Myeloproliferative Neoplasm (MPN) Hotspot Panel

The UNC Molecular Genetics Laboratory performs a hotspot panel targeting selected regions of *JAK2*, *CALR*, and *MPL* using next-generation sequencing to facilitate diagnosis of MPNs.

Rationale for testing:

Testing for the presence of somatic gene mutations may assist in diagnosis or exclusion of *BCR-ABL1* negative myeloproliferative neoplasms (MPNs).

Clinical Indications for Myeloproliferative Neoplasm Hostpot Panel testing:

The three most common *BCR-ABL1* negative myeloproliferative neoplasms are polycythemia vera (PV), essential thrombocythemia (ET), and primary myelofibrosis (PMF). PV and ET are characterized by non-physiologic elevation of hemoglobin or platelet count, respectively. Primary myelofibrosis is characterized by a constellation of bone marrow findings, ultimately leading to bone marrow fibrosis. Mutational features of these neoplasms are shown below

- 1) **PV:** *JAK*2 p.V617F (exon 14) is present >95% of cases of PV and nearly all remaining cases having a mutation in exon 12.
- 2) ET and PMF: JAK2, CALR, or MPL mutations are present in approximately 90% of cases of ET and PMF. For patients with low to moderate clinical suspicion for a MPN, a negative result greatly diminishes the likelihood of a neoplastic process. When there is a high suspicion for a myeloproliferative neoplasm, the broader Myeloid Mutation Panel (MDS and MPN) may be warranted to help identify rare JAK2/CALR/MPL triple negative cases of ET or PMF.

Specimen Requirements for the Myeloid Mutation Panel:

Bone marrow aspirate (1 mL, EDTA) or peripheral blood (3mL, EDTA) having at least 30% myeloid cells, and refrigerated for up to 72 hours. Unacceptable sample types include: fresh, frozen, or paraffin embedded tissue. The assay is sensitive to variants above 5% allele frequency (10% clonal cells). This test is NOT appropriate for MRD monitoring. For patients with known *JAK2* p.V617F positive disease, the quantitative *JAK2* p.V617F assay should be used for monitoring.

Gene Regions Tested: CALR (exon 9), JAK2 (exons 12,14), and MPL (exon 10)

Limitations:

Gene amplifications, translocations, and insertions or deletions over 90 bases in length are not reliably detected by this assay. Variants predicted to be non-deleterious (synonymous coding changes and population variants) are not reported. Lack of mutation does not exclude myeloid neoplasia. Presence of clonality does not establish a diagnosis of malignancy.

References:

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- 5. Pardanani DA et al. MPL515 mutations in myeloproliferative and other myeloid disorders: a study of 1182 patients. Blood. 2006; 108(10):3472-3476. PMID: 16868251
- 6. McClure, Rebecca F. et al. Clinical Significance of DNA Variants in Chronic Myeloid Neoplasms. The Journal of Molecular Diagnostics, Volume 20, Issue 6, 717 737

Questions?

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