

Uncovering spatial relationships of the tumor microenvironment in the Carolina Breast Cancer Study

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Study Objectives

- Measure immune marker expression in immune hot spots and tumor regions from whole slides and TMAs
- Analyze differences in immune marker expression by subtype
- Correlate immune marker expression with epidemiologic and clinical features

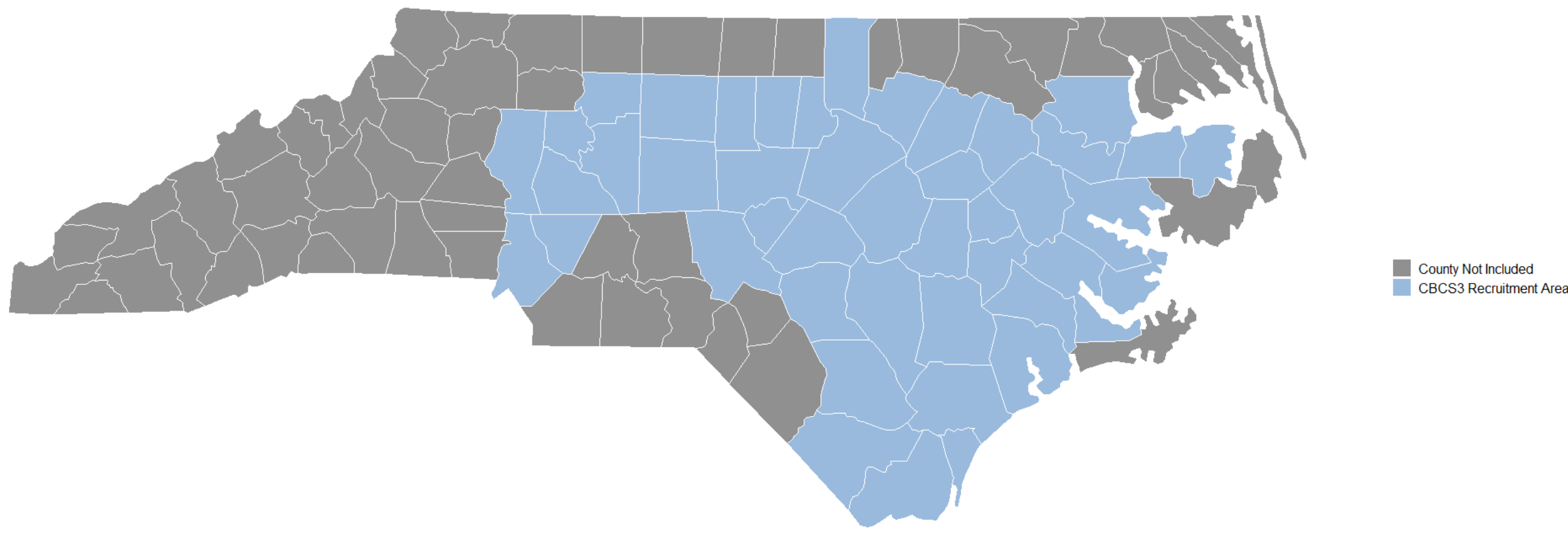


Figure 1.) The CBCS has been conducted in three phases: Phase 1 (1993-1996), Phase 2 (1996-2001), and Phase 3 (2008-2013). In all phases of CBCS, we employed a population-based sampling schema that deliberately oversampled black and young women (<50) with breast cancer to address risk factors specific to those generally underrepresented groups.

Sample Selection

	Whole Slides	TMAs
Race		
Black	4(67%)	37(49%)
Non-Black	2(33%)	38(51%)
PAM50 Subtype		
HER2	0(0%)	1(2%)
LumA	3(50%)	25(33%)
LumB	0(0%)	10(13%)
Basal-like	3(50%)	15(20%)
Missing	0(0%)	24(32%)
IHC Subtype		
ER-/HER2+	0(0%)	5(7%)
LumA	3(50%)	31(41%)
LumB	0(0%)	21(28%)
Basal-like	3(50%)	14(19%)
Missing	0(0%)	4(5%)

Table 1.) For our analysis, we used whole tumor slides from 6 patients, in addition to 4 tissue microarrays (TMAs) that incorporated a total of 76 patients, 6 of which were the same as our whole slide analysis. Patient demographic information is listed above.

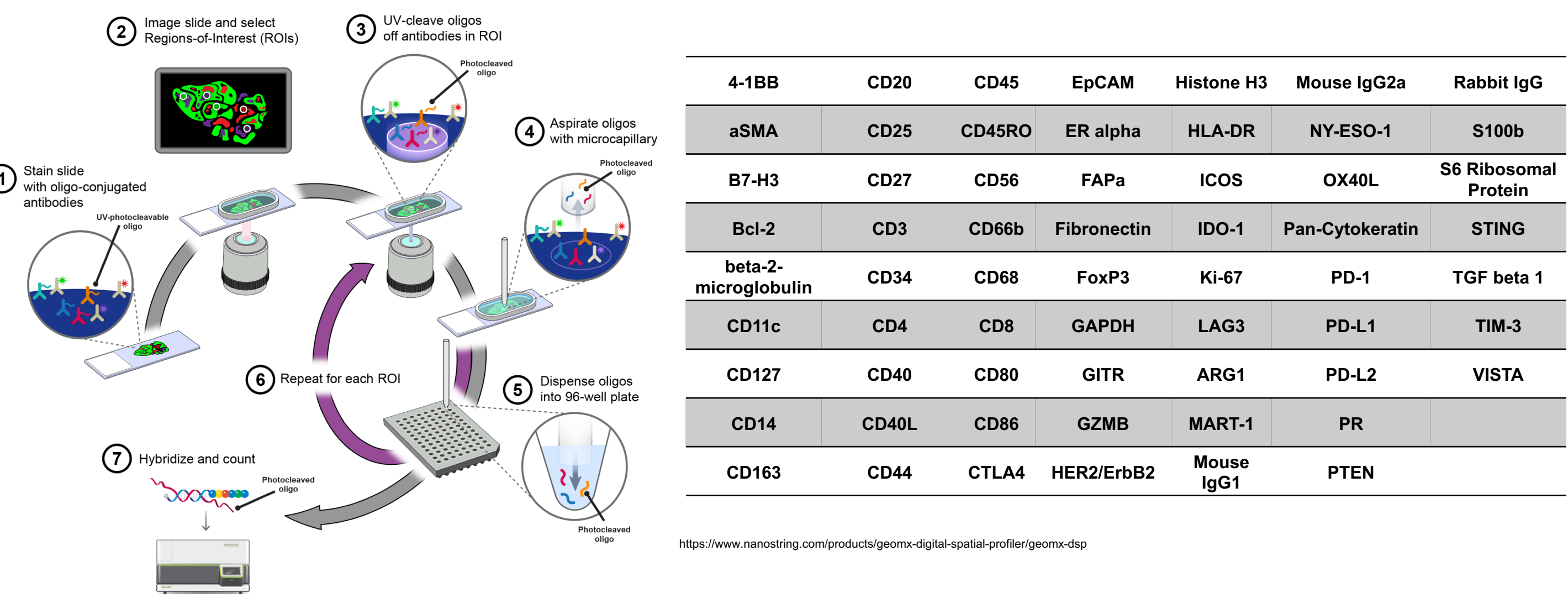


Figure 2.) Nanostring GeoMx Digital Spatial Profiling is a tissue morphology guided protein expression assay. Tissues are stained with 2-3 cell surface markers for cell types of interest (CD45, CD68, Pan-CK), along with approximately 40 oligo-tagged antibodies for other markers of interest. Regions of interest (ROI) are picked based on cellularity, and UV light cleaves oligo tags from antibodies. Oligos are then read and counted to determine protein expression.

Digital Spatial Profiling

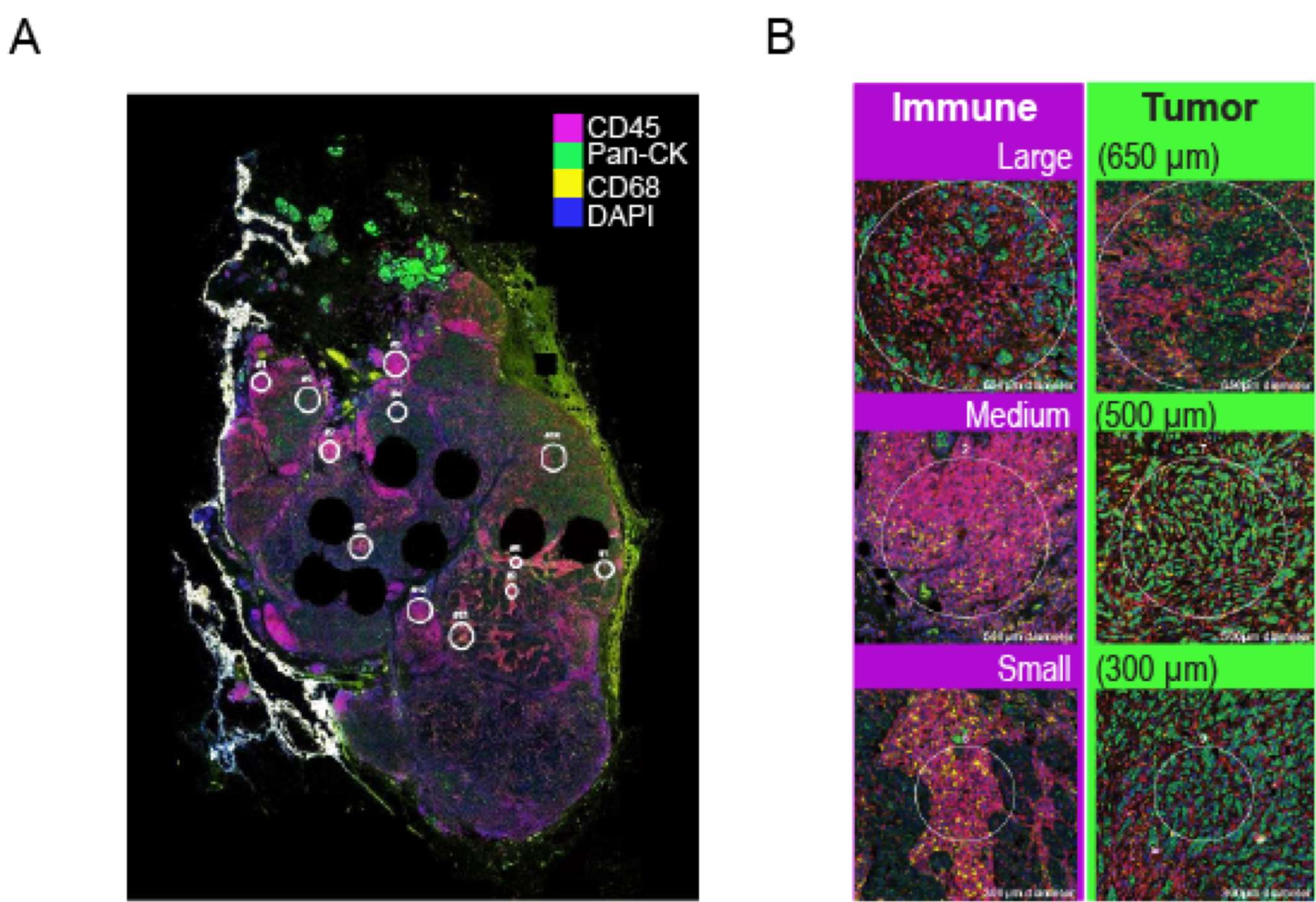


Figure 3.) **A)** Highly immune infiltrated whole tumor slides from 6 patients were stained with CD45 (red), CD68 (yellow), and Pan-CK, in addition to antibodies listed above. **B)** 12 ROIs were selected based on cellularity, 4 large (650 μ m), 4 medium (500 μ m), and 4 small (300 μ m).

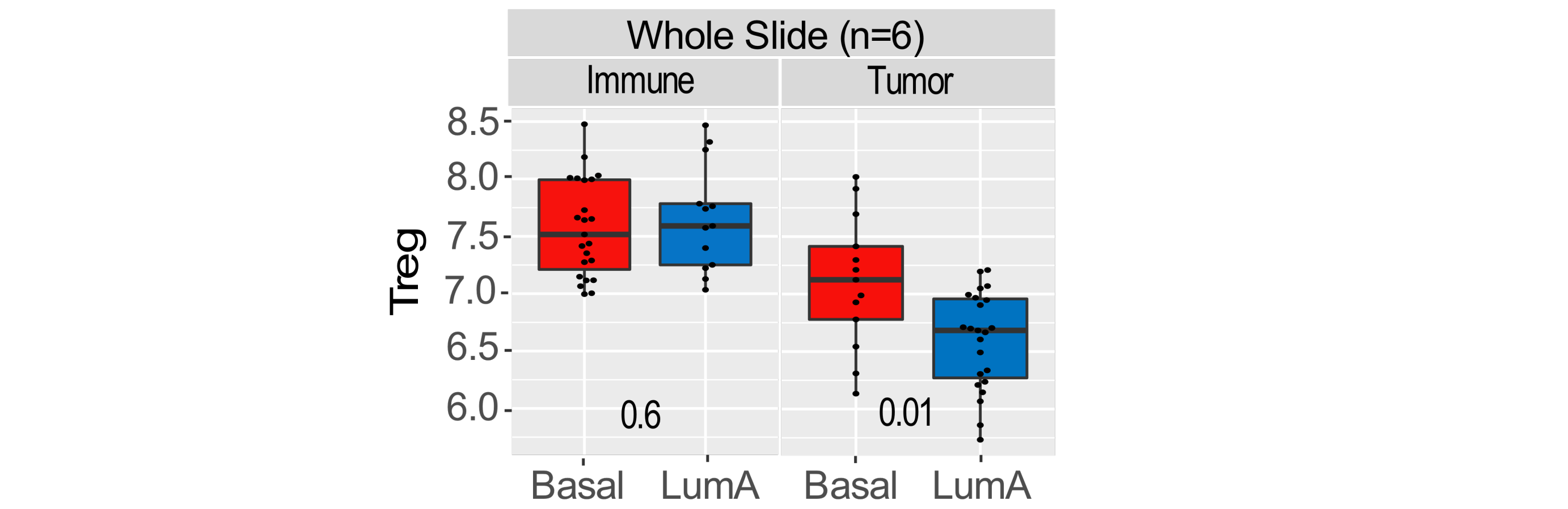
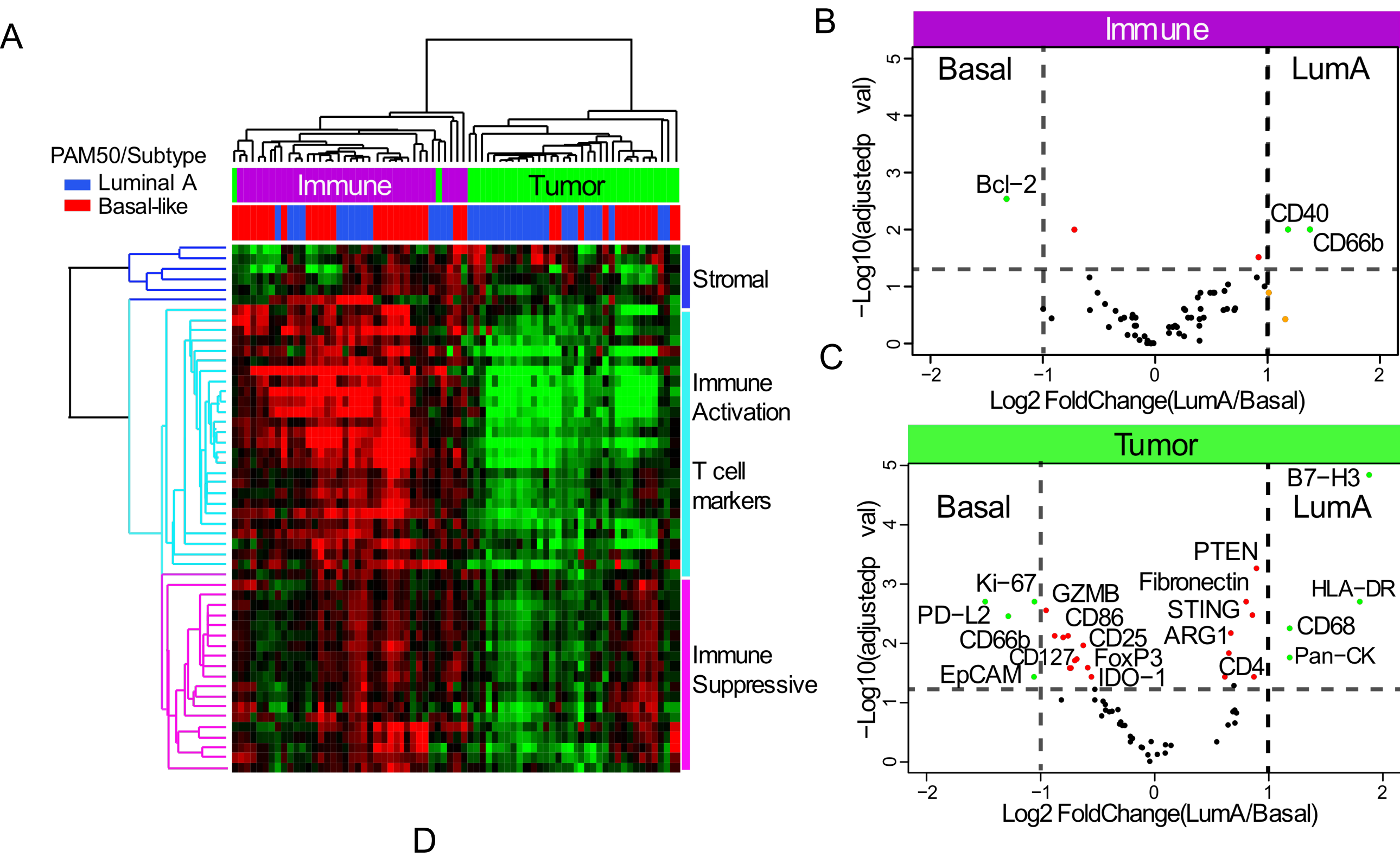


Figure 4.) **A)** Heatmap of protein expression for pilot dataset with PAM50 subtype and cellularity labeled. **B&C)** The dataset was split into two, with one encompassing the immune high ROIs and one with the tumor high ROIs. Volcano plots of each dataset are shown, with proteins expressed 2-fold or greater and $p < 0.05$ labeled green. **D)** Immune marker profiling was performed based on marker expression. Overall, in immune high ROIs, all immune cell markers were high. In tumor high ROIs, there were significant differences in some cell populations, such as Tregs being higher in Basal tumors.

Immune Cell Markers Differ by Subtype

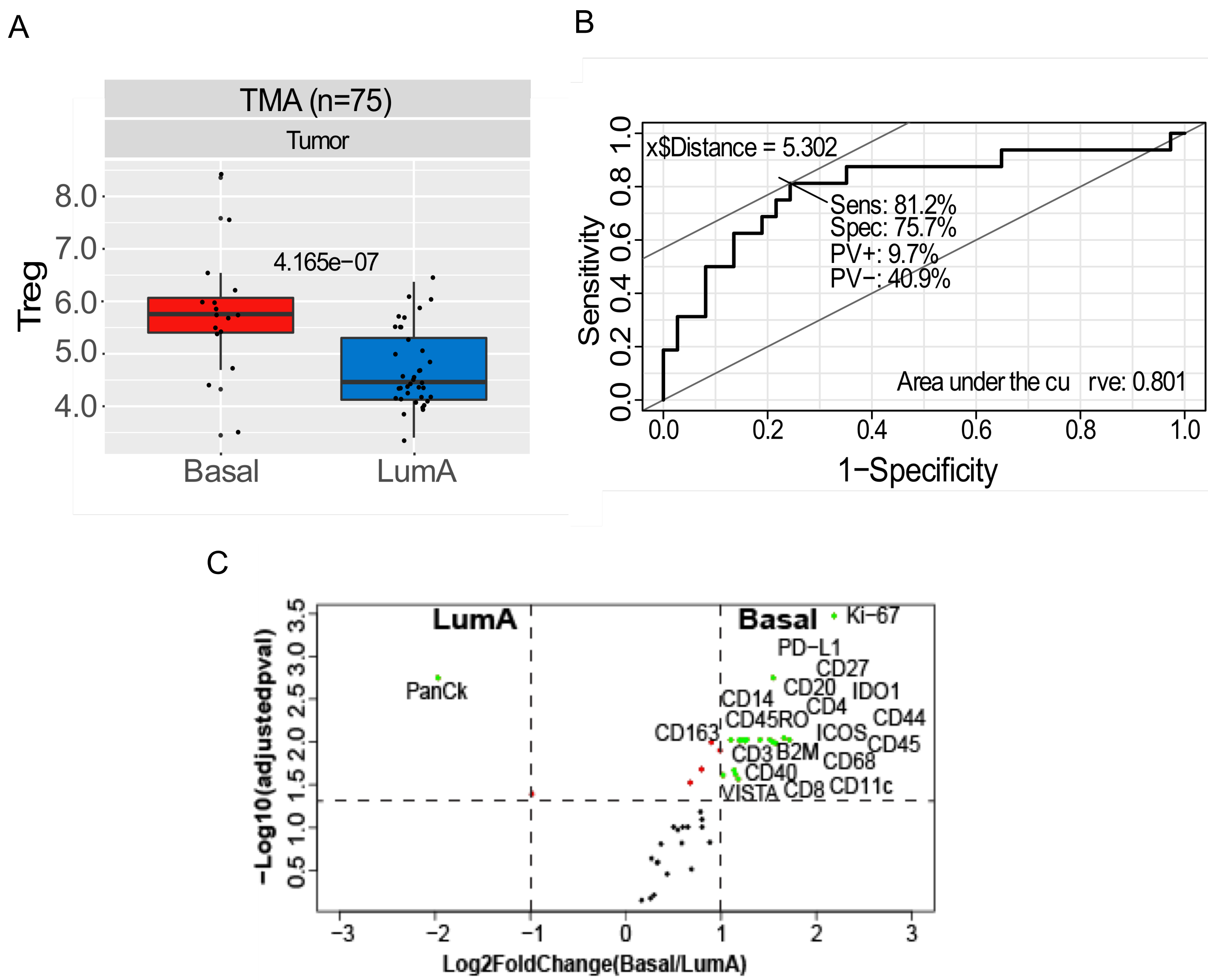


Figure 5.) In order to expand our analysis to more samples, specifically samples enriched for tumor cell content, we analyzed 4 TMAs encompassing 76 patients, including the 6 we already examined by whole slide. For each TMA core, we chose 1-3 ROIs based on Pan-CK staining, 384 ROIs in total. After filtering hot spots and outliers, there were 346 ROIs and 75 patients. **A)** Immune marker profiling shows higher Treg marker expression in Basal like tumors **B)** ROC analysis shows 80% sensitivity in Basal vs Luminal A classification based on Treg marker expression. **C)** Volcano plot of Basal vs Luminal A. There were significant differences in immune marker expression between Luminal A and Basal-like tumors.

Key Findings

- Probing differences immune marker expression by subtype is more prolific in tumor rich regions
- ICC shows strong correlation between probing immune markers by whole slides or TMAs
- Treg marker expression is higher in Basal-like versus Luminal A cancers

Acknowledgements

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