

# Reliable Clonality Detection with *IGH* FR1/2/3

## A Data-Driven Approach to Streamlined *IGH* Clonality Testing

### In B-cell clonality assessment, *not all IGH targets are created equal.*

Comprehensive evidence supports that routine testing for incomplete *IGH* D<sub>H</sub>-J<sub>H</sub> rearrangements offer little diagnostic value while increasing interpretive complexity. By relying on well-characterized *IGH* FR1, FR2, and FR3 (V<sub>H</sub>-D<sub>H</sub>-J<sub>H</sub>) assays as the first-line approach laboratories can:

- Maintain diagnostic accuracy and specificity
- Reduce false-positive risk from physiologic intermediates
- Streamline workflows and reporting consistency

### FR1/2/3 Capture the Vast Majority of Clonal *IGH* Rearrangements

The **BIOMED-2 Consortium** designed and validated *IGH* FR1/2/3 assays as the primary tools for identifying clonal B-cell populations because **complete V<sub>H</sub>-D<sub>H</sub>-J<sub>H</sub> rearrangements represent 80-90% of clinically relevant *IGH* targets.**<sup>1</sup> Because incomplete rearrangements are both infrequent and often less stable, targeting FR1,2 and 3 regions maximizes sensitivity and specificity for detecting clinically meaningful B-cell clonality.<sup>2</sup>

### Incomplete D<sub>H</sub>-J<sub>H</sub> Rearrangements Are Rare and Often Non-Specific

Incomplete rearrangements occur infrequently in mature B-cell populations and are frequently seen as physiologic byproducts of normal B-cell development. Their amplification can **produce pseudo-clonal results**, especially when testing samples with low tumor burden, resulting in **false-positive or ambiguous peaks.**<sup>3,4</sup>

### D<sub>H</sub>-J<sub>H</sub> Testing Adds Complexity Without Diagnostic Benefit

Including D<sub>H</sub>-J<sub>H</sub> assays in first-line testing can **increase the need for sequencing confirmation** and complicate interpretation without substantially improving sensitivity. Diagnostic experience and published data consistently show that the added workload outweighs any marginal gain in detection.<sup>5,6</sup>

### Summary Recommendation:

First-line clonality testing will use *IGH* FR1/2/3 assays only. Incomplete *IGH* (D-J) testing is omitted from routine analysis because the vast majority of clonal rearrangements are complete V<sub>H</sub>-D<sub>H</sub>-J<sub>H</sub> events.

## References

1. van Dongen JJ et al. *Leukemia*. 2003 Dec;17(12):2257-317; doi: 10.1038/sj.leu.2403202.
2. Degos, L., Linch, D. C., & Lowenberg, B. (Eds.). (2005). *Textbook of malignant hematology*. Taylor & Francis.
3. Dawidowska M et al. *Arch Immunol Ther Exp (Warsz)*. 2008 Nov-Dec;56(6):409-18; doi: 10.1007/s00005-008-0045-y.
4. Martín-Jiménez P et al. *Haematologica*. 2007 May;92(5):635-642; <https://doi.org/10.3324/haematol.10755>.
5. Payne K et al. *British Journal of Haematology*. 2011 Jul 16;155: 84-92; doi:10.1111/j.1365-2141.2011.08803.x.
6. Brüggemann M et al. *Leukemia*. 2019 Sep;33(9):2241-2253; doi: 10.1038/s41375-019-0496-7.