



The 65th ASH Annual Meeting Abstracts

POSTER ABSTRACTS

621.LYMPHOMAS: TRANSLATIONAL-MOLECULAR AND GENETIC

Integrative Genomic and Transcriptomic Analysis Reveals Targetable Vulnerabilities in Angioimmunoblastic T-Cell Lymphoma

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Follicular helper T-cell lymphoma of the angioimmunoblastic type (AITL) is associated with dismal prognosis. We performed functional genomic approaches including whole-exome sequencing (WES; n=119), transcriptomic (n=78) and methylation (n=40) analysis. We identified recurrent mutations in known epigenetic drivers (*TET2*, *DNMT3A*, *IDH2*^{R172}), and also identified novel ones (*TET3*, *KMT2D*). Somatic mutation of all three epigenetic drivers (*TET2*, *IDH2*, and *DNMT3A*) was associated

with poor prognosis ($p < .001$). Mutations in genes regulating T-cell receptor (TCR) signaling (*CD28*, *VAV1*, *FYN*, *PLCG1*) or activation (*RHOA* ^{G17V}), and regulators of the PI3K pathway (PIK(3)C members, *PTEN*, *PHLPP-1/-2*) were also found. Genome-wide DNA-methylation analysis integrated with mRNA expression profiling also revealed epigenetic alterations in genes regulating TCR-RHOA/B/C or PI3K-signaling. TET2 loss was noted in 85% AITLs and was significantly associated with *RHOA* ^{G17V}, *CD28* and *IDH2* ^{R172} mutations. AITLs lacking *RHOA* ^{G17V} tended to have mutations regulating the JAK-STAT pathway (*JAK2*, *JAK3*, *STAT1*, *STAT3*, *SOCS1*). RNA-seq analysis identified fusion transcripts in genes regulating TCR activation (8%), revealed a restricted TCR repertoire in the majority of cases (a=87%, b=72%), and showed the presence of Epstein-Barr virus transcriptome (73%). GEP demonstrated association of B-cells in the tumor-milieu with better prognosis ($p = .006$), while dendritic cells were associated with worse prognosis ($p = .001$), which was further validated by immunohistochemistry using CD20, CD68, and CD163 antibodies. RNA-seq and corresponding WES analysis of 12 AITL patient-derived-xenografts (PDX) showed that bi-allelic *TET2* mutations, *DNMT3A* mutations or sub-clonal mutations (*PLCG1*, *PHLPP2*) were propagated in sequential passages. Gene signatures related to T_{FH} (follicular helper) and T_{CM} (central memory) were also well-maintained in secondary passages in PDX models. Gene signatures of late PDX passages (3rd-5th) were enriched with genes related to proliferation and metabolic reprogramming, and in an independent cohort of AITLs, high expression of T3/T5 related signatures was associated with worse outcome ($p = 0.02/p = 0.009$). Low mRNA expression of PHLPP2 predicted poor prognosis ($p = .03$) and engineered PHLPP2 loss showed enhanced PI(3)K activation and FOXO1 inactivation in CD4+ T-cells *in-vitro*. Thus, we defined the genomic landscape for AITL, which is largely characterized by epigenetic alterations, TCR signaling and PI3K/AKT dysregulation, which may be amenable for therapeutic targeting.

Disclosures Holte: Nordic Nanovector: Other: Safety Committee; **Pierre Fabre:** Other: Advisory Board; **Genmab:** Other: DMC Committee; **Incyte:** Other: Advisory Board, Review Committee. **de Leval:** Lunaphore: Consultancy; **Novartis:** Consultancy; **Bio Ascend:** Consultancy; **Bayer:** Consultancy; **Abb Vie:** Consultancy. **Pileri:** CELGENE: Other: Advisory board; **ROCHE:** Speakers Bureau; **NANOSTRING:** Other: Advisory Board; **Stemline:** Speakers Bureau; **Diatech Pharmacogenetics:** Consultancy; **Beigene:** Research Funding, Speakers Bureau; **Eli Lilly:** Speakers Bureau. **Vose:** Eli Lilly and Company; **Epizyme, Kite, Loxo, Novartis:** Research Funding; **AbbVie, MEI Pharma:** Consultancy. **Dave:** Data Driven Bioscience: Current equity holder in private company.

<https://doi.org/10.1182/blood-2023-186530>