#### **General oncology 4**

# Inherited and acquired predispositions to cancers and precanceroses

#### GENETIC PREDISPOSITION TO CANCER

Less than 10% of cancer patients have inherited mutations that predispose to cancer, and the frequency is even lower (around 0.1%) for certain types of tumors.

Genetic predisposition to cancer can be divided into three categories

**Autosomal Dominant Inherited Cancer Syndromes** 

**Defective DNA-Repair Syndromes** 

**Familial Cancers** 

#### **Autosomal Dominant Inherited Cancer Syndromes**

#### Genes

RB

p53

p16/INK4A

**APC** 

NF1, NF2

BRCA1, BRCA2

MEN1, RET

MSH2, MLH1, MSH6

**PTCH** 

PTEN

LKB1

VHL

#### Inherited predispositions

Retinoblastoma

Li-Fraumeni syndrome (various tumors)

Melanoma

Familial adenomatous polyposis/colon cancer

Neurofibromatosis 1 and 2

Breast and ovarian tumors

Multiple endocrine neoplasia 1 and 2

Hereditary nonpolyposis colon cancer

Nevoid basal cell carcinoma syndrome

Cowden syndrome (epithelial cancers)

Peutz-Jegher syndrome (epithelial cancers)

Renal cell carcinomas

#### Retinoblastoma RB gene

#### **Features**

Gross - White, solid tumor Microscopic - Small round cell tumour: Scant cytoplasm.

Flexner-Wintersteiner rosette - **key feature**.

Rosette with empty centre (donut hole).

Circular rosette with neuropil at the centre.

Mitoses - common.

## Familial adenomatous polyposis APC gene

most common adenomatous polyposis syndrome. hundreds to thousands of adenomatous polyps develops **early in life** (teens or 20s) 100% risk of developing colorectal ca 75% of FAP are autosomal dominant disorder. Most polyps are **smaller than 1 cm** in size Gastric polyps occur in 30% to 100% of cases, then duodenum (60 to 90%), jejunum (40%) and ileum (20%) The gross pathology and microscopic features are identical to the sporadic adenomas. Numerous **small polyps** which appear basophilic due to low-grade dysplasia cancer formation is **delayed** to around **50-55** years of age in attenuated FAP prophylactic colonectomy is the standard of care

#### Neurofibromatosis 1 NF1 gene

Neurofibromin that is expressed in brain and peripheral nerves.

NF1 is characterized by multiple cafe-au-lait spots and neurofibromas (usually plexiform or diffuse type). Other manifestations include: CNS lesions (optic nerve glioma, astrocytoma, heterotopias), pigmented hamartoma of iris (Lisch nodule), skeletal abnormalities, vascular abnormalities (renovascular hypertension), gynecomastia, non-neural tumors (pheochromocytoma, myelogenous leukemia), and GIST

Lisch nodule

cafe-au-lait

#### Neurofibromatosis 2 NF2 gene

autosomal dominant disorder inactivating germline mutations in the tumor suppressor gene NF2
The diagnostic hallmark of NF2 is bilateral vestibular schwannomas
There is no risk of malignant transformation in schwannomas of NF2, however they cause significant morbidity and reduced life-span due to their location in brain and spinal cord. Patients develop deafness, vision loss, imbalance and gait abnormalities, muscle weakness, paralysis, pain, and seizures

## Multiple endocrine neoplasia (MEN) 1 and 2 *MEN1, RET genes*

MEN1 – Wermer syndrome (parathyroids, pancreas and pituitary benign tumors)

MEN 2A - Sipple syndrome (medullary thyroid ca, pheochromocitoma)

MEN 2B – multiple neuromas

neuroma

Medullary thyroid ca

# Cowden syndrome (epithelial cancers) or multiple hamartoma syndrome *PTEN gene*

an autosomal dominant inherited condition characterized by benign overgrowths called hamartomas

Skin - trichilemmomas, oral papillomas, shiny palmar keratoses. At birth pigmented genital lesions, lipomas, epidermal nevi, and cafe-au-lait spots. Squamous cell carcinomas.

Thyroid - benign follicular adenomas or multinodular goiter Genitourinary - endometrial cancers, testicular lipomatosis Gastrointestinal - polyps

Breast - breast cancer.

Central Nervous Systém – macrocephaly, varying degrees of autism spectrum disorder and intellectual disability

Goiter

Trichilemmomas

Intraductal papilloma

#### Von Hippel Lindau VHL gene

characterized by visceral cysts and benign tumors with potential for subsequent malignant transformation

Tumor/Cyct type	Provalence
Tumor/Cyst type	Prevalence
Pancreatic cysts	50-91%
Cerebellar hemangioblastoma	44-72%
Renal cysts	59-63%
Retinal hemangioblastoma	45-59%
Renal cell carcinoma	24-45%
Spinal cord hemangioblastoma	13-59%
Papillary cystadenoma of the epididymis	10-60% of males
Pheochromocytoma	0-60%
Neuroendocrine tumor of the pancreas	5-17%
Serous cystadenoma of the pancreas	12%
Medullary hemangioblastoma	5%

#### INHERITED AUTOSOMAL RECESSIVE SYNDROMES OF DEFECTIVE DNA REPAIR

Xeroderma pigmentosum Ataxia-telangiectasia Bloom syndrome Fanconi anemia

#### Xeroderma pigmentosum

Symptoms may include a severe sunburn after only a few minutes in the sun, freckling in sun exposed areas, dry skin and changes in skin pigmentation.

Nervous system - hearing loss, poor coordination, loss of intellectual function and seizures.

Complications include a high risk of skin cancer, cataracts

The average life expectancy of an individual with any type of XP and no neurological symptoms is approximately **37 years**, and **29 years** if neurological symptoms are present

#### Fanconi anemia

#### **Features**

bone marrow failure, skeletal abnormalities, and an increased risk for cancer

#### **FAMILIAL CANCERS**

Familial clustering of cases, but role of inherited predisposition not clear for each individual Breast cancer
Ovarian cancer
Pancreatic cancer

### **Interactions between Genetic and Nongenetic Factors**

It is generally difficult to sort out the hereditary and acquired basis of a tumor, because these factors often interact closely

The genotype can significantly influence the likelihood of developing environmentally induced cancers.

Inherited variations (polymorphisms) of enzymes that metabolize procarcinogens to their active carcinogenic forms can influence the susceptibility to cancer

#### NONHEREDITARY PREDISPOSING CONDITIONS

**Chronic Inflammation and Cancer** 

In 1863 Virchow proposed that cancer develops at sites of chronic inflammation

#### **Precancerous Conditions**

Certain non-neoplastic disorders—the chronic atrophic gastritis of pernicious anemia, solar keratosis of the skin, chronic ulcerative colitis, and leukoplakia of the oral cavity, vulva, and penis—have such a well-defi ned association with cancer that they have been termed **precancerous conditions** 

Certain forms of benign neoplasia also constitute precancerous conditions.

The villous adenoma of the colon, as it increases in size, becomes malignant in up to 50% of cases

Pathologic Condition	Associated Neoplasm(s)	Etiologic Agent
Asbestosis, silicosis Bronchitis	Mesothelioma, lung carcinoma	Asbestos fibers, silica particles Silica, asbestos, smoking (nitrosamines, peroxides)
Cystitis, bladder infl Gingivitis, lichen planus Inflammatory bowel disease Lichen sclerosis	Bladder carcinoma Oral squamous cell carcinoma Colorectal carcinoma Vulvar squamous cell ca	Chronic indwelling urinary catheters
Chronic pancreatitis Hereditary pancreatitis Reflux esophagitis, Barrett esophagus Sialadenitis Sjögren syndrome, Hashimoto thyroiditis	Pancreatic carcinoma Pancreatic carcinoma Esophageal carcinoma Salivary gland carcinoma MALT lymphoma	Alcoholism Mutation in trypsinogen gene Gastric acids

#### **Asbestosis**

long-term inflammation and scarring of the lungs due to asbestos fibers.

Symptoms may include shortness of breath, cough, wheezing, and chest tightness.

Complications may include lung cancer, mesothelioma, and pulmonary heart disease

CANCERS ASSOCIATED WITH INFECTIOUS AGENTS		
Opisthorchis, cholangitis	Cholangiosarcoma, colon ca	Liver flukes (Opisthorchis viverrini)Bile acids
Chronic cholecystitis	Gallbladder cancer	Bacteria, gallbladder stones
Gastritis/ulcers	Gastric adenocarcinoma, MALT	Helicobacter pylori
Hepatitis Mononucleosis	Hepatocellular carcinoma B-cell non-Hodgkin lymphoma	Hepatitis B and/or C virus Epstein-Barr virus
AIDS	and Hodgkin lymphoma Non-Hodgkin lymphoma, squamous cell carcinoma, Kaposi sarcoma	Human immunodefi ciency virus, human herpesvirus type 8
Osteomyelitis	Carcinoma in draining sinuses	Bacterial infection
Pelvic inflammatory disease, chronic cervicitis	Ovarian carcinoma, cervical/anal carcinoma	Gonorrhea, chlamydia, human papillomavirus
Chronic cystitis	Bladder, liver, rectal carcinoma	Schistosomiasis

#### **AIDS**

Human immunodeficiency virus infection and acquired immunodeficiency syndrome (HIV/AIDS) is a spectrum of conditions caused by infection with the human immunodeficiency virus (HIV), a retrovirus

Associated cancers: Kaposi's sarcoma, Burkitt's lymphoma, primary central nervous system lymphoma

#### Carcinogenic Agents and Their Cellular Interactions

Chemical Physical Biological

#### MICROBIAL CARCINOGENESIS

**Oncogenic RNA Viruses** 

Human T-Cell Leukemia Virus Type 1.

**Oncogenic DNA Viruses** 

Human Papillomavirus.

Epstein-Barr Virus.

Hepatitis B and C Viruses

**Bacteria** 

Helicobacter pylori

#### Helicobacter pylori

is a gram-negative, microaerophilic, spiral (helical) bacterium usually found in the stomach *H. pylori* infection - <u>ulcers of the stomach or first part of the small intestine</u>