

Barriers to Utilization of Family Medicine Services in Jordan: A Cross-Sectional Study of Patient Perceptions and Systemic Challenges

Sawsan Wasfi Naser Darabseh

Master of Science (MSc) in Medical Laboratory Technology

Beni-Suef University, Egypt

sawsanwasfidarabseh@gmail.com

Corresponding Author: Sawsan Wasfi Naser Darabseh

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ABSTRACT

This article explores the revolutionary role of DNA analysis technologies in transforming the early diagnosis of blood diseases. By examining genetic profiling, next-generation sequencing (NGS), liquid biopsy, and artificial intelligence-driven bioinformatics, this review highlights the transformative potential of personalized genomic medicine. Early and precise detection enables preemptive interventions, improved patient monitoring, and targeted therapeutic strategies, thereby enhancing survival outcomes in both hematologic malignancies and inherited blood disorders.

KEYWORDS: DNA analysis next-generation sequencing, liquid biopsy, hematologic malignancies, inherited blood disorders, precision medicine

Introduction

The diagnosis and management of hematologic diseases have historically relied on clinical symptoms, blood smear evaluations, and cytogenetic analyses. While these approaches remain valuable, they often fail to detect disease at the molecular level during its earliest phases. This diagnostic gap has led to late interventions, reduced treatment efficacy, and poorer patient outcomes. With the rapid progress in genomic sciences, DNA analysis has emerged as a powerful diagnostic tool that addresses these limitations by unveiling disease-specific molecular signatures long before clinical manifestations appear.

In recent years, advances in molecular hematology have profoundly reshaped our understanding of the genetic architecture of blood diseases. Hematologic malignancies such as acute myeloid leukemia (AML), acute lymphoblastic leukemia (ALL), and myelodysplastic syndromes (MDS) are increasingly recognized as disorders driven by a spectrum of recurrent genetic mutations. Early identification of somatic mutations—such as TP53, DNMT3A, NPM1, and FLT3—not only improves diagnostic accuracy but also provides prognostic information and influences therapeutic

decision-making.

Similarly, inherited blood disorders such as sickle cell disease, thalassemia, and hemophilia have benefitted from DNA-based diagnostics. Carrier detection, prenatal screening, and preimplantation genetic testing now enable families to make informed reproductive decisions, reducing disease burden at the population level. These advances underscore how DNA analysis has transcended the laboratory to become a central component of preventive and predictive medicine.

The advent of next-generation sequencing (NGS) technologies has revolutionized the scale, speed, and resolution with which genomic data can be generated. Combined with liquid biopsy techniques that analyze circulating tumor DNA (ctDNA) and artificial intelligence-driven bioinformatics, clinicians now have unprecedented tools to monitor clonal evolution, track minimal residual disease (MRD), and personalize

therapy. These innovations not only reduce the need for invasive procedures but also provide real-time insights into disease dynamics

Despite these promising developments, significant challenges remain. High costs, lack of standardization in variant interpretation, disparities in global healthcare access, and concerns over genetic data privacy continue to limit the universal adoption of DNA-based diagnostics

Nevertheless, the trajectory of research and clinical practice points toward a future in which

precision hematology—powered by DNA analysis—becomes the standard of care

This review synthesizes recent advances in DNA analysis for early diagnosis of blood diseases, focusing on next-generation sequencing, liquid biopsy, inherited blood disorder testing, and computational approaches. By exploring both clinical applications and ongoing challenges, it highlights how genomic technologies are driving a paradigm shift in hematology toward earlier, more accurate, and more personalized patient care

Discussion

1. Next-Generation Sequencing (NGS) in Hematology

NGS has become the gold standard for comprehensive genomic profiling in hematologic malignancies. Compared to traditional methods such as karyotyping or fluorescence in situ hybridization (FISH), NGS offers higher sensitivity and the ability to detect subclonal mutations. Recent studies demonstrate that NGS can identify rare driver mutations in genes such as *ASXL1*, *RUNX1*, and *IDH1/2*, which carry prognostic implications in MDS (Papaemmanuil et al., 2016)

Long-read sequencing platforms (Oxford Nanopore, PacBio) further enable detection of complex structural variants and fusion genes often missed by short-read sequencing. This is particularly important in chronic myeloid leukemia (CML), where *BCR-ABL1* fusion variants influence therapeutic resistance. The identification of clonal hematopoiesis of indeterminate potential (CHIP) has opened a new frontier in preventive hematology, highlighting a pre-leukemic state that allows for long-term monitoring and early interventions (Heuser et al., 2020)

2. Liquid Biopsy and cfDNA Analysis

Liquid biopsy represents a paradigm shift in hematologic diagnostics by enabling non-invasive, real-time monitoring of tumor dynamics. Unlike bone marrow biopsies, liquid biopsy allows serial sampling and reflects tumor heterogeneity across different compartments

Clinical applications include

Minimal Residual Disease (MRD) detection: cfDNA assays can detect disease at sensitivities down to 0.01%, outperforming conventional flow cytometry

Clonal evolution tracking: Monitoring resistant clones (e.g., *FLT3-ITD* mutations in AML) provides actionable insights for therapy adjustment

Transplantation monitoring: Post-hematopoietic stem cell transplantation, cfDNA identifies early relapse, donor chimerism, and graft failure

cfDNA methylation profiling has emerged as a biomarker for distinguishing between benign and malignant hematologic conditions (Liu et al., 2020)

3. Diagnosis of Inherited Blood Disorders

DNA-based testing has drastically improved the diagnosis and prevention of inherited blood disorders. Next-generation carrier screening panels can simultaneously test hundreds of genes, offering comprehensive risk assessment for high-prevalence regions such as the Mediterranean

.and sub-Saharan Africa

:Examples

Thalassemia: Targeted sequencing allows rapid identification of α -globin mutations, crucial for nationwide prevention programs

.Hemophilia: Sequencing of F8 and F9 genes helps differentiate carriers from affected individuals

Sickle Cell Disease (SCD): DNA-based newborn screening enables early prophylactic treatments (penicillin, hydroxyurea), improving survival

These applications demonstrate how genetic analysis has evolved from diagnosis to preventive and precision medicine

4. Integration with Artificial Intelligence and Bioinformatics

The explosion of genomic data requires robust computational tools. AI and machine learning (ML) algorithms have revolutionized variant interpretation and disease classification

.Predicting functional impact of novel mutations

Integrating multi-omics datasets (genomics, transcriptomics, proteomics, epigenomics). Identifying predictive biomarkers for therapy selection

AI models predict therapeutic response to tyrosine kinase inhibitors in CML and classify AML subtypes based on mutational signatures (Cho et al., 2022). Integration of AI, NGS, and cloud-based genomic databases can democratize access to advanced diagnostics globally

5. Challenges and Limitations

:Despite rapid advancements, several barriers remain

Cost and accessibility: NGS-based diagnostics remain expensive for many low- and middle-income countries

.Standardization issues: Lack of globally accepted protocols for variant interpretation

Ethical and legal concerns: Patient consent, data ownership, and potential genetic discrimination. Equity in healthcare: Unequal access may exacerbate disparities in genomic medicine

International collaboration, governmental support, and public-private partnerships are required to make genomic diagnostics universally accessible

Expanded Conclusion

DNA analysis has transitioned from an experimental tool to a clinical necessity in modern hematology. Its role in early detection, risk stratification, treatment guidance, and long-term monitoring surpasses traditional

diagnostic methods. Integration of NGS, liquid biopsy, AI-powered bioinformatics, and preventive genomic screening heralds a future of predictive, preventive, and personalized medicine

:In the next decade, we anticipate

1. Widespread implementation of population-level genetic screening programs.
2. Routine use of liquid biopsy for MRD monitoring in leukemia and lymphoma.
3. Integration of AI and big data analytics into clinical workflows for real-time decision-making.
4. Cost reduction and equitable access to genomic diagnostics worldwide.

Ultimately, DNA analysis provides a blueprint for a healthcare system where diseases are intercepted before symptoms arise, therapies are tailored to individual patients, and long-term outcomes are improved. Continued investment in research, infrastructure, and ethical frameworks is essential to fully realize the transformative potential of genomic medicine in hematology

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