

GSTP1 GENE VARIANT A313G (I105V)

ORDERING INFORMATION

REF: FGC-004-25
RDM Code: 1875567/R
CND Code: W0106010499
Tests: 25
Reactions: 31
Manufacturer: BioMol Laboratories s.r.l.

CONTENTS OF THE KIT

The kit consists of reagents for Real-Time PCR amplification
*the reagents for the extraction of genomic DNA are not supplied in the kit.

For in vitro diagnostic use



PRODUCT CHARACTERISTICS

Device belonging to the family of in vitro medical devices **REAL-TIME QUALITATIVE PCR-GENETIC VARIANTS**. The FGC-004 kit allows the characterization of the A313G genetic variant of the GSTP1 gene (rs1695) by amplification with oligonucleotides and specific probes (allele-specific genotyping) and subsequent detection with qPCR-Real-time. Optimized kit for Biorad Real-Time PCR instrumentation CFX96 Dx, Biorad Opus Dx, Agilent AriaDx, Hyris bCUBE and Hyris bCUBE3 with Hyris bAPP.

SCIENTIFIC BACKGROUND

The GSTP1 gene is located on chromosome 11q13 and has numerous polymorphisms. A single nucleotide substitution (rs1695) A/G causes an amino acid substitution from isoleucine to valine (I105V). This results in reduced substrate specificity, catalytic activity and thermal stability in the GSTP1 protein which is an isoenzyme with an important role in the detoxification of carcinogens, the metabolism of chemotherapeutic agents and the regulation of the cell cycle and apoptosis.

- § Association between Genetic Polymorphism of GSTP1 and Toxicities in Patients Receiving Platinum-Based Chemotherapy: A Systematic Review and Meta-Analysis. *Pharmaceuticals (Basel)* 2022 Apr 1;15(4):439.
- § Evaluating the role of GSTP1 genetic polymorphism (rs1695, 313A>G) as a predictor in cyclophosphamide-induced toxicities. *Medicine* 100(11): p e24423, March 19, 2021.
- § Glutathione S-transferasesP1 AA (I105Ile) allele increases oral cancer risk, interacts strongly with c-Jun Kinase and weakly detoxifies areca-nut metabolites. *Sci Rep* 2020 Apr 7;10(1):6032 doi:10.1038/s41598-020-63034-3.
- § Predictive value of clinical toxicities of chemotherapy with fluoropyrimidines and oxaliplatin in colorectal cancer by DPYD and GSTP1 gene polymorphisms. *World Journal of Surgical Oncology* volume 18, Article number: 321 (2020).
- § GSTP1 and cancer: Expression, methylation, polymorphisms and signaling (Review). *Int J Oncol* 2020 Apr;56(4):867-878. doi: 10.3892/ijo.2020.4979.
- § Glutathione S-Transferase Pi 1 (GSTP1) Gene 313 A/G (rs1695) polymorphism is associated with the risk of urinary bladder cancer: Evidence from a systematic review and meta-analysis based on 34 case-control studies. *Gene*. 2019 Nov 30; 719: 144077. doi: 10.1016/j.gene.2019.144077. Epub 2019 Aug 24.
- § Relationship between GSTP1 rs1695 gene polymorphism and myelosuppression induced by platinum-based drugs: a meta-analysis. *Int J Biol Markers*. 2018 Sep 21;1724600818792897. doi: 10.1177/1724600818792897.
- § Genotypes Affecting the Pharmacokinetics of Anticancer Drugs. *Clin Pharmacokinet*. 2017, Apr; 56 (4):317-337. doi: 10.1007/s40262-016-0450-z. Review.
- § Association of glutathione S-transferase T1, M1, and P1 polymorphisms in the breast cancer risk: a meta-analysis. *Ther Clin Risk Manag*. 2016 May 12; 12: 763-9. doi: 10.2147/TCRM.S104339. eCollection 2016.
- § Predictive potential role of glutathione S-transferase polymorphisms in the prognosis of breast cancer. *Genet Mol Res*. 2015 Aug 28; 14 (3):10236-41. doi: 10.4238/2015August.28.7.

CLINICAL SIGNIFICANCE

Numerous studies in the literature have investigated the correlation between the GSTP1 rs1695 variant and various treatment outcomes, including survival and clinical response, in patients suffering from malignant tumors. Recently, a significant correlation has been demonstrated between GSTP1 polymorphism and toxicity from platinum derivatives with symptoms such as vomiting and development of skin ulcers in patients affected by colorectal cancer (AA genotype for GSTP1 shows lower rates of severe vomiting (35.3 %) compared to patients with AG and GG genotypes (66,7% and 100%, respectively, p = 0,027). A 2022 meta-analysis study showed that patients receiving platinum-based treatment with the rs1695 G allele had approximately 1,7 and 2,6 times higher haematological adverse events and neutropenia than those with the AA genotype, respectively. Hematological toxicity and neutropenia are serious adverse events leading to treatment discontinuation. In this context, the results of this study indicated that GSTP1 could serve as a potential marker and substantially influence treatment regimens (level 3, PHARMG KB).

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DESCRIPTION	LABEL	VOLUME	STORAGE
Mix oligonucleotides and probes	Mix 10X A313G GSTP1	1 x 77,5 µl	-20°C
Mix buffer and Taq-polymerase enzyme	Mix Real-Time PCR 2X	1 x 387,5 µl	-20°C
Deionized H ₂ O	Deionized H ₂ O	1 x 1 ml	-20°C
Genomic DNA or recombinant DNA	Control 1	1 x 22 µl	-20°C
Genomic DNA or recombinant DNA	Control 2	1 x 22 µl	-20°C
Genomic DNA or recombinant DNA	Control 3	1 x 22 µl	-20°C

TECHNICAL CHARACTERISTICS

COD. FGC-004-25

STABILITY	18 months
REAGENTS STATUS	Ready to use
BIOLOGICAL MATRIX	Genomic DNA extracted from whole blood, tissue, cells
CONTROLS	Recombinant DNA for at least 3 analytical sessions
TECHNOLOGY	Real-time PCR; oligonucleotides and specific probes; 2 FAM/HEX fluorescence channels
VALIDATED INSTRUMENTS	Biorad CFX96 Dx, Biorad Opus Dx and Agilent AriaDx
RUNNING TIME	85 min
THERMAL CYCLING PROFILE	1 cycle at 95 °C (10 min); 45 cycles at 95 °C (15 sec) + 60 °C (60 sec)
ANALYTICAL SPECIFICITY	Absence of non-specific pairings of oligonucleotides and probes; absence of cross-reactivity
LIMIT OF DETECTION (LOD)	≥ 0,016 ng of genomic DNA
LIMIT OF BLANK (LOB)	0% NCN
REPRODUCIBILITY	99,9%
DIAGNOSTIC SPECIFICITY / DIAGNOSTIC SENSITIVITY	100%/98%