

ORIGINAL ARTICLE

Clinical Significance of *CD109* Expression and Methylation Patterns in Acute Myeloid Leukemia

Ting-ting Du ^{1, 2, *}, Ming-qiang Chu ^{2, 3, *}, Zi-jun Xu ^{1, 2, *}, Xiang-mei Wen ^{1, 2}, Jing-dong Zhou ^{2, 3}, Wei Zhao ^{2, 3}, Min-jie Zhang ^{1, 2}, Su-wan Liu ^{1, 2}, Jun Qian ^{2, 3, *}, Jiang Lin ^{1, 2, *}

**These authors contributed equally to this work*

¹ Laboratory Center, Affiliated People's Hospital of Jiangsu University, Zhenjiang, Jiangsu, P. R. China

² Zhenjiang Clinical Research Center of Hematology, Zhenjiang, Jiangsu Province, P. R. China

³ Department of Hematology, Affiliated People's Hospital of Jiangsu University, Zhenjiang, Jiangsu, P. R. China

SUMMARY

Introduction: The altered expression of *CD109* has been observed in solid tumors of various types, and evidence suggests a correlation between *CD109* expression and development and prognosis of tumors. However, the expression and methylation patterns of *CD109* in acute myeloid leukemia (AML) and their clinical significance remain unclear.

Methods: *CD109* mRNA expression and promoter methylation were determined in AML patients and leukemia cells. Furthermore, the clinical significance of the findings and the regulatory relationship between expression and methylation of *CD109* were analyzed.

Results: *CD109* expression was found to be elevated in AML patients, both in publicly available datasets and in our own cohort. Subsequent clinical analysis showed an association between the wild-type form of *NPM1* and higher *CD109* expression. Kaplan–Meier survival analysis revealed that AML patients with higher *CD109* expression had shorter overall survival times. Furthermore, the *CD109* promoter was found to be hypomethylated in AML patients, and further analysis indicated that this hypomethylation led to elevated expression of *CD109*. We also observed that *CD109* mRNA expression and demethylation were markedly decreased in samples from patients with complete remission compared to those from newly diagnosed patients.

Conclusions: Our results suggest that *CD109* exhibits elevated expression and hypomethylation in AML, with its expression being regulated by methylation of its promoter region. Furthermore, *CD109* could serve as a prognostic indicator as well as a monitoring tool for the therapeutic outcome in AML.

(Clin. Lab. 2025;71:1-4. DOI: 10.7754/Clin.Lab.2025.250128)

Correspondence:

Jiang Lin, Senior Technologist
Laboratory Center
Affiliated People's Hospital of Jiangsu University
Zhenjiang, Jiangsu
P. R. China
Email: 2651329493@qq.com

Jun Qian, Senior Physician
Zhenjiang Clinical Research Center of Hematology
Zhenjiang, Jiangsu Province
P. R. China
Email: qianjun0007@hotmail.com

Manuscript accepted January 31, 2025

Supplementary Data

Table S1. Primers for RT-qPCR, RQ-MSP, RQ-USP, BSP, and sequences for construct generation.

Target	Primers	
	Forward	Reverse
<i>CD109</i>	CCC ATC AGG CCA ACA CAT CT	ACC ACA GCC ATA AGG CAT CC
<i>CD109-M</i>	TTT TAT TTT GTT GTT AGG CGC	GAT AAA CCC TAC ATC TCG ACG
<i>CD109-U</i>	ATT TTT TAT TTT GTT GTT AGG TGT	AAT AAA CCC TAC ATC TCA ACA ACA
<i>CD109-B</i>	GAG GGG TGG AGT TTT TAA GTT	ATA ATC AAA CCT CCA AAC CAA T
<i>ALU</i>	TTA GGT ATA GTG GTT TAT ATT TGT AAT TTT AGT A	ATT AAC TAA ACT AAT CTT AAA CTC CTA ACC TCA
<i>ABL1</i>	TCC TCC AGC TGT TAT CTG GAA GA	TCC AAC GAG CGG CTT CAC

Table S2. Correlations of *CD109* expression with clinicopathological characteristics of AML patients.

Patient characteristics	AML (TCGA dataset)		
	Low <i>CD109</i> (n = 92)	High <i>CD109</i> (n = 91)	p-value
Gender, male/female	45/47	53/38	0.237
Median age, years (range)	56 (21 - 82)	60 (18 - 88)	0.170
Median WBC, × 10 ⁹ /L (range)	13.3 (0.5 - 297.4)	27.1 (0.6 - 298.4)	0.078
Median BM blasts, % (range)	72.5 (30 - 100)	72 (30 - 97)	0.428
Median PM blasts, % (range)	29.5 (0 - 98)	49 (0 - 94)	0.130
FAB classification			< 0.001
M0	1	14	< 0.001
M1	19	25	0.303
M2	23	18	0.479
M3	17	0	< 0.001
M4	15	21	0.270
M5	16	6	0.039
M6	1	2	0.621
M7	0	3	0.121
No data	0	2	0.246
Karyotype			< 0.001
Favorable	27	7	< 0.001
Intermediate	52	53	0.881
Adverse	10	30	< 0.001
IDH1 (+/-)	11/81	6/85	0.309
IDH2 (+/-)	9/83	9/82	1.000
TP53 (+/-)	1/91	15/76	< 0.001
CEBPA (+/-)	7/75	5/74	0.767
NPM1 (+/-)	33/59	15/76	0.004
FLT3-ITD (+/-)	13/79	14/77	0.838
DNMT3A (+/-)	25/67	19/72	0.388
RNIX1 (+/-)	2/90	13/78	0.003

The cutoff point is the median expression value.

Table S3. Correlations of *CD109* expression with clinicopathological characteristics of AML patients.

Patient characteristics	<i>CD109</i> expression		
	Low <i>CD109</i> (n = 42)	High <i>CD109</i> (n = 76)	p-value
Gender, male/female	23/19	44/32	0.846
Median age, years (range)	64 (31.0 - 85.0)	64 (22.0 - 87.0)	0.734
Median WBC, × 10 ⁹ /L (range)	16.8 (0.5 - 304.0)	17.8 (0.9 - 255.0)	0.654
Median Hb, g/L (range)	88 (37.0 - 179.0)	85.0 (44.0 - 163.0)	0.537
Median PLT, × 10 ⁹ /L (range)	37.5 (4.0 - 185.0)	5.0 (5.0 - 607.0)	0.320
Median BM blasts, % (range)	44.5 (14.5 - 99.0)	54.9 (10.8 - 93.5)	0.512
FAB classification			0.120
M1	3	12	0.251
M2	26	30	0.022
M4	7	11	0.792
M5	3	9	0.535
No data	3	14	0.109
Cytogenetics			0.923
Normal	19	30	0.564
t(8;21)	5	6	0.518
+8	1	1	1.000
5q-	0	2	0.538
-7/del(7)	1	1	1.000
11q23	0	1	1.000
Others	2	4	1.000
Complex	3	9	0.535
No data	11	22	0.832
Karyotype			0.745
Favorable	5	6	0.518
Intermediate	21	36	0.848
Adverse	4	12	0.411
Unknown	12	22	1.000
IDH1 (+/-)	0/31	3/54	0.549
IDH2 (+/-)	6/25	5/52	0.185
TET2 (+/-)	2/29	3/54	1.000
TP53 (+/-)	2/29	3/54	1.000
CEBPA (+/-)	2/29	10/47	0.201
NPM1 (+/-)	13/18	11/46	0.027
FLT3 (+/-)	12/19	13/44	0.141
CKIT (+/-)	5/26	3/54	0.124
RAS (+/-)	3/28	8/49	0.740
U2AF1 (+/-)	0/31	2/55	0.538
NRAS (+/-)	5/26	7/50	0.747
KRAS (+/-)	0/31	4/53	0.293
DNMT3A (+/-)	2/29	8/49	0.484
SRSF2 (+/-)	1/30	4/53	0.653
SETBP1 (+/-)	0/31	1/56	1.000
CR (+/-)	11/10	19/28	0.296

The cutoff point is the cutoff value for expression.

Table S4. Correlations of *CD109* methylation with clinicopathological characteristics of AML patients.

Patient characteristics	<i>CD109</i> methylation		
	Hypermethylated (n = 30)	Hypomethylated (n = 101)	p-value
Gender, male/female	16/14	57/44	0.835
Median age, years (range)	56 (42 - 81)	59 (18 - 85)	0.797
Median WBC, × 10 ⁹ /L (range)	13.6 (0.9 - 154.0)	19.7 (0.4 - 209.6)	0.219
Median Hb, g/L (range)	82 (42.0 - 144.0)	80.0 (32.0 - 141.0)	0.372
Median PLT, × 10 ⁹ /L (range)	37.0 (3.0 - 148.0)	42.0 (5.0 - 415.0)	0.358
Median BM blasts, % (range)	37.3 (5.0 - 91.0)	47.5 (15.5 - 94.5)	0.104
FAB classification			0.367
M0	0 (0%)	1 (1%)	1.000
M1	1 (3%)	6 (6%)	1.000
M2	15 (50%)	53 (52%)	0.838
M4	7 (24%)	26 (26%)	0.818
M5	6 (20%)	7 (7%)	0.074
M6	1 (3%)	2 (2%)	0.545
No data	0 (0%)	6 (6%)	0.336
Cytogenetics			0.122
Normal	17 (58%)	57 (56%)	1.000
t(9;22)	0 (0%)	1 (1%)	1.000
t(8;21)	0 (0%)	11(11%)	0.068
inv(16)	1 (3%)	0 (0%)	0.229
+8	1 (3%)	4 (4%)	1.000
5q-	3 (10%)	2 (2%)	0.079
11q23	0 (0%)	1 (1%)	1.000
Others	4 (13%)	12 (12%)	0.761
Complex	4 (13%)	8 (8%)	0.469
No data	0 (0%)	5 (5%)	0.588
Karyotype			0.300
Favorable	1 (3%)	12 (12%)	0.296
Intermediate	23 (77%)	71 (70%)	0.645
Adverse	6 (20%)	13 (13%)	0.377
Unknown	0 (0%)	5 (5%)	0.588
IDH1 (+/-)	2/27	5/75	0.654
IDH2 (+/-)	5/24	8/92	0.166
TET2 (+/-)	0/29	3/97	1.000
TP53 (+/-)	1/28	3/97	1.000
CEBPA (+/-)	1/28	8/92	0.683
NPM1 (+/-)	8/21	23/77	0.626
FLT3 (+/-)	8/21	25/75	0.811
CKIT (+/-)	3/26	7/93	0.693
RAS (+/-)	5/24	23/77	0.615
U2AF1 (+/-)	0/29	6/94	0.336
NRAS (+/-)	5/24	21/79	0.796
KRAS (+/-)	2/27	8/92	1.000
DNMT3A (+/-)	2/27	6/94	1.000
SRSF2 (+/-)	1/28	2/98	0.537
SETBP1 (+/-)	1/28	1/99	0.400
CR (+/-)	12/15	48/38	0.378

The cutoff point is the cutoff value for methylation.