



Grotte de Lascaux

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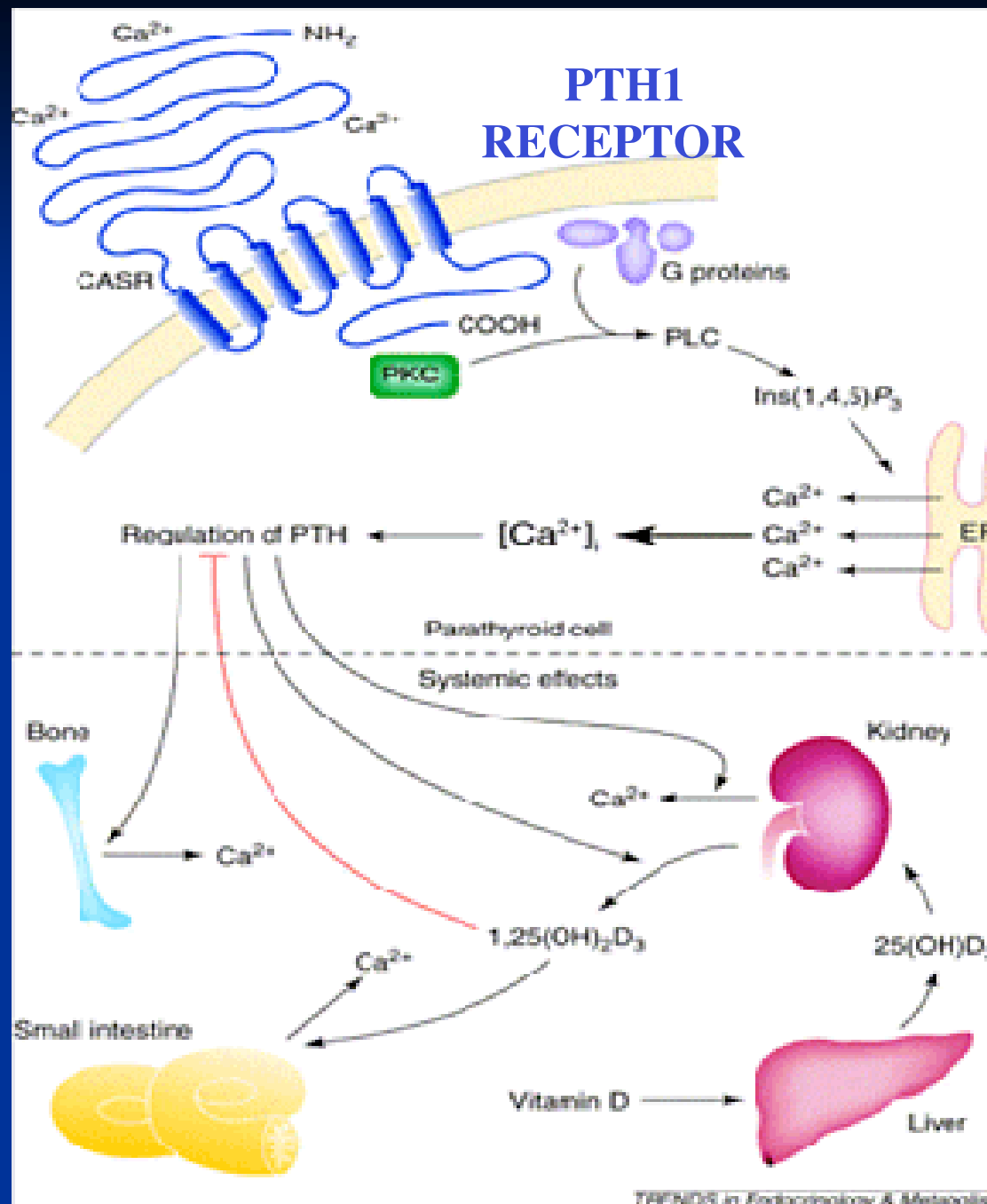
PSEUDO HYPOPARATHYROIDISM

PSEUDOHYPOPARATHYROIDISM

Pseudohypoparathyroidism (PHP) is a heterogeneous group of genetic disorders whose common feature is parathyroid hormone resistance (PTH)

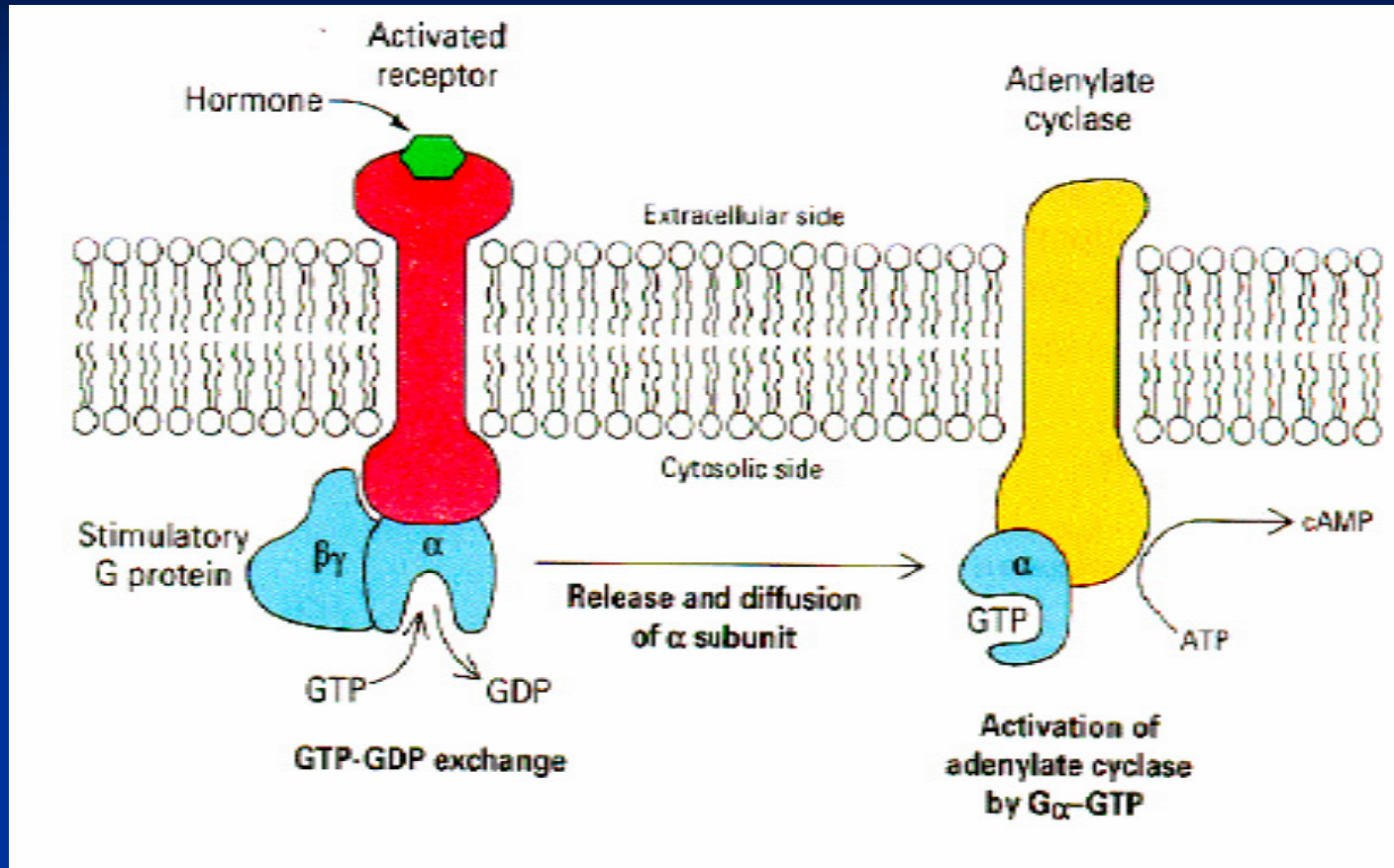
Biochemical features:

- Hypocalcemia
- Hyperphosphatemia
- Increased serum concentration of PTH
- Decreased serum concentration of 1,25-dihydroxy vitamin D3



Il recettore di tipo 1 del PTH è prevalentemente espresso a livello renale e sugli osteoblasti e il suo meccanismo di azione è mediato dalla proteina Gs-alfa

Gs- α protein action



La subunità alfa della proteina Gs è un mediatore del messaggio di alcuni ormoni proteici (PTH, TSH, FSH/LH, GHRH, ecc.) dalla membrana cellulare al 2° messaggero (AMPc).

Quando l'ormone si lega al recettore di membrana, la proteina Gs si attiva: la subunità α si scinde dalle subunità β - γ , quindi si lega al GTP e scatena una cascata di eventi che porta all'attivazione dell'adenilciclastasi.

Questa, a sua volta, determina la formazione dell' **AMPc**, 2° messaggero del messaggio ormonale, che permette quindi l'effetto dell'ormone

Hormones using cAMP as a second messenger

Calcitonin

Chorionic gonadotropin

Corticotropin

Epinephrine

Follicle-stimulating hormone

Glucagon

Lipotropin

Luteinizing hormone

Growth Hormone Releasing Hormone

Melanocyte-stimulating hormone

Norepinephrine

Parathyroid hormone

Thyroid-stimulating hormone

Vasopressin

Classification of PHP

ACCORDING TO DIFFERENT PHENOTYPES AND PATHOGENESIS

- **PHP Ia:** segni dismorfici della AHO, resistenza al PTH, resistenza ormonale multipla (TSH, LH/FSH, GHRH) e ridotta escrezione urinaria di AMPc dopo infusione di PTH
ridotta attività della proteina Gs-alfa
- **PHP Ib:** non segni di AHO, resistenza al PTH e in alcuni casi ad altri ormoni
normale espressione della proteina Gs-alfa
- **PHP Ic:** segni di AHO, resistenza ormonale multipla ma, a differenza del tipo Ia
normale attività della proteina Gs-alfa, alterazione del legame del PTH col recettore
- **PHP II:** resistenza al PTH e ridotta risposta fosfaturica alla somministrazione di PTH con normale escrezione di AMPc urinario
- **PseudoPHP:** solo fenotipo Albright, non resistenza al PTH ed altri ormoni
normale attività della proteina Gs-alfa

Albright's hereditary osteodystrophy (AHO)

Albright's hereditary osteodystrophy (AHO) is a complex genetic disorder (AD) characterized by multiple dysmorphic features

short stature

obesity

round face and short neck

brachydactyly

(shortened fourth and fifth metacarpals or metatarsals)

heterotopic ossifications, osteoma cutis

mental retardation

intracranial calcification



Figure 1 - Patient with Albright hereditary osteodystrophy. Round face, low nasal bridge, and short neck.



A**B****C****D**





CA	11 yrs
BA	10 yrs
Weight	38 kg ($>75^{\circ}$)
Height	126.8 cm ($<3^{\circ}$)



- **PTH** 934 pg/ml (nv 12-72)
- **Total Calcium** 7.5 mg/dl (nv 8.6-10.2)
- **Phosphate** 8.4 mg/dl (nv 4-6.5)

- **TSH** 12.8 μ U/ml
- **GH** ITT test peak 3.7 ng/ml
Arginine test peak 2 ng/ml

Molecular analysis of *GNAS1*
heterozygous nonsense mutation
(Arg-> stop codon) Q35X Ex1

maternal transmission



PHP Ia

Signs of hypocalcemia

- Seizures
- Tetany
- Cataracts
- Dental abnormalities: delayed eruption, enamel hypoplasia, apical blunting hypodontia, pulp calcification



Patient with severe trismus straining to show maximum opening of his mouth limited by bony ankylosis of the temporo-mandibular joint



Figure 5 - Panoramic radiograph showing lack of anodontia, unaltered chronology of tooth eruption, and crowded teeth.



Figure 6 - Clinical intrabuccal exam showing calculus, accumulation of bacterial plaque and areas of spontaneous bleeding at the anterior superior and inferior region.



Heterotopic ossification often follows an inflammatory phase characterized by local swelling, pain, erythema and variable joint restriction that may include ankylosis, although it may also be asymptomatic

Palpable masses are present in the later stages



Extensive subcutaneous calcification in the right submandibular region and neck



Panoramic radiograph with visible calcification of the right cheek

DuVal MG, Davidson S, Ho A et al. JCDA 2007; 63:845-850

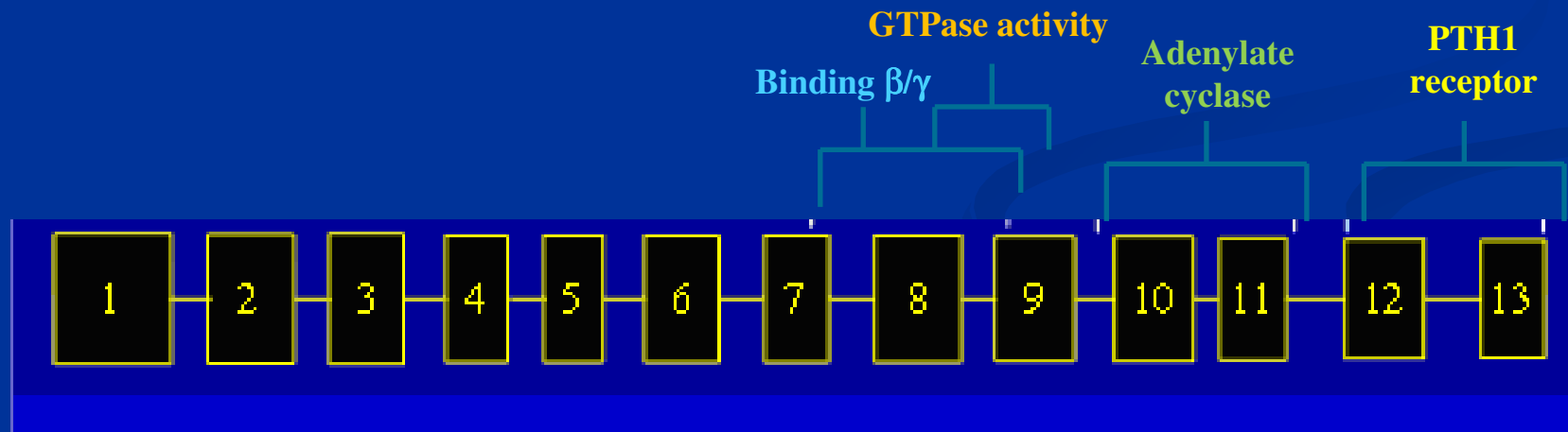
Pathogenesis of heterotopic ossification

- Inflammatory factors resulting from denervated tissues
- Disrupted calcium homoeostasis
- Immobilization
- Prolonged pressure on periarticular structures
- Microtrauma
- Vascular stasis
- Hypoxia
- Hyperthermia
- Genetic factors

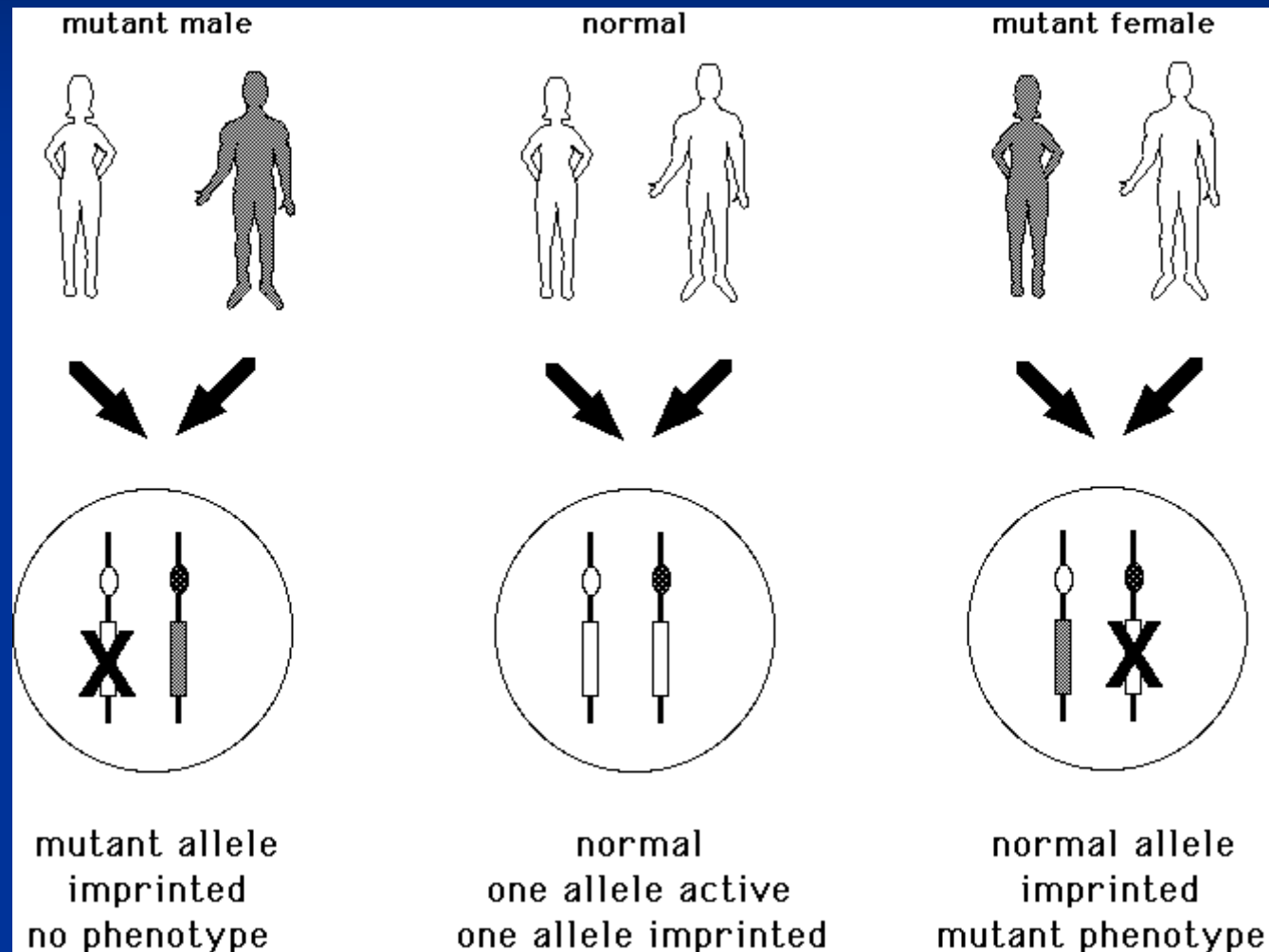
GNAS locus and PHP

The human Gs- α gene is located at 20q13.2-13.3

GNAS is a complex **imprinted** gene that generates multiple gene products through the use of multiple promoters and first exons that splice onto a common set of downstream exons (exons 2–13)

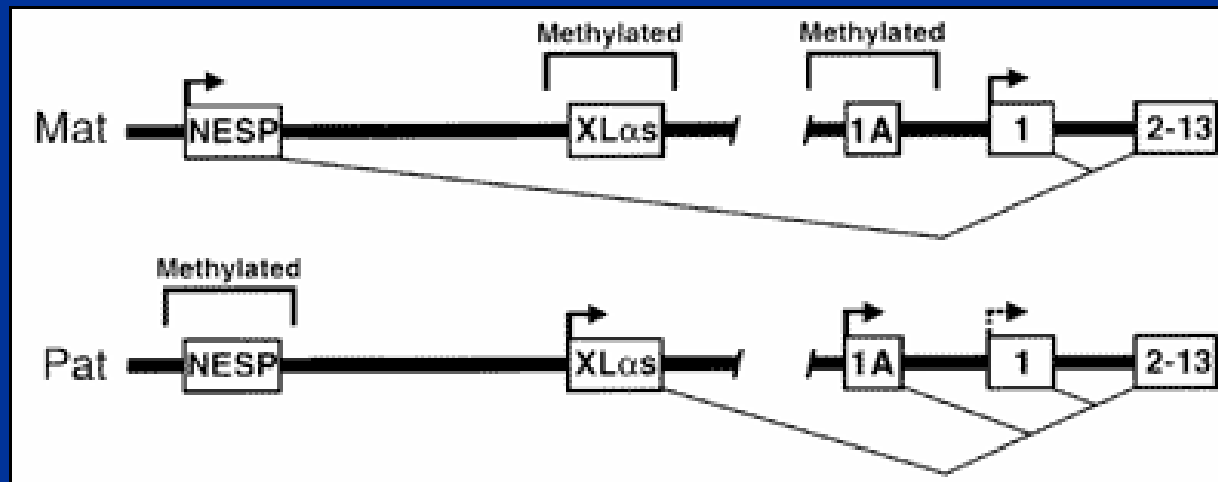


Imprinting is epigenetic phenomenon affecting a number of genes, which leads to transcriptional silencing of one parental allele and is often associated with methylation of the inactive promoter



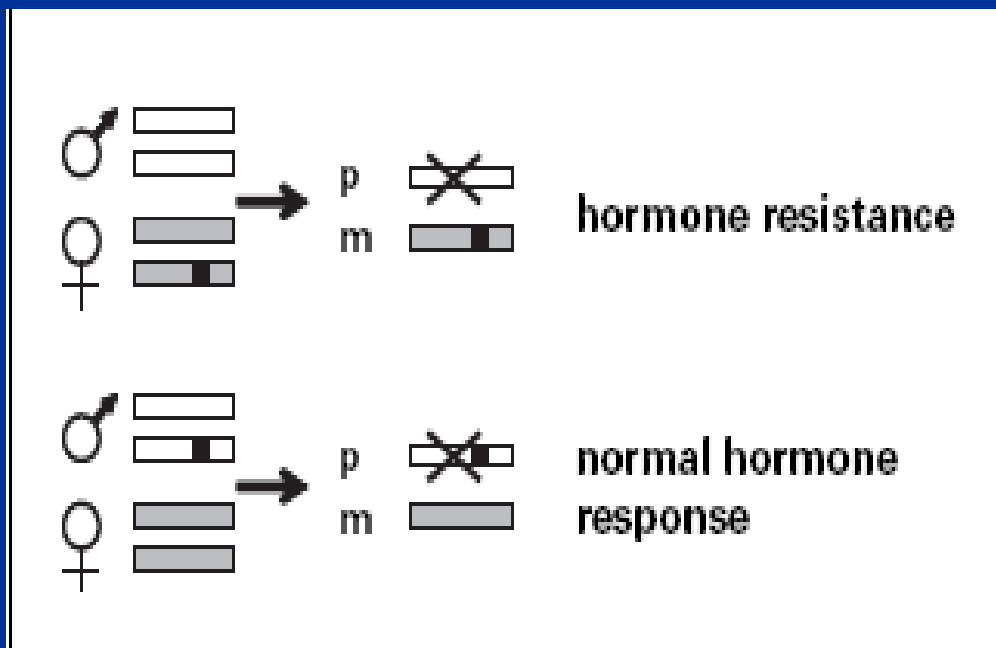
GNAS structure and function

- **NESP55** (chromogranin-like protein) $\Rightarrow$ **maternal** allele
- **XL α s** $\Rightarrow$ **paternal** allele
- The promoter and **exon 1A** generates ubiquitously expressed transcripts that are presumed to be untranslated $\Rightarrow$ **paternal** allele
- **Gs- α** protein is biallelic $\Rightarrow$ imprinting tissue-specific of **paternal** allele



Epigenetic mechanisms in PHP

Tissue-specific imprinting



PHP Ia

renal proximal tubules
thyroid
pituitary
ovary

AHO

PPHP

Clinical and molecular features of different PHP forms

	PTH resistance	Additional hormone resistance	Typical AHO features	Gs- α activity	<i>GNAS</i> defect
PHP Ia	yes	yes	yes	reduced	Gsα mutation (maternal)
PPHP	no	no	yes	—	Gsα mutation (paternal)
PHP Ib	yes	some cases	no	normal	<i>STX16</i> deletion affecting <i>GNAS</i> imprinting
PHP Ic	yes	yes	yes	normal	Gsα mutation in PTH1 receptor coupling
PHP II	yes	no	no	—	—

GNAS mutations and PHP



Loss of
function
germlines

AHO, PHP Ia, Ic, PPHP

Imprinting
defect

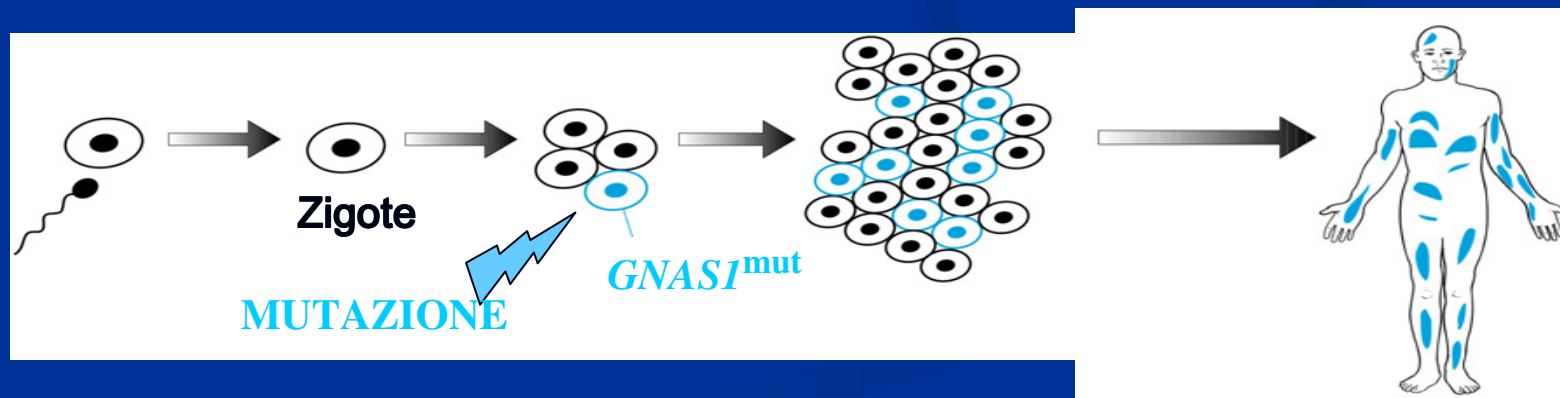
PHP Ib

GNAS
mutations

Gain of
function
somatic

Endocrine tumours
Fibrous dysplasia
McCune Albright
Syndrome

Gs α activating mutations $\longrightarrow$ **AMPc hyperproduction**



Mosaico

GNAS inactivating mutations

GNAS
loss of
function

AHO
PHP Ia

PPHP
POH

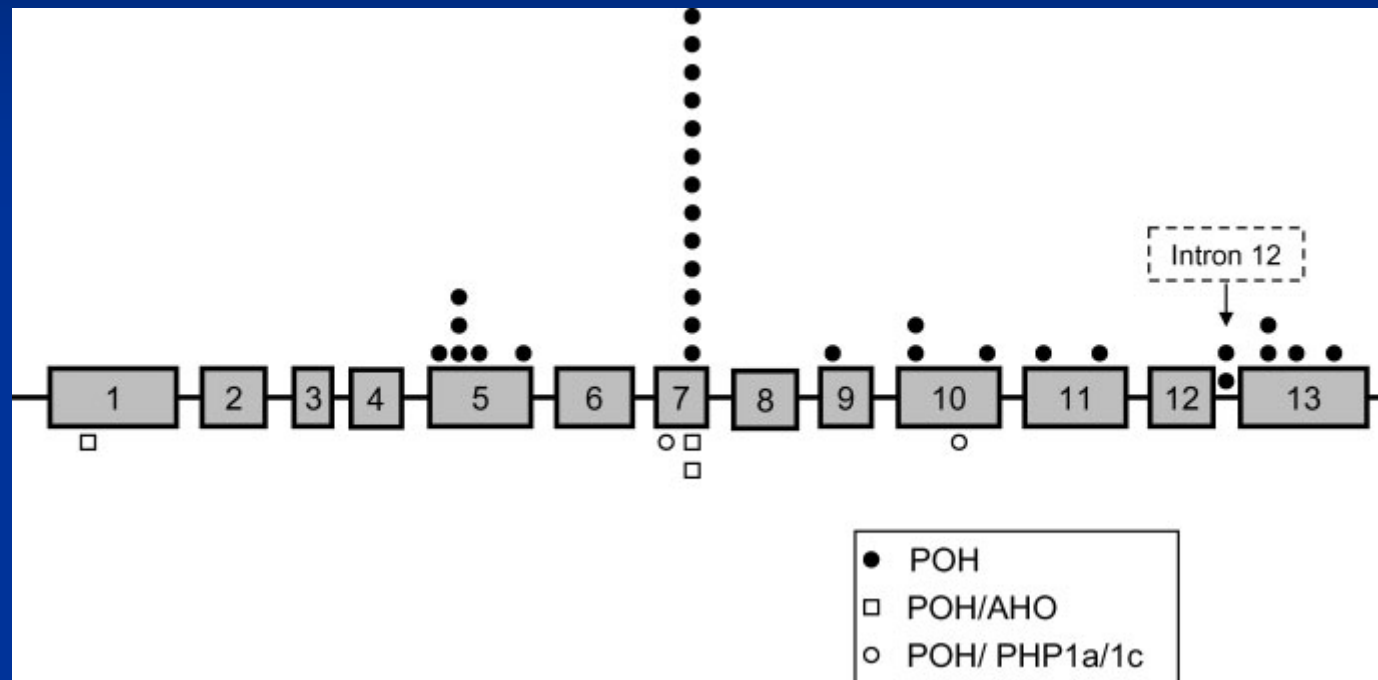


MATERNAL
INHERITANCE



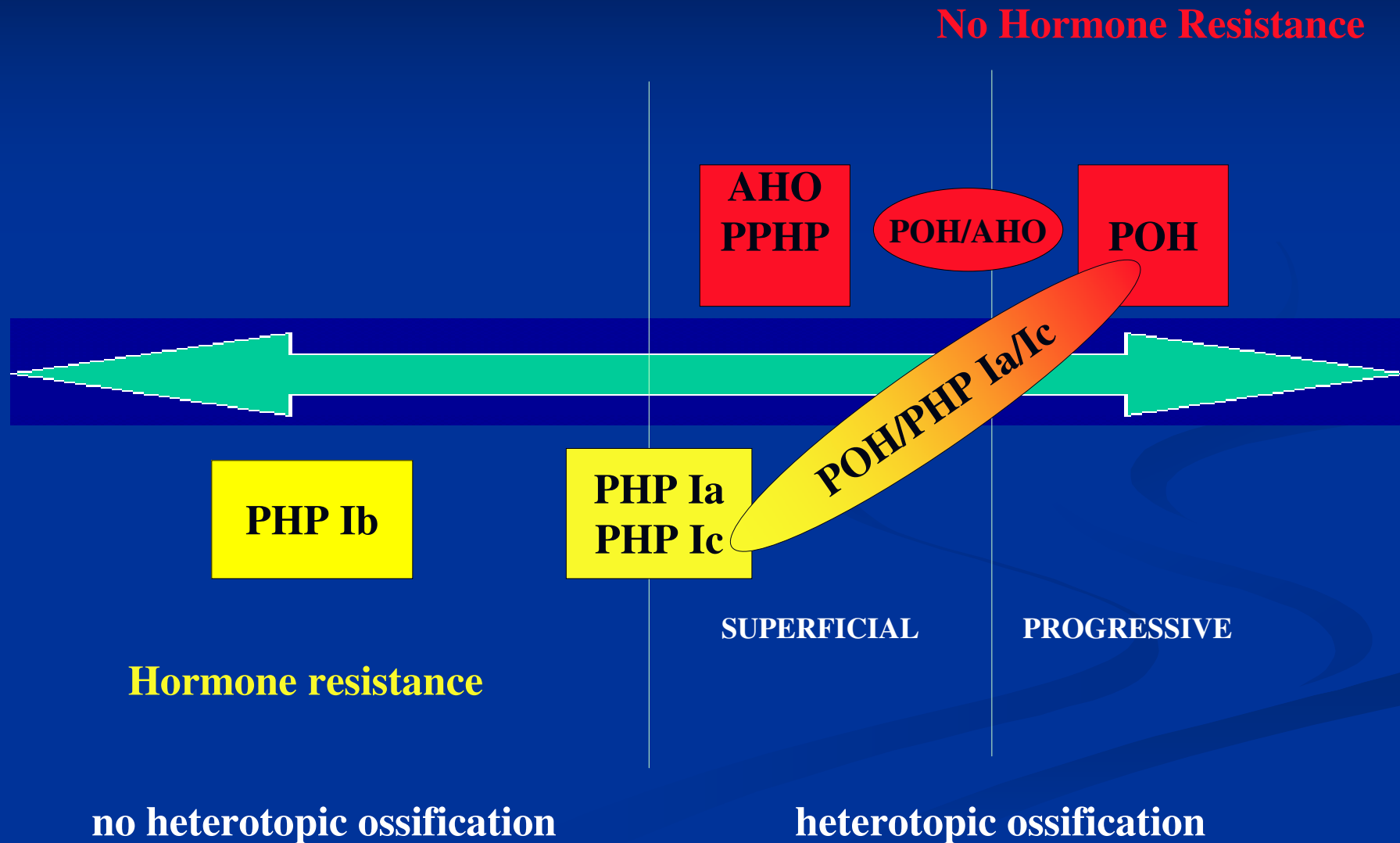
PATERNAL
INHERITANCE

Distribution of *GNAS* mutations in conditions with progressive heterotopic ossification



Adegbite NS, Xu M, Kaplan FS et al. Am J Med Genet Part A 2008;146A:1788-1796

Phenotypic spectrum of *GNAS* loss of function mutations



Thank you for your
attention

