

Cardiomyopathy Panel

Panel Gene List:

ABCC9, ACTC1, ACTN2, AKAP9, ALMS1, ALPK3, ANKRD1, BAG3, BRAF, CAV3, CHRM2, CRYAB, CSRP3, CTNNA3, DES, DMD, DOLK, DSC2, DSG2, DSP, DTNA, EMD, EYA4, FHL1, FKRP, FKTN, FLNC, GAA, GATA4, GATAD1, GLA, HCN4, HFE, HRAS, ILK, JPH2, JUP, KRAS, LAMA4, LAMP2, LDB3, LMNA, LRRC10, MAP2K1, MAP2K2, MIB1, MTND1, MTND5, MTND6, MTTD, MTTG, MTTH, MTTI, MTTK, MTTL1, MTTL2, MTTM, MTTQ, MTTS1, MTTS2, MURC, MYBPC3, MYH6, MYH7, MYL2, MYL3, MYLK2, MYOZ2, MYPN, NEBL, NEXN, NKX2-5, NRAS, PDLIM3, PKP2, PLN, PRDM16, PRKAG2, PTPN11, RAF1, RBM20, RIT1, RYR2, SCN5A, SGCD, SHOC2, SOS1, TAZ, TBX20, TCAP, TGFB3, TMEM43, TMPO, TNNC1, TNN13, TNNT2, TOR1AIP1, TPM1, TTN, TTR, TXNRD2, VCL

Clinical Features:

Cardiomyopathy is defined as disease of the heart muscle and has many different presentations. Hypertrophic cardiomyopathy (HCM) is characterized by myocardial hypertrophy and myocyte disarray in the absence of other cardiac or systemic causes. 1-3 Dilated cardiomyopathy (DCM) usually presents with one or more of the following: i) heart failure with symptoms of congestion (edema, orthopnea or paroxysmal dyspnea), ii) reduced cardiac output resulting in fatigue or dyspnea on exertion, arrhythmias and/or conduction system disease and iii) thromboembolic disease or stroke, mainly from left ventricular mural thrombus. However, some individuals with a DCM pathogenic variant may also be asymptomatic.^{4,5} **Left ventricular non-compaction (LVNC)** is characterized by abnormal trabeculations in the left ventricle, most frequently at the apex, and can share the same clinical presentation as DCM, ranging from asymptomatic disease to progressive deterioration of cardiac function, arrhythmias, thromboembolic events, or sudden cardiac death.⁴⁶ Arrhythmogenic right ventricular dysplasia/cardiomyopathy (ARVC) is a disorder that affects the cardiac desmosome, which is a protein complex that maintains cell-to-cell connections and provides mechanical attachments between adjacent cells. ARVC is characterized by myocyte death and replacement by fat and fibrous tissue in the right ventricle. 78 Noonan syndrome (NS) is a relatively common multi-system disorder with features including HCM, facial dysmorphism, congenital heart defects, short stature, skeletal malformations, motor delay, learning disabilities, and impaired blood clotting ability. Cardiomyopathy can also be a presenting feature of other inherited disorders, such as Danon disease, Fabry disease, Pompe disease, mitochondrial myopathy, or muscular dystrophy.^{1-5, 10}

Inheritance Pattern/Genetics:

Autosomal Dominant, Autosomal Recessive, X-linked, or Mitochondrial

Test Methods:

Genomic DNA is extracted directly from the submitted specimen or, if applicable, from cultured fibroblasts. The DNA is enriched for the complete coding regions and splice junctions of the genes on this panel using a proprietary targeted capture system developed by GeneDx for next-generation sequencing with CNV calling (NGS-CNV). The enriched targets are simultaneously sequenced with paired-end reads on an Illumina platform. Bi-directional sequence reads are assembled and aligned to reference sequences based on NCBI RefSeq transcripts and human genome build GRCh37/UCSC hg19. After gene specific filtering, data are analyzed to identify sequence variants and most deletions and duplications involving coding exons at the exon-level; however, technical limitations and inherent sequence properties effectively reduce this



resolution for some genes. Alternative sequencing or copy number detection methods are used to analyze or confirm regions with inadequate sequence or copy number data by NGS. Sequence variants are reported according to the Human Genome Variation Society (HGVS) guidelines. Copy number variants are reported based on the probe coordinates, the coordinates of the exons involved, or precise breakpoints when known. The entire mitochondrial genome from the submitted sample is amplified and sequenced using Next Generation sequencing. DNA sequence is assembled and analyzed in comparison with the revised Cambridge Reference Sequence (rCRS GeneBank number NC_012920) and the reported variants listed in the MITOMAP database (http://www.mitomap.org). Alternative sequencing or other detection methods may be used to analyze or confirm mtDNA variants. Reportable variants include pathogenic variants, likely pathogenic variants and variants of uncertain significance. Likely benign and benign variants, if present, are not routinely reported but are available upon request. Available evidence for variant classification may change over time and reported variant(s) may be reclassified according to the ACMG/AMP Standards and Guidelines (PMID: 25741868), which may lead to issuing a revised report.

Sequencing and deletion/duplication analysis of the remaining genes on the Combined Cardiac Panel is

available as a separate test if the Cardiomyopathy Panel is negative.

Test Sensitivity:

The technical sensitivity of sequencing is estimated to be >99% at detecting single nucleotide events. It will not reliably detect deletions greater than 20 base pairs, insertions or rearrangements greater than 10 base pairs, or low-level mosaicism. The copy number assessment methods used with this test cannot reliably detect copy number variants of less than 500 base pairs or mosaicism and cannot identify balanced chromosome aberrations. Assessment of exon-level copy number events is dependent on the inherent sequence properties of the targeted regions, including shared homology and exon size. The following gene specific information applies. AKAP9, sequencing of the KCNQ1-binding domains only including Ser1570 residue; TTN, sequencing of exons 1-171 and 199-363 only. For PKP2, sequencing of exon 6 is not performed. Gene specific exclusions for exon-level deletion/duplication testing for this panel are: FKRP, HRAS and 14 mitochondrial gene(s), no copy number testing; ALMS1, EMD, HCN4, TAZ, TBX20 gene(s), only whole gene deletions or duplications may be detected; SCN5A gene, exon level coverage for exons 2-12 and 21-28 only. For mitochondrial genome testing, sequencing analysis is performed on the following genes: MT-ND1, MT-ND5, MT-ND6, MT-TD, MT-TG, MT-TH, MT-TI, MT-TK, MT-TL1, MT-TL2, MT-TM, MT-TQ, MT-TS1, MT-TS2. Next-generation sequencing may not detect mtDNA point variants present at 10 % heteroplasmy or lower.

| Gene | Protein | Inheritance | Disease Association(s) |
|--------|---|-------------|---|
| ABCC9 | ATP-BINDING CASSETTE, SUBFAMILY C, MEMBER 9 | AD | DCM, Brs, ERS, Cantu syndrome and related disorders |
| ACTCI | ACTIN, ALPHA, CARDIAC MUSCLE | AD | CHD, DCM, HCM, LVNC |
| ACTN2 | ACTININ, ALPHA-2 | AD | HCM, DCM |
| AKAP9 | A-KINASE ANCHOR PROTEIN 9 | AD | LQTS, cardiomyopathy |
| ALMS1 | CENTROSOME AND BASAL BODY ASSOCIATED PROTEIN | AR | Alstrom syndrome, mitogenic cardiomyopathy, infantile DCM |
| ALPK3 | ALPHA KINASE 3 | AR | HCM, DCM |
| ANKRDI | ANKYRIN REPEAT DOMAIN- CONTAINING PROTEIN 1 | AD | DCM |
| BAG3 | BCL2-ASSOCIATED ATHANOGENE 3 | AD | DCM, myofibrillar myopathy |
| BRAF | V-RAF MURINE SARCOMA VIRAL ONCOGENE HOMOLOG BI | AD | Noonan/CFC/Costello syndromes |



| CAV3 | CAVEOLIN 3 | AD | HCM, LQTS, LGMD, Tateyama-type distal myopathy, SIDS, rippling muscle disease |
|--------|---|--------|---|
| CHRM2 | M2-MUSCARINIC ACETYLCHOLINE RECEPTOR | AD | DCM |
| CRYAB | CRYSTALLIN, ALPHA-B | AD, AR | DCM, myofibrillar myopathy |
| CSRP3 | CYSTEINE- AND GLYCINE-RICH PROTEIN 3 | AD | HCM, DCM |
| CTNNA3 | CATENIN ALPHA 3 | AD | ARVC, Autism |
| DES | DESMIN | AD, AR | DCM, ARVC, myopathy, AV block , LGMD |
| DMD | DYSTROPHIN | XL | DMD, BMD, DCM |
| DOLK | DOLICHOL KINASE | AR | DCM, congenital disorder of glycosylation type 1m |
| DSC2 | DESMOCOLLIN | AD, AR | ARVC, ARVC+skin and hair findings, DCM |
| DSG2 | DESMOGLEIN | AD | ARVC, DCM |
| DSP | DESMOPLAKIN | AD, AR | ARVC, DCM, Carvajal syndrome and related disorders |
| DTNA | DYSTROBREVIN, ALPHA | AD | LVNC, CHD |
| EMD | EMERIN | XL | EMD |
| EYA4 | EYES ABSENT, DROSOPHILA, HOMOLOG OF, 4 | AD | DCM, Hearing loss |
| FHL1 | FOUR-AND-A-HALF LIM DOMAINS 1 | XL | HCM, EMD, myofibrillar myopathy, reducing body myopathy |
| FKRP | FUKUTIN RELATED PROTEIN | AR | muscular dystrophy, dystroglycanopathies |
| FKTN | FUKUTIN | AR | DCM, LGMD, Fukuyama Congenital Muscular Dystrophy |
| FLNC | FILAMIN C | AD | RCM, HCM, ARVC, DCM, myopathy |
| GAA | GLUCOSIDASE, ALPHA, ACID | AR | Pompe Disease (Glycogen storage disease II) |
| GATA4 | GATA-BINDING PROTEIN 4 | AD | AF, CHD, cardiomyopathy, SUDS |
| GATADI | GATA ZINC FINGER DOMAIN- CONTAINING PROTEIN 1 | AR | DCM |
| GLA | GALACTOSIDASE, ALPHA | XL | Fabry disease |
| HCN4 | HYPERPOLARIZATION-ACTIVATED CYCLIC NUCLEOTIDE-GATED POTASSIUM CHANNEL 4 | AD | LVNC, AF, AV block, bradycardia, BrS, SSS, tachycardia |
| HFE | HUMAN HEMOCHROMATOSIS PROTEIN (HFE) | AR | Hereditary hemochromatosis, cardiomyopathy |
| HRAS | V-HA-RAS HARVEY RAT SARCOMA VIRAL ONCOGENE HOMOLOG | AD | Costello syndrome |
| ILK | INTEGRIN-LINKED KINASE | AD | DCM |
| JPH2 | JUNCTOPHILIN 2 | AD | нсм |
| JUP | JUNCTION PLAKOGLOBIN | AD, AR | ARVC, Naxos disease and related disorders |
| KRAS | V-KI-RAS2 KIRSTEN RAT SARCOMA VIRAL ONCOGENE HOMOLOG | AD | Noonan/CFC/Costello syndromes |
| LAMA4 | LAMININ, ALPHA-4 | AD | DCM |
| LAMP2 | LYSOSOME-ASSOCIATED MEMBRANE PROTEIN 2 | XL | Danon disease |
| LDB3 | LIM DOMAIN-BINDING 3 | AD | DCM, LVNC, ARVC, LDB3-related myopathies |



| LMNA | LAMIN A/C | AD, AR | DCM, LMNA-related neuromuscular disorder, ARVC/ARVC-like disease, lipodystrophy, and premature aging disorders |
|--------|---|--------|--|
| LRRC10 | LEUCINE-RICH REPEAT-CONTAINING PROTEIN 10 | AD, AR | DCM |
| MAP2K1 | MITOGEN-ACTIVATED PROTEIN KINASE KINASE 1 | AD | Noonan/CFC/Costello syndromes |
| MAP2K2 | MITOGEN-ACTIVATED PROTEIN KINASE KINASE 2 | AD | Noonan/CFC/Costello syndromes |
| MIB1 | MINDBOMB E3 UBIQUITIN PROTEIN LIGASE 1 | AD | LVNC |
| MTND1 | mtDNA ENCODED COMPLEX I, SUBUNIT NDI | MITO | Cardiomyopathy, myopathy |
| MTND5 | mtDNA ENCODED COMPLEX I, SUBUNIT ND5 | MITO | Cardiomyopathy, myopathy |
| MTND6 | mtDNA ENCODED COMPLEX I, SUBUNIT ND6 | MITO | Cardiomyopathy, myopathy |
| MTTD | MITOCHONDRIAL tRNA FOR ASPARTIC ACID | MITO | Cardiomyopathy, myopathy |
| MTTG | MITOCHONDRIAL TRNA FOR GLYCINE | MITO | Cardiomyopathy, myopathy |
| МТТН | MITOCHONDRIAL tRNA FOR HISTIDINE | MITO | Cardiomyopathy, myopathy |
| MTTI | MITOCHONDRIAL tRNA FOR ISOLEUCINE | MITO | Cardiomyopathy, myopathy |
| MTTK | MITOCHONDRIAL TRNA FOR LYSINE | MITO | Cardiomyopathy, myopathy |
| MTTL1 | MITOCHONDRIAL tRNA FOR LEUCINE 1 | MITO | Cardiomyopathy, myopathy |
| MTTL2 | MITOCHONDRIAL tRNA FOR LEUCINE 2 | MITO | Cardiomyopathy, myopathy |
| МТТМ | MITOCHONDRIAL tRNA FOR METHIONINE | MITO | Cardiomyopathy, myopathy |
| MTTQ | MITOCHONDRIAL tRNA FOR GLUTAMINE | MITO | Cardiomyopathy, myopathy |
| MTTSI | MITOCHONDRIAL tRNA FOR SERINE 1 | MITO | Cardiomyopathy, myopathy |
| MTTS2 | MITOCHONDRIAL tRNA FOR SERINE 2 | MITO | Cardiomyopathy, myopathy |
| MURC | MUSCLE-RELATED COILED-COIL PROTEIN | AD | DCM |
| МҮВРС3 | MYOSIN-BINDING PROTEIN C, CARDIAC | AD | HCM, DCM |
| мүн6 | MYOSIN, HEAVY CHAIN 6, CARDIAC MUSCLE, ALPHA | AD | CHD, DCM, HCM, SSS |
| МҮН7 | MYOSIN, HEAVY CHAIN 7, CARDIAC MUSCLE, BETA | AD | DCM, HCM, myopathy |
| MYL2 | MYOSIN, LIGHT CHAIN 2, REGULATORY, CARDIAC, SLOW | AD | HCM, muscle fiber disease |
| MYL3 | MYOSIN, LIGHT CHAIN 3, ALKALI, VENTRICULAR, SKELETAL, SLOW | AD, AR | нсм |
| MYLK2 | MYOSIN LIGHT CHAIN KINASE 2 | AD | НСМ |
| MYOZ2 | MYOZENIN 2 | AD | НСМ |
| MYPN | MYOPALLADIN | AD | DCM, RCM, HCM |
| NEBL | NEBULETTE | AD | DCM, endocardial fibroelastosis |
| NEXN | NEXILIN | AD | DCM, HCM |
| NKX2-5 | NK2 HOMEOBOX 5 | AD | CHD, CCD |



| NRAS | NEUROBLASTOMA RAS VIRAL | AD | Noonan/CFC/Costello |
|----------|--|--------|--|
| NKAS | ONCOGENE HOMOLOG | AD | syndromes |
| PDLIM3 | PDZ AND LIM DOMAIN PROTEIN 3 | AD | HCM, DCM |
| PKP2 | PLAKOPHILIN 2 | AD | ARVC, BrS |
| PLN | PHOSPHOLAMBAN | AD | DCM, HCM, ARVC |
| PRDM16 | PR DOMAIN CONTAINING 16 | AD | DCM, LVNC |
| PRKAG2 | PROTEIN KINASE, AMP-ACTIVATED, NONCATALYTIC, GAMMA2 | AD | HCM, Wolff-Parkinson-White syndrome |
| PTPNII | PROTEIN-TYROSINE PHOSPHATASE, NONRECEPTOR-TYPE 11 | AD | Noonan/CFC/Costello syndromes |
| RAFI | V-RAF-1 MURINE LEUKEMIA VIRAL ONCOGENE HOMOLOG 1 | AD | Noonan/CFC/Costello syndromes |
| RBM20 | RNA-BINDING MOTIF PROTEIN 20 | AD | DCM |
| RITI | RAS-LIKE WITHOUT CAAX 1 | AD | Noonan syndrome |
| RYR2 | RYANODINE RECEPTOR 2 | AD | ARVC, CPVT, DCM |
| SCN5A | SODIUM CHANNEL, VOLTAGE- GATED, TYPE V, ALPHA SUBUNIT | AD | DCM, ARVC/ARVC-like disease, BrS, Heart block, LQTS, SIDS, SSS |
| SGCD | SARCOGLYCAN, DELTA | AD, AR | DCM, LGMD |
| SHOC2 | SOC-2 HOMOLOG | AD | Noonan-like syndrome with loose anagen hair |
| SOS1 | SON OF SEVENLESS, DROSOPHILA, HOMOLOG 1 | AD | Noonan/CFC/Costello syndromes |
| TAZ | TAFAZZIN | XL | DCM, LVNC, Barth syndrome |
| TBX20 | T-BOX 20 | AD | CHD, DCM, LVNC |
| TCAP | TITIN-CAP (TELETHONIN) | AD, AR | HCM, DCM, LGMD |
| TGFB3 | TRANSFORMING GROWTH FACTOR BETA 3 | AD | ARVC, Loeys-Dietz syndrome-5, TAAD |
| TMEM43 | TRANSMEMBRANE PROTEIN 43 | AD | ARVC, EMD |
| TMPO | THYMOPOIETIN | AD | DCM |
| TNNC1 | TROPONIN C, SLOW | AD | DCM, HCM |
| TNNI3 | TROPONIN I, CARDIAC | AD | DCM, HCM, RCM |
| TNNT2 | TROPONIN T2, CARDIAC | AD | DCM, HCM, RCM, LVNC |
| TORIAIPI | TORSIN-1A-INTERACTING PROTEIN 1 | AR | LGMD, Contractures, DCM |
| TPMI | TROPOMYOSIN 1 | AD | DCM, HCM |
| TTN | TITIN | AD, AR | ARVC, DCM, TTN-related myopathies and muscular dystrophies |
| TTR | TRANSTHYRETIN | AD | TTR-related amyloidosis |
| TXNRD2 | THIOREDOXIN REDUCTASE 2 | AD, AR | DCM, glucocorticoid deficiency |
| VCL | VINCULIN | AD | HCM, DCM, LVNC |
| | | | |

Abbreviations: AD – Autosomal dominant; AF – Atrial fibrillation; AR – Autosomal recessive; ARVC – Arrhythmogenic Right Ventricular Cardiomyopathy; AV block- Atrioventricular Block; BMD – Becker Muscular Dystrophy; BrS – Brugada Syndrome; CCD- Cardiac Conduction Disease; CHD – Congenital Heart Defects; CPVT – Catecholaminergic Polymorphic Ventricular Tachycardia; DCM – Dilated Cardiomyopathy; DMD- Duchenne Muscular Dystrophy; EMD – Emery Dreifuss Muscular Dystrophy; ERS- Early repolarization syndrome; HCM – Hypertrophic Cardiomyopathy; JLNS – Jervell and Lange-Nielsen Syndrome; LGMD – Limb Girdle Muscular Dystrophy; LQTS – Long QT Syndrome; LVNC – Left Ventricular Non-Compaction; RCM – Restrictive Cardiomyopathy; SIDS – Sudden Infant Death Syndrome; SSS – Sick Sinus Syndrome; TAAD- Thoracic Aortic Aneurysm and Dissection; XL – X-linked

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