

Average Age of Diagnosis of Ovarian Cancer for Women with Pathogenic Variants in *BRIP1*, *RAD51C* and *RAD51D*

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BACKGROUND

- Recently, it has been shown that pathogenic variants (PVs) in *BRIP1*, *RAD51C* and *RAD51D* confer an increased lifetime risk of ovarian cancer (5.8–14.8%).
- As such, the NCCN now recommends that risk-reducing salpingo-oophorectomy (RRSO) be considered for women with PVs in these genes, in addition to several high-penetrance genes.¹
- Based on the average age at diagnosis, RRSO is recommended between the ages of 35 and 40 for women with PVs in *BRCA1* and as late as 45 for women with PVs in *BRCA2*.
 - There are no specific age recommendations for women with PVs in *BRIP1*, *RAD51C*, or *RAD51D*.
- Here, we investigated the average age at diagnosis for women with ovarian cancer who carry a PV in *BRIP1*, *RAD51C*, or *RAD51D*.

METHODS

Cohort

- 238 women with a personal history of ovarian cancer were found to carry a single PV in *BRIP1*, *RAD51C* or *RAD51D* through clinical testing with a 25-gene panel between September 2013 and July 2016.
- Clinical information was collected from provider-completed test request forms.
- Women identified with PVs in *BRCA1*, *BRCA2*, or the mismatch-repair (MMR) genes (*MLH1*, *MSH2*, *MSH6*, *PMS2*, *EPCAM*) over the same time period were evaluated for comparison.

Genetic Testing

- The gene panel included *APC*, *ATM*, *BARD1*, *BMPR1A*, *BRCA1*, *BRCA2*, *BRIP1*, *CDH1*, *CDK4*, *CDKN2A*, *CHEK2*, *EPCAM*, *MLH1*, *MSH2*, *MSH6*, *MUTYH*, *NBN*, *PALB2*, *PMS2*, *PTEN*, *RAD51C*, *RAD51D*, *SMAD4*, *STK11*, and *TP53*.
- All genes underwent sequencing and large rearrangement analysis, except *EPCAM* (large rearrangement only).
- PVs are those variants that receive a laboratory classification of Deleterious or Suspected Deleterious.

RESULTS

- Table 2 shows that the average age of diagnosis for women with a PV in *BRIP1* (63.7), *RAD51C* (60.7), or *RAD51D* (56.6) was:
 - Similar to the average age of diagnosis for women with a PV in *BRCA2* (59.3).
 - Older than women with a PV in *BRCA1* (53.5) or the MMR genes (45.2 to 51.3).

Table 1. Personal Cancer History of *BRIP1*, *RAD51C* or *RAD51D* PV Carriers

Gene	Ovarian	Breast + Ovarian
<i>BRIP1</i>	111 (88.1%)	15 (11.9%)
<i>RAD51C</i>	66 (81.5%)	15 (18.5%)
<i>RAD51D</i>	28 (90.3%)	3 (9.7%)
Total	205	33

Note: 12 patients with ovarian cancer and 4 with breast and ovarian cancer had another cancer not listed here.

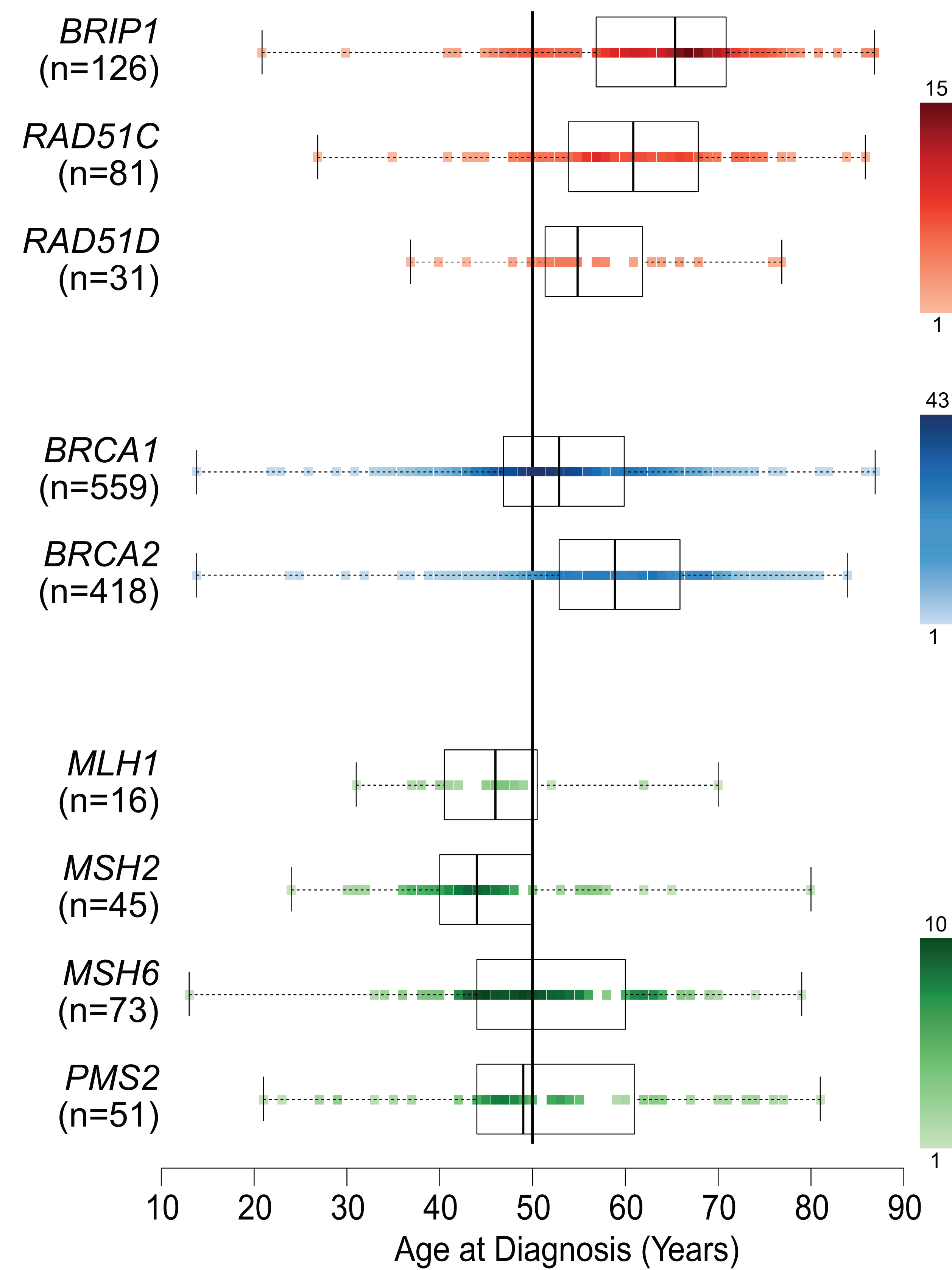
Table 2. Age of Ovarian Cancer Diagnosis

Gene	N	Mean Age (SD)
<i>BRIP1</i>	126	63.7 (11.65)
<i>RAD51C</i>	81	60.7 (10.57)
<i>RAD51D</i>	31	56.6 (9.19)
<i>BRCA1</i>	559	53.5 (9.73)
<i>BRCA2</i>	418	59.3 (10.11)
<i>MLH1</i>	16	47.3 (10.20)
<i>MSH2</i>	45	45.2 (9.89)
<i>MSH6</i>	73	51.3 (10.77)
<i>PMS2</i>	51	50.8 (14.45)
<i>EPCAM</i>	0	—

- The majority of ovarian cancers were diagnosed after the age of 50 among women with a PV in *BRIP1* (85.7%), *RAD51C* (82.7%), or *RAD51D* (77.4%) (Figure 1).

Figure 1. Age of Diagnosis of Ovarian Cancer

The 25–75th percentiles are shown as boxes and a line at age 50 approximates the age of menopause.



CONCLUSIONS

- In this study, we found that the average age of ovarian cancer diagnosis among women with a PV in *BRIP1*, *RAD51C* or *RAD51D* was similar to *BRCA2*.
- Collectively, the data presented here may aid clinical decisions regarding the age at which oophorectomy might be appropriate for women who carry PVs in these 3 genes.
- More research is needed to determine if this management regimen is most beneficial for the patient population in question.

REFERENCES

1. Daly M et al. NCCN Clinical Practice Guidelines in Oncology®: Genetic/Familial High-Risk Assessment: Breast and Ovarian. V 2.2016. March 15. Available at <http://www.nccn.org>.