

American Association of Neuropathologists

Diagnostic Slide Session 2024 – Case #1 June 8, 2024

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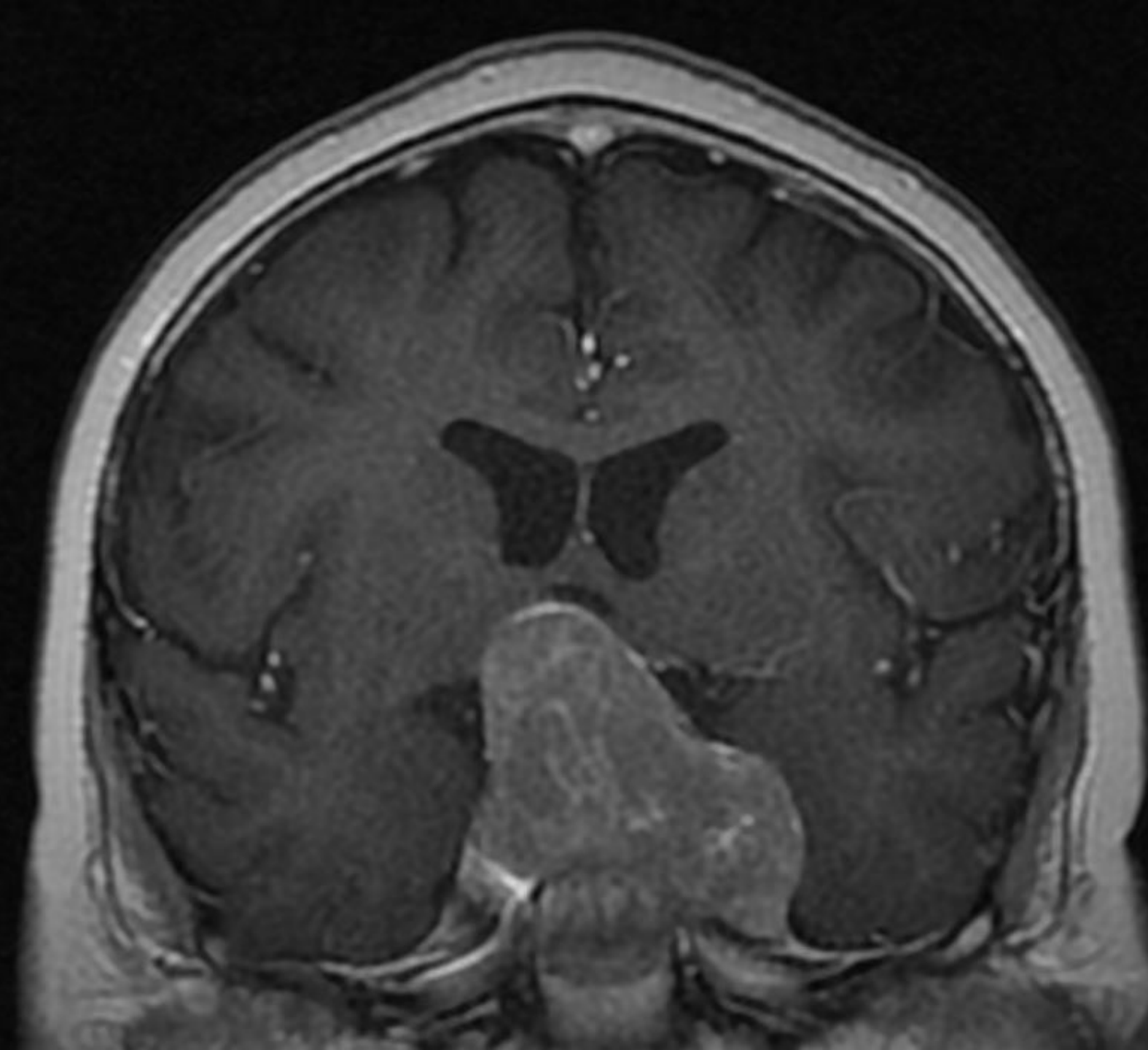
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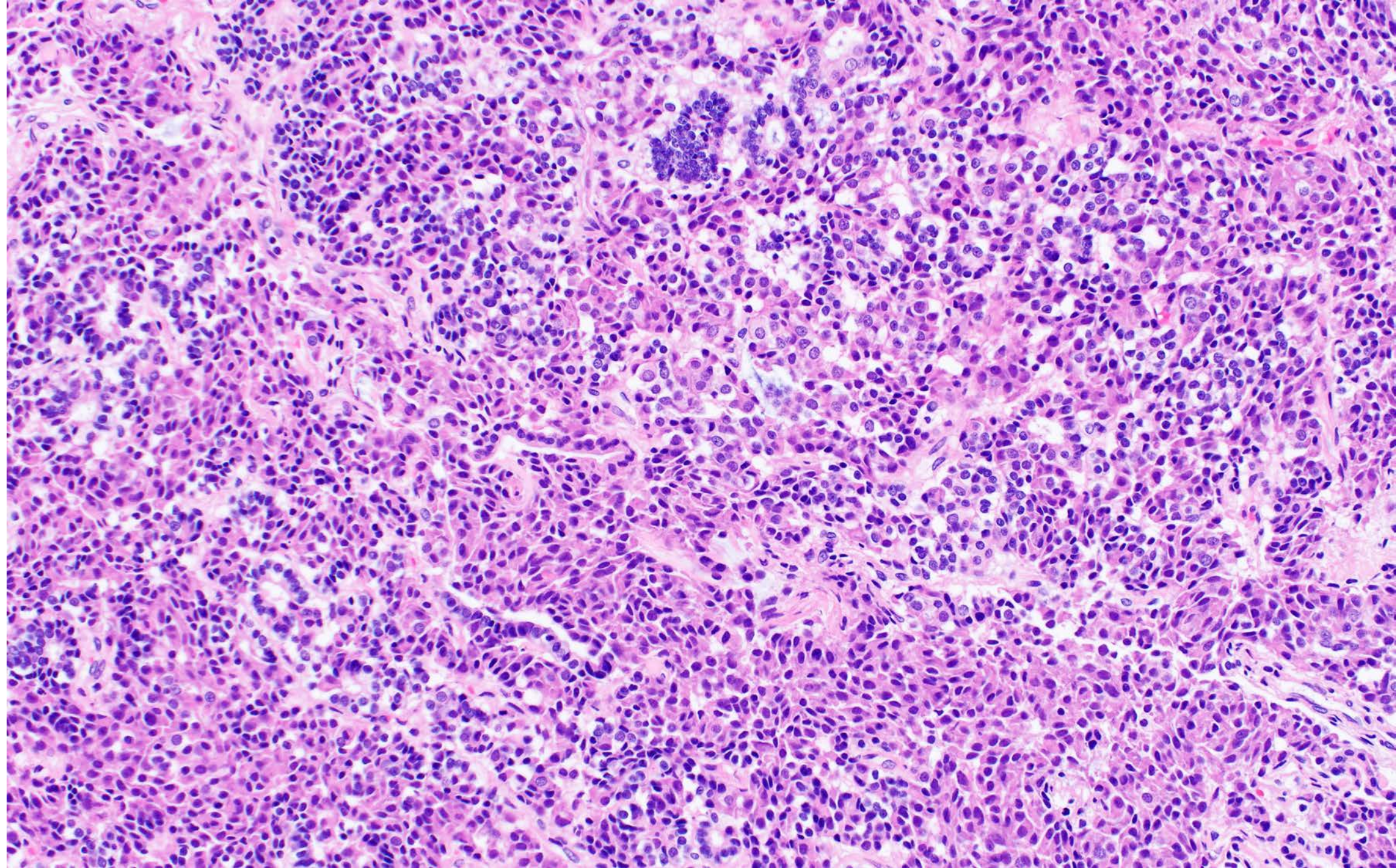
**St. Jude Children's Research Hospital
Memphis TN**

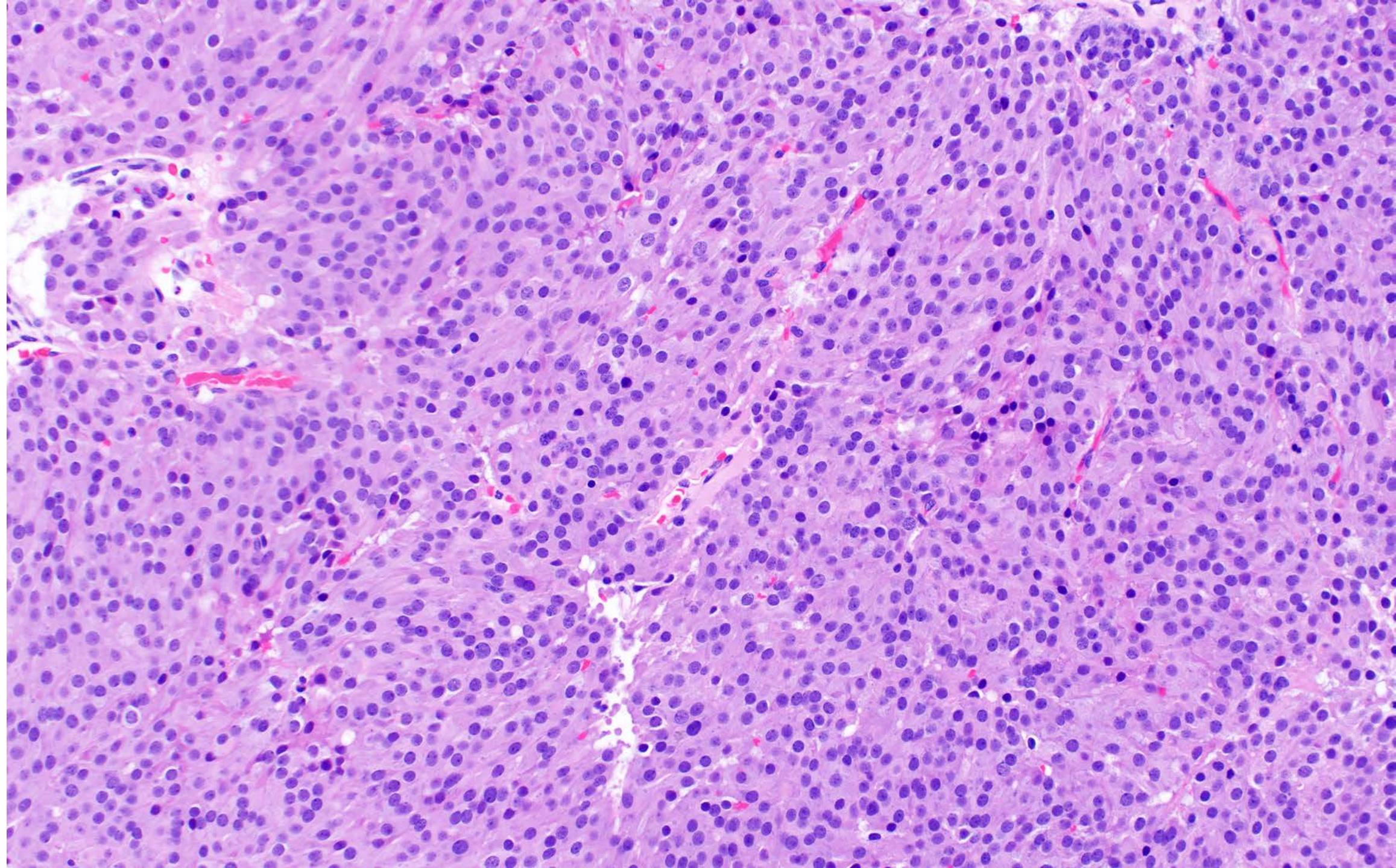


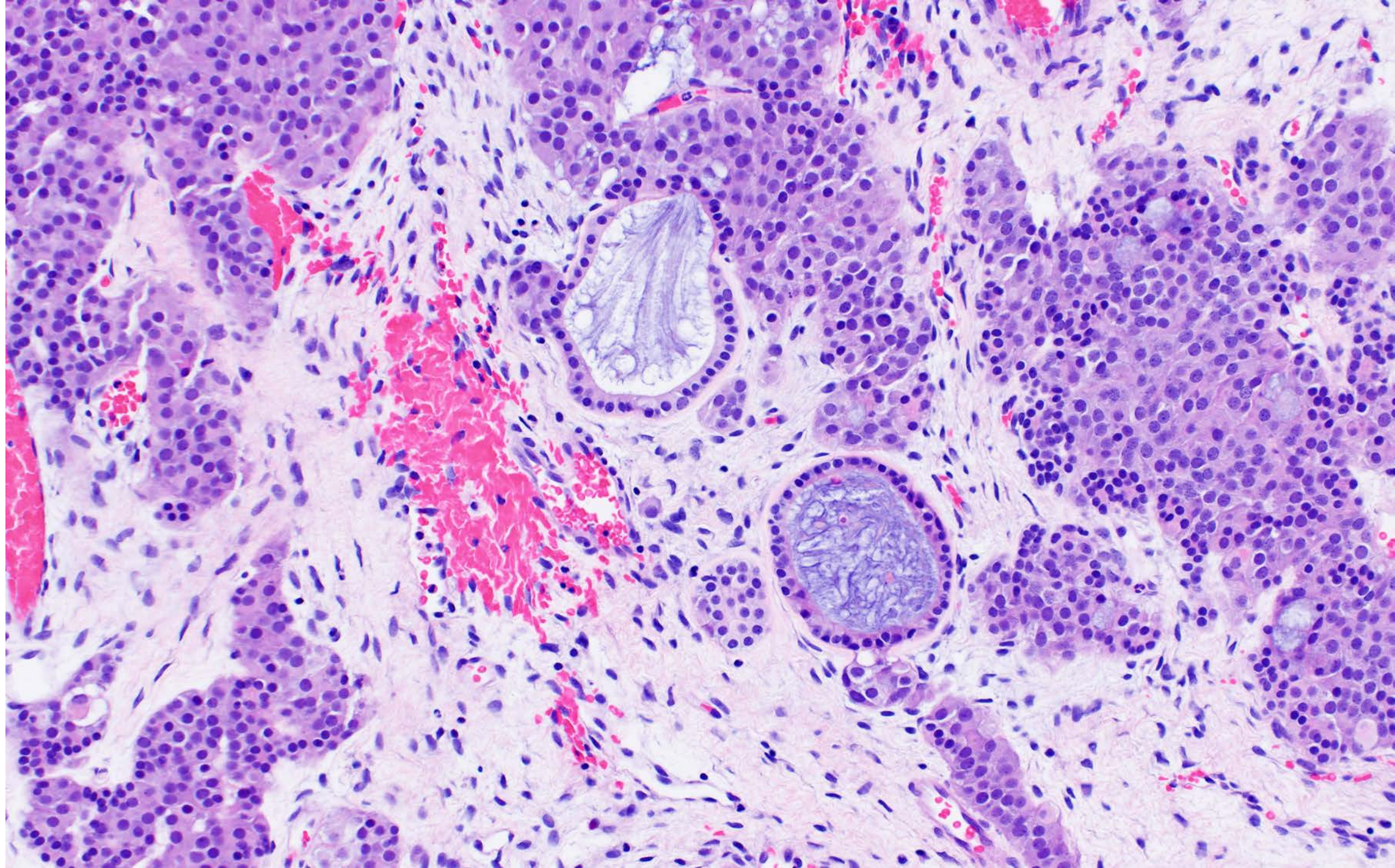
2-year-old male

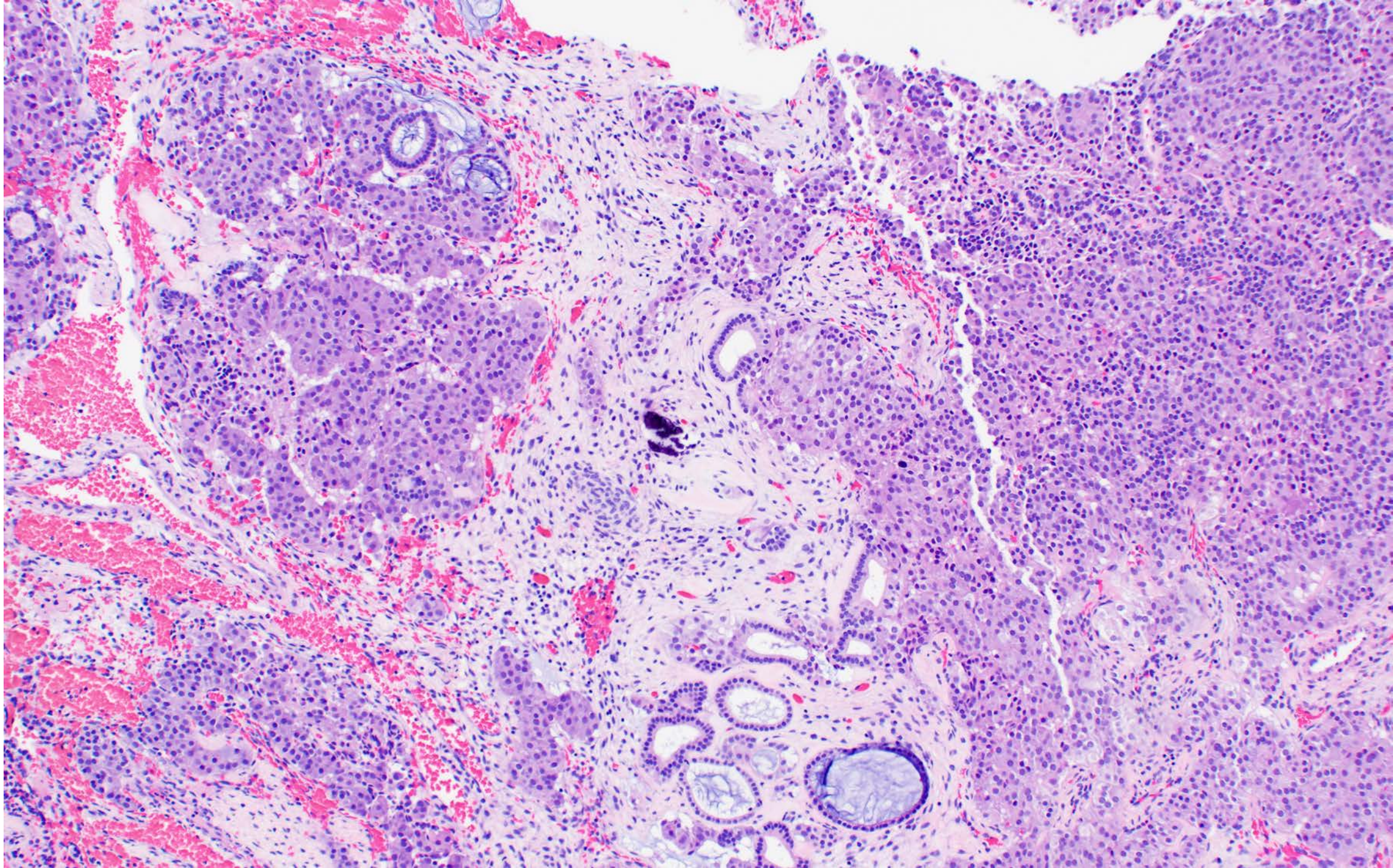
normal at birth, subsequently
presented with weight gain

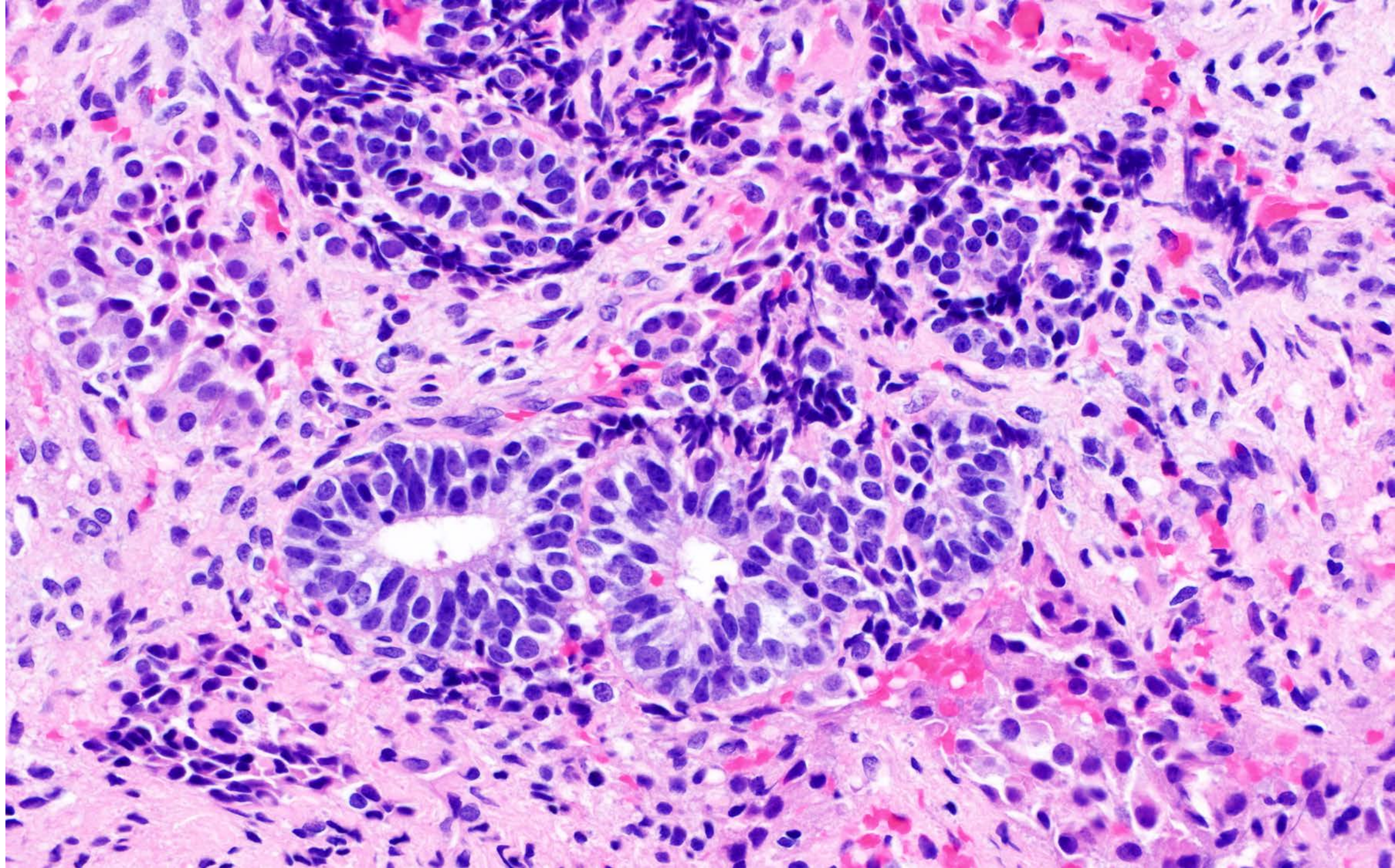
found to have a 3.9 cm
sellar/suprasellar mass
with bilateral cavernous sinus
invasion (L>R)

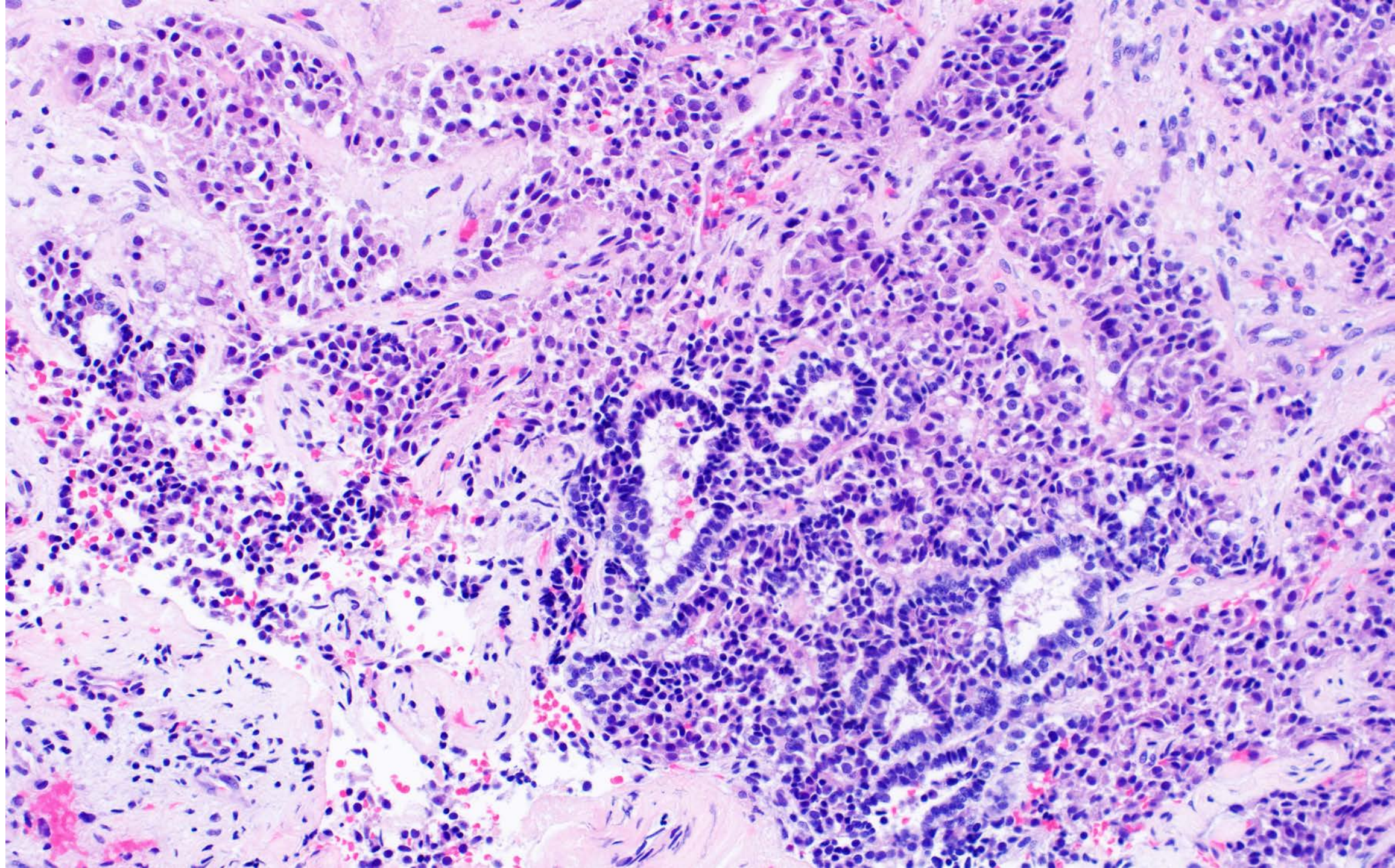


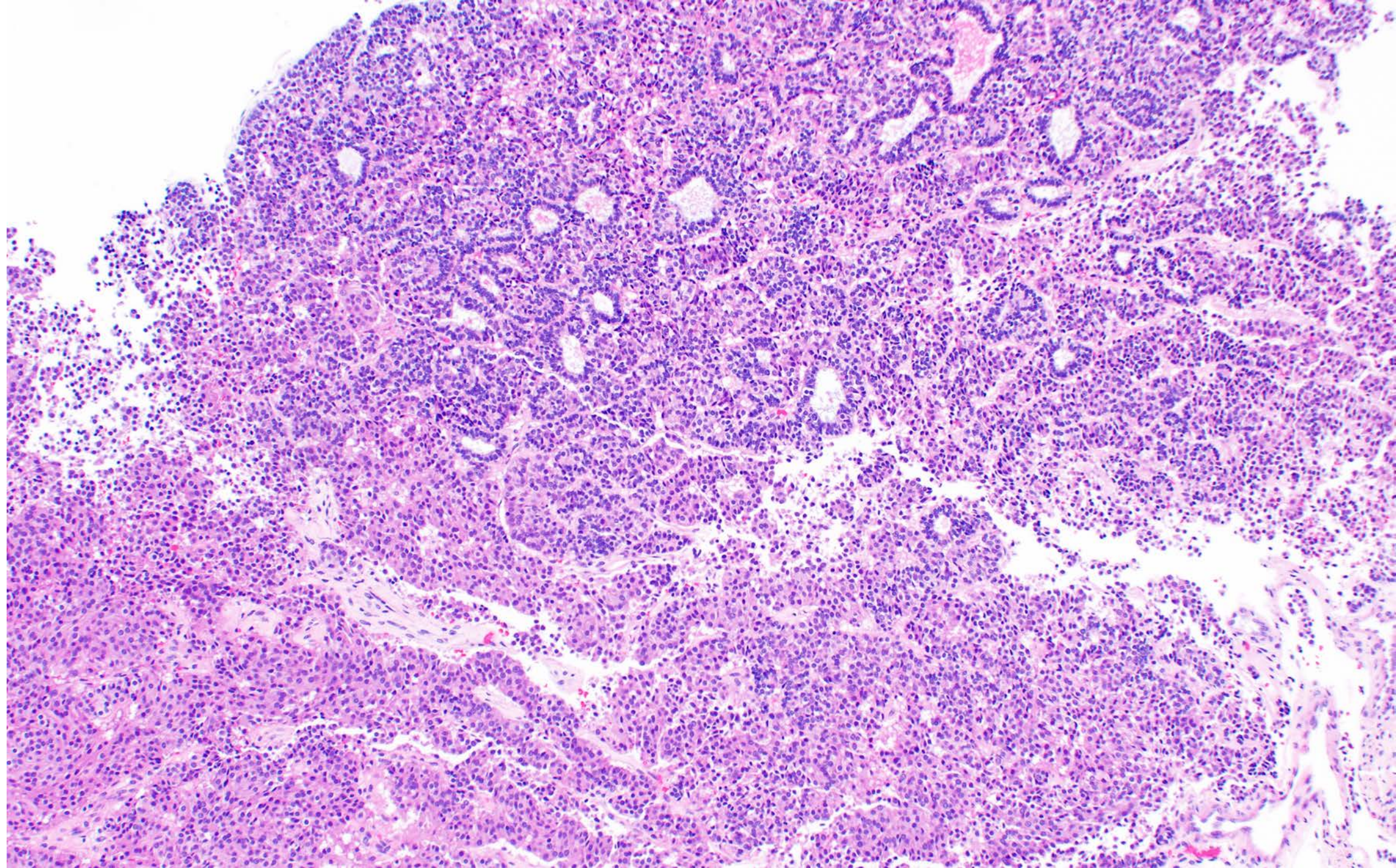


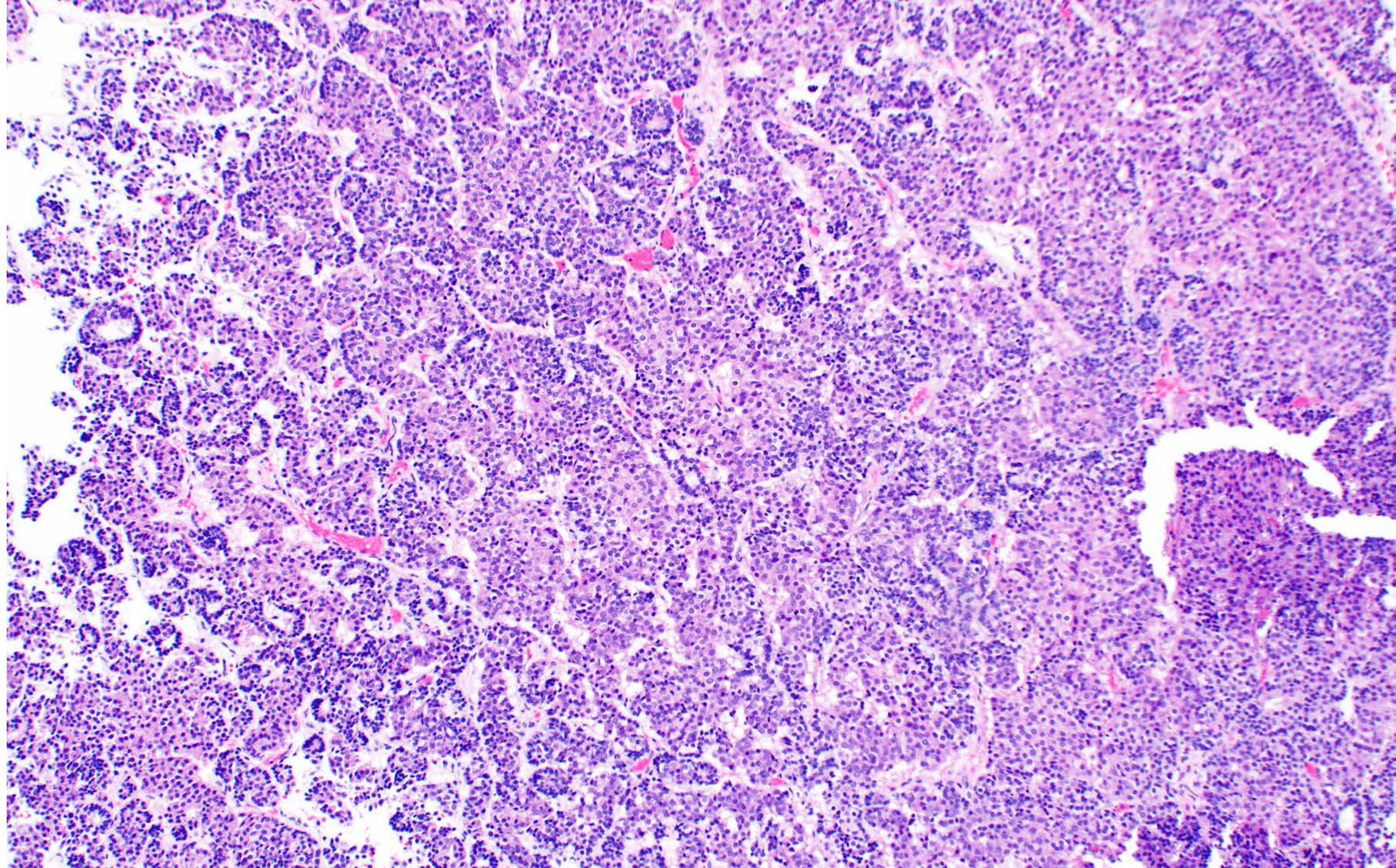


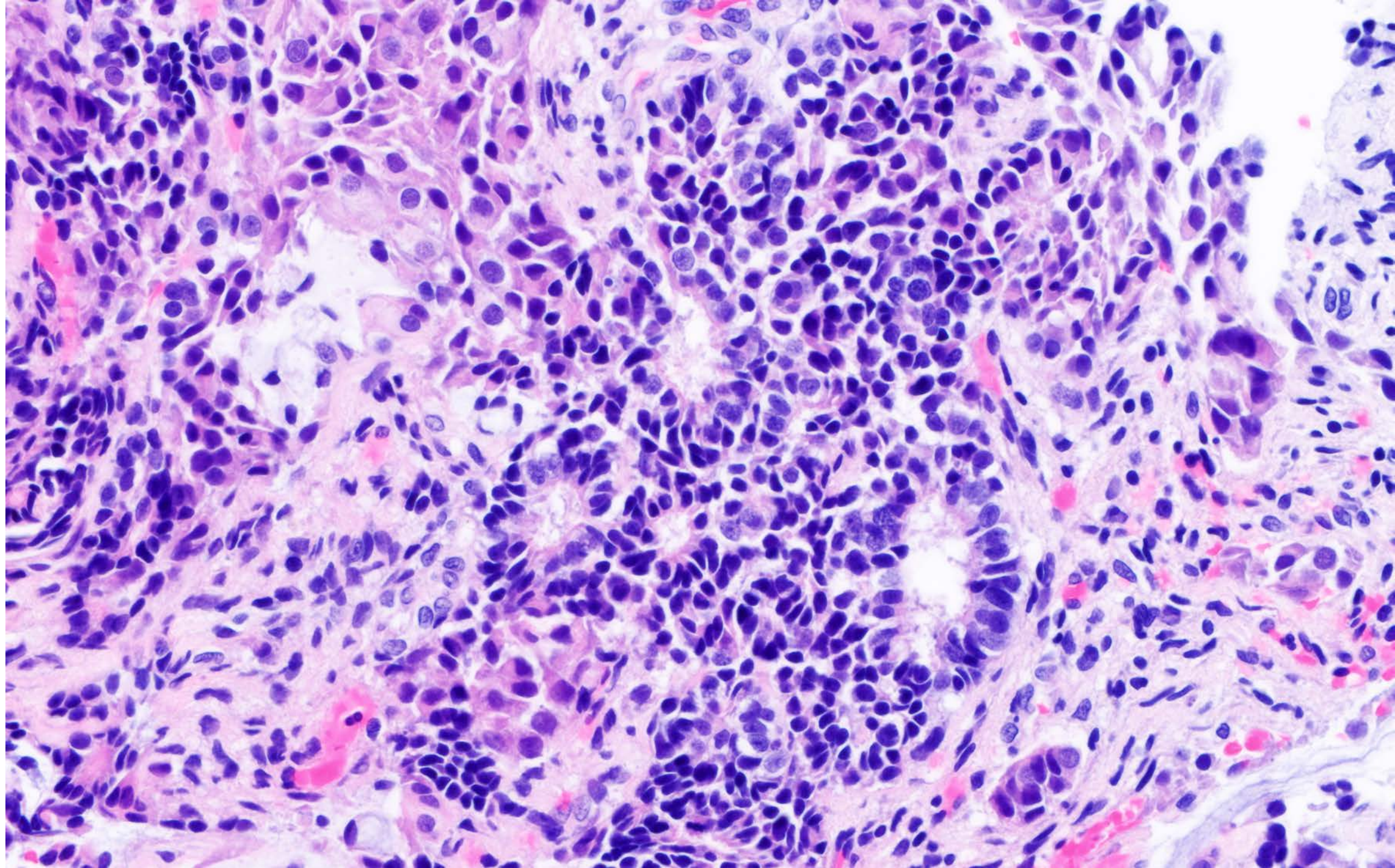


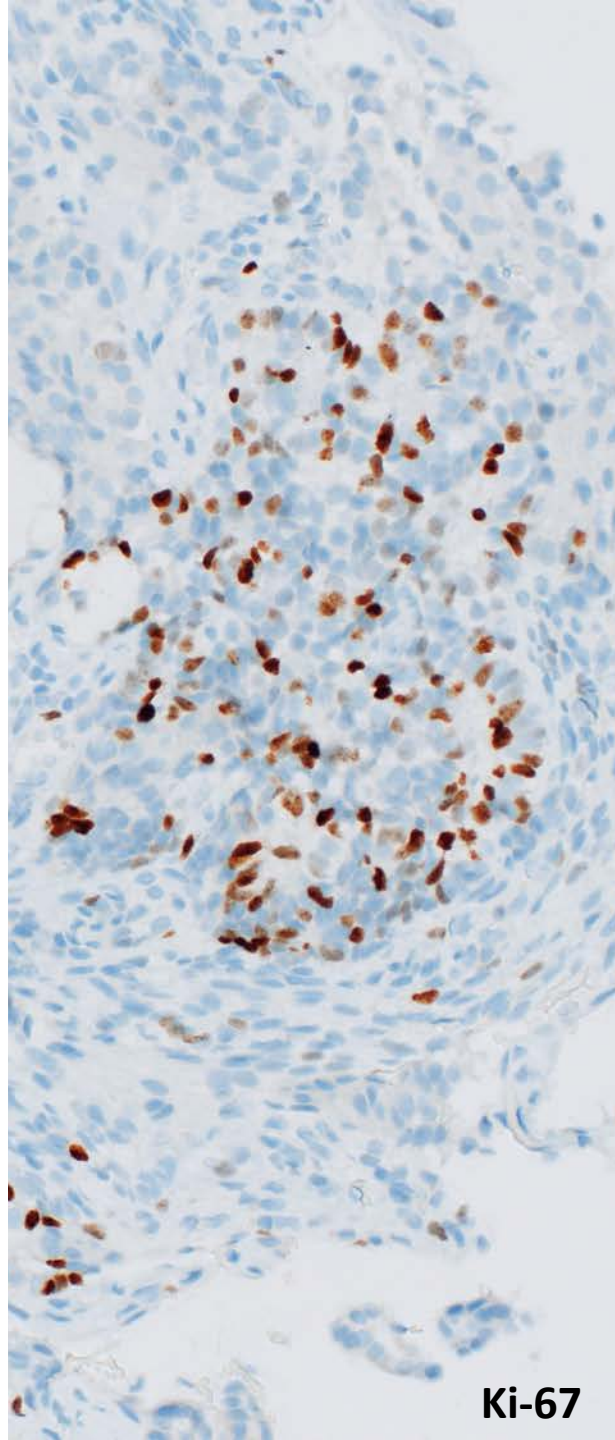
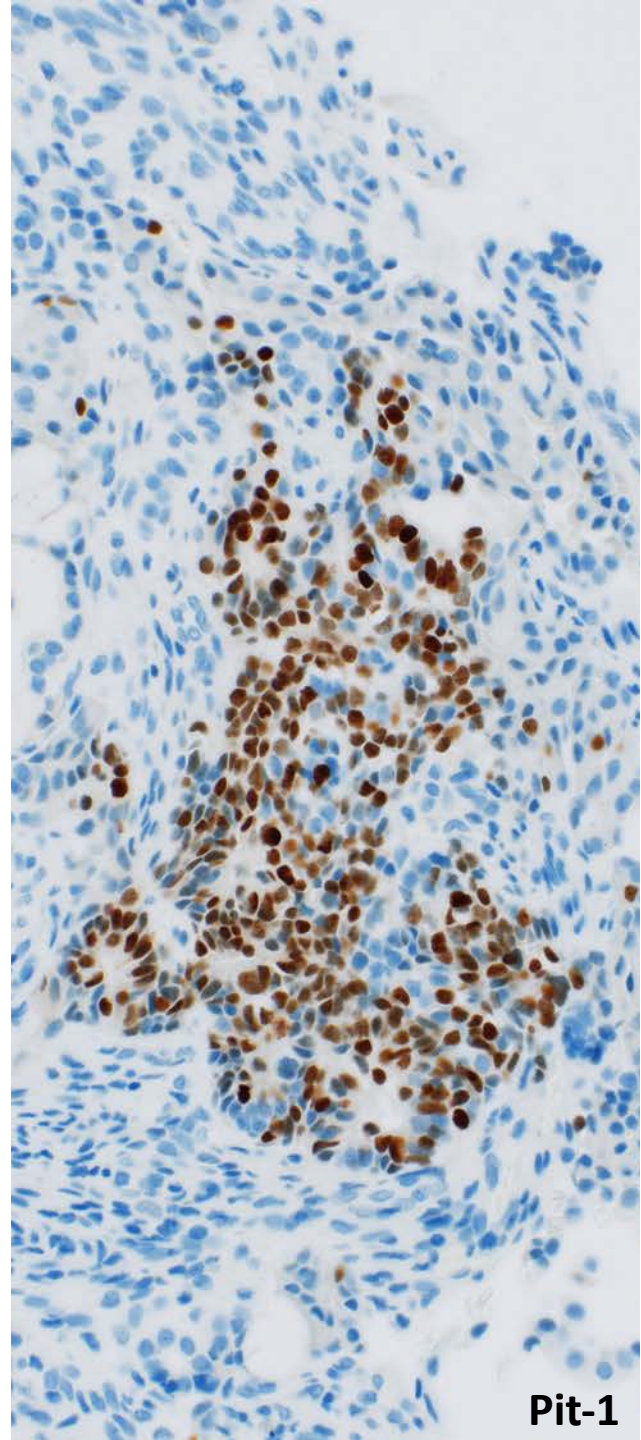
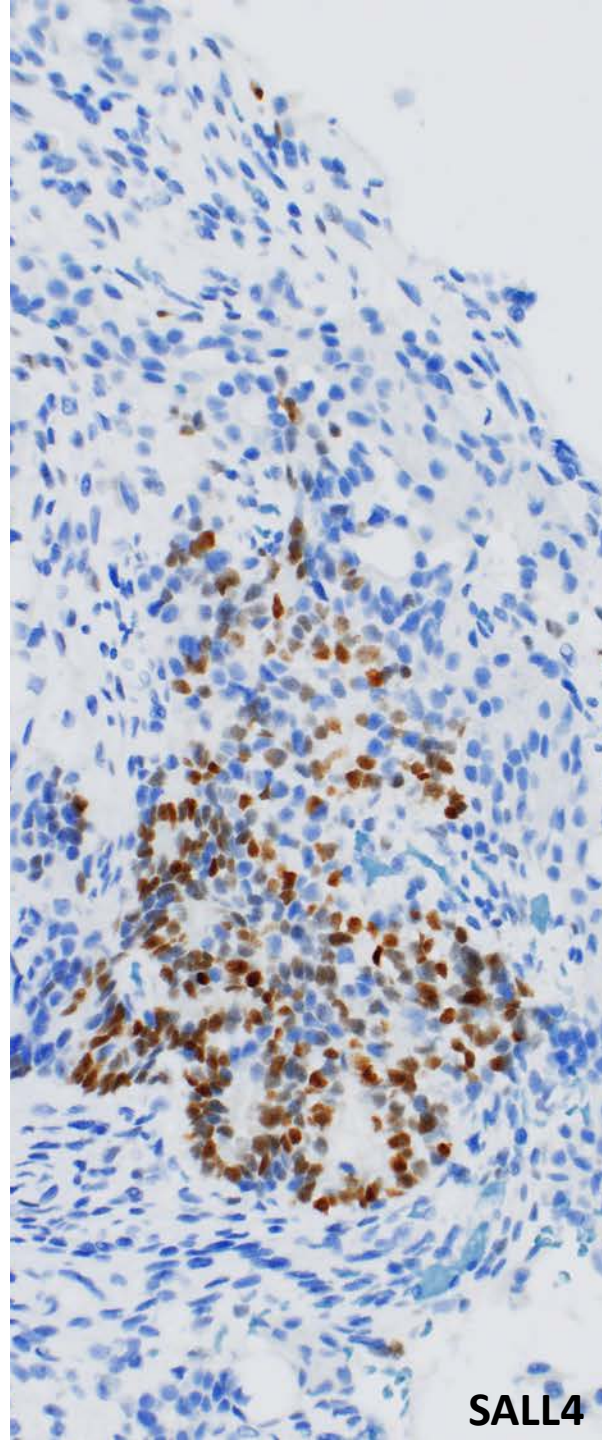
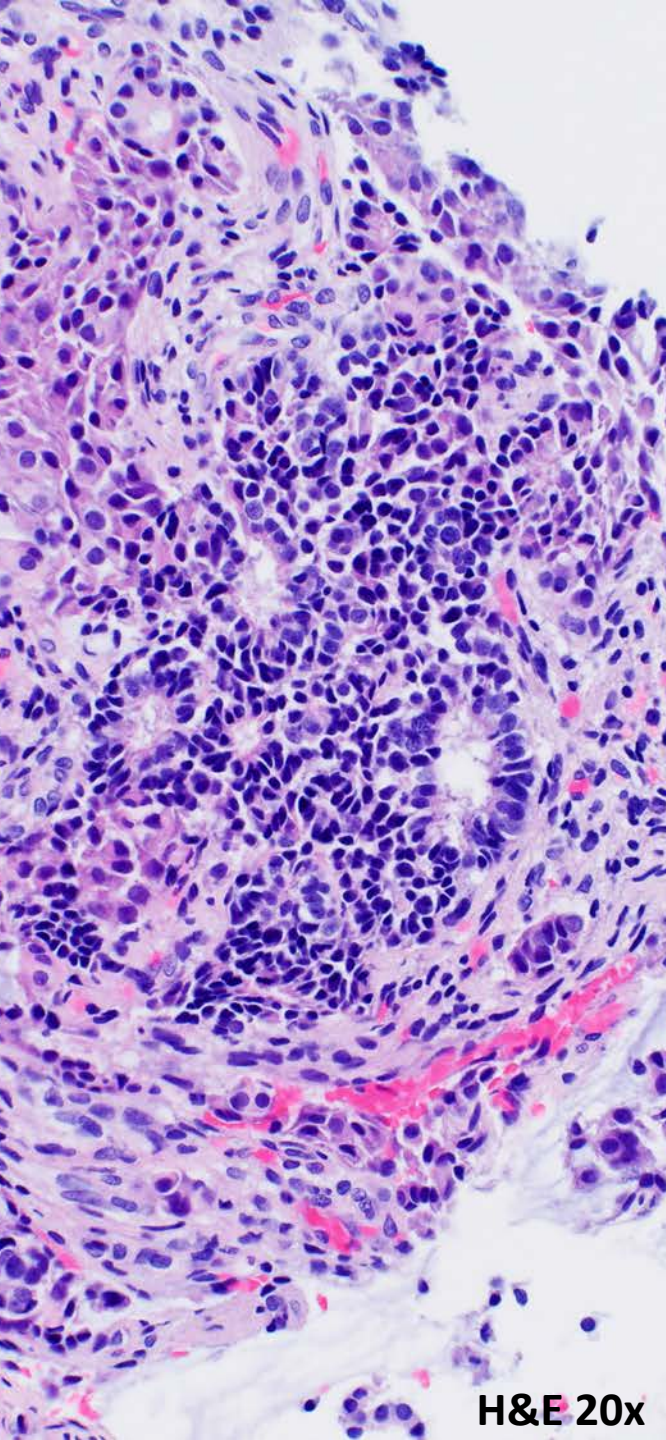








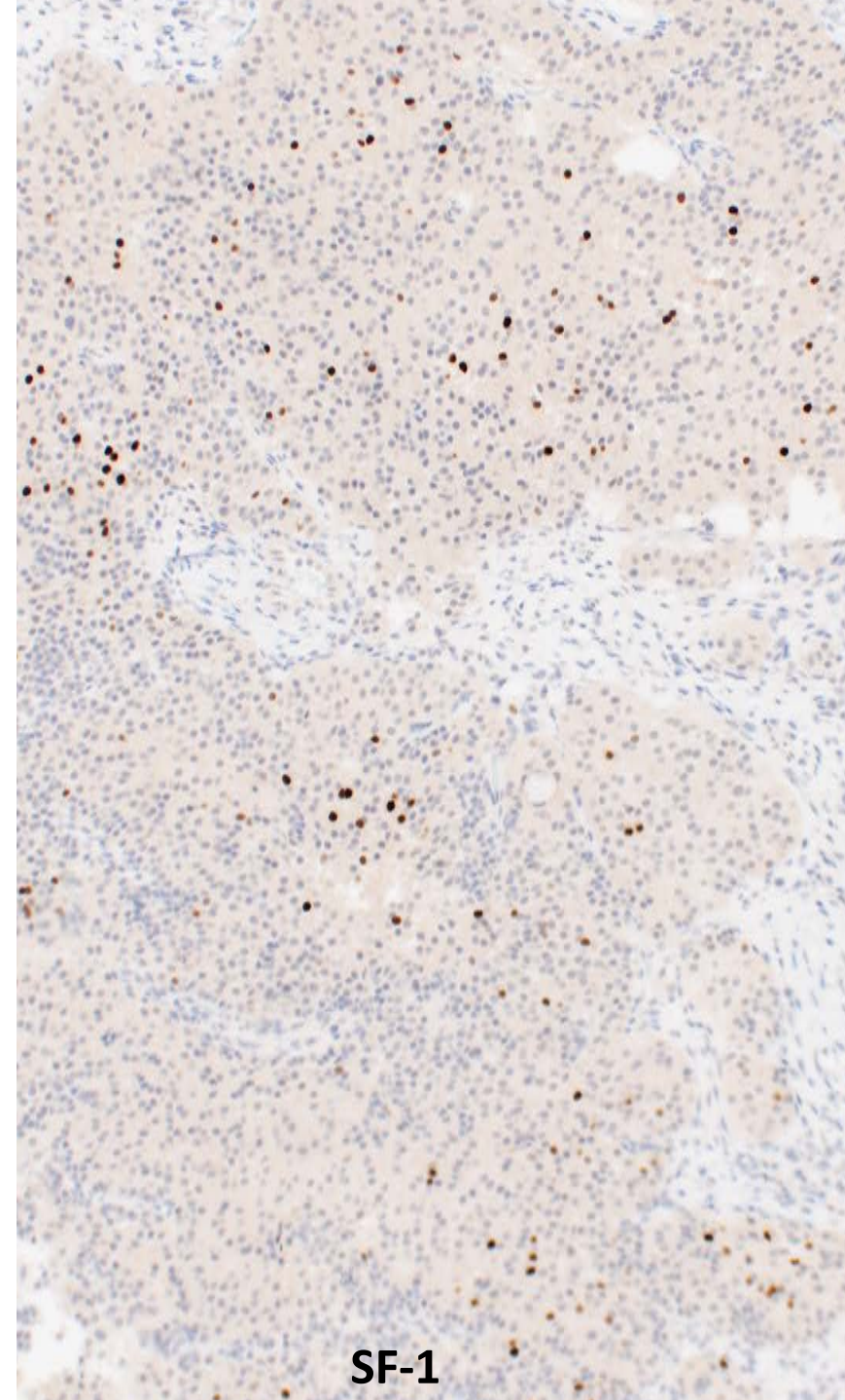
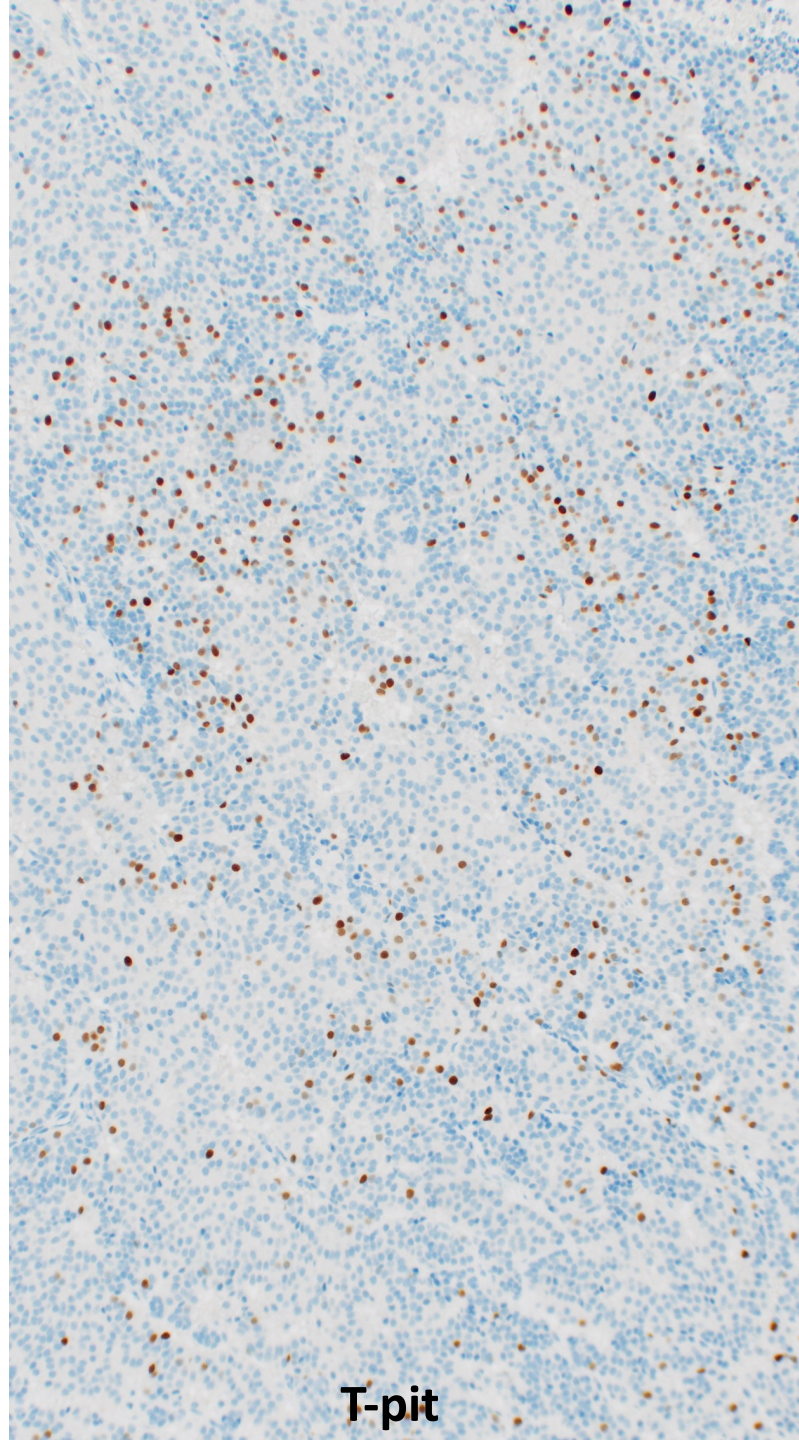
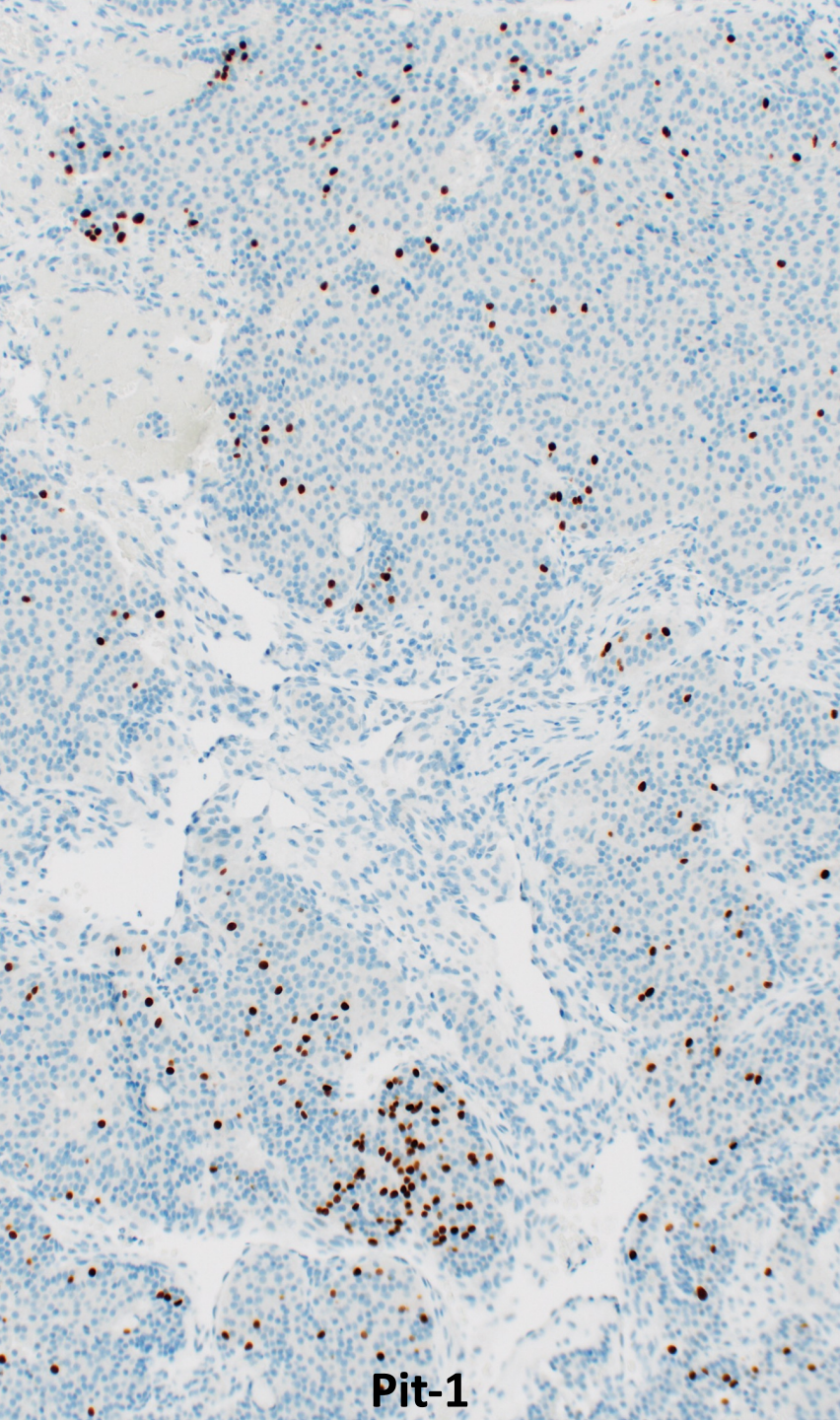




Case Discussion

Differential Diagnosis?

Diagnostic Studies?





ACTH

Tumor and germline sequencing analysis demonstrated:

Germline *DICER1* frameshift mutation

Somatic *DICER1* hotspot mutation in the ribonuclease III domain

Germline loss of function mutations in *DICER1* cause a rare autosomal dominant tumor predisposition syndrome (OMIM #601200)

SINGLE NUCLEOTIDE VARIANTS AND INDELS

Alteration	HGVS Nomenclature	Allele Frequency
<i>DICER1</i> D1810Y	NM_177438.2: c.5428G>T; p.Asp1810Tyr	45% WES, 68% RNA
<i>DICER1</i> frame-shift indel	NM_177438.2: c.2022del; p.Leu675PhefsTer10	42% WES, 17% RNA

Pituitary blastoma: a pathognomonic feature of germ-line *DICER1* mutations

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Abstract Individuals harboring germ-line *DICER1* mutations are predisposed to a rare cancer syndrome, the *DICER1* Syndrome or pleuropulmonary blastoma-familial tumor and dysplasia syndrome [online Mendelian inheritance in man (OMIM) #601200]. In addition, specific somatic mutations in the *DICER1* RNase III catalytic domain have been identified

in several *DICER1*-associated tumor types. Pituitary blastoma (PitB) was identified as a distinct entity in 2008, and is a very rare, potentially lethal early childhood tumor of the pituitary gland. Since the discovery by our team of an inherited mutation in *DICER1* in a child with PitB in 2011, we have identified 12 additional PitB cases. We aimed to determine the contribution of germ-line and somatic *DICER1* mutations to PitB. We hypothesized that PitB is a pathognomonic feature of a germ-line *DICER1* mutation and that each PitB will harbor a second somatic mutation in *DICER1*. Lymphocyte or saliva DNA samples ascertained from ten infants with PitB were screened and nine were found to harbor a heterozygous germ-line *DICER1* mutation. We identified additional *DICER1* mutations in nine of ten tested PitB tumor samples, eight of which were confirmed to be somatic in origin. Seven of these mutations occurred within the RNase IIIb catalytic domain, a domain essential to the generation of 5p miRNAs from the 5' arm of miRNA-precursors. Germ-line *DICER1* mutations are

This paper is dedicated to Bernd W. Scheithauer, MD, with whom several of the co-authors have trained and/or collaborated. Bernd was a world-renowned neuropathologist with special expertise in pituitary disease. With his colleagues, Bernd described pituitary blastoma (PitB) in 2008 and he was an early participant in the work reported here. Just before his untimely death, he was thrilled to learn that several additional PitB cases had been accessioned and more so that *DICER1* mutations explain PitB and its association with other childhood blastomas in this familial tumor predisposition syndrome.

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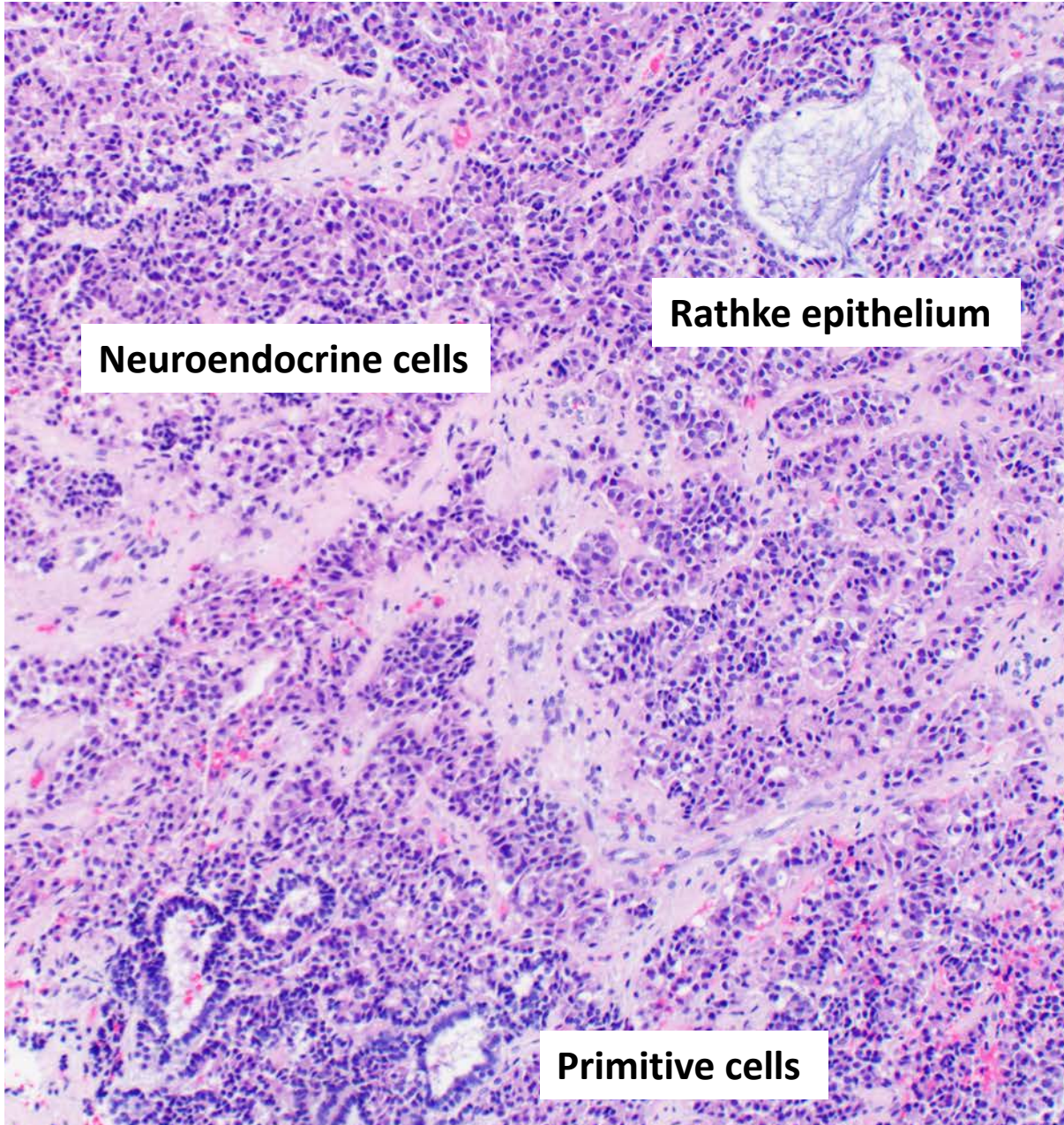
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Pituitary blastoma with *DICER1* mutation



- Sellar region neoplasm composed of primitive cells, neuroendocrine cells, and Rathke epithelium
- Exceptionally rare tumor
- Usually occurs in children less than 2 years of age
- Cushing syndrome is one of the most common presentations
- Associated with germline and somatic mutations in *DICER1*, which encodes a microRNA processing enzyme
- Patients may present with or subsequently develop other *DICER1* related tumors

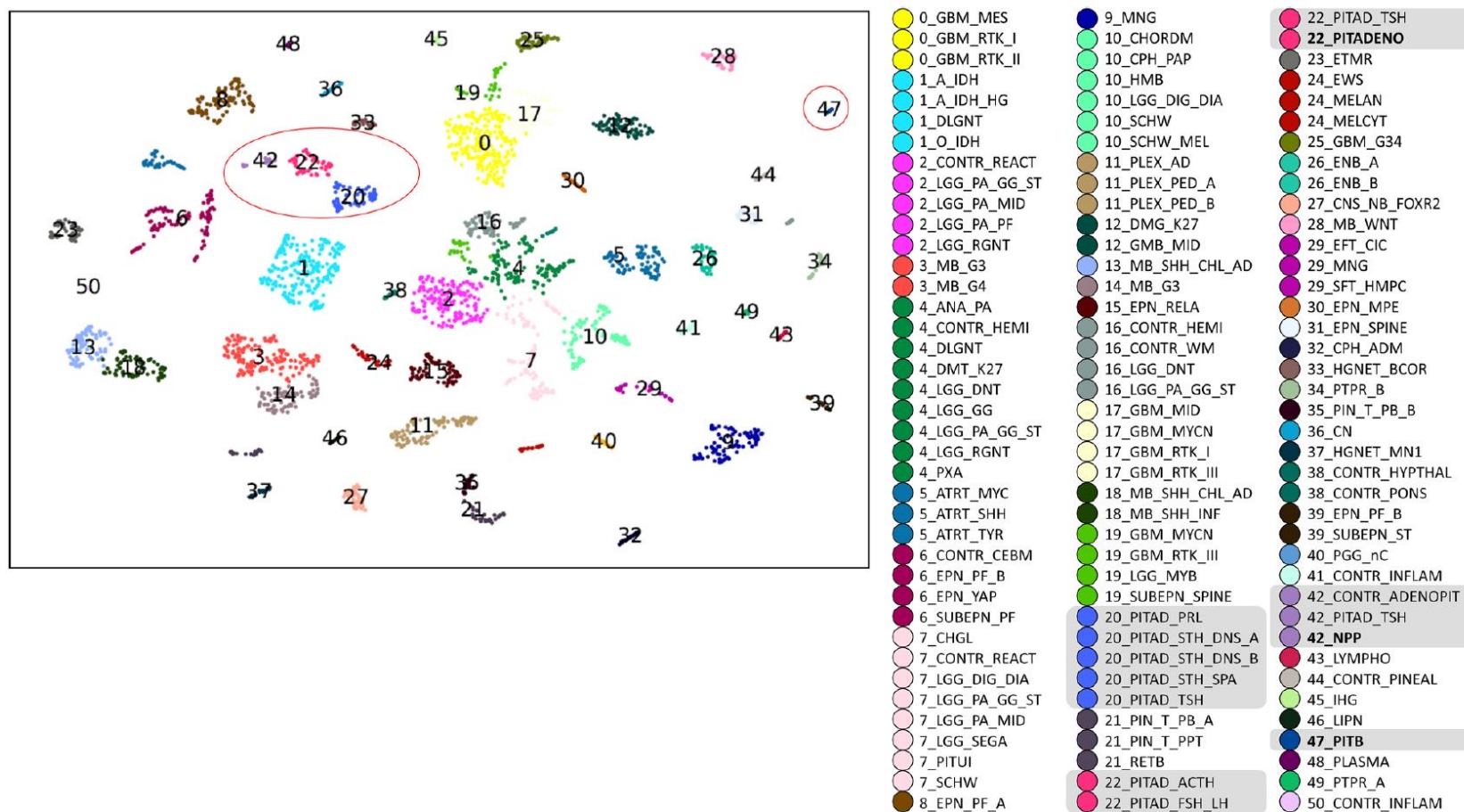


Fig. 6 Methylation-based clustering of PitB with a cohort of CNS tumors and control tissues. Uniform Manifold Approximation and Projection (UMAP) visualization of methylation data using 50 k most variable CpG loci and unsupervised clustering (see methods for Louvain clustering); data were obtained from a previously published large-scale study of CNS tumors ($n=2801$) [8] or were gener-

ated in-house ($n=17$). Each point represents one sample and is color coded based on the tumor pathological type or control tissues. Pituitary samples are circled on the UMAP and highlighted on the legend. The legend names are in Cluster_CellType format. There is a total of 51 clusters. PitB samples form a distinct cluster (cluster 47) separate from pituitary adenoma samples (clusters 20, 22, 42)

References

1. Molecular characterization of DICER1-mutated pituitary blastoma. *Acta Neuropathol.* 2021 Jun;141(6):929-944. PMID: 33644822.
2. Germline and somatic DICER1 mutations in a pituitary blastoma causing infantile-onset Cushing's disease. *J Clin Endocrinol Metab.* 2014 Aug;99(8):E1487-92. PMID: 24823459.
3. Pituitary blastoma: a pathognomonic feature of germ-line DICER1 mutations. *Acta Neuropathol.* 2014 Jul;128(1):111-22. PMID: 24839956.
4. Clinical Outcomes and Complications of Pituitary Blastoma. *J Clin Endocrinol Metab.* 2021 Jan 23;106(2):351-363. PMID: 33236116.
5. Pituitary blastoma. *Acta Neuropathol.* 2008 Dec;116(6):657-66. PMID: 18551299.
6. Pituitary blastoma: a unique embryonal tumor. *Pituitary.* 2012 Sep;15(3):365-73. PMID: 21805093.
7. An update on the central nervous system manifestations of DICER1 syndrome. *Acta Neuropathol.* 2020 Apr;139(4):689-701. PMID: 30953130.
8. DICER1: mutations, microRNAs and mechanisms. *Nat Rev Cancer.* 2014 Oct;14(10):662-72. PMID: 25176334.
9. Imaging of DICER1 syndrome. *Pediatr Radiol.* 2019 Oct;49(11):1488-1505. PMID: 31620849.