

Organized by



Hellenic Society
of Immunology-Oncology

Masterclass on Tumor Biomarkers

9-10 September 2021
Divani Acropolis | Athens

DNA is a long chain of nucleotides, each consisting of a phosphate group, a sugar, and a nitrogenous base. The bases are adenine, thymine, guanine, and cytosine. The sequence of these bases along the backbone encodes the genetic information. The information is stored in the genetic code, which specifies the sequence of the amino acids in proteins. The code is read by copying stretches of DNA into the related messenger RNA, in a process called transcription.

Chemically, DNA consists of two long polymers of simple units called nucleotides, with backbones made of sugars and phosphate groups joined by ester bonds. These two strands run in opposite directions to each other and are therefore anti-parallel. Attached to each sugar is one of four types of molecules called bases. It is the sequence of these four bases along the backbone that encodes information. This information is stored using the genetic code, which specifies the sequence of the amino acids in proteins. The code is read by copying stretches of DNA into the related messenger RNA, in a process called transcription.

Within cells, DNA is organized into long structures called chromosomes. These chromosomes are duplicated before cells divide, in a process called DNA replication. Eukaryotic organisms (animals, plants, fungi, and protists) store most of their DNA inside the cell nucleus and some of their DNA in organelles, such as mitochondria and chloroplasts [1]. In contrast, prokaryotes (bacteria and archaea) store their DNA only in the cytoplasm. Within the chromosomes, chromatin proteins such as histones compact and organize DNA. These compact structures guide the actions of other proteins, such as those used in gene transcription. The interactions between DNA and other proteins, including control which parts of the DNA are transcribed.

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DNA exists in many forms, including B-DNA, Z-DNA, and A-DNA. B-DNA is the most common form, and is a right-handed helix. Z-DNA is a left-handed helix, and A-DNA is a compact, wide, shallow groove. The functional organization of DNA depends on the amount and distribution of modifications, such as methylation and phosphorylation, and the presence of metal ions and water molecules [2,3].

The first published DNA patterns—also called Patterson transforms—were obtained from the analysis of DNA [10]. An early analysis of DNA patterns was by Wilkins et al. in 1953, for the patterns of DNA fibers in terms of square lattice. Watson and Crick's molecular modeling of DNA, based on the analysis of diffraction patterns, led to the discovery of the double helix [7].

Although the B-DNA is the most common form, it is not the only form. Z-DNA is a left-handed helix, and A-DNA is a compact, wide, shallow groove. The functional organization of DNA depends on the amount and distribution of modifications, such as methylation and phosphorylation, and the presence of metal ions and water molecules [2,3].

Χαιρετισμός

Αγαπητοί συνάδελφοι και φίλοι,

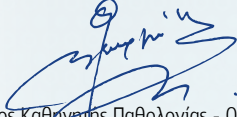
Είναι γνωστό πλέον ότι η εξειδικευμένη θεραπεία των ασθενών με καρκίνο κινείται γοργά, έχοντας εμπεδώσει τη γνώση της πολυπλοκότητας και της ποικιλομορφίας των όγκων, που παραλλάσσουν πρακτικά τόσο όσο και οι αντίστοιχοι ασθενείς.

Η ραγδαία ανάπτυξη της γνώσης μας, για τη Μοριακή Βιολογία και τη Βιοχημεία των διαφόρων τύπων καρκίνου, έχει βοηθήσει σημαντικά στην κατανόηση μερικών εκ των φαινομένων που οδηγούν στην καρκινογένεση αλλά και τη συντήρηση και διασπορά των όγκων. Γνωρίζουμε πλέον βιολογικά μόρια και βιοχημικά μονοπάτια που είναι σημαντικά για την βιολογία του όγκου και οι αναδυόμενες θεραπείες στοχεύουν σε αυτά προκειμένου να ανασχέσουν την πορεία της νόσου. Η έρευνα επί των βιοδεικτών έχει ενταθεί διότι οι βιοδείκτες πέραν της κλασσικής διαγνωστικής και προγνωστικής τους αξίας αποκτούν σημαντική προβλεπτική αξία στην ανάπτυξη θεραπειών. Έτσι, αναδύεται η εξατομίκευση της θεραπείας που πλέον δεν θα βασίζεται αποκλειστικά στην προέλευση του όγκου αλλά στο μοριακό/βιολογικό του προφίλ όπως θα καθορίζεται από τους αντίστοιχους βιοδείκτες οδηγώντας πιθανά σε διαφορετική θεραπευτική προσέγγιση.

Ο στόχος του “Masterclass on Tumor Biomarkers” που διοργανώνει η Ελληνική Εταιρεία Ανοσο-Ογκολογίας, είναι να προάγει τη γνώση για την αναδυόμενη μοριακή ετερογένεια των όγκων με συνέπεια την εξατομίκευση της θεραπείας αλλά και την ανάδειξη της σημασίας της υγρής βιοψίας (κυκλοφορούντα καρκινικά κύτταρα, DNA, micro RNAs, εξωσώματα) στην παρακολούθηση της κλινικής πορείας της νόσου και της αποτελεσματικότητας της θεραπείας. Η θεματολογία του Εκπαιδευτικού σεμιναρίου θα παρουσιασθεί με ένα επαγωγικό και διδακτικό τρόπο με στόχο να συνδέσει τη σημερινή μας γνώση με τις μελλοντικές προοπτικές των βιοδεικτών. Πιστεύουμε ότι η προσπάθειά μας αυτή θα προσφέρει θετικό αποτέλεσμα στην διαδικασία της Εκπαίδευσης και ενημέρωσης στα θέματα της ανάπτυξης και χρήσης των βιοδεικτών και ελπίζουμε ότι η παρουσία σας και οι παρατηρήσεις σας θα βοηθήσουν όλους μας στην περαιτέρω εξέλιξη.

Σας ευχαριστούμε θερμά

Β. Γεωργούλιας



Μόδιμος Καθηγητής Παθολογίας - Ογκολογίας,
Ιατρική Σχολή Πανεπιστημίου Κρήτης

Φ. Κοϊνίης



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Ιατρική Σχολή Πανεπιστημίου Θεσσαλίας

Thursday September 9th, 2021

08.00-08.30 **Welcome address**

V. Georgoulas, F. Koinis

08.30-09.40 **Session 1**

Chairs: **L. Kaklamani, E. Patsea**

08.30-08.50 The emerged importance of pathologist beyond the diagnostic workup

Ch. Masaoutis

08.50-09.10 Immunocytochemistry as the main tool in cancer diagnosis

E. Baliou

09.10-09.30 Emerging immunocytochemical biomarkers in the daily clinical practice

E. Lagoudaki

09.30-09.40 General Discussion

09.40-11.00 **Session 2**

Chairs: **E. Stathopoulos, E. Saloustros**

09.40-10.10 Unfolding the heterogeneity of HER2-positive breast cancer

Ch. Magkou

10.10-10.30 Unfolding the molecular heterogeneity of Triple Negative Breast Cancer

A. Goussia

10.30-10.50 The need of early detection of PIK3CA mutation in metastatic HR+/HER2- breast cancer

K. Antoniadou

10.50-11.00 General Discussion

11.00-11.20 **Coffee Break**

11.20-12.30 **Session 3**

Chairs: **P. Korkolopoulou, G. Nasioulas**

11.20-11.40 The emerged landscape of the tumoral comprehensive molecular profiling using NGS for the identification of relevant biomarkers

Z. Saridaki

11.40-12.00 The importance of RNA NGS as a tool for the accurate diagnosis and characterization of the tumors

E. Papadopoulou

12.00-12.20 Could the genetic background of cancer patients be used as tumor biomarker?

P. Makrythanasis

12.20-12.30 General Discussion

12.30-14.00 **Session 4: Liquid Biopsy (I)**

Chairs: **E. Lianidou, N. Xenidis**

12.30-12.50 An introduction to Liquid Biopsy

A. Markou

12.50-13.10 Methodology for Circulating Tumor Cells (CTCs)

A. Ntzifa

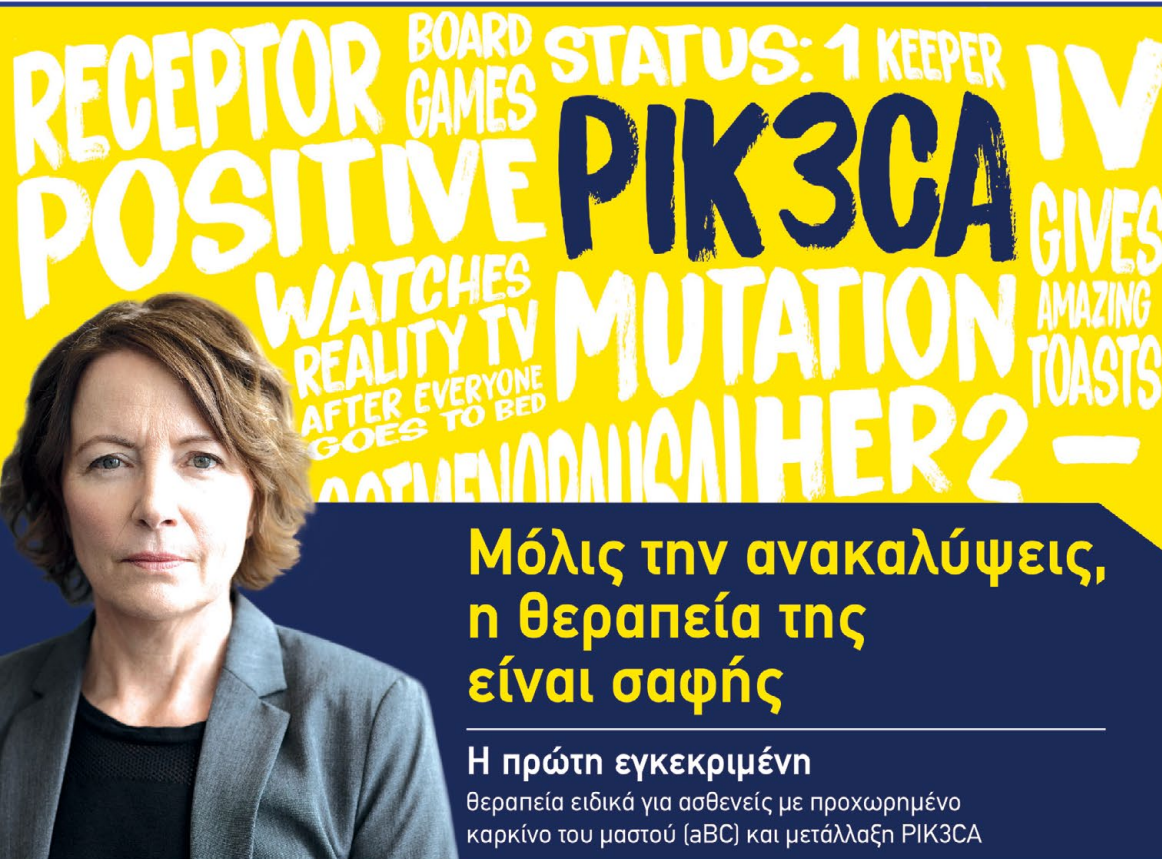
13.10-13.30 The molecular heterogeneity of CTCs

A. Strati

13.30-13.50 The phenotypic heterogeneity of CTCs

G. Kallergi

13.50-14.00 General Discussion



RECEPTOR POSITIVE BOARD GAMES STATUS: 1 KEEPER IV
WATCHES REALITY TV AFTER EVERYONE GOES TO BED
PIK3CA MUTATION GIVES AMAZING TOASTS
HER2 -

Μόλις την ανακαλύψεις, η θεραπεία της είναι σαφής

Η πρώτη εγκεκριμένη
θεραπεία ειδικά για ασθενείς με προχωρημένο καρκίνο του μαστού (aBC) και μετάλλαξη PIK3CA

Ένδειξη

Το PIQRAY® (alpelisib) ενδείκνυται σε συνδυασμό με φουλβεστράντη για τη θεραπεία μετεμμηνοπαυσιακών γυναικών, και ανδρών, με θετικό σε ορμονικό υποδοχέα (HR), αρνητικό σε υποδοχέα ανθρώπινου επιδερμικού αυξητικού παράγοντα 2 (HER2) τοπικά προχωρημένο ή μεταστατικό καρκίνο του μαστού με μετάλλαξη PIK3CA μετά την εξέλιξη της νόσου μετά από ενδοκρινική θεραπεία ως μονοθεραπεία.

Οι πιο συχνές ανεπιθύμητες ενέργειες (αναφέρθηκαν σε συχνότητα >20% στον συνδυασμένο πληθυσμό της μελέτης με και χωρίς τη μετάλλαξη) ήταν αυξημένη γλυκόζη πλάσματος (79.2%), αυξημένη κρεατινίνη (67.6%), διάρροια (59.5%), αύξηση της γ-γλουταμυλτρανσφεράσης (53.2%), εξάνθημα (51.8%), μείωση του αριθμού λεμφοκυττάρων (55.3%), ναυτία (46.8%), αύξηση αλανινικής αμινοτρανσφεράσης (44.0%), αναμία (44.0%), κόπωση (43.3%), αύξηση λιπώδους (42.6%), μείωση της όρεξης (35.9%), στοματίτιδα (30.3%), έμετος (28.5%), μείωση του βάρους (27.8%), υποσβεσταιμία (27.8%), μείωση της γλυκόζης του πλάσματος (26.8%) και παράταση του χρόνου ενεργοποιημένης μερικής θρομβοπλαστίνης (aPTT) (22.2%) και αλωπεκία (20.4%). Οι πιο συχνές ανεπιθύμητες ενέργειες βαθμού 3 ή 4 (αναφέρθηκαν σε συχνότητα ≥2%) ήταν αυξημένη γλυκόζη πλάσματος (39.1%), εξάνθημα (19.4%), αύξηση γ-γλουταμυλτρανσφεράσης (12.0%), μείωση του αριθμού λεμφοκυττάρων (9.2%), διάρροια (7.0%), αυξημένη λιπώδους (7.0%), υποκαλιαιμία (6.3%), κόπωση (5.6%), μείωση του σωματικού βάρους (5.3%), αναμία (4.9%), υπέρταση (4.6%), αύξηση της αλανινικής αμινοτρανσφεράσης (4.2%), ναυτία (2.8%), κρεατινίνη αυξημένη (2.8%), στοματίτιδα (2.5%), υποσβεσταιμία (2.1%) και φλεγμονή του βλεννογόνου (2.1%). Οι πιο συχνές ανεπιθύμητες ενέργειες που οδήγησαν σε διακοπή της θεραπείας ήταν η υπεργλυκαιμία (6.3%), εξάνθημα (4.2%), διάρροια (2.8%) και κόπωση (2.5%).

Πριν τη συνταγογράφηση συμβουλευθείτε την Περίληψη Χαρακτηριστικών του Προϊόντος, που διατίθεται [ΕΔΩ](#)



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† Το φαρμακευτικό προϊόν υπόκειται σε επιπρόσθετη παρακολούθηση.

PIQ_AD01007_MAR2021/GS210308962

14.00-15.00 **Light Lunch**

15.00-16.50 **Session 5: Liquid Biopsy (II)**

Chairs: **A. Koutsopoulos, Th. Tegos**

- 15.00-15.20 The detection and biologic relevance of circulating tumor DNA (ctDNA)
- 15.20-15.40 Assessing the tumor evolution using plasma ctDNA
- 15.40-16.10 The value of ctDNA for the diagnosis and the monitoring of treatment of non-small cell lung cancer
- 16.10-16.40 Monitoring treatment efficacy in colorectal cancer using ctDNA
- 16.40-16.50 General discussion

E. Kosmidis
A. Voutsina

F. Papageorgiou

F.I. Dimitrakopoulos

16.50-18.50 **Session 6: Liquid Biopsy (III)**

Chairs: **G. Kallergi, F. Koinis**

- 16.50-17.20 The clinical relevance of CTCs in breast cancer
- 17.20-17.50 The clinical relevance of CTCs in prostate cancer
- 17.50-18.20 The clinical relevance of CTCs in colorectal cancer (CRC) and cancer of unknown primary site (CUP)
- 18.20-18.40 Exosomes as a potential source of tumor biomarkers
- 18.40-18.50 General discussion

N. Xenidis
Z. Zafeiriou

T. Londra
E.K. Vetsika

18.50-19.10 **Coffee Break**

19.10-20.10 **Session 7: Molecular heterogeneity of NSCLC**

Chairs: **A. Kotsakis, F. Papageorgiou**

- 19.10-19.30 EGFR mutant and ALK rearranged NSCLC
- 19.30-19.50 BRAF, MET, ROS1, RET positive NSCLC
- 19.50-20.10 KRAS G12C: A new molecular biomarker and target

E. Kontopodis
A. Christopoulou
V. Papadopoulos

Friday, September 10th, 2021

08.30-10.00 **Session 8: Molecular biomarkers**

Chairs: **V. Georgoulis, P. Constantoulakis**

08.30-08.50 The molecular heterogeneity and emerging biomarkers in colorectal cancer

M. Tzardi

08.50-09.10 The molecular landscape and emerging biomarkers in cholangiocarcinoma

K. Tsigaridas

09.10-09.30 Emerging molecular biomarkers using NGS in transitional cell carcinoma

G. Economopoulou

09.30-09.50 Novel and emerging biomarkers in prostate cancer

F. Koinis

09.50-10.00 General discussion

10.00-10.30 **Coffee break**

10.30-11.40 **Session 9: Homologous Recombination Deficiency (HRD)**

Chairs: **T. Rampias, I. Pateras**

10.30-10.50 The biological basis and the detection of HRD

P. Constantoulakis

10.50-11.10 The clinical utility of HRD in ovarian and breast cancer

R. Zakopoulou

11.10-11.30 The clinical utility of HRD in prostate and pancreatic cancer

M. Liontos

11.30-11.40 General discussion

11.40-12.30 **Session 10: NKTR positive tumors**

Chairs: **D. Papachristou, J. Duran-Moreno**

11.40-12.00 The diagnostic algorithm for the detection of NKTR-positive tumors

P. Korkolopoulou

12.00-12.20 The NTRK rearrangement as a therapeutic biomarker

A. Kyriazoglou

12.20-12.30 General discussion

12.30-13.30 **Session 11: Biomarkers in Immuno-Oncology**

Chairs: **K. Baxevanis, A. Kotsakis**

12.30-12.50 PD-L1 as a biomarker for the treatment with immune checkpoint inhibitors

I. Vamvakaris

12.50-13.10 Prognostic and predictive value of TILs

I. Pateras

13.10-13.30 The emerging role of tumor mutational burden (TMB) as a new predictive biomarker

G. Tsaousis

13.30 **Closing remarks**

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Πριν την συνταγογράφηση συμβουλευτείτε τις Π.Χ.Π., που διατίθεται ΕΔΩ

1. ΤΑΦΙΝΛΑΡ®, Περιλήψη Χαρακτηριστικών Προϊόντος, Ιανουάριος 2021.

2. ΜΕΚΙΝΙΣΤ®, Περιλήψη Χαρακτηριστικών Προϊόντος, Ιανουάριος 2021.

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General Information

Organized by



Hellenic Society of Immuno-Oncology

Date

9-10 September, 2021

Hybrid Event

The conference will take place at Divani Acropolis Hotel (address: 19 Parthenonos str, 11742, Athens, Greece). Delegates will have the flexibility to choose between attending the conference venue (in order of priority) or joining the event virtually through the online events platform www.livetime.gr

Registration

Free

Official Language

The official language of the Meeting is Greek

Certificate of Attendance

The certificate of attendance will be given to the participants at the end of the event. Based on the latest circular of the National Drug Organization the Event is required to use an attendance tracking system. By the end of the event a certificate will be given to those who have attended at least 60% of the total hours of the scientific Program. The number of credits of Continuing Medical Education (CME-CPD) to be administered to the participants will be calculated on the basis of monitoring time.

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