XLMR, NEXMIF-related: NEXMIF Gene Deletion/Duplication

Test Code: DKIA2  
Turnaround time: 2 weeks  
CPT Codes: 81228 x1

Condition Description

Intellectual disability (ID) is a nonprogressive cognitive impairment affecting 1-3% of the Western population. It is estimated that up to 50% of moderate-severe cases have genetic causes and approximately 10% are due to X-linked intellectual disability disorders (XLID). XLID can be syndromic or nonsyndromic and is observed in all ethnic groups. More than 100 XLID syndromes have been described in the literature to date. Fragile X is the most common XLID syndrome (~1 in 4000 males) while others can be quite rare with only a few patients reported in the literature. Males can have moderate to severe intellectual disability depending on the syndrome, and carrier females can also be affected, but typically have milder clinical symptoms.

Cantagrel et al. describe a family with two affected males with severe intellectual disability. Both males (an uncle and a nephew) presented with neonatal hypotonia, severe developmental delays, progressive quadriparesia, gastroesophageal reflux, autism, stertotypical hand movements, and mildly dysmorphic features. One of the affected individuals had tonic-clonic seizures as well.

A pericentric inversion (inv(X)(p22;q13)) was identified in both males and their unaffected obligate carrier mothers. One of the genes disrupted by the inversion is the NEXMIF (previously known as KIAA2022) gene (Xq13.3) which is highly expressed in fetal brain and adult cerebral cortex. The NEXMIF transcript was no longer expressed in the affected males; however, it was indistinguishable from the wildtype in the cells from the carrier mothers.

References:
- OMIM #300524: NEXMIF gene

Genes

NEXMIF

Indications

This test is indicated for:
- Confirmation of a clinical diagnosis of NEXMIF-Related X-linked Mental Retardation in an individual in whom sequence analysis was negative.
- Carrier testing in adults with a family history of NEXMIF-Related X-linked Mental Retardation in an individual in whom sequence analysis was negative.

Methodology

DNA isolated from peripheral blood is hybridized to a CGH array to detect deletions and duplications. The targeted CGH array has overlapping probes which cover the entire genomic region.

Detection

Detection is limited to duplications and deletions. The CGH array will not detect point or intronic mutations. Results of molecular analysis must be interpreted in the context of the patient's clinical and/or biochemical phenotype.

Specimen Requirements

Submit only 1 of the following specimen types

**Type: Whole Blood (EDTA)**

**Specimen Requirements:**
- EDTA (Purple Top)
- Infants and Young Children (2 years of age to 10 years old): 3-5 ml
- Older Children & Adults: 5-10 ml
- Autopsy: 2-3 ml unclotted cord or cardiac blood

**Specimen Collection and Shipping:**
Ship sample at room temperature for receipt at EGL within 72 hours of collection. Do not freeze.

**Type: DNA, Isolated**

**Specimen Requirements:**
- Microtainer
- 3µg
- Isolation using the Perkin Elmer™Chemagen™ Chemagen™ Automated Extraction method or Qiagen™ Puregene kit for DNA extraction is recommended.

Disclaimer: This information is confidential and subject to change without notice. It may not be reproduced in whole or part unless authorized in writing by an authorized EGL representative.
Specimen Collection and Shipping:
Refrigerate until time of shipment in 100 ng/µL in TE buffer. Ship sample at room temperature with overnight delivery.

Special Instructions
Sequence analysis is required before deletion/duplication analysis by targeted CGH array. If sequencing is performed outside of EGL Genetics, please submit a copy of the sequencing report with the test requisition.

Related Tests

- Sequence analysis of the NEXMIF gene is available and is required before deletion/duplication analysis.
- Custom diagnostic mutation analysis (KM) is available to family members if mutations are identified by targeted mutation testing or sequencing analysis.
- Prenatal testing is available only for known familial mutations to individuals who are confirmed carriers of mutations. Please contact the laboratory genetic counselor to discuss appropriate testing prior to collecting a prenatal specimen.
- X-Linked Intellectual Disability panels are available for 30, 60, and 90+ genes.