Hereditary Breast Cancer

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Introduction

- Breast cancer, with a 12.5% lifetime risk in general population, is the most frequent cancer in women. About 5-10% of breast cancers are thought to be hereditary whereas the remaining 90% is sporadic.
- Most inherited cases of breast cancer are associated with two abnormal genes: BRCA1 (BReast CAncer gene one) and BRCA2 (BReast CAncer gene two) but these only make up 25% of hereditary breast cancers while the remaining 75% is due to moderate and low penetrance and unknown
- Because of the lack of awareness of this pathology, it does not have a standard and harmless treatment to fight it so the research of novel therapies and the improvement of actual strategies would suppose a highly breakthrough in the disease.

Objectives

The aim of this divulgative work is to create an informative website intended for hereditary breast cancer patients and their relatives where the following objectives are reflected:

- · Explanation of what hereditary breast cancer is, focusing on BRCA genes.
- Provide a description of BRCA mutation carriers' features.
- Provide the highlights of genetic counselling
- Exposure the current available treatments
- Show the novel therapies

Materials And Methods

It was undertaken a critical review of journal articles published between 2001 and 2013, identified by searches in MEDLINE and PubMed using the following search terms: BRCA1, BRCA2, hereditary breast cancer, hereditary ovarian cancer, genetic counsellors, risk assessment, genetic susceptibility, medical outcomes and treatment. References of retrieved articles were undertaken

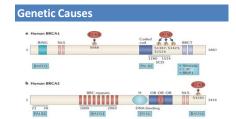


Figure 1. The main high penetrance susceptibility genes: BRCA1 and BRCA2 (Rohini Roy et al., 2012).

Table 1. Summary of known breast cancer predisposition genes (Adapted from Turnbull C and Rahman N, 2008)

		Carrier	
Penetrance	Gene/Locus	Frequency	Cancers
High	BRCA1	0.1%	Breast and ovarian
penetrance	BRCA2	0.1%	Breast and ovarian
	TP53	Rare	Sarcomas, adrenal and brain
Uncertain	PTEN	Rare	Thyroid and endometrium
	STK11	Rare	Gastrointestinal
penetrance	CDH1	Rare	Gastric
	ATM	0.4%	
	CHEK2	0.4%	
Intermediate	BRIP1	0.1%	
penetrance	PALB2 RAD51	Rare Rare	
Low	10g26	Nate	
penetrance	16q12q35, 8q24,5p12	24–50%	

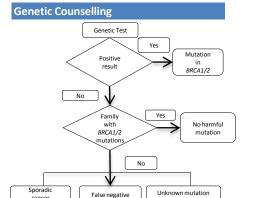


Figure 2- Genetic counseling algorithm (Berliner JL et al., 2007) **Medical Options**

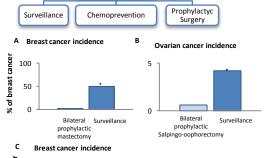
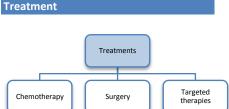


Figure 3- Prophylactic surgery is the most effective procedure to prevent breast/ovarian cancer. Results from Rebbeck TR et al., 2004 (A); Kauff ND et al., 2008 (B-



One of the novel targeted therapies is tumor synthetic lethal strategy of Poly(ADP-Ribose) Polymerase (PARP) inhibitors

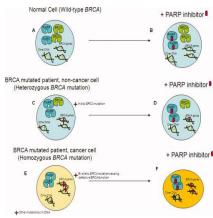


Figure 4- Hypothesis for the tumor synthetic lethal strategy of Poly(ADP-Ribose) Polymerase (PARP) inhibitors in BRCA1/2 mutation carriers (Yap TA et al., 2011)

Conclusions

Breast cancer:

- Is the most common cancer in women with 230,000 women diagnosed in the US in 2012
- Its origin is:
 - 0 90% sporadic
 - 10-5% hereditary

Genetic causes:

- 25% due to BRCA1/2 mutations
- 5% is caused by other high susceptibility genes
- 5% is composed by moderate susceptibility genes
- 14% is formed by low susceptibility genes
- 51% remains unknown

Genetic counselling is a useful procedure to:

- Give the chance to perform a genetic testing
- Assess patient about cancer risk

Bilateral prophylactic Surveillance Salpingo-oophorectomy

- Give patients medical options to prevent cancer
- The most useful and effective procedure to prevent breast/ovarian cancer is the prophylactic surgery of these organs

Treatment:

- Tumor-specific synthetic lethal strategy with PARP inhibitors is showing considerable potential for delivering selective tumor cell kill while sparing normal cells
- Nowadays is being tested in clinical trials