

# Evidence That Amyloidogenic Light Chains Undergo Antigen-Driven Selection

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AL amyloidosis is characterized by fibrillar tissue deposits (amyloid) composed of monoclonal light chains secreted by small numbers of indolent bone marrow plasma cells whose ontogenesis is unknown. To address this issue and to provide insights into the processes that accompanied pathogenic light chain formation, we isolated the complete variable (V) regions of 14 light (VL) and 3 heavy (VH) chains secreted by amyloid clones at diagnosis (10 Bence Jones and 4 with complete Igs, 9  $\lambda$  and 5  $\kappa$ ) by using an inverse polymerase chain reaction-based approach free of primer-induced biases. Amyloid V regions were found to be highly mutated compared with the closest germline genes in the

databases or those isolated from the patients' DNA, and mutations were not associated with intraclonal diversification. Apparently high usage of the  $\lambda$ III family germline gene V  $\lambda$ III.1 was observed (4 of 9  $\lambda$  light chains). Analysis of the nature and distribution of somatic mutations in amyloid V regions showed that there was statistical evidence of antigen selection in 8 of 14 clones (7 in VL and 1 in VH). These results indicate that a substantial proportion of the amyloid clones developed from B cells selected for improved antigen binding properties and that pathogenic light chains show evidence of this selection.

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**I**N AL AMYLOIDOSIS, monoclonal light chains accumulate in fibrillar tissue deposits (amyloid), leading to progressive dysfunction of target organs.<sup>1</sup> Light chains, most frequently of the  $\lambda$  class, are secreted by small numbers of indolent bone marrow plasma cells (PC).<sup>2</sup> The natural history of the amyloidogenic clone is at present unknown. Information might be obtained from an analysis of the nature (silent [S] or amino acid replacing [R]) and distribution of somatic mutations in Ig variable (V) regions.<sup>3</sup> For example, evidence of clustering of R mutations in the antigen-binding loops (CDR), together with their scarcity in the framework (FR) regions (conserved areas with structural importance), is consistent with a role for antigen<sup>4</sup> in selecting and expanding the B cell that will eventually give rise to the amyloidogenic PC.

To provide insights into the processes that accompanied the formation of amyloidogenic light chains and PC, we isolated the complete nucleotide sequences of the Ig V regions of 14 light (VL) and 3 heavy chains (VH) secreted by amyloid clones using an inverse polymerase chain reaction (PCR)-based strategy that uses only primers specific for constant regions, so as to avoid biases for certain sequences.<sup>5</sup> We focused on light chains and principally on Bence Jones (BJ) proteins for the following reasons: (1) the primary structure of VL is implicated in amyloid deposition<sup>6</sup>; (2) secretion of free light chains only is a

classic feature of AL amyloidosis (up to 40% of the cases)<sup>7</sup>; (3) gene usage at the germline level is unknown in AL amyloidosis; and (4) a study on multiple myeloma recently stressed the importance of VL in the characterization of the role of antigenic selection on the B cell.<sup>8</sup>

## MATERIALS AND METHODS

*Patients and bone marrow studies.* Fourteen patients with biopsy-proven light chain amyloidosis were studied at diagnosis. Bone marrow aspirates were obtained after informed oral consent was given. Analysis of bone marrow PC light chain  $\kappa/\lambda$  ratios<sup>7</sup> and labeling indexes<sup>9</sup> were performed with immunofluorescence procedures. Monoclonal components were detected by immunofixation of serum and urine using anti-isotype-specific rabbit antisera (Dako, Glostrup, Denmark).

*Inverse-PCR amplification; cloning and sequencing of bone marrow monoclonal light and heavy chains.* The inverse PCR-based procedure used to isolate the Ig V regions of AL amyloidosis patients has recently been described in detail.<sup>5</sup> Briefly, double-stranded cDNA from Ficoll-separated bone marrow mononuclear cells was blunt-ended, ligated upon itself to form a circle with T4 DNA ligase (GIBCO-BRL, Life Technologies, Grand Island, NY), and PCR-amplified using oligonucleotides specific for the 5' and 3' of the heavy and light chain constant region isotypes. Amplimers are oriented toward the V region (A primers) or toward the 3' end of constant regions (B primers); consequently, the amplification product consists of (5'→3'): namely, the 3' end of the constant region and the untranslated region, poly-A tail, 5' untranslated region, leader, V region, and the 5' end of the constant region. The PCR products obtained from 3 to 4 independent amplification rounds were pooled, gel-purified, and cloned into plasmid. Several plasmid inserts were then sequenced from both sides using an automated DNA sequencer<sup>5</sup> and compared with each other. The presence of the same V region sequence in several clones indicates its monoclonal origin, because no primer-induced bias can be introduced during amplification and the fraction of plasmid clones with a given V region sequence is proportional to the amount of its mRNA in the bone marrow.<sup>5</sup> The accuracy of this method was tested by amplifying, cloning, and sequencing a plasmid containing a V region fragment of known sequence; only one mismatch of a total of more than 2,000 bases was noted.<sup>5</sup>

*Data analysis and identification of mutations in the monoclonal V regions of AL amyloidosis.* To identify the presumed germline gene of monoclonal V regions, alignment was made with the current releases of EMBL-GenBank and V-BASE (V BASE Sequence Directory; Tomlinson et al, MRC Centre for Protein Engineering, Cambridge, UK) sequence directories using the BLAST<sup>10</sup> and DNAPLOT (H.-H. Althaus, University of Cologne, Cologne, Germany) search tools, respectively. A binomial distribution model<sup>4</sup> was used to determine the

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likelihood that the observed R mutations in a gene segment occurred by chance. The formula predicts the expected number of R mutations and is based on the total observed mutations (R+S), the R mutations found in the CDR or FR, the relative lengths of the CDR or FR, and the expected proportion of R mutations (Rf). Nucleotides in the CDR show greater susceptibility to generating R mutations, ie, substitutions in these regions are more likely to produce amino acid replacements.<sup>11</sup> For this reason, specific Rf values were calculated for each germline segment according to Chang and Casali.<sup>11</sup>

**Isolation of VL germline genes.** After identification of the presumed VL germline gene through database searching, the patients' own germlines were isolated by means of an adaption of established procedures.<sup>12,13</sup> DNA from the peripheral blood neutrophils of 5 patients was PCR-amplified using 5' primers complementary to both the leader sequences of the monoclonal V regions and germline genes V $\lambda$ III.1 (5'-ttctcgcgctctgctta-3'; patients SEM, PAP, DIB, and DEP) and B3 (primer V $\kappa$ IV LEA<sup>13</sup>; patient QUA) and 3' primers that anneal to regions of the 3' recombination signals that are highly conserved within gene families.<sup>12,13</sup> The generality of the 3' primers allows coamplification of related germline genes.<sup>12,13</sup> After cloning, six plasmid inserts were sequenced as described above.

**Amino acid sequencing of light chains from amyloid fibrils and BJ proteins.** Amyloid fibrils from patients CAR (IgG $\kappa$ ) and DEP (IgA $\lambda$ ) were extracted from biopsy specimens. Light chains were digested with trypsin and peptides were purified by reverse-phase chromatography following reported procedures.<sup>14</sup> PAP and SEM  $\lambda$  BJ proteins were isolated from urine. Amino acid sequencing was performed by adsorptive biphasic column technology using an HPG-1000 A protein sequenator (Hewlett Packard, Palo Alto, CA) as previously described.<sup>15</sup>

## RESULTS

**Isolation of VL and VH regions secreted by amyloid clones.** Table 1 reports the characteristics of the 14 patients at diagnosis of AL amyloidosis. Bone marrow PC  $\kappa/\lambda$  ratios showed expansions of PC with the same isotype as the monoclonal component. PC in the S-phase of the cell cycle (PC labeling indexes) were extremely rare, a typical finding in AL amyloidosis.<sup>16</sup> There was no evidence of associated multiple myeloma. In 7 cases, it was possible to observe patients for more than 2 years; the disease remained stable with only slight modifications in the bone marrow PC numbers.

V regions from bone marrow cDNA were inverse-PCR amplified and cloned into plasmid, and multiple inserts were sequenced. The number of identical/sequenced plasmid inserts for each patient is included in Tables 2 (VL) and 3 (VH). In each case it was possible to identify a single, identical, repeated V region. The other sequences were different from one another. A minimum of 3 (Table 2; SET IgG $\lambda$ ) and an average of 6.6 repeated plasmid clones were sequenced for each patient. Even when 9 repeated clones were sequenced from the same patient (Table 2; QUA BJ $\kappa$ , CAR IgG $\kappa$ , DEP IgA $\lambda$ ), no significant nucleotide substitution was observed. We detected only 11 mismatches in more than 42,000 sequenced basepairs (112 plasmid clones), a result that is fully compatible with the estimated error of the cloning procedure.<sup>5</sup> No clones presented more than one mismatch with the predominant sequence. Nucleotide changes were present mainly in the FR (9/11) and none in the CDR3; the latter, subject to the greatest in vivo variation, were isolated to single plasmid inserts, ie, they were not found to occur more than once and were distributed in different patients. Patient SET had only 3 of 10 identical plasmid inserts (Table 2); this result is compatible with a small

**Table 1. Clinical Findings and Laboratory Values of the 14 Patients With AL Amyloidosis Studied**

Patients	Age (yr)	Main Organ Involved*	Monoclonal Component	BMPC %	BMPC $\kappa/\lambda$ Ratio†	BMPC LI%
QUA	59	Heart	BJ $\kappa$	7	49.0	0.2
TAU	49	Kidney, liver	BJ $\kappa$	10	5.41	ND
IAC	55	Liver	BJ $\kappa$	4	61.5	0.2
ORR	65	Heart	BJ $\kappa$	10	7.3	0.0
DIB	70	Kidney	BJ $\lambda$	7	0.28	0.1
PAP	53	GI	BJ $\lambda$	10	0.2	ND
SEM	46	Muscle, GI	BJ $\lambda$	5	0.02	0.2
FER	51	Muscle, GI	BJ $\lambda$	3	0.11	0.0
GHE	78	Heart	BJ $\lambda$	10	0.02	0.1
FIL	57	Heart	BJ $\lambda$	4	0.07	0.0
CAR	62	Skin, nerves	IgG $\kappa$ + BJ $\kappa$	10	40.67	0.0
SET	56	Lung	IgG $\lambda$	3	0.67	0.4
MAR	73	Heart	IgA $\lambda$	7	0.13	ND
DEP	48	Skin, heart	IgA $\lambda$ + BJ $\lambda$	10	0.23	0.2

Abbreviations: GI, gastrointestinal tract; BMPC, bone marrow PC; LI%, labeling index; ND, not determined.

\*Main organ involved at diagnosis.

†Normal values are  $\geq 1.1$ ,  $\leq 2.6$ .<sup>7</sup>

$\lambda$  amyloid PC clone, as documented by the slight deviation in the bone marrow PC  $\kappa/\lambda$  ratio (Table 1).

**Cloned VL regions correspond to the light chains isolated from fibrils and urine.** In 4 cases, we compared the derived amino acid sequences of cloned VL regions with partial protein sequences of light chains extracted from amyloid deposits (residues: CAR  $\kappa$  = 1 to 30; DEP  $\lambda$  = 2 to 40 and 62 to 87) and of BJ proteins (residues: PAP  $\lambda$  = 5 to 21; SEM  $\lambda$  = 2 to 38). Protein-derived sequences confirmed identity in both germline coded and somatically mutated residues (see "Light and heavy chains from amyloid clones are highly mutated. Analysis of somatic mutations"), thus demonstrating that the correct monoclonal VL regions had been identified.

**Gene usage by amyloid clones.** For the most part,  $\lambda$  and  $\kappa$  amyloid light chains used genes that belong to the most numerous gene families: V $\lambda$ III (5 of 9 light chains) and V $\kappa$ I (3 of 5; Table 2). The germline gene V $\lambda$ III.1,<sup>17</sup> also known as DPL23<sup>12</sup> and 3r,<sup>18</sup> was rearranged in 4 of 9 cases. By contrast,  $\kappa$  light chains used various germline genes. There was almost constant usage of J $\lambda$ 2/3 (8 of 9  $\lambda$  light chains; Fig 1A), the most commonly rearranged J $\lambda$  segment in general,<sup>17,19</sup> whereas 2 of 5  $\kappa$  light chains used J $\kappa$ 3 (Fig 1B), which is not frequently employed in peripheral blood  $\kappa$ -positive lymphocytes (<10% of functional rearrangements).<sup>20</sup>

VH region analysis is reported in Table 3. Two heavy chains used members of VHIII gene family and one used a member of VHI. The JH4b segment was employed in all cases (Fig 2).

**CDR3 formation mechanism.** Figure 1 illustrates the most likely mechanism of amyloid light chain CDR3 formation. Trimming of VL and/or JL segments occurred in 9 of 14 cases, and in 5 instances (~36%), nongermline nucleotides were found at junctions. Both templated (P; Fig 1, nucleotides in parentheses)<sup>21</sup> and nontemplated (N) nucleotides were apparently observed. Figure 2 shows the CDR3 formation of VH. In this case, too, trimming of JH and N nucleotides were found.

**Table 2. The VL and JL Germline Segments Used by Amyloidogenic Light Chains and the Number of Identical/Sequenced Plasmid Inserts**

Amyloid Clones	VL Germline (family)	Nucleotide Identity* (%)	CDR			FR			Identical/Sequenced Inserts
			R	S	P(CDR)†	R	S	P(FR)	
QUA BJκ	B3 (κIV)	94.1	9 (4.4)‡	3	.012	3 (9.4)	3	.002	9/9
TAU BJκ	O2/O12 (κI)	91.6	9 (5.0)	3	.029	6 (13.4)	6	.002	8/9
IAC BJκ	L2 (κIII)	91.9	4 (4.7)	0	.202	13 (12.8)	6	.165	8/8
ORR BJκ	L1 (κI)	94.4	4 (3.3)	1	.205	7 (8.9)	4	.125	7/7
DIB BJλ	λIII.1 (λIII)	94.0	9 (3.6)	2	.003	5 (9.2)	1	.025	7/7
PAP BJλ	λIII.1 (λII)	89.8	15 (6.1)	2	.0002	8 (15.7)	4	.002	5/6
SEM BJλ	λIII.1 (λIII)	94.7	6 (3.2)	2	.053	5 (8.1)	2	.057	6/6
FER BJλ	1b (λI)	95.9	7 (2.8)	1	.008	2 (6.1)	2	.014	5/5
GHE BJλ	2b2 (λIII)	93.3	6 (4.5)	2	.144	8 (10.4)	4	.1	6/6
FIL BJλ	4b (λIV)	96.0	7 (2.8)	1	.008	2 (6.3)	2	.01	5/6
CAR IgGκ	O8/O18 (κI)	95.8	5 (2.5)	1	.063	4 (6.7)	2	.070	9/10
SET IgGλ	λ3.1 (λIII)	95.4	7 (2.7)	1	.008	3 (7.0)	2	.019	3/10
MAR IgAλ	2b2 (λII)	92.6	7 (5.0)	0	.111	10 (11.4)	5	.140	7/11
DEP IgAλ	λIII.1 (λIII)	95.4	5 (2.8)	2	.082	4 (7.0)	2	.055	9/9

\*When compared with the closest germline gene. The leader is excluded from identity calculations to allow comparison with other studies.

†Probability that the observed R mutations occurred by chance (calculations according to Chang and Casali<sup>11</sup>).

‡Number in parentheses indicates number of R mutations expected by chance.

Light and heavy chains from amyloid clones are highly mutated. Analysis of somatic mutations. To test amyloid V regions for the presence of somatic mutations, their nucleotide sequences were compared with the closest germline genes in the databases. In 4 λ cases (DEP, PAP, SEM, and DIB) and 1 κ case (QUA), the corresponding germline segment was also looked for in the patients' neutrophil DNA and a gene identical to the sequences published was found (data not shown; sequences available from GenBank [accession nos. AF026934-38]).

The deduced amino acid sequences of the amyloid VL regions are depicted in Fig 3; their nucleotide differences as compared with the corresponding germline gene are summarized in Table 2. VL sequences deviated substantially from the closest germline genes, with a median percentage of mutation of 5.7% and a wide range (4.0% to 10.2%). The mutation rate was apparently similar in λ and κ light chains, BJ proteins, and light chains that are part of a complete Ig. By contrast, the portion coding for the leader peptide (which is deleted from the mature V region) showed no, or rare, nucleotide differences from the germline gene sequence (the median mutation rate decreases from 5.7% to 5.0% [range, 3.4% to 8.8%] when the leader is included in the comparison), thus substantiating correct identification of the corresponding germline gene.

The derived amino acid sequences of the VH regions of the amyloid clones are shown in Fig 4, and the results of detailed analysis of somatic mutations and gene usage are recapitulated in Table 3. These findings were similar to those reported for

light chains, with a wide range in somatic mutation (from 3.7% to 10.5% of nucleotide substitutions).

Somatic mutations were also present in JL and JH segments (Figs 1 and 2).

Nucleotide sequences of the V regions were submitted to the EMBL-GenBank databases (accession nos. Z66542, AF026918-33).

Replacement mutations and antigen selection in amyloid Igs. Clonal expansion takes place in the germinal center cells that acquired mutations that improve antigen binding while preserving the correct folding of the Ig V region. Ig subjected to several rounds of antigenic selection are expected to exhibit clustering of R mutations in the antigen-binding loops (positive selective pressure for amino acid changes), whereas, on the contrary, R mutations would be less frequent in the FR (negative selection for amino acid substitutions).<sup>4</sup> A binomial model tests whether the observed distribution of R mutations follows this pattern.<sup>4</sup> The results of this statistical analysis are included in Tables 2 (VL) and 3 (VH). Consistent with selection by Ag, 13 of 14 VL and 2 of 3 VH segments displayed higher numbers of R mutations in the CDR than those theoretically expected (Tables 2 and 3). In accordance with the preservation of amino acids in the FR regions, all but one of the VL and VH segments showed lower numbers of R mutations than those expected for a randomly mutating gene segment (Tables 2 and 3). This difference was statistically significant in 7 of 14 VL and 1 of 3 sequenced VH segments ( $P \leq .01$  in 5 VL;  $P \leq .05$  in 2 VL and 1 VH; Tables 2 and 3). That 7 of 14 amyloidogenic light chains

**Table 3. The VH and JH Germline Segments Used by Three Amyloidogenic Clones and the Number of Identical/Sequenced Plasmid Inserts**

Amyloid Clones	VH Germline (family)	Nucleotide Identity* (%)	CDR			FR			Identical/Sequenced Inserts
			R	S	P(CDR)†	R	S	P(FR)	
CAR IgGκ	3-48 (VHIII)	92.2	3 (4.2)‡	1	.193	12 (13.2)	7	.144	6/7
MAR IgAλ	3-30 (VHIII)	89.5	8 (5.4)	3	.082	12 (17.9)	8	.015	6/8
DEP IgAλ	1-18 (VHI)	96.3	5 (1.9)	0	.025	5 (6.4)	1	.165	6/6

\*When compared with the closest germline gene. The leader is excluded from identity calculations to allow comparison with other studies.

†Probability that the observed R mutations occurred by chance (calculations according to Chang and Casali<sup>11</sup>).

‡Number in parentheses indicates number of R mutations expected by chance.

**A**

	VL										JL												
	89	90	91	92	93	94	95	95A	95B	95C	96	97	98	99	100	101	102	103	104	105	106	107	108
1b FER	gga	aca	tgg	gat	agc	agc	ctg	agt	gct	t	gtg	gta	ttc	ggc	gga	ggg	acc	aag	ctg	acc	gtc	cta	ggt
	---	---	---	---	---	G--	---	-C-	---	*	---	-c	---	---	---	---	---	---	---	---	---	---	---
2b2 MAR GHE	tgc	tca	tat	gca	ggt	agt	agc	act	ttc	*	***	--g	---	---	---	---	---	---	t--	---	---	---	---
	---	---	---	---	---	C--	GC-	---	-** G	*	---	-t	---	---	---	---	---	---	---	---	---	---	---
	---	---	---	---	---	-At	GG-	---	***	*	---	-t	---	---	---	---	---	---	---	---	---	---	-g
III.1 DIB PAP SEM DEP	cag	gcg	tgg	gac	agc	agc	act	gca		-	--a	A--	---	---	---	---	---	---	---	---	---	---	---
	---	-T-	---	-C-	---	---	-G-	-A*		-	---	---	-t	---	---	---	---	---	---	---	---	---	---
	---	---	---	---	GTT	-A-	C--	-A-	<b>GTC (CA)</b>	*	---	---	-t	---	---	---	---	---	---	---	---	---	---
	---	---	---	---	---	---	G--	---	<b>TTT</b>	*	***	***	---	---	---	---	---	---	---	---	---	---	-g
	---	---	---	---	-C-	-C-	---	---	*	*	---	---	---	---	---	---	---	---	---	---	---	---	-t
3.1 SET	aac	tcc	cgg	gac	agc	agt	ggt	aac	cat	t	tat	gtc	ttc	gga	act	ggg	acc	aag	gtc	acc	gtc	cta	ggt
	---	---	---	---	-C-	---	---	---	---	*	---	---	---	---	---	---	---	---	---	---	---	---	-g
4b FIL	cag	acc	tgg	ggc	act	ggc	att	ca		*	***	--g	---	---	---	---	---	---	t--	---	---	---	--a
	---	---	---	AA-	---	-A-	-c	A-															

**B**

	Vk								Jk														
	89	90	91	92	93	94	95	95A	95B	96	97	98	99	100	101	102	103	104	105	106	107	108	
012/02 TAU	caa	cag	agt	tac	agt	acc	cct	cc	g	tgg	acg	ttc	ggc	caa	ggg	acc	aag	gtg	gaa	atc	aaa	cgt	
	---	--a	---	-C-	-C-	TA-	---	-*	*	---	---	---	---	---	---	---	---	---	---	---	-G	---	--a
018/08 CAR	caa	cag	tat	gat	aat	ctc	cct	cc	g	ctc	act	ttc	ggc	gga	ggg	acc	aag	gtg	gag	atc	aaa	cgt	
	---	--a	---	A--	G--	---	---	---	*	***	---	---	---	---	---	---	---	---	---	---	-C-	---	---
L1 ORR	caa	cag	tat	aat	agt	tac	cct	cc	a	ttc	act	ttc	ggc	cct	ggg	acc	aaa	gtg	gat	atc	aaa	cgt	
	---	---	---	---	-T-	---	---	**	-	---	---	---	---	---	---	---	---	-C-	---	---	---	---	---
L2 IAC	cag	cag	tat	aat	aac	tgg	cct	cc	g	tgg	acg	ttc	ggc	caa	ggg	acc	aag	gtg	gaa	atc	aaa	cgt	
	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
B3 QUA	cag	caa	tat	tat	agt	act	cct	cc	a	ttc	act	ttc	ggc	cct	ggg	acc	aaa	gtg	gat	atc	aaa	cgt	
	---	--g	---	---	---	---	---	---	*	---	---	---	---	---	---	---	---	---	---	-G	---	---	--a

Fig 1. Formation of amyloidogenic light chain CDR3. The most likely mechanism is reported. Sequences are compared with the closest VL and JL segments. (A) λ light chains; (B) κ light chains. R mutations, upper case letters; S mutations, lower case letters. Nontemplate coded nucleotides (N) are shown in bold; P nucleotides are in parentheses. \*Nucleotides apparently removed at recombination.

originated from selected somatic mutations accumulated during an antigenic response is further substantiated by the significant rarity of FR-R mutations ( $P \leq .01$  in 4 and  $P \leq .05$  in 3 VL; Table 2).

In the remaining 7 amyloid VL, the observed R mutations in the CDR and FR almost reached significance in 3 (Table 2; SEM BJλ, CAR IgGκ, and DEP IgAλ), whereas the others demonstrated CDR-R and FR-R mutations close to the numbers predicted by chance.

In the case of DEP IgAλ, significant clustering in the CDR was present in VH rather than in VL (Table 3). Therefore, our analysis showed that 8 of 14 (57%) amyloidogenic PC clones manifested statistical evidence of antigenic selection.

Overall, the frequency of CDR-R mutations ( $8.8 \times 10^{-2}$

CDR-R/base) found in the 14 amyloidogenic light chains was about twice that expected ( $4.7 \times 10^{-2}$  CDR-Rexp/base;  $P < 1 \times 10^{-4}$ ,  $\chi^2$  test). In accordance with structural preservation of FR regions, the rate of R mutations in these areas ( $2.8 \times 10^{-2}$  FR-R/base) was 1.6 times lower than expected ( $4.5 \times 10^{-2}$  FR-Rexp/base;  $P < 3 \times 10^{-4}$ ).

DISCUSSION

Our results indicate that many amyloid clones develop from B cells whose Ig were subjected to antigenic selection and that pathogenic light chains manifest evidence of this process.

V regions varied substantially from their germline counterparts and the differences were attributed to somatic mutations. Isolation of the corresponding VL germline gene from the DNA

Fig 2. Formation of heavy chain CDR3 from amyloid clones. The most likely mechanism is shown. Sequences are compared with the closest DH and JH segments. R mutations, upper case letters; S mutations, lower case letters.

	N - D - N	JH segments
	-----CDR3-----	-----FR4-----
	F I T V V R G V V Y R S F D F W G Q G T L V A V S S	
CARY DXP'1	tttataactgtgttcggggagttttatcgttcttttgactctctggggccagggaacctggtcgcctctcctca	
	---t---A-----A---	-----A-----A-----
MARα DHQ52	S S R R T L D L agttcagggcgactcttgacctg -A---	W G Q G T L V S V S S tggggccagggaacctggtcagcgtctcctca -----c-----c-----
DEPα D21-9	V Q Y S D T S G Y Y N P gtccaactctgatactagtggttattacaatccg -T---A---G-----T-	W G Q G T L V T V S S tggggccagggaacctggtcagcgtctcctca -----

**A**

	-----CDR1-----	-----CDR2-----	-----CDR3-----	
1b	QSVLTQPPSVSAAPGQKVTIISC	SGSSSNIIGNVYS.	WYQQLPGTAPKLLIY	DNKRPS...
FER	-----NRY--g-----	-----D-E-----	-----G-T	A
2b2	QSALTQPAVSVSGSPGQITITSC	TGTSSDVGSYNLVS	WYQQHPGKAPKLMYI	EVSKRPS...
MAR	-----A---p---L--s-----	-----I--S-----	-----HR--A---I--	G-Q---
GHE	-----t---s-----s-----	-----gN-----	-----qH-----D-LL--	DT---
III.1*	SYELTQPPSVSVSPGQTASITC	SGDKLGDKYAC...	WYQQKPGQSPVLVIY	QDSKRPS...
DIB	-----L-----s-----	-----E-N-VS-----	-----V--N--	Y---
PAP	s-D-----N-----	-----H--ENE-TY-----	-----q-----A-I--	R-V--A
SEM	-----e-----T-----	-----k--R-V-----	-----H-----A-V--	Qr---
DEP	-----P-----Vc-----	-----Vc-----	-----g-----vV--	E-N---
3.1	SSELTQDPAVVALGQTVRITC	QGSLRSYYAS...	WYQQKPGQAPVLVIY	GKNNRPS...
SET	-----NsI-DN--N-----	-----y-----EV-----	-----R-----a-----	-----T-----
4b	QLVLTQSPSASASLGASVKLTC	TLSSGHSSYAIA...	WHQQQPEKGPRLMK	LNSDGSKSGKD
FIL	-----Y-----N-----	-----H-----V--N--	-----I-----i-----	-----N-Di

  

**B**

	-----CDR1-----	-----CDR2-----	-----CDR3-----	
02/012	DIQMTQSPSSLSASVGRVTITC	RASQSISSYLN.....	WYQQKPGKAPKLLIY	AASSLQGS
TAU	-----sV-IF--	-----qq-A--k--M--	G--N--	-----ps-----Nf---N-----
08/018	DIQMTQSPSSLSASVGRVTITC	QASQDISNYLN.....	WYQQKPGKAPKLLIY	DASNLET
CAR	-----H-----	-----K-----	-----K-s-Ng--	G-----S-----
L1	DIQMTQSPSSLSASVGRVTITC	RASQGISNYLA.....	WFQQKPGKAPKLSLIY	AASSLQGS
ORR	-----s-V--v--L--S-----	-----D-T-----	-----k-----a-N--	-----N-----E-----N--p-----
L2	EIVMTQSPATLSVSPGERATLSC	RASQSVSSNLA.....	WYQQKPGQAPRLLIY	GASTRAT
IAC	-----L-----N--Ag-G--s-----	-----I-I-----	-----R-----r--F	D-----P
B3*	DIVMTQSPDSLAVSLGERATINC	KSSQSVLYSSNNKNYLA	WYQQKPGQPKLLIY	WASTRES
QUA	EL-----R--SD--SR-L--	-----F-----l-----	-----V-----	-----QDt-----TG--SD--v-H-V-----

Fig 3. Deduced amino acid sequences of the VL regions of amyloidogenic light chains. Comparisons are made with the most homologous germline gene. (A) λ light chains; (B) κ light chains. R mutations, upper case letters; S mutations, lower case letters; R mutations in JL are shown in bold, S mutations are underlined. \*Germline segment isolated from patient DNA. A continuous line indicates the amino acid sequence that was also found in the monoclonal proteins isolated from amyloid fibrils (DEP and CAR) and urine (PAP and SEM). Protein sequencing of the N-terminal portion of λ light chains showed the absence of the first amino acid in DEP and SEM and of 4 residues in PAP. The absence of the first residue occurs in many λIII light chain protein sequences,<sup>22</sup> whereas multiple amino acids were missing in an amyloid λ light chain recently reported.<sup>23</sup>

of patients' neutrophils ruled out possible genetic factors such as allelic variants or better-matching new germline genes in 5 cases. Furthermore, a major contribution of allelic polymorphism or undiscovered germline genes to nucleotide changes has been reported to be highly unlikely in Vκ<sup>24,25</sup> and most probably in Vλ as well.<sup>18</sup> In addition, the discrepancy between the monoclonal V sequences and their germline counterparts was too great (median of 5.7% in VL and from 3.7% to 10.5% in VH) to be attributed exclusively to polymorphism. That somatic hypermutations occurred on amyloid V regions is further substantiated by the presence of deviations from the germline sequence in JL and JH segments.

Sequencing of multiple plasmid clones containing PCR-amplified VH and VL regions showed the identity of repeated sequences. Somatic mutations were therefore homogeneous; there was no significant in vivo intraclonal variation in the V

regions expressed by these amyloid clones at diagnosis. This is consistent with a clonal cell that is no longer under the influence of the hypermutation process in the germinal center.<sup>26</sup> This result was expected in clones secreting free light chains only (the lack of heavy chains prevents antigen receptor formation and, consequently, Ig hypermutation), but homogeneity of somatic mutations was also observed in the few cases in which complete Ig were available. Recently, a study documented a modest degree of intraclonal diversification in a minority of patients with monoclonal gammopathy of undetermined significance.<sup>27</sup> Although we cannot exclude the possibility that this phenomenon may also occur in some amyloid clones, our results suggest that this finding, if present, must be rare in amyloidosis, in which BJ clones can constitute up to approximately 40% of all cases.<sup>7</sup>

Our data show frequent usage of the most numerous germline

	-----CDR1-----	-----CDR2-----	-----CDR3-----	
3-48	EVQLVESGGGLVPGGSLRLS	CAASGFTFS	SYSMN	WVRQAPGKLEWVS
CAR	-----g-----g-R-----s-----S-L	T-s-----T-e-----	-----YISSSSTIYADSVKG	RFTIISRDNAKNSLYLQMNSLRDEDTAVYYCAR
3-30	QVQLVESGGGVVQPGSRSLRLS	CAASGFTFS	SYGMH	WVRQAPGKLEWVA
MAR	-----EH--e-----P-----a	-----M-H-KT-Q-y-----	-----VISYDGSNKYYADSVKG	RFTIISRDNSKNTLYLQMNSLRAEDTAVYYCAR
1-18	QVQLVQSGAEVKKPGASVKV	SCKASGYTFT	SYGIS	WVRQAPGQGLEWVG
DEP	-----l-----NT-----	-----MF-----	-----WISAYNGNINVAQKLG	RVTMTTDTSTSTAYMELRSLRSDTAVYYCAR

Fig 4. Deduced amino acid sequences of the VH regions secreted by amyloid clones. Comparisons are made with the most homologous germline gene. R mutations, upper case letters; S mutations, lower case letters; R mutations in JH are shown in bold; S mutations are underlined.

gene families, namely V $\kappa$ I and V $\lambda$ III. At the level of germline genes, we found that the V $\lambda$ III.1 alone (of a total of 30 functional V $\lambda$  genes)<sup>18</sup> accounted for 4 of 9 amyloid  $\lambda$  light chains and for 4 of 5 amyloid light chains of the  $\lambda$ III family. By contrast, such a bias was not observed in amyloid  $\kappa$  light chains (Table 2) or in myeloma  $\lambda$  light chains.<sup>8</sup> Sequencing of the coding portions of V $\lambda$ III.1 germline gene from these four unrelated amyloid patients showed their identity to nonamyloid subjects.<sup>12,17</sup> Usage restriction of germline genes appears to be a feature of the normal humoral response.<sup>3,19</sup> This has been shown for V $H$ <sup>28</sup> and V $\kappa$  genes,<sup>13,29</sup> whereas V $\lambda$  are only now being investigated. Overrepresentation of V $\lambda$ III.1 in AL amyloidosis might therefore be apparent, due to its preferential expression in  $\lambda$  light chains in general or to limited patient sampling. V $\lambda$ III.1 is the closest gene to the J $\lambda$ -C $\lambda$  cluster, being only 14 kb away,<sup>17</sup> and this proximity may predispose it to rearrangement. However, only 1 of 6 myeloma  $\lambda$  light chains used this V gene segment,<sup>8</sup> and analysis of a compilation of antibodies to various complex antigens from hybridomas/B-cell clones showed involvement of V $\lambda$ III.1 in just 2 of 26  $\lambda$  light chain rearrangements.<sup>19</sup> Taken together, this evidence suggests that V $\lambda$  gene usage in AL amyloidosis might be unique and that the high frequency of V $\lambda$ III.1 expression may reflect some intrinsic amyloidogenic properties of this gene. More nucleotide sequencing of amyloid and nonamyloid  $\lambda$  light chains is needed to test the association between V $\lambda$ III.1 and amyloidosis.

Light chain CDR3 showed trimming of V and J segments and insertion of P and N nucleotides, thus showing, besides mutations, intense exonucleasic and transferasic activity during both  $\kappa$  and  $\lambda$  amyloidogenic light chain rearrangements (Fig 1). Therefore, junctional variation (due to truncations or insertions) appears to be a general phenomenon of antibody diversification that involves  $\kappa$ <sup>29,30</sup> as well as  $\lambda$  light chains.

According to the type and distribution of somatic mutations and the binomial distribution model of probabilities, there was statistical evidence of antigenic selection in 8 of 14 clones (~57%). VL alone was sufficient to show selection in 7. Analogously to light chains that are part of a complete Ig, BJ proteins were highly mutated and showed nucleotide changes compatible with antigen-driven selection; because this process can only operate on B lymphocytes with surface Ig receptors, which are composed of both light and heavy chains, selection of the BJ clone most likely occurred before the heavy chain was lost.

Sahota et al<sup>8</sup> analyzed myeloma VH and VL regions and found that 10 of 15 cases (~67%) showed evidence of clonal selection (VL contributed to 4 cases and VH to the other 6), a result that is quite similar to what was found in our study (8 of 14 amyloid clones with significant concentration of R mutations in the CDR). The mutation rate of amyloid light chains is also comparable to that observed in myeloma, with a median of 5.7% for amyloidogenic VL and 5.8%<sup>8</sup> and 8.2%<sup>31</sup> for myeloma VL and VH, respectively. A similar degree of somatic mutations was also found in the VH regions of patients with monoclonal gammopathy of undetermined significance, but evidence of clone selection is still not clear in this condition.<sup>27</sup> These results suggest that myeloma<sup>8,27,31-33</sup> and AL amyloidosis progenitors similarly undergo somatic hypermutation and antigenic selection and, together with the apparent absence of significant

intraclonal diversification, indicate that the transformation generating the expanded amyloidogenic marrow PC population probably occurs very late, after completion of B-cell maturation and selection.

Despite numbers of R mutations in the CDR generally higher than those predicted by chance (Tables 2 and 3), clustering of CDR-R mutations was not significant in about 40% of amyloid clones. However, it should be kept in mind that this type of analysis is limited to the study of the V segment, which comprises only part of the antigen binding loops in the mature V region: CDR1 and CDR2 and, in light chains, the 5' portion of CDR3. Therefore, the contribution of CDR3, which is often essential for optimal antigen recognition,<sup>34</sup> could not be addressed fully in this study.

Light chain deposition disease, another condition characterized by monoclonal light chain tissue deposition, though most frequently of the  $\kappa$  type and lacking the characteristic birefringence of amyloid deposits, has been studied using biochemical and genetic approaches.<sup>35</sup> Similarly to our findings in AL amyloidosis, sequencing data<sup>36</sup> in this latter condition also suggest possible overrepresentation of a germline gene, B3, the only member of the V $\kappa$ IV subgroup. R substitutions, likely caused by somatic hypermutation, were also found here preferentially in the CDR of two V $\kappa$ IV light chains.<sup>37,38</sup>

Dimers of free light chains may function as primitive antibodies, because they can structurally mimic the combining site,<sup>34</sup> and it has been proposed that the initial event leading to amyloid formation might be an antigen-antibody interaction involving amyloid light chains and tissue components and that this phenomenon may account for the heterogeneity of organ involvement typically observed in AL amyloidosis.<sup>39</sup> According to mutation analysis, a substantial proportion of amyloidogenic light chains have genetic features that are not incompatible with this hypothesis; evidence is shown that many amyloid forming light chains were synthesized by clones selected during antibody response to a T-cell-dependent antigen and may therefore possess the capacity to interact with specific ligands, albeit to a lesser extent than intact Ig.

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#### REFERENCES

1. Stone MJ: Amyloidosis: A final common pathway for protein deposition in tissues. *Blood* 75:531, 1990
2. Perfetti V, Bellotti V, Garini P, Zorzoli I, Rovati B, Marinone MG, Ippoliti G, Merlini G: AL amyloidosis: Characterization of amyloidogenic cells by anti-idiotypic monoclonal antibodies. *Lab Invest* 71:853, 1994
3. Stewart Ak, Schwartz RS: Immunoglobulin V regions and the B cell. *Blood* 83:1717, 1994
4. Shlomchik MJ, Aucoin AH, Pisetsky DS, Weigert MG: Structure and function of anti-DNA autoantibodies derived from a single autoimmune mouse. *Proc Natl Acad Sci USA* 84:9150, 1987
5. Perfetti V, Sassano M, Ubbiali P, Colli Vignarelli M, Arbustini E, Corti A, Merlini G: Inverse PCR for cloning complete human immunoglobulin variable regions and leaders conserving the original sequence. *Anal Biochem* 239:107, 1996

6. Solomon A, Weiss DT: Protein and host factors implicated in the pathogenesis of light chain amyloidosis (AL amyloidosis). *Amyloid Int J Exp Clin Invest* 2:269, 1995
7. Perfetti V, Garini P, Colli Vignarelli M, Marinone MG, Zorzoli I, Merlini G: Diagnostic approach to and follow-up of difficult cases of AL amyloidosis. *Haematologica* 80:409, 1995
8. Sahota SS, Leo R, Hamblin TJ, Stevenson FK: Myeloma VL and VH gene sequences reveal a complementary imprint of antigen selection in tumor cells. *Blood* 89:219, 1997
9. Lokhorst HM, Boom SE, Bast BJEG, Ballieux RE: Determination of the plasma cell labelling index with bromodeoxyuridine in a double fluorescence technique. *Br J Haematol* 64:271, 1986
10. Altschul SF, Gish W, Miller W, Myers EW, Lipman DJ: Basic local alignment search tool. *J Mol Biol* 215:403, 1990
11. Chang B, Casali P: The CDR1 sequences of a major proportion of human germline Ig VH genes are inherently susceptible to amino acid replacement. *Immunol Today* 15:367, 1994
12. Williams SC, Winter G: Cloning and sequencing of human immunoglobulin V $\lambda$  gene segments. *Eur J Immunol* 23:1456, 1993
13. Cox JPL, Tomlinson IM, Winter G: A directory of human germ-line V $\kappa$  segments reveals a strong bias in their usage. *Eur J Immunol* 24:827, 1994
14. Stoppini M, Bellotti V, Negri A, Merlini G, Garver F, Ferri G: Characterization of the two unique human anti-flavin monoclonal immunoglobulins. *Eur J Biochem* 228:886, 1995
15. Bellotti V, Stoppini M, Mangione P, Fornasieri A, Min L, Merlini G, Ferri G: Structural and functional characterization of three human immunoglobulin  $\kappa$  light chains with different pathological implications. *Biochem Biophys Acta* 1317:161, 1996
16. Gertz MA, Kyle RA, Greipp PR: The plasma cell labeling index: A valuable tool in primary systemic amyloidosis. *Blood* 74:1108, 1989
17. Combriato G, Klobeck HG: V $\lambda$  and J $\lambda$ -C $\lambda$  gene segments of the human immunoglobulin  $\lambda$  chain are separated by 14kb and rearranged by a deletion mechanism. *Eur J Immunol* 21:1513, 1991
18. Williams SC, Frippiat J-P, Tomlinson IM, Ignatovic O, Lefranc M-P, Winter G: Sequence and evolution of the human germline V $\lambda$  repertoire. *J Mol Biol* 264:220, 1996
19. Ohlin M, Borrebaeck CAK: Characteristics of human antibody repertoires following active immune responses *in vivo*. *Mol Immunol* 33:583, 1996
20. Juul L, Hougs L, Andersen V, Svejgaard A, Barington T: The normally expressed  $\kappa$  immunoglobulin light chain gene repertoire and somatic mutations studied by single-sided specific polymerase chain reaction (PCR); frequent occurrence of features often assigned to autoimmunity. *Clin Exp Immunol* 109:194, 1997
21. Lafaille JJ, DeCloux A, Bonneville M, Takagaki Y, Tonegawa S: Junctional sequences of T-cell receptor  $\gamma\delta$  genes: Implications for  $\gamma\delta$  T-cell lineages and for a novel intermediate of V-(D)-J joining. *Cell* 59:859, 1989
22. Kabat EA, Wu TT, Perry HM, Gottesman KS, Foeller C: Sequences of Proteins of Immunological Interest (ed 5). Washington, DC, US Department of Health and Human Services, National Institutes of Health, 1991
23. Eulitz M, Linke RP: The precursor molecule of a V $\lambda$ II- immunoglobulin light chain-derived amyloid fibril protein circulates precleaved. *Biochem Biophys Res Commun* 194:1427, 1993
24. Schable KF, Zachau HG: The variable genes of the human immunoglobulin  $\kappa$  locus. *Biol Chem Hoppe-Seyler* 374:1001, 1993
25. Zachau HG: The human immunoglobulin  $\kappa$  genes, in Honjo T, Alt FW (eds): *Immunoglobulin Genes*. San Diego, CA, Academic, 1995, p 173
26. Liu YJ, Johnson GD, Gordon J, MacLennan ICM: Germinal centers in T-cell-dependent antibody responses. *Immunol Today* 13:17, 1992
27. Sahota SS, Leo R, Hamblin TJ, Stevenson FK: Ig VH gene mutational patterns indicate different tumor cell status in human myeloma and monoclonal gammopathy of undetermined significance. *Blood* 87:746, 1996
28. Schwartz RS, Stollar BD: Heavy-chain directed B-cell maturation: Continuous clonal selection beginning at the pre-B cell stage. *Immunol Today* 15:27, 1994
29. Klein R, Jaenichen R, Zachau HG: Expressed human immunoglobulin  $\kappa$  genes and their hypermutation. *Eur J Immunol* 23:3248, 1993
30. Victor KD, Capra JD: An apparently common mechanism of generating antibody diversity: Length variation of the VL-JL junction. *Mol Immunol* 31:39, 1994
31. Vescio RA, Cao J, Hong CH, Lee JC, Wu CH, Der Danielian M, Wu V, Newman R, Lichtenstein AK, Berenson JR: Myeloma Ig heavy chain V region sequences reveal prior antigenic selection and marked somatic mutation but no intraclonal diversity. *J Immunol* 155:2487, 1995
32. Bakkus MHC, Heirman C, Van Riet I, Van Camp B, Thielemans K: Evidence that multiple myeloma Ig heavy chain VDJ genes contain somatic mutations but show no intraclonal variation. *Blood* 80:2326, 1992
33. Ralph QM, Brisco MJ, Joshua DE, Brown R, Gibson J, Morley AA: Advancement of multiple myeloma from diagnosis through the plateau phase to progression does not involve a new B-cell clone: Evidence from the Ig heavy chain gene. *Blood* 82:202, 1993
34. Padlan EA: Anatomy of the antibody molecule. *Mol Immunol* 31:169, 1994
35. Preud'homme J-L, Aucouturier P, Touchard G, Striker L, Khamlichi AA, Rocca A, Denoroy L, Cogné M: Monoclonal immunoglobulin deposition disease (Randall type). Relationship with structural abnormalities of immunoglobulin chains. *Kidney Int* 46:965, 1994
36. Denoroy L, Deret S, Aucouturier P: Overrepresentation of the V kappa IV subgroup in light chain deposition disease. *Immunol Lett* 42:63, 1994
37. Cogné M, Preud'homme J-L, Bauwens M, Touchard G, Aucouturier P: Structure of a monoclonal kappa chain of the V $\kappa$ IV subgroup in the kidney and plasma cells in light chain deposition disease. *J Clin Invest* 87:2186, 1991
38. Khamlichi AA, Aucouturier P, Silvain C, Bauwens M, Touchard G, Preud'homme J-L, Nau F, Cogné M: Primary structure of a monoclonal  $\kappa$  chain in myeloma with light chain deposition disease. *Clin Exp Immunol* 87:122, 1992
39. Osserman EF, Takatsuki K, Talal N: Multiple myeloma. I. The pathogenesis of "amyloidosis." *Semin Hematol* 1:3, 1964