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15q24.1 BP4-BP1 microdeletion unmasking paternally inherited functional polymorphisms combined with distal 15q24.2q24.3 duplication in a patient with epilepsy, psychomotor delay, overweight, ventricular arrhythmia

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Keywords: 15q24.1 BP4-BP1 microdeletion Ventricular arrhythmia Functional polymorphism Distal 15q24.2q24.3 microduplication ABSTRACT

15q24 microdeletion and microduplication syndromes are genetic disorders caused by non-allelic homologous recombination between low-copy repeats (LCRs) in the 15q24 chromosome region. Individuals with 15q24 microdeletion and microduplication syndromes share a common 1.2 Mb critical interval, spanning from LCR15q24B to LCR15q24C. Patients with 15q24 microdeletion syndrome exhibit distinct dysmorphic features, microcephaly, variable developmental delay, multiples congenital anomalies while individuals with reciprocal 15q24 microduplication syndrome show mild developmental delay, facial dysmorphism associated with skeletal and genital abnormalities. We report the first case of a 10 year-old girl presenting mild developmental delay, psychomotor retardation, epilepsy, ventricular arrhythmia, overweight and idiopathic central precocious puberty. 180K array-CGH analysis identified a 1.38 Mb heterozygous interstitial 15q24.1 BP4-BP1 microdeletion including HCN4 combined with a concomitant 2.6 Mb heterozygous distal 15q24.2q24.3 microduplication. FISH analysis showed that both deletion and duplication occurred de novo in the proband. Of note, both copy number imbalances did not involve the 1.2 Mb minimal deletion/duplication critical interval of the 15q24.1q24.2 chromosome region (74.3-75.5 Mb). Sequencing of candidate genes for epilepsy and obesity showed that the proband was hemizygous for paternal A-at risk allele of BBS4 rs7178130 and NPTN rs7171755 predisposing to obesity, epilepsy and intellectual deficits. Our study highlights the complex interaction of functional polymorphisms and/or genetic variants leading to variable clinical manifestations in patients with submicroscopic chromosomal aberrations.

1. Introduction

15q24 microdeletion and microduplication syndromes are rare genetic disorders. The 15q24 chromosome region is flanked by five segmental duplication blocks (SD) from centromere to telomere named LCR15q24A (BP4), LCR15q24B (BP1), LCR15q24C, LCR15q24D (BP2) and LCR15q24E (BP3) which have been implicated in the 15q24 chromosome rearrangements via non allelic homologous recombination. Submicroscopic deletions of 15q24 chromosome region were first described in a series of four patients with variable developmental delay, microcephaly, facial dysmorphism, abnormal growth, digital abnormalities, joint laxity and hypospasdias (Sharp et al., 2007). To date, more than thirty such cases have been reported (Samuelsson et al., 2015). Patients with 15q24 microdeletion share a common 1.2 Mb chromosome region, spanning from LCR15q24B to LCR15q24C, encompassing seven OMIM genes: CYP11A1, SEMA7A, CPLX3, ARID3B, STRA6, SIN3A and CSK. Such recurrent deletions occurred as a de novo event in most cases. Most individuals with 15q24 microdeletion had the typical 3.1 Mb deletion located between LCR15q24A and LCR15q24D while the remaining cases carried the smaller deletion of approximately 2.6 Mb extending from LCR15q24A to LCR15q24C. Moreover, rare atypical individual 15q24 losses with only one or no breakpoints within segmental duplications have also been recorded (Mefford et al., 2012). In addition, several cases with reciprocal 15q24 microduplication involving the minimal deletion critical region have been currently reported and the same 1.2 Mb SRO has been defined. Patients harboring 15q24 microduplication syndrome show some common clinical features including mild developmental delay, facial dysmorphism, skeletal and

genital abnormalities. Recently, novel microduplications distal to the 15q24 minimal deletion critical region have been documented in individuals with neurodevelopmental disorders. Most duplications are inherited from an apparently normal parent (Table 1). To the best of our knowledge, only two families with distal 15q24 microduplication adjacent to minimal critical region presenting developmental delay, dysmorphic features and autistic traits have been reported (El-Hattab et al., 2009; Roetzer et al., 2010) (Supplemental Fig. S1). We report the first case of a 10 year-old girl who presented psychomotor retardation, cardiac arrhythmia, overweight, epilepsy and central precocious puberty, carrying a 1.38 Mb 15q24.1 BP4-BP1 microdeletion with a concomitant 2.6 Mb distal 15q24.2q24.3 microduplication. We compare the clinical and molecular data with a review of previously reported cases and discuss candidate genes in order to enhance the knowledge on genotype-phenotype correlation in the present index-patient.

2. Clinical report

This 10 year-old girl was born at 36 weeks of gestation to healthy non consanguineous parents after an uncomplicated pregnancy. Her birth weight was 2900 g (50-90th centile for age and gender), length 45 cm (10-50th centile) and OFC 35 cm (97th centile). The family history was unremarkable, the couple already had a healthy seventeen year-old boy. The proband had mild developmental delay. She started walking at 16 months and spoke the first word at 24 months. On last assessment at the age of 10, her weight, height and OFC were respectively 39.5 kg (75-90th centile), 134 cm (25th centile) and 55.2 cm (50th centile). She was overweight with

 Table 1

 Phenotype details of 15q24 microdeletion and clinical manifestations in patients with 15q24 microduplication.

15q24 microdeletions	15q24 microdeletions involving the 1,2 Mb minimal deletion critical interval	15q24 microduplications involving the minimal deletion critical interval	15q24 microduplications not involving the minimal deletion critical interval
Inheritance	De novo	Inherited from one parent	Inherited from one parent
Developmental delay	Mildly to severe delayed	Midly delayed	Midly delayed
Growth	Short stature, obesity, microcephaly, IUGR	Short stature or normal growth	Normal
Facial dysmorphism	Face High anterior hairline, broad forehead, frontal bossing, brachycephaly, asymmetry, round face, long narrow face	Long face, low posterior hairline	Round face, plat occiput, plagiocephaly
	Eye Sparse eyebrows, broad medial eyebrows, hypertelorism, downslanting palpebral fissures, epicanthus, strabismus	Downslanting palpebral fissures, hypertelorism, epicanthus, full puffy hooded eyelids, ptosis, strabismus, high arched eyebrows, ptosis	Hypertelorism, epicanthus, strabismus, deep set eyes, thick eyebrows
	Nose Depressed nasal bridge, broad uptumed nasal tip, broad nasal base, hypoplastic nostrils, small nose	High or broad nasal bridge	Flat nasal bridge, bulbous nose tip
	Mouth Long smooth philtrum, small mouth, full lower lip, thin upper lip, widely spaced teeth, high palate, cleft palate, bifid uvula	Smooth philtrum, full lower lip, triangular mouth	Full lower lip, smooth philtrum and dental problems
	Ear Thick small ears, ear lobe pit, cup-shaped protruding ears, large ears, small everted ears, hearing loss	Low set posteriorly rotated ears	Prominent ears
Nervous system	Hypotonia, myelomeningocele, hydrocephalus, wide basal cistema on brain MRI, cerebral atrophy, thick corpus callosum, focal cortical dysplasia, hypoplastic olfactory bulbs	Hypertonia, agenesis of corpus callosum	Truncal hypotonia, lower extremities hypertonia
Genital	Hypospadias, microphallus, cryptorchidism	Hypospadias	Normal
Skeletal	Clubfeet, joint laxity, scoliosis, pes planus, genua valga	Decreased joint range of motion, joint contractures	Joint hypermobility
Digital anomalies	Small hands, overriding second toes, clinodactyly, brachydactyly, broad thumb, long slender fingers, proximally implanted thumbs, hypoplastic right thumbs, toes syndactyly, bilateral short metacarpals	Broad thumbs, blunt finger tips, hyperconvex nails, broad feet, overlapping fingers, hypoplastic nails, broad finger pads	Tapering fingers, clinodactyly of the halluces, highly positioned second toes, syndactyly
Respiratory	Recurrent ear infections, nasal speech, low tone voice, high pitched voice, hoarse voice, soft nasal speech, asthma	<i>"</i>	Recurrent sinusitis, bronchitis, otitis
Other	Feeding difficulties, tetralogy of Fallot, café au lait spots, hepatosplenomegaly, skin laxity, autistic features, inguinal hemia, diaphragmatic hemia, aggressiveness, delayed puberty, attention deficit hyperactivity, epilepsy, dental problems, intestinal atresia, coloboma, imperforate anus, chronic constipation	Attention deficit hyperactivity disorder, Asperger syndrome	Gastro-oesophageal disease, autistic features, behavior problems

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