

## Widespread over-expression of the non-clustered homeobox gene *HLX* in acute myeloid leukemia

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Homeobox (HOX) transcription factors are important for the regulation of normal hematopoiesis. Many cases of acute myeloid leukemia (AML) are driven by aberrant expression of clustered *HOX* genes that is mediated by chimeric oncoproteins involving MLL, chromosomal translocations directly affecting individual *HOX* genes, or perturbation of as yet unknown upstream regulators of *HOX* gene expression.<sup>1</sup> In contrast, much less is known about the role of non-clustered homeobox genes in leukemia. A recently published study has now established that overexpression of the non-clustered homeobox gene *HLX* is a common event in myeloid leukemogenesis and that this may have tangible clinical implications.<sup>2</sup>

Building on their previous finding that *Hlx* transcripts are increased in pre-leukemic hematopoietic stem and progenitor cells (HSPC) in a mouse model of AML,<sup>3</sup> Kawahara *et al.* observed that forced expression of *HLX* in murine HSPC resulted in depletion of long-term hematopoietic stem cells (LT-HSC) and enrichment of a more mature, granulocyte-monocyte progenitor (GMP)-like population with sustained clonogenic activity and a defect in terminal myelomonocytic differentiation. Interestingly, the loss of LT-HSC was not due to apoptosis or necrosis, suggesting that *HLX* may possess partial differentiation-inducing activity that leads to incomplete maturation of LT-HSC into GMP-like cells, a possibility that war-

rants further study.

In support of the idea that *HLX* promotes AML development, short hairpin RNA knockdown of *HLX* led to decreased viability, proliferation and clonogenicity of human AML cell lines and significantly prolonged survival in a murine AML transplantation model. Mechanistic studies showed that suppression of *Hlx* caused cell killing, mitotic arrest and myeloid differentiation. These cellular phenotypes were paralleled by induction of a distinct pattern of transcriptional changes, and modulation of individual genes from this signature, such as *PAK1* and *BTG1*, in cultured human AML cells partially mimicked the effects of *HLX* knockdown, suggesting that these genes are functionally relevant *HLX* downstream effectors.

In addition to these functional studies, Kawahara *et al.* also examined several publicly available microarray datasets and found that *HLX* mRNA expression is elevated compared to normal CD34-positive HSPC in nearly 90% of adult AML patients. Importantly, *HLX* overexpression was associated with inferior overall survival, independently of established prognostic parameters such as cytogenetic risk group or mutations in the *NPM1*, *FLT3* and *CEBPA* genes. These findings indicate that measuring *HLX* expression in AML patients may have immediate clinical value, a question that should be addressed prospectively taking into account the ever-expanding spectrum of molecular prog-

nostic markers.<sup>4</sup> Furthermore, integration of the changes in gene expression induced by altering *HLX* levels in murine HSPC with the transcriptional profiles of human leukemia specimens with high or low *HLX* expression enabled delineation of a core set of *HLX*-dependent genes that can be viewed as a surrogate marker of *HLX* activity, and whose expression also correlates with survival in AML patients.

These compelling observations not only point to a fundamental role for *HLX* in myeloid leukemogenesis. Together with previous data demonstrating the leukemogenic activity of *CDX2*, which is also over-expressed in a substantial proportion of AML patients,<sup>5,6</sup> the data by Kawahara *et al.* suggest the intriguing possibility that widespread misexpression of non-clustered homeobox genes represents a common mechanism of transformation that is shared by various AML subtypes. Finally, the findings by Kawahara *et al.* set the stage for future research. For example, the upstream events initiating aberrant *HLX* expression are still not known, and it will be interesting to further dissect how *HLX* deregulates its downstream effectors. Since targeting transcription factors is challenging and has not yet been realized in a clinical setting, understanding the entire molecular circuitry involving deregulated *HLX* expression may also help develop strategies to interfere with *HLX* activity for therapeutic benefit.

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