論文題目: Loss of p53 Induces Leukemic Transformation in a Murine Model of Jak2 V617F-driven Polycythemia Vera

(Jak2 V617F 変異陽性真性多血症マウスモデルにおいて p53 欠失は白血病化を 引き起こす)

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Myeloproliferative neoplasms (MPN) have an inherent tendency toward leukemic transformation, but its mechanisms remain largely unknown. Recently, TP53 mutation is reported to be frequently found in cases with post-MPN leukemia. Here, to address the contribution of p53 loss to leukemic transformation from MPN in vivo, I retrovirally transduced c-kit⁺ bone marrow (BM) cells from p53 knockout (p53^{-/-}) and littermate mice (p53^{+/+}) with either wild-type Jak2 (Jak2WT) or Jak2V617F respectively, and transplanted them into lethally irradiated mice. At 3 weeks after transplantation, both recipients of Jak2V617F/p53^{-/-} and Jak2V617F/p53^{+/+} cells developed a polycythemia vera-like disease characterized by high WBC count and elevated hemoglobin (Hb) level. Jak2V617F/p53^{+/+} mice survived and continued to have elevated Hb level, whereas 5 weeks after transplantation, Jak2V617F/p53^{-/-} recipients developed cachexia, and their Hb level declined. Eventually, these mice developed fatal leukemia with a median survival of 46.5 days after transplantation, suggesting loss of p53 cooperates with Jak2V617F mutation to promote leukemic transformation from MPN.

To characterize these leukemias, I analyzed leukemic tissues from moribund Jak2V617F/p53^{-/-} mice. Peripheral blood smears and BM specimen from Jak2V617F/p53^{-/-} recipients showed a marked increase of erythroid precursors with dysplastic features, leading to suppression of normal hematopoiesis. Notably, Jak2V617F/p53^{-/-} mice displayed marked hepatosplenomegaly and

extensive pulmonary hemorrhage. Consistent with the histopathologic findings, Jak2V617F/p53^{-/-} animals exhibited a remarkable accumulation of erythroid precursors (CD71⁺), and especially more immature progenitors (Ter119⁻/CD71⁺) in the BM and spleen, compared with Jak2V617F/p53^{+/+} animals. These data suggest Jak2V617F/p53^{-/-} recipients developed the infiltrative disease with accumulation of immature erythroid cells, fulfilling the Bethesda Criteria of erythroleukemia in mice.

To assess the transplantability of Jak2V617F/p53^{-/-} leukemia, I injected unfractionated BM cells from Jak2V617F/p53^{-/-} mice into lethally irradiated mice. In all cases, lethal leukemia developed earlier than in primary recipients. Moreover, there was a significant increase in erythroid progenitors in secondary recipients, suggesting the erythroid component is the predominant lineage involved in this leukemia model. As Jak2V617F/p53^{-/-} leukemic tissues contained three major populations: CD71⁺ erythroid progenitors, Mac1⁺ mature myeloid cells, and lineage-negative (CD71⁻/Mac1⁻) primitive leukemic cells, I purified and transplanted these subfractions into secondary recipients to evaluate their leukemia-initiating potential. As a result, both lineage-negative (CD71⁻/Mac1⁻) cells and CD71⁺ erythroid progenitors possessed leukemiainitiating capacity, but Mac1⁺ myeloid cells could not reconstitute the disease. In addition, these two fractions had different capacities to induce leukemias; recipients of CD71⁺ cells rapidly developed erythroleukemia, whereas lineage-negative cells caused lethal leukemia after the polycythemic state. Moreover, hematopoietic tissues in recipients transplanted with CD71⁺ cells mainly consisted of erythroid lineages, whereas lineage-negative cells produced both erythroid and myeloid lineages, suggesting lineage-negative cells are more immature than CD71⁺ erythroid precursors in this type of leukemia. Furthermore, subsequent fractionation of lineage-negative cells revealed leukemia-initiating cells were enriched in Lin⁻/Sca-1⁺/c-kit⁺ (LSK) cells. To further characterize two types of leukemia-initiating cells in Jak2V617F/p53^{-/-} leukemia, I assessed their sensitivity to a JAK2 inhibitor, INCB18424, in vitro. Interestingly, INCB18424 treatment significantly reduced CD71⁺ cell proliferation, whereas LSK cells were able to expand in the presence of INCB18424, indicating different leukemia-initiating cells existing in post-MPN leukemia have different responsiveness to JAK2 inhibition. In addition, p53 restoration could ameliorate JAK2 V617F/*p53^{-/-}* leukemia in vivo, showing the importance of reestablishment of p53 function in p53-deleted leukemia.

In summary, these results demonstrate p53 loss is sufficient for inducing leukemic transformation in JAK2V617F-postive MPN and offers an in vivo model to assess novel therapeutic approaches for post-MPN leukemia. In addition, I revealed leukemia-initiating cells at different differentiation stages with unique characteristics could exist in post-MPN leukemia.