

# Investigation of the Overlapping Phenotypes of Rett Syndrome (RTT)

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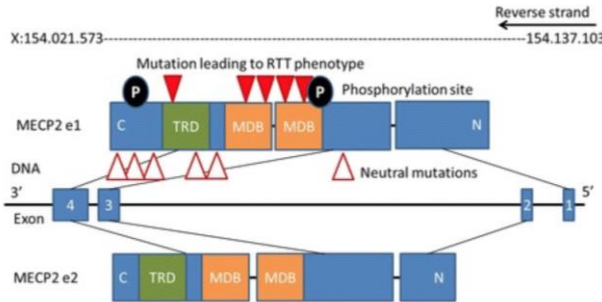
# Rett Syndrome

- Rare genetic disorder
  - 1:10.000 female life births
- Decreased brain development and brain function
- Motoric, developmental and cognitive problems
- Developmental stages characterized by phenotypes
  - Developmental arrest, hand stereotypies, autistic like behavior, seizures, microcephaly

# Causes

- De novo mutations in *MECP2* (X chromosome)
  - Transcriptional repression and activation
  - Alternative splicing
  - Regulation of microRNAs and long non-coding RNAs

• FOI  
• CD  
• Wh



→ additional 70 genes

# Diagnosis

- Diagnosis based on phenotypes
    - Regression followed by a stabilization phase
    - Main criteria
    - Supportive criteria
  - Genetic testing
  - Diagnosis of genetic disorders based on phenotype
  - Disorders have similar phenotypes
  - Misdiagnosis
- Hand stereotypies
  - Loss of speech
  - Gait abnormalities
  - Loss of purposeful hand skills

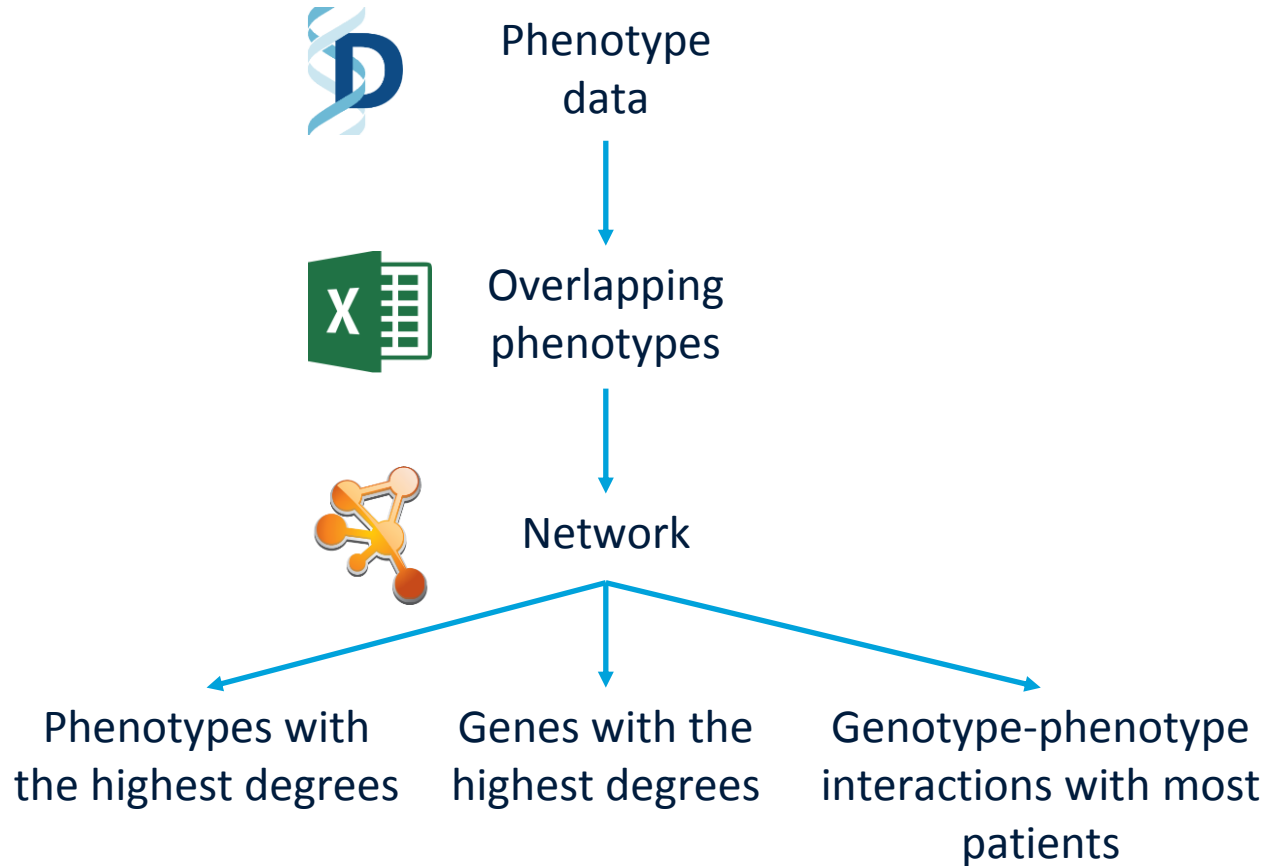
disturbances

  - Scoliosis
  - Growth retardation
  - Small cold feet/hands
  - Inappropriate laughing
  - Diminished pain response
  - Intense eye communication

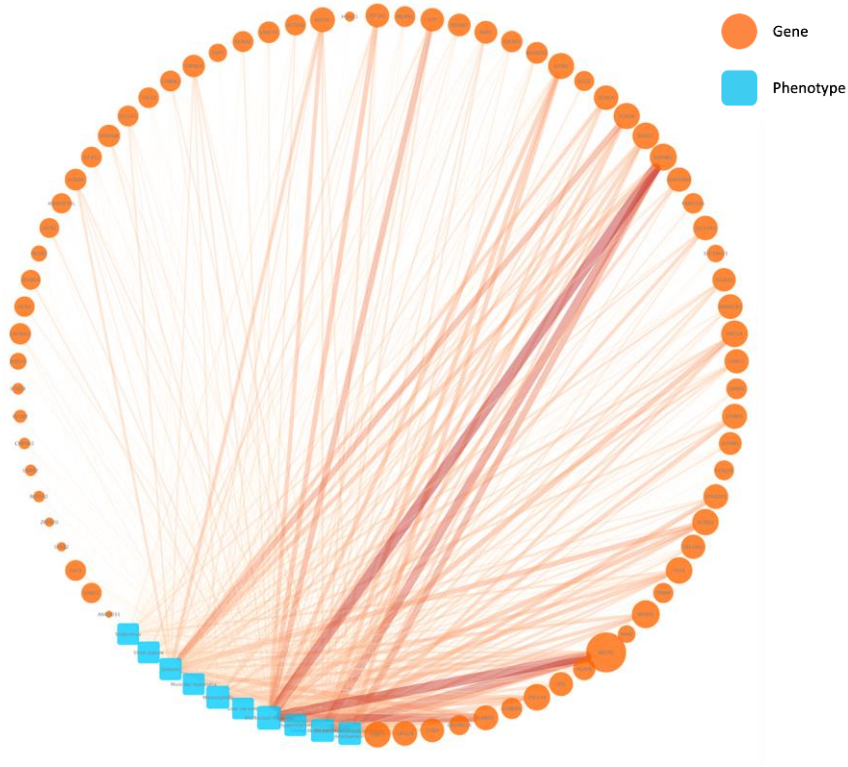
# Research question

To which extent do the phenotypes of genes responsible for a RTT-like phenotype overlap with the phenotypes associated with a mutation in *MECP2*?

# Method



# Phenotypes

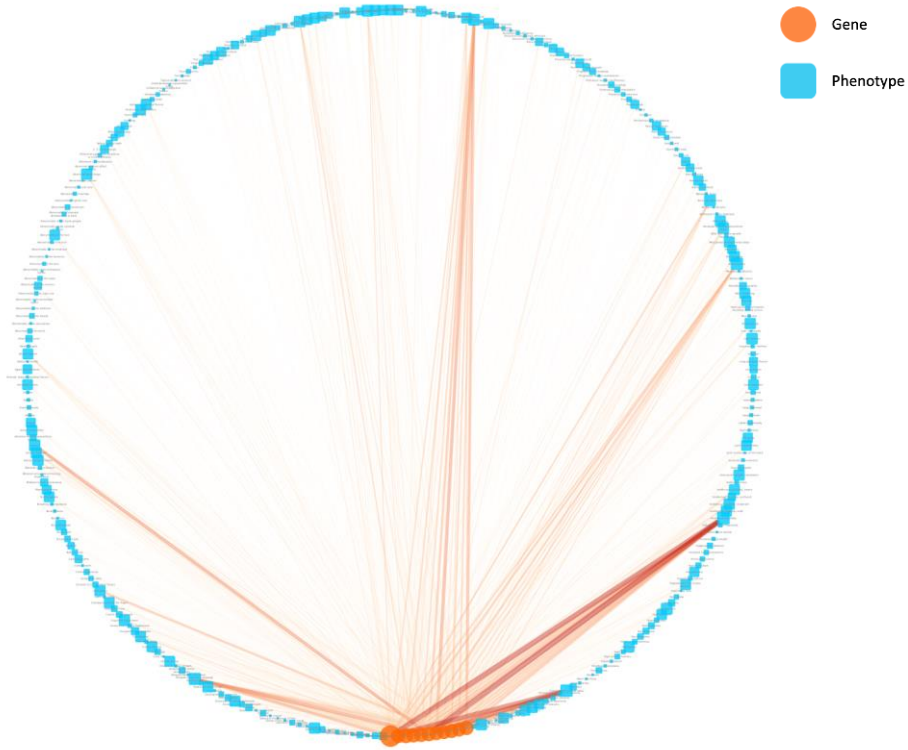


## Phenotype

## Degree

Intellectual disability	71
Global developmental delay	63
Microcephaly	61
Delayed speech and language development	60
Seizures	50
Hypertelorism	49
Short stature	49
Muscular hypotonia	48
Low-set ears	45
Strabismus	45

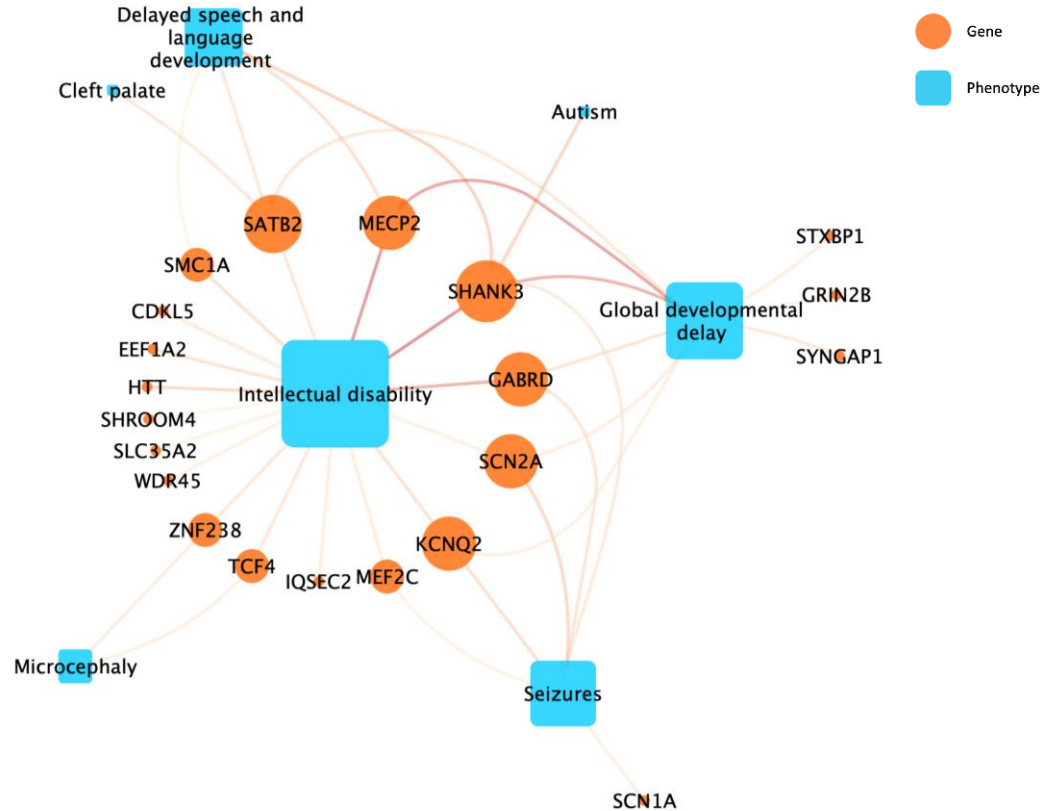
# Genes



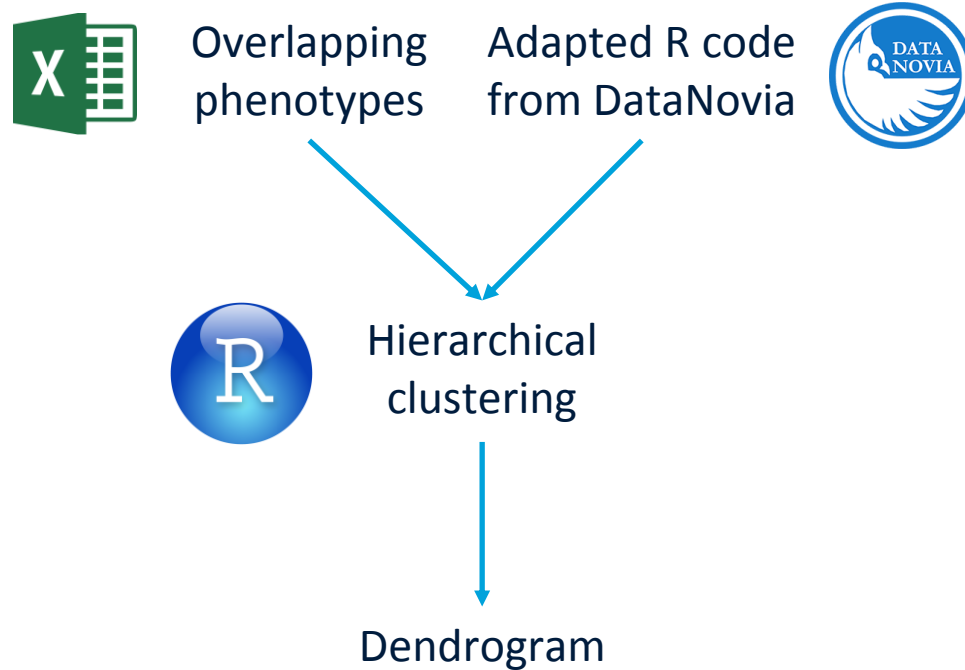
Gene	Degree
WDR45	127
SHANK3	114
SMC1A	112
ZNF238	111
IQSEC2	109
TCF4	109
KCNQ2	107
SCN2A	104
CDKL5	103
SATB2	102



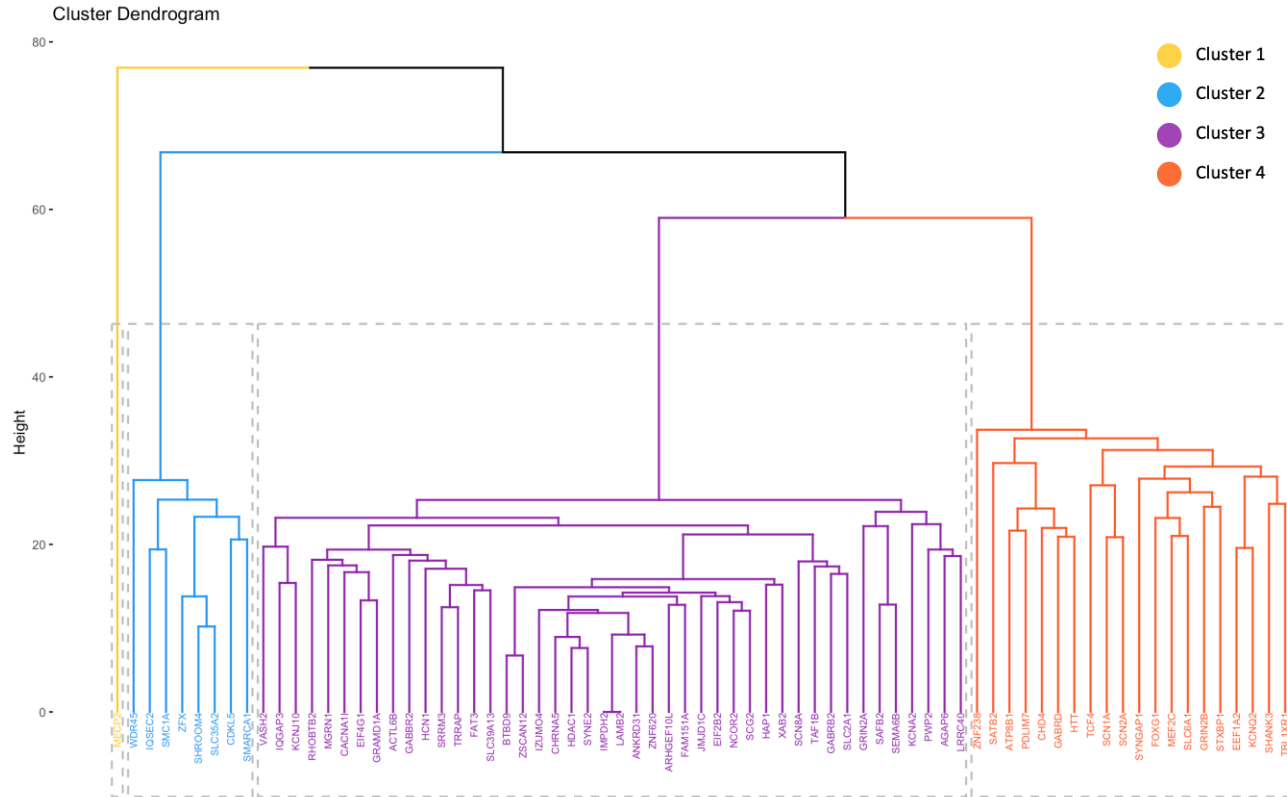
# Genotype-phenotype interactions



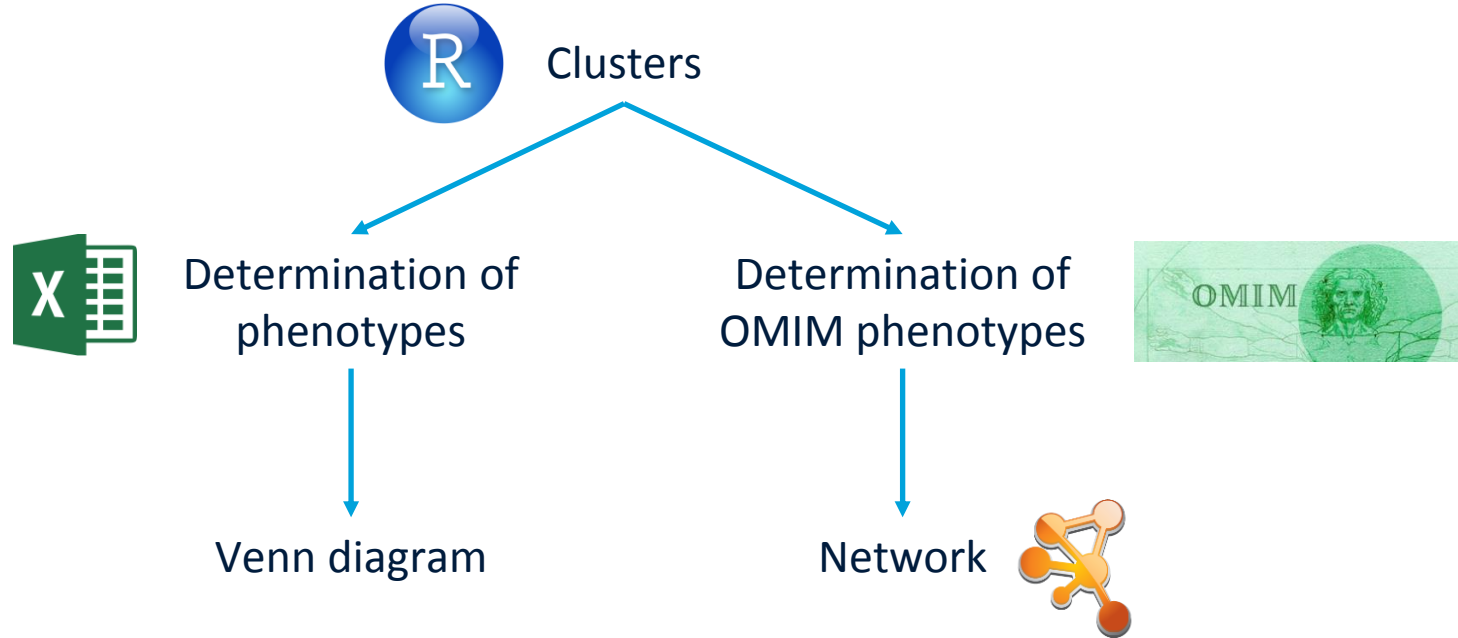
# Method



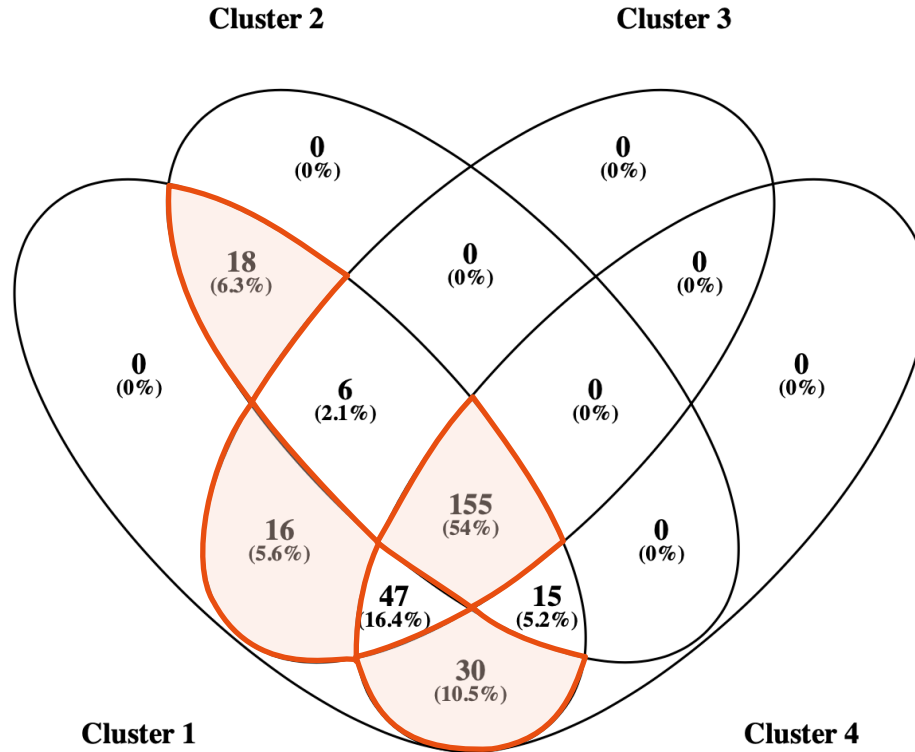
# Hierarchical clustering

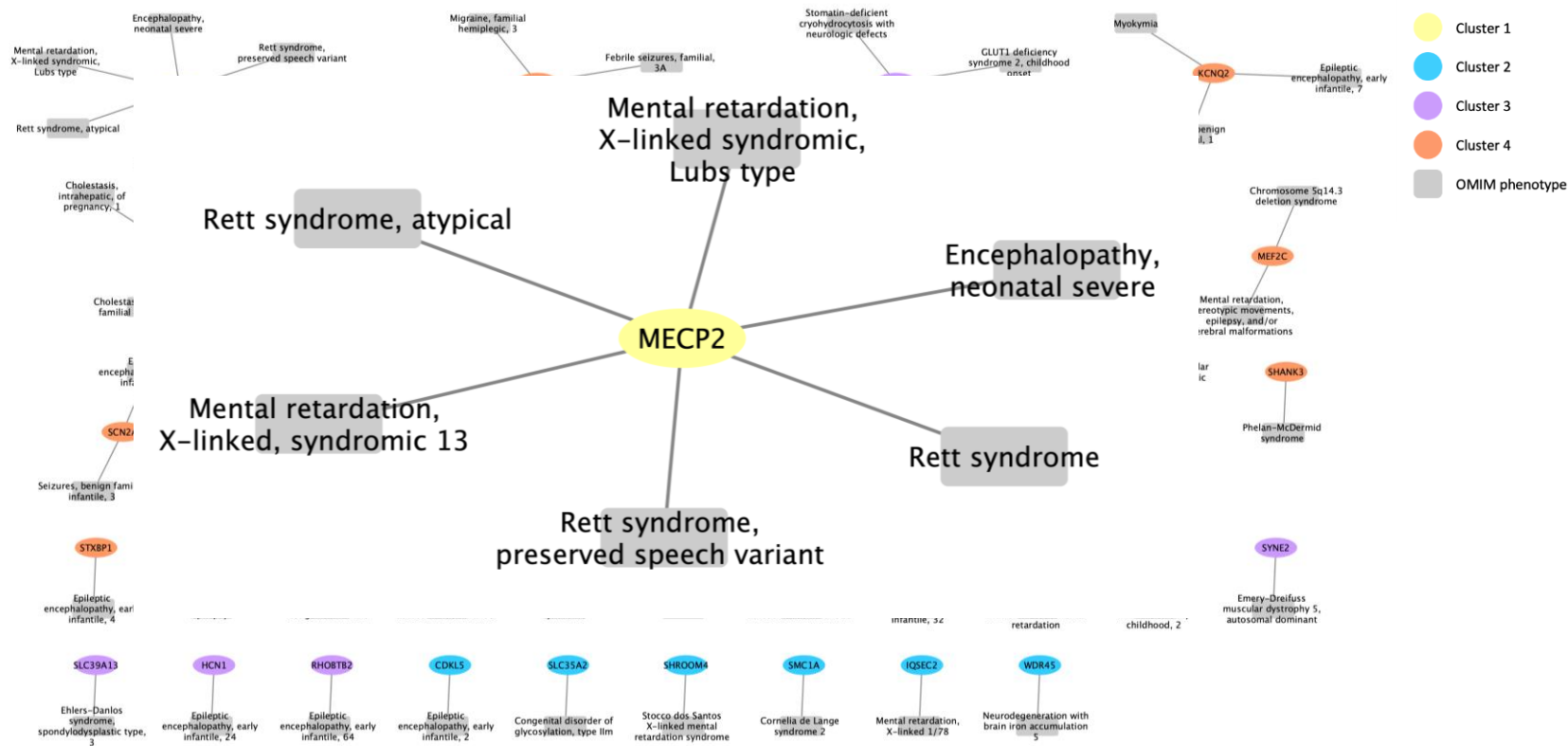


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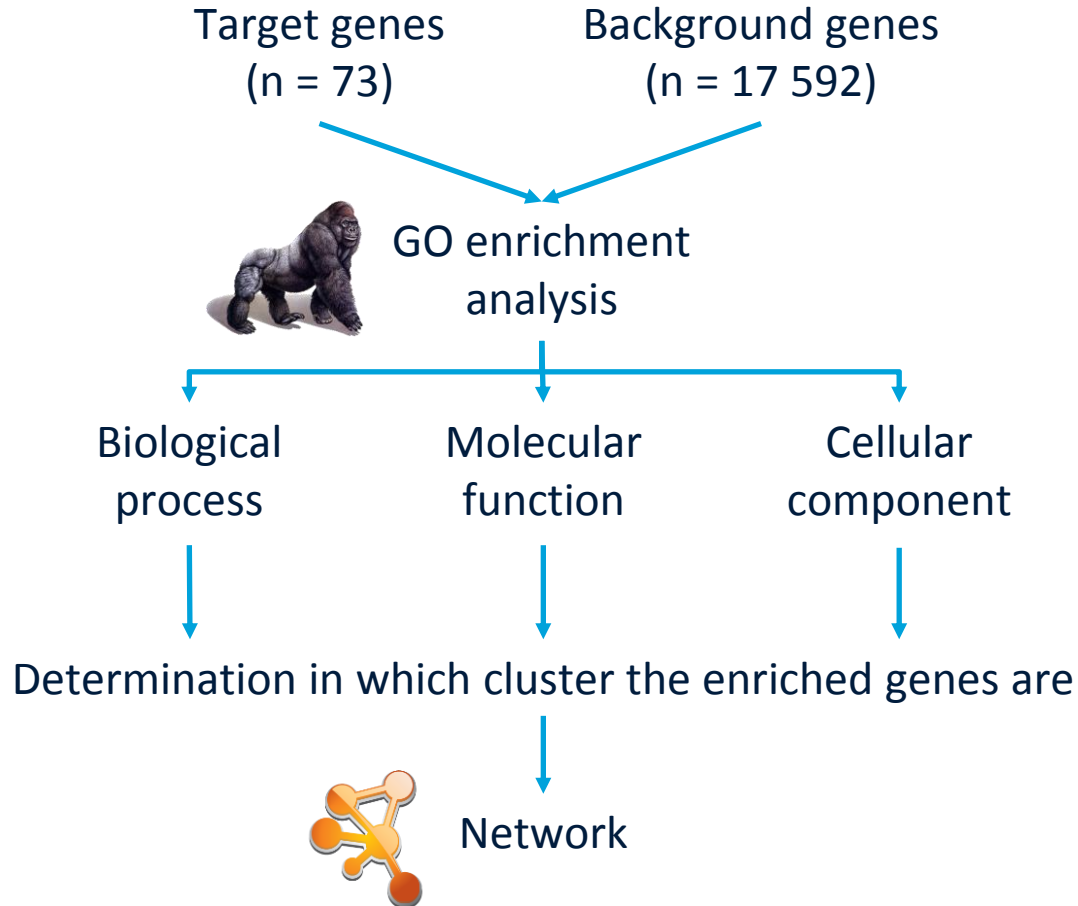


# Phenotypes

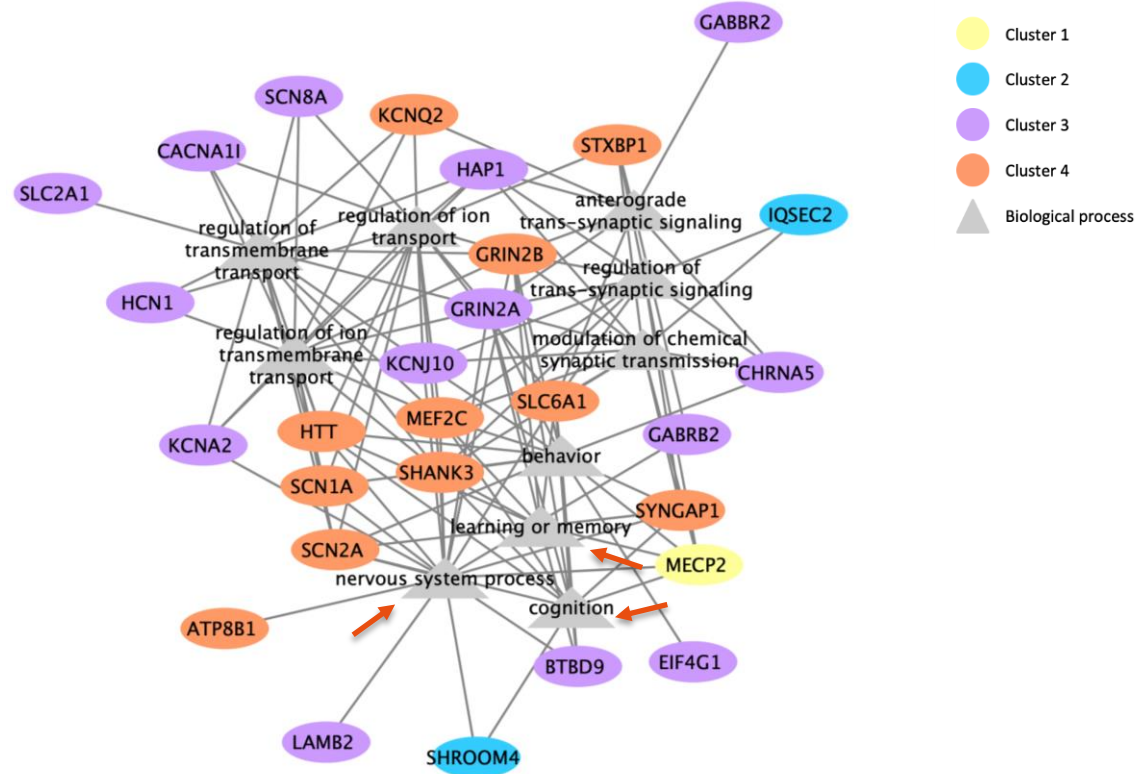




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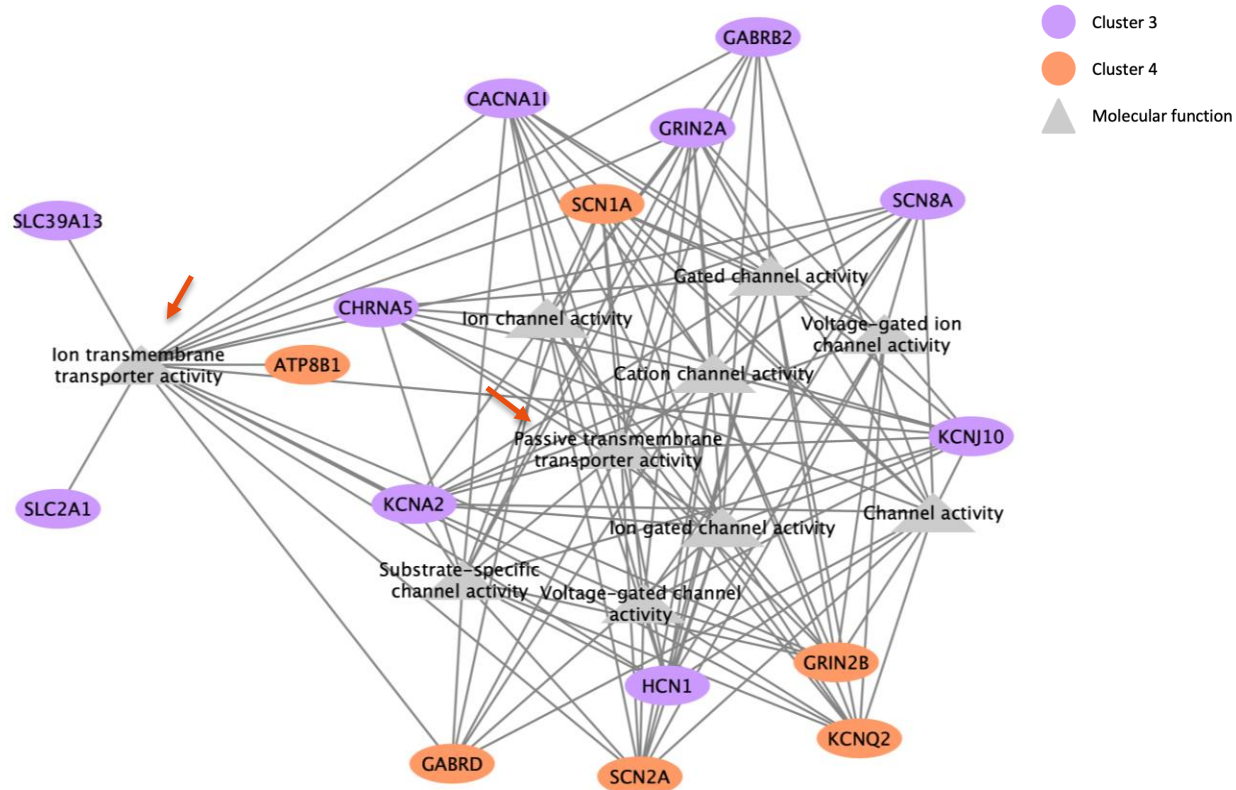


# GO – Biological process

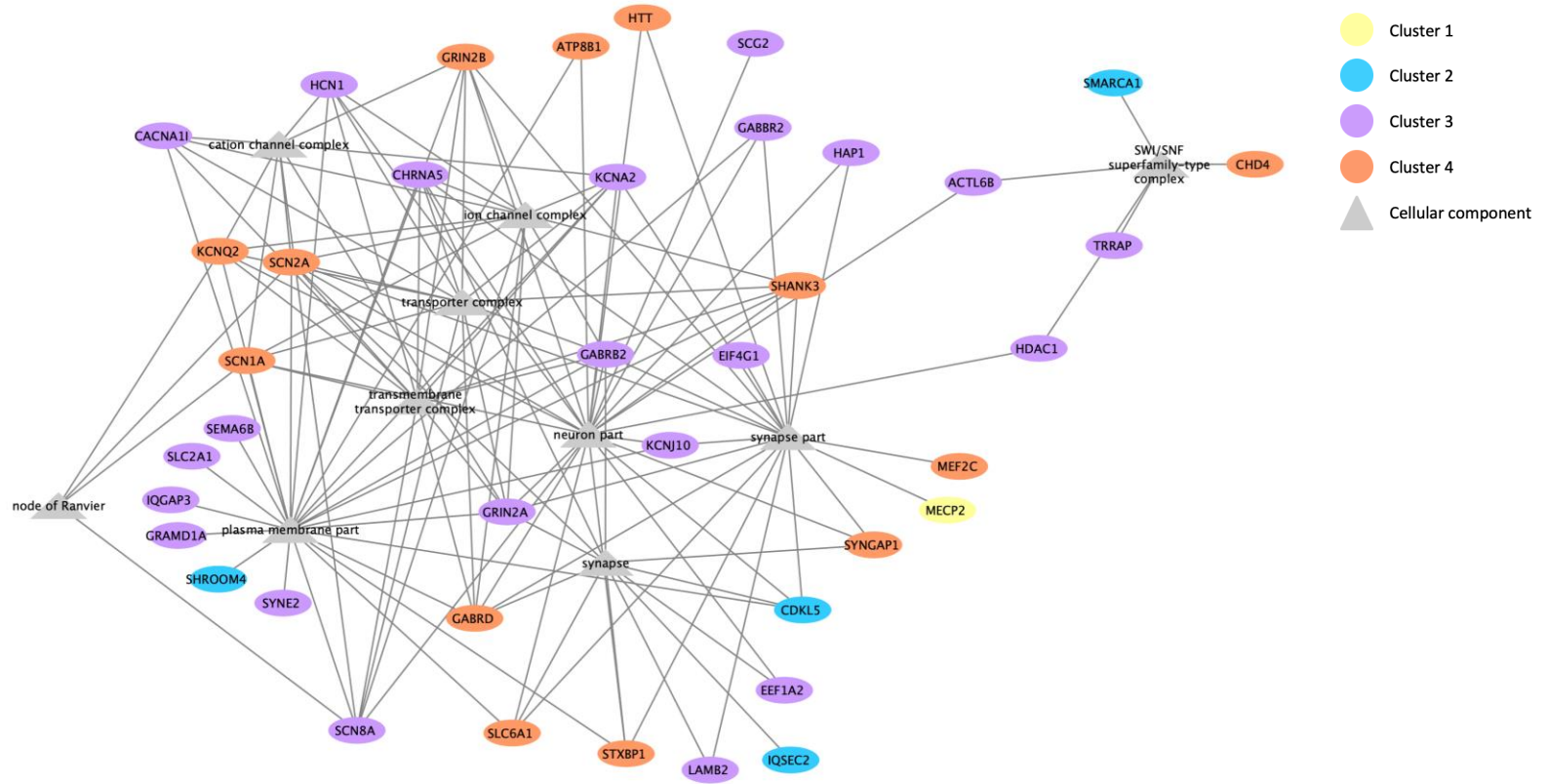




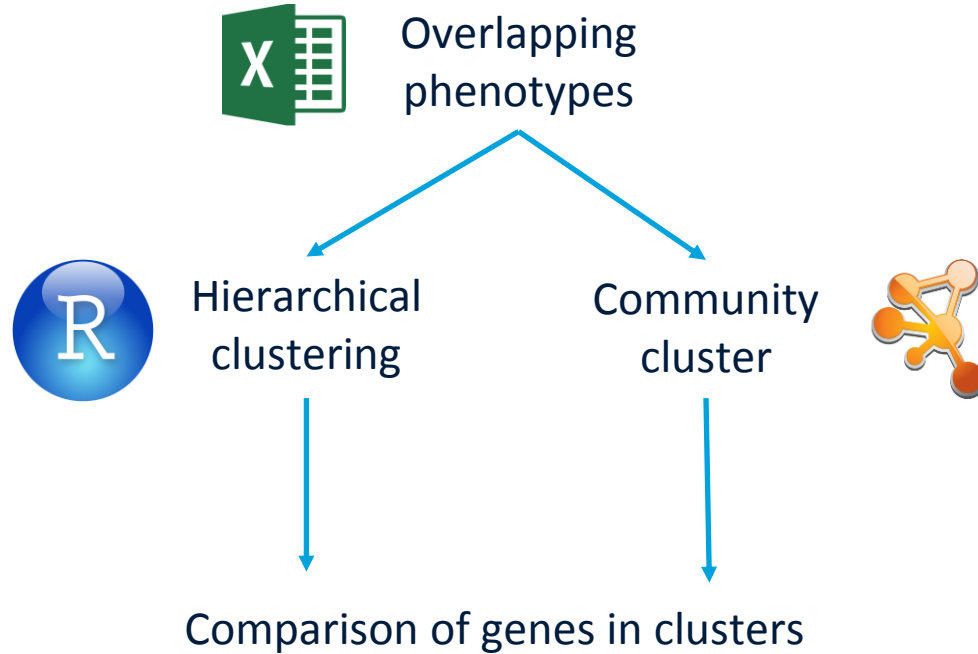
# GO – Molecular function



# GO – Cellular component







# Method







# Community Cluster

Cluster	Genes
1	ACTL6B, AGAP6, ANKRD31, ARHGEF10L, CACNA1I, CHD4, CHRNA5, EEF1A2, EIF2B2, EIF4G1, FAM151A, FAT3, GABBR2, GABRB2, GABRD, GRAMD1A, GRIN2A, HAP1, HDAC1, HTT, IMPDH2, IZUMO4, JMJD1C, KCNA2, LAMB2, LRRC40, MGRN1, NCOR2, PDLIM7, PWP2, RHOTB2, SAFB2, SCG2, SCN1A, SEMA6B, SLC39A13, SRRM3, SYNE2, TAF1B, TRRAP, XAB2, ZNF238, ZSCAN12
2	ATP8B1, BTBD9, FOXG1, GRIN2B, KCNQ2, MEF2C, SATB2, SCN2A, SCN8A, SHANK3, SLC2A1, SLC6A1, STXBP1, SYNGAP1, TBL1XR1, TCF4, ZNF620
3	CDKL5, HCN1, IQGAP3, IQSEC2, KCNJ10, MECP2, SHROOM4, SLC35A2, SMARCA1, SMC1A, VASH2, WDR45, ZFX

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# Discussion

- Genes with the highest degrees more similar to *MECP2*
  - Associated with other disorders
- Similar manifestation to RTT
- Several phenotypes differed between clusters
  - No correlation between phenotypes
- Inconclusive results



# Discussion

- Hierarchical and community clusters similar
- GO enrichment analysis showed tendencies
  - Clustering and GO enrichment analysis could improve understanding of overlapping phenotypes
- OMIM phenotypes not specific for clusters
  - Mental retardation and Encephalopathy most common
  - Indirect involvement in pathogenesis of RTT?

# Discussion

- Spectrum disorder instead of monogenic disorder
- Misdiagnosis of patients
  - Broadened genetic screening
- Overlapping phenotypes due to overlap in pathways
  - *NCOR2* and *HDAC1* in co-repressor complexes
  - Mutations in *MEF2C* decrease *MECP2* expression

# Limitations

- Inconsistent amounts of phenotype data
  - Genes with highest degrees → most phenotype data

➤ Results were influenced

Gene name	Number of phenotypes Total (overlap)	Number of patients with phenotype data
MECP2	331 (287)	150
SHANK3	248 (114)	134
GABRD	200 (86)	86
SMCH1A	189 (112)	81
IQSEC2	179 (109)	80
KCNQ2	194 (107)	75
WDR45	209 (127)	73
SCN2A	194 (104)	73
SATB2	210 (102)	70
CDKL5	162 (103)	70
TCF4	213 (109)	66
ZNF238	213 (111)	61

- A different clustering method would have resulted in a different dendrogram

# Conclusion

- There was phenotypic overlap to a certain extend
  - However, overlap influenced by the available amount of phenotype data
- Patient phenotype data beneficial to understand the overlap
- Better understanding of Rett syndrome
  - Misdiagnosis or spectrum disorder

# Outlook

- Repeat when more data is available
- Normalization of the data
- Include data from other databases
  - DisGeNET, Human Phenotype Ontology
- More research on the mechanisms behind overlap

# Acknowledgement

I would like to thank my supervisor Friederike Ehrhart for guiding and advising me during my internship

# Questions?