

**45th ANNUAL DIAGNOSTIC SLIDE SESSION, 2003  
REFERENCES AND DIAGNOSES**

**MODERATOR: E. Tessa Hedley-Whyte, M.D.**

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**Case 2004-9**

**Submitted by:** Dr. Christopher Pierson, Children's Hospital and Brigham and Women's Hospital, and Dr. E. Tessa Hedley-Whyte, Massachusetts General Hospital, Boston, MA

**Diagnosis: Merosin deficient congenital muscular dystrophy**

**Comment:** There were increased variation of muscle fiber size and phagocytosis of fibers, on microscopical examination. Neither "ragged red" fibers nor nemaline rods were present. Merosin was absent from the sarcolemmal membranes, on immunocytochemistry. Merosin deficiency in a mouse model has been successfully treated with agrin, which makes a functional mimetic of merosin.

**References:**

Moll J, Barzaghi P, Lin S, et al: An agrin minigene rescues dystrophic symptoms in a mouse model for congenital muscular dystrophy. *Nature* 2001; 413:302-307.

Pegoraro E, Mancias P, Swerdlow SH, et al: Congenital muscular dystrophy with primary laminin alpha2 (merosin) deficiency presenting as inflammatory myopathy. *Ann Neurol* 1996; 40:782-791.

Tubridy N, Fontaine B, Eymard B: Congenital myopathies and congenital muscular dystrophies. [Review] *Current Opinion in Neurology* 2001; 14:575-582.