#11539: Deciphering the molecular landscape and the tumor microenvironment of Perivascular Epitheloid Cell Neoplasm (=PEComa)

Lea Holzer¹, Florian Kocher¹, Andrew Elliott², Dietmar Dammerer³, Vaia Florou⁴, Roman Groisberg⁵, Benjamin Henninger⁶, W. Michael Korn², Johannes Lanbach⁷, Margaret von Mehren⁸, Jaime Modiano⁹, Alexander Perathoner¹⁰, Andrew Rosenberg¹¹, Katja Schmitz¹², Anton Schwabegger¹³, Martin Thaler³, Jonathan C. Trent¹⁴, Kai Zimmer¹, Steven O'Day¹⁵, **Andreas Seeber¹**

¹Department of Hematology and Oncology, Comprehensive Cancer Center Innsbruck (CCCI), Medical University of Innsbruck, Innsbruck, Innsbruck, Austria; Oncology, Comprehensive Cancer Center Innsbruck (CCCI), Medical University of Innsbruck, I Huntsman Cancer Institute, University of Utah, Salt Lake City, UT, USA; Division of Medical University of Innsbruck, Innsbruck, Austria; Department of Radiotherapy, CCCI, Medical University of Innsbruck, Innsbruck, Austria; Department of Radiotherapy, CCCI, Medical University of Innsbruck, Innsbruck, Innsbruck, Austria; Department of Radiotherapy, CCCI, Medical University of Innsbruck, Innsbru Innsbruck, Innsbruck, Austria; Department of Hematology/Oncology, Fox Chase Cancer Center, Philadelphia, PA, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, Philadelphia, PA, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, Minneapolis, MN, USA; Masonic Cancer Center, University of Minnesota, MN, USA; Innsbruck, Innsbruck, Austria;11 Department of Pathology and Laboratory Medicine, University of Miami, Sylvester Comprehensive Cancer Center, Miami, FL, USA;12 INNPATH, Institute of Pathology, Innsbruck, Austria;13 Department of Plastic, Reconstructive and Aesthetic Surgery, CCCI, Medical University of Innsbruck, Innsbruck, Austria;14Department of Medicine, University of Miami Sylvester Comprehensive Cancer Center, FL, USA;15John Wayne Cancer Institute at Providence Saint John's Health Center, Santa Monica, CA, USA

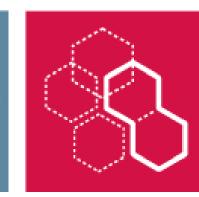
Background & Aim:

- PEComa is a rare mesenchymal neoplasm composed of perivascular epithelioid cells. Due to its rarity, diagnosis is challenging, and no standardized treatment guidelines have been established.
- A part of PEComas showed a benefit upon nabsirolimus treatment (Wagner AJ et al, ASCO 2019)
- A subgroup of PEComas are characterized by a loss of function mutation in TSC1/2.
- In the majority the molecular landscape and the composition of the tumor microenvironment (TME) remain largely unclear.
- We conducted this study to elucidate the genetic landscape of PEComas.

Patients & Methods:

- Thirty-five PEComa specimens were centrally analyzed at the Caris Life Sciences laboratory.
- NextGen DNA sequencing (NextSeq, 592 gene panel NovaSeq, whole-exome-sequencing), wholetranscriptome RNA sequencing (NovaSeq) and immunohistochemistry (Caris Life Sciences, Phoenix, AZ) were performed.
- Gene expression profiling (GEP) was performed by unsupervised hierarchical clustering.
- RNA deconvolution analysis was performed using the Microenvironment Cell Populations (MCP)-counter method to quantify immune cell populations.





Results:

Figure 1: Most common mutations detected were TP53 (47%), ATRX (32%), TSC1/2 (11%/29%) and MSH3 (17%). TP53 mutations occurred less frequently (25 vs 60%, p=0.055) in TSC1/2-mutated (TSC1/2-mt) compared to TSC1/2-wildtype (TSC1/2-wt) tumors.

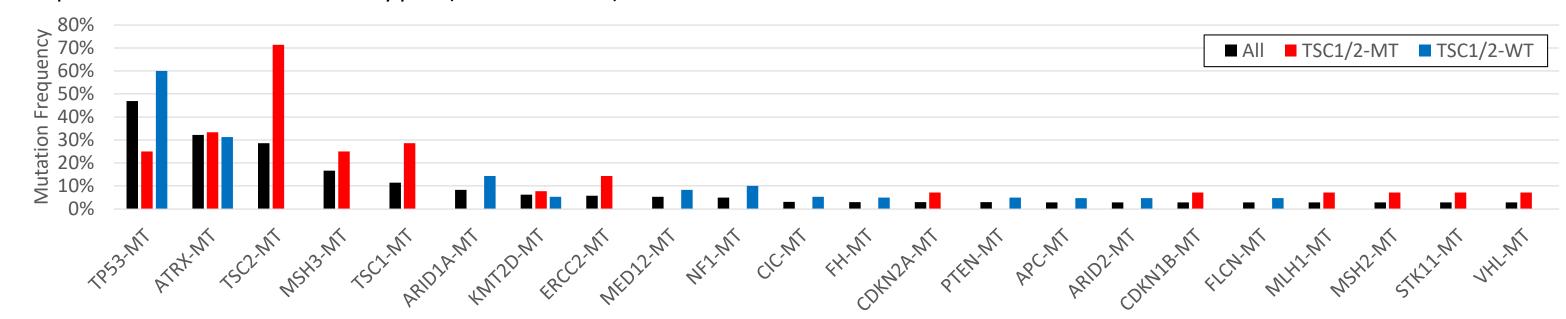
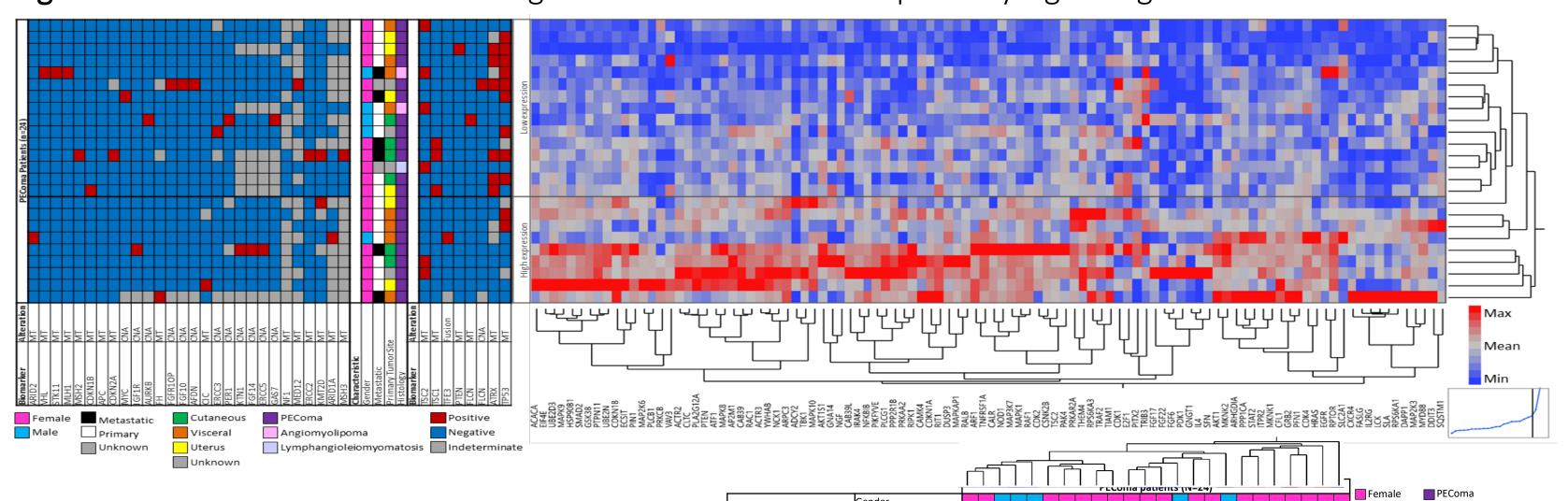


Figure 2: PEComas associated with high or low PI3K-AKT-mTOR pathway signalling.



tromal cell populations

mmune checkpoint

Markers of potential

Figure 3: TMEs were characterized by a significant increase of NK cells and fibroblasts, as well as a relevant decrease of CD8+ T cells and B cells. dMMR/MSI-H and TMB-H were rare (2.9%, n=1 each). PD-L1 expression was observed in 21.9% (n=7) of patients.

CONCLUSIONS:

- PEComas are characterized by a heterogeneous molecular landscape with a high prevalence of TSC1/2 mutations.
- Only a subset of TSC1/2-mt PEComas were associated with an up-regulation of the PI3K-Akt-mTOR pathway.
- This might explain why not all patients showed a benefit when using mTOR inhibitors.

Negative

Author contact: andreas.seeber@tirol-kliniken.at

