The Japanese collaborated study of Fragile X syndrome and its related disorders Yuji Nakayama, PhD Research Center for Bioscience and Technology, Tottori University, Japan **TOTTORI** Tsukuba **TOKYO** Kyoto Okayama

Carrier Screening in Japanese normal population: CGG repeat analysis in *FMR1* gene (Dr. Nanba, 2010)





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Original article

Fragile X carrier screening and *FMR1* allele distribution in the Japanese population

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Table 2 FMR1 allele frequencies in autistic patients and normal controls.

No. of FMR1 CGG repeats		Autism ($n = 116$ alle	les)	Controls ($n = 1161$ alleles)	
		Male $(n = 102)$	Female $(n = 14)$	Male $(n = 513)$	Female $(n = 648)$
6–39	(Normal)	102	14	508 (99%)	647 (99%)
40-54	(Intermediate)	0	0	5 (0.97%)	1 (0.15%)
55-200	(Premutation)	0	0	0	0
≥ 200	(Full mutation)	0	0	0	0

Frequency of FXS in Japan

Numb	Number of the allele			Pre- mutation (55-200)	Inter- mediate
Our study	1,161	Male Female	0 0	0 0	1:171 ¹⁾ 1:324
Taiwan (Tzeng CC. 2005)	10,046	Male	1:10,046	1:1,674	1:143 ¹⁾
Spain (Rifé M. 2003)	5,000	Male Female	1:2,466 1:8,333	1:1,233 1:411	1:449 ³⁾
Canada (Dombrowski C. 2002)	10,572	Male		1:813	1:441 ¹⁾
Israel (Hagit TA. 2001)	28,668	Female	1:3,584	1:113	1:179 ²⁾

* The range of CGG repeats : 1) 45-54, 2) 50-54, 3) 52-55

Background/starting point of present study

- 1. Frequency of FXS in Japan in male is about 1/10,000
- 2. Lower frequencies of FXS in Japan seem to be due to poor diagnostic systems/guideline or other secondary reasons
- 3. The first FXTAS patient was found in Japan (Internal Med. 2010)

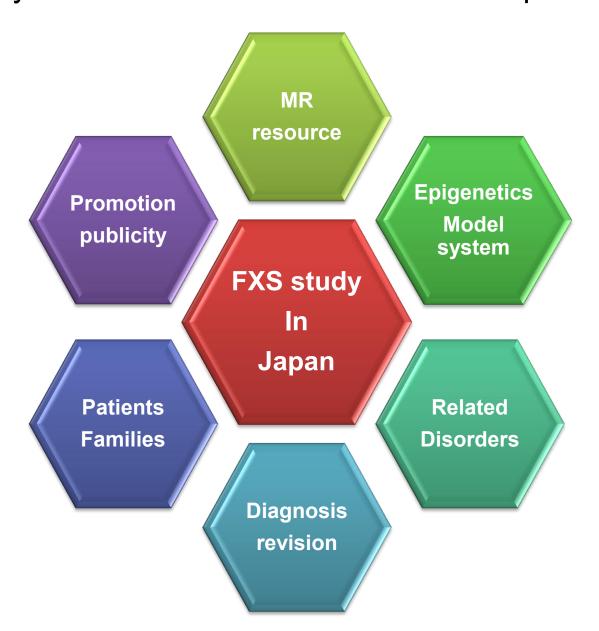
These evidences prompted us to promote or spread...

The knowledge about FXS and related disorders to public health, medicals, and related committees

The Study about FXS and related disorders toward development of diagnosis starategy, pharmaco-therapy, or treatments in future

The Systematic approach toward improving any kinds of situation / limitation / inaccesibilities related to FXS and related disorders in Japan

"The study of diagnosis and treatment for Fragile X syndrome and related disorders in Japan"



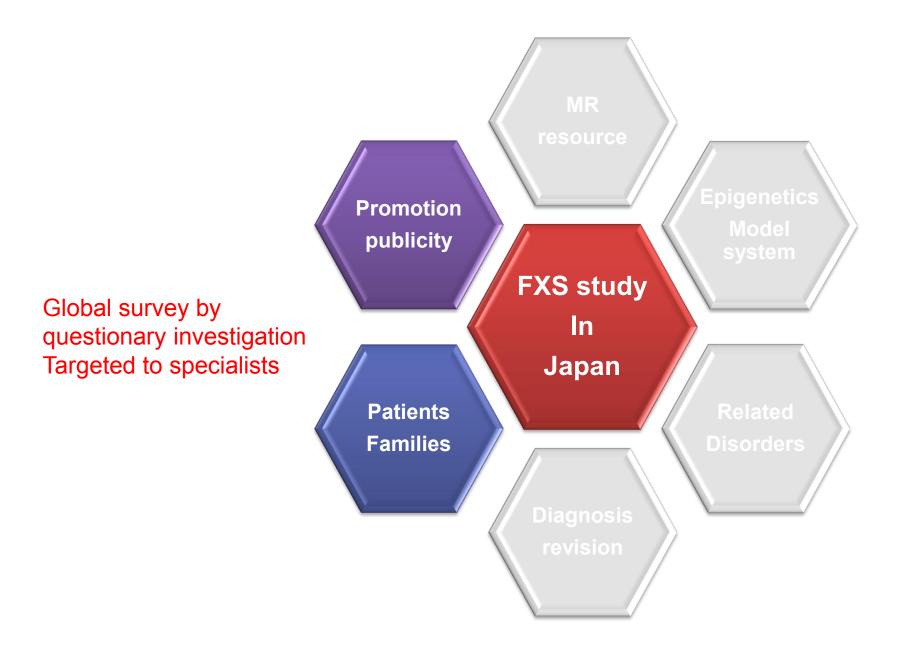
Members

This research was supported by Ministry of Health Labor and Welfare (Research on intractable diseases) from 2009 to 2011

- ➤ Eiji Nanba (Tottori Univ.)
- ➤ Tadao Arinami (Tsukuba Univ.) epigenetic regulation and FXS in elders
- ➤ Hideo Sugie (Jichi Medical Univ.) pharmacotherapy and its guideline
- ➤ Yu-ichi Goto (National Center of Neurology and Psychiatry)
- ➤ Tsukasa Sasaki (Tokyo Univ.)
- ➤Kousaku Ohno (Tottori Univ.)
- ➤ Kenji Nakashima (Tottori University)
- ≻Bunpei Ishizuka (St. Marianna Univ.)
- ➤ Tohru Matsuura (Okayama Univ.)

Researchers (MD)
For
Related disorder
POI, PD,
ASD, FXTAS,
SCA(10&36)

The global survey by the questionnaires (Dr. Tsukasa Sasaki)



Outline of the global survey in this study

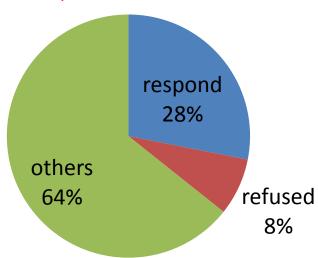
The targets:

- 1. 1,022 doctors with special board with child neurology (SBCN)
- 1,831 doctors belong to the Japanese Society for Child and Adolescent Psychiatry (JSCAP), working on PDD* subjects
- 3. **620 doctors** belong to the Japanese Society of Pediatric Psychiatry and Neurology (JSPPN), working on PDD* subjects
- 4. The public health nurses (PHN) in 653 institutions in Japan, taking care of infants and young children

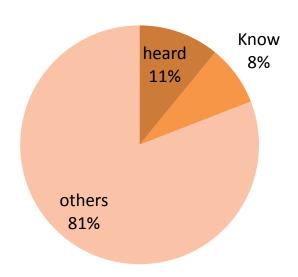
*PDD: Pervasive Developmental Disorders

SBCN response to questionary

13 patients were found

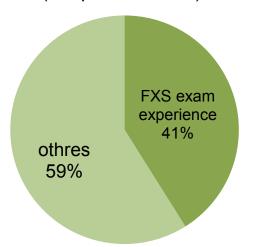


PHN Knowledge about FXS



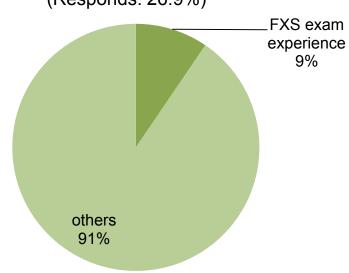
JSPPN FXS exam experience

(Responds: 43.5%)

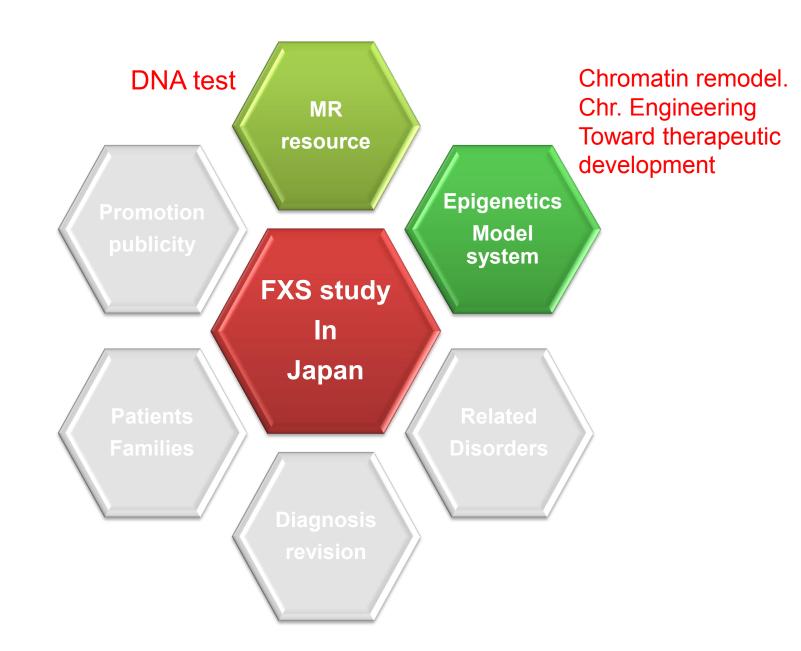


JSCAP FXS exam experience

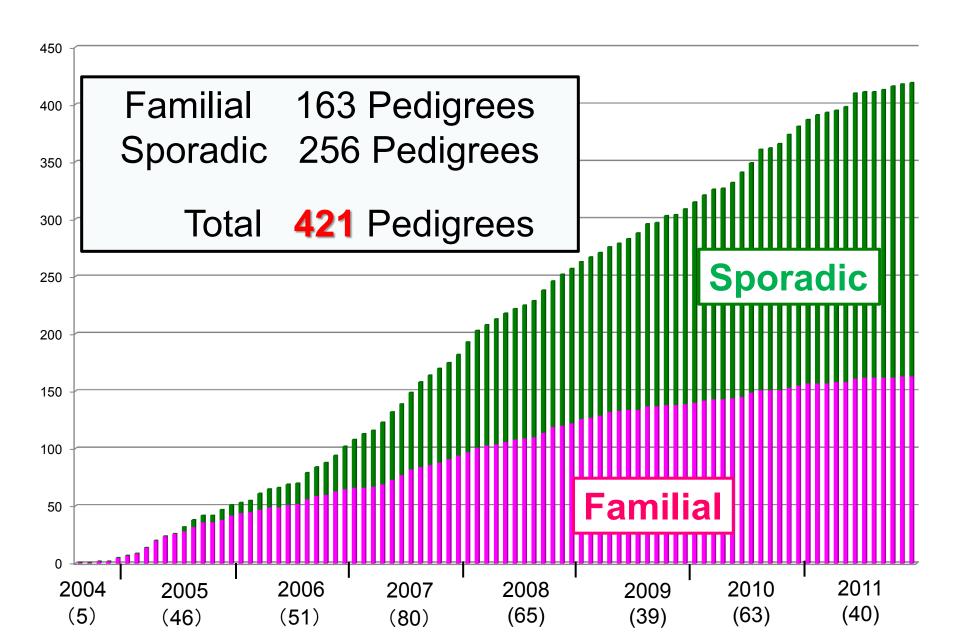
(Responds: 26.9%)



MR resource was screened for FMR mutation (Dr. Yuichi Goto)

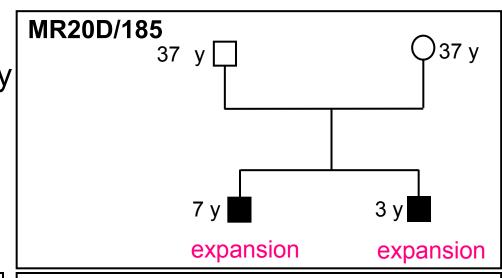


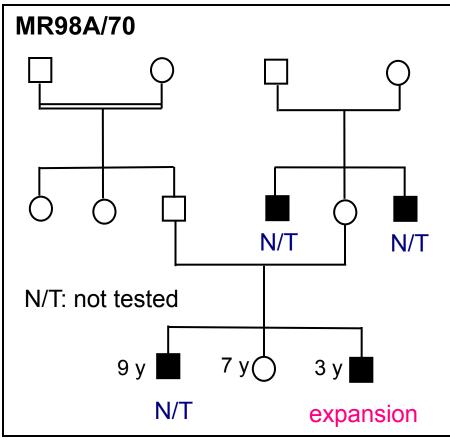
Registration of MR patients in NCNP As of 31 Dec, 2011

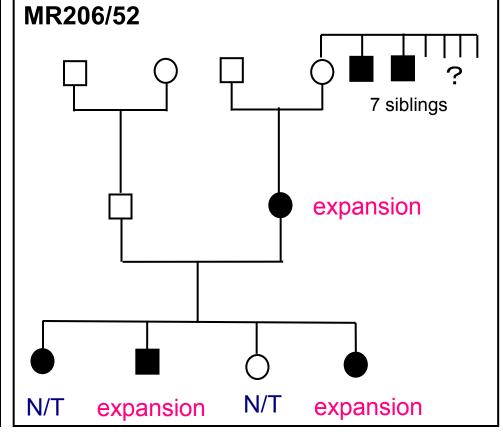


Three Pedigrees with FMR1 full-Mutation in NCNP repository

Total 3 / 295 (1.01 %)
Familial 3 / 136 (2.20 %)
Sporadic 0 / 159 (0.00 %)

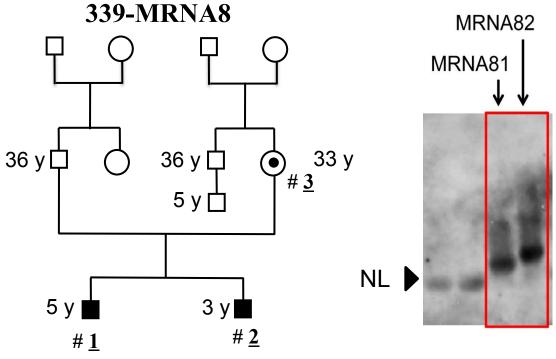


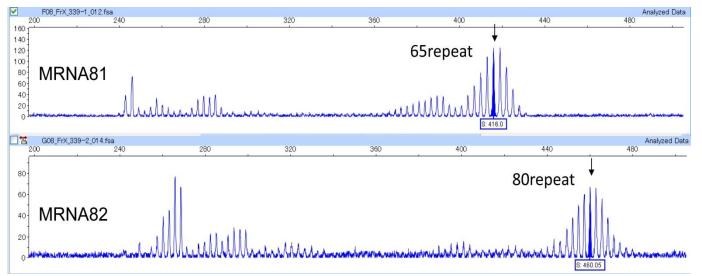


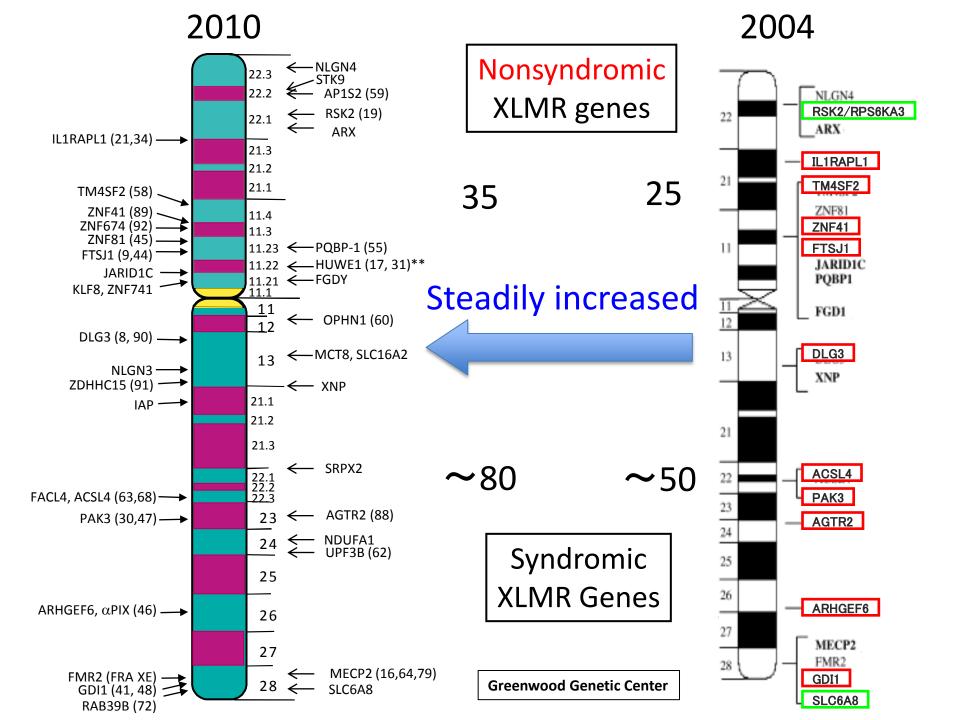


A Family of *FMR1* Premutation/intermediate

Total 3 / 400 (0.75 %)
Familial 3 / 158 (1.90 %)
Sporadic 0 / 242 (0.00 %)







Newly reported XLMR genes from 2005 to 2010

JARID1C	PCDH19	NDUFA1	<i>ZNF674</i>
ZDHHC15	SLC9A6	NXF5	BRWD3
FANCB	MBTPS2	PRPS1	CUL4B
HCCS	NSDHL	RPL10	PORCN
AP1S2	RAB39B	UPF3B	GRIA3
SMC1A/SMC1L1	IQSEC2	ZDHHC9	ZNF711
SRPX2	SYP	HUWE1	MED12
UBE2A			

Total 13 genes were selected for additional screening On XLMR male patients in the repositories

Results of additional 13 XLMR gene tests

Gene Symbol	mRNA (bp)	exon	Resi	ults
Synapse-relate	d		Group 1 (%)	Group 2 (%)
SYP	2449	6	2/53 (3.8)	0/131(0)
GRIA3	5195	16	0/53	
RAB39B	3499	2	0/53	
ZDHHC15	1782	11	0/53	
Transcription f	actors			
ZNF 674	2689	6	0/43	
ZNF711	4182	7	0/53	
JARID1C	6097	26	2/53 (3.8)	1/113 (0.08)
BRWD3	6097	41	Not done	
Ubiquitin-relate	ed			
HUWE1	14734	81	Not done	
CUL4B	5365	22	0/53	
Others				
RPL10	2335	6	1/53 (1.9)	0/113(0)
ZDHHC9	2949	10	0/53	
SRPX2	2206	11	0/53	

2 Pedigrees (5 Patients)

2 / 184 (0.9%)

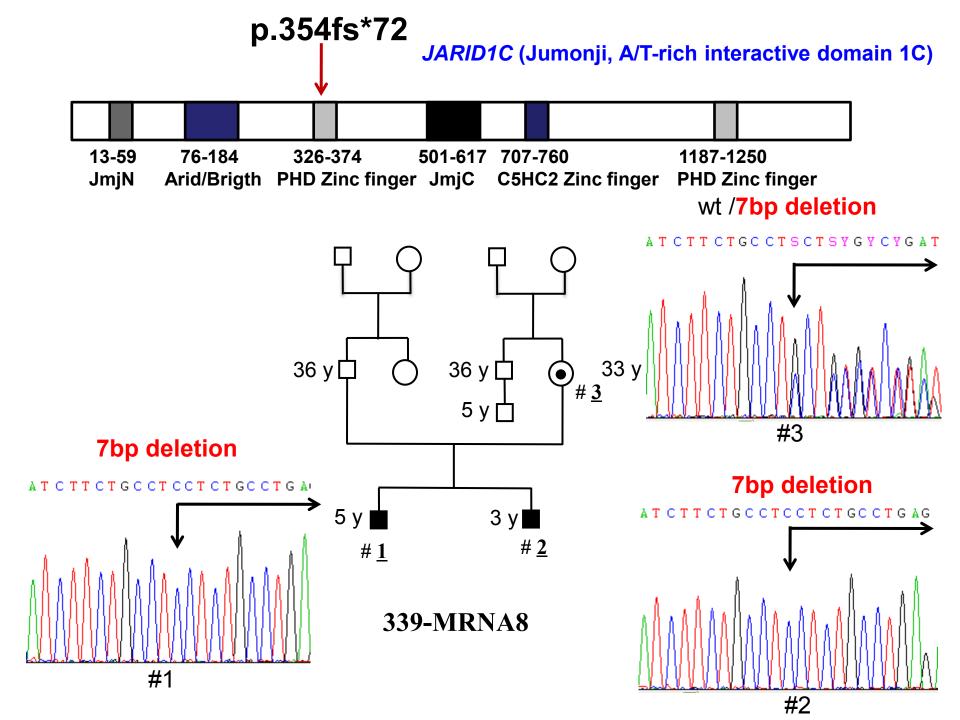
3 Pedigrees

(5 Patients)

3 / 168 (1.8%)

1 Pedigree(2 Patients)

1 / 166 (0.6%)



summary

- Very low frequencies of FXS in Japan was suggested: not only genetically, but also due to 'systems' related to FXS?
- 2. Teaching about FXS to medical people is important agenda.
- MR resource is good gateway to find FXS or its associated patients in Japan
- 4. Basic research is in progress to develop therapeutics based on epigenetic manner to treat FXS patients in future

Finally, 42 patients with fragile X syndrome were found in this study

To find more patients, to be more cooperative, and to raise FXS publicity more, are key challenges in Japanese FXS study

