

# Enabling single cell analysis of copy number variation in breast cancer

mission bio

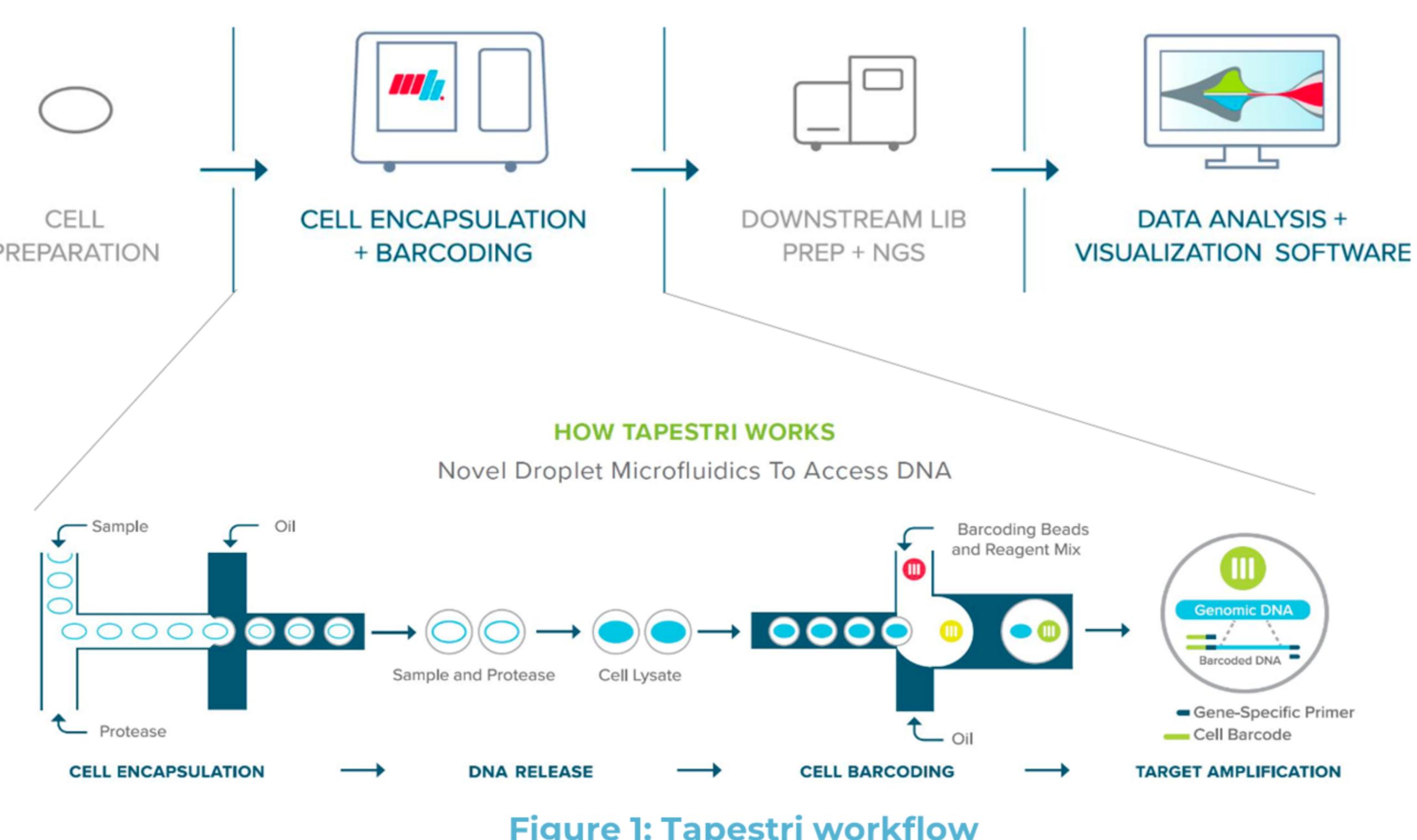
**Jacqueline Marin<sup>1</sup>, Saurabh Parikh<sup>1</sup>, Arnaud Da Cruz Paula<sup>2</sup>, Shirin Issa Bhaloo<sup>2</sup>, Britta Weigelt<sup>2</sup>, Alex Li<sup>1</sup>, Khushali Patel<sup>1</sup>, Ania Wronski<sup>1</sup>, Anup Parikh<sup>1</sup>, Jorge S Reis-Filho<sup>2</sup>**

<sup>1</sup>Mission Bio, South San Francisco, CA, USA. All are employees and shareholders.

<sup>2</sup> Memorial Sloan Kettering Cancer Center, New York, NY

# Introduction

- There is a lack of data on CNV in single cells in solid tumor samples
  - We demonstrate single cell DNA sequencing using the Tapestri instrument for solid tumor samples (Figure 1)
  - Informatics pipeline that can detect CNV and SNV in breast cancer tissue (Figure 2)
  - Ability to uncover clonal architecture, resistance mechanisms and progression of disease at a single cell level.

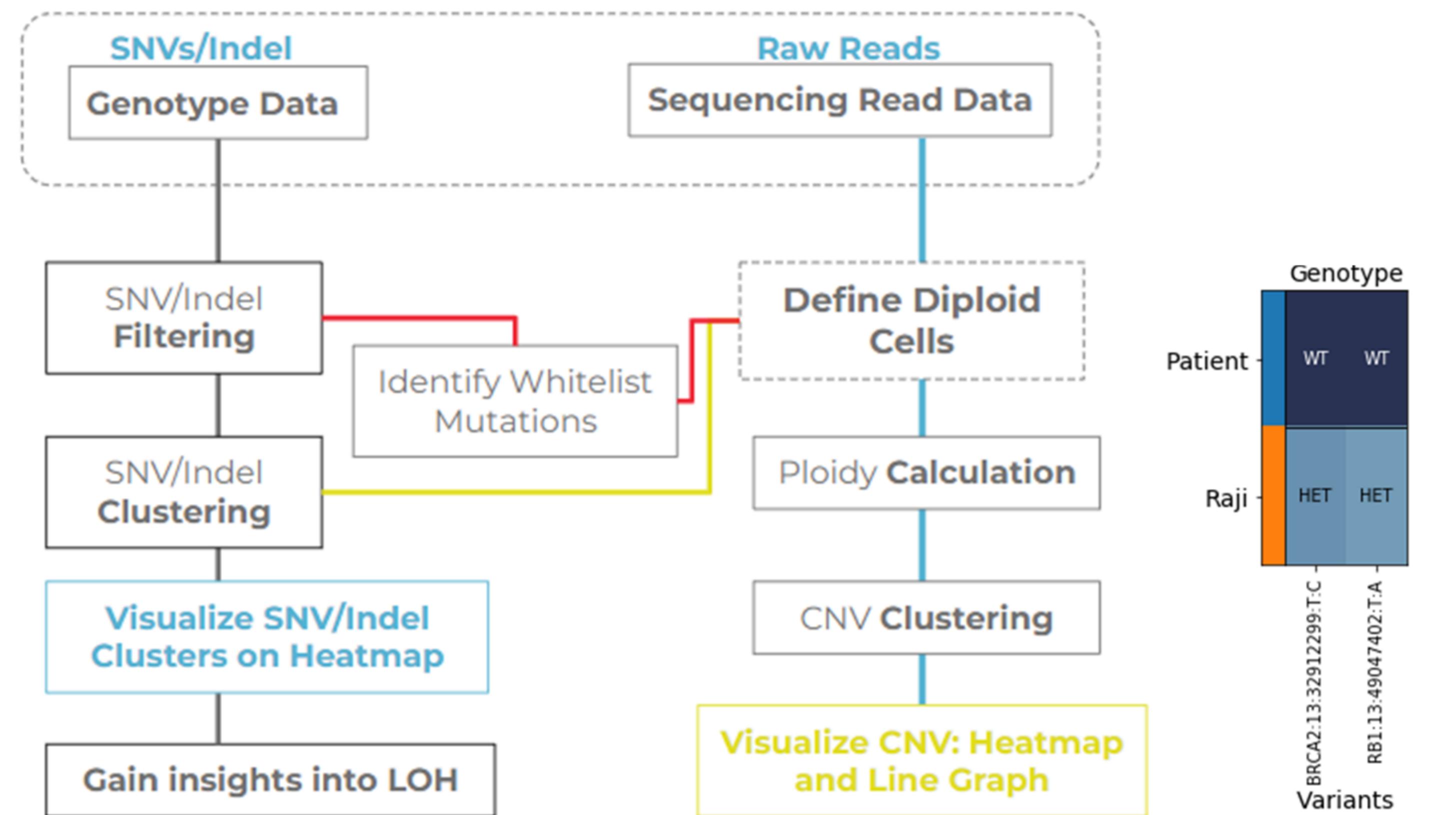


## Figure 1: Tapestri workflow

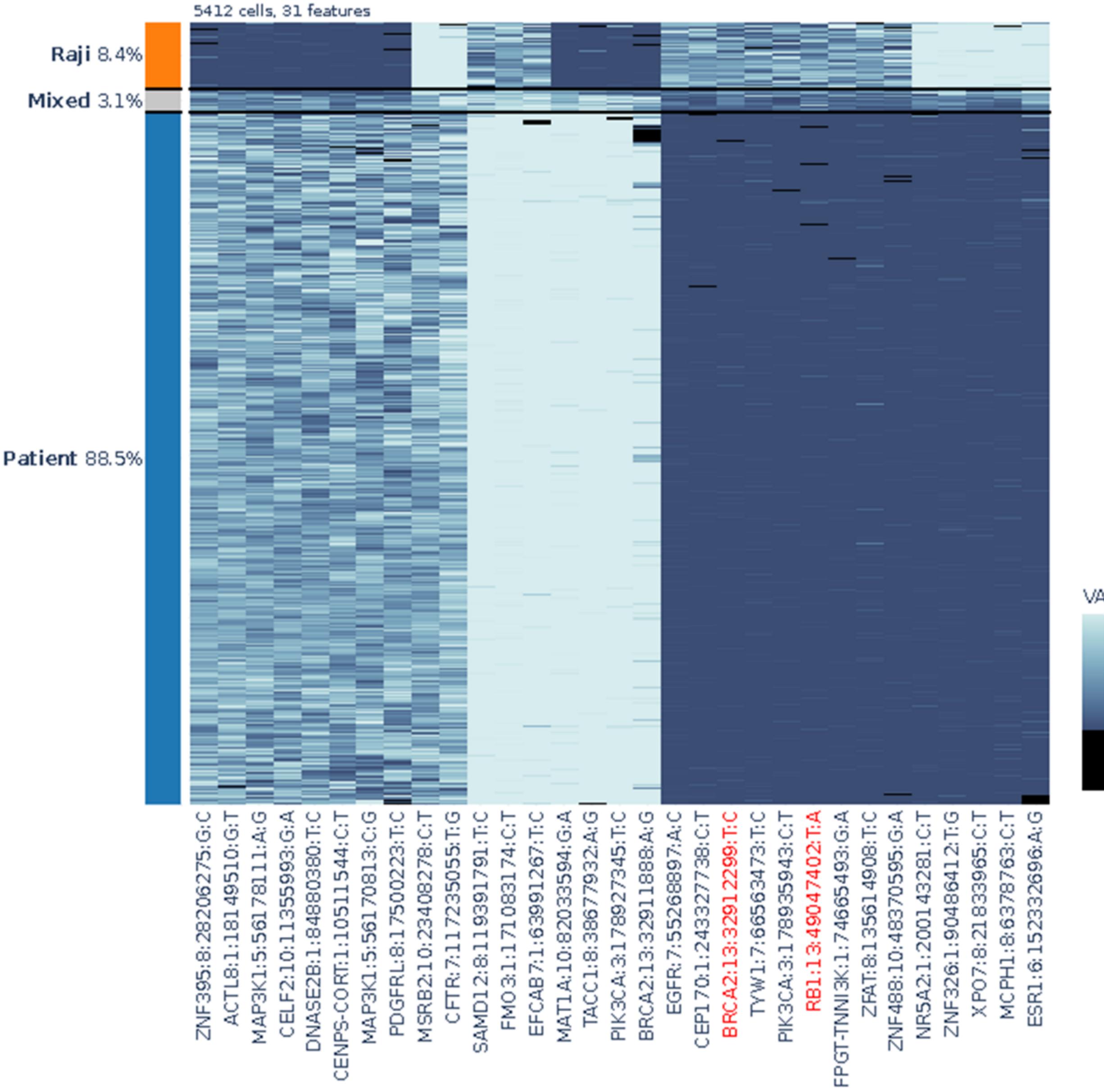
## Methods

- Panel designed in collaboration with Dr. Jorge Reis-Filho to capture SNV and CNV.
  - Minimum of 5 amplicons designed per CNV region
  - Nuclei Isolation protocol was optimized to eliminate nuclei aggregates
  - 3 patient samples run on Tapestri instrument and analyzed via pipeline (Fig 1 & 2)

## Tapestri Pipeline Output



## Figure 2: Bioinformatics Pipeline

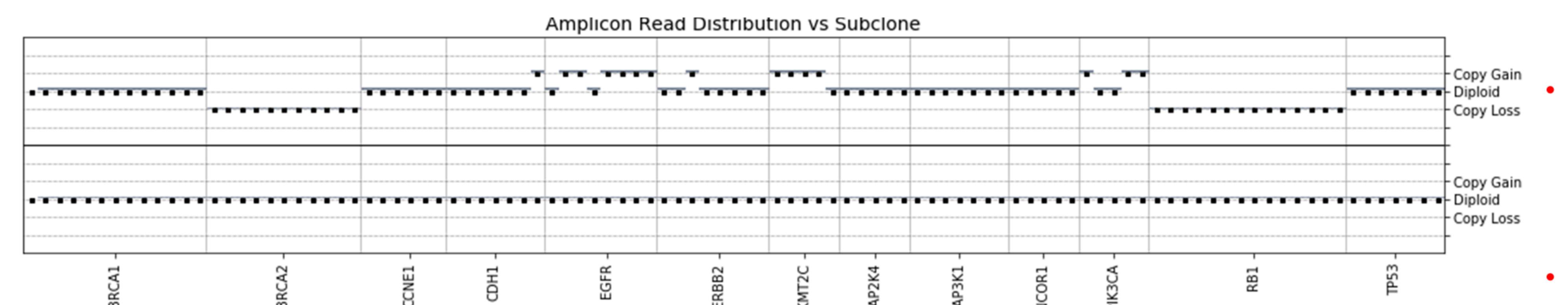


**Figure 3: SNV calling**

Clones are initially identified using the SNV signature. This patient had one clone with the spike-in Raji cells also identified.

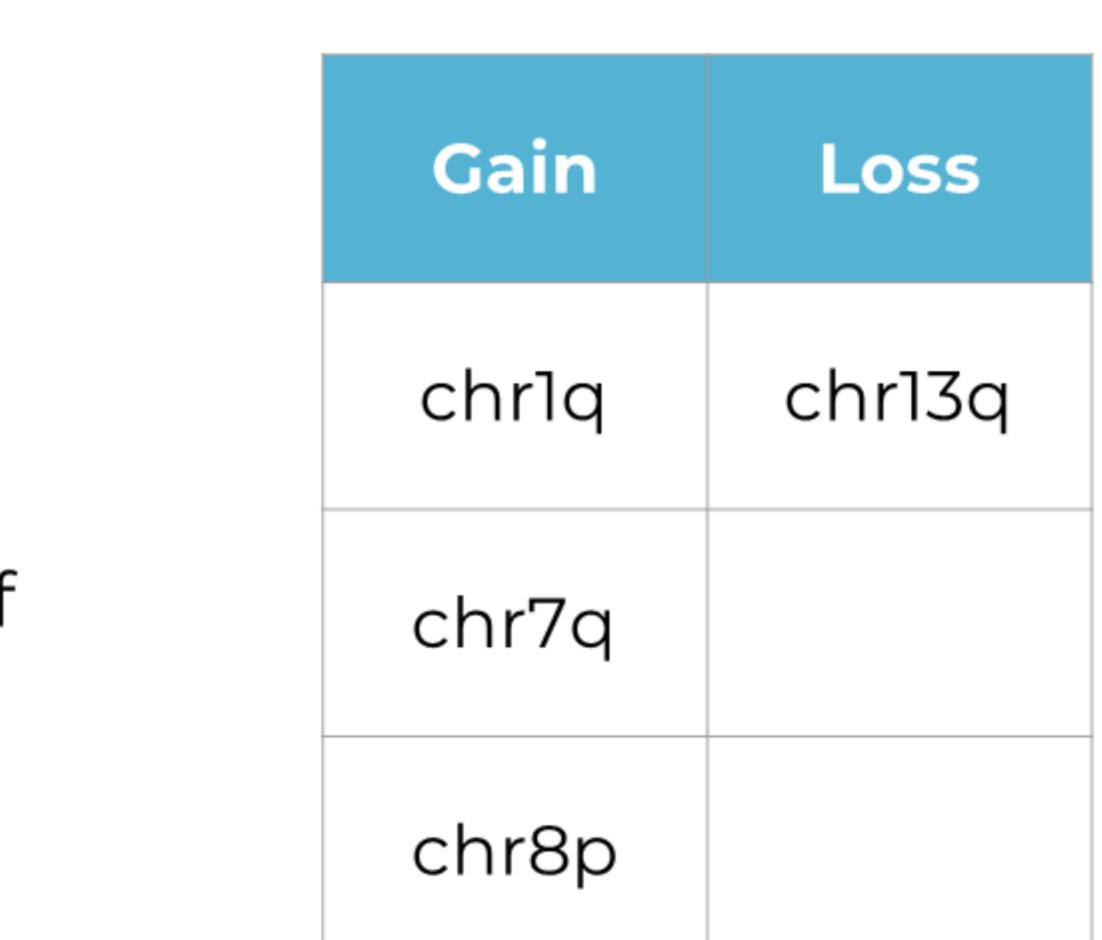
## Results

- We have developed the only end to end solution for simultaneous detection of SNV and CNV in solid tumors at a single cell level.
  - Tapestri was able to identify SNV (**Figure 3**) and CNV (**Figure 4**) in clinically relevant samples.
  - Copy gain was seen in *EGFR* (**Figure 5**) which is amplified in 20+% of all breast cancers and is linked to metastasis.
  - Copy loss was seen in *BRCA2* and *RB1* (**Figure 5**). Both events are associated with poor clinical prognosis



**Figure 5: Chromosomal changes identified at a gene level**

Each dot represents an amplicon assayed using single cell DNA-sequencing. At least 5 amplicons must be changed to call a CNV. This patient had a gain in *EGFR* and a copy loss in *BRCA1* and *RBL1* genes.



# *Ability to call biologically relevant genomic changes in clinical tissue*

# Conclusion

## *Ability to call biologically relevant genomic changes in clinical tissue*

# Single Cell DNA Sequencing Applications for Breast Cancer

- Clonal Mosaicism and Neoplastic Transition
  - Clonal evolution in primary tumors
  - Metastatic dissemination & Epithelial to Mesenchymal transition (EMT)
  - Drug Resistance Mechanisms

# Mission Bio Tapestri Solution

- Simultaneously measures **SNVs**, **indels**, and arm-level **copy number variations (CNVs)** including **loss of heterozygosity (LOH)** at the single-cell level across up to 10,000 cells
  - Unambiguously identifies **variant zygosity** and **mutational co-occurrence**
  - Detects **rare cell populations**

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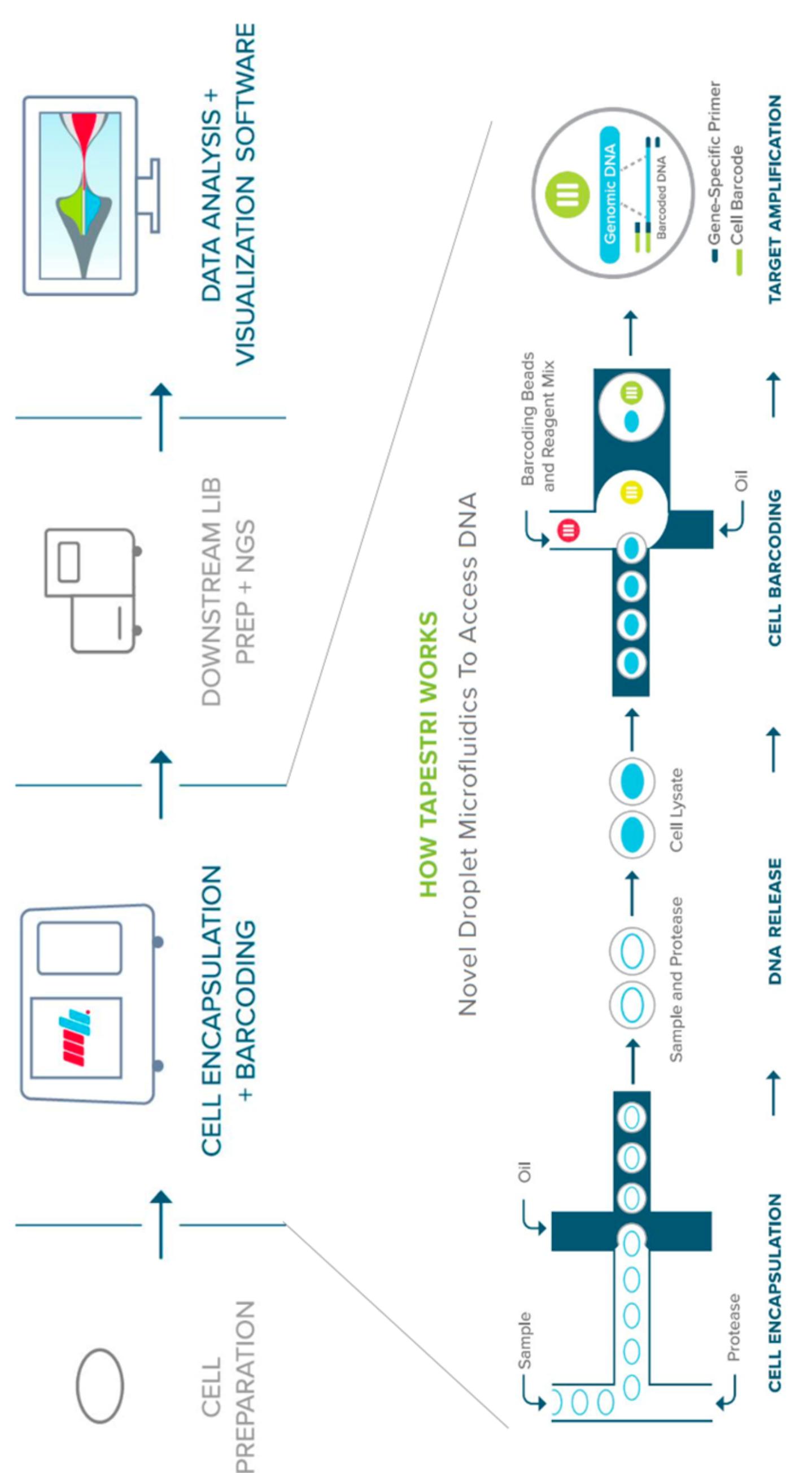


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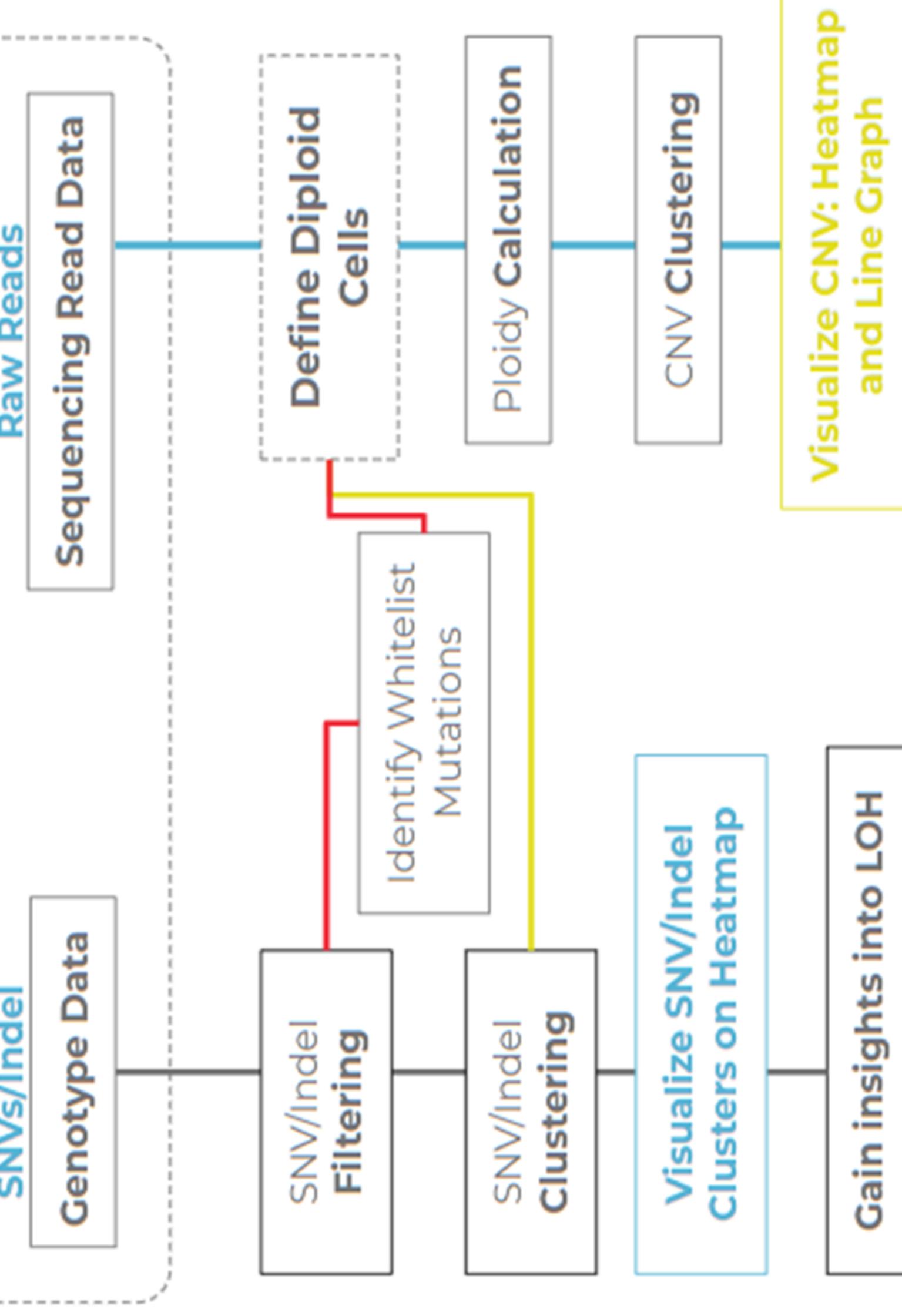


Figure 2: Bioinformatics Pipeline



## The Tapestri Solution

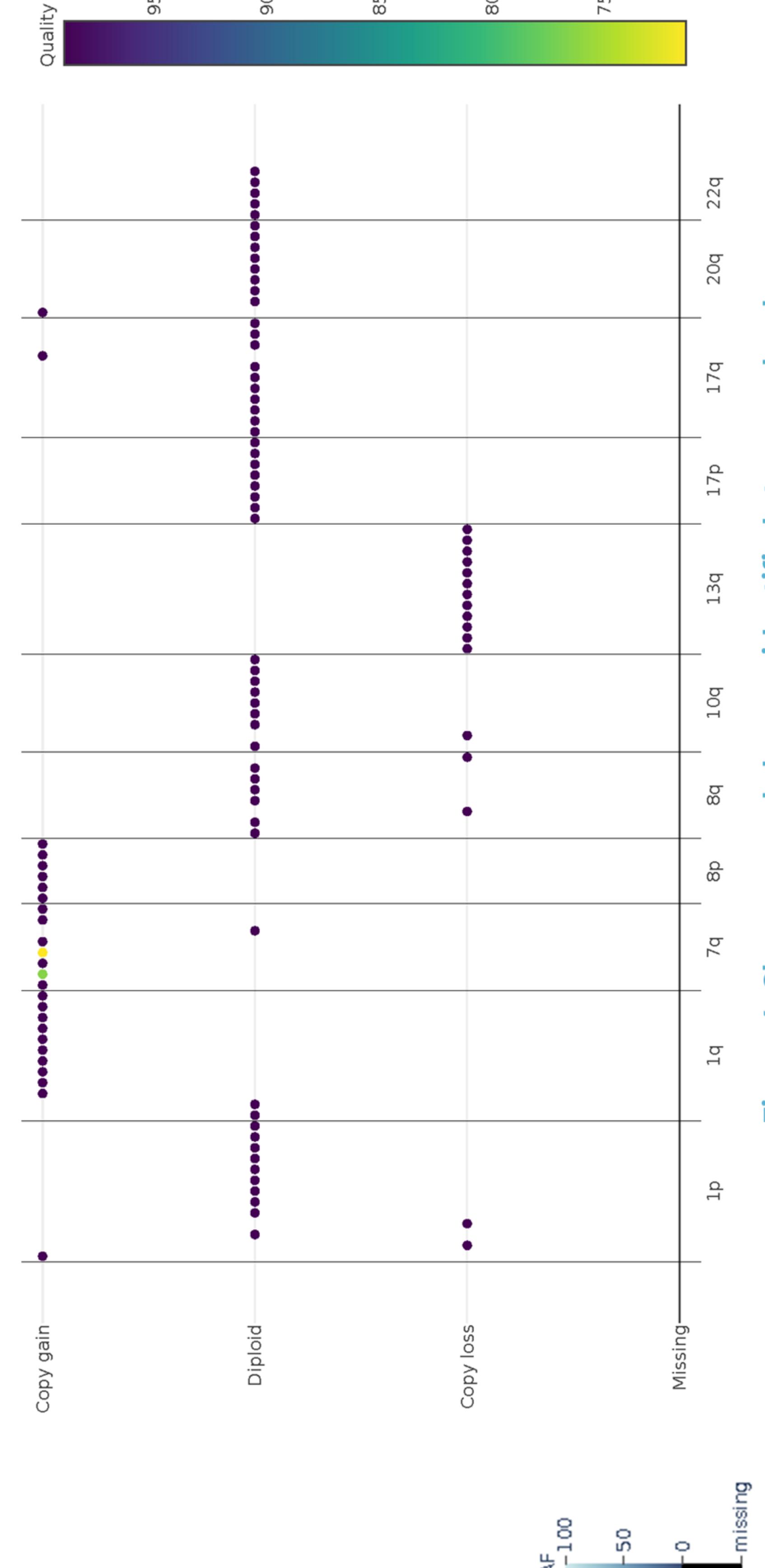


Figure 4: Chromosomal changes identified at an arm level  
Each dot represents an amplicon assayed using single cell DNA-sequencing. At least 5 amplicons must be changed to call a CNV. This patient sample has a gain of chr1q, chr7q, chr8p and a loss at chr 13q.

## Conclusion

Ability to call biologically relevant genomic changes in clinical tissue

	Gain	Loss
chr1q	chr13q	
chr7q		
chr8p		

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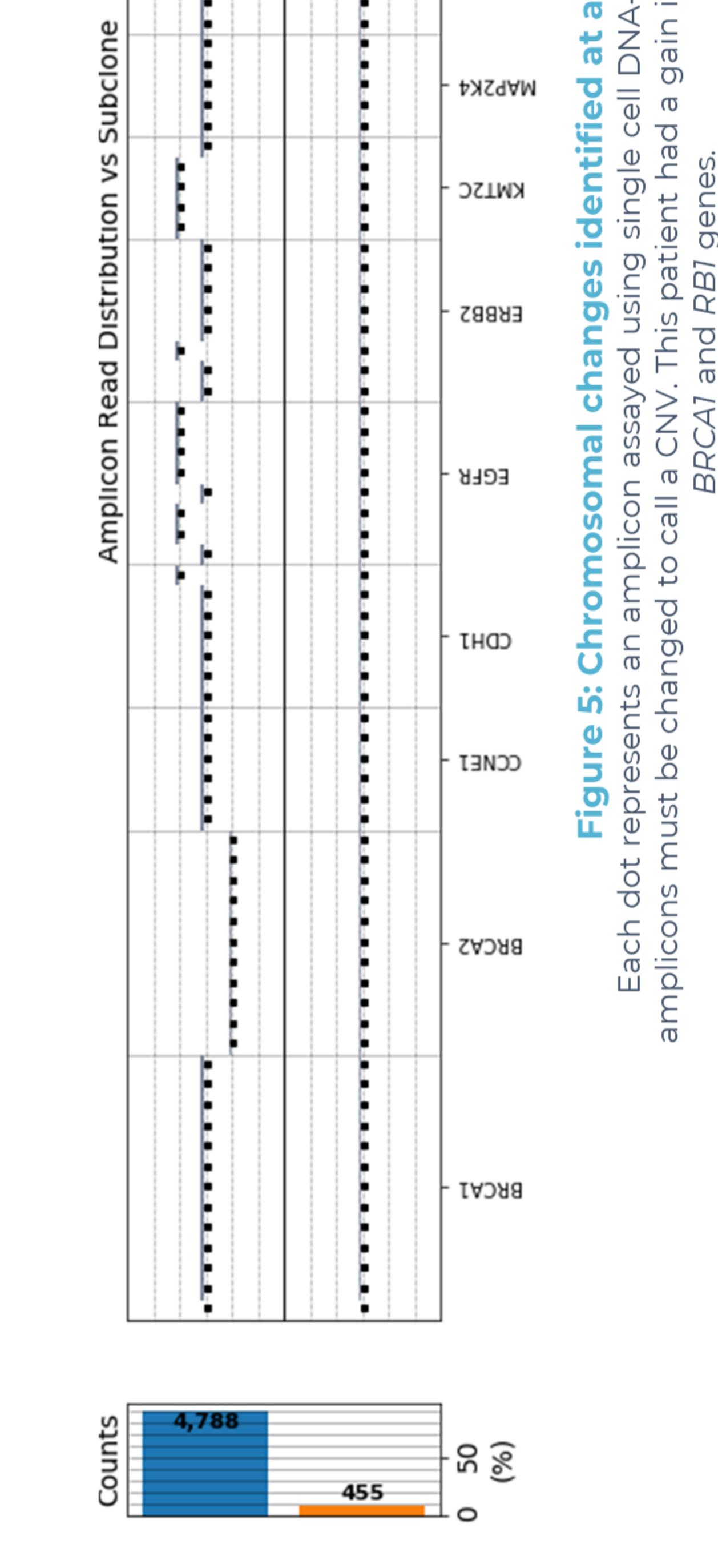


Figure 5: Chromosomal changes identified at a gene level  
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