

Abstract Number: 988 - A0058

Mohamed H. Abdel-Rahman^{1,2}, Maha Hussein¹, Peter Johansson³, Lindsey Byrne², Reham Abdalla¹, Joseph McElroy⁴, Isabella Gray¹, Fredrick H. Davidorf¹, Nicholas Hayward³, Colleen M. Cebulla¹*

¹Ophthalmology and Visual Sciences, The Ohio State University Wexner Medical Center, Columbus, Ohio, United States; ²Division of Human Genetics, The Ohio State University Wexner Medical Center, Columbus, Ohio, United States; ³QIMR Berghofer Medical Research Institute, Herston, Queensland, Australia; ⁴Center for Biostatistics, The Ohio State University Wexner Medical Center, Columbus, Ohio, United States

Disclosures: Mohamed H. Abdel-Rahman: Code N (No Commercial Relationship) | Maha Hussein: Code N (No Commercial Relationship) | Peter Johansson: Code N (No Commercial Relationship) | Lindsey Byrne: Code N (No Commercial Relationship) | Reham Abdalla: Code N (No Commercial Relationship) | Joseph McElroy: Code N (No Commercial Relationship) | Isabella Gray: Code N (No Commercial Relationship) | Fredrick H. Davidorf: Code N (No Commercial Relationship) | Nicholas Hayward: Code N (No Commercial Relationship) | Colleen M. Cebulla: Code N (No Commercial Relationship)

Purpose

About 12% of uveal melanoma (UM) patients have features suggestive of hereditary cancer predisposition including young age of onset, bilateral tumors, strong personal/family history of cancers. Germline mutation in *BAP1* gene explains only 1-2% of these patients, suggesting the existence of other candidate genes. The goal of this study was to better characterize moderate/high-penetrant genetic predisposition to UM.

Methods

A cohort of 464 UM patients UM enriched for those with a strong personal and/or family history of cancer, was studied. This included 52 with familial UM (FUM) and 43 with early-onset UM (diagnosed at ≤ 35 years). These patients were seen or referred to the Department of Ophthalmology, The Ohio State University and enrolled through IRB approved protocols. Patients initially underwent testing for pathogenic/likely pathogenic (P/LP) variants in *BAP1* through single-gene testing or using a 77-gene multigene panel. Those with no detectable P/LP in known cancer genes were further studied by whole exome sequencing (WES). We focused on rare P/LP variants (minor allele frequency < 0.00001), in high/moderate penetrant cancer genes listed in the Catalogue of Somatic Mutations in Cancer (COSMIC).

Results

Genetic testing detected germline P/LP variants in established cancer genes in 82/464 patients (17.9%). The frequency of these variants was higher in FUM cases (20/52, 43.1%) compared to sporadic UM cases (62/412, 15.0%). The difference was statistically significant ($p=0.0001$). *BAP1* was the most frequently mutated gene, with P/LP variants observed in 16 patients, including 12/52 (23%) of FUM cases and 4/412 (~1%) of none-FUM cases. In sixteen other genes, P/LP variants were observed in at least two cases each. The most commonly affected pathways were DNA damage repair and telomere integrity. *MBD4* P/LP variants were identified in three patients, including one FUM case. Interestingly, the variant did not segregate with another UM case in that FUM family.

Conclusions

Germline pathogenic variants in *BAP1* are the most common genetic alterations in UM patients, particularly in those with FUM. Germline P/LP variants in other genes, especially those involved in DNA damage repair and telomere integrity pathways, may also contribute to predisposition to this rare cancer. Obtaining a comprehensive cancer history and referring patients with a strong personal or family history of cancer is crucial for the proper management of patients and their at-risk family members.