Assessment of Pathology Features in the Revised Bethesda Guidelines

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Cancer Family Registry for Colon Cancer Studies NCI/NIH Amsterdam Criteria To provide a standardized classification of HNPCC families presenting to high-risk clinics

Bethesda Guidelines To identify CRC presenting in the population setting that should be tested for DNA MSI

Revised Bethesda Guidelines for MSI testing of CRC

Less than 50 years of age at diagnosis
 Multiple CRC or HNPCC-related cancer
 MSI-H pathology and <60 years
 Relative with CRC or HNPCC-related cancer aged less than 50 yrs
 Two relatives with CRC or HNPCC-related related cancer, any age

Umar et al, 2004

Pathology Features in Revised BG

 Medullary, Mucinous & Signet Ring Cell types
 Lymphocytic infiltration

 Tumor infiltrating (TILs)
 Crohn-like reaction (CLR)



Aim of study

Identify pathology features that can predict MSI-H status in CRCs presenting in population-based subjects aged <60 years
 Predictive model based on independent features
 % of HNPCC identified by pathology that

would otherwise have been missed

MSI-H testing

> 10 MS markers > At least 4/10 evaluable > Instability in 30% for MSI-H > 556 evaluable CRCs from Hawaii, Mayo & Australia

Results

MSI-H MSI-L MSS Total 72 66 418 556

Predictors of MSI-H status: multivariate analysis

FeatureOR (95% Cl)TILs7.3 (3.8-14.0)Proximal6.2 (3.2-11.7)Crohn3.5 (1.8-7.1)Mucinous2.6 (1.3-5.1)

MS-Path Score and increasing frequency of MSI-H status

Score	Proportion	MSI-H
0	43%	2%
1-2	29%	3-8%
2.3-3.8	18%	11-35%
4.1-5.1	9%	43-67%
6.1	1%	85%

Score is total for TILs (2.0), Proximal (1.8), Crohn (1.3), and Mucinous (1.0)



Minimum number of pathology features present

'MSI-H' cases 'missed' by pathology

Age	Markers	Monos	MMR
55	3/10	No	Normal
41	2/5	No	Normal
45	3/9	No	Normal
22	7/10	Yes	Abnormal*

*Loss of MLH1 and PMS2

Distribution of MSI



Cancers

Evaluation of MS-Path score for predicting MSI-H status Zero versus One or More (after re-assigning 3 cases)

 Sens
 Spec
 PPV
 NPV

 99%
 49%
 21%
 99%

Conclusion

 Pathology is highly sensitive for MSI-H status (99%) No need to test CRCs (43%) that lack pathology features Pathology identifies MSI-H CRCs between age 50-59 that may be due to HNPCC

ROC Curve for Ms-Path Test

