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***NFATC3-PLA2G15* is a novel intergenically-spliced chimera that is associated with aggressive T-acute lymphoblastic leukemia biology**

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Abstract:

Leukemias are frequently characterized by the expression of oncogenic fusion chimeras that normally arise due to chromosomal rearrangements. *Cis*-splicing of adjacent genes (*cis*-SAGe) results in transcription of intergenically-spliced chimeric RNAs (ISCs) in the absence of structural genomic changes, and aberrant ISC expression is now recognized as a potential cancer driver. We performed high-throughput RNA-sequencing of human T-acute lymphoblastic leukemia (T-ALL) samples, and used targeted analysis pipelines to detect fusion chimeras. We identified 55 candidate T-ALL-related ISCs, with a median of 4 per patient. We performed additional in-depth characterization of the *NFATC3-PLA2G15* chimera, which was expressed at variable levels in primary T-ALL cases. Experimental analysis revealed that the fusion had lower activity than wild-type *NFATC3 in vitro*, and that T-ALL blasts with elevated *NFATC3-PLA2G15* levels had reduced transcription of canonical NFAT pathway genes *in vivo*. Strikingly, we found that high expression of the *NFATC3-PLA2G15* chimera in leukemic blasts correlated with aggressive disease biology in murine patient-derived T-ALL xenografts, and poor prognosis in human T-ALL patients treated as part of the Francophone multinational GRAALL-2003 and -2005 studies. Our results suggest that ISCs are common in T-ALL, and that expression of specific ISCs may correlate with patient outcome.

Introduction: Gene fusion is a frequent hallmark of leukemia, and can arise due to a variety of structural chromosomal rearrangements, including translocation (e.g. *BCR-ABL1*), inversion (e.g. *CBF β -MYH11*) and interstitial deletion (e.g. *FIP1L1-PDGFR α*) (1). Fusion products are often critical mediators of leukemogenesis, and therefore represent attractive therapeutic targets, as typified by the founder example of BCR-ABL kinase inhibition with imatinib (2).

The advent of high-throughput RNA-sequencing has provided novel insights into the transcriptional landscapes of normal and malignant cells. It is now clear that expression of fusion mRNAs in the absence of structural rearrangements is more common than previously recognized. In particular, transcriptional read-through of a single mRNA between contiguous loci, also known as *cis*-splicing of adjacent genes (*cis*-SAGE), has been estimated to occur at 4-5% of the human genome (3, 4). Expression of the resultant intergenically-spliced chimeric mRNAs (ISCs) is frequent in normal cells (5, 6). Mounting evidence suggests that multiple cancers demonstrate aberrant ISC expression, and that experimental inhibition of specific fusion transcripts can be toxic for malignant cells (7, 8).

In order to investigate whether *cis*-SAGE generates biologically important fusions in T-acute lymphoblastic leukemia (T-ALL), we performed RNA-sequencing of 12 diagnostic leukemic samples. We detected a high frequency of T-ALL-associated ISCs, and notably found that expression of the *NFATC3-PLA2G15* chimera correlated with aggressive disease biology.

Materials and Methods:

RNA-sequencing: Paired-end stranded RNA-sequencing (2 x 50 bp) of the initial series of 12 samples was performed with poly(A)-enriched RNAs using the SOLiD HQ5500XL system (Life Technologies). Mapping, coverage and fusion discovery were determined using LifeScope™ (Life Technologies) using default parameters, with reference to version hg19 of the human genome (Table "RNA-seq"). Selection of fusion transcripts required a total of 3 reads spanning two distinct gene transcripts (including at least 1 paired-end read and 1 split read) as recommended by the manufacturer and previously published (Bond et al. 2015). Fusions detected in normal thymic RNA-seq samples were removed. Fusions that involved genes located within 30 kb of each other with the same transcriptional orientation were defined as candidate ISCs, which account for the majority of previously observed ISCs (BMC Med Genomics 4: 11. doi:10.1186/1755-8794-4-11; Genome Research 2006, 16:30-36). Sequencing of the second series of 12 samples was performed with poly(A)-enriched RNAs using the Illumina platform (paired-end 2 x 75 bp) and mapped with Tophat (Nat Protoc. 2012 Mar 1;7(3):562-78. doi: 10.1038/nprot.2012.016). Sequencing ranged between 30 and 70 millions of reads.

PCR: RT-PCR was performed using two fusion-specific primer sets:

Set 1 5': CAACCATTTGGTCTGCAGGAC 3': GGTGTGGGGACGCCAGTAC;

Set 2: CAGGGGGGTCTTTCTGCAC, 3': GGTGTCTGCACGAACACCTTC.

Transcript expression was confirmed by direct sequencing of PCR products.

NFATC3-PLA2G15 levels were quantified by a fusion-specific Taqman QPCR system:

5': GAACCAGAAGATCGAGAGCCTAAC, 3': TCCGGTTGTTGTCTCCATCA,

Probe: TTGCAACCATTGGTCTGCAGGACATC. Fusion transcript levels were normalized to

ABL expression: 5': TGGAGATAACACTCTAAGCATAACTAAAGGT,

3': GATGTAGTTGCTTGGGACCCA, Probe: CCATTTTTGGTTTGGGCTTCACACCATT.

5' RACE PCR was performed using the SMARTer™ RACE cDNA Amplification Kit

(Clontech), following the manufacturer's instructions. A schematic representation of

primer positions is shown in Supplementary Figure S1. The sequences were:

Primer *NFATC3-PLA2G15*: GGGATCCGGTTGTTGTCTCCATCATCTA,

Primer *NFATC3* WT: AGGCTGAAGCTGAGGAGATGGTGGCC.

Array Competitive Genomic Hybridization (CGH) was performed using the Affymetrix Genome-Wide Human SNP Array 6.0, using leukemic DNA extracted from 115 T-ALL samples at diagnosis. CGH data were analyzed using Chromosome Analysis Suite software (Affymetrix).

***NFATC3* Expression Vectors:** The pMSCV-IRES-GFP (pMIG)-HA-*NFATC3* vector was generated by insertion of a Topo HA-*NFATC3* fragment (obtained following PCR amplification from the pOTB7-*NFATC3* plasmid (Biovalley)) between the XhoI and EcoRI restriction sites of the pMIG multiple cloning site. The pMIG-HA-*NFATC3-PLA2G15* vector was generated following PCR amplification of a 1.3kb segment of *NFATC3-PLA2G15* cDNA from a human leukemic sample. The amplified fragment was then cloned into the pMIG-*NFATC3* vector backbone, using a naturally-occurring MfeI site in the *NFATC3* cDNA.

Luciferase Assays: The p Δ ODOLO-NFAT/luc vector contains three copies of the distal NFAT binding site in the IL-2 gene promoter, upstream of a *Drosophila Adh* promoter that drives luciferase expression. The p Δ ODOLO-Luc vector is the identical vector lacking the NFAT binding sites, providing a control for the basal activity of the *Adh* promoter. 293T cells were transfected with *NFATC3* expression vectors and luciferase vectors using Lipofectamine[®]2000 Reagent (Life technologies). The total amount of DNA transfected per experiment was kept constant through the addition of empty pMIG vector, where appropriate. Luciferase activity was measured in triplicate 48 hours after transfection, using the Dual Luciferase[®] Reporter Assay System (Promega). Values for p Δ ODOLO-NFAT/luc activity were corrected for both measured p Δ ODOLO-Luc activity and *NFATC3* protein expression, quantified using the BioRad ChemiDoc[™] XRS+ machine with Image Lab[™] software.

Gene Set Enrichment Analysis (GSEA): GSEA was performed using a set of genes described to be regulated by calcineurin/ NFAT in normal peripheral lymphocytes (<http://www.ncbi.nlm.nih.gov/biosystems/137993>). GSEA was run using signal-to-noise for the ranking gene metric and 1000 permutations. The analysis was performed using RNA-sequencing data from 20 T-ALL samples, which were defined as being *NFATC3-PLA2G15* high or low according to the results of *NFATC3-PLA2G15* RT-QPCR (see above). The 10 *NFATC3-PLA2G15* high cases all had expression levels in the highest quartile of results for T-ALL samples, while the 10 *NFATC3-PLA2G15* low cases all had expression levels in the lowest two quartiles.

Murine Patient-Derived Xenografts: NSG mice were maintained under specific pathogen-free conditions in the animal facilities of the Institut Curie (Orsay, France). All experimental procedures were performed in strict accordance with the

recommendations of the European Commission (Directive 2010/63/UE) and French National Committee (87/848) (authorisation APAFiS #7393-20161028104744-v1). Following injection of patient T-ALL blasts obtained at leukemia diagnosis, mice were followed for tumor engraftment by regular flow cytometry analysis of peripheral blood using hCD45 and hCD7 (eBiosciences) as markers for human leukemic cells. Mice were euthanized when terminally ill, as evidenced by either severe dyspnea or weakness caused by leukemic dissemination in the thymus or vital organs (bone marrow, lung, and liver), respectively.

Statistical Analyses: Statistical analyses and survival curves for patient-derived murine xenografts and for human T-ALL patients treated during the GRAALL-2003 and -2005 studies were calculated using Prism 5 (GraphPad). Kaplan-Meier survival curves were compared using the log-rank (Mantel-Cox) test.

Results and Discussion: Our RNA-sequencing analysis pipeline is depicted in Figure 1, and notably excluded fusions that were also detected in normal thymic RNA sequenced in parallel. Strikingly, we found that 55 of the 140 total candidate fusions involved genes located within 30 kb of each other, in the same transcriptional orientation. This distance is consistent with that previously observed for *cis*-SAGE (9), suggesting that ISCs are a common event in T-ALL. In total, putative ISCs were detected in 10/12 samples, with a median of 4 (range 0-15) per patient. Full details of the candidate ISCs detected in this study are shown in Supplementary Table S1.

We noted that several of the ISC gene partners have important roles in normal and leukemic T-cell development. We decided to perform further analysis on the candidate ISC *NFATC3-PLA2G15*, which was detected in 2/12 T-ALLs (Figure 2A). Nuclear factor of activated T-cells (NFAT) proteins are critical regulators of normal thymopoiesis and mature T-cell function (10), and murine *Nfatc3* has specific roles in T helper cell differentiation from naive to effector states (11), and in double positive (CD4+CD8+) to single positive (CD4+/CD8- or CD4-/CD8+) thymocyte transition (12). We have also previously shown that the calcineurin/ NFAT pathway activation is essential for T-ALL leukemia-initiating cell function (13). *PLA2G15* (Phospholipase A2 Group XV) is located 16kb downstream of *NFATC3*, and encodes a lysosomal enzyme with both phospholipase and transacylase activities (14-16). We initially confirmed the presence of *NFATC3-PLA2G15* mRNA in leukemic cells by RT-PCR and direct sequencing (Figure 2B). We additionally verified that the same *NFATC3-PLA2G15* fusion transcript was detectable in an independent RNA-sequencing series of T-ALL samples that were analyzed using a different system (Supplementary Figure S1). As expression in patient samples appeared variable, we designed a fusion-specific RT-QPCR, in order to quantify the levels of

NFATC3-PLA2G15 transcription more precisely. We found that primary T-ALLs exhibited a wide range of *NFATC3-PLA2G15* expression, with low levels being found in the majority. Of note, *NFATC3-PLA2G15* levels in normal tissue samples were consistently very low or undetectable (Figure 2C). The results of 5' RACE PCR of leukemic cDNA were consistent with initiation of fusion transcription in the first exon of *NFATC3* (Supplementary Figure S2). We also performed array competitive genomic hybridization of 115 diagnostic T-ALL samples, and found no evidence of microdeletions that would result in *NFATC3-PLA2G15* transcript expression (Supplementary Figure S3), providing strong evidence that *NFATC3-PLA2G15* is a true ISC that is generated by *cis*-SAGE.

We next tested the activity of the *NFATC3-PLA2G15* fusion. The results of luciferase assays showed that the fusion had NFAT reporter activity *in vitro*, but that this was considerably lower than the WT protein (Figure 3A and Supplementary Figure S4). We then performed gene set enrichment analysis (GSEA) of expression data from primary T-ALL samples, using a set of genes that are regulated by calcineurin/ NFAT in normal human lymphocytes (see Supplementary Methods). This analysis revealed that T-ALL cases with high *NFATC3-PLA2G15* levels had generally lower expression of canonical NFAT target genes than *NFATC3-PLA2G15* low cases (Figure 3B).

Finally, we tested whether *NFATC3-PLA2G15* transcription correlated with T-ALL biology *in vivo*. Strikingly, we found that higher *NFATC3-PLA2G15* levels strongly predicted shorter time to leukemia development (Figure 4A) and survival (Figure 4B) in patient-derived T-ALL xenografts in immunodeficient mice. In order to estimate the clinical relevance of *NFATC3-PLA2G15* expression, we analyzed the outcome of human T-ALL patients treated as part of the Francophone multinational GRAALL-2003 and -2005 studies. In line with the murine xenograft results, we found that patients with the

highest quartile of *NFATC3-PLA2G15* expression (Figure 2C) had reduced overall and event-free survival compared with the rest of the patient cohort (Figures 4C and 4D). As shown in Supplementary Table 2, *NFATC3-PLA2G15* high patients did not differ from the *NFATC3-PLA2G15* low group with regard to classical risk factors such as age, *NOTCH1/FBXW7* mutations and initial treatment response. The prognostic effect of *NFATC3-PLA2G15* expression was however outweighed by our recently reported mutational classifier (see Supplementary Table 2), and the potential influence of *NFATC3-PLA2G15* on patient outcome requires further examination in independent studies, ideally complemented by more extensive evaluation of fusion transcription by RNA-sequencing.

Further work is necessary to determine the mechanism by which the fusion may alter T-ALL biology. We found that, unlike constitutively nuclear mutants of NFAT (17), ectopic expression of *NFATC3-PLA2G15* was insufficient to induce transformation of NIH 3T3 fibroblasts *in vitro* (data not shown). This finding is not unusual for confirmed T-ALL oncogenes. For example, most *NOTCH1* gain-of-function mutants are not sufficient to induce leukemia in murine models (18). It is therefore likely that the oncogenic effects of the fusion might require additional cooperative events. It remains to be seen whether the altered NFAT activity detected *in vitro* contributes to reduced canonical NFAT target transcription in patient samples *in vivo*. The latter finding should be interpreted with caution, as we have previously found that the transcriptomic signature associated with calcineurin activity in murine T-ALL models is distinct from that seen in normal human T-cells (13).

Interestingly, *NFATC3-PLA2G15* fusions have also been described in an isolated case of acute myeloid leukemia (19) and in colorectal cancer, where experimental inhibition of

the fusion transcript was reported to cause decreased proliferation and invasion of a cell line *in vitro* (20). Unfortunately, none of the T-ALL cell lines we tested had significant *NFATC3-PLA2G15* expression (data not shown), so we were unable to investigate similar effects in a lymphoid context. Although the involved exons reported in the above cases differed from the T-ALL-associated chimera reported here, these data suggest that *NFATC3-PLA2G15* ISCs might have important activities in other malignancies.

Finally, our discovery of frequent ISC expression in this series identifies a novel oncogenic mechanism in T-ALL, and provides a rationale for further evaluation of this phenomenon in acute leukemia.

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Authorship: JB, CTQ and GH performed experiments. JB, CTQ, MB, AB, JG, EM, NB, SS and VA analyzed data and reviewed the manuscript. JB and VA designed and oversaw conceptual development of the project and wrote the manuscript.

References:

1. Mertens F, Johansson B, Fioretos T, Mitelman F. The emerging complexity of gene fusions in cancer. *Nat Rev Cancer*. 2015;15(6):371-81.
2. O'Brien SG, Guilhot F, Larson RA, *et al*. Imatinib compared with interferon and low-dose cytarabine for newly diagnosed chronic-phase chronic myeloid leukemia. *The New England journal of medicine*. 2003;348(11):994-1004.
3. Parra G, Reymond A, Dabbouseh N, *et al*. Tandem chimerism as a means to increase protein complexity in the human genome. *Genome research*. 2006;16(1):37-44.
4. Akiva P, Toporik A, Edelheit S, *et al*. Transcription-mediated gene fusion in the human genome. *Genome research*. 2006;16(1):30-6.
5. Babiceanu M, Qin F, Xie Z, *et al*. Recurrent chimeric fusion RNAs in non-cancer tissues and cells. *Nucleic acids research*. 2016;44(6):2859-72.
6. Lu G, Wu J, Zhao G, Wang Z, Chen W, Mu S. Abundant and broad expression of transcription-induced chimeras and protein products in mammalian genomes. *Biochemical and biophysical research communications*. 2016;470(3):759-65.
7. Zhang Y, Gong M, Yuan H, Park HG, Frierson HF, Li H. Chimeric transcript generated by cis-splicing of adjacent genes regulates prostate cancer cell proliferation. *Cancer Discov*. 2012;2(7):598-607.
8. Veeraraghavan J, Tan Y, Cao XX, *et al*. Recurrent ESR1-CCDC170 rearrangements in an aggressive subset of oestrogen receptor-positive breast cancers. *Nat Commun*. 2014;5:4577.
9. Qin F, Song Z, Babiceanu M, *et al*. Discovery of CTCF-sensitive Cis-spliced fusion RNAs between adjacent genes in human prostate cells. *PLoS genetics*. 2015;11(2):e1005001.
10. Muller MR, Rao A. NFAT, immunity and cancer: a transcription factor comes of age. *Nature reviews*. 2010;10(9):645-56.
11. Ranger AM, Oukka M, Rengarajan J, Glimcher LH. Inhibitory function of two NFAT family members in lymphoid homeostasis and Th2 development. *Immunity*. 1998;9(5):627-35.
12. Cante-Barrett K, Winslow MM, Crabtree GR. Selective role of NFATc3 in positive selection of thymocytes. *J Immunol*. 2007;179(1):103-10.

13. Gachet S, Genesca E, Passaro D, *et al.* Leukemia-initiating cell activity requires calcineurin in T-cell acute lymphoblastic leukemia. *Leukemia*. 2013;27(12):2289-300.
14. Abe A, Shayman JA. Purification and characterization of 1-O-acylceramide synthase, a novel phospholipase A2 with transacylase activity. *The Journal of biological chemistry*. 1998;273(14):8467-74.
15. Hiraoka M, Abe A, Shayman JA. Cloning and characterization of a lysosomal phospholipase A2, 1-O-acylceramide synthase. *The Journal of biological chemistry*. 2002;277(12):10090-9.
16. Hiraoka M, Abe A, Lu Y, *et al.* Lysosomal phospholipase A2 and phospholipidosis. *Molecular and cellular biology*. 2006;26(16):6139-48.
17. Robbs BK, Cruz AL, Werneck MB, Mognol GP, Viola JP. Dual roles for NFAT transcription factor genes as oncogenes and tumor suppressors. *Molecular and cellular biology*. 2008;28(23):7168-81.
18. Chiang MY, Xu L, Shestova O, *et al.* Leukemia-associated NOTCH1 alleles are weak tumor initiators but accelerate K-ras-initiated leukemia. *The Journal of clinical investigation*. 2008;118(9):3181-94.
19. Wen H, Li Y, Malek SN, *et al.* New fusion transcripts identified in normal karyotype acute myeloid leukemia. *PloS one*. 2012;7(12):e51203.
20. Jang JE, Kim HP, Lee SH, *et al.* AACR-NCI-EORTC International Conference: Molecular Targets and Cancer Therapeutics; November 5-9, 2015. Abstract A28: NFATC3-PLA2G15 fusion transcript identified by RNA-sequencing promotes tumor progression in colorectal cancer cells.

Figures:

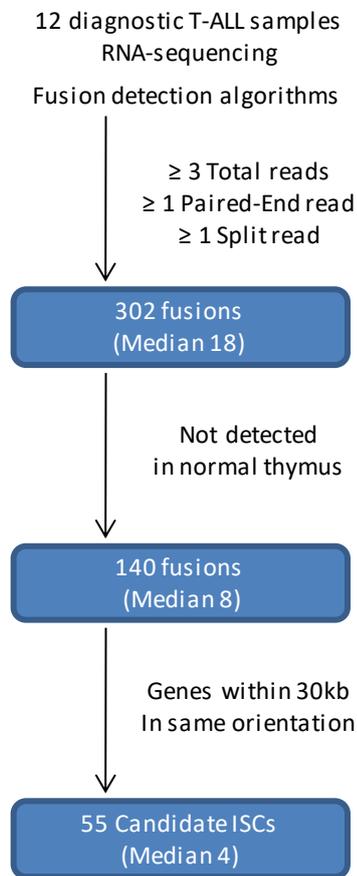


Figure 1: RNA-sequencing analysis pipeline. Total and median numbers of fusions detected following the application of each filter are shown. The full list of candidate ISCs is shown in Supplementary Table 1.

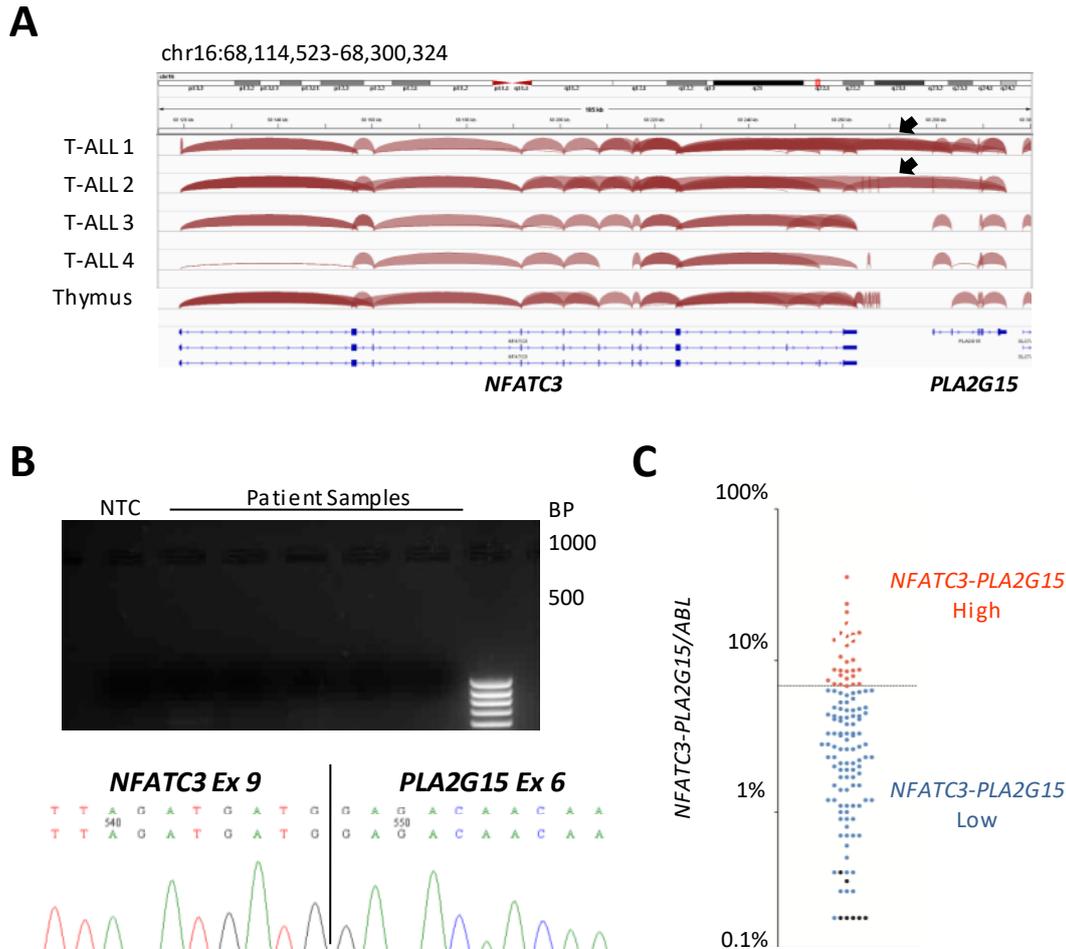


Figure 2: *NFATC3-PLA2G15* is a novel T-ALL-associated intergenically spliced chimeric RNA. (A) Genomic visualization of chimeric *NFATC3-PLA2G15* transcripts using a Sashimi-plot representation generated using the Integrative Genomics Viewer tool. Genomic tracks display splicing junctions in two samples (T-ALLs 1 and 2) positive for *NFATC3-PLA2G15* chimeric transcripts, indicated by black arrows. Analysis of two representative samples negative for the fusion (T-ALLs 3 and 4) and human thymic RNA are shown for comparison. Chromosomal coordinates correspond to the hg19 assembly. **(B)** Expression of the *NFATC3-PLA2G15* chimeric mRNA was confirmed by RT-PCR (upper panel) and direct sequencing (lower panel). Involved exons are indicated. NTC = No Template Control. **(C)** Distribution of *NFATC3-PLA2G15* expression in primary human T-ALL and normal tissue samples (comprising bone marrow, thymic and peripheral blood lymphocyte extracts). Chimeric transcript levels were quantified by fusion-specific RT-QPCR and calculated relative to an *ABL* housekeeping gene control. The horizontal line delineates the upper quartile of expression. *NFATC3-PLA2G15* high T-ALL cases (n = 30) are shown in red, *NFATC3-PLA2G15* low T-ALL cases (n = 93) in blue, and normal samples (n = 8) in black.

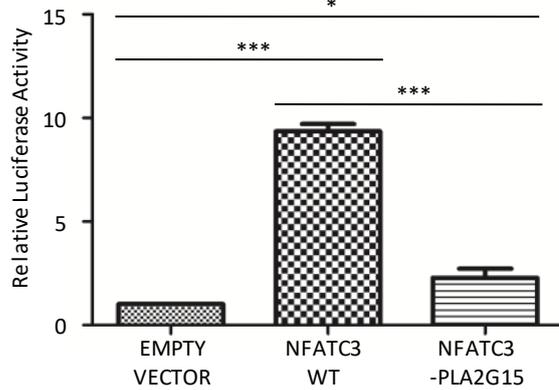
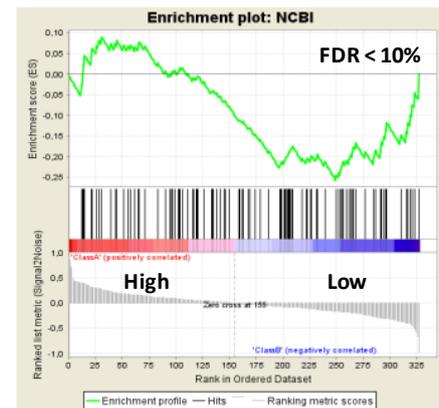
A**B**

Figure 3: Activity and biological correlates of the NFATC3-PLA2G15 chimera.

(A) Luciferase assay. 293T cells were transfected with NFATC3 expression vectors and an NFAT-specific luciferase reporter. Activity was calculated relative to an empty vector luciferase control. The mean results of three experiments are shown. Verification of NFATC3 protein expression is shown in Supplementary Figure S4. Error bars represent standard error of the mean. Statistically significant differences are indicated. **(B)** Gene set enrichment analysis (GSEA) of canonical NFAT pathway transcription. *NFATC3-PLA2G15* high cases (n = 10) exhibited negative enrichment for genes involved in calcineurin-regulated NFAT-dependent transcription in normal lymphocytes, as compared with *NFATC3-PLA2G15* low cases (n = 10).

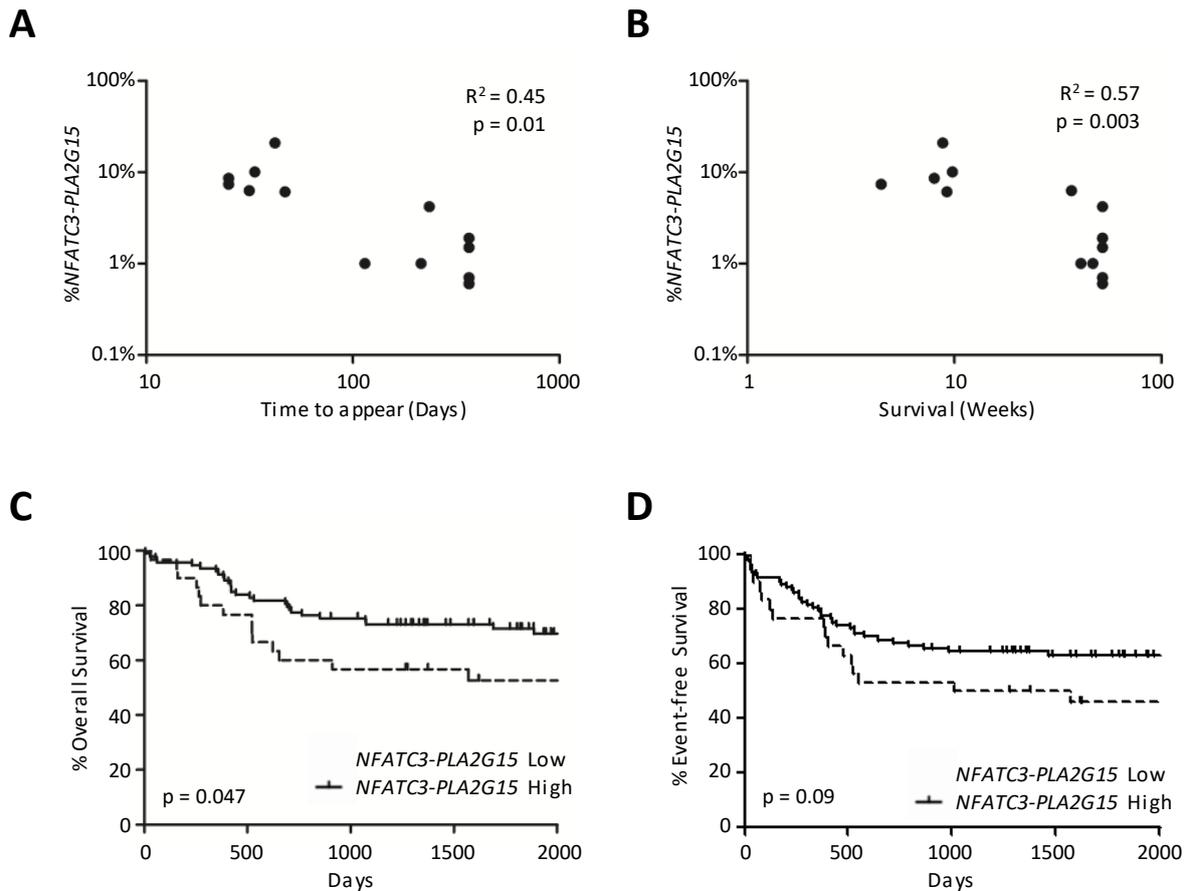


Figure 4: Biological correlates of *NFATC3-PLA2G15* expression. Correlation of *NFATC3-PLA2G15* chimeric transcript levels with time to leukemia appearance (**A**) and survival (**B**) in murine patient-derived xenografts. Each point represents the median figure for 2 xenografts derived from a single patient. N = 13 patients. R^2 and p values were determined by Pearson correlation analysis. Correlation of diagnostic *NFATC3-PLA2G15* expression levels with (**C**) Overall survival (OS) and (**D**) Event-free survival (EFS) of T-ALL patients treated as part of the GRAALL-2003 and -2005 studies (n = 123). 5 year OS was 52.6% (95% CI 33.3% - 68.7%) in *NFATC3-PLA2G15*-high cases and 69.8% (95% CI 58.8% - 78.3%) in *NFATC3-PLA2G15*-low cases. 5 year EFS was 46.2% (95% CI 27.8% - 62.7%) in *NFATC3-PLA2G15*-high cases and 63.2% (95% CI 52.5% - 72.1%) P values are indicated.