

# Leukaemia Section

## Mini Review

### -Y / Y loss in leukemia

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#### Identity

**Note:** Indeed, it is a normal elderly phenomenon in men over 60 years, to loose the Y chromosome.

#### Clinics and pathology

##### Disease

-Y is frequently observed in myeloproliferative diseases (MPD), myelodysplastic syndromes (MDS), and acute non lymphocytic leukemias (ANLL), but rarely in lymphoproliferation.

##### Epidemiology

Frequency of Y loss cases in the control and patient populations:

- In the control population: 10.5% of the males as a whole, 0 to 2% before 60 years;
- In myeloid diseases: 9.5% of MDS male patients, 3.2% of ANLL male patients, and up to 10% of chronic myelogenous leukemia (CML) male patients.

Percentage of -Y cells:

- loss of the Y chromosome in 100% of the cells appears in about 20% of control cases who have lost their Y and about 30% of myeloid disease patients with a -Y karyotype; controls and MDS populations show comparable % values of missing Y cells;
- In ANLL and in MPD the percentages are significantly higher than in the control population; this may partly be due to the swiftness of the monoclonal proliferation.

Age:

- In CML and in ANLL with a t(8;21), Y loss occurs at a younger age than in the normal population.
- No significant difference was demonstrated between MDS patients and the control group in the unique study with statistical analysis.

#### Clinics

The functional significance of Y loss is at present unknown:

- Partial or complete reappearance of the Y chromosome has been described in 8 cases of leukemia remissions showing that this abnormality may be a neoplastic event.
- In CML, the occurrence of the Y loss does not indicate progression of the disease; it may be a sporadic event in both normal and CML populations in patients younger than 60 years.
- In ANLL with t(8;21), Y is lost in 61% of men; in some of these cases, Y loss is in association with other well known secondary abnormalities; Y loss mosaicism in t(8;21) cells is observed in about 18% of males; X chromosome is lost in 41% of females; loss of sex chromosome is not elderly related in this disease.

#### Cytology

No particular association.

#### Prognosis

No clear relation between Y loss and the prognosis; as the age and the disease have a specific prognostic value affecting the clinical course, it will be difficult to determine the prognostic significance of the Y loss per se.

#### Cytogenetics

##### Cytogenetics morphological

The constitutive heterochromatin of the Y chromosome is the "bodyguard" of the genome (1975).

Y loss may prevent other marrow cells from being involved in further karyotypic progression (1980).

The gene for the receptor of GM-CSF is located on the pseudoautosomal region of the Y chromosome (1992).

The Y chromosome contains a tumor suppressor gene (1994).

## Probes

All available probes for the Y chromosome.

## Additional anomalies

Y loss is generally considered as a secondary event, most often in association with t(9;22) in CML or with t(8;21) in M2 AML.

## Variants

As a sole event, the loss of an X chromosome in females, -X, is much less frequent than the loss of the Y chromosome in males, but it may also occur.

## Genes involved and proteins

### Note

Genes involved, if any, are unknown.

## To be noted

### Note

All data herein evaluated were extracted from bone marrow studies; there is a difference between the active marrow progenitor cells and the stimulated phytohemagglutinin lymphocyte cell population; in one study on one individual, the Y loss rate had been found lower in peripheral cells in culture than in the bone marrow cells.

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