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canadian Immunohistochemistry Quality control

cIQC

Assessor's report for CIQC Run 22: ER, PR and HER2

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Assessment done Tues May 8, 2012, at Vancouver General Hospital

Overview

This run was a departure from previous CIQC runs in that you were asked to stain a TMA consisting not of formalin-fixed paraffin-embedded tissue samples, but of cell line samples. Heather Neufeld of the University of Saskatchewan selected 9 breast cancer cell lines, including lines expressing and not expressing ER, PR and HER2, grew them up in bulk, and prepared formalin-fixed paraffin-embedded pellets from these cell lines. The microarray consisted of two cores from each of these nine cell lines.

The advantages of cell lines over tissue samples include renewability and the ability to do very detailed characterization of the cell line samples. RT-PCR levels for mRNA expression, and HER2 FISH have been done on these samples, and offer an independent method of assessing ER, PR and HER2 status in these samples. Although these assessments are also possible on tissue samples, the cost of doing this on 40 samples for every CIQC run is prohibitive at present. Disadvantages of using cell lines include the inability to calculate test sensitivity and specificity, and negative and positive predictive values, which requires that you have tested a sufficiently large set of clinical samples that are representative of what you would encounter in practice. As well, the specimen handling for the cell lines is not identical to that used for clinical samples, and criteria for assessment of HER2 membranous staining in cell line samples are not established.

One advantage of cell lines is that it may make it possible to allow each lab in Canada to have their own cell line TMA in house, from which they can cut sections for regular (e.g. weekly) monitoring of ER, PR and HER2 staining, to allow them to detect subtle drift in staining results. New batches of Ab could also be assessed with these TMAs. In this way, the cell line TMAs could complement the three times yearly tissue-based TMA external proficiency testing that does allow calculation of statistical indicators reflecting performance across a series of clinical samples (test sensitivity, specificity, etc.), which is a unique aspect of the CIQC program. This strategy is evolving, as we assess the performance of the cell line TMAs, and

HER2: Assessment of HER2 membranous staining in isolated cells was challenging, and represents a departure from what we do in clinical practice. As such, assessment of HER2 staining in these cores is not a good test of interpretive abilities. Nonetheless, performance of HER2 staining was excellent, with no false positive or false negative results (if 2+ staining results are considered indeterminate and neither a positive or negative result)! While there was some variability from lab to lab, the six cores (cores 5,6,7,8,15,16) from HER2 amplified/over-expressing lines were all considered 3+ or 2+ positive, while none of the HER2 non-amplified/overexpressing lines were 3+. Labe 113 showed high background staining, and cytoplasmic staining of tumor cells.

Lab /Cores	101	102	103	105	106	107	109	110	111	112	113	114	115	116	117	118	119	123	124	125	126	127	129	135	139	145	147	149	150	151	152	153	155	156	157	160	161	162	164	167	170	175	179	186	187	189	190	191	194	198	199	ERBB2			
1	U	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	0.9		
2	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	0.9	
3	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	-3	
4	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	-3	
5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	7.79			
6	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	7.79			
7	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	7.29			
8	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	7.29			
9	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1.49	
10	N	1	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1.49	
11	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	0.4
12	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	0.4
13	N	N	1	1	N	1	N	N	N	N	N	N	1	N	1	N	N	N	N	N	N	N	N	N	1	U	N	N	U	U	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1	1.4
14	N	N	1	1	N	1	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	1	1.4
15	3	3	3	3	2	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	7.29			
16	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	7.29			
17	N	2	2	1	1	2	1	1	1	1	2	1	U	N	U	N	1	1	1	1	1	1	2	2	1	1	2	2	1	2	1	N	1	1	1	2	1	1	1	2	1	N	2	2	2	1	1	U	1	2	2	2.69			
18	N	2	1	1	1	1	1	N	1	1	2	1	1	1	U	N	1	1	1	1	1	1	2	2	1	N	2	2	1	U	1	N	1	2	1	2	1	1	1	2	1	N	2	2	2	1	1	1	2	1	2	2.69			

Thank you for your participation in CIQC. We look forward to continuing to improve the service we are able to offer, working with you and the Canadian Association of Pathologists - Association canadienne des pathologistes. This is our first attempt to use cell lines for breast biomarker proficiency testing and the results are encouraging, in that it does appear that they can identify suboptimal staining results.

submitted on behalf of CIQC, on May 26, 2012

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