

Cytogenetic spectrum of Ovotesticular Disorder of Sex Development in Egyptian DSD patients

Inas Mazen, Nabil Dessouki, Amal Mohammed, Alaa Kamel, Mona Mekkawi

Prof of clinical genetics & Endocrinology, Department of clinical Genetics, Human Genetics & genome Research Division, National Research Center (NRC)

Introduction

Ovotesticular disorder of sex development (**OT-DSD**) is a rare disorder of sexual differentiation characterized by the presence of **both testicular and ovarian tissues** in the gonads of the same individual

Objective

Report on 8 patients with OT-DSD, who were referred to the **Clinical Genetics and endocrinology Clinic (NRC), Cairo, Egypt.**

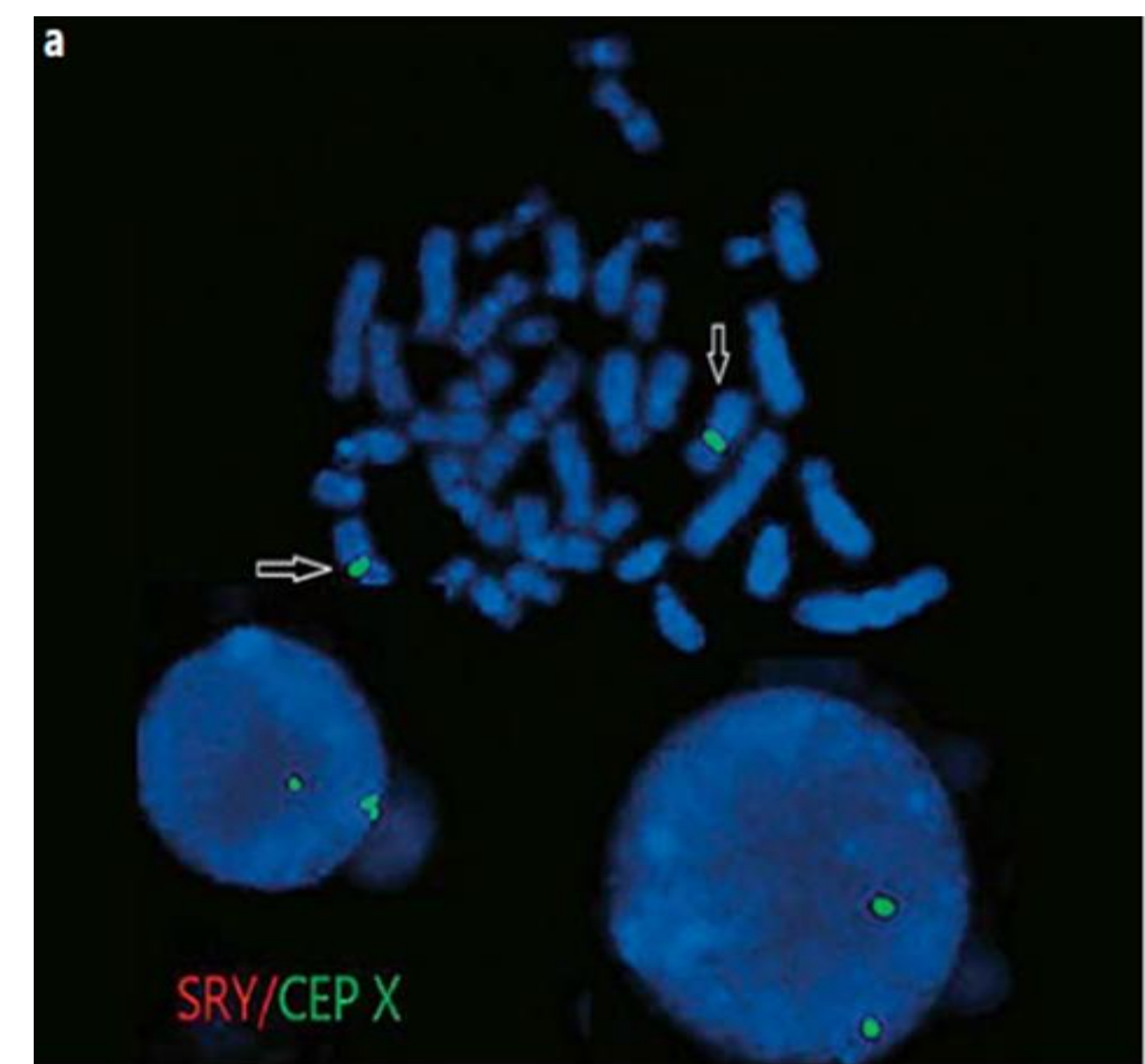
Results

- The 8 OT-DSD patients were among 540 DSD patients studied over a period of 7 years (2010-2017):
 - ❑ Seven patients presented with ambiguous genitalia.
 - ❑ One male patient presented with pubertal breast development.
 - ❑ OT-DSD pathological diagnosis was confirmed in all patients.

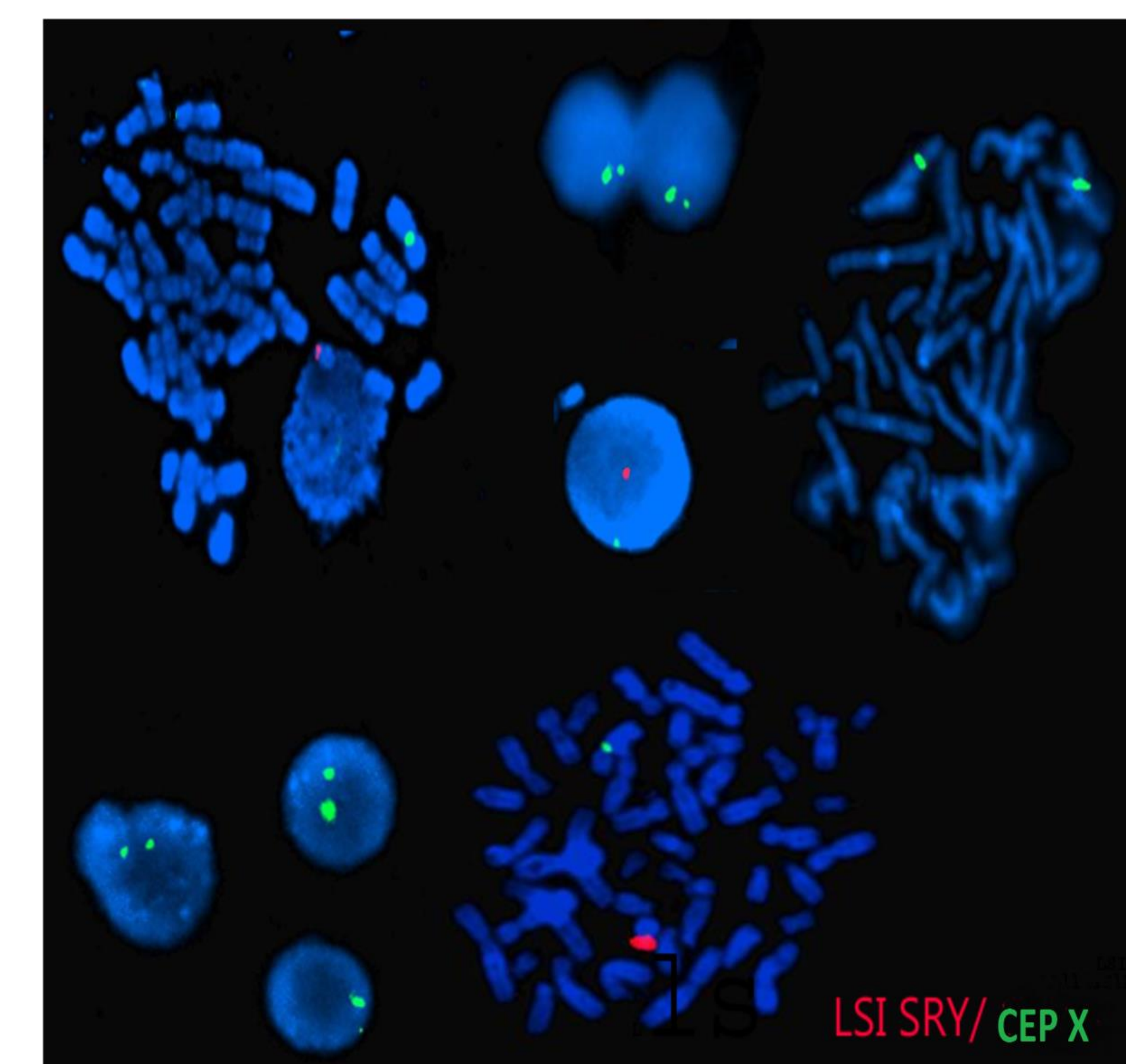
Table 1: Classification of studied patients

Age	Sex of rearing	Presentation	Laparoscopy and histopathology	Cytogenetic results
13 yr	Female	Ambiguous genitalia	Right dysgenetic testis, Left ovary with some follicular activity Hypoplastic uterus	45,X [60]/46,X, idic(Y) (p11.32)[40]. ish idic(Y)(p11.32) (wcpY, Xp/Yp-, SRY, DYZ3)
9 m	Female	Ambiguous genitalia	Right dysgenetic testis Left ovotestis and fallopian tube Hypoplastic uterus	45,X[75]/46,X, idic(Y) (p11.32)[15]/ 47,X,idic(Y) (p11.32)x2[4]/ 46,XY[6] ish idic(Y)(p11.32) (wcpY, Xp/Yp-,SRY, DYZ3)
11 yr	Male	Gynecomastia	Left ovotestis Right scrotal epididymal cyst Uterus	mos46,X,dic(X;Y)(p22.33;p11.32)[65]/45,X[23]/45,dic(X;Y) (p22.33;p11.32)[12]. ish: t(X;Y)(p22.33;p11.32)(DXZ1+/ DYZ3+, KAL+, SHOX-, Xp-/Yp-, SRY+). nuc ish X/Ycen(DXZ1x2,DYZ3x1)(DXZ1 con DYZ3x1) [67]/ (DXZ1x1)[23]/(DXZ1x1,DYZ3x1)(DXZ1 con DYZ3) [10]
3 yr	Female	Ambiguous genitalia	Bilateral ovotestis Prepubertal uterus	46,XX. ish: (DXZ1++/DYZ3-, SRY-) nuc ish X/Ycen (DXZ1x1)[35]/ (DXZ1x2) [55]/ (DXZ1x1,DYZ3x1) [10]
12 yr	Female	Ambiguous genitalia	Left dysgenetic testis Right ovotestis Prepubertal uterus	46,XX. ish: (DXZ1++/DYZ3-, SRY-) nuc ish Xcen(DXZ1x2), Yp11.32 (SRY-)
25 yr	Male	Ambiguous genitalia	Left testis Right small cystic ovary Uterus	46, XX ish: (DXZ1++/ SRY-)
6 m	Male	Ambiguous genitalia	Left testis Right ovotestis Uterus	46,XY[70]/ 46, XX[30]
3 yr	Male	Bilateral undescended testis	Right testis Left ovotestis Uterus	46,XX ish: (DXZ1++/DYZ3-, SRY-)

Figures: FISH analysis of Patients 4 and 7



FISH of patient 4 showing 2 hybridization signals for X centromeres (DXZ1).



FISH of patient 7 showing chimeric chromosomal complement with both 46,XY and 46,XX cell lines

Conclusions

- OT DSD should be considered as one of the **differential diagnoses in cases of ambiguous genitalia** with non palpable or asymmetrical gonads, pubertal gynecomastia, and cyclical hematuria, irrespective of the karyotype or internal genitalia.
- OT DSD can be presented with **different cytogenetic abnormalities**
- **Gonadal biopsy** is necessary to establish diagnosis in cases of sex chromosome mosaicism
- Chromosome studies carried out on **peripheral lymphocytes** do not always reflect the proportion of cell lines in the gonads.

Acknowledgement

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