

Prognostic impact of immunohistological profiling in primary CNS lymphoma

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Background: Despite improvements in the treatment of primary CNS lymphoma (PCNSL), the response to chemotherapy remains heterogeneous and overall prognosis poor. Thus, identification of predictive and prognostic biomarkers for risk-stratified treatment decisions is highly desirable. We investigated the prognostic significance of B cell differentiation status and common B cell differentiation markers in 119 PCNSL patients homogenously treated with high-dose methotrexate (HDMTX)-based chemotherapy within the G-PCNSL-SG1 trial.

Methods: Protein expression of BCL-2, BCL-6, CD10 and MUM-1/IRF-4 were evaluated by immunohistochemistry, and the association with survival was analyzed.

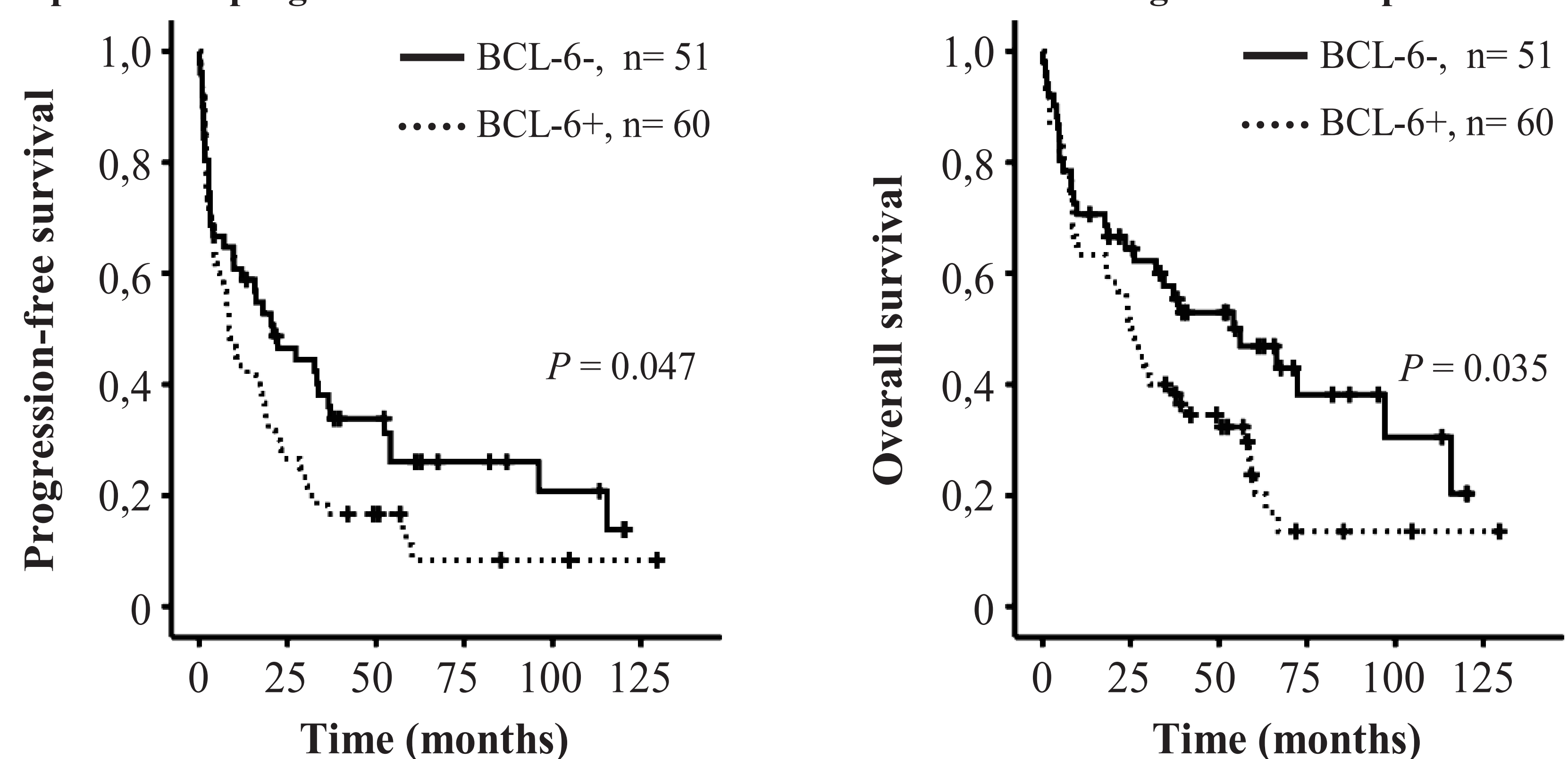
Results: The median follow-up of all patients was 67.5 months. The median progression-free survival (PFS) was 10.61 (95% CI 4.23-17.00) months; the median overall survival (OS) was 28.85 (95% CI 17.96-39.73) months. Eighty-nine tumors expressed BCL-2 (92.7%), 24 (20.5%) CD10, 60 (54.1%) BCL-6 and 87 (79.0%) MUM-1/IRF-4. On the basis of the Hans algorithm, 80 (73.4%) tumors were classified to the non-GCB group suggesting a post germinal center origin of PCNSL. BCL-6 expression (cut-off point 30%), but none of the other markers, was associated with shorter PFS ($P=0.047$) and OS ($P=0.035$).

Table 1: Univariate and multivariate analyses for PFS and OS

	Univariate analysis			Multivariate analysis		
	Hazard ratio	P value	95% CI	Hazard ratio	P value	95% CI
PFS						
Age ^a	1.01	0.32	0.99-1.03	n.d.	---	---
KPS ^a	0.99	0.23	0.98-1.01	n.d.	---	---
Gender ^a	0.81	0.29	0.54-1.20	0.69	0.108	0.44-1.08
Multifocal brain involvement ^b	1.79	0.011	1.14-2.80	1.20	0.49	0.71-2.03
MSKCC score ^c	1.40	0.14	0.89-2.20	1.87	0.011	1.15-3.04
LDH ^d	1.27	0.43	0.70-2.28	1.41	0.32	0.72-2.76
Surgery (biopsy vs. resection)	1.28	0.24	0.85-1.91	0.94	0.80	0.57-1.54
HDMTX versus HDMTX/IFO	0.99	0.97	0.62-1.58	1.00	1.00	0.60-1.67
BCL-2 ^{**}	1.28	0.60	0.52-3.17	1.09	0.86	0.43-2.77
BCL-6 ^{**}	1.53	0.047	1.01-2.34	1.95	0.005	1.22-3.12
CD10 ^{***}	0.81	0.42	0.49-1.34	0.82	0.46	0.47-1.40
MUM-1/IRF-4 ^{**}	0.96	0.89	0.58-1.60	0.77	0.37	0.43-1.37
GCB/non-GCB ^{**}	1.12	0.65	0.70-1.80	1.20	0.49	0.72-2.00
OS						
Age ^a	1.027	0.026	1.003-1.05	n.d.	---	---
KPS ^a	0.99	0.044	0.97-1.00	n.d.	---	---
Gender ^a	0.75	0.20	0.49-1.16	0.48	0.091	0.20-1.13
Multifocal brain involvement ^b	1.47	0.11	0.91-2.39	2.72	0.019	1.18-6.28
MSKCC score ^c	1.66	0.041	1.02-2.70	2.95	0.016	1.22-7.13
LDH ^d	1.10	0.77	0.59-2.05	1.89	0.38	0.46-7.80
Surgery (biopsy vs. resection)	1.17	0.50	0.75-1.82	0.82	0.67	0.33-2.02
HDMTX versus HDMTX/IFO	0.92	0.76	0.53-1.60	0.37	0.19	0.084-1.63
BCL-2 ^{**}	0.94	0.89	0.38-2.33	0.68	0.62	0.16-3.01
BCL-6 ^{**}	1.66	0.035	1.04-2.65	1.85	0.21	0.71-4.80
CD10 ^{***}	0.61	0.09	0.35-1.07	1.00	1.00	0.39-2.57
MUM-1/IRF-4 ^{**}	1.00	0.99	0.57-1.77	2.13	0.32	0.48-9.41
GCB/non-GCB ^{**}	1.46	0.17	0.86-2.48	1.14	0.79	0.44-2.98

After adjustment for MSKCC score on multivariate analysis BCL-6 expression was associated with shorter PFS (HR 1.95, 95% CI 1.22-3.12, $P=0.005$) but not OS (HR 1.85, 95% CI 0.71-4.80, $P=0.21$). Classification according to Hans algorithm and expression status of BCL-2, CD10 and MUM-1/IRF-4 did not correlate with prognosis.

Figure 1: Comparison of progression-free survival and overall survival according to BCL-6 expression.



Conclusion: The prognostic utility of B cell differentiation status and various B cell differentiation markers to predict outcome in PCNSL patients is currently questionable. Our data confirm an activated B cell like immunophenotype and post-GC origin of most PCNSL and indicate BCL-6 expression as a valuable biomarker for inferior prognosis. In view of the fact that several previous studies reported contradicting results, further prospective studies are necessary to validate our results.

