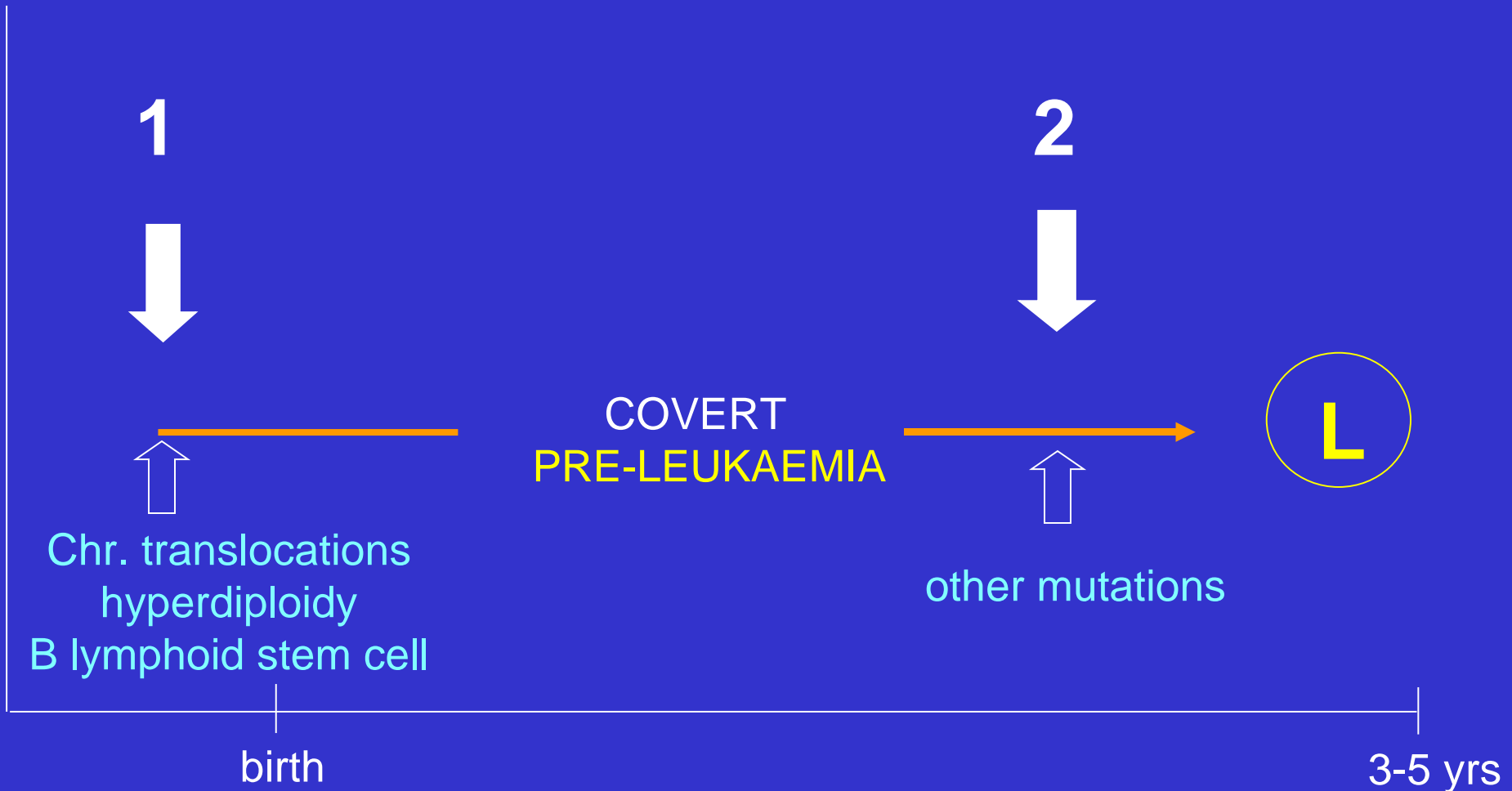


**INFECTION, IMMUNE RESPONSES AND THE
AETIOLOGY OF CHILDHOOD LEUKAEMIA**

Mel Greaves

A MINIMAL 2 STEP MODEL FOR ACUTE LYMPHOBLASTIC LEUKAEMIA



PRE-NATAL ORIGINS OF PAEDIATRIC LEUKAEMIA

- Clonal relationships of concordant leukaemia in monozygotic twins
- Retrospective molecular scrutiny of archived neonatal blood spots of children with leukaemia
- Molecular screening of cord blood of new borns

EARLY OR INITIATING EVENTS IN LEUKAEMOGENESIS

- Foetal haemopoiesis (liver / bone marrow?)
- Chromosome translocation / gene fusions
 - MLL-AF4*
 - TEL-AML1*
 - AML1-ETO*
- Chromosomal hyperdiploidy
- Chromosomal instability
- Mutations - *GATA1* in TMD / AML in Down's

TEL-AML1 FUSION IS AN INITIATING EVENT BUT IS INSUFFICIENT FOR LEUKAEMOGENESIS

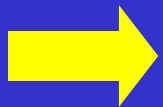
- Concordance rate in monozygotic twins is ~10%
(Greaves et al, 2003, Blood, 102: 2321-2333)
- Mice transgenic for *TEL-AML1* are pre-leukaemic
(Tsuzuki et al, 2004, PNAS, 101: 8443-8448)

∴ secondary, post-natal events are critical

FREQUENCY AND RISK OF ACUTE LYMPHOBLASTIC LEUKAEMIA?

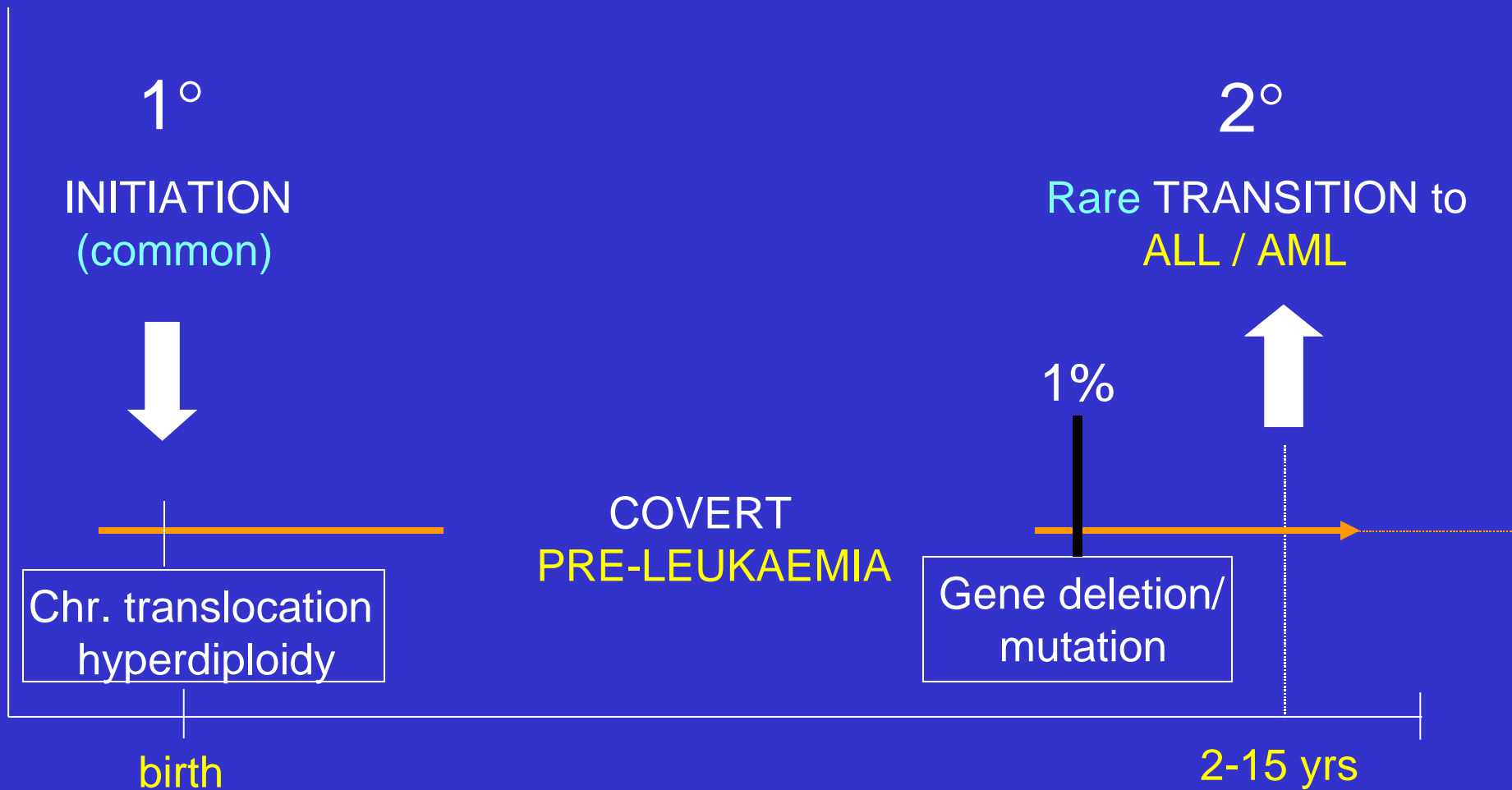
Risk of ALL	~ 1 in 2,000
Risk of ALL with <i>TEL-AML1</i>	~ 1 in 10,000
Risk of <i>TEL-AML1</i> ⁺ cord blood	~ 1 in 100

LEUKAEMIA IS INITIATED, PRE-NATALLY
AT ~100 x THE DISEASE RATE



POST-NATAL SECONDARY EVENTS ARE THE
BOTTLENECK FOR LEUKAEMIA AETIOLOGY

NATURAL HISTORY OF PAEDIATRIC ACUTE LEUKAEMIAS



MOLECULAR SCREENING FOR VIRAL SEQUENCES IN CHILDHOOD ALL

Virus Screened For

- Polyomaviruses JC and BK
- Parvovirus B19
- Human herpesvirus family (HHV4, 5, 6, 7 and 8)
- Bovine leukaemia virus
- TT virus
- Exogenous microbial sequences

Screening Method

- Specific PCR*
- Specific PCR
- PCR using degenerate primers*
- Southern blotting
- Specific PCR
- Representative difference analysis*

* MacKenzie J, Jarrett RF et al

INFECTION-BASED HYPOTHESES FOR THE AETIOLOGY OF CHILDHOOD LEUKAEMIA

Greaves M (1988) *Leukemia*

The 'delayed infection' hypothesis

- Model :
- Timing of common infections critical (- delay?)
cf. hygiene hypothesis for allergies and type 1 diabetes
 - Abnormal immune response facilitates expansion of pre-leukaemic clone
 - Genetic susceptibility impacts on risk

A CAUSAL MECHANISM FOR CHILDHOOD LEUKAEMIA

CANDIDATE EXPOSURES?

ABNORMAL IMMUNE
RESPONSE TO COMMON
INFECTIONS ?

1

2

TEL-AML1
Hyperdiploidy

TEL^{del}
FLT-3^{mut}

ALL

IMMUNE RESPONSE GENES?

INHERITED SUSCEPTIBILITY?



EPIDEMIOLOGICAL EVIDENCE SUPPORTING THE 'DELAYED INFECTION' HYPOTHESIS

- Increased common infections in *infancy* are *protective*
- Increased social contacts in *infancy* are *protective*
 - parity
 - attendance at playgroups

(- proxies for infection)

MODEL

2006

