

## Case Report Section

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### A case of pre-B ALL with t(8;14)(q11;q32)

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#### Clinics

##### Age and sex

11 years old male patient.

##### Previous history

No preleukemia. No previous malignancy. No inborn condition of note.

##### Organomegaly

Hepatomegaly, splenomegaly, no enlarged lymph nodes, no central nervous system involvement.

#### Blood

WBC:  $4.3 \times 10^9/l$

HB: 3.3g/dl

Platelets:  $16 \times 10^9/l$

Blasts: 2%

Bone marrow: 99 blasts%

#### Cyto-Pathology Classification

#### Cytology

ALL-L1

#### Immunophenotype

CD19+/CD10+/Tdt+

#### Rearranged Ig Tcr

IgH: +, TCR: +

#### Diagnosis

pre-B ALL

#### Survival

Date of diagnosis: 08-2000

Complete remission was obtained.

Status: Alive.

Survival: 10 +months

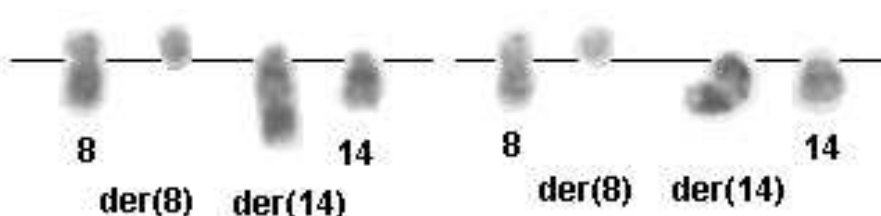
#### Karyotype

Sample :Peripheral blood sample

Culture time :24 h culture

Banding: G-banding.

Results : 49,XY,+X,t(8;14)(q11;q32),  
+12,+21[15]/46,XY[10]



t(8;14)(q11;q32) G- banding - Gitte Birk Kerndrup, Steen Rosthøj.

## Comments

This case, an eleven year old boy does not have Down syndrome or other inborn genetic conditions. His spleen and liver were remarkably enlarged (spleen: to the umbilical plane, liver: 4 fingers below the costal margin). He had no lymph node involvement, nor CNS- or testis disease. He did not, on flowcytometric immune phenotyping, show evidence of bilineage differentiation. The phenotype was the usual for a pre-B ALL (CD10+/CD19+/Tdt+).

## References

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