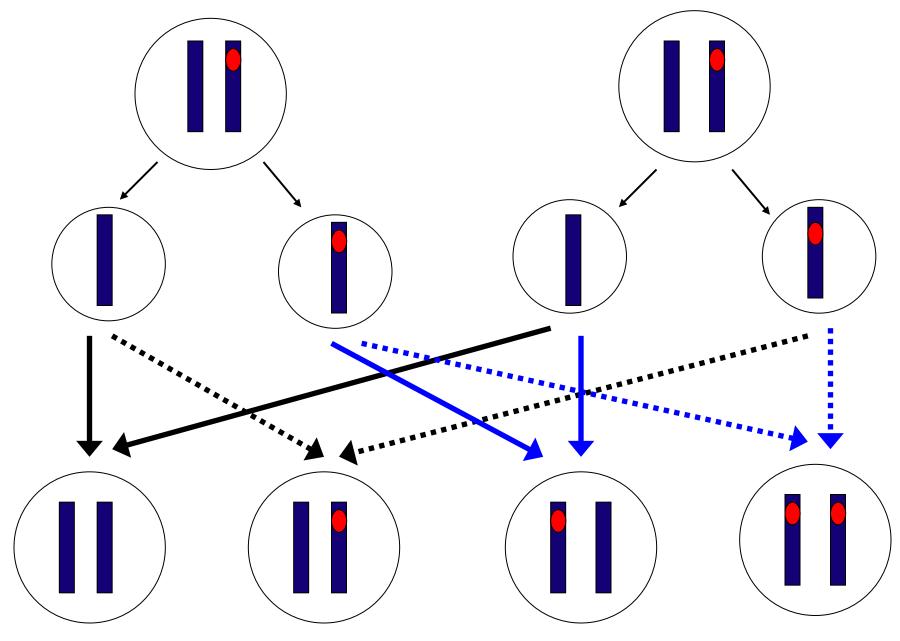
Common Genetics Conditions seen in General Practice

- Haemochromatosis
- Alpha 1 anti-trypsin deficiency
- Familial hypercholesterolaemia
- Suspected Marfan syndrome

Haemochromatosis

- Autosomal Recessive with incomplete penetrance
- Causes progressive iron overload resulting in cirrhosis, diabetes, skin pigmentation and testicular failure
- Incidence about 1/2000, carrier rate about 1/10
- Iron studies show increased serum ferritin and raised transferrin saturation levels
- 2 common mutations C282Y and H63D
- 90% of symptomatic patients are C282Y homozygous, remainder are compound heterozygotes
- Treated by venesection
- Genetic testing can be requested by primary care

Autosomal Recessive Inheritance



Alpha 1 antitrypsin Deficiency

- Autosomal Recessive with variable expression
- Incidence 1/1600 1/1800, carrier rate 1/10
- Predisposes to emphysema and cirrhosis
- Normal variant M variant
- S variant 40% reduction in alpha 1 antitrypsin levels in SS individuals
- Z variant 85% reduction in homozygotes
- Rarely ZZ homozygotes will develop severe neonatal liver disease
- Genetic testing can be requested by primary care

Familial Hypercholesterolaemia

- 1 in 250 people
- Autosomal dominant
- 13X risk of coronary artery disease
- LDLR, APLB, PCSK9
- Think about if
 - Total cholesterol > 7.5 mmol/L and / or
 - Personal or first degree relative with premature coronary artery disease under 60
- Referral to lipid clinic or inherited cardiac conditions clinic

Autosomal Dominant Inheritance Parents

Marfan Syndrome







From Dean JCS (2007) Eur J Hum Genet 15: 724-33

Marfan Syndrome

Table 1 Ghent diagnostic nosology

| System | Major criterion | Involvement |
|--------------------------|--|--|
| Skeletal | At least 4 of the following features: Pectus carinatum Pectus excavatum requiring surgery ULSR < 0.86 or span:height > 1.05 Wrist and thumb signs Scoliosis > 20° or spondylolisthesis Reduced elbow extension (<170°) Pes plenus | 2 of the major features, or 1 major feature and 2 of the following: Pectus excavatum Joint hypermobility High palate with dental Crowding Characteristic face |
| Ocular | Protrusio acetabulae Lens dislocation (ectopia lentis) | Flat cornea Increased axial length of globe (causing myopia) Hypoplastic iris or ciliary muscle (causing decreased miosis) |
| Cardiovascular | Dilatation of the aortic root Dissection of the ascending aorta | Mitral valve prolapse Dilatation of the pulmonary artery, below age 40 Calcified mitral annulus, below age 40 Other dilatation or dissection of the aorta Spontaneous pneumothorax Apical blebs Striae atrophicae Recurrent or incisional hernia None None |
| Pulmonary | None | |
| Skin/Integument | None | |
| Dura Genetic findings | Lumbosacral dural ectasia Parent, child or sibling meets these criteria independently Fibrillin 1 mutation known to cause Marfan syndrome Inheritance of DNA marker haplotype linked to Marfan syndrome in the family | |

Abbreviations: ULSR, Upper:lower segment ratio.

Having one of the features listed constitutes a major criterion or system involvement for all systems except the skeletal system, where more than one feature is needed.