

Anaplastic Lymphoma Kinase-1 Immunohistochemistry

Anaplastic Lymphoma Kinase (Alk-1): Negative

Test Description

Anaplastic lymphoma kinase (ALK) is a receptor tyrosine kinase of the insulin receptor superfamily. ALK gene rearrangements were first discovered in NSCLC in 2007 by Soda et al. who identified that the 3' end of ALK was juxtaposed to the 5' end of echinoderm microtubule- associated protein-like 4 (EML4) gene attributable to an within chromosome inversion 2p. The common ALK rearrangement is fusion of its 3' kinase domain with truncated portions of the (N-terminal) echinoderm microtubuleassociated protein-like 4 (EML4) gene as a result of inversion within the short arm of chromosome 2. Assessment of EML4-ALK gene rearrangement/ALK protein expression in advanced stages of lung cancer has become standard of care for the management of advanced NSCLC patients. ALK may also be amplified through mutation, as in neuroblastomas. Various solid tumors, such as non-small cell lung carcinoma (NSCLC) and brain cancers were also found to aberrantly express ALK.

Specimen

Sample Type: FFPE block 8922/22

Site: Lymph node.

Pathology ID: MOLQ/IHC-012/22 Disease: Non Hodgkin Lymphoma

Interpretation

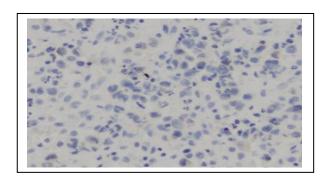
Positive: Strong, brown, granular cytoplasmic staining.

Negative: Absence of strong granular cytoplasmic staining.

Microscopy Evaluation

ALK(D5F3) staining for tumor cells: **NEGATIVE**

ALK IHC- Tumor Cells



Methodology

Immunostaining for Alk protein was done using Ventana anti-ALK(D5F3) CDX

Note

A potentially better assay to select patients to receive an ALK inhibitor is one that detects ALK expression at the protein level. This assay would then allow one to verify that the actual protein target of the inhibitor, that is, the ATP-binding pocket in thekinase domain of ALK, is present, alleviate any concern about unproductive ligation after rearrangement, and detect any expression mediated by any other aberrant non-rearrangement mechanism. ALK is not normally expressed in the lung and any expression would be considered abnormal.

References

- Rosai and Ackerman's Surgical Pathology. Biomarkers for ALK and ROS1 in Lung Cancer: Immunohistochemistry and $\ensuremath{\mathsf{R}}$ Fluorescent In Situ Hybridization Peter P. Luk et al. Archives of Pathology & Laboratory Medicine 2018 142(8).
- Immunohistochemistry for predictive biomarkers in non-small cell lung cancer Mari Mino-Kenudson Transl Lung Cancer Res. 2017 Oct; 6(5).
- Anaplastic lymphoma kinase status in lung cancers: An immunohistochemistry and fluorescence in situ hybridization study from a tertiary cancer center in India. SS Murthy et al. Indian Journal of Cancer 2017 54(1).

 ALK Immunohistochemistry in NSCLC: Discordant Staining Can Impact Patient

 Treatment Regimen Merdollbrahim MolQ laaboratoryc (Ay Unit of Molecular Quest Healthcare Pvt. Ltd.)

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