



## The 65th ASH Annual Meeting Abstracts

## POSTER ABSTRACTS

## 603.LYMPHOID ONCOGENESIS: BASIC

**High-Hyperdiploid Acute Lymphoblastic Leukemia in Children with LZTR1 Germline Variants**

Triantafyllia Brozou, MD<sup>1</sup>, Arndt Borkhardt, MD<sup>2,3</sup>, Ute Fischer, PhD<sup>2</sup>, Danielle Brandes<sup>2</sup>, Loyal Yasin<sup>2</sup>, Oskar A. Haas, MD<sup>4</sup>, Stefanie Junk<sup>5</sup>, Martin Stanulla, MD<sup>6</sup>, Ammarah Anwar<sup>2</sup>, Stavrieta Soura<sup>2</sup>, Julia Hauer<sup>7</sup>, Franziska Auer, PhD<sup>8</sup>, Martin Dugas<sup>9</sup>, Carolin Walter<sup>10</sup>, Julian Varghese<sup>10</sup>, Tobias Reiff<sup>11</sup>, Lisa Zipper<sup>11</sup>, Anna Emilia Hoffmann<sup>2</sup>, Rabea Wagener<sup>2</sup>

<sup>1</sup>Department of Pediatric Oncology, Hematology and Clinical Immunology, Medical Faculty, Heinrich Heine University Duesseldorf, Duesseldorf, Germany

<sup>2</sup>Department of Pediatric Oncology, Hematology and Clinical Immunology, Heinrich Heine University, Medical Faculty, Duesseldorf, Germany

<sup>3</sup>German Cancer Consortium (DKTK), partner site Essen/Düsseldorf, Duesseldorf, Germany

<sup>4</sup>St. Anna Children's Hospital, Vienna, Austria

<sup>5</sup>Department of Pediatric Hematology and Oncology, Hannover Medical School, Hannover, Germany

<sup>6</sup>Department of Pediatric Hematology and Oncology, Hannover Medical School, Hannover, Germany

<sup>7</sup>Technical University of Munich, School of Medicine, Department of Pediatrics, Munich, Germany

<sup>8</sup>Technical University of Munich, Germany; School of Medicine; Department of Pediatrics, Munich, Germany

<sup>9</sup>Institute of Medical Informatics, Heidelberg University Hospital, Heidelberg, Germany

<sup>10</sup>Institute of Medical Informatics, University of Münster, Münster, Germany

<sup>11</sup>Institute of Genetics, Department of Biology, The Faculty of Mathematics and Natural Sciences, Heinrich Heine University Düsseldorf, Düsseldorf, Düsseldorf, Germany

**Introduction**

Firstly described in 1967, hyperdiploidy (HD) is the most frequent genetic abnormality in B-cell- precursor acute lymphoblastic leukemia (BCP-ALL) in children, comprising about 25% of all cases. A not yet exactly defined proportion have predisposing pathogenic germline variants in DNA repair pathway genes, chromatin remodeling factors, transcription factors regulating B-cell development (particularly *ETV6*) or receptor tyrosine kinases pathway genes like *RAS/RAF*. Among the latter, mutations have mostly been described in *PTPN11* and *SOS1*, but not yet in other components of this central regulatory hub of cellular communication. Germline loss-of-function (LOF) *LZTR1* mutations are typically linked to hereditary nerve sheath tumors. However, it remains largely unknown, if other tumor entities are associated with *LZTR1* LOF germline mutations, potentially broadening the spectrum of malignancies associated with RASopathies.

**Aim**

Our aim is to understand the frequency and the impact of *LZTR1* germline variants in HD BCP-ALL of childhood.

**Material and Methods**

We analyzed WES data of 283 children with BCP-ALL for the presence of pathogenic variants in the *LZTR1* cancer predisposition gene. For a part of the detected variants, we performed further functional analyses to investigate the effect of the alteration on protein function. We applied a *Drosophila* model that is particularly suited for functional evaluation of Ras pathway activity.

**Results**

We identified *LZTR1* germline variants in 10/283 (3.5%) patients (Figure 1). Interestingly, in 6 out of 283 (2.1%) children the *LZTR1* variants were classified as pathogenic/likely pathogenic (P/LP). The majority of patients (5/6) harboring a P/LP germline *LZTR1* variant presented with a HD BCP-ALL. Only two of our patients showed concomitant phenotypic features indicative of an underlying syndromic condition. Patient P1 presented with a HD BCP-ALL at the age of 9 years and mild psychomotor delay. Sequencing revealed a likely pathogenic variant (p.Arg283Trp) that was not yet reported in association with RASopathy syndromes. The second child P8, also diagnosed with a HD BCP-ALL, carried a well-known autosomal dominant mutation described in Noonan syndrome (NS) variant (p.Gly248Arg). The child was characterized by facial dysmorphism, as well as mild developmental delay, although a diagnosis of NS was not established prior to development of the BCP-ALL. The other three patients had no clinical peculiarities other than HD BCP-ALL.

We functionally characterized patient derived *LZTR1* variants in dLztr1-depleted ISC. Like wild-type hLZTR1<sup>wt</sup>, hLZTR1<sup>p.Arg283Trp</sup> and hLZTR1<sup>p.Lys761Arg</sup> restored control-like ISC lineage production, suggesting that hLZTR1<sup>p.Arg283Trp</sup> and hLZTR1<sup>p.Lys761Arg</sup> still regulate Ras ubiquitination. In contrast, hLZTR1<sup>p.Tyr535Ter</sup> results in even 1.8-fold higher ISC lineage production than dLztr1-RNAi. Beyond ISC production as a readout, we employed a second experimental paradigm directly addressing Ras signalling activity with a translocating modified ERK sensor. In line with Ras activity control of LZTR1, hLZTR1<sup>wt</sup> significantly reduced ERK activity, while the putatively LOF variant hLZTR1<sup>p.Tyr535Ter</sup> variant significantly increased Ras pathway activation by 1.4-fold over controls. We also noticed that hLZTR1<sup>p.Tyr535Ter</sup> induced extensive membrane blebbing and nuclear fragmentation of GFP positive cells likely indicating programmed cell death. Quantification of apoptotic cells revealed an 11.1-fold increase compared to controls, which was not observed for hLZTR1<sup>p.Arg283Trp</sup> and hLZTR1<sup>p.Lys761Arg</sup>. Most notably, forced expression of hLZTR1<sup>p.Arg283Trp</sup> and hLZTR1<sup>p.Tyr535Ter</sup> increased mitotic recombination by 4-fold and 3.4-fold, respectively, which was not observed for the hLZTR1<sup>p.Lys761Arg</sup> variant.

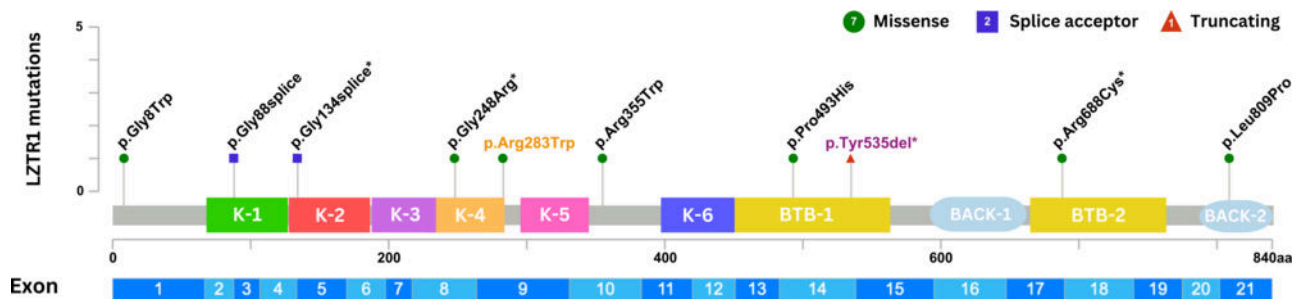
**Conclusion**

In our cohort, approximately 2% of all children with BCP-ALL harboured a P/LP *LZTR1* germline variation, not necessarily linked with clinical appearance of Noonan-syndrome-like features, but to the development of a high hyperdiploid karyotype. By applying a *Drosophila* model, we demonstrated that patient-derived *LZTR1* germline variants affect RAS pathway activation, ERK accumulation, cell proliferation, DNA recombination and apoptosis.

Figure 1:

Depiction of the ten *LZTR1* variants detected in an unselected pediatric cohort of 283 BCP-ALL patients

**Disclosures** No relevant conflicts of interest to declare.



**Figure 1**

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