

2018 ACOI BOARD REVIEW

GENETICS

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Founding Dean & Chief Academic Officer
Idaho College of Osteopathic Medicine



Chromosomal Abnormalities

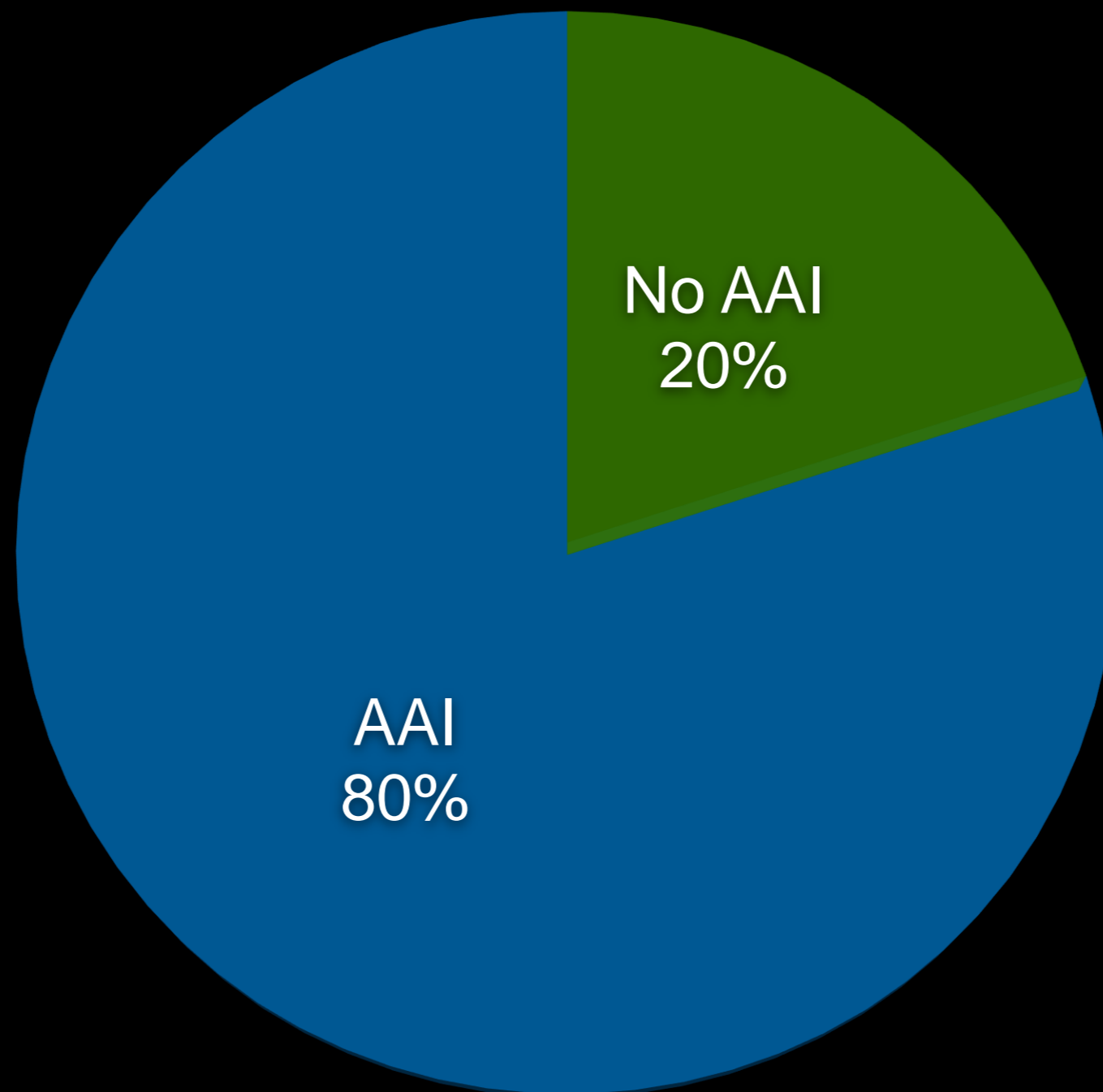
Klinefelter Syndrome, Turner Syndrome, Fragile X-linked mental

Chromosomal

Down Syndrome (trisomy 21)

Increased ALL
Early Alzheimer Dementia
VSD & AV Canal Defects

ATLANTOAXIAL INSTABILITY (AAI) IN DOWN SYNDROME



cervical spine radiographs should be ordered to assess for odontoid-axial stability in patients with rheumatoid arthritis & Down Syndrome

Chromosomal

Klinefelter (47,XXY)

Increased Risk for Germ Cell Tumors
Infertility/Small Testes
Tall/Eunuchoid Habitus

Chromosomal

Turner (45, XO)

Normal Mentation

Associated with Coarction/Bicuspid Aorta

Chromosomal

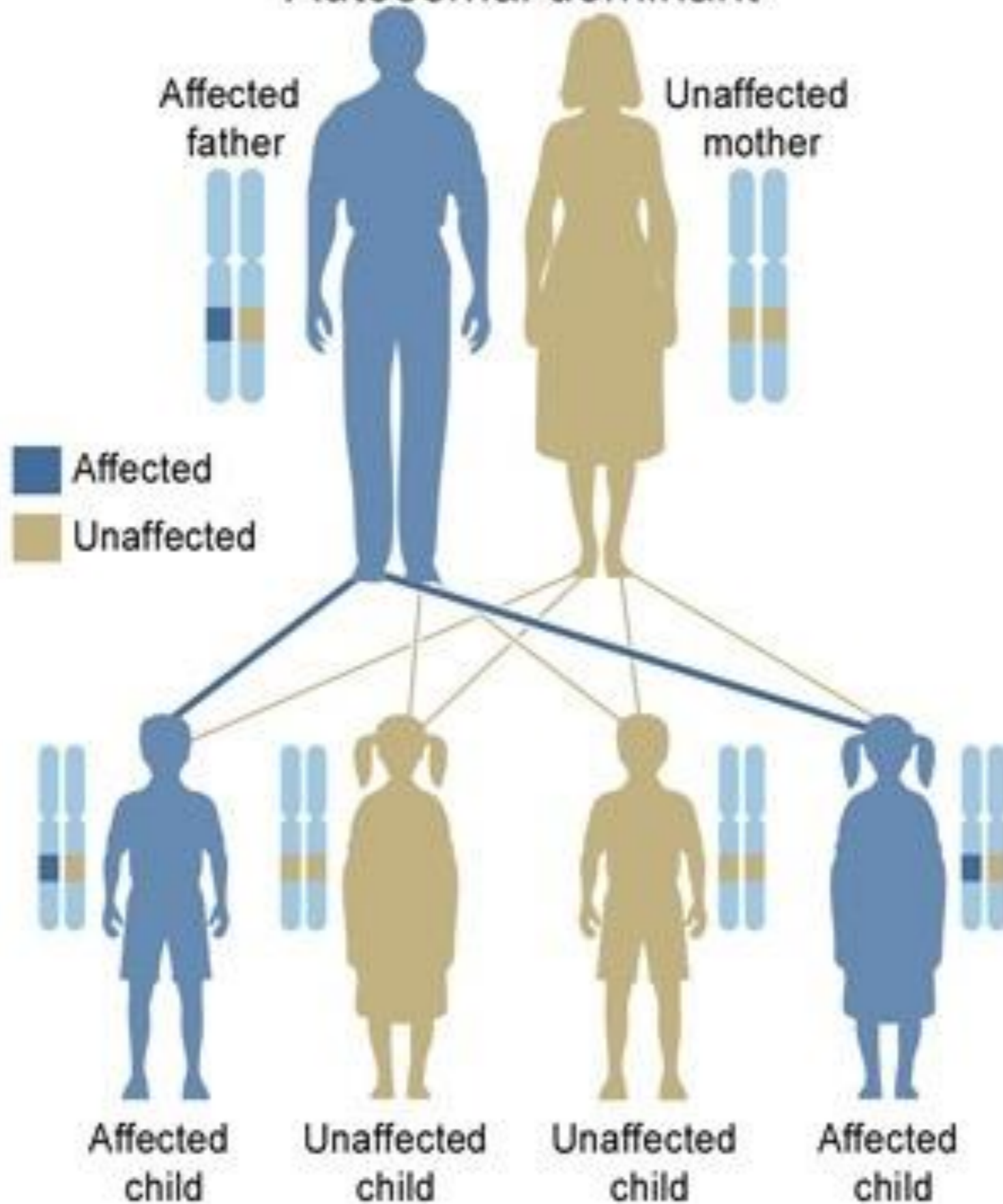
Fragile X-linked mental retardation syndrome

Look normal or with
thin face/large jaw & ears/enlarged testes

Autosomal Dominant

y (familial hypercholesterolemia), Lynch syndrome, multiple

Autosomal dominant



Autosomal
Dominant

Marfan Syndrome

MVP & Ascending Aorta Dilatation
Ectopic Lens
Fibrillin Gene

Ehlers-Danlos Syndrome

Autosomal
Dominant

collagen Defect - Hypermobility/Fragile Skin
MVP/Arterial Aneurysms/Organ Ruptures

Autosomal
Dominant

BRCA mutations

50-80% will develop breast ca
BRCA 2 associated with male breast ca

Autosomal
Dominant

Hereditary Spherocytosis

Cytoskelatin Defect
Pigmented Gallstones/Hemolysis
Spleneectomy can be helpful

Huntington Disease

Autosomal
Dominant

HTT Gene Mutation/CAG nucleotide repeat

PEARL: PERFORM GENETIC
COUNSELING (1HOUR) BEFORE
TESTING (E.G. HUNTINGTON FAMILY
HX)

Autosomal
Dominant

Lynch syndrome

Hereditary Non-polyposis Colon CA
5% of Colon CA

Autosomal Dominant

Multiple Endocrine Neoplasias types I, IIA, and IIB

TYPE	ASSOCIATION	COMMENTS
1	TUMORS OF PARATHYROID, PITUITARY, PANCREAS	HYPERPARATHYROIDIS M IS MOST COMMON SIGN
2 (A, B, FAMILIAL MEDULLARY THYROID CARCINOMA)	MEDULLARY THYROID CARCINOMA	
4	SIMILAR TO TYPE 1	

Polycystic Kidney Disease

Autosomal
Dominant

PKD 1 or 2 Gene Mutations

Strong Association with Intracranial Aneurysms

von Willebrand Disease

Autosomal
Dominant

Women are more commonly diagnosed (menses)

Hypertrophic Cardiomyopathy

Autosomal
Dominant

Murmur Decreases with Hand Grip

Autosomal
Dominant

Myotonic Dystrophy

Triplet repeat (myotonin protein kinase gene)

Prolonged rhythmic discharges on EEG

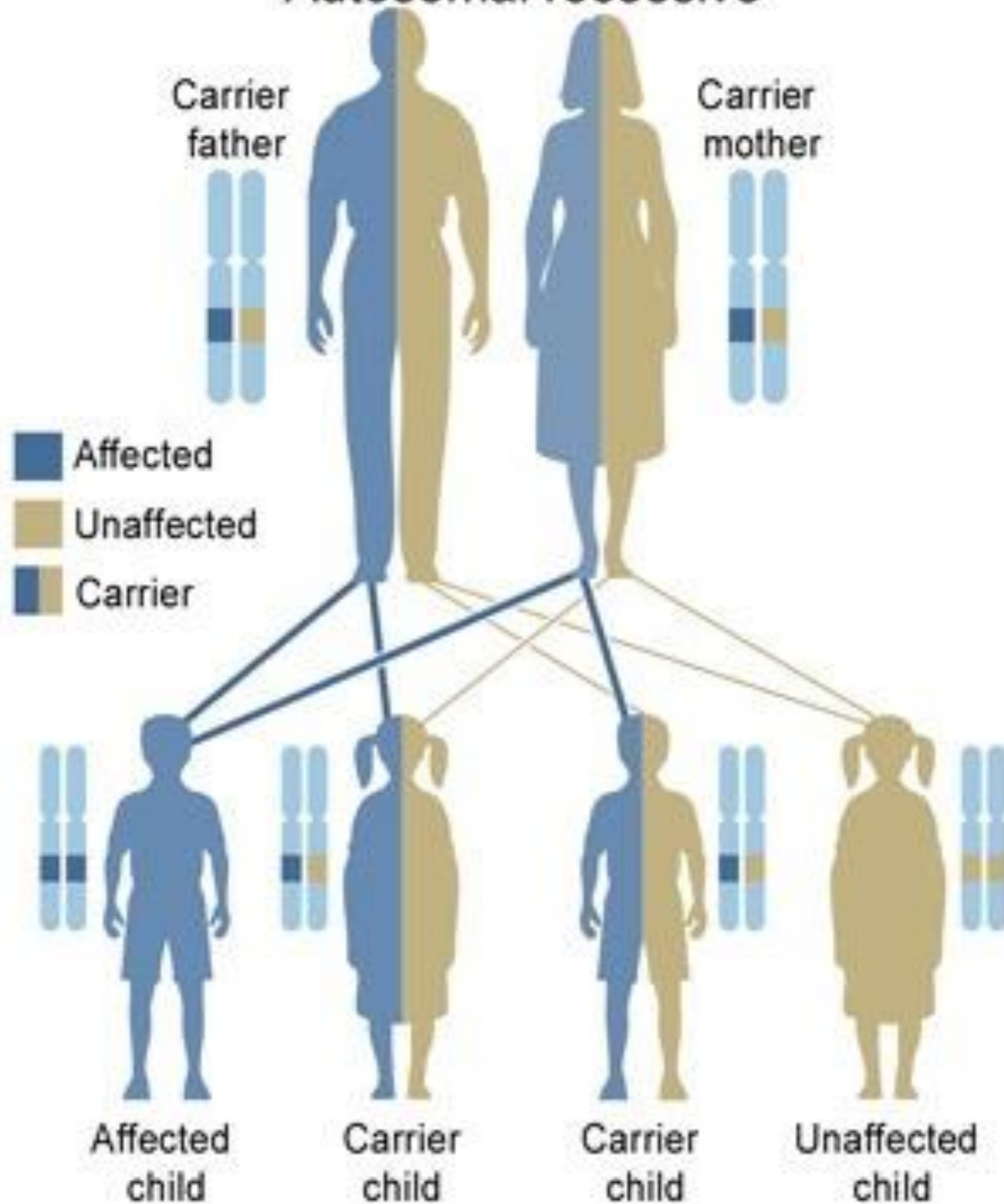
A type of muscular dystrophy

Onset in 2nd/3rd decade

Autosomal Recessive

stic fibrosis, hemochromatosis, sickle cell anemia, the thala

Autosomal recessive



Autosomal
Recessive

α 1 -Antitrypsin Deficiency

Basilar Emphysema

Autosomal
Recessive

Cystic Fibrosis

Think Intussusception with Abdominal Pain

Burkholderia cepacia in
addition to pseudomonas

Autosomal
RECESSIVE

Hemochromatosis

"Hook-Like Osteophytes" in 2nd & 3rd
MCP Joints

HFE gene testing if transferrin
saturation >45%

Autosomal
Recessive

Sickle Cell Anemia

VAL substituted for GLU

Autosomal
RECESSIVE

Thalassemia

Alpha or Beta - Named after Missing Part

Autosomal
Recessive

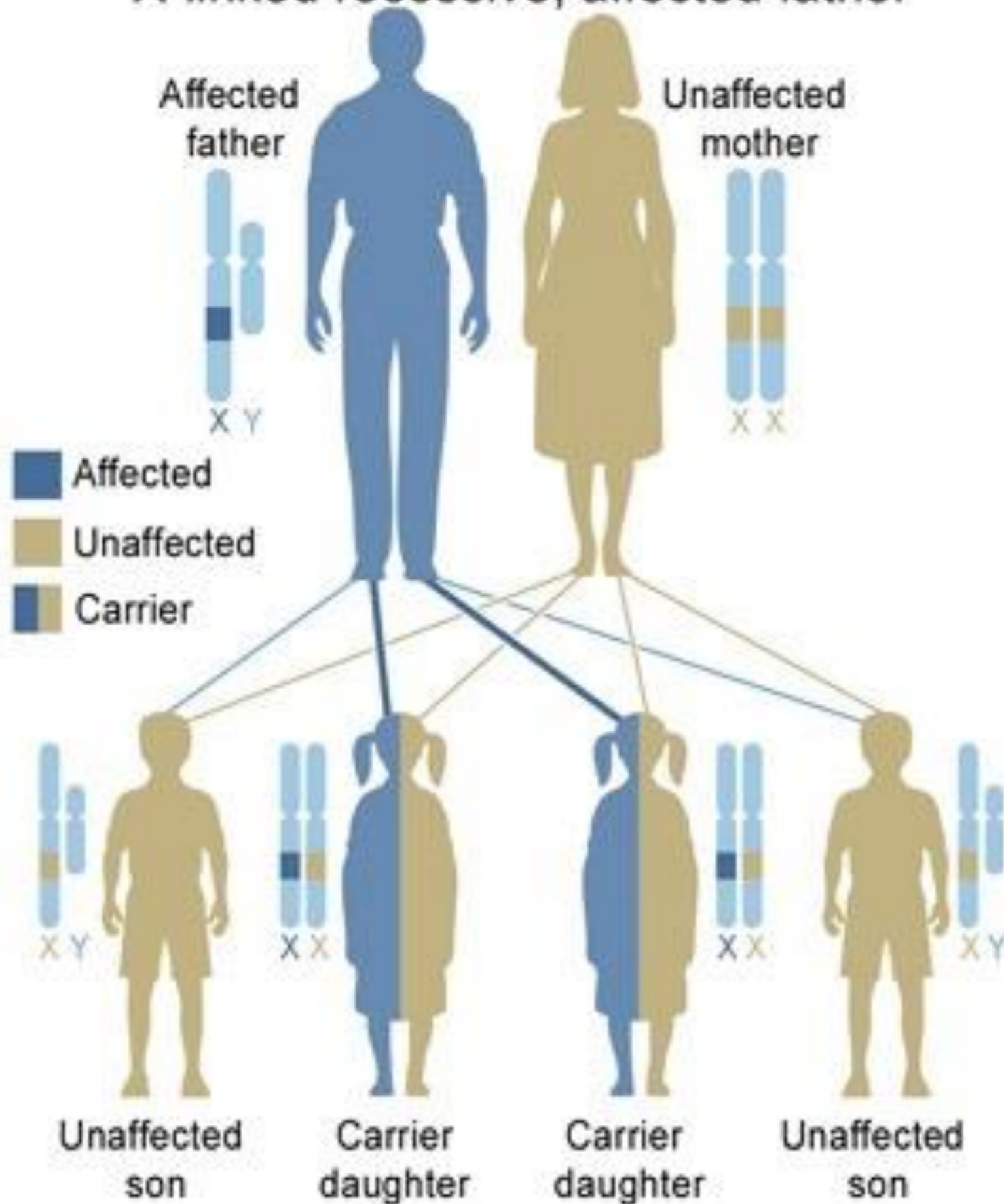
Wilson Disease

Mutations of the ATP7B gene

X-Linked Recessive

G6PD, Hemophilia A & B

X-linked recessive, affected father



X-Linked Recessive

G6PD

Shorter RBC Lifespan

Occurs in 10% of African American Males

Avoid: NSAID, ASA, Nitrofurantoin,
Quinine, Sulfa, Antimalarials

X-Linked Recessive

Hemophilia A & B

Almost exclusively in males
Typically diagnosed at a Very Young Age

Mitochondrial Mutations

episodes of lactic acidosis, and stroke (MELAS), myoclonic

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Idaho College of Osteopathic Medicine - Applicant Status



Proposed

IDAHO

College of Osteopathic
Medicine