Mutation status of essential thrombocythemia and primary myelofibrosis defines clinical outcome

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doi:10.3324/haematol.2015.138958

Online supplement

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Methods

Patients

The study was performed in accordance to the Declaration of Helsinki after ethical approval by the Research Ethics Board at the University of Gothenburg and the Sahlgrenska Academy, Gothenburg, Sweden. All patients diagnosed with ET or PMF according to the WHO 2008 classification between 2008 and 2013 in Western Sweden at the Sahlgrenska University Hospital or NU Hospital Group and reported to the Swedish national cancer register, INCA, were selected (n=186). 170 patients were included; 129 ET patients (73 females and 56 males, median age 67 years, range 27–90 years) and 41 PMF patients (21 females and 20 males, median age 70 years, range 32–85 years). 16 patients did not answer the request to participate in the study. Clinical, laboratory and outcome data was available for all patients. A critical review of diagnosis was performed in triple negative patients by re-analyzing bone marrow in addition to review of clinical data.

Mutation analysis of JAK2, CALR and MPL

Genomic DNA from blood taken at initial referral or time of diagnosis was used for analysis. *JAK2* V617F mutation status was determined for all patients. Ipsogen JAK2 MutaQuant Kit (Qiagen, Hilden, Germany) was used in the majority of cases. *CALR* mutation status was analyzed with fragment analysis in all cases negative for *JAK2* mutation.[1] Detected *CALR* mutations were verified by Sanger sequencing. The *MPL* W515 mutation was analyzed using Ipsogen MPL W515K/L MutaScreen Kit (Qiagen) in cases negative for both *JAK2* V617F and *CALR* mutations.

Screening for myeloid mutations

Genomic DNA from all patients negative for *JAK2* V617F, *CALR* and *MPL* W515K/L mutations (n=20) in addition to all ET patients with *MPL* mutations (n=3, all with the W515L mutation) and age matched controls from ET patients harboring the *JAK2* (n=18) or *CALR* (n=18) mutations were screened for additional mutations. The TruSight Myeloid Sequencing panel (Illumina, San Diego, CA, USA) was used on the MiSeq instrument (Illumina). Secondary analysis was performed by MiSeq Reporter using BWA mapper and somatic variant caller. Results were filtered using Variant Studio (Illumina). Global filtering according to 1000 genomes was set to >3%, coverage was at least 100 reads and at least 10 reads for the variant. Variants causing missense, frameshift, altered stop/initation codon, in-frame insertion/deletion or variants affecting splice site were regarded as mutations. Variants with quality >Q30 and allele frequencies of at least 5% were considered positive for mutation. In addition to patient samples, three samples of DNA extracted from blood donors or individuals with normal blood morphology were included as controls. Mutations appearing in these samples were considered as normal polymorphisms occurring in our population cohort or

sequencing artefacts and were excluded from further analysis. BAM-files from the secondary analysis were used to further analyze the regions with identified mutations by Integrative Genomics Viewer (www.broadinstitute.org). Variants in areas with difficult reads were excluded. Results were visualized using a Circos plot.[2]

Statistical analysis

Statistical significance was determined using Kruskal-Wallis non-parametric test or 2-tailed Fisher exact test with Analyze-it, v.2.30 (Analyse-it Software Ltd, Leeds, UK). A value of $p<0.05$ was considered statistically significant.

Survival analysis

The probabilities of OS were estimated by the Kaplan-Meier method and differences in survival distributions were compared with Gehan-Breslow-Wilcoxon test using GraphPad Prism, v.6.07 (GraphPad Software Inc, La Jolla, CA, USA). OS was defined as time from diagnosis to last follow-up or death from any cause. Follow up was done from diagnosis to end of study (2015-05-31) and the median follow-up time was 46 months for ET patients and 41 month for PMF patients.

References

1. Klampfl T, Gisslinger H, Harutyunyan AS, et al. Somatic mutations of calreticulin in myeloproliferative neoplasms. N Engl J Med. 2013;369(25):2379-2390.
2. Krzywinski M, Schein J, Birol I, et al. Circos: an information aesthetic for comparative genomics. Genome Res. 2009;19(9):1639-1645.

Table S1 ET with different mutations (median values and ranges)

	***JAK2* V617F (n=82)**	***CALR* (n=28)**	***MPL* (n=7)**	**TN (n=8)**
Gender (F/M)	49/33	13/15	3/4	6/2
Age	66.5 (27-90)	67.5 (49-88)	**80 (70-82)***	64.5 (39-85)
Hemoglobin (g/L)	**143 (117-170)****	137 (108-152)	**117 (99-128)****	134.5 (113-155)
Hematocrit (EVF)	**0.44 (0.37-0.52)****	0.43 (0.37-0.48)	**0.38 (0.31-0.40)****	0.40 (0.35-0.47)
WBC (10^9/L)	9.4 (4.8-16.9)	8.7 (2.9-12.5)	9.0 (5.6-19.8)	9.4 (5.6-15.6)
Platelets (10^9/L)	736 (467-1776)	**991 (407-1824)****	1011 (592-1888)	690 (570-2061)
EPO (2.6-18.5 IU/L)	**4.9 (1.7-30.6)*****	10.1 (3.3-40.8)	**15.0 (6.2-26.3)****	10.9 (6.2-14.6)
Vascular complications (yes/no)	33/49	**5/23**$^+$	4/3	3/5
Transformation (yes/no)	1/81	1/27	**2/5**$^+$	0/8

Kruskal-Wallis non-parametric test * $p \leq 0.01$, ** $p \leq 0.001$, *** $p \leq 0.0001$, Fischer exact test $^+p<0.05$

Table S2 PMF with different mutations (median values and ranges)

	***JAK2* V617F (n=24)**	***CALR* (n=7)**	***MPL* (n=3)**	**TN (n=7)**
Gender (F/M)	12/12	4/3	1/2	4/3
Age	71 (41-85)	61 (48-82)	82 (73-83)	63 (50-83)
Hemoglobin (g/L)	120 (79-146)	119 (90-146)	111 (104-116)	91 (60-156)
Hematocrit (EVF)	0.38 (0.23-0.49)	0.38 (0.29-0.45)	(0.32-0.35)	(0.21-0.22)
WBC (10^9/L)	8.4 (3.2-28.0)	8.7 (5.6-42.7)	11.0 (5.3-19.8)	7.1 (1.0-17.8)
Platelets (10^9/L)	392 (37-1244)	878 (32-1412)	504 (384-937)	64 (5-833)
EPO (2.6-18.5 IU/L)	9.9 (3.3-578)	19.0 (10.1-30.1)	33.2 (7.4-40.7)	44.8 (4.8-81.1)
Vascular complications (yes/no)	7/17	2/5	0/3	2/5
Transformation (yes/no)	1/23	0/7	0/3	**3/4***

Fischer exact test $^{*}p<0.05$

Table S3 Findings from TruSight Myeloid Sequencing panel

Mutation load in %

| | | | ET TN | | | | | | | | *CALR* | | | | | | | | | | | | | | | | | | | | | *JAK2* | | | | | | | | | | | | | | | | | | |