

	ALL		AML
	The blast are <b>more than or equal to 20%</b> of normal cells		
types	<b><u>B-ALL</u></b>	<b><u>T-ALL</u></b>	-
More in	children	teenagers	adults
Clinical features	1-pancytopenia (decreases WBC, Hb, and platelets). 2-organ infiltration: hepatosplenomegaly.		
Special clinical features	-	<b>Mediastinal mass</b>	<b>1-Myeloid sarcoma, gum hypertrophy</b> and CNS diseases more with <b>acute monoblastic leukemia (M4,M5)</b> <b>2-DIC:</b> more with <b>acute promyelocytic leukemia (M3)</b>
	<b>Lymphadenopathy</b> (very common) <u>Testicles</u> involvement, <u>CNS</u> disease (In both but more in T-ALL)		
markers	<b><u>CD34</u></b> (stem cell marker)		
	<b>Tdt</b> (stem cell marker)		<b>MPO</b> CD13 CD33 CD14 CD64 CD41 CD235a
	<b>CD10</b> <b>CD19</b> CD22 CD79a	<b>CD3</b> CD4 CD4 CD7 CD8	
Morphology		Cytoplasm is scanty, agranular may be vacuolated <b>Auer rods is characteristic</b>	
Genetic Abnormalities (WHO classification)	<b>t(12;21)</b> >better prognosis. <b>t(9;22)</b> >worse prognosis.	-	<b>t(8;21)</b> <b>t(15;17)</b> t or inv(16;16)
prognosis	Better than T-ALL	Worse than B-ALL	Worse than ALL
FAB classification (Based on <u>morphology</u> )	-	-	<b>1-M3-acute promyelocytic leukemia:</b> characteristic by <b>t(15;17)</b> and it contains numerous primary granules that increase the risk of <b>DIC.</b> <b>2-M4 and M5- acute monocytic leukemia:</b> characterized by <b>gum hypertrophy.</b>