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Centro de Referencia Perinatal Oriente
Facultad de Medicina, Universidad de Chile



Estudio Genético en Displasias Esqueléticas

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Introducción



- Prevalencia de 1:4000 RNV.
 - 23% mortinatos, el 32% mueren en periodo neonatal.
- Corresponden al 5% de los trastornos genéticos identificados en el período neonatal.
- Aprox 50% son letales en el período perinatal.
- Letales más comunes: Displasia Tanotofórica (29%), Osteogénesis Imperfecta tipo II (14%) y Acondrogénesis (9%).



Introducción

- El descubrimiento incidental requiere de un examen sistemático de las extremidades, la cabeza, el tórax y la columna para llegar al diagnóstico correcto.
 - Enfoque orientado a distinción de formas letales de no letales.
- Dg prenatal → asesoramiento y toma de decisiones.



Dysplasia	Prevalence	Etiology	Prognosis	Features
Thanatophoric dysplasia	1 in 10,000	Sporadic	Lethal	Limbs: very short. Thorax: narrow. Trunk: normal. Head: large with prominent forehead.
<i>Type I</i>				Femurs: curved (telephone receiver).
<i>Type II</i>				Femurs: straight. Skull: cloverleaf-shaped.
Osteogenesis imperfecta	1 in 15,000	Autosomal dominant		Fragile bones. Several types but the most severe cases that present prenatally are types II and III.
<i>Type II</i>			Lethal	Limbs: short with fractures. Thorax small with multiple fractures of ribs. Head: hypomineralization of the skull.
<i>Type III</i>			Variable	Multiple fractures, usually present at birth, resulting in scoliosis and very short stature.
Achondroplasia	1 in 25,000	Autosomal dominant	Normal	Limbs: short, but >22 weeks. Head: large with prominent forehead. Spine: lumbar lordosis.
Achondrogenesis	1 in 40,000		Lethal	Limbs: severe shortening. Thorax: narrow. Trunk: short. Head: large with prominent forehead.
<i>Type I</i>		Autosomal recessive		Skull: hypomineralization. Spine: hypomineralization. Thorax: rib fractures.
<i>Type II</i>		Sporadic		Skull: no hypomineralization. Spine: hypomineralization. Thorax: no rib fractures.

<i>Asphyxiating thoracic dystrophy</i>	1 in 70,000	Autosomal recessive	Variable	Limbs: short, but >22 weeks. Thorax: narrow and short.
<i>Ellis–Van Creveld syndrome</i>	1 in 100,000	Autosomal recessive	Variable	Limbs: acromelic and mesomelic shortening, postaxial polydactyly. Thorax: small. Other: heart defects in >50% of cases.
<i>Hypophosphatasia</i>	1 in 100,000	Autosomal recessive	Lethal	Limbs: very short. Thorax: small. Other: hypomineralization of all bones.
<i>Campomelic dysplasia</i>	1 in 200,000	Autosomal recessive	Lethal	Limbs: short, bowed leg bones. Thorax: narrow, hypoplastic scapulae. Head: large with small face.
<i>Jarcho–Levin syndrome</i>	1 in 200,000	Autosomal recessive	Variable	Limbs: normal length. Thorax: short narrow. Trunk: short. Fused vertebral bodies and ribs.
<i>Diastrophic dysplasia</i>	1 in 500,000	Autosomal recessive	Normal	Limbs: very short and bowed. Joints: flexion contractures, talipes. Spine: scoliosis. Other: 'hitchhiker thumb'.



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Group/name of disorder	Inheritance	Gene(s)	OMIM number	ORPHANET code	Notes
1. FGFR3 chondrodysplasia group					
Thanatophoric dysplasia type 1	AD	<i>FGFR3</i>	187600	18060	Includes previous San Diego type
Thanatophoric dysplasia type 2	AD	<i>FGFR3</i>	187601	93274	
Severe achondroplasia with developmental delay and acanthosis nigricans (SADDAN)	AD	<i>FGFR3</i>	616482	85165	
Achondroplasia	AD	<i>FGFR3</i>	100800	15	
Hypochondroplasia	AD	<i>FGFR3</i>	146000	427	
Camptodactyly, tall stature and hearing loss syndrome (CATSHL)	AD, AR	<i>FGFR3</i>	610474	85164	Loss-of-function mutations
See also group 33 for craniosynostosis syndromes linked to <i>FGFR3</i> mutations, as well as LADD syndrome in group 41 for another <i>FGFR3</i> -related phenotype					

9. Ciliopathies with major skeletal involvement

Chondroectodermal dysplasia (Ellis-van Creveld)	AR	<i>EVC1</i>	225500	289	See also Weyers acrofacial (acrocental) dysostosis in group 34	
	AR	<i>EVC2</i>				
	AR	<i>WDR35</i>				
	AR	<i>DYNC2LI1</i>				
Short rib-polydactyly syndrome (SRPS) type 1/3 (Saldino-Noonan/Verma-Naumoff)	AR	<i>DYNC2H1</i>	613091	93270	There is significant clinical and radiological overlap between SRP1/3 and ATD. Some forms of both remain unlinked to the known genes.	
	AR	<i>IFT80</i>				93271
	AR	<i>WDR34</i>				
	AR	<i>WDR60</i>				
	AR	<i>DYNC2LI1</i>				
Asphyxiating thoracic dysplasia (ATD; Jeune)	AR	<i>DYNC2H1</i>	613091	474	Dynein motor	
	AR	<i>DYNC2LI1</i>				
	AR	<i>WDR34</i>				
	AR	<i>TCTEX1D2</i>				
	AR	<i>WDR60</i>				
	AR	<i>WDR19</i>				
	AR	<i>IFT140</i>				

ESTUDIO GENÉTICO



- >90% asociado a mutaciones en genes específicos.
- 40-49% de los casos, US no es suficiente para diferenciar el tipo de displasia esquelética.
- Importancia en el diagnóstico de displasias esqueléticas letales.

Table 1. Selected lethal or life-limiting skeletal dysplasias

Skeletal dysplasia	OMIM*	ORPHA code**	Inheritance	Gene/genes (chromosome location)
Thanatophoric dysplasia type I type II	187600 187601	2655 1860 93274	AD	<i>FGFR3</i> (4p16.3)
Osteogenesis imperfecta type II	166210	216804	AD	<i>COL1A1</i> (17q21.33) <i>COL1A2</i> (7q21.3)
Achondrogenesis type Ia type Ib type II	200600 600972 200610	932 93299 93298 93296	AR – type Ia, Ib AD – type II	<i>TRIP11</i> (14q32) – type Ia <i>SLC26A2</i> (5q32) – type Ib <i>COL2A1</i> (12q13.11) – type II
Campomelic dysplasia	114290	140	AD	<i>SOX9</i> (17q24)
Asphyxiating thoracic dystrophy	208500	474	AR	<i>DYNC2H1</i> (11q22.3), <i>DYNC2L1</i> (2p21), <i>DYNC2L2</i> (9q34.11), <i>DYNLT2B</i> (3q29), <i>DYNC2I1</i> (7q36.3), <i>WDR19</i> (4p14), <i>IFT140</i> (16p13.3), <i>TTC21B</i> (2q24.3), <i>IFT80</i> (3q25.33), <i>IFT172</i> (2p23.3), <i>IFT81</i> (12q24.11), <i>IFT52</i> (20q13.12), <i>TRAF3IP1</i> (2q37.3), <i>CFAP410</i> (21q22.3), <i>CEP120</i> (5q23.2), <i>KIAA0586</i> (14q23.1), <i>KIAA0753</i> (17p13.1)
Fibrochondrogenesis type 1 type 2	228520 614524	2021	AR – type 1 AR or AD – type 2	<i>COL11A1</i> (1p21) – type 1 <i>COL11A2</i> (6p21.3) – type 2
Atelosteogenesis type I type II type III	108720 256050 108721	1190 56304 56305	AD – type I, III AR – type II	<i>FLNB</i> (3p14) – type I, III <i>SLC26A2</i> (5q32) – type II
Homozygous achondroplasia	100800	15	AD (homozygous mutation)	<i>FGFR3</i> (4p16.3)

* OMIM – <https://omim.org>; ** Orphanet – <https://www.orpha.net>; AR (autosomal recessive) – homozygous mutation or compound heterozygous mutations; AD (autosomal dominant) – heterozygous mutation.

Prenatal diagnosis of fetal skeletal dysplasia using targeted next-generation sequencing: an analysis of 30 cases



Yan Liu¹, Li Wang², Yi-Ke Yang¹, Ying Liang³, Tie-Juan Zhang², Na Liang², Li-Man Yang², Si-Jing Li², Dan Shan¹ and Qing-Qing Wu^{2*}

- 30 casos; 15 malformaciones esqueléticas sistémicas; 15 malformaciones esqueléticas locales.
- Cordocentesis o muestra de tejido muscular en mortinatos.
- Cariograma → WGS → NGS
- Si (+), testeo a padres.


Resultados



- 2/30 casos → Trisomía 18
- Anomalías focales → 6/13 WGS (+)
- Anomalías sistémicas → 15/15 NGS (+)



Rapid prenatal diagnosis of skeletal dysplasia using medical trio exome sequencing: Benefit for prenatal counseling and pregnancy management

Jin Han¹ | Yan-Dong Yang² | Yi He³ | Wen-Jie Liu⁴ | Li Zhen¹ | Min Pan¹ |
Xin Yang¹ | Victor Wei Zhang^{4,5} | Can Liao¹ | Dong-Zhi Li¹ 

- 27 casos con sospecha de DE por US.
- 88,9% (24/27) → alteración genética
- 1/27 → T18
- COL1A1, COL1A2 y FGFR3 → 66,7% (18/27)



Whole Exome Sequencing Aids the Diagnosis of Fetal Skeletal Dysplasia

Hui Tang^{1,2†}, Qin Zhang^{1,2†}, Jingjing Xiang^{1,2†}, Linliang Yin^{1,2}, Jing Wang^{3*} and Ting Wang^{1,2*}

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- 16 casos.
- 1/16 → delección en gen DMD, heredado.
- 11/16 → WES (+): DYNC2H1 (1), ALPL (2), FGFR3 (2), COL1A2 (3), COL1A1 (2), HSPG2 (1)

Combined exome sequencing and deep phenotyping in highly selected fetuses with skeletal dysplasia during the first and second trimesters improves diagnostic yield

Xinyue Zhang¹ | Yuan Ren¹  | Rui Song¹ | Longxia Wang² | Hong Xu² | Xiaoxiao Xie¹  | Honghui Zhou¹ | Pei Sun³ | Manli Zhang⁴ | Qingdong Zhao¹ | Yanqin You¹ | Zhiying Gao¹ | Yuanguang Meng¹ | Yanping Lu¹

- 27 casos
- 77,8% (21/27) → COL1A1, FGFR3, COL2A1, COL1A2, FLNB, DYNC2LI1 y TRIP11.
- De novo 19/27)

Conclusiones



- Detección de Displasias Esqueléticas letales →
¿Interrupción?
- Consejería para padres:
 - Pronóstico post natal
 - Estudio genético preimplantacional

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