## CHROMOSOMAL NUMERICAL ABERRATIONS

INSTITUTE OF BIOLOGY AND MEDICAL GENETICS OF THE 1<sup>ST</sup> FACULTY OF MEDICINE

#### CHROMOSOMAL ABERRATIONS

ANEUPLOIDY

MONOSOMY TRISOMY

► NUMERICAL

POLYPLOIDY

\_TRIPLOIDY \TETRAPLOIDY

- > STRUCTURAL
  - · MOSAICISM
  - · CHIMERISM

> WIXOPLOIDY

#### LIST OF BASIC SYNDROMES

NUMERIC ANOMALIES
OF AUTOSOMES:

DOWN SYNDROME 47,XX/Y,+21

PATAU SYNDROME 47,XX/Y,+13

EDWARDS SYNDROME

47,XX/Y,+18

NUMERIC ANOMALIES OF SEX CHROMOSOMES: TURNER SYNDROME 45,X KLINEFELTER SYNDROME 47,XXY XYY SYNDROME (SUPERMALE) 47,XYY

(SUPERFEMALE) 47,XXX

XXX SYNDROME

#### DOWN SYNDROME

1: 500 - 300





- hypotonia in newborns
- upslanting palpebral fissures
- neck webbing
- · dysplasia of ears
- · flat occiput
- · single palmar crease
- epicantic folds (inner canthus)
- congenital heart defects, defects of other organs







**NORMAL** 

#### DOWN SYNDROME





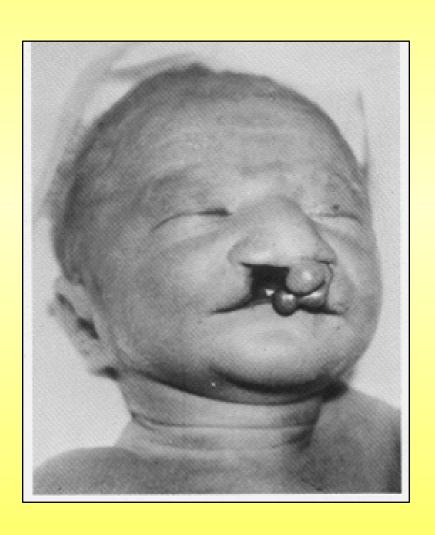




- · mental retardation
- · macroglossia
- · male hypogenitalism
- · denture defects
- short, broad hands, brachydactyly
- immune system defects
- higher risk of tumour diseases (leukemia)

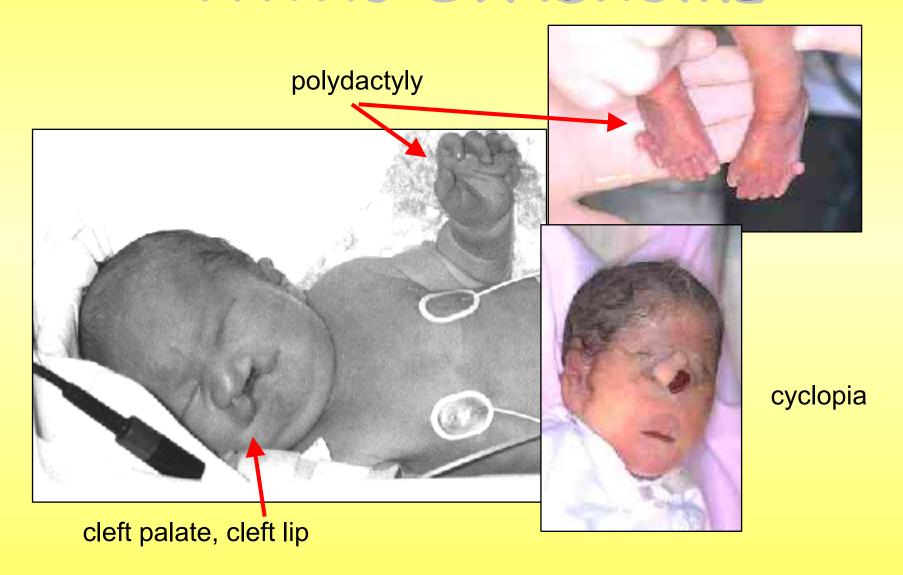
#### PATAU SYNDROME

1: 15 000 - 20 000



- severe developmental retardation
- congenital heart defects
- · microcephaly
- malformed, low-set ears
- · microphtalmia
- polydactyly
- · kidney anomalies
- · cleft palate, cleft lip

### PATAU SYNDROME



#### EDWARDS SYNDROME

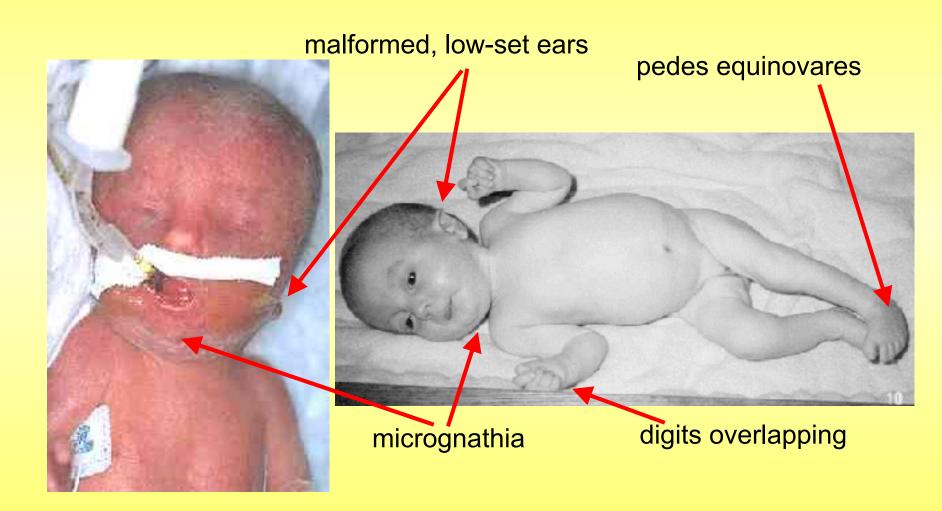
1:5000 - 10000





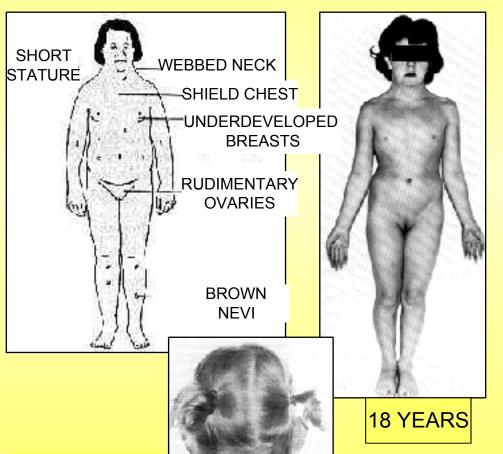
- severe developmental retardation
- · heart defects
- · malformed, low-set ears
- · hypoplastic nails
- digits overlapping
- · micrognathia
- · prominent occiput
- pedes equinovares (clubfoot)
- · microcephaly

#### EDWARDS SYNDROME



#### TURNER SYNDROME

1:2000 - 2500



- short stature hormonal therapy
- gonadal dysgenesis, primary amenorrhoea
- · average intelligence
- short webbed neck (pterygium colli)
- · low posterior hairline
- broad/shield chest
- palms and feet edema (newborns)

PTERYGIUM COLLI

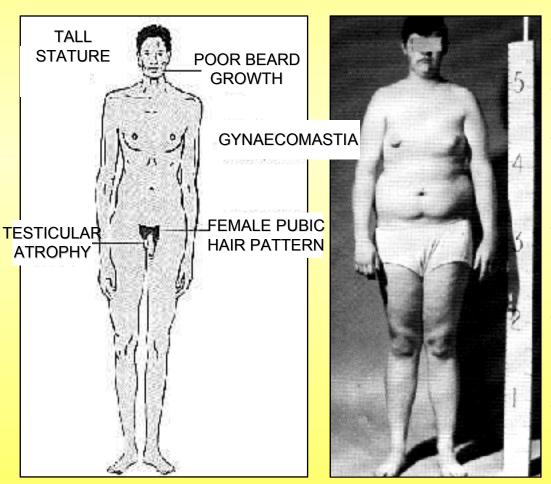
#### TURNER SYNDROME



HYGROMA COLLI CYSTICUM
- ABORTED FETUS

#### KLINEFELTER SYNDROME

1:500 - 1 000



- · tall stature
- average intelligence
- male psychosexual orientation
- hypoplastic testes, cryptorchism
- sterility azoospermia
- · gynaecomastia

#### XXX SYNDROME (SUPERFEMALE)

- 1: 1000, no specific phenotype
- average intelligence
- · normal sexual development
- decreased fertility (spontaneous abortions), without risk of chromosomal aberrations in offspring
- no increased occurrence of congenital disorders over to population risk

#### XYY SYNDROME (SUPERMALE)

 "robust" growth (proportional), especially height

- · average intelligence
- · normal sexual development
- normal fertility, without risk of chromosomal aberrations in offspring
- controversy affected psychosocial development

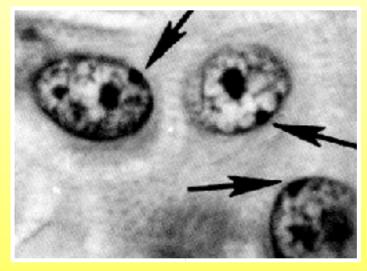
TWINS – TALLER 47,XYY

task 7, p. 81

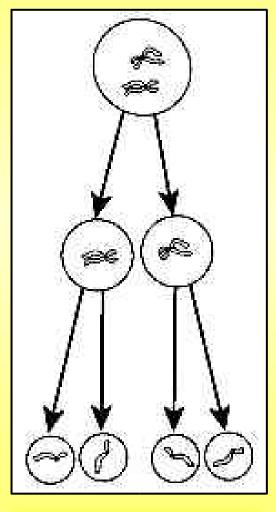
#### Enumerate the Barr bodies in:

a)	45,X	a)	O	
----	------	----	---	--

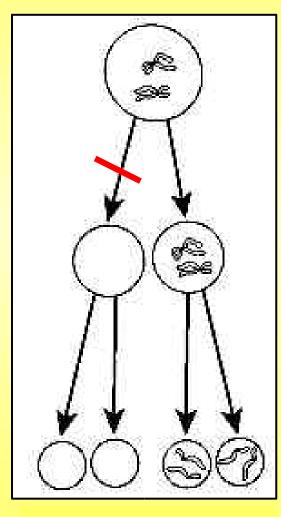




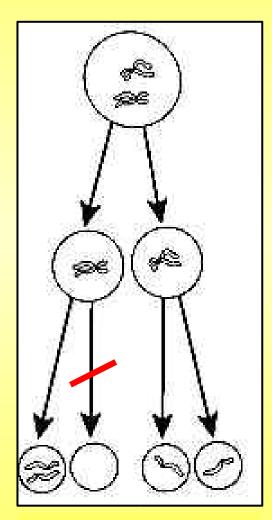
### NONDISJUNCTION



NORMAL

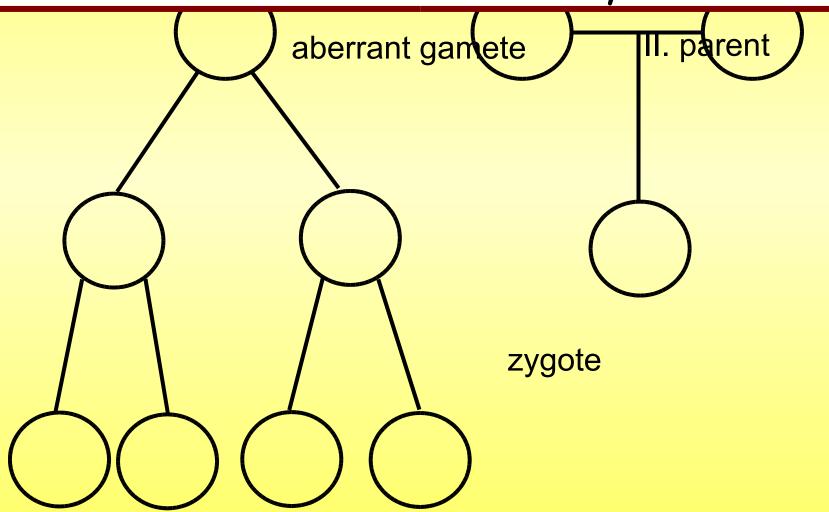


NONDIS. MI

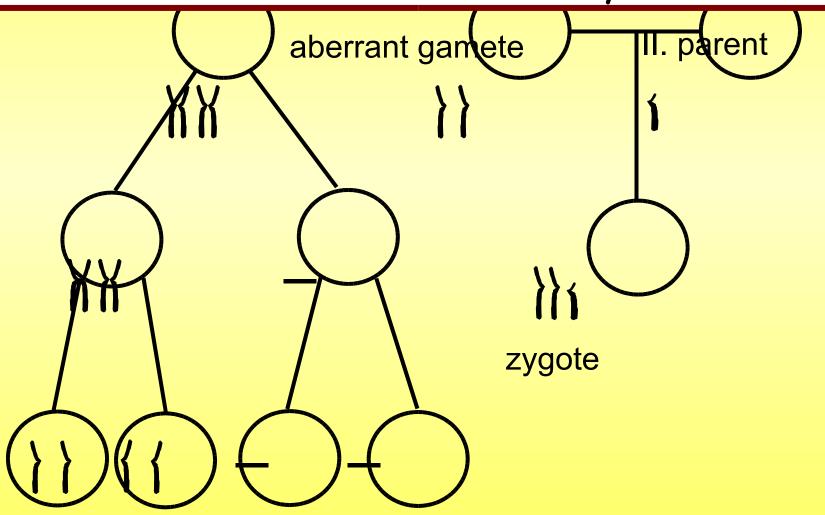


NONDIS. MII

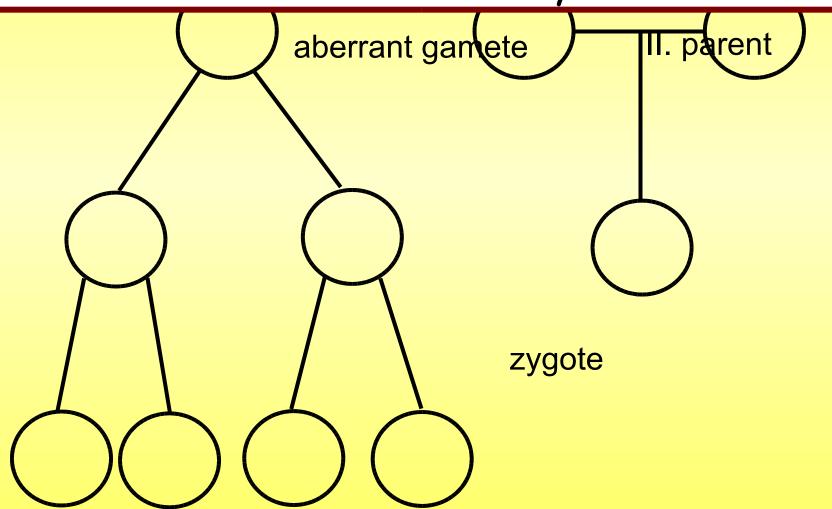
Fill in the scheme of the nondisjunction in meiosis I in mother leading to the birth of a child with Klinefelter syndrome



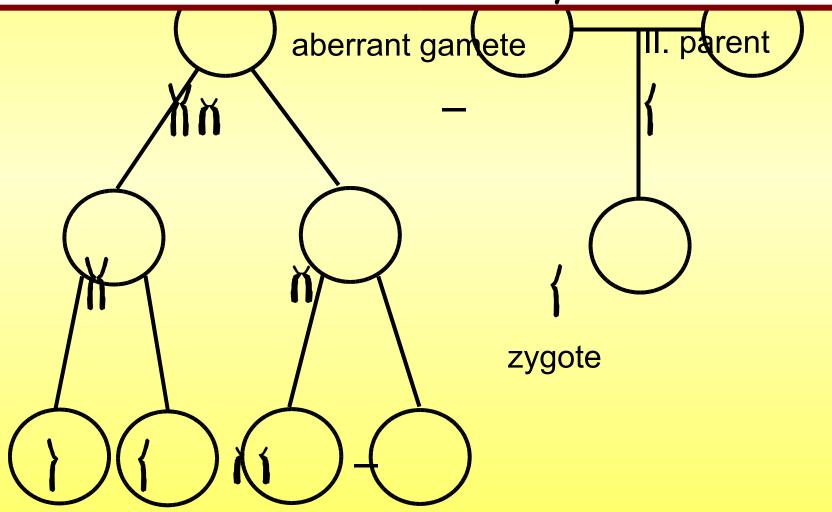
Fill in the scheme of the nondisjunction in meiosis I in mother leading to the birth of a child with Klinefelter syndrome



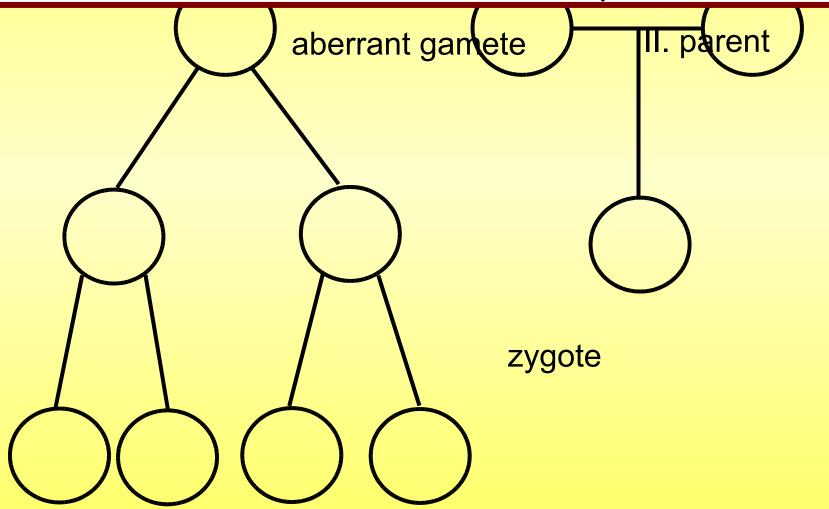
Fill in the scheme of the nondisjunction in meiosis II in father leading to the birth of a child with Turner syndrome



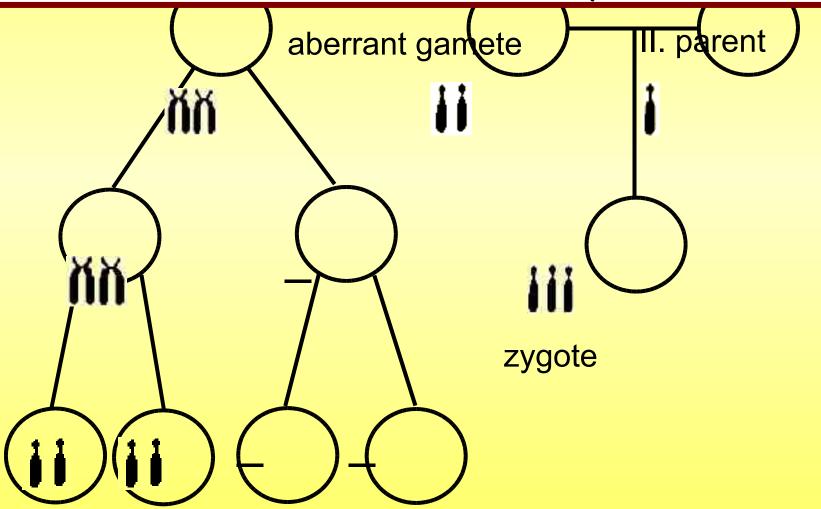
Fill in the scheme of the nondisjunction in meiosis II in father leading to the birth of a child with Turner syndrome



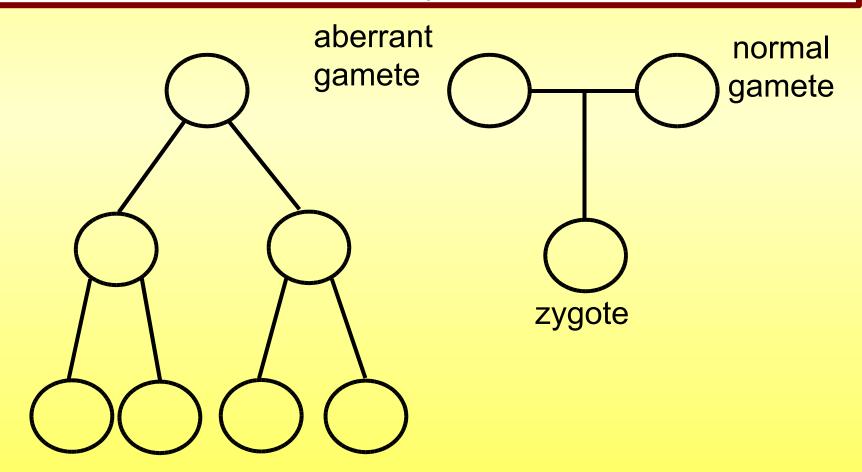
Fill in the scheme of the nondisjunction in meiosis I in one parent leading to the birth of a child with Down syndrome

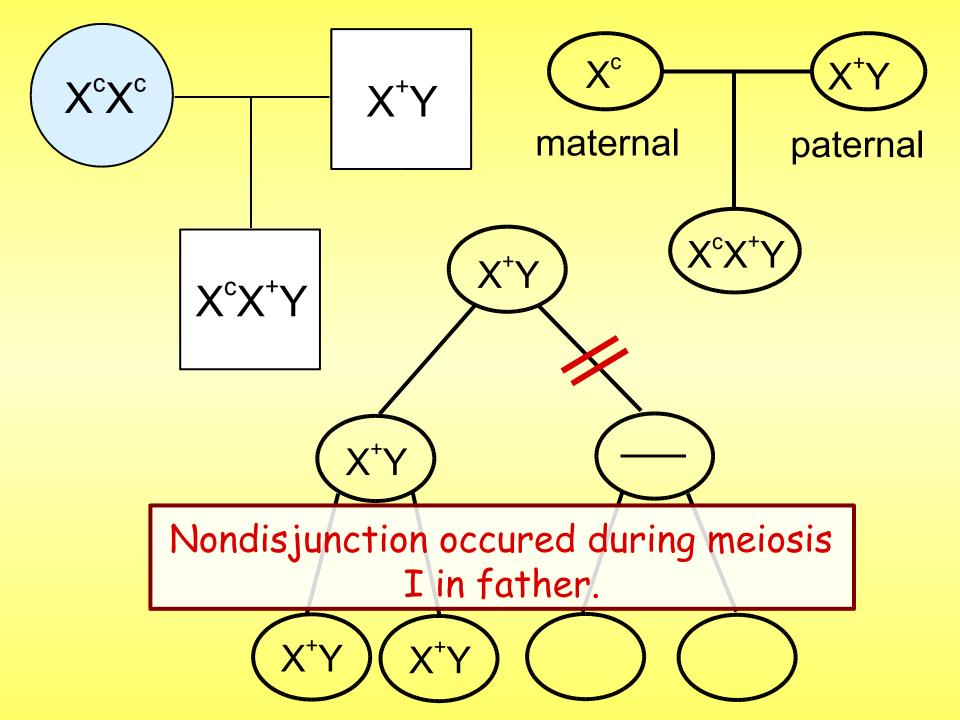


Fill in the scheme of the nondisjunction in meiosis I in one parent leading to the birth of a child with Down syndrome

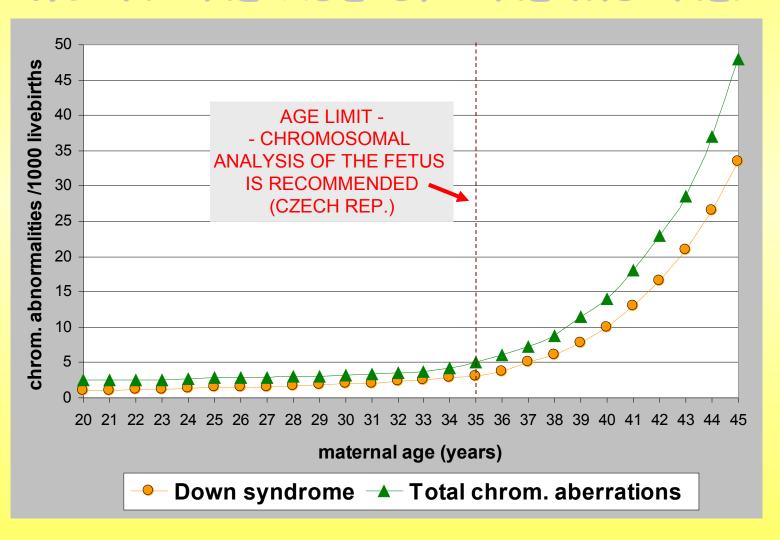


task 12, p.86: A colour-blind mother and father with normal colour vision have a son with normal vision whose karyotype is 47,XXY. Both parents have normal karyotype. In which parent and at which meiotic division did nondisjunction occur?





# INCREASING FREQUENCY OF THE CHROMOSOMAL ABERRATIONS WITH THE AGE OF THE MOTHER



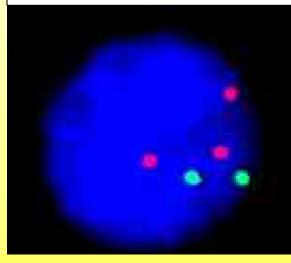
#### PRENATAL DIAGNOSTICS

CHORIONIC VILLI SAMPLE

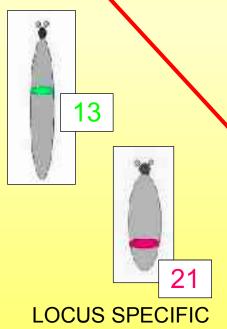
AMNIOCENTESIS (16.-18.w.)

CORDOCENTESIS

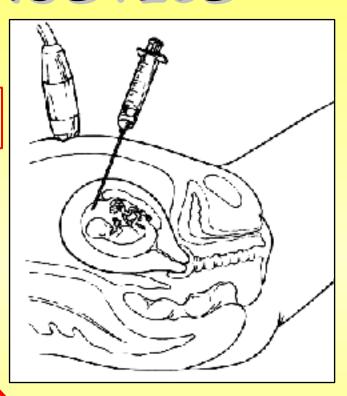
FISH (within 24 hours)



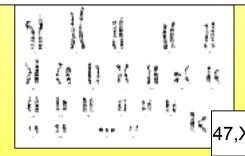
INTERPHASE NUCLEUS



**PROBES** 



KARYOTYPE (cca 14 days)



task 10, p.84 XX/XY 

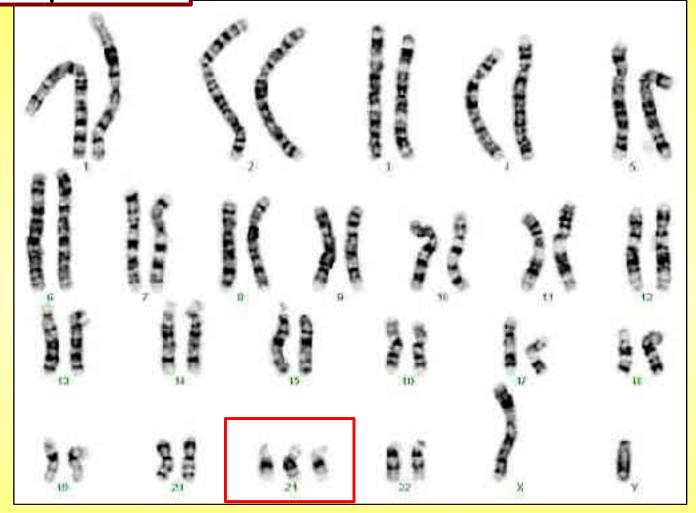
47,XXY

task 9, p. 82



45,X

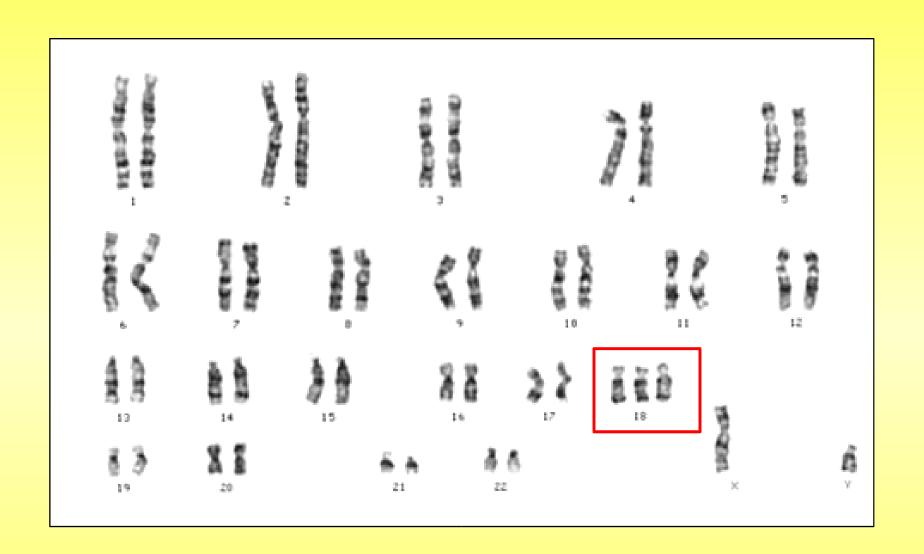
task 11, p. 86



47,XY,+21



47,XX,+13



47,XY,+18