Brief report

A case of the intrauterine fetal death (IUFD) in 27-weeks of gestation induced by the mutation of myocardial Na+ pump α subunit gene SCN5A

Nagaoka Central General Hospital, Department of pathology; Pathologist

Toshihiko Ikarashi

Backgroud: Concerning the intrauterine fetal death of unknown etiology, we discussed the cardiac sudden death by the genetic study.

Case report: The formalin-fixed placenta (FFPE) was examined by followings: (i) routine pathologic study, (ii) infection by PCR and immunostain, (iii) chromosomal pattern by fluorescence in situ hybridization (FISH), (iv) myocardial Na+ pump α subunit gene SCN5A mutation by polymerase chain reaction-single strand conformational polymorphism (PCR-SSCP). Positive examination results were mosaic XY/XXY, mutation of exon 20 in SCN5A, cytomegalovirus infection (CMV), marginal insertion of umbilical cord, and intrauterine growth retardation (IUGR).

Conclusion: IUFD was directly induced by genetic mutation of SCN5A.

Key words: placenta, intrauterine fetal death (IUFD), genetic analysis, myocardial Na+ pump α subunit gene SCN5A mutation, cardiac sudden death, gene mutation, polymerase chain reaction-single strand conformational polymorphism (PCR-SSCP), immunostain, intrauterine growth retardation (IUGR), pathology, method

Introduction

In IUFD 25% of causes and background factors were unclear (1). Routine placental analysis often failed to disclose the cause of IUFD. We have tried to investigate the true causes with genetic studies; FISH, PCR, and PCR-SSCP. Genetic mutation of cardiac sudden death was suggested and reported in this paper.

Case report

Placenta of IUFD in 27-weeks of gestation was pathologically examined and its FFPE specimen was genetically analyzed (1-3). Genetic analysis was followings: (i) macroscopic and microscopic analysis (1-3), (ii) infection of CMV, Ebstein-Barr virus (EBV), Herpes sim-

plex virus (HSV) by PCR with both the reagent, usual PCR method and SYBR method of Mx3000P Real-Time QPCR System, Agilent Technologies (Japan branch office) with SYBR Premix Ex Taq (Tli RNaseH Plus), Takara (Japan), and (4) (iii) chromosomal pattern of #13, 18, 21, and XY by fluorescence in situ hybridization (FISH) (4), (iv) myocardial Na+ pump α subunit gene SCN5A mutation by polymerase chain reaction-single strand conformational polymorphism (PCR-SSCP) (5)..

Pathologic findings were as followings: IUGR (660g, male), marginal insertion of umbilical cord, suggesting intraplacental fetal circulatory disturbance (Table 1). Genetic examination showed mosaic XY/XXY, mutation of exon 20 in SCN5A, and intrauterine infection with CMV (Table 1). SCN5A mutation suggested cardiac circulatory disturbance (Table 1).

Conclusion

 $\ensuremath{\text{IUFD}}$ was induced by genetic mutation, including SCN5A.

References

- Ikarashi, T. Clinical Obstetric and Gynecologic Pathology ABC. 3rd ed. Nagaoka: Pimento; 1993.
- Ikarashi, T. Placenta, accessory organs, abortus, neonatal classification. Available from; URL: http://www.nrec.sakura.ne.jp/sub21.htm; http://nrec.we.fc2.com/
- 3 . Ikarashi, T. Placental pathology, standardization of pathological examination with simplified assessment table. Niigata-Ken Koseiren Med J 2014; 23: 97-107. Available from; URL: http://www.janiigata.sakura.ne.jp/JMNK/23-1/20.pdf
- 4. Ikarashi, T et al. Establishment of the pathological diagnostic method of total hydatidiform moles by p57 Kip2 immunostain and fluorescence in situ hybridization for sex chromosomes (XY-fluorescence in situ hybridization, XY-FISH). Niigata-Ken Koseiren Med J 2011; 20: 83-4. Available from; URL: http://www.

janiigata.sakura.ne.jp/JMNK/20-1/083-084.pdf

5 . Ikarashi, T. Genetic analysis of the myocardial Na+pump α subunit gene SCN5A mutation in 7 cases of sudden death among 425 cases of our autopsy casesgene mutation was suggested in 4 cases by polymerase chain reaction-single strand conformational polymorphism (PCR-SSCP) method. Niigata-Ken Koseiren Med J 2015; 24: 1-4. Available from; URL: http://www.janiigata.sakura.ne.jp/JMNK/24-1/001-004.pdf

和文抄録

症例報告

心筋ナトリウムポンプ SCN5A 遺伝子変異による在胎 27週の子宮内胎児死亡の1症例

長岡中央病院、病理部;病理医

五十嵐俊彦

背景:原因不明の子宮内胎児死亡(IUFD)の死因検索として、心筋ナトリウムポンプ遺伝子の変異を検討した。

症例内容: ホルマリン固定の胎盤に関して以下の検討を加えた: (1) FISH による染色体検査、(2) PCR-SSCP による心筋ナトリウムポンプ SCN5 A 遺伝子変異、(3) PCR と免疫染色による感染症の有無、そして(4) 病理検査が実施された。その結果、モザイク XY/XXY、SCN5A エクソン20の変異、サイトメガロウイルス感染、子宮内胎児発育遅延(IUGR)、および臍帯辺縁付着が指摘された。

結論:本 IUFD の直接原因として、心筋ナトリウムポンプ遺伝子等の変異が指摘された。

キーワード:子宮内胎児死亡 (IUFD)、遺伝子検査、 心筋ナトリウムポンプ遺伝子 SCN5A 変異、心 筋性突然死、遺伝子変異、ポリメラーゼ連鎖反 応一一本鎖高次構造多型法 (PCR-SSCP)、免 疫染色、子宮内胎児発育遅延 (IUGR)、病理検 査

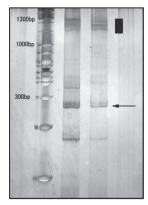
Table 1. Examination results

Table 1. Examination results		
study and method		result
chromosome study by FISH	13	N
	18	N
	21	N
	XY	XY > XXY
SCN5A PCR-SSCP	exon 12-1	N
	exon 12-2	N
	exon 18	N
	exon 20	mutation
infection by PCR	CMV	+
	EBV	-
	B19V	_
Pathology	fetus	IUGR
	placenta	marginal insertion of cord

Table 2. Abbreviation

?	probably	
B19V	Parvovirus B16	
CMV	cytomegalovirus	
EBV	Ebstain-Barr virus	
FFPEs	formalin-fixed paraffin-embedded sections	
FISH	fluorescence in situ hybridization	
IUFD	intrauterine fetal death	
IUGR	intrauterine growth retardation	
N	normal	
PCR-SSCP	polymerase chain reaction-single strand conformational polymorphism	
SCN5A mutation	myocardial Na+ pump $lpha$ subunit gene SCN5A mutation	
TORCH syndrome	toxoplasma, others, rubella, cytomegalovirus, herpes infection	

A case of the intrauterine fetal death (IUFD) in 27-weeks of gestation induced by the mutation of myocardial Na+ pump α subunit gene SCN5A



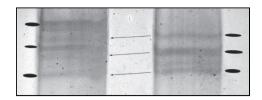


Figure. exon 20 of SCN5A in PCR-SSCP study

left: left lane: marker, middle lane: control, right lane: sample,

right: magnified figure of closed rectangle in left one

←: original PCR band, straight bar: SSCP bands

(2015/08/23受付)