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**Molecular Landscape in a Cohort of Thyroid
Neoplasms from the Volcanic Area of Sicily**

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1. ABSTRACT

Thyroid cancer is the most frequent tumor of the endocrine system. An increased incidence of papillary thyroid cancers (PTC) has been observed in volcanic areas worldwide, due to a chronic exposure to low-level heavy metals pollution. Additionally, subjects with a history of childhood tumors, who received chemo-radiotherapy, display a higher risk to develop PTC later in life. Despite the molecular landscape of PTC has been largely explored, it remains unknown if tumors diagnosed in patients from a volcanic area present distinct genomic features. Similarly, molecular characteristics of PTC arising in individuals with an history of pediatric malignancy have been only partly elucidated, with most of the data regarding radiation-related tumors. Lastly, follicular adenomas represent benign thyroid neoplasms, whose molecular background have been scarcely investigated.

In this study, we performed a next generation sequencing analysis in a cohort of PTC and thyroid adenomas diagnosed in subjects from the volcanic area of Mount Etna, using a custom panel. Of the 22 PTC samples analyzed, 7 were from patients exposed to chemotherapy and/or radiotherapy for a pediatric cancer.

In our population, de novo PTC presented a high incidence of *BRAF* and *ZFH3* mutations. Some cases harbored a concomitant alteration in *BRAF* and *H/KRAS*, which are mutually exclusive according to the existing literature. However, all the *KRAS* mutations involved non-coding regions of the gene and their functional significance remains controversial. As expected, 3 follicular variant PTC were RAS-driven.

Secondary PTC displayed two mutational patterns. On the one side, radiation-induced tumors showed an hypermutated profile, with a non-canonical *BRAF* fusion and an enrichment in copy number variations (CNV). On the other hand, PTC occurring in

patients exposed to chemotherapy alone presented a stable genomic profile, with few mutations, not reflecting the classical BRAF/RAS dualism. Of note, *ZFH3* was altered in all the secondary PTC.

Lastly, adenomas showed a discrete number of alterations, mainly involving *KRAS*, *ZFH3* and *KMT2C*, besides some unexpected CNV.

Further bioinformatic analyses about protein-protein networks, enriched biological functions and pathways showed several differences in the studied populations. While de novo PTC were mainly enriched with MAPK signaling-related functions and pathways, secondary tumors also presented an enrichment in gene expression, TP53 activation/regulation and DNA repair. Lastly, molecular alterations in thyroid adenomas also converged on the MAPK signaling, but with some unique features, such as enrichment in biological process related to cell adhesion, motility and migration and FGFR-related pathways.

Overall, our study suggest that the molecular landscape of PTC developing in subjects from a volcanic area is only partly concordant with pre-existing literature evidence. Moreover, individuals previously exposed to radiotherapy, but not those exposed to chemotherapy only, seem to have a greater risk to develop a hypermutated, and hence more aggressive, PTC. Lastly, the profile of thyroid adenomas was enriched with SNV and CNV converging on biological pathways that were substantially different to those observed in PTC. These findings may have significant clinical implications and thus deserve further validation in larger and prospective cohorts.

2. INTRODUCTION

2.1. Thyroid Cancers: General Features

Worldwide, thyroid cancers account for 2.5% of all malignancies and about 90% of tumors affecting the endocrine system (1). During 2022, in Italy, 12200 new cases of thyroid cancers have been reported (8700 in women and 3500 in men), representing 4% of all the oncological diagnoses (2). These tumors are three to four times more common in women than men, with a median age of onset between 25 and 65 years (3). Over the last decades, the incidence of thyroid malignancies has increased steadily by almost 5% per year in both sexes, to lastly reach a plateau (4, 5) (**Figure 1.1**). Improved diagnostic techniques are probably the main cause of the increased incidence of thyroid tumors, but environmental factors (e.g. exposure to radiation or pollution) and lifestyle habits may also play a role (6, 7).

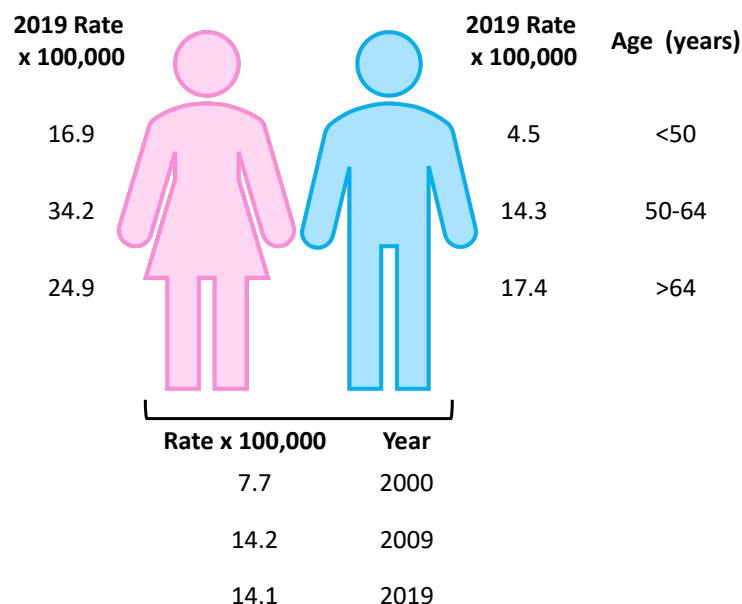


Figure 1.1. Thyroid cancer epidemiology according to age, gender and year

Data from the American Surveillance, Epidemiology, and End Results (SEER) database.

The overall thyroid cancer-related mortality is low, with 0.7 and 0.5 deaths per 100 000 person-years for women and men, respectively. In contrast with the increasing incidence, the mortality rate of these tumors has not significantly changed over time (8). The main prognostic factors are represented by tumor histology, with the best survival rates in patients with well-differentiated cancers and the worst for those with anaplastic tumors, and by age at diagnosis, with younger individuals displaying the best outcomes (9, 10).

Thyroid gland includes two different types of epithelial cells, with distinct embryological origins and function. Follicular cells, the main cellular component, are organized in functional units called follicles and produce thyroxine and triiodothyronine. Parafollicular-cells, also known as clear (C) cells, are a minor component with neuroendocrine origin and secrete the hormone calcitonin (11).

From these cellular populations stem different types of thyroid cancers (**Figure 1.2**). The vast majority of thyroid malignancies (>95%) derive from follicular cells and include differentiated (DTC), poorly differentiated (PDTC) and anaplastic (ATC) thyroid carcinomas. According to the most recent World Health Organization (WHO) classification, DTC are further classified into papillary (PTC), follicular (FTC), invasive encapsulated follicular variant papillary (IEFV-PTC), differentiated high grade (DHTC) and oncocytic (previously known as Hürtle cell) carcinomas (12, 13).

Papillary thyroid tumors represent the most common subtype (accounting for about 70-80% of thyroid cancers) and are further classified into several variants, including follicular, tall cell, columnar cell, hobnail cell, solid, diffuse sclerosing, Warthin-like and oncocytic subtype (14).

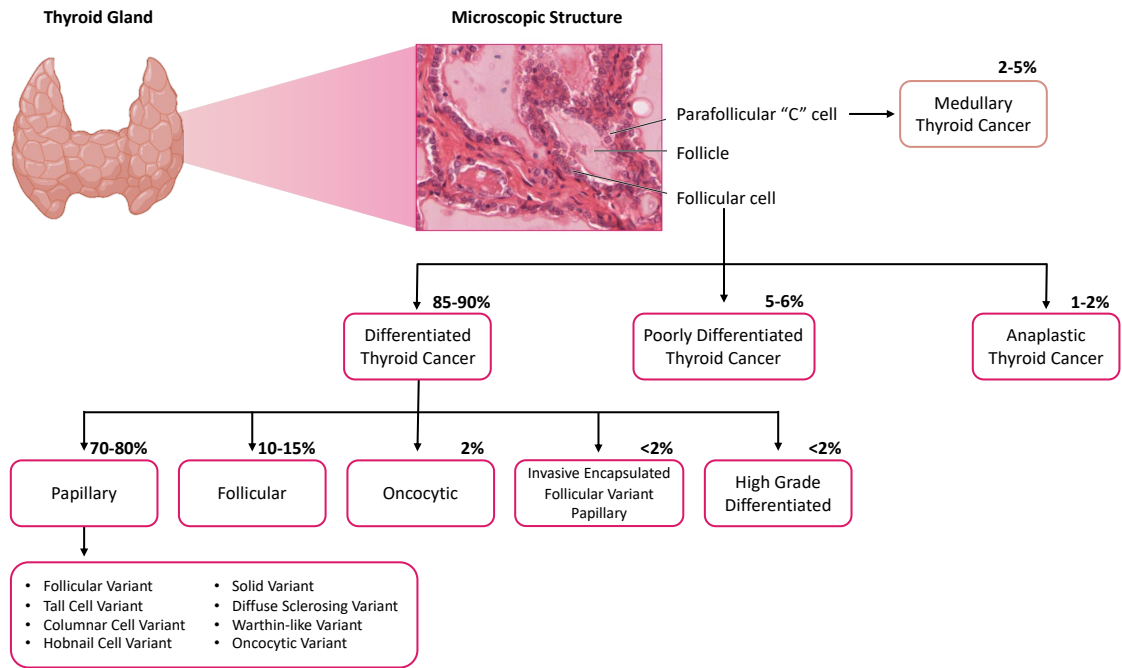


Figure 1.2. Cellular components of thyroid epithelium and corresponding tumor types with correlated incidence rates

Poorly differentiated tumors, accounting for 5-6% of all thyroid cancers, represent a controversially defined entity, characterized by increased proliferation rate compared to DTC but maintenance of thyroid differentiation. Additionally they typically display capsular and vascular invasion and focal tumor necrosis (15, 16).

Anaplastic tumors represents less than 2% of all thyroid cancers and are constituted by undifferentiated cells that have lost any similarity with the normal thyroid tissue (17). Para-follicular cells give origin to medullary thyroid cancer (MTC), which represents 2-5% of all thyroid cancers (18). Consistently with their cell of origin, MTC display a neuroendocrine differentiation. They can be either sporadic, in 75% of cases, or hereditary, in the remaining 25% of cases, the latter defined as part of Multiple Endocrine Neoplasia type 2 (MEN2) syndrome (19).

From the clinical standpoint, PTC are the thyroid tumors with the best prognosis, rarely metastasizing to distant sites. Follicular thyroid cancer and Hurtle cell carcinoma are also

indolent but present a slightly higher rate of distant metastases, especially to the lungs and the bones. Poorly differentiated thyroid cancers are more aggressive, with frequent metastatic spread (12). Standard upfront treatment for DTC and PDTC involves surgery followed by adjuvant hormone replacement and radioactive iodine (¹³¹I-based RAI) therapy for high-risk diseases (20). The majority of patients who present distant metastases at diagnosis, or develop them subsequently, are eligible to RAI, with a 40% chance of achieving a complete and durable response (20, 21). However, the remaining 60% display primary or acquired resistance to RAI thus needing further treatments, such as targeted agents (22). Currently approved targeted therapies for the treatment of RAI-refractory advanced DTC and PDTC include the small molecules multi-tyrosine kinase inhibitors lenvatinib and sorafenib (23).

Differently from DTC, ATC have an extremely aggressive and usually lethal clinical course with rapid growth, a propensity for local invasion and a high rate of distant dissemination (mainly to the lungs, bones and brain) (24). Given the lack of follicular differentiation, ATC do not retain sensitivity to RAI, due to suppression of the sodium iodide symporter (NIS) expression and/or function (25). Therefore, radiotherapy and chemotherapy are the only viable therapeutic options, even though durable response are exceedingly rare. However, in selected cases presenting a BRAF^{V600E} mutation the combination of BRAF inhibitor dabrafenib and MEK inhibitor trametinib can be used (23, 26). **Table 1.1** summarizes pathological and clinical features of thyroid cancers of follicular origin.

In case of MTC, surgery followed by hormone replacement is the standard treatment for localized disease, while locally advanced or metastatic MTC can be treated with targeted agents (cabozantib or vandetanib) or, less frequently, chemotherapy (27).

Table 1.2. Pathological and Clinical Features of Thyroid Cancers of Follicular Origin

Histotype	Differentiation (growth pattern)	Grade (mitosis, necrosis)	Prognosis	Targeted Therapies
Papillary	Good (papillae, follicles)	Low	Excellent	Lenvatinib, Sorafenib
Follicular				
Oncocytic				
Differentiated, high grade	Poor (solid, trabecular, insular)	High	Intermediate	Dabrafenib + Trametinib (for <i>BRAF</i> mutant)
Poorly Differentiated				
Anaplastic			Absent (undifferentiated)	

Modified from Baloch Z.W. et al., 2022 (14).

2.1.1. Thyroid Cancers in Volcanic Areas

A potential correlation between a volcanic environment and an increased risk of thyroid cancer has been hypothesized since 1980s, when Kung et al noticed a high incidence of these neoplasms in Iceland and Hawaii (28). In the following decades, further observations showed high rates of thyroid cancer in other volcanic areas, including Vanuatu, French Polynesia, New Caledonia and Loyalty islands (29-31).

This evidence was then confirmed observational studies, carried out among individual from eastern Sicily (province of Catania) exposed to the volcanic environment of Mount Etna (**Figure 1.3**) (32-35). According to these studies, in the Sicilian volcanic area papillary thyroid cancers, but not follicular or medullary histotypes, display an increased incidence.

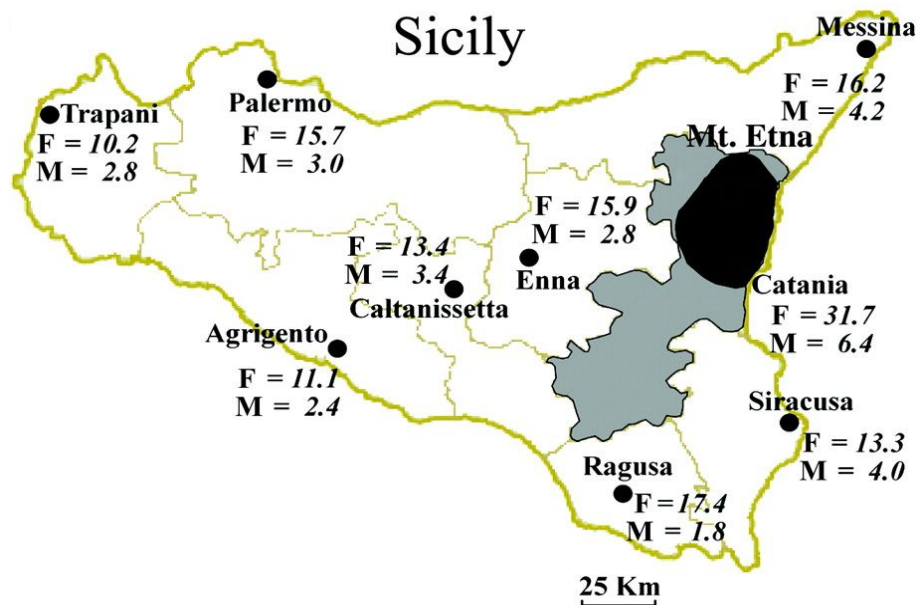


Figure 1.3. Map of Sicily and incidence of thyroid cancer, as reported by Pellegriti G. et al., 2009

The black area represents the basement of Mount Etna, the gray area represents the province of Catania. Adapted from Pellegriti G. et al., 2009 (32).

Despite these robust evidence, not all the volcanic environment are associated with the same high rates of thyroid cancer. Indeed, different composition of toxic compounds in gas, ash and lava emissions may explain the different risk of thyroid neoplasms in volcanic areas worldwide (Vigneri 2017) (6). Additionally, the presence of aquifer with water enriched in heavy metals - as happens in the area of Mount Etna - may represent a vehicle for contamination (36). In fact, this cause an increased metal concentration in vegetables and a significant biocontamination of the local population (**Figure 1.4**) (34, 37-39).

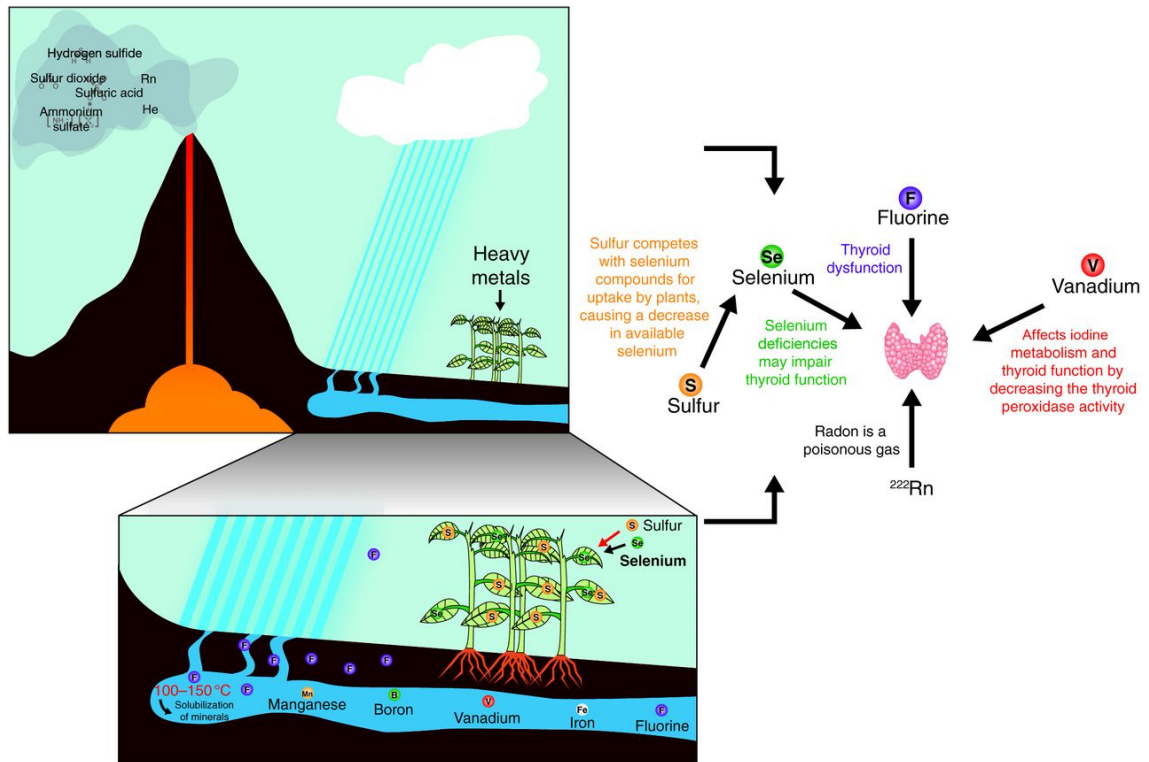


Figure 1.4. Correlation between volcanic environment, heavy metals pollution in the air and in the aquifer and the development of thyroid cancer

Adapted from Marcello M.A. et al, 2014 (39).

Heavy metals [e.g. Arsenic (As), Cadmium (Cd), Copper (Cu), Iron (Fe), Lead (Pb), Manganese (Mn), Mercury (Hg), Nickel (Ni), Selenium (Se), Tungsten (W), Zinc (Zn)] may exert a cancerogenic role by causing genetic and epigenetic changes in specific cell types, promoting their malignant transformation. Additionally, several metals can accumulate into the thyroid gland and interfere with hormone synthesis, secretion, metabolism and receptor interaction (6). Metal may also cause negative feedback that increases TSH secretion, that may in turn elicit thyroid cell hyperplasia and eventually thyroid carcinogenesis (40).

More recently, *in vivo* and *in vitro* studies suggested that thyroid stem cells are affected by chronic exposure to low-level heavy metal pollution (41). More in detail, long-lasting exposure to slightly increased metal concentrations may have a profound effect on

thyroid precursor cells *in vivo*. These cells then differentiate into mature thyrocytes with transformed features (42). The biological mechanisms leading to malignant transformation remain on partly understood (43). It has been demonstrated that chronic exposure to low-level increased metals promotes ERK1/2 phosphorylation, leading to a pathway activation that eventually determines immature thyroid cell dysregulated proliferation (41).

Regardless of the underlying cancerogenic mechanisms, it is unknown whether thyroid cancers observed in patients living in a volcanic area and chronically exposed to heavy metals display distinct biological features compared to those arising in subjects without this environmental risk factor.

2.1.2. Secondary Thyroid Cancers

It is well known that survivors from pediatric cancers have a 5 to 18-fold increased risk to develop a secondary thyroid malignancy later in life, with a cumulative incidence of about 1.5% after 30 from the primary cancer diagnosis (44-47). In these subjects, the latency between primary tumor and the development of a thyroid malignancy is variable, ranging from 0.6 to 38 years according to different observational studies (48-56). Differentiated thyroid cancers, especially papillary and follicular histotypes, are mainly observed in this population (57).

There are both epidemiological and clinical correlations linking pediatric cancers and increased incidence of secondary thyroid carcinomas. Treatment-related factors have been identified, including radiotherapy, chemotherapy and hematopoietic stem cell transplant (48). Patient-related factors can also be involved, such as female gender, younger age at diagnosis, longer follow-up since primary cancer, older survivor's age and

primary cancer diagnosis. Lastly, but not less important, genetic susceptibility may have a role in individuals with germline mutations and inherited syndromes (48).

Treatment-related factors: Among survivors of pediatric malignancies, previous radiotherapy involving the thyroid gland is the main risk factor for secondary differentiated thyroid cancers, particularly for PTC. It has been demonstrated that radiations exert their effect through a non-linear dose-response curve, with a steadily increased risk up to 20 Gy, followed by a rapid decline (**Figure 1.5**) (58, 59).

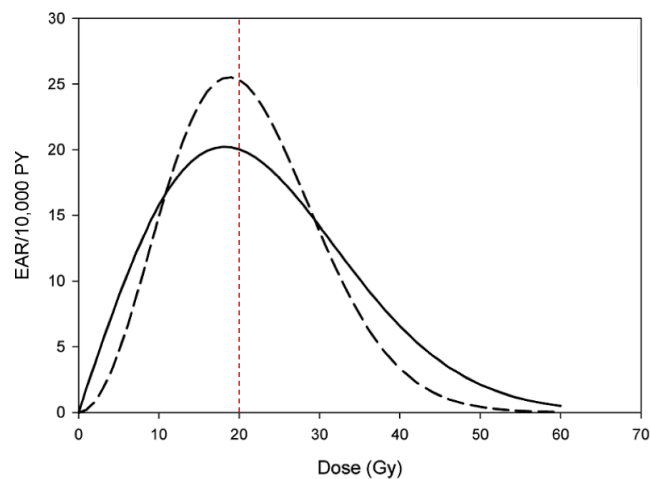


Figure 1.5. Dose-response curves of thyroid cancer risk per radiation dose exposure

The curves represent the excess absolute risk (EAR) per 10,000 person-years (PY) of thyroid cancer as a function of mean radiation dose to the thyroid in Grays (Gy) (continue line), and adjusted risk for age, sex and type of first cancer (dashed line). Modified from Batthi et al. 2010 (58).

Of, most of the studies describing radiation-related thyroid carcinomas among childhood cancer survivors involved outdated techniques (60). Modern radiotherapy, such as three dimensional-conformal radiation therapy (3D-CRT), intensity modulated RT (IMRT) and proton-beam therapy have to be investigated yet and are likely less toxic (61, 62).

The impact of chemotherapy during childhood on the development of thyroid tumors is still controversial (63). Several studies have showed an increased cancer risk among

patients treated with alkylating agents and anthracyclines, while others did not demonstrate an exceeding risk of thyroid carcinoma following exposure to chemotherapy (58, 63, 64). Furthermore, a report from Veiga et al. on the combination of chemotherapy and radiation recently demonstrated that there is no synergistic association between them (65).

Autologous and allogenic hematopoietic stem cell transplants also seem related to a higher incidence of a subsequent thyroid cancer (66). According to a cohort study involving hematopoietic cell transplant survivors, several factors may cooperate to the increased risk, including young age at the transplant, pre-transplant conditioning with total-body irradiation and chronic graft-versus-host disease. Of note, the majority of patients of this cohort have developed a follicular-type carcinoma (51).

Patient-related factors: The incidence of secondary thyroid tumors after childhood malignancies is not the same for every primary cancer subtype. Neuroblastoma, Hodgkin and non-Hodgkin lymphomas, brain tumors and leukemia are those associated with highest risk (**Table 1.2**) (67-69). However, these findings remain controversial.

Tab.1.2. Risk for secondary thyroid carcinomas by childhood cancer subtype

Primary Childhood Cancer	SIR (95% CI)	EAR per 100.000 person-years
Neuroblastoma	143.7 (29.6-419.8)	60.8
Hodgkin lymphoma	52.5 (24.0-99.6)	62.7
Non-Hodgkin lymphoma	40.4 (14.8-88)	31.0
Glioma	6.8 (1.9-18)	7.2
Embryonal CNS tumors	30 (8.2-77)	25
Other CNS tumors	7.7 (0.2-4.3)	8.8
Leukemia	18.8 (8.60-35.7)	11.3
Retinoblastoma	5.3 (0.1-29.6)	3.8
Renal tumors	13.9 (2.9-40.5)	11.1
Bone sarcomas	10.8 (1.3-38.9)	14.3
Soft-tissue sarcomas	4.1 (0,1-22.6)	3.6
Epithelial tumors	3.3 (0.1-18.4)	3.4

Table Legend: SIR standardized incidence ratio; CI confidence interval; EAR excess absolute risk, CNS central nervous system. Adapted from Wijnen et al., 2016 (57).

Genetic susceptibility: The growing interest for secondary malignancies among childhood cancer survivors led to investigate their correlation with genetic predisposition (48). Individual susceptibility to develop multiple primary neoplasms may be related to hereditary syndromes, such as instance Li-Fraumeni syndrome (due to *TP53* mutations), hereditary breast and ovarian cancer (due to *BRCA1/2* mutations), familial adenomatous polyposis (due to *APC* mutations), Lynch syndrome (due to mismatch repair genes mutations) and familial retinoblastoma (due to *RB1* mutations) (70-73). Moreover, different studies correlated other gene variants with higher risk of secondary tumors (74). It has been reported that some variants of *PRDM1* predispose Hodgkin lymphoma survivors to radiation-induced thyroid carcinomas (75). In addition, *TP53*, *ATM* and *FOXE1* mutations seem contribute to the development of radiation-induced thyroid carcinomas among Chernobyl survivors and childhood cancer survivors

which (50, 74, 76, 77). On the other hand, Akulevich et al. reported that *ATM* Asp1853Asn and *XRCC1* Arg399Gln may have a protective role on the development of secondary thyroid cancers (74). Lastly, an inverse correlation between telomere content and radiation-related thyroid cancer has been observed, with shorter telomeres probably involved in radiogenic PTC pathogenesis (57).

2.1.3. Molecular Landscape of Papillary Thyroid Cancers

In 2014, The Cancer Genome Atlas (TCGA) initiative provided a comprehensive genomic characterization of almost 500 PTC (78). Thanks to this considerable effort, the molecular landscape of PTC has been largely unveiled. In general, PTC biology is mainly driven by alterations of mitogen activated protein kinase (MAPK) signaling and can be classified into two categories according to the presence of mutually exclusive driver mutations involving *BRAF* (more frequently V600E substitutions) or *RAS* (78) (Figure 1.6).

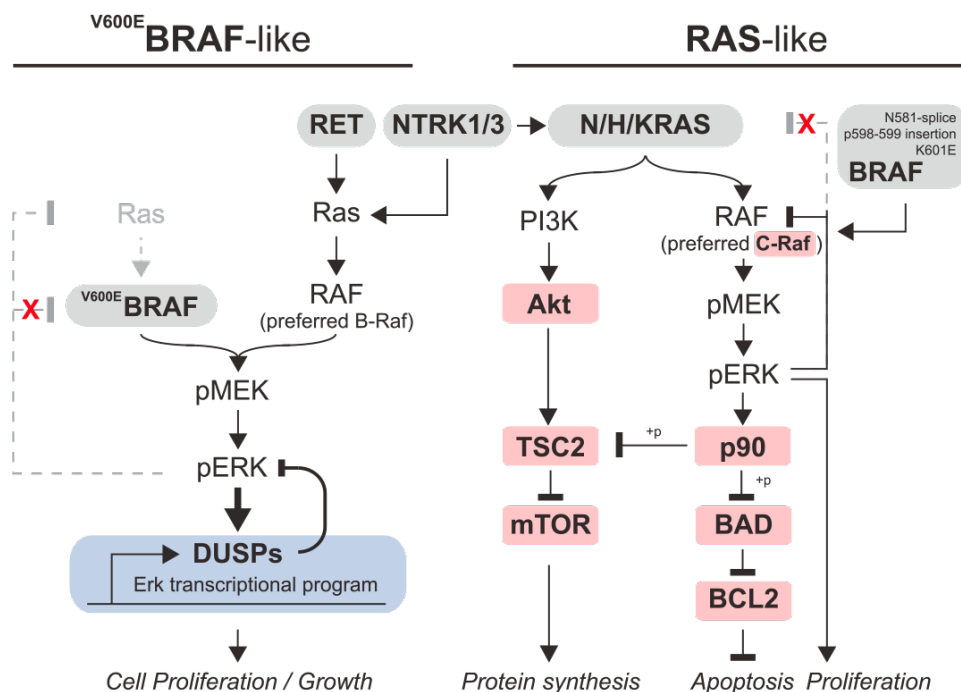


Figure 1.6. Molecular classification of PTC according to TCGA. Adapted from (78)

The *BRAF*-mutant tumors are the most frequent, usually present a PTC conventional histology and predominantly signals through MAPK pathway, resulting in loss of differentiation, tumor progression and inhibition of apoptosis (79, 80). Conversely, *RAS*-mutated tumors, which account for 5% of all PTC, are mostly follicular variants and have two main signaling pathways, MAPK and PI3K (81, 82).

However, *BRAF* and *RAS* mutations are not the only driver events occurring in PTCs. Several single nucleotide variations (SNV), insertions and deletions (INDEL) have been reported to play a role in PTC pathogenesis and progression (83). Among significantly mutated genes found in PTCs by TCGA group there are *EIF1AX*, *PPM1D* and *CHK2*. Overall, alterations in other cancer-related genes that can be gathered in four distinct functional groups (78):

- Genes involved in epigenetic regulation (*ARID1B*, *EZH1*, *KMT2A*, *KMT2C*);
- Genes involved in intracellular signaling pathways (PI3K/AKT, PPAR γ and WNT pathway);
- Tumor suppressor genes (*TP53*, *RB1*, *NF1*, *NF2*, *MEN1*, *PTEN*, *ZFH3* and *BDP1*);
- Thyroid related genes (*TG*, *TSHR*).

Beside SNV and INDEL, gene fusions leading to the activation of MAPK pathway also display a pivotal role in tumorigenesis and progression of PTC. The most common fusions involve *RET* and more in detail *RET/PTC1* (60% of *RET*-rearranged PTCs), *RET/PTC3* (30%), and more rarely *RET/PTC2*. These events determine the loss of *RET* transmembrane domain and the subsequent cytosolic localization of the protein (84). Additionally, fusions of *PPARG*, *ALK* and *NTRK* have been identified as rare but possible events (85).

Copy number variations (CNVs) have been seldom observed in PTC, with exception of chromosome 22q deletion (a region including *NF2* and *CHEK2*), and occurred more frequently in follicular variant PTC (86).

Overall, the genomic portrait of PTC provided by TCGA shows an usually quiet and stable disease, at least in its initial, well-differentiated stages (15, 78).

However, the information provided by TCGA refer to a de novo PTC population, since only a slight minority of the cases presented a previous tumor and radiation exposure.

Most of the available studies report information about the molecular profile of radiation-induced thyroid cancers, either in the post-radiotherapy setting or in Chernobyl accident survivors (87-89). According to these evidence, radiation-induced thyroid tumors present alterations in many genes involved in different pathways, such as cellular response to oxidative stress and irradiation, response to hypoxia, regulation of p53 function, immune response, MAPK, EGFR, RAC/CDC42, hedgehog, TGF/BMP, calcium signaling and WNT pathway (90, 91). Recently, a comprehensive genomic, transcriptomic and epigenomic characterization of papillary thyroid cancers in a large cohort of subjects from the Chernobyl area (n=440) has been published. The analyzed tumors showed a dose-dependent enrichment in fusions (involving MAPK-related genes) and a high rate of DNA double-strand breaks. Transcriptomic and epigenomic profile was consistent with those of the sporadic counterpart and the retrieved alterations was not correlated to the radiation dose (89). This study confirms previous evidence, reporting a higher rate of fusions radio-induced thyroid cancers.

Indeed, *RET* rearrangements account for up to 80% of known molecular alterations in radiation-induced PTC and seem to share the same characteristic of those found in sporadic tumors (92, 93). *BRAF* fusions may also occur in radiation-associated PTC, either

supporting conservation of its kinase domain and its expression or through alternative mechanisms (94, 95). Furthermore, pediatric PTC and radiation-induced PTCs may harbor *NTRK3* or *NTRK1* (96-98). These fusion proteins activate downstream signaling through PI3K, MAPK and PLC- γ , controlling cell-cycle progression, proliferation, apoptosis and survival (99).

Despite secondary thyroid carcinomas have attracted an increasing interest over the years, these entities have been poorly investigated under a biological standpoint, with most of the studies involving subjects exposed to radiation only. Hence additional investigations aimed at characterizing the genetic features of thyroid cancer in childhood cancers survivors are still needed.

2.2. Thyroid Adenomas: General Features

The term follicular adenoma (thereinafter adenoma) define a benign thyroid lesion of follicular origin without capsular and vascular invasion (100). It is a common entity, affecting up to 5% of the population according to an old autoptic series (101), but its incidence is even higher (up to 10%) when considering only small-sized nodules below 15 mm (102). As for thyroid carcinomas of follicular origin, exposure to radiation represents a risk factor for the development of follicular adenomas, as demonstrated by their increased incidence in the area of Chernobyl (103).

Until 2022, follicular adenoma was the only recognized thyroid benign lesions of follicular origin. However, the last WHO classification of thyroid neoplasms introduced the terms follicular adenoma with papillary architecture (previously known as papillary adenomatous/hyperplastic nodule) and oncocytic adenoma (13, 14). The first one presents an intrafollicular papillary growth and is often associated with autonomous

hyperfunctioning (i.e. a warm or hot nodule at nuclear imaging) (104). Additionally, follicular adenomas with papillary architecture can be associated with McCune-Albright syndrome (due to germline *GNAS* mutations), and Carney complex (due to germline mutations in *PRKAR1A*) (105, 106). On the other hand, oncocytic adenomas are defined by the presence of at least 75% of cells with oncocytic features (i.e. abundant eosinophilic granular cytoplasm) and without PTC nuclear characteristics (107).

Given their benign nature adenomas lack of metastatic potential and they can be monitored conservatively with no further interventions. Follow-up is required to identify falsely benign nodules at the time of biopsy and those that eventually evolve from benign into malignant over time (108).

Current guidelines do not recommend surgical excision of adenomas, unless the nodule is larger than 4 cm, causes symptoms or the resection is required for diagnostic purposes (109, 110).

2.3. Molecular Landscape of Thyroid Adenomas

Compared to the extensively studied genomic profile of thyroid cancers, few reports exist about the molecular features of thyroid adenomas.

Duan et al. performed a Next Generation Sequencing (NGS) analysis on a cohort of follicular-derived thyroid neoplasms, including 48 adenomas, using custom panel to detected single nucleotide variations (SNV) in 18 genes and rearrangements in 4 additional genes. Recurrently mutated genes retrieved in adenomas but not in borderline malignant or malignant neoplasms included *EIF1AX* and *TSHR* (111). Mutations of *NRAS* and *HRAS* were present in all the examined histological variants. Similarly, Madsen et al. reported the results of NGS sequencing using a 48-genes

commercially available panel in a cohort of thyroid neoplasms of follicular origin, including 33 adenomas. The analysis showed a very low mutational load, with most of the adenomas not presenting any mutations. Recurrent alterations included SNV of *HRAS*, *NRAS* and *TP53* (112).

Several study aimed at the identification of molecular similarities and differences between benign adenomas and their malignant counterpart. Older reports, dated back to mid-2000, seem to suggest that adenomas and thyroid cancers display distinct molecular hallmarks and that this difference could be exploited for differential diagnosis between the two entities (113-115). By contrast, more recent analyses showed partly overlapping features between benign adenomas and FTC, with alterations involving mainly RAS-related genes and *PPARG* fusions (116-118).

Overall, the molecular features of adenomas recapitulate both their benign nature and their follicular origin. However, further characterization using modern high-throughput techniques may be useful to better understand the biology of this entity and to shed light into its evolution toward malignant lesions.

3. STUDY AIMS

The **overall goal** of the present work is to provide a comprehensive molecular characterization of a cohort of thyroid neoplasms (benign and malignant) from patients exposed to a volcanic environment, using a custom NGS panel, and to compare our findings with pre-existing literature data. Besides describing the retrieved molecular alterations, we aim to examine the altered biological processes and pathways using several bioinformatic tools.

Our population of thyroid malignancies is divided into two groups. The first one comprises de novo PTC, i.e. tumors arising without known pre-existing risk factors. The second encompasses tumors occurring in subjects previously exposed to radiotherapy and/or chemotherapy for other hematological or solid cancers (i.e. secondary PTCs). Hence, **the first aim** of our study is to compare the molecular features of these populations. Indeed, we hypothesize that secondary PTC may exhibit a distinct biological profile, due to pre-existing exposure to cancerogenic agents.

Moreover, we carried out the same sequencing on a cohort of surgically excised thyroid adenomas. Therefore, a **second aim** of this work is to highlight potential molecular drivers of malignancy in benign thyroid nodules. We speculate that a comprehensive analysis of altered genes, biological processes and pathways in adenomas may provide new insight into the clonal evolution from benign to malignant thyroid lesions.

4. MATERIALS AND METHODS

4.1. Samples Collection

The analyzed samples were obtained from thyroid surgeries performed between 2012 and 2022 for the presence of benign, suspicious malignant or malignant nodules. Patients with de novo and secondary PTC underwent surgery at the Hospitals ARNAS “Garibaldi Nesima” or A.O.U. Policlinico “G. Rodolico - S. Marco”, in Catania. All the patients diagnosed with thyroid adenomas underwent surgery at A.O.U. Policlinico “G. Rodolico - S. Marco”, in Catania. All of them signed informed consent for the study, which was approved by the Ethics Committee 1.

Formalin-fixed, paraffin embedded (FFPE) samples were internally reviewed in order to confirm the previous histological diagnosis or update it according to the last WHO classification of thyroid tumors.

A dedicated pathologist prepared 8 sections 5-micron thick, using a standard microtome. Tumor content for each sample was determined from hematoxylin and eosin-stained slides.

DNA and RNA extraction and the subsequent molecular analyses were performed at Center for Experimental Oncology and Hematology (COES) of A.O.U. “G. Rodolico - S. Marco”, Catania.

4.2. DNA and RNA Isolation

Formalin-fixed paraffin-embedded tissue was used to isolate both DNA and RNA. DNA was extracted using QS GeneRead DNA FFPE treatment Kit followed by automatic platform QiAsymphony (both from Qiagen), while MagMax FFPE ultra kit (ThermoFisher Scientific) was used for RNA isolation. Both nucleic acids were quantified by fluorometer

Qubit 3.0 using Qubit™ dsDNA and RNA HS kit (all from ThermoFisher Scientific) including standards solutions to perform the calibration of the instrument.

4.3. Custom NGS Panel Design and Libraries preparation

Ion Ampliseq Designer tool (<https://www.ampliseq.com/login/login.action>) was used to generate 3 primer pools targeting coding DNA sequencing (CDS) of following 25 genes:

- *APC, ARID1B, ATM, BDP1, BRAF, CDH4, CHEK2, EIF1AX, EZH1, HRAS, KRAS, NRAS, MEN1, KMT2A, KMT2C, NF1, PPMID, PTEN, RB1, RET, SPOP, TG, TP53, TSHR, ZFH3.*

Additional information about genes included in the DNA panel are provided in **Supplementary Table.1.**

The same tool was used to generate 2 primer pools recognizing fusion regions involving the following 7 genes:

- *RET, BRAF, NTRK1, NTRK3, THADA, PPARG and ALK.*

For DNA and RNA libraries preparation, targeted regions were amplified using Ion Ampliseq library kit plus (ThermoFisher Scientific) with 30 ng of DNA (10 ng per primer pool) and 200ng of RNA (100ng per primer pool) which was previously converted in cDNA by Vilo IV (ThermoFisher Scientific). Both libraries were barcoded using the Ion Xpress barcode adapter kit (ThermoFisher Scientific) (**Figure 3.1**).

Libraries were then quantified by qPCR with the Library TaqMan Quantification kit (ThermoFisher Scientific) and diluted in an equimolar concentration.

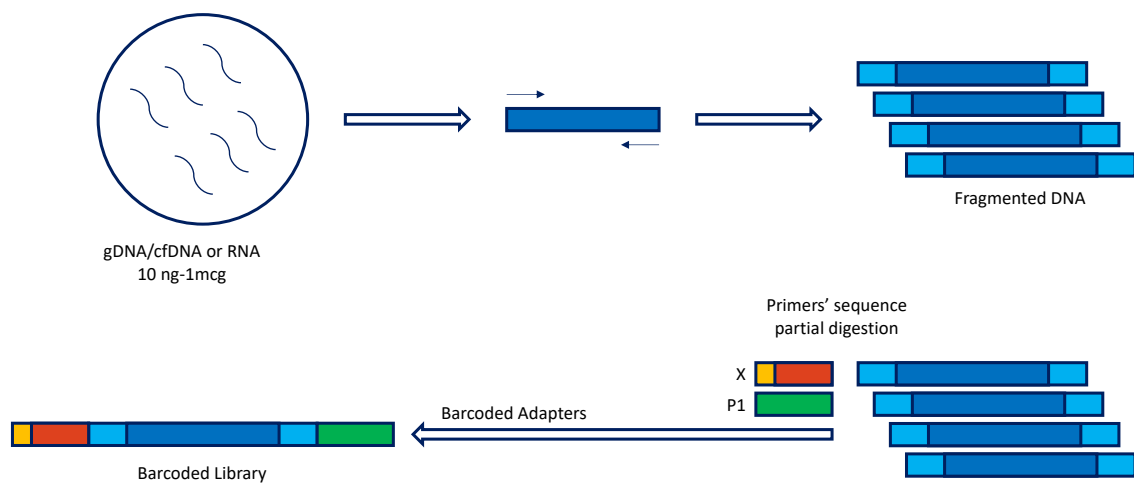


Figure 3.1. Barcoded Library Preparation

Next, libraries enrichment, IonChip loading, and sequencing have been performed employing Ion 510™ & Ion 520™ & Ion 530™ Kit-Chef using automatic platforms IonChef and S5 Ion Plus sequencer (all from ThermoFisher Scientific) (**Figure. 3.2**)

4.4. Data Analysis

Sequencing raw data were aligned using hg19 (GRCh37) DNA reference genome and the Binary Alignment Map (BAM) files generated by Torrent Suite Software v.5.12.3 (ThermoFisher Scientific) (**Figure. 3.2**). The same bioinformatic platform was also used for quality control according to the chip density loading and number of mapped reads. Each BAM file was then analyzed employing Ion Reporter v.5.18.4.0 for Single Nucleotide Variations (SNV), Copy Number Variations (CNV) and fusion genes calling. For SNVs identification, each variant was filtered according to 5% VAF, read depth >100, Phred quality score >40 and a p value <0.001.

To identify somatic CNV, a reference baseline consisting of ten male subjects without chromosome imbalance, has been generated, loaded in Ion Reporter Software and a metric value. To confirm that a specific region can be used for CNV analysis, MAPD (Median of the Absolute values of all Pairwise Differences) was applied and set to <0.45. For fusion genes, targeted breakpoint regions have been considered “true” when >20.000 reads per primers pool have been obtained from expression control genes. Tile plots have been generated for SNVs, CNAs and fusion genes to show the molecular landscape for each analyzed population.

4.5. Clinical Variant and in Silico Mutation Prediction Tools

The SNV have been classified as pathogenetic according to database Catalog of Somatic Mutation in Cancer (COSMIC). For variants showing unknown significance (VUS) or not reported in COSMIC, the in silico mutation prediction tool POLYmorphism PHENotyping (Polyphen-2) was used, in order to classify these variants as pathogenetic or benign according to their impact on the structure and function of the proteins (119).



Figure 3.2. Automated template preparation, chip loading, sequencing and data analysis

4.6. Protein-Protein Networks and UMAP Plot Generation

To generate the protein-protein interaction network (PPI) and cluster analysis, STRING database v11.5 was used, limiting species to “Homo sapiens” and the confidence score to >0.4 (120). Markov cluster algorithm (MCL) was applied for cluster generation. The online EnrichR tool used to classify the Gene Ontology biological process and Reactome pathways of the PPI clusters constructed by STRING (121).

To construct bidimensional Uniform Manifold Approximation and Projection (UMAP) scatter plots for both biological process and pathways, the Appyter tool was used (122).

5. RESULTS

5.1. Population Characteristics

5.1.1. De Novo Papillary Thyroid Cancers

In total, 15 specimens from primary PTCs were analyzed. **Table 5.1** summarizes population's characteristics. Most of the patients were female (60%), with a mean age of 53.7 years (min 14, max 72). Twelve patients had a conventional PTC histology and 3 an infiltrative follicular variant (FV) according to 2022 WHO classification (13). All the patients were from Eastern Sicily and lived in the volcanic area of Mount Etna.

Table 5.1. Characteristics of Patients with De Novo Papillary Thyroid Cancers

Patient ID	Gender	Age at Diagnosis	Histological Variant
P01	Male	59	PTC
P02	Male	56	PTC
P03	Female	27	PTC
P04	Female	54	PTC
P05	Female	69	PTC
P06	Female	54	PTC
P07	Female	69	PTC
P08	Female	70	PTC
P09	Female	54	PTC
P10	Male	67	PTC
P11	Male	68	PTC
P12	Male	72	PTC
P13	Female	29	FV PTC
P14	Male	44	FV PTC
P15	Female	14	FV PTC

Table Legend: PTC papillary thyroid cancer; FV follicular variant.

5.1.2. Secondary Papillary Thyroid Cancers

Seven specimens from PTC occurring in subjects previously exposed to radiotherapy and/or chemotherapy for a pediatric tumor were included in the study (Table 5.2). All but one patient were female and all of them were young adults at the time of PTC diagnosis, with an average age of 31.4 years (min 25, max 38). The histological variant was conventional PTC in all cases. Hodgkin lymphoma was the most common previous malignancy, occurring in 4 cases, followed by two cases of acute leukemia (one myeloid and one lymphoblastic) and one brain tumor (astrocytoma). The mean age of onset of previous malignancy was 12.3 years (min 6, max 16). The average latency between the primary pediatric tumor and the development of thyroid cancer was 18.6 years (min 12, max 27). Four patients have been exposed to radiotherapy and all but one received chemotherapy. Even in this case, all the patients were from Eastern Sicily and lived in the volcanic area of Mount Etna.

Table 5.2. Characteristics of Patients with Secondary Papillary Thyroid Cancers

Patient ID	Gender	Age at Diagnosis	Histological Variant	Previous Malignancy	Age at Prev Malignancy	Prev RT	Prev CHT
S01	Female	37	PTC	Astrocytoma	8	Yes	No
S02	Female	28	PTC	Hodgkin Lymphoma	13	Yes	Yes
S03	Female	25	PTC	Acute Myeloid Leukemia	10	No	Yes
S04	Male	38	PTC	Hodgkin Lymphoma	19	No	Yes
S05	Female	33	PTC	Hodgkin Lymphoma	16	No	Yes
S06	Female	26	PTC	Hodgkin Lymphoma	14	Yes	Yes
S07	Female	33	PTC	Acute Lymphoblastic Leukemia	6	Yes	Yes

Table Legend: Prev previous; PTC papillary thyroid cancer; RT radiotherapy; CHT chemotherapy.

5.1.3. Thyroid Adenomas

Sixteen samples of thyroid adenomas were included in the analysis. As reported in **Table 5.3**, 14 of them (87.5%) derived from female patients. Mean age was 52.5 years (min 31, max 75). Again, all the subjects lived in the volcanic area of Mount Etna in Eastern Sicily.

Table 5.3. Characteristics of Patients with Thyroid Adenomas

Patient ID	Gender	Age at Diagnosis
A01	Female	66
A02	Female	40
A03	Female	53
A04	Female	57
A05	Female	40
A06	Female	52
A07	Female	41
A08	Female	39
A09	Female	75
A10	Female	62
A11	Famale	31
A12	Female	37
A13	Female	66
A14	Female	42
A15	Male	56
A16	Male	68

5.2. Molecular Analysis

5.2.1. De Novo Papillary Thyroid Cancers

In the de novo PTC population, we identified 51 known alterations in 16 genes (**Table 5.4, Figure 5.1**). Of these, the vast majority (94%) were SNV, with only two fusions (4%) and one CNV (2%). The average number of alterations per patient was 3.4.

The proto-oncogene *BRAF* displayed the highest number of SNV (n=9), all of which determined the classical substitution of a valine by glutamate at codon 600 (V600E). *KRAS* was the second most frequently mutated gene (n=7) and all the retrieved SNV involved non-coding regions. *KMT2C*, codifying for a histone methyltransferase, and *ZFX3*, encoding for a zinc-finger transcription factor, harbored 5 SNV each. Other genes with recurrent mutations were *HRAS* and *RET* (3 SNV each), followed by *APC*, *ATM*, *MEN1*, *NF1*, *TG* and *TP53* (2 SNV each). The remaining genes (*CDH4*, *KMT2A*, *NRAS* and *TSHR*) were mutated once only in our de novo PTC population.

The only CNV observed was a copy number gain of *BRAF* gene (chromosome 7), occurring in a male patient diagnosed with PTC (P11).(**Supplementary Figure 1**).

Both the identified rearrangements involved *RET* and *NCOA4* (also known as *PTC3*).

Supplementary Figures 8 and **Supplementary Figures 9** show the details of the fusion regions. Of note, one of these fusions was observed in a patient with FV PTC (P15).

Table 5.4. Molecular Alterations of De Novo Papillary Thyroid Cancers

Gene Name	Alteration n° (%)	SNV n° (%)	AA substitution	CNV n° (%)	CNV	Fusion n° (%)	Fusion
<i>APC</i>	2 (4%)	2 (4%)	p.Arg230Cys p.Gly2502Ser	NR	-	NA	-
<i>ATM</i>	2 (4%)	2 (4%)	p.Pro1054Arg	NR	-	NA	-
<i>BRAF</i>	10 (20%)	9 (19%)	p.Val600Glu	1 (100%)	Gain	NR	-
<i>CDH4</i>	1 (2%)	1 (2%)	p.Val520Leu	NR	-	NA	-
<i>HRAS</i>	3 (6%)	3 (6%)	p.Gly13Arg	NR	-	NA	-
<i>KMT2A</i>	1 (2%)	1 (2%)	p.Gly909Asp	NR	-	NA	-
<i>KMT2C</i>	5 (10%)	5 (10%)	p.Phe3226Leu p.Arg284Gln p.Asp348Asn	NR	-	NA	-
<i>KRAS</i>	7 (14%)	7 (16%)	NCR	NR	-	NA	-
<i>MEN1</i>	2 (4%)	2 (4%)	p.Arg337Cys p.Arg176Gln	NR	-	NA	-
<i>NF1</i>	2 (4%)	2 (4%)	p.Ser302Asn NCR	NR	-	NA	-
<i>NRAS</i>	1 (2%)	1 (2%)	p.Gln61Arg	NR	-	NA	-
<i>RET</i>	5 (8%)	3 (6%)	p.Met1009Thr p.Arg982Cys	NR	-	2 (100%)	<i>NCOA4/RET</i>
<i>TG</i>	2 (4%)	2 (4%)	p.Gly67Ser p.Thr621Met	NR	-	NA	-
<i>TP53</i>	2 (4%)	2 (4%)	p.Arg273Leu p.Arg158His	NR	-	NA	-
<i>TSHR</i>	1 (2%)	1 (2%)	p.Arg109Gln	NR	-	NA	-
<i>ZFH3</i>	5 (10%)	5 (11%)	p.Ser3349Leu p.Gly585Ser p.Thr428Pro p.Asp265Gly	NR	-	NA	-
Total (%)	51 (100%)	48 (94%)	-	1 (2%)	-	2 (4%)	-

Table Legend: SNV single nucleotide variation; AA amino acid; NCR non-coding region; CNV copy number alteration; NR not retrieved; NA not assessed

No significant differences emerged between female and male subjects, with a mean alterations number of 3.8 and 3.4, respectively. In terms of alteration types, the *BRAF* copy number gain occurred in a man, while both the *NCOA4/RET* fusions occurred in women. However, the small number of patients does not allow to drive any conclusion about gender differences in our population.

Similarly, comparisons between PTC and FV PTC should be interpreted cautiously. However, it should be noted that none of the 3 FV PTC showed *BRAF* SNV, while these samples were rather enriched in *KRAS*, *HRAS* and *NRAS* mutations.

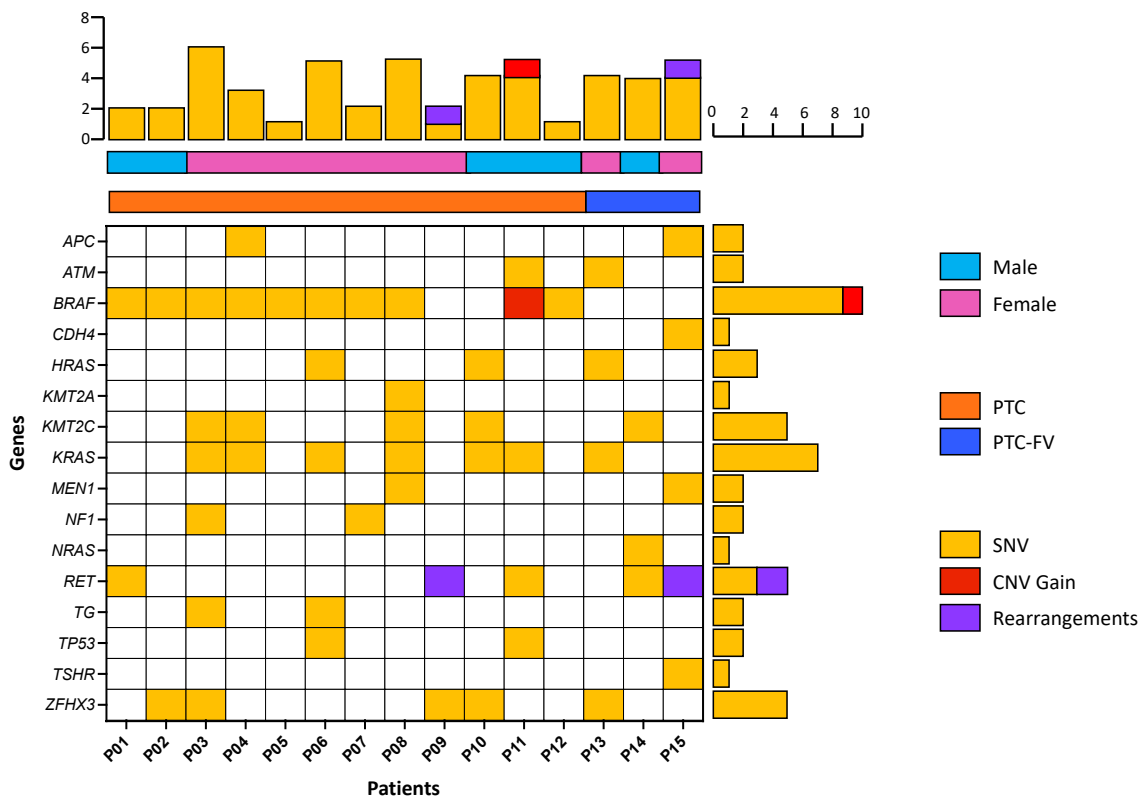


Figure 5.1. Tile Plot of Molecular Alterations in De Novo Papillary Thyroid Cancers

The tile plot shows the mutational landscape of the examined de novo papillary thyroid cancer samples. The color of each tile represents a different alteration type. Patients' gender and tumor's histological variant are displayed in the horizontal bars. The numbered lines indicate the total alterations retrieved in each sample (vertical) and for each gene (horizontal). **Figure Legend:** PTC papillary thyroid cancer; PTC FV papillary thyroid cancer follicular variant; SNV single nucleotide variation; CNV copy number variation.

5.2.2. Secondary Papillary Thyroid Cancers

Overall, 65 alterations in 24 genes were identified by sequencing the 7 samples from secondary PTC (Table 5.5, Figure 5.2). Of these, 90% were SNV (n=59), 6% CNV (n=4), 1 deletion (2%) and 1 fusion (2%). The average number of alterations per patient was 9.3. *ZFH3* was the gene with the highest SNV number in this population (n=6), resulting in 6 different aminoacidic substitutions. *KMT2C* and *ATM* harbored 5 mutations each, followed by *APC* (n=4). Other genes repeatedly mutated were *BRAF* (2 canonical V600E SNV and one non canonical A320T), *HRAS*, *KMT2A*, *KRAS*, *NF1* and *RET* (n=3). *ARID1B*,

BDP1, *CDH4*, *EZH1*, *MEN1*, *SPOP*, *TG* and *TP53* were mutated twice, while *CHEK2*, *PPM1D*, *PTEN*, *RB1* and *TSHR* harbored one SNV only. Besides being the most mutated genes, *ZFH3* also harbored the only INDEL identified in this population (p.Gln3203_Gln3204del). Hence, *ZFH3* was altered in all the 7 subjects.

As shown in **Supplementary Figure 2** and **Supplementary Figure 3**, copy number gains were retrieved in *ATM* (chromosome 11), *TP53* (chromosome 17) and *ZFH3* (chromosome 16), while a copy number loss was observed in *EIF1AX* (chromosome X), codifying for an eukaryotic translation initiation factor.

One fusion between *AGK* and *BRAF* was also present (**Supplementary figure 10**).

Given only one male patient was present in this cohort, inter-gender disparities cannot be scored.

Looking at previous exposure to anticancer treatment, it can be noticed that subjects with a history of radiation exposure with or without chemotherapy display a significantly higher number of molecular alterations, compared to those exposed to chemotherapy alone. Indeed, taken together the SNV found in patients S01, S02, S06 and S07 accounted for 86% of the total SNV number in this population. Additionally, the 4 CNV, the *ZFH3* deletion and the *BRAF* fusion were all retrieved in these samples. However, while S01, S06 and S07 may be considered hypermutated subjects, given the number of alterations displayed (mean=18.3); S02 harbors only 2 SNV and 1 deletion.

Apart from *ZFH3*, recurrently altered genes in the radiotherapy-exposed population are *ATM* and *KMT2C*, followed by *APC*, *HRAS*, *KTM2A*, *NF1* and *RET*. Subjects previously exposed to chemotherapy only (S03, S04, S05) had a significantly lower number of alteration (mean=2.6), which were all SNV.

Lastly, the type of previous malignancy did not seem to influence the mutational profile of these patients (data not shown).

Table 5.5. Molecular Alterations of Secondary Papillary Thyroid Cancers

Gene Name	Alteration n° (%)	SNV n° (%)	AA substitution	INDEL n° (%)	INDEL	CNV n° (%)	CNV	Fusion n° (%)	Fusion
<i>APC</i>	4 (5%)	4 (7%)	p.Ser2129Leu p.Gly2502Ser p.Asp1659Gly p.Leu1129Ser	NR	-	NR	-	NA	-
<i>ARID1B</i>	2 (3%)	2 (3%)	p.Asp1351Asn	NR	-	NR	-	NA	-
<i>ATM</i>	6 (8%)	5 (9%)	p.Asp1853Asn p.Arg2763Ter	NR	-	1(25%)	Gain	NA	-
<i>BDP1</i>	2 (3%)	2 (3%)	p.Gln1676Glu p.Arg400Gln	NR	-	NR	-	NA	-
<i>BRAF</i>	4 (5%)	3 (5%)	p.Ala320Thr p.Val600Glu	NR	-	NR	-	1(100%)	<i>AGK/BRAF</i>
<i>CDH4</i>	2 (3%)	2 (3%)	p.Ser195Phe p.Asp262Asn	NR	-	NR	-	NA	-
<i>CHEK2</i>	1 (2%)	1 (2%)	p.Ala392Val	NR	-	NR	-	NA	-
<i>EIF1AX</i>	1 (2%)	NR	-	NR	-	1(25%)	Loss	NA	-
<i>EZH1</i>	2 (3%)	2 (3%)	p.Asp181Asn p.Arg609His	NR	-	NR	-	NA	-
<i>HRAS</i>	3 (5%)	3 (5%)	p.Ser106Leu p.Arg128Gln	NR	-	NR	-	NA	-
<i>KMT2A</i>	3 (5%)	3 (5%)	p.Arg302Gln p.Glu1060Asp p.Glu3451Lys	NR	-	NR	-	NA	-
<i>KMT2C</i>	5 (7%)	5 (9%)	p.Arg3077Cys p.Phe3226Leu p.Arg1705Cys p.Arg4690Gln	NR	-	NR	-	NA	-
<i>KRAS</i>	3 (5%)	3 (5%)	NCR	NR	-	NR	-	NA	-
<i>MEN1</i>	2 (3%)	2 (3%)	p.Arg211Cys p.Asp185Gly	NR	-	NR	-	NR	-
<i>NF1</i>	3 (5%)	3 (5%)	p.Arg659Trp p.Ala422Thr p.Pro2613Leu	NR	-	NR	-	NA	-
<i>PPM1D</i>	1 (2%)	1 (2%)	p.Arg458Gln	NR	-	NR	-	NA	-
<i>PTEN</i>	1 (2%)	1 (2%)	p.Tyr178Cys	NR	-	NR	-	NA	-
<i>RB1</i>	1 (2%)	1 (2%)	p.Arg787Gln	NR	-	NR	-	NA	-
<i>RET</i>	3 (5%)	3 (5%)	p.Arg330Gln p.Arg982Cys p.Glu595Lys	NR	-	NR	-	NR	-
<i>SPOP</i>	2 (3%)	2 (3%)	p.Arg198Gln p.Arg138Cys	NR	-	NR	-	NA	-
<i>TG</i>	2 (3%)	2 (3%)	p.Asp2001Asn p.Asp2001Asn	NR	-	NR	-	NA	-
<i>TP53</i>	3 (5%)	2 (3%)	p.Gln317Lys p.Cys124Tyr	NR	-	1(25%)	Gain	NA	-
<i>TSHR</i>	1 (2%)	1 (2%)	p.Ala459Val	NR	-	NR	-	NA	-
<i>ZFX3</i>	8 (12%)	6(10%)	p.Ala2741Pro p.Ala2741Pro p.Gly585Ser p.Asp265Gly p.Ala2433Val p.Asp265Gly	1(100%)	p.Gln3203_Gln3204del	1(25%)	Gain	NA	-
Total (%)	65 (100%)	59 (90%)	-	1 (2%)		4 (6%)	-	1 (2%)	-

Table Legend: SNV single nucleotide variation; AA amino acid; NCR non-coding region; INDEL insertion/deletion; CNV copy number alteration; NR not retrieved; NA not assessed

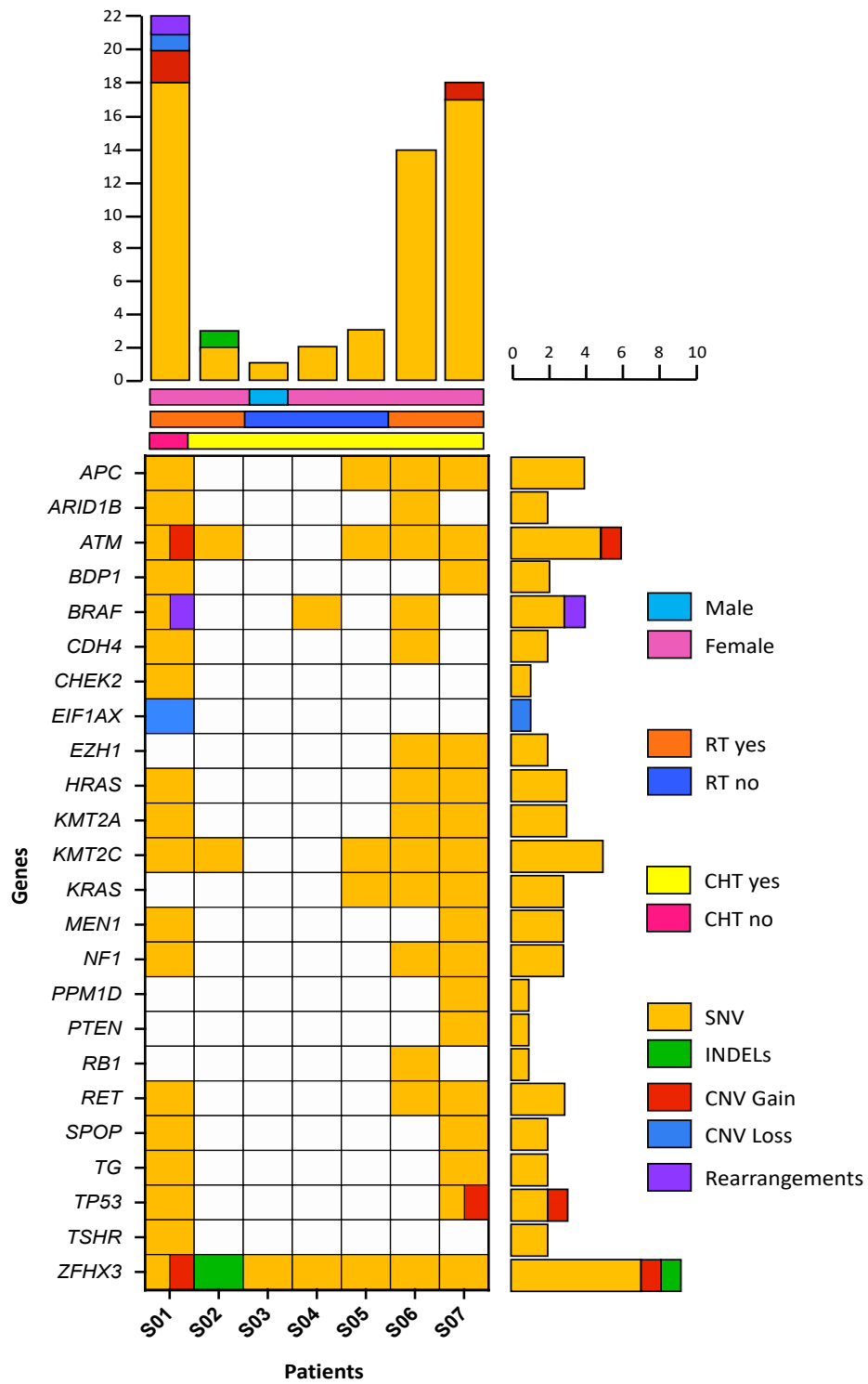


Figure 5.2. Tile Plot of Molecular Alterations in Secondary Papillary Thyroid Cancers
 The tile plot shows the mutational landscape of the examined secondary papillary thyroid cancer samples. The color of each tile represents a different alteration type. Patients' gender and previous exposure to radiotherapy and/or chemotherapy are displayed in the horizontal bars. The numbered lines indicate the total alterations retrieved in each sample (vertical) and for each gene (horizontal). **Figure Legend:** RT radiotherapy; CHT chemotherapy; SNV single nucleotide variation; INDEL insertion/deletion; CNV copy number variation.

5.2.3. Comparison Between De Novo and Secondary Papillary Thyroid Cancers

Figure 5.3 shows the retrieved molecular alterations in both de novo and secondary PTC. At a glance, it can be noticed that secondary PTC harbor a significantly higher burden of alterations (average 9.3), compared to de novo PTC (average 3.4). This difference is mainly driven by the presence of hypermutated patients (S01, S06 and S07) in the secondary PTC cohort. Single nucleotide variations were the prevalent alteration type in both groups, but secondary PTC displayed a higher CNV rate, including 3 gains and 1 loss, compared to one gain only among de novo PTC.

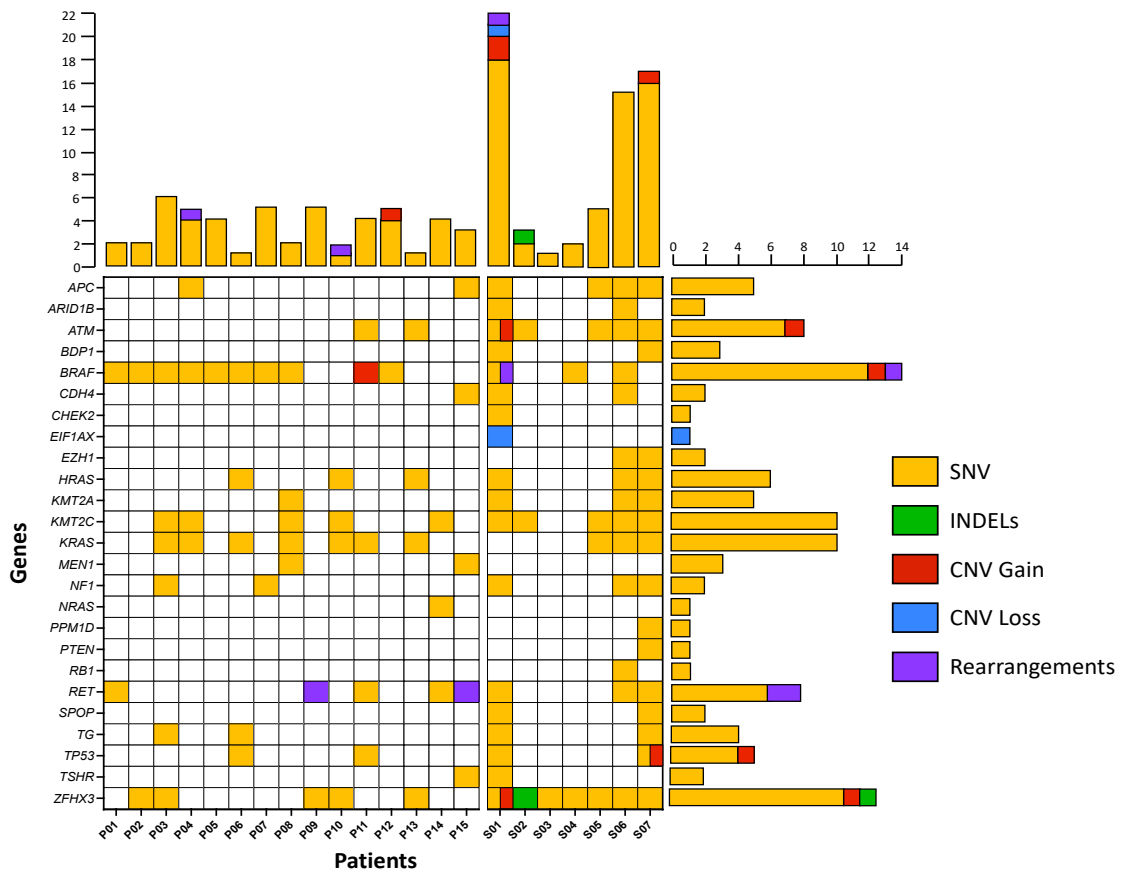


Figure 5.3. Tile Plot of Molecular Alterations in De Novo and Secondary Papillary Thyroid Cancers

The tile plot shows the mutational landscape of the examined papillary thyroid cancer samples, both the novo and secondary. The color of each tile represents a different alteration type. The numbered lines indicate the total alterations retrieved in each sample (vertical) and for each gene (horizontal). **Figure Legend:** SNV single nucleotide variation; INDEL insertion/deletion; CNV copy number variation.

5.2.4. Thyroid Adenomas

A total of 44 alterations in 14 genes were observed in the adenoma samples (**Table 5.6, Figure 5.4**). Of these, 84% were SNV (n=37), 11% were CNV (n=5) and 5% were INDEL (n=2). The mean number of alteration per subject was 2.8.

Table 5.6. Molecular Alterations of Thyroid Adenomas

Gene Name	Alteration n° (%)	SNV n° (%)	AA substitution	INDEL n° (%)	INDEL	CNV n° (%)	CNV
<i>APC</i>	4 (9%)	3 (8%)	p.Ser2621Cys p.Gly2502Ser	1 (50%)	p.Ser1757PhefsTer12	NR	-
<i>ATM</i>	3 (7%)	3 (8%)	p.Asp1853Asn	NR	-	NR	-
<i>BDP1</i>	2 (5%)	2 (5%)	p.Gln1676Glu	NR	-	NR	-
<i>BRAF</i>	2 (5%)	1 (3%)	p.Arg682Gln	NR	-	1 (20%)	Gain
<i>EIF1AX</i>	3 (7%)	NR	-	NR	-	3 (60%)	Loss
<i>HRAS</i>	1 (2%)	1 (3%)	p.Gly13Arg	NR	-	NR	-
<i>KMT2A</i>	1 (2%)	NR	-	1 (50%)	p.Ser10LysfsTer32	NR	-
<i>KMT2C</i>	7 (16%)	6 (16%)	p.Val4539Met p.Gln3478Glu p.Phe3226Leu p.Asp348Asn p.Leu291Phe p.Arg284Gln	NR	-	1 (20%)	Gain
<i>KRAS</i>	8 (18%)	8 (21%)	p.Gly12Asp NCR	NR	-	NR	-
<i>PTEN</i>	1 (2%)	1 (3%)	p.Ile101Thr	NR	-	NR	-
<i>RET</i>	1 (2%)	1 (3%)	p.Arg982Cys	NR	-	NR	-
<i>SPOP</i>	3 (7%)	3 (8%)	p.Pro94Arg	NR	-	NR	-
<i>TSHR</i>	1 (2%)	1 (3%)	p.Arg531Trp	NR	-	NR	-
<i>ZFHX3</i>	7 (16%)	7 (19%)	p.Asp265Gly p.Ala62Val	NR	-	NR	-
Total (%)	44 (100%)	37 (84%)	-	2 (5%)		5 (11%)	-

Table Legend: SNV single nucleotide variation; AA amino acid; NCR non-coding region; INDEL insertion/deletion; CNV copy number alteration; NR not retrieved

Single nucleotide variations occurred most commonly in *KRAS* sequence (n=8), more frequently in the non-coding region, followed *ZFHX3* (n=7) and *KMT2C* (n=6). *APC*, *ATM* and *SPOP* were mutated in 3 instances and *BDP1* in 2. *BRAF*, *HRAS*, *PTEN*, *RET* and *TSHR* presented one SNV each in this population.

The retrieved INDEL were an insertion in *APC* and a deletion in *KMT2A*.

Of the 5 CNV observed, 2 were copy number gains, both occurring in patient A02 and involving BRAF and *KMT2C* on chromosome 7 (**Supplementary Figure 4**). The remaining 3 CNV were copy number losses of *EIF1AX* gene, on chromosome X (**Supplementary Figure 5-7**).

No significant differences emerged between female and male subjects, even though the presence of only two men in this cohort does not allow to drive any conclusion.

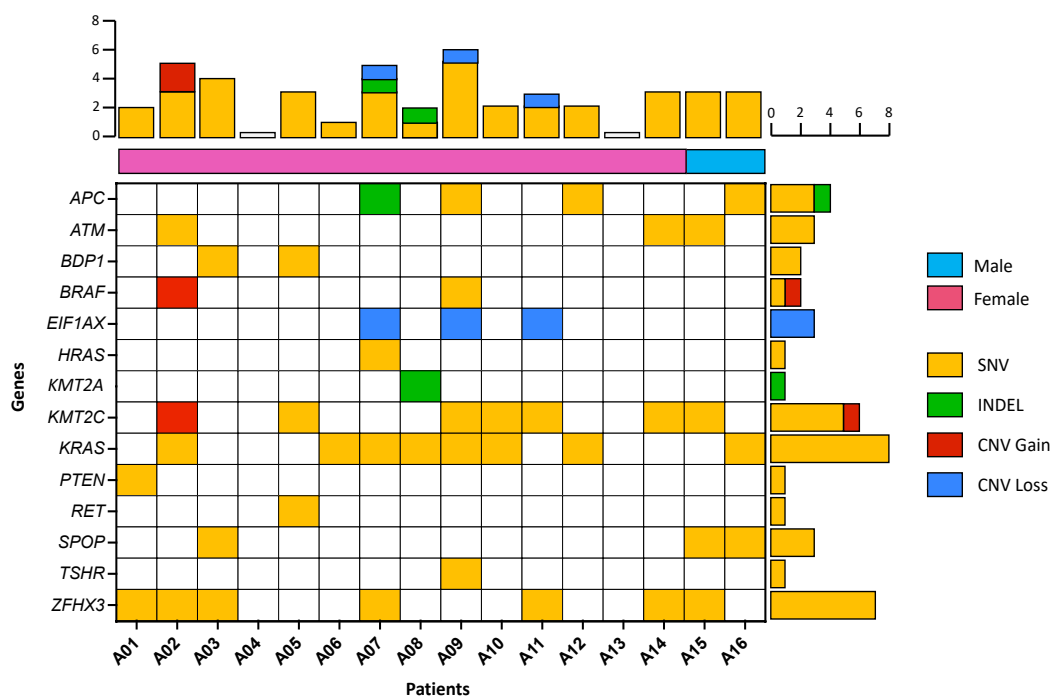


Figure 5.4. Tile Plot of Molecular Alterations in Thyroid Adenomas

The tile plot shows the mutational landscape of the examined adenoma samples. The color of each tile represents a different alteration type. Patients' gender is displayed in the horizontal bar. The numbered lines indicate the total alterations retrieved in each sample (vertical) and for each gene (horizontal). **Figure Legend:** SNV single nucleotide variation; INDEL insertion/deletion; CNV copy number variation.

5.2.5. Comparison of Molecular Alterations in the Populations

To highlight the differentially altered genes in the examined populations we plotted them in a Venn diagram (Figure 5.5). It can be noticed that de novo PTC, secondary PTC and adenomas shared most of the altered genes (10/25). Five genes were mutated in both de novo and secondary PTC, namely *CDH4*, *MEN1*, *NF1*, *TG* and *TP53* and 4 in both secondary PTC and adenomas (*BDP1*, *EIF1AX*, *PTEN*, *SPOP*). *NRAS* was mutated in a de novo PTC only, whereas *ARID1B*, *CHEK2*, *EZH1*, *PPM1D* and *RB1* were altered in secondary PTC but not in the other study groups. Of note, all the alterations retrieved in the adenoma samples were present in at least another study group.

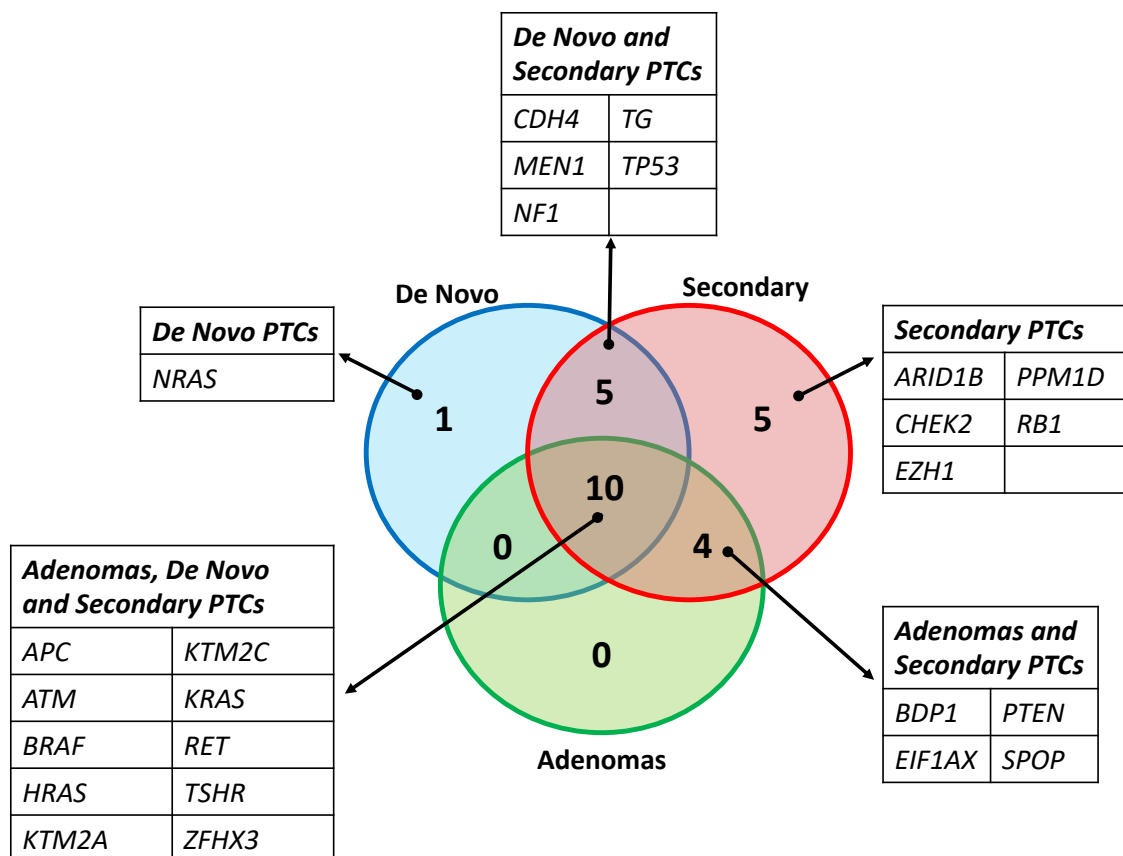


Figure 5.5. Venn Diagram of Altered Genes in the Examined Populations

The diagram illustrates the differentially altered gene in each population.

5.3. STRING Analysis

In order to explore how the molecular alterations found in our populations integrate and interact each other at a protein level, we performed STRING analysis with clusters generation. The minimum required interaction score to include predicted networks was set at 0.4 (medium confidence). Clustering was generated using Markov Cluster (MCL) algorithm (123). Protein-protein interaction networks and clustering were studied separately for de novo PTC, secondary PTC and adenomas.

5.3.1. De Novo Papillary Thyroid Cancers

According to STRING analysis, 16 proteins derived from altered genes in de novo PTC, each representing a network node, established 53 connections (**Figure 5.6**). The average node degree (i.e. the mean number of interactions of each protein in the network, at the score threshold) was 6.62. The average clustering coefficient (i.e. a measure of how connected the nodes in the network are, with higher values for higher connected networks) was 0.76. The number of connections was higher than the predicted one ($=12$), suggesting that most of the proteins are likely biologically related ($p < 1.0e-16$). In fact, 14 out of 16 proteins grouped in one main cluster (red nodes). The core of this cluster included 12 nodes, linked by multiple interaction types. CHD4 and ZFH3, which stood at the periphery of the cluster, were connected by interactions extrapolated from databases and textmining only, respectively. The second minor cluster (green nodes) included TG and TSHR only, linked by a single textmining-derived interaction.

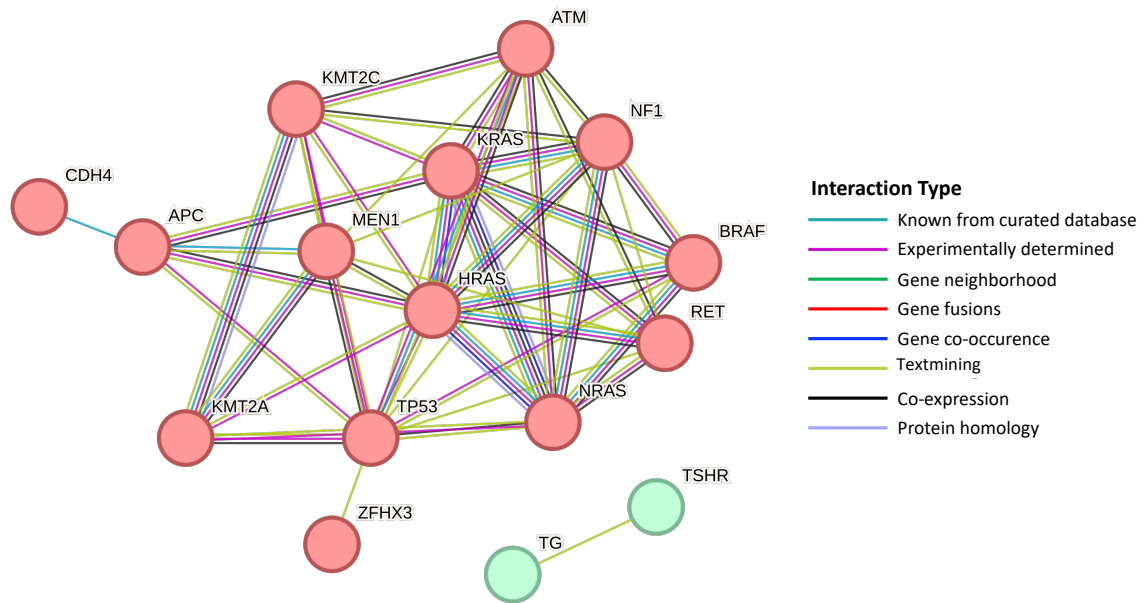


Figure 5.6. STRING Analysis of De Novo Papillary Thyroid Cancers

The figure shows the protein-protein interaction (PPI) network and clustering of gene alterations retrieved in the de novo papillary thyroid cancer samples. Network nodes represent the proteins produced by the genes. The color of the nodes indicates their cluster. Different colors of connecting lines indicates different types of interactions, as shown in figure legend.

5.3.2. Secondary Papillary Thyroid Cancers

STRING analysis of protein encoded by 24 altered genes in the secondary PTC population showed 93 connections in the PPI network (**Figure 5.7**). The average node degree was 7.8 and the clustering coefficient was 0.7. As for de novo PTC, the number of connections was by far higher than the expected ($n=23$), with a PPI enrichment p value $< 1.0e-16$. Even in this case, two clusters emerged. The main one included 19 of 24 proteins, establishing a plethora of different interaction types. Again, CDH4 and ZFH3 were connected by a single textmining-derived interaction to the core of the cluster. The second network included TG and TSHR only (green nodes). Of note, EZH1 was the only non-clustered protein.

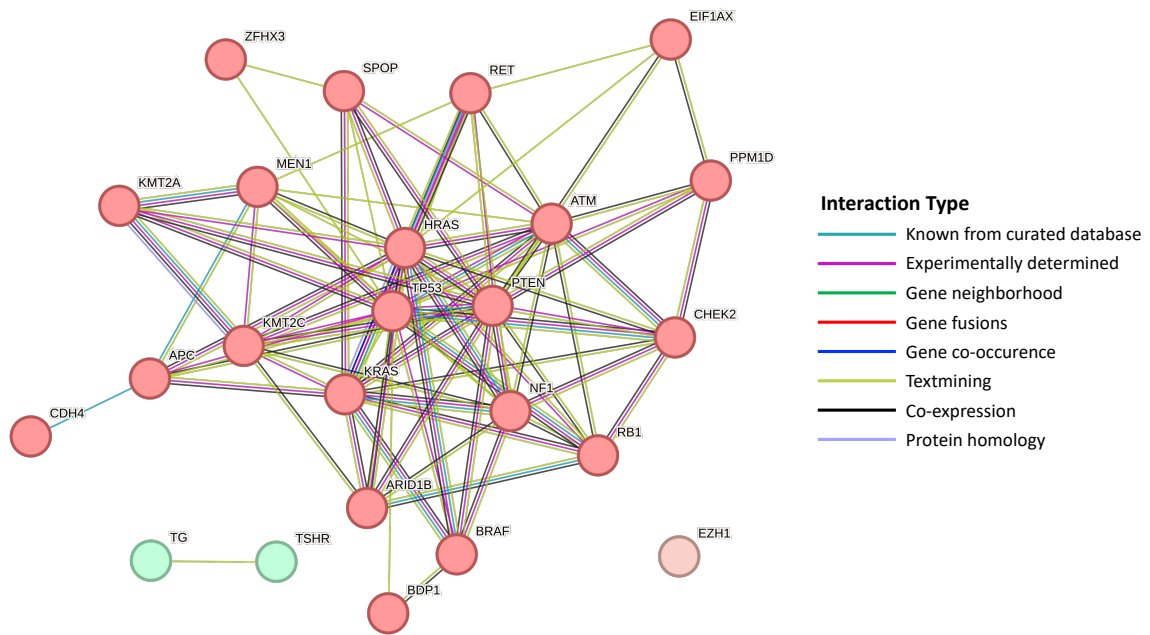


Figure 5.7. STRING Analysis of Secondary Papillary Thyroid Cancers
See Figure 5.6 caption.

5.3.3. Thyroid Adenomas

The 14 nodes representing the altered proteins in the adenoma samples established 34 connections in the STRING analysis output (**Figure 5.8**). The average node degree was 4.86, with a clustering coefficient of 0.75. The number of connections exceeded the one predicted by the algorithm ($n=8$), indicating again a strong biological relationship for the given entries. The PPI enrichment was highly statistically significant (p value $1.71e-12$). Of note, all the 14 proteins clustered together (red nodes). The cluster included multiple interaction types for the majority of proteins, excluding ZFH3 and TSHR, that were linked only by textmining-derived connections.

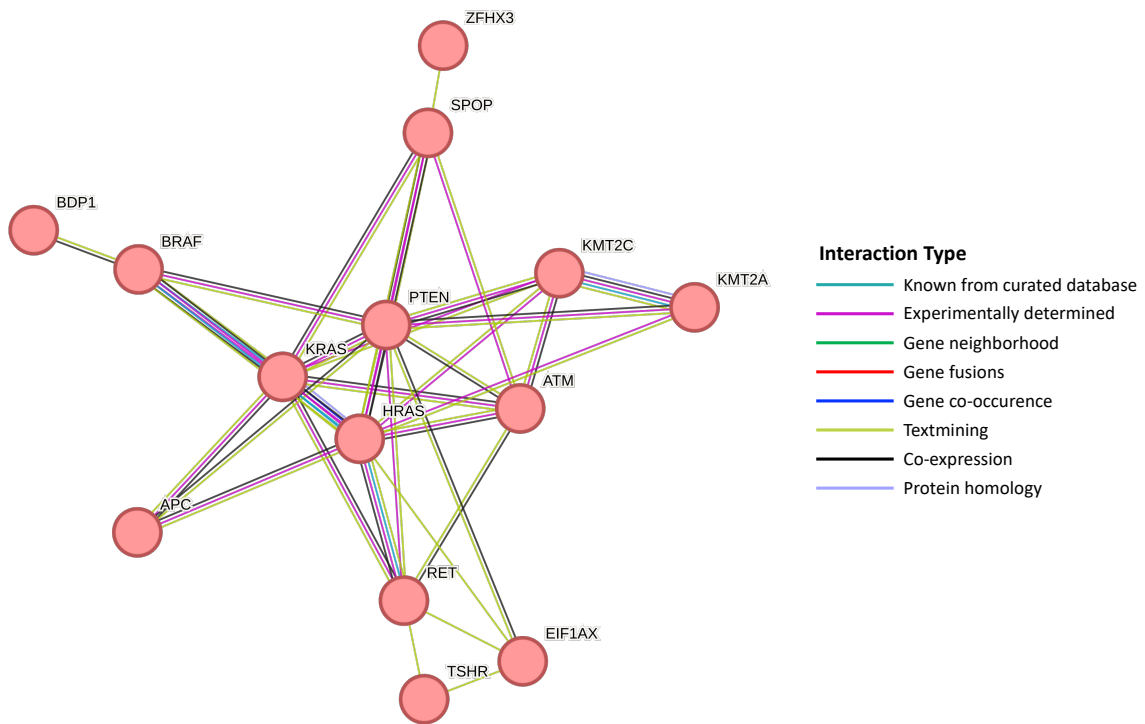


Figure 5.8. STRING Analysis of Thyroid Adenomas

See Figure 5.6 caption.

5.4. Biological Processes Analysis

To understand how altered genes in our populations influences biological processes, we performed a bio-informatic analysis according to Gene Ontology 2021, using the EnrichR online tool. Bi-dimensional visualization of altered biological processes was obtained through the Apytyer online tool. We report here the top 10 statistically significant Gene Ontology enriched terms. The analysis was separately carried out for de novo PTC, secondary PTC and adenomas. Information about the top 100 significantly enriched terms for each population are provided in **Supplementary Tables.2-4**.

5.4.1. De Novo Papillary Thyroid Cancers

Figure 5.9 shows the top ten enriched biological processes in the de novo PTC population, according to Gene Ontology 2021 library. The correlated Gene Ontology identification numbers, p values, q-values and overlapping genes are displayed in **Table 5.7**. The q-value is an adjusted p-value calculated using the Benjamini-Hochberg method, used to control the false discovery rate for multiple hypotheses testing (124). Among the enriched terms, “Small GTPase Mediated Signal Transduction”, “RAS Protein Signal Transduction”, “Regulation Of Cell Cycle And Histone H3-K4 Methylation” clustered together, with p values ranging from 1.59e-08 (“Small GTPase Mediated Signal Transduction”) to 2.62e-06 (“Regulation Of Cell Cycle”). Three positively regulated processes converged in a single cluster, with p values spanning from 1.23e-06 (“Positive Regulation Of Transcription, DNA-Templated”) to 5.57e-06 (“Positive Regulation Of Cellular Process”). “Response To Gamma Radiation” (p value 2.87e-09) and “Cellular Response To Gamma Radiation” (p value 2.84e-07) were grouped in another cluster. Lastly, “MAPK Cascade” did not cluster with any other term and represented the biological process with the highest statistical significance in this population (1.74e-09).

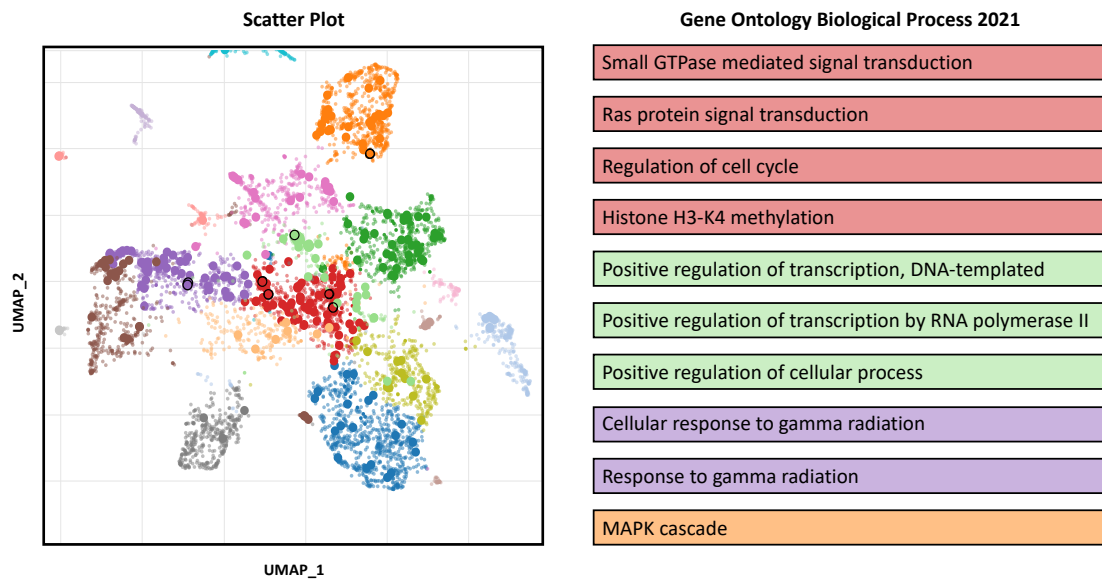


Figure 5.9. Scatter Plot Visualization of Enriched Biological Process in De Novo Papillary Thyroid Cancers, According to Gene Ontology Analysis

On the left: each point represents a term in the Gene Ontology library. Term frequency-inverse document frequency (TF-IDF) values were computed for the gene set corresponding to each term, and UMAP was applied to the resulting values. The terms are plotted based on the first two UMAP dimensions. Terms are colored by automatically identified clusters computed with the Leiden algorithm applied to the TF-IDF values. Top ten significantly enriched terms are represented as larger, black-outlined, points. On the right: the top ten significant Gene Ontology terms are reported in the boxes, with colors indicating the corresponding cluster. **Figure Legend:** UMAP Uniform Manifold Approximation and Projection.

Table 5.7. Enriched Biological Processes in De Novo Papillary Thyroid Cancers, According to Gene Ontology Analysis

Biological Process	ID	p-value	q-value	Overlapping Genes
MAPK Cascade	GO:0000165	1.7395487929341005e-09	6.853287586558382e-07	<i>RET, NRAS, NF1, BRAF, KRAS, HRAS, MEN1</i>
Response To Gamma Radiation	GO:0010332	2.873495843420705e-09	6.853287586558382e-07	<i>ATM, HRAS, TP53, MEN1</i>
Small GTPase Mediated Signal Transduction	GO:0007264	1.5852753307949112e-08	2.520587775963909e-06	<i>NRAS, NF1, KRAS, HRAS, TP53</i>
Ras Protein Signal Transduction	GO:0007265	6.894202313846511e-08	8.221336259261964e-06	<i>NRAS, NF1, KRAS, HRAS, TP53</i>
Cellular Response To Gamma Radiation	GO:0071480	2.8366829343744953e-07	2.7061955193932686e-05	<i>ATM, HRAS, TP53</i>
Positive Regulation Of Transcription, DNA-Templated	GO:0045893	1.2288524430338584e-06	9.769376922119175e-05	<i>RET, ZFH3, KMT2A, KMT2C, ATM, HRAS, TP53, MEN1</i>
Histone H3-K4 Methylation	GO:0051568	1.683001407154634e-06	0.00011468452445896577	<i>KMT2A, KMT2C, MEN1</i>
Regulation Of Cell Cycle	GO:0051726	2.6231602249832543e-06	0.00015640592841462654	<i>ZFH3, KMT2A, KMT2C, ATM, HRAS, TP53, MEN1</i>
Positive Regulation Of Transcription By RNA Polymerase II	GO:0045944	3.0996875449344348e-06	0.00016428343988152504	<i>ATM, TP53, MEN1</i>
Positive Regulation Of Cellular Process	GO:0048522	5.571151643809081e-06	0.00026574393340969316	<i>ATM, HRAS, TP53</i>

5.4.2. Secondary Papillary Thyroid Cancers

The top ten statistically significant enriched Gene Ontology terms in secondary PTC are shown in **Figure 5.10** and the detailed list is reported in **Table 5.8**.

The terms “Small GTPase Mediated Signal Transduction”, “Ras Protein Signal Transduction”, “Negative Regulation Of Serine/Threonine Kinase Activity” and “Regulation Of Cell Cycle” clustered together. The biological process with the highest p-value in this cluster was “Negative Regulation Of Protein Serine/Threonine Kinase Activity” (3.18e-08), while “Regulation Of Cell Cycle” was the one with the lowest statistical significance (p value 1.07e-06).

“Negative Regulation Of Cell Population Proliferation” (p value 2.18e-07) and “Positive Regulation Of Transcription, DNA Templated” (p value 4.61e-07) were grouped in another cluster.

“Response To Gamma Radiation” was the most significantly enriched process in this population (p value 1.67e-08) and, as for de novo PTC, it clustered with “Cellular Response To Gamma Radiation” (p value 1.02e-06).

Even in secondary PTC the “MAPK Cascade” term did not cluster but, differently from de novo PTC, it was the least statistically significant enriched process of the list (p value 1.23e-06).

“Replicative Senescence” term also did not cluster and exhibited a p value of 3.32e-07.

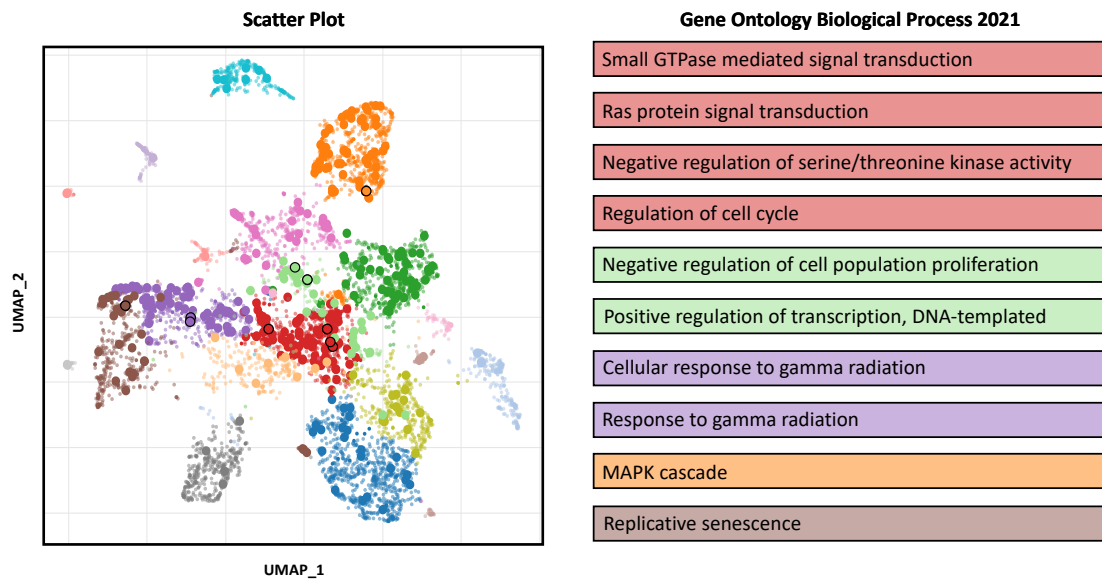


Figure 5.10. Scatter Plot Visualization of Enriched Biological Process in Secondary Papillary Thyroid Cancers, According to Gene Ontology Analysis

See Figure 5.9 caption.

Table 5.8. Enriched Biological Process in Secondary Papillary Thyroid Cancers, According to Gene Ontology Analysis

Biological Process	ID	p-value	q-value	Overlapping Genes
Response To Gamma Radiation	GO:0010332	1.667021133489588e-08	1.0277037422197609e-05	<i>ATM, HRAS, TP53, MEN1</i>
Negative Regulation Of Protein Serine/Threonine Kinase Activity	GO:0071901	3.17682764210127e-08	1.0277037422197609e-05	<i>RB1, APC, PTEN, NF1, MEN1</i>
Small GTPase Mediated Signal Transduction	GO:0007264	1.4915175157189225e-07	3.216706108900476e-05	<i>RB1, NF1, KRAS, HRAS, TP53</i>
Negative Regulation Of Cell Population Proliferation	GO:0008285	2.1762177729142788e-07	3.520032247688846e-05	<i>APC, PTEN, NF1, PPM1D, HRAS, TP53, MEN1</i>
Replicative Senescence	GO:0090399	3.3161472134701576e-07	4.291094494230384e-05	<i>CHEK2, ATM, TP53</i>
Positive Regulation Of Transcription, DNA-Templated	GO:0045893	4.614368874307938e-07	4.9758277694620595e-05	<i>RET, ZFX3, KMT2A, KMT2C, CHEK2, ATM, ARID1B, HRAS, TP53, MEN1</i>
Ras Protein Signal Transduction	GO:0007265	6.408939107990364e-07	5.923690861242522e-05	<i>RB1, NF1, KRAS, HRAS, TP53</i>
Cellular Response To Gamma Radiation	GO:0071480	1.0209769829080983e-06	7.7231362910504e-05	<i>ATM, HRAS, TP53</i>
Regulation Of Cell Cycle	GO:0051726	1.0743157128199938e-06	7.7231362910504e-05	<i>RB1, APC, ATM, HRAS, TP53, MEN1</i>
MAPK Cascade	GO:0000165	1.2307995938249777e-06	7.963273372047606e-05	<i>RB1, APC, ATM, HRAS, TP53, MEN1</i>

5.4.3. Thyroid Adenomas

In the adenoma population, Gene Ontology analysis showed that the terms “Positive Regulation Of Cellular Processes”, “Regulation Of Cell Migration” and “Positive Regulation Of Cell Transcription, DNA Templated” clustered together (**Figure 5.11**), with p values ranging from $7.98e-08$ (“Positive Regulation Of Cellular Processes”, the term with the highest significance in this population) to $8.41e-05$ (“Positive Regulation Of Cell Transcription, DNA Templated”) (**Table 5.9**).

A second cluster was represented by the terms “Positive Regulation Of Cell Motility” (p value $1.33e-05$) and “Positive Regulation Of Cell Migration” (p value $2.17e-05$), while “Histone H3-K4 Monomethylation” (p value $1.27e-05$) and “Positive Regulation Of Cell Adhesion” (p value $2.17e-05$) converged in a third group.

The biological processes “Cellular Response To Gamma Radiation” and “Negative Regulation Of Cyclin-Dependent Protein Serine/Threonine Kinase Activity” clustered together with a p-value of $6.15e-05$ and $8.58e-05$, respectively.

Lastly, as for the previous populations, the “MAPK Cascade” process ($4.59e-05$) was not part cluster of cluster of enriched terms.

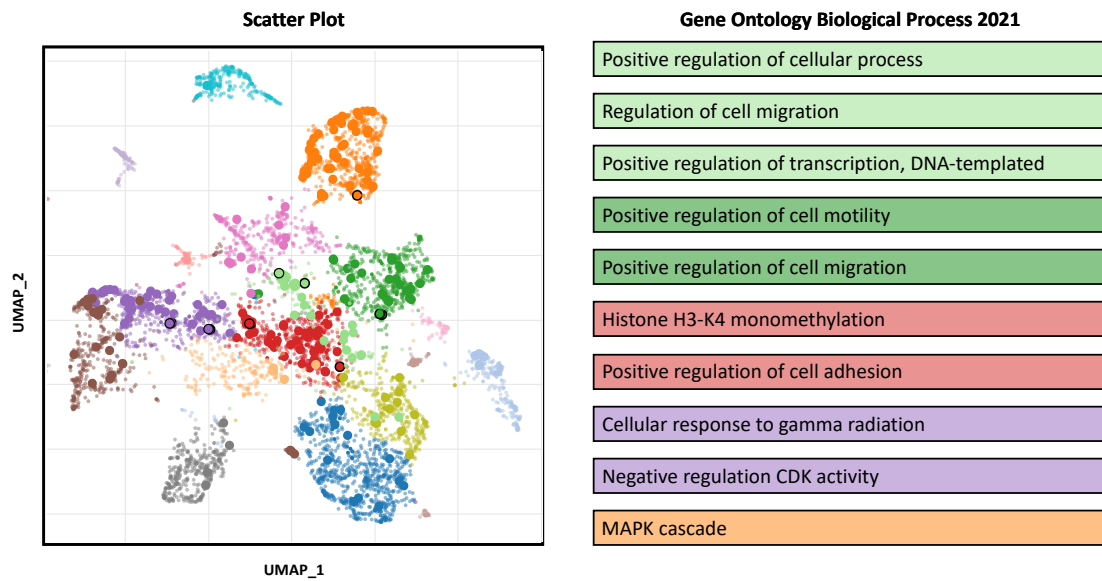


Figure 5.11. Scatter Plot Visualization of altered Biological Process in Thyroid Adenomas According to Gene Ontology Analysis

See Figure 5.9 caption.

Table 5.9. Altered Biological Process in Thyroid Adenomas According to Gene Ontology Analysis

Biological Process	ID	p-value	q-value	Overlapping Genes
Positive Regulation Of Cellular Process	GO:0048522	7.979924444029842e-08	3.0084315153992504e-05	ZFHX3, APC, PTEN, ATM, KRAS, HRAS, TSHR
Regulation Of Cell Migration	GO:0030334	5.929673566571532e-06	0.0011177434672987338	RET, APC, PTEN, ATM, HRAS
Histone H3-K4 Monomethylation	GO:0097692	1.270931618352025e-05	0.0013281066431612809	KMT2A, KMT2C
Positive Regulation Of Cell Motility	GO:2000147	1.3314352312393792e-05	0.0013281066431612809	RET, APC, ATM, HRAS
Positive Regulation Of Cell Adhesion	GO:0045785	2.1729931620316324e-05	0.0017340485433012425	RET, ZFHX3, ATM
Positive Regulation Of Cell Migration	GO:0030335	2.8806883666937314e-05	0.0019156577638513314	RET, APC, ATM, HRAS
MAPK Cascade	GO:0000165	4.585699206328194e-05	0.0026001924264631646	RET, BRAF, KRAS, HRAS
Cellular Response To Gamma Radiation	GO:0071480	6.15100567126949e-05	0.0026001924264631646	ATM, HRAS
Positive Regulation Of Transcription, DNA-Templated	GO:0045893	8.411821210449226e-05	0.0026001924264631646	RET, ZFHX3, KMT2A, KMT2C, ATM, HRAS
Negative Regulation Of Cyclin-Dependent Protein Serine/Threonine Kinase Activity	GO:0045736	8.583035665856277e-05	0.0026001924264631646	APC, PTEN

5.4.4. Comparison of Enriched Biological Processes in the Populations

To highlight similarities and difference between the enriched biological pathways in our populations plotted the top ten significant Gene Ontology term in a Venn diagram (**Figure 5.12**).

Three biological processes were commonly enriched in de novo PTC, secondary PTC and adenomas, namely “Positive Regulation of Transcription, DNA Templated”, “Cellular Response to Gamma Radiation” and “MAPK Cascade”. Each of these terms belong to a different cluster, as shown in the scatter plots reported above. Four biological processes were enriched in both de novo and secondary PTC. Of note, 3 of them (“Small GTPase Mediated Signal Transduction”, “Ras Protein Signal Transduction” and “Regulation of Cell Cycle”) clustered together. “Positive Regulation of Cellular Process” was a shared term between de novo PTC and adenomas, while this latter group did not show any common biological process with secondary PTC.

The remaining 11 terms were enriched in one population only, of which 2 in de novo PTC, 3 in secondary PTC and 6 in adenomas. Among the terms enriched in adenomas only, four were related with cell adhesion, migration or motility.

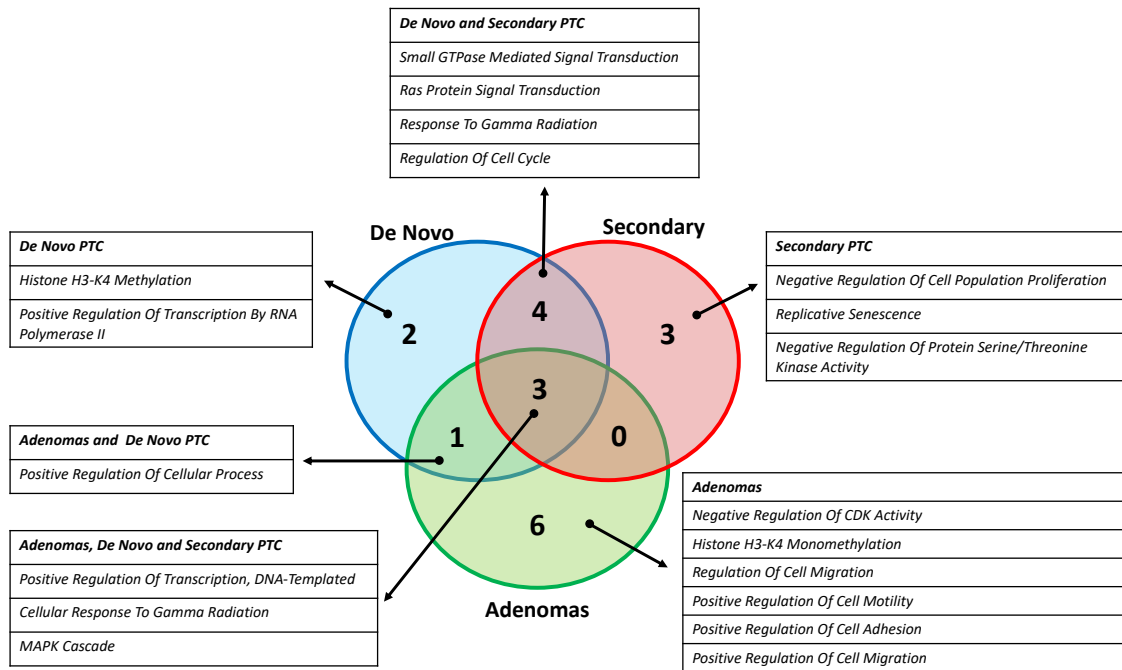


Figure 5.12. Venn Diagram of Enriched Biological Processes in the Examined Populations

The diagram illustrates the differentially enriched biological processes in each population.

5.5. Pathway Analysis

After assessing the enriched biological processes in our populations, we wanted to determine how altered genes influence cellular pathways. To this end, we carried out a bio-informatic analysis according to Reactome 2022, using the EnrichR online tool. Bi-dimensional visualization of pathways was obtained through the Appyter online tool. We report here the top 10 statistically significant Reactome enriched terms. The analysis was performed separately for de novo PTC, secondary PTC and adenomas. Information about the top 100 significantly enriched terms for each population are provided in **Supplementary Tables.5-7.**

5.5.1. De Novo Papillary Thyroid Cancers

Figure 5.12 displays the top ten significantly enriched pathways in de novo PTC and their bidimensional spatial distribution, according to the Reactome 2022 library. Details about the pathway identification number, the p and q values and overlapping genes are provided in **Table 5.10**.

Of note, 9 out of 10 terms correlated to MAPK signaling and converged in the same cluster, with p values ranging from $3.76e-07$ (“Oncogenic MAPK Signaling”) to $3.72e-06$ (“MAPK Family Signaling Cascades”).

The only term not clustering with the others was “RAS Signaling Downstream Of NF1 Loss-Of-Function Variants” and was also the one with the highest statistical significance in this population (p value $8.39e-09$).

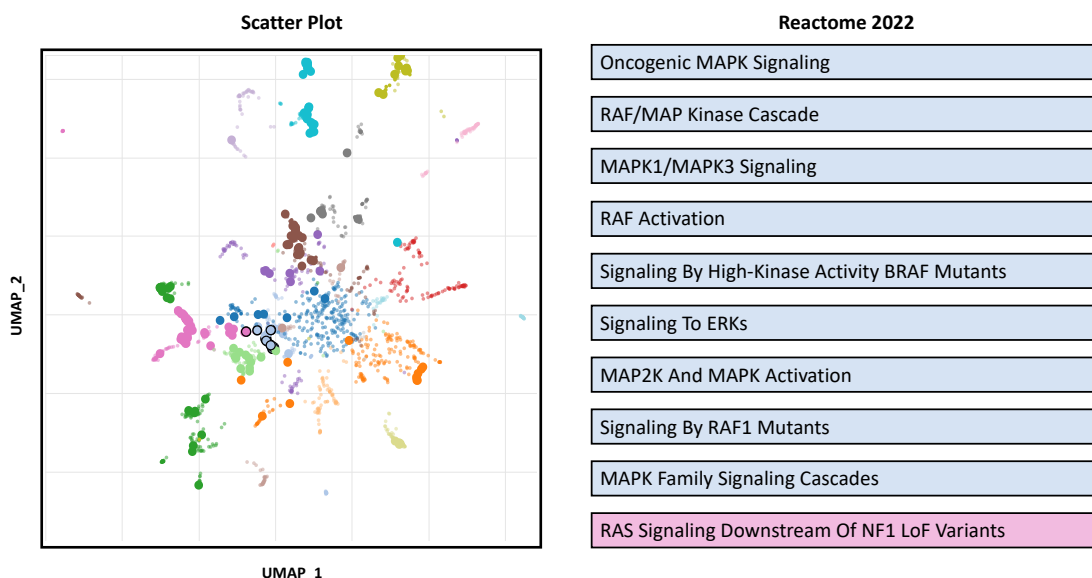


Figure 5.13. Scatter Plot Visualization of Altered Pathways in De Novo Papillary Thyroid Cancers According to Reactome Analysis

On the left: each point represents a term in the Reactome library. Term frequency-inverse document frequency (TF-IDF) values were computed for the gene set corresponding to each term, and UMAP was applied to the resulting values. The terms are plotted based on the first two UMAP dimensions. Terms are colored by automatically identified clusters computed with the Leiden algorithm applied to the TF-IDF values. Top ten significantly enriched terms are represented as larger, black-outlined, points. On the right: the top ten significant Gene Ontology terms are reported in the boxes, with colors indicating the corresponding cluster. **Figure Legend:** UMAP Uniform Manifold Approximation and Projection

Table 5.10. Altered Pathways in De Novo Papillary Thyroid Cancers According to Reactome Analysis

Pathway	ID	p-value	q-value	Overlapping Genes
RAS Signaling Downstream Of NF1 Loss-Of-Function Variants	R-HSA-6802953	8.387593360272853e-09	2.5246656014421285e-06	<i>NRAS, NF1, HRAS</i>
Oncogenic MAPK Signaling	R-HSA-6802957	3.758816366507574e-07	5.657018631593899e-05	<i>NRAS, NF1, BRAF, HRAS</i>
RAF/MAP Kinase Cascade	R-HSA-5673001	1.7016183300408428e-06	9.449934319120904e-05	<i>RET, NRAS, NF1, BRAF, HRAS</i>
MAPK1/MAPK3 Signaling	R-HSA-5684996	1.8947926377871997e-06	9.449934319120904e-05	<i>RET, NRAS, NF1, BRAF, HRAS</i>
RAF Activation	R-HSA-5673000	2.0540807489581383e-06	9.449934319120904e-05	<i>NRAS, BRAF, HRAS</i>
Signaling By High-Kinase Activity BRAF Mutants	R-HSA-6802948	2.258389565450525e-06	9.449934319120904e-05	<i>NRAS, BRAF, HRAS</i>
Signaling To ERKs	R-HSA-187687	2.258389565450525e-06	9.449934319120904e-05	<i>NRAS, BRAF, HRAS</i>
MAP2K And MAPK Activation	R-HSA-5674135	3.209962527762303e-06	9.449934319120904e-05	<i>NRAS, BRAF, HRAS</i>
Signaling By RAF1 Mutants	R-HSA-9656223	3.4834058980573822e-06	9.449934319120904e-05	<i>NRAS, BRAF, HRAS</i>
MAPK Family Signaling Cascades	R-HSA-5683057	3.7248458900597863e-06	9.449934319120904e-05	<i>NRAS, BRAF, HRAS</i>

5.5.2. Secondary Papillary Thyroid Cancers

In the secondary PTC population, pathway analysis showed more heterogeneous results compared to de novo tumors (**Figure 5.13, Table 5.11**).

The terms “Gene Expression (Transcription)”, “Generic Transcription Pathway”, “RNA Polymerase II Transcription”, “Regulation of TP53 Degradation” and “Regulation of TP53 Expression and Degradation” clustered together. The significance of these pathways enrichment went from 2.38e-08 [“Gene Expression (Transcription)"] to 1.15e-05 (“Regulation of TP53 Expression and Degradation”).

All the other terms did not cluster. Among them, “Recruitment And ATM-mediated Phosphorylation Of Repair And Signal Proteins At DNA Double Strand Breaks” showed the lowest p value of the list (4.97e-5)

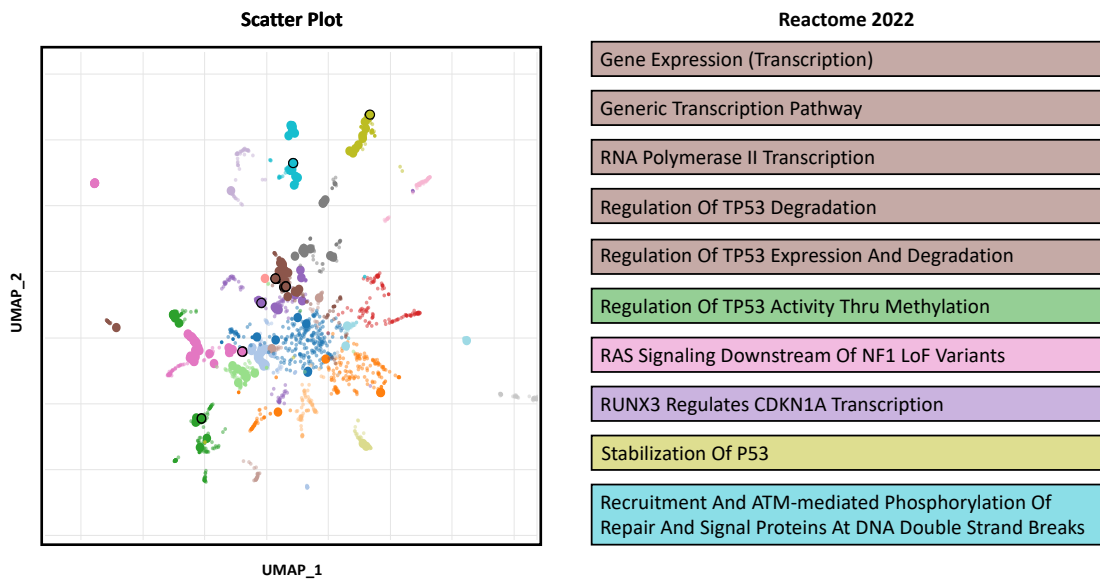


Figure 5.14. Scatter Plot Visualization of Altered Pathways in Secondary Papillary Thyroid Cancers According to Reactome Analysis

See Figure 5.12 caption.

Table 5.11. Altered Pathways in Secondary Papillary Thyroid Cancers According to Reactome Analysis

Pathway	ID	p-value	q-value	Overlapping Genes
Gene Expression (Transcription)	R-HSA-74160	2.382084e-08	6.900994667936107e-06	<i>RB1, ZFH3, KMT2A, KMT2C, CHEK2, PTEN, ATM, PPM1D, BDP1, ARID1B, TP53, MEN1</i>
Generic Transcription Pathway	R-HSA-212436	3.844565e-08	6.900994667936107e-06	<i>RB1, ZFH3, KMT2A, KMT2C, CHEK2, PTEN, ATM, PPM1D, ARID1B, TP53, MEN1</i>
RNA Polymerase II Transcription	R-HSA-73857	1.046341e-07	1.2521212996541085e-05	<i>RB1, ZFH3, KMT2A, KMT2C, CHEK2, PTEN, ATM, PPM1D, ARID1B, TP53, MEN1</i>
Regulation Of TP53 Activity Thru Methylation	R-HSA-6804760	1.452608e-06	0.00013037159734931091	<i>CHEK2, ATM, TP53</i>
Regulation Of TP53 Degradation	R-HSA-6804757	1.056131e-05	0.0006871347948762902	<i>CHEK2, ATM, TP53</i>
Regulation Of TP53 Expression And Degradation	R-HSA-6806003	1.148415e-05	0.0006871347948762902	<i>NRAS, BRAF, HRAS</i>
RAS Signaling Downstream Of NF1 Loss-Of-Function Variants	R-HSA-6802953	2.063923e-05	0.0010584976131054683	<i>NF1, HRAS</i>
RUNX3 Regulates CDKN1A Transcription	R-HSA-8941855	2.887383e-05	0.0012957131774954857	<i>ZFH3, TP53</i>
Stabilization Of P53	R-HSA-69541	4.036253e-05	0.0015616062277531565	<i>CHEK2, ATM, TP53</i>
Recruitment And ATM-mediated Phosphorylation Of Repair And Signal Proteins At DNA Double Strand Breaks	R-HSA-5693565	4.967047e-05	0.0015616062277531565	<i>CHEK2, ATM, TP53</i>

5.5.3. Thyroid Adenomas

Similarly to de novo PTC, most of the enriched pathways in the adenoma population (7/10) were closely related to the MAPK signaling and clustered together as shown in **Figure 5.11** and in **Table 5.9**. Among these terms, “RAF Activation” displayed the highest p-value ($2.23e-04$) and “Negative Regulation of MAPK Pathway” the lowest (p value $3.67e-04$).

Other enriched terms were “Signaling By FGFR3” (p value $3.32e-04$) and “Signaling by FGFR4” (p value $3.5e-04$), that were grouped in a second cluster.

Lastly, “Gene Expression (Transcription)” did not cluster with other terms, with a p-value of $2.59e-04$.

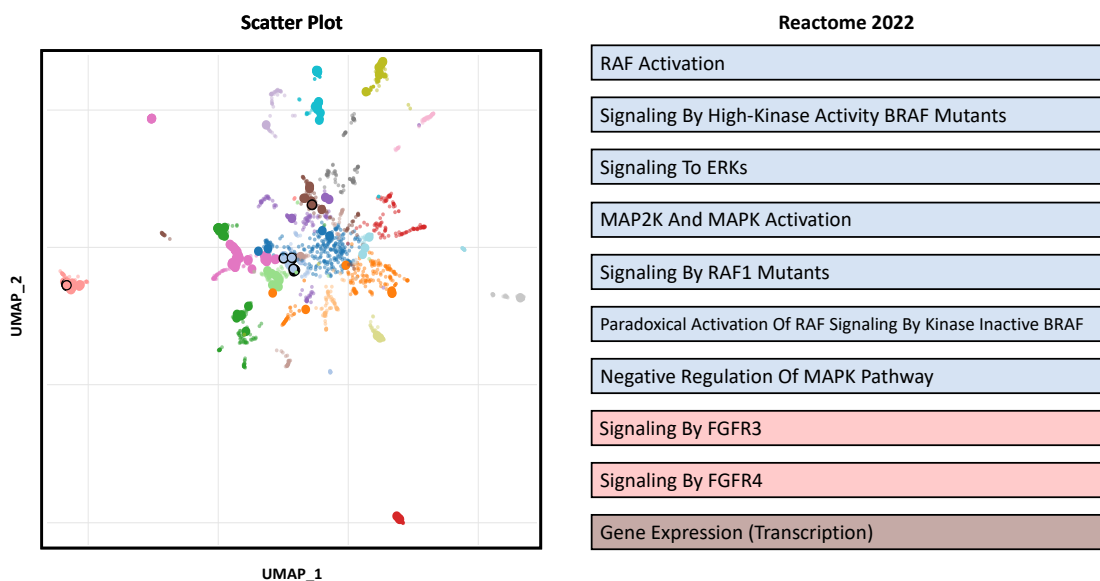


Figure 5.15. Scatter Plot Visualization of Altered Pathways in Thyroid Adenomas According to Reactome Analysis

See Figure 5.12 caption.

Table 5.12. Altered Pathways in Thyroid Adenomas According to Reactome Analysis

Pathway	ID	p-value	q-value	Overlapping Genes
RAF Activation	R-HSA-5673000	0.00022299126039333032	0.00936695865197297	<i>NRAS, BRAF, HRAS</i>
Signaling By High-Kinase Activity BRAF Mutants	R-HSA-6802948	0.00023728298476867357	0.00936695865197297	<i>NRAS, BRAF, HRAS</i>
Signaling To ERKs	R-HSA-187687	0.00023728298476867357	0.00936695865197297	<i>NRAS, BRAF, HRAS</i>
Gene Expression (Transcription)	R-HSA-74160	0.0002587167633104477	0.00936695865197297	<i>ZFXH3, KMT2A, KMT2C, PTEN, ATM, BDP1</i>
MAP2K And MAPK Activation	R-HSA-5674135	0.0002988222171700243	0.00936695865197297	<i>BRAF, HRAS</i>
Signaling By RAF1 Mutants	R-HSA-9656223	0.000315297453838473	0.00936695865197297	<i>BRAF, HRAS</i>
Signaling By FGFR3	R-HSA-5654741	0.0003322078014627923	0.00936695865197297	<i>BRAF, HRAS</i>
Signaling By FGFR4	R-HSA-5654743	0.00034955273047183893	0.00936695865197297	<i>BRAF, HRAS</i>
Paradoxical Activation Of RAF Signaling By Kinase Inactive BRAF	R-HSA-6802955	0.0003673317118420773	0.00936695865197297	<i>BRAF, HRAS</i>
Negative Regulation Of MAPK Pathway	R-HSA-5675221	0.0003673317118420773	0.00936695865197297	<i>BRAF, HRAS</i>

5.5.4. Comparison of Enriched Pathways in the Populations

As already done for Gene Ontology terms, we compared enriched pathways in the study populations by displaying them in a Venn diagram (**Figure 5.16**).

Of note, none of the enriched pathways were shared between de novo PTC, secondary PTC and adenomas. Only one term was common between de novo and secondary PTC (“RAS Signaling Downstream Of NF1 Loss-Of-Function Variants”). By contrast, de novo PTC and adenomas displayed the highest number of common terms (n=5), all related to MAPK signaling and clustering together. Lastly, secondary PTC and adenomas presented a shared term [Gene Expression (Transcription)].

Of the remaining pathways, 4 were enriched in de novo PTC only, 8 in secondary PTC and 4 in adenomas.

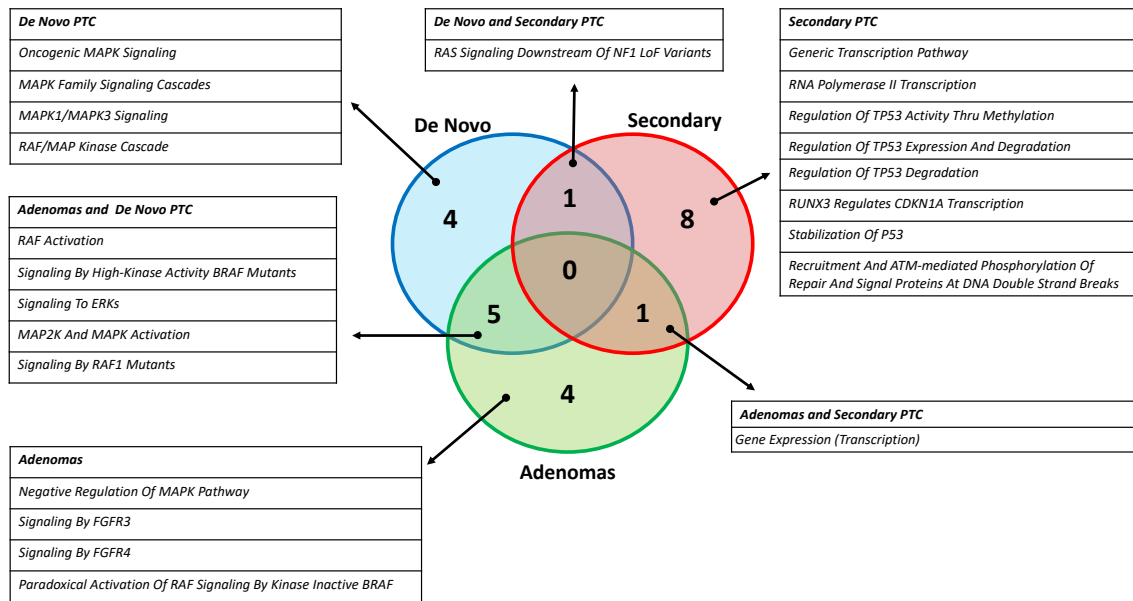


Figure 5.16. Venn Diagram of Enriched Pathways in the Examined Populations

The diagram illustrates the differentially enriched pathways in each population.

6. DISCUSSION

The molecular landscape of PTC has been largely studied and the genomic hallmarks of this disease are well established (78, 83). However, it is still unknown whether PTC developing in subjects exposed to a volcanic environment present peculiar features. On top of that, while the biological profile of radiation-induced PTC has been investigated (89), the molecular characteristics of PTC diagnosed in patients previously treated with chemotherapy and/or radiotherapy for a pediatric cancer (i.e. secondary PTC) remains controversial. Lastly, it is known that thyroid adenomas may present molecular alterations coherent with their follicular origin (116-118), but it still to determine if the exposure to volcanic pollution may interfere with their clonal evolution and malignancy potential.

To shed light on these controversies, we performed a NGS analysis on a cohort of thyroid neoplasms, including de novo PTC, secondary PTC and thyroid adenomas, diagnosed in patients from the volcanic area of Mount Etna Eastern Sicily (i.e. the province of Catania).

The NGS analysis was performed using a custom panel, specifically designed to address the most common genomic alterations of PTC, as reported by TCGA (78). Validation of this panel is ongoing and will be finalized once an adequate number of target sequencing will be performed. Samples sequenced for the present study will be included in the validation procedures.

Despite small (i.e. 15 de novo PTC, 7 secondary PTC and 16 adenomas), our study population recapitulate the main epidemiological characteristics of thyroid neoplasms, including the prevalence of female patients and the mean age of onset (125). In line with

what already reported, in the secondary PTC cohort previous malignancies were mainly hematological (Hodgkin lymphomas and leukemias). Also, the mean time from primary tumor to PTC diagnosis (i.e. 18.6 years) is coherent with previous literature data (48). Looking at the results of molecular analysis in the de novo PTC population, it can be noticed that the mean number of molecular alterations is higher than expected (3.4 average alterations per patient). Indeed in the TCGA a low mutational density was observed among the analyzed PTC (78). In line with TCGA data, these tumors were BRAF-driven in 60% of cases, harboring the typical V600E substitution in 9/11 cases and one, less common, copy number gain. All the BRAF mutations were observed in classical variant PTC. Of note, half of the *BRAF*-altered samples also displayed a *HRAS* or *KRAS* SNV. Thus far, these alterations have been considered mutually exclusive (15). However, all the retrieved *KRAS* mutations occurred in the non-coding region of the gene, and despite pathogenic according to the applied prediction methods, their oncogenicity and clinical significance need further clarification.

In the same cohort, FV PTC were RAS-driven in 2/3 cases, while the third presented a *RET/NCOA4* rearrangement. This latter event has been rarely reported in FV PTC, being these tumors rather enriched in *PPARG* fusions (126-128).

The small cohort of secondary PTC showed a broadly heterogenous profile and a very high number of molecular alterations (average 9.2 per patient). However, these samples presented two significantly different mutational patterns, according to previous exposure to radiotherapy. Those occurring in patients who received radiation therapy, with or without chemotherapy, presented an extremely high mutational load. These hypermutated patients (S01, S06, S07) harbored redundant molecular alterations in genes involved in MAPK signaling (*BRAF*, *HRAS*, *KRAS*, *NRAS*, *NF1*), but also in cell

adhesion (*APC*, *CDH4*), epigenetic regulation (*KMT2A*, *KMT2C*), DNA repair (*ARID1B*, *ATM*, *CHEK2*) and cell cycle regulation (*TP53*, *RB1*, *ZFH3*). The abovementioned complexity mirrors a vast clonal heterogeneity in radiation-induced tumors. This is in line with a recent report regarding a large cohort of survivors to Chernobyl disaster who later developed a PTC (89). According to this study, DNA double-strand breaks are the first oncogenic event and promote subsequent PTC development through the canonical aberrations of MAPK pathway (89).

On the other hand, patients from our secondary PTC cohort previously exposed to chemotherapy only showed a low mutational burden (3.6 average alteration per patient), resembling the one of de novo PTC. Among these subjects, SNV were heterogeneously scattered and involved BRAF V600E in one case only.

Even though the small number of patients does not allow to drive definitive conclusions, these findings seem to suggest that two distinct molecular profile co-exist in the population of secondary PTC. In the future, correlation with clinical outcomes could elucidate whether hypermutated tumors display an aggressive clinical behavior as expected.

Of note all of the tumors in this cohort, either radiotherapy or chemotherapy exposed, showed a mutation of *ZFH3*. This gene, also known as AT-motif binding factor 1, codifies for a zinc-finger transcription factor with multiple homeodomains, and functionally exert an oncosuppressor role (129). Loss-of-function of *ZFH3* have been retrieved in several tumor types, including prostate and breast cancer (130, 131). However, in TCGA the prevalence of this gene's mutations was only 1.7% among de novo PTC (78).

Taken together, our PTC populations, either de novo or secondary, showed a lower incidence of gene rearrangements compared to those observed in TCGA. Especially, we failed to identify any fusion in *PPARG*, *NTRK1*, *NTRK3* and *THADA*.

In the follicular adenomas cohort, *KRAS* SNV were the most frequent alterations, retrieved in half of the cases. As for the de novo PTC population, most of these mutations occurred in the non-coding region of the gene. *BRAF* was seldom altered with only one non canonical R682Q SNV and one copy number gain. This is coherent with the follicular origin of these lesions which represent a known precursors of FTC (82). A copy number loss of *EIF1AX* occurred in 3 of these samples. This gene codifies for an X-linked eukaryotic translation factor, and has been found mutated in different cancer types (132). *EIF1AX* was among the significantly mutated genes in PTC according to TCGA, and SNV have also been reported in adenomas (78). However, the biological significance of *EIF1AX* loss is unknown.

An integrated analysis of alterations found in the three study populations showed an overlap in genes related to the MAPK cascade (*BRAF*, *HRAS*, *KRAS*) and DNA methylation (*KTM2A*, *KTM2C*). Secondary PTC display the higher number of non-shared genes (n=5), and they were mainly related to DNA repair, gene expression and cell cycle regulation (*ARID1B*, *CHEK2*, *EZH1*, *PPM1D*, *RB1*). On the contrary, all the altered genes retrieved in adenomas were in common with secondary PTC or with both de novo and secondary PTC. These findings confirm that MAPK signaling plays a central role in thyroid neoplasm, that secondary PTC are also enriched with alterations related to other biological functions and that follicular adenomas share common features with PTC, despite being historically related to the development of FTC (82).

Protein-protein interaction networks explored by STRING analysis corroborate these assumptions. Overall, STRING analysis showed a simple clustering pattern in the three populations. In the de novo PTC cohort, altered genes corresponded to a main altered cluster of PPI, with MAPK components establishing most of the connections. In the secondary PTC population, protein clustering was similar, but additional proteins were present at the core of the cluster, including TP53, PTEN and ATM. Lastly, in the adenoma cohort a single PPI cluster emerged, again centered on MAPK signaling proteins, but with simpler interaction networks compared to de novo PTC.

A different scenario emerges from the analysis of enriched biological functions (according to Gene Ontology library) and pathways (according to Reactome library).

According to Gene Ontology analysis, de novo and secondary PTC share some enriched biological functions, mainly inherent to MAPK signaling and response to gamma radiation, while adenomas are rather enriched with terms not present in the other cohorts, including functions related to cell adhesion, motility and migrations.

The differences between the studied populations are even more straightforward looking at the results of the Reactome analysis. Indeed, de novo tumors are significantly enriched with pathways converging on MAPK signaling, whereas secondary tumors display an enrichment in several terms not clustering each other. These pathways are involved in TP53 activation and regulation and in DNA transcription and repair. It is possible that these biological differences between de novo and secondary PTC may underlie distinct clinical behaviors and potentially, a different response to targeted therapies.

Lastly, adenomas are also enriched in terms regarding MAPK pathway but display additional FGFR-related pathways.

The present study have several, worth mentioning, limitations. First of all, the study population included a limited number of cases. Of note, the recruitment has been severely slowed down by the break of Coronavirus pandemic since 2020. However, we plan to expand the analysis in the upcoming future. Hence, the results reported here should be considered as preliminary. For the secondary PTC cohort, we plan to sequence several cases from a non-volcanic area (Istituto dei Tumori, Milano, Italy), in order to score potential differences with secondary PTC diagnosed in patients exposed to a volcanic environment. We also aim to include additional clinical information to correlate with the molecular findings.

Due to technical issues, the custom NGS panel does not include sequencing of *TERT* promoter, which can be altered in PTC and is known to confer aggressiveness and a worse prognosis (133, 134). Since we acknowledge this important limitation, we have decided to separately evaluate *TERT* promoter alterations in our cohort. Still, we do not deem that this additional test will change the overall results of our analysis.

In conclusion, this is the first attempt to molecularly characterize papillary thyroid tumors, either the novo or occurring after chemo-radiotherapy exposure, and thyroid adenomas in a cohort of patients from a volcanic area. Our study suggest that the molecular landscape of PTC developing in subjects exposed to a volcanic environment is partly concordant with pre-existing literature evidence. However, the simultaneous presence of *BRAF* V600E and *H* or *NRAS* mutations represent a novel and unexpected finding. Moreover, individuals previously exposed to radiotherapy, but not those exposed to chemotherapy only, seem to have a greater risk to develop a hypermutated, and probably more aggressive, PTC. Lastly, the profile of thyroid adenomas was enriched

with SNV and CNV converging on biological functions and pathways that was substantially different from those observed in PTC.

These findings may have significant clinical implications and thus deserve further validation on larger and prospective cohorts.

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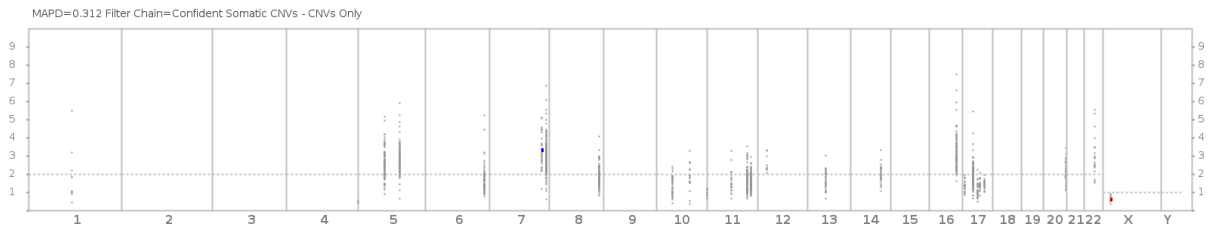
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8. SUPPLEMENTARY MATERIALS

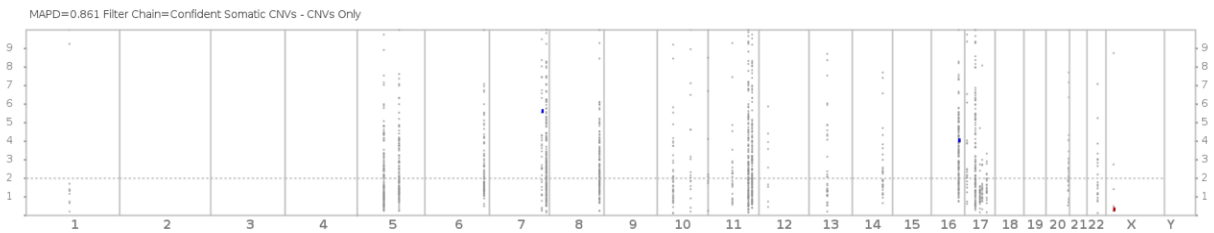
Supplementary Table 1. Genes targeted by the Custom NGS DNA Panel

#	Gene	Official Full Name	Ensemble Gene ID	Exon n°	Chromosome
1	<i>APC</i>	APC Regulator Of WNT Signaling Pathway	ENSG00000134982	20	5q22.2
2	<i>ARID1B</i>	AT-rich interaction domain 1B	ENSG00000049618	26	6q25.3
3	<i>ATM</i>	Ataxia Telangiectasia Mutated	ENSG00000149311	67	11q22.3
4	<i>BDP1</i>	B Double Prime 1, Subunit Of RNA Polymerase III Transcription Initiation Factor IIIB	ENSG00000145734	41	5q13.2
5	<i>BRAF</i>	B-Raf Proto-Oncogene, Serine/Threonine Kinase	ENSG00000157764	24	7q34
6	<i>CDH4</i>	Cadherin 4	ENSG00000179242	20	20q13.33
7	<i>CHEK2</i>	Checkpoint kinase 2	ENSG00000183765	21	22q12.1
8	<i>EIF1AX</i>	Eukaryotic translation initiation factor 1A X-linked	ENSG00000173674	7	Xp22.12
9	<i>EZH1</i>	Enhancer of zeste 1 polycomb repressive complex 2 subunit	ENSG00000108799	21	17q21.2
10	<i>HRAS</i>	HRas proto-oncogene, GTPase	ENSG00000174775	7	11p15.5
11	<i>KRAS</i>	KRAS proto-oncogene, GTPase	ENSG00000133703	7	12p12.1
12	<i>NRAS</i>	NRAS proto-oncogene, GTPase	ENSG00000213281	7	1p13.2
13	<i>MEN1</i>	Menin 1	ENSG00000133895	13	11q13.1
14	<i>KMT2A</i>	Lysine methyltransferase 2A	ENSG00000118058	37	11q23.3
15	<i>KMT2C</i>	Lysine methyltransferase 2C	ENSG00000055609	59	7q36.1
16	<i>NF1</i>	Neurofibromin 1	ENSG00000196712	58	17q11.2
17	<i>PPMID</i>	Protein Phosphatase, Mg ²⁺ /Mn ²⁺ Dependent 1D	ENSG00000170836	8	17q23.2
18	<i>PTEN</i>	Phosphatase and tensin homolog	ENSG00000171862	10	10q23.31
19	<i>RB1</i>	RB transcriptional corepressor 1	ENSG00000139687	27	13q14.2
20	<i>RET</i>	Ret proto-oncogene	ENSG00000165731	20	10q11.21
21	<i>SPOP</i>	Speckle type BTB/POZ protein	ENSG00000121067	16	17q21.33
22	<i>TG</i>	Thyroglobulin	ENSG00000042832	52	8q24.22
23	<i>TP53</i>	Tumor protein p53	ENSG00000141510	11	17p13.1
24	<i>TSHR</i>	Thyroid stimulating hormone receptor	ENSG00000165409	11	14q31.1
25	<i>ZFX3</i>	Zinc finger homebox 3	ENSG00000140836	23	16q22.2-q22.3



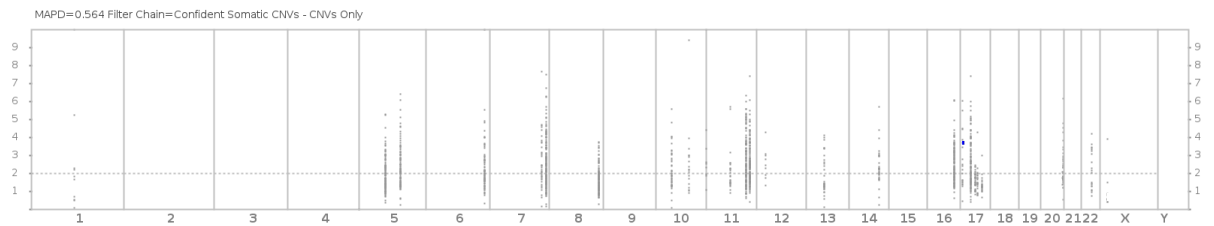
Supplementary Figure 1. CNV identified in P11

The x axis represents the chromosome number; y axis represents the ploidy for each chromosome. The dashed horizontal line represents the normal ploidy condition. The blue spot indicates a copy number gain on chromosome 7, corresponding to *BRAF* gene.



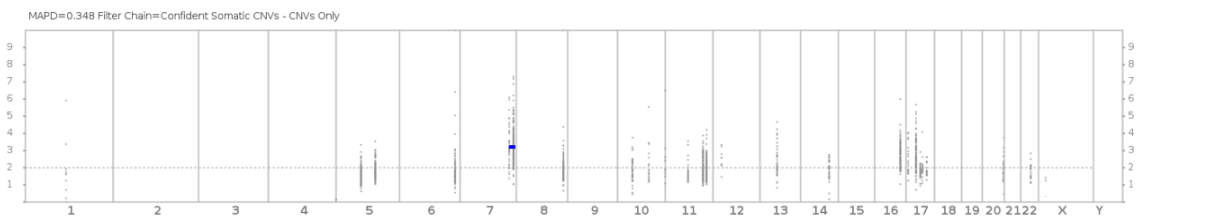
Supplementary Figure 2. CNV identified in S01

The x axis represents the chromosome number; y axis represents the ploidy for each chromosome. The dashed horizontal line represents the normal ploidy condition. The blue spots indicate a copy number gain on chromosome 7, corresponding to *BRAF* gene, and on chromosome 16, corresponding to *ZFX3* gene. The red spot indicates copy number loss on chromosome X, corresponding to *EIF1AX* gene.



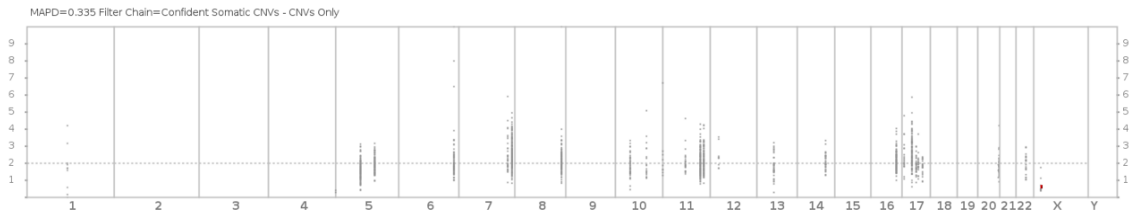
Supplementary Figure 3. CNV identified in S07

The x axis represents the chromosome number; y axis represents the ploidy for each chromosome. The dashed horizontal line represents the normal ploidy condition. The blue spot indicates copy number gain on chromosome 17, corresponding to *TP53* gene



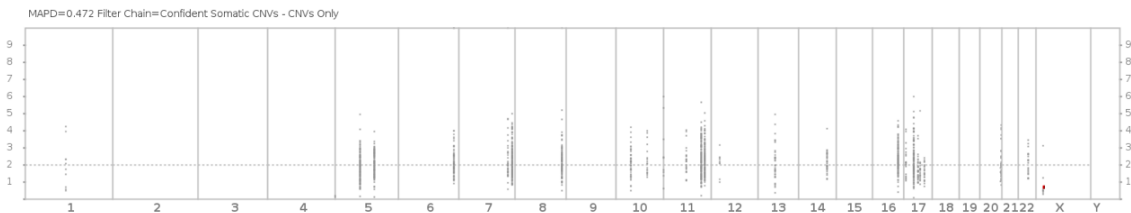
Supplementary Figure 4. CNV identified in A02

The x axis represents the chromosome number; y axis represents the ploidy for each chromosome. The dashed horizontal line represents the normal ploidy condition. The blue spot indicates a copy number gain on chromosome 7, corresponding to *BRAF* and *KTM2C* genes.



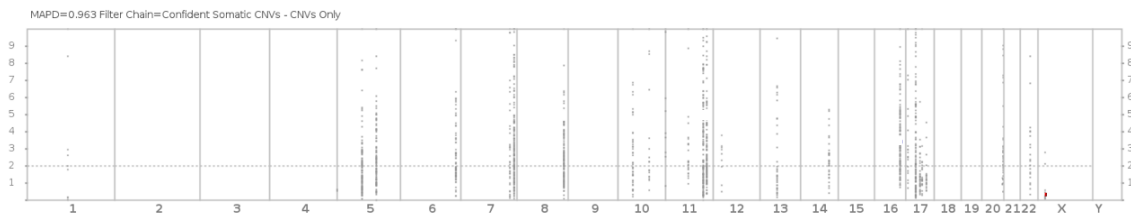
Supplementary Figure 5. CNV identified in A07

The x axis represents the chromosome number; y axis represents the ploidy for each chromosome. The dashed horizontal line represents the normal ploidy condition. The red spot indicates a copy number loss on chromosome X, corresponding to *EIF1AX* gene.



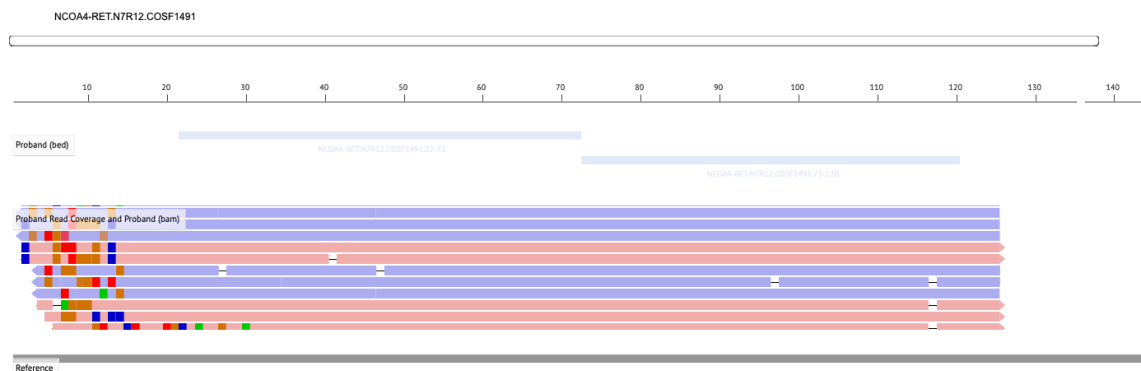
Supplementary Figure 6. CNV identified in A09

The x axis represents the chromosome number; y axis represents the ploidy for each chromosome. The dashed horizontal line represents the normal ploidy condition. The red spot indicates a copy number loss on chromosome X, corresponding to *EIF1AX* gene.



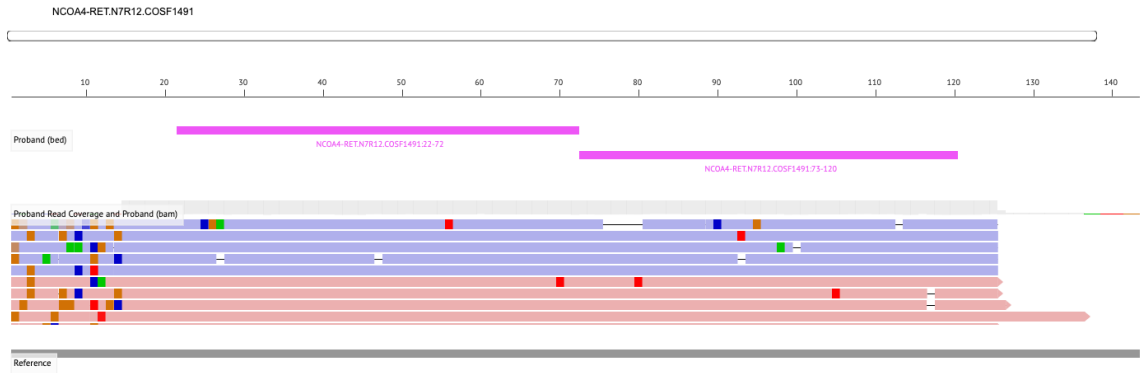
Supplementary Figure 7. CNV identified in A11

The x axis represents the chromosome number; y axis represents the ploidy for each chromosome. The dashed horizontal line represents the normal ploidy condition. The red spot indicates a copy number loss on chromosome X, corresponding to *EIF1AX* gene.



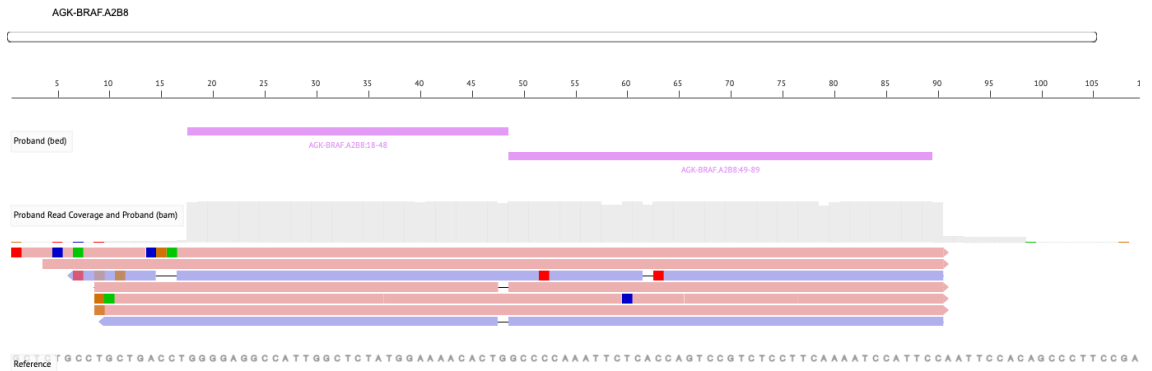
Supplementary Figure 8. Fusion identified in P09

The IGV shows the fusion regions between *RET* and *NCOA4* (also known as *PTC3*). The blue and red lines indicate the reads in both forward and reverse direction, covering the fusion regions. The numbered scale represents the base pairs of the amplicon.



Supplementary Figure 9. Fusion identified in P15

The IGV shows the fusion regions between *RET* and *NCOA4* (also known as *PTC3*). The blue and red lines indicate the reads in both forward and reverse direction, covering the fusion regions. The numbered scale represents the base pairs of the amplicon.



Supplementary Figure 10. Fusion identified in S01

The IGV shows the fusion regions between *RET* and *NCOA4* (*PTC2*). The blue and red lines indicate the reads in both forward and reverse direction, covering the fusion regions. The numbered scale represents the base pairs of the amplicon.

Supplementary Table 2. Top 100 Enriched Biological Processes in De Novo Papillary Thyroid Cancers According to Gene Ontology Analysis

#	Term (Gene Ontology ID)	p-value	q-value
1	MAPK cascade (GO:0000165)	1.7395487929341005e-09	6.853287586558382e-07
2	response to gamma radiation (GO:0010332)	2.873495843420705e-09	6.853287586558382e-07
3	small GTPase mediated signal transduction (GO:0007264)	1.5852753307949112e-08	2.520587775963909e-06
4	Ras protein signal transduction (GO:0007265)	6.894202313846511e-08	8.221336259261964e-06
5	cellular response to gamma radiation (GO:0071480)	2.8366829343744953e-07	2.7061955193932686e-05
6	positive regulation of transcription, DNA-templated (GO:0045893)	1.2288524430338584e-06	9.769376922119175e-05
7	histone H3-K4 methylation (GO:0051568)	1.683001407154634e-06	0.00011468452445896577
8	regulation of cell cycle (GO:0051726)	2.6231602249832543e-06	0.00015640592841462654
9	positive regulation of transcription by RNA polymerase II (GO:0045944)	3.0996875449344348e-06	0.00016428343988152504
10	positive regulation of cellular process (GO:0048522)	5.571151643809081e-06	0.00026574393340969316
11	regulation of telomerase activity (GO:0051972)	6.243776171906146e-06	0.00027075283945447563
12	cellular response to ionizing radiation (GO:0071479)	7.107193251517127e-06	0.0002825109317478058
13	negative regulation of cell population proliferation (GO:0008285)	8.752228882663223e-06	0.00032113947515618134
14	regulation of cell migration (GO:0030334)	1.250846752810919e-05	0.0004261813579220059
15	histone H3-K4 monomethylation (GO:0097692)	1.675288186561917e-05	0.0005236292507734916
16	regulation of cell population proliferation (GO:0042127)	1.7564083883387558e-05	0.0005236292507734916
17	positive regulation of cell motility (GO:2000147)	2.3790975884101065e-05	0.0006418835609547428
18	response to ionizing radiation (GO:0010212)	2.4222021168103504e-05	0.0006418835609547428
19	negative regulation of telomerase activity (GO:0051974)	2.6899281719267998e-05	0.0006753135463205702
20	negative regulation of protein serine/threonine kinase activity (GO:0071901)	3.080704022356698e-05	0.0007347479093320725
21	positive regulation of cell adhesion (GO:0045785)	3.323833204244041e-05	0.0007549849706782893
22	replicative senescence (GO:0090399)	3.941561644068303e-05	0.0008546022291911731
23	protein-containing complex assembly (GO:0065003)	4.9808109411792704e-05	0.0010191195652287746
24	positive regulation of cell migration (GO:0030335)	5.12764561121396e-05	0.0010191195652287746
25	positive regulation of programmed cell death (GO:0043068)	6.507117586083098e-05	0.001241558035424655
26	positive regulation of apoptotic process (GO:0043065)	8.892973141241418e-05	0.0015522561767788033
27	protein-containing complex subunit organization (GO:0043933)	9.077851676846927e-05	0.0015522561767788033
28	negative regulation of fibroblast proliferation (GO:0048147)	9.11177629974979e-05	0.0015522561767788033
29	cellular response to lectin (GO:1990858)	9.819625472168796e-05	0.0015613204500748387
30	stimulatory C-type lectin receptor signaling pathway (GO:0002223)	9.819625472168796e-05	0.0015613204500748387
31	innate immune response activating cell surface receptor signaling pathway (GO:0002220)	0.00010868787723630718	0.00165477889494936
32	negative regulation of cyclin-dependent protein serine/threonine kinase activity (GO:0045736)	0.00011304743026189121	0.00165477889494936
33	regulation of gene expression (GO:0010468)	0.00012194035140767226	0.00165477889494936
34	spindle assembly checkpoint signaling (GO:0071173)	0.0001248889732037253	0.00165477889494936
35	mitotic spindle assembly checkpoint signaling (GO:0007094)	0.0001248889732037253	0.00165477889494936
36	mitotic spindle checkpoint signaling (GO:0071174)	0.0001248889732037253	0.00165477889494936
37	negative regulation of cyclin-dependent protein kinase activity (GO:1904030)	0.00013731388963879662	0.0017236506673080523

38	negative regulation of mitotic metaphase/anaphase transition (GO:0045841)	0.00013731388963879662	0.0017236506673080523
39	cellular response to DNA damage stimulus (GO:0006974)	0.00014205024123087765	0.001737383719669965
40	regulation of cell adhesion (GO:0030155)	0.00015111116263504502	0.001802000614422912
41	endocrine system development (GO:0035270)	0.00016391054960449903	0.00190695932100844
42	positive regulation of protein phosphorylation (GO:0001934)	0.00017769606897435948	0.0020181196404945112
43	positive regulation of macromolecule metabolic process (GO:0010604)	0.00020277492704402623	0.0022493869813953607
44	regulation of apoptotic process (GO:0042981)	0.00021533597833675084	0.0023344377651506854
45	negative regulation of transferase activity (GO:0051348)	0.00024055368393234716	0.0025087802338273034
46	regulation of cell differentiation (GO:0045595)	0.0002419368778952955	0.0025087802338273034
47	regulation of MAPK cascade (GO:0043408)	0.0002904298199196884	0.0029163363241536447
48	negative regulation of DNA biosynthetic process (GO:2000279)	0.00029346780620414034	0.0029163363241536447
49	histone lysine methylation (GO:0034968)	0.00033161703785482386	0.003228190348096959
50	positive regulation of gene expression (GO:0010628)	0.00048155431370325503	0.0045940281527290525
51	cellular response to retinoic acid (GO:0071300)	0.0005315449008354333	0.0049715081901667
52	positive regulation of RNA metabolic process (GO:0051254)	0.0005822138818500083	0.005340692723893346
53	positive regulation of nucleic acid-templated transcription (GO:1903508)	0.0006002599226353449	0.00537415154663229
54	regulation of fibroblast proliferation (GO:0048145)	0.0006083945147130895	0.00537415154663229
55	intrinsic apoptotic signaling pathway in response to DNA damage (GO:0008630)	0.0007477269425466376	0.0064848318471772025
56	signal transduction in response to DNA damage (GO:0042770)	0.0007772736651313045	0.006620706040493433
57	regulation of megakaryocyte differentiation (GO:0045652)	0.0008380409440356887	0.0070130794790355
58	negative regulation of cellular process (GO:0048523)	0.0008806880558634352	0.007242900045635493
58	DNA damage response, signal transduction by p53 class mediator resulting in cell cycle arrest (GO:0006977)	0.0009010346774456689	0.0072521773583253
60	regulation of transcription by RNA polymerase II (GO:0006357)	0.0009122235670849434	0.0072521773583253
61	positive regulation of phosphorylation (GO:0042327)	0.0009916339043174551	0.007691132102921517
62	mitotic DNA damage checkpoint signaling (GO:0044773)	0.0009996859337130693	0.007691132102921517
63	cellular component assembly (GO:0022607)	0.0010848587453735211	0.00821393050068523
64	response to retinoic acid (GO:0032526)	0.001103310897929822	0.008223114036133204
65	regulation of protein phosphorylation (GO:0001932)	0.0011458567755711943	0.008408825876114764
66	mitotic G1 DNA damage checkpoint signaling (GO:0031571)	0.0012118881637081286	0.008758646274072385
67	positive regulation of MAPK cascade (GO:0043410)	0.001247911716894404	0.008884386402367623
68	regulation of myeloid cell differentiation (GO:0045637)	0.0013253963875063156	0.009297265835889891
69	gland development (GO:0048732)	0.001443814289271468	0.009981150956267974
70	DNA damage response, signal transduction by p53 class mediator (GO:0030330)	0.001567120651291163	0.010669258588383294
71	DNA repair (GO:0006281)	0.0015880867081241382	0.010669258588383294
72	negative regulation of cell cycle (GO:0045786)	0.0018283141997896284	0.012112581573606288
73	regulation of cyclin-dependent protein serine/threonine kinase activity (GO:0000079)	0.001919676073191219	0.012543636807016596
74	positive regulation of plasma membrane bounded cell projection assembly (GO:0120034)	0.001966159263820519	0.01267375633570794
75	cellular response to oxygen-containing compound (GO:1901701)	0.0019992555261276893	0.012715265146172104
76	regulation of endothelial cell proliferation (GO:0001936)	0.0024084361889752624	0.015116106080805266

77	hemopoiesis (GO:0030097)	0.002512535109003552	0.015564665545385641
78	positive regulation of cold-induced thermogenesis (GO:0120162)	0.002672621458078075	0.01613722070257268
79	regulation of MAP kinase activity (GO:0043405)	0.002672621458078075	0.01613722070257268
80	response to UV (GO:0009411)	0.0027819620672849227	0.016587448826186353
81	positive regulation of protein localization to membrane (GO:1905477)	0.0028933886457841386	0.017038844247395483
82	intrinsic apoptotic signaling pathway (GO:0097193)	0.0029498822665064593	0.017159680989311966
83	regulation of JNK cascade (GO:0046328)	0.0031224753229706615	0.01794482806092778
84	positive regulation of metabolic process (GO:0009893)	0.0036054127233747734	0.020473593679163894
85	phosphorylation (GO:0016310)	0.003663338969162722	0.020485075043104727
86	transmembrane receptor protein tyrosine kinase signaling pathway (GO:0007169)	0.003767249707723238	0.020485075043104727
87	positive regulation of protein-containing complex assembly (GO:0031334)	0.003923876780538224	0.020485075043104727
88	glial cell-derived neurotrophic factor receptor signaling pathway (GO:0035860)	0.003993945448655638	0.020485075043104727
89	beta-catenin destruction complex assembly (GO:1904885)	0.003993945448655638	0.020485075043104727
90	bone marrow development (GO:0048539)	0.003993945448655638	0.020485075043104727
91	cellular response to antibiotic (GO:0071236)	0.003993945448655638	0.020485075043104727
92	Schwann cell differentiation (GO:0014037)	0.003993945448655638	0.020485075043104727
93	regulation of miRNA metabolic process (GO:2000628)	0.003993945448655638	0.020485075043104727
94	positive regulation of epithelial cell proliferation (GO:0050679)	0.00425501903988099	0.021591958319396084
95	regulation of thymocyte apoptotic process (GO:0070243)	0.004790942275014269	0.023559582115276353
96	astrocyte development (GO:0014002)	0.004790942275014269	0.023559582115276353
97	cellular response to X-ray (GO:0071481)	0.004790942275014269	0.023559582115276353
98	pexophagy (GO:0000425)	0.005587341707821481	0.025143037685196663
99	positive regulation of RNA polymerase II transcription preinitiation complex assembly (GO:0045899)	0.005587341707821481	0.025143037685196663
100	positive regulation of protein localization to centrosome (GO:1904781)	0.005587341707821481	0.025143037685196663

Supplementary Table 3. Top 100 Enriched Biological Processes in Secondary Papillary Thyroid Cancers According to Gene Ontology Analysis

#	Term (Gene Ontology ID)	p-value	q-value
1	response to gamma radiation (GO:0010332)	1.667021133489588e-08	1.0277037422197609e-05
2	negative regulation of protein serine/threonine kinase activity (GO:0071901)	3.17682764210127e-08	1.0277037422197609e-05
3	small GTPase mediated signal transduction (GO:0007264)	1.4915175157189225e-07	3.216706108900476e-05
4	negative regulation of cell population proliferation (GO:0008285)	2.1762177729142788e-07	3.520032247688846e-05
5	replicative senescence (GO:0090399)	3.3161472134701576e-07	4.291094494230384e-05
6	positive regulation of transcription, DNA-templated (GO:0045893)	4.614368874307938e-07	4.9758277694620595e-05
7	Ras protein signal transduction (GO:0007265)	6.408939107990364e-07	5.923690861242522e-05
8	cellular response to gamma radiation (GO:0071480)	1.0209769829080983e-06	7.7231362910504e-05
9	regulation of cell cycle (GO:0051726)	1.0743157128199938e-06	7.7231362910504e-05
10	MAPK cascade (GO:0000165)	1.2307995938249777e-06	7.963273372047606e-05

11	negative regulation of cyclin-dependent protein serine/threonine kinase activity (GO:0045736)	1.7076087361357007e-06	0.0001004384411163453
12	regulation of cell population proliferation (GO:0042127)	1.8655911907378508e-06	0.00010058645836728245
13	negative regulation of cyclin-dependent protein kinase activity (GO:1904030)	2.303146781996938e-06	0.00010268397198568423
14	negative regulation of cell cycle (GO:0045786)	2.372566258739054e-06	0.00010268397198568423
15	regulation of transcription by RNA polymerase II (GO:0006357)	2.38061758853982e-06	0.00010268397198568423
16	negative regulation of cellular process (GO:0048523)	3.1887847471248214e-06	0.00012894648321185997
17	histone H3-K4 methylation (GO:0051568)	6.033858309199734e-06	0.00022019233479891921
18	positive regulation of cellular process (GO:0048522)	6.125907305070396e-06	0.00022019233479891921
19	regulation of cell migration (GO:0030334)	6.8478867883389276e-06	0.00023318856589764665
20	negative regulation of cell cycle G1/S phase transition (GO:1902807)	9.688815339849341e-06	0.0003134331762441262
21	negative regulation of G1/S transition of mitotic cell cycle (GO:2000134)	1.148414698957588e-05	0.00035382110010740927
22	regulation of telomerase activity (GO:0051972)	2.2277900155129167e-05	0.0006551727909258441
23	regulation of gene expression (GO:0010468)	2.3677212473519384e-05	0.000655886948067028
24	positive regulation of nucleic acid-templated transcription (GO:1903508)	2.4570589079219964e-05	0.000655886948067028
25	cellular response to ionizing radiation (GO:0071479)	2.5343390574460125e-05	0.000655886948067028
26	negative regulation of protein phosphorylation (GO:0001933)	3.0267327982233596e-05	0.0007294900665945269
27	intrinsic apoptotic signaling pathway in response to DNA damage (GO:0008630)	3.044239845139448e-05	0.0007294900665945269
28	signal transduction in response to DNA damage (GO:0042770)	3.2280808026285865e-05	0.0007459172426073912
29	DNA damage induced protein phosphorylation (GO:0006975)	3.847032196562326e-05	0.0008296766103919416
30	histone H3-K4 monomethylation (GO:0097692)	3.847032196562326e-05	0.0008296766103919416
31	DNA damage response, signal transduction by p53 class mediator resulting in cell cycle arrest (GO:0006977)	4.036253222957771e-05	0.0008424051081463476
32	mitotic DNA damage checkpoint signaling (GO:0044773)	4.722408723590282e-05	0.0009548120138009102
33	cellular response to DNA damage stimulus (GO:0006974)	5.155369460895416e-05	0.0009933074514399073
34	regulation of DNA-templated transcription, initiation (GO:2000142)	5.219853686082974e-05	0.0009933074514399073
35	regulation of transcription initiation from RNA polymerase II promoter (GO:0060260)	6.028541151003668e-05	0.0011043194367948595
36	negative regulation of telomerase activity (GO:0051974)	6.173695322587491e-05	0.0011043194367948595
37	mitotic G1 DNA damage checkpoint signaling (GO:0031571)	6.315273440712488e-05	0.0011043194367948595
38	positive regulation of transcription by RNA polymerase II (GO:0045944)	6.81505787688593e-05	0.0011603532753539992
39	regulation of G1/S transition of mitotic cell cycle (GO:2000045)	8.2245729511214e-05	0.0013644355639424479
40	response to ionizing radiation (GO:0010212)	8.575412779016238e-05	0.0013870730170058767
41	DNA damage response, signal transduction by p53 class mediator (GO:0030330)	9.306144097509942e-05	0.001468554934411935
42	positive regulation of cell adhesion (GO:0045785)	0.00011739350481991087	0.001808418990916246
43	regulation of cyclin-dependent protein serine/threonine kinase activity (GO:0000079)	0.00012633911432916592	0.001900962952813264
44	positive regulation of cell motility (GO:2000147)	0.00012959176509031649	0.0019055880003053356
45	cellular protein modification process (GO:0006464)	0.00014591475126229418	0.002097929868148985
46	negative regulation of mitotic cell cycle phase transition (GO:1901991)	0.0001777476099679932	0.0025000587749846002
47	negative regulation of fibroblast proliferation (GO:0048147)	0.00020868016842799032	0.0028726823185725473

48	intrinsic apoptotic signaling pathway (GO:0097193)	0.00024112207109460744	0.0032501245832960626
49	chromatin remodeling (GO:0006338)	0.000248160437794501	0.003276730678633513
50	regulation of protein phosphorylation (GO:0001932)	0.00026356075792133857	0.0033619921153435765
51	protein-containing complex assembly (GO:0065003)	0.00026735482249979416	0.0033619921153435765
52	positive regulation of cell migration (GO:0030335)	0.0002750608696568323	0.0033619921153435765
53	spindle assembly checkpoint signaling (GO:0071173)	0.0002857953111961309	0.0033619921153435765
54	mitotic spindle assembly checkpoint signaling (GO:0007094)	0.0002857953111961309	0.0033619921153435765
55	mitotic spindle checkpoint signaling (GO:0071174)	0.0002857953111961309	0.0033619921153435765
56	negative regulation of mitotic metaphase/anaphase transition (GO:0045841)	0.000314144742212557	0.003604643014965175
57	protein-containing complex subunit organization (GO:0043933)	0.00031756514969554097	0.003604643014965175
58	positive regulation of programmed cell death (GO:0043068)	0.00034717147767384006	0.003872757690603009
58	endocrine system development (GO:0035270)	0.0003747925243021608	0.004110012935991492
60	DNA repair (GO:0006281)	0.0004056348658293148	0.004374095969859444
61	positive regulation of apoptotic process (GO:0043065)	0.00047084533110052786	0.004994048020033467
62	regulation of cell adhesion (GO:0030155)	0.0005253190192256105	0.0054819581522414515
63	negative regulation of transferase activity (GO:0051348)	0.0005493106201692561	0.005641332876976329
64	negative regulation of DNA biosynthetic process (GO:2000279)	0.0006696067158070427	0.006665162232725486
65	DNA damage checkpoint signaling (GO:0000077)	0.0006696067158070427	0.006665162232725486
66	brain development (GO:0007420)	0.000745521638353832	0.007195492254134845
67	histone lysine methylation (GO:0034968)	0.000756249572304744	0.007195492254134845
68	phosphatidylinositol 3-kinase signaling (GO:0014065)	0.000756249572304744	0.007195492254134845
69	negative regulation of neurogenesis (GO:0050768)	0.0008014959660444926	0.007515476667112851
70	regulation of signal transduction by p53 class mediator (GO:1901796)	0.0008353133639175971	0.007611940090911061
71	regulation of cell differentiation (GO:0045595)	0.0008353133639175971	0.007611940090911061
72	positive regulation of protein phosphorylation (GO:0001934)	0.0009227137591005459	0.008291608363028516
73	DNA integrity checkpoint signaling (GO:0031570)	0.0009952474592520714	0.008741116293464466
74	regulation of MAPK cascade (GO:0043408)	0.0009997567321736792	0.008741116293464466
75	positive regulation of macromolecule metabolic process (GO:0010604)	0.0010485896500580098	0.009045833381167098
76	negative regulation of transcription by RNA polymerase II (GO:0000122)	0.0011410261158100504	0.009713735485909246
77	cellular response to retinoic acid (GO:0071300)	0.0012092868136118387	0.01011643893849145
78	phosphorylation (GO:0016310)	0.001219601603094796	0.01011643893849145
79	positive regulation of RNA metabolic process (GO:0051254)	0.0013238573520127186	0.010842224136104162
80	regulation of fibroblast proliferation (GO:0048145)	0.0013830203898899714	0.011185177403235144
81	negative regulation of cell differentiation (GO:0045596)	0.0014968368414389997	0.011875510185287637
82	regulation of protein metabolic process (GO:0051246)	0.0015050878441941053	0.011875510185287637
83	regulation of nucleic acid-templated transcription (GO:1903506)	0.0015916712196261307	0.012407364808410922
84	regulation of apoptotic process (GO:0042981)	0.0016380304979186093	0.012616734906587384
85	regulation of intracellular signal transduction (GO:1902531)	0.001688741052173828	0.012854299538311372
86	regulation of megakaryocyte differentiation (GO:0045652)	0.001901018240228249	0.014301846528228803
87	regulation of cellular macromolecule biosynthetic process (GO:2000112)	0.002168762461272382	0.016128612786703807
88	positive regulation of cell population proliferation (GO:0008284)	0.002271544162353265	0.01670101219366548

89	positive regulation of gene expression (GO:0010628)	0.0024137862334011554	0.017547412281017388
90	negative regulation of kinase activity (GO:0033673)	0.0024974544715199065	0.017756626846960215
91	response to retinoic acid (GO:0032526)	0.0024974544715199065	0.017756626846960215
92	protein phosphorylation (GO:0006468)	0.0026773798758388226	0.018828964996388243
93	regulation of ERK1 and ERK2 cascade (GO:0070372)	0.0027998197707377885	0.01947831603943386
94	canonical Wnt signaling pathway (GO:0060070)	0.0029954011693546405	0.020400258490236342
95	regulation of myeloid cell differentiation (GO:0045637)	0.0029954011693546405	0.020400258490236342
96	gland development (GO:0048732)	0.003260434667143527	0.0217474353571326
97	phosphatidylinositol-mediated signaling (GO:0048015)	0.003260434667143527	0.0217474353571326
98	positive regulation of phosphorylation (GO:0042327)	0.003326390002095202	0.021960962564853016
99	chromatin assembly (GO:0031497)	0.0034430218247567387	0.022501364854723333
100	regulation of transcription, DNA-templated (GO:0006355)	0.003486783729186308	0.02255949072783541

Supplementary Table 4. Top 100 Enriched Biological Processes in Thyroid Adenomas According to Gene Ontology Analysis

#	Term (Gene Ontology ID)	p-value	q-value
1	positive regulation of cellular process (GO:0048522)	7.979924444029842e-08	3.1839898531679065e-05
2	regulation of cell migration (GO:0030334)	5.929673566571532e-06	0.0011829698765310206
3	histone H3-K4 monomethylation (GO:0097692)	1.270931618352025e-05	0.0013281066431612809
4	positive regulation of cell motility (GO:2000147)	1.3314352312393792e-05	0.0013281066431612809
5	positive regulation of cell adhesion (GO:0045785)	2.1729931620316324e-05	0.0017340485433012425
6	positive regulation of cell migration (GO:0030335)	2.8806883666937314e-05	0.0019156577638513314
7	MAPK cascade (GO:0000165)	4.585699206328194e-05	0.0026001924264631646
8	cellular response to gamma radiation (GO:0071480)	6.15100567126949e-05	0.0026001924264631646
9	positive regulation of transcription, DNA-templated (GO:0045893)	8.411821210449226e-05	0.0026001924264631646
10	negative regulation of cyclin-dependent protein serine/threonine kinase activity (GO:0045736)	8.583035665856277e-05	0.0026001924264631646
11	mitotic spindle checkpoint signaling (GO:0071174)	9.482727286527288e-05	0.0026001924264631646
12	mitotic spindle assembly checkpoint signaling (GO:0007094)	9.482727286527288e-05	0.0026001924264631646
13	spindle assembly checkpoint signaling (GO:0071173)	9.482727286527288e-05	0.0026001924264631646
14	regulation of cell adhesion (GO:0030155)	9.918353818155463e-05	0.0026001924264631646
15	negative regulation of cyclin-dependent protein kinase activity (GO:1904030)	0.00010426836797847276	0.0026001924264631646
16	negative regulation of mitotic metaphase/anaphase transition (GO:0045841)	0.00010426836797847276	0.0026001924264631646
17	regulation of cell population proliferation (GO:0042127)	0.00012053331852146332	0.0027593276780207205
18	response to gamma radiation (GO:0010332)	0.000124480947880634	0.0027593276780207205
19	histone H3-K4 methylation (GO:0051568)	0.00019572323532665868	0.004110187941859833
20	positive regulation of cell population proliferation (GO:0008284)	0.000258153226805406	0.004914003371001311
21	negative regulation of cell cycle G1/S phase transition (GO:1902807)	0.00026717919670534254	0.004914003371001311
22	positive regulation of transcription by RNA polymerase II (GO:0045944)	0.00027094755429079914	0.004914003371001311

23	negative regulation of G1/S transition of mitotic cell cycle (GO:2000134)	0.0002988222171700243	0.005183915854384335
24	cellular response to retinoic acid (GO:0071300)	0.0004041897176269234	0.0067196540555476015
25	cellular response to ionizing radiation (GO:0071479)	0.0005038936977770158	0.008042143416521173
26	regulation of ERK1 and ERK2 cascade (GO:0070372)	0.0005497022368441449	0.008435815096185148
27	regulation of gene expression (GO:0010468)	0.0006019695838135628	0.008895772738578205
28	regulation of megakaryocyte differentiation (GO:0045652)	0.0006377173030824915	0.009035756310354895
29	positive regulation of phosphorylation (GO:0042327)	0.0006567341679205313	0.009035756310354895
30	regulation of protein phosphorylation (GO:0001932)	0.0007596086041793947	0.010102794435585951
31	positive regulation of MAPK cascade (GO:0043410)	0.0008277564804024493	0.010474050099352877
32	response to retinoic acid (GO:0032526)	0.0008400240681185265	0.010474050099352877
33	canonical Wnt signaling pathway (GO:0060070)	0.0010095147214072258	0.011798621729524695
34	regulation of myeloid cell differentiation (GO:0045637)	0.0010095147214072258	0.011798621729524695
35	regulation of cell cycle (GO:0051726)	0.001034966818379359	0.011798621729524695
36	regulation of G1/S transition of mitotic cell cycle (GO:2000045)	0.0010999291367171904	0.012190881265282194
37	negative regulation of protein serine/threonine kinase activity (GO:0071901)	0.0013254974295978832	0.013975350290673764
38	cellular response to oxygen-containing compound (GO:1901701)	0.00133098574196893	0.013975350290673764
39	negative regulation of cell cycle (GO:0045786)	0.0013936816342916061	0.014258435181598738
40	regulation of cyclin-dependent protein serine/threonine kinase activity (GO:0000079)	0.0014635188196625445	0.014588374263379927
41	positive regulation of plasma membrane bounded cell projection assembly (GO:0120034)	0.001499056002001446	0.014588374263379927
42	negative regulation of mitotic cell cycle phase transition (GO:1901991)	0.0018373565774843534	0.017048959870145514
43	Wnt signaling pathway (GO:0016055)	0.0018373565774843534	0.017048959870145514
44	positive regulation of protein phosphorylation (GO:0001934)	0.001979595558535306	0.017860029322279383
45	positive regulation of cold-induced thermogenesis (GO:0120162)	0.002039574841630082	0.017860029322279383
46	regulation of peptidyl-serine phosphorylation (GO:0033135)	0.0020812343433310263	0.017860029322279383
47	negative regulation of cell population proliferation (GO:0008285)	0.0021038129778123585	0.017860029322279383
48	positive regulation of macromolecule metabolic process (GO:0010604)	0.002183877397655296	0.01815348086800965
49	small GTPase mediated signal transduction (GO:0007264)	0.0024290159012020714	0.01918994069359022
50	regulation of transcription by RNA polymerase II (GO:0006357)	0.0024490031528466003	0.01918994069359022
51	phosphorylation (GO:0016310)	0.0024528495623385993	0.01918994069359022
52	transmembrane receptor protein tyrosine kinase signaling pathway (GO:0007169)	0.0025231748983624985	0.01936051508551225
53	protein-containing complex subunit organization (GO:0043933)	0.002706669841645333	0.020312408046847478
54	positive regulation of metabolic process (GO:0009893)	0.0027543382287582405	0.020312408046847478
55	cellular response to lectin (GO:1990858)	0.002850864287276839	0.020312408046847478
56	stimulatory C-type lectin receptor signaling pathway (GO:0002223)	0.002850864287276839	0.020312408046847478
57	innate immune response activating cell surface receptor signaling pathway (GO:0002220)	0.003048659628690299	0.021340617400832092
58	glial cell-derived neurotrophic factor receptor signaling pathway (GO:0035860)	0.0034953988931204698	0.022494583199275282
58	beta-catenin destruction complex assembly (GO:1904885)	0.0034953988931204698	0.022494583199275282
60	negative regulation of organ growth (GO:0046621)	0.0034953988931204698	0.022494583199275282
61	transcription initiation from RNA polymerase III promoter (GO:0006384)	0.0034953988931204698	0.022494583199275282

62	regulation of miRNA metabolic process (GO:2000628)	0.0034953988931204698	0.022494583199275282
63	positive regulation of gene expression (GO:0010628)	0.004153563986844202	0.024096760750734022
64	negative regulation of cell size (GO:0045792)	0.004193119798694676	0.024096760750734022
65	negative regulation of excitatory postsynaptic potential (GO:0090394)	0.004193119798694676	0.024096760750734022
66	positive regulation of extrinsic apoptotic signaling pathway via death domain receptors (GO:1902043)	0.004193119798694676	0.024096760750734022
67	cellular response to X-ray (GO:0071481)	0.004193119798694676	0.024096760750734022
68	postsynaptic density assembly (GO:0097107)	0.004193119798694676	0.024096760750734022
69	prepulse inhibition (GO:0060134)	0.004193119798694676	0.024096760750734022
70	Ras protein signal transduction (GO:0007265)	0.00430723167559448	0.024096760750734022
71	protein phosphorylation (GO:0006468)	0.004500687457340992	0.024096760750734022
72	cellular protein modification process (GO:0006464)	0.0045408809234693745	0.024096760750734022
73	brain development (GO:0007420)	0.004792708495455789	0.024096760750734022
74	pexophagy (GO:0000425)	0.004890387533564395	0.024096760750734022
75	positive regulation of protein localization to centrosome (GO:1904781)	0.004890387533564395	0.024096760750734022
76	negative regulation of telomere capping (GO:1904354)	0.004890387533564395	0.024096760750734022
77	negative regulation of dendritic spine development (GO:0061000)	0.004890387533564395	0.024096760750734022
78	histone H3-K4 dimethylation (GO:0044648)	0.004890387533564395	0.024096760750734022
79	positive regulation of miRNA metabolic process (GO:2000630)	0.004890387533564395	0.024096760750734022
80	negative regulation of cell cycle phase transition (GO:1901988)	0.004890387533564395	0.024096760750734022
81	positive regulation of nucleic acid-templated transcription (GO:1903508)	0.004891823611051268	0.024096760750734022
82	regulation of cell differentiation (GO:0045595)	0.005172725227483539	0.025169723972755274
83	excitatory synapse assembly (GO:1904861)	0.0055872022837974	0.02562406564638118
84	regulation of wound healing, spreading of epidermal cells (GO:1903689)	0.0055872022837974	0.02562406564638118
85	postsynaptic density organization (GO:0097106)	0.0055872022837974	0.02562406564638118
86	DNA damage induced protein phosphorylation (GO:0006975)	0.0055872022837974	0.02562406564638118
87	peptidyl-serine autophosphorylation (GO:0036289)	0.0055872022837974	0.02562406564638118
88	regulation of neuron projection development (GO:0010975)	0.005768069610737263	0.02615295198504736
89	regulation of MAPK cascade (GO:0043408)	0.005836081726626109	0.026164006841840646
90	positive regulation of ERK1 and ERK2 cascade (GO:0070374)	0.006251924576393368	0.0277168656220106
91	negative regulation of cellular process (GO:0048523)	0.006501163478400495	0.02841642855515429
92	regulation of attachment of spindle microtubules to kinetochore (GO:0051988)	0.006979473680213335	0.02841642855515429
93	negative regulation of phosphatidylinositol 3-kinase signaling (GO:0014067)	0.006979473680213335	0.02841642855515429
94	regulation of DNA methylation (GO:0044030)	0.006979473680213335	0.02841642855515429
95	presynaptic membrane assembly (GO:0097105)	0.006979473680213335	0.02841642855515429
96	regulation of organ growth (GO:0046620)	0.006979473680213335	0.02841642855515429
97	myelin maintenance (GO:0043217)	0.006979473680213335	0.02841642855515429
98	regulation of protein localization to centrosome (GO:1904779)	0.006979473680213335	0.02841642855515429
99	phosphorylated carbohydrate dephosphorylation (GO:0046838)	0.007674930787541144	0.029731042565329286
100	presynaptic membrane organization (GO:0097090)	0.007674930787541144	0.029731042565329286

Supplementary Table 5. Top 100 Enriched Pathways in De Novo Papillary Thyroid Cancers According to Reactome Analysis

#	Term (Reactome ID)	p-value	q-value
1	RAS Signaling Downstream Of NF1 Loss-Of-Function Variants R-HSA-6802953	8.387593360272853e-09	2.5246656014421285e-06
2	Oncogenic MAPK Signaling R-HSA-6802957	3.758816366507574e-07	5.657018631593899e-05
3	RAF/MAP Kinase Cascade R-HSA-5673001	1.7016183300408428e-06	9.449934319120904e-05
4	MAPK1/MAPK3 Signaling R-HSA-5684996	1.8947926377871997e-06	9.449934319120904e-05
5	RAF Activation R-HSA-5673000	2.0540807489581383e-06	9.449934319120904e-05
6	Signaling By High-Kinase Activity BRAF Mutants R-HSA-6802948	2.258389565450525e-06	9.449934319120904e-05
7	Signaling To ERKs R-HSA-187687	2.258389565450525e-06	9.449934319120904e-05
8	MAP2K And MAPK Activation R-HSA-5674135	3.209962527762303e-06	9.449934319120904e-05
9	Signaling By RAF1 Mutants R-HSA-9656223	3.4834058980573822e-06	9.449934319120904e-05
10	MAPK Family Signaling Cascades R-HSA-5683057	3.7248458900597863e-06	9.449934319120904e-05
11	Signaling By FGFR3 R-HSA-5654741	3.77185285167105e-06	9.449934319120904e-05
12	Signaling By FGFR4 R-HSA-5654743	4.075693778113988e-06	9.449934319120904e-05
13	Paradoxical Activation Of RAF Signaling By Kinase Inactive BRAF R-HSA-6802955	4.395318287963211e-06	9.449934319120904e-05
14	Negative Regulation Of MAPK Pathway R-HSA-5675221	4.395318287963211e-06	9.449934319120904e-05
15	Estrogen-stimulated Signaling Thru PRKCZ R-HSA-9634635	5.9914892032562716e-06	0.00012022921667867585
16	Signaling By FGFR1 R-HSA-5654736	7.567018654927798e-06	0.0001423545384458292
17	SOS-mediated Signaling R-HSA-112412	8.983080444348457e-06	0.00015905336551464035
18	RUNX3 Regulates CDKN1A Transcription R-HSA-8941855	1.2570489476168942e-05	0.0001891858666163426
19	Activated NTRK3 Signals Thru RAS R-HSA-9034864	1.2570489476168942e-05	0.0001891858666163426
20	Activated NTRK2 Signals Thru RAS R-HSA-9026519	1.2570489476168942e-05	0.0001891858666163426
21	Signaling By BRAF And RAF1 Fusions R-HSA-6802952	1.5435164714613006e-05	0.00021924423658919
22	SHC-related Events Triggered By IGF1R R-HSA-2428933	1.675288186561917e-05	0.00021924423658919
23	EGFR Transactivation By Gastrin R-HSA-2179392	1.675288186561917e-05	0.00021924423658919
24	Regulation Of RAS By GAPs R-HSA-5658442	1.7800710274205427e-05	0.00022199712133303602
25	Generic Transcription Pathway R-HSA-212436	1.843829911403954e-05	0.00022199712133303602
26	Activated NTRK2 Signals Thru FRS2 And FRS3 R-HSA-9028731	2.152942370892626e-05	0.00024001320505136312
27	MET Activates RAS Signaling R-HSA-8851805	2.152942370892626e-05	0.00024001320505136312
28	Signaling By FGFR2 R-HSA-5654738	2.4222021168103504e-05	0.0002603867275571127
29	Signaling By FGFR4 In Disease R-HSA-5655291	2.6899281719267998e-05	0.0002698894599166556
30	Constitutive Signaling By Overexpressed ERBB2 R-HSA-9634285	2.6899281719267998e-05	0.0002698894599166556
31	Signaling By PDGFRA Extracellular Domain Mutants R-HSA-9673770	3.286162327694617e-05	0.00031907576149550954
32	RNA Polymerase II Transcription R-HSA-73857	3.477346985884713e-05	0.0003270879508597808
33	TP53 Regulates Transcription Of Caspase Activators And Caspases R-HSA-6803207	3.941561644068303e-05	0.0003389743013898741
34	GRB2 Events In EGFR Signaling R-HSA-179812	3.941561644068303e-05	0.0003389743013898741
35	p38MAPK Events R-HSA-171007	3.941561644068303e-05	0.0003389743013898741
36	Signaling By FGFR R-HSA-190236	4.128131894504711e-05	0.000345157694512755
37	Erythropoietin Activates RAS R-HSA-9027284	4.6560429993752554e-05	0.00035036723570298797
38	SHC1 Events In ERBB4 Signaling R-HSA-1250347	4.6560429993752554e-05	0.00035036723570298797

39	SHC1 Events In EGFR Signaling R-HSA-180336	4.6560429993752554e-05	0.00035036723570298797
40	PTK6 Regulates RHO GTPases, RAS GTPase And MAP Kinases R-HSA-8849471	4.6560429993752554e-05	0.00035036723570298797
41	Constitutive Signaling By EGFRvIII R-HSA-5637810	5.429523345740245e-05	0.0003983843868179691
42	Transcriptional Regulation By RUNX3 R-HSA-8878159	5.558851909087941e-05	0.0003983843868179691
43	GRB2 Events In ERBB2 Signaling R-HSA-1963640	6.261919708622724e-05	0.0004188528516212089
44	Signaling By ERBB2 ECD Mutants R-HSA-9665348	6.261919708622724e-05	0.0004188528516212089
45	Signaling By FLT3 ITD And TKD Mutants R-HSA-9703648	6.261919708622724e-05	0.0004188528516212089
46	Gene Expression (Transcription) R-HSA-74160	6.593810008933556e-05	0.0004314645244976088
47	Signaling By NTRK3 (TRKC) R-HSA-9034015	7.15314919064766e-05	0.00045810593752871183
48	SHC-mediated cascade:FGFR3 R-HSA-5654704	8.103128969688274e-05	0.00048780836397523407
49	Tie2 Signaling R-HSA-210993	8.103128969688274e-05	0.00048780836397523407
50	Gastrin-CREB Signaling Pathway Via PKC And MAPK R-HSA-881907	8.103128969688274e-05	0.00048780836397523407
51	VEGFR2 Mediated Cell Proliferation R-HSA-5218921	9.11177629974979e-05	0.0004941744457275818
52	Constitutive Signaling By Ligand-Responsive EGFR Cancer Variants R-HSA-1236382	9.11177629974979e-05	0.0004941744457275818
53	Signaling By FLT3 Fusion Proteins R-HSA-9703465	9.11177629974979e-05	0.0004941744457275818
54	Signaling By NTRK1 (TRKA) R-HSA-187037	9.568128026635027e-05	0.0004941744457275818
55	Signaling By PDGFR In Disease R-HSA-9671555	0.00010179008516647866	0.0004941744457275818
56	Signaling By KIT In Disease R-HSA-9669938	0.00010179008516647866	0.0004941744457275818
57	SHC-mediated cascade:FGFR4 R-HSA-5654719	0.00010179008516647866	0.0004941744457275818
58	Regulation Of TP53 Activity Thru Methylation R-HSA-6804760	0.00010179008516647866	0.0004941744457275818
58	Ras Activation Upon Ca2+ Influx Thru NMDA Receptor R-HSA-442982	0.00010179008516647866	0.0004941744457275818
60	RAS Processing R-HSA-9648002	0.00010179008516647866	0.0004941744457275818
61	FRS-mediated FGFR3 Signaling R-HSA-5654706	0.00010179008516647866	0.0004941744457275818
62	Signaling To RAS R-HSA-167044	0.00010179008516647866	0.0004941744457275818
63	TP53 Regulates Transcription Of Genes Involved In Cytochrome C Release R-HSA-6803204	0.00011304743026189121	0.0005234965616742963
64	CD209 (DC-SIGN) Signaling R-HSA-5621575	0.00011304743026189121	0.0005234965616742963
65	SHC-mediated cascade:FGFR1 R-HSA-5654688	0.00011304743026189121	0.0005234965616742963
66	Developmental Biology R-HSA-1266738	0.00011823408398537705	0.0005370225847760187
67	Signaling By FGFR3 In Disease R-HSA-5655332	0.0001248889732037253	0.0005370225847760187
68	Signaling By ERBB2 TMD/JMD Mutants R-HSA-9665686	0.0001248889732037253	0.0005370225847760187
69	SHC1 Events In ERBB2 Signaling R-HSA-1250196	0.0001248889732037253	0.0005370225847760187
70	FRS-mediated FGFR4 Signaling R-HSA-5654712	0.0001248889732037253	0.0005370225847760187
71	FRS-mediated FGFR1 Signaling R-HSA-5654693	0.00013731388963879662	0.0005740483441844137
72	SHC-mediated cascade:FGFR2 R-HSA-5654699	0.00013731388963879662	0.0005740483441844137
73	Signaling By NTRKs R-HSA-166520	0.00014777472952853766	0.0006093177203847922
74	Signaling By NTRK2 (TRKB) R-HSA-9006115	0.00015032135601996194	0.0006114422724595749
75	Signaling By Erythropoietin R-HSA-9006335	0.00016391054960449903	0.0006245199421639773
76	Signaling By ERBB2 KD Mutants R-HSA-9664565	0.00016391054960449903	0.0006245199421639773
77	FRS-mediated FGFR2 Signaling R-HSA-5654700	0.00016391054960449903	0.0006245199421639773
78	Downstream Signaling Of Activated FGFR3 R-HSA-5654708	0.00016391054960449903	0.0006245199421639773
79	Signaling By EGFR In Cancer R-HSA-1643713	0.00016391054960449903	0.0006245199421639773
80	Signaling By ERBB2 In Cancer R-HSA-1227990	0.00017808064838669893	0.0006700284395549547

81	Downstream Signaling Of Activated FGFR4 R-HSA-5654716	0.0001928308312214584	0.0007165688913291232
82	Disease R-HSA-1643685	0.00020765786041422078	0.0007459076617888676
83	FLT3 Signaling In Disease R-HSA-9682385	0.00020816027770852118	0.0007459076617888676
84	CREB1 Phosphorylation Thru NMDA Receptor-Mediated Activation Of RAS Signaling R-HSA-442742	0.00020816027770852118	0.0007459076617888676
85	DAP12 Signaling R-HSA-2424491	0.00022406816820398208	0.0007842385887139373
86	Downstream Signal Transduction R-HSA-186763	0.00022406816820398208	0.0007842385887139373
87	Downstream Signaling Of Activated FGFR2 R-HSA-5654696	0.00024055368393234716	0.0008228029416322329
88	FCER1 Mediated MAPK Activation R-HSA-2871796	0.00024055368393234716	0.0008228029416322329
89	Downstream Signaling Of Activated FGFR1 R-HSA-5654687	0.00025761600687002403	0.0008712631243581712
90	Signal Transduction R-HSA-162582	0.00027033957947392775	0.0009041357046850251
91	Diseases Of Signal Transduction By Growth Factor Receptors And Second Messengers R-HSA-5663202	0.00029606400432625703	0.0009792886296945424
92	Regulation Of TP53 Degradation R-HSA-6804757	0.00037205718620846284	0.00120418508654567
93	Signaling By FGFR1 In Disease R-HSA-5655302	0.00037205718620846284	0.00120418508654567
94	Regulation Of TP53 Expression And Degradation R-HSA-6806003	0.00039313432145597	0.001245615060613126
95	FLT3 Signaling R-HSA-9607240	0.00039313432145597	0.001245615060613126
96	Signaling By FGFR2 In Disease R-HSA-5655253	0.0005070581642096471	0.0015734485301763276
97	Signaling By SCF-KIT R-HSA-1433557	0.0005070581642096471	0.0015734485301763276
98	DAP12 Interactions R-HSA-2172127	0.0005315449008354333	0.0016326021954231166
99	TP53 Regulates Transcription Of Cell Death Genes R-HSA-5633008	0.000556597075446985	0.0016922799970660854
100	PKMTs Methylate Histone Lysines R-HSA-3214841	0.0006351381693978915	0.001892837514740251

Supplementary Table 6. Top 100 Enriched Pathways in Secondary Papillary Thyroid Cancers According to Reactome Analysis

#	Term (Reactome ID)	p-value	q-value
1	Gene Expression (Transcription) R-HSA-74160	2.3820843431355153e-08	6.900994667936107e-06
2	Generic Transcription Pathway R-HSA-212436	3.8445652746162157e-08	6.900994667936107e-06
3	RNA Polymerase II Transcription R-HSA-73857	1.0463409189310099e-07	1.2521212996541085e-05
4	Regulation Of TP53 Activity Thru Methylation R-HSA-6804760	1.4526083270118207e-06	0.00013037159734931091
5	Regulation Of TP53 Degradation R-HSA-6804757	1.0561305190162971e-05	0.0006871347948762902
6	Regulation Of TP53 Expression And Degradation R-HSA-6806003	1.148414698957588e-05	0.0006871347948762902
7	RAS Signaling Downstream Of NF1 Loss-Of-Function Variants R-HSA-6802953	2.063922922489771e-05	0.0010584976131054683
8	RUNX3 Regulates CDKN1A Transcription R-HSA-8941855	2.88738312533813e-05	0.0012957131774954857
9	Stabilization Of P53 R-HSA-69541	4.036253222957771e-05	0.0015616062277531565
10	Recruitment And ATM-mediated Phosphorylation Of Repair And Signal Proteins At DNA Double Strand Breaks R-HSA-5693565	4.96704652216321e-05	0.0015616062277531565
11	DNA Double Strand Break Response R-HSA-5693606	5.219853686082974e-05	0.0015616062277531565
12	DNA Damage/Telomere Stress Induced Senescence R-HSA-2559586	5.219853686082974e-05	0.0015616062277531565
13	p53-Dependent G1 DNA Damage Response R-HSA-69563	6.315273440712488e-05	0.0017439870501659873
14	G1/S DNA Damage Checkpoints R-HSA-69615	6.915234345700029e-05	0.00177326366436165
15	TP53 Regulates Transcription Of Caspase Activators And Caspases R-HSA-6803207	9.041513427391057e-05	0.0021639355469555933

16	G2/M DNA Damage Checkpoint R-HSA-69473	0.00010476666355344596	0.0022991127121672907
17	Oncogenic MAPK Signaling R-HSA-6802957	0.00010887163260959316	0.0022991127121672907
18	Regulation Of TP53 Activity Thru Phosphorylation R-HSA-6804756	0.0001665446137518253	0.0033216397964947377
19	Formation Of Senescence-Associated Heterochromatin Foci (SAHF) R-HSA-2559584	0.00018562933966781003	0.003507417523197042
20	TP53 Regulates Transcription Of Genes Involved In Cytochrome C Release R-HSA-6803204	0.00025876610708752327	0.004644851622221042
21	RAF/MAP Kinase Cascade R-HSA-5673001	0.0002829257501974813	0.004836683062899799
22	MAPK1/MAPK3 Signaling R-HSA-5684996	0.00030749278017807745	0.005017723094724082
23	MAPK Family Signaling Cascades R-HSA-5683057	0.000518282211290909	0.008089709297975492
24	Disease R-HSA-1643685	0.0006567739102443203	0.00874985733198134
25	RAF Activation R-HSA-5673000	0.0006696067158070427	0.00874985733198134
26	Signaling By High-Kinase Activity BRAF Mutants R-HSA-6802948	0.0007122855268112139	0.00874985733198134
27	Signaling To ERKs R-HSA-187687	0.0007122855268112139	0.00874985733198134
28	Oncogene Induced Senescence R-HSA-2559585	0.0007122855268112139	0.00874985733198134
29	G2/M Checkpoints R-HSA-69481	0.0007170275110421054	0.00874985733198134
30	DNA Double-Strand Break Repair R-HSA-5693532	0.0007311858494691927	0.00874985733198134
31	Transcriptional Regulation By TP53 R-HSA-3700989	0.0007747619076066085	0.008972242736476529
32	Regulation Of TP53 Activity R-HSA-5633007	0.0008509164987106108	0.009546219469909665
33	MAP2K And MAPK Activation R-HSA-5674135	0.0008958242762467574	0.009656590212743071
34	Signaling By RAF1 Mutants R-HSA-9656223	0.0009449004432908564	0.009656590212743071
35	Cellular Senescence R-HSA-2559583	0.0009824607924292772	0.009656590212743071
36	Ovarian Tumor Domain Proteases R-HSA-5689896	0.0009952474592520714	0.009656590212743071
37	Signaling By FGFR3 R-HSA-5654741	0.0009952474592520714	0.009656590212743071
38	Signaling By FGFR4 R-HSA-5654743	0.0010468624608583276	0.009870189738613762
39	Paradoxical Activation Of RAF Signaling By Kinase Inactive BRAF R-HSA-6802955	0.0010997425892605864	0.009870189738613762
40	Negative Regulation Of MAPK Pathway R-HSA-5675221	0.0010997425892605864	0.009870189738613762
41	TP53 Regulates Transcription Of Cell Death Genes R-HSA-5633008	0.0012659452144418342	0.01108473980450289
42	PKMTs Methylate Histone Lysines R-HSA-3214841	0.0014434314962566937	0.012333596447752553
43	Signal Transduction R-HSA-162582	0.001486230786990175	0.012333596447752553
44	Diseases Of Signal Transduction By Growth Factor Receptors And Second Messengers R-HSA-5663202	0.0015116385618415386	0.012333596447752553
45	Signaling By FGFR1 R-HSA-5654736	0.0015679866104777358	0.01250904873692238
46	Autodegradation Of E3 Ubiquitin Ligase COP1 R-HSA-349425	0.0016975001307372168	0.013247881455101322
47	Transcriptional Regulation By RUNX1 R-HSA-8878171	0.0018070387636645207	0.013802700343735382
48	Regulation Of PTEN Gene Transcription R-HSA-8943724	0.0024186590963730416	0.01793172310551293
49	TP53 Regulates Transcription Of DNA Repair Genes R-HSA-6796648	0.0024974544715199065	0.01793172310551293
50	Signaling By BRAF And RAF1 Fusions R-HSA-6802952	0.0024974544715199065	0.01793172310551293
51	Regulation Of RAS By GAPs R-HSA-5658442	0.0027410497923989	0.01913295326532209
52	Chromatin Modifying Enzymes R-HSA-3247509	0.0027998197707377885	0.01913295326532209
53	RUNX1 Regulates Genes Involved In Megakaryocyte Differentiation And Platelet Function R-HSA-8936459	0.0028246421255210884	0.01913295326532209
54	Signaling By FGFR2 R-HSA-5654738	0.003351140242328576	0.022278876796221456
55	Cell Cycle Checkpoints R-HSA-69620	0.004033927749400419	0.026330546582450008
56	TP53 Regulates Metabolic Genes R-HSA-5628897	0.0042200861822271766	0.027053766775349222

57	Signaling By FGFR R-HSA-190236	0.004743270894726786	0.029874285108893263
58	Transcriptional Regulation By RUNX3 R-HSA-8878159	0.005756502851391889	0.03306190610072261
58	DNA Repair R-HSA-73894	0.005864436331777521	0.03306190610072261
60	Signaling To P38 Via RIT And RIN R-HSA-187706	0.0059861389875960165	0.03306190610072261
61	Synthesis Of PI R-HSA-1483226	0.0059861389875960165	0.03306190610072261
62	Activation Of NOXA And Translocation To Mitochondria R-HSA-111448	0.0059861389875960165	0.03306190610072261
63	SARS-CoV-1 Genome Replication And Transcription R-HSA-9679514	0.0059861389875960165	0.03306190610072261
64	SARS-CoV-2 Genome Replication And Transcription R-HSA-9694682	0.0059861389875960165	0.03306190610072261
65	Estrogen-stimulated Signaling Thru PRKCZ R-HSA-9634635	0.0059861389875960165	0.03306190610072261
66	Cell Cycle R-HSA-1640170	0.007149459485429744	0.037352882751123154
67	SOS-mediated Signaling R-HSA-112412	0.007179244874171303	0.037352882751123154
68	Sensing Of DNA Double Strand Breaks R-HSA-5693548	0.007179244874171303	0.037352882751123154
69	Negative Feedback Regulation Of MAPK Pathway R-HSA-5674499	0.007179244874171303	0.037352882751123154
70	Developmental Biology R-HSA-1266738	0.007969526144727176	0.0406105602432474
71	Signaling By NTRK1 (TRKA) R-HSA-187037	0.00818976833184501	0.0406105602432474
72	ARMS-mediated Activation R-HSA-170984	0.00837097899164431	0.0406105602432474
73	Activated NTRK2 Signals Thru RAS R-HSA-9026519	0.00837097899164431	0.0406105602432474
74	Activated NTRK3 Signals Thru RAS R-HSA-9034864	0.00837097899164431	0.0406105602432474
75	Transcriptional Regulation By RUNX2 R-HSA-8878166	0.008894763870200068	0.04257626972535766
76	EGFR Transactivation By Gastrin R-HSA-2179392	0.009561342717827156	0.04400669276538396
77	SHC-related Events Triggered By IGF1R R-HSA-2428933	0.009561342717827156	0.04400669276538396
78	Gain-of-function MRAS Complexes Activate RAF Signaling R-HSA-9726842	0.009561342717827156	0.04400669276538396
79	Activated NTRK2 Signals Thru FRS2 And FRS3 R-HSA-9028731	0.010750337464808102	0.046371643701802225
80	PI3P Regulates TP53 Acetylation R-HSA-6811555	0.010750337464808102	0.046371643701802225
81	Activation Of PUMA And Translocation To Mitochondria R-HSA-139915	0.010750337464808102	0.046371643701802225
82	Regulation Of PTEN Localization R-HSA-8948747	0.010750337464808102	0.046371643701802225
83	MET Activates RAS Signaling R-HSA-8851805	0.010750337464808102	0.046371643701802225
84	Signaling By NTRKs R-HSA-166520	0.010850189612677958	0.046371643701802225
85	Constitutive Signaling By Overexpressed ERBB2 R-HSA-9634285	0.011937964668319789	0.04941372189597947
86	Signaling By FGFR4 In Disease R-HSA-5655291	0.011937964668319789	0.04941372189597947
87	PTEN Regulation R-HSA-6807070	0.011974913105710904	0.04941372189597947
88	Signaling By PDGFRA Extracellular Domain Mutants R-HSA-9673770	0.013124225781325726	0.05177579181863666
89	Regulation Of PTEN mRNA Translation R-HSA-8943723	0.013124225781325726	0.05177579181863666
90	RHO GTPases Activate IQGAPs R-HSA-5626467	0.013124225781325726	0.05177579181863666
91	Pexophagy R-HSA-9664873	0.013124225781325726	0.05177579181863666
92	Frs2-mediated Activation R-HSA-170968	0.014309122256811026	0.05351015510619957
93	GRB2 Events In EGFR Signaling R-HSA-179812	0.014309122256811026	0.05351015510619957
94	TP53 Regulates Transcription Of Death Receptors And Ligands R-HSA-6803211	0.014309122256811026	0.05351015510619957
95	Hormone Ligand-Binding Receptors R-HSA-375281	0.014309122256811026	0.05351015510619957
96	p38MAPK Events R-HSA-171007	0.014309122256811026	0.05351015510619957
97	Erythropoietin Activates RAS R-HSA-9027284	0.0154926556616628	0.05452807204170289
98	SHC1 Events In ERBB4 Signaling R-HSA-1250347	0.0154926556616628	0.05452807204170289

99	SHC1 Events In EGFR Signaling R-HSA-180336	0.01549265556616628	0.05452807204170289
100	Inhibition Of Replication Initiation Of Damaged DNA By RB1/E2F1 R-HSA-113501	0.01549265556616628	0.05452807204170289

Supplementary Table 6. Top 100 Enriched Pathways in Secondary Papillary Thyroid Cancers According to Reactome Analysis

#	Term (Reactome ID)	p-value	q-value
1	RAF Activation R-HSA-5673000	0.00022299126039333032	0.00936695865197297
2	Signaling By High-Kinase Activity BRAF Mutants R-HSA-6802948	0.00023728298476867357	0.00936695865197297
3	Signaling To ERKs R-HSA-187687	0.00023728298476867357	0.00936695865197297
4	Gene Expression (Transcription) R-HSA-74160	0.0002587167633104477	0.00936695865197297
5	MAP2K And MAPK Activation R-HSA-5674135	0.0002988222171700243	0.00936695865197297
6	Signaling By RAF1 Mutants R-HSA-9656223	0.000315297453838473	0.00936695865197297
7	Signaling By FGFR3 R-HSA-5654741	0.0003322078014627923	0.00936695865197297
8	Signaling By FGFR4 R-HSA-5654743	0.00034955273047183893	0.00936695865197297
9	Paradoxical Activation Of RAF Signaling By Kinase Inactive BRAF R-HSA-6802955	0.0003673317118420773	0.00936695865197297
10	Negative Regulation Of MAPK Pathway R-HSA-5675221	0.0003673317118420773	0.00936695865197297
11	PKMTs Methylate Histone Lysines R-HSA-3214841	0.0004830911270410691	0.011158929710186722
12	Signaling By FGFR1 R-HSA-5654736	0.0005251261040087869	0.011158929710186722
13	RAF/MAP Kinase Cascade R-HSA-5673001	0.0008017612505235663	0.014270019879919035
14	Signaling By BRAF And RAF1 Fusions R-HSA-6802952	0.0008400240681185265	0.014270019879919035
15	MAPK1/MAPK3 Signaling R-HSA-5684996	0.0008542849371464446	0.014270019879919035
16	Generic Transcription Pathway R-HSA-212436	0.0009415293855927125	0.014270019879919035
17	RUNX1 Regulates Genes Involved In Megakaryocyte Differentiation And Platelet Function R-HSA-8936459	0.000951334658661269	0.014270019879919035
18	Signaling By FGFR2 R-HSA-5654738	0.0011309036960398487	0.016021135693897858
19	MAPK Family Signaling Cascades R-HSA-5683057	0.0012725729948198342	0.01690009222737301
20	Oncogenic MAPK Signaling R-HSA-6802957	0.0013254974295978832	0.01690009222737301
21	RNA Polymerase II Transcription R-HSA-73857	0.0014636283887934716	0.017772630435349296
22	Signaling By FGFR R-HSA-190236	0.0016081357833763062	0.01863975567095264
23	Signaling By NTRK1 (TRKA) R-HSA-187037	0.0028024032097844604	0.03074551174579278
24	Diseases Of Signal Transduction By Growth Factor Receptors And Second Messengers R-HSA-5663202	0.0028936952231334383	0.03074551174579278
25	Signaling To P38 Via RIT And RIN R-HSA-187706	0.0034953988931204698	0.03428179683637384
26	Estrogen-stimulated Signaling Thru PRKCZ R-HSA-9634635	0.0034953988931204698	0.03428179683637384
27	Signaling By NTRKs R-HSA-166520	0.003734825385772751	0.034491791892488466
28	Sensing Of DNA Double Strand Breaks R-HSA-5693548	0.004193119798694676	0.034491791892488466
29	Negative Feedback Regulation Of MAPK Pathway R-HSA-5674499	0.004193119798694676	0.034491791892488466
30	RAS Signaling Downstream Of NF1 Loss-Of-Function Variants R-HSA-6802953	0.004193119798694676	0.034491791892488466
31	SOS-mediated Signaling R-HSA-112412	0.004193119798694676	0.034491791892488466
32	Signal Transduction R-HSA-162582	0.004330348739526121	0.03450746651809878
33	ARMS-mediated Activation R-HSA-170984	0.004890387533564395	0.034640245029414464

34	Activated NTRK2 Signals Thru RAS R-HSA-9026519	0.004890387533564395	0.034640245029414464
35	Activated NTRK3 Signals Thru RAS R-HSA-9034864	0.004890387533564395	0.034640245029414464
36	RUNX3 Regulates CDKN1A Transcription R-HSA-8941855	0.004890387533564395	0.034640245029414464
37	Disease R-HSA-1643685	0.005033211416489899	0.03468834895148444
38	Developmental Biology R-HSA-1266738	0.005348183766701789	0.03474967274069115
39	Gain-of-function MRAS Complexes Activate RAF Signaling R-HSA-9726842	0.0055872022837974	0.03474967274069115
40	SHC-related Events Triggered By IGF1R R-HSA-2428933	0.0055872022837974	0.03474967274069115
41	EGFR Transactivation By Gastrin R-HSA-2179392	0.0055872022837974	0.03474967274069115
42	Activated NTRK2 Signals Thru FRS2 And FRS3 R-HSA-9028731	0.006283564258093123	0.03641611104122151
43	Regulation Of PTEN Localization R-HSA-8948747	0.006283564258093123	0.03641611104122151
44	MET Activates RAS Signaling R-HSA-8851805	0.006283564258093123	0.03641611104122151
45	Signaling By FGFR4 In Disease R-HSA-5655291	0.006979473680213335	0.03869056061857393
46	Constitutive Signaling By Overexpressed ERBB2 R-HSA-9634285	0.006979473680213335	0.03869056061857393
47	Pexophagy R-HSA-9664873	0.007674930787541144	0.03917702884937202
48	Regulation Of PTEN mRNA Translation R-HSA-8943723	0.007674930787541144	0.03917702884937202
49	Signaling By PDGFRA Extracellular Domain Mutants R-HSA-9673770	0.007674930787541144	0.03917702884937202
50	p38MAPK Events R-HSA-171007	0.008369935820942226	0.03917702884937202
51	Frs2-mediated Activation R-HSA-170968	0.008369935820942226	0.03917702884937202
52	TP53 Regulates Transcription Of Caspase Activators And Caspases R-HSA-6803207	0.008369935820942226	0.03917702884937202
53	GRB2 Events In EGFR Signaling R-HSA-179812	0.008369935820942226	0.03917702884937202
54	Hormone Ligand-Binding Receptors R-HSA-375281	0.008369935820942226	0.03917702884937202
55	Transcriptional Regulation By RUNX1 R-HSA-8878171	0.008690990362893284	0.03917702884937202
56	PTK6 Regulates RHO GTPases, RAS GTPase And MAP Kinases R-HSA-8849471	0.009064489027893918	0.03917702884937202
57	SHC1 Events In EGFR Signaling R-HSA-180336	0.009064489027893918	0.03917702884937202
58	SHC1 Events In ERBB4 Signaling R-HSA-1250347	0.009064489027893918	0.03917702884937202
58	Erythropoietin Activates RAS R-HSA-9027284	0.009064489027893918	0.03917702884937202
60	Constitutive Signaling By EGFRvIII R-HSA-5637810	0.009758590659951067	0.04079410849651676
61	Prolonged ERK Activation Events R-HSA-169893	0.009758590659951067	0.04079410849651676
62	Signaling By ERBB2 ECD Mutants R-HSA-9665348	0.0104522409709381	0.04162586683536024
63	Signaling By FLT3 ITD And TKD Mutants R-HSA-9703648	0.0104522409709381	0.04162586683536024
64	GRB2 Events In ERBB2 Signaling R-HSA-1963640	0.0104522409709381	0.04162586683536024
65	Spry Regulation Of FGF Signaling R-HSA-1295596	0.011145440218903038	0.04162586683536024
66	Signaling By NTRK3 (TRKC) R-HSA-9034015	0.011145440218903038	0.04162586683536024
67	Chromatin Modifying Enzymes R-HSA-3247509	0.011678264928131234	0.04162586683536024
68	Gastrin-CREB Signaling Pathway Via PKC And MAPK R-HSA-881907	0.01183818865932929	0.04162586683536024
69	Tie2 Signaling R-HSA-210993	0.01183818865932929	0.04162586683536024
70	SHC-mediated cascade:FGFR3 R-HSA-5654704	0.01183818865932929	0.04162586683536024
71	VEGFR2 Mediated Cell Proliferation R-HSA-5218921	0.01253048655713669	0.04162586683536024
72	Constitutive Signaling By Ligand-Responsive EGFR Cancer Variants R-HSA-1236382	0.01253048655713669	0.04162586683536024
73	Signaling By FLT3 Fusion Proteins R-HSA-9703465	0.01253048655713669	0.04162586683536024
74	Signaling By PDGFR In Disease R-HSA-9671555	0.013222334171232074	0.04162586683536024

75	Signaling By KIT In Disease R-HSA-9669938	0.013222334171232074	0.04162586683536024
76	Regulation Of TP53 Activity Thru Methylation R-HSA-6804760	0.013222334171232074	0.04162586683536024
77	SHC-mediated cascade:FGFR4 R-HSA-5654719	0.013222334171232074	0.04162586683536024
78	RAS Processing R-HSA-9648002	0.013222334171232074	0.04162586683536024
79	FRS-mediated FGFR3 Signaling R-HSA-5654706	0.013222334171232074	0.04162586683536024
80	Signaling To RAS R-HSA-167044	0.013222334171232074	0.04162586683536024
81	Ras Activation Upon Ca2+ Influx Thru NMDA Receptor R-HSA-442982	0.013222334171232074	0.04162586683536024
82	TP53 Regulates Transcription Of Genes Involved In Cytochrome C Release R-HSA-6803204	0.013913731760820029	0.042238114273917944
83	CD209 (DC-SIGN) Signaling R-HSA-5621575	0.013913731760820029	0.042238114273917944
84	SHC-mediated cascade:FGFR1 R-HSA-5654688	0.013913731760820029	0.042238114273917944
85	Signaling By FGFR3 In Disease R-HSA-5655332	0.014604679593987663	0.04232037836894153
86	Signaling By ERBB2 TMD/JMD Mutants R-HSA-9665686	0.014604679593987663	0.04232037836894153
87	SHC1 Events In ERBB2 Signaling R-HSA-1250196	0.014604679593987663	0.04232037836894153
88	FRS-mediated FGFR4 Signaling R-HSA-5654712	0.014604679593987663	0.04232037836894153
89	FRS-mediated FGFR1 Signaling R-HSA-5654693	0.01529517792933681	0.0433363374664543
90	SHC-mediated cascade:FGFR2 R-HSA-5654699	0.01529517792933681	0.0433363374664543
91	Signaling By NTRK2 (TRKB) R-HSA-9006115	0.015985227036696047	0.04383588588026018
92	Signaling By ERBB2 KD Mutants R-HSA-9664565	0.016674827177981324	0.04383588588026018
93	Signaling By Erythropoietin R-HSA-9006335	0.016674827177981324	0.04383588588026018
94	Signaling By EGFR In Cancer R-HSA-1643713	0.016674827177981324	0.04383588588026018
95	Downstream Signaling Of Activated FGFR3 R-HSA-5654708	0.016674827177981324	0.04383588588026018
96	Impaired BRCA2 Binding To PALB2 R-HSA-9709603	0.016674827177981324	0.04383588588026018
97	FRS-mediated FGFR2 Signaling R-HSA-5654700	0.016674827177981324	0.04383588588026018
98	Defective HDR Thru Homologous Recombination (HRR) Due To BRCA1 Loss-Of-Function R-HSA-9701192	0.017363978615388416	0.04466297938838022
99	Signaling By ERBB2 In Cancer R-HSA-1227990	0.017363978615388416	0.04466297938838022
100	Synthesis Of IP3 And IP4 In Cytosol R-HSA-1855204	0.01805268161758667	0.04466297938838022