

Incidence of *ERBB* gene fusions (*EGFR*, *ERBB2*, *ERBB4*) across tumor types

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Introduction

Gene fusions involving receptor tyrosine kinases are established oncogenes in multiple cancer types. Gene fusions can be successfully targeted with small molecule inhibitors. *ALK*, *ROS1*, *RET*, and *NTRK* fusions all have FDA approved targeted inhibitors. *HER* family fusions (*EGFR*, *ERBB2*, *ERBB4*) have been previously described, however, there has not been a comprehensive study of their frequency. *HER* family fusions are important potential candidates for targeted therapies. In this study, we sought to comprehensively analyze the frequency and molecular features of *EGFR*, *ERBB2* and *ERBB4* fusions. We assessed *HER* family fusion partners, genomic features, cancer types and co-occurring mutations.

Methods

Tumor samples (n = 64,354; representing > 40 tumor types) submitted to Caris Life Sciences (Phoenix, AZ) were molecularly profiled by next-generation sequencing of DNA (NextSeq, 592-gene panel; or NovaSeq, whole exome) and RNA (whole transcriptome). Gene fusion partners, in/out-of-frame status, retention of *ERBB* kinase domain, topology of fusion breakpoints, and co-alterations were characterized for each *ERBB* fusion transcript detected. Fusion prevalence was further examined in public data sets (TCGA, MSK-IMPACT and AACR GENIE).

Fusion	Caris Life Sciences (N = 64,354)	Public data sets			Overall Frequency
		TCGA (N = 10,967)	MSK IMPACT (N = 10,945)	AACR GENIE (N = 96,324)	
<i>EGFR</i>	0.1% (59)	0.3% (27)	0.8% (88)	0.6% (637)	0.6% (752)
<i>ERBB2</i>	0.2% (114)	0.5% (50)	<0.1% (10)	0.1% (113)	0.1% (173)
<i>ERBB4</i>	0.2% (108)	<0.1% (7)	<0.1% (4)	<0.1% (34)	<0.1% (45)

Figure 1 – Overall *ERBB* family fusion incidence in the Caris Life Sciences and public data sets.

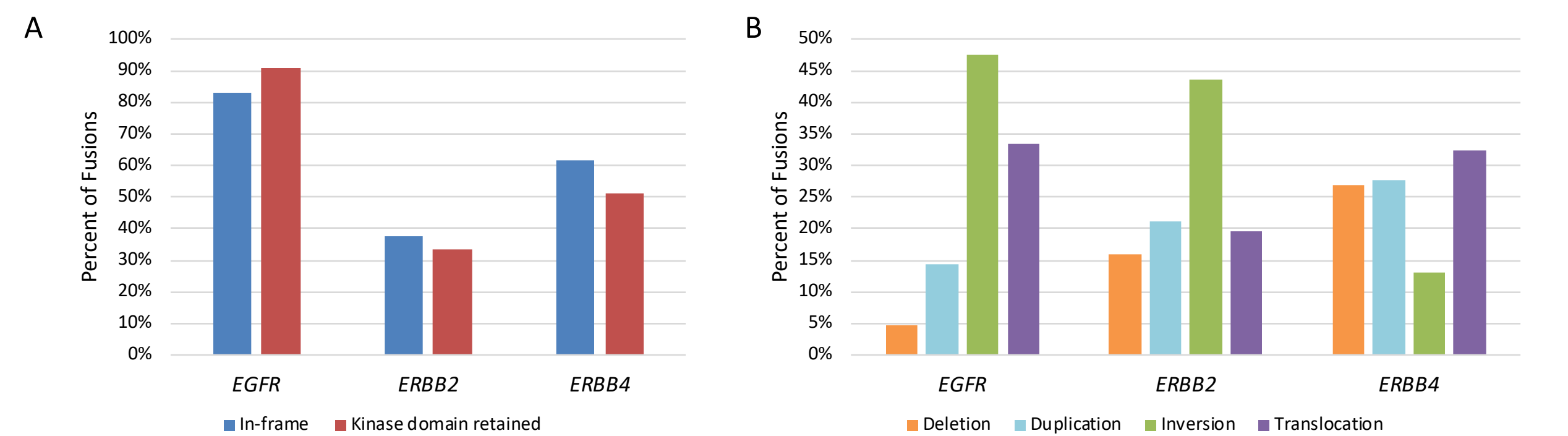


Figure 2 – Characteristics of fusions detected in the Caris Life Sciences cohort. (A) Proportion of *ERBB* fusions that were in-frame or retained the *ERBB* kinase domain. (B) Distribution of fusion topologies determined from analysis of fusion breakpoints.

<i>EGFR</i> Fusions					
Fusion Partner	Caris LS	Public data sets			Total
		TCGA	MSK IMPACT	AACR GENIE	
<i>EGFR-SEPT14</i>	20	13	2	12	27
<i>SEPT14-EGFR</i>				17	17
<i>EGFR-PSPH</i>	4				
<i>EGFR-VSTM2A</i>	3	1		2	3
<i>EGFR-LAMA2</i>				3	3
<i>VOPP1-EGFR</i>	1			3	3
<i>SEC61G-EGFR</i>	2	2		2	2
<i>EGFR-GBAS</i>				2	2
<i>EGFR-SEC61G</i>				2	2
<i>EGFR-TNS3</i>				2	2
<i>EGFR-VOPP1</i>				2	2
<i>VSTM2A-EGFR</i>	1			2	2
<i>ELDR-EGFR</i>				2	2
<i>ZNF113-EGFR</i>				2	2
<i>EGFR-GRB2</i>	2				
<i>LANCL2-EGFR</i>	2				

<i>ERBB2</i> Fusions					
Fusion Partner	Caris LS	Public data sets			Total
		TCGA	MSK IMPACT	AACR GENIE	
<i>ERBB2-PPP1R1B</i>	3	10		1	11
<i>ERBB2-IKZF3</i>	10	6		4	10
<i>ERBB2-CTTN</i>			8		8
<i>GRB7-ERBB2</i>	2		2	4	6
<i>ERBB2-GRB7</i>	2				
<i>C17orf37-ERBB2</i>			2	2	4
<i>GP2-ERBB2</i>	5				
<i>ERBB2-PSMB3</i>		3			3
<i>JUP-ERBB2</i>	3				
<i>ERBB2-GSDMA</i>	3				
<i>ERBB2-GSDMB</i>	2				
<i>ERBB2-TCAP</i>	1	1		1	2
<i>ERBB2-WIPF2</i>			1	1	2
<i>RARA-ERBB2</i>			1	1	2
<i>ERBB2-SHC1</i>	2				
<i>SHC1-ERBB2</i>			1	1	2
<i>ERBB2-CDK12</i>	10			2	2
<i>ERBB2-PGAP3</i>	10			2	2
<i>PGAP3-ERBB2</i>	8				
<i>ERBB2-STARD3</i>	5			2	2
<i>ERBB2-IGFBP4</i>	2				
<i>ERBB2-MED1</i>	2				
<i>ERBB2-MED24</i>	2				
<i>ERBB2-PLXDC1</i>	2				
<i>ERBB2-RAPGEFL1</i>	2				
<i>IKZF3-ERBB2</i>	1			2	2

<i>ERBB4</i> Fusions					
Fusion Partner	Caris LS	Public data sets			Total
		TCGA	MSK IMPACT	AACR GENIE	
<i>IKZF2-ERBB4</i>	20				
<i>ERBB4-IKZF2</i>	13				
<i>LANCL1-ERBB4</i>	3				
<i>KANSL1L-ERBB4</i>	3				
<i>ERBB4-TRIM33</i>				3	3
<i>ERBB4-PARD3B</i>				1	1
<i>ERBB4-PXMP2</i>				1	1
<i>AGAP1-ERBB4</i>	2				
<i>KLF7-ERBB4</i>	2				
<i>ERBB4-FN1</i>	2				

Figure 3 – Recurrent fusion isoforms detected in Caris Life Sciences (Caris LS) and public data sets.

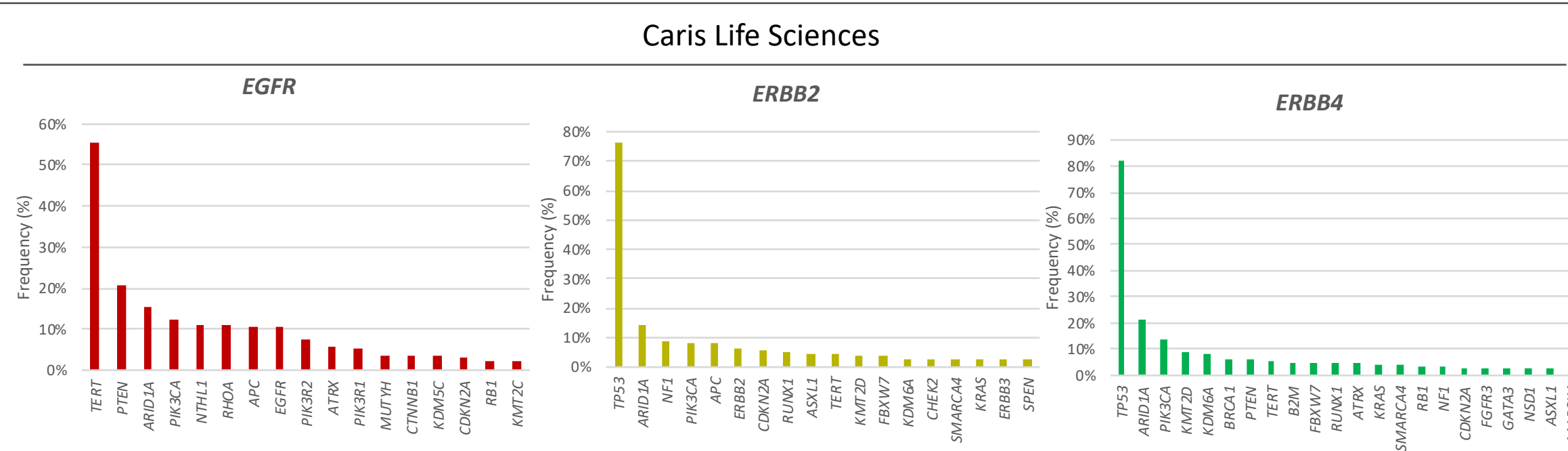


Figure 5 – Co-occurring alterations in selected cancer-related genes

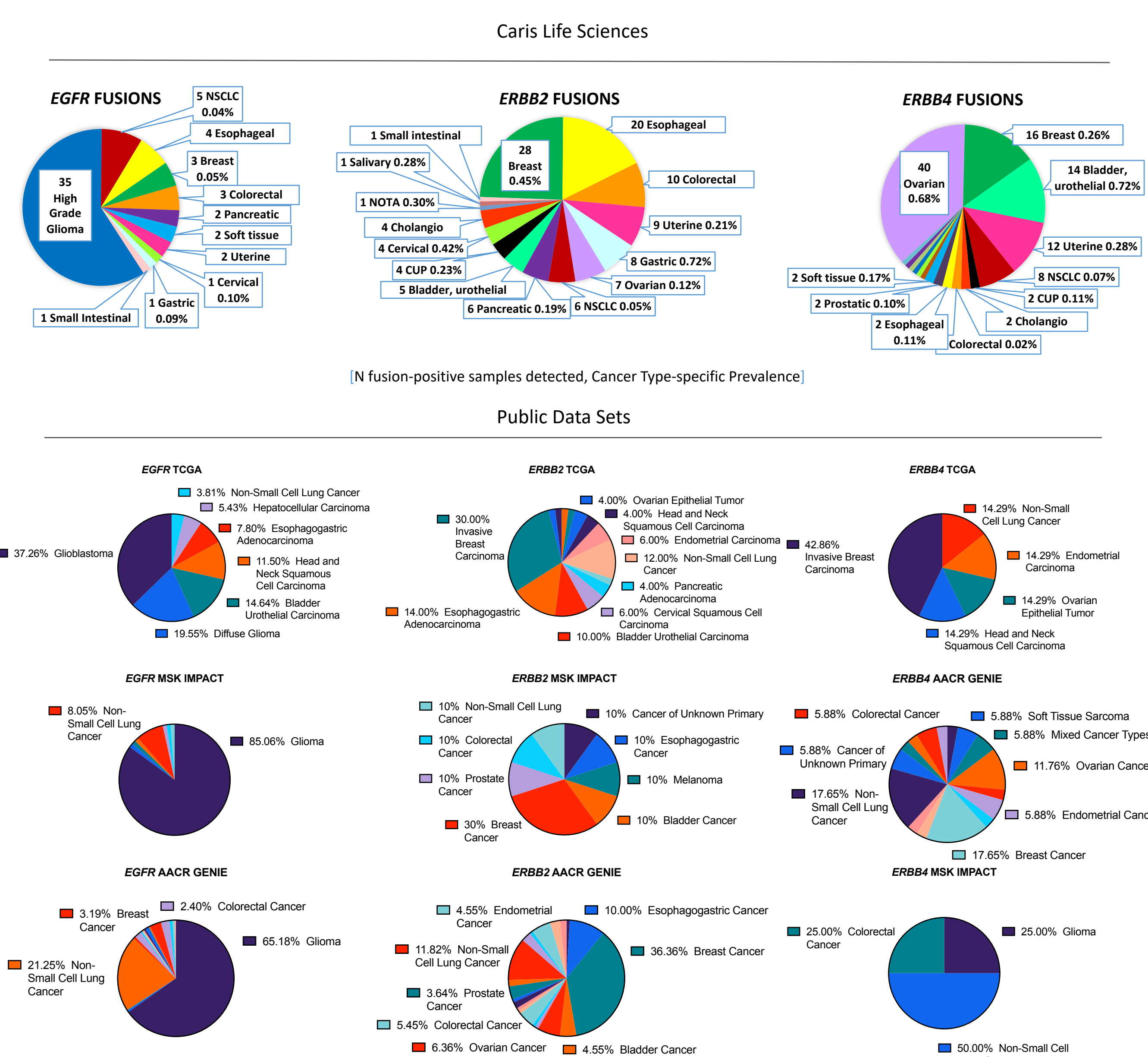
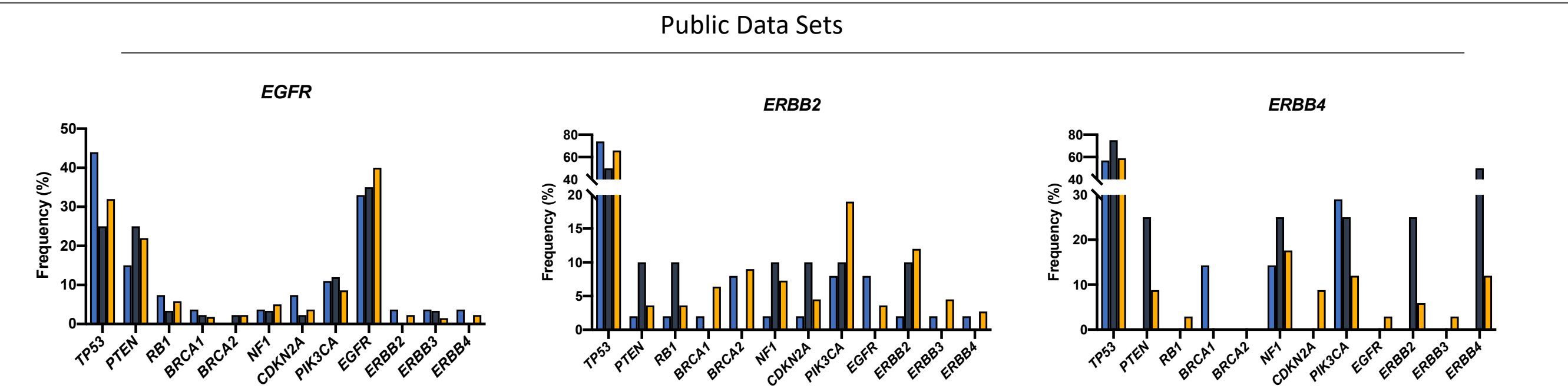


Figure 4 – *HER* family fusion frequency by cancer type



Legend: TCGA (blue), MSK IMPACT (dark blue), AACR GENIE (yellow)

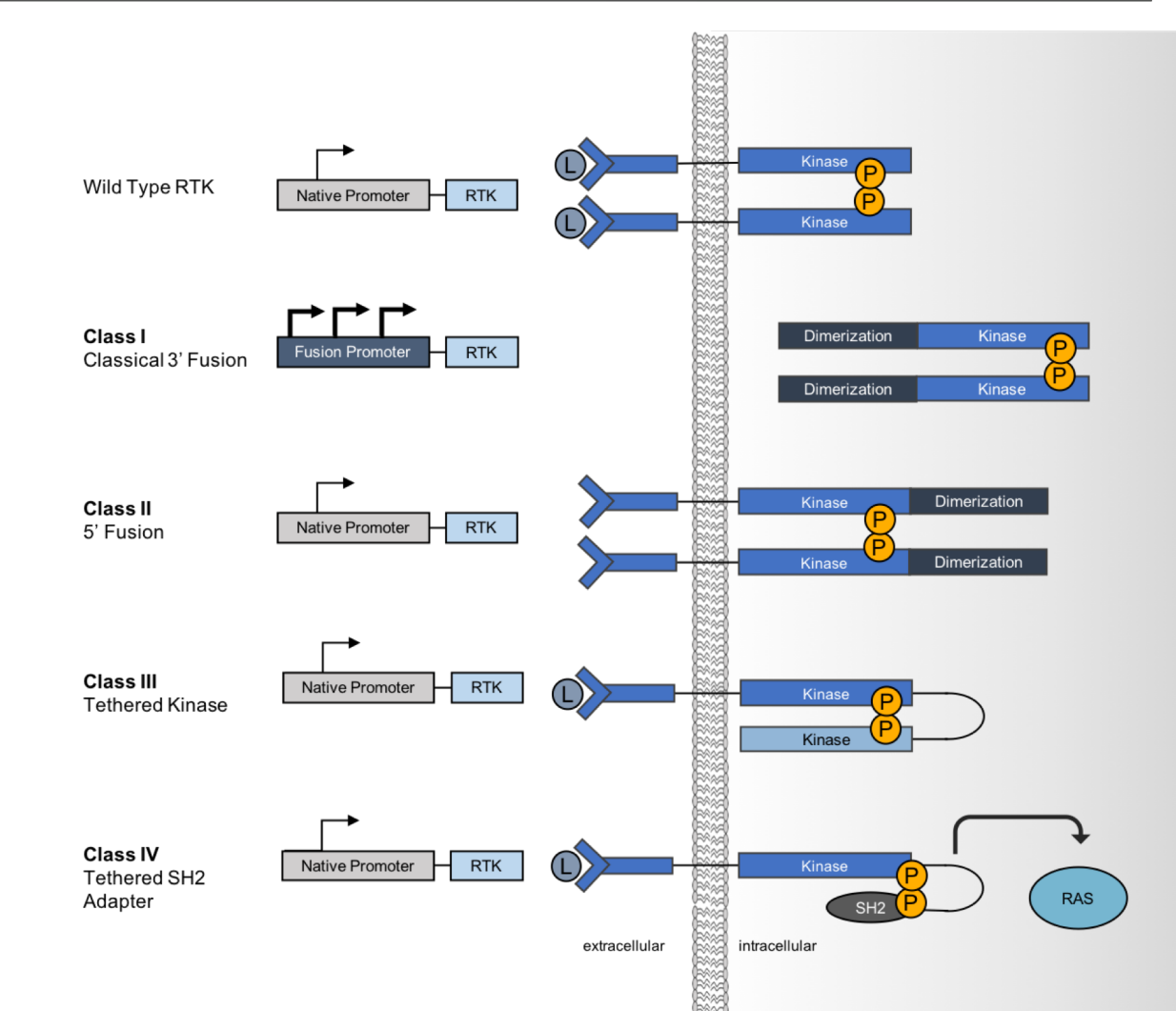


Figure 6 – Proposed mechanisms of activation of *HER* family fusions and proposed classification nomenclature.

Conclusions

- HER* fusions are rare, recurrent genomic alterations across multiple cancer types.
- We identified 811 *EGFR* fusions, 287 *ERBB2* fusions and 153 *ERBB4* fusions across 182,590 tumor samples.
- Collectively, *EGFR*, *ERBB2*, and *ERBB4* fusions represent up to 1% of cancer patients.
- We identified an increased frequency of *TP53* mutations co-occurring with *HER* family fusions in >70% of Caris Life Sciences data and >60% across public datasets.
- HER* family fusions are excellent candidates for targeted therapies.

References

- The results shown here are in part based upon data generated by the TCGA Research Network: <https://www.cancer.gov/tcga>.
- Cerami et al. The cBio Cancer Genomics Portal: An Open Platform for Exploring Multidimensional Cancer Genomics Data. *Cancer Discovery*. May 2012; 2: 401.
- Gao et al. Integrative analysis of complex cancer genomics and clinical profiles using the cBioPortal. *Sci. Signal*. 6, pl1 (2013).
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- Zehir et al. Mutational landscape of metastatic cancer revealed from prospective clinical sequencing of 10,000 patients. *Nat Med*. 2017 Jun;23(6):703-713. doi: 10.1038/nm.4333. Epub 2017 May 8. Erratum in: *Nat Med*. 2017 Aug;23(8):1004. PMID: 28481359; PMCID: PMC5461196.