

# Fibrodysplasia Ossificans Progressiva

Clinical aspects and genotype phenotype correlation

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# Fibrodysplasia ossificans progressiva (FOP)

- Congenital malformations of the great toes >95%
- Congenital malformations of the thumbs 50%
- Progressive heterotopic ossifications 100%



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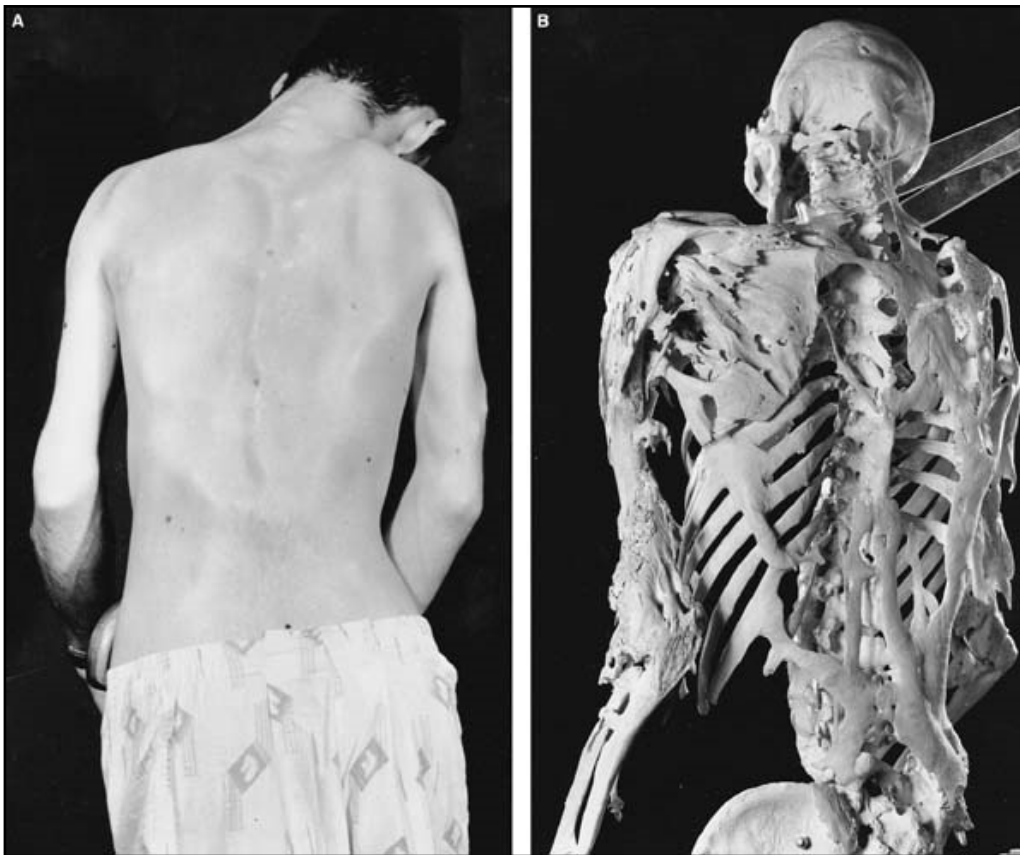
- Progressive immobility 100%
  - Thorax insufficiency syndrome >95%
  - Conductive hearing loss, teeth anomalies
  - Normal intelligence
- 
- Frequency 1 / 2 000 000
  - no effective treatment

# History of FOP

- first description by Guy Patin 1692
- John Freke 1740:  
*„...a boy of a healthy look and 14 years of age... to be cured of many large swellings, arising from every rib of his body and joining together in all parts of his back, as the ramifications of coral do...”*
- Helferich 1879:  
brachydactyly of the great toe in FOP patients

# History of FOP

- Harry Raymond Eastlack, Jr. (1933-1973)



*As a result of the bridges of bone, Harry Eastlack's skeleton is almost completely fused into one piece.*

[www.ifopa.org](http://www.ifopa.org)





## 2006 - Nature Genetics:

A recurrent mutation in the BMP type I receptor ACVR1 causes inherited and sporadic fibrodysplasia ossificans progressiva

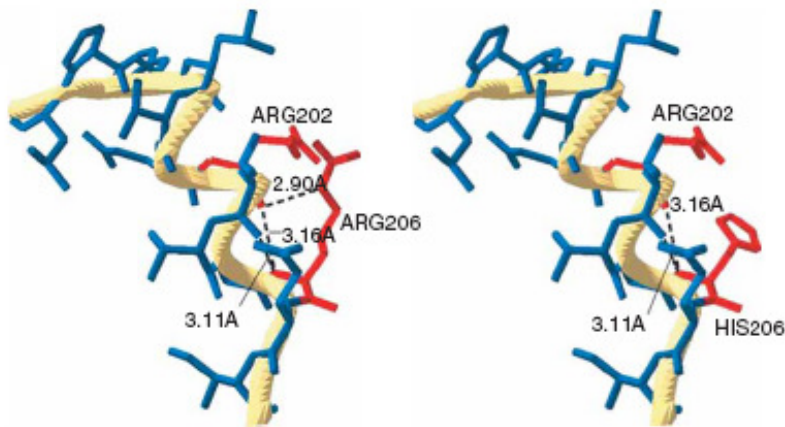
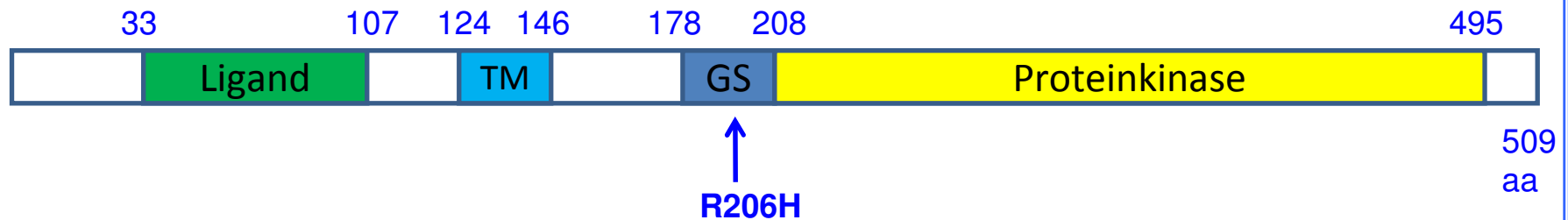
Eileen M Shore<sup>1-3</sup>, Meiqi Xu<sup>1,2</sup>, George J Feldman<sup>1,2</sup>, David A Fenstermacher<sup>4-6</sup>, Tae-Joon Cho<sup>7</sup>, In Ho Choi<sup>7</sup>, J Michael Connor<sup>8</sup>, Patricia Delai<sup>9</sup>, David L Glaser<sup>1,2</sup>, Martine LeMerrer<sup>10</sup>, Rolf Morhart<sup>11</sup>, John G Rogers<sup>12</sup>, Roger Smith<sup>13</sup>, James T Triffitt<sup>14</sup>, J Andoni Urtizberea<sup>15</sup>, Michael Zasloff<sup>1,2,16,17</sup>, Matthew A Brown<sup>14,18</sup> & Frederick S Kaplan<sup>1,2,19</sup>

c.617G→A; p.R206H



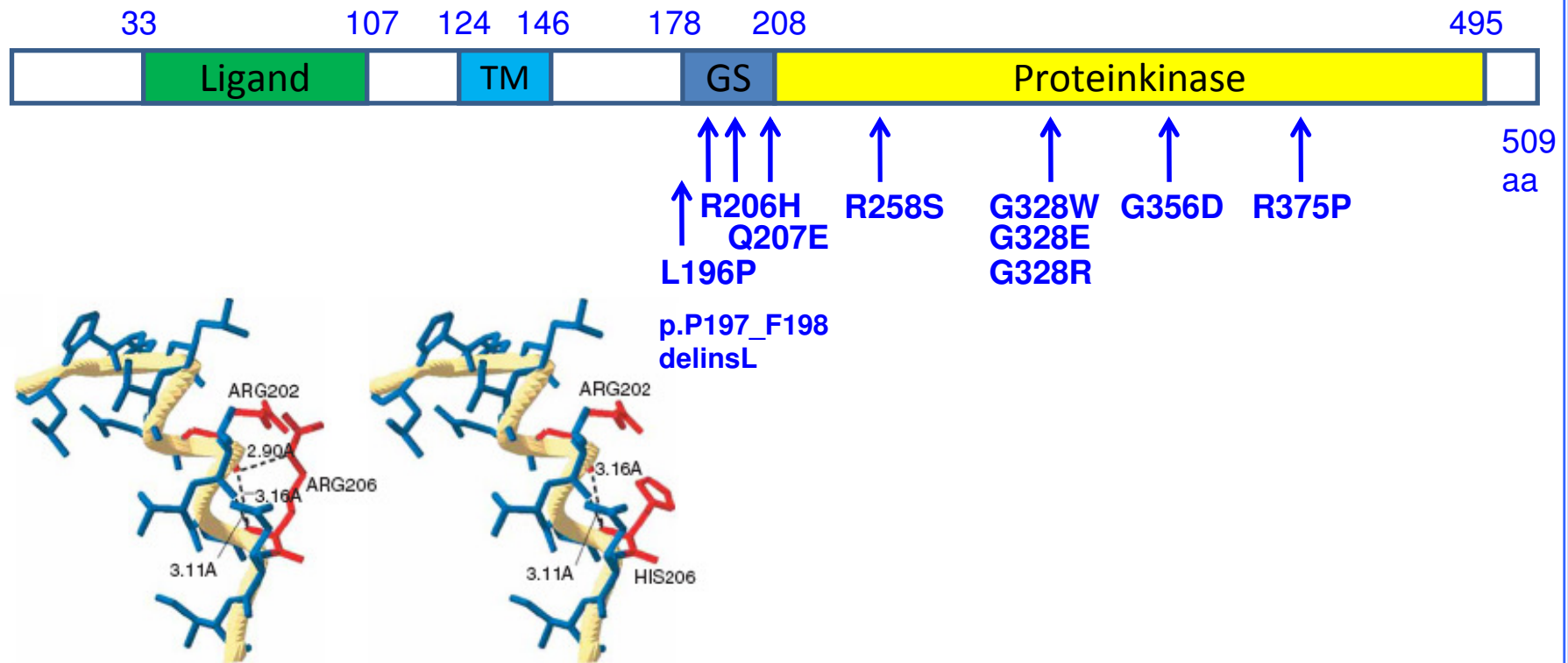
# ACVR1

- Activin A receptor type 1,  
BMP (bone morphogenetic protein) 1 receptor

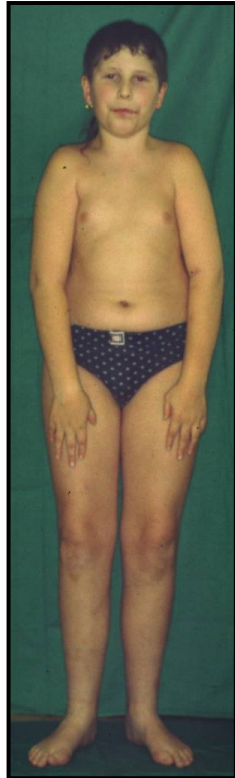


# ACVR1

- Activin A receptor type 1,  
BMP (bone morphogenetic protein) 1 receptor



## *R206H mutation (29 patients)*



- Onset in early infancy (1-13 LJ)
- Ossifications begin in the regions back, neck and shoulders
- Diagnosis often after 2-3 years after ossification onset



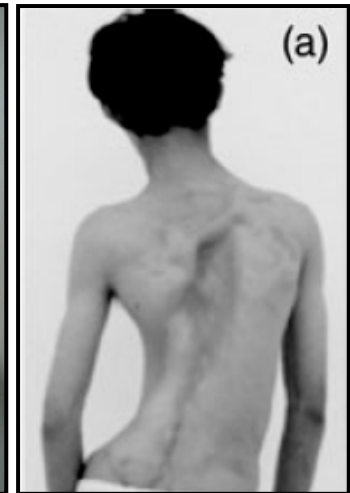
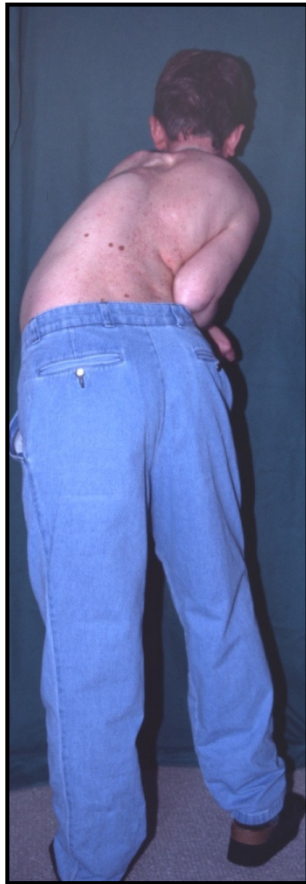
## *R206H mutation (29 patients)*



- Ossifications in typical anatomical pattern
- Scoliosis
- Thorax insufficiency



## *R206H mutation (29 patients)*



- Restriction of the temporomandibular joint
- Kachexia
- Thorax insufficiency

## *R206H mutation (29 patients)*



Craniofacial aspect:

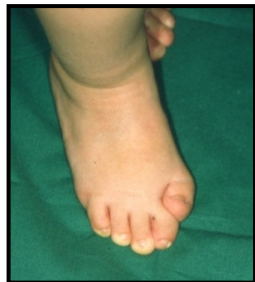
- Sparse hair
  - Thin skin
  - Missing eyebrows
- sopracciglio
- Teeth abnormalities

# *R206H mutation (29 patients)*

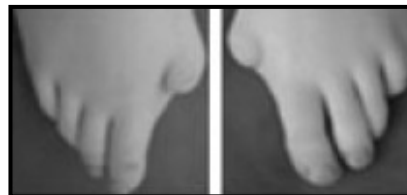
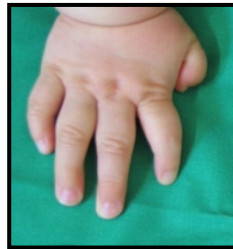
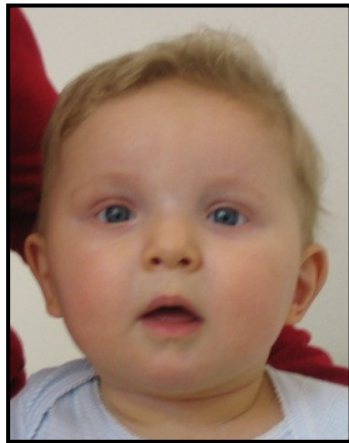


Limbs:

- Hypoplasia of the great toes
- Valgus deformity
- Thumb hypoplasia



# *G356D mutation (4 patients)*



- Aplasia of the great toes
- Ossifications at age 10-15 y
- Immobility at age 36 y
- Alopecia (1)
- Hearing loss (1)
- Hypospadias (1)
- Primary amenorrhoea (1)

*Kaplan et al. 2009*

*Furuya et al. 2008*



# *G328W mutation (2 patients)*

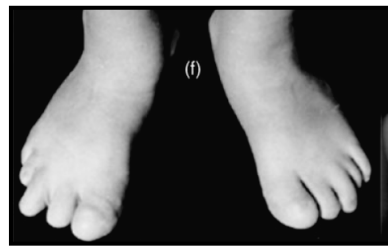
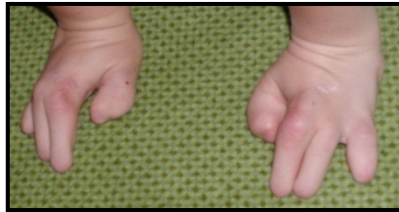


- Aplasia of the great toes
- Slow hair growth, sparse eyebrows
- Ossification onset 2 & 8 y
- Learning difficulties

*Kaplan et al. 2009*

*Connor and Evans 1982*

# *G328E mutation (3 patients)*

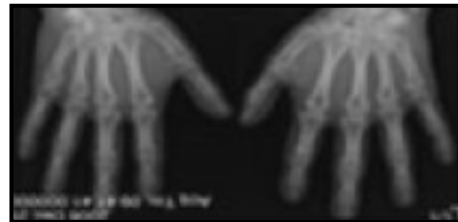
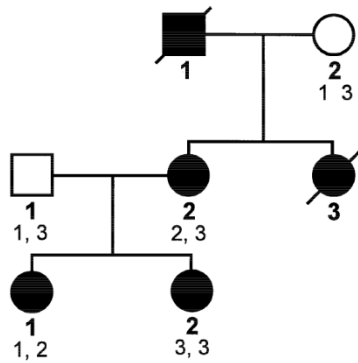


- Complex malformations of the limbs
- Ossification onset 0-1 y
- Slow hair growth, sparse hair and eyebrows, oligodontia
- Learning difficulties
- Primary amenorrhoea, gonadal aplasia (1)

*Kaplan et al. 2009*

*Carvalho et al. 2009*

# *G328R mutation (5 patients)*



- No or very mild hypoplasia of the great toes
- Ossifications after trauma at ages 13, 21, 22, 26 y
- mild course of disease
- CCM (1)
- cerebellar hypoplasia (1)

*Kaplan et al. 2009*

*Virdi et al. 1999*

## *L196P mutation (1 patient)*

Gregson et al. 2010:

- Late onset of ossifications
- Very mild course
- No abnormalities of the great toes

## *p.P197\_F198delinsL mutation (1 patient)*

Kaplan et al. 2009:

- Painful flexure contracture of the hip with ossification at age 11 y
- Ankylosis of all major joints
- No abnormalities of the great toes

## *R258S mutation (3 patients)*

Borcciadi et al. 2009, Ratbi et al. 2010

- Swellings at age 4-8 y
- Ossifications at age 18 y
- No or very mild hypoplasia of the great toes

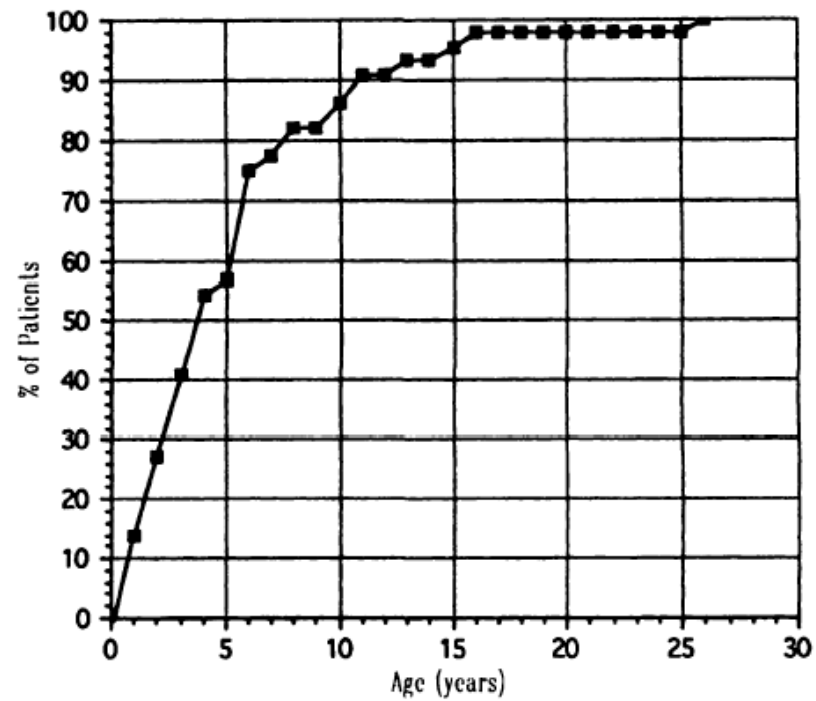
## *R375P mutation (1 patient)*

Kaplan et al. 2009:

- Swellings at age 14 y
- Limited mobility at age 40 y
- No abnormalities of the great toes

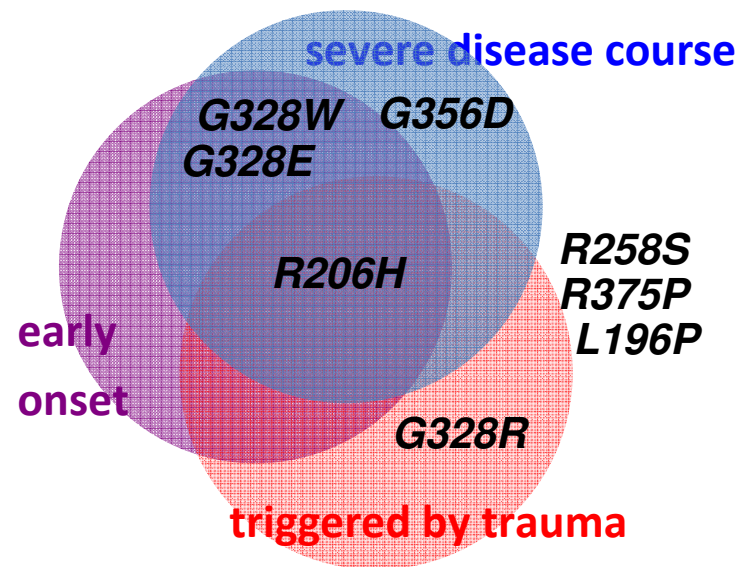
# Summary

## Ossifications



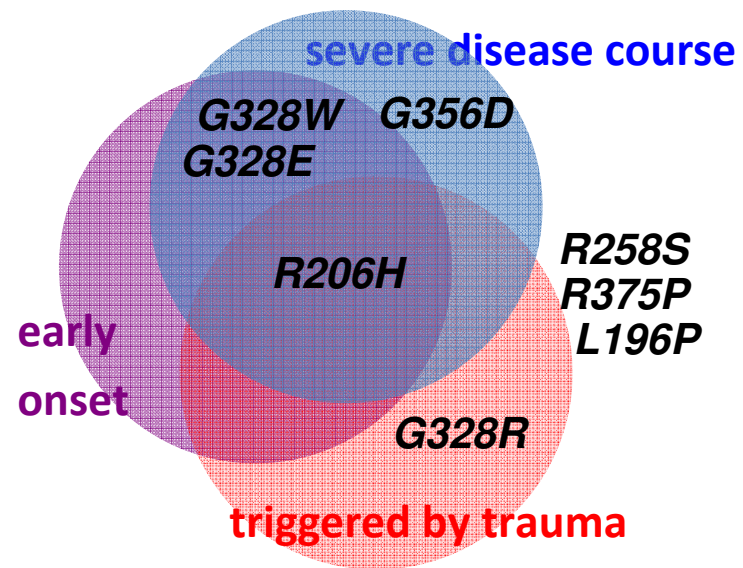
# Summary

## Ossifications

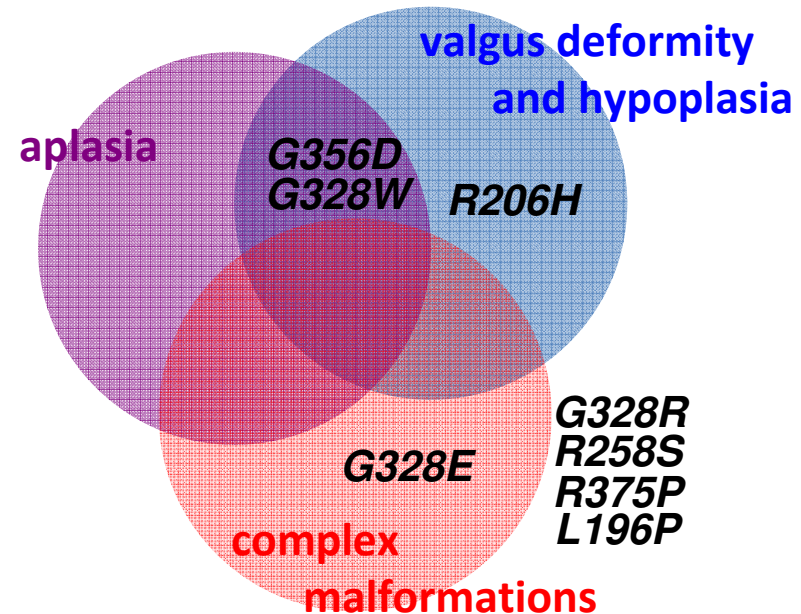


# Summary

## Ossifications



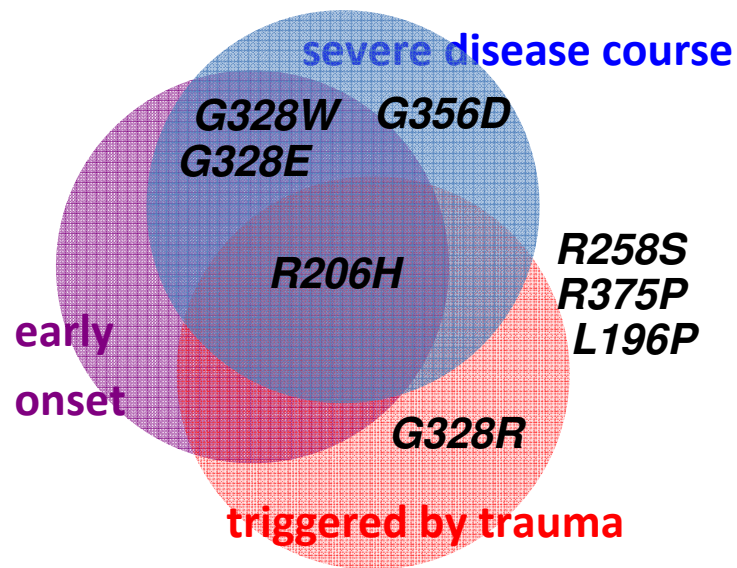
## Maformations of the great toes



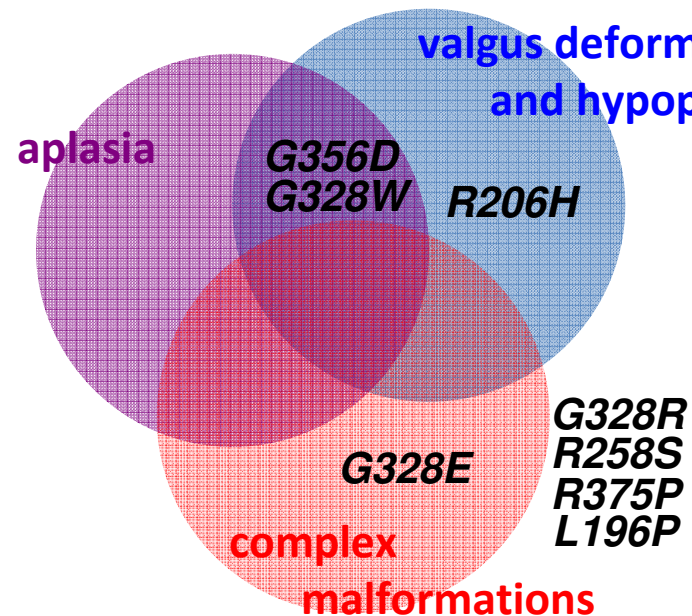


# Summary

## Ossifications



## Maformations of the great toes



Ectodermal aspects: R206H, G328E, G328W, G356D(?)

Learning difficulties: G328E, G328W

Amenorrhoea: G328E, G356D

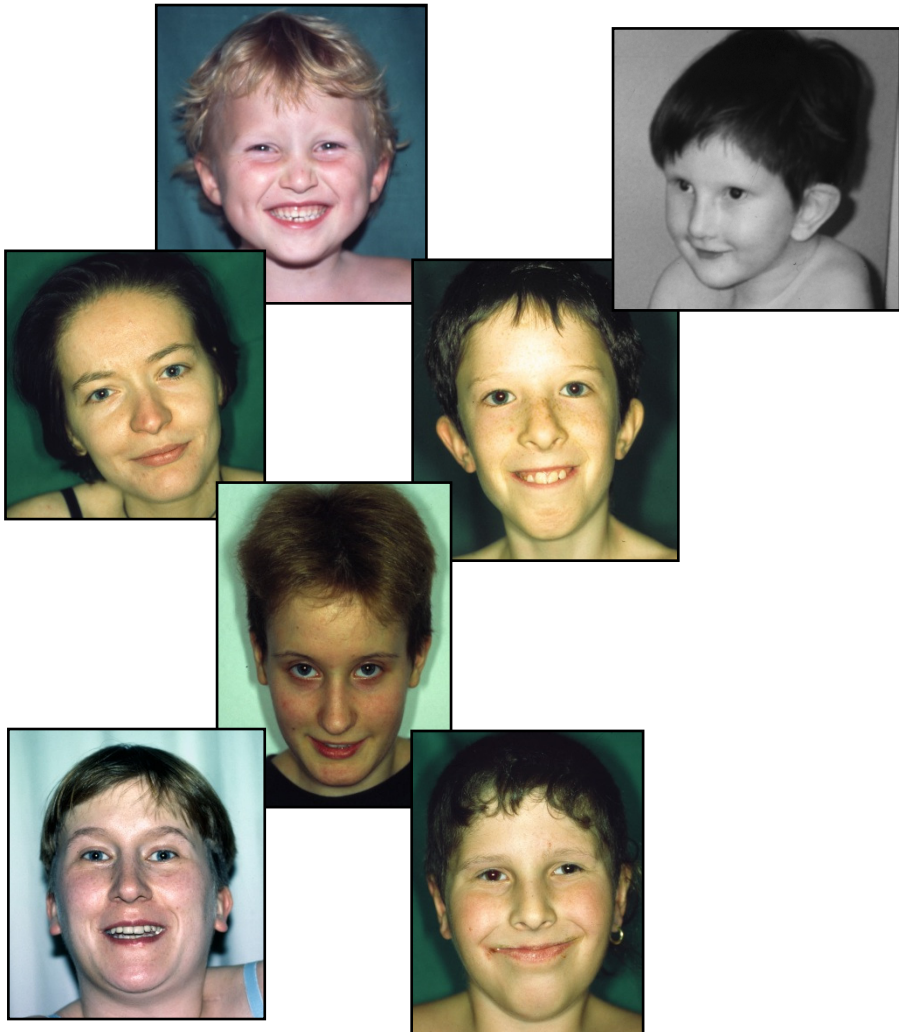


# Thank you!



- **Gabriele Gillessen-Kaesbach**  
Institut für Humangenetik, Universität zu Lübeck
- **Christian Grünberg**  
Klinik für Orthopädie und Unfallchirurgie, Allg. Krankenhaus Hagen
- **Stefan Mundlos**  
Institut für Medizinische Genetik, Charité Berlin

# Everyday life and medical care





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