

DSS-8

Angela Wu, MD and Steven A. Moore, MD, PhD
The University of Iowa, Iowa City, IA
and
Mark Lipson, MD
Kaiser Permanente, Sacramento, CA

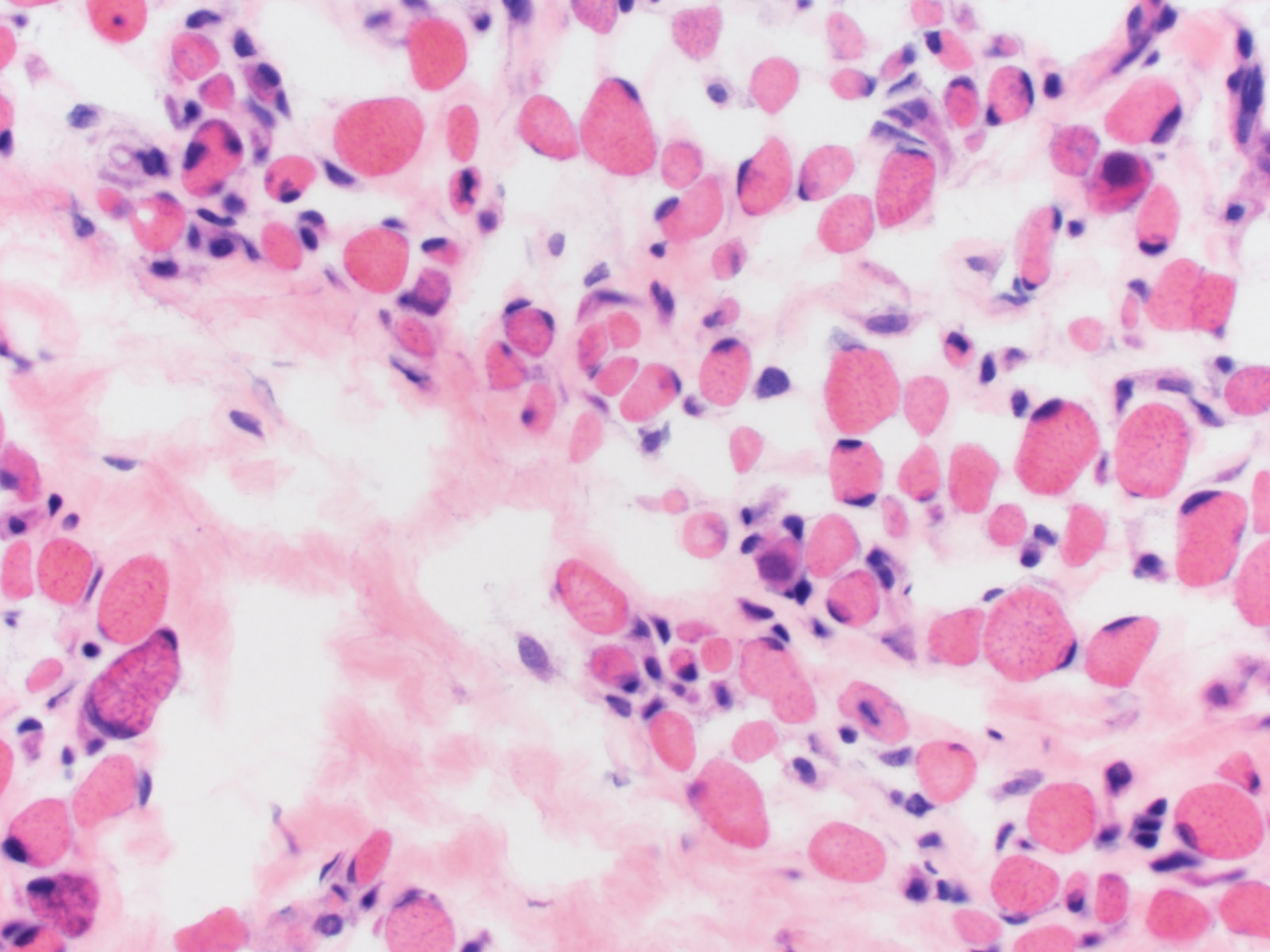
There are no financial relationships to disclose.

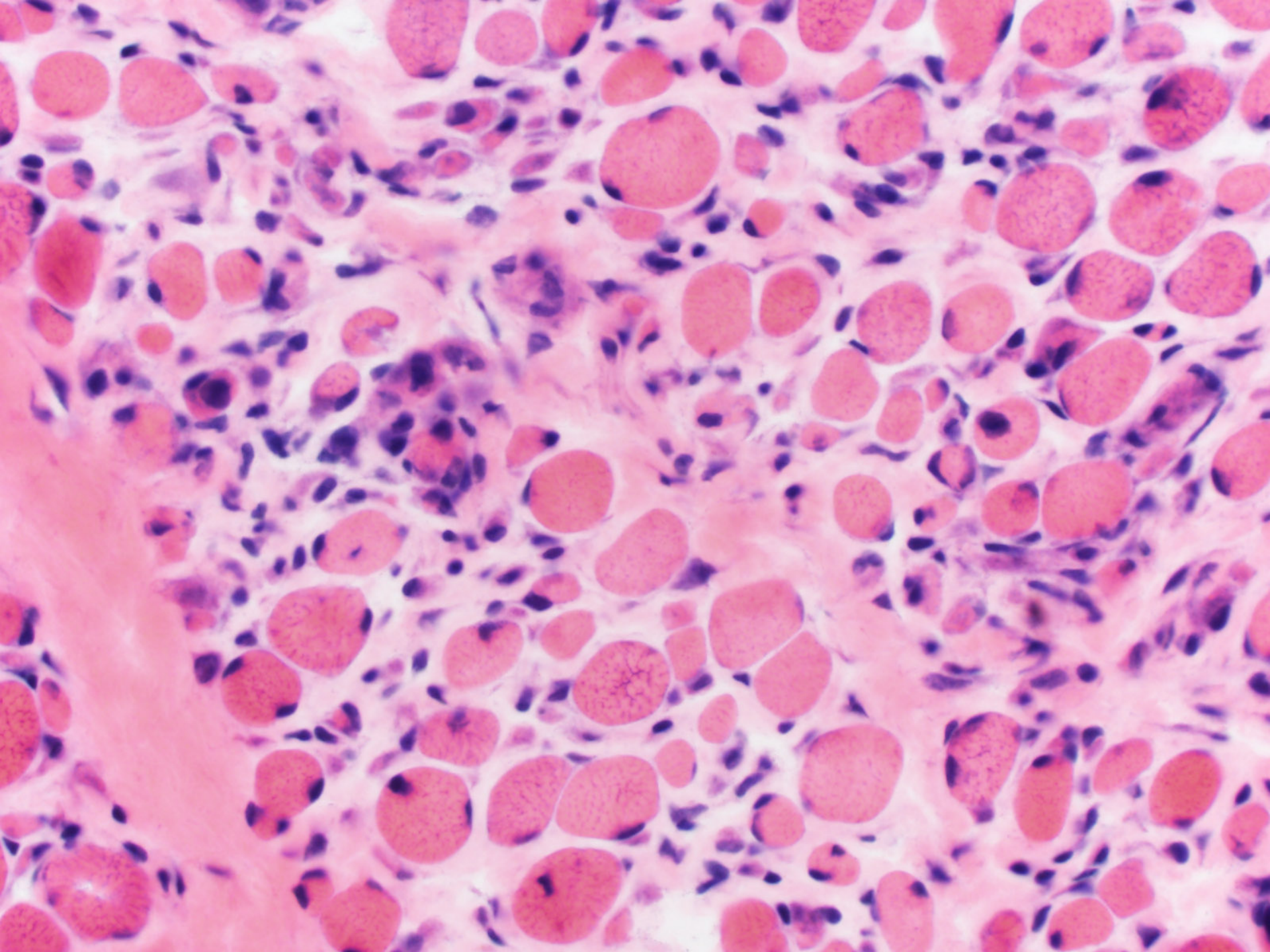
Clinical History

- male infant born by C-section at 41 weeks gestation after a normal pregnancy
- 2 month well-child exam: normal
- At 3 months of age he had significant hypotonia and weakness, proximal > distal.
- EMG: myopathic; NCS: normal; rep. stim: normal
- serum CK: 3170 to 4944 U/L

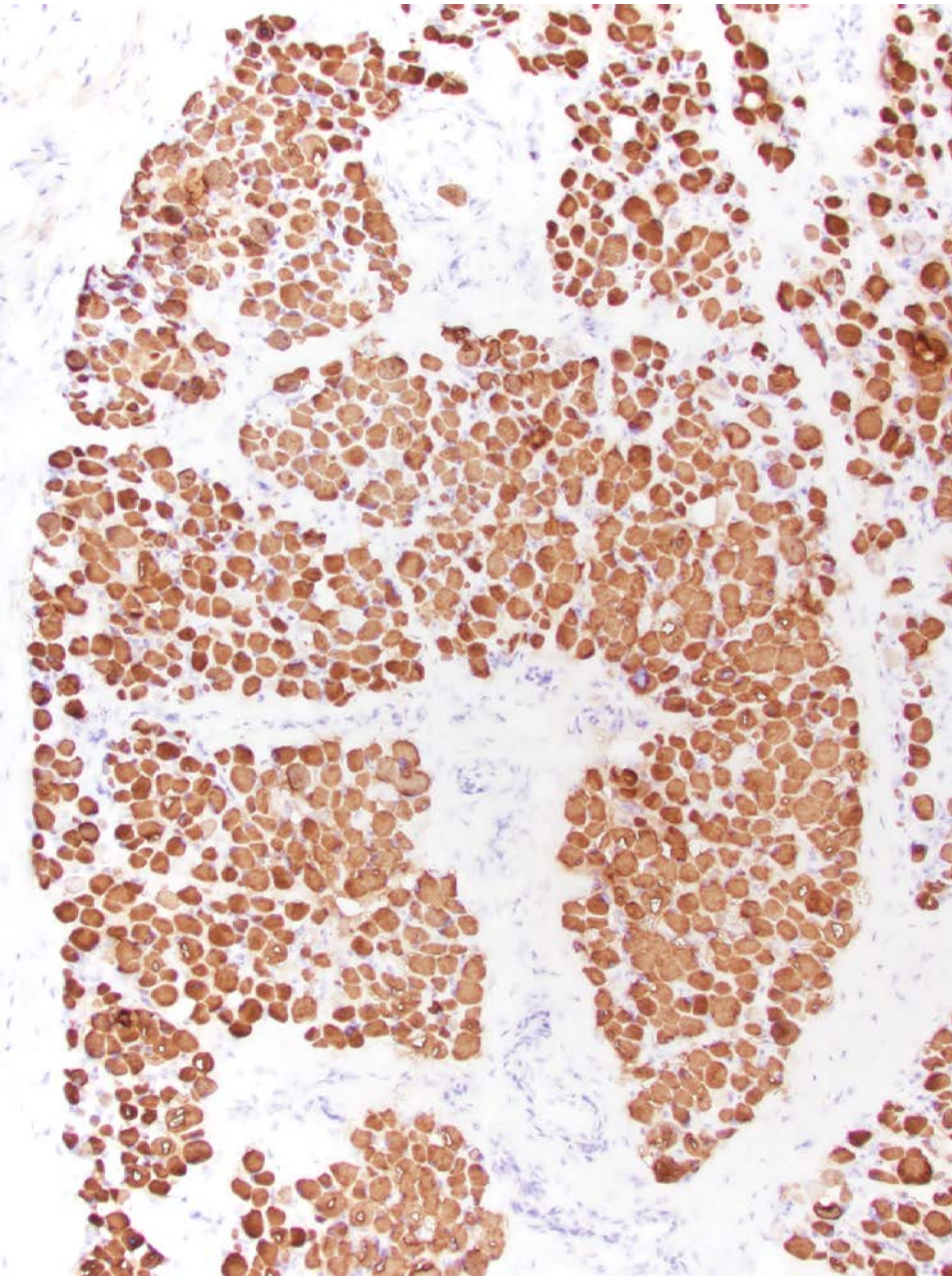
- quadriceps muscle biopsy at 4 months

- clinical course: progressive weakness with repeated hospitalizations for respiratory support; died at 6 months of age

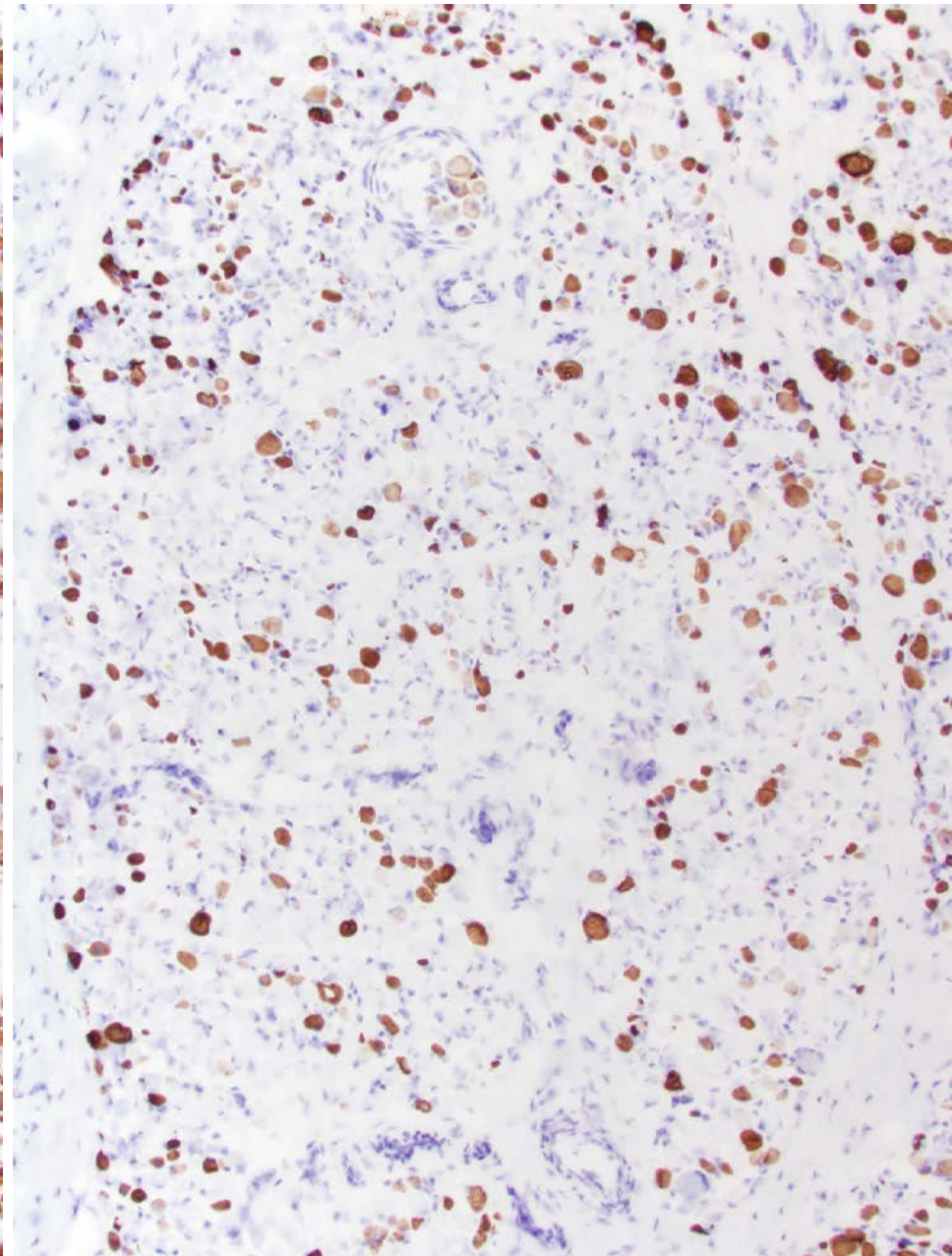




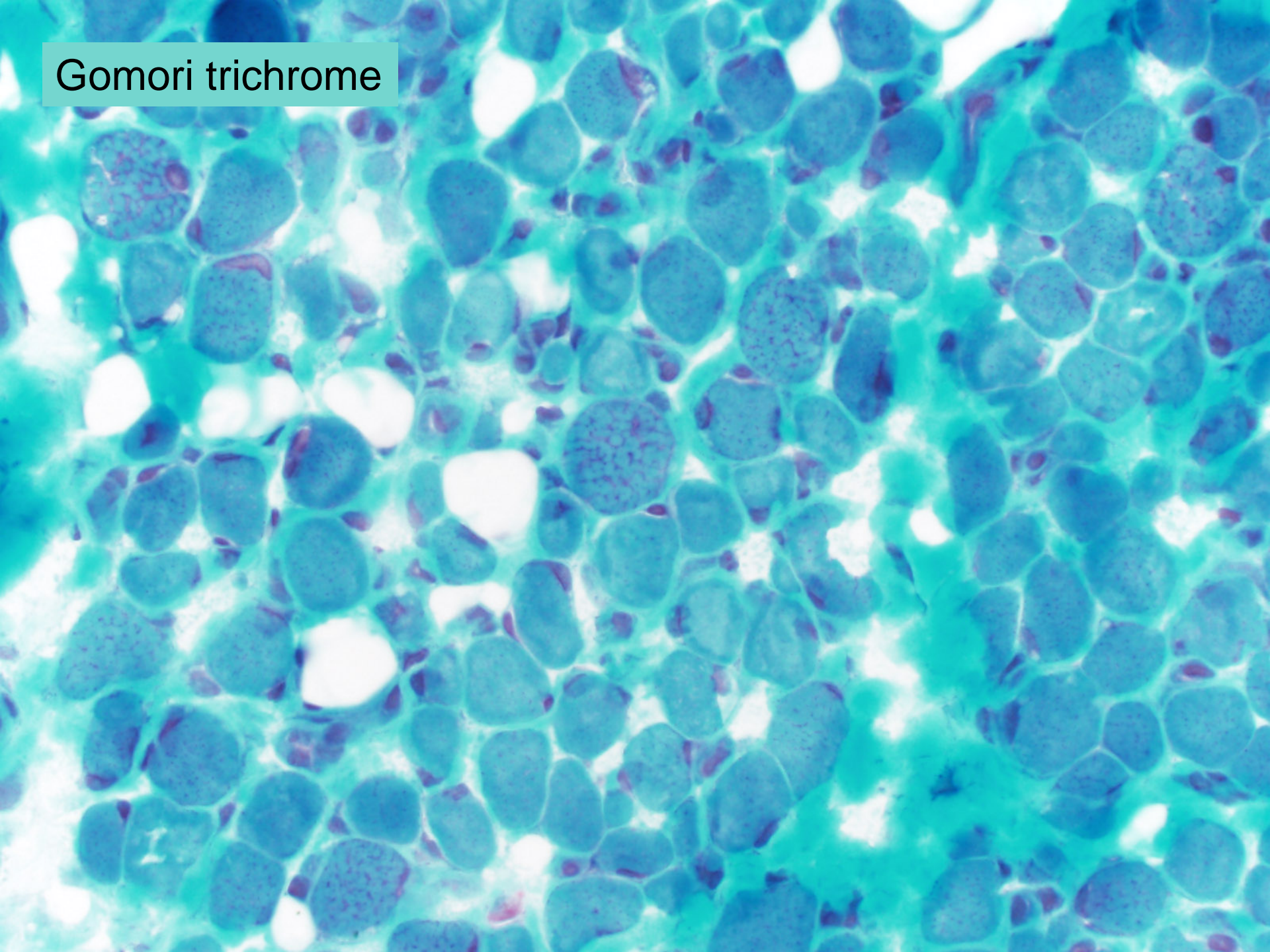
slow myosin (type I fibers)



fast myosin (type II fibers)



Gomori trichrome



Points for Discussion

- Differential diagnosis
- Approach to diagnostic testing

Points for Discussion

- Differential diagnosis
 - congenital muscular dystrophy
 - atypical presentation of Duchenne muscular dystrophy
 - other necrotizing myopathies
- Approach to diagnostic testing
 - immunostaining for merosin, alpha-dystroglycan, and dystrophin
 - routine enzyme histochemistry
 - electron microscopy, as needed
 - genetic testing, as needed

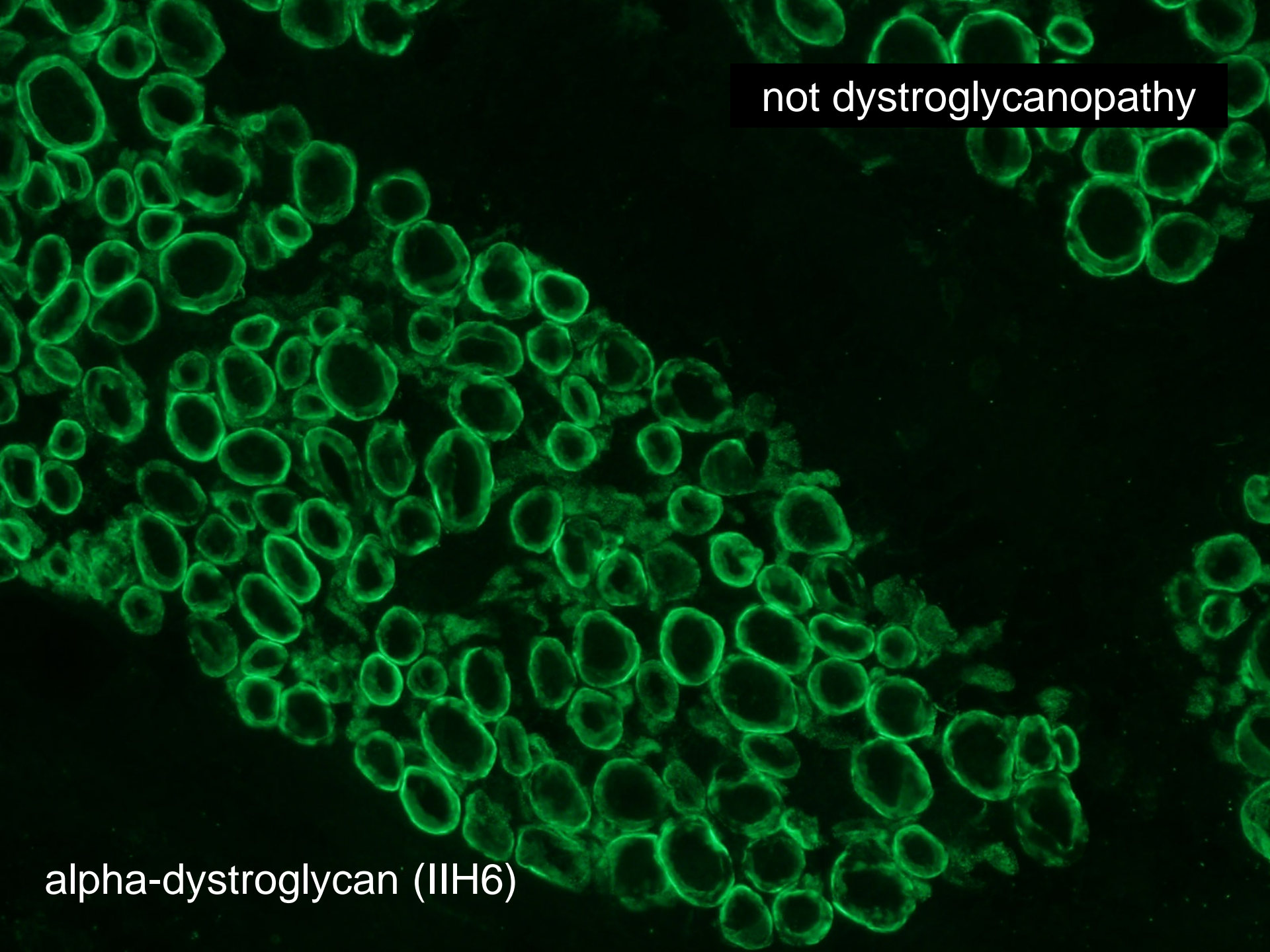
not merosin-deficient
congenital muscular
dystrophy

merosin



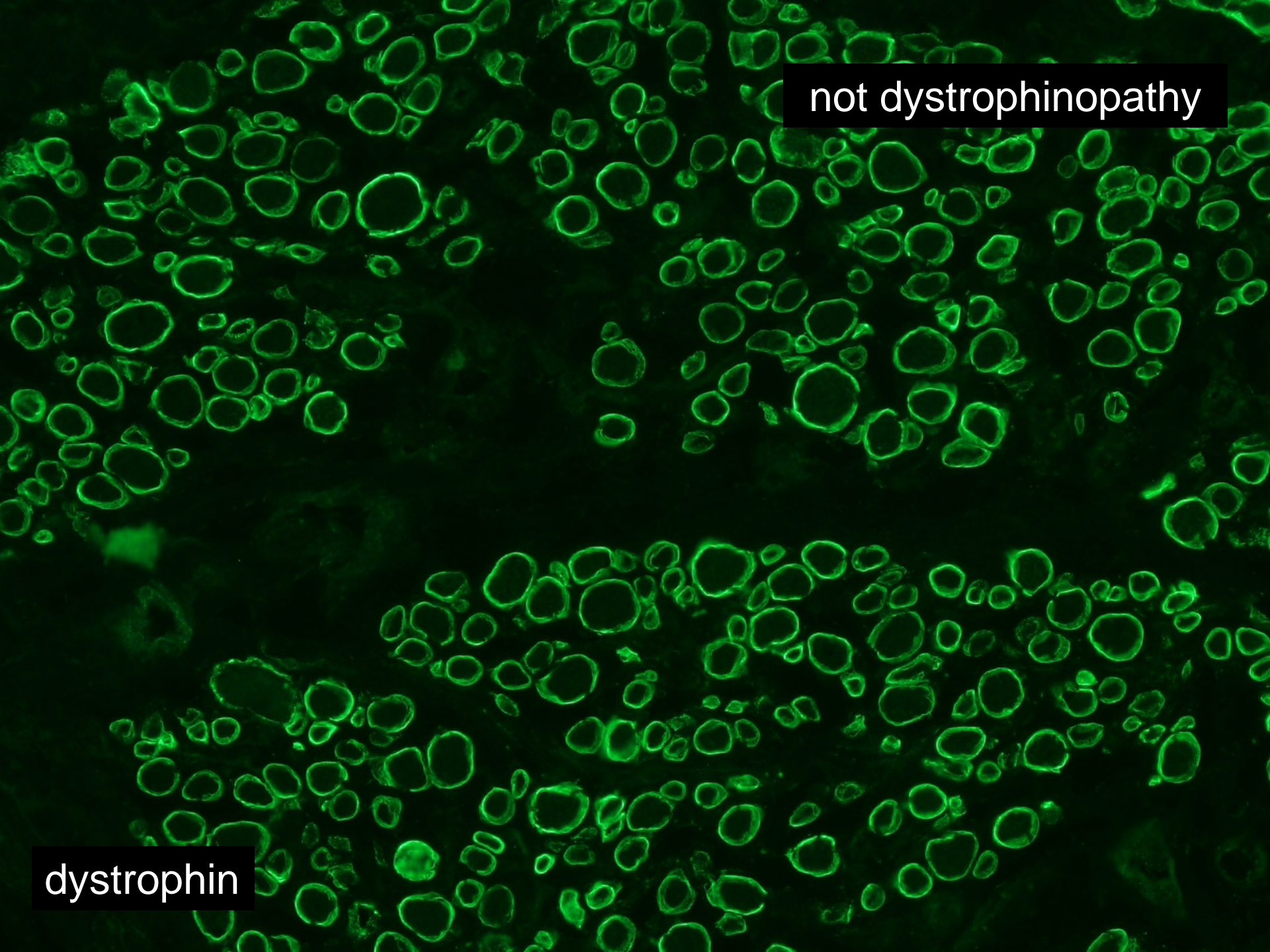
not dystroglycanopathy

alpha-dystroglycan (IIH6)

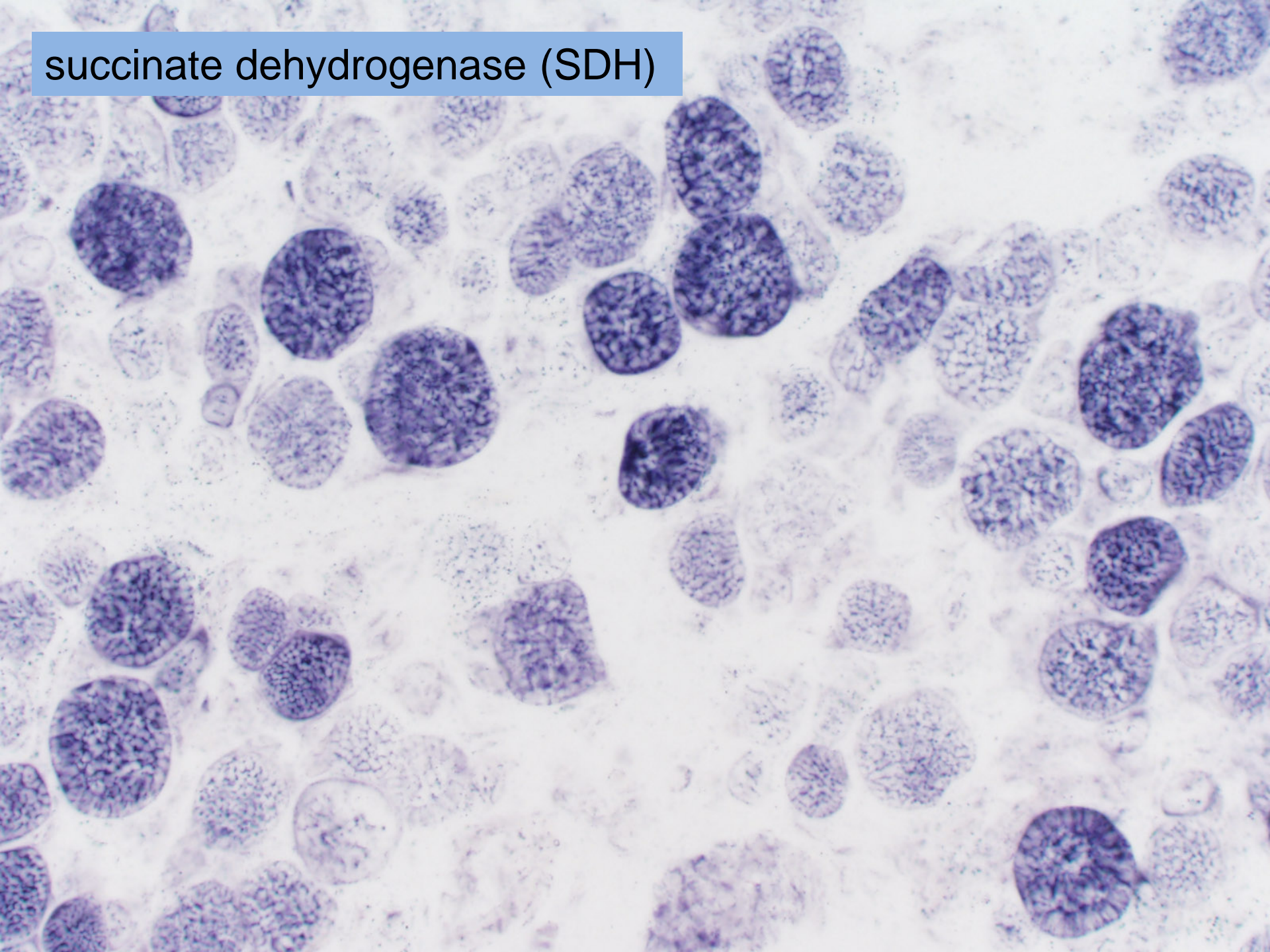


not dystrophinopathy

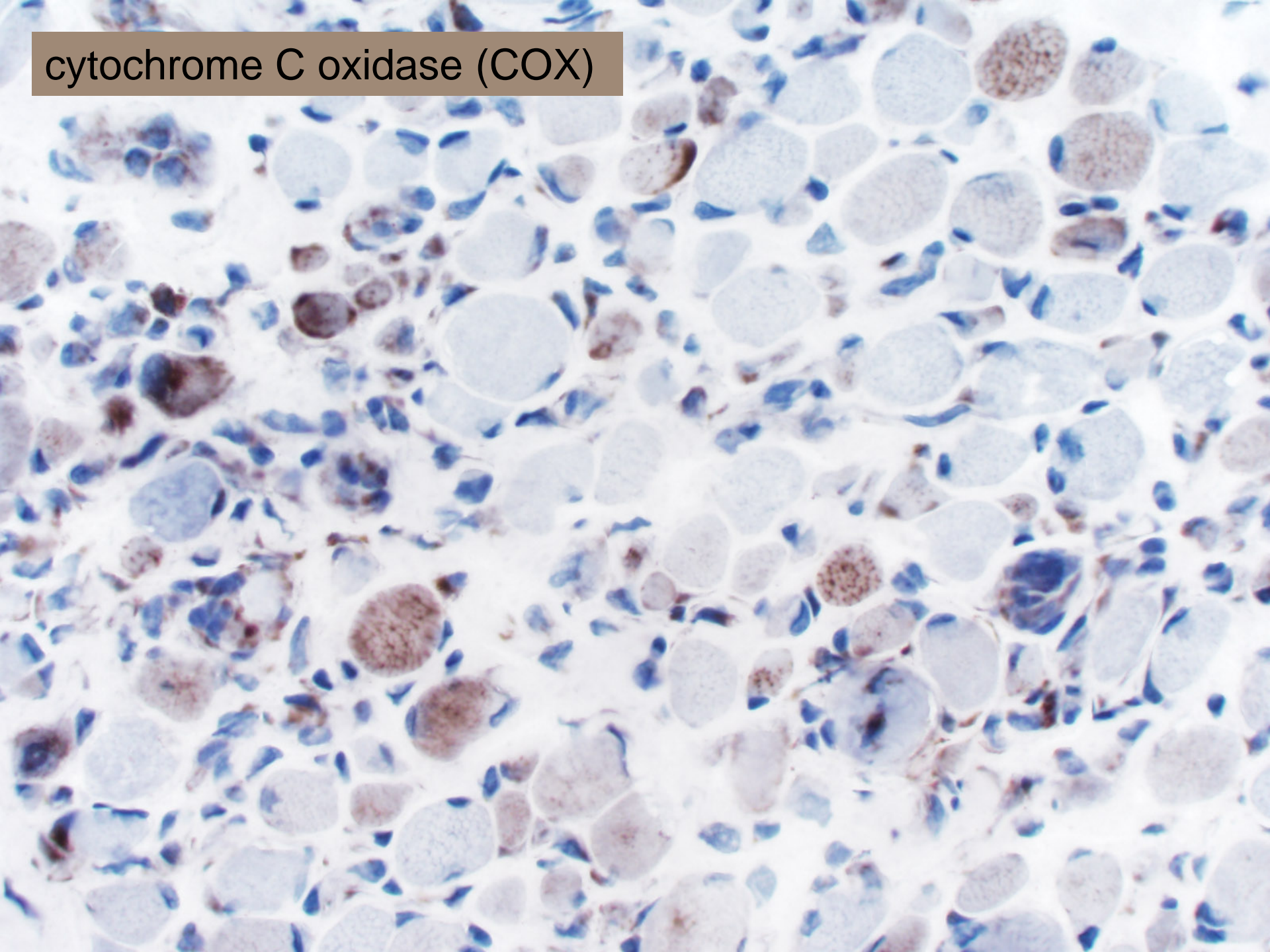
dystrophin



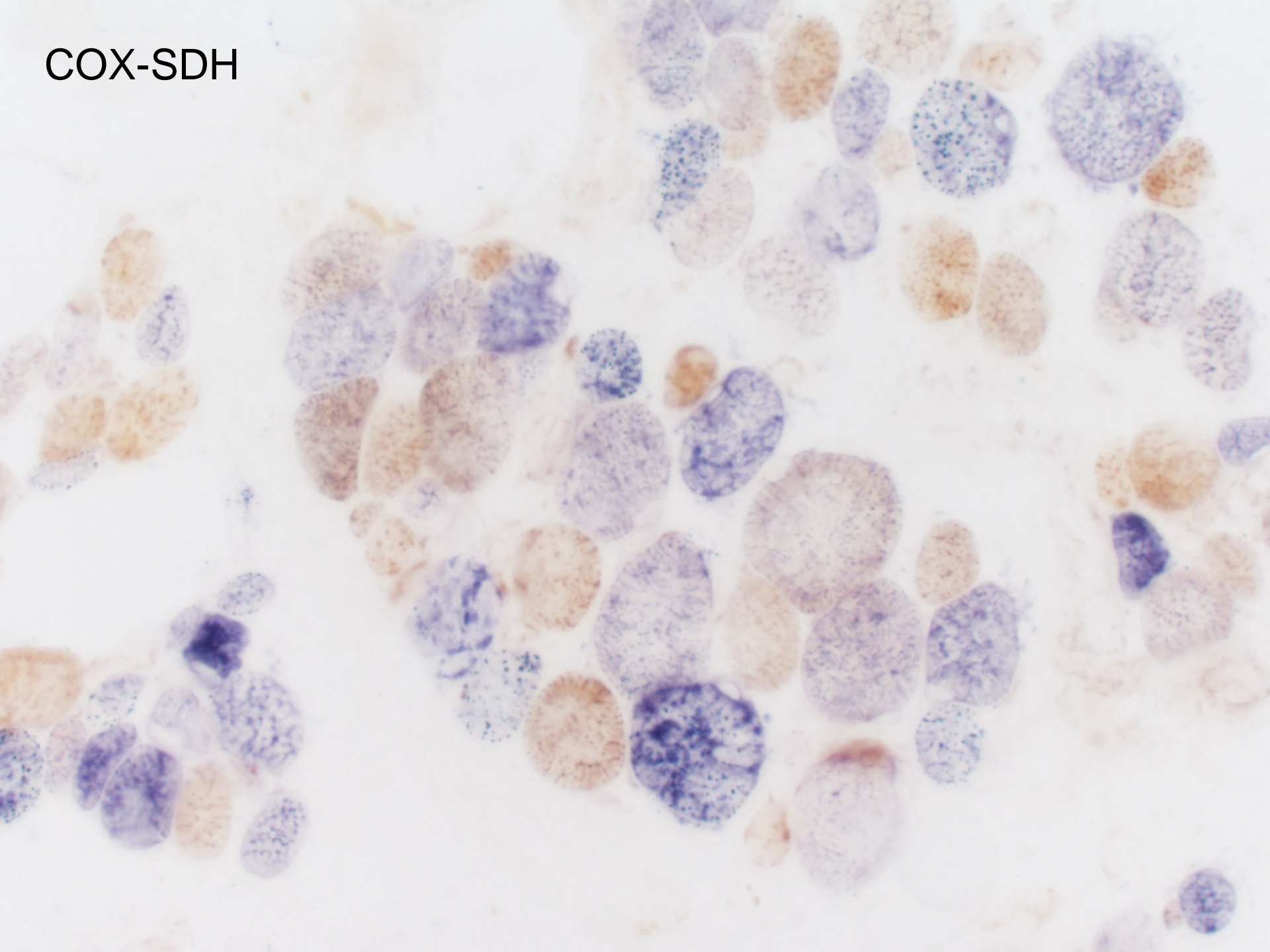
succinate dehydrogenase (SDH)

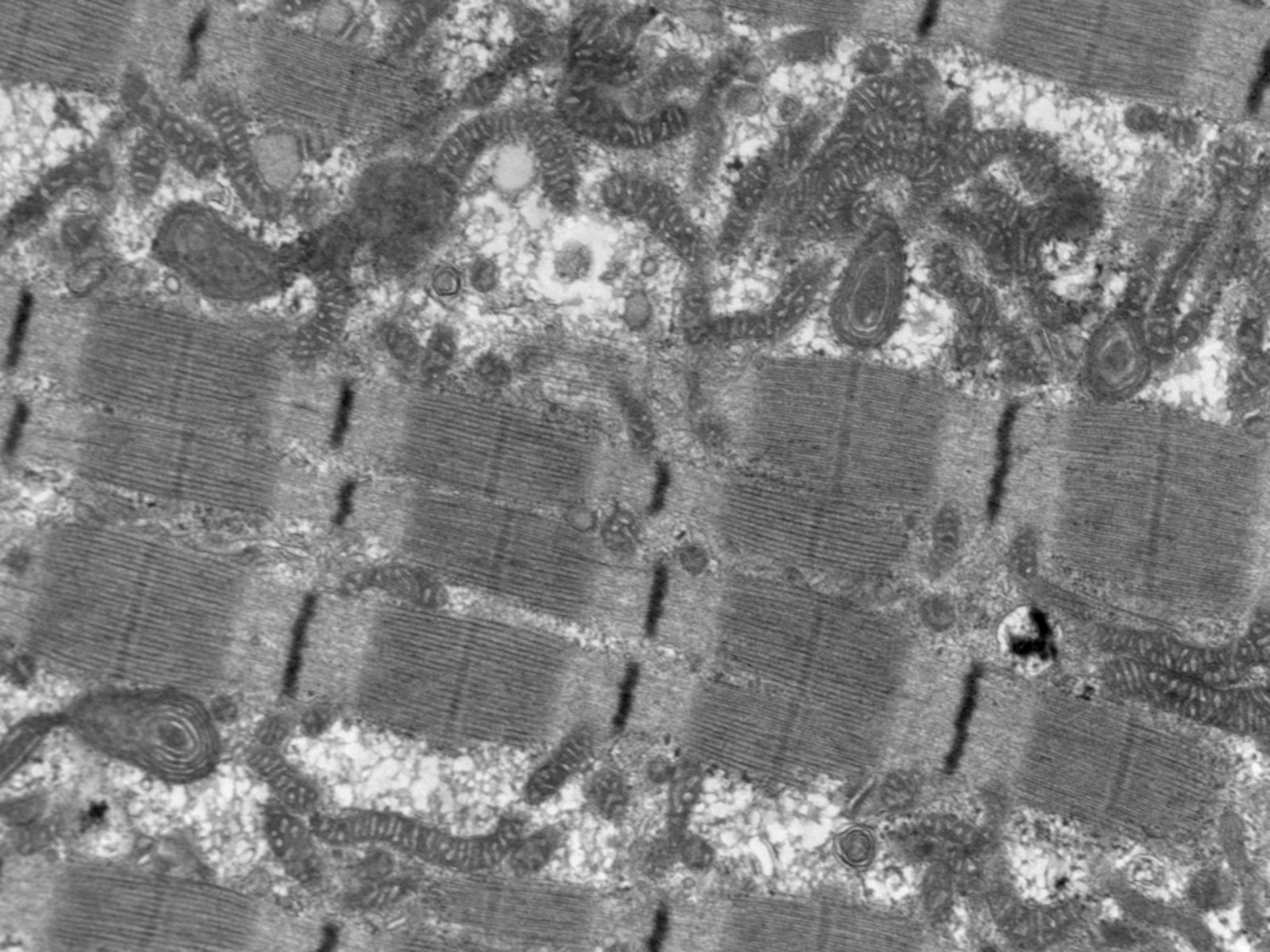


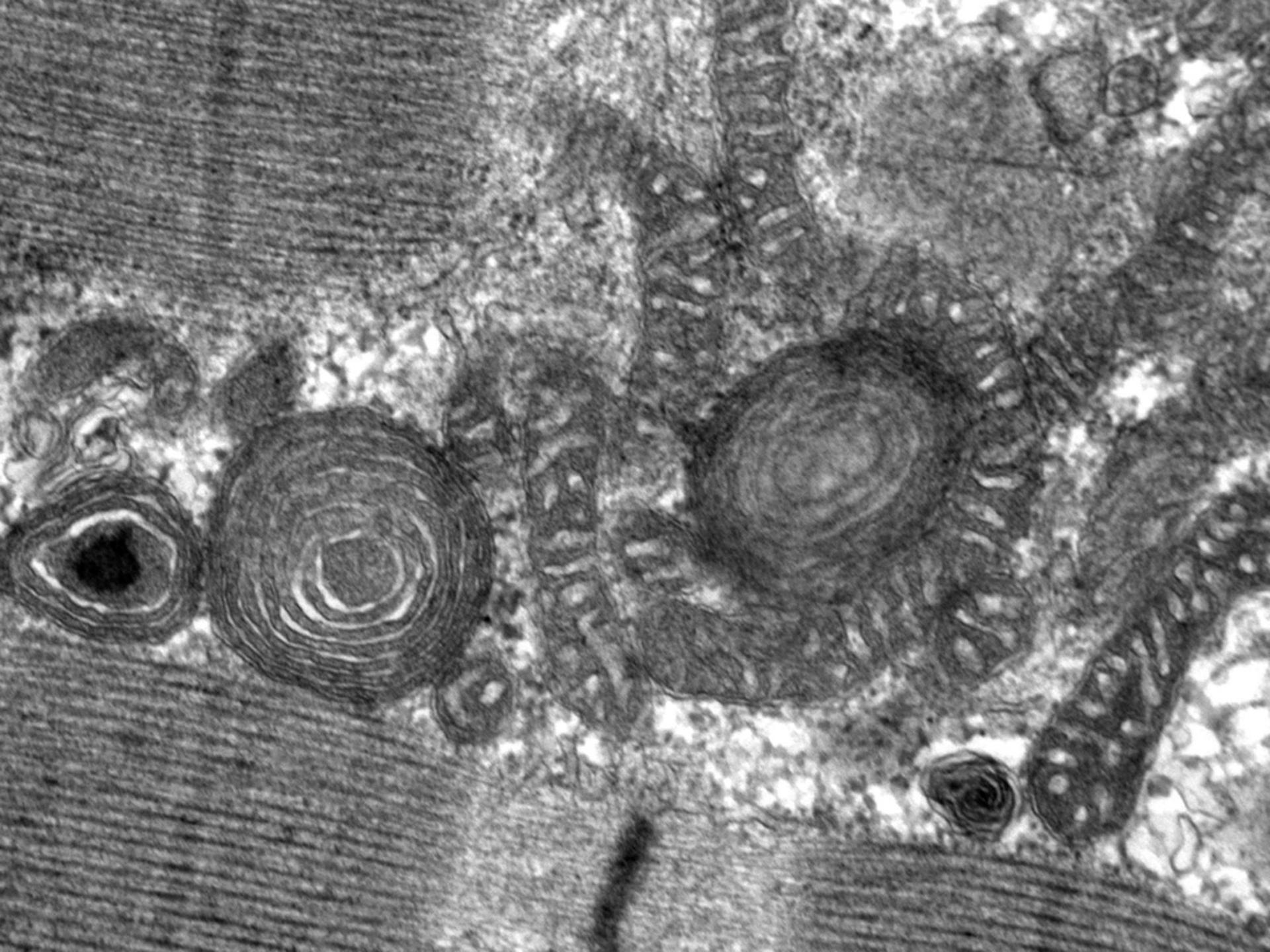
cytochrome C oxidase (COX)

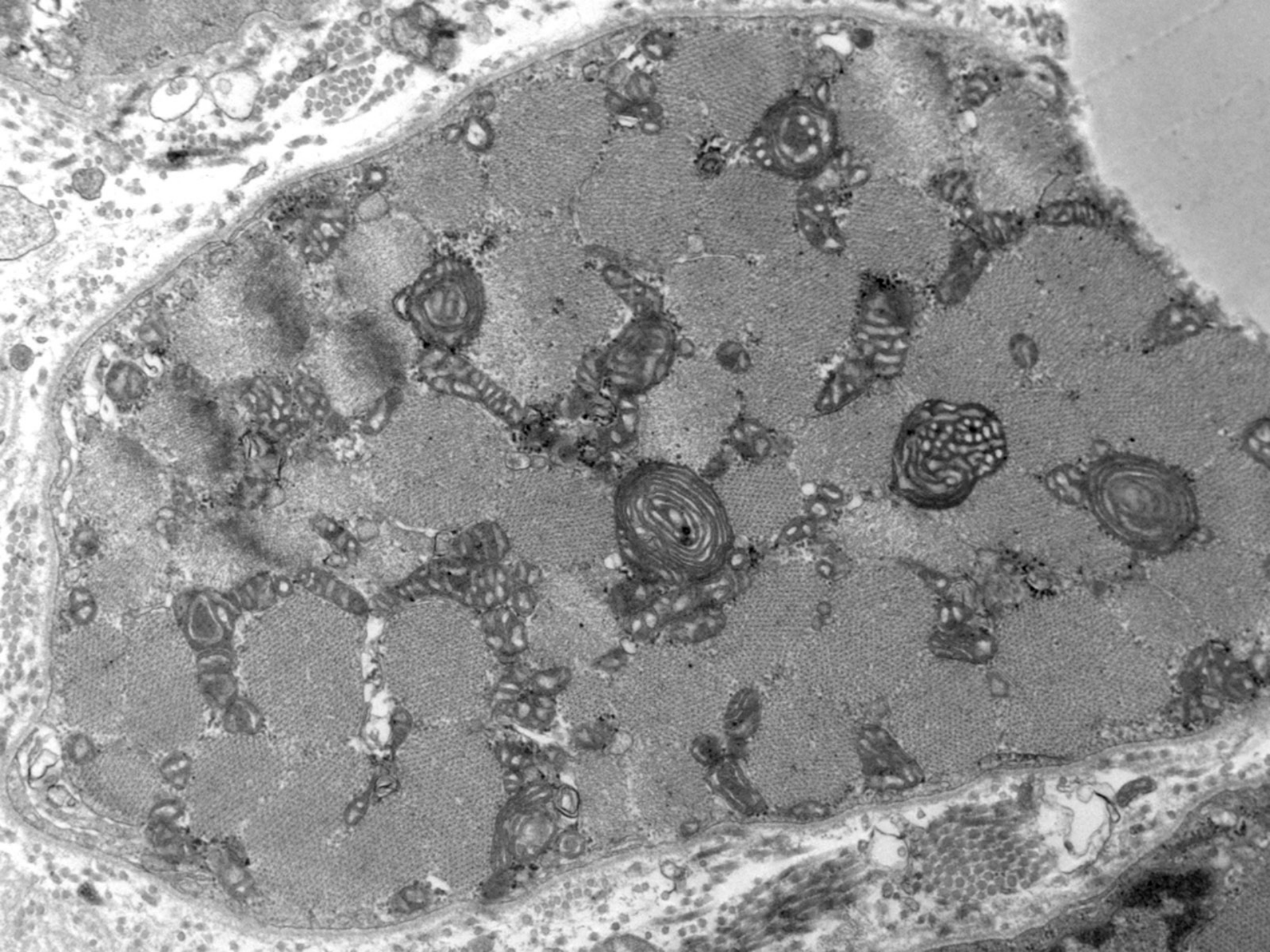


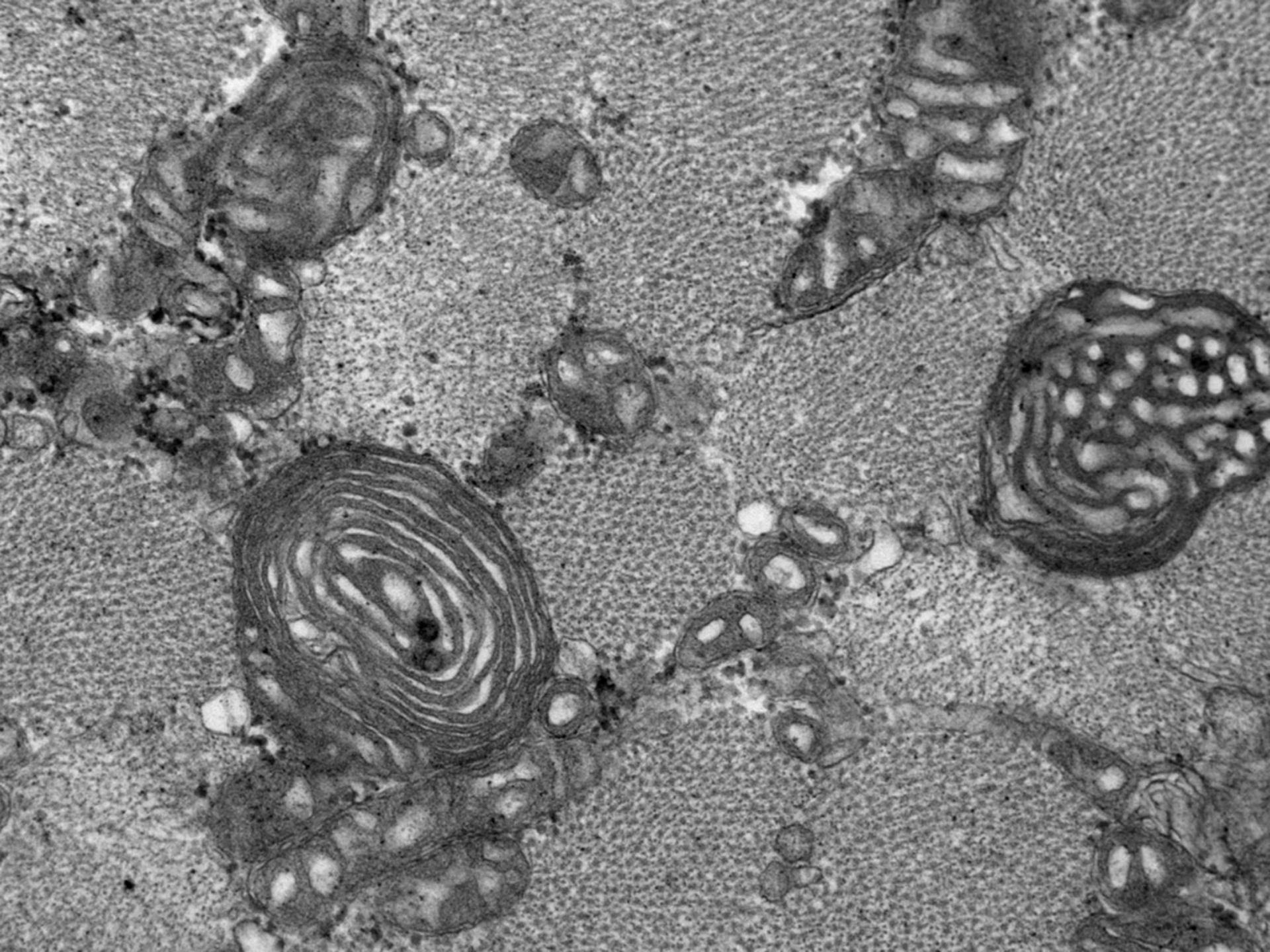
COX-SDH











Muscle Biopsy Diagnosis

- Mitochondrial myopathy

Additional Testing

- Next generation sequencing identified compound heterozygous variants in *thymidine kinase 2 (TK2)*, a known cause of mtDNA depletion syndrome.
 - c.329A>G, p.Gln110Arg
 - c.704T>C, p.Ile235Thr
 - Each parent is a carrier of one variant.
 - Each amino acid is highly conserved.
 - *In silico* analysis with SIFT: each variant deleterious.
 - Neither variant was reported in ExAC database.
 - No other pathologic gene variants were detected.
- Mitochondrial DNA depletion was confirmed by qPCR on frozen muscle – only 10% of control.

Final Diagnosis

- *Thymidine Kinase 2 (TK2)* mitochondrial DNA depletion syndrome, myopathic type

Mitochondrial DNA Depletion Syndromes

- At least 18 genes
- Rare: ~100 (or fewer) cases per gene
- Phenotypes: hepatocerebral, encephalomyopathic, cardiomyopathic, neurogastrointestinal, and myopathic
 - Increasing overlap observed among the various phenotypes as more patients are diagnosed
- Frequently fatal in early childhood; milder presentations also occur
- Treatment: supportive care

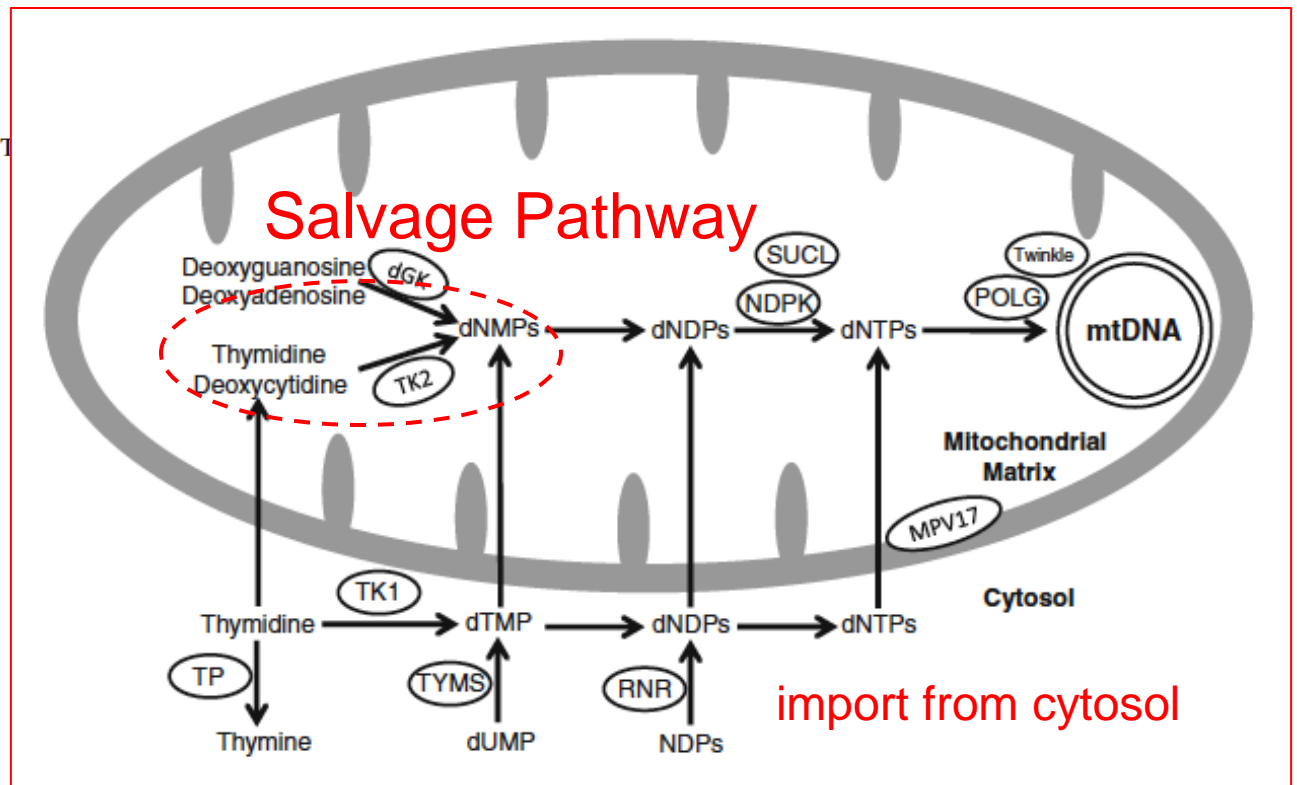
Basis for Mitochondrial DNA Depletion Syndromes

- Most mitochondrial proteins are encoded by nuclear DNA.
- Mitochondria also carry out their own DNA replication and transcription for protein synthesis.
- In order to support mtDNA synthesis, the mitochondrial nucleoside pool is maintained by two methods.
 - import from the cytosol (S-phase; replicating cells)
 - **salvage pathway within mitochondria** (continuously; non-replicating cells)

Mitochondrial DNA Depletion Syndromes: Review and Updates of Genetic Basis, Manifestations, and Therapeutic Options

Ayman W. El-Hattab • Fernando Scaglia

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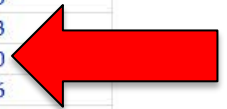
El-Hattab and Scaglia,
Neurotherapeutics 10:186-
198, 2013

OMIM

Mitochondrial DNA depletion syndrome - PS603041 - 18 Entries

View corresponding clinical
synopses as a table

Location ▲	Phenotype ⇅	Inheritance	Phenotype mapping key ⇅	Phenotype MIM number ⇅	Gene/Locus ⇅	Gene/Locus MIM number ⇅
2p23.3	Mitochondrial DNA depletion syndrome 6 (hepatocerebral type)	AR	3	256810	MPV17	137960
2p13.1	Mitochondrial DNA depletion syndrome 3 (hepatocerebral type)	AR	3	251880	DGUOK	601465
2p11.2	Mitochondrial DNA depletion syndrome 9 (encephalomyopathic type with methylmalonic aciduria)	AR	3	245400	SUCLG1	611224
3q29	?Mitochondrial DNA depletion syndrome 14 (encephalocardiomyopathic type)		3	616896	OPA1	605290
4q35.1	Mitochondrial DNA depletion syndrome 12A (cardiomyopathic type) AD	AD	3	617184	SLC25A4	103220
4q35.1	Mitochondrial DNA depletion syndrome 12B (cardiomyopathic type) AR	AR	3	615418	SLC25A4	103220
6q16.1-q16.2	Mitochondrial DNA depletion syndrome 13 (encephalomyopathic type)	AR	3	615471	FBXL4	605654
7q34	Sengers syndrome	AR	3	212350	AGK	610345
8q22.3	Mitochondrial DNA depletion syndrome 8B (MNGIE type)	AR	3	612075	RRM2B	604712
8q22.3	Mitochondrial DNA depletion syndrome 8A (encephalomyopathic type with renal tubulopathy)	AR	3	612075	RRM2B	604712
10q21.1	?Mitochondrial DNA depletion syndrome 15 (hepatocerebral type)	AR	3	617156	TFAM	600438
10q24.31	Mitochondrial DNA depletion syndrome 7 (hepatocerebral type)	AR	3	271245	TWNK	606075
13q14.2	Mitochondrial DNA depletion syndrome 5 (encephalomyopathic with or without methylmalonic aciduria)	AR	3	612073	SUCLA2	603921
15q26.1	Mitochondrial DNA depletion syndrome 4B (MNGIE type)	AR	3	613662	POLG	174763
15q26.1	Mitochondrial DNA depletion syndrome 4A (Alpers type)	AR	3	203700	POLG	174763
16q21	Mitochondrial DNA depletion syndrome 2 (myopathic type)	AR	3	609560	TK2	188250
20p11.23	Mitochondrial DNA depletion syndrome 11	AR	3	615084	MGME1	615076
22q13.33	Mitochondrial DNA depletion syndrome 1 (MNGIE type)	AR	3	603041	TYMP	131222



<http://omim.org/phenotypicSeries/PS603041>

INHERITANCE

- Autosomal recessive

HEAD & NECK

Face

- Facial diplegia

RESPIRATORY

- Respiratory insufficiency due to muscle weakness

MUSCLE, SOFT TISSUES

- Hypotonia
- Muscle weakness, proximal
- Gowers sign
- Muscle atrophy, diffuse
- Limb muscle weakness
- Delayed motor skills
- Inability to walk
- Loss of ability to walk in early childhood
- Myopathic changes seen on EMG
- Ragged red fibers seen on muscle biopsy
- Skeletal muscle tissue shows 14 to 45% depletion of mitochondrial DNA (mtDNA)
- Skeletal muscle may show less severe mtDNA deletion
- Decreased activities of mitochondrial-encoded respiratory chain complexes

METABOLIC FEATURES

- Lactic acidosis

LABORATORY ABNORMALITIES

- Increased serum creatine kinase
- Aminoaciduria

MISCELLANEOUS

- Onset usually by age 2 years
- Later onset has been reported
- Variable severity
- Progressive disorder

MOLECULAR BASIS

- Caused by mutation in the nuclear-encoded mitochondrial thymidine kinase gene (TK2, 188250.0001)

**TK2, mtDNA
depletion syndrome 2,
myopathic type;
clinical synopsis**

<http://omim.org/entry/609560>

References

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