

Clinician Management Resource for *MET*

This overview of clinical management guidelines is based on this patient's positive test result for a pathogenic or likely pathogenic variant in the *MET* gene. Unless otherwise stated, medical management guidelines used here are limited to those published in Hereditary renal cell carcinoma syndromes: diagnosis, surveillance and management¹. Please consult the referenced website link for complete details and further information.

Clinical correlation with the patient's past medical history, treatments, surgeries, and family history may lead to changes in clinical management decisions; therefore, other management recommendations may be considered. Genetic testing results and medical society guidelines help inform medical management decision but do not constitute formal recommendations. Discussions of medical management decisions and individualized treatment plans should be made in consultation between each patient and his or her healthcare provider and may change.

SURVEILLANCE CONSIDERATIONS ^{1,^}	AGE TO START	FREQUENCY
Hereditary papillary renal cell carcinoma		
Renal surveillance by MRI.	Individualized	Annually

[^] There is very limited information available regarding the most appropriate screening modalities for patients with germline *MET* gene mutations. The strategy for preventing morbidity and mortality in individuals at risk of inherited renal cell carcinoma is detection of early stage tumors which can then be removed.

1. Maher ER (2018) *World J Urol* 36:1891-1898. <https://doi.org/10.1007/s00345-018-2288-5>

Understanding Your Positive *MET* Genetic Test Result

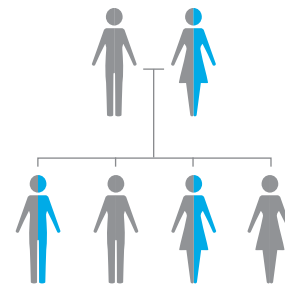
INFORMATION FOR PATIENTS WITH A PATHOGENIC OR LIKELY PATHOGENIC VARIANT

5 Things to know

1	Result	Your testing shows that you have a pathogenic or likely pathogenic variant in the <i>MET</i> gene.
2	Hereditary papillary renal carcinoma	People with a pathogenic or likely pathogenic variant in this gene have hereditary papillary renal carcinoma (HPRC).
3	Cancer risks	You have an increased chance to develop kidney (renal) cancer.
4	What you can do	Risk management decisions are very personal. There are options to detect cancer early or lower the risk to develop cancer. It is important to discuss these options with your healthcare provider and decide on a plan that works for you.
5	Family	Family members may also be at risk – they can be tested for the pathogenic or likely pathogenic <i>MET</i> variant that was found in you. It is recommended that you share this information with your family members so they can learn more and discuss with their healthcare providers.

MET in the Family

There is a 50/50 random chance to pass on the pathogenic or likely pathogenic *MET* variant to each of your children.



■ Has a pathogenic or likely pathogenic *MET* variant ■ No pathogenic or likely pathogenic *MET* variant

RESOURCES

- American Cancer Society [cancer.org](https://www.cancer.org)
- National Society of Genetic Counselors [nsgc.org](https://www.nsgc.org)
- Canadian Association of Genetic Counsellors [cagc-accg.ca](https://www.cagc-accg.ca)

Please discuss this information with your healthcare provider. The cancer genetics field is continuously evolving, so updates related to your *MET* result, medical recommendations, and/or potential treatments may be available over time. This information is not meant to replace a discussion with a healthcare provider, and should not be considered or interpreted as medical advice.