# FAMILY STUDIES IN WALDENSTRÖM MACROGLOBULINEMIA

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# Disclosures

The views presented today are my own and do not necessarily represent the views of the National Cancer Institute Waldenström macroglobulinemia (WM) Family Studies The Questions

- > Why does WM sometime cluster in families?
- Is WM in families different from non-familial WM?
- Why are some people susceptible to WM?
  - Are there factors that increase risk for WM?
    - Genetic?
    - Environmental?
    - Lifestyle?

# **Our Approach**



# The NCI Family Study

- Identify families having
  - 2 or more family members with WM
  - 1 family member with WM + 1 with a related B-cell cancer
  - 1 family member with WM

# Study Components

#### Questionnaire(s)

- Family History
- Individual
- Permission to obtain pertinent medical records
- Blood and/or saliva sample
- Possible visit to NIH for clinical evaluation

# What have we learned so far?

# Is Familial WM rare?

Familial WM is rare, but not as rare as we first thought

- ~100 families enrolled in the NCI National Familial WM Registry
- In a referral hospital setting, about 5% of WM patients report having a family member with WM

# Are family members of WM patients at risk for WM or other conditions?







## WM and B-cell disorders

Study subjects:

2144 LPL/WM patients, >8000 controls, and 1<sup>st</sup>-degree relatives of both groups in Sweden



Are family members of WM patients at higher risk of B-cell cancers?





Close Family Members YES (some) MGUS is usually IgM



Close Family Members



# WM and Autoimmunity

 Study subjects: 2470 LPL/WM patients, >9000 controls, and 1<sup>st</sup>-degree relatives of both groups in Sweden

 Question: Compared to people who do NOT have WM, do close family members of WM patients have higher risk for autoimmune diseases?



YES (some)

Close Family Members

Kristinsson SY, . . . McMaster ML, et al. JNCI 2010

# Understanding risk



# Understanding risk





# Are environmental exposures associated with WM?



### Environmental exposures in WM families

- Study subjects: 103 familial WM patients 273 unaffected relatives
- Question: In WM families, are any environmental exposures associated with increased risk for WM?



YES



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Royer RH... McMaster ML. Blood 2010

# Are there genes that predispose to WM?



# What does 'genetic susceptibility' mean?

- One or more genes that are important for normal cell growth have changes (variants) that affect their function
- These changes are present at birth and can be passed from one generation to the next
- These changes may not be able to cause WM by themselves – may need
  - more than 1 gene change <u>or</u>
  - combination of gene variants + environment



## Genes can be studied on many levels



# Genes can have different effects



- Genes with "Big effect"
  - Rare
  - Lead to high risk for disease
  - May be modified by other genes or environmental factors
  - Strategies: Chromosome, linkage & sequencing studies



- Genes with "Small effect"
  - Common
  - Lead to small increase in risk, so disease results from many genes + environment
  - Strategies: Association studies

### Chromosomes



- Variety of chromosome abnormalities observed
- Similar to nonfamilial WM
- Abnormalities differ among members of same family

National Cancer Institute

McMaster et al., Clin Lymphoma 2005

## Linkage Study



- Linkage close association of genes on the same chromosome
- We saw linkage to more than one region of the genome
- When we included IgM MGUS, the linkage signal was stronger
- Not every family linked to the same region

#### What are we looking for?

- Genes contain the instructions to make proteins
- Genes can have changes in "spelling"

COLOR	
COLOUR	Same meaning
COLON	Different meanin
COLR	
COLOOR	- Meaningless
CMLOR	

- We call these changes "Variants"
- Genetic studies look for variants in genes

#### Whole-genome and whole-exome sequencing

- Use patient's DNA, not the tumor
- Look for variants in the 'spelling' of DNA
- "Whole-exome" = genes only
- "Whole-genome" = all DNA: genes + DNA between genes
- Best for identifying rare genes with "big effects"
- Studies in progress

# Searching for common WM genes

### **Association studies**

- Scan genomes from many different people
- Look for genetic markers that can predict presence of disease
- Compare WM patients to unrelated people

# Searching for common WM genes

#### **Association studies**

- 1. Family-based association study
  - Studied specific genes important in the immune system
  - Found a few genes that may contribute to risk
  - Need confirmation

#### 2. Genome-wide association study

- Scan entire genome using genetic "mile-markers"
- Compare results from many different WM patients with healthy people
- In progress



# Summary I

1. Relatives of WM patients are more likely than other people to have:

- WM or a related B-cell disorder
- IgM MGUS
- Certain autoimmune conditions
- 2. Risk is increased, but SMALL

# Summary II

3. A single gene is NOT likely to account for all familial WM

We found:

- Linkage to more than one region of the genome
- Associations with more than one "small effect" gene
- Evidence suggesting that environmental exposures might contribute to WM
- 4. These results need more study and the use of new approaches
  - We still need your help to answer questions about WM





#### International Waldenström's Macroglobulinemia Foundation

<u>All our families and WM patients</u> who have so generously given their support

> <u>The Family Studies Team</u> Deborah Zametkin Ginny Pichler Laura Fontaine

Our many scientific collaborators and colleagues



### Ask me about the new WM study at NCI!

For more information, contact:

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#### MGUS: <u>Mono (= one) + clonal (= clone)</u> <u>Gammopathy (= lg)</u> of <u>Undetermined (= unknown)</u> <u>Significance</u>





## WM is a clinicopathological syndrome

 A specific type of lymphoma cells (lymphoplasmacytic lymphoma [LPL]) in bone marrow



IgM monoclonal protein in blood

