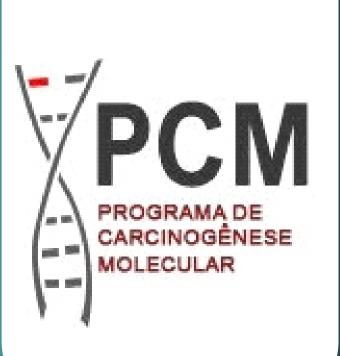


FUNCTIONAL ROLE OF APOBECS IN UPPER AERODIGESTIVE TRACT TUMORS

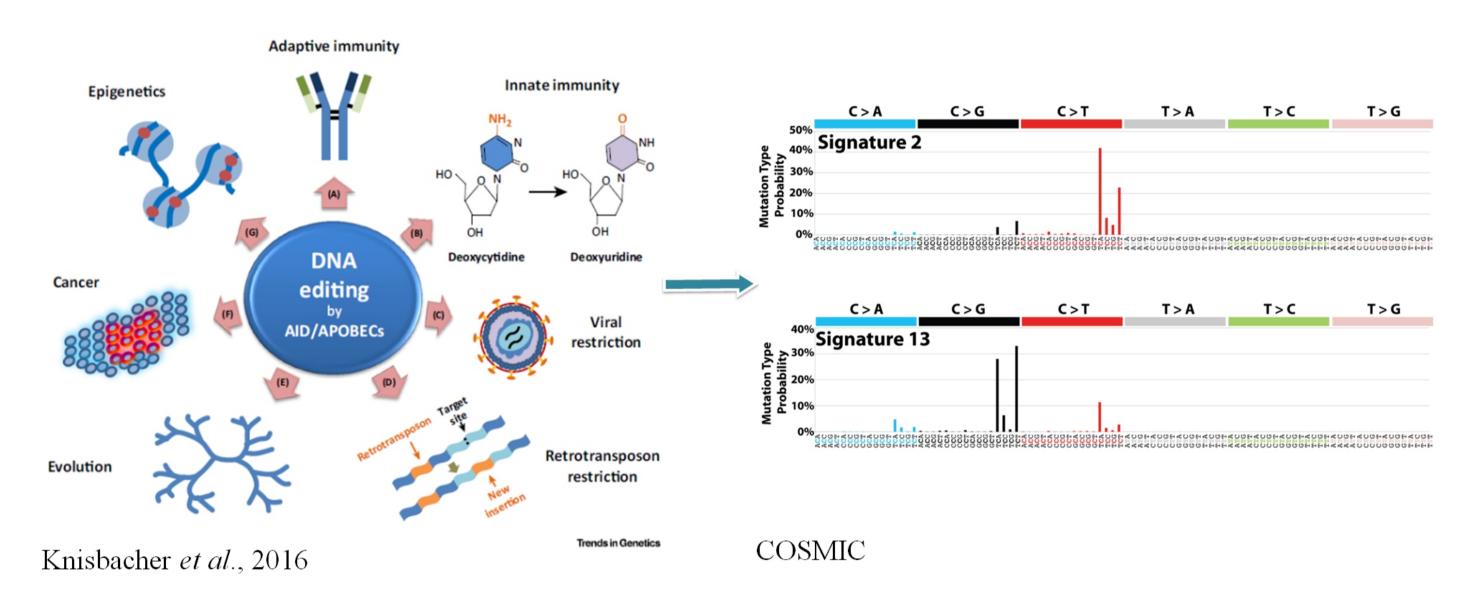


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INTRODUCTION

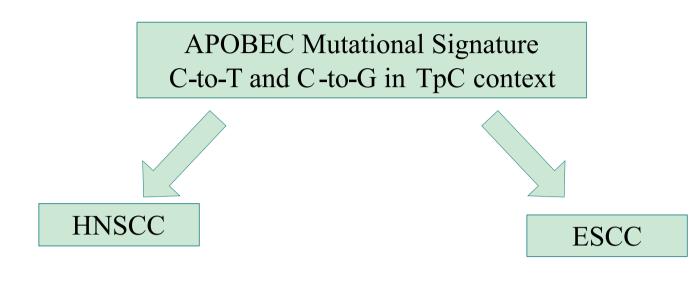
- The AID/APOBEC protein family is involved in DNA editing, with APOBEC3s being an enzymatic source of endogenous mutations in tumors¹.
- The APOBEC signatures are present in tumor genomes as C-to-T and as C-to-G transitions in TpC context²⁻⁵;
- In esophageal squamous cell carcinoma (ESCC), the presence of APOBEC-associated mutational signature in 50% of samples suggests that the deamination catalyzed by these enzymes may play a pivotal role in its development⁶;
- Head and Neck squamous cell carcinoma (HNSCC) also shows high APOBEC3B mRNA levels and displays the putative APOBEC mutational signature';
- Both tumors are frequent among men in Brazil^{8,9} and share similarities in morphology and etiologic factors^{10,11}.



OBJECTIVE

To evaluate the contribution of APOBECs to the mutational burst in HNSCC and ESCC.

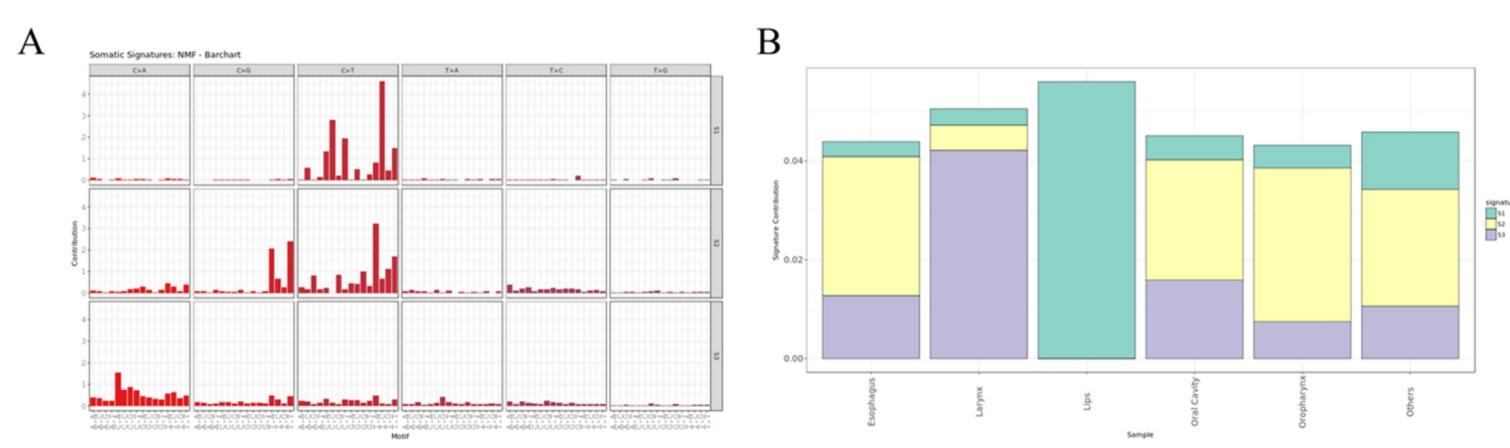
HYPOTHESIS



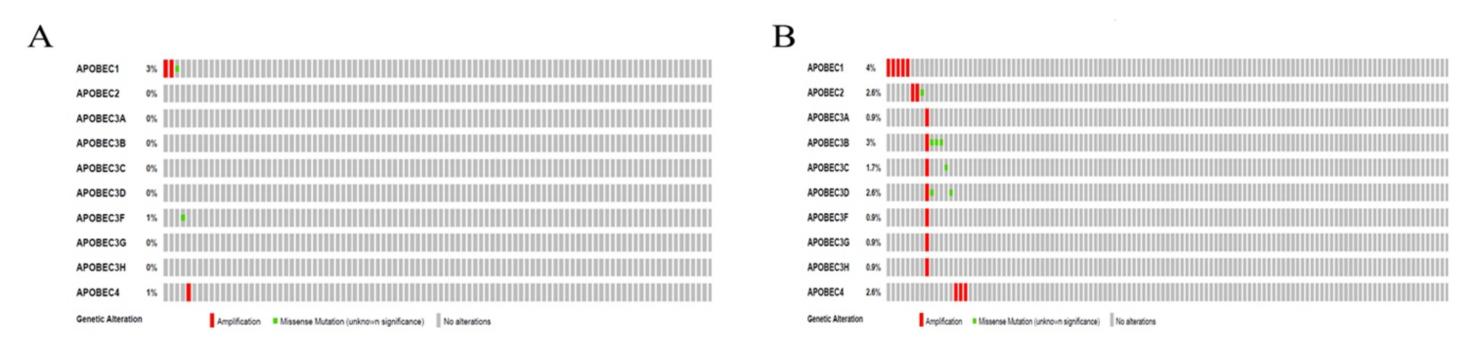
METHODOLOGY

- Data regarding exome sequencing were obtained from TCGA database;
- Mutational and gene expression profile of APOBECs in laryngeal squamous cell carcinoma (LSCC) and ESCC and matched surrounding non-tumor tissue of LSCC and ESCC patients from Instituto Nacional de Câncer, INCA/RJ, were evaluated by RNA-seq;
- Using RT-qPCR, we validated the RNAseq data on APOBECs expression in ESCC;
- Bioinformatics analyses were performed using R software;
- All differences were considered statistically significant when p<0.05.

RESULTS



Mutational signatures differ in ESCC and HNSCC subsites. (A) Mutational signatures found in Esophageal Squamous Cell Carcinoma (ESCC) and in Head and Neck Squamous Cell Carcinoma (HNSCC) according to TCGA data. Signature s1 is associated with UV exposure (C-to-T), s2 represents the signature associated with APOBEC activity (C-to-T and C-to-G in TpC context) and s3 represents the tobacco-associated signature (C-to-A). (B) The contribution of different mutational signatures in ESCC and HNSCC subsites in TCGA data.

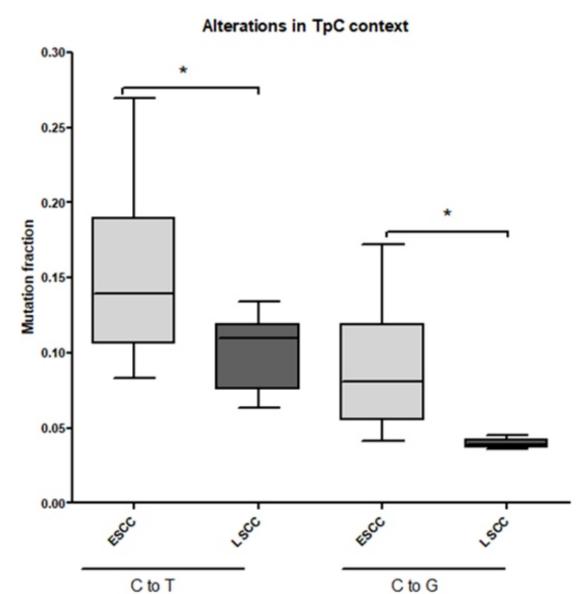


Main APOBEC Genetic Alterations found in ESCC patients (A) and in LSCC patients (B) from TCGA database.

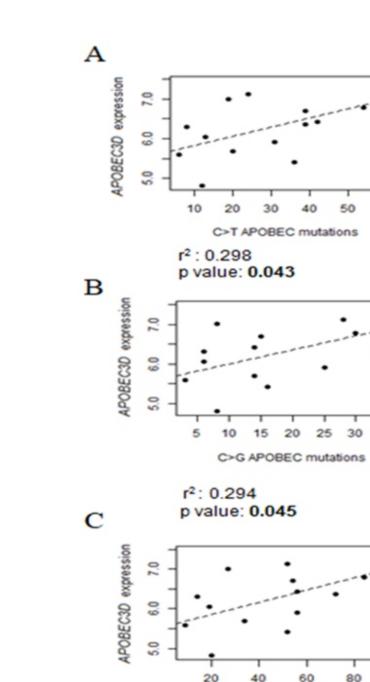
Comparison of APORECs expression in ESCC and LSCC patients from INCA, using RNAseq

Comparison of APOBECs expression in ESCC and LSCC patients from INCA, usin				
APOBECs	ESCC		LSCC	
	log2FoldChange	p Value	log2FoldChange	p Value
APOBEC1	ND	ND	ND	ND
APOBEC2	-0.94	0.074	-4.44	0.00011
APOBEC3A	3.37	3.54E-10	2.89	0.00418
APOBEC3B	2.95	4.93E-17	3.33	3.8e-10
APOBEC3C	0.34	0.058	0.34	0.31
APOBEC3D	1.81	3.33E-08	2.12	0.00038
APOBEC3F	1.54	1.47E-10	1.35	0.00013
APOBEC3G	1.34	4.69E-09	1.81	0.00003
APOBEC3H	0.99	0.012	0.67	0.607
APOBEC4	ND	ND	1.28	0.44

ESCC: esophageal squamous cell carcinoma; LSCC: laryngeal squamous cell carcinoma; log2FoldChange: log2 ratio of mRNA expression in tumors and non-tumor surrounding mucosa; ND: not detected; Bold p values highlight statistically significant differences (p<0.05).



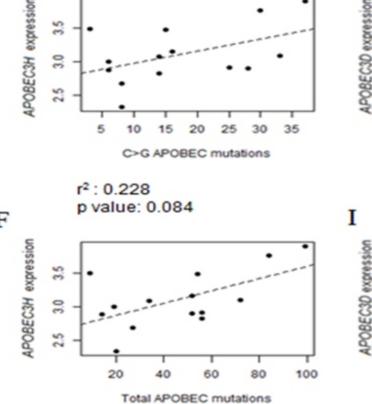
Comparison of the mutation fractions of C-to-T and C-to-G in TpC context in ESCC and LSCC samples using RNAseq, *p<0.05



Total APOBEC mutations

r2: 0.326

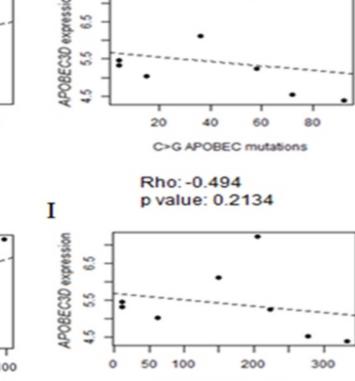
p value: 0.033



p value: 0.019

r²: 0.347

p value: 0.027

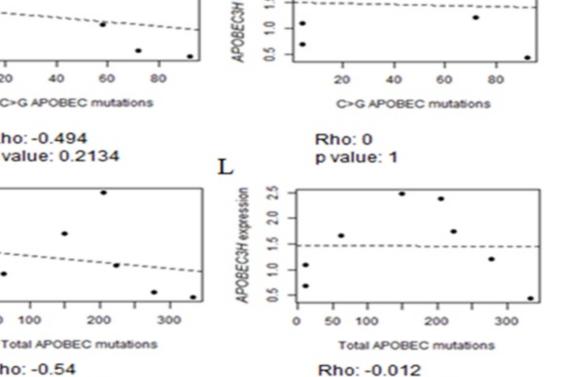


Rho: -0.54

p value: 0.1681

Rho: -0.54

p value: 0.1681

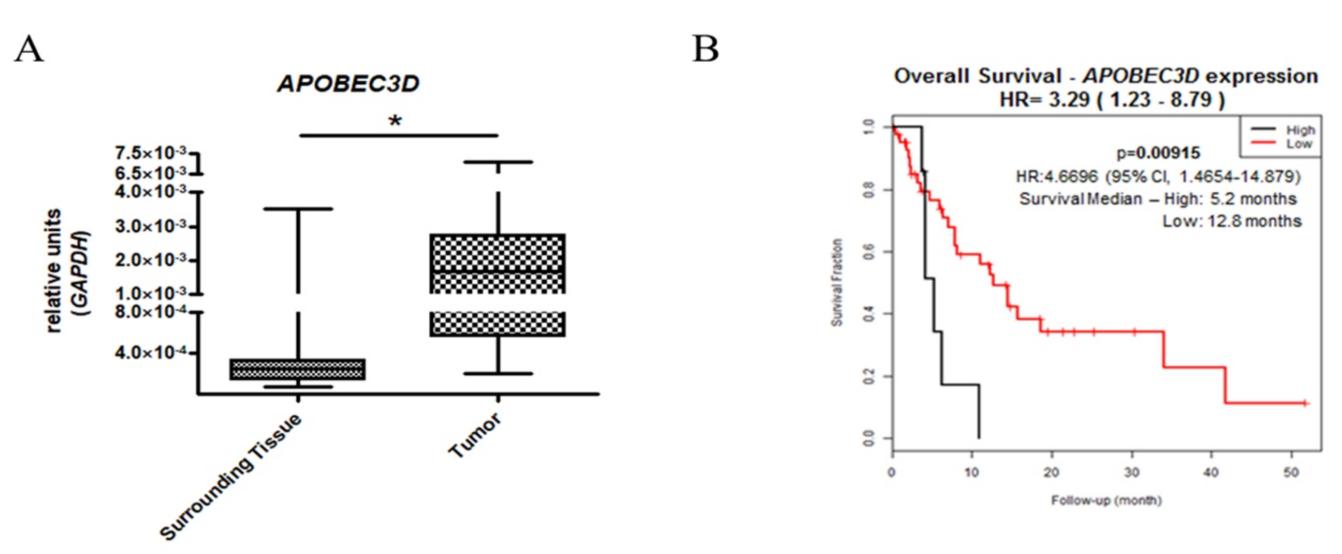


p value: 0.9775

C>T APOBEC mutations

p value: 0.9775

APOBECs mRNA expression correlates with C-to-T and C-to-G mutations in TpC context in ESCC patients (A-F) and in LSCC patients (G-L).



The expression profile of APOBEC3D (A) and the impact of this expression on overall survival by using multivariate analysis (B) in 49 samples of ESCC patients, *p<0.05.

CONCLUSION

The dysregulation of the APOBEC family of enzymes is a common feature in ESCC and LSCC, but these two tumors show different contributions of APOBEC mutational signature.

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Projeto Gráfico: Área de Edição e Produção de Materiais Técnico-Científicos / INCA





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