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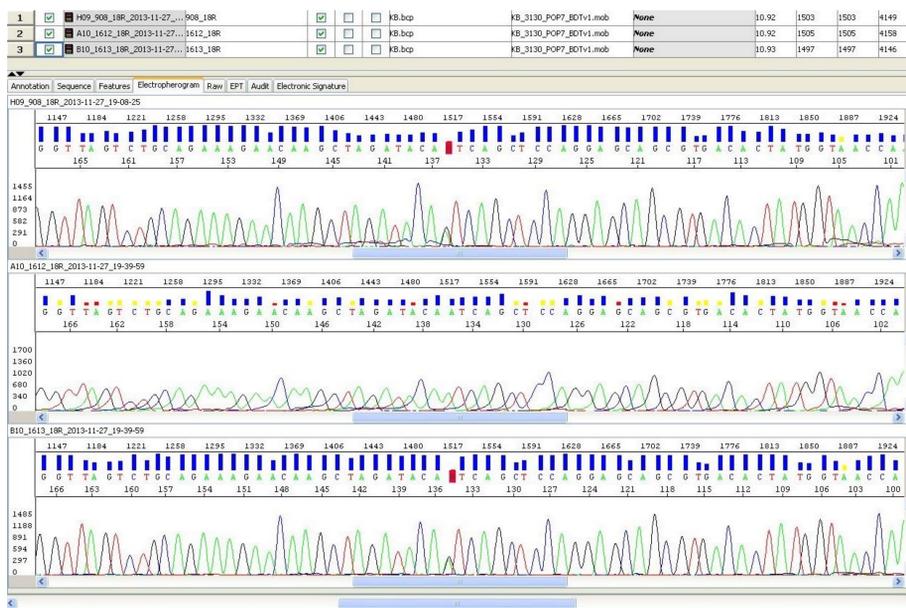
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Background

Tuberous sclerosis (TS) is a polymorphic, dominantly inherited syndrome caused by an inactivating mutation in tumor suppressor genes, TSC1 or TSC2; they regulate a key player in control of cellular growth and protein synthesis: mammalian target of rapamycin (mTOR). The disease involves benign tumors in several distinct organs (such as the skin, kidneys, heart and central nervous system), that can interfere with organ function. Rarely TS is associated with endocrine abnormalities, but the association with congenital hypothyroidism has been published only in another case report.

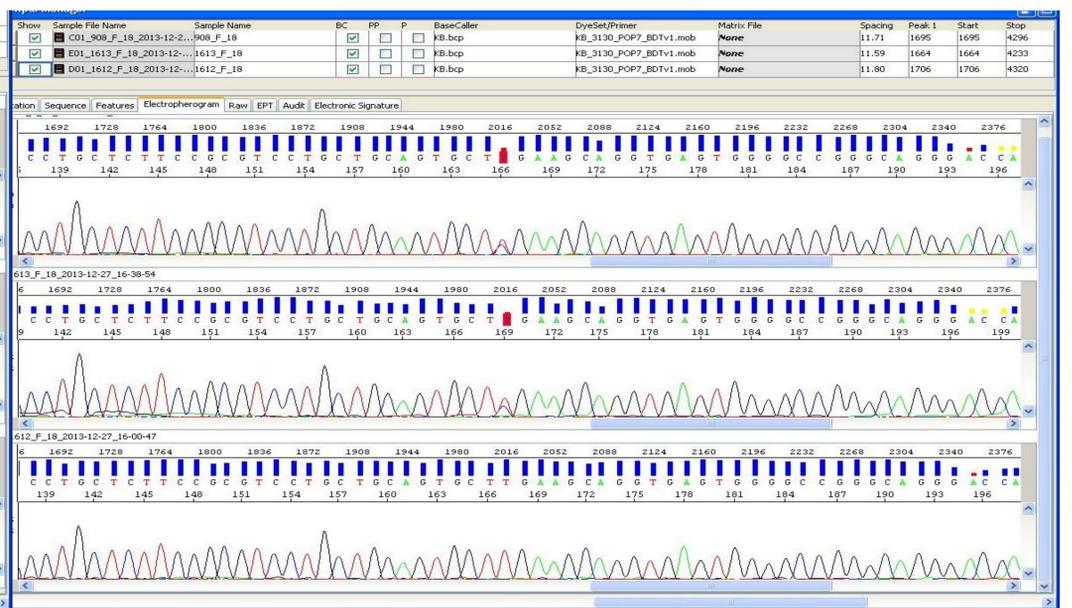
Method

DNA was extracted from peripheral blood using standard techniques. Mutation analysis was performed on all TSC1 and TSC2 exon and exon boundary with DHPLC methods and direct sequencing. The mutation is described according to HGVS nomenclature (Accession number NM_000548,3).



Objective and hypotheses

EG was a female newborn, positive at neonatal screening for congenital hypothyroidism (CH) (confirmed with venous sample). USgraphy and scintigraphy showed hypo-dysplasia of her thyroid (treated with L-tiroxine). As a part of diagnostic approach, we made echocardiography, founding several rbdomiomas. These benign tumors are frequently associated with TS, so we searched for mutations of TSC1 and TSC2 genes. No skin lesions were found. EG had also abdominal organs echography (normal) and brain magnetic resonance imaging (MRI).



Results

EG had heterozygosis in pLeu697Ser[^] of TSC2 exon 18 and p.Asn762Ser mutation of TSC1 exon 18. The same abnormalities were found in her father. The brain MRI showed a small altered signal in left front-insular white substance. Afterwards EG had to start valproic acid therapy because of seizures.

References

- Bereket A. and other: *Thyroid dysgenesis and the dysplasia hypothesis in tuberous sclerosis. Am J Med Genet. 1993 Sep 1;47(3):417-9.*
- Adhvaryu K. and others: *Tuberous sclerosis with hypothyroidism and precocious puberty. Indian J Pediatr. 2004 Mar;71(3):273-5.*
- Jones A.C. and others: *Application and evaluation of denaturing HPLC for molecular genetic analysis in tuberous sclerosis. Hum Genet 2000, 106: 663–668.*

Conclusions

Although the association of CH and TS in one patient may be merely coincidence, we speculate that the dysgenetic thyroid gland in this baby could be a "hamartia" as a consequence of the tuberous sclerosis gene mutation.