CASE REPORT



Unrelated hematopoietic stem cell transplantation for familial platelet disorder/acute myeloid leukemia with germline *RUNX1* mutations

Kazunori Toratani¹ · Mizuki Watanabe¹ · Junya Kanda¹ · Tomomi Oka^{1,2} · Mizuki Hyuga¹ · Yasuyuki Arai^{1,3} · Makoto Iwasaki¹ · Maki Sakurada¹ · Yasuhito Nannya^{4,5} · Seishi Ogawa⁴ · Takahiro Yamada² · Akifumi Takaori-Kondo¹

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Abstract

Germline mutations in *RUNX1* result in rare autosomal-dominant familial platelet disorder with predisposition to acute myeloid leukemia (FPD/AML). As genetic analysis is becoming increasingly prevalent, the diagnosis rate of FPD/AML is expected to increase. In this report, we present two pedigrees, one diagnosed molecularly and another highly suspected to be FPD/AML, whose members both received allogeneic hematopoietic stem cell transplantation (HSCT). Both pedigrees had a family history of thrombocytopenia, platelet dysfunction, and hematological malignancies. One family inherited a frameshift mutation (p.P240fs) of *RUNX1*, a known pathogenic variant. Another family inherited a point mutation (p.G168R) in the runt-homology domain, the clinical significance of which is uncertain at this point. As this mutation was completely absent from all population databases and had a relatively high REVEL score of 0.947, we thought that it would be dangerous to ignore its possible pathogenicity. Consequently, we avoided choosing HSCT donors from relatives of both families and performed HSCT from unrelated donors. In conclusion, our experience with two families of FPD/AML highlights the importance of searching for gene mutations associated with germline predisposition and indicates the necessity of developing a donor coordination system for FPD/AML patients, as well as a support system for families.

Keywords Familial platelet disorder \cdot Myelodysplastic syndrome \cdot Acute myeloid leukemia \cdot *RUNX1* mutation \cdot Germline \cdot Genetic pedigree

Introduction

Germline mutations in runt-related transcription factor 1 (*RUNX1*) result in rare autosomal-dominant familial platelet disorder with predisposition to acute myeloid leukemia (FPD/AML) [1]. The clinical application of next-generation

Junya Kanda jkanda16@kuhp.kyoto-u.ac.jp

- ¹ Department of Hematology and Oncology, Graduate School of Medicine, Kyoto University, 54 Shogoin-Kawahara-Cho, Kyoto, Kyoto 606-8507, Japan
- ² Clinical Genetics Unit, Kyoto University Hospital, Kyoto, Japan
- ³ Department of Clinical Laboratory Medicine, Kyoto University, Kyoto, Japan
- ⁴ Department of Pathology and Tumor Biology, Kyoto University, Kyoto, Japan
- ⁵ Division of Hematopoietic Disease Control, Institute of Medical Science, The University of Tokyo, Tokyo, Japan

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sequencing has revealed a higher preponderance of FPD/ AML families than expected, with more than 130 independent FPD/AML families with germline *RUNX1* genetic alterations reported [2]. However, their clinical presentation and prognosis, along with the respective characteristics of genetic alterations in each pedigree, are still insufficiently understood. Furthermore, a standard donor selection procedure for these patients has also not been developed, although allogeneic hematopoietic stem cell transplantation (HSCT) is the only curative treatment. In this report, we present two pedigrees: one diagnosed molecularly and another highly suspected to be FPD/AML, both of whose members underwent allogeneic hematopoietic stem cell transplantation (HSCT) (Table 1).