

Laboratory Service Report

1-800-533-1710

Patient Name REPORTVALIDATION, AUTOMATION DN	Patient ID RVDNPLB054	Age 40	Gender F	Order # RVDNPLB054
Ordering Phys			•	DOB 01/01/1971
Client Order # RVDNPLB054	C7028846-DLMP ROCHESTER 3050 SUPERIOR DRIVE		Report Notes	
Collected 11/18/2011 11:08				
Printed 11/21/2011 10:58	ROCHESTER,MN 55901			

Test	Flag	Results	Unit	Reference Value	Perform Site*
CYP2D6 Tamoxifen Genotype, Saliva			REPORTED 1	1/18/2011 13:37	
2D6 Tamoxifen Genotype Star Alleles		1/1		_,,	MCR
See http://www.cypalleles.ki.se		,			11011
description of CYP2D6 alleles.					
2D6T Duplication		See Below			MCR
Result: Duplication Not Present					
2D6T Deletion		Deletion Not Present			MCR
2D6T -1584c>g (*2A)		C/C			MCR
2D6T 100c>t (*10)		C/C			MCR
2D6T 124g>a (*12)		G/G			MCR
2D6T 138inst (*15)		WT			MCR
2D6T 883g>c (*11)		G/G			MCR
2D6T 1023c>t (*17)		C/C			MCR
2D6T 1707tdel (*6)		T/T			MCR
2D6T 1758g>t/a (*8/*14)		G/G			MCR
2D6T 1846g>a (*4)		G/G			MCR
2D6T 2549adel (*3)		A/A			MCR
2D6T 2613agadel (*9)		WT			MCR
2D6T 2850c>t (*2)		C/C			MCR
2D6T 2935a>c (*7)		A/A			MCR
2D6T 2988g>a (*41)		G/G			MCR
2D6 Tamoxifen Genotype Interp					MCR
This patient has two copies of a					
protein with normal activity.	Additio	nal descriptions of			
the effects of the star alleles	on CYP	2D6 function are			
found in the Mayo Test Catalog					
(http://www.mayomedicallaborator	ries.com	m/test-catalog/).			
2D6 Tamoxifen Reviewed by		Jamie Bruflat			MCR
2D6 Tamoxifen Phenotype Interp					MCR
Predicted extensive (normal) met	taboliz	er. This patient has			
a genotype associated with the	extensi	ve (normal) tamoxifen			
metabolizer phenotype. Postmeno	opausal	women with this			
phenotype and early stage breast	t cance:	r are not at			
increased risk for breast cancer	r recur	rence when treated			
with tamoxifen as adjuvant there	apy for	early breast cancer.			
However, patients with this phe	enotype	should not be			
coadministered moderate or poter	nt CYP2	O6 inhibitors, as			
these medications are known to d	decreas	e the metabolic			
activation of tamoxifen and may	increa	se the risk of breast			
cancer relapse.					
Direct polymorphism analysis for					
138insT, 883G>C, 1023C>T, 1707T	del, 1'	758G>T, 1758G>A,			
1846G>A, 2549A>del, 2613delAGA,					
CYP2D6 gene deletion, and gene of	duplica	tion is performed			

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following PCR amplification. Direct DNA testing will not detect all the known mutations that result in decreased or inactive CYP2D6. Absence of a detectable gene mutation or polymorphism does not rule out the possibility that a patient has an intermediate or poor metabolizer phenotype. Based on the test sensitivity and currently available CYP2D6 polymorphism carrier frequencies, persons of Caucasian descent who tested negative for the above polymorphisms would be estimated to have a less than 1.4 percent residual risk for carrying one or more copies of an undetected poor metabolizer allele. This residual risk may be higher or lower in other ethnic groups. The frequency of polymorphisms causing poor metabolism is highest in the Caucasian population and lower in African Americans and Asians. Patients with an extensive (normal) or intermediate metabolizer genotype may have CYP2D6 enzyme activity inhibited by a variety of medications, or their metabolites. Because antidepressants are often prescribed to alleviate the hot flashes that accompany tamoxifen therapy, it is particularly important to utilize an antidepressant that does not compromise CYP2D6 activity, which could reduce tamoxifen's efficacy. The following is a partial listing of drugs known to affect CYP2D6 activity as of the date of this report.

Drugs that inhibit CYP2D6 significantly: Amiodarone, bupropion, cimetidine, cinacalcet, cocaine, dexmedetomidine, duloxetine, fluoxetine, paroxetine, perazine, perphenazine, pergolide, pimozide, quinidine, sertraline, terbinafine, thioridazine, and ticlopidine.

Additional factors may modulate the treatment response to tamoxifen. Expression of estrogen receptor beta by the tumor, in the absence of estrogen receptor alpha, is a favorable prognostic indicator for tamoxifen therapy. However, expression of the Her2 receptor by the tumor may indicate tamoxifen resistance even if the CYP2D6 genotype indicates activation of sufficient endoxifen. Analyte Specific Reagent. This test was developed and its performance characteristics determined by Mayo Clinic. It has not been cleared or approved by the U.S. Food and Drug Administration.

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^{*} Report times for Mayo performed tests are CST/CDT



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MCR	Mayo Clinic Dpt of Lab Med & Pathology	Lab Director: Franklin R. Cockerill, III, M.D.
	200 First St SW Rochester MN 55905	

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