

Case Report Section

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t(3;5)(q25;q35) as a sole anomaly in acute myeloid leukemia patient

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Clinics

Age and sex: 36 year s old female patient

Previous History: - no preleukemia;

- no previous malignant disease;
- no inborn condition of note.

Organomegaly:

- no hepatomegaly;
- no splenomegaly;
- no enlarged lymph nodes;
- no central nervous system involvement.

Blood

WBC: 1.9×10^9 /l; Hb: 10.0 g/dl; platelets: 41×10^9 /l;

blasts: 11%

Bone marrow: Hypercellular bone marrow, normal granulopoeisis depressed, blasts 31.6% (myelo 2.6%, metamyelo 2.8%, neutroph 6.8%, lymphocytes 37%, mono 0.2%, erythroblasts 19%). Blasts with moderate to lightly basophilic cytoplasm, azurophilic granules are present and occasional blasts contain Auer rods, 1-2 nucleoli are present.

Cytopathology classification

Cytology: Acute myeloid leukemia. Immunophenotype: Not available.

Rearranged Ig or Tcr: -

Pathology: -

Electron microscopy: -

Precise diagnosis: Acute myeloid leukemia, M2.

Survival

Date of diagnosis: (03-2007).

Treatment: Left for treatment abroad.

Complete remission was obtained. Comments: Not

known as the patient left for treatment abroad.

Treatment related death:

Relapse

Phenotype at relapse Status: Alive (03-2007); Survival: 1 month.

Karyotype

Sample: BM; Culture time: 24 h; Banding: G-band.

Results: 46,XY,t(3;5)(q25;q35)

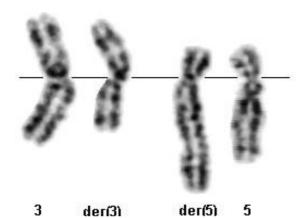
Other molecular cytogenetic techniques: Fluorescence in situ hybridisation (FISH), with LSI 5q EGR1 SO/D5S23 SG) and LSI BCL6 DC probes obtained from Vysis (Downers Grove IL, USA).

Other molecular cytogenetics results: Analysis with LSI 5q EGR1 SO/D5S23 SG probe revealed one red and green signal on normal chromosome 5 and on der(5) chromosome. Analysis with LSI BCL6 DC probe revealed one fusion signal on normal chromosome 3 and a fusion signal on der(5) distal to EGR1 locus confirming the t(3;5).

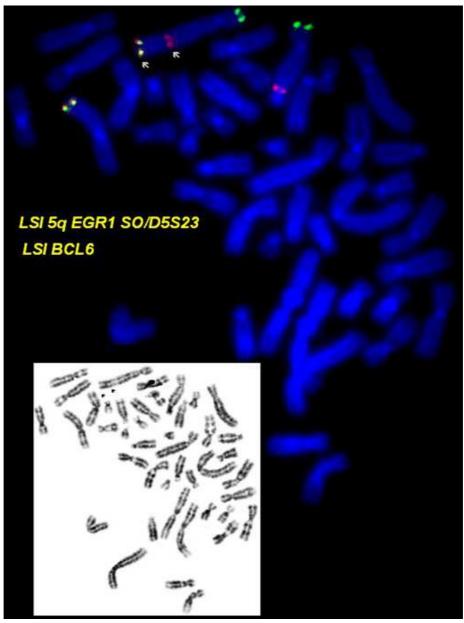
Comments

A 36-years old Kuwaiti female was referred to our hospital due to pancytopenia and hair loss. Initial investigation showed: WBC 1.9 x 10⁹l (neutr 35%, lymphocy 50%, mono 2%, eos 1%, myelo 1%), blasts 11%, NRBC 8/100. Based on laboratory findings the diagnosis of AML-M2 was made.

The chromosomal translocation t(3;5)(q25;q35) was observed only in individual cases. From the 5 described cases, 3 cases (2 male 1 female) were diagnosed with MDS and 2 cases with AML-M6 (1 male 1 female) suggesting the rearrangement with involvement of NPM/MLF1 genes is associated with myeloid malignancies.



Karyotype of the patient demonstrating the t(3;5)(q25;q35).



LSI BCL6 DC, Break Apart Rearrangement Probe exhibiting one red/green fusion on normal chromosome 3 and fusion signal on der(5) distal to EGR1. Hybridization with LSI 5q EGR1 SO/D5S23 SG probe on metaphase showing one red and green signal on normal and der(5) chromosome.

References

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