CASE REPORTS in HAEMATOLOGY

A case of pre-B ALL with t(8;14)(q11;q32).

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Clinics
Age and sex: 11 yr old male patient
Previous history: no preleukemia; no previous malignant disease; -no inborn condition of note;
Organomegaly: hepatomegaly; splenomegaly; no enlarged lymph nodes; no central nervous system involvement

Blood
WBC: WBC: $4.3 \times 10^9/l$; Hb: 3.3 g/dl; platelets: $16 \times 10^9/l$; blasts: 2%
Bone marrow: 99% blasts%

Cyto pathology classification
Cytology and immunophenotype: ALL-L1; CD19+/CD10+/Tdt+
Rearranged Ig Tcr: IgH: +, TCR: +
Precise diagnosis: pre-B ALL

Survival
Date of diagnosis: August 2000
Complete remission was obtained
Status: Alive
Survival: 10 months +

Karyotype
Sample: peripheral blood sample; culture time: 24h culture; banding: G-banding
Results: 49,XY,+X,t(8;14)(q11;q32),+12,+21[15]/46,XY[10]

Comments
This case, an eleven year old boy does not have Down syndrome or other inborn
genetic conditions. His spleen and liver were remarkably enlarged (spleen: to the umbilical plane, liver: 4 fingers below the costal margin). He had no lymph node involvement, nor CNS- or testis disease. He did not, on flowcytometric immune phenotyping, show evidence of bilineage differentiation. The phenotype was the usual for a pre-B ALL (CD10+/CD19+/Tdt+).

Internal links

Atlas Card  t(8;14)(q11;q32)

Case Report  A case of Down syndrome with acute lymphoblastic leukemia and t(8;14)(q11;q32)

Case Report  A new case of t(8;14)(q11;q32) in an acute lymphoblastic leukemia

Bibliography

**t(8;14)(q11;q32).**

Huret JL


**Acute lymphoblastic leukemia wit an unusual t(8;14)(q11.2;q32): a Pediatric Oncology Group Study.**


Leukemia 2000; 14: 238-40.

**Cytogenetic findings in a population-based series of 787 childhood acute lymphatic leukemia.**


Leukemia 2000; 64: 194-200.

Contributor(s)

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