

Correspondence

Dr. Maurizio Aricò, Department of Pediatrics, IRCCS Policlinico S. Matteo, 27100 Pavia, Italy. Fax international +39-382-502601 • E-mail: aricom@ipv36.unipv.it

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Chlorambucil synergizes with purine analogs in inducing *in vitro* cytotoxicity in B-cell chronic lymphocytic leukemia

IDA CALLEA,* GIUSEPPE CONSOLE,* GIUSEPPINA SCULLI,^o MONICA FILANGERI,* GIUSEPPE MESSINA,* FORTUNATO MORABITO*

*Centro Trapianti di Midollo Osseo e Terapia Sovramassimale Emato-Oncologica, Divisione di Ematologia; ^oCentro per le Microcitemie e Biologia Molecolare, Dipartimento di Emato-Oncologia, Azienda Ospedaliera Bianchi-Melacrino-Morelli, Reggio Calabria, Italy

Combinations of different drug concentrations of CLB+FAMP and CLB+2-CDA were synergistic in, respectively, 42.9% and 34.8%. At leukemic cell survival $\leq 50\%$, 16.4% and 23.4% of all combinations were synergistic in the 2-CDA and FAMP groups, respectively. A significantly higher mean value of antagonistic interactions was observed in the 2-CDA group ($p=0.037$).

Fludarabine (FAMP), 2-chlorodeoxyadenosine (2-CDA) and chlorambucil (CLB) induce apoptosis in chronic lymphocytic leukemia (CLL) B-cells.^{1,2} In this study we examined whether CLB improved *in vitro* CLL cell chemosensitivity to either FAMP or 2-CDA. The results indicate that CLB synergizes *in vitro* with both purine analogs.

Samples from 23 CLL patients were tested. Lymphocytes were separated as previously described.³⁻⁵ CLB (Sigma, St Louis, Mo, USA), FAMP (Fludara, Schering AR, Germany) and 2-CDA (Leustatin, Ortho

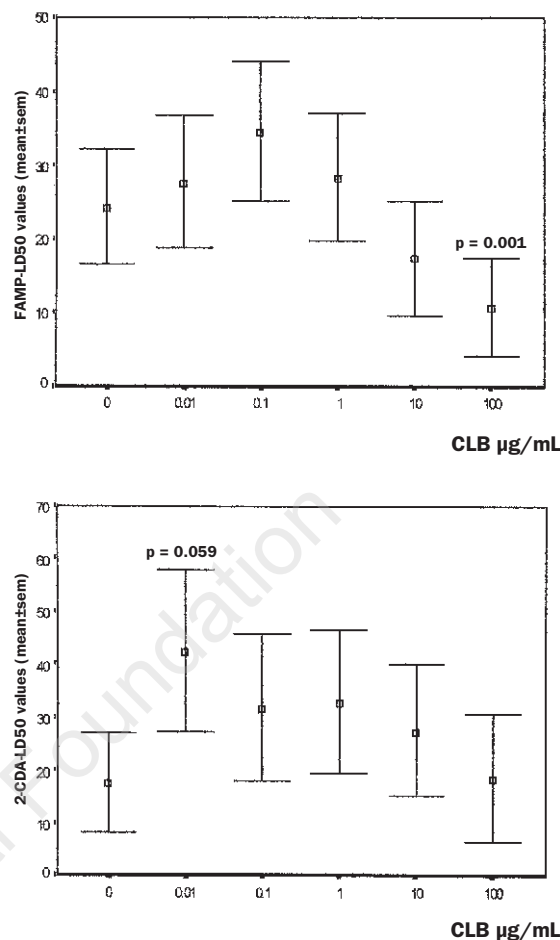


Figure 1. *In vitro* effect of several CLB concentrations on FAMP- (A) and 2-CDA- (B) LD₅₀ values at MTT assay. Statistical analysis was performed by Wilcoxon matched-pairs signed-ranks test. The difference of the mean values was significant between CLB= 0 µg/mL and CLB= 100 µg/mL ($p=0.001$) in the FAMP group. A border line significance was observed in the 2-CDA group between CLB= 0 µg/mL and CLB=0.01 µg/mL ($p=0.0592$).

Biotech, USA) were employed at described concentrations.³⁻⁵ MTT assay was performed as previously described.³⁻⁵ The lethal dose (LD)₅₀ values, leukemic cell survival (LCS) and drug interactions were calculated by home made software.³⁻⁵

FAMP-LD₅₀ values were significantly lower with 100 µg/mL concentrations of CLB; conversely higher 2-CDA-LD₅₀ values were observed with 0.01 µg/mL of CLB (Figure 1). The interactions between CLB and either 2-CDA or FAMP, tested in respectively 420 and 525 combinations, were synergistic in 146 (34.8% of the total) and 225 (42.9% of the total) (Table 1). Similar percentages of additive interactions (15.7% and 18.8%) were detected with both purine analogs, while a higher percentage of antagonistic interactions was observed among the 2-CDA group. At LCS $\leq 50\%$, 23%

Table 1. *In vitro* effect of drug interactions between CLB and FAMP in 21 CLL cases and between CLB and 2-CDA in 14. The mean values \pm sem, the total number and the percentage of the total combinations in which each specific interaction was detected is indicated.

	Sy interactions mean values \pm sem (total, %)	*p	Ad interactions mean values \pm sem (total, %)	*p	An interactions mean values \pm sem (total, %)	*p
Any LCS						
FAMP	10.7 \pm 1.4 (225, 42.9%)	ns	4.71 \pm 0.95 (99, 18.8%)	ns	9.57 \pm 2.6 (201, 38.3%)	0.037
2-CDA	10.4 \pm 2.1 (146, 34.8%)		4.71 \pm 1.1 (66, 15.7%)		14.85 \pm 2.6 (208, 49.5%)	
LCS \leq 50%						
FAMP	5.8 \pm 1.0 (123, 23.4%)	ns	3.6 \pm 0.8 (77, 14.7%)	ns	3.2 \pm 0.7 (69, 13.1%)	0.059
2-CDA	4.9 \pm 1.4 (69, 16.4%)		3.4 \pm 0.9 (48, 11.4%)		6.2 \pm 1.7 (87, 20.7%)	

Sy interactions = Synergistic interactions; Ad interactions = Additive interactions; An interactions = Antagonist interactions; LCS = Leukemic cell survival. *Wilcoxon rank-sum test. For CLB+2-CDA interactions, 30 different drug combinations were tested using 5 CLB (100, 10, 1, 0.1, 0.01 μ g/mL) and 6 2-CDA (125, 12.5, 1.25, 0.125, 0.0125, 0.00125 μ g/mL) concentrations. For CLB+FAMP interactions, 25 different drug combinations were tested using 5 CLB (100, 10, 1, 0.1, 0.01 μ g/mL) and FAMP (100, 10, 1, 0.1, 0.01 μ g/mL) concentrations.

and 16.4% of the total drug combinations in the FAMP and 2-CDA group, respectively, interacted synergistically. A statistically significant higher mean value of antagonistic interactions was observed in the 2-CDA group for any LCS ($p=0.037$), while a border line significance was documented for LCS \leq 50% ($p=0.059$).

Synergy was observed between CLB and 2'-deoxycoformycin in CLL cells,⁶ while an additive effect was described for the combination CLB-FAMP.⁷ We found additivity and synergism in 61.7% and 50.5% for CLB+FAMP and CLB+2-CDA, respectively. On the other hand, there was a significantly higher mean value of antagonistic interactions in the 2-CDA group. Furthermore, in our *in vitro* tests, synergism and additivity was found in 60.7% of the drug interactions at CLB \leq 1 μ g/mL and 2-CDA \leq 0.0125 μ g/mL, which closely represent the purine analog plasma concentration achieved in a clinical study of the 2-CDA-CLB drug combination.^{8,9}

In conclusion, these results adds support to the notion that combination of an alkylating agent with a purine analog may be a practicable treatment for CLL.

Key words

CLL, MTT assay, fludarabine, chlorambucil, 2-chlorodeoxyadenosine, cytotoxicity, drug synergism

Correspondence

Fortunato Morabito, M.D., Centro Trapianti di Midollo Osseo e Terapia Sovramassimale Emato-Oncologica, Dipartimento di Emato-Oncologia, Azienda Ospedaliera Bianchi-Melacrino-Morelli, 89100 Reggio Calabria, Italy

Phone: international +39-965-27191 • Fax: international + 39-965-25082 • e-mail: sp00404@relay.it.net

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