STUDY OF IMMUNOGLOBULIN LIKE TRANSCRIPT 3 (ILT3) EXPRESSION IN ACUTE MYELOID LEUKEMIA

Thesis

For Partial Fulfillment of Master Degree of Clinical and Chemical Pathology

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List of Abbreviations

AML Acute myeloid leukemia

APCs Non-professional antigen presenting cells

APL Acute promyelocytic leukemia

ATRA All-trans retinoic acid

B19V Parvovirus B19

BM..... Bone marrow

CBC Complete blood count

CBF Core binding factor

CR Complete remission

CTL Cytotoxic T-lymphocyte

DCs Dendritic cells

DIC Disseminated intravascular coagulopathy

FAB French-American-British

FCM Flow cytometry

FcyRIII Fc portion of IgG

FITC Fluorescein isothiocyanate

G-CSF Granulocyte colony stimulating factor

GM-CSF Granulocyte-macrophage colony stimulating factor

GVL Graft-versus leukemia

HLA Human leukocytic antigen

HSC Hematopoietic stem cells

IFN- γ Interferon- γ

IHC Immunohistochemistry

ILT3 Immunoglobulin Like Transcript 3

List of Abbreviations (Cont ...)

ILTs Immunoglobulin-like transcripts

ITAM Immunoreceptor tyrosine-based activation motif

ITIM Immunoreceptor tyrosine-based inhibitory

motifs

Kappa index

MDCs Monocytoid dendritic cells

MDS Myelodysplastic syndrome

MIC Morphologic-Immunologic Cytogenetic

MoAbs Monoclonal antibodies

MPO Myeloperoxidase

MRD Minimal Residual Disease

NSE Non-specific esterase

PAS PeriodicAcidSchiff

PNH paroxysmal nocturnal hemoglobinuria

r Pearson's correlation coefficient

RAR Retinoic acid receptor

RBC Red blood cells

ROC Receiver operator characteristics

rs Spearman's rank correlation coefficient

RT-PCR Reverse transcriptase-polymerase chain reaction

SBB Sudan Black B

SPSS Statistical Program for Social Science

t-AML AML transformation

TdT) Terminal deoxynucleotidyltransferase

TLC The total leucocytic count

List of Abbreviations (Cont...)

TNFs Tumor necrosis factors

WBCs White blood cells

WHO World Health Organization

x²..... Chi-square

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INTRODUCTION

Acute myeloid leukemia (AML) is one of the most common types of leukemias in adults (*Arber et al.*, 2008; *Foran*, 2010). Despite major advances in our understanding of the biology of AML, the five- year survival of AML patients is only 20-40%. It has been proposed that AML originates from self renewing hematopoietic stem cells (HSC)/progenitors that have acquired multiple genetic and/or epigenetic changes (*Becher*, 2011). The heterogeneity of AML is evident from the wide variety of clinical manifestations, phenotypic features and response to therapy (*Estey and Dohner*, 2006; *Schlenk et al.*, 2008; *Marcucci et al.*, 2011).

In clinical practice, the accurate diagnosis of AML subtypes is essential for risk stratification and treatment planning. The World Health Organization (WHO) and the French-American-British (FAB) classification systems are most commonly used to subtype AML (*Arber et al.*, 2008).

AML with monocytic differentiation includes FAB M4, M5a and M5b subtypes and shows distinct clinical features (*Tallman*, *2004*; *Dohner et al.*, *2008*). Although the expression of some markers by leukemic cells is helpful for lineage assignment. The diagnosis of AML with monocytic differentiation remains challenging (*Klco et al.*, *2011*).



Flow cytometry (FCM), is a powerful tool for the investigation of normal and neoplastic cells, and their classification at every level. Therefore, it has great prognostic and therapeutic implications. Its ability to measure multiple parameters (chemical or physical characteristics) on individual cells, in a suspension at high speed, is ideal for the study of leukemic cells. It identifies cell markers by applying monoclonal antibodies against them (Pervez et al., 2005).

The inhibitory receptor Immunoglobulin Like Transcript 3 (ILT3) is a member of immunoglobulin –like transcript (ILT, LIR, or LILR) family and is expressed by dendritic cells, monocytes, endothelial cells and osteoclasts, but not by lymphocytes(Cella et al., 1997; Kim et al., 2006). Dendritic cells expressing high levels of inhibitory receptors ILT3 and ILT4 were shown to induce anergy of CD4+ T helper cells and differentiation of CD8+ T suppressor cells. (Anderson and Allen, 2009; Chang et al., 2009).

Recently ILT3 expression was reported to be a reliable could distinguish AML with differentiation from other types of AML (Dobrowolska et al., *2013*).

AIM OF THE WORK

This study aims to study the pattern of ILT3 expression by leukemic myeloid precursors in AML cases with respect to its different subtypes & clinical relevance.

Chapter 1

ACUTE MYELOID LEUKEMIA

Definition

AML is a malignancy originating from a multipotential hematopoeitic cell characterized by clonal proliferation of abnormal blast cells in the marrow and impaired production of normal blood cells resulting in aneamia, thrombocytopenia and low, normal, or high white cell counts depending on the number of leukemic cells in the blood. It occurs in nine morphologic variants, each with characteristic cytologic, genetic, and sometimes clinical features (*Lichtman et al.*, 2011).

Epidemiology

AMLs are infrequent, yet highly malignant neoplasms responsible for a large number of cancer-related deaths (*Deschler and Lübbert*, 2006).

1. Incidence

It accounts for about 80% of all leukemias in adults and 15%-20% in children (*Lichtman et al.*, *2011*).

2. Age

Acute myeloid leukemia is generally a disease of older people and is uncommon before the age of 45. The average