

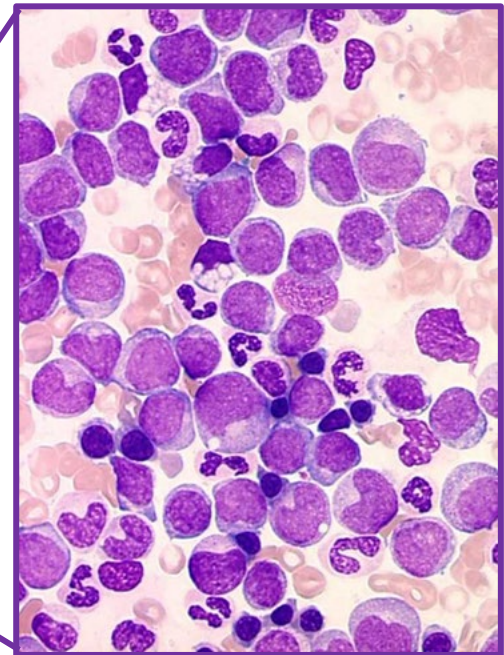
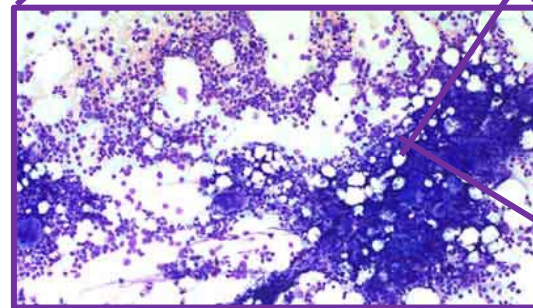
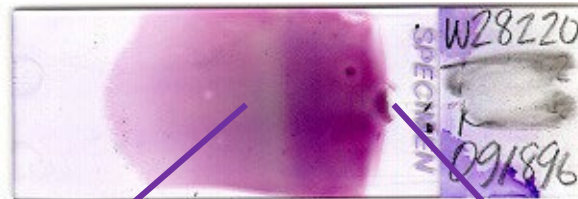
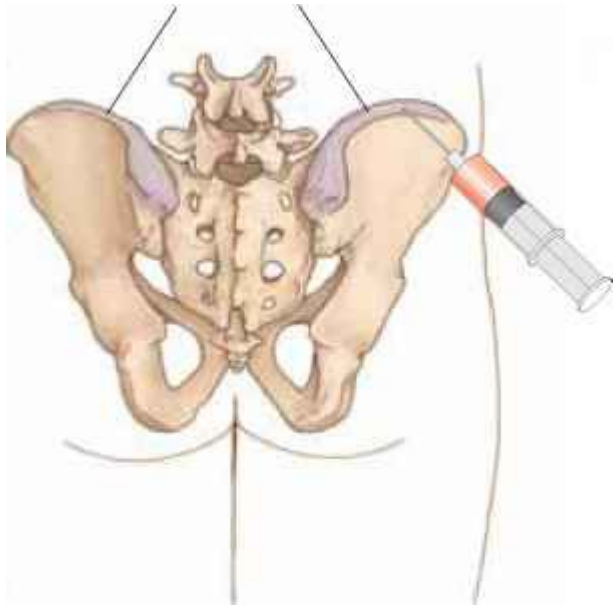


Acute Leukemie



1. Update nieuwe criteria bij de diagnosen (MDS en) acute leukemie.
2. Identificeren van blastaire kenmerken passende bij APL (AML-M3).
3. Moleculaire diagnostiek met de microscoop!

Cytologie / morfologie is de hoeksteen van de diagnostiek van acute leukemie.



Gebruik morfologie voor diagnose en classificatie



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Tellen van 500 cellen

% blasten versus alle kernhoudende cellen

cytochemie

myeloperoxydase (MPO) of Sudan black B kleuring (SBB)

non-specifieke esterase (NSE) reactie

myelodysplasie

% binnen cellijn

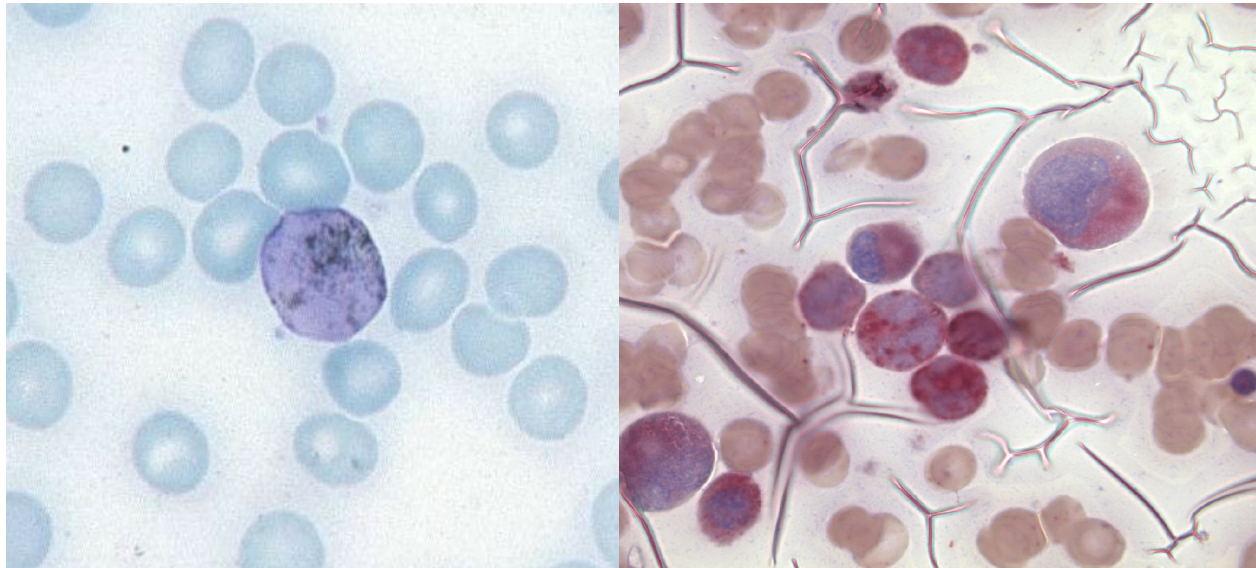
multi-lineage / uni-lineage

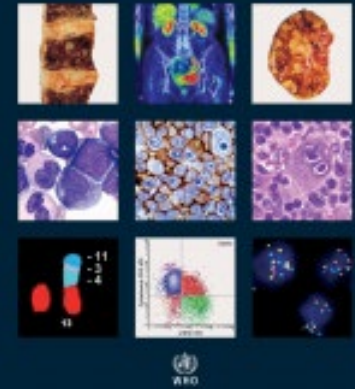
ijzerkleuring

ring sideroblasten

myeloperoxydase reactie of Sudan black reaction is positief in myeloïde cellen (sterk) en monocyten (zwak)

non-specifieke esterase reactie is positief in monocyttaire cellen (diffuus in cytoplasma)





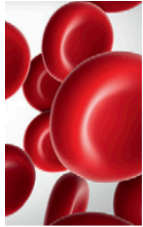
Leukemia

REVIEW ARTICLE OPEN

The 5th edition of the World Health Organization Classification of Haematolymphoid Tumours: Myeloid and Histiocytic/Dendritic Neoplasms

Joseph D. Khoury ¹✉, Eric Solary ²✉, Oussama Ablal³, Yasmine Akkari ⁴, Rita Alaggio⁵, Jane F. Apperley ⁶, Rafael Bejar ⁷, Emilio Berti⁸, Lambert Busque ⁹, John K. C. Chan¹⁰, Weina Chen ¹¹, Xueyan Chen¹², Wee-Joo Chng¹³, John K. Choi ¹⁴, Isabel Colmenero ¹⁵, Sarah E. Coupland¹⁶, Nicholas C. P. Cross ¹⁷, Daphne De Jong¹⁸, M. Tarek Elghetany¹⁹, Emiko Takahashi ²⁰, Jean-Francois Emile ²¹, Judith Ferry²², Linda Fogelstrand²³, Michaela Fontenay²⁴, Ulrich Germing²⁵, Sumeet Gujral²⁶, Torsten Haferlach ²⁷, Claire Harrison²⁸, Jennelle C. Hodge²⁹, Shimin Hu ¹, Joop H. Jansen³⁰, Rashmi Kanagal-Shamanna ¹, Hagop M. Kantarjian ³¹, Christian P. Kratz ³², Xiao-Qiu Li³³, Megan S. Lim³⁴, Keith Loeb³⁵, Sanam Loghavi ¹, Andrea Marcogliese¹⁹, Soheil Meshinchi³⁶, Phillip Michaels³⁷, Kikkeri N. Naresh ³⁵, Yasodha Natkunam ³⁸, Reza Nejati³⁹, German Ott⁴⁰, Eric Padron ⁴¹, Keyur P. Patel¹, Nikhil Patkar ⁴², Jennifer Picarsic⁴³, Uwe Platzbecker ⁴⁴, Irene Roberts⁴⁵, Anna Schuh ⁴⁶, William Sewell⁴⁷, Reiner Siebert⁴⁸, Prashant Tembhare ⁴², Jeffrey Tyner ⁴⁹, Srdan Verstovsek ³¹, Wei Wang ¹, Brent Wood⁵⁰, Wenbin Xiao ⁵¹, Cecilia Yeung ³⁵ and Andreas Hochhaus ⁵²✉

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Special Report



International Consensus Classification of Myeloid Neoplasms and Acute Leukemias: integrating morphologic, clinical, and genomic data

Daniel A. Arber,¹ Attilio Orzi,² Robert P. Hasserjian,³ Michael J. Borowitz,⁴ Katherine R. Calvo,⁵ Hans-Michael Kvasnicka,⁶ Sa A. Wang,⁷ Adam Bagg,⁸ Tiziano Barbui,⁹ Susan Branford,¹⁰ Carlos E. Bueso-Ramos,⁷ Jorge E. Cortes,¹¹ Paola Dal Cin,¹² Courtney D. DiNardo,⁷ Hervé Dombret,¹³ Eric J. Duncavage,¹⁴ Benjamin L. Ebert,¹⁵ Elihu H. Estey,¹⁶ Fabio Facchetti,¹⁷ Kathryn Foucar,¹⁸ Naseema Gangat,¹⁹ Umberto Gianelli,²⁰ Lucy A. Godley,¹ Nicola Gökbüget,²¹ Jason Gotlib,²² Eva Hellström-Lindberg,²³ Gabriela S. Hobbs,³ Ronald Hoffman,²⁴ Elias J. Jabbour,⁷ Jean-Jacques Kiladjian,¹³ Richard A. Larson,¹ Michelle M. Le Beau,¹ Mignon L.-C. Loh,²⁵ Bob Löwenberg,²⁶ Elizabeth Macintyre,²⁷ Luca Malcovati,²⁸ Charles G. Mullighan,²⁹ Charlotte Niemeyer,³⁰ Olatoyosi M. Odenike,¹ Seishi Ogawa,³¹ Alberto Orfao,³² Elli Papaemmanuil,³³ Francesco Passamonti,²⁸ Kimmo Porkka,³⁴ Ching-Hon Pui,²⁹ Jerald P. Radich,³⁵ Andreas Reiter,³⁶ Maria Rozman,³⁷ Martina Rudelius,³⁸ Michael R. Savona,³⁹ Charles A. Schiffer,⁴⁰ Annette Schmitt-Graeff,⁴¹ Akiko Shimamura,^{15,42} Jorge Sierra,⁴³ Wendy A. Stock,¹ Richard M. Stone,¹⁵ Martin S. Tallman,⁴⁴ Jürgen Thiele,⁴⁵ Hwei-Fang Tien,⁴⁶ Alexandar Tzankov,⁴⁷ Alessandro M. Vannucchi,⁴⁸ Paresh Vyas,⁴⁹ Andrew H. Wei,⁵⁰ Olga K. Weinberg,⁵¹ Agnieszka Wierzbowska,⁵² Mario Cazzola,²⁸ Hartmut Döhner,⁵³ and Ayalew Tefferi¹⁹

AML gedefinieerd door differentiatie



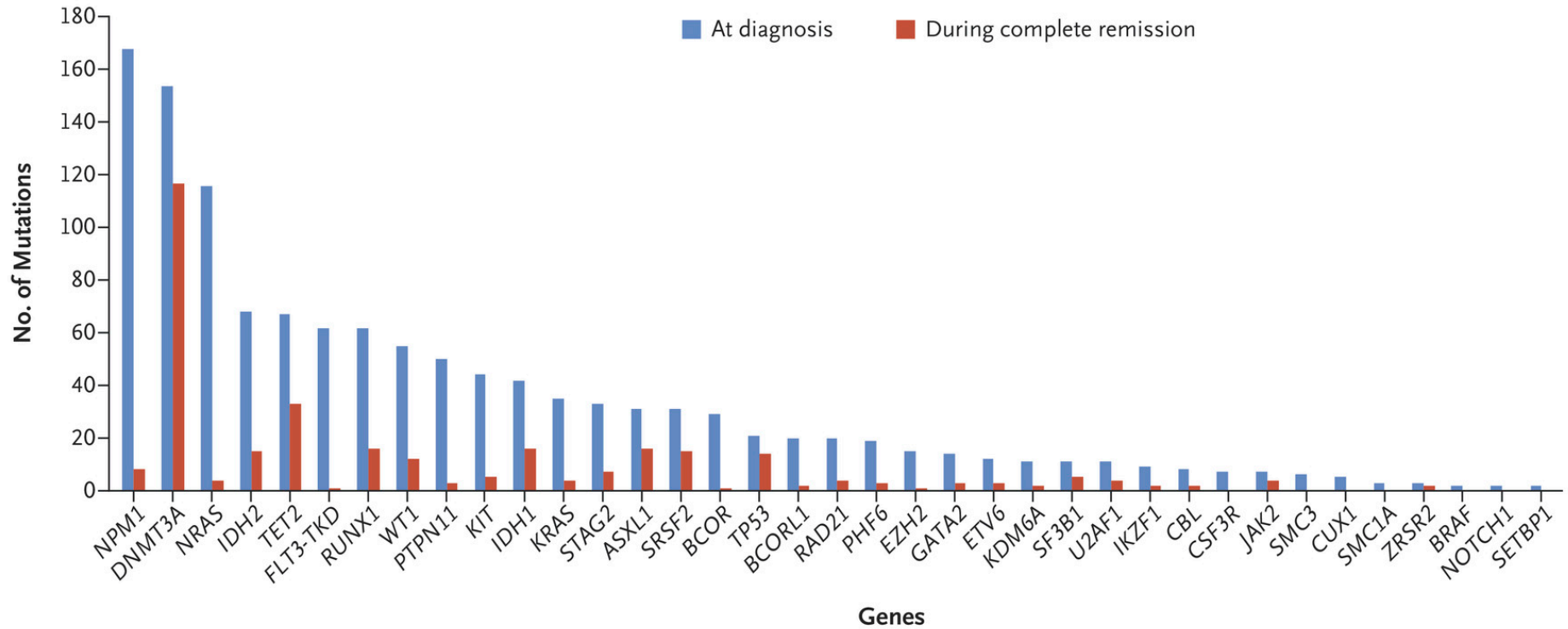
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AML met minimale differentiatie	MPO- of SBB-expressie van twee of meer van myeloid geassocieerde antigenen zoals CD13, CD33, CD117
AML zonder uitrijping	myeloïde uitrijping < 10%, <u>≥ 3% blasten positief voor MPO of SBB</u> , expressie van twee of meer van myeloid geassocieerde antigenen zoals MPO, CD13, CD33, CD117
AML met uitrijping	myeloïde uitrijping > 10%, <u>≥ 3% blasten positief voor MPO of SBB</u> , expressie van twee of meer van myeloid geassocieerde antigenen zoals MPO, CD13, CD33, CD117, < 20% van de cellen is monocytair
acute myelomonocyttaire leukemie	monocyttaire uitrijping <u>≥ 20%</u> , myelocyttaire uitrijping <u>≥ 20%</u> , <u>≥ 3% blasten positief voor MPO</u>
Acute monocyttaire leukemie	Monoblasten, promonocyten en/of monocyten <u>≥ 80%</u> , myelocyttaire uitrijping <u>< 20%</u> . <u>Blasten en promonocyten hebben expressie van tenminste twee monocyttaire markers zoals CD11c, CD14, CD36, CD64 of positiviteit voor NSE</u>
Acute erytroïde leukemie	<u>≥ 80% kernhoudende erythrocytaire cellen met ≥ 30% proerytroblasten</u> (< 80% kernhoudende erythrocytaire cellen sluit deze AML niet altijd uit)
acute megakaryoblasten leukemie	MPO- of SBB-expressie van een of meer van de markers CD41, CD42b, CD61
acute basofiele leukemie	Blasten en onrijpe basofielen met metachromasie bij toluidine blauw kleuring, blasten zijn negatief voor MPO, SBB en NSE en geen sterke CD117 expressie ter uitsluiting van mestcelleukemie

AML is not *one* disease



A Detection of Mutations at Diagnosis and during Complete Remission





Uitzonderingen:

AML met veelvoorkomende genetische afwijkingen

Acute myeloid leukaemia with defining genetic abnormalities

Acute promyelocytic leukaemia with *PML::RARA* fusion

Acute myeloid leukaemia with *RUNX1::RUNX1T1* fusion

Acute myeloid leukaemia with *CBFB::MYH11* fusion

Acute myeloid leukaemia with *DEK::NUP214* fusion

Acute myeloid leukaemia with *RBM15::MRTFA* fusion

~~Acute myeloid leukaemia with *BCR::ABL1* fusion~~

Acute myeloid leukaemia with *KMT2A* rearrangement

Acute myeloid leukaemia with *MECOM* rearrangement

Acute myeloid leukaemia with *NUP98* rearrangement

Acute myeloid leukaemia with *NPM1* mutation

~~Acute myeloid leukaemia with *CEBPA* mutation~~

Acute myeloid leukaemia, myelodysplasia-related

Acute myeloid leukaemia with other defined genetic alterations

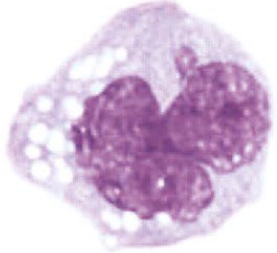

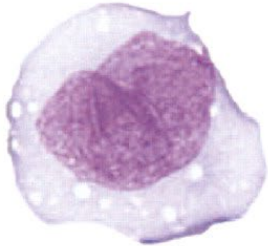
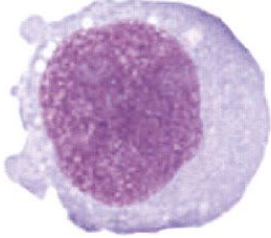

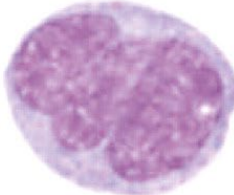

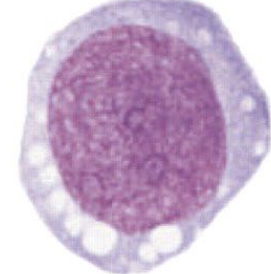
Acute leukemie $\geq 20\%$ blasten *van alle cellen*



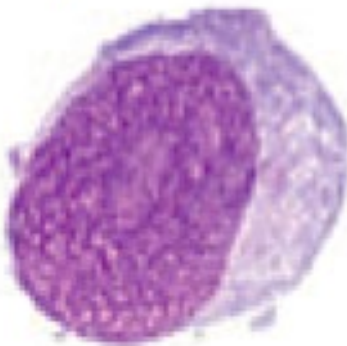



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Uitzonderingen:

AML, monocytair (monoblasten + promonocyten)

Monocyte	Immature	Promonocyte	Monoblast
			
			



Blasts		Promyelocyte	Abnormal promyelocyte
Agranular	Granular		
			
<ul style="list-style-type: none">• Basophilic cytoplasm• Fine chromatin• Nucleoli	<ul style="list-style-type: none">• Azurophilic granulation• Absence of Golgi zone	<ul style="list-style-type: none">• Azurophilic granulation+• Clearly visible Golgi zone	<ul style="list-style-type: none">• Azurophilic granulation+++



Uitzonderingen:

AML, erytroid bij $\geq 80\%$ erytroblasten
 met $\geq 30\%$ pro-erytroblasten
 en $\leq 20\%$ myeloblasten



Acute ongedifferentieerde leukemie (AUL)

MPAL (“mixed phenotype ambiguous lineage”)

met specifieke mutatie (b.v. *BCR::ABL1* of *KMT2A*)

MN post cytotoxische therapie (MN-pCT)



Myeloid

MPO of

≥2 van: NSE / CD11c / CD14 / CD64 / lysozym

B-lymfoid

CD19^{bright} met 1 van: CD79a / cyCD22 / CD10

CD19^{dim} met 2 van: CD79a / cyCD22 / CD10

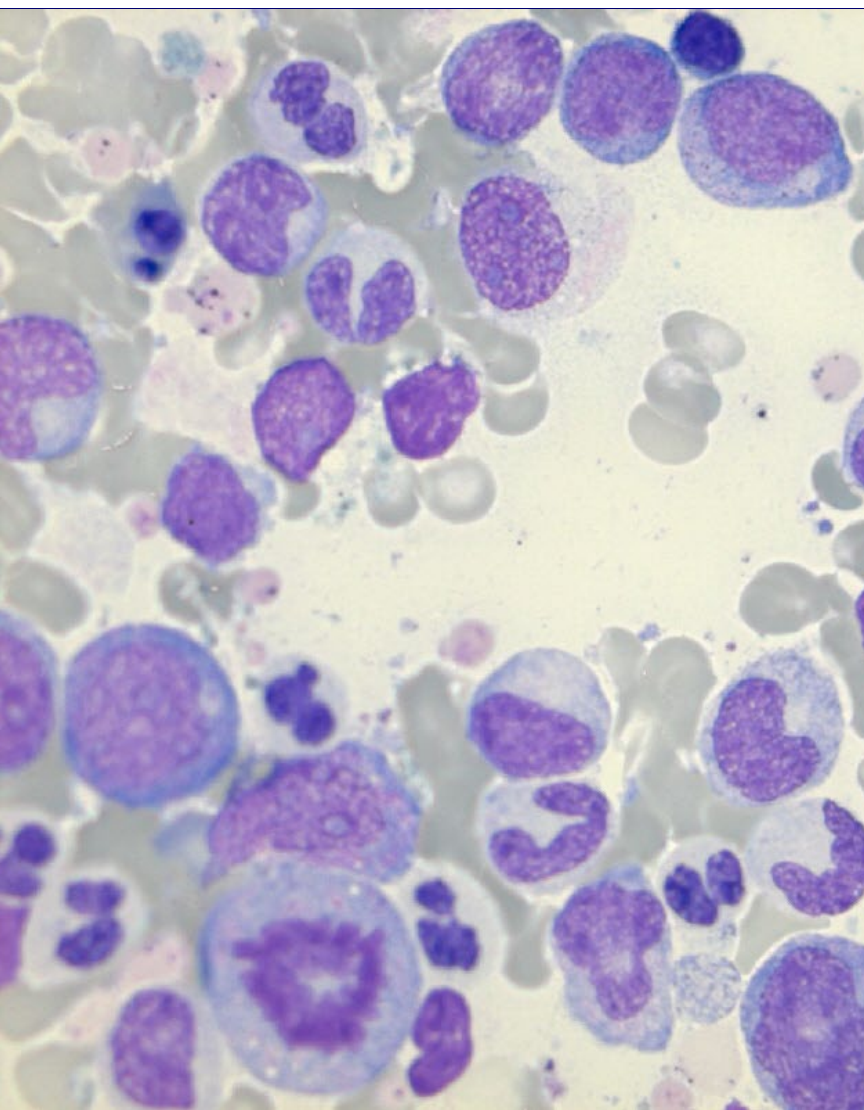
T-lymfoid

cyCD3^{bright} of mCD3

AML-MR (WHO) / AML-MR GM of CA (ICC) cellijn(en) met =>50% dysplasia en/of...



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Defining cytogenetic abnormalities

Complex karyotype (≥ 3 abnormalities)

5q deletion or loss of 5q due to unbalanced translocation

Monosomy 7, 7q deletion, or loss of 7q due to unbalanced translocation

11q deletion

12p deletion or loss of 12p due to unbalanced translocation

Monosomy 13 or 13q deletion

17p deletion or loss of 17p due to unbalanced translocation

Isochromosome 17q

idic(X)(q13)

Defining somatic mutations

ASXL1

ICC: RUNX1

BCOR

EZH2

SF3B1

SRSF2

STAG2

U2AF1

ZRSR2



B-LBL / ALL

BCR::ABL1

T-LBL / ALL

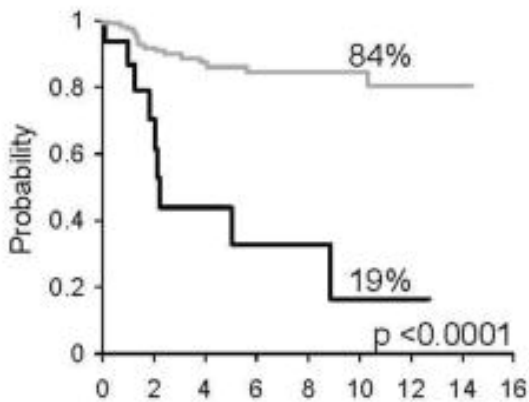
Early T-cell Precursor Lymphoblastic Leukemia

Early T-cell Precursor (ETP) ALL

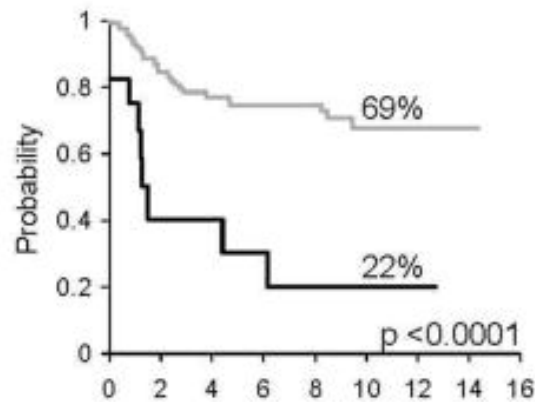


b Thymus Leukemia
T-ALL ETP-ALL

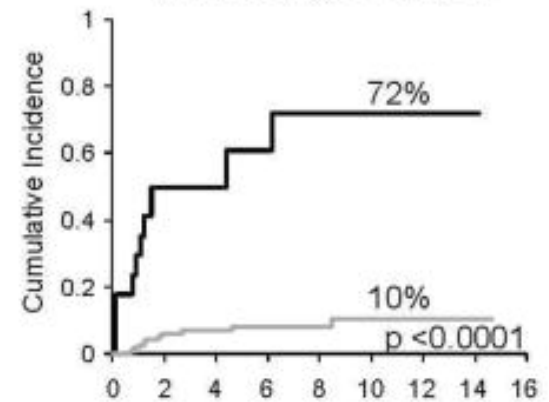
A Overall survival



B Event-free survival



C Remission failure/
hematologic relapse



At Risk:

	Years								
	0	2	4	6	8	10	12	14	16
Typical	122	113	82	64	50	34	15	7	
ETP	17	15	5	4	2	1	1	1	

	Years								
	0	2	4	6	8	10	12	14	16
Typical	122	108	75	59	46	29	14	7	
ETP	17	12	4	3	1	1	1	1	

	Years								
	0	2	4	6	8	10	12	14	16
Typical	122	108	75	59	46	29	14	7	
ETP	17	12	4	3	1	1	1	1	



Opwarmen voor het practicum...



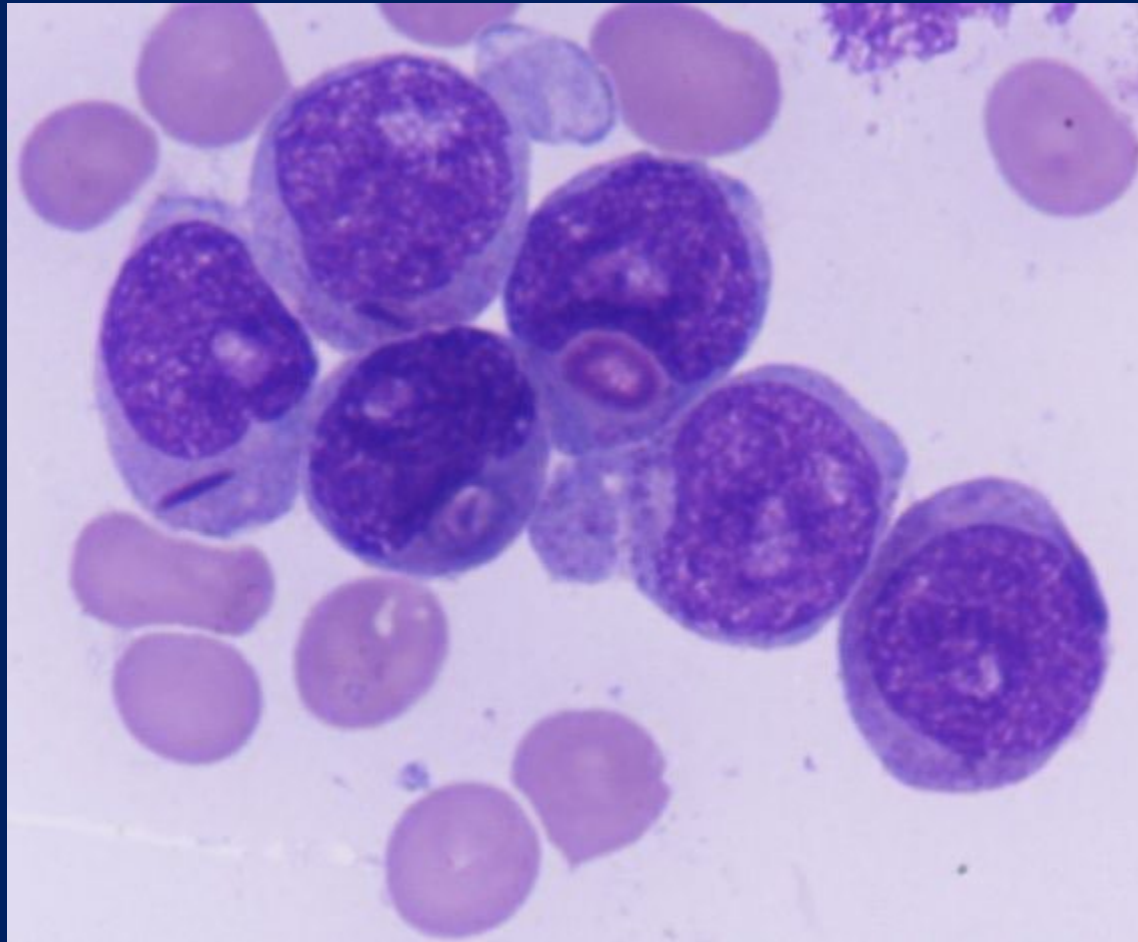
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AML met t(8;21)



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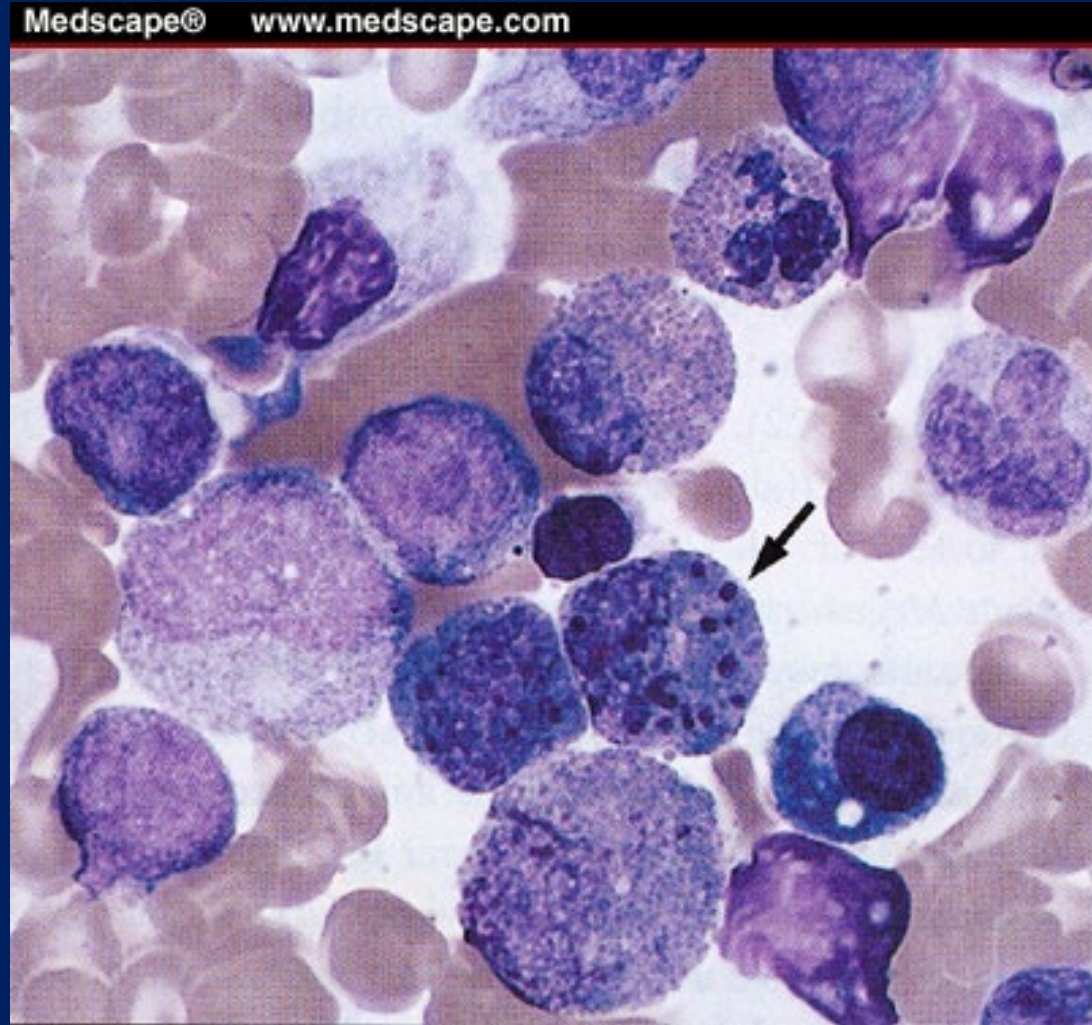
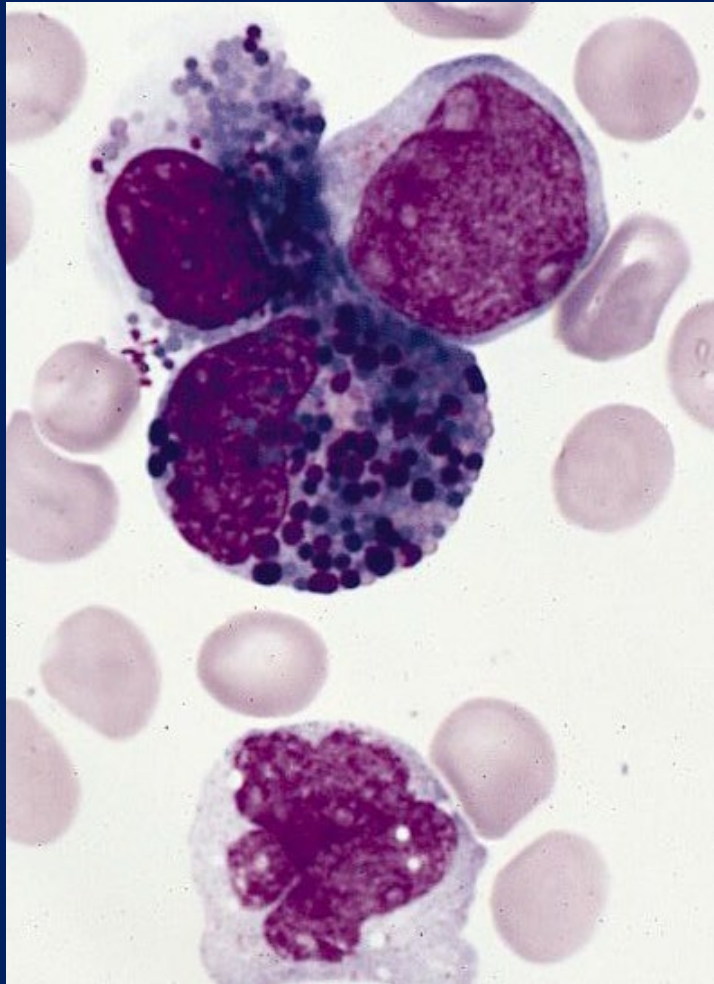


CD19
CD56

AML met inv(16) of t(16;16)



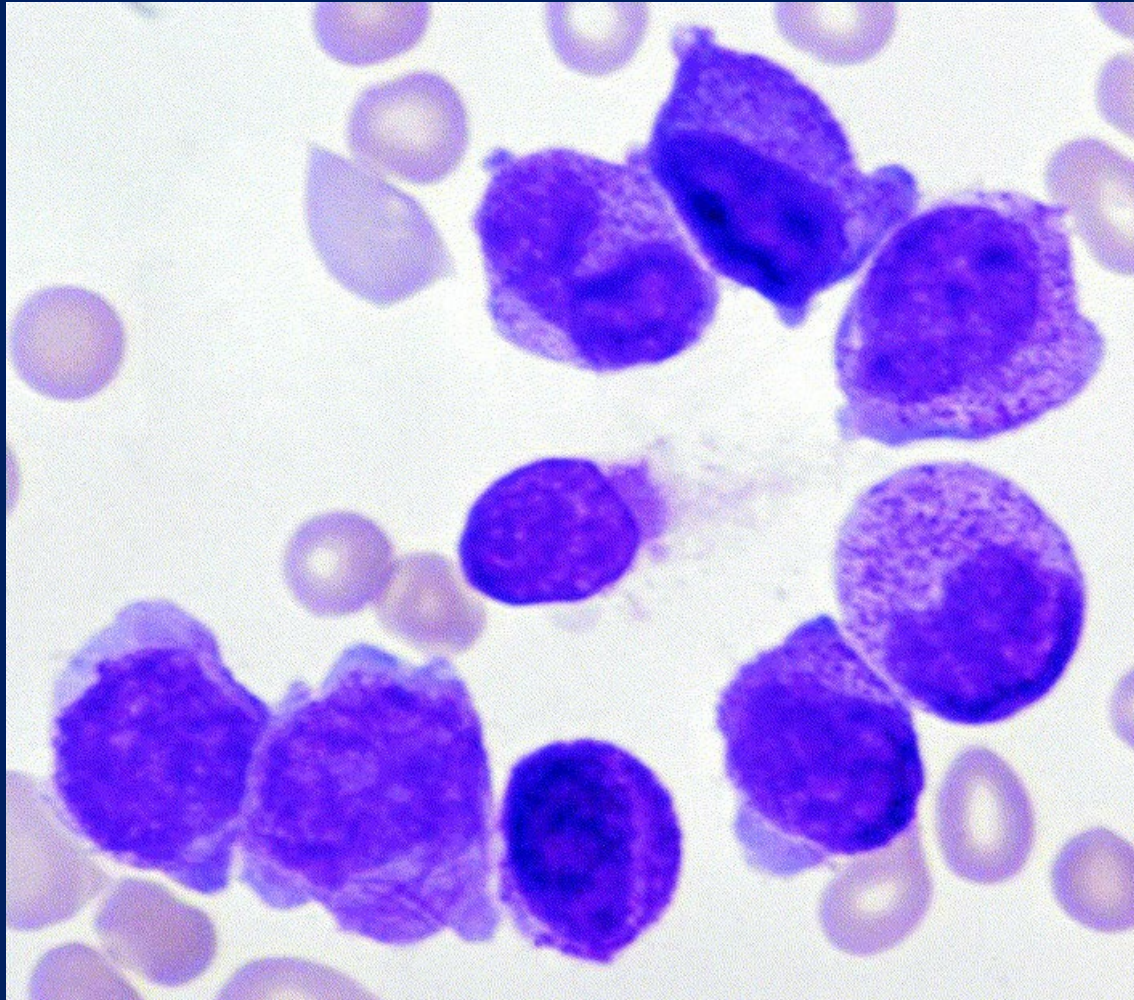
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AML met t(15;17)



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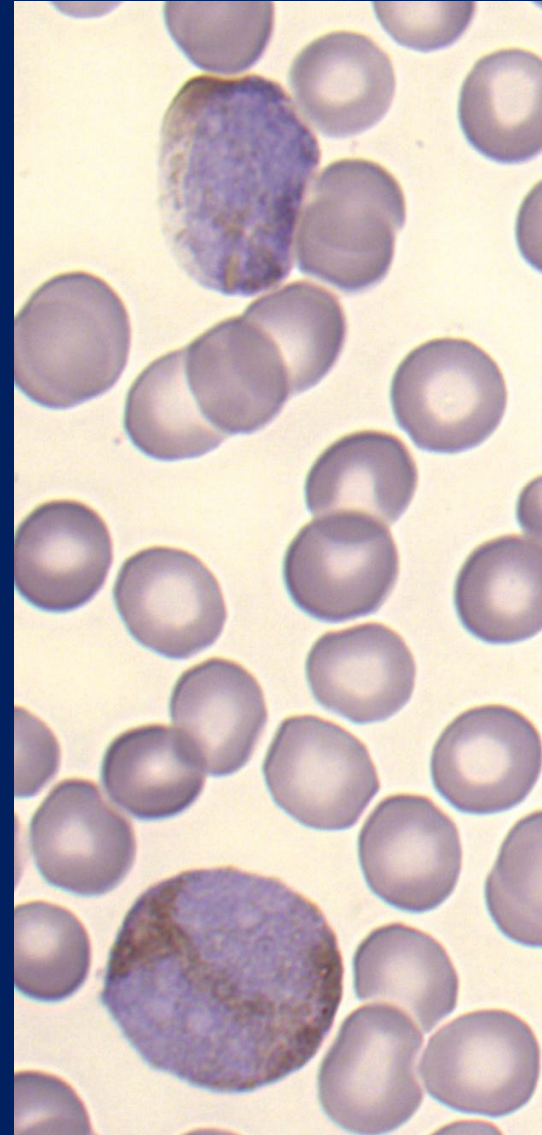
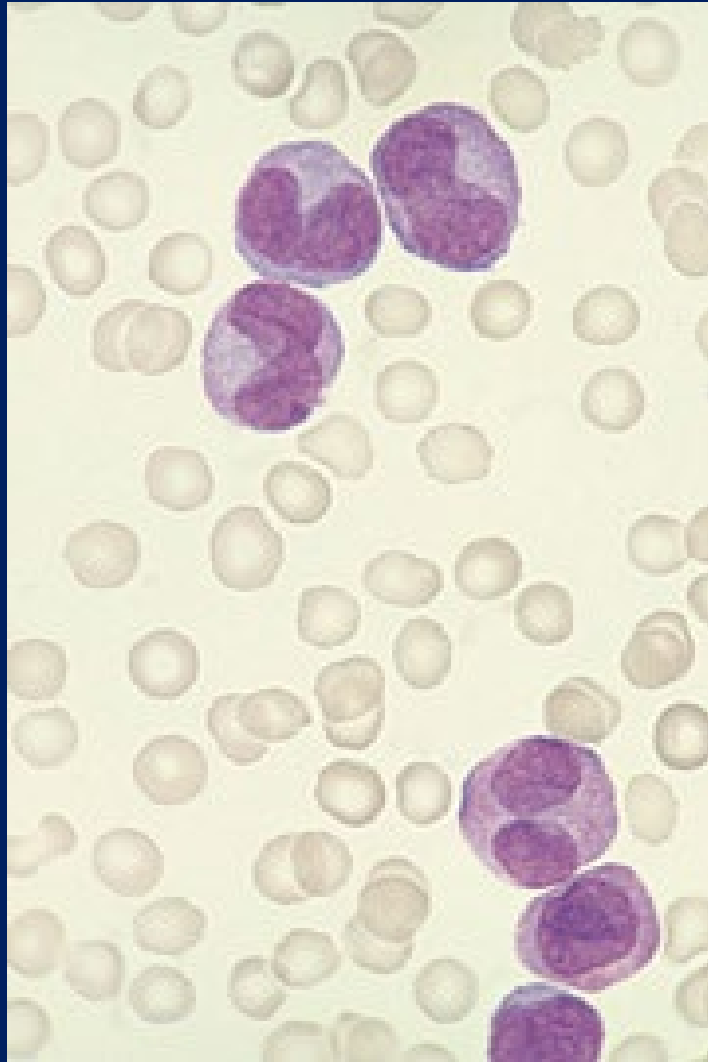


Liso & Bennett. *Best Pract Res Clin Haematol* 2003;16:349-55.

AML met t(15;17)



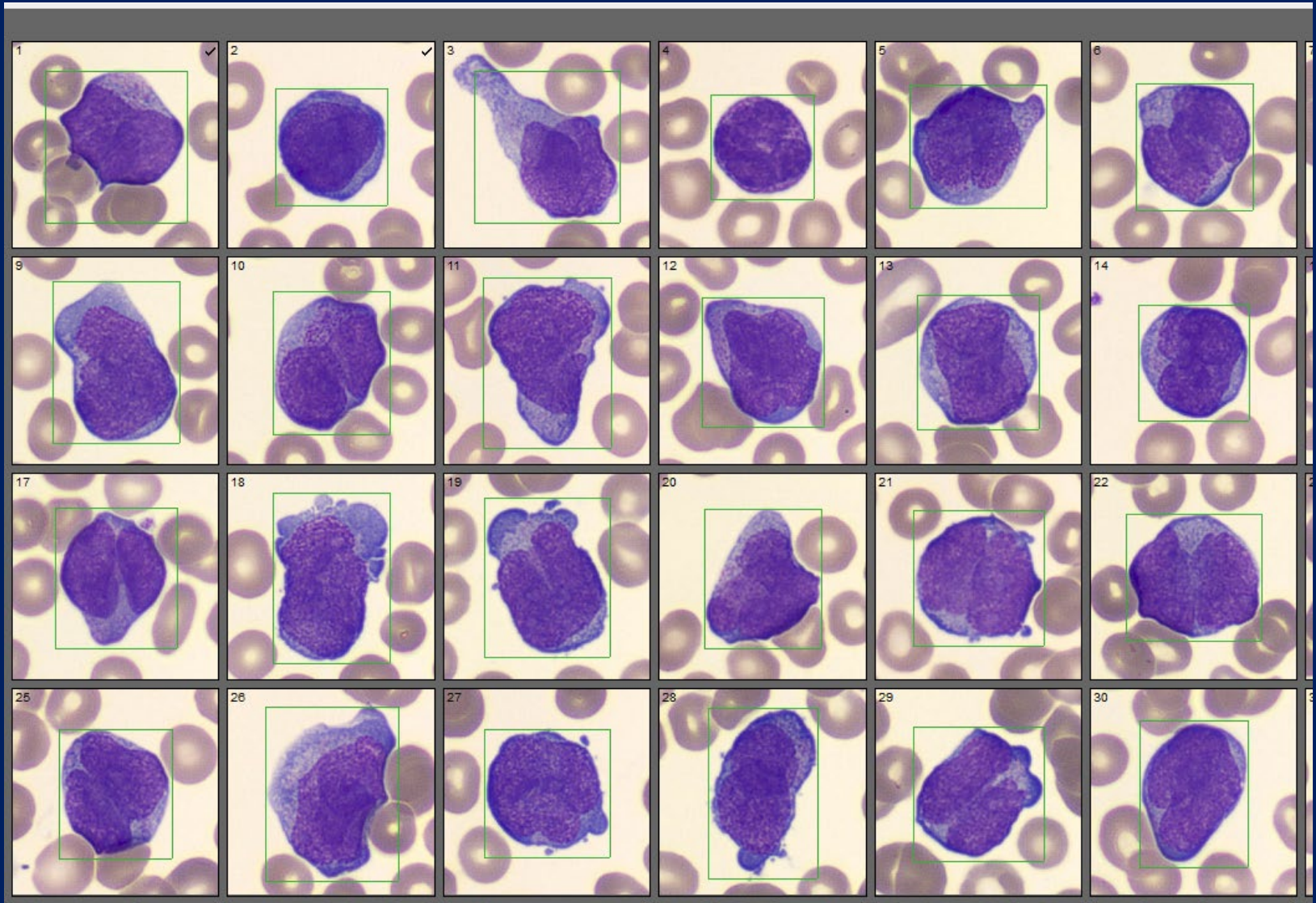
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AML met t(15;17)



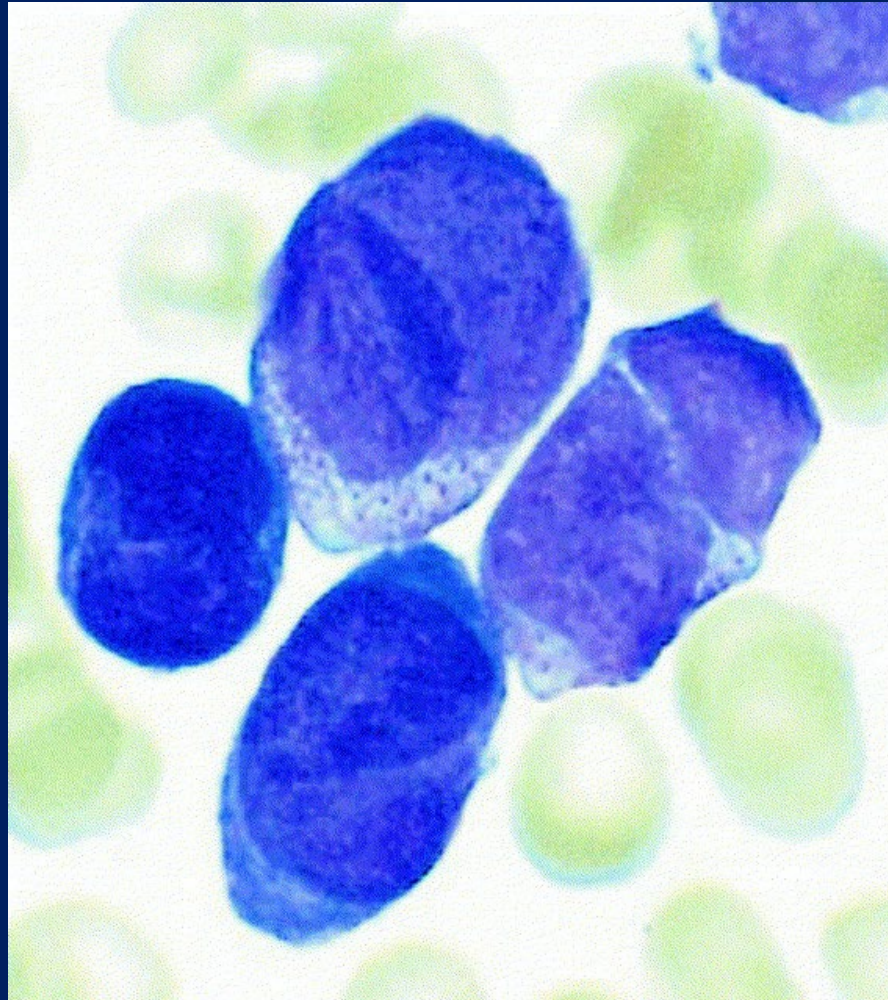
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APL, microgranulaire variant (AML-M3v)



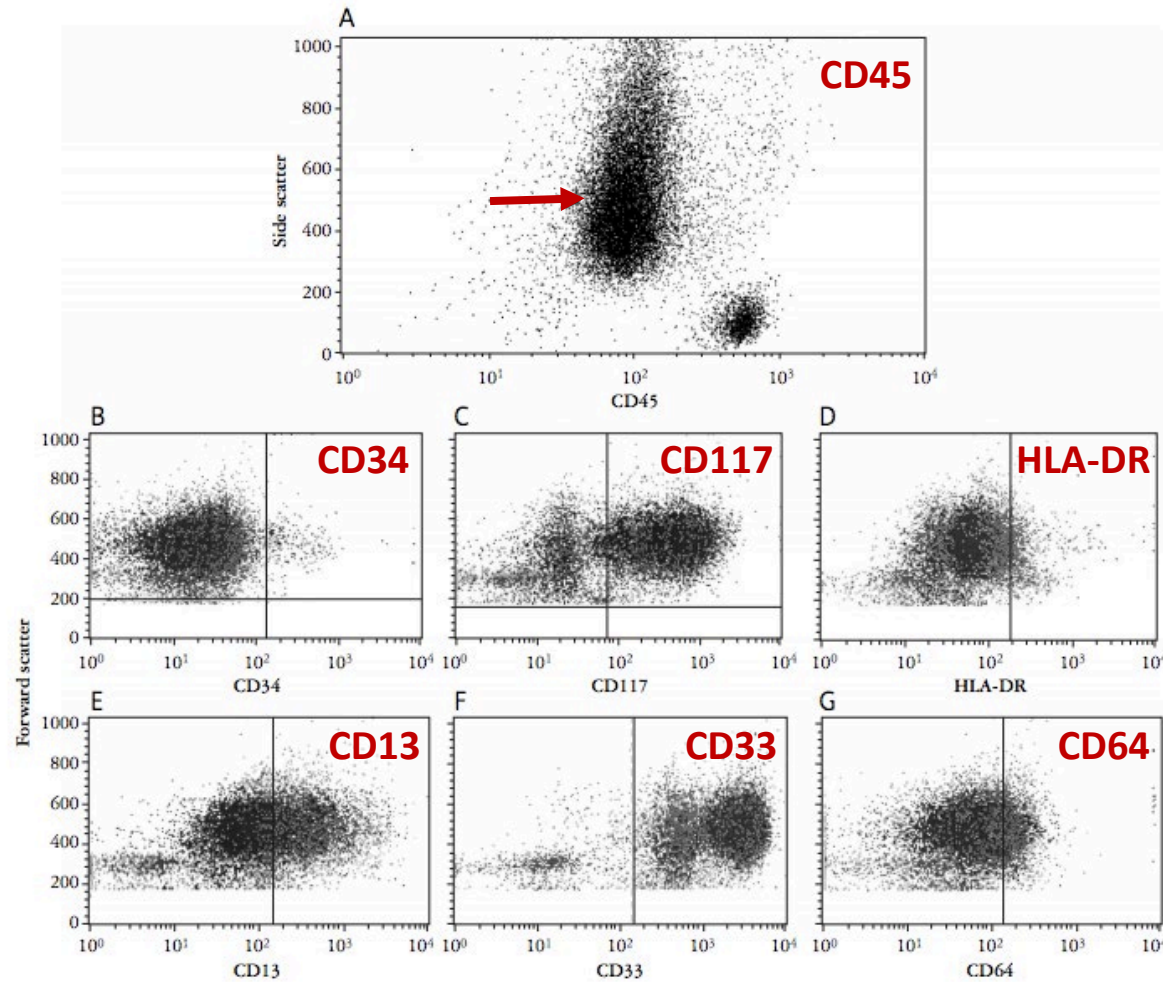
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APL, diagnose heroverwegen...



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AML met *NPM1* mutatie (\pm *FLT3* mutatie)



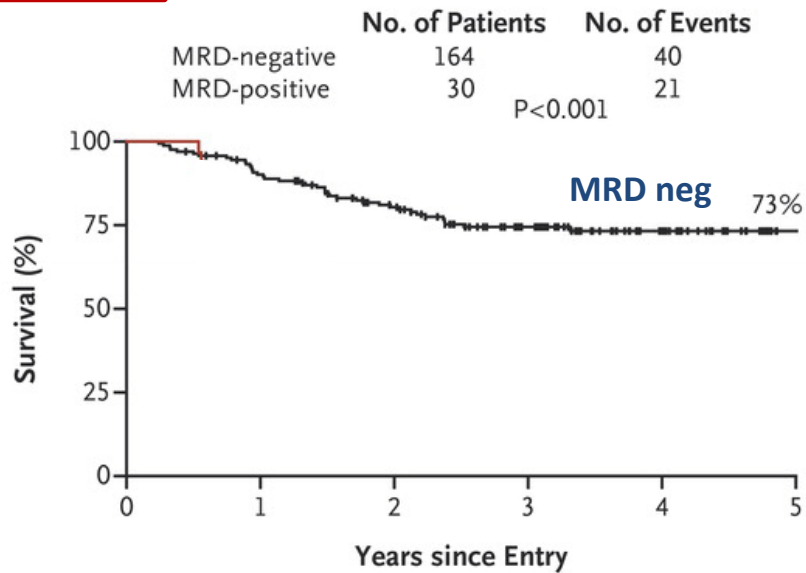
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MRD: moleculaire diagnostiek (bv *NPM1*)



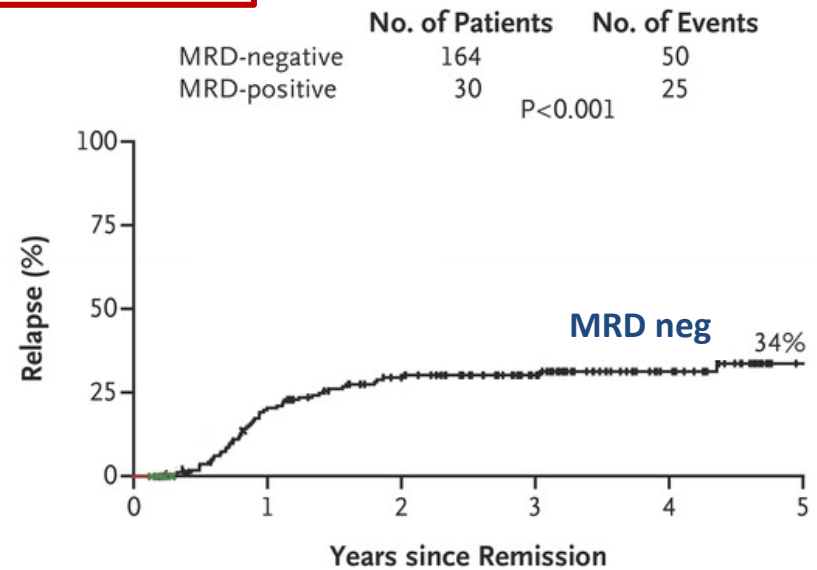
Overleving



No. at Risk

	0	1	2	3	4	5
MRD-negative	164	144	116	77	39	8
MRD-positive	30	18	10	5	3	2

Recidief ziekte



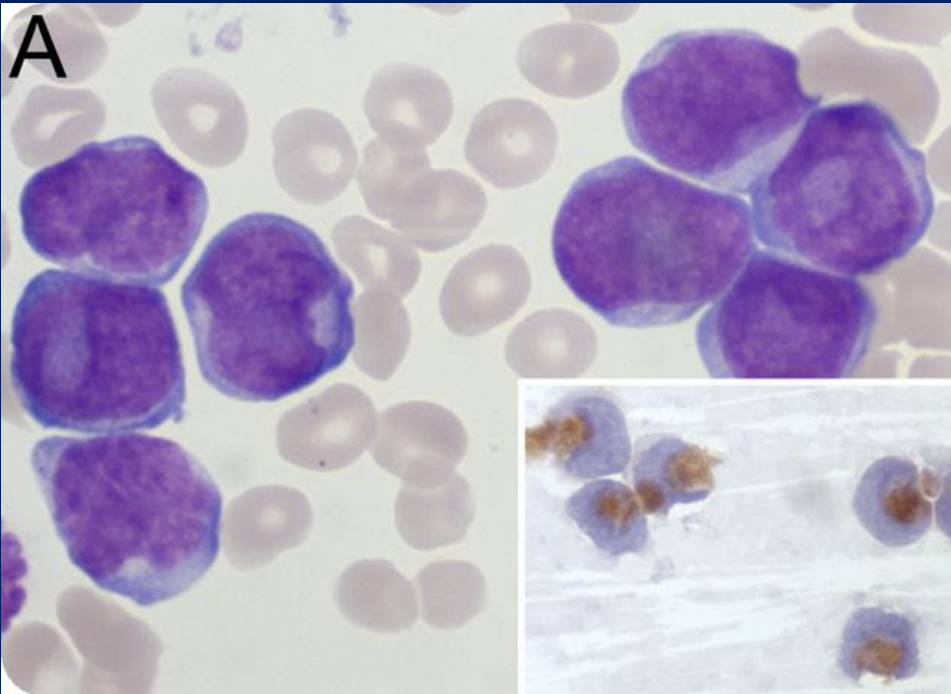
No. at Risk

	0	1	2	3	4	5
MRD-negative	164	120	93	64	33	6
MRD-positive	30	12	5	4	1	1

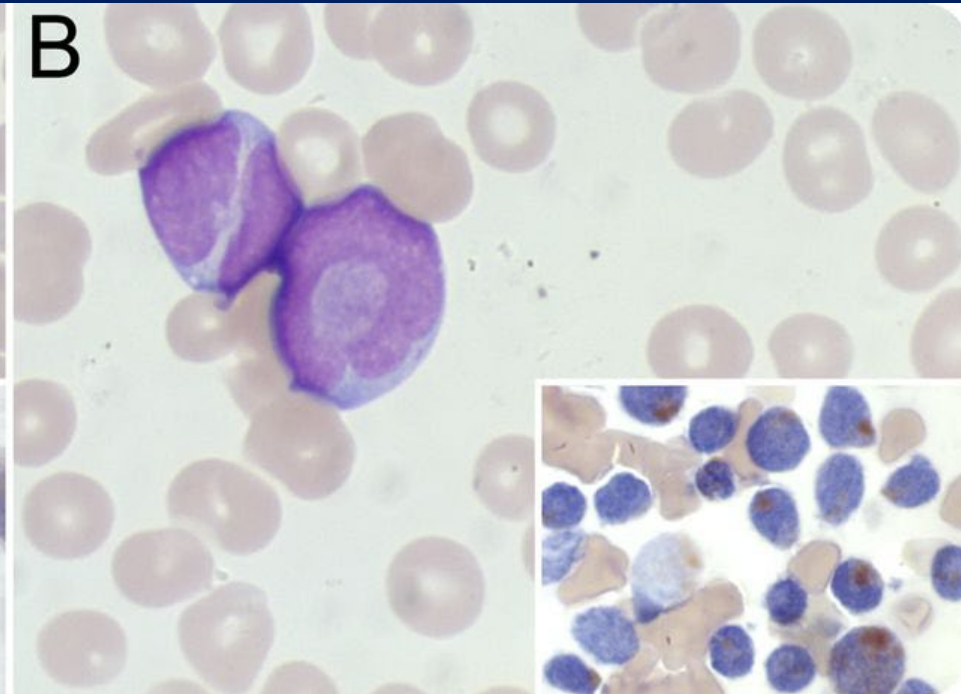
2 patiënten met vergelijkbare morfologie: ook dezelfde moleculaire afwijking?



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PML-RAR α
Flt3-ITD



NPM1 mut



De morfologie *lijkt* zijn beste tijd te hebben gehad in AML diagnostiek met de moleculaire en cytogenetische diagnostiek en

De (definitieve) diagnose dient vaak uitgesteld te worden aan nieuwe bevindingen.

Thuis *nóg meer* indruk maken op de collega's:

- WHO 5 / ICC *updates en controverses*
- moleculaire afwijkingen voorspellen vanachter de mic

