

Nevus Distribution in a Utah Melanoma Kindred with a Temperature-Sensitive *CDKN2A* Mutation

To the Editor:

We recently reported in the *Journal* our longitudinal phenotypic observations of a well-characterized Utah melanoma kindred carrying a temperature-sensitive mutation (V126D) in *CDKN2A* (Florell *et al*, 2004). The V126D mutation, which co-segregates with melanoma susceptibility (Kamb *et al*, 1994), results in a p16 protein with diminished capacity to bind CDK4/CDK6, inhibit Rb phosphorylation, and induce exit from the cell cycle (G1 arrest) at physiologic temperatures (Parry and Peters, 1996). As this mutation was associated with increased nevus size and number in this family (Meyer *et al*, 1992; Florell *et al*, 2004), we hypothesized that given its temperature sensitivity it might also be associated with excess formation of nevi and/or melanomas on warmer regions of the body, defined as the head, neck, and trunk. Here we report nevus and melanoma distribution data derived from 29 family members and 11 spouse control subjects over an average interval of 15 y.

This study was approved by the Institutional Review Board at the University of Utah and was conducted according to Declaration of Helsinki principles. All subjects agreed to participate and informed written consent was obtained. The subjects were not aware of their *CDKN2A* mutation status. A total of 13 V126D mutation carriers and 16 non-carriers were examined, with 11 married-in spouses serving as a control group. All participants were examined in this study and initially 15 y ago by the same dermatologist (L. J. M.), who was also unaware of subject mutational status. The initial and follow-up examinations were conducted in a similar fashion and included a total body skin exam in which location and size of all nevi ≥ 2 mm in diameter were recorded on a body map diagram as described (Florell *et al*, 2004). The head, neck, and trunk were considered "warm" regions and the extremities "cold" regions. Invasive melanomas were confirmed by the Utah Cancer Registry, by obtaining the pathology report, and/or by review of histologic slides by dermatopathologists (S. R. F. and R. M. H.). The nevus count and nevus density data were analyzed using multiple linear regression with appropriate differences, constructed for each subject, as response variables. Carrier status, age at first visit, and gender were used as explanatory variables in the multiple regression analysis.

Nevus distribution data were analyzed by absolute number of nevi and by the mean change of nevi in warm and cold regions over time. As shown in Fig 1, mutation

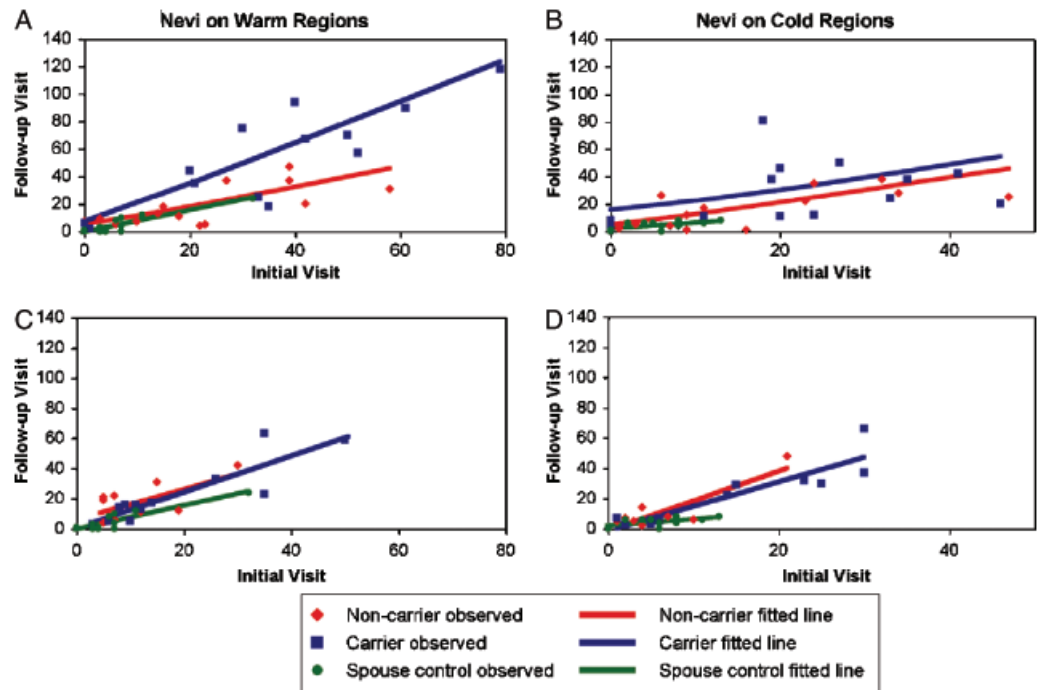
carriers developed more nevi on warm regions than non-carrier or spouse control subjects ($p=0.004$), but the carriers, non-carriers, and spouse control subjects showed a similar rate of nevus development on cold regions ($p=0.07$). Because *CDKN2A* mutation carriers are more prone to nevus development in this family (Meyer *et al*, 1992; Florell *et al*, 2004), we also evaluated nevus distribution based on the mean change of nevi and nevus density in warm and cold regions over the 15 y follow-up period. In this way, we minimized the possibility that the preponderance of warm-region nevi in *CDKN2A* mutation carriers was merely reflective of a nevogenic effect of *CDKN2A* mutation. Mutation carriers demonstrated a significant increase in the mean change of nevus number and density on the warm regions, as compared with the non-carriers and spouse control subjects. The mean change in these parameters was not significantly different in the cold regions (Table I). Four V126D *CDKN2A* mutation carriers developed 11 invasive melanomas, six on warm regions (55%) and five on cold regions (45%), which was not statistically significant. A significant difference in nevus distribution was not observed in a second Utah melanoma kindred with a promoter-region *CDKN2A* mutation ($-34 G>T$) over a 15-interval (12 mutation carriers, 11 non-carriers, and 11 spouse control subjects; Fig 1).

There is precedent for temperature-sensitive mutations resulting in a demonstrable clinical phenotype. The well-known temperature-sensitive tyrosinase mutation ("Siamese cat mutation") occurs in both cats and mice, producing an increased relative pigmentation in the cooler areas of the body such as the tips of the ears, tail, and paws (Searle, 1968). An analogous human tyrosinase mutation confers a temperature-dependent distribution of pigmentation in human carriers (Giebel *et al*, 1991; King *et al*, 1991). In addition, although skin temperature regulation is complex and depends on thermoregulatory and environmental factors (Houdas and Ring, 1982; Wenger, 1995), the normal fluctuations in body temperature appear to encompass a range that would impact V126D *CDKN2A* function. Studies measuring skin temperature in warm, neutral, and cold conditions suggest that core regions (head and trunk) are, on average, warmer than the extremities in neutral (26°C–27°C) and cold environments (Folk, 1974; Webb, 1992; Wenger, 1995), but skin temperature in warm environments (34°C) is similar over the entire integument (Folk, 1974). Temperature measurements of skin in a comfortable environment are slightly higher in warm body regions and have been measured at 34°C–35°C as compared with 31°C–34°C in the cooler extremities (Houdas and Ring, 1982; Webb, 1992). Thus, the

Abbreviations: TND, total nevus density; TNN, total nevus number

Figure 1

V126D mutation carriers develop more nevi on warm regions of the body. These plots of nevus number at the initial (x coordinate) and follow-up (y coordinate) examinations demonstrate an increased number of nevi on warm areas in V126D *CDKN2A* mutation carriers with a more pronounced increase in nevi at the follow-up visit. The rate of increase in the number of nevi is significantly greater in the carriers than non-carriers or spouse control subjects, after adjusting for the initial number of nevi ($p=0.004$). A significant difference in the rate of nevus development on cold regions was not identified among the groups ($p=0.07$) ((A, B), V126D *CDKN2A* kindred). A second Utah melanoma kindred with a promoter region mutation ($-34 G>T$) fails to demonstrate a significant difference in nevus distribution in the warm or cold regions (C, D) over a 15-y interval ($p=0.62$ for warm regions; $p=0.55$ for cold regions).



temperature range at which the V126D *CDKN2A* mutation is functionally impaired coincides with the range of normal fluctuations of cutaneous temperature.

Our data demonstrate a statistically significant disparity in the nevus distribution between mutation carriers and non-carriers, suggesting that the V126D temperature-sensitive mutation may influence the distribution of nevi in these subjects. We considered other explanations for the discrepancy observed in mutation carriers. Distribution of nevi is known to correlate with UV exposure, sunburn history, and phenotypic constitutional features (Kopf *et al*, 1985, 1986; Slade *et al*, 1995; Harrison *et al*, 1999; Autier *et al*, 2001; Carli *et al*, 2002). Significant differences between the genotypic groups, however, were not identified with respect

to markers of chronic UV radiation (rhytides, poikiloderma, actinic keratoses, solar lentigines, etc.), self-reported sunburn history, or phenotypic constitutional features (hair and eye color, skin type) (Florell *et al*, 2004). We also considered the possibility that nevogenic *CDKN2A* mutations might induce nevus formation on the head, neck, and trunk preferentially, unrelated to temperature sensitivity. Nevus distribution data from a second Utah melanoma kindred with a promoter region *CDKN2A* mutation ($-34 G>T$) over a 15-y interval, however, showed no significant differences in nevus distribution between the genotypic groups.

In summary, we found that a temperature-sensitive *CDKN2A* mutation is associated with an altered nevus phenotype with increased rate of nevus development and

Table I. Mean change in nevus number and density in V126D *CDKN2A* mutation kindred

Region ^a	Group ^b	TNN ^c mean change initial versus F/U	95% CI	p ^d	TND ^e mean change initial versus F/U	95% CI	p ^d
Warm	Carrier	10	2–25	0.002	61	15–138	0.005
	Non-carrier	–1	–6 to 0		0	–15 to 7	
	Spouse	0	–4 to 4		0	–14 to 24	
Cold	Carrier	2	0–11	0.36	15	1–50	0.26
	Non-carrier	0	–2 to 3		1	–3 to 12	
	Spouse	0	–4 to 4		1	7–18	

^aWarm regions of the body were defined as the head, neck, and trunk, and cold regions were defined as the upper and lower extremities.

^bSubject mutation status was verified by sequencing the promoter region and exons 1 α –3 of *CDKN2A* and exon 1 β (*ARF*). A total of 13 V126D mutation carriers and 16 non-carriers were examined, with 11 spouses serving as a control group.

^cChange in TNN represents difference in number of clinically detectable nevi ≥ 2 mm in diameter (# nevi at follow-up–# nevi at initial visit).

^dThe analysis used a square-root transformation to normalize the data, which were adjusted for age and sex. Statistical analysis was performed using Statistica 6.0 (StatSoft Inc., Tulsa, Oklahoma).

^eChange in TND calculated by dividing area of all nevi by estimated body surface area (nevus density at follow-up–nevus density at first visit) (Goldgar *et al*, 1991; Meyer *et al*, 1992).

TNN, total nevus number; TND, total nevus density.

density on warm body regions among mutation carriers. Although there were slightly more melanomas on the warm areas, the difference was not significant. These findings provide the first *in vivo* evidence that a temperature-sensitive *CDKN2A* mutation may confer a temperature-dependent nevus distribution.

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