



Medical Genetics Laboratory of Dr. Zeinali

# Evidence of germline mosaicism in Hemophilia A: implication of genetic counseling

E-P19.04.

H. Noferesti<sup>1</sup>, F. Rahiminejad<sup>1</sup>, Z. Sharifi<sup>1</sup>, T Shirzad<sup>1</sup>, A. Bandehi Sarhadi<sup>1</sup>, F. Golnabi<sup>1</sup>, M. Abiri\*<sup>2,3</sup> S. Zeinali\*<sup>3,1</sup>.

1.Dr. Zeinali's Medical Genetics Laboratory, Kawsar Human Genetics Research Center, Tehran, Iran.

2.Department of Medical Genetics, School of Medicine, Tehran University of Medical Sciences, Tehran, Iran.

3.Department of Molecular Medicine, Biotechnology Research Center, Pasteur Institute of Iran, Tehran, Iran.

\*Corresponding authors:

[Siruszeinali@yahoo.com](mailto:Siruszeinali@yahoo.com)

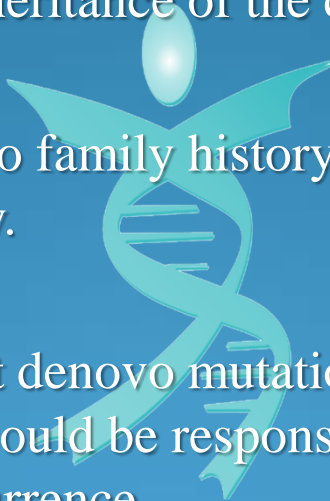
[Mary\\_abiri86@yahoo.com](mailto:Mary_abiri86@yahoo.com)

Medical Genetics Laboratory of Dr. Zeinali



## Introduction

- Hemophilia A is an X-linked, recessive disorder caused by deficiency of functional plasma clotting factor VIII (FVIII), which may be inherited or arise from spontaneous mutation.
- This study reports a family with an affected hemophilia boy in which germline mosaicism in the mother complicates the X-linked inheritance of the disease.
- There was no family history of hemophilia in the family.
- It seems that denovo mutation or germline mosaicism could be responsible for the disease occurrence.



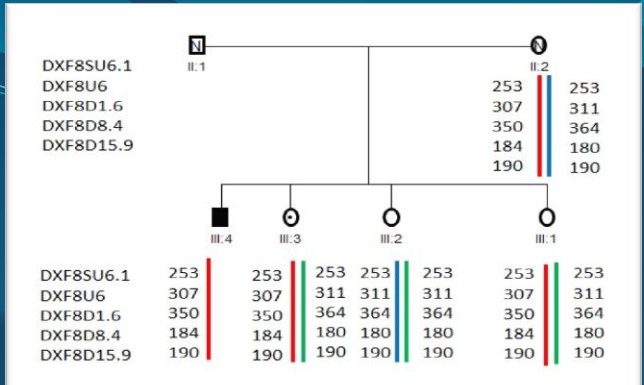


## Materials & Methods

- Genetic counseling & drawing pedigree
- Blood sample collect & getting **informed consent**
- Direct sequencing of FVIII gene in proband
- Genetic testing of mother
- Track the mutated allele using linkage analysis with the help of **STR** (Short Tandem Repeat) markers linked to the FVIII gene.
- Haplotype analysis

## Results

- Direct sequencing in proband revealed **c.3637delA (p.I1213>Ffs5)** mutation in the 14<sup>th</sup> exon.
- genetic testing of the mother showed no mutation.
- Haplotype & linkage analysis showed his mother was a carrier
- One of his sisters was normal with direct mutation analysis but haplotype mapping suggested her as a carrier.
- The second sister was normal with the direct and indirect approaches.
- The third one was carrier with both methodologies.



# Discussion

- Based on the obtained results, one possible mechanism could be germline mosaicism of the mother
- **Gonadal mosaicism usually occurs in females and can complicate data analysis.**
- DNA testing may help carrier detection but negative results will not rule out the possibility of mosaicism.
- This observation suggests the importance of confirming the carrier status of the family members with different strategies
- Since mosaicism after having an affected child **is consistent with gonadal/somatic mosaicism**, the recurrence risk is significantly increased. The results have important implication in genetic counseling in X-linked disorders

