



Over the next 10 years this will be seen

- Genomic laboratory infrastructure and
- 100,000 Genomes Project informing
- WGS applied routinely and in other c
- Functional genomic pathway fully dep  
(for monitoring)
- Medicines and other therapeutic inter
- Closer alignment between clinical pra  
benefit and improved outcomes for pa
- New partnerships with industry
- Greater public understanding of the in



















# The Molecular Pathology of Colorectal Cancer Risk

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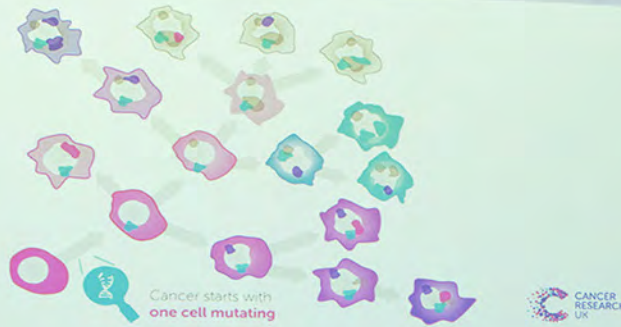
## Opportunities to advance genomic medicine/research in cancer the NHS

Genomics

- Develop structures for routine **consent** in NHS for clinical and research
- Develop structures for **collection** in NHS of high-quality **tissue samples**
- Routinely process each sample for **both molecular pathology** and histopathology
- **Store molecular data** (with clinical data) centrally in (quasi-) real-time



# Cancer is an evolutionary process



- But how do we discern the real targets of selection (“the blind watchmaker”) against the background of the highly mutated cancer genome?

Edinburgh-St Andrews Consortium for Molecular Pathology, Informatics and Genome Sciences  
International Molecular Pathology Symposium

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## The clinical utility of molecular pathology in the stratification of patients with non-muscle invasive (pT1) bladder urothelial carcinoma

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### Background

Bladder carcinoma (BC) remains the 10<sup>th</sup> most common cancer in the UK with just over 25,000 new cases diagnosed in 2013. Despite advancements in other cancers, BC is under-researched and 10-year survival remains at 50%.

Current histopathological diagnosis defines the grade and stage of tumours, however there is an need to predict which tumours will progress after initial treatment. The challenge in histopathology is to embrace new molecular techniques to improve diagnosis and thereby inform treatment and follow-up.

BC has been shown to be one of the most genomically heterogeneous tumours and there is an clear relationship between mutations and/or copy number variations and prognosis. While expression profiling data appears to show a prognostic difference between so-called ‘luminal’ and ‘basal’ tumours, the former having a better outcome. Furthermore, the role of the immune system and the tumour micro-environment in the process of tumour progression has been shown to be important in other cancers.

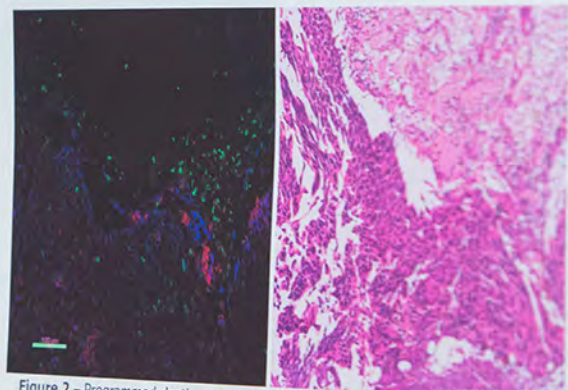


Figure 2 – Programmed-death receptor 1 (PD-1) and programmed-death receptor ligand 1 (PDL-1) – 4 micron sections from formalin-fixed, paraffin-embedded tissue  
Red – PDL-1, Green – PD-1, Blue – cytokeratin

PD-1 and PDL-1

Recent breakthroughs in immunotherapy





# What is the role of Viral and Genetic Factors in Human Papillomavirus (HPV) related Vulvar Neoplasia?

Etherson, M., Cuschieri, K., Wakeham, K., Bhatia, R., Howie, S.E., Haas, J.

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...ore-invasive stage (vulvar intraepithelial neoplasia/VIN) ...eople in one of the carcinogenic pathways. Worldwide, ... HPV in VIN is 80% and 40% in VSCC with HPV16 ... HPV types and variants differ in risk. The T350G ... European variants has been associated with increased ... disease. The prevalence of HPV types and variants ... currently unknown. Determining this is very important ... and prophylactic vaccination strategies. Genetic ... Our group has shown an association of a Single ... (SNP) within the CXCR1(Interleukin 8-receptor A) gene ... disease. IL-8 and CXCR1 are increased in different cancer ... key roles in tumorigenesis. This SNP was studied in vulvar disease. ... non-synonymous SNP is functional or not was also investigated. The ... was to identify viral and host genetic factors associated with vulvar ... outcome to allow patient stratification to improve clinical management.

... prevalence of HPV genotypes and HPV 16 variants in VIN and VSCC ... influence disease progression? ... associated with VIN and VSCC development and it's ... ?

... developed ... infection selected for HPV 16 variant analysis ... successful PCR amplification of 2 regions of HPV16 E6 ... alignment to identify variants

## Results

### HPV 16 Variant Analysis

- HPV positivity within Scottish Vulvar disease is similar to Worldwide data (Table 1).
- European lineages predominated and no excess of 350G polymorphism was observed in cases compared to controls (Table 2).

Table 1	VIN Cases	VSCC Cases
Total Number	166	66
% HPV Positive	78.3% (130)	34.8% (23)
% HPV 16 Mono-Infection	81.5% (106)	91.3% (21)
% Other or Mixed Infection	18.5%	8.7%

Table 1: HPV positivity in VIN and VSCC.

Table 2: HPV16 Variants observed and nucleotide substitution and position compared to reference genome.

Table 2	Nucleotide Position	Substitution	No. of VIN Cases	No. of VSCC Cases
Reference	T A G A C G T T		43	30
E350G		G	28	4
E133C		C	1	0
E131G	G		3	0
E131G.2	G		1	0
E119C		G	2	1
A1-176G		G	2	1
A1-2	C T G T		0	1







