

Circumferential Skin Creases and Blepharophimosis are Features Associated With Tubulinopathies: a Case Report and Review of Literature



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Introduction

TUBA1A mutations lead to a large spectrum of severe cerebral malformations such as lissencephaly, microlissencephaly, polymicrogyria, hypoplasia or agenesis of corpus callosum and cerebellar hypoplasia. Epilepsy and severe developmental delay are constantly associated. Dysmorphic features are hardly ever described in patients reported in the literature.

Materials and methods

- Describe new clinical features associated with TUBA1A mutation
- Review the differential diagnosis for patients with corpus callosum agenesis and blepharophimosis
- Compare patients with the mutation p.(Arg390Cys) in *TUBA1A* and patients with *TUBB* or *MAPRE2* mutations.

Case report

Family history: Unrelated healthy parents, healthy little sister. Pregnancy and neonatal period:

Normal antenatal US, born at 40 weeks 5/7 Weight: 3kg058 (-1SD), Height: 49cm (0SD), OFC: 31,8cm (-2,5SD)

At 7 weeks:

West syndrome (Rp/Phenobarbital, Keppra, Sabril)

At 18 months:

Surgical correction of bilateral palpebral ptosis, circumferential skin creases in forearms noted

At 5 years:

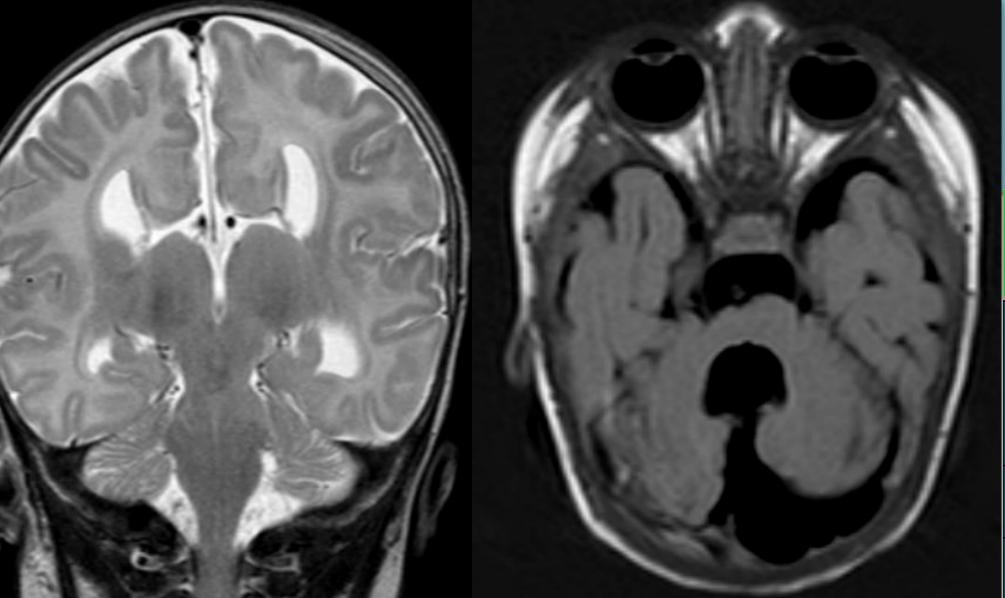
- Stable epilepsy with rare episodes of absence
- Able to eat small pieces, rare wrong track with liquids
- Ophtalmologic follow up for blepharophimosis, ptosis, myopia, astigmatism and nystagmus
- Orthopaedic corset for scoliosis
- Unable to walk, says a few words, relatively good comprehension

Clinical features (table 1):

Height: 1m (-2.4SD), Weight: 15kg (-1.7SD),
OFC: 47,1cm (-2,8SD)

Genetic investigations

A targeted **gene panel for cerebral malformations** demonstrated a *de novo* likely pathogenic mutation *(c.1168C>T, p.(Arg390Cys)) in TUBA1A*





Differential diagnosis of blepharophimosis and corpus callosum agenesis

KAT6B	10q22.2	Ohdo syndrome (SBBYSS)
	10q22.2	Genito-patellar syndrome
MAPRE2	18q12.1-q12.2	Circumforantial Chin Crosses Kunza tuna
TURR	6n21 33	Circumferential Skin Creases Kunze type

				TUBI	В	Sp21.33	Fircumierential Skin Creases Kunze type
Genes	MAPRE2	→	TUBB (TUBB5)	TUBA1A	→	→	TUBA1A
	M2 <i>p.Asn</i> 68Ser (Isrie et al; 2015)	M8 <i>p.Tyr87Cys</i> (Isrie et al; 2015)	M15 <i>p.Tyr222Phe</i> (Isrie et al; 2015)	Our patient p.Arg390Cys	<i>p.Arg390Cys</i> (Kumar et al; 2010)	p.Arg390Cys (Poirier et al; 2015)	35 patients In littérature
Inheritance	Homozygous	Homozygous	De novo	De novo	De novo	De novo	De novo (33), mosaic in mother (2)
Age	15 months	19 years	18 months	5 years	Not specified	1 year	4 weeks to 8 years
Microcephaly	No	Yes	Yes	Yes	Not specified	Yes	Micro- (13), Normo- (3), Not described (19)
Creases	Limbs and neck	Limbs; improvement but visible	Limbs	Forearms; disappeared	Not described	Not described	Simian creases (1)
Facial features	Flat face, microphthalmia, short palpebral fissures, epicanthal folds, low broad nasal bridge, cleft palate, low-set, small dysplastic ears	epicanthic folds, upslanting palpebral fissures, microphthalmia, strabismus, wide nasal bridge, aberrant teeth, cleft palate, low-set	periorbital fullness, long	helices		Convergent strabismus	Sloping forehead (2), microphtalmos (2), hypotelorism (2), hypertelorism (1), upslanding (1), long palpebral fissures with long eyelashes (1), strabismus (4), esotropia (1), epicanthus (1), bulbous nasal tip (1), flat nasal bridge, anteverted nares (1), large mouth (1), high arched palate (1), micro - retrognathia (4), simplified anthelix (1)
Brain MRI	Mildly dilated lateral ventricles, corpus callosum hypoplasia	Hypoplastic vermis, hypoplastic corpus callosum, mild dilatation of ventricles	Hypoplasia of corpus callosum, Dandy-Walker malformation	Complete corpus callosal agenesis, cerebellar vermis hypoplasia, enlargement of fourth ventricle, retrocerebellar cyst, discrete hypoplasia of brainstem	Simplified gyral pattern, complete corpus callosal, agenesis, moderate cerebellar hypoplasia, cortical-white matter interface mildly irregular in places		Asymmetry/dilatation lat. ventricles (5), enlarged 4 th ventricle (2), cortical dysgenesis (1), dysmorphic frontal lobes (1), simplified gyral pattern (3), polymicrogyria (5), lissencephaly (31), corpus callosum hypoplasia/agenesis (23), basal ganglia hypoplasia (5), cerebellar hypoplasia (27), brain stem hypoplasia/dysmorphism (11), hydranencephaly (2), hypoplastic optic nerves (1), absent olfactory bulbs (1), occipital atrophy (1)
Developmental delay	Moderate/severe	Profound	Mild developmental delay	Severe	Not described	Not described	Moderate (1), Severe (14)
Neurological features	Epilepsy	Deafness, epilepsy,		Epilepsy (west syndrome)	Epilepsy	Epilepsy	Epilepsy (35), hypotonia (5)
Others	Hypoplastic scrotum, coronal hypospadias	Short neck, wide-spaced nipples, Ureterocele, hypospadias, cryptorchidia, syndactyly 2,3	Wide-spaced nipples, syndactyly 2,3	Knees contracture, scoliosis, feet varus	Not described	Not described	Edema of the hands and feet (1), pectus excavates (1), hypoplasia of labia minor (1), congenital cataract (1), hirschprung (1), SIADH (2), nephrocalcinosis (1), camptodactyly (1), slender fingers and toes, foetal finger pads (1), contractures of the lower limbs (4), spina bifida occulta (1)

Conclusion

- Mutations in TUBA1A, TUBB and MAPRE2 lead to overlapping phenotypes with association of corpus callosum agenesis/hypoplasia, circumferential skin creases and blepharophimosis.
- •This might be explained by the complementary function of their encoded proteins (α-tubulin, β-tubulin and microtubule associated protein) which have a role in early brain development (gastrulation, 14-15th weeks).
- α-tubulin interacts with β-tubulin to form microtubules and the structure is stabilized by the microtubule associated protein in cytoskeleton. This structure have a major function in neurogenesis, neuronal migration and differenciation,
- •The similar dysmorphic features in our patient compared to patients with Circumferential Skin Creases Kunze type syndrome might be due to a specific effect of our mutation. Alternatively, blepharophimosis and abnormal circumferential skin creases might be frequent but underreported features in patients with TUBA1A mutations.
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