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Classic Ehlers-Danlos syndrome: clinical and molecular characterisation of 37 patients

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Ehlers-Danlos syndrome classic type (cEDS), is a rare autosomal dominant connective tissue disorder characterised by skin hyperextensibility, abnormal wound healing/athrophic scars and joint hypermobility. The prevalence is 1/20.000. In 50% of patients a mutation in genes encoding type V collagen (COLLV), i.e., COL5A1 (46%) and COL5A2 (4%) was reported.

We characterised 37 patients from 27 families: 14 males and 23 females, 13 in the paediatric age and 24 in adulthood, 6 with positive family history. All fulfilled the 4 major diagnostic criteria for the disorder: smooth and hyperextensible skin, atrophic scars, generalised tissue fragility and joint hypermobility except for 2 women without atrophic scars and 1 woman not fulfilling the joint hypermobility criteria. Two patients with the most severe phenotype also showed chronic peri-arthritis, recurrent enthesopathies, tenosynovitis, asymmetric legs, deep venous thrombosis, rectal and urethral prolapses, hematomas and spontaneous rupture of muscles, and chronic pain syndrome. Wide inter- and intrafamilial phenotypic heterogeneity was observed.

In 24/27 probands COL5A1 or COL5A2 mutations were disclosed by direct gDNA sequencing; 20 were novel COL5A1 mutations (2 recurrent): 6 nonsense, 7 del/ins and 3 splice, all leading to NMD and to COLLV haplo-insufficiency, and 4 missense affecting the structural integrity of COLLV. Two novel COL5A2 splice mutations, leading to in-frame exon skipping, were disclosed in patients with the most severe phenotype. These findings underline the allelic and genetic heterogeneity of cEDS and show that in this patients' series COL5A1/COL5A2 genes are responsible for a larger number of cases (89%) than reported in the literature.