Case The patient was a 48 years -year-old woman, for in whom Pancytopaenia pancytopenia was pointed outdetected by the regular routine medical examination at her work place. Therefore she visited this workplace. She came to our hospital for elose inspection.further assessment. M4Eo according to (FAB Classification was suspected because of detecting abnormal eosinocyteseosinophils and the result of surface markersmarker analysis by the flowcytometry. Abnormal chromosomes, Chromosomal abnormalities such as inv-(16) or t-(16; 16), which are frequently found in M4Eo, weren't detectable were not detected in this case. But However, CBFB gene re-arrangement was detectabledetected by the meta phase metaphase fluorescence in situ hybridization (FISH (Fluorescence In Situ Hybridization). And) analysis. RT-PCR method confirmed expression of the CBFB-MYH11 fusion gene. Moreover, using inter-phase FISH, signalsignals of the CBFB-MYH11 fusion gene was detectable were detected in a couple of homologous chromosomes-by interphase FISH analysis. In addition-to-this, it was confirmed by the SKY method that there was the trans-location had occurred between the abnormal chromosome 16 with re-arranged CBFB gene rearrangement and chromosome 11. On the basis of Based on these findings, the easecould be diagnozed as diagnosis was AML with inv-(16) (defined by according to the

**書式変更:** フォント: 斜体

**書式変更:** フォント : 斜体

Topnotch Communications WHO classification). Concerning the <u>The patient</u>, following received remission introduction treatment, she induction therapy and has been in remission stage without showing any permeation outside the bone marrow.



Topnotch Communications