

Cockayne Syndrome

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Cs phenotypic spectrum

- Although there are 3 types (I, II, and III), there are common phenotypic characteristics:
 - Short stature and microcephaly
 - Premature aging
 - Intellectual disabilities
 - Photosensitivity
 - Eye abnormalities (cataracts, pigmentary retinopathy, etc.)
 - Impaired development of the nervous system
- CS Type I (“moderate” form):
 - Normal prenatal growth
 - Growth and developmental abnormalities by the 2nd year
 - Mean age of death is 12 years though some have lived to over 30

Cs phenotypic spectrum continued

- CS Type II:
 - Growth failure is apparent at birth and/or neonatal period
 - Most severe out of all types
 - Many signs overlap with cerebro-oculo-facio-skeletal (COFS) syndrome and/or Pena-Shokeir syndrome type II
 - Death generally occurs after 7 years
- CS Type III:
 - Mild or late onset
 - Growth and cognitive function are “normal” and exceed those of CS type I; clinical features are associated with CS
- Xeroderma pigmentosum–CS (XP-CS):
 - A similar DNA repair disorder characterized by facial freckling and skin cancers (not found in CS)

Classical diagnosis

- CS Type I:
 - Postnatal growth failure (<5th percentile by 2nd year)
 - Progressive microcephaly and neurologic dysfunction
 - Photosensitivity, eye atrophy, hearing loss, dental abnormalities (e.g. excessive caries)
- CS Type II:
 - Growth failure and little postnatal growth
 - Little or no postnatal neurologic development
 - Presence of congenital cataracts
- CS Type III:
 - Was recently confirmed as an additional type
 - Much more mild than the other 2 types and appears later in childhood

<http://phobos.ramapo.edu/~pbagga/cs.JPG>



<http://avaxnews.com/pictures/13467>

Type II: <http://cockaynesyndrome.net/main/MeettheKids/NathanPrantePrice.aspx>

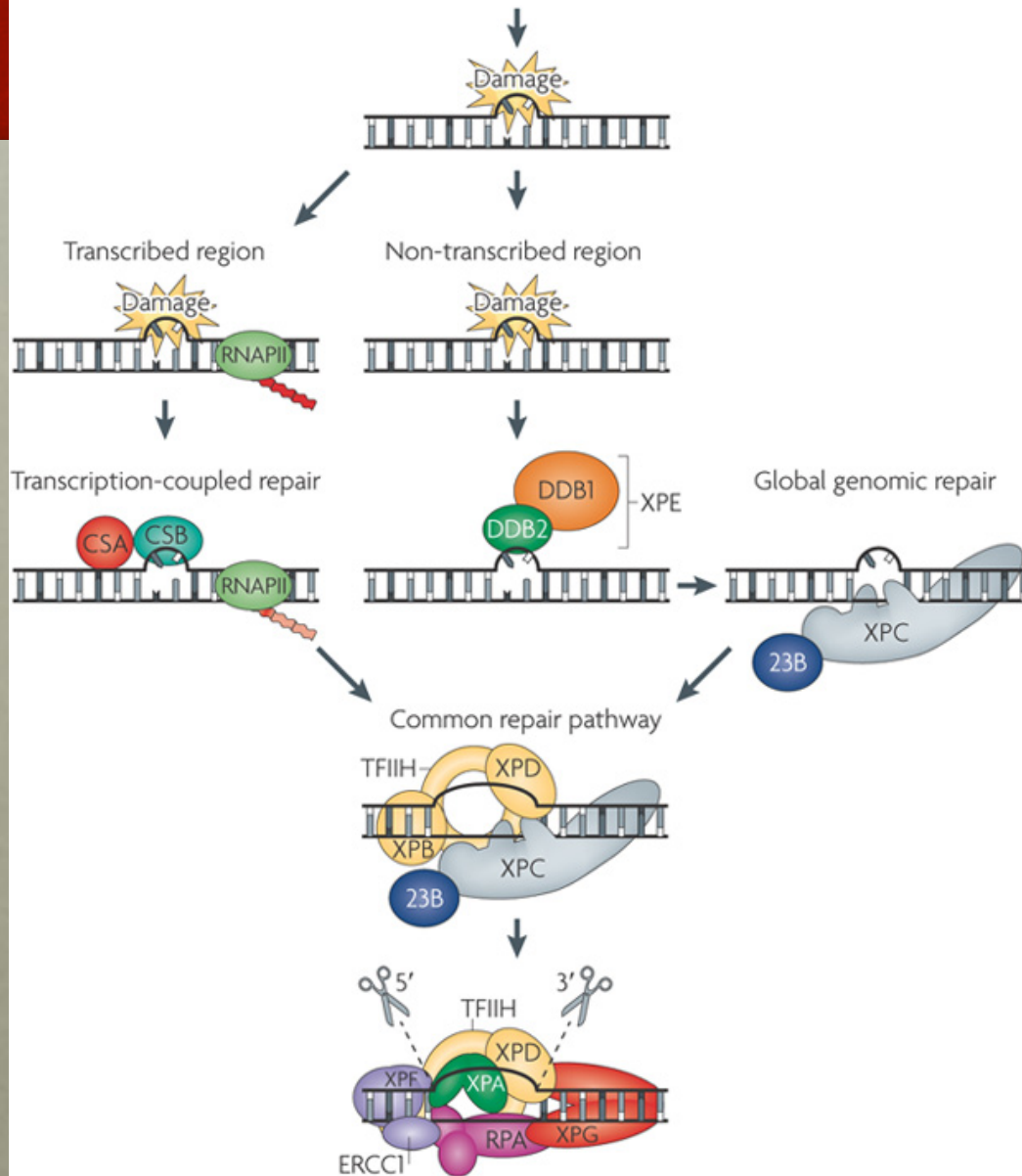
ERcc6 and ercc8

Gene Symbol	% of CS associated with this gene	Chromosomal Locus	CS Type
ERCC6	65%	10q11.23	CS Type II
ERCC8	35%	5q12.1	CS Type I

- Autosomal recessive
- ERCC (excision repair cross-complementing rodent repair deficiency, complementation group 6/8)
 - Mutations cause for the proteins (CSA and CSB) to be defective in gene repair

Exogenous damage (e.g. UV)
Endogenous damage (e.g. ROS)

Exogenous antioxidants
Endogenous antioxidants



<http://www.nature.com/nrg/journal/v10/n11/images/nrg2663-i1.jpg>

Modern diagnostics

- DNA Repair Assay
- Complementation groups (research basis only)
- DNA sequence analysis
- Deletion/duplication analysis
- Carrier testing
- Prenatal diagnosis & preimplantation genetic diagnosis

treatment

- Developmental education programs
- Physical therapy and ambulation-assisted devices
- G-tube (gastrostomy tube) feeding
- Management of hearing loss
- Sunscreen
- Sunglasses
- Aggressive dental care
- No cure or exceptionally effective treatment of the disease

Bibliography

- <http://www.ncbi.nlm.nih.gov/books/NBK1342/>
- <http://www.ncbi.nlm.nih.gov/pubmed/10767341>
- <http://www.ncbi.nlm.nih.gov/gene/1161>
- <http://www.ncbi.nlm.nih.gov/gene/2074>
- <http://ghr.nlm.nih.gov/condition/cockayne-syndrome>
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