# SOFFOET BEST OF MEETING



# PRENATAL DIAGNOSIS OF LOWE SYNDROME: EXPANDING THE GENOTYPIC AND PHENOTYPIC SPECTRUM

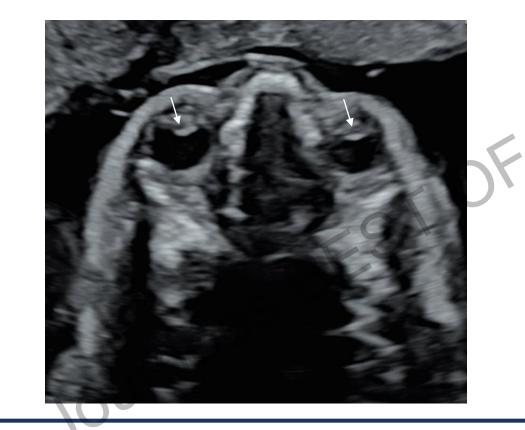
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#### CASE REPORT



Bilateral lens opacity (arrows) observed on 2D ultrasound image at 21 weeks of gestation.

- First pregnancy of a non-consanguineous healthy Portuguese couple.
- Prenatal ultrasound revealed a male fetus with bilateral lens opacity suggesting bilateral cataract.

#### CASE REPORT

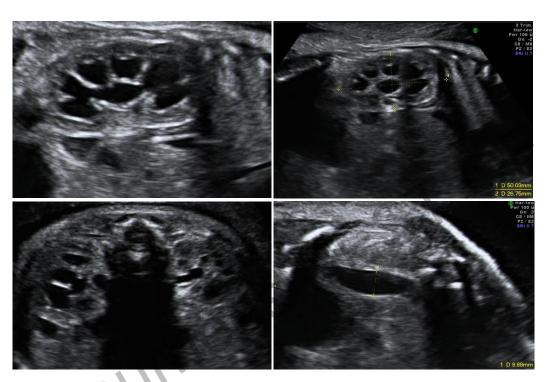


• Amniocentesis was performed and molecular study by next-generation sequencing panel including 144 genes associated with lens anomalies was requested.

• A novel likely pathogenic variant was identified in hemizygosity, c.1694\_1697dup, p. (Leu566Phefs\*12) in the OCRL gene, not previously reported in the literature or in population (GnomAD) or disease (ClinVar) databases.

This is a frameshift variant that change the ribosome reading frame leading to a premature stop codon, being expected to have a deleterious impact.

#### CASE REPORT



2D ultrasound imaging at 30 weeks of gestation

Subsequent ultrasound evaluation identified
bilateral ureteral dilation, right kidney dilatation and
hydronephrosis.

These findings were compatible with the diagnosis of **Lowe Syndrome** and the couple requested medical termination of pregnancy.

Lowe Syndrome, also named Oculocerebrorenal Dystrophy (OCRL), is caused by pathogenic variants in the

OCRL gene with recessive X-linked inheritance. It is characterized by congenital cataracts, motor

development delay, intellectual disability, short stature, rickets and proximal renal tubulopathy.



Imagen Font: Lowe Syndrome Trust



- Elongated head, parieto-occipital prominence with sloping forehead
- Large ears (>P95), with vertically deformed helix, (vertical compression type)
- Hypertelorism
- <u>Chubby cheeks</u>
- Thin upper lip and thick lower lip, upturned corners



Lower maxillary labial frenum attachment (alveolar ridge)



Short and large neck



- Wrist swelling
- Genu valgum, pes planus and clinodactyly of the 5<sup>th</sup> right toe
- Joint hypermobility



## X-RAY



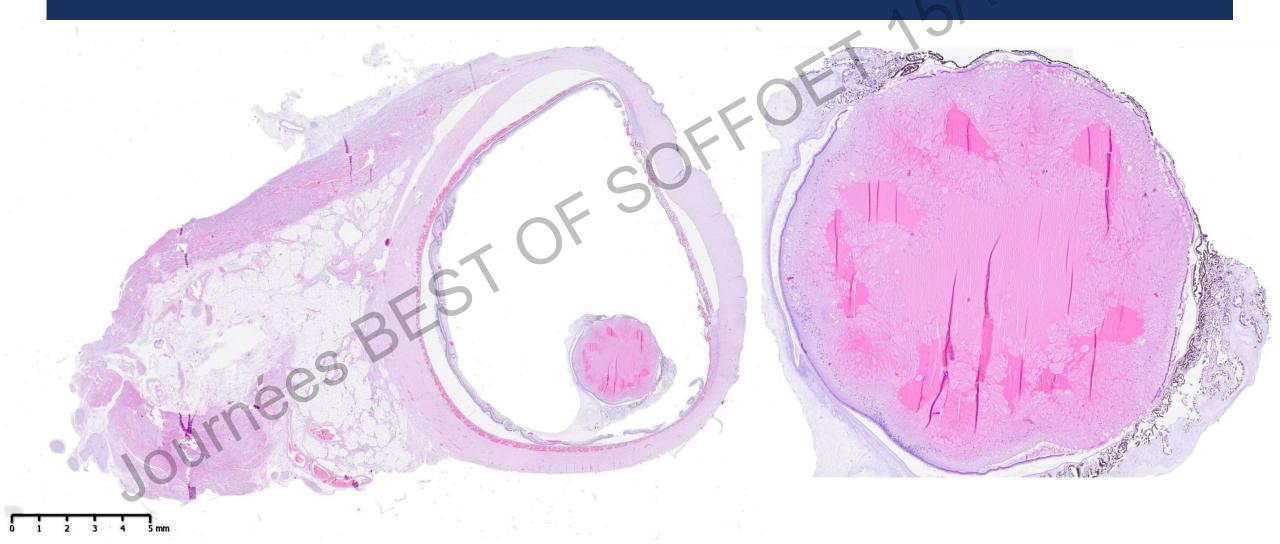
- Horizontal (flat) conformation of the ribs: 7<sup>th</sup> to the 12<sup>th</sup>.
- No other skeletal malformations.



Fetal eyes were fixed in 10% neutral buffered formalin.
Eyes were inspected macroscopically and with the dissecting microscope, including transillumination, for further abnormalities, with particular emphasis on the lens.

The horizontal plane was identified and the specimen was bisected horizontally next to the optic nerve.

 Confirmed the presence of lens opacity suggesting cataracts in both eyes.

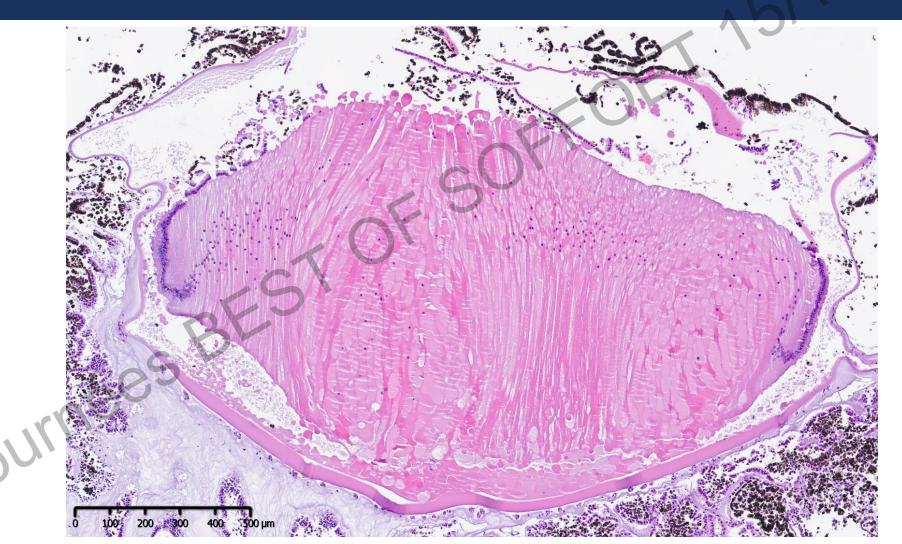


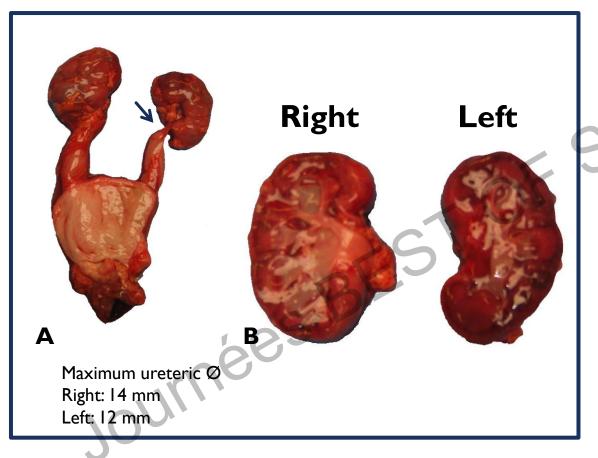








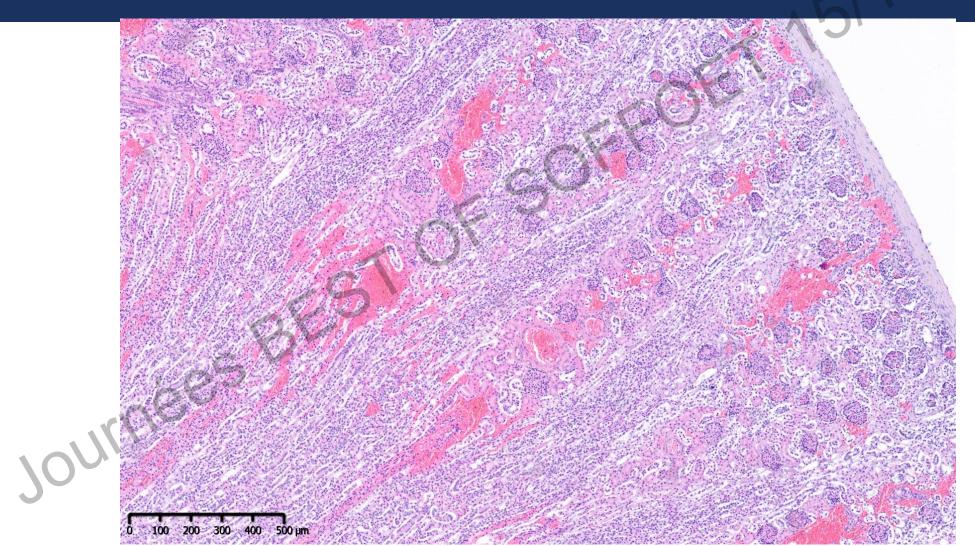




Increased weight of the kidneys (due to hydronephosis,
P98<sup>th</sup>).

- Bilateral hydronephrosis (more exuberant at the right kidney), ureteral and bladder dilatation with thickened wall, associated with urethral stenosis (bulbar and membranous).
- Left pieloureteral junction stenosis (arrow).
- Placenta: unremarkable findings.









## LOWE SYNDROME

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• Segregation study confirmed that the identified OCRL gene variant was maternally inherited.

Since heterozygous females may present ophthalmologic alterations associated with the Syndrome,

ophthalmological evaluation was requested.

## CONCLUSION

This clinical case reports a new presentation of Lowe Syndrome, expanding its molecular

and phenotypic spectrum (craniofacial dysmorphism and CAKUT).

It also highlights the importance of a specific prenatal diagnosis in an ongoing pregnancy,

with implications for the current pregnancy as well as for genetic counseling to the

couple, allowing informed reproductive options.