

Letters to the Editor

Am. J. Hum. Genet. 62:000, 1998

A Kerato-Epithelin (β ig-h3) Mutation in Lattice Corneal Dystrophy Type IIIA

To the Editor:

The lattice corneal dystrophies (LCDs) are a class of inherited stromal amyloidoses characterized by pathognomonic, branching “pipestem” lattice figures in the cornea (Klintworth 1967). Four different LCD subtypes have been described. Type I (MIM 122200), the autosomal dominant form not associated with systemic amyloidosis (Gorevic et al. 1984), has its onset early in childhood and possesses a delicate network of interdigitating filaments in the cornea (fig. 1A). Type II (MIM 105120), the Finnish type (Meretoja 1972), on the other hand, is a condition associated with systemic amyloidosis. LCD type III has a presumed recessive inheritance pattern, is characterized by thicker lattice lines, and is not associated with systemic amyloidosis (Hida et al. 1987). Type IIIA resembles type III clinically but differs in that type IIIA has an onset age of 70–90 years and an autosomal dominant inheritance pattern (Stock et al. 1991). To the best of our knowledge, only two families with LCDIII A have been reported (Stock et al. 1991), and, unlike LCD1, which along with three other 5q31-linked (Stone et al. 1994) autosomal dominant corneal dystrophies is the result of a mutation in the β ig-h3 gene (Munier et al. 1997), the molecular defect in LCDIII A has not been identified.

We encountered three Japanese families with LCDIII A, and, in a molecular analysis of nine affected patients from these families, we detected a novel missense mutation in the β ig-h3 gene. The same mutation was also detected in four additional sporadic LCDIII A patients from whom no family history was available. β ig-h3 encodes an extracellular adhesion protein inducible by transforming growth factor- β (TGF- β), first isolated by Skonier et al. (1992) and recently termed “kerato-epithelin” (Munier et al. 1997).

All affected individuals had late-developing thick,ropy lattice lines in the corneal stroma typical of LCDIII A (fig. 1B). In each family, the disease showed an autosomal dominant inheritance pattern (fig. 2). No

corresponding systemic abnormalities were seen in any of the patients. Histopathological examination (two cases) revealed characteristic accumulations of amyloid deposits in the stroma (fig. 1C, D). Furthermore, of 13 LCDIII A patients (9 members of three families and 4 sporadic cases), 8 had a history of recurrent corneal erosions like those described by Stock et al. (1991).

After obtaining informed consent, we analyzed genomic DNA isolated from leukocytes of the LCDIII A patients and their family members, using standard methods. The 13 exons of the β ig-h3 gene (Munier et al. 1997) were amplified using the PCR with oligonucleotide primers. The PCR products were then subjected to SSCP analysis (Orita et al. 1989). In LCDIII A patients, we identified an abnormal conformer of exon 11. Sequencing analysis demonstrated that one of the alleles of every patient had a C→A transition (CCA→ACA) at position 1501 (fig. 3) that caused a proline-to-threonine substitution (Pro501Thr). To specifically rule out mutations in codons 124 and 555, where mutations have been found in other corneal dystrophies including LCDI (Munier et al. 1997), we sequenced exons 4 and 12 of the β ig-h3 gene. No mutations were found, and codons 124 and 555 were intact.

The LCDIII A families were analyzed using a mutation-specific primer we synthesized that generates a *Dra*III site. Under standard PCR conditions (94°C for 5 min, followed by 30 cycles of 94°C for 30 s, 60°C for 30 s, and 72°C for 30 s, with a final extension step at 72°C for 10 min), the following forward and reverse PCR primers were used; BIGexon11F (Munier et al. 1997) (5'-CTC GTG GGA GTA TAA CCA GT-3') and BIG11RLCDIII (5'-GAC ATC CAT GAC AGT CCA CAT-3'). We observed the mutation-specific *Dra*III digestion pattern in all LCDIII A-affected individuals but not in unaffected family members (fig. 4), indicating that the missense change Pro501Thr perfectly cosegregated with the disease. In addition, this mutation was not found among 41 patients with granular corneal dystrophy type I (MIM 121900), Reis-Bücklers corneal dystrophy, or Avellino corneal dystrophy, nor was it found in 106 normal individuals (data not shown). On the basis of this evidence, we conclude that the Pro501Thr mutation is the cause of LCDIII A.

The β ig-h3 gene encodes an adhesion molecule char-

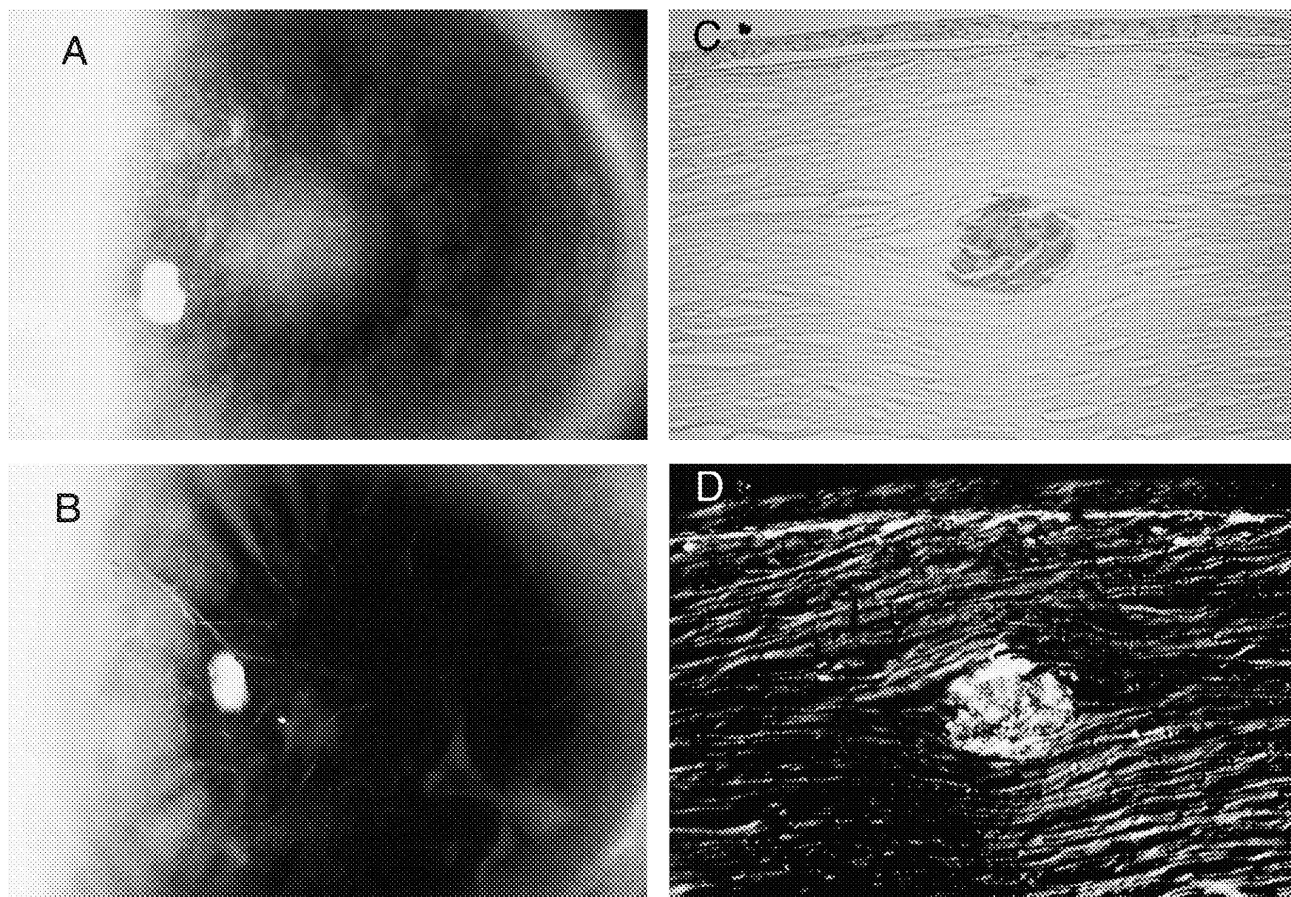


Figure 1 Clinical and histological appearance of LCD corneas. *A*, LCD type I, showing central opacities. Fine lattice lines are present in this patient, but they are difficult to reproduce photographically. In this case, we identified a heterozygous missense mutation, R124C, that was identical to that of a previous report (Munier et al. 1997) (original magnification $\times 5$). *B*, LCD type IIIA, showing thick, ropy branching lattice lines throughout the cornea on sclerotic scatter (patient A-3, in family A) (original magnification $\times 5$). *C* and *D*, Histology of the stroma from one of our four sporadic LCD type IIIA cases stained with Congo red (*D* is viewed under polarized light), showing an amyloid deposit (original magnification $\times 100$).

acterized by four internal homologous domains, which can be folded into a potential bivalent structure and may act as a bridge between cells expressing the appropriate ligand (Skonier et al. 1992, 1994). Pro501 is located in the third internal repeat and is conserved in humans, mice, chicks, and pigs. The mutation (Pro501Thr) we detected in LCDIII A changes a nonpolar residue to a polar residue. Although the mechanism by which the Pro501Thr mutation leads to LCDIII A is still unknown, proline is important in producing bends in a peptide chain. Therefore, it is possible that the tertiary structure of the mutant kerato-epithelin is deranged in LCDIII A, leading to the formation of amyloidogenic intermediates.

Munier et al. (1997) identified four missense mutations at codons 124 and 555 of the β ig-h3 gene, in four corneal dystrophies, and all four mutations occurred in a CpG dinucleotide of arginine codons. They postulated that the mutation R124 resulted in amyloidogenic in-

termediates. Our cases suggest that P501-mutated kerato-epithelin may also form amyloidogenic intermediates that precipitate in the cornea.

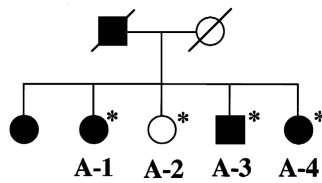
Acknowledgments

This work is supported partly by an unrestricted grant from the Ministry of Health and Welfare, Tokyo, Japan.

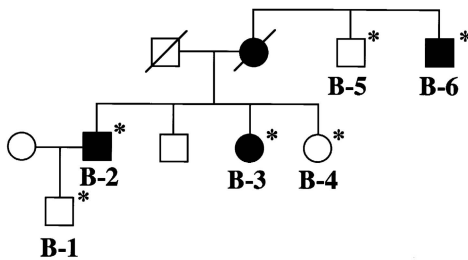
SHUJI YAMAMOTO,¹ MASAKI OKADA,¹
MOTOKAZU TSUJIKAWA,^{1,2} YOSHIKAZU SHIMOMURA,¹
KOHJI NISHIDA,³ YOSHITSUGU INOUE,¹
HITOSHI WATANABE,¹ NAOYUKI MAEDA,¹
HIROKI KURAHASHI,² SHIGERU KINOSHITA,³
YUSUKE NAKAMURA,² AND YASUO TANO,¹

Departments of ¹Ophthalmology and ²Clinical Genetics, Osaka University Medical School, Osaka; and ³Department of Ophthalmology, Kyoto Prefectural University of Medicine, Kyoto

Family A



Family B



Family C

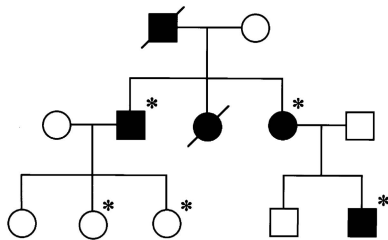


Figure 2 Pedigrees of families with LCD type IIIA. Asterisks (*) denote individuals whose leukocyte DNA was analyzed.

References

Gorevic PD, Rodrigues MM, Krachmer JH, Green C, Fujihara S, Glenner GG (1984) Lack of evidence for protein AA reactivity in amyloid deposits of lattice corneal dystrophy and amyloid corneal degeneration. *Am J Ophthalmol* 98: 216–224

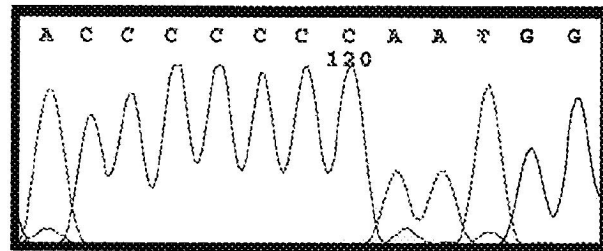
Hida T, Proia AD, Kigasawa K, Sanfilippo FP, Burchette JL, Akiya S, Klintworth GK (1987) Histopathologic and immunochemical features of lattice corneal dystrophy type III. *Am J Ophthalmol* 104:249–254

Klintworth GK (1967) Lattice corneal dystrophy: an inherited variety of amyloidosis restricted to the cornea. *Am J Pathol* 50:371–399

Meretoja J (1972) Comparative histopathological and clinical findings in eyes with lattice corneal dystrophy of two different types. *Ophthalmologica* 165:15–37

Munier FL, Korvatska E, Djemai A, Paslier DL, Zografos L,

a normal



b mutation P501T

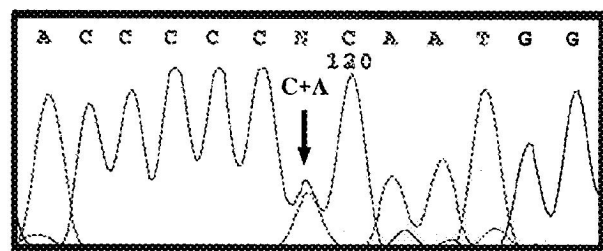


Figure 3 Direct sequencing of exon 11 of the β ig-h3 gene. *a*, Unaffected control. *b*, Patient B-2, the proband of family B (fig. 2). Sequencing of the normal and mutant alleles of the patient identified the C→A transition (CCA→ACA) at position 1501, resulting in a proline-to-threonine substitution (Pro501Thr) in the protein. Other affected members had the same mutation. The nucleotide N indicates the presence of both C and A.

Pescia G, Schorderet DF (1997) Kerato-epithelin mutations in four 5q31-linked corneal dystrophies. *Nat Genet* 15: 247–251

Orita M, Iwahana H, Kanazawa H, Hayashi K, Sekiya T (1989) Detection of polymorphisms of human DNA by gel electrophoresis as single-strand conformation polymorphisms. *Proc Natl Acad Sci USA* 86:2766–2770

Skonier J, Bennett K, Rothwell V, Kosowski S, Plowman G, Wallace P, Edelhoff S, et al (1994) β ig-h3: a transforming growth factor responsive gene encoding a secreted protein that inhibits cell attachment in vitro and suppresses the growth of CHO cells in nude mice. *DNA Cell Biol* 13: 571–584

Skonier J, Neubauer M, Madisen L, Bennett K, Plowman GD, Purchio AF (1992) cDNA cloning and sequence analysis of β ig-h3, a novel gene induced in a human adenocarcinoma cell line after treatment with transforming growth factor- β . *DNA Cell Biol* 11:511–522

Stock EL, Feder RS, O’Grady RB, Sugar J, Roth SI (1991) Lattice corneal dystrophy type IIIA. *Arch Ophthalmol* 109: 354–358

Stone EM, Mathers WD, Rosenwasser GOD, Holland EJ, Folberg R, Krachmer JH, Nichols BE, et al (1994) Three au-

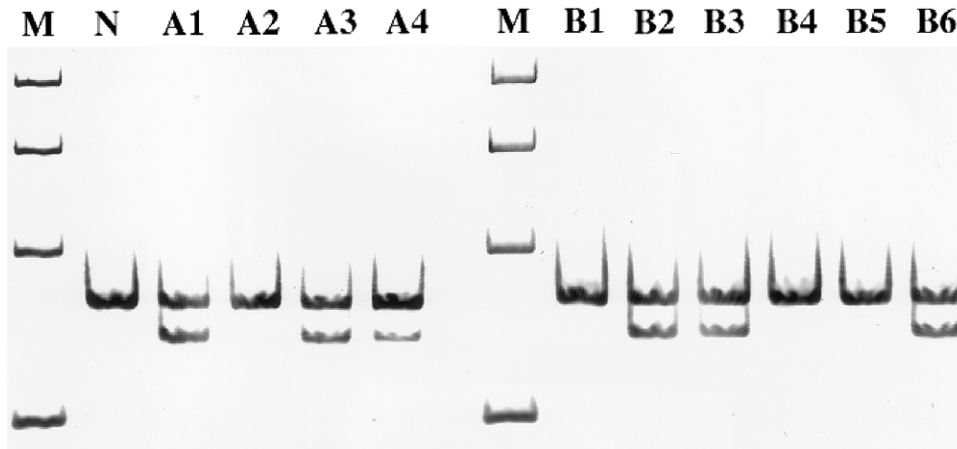


Figure 4 Cosegregation study by restriction-digestion analysis of exon 11. N = normal individual, for control; M = 100-bp ladder marker. The upper band (165 bp) represents the wild type, and the lower digested band (146 bp) represents the mutation Pro501Thr. All affected patients carry the mutation-specific lower band.

tosomal dominant corneal dystrophies map to chromosome
5q. Nat Genet 6:47-51

Address for correspondence and reprints: Dr. Shuji Yamamoto, Department
of Ophthalmology, Osaka University Medical School, 2-2 Yamada-oka, Suite
565, Osaka, Japan. E-mail: yamamoto@ophthal.med.osaka-u.ac.jp

© 1998 by The American Society of Human Genetics. All rights reserved.
0002-9297/98/6203-0030\$02.00