

Kidney Tumors: The Interplay Between Histopathology and Molecular Studies



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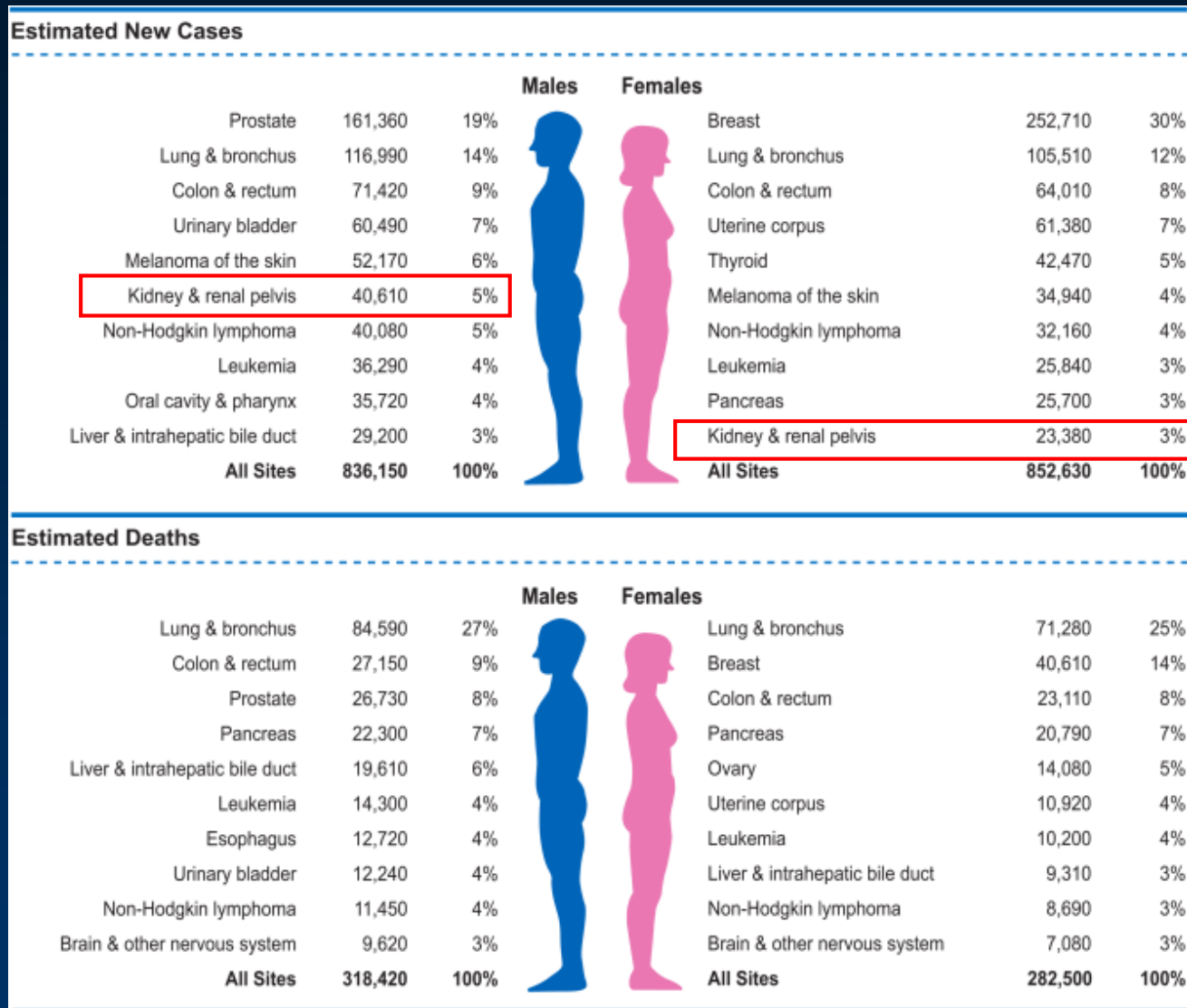
Disclosures

- I am not an oncologist
- I am not a nephrologist
- I am a pathologist

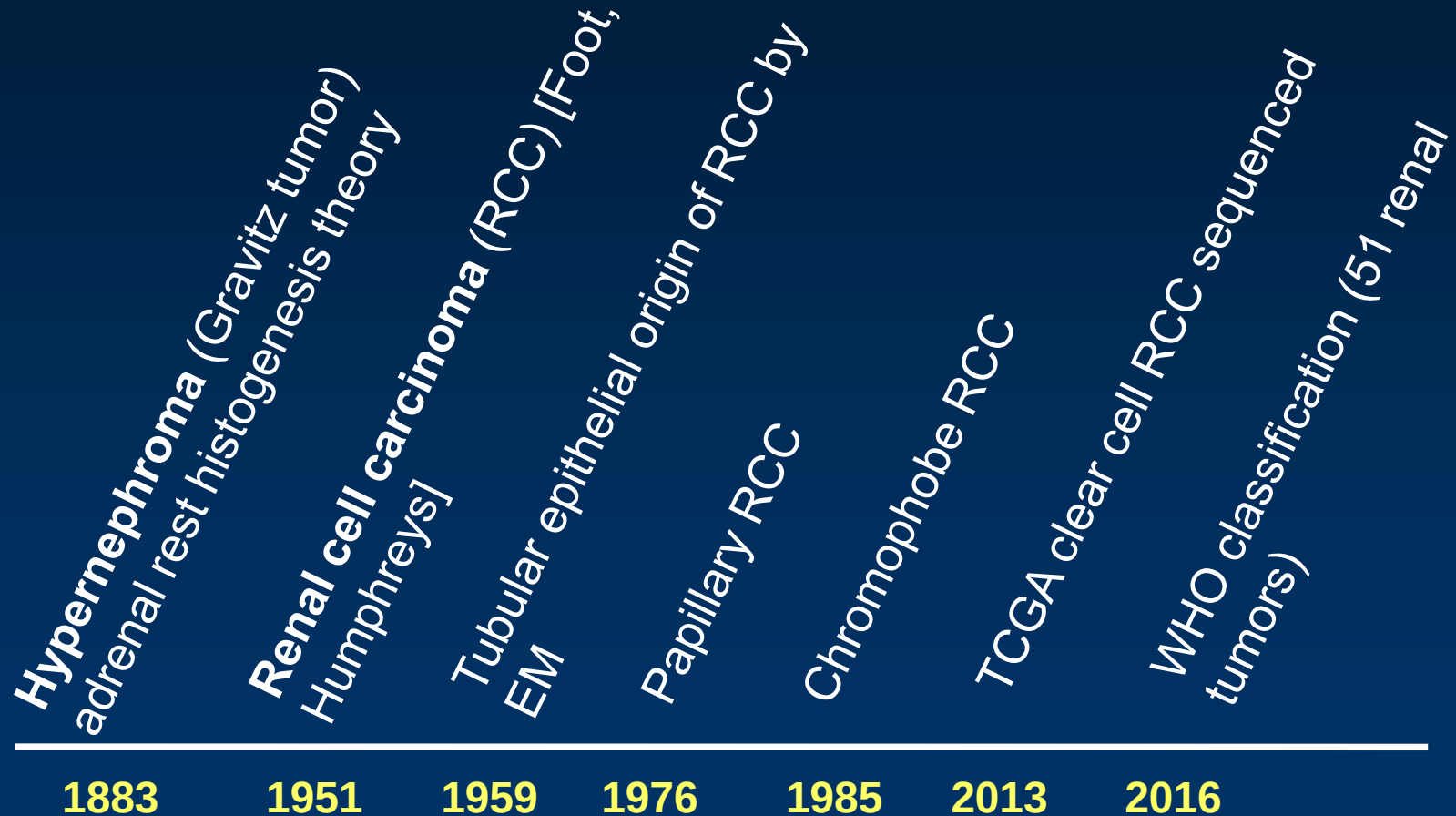
Outline

- Definition and classification of renal cell carcinoma (RCC)
- Histology and molecular pathology of main histologic subtypes of RCC:
 - Clear cell RCC
 - Papillary RCC
 - Chromophobe RCC
- New subtypes with distinct morphology and molecular alterations
 - HLRCC-associated RCC
 - SDH-deficient RCC

Estimated New Cancer Cases and Deaths, by Sex, United States, 2017



Classification of Kidney Tumors



2016 WHO Classification of Tumours of Kidney

16
(85%)

Renal cell tumors – originate from renal tubular epithelium

Renal cell tumours

Clear cell renal cell carcinoma	8310/3
Multilocular cystic renal neoplasm of low malignant potential	8316/1*
Papillary renal cell carcinoma	8260/3
Hereditary leiomyomatosis and renal cell carcinoma-associated renal cell carcinoma	8311/3*
Chromophobe renal cell carcinoma	8317/3
Collecting duct carcinoma	8319/3
Renal medullary carcinoma	8510/3*
MiT family translocation renal cell carcinomas	8311/3*
Succinate dehydrogenase-deficient renal carcinoma	8311/3
Mucinous tubular and spindle cell carcinoma	8480/3*
Tubulocystic renal cell carcinoma	8316/3*
Acquired cystic disease-associated renal cell carcinoma	8316/3
Clear cell papillary renal cell carcinoma	8323/1
Renal cell carcinoma, unclassified	8312/3
Papillary adenoma	8260/0
Oncocytoma	8290/0

Metanephric tumours

Metanephric adenoma	8325/0
Metanephric adenofibroma	9013/0
Metanephric stromal tumour	8935/1

Nephroblastic and cystic tumours occurring mainly in children

Nephrogenic rests	
Nephroblastoma	8960/3
Cystic partially differentiated nephroblastoma	8959/1
Paediatric cystic nephroma	8959/0

Mesenchymal tumours

Mesenchymal tumours occurring mainly in children

Clear cell sarcoma	8964/3
Rhabdoid tumour	8963/3
Congenital mesoblastic nephroma	8960/1
Ossifying renal tumour of infancy	8967/0

Mesenchymal tumours occurring mainly in adults

Leiomyosarcoma	8890/3
Angiosarcoma	9120/3
Rhabdomyosarcoma	8900/3
Osteosarcoma	9180/3
Synovial sarcoma	9040/3
Ewing sarcoma	9364/3
Angiomyolipoma	8860/0
Epithelioid angiomyolipoma	8860/1*
Leiomyoma	8890/0
Haemangioma	9120/0
Lymphangioma	9170/0
Haemangioblastoma	9161/1
Juxtaglomerular cell tumour	8361/0
Renomedullary interstitial cell tumour	8966/0
Schwannoma	9560/0
Solitary fibrous tumour	8815/1

Mixed epithelial and stromal tumour family

Cystic nephroma	8959/0
Mixed epithelial and stromal tumour	8959/0

Neuroendocrine tumours

Well-differentiated neuroendocrine tumour	8240/3
Large cell neuroendocrine carcinoma	8013/3
Small cell neuroendocrine carcinoma	8041/3
Phaeochromocytoma	8700/0

Miscellaneous tumours

Renal haematopoietic neoplasms	
Germ cell tumours	

Metastatic tumours

The morphology codes are from the International Classification of Diseases for Oncology (ICD-O) [917A]. Behaviour is coded /0 for benign tumours; /1 for unspecified, borderline, or uncertain behaviour; /2 for carcinoma in situ and grade III intraepithelial neoplasia; and /3 for malignant tumours.

The classification is modified from the previous WHO classification [756A], taking into account changes in our understanding of these lesions.

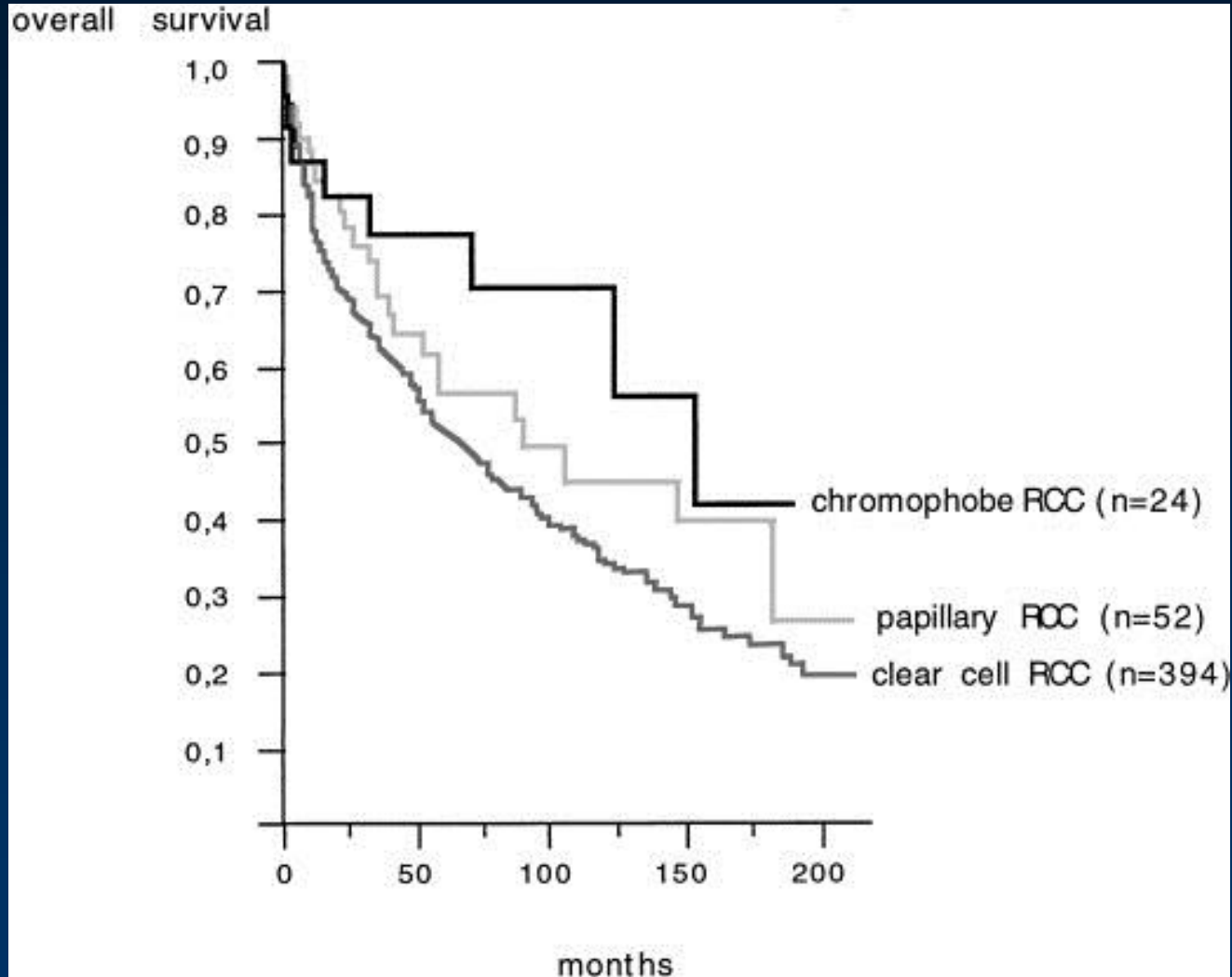
*New code approved by the IARC/WHO Committee for ICD-O.

Most Common Histologic Types of RCC

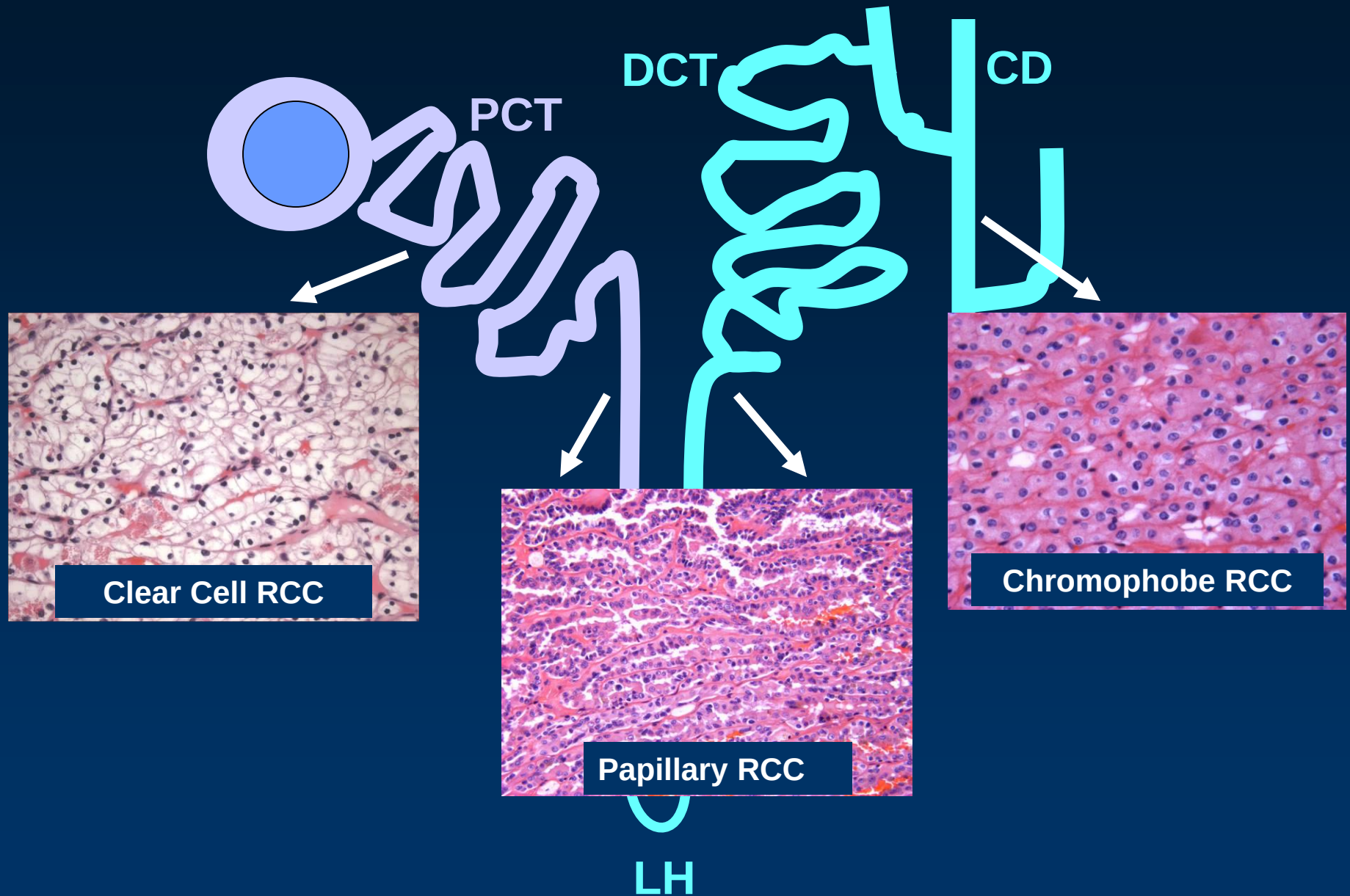
- Clear cell renal cell carcinoma **70%**
- Multilocular cystic renal neoplasm of low malignant potential
- Papillary renal cell carcinoma **15%**
- Hereditary leiomyomatosis and renal cell carcinoma-associated renal cell carcinoma
- Chromophobe renal cell carcinoma **5%**
- Collecting duct carcinoma
- Renal medullary carcinoma
- MiT Family translocation renal cell carcinomas
- Succinate dehydrogenase-deficient renal cell carcinoma
- Mucinous tubular and spindle cell carcinoma
- Tubulocystic renal cell carcinoma
- Acquired cystic disease associated renal cell carcinoma
- Clear cell papillary renal cell carcinoma
- Renal cell carcinoma, unclassified
- Papillary adenoma
- Oncocytoma

Overall Survival and Histologic Tumor Type in RCC

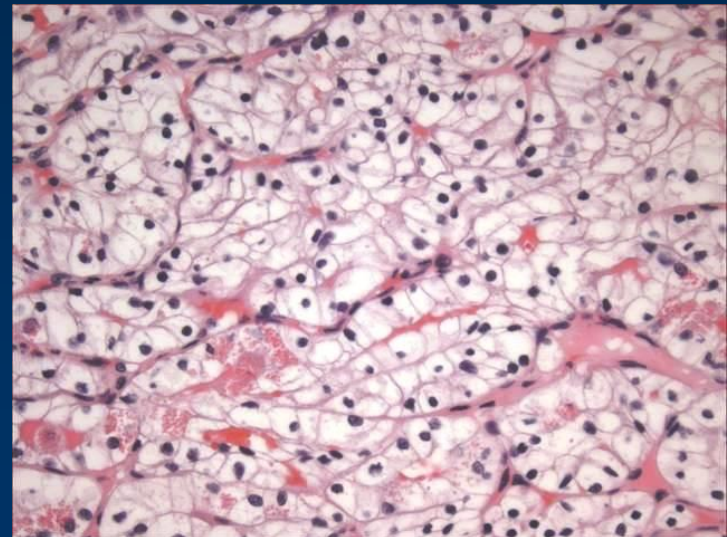
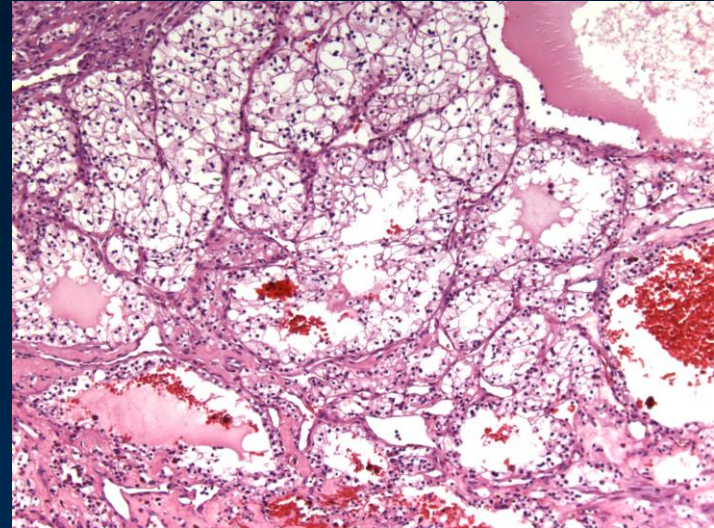
A Swiss experience with 588 tumors



Histogenesis of Renal Cell Carcinoma

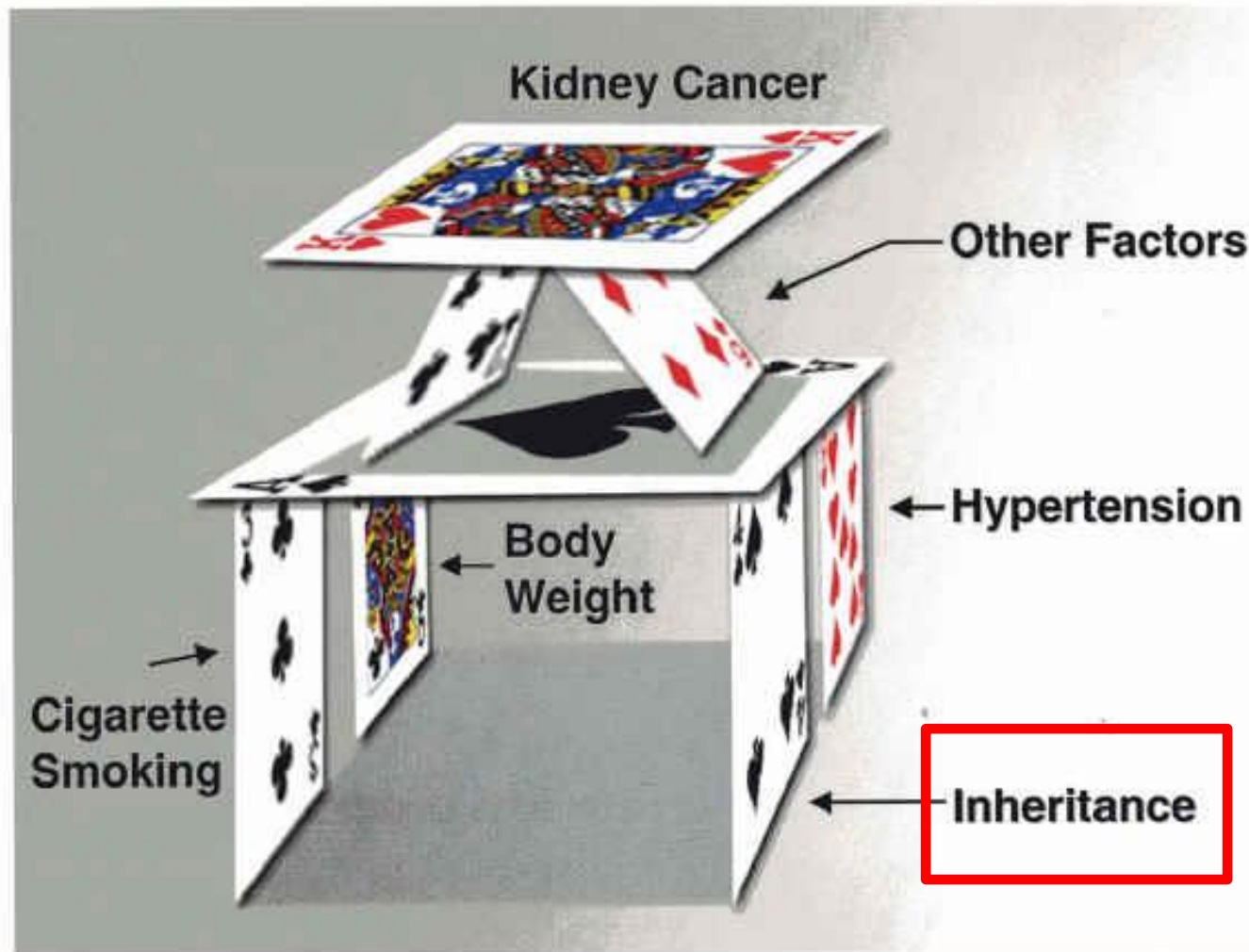


Clear Cell RCC



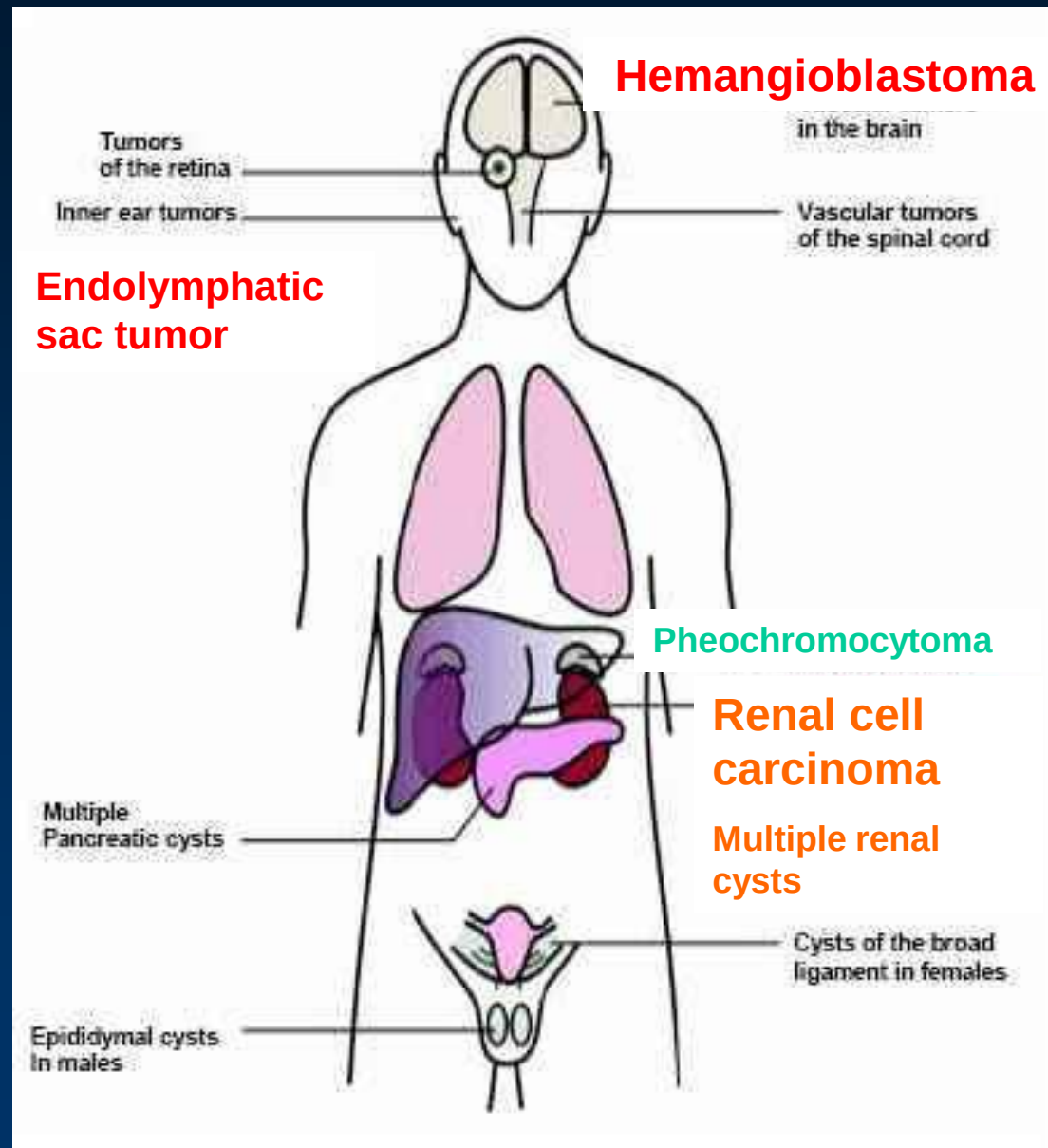
Clear cytoplasm – lipid, glycogen
Prominent blood vessels

Genetically Complex Disease- Kidney Cancer

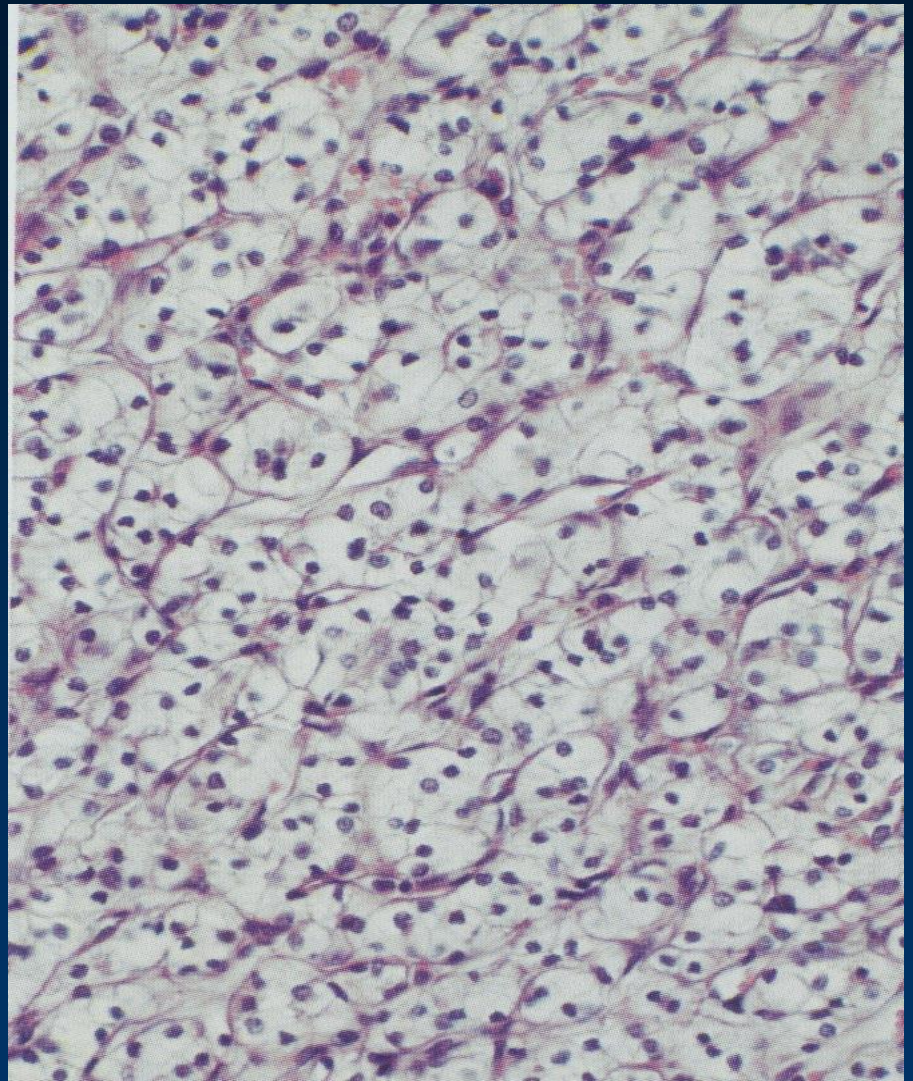


Multiple Clear Cell RCC in Von Hippel-Lindau Disease

- Autosomal dominant heritable neoplasia syndrome
- Multiple tumors and cysts
- Retinal or CNS (cerebellar) **hemangioblastomas**
- Renal cysts (up to 1000)
- **Clear cell RCC** (up to 600) in 40-60%



Von Hippel-Lindau Disease



Multiple renal cysts and clear cell RCCs

From Clear Cells to *VHL* Gene

Clear Cell RCC

Chromosomes

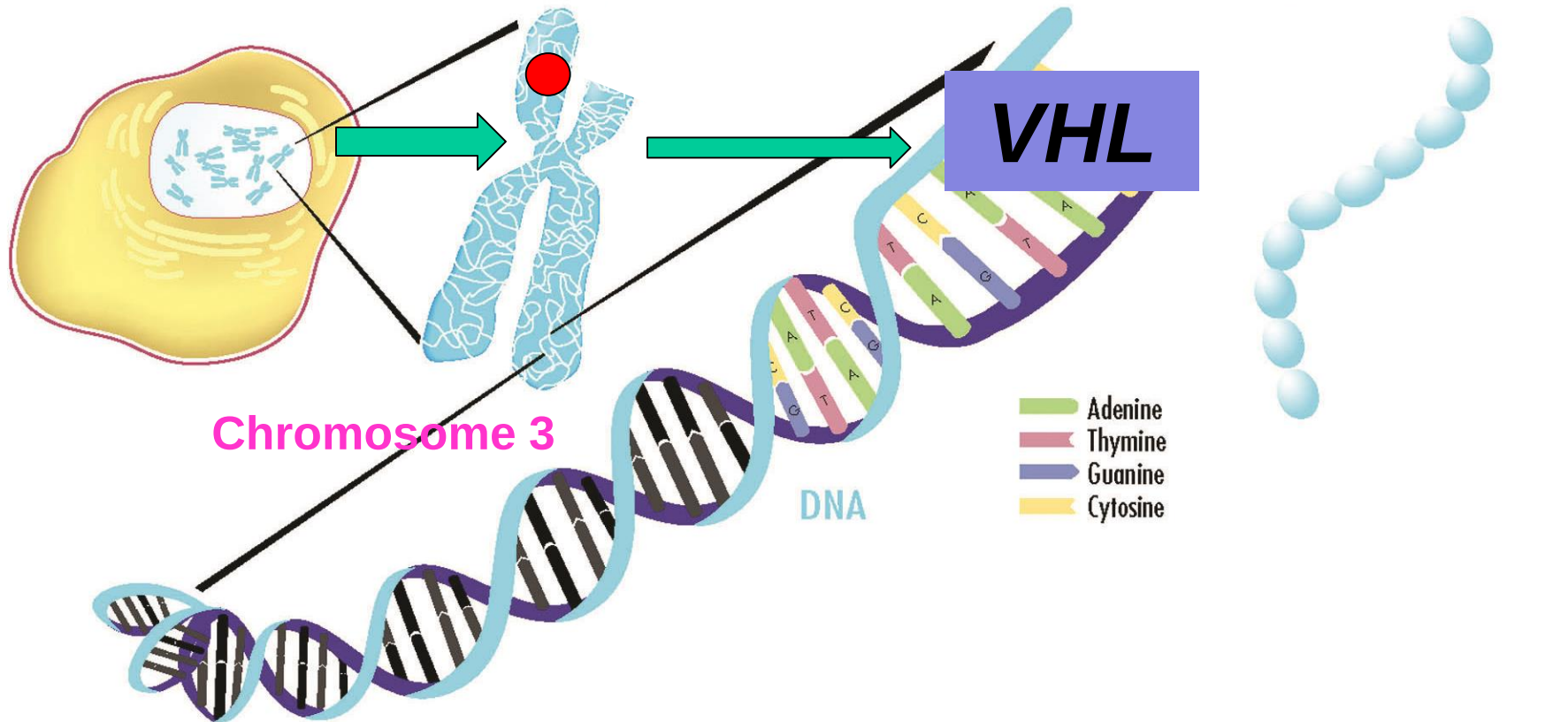
Each chromosome is composed of one large continuous DNA molecule.

Gene

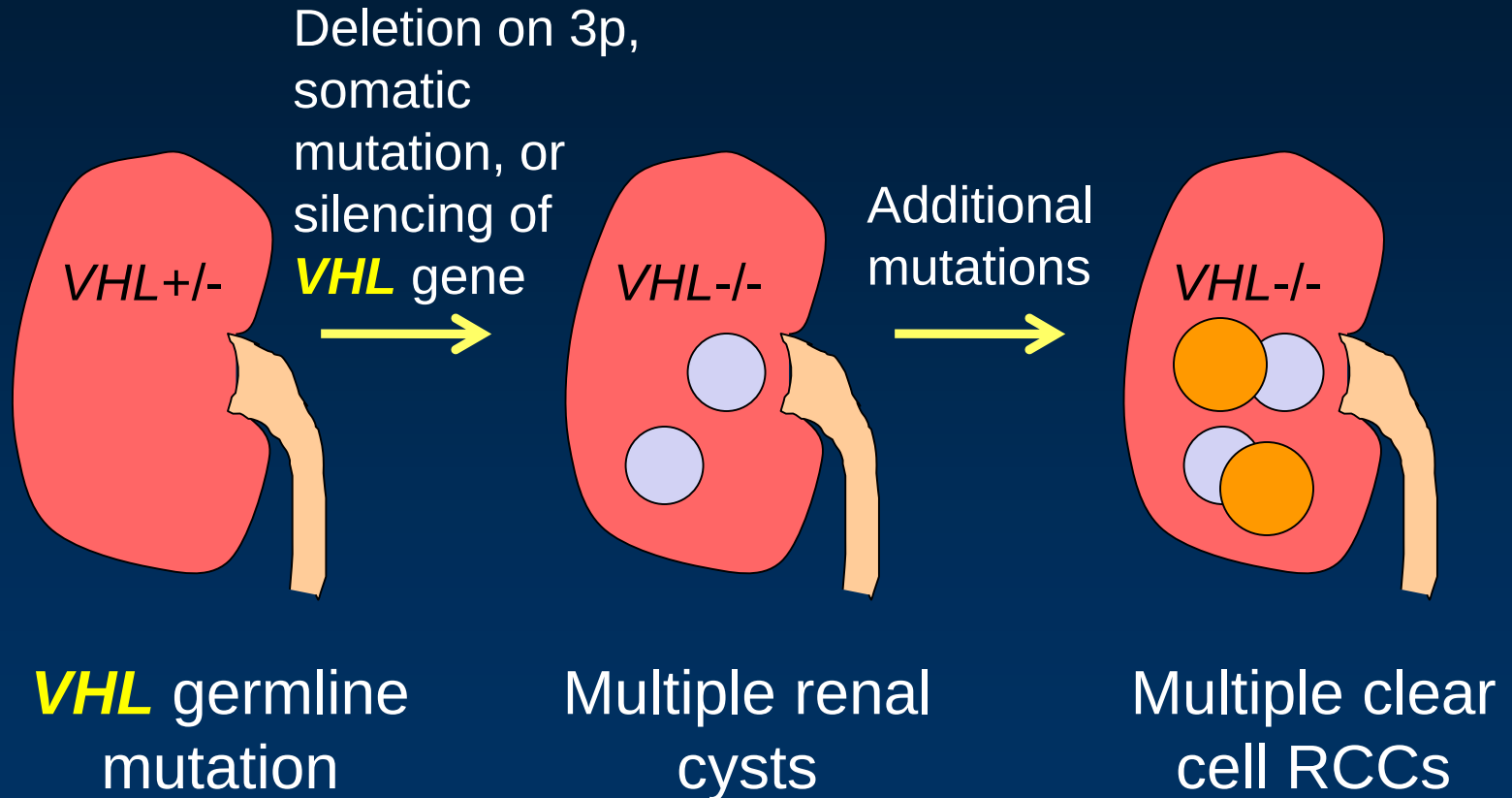
A gene is a segment of DNA that encodes a protein product.

Protein

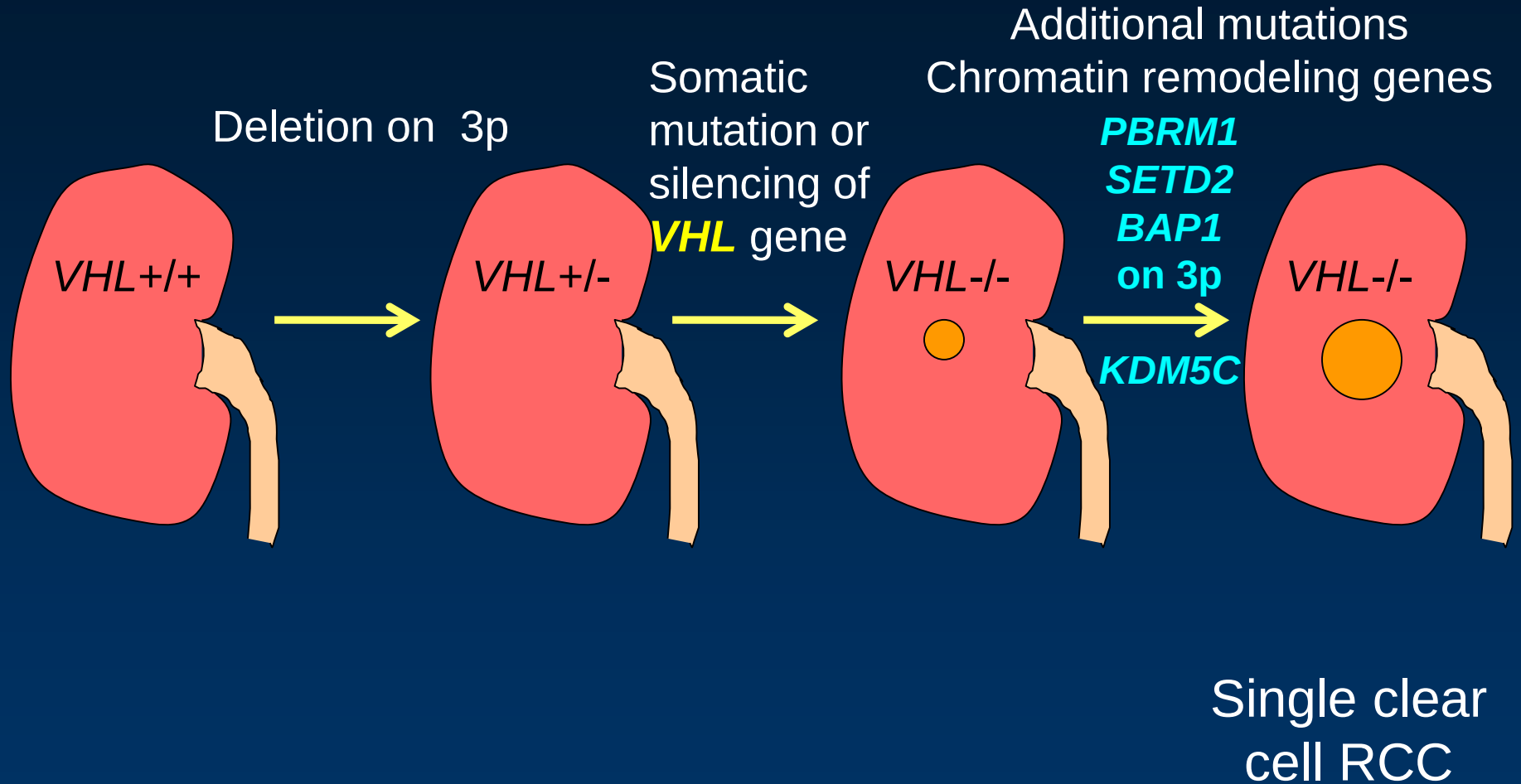
A protein is a complex organic compound composed of hundreds or thousands of amino acids.



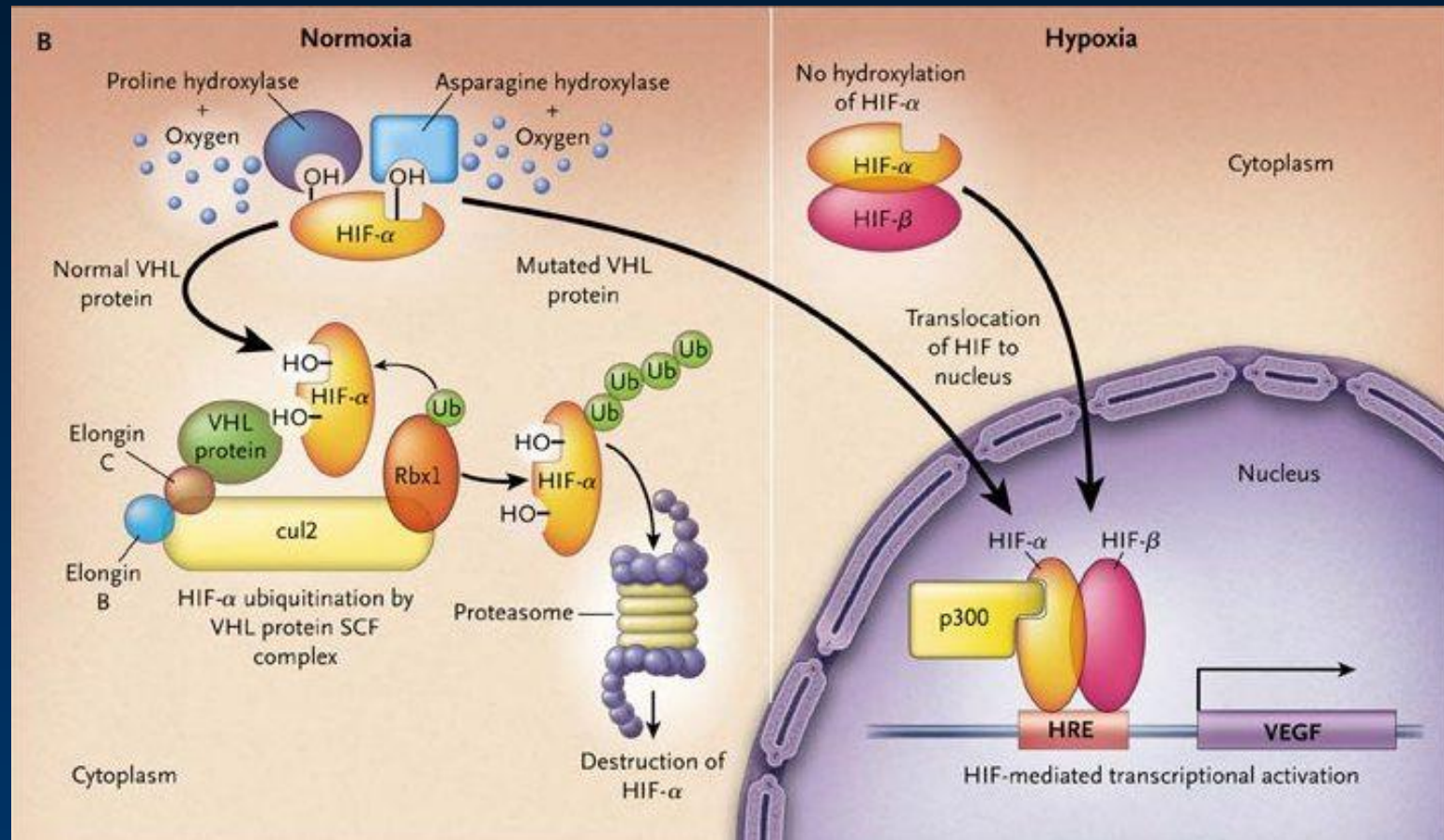
Von Hippel-Lindau Disease is Caused by Germline Mutations in the *VHL* Gene (3p25.3)



VHL Gene is Inactivated in Sporadic Clear Cell RCC

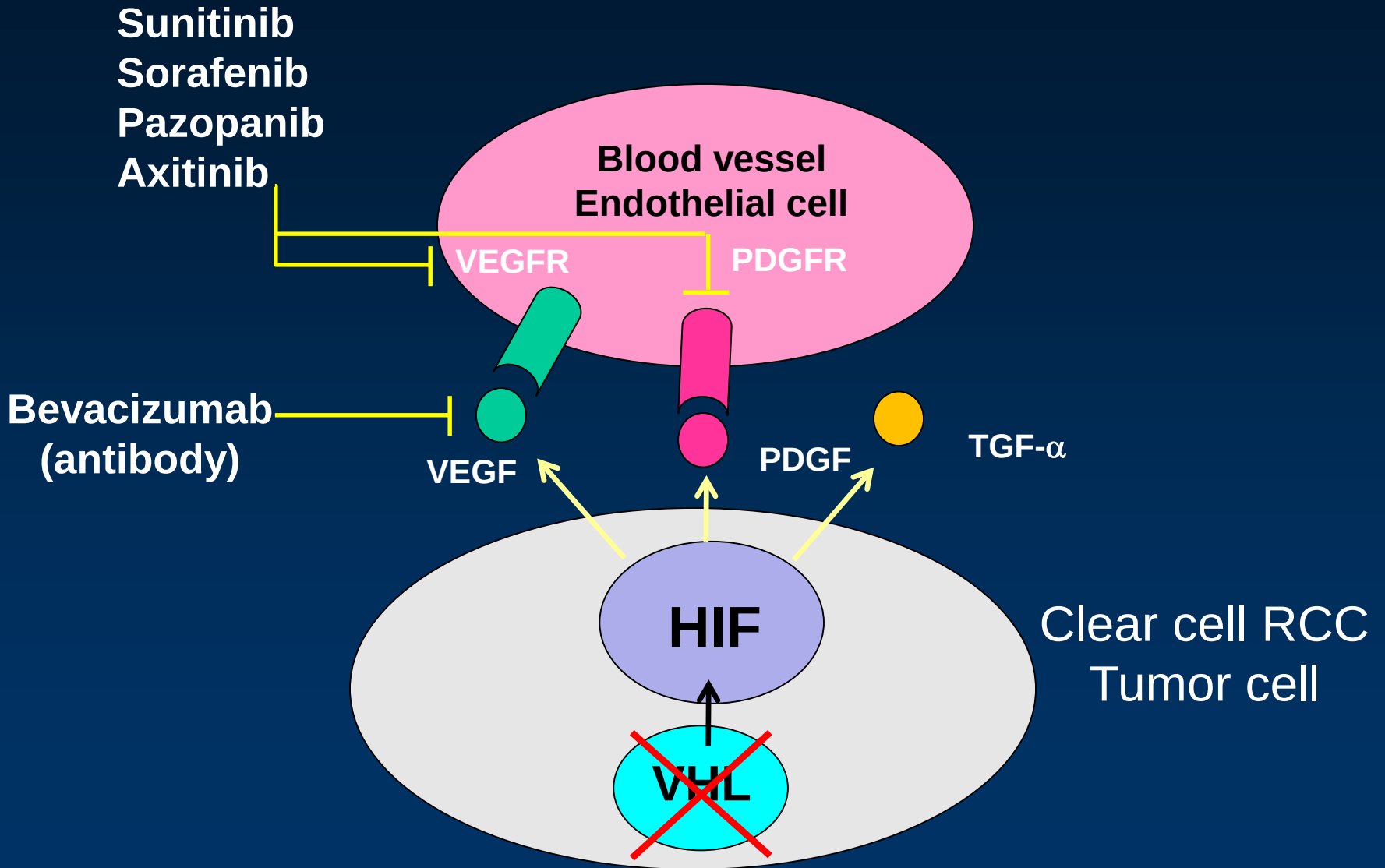


Abnormal VHL Protein Causes Accumulation of Hypoxia Inducible Factor- α (HIF- α)



HIF- α induces transcription of vascular endothelial growth factor (**VEGF**) involved in angiogenesis , platelet derived growth factor (**PDGF**) and transforming growth factor- α (**TGF- α**) involved in cell growth

Targeting VHL/HIF in Clear Cell RCC

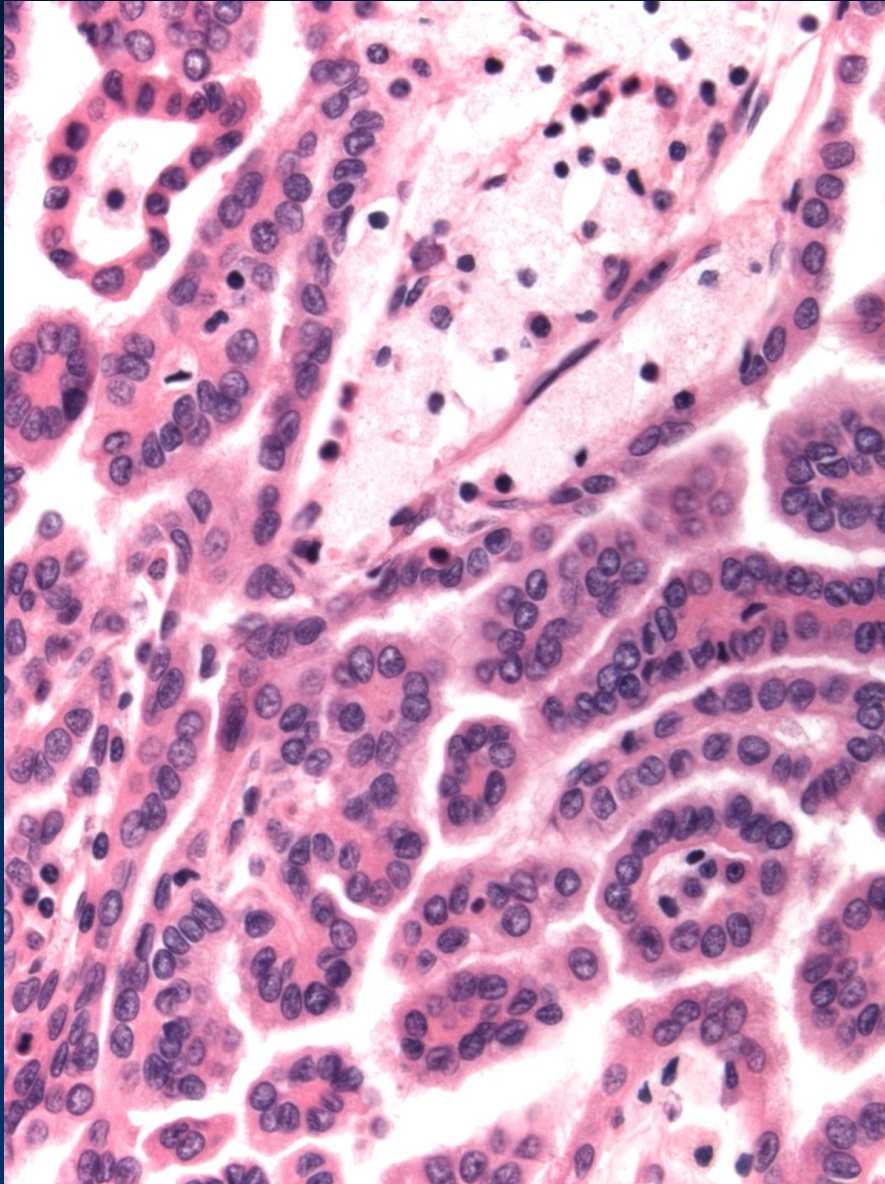


Papillary RCC

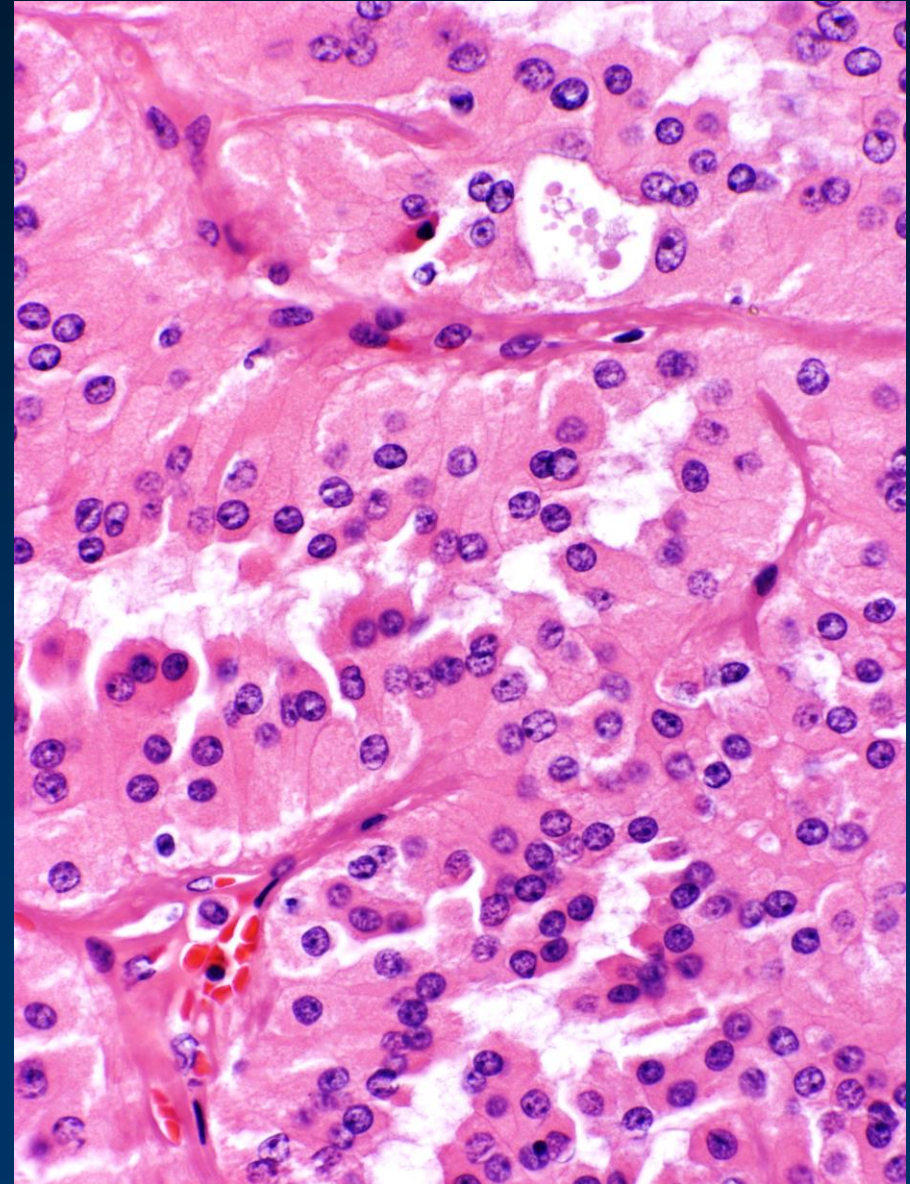
- 15% of RCC
- Two histologic subtypes:
 - Type 1
 - Type 2
- Subset with mixed histology



Papillary RCC Type 1

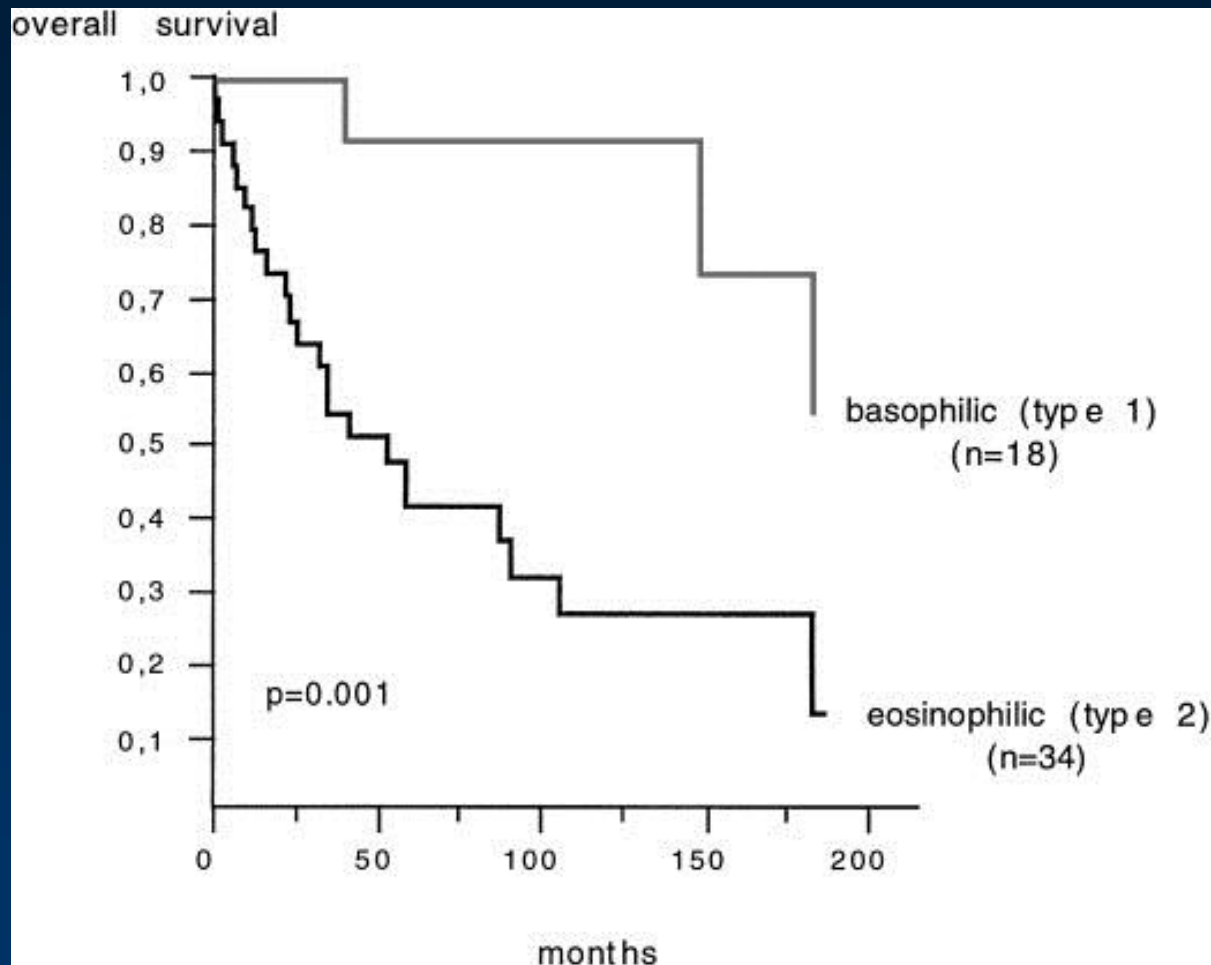


Papillary RCC Type 2

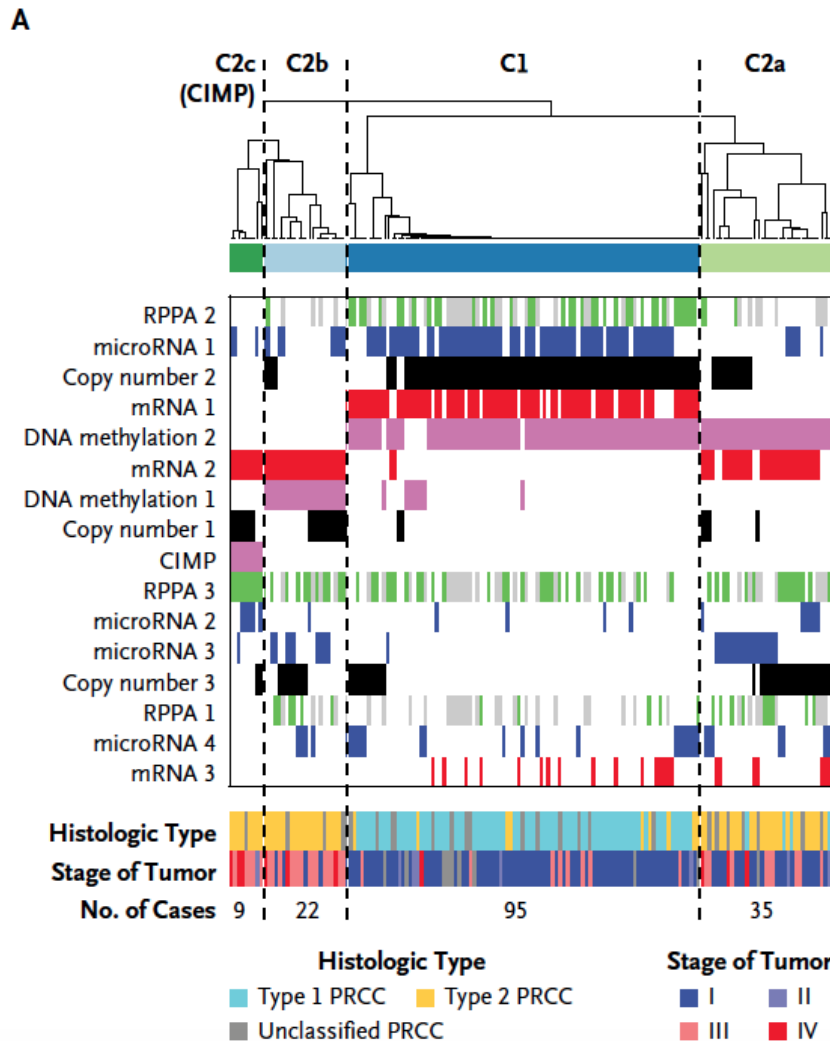


Overall Survival in Papillary RCC According to Papillary Subtype

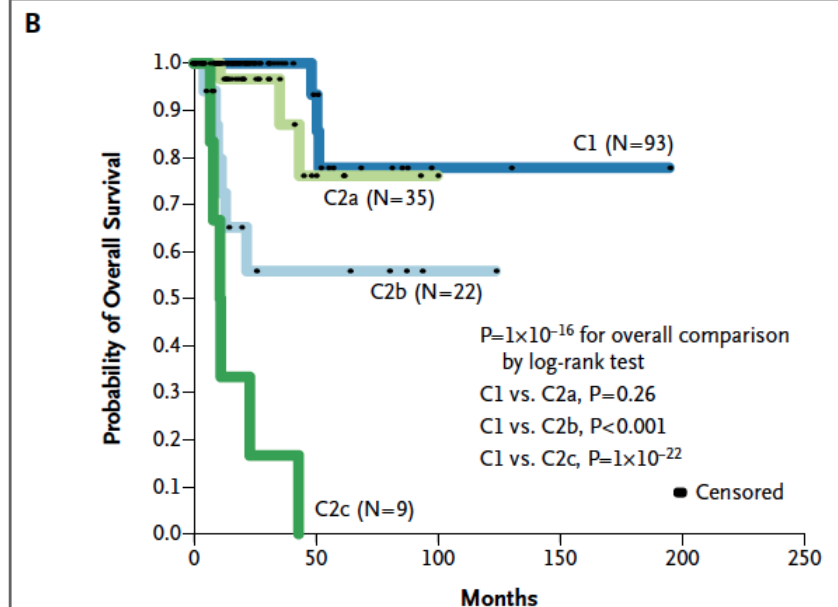
A Swiss experience with 588 tumors



Multiplatform-Based Subtype Discovery in 161 Papillary RCC



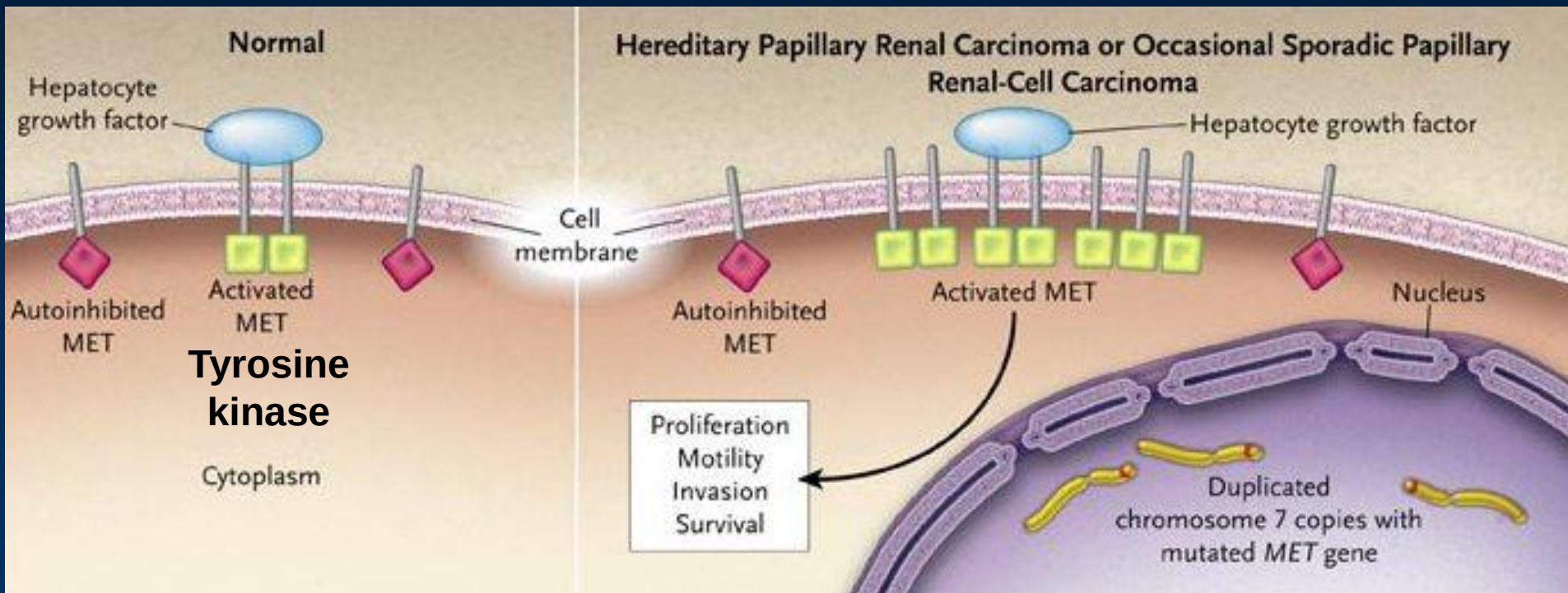
Type 2 papillary RCC – at least 3 different entities genetically



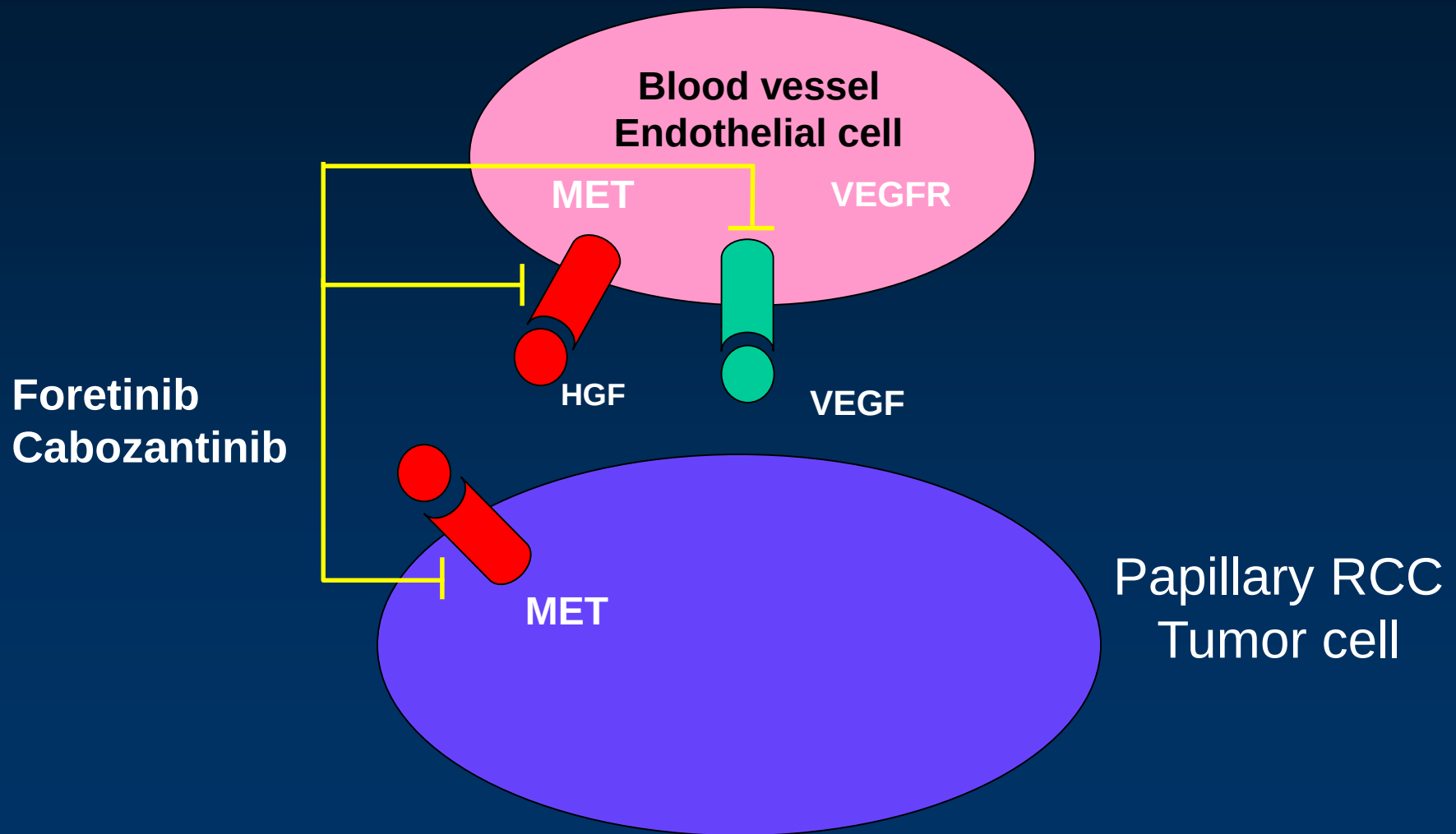
The Cancer Genome Atlas Research Network.

N Engl J Med 2016, 374:135-45.

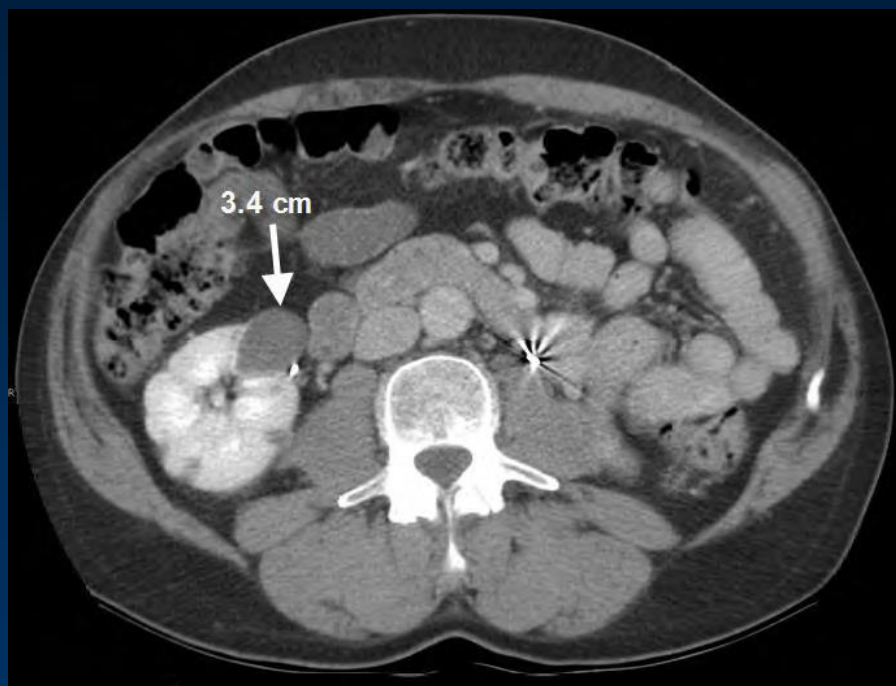
Activation Mutations in *MET* Oncogene (7q31) in Type 1 Papillary RCC



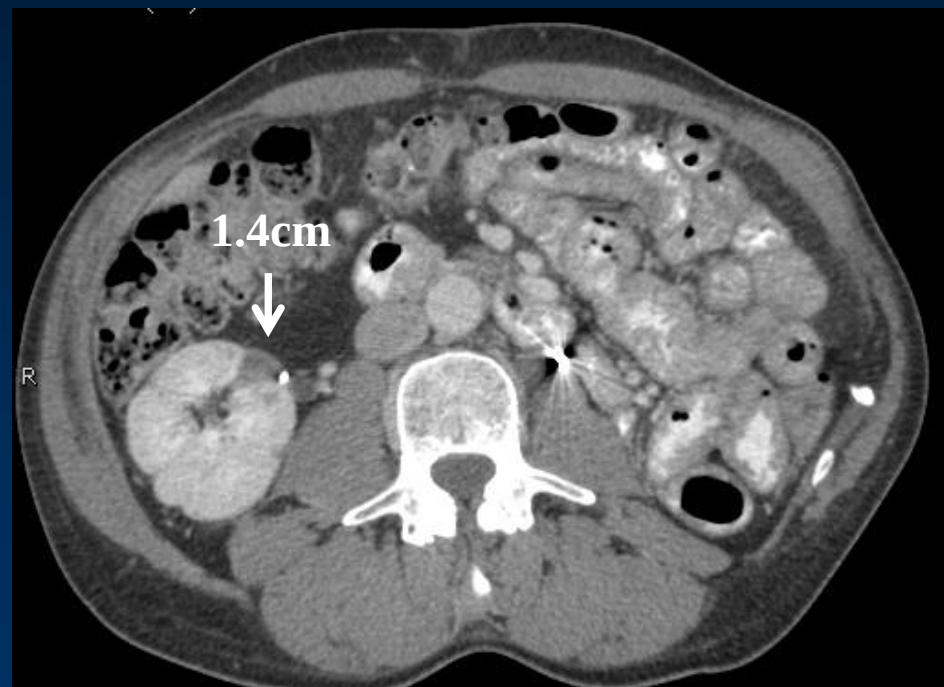
Targeted Therapies in Type 1 Papillary RCC with MET Inhibitors



Regression of Papillary RCC Treated with MET Inhibitor Foretinib

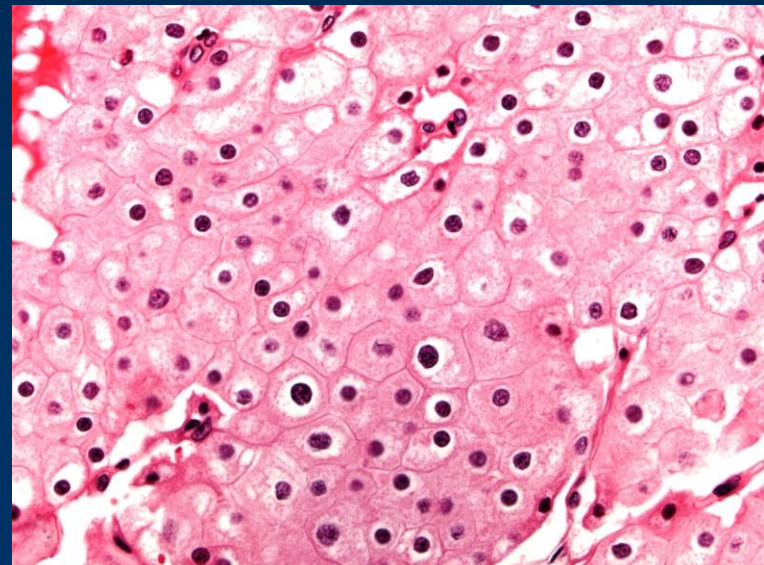
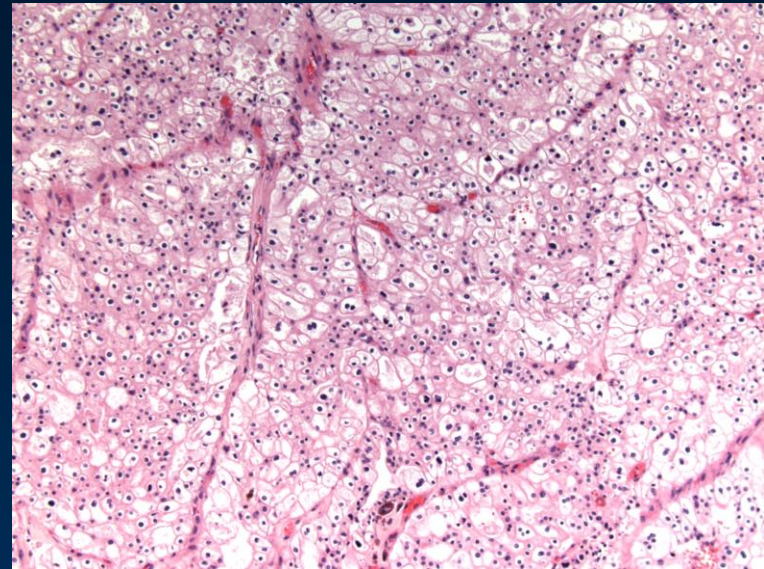


Pre-Treatment



Following 49 cycles of
therapy

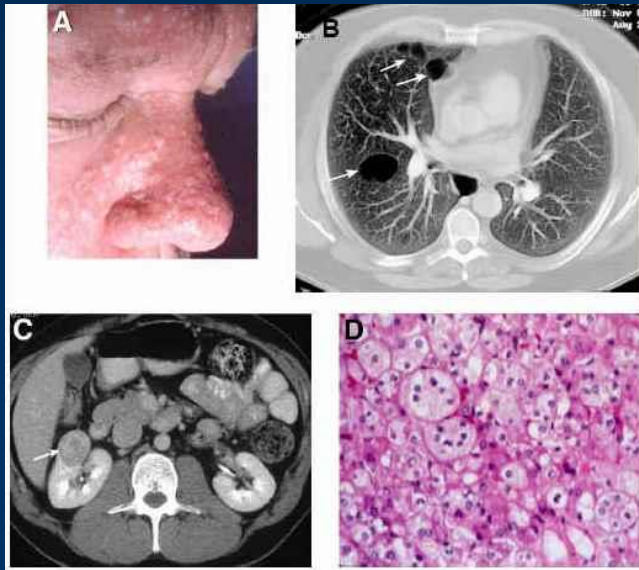
Chromophobe RCC



Chromophobe RCC

Inherited in Birt-Hogg-Dube syndrome

- Folliculin (*FLCN*) mutation



Sporadic

- Folliculin (*FLCN*) mutation rare
- Hypodiploid DNA: -1,-2,-6,-**10**,-13,-**17**,-21
(Multiple chromosomal losses)
- TP53*** mutation (chr **17**)
- PTEN*** mutation (chr **10**)

New RCC Subtypes with Molecular Alterations and Distinct Histology

- Clear cell renal cell carcinoma
- Multilocular cystic renal neoplasm of low malignant potential
- Papillary renal cell carcinoma
- Hereditary leiomyomatosis and renal cell carcinoma-associated renal cell carcinoma
- Chromophobe renal cell carcinoma
- Collecting duct carcinoma
- Renal medullary carcinoma
- MiT Family translocation renal cell carcinomas
- Succinate dehydrogenase-deficient renal cell carcinoma
- Mucinous tubular and spindle cell carcinoma
- Tubulocystic renal cell carcinoma
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Hereditary Leiomyomatosis and Renal Cell Carcinoma (HLRCC)-associated Renal Cell Carcinoma

- Multiple cutaneous and uterine leiomyomas



HLRCC-associated RCC

- RCC (1/3 of patients)
 - Solitary
 - **Aggressive**
- Germline mutation in *Fumarate Hydratase* (FH) gene on 1q42
- FH is a Krebs cycle enzyme
- Patients should undergo formal genetic testing

From *FH* Gene to Characteristic Histopathology

HLRCC-associated RCC

Chromosomes

Each chromosome is composed of one large continuous DNA molecule.

Gene

A gene is a segment of DNA that encodes a protein product.

Protein

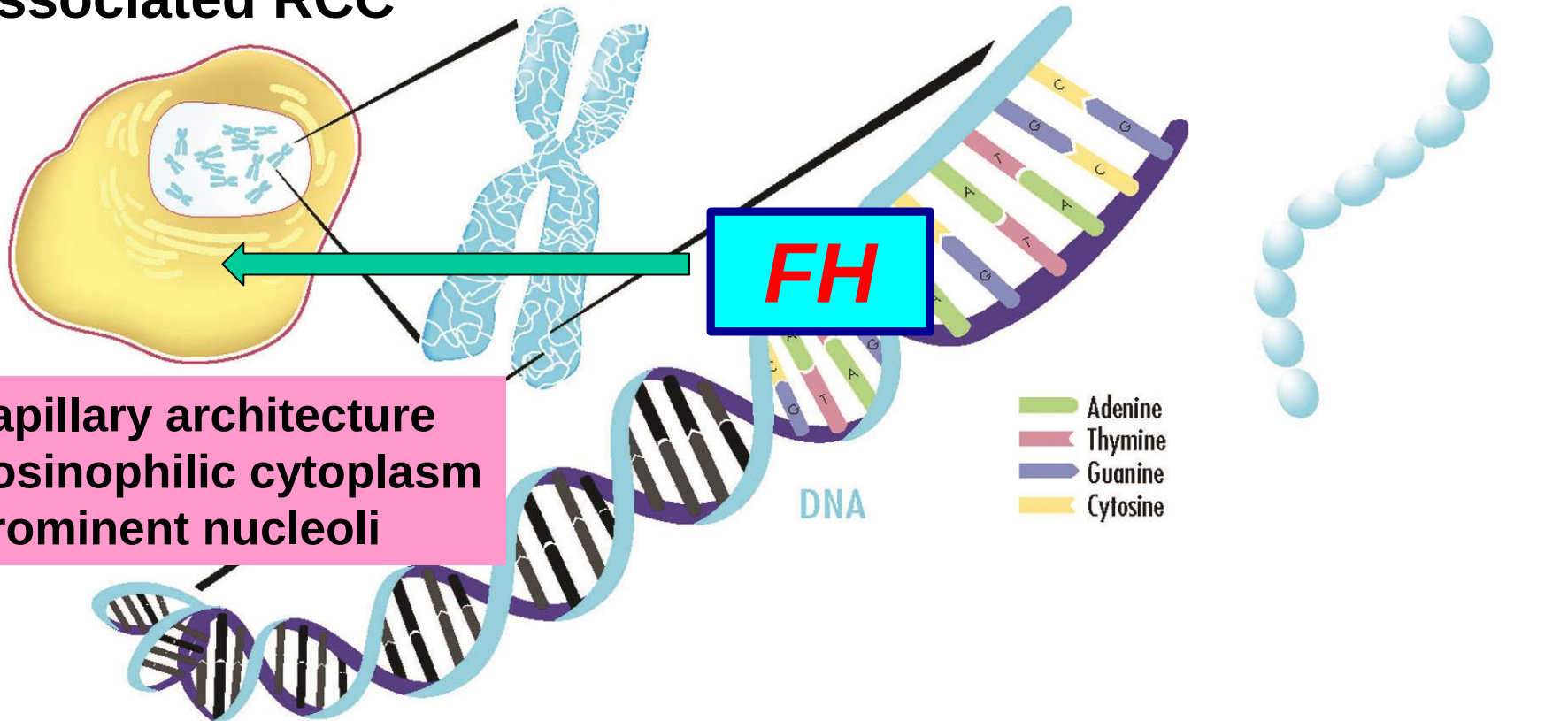
A protein is a complex organic compound composed of hundreds or thousands of amino acids.

FH

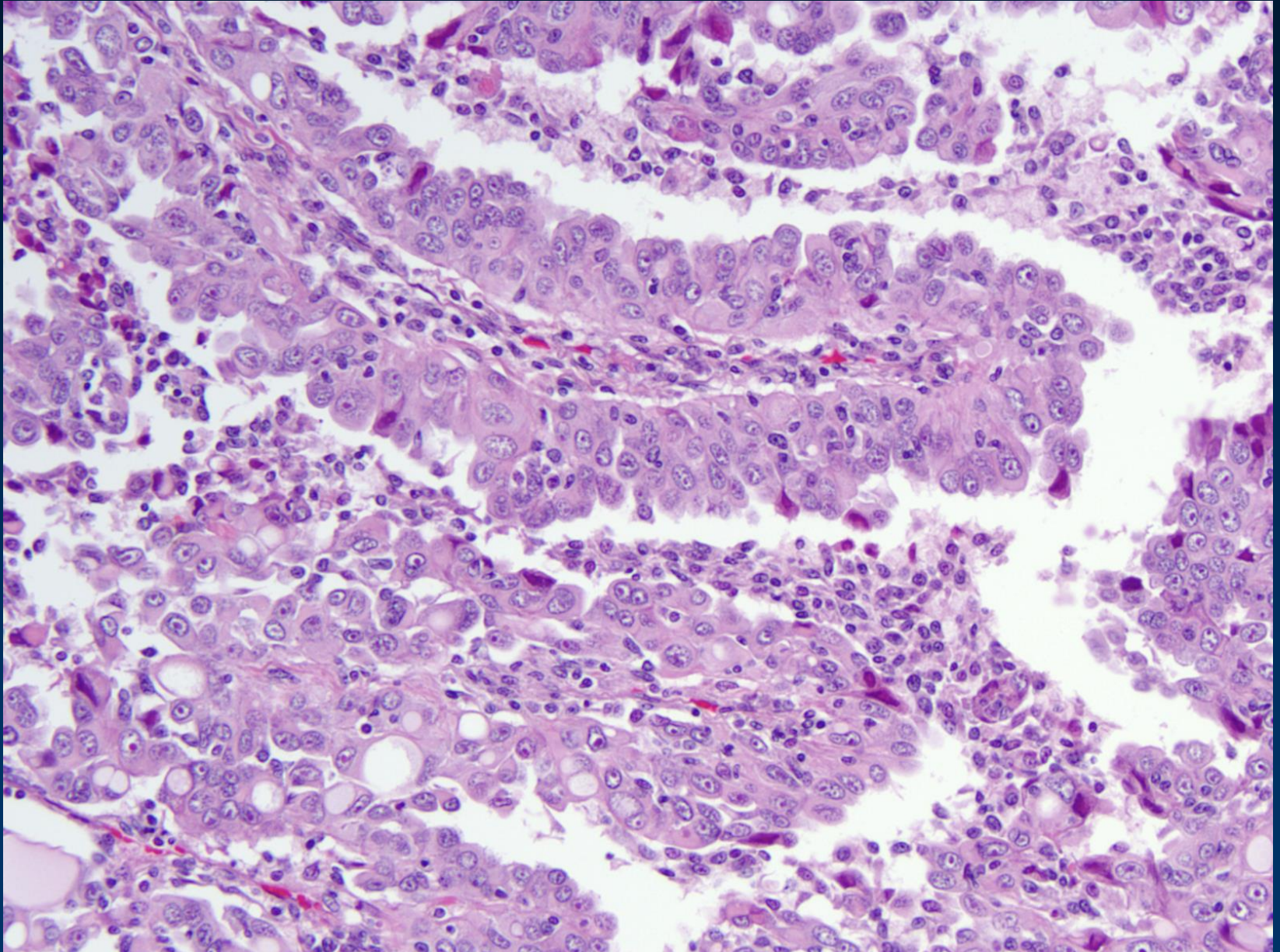
Papillary architecture
Eosinophilic cytoplasm
Prominent nucleoli

Adenine
Thymine
Guanine
Cytosine

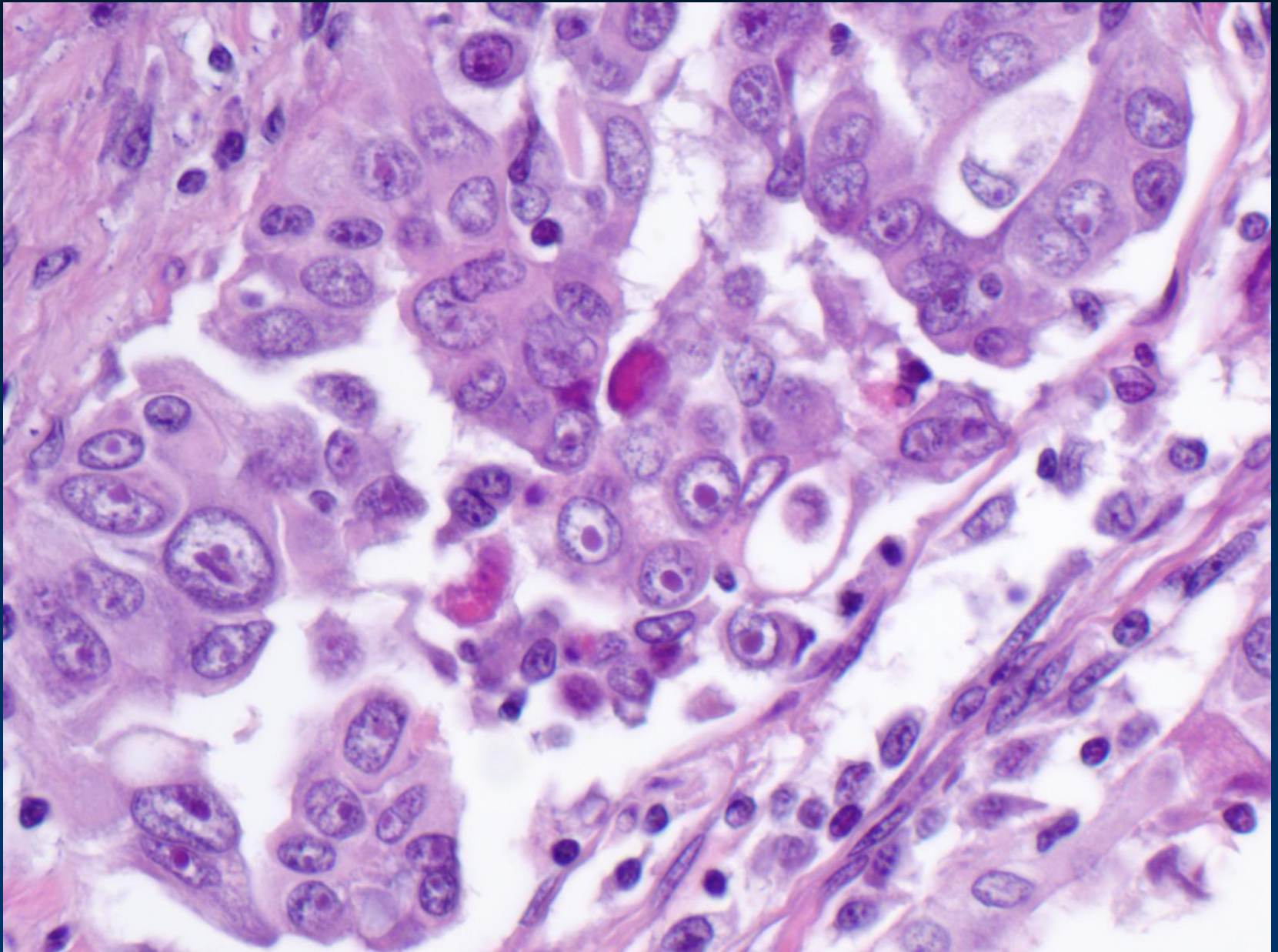
DNA



HLRCC-associated RCC



HLRCC-associated RCC



Succinate Dehydrogenase (SDH)-deficient RCC

- First described in patients with *SDHB* germline mutations
- SDH is a Krebs cycle enzyme
- Personal/family history of
 - Pheochromocytoma/Paraganglioma
 - Gastrointestinal stromal tumor (GIST)
- Patients with *SDH* mutation have 14% lifetime risk of RCC

Succinate Dehydrogenase (SDH)- deficient RCC

- Rare – 0.05%-0.2% of all RCC
- Typically young adults
 - Median age 35 yrs
- Usually indolent
- Patients should undergo formal genetic testing

From *SDH* Gene to Characteristic Histopathology

SDH-deficient RCC

Low-grade
Oncocytic cytoplasm
Cytoplasmic inclusions

Chromosomes

Each chromosome is composed of one large continuous DNA molecule.

Gene

A gene is a segment of DNA that encodes a protein product.

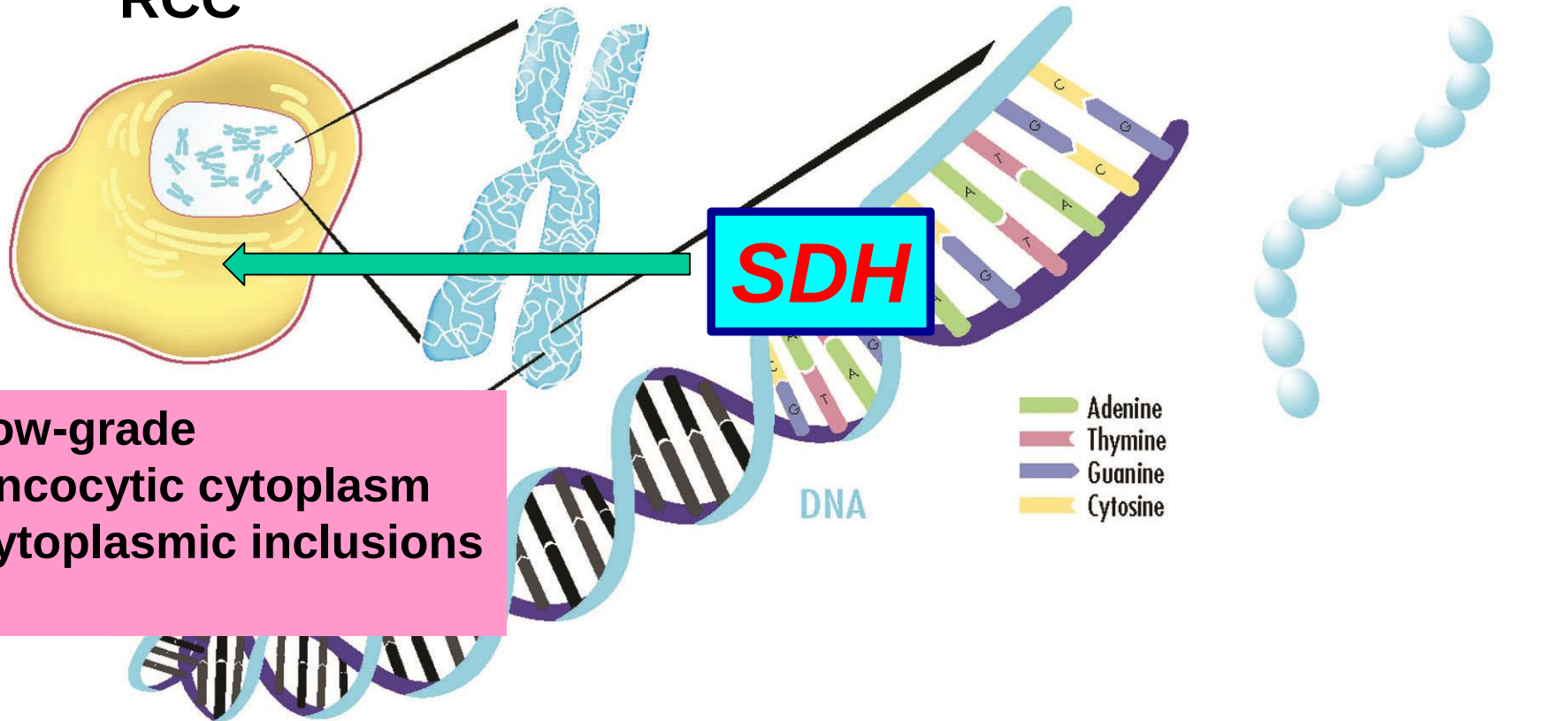
Protein

A protein is a complex organic compound composed of hundreds or thousands of amino acids.

SDH

DNA

Adenine
Thymine
Guanine
Cytosine



Succinate Dehydrogenase (SDH)-deficient Renal Carcinoma: A Morphologically Distinct Entity A Clinicopathologic Series of 36 Tumors From 27 Patients

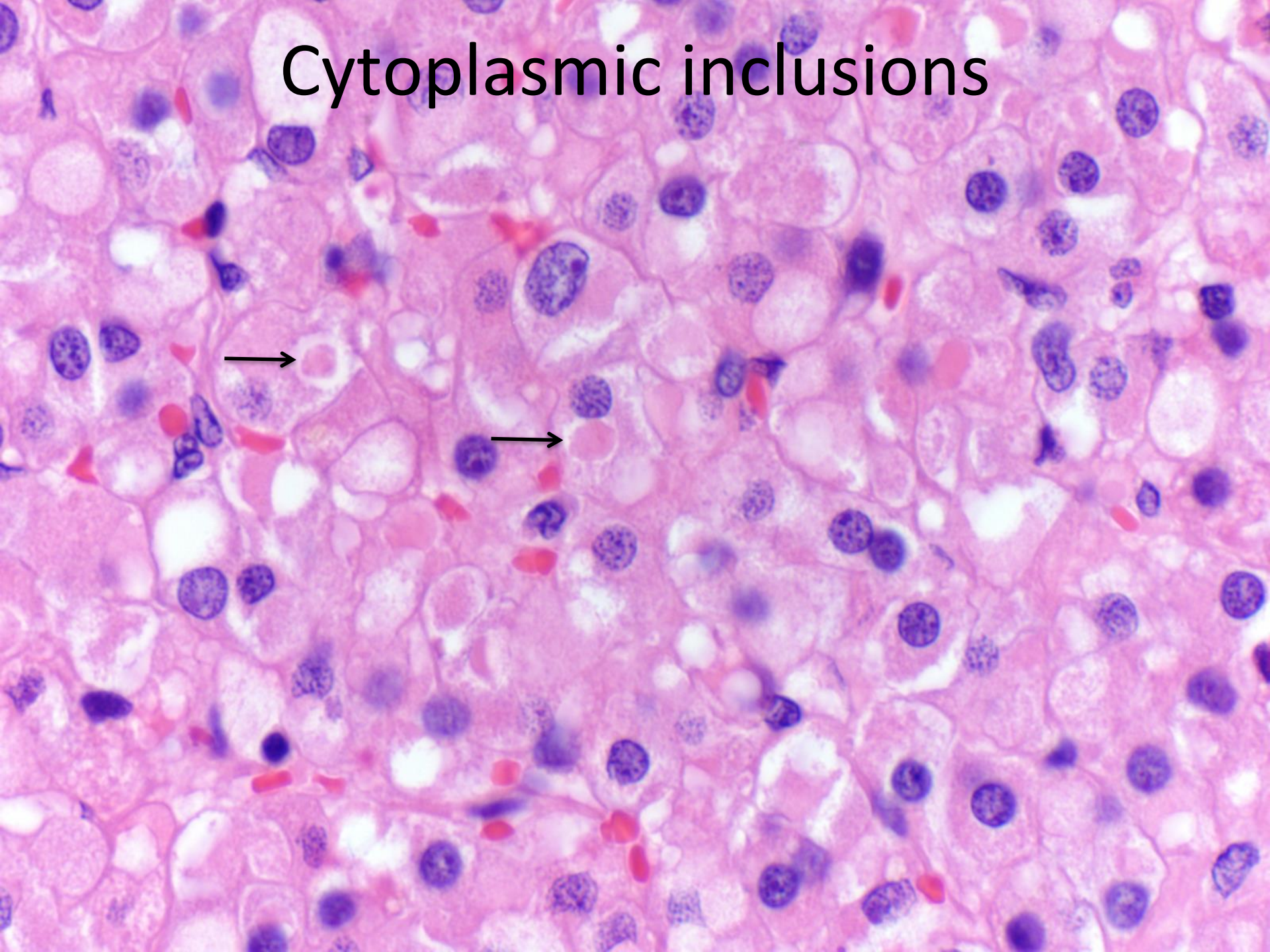
Anthony J. Gill, MD, FRCPA,*†‡ Ondrej Hes, MD,§ Thomas Papathomas, MD,||
Monika Šedivcová, MSc,§ Puay Hoon Tan, MD,¶ Abbas Agaimy, MD,#
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Bruce G. Robinson, MD, FRCPA,‡§§ Diana E. Benn, PhD,‡§§ Kirsten Hills, FRCPA,|||
Fiona Maclean, FRCPA,¶¶ Nicolasine D. Niemeijer, MD,###
Ljiljana Vlatkovic, MD,*** Arndt Hartmann, MD,# Eleonora P.M. Corssmit, MD,##
Geert J.L.H. van Leenders, MD,PhD,|| Christopher Przybycin, MD,†††
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Darryl Yu, MD,‡‡‡ Katherine D. Nicoll, FRCPA,§§§ Jim L. Yong, FRCPA,§§§
Mathilde Sibony, MD, PhD,||| Evgeny Yakirevich, MD, DSc,¶¶¶ Stewart Fleming, MD,
FRCPATH,#### Chung W. Chow, FRCPA,**** Markku Miettinen, MD,††††
Michal Michal, MD,§ and Kiril Trpkov, MD‡‡‡



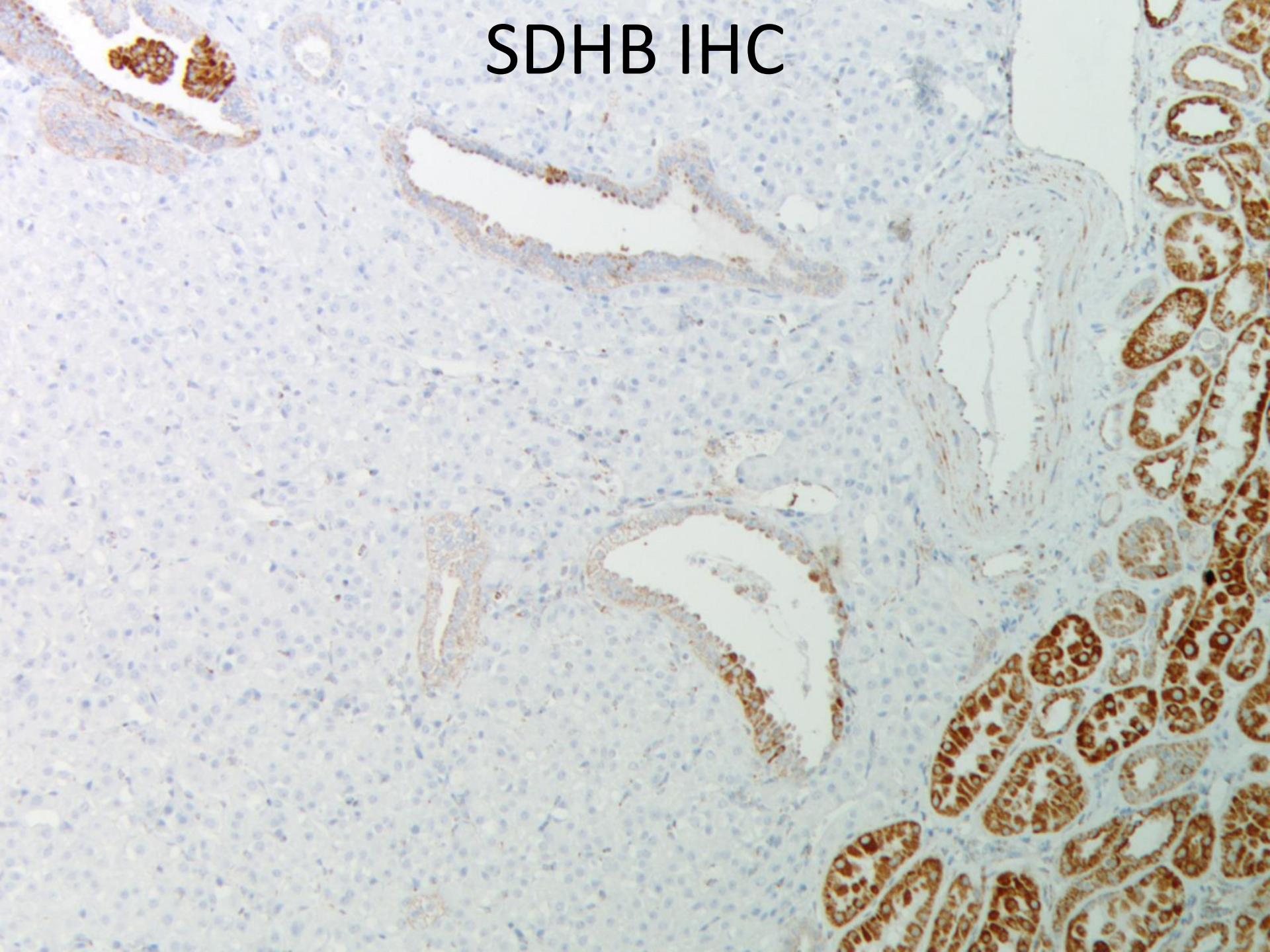
Succinate dehydrogenase-deficient renal cell carcinoma: detailed characterization of 11 tumors defining a unique subtype of renal cell carcinoma

Sean R Williamson¹, John N Eble², Mahul B Amin³, Nilesh S Gupta¹, Steven C Smith³, Lynette M Sholl⁴, Rodolfo Montironi⁵, Michelle S Hirsch⁴ and Jason L Hornick⁴

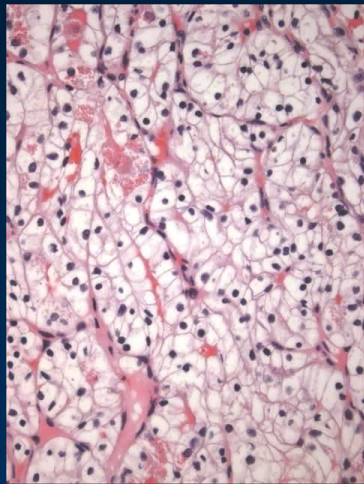
Cytoplasmic inclusions



SDHB IHC



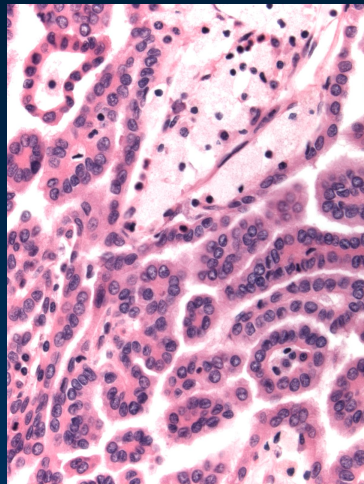
Histologic Types of RCC, Genetics and Targeted Therapies



Clear cell

VHL

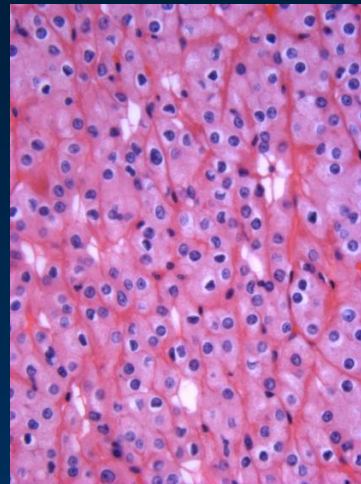
VEGF/VEGFR
inhibitors



Papillary
type 1

MET

MET
inhibitors

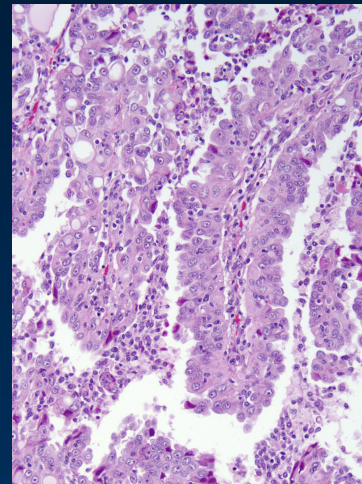


Chromophobe

FLCN

TP53 PTEN

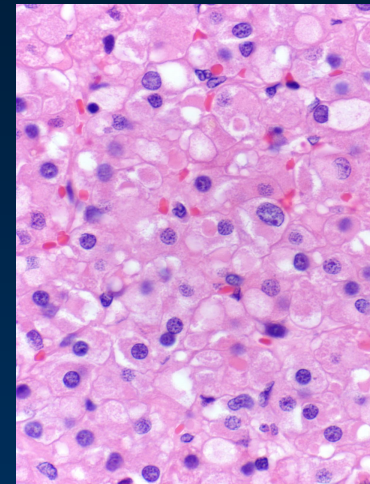
?



HLRCC-RCC

FH

?



SDH-deficient
RCC

SDH