# Advancing cancer research: A novel digital PCR tool for simultaneous detection of multiple hallmark mutations in BRAF and EGFR

Claudia Kappmeier<sup>1</sup>, Sherina Edward<sup>1</sup>, Corinna Hochstein<sup>1</sup>, Jette Ellehauge<sup>2</sup>, Stina Christensen<sup>2</sup>, Tae Jung Kim<sup>3</sup>, Dávid Kis<sup>4</sup>, Orsolya Biró<sup>4</sup>, Ellen Bruske<sup>1</sup>, Francesca Di Pasquale<sup>1</sup>, Ronny Kellner<sup>1</sup> <sup>1</sup>QIAGEN GmbH, QIAGEN Strasse 1, 40724, Hilden, Germany; <sup>2</sup>Klinisk Biokemisk Afdeling, Ringstedgade 57, 4700 Næstved, Denmark; <sup>3</sup>Seoul St. Mary's Hospital, Department of Pathology, 222 Banpo-Daero, Seocho-Gu, Seoul, Korea; <sup>4</sup>Clinomics Europe Ltd., 1094 Budapest, Mihálkovics utca 10, Hungary

## Faster and easier monitoring of hallmark cancer mutations

Precision oncology requires the identification of the specific genetic mutations driving cancer. Some hallmark mutations, such as those found in BRAF and EGFR genes, are important in the analysis of multiple types of cancer. The capability to concurrently and accurately detect multiple hallmark mutations would greatly benefit cancer research

(dPCR) technology provides an opportunity for highly sensitive, quantitative mutation analysis. Digital PCR Here, we introduce the new and innovative dPCR PanCancer Kits (RUO), which are designed to detect multiple hallmark mutations in BRAF or EGFR.

Each kit is tailored to target a spectrum of mutations associated with these genes, facilitating comprehensive mutation analysis. The dPCR PanCancer Kit BRAF V600 FAM (200) targets 8 BRAF V600 mutations in a single assay and the dPCR PanCancer Kit EGFRex19del FAM (200) targets 23 EGFR exon 19 deletions. Each PanCancer assay contains a reference assay for the human single-copy gene AP3B1 to determine the number of genome copies in the sample and to control for dPCR efficiency.

Here, we present our initial data for various sample types, including blood, plasma, stool and FFPE samples. Through a meticulously optimized dPCR setup, we have achieved exceptional sensitivity and specificity, enabling the detection of multiple mutations in a single channel at allelic frequencies below 1%.

## dPCR PanCancer Kit (RUO) assay design and function

dPCR PanCancer Kits (RUO) offer duplex assays to simultaneously detect multiple hallmark mutations in cancerspecific genes and a reference gene. Mutations are detected in the green channel and the reference gene is detected in the yellow channel. Combined with an optimized dPCR Master Mix, these assays reduce the cost and time required for the comprehensive analysis of hallmark mutations.

To comprehensively assess the performance of the dPCR PanCancer Kits (RUO) across varied sample types and methodologies, three reputable institutes conducted rigorous testing. The findings from all three independent evaluations validate the efficacy of the assay design, demonstrating robust compatibility with diverse samples and concordance with testing results from established industry standard methods.

Assay	Mutation aa	Mutation nucleotide	COSMIC ID		dPCR PanCancer Kit BRAF V600 FAM (200)	dPCR PanCancer Kit EGFRex19del FAM (200
	p.V600K	c.1798_1799delinsAA	COSV56057713			
	p.V600R	c.1798_1799delinsAG	COSV56058419			
	p.V600E	c.1799_1800delinsAA	COSV56059110			23 EGFK exon 19 deletion
dPCR PanCancer	p.V600E	c.1799T>A	COSV56056643	Assays		
Kit BRAF V600 FAM (200)	p.V600D	c.1799_1800delinsAT	COSV56059623		AP3B1 reference gene	AP3B1 reference gene
	p.V600G	c.1799T>G	COSV56080151		g	
	p.V600M	c.1798G>A	COSV56075762			
	p.V600R	c.1798_1799delinsCG	COSV56288520			
	p.K745_E749del	c.2233_2247del	COSV51769442	Master MIX		4x QIAcuity Master Mix
	p.E746_A750delinsIP	c.2235_2248delinsAATTC	COSV51817953			
	p.E746_A750del	c.2235_2249del	COSV51765119	Components	of the dPCR PanCancer	Kit (RUO) assays
	p.E746_T751delinsIP	c.2235_2251delinsAATTC	COSV51782151	components		
	p.E746_T751delinsI	c.2235_2252delinsAAT	COSV51850034			
	p.E746_A750del	c.2236_2250del	COSV51765066			
	p.E746_T751delinsA	c.2237_2251del	COSV51769364			
	p.E746_T751delinsV	c.2237_2252delinsT	COSV51775936			
	p.E746_T751delinsVA	c.2237_2253delinsTTGCT	COSV51771891			
	p.E746_S752delinsV	c.2237_2255delinsT	COSV51765862			
dPCR PanCancer	p.L747_A750delinsP	c.2238_2248delinsGC	COSV51782279			
Kit EGFRex19del	p.L747_T751delinsQ	c.2238_2252delinsGCA	COSV51863059			
FAM (200)	p.E746_S752delinsD	c.2238_2255del	COSV51772418			
	p.L747_E749del	c.2239_2247del	COSV51780076			
	p.L747_A750delinsP	c.2239_2248delinsC	COSV51765099			
	p.L747_T751delinsP	c.2239_2251delinsC	COSV51765856			
	p.L747_S752del	c.2239_2256del	COSV51767308			
	p.L747_S752delinsQ	c.2239_2256delinsCAA	COSV51778874			
	p.L747_P753delinsQ	c.2239_2258delinsCA	COSV51785746			
	p.L747_T751delinsS	c.2240_2251del	COSV51768180			
	p.L747_T751del	c.2240_2254del	COSV51766247			
	p.L747_A750delinsS	c.2240_2248del	COSV51810296			
	p.L747_P753delinsS	c.2240_2257del	COSV51767961			

## Sample to Insight

### Field test results

These results from the Klinisk Biokemisk Afdeling are for experiments using the dPCR PanCancer Kits (RUO) with DNA extracted from stool samples and compared to NGS screening of DNA extracted from tumor tissue. DNA extraction for dPCR was performed on collected stool samples from donors with known and unknown status of BRAF V600 mutations and EGFR exon 19 deletions using extraction kits optimized for stool samples. Donors with known mutation status were previously analyzed for the presence of BRAF and EGFR mutations by applying NGS to DNA extracted from tumor tissue. In the dPCR reaction, 1–50 ng of extracted stool DNA was used.

These results from St. Mary's Hospital in Seoul (part of the

Catholic University of Korea) are for experiments where

the dPCR PanCancer Kits (RUO) and qPCR screening were

used on DNA extracted from FFPE samples. DNA extraction

for dPCR was performed on collected needle biopsy FFPE

samples from donors with known and unknown status of

BRAF V600 mutations and EGFR exon 19 deletions using

extraction kits optimized for FFPE tissue samples. Donors

with known mutation status were previously analyzed for

the presence of BRAF and EGFR mutations by applying

qPCR analysis for the same DNA extractions. In the dPCR

reaction, 10–60 ng of extracted FFPE DNA was used.

Scree	ning res	ults for	DNA	from	stool	sampl	es

ID	<b>Expected</b> mutation	PanCancer Kit result
Stool 1	Unknown	BRAF V600 Mut
Stool 2	Unknown	BRAF V600 Mut
Stool 4	Unknown	BRAF V600 WT
Stool 5	BRAF V600 WT	BRAF V600 WT
Stool 6	Unknown	BRAF V600 WT
Stool 8	BRAF V600 Mut	BRAF V600 Mut
Stool 11	BRAF V600 WT	BRAF V600 Mut
Stool 12	Unknown	BRAF V600 Mut
Stool 1	EGFR WT	n.a.
Stool 3	EGFR WT	EGFR WT
Stool 5	EGFR WT	EGFR WT
Stool 6	EGFR WT	n.a.
Stool 7	EGFR WT	EGFR WT
Stool 8	EGFR WT	EGFR WT
Stool 9	EGFR WT	EGFR WT
Stool 10	EGFR WT	EGFR WT
Stool 11	EGFR WT	EGFR WT
Stool 12	EGFR WT	n.a.

Evaluation of positive predictive validity (PPV) and negative PV (NPV) for dPCR PanCancer Kits (RUO).

		Standard method (NGS from tumor tissue)			
		Pos	Neg		
PanCancer Kit	Pos	1	1	2	PPV = 50%
stool samples)	Neg	0	8	8	NPV = 100 %
		1	0	-	

Screening results for DNA from FFPE samples.

ID	Expected mutation	PanCancer Kit result
Sample 1	BRAF V600 Mut	BRAF V600 Mut
Sample 2	BRAF V600 WT	BRAF V600 WT
Sample 3	BRAF V600 Mut	BRAF V600 Mut
Sample 4	BRAF V600 WT	BRAF V600 WT
Sample 5	BRAF V600 Mut	BRAF V600 Mut
Sample 6	BRAF V600 WT	BRAF V600 WT
Sample 7	EGFR exon 19 deletion	EGFR exon 19 deletion
Sample 8	Unknown	EGFR exon 19 deletion

#### Evaluation of PPV and NPV for dPCR PanCancer Kits (RUO)

		Standard method (NGS from tumor tissue)			
		Pos	Neg		
PanCancer Kit	Pos	5	0	5	PPV = 100%
(dPCR from stool samples)	Neg	0	3	3	NPV = 100 %

These results from Clinomics Europe are for experiments where the dPCR PanCancer Kits (RUO) were used on DNA extracted from human reference cell lines. DNA extraction for dPCR was performed on four reference cell lines with known status of BRAF V600 mutations and EGFR exon 19 deletions using extraction kits optimized for fresh tissue samples. Donors with known mutation status were previously analyzed for the presence of BRAF and EGFR mutations by applying qPCR analysis on the same DNA extractions. In the dPCR reaction, 2.8 ng, 14 ng and 70 ng of extracted gDNA were used.

#### Screening results for DNA from human reference cell lines.

Cell line	dPCR template input	Expected mutation	PanCancer Kit resu
SK-MEL28	70 ng	BRAF V600E	BRAF V600 Mut
SK-MEL28	14 ng	BRAF V600E	BRAF V600 Mut
SK-MEL28	2.8 ng	BRAF V600E	BRAF V600 Mut
A-431	70 ng	BRAF V600 WT	BRAF V600 WT
A-431	14 ng	BRAF V600 WT	BRAF V600 WT
A-431	2.8 ng	BRAF V600 WT	BRAF V600 WT
CS693 P1 mix	70 ng	EGFR exon 19 deletion	EGFR exon 19 deletio
CS693 P1 mix	14 ng	EGFR exon 19 deletion	EGFR exon 19 deletio
CS693 P1 mix	2.8 ng	EGFR exon 19 deletion	EGFR exon 19 deletio
OVCAR-3	70 ng	EGFR exon 19 WT	EGFR 19 WT
OVCAR-3	14 ng	EGFR exon 19 WT	EGFR 19 WT
OVCAR-3	2.8 ng	EGFR exon 19 WT	EGFR 19 WT

Evaluation of PPV and NPV for dPCR PanCancer Kits (RUO).								
		Standard method (qPCR from cell line DNA)						
		Pos	Neg					
PanCancer Kit	Pos	2	0	2	PPV = 100%			
line DNA) Neg		0	2	2	NPV = 100 %			



## Complete workflow with blood samples

Testing the compatibility of the dPCR PanCancer Kits (RUO) with various DNA extraction protocols and workflows is essential prior to applying it in cancer mutation research. To demonstrate compatibility with one manual and two automated extraction protocols (QIAsymphony<sup>®</sup> SP, EZ2<sup>®</sup>), human gDNA was extracted from blood samples from five healthy donors and subsequently analyzed using the dPCR PanCancer Kits (RUO) for BRAF (below left) and EGFR (below right). The results showed stable DNA recovery across the three extraction methods as measured with the AP3B1 reference genes and consistent amplification and quantification of spiked-in mutation templates for both dPCR PanCancer Kits (RUO). This experiment was performed at the QIAGEN GmbH facilities in Germany.



standard deviation from 2 replicates.

## Conclusions

Overall, we have demonstrated that our dPCR PanCancer kits (RUO) provide a robust, fast and efficient technology to identify critical mutations, ultimately enhancing our understanding of BRAF- and EGFR-driven cancers. There is a strong concordance between dPCR PanCancer Kit (RUO) assay results and results from industry standard methods for cancer mutation detection. The assay design is compatible with various sample types.

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#### Both dPCR PanCancer Kits (RUO) have potential applications in research prescreening samples, e.g., prior to next-generation sequencing (NGS), or research into monitoring cancer cells. The assays simultaneously assess multiple mutations, reducing time and costs and saving sample material. Additionally, this novel technology is adaptable for other cancer-associated genes, so similar assays can potentially be developed.

The dPCR PanCancer Kit is for research use only. Not for the diagnosis, prevention, or treatment of a disease. For up-to-date licensing information and product-specific disclaimers, see the respective QIAGEN kit instructions for use or user operator manual. QIAGEN instructions for use and user manuals are available at www.qiagen.com or can be requested from QIAGEN Technical Services (or your local distributor).

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