



Cockayne Syndrome (CS)

Contact details:

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Sample Required:

Adult: 5mls blood in EDTA Paediatric: at least 1ml EDTA (preferably >2ml)

Samples should be accompanied by a FULLY completed request form (available as download at www.nbt.nhs.uk/genetics or from the laboratory).

Please include details of test, family history, address and POSTCODE, NHS number, referring clinician and unit/hospital.

Consent and DNA Storage:

All genetic testing requires consent. It is the responsibility of the referring clinician to ensure that appropriate consent has been obtained.

DNA is stored from **all** patients unless consent for this is specifically denied.

Stored samples may be used for quality assurance purposes and may be used anonymously for the development of new tests for the disorder in question.

Clinical Background and Genetics

Cockayne Syndrome (CS) is an autosomal recessive neurodegenerative disorder characterised by progressive growth failure, microcephaly, mental retardation, retinal degeneration, sensorineural deafness, and photosensitivity. CS has a variable rate of progression. The spectrum of CS phenotypes can be divided into three general clinical presentations:

Cockayne Syndrome type I: "Classic" CS (early-onset) in which the major features of the disease become apparent by one or two years of age. This is the most common type.

Cockayne Syndrome type II: A more severe and less common form of the disorder with abnormalities recognised at birth or in the early neonatal period.

Cockayne Syndrome type III: Milder/later-onset forms that are still poorly defined.

Cockayne Syndrome has been associated with mutations in two genes; *ERCC6* (also known as *CSB*) and *ERCC8* (also known as *CSA* or *CKN1*).

Service offered

- Full gene screening of ERCC6 by direct sequence analysis, this
 includes all 21 exons (includes non-coding exon 1) and extends to the
 upstream putative branch site and downstream splice sites. 75% of
 mutations of CS mutations are identified in ERCC6.
- Full gene screening of ERCC8 by direct sequence analysis (for patients negative after ERCC6 analysis), this includes the coding exons (1-12) and extends to the upstream putative branch site and downstream splice sites. 25% of mutations of CS mutations are identified in ERCC8.
- Familial tests for known mutations.
- The ERCC6 and ERCC8 genes are also included in a 62 gene panel for chromosome breakage syndromes. This panel also includes the genes ERCC1, ERCC2 and ERCC5 which have been implicated with disorders phenotypically similar to Cockayne Syndrome. Please contact the laboratory for further information on this service.

Quality

 This is a UKGTN approved service. BGL participates in the EMQN scheme for DNA sequencing.

Referrals

• Referrals are accepted nationally from clinical Geneticists only. Please contact the laboratory for up to date prices.

Target reporting Time

Diagnostic screen of each gene 56 days
Gene panel testing 112 days
Known Mutation 14 days
Screening for 2 known mutations 14 days
Prenatal/urgent 3 days

References

Laugel, V., et al. (2010) Mutation update for the CSB/ERCC6 and CSA/ERCC8 genes involved in Cockayne syndrome. Hum Mut. 31(2): 113-126.

