

# ***RUNX1-RUNX1T1 (AML1-ETO) t(8;21) Quantitative***

## **Indications for Ordering**

Detect and quantitate *RUNX1-RUNX1T1* fusions arising from t(8;21) in acute myeloid leukemia (AML)

## **Test Description**

Quantitative reverse transcription polymerase chain reaction (PCR)

- Whole blood, bone marrow (BM)

## **Tests to Consider**

### **Primary test**

[RUNX1-RUNX1T1 \(AML1-ETO\) t\(8;21\) Detection, Quantitative 2010138](#)

- Can be used for minimal residual disease monitoring

### **Related tests**

[Acute Myeloid Leukemia Panel by FISH 2011132](#)

- Diagnosis, prognosis, and monitoring of AML
- Includes

Probe Target	Gene(s)/Unique Sequence
t(15;17)(q24;q21)	<i>PML-RARA</i>
t(8;21)(q22;q22)	<i>RUNX1T1-RUNX1 (ETO-AML1)</i>
inv(16)(p13.3q22)	<i>CBFB</i>
11q23	<i>KMT2A (MLL)</i>
inv(3) or t(3;3)	<i>RPN1-MECOM (EVI1)</i>
del(5)(q31)	<i>EGR1</i>
del(7)(q31)/-7	D7S486

[Chromosome Analysis, Bone Marrow 2002292](#)

- Diagnosis, prognosis, and monitoring of AML

[Chromosome Analysis, Bone Marrow with Reflex to Genomic Microarray 2007130](#)

- Diagnosis, prognosis, and monitoring of AML
- If chromosome analysis is “normal” or “no growth,” then genomic microarray testing will be added

[Cytogenomic SNP Microarray – Oncology 2006325](#)

- Preferred test for fresh specimens at time of diagnosis for detecting prognostically important genomic abnormalities in leukemias/lymphomas and solid tumors involving
  - Loss/gain of DNA
  - Loss of heterozygosity (LOH)
- Monitor disease progression and response to therapy

[Chromosome FISH, Interphase 2002298](#)

- Specific FISH probe for t(8;21) must be requested

[Myeloid Malignancies Mutation Panel by Next Generation Sequencing 2011117](#)

- Assess for single gene mutations, including substitutions and insertions and deletions that may have diagnostic, prognostic, and/or therapeutic significance

[KIT Mutations in AML by Fragment Analysis and Sequencing 2002437](#)

- Prognostication in core-binding factor-related (CBF) AML (NCCN, 2011)

## **Disease Overview**

**Incidence** – t(8;21) AML represents 5-7% of de novo adult AMLs and 11-13% of pediatric AMLs

### **Treatment issues**

- Identification of t(8;21) AML may influence therapy and survival
- Use of FISH or PCR for identification of this translocation is important in treatment decisions
  - Quantitative test can be used in monitoring
- *KIT* mutation testing is also important since the presence of the mutation is associated with a worse outcome

## **Test Interpretation**

### **Sensitivity/specificity**

- Analytical sensitivity – 1 cell with t(8;21) in 1,000 normal cells
- Analytical specificity – 100%

### **Results**

- Detected – *RUNX1-RUNX1T1* transcripts identified and quantitated
- Not detected – No *RUNX1-RUNX1T1* transcripts detected

### **Limitations**

- “Not detected” does not exclude the possibility of *RUNX1-RUNX1T1* transcripts below the test limit of detection
- BM samples preferred for maximum sensitivity
- Poor RNA yield and/or quality due to sample age or hypocellularity will negatively impact the test