

# ESPE

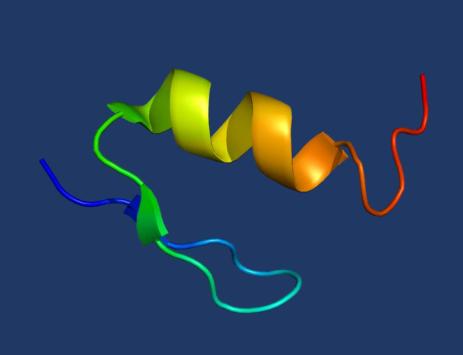


57th ESPE 2018 **Meeting ATHENS GREECE** 27-29 September 2018

## A 46,XX FEMALE WITH WT1 MUTATION, CONGENITAL NEPHROTIC SYNDROME AND A COMPLEX DSD

Sara Ciccone<sup>1,2</sup>, Carla Bizzarri<sup>1</sup>, Stefano Picca<sup>3</sup>, Cinzia Orazi<sup>4</sup>, Chiara Lucchetti<sup>5</sup>, Marzo Cappa<sup>1</sup> <sup>1,</sup>Endocrinology and diabetes unit, Bambino Gesù Pediatric Hospital, Rome, Italy <sup>2</sup>Pediatric Unit, Bufalini Hospital, Cesena, Italy <sup>3</sup>Nephrology Unit, Bambino Gesù Pediatric Hospital, Rome, Italy <sup>5</sup>Gynecology Unit, Bambino Gesù Pediatric Hospital, Rome, Italy

WT1 (Wilms tumor suppressor gene 1) is essential for kidney and gonadal development. WT1 gene mutations are associated with two syndromes called Denys-Drash (DDS) and Frasier (FS) that clinically overlap and differ in the type of mutation and in the age at nephropathy onset. In 46,XY subjects, WT1 mutations are associated with steroid-resistant nephrotic syndrome (NS), Wilms tumor, disorder of sex development (DSD) with dysgenetic gonads and gonadoblastoma risk.On the contrary, the impact of WT1 gene on the genital development of 46,XX subjects is not clear.



	Denys-Drash Syndrome	Frasier Syndrome
Genitalia	46,XY DSD	46,XY partial DSD
Glomerular damage on biopsy	Diffuse mesangial sclerosis	Focal segmental sclerosis
End-stage renal failure progression	0-3 years	10-20 years
<ul><li>Neoplastic Risk</li><li>Wilms Tumor</li><li>Gonadoblastoma</li></ul>	++ age at onset 18 months +	+ ++ age at onset 15-20 years

#### Case report

#### **NEPHROPATHY**

Kidney failure due to congenital nephrotic syndrome

first months: peritoneal dialisys 3 years: kidney transplantation

5 years: acute rejection

12 years: regular hemodialisys

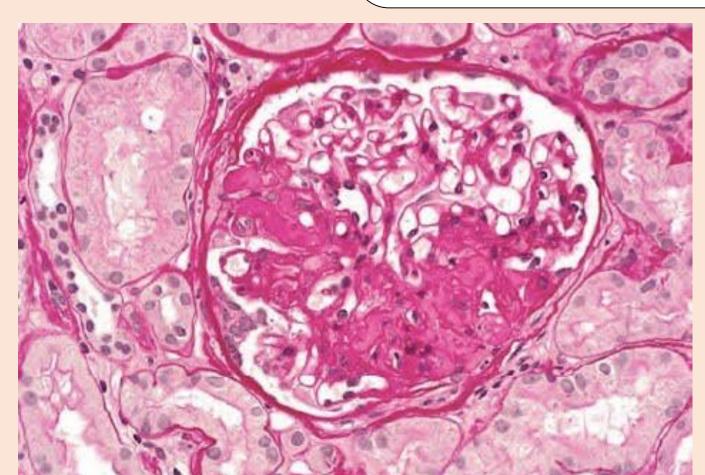
#### **DSD**

14 years: the girl was referred to endocrinological clinic for primary amenorrhea despite a complete pubertal development (Tanner stage 5). She presented androgenetic alopecia and voice deepening.

Weight: 44 kg (25th), height: 161.4 (50-75th), BMI: 16.9 kg/mq (10-25th).

Bone age = chronological age

### WT1 heterozygous mutation c.1097>A\* 46,XX female karyotype



Kidney biopsy at onset: mesangial proliferative glomerulonephritis with focal-segmental glomerular sclerosis

Endocrine tests: pubertal gonadotrophins (FSH 8.8mU/ml, LH 3.6mUI/ml), estradiol 92.8pg/ml, testosterone 190.2 ng/dl and anti-mullerian hormone 1.3ng/ml. Basal and post-ACTH adrenal androgens were normal.

Pelvic ultrasound: bilateral dysgenetic gonads in the inguinal canals, uterotubaric agenesis, vaginal atresia and urogenital sinus.

Gonadectomy: hypotrophic ovaries with cystic follicles and interstitial fibrosis.

\*producing the amino acid change Arg366His. This mutation had been described in 46,XY patients with Denys-Drash syndrome.

WT1 knockout mice lack gonads in both sexes, suggesting a role of the gene in the formation of the genital ridge, an early stage of development in which the gonad is still undifferentiated. Nowadays, little is known about the role of WT1 in the development of the female reproductive system. Sporadic cases of 46,XX females are reported with a WT1 mutation and minor abnormalities such as streak ovaries or bicornuate uterus. To our knowledge, this is the first report on a 46,XX female presenting heterozygous WT1 mutation, congenital nephrotic syndrome, and a complex DSD associated with gonadal dysgenesis.

Hoefele J, Kemper MJ, Schoenermarck U, et al. Truncating Wilms Tumor Suppressor Gene 1 Mutation in an XX Female with AdultOnset FocalSegmental Glomerulosclerosis and Streak Ovaries: A Case Report. Nephron. 2017;135:72-76.

Hastie ND. Wilms' tumour 1 (WT1) in development, homeostasis and disease. Development. 2017 Aug 15;144:2862-2872.







