# Gllnger supports prediction of homologous recombination deficiency and patient response to PARPi treatment from shallow genomic profiles.

Pozzorini P, André G, Colletta T, et al. Cell Rep Med. 2023;4(12):101344. doi: 10.1016/j.xcrm.2023.101344

### BACKGROUND

# Homologous recombination deficiency (HRD) is a predictive biomarker for PARPi sensitivity in ovarian cancer.



# In addition to BRCA1/2 testing, measuring genomic instability (GI) can expand identification of HRD-positive patients.



However, the complexity and centralized assessment of available solutions are **barriers** to GI analysis.



Low-pass whole genome sequencing (lpWGS) offers an easy-to-implement, decentralized HRD detection alternative.





# RESULTS

### Analytical performance in clinical samples (n=327)

#### **High concordance**



overall percentage agreement (OPA) of GI status between GlInger™ and reference method n = 296

#### Low rejection rate



overall rejection rate with GlInger<sup>™</sup> versus 7.95% with reference method n = 327

No significant difference in GI status OPA was observed between samples processed across **5 independent clinical laboratories, supporting** a decentralized approach to HRD analysis.



# **Clinical relevance: Retrospective analysis in subset of PAOLA-1** samples (n=195)

Patients classified by GIInger<sup>™</sup> as GI-positive had **significantly (over two times)** longer progression-free survival (PFS) when receiving olaparib + bevacizumab versus those receiving placebo + bevacizumab (hazard ratio 0.49; p=0.01).



# **GlInger™ classification was non-inferior to the reference method** for

stratifying ovarian cancer patients with regards to PARPi treatment response.

### CONCLUSIONS

- GIInger<sup>™</sup> is highly concordant with the centralized reference method for HRD assessement and shows lower rejection rate.
- GIInger<sup>™</sup> is an easy-to-implement deep learning method that allows accurate stratification of HRD samples based on lpWGS data.

 Glinger<sup>™</sup> can support the decentralized identification of ovarian cancer patients who may benefit from first-line maintenance treatment with PARPi.



### ABBREVIATIONS

**CI**, confidence interval; **FFPE**, formalin-fixed paraffin-embedded; **GI**, genomic instability; **GII**, Genomic Integrity Index;

**HRD**, homologous recombination deficiency; **OPA**, overall percentage agreement; **PARPi**, poly(ADP-ribose) polymerase 1 inhibitor; PFS, progression-free survival.

### **FURTHER READING**

Buisson A, Saintigny P, Constantoulakis P, et al. Blinded-assessment of a solution to evaluate olaparib maintenance treatment efficacy in patients with ovarian cancer from the GINECO/ENGOT PAOLA-1 trial. J Clin Oncol. 2023;14:5588–5588. 10.1200/JCO.2023.41.16\_suppl.5588.

Pozzorini C, Andre G, Coletta C, et al. Glinger predicts homologous recombination deficiency and patient response to PARPi treatment from shallow genomic profiles. Cell Rep Med. 2023 Dec 19;4(12):101344. doi: 10.1016/j.xcrm.2023.101344.

GIInger<sup>™</sup> data were generated using the SOPHiA DDM<sup>™</sup> Dx HRD Solution, available as a CE-IVD product for In Vitro Diagnostic Use in Europe and Turkey only.

SOPHIA GENETICS products are for Research Use Only and not for use in diagnostic procedures unless specified otherwise.