



Presence of 'ACKR1/DARC null' polymorphism in Arabs from Jisr az-Zarqa with Benign Ethnic Neutropenia

Dana Elhadad¹*, Amos J. Simon²*, Yotam Bronstein¹, Moshe Yana¹ and Nechama Sharon¹

1. Division of Pediatric Hematology-Oncology Laniado Medical Center, Netanya

2.Pediatric Department A and the Immunology Service, Jeffrey Modell Foundation Center, Edmond and Lily Safra Children's Hospital, Sheba Medical Center, Affiliated to the Sackler Faculty of Medicine, Tel Aviv University, Tel Aviv, Israel

 We describe the presence of the ACKR1 (rs2814778) polymorphism within a socially closed Arab community in Israel.
 To our knowledge this is the FIRST documentation of Duffy-null genotype in the Arab-Israeli

population.

We observed a strong correlation

	T/C –	C/C –	D
Characteristics	heterozygous	homozygous	P- value
	(N=4)	(N=26)	varac
WBC Count (K/ul)			
Mean (SD)	8.35 (0.83)	5.68 (1.57)	<0.
Median (IQR)	8.20 (1.5)	5.20 (1.5)	001
Range	7.5-9.5	3.6-11.2	
Neutrophil count (K/ul)			
Mean (SD)	3.80 (1.87)	2.20 (0.733)	
Median (IQR)	4.65 (3.00)	2.10 (1.20)	
Range	1.0-4.9	0.9-3.4	
Neutrophilic			
Count <i>,</i> % (n/N) >	75% (3/4)	34.6% (9/26)	
2.5 k/uL			
Relative			
Neutropenia, %			
(n/N)	0% (0/4)	42.3% (11/26)	< 0.01
between 2.5-1.5			
k/uL			
Neutropenia, %			
(n/N)	25% (1/4)	23.1% (6/26)	
< 1.5 k/uL			
Hemoglobin Count (g/dl)			
Mean (SD)	13.65 (2.83)	12.51 (1.88)	
Median (IQR)	12.80 (5.2)	12.40 (2.9)	
Range	11.4-17.6	9.1-17.1	
Platelets Count (K/ul)			
Mean (SD)	244.25 (53.98)	258.46 (49.06)	
Median (IQR)	232 (101)	260 (60)	
Range	195-318	140-362	
Age (years) ***			
Mean (SD)	15.5 (13.9)	28.3 (17.6)	
Median (IQR)	16.0 (25)	27.0 (26)	
Range	2.0-28.0	2.0-60.0	
Gender, % (n/N)			
		46.15%	
Female	75% (3/4)	(12/26)	
		53.85%	
Male	25% (1/4)	(14/26)	
Table 1: Patients	characteristic		0

between low neutrophil counts and the ACKR1 null- genotype.
Within the ACKR1-null genotype (C/C) subgroup, the mean neutrophil count was decreased while 35% of individuals displayed normal neutrophil counts. Interestingly, this is about 3.5-fold more common in our cohort than previously described studies.

A higher awareness of benign ethnic neutropenia within specific populations could prevent such investigations and minimize management setbacks in neutropenic patients.

Table 1: Patients characteristics according to ACKR1 genotype SD, standard deviation; IQR, interquartile range; WBC, white blood cell Statistically significant values are in bold

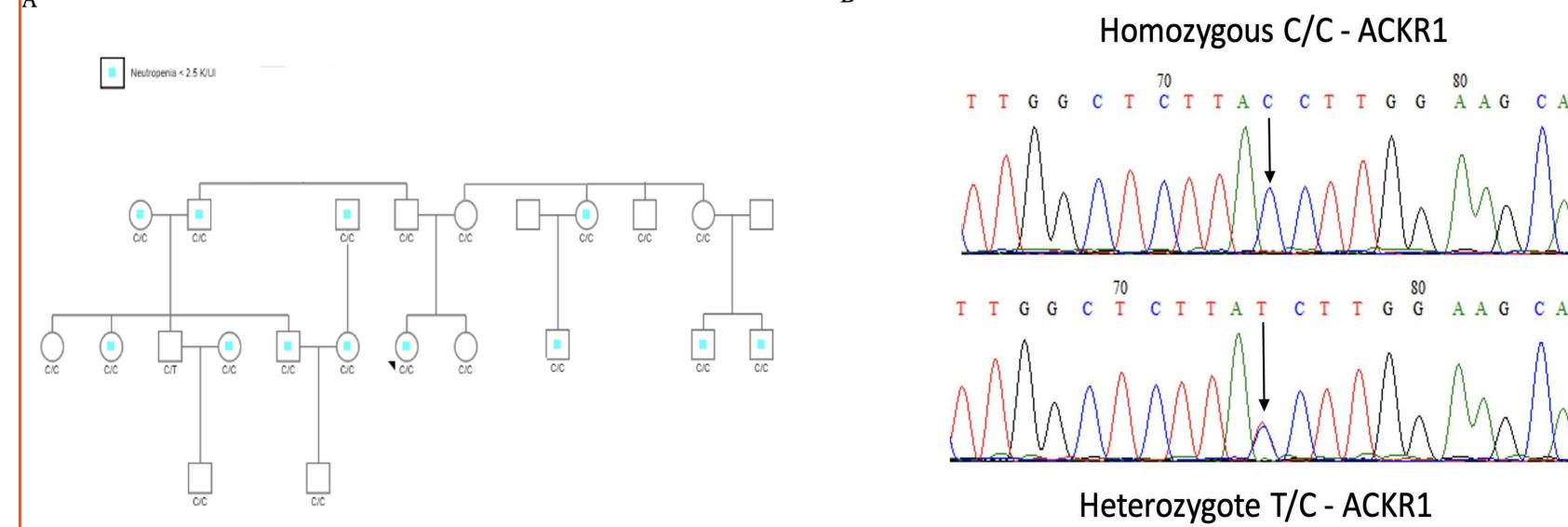


Figure 1 (A) Family pedigree analysis of Child A. Homozygous C/C - ACKR1 null genotype. (B) Sanger sequencing validation of the two detected ACKR1 genotypes in the studied family.