

Convegno Nazionale GISCoR 2015

Screening per il cancro coloretale.
Prospettive future: il ruolo dei VOCs

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Dept of Emergency and Organ Transplantation,
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19 -20 NOVEMBRE 2015
NAPOLI | Hotel Royal Continental

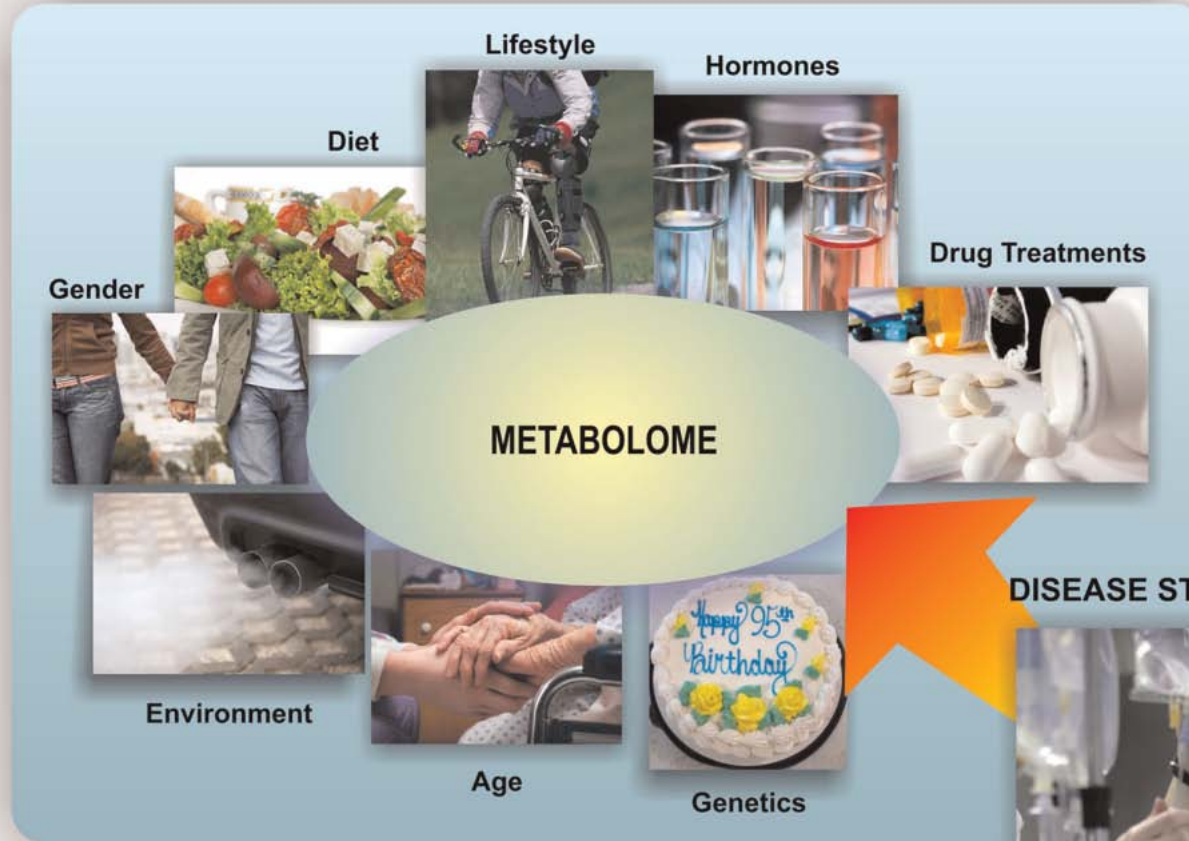
Colorectal cancer (CRC) screening

- CRC screening is cost/effective particularly in countries with financial resources
- Colonoscopic screening is limited by its cost and invasiveness while FOBT/FIT have poor patient's compliance and reliability.
- A novel, non-invasive, highly sensitive biomarkers to improve the detection of CRC is strongly awaited.





Metabolomics



Breathomics

Exhaled Volatile Organic Compounds (VOCs) first application in human

Proc. Nat. Acad. Sci. USA
Vol. 68, No. 10, pp. 2374–2376, October 1971

Quantitative Analysis of Urine Vapor and Breath by Gas-Liquid Partition Chromatography

(orthomolecular medicine/vitamins/controlled diet)

LINUS PAULING*, ARTHUR B. ROBINSON*, ROY TERANISHI†, AND PAUL CARY*

* Department of Chemistry, Stanford University, Stanford, California 94305; and † Western Regional Laboratory, U.S. Department of Agriculture

Contributed by Linus Pauling, July 29, 1971

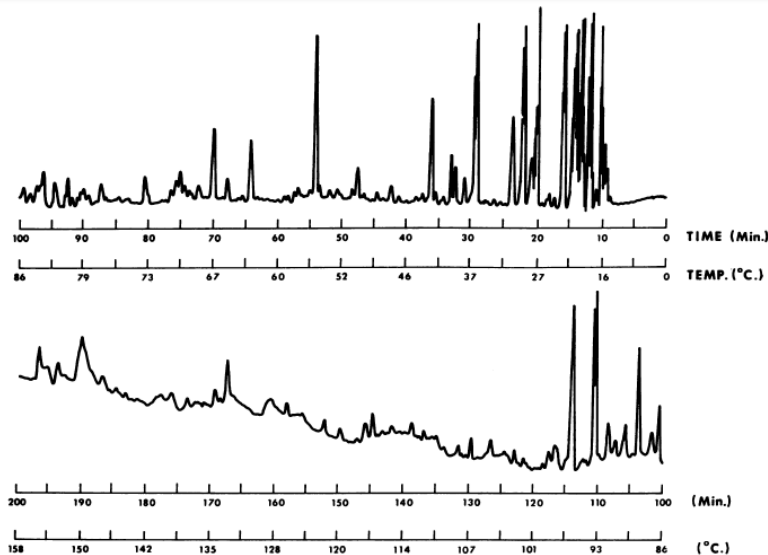


FIG. 2. Chromatogram of breath.



Linus Pauling

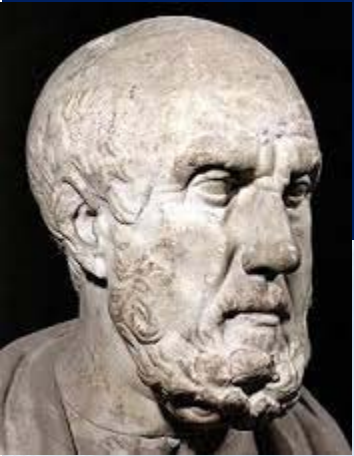


Arthur Robinson

New options for colorectal cancer screening: **VOCs (organic Volatile Compounds) analysis**

- VOCs in the headspace of blood
- VOCs in the headspace of urine
- VOCs in the headspace of feces
- **VOCs in the exhaled breath**

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Breath features and human diseases

- 460 BC, Ippocrates: “fetor oris” and “fetor hepaticus”.
- 1874 England Anstie: ethanol in the breath of drinkers
- 1897 Nebelthau & Geelmuyden: acetone in the breath of diabetic patients.

Even without knowing the chemicals our olfactory receptors are able to identify 4000-10000 different smells

Volatile Organic Compounds in the breath reflect the health status of the patient like a «*breathprint*»



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VOCs and Human Cancer



Tumor growth

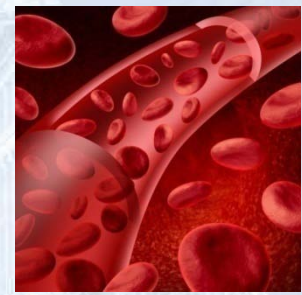
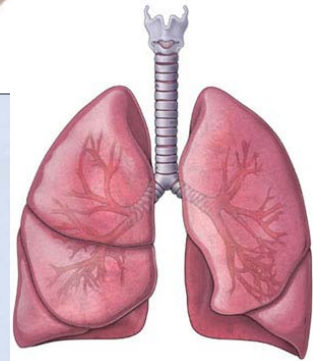
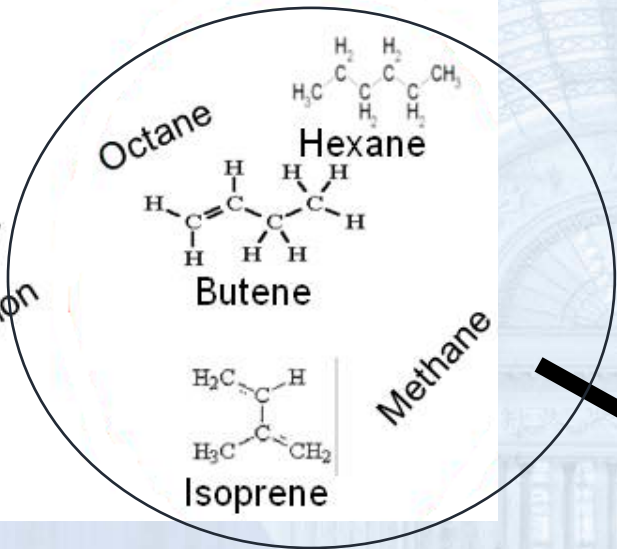
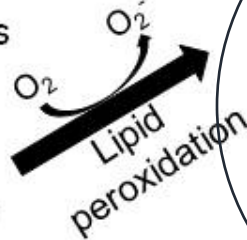
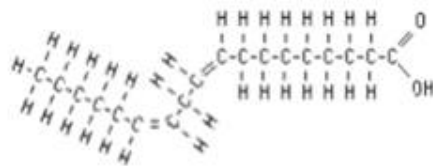
Gene/protein changes



Oxidative stress



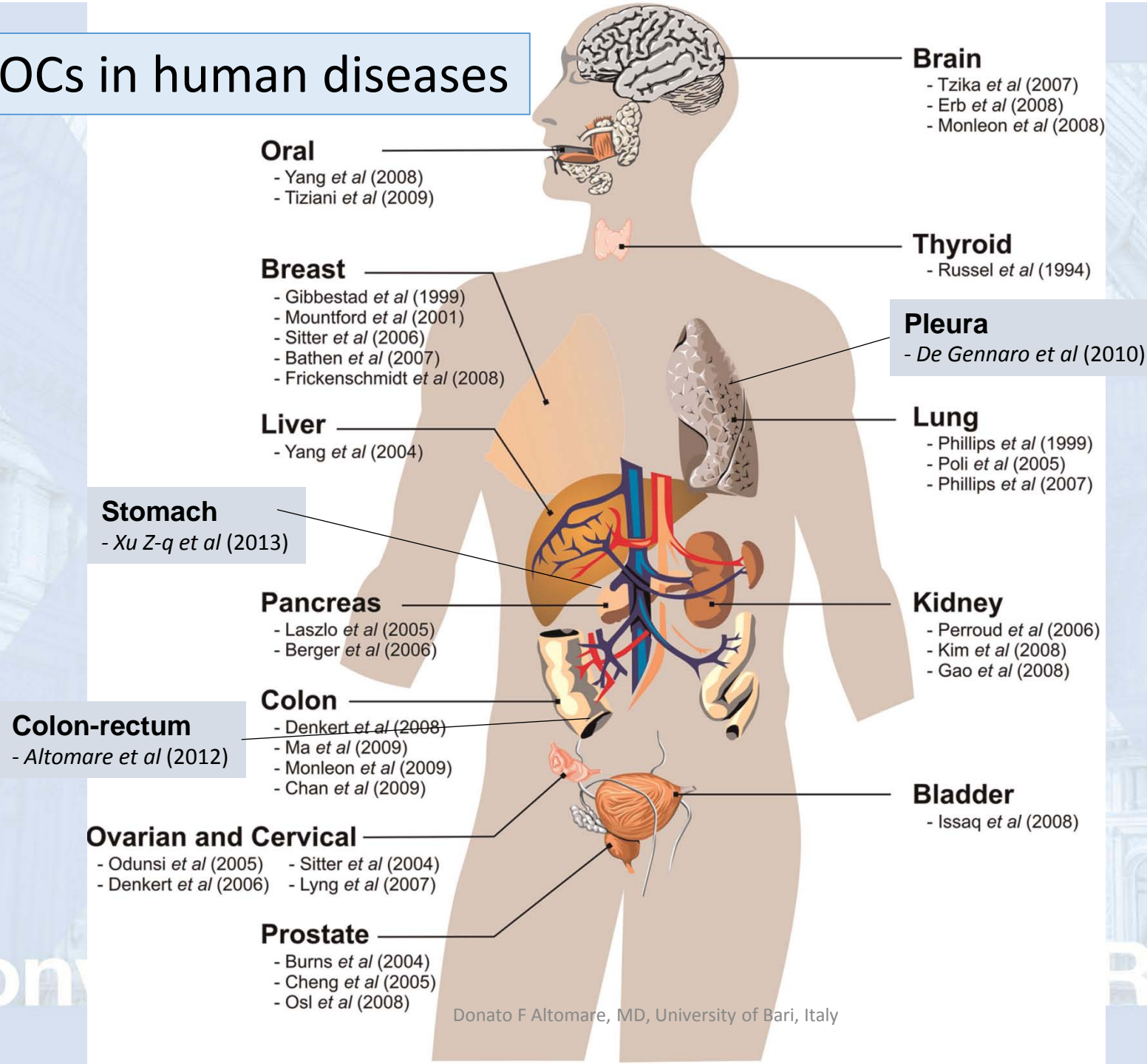
Polyunsaturated fatty acids (PUFAs)



Irrespectively of the site of production the VOCs are reversed into the blood stream and reach the lung were they can be exhaled



VOCs in human diseases



Donato F Altomare, MD, University of Bari, Italy

Breathomics in Colorectal Cancer

Br J Surg. 2013 Jan;100(1):144-50

Original article

Exhaled volatile organic compounds identify patients with colorectal cancer

D. F. Altomare¹, M. Di Lena¹, F. Porcelli², L. Trizio², E. Travaglio¹, M. Tutino², S. Dragonieri³, V. Memeo¹ and G. de Gennaro²

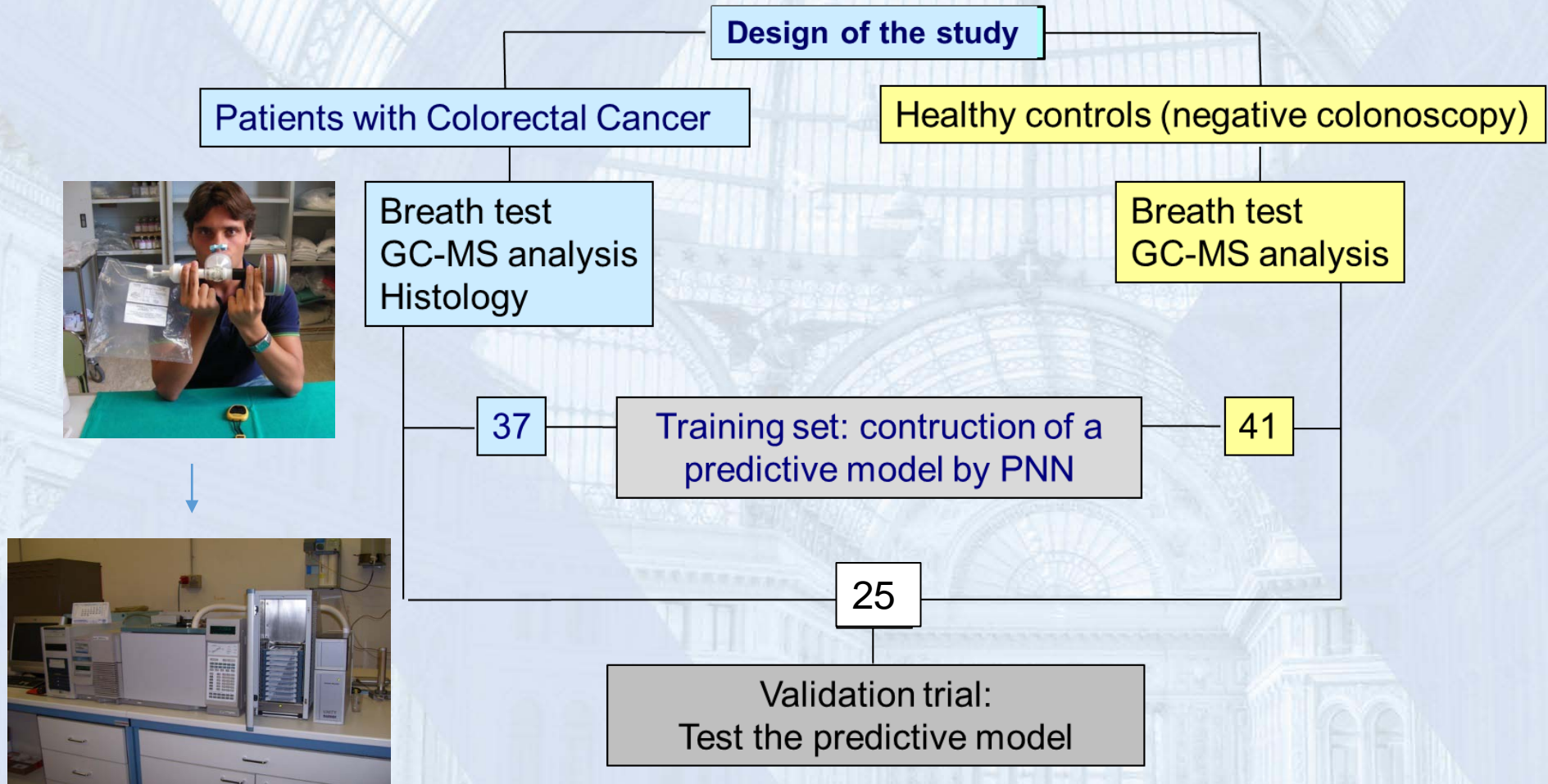
Departments of ¹Emergency and Organ Transplantation, ²Chemistry and ³Lung Diseases, University 'Aldo Moro' of Bari, Bari, Italy
Correspondence to: Professor D. F. Altomare, Department of Emergency and Organ Transplantation, c/o Azienda Ospedaliero-Universitaria Policlinico Bari, Piazza G. Cesare, 11-70124 Bari, Italy (e-mail: donatofrancesco.altomare@uniba.it)

la Repubblica.it
il mondo in diretta 24 ore su 24



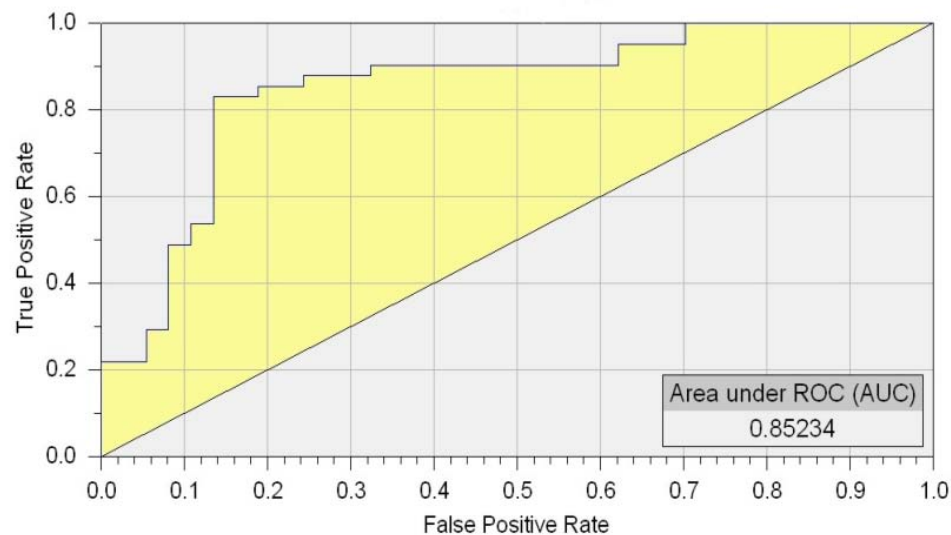
Convegno Nazionale B | B | C GISCoR 2015

VOCs in COLORECTAL CANCER *(Altomare DF et al Br J Surg 2013)*



15 volatile organic compounds	Recognition capabilities (%)
Nonanal	80
4-methyl-2-pentanone	88
Decanal	92
2-methylbutane	87
1,2-pentadiene	95
2-methylpentane	87
3-methylpentane	87
methylcyclopentane	80
Cyclohexane	94
Methylcyclohexane	92
1,3-dimethylbenzene	96
4-methyloctane	80
1,4-dimethylbenzene	80
A (4-methyl-undecane, RT=11.3)	59
B (trimethyldecane, RT=13.2)	72

VOCs in COLORECTAL CANCER



Accuracy 85,5%

Sensitivity 83,3%

Specificity 87,9%

Effects of Curative Colorectal Cancer Surgery on Exhaled Volatile Organic Compounds and Potential Implications in Clinical Follow-up

Donato F. Altomare, MD, Maria Di Lena, MD, Francesca Porcelli, PhD, y Elisabetta Travaglio, MD, Francesco Longobardi, PhD, y Maria Tutino, PhD, y Norma Depalma, MD, Giuseppina Tedesco, BS, y Annamaria Sardaro, BS, y Riccardo Memeo, PhD, and Gianluigi de Gennaro, PhDy

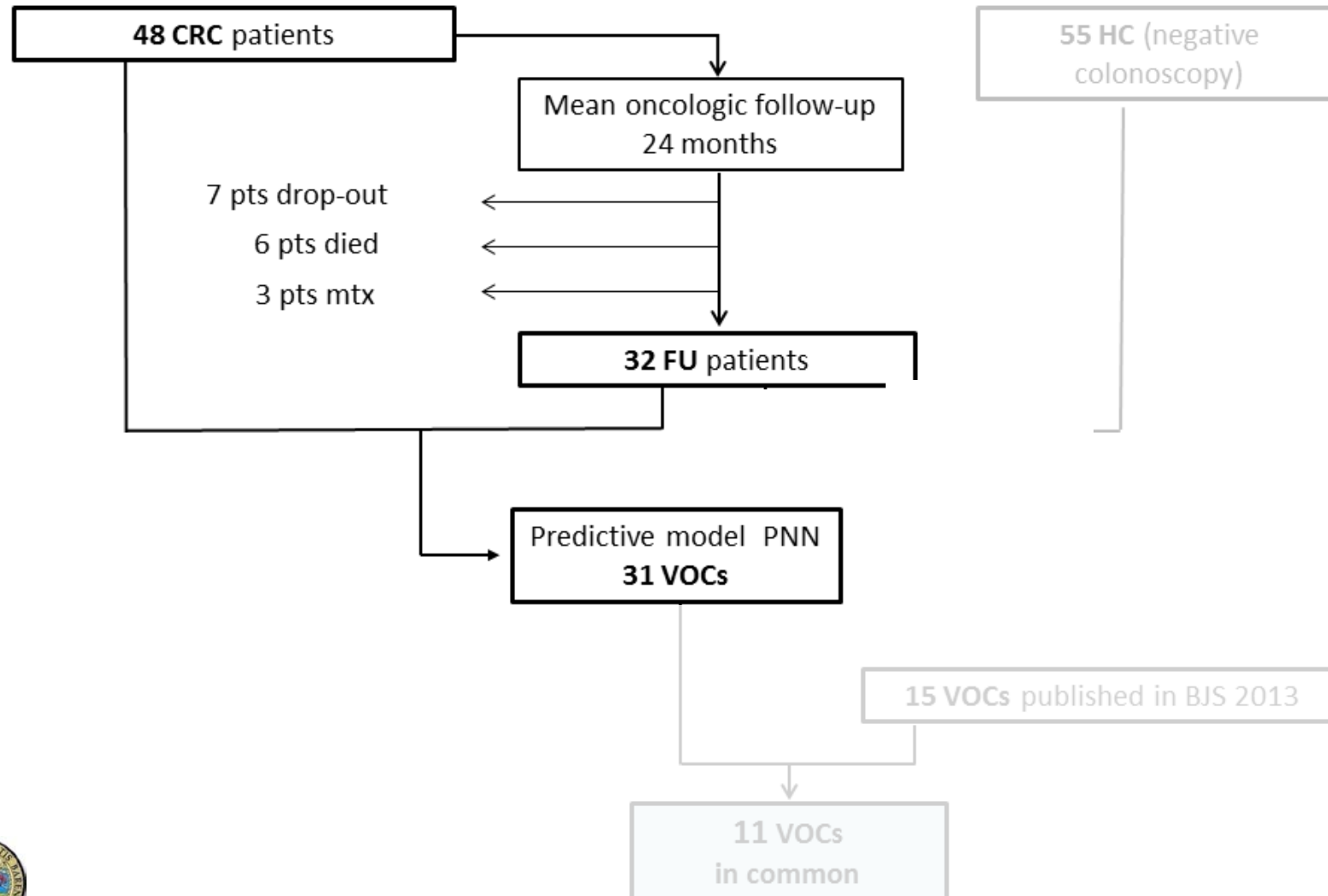
Annals of Surgery Volume 262, Number 5, November 2015

To evaluate whether the VOCs pattern in CRC patients could be modified by curative surgery and eventually used in the oncologic follow up.

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Design of the study 1.

VOCs analysis before and after curative surgery



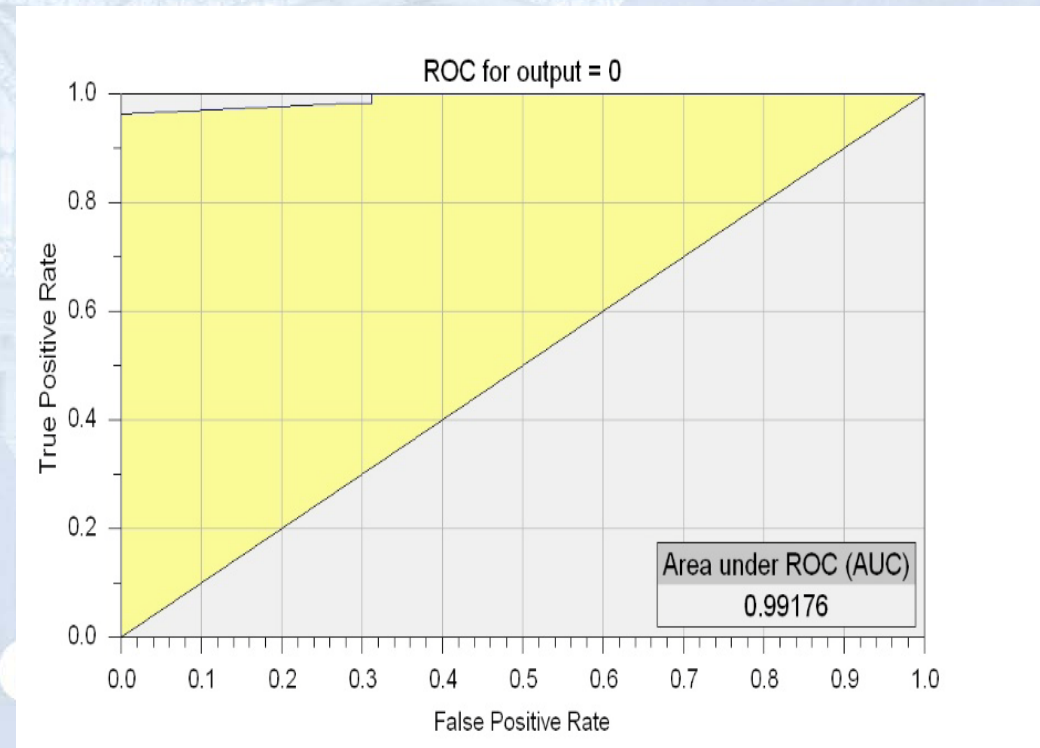
31 VOCs

1,2-pentadiene	beta-pinene
2-methylbutane	1-methyl-3- (1-methylethyl)benzene
2-methylpentane	X*
1-(1-methylethenyl)-2-(1-methylethyl)benzene	5-butylnonane
methylcyclopentane	undecane
cyclohexane	Y*
heptane	nonanal
methylcyclohexane	dodecane
4-methyl-2-pentanone	decanal
1-methylnaphthalene	1-ethyl-1,2,4-trimethylbenzene
1-octene	1-ethyl-2,4,5-trimethylbenzene
octane	2,3-dihydro-1,6-dimethyl-1H-Indene
1,2,3-trimethylbenzene	2,3-dihydro-4,7-dimethyl-1H-Indene
1,3-dimethylbenzene	1,3-dimethyl-5-(1-methylethyl)benzene
1,4-dimethylbenzene	2-methylnaphthalene
propylbenzene	

CRC patients vs disease-free patients in follow-up

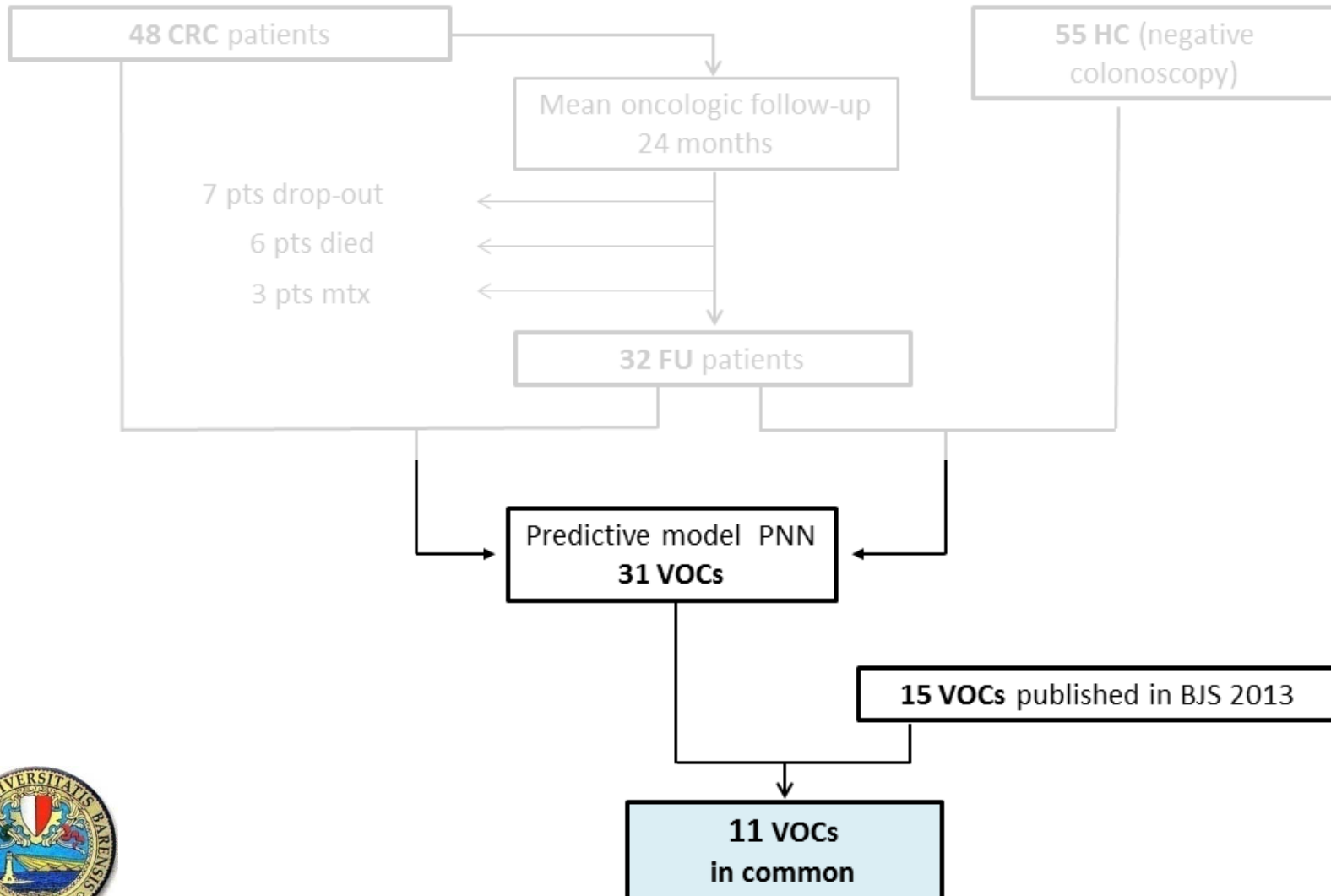
PNN analysis

SENSITIVITY	100 %
SPECIFICITY	95.83%
ACCURACY	97.50 %
AUC	0.992



Design of the study 3.

VOCs in common with our previous study (*Br J Surg* 2013)



15 VOCs (Previous study)

nonanal
4-methyl-2-pentanone
decanal
2-methylbutane
1,2-pentadiene
2-methylpentane
3-methylpentane
methylcyclopentane
cyclohexane
Methylcyclohexane
1,3-dimethylbenzene
4-methyloctane
1,4-dimethylbenzene
A (4-methyl-undecane, RT=11.3)
B (trimethyl-decane, RT=13.2)

11
Common
VOCs

31 VOCs (New study)

1,2-pentadiene	beta-pinene
2-methylbutane	1-methyl-3- (1-methylethyl)benzene
2-methylpentane	X*
1-(1-methylethenyl)-2-(1-methylethyl)benzene	5-butylnonane
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heptane	nonanal
methylcyclohexane	dodecane
4-methyl-2-pentanone	decanal
1-methylnaphthalene	1-ethyl-1,2,4-trimethylbenzene
1-octene	1-ethyl-2,4,5-trimethylbenzene
octane	2,3-dihydro-1,6-dimethyl-1H-Indene
1,2,3-trimethylbenzene	2,3-dihydro-4,7-dimethyl-1H-Indene
1,3-dimethylbenzene	1,3-dimethyl-5-(1-methylethyl)benzene
1,4-dimethylbenzene	2-methylnaphthalene
propylbenzene	

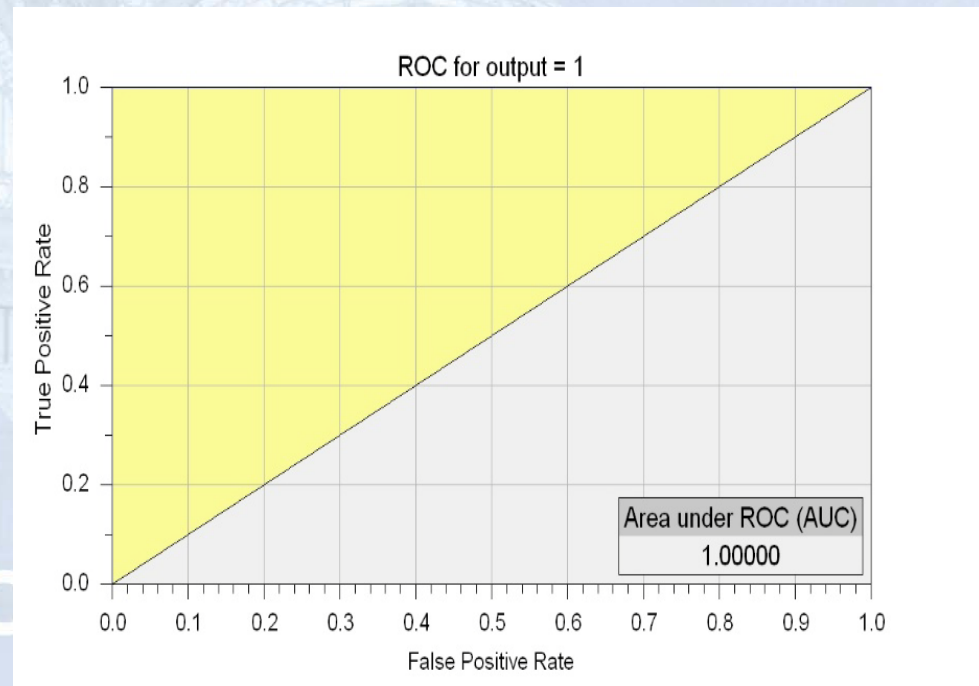
VOCs identified in common with our previous study (*Br J Surg* 2013)

11 VOCs

1,2-pentadiene
2-methylbutane
3-methylpentane
methylcyclopentane
cyclohexane
decanal
nonanal
methylcyclohexane
4-methyl-2-pentanone
1,4-dimethylbenzene
1,3-dimethylbenzene

CRC patients vs disease free patients
in follow-up

SENSITIVITY	100 %
SPECIFICITY	97.92%
ACCURACY	98.75 %
AUC	1



Comments

- The VOCs pattern from CRC patients is clearly ***modified by cancer removal*** confirming the tight relationship between cancer metabolism and exhaled VOCs.
- Vocs analysis seems to have a high reliability to ***identify patients disease-free after curative CRC resection.***

What makes the use of VOCs analysis still far away from routine application in colorectal cancer screening

- **Biological material used**
- Analytical platforms
- Sampling devices
- Identification of the pattern of VOCs involved
 - Testing the specificity of the VOCs pattern for this diseases compared to intestinal polyps, IBD
 - Testing the reliability of the test compared to FIT
- Assessment of an easy and portable device for online result analysis
 - E nose
 - QEPAS
 - Odour-binding Proteins

Biological materials and Volatile Organic Compounds

- **Headspace of blood**
- **Headspace of Urine**
- **Headspace of Feces**
- **Exhaled breath**

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Analytical platforms used

- *Gas chromatography-mass spectrometry (GC-MS) (7 studies)*
- *Field Asymmetric Ion Mobility Spectrometer (FAIMS) (1 paper on Urinary VOCs)*
- *Selected Ion Flow Tube Mass Spectrometry (SIFT-MS) (1 study on fecal VOCs)*
- *Electronic-nose (E-nose)*

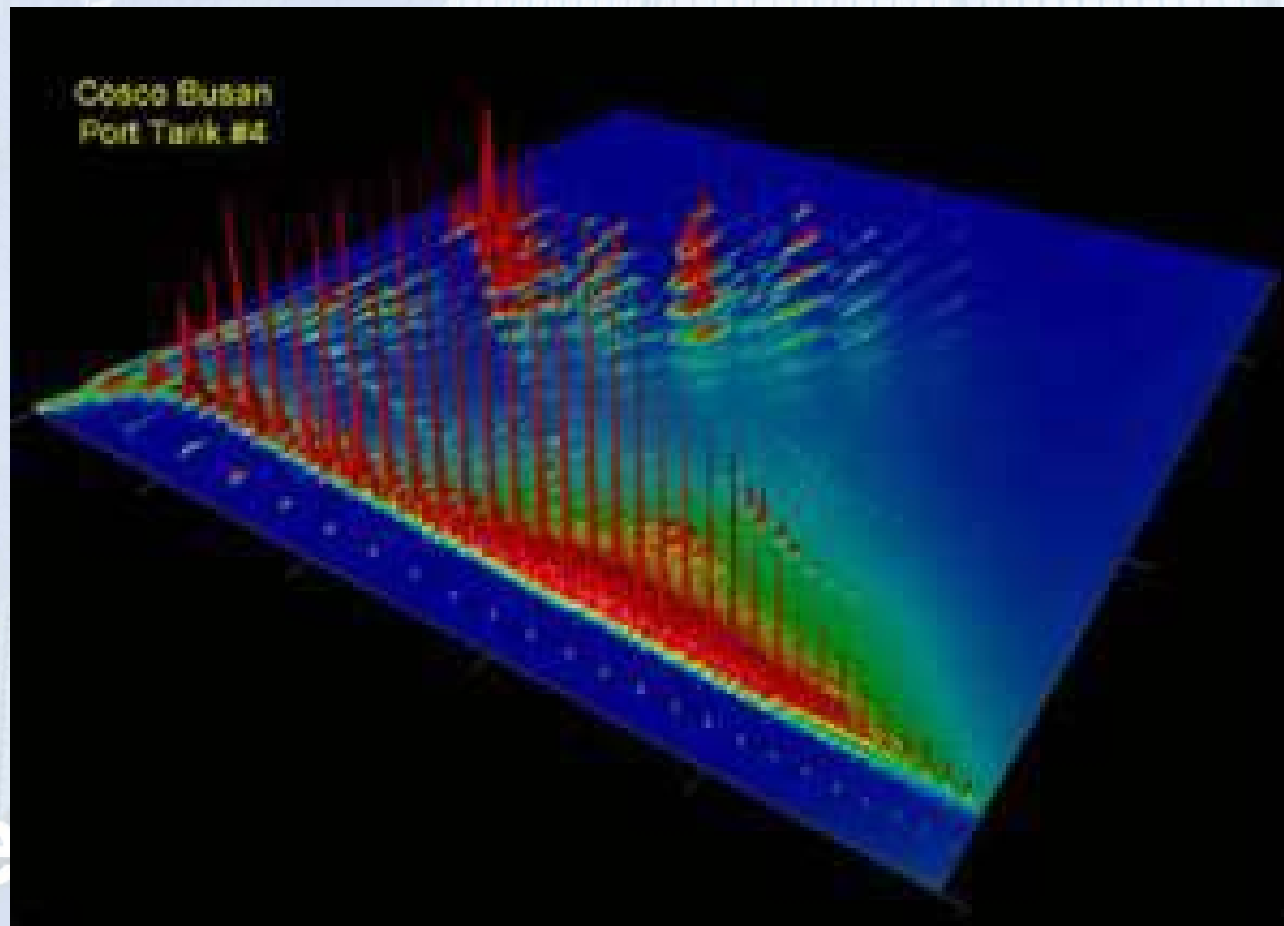


Gas Chromatograph/ Mass spectrometer

New Analytical platforms

Two dimension Gas Chromatography

Increases the number of detectable VOCs



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Breath sampling device.

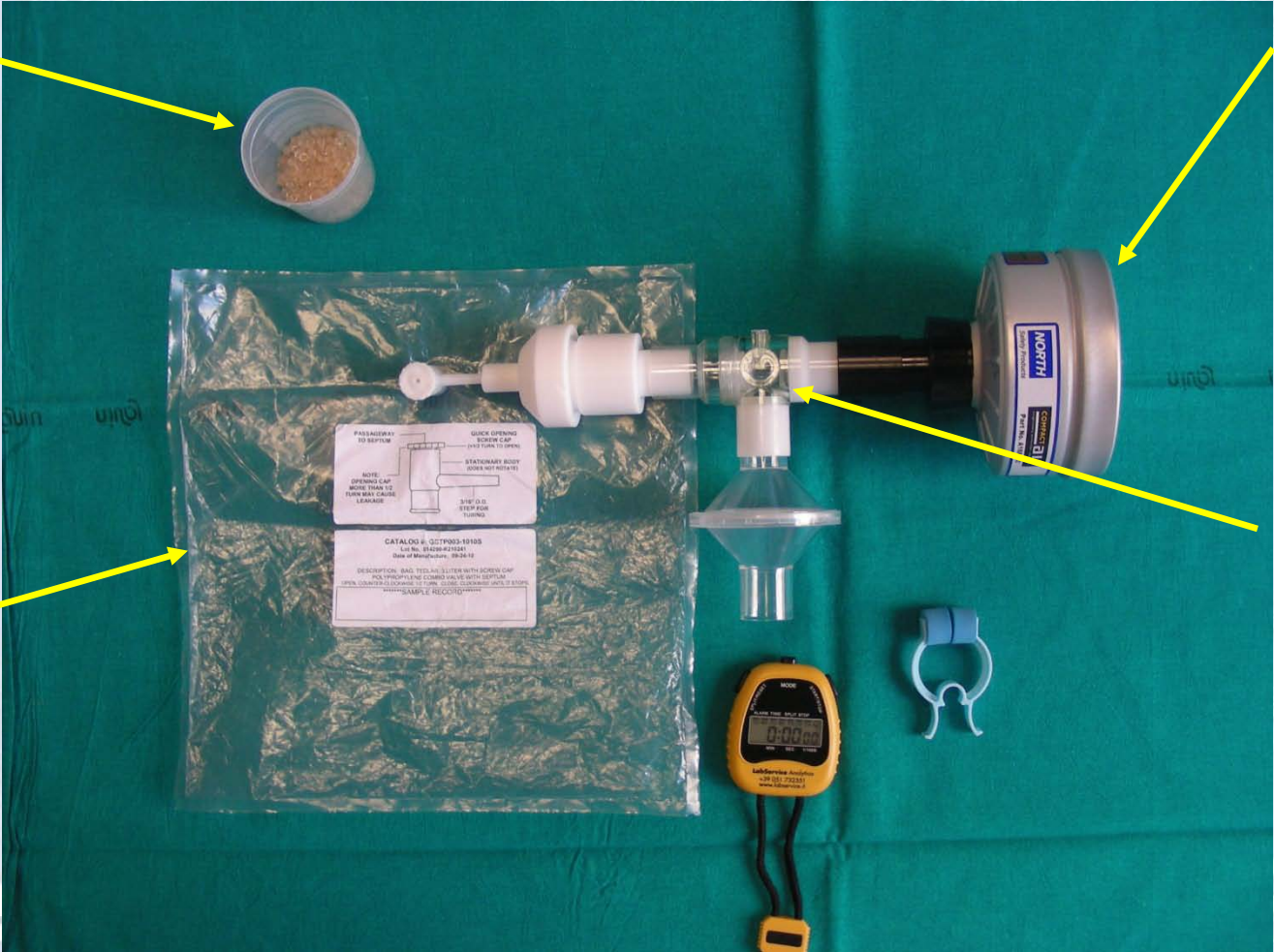


Donato F Altomare, MD, University of Bari, Italy

environment
VOCs
Filter

Silice

Collecting
bag (in
Tedlar)



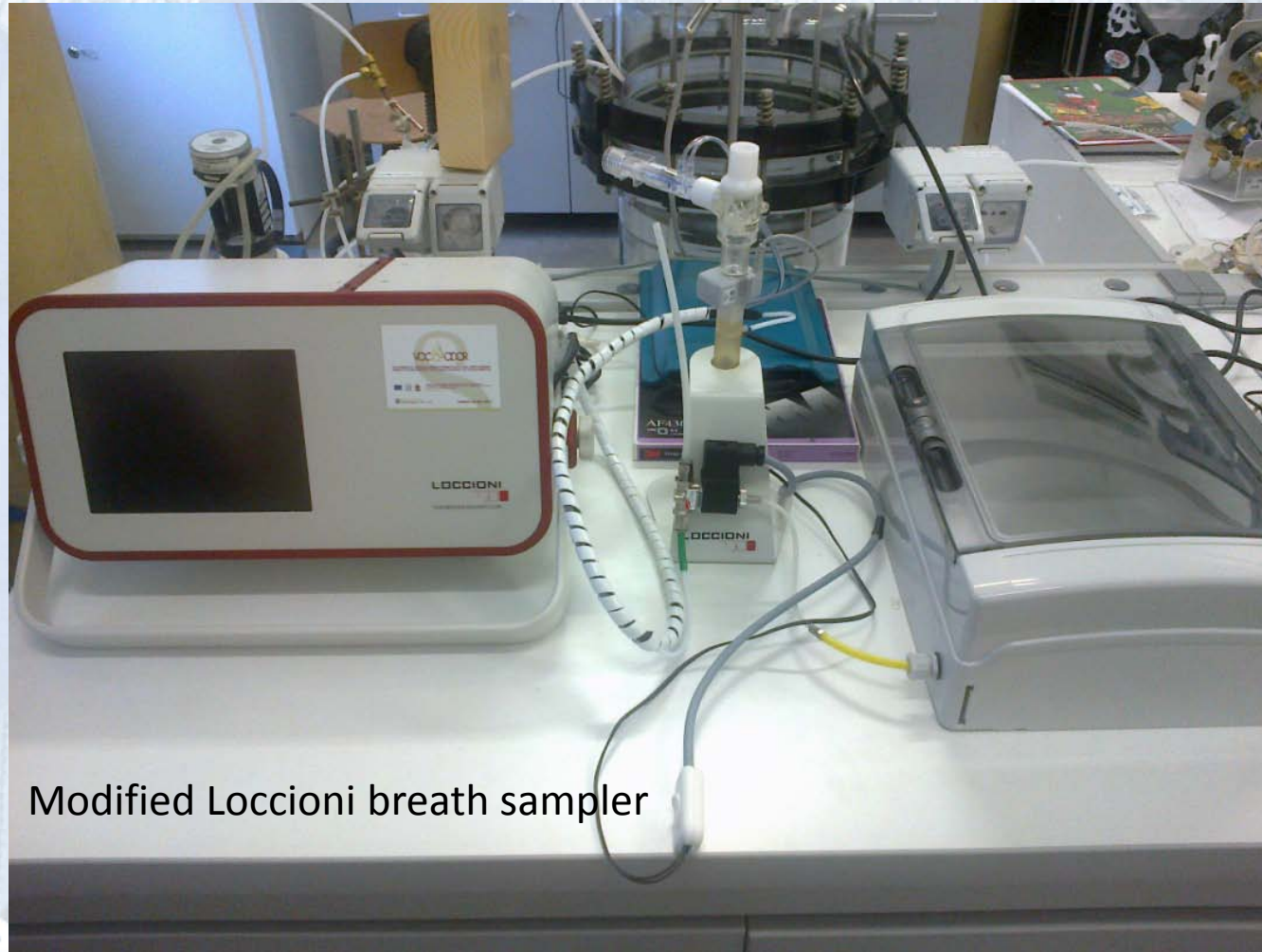
One way
valve



onve

2015

selected alveolar breath sampling



Modified Loccioni breath sampler

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VOCs with higher discriminant value in the breath of CRC patients

11 VOCs

1,2-pentadiene

2-methylbutane

3-methylpentane

methylcyclopentane

cyclohexane

decanal

nonanal

methylcyclohexane

4-methyl-2-pentanone

1,4-dimethylbenzene

1,3-dimethylbenzene

Original article Br. J Surg. 2013

Exhaled volatile organic compounds identify patients with colorectal cancer

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Annals of Surgery Volume 262, Number 5, November 2015

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 - E nose
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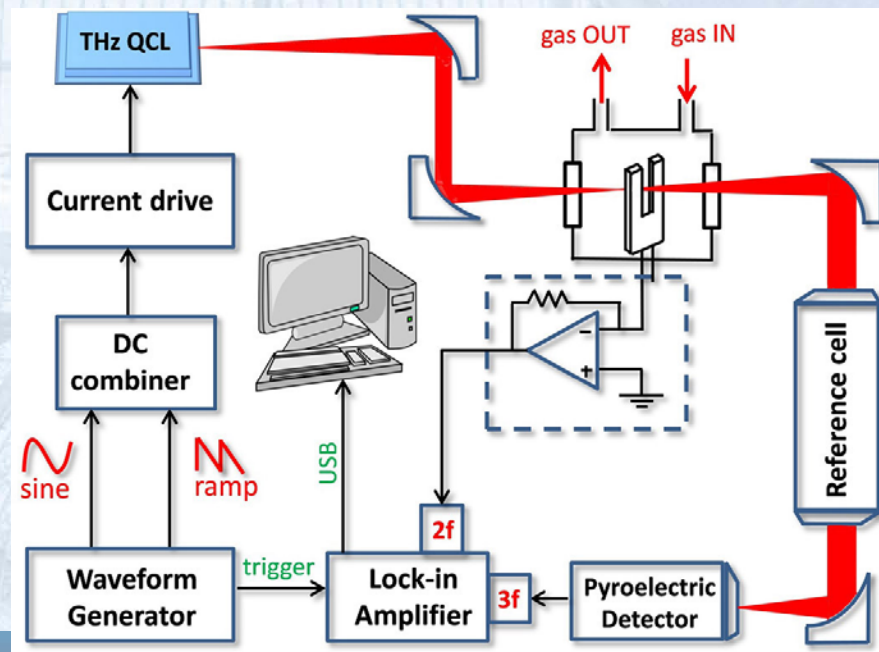
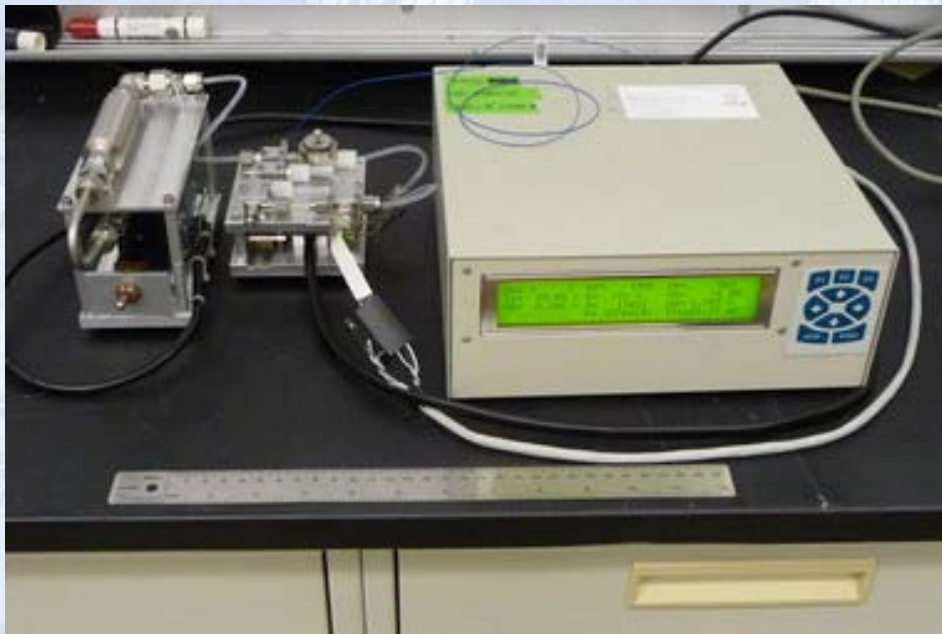
VOCs and human cancer

...electronic nose for the future.....



«In the not too distant future blowing into a breath-analyser will become as routine as having a blood test»

Quartz-Enhanced Photo-Acoustic Sensors (QEPAS) for the sensitive and selective quantification of molecular trace gas species



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VOCs and human cancer
...the diagnosis is in the air.....



Population

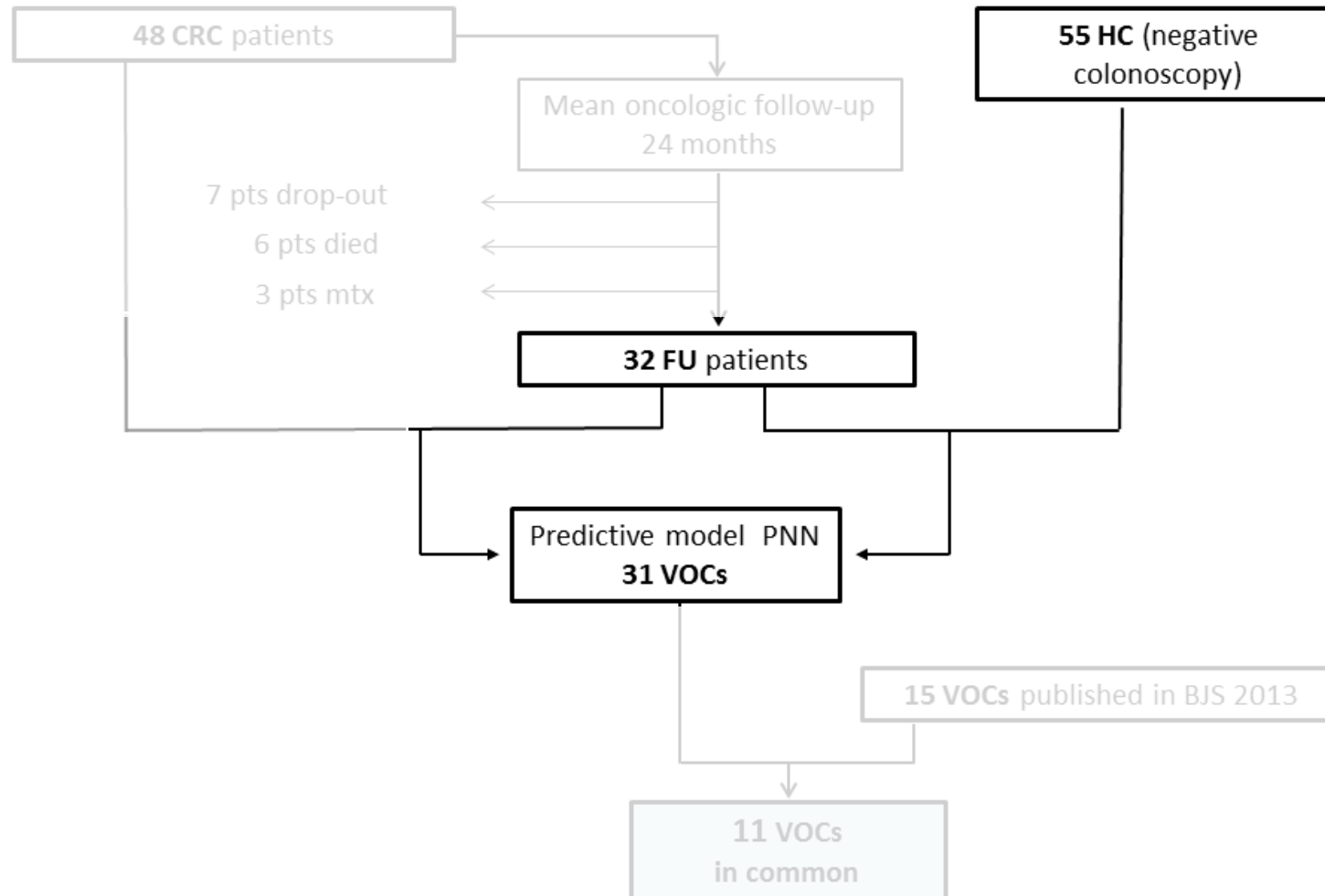
- 48 CRC pts
- M/F=1.4
- mean age 63 y
- submitted to curative resection
- stage I-II: 28 stage III-IV: 20

- 32/48 pts disease free
- M/F=1.7
- mean age 62 y
- Mean follow-up of 24 months
- Original stage:
I-II: 20 pts
III-IV: 12 pts

- 55 healthy controls
- M/F=1.03
- mean age 49.5y
- negative colonoscopy for screening purpose

Design of the study 2.

VOCs analysis in patients disease free in follow-up and healthy controls



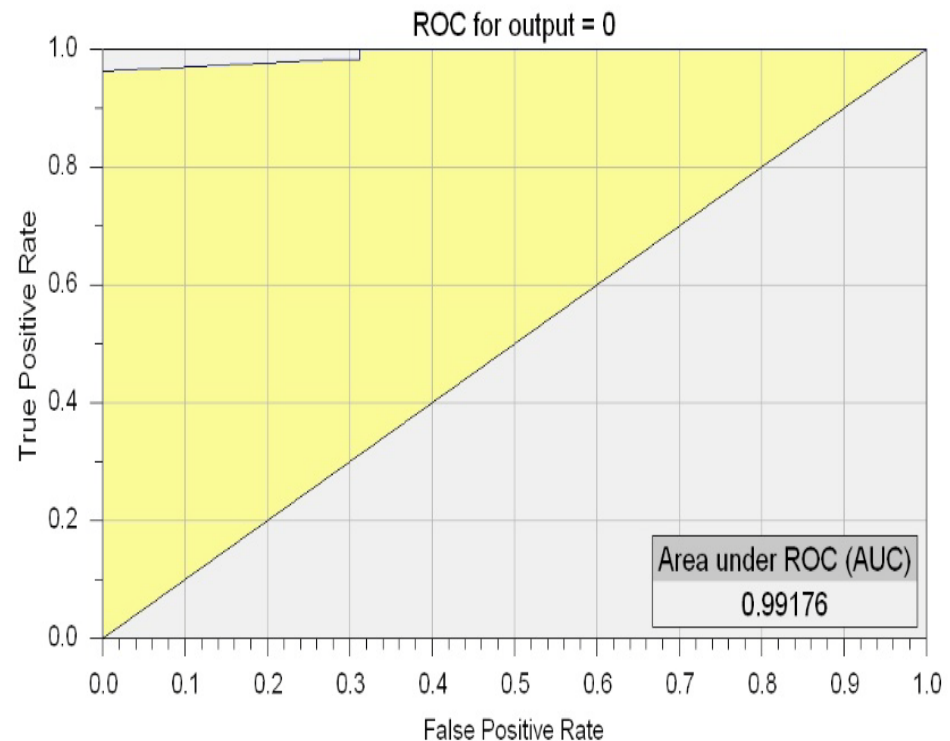
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1,3-dimethylbenzene	1,3-dimethyl-5-(1-methylethyl)benzene
1,4-dimethylbenzene	2-methylnaphthalene
propylbenzene	

Disease free patients in follow-up
vs healthy controls

PNN analysis

SENSITIVITY	100 %
SPECIFICITY	96.36%
ACCURACY	97.70 %
AUC	0.992



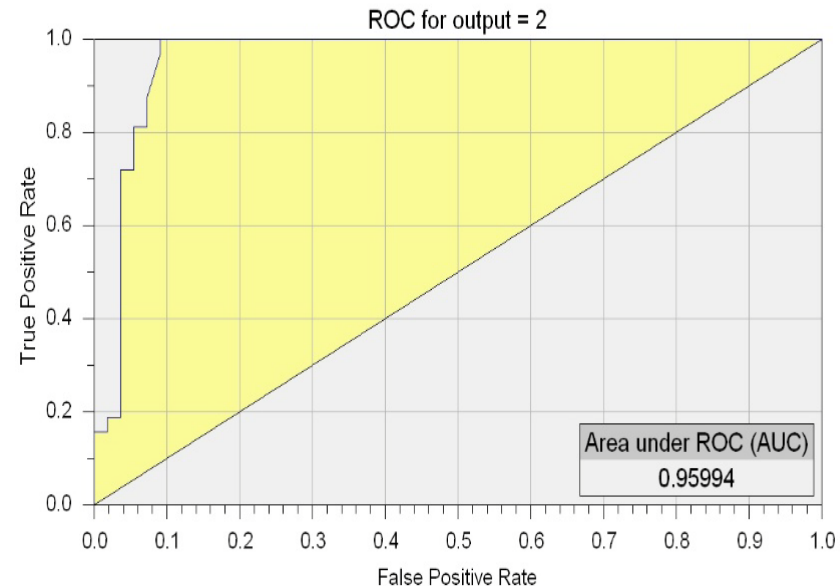
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Disease free patients in follow-up
vs healthy controls

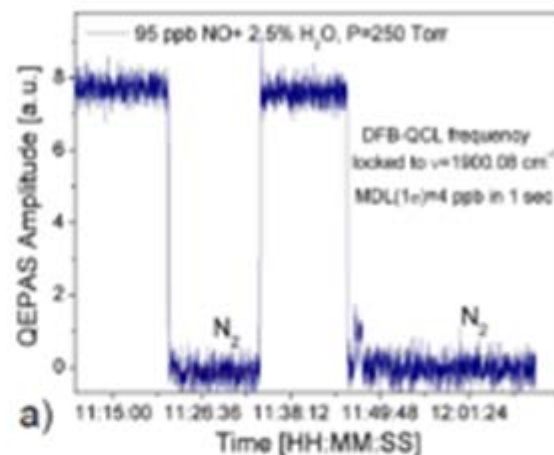
SENSITIVITY	100 %
SPECIFICITY	90.91%
ACCURACY	94.25%
AUC	0.959



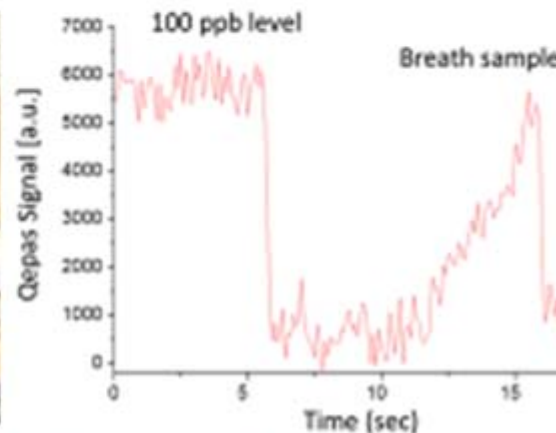
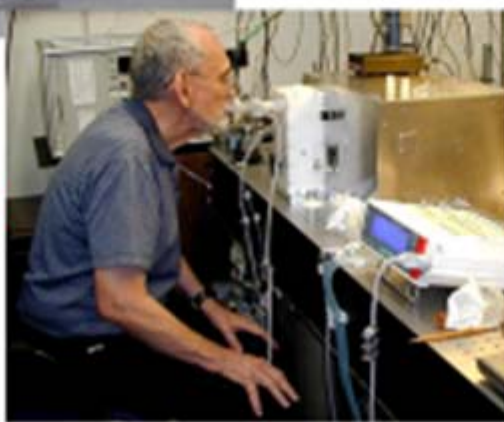
Development of quartz-enhanced photoacoustic sensors (QEPAS) for the sensitive and selective quantification of molecular trace gas species with resolved spectroscopic features

QEPAS Breath Sensors

NO Breath Sensor



Collaborazione
con Rice Univ.



Test Clinici nel Houston Medical Center in Texas

Performance of CRC screening tests

	FOBT	FIT	Colonography	Colonoscopy
Participation rate (%)	16-47	11-77	18-34	16-93
Positive rate (%)	2.4-6.8	1.1-1.3	8.6-9	4.9-11
Detected adv cancer/1000 invited individuals	2.1-6.3	1.1-21	8.8-21	14-73