Melorheostosis Studies at Oxford

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Melorheostosis (MEL)

- Rare disease (~1 in a million??)
- Involved sites: tubular bones, hands and feet
- Clinical problems
 - abnormal bone shape
 - limb deformity
 - soft tissue involvement causing contractures
 - chronic pain

MEL Irregular flowing hyperostosis "candle wax"







Osteopoikilosis (OPK)

- Rare autosomal dominant
- Asymptomatic
- Symmetric unequal distribution of hyperostotic lesions
- Involved sites: long tubular bones, pelvis, scapulae
- Isolated/associated with bone/skin problems:
 - melorheostosis
 - Buschke-Ollendorff syndrome (BOS): autosomal dominant disorder with disseminated connective tissue nevi

OPK Spotty dense lesions





- 1. Diameter: 2 10 mm
- 2. No effect on the shape of the bone or soft tissue



Patients



(2) Sporadic cases

- 14 sporadic MEL patients
- 1 BOS patient

Italian BOS and OPK family



(a) Connective-tissue nevi (red arrow); (b) accumulation of densely packed collagen bundles in the dermis (black arrow; magnification x100). (c) small roundish, sclerotic lesion (white arrow) on his left elbow. The proband's father: spoty lesions all over his (d) knee, (e) hands and wrists, and (f) pelvis.

UK sporadic MEL patient



Photo, radiograph: candle wax appearance in his humeral, radial shaft and epiphysis in (a), (b) and (c). Ectopic calcification at ante-cubital fossa (b).

Result of Mutation Identification in LEMD3

1. Families: two mutations segregate with osteopoikilosis



- Exon 8
- C 2032 T mutation
- Arg (678) to STOP codon

IT (BOS, OPK)



- Exon 12
- G 2564 A mutation
- Trp (855) to STOP codon

Result of Mutation Identification in LEMD3

2. The UK BOS individual



- C to T substitution at exon 7 cDNA1963 changing aa at position 655 from Arg to a stop codon.
- Has been previously identified in an American patient with OPK and MEL, her three siblings all have OPK.
- 3. Sporadic melorheostosis: no mutations in *LEMD3 no evidence of somatic mosaicism from the biopsies*

LEMD3 Mutations

18 mutations have been identified in LEMD3

- 1. Isolated OPK
- 2. familial OPK, or with MEL, or BOS
- 3. BOS

4. Familial cutaneous collagenomas with BOS5. Familial MEL with OPK



Mechanisms of MEL

MEL co-occurs with OPK:

- 2 nd hit in *LEMD3*?
- 2 nd hit in another gene?
- Methylation issue in addition to LEMD3 mutation?

Mechanisms of MEL

Isolated MEL:

- LEMD3 somatic mutation?
- Epigenetic?
- Another gene somatic mutation?
- Another gene germline mutation?

*Paget disease: a monostotic or spatially limited manifestation is caused by inherited germline mutation in SQST1



Flame-shaped resorption front

*MEL can be more extensive than the clinical features might suggest



R knee



R tubua, L fibula



R foot

L pelvis

Current Research and Beyond

- Melorheostosis clinic day on 16th October 08: 13 patients (4 new) and relatives attended
- Total sporadic MEL to 18 patients











Current Research and Beyond

- Clinical Fellow appointed to identify and characterise patients in UK
- Sequence genes involved in bone morphogenesis (germline and from affected tissue)
- Definition of the osteopoikilosis/melorheostosis phenotypic spectrum
- Define benefits and hazards of treatment

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