considerably among the cell populations derived from normal PBMC and BM or CML at diagnosis and in stable chronic phase, a relatively constant percentage was found of adherent and nonadherent cells. The high proportion of cell loss during the experimental procedures is due to the separation technique and only to a lesser degree to mechanical damage during removal of adherent cells. Cells which were not tightly bound to plastic were discarded by washing twice with medium. However, the cell loss did not substantially affect the CFC population with regard to one-sided preference to BCR/ABL-positive or negative cells.

In conclusion, an accumulation was not found of BCR/ABL-negative CFC in the adherent fraction of PBMCN from CML patients in stable chronic phase even when starting PBMCN population already contained a certain proportion of BCR/ABL-negative CFC. Plastic adherence of CFC from peripheral blood seems to be unsuitable for selecting functionally identical hematopoietic cell populations.

References


