Genomic signatures of past and present chromosomal instability in the evolution of Barrett's esophagus to esophageal adenocarcinoma

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Abstract:

The progression of precancerous lesions to malignancy is often accompanied by increasing complexity of chromosomal alterations but how these alterations arise is poorly understood. Here we performed haplotype-specific analysis of chromosomal copy-number evolution in the progression of Barrett's esophagus (BE) to esophageal adenocarcinoma (EAC) on multiregional whole-genome sequencing data of BE with dysplasia and microscopic EAC foci. We identified distinct patterns of copy-number evolution indicating multigenerational chromosomal instability that is initiated by cell division errors but propagated only after p53 loss. While abnormal mitosis, including whole-genome duplication, underlies chromosomal copy-number changes, segmental alterations display signatures of successive breakage-fusion-bridge cycles and chromothripsis of unstable dicentric chromosomes. Our analysis elucidates how multigenerational chromosomal instability generates copy-number variation in BE cells, precipitates complex alterations including DNA amplifications, and promotes their independent clonal expansion and transformation. In particular, we suggest sloping copy-number variation as a signature of ongoing chromosomal instability that precedes copy-number complexity.

These findings suggest copy-number heterogeneity in advanced cancers originates from chromosomal instability in precancerous cells and such instability may be identified from the presence of sloping copy-number variation in bulk sequencing data.

Large-scale chromosomal rearrangements and copy-number alterations are prevalent in cancer and

generally attributed to genomic or chromosomal instability of cancer cells[1-3]. Although much is known

about the patterns of genomic rearrangements in fully formed cancers[4,5] and the biological mechanisms of

genome instability[6-8], little is understood about what mechanisms are active during cancer evolution and

how they generate complex cancer genomes.

Genomic analyses of normal tissues have revealed clonally expanded point mutations but not large

structural chromosomal aberrations[9,10]. Early-stage precancerous lesions also show significantly less

genome complexity than late-stage dysplasia[11-15] or cancer[4,16,17]. These observations have led to the

prevailing view that most chromosomal rearrangements arise late during cancer progression in an episodic

manner[18,19], in contrast to the gradual accumulation of short sequence variants (single-nucleotide

substitutions or short insertions/deletions)[20,21]. However, the apparently simple genomes of precancerous

lesions at the clonal level does not exclude genome instability or complexity at the cellular level. Cells with

unstable genomes will generate copy-number variation in the progeny[22,23], but such variation is invisible at

the population level due to counterbalancing of random copy-number gains and losses in single cells in the

absence of selection (i.e., neutral evolution). Genetic variation is further suppressed by positive selection

(e.g., for oncogene amplifications) or negative selection (against large DNA deletions or aneuploidy in

general[24]). Based on these considerations, we expect the footprint of genome instability in somatic genome

evolution to be most visible in small precancerous lesions with *in situ* clonal expansion of copy-number

variation generated by genome instability. This idea has led us to perform multiregional analysis of Barrett's

esophagus (BE)[25-27] to dissect the origin of genome complexity in esophageal adenocarcinoma (EAC).

BE is the only known precursor of EAC and estimated to be present in 60-90% of newly diagnosed

EAC cases[28]. In contrast to fully formed EACs with complex chromosomal changes[29], BE tissue samples

can contain lesions of different histopathological states with varying genomic complexity[30,31]. By analyzing

copy-number alterations in concurrent BE (both non-dysplastic and dysplastic) and early EAC (either

intramucosal or T1) lesions, we reveal copy-number heterogeneity in BE cells before transformation, relate

copy-number evolution patterns in BE cells to those derived from experimental models of chromosomal

instability[32-38], and provide mechanistic insight into the evolution of EAC genome complexity.

We find that both copy-number heterogeneity and complexity can predate the appearance of

cancers or dysplastic lesions and are present in both single BE cells and BE subclones with intact p53.

Importantly, p53 loss enables episodic but multigenerational genome evolution initiated by catastrophic

events such as whole genome duplication[32,33], chromothripsis[34-36], and dicentric chromosome formation[37,38]:

We provide evidence that both copy-number heterogeneity and complex copy-number gains in BE cells

reflect multigenerational genome or chromosome instability precipitated by these events. We further

demonstrate that ongoing chromosomal instability underlies both progressive DNA deletions in BE cells

that result in sloping copy-number variation, and distinct oncogenic amplifications in independently

transformed cancers within a single BE field. Together, these findings elucidate how genome instability

drives copy-number evolution to promote tumor progression.

Results

Copy-number heterogeneity suggests early onset of chromosomal instability in precancer BE cells

Endoscopic mucosal resection (EMR) is routinely performed in patients with dysplastic BE. In reviewing

more than 500 formalin-fixed, paraffin-embedded (FFPE) EMR samples, we identified 14 cases showing

unexpected microscopic foci of invasive cancers and one case (Patient 1) with an early cancer removed via

esophagectomy. All cancers were either intramucosal or T1 and all samples were collected before treatment.

Following independent pathologic re-review by two or more pathologists to confirm the diagnoses

(**Methods**), we delineated and performed laser capture microdissection (LCM) to isolate regions

corresponding to distinct histopathological states[27] (**Figure 1**), including non-intestinalized columnar

metaplasia (COLME), non-dysplastic BE (NDBE), BE indefinite for dysplasia (IND), BE with low-grade

dysplasia (LGD) or high-grade dysplasia (HGD), and intramucosal (IMEAC) or early EAC (**Extended**

Data Figure 1). We further isolated normal tissue from benign FFPE regions that was used as germline

reference.

Due to the limited quantity of FFPE DNA from small tissue sections and their lesser quality

compared to DNA from fresh or frozen cells, we first performed low-pass whole-genome sequencing

(WGS) at ~0.1x mean depth to select libraries with sufficient complexity and then performed deeper

sequencing ~20x. The final cohort consisted of 75 BE/EAC (21 COLME/NDBE/IND, 7 LGD, 23 HGD,

and 24 IM/EAC) and 15 reference samples from 15 patients (**Extended Data Table 1**). the variant calls

generated by standard tools had both high false positive and high false negative detection rates (**Methods).**

For single-nucleotide variants (both somatic and germline), short insertions/deletions, and rearrangements,

we performed joint variant detection on all samples from each patient to improve variant detection accuracy

(**Figure 1**). Although the joint analysis is sufficient to detect mutations shared by multiple samples, the

false negative detection of mutations in individual samples due to sequencing dropout still confounds

phylogenetic inference (**Methods**). To bypass this challenge, we focused on somatic copy-number

alterations (SCNA) for which better accuracy could be achieved.

We determined chromosome-specific DNA copy number and copy-number changepoints based on

haplotype-specific sequence coverage (**Methods, Supplementary Data**). Parental haplotypes were first

inferred by statistical phasing using a reference haplotype panel[39] and then refined based on allelic

imbalance across all samples from each patient. We used haplotype-specific sequence coverage to first

validate the estimated ploidies and clonal fractions of aneuploid BE/EAC clones and then calculate the

integer DNA copy number of parental chromosomes. The determination of long-range parental haplotype

both enabled phasing of SCNAs to parental chromosomes and ensured the accuracy of SCNA detection.

We further performed segmentation of haplotype-specific DNA copy number and used copy-number

changepoints to refine the list of rearrangements. For data presentation clarity, the copy-number plots in

the main and extended data figures only show data of the altered homolog, except where stated. The

haplotype-specific sequence coverage and copy number of both homologs are provided in **Supplementary**

Data.

We determined the phylogenetic tree of samples from each patient (**Figure 2**) based on haplotype-

specific copy-number alterations. SCNAs were first identified independently in each sample and then

assigned to phylogenetic branches based on their presence or absence in all samples. The branch length

(horizontal distance between nodes) approximately reflects the SCNA burden estimated using the number

of altered chromosomes. SCNAs on each branch (labelled in **Extended Data Figure 2)** are summarized in

Extended Data Table 2; SCNAs that affect esophageal cancer genes or identified more than once in the

current cohort are annotated in **Figure 2**. In all but two patients (13 and 14), we identified SCNAs in related

BE/EAC genomes affecting a single parental homolog but having distinct changepoints that indicate

branching evolution of ancestral chromosomes; these chromosomes are labelled with asterisks near the

inferred common ancestor. Whole-genome duplication (WGD) was inferred based on the number of

homologous chromosomes with more than one copy[40] and assigned to evolutionary branches based on the

WGD status of individual samples (**Methods**). For SCNAs on branches with WGD, their timing relative to

WGD was inferred based on the integer copy-number states. Finally, we confirmed the consistency between

SCNA-derived phylogenetic trees and genetic similarities estimated from somatic SNVs (**Extended Data**

Figure 2). The few instances of discrepancy are discussed in **Methods**.

The phylogenetic trees of EAC and precursor BE lesions show several recurrent patterns. First, bi-

allelic *TP53* inactivation is a truncal event of the evolutionary branches of cancer or high-grade BE lesions

(14/15 patients). By contrast, focal deletion near *FHIT* (a common fragile site) is often ancestral to all BE

and EAC lesions; bi-allelic inactivation of *CDKN2A* (a frequently inactivated tumor suppressor) can be

truncal to either cancer/HGD lesions (Patient 3,5,6,7) or NDBE/LGD lesions (Patient 2,8,9,11,14). Second,

evolutionary branches with the highest SCNA burdens are frequently associated with WGD, which is itself

also a frequent event (10/15 patients). Third, high-grade dysplastic BE lesions and cancer lesions from the

same patient often harbor distinct SCNA breakpoints on single parental chromosomes (13/15 patients) or

distinct regions of focal amplification (10/15 patients), indicating copy-number heterogeneity prior to the

emergence of aneuploid BE/EAC clones. Finally, we identified more than one early cancer lesion in five

patients (Patient 1,2,9,12,15): The distinct cancer foci from each patient often displayed significant genomic

divergence but were individually accompanied by precancerous lesions in close proximity (Patient

1,9,12,15) and/or showing more genomic similarity (Patients 2,9,12,15). The last observation strongly

suggests that the cancer foci had evolved independently from distinct BE cells within the same BE field,

i.e., independent malignant transformation.

The observation of significant SCNA diversity in BE and EAC subclones suggests highly dynamic

copy-number evolution in precancerous BE cells and predicts copy-number diversity at the single-cell level.

We directly tested this hypothesis by performing whole-genome sequencing analysis of 68 single cells

isolated from a patient with known HGD by endoscopic cytology brushing immediately before

radiofrequency ablation. We performed haplotype-specific copy-number analysis and phylogenetic

inference using the same strategy as for bulk samples (**Methods**). We identified 12 cells with aneuploid

genomes and 56 cells with near diploid genomes. Their phylogeny and selected examples of SCNAs in

single BE cells or subclones are shown in **Figure 3;** SCNAs in each cell are listed in **Extended Data Table**

3 and DNA copy-number plots of all cells are available in **Supplementary Data**. All the aneuploid cells

share biallelic *TP53* inactivation through a pathogenic R175H mutation and loss-of-heterozygosity

generated by 17p loss, but show significant heterogeneity of chromosomal copy-number changes. The onset

of genomic heterogeneity in precancer BE cells following bi-allelic *TP53* inactivation recapitulates the

pattern seen in bulk samples and provides direct evidence of dynamic precancer genome evolution driven

by chromosomal instability. We next discuss specific patterns of copy-number evolution and their

mechanistic implications.

***TP53* inactivation and the onset of genome instability initiates BE genome evolution**

We observed increasing SCNA burden with disease progression (**Figure 4A**,left; **Extended Data Fig. 3A**

and 3B), but this correlation is mostly attributed to *TP53* mutation status. Samples with *TP53* inactivation

show significantly higher SCNA burdens than samples without *TP53* inactivation (**Figure 4A**,middle;

Extended Data Fig. 3C). In particular, two NDBE samples (from Patient 6 and 15) and four LGD samples

(from Patient 6 and 7) with bi-allelic *TP53* inactivation show similar SCNA burdens as HGD and EAC

samples; by contrast, NDBE and LGD samples without *TP53* inactivation show significantly fewer SCNAs

(**Extended Data Fig. 3A**). These data and the contrasting SCNA burdens in single BE cells with and

without intact p53 (**Figure 3A**) both reinforce the association between p53 loss and SCNA evolution[11,31].

Prior analyses of ageing esophageal tissues[9,10] by bulk sequencing revealed uniparental disomy

(UPD), or copy-neutral loss of heterozygosity, as the only large segmental SCNA. Consistent with this

observation, we observed frequent UPDs in both single BE cells (**Extended Data Table 3**) and clones

(**Extended Data Table 4**) prior to p53 loss, but only sporadic segmental gains or losses in single BE cells

(**Figure 3C,D**) and almost none in BE clones. Remarkably, we identified UPDs on the 9p terminus with

varying boundaries in a subclone of 14 single BE cells (**Figure 3E** and **Supplementary Data**). As this

variation does not alter total DNA copy number, it can only be revealed by haplotype-resolved copy-number

analysis. The varying boundaries of terminal UPD in different cells (arrows in **Figure 3E**) bear an intriguing

similarity to our prior observation of varying terminal deletions attributed to ongoing breakage-fusion-

bridge cycles[38] (see **Extended Data Figure 7** that will be discussed later). The similarity between varying

terminal UPDs and varying terminal deletions suggests a plausible common origin from broken

chromosomes generated by breakage-fusion-bridge cycles[23], with deletions resulting from translocations

involving other broken ends and UPDs resulting from homology-dependent invasion of broken ends into

the intact homolog followed by a half crossover resolution[41] (**Extended Data Fig. 4**, top).

In contrast to the simple SCNA landscape in BE cells with intact p53 is the prevalence of arm-level

and complex SCNAs in BE cells and clones after p53 loss. Loss of p53 does not directly cause aneuploidy

or chromosomal instability in human cells[42], but abolishes p53-dependent arrest after DNA damage[43] or

prolonged mitosis[44]. The burst of SCNA complexity after p53 loss is therefore more reflective of an

increased frequency of SCNA clonal expansion than an increased rate of SCNA acquisition. Moreover, the

observation of sporadic large SCNAs, especially UPDs, in single BE cells with intact p53 indicates that BE

cells do acquire DNA breaks, but these breaks do not lead to complex copy-number alterations as seen in

BE cells or clones with inactive p53. We next focus on BE cells or clones with inactive p53 and provide

evidence supporting that the accumulation of SCNA complexity reflects multigenerational chromosomal

instability that is precipitated by sporadic cell division errors but only propagated after p53 inactivation.

Whole-genome duplication triggers rapid accumulation of arm-level copy-number changes

The most dramatic change in BE cells is whole-genome duplication (WGD). WGD is inferred to be a frequent event in many epithelial cancers[45,46] and thought to define a particular EAC evolution trajectory[31]. We inferred 15 WGD events in bulk BE/EAC lesions from 10/15 patients, including independent WGD occurrences in distinct HGD/EACs from Patient 1,3, and 4 (**Figure 2**). We further inferred two independent WGDs in single BE cells without presence of cancer (**Figure 3A**). These observations suggest that WGD may occur frequently during BE progression before the appearance of cancer.

Despite the prevalence of WGD in human cancers[45,46] and its tumor-promoting capacity[47,48], how WGD impacts tumorigenesis remains incompletely understood. One proposal is that tetraploidization (the event that causes WGD) can precipitate additional genome instability including multipolar cell division or chromosome missegregation[6,32,33] that leads to aneuploidy. Consistent with this model, we inferred that more SCNAs in BE/EAC genomes were acquired after WGD than before WGD (**Figure 4A**, right), and evolution branches with WGD acquisition had significantly higher SCNA burdens (30 events/branch) than non-WGD branches (pre-WGD: 7.5/branch; post-WGD: 8.8/branch) (**Figure 4B, Extended Data Table 2**). Moreover, a majority of post-WGD SCNAs are arm-level changes (302 out of 428 events) and dominated by losses (256) (**Figure 4C**), a pattern also seen in single aneuploid BE cells (**Figure 3A**).

The preponderance of chromosome losses after WGD has two implications. First, this pattern cannot be solely explained by increased rates of random chromosome missegregation[32] that generates reciprocal gain and loss in a pair of daughter cells. This pattern could reflect a lower fitness of cells with larger chromosome number due to more frequent mitotic delays and defects[46]. It could arise from multipolar cell divisions that generate three or more progeny cells with predominantly chromosome losses[33] (**Extended Data Fig. 5A**). Future work is needed to test these hypotheses. Second, extensive chromosome losses after WGD may significantly reduce the number of duplicated chromosomes and cause underestimation of WGD incidence in cancer development, especially in cancers with highly aneuploid genomes. Together, our analysis of arm-level SCNAs in BE cells both confirms WGD as a precursor to

aneuploidy[49-51] and highlights the diversity of copy-number outcomes[5] generated by post-WGD events

including multipolar cell division[33].

Segmental copy-number alterations display signatures of dicentric chromosome evolution

In contrast to the prevalence of post-WGD arm-level SCNAs, we inferred a similar number of segmental

SCNAs in BE/EAC genomes to have occurred prior to (135) and after WGD (126) in samples with WGD

acquisition. The fractions of segmental DNA loss and DNA gain are also comparable among pre-, post-,

and WGD branches (**Figure 4C**, right), although branches with WGD acquisition have a higher average

SCNA burden (5.9 events) than pre- (1.6) or post-WGD (2.1) branches. These observations indicate that

segmental SCNA acquisition is promoted by WGD but also occurs independent of WGD.

Segmental SCNAs in BE genomes further display two features of non-randomness. First, SCNA

breakpoints are often concentrated on a few chromosomes with complex deletions (chromothripsis) or

duplications. Second, distinct SCNAs in related BE/EAC genomes more frequently originate from a single

parental chromosome ('mono-allelic') than affect both parental chromosomes ('bi-allelic') (**Figure 4D** and

Extended Data Fig. 3E). Both features are consistent with one-off or successive SCNA acquisition on

individual unstable chromosomes instead of independent SCNA acquisition across the genome. The

connection between segmental SCNA acquisition and chromosomal instability is further supported by the

observation of larger fractions of deletions (allelic copy number = 0) or duplications (allelic copy number

$\geq$2 in non-WGD samples and $\geq$3 in WGD samples) in samples with inactive p53 than in samples with intact

p53 (**Figure 4E**). Finally, we recognized that many segmental SCNA patterns in BE/EAC genomes are

consistent with the outcomes of chromosomal instability from abnormal nuclear structures including

micronuclei[34] (**Extended Data Fig. 5B**) and chromosome bridges (**Extended Data Fig. 5C**)[38]. We sought

to use the genomic signatures of *in vitro* chromosomal instability to deconvolute segmental copy-number

complexity in BE/EAC genomes.

The most frequent SCNAs in BE/EAC genomes are gain or loss of large terminal (i.e., spanning a

telomere) or internal (with two non-telomeric breakpoints) segments; these alterations are consistent with

the outcomes of dicentric chromosome breakage (**Figure 5**). Dicentric chromosomes can result from either

end-to-end chromosome fusion or incomplete decatenation of sister chromatids[38] and lead to a 'bridge'

between daughter nuclei when the two centromeres segregate to different daughter nuclei. Although

dicentric chromosomes can be generated by a variety of mechanisms, the genomic consequences are

primarily determined by the formation and breakage of chromosome bridges[37,38]. Breakage of a single

dicentric chromosome ('chromatid-type' bridges) will generate reciprocal gain and loss of a telomeric

segment ('terminal' SCNAs) (**Figure 5A**). If both sister dicentric chromatids are part of the bridge

('chromosome-type' bridges), their breakage can give rise to large segmental gain or loss within a

chromosome arm, hereafter referred to as 'paracentric' SCNAs (**Figure 5B**). Both of these outcomes were

directly demonstrated in single-cell experiments[38] but originally described by McClintock (summarized in

Ref.[52]) We further observed large SCNAs spanning centromeres ('pericentric' SCNAs) that can result from

broken ring chromosomes (**Figure 5C**, first described by McClintock in Ref.[53]) or multicentric

chromosomes. The instances of terminal and large internal SCNAs in our BE/EAC cohort are summarized

in **Figure 5D** and listed in **Extended Data Table 5:Tab 1**. In total, these events account for ~50% of

segmental SCNAs.

Although chromosome bridge resolution provides a simple mechanism for single-copy gain or loss

of large segments, similar copy-number outcomes may be generated by other processes. For example,

terminal deletion or duplication could result from simple chromosomal translocations followed by whole-

chromosome losses or gains (**Extended Data Fig. 6A**). This model, however, produces an equal number

of terminal gains (including retentions) and losses, and cannot explain the disparity between terminal gains

and losses seen in most samples (**Extended Data Fig. 6B**). Moreover, as broken bridge chromosomes can

form new dicentrics and undergo breakage-fusion-bridge (BFB) cycles that generate a variety of compound

copy-number outcomes, the identification of these compound copy-number patterns in BE/EAC genomes

provides stronger evidence of chromosome bridges being involved in BE copy-number evolution.

The most common outcome of BFB cycles is the presence of DNA duplications near the

boundaries of large segmental deletions (**Figure 6A,B**) or large segmental gains. Instances of these patterns

in BE/EAC genomes are listed in **Extended Data Table 5:Tab 2** and also summarized in **Figure 5D**. The identification of interchromosomal rearrangements between both simple and compound SCNA breakpoints (**Figure 6A,B** and **Extended Data Figure 6C,D**) also suggests that these broken ends were generated simultaneously, most likely from the resolution of multichromosomal bridges as seen in experimental models of telomere crisis[37] or chromosome bridge resolution[38].

Successive DNA duplications at the broken ends of chromosomes can generate focal amplifications (**Figure 6C**, top). Remarkably, the amplification on 7q in IMEAC shares a common SCNA boundary with the terminal deletion in HGD. (The same pattern of reciprocal DNA retention and loss is also seen in 17q of these two clones.) This pattern of reciprocal DNA retention and deletion directly recapitulates the outcome of broken bridge chromosomes between daughter nuclei (**Figure 5A**) that is only visible by multiregional sequencing. Based on this observation, we inferred that the HGD and the IMEAC clones were independently derived from sibling cells each having inherited a broken piece of a dicentric Chr.7 with amplified DNA that was present in their common ancestor.

Besides DNA duplications at broken termini, BFB cycles can also generate progressive DNA losses from either sequential breakage or deficient replication of bridge chromatin[38]. As each new deletion erases the boundary of preceding deletions, progressive DNA losses can only be revealed in different progeny clones (**Extended Data Figure 7**) but not in a single clone. We observed 11 instances of terminal or paracentric SCNAs with distinct breakpoints in different BE/EAC lesions from the same patient that are consistent with progressive DNA losses (**Extended Data Table 6:Tab1**). One example of varying 4q-terminal losses (boundaries marked by black arrows) in five lesions from Patient 2 is shown in **Figure 6D**.

In summary, we identified frequent duplications or deletions of large terminal, paracentric, and pericentric segments in BE genomes and attributed them to the formation and breakage of dicentric chromosomes (**Figure 5**). This mechanistic association is further supported by the observation of (1) additional duplications or progressive DNA losses at SCNA boundaries (**Figure 6**) reflecting successive BFB cycles (**Extended Data Fig. 7**); and (2) interchromosomal translocations between SCNA boundaries indicating simultaneous generation of broken chromosome ends. In particular, the observation of reciprocal

DNA loss and gain in distinct BE/EAC clones from the same patient that directly recapitulate the outcome

of dicentric bridge resolution between daughter cells (**Figure 6C**) provides the most compelling evidence

of BFB cycles during BE evolution.

Contemporaneous chromothripsis and BFB cycles generate EAC copy-number complexity

Besides simple DNA loss and gain, dicentric chromosomes can also undergo DNA fragmentation[37,38] either

from chromosome bridge resolution or in micronuclei from chromosome missegregation. These processes

generate chromothripsis with distinct oscillating DNA copy number patterns. For chromothripsis from

bridge resolution, fragmentation of the bridge chromatin creates oscillating copy number in a fraction of

the chromosome arm that was in the bridge, and the region with oscillating copy number is usually adjacent

to the boundaries of large terminal or internal SCNAs corresponding to termini of broken bridge

chromosomes (**Extended Data Fig. 8A**). We inferred that 35 instances of chromothripsis were consistent

with this pattern (**Extended Data Table 7:Tab1**, 'direct' in Column N) and show representative examples

in **Extended Data Fig. 8B-D**. For chromothripsis resulting from fragmentation of dicentric chromosomes

partitioned into micronuclei, the oscillating copy-number pattern should span whole chromosome arms

("chromosome/arm") (**Extended Data Fig. 8E**). We inferred that 25 instances of chromothripsis were

consistent with this evolution sequence (**Extended Data Table 7:Tab1**, 'downstream' in Column N). The

second scenario is best demonstrated in the example shown in **Extended Data Fig. 8F**, where the three-

state oscillating copy-number pattern (CN=0,1,2) spanning both Chr.17q and 18p together with inter-

chromosomal rearrangements indicated chromothripsis of a dicentric translocated chromosome. We

additionally identified 40 instances of chromothripsis spanning entire chromosomes or arms that are

consistent with micronucleation and 7 instances of regional chromothripsis without a clear relationship to

large terminal/internal SCNAs.

We further analyzed DNA rearrangements related to chromothripsis but restricted this analysis to

ancestral chromothripsis shared by three or more samples for which joint rearrangement detection can

achieve good accuracy (see **Methods**). We identified two examples of chromothripsis involving sub-

chromosomal regions (including arms) from multiple chromosomes (**Extended Data Fig. 8F,G**) that are

consistent with multichromosomal bridge resolution. In two instances of chromothripsis, we further

identified clustered rearrangement breakpoints near single SCNA boundaries (**Extended Data Fig. 8D,G**)

that resemble the tandem-short-templates rearrangement pattern observed in chromothripsis from bridge

resolution[38] and micronucleation[34]. These rearrangement patterns provide additional evidence supporting

the connection between chromothripsis and chromosomal bridges or subsequent micronuclei.

The comparison of SCNAs in related BE/EAC genomes provides further evidence for BFB cycles

in BE genome evolution. In the example shown in **Figure 7A**, the ancestral paracentric deletion shared by

all three genomes (LGD2/HGD3/EAC) was followed by regional chromothripsis and BFB amplifications

near the centromeric break end in the LGD2 clone and a terminal duplication near the telomeric break end

in the EAC clone; both downstream alterations likely arose from secondary BFB cycles after the ancestral

paracentric deletion. In the example shown in **Figure 7B**, the (mostly) non-overlapping segments retained

by the HGD and IMEAC genomes is consistent with a random distribution of DNA fragments from a single

micronuclear chromosome into a pair of daughter cells[34]. Other examples of chromothripsis as one of the

branching outcomes of BFB cycles are listed in **Extended Data Table 6** and **Figure 6E**.

The examples in **Figure 7A** and **7B** illustrate how copy-number breakpoints with either identical

(**Figure 7A**, dotted line) or complementary (**Figure 7B**, dashed lines) DNA retention and loss in related

genomes can inform about the evolutionary sequence of the observed copy-number alterations. This is

further demonstrated in the Chr5 example in **Figure 7C**. The shared copy-number breakpoint (dotted line)

with complementary DNA retention and deletion in IMEAC2 and EAC1 indicates a reciprocal distribution

of broken chromosome fragments into their ancestors; the paracentric loss in IMEAC2 further suggests a

chromosome-type bridge breakage event (**Figure 5B**). Therefore, the chromothripsis alteration with three

oscillating copy-number states in EAC1 must have arisen downstream of the ancestral breakage event.

The combination of chromothripsis and successive DNA duplications in BFB cycles can explain

complex segmental gains and amplifications. Whereas simple BFB cycles generate duplications flanked by

large segmental deletions (**Figure 5D, Extended Data Fig. 8H**), BFB cycles following chromothripsis

generate segmental gains or amplifications with interspersed DNA deletions (**Extended Data Fig. 8I**).

Several copy-number patterns in Patient 1 indicate contemporaneous chromothripsis and BFB

amplifications (**Figure 7C**). On both Chr.1p and Chr.16p, the oscillation between DNA deletion and

amplification in EAC1 suggests an evolution sequence of ancestral chromothripsis followed by downstream

BFB amplifications; the same regions in IMEAC2 display terminal duplications (Chr.1p) and a simple

terminal deletion (Chr.16p). The presence of a shared copy-number breakpoint on Chr.1p and a common

region of terminal deletion on Chr.16p between the EAC1 and IMEAC2 genomes suggests that the distinct

copy-number patterns reflect divergent evolutionary outcomes of a single ancestral broken chromosome.

Interestingly, the amplified regions on 16p in the EAC1 genome do not contain known oncogenes but are

co-amplified with a region on 18q containing *GATA6*, a recurrently amplified EAC oncogene. By contrast,

the IMEAC2 genome harbors neither amplification but has more amplified *GATA4* on Chr.8p. Moreover,

the shared boundaries of amplified regions on 8p in both EAC1 and IMEAC2 indicates that the *GATA4*

amplification was ancestral to both genomes but underwent different downstream evolution. The distinct

GATA4 and *GATA6* amplifications in these two genomes, likely reflective of positive selection for their

combined expression[54], highlights how persistent chromosomal instability rapidly generates copy-number

heterogeneity and fuels the acquisition of oncogenic amplifications.

As DNA amplification is only one out of many possible outcomes of multigenerational copy-

number evolution (we operationally defined focally amplified regions to have allelic copy number ≥ 8 that

can be attained with at least three rounds of duplications), clonally fixated amplifications are likely

reflective of positive selection and expected to contain oncogenes. Among 45 focally amplified regions

each spanning one or multiple loci on a chromosome (**Extended Data Table 7:Tab2**), 24 encompass

putative oncogenes and 29 overlap with regions that are recurrently amplified in cancer. The significance

of focal amplification as a mechanism of oncogenic activation during EAC transformation[30,31] is further

supported by the observation of both recurrent amplifications of EAC oncogenes, including *ERBB2* on 17q

(5/15 patients) (**Extended Data Fig. 8H,I**) and *GATA6* on 18q (4/15 patients), and sporadic oncogene

amplifications that are exclusive to cancer lesions but not their precursors, including *IGF1R* (Patient 3),

MET (Patient 4), and *KRAS* (Patient 10).

In summary, we found that many complex segmental copy-number alterations in BE/EAC

genomes, including focal amplifications, can be deconvoluted into different evolution sequences of

sequence duplications generated by BFB cycles and chromothripsis from DNA fragmentation (**Figure 7D**).

Together with observations of terminal/internal SCNAs reflecting simple copy-number outcomes of BFB

cycles, these data provide *in vivo* evidence for the involvement of abnormal nuclear structures including

micronuclei[34-36] and chromosome bridges[37,38] in the generation of EAC genome complexity.

Chromosomal instability generates continuous copy-number variation prior to discrete changes

Our analysis of BE/EAC genomes reveals both copy-number complexity and copy-number heterogeneity

in BE subclones that indicate multigenerational evolution of unstable chromosomes. Importantly,

chromosomal instability first generates copy-number variation in single BE cells. We wondered whether

such instability in single BE cells can be discerned prior to copy-number heterogeneity or complexity in

BE subclones.

If chromosome breakage only generates reciprocal DNA retention and loss between sibling cells,

such changes are not visible at the clonal level as there is not net DNA gain or loss. However, we previously

demonstrated that chromosomes in both micronuclei and bridges undergo deficient DNA replication

leading to net DNA losses[34,38]. If broken chromosomes remain mitotically unstable for multiple generations,

successive under-replication of the broken termini can generate varying terminal losses in the progeny

population (**Figure 8A**) that lead to 'sloping' copy number variation (**Extended Data Figure 7**). We

identified sloping copy-number variation on three chromosomes in the HGD sample from Patient10 (**Figure**

8B). The constant DNA copy number of the intact homolog (gray) establishes that the sloping copy-number

pattern reflects genetic variation instead of technical variability (e.g., due to FFPE DNA degradation).

Moreover, the observation of clonal ('discrete') copy-number changes on both Chr.9 and Chr.11 in the

IMEAC genome within the same regions of sloping copy number in HGD suggests that the IMEAC

ancestor was a subclone of HGD. Remarkably, the IMEAC genome does not show clonal copy-number

381 alterations on 12q that would have been derived from an HGD subclone with varying 12q loss, but contains

382 a high-level amplification spanning *KRAS* on the 12p arm; the amplification was inferred to have originated

383 from the same parental chromosome with sloping copy number variation on the 12q-terminus in HGD. It

384 is tempting to speculate that the *KRAS* amplification had evolved from an unstable Chr12 missing the q-

385 terminus by chromothripsis and subsequent duplications.

386  To further explore the possibility that sloping copy-number variation in early-stage BE samples

387 precedes clonal SCNAs in late-stage BE subclones, we analyzed the sequencing data of longitudinal BE

388 samples released in a recent study[55] (**Extended Data Figure 9A**). We first confirmed the presence of large

389 segmental SCNAs in both non-dysplastic and dysplastic BE samples prior to transformation and the

390 presence of distinct copy-number alterations in aneuploid BE or early cancer clones indicating copy-number

391 evolution (**Extended Data Figure 9B and 10, Extended Data Table 8, Supplementary Data**). The

392 observation of extensive copy-number evolution in longitudinal BE samples provides orthogonal evidence

393 of persistent chromosomal instability in BE cells that complements the observation of widespread copy-

394 number heterogeneity in multifocal BE samples. We further identified sloping copy-number variation in 9

395 patients. (Due to the limited sequencing depth, this inference was based on total DNA sequence coverage

396 instead of haplotype-specific coverage.) In Patient 86, we observed sloping copy-number variation on the

397 1q arm in the NDBE sample indicating varying terminal gains (**Figure 8C**, top); the same region shows a

398 clonal terminal retention in a late-stage HGD sample (**Figure 8C**, middle). In contrast to the sloping DNA

399 copy number of 1p, the 1q arm contains a subclonal paracentric gain that may be related to the

400 chromothripsis at the same 1q-terminal region in another NDBE lesion (**Figure 8C**, bottom). Together, the

401 observations in both longitudinal and multifocal BE samples suggest ongoing evolution of unstable BE

402 genomes prior to the emergence of EAC clones. As sloping copy-number variation precedes clonal SCNAs,

403 it may ultimately serve as a prognostic marker of BE progression or ongoing genome instability.

405 **Discussion**

We here studied precancer genome evolution in a unique sample set of incipient esophageal

adenocarcinomas and adjacent Barrett's esophagus lesions by haplotype-specific copy-number analysis.

We identified recurrent copy-number evolutionary patterns related to both gross karyotype changes and

complex segmental alterations including focal amplifications that indicate continuous genome instability in

BE cells.

We find that arm-level copy-number changes often accumulate in episodic bursts and are consistent

with the outcome of whole-genome duplication (WGD) and downstream events including multipolar cell

division and micronucleation[32,33]. WGD is frequently followed by extensive chromosome losses, giving

rise to highly aneuploid genomes, but can also generate near complete genome duplication. For example,

the EAC genome in Patient 7 is a near complete duplication of the LGD2 genome (with odd copy-number

states on 4q, 5, and 9q indicating post-WGD losses); the D5 cell in the single-cell collection is close to a

complete duplication of the F12 cell (with odd copy-number states on 2p, 9q and post-WGD gains of 17q

and 18p). When and how duplicated genomes re-establish stable karyotypes *in vitro* and *in vivo* require

further investigation.

We find several patterns of segmental copy-number alterations in BE/EAC genomes that are

consistent with an origin from dicentric chromosome breakage and evolution[38]. These include simple

segmental copy-number gains and losses consistent with the outcome of a single BFB cycle (**Figure 5**),

compound copy-number gains consistent with successive BFB cycles (**Figure 6A-C**), and distinct copy-

number alterations to a single parental chromosome in related BE/EAC genomes that are consistent with

copy-number variation generated by multigenerational BFB cycles (**Figure 6C-E**). The mechanistic

association between BE/EAC genome complexity and BFB cycles is further supported by the presence of

regional or arm-level chromothripsis (**Figure 7A,C** and **Extended Data Fig. 8A-F**), interchromosomal

translocations (**Figure 6A,B, Extended Data Fig. 8F,G**), and tandem-short-templates rearrangements

(**Extended Data Fig. 8D,G**), all of which were previously identified *in vitro*[37,38]. Finally, the patterns of

progressive DNA deletions (**Figure 6D**) and sloping copy-number variation (**Figure 8B,C**) provide strong

evidence for ongoing BFB cycles[38] in BE cells. The sloping copy-number pattern is most simply explained

by the under-replication of a broken chromosome over multiple generations that generates a polyclonal

mixture of cells with varying DNA losses. This pattern of polyclonal copy-number variation may be

regarded as a signature of ongoing or 'present' genome instability that precedes clonal SCNAs that indicate

'past' genome instability (**Figure 8A**).

We observe nearly ubiquitous bi-allelic *TP53* inactivation preceding the emergence of aneuploid

BE cells or BE clones. This result reinforces prior observations in BE cells[50] or from comparative studies

of BEs and late EACs[11,30,31,56]. However, cells with intact p53 do occasionally acquire large copy-number

alterations. This is demonstrated by the observation of infrequent arm-level or large segmental SCNAs in

single BE cells (**Figure 3**) and even instances of chromothripsis in BE clones (e.g., on Chr9p in Patient 8

BE1-3, Patient 11 LGD, and Patient 6, all samples) inferred to have occurred prior to *TP53* inactivation. In

contrast to BE cells with intact p53, the most distinguishing features of p53-null BE cells include (1)

massive aneuploidy including whole-genome duplication; and (2) complex segmental gains (with copy-

number states above two) that require multiple generations of chromosome breakage and recombination.

This observation suggests that the dominant tumor suppressive mechanism of p53 may be the suppression

of cell proliferation after chromosome missegregation[44].

The abrogation of p53-dependent cell cycle arrest after chromosome missegregation has two

implications (**Figure 8D**). First, arm-level or large segmental SCNAs generated by chromosome

missegregation events are more likely to undergo clonal expansion and become visible at the clonal level.

Second, and more importantly, it allows single cell division errors such as whole-genome duplication or

chromosome bridge formation to precipitate multigenerational instability that both generates copy-number

heterogeneity and fuels the acquisition of oncogenic amplifications. Therefore, even without an apparent

increase in the rate of events that generate unstable chromosomes, p53 loss marks the onset of rapid

accumulation of copy-number heterogeneity and complexity that contrasts with continuous SNV

accumulation. This explains the significant differences between SCNAs in ageing esophagus or BEs with

intact p53 and in BEs with deficient p53. Interestingly, we observed a novel pattern of copy-number

variation in BE cells with intact p53 reflecting uniparental disomy (UPD) alterations with varying

boundaries (**Figure 3E**). How large segmental UPDs arise in mammalian cells is unknown. The similarity

of progressive DNA breakpoints in varying UPDs to those in progressive DNA losses (**Figure 6D**) suggests

that these two patterns may reflect different DNA repair outcomes of broken chromosomes generated by

successive BFB cycles (**Extended Data Fig. 4**). If this model were true, it further implies that cells with

intact p53 do tolerate certain types of chromosomal instability but raises the question of how p53 or other

selection factors impact the rearrangement outcomes of such instability.

The early onset of genome instability during BE progression revealed in our analysis challenges

the prevailing view that chromosomal aberrations are exclusive to advanced cancers or only arise late during

tumor development. Analyses of advanced tumors by either bulk[5] or single-cell[57] sequencing usually reveal

only truncal or late subclonal alterations, indicating relatively late divergence of different cancer subclones.

As late-stage cancers are often dominated by the most aggressive clones, analyses of late-stage cancers

cannot reveal copy-number heterogeneity in single cells prior to transformation. By contrast, genetic

diversity is more visible in precancerous lesions due to the lack of dominant clones. This explains the

observation of significant copy-number differences in multifocal BE clones (**Figure 2**), copy-number

evolution in longitudinal BE samples (**Extended Data Fig. 9,10**), and sloping copy-number variation in

single BE lesions (**Figure 8B,C**). Moreover, the generation of complex copy-number gains, including focal

amplifications, necessitates multigenerational chromosomal instability that invariably creates copy-number

heterogeneity (**Figures 3, 6, 7**). Therefore, complex DNA gains in EACs or dysplastic BEs can be regarded

as a signature of 'past' chromosomal instability in their ancestor cells.

Oncogenic amplifications are a hallmark of advanced EACs. Our analyses demonstrate that these

events are frequently present in both early EACs and dysplastic BEs with deficient p53 (**Figures 2** and **3**).

We further identified distinct oncogenic amplifications in different dysplastic BEs or early EACs from the

same patient (**Figure 2** and **7C**), some of which were associated with independently transformed EAC foci.

As independent EAC clones may grow into each other to form a single tumor mass or seed different

metastatic lesions, both intratumor and primary/metastasis oncogenic amplification heterogeneity[58] may be

the inherent outcome of chromosomal instability after p53 loss that could have been initiated in precancer

BE cells and persist after transformation.

Our model of chromosomal-instability driven copy-number evolution makes several predictions.

First, segmental copy-number complexity at the clonal level is preceded by copy-number heterogeneity at

the single cell level. This is demonstrated in our study (**Figure 3** and **8**) but should be further tested by

single-cell DNA sequencing of precancerous or ageing tissues. Second, p53 loss enables the accumulation

of copy-number heterogeneity in precancer lesions that may differ from late-stage cancers due to the lack

of clonal sweep. This prediction can be tested in other cancers with early p53 inactivation and precursor

conditions, including serous ovarian cancers[16], basal breast cancers, uterine serous endometrial cancers,

pancreatic cancers[59], and colitis-associated colorectal cancers[15]. Finally, our analysis of SCNAs in BE/EAC

genomes suggests a mechanism-based classification of copy-number patterns. Extending this analysis to

cancers both with and without *TP53* inactivation will generate new knowledge of tumor evolution dynamics

with both diagnostic and therapeutic implications.

Data availability: All sequencing data generated in the current study were uploaded to Genotypes and

Phenotypes (dbGaP) (accession phs002706) with controlled access according to the Protocol approved

by the Institutional Review Board of the Brigham and Women's Hospital. Third-party data that were re-

analyzed were obtained from the European Genome-phenome Archive (EGA) through data access

agreement approved by the International Cancer Genome Consortium. Processed DNA copy number data

and compiled copy-number plots are available at https://github.com/chunyangbao/NG_ESAD75.

Code availability: Usage of published or public bioinformatic packages is stated in Methods with

references to either the publications or the repositories of the software packages. All the algorithms and

bioinformatic pipelines implemented in this study are described in Methods; scripts and codes are uploaded

to https://github.com/chunyangbao/NG_ESAD75.

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Figure Legends

Figure 1: Overview of experimental design and bioinformatic analysis. Fifteen patients whose Barrett's
esophagus tissue samples presented early invasive esophageal adenocarcinomas (EAC) were
selected. After histological review, 75 samples of early cancer (EAC) and precancerous lesions,
including non-dysplastic Barrett's Esophagus (NDBE), low-grade dysplasia (LGD) and high-
grade dysplasia (HGD), were collected via laser capture microdissection and subjected to
whole-genome sequencing. We perform joint variant detection on samples from each patient
and then determine their phylogeny based on genetic alterations shared by two or more samples
(filled triangles). Based on the phylogeny, we then infer the timing and evolution of copy-
number alterations (both shared and private), including distinct copy-number changes on a
single parental chromosome in related BE/EAC genomes generated by branching evolution.

Figure 2: Phylogeny of early EAC and precursor BE lesions determined by haplotype-specific copy-
number alterations. Phylogenetic trees are grouped based on the timing of whole-genome
duplication (WGD, thick solid line) events. Samples are colored based on their histopathology
grading: non-dysplastic (blue), low-grade dysplasia (orange), high-grade dysplasia (red),
carcinoma (magenta). The branch length (horizontal distance between nodes) approximately
reflects the number of altered chromosomes. For a complete list of alterations along each
phylogenetic branch, see **Extended Data Table 2** and **Extended Data Figure 2**. Annotated
alterations include: (1) recurrent alterations or those affecting known EAC drivers; (2) focally
amplified regions or oncogenes (magenta); (3) chromosomes or chromosome arms (with
asterisks) with divergent copy-number alterations in more than one progeny clones. Note that
Patient 13 contained a splice-site mutation (c.375+5G>C) in *TP53* that was assessed to produce
truncated p53[60] and also reported to be a recurrent hospot in cancers in a recent study[61]. The
colors of annotated chromosomes reflect the complexity of copy-number alterations: simple
deletion/duplication, uniparental disomy, arm-level gain/loss (blue), large segmental (terminal
or internal) copy-number changes or their combinations (orange), complex copy-number
alterations (red), focal amplifications (magenta). For classification of copy-number alterations,
see **Extended Data Figure 4**.

Figure 3: Copy-number evolution in 56 near diploid and 12 aneuploid BE cells from a high-grade
dysplastic Barrett's esophagus determined by single-cell sequencing. **A**. Phylogenetic tree with
annotated haplotype-specific copy number alterations (blue for losses, red for gains). Open
circles represent single cells; large filled circles represent subclones of cells (with annotated
cell counts) with identical copy number; small filled circles represent inferred intermediate

states (gray for pre-WGD, black for post-WGD). Aneuploid cells are separated into two

branches each inferred to have undergone an independent whole-genome duplication (WGD)

event. **B-H**. Examples of copy-number alterations before (B-E) and after (F-H) p53

inactivation. Gray and black dots represent haplotype-specific DNA copy number of parental

chromosomes. **B**. Ancestral 3p uniparental disomy (UPD) shared by all but four cells. **C**.

Sporadic 3p terminal gain after 3p UPD in one cell. **D**. Large paracentric deletion on 1p and

UPD at the 1q-terminus shared by five cells. **E**. Progressive 9p UPD in a subclone of 14 cells.

Only four cells are shown, see **Supplementary Data** for the others. **F**. Terminal duplication

after terminal deletion on 9p shared by cell G1 and D11 that is consistent with two rounds of

breakage-fusion-bridge cycles. **G**. Chromothripsis of Chr.22q shared by cell C5, F2, and F7. **H**.

Focal amplification spanning the *ERBB2* gene on Chr.17 (~40Mb) in cell C5 and F7 (red

circles) that displays the signature copy-number pattern of breakage-fusion-bridge cycles. For a

detailed list of alterations in each cell, see **Extended Data Table 3**.

Figure 4: Landscape of somatic copy-number alterations (SCNA) in BE and EAC clones. **A**. Mean

SCNA burden in samples grouped by disease stage (*left*), *TP53* mutation status (*middle*), and

timing relative to whole-genome duplication (*right*). The SCNA burden is measured by the

total number of altered autosomes (both parental homologs, maximum 44) and subdivided into

local deletions or duplications (gray), uniparental disomies (light gray), arm-level SCNAs (dark

gray), and segmental SCNAs (black). In the middle panel, the 'intact' *TP53* group ("*TP53*")

only includes NDBE/LGD samples without detectable *TP53* alterations, but not HGD/EAC

samples. See **Extended Data Figure 3** for additional information including the SCNA burden

in each sample. **B**. SCNA burden along ancestral (having more than one progeny clone) and

terminal (only one progeny clone) phylogenetic branches. The bottom shows the *TP53*

mutation status and the relative timing to WGD of each branch. **C**. Total counts of arm-level

(left) and segmental (right) SCNAs (filled bars for gains, open bars for losses) in evolutionary

branches preceding, concurrent with, or after WGD. Segmental SCNAs only include large

internal/terminal SCNAs but not complex SCNAs that can generate both DNA gain and loss.

The significantly higher burden of arm-level SCNAs in WGD-concurrent branches than pre-

WGD branches ($p < 10^{-4}$, Mann-Whitney) that is dominated by chromosome losses ($p < 10^{-4}$,

two-sided Fisher's exact test) is consistent with episodic chromosome losses after

tetraploidization. WGD is also associated with a modest but significant increase of segmental

SCNA burden ($p = 0.01$, Mann-Whitney; WGD-concurrent vs pre-WGD) and of post-WGD

arm-level SCNAs relative to pre-WGD branches ($p = 0.01$, Mann-Whitney). These can be

67	explained by elevated rates of chromosome missegregation after tetraploidization that may also
68	lead to complex segmental changes (e.g., from micronucleation). **D**. Allelic distribution of
69	segmental SCNAs identified in all samples from each patient. Shown are the number of
70	chromosomes (Chrs.1-22 and X) with single SCNAs (open bars), multiple SCNAs on a single
71	parental homolog ('mono-allelic'), and multiple SCNAs affecting both homologs ('bi-allelic').
72	Mono-allelic and bi-allelic SCNAs with multiple breakpoints are further divided into
73	subcategories based on whether SCNA breakpoints are found in a single BE/EAC genome, or
74	in multiple related BE/EAC genomes. SCNAs (or SCNA breakpoints) concentrating on single
75	parental chromosomes (mono-allelic) is consistent with either single catastrophic events (e.g.,
76	chromothripsis) or successive SCNA acquisition on single unstable chromosomes, whereas
77	SCNAs affecting both parental chromosomes (bi-allelic) are consistent with independent
78	SCNA acquisition. **E**. Fraction of the germline genome at different copy-number states (from
79	100kb-level allelic copy number). Deletion (dark blue), subclonal deletion/loss (light blue),
80	subclonal gain (light red), or duplication (dark red). There is a marked increase in the fractions
81	of both deleted (CN = 0) and duplicated DNA (CN ≥ 2) in BE/EAC genomes with inactive p53
82	compared to BE genomes with intact p53. Samples with WGD also have a larger fraction of the
83	genome at the single-copy state reflecting DNA loss after WGD.

84	**Figure 5**: Segmental copy-number alterations in BE/EAC genomes that match the outcomes of dicentric
85	chromosome bridge resolution. **A-C.** (*Left*) Different types of dicentric chromosome breakage
86	and their copy-number outcomes: (A) terminal; (B) paracentric; or (C) pericentric segmental
87	copy number changes. The open and filled chromatids may be sister chromatids or different
88	chromosomes. Both A and B were demonstrated *in vitro* in Umbreit et al. (2020). The model
89	that pericentric copy-number changes may arise from broken dicentric ring chromosomes (C)
90	or multicentric chromosomes (not shown) has not been demonstrated *in vitro* but is plausible as
91	telomere crisis may lead to multiple critically shortened telomeres. Examples of ring
92	chromosomes (Umbreit et al., 2020) or rearrangements involving multiple chromosomes
93	(Maciejowski et al., 2015) were also observed in the progeny populations of cells that have
94	undergone telomere crisis or bridge induction. (*Right*) Examples from BE/EAC genomes that
95	recapitulate the copy-number outcomes of bridge resolution. The allelic copy-number plots
96	(25kb bins) show the DNA copy number of the altered chromosome; the intact homolog is not
97	shown. Examples of gain and loss in each group are unrelated. See **Downloadable**
98	**Supplementary Data** for the copy-number plots of both homologs in each sample. **D.**
99	Summary of terminal/internal SCNAs in BE/EAC genomes. The number of instances is shown

| 100 | next to the copy-number pattern generated by different copy-number outcomes of BFB cycles. |
| 101 | See **Extended Data Table 5** for the complete list. |

102	**Figure 6**: Segmental copy-number patterns consistent with multigenerational breakage-fusion-bridge
103	cycles. Arabic numbers represent different BFB outcomes that are also labelled in **Extended**
104	**Data Fig. 5D**. Schematic diagrams of altered chromosomes are drawn according to the
105	segmental DNA copy number. **A**. (*Top*) Terminal deletion -> terminal duplication; (*bottom*)
106	paracentric deletion -> two duplications near the centromeric break end. **B**. (*Top*) Pericentric
107	retention -> terminal duplication at the q-terminus; (*middle*) paracentric deletion -> whole-
108	chromosome duplication of the centromeric segment; (*bottom*) terminal gain or pericentric
109	deletion after whole-chromosome gain. Magenta lines represent translocations between broken
110	fragments. See **Extended Data Figure 6** for more examples. **C**. Complementary copy-number
111	gain and loss at a single breakpoint (dashed line) in HGD and IMEAC reflect two broken
112	pieces of a single dicentric chromosome. The focally amplified region on the telomeric end in
113	IMEAC is consistent with preceding BFB amplifications. **D**. A series of terminal deletions on
114	the same parental chromosome seen in five lesions from Patient 2. The proximal boundaries of
115	the subclonal DNA loss near the 4q-terminus in HGD2 and clonal DNA loss in IMEAC2
116	suggest that IMEAC2 may have evolved from a subclone in HGD2. See **Extended Data**
117	**Figure 7** for an example of the same pattern revealed in experimental BFB evolution. **E**.
118	Summary of SCNAs in related BE/EAC genomes reflecting divergent/branching BFB
119	outcomes. See **Downloadable Supplementary Data** for the copy-number plots of each
120	instance.

121	**Figure 7**: Complex SCNAs in BE/EAC genomes indicating successive chromothripsis and BFB cycles.
122	Arabic numbers represent different BFB outcomes that are also labelled in **Extended Data Fig.**
123	**5D**. **A**. Divergent chromothripsis (in LGD2) and terminal duplication (EAC) occurring
124	downstream of an ancestral paracentric deletion in Patient 6. The dotted line represents the
125	ancestral breakpoint shared by all three genomes; dashed lines represent private SCNA
126	breakpoints. **B**. Reciprocal distribution of Chr.14q in HGD and IMEAC lesions from Patient
127	11. The bottom shows an enlarged view of the outlined region (dashed box). Except for a small
128	segment near 30Mb, all the other segments retained in the IMEAC genome are lost from the
129	HGD genome. Dashed lines denote SCNA breakpoints with opposite retention and loss in the
130	two genomes. **C**. Five subchromosomal regions with distinct copy-number patterns in two
131	cancer lesions from Patient 1. For regions on 5p, 1p, and 8p, we infer the SCNAs evolved from
132	a single unstable ancestor chromosome based on shared SCNA breakpoints (dotted lines). For

16p, the SCNAs are related by a common region of terminal deletion with adjacent boundaries

(dashed lines). The amplified regions on 16p in EAC1 are joined to the amplified region on 18q

spanning *GATA6*. The order of chromothripsis and amplification is determined based on

whether the amplified regions are interrupted by deletions (indicating chromothripsis before

amplification) or peppered with DNA losses (indicating chromothripsis after amplification). **D**.

Summary of chromothripsis and DNA amplification instances grouped by copy-number

features and the inferred evolutionary sequences. The inference of chromothripsis arising either

directly from or downstream of dicentric chromosome breakage is based on the span of

oscillating copy-number pattern relative to entire chromosomes; instances with less certainty

are annotated accordingly ("possibly downstream" or "likely direct").

Figure 8: Chromosomal instability creates copy-number heterogeneity prior to copy-number complexity.

A. Successive BFB cycles can generate progressive DNA losses at the broken ends of

chromosomes resulting in a gradual attenuation (sloping) of DNA copy number towards either

telomeric (top) or centromeric (bottom) boundaries. Individual broken ends in single cells may

acquire terminal duplications that become visible after clonal expansion, but the population

average will accrue DNA loss due to deficient DNA replication. **B**. Sloping DNA copy number

on Chrs.9, 11, and 12 (black dots) in the HGD sample from Patient 10. The constant DNA copy

number of the other homolog is shown in gray. In the regions of sloping copy-number variation

on Chrs.9 and 11 in HGD, we observe clonal copy-number changepoints in IMEAC, suggesting

clonal expansion of a subclone/single cell in the HGD sample. **C**. BE copy-number evolution

revealed in longitudinal BE sequencing data published by Killcoyne et al. (2020). In this patient

(Patient 86), the NDBE sample at 0 month displays sloping (1p terminus) and subclonal (1q

terminus) copy-number variation. A subsequent HGD lesion (at 60 months) from the same

patient shows a (sub)clonal paracentric loss on 1p; another NDBE lesion (timing unspecified)

showed chromothripsis at the 1q-terminus in the same region of subclonal copy-number gain in

the NDBE lesion at 0 month. Both examples indicate copy-number heterogeneity. See

Extended Data Fig. 10 for additional examples. **D**. Evolutionary dynamics of local sequence

changes (single-nucleotide variants, short sequence deletions/duplications) and chromosomal

structural aberrations during esophageal cancer evolution. Prior to p53 loss, the suppression of

clonal expansion of chromosomal structural alterations implies that only alterations that do not

disrupt chromosomal instability (local sequence changes, focal deletions/duplications, or

uniparental disomies) are detectable at the clonal level. After p53 loss, there is a rapid increase

of SCNA burden per cell that is due to both clonal expansion of ancestral SCNAs and SCNA

accumulation during multigenerational evolution of unstable chromosomes, which generates

both copy-number heterogeneity and DNA duplications. Although the average mutational

burden per cell (of both local and structural alterations) and the total genetic diversity of the

tumor clone continue to increase during cell proliferation, the acquisition of cancer drivers can

cause clonal dominance or sweep that make minor subclones harder to detect by bulk or even

single-cell sequencing. Therefore, analyses of precancer lesions with limited clonal expansion

can reveal ancestral genetic heterogeneity that may be undetectable in advanced cancers.

Archival Search in Endoscopic Mucosal Resections (EMR)

Histologic review ← Identified 15 patients with
- T1 Esophageal AdenoCarcinoma (EAC) or
  IntraMucosal Esophageal AdenoCarcinoma (IMEAC)
- no prior therapy

▼ Sequential Laser Capture Microdissection (IM/EAC > HGD > LGD > NDBE)

Cut IMEAC	Cut 1st HGD (HGD1)	Cut 2nd HGD (HGD2)

▼ DNA library construction, quality assessment, whole-genome sequencing (75 samples/15 patients)

Somatic variant detection

DNA copy number

germline
M
P

shared
▼ ▲

HGD1
M ▼ del.
P

HGD2
M ▼
P

private
▽ △

IMEAC
amp.
M ▼
P
△

short sequence variants and rearrangements

germline
M
P

shared   shared
▼   ▼

HGD1
M
P
△

HGD2
M ▼   ▼
P
△

IMEAC
▽   ▼   ▼
M
P
△
private

Inference of phylogenetic relationship and order of genetic alterations

Preneoplastic clones
unrelated to cancer

Germline

Preneoplastic clones
distantly related to cancer

Preneoplastic clones
closely related to cancer

Cancer

❶ most ancestral alterations

❷ alterations shared between cancer
and closely related dysplasia

❸ private alterations in cancer

❶ earliest/truncal

❷ intermediate/ancestral

❸ late/private

FIGURE 3
Phylogeny of 68 single BE cells brushed from a HGD lesion

Selected examples of SCNAs in single BE cells

A

mean SCNA burden in each sample

disease stage

TP53 status

relative timing to whole-genome duplication

B

SCNA burden in each phylogenetic branch

ancestral branches

terminal/private branches

C

mean SCNA burden in pre-, WGD, and post-WGD branches

E

fraction of genome by copy-number states

D

allelic distribution of segmental SCNAs

# of chromosomes with segmental SCNAs

multiple SCNAs

mono-allelic   bi-allelic

FIGURE 5 Models of dicentric bridge resolution

Observations in esophageal cancers

- altered homolog only   (other homolog not shown)

A chromatid-type fusion

daughter(-)

daughter(+)

patient 2, EAC

terminal loss

(i)

chr2

patient 10, EAC

terminal gain or retention

(ii)

chr14

B chromosome-type fusion

daughter(-)

daughter(+)

paracentric loss   patient 4, EAC

(iii)

Chr12

paracentric gain/retention   patient 4, EAC

(iv)

chr1

C ring fusion

daughter(-)

daughter(+)

pericentric loss   patient 6, BE1

(v)

Chr5

pericentric gain/retention   patient 1, IMEAC2

(vi)

chr4

D

instances | instances | instances

losses

terminal loss — 53

+ terminal gain — 24

+ multiple gains — 6

large paracentric loss — 39

+ terminal gain — 7

— 5

+ multiple gains — 3

para/pericentric loss — 7

pericentric loss — 5

unaltered chromosome

gains

terminal gain — 40

terminal retention — 9

+ terminal gain — 3

large paracentric gain — 16

+ terminal gains — 2

para/pericentric gain — 3

pericentric gain/retention — 1

— 1

FIGURE 6

Compound copy-number outcomes of BFB cycles

A **Patient 2** IMEAC2

❶ terminal loss -> terminal gain

chr16

❷ paracentric loss + 2x terminal duplications

chr1

B **Patient 1** IMEAC2

❶ pericentric retention -> terminal duplication

chr4

paracentric loss

chr5

chr15

paracentric loss — terminal gain

Divergent/branching copy-number outcomes of BFB cycles

C Complementary copy-number outcomes of BFB cycles

Patient 4 IMEAC

❶ terminal loss -> terminal gain

❸ BFB amplification

HGD

chr7

D **Patient 2** Progressive terminal losses

HGD1/IMEAC3 — ancestral terminal loss

HGD2 — subclonal terminal loss

IMEAC2

IMEAC1

chr4

E

progressive losses from the telomeric end

Patient 2: chr4q
Patient 3: chr13q
Patient 5: chr1q
Patient 10: chr11p
Patient 15: chr4q (both homologs) chr7q

progressive losses from the centromeric end

Patient 5: chr6q
Patient 11: chr15q, chr17p
Patient 12: chr2q

complementary retention/loss

Patient 4: chr7q and chr17q

branching copy-number outcomes including chromothripsis

Patient 3: chr7q, chr18q
Patient 4: chr15q
Patient 6: chr2q, chr15q

Patient 4: chr6p, chrXq
Patient 11: chr6q

A chromothripsis arising downstream of BFB cycle

Patient 6

ancestral paracentric loss   HGD3

regional chromothripsis + amplification   5   LGD2

terminal gain   1   EAC

x 2

chr15

B chromothripsis creating reciprocal DNA retention and loss

Patient 11

HGD

IMEAC

chr14

C branching evolution leading to focal amplification

Patient 1

paracentric loss

IMEAC2

BFB amplification   3

MYCL

MTOR 5 regional chromothripsis -> amplification

terminal loss

terminal loss -> chromothripsis -> amplification 5

chr18 5

GATA4

GATA6 chr16

BFB amplification -> chromothripsis 5

paracentric gain -> chromothripsis 4

EAC1

chr5   chr1   chr16   chr18   chr8

D   Chromothripsis   DNA amplification

span   copy-number states   relationship to bridge resolution

regional (59)

2-state (17)   subclonal (2)   unrelated (7)   direct (22)

amp (13)   possibly downstream (4)

3-state (10)   >3 state (17)   likely direct (11)   downstream (15)

whole-arm (48)

2-state (13)   amp (7)   possibly downstream (2)   downstream (5)

likely direct (1)

3-state (14)   >3 state (14)   unrelated (40)

ecDNA(6)   chromothripsis -> BFB (19)

BFB (13)

BFB -> chromothripsis (5)   chromothripsis -> BFB -> chromothripsis (2)

FIGURE 8

A

1st generation   2nd generation   sloping SCNA   subclonal SCNA heterogeneity

loss

dicentric chromosome

deficient replication

gain

deficient replication

sloping SCNA

B

Sloping and discrete copy-number changes

Patient 10

• homolog with sloping copy number
• homolog with constant copy number

HGD

IMEAC

Chr9   Chr11   Chr12

C

sloping copy number   NDBE, 0 month   paracentric gain

paracentric loss   HGD, 60 month

NDBE, NA

terminal chromothripsis

Chr1

D

BE-to-EAC evolution

normal esophagus   **Barrett's esophagus**   **early cancer**   **advanced cancer**

intact p53   p53 loss   deficient p53

clonal
• sSNVs, INDELs
• focal SCNAs
• UPD

• SCNA heterogeneity
↓
• complex gains
↓
• DNA amplification

single cell
• large SCNAs
• single-copy gain and loss

sSNV burden per cell

oncogene amplification

SCNA burden per cell

single-generation chromosomal instability   multi-generation chromosomal instability

● non-dysplastic BE clones with intact p53
• single aneuploid BE cells
● p53-deficient BE clones
● dysplastic p53-deficient BE subclones
● transformed EAC clones with distinct oncogenic amplifications

Barrett's esophagus

Low grade dysplasia

High grade dysplasia

Small Intramucosal adenocarcinoma

Intramucosal adenocarcinoma
approaching fully invasive

Early adenocarcinoma
(small glad invading through muscularis mucosa)

Adenocarcinoma

FIGURE S2

FIGURE S3

A — Total SCNA burden in each sample

B, C, D — mean SCNA burden per sample

E — Allelic SCNA in each patient

FIGURE S4

Intact *TP53*

I. Do not generate unstable chromosomes

haplotype-specific DNA copy number • A • B

local — patient 6, LGD2 — chr5

patient 5, HGD1 — chr12

uniparental disomy — patient 7, BE2 — chr2

broken homolog

intact homolog

half crossover

Inactive *TP53*

II. Chromosome mis-segregation or abnormal mitosis

arm level — patient 2, IMEAC3 — chr9

patient 5, EAC1 — chr20

III. Simple SCNAs by dicentric chromosome breakage

telomere bound (terminal) — patient 2, IMEAC2 — chr2

patient 10, IMEAC1 — chr14

para-centric — patient 4, IMEAC1 — chr12

patient 4, IMEAC1 — chr1

peri-centric — patient 6, BE1 — chr5

patient 1, IMEAC2 — chr4

IV. Complex SCNAs from single-generation evolution

chromothripsis of a single chromatid

complex loss — patient 7, LGD1 — chr19

chromothripsis involving both sister chromatids

complex gain — patient 3, HGD1 — chr21

V. Complex SCNAs from multi-generational evolution

patient 6, HGD3 — chr10

VI. Focal amplification (multi-generation)

patient 13, IMEAC

ERBB2   *CEN17*

intra-chromosomal — chr17

patient 9, IMEAC1

FGFR2   *CEN10*

extra-chromosomal — chr10

A whole-genome duplication

4N(+/-)

bipolar

failed cytokinesis — endo-replication

8N

binuclear | mononuclear

4N

p53

multi-polar

p53

aneuploid (<4N)

B micronuclei — FIGURE S5 — chromothripsis

p53

daughter(-)

daughter(+)

C bridges

daughter(-)

daughter(+)

large SCNA + regional chromothripsis

D multi-generational breakage-fusion-bridge cycles

★ uncapped broken end   ↺ ↻ foldback rearrangements

broken chromatid

fusion + bridge

terminal loss

consecutive loss

arm loss → translocation

loss + gain ❶

gain + loss

terminal gain

consecutive gain ❷

BFB amplification

❸

❻

chromothripsis

chromothripsis

chromothripsis -> BFB amplification

❹ terminal loss + complex rearrangement

complex loss ❺

complex loss/gain

stabilization of broken ends

↷ translocation
⊃ telomere capping

❻ sister-chromatid chromothripsis

ring chromosome

extra-chromosomal amplicon

FIGURE S6

Sloping copy-number variation from in vitro BFB cycles

bulk average haplotype-specific DNA copy number

haplotype A DNA copy number (0-60Mb)

haplotype B DNA copy number (0-60Mb)

haplotype-specific DNA copy number in
selected single-cell subclones

A Fragmentation of a dicentric chromosome by bridge resolution

regional (D,E)

fragmentation in a bridge

B **Patient 3**

regional chromothripsis

HGD1

IMEAC

terminal loss

chr7

60 70 80 90 100 110 120 130 140 150 (Mb)

● homolog A   ● homolog B

C **Patient 1**

regional chromothripsis

IMEAC2/3

● homolog A
● homolog B

chr1

0 10 20 30 40 50 60 70 80 90 100 110 120 130 140 150 (Mb)

D **Patient 6**

EAC

chr7

60 70 80 90 100 110 120 130 140 150 (Mb)

E Fragmentation of a dicentric chromosome in a micronucleus

chromosome/arm (F,G)

fragmentation in a micronucleus

F **Patient 2**

HGD/IMEAC   terminal loss
-> inter-chromosomal translocation
  -> sister-chromatid chromotripsis

17q   17p   18q   18p   18p

Chr18   0 10 20 30 (Mb)

Chr17   0 10 20 30 40 50 60 70 80 (Mb)

G

chr12   chr8q   chr9p

H terminal loss + BFB amplification

Patient 13, HGD1

ERBB2 *CEN17*

paracentric loss + BFB amplification

Patient 12, IMEAC1/2

I chromothripsis (loss + gain) + BFB amplification

Patient 7, LGD2

Chr17   0 10 20 30 40 50 60 70 80 (Mb)

ERBB2

FGFR *CEN10*
IMEAC (intra & extra-chromosomal)

FGFR3

Chr10q   90 100 110 120 130 (Mb)

J **Patient 9**

MYC *CEN8*
(extra-chromosomal)

EAC

Chr8q   120 130 (Mb)

IMEAC

MYC

(intra & extra-chromosomal)

Chr8q   120 130 (Mb)

A

Large terminal and internal SCNAs

Patient 45 (non-progressor): NDBE (0 month)

terminal loss + duplication

paracentric loss

Patient 7: NDBE (0 month)

Patient 20: NDBE (12 months)

terminal gain

paracentric loss

B

Divergent segmental SCNAs in longitudinal BE/EACs

Patient 63:
NDBE (0 month)

NDBE (NA)

IMC (18 months)

Patient 86:
NDBE (0 month)

NDBE (42 months)

HGD (60 months)

HGD (84 months)

Patient 88:
NDBE (60 months)

IND (84 months)

HGD (96 months)

A Example of foldback rearrangements in a single cell that did not undergo breakage-fusion-bridge cycle

This cell contained a micronucleus that was induced by nocodazole block, but did not undergo BFB cycle. The cell was sequenced to 10x mean coverage.

B Example of foldback rearrangements in a single-cell derived subclone that is consistent with BFB cycle

The primary reason for which the foldback rearrangement results from a BFB cycle is because the terminal duplication is right next to a terminal deletion, but not because of the foldback rearrangement itself.

A

ring fusion

pericentric loss

patient 6, BE1

(v)

Chr5

pericentric gain/retention

patient 1, IMEAC2

(vi)

chr4

daughter(-)

daughter(+)

B

haplotype-specific DNA copy number in RPE-1 cells after telomere crisis

daughter A

daughter B

Chr18