

JAK2 or CALR mutation status defines subtypes of essential thrombocythemia with substantially different clinical course and outcomes

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Supplemental Methods and Tables

Supplemental Methods

Diagnosis of JAK2 mutated polycythemia vera according to the criteria of the British Committee for Standards in Hematology

Diagnosis of *JAK2* mutated polycythemia vera requires both of the following 2 criteria to be present: 1) high hematocrit (>0.52 in men, >0.48 in women) or raised red cell mass (>25% above predicted); 2) mutation in *JAK2*, i.e., *JAK2* (V617F) or mutation of exon 12. These criteria are very similar to the major criteria of the WHO classification, which considers hemoglobin level (>18.5 g/dL in men, >16.5 g/dL in women, or other evidence of increased red cell mass) instead of hematocrit. The only difference is that the WHO classification requires, in addition to the two major criteria, at least one minor criterion (bone marrow biopsy showing hypercellularity, serum erythropoietin below the normal range, or endogenous erythroid colony formation in vitro).

In order to assess polycythemic transformation of essential thrombocythemia, we adopted the criteria of the British Committee for Standards in Hematology since sequential evaluations of bone marrow biopsy were not available in most patients.

References

1. McMullin MF, Bareford D, Campbell P, et al. Guidelines for the diagnosis, investigation and management of polycythaemia/erythrocytosis. *Br J Haematol.* 2005;130(2):174-195.
2. McMullin MF, Reilly JT, Campbell P, et al. Amendment to the guideline for diagnosis and investigation of polycythaemia/erythrocytosis. *Br J Haematol.* 2007;138(6):821-822.

Sanger sequencing of *CALR* exon 9

The following M13-tagged primers were used for PCR

- Forward 5'-tgtaaaacgacggccagtAAGCAAGGGCTATCGGTAT-3'
- Reverse 5'-cagggaaacagctatgaccAACCAAAATCCACCCCAAAT-3'

and for sequencing

- Forward 5'-TGTAAAACGACGGCCAGT-3'.

Supplemental Table 1. Patients studied in the present work in the analyses of genotype/phenotype relationships and clinical outcomes.

Myeloproliferative neoplasm	JAK2 (V617F) mutated (%)	CALR exon 9 mutated (%)	JAK2/MPL/CALR wild-type (%)	All genotypes
<i>Patients belonging to the initial patient population</i>				
Essential thrombocythemia	466	176	75	717
Polycythemia vera	468	-	-	468
All patients with PV or ET				1185
<i>Patients with secondary myelofibrosis evaluated for mutant allele burden</i>				
Post-ET myelofibrosis	18	10		28
Post-PV myelofibrosis	55			55
All patients with secondary myelofibrosis				83
<i>Total no.</i>				1268

Supplemental Table 2. Type and frequency of *CALR* mutations in patients with essential thrombocythemia with nonmutated *JAK2* and *MPL*. The nomenclature adopted here is that of Klampfl et al [N Engl J Med. 2013 Dec 19;369(25):2379-90. Epub 2013 Dec 10].

<i>CALR</i> mutation	Nucleotide	Aminoacid*	Change		Frequency	
			No.	%	No.	%
Type 1	c.1092_1143del	AAE KQM KDKQ DEEQ QLRRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	81	46.0		
Type 2	c.1154_1155insTTGTC	AAE KQM KDKQ DEEQ RLKEEEE D KKRKEEEE A EDNCRRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	67	38.1		
Type 3	c.1095_1140del	AAE KQM KDKQ DEEQ QRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	2	1.1		
Type 4	c.1102_1135del	AAE KQM KDKQ DEEQ QLRRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	4	2.3		
Type 5	c.1091_1142del	AAE KQM KDKQ DEEQ QRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	2	1.1		
Type 6	c.1094_1139del	AAE KQM KDKQ DEEQ RRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 8	c.1104_1137del	AAE KQM KDKQ DEEQ QLKRRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 9	c.1140del	AAE KQM KDKQ DEEQ QLKEEEE D KKRKEEE R QRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	2	1.1		
Type 10	c.1154delinsTGTGTC	AAE KQM KDKQ DEEQ QLKEEEE D KKRKEEEE A EDMCRRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 13	c.1100_1134delinsA	AAE KQM KDKQ DEEQ QRQRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 16	c.1102_1137delinsCA	AAE KQM KDKQ DEEQ QLQRRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 18	c.1104_1155del	AAE KQM KDKQ DEEQ QLKRMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 20	c.1118_1136del	AAE KQM KDKQ DEEQ QLKEEEE G RRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 21	c.1118_1145delinsCGTTA	AAE KQM KDKQ DEEQ QLKEEEE ALRGQGG -	1	0.6		
Type 22	c.1120_1123del	AAE KQM KDKQ DEEQ QLKEEEE N A KRRRR QRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 28	c.1131_1152del	AAE KQM KDKQ DEEQ QLKEEEE D KKRKRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 32	c.1153_1154delinsTGTC	AAE KQM KDKQ DEEQ QLKEEEE D KKRKEEEE A ED C RRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 34	c.1154_delinsCTTGTC	AAE KQM KDKQ DEEQ QLKEEEE D KKRKEEEE A ED T CRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 36	c.1155_1156insTGTGCG	AAE KQM KDKQ DEEQ QLKEEEE D KKRKEEEE A ED K CRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	2	1.1		
Type 37 [§]	c.1091-1124del	AAE KQM KDKQ DEEQ AKRRRRQRTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 38 [§]	c.1101-1152del	AAE KQM KDKQ DEEQ QLRRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 39 [§]	c.1109-1145del	AAE KQM KDKQ DEEQ QLKEERTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Type 40 [§]	c.1113A>C;1122-1140del	AAE KQM KDKQ DEEQ QLKEEDED K RQTRMMRTKMRMRRMRRTRRK MRRK MSPAPRTSCREACLQGWTEA-	1	0.6		
Total			176	100		
<i>Wild-type reference sequence</i>		AAE KQM KDKQ DEEQ QLKEEEE D KKRKEEEE A ED K EDED K DEDEE D KEEDEE D VPGQAKDEL-				

* The aminoacid sequence starting from codon A352 is reported. Acid and basic residues are in red and blue, respectively.

[§] Novel *CALR* mutations with respect to *CALR* abnormalities described in the original report by Klampfl et al [N Engl J Med. 2013 Dec 19;369(25):2379-90. Epub 2013 Dec 10].