

Short Telomeres, Telomeropathy, and Subclinical Extrapulmonary Organ Damage in Patients With Interstitial Lung Disease

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e-Table 1: Criteria for telomere testing

22 patients test	ed for short teld	meres							
	Macrocytosis	Anemia	Thrombocytopenia	Abnormal	HSM	Fatty	Family history		
				coagulation profile		liver/ abnormal LFT	FIP	Early graying	Cirrhosis/AA
Tested for telomere length (N)	19	5	4	2	0	6	10	10	1
Confirmed short telomeres (N)	13	5	2	1	0	4	7	8	1

AA = aplastic anemia

FIP = familial interstitial pneumonia

LFT = liver function test HSM= Hepatosplenomegaly



e-Table 2: Summary of demographic and laboratory data.

	Not suspected of short	Suspected of short telomere
	telomere	N=30
	N=97	
Age	62.46 ± 8.73	63.39 ± 7.11
Female (%)	36 (36.7)	11 (36.6)
Diagnosis (biopsy proven)		
IPF	60 (44)	16 (11)
Unclassified	12 (8)	7 (4)
NSIP	10 (7)	2 (2)
CPFE	11 (4)	3 (2)
HP	3 (2)	2 (2)
LCH	1 (1)	-
Mean corpuscular volume*	90.5 ± 5.04	97.8 ± 5.68
Hemoglobin	14.24 ± 3.34	13.5 ± 2.98
Platelets^	272 ± 79	225 ± 59

*p<0.0001; ^p<0.001

CPFE: Combined pulmonary fibrosis emphysema

HP: hypersensitivity pneumonitis IPF: idiopathic pulmonary fibrosis LCH: Langerhans cell histiocytosis

NSIP: Non-specific interstitial pneumonia



e-Table 3: Demographic and clinical data of patients tested for short telomeres

Subject	Sex, Age	Biopsy	Familial	Other familial traits	Hematologic abnormality	Hepatic abnormality	Telomere length
Idiopathic	pulmonary fil	brosis					
1	M, 48	Yes	No	Early graying	М	N	Short
2	M, 58	No	Yes	Early graying	N	N	Short
3	F, 45	Yes	Yes	No	N	Fatty liver	Normal
4	F, 68	Yes	No	No	Α, Μ	N	Short
5	M, 72	No	No	No	М	N	Short
6	M, 63	Yes	Yes	Early graying	М	N	Normal
7	M, 71	Yes	No	No	Α, Μ	N	Short
8	M, 58	No	No	No	A, M,T	N	Short
9	M, 58	No	Yes	Cirrhosis, aplastic anemia	A, M,T	Low albumin	Short
10	F, 59	No	Yes	Early graying	N	Elevated AST/ALT/ALK P	Short

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11	F,56	Yes	Yes	No	M	N	Short
Non sp	ecific interstitia	I pneumonia	a				
12	F, 54	Yes	No	No	M	N	Normal
Hypers	ensitivity pneu	monitis					
13	F, 51	Yes	No	Early graying	М	Low protein	Short
14	F, 66	Yes	No	Early graying	A, M	N	Short
Unclass	sified interstitia	l pneumonia	a 5	l		1	
15	M, 69	No	No	No	M	N	Normal
16	M, 65	Yes	Yes	Early graying	М	N	Normal
17	M, 54	Yes	Yes	Early graying	М	N	Short
18	M, 70	No	No	No	M	N	Normal
19	M, 57	No	N	N	М, Т	N	Short
Combir	ned Pulmonary	Fibrosis Em	physema 3				
20	M, 54	No	Yes	Early graying	M	N	Short



21	M, 68	Yes	No	No	М, Т	Low protein and globulin	Normal
22	M, 60	Yes	Yes	Early graying	М	Fatty	Short

A = anemia

ALT= Alanine Aminotransferase

ALK P= Alkaline Phosphatase

AST= Aspartate Aminotransferase

M = macrocytosis

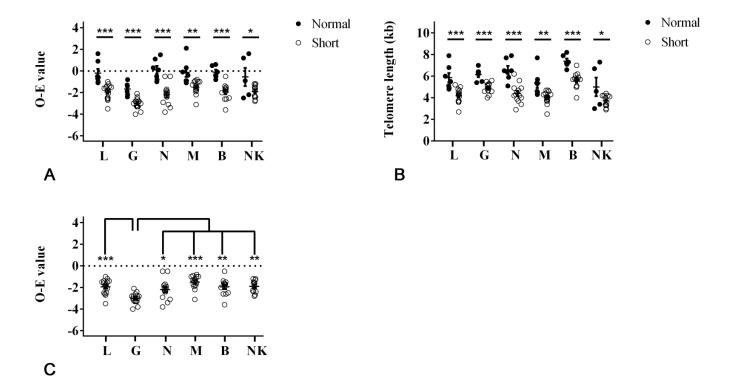
N = normal

T = thrombocytopenia

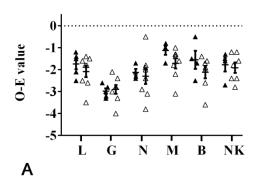
e-Table 4: Absolute and age-adjusted telomere length in leukocyte subtypes in patients with normal and abnormal bone marrow biopsies

	Lymphocytes	Granulocytes	Naïve T-	Memory T-	B-	Natural		
			cells	cells	Lymphocytes	Killers		
Absolute telomere ler	Absolute telomere length							
Normal marrow	4.38 ± 0.54	4.92 ± 0.33	4.40 ±	4.37 ±	6.00 ±	3.85 ±		
(n=5)			0.39#	0.40#	0.80#	0.57#		
Hypocellular	4.02 ± 0.64	4.98 ± 0.50	4.27 ± 0.82	3.78 ± 0.60	5.42 ±	3.68 ±		
marrow (n=8)					0.71^	0.55^		
Age adjusted telomer	Age adjusted telomere length to the 50th percentile for age							
Normal marrow	-1.74 ± 0.54	-2.98 ± 0.29	-2.12 ±	-1.13 ±	-1.55 ±	-1.77 ±		
(n=5)			0.31#	0.39#	0.82#	0.63#		
Hypocellular	-2.08 ± 0.72	-2.90 ± 0.57	-2.30 ±	-1.71 ±	-2.11 ±	-1.91 ±		
marrow (n=8)			1.00	0.67	0.76^	0.63^		

#n=4; ^n=7



Supplemental e-Figure 1: Telomere length measurements in leukocyte subsets from patients with normal telomere length (black circle) versus patients with short telomeres (open circle). Leukocyte subtypes that were tested: lymphocytes (L) (n=7•, 15•), granulocytes (G) (n=6•, 15•), "naïve" T lymphocytes (CD45RA+) (N) (n=7•,14•), memory T lymphocytes (CD45RA-) (M) (n=6•,13•), B lymphocytes (CD20+) (B) (n=6•,13•), and natural killer (CD57+) (NK) (n=5•,12•). Shown are samples represented by a circle as well as mean and standard deviation of each subtype. In A) difference in telomere length between observed – expected value at the 50th percentile, with dotted line representing no difference between expected and observed telomere length. In B) absolute telomere length is shown. (Differences assessed using student *t*-test; * P < 0.05; ** P < 0.01; *** P < 0.001). In C) Age-adjusted telomere length measurements in leukocyte subsets from patients with short telomeres. Granulocytes age-adjusted telomere length is significantly different than all other leukocytes subtypes. (*p<0.05, ** p<0.01, *** p<0.001 by ANOVA).



- ▲ Normal△ Abnormal
- Telomere length (kb)
- Normal
- Abnormal

Supplemental e-Figure 2: Telomere length measurements in leukocyte subsets from patients with short telomeres with (open triangle) and without (black triangle) bone marrow abnormalities. Leukocyte subtypes that were tested: lymphocytes (L) ($n=5 \triangle$, $8 \triangle$), granulocytes (G) ($n=5 \triangle$, $8 \triangle$), "naïve" T lymphocytes (CD45RA+) (N) ($n=4 \triangle$, $8 \triangle$), memory T lymphocytes (CD45RA-) (M) ($n=4 \triangle$, $8 \triangle$), B lymphocytes (CD20+) (B) ($n=4 \triangle$, $8 \triangle$), and natural killer (CD57+) (NK) ($n=4 \triangle$, $8 \triangle$). Shown are samples represented by a triangle as well as mean and standard deviation of each subtype. In A) difference in telomere length between observed – expected value at the 50th percentile. Dotted line represents no difference between observed and expected telomere-length. In B) absolute telomere length is shown. No statistically significant difference was observed between normal and abnormal bone marrow groups in all subtypes.

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