



European
Reference
Network

for rare or low prevalence
complex diseases

 Network
Paediatric Cancer
(ERN PaedCan)



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Katerina Trkova & Stefan Pfister

*High-grade glioma with EZHIP
overexpression*

Moderation: Teresa de Rojas



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COI declaration

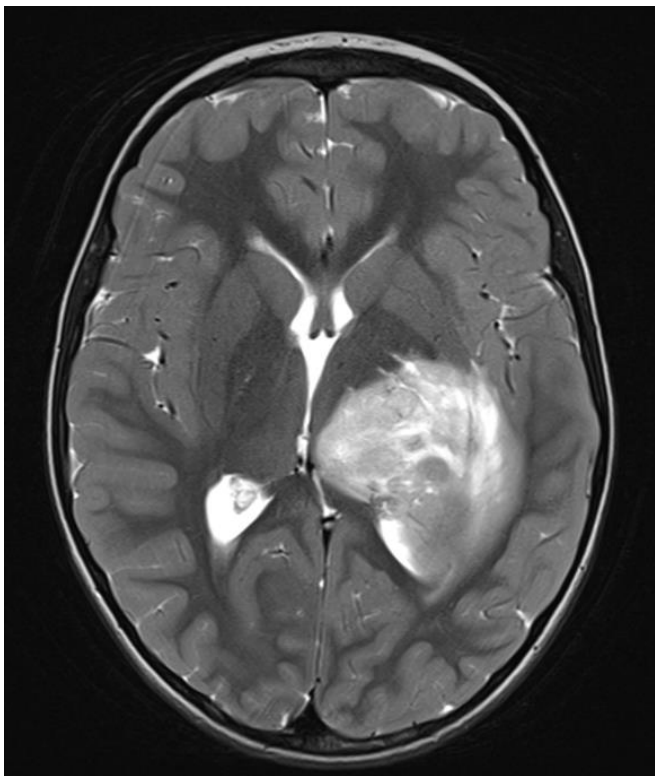
- No conflicts of interest

Clinical Case

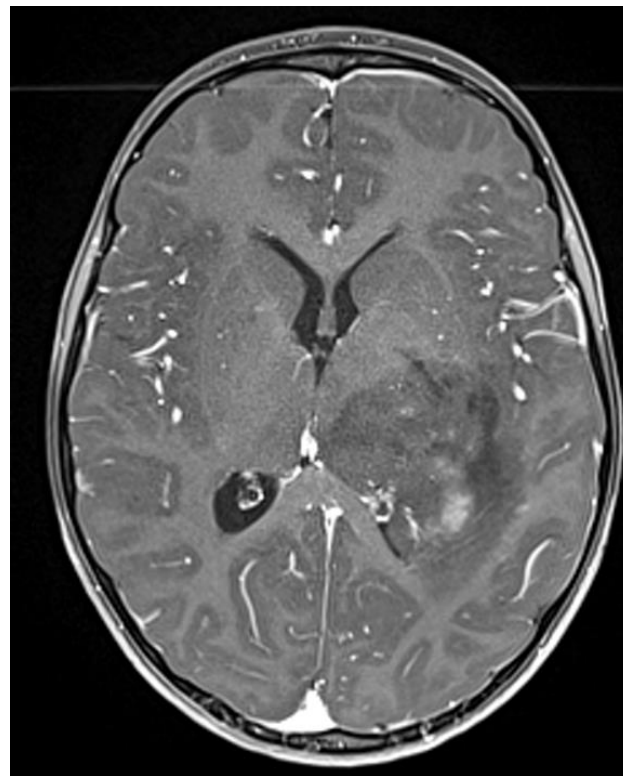
- 6 year-old girl
- cefalea, vomiting, dysarthria
- 1/2021 diagnostic MRI



Diagnostic MRI



T2 weighted 1/2021

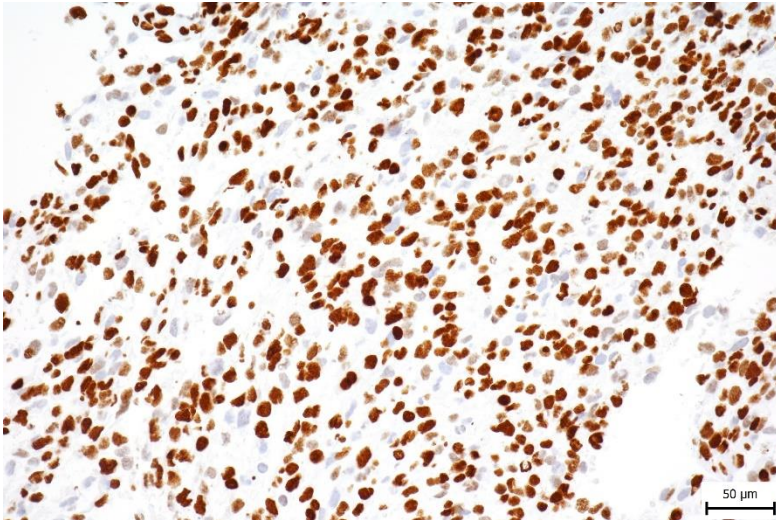


T1 GAD 1/2021

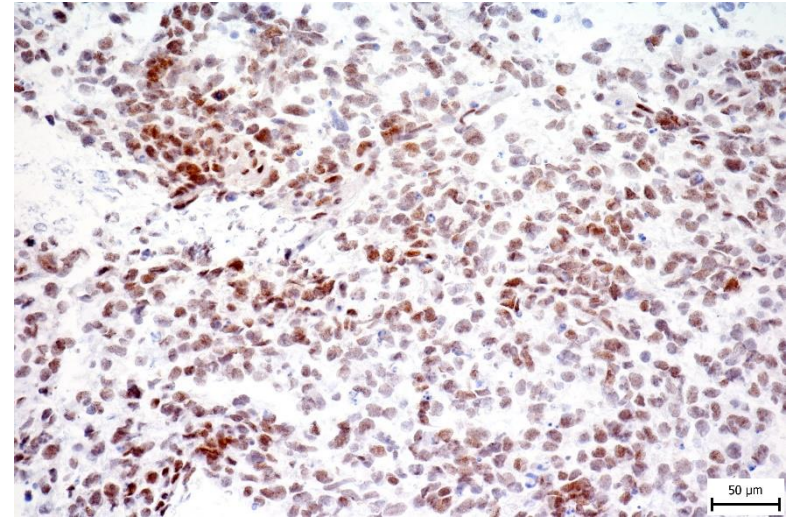
Clinical Case

- Partial resection
- Histopathology:
 - High grade astrocytoma, CNS WHO grade 3 with transformation to grade 4
- Immunohistochemistry:
 - Ki-67 80% positive cells
 - IDH1(R132H) neg., p53 expression wt
 - H3K27me3 – partial loss
 - EZHIP – overexpression
- Direct sequencing:
 - *histon H3* wildtype
 - *BRAF, IDH1,2* wildtype

Immunohistochemistry



H3K27me3 loss (50%)



EZHIP overexpression (50-70%)

Clinical Case

- Treatment
 - RT concomitant with TMZ



Question 1

- Mutation in the *Histone H3.3* or *H3.1* genes is a prognostically favorable marker in pediatric high-grade gliomas.
 - a. True
 - b. False

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 - b. False**

Question2

- Which statement is correct?
 - a. EZHIP overexpression causes the H3K27me3 loss
 - b. H3K27me3 loss causes the EZHIP overexpression

Question2

- Which statement is correct?
 - EZHIP overexpression causes the H3K27me3 loss**
 - H3K27me3 loss causes the EZHIP overexpression

Clinical Case

RT concomitant with TMZ
Hydrocephalus
EVD, recurrent infections

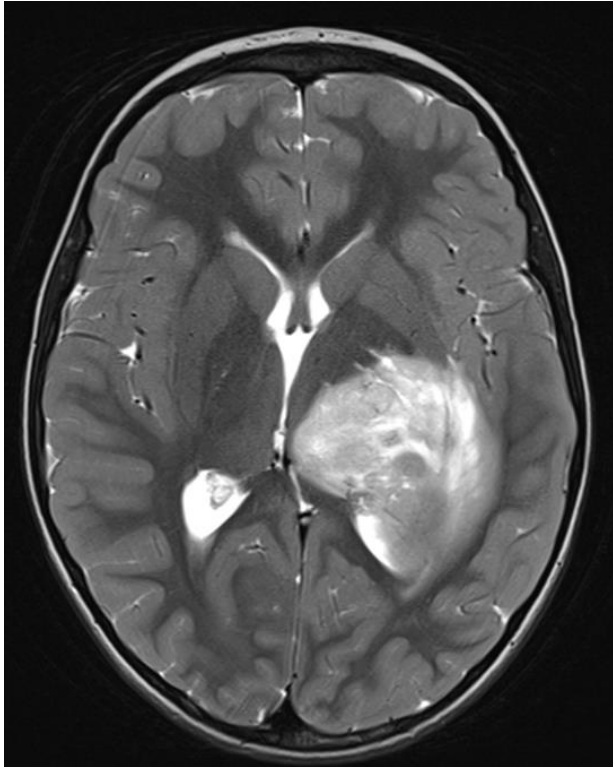


methylation array:

- 11b4 version: Glioblastoma, IDH wild type, subclass midline (0.56)
- 12.5 version: family: Paediatric-type diffuse high-grade gliomas (0.99)
subclass: Diffuse paediatric-type HGG, RTK1 subtype, subclass C (novel) (0.72)

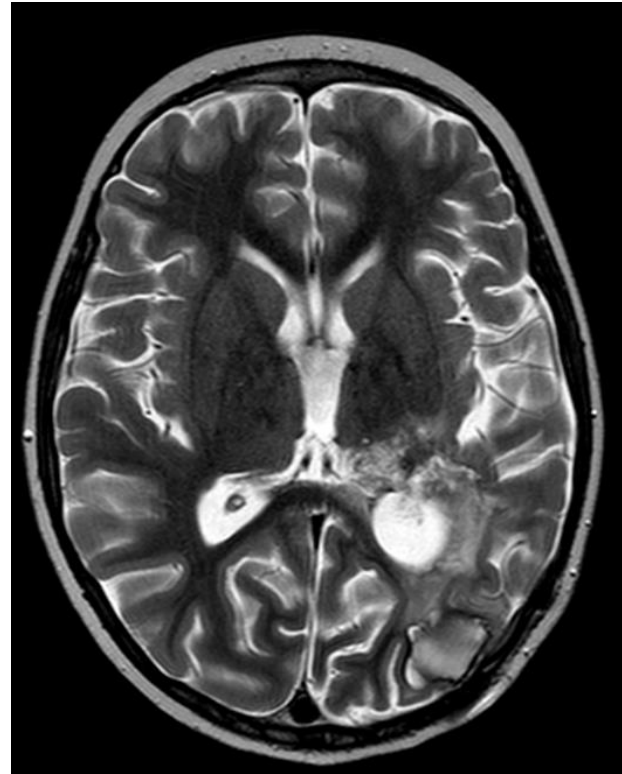
RNA-Seq (Archer) panel: no fusion

MRI after RT+TMZ



T2 weighted 1/2021

RT+TMZ
→



T2 weighted 5/2021

Clinical Case

6weeks

rapid metastatic progression

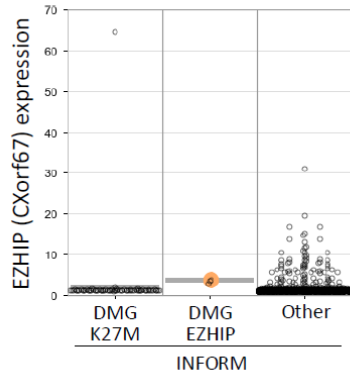
Trametinib

symptomatic home palliative care

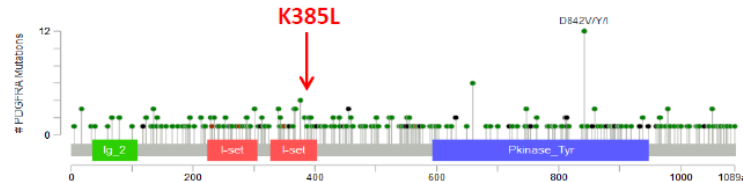


INFORM

- EZHIP overexpression

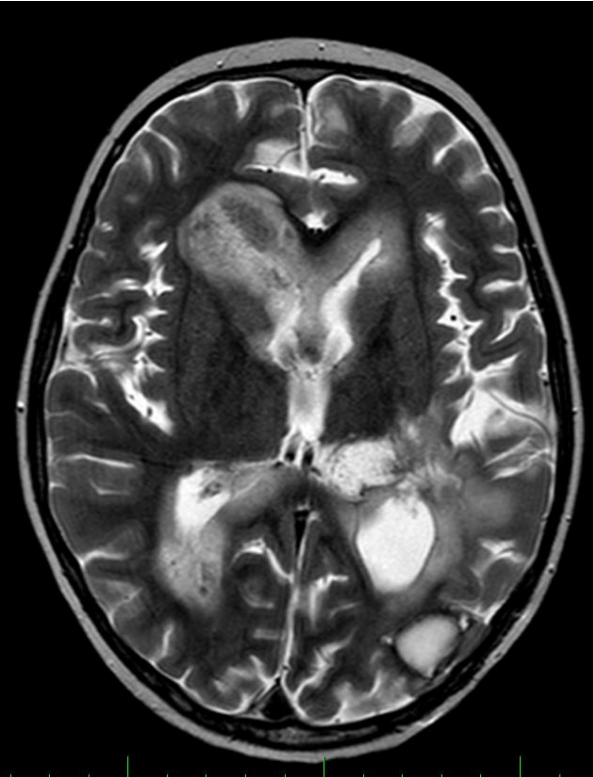


- mutation in the extracellular PDGFR α domain (K385L)



- methylation profile: Diffuse midline glioma, H3 K27 mutant (0,67)

Metastatic progression



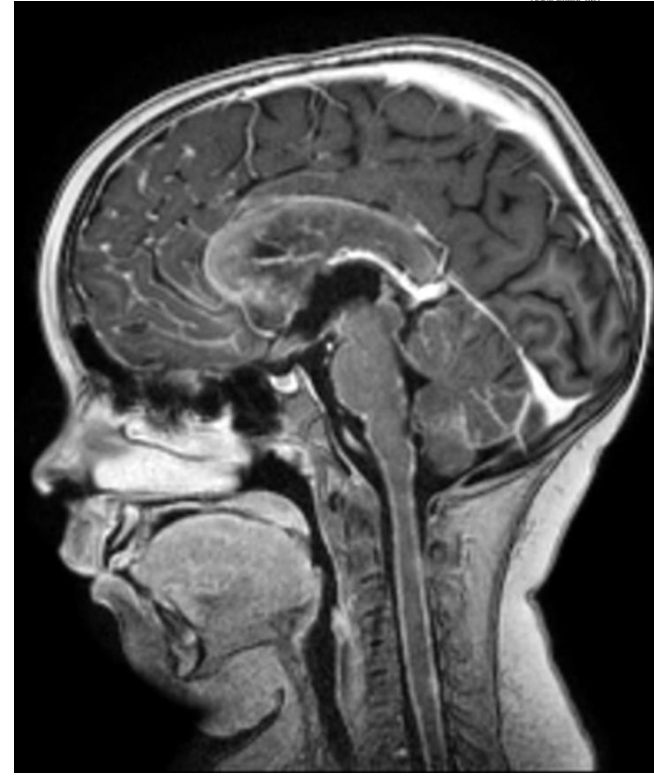
T2 weighted 6/2021

15



T2 FLAIR 6/2021

ERN PaedCan - Young SIOPE webinar series



T1 GAD 6/2021

Question 3

What cellular pathway is blocked by the inhibitor Trametinib?

- JAK-STAT pathway
- MAP-Kinase pathway
- Wnt pathway

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- JAK-STAT pathway
- **MAP-Kinase pathway**
- Wnt pathway

Take home messages

- Group of H3 wild type HGG is very heterogenous
- The classification system is still being finetuned
- Such rare and challenging patients should be referred to the international tumour board
- In the context of pediatric HGG, the loss of trimethylation because of the EZHIP overexpression is a immunohistochemically detectable marker associated with dismal prognosis
- Novel treatment modalities are required in frontline settings as our current approaches are ineffective