



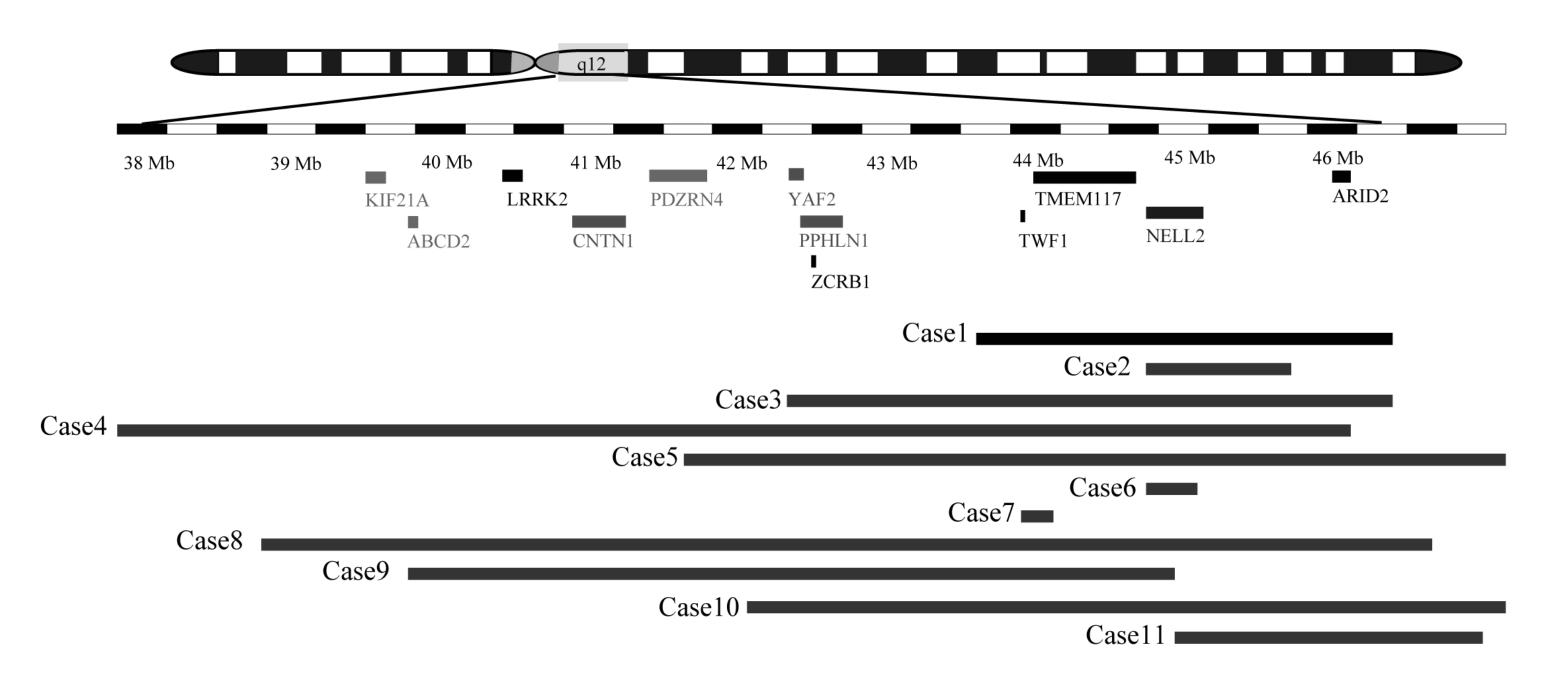
Deletion at 12q12 increases the risk of developmental delay and intellectual disability

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Introduction

Deletions at 12q12 are extremely rare chromosomal imbalances; only four cases involving a deletion of this type have previously been reported. Here, we identified a Chinese girl with a 3.18 Mb deletion at 12q12 (human genome build 19: 43,418,911-46,601,627), who showed postnatal growth delay, low-set ears, small hands and feet, widely spaced nipples and blue sclerae. In these five sporadic cases, all of the patients exhibited developmental issues accompanied by different degrees of intellectual disability. Chr12



Method

This study was approved by ethics committees of our hospital and consent was obtained from the patient's parents. Chromosomal microarray analyses (CMAs) was performed on a CytoScan 750K Array (Affymetrix, CA) in accordance with the manufacturer's instructions. Genomic DNA was extracted from peripheral blood and isolated via standard procedures using a QIAamp DNA Blood Mini Kit (Qiagen, Hilden). Polymerase chain reaction (PCR) was performed on a 9700 thermal cycler (AB, Singapore). Figure 2. Genes with high HI scores in the deleted 12q12 regions (modified from the DECIPHER genome browser: https://decipher.sanger.ac.uk) in our patient and 10 other patients. Case 1 is the girl we have reported; case 2 was reported by Carlsen in 2015; case 3 was reported by Failla in 2008; and cases 4 and 5 involved patients 1 and 2 (firstly reported by Tonoki et al., 1998), respectively, of the patients reviewed by Miyake in 2004. Cases 5-11 were obtained from the DECIPHER database.

Table 1. Summary of clinical features of five previously reported patients compared with those of the new patient described in this report

	Case 1	Case 2	Case 3	Case 4	Case 5
Patient information	Current case	Carlsen et al., 2015	Failla et al., 2008	Miyake et al., 2004 (1)	Miyake et al., 2004 (2) Tonoki et al., 1998
Sex	Female	Male	Male	Male	Male
Deleted cytoband	12q12	12q12	12q12	12q11-q13	12q12-q13.2
Age at evaluation	3 m	10 y	10 y	20 m	2 y
IUGR	—	—	—	—	+
Growth retardation	+	+	+	+	+
ID	Moderate	Moderate	Moderate	Moderate	Severe
OFC (<3 rd centile)	+	—	+	NA	+
Small hands/feet	+	+	+	+	+
Large/low-set ears	+	+	+	+	+
Eye abnormalities	Blue sclerae	Strabismus	Strabismus, myopia	Strabismus, myopia	Strabismus, blepharoptosis
Palpebral fissures	Up	Down	Horizontal	Up	Down
Nose (broad nasal bridge/anteverted nostrils)	+/+	+/+	+/-	+/+	+/+
Mouth	Small, downturned corners, long philtrum	Wide mouth, long flat philtrum	Downturned corners, long flat philtrum	Small, downturned corners	Small, downturned corners, long philtrum cleft palate
Fifth finger clinodactyly	+	+	_	NA	+
Widely spaced nipples	+	+	+	+	+
Cardiologic anomalies	+	+	+	+	_

Results & Conclusions



IGR: intrauterine growth retardation; ID: intellectual disability; NA: not assessed.

Table 2 Clinical features of ten reported cases involving genomic loss at 12q12 in the DECIPHER database

	Case 6	Case 7	Case 8	Case 9	Case 10	Case 11
ID	139	250361	257543	259419	285576	349958
Size of 12q12/	497.5 kb/	166.44 kb/	8.08 Mb/	5.34 Mb/ de	6.49 Mb/ de	2.22 Mb/ de
inheritance	unknown	inherited	unknown	novo	novo	novo
Coordinates	44866421-	44126853-	38805678-	39933990-	42264141-	45161827
(hg19)	45363917	44293297	46882370	45269105	48750492	-47383364
	Loss chr12:					Gain chr15:
Additional	16851561-	None	None	None	None	22770421-
CNVs	22736846					23288350
Developmental	Speech and language	No	Proportionate	Delayed speech and language	Delayed speech and	Mild global development
features	development delay	information	short stature	development, motor delay	language development	delay, short stature
Intellectual disability	+	+	+	No information	No information	No informatio
Facial /Cranial dysmorphisms	Prominent nasal bridge	Facial abnormality	No information	No information	No information	Mild microcephaly
Other clinical features	No information	Abnormal hair pattern	Autism, precocious male puberty	No information	Cleft palate	No informatio

We presented 11 individuals with 12q12 deletion, including one new subject. Our analysis suggested that a 12q12 microdeletion increases risk for developmental delay and intellectual disability. In conclusion, 12q12 deletion could be added to the database of pathophysiological genomic alterations that induce developmental delay, which will be helpful for counselling and management of the patients with developmental delay.

Figure 1. Appearance of the patient at the age of 3 months. a: Facial features including; upslanting palpebral fissures, a broad nasal bridge with anteverted nares, and the blue sclerae; b: Laterral view showing short neck, low-set and large ears; c: Small hands and 5th finger clinodactyly; d: Intersecting palms; e: Widely spaced nipples; f: Small feet.

References

- 1. Capalbo, A.; Rienzi, L., & Ubaldi, F. M. (2017). Diagnosis and clinical management of duplications and deletions. Fertil Steril 107, 12-18.
- Carlsen, E. Ø., Frengen, E., Fannemel, M., & Misceo, D. (2015). Haploinsufficiency of ANO6, NELL2 and DBX2 in a boy with intellectual disability and growth delay. Am J Med Genet Part A 167A, 1890-1896.



EECE P3-P262 6. Growth and syndrome (to include Turner syndrome) Ying Weng





Growth and syndromes (to include Turner syndrome)

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Poster presented at:



