CLDN18.2 expression is associated with clinicopathological features and prognosis of Chinese patients with digestive system cancers: a retrospective analysis



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Introduction

Claudin18.2 (CLDN18.2) is a promising therapeutic target in solid tumors. Understanding its expression profile and characteristics will be important to instruct clinical trials and clinical practice. This study investigated the prevalence of CLDN18.2 expression in Chinese patients with digestive system cancers and its correlation with clinicopathological features and prognosis.

Methods

- We retrospectively collected formalin-fixed paraffin-embedded tissue from patients with digestive system cancers who were screened for CT041-CG4006 (NCT03874897) and CT041-ST-01 (NCT04581473) trials between June 2019 to April 2021.
- Corresponding clinical and survival data were obtained from medical records. CLDN18.2 expression was detected by immunohistochemistry (clone 14F8; prediluted mouse monoclonal antibody; CARsgen). CLDN18.2 positivity was defined as expression of CLDN18.2 in any percentage of tumor cells with intensity $\geq 1 + (Fig 1)$.
- Univariable logistic regression analysis or Wilcoxon rank sum test was used to explore the factors associated with CLDN18.2 expression. P values are reported for the exploratory purpose without adjustment for multiplicity. OS is analyzed using Kaplan-Meier method. Log-rank test is used to compare the survival curve.

Results

A total of 875 cases with GI cancers were analyzed, including 536 gastric cancer (GC), 165 pancreatic cancer (PC), 142 colorectal cancer (CRC), and 32 biliary tract carcinoma (BTC).

- CLDN18.2 expression was observed in
 - 73.1% of GC patients.
 - 61.8% of PC patients.
 - 10.6% of CRC patients.
 - 5.6% of BTC patients.
- In patients with GC (**Table 1**):
 - CLDN18.2-positive expression was associated with younger age, female sex, greater presentation in the stomach, Lauren diffuse type, and higher incidence of uterine adnexa metastasis.
 - Moreover, a lower positive rate of programmed cell death ligand 1 (PD-L1) expression was found in the tumors of patients with CLDN18.2-positive GC.
 - The median OS of patients with CLDN18.2-negative GC was significantly longer than that of patients with CLDN18.2positive GC (1112 vs. 633 days, *P*=0.017) (**Fig 2**).
- In patients with PC (**Table 2**):
 - There was no significant association between CLDN18.2 positivity and clinicopathological characteristics.
 - No significant difference in OS was observed between patients with CLDN18.2-positive PC and those with CLDN18.2-negative PC (*P*=0.252) (**Fig 3**).

Results									
Table 1. CLDN18.2 expression and characteristics in patients with GC Table 2. CLDN18.2 expression and characteristics of patients with P									with PC
Characteristics	Total N=536	CLDN18.2 positive N=392	CLDN18.2 negative N=144	Univariate analysis <i>P</i>	Characteristics	Total N=165	CLDN18.2 positive N=102	CLDN18.2 negative N=63	Univariate analysis <i>P</i>
Age, median	54.0	52.0	59.0	<0.001	Age, median	60.0	60.0	60.0	0.997
Sex, n (%)					Sex, n (%)				
Male	336 (62.7)	230 (58.7)	106 (73.6)	ref.	Male	106 (64.2)	39 (63.9)	67 (64.4)	ref.
Female	198 (36.9)	161 (41.1)	37 (25.7)	0.001	Female	59 (35.8)	22 (36.1)	37 (35.6)	0.399
Unknown	2 (0.4)	1 (0.3)	1 (0.7)	-	Unknown	0	0	0	_
Primary tumor location, n (%)					Primary tumor location, n (%)				
EGJ	57 (10.6)	33 (8.4)	24 (16.7)	0.007	Pancreatic body	59 (35.8)	40 (39.2)	19 (30.2)	_
Stomach	479 (89.4)	359 (91.6)	120 (83.3)	ret.	Pancreatic head	41 (24.8)	19 (18.6)	22 (34.9)	_
Tumor stage, n (%)			04 (00 0)	0.404	Pancreatic tail	21 (12.7)	12 (11.8)	9 (14.3)	
Non-IV	183 (34.1)	130 (33.2)	53 (36.8)	ref.	Other parts of the pancreas	9 (5.5)	9 (8.8)	0	_
Metastatic sites, n (%)					Unknown	35 (21.2)	22 (21.6)	13 (20.6)	-
Peritoneum	201 (37.5)	154 (39.3)	47 (32.6)	0.160	Tumor stage, n (%)		. ,	. ,	
Liver	142 (26.5)	92 (23.5)	50 (34.7)	0.009	IV	31 (18.8)	20 (19.6)	11 (17.5)	ref.
Uterine adnexa	87 (16.2)	78 (19.9)	9 (6.2)	<0.001	Non-IV	109 (66.1)	64 (62.7)	45 (71.4)	0.561
Bone	59 (11.0)	46 (11.7)	13 (9.0)	0.376	Unknown	25 (15 1)	18 (17 6)	7 (11 1)	-
Lung	51 (9.5)	34 (8.7)	17 (11.8)	0.275	Metastatic sites n (%)	20 (1011)		, (, , , , , , , , , , , , , , , , , ,	
Lauren type, n (%)						97 (58 8)	56 (54 9)	41 (65 1)	0 198
Diffuse	189 (35.3)	154 (39.3)	35 (24.3)		Peritoneum	38 (23 0)	28 (27 5)	10 (15 9)	0.248
	100(18.7)	06 (24 5)	23 (10.0) 52 (26.1)	0.300		24 (14 5)	19 (18 6)	5 (7 9)	0.066
	00 (18 5)	90 (24.5) 65 (16.6)	34 (23.6)	-	KRAS mutation n (%)			0 (1.0)	0.000
HFR2 nositive n (%)	33 (10.3)	00 (10.0)	34 (23.0)		Negative	2 (1 2)	1 (1 0)	1 (1 6)	rof
No	398 (74 3)	300 (76 5)	98 (68 1)	ref	Positivo	37 (22 /)	20 (19 6)	17 (27 0)	0.011
Yes	51 (9.5)	29 (7.4)	22 (15.3)	0.006	linknown	126 (76 /)	81 (79 /)	17(21.0)	-
Unknown	87 (16.2)	63 (16.1)	24 (16.7)	-	PD-I 1 expression	120 (70.4)	01 (79.4)	43 (71.4)	_
PD-L1 expression, n (%)						10 (6 1)	6 (5 0)	1 (6 3)	rof
CPS<1	143 (26.7)	114 (29.1)	29 (20.1)	ref.		20(12.1)		4 (0.3)	
CPS≥1	193 (36.0)	128 (32.7)	65 (45.1)	0.007		20(12.1)		0(14.2)	0.000 rof
CPS<5	224 (41.8)	169 (43.1)	55 (38.2)	ref.		22(13.4)	$\frac{13(12.7)}{2(2.0)}$	9 (14.3)	
CPS≥5	112 (20.9)	73 (18.6)	39 (27.1)	0.049		8 (4.8)	3 (2.9)	5 (7.9)	0.301
Unknown	200 (37.3)	150 (38.3)	50 (34.7)	-		135 (81.8)	00 (04.3)	49 (77.8)	-
MMR, n (%)						(00 7)			
pMMR	460 (85.8)	344 (87.8)	116 (80.6)	ref.	риик	49 (29.7)	28 (27.5)	21 (33.3)	-
dMMR	8 (1.5)	5 (1.3)	3 (2.1)	0.435		1 (0.6)			-
Unknown	68 (12.7)	43 (11.0)	25 (17.4)	-	Unknown	137 (83.1)	85 (83.3)	52 (82.5)	-
TMB, n (%)					TMB, n (%)				
<10 mutations/Mbp	97 (18.1)	73 (18.6)	24 (16.7)	ref.	<10 mutations/Mbp	28 (17.0)	17 (16.7)	11 (17.5)	-
≥10 mutations/Mbp	22 (4.1)	13 (3.3)	9 (6.2)	0.131	≥10 mutations/Mbp	2 (1.2)	0	2 (3.2)	-
Unknown	417 (77.8)	306 (78.1)	111 (77.1)	-	Unknown	135 (81.8)	85 (83.3)	50 (79.4)	-

CLDN18.2: claudin 18.2; CPS: combined positive score; dMMR: deficient mismatch repair; EGJ: esophagogastric junction; HER2: human epidermal growth factor receptor 2; KRAS: KRAS proto-oncogene, GTPase; MMR: mismatch repair; PD-L1: programmed cell death ligand 1; pMMR: proficient mismatch repair; TMB: tumor mutational burden.

Conclusion

We observed a high prevalence of CLDN18.2 expression in Chinese patients with digestive system cancers. Patients with CLDN18.2-positive GC showed different clinicopathological characteristics, metastatic patterns, and a trend for poorer OS compared to CLDN18.2 negative GC. More comprehensive characteristics of CLDN18.2-positive GC are in progress and will be reported in the future.

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Figure 1. Expression level of CLDN18.2 by immunohistochemistry.



Figure 2. Log-rank analysis of CLDN18.2 expression and overall survival in GC.

Figure 3. Log-rank analysis of CLDN18.2 expression and overall survival in PC.

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