

Pathways and molecules that play a role in cancer development and being the targets of therapy

MED 213

The Genetic Bases of Cancer

Oncogenes

Tumor suppressor genes

Repair genes

Environmental mutagens

(biological, chemical, physical agents)

Genetic mechanisms in Familial vs Sporadic Cancers

Pathways in Carcinogenesis

Epigenetics and Cancer

Pathways and molecules that play a role in cancer development and being the targets of therapy

Conventional cancer therapy

Works on two basic mechanisms of cell cycle arrest

DNA damage producing
Prevention DNA synthesis

Modern cancer therapy

Works on targeted molecules of cellular pathways

Disrupting ligand receptor relation
Preventing signal transduction

Molecular Targets for Cancer Therapy

Therapeutic Targets

Monoklonal antikorlar (-mab)

Receptor tyrosine kinases

ERBB
HER1/EGFR ([Cetuximab](#), [Panitumumab](#))
HER2/neu ([Trastuzumab](#))

Other (Solid tissue tumors)

EpCAM
VEGF-A ([Bevacizumab](#))

Other (leukemia/lymphoma)

Lenfoid
CD20 ([Ibritumomab](#), [Ofatumumab](#), [Rituximab](#), [Tositumomab](#)),
CD52 ([Alemtuzumab](#))
Myeloid
CD33 ([Gemtuzumab](#))

Tyrosine kinase inhibitors (-nib)

Receptor tyrosine kinases

ERBB
HER1/EGFR ([Erlotinib](#), [Gefitinib](#), [Vandetanib](#))
HER1 ve HER2 ([BIBW 2992](#), [Lapatinib](#), [Neratinib](#))
RTK clasIII
CKIT ve PGFR ([Axitinib](#), [Pazopanib](#), [Sunitinib](#), [Sorafenib](#), [Toceranib](#))
FLT3 ([Lestaurtinib](#))
VEGFR ([Axitinib](#), [Cediranib](#), [Pazopanib](#), [Regorafenib](#), [Semaxanib](#), [Sorafenib](#), [Sunitinib](#), [Toceranib](#), [Vandetanib](#))

Non receptor tyrosine kinases

BCR/ABL ([Dasatinib](#), [Imatinib](#), [Nilotinib](#))
SRC ([Bosutinib](#))
JAK2 ([Lestaurtinib](#))

Others

Fusion proteins

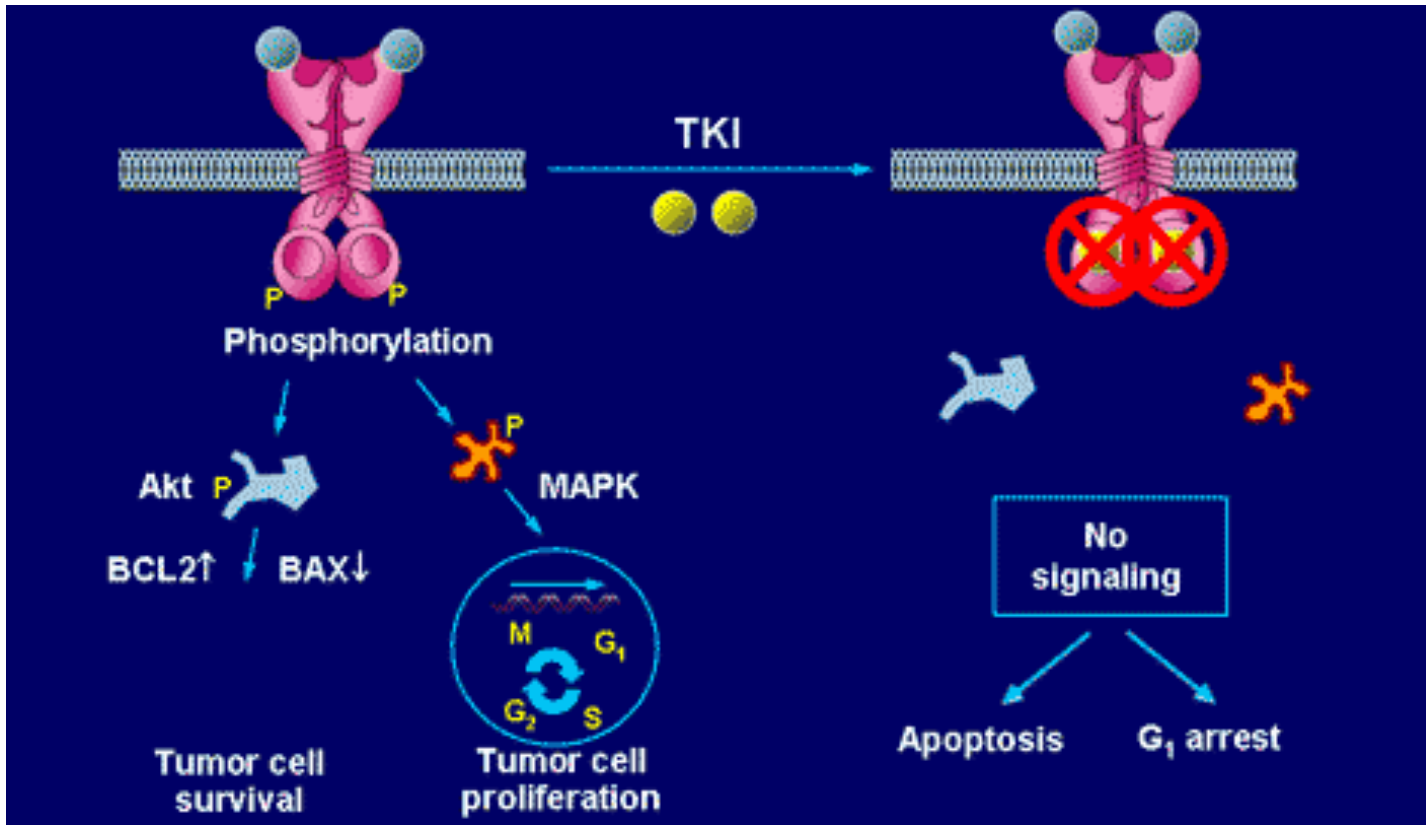
VEGF **F**
([Aflibercept](#))

Exzotoxins

IL2 ([Denileukin diftitox](#))

Trastuzumab (Herceptin)

Monoclonal antibody



High specificity humanized recombinant antibody against HER2

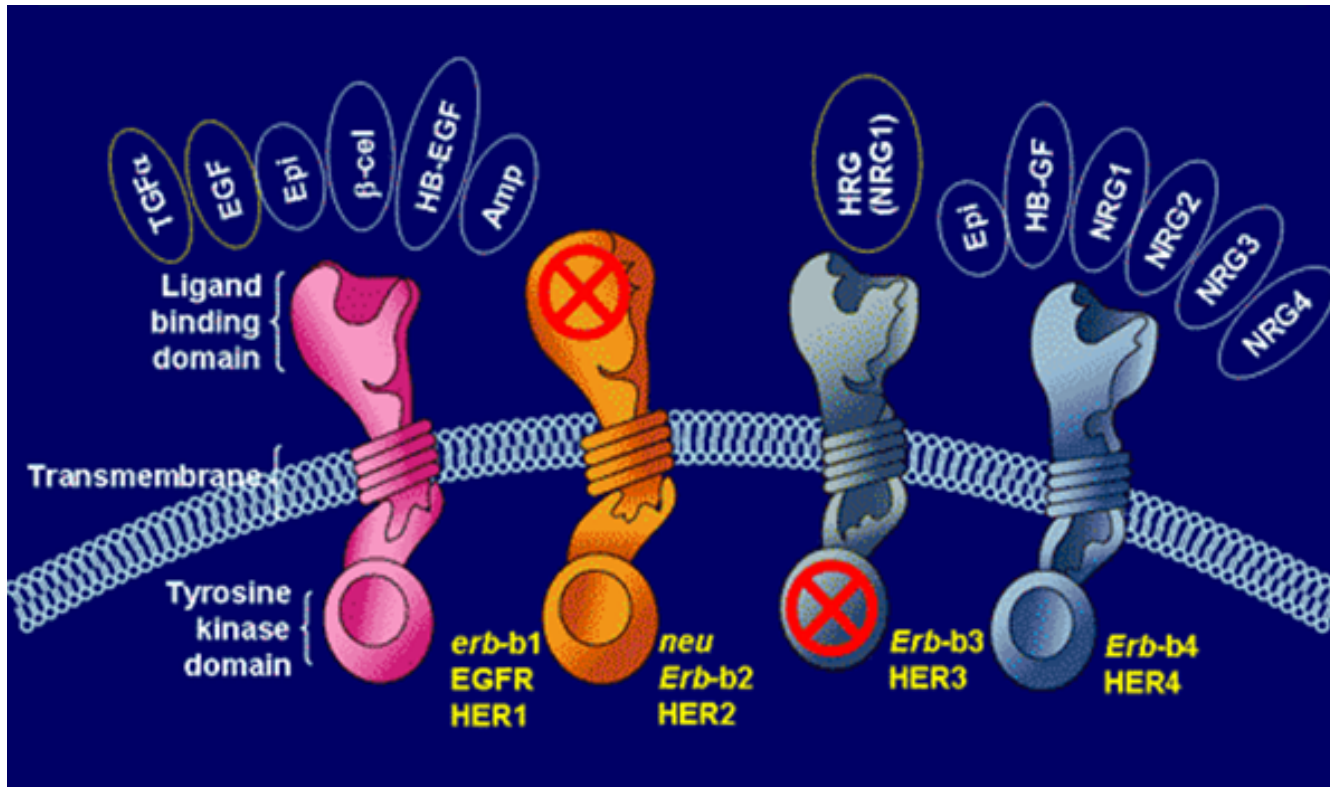
ErbB-1: EGFR (epidermal growth factor)

ErbB-2: [HER2](#) or [neu](#)

ErbB-3: [HER3](#)

ErbB-4: [HER4](#)

ErbB protein family

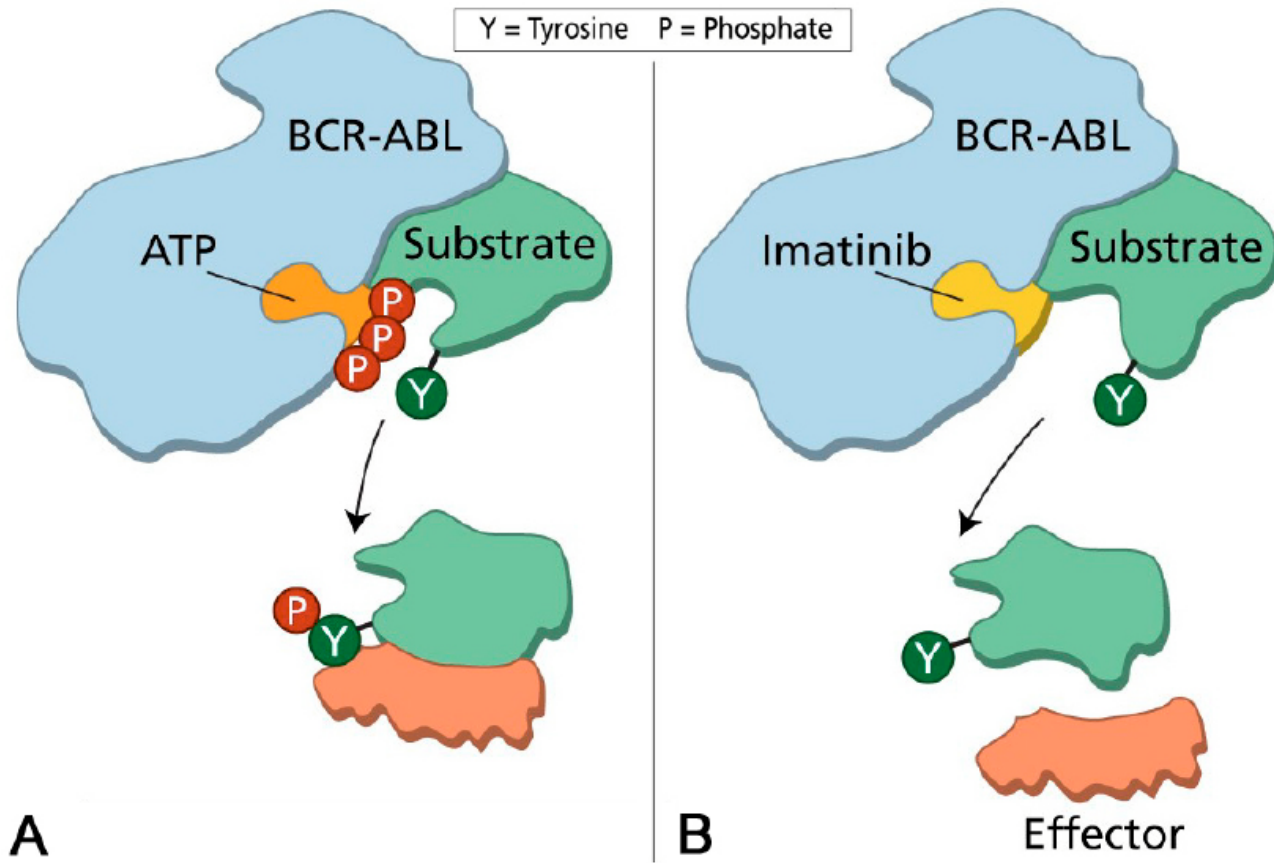


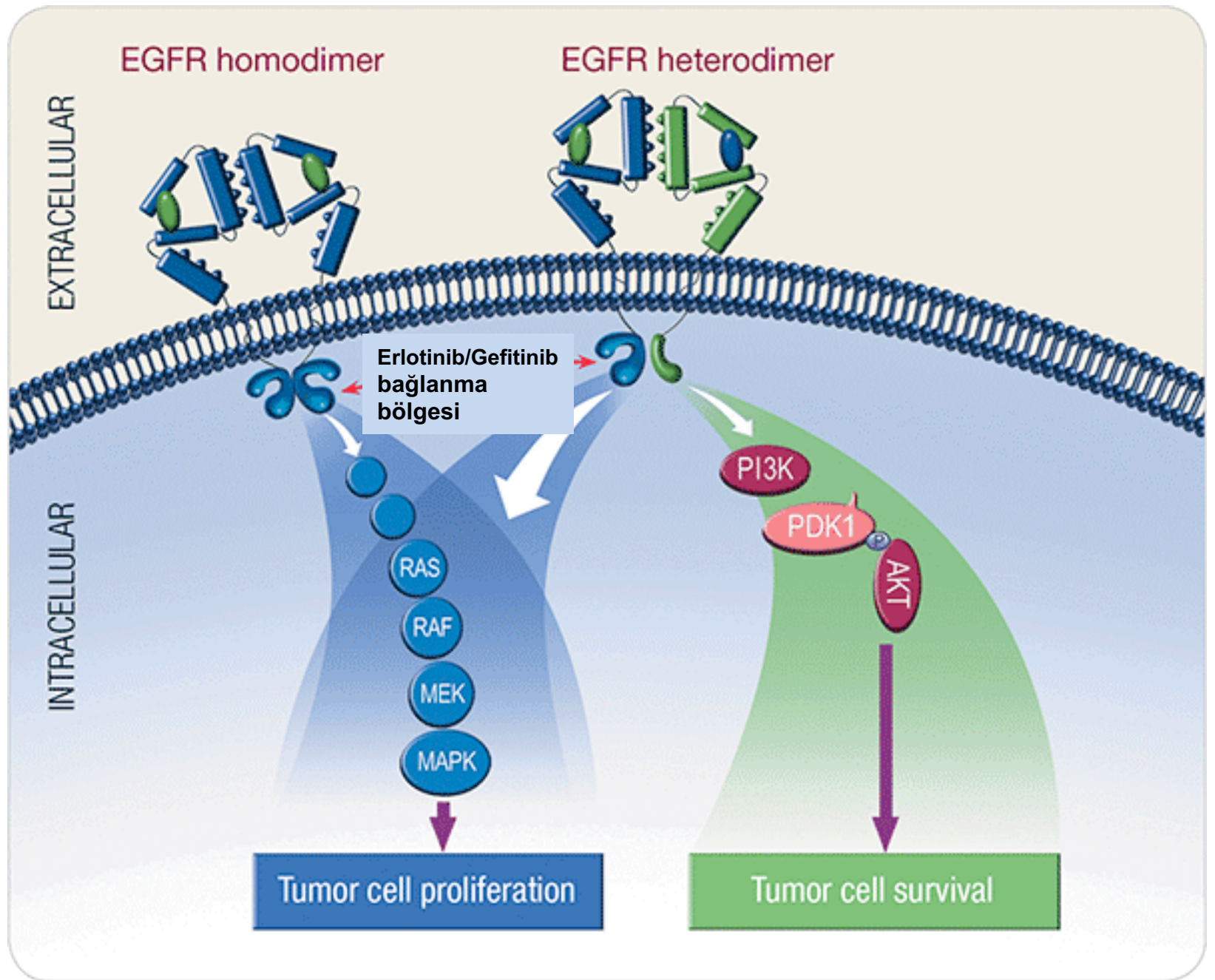
HER2 amplifications:

15% of primary breast cancer cases and 30% of metastatic cancers have

Imatinib (tyrosine kinase inhibitor)

Used for CML ve Gastrointestinal stromal tumor (GIST) therapy





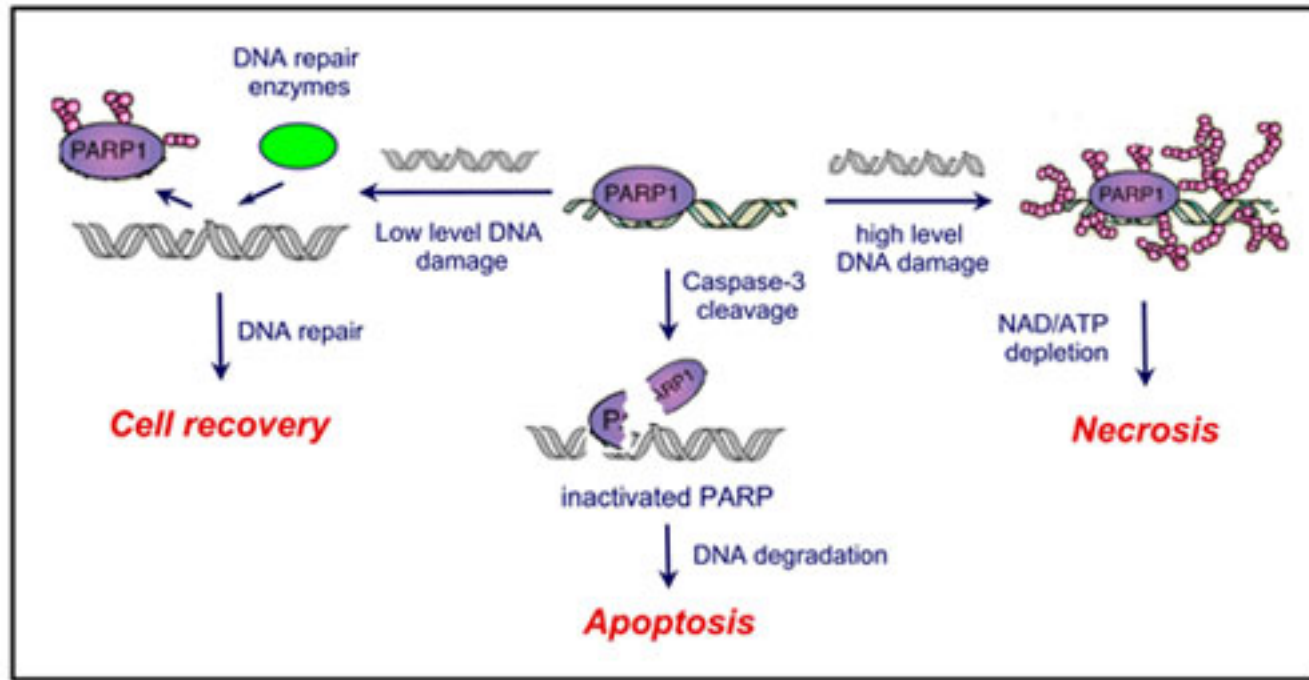
Examples of targeted drugs for cancer therapies

DRUG	TUMOR	TARGET
Trastuzumab	Breast cancer	ERBB2 (RTK) inhibition
Cetuximab	Colon, head neck, etc. solid tissue tumors	EGFR (RTK) inhibition
Erlotinib	NSCLC (non small cell lung cancer)	EGFR (RTK) inhibition
Gefitinib	NSCLC effective 10% of cases	EGFR (RTK) inhibition
Imatinib	CML, GIST	BCR-ABL, PDGFR
Vemurafenib	Advanced melanoma	RAS pathway BRAF inhibition (V600E mutation + cases)
Ruxolitinib	Myeloproliferative disorders	JAK/STAT pathway- signal inhibition
Rapamisin (sirolimus)	Combined therapies	mTOR pathway
Rapamisin türevi (everolimus)	Advanced renal cancers, pancreatic neuroendocrin tumors	mTOR pathway
Bevacizumab	Advanced colon cancers, NSCLC, ovarium, renal cancers, glioblastoma multiforme	mTOR pathway HIF1a>VEGFA inhibition
Ramucirumab	Advanced gastric and eosophageal cancers	HIF1a>VEGFA inhibition

Genetic alterations causing drug resistance

Drug	Tumor	Resistance mutation
IMATINIB	Gastrointestinal Stromal Tumors (GIST)	cKIT gene EKZON 9, 11, 13 and 17 mutations
		PDGFRA gene EKZON 12 and 18 mutations
GEFITINIB	NSCLC	EGFR gene T790M
TRASTUZUMAB	Breast cancer	PTEN loss
RITUXIMAB	B-cell non-Hodgkin lymphoma (NHL)	FCGR3A
DOXORUBICIN	Breast cancer	<i>MRD1</i> C3435T
DOXORUBICIN	Pleomorphic Liposarcoma	Long telomere

PARP1 inhibitors



Olaparib, Rucaparib: BRCA related breast-ovary cancers
Niraparib: epithelial ovary, primary peritoneal cancers

Disrupts base excision repair mechanism

Synthetic lethal effect

PARP inhibition therapy

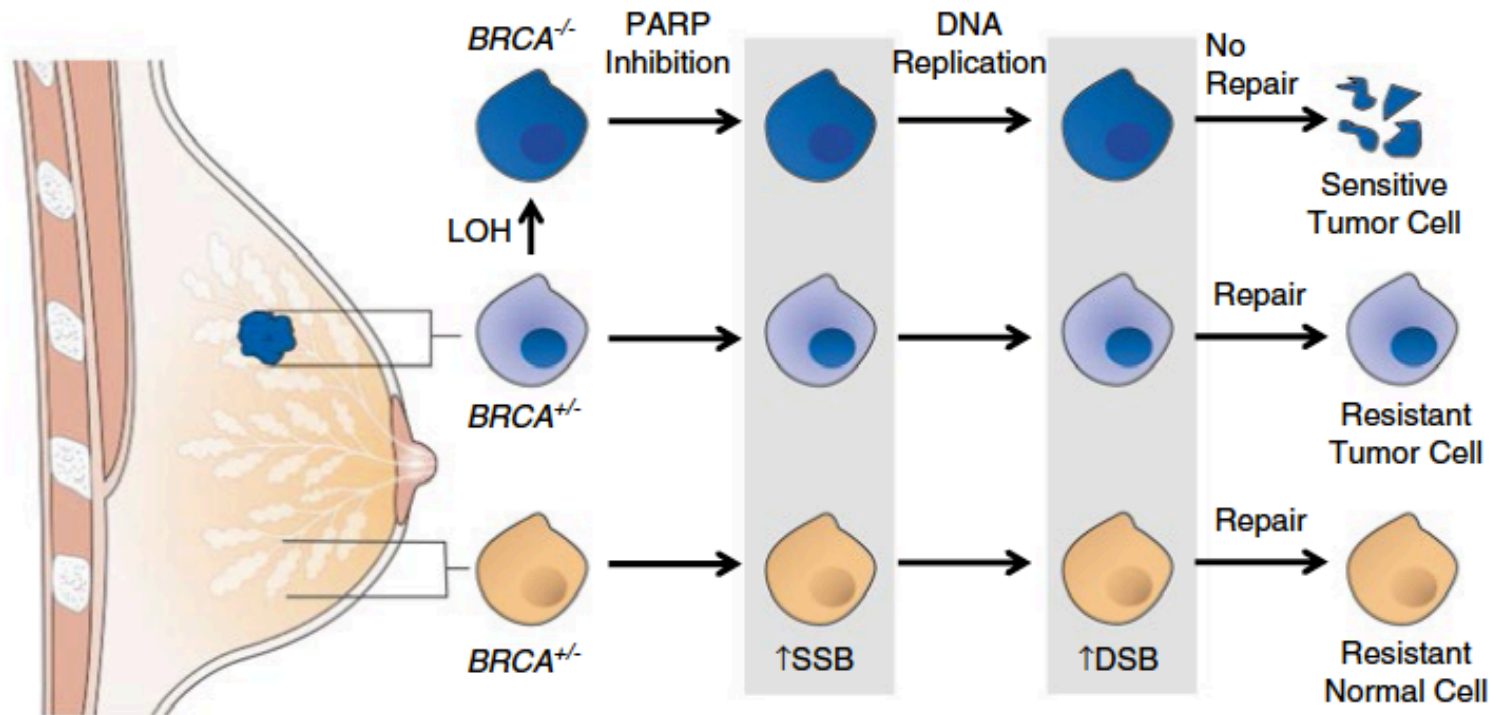


Fig. 8.3 Synthetic lethality of BRCA-deficient cancer cells treated with a PARP inhibitor. Breast cancers arise at an elevated rate in women who harbor heterozygous mutations ($BRCA^{+/-}$) in either $BRCA1$ or $BRCA2$. Many tumor cells undergo loss of heterozygosity at the relevant locus and thereby become completely BRCA-deficient ($BRCA^{-/-}$). Systemic treatment with a PARP inhibitor results in the transient accumulation of single-strand breaks (SSB) in all cells. During DNA replication, unrepaired SSB are converted to double-strand breaks (DSB). Normal cells and tumor cells that retain $BRCA$ heterozygosity are capable of repairing DSB via the pathway of homologous recombination. BRCA-deficient cells lack this capability, and will accumulate lethal levels of DSBs. Breast tumor image from Cancer Research UK

NEW DRUG EXPERIMENTS

PIK3/AKT

WNT/APC