



ISSN NO. 2320-5407

Journal homepage: <http://www.journalijar.com>

INTERNATIONAL JOURNAL
OF ADVANCED RESEARCH

RESEARCH ARTICLE

Evaluating Age and Gender of Iranian Dystonia Patients with no Mutation in DYT1 Gene

Sahereh Rahnavard, Dr. Mohammad Hamid. Dr. Reza Mahdian

Department of biology, Ahar branch, Islamic Azad University of Ahar, Ahar, Iran

Manuscript Info**Manuscript History:**

Received: 13 September 2013
Final Accepted: 22 September 2013
Published Online: October 2013

Key words:

gender; Dystonia patients;
DYT1 gene

Abstract

Dystonia is a neuronal- motional disease that occurs due to pathological injuries to muscle and leads to involuntary and tick-like movements because of long-term muscle contraction and finally leads to paralysis and unusual situations in body that can occur in one or a group of muscles.

Copy Right, IJAR, 2013., All rights reserved.

Introduction

This disease is almost known with muscle contraction and repetitive twisted movements that involves agonist and antagonist muscles. It has been observed firstly in Ashkenazi Jews population with prevalence of 1 in 9000 people while in other population prevalence of 1 in 16000 with low fitness around 30% has been reported.

Environmental factors causing this disease are not yet known in some cases. This type is called pr Dystonia type I. Environmental factors for Dystonia type II are known including spinal and brain damages, injuries, insufficient oxygen at birth, infections, drugs side-effects, increased bilirubin at childhood and some local diseases inside skull. Dystonia is included in early and late classes based on onset age. Body distribution can be focal, local, generalised, multifocal, hemidystonia and segmental.

Dystonia I

Some patients with Dystonia I have mutation in certain genes such as DYT1 and DYT6. These genes are inherited as autosomal dominant. The other genes have shown different inheritance. The most painful type is the early onset Dystonia I that involves all muscles and mostly shows generalized type. DYT1 and DYT6 are mainly responsible for this disease.

Here in this study we have evaluated the age and gender of 69 Iranian Dystonia type I patients without any mutation.

Average onset age for DYT1

Average onset age for these patients was 13.4 years old, approximately two times more than DYT1+.

Onset age before age 12

In studied patients, 31.88% (22 people) have shown the disease before age 12, of which 10.14% (7 people) were before age 4, 13.04 % (9 people) were between ages 4 to 8 and 7.24 % (5 people) were before age 12. Men to women ratio for patients in this age range were 1:0.8. Also, number of affected men in age interval 7-8 was three times more than women.

Affected women before age 12

38.42 % (10 people) of affected women have shown the disease before age 12, of which 70 % (7 people) were before age 8 and 30 % (3 people) were between ages 8 to 12.

Affected men before 12

30.23 % (13 people) of affected men have shown the disease before age 12, of which 69.23 % (9 people) were before age 8 and 30.76 % (4 people) were between ages 8 to 12.

Onset age more than 12 years

28.98 % (20 people) of patients have shown 12-48 years old onset age, of which 45 % (9 people) were women and 55 % (11 people) were men. The disease in lower ages was shown by women more than men, but at older people number of affected men were more than women. The onset age has not been identified for 41.16 % of patients.

Body distribution

Generalized

Generalized distribution was shown in 26.08 % (18 people) of patients, of which 61.11% (11 people) and 38.88% (7 people) were men and women, respectively and men to women ratio was 1:0.8. Different age range has been observed in this type of body distribution. However, women's onset age was mostly at childhood and only one case has shown the disease at age 48, while men's onset age has shown a normal distribution.

Focal

10.14 % (7 people) have shown focal type, of which 57 % (4 people) and 42 % (3 people) were men and women respectively and men to women ratio was 1:0.75. The onset age for this type was 21.5 ± 6.5 and as shown it can be seen mostly at adulthood without any early type.

Multi focal

Multi-focal distribution was the most frequent form after generalized type. Multi focal type was seen in 14.70 % (9 people) of patients, of which 66.66% (6 people) and 33.33 % (3 people) were men and women respectively with men to women ratio 1:0.5. The onset age was 14 ± 10 years which only one patient has shown the disease as early type at age 4.

Segmental

10.14 % (7 people) have shown segmental distribution that 42.85 % (3 people) and 57.14 % (4 people) of them were men and women respectively and men to women ratio was 1:1.35. This is the only type that is more frequent in women than men and is shown just at adulthood. Only one early type patient has a segmental distribution.

Hemidystonia

5.7 % (4 people) of patients have shown Hemidystonia distribution, of which 75% (3 people) and 25 % (1 people) were women and men respectively with men to women ratio 1:3.

Writhing cramp

This type is only seen in one man with onset age 43 years.

Discussion and conclusion

In this study, men to women ratio in generalized and multi focal were 1:0.8, while men to women ratio have decreased in other types. The onset age at childhood can be seen mostly in multi focal patients.

References:

1. Akbari M., 2012, Clinical Features, DYT1 Mutation Screening and Genotype-Phenotype Correlation in Patients with Dystonia, Iran. Med Princ Pract. 21, 462-466.
2. Albanese A., 2006, systematic review on the diagnosis and treatment of primary (idiopathic) dystonia and Dystonia plus syndromes, report, an EFNS/MDS-ES Task Force. Eur J Neurol. 2006. 13, 433-444.
3. Albanese A., 2007, Dystonia. clinical approach, Parkinsonism and Related Disorders, 13, S356-S361.
4. Alterman M., 2004, Deep brain stimulation for dystonia, Expert Review. Medical Devices. 1, 1, 33-41.
5. Breakefield X., 2001, TorsinA: movement at many levels., Neuron. 31, 9-12. Berardelli A., 1998, The pathophysiology of primary dystonia. Brain. 1998, 121, 7, 1195-1212.
6. Bressman S., 1989, Idiopathic dystonia among Ashkenazi Jews: evidence for autosomal dominant inheritance, Ann Neurol. 26, 612-620.
7. Bressman S., 2000, The DYT1 phenotype and guidelines for diagnostic testing, Neurology. 54, 1746-1752.
8. Carvalho Aguiar Patricia M., Laurie J Ozelius, 2002, Classification and genetics of dystonia, Lancet Neurology, 2002. 1, 316-25.
9. CD Marsden, Investigation of dystonia, Adv Neurol. 50:35-44.

10. CKamm, 1999, GAG deletion in the DYT1 gene in early limb-onset idiopathic torsion dystonia in Germany, *MovDisord.* 14,681-683.
11. C. Oakes C. La Salle S, Robaire B Trasler j, 2006, Evaluation of a Quantitative DNA Methylation Analysis Technique Usingm Methylation-Sensitive/Dependent Restriction Enzymes and Real-Time PCR. *LandesBioscience ,Epigenetics* 1:3, 146-152.
12. Ellis Thomas L., 2011, Dystonia and the Role of Deep Brain Stimulation, *International Scholarly, NetworkISRN*SurgeryVolume 193718, 5 ,10.5402/193718.
- 13.EM Valente, 1998, The role of DYT1 in primary Tirorsion dystonia , *Europe.Brain.* 121:2335-2339.
14. Granata A, Schiavo G, Warnet T. 2009, Torsine A and Dystonia: From Nuclear envelope to synapse, *JOURNAL OF NEUROCHEMISTRY*: 10.1111/j.1471-4159.2009.06095.x.
15. GoetzC, Chmura T, Lanska D, 2001. History of Dystonia: Part 4 of the MDS-Sponsored History of Movement Disorders Exhibit. Vol. 16, No. 2, 2001, pp. 339–345 .
- 16.Gavarini Sophie, Corinne Cayrol, , Tania Fuchs, , Natalia Lyons, Michelle E. Ehrlich, Jean-Philippe Girard, , and Laurie J Ozelius, 2010. A Direct Interaction between Causative Genes of DYT1 and DYT6 Primary Dystonia, *New York, N.Y Ann Neurol.* October ; 68(4), 549–553.
17. KammChristoph, 2006, Early onset torsion dystonia (Oppenheim's dystonia), *Orphanet Journal of Rare Diseases*, 1,48.
- 18.KGrundmann, 2003, Frequency and phenotypic variability of the GAG deletion of the DYT1 gene in an unselected group of patients with dystonia, *Arch Neurol.* 60,1266-1270.
- 19.KRostasy, 2003, TorsinA protein and neuropathology in early onset generalized dystonia with GAG deletion, *Neurobiol Dis.* 12,11-24.
- 20.K Nakashima, 1995, Prevalenceof focal dystonias in the western area of TottoriPrefecture.*Japan.Movement Disorders..* 10, 440–443.
21. L Geyer Howard, 2006, The diagnosis of dystonia, *Lancet Neurol*,5, 780–90.
- 22.Mu" ller Ulrich, 2009, The monogenic primary dystonias. *Brain..* 132; 2005–2025 .
- 23.Ozelius L J. 1997, The early –onest torsion dystonia gene (DYT1) encodes an ATP-binding protein, *Net Genet.*17,40-48.
- 24.PetrucciSimona, 2013, Genetic issues in the diagnosis of dystonias, *Frontiers in Norology* 10 April .
- 25.P Greene, 1995, Spread of symptoms in idiopathic torsion dystonia,*MovDisord.* 1995. 10,143-152.
- 26.P Opal.2002, Intrafamilial phenotypic variability of the DYT1 dystonia: from asymptomatic TOR1A gene carrier status to dystonic storm, *MovDisord.* 17,339-345.
- 27.RE Burke, 1986, Analysis of the clinical course of non-Jewish, autosomal dominant torsion dystonia, 1,163-178.
- 28.R. D. G. Jamora, A. K. Y. Tan and L. C. S. Tan,2006. A 9-year review of dystonia from a movement disorders clinic in Singapore. *European Journal of Neurology.* 13, 77–81.
- 29.REGoodchild, 2005, The AAA+proteintorsin A interacts with a conserved domain Present in LAP1 and novel ER protein, *J Cell Bio*,1168, 855-862.
- 30.S Fahn,1987, Classification and investigation of dystonia, *Mov Disord..*2, 332.
- 31.S, Fahn. 1998 ,Classification of dystonia,*Adv Neurol.* 78,1-10.
- 32.S Matsumoto, 2003, Epidemiologyof primary dystonias in Japan, comparisonwith western countries. *Movement Disorders b.* 18,196–1198.
- 33.T Gasser., 1998, Phenotypic expression of the DYT1 mutation: a family with writer's cramp of juvenile onset, *Ann Neurol.*44,126-128.
- 34.Tanabe L, Kim C., Alagem N, and Dauer W, Primary dystonia: molecules and mechanisms. *Nat Rev Neurol*; 5(11): 598–609. doi:10.1038/nrneurol.2009.160.
- 35.TV Naismith, 2004, TorsinA in the nuclear envelope, *ProcNatlAcadSci U S A.* 101,7612-7617.
- 36.Wichmann T., 2008, Dopaminergic dysfunction in DYT1 dystonia, *Experimental Neurology*, 212 -242.
- 37.Zorzi G., Federica Zibordi, Barbara Garavaglia, Nardo Nardocci 2009, Early onset primary dystonia, *europen journal of paediatric neurology*,13 ,488 – 492.