapse following adjuvant chemotherapy?

Opportunities in colorectal cancer and lung adenocarcinoma

# Disease-free Survival in Stage 2-3 Colorectal Cancer Treated with Adjuvant FOLFOX Chemotherapy

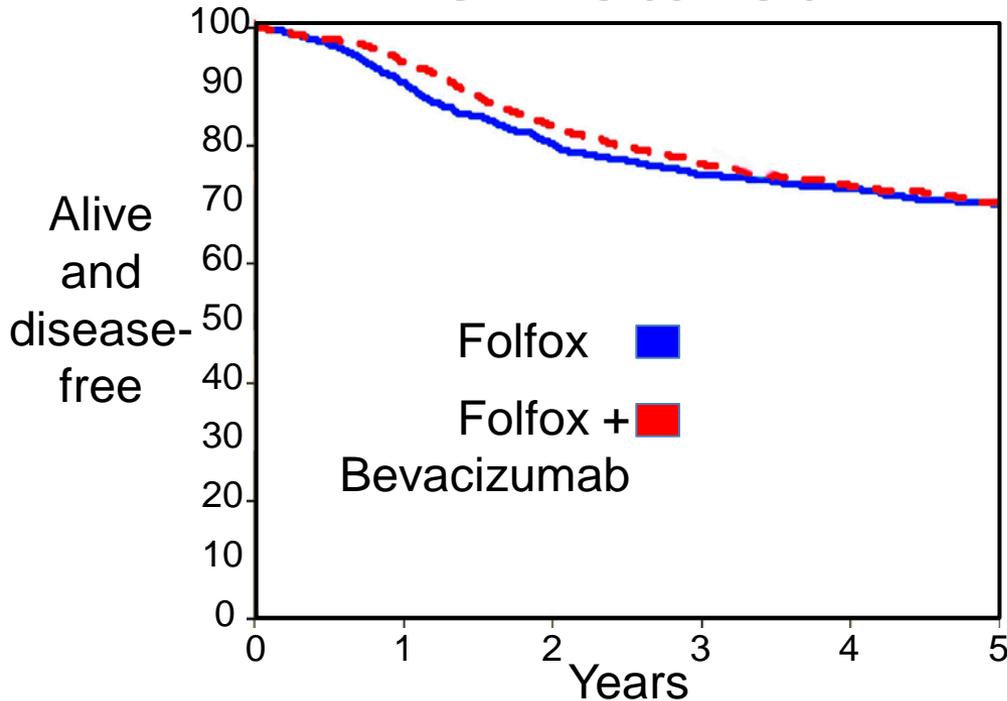


# Influence of Tumor Genetics on Progression-free Survival in Colorectal Cancer Treated With Adjuvant Chemotherapy

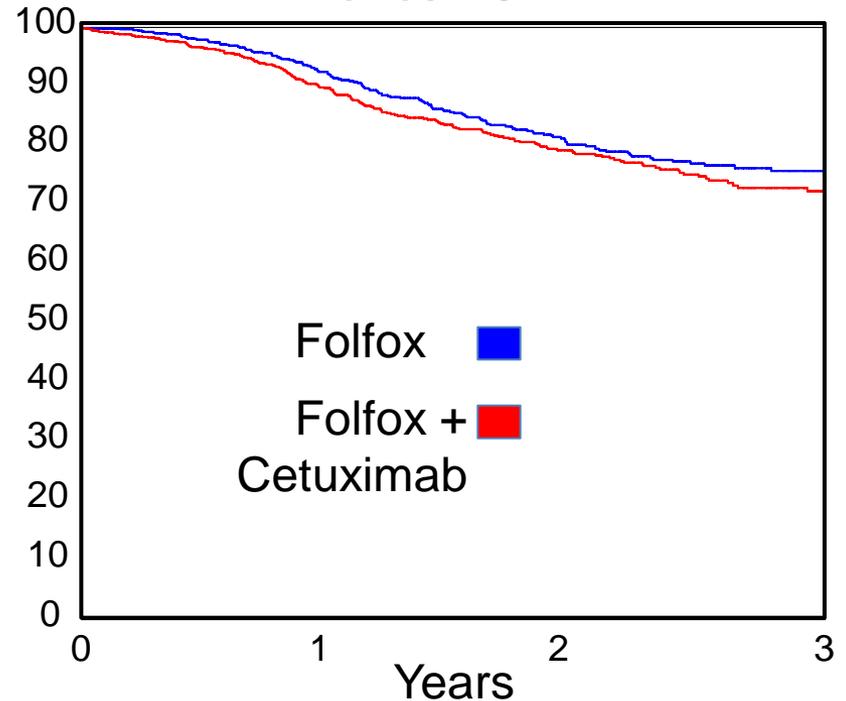


# Opportunity: Completed NCI Adjuvant Trials in Colorectal Ca

NSABP C-08 + C-07



Alliance N0147

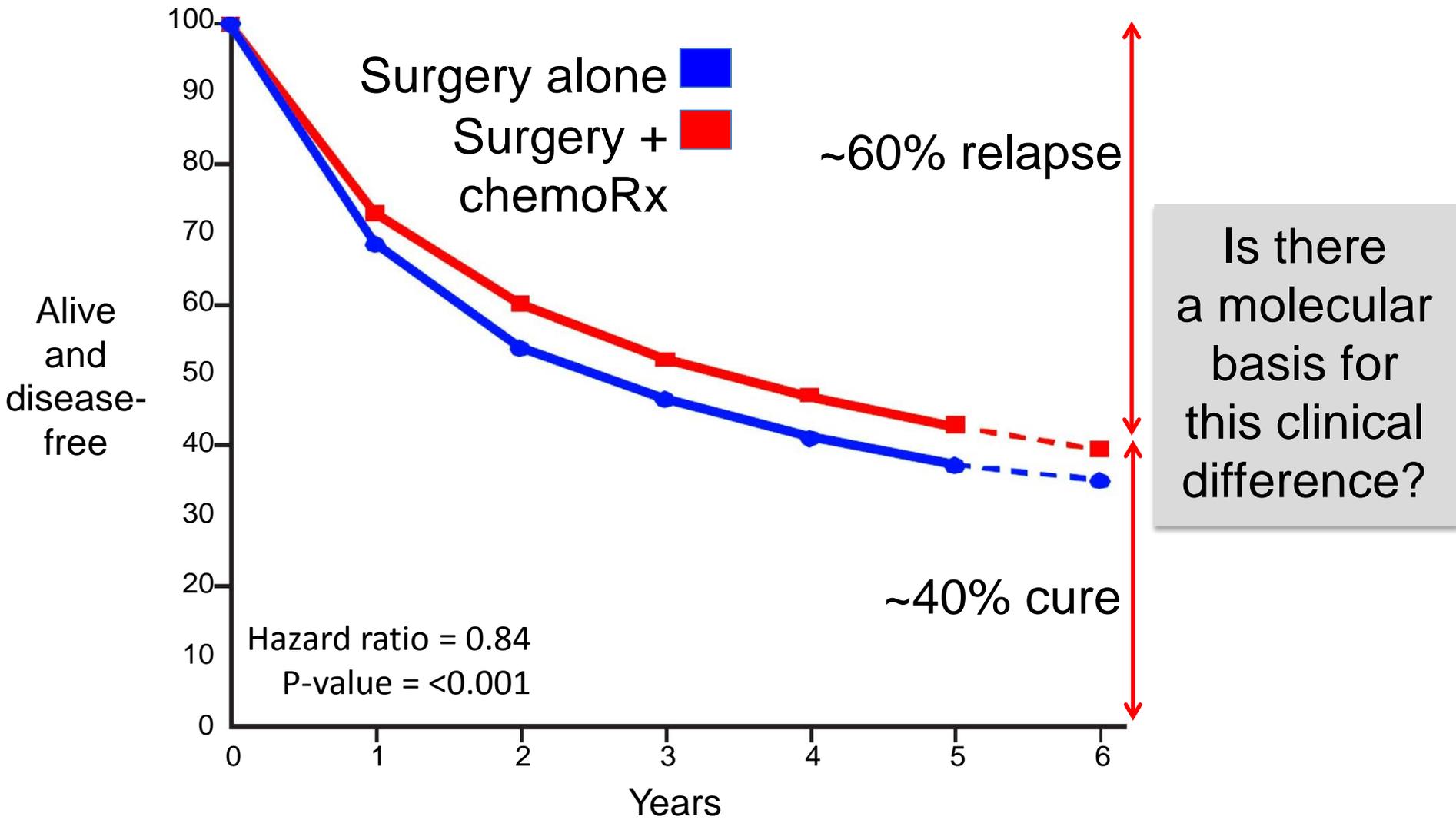


Question: Can tumor genomics at diagnosis predict outcome to adjuvant therapy?

Plan: Whole exome/genome sequencing + transcriptome sequencing  
Compared equal #s of biopsies from cured vs. relapsed cases  
Identify genetic or gene expression predictors of survival  
Use training and test set paradigm to validate predictor

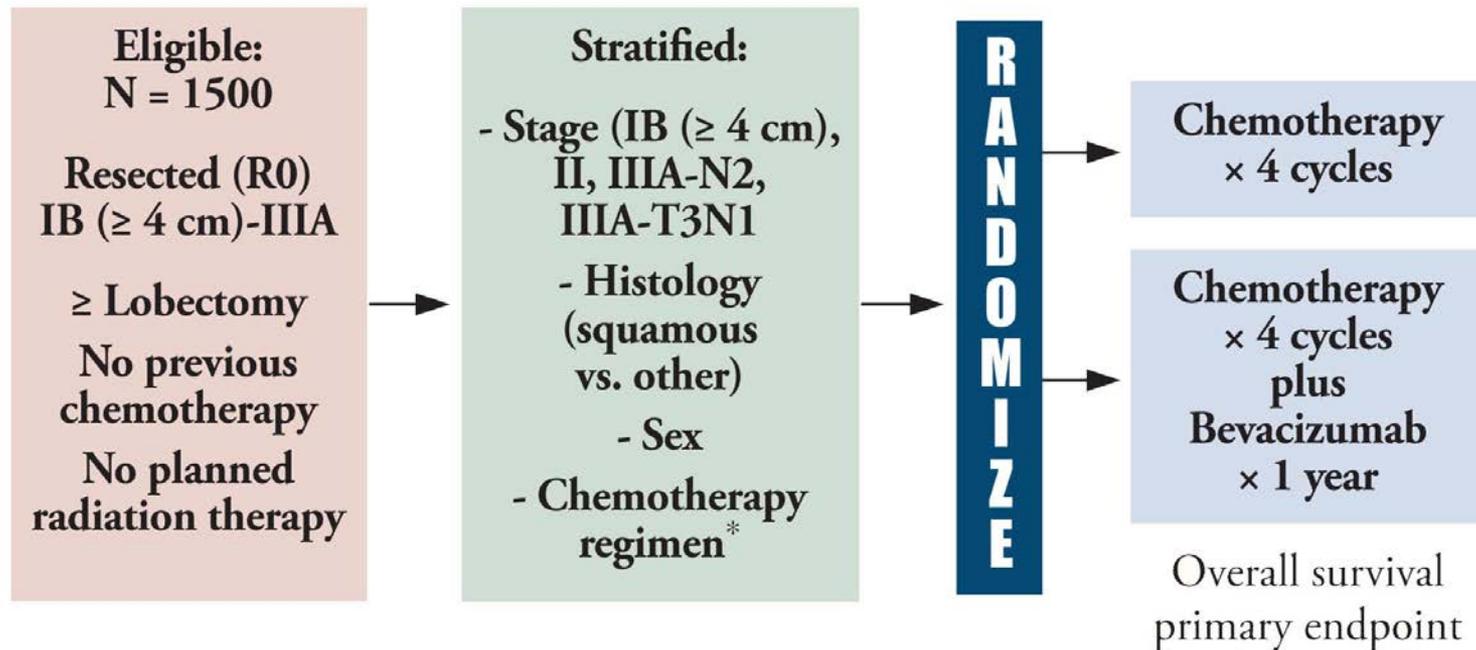
Promise: A molecular predictor could reduce the frequency/duration of surveillance  
=> Decreased anxiety for patient and decreased healthcare costs

# Benefit of Adjuvant Chemotherapy in Stage 1-3 Non-small Cell Lung Carcinoma



# Opportunity: Completed NCI Adjuvant Trial in NSCLC

ECOG 1505 (~1000 adenocarcinoma biopsy samples)

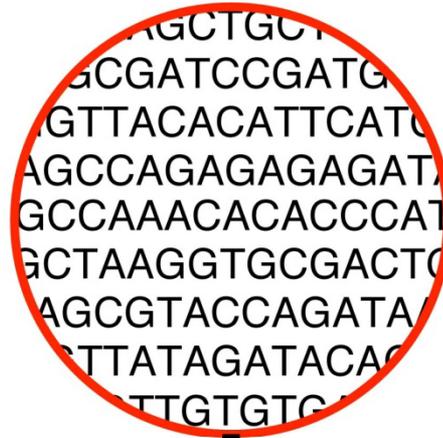


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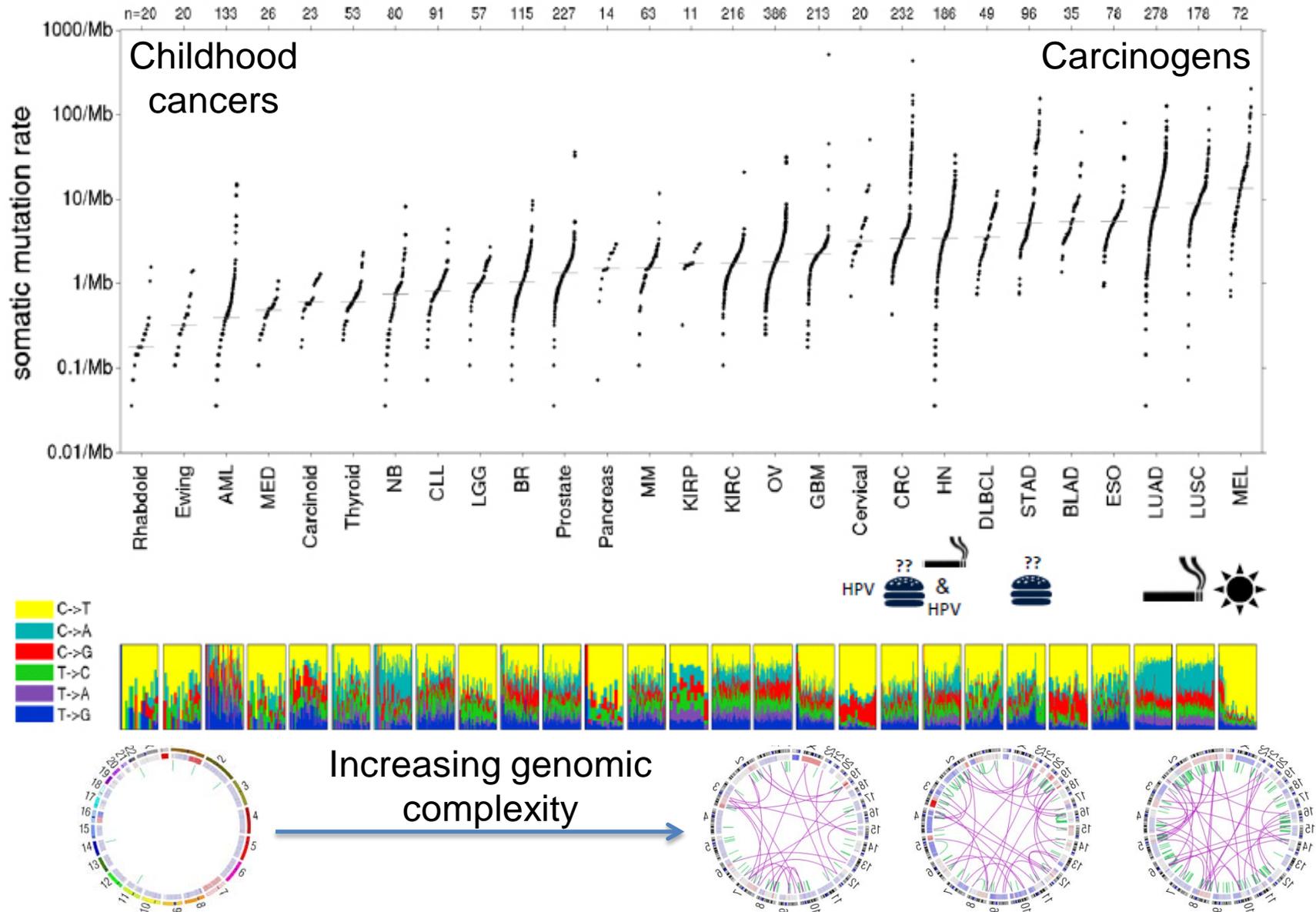
Promise: A molecular predictor could reduce the frequency/duration of surveillance  
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# Important Open Questions in Cancer Structural Genomics

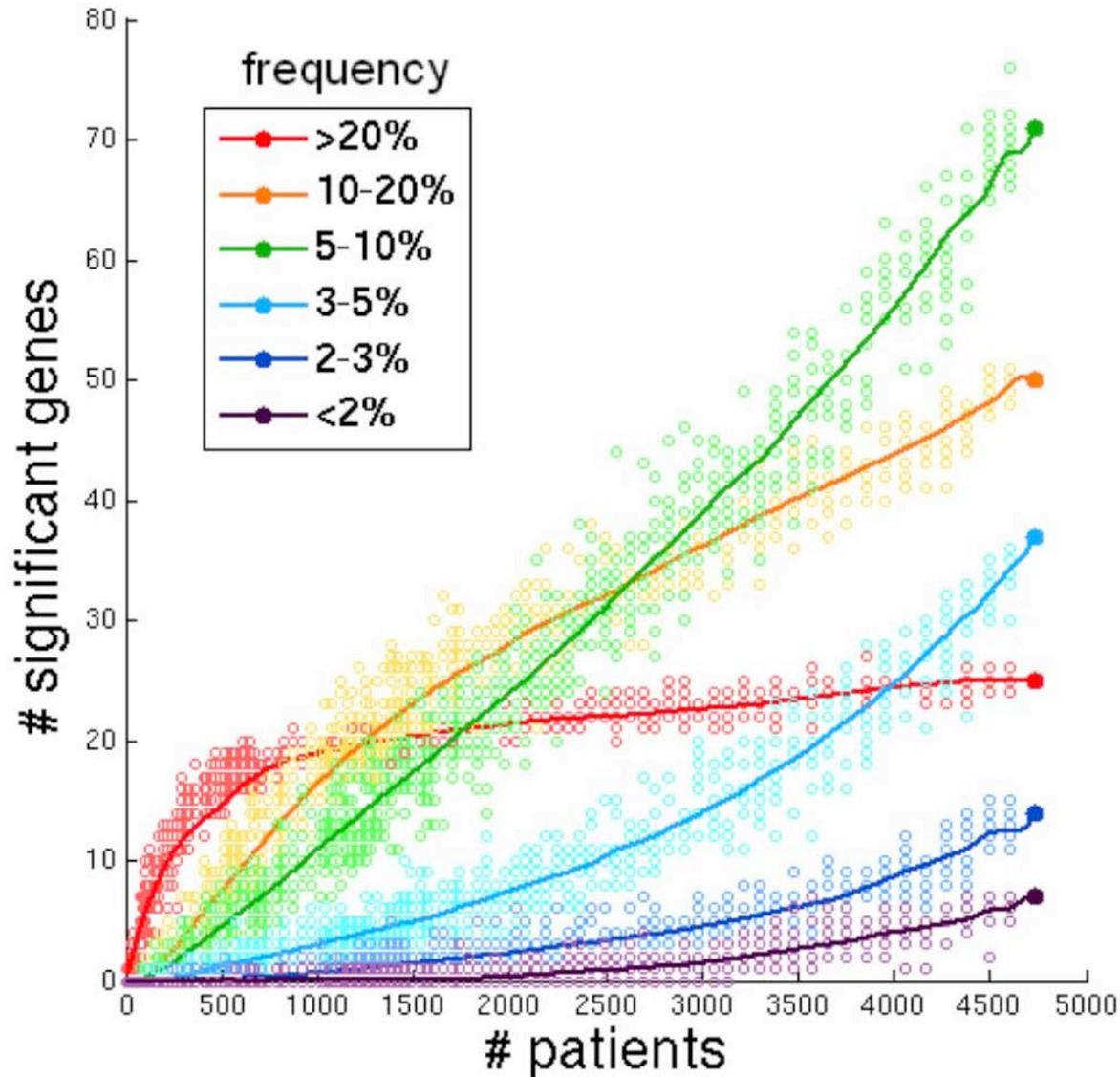


- What is the “full” extent of genetic drivers in cancer?
  - Can we define genetic events occurring in >2% of patients?
  - Which genetic events co-occur and which are mutually exclusive? => Define genetic pathways to cancer
  - Will whole genome sequencing discover non-coding driver mutations and cryptic chromosomal rearrangements?

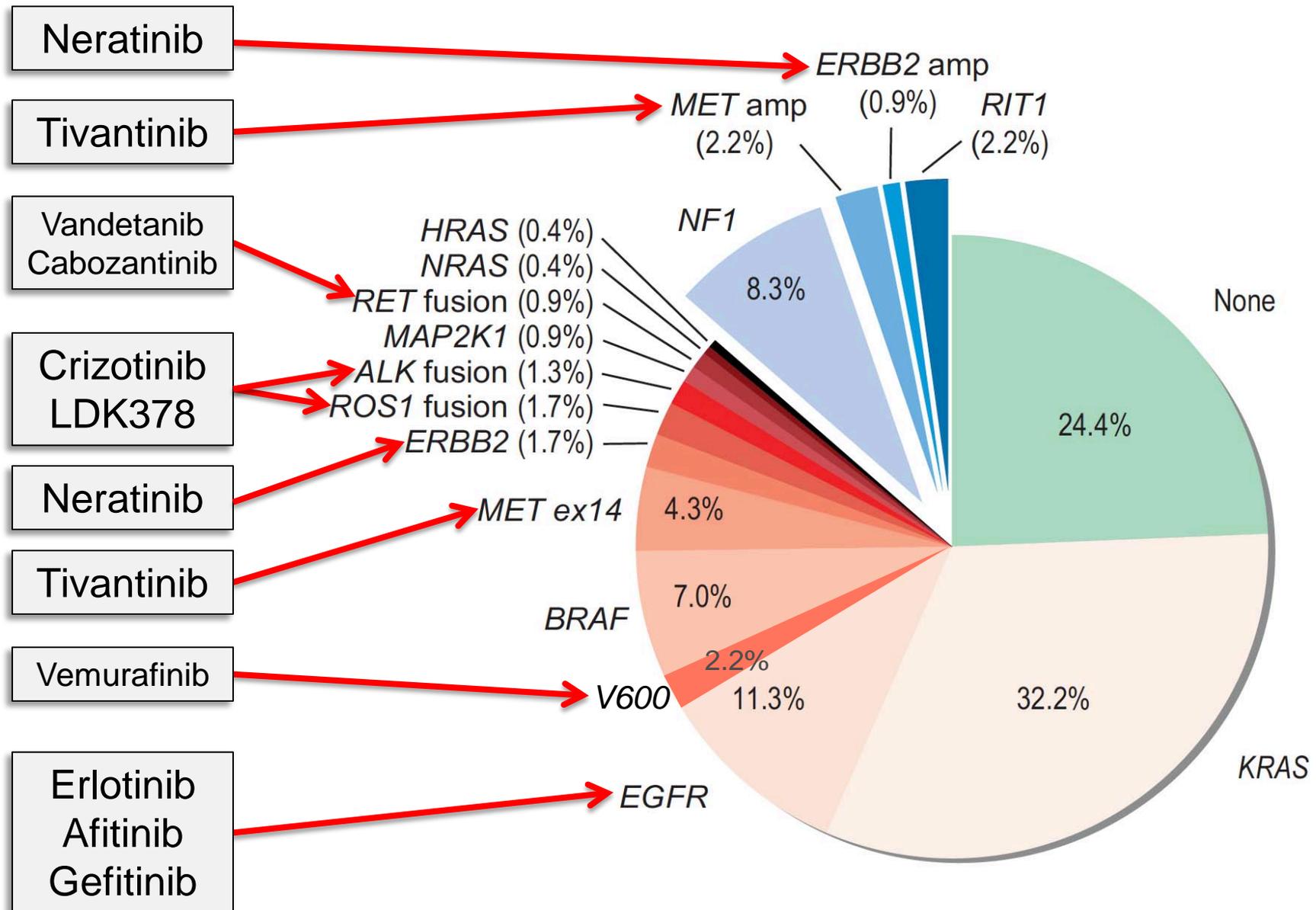
# The Mutational Burden of Human Cancer



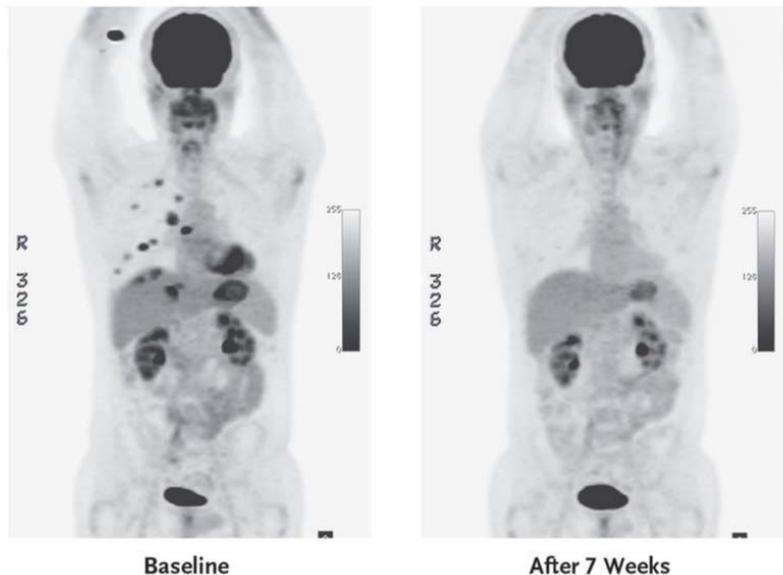
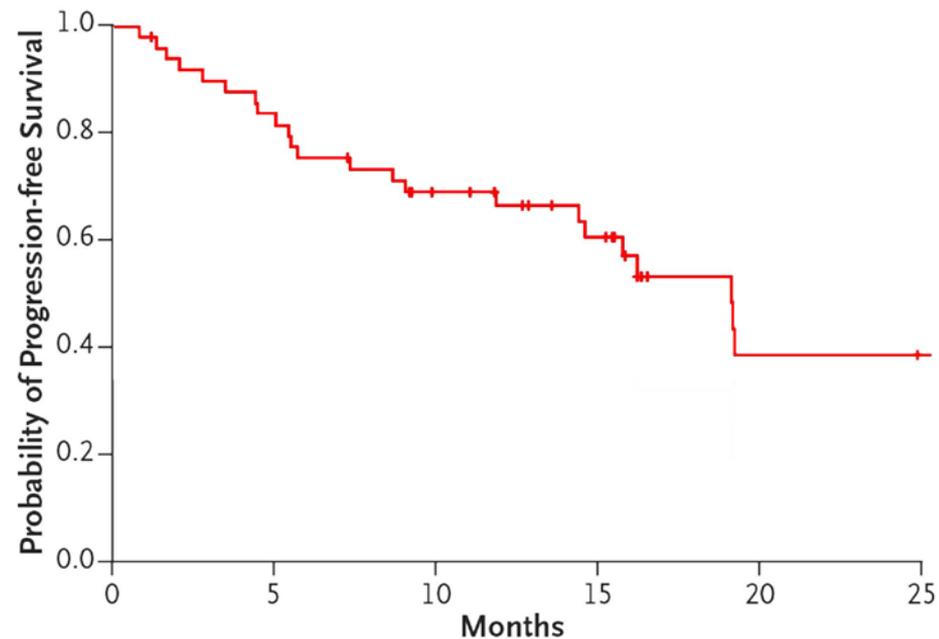
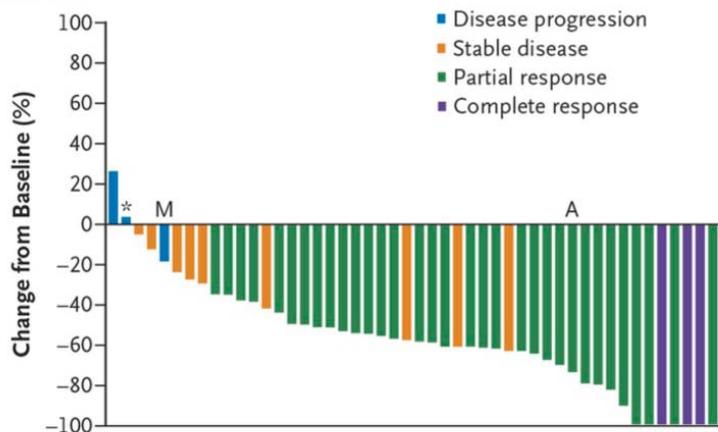
# Many Cancer Drivers With <20% Prevalence Remain Undiscovered



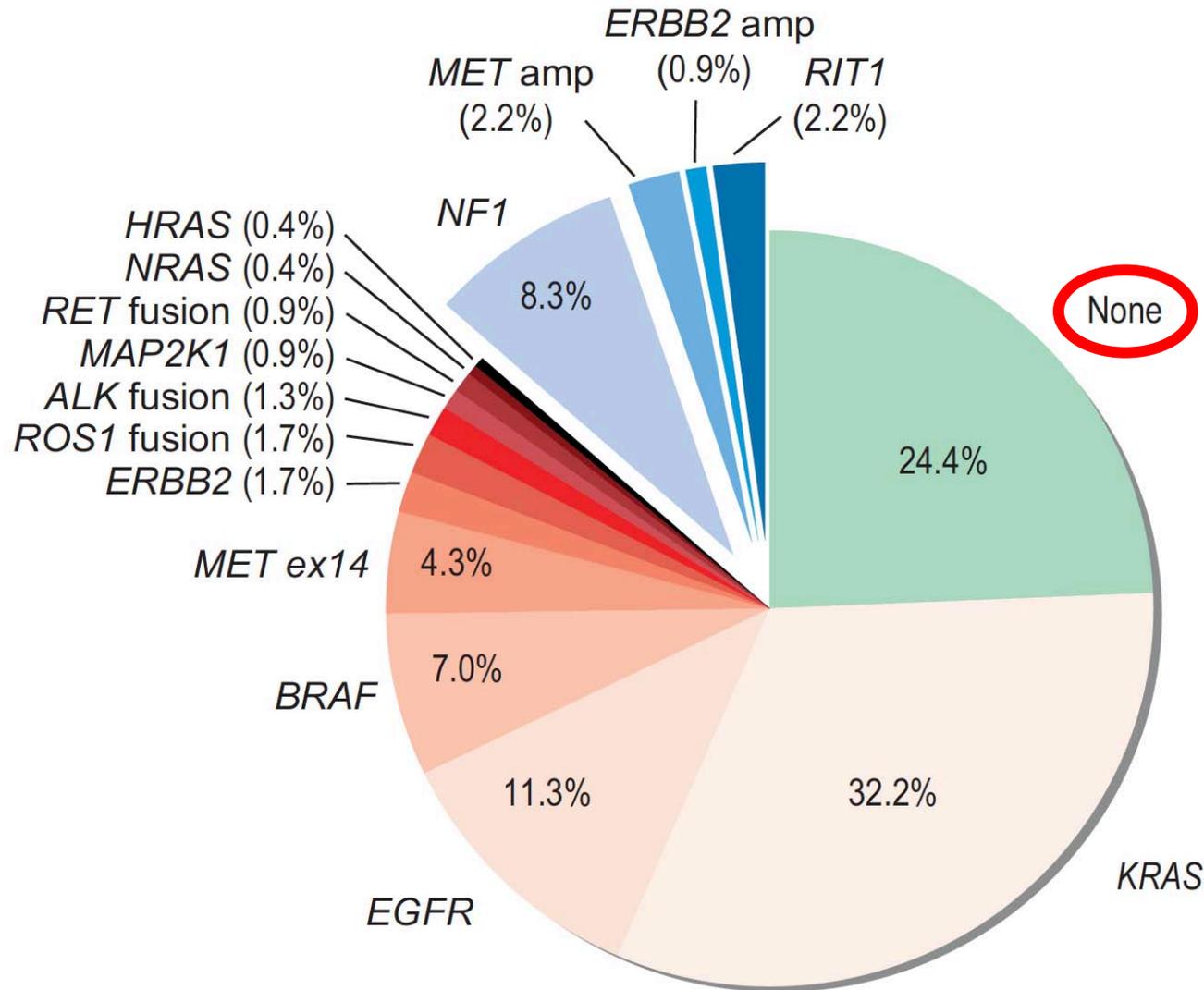
# Driver Genes in Lung Adenocarcinoma



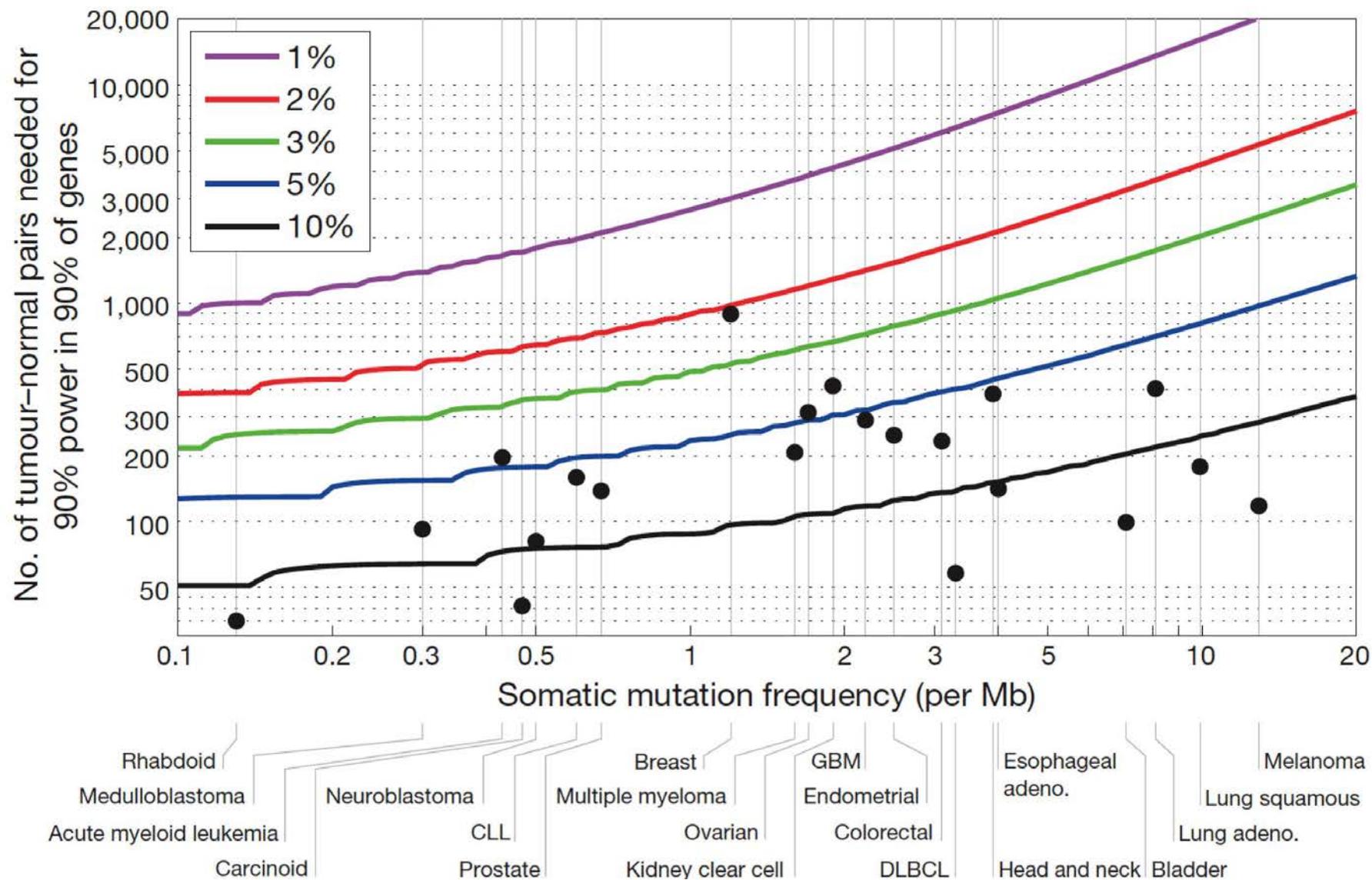
# Crizotinib Produces Prolonged Objective Responses in Lung Adenocarcinoma with ROS1 translocation



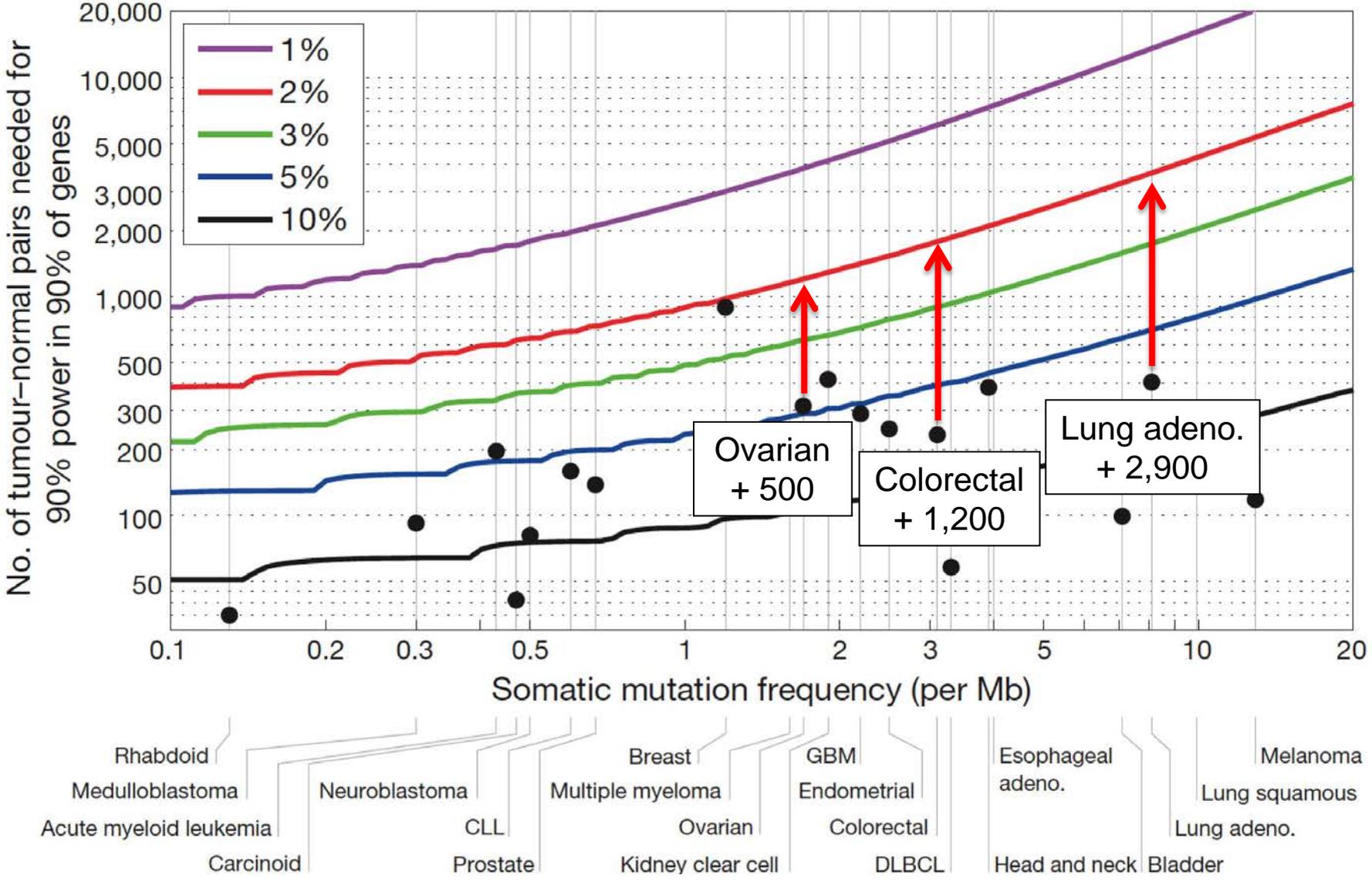
# Driver Genes in Lung Adenocarcinoma



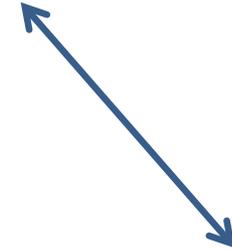
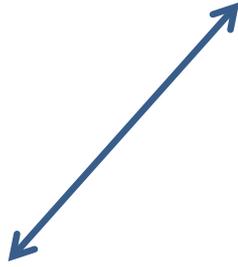
# Power Calculation for Cancer Driver Discovery



# Discovery of Cancer Drivers With 2% Prevalence



# Cancer Driver Discovery Cohort



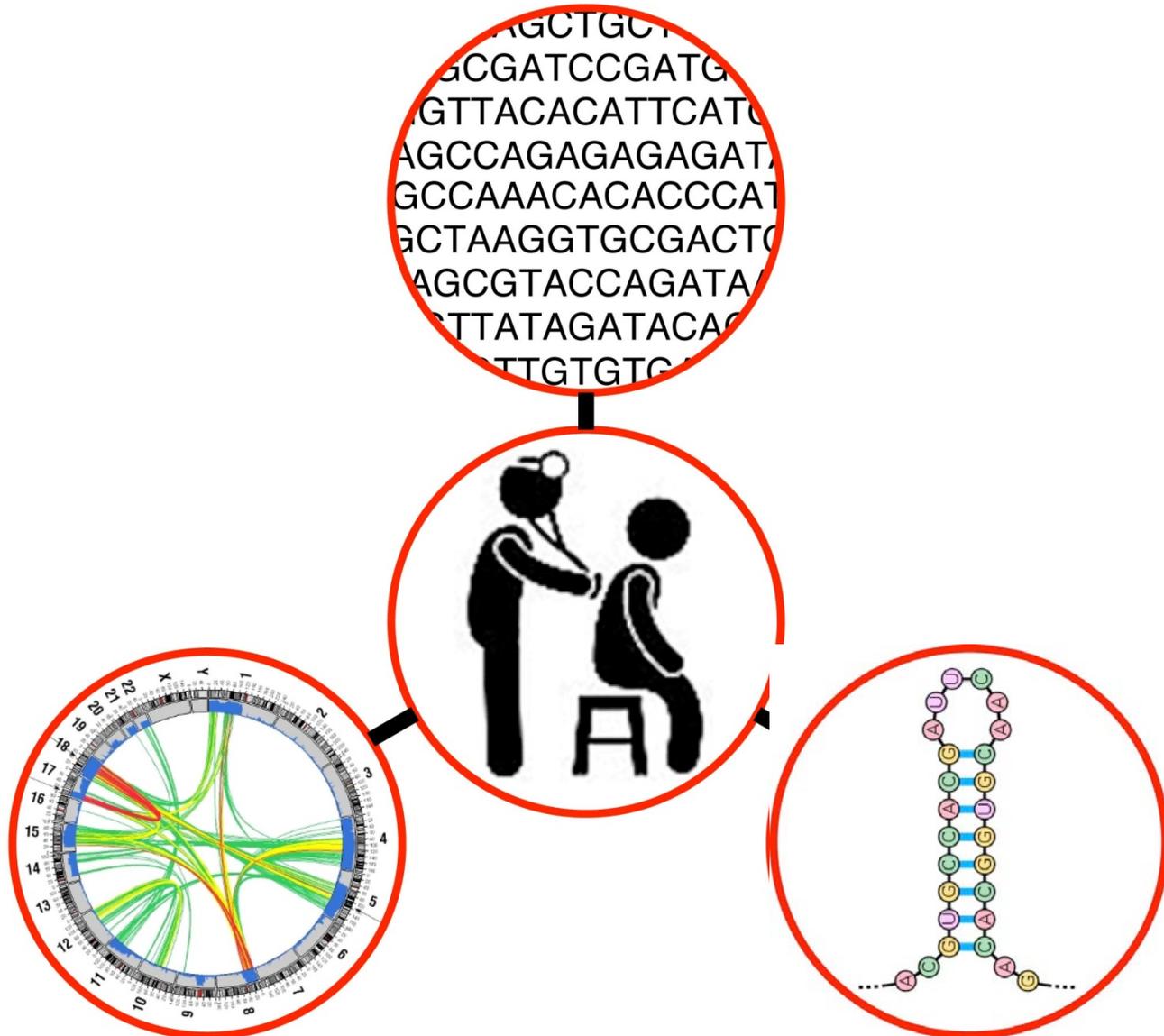
TCGA

*Completed  
clinical trials  
-NCI-sponsored  
-Institutional*

*Prospective  
clinical trials  
(e.g. Alchemist)*

*Existing  
institutional  
cancer biopsy  
banks*

# Prospects in Cancer Functional Genomics



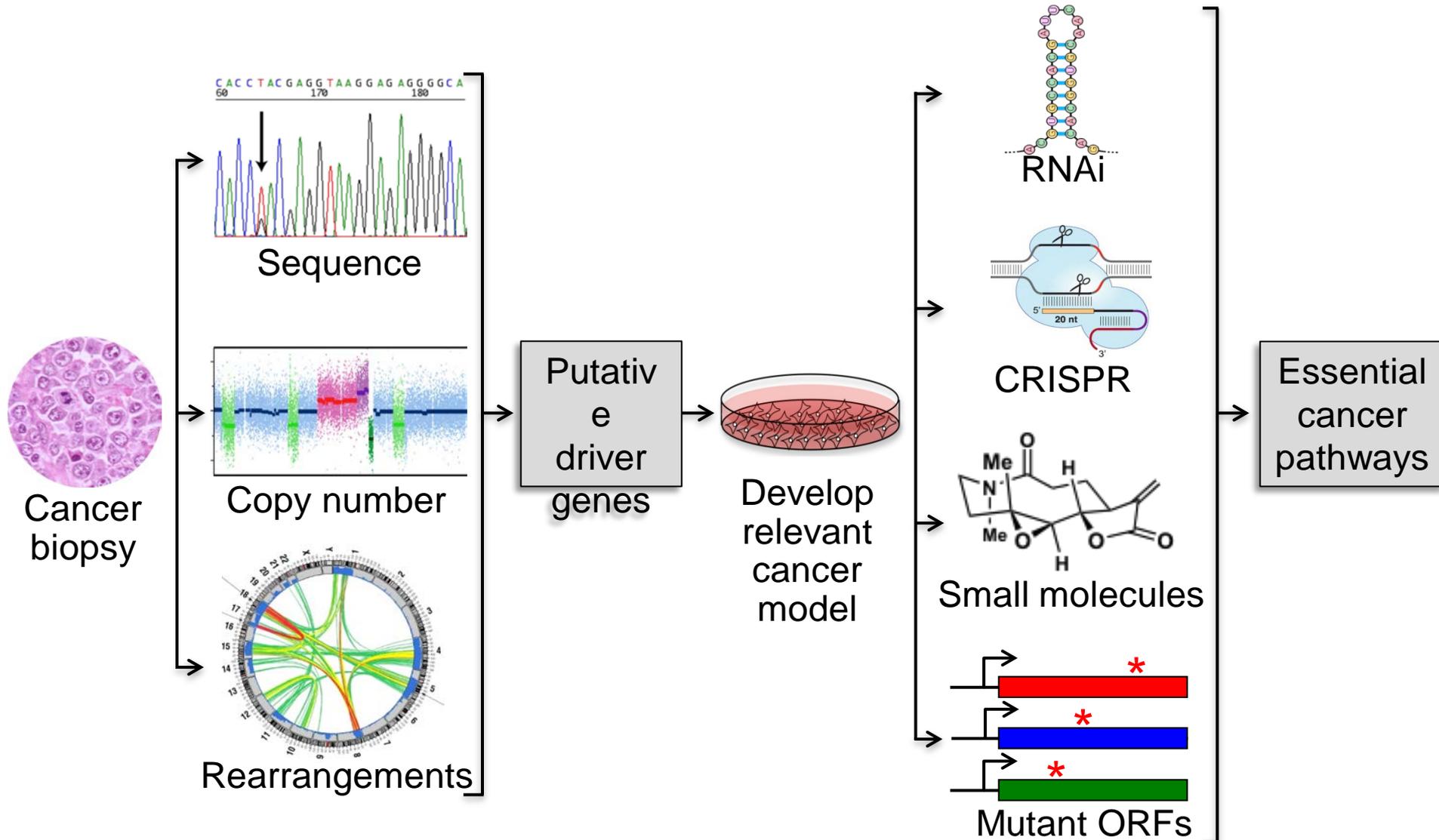
Computational Genomics

Functional Genomics

# Integration of Functional Genomics and Structural Genomics is Required to Identify Essential Cancer Pathways

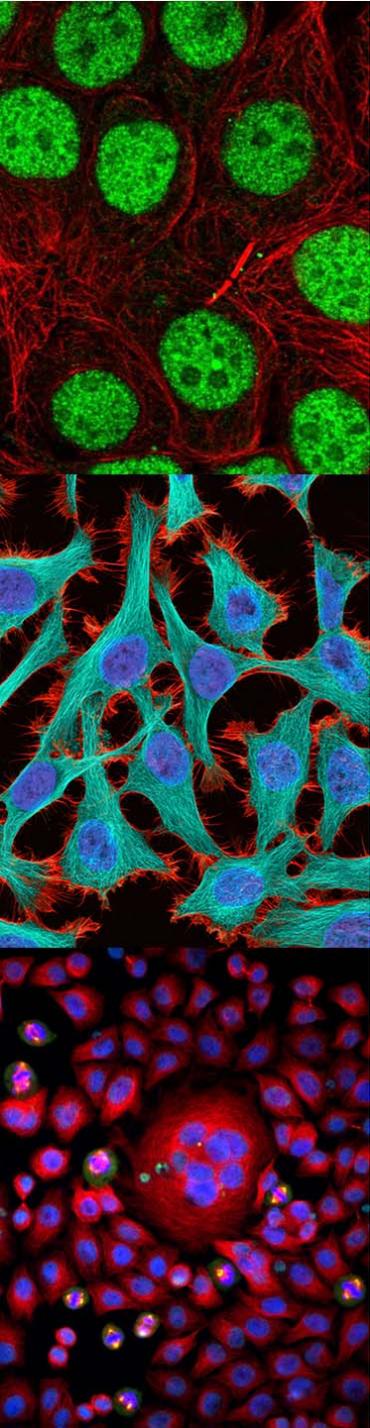
## Structural genomics

## Functional genomics



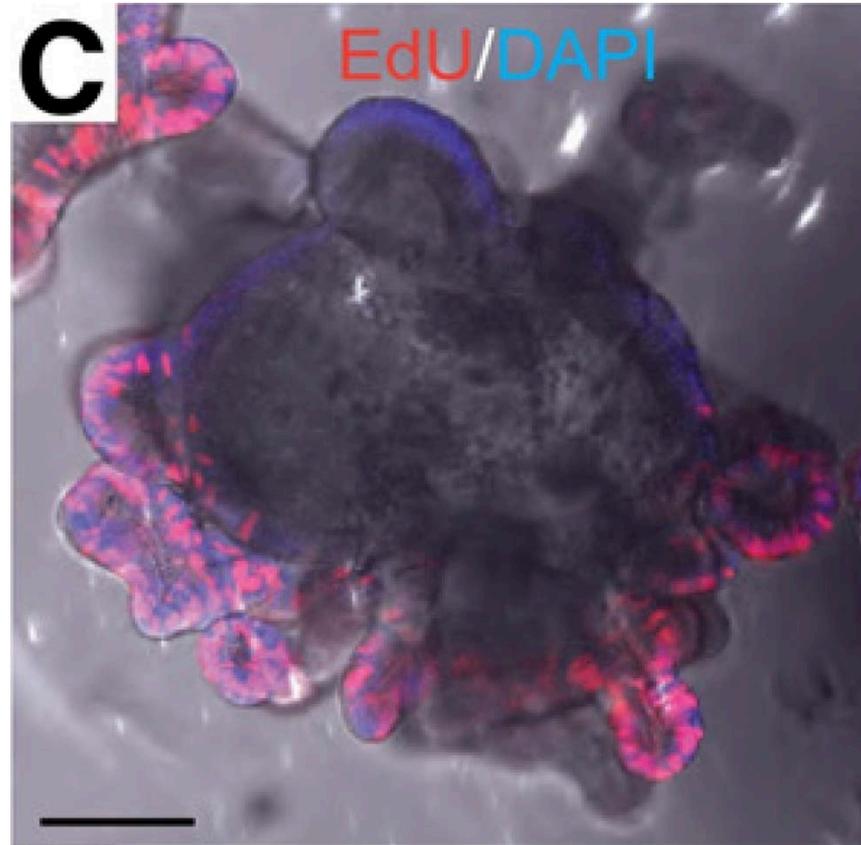
# Modeling the Diversity of Human Cancer: An Unmet Need

- Genetic analysis has identified recurrent genetic lesions in cancer that range in frequency from 1% - >50% of cases.
- Most cancer cell lines have not been directly compared to the primary tumor using current genomic methods.
- Existing cell line models of common cancer types are suspect biologically and genetically (e.g. prostate CA)
- Models of rare cancer subtypes may be nonexistent or underrepresented
- Models do not exist for many recurrent genetic lesions in human cancer, and for common combinations of lesions
- Existing models do not recapitulate hierarchical relationships of tumor subpopulations (i.e. tumor propagating cells, stroma)



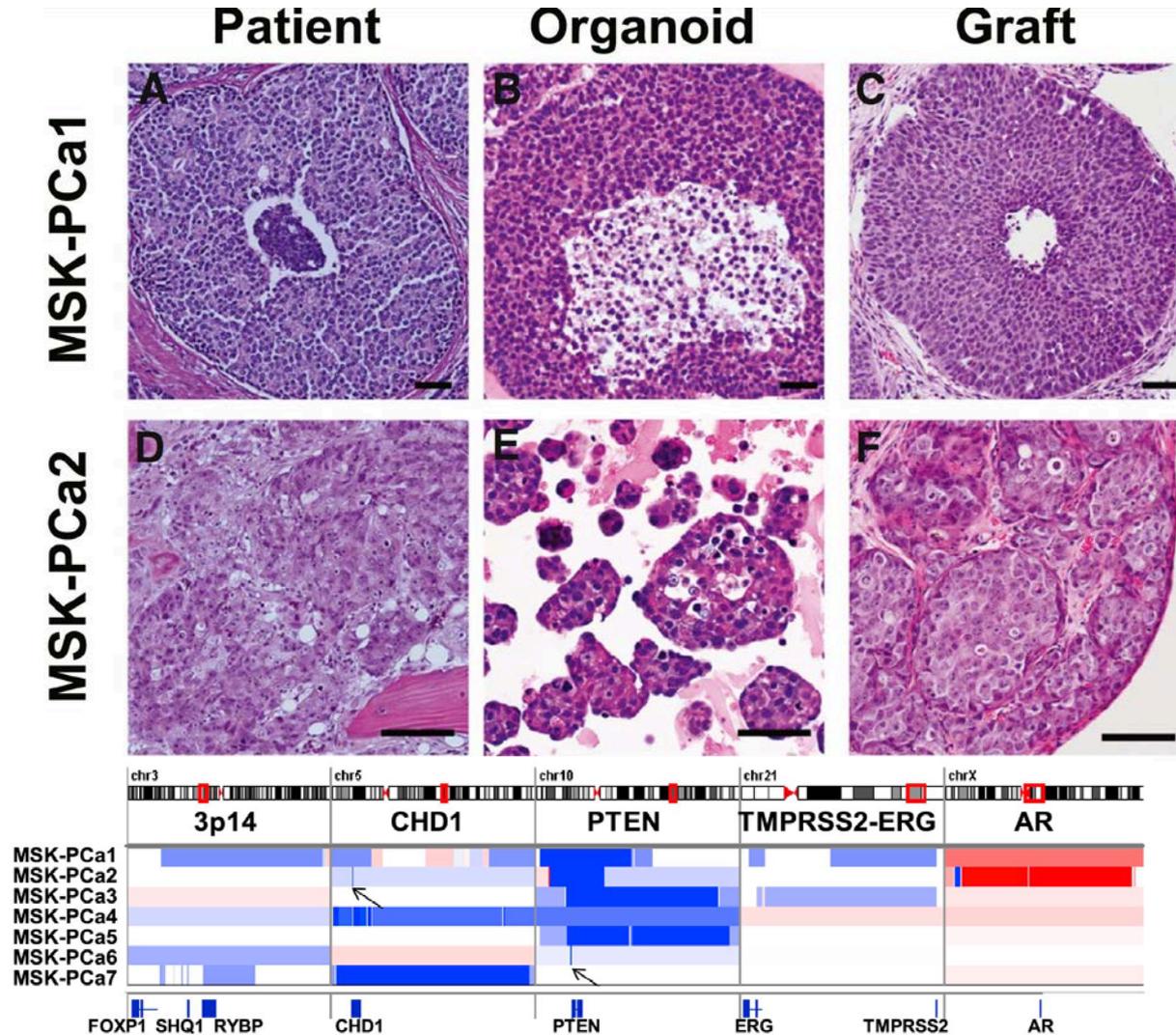
# Next Generation Models of Epithelial Cancers

## Organoid cultures



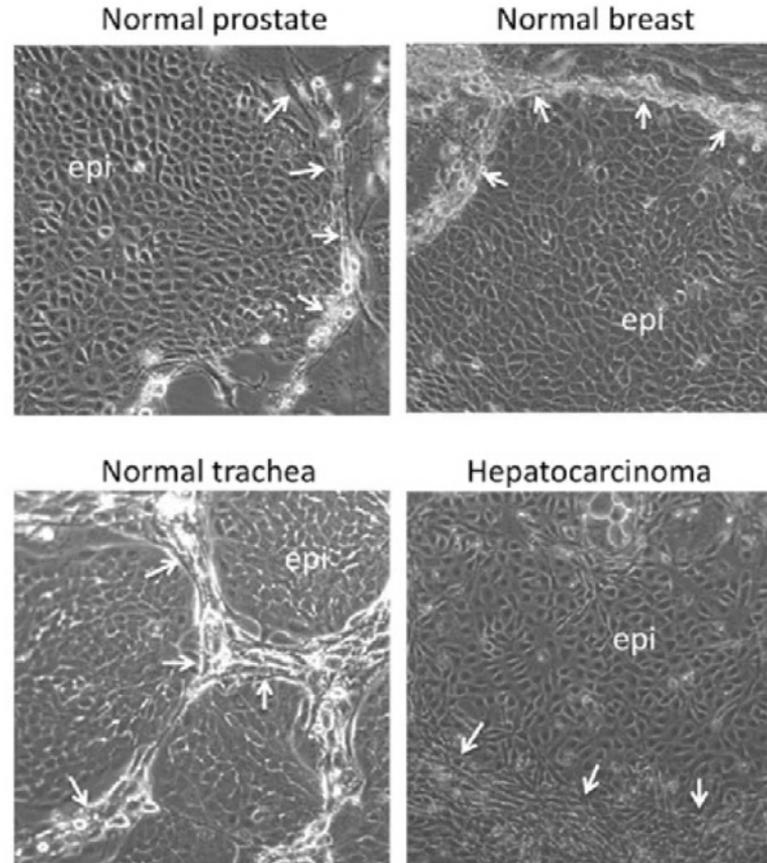
# Next Generation Models of Epithelial Cancers

## Organoid cultures

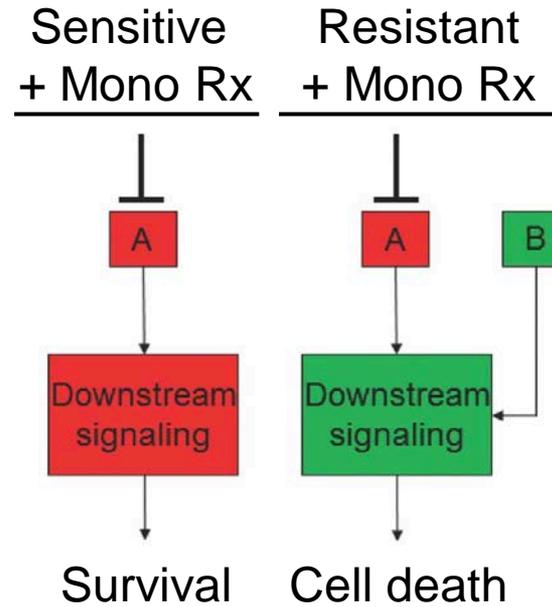
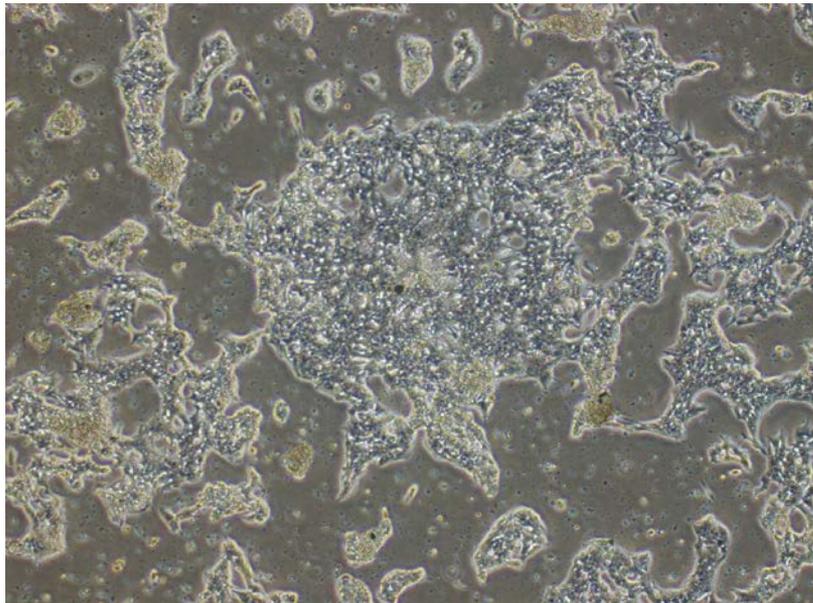
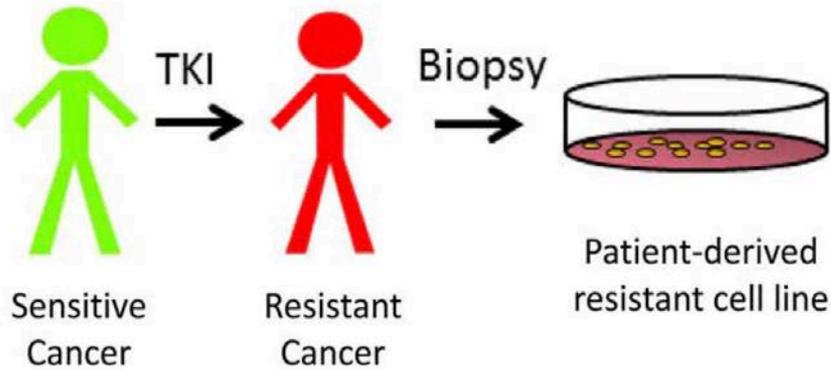


# Next Generation Models of Epithelial Cancers

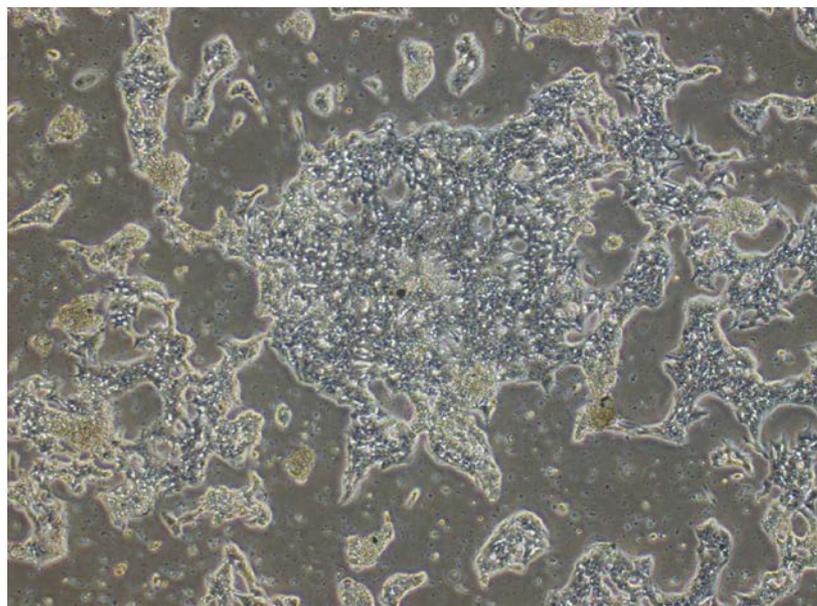
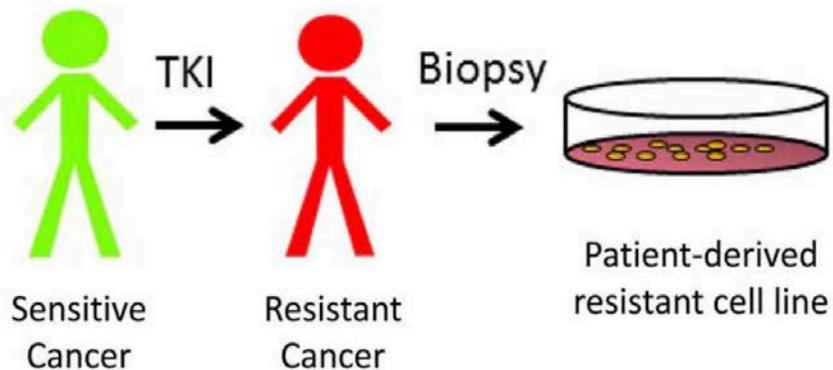
## Conditionally reprogrammed cells



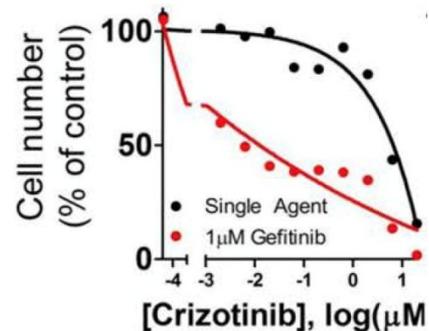
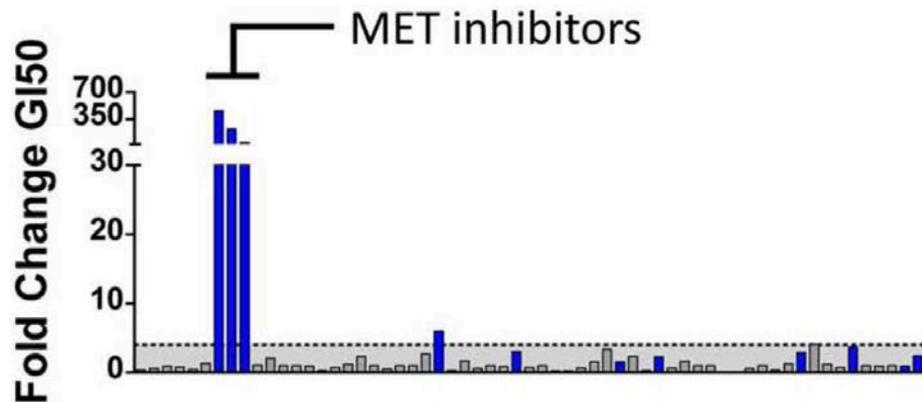
# Using Next Generation Cancer Models to Develop Therapies



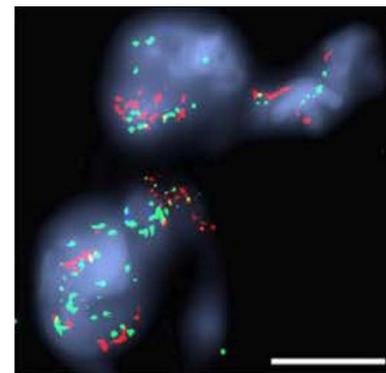
# Using Next Generation Cancer Models to Develop Therapies



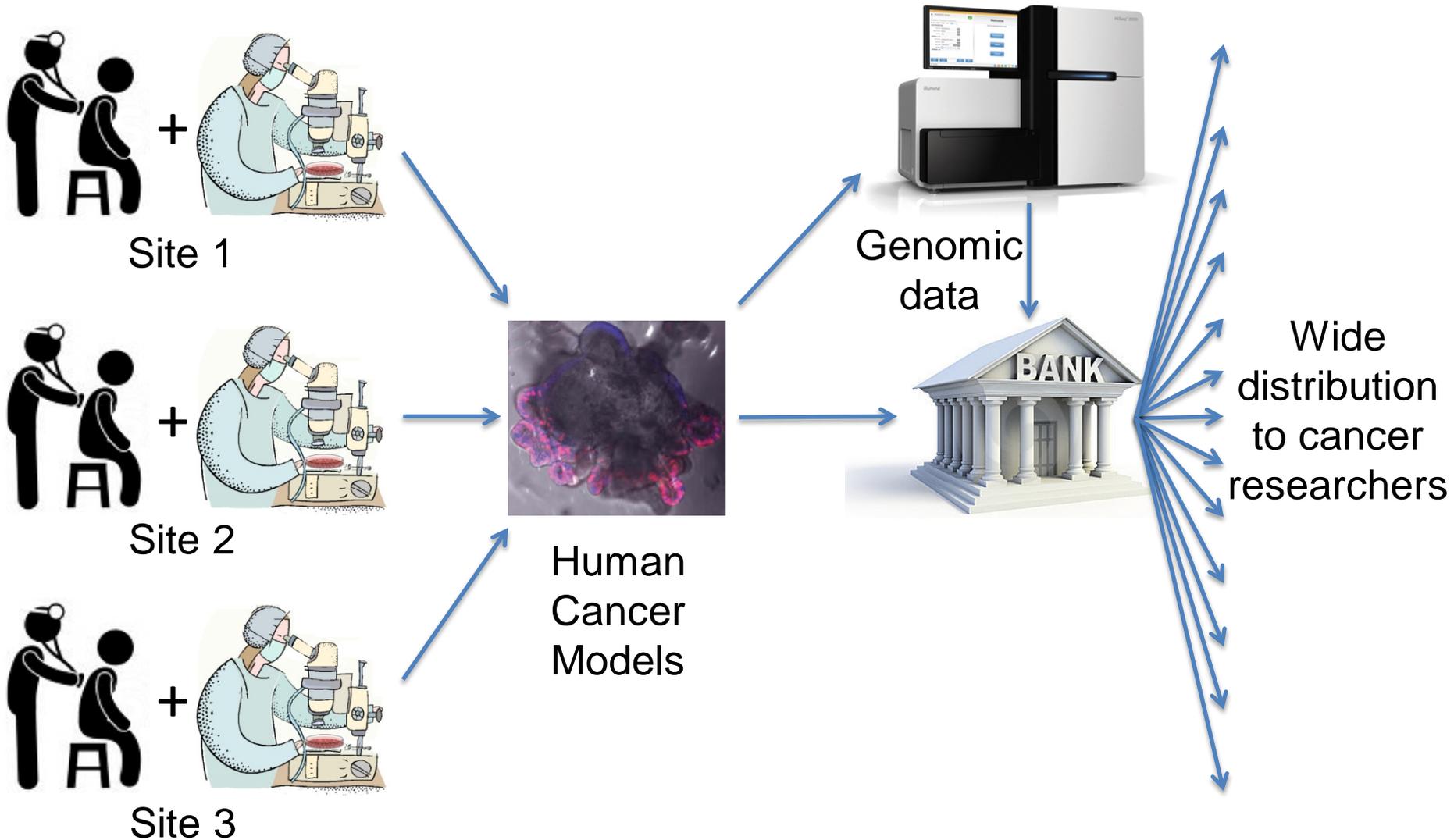
## Combo drug screen with Gefitinib



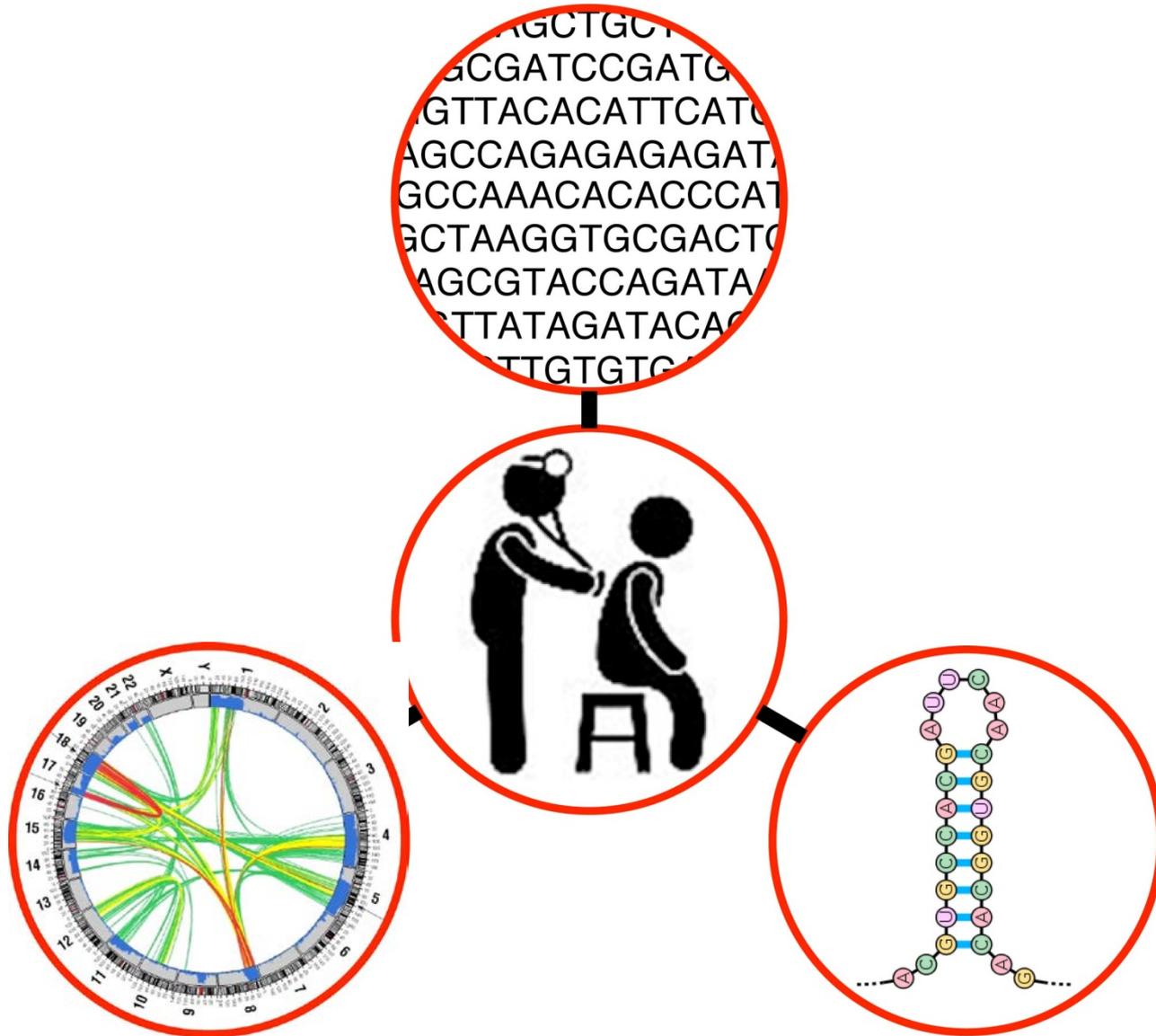
High level MET amp



# A Next Generation Cancer Model Network



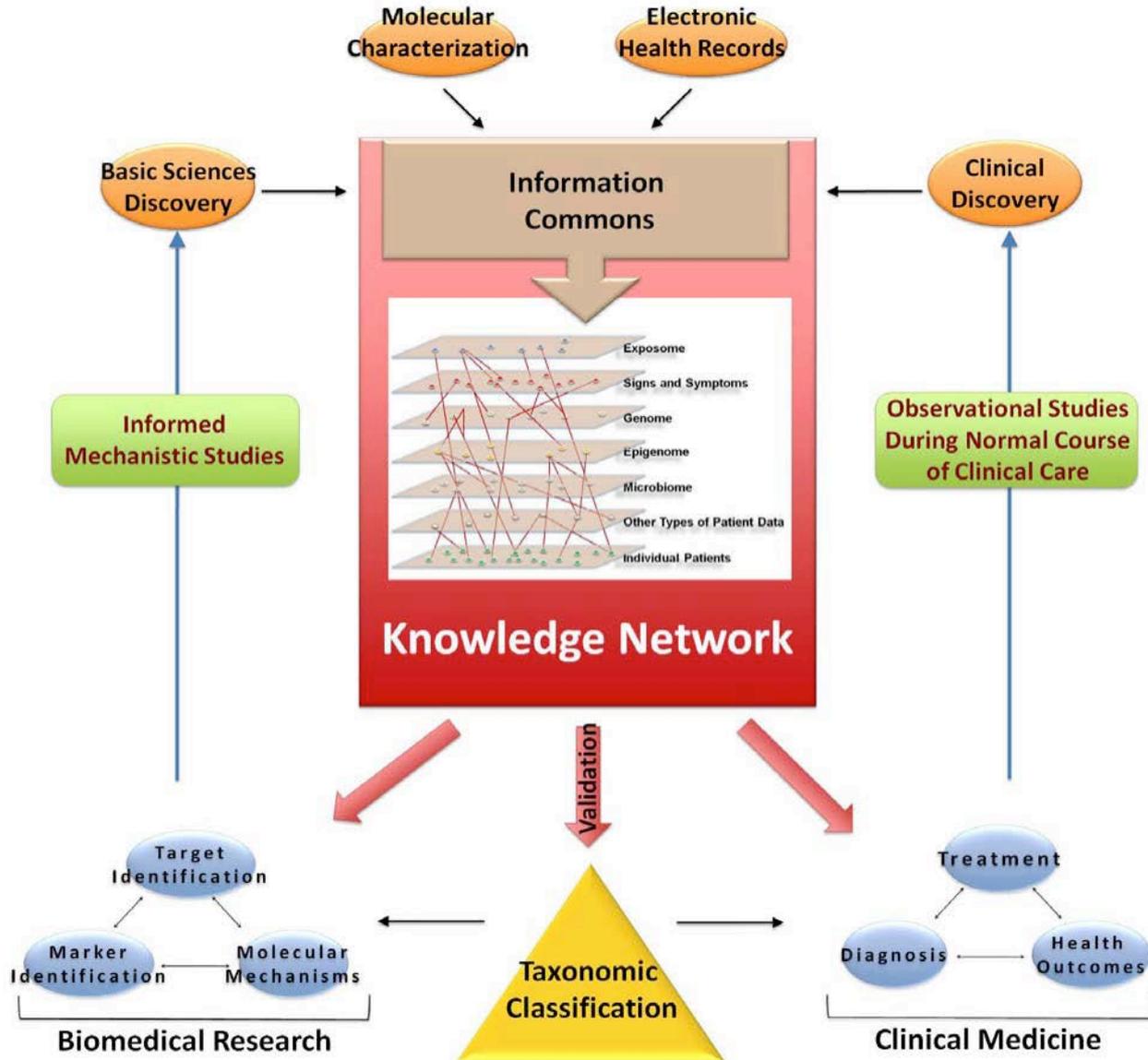
# Goals for Cancer Computational Genomics



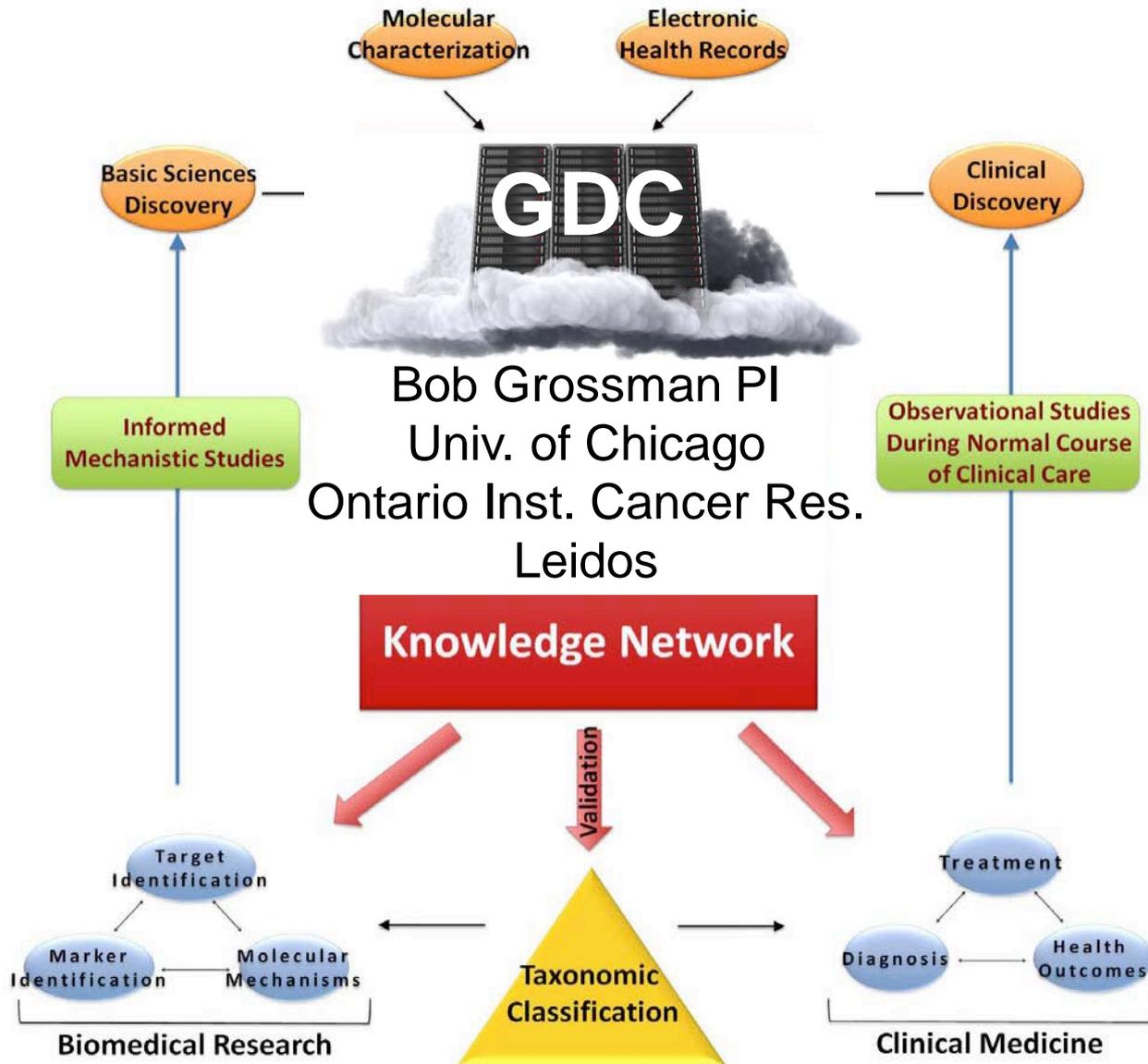
Computational Genomics

Functional Genomics

# IOM Report on Precision Medicine Envisioned a Knowledge Network of Disease



# Development of the NCI Genomics Data Commons (GDC) To Foster the Molecular Diagnosis and Treatment of Cancer



# NCI Genomics Data Commons (GDC) Functionality



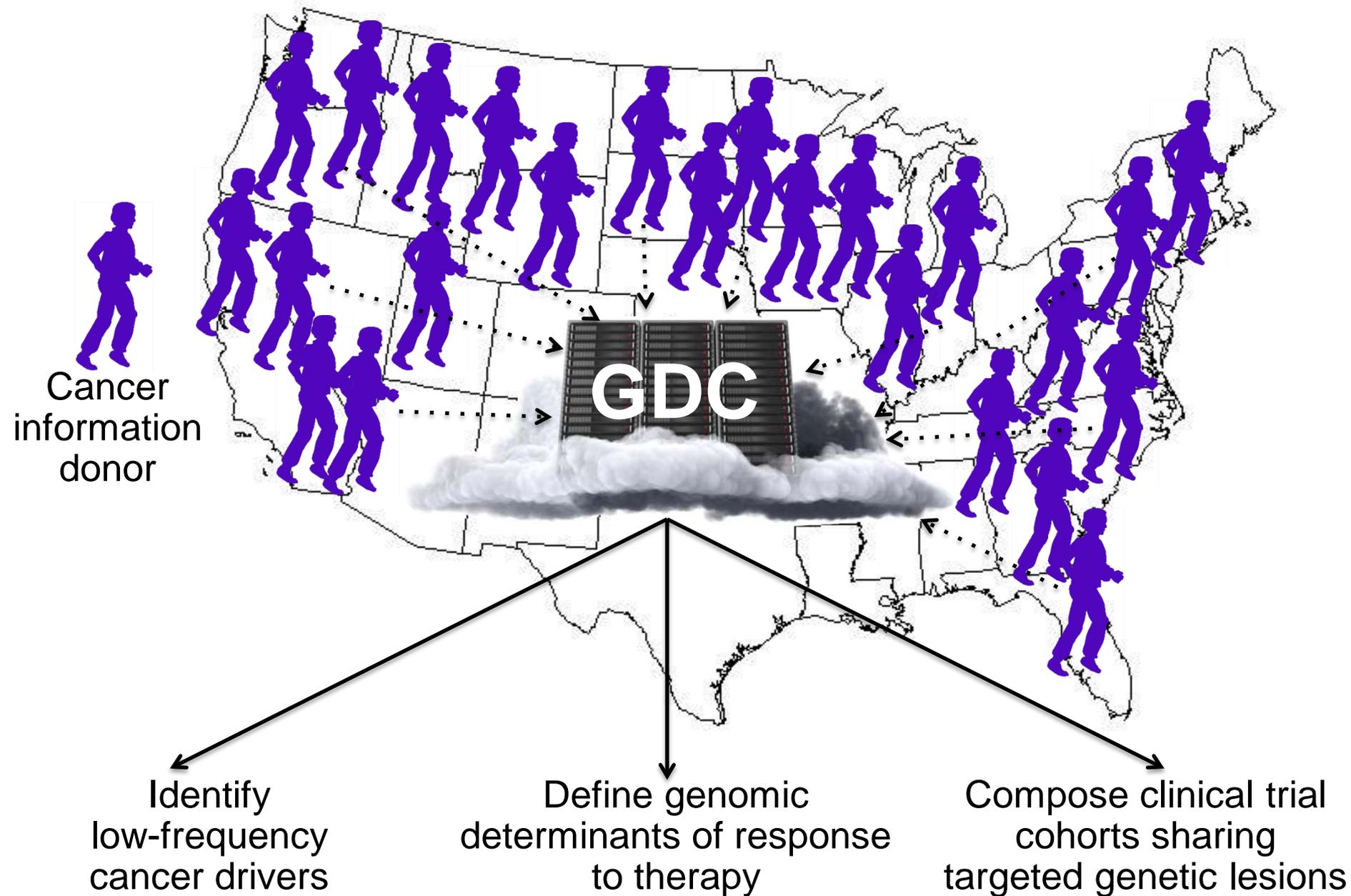
Genomic/  
clinical  
data

**GDC**

NCI Genomics  
Data Commons

1. Import and standardize genomic and clinical data from legacy programs
2. Harmonize mapping of sequence data to the genome / transcriptome
3. Implement state-of-art methods for derived data:
  - mutation calls
  - copy number
  - structural variants
  - digital gene expression
4. Maintain data security and manage authorized access
5. Provide data for download or computation on a co-localized compute cluster
6. Open GDC for upload of new genomic data for comparison with existing data and shared access

# Utility of a Cancer Knowledge System



Questions?