



# **Molecular Profile**

A newsletter of Molecular Diagnostics & **Molecular Pathology** 

### HAPPY NEW YEAR!

#### January 1, 2007

#### Volume 1, Issue 1

#### **News highlights**

- Division of Molecular Pathology hosted its second annual symposium
- New molecular diagnostic tool for psychiatric therapies
- A genome-based prognostic tool to predict cardiac allograft rejection
- · A new way to predict recurrence of breast cancer
- Drug susceptibility test for Warfarin/Coumadin

#### Inside this issue:

Molecular Pathology symposium concluded

New molecular tests to be considered (Table 1)

Test menu of Molecular Diagnostics at UMMC

Green top alert

Your feedback is needed 2

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Possible New Molecular Diagnostic Tests for Individualized Testing

A number of new molecular tests that are designed to assist in personalized testing could be added to our in house test menu if there are sufficient interests by the UMMC community (see Table I on the back

The Oncotype DX™ test is a 21 gene panel-based diagnostic assay that has been used to predict the likelihood of breast cancer recurrence in women with breast cancer. The AlloMap test™ is a 20 gene panel that is used to predict cardiac allograft rejection. Cytochrome P450 proteins, encoded by a 57 gene family including the CPY2D6 and CYP2C19 genes, are drug metabolizing enzymes. The Roche Diagnostics has developed an AmpliChip CYP450™ test, which was cleared by FDA as a diagnostic test and, can

be used to predict the ability of each individual to metabolize drugs. This test, based on the Affymetrix microarray technology, analyzes an individual's genotypic profile of the Cytochrome P450 CPY2D6 (27 allelic variations) and CPY2C19 (3 allelic variations) genes. Test results allow physicians to consider unique genetic information in selecting medications and doses of medications for a wide variety of diseases. Recently, a prototype system that is based on the same test will be offered for drug selection and dosing information in psychotropic therapeutics. It is well known that psychiatric care often re-

quires the need to fine-tune therapy. Addition of this test to psychiatric care could thus help psychiatrists to choose the right medicine and the right dose for the individual patient. Similar to the AmpliChip® assay, the Third Wave also offers three Invader<sup>TM</sup> tests that can be used to predict susceptibility of each individual to drugs that treat arterial and venous thromboembolic disorders such as Warfarin/Coumadin. If you are interested in any of these tests being developed in house, please contact Dr. Richard Zhao at 6-6301 or email:

rzhao@som.umaryland.edu. Please note that each of these tests has to be further evaluated before implementation in house.

### Symposium on "From Nanotechnology to Personalized Medicine"

The Second Annual Symposium on Translational Research in Molecular Pathology was held at HSFII auditorium on November 14th, 2006. Ten experts presented at this symposium. A total of 140 people registered and attended the conference. Besides the University of Maryland School of Medicine and University of Maryland Biotechnology Institute, this year's attendants came from 19 other institutions. Dr. Robert C Gallo, co-discoverer of the HIV/ AIDS and Director of the Institute of Human Virology delivered a keynote speech on "the End or the Beginning of the Drive to an HIV Preventive





Keynote speech by Dr. Robert C. Gallo

Vaccine: a view from over quarter of a century". E. Al-

bert Reece, MD, PhD, MBA, Vice President for Medical Affairs, University of Maryland John Z. and Akiko K. Bowers Distinguished Professor and Dean, School of Medicine introduced Dr. Gallo and emphasized the importance of this symposium. The symposium is organized by the Division of Molecular Pathology, Department of Pathology, co-sponsored by the University of Maryland Marlene and Stewart Greenebaum Cancer Center and the Center for Nanomedicine and Cellular Delivery.

#### **Molecular Profile**



Our goal is to meet the molecular diagnostic needs of physicians and to improve our patient care at the UMMC community, your feedback is important to us

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Table 1. Possible new molecular tests for individualized testing\*

| Gene/disease tested   | Implication in personalized medicine   |
|---|--|
| Genomics-derived 20 gene panel/Heart disease                          | To predict cardiac allograft rejection   |
| Cytochrome P450  2D6 and 2C19 gene polymorphism/Psychiatric disorders | To predict ability of each individual to metabolize drugs; assist in drug selection and dosing   |
| UGTIAI TA repeats/Colon cancer  | To predict susceptibility of individual to chemotherapy drug Camptosar   |
| CYP2C9/ Arterial and venous thromboembolic disorders                  | To predict susceptibility of individual to Warfarin/Coumadin   |
| VKORCI/ Arterial and venous thromboembolic disorders                  |  |
| Breast cancer   | Genomics-derived 21 gene panel to predict recurrence with newly diagnosed, early stage invasive breast cancer.   |
|   | Genomics-derived 20 gene panel/Heart disease Cytochrome P450 2D6 and 2C19 gene polymor- phism/Psychiatric disorders  UGTIAI TA repeats/Colon cancer CYP2C9/ Arterial and venous thromboembolic disorders  VKORCI/ Arterial and venous thromboembolic disorders |

Table 2. Current test menu of molecular diagnostics laboratory at UMMC

| Infectious Diseases             | CMV Quantitative Real-time PCR      | Ashkenizi Familial Dysautonomia (FD)*                                 |
|---------------------------------|-------------------------------------|---|
| HIV-I Quantitative RT-PCR (Std) | EBV Qualitative PCR**               | Factor V Leiden Mutation Analysis by PCR                              |
| HIV-I Quant. RT-PCR (Ultra)     | Toxoplasma gondii Qualitative PCR   | Factor II Mutation Analysis by PCR                                    |
| HIV-I Genotyping                | Genetic and Familiar Dis-<br>orders | Hematology/Oncology   |
| HIV-I Virtual Phenotyping       | Cystic Fibrosis (CF)*               | Immunoglobulin Gene Arrangement by Southern hybridization             |
| HCV Qualitative RT-PCR          | Ashkenazi Canavan Disease (CD)*     | Immunoglobulin Gene Arrangement by PCR (VDJ PCR)                      |
| HCV Genotpying                  | Ashkenazi Gaucher Disease*          | T-cell receptor (TCR) gene arrange-<br>ment by Southern hybridication |
| HSV-1/2 Qualitative PCR         | Ashkenazi Tay-Sachs (TS)*           | T-cell receptor gene arrangement analysis by PCR                      |
| CMV Qualitative Real-time PCR   | Ashkenazi Niemann-Pick (NP)*        | * special request; **available soon                                   |

#### Green top should be avoided for molecular testing

Please pay attention to the tube requirement when you order a specific molecular-based diagnostic test. In general, DO NOT use green-top (heparin) tube as heparin inhibits PCR reactions. Yellow-top (ACD)

tube or lavender-top (EDTA) tube are acceptable for molecular testing. Call 8-2969 if you will have any questions.



## Need a new molecular test done in house?

If you are interested in implementing a new molecular test in house for rapid turn around time, please call Dr. Richard Zhao at 6-6301 or email:

rzhao@som.umaryland.edu.