

Test Information Sheet

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Hereditary Spastic Paraplegia (HSP) Panel

PANEL GENE LIST

Comprehensive HSP Panel Gene List: ABCD1, ACO2*, ADCY5, ALDH18A1, ALDH3A2*, ALS2, AMPD2, AP4B1, AP4E1, AP4M1, AP4S1, AP5Z1, ARG1, ARL6IP1, ARSA, ATL1, ATP13A2, B4GALNT1, BSCL2, BTD, C12orf65, C19orf12, CYP27A1, CYP2U1, CYP7B1, DDHD1, DDHD2, ENTPD1*, ERLIN1, ERLIN2, EXOSC3*, FA2H, FAR1*, FARS2, GALC, GBA2, GBE1, GCH1, GJA1*, GJC2*, IBA57, IFIH1*, KIAA0196 (aka WASHC5), KIF1A, KIF1C, KIF5A, L1CAM, MMACHC, MTHFR, NFU1*, NIPA1, NT5C2, OPA3, PEX16*, PLA2G6, PLP1, PNPLA6, POLR3A, PTS, RAB3GAP2, REEP1, REEP2, RNASEH2B*, SACS, SERAC1*, SLC16A2, SLC19A3, SLC25A15*, SLC33A1, SPAST, SPG7 (aka PGN), SPG11, SPG20, SPG21, SPR, TECPR2, TFG, TH, TUBB4A, UCHL1, VPS37A, VPS53*, ZFYVE26

*Sequence analysis only of the ACO2, ALDH3A2, ENTPD1, EXOSC3, FAR1, GJA1, GJC2, IFIH1, NFU1, PEX16, RNASEH2B, SERAC1, SLC25A15, and VPS53 genes

CLINICAL FEATURES

Hereditary spastic paraparesis (HSP) comprises a diverse group of neurodegenerative disorders characterized by progressive lower limb spasticity and weakness. These disorders are clinically classified as uncomplicated ("pure") HSP, in which symptoms are confined to lower extremity spasticity, hypertonic bladder and lower limb sensory disturbances, or complicated HSP, which is characterized by additional neurological and non-neurological findings.^{1,2} These findings may include intellectual disability, epilepsy, ataxia, neuropathy, extrapyramidal disturbances, cataracts, vomiting, and dysmorphic features.³ The age of onset of clinical symptoms of HSP ranges from early childhood to late adulthood and some types of HSP exhibit both uncomplicated and complicated forms even within the same family. Symptoms that occur very early in childhood may be non-progressive while later-onset symptoms generally progress over many years.² The prevalence of spastic paraparesias is estimated to be between 1.3-9.6/100,000.²

GENETICS

HSP results from pathogenic variants in genes that encode proteins involved in the development or maintenance of corticospinal tract neurons.³ Spastic paraparesias are inherited in either an autosomal dominant, autosomal recessive, X-linked or mitochondrial (maternal) manner. Some types of HSP demonstrate both autosomal dominant and autosomal recessive inheritance and some genetic types of HSP are associated with both uncomplicated and complicated symptoms.^{4,5,6} Wide clinical variability occurs between and within different types of HSP, even within a family.⁷ A clinical diagnosis of HSP is based on medical and family history, neurological and neuropsychological evaluations, neuropathological studies, other ancillary testing and exclusion of metabolic disorders with similar clinical presentations.^{2,3} However, clinical evaluation alone may not be sufficient to distinguish the various genetic causes of HSP given their phenotypic and genetic heterogeneity. The Comprehensive HSP panel at GeneDx can assist in confirming a clinical diagnosis, can define the sub-type of HSP and may aid in the development of a comprehensive medical plan including symptom management and recurrence risk assessment.

TEST METHODS

Using genomic DNA from the submitted specimen, the complete coding regions and splice site junctions of the genes on this panel are enriched 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. Alternative sequencing or copy number detection methods are used to analyze or confirm regions

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with inadequate sequence or copy number data by NGS. 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. 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. For the *ACO2*, *ALDH3A2*, *ENTPD1*, *EXOSC3*, *FAR1*, *GJA1*, *GJC2*, *IFIH1*, *NFU1*, *PEX16*, *RNASEH2B*, *SERAC1*, *SLC25A15*, and *VPS53* genes, sequencing but not deletion/duplication analysis, is performed.

CLINICAL SENSITIVITY

The comprehensive HSP panel includes genes associated with uncomplicated and complicated forms of HSP alongside HSP-related inborn errors of metabolism (HSP-IEM). These disorders also have characteristic biochemical findings and/or other neurological, behavioral, eye and skin features, and some of these have specific treatments. See table below for a complete list of genes and associated disorders included in the comprehensive HSP panel.

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Gene	Inheritance	Disease Associations	Diagnostic Yield in Selected Population(s)
<i>ABCD1</i> *	XL	Adrenoleukodystrophy	Rare ^{1,2,3,4}
<i>ACO2</i> **	AR	Optic atrophy 9/Infantile cerebellar-retinal degeneration	Rare ^{76,77,78,79}
<i>ADCY5</i>	AD/AR	ADCY5-related dyskinesia/ ADCY5 related disorders	Rare ^{80,81}
<i>ALDH18A1</i> (<i>P5C5</i>)	AD/AR	Spastic paraplegia 9A/Spastic paraplegia 9B	Rare ⁵
<i>ALDH3A2</i> **	AR	Sjogren-Larsson syndrome	Rare; most common in people of Swedish ancestry ⁸²
<i>ALS2</i>	AR	Infantile onset hereditary spastic paraparesis (IAHSP)	Rare in IAHSP ^{6,7,8,9}
<i>AMPD2</i>	AR	Spastic paraplegia 63	Rare ⁸³
<i>AP4B1</i>	AR	Spastic paraplegia 47	Rare ^{10,11}
<i>AP4E1</i>	AR	Spastic paraplegia 51	Rare ^{12,13,14}
<i>AP4M1</i>	AR	Spastic paraplegia 50	Rare ^{14,15}
<i>AP4S1</i>	AR	Spastic paraplegia 52	Rare ¹³
<i>AP5Z1</i>	AR	Spastic paraplegia 48	Rare ^{16,17,18,19}
<i>ARG1</i>	AR	Arginase deficiency	Rare ^{84,85}
<i>ARL6IP1</i>	AR	Spastic paraplegia 61	Rare ^{86,87}
<i>ARSA</i>	AR	Metachromatic leukodystrophy	Rare ⁸⁸

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Gene	Inheritance	Disease Associations	Diagnostic Yield in Selected Population(s)
<i>ATL1</i>	AD/AR	Spastic paraplegia 3A/ HSN type ID;	Unknown in HSAN ²⁴ ; 10-15% of AD HSP and 80% of early onset AD HSP ⁸²
<i>ATP13A2</i> <i>(PARK9)</i>	AR	Spastic paraplegia 78	Rare ²⁶
<i>B4GALNT1</i>	AR	Spastic paraplegia 26	Rare ²⁷
<i>BSCL2</i>	AD/AR	Spastic paraplegia 17/Silver syndrome/ Distal hereditary motor neuropathy, type V (dHMNV)/ Congenital generalized lipodystrophy, type 2/ Progressive encephalopathy with lipodystrophy (PELD)	Rare in HSP and dHMN ²⁸ ; AR for CGL2 ²⁹ and PELD ³⁰
<i>BTD</i>	AR	Biotinidase deficiency	Rare ⁸⁹
<i>C12orf65</i>	AR	Spastic paraplegia 55/ Combined oxidative phosphorylation deficiency 7 (COXPD7)	Rare ³¹ ; Rare for COXPD7 ³²
<i>C19orf12</i>	AD/AR	Spastic paraplegia 43/Mitochondrial membrane protein-associated neurodegeneration (MPAN)	Rare in HSP ^{90,91} and MPAN ⁹²
<i>CYP27A1</i>	AR	Cerebrotendinous xanthomatosis	Rare ⁹³
<i>CYP2U1</i>	AR	Spastic paraplegia 56	Rare ³³
<i>CYP7B1</i>	AR	Spastic paraplegia 5A	Accounts for ~5% of familial and 8% of sporadic AR HSP ²⁰
<i>DDHD1</i>	AR	Spastic paraplegia 28	Rare ³³
<i>DDHD2</i>	AR	Spastic paraplegia 54	Rare ^{34,35}
<i>ENTPD1**</i>	AR	Spastic paraplegia 64	Rare ^{94,54}
<i>ERLIN1</i>	AR	Spastic paraplegia 62	Rare ⁹⁵
<i>ERLIN2</i>	AD/AR	Spastic paraplegia 18	Rare ^{36,37}
<i>EXOSC3**</i>	AR	Pontocerebellar hypoplasia type 1/spastic paraplegia with cerebellar features	Rare ^{96,97}
<i>FA2H</i>	AR	Spastic paraplegia 35	Rare ^{38,39}
<i>FAR1**</i>	AD/AR	Peroxisomal fatty acyl-CoA reductase 1 disorder	Rare ^{98,99}
<i>FARS2</i>	AR	Spastic paraplegia 77	Rare ^{100, 101, 102}
<i>GALC</i>	AR	Krabbe disease	Founder mutations in Dutch and European population ^{103, 104} ; ~45% from 30-kb deletion ¹⁰⁵ ; Italian founder mutation ¹⁰⁶
<i>GBA2</i>	AR	Spastic paraplegia 46	Rare ^{40,41}
<i>GBE1</i>	AR	Adult polyglucosan body neuropathy (APBN)/ Glycogen storage disease IV	Rare ¹⁰⁷
<i>GCH1</i>	AD/AR	GTPCH related DOPA responsive dystonia (DRD)/ GTP cyclohydrolase deficiency	Rare ¹⁰⁸
<i>GJA1**</i>	AD/AR	Spastic paraplegia with brain hypomyelination	Rare ¹⁰⁹
<i>GJC2**</i>	AD/AR	Spastic paraplegia 44/ Hypomyelinating leukodystrophy-	Rare for HSP ⁴²

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Gene	Inheritance	Disease Associations	Diagnostic Yield in Selected Population(s)
		2 (HLD2)/ Hereditary lymphedema type 1C (LMPH1C)	
<i>IBA57</i>	AR	Spastic paraplegia 74	Rare ¹¹⁰
<i>IFIH1**</i>	AD	Aicardi-Goutieres syndrome 7/Singleton-Merten syndrome 1	Rare ^{111,112}
<i>KIAA0196</i> (<i>WASHC5</i>)	AD/AR	Spastic paraplegia 8/ RitscherSchinzel syndromedevelopmental malformation syndrome (3C syndrome)	Rare ^{43,44} ; Founder mutations in First Nations population in northern Manitoba associate with AR Ritscher-Schinzel syndrome ⁴⁵
<i>KIF1A</i>	AD/AR	Spastic paraplegia 30/Hereditary sensory neuropathy type IIC (HSN2C)	Rare for HSP ^{46,47,48} ; Rare for HSN2C ⁴⁹
<i>KIF1C</i>	AR	Spastic paraplegia 58/Spastic ataxia 2	Rare ^{50,51}
<i>KIF5A</i>	AD	Spastic paraplegia 10, Neonatal intractable myoclonus (NEIMY)	Accounts for ~ 3% of familial HSP ²⁰ ; Accounts for 10% of complicated HSP in French European population ⁵²
<i>L1CAM</i>	XL	Spastic paraplegia 1 /MASA syndrome/ X-linked aqueductal stenosis	Accounts for ~1% of familial HSP ²⁰
<i>MMACHC</i>	AR	Methylmalonic aciduria and homocystinuria cblC type	Rare ^{113,114}
<i>MTHFR</i>	AR	Methylenetetrahydrofolate reductase	Rare ¹¹⁵
<i>NFU1**</i>	AR	Multiple mitochondrial dysfunctions syndrome 1	Rare ¹¹⁶
<i>NIPA1</i>	AD	Spastic paraplegia 6	Rare ⁵³
<i>NT5C2</i>	AR	Spastic paraplegia 45	Rare ⁵⁴
<i>OPA3</i>	AD/AR	Optic atrophy 3 with cataracts/ OPA3-related 3-Methylglutaconic aciduria	Rare ^{117, 118}
<i>PEX16**</i>	AR	Zellweger spectrum disorder	~1% of ZSD attributed to variants in this gene ¹¹⁹
<i>PLA2G6</i>	AR	PLA2G6-Associated Neurodegeneration	Rare ¹²⁰
<i>GBA2</i>	AR	Spastic paraplegia 46	Rare ^{40,41}
<i>GBE1</i>	AR	Adult polyglucosan body neuropathy (APBN)/ Glycogen storage disease IV	Rare ¹⁰⁷
<i>GCH1</i>	AD/AR	GTPCH related DOPAresponsive dystonia (DRD)/ GTP cyclohydrolase deficiency	Rare ¹⁰⁸
<i>GJA1**</i>	AD/AR	Spastic paraplegia with brain hypomyelination	Rare ¹⁰⁹

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Gene	Inheritance	Disease Associations	Diagnostic Yield in Selected Population(s)
<i>GJC2</i> **	AD/AR	Spastic paraplegia 44/ Hypomyelinating leukodystrophy-2 (HLD2)/ Hereditary lymphedema type 1C (LMPH1C)	Rare for HSP ⁴²
<i>IBA57</i>	AR	Spastic paraplegia 74	Rare ¹¹⁰
<i>IFIH1</i> **	AD	Aicardi-Goutieres syndrome 7/Singleton-Merten syndrome 1	Rare ^{111,112}
<i>KIAA0196</i> (<i>WASHC5</i>)	AD/AR	Spastic paraplegia 8/ RitscherSchinzel syndromedevelopmental malformation syndrome (3C syndrome)	Rare ^{43,44} ; Founder mutations in First Nations population in northern Manitoba associate with AR Ritscher-Schinzel syndrome ⁴⁵
<i>KIF1A</i>	AD/AR	Spastic paraplegia 30/Hereditary sensory neuropathy type IIC (HSN2C)	Rare for HSP ^{46,47,48} , Rare for HSN2C ⁴⁹
<i>KIF1C</i>	AR	Spastic paraplegia 58/Spastic ataxia 2	Rare ^{50,51}
<i>PLP1</i>	XL	Spastic paraplegia 2/PelizaeusMerzbacher disease (PMD)	Rare ⁵⁵
<i>PNPLA6</i>	AR	Spastic paraplegia 39/ BoucherNeuhauser syndrome (BNHS)	Rare for HSP ^{56,57} , Rare for BNHS ^{57,58}
<i>POLR3A</i>	AR	Spastic ataxia	Rare ^{121, 122}
<i>PTS</i>	AR	6-Pyruvoyl-tetrahydrobiopterin synthase deficiency	Rare ¹²³
<i>RAB3GAP2</i>	AR	Spastic paraplegia 69/ Warburg micro syndrome/ Martsolf syndrome	Accounts for ~11% of RAB18 deficiency ¹²⁴
<i>REEP1</i>	AD	Spastic paraplegia 31/ Distal hereditary motor neuropathy, type VB (dHMN VB)	Accounts for ~5% of familial HSP ²⁰ ; Rare with dHMN ⁵⁹
<i>REEP2</i>	AD/AR	Spastic paraplegia 72	Rare ^{125,126}
<i>RNASEH2B</i> **	AD	Aicardi-Goutieres syndrome/ Spastic paraplegia with leukodystrophy	Rare ¹¹¹
<i>SACS</i>	AR	AR spastic ataxia of Charlevoix-Saguenay (ARSACS)	Founder mutations in French Canadian ⁶⁰ , Dutch ⁶¹ , and Belgian populations ⁶² . Only gene associated with AR spastic ataxia

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Gene	Inheritance	Disease Associations	Diagnostic Yield in Selected Population(s)
			of Charlevoix-Saguenay (ARSACS)
<i>SERAC1</i> **	AR	Methylglutaconic aciduria, deafness, encephalopathy Leighlike syndrome (MEGDEL)/ Oligosystemic juvenile-onset spastic paraplegia	Rare ¹²⁷
<i>SLC16A2</i>	XL	Spastic paraplegia 22 (AllanHerndon-Dudley syndrome)	Rare ^{63,64}
<i>SLC19A3</i>	AR	Biotin-thiamine-responsive basal ganglia disease	Rare ¹²⁸
<i>SLC25A15</i> **	AR	Hyperornithinemiahyperammonemiahomocitrullinemia syndrome	Rare ^{129,84}
<i>SLC33A1</i>	AD/AR	Spastic paraplegia 42/ Congenital cataracts, hearing loss, and neurodegeneration	Rare ^{130, 131}
<i>SPAST</i>	AD	Spastic paraplegia 4	~40% of familial HSP; ~20% of sporadic HSP ²⁰
<i>SPG7 (PGN)</i>	AR/AD	Spastic paraplegia 7	Accounts for ~2% of familial and ~9% of sporadic HSP ²⁰
<i>SPG11 (KIAA1840)</i>	AR	Spastic paraplegia 11/ Juvenile amyotrophic lateral sclerosis type 5 (ALS5)	Accounts for ~6% of familial and ~7% of sporadic HSP ²⁰ ; ~20% of AR HSP ⁶⁵ ; Accounts for ~40% of AR juvenile ALS ⁶⁶
<i>SPG20</i>	AR	Spastic paraplegia 20 (Troyer syndrome)	Founder mutation in Amish population ⁶⁷
<i>SPG21 (ACP33)</i>	AR	Spastic paraplegia 21 (Mast syndrome)	High frequency in Old Order Amish ⁶⁸ ; otherwise rare ⁶⁹
<i>SPR</i>	AR	Dopa-responsive dystonia due to sepiapterin reductase deficiency	Rare ¹³²
<i>TECPR2</i>	AR	Spastic paraplegia 49	Rare ⁷⁰
<i>TFG</i>	AR/AD	Spastic paraplegia 57	Rare ^{71,72,73,74}
<i>TH</i>	AR	Tyrosine hydroxylase deficiency/Segawa syndrome	Rare ^{133, 134}
<i>TUBB4A</i>	AD	Torsion dystonia 4/ Hypomyelinating Leukodystrophy 6	Rare ^{135,136}
<i>UCHL1</i>	AR	Spastic paraplegia 79	Rare ^{137,138}
<i>VPS37A</i>	AR	Spastic paraplegia 53	Rare ⁷⁵
<i>VPS53</i> **	AR	Progressive cerebello-cerebral atrophy	Rare ¹³⁹
<i>ZFYVE26</i>	AR	Spastic paraplegia 15	Accounts for ~1% of familial HSP ²⁰ ; ~4% of AR HSP ⁵²

*For patients with previous biochemical testing indicative of X-linked adrenoleukodystrophy, single gene testing for the ABCD1 gene is available.

**Deletion/duplication testing of these genes is not included

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