

# RNA Genetic Testing Increases Diagnostic Yield of Hereditary Cancer Multigene Panel Tests

FEBRUARY 2020

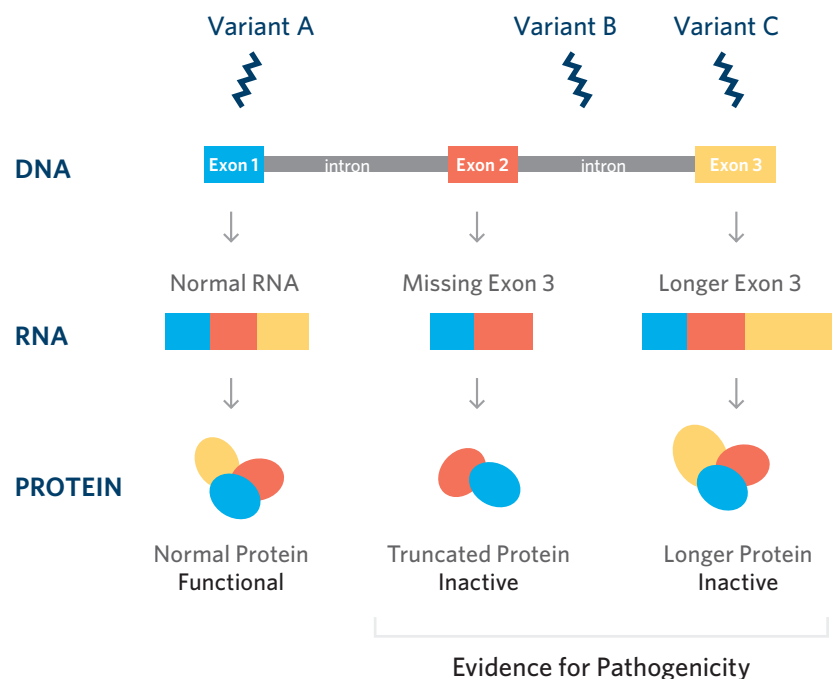
## Paired DNA and RNA genetic testing identifies more patients with hereditary cancer than DNA testing alone

Our study, recently published in *npj Precision Oncology*, demonstrated how paired DNA and RNA sequencing of 18 cancer predisposition genes improves the diagnostic yield of genetic testing and reduces variants of unknown significance, enhancing a clinician's ability to inform medical management.<sup>1</sup>

### Background

- Splicing is the removal of non-coding sequences (introns) from an RNA molecule followed by the ligation of exons, the protein coding regions of genes.<sup>2,3</sup>
- RNA genetic testing (RGT) generates data that can be used as a strong line of evidence to help determine if a DNA variant is pathogenic or benign.<sup>4</sup>
- RGT also enables the identification of pathogenic intronic variants in regions not typically captured by DNA testing alone.<sup>3</sup>
- This study described a scalable and targeted approach to RGT performed in parallel with DNA multi-gene panels and evaluated the change in diagnostic yield for 1,000 patients undergoing genetic testing for hereditary cancer to assess the clinical utility of this model.

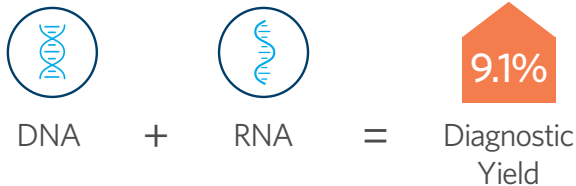
FIGURE 1: VARIATION IN DNA CAN CAUSE ERRORS IN SPLICING RESULTING IN A PROTEIN THAT IS NOT PROPERLY EXPRESSED



# RNA Genetic Testing Identified Disease-Causing Variants that Would Not Have Been Resolved with DNA-Only Testing

## Increase in Diagnostic Yield

- 84 individuals received positive results from paired DNA and RNA genetic testing compared to 77 individuals, if only DNA testing was performed.
- The addition of RNA genetic testing resulted in a **9.1% relative increase in diagnostic yield**.



- For 6 of 7 RNA-related positive cases, **changes to medical management would be recommended** based on current guidelines.

## Variants Impacted by RNA Genetic Testing

- Results of testing identified disease-causing variants in genes associated with breast and ovarian cancer (*BRCA1*, *BRCA2*, *ATM*), polyposis (*MUTYH*), and Lynch syndrome (*PMS2*).

Variants Impacted by RNA	Classification Impact
<i>BRCA1</i> c.5152+6T>G	New alteration detected (Pathogenic mutation)
<i>BRCA1</i> c.81-9C>G	New alteration detected (Pathogenic mutation)
<i>ATM</i> c.3065T>G	Initial VLP classification
<i>ATM</i> c.8418+5G>A	Variant reclassified (VUS to VLP)
<i>BRCA2</i> c.475+4DELT	Variant reclassified (VUS to VLP)
<i>PMS2</i> c.11C>G	Variant reclassified (VUS to VLP)
<i>MUTYH</i> c.577-5A>G	Variant reclassified (VUS to VLP)

VUS: Variant of Unknown Significance

VLP: Variant, Likely Pathogenic

## Key Benefits of +RNAinsight®



Identifies clinically actionable variants that may otherwise be inconclusive or missed by DNA-only testing



Reduces variants of unknown significance in real-time



Gives healthcare providers clearer, more accurate results to inform medical management

## REFERENCES

- Landrith T. *et al.* Splicing profile by capture RNA-seq identifies pathogenic germline variants in tumor suppressor genes. *npj Precision Oncology* 2020
- Rivas, M. A. *et al.* Human genomics. Effect of predicted protein-truncating genetic variants on the human transcriptome. *Science* 348, 666–669 (2015).
- Scotti, M. M. & Swanson, M. S. RNA mis-splicing in disease. *Nat. Rev. Genet.* 17,19–32 (2016).
- Richards, S. *et al.* Standards and guidelines for the interpretation of sequence variants: a joint consensus recommendation of the American College of Medical Genetics and Genomics and the Association for Molecular Pathology. *Genet. Med.* 17, 405–424 (2015).