Genetic and functional studies reveal a novel noncoding variant in GALT associated with a false positive newborn screening result for galactosemia.

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Highlights

- We conducted follow-up studies of an infant with a positive NBS for galactosemia.
- We identified a novel non-coding variant of GALT in the child and both parents.
- We demonstrated that this variant does not reduce GALT mRNA levels in the child.
We demonstrated that galactose metabolism in the child remains apparently normal.

Our results illustrate the complexities of diagnosis of galactosemia.

Abstract

Background

Classic galactosemia (CG) is a potentially lethal genetic disorder that results from profound loss of galactose-1-phosphate uridylyltransferase (GALT). CG is detected by newborn screening (NBS) in many countries; however, conclusive diagnosis can be complex due to broad and overlapping ranges of GALT activity. Molecular studies can also be complex due to allelic heterogeneity at the GALT locus.

Methods

We conducted both biochemical and molecular follow-up studies for an infant flagged by NBS for possible galactosemia. To clarify the diagnosis we also conducted biochemical and RNA studies of lymphoblasts prepared from the child and one parent.

Results

We identified a novel noncoding GALT variant, c.377+17C>T, that was homozygous in the child and heterozygous in both parents. The child and both parents also showed diminished GALT activity in red blood cells, and transformed lymphoblasts from the child and one parent further showed diminished GALT activity. However, qRT-PCR studies demonstrated apparently normal GALT mRNA levels in lymphoblasts, and Gal-1P values measured in the child following galactose exposure in infancy and at 1 year were normal.

Conclusions

These results highlight the existence of rare but apparently benign variants in GALT and underscore the need for functional studies to distinguish pathogenic from benign variants.
Abbreviations
CG, classic galactosemia; GALT, galactose 1-phosphate uridylyltransferase; NBS, newborn screening; qRT-PCR, quantitative reverse transcription polymerase chain reaction; Gal-1P, galactose-1-phosphate; GALE, UDP-galactose 4'-epimerase; GALK, galactokinase; EBV, Epstein Barr virus

Keywords
Galactosemia; Newborn screening; Non-coding variant; Functional studies; qRT-PCR

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