

# YOUNG SCIENCE FORUM: IL FUTURO NASCE IN LABORATORIO

**L'oncosoppressore p53 nella Leucemia Linfatica Cronica:  
nuovi approcci per riattivare le proteine p53 mutate**

*Irena Velkova*

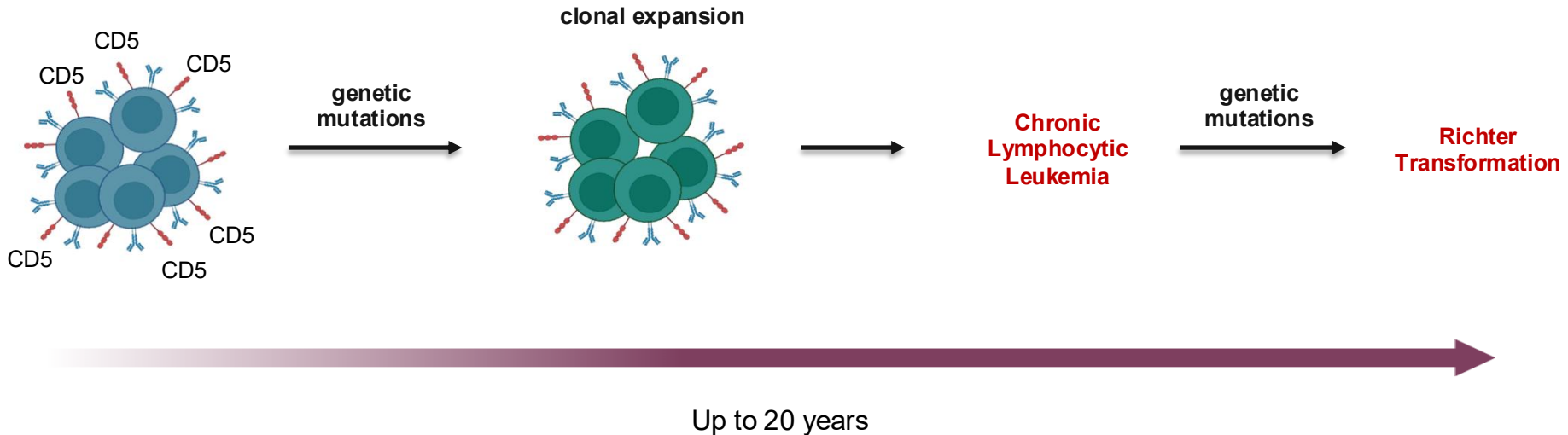
IRCCS AOM – Ospedale San Martino

TORINO, ACCADEMIA DI MEDICINA | 4-5 GIUGNO 2026

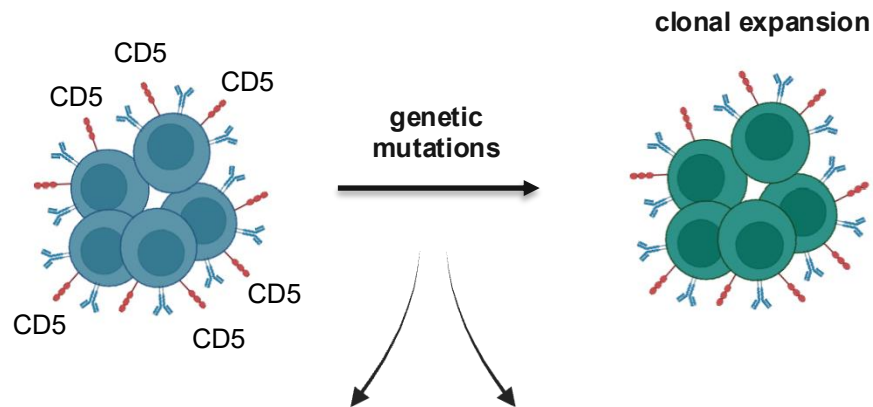
**No disclosures to declare**

# Chronic Lymphocytic Leukemia

Monoclonal, slow-growing cancer characterized by the accumulation of mature, **CD5+ B lymphocytes** in the blood, bone marrow, and lymphoid tissues



# Chronic Lymphocytic Leukemia



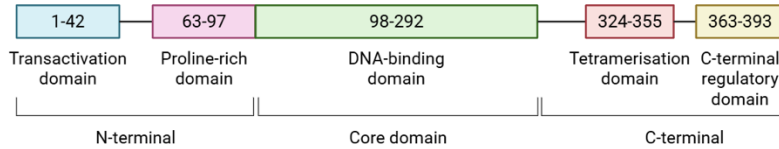
## KARYOTYPE ABERRATIONS

- Del 13q
- Del 11q
- **Del 17p**
- Trisomy 12

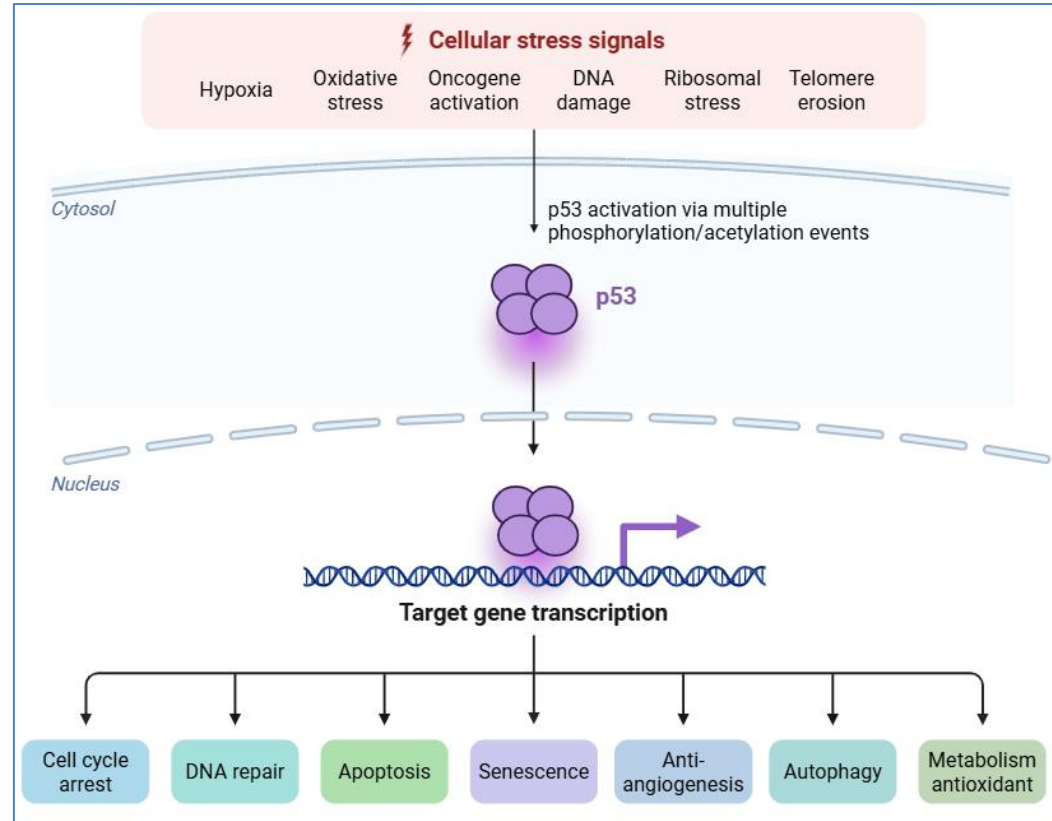
## GENE MUTATIONS

- **TP53**
- ATM
- NOTCH
- BIRC3

# The p53 protein

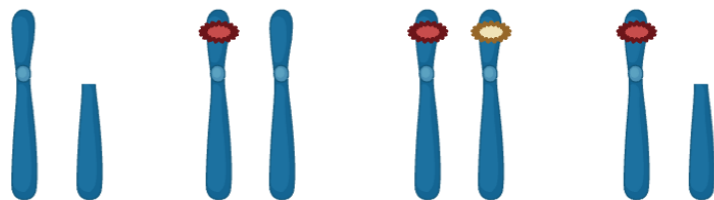


Crystal structure of the p53 core domain bound to a full consensus site as a self-assembled tetramer NIH 3D. <https://doi.org/10.60705/3DPX/9324.2>

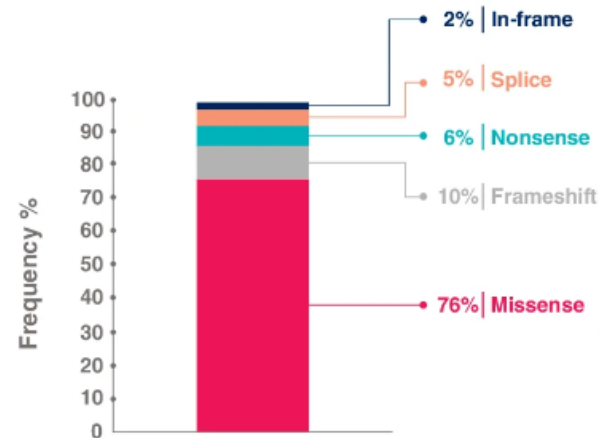


Adapted from Tanaka et al, *Oncotarget*, 2018 and Chéne, *Nature Rev Can*, 2003

## TP53 mutations in CLL



<b>TP53 status</b>	wt del (17p)	mut wt	mut mut	mut del (17p)
<b>Proportions of TP53 aberrations</b>	~10%	~30%		~60%

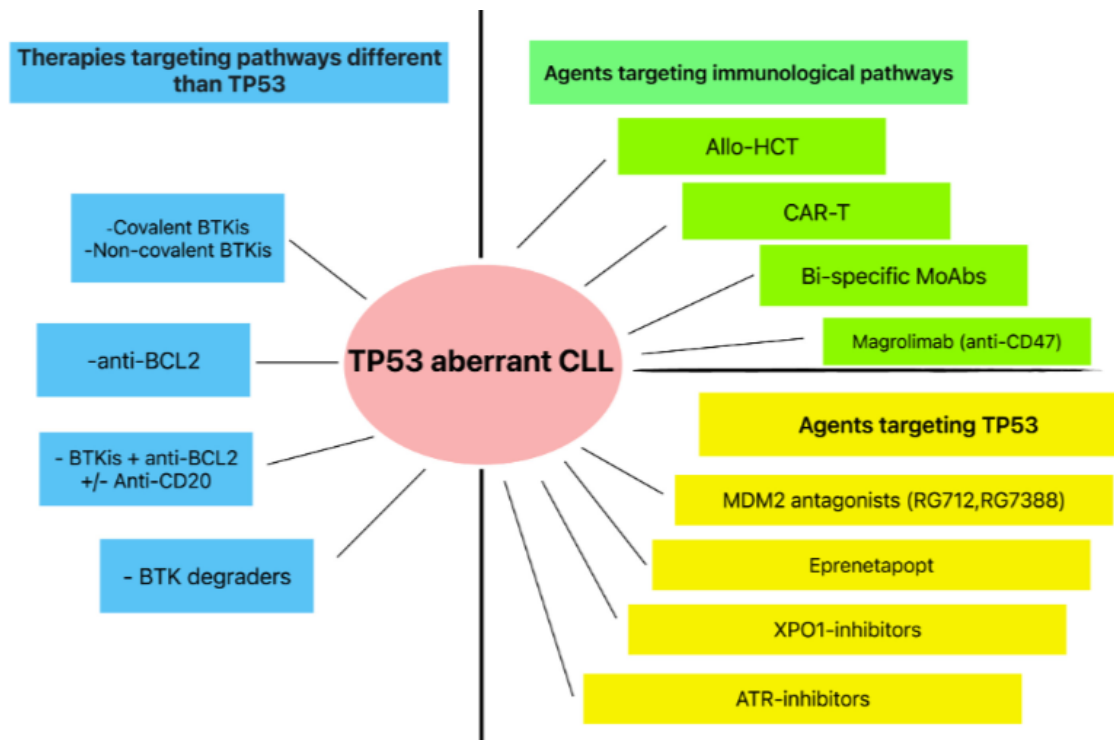


**Missense variants prevail**

Adapted from Campo et al, *Haematologica*, 2018

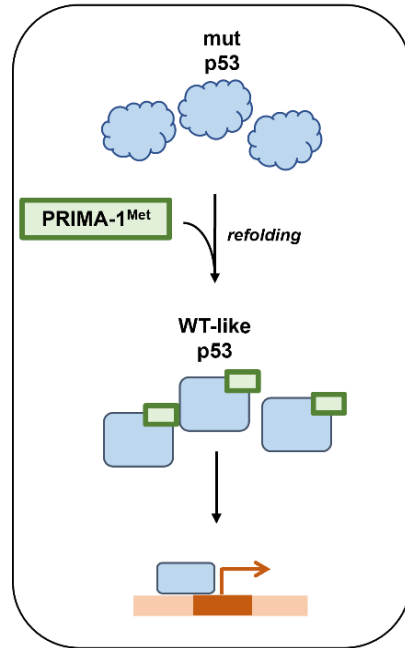
ERIC recommendations for TP53 mutation analysis in CLL-2024 update. *Leukemia*, 2024

# Current strategies for targeting *TP53* disruption in CLL

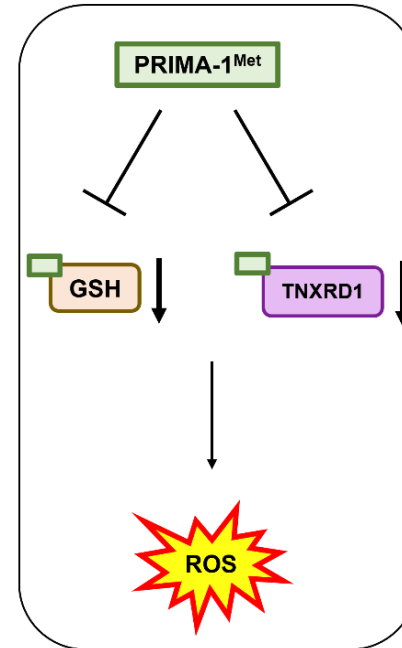


# The antitumor activity of PRIMA-1<sup>Met</sup>

## Reactivation of mutant p53

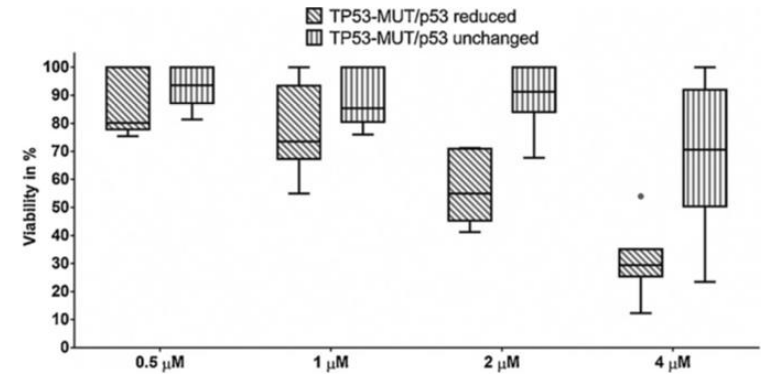
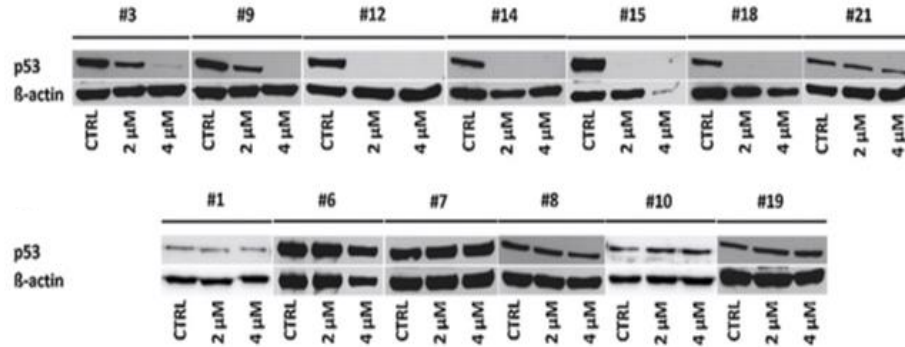


## Impairment of redox balance

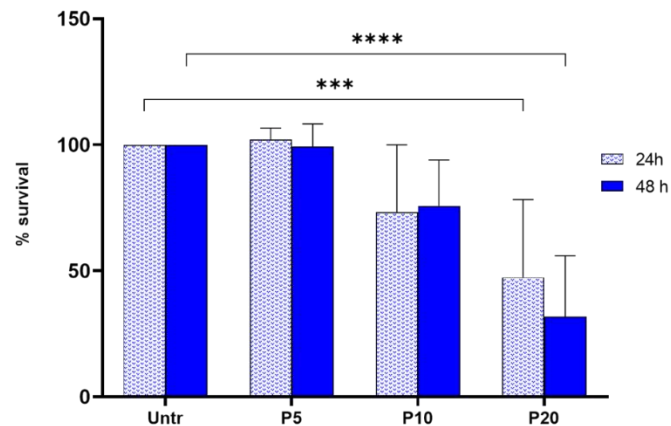
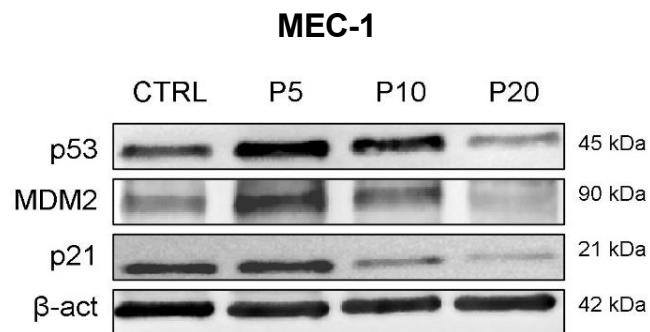
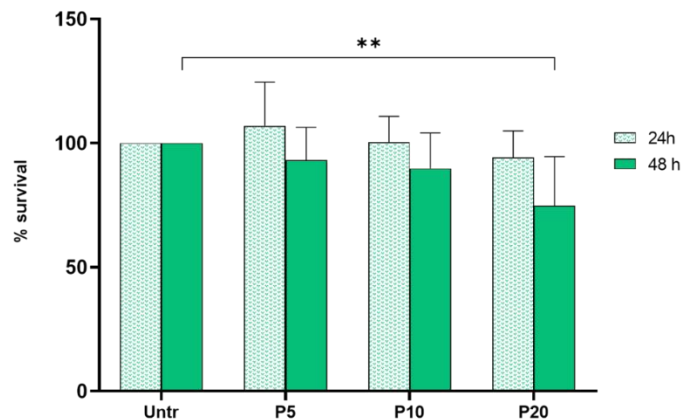
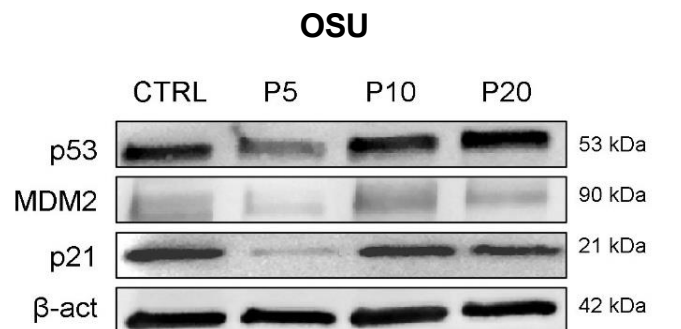


Adapted from Menichini et al, *Cells*, 2021 and Liu et al., *Nature Com*, 2017

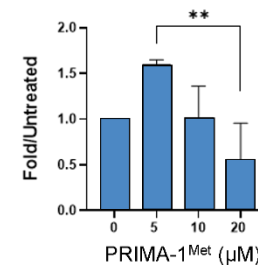
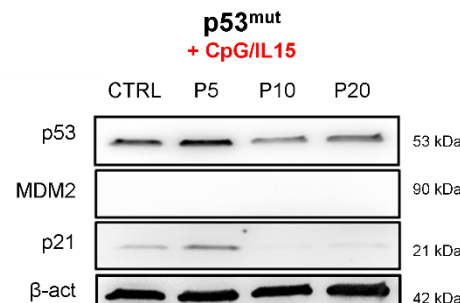
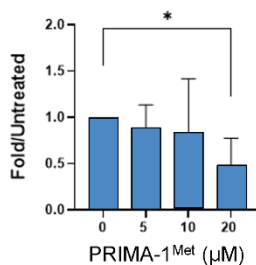
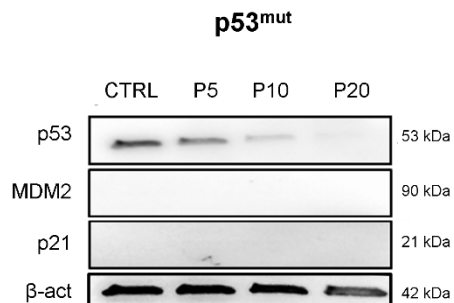
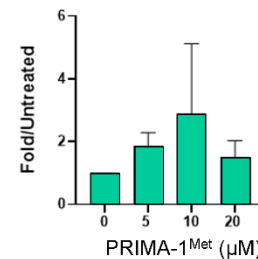
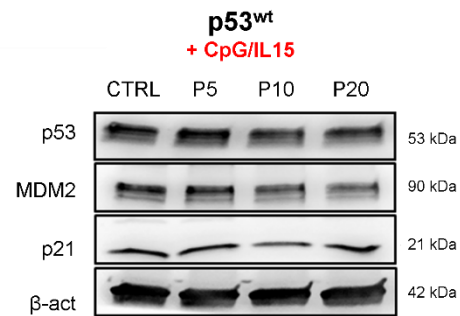
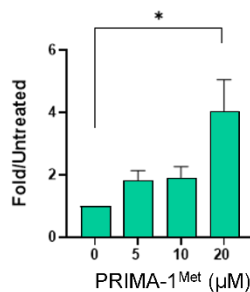
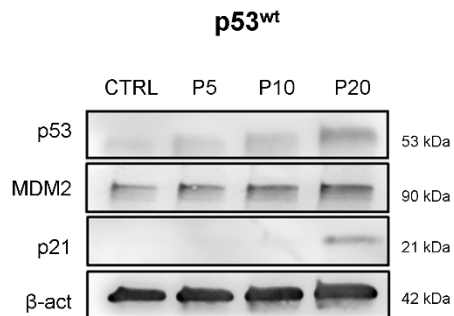
# PRIMA-1<sup>Met</sup> cytotoxic effect is similar in *TP53*-mutated and wild-type subsets



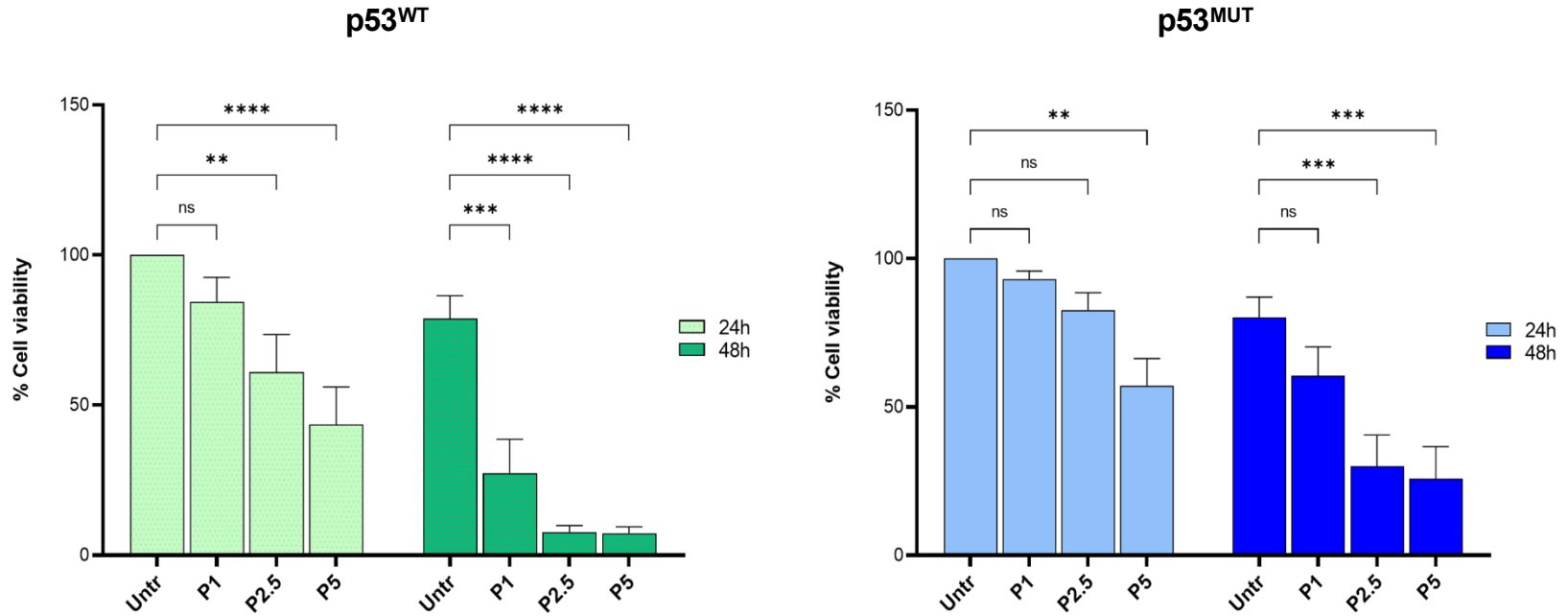
# PRIMA-1<sup>Met</sup> is unable to rescue mutant p53 transcriptional function in CLL cell models



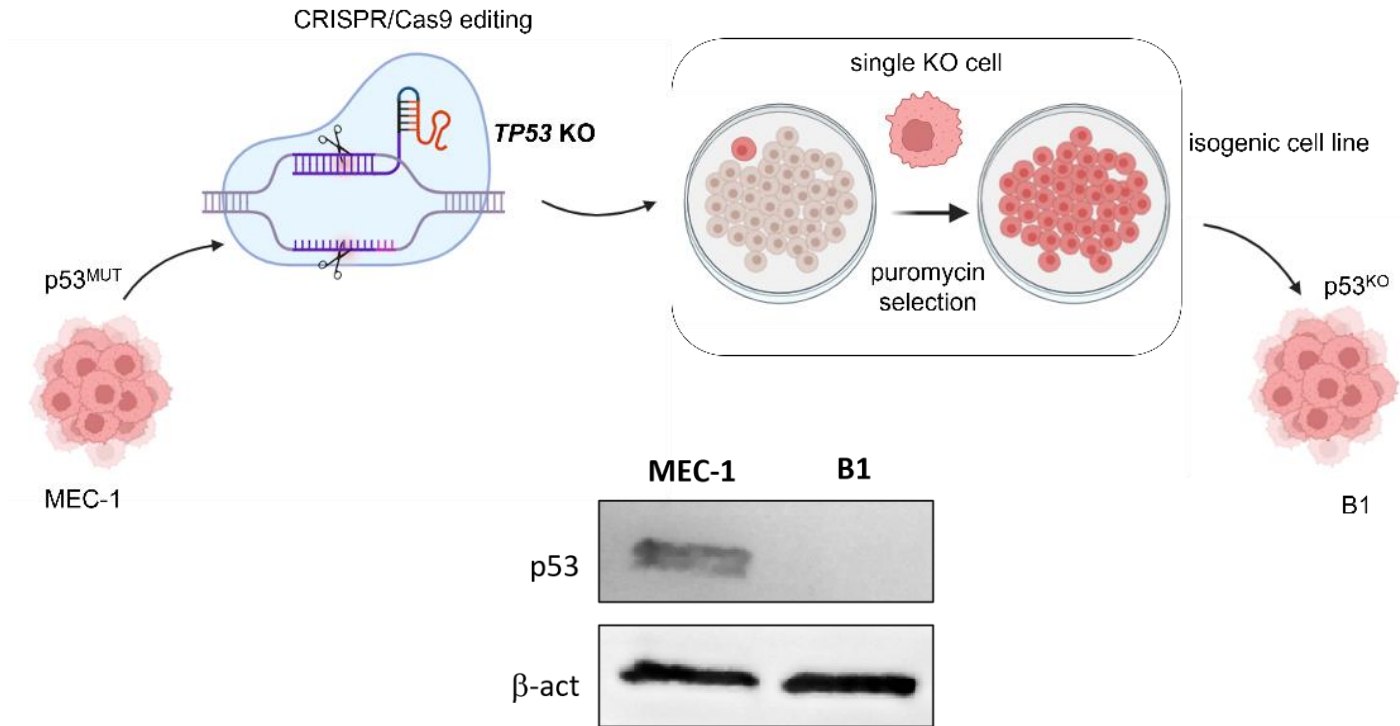
# PRIMA-1<sup>Met</sup> is unable to rescue mutant p53 transcriptional function in primary CLL cells



# PRIMA-1<sup>Met</sup> reduces viability of both p53-wild-type and mutated primary CLL cells

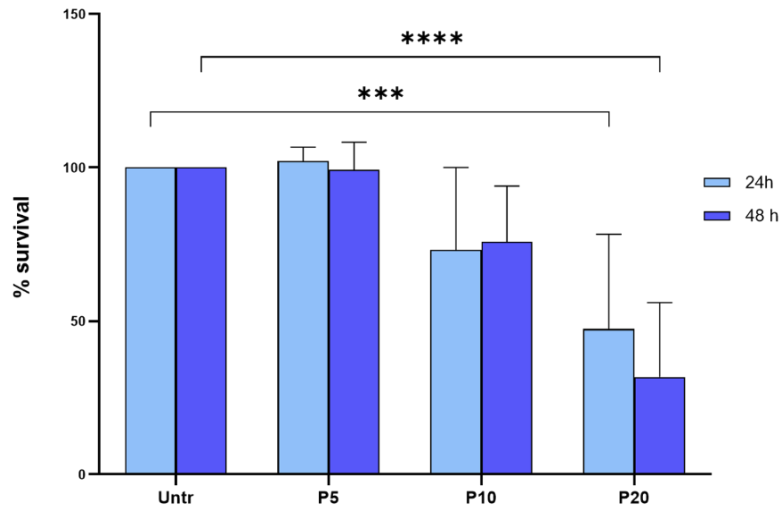


## Generating an isogenic *TP53* knock-out model through CRISPR/Cas9 editing

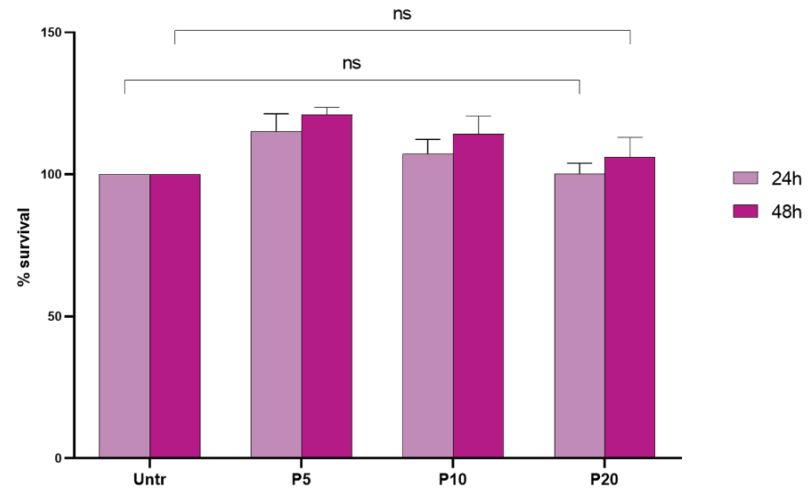


# Loss of p53 increases resistance to PRIMA-1<sup>Met</sup>

## MEC-1

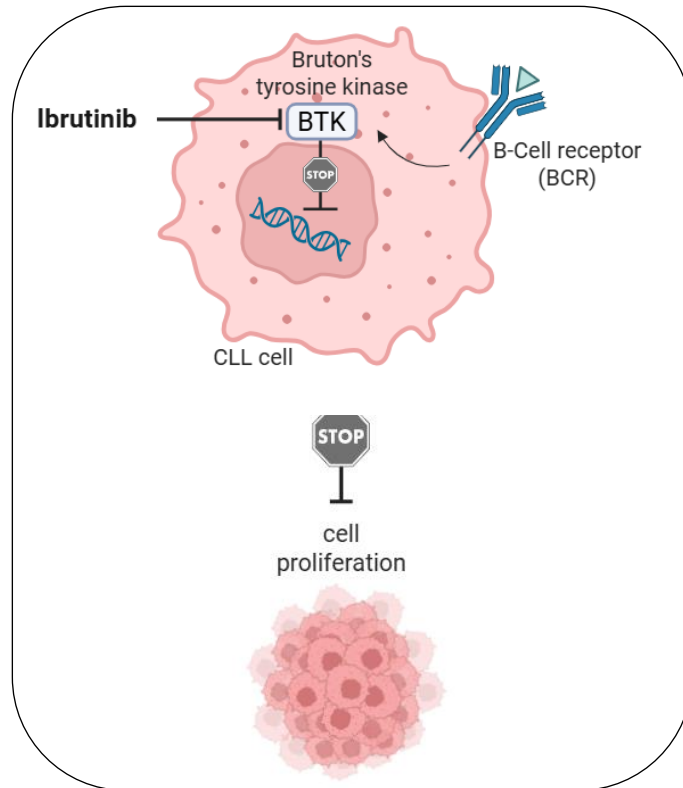


## B1

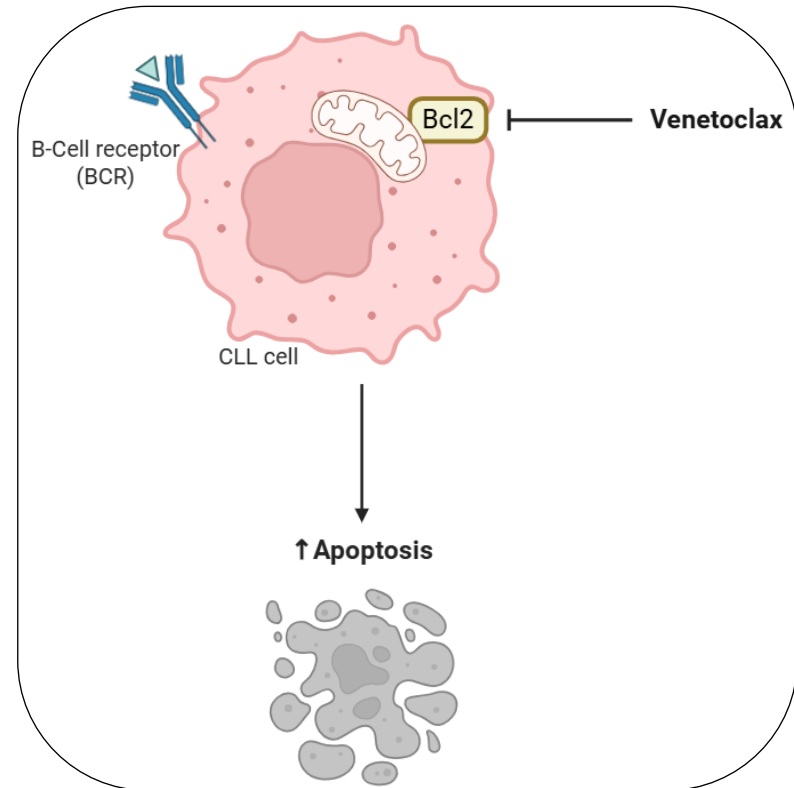


## Targeted therapies in CLL: BTK and BCL2 inhibition

### Ibrutinib

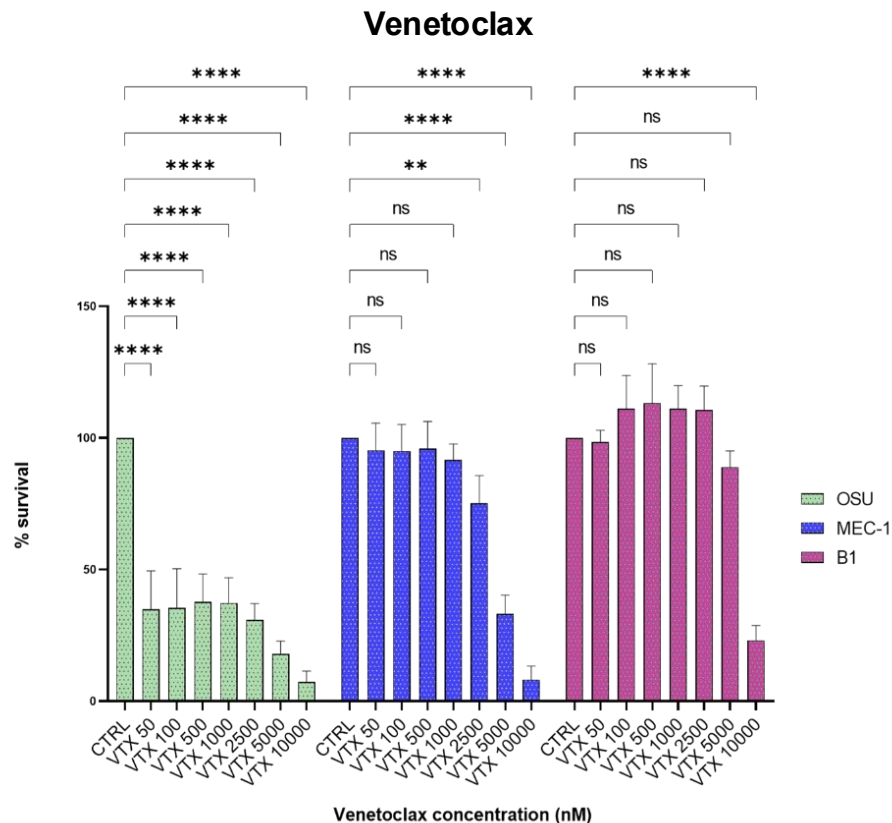
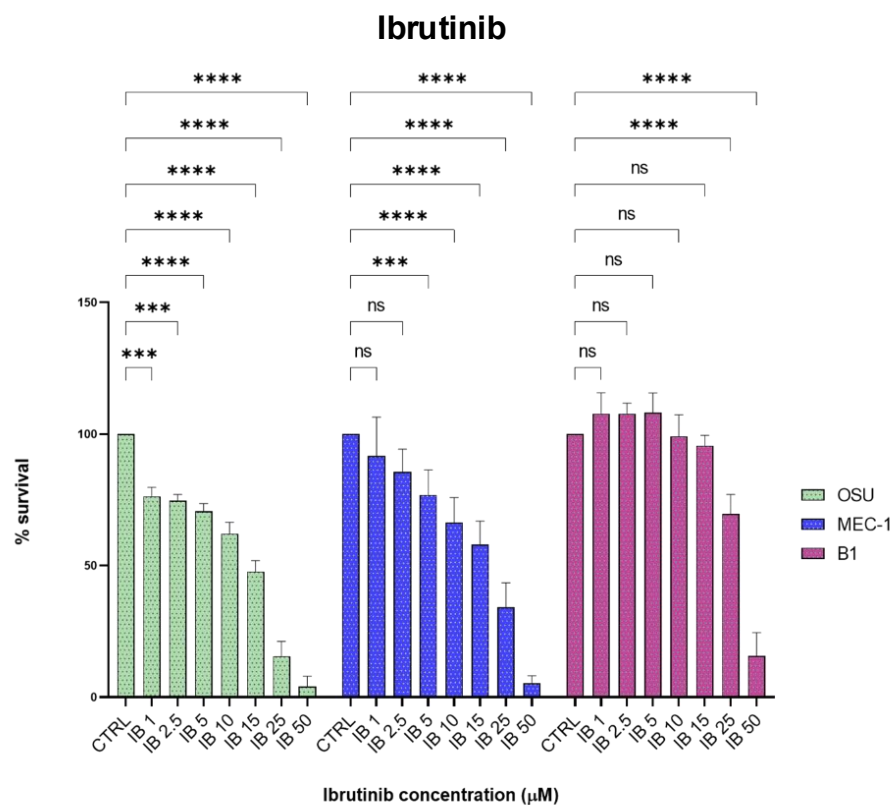


### Venetoclax












Adapted from Mhibik et al., *Blood Adv.*, 2023

# TP53 loss confers increased resistance to targeted agents



## Heterogeneity of *TP53* mutations

ACTIVITY	MUTATIONS
<b>Loss of function</b> 	e.g.: R175H, G245S, R248Q, R248W, S241F, R249S, R273C, R273H, C275Y, R280K
<b>Partial function and/or Temperature sensitive</b>  	e.g.: A161T, R181L, R202S, Y220H, S215C, D228V, V272L, R282W
<b>Wild type-like or Super-transactivating</b> 	e.g.: T123A, G199H, S240N, S288K, R337H, G360V
<b>Altered specificity</b>  	e.g.: K120R, S121F, V122A, T125R, G279E
<b>Dominant</b>  	e.g.: R175H, G245S, R248Q, R248W, S241F, R249S, R273C, R273H, C275Y, R280K
<b>Gain of function</b> 	e.g.: R175H, G245S, R248Q, R248W, S241F, R249S, R273C, R273H, C275Y, R280K, D281G, R282W

## Take home messages

- *TP53* alterations remain key determinants of CLL biology and therapeutic response
- PRIMA-1<sup>Met</sup> does not induce canonical p53 reactivation in our CLL models
- Alternative mechanisms may contribute to PRIMA-1<sup>Met</sup> cytotoxic effects in CLL
- *TP53* mutational status and complete *TP53* loss may have distinct biological and therapeutic consequences
- Functional heterogeneity of *TP53* alterations may influence therapeutic response



**Neuro-Oncology and Mutagenesis Unit**

Martina Pasino  
Paola Menichini  
Paola Monti

**Molecular Pathology Unit**

Nadia Bertola  
Giovanna Cutrona  
Rosanna Massara

**Hematology and Cellular Therapy Unit**

Emanuele Angelucci  
Adalberto Ibatici

**Biotherapy Unit**

Maurizio Viale

**Cytometry Facility**

Fabrizio Loiacono

**Molecular Oncology and Angiogenesis Unit**

Serena Matis



UNIVERSITÀ DEGLI STUDI  
DI GENOVA

**Department of Experimental Medicine**

Cinzia Domenicotti  
Franco Fais  
Barbara Marengo  
Andrea Nicola Mazzeo  
Silvia Ravera  
Nicola Traverso  
Giulia Elda Valenti

**Department of Pharmacy**

Bruno Tasso



UNIVERSITÀ  
DI TORINO

**Department of Medical  
Sciences**

Tiziana Vaisitti