

# Genes and Development

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Kevin A. Strauss, MD\*

\*No Disclosures

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# Common Disorders, Uncommon Causes



CLINICAL DIAGNOSIS	DISORDER	GENE
<b>Cerebral palsy</b>	Glutaric aciduria, type 1 Propionic acidemia Gap junction deficiency Crigler-Najjar syndrome Hereditary spastic paraplegia Segawa dystonia syndrome Idiopathic dystonia	<i>GCDH</i> <i>PCCB</i> <i>GJA12</i> <i>UGT1A1</i> <i>SPG20</i> <i>TH</i> <i>DYT1</i>
<b>Mental retardation</b>	MTHFR deficiency Maple syrup urine disease Phenylketonuria Salla disease Tyrosinemia Bardet-Biedel syndrome Fragile X syndrome	<i>MTHFR</i> <i>BCKDHA</i> <i>PH</i> <i>SLC17A5</i> <i>HPD</i> <i>BBS1</i> <i>FMRI</i>
<b>Epilepsy</b>	Biotinidase deficiency CDFE syndrome (CASPR2) GM3 synthase deficiency LYK5 deficiency syndrome	<i>BTD</i> <i>CNTNAP2</i> <i>ST3GAL5</i> <i>LYK5</i>
<b>Stroke and Hemorrhage</b>	Hypercholanemia, TJP type Hypercholanemia, BAAT Factor V Leiden Sitosterolemia Alpha-1-antitrypsin deficiency	<i>TJP2</i> <i>BAAT</i> <i>F5</i> <i>ABCG8</i> <i>SERPINA1</i>
<b>Sudden death</b>	SIDDT syndrome Hypertrophic cardiomyopathy	<i>TSPYL1</i> <i>SLC25A4</i>
<b>Lethal infection</b>	Properdin deficiency (X-linked) SCID, IL7 receptor type SCID, Omenn type Adenosine deaminase	<i>PFC</i> <i>IL7R</i> <i>RAG1</i> <i>ADA</i>

# 1000 Patients, 115 Disorders

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ABCG8 1720G>A	DNAH5 4348C>T	LMNA 568C>T	SGCB 271C>T
ACADM 985A>G	EDNRB 828G>T	LRP5 1225A>G	SLC12A3 1924C>G
ACADM IVS4-30A>G	ERCC6 IVS14+1G>T	LRP5 1275G>A	SLC12A3 8,627 bp deletion
ADA 646G>A	EVC IVS13+5G>T	MCCC2 295G>C	SLC17A5 115C>T
ADAMTS10 17,346 bp deletion	F11 1327C>T	MCCC2 518insT	SLC25A19 530G>C
AMN 44 bp deletion	F5 1601G>A	MCCC2 687A>C	SLC25A4 523delC
APOA4 552_749dup	FLVCR1 361A>G	MKKS [250C>T + 724G>T]	SLC3A1 IVS6+2T>C
ATP8B1 923G>T	FMR1 (CGG) <sub>n</sub> expansion	MTHFR 1129C>T	SLC3A1 1354C>T
BAAT 226A>G	GALT 563A>G	MVK 803T>C	SLC6A3 [1408T>A + 1409A>G]
BBS1 1169T>G	GALT 940A>G	MVK 1174G>A	SLC6A3 IVS9+1G>T
BCKDHA 1312T>A	GCDH 1262C>T	NPHS1 1481delC	SLC7A9 201C>T
BTD 1459T>C	GJB2 35delG	NPHS1 3250delG	SLC7A9 1166C>T
BTD 1368A>C	GJC2 203A>G	NPHS2 413G>A	SMN1 exon 7 deletion
BTD 1330G>C	GLB1 902C>T	NTRK1 IVS12+1G>A	SPG20 1110delA
C7orf10 895C>T	GLDC 2186delC	PAH 280_282delATC	ST3GAL5 694C>T
C7orf27 638_639insA	GLDC 128delA	PAH 782G>A	STRADA 7 kb deletion
CAPN3 2306G>A	HARS 1361A>C	PAH IVS10-11G>A	TERT 1710C>G
CFP 379T>G	HFE 187C>G	PAH IVS12+1GA	TH 698G>A
CHST3 1298C>T	HFE 845G>A	PAH 782G>A	TJP2 143T>C
CLCNKB 22,508 bp deletion	HPD 85G>A	PCCB 1606A>G	TMC01 139_140delAG
CNGA3 1126G>A	HPD 479A>G	PEPD 793C>T	TNFRSF1A 362G>A
CNTNAP2 3709delG	HPD 1005C>G	PKLR 1436G>A	TNNT1 505G>T
COL1A2 2098G>T	HSD3B2 35G>A	PYGL IVS13+1G>A	TOR1A GAG deletion
CRADD 382G>C	IL7R 2T>G	RAG1 2974A>G	TSPYL1 457_458insG
CYBB 1335C>A	ITCH 394_395insA	RMRP 70A>G	TUBGCP6 5458T>G
CYP11B1 1343G>A	KRIT1 47G>C	SERPINA1 1096G>A	UGT1A1 222C>A
CYP11B2 5 bp deletion	LAMB2 440A>G	SGCB 452C>G	ZMPSTE24 54_55insT

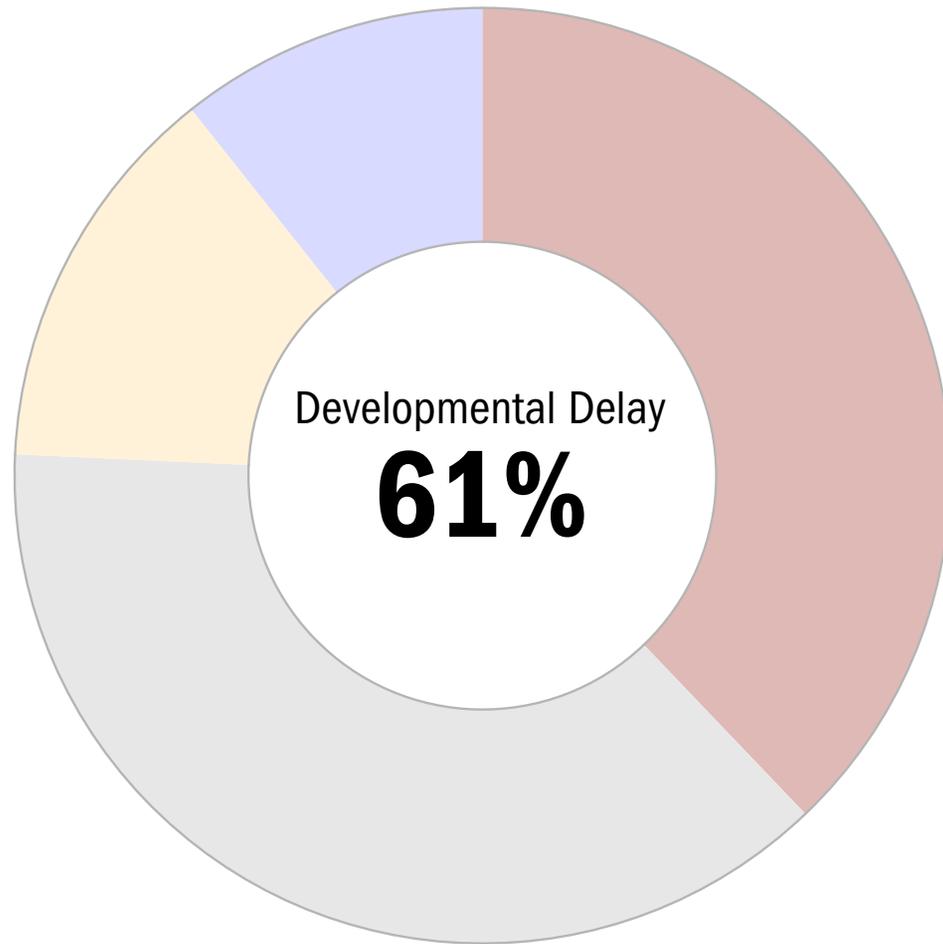


 *Inborn Error of Metabolism*

 *Neurogenetic Disability*

 *Multisystem Dysplasia*

 *Palliative Care*



 *Inborn Error of Metabolism*

 *Neurogenetic Disability*

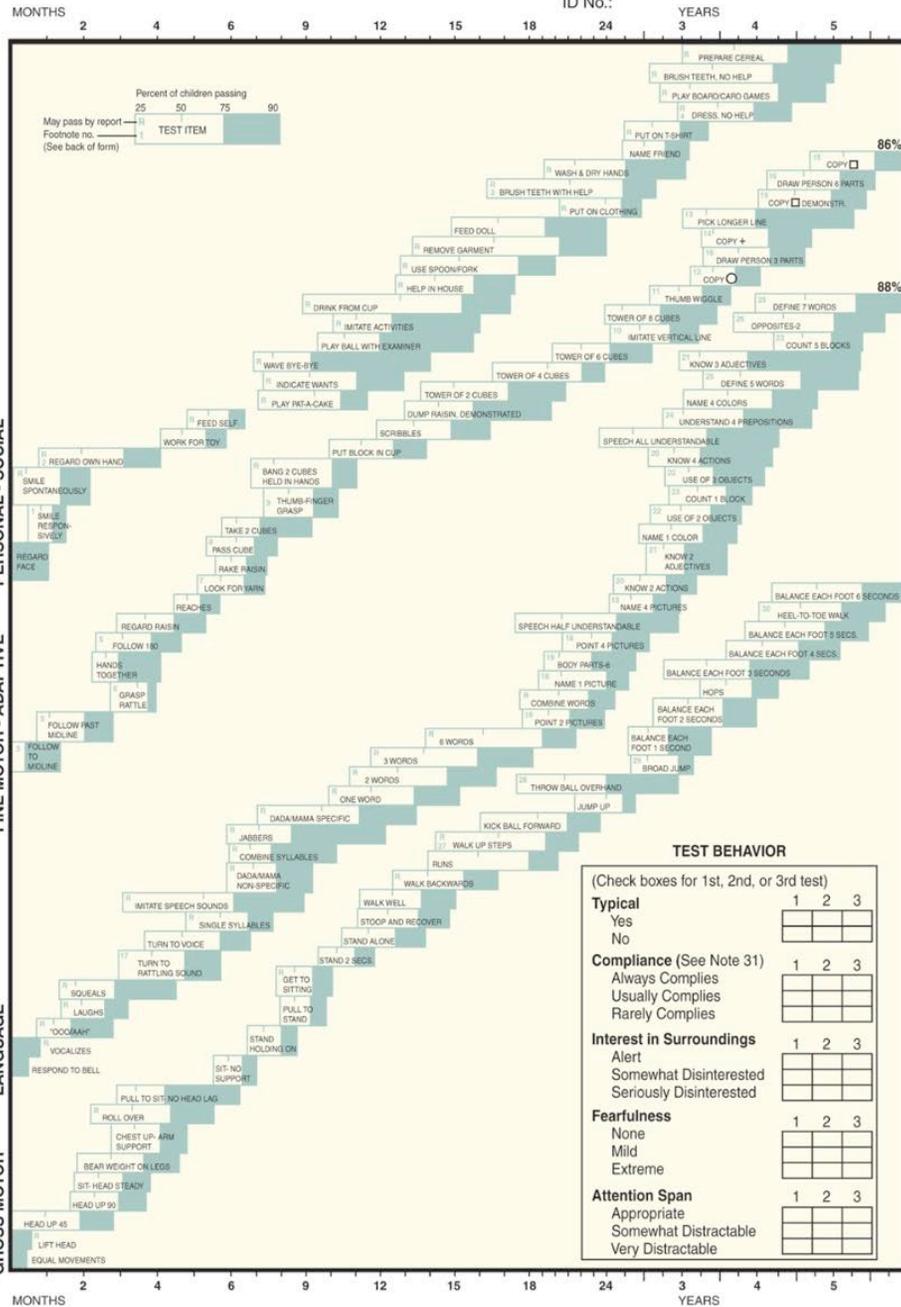
 *Multisystem Dysplasia*

 *Palliative Care*

Denver II

Examiner:  
Date:

Name:  
Birthdate:  
ID No.:

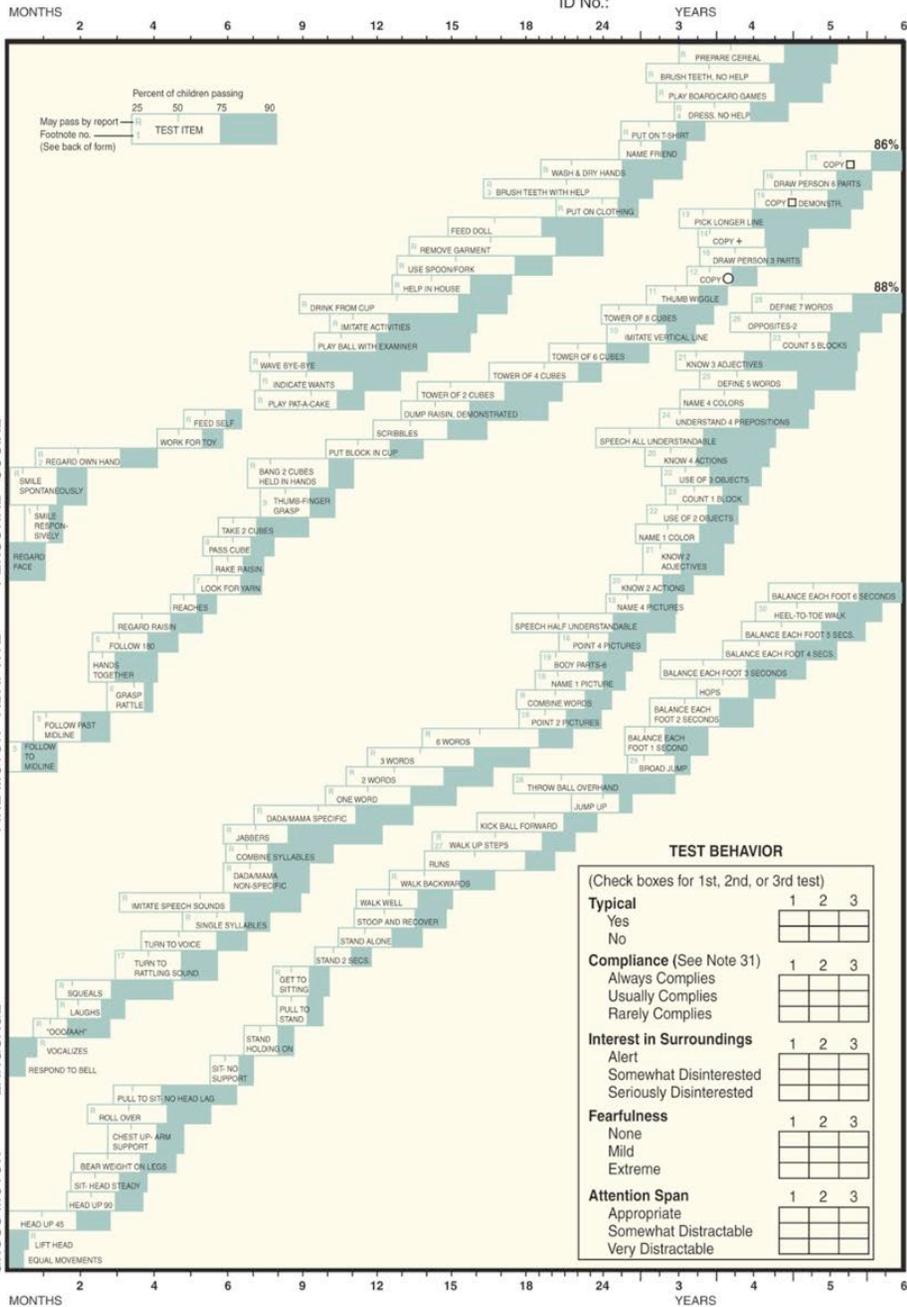


©1969, 1989, 1990 W. K. Frankenburg and J. B. Dodds ©1978 W. K. Frankenburg

Denver II

Examiner:  
Date:

Name:  
Birthdate:  
ID No.:



Social

Adaptive

Language

Motor

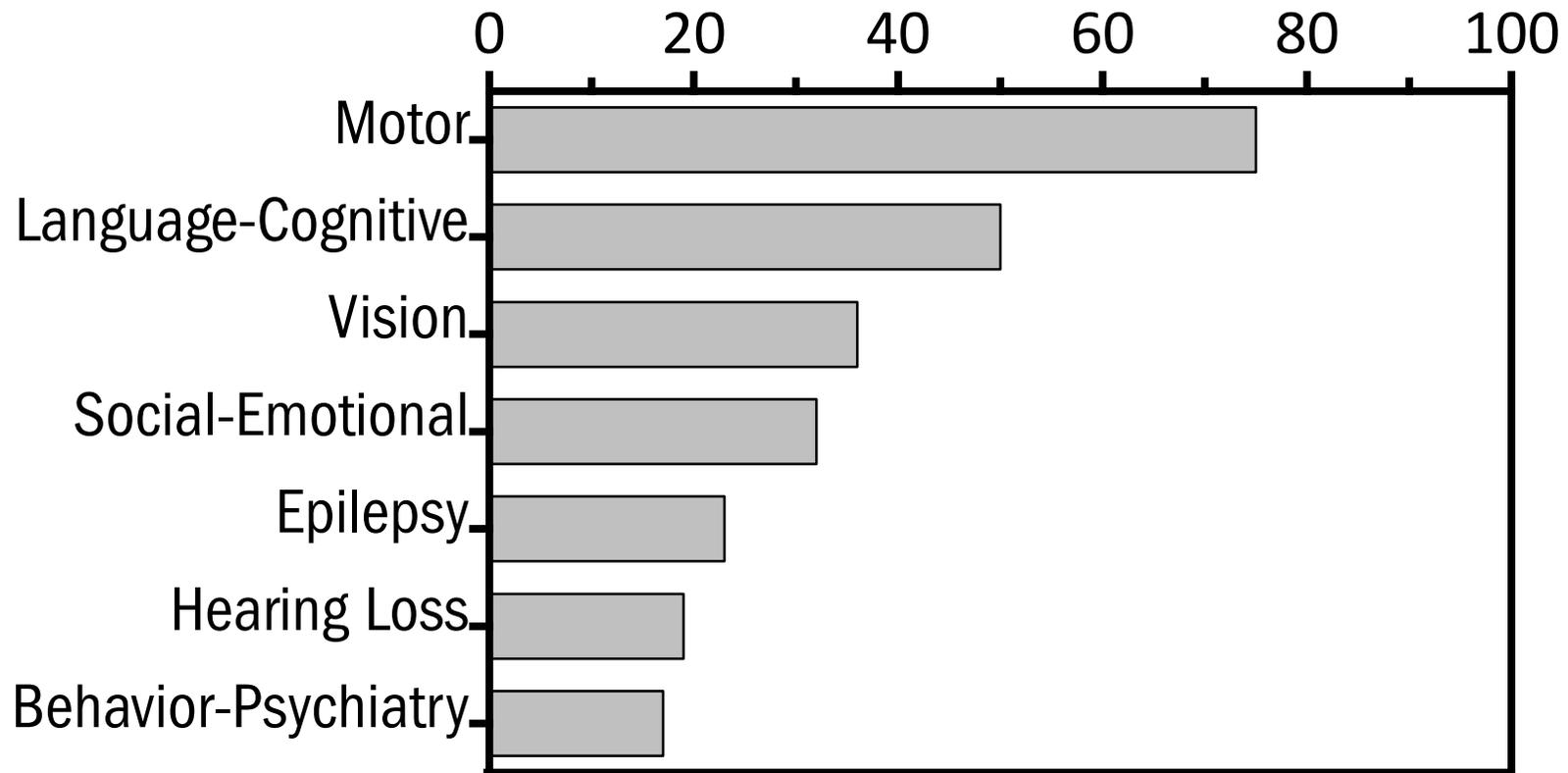
“To move things is all that mankind can do;  
For such the sole executant is muscle, whether in  
whispering a syllable or in felling a forest.”

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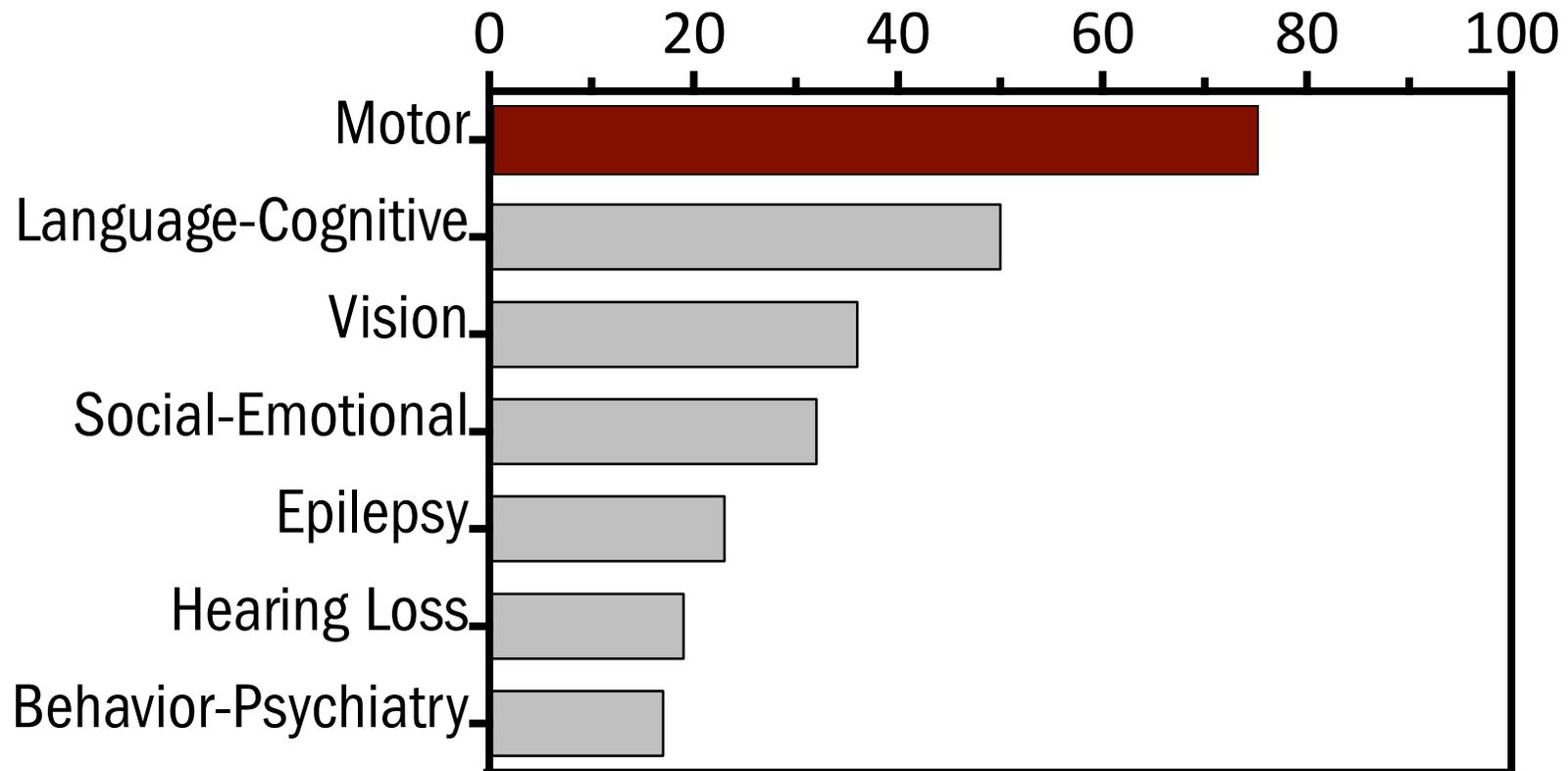
*Charles Sherrington, 1924*

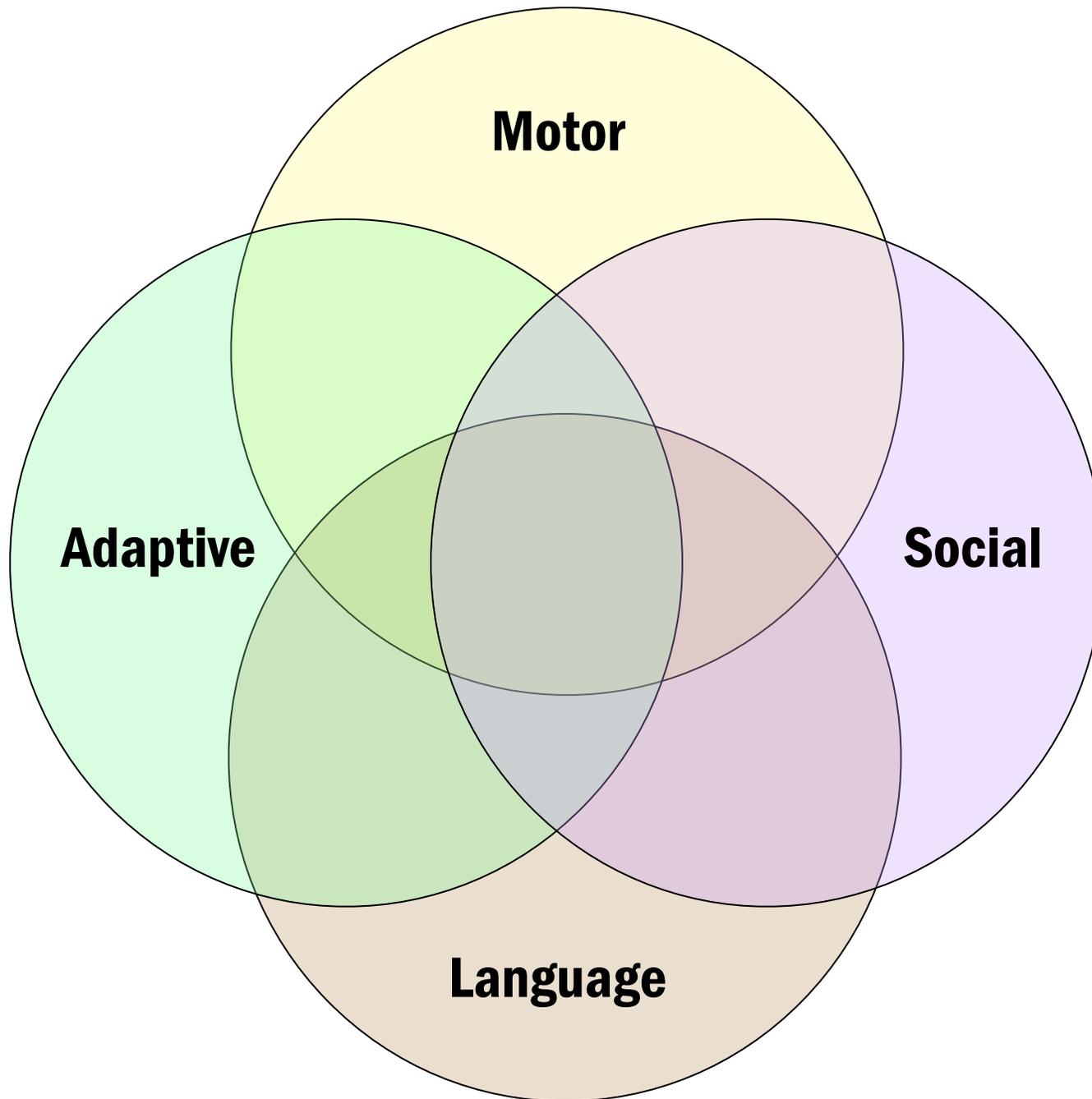


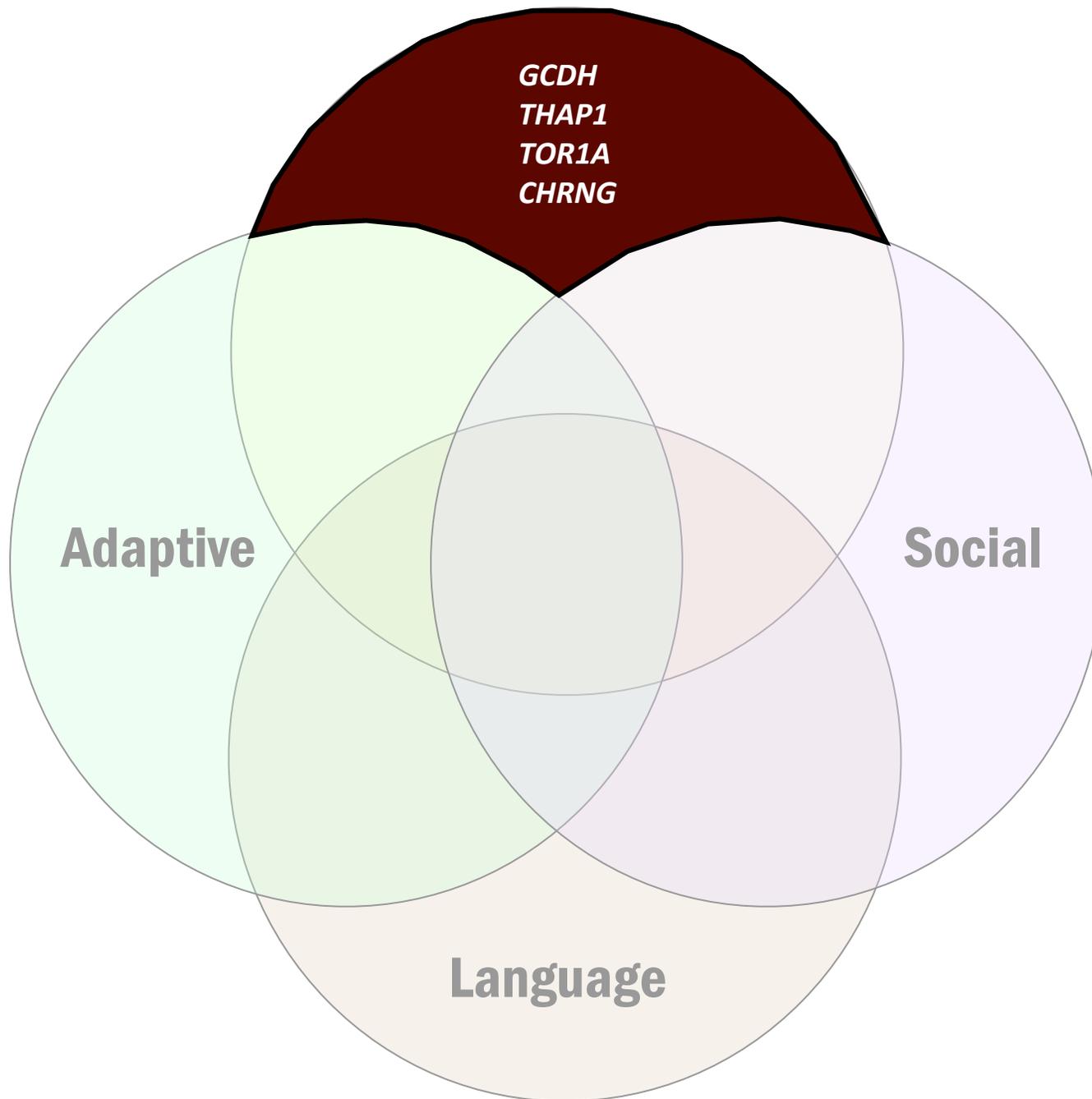
## Developmental Delay (% Disorders)

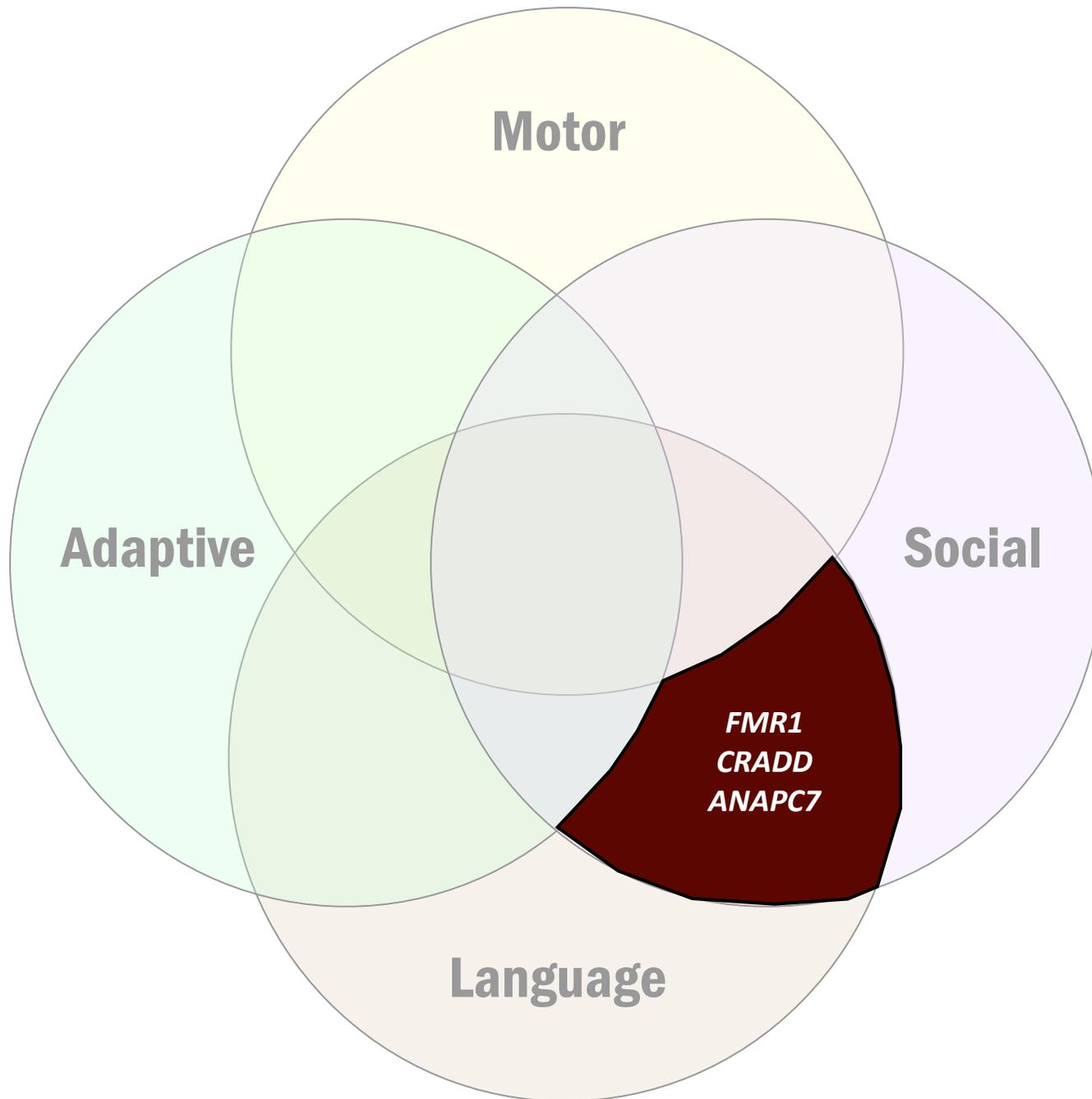


## Developmental Delay (% Disorders)









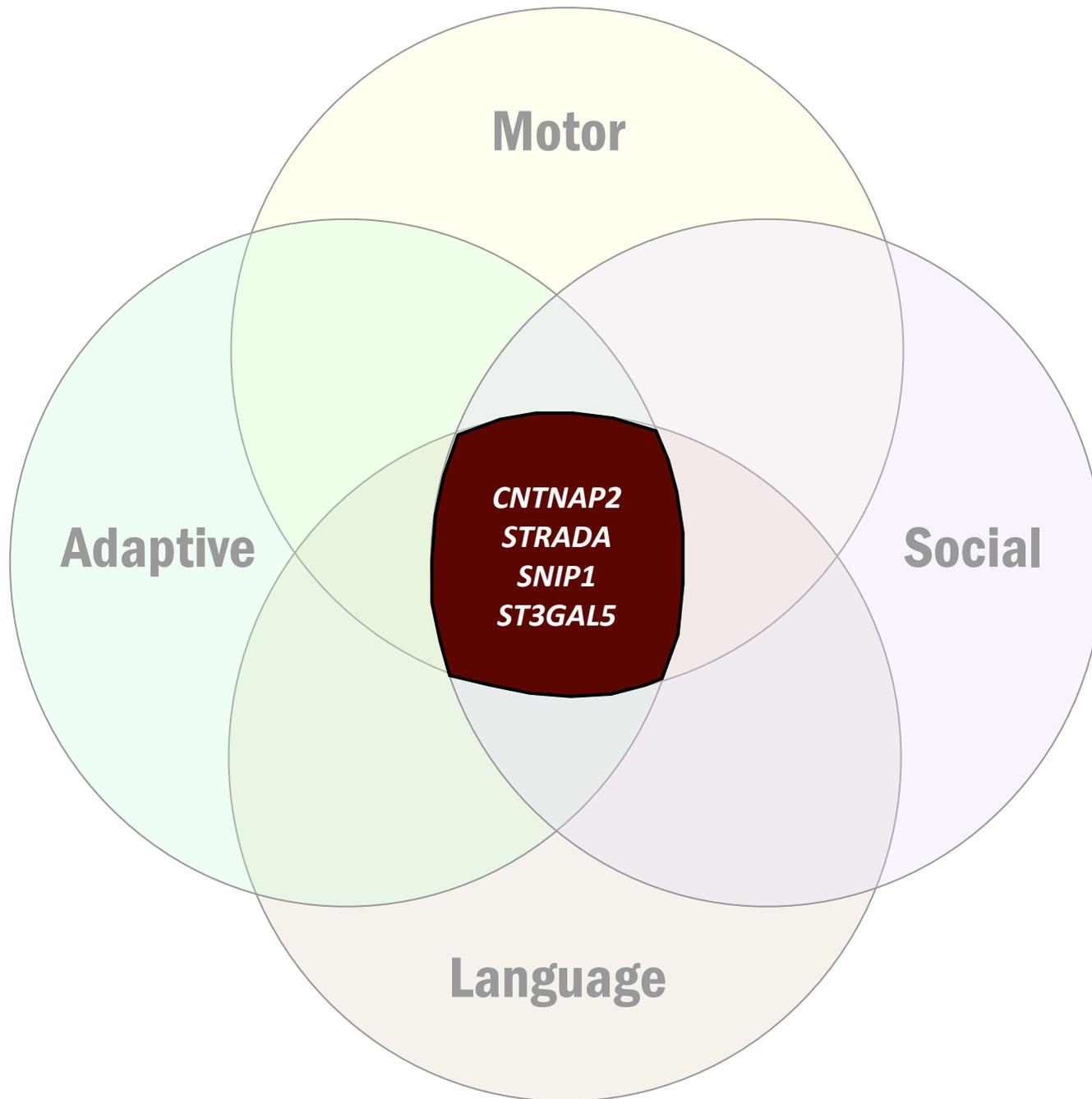
**Motor**

**Adaptive**

**Social**

**Language**

*FMR1*  
*CRADD*  
*ANAPC7*



**Upper Motor Neuron**

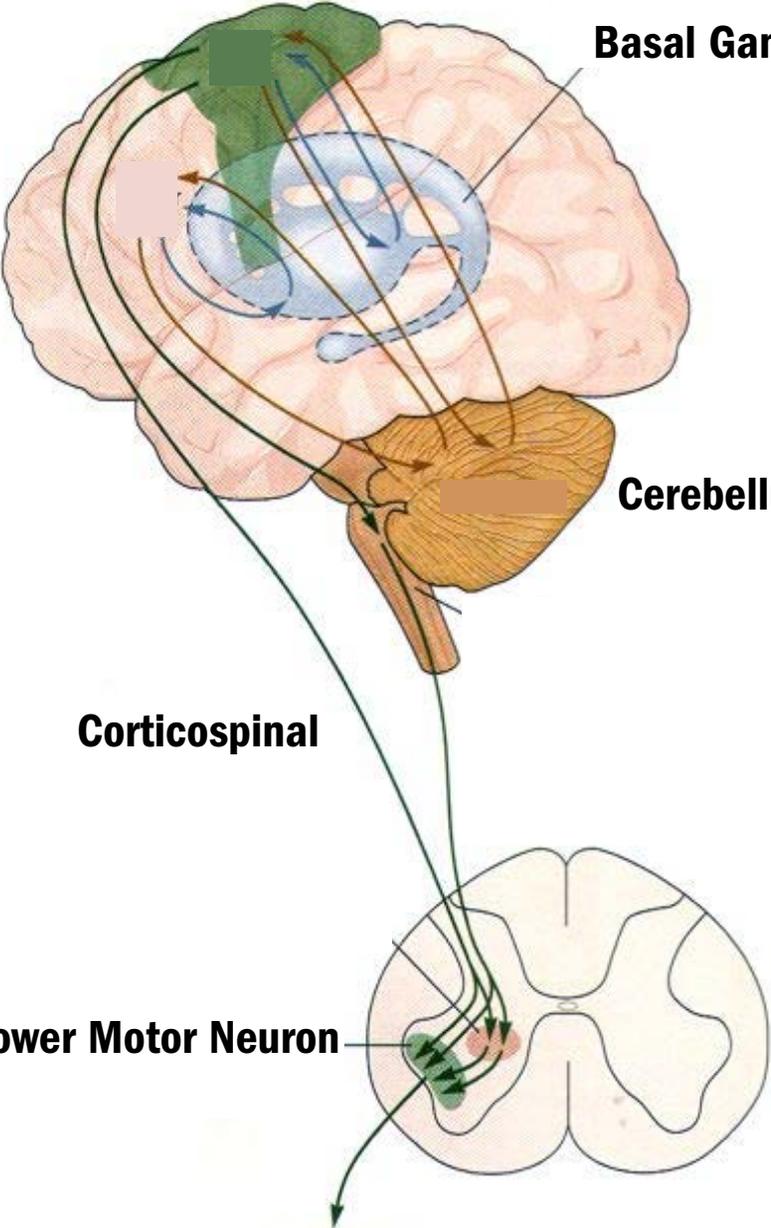
**Basal Ganglia**

**Cerebellum**

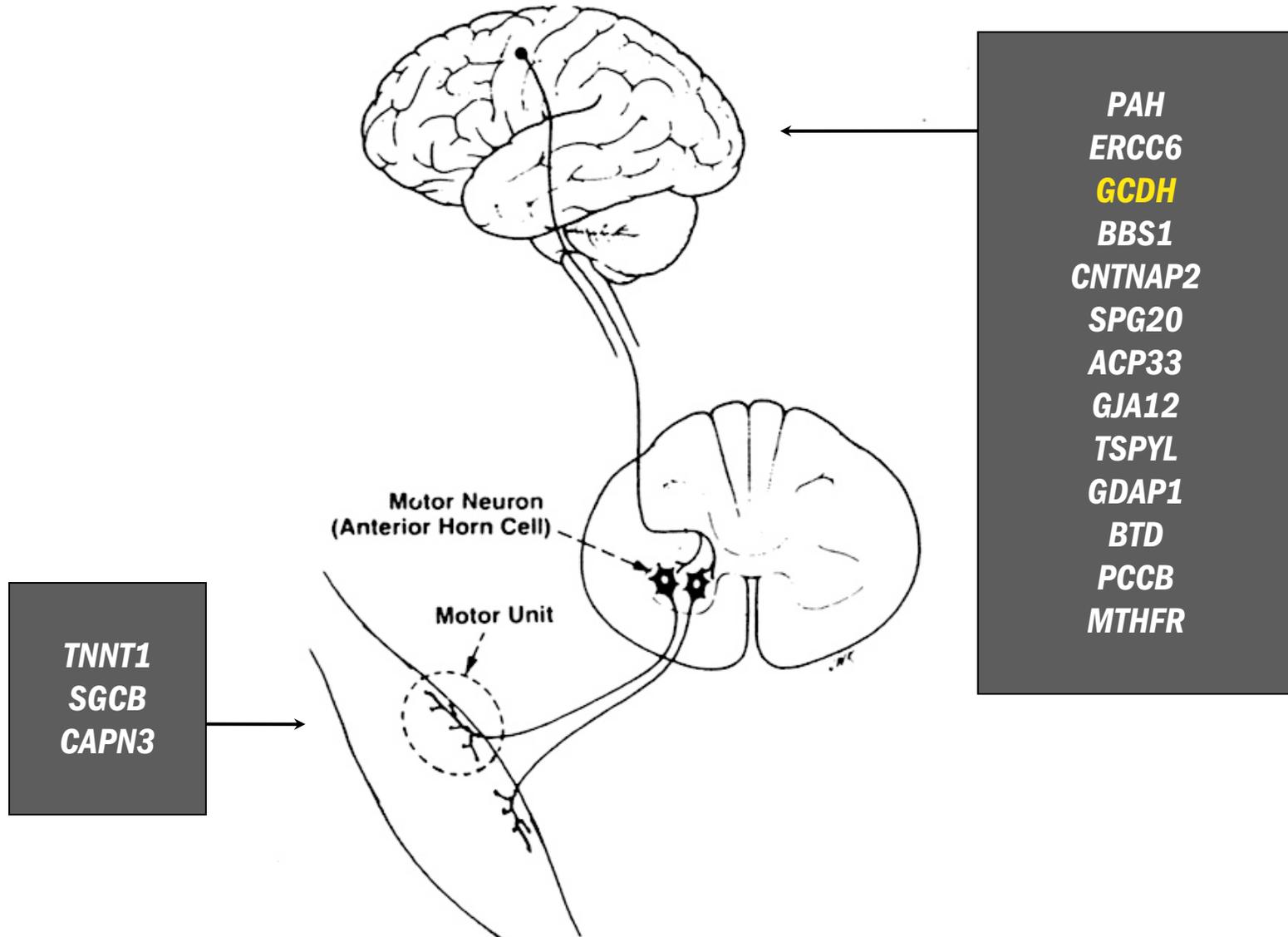
**Corticospinal**

**Lower Motor Neuron**

**Peripheral Nerve**

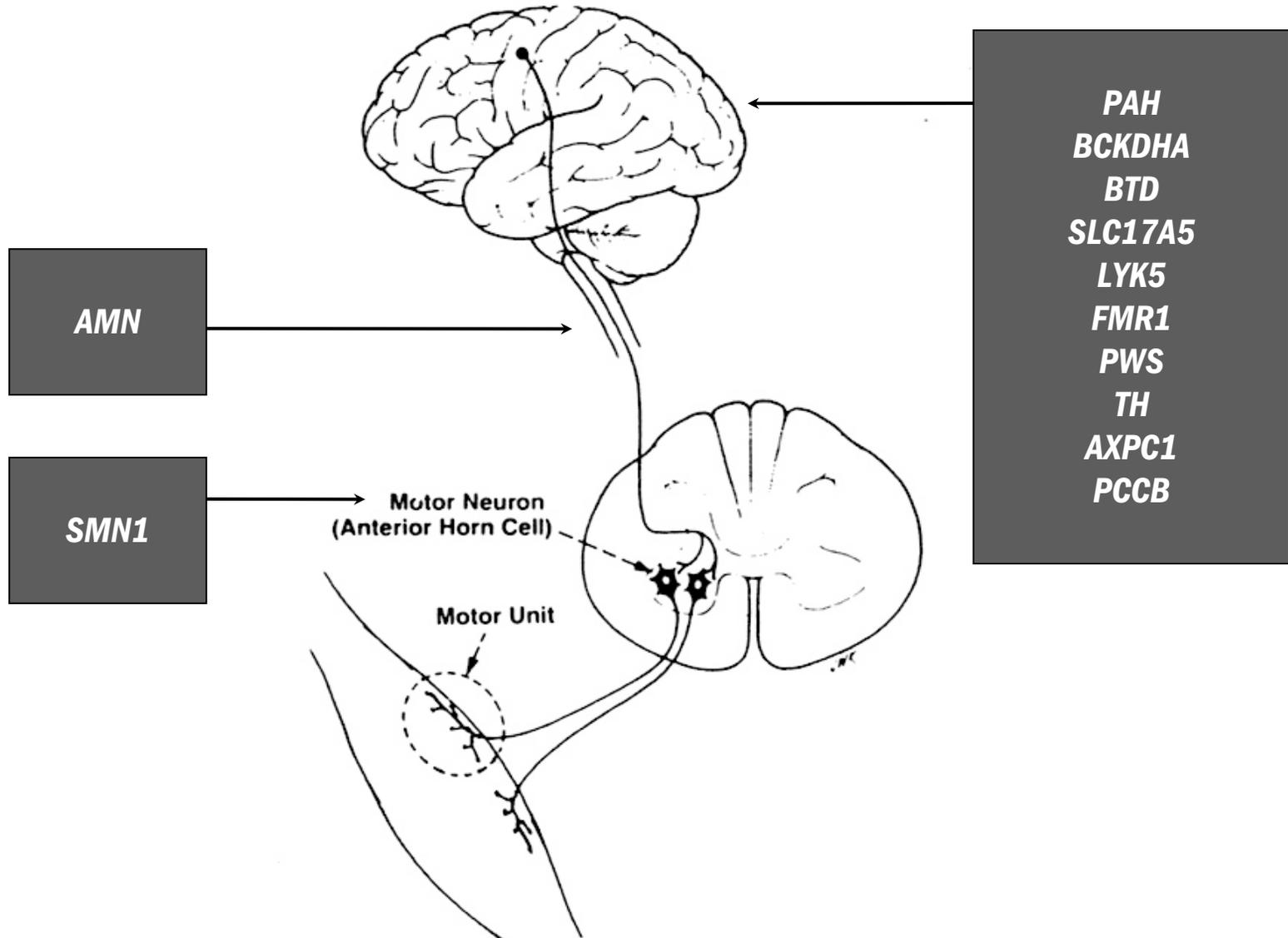


# Amish Child





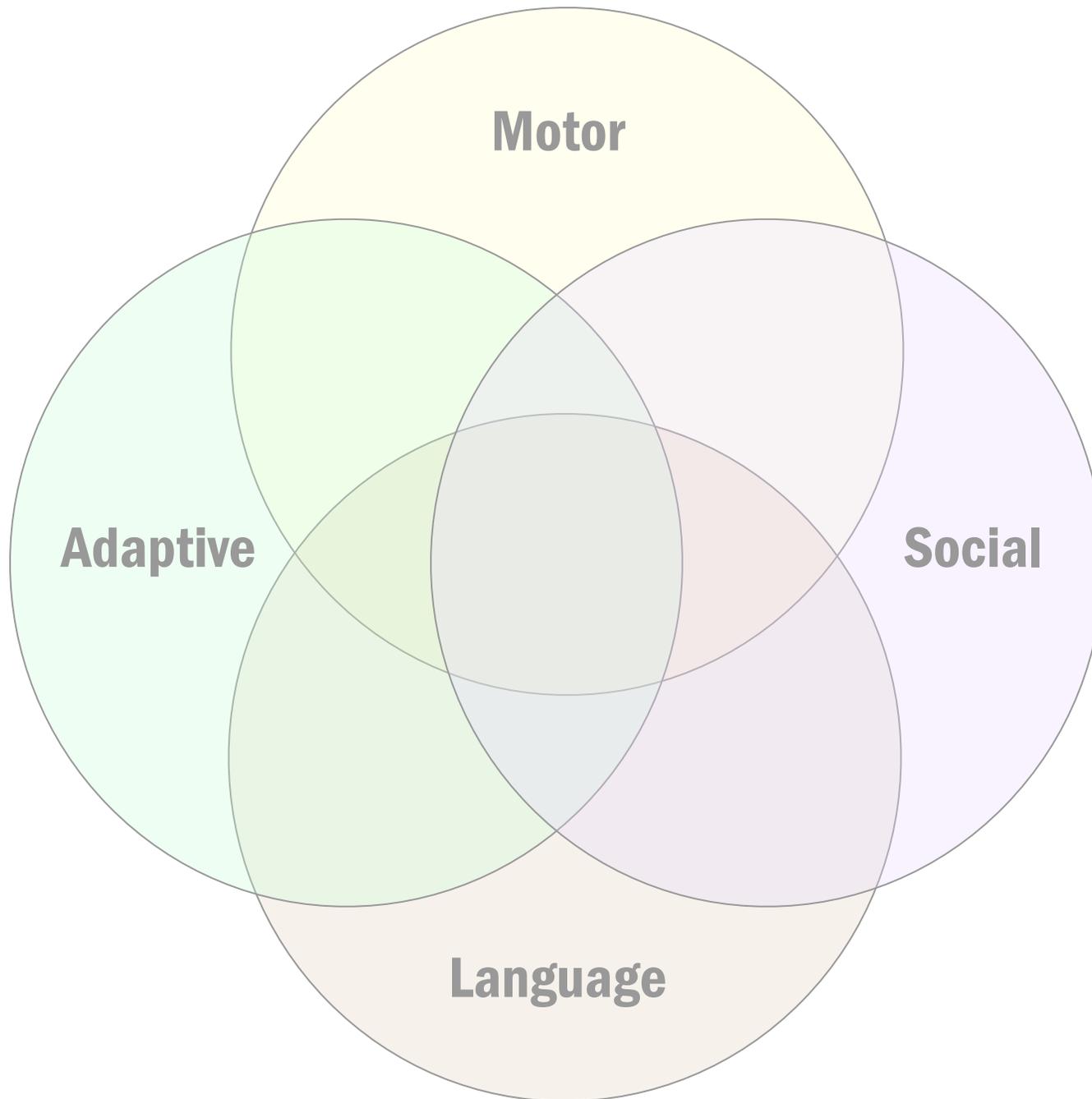
# *Mennonite Child*

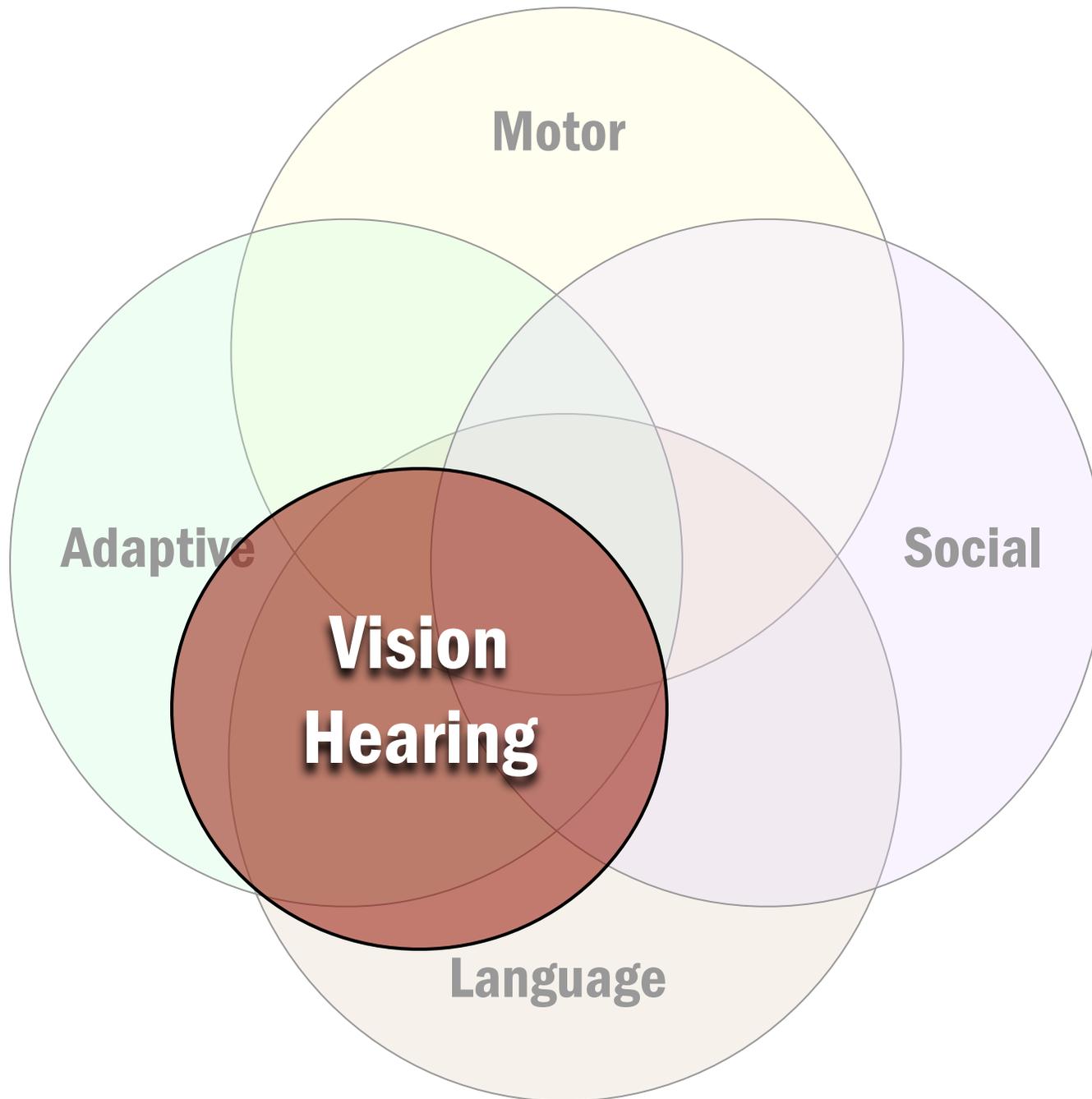


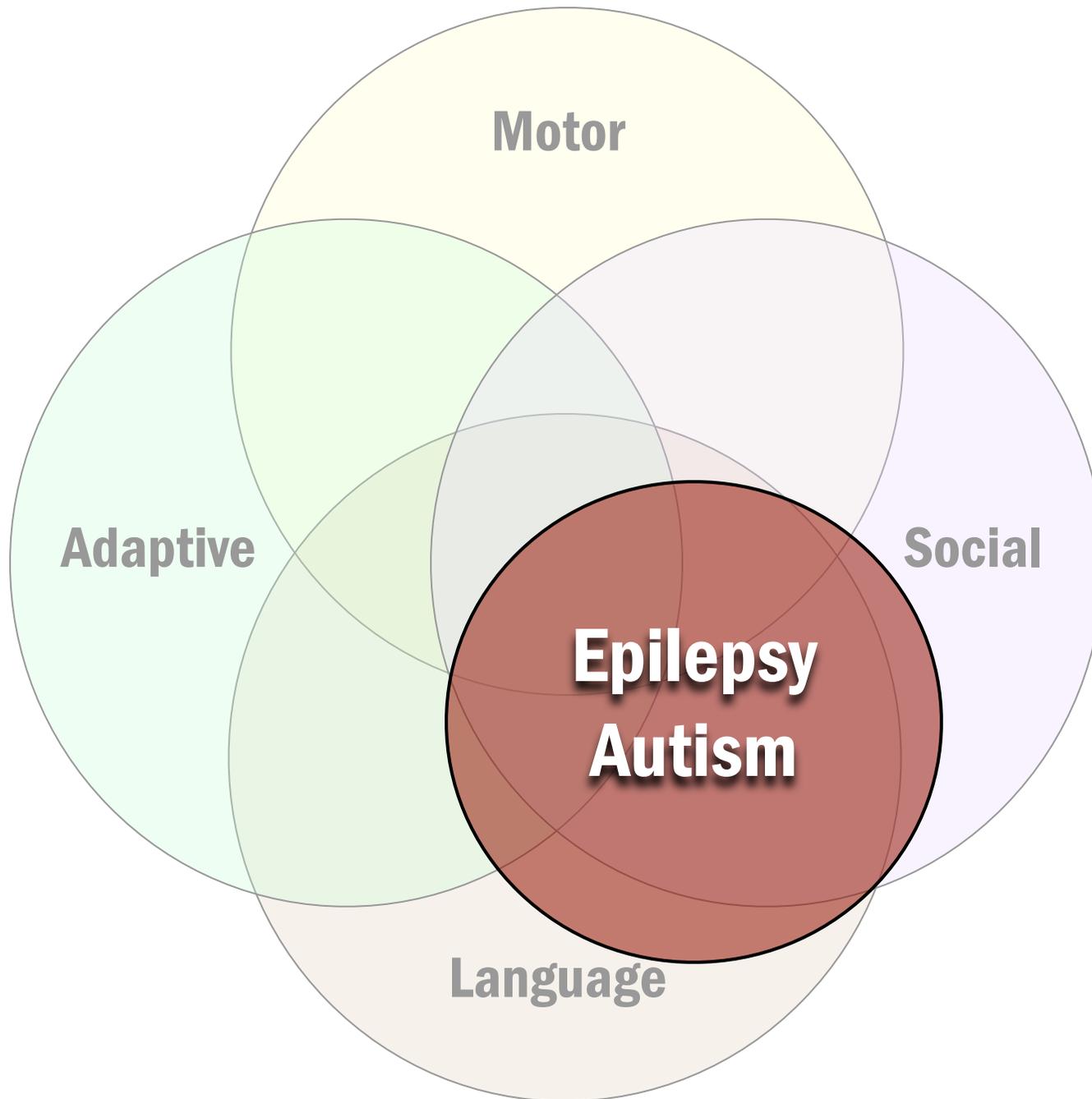


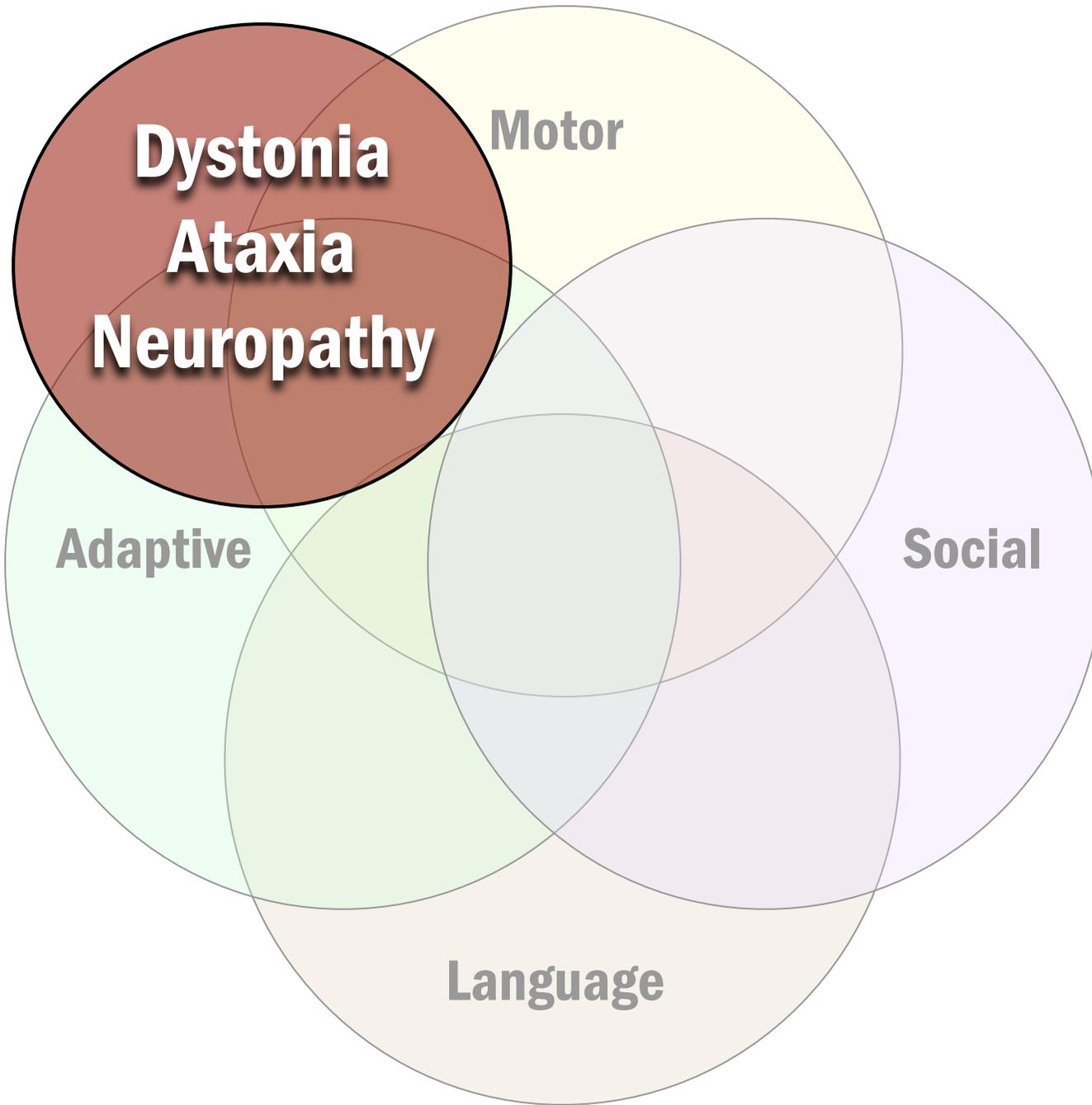
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## **CODAS Syndrome**











Hemimegalencephaly

**Infantile Spasms**



*STRADA* Deficiency

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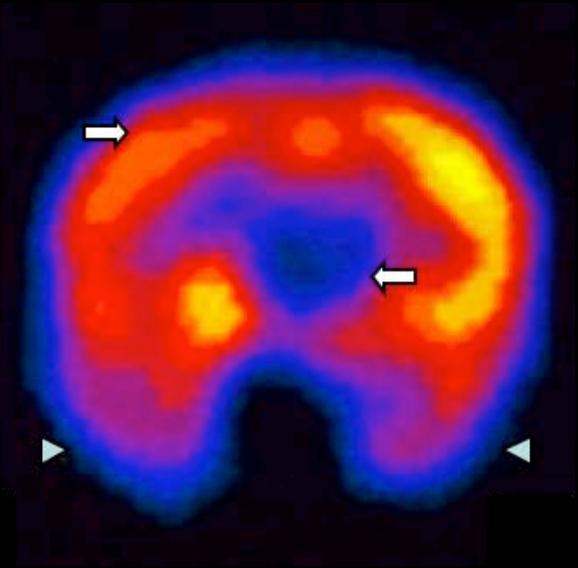
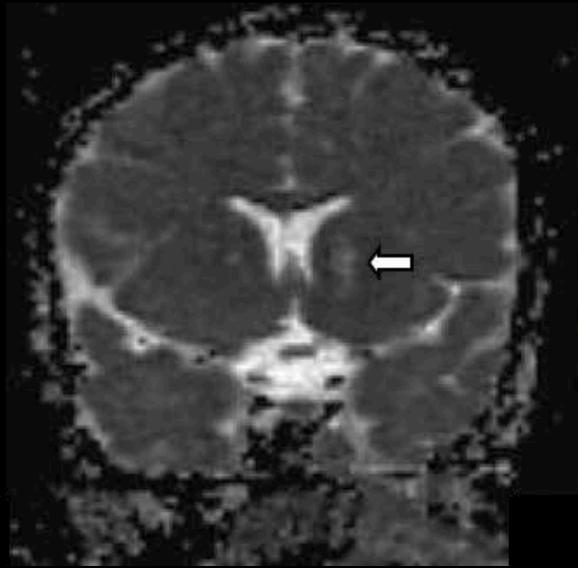
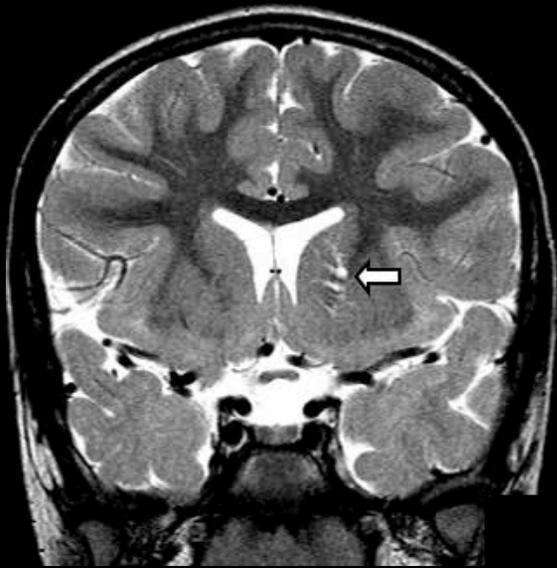
**Complex Partial Symptomatic Epilepsy**





*CNTNAP2* Deficiency

**Autism Spectrum Disorder**





*MTPAP* Deficiency

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**Complicated Cerebellar Ataxia**



Glutaric Aciduria 1  
**Brain Injury**



Glutaric Aciduria 1

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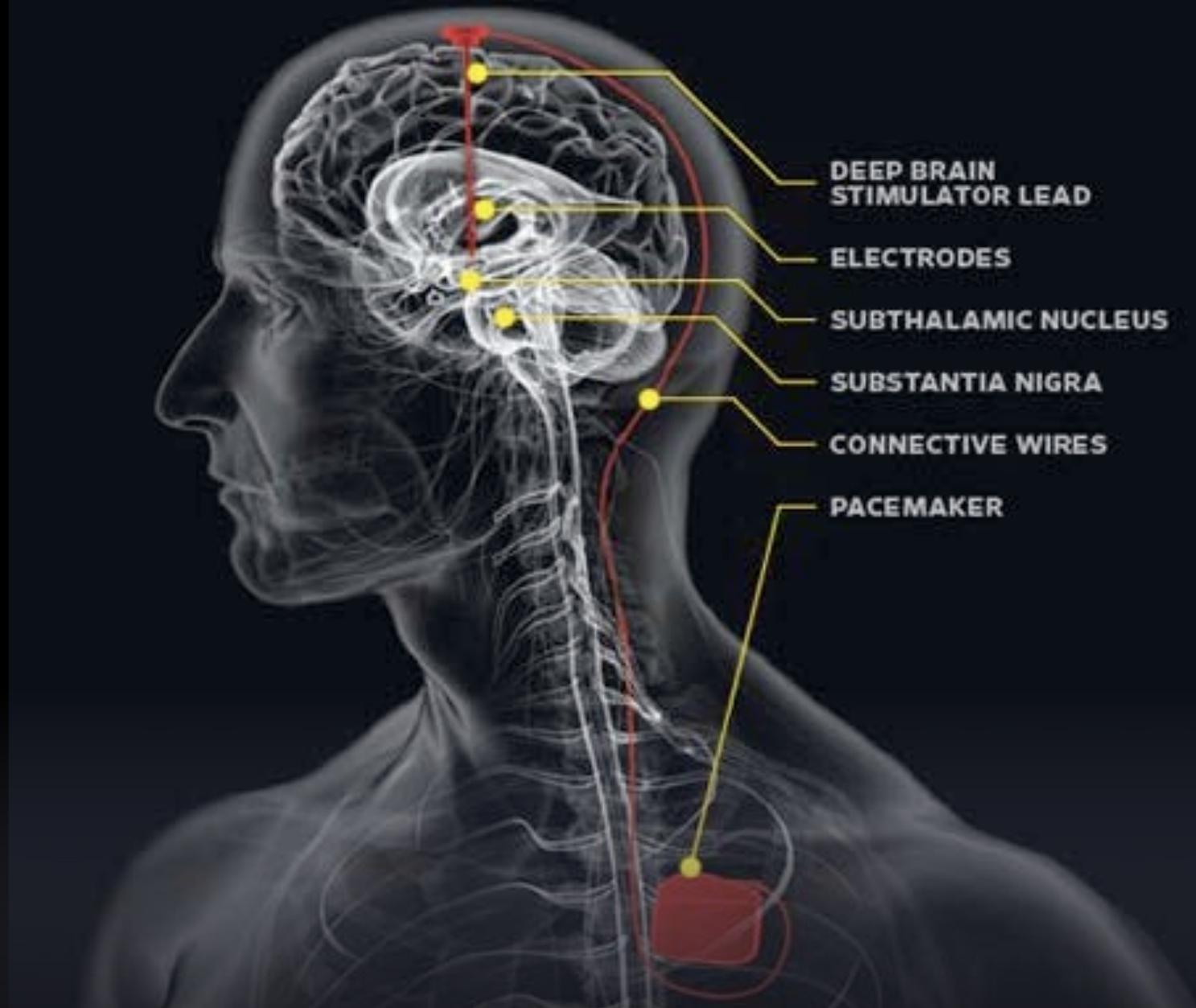
**Healthy**



*THAP1* (DYT6)

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**“Idiopathic” Torsion Dystonia**



## Deep Brain Stimulation for Torsion Dystonia

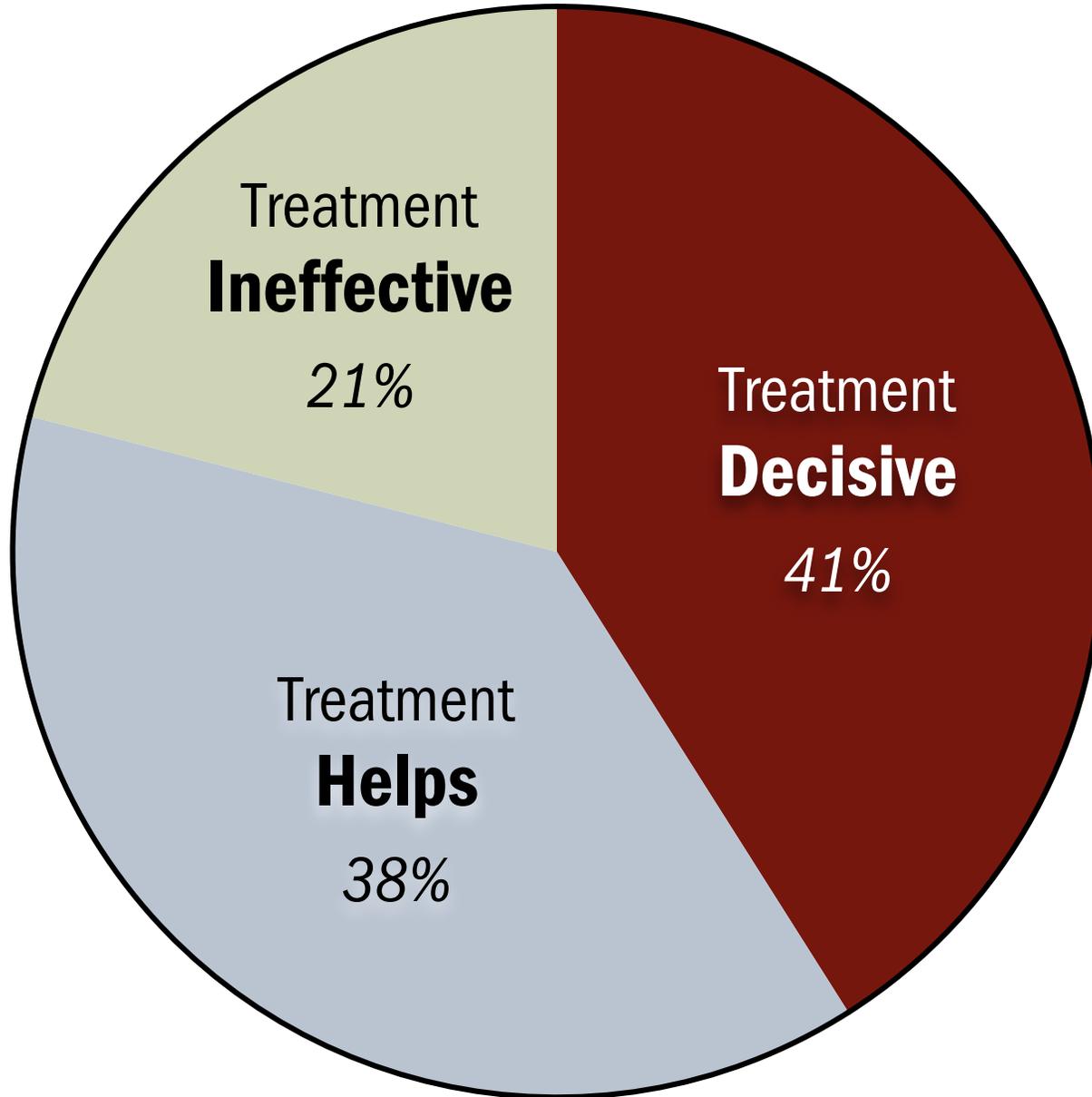
A young man in a patterned sweater is shown in a hallway, exhibiting torsion dystonia. He is standing with his head tilted and his arms slightly out, appearing to be in a state of discomfort or pain. A woman in a black top is partially visible on the left, and another person is standing behind him. The hallway has a green carpet and white walls with doors.

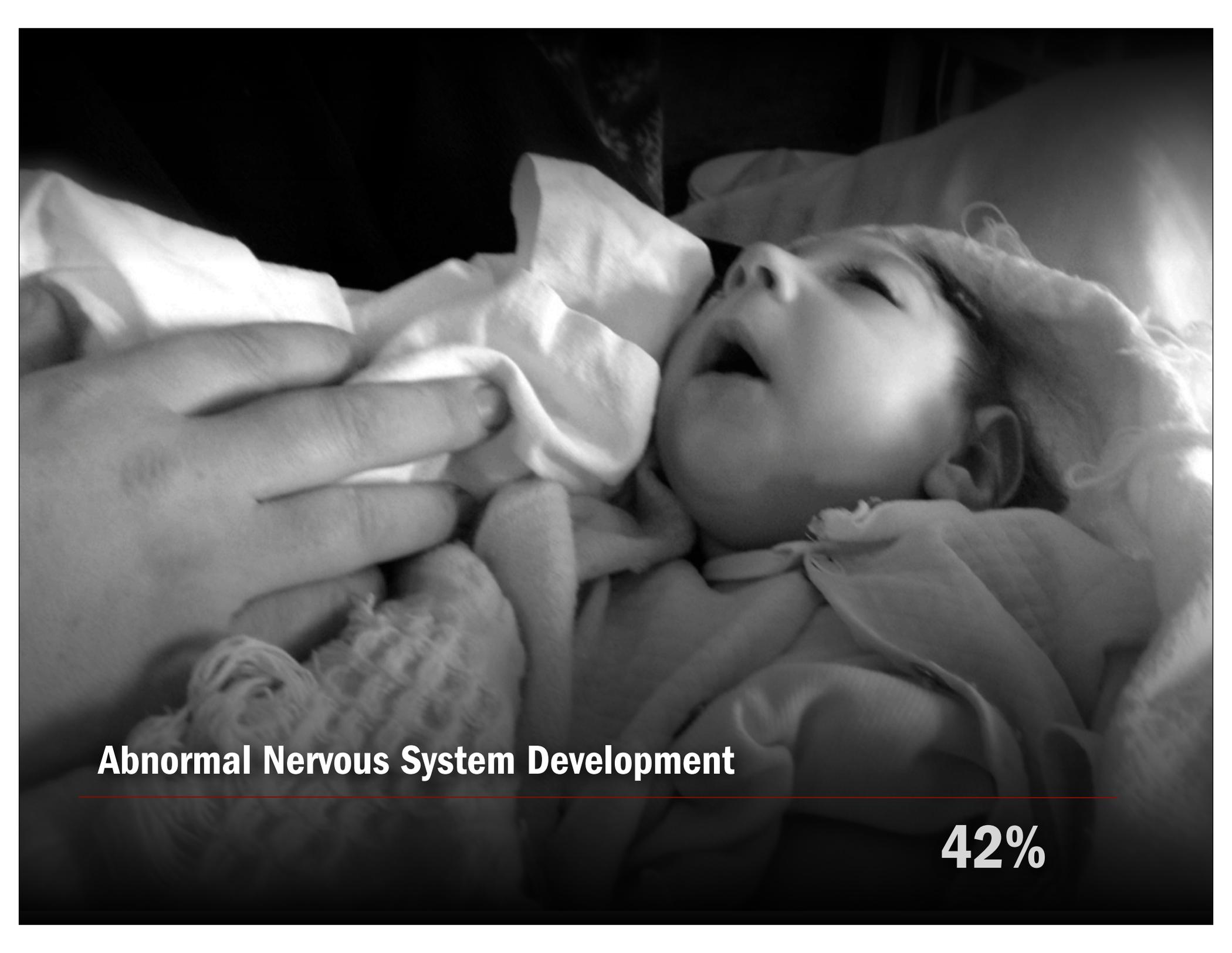
*TOR1A (DYT1)*

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**“Idiopathic” Torsion Dystonia**







**Abnormal Nervous System Development**

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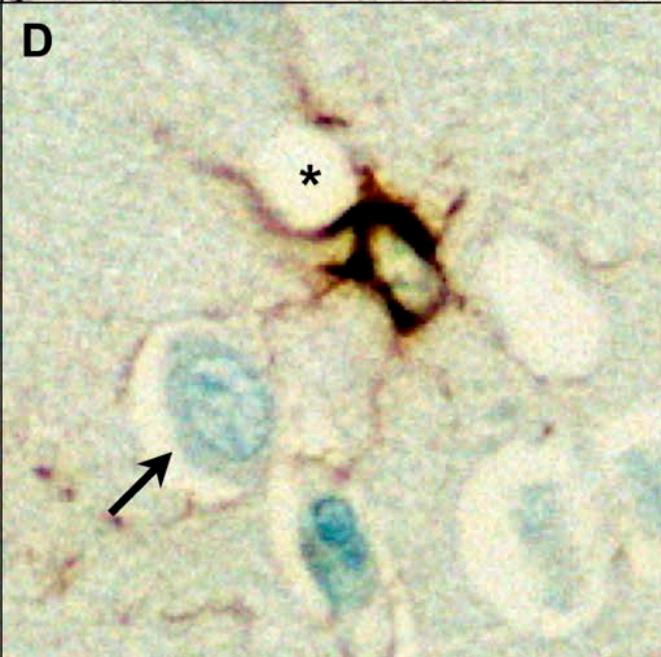
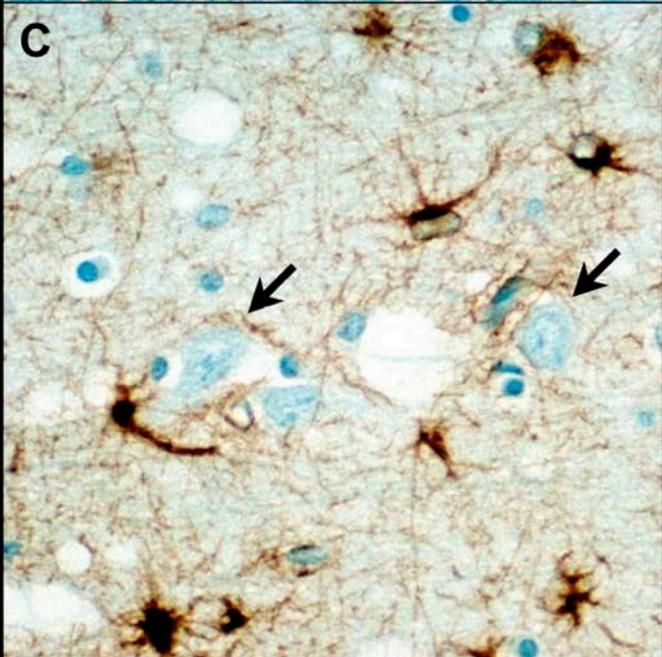
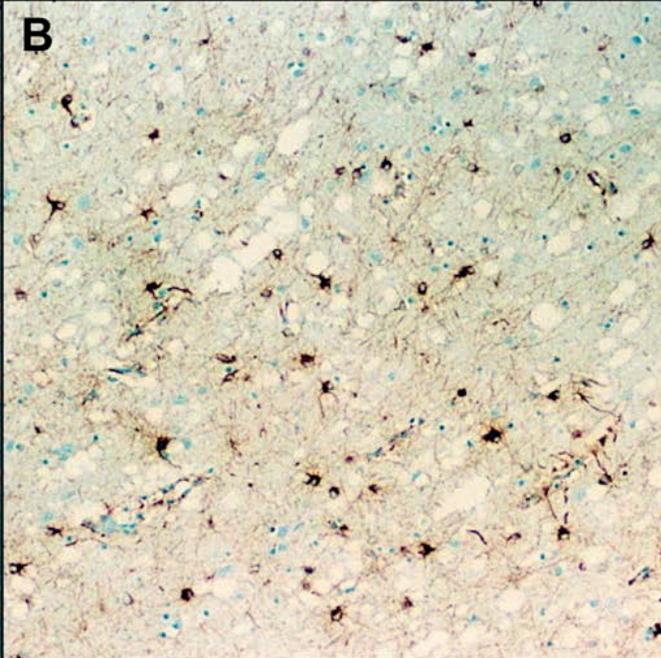
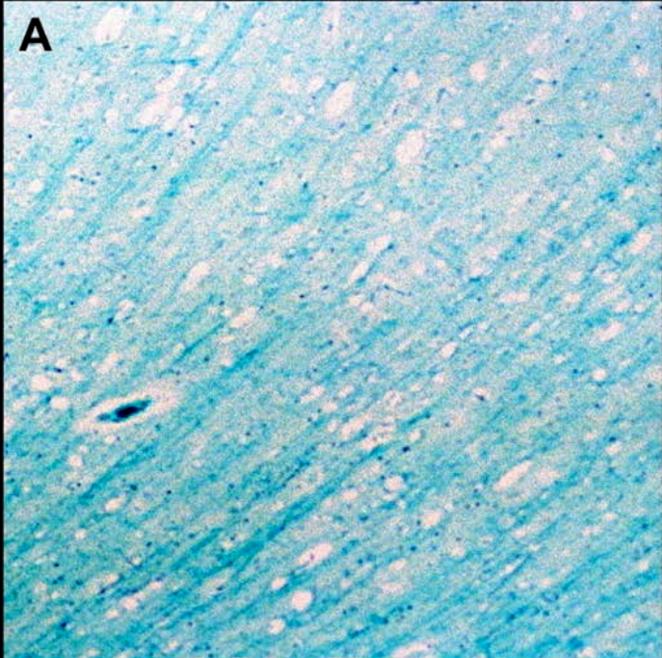
**42%**



# Translational Science

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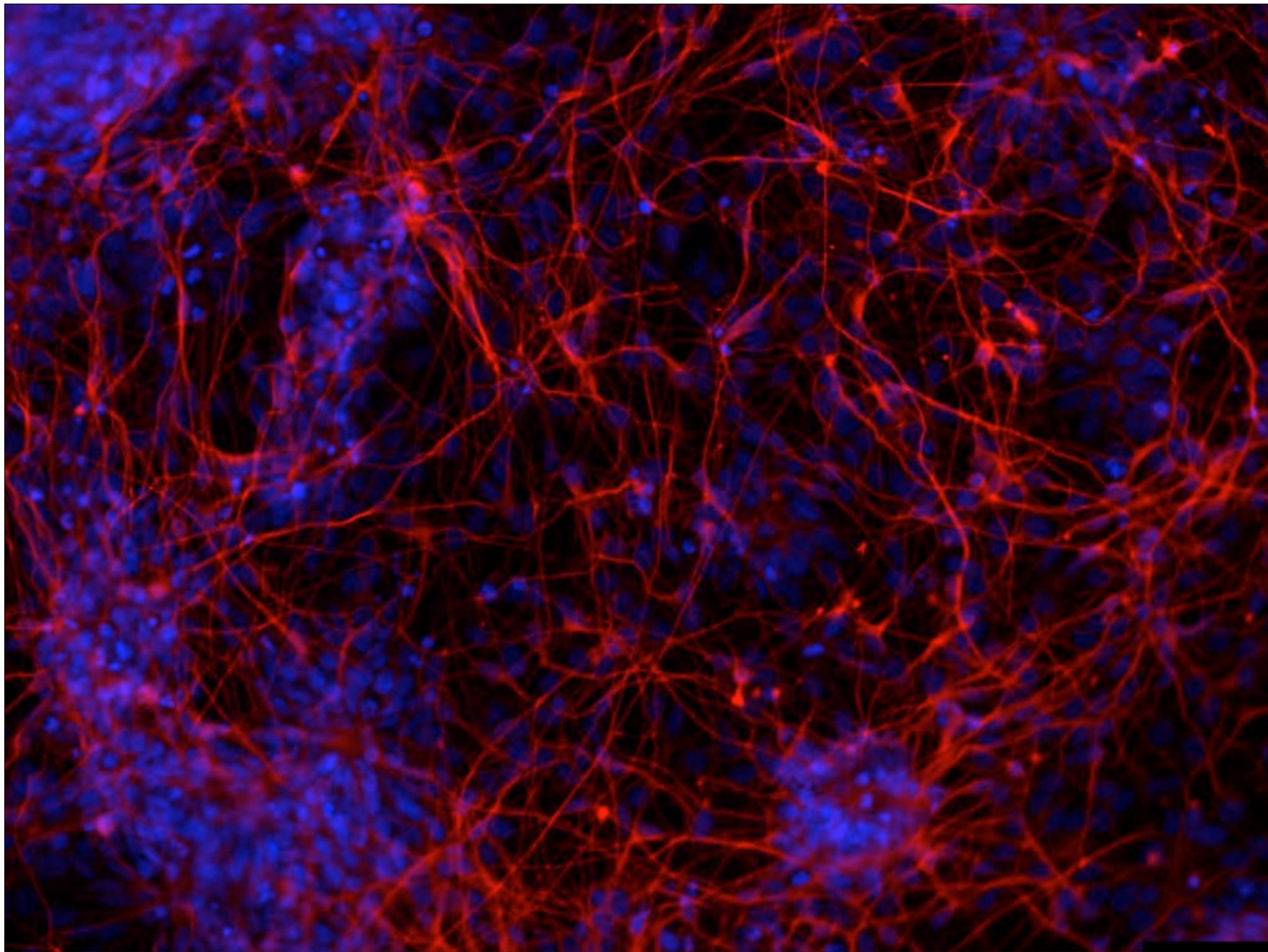
*STRADA* 7kb Deletion





**Collaboration**

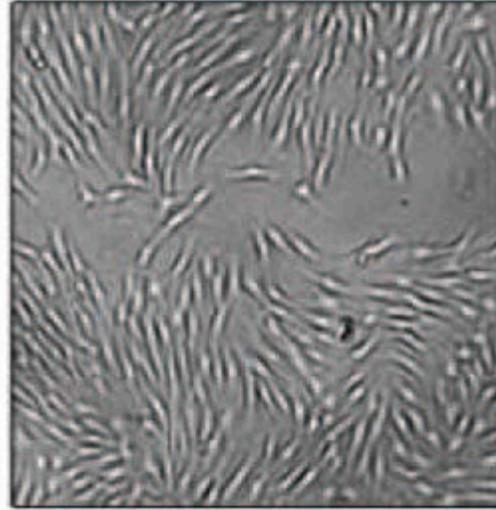
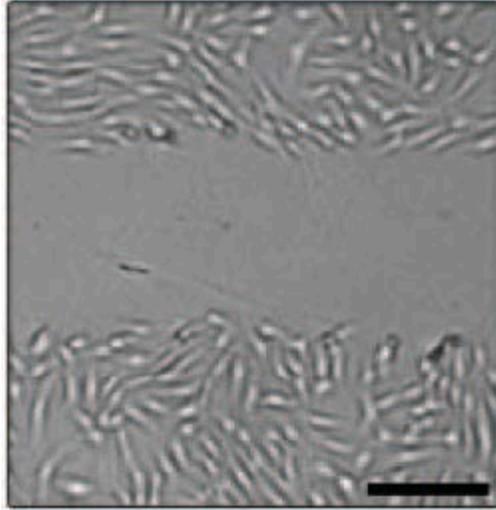
To Improve Patient Care



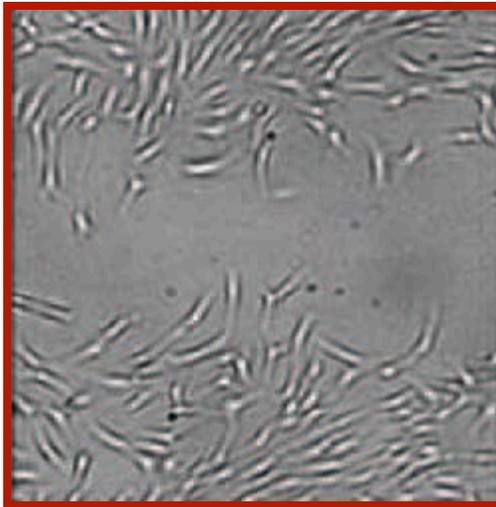
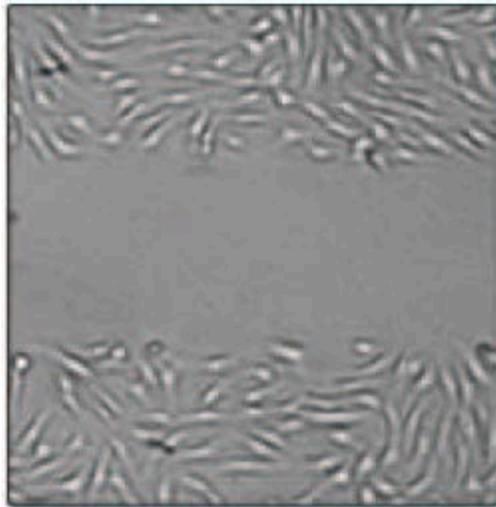
0 hrs

15 hrs

**Control**



**STRADA**

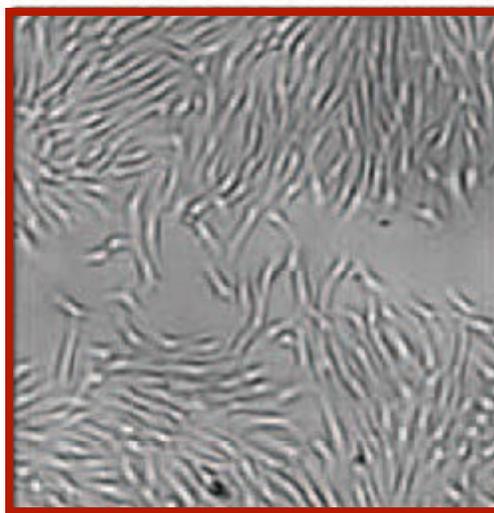
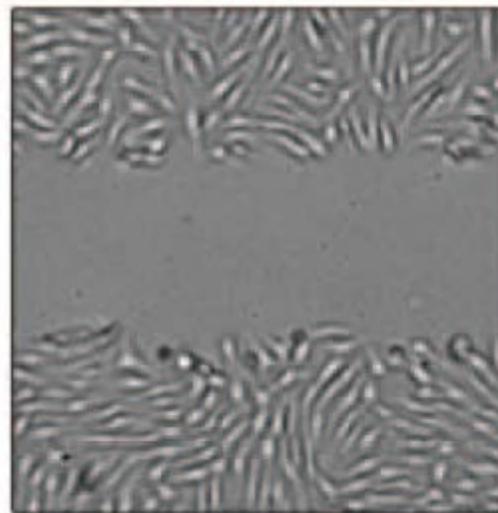
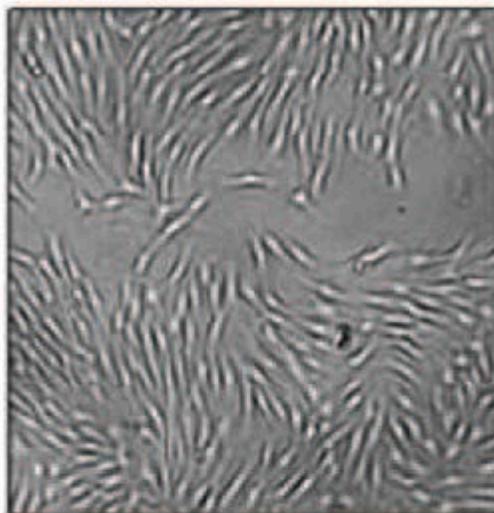
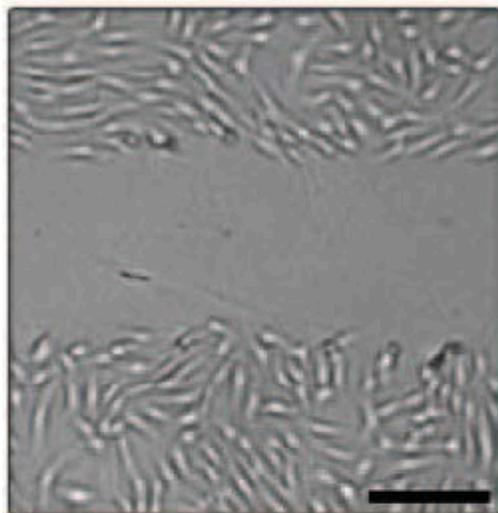


**Control**

**Sirolimus**

0 hrs

15 hrs





# New Treatment Paradigms

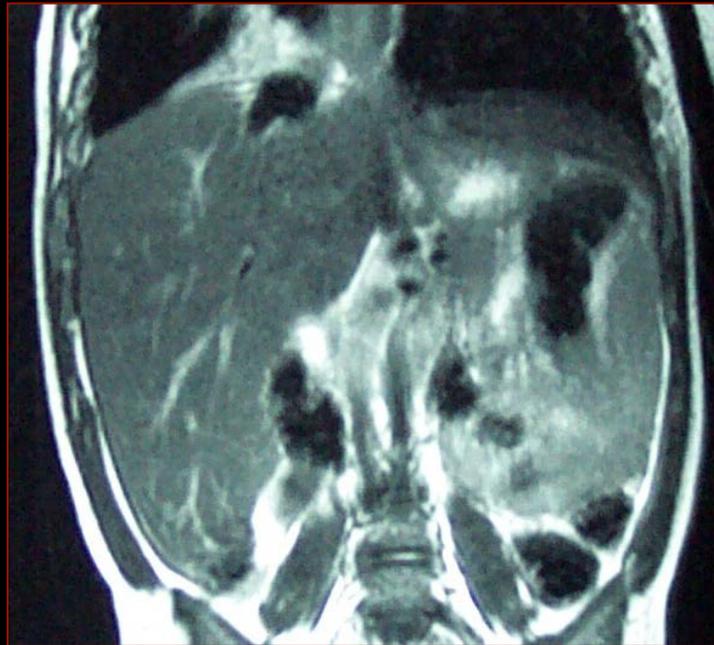
## Sirolimus Clinical Trial, N=6

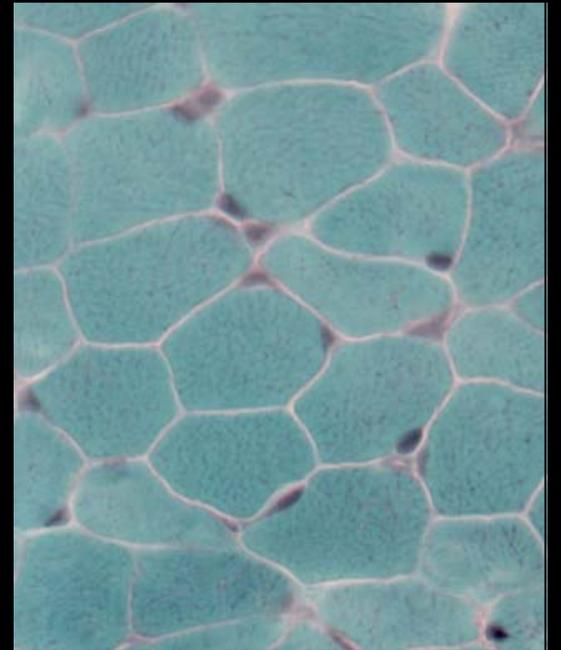
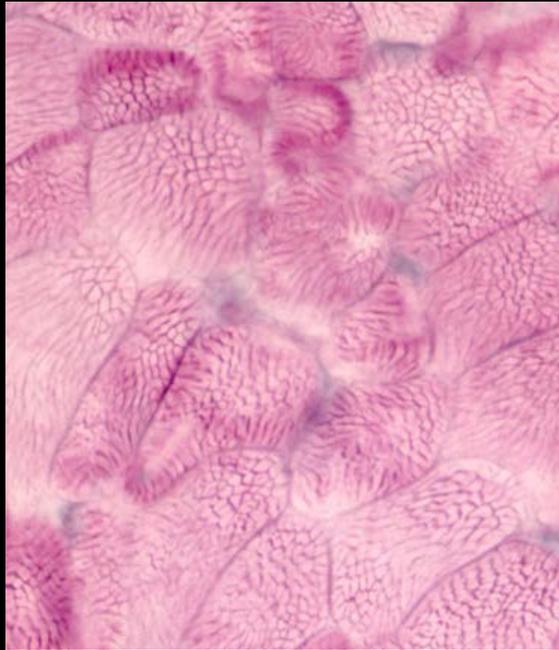
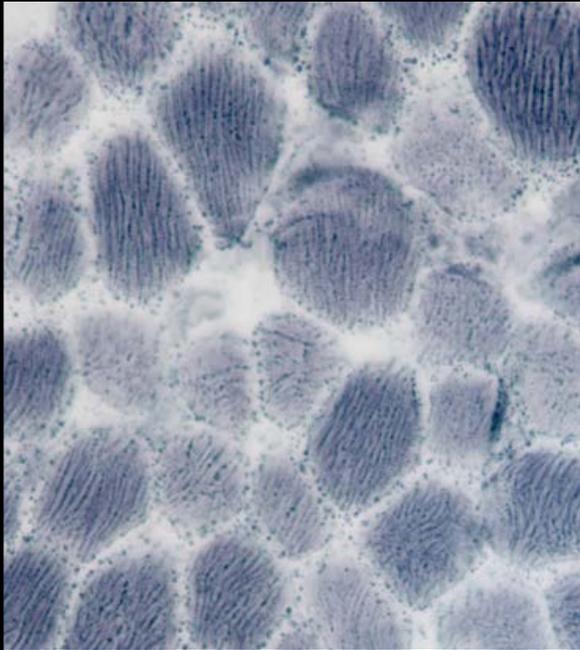
Patient	1	2	3	4	5	Average (SD)
Age	8 months	1 year 7 months	3 years 6 months	4 years 6 months	4 years 8 months	3 years 0 months (1 year 8 months)
BMI (kg/m <sup>2</sup> )	15.0	16.2	14.4	13.3	15.0	14.8 (1.1)
Sirolimus start (month)	3	8	6	3	4	4.8 (2.2)
Current dose (mg/m <sup>2</sup> )	1.0	1.8	1.1	3.9	4.9	2.5 (1.8)
Average sirolimus trough (ng/ml)	18.5	1.3	12.9	4.6	3.6	8.2 (7.2)
AEDs	OXC	OXC PB	LEV TOP	CBZ	OXC TOP	
GTC/SE	0	0	22	1	2	6 (11)
Worst no. of seizures/year	0	4	180	1	4	38 (80)
No. of seizures in the last 12 months	0	0	0	0	1	0.2 (0.4)
Gross motor	0.76	0.44	0.24	0.14	0.22	0.37 (0.22)
Adaptive	0.69	0.56	0.24	0.27	0.22	0.40 (0.21)
Expressive language	0.63	0.44	0.14	0.12	0.14	0.29 (0.23)
Receptive language	0.63	0.44	0.41	0.49	0.40	0.47 (0.10)
Social	0.69	0.60	0.33	0.33	0.27	0.44 (0.19)

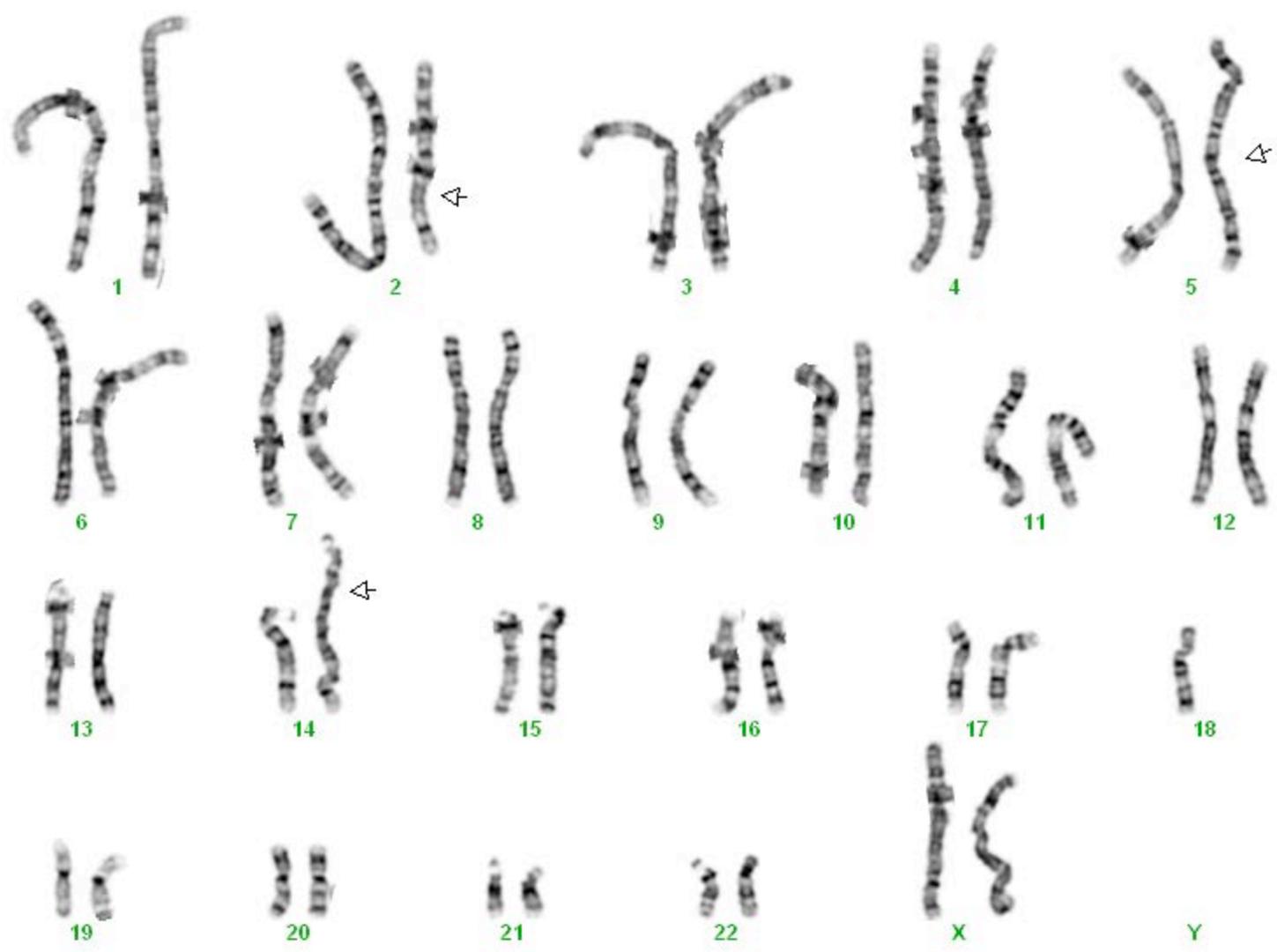


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**New Diagnostic Paradigms**







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### Average Inpatient Workup Cost

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Hyptonia/Neuromuscular Disease

**\$35,000**

Syndromic Developmental Delay

**\$27,000**

Symptomatic Epilepsy

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**\$21,500**

**“We haven’t the money, so we’ve got to think.”**

*Lord Ernest Rutherford*

**Swiss  
Anabaptists**

**Amish**

**Swiss  
Mennonite**

**Migration**

**Bottleneck**

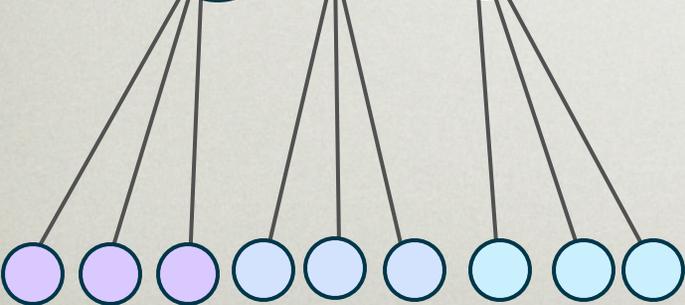
**Bottleneck**

**Amish  
FOUNDERS**

**IN**

**OH**

**PA**

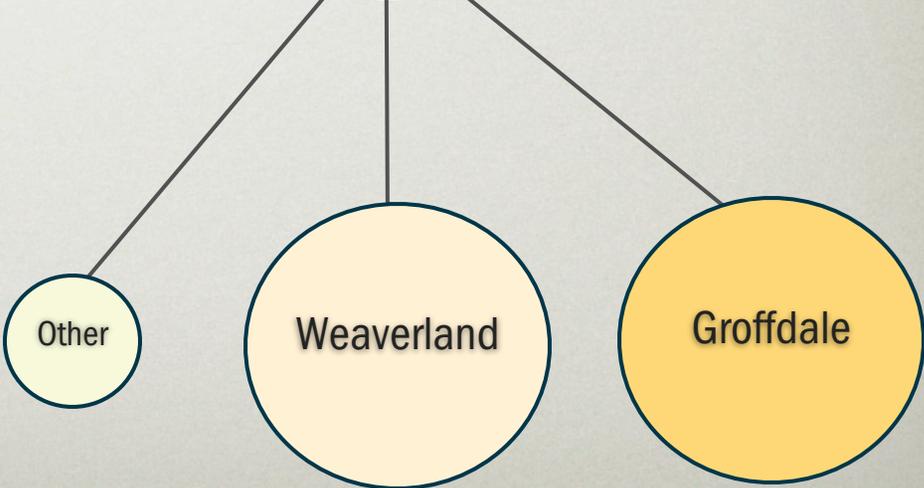


**Mennonite  
FOUNDERS**

**Other**

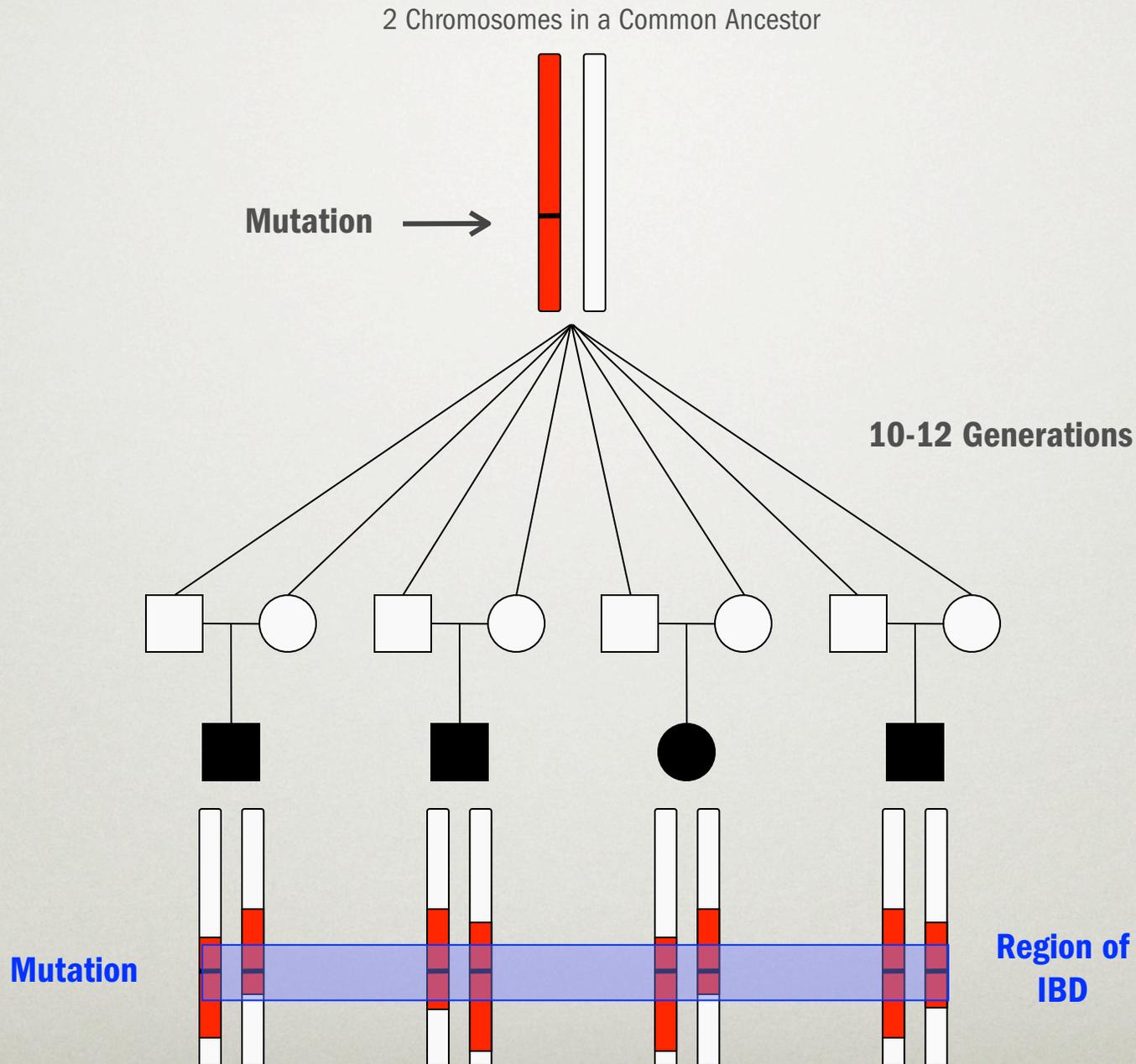
**Weaverland**

**Groffdale**



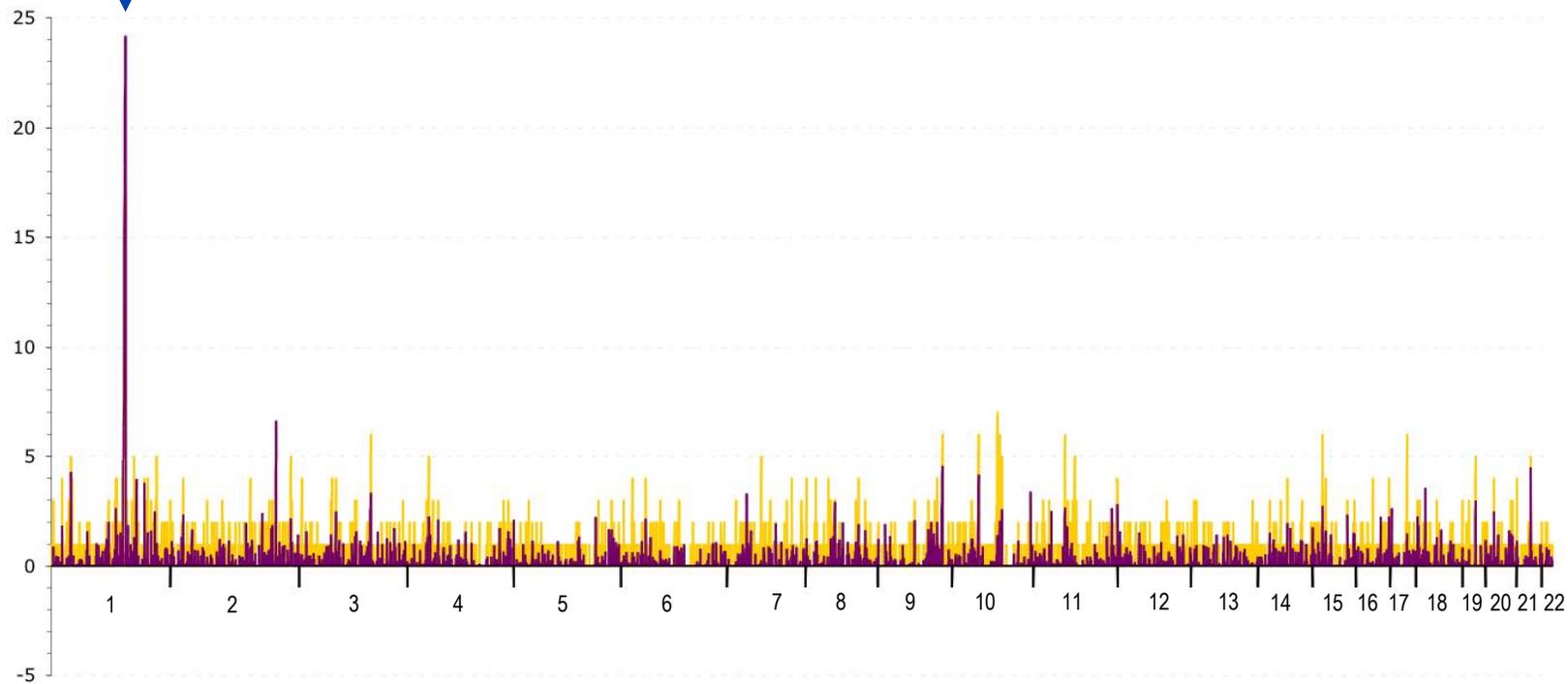


# Identity-by-Descent





**TMC01**



— Homozygous SNP Block Size

— Location Score



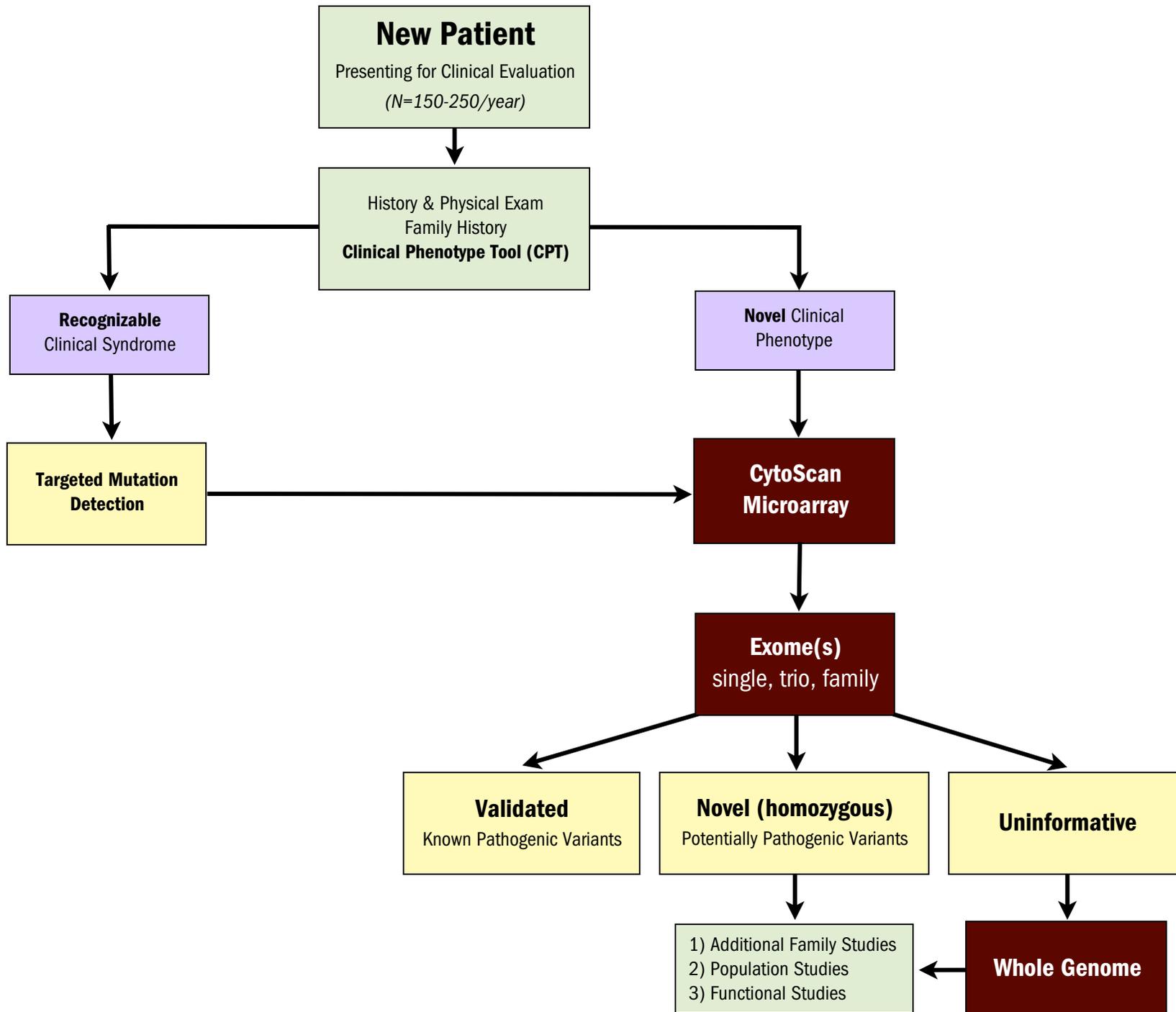


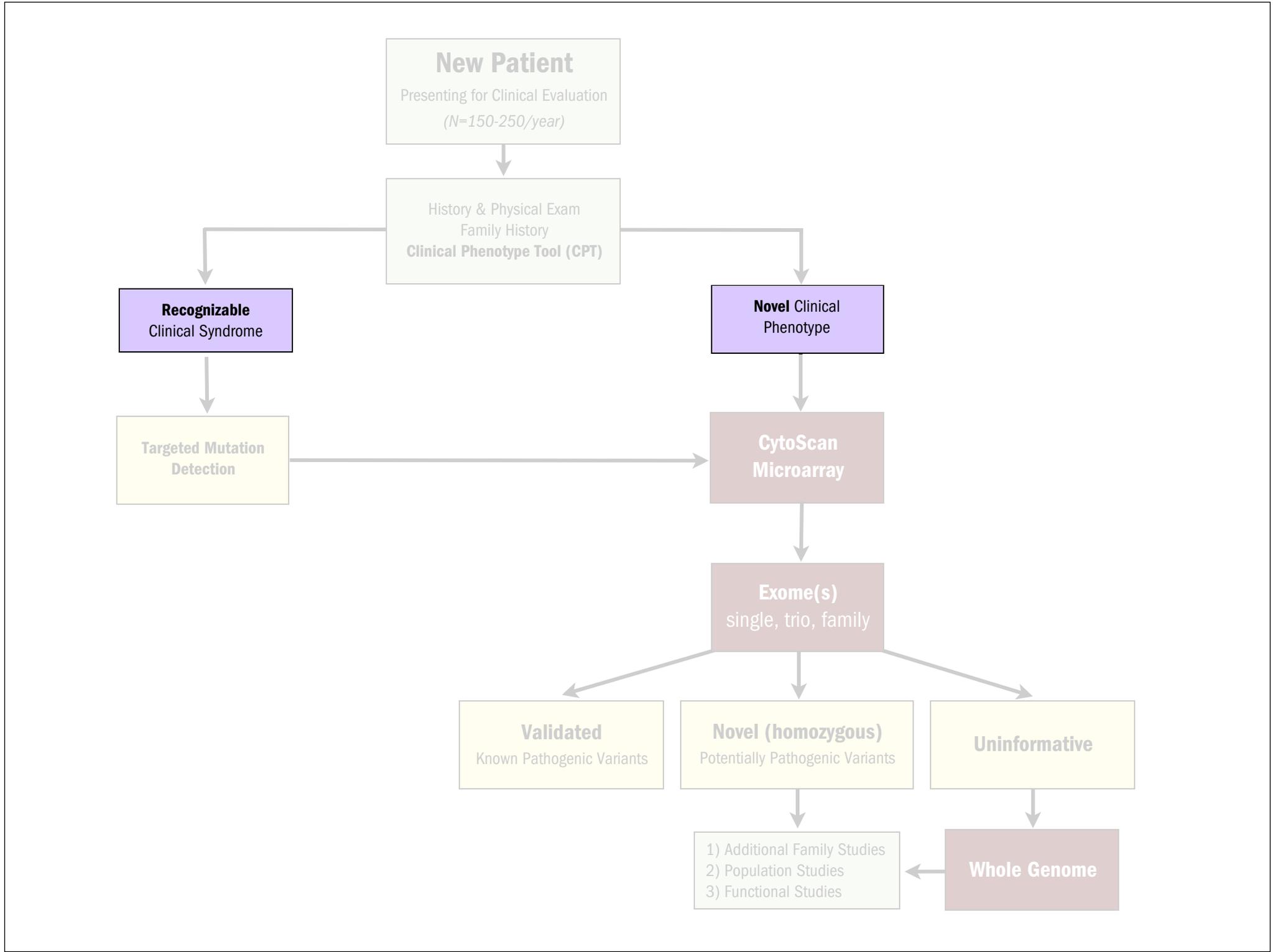
Can the Methods Be  
**Generalized?**



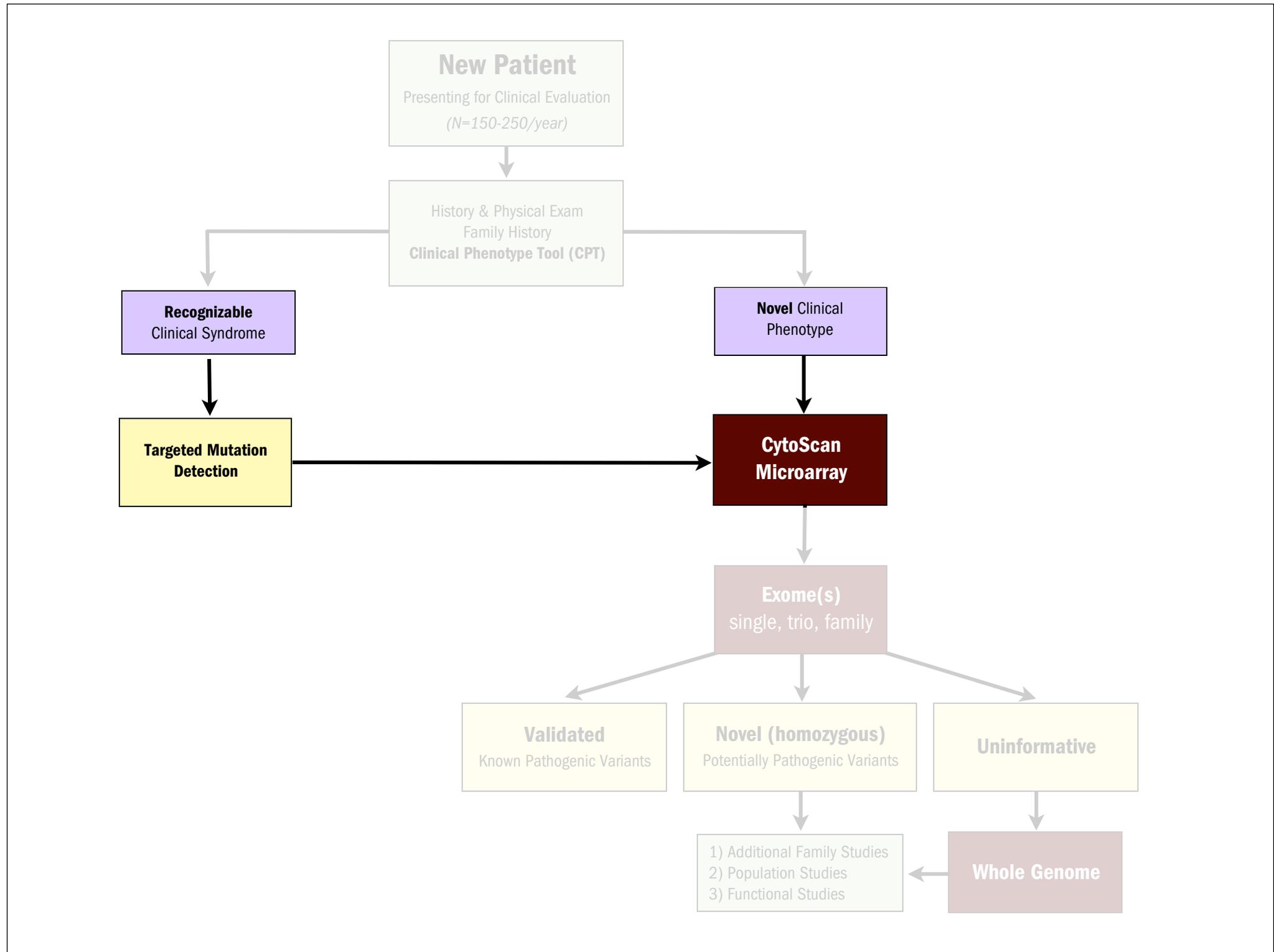
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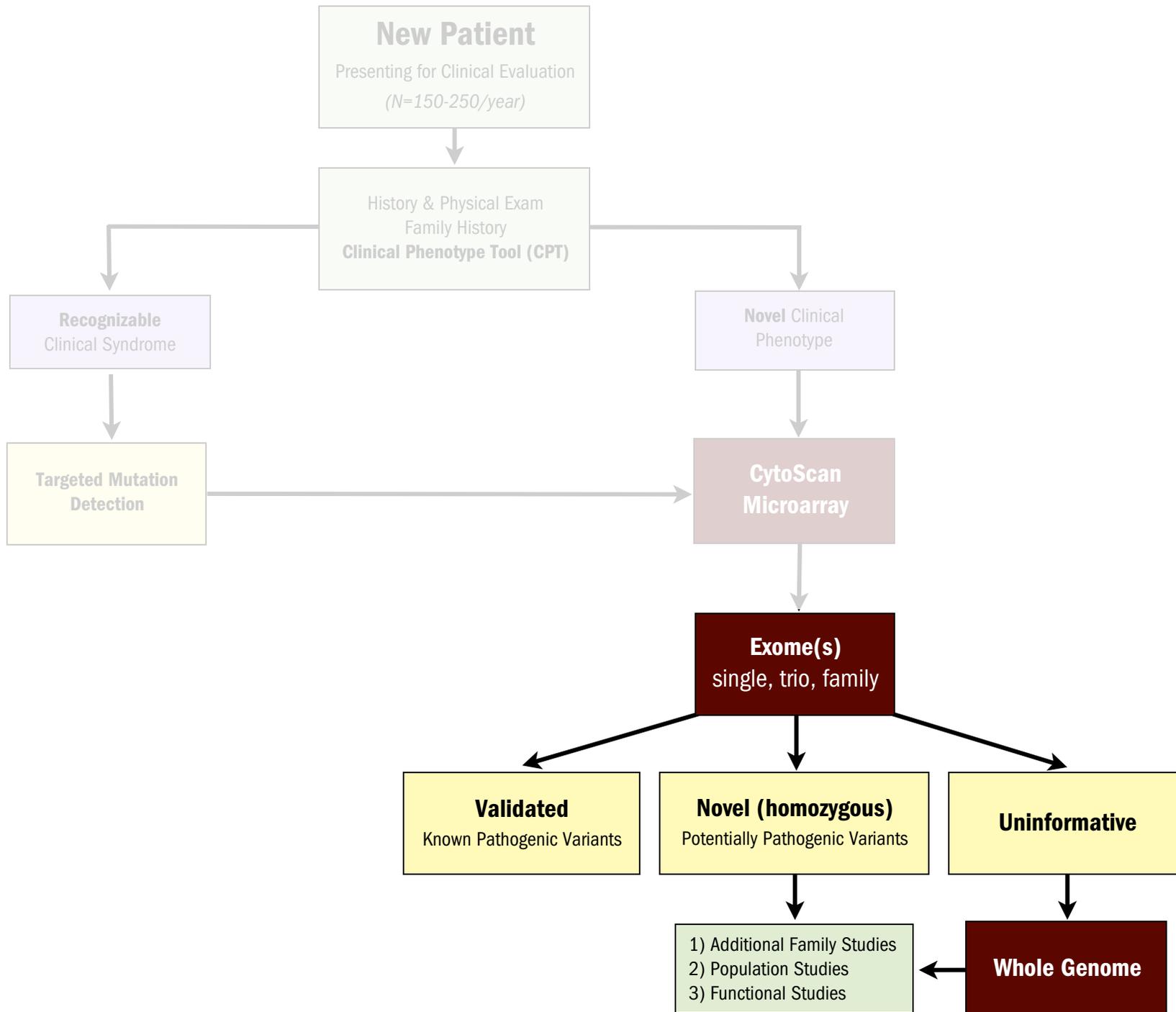
**Developmental Delay and Next-Generation Technology**







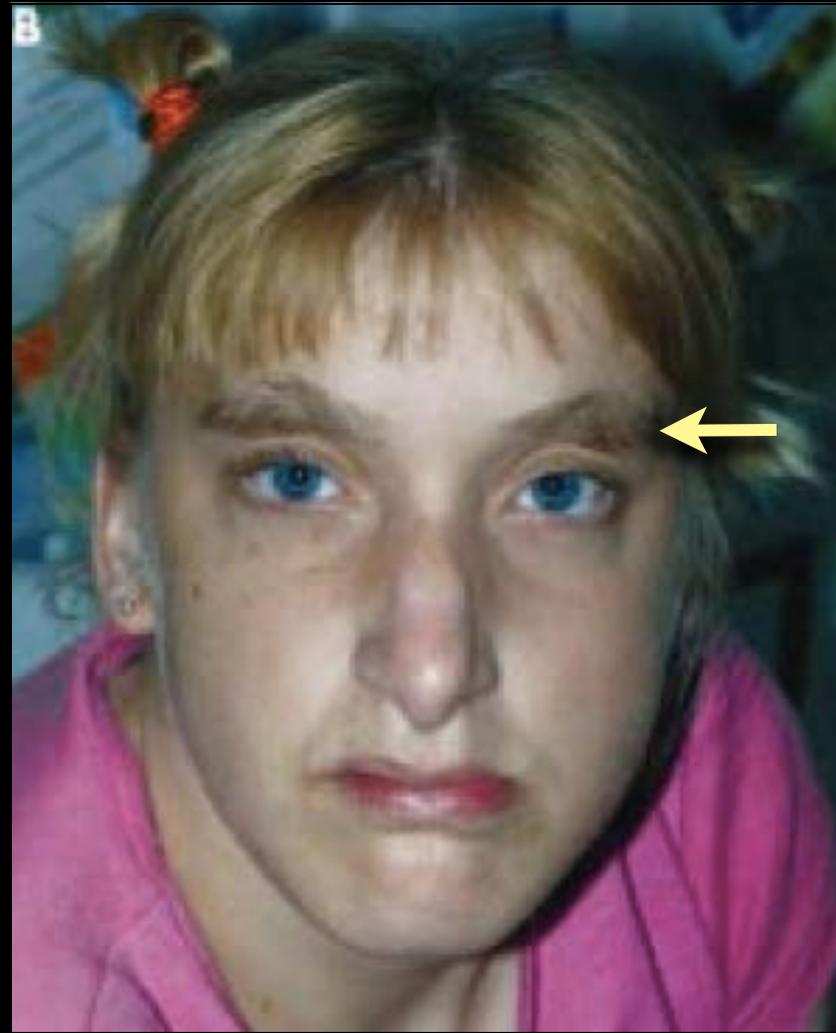






**Mitochondrial Disorder?**

***Or . . . .***



## Mowat-Wilson Syndrome

ZEB2 c.572\_573insCCAA



## Mowat-Wilson Syndrome

ZEB2 c.572\_573insCCAA

# Thank You!

- ★ D. Holmes Morton  
Caroline Morton  
Erik G. Puffenberger  
Donna Robinson  
Christine Hendrickson  
Adam Heaps
- ★ *Our Many Scientific and Clinical Collaborators*
- ★ **The Community we Serve**

