

Jumping Translocations 1q12 Contribute to Copy Number (CN) Variations in Multiple Myeloma (MM): Unexpected CN Gains Involving Duplications and Translocations of Receptor Chromosomes

Jeffrey Sawyer ^{1,2}, Erming Tian ², Janet Lukacs ¹, Regina Lichti Binz ¹, Bijay Nair ², Sarah Waheed ², Saad Usmani ², Frits van Rhee ², Bart Barlogie ², John Shaughnessy Jr ²

**¹ Department of Pathology and ² Myeloma Institute for Research and Therapy
University of Arkansas for Medical Sciences**

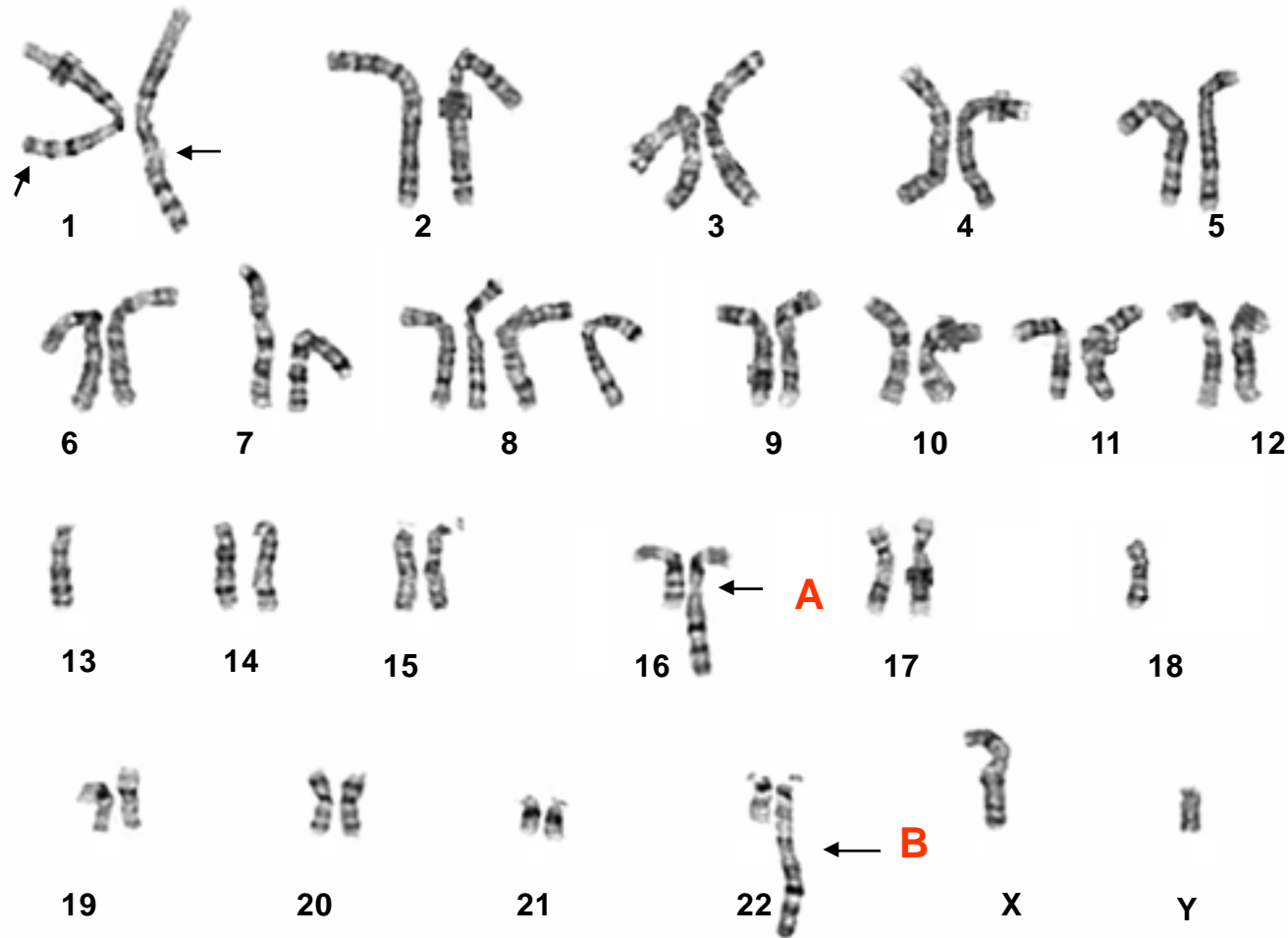
Jumping Translocations 1q12

- Jumping 1q translocations (JT1q12) occur when the whole 1q acts as a donor chromosome and translocates to different receptor chromosomes (RC)
- Two types of JT1q12:
 - Telomeric JT1q12: translocates to the telomere of a RC
 - Whole-arm JT1q12: translocates to the pericentromeric region of RC causing a deletion and CN loss in RC
- By interphase FISH the frequency of JT1q21 increases from 43% in overt myeloma to 72% at relapse
- New type of JT1q12 which can apparently duplicate and translocate the distal segment of a RC, thus increasing CN of a segment of the receptor chromosome

Patients and Methods

- 60 patients showing gain of 1q by G-bands were studied by FISH and SKY
 - 35 cases showed deletions in RC caused by JT1q12
 - 11 cases with 16q-
 - 6 cases with 19q-
 - 3 cases with 6q-
 - 2 cases each with 5q- and 8p-
- 4 cases showed unexpected duplications and translocations in RC and associated CN gains
 - Gain of 18q BCL2 (Case # 1)
 - Gain of 8q cMYC (Case # 2)
 - Gain of 16q11 (Case # 3)

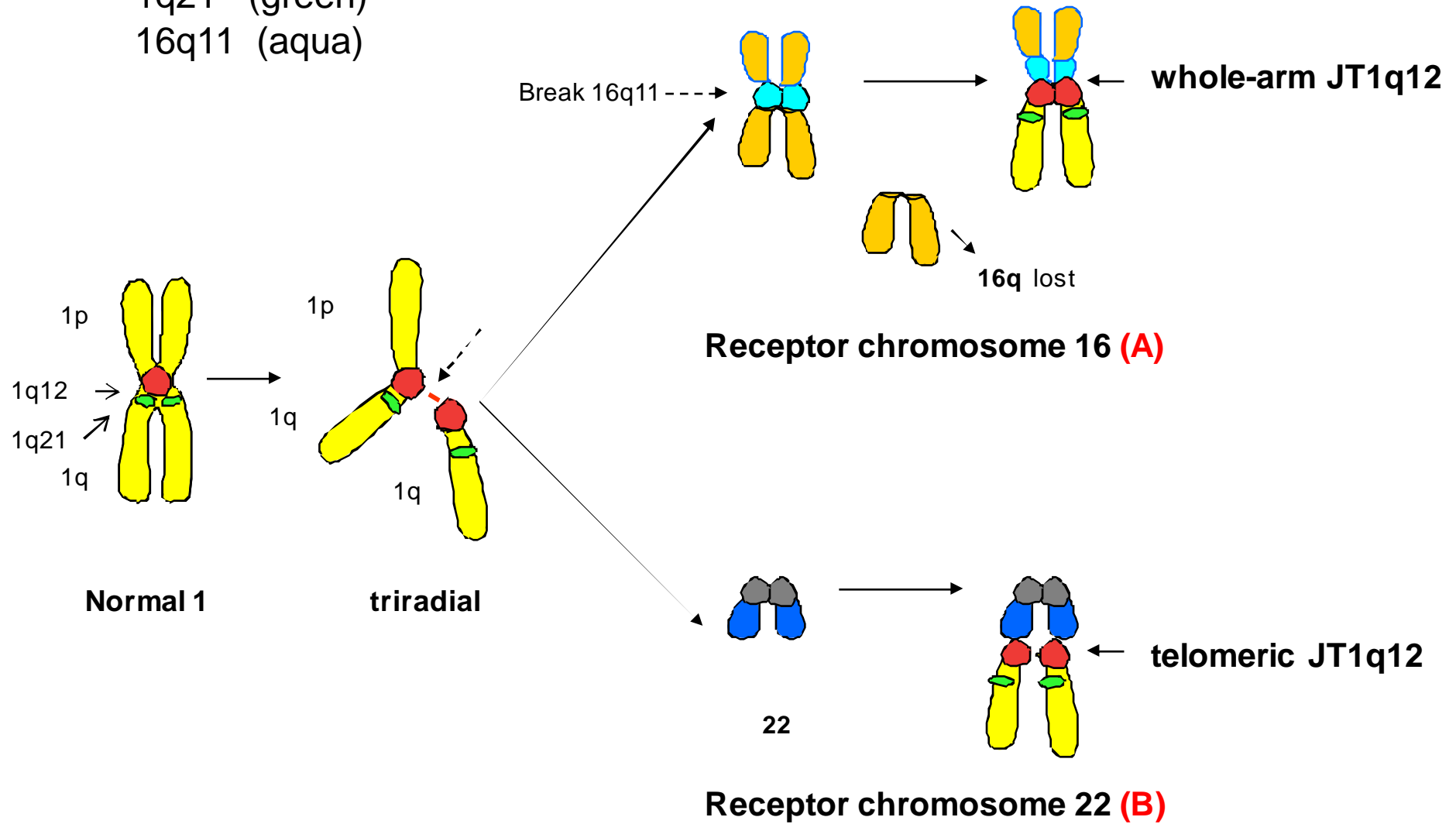
Jumping translocations (JT1q12)



Two types of JT1q12: (A) whole-arm JT1q12 to the centromere of 16 (CN loss), and (B) telomeric JT1q12 to the distal end of chromosome 22

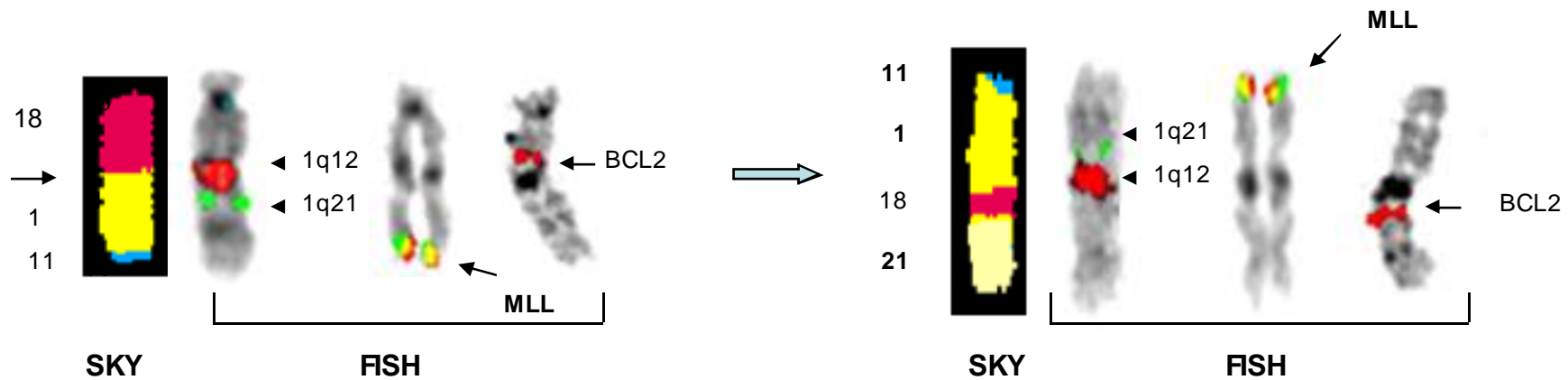
Two Types of JT1q12

1q12 (red)
1q21 (green)
16q11 (aqua)



Telomeric JT1q12 to 18q

Case # 1



JT1q12 to 18q

First jump

CN 1q21 = 4
CN BCL2 = 2
CN MLL = 4

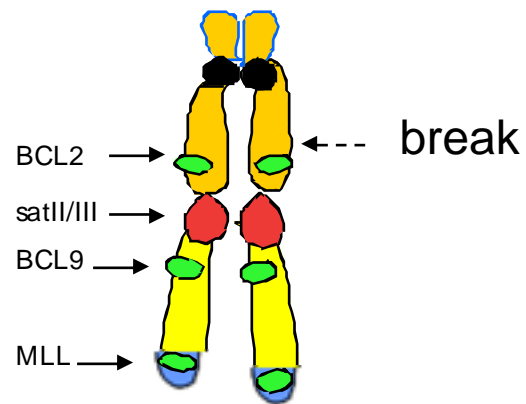
JT 1q12 to 21p

Second jump

CN 1q21 = 5
CN BCL2 = 3
CN MLL = 5

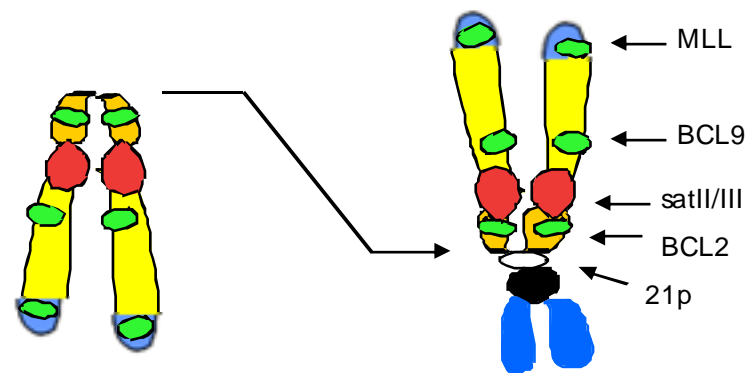
Telomeric JT1q12 to 18q

Duplication and translocation of BCL2



telomeric JT1q12 to 18q

CN 1q21 = 4
CN BCL2 = 2
CN MLL = 4

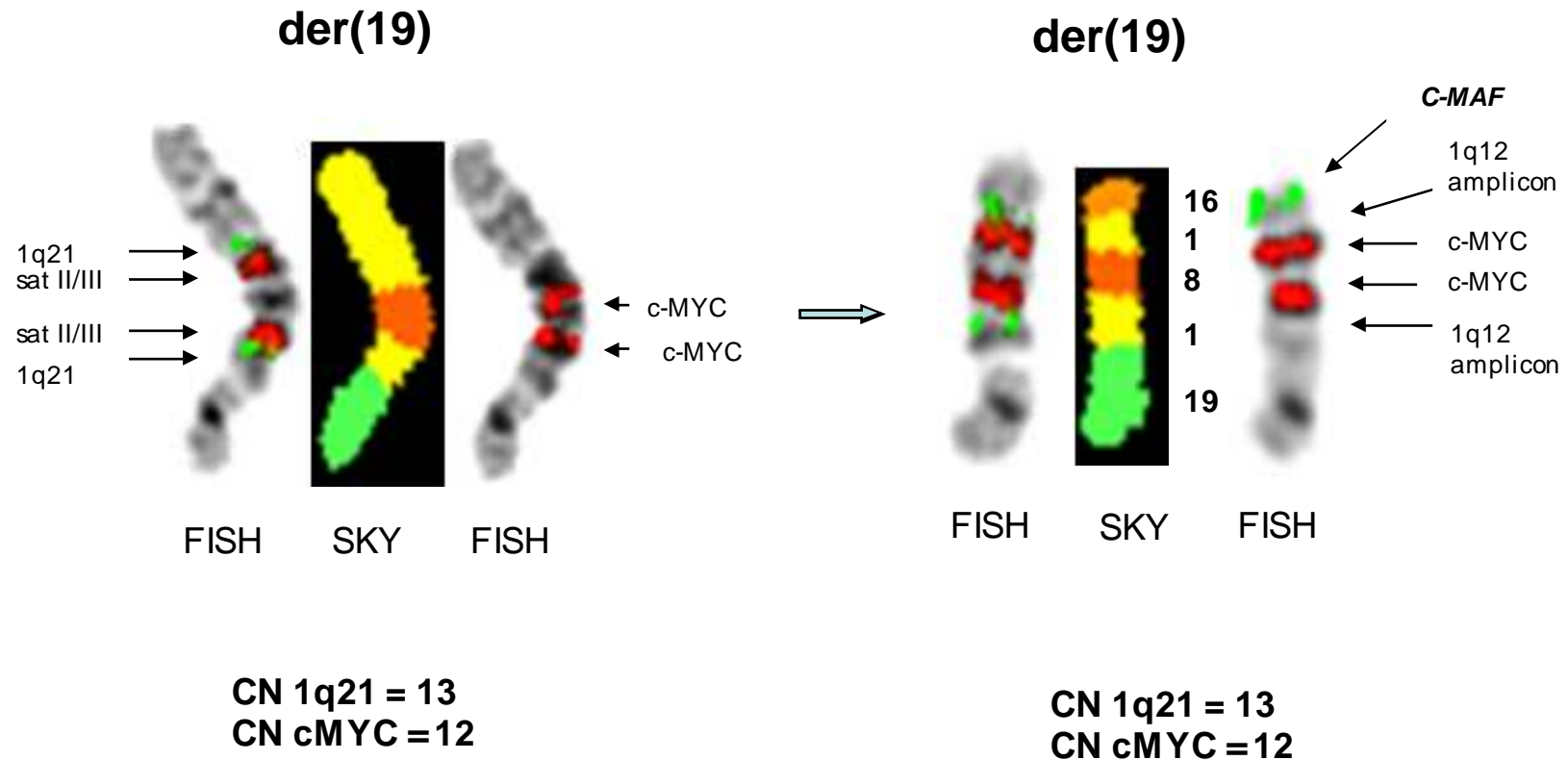


Second JT1q12 to 21p

CN 1q21 = 5
CN BCL2 = 3
CN MLL = 5

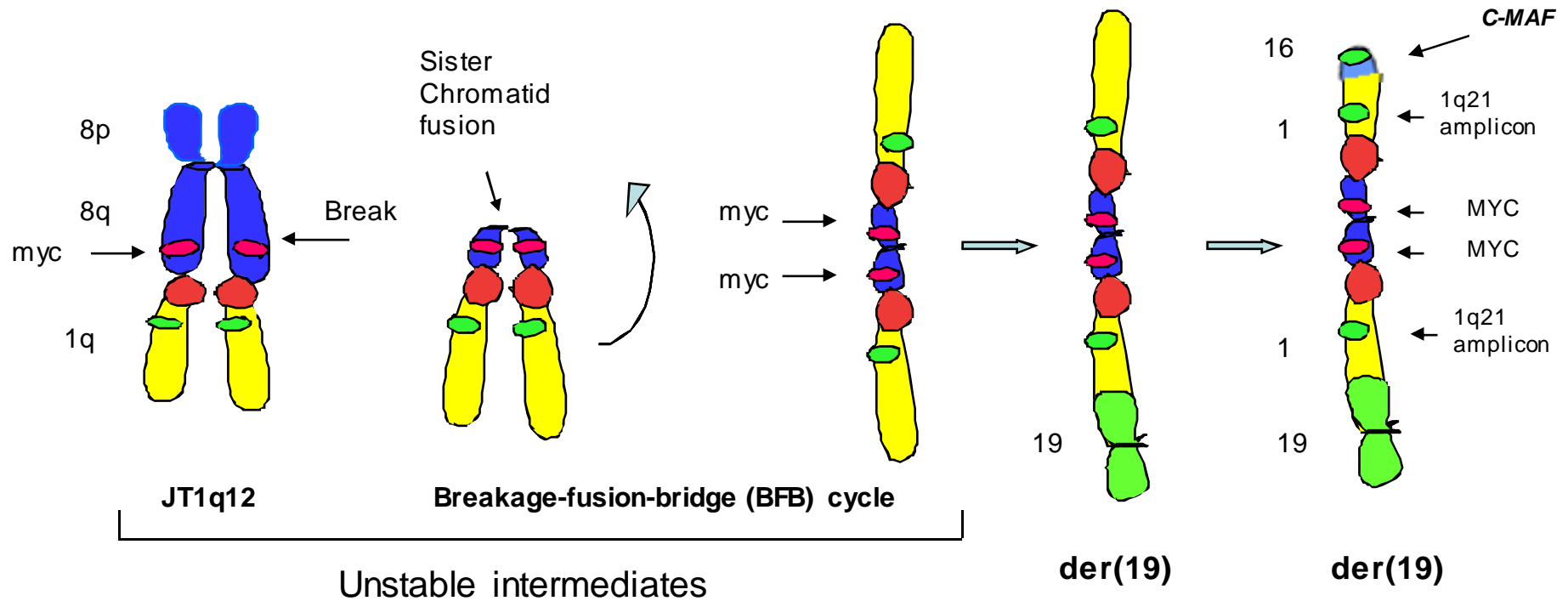
Telomeric JT1q12 to 8q

Case # 2



Telomeric JT1q12 to 8q

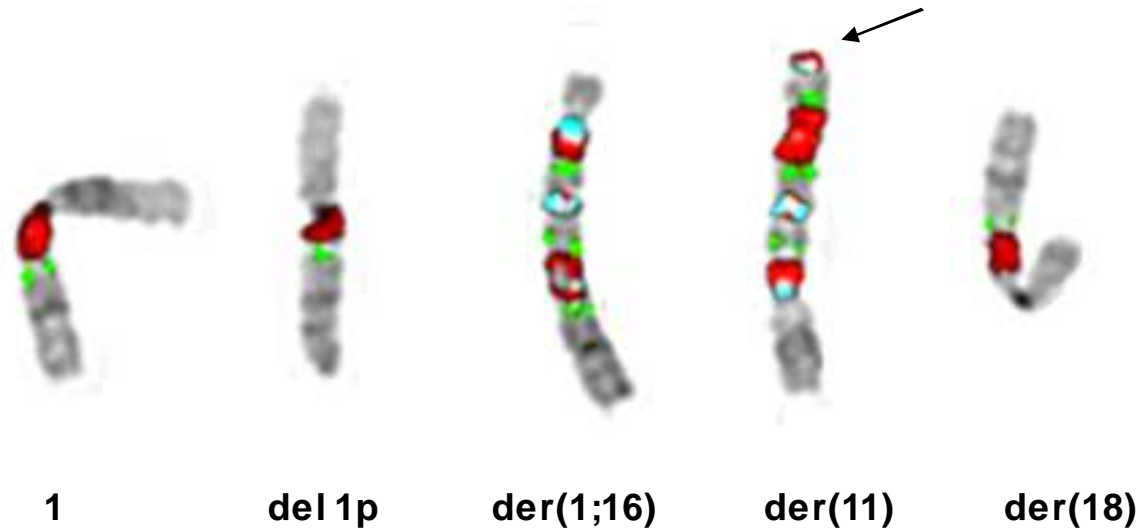
Proposed events in duplication and translocation of *cMYC*



Whole-arm unbalanced JT1q12 to 16q11 (Case # 3)

Subclone A

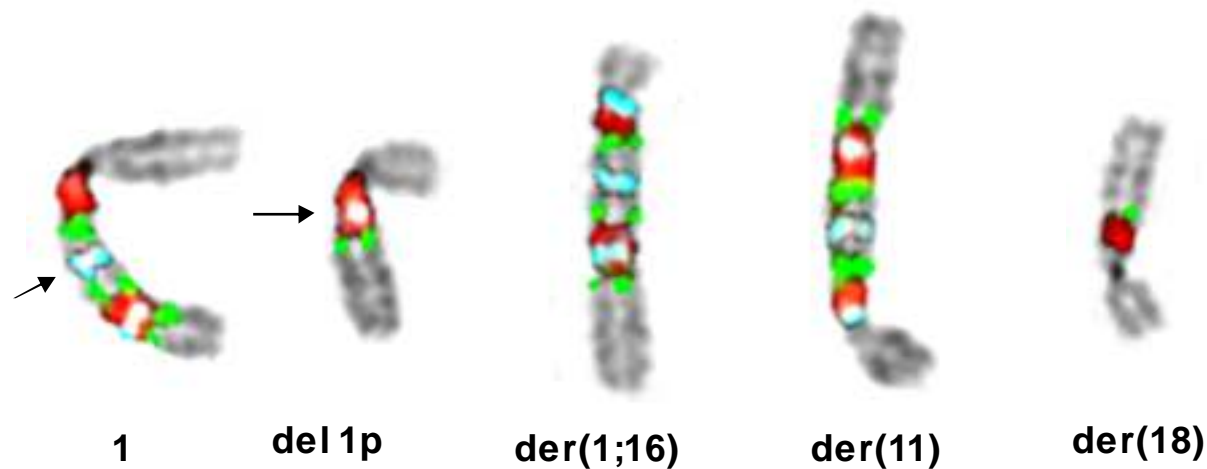
February 2009



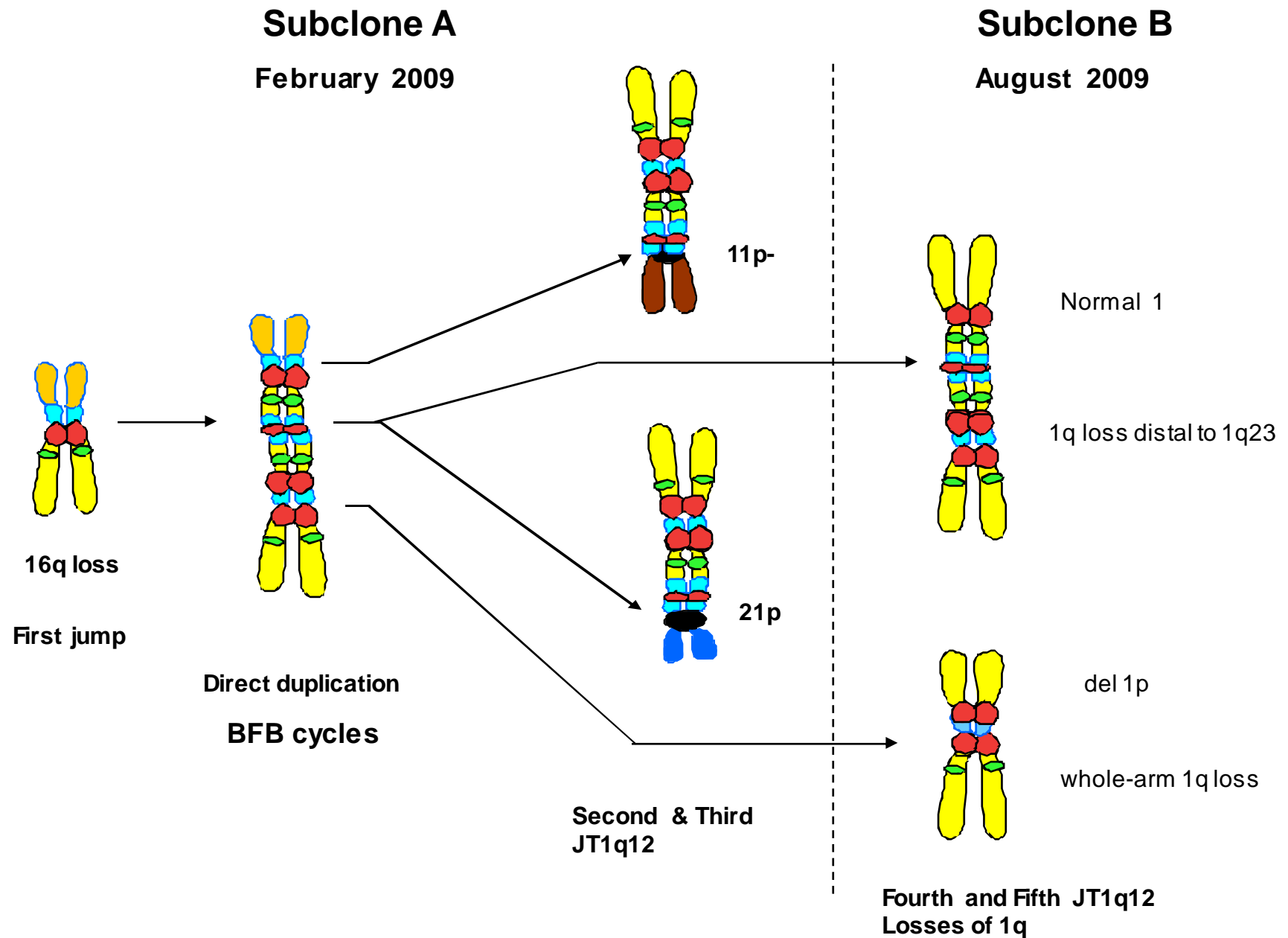
CN 1q21 = 9
CN 16q11 = 6
CN 16q- = 1
CN 11p- = 1
CN 18p- = 1

Subclone B

August 2009



CN 1q21 = 11
CN 16q11 = 9
CN 16q- = 1
CN 11p- = 1
CN 18p- = 1



Multiple mechanisms contribute to CN variations relating to JT1q12

- JT1q12 pericentromeric heterochromatin duplicates segments both proximal and distal (Cases # 1, 2 & 3)
- JT1q12 translocations and BFB cycles interact to amplify chromosome segments into ladder-like structures composed of equally spaced inverted duplications (Cases # 2 & 3)
- The same JT1q12 can cause deletions in multiple RC, and help explain uniparental disomy of 1q (Case # 3)
- JT1q12 aberrations are inherently unstable and may be lost as micronuclei in subclones (Case # 3)

Summary

- JT1q12 and amplification of 1q21 are mediated by unstable pericentromeric heterochromatin
- Telomeric JT1q12 are usually associated only with CN gain of the 1q21 amplicon
- Whole-arm JT1q12 are associated with CN gain of 1q21 amplicon but also cause deletions in RC
- JT1q12 aberrations can duplicate and translocate non-homologous chromosome segments resulting in multiple CN variations in RC