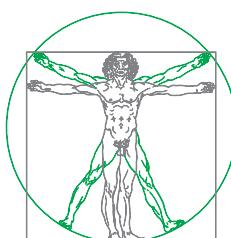
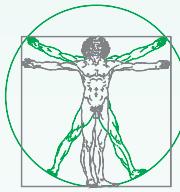


# Relazione Tecnica



**AMES**  
Group

GENETICA MEDICA • MICROBIOLOGIA • PATOLOGIA CLINICA



## TEST DI SCREENING PRENATALE NON INVASIVO DI MALATTIE GENETICHE ASSOCIATO ALL'ANALISI DELLO STATO DI PORTATORE DELLA COPPIA

Il Vera Omnia Complete rappresenta un'evoluzione del Vera Omnia in quanto permette l'analisi di molte più patologie finora non rilevabili con altre modalità di indagine prenatale non invasiva.

Il Vera Omnia Complete, si distingue da tutti gli altri test fino ad oggi proposti, in quanto si avvale dell'utilizzo di più tecnologie di biologia molecolare quali il Sequenziamento massivo parallelo (NGS), che riesce ad analizzare mutazioni in oltre 850 geni associati a più di 500 patologie, e altre specifiche tecniche, MLPA e TP-PCR, che permettono lo studio di patologie ad elevata incidenza, con eziologia complessa quali la Sindrome dell'X-Fragile, l'Atrofia Muscolo Spinale e la Distrofia Muscolare di Duchenne/Becker.

Pertanto, il Vera Omnia Complete permette di rilevare patologie *de novo* sul DNA fetale, causate da mutazioni non ereditate dai genitori e, contemporaneamente, permette un'accurata analisi dello stato di portatore della coppia.

### CHI PUÒ EFFETTUTARE IL TEST E COME FUNZIONA

Il test può essere eseguito:

**da tutte le donne a partire dalla 10a settimana di gravidanza;**

**gravidanze singole o gemellari;**

**concepimento naturale o con tecniche di procreazione medicalmente assistita (omologhe o eterologhe).**

La diagnosi prenatale delle malattie monogeniche e delle aneuploidie si esegue tradizionalmente su campioni fetali prelevati nel I-II trimestre di gravidanza attraverso procedure di prelievo invasive (DPI), quali la villocentesi e l'amniocentesi, associate ad un rischio di perdita fetale stimato intorno allo 0,4-1%. Da alcuni decenni, sono state portate avanti diverse linee di ricerca finalizzate allo sviluppo di procedure non invasive, con l'intento di ridurre i rischi per il feto e di anticipare i tempi della diagnosi prenatale.

Sin dalle prime settimane di gravidanza è possibile rilevare nel circolo ematico materno la presenza di cellule fetalì intatte e di DNA libero di origine fetale (cffDNA, cell-free fetal DNA) e questa fonte di materiale genetico fetale può essere utilizzata per la diagnosi prenatale non invasiva (NIPD, Non Invasive Prenatal Diagnosis o NIPT Non Invasive Prenatal Testing). Tale DNA è rilevabile a partire dalla 5a settimana di gestazione; la sua concentrazione aumenta nelle settimane successive e scompare subito dopo il parto. La quantità di cffDNA dalla 10a settimana di gestazione è sufficiente per garantire l'elevata specificità e sensibilità del test.

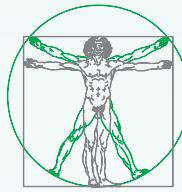
### LE MALATTIE INVESTIGATE

Il Vera **OMNIA® COMPLETE** permette di individuare mutazioni genetiche responsabili di oltre 500 patologie a trasmissione autosomica recessiva ad alta e bassa incidenza e patologie a trasmissione autosomica dominante e *de novo*.

Le patologie a trasmissione autosomica recessiva ad alta incidenza analizzate sono:

- sul DNA fetale e sul DNA della coppia:

- **Fibrosi Cistica, Anemia Falciforme, Beta Talassemia, Sordità Ereditaria (sia di tipo 1A che 1B) e Fenilchetonuria (Tabella 1) .**



Malattie ad elevata incidenza rilevate con Vera Omnia® Complete

CENE

<ul style="list-style-type: none"> <li>■ Fibrosi Cistica</li> <li>■ Sordità ereditaria tipo 1A</li> <li>■ Sordità ereditaria tipo 1B</li> <li>■ Beta Talassemia</li> <li>■ Anemia falciforme</li> <li>■ Fenilchetonuria</li> </ul>	CFTR CX26 (GJB2) CX30 (GJB6) HBB HBB PAH
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Tabella 1. Lista dei geni indagati dal test VERA OMNIA® COMPLETE associati alle patologie ad elevata incidenza.

- Solo sul DNA della coppia per lo studio del portatore:

• **Sindrome dell'X-Fragile, Atrofia Muscolo Spinale e Distrofia Muscolare di Duchenne/Becker (Tabella 2).**

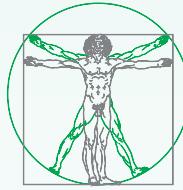
Malattie ad elevata incidenza rilevate con Vera Omnia® Complete	GENE
	FMR1
	SMN1
	DMD/BMD

Tabella 2. Lista dei geni indagati dal test VERA OMNIA® COMPLETE associati alle patologie ad elevata incidenza per cui viene eseguito lo studio del portatore per la coppia.

Il **VERA OMNIA® COMPLETE** è, inoltre, in grado di rilevare patologie genetiche a trasmissione ereditaria, autosomica recessiva o autosomica dominante a più **bassa incidenza**, e **de novo**, non trasmesse cioè dai genitori (Tabella 3).

Queste patologie spesso non sono rilevabili dalle ecografie del primo trimestre (alcune sono rilevabili ecograficamente solo al secondo o al terzo trimestre). Inoltre, a differenza dei NIPT tradizionali, il **VERA OMNIA® COMPLETE** identifica malattie genetiche indipendenti dall'età materna.

In particolare questo test è in grado di identificare alcune patologie associate ad età paterna avanzata (es. Acondroplasia, sindrome di Pfeiffer, di Apert, di Crouzon, Osteogenesi Imperfetta, etc.), causate da errori genetici che insorgono durante il processo di spermatogenesi, fornendo alle coppie meno giovani la possibilità di utilizzare un test di screening più completo.



Malattie a bassa incidenza e/o ad insorgenza *DE NOVO*

GENE

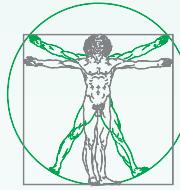
Malattie Sindromiche

Sindrome di Gaucher	CBA
Sindrome Dubowitz	LIG4-NSUN2
Sindrome di Richner-Hanhart	TAT
Sindrome di Sjögren-Larsson	ALDH3A2
Sindrome di Costello	HRAS
Sindrome di Tay-Sachs	HEXA
Sindrome di PKAN	PANK2
Sindrome della Tripla-H	SLC25A15
Sindrome di Coffin-Lowry	RPS6KA3
Sindrome di Alagille	JAG1
Sindrome di CHARGE	CHD7
Sindrome di Cornelia de Lange tipo 5	HDAC8
Sindrome di Cornelia de Lange tipo 1	NIPBL
Sindrome di Rett	MECP2
Sindrome di Sotos tipo 1	NSD1
Sindrome di Bohring - Opitz	ASXL1

Sindrome di Noonan

GENE

Sindrome Cardio facio cutanea (CFS) tipo 1	BRAF
Sindrome di Noonan - simile con o senza leucemia mielomonocitica giovanile	CBL
Sindrome di Noonan /cancers	KRAS
Sindrome Cardio facio cutanea (CFS) tipo e 3	MAP2K1
Sindrome Cardio facio cutanea (CFS) tipo 4	MAP2K2
Sindrome di Noonan 6/cancers	NRAS
Sindrome di Noonan 1/Sindrome di LEOPARD/cancers	PTPN11
Leucemia mielomonocitica giovanile (JMML)	PTPN11
Sindrome di Noonan 5/Sindrome di LEOPARD 2	RAF1
Sindrome di Noonan 8	RIT1
Sindrome Noonan - simile con capelli caduchi in fase anagen	SHOC2



Sindrome di Noonan 4	SOS1
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**Patologie scheletriche** GENE

Acondrogenosi tipo 2	COL2A1
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Acondroplasia	
Sindrome CATSHL	
Sindrome di Crouzon con acanthosis nigricans	
Ipocondroplasia	FGFR3
Sindrome di Muenke	
Displasia tanatafora, tipo I	
Displasia tanatafora, tipo II	

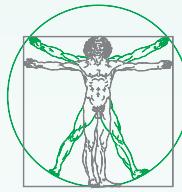
Sindrome di Ehlers - Danlos, classica	COL1A1
Sindrome di Ehlers - Danlos, tipo VIIA	

Sindrome di Schinzel - GiedionS	SETBP1
Oloprosencefalia	SIX3
Niemann-Pick	SMPD1

**Craniosinostosi** GENE

Sindrome di Antley - Bixler senza anomalie genitali o disordini della steroidognesi	
Sindrome di Apert	
Sindrome di Crouzon	FGFR2
Sindromedi Jackson - Weiss	
Sindrome di Pfeiffer, tipo 1	
Sindrome di Pfeiffer, tipo 2	
Sindrome di Pfeiffer, tipo 3	

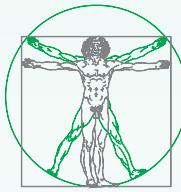
Osteogenesi imperfetta, tipo I	
Osteogenesi imperfetta, tipo II	
Osteogenesi imperfetta, tipo III	
Sindrome di Ehlers - Danlos, forma cardiaco - valvolare	COL1A2
Sindrome di Ehlers - Danlos, tipo VIIIB	
Osteogenesi imperfetta, tipo II	
Osteogenesi imperfetta, tipo III	
Osteogenesi imperfetta, tipo IV	



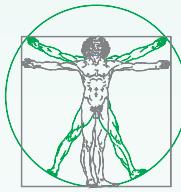
**Tabella 3. Lista dei geni indagati dal VERA OMNIA<sup>®</sup> COMPLETE e delle patologie associate a carattere autosomico recessivo o dominante e ad insorgenza *de novo*.**

Il VERA OMNIA<sup>®</sup> COMPLETE infine, consente un accurato studio dello stato del portatore per la coppia per circa 850 geni associati ad oltre 500 patologie (**tavella 4**).

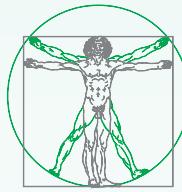
Gene	Malattia/e
AAAS	Achalasia-addisonianism-alacrimia syndrome
ABCA12	Ichthyosis, autosomal recessive 4B (harlequin)
ABCA12	Ichthyosis, congenital, autosomal recessive 4A
ABCA3	Surfactant metabolism dysfunction, pulmonary , 3
ABCA4	Cone-rod dystrophy 3
ABCB11	Cholestasis, benign recurrent intrahepatic, 2
ABCB11	Cholestasis, progressive familial intrahepatic 2
ABCB4	Cholestasis, intrahepatic, of pregnancy , 3
ABCB4	Cholestasis, progressive familial intrahepatic 3
ABCB4	Gallbladder disease 1
ABCC8	Diabetes mellitus, noninsulin-dependent
ABCC8	Diabetes mellitus, permanent neonatal
ABCC8	Diabetes mellitus, transient neonatal 2
ABCC8	Hyperinsulinemic hypoglycemia, familial, 1
ABCC8	Hypoglycemia of infancy , leucine-sensitive
ABCD1	Adrenoleukodystrophy
ABCD4	Methylmalonic aciduria and homocystinuria, cblJ type
ACAD9	Acy l-CoA dehydrogenase 9 deficiency
ACADM	Medium chain acyl-CoA DH deficiency
ACADS	Acy l-CoA dehydrogenase, short-chain, deficiency of
ACADSB	2-methylbutyrylglyceruria
ACADVL	Long chain acyl-CoA dehydrogenase deficiency
ACAT1	Ketoacidosis due to beta-ketothiolase deficiency
ACOX1	Peroxisomal acyl-CoA oxidase deficiency
ACSF3	Combined malonic and methylmalonic aciduria
ACSF4	Mental retardation, X-linked 63



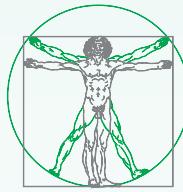
Gene	Malattia/e
ADA	adenosine deaminase deficiency
ADAMTS13	Thrombotic thrombocytopenic purpura, familial
ADAMTSL2	Glycogen storage disease 1
ADCK3	Autosomal recessive ataxia ubiquinone deficiency
ADK	Hypomethioninemia due to adenosine kinase deficiency
AFF2	Mental retardation, X-linked, FRADE type
AGA	Aspartylglucosaminuria
AGL	Glycogen storage disease
AGPS	Rhizomelic chondrodyplasia punctata type 3
AGXT	Hypoxaluria, primary, type 1
AHCY	Hypomethioninemia with deficiency of S-adenosylhomocysteine hydrolase
AHI1	Joubert syndrome with ocular defect
AIPL1	Cone-rod dystrophy, 604393 (Congenital Leber Amaurosis, 4)
AIRE	Autoimmune polyendocrinopathy syndrome, type I
ALDH3A2	Sjogren-Larsson syndrome
ALDH4A1	Hypoprolinemia, type II
ALDH5A1	4-hydroxybutyric aciduria
ALDH7A1	Epilepsy, pyridoxine-dependent
ALDOB	Hereditary fructose intolerance
ALG1	Congenital disorder of glycosylation type Ia
ALG12	Congenital disorder of glycosylation, type Ig
ALG2	Congenital disorder of glycosylation, type Ii
ALG3	Congenital disorder of glycosylation, type Id
ALG6	Congenital disorder of glycosylation type Ic
ALG8	Congenital disorder of glycosylation, type Ih
ALG9	Congenital disorder of glycosylation, type II
ALMS1	Alström syndrome
ALPL	Childhood-onset hypophosphatasia
ALPL	Infantile hypophosphatasia
ALS2	Amyotrophic lateral sclerosis 2, juvenile



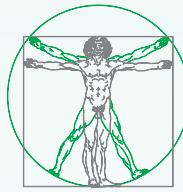
Gene	Malattia/e
ALS2	Primary lateral sclerosis, juvenile
ALS2	Spastic paraparesis, infantile onset ascending
AMACR	Alpha-methylacyl-CoA Racemase deficiency
AMACR	Congenital bile acid synthesis defect type 4
AMT	Glycine encephalopathy
ANTXR2	Hyaline fibromatosis syndrome
AP1S2	Mental retardation, X-linked syndrome 5
AP3B1	Hermansky-Pudlak syndrome 2
APTX	Ataxia - oculomotor apraxia type 1
AR	Complete androgen insensitivity syndrome
AR	Kennedy disease
AR	Partial androgen insensitivity syndrome
AR	DGUOK deficiency 3
ARG1	Argininemia
ARHGEF6	Mental retardation, X-linked 46
ARHGEF9	Epileptic encephalopathy, early infantile, 8
ARL13B	Joubert syndrome 8
ARSA	Metachromatic leukodystrophy
ARSB	Mucopolysaccharidosis type 6
ARSE	Brachytelephalangic chondrodyplasia punctata
ARSF	Chondrodyplasia punctata, X-linked recessive
ARX	Early infantile epileptic encephalopathy
ASL	Argininosuccinic aciduria
ASPA	Canavan disease
ASS1	Citrullinemia type I
ATM	Ataxia-telangiectasia
ATP6V0A2	Cutis laxa, autosomal recessive, type IIA
ATP6V0A2	Wrinkly skin syndrome
ATP7A	Menkes disease
ATP7A	Occipital horn syndrome



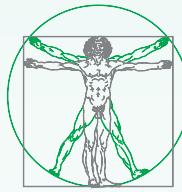
Gene	Malattia/e
ATP7A	X-linked distal spinal muscular atrophy
ATP7B	Wilson disease
ATP8B1	Cholestasis, benign recurrent intrahepatic
ATP8B1	Cholestasis, intrahepatic, of pregnancy , 1
ATP8B1	Cholestasis, progressive familial intrahepatic 1
ATR	Seckel syndrome
ATRX	Alpha-thalassemia myelodysplasia syndrome
ATRX	Alpha-thalassemia/mental retardation syndrome
ATRX	Carpenter-Waziri syndrome
ATRX	Chudley-Lowry Syndrome X-linked
ATRX	Mental retardation-hypotonic facies syndrome
ATRX	Smith-Fineman-Myers Syndrome X linked
AUH	3-methylglutaconic aciduria type 1
B4GALT1	Congenital disorder of glycosylation type 2d
BBS1	Bardet-Biedl syndrome 1
BBS10	Bardet-Biedl syndrome 10
BBS2	Bardet-Biedl syndrome 2
BCKDHA	Maple syrup urine disease (gene BCKDHA)
BCKDHB	Maple syrup urine disease (gene BCKDHB)
BCOR	Microphthalmia, syndromic 2
BCS1L	Björnstad syndrome
BCS1L	GRACILE syndrome
BCS1L	Isolated CoQ-cytochrome C reductase deficiency
BCS1L	Leigh syndrome
BLM	Bloom syndrome
BRWD3	Mental retardation, X-linked 93
BSND	Bartter syndrome, type 4a
BTD	Biotinidase deficiency
BTK	Isolated growth hormone deficiency type III
BTK	X-linked agammaglobulinemia



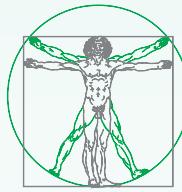
Gene	Malattia/e
C10orf2	Infantile onset spinocerebellar ataxia
CA2	Osteopetrosis with renal tubular acidosis
CAPN3	Muscular dystrophy, limb-girdle, type 2A
CASK	FG syndrome 4
CASK	Mental retardation, microcephaly
CASK	Mental retardation, with or without dyskinesia
CASP10	Autoimmune lymphoproliferative syndrome, II
CASQ2	Ventricular tachycardia, catecholaminergic polymorphic, 2
CBS	Classical homocystinuria
CD19	Immunodeficiency, common variable, 3
CD3D	Immunodeficiency 19
CD3E	Immunodeficiency 18, SCID variant
CD3G	Immunodeficiency 17, CD3 gamma deficient
CD40LG	X-linked hyper-IgM syndrome
CDH23	AR nonsyndromic sensorineural deafness DFNB12
CDKL5	Epileptic encephalopathy, early infantile, 2
CEP290	Joubert syndrome with oculorenal defect 5
CEP290	Senior-Loken syndrome
CEP290	Bardet-Biedl syndrome 14; Joubert syndrome 5; Meckel syndrome 4; Senior-Loken syndrome 6
CERKL	Retinitis pigmentosa 26
CFP	Properdin deficiency, X-linked
CFTR	Cystic fibrosis; mucoviscidosis
CHRNA1	Multiple pterygium syndrome, lethal type
CHRNA1	Myasthenic syndrome, fast-channel congenital
CHRNA1	Myasthenic syndrome, slow-channel congenital
CHRND	Multiple pterygium syndrome, lethal type
CHRND	Myasthenic syndrome, fast-channel congenital
CHRND	Myasthenic syndrome, slow-channel congenital
CHRNG	Escobar syndrome
CHRNG	Multiple pterygium syndrome, lethal type



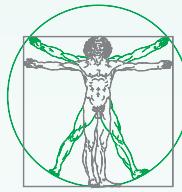
Gene	Malattia/e
CHRNG	Myasthenia gravis, neonatal transient
CHST6	Macular corneal dystrophy
CLCN1	Myotonia congenita, dominant; recessive
CLCN5	Dent disease
CLCN5	Hypophosphatemic rickets
CLCN5	Nephrolithiasis, type I
CLCN5	Proteinuria, low molecular weight.
CLCN7	Autosomal recessive malignant osteopetrosis 4
CLDN1	Ichthyosis, alopecia, and sclerosing cholangitis
CLDN19	Familial hypomagnesemia - hypercalcemia
CLN3	Juvenile neuronal ceroid lipofuscinosis 3
CLN5	Late infantile neuronal ceroid lipofuscinosis 5
CLN6	Adult neuronal ceroid lipofuscinosis 4A
CLN6	Late infantile neuronal ceroid lipofuscinosis 6
CLN8	Late infantile neuronal ceroid lipofuscinosis 8
CLN8	Progressive epilepsy, Finnish type
CLRN1	Usher syndrome type 3A
CNGA1	Retinitis pigmentosa 49
CNGB1	Retinitis pigmentosa 45
CNGB3	Achromatopsia-3
COG1	Congenital disorder of glycosylation, type IIg
COG7	Congenital disorder of glycosylation, type IIe
COG8	Congenital disorder of glycosylation, type IIh
COL17A1	Epidermolysis bullosa, non-Herlitz type
COL1A1	Caffey disease
COL1A1	Ehlers-Danlos syndrome, type I
COL1A1	Ehlers-Danlos syndrome, type VIIA
COL1A1	Osteogenesis imperfecta, type I
COL1A1	Osteogenesis imperfecta, type II
COL1A1	Osteogenesis imperfecta, type III



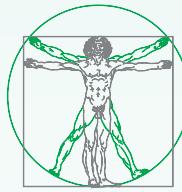
Gene	Malattia/e
COL1A1	Osteogenesis imperfecta, type IV
COL1A2	Ehlers-Danlos syndrome, cardiac valvular type
COL4A3	Alport syndrome autosomal recessive
COL4A4	Alport syndrome autosomal recessive
COL4A5	Alport syndrome
COL6A1	Bethlem myopathy
COL6A1	Ullrich congenital muscular dystrophy
COL6A2	Bethlem myopathy
COL6A2	Ullrich congenital muscular dystrophy
COL6A3	Bethlem myopathy
COL6A3	Ullrich congenital muscular dystrophy
COL7A1	Dystrophic epidermolysis bullosa pruriginosa
COL7A1	Severe dystrophic epidermolysis bullosa, AR
COQ2	Leigh syndrome with nephrotic syndrome
COQ9	Coenzyme Q10 deficiency, primary, 5
COX10	Leigh syndrome mitochondrial COX4 deficiency
COX10	Mitochondrial complex IV deficiency
COX15	Cardioencephalomyopathy cyt. c oxidase def. 2
COX15	Leigh syndrome cyt. c oxidase deficiency
COX6B1	Mitochondrial complex IV deficiency
CPS1	Carbamoylphosphate synthetase deficiency
CPT1A	Carnitine palmitoyl transferase 1A deficiency
CPT2	Carnitine palmitoyl transferase II def. infantile
CPT2	Carnitine palmitoyl transferase II def. Neonatal
CRB1	Leber congenital amaurosis 8
CRLF1	Cold-induced sweating syndrome
CRTAP	Osteogenesis imperfecta type VII
CSTB	Unverricht-Lundborg disease
CTH	Cystathioninuria
CTNS	Cystinosis



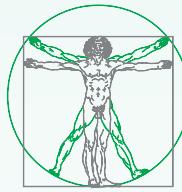
Gene	Malattia/e
CTSD	Adult neuronal ceroid lipofuscinosis 10
CTSK	Pycnody sostosis
CUL4B	Mental retardation, X-linked, syndromic 15
CYP11A1	CAH with 46XY sex reversal, partial or complete
CYP11B1	CAH due to 11-beta-hydroxylase deficiency
CYP11B1	Aldosteronism, glucocorticoid-remediable
CYP17A1	17-alpha-hydroxylase/17,20-lase deficiency
CYP21A2	CAH due to 21-hydroxylase deficiency
CYP27A1	Cerebrotendinous xanthomatosis
CYP27B1	Vitamin D-dependent rickets, type I
DBT	Classic maple syrup urine disease
DCLRE1C	Omenn syndrome
DCLRE1C	Combined immunodeficiency DCLRE1C deficiency
DCX	Lissencephaly, X-linked
DCX	Subcortical laminar heteroplasia, X-linked
DDB2	Xeroderma pigmentosum complementation
DDC	Aromatic L-amino acid decarboxylase deficiency
DGUOK	Mitochondrial DNA depletion syndrome
DHCR24	Desmosterolosis
DHCR7	Smith-Lemli-Optiz syndrome
DHDDS	Retinitis pigmentosa 59
DKC1	Dyskeratosis congenita X-linked
DKC1	Hoyer-Hreidarsson syndrome
DLD	Leigh syndrome
DLD	Maple syrup urine disease
DLG3	Mental retardation, X-linked 90
DLL3	Spondylocostal dysostosis 1, AR
DMD	Becker muscular dystrophy
DMD	Duchenne muscular dystrophy
DMP1	Hypophosphatemic rickets 1 AR



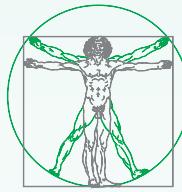
Gene	Malattia/e
DNAH5	Primary ciliary dyskinesia
DNAJC19	Dilated cardiomyopathy with ataxia
DNMT3B	Immunodeficiency anomalies syndrome
DOCK8	Hyper-IgE recurrent infection syndrome, AR
DOK7	Fetal akinesia deformation sequence
DOK7	Myasthenia, limb-girdle, familial
DOLK	Congenital disorder of glycosylation, type Im
DPAGT1	Congenital disorder of glycosylation type 1j
DPM1	Congenital disorder of glycosylation type 1e
DPYD	Dihydropyrimidine dehydrogenase deficiency
DSP	Lethal acantholytic epidermolysis bullosa
DUOX2	Thyroid dysmorphogenesis 6
DUOXA2	Thyroid dysmorphogenesis 5
DYNC2H1	Short-rib thoracic dysplasia 3
DYSF	limb-girdle muscular dystrophy type 2B
EDA	Ectodermal dysplasia 1, hypohidrotic, X-linked
EDA	Tooth agenesis, selective, X-linked 1
EDN3	Waardenburg-Shah syndrome 4B
EDNRB	ABCD syndrome
EDNRB	Waardenburg-Shah syndrome 4A
EFEMP2	Cutis laxa, autosomal recessive, type IB
EFNB1	Craniofrontonasal dysplasia
EGR2	Charcot-Marie-Tooth disease type 4E
EIF2AK3	Wolcott-Rallison syndrome
ENPP1	Hypophosphatemic rickets 2, AR
EPM2A	Epilepsy, progressive myoclonic 2A
ERBB3	Lethal congenital contractual syndrome 2
ERCC2	Cockayne syndrome, group D
ERCC3	Cockayne syndrome, group B
ERCC4	Cockayne syndrome group F



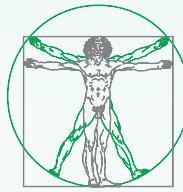
Gene	Malattia/e
ERCC5	Cockayne syndrome group G
ERCC6	Cockayne syndrome type B
ERCC6	COFS syndrome 1
ERCC8	Cockayne syndrome type A
ESCO2	Roberts syndrome
ETFA	Glutaric aciduria type 2 (gene ETFA)
ETFB	Glutaric aciduria type 2 (gene ETFB)
ETFDH	Glutaric aciduria type 2 (gene ETFDH)
ETHE1	Ethylmalonic encephalopathy
EVC	Ellis-van Creveld syndrome
EVC	Weyers acrodermatidystostosis
EVC2	Ellis-van Creveld syndrome
EYS	Retinitis pigmentosa 25
F11	Factor XI deficiency, autosomal dominant & recessive
F2	Dysprothrombinemia
F5	Factor V deficiency
F8	Hemophilia A
F9	Hemophilia B
FAH	Tyrosinemia type 1
FAM126A	Hypomelanization - congenital cataract
FAM20C	Lethal osteosclerotic bone dysplasia
FANCA	Fanconi anemia
FANCC	Fanconi anemia complementation group C
FAS	Autoimmune lymphoproliferative syndrome, type IA
FASLG	Autoimmune lymphoproliferative syndrome, type IB
FASTKD2	Mitochondrial complex IV deficiency
FBLN5	Cutis laxa, autosomal dominant 2
FBLN5	Cutis laxa, autosomal recessive, type IA
FBLN5	Macular degeneration, age-related, 3
FERMT3	Leukocyte adhesion deficiency, type III



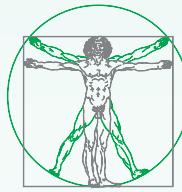
Gene	Malattia/e
FGA	Congenital fibrinogen deficiency (gene FGA)
FGD1	Aarskog-Scott syndrome
FGD1	Mental retardation, X-linked syndromic 16
FGD4	Fumaryl aciduria
FH	Charcot-Marie-Tooth disease type 4H
FKRP	Limb-girdle muscular dystrophy type 2I AR
FKRP	Congenital muscular dystrophy type 5B
FKRP	Muscle-eye-brain disease
FKTN	Limb-girdle muscular dystrophy type 2M, AR
FKTN	Congenital muscular dystrophy type 4B
FKTN	Fukuyama congenital muscular dystrophy
FMR1	Fragile X syndrome
FOLR1	Neurodegeneration folate transport deficiency
FOXG1	Fucosidosis
FOXN1	Rett syndrome, congenital variant
FOXP3	Severe T-cell immunodeficiency
FRAS1	Favism
FREM2	Immunodysregulation, X-linked
FTCD	Fraser syndrome (gene FRAS1)
FTSJ1	Krabbe disease
FUCA1	Fraser syndrome (gene FRAS2)
FXN	Glutamate formiminotransferase deficiency
G6PC	Mental retardation, X-linked 9
G6PC3	Friedreich ataxia with retained reflexes
G6PD	Glycogen storage disease type 1a
G6PD	Síndrome de Dursun
GAA	Hemolytic anemia due to G6PD deficiency
GALC	Glycogen storage disease acid maltase deficiency
GALE	Galactose epimerase deficiency
GALK1	Galactokinase deficiency with cataracts



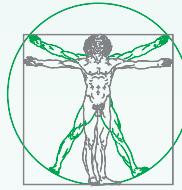
Gene	Malattia/e
GNRHR	Hyponadotropichyponadism
GNS	Mucopolysaccharidosis type IIID
GPC3	Simpson-Golabi-Behmel syndrome, type 1
GPR143	Nystagmus 6, congenital, X-linked
GPR98	Usher syndrome type 2C
GRIA3	Mental retardation, X-linked 94
GRIK2	Mental retardation, autosomal recessive, 6
GSS	Glutathione synthetase deficiency
GTF2H5	Trichothiodystrophy, complementation group A
GUCY2D	Histidinemia
GUSB	Leber congenital amaurosis
HADH	Mucopolysaccharidosis type 7
HADHA	3-hydroxyacyl-CoA dehydrogenase deficiency
HADHB	Mitochondrial trifunctional protein deficiency
HAL	Mitochondrial trifunctional protein deficiency
HAMP	Hemochromatosis type 2
HAX1	Neutropenia, severe congenital 3, AR
HBA1	Alkaptonuria
HBA2	Alpha-thalassemia
HBB	Thalassemias, alpha-
HBB	Beta-thalassemia
HESX1	Sickle cell anemia
HEXA	Combined pituitary hormone deficiencies
HEXB	Tay-Sachs disease
HFE2	Sandhoff disease
HGD	Hemochromatosis, type 2A
HGSNAT	Sanfilippo syndrome type C
HIBCH	3-hydroxyisobutyryl-CoA hydrolyase deficiency
HLCS	Holocarboxylase synthetase deficiency
HMGCL	3-hydroxy-3-methylglutaric aciduria



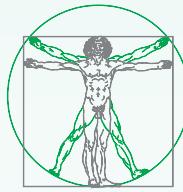
Gene	Malattia/e
HOGA1	Hyperoxaluria, primary , type III
HPD	Tyrosinemia type 3
HPRT1	Kelley -Seegmiller syndrome
HPRT1	Lesch-Nyhan syndrome
HSD11B2	Apparent mineralocorticoid excess
HSD17B10	17-beta-hydroxy steroid dehydrogenase deficiency
HSD17B3	Pseudohermaphroditism, male, with gynecomastia
HSD17B4	Bifunctional enzyme deficiency
HSD17B4	Perrault syndrome
HSD3B2	3-beta-hydroxy steroid dehydrogenase, deficiency
HSPG2	Schwartz-Jampel syndrome
HUWE1	Mental retardation, X-linked syndromic, Turner type
ICOS	Immunodeficiency , common variable, 1
IDH3B	Retinitis pigmentosa 46
IDS	Mucopolysaccharidosis type 2
IDUA	Mucopolysaccharidosis Ih
IDUA	Mucopolysaccharidosis Ih/s
IDUA	Mucopolysaccharidosis Is
IFNGR1	Immunodeficiency 27A, mycobacteriosis, AR
IFNGR2	Immunodeficiency 28, mycobacteriosis
IFT80	Jeune syndrome
IGHMBP2	Spinal muscular atrophy with respiratory distress
IKBKAP	Familial dysautonomia
IKBKG	Ectodermal dysplasia, hypohidrotic
IKBKG	Ectodermal, dysplasia, anhidrotic, lymphedema
IKBKG	Immunodeficiency 33
IKBKG	Incontinentia pigmenti, type II
IL12B	Immunodeficiency 29, mycobacteriosis
IL12RB1	Immunodeficiency 30
IL1RAPL1	Mental retardation, X-linked 21/34



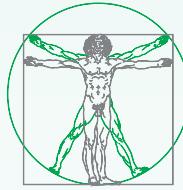
Gene	Malattia/e
IL1RN	Interleukin 1 receptor antagonist deficiency
IL2RG	T-B+ severe combined immunodeficiency
IL2RG	TB+ severe combined immunodeficiency X-link
INSR	Leprechaunism
INVS	Nephronophthisis 2, infantile
IQCB1	Senior-Loken syndrome 5
IQSEC2	Mental retardation, X-linked 1/78
ITGA6	Junctional epidermolysis bullosa - pyloric atresia
ITGB4	Junctional epidermolysis bullosa piloric atresia
ITGB4	Junctional epidermolysis bullosa, non-Herlitz
IVD	Isov aleric acidemia
IYD	Thyroid dyshormonogenesis 4
JAK3	T-B+ severe combined immunodeficiency JAK3
KCNJ1	Antenatal Bartter syndrome
KCNJ11	Hyperinsulinemic hypoglycemia, familial, Type 2
KDM5C	Mental retardation, syndromic, Claes-Jensen type
L1CAM	Corpus callosum hypoplasia syndrome
L1CAM	Masa syndrome
LAMA2	Congenital muscular dystrophy type 1A
LAMA3	Epidermolysis bullosa, Herlitz type (gene LAMA3)
LAMA3	Epidermolysis bullosa, non-Herlitz type
LAMB2	Nephrotic syndrome, type 5
LAMB2	Pierson syndrome
LAMB3	Epidermolysis bullosa, Herlitz type (gene LAMB3)
LAMB3	Epidermolysis bullosa, non-Herlitz type (LAMB3)
LAMC2	Epidermolysis bullosa, Herlitz type (LAMC2)
LAMC2	Epidermolysis bullosa, non-Herlitz type (LAMC2)
LARGE	Congenital muscular dystrophy type 1D
LARGE	Muscle-eye-brain disease
LBR	Greenberg dysplasia



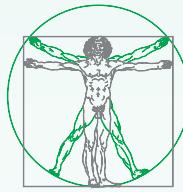
Gene	Malattia/e
LDLR	Hypercholesterolemia, familial
LDLRAP1	Hypercholesterolemia, familial, autosomal recessive
LEPRE1	Osteogenesis imperfecta type 8
LHCGR	Leydig cell adenoma, precocious puberty
LHCGR	Leydig cell hypoplasia hypogonadism
LHCGR	Leydig cell hypoplasia pseudohermaphroditism
LHCGR	Luteinizing hormone resistance, female
LHCGR	Precocious puberty, male
LHX3	Pituitary hormone deficiency spine abnormalities
LIFR	Stuve-Wiedemann syndrome
LIG4	Immunodeficiency sensitivity ionizing radiation
LIPA	Wolman disease (lysosomal acid lipase deficiency)
LMBRD1	Methylmalonic aciduria and homocystinuria, cblF type
LMNA	Charcot-Marie-Tooth disease axonal type 2B1
LMNA	Lethal restrictive dermatopathy
LMNA	Mandibuloacral dysplasia type A lipodystrophy
LRP2	Donnai-Barrow syndrome
LRPPRC	French-Canadian type Leigh syndrome
LYST	Chediak-Higashi syndrome
MAN2B1	Mannosidosis, alpha-, types I and II
MAT1A	Hypermethioninemia, persistent, autosomal dominant, due to methionine adenosyltransferase I/III deficiency
MBTPS2	Ichthyosis follicularis - alopecia - photophobia
MCCC1	3-Methylcrotonyl-CoA carboxylase 1 deficiency
MCCC2	3-Methylcrotonyl-CoA carboxylase 2 deficiency
MCEE	Methylmalonyl-CoA epimerase deficiency
MCOLN1	Mucolipidosis type 4
MECP2	Severe neonatal-onset encephalopathy
MED12	X-linked intellectual deficit with marfanoid habitus
MEFV	Familial Mediterranean fever
MFSD8	Late infantile neuronal ceroid lipofuscinosis



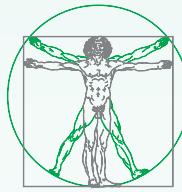
Gene	Malattia/e
MGAT2	Congenital disorder of glycosylation type 2a
MID1	Opitz GBBB syndrome, type I
MKS1	Meckel syndrome type 1
MLC1	Megalencephalic leukoencephalopathy
MLYCD	Malonyl-CoA decarboxylase deficiency
MMAA	Vitamin B12-responsive MMAA type cblA
MMAB	Vitamin B12-responsive MMAB type cblB
MMACHC	Methylmalonic aciduria homocystinuria, cblC
MMACHC	Methylmalonic aciduria homocystinuria, cblD
MOCS1	Sulfite oxidase molybdenum cofactor deficiency
MOCS2	Sulfite oxidase molybdenum cofactor deficiency
MOGS	Congenital disorder of glycosylation, type IIb
MPDU1	Congenital disorder of glycosylation, type If
MPI	Congenital disorder of glycosylation type 1b
MPL	Thrombocytemia 2
MPL	Thrombocytopenia, congenital megakaryocytic
MPV17	Navajo neurohepatopathy
MPZ	Charcot-Marie-Tooth disease, type 1B
MPZ	Charcot-Marie-Tooth disease, type 2I
MPZ	Charcot-Marie-Tooth disease, type 2J
MPZ	Dejerine-Sottas disease
MPZ	Neuropathy, congenital hypomyelinating
MPZ	Roussy-Levy syndrome
MRPS16	Combined oxidative phosphorylation defect type 2
MRPS22	Combined oxidative phosphorylation defect type 5
MTM1	X-linked centronuclear myopathy
MTMR2	Charcot-Marie-Tooth disease, type 4B1
MUT	Vitamin B12-unresponsive methylmalonic aciduria
MVK	Mevalonic aciduria
MYD88	Macroglobulinemia, Waldenstrom



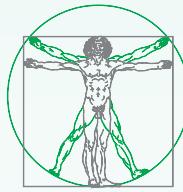
Gene	Malattia/e
MYD88	Pyogenic bacterial infections, recurrent, MYD88
MYO5A	Griselli disease type 1
MYO7A	Nonsyndromic sensorineural deafness type DFNB2
MYO7A	Usher syndrome type 1
NAGLU	Mucopolysaccharidosis type IIIB (Sanfilippo B)
NAGS	Hyperammonemia NAGS deficiency
NBN	Aplastic anemia
NBN	Nijmegen breakage syndrome
NDP	Exudative vitreoretinopathy 2, X-linked
NDP	Norrie disease
NDRG1	Charcot-Marie-Tooth disease, type 4D
NDUFA1	Mitochondrial complex I deficiency
NDUFAF2	Leigh syndrome
NDUFAF2	Mitochondrial complex I deficiency
NDUFAF4	Mitochondrial complex I deficiency
NDUFS3	Leigh Syndrome mitochondrial comp I deficiency
NDUFS3	Mitochondrial complex I deficiency
NDUFS4	Leigh syndrome
NDUFS4	Mitochondrial complex I deficiency
NDUFS6	deficiency of Complex I mitochondrial
NDUFS7	Leigh syndrome
NDUFS8	Leigh Syndrome mitochondrial comp I deficiency
NDUFV1	Mitochondrial complex I deficiency
NEB	Nemaline myopathy 2
NEU1	Sialidosis, type I
NEU1	Sialidosis, type II
NEUROG3	Congenital malabsorptive diarrhea
NHEJ1	Severe combined immunodeficiency
NHLRC1	Epilepsy, progressive myoclonic 2B (Lafora)
NHS	Cataract 40, X-linked



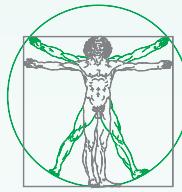
Gene	Malattia/e
NHS	Nance-Horan syndrome
NLGN4X	Mental retardation, X-linked
NPC1	Niemann-Pick disease type C1
NPC2	Niemann-Pick disease type C2
NPHP1	Joubert syndrome 4
NPHP3	Renal-hepatic-pancreatic dysplasia
NPHP3	Senior-Loken syndrome 1
NPHP4	Senior-Loken syndrome
NPHS1	Nephrotic syndrome, type 1
NPHS2	Nephrotic syndrome, type 2
NR2E3	Goldmann-Favre syndrome
NR5A1	46XY sex reversal 3
NR5A1	Adrenocortical insufficiency
NSD1	Beckwith-Wiedemann syndrome
NSD1	Sotos syndrome 1
NSUN2	Mental retardation, autosomal recessive 5
NTRK1	Sensory and autonomic neuropathy type 4
NUP62	Infantile bilateral striatal necrosis
OCRL	Dent disease 2
OCRL	Oculocerebrorenal syndrome
OFD1	Simpson-Golabi-Behmel syndrome type 2
OPA3	3-methylglutaconic aciduria type 3
OPHN1	Mental retardation, cerebellar hypoplasia, facies
ORAI1	Immunodeficiency 9
ORAI1	Myopathy, tubular aggregate, 2
OSTM1	Osteopetrosis, autosomal recessive 5
OTC	Ornithine transcarbamylase deficiency
OTOF	Auditory neuropathy, autosomal recessive, 1
OXCT1	Octoacid CoA transferase deficiency
P3H1	Osteogenesis imperfecta, type VIII



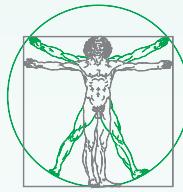
Gene	Malattia/e
PAH	Phenylketonuria
PAK3	Mental retardation, X-linked 30/47
PANK2	Pantothenate kinase-ass. neurodegeneration
PAX8	Hypothyroidism, congenital, due to thyroid dysgenesis or hypoplasia
PC	Pyruvate carboxylase deficiency
PCBD1	Hyperphenylalaninemia, BH4-deficient, D
PCCA	Propionic acidemia (gene PCCA)
PCCB	Propionic acidemia (gene PCCB)
PCDH15	Deafness, autosomal recessive 23
PCDH19	Epileptic encephalopathy, early infantile, 9
PDE6A	Retinitis pigmentosa 43
PDHA1	Leigh syndrome, X-linked
PDHB	Pyruvate dehydrogenase E1-beta deficiency
PDHX	Lacticacidemia due to PDX1 deficiency
PDP1	Pyruvate dehydrogenase phosphatase def.
PDSS1	Deafness-encephaloneuropathy-obesity-valvul
PDSS2	Leigh syndrome with nephrotic syndrome
PEX1	Zellweger syndrome 1A
PEX10	Peroxisome biogenesis disorder 6A (Zellweger)
PEX10	Peroxisome biogenesis disorder 6B
PEX12	Neonatal adrenoleukodystrophy (gene PEX12)
PEX13	Peroxisome biogenesis disorder 11A (Zellweger)
PEX13	Peroxisome biogenesis disorder 11B
PEX26	Neonatal adrenoleukodystrophy (gene PEX26)
PEX26	Zellweger syndrome 7A
PEX5	Neonatal adrenoleukodystrophy (gene PEX5)
PEX6	Heimler syndrome, type 2
PEX7	Rhizomelic chondrodysplasia punctata type 1
PGK1	Phosphoglycerate kinase 1 deficiency
PHF8	Mental retardation syndrome, X-linked, Siderius type



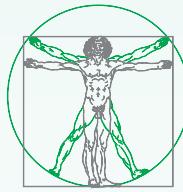
Gene	Malattia/e
PKHD1	Autosomal recessive polycystic kidney disease
PKLR	Hemolytic anemia red cell PK deficiency
PLA2G6	Infantile neuroaxonal dystrophy 2A
PLA2G6	Infantile neuroaxonal dystrophy 2B
PLCE1	Nephrotic syndrome, type 3
PLDN	Hermansky-pudlak syndrome 9
PLEC	Epidermolysis bullosa simplex with M_D
PLEC	Epidermolysis bullosa with pyloric atresia
PLEC	Limb girdle dystrophy epidermolysis bullosa
PLEKHG5	Distal spinal muscular atrophy type C AR
PLG	Plasminogen deficiency type 1
PLOD1	Ehlers-Danlos syndrome type 6
PLP1	Spastic paraparesis type 2, X-linked
PMM2	Congenital disorder of glycosylation type 1a
PMP22	Charcot-Marie-Tooth disease, type 1A
PMP22	Charcot-Marie-Tooth disease, type 1E
PMP22	Dejerine-Sottas disease
PMP22	Roussy-Levy syndrome
PNPO	Pyridoxal phosphate-responsive seizures
POLG	Alpers syndrome
POLG	Progressive external ophthalmoplegia AR
POLG	Mitochondrial Neurogastrointestinal Encephalopathy
POLG	Sensory neuropathy-dysarthria-ophthalmoparesis
POLR1C	Treacher Collins syndrome 3
POMGNT1	Limb-girdle muscular dystrophy type C3 AR
POMGNT1	Muscular dystrophy with cerebellar involv.
POMGNT1	Walker-Warburg syndrome (gene POMGNT1)
POMT1	Limb-girdle muscular dystrophy type C1 AR
POMT1	Muscular dystrophy with cerebellar involv.
POMT1	Walker-Warburg syndrome (gene POMT1)



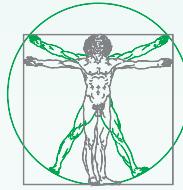
Gene	Malattia/e
POMT2	Limb-girdle muscular dystrophy type C2 AR
POMT2	Muscular dystrophy with cerebellar involv.
POMT2	Walker-Warburg syndrome (gene POMT2)
POR	Antley-Bixler syndrome, genital anomalies
POU1F1	Combined pituitary hormone deficiencies
POU3F4	Deafness, X-linked 2
PPT1	Adult neuronal ceroid lipofuscinosis
PQBP1	Renpenning syndrome
PRDM5	Brittle cornea syndrome
PRF1	Hemophagocytic lymphohistiocytosis, familial, 2
PROP1	Combined pituitary hormone deficiencies
PRPS1	Lethal ataxia with deafness and optic atrophy
PRPS1	X-linked Charcot-Marie-Tooth disease type 5
PRSS12	Mental retardation, autosomal recessive 1
PRX	Charcot-Marie-Tooth disease type 4F
PSAP	Encephalopathy due to prosaposin deficiency
PSAP	Krabbe disease
PSAP	Metachromatic leukodystrophy
PSAP	Bannayan-Riley-Ruvalcaba syndrome
PTEN	Cowden syndrome 1
PTEN	Lhermitte-Duclos syndrome
PTEN	Macrocephaly/autism syndrome
PTEN	Chondrodyplasia, Blomstrand type
PTH1R	Eiken syndrome
PTH1R	Failure of tooth eruption, primary
PTH1R	Metaphyseal chondrodyplasia, Murk Jansen type
PTH1R	Hyperphenylalaninemia, BH4-deficient, A
PYGM	muscle glycogen phosphorylase deficiency
QDPR	Hyperphenylalaninemia, BH4-deficient, C
RAB23	Carpenter syndrome



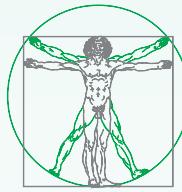
Gene	Malattia/e
RAB27A	Griselli disease type 2
RAB39B	Mental retardation, X-linked 72
RAB3GAP1	Micro syndrome
RAB3GAP2	Cataract - intellectual deficit - hypogonadism
RAG1	Combined immunodeficiency with granulomas
RAG1	Omenn syndrome (gene RAG1)
RAG1	Immunodeficiency RAG1/2 deficiency
RAG2	Immunodeficiency with skin granulomas
RAG2	Omenn syndrome (gene RAG2)
RAG2	Immunodeficiency complete RAG1/2 deficiency
RAPSN	Fetal akinesia deformation sequence
RAX	Microphthalmia, isolated 3
RDH12	Leber congenital amaurosis 13
RELN	Lissencephaly syndrome, Norman-Roberts type
RFT1	Congenital disorder of glycosylation, type In
RMRP	Anauxetic dysplasia
RMRP	Cartilage-hair hypoplasia
RMRP	Metaphyseal dysplasia without hypotrichosis
RNASEH2A	Aicardi-Goutieres syndrome 4
RNASEH2B	Aicardi-Goutieres syndrome 2
RNASEH2C	Aicardi-Goutieres syndrome 3
RP2	Retinitis pigmentosa 2
RPE65	Leber congenital amaurosis 2
RPGR	Cone-rod dystrophy, X-linked, 1
RPGRIP1L	Joubert syndrome with hepatic defect
RPGRIP1L	Meckel syndrome, type 5
RPL10	Autism, susceptibility to, X-linked 5
RPS6KA3	Coffin-Lowry syndrome
RPS6KA3	Mental retardation, X-linked 19
RRM2B	Mitochondrial DNA depletion syndrome 8A



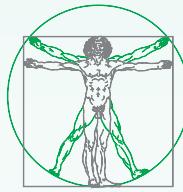
Gene	Malattia/e
RRM2B	Mitochondrial DNA depletion syndrome 8B
RS1	Retinoschisis
SACS	Autosomal recessive spastic ataxia
SAMHD1	Aicardi-Goutieres syndrome 5
SAMHD1	Chilblain lupus 2
SBDS	Shwachman-Diamond syndrome
SC5DL	Lathosterolosis
SCNN1A	Pseudohypoaldosteronism type 1, AR (SCNN1A)
SCNN1B	Pseudohypoaldosteronism type 1, AR (SCNN1B)
SCNN1G	Pseudohypoaldosteronism type 1, AR (SCNN1G)
SCO1	Mitochondrial complex IV deficiency
SCO2	Cardioencephalomyopathy, Cyt C deficiency 1
SEPN1	Rigid spine syndrome
SERPINA1	Emphysema due to AAT deficiency
SFTPB	Surfactant metabolism dysfunction, pulmonary, 1
SFTPC	Surfactant metabolism dysfunction, pulmonary, 2
SGCA	Muscular dystrophy, limb-girdle, type 2D
SGCB	Muscular dystrophy, limb-girdle, type 2E
SGSH	Mucopolysaccharidosis type 3A
SH2D1A	X-linked lymphoproliferative disease
SH3TC2	Charcot-Marie-Tooth disease, type 4C
SHROOM4	Stocco dos Santos mental retardation syndrome
SIL1	Marinesco-Sjögren syndrome
SLC12A1	Antenatal Bartter syndrome type 1
SLC12A6	Corpus callosum agenesis - neuronopathy
SLC16A2	Allan-Herndon-Dudley syndrome
SLC17A5	Free sialic acid storage disease, infantile form
SLC22A5	Carnitine deficiency, systemic primary
SLC25A13	Citrullinemia, adult-onset type II; type II, neonatal-onset
SLC25A15	Hypornithine-hyperammonemia-homocitrullinuria



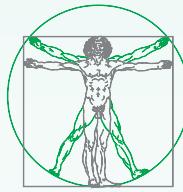
Gene	Malattia/e
SLC25A20	Carnitine-acylcarnitine translocase deficiency
SLC25A22	Early infantile epileptic encephalopathy
SLC26A2	Achondrogenesis type 1B
SLC26A2	Atelosteogenesis type II
SLC26A2	Diastrophic dwarfism
SLC26A2	Multiple epiphyseal dysplasia type 4
SLC26A4	Deafness, autosomal recessive 4, with enlarged vestibular aqueduct
SLC35A1	Congenital disorder of glycosylation type 2f
SLC35C1	Congenital disorder of glycosylation type 2c
SLC35D1	Schneckenbecken dysplasia
SLC37A4	Glycogen storage disease G6PD deficiency type b
SLC37A4	Glycogen storage disease due to G6PD deficiency
SLC3A1	Cystinuria
SLC46A1	Folate malabsorption, hereditary
SLC4A11	Congenital hereditary endothelial dystrophy type II
SLC4A11	Corneal dystrophy - perceptive deafness
SLC5A5	Thyroid dysmorphogenesis 1
SLC6A19	Hartnup disorder
SLC6A8	X-linked creatine transporter deficiency
SLC7A9	Cystinuria
SLC9A6	Mental retardation, Christianson type
SMN1	Proximal spinal muscular atrophy type 1
SMN1	Proximal spinal muscular atrophy type 2
SMN1	Proximal spinal muscular atrophy type 3
SMN1	Proximal spinal muscular atrophy type 4
SMPD1	Niemann-Pick disease type A
SMPD1	Niemann-Pick disease type B
SMS	Mental retardation, Snyder-Robinson type
SNAP29	Cerebral dysgenesis-neuropathy keratoderma
SOX3	Mental retardation isolated GH deficiency



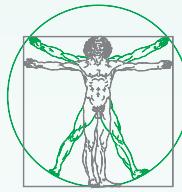
Gene	Malattia/e
SOX3	Panhypopituitarism, X-linked
SP110	Hepatic venoocclusive immunodeficiency
SPG11	Spastic paraparesis 11, autosomal recessive
SPG7	Spastic paraparesis 7, autosomal recessive
SRD5A2	Pseudovaginal perineoscrotal hypospadias
SRD5A3	Congenital disorder of glycosylation, type Iq
SRD5A3	Kahrizi syndrome
ST3GAL3	Epileptic encephalopathy, early infantile, 15
ST3GAL3	Mental retardation, autosomal recessive 12
ST3GAL5	Amish infantile epilepsy syndrome
STAR	Congenital lipoid adrenal hyperplasia
STAT1	Immunodeficiency 31A AD
STAT1	Immunodeficiency 31B AR
STAT1	Immunodeficiency 31C, AD
STIM1	Immunodeficiency 10
STIM1	Myopathy, tubular aggregate, 1
STIM1	Stormorken syndrome
STRA6	Syndromic microphthalmia type 9
STX11	Hemophagocytic lymphohistiocytosis, familial, 4
STXBP2	Hemophagocytic lymphohistiocytosis, familial, 5
SUCLA2	Mitochondrial DNA depletion syndrome 5
SUCLG1	Fatal infantile lactic acidosis aciduria
SUOX	Sulfocysteinuria
SURF1	Leigh syndrome, due to COX deficiency
SYN1	Epilepsy, X-linked, with variable learning disabilities and behavior disorders
SYP	Mental retardation, X-linked 96
TAT	Tyrosinemia type 2
TAZ	Barth syndrome
TBCE	Hypoparathyroidism-intellectual deficit
TCF4	Pitt-Hopkins syndrome



Gene	Malattia/e
TCIRG1	Autosomal recessive malignant osteopetrosis 1
TFR2	Hemochromatosis, type 3
TG	Thyroid dys hormonogenesis 3
TGM1	Ichthyosis, congenital, autosomal recessive 1
TH	Autosomal recessive dopa-responsive dystonia
THOC2	Mental retardation, X-linked 12/35
THR-B	Thyroid hormone resistance
TIMM8A	Mohr-Tranebjærg syndrome
TK2	Mitochondrial DNA depletion, myopathic form
TMEM216	Joubert syndrome 2
TMEM67	COACH syndrome
TMEM67	Joubert syndrome 6
TNFRSF11B	Paget disease, juvenile
TPO	Thyroid dys hormonogenesis 2A
TPP1	Neuronal ceroid lipofuscinosis 2
TRAPPC9	Mental retardation, autosomal recessive 13
TRDN	Ventricular tachycardia, catecholaminergic polymorphic, 5, with or without muscle weakness
TREX1	Aicardi-Goutières syndrome
TRIM37	MULIBREY nanism
TSEN54	Pontocerebellar hypoplasia type 2A
TSEN54	Pontocerebellar hypoplasia type 4
TSFM	Fatal mitochondrial disease 3
TSHB	Isolated thyroid-stimulating hormone deficiency
TSHR	Hyperthyroidism, familial gestational; Hypothyroidism, congenital, nongoitrous, 1
TSPAN7	Mental retardation, X-linked 58
TSPYL1	Sudden infant death dysgenesis testes syndrome
TTPA	Ataxia with vitamin E deficiency
TUBA1A	Lissencephaly 3
TUFM	Combined oxidative phosphorylation deficiency 4
TUSC3	Mental retardation, autosomal recessive 7



Gene	Malattia/e
TYK2	Immunodeficiency 35
TYMP	Mitochondrial DNA depletion syndrome 1
UBA1	X-linked spinal muscular atrophy type 2
UBE2A	Mental retardation, Nascimento-type
UBE3A	Angelman syndrome point mutation
UBR1	Johanson-Blizzard syndrome
UNC13D	Hemophagocytic lymphohistiocytosis, familial, 3
UPF3B	Mental retardation, X-linked, syndromic 14
UQCRB	Mitochondrial respiratory chain C III deficiency
UQCRC	Mitochondrial respiratory chain C III deficiency
UROS	Porphyria, congenital erythropoietic
USH1C	Nonsyndromic sensorineural deafness type AR
USH1C	Usher syndrome type 1C
USH1G	Usher syndrome type 1G
USH2A	Usher syndrome type 2A
USP9X	Mental retardation, X-linked 99
VDR	Vitamin D-dependent rickets type 2A
VIPAR	Arthrogryposis, renal dysfunction, cholestasis 2
VLDLR	Cerebellar ataxia - intellectual deficit -
VPS13B	Cohen Syndrome type 1
VPS33B	Arthrogryposis - renal dysfunction - cholestasis
WAS	Wiskott-Aldrich syndrome
WHRN	Usher syndrome, type 2D / Deafness, autosomal recessive 31
WNT10A	Odontoonychodermal dysplasia
WNT3	Tetra-amelia, autosomal recessive
WNT7A	Aplasia/hypoplasia of limbs and pelvis
WNT7A	Fibular hypoplasia or aplasia - femoral bowing
XIAP	Lymphoproliferative syndrome, X-linked, 2
XPA	Xeroderma pigmentosum complementation group A
XPC	Xeroderma pigmentosum, group C



Gene	Malattia/e
ZDHHC9	Mental retardation, Ray mond type
ZEB2	Mowat-Wilson syndrome
ZIC3	Congenital heart defects, nonsyndromic, 1, X-linked
ZIC3	Heterotaxy, visceral, 1, X-linked
ZMPSTE24	Lethal restrictive dermopathy
ZMPSTE24	Mandibuloacral dysplasia with type B lipodystrophy
ZNF469	Brittle cornea syndrome
ZNF711	Mental retardation, X-linked 97

Il VERA OMNIA<sup>®</sup> COMPLETE se abbinato allo studio non invasivo del cariotipo fetale, VERA PLUS + Microdelezioni, permette di raggiungere il più alto livello d'informazione possibile, mediante tecniche prenatali non invasive, ad oggi disponibile.

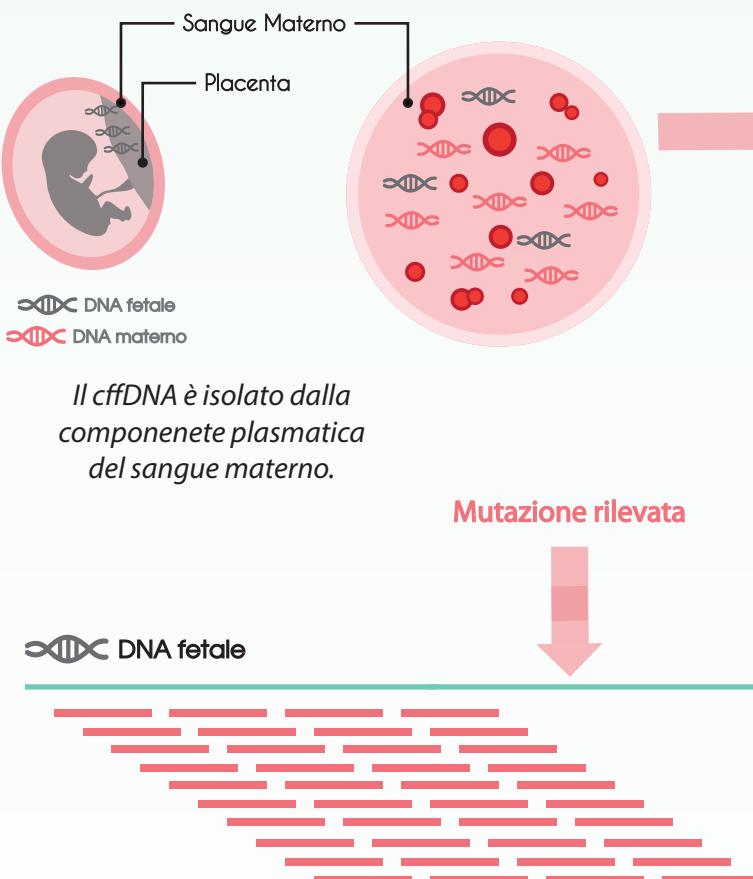
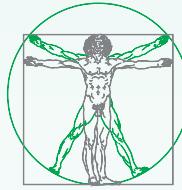
#### INDICAZIONI AL TEST

Il VERA OMNIA<sup>®</sup> COMPLETE è adatto ad ogni tipo di gravidanza, ma in particolare:

- Gravidanze in cui è controindicata la diagnosi prenatale invasiva (es. rischio di aborto spontaneo);
- Quadro ecografico di anomalie fetalì suggestive di malattia genetica;
- Coppie con età paterna avanzata;
- Utile per le gestanti che desiderano ridurre il rischio di malattia genetica del feto.

#### PROCEDURA DEL TEST

- Prelievo di sangue a donne in gravidanza con un'età gestazionale di almeno 10 settimane e al partner.
- Separazione del DNA fetale libero circolante presente nel sangue materno, originatosi dai citotrofoblasti della placenta in apoptosi.
- Analisi di sequenziamento massivo mediante tecnologia di nuova generazione (tecnologia NGS Illumina) per rilevare le mutazioni dei geni delle patologie investigate sul DNA fetale (elencati nelle tabelle 1 e 3) e sul DNA della coppia (tabelle 1,3 e 4).
- Analisi dei dati mediante un'accurata analisi bioinformatica che si avvale di algoritmi e database privati e pubblici (riportati nella sezione relativa all'interpretazione dei risultati).
- Analisi di MLPA per il gene SMN1 per la coppia (tabella 4).
- TP-PCR per la determinazione del numero di tripletté CGG nel gene FMR1 per la donna (tabella 4).
- Analisi di MLPA per il gene DMD per la donna (tabella 4).



*Il DNA viene sequenziato massivamente mediante l'innovativa tecnologia denominata **Next Generation Sequencing (NGS)**.*



*Si procede con l'analisi bioinformatica per rilevare **mutazioni** causa di una specifica malattia genetica*

## RISULTATI OTTENIBILI CON IL VERA OMNIA® COMPLETE

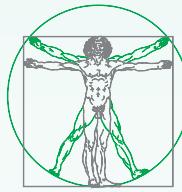
**“ALTO RISCHIO”:** indica che il test ha rilevato una o più mutazioni a livello di uno (o più) geni. Tale risultato indica che il feto presenta un elevato rischio per la specifica malattia indicata, ma non assicura che il feto abbia tale condizione.

In particolare vengono indicate come **alto rischio**:

- la presenza di almeno due varianti patogenetiche nei geni associati a patologie autosomiche recessive ad alta o bassa incidenza.
- la presenza di una variante patogenetica nei geni associati a patologie autosomiche dominanti, X-linked o ad insorgenza *de novo*.

La/e mutazione/i ritrovate vanno confermate mediante un test di diagnosi nei genitori ed eventualmente con diagnosi prenatale invasiva, come il prelievo dei villi coriali (Villocentesi) o l’Amniocentesi. In nessun modo è possibile avvalersi della Legge 194/78 sull’interruzione volontaria della gravidanza senza prima aver confermato il risultato del test mediante amniocentesi o villocentesi.

Per l’analisi dei risultati si considerano esclusivamente mutazioni per le quali vi è univocità di risultato patologico. Quindi, il test non ricerca varianti con significato benigno e varianti con significato clinico incerto, cioè quelle non ancora caratterizzate da un punto di vista patogenetico.



**"RISCHIO MODERATO"**: indica che il test ha rilevato una mutazione a livello di uno o più geni associati a patologie autosomiche recessive ad alta o bassa incidenza.

Tale risultato va confermato inizialmente eseguendo l'analisi genetica nei genitori, per valutare la segregazione delle mutazioni rilevate.

Successivamente è possibile valutare la necessità di eseguire un test di diagnosi prenatale invasiva, come il prelievo dei villi coriali (Villocentesi) o l'Amniocentesi. In nessun modo è possibile avvalersi della Legge 194/78 sull'interruzione volontaria della gravidanza senza prima aver confermato il risultato del test mediante amniocentesi o villocentesi.

Per l'analisi dei risultati si considerano esclusivamente mutazioni per le quali vi è univocità di risultato patologico. Quindi, il test non ricerca varianti con significato benigno e varianti con significato clinico incerto, cioè quelle non ancora caratterizzate da un punto di vista patogenetico.

• **"BASSO RISCHIO"**: indica che il test non ha rilevato alcuna mutazione a significato patologico noto nei geni esaminati. Tale risultato riduce notevolmente le possibilità che il feto abbia le malattie genetiche esaminate. Tuttavia, il test non può garantire che il feto sia sano.

In alcuni casi, inoltre, (circa l'1%) il test potrebbe produrre un risultato non ottimale o non conclusivo. In questo caso verrà richiesto alla gestante il prelievo di un nuovo campione ematico al fine di ripetere l'esame e/o un campione ematico paterno.

#### PARAMETRI RIPORTATI NEL REFERTO:

##### Varianti genetiche riportate

L'analisi è mirata esclusivamente ai geni elencati in Tabella 1, 2, 3 e 4. In particolare vengono analizzate le porzioni codificanti dei geni, quelle cioè che comunemente sono associate a malattia (vedi anche LIMITI DEL TEST). Verranno riportate nel referto solo le mutazioni classificate a significato patogenetico noto, sulla base dei dati della letteratura scientifica e la classificazione presente nei database di riferimento interrogati: ClinVar (NCBI), aggiornati alla data del prelievo.

##### Target Coverage

Si intende per Target Coverage, il numero medio di letture (reads) ottenute dal sequenziamento per ciascuna base nucleotidica costituente il gene. Il Target Coverage del test è >600X.

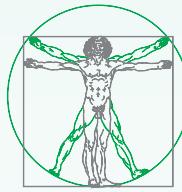
Il disegno della libreria per i geni indagati è stato fatto in modo tale da avere una copertura ottimale e completa per tutti i geni analizzati. Si riduce quindi la possibilità che ci siano delle porzioni dei geni non analizzate.

##### Accuratezza del test

L'esame ha dimostrato, in studi di validazione preclinica, una sensibilità >99% nel rilevare le mutazioni nei geni investigati, con percentuali di falsi positivi <0.1%. Sebbene l'errore del test sia basso, tuttavia non è escludibile.

#### LIMITI DEL TEST

Questo esame valuta solo le malattie genetiche ed i geni elencati in Tabella 1, 2, 3 e 4. Quindi, il test non valuta altre malattie genetiche o geni non specificamente indicati.



L'esame inoltre non è in grado di evidenziare:

- mutazioni localizzate nelle regioni introniche oltre  $\pm 5$  nucleotidi dalle giunzioni esone-introne;
- delezioni o duplicazioni maggiori di 5 bp;
- inversioni;
- mosaicismi.

Per i campioni con FF minore del 4%, verrà richiesta la ripetizione dell'esame con un nuovo prelievo (gratuitamente).

**Infine è importante sottolineare che questo test non è consigliato alle coppie che sono già a conoscenza di essere portatrici di patologie genetiche, ad esempio Fibrosi Cistica, Talassemia, Sordità Congenita etc., in quanto essendo un test di screening verranno rilevate le mutazioni familiari ma, non sarà possibile definire con certezza se il feto è affetto, portatore o non portatore della patologia, di conseguenza per una diagnosi definitiva si rimanderà ad amniocentesi.**

Il VERA OMNIA® COMPLETE è un **test di screening**, non è un **test diagnostico**. Benché molto accurato, i risultati del test non sono diagnostici (forniscono **un rischio alto, moderato o basso**) e devono essere valutati da un genetista medico nel contesto del quadro clinico della gestante e dell'anamnesi familiare. I risultati devono essere confermati in quanto il test non è sostitutivo della diagnosi prenatale invasiva (Villocentesi o Amniocentesi). Il test è stato validato su gravidanze singole o gemellari, monozigotiche o dizigotiche, con almeno 10 settimane di gestazione. Nelle gravidanze gemellari non è possibile distinguere la condizione del singolo feto, quindi in caso di risultato positivo, bisogna confermare con villocentesi o amniocentesi.

Nelle gravidanze che sono iniziate come gemellari o plurime, seguite dall'aborto spontaneo di uno o più feti con riassorbimento della camera gestazionale (vanishing twin), potrebbe essere presente nel sangue materno anche il DNA fetale libero del feto abortito. Ciò potrebbe interferire nella qualità dei risultati, determinando falsi positivi.

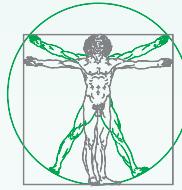
L'esistenza di un tumore (metastasi) nella gestante potrebbe determinare risultati del test falsi positivi dovuti a mutazioni del DNA tumorale circolante (ctDNA) a livello di geni coinvolti nel processo di cancerogenesi (es. BRAF, HRAS, NRAS, KRAS). Il DNA tumorale si ritrova nella frazione del sangue materno da cui viene isolato il DNA fetale, per cui una mutazione rilevata in questi geni (oncogeni) potrebbe dare un falso positivo. In questi casi bisogna effettuare villocentesi o amniocentesi per confermare il risultato.

Il test identifica esclusivamente mutazioni con significato patologico noto. Non vengono riportate varianti con significato benigno e varianti con significato clinico incerto, cioè quelle ancora non note o caratterizzate. L'interpretazione delle varianti genetiche si basa sull'utilizzo di diversi database aggiornati alla data del prelievo. Ciò consente di lavorare con dati il più possibile recenti al momento dell'analisi. È importante sottolineare che, grazie ai rapidi progressi nel campo del sequenziamento di nuova generazione, tale interpretazione potrebbe cambiare in futuro con l'acquisizione di nuove informazioni scientifiche e mediche sulla struttura del genoma ed influire sulla valutazione stessa delle varianti.

Per i limiti sopra riportati, in caso di risultato positivo si raccomanda di eseguire un colloquio con un genetista e la conferma del risultato attraverso l'analisi genetica su liquido amniotico o villi coriali.

### TEMPI DI REFERTAZIONE

I tempi stimati di refertazione sono di circa 20/30 giorni lavorativi. I tempi di refertazione, tuttavia, potrebbero prolungarsi in caso di ripetizioni dell'esame, risultati non ottimali, approfondimenti dell'esame o dubbi interpretativi.



## Il VERA OMNIA COMPLETE® come integrazione al VERA TEST PLUS®

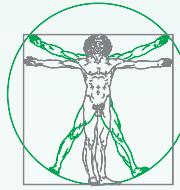
Il VERA OMNIA COMPLETE® fornisce informazioni in merito al rischio di malattie genetiche riscontrabili nel feto, ma non fornisce alcuna informazione rispetto alle aneuploidie fetal, né rispetto alle anomalie cromosomiche strutturali. Quindi, per avere una visione più completa della salute del feto è utile abbinare al VERA OMNIA COMPLETE® il VERA TEST PLUS®, in grado di individuare aneuploidie e anomalie strutturali cromosomiche su tutto il cariotipo fetale.

## ALTERNATIVE DIAGNOSTICHE PRENATALI

Il VERA OMNIA COMPLETE® è solo una delle opzioni a disposizione della gestante per determinare il rischio di patologie genetiche durante la gravidanza. Esistono anche altri test di screening effettuabili in questo periodo. In particolare, un'indagine genetica molecolare più approfondita può essere ottenuta mediante "diagnosi prenatale invasiva", che può essere eseguita su villi coriali o liquido amniotico.

Il prelievo dei villi coriali (tessuto placentare che, pur essendo separato dal feto, ne contiene lo stesso DNA) è effettuato tra la 11<sup>a</sup> e la 12<sup>a</sup> settimana di gestazione e consiste nel prelievo, sotto controllo ecografico, di un piccolo campione di villi coriali mediante una puntura attraverso l'addome materno. Tale prelievo comporta un rischio di aborto inferiore al 2%.

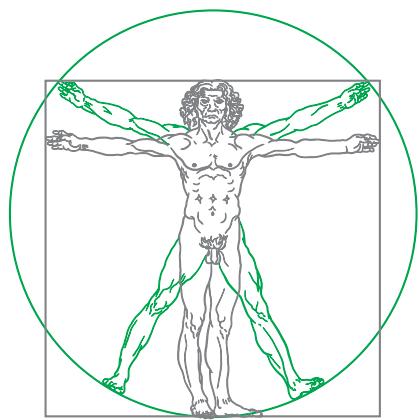
Il prelievo del liquido amniotico o amniocentesi viene eseguito mediante puntura transaddominale tra la 16<sup>a</sup> e la 18<sup>a</sup> settimana di gravidanza e comporta un rischio di aborto inferiore all'1%.



## REFERENZE

1. Frebourg T. The challenge for the next generation of medical geneticists. *Hum Mutat.* 2014;35:909-911.
2. Tetreault M, Bareke E, Nadaf J, et al. Whole-exome sequencing as a diagnostic tool: current challenges and future opportunities. *Expert Rev Mol Diagn.* 2015;15:749-760.
3. OMIM Gene Map Statistics <http://www.omim.org/statistics/geneMap>. Accessed 5 July, 2017
4. Homsy J, Zaidi S, Shen Y, et al. De novo mutations in congenital heart disease with neurodevelopmental and other congenital anomalies. *Science.* 2015;350:1262-6.
5. Zaidi S, Choi M, Wakimoto H, et al. De novo mutations in histone-modifying genes in congenital heart disease. *Nature.* 2013;498:220-3.
6. Sifrim A, Hitz M-P, Wilsdon A, et al. Distinct genetic architectures for syndromic and nonsyndromic congenital heart defects identified by exome sequencing. *Nat Genet.* 2016;48:1060-5.
7. Ng SB, Bigham AW, Buckingham KJ, Hannibal et al. Exome sequencing identifies MLL2 mutations as a cause of Kabuki syndrome. *Nat Genet.* 2010;42:790-3.
8. Hoischen A, van Bon BWM, Rodríguez-Santiago B, et al. De novo nonsense mutations in ASXL1 cause Bohring-Opitz syndrome. *Nat Genet.* 2011;43:729-31.
9. Iossifov I, O'Roak BJ, Sanders SJ, et al. The contribution of de novo coding mutations to autism spectrum disorder. *Nature.* 2014;515:216-21.
10. O'Roak BJ, Deriziotis P, Lee C, et al. Exome sequencing in sporadic autism spectrum disorders identifies severe de novo mutations. *Nat Genet.* 2011;43:585-9.
11. Allen AS, Berkovic SF, Cossette P, et al. De novo mutations in epileptic encephalopathies. *Nature.* 2013;501:217-21.
12. de Ligt J, Willemsen MH, van Bon BWM, et al. Diagnostic exome sequencing in persons with severe intellectual disability. *N Engl J Med.* 2012;367:1921-9.
13. Rauch A, Wieczorek D, Graf E, et al. Range of genetic mutations associated with severe non-syndromic sporadic intellectual disability: an exome sequencing study. *Lancet.* 2012;380:1674-82.
14. Ng SB, Bigham AW, Buckingham KJ, et al. Exome sequencing identifies MLL2 mutations as a cause of Kabuki syndrome. *Nat Genet* 2010, 42:790-793.
15. Hoischen A, van Bon BW, Gilissen C, et al. De novo mutation of SETBP1 of Shinzel-Giedion syndrome. *Nat Genet* 2010, 42:483-485.
16. Zhang J, Li J, et al. Non-invasive prenatal sequencing for multiple Mendelian monogenic disorders using circulating cell-free fetal DNA. *Nature medicine* 2019, 25:439-447.





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