15q13.3 Microdeletion

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15q13.3 microdeletion is a chromosomal change in which a small piece of chromosome 15 is deleted in each cell. The deletion occurs on the long (q) arm of the chromosome at a position designated q13.3. This chromosomal change increases the risk of intellectual disability, seizures, behavioral problems, and psychiatric disorders. However, some people with a 15q13.3 microdeletion do not appear to have any associated features.

genetic conditions

1. Introduction

About half of all people with a 15q13.3 microdeletion have learning difficulties or intellectual disability, which is usually mild or moderate. Many of these individuals have delayed speech and language skills. 15q13.3 microdeletion also appears to be a major risk factor for recurrent seizures (epilepsy); about one-third of people with this chromosomal change have epilepsy.

15q13.3 microdeletion has also been associated with behavioral problems, including a short attention span, aggression, impulsive behavior, and hyperactivity. Some people with a 15q13.3 microdeletion have been diagnosed with developmental disorders that affect communication and social interaction (autism spectrum disorders). This chromosomal change may also be associated with an increased risk of psychiatric disorders, particularly schizophrenia. Other signs and symptoms of 15q13.3 microdeletion can include heart defects, minor abnormalities involving the hands and arms, and subtle differences in facial features.

Some people with a 15q13.3 microdeletion do not have any of the intellectual, behavioral, or physical features described above. In these individuals, the microdeletion is often detected when they undergo genetic testing because they have an affected relative. It is unknown why a 15q13.3 microdeletion causes cognitive and behavioral problems in some individuals but few or no health problems in others.

2. Frequency

15q13.3 microdeletion likely occurs in about 1 in 40,000 people in the general population. It appears to be more common in people with intellectual disability, epilepsy, schizophrenia, or autism spectrum disorders.

3. Causes

Most people with a 15q13.3 microdeletion are missing a sequence of about 2 million DNA building blocks (base pairs), also written as 2 megabases (Mb), at position q13.3 on chromosome 15. The exact size of the deleted region varies, but it typically contains at least six genes. This deletion usually affects one of the two copies of chromosome 15 in each cell.

The signs and symptoms that can result from a 15q13.3 microdeletion are probably related to the loss of one or more genes in this region. However, it is unclear which missing genes contribute to the specific features of the disorder. Because some people with a 15q13.3 microdeletion have no obvious signs or symptoms, researchers believe that other genetic or environmental factors may also be involved.

3.1. The chromosome associated with 15q13.3 microdeletion

• chromosome 15

4. Inheritance

15q13.3 microdeletion is inherited in an autosomal dominant pattern, which means one copy of the deleted region on chromosome 15 in each cell is sufficient to increase the risk of intellectual disability and other characteristic features.

In about 75 percent of cases, individuals with 15q13.3 microdeletion inherit the chromosomal change from a parent. In the remaining cases, 15q13.3 microdeletion occurs in people whose parents do not carry the chromosomal change. In these individuals, the deletion occurs most often as a random event during the formation of reproductive cells (eggs and sperm) or in early fetal development.

5. Other Names for This Condition

- 15q13.3 microdeletion syndrome
- chromosome 15q13.3 deletion syndrome

References

 Ben-Shachar S, Lanpher B, German JR, Qasaymeh M, Potocki L, Nagamani SC, Franco LM, Malphrus A, Bottenfield GW, Spence JE, Amato S, Rousseau JA, MoghaddamB, Skinner C, Skinner SA, Bernes S, Armstrong N, Shinawi M, Stankiewicz P, Patel A, Cheung SW, Lupski JR, Beaudet AL, Sahoo T. Microdeletion 15q13.3: a locus withincomplete penetrance for autism, mental retardation, and psychiatric disorders. J Med Genet. 2009 Jun;46(6):382-8. doi: 10.1136/jmg.2008.064378.

- 2. Hassfurther A, Komini E, Fischer J, Leipoldt M. Clinical and GeneticHeterogeneity of the 15q13.3 Microdeletion Syndrome. Mol Syndromol. 2016Feb;6(5):222-8. doi: 10.1159/000443343.
- 3. Helbig I, Mefford HC, Sharp AJ, Guipponi M, Fichera M, Franke A, Muhle H, deKovel C, Baker C, von Spiczak S, Kron KL, Steinich I, Kleefuss-Lie AA, Leu C,Gaus V, Schmitz B, Klein KM, Reif PS, Rosenow F, Weber Y, Lerche H, Zimprich F,Urak L, Fuchs K, Feucht M, Genton P, Thomas P, Visscher F, de Haan GJ, Møller RS,Hjalgrim H, Luciano D, Wittig M, Nothnagel M, Elger CE, Nürnberg P, Romano C,Malafosse A, Koeleman BP, Lindhout D, Stephani U, Schreiber S, Eichler EE, SanderT. 15q13.3 microdeletions increase risk of idiopathic generalized epilepsy. NatGenet. 2009 Feb;41(2):160-2. doi: 10.1038/ng.292.
- Lowther C, Costain G, Stavropoulos DJ, Melvin R, Silversides CK, Andrade DM,So J, Faghfoury H, Lionel AC, Marshall CR, Scherer SW, Bassett AS. Delineatingthe 15q13.3 microdeletion phenotype: a case series and comprehensive review of the literature. Genet Med. 2015 Feb;17(2):149-57. doi: 10.1038/gim.2014.83.
- Masurel-Paulet A, Andrieux J, Callier P, Cuisset JM, Le Caignec C, Holder M, Thauvin-Robinet C, Doray B, Flori E, Alex-Cordier MP, Beri M, Boute O, Delobel B, Dieux A, Vallee L, Jaillard S, Odent S, Isidor B, Beneteau C, Vigneron J, BilanF, Gilbert-Dussardier B, Dubourg C, Labalme A, Bidon C, Gautier A, Pernes P, Pinoit JM, Huet F, Mugneret F, Aral B, Jonveaux P, Sanlaville D, Faivre L.Delineation of 15q13.3 microdeletions. Clin Genet. 2010 Aug;78(2):149-61. doi:10.1111/j.1399-0004.2010.01374.x.
- 6. Sharp AJ, Mefford HC, Li K, Baker C, Skinner C, Stevenson RE, Schroer RJ,Novara F, De Gregori M, Ciccone R, Broomer A, Casuga I, Wang Y, Xiao C,Barbacioru C, Gimelli G, Bernardina BD, Torniero C, Giorda R, Regan R, Murday V, Mansour S, Fichera M, Castiglia L, Failla P, Ventura M, Jiang Z, Cooper GM,Knight SJ, Romano C, Zuffardi O, Chen C, Schwartz CE, Eichler EE. A recurrent15q13.3 microdeletion syndrome associated with mental retardation and seizures.Nat Genet. 2008 Mar;40(3):322-8. doi: 10.1038/ng.93.
- 7. van Bon BW, Mefford HC, Menten B, Koolen DA, Sharp AJ, Nillesen WM, Innis JW, de Ravel TJ, Mercer CL, Fichera M, Stewart H, Connell LE, Ounap K, Lachlan K,Castle B, Van der Aa N, van Ravenswaaij C, Nobrega MA, Serra-Juhé C, Simonic I,de Leeuw N, Pfundt R, Bongers EM, Baker C, Finnemore P, Huang S, Maloney VK,Crolla JA, van Kalmthout M, Elia M, Vandeweyer G, Fryns JP, Janssens S, Foulds N,Reitano S, Smith K, Parkel S, Loeys B, Woods CG, Oostra A, Speleman F, PereiraAC, Kurg A, Willatt L, Knight SJ, Vermeesch JR, Romano C, Barber JC, Mortier G,Pérez-Jurado LA, Kooy F, Brunner HG, Eichler EE, Kleefstra T, de Vries BB.Further delineation of the 15q13 microdeletion and duplication syndromes: aclinical spectrum varying from non-pathogenic to a severe outcome. J Med Genet.2009 Aug;46(8):511-23. doi: 10.1136/jmg.2008.063412.
- van Bon BWM, Mefford HC, de Vries BBA. 15q13.3 Microdeletion. 2010 Dec 23[updated 2015 Jul 23]. In: Adam MP, Ardinger HH, Pagon RA, Wallace SE, Bean LJH, Stephens K, Amemiya A,

editors. GeneReviews® [Internet]. Seattle (WA): Universityof Washington, Seattle; 1993-2020. Available fromhttp://www.ncbi.nlm.nih.gov/books/NBK50780/

 Ziats MN, Goin-Kochel RP, Berry LN, Ali M, Ge J, Guffey D, Rosenfeld JA, BaderP, Gambello MJ, Wolf V, Penney LS, Miller R, Lebel RR, Kane J, Bachman K, TroxellR, Clark G, Minard CG, Stankiewicz P, Beaudet A, Schaaf CP. The complexbehavioral phenotype of 15q13.3 microdeletion syndrome. Genet Med. 2016Nov;18(11):1111-1118. doi: 10.1038/gim.2016.9.

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