GBA Gene

Subjects: Genetics & Heredity Contributor: Vivi Li

Glucosylceramidase beta

Keywords: genes

1. Normal Function

The *GBA* gene provides instructions for making an enzyme called beta-glucocerebrosidase. This enzyme is active in lysosomes, which are structures inside cells that act as recycling centers. Lysosomes use digestive enzymes to break down toxic substances, digest bacteria that invade the cell, and recycle worn-out cell components. Based on these functions, enzymes in the lysosome are sometimes called housekeeping enzymes. Beta-glucocerebrosidase is a housekeeping enzyme that helps break down a large molecule called glucocerebroside into a sugar (glucose) and a simpler fat molecule (ceramide). Glucocerebroside is a component of the membrane that surrounds cells. It gets broken down by beta-glucocerebrosidase when cells die, and the components are reused as new cells are formed.

2. Health Conditions Related to Genetic Changes

2.1 Parkinson Disease

Changes in the *GBA* gene are also associated with Parkinson disease and parkinsonism, which are similar disorders that affect movement. Characteristic features include tremors and impaired balance and coordination (postural instability). People with Gaucher disease (described above) have mutations in both copies of the *GBA* gene in each cell, while those with a mutation in just one copy of the gene are called carriers. People with Gaucher disease and people who are carriers of a *GBA* gene mutation have an increased risk of developing Parkinson disease or parkinsonism.

Symptoms of Parkinson disease and parkinsonism result from the loss of nerve cells (neurons) that produce dopamine. Dopamine is a chemical messenger that transmits signals within the brain to produce smooth physical movements. It remains unclear how *GBA* gene mutations are related to these disorders. Studies suggest that changes in this gene may contribute to the faulty breakdown of toxic substances in neurons by impairing the function of lysosomes. Alternatively, the changes may increase the formation of abnormal protein deposits. As a result, toxic substances or protein deposits could accumulate and kill dopamine-producing neurons, leading to abnormal movements and balance problems.

2.2 Gaucher Disease

More than 380 mutations in the *GBA* gene have been identified in people with Gaucher disease, a disorder with varied features that affect many parts of the body. Affected individuals can have enlargement of the liver and spleen (hepatosplenomegaly), blood cell abnormalities, and rarely, severe neurological problems. The mutations occur in both copies of the gene in each cell. Most of the *GBA* gene mutations responsible for Gaucher disease change single protein building blocks (amino acids) in beta-glucocerebrosidase, altering the structure of the enzyme and preventing it from working normally. Other mutations delete or insert genetic material in the *GBA* gene or lead to the production of an abnormally short, nonfunctional version of the enzyme.

Mutations in the *GBA* gene greatly reduce or eliminate the activity of beta-glucocerebrosidase in cells. As a result, glucocerebroside is not broken down properly. This molecule and related substances can build up in white blood cells called macrophages in the spleen, liver, bone marrow, and other organs. The abnormal accumulation and storage of these substances damages tissues and organs, causing the characteristic features of Gaucher disease.

2.3 Dementia with Lewy Bodies

GBA gene mutations can increase the risk of developing dementia with Lewy bodies; however, some people with a mutation in the *GBA* gene never develop this condition. Dementia with Lewy bodies is characterized by intellectual decline (dementia); visual hallucinations; sudden changes in attention and mood; and movement problems characteristic of Parkinson disease (described above) such as rigidity of limbs, tremors, and impaired balance and coordination.

Mutations in one copy of the *GBA* gene increase the risk of developing dementia with Lewy bodies. These mutations result in the production of an altered beta-glucocerebrosidase enzyme. This abnormal enzyme may interfere with the function of lysosomes and the normal breakdown of a protein called alpha-synuclein, which increases the risk that these proteins accumulate and form Lewy bodies. Accumulation of these protein clusters throughout the brain impairs neuron function and ultimately causes cell death. Over time, the loss of neurons increasingly impairs intellectual and motor function and the regulation of emotions, resulting in the signs and symptoms of dementia with Lewy bodies.

3. Other Names for This Gene

- acid beta-glucosidase
- algucerase
- · beta-D-glucosyl-N-acylsphingosine glucohydrolase
- beta-glucocerebrosidase
- GBA1
- GLCM_HUMAN
- GLUC
- glucocerebrosidase
- glucocerebroside beta-glucosidase
- glucosidase, beta, acid
- glucosidase, beta; acid (includes glucosylceramidase)
- glucosphingosine glucosylhydrolase
- glucosylceramide beta-glucosidase
- imiglucerase

References

- 1. Aharon-Peretz J, Rosenbaum H, Gershoni-Baruch R. Mutations in theglucocerebrosidase gene and Parkinson's diseas e in Ashkenazi Jews. N Engl J Med. 2004 Nov 4;351(19):1972-7.
- Charrow J, Andersson HC, Kaplan P, Kolodny EH, Mistry P, Pastores G, Prakash-Cheng A, Rosenbloom BE, Scott CR, Wappner RS, Weinreb NJ. Enzymereplacement therapy and monitoring for children with type 1 Gaucher disease:conse nsus recommendations. J Pediatr. 2004 Jan;144(1):112-20. Review.
- Clark LN, Kartsaklis LA, Wolf Gilbert R, Dorado B, Ross BM, Kisselev S, Verbitsky M, Mejia-Santana H, Cote LJ, Andre ws H, Vonsattel JP, Fahn S, Mayeux R, Honig LS, Marder K. Association of glucocerebrosidase mutations with dementi awith lewy bodies. Arch Neurol. 2009 May;66(5):578-83. doi:10.1001/archneurol.2009.54.
- Clark LN, Ross BM, Wang Y, Mejia-Santana H, Harris J, Louis ED, Cote LJ, Andrews H, Fahn S, Waters C, Ford B, Fru cht S, Ottman R, Marder K. Mutations in the glucocerebrosidase gene are associated with early-onset Parkinson diseas e.Neurology. 2007 Sep 18;69(12):1270-7.
- 5. Cox TM. Gaucher disease: understanding the molecular pathogenesis of sphingolipidoses. J Inherit Metab Dis. 2001;24 Suppl 2:106-21; discussion 87-8. Review.
- 6. Germain DP. Gaucher's disease: a paradigm for interventional genetics. ClinGenet. 2004 Feb;65(2):77-86. Review.

- 7. Goker-Alpan O, Giasson BI, Eblan MJ, Nguyen J, Hurtig HI, Lee VM, Trojanowski JQ, Sidransky E. Glucocerebrosidas e mutations are an important risk factor forLewy body disorders. Neurology. 2006 Sep 12;67(5):908-10.
- 8. Jmoudiak M, Futerman AH. Gaucher disease: pathological mechanisms and modernmanagement. Br J Haematol. 200 5 Apr;129(2):178-88. Review.
- 9. Mata IF, Samii A, Schneer SH, Roberts JW, Griffith A, Leis BC, SchellenbergGD, Sidransky E, Bird TD, Leverenz JB, Ts uang D, Zabetian CP. Glucocerebrosidase gene mutations: a risk factor for Lewy body disorders. Arch Neurol. 2008Ma r;65(3):379-82. doi: 10.1001/archneurol.2007.68.
- 10. Nalls MA, Duran R, Lopez G, Kurzawa-Akanbi M, McKeith IG, Chinnery PF, Morris CM, Theuns J, Crosiers D, Cras P, Engelborghs S, De Deyn PP, Van Broeckhoven C,Mann DM, Snowden J, Pickering-Brown S, Halliwell N, Davidson Y, Gibbons L, HarrisJ, Sheerin UM, Bras J, Hardy J, Clark L, Marder K, Honig LS, Berg D, Maetzler W, Brockmann K, Gas ser T, Novellino F, Quattrone A, Annesi G, De Marco EV, RogaevaE, Masellis M, Black SE, Bilbao JM, Foroud T, Ghetti B, Nichols WC, Pankratz N,Halliday G, Lesage S, Klebe S, Durr A, Duyckaerts C, Brice A, Giasson BI,Trojanowski JQ, Hurtig HI, Tayebi N, Landazabal C, Knight MA, Keller M, SingletonAB, Wolfsberg TG, Sidransky E. A multicenter study of glucocerebrosidasemutations in dementia with Lewy bodies. JAMA Neurol. 2013 Jun;70(6):727-35. doi: 10.1001/jam aneurol.2013.1925.
- 11. Orvisky E, Park JK, Parker A, Walker JM, Martin BM, Stubblefield BK, Uyama E, Tayebi N, Sidransky E. The identificati on of eight novel glucocerebrosidase (GBA)mutations in patients with Gaucher disease. Hum Mutat. 2002 Apr;19(4):45 8-9.
- 12. Pelled D, Trajkovic-Bodennec S, Lloyd-Evans E, Sidransky E, Schiffmann R,Futerman AH. Enhanced calcium release i n the acute neuronopathic form of Gaucher disease. Neurobiol Dis. 2005 Feb;18(1):83-8.
- 13. Sidransky E, Nalls MA, Aasly JO, Aharon-Peretz J, Annesi G, Barbosa ER,Bar-Shira A, Berg D, Bras J, Brice A, Chen CM, Clark LN, Condroyer C, De MarcoEV, Dürr A, Eblan MJ, Fahn S, Farrer MJ, Fung HC, Gan-Or Z, Gasser T,Gersho ni-Baruch R, Giladi N, Griffith A, Gurevich T, Januario C, Kropp P, LangAE, Lee-Chen GJ, Lesage S, Marder K, Mata IF, Mirelman A, Mitsui J, Mizuta I,Nicoletti G, Oliveira C, Ottman R, Orr-Urtreger A, Pereira LV, Quattrone A,Rogaeva E, Ro Ifs A, Rosenbaum H, Rozenberg R, Samii A, Samaddar T, Schulte C,Sharma M, Singleton A, Spitz M, Tan EK, Tayebi N, Toda T, Troiano AR, Tsuji S,Wittstock M, Wolfsberg TG, Wu YR, Zabetian CP, Zhao Y, Ziegler SG. Multicenteranalysi s of glucocerebrosidase mutations in Parkinson's disease. N Engl J Med.2009 Oct 22;361(17):1651-61. doi: 10.1056/N EJMoa0901281.
- 14. Sidransky E. Gaucher disease: complexity in a "simple" disorder. Mol GenetMetab. 2004 Sep-Oct;83(1-2):6-15. Revie w.
- 15. Sidransky E. Heterozygosity for a Mendelian disorder as a risk factor forcomplex disease. Clin Genet. 2006 Oct;70(4):2 75-82. Review.
- 16. Tsuang D, Leverenz JB, Lopez OL, Hamilton RL, Bennett DA, Schneider JA, Buchman AS, Larson EB, Crane PK, Kaye JA, Kramer P, Woltjer R, Kukull W, NelsonPT, Jicha GA, Neltner JH, Galasko D, Masliah E, Trojanowski JQ, Schellenbe rg GD, Yearout D, Huston H, Fritts-Penniman A, Mata IF, Wan JY, Edwards KL, Montine TJ, Zabetian CP. GBA mutation s increase risk for Lewy body disease with and withoutAlzheimer disease pathology. Neurology. 2012 Nov 6;79(19):194 4-50. doi:10.1212/WNL.0b013e3182735e9a.
- 17. Velayati A, Yu WH, Sidransky E. The role of glucocerebrosidase mutations inParkinson disease and Lewy body disorde rs. Curr Neurol Neurosci Rep. 2010May;10(3):190-8. doi: 10.1007/s11910-0102-x. Review.

Retrieved from https://encyclopedia.pub/entry/history/show/12473