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Case Report Section

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Dic(1;15)(p11;p11) as a non-random abnormality in essential thrombocytemia

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Clinics

Age and sex 74 years old female patient.

Previous history No preleukemia; No previous malignancy; No inborn condition of note.

Organomegaly No hepatomegaly, no splenomegaly, no enlarged lymph nodes, no central nervous system involvement.

Blood

WBC: 16.4X 10⁹/l **HB:** 16.3g/dl **Platelets:** 872X 10⁹/l **Blasts:** 0%

Cyto-Pathology Classification

Cytology: -Immunophenotype: -Rearranged Ig Tcr: -Pathology: MPD Electron microscopy: -Diagnosis: Essential Thrombocytemia

Survival

Date of diagnosis: 03-1997 Treatment: Hydroxyurea Complete remission: no Treatment related death: no Relapse: no Status: Death. Last follow up: 02-2008 Survival: 131 months

Karyotype

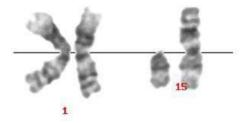
Sample: Bone marrow Culture time: 48h Banding: GTG Results 46,XX,[3]/46,XX,-15,+dic(1;15)(p11;p11)[10] Karyotype at Relapse: NA Other molecular cytogenetics technics: NA

Other Molecular Studies

Technics: NA

Other Findings

Note: NA



Karyotype at diagnosis presenting the dic(1;15)(p11;p11) as sole abnormality.

Comments

This is an additional MPD case presenting this recurrent abnormality, with 11 years survival. However the death is not related to the disease (cardiac failure) in this case.

This article should be referenced as such:

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