

DU Maladies systémiques : Maladies Lysosomales

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Disclosure

- Travel grants and speaker honoraria from:
 - Amicus
 - Genzyme/Sanofi
 - Shire

Objectifs pédagogiques

- Connaître les principales maladies lysosomales
- Connaître leur **mode de transmission**
- Connaître leurs principaux **symptômes d'appel**
- Connaître la **démarche diagnostique** permettant d'aboutir au diagnostic de ces maladies : dosages biochimiques, analyses génétiques
- Différencier les maladies « macrophagiques » et « endothéliales »
- Reconnaitre les signes d'appel des mucopolysaccharidoses
- Connaître les **traitements** permettant de prendre en charge les patients atteints de maladies de Gaucher et de Fabry
- Maladie génétique : **un patient = une famille**

« Surcharge lysosomale »

- Fabry
- **Gaucher**
- **Niemann-Pick B**

Maladie de Gaucher type 1

- AR
- Fatigue
- Hépato-splénomégalie
- Thrombopénie
- Atteintes osseuses
- Enzymothérapie
depuis 1991
- Y penser !!!

ASMD
ou
Niemann-Pick B

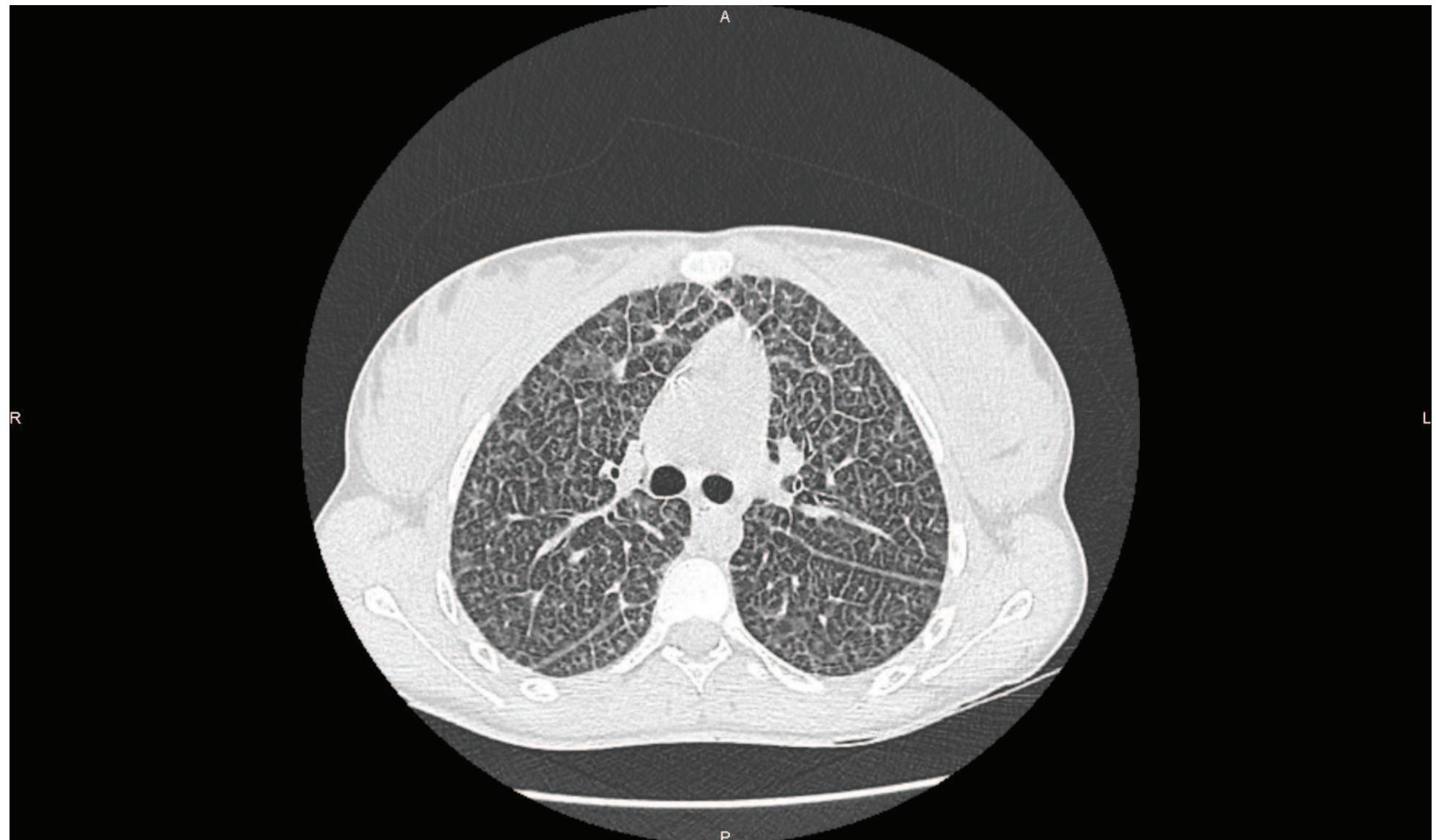
Emergency unit of our hospital



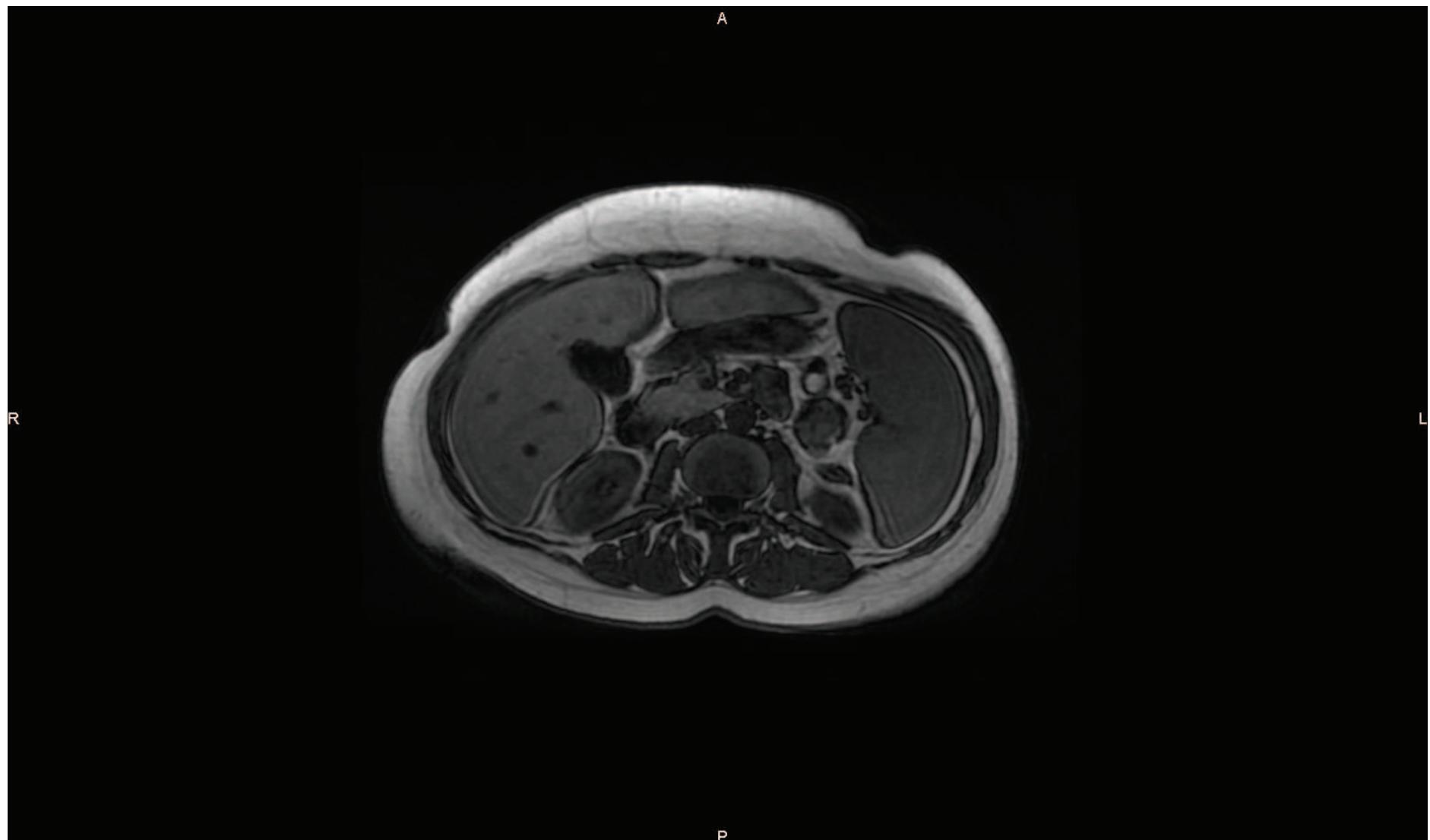
Abdominal pain

- 34-year-old female patient, originating from Tunisia
- Recurrent pain in the left part of the abdomen
- Crackles (lung auscultation)
- Liver < SPLEEN enlargement
- Platelets : 120 000/mm³
- Low HDL cholesterol

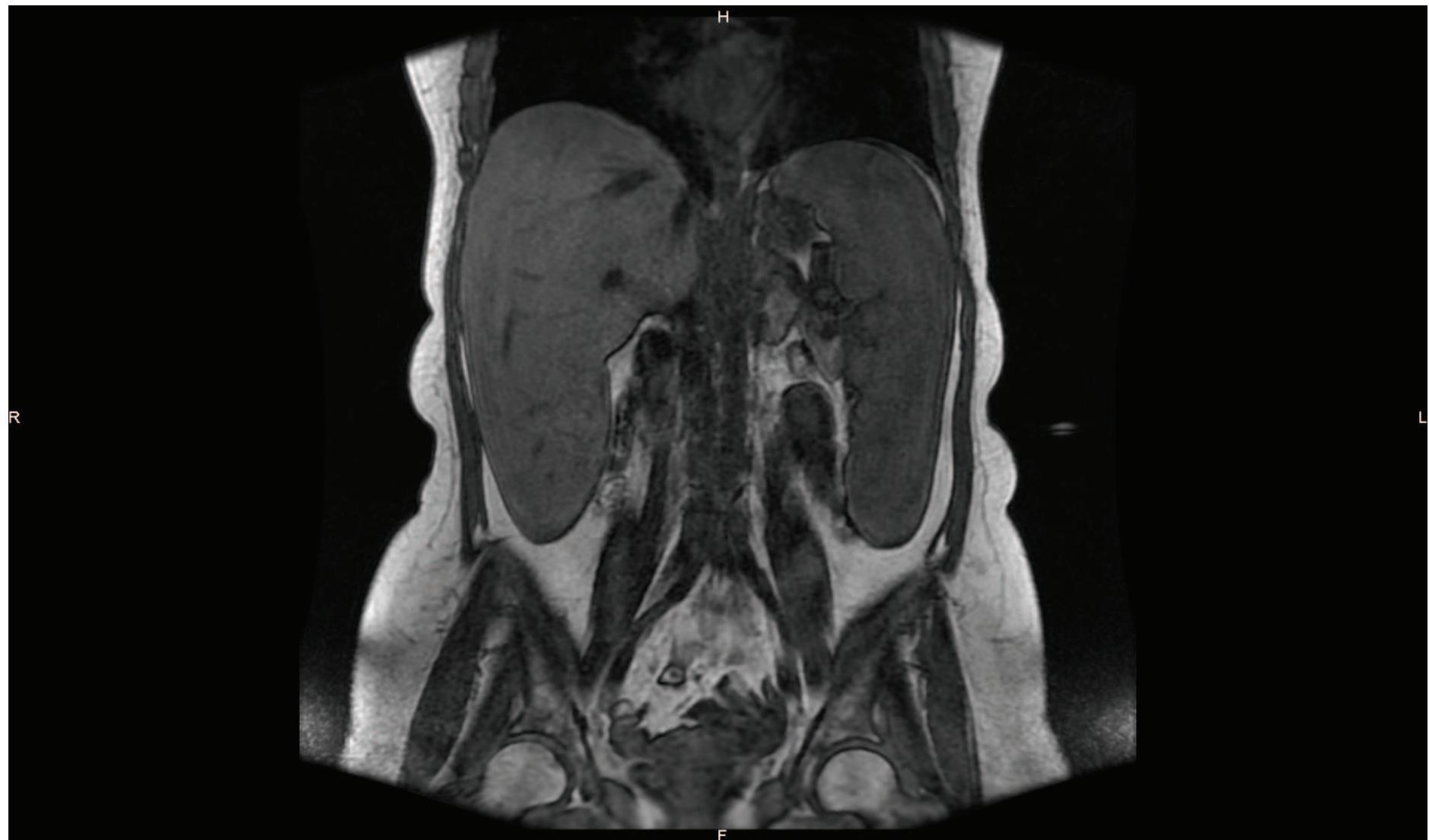
Lung involvement



Liver and spleen enlargement



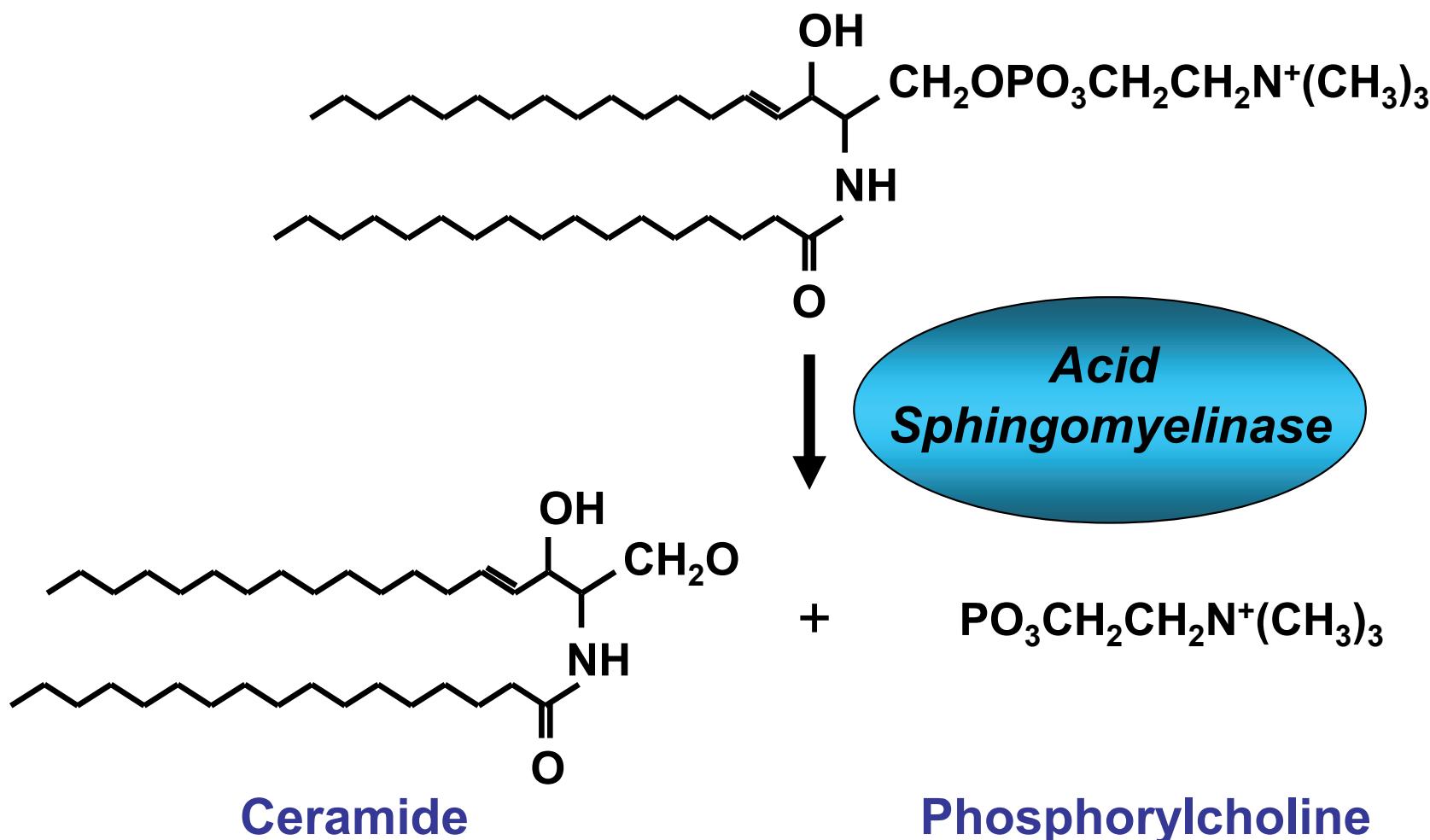
Liver and spleen enlargement



One question for the diagnosis ...

Acid Sphingomyelinase (ASM)

Sphingomyelin



Déficit en Sphingomyélinase acide

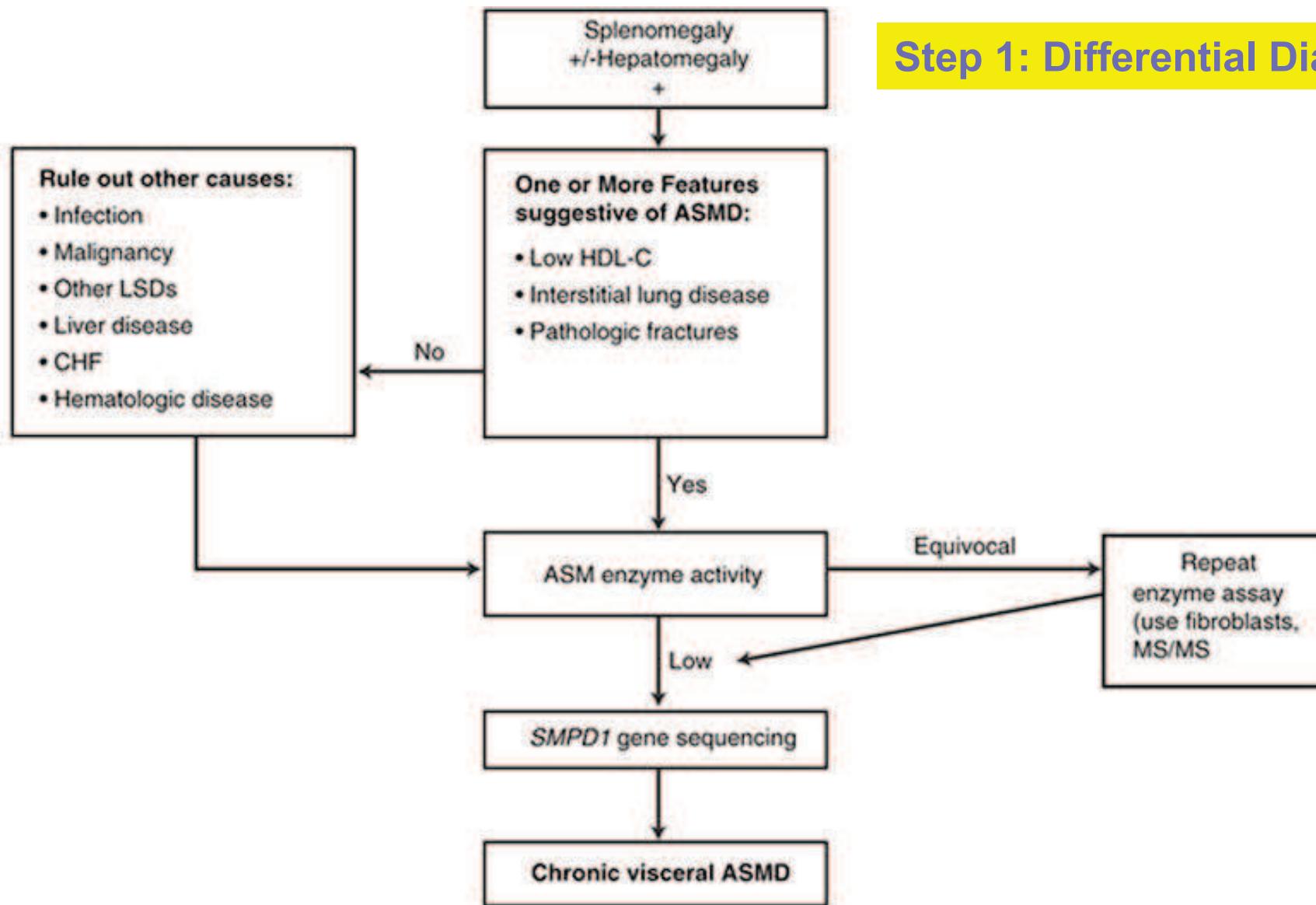
- Niemann-Pick A et B
- SMPD1 = sphingomyelin phosphodiesterase
1 = acid sphingomyelinase
 - 11p15.11p15.4
 - Autosomique récessif
 - 2 allèles A : type A
 - 2 allèles B : type B
 - 1 A et 1 B : type B
- Estimation : 1/250 000

Niemann Pick type B

- Initial presentation
 - Spleen 78%
 - Liver 73%
- Symptoms
 - Bleeding 49%
 - Pulmonary infections 42%
 - Shortness of breath 42%
 - Joint/limb pain : 39%

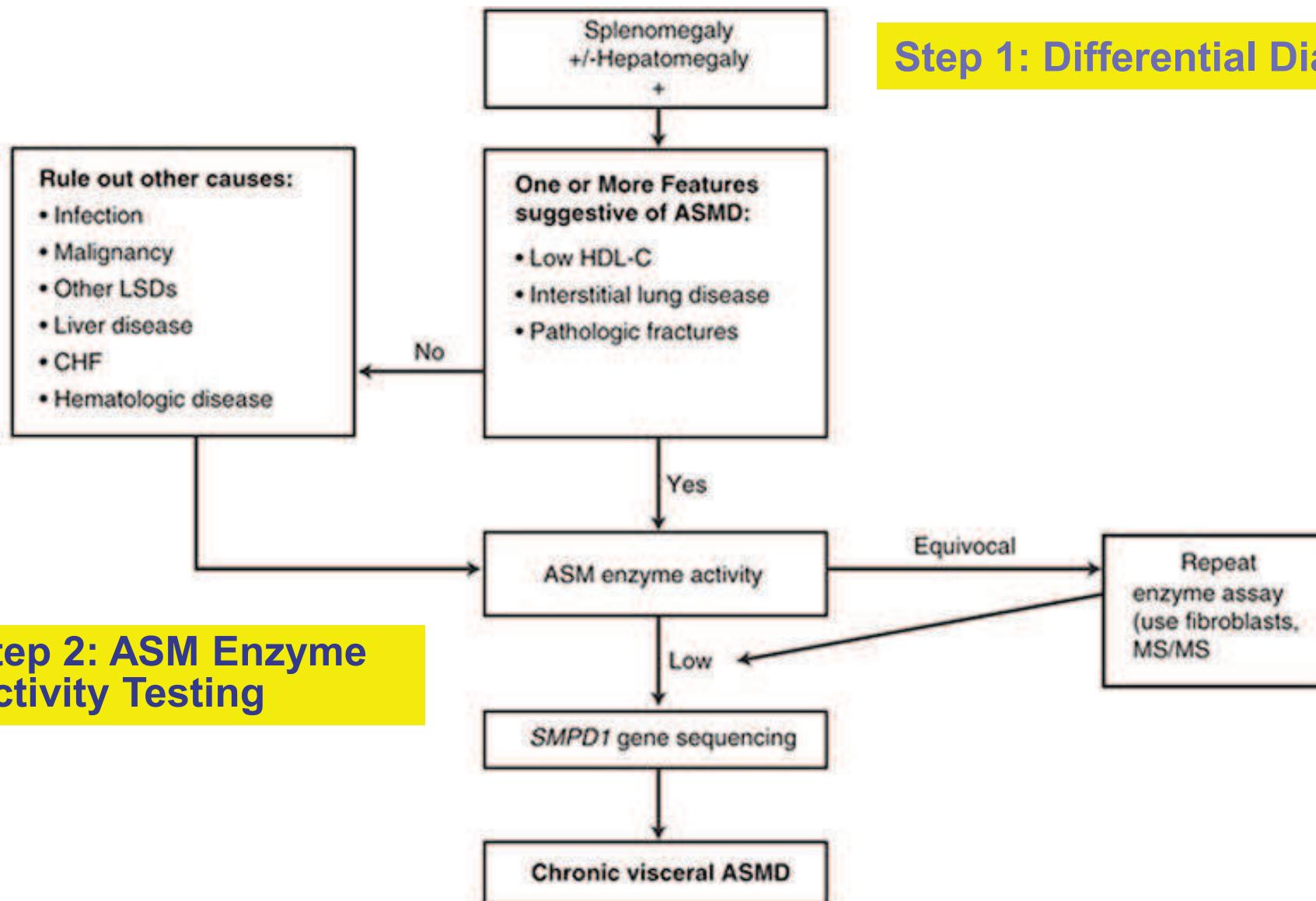
McGovern MM, et al. Paediatrics 2008.

Step 1: Differential Diagnosis



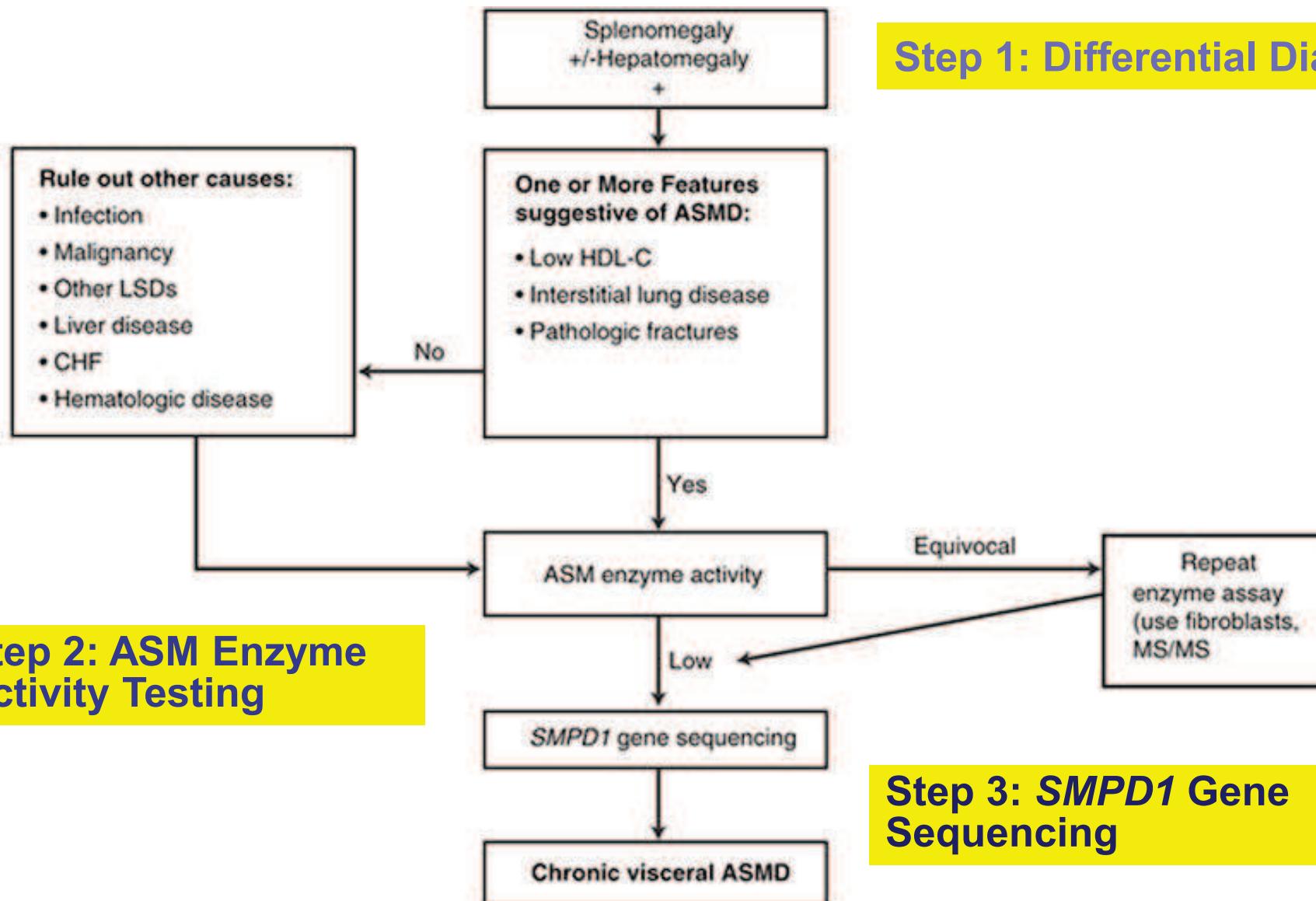
Abbreviations: ASM = acid sphingomyelinase; ASMD = acid sphingomyelinase deficiency; CHF = congestive heart failure; HDL-C = high density lipoprotein cholesterol; LSD = lysosomal storage disorder; MS/MS = tandem mass spectrometry; SMPD1 = ASM gene

Diagnostic algorithm for acid sphingomyelinase deficiency presenting after childhood.
McGovern MM et al. Orphanet J Rare Dis 2017;12:41.



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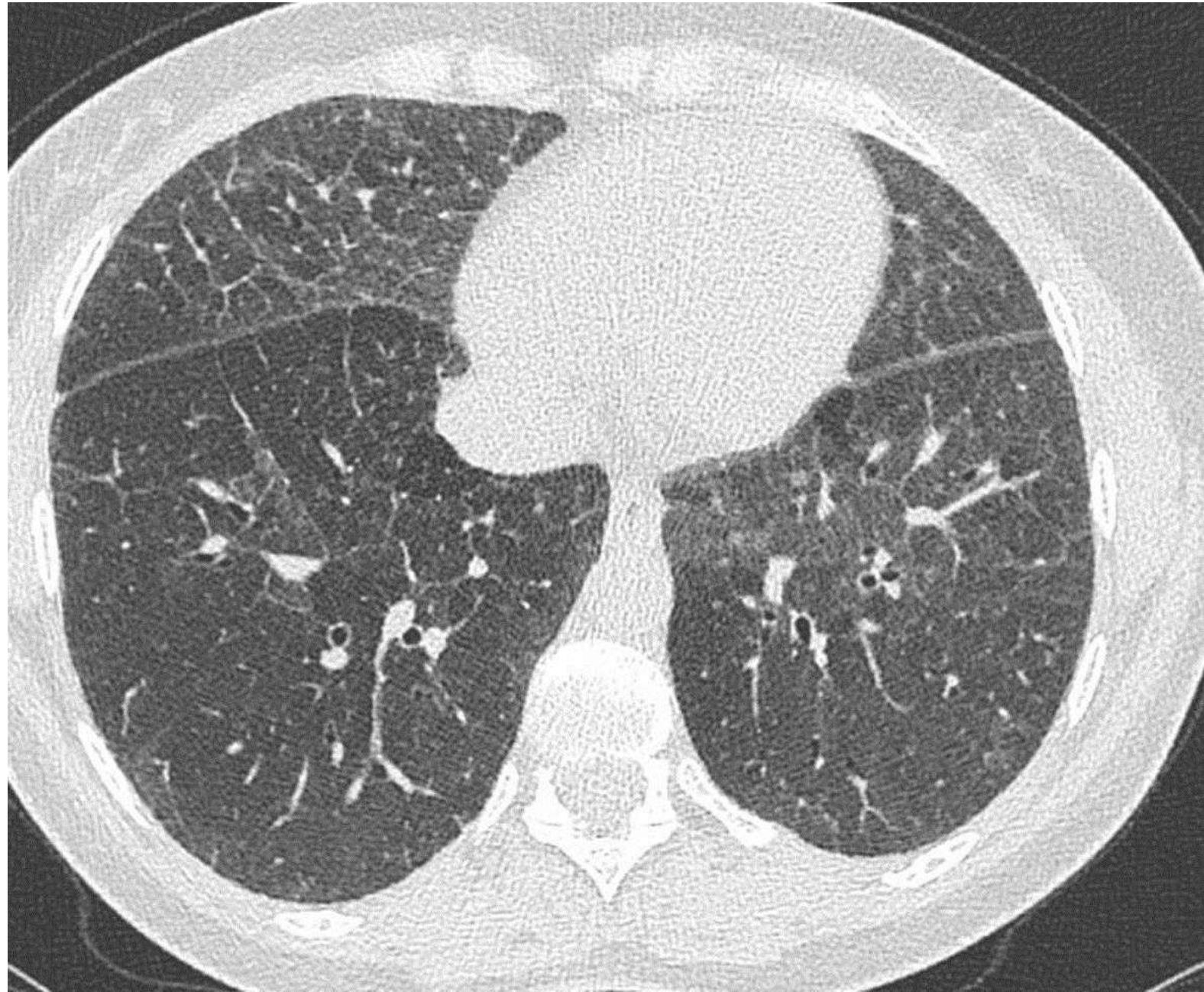
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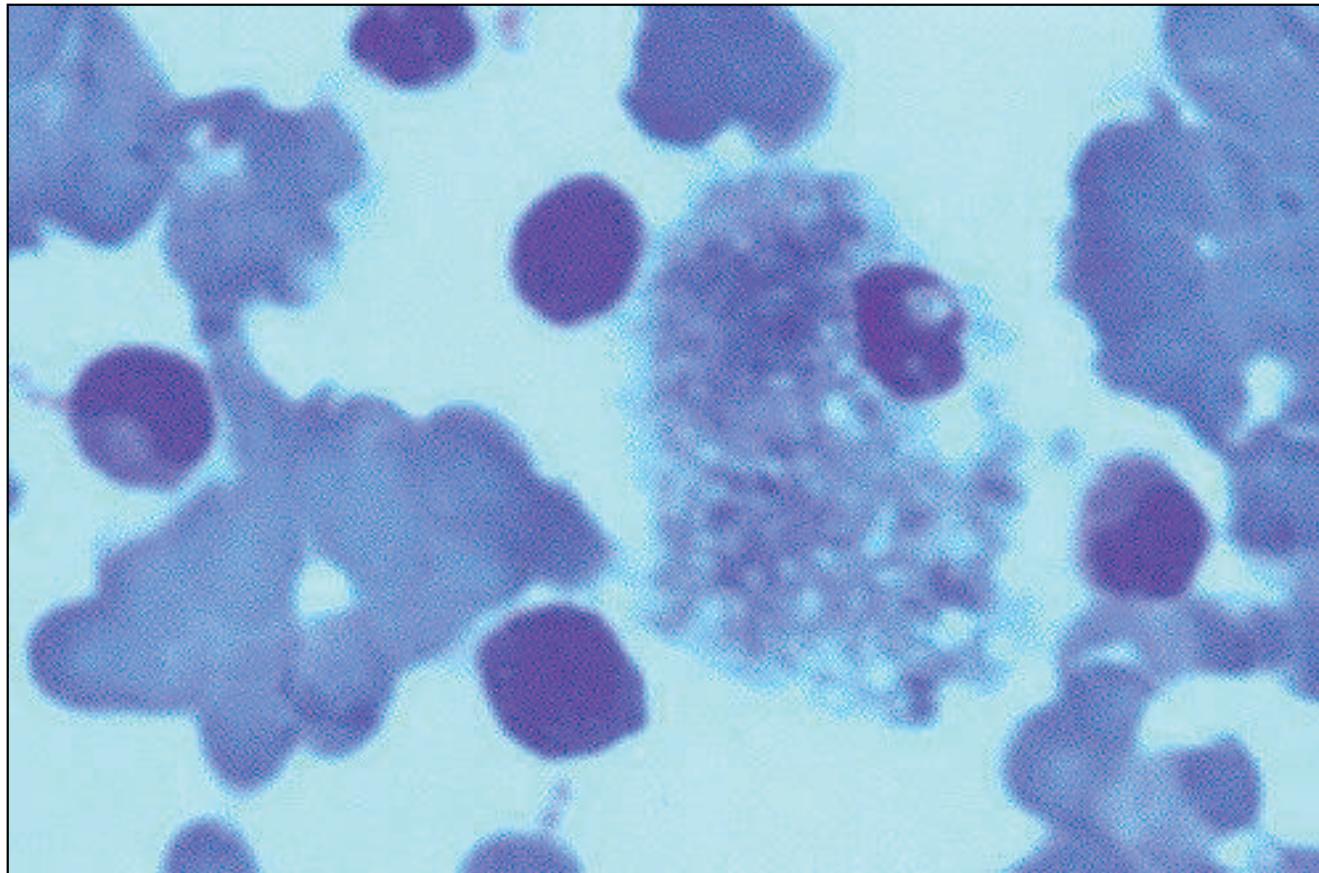


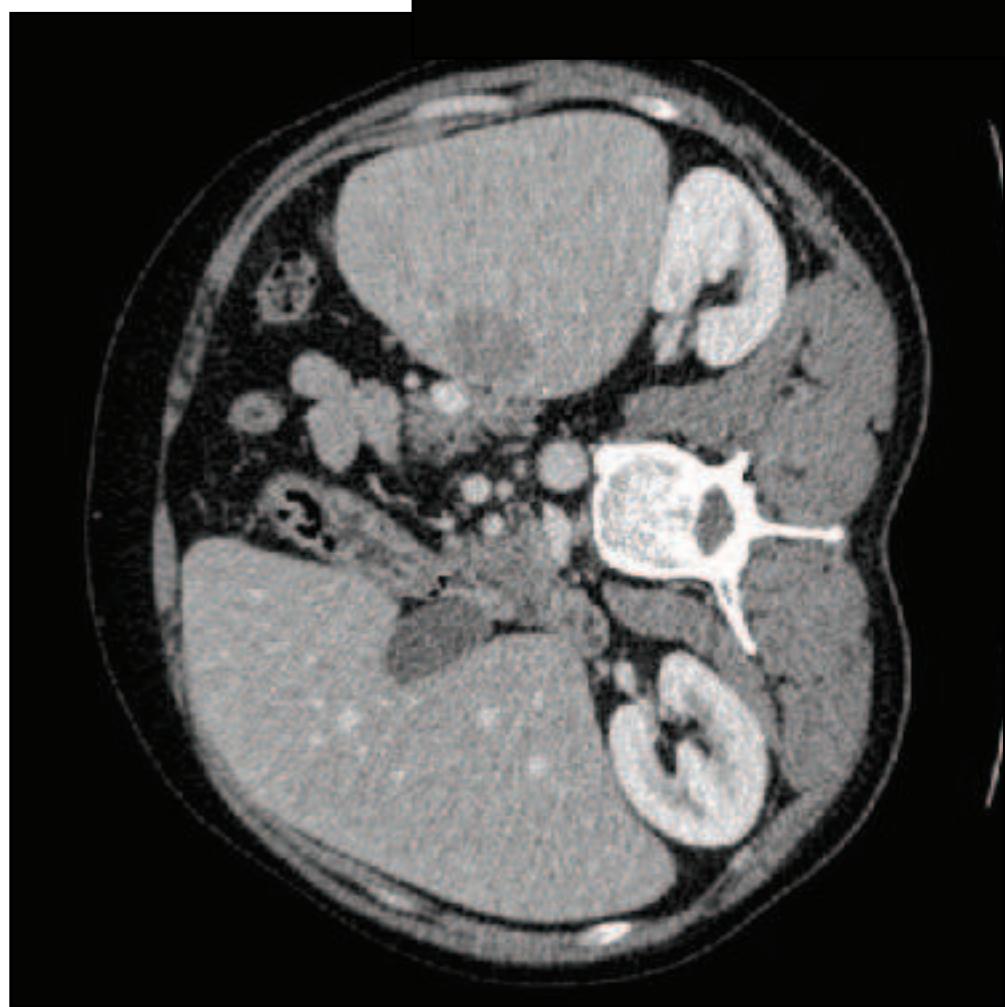
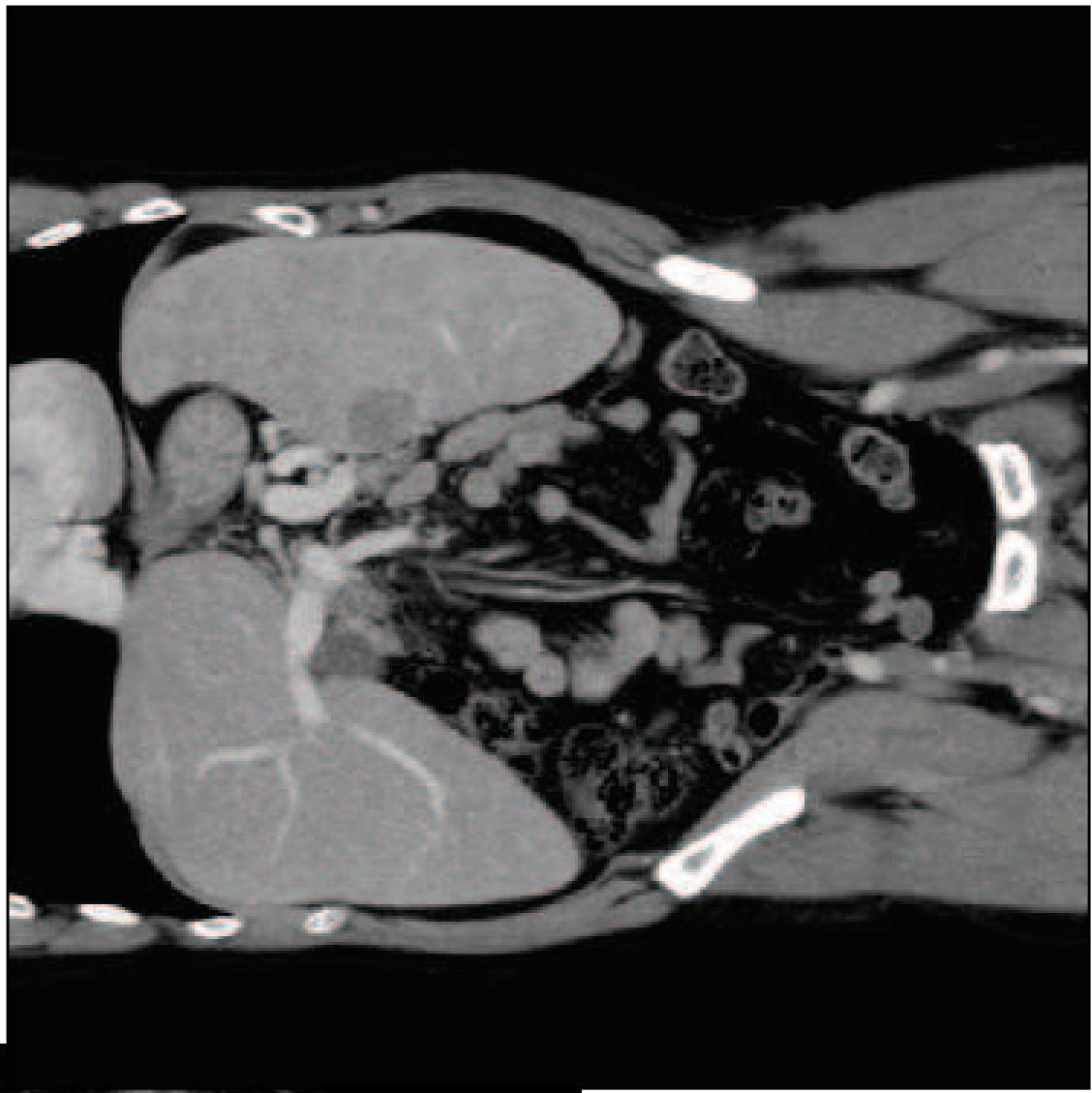


Remerciements au Pr A. Tazi, Pneumologie, Hôpital St Louis, Paris.



Niemann-Pick (myélogramme)





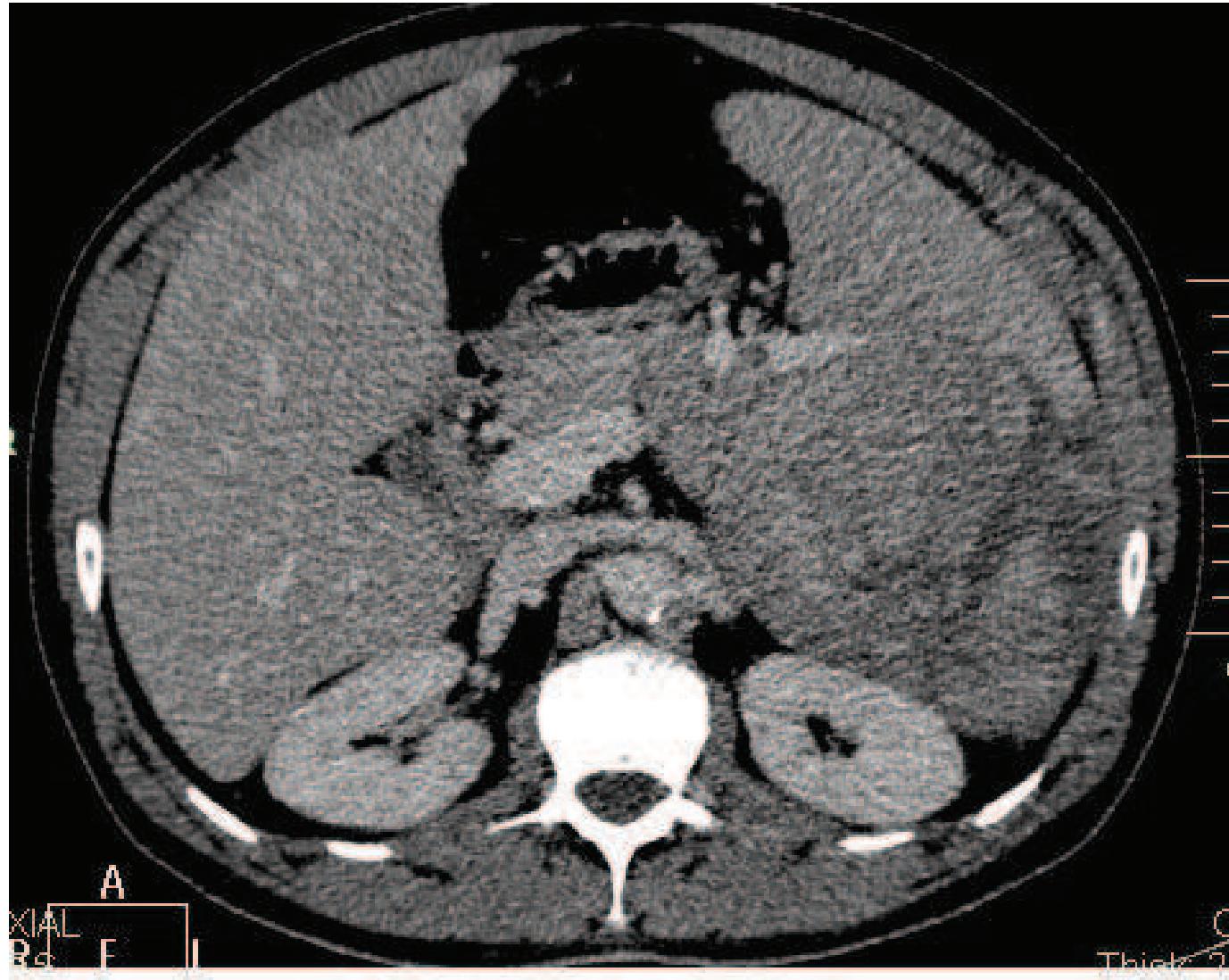
Splenectomie ?



IgM kappa monoclonale

Pas de fièvre

Pas de ganglion



Rupture splénique : quel est votre traitement ?

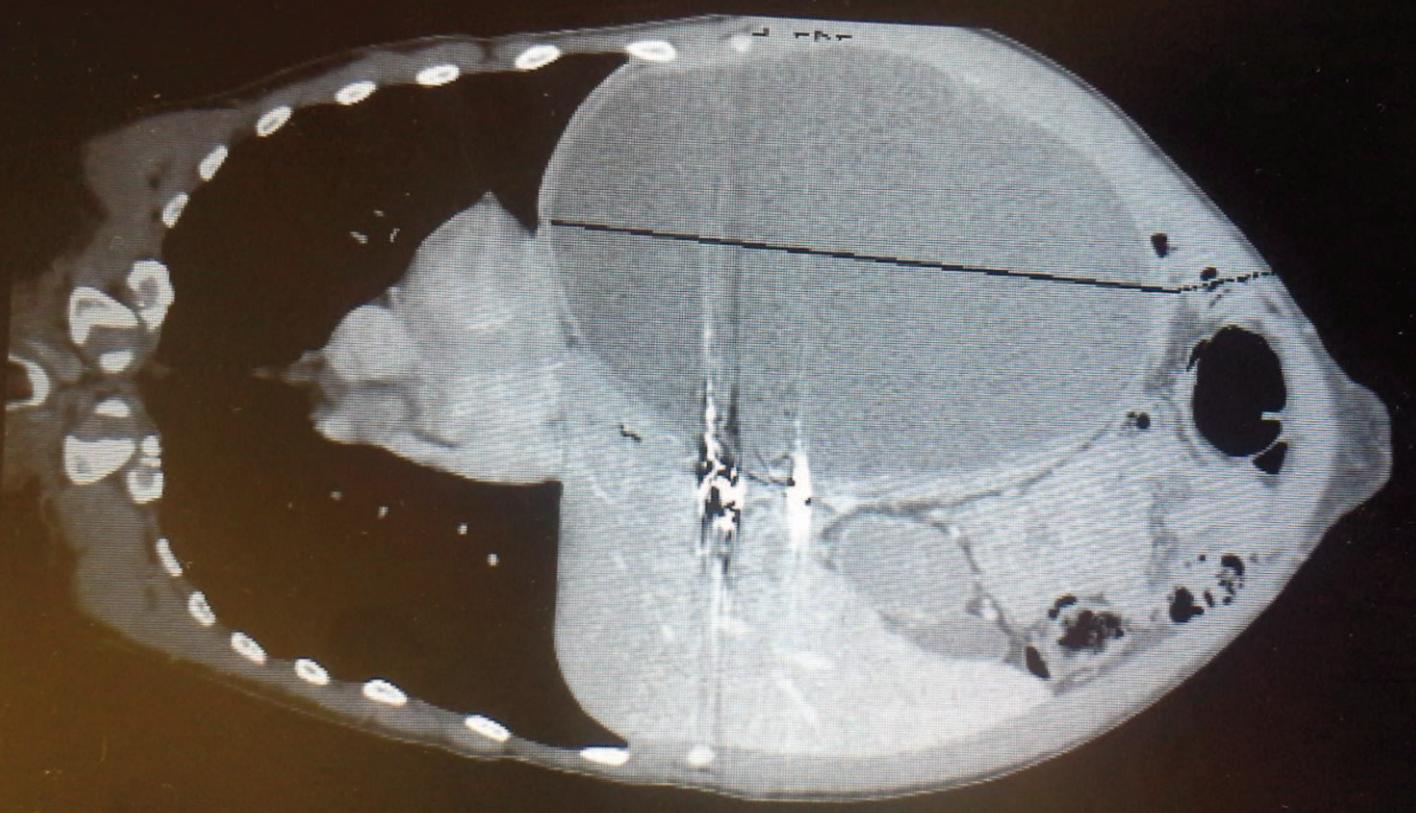
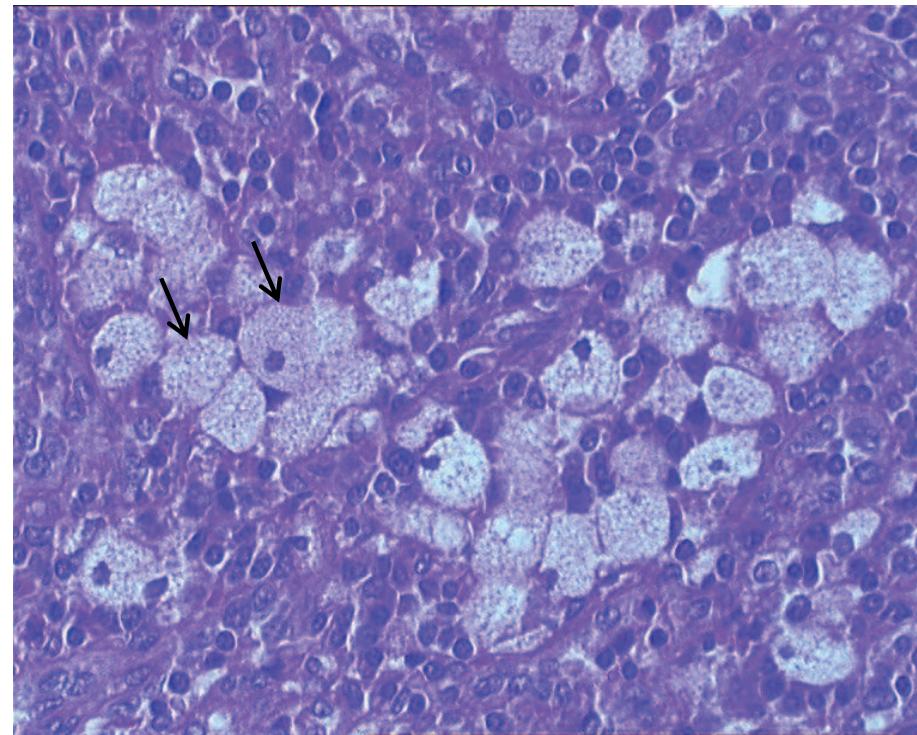


Figure 1: foamy macrophages with accumulation of lipids (HES X200)

Figure 1: amas d'histiocytes spumeux riches en lipides (HES X200)



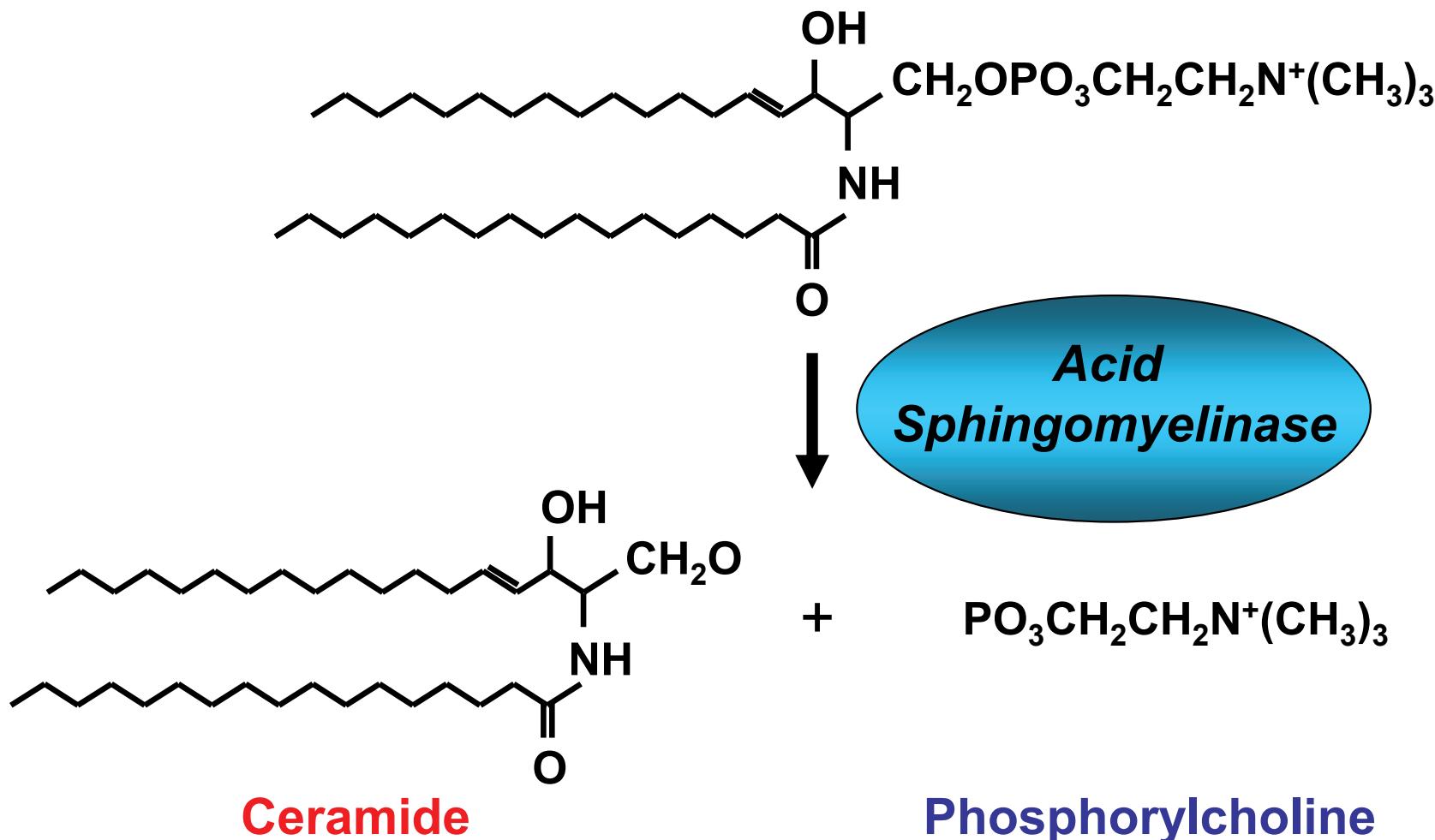
Profil lipidique

- 10 NP A, 30 NP B
- HDLc diminué : 100%
- TG augmentés : 25/40 (62%)
- LDLc augmenté : 27/40 (67%)

McGovern MM, et al. J Pediatr 2004.

Recombinant Human Acid Sphingomyelinase (rhASM)

Sphingomyelin



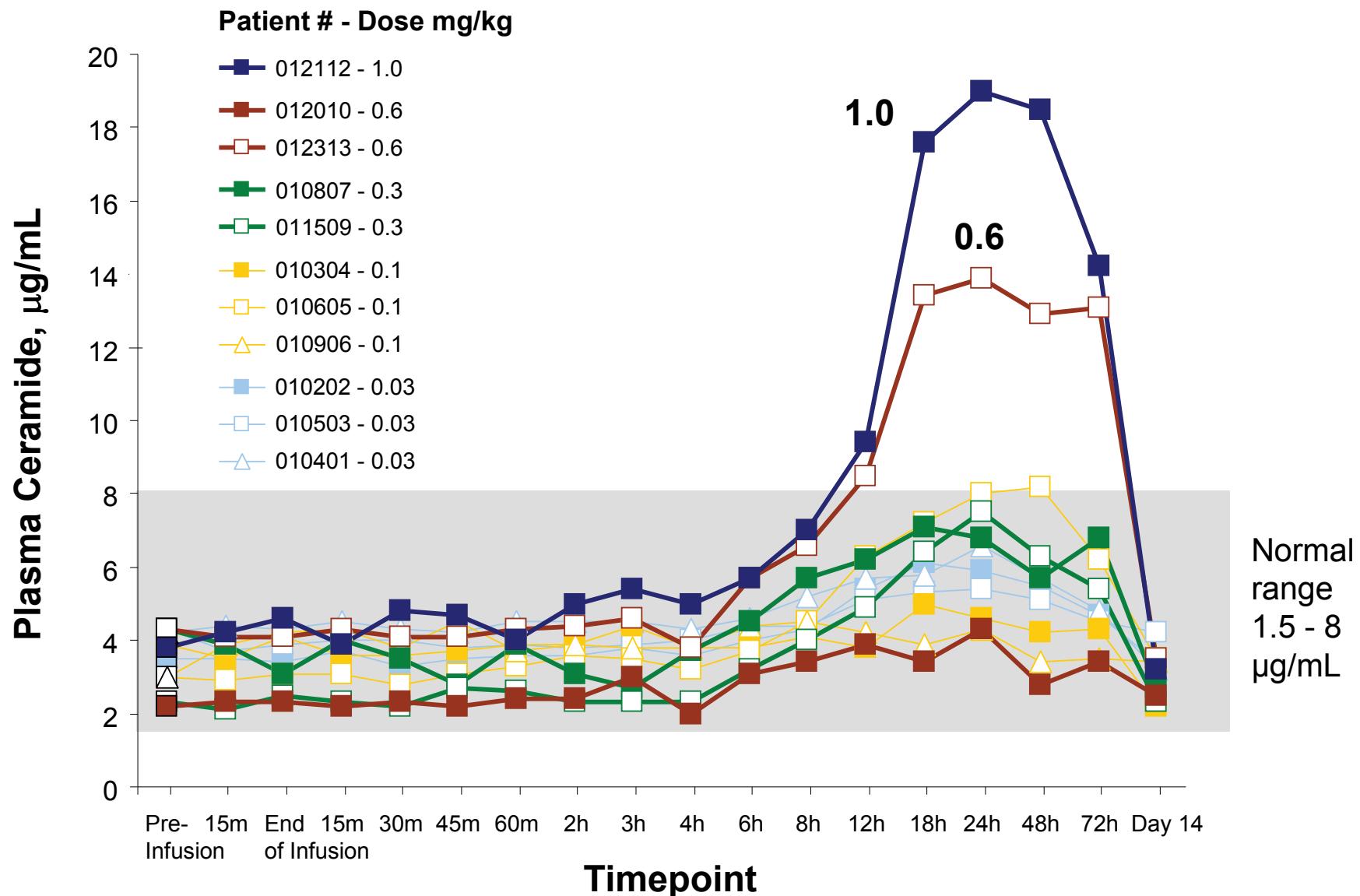
Niemann-Pick B : phase I

Design et objectifs : single ascending dose study to evaluate the safety and pk profile of single doses of rhASMD in ASMD patients

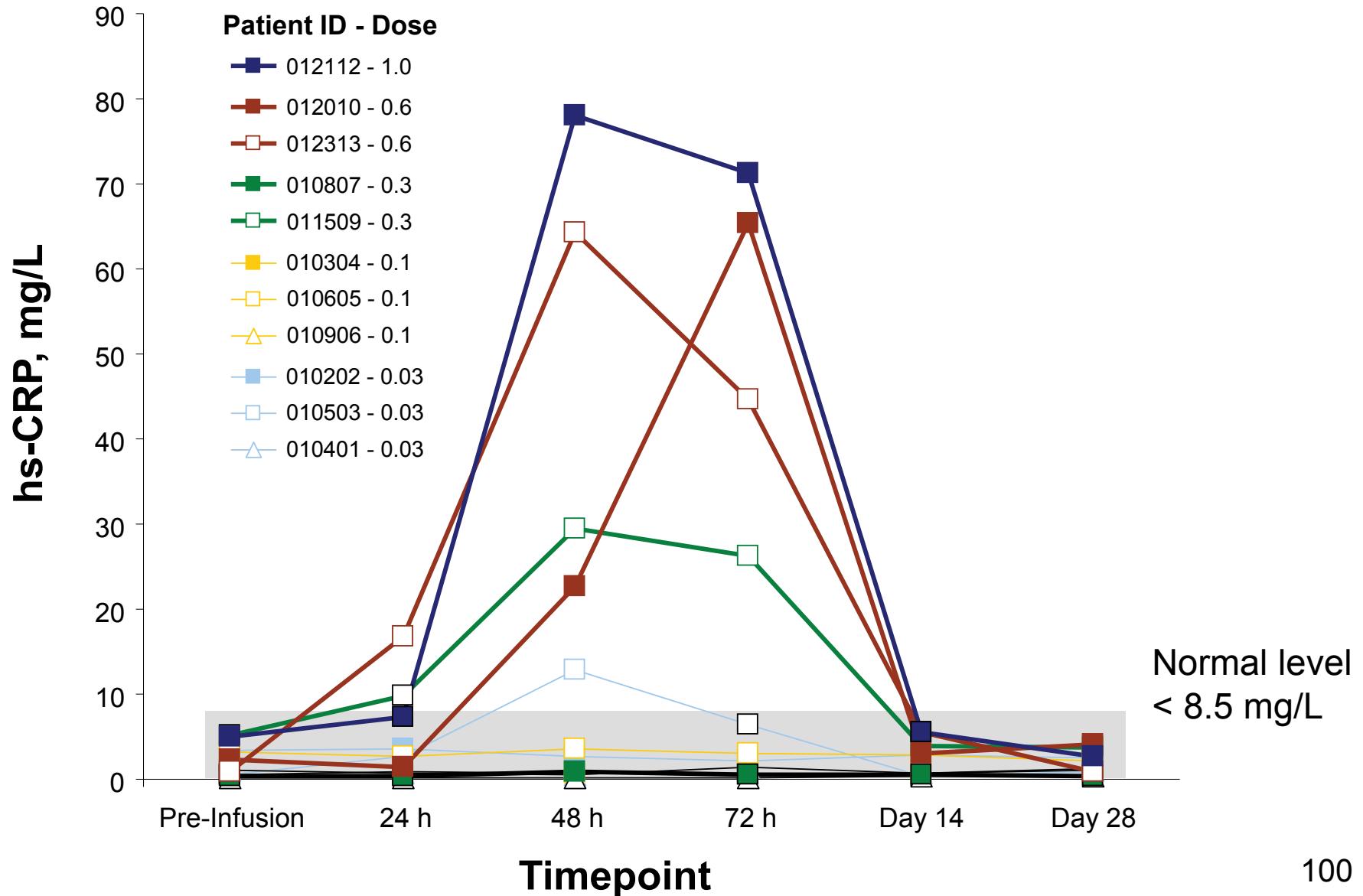
- Janvier 2007 -> fin Mars 2009 ; 11 adultes
- 1 seul centre (Mount Sinaï Hospital, New York)
- Doses :
 - 0.03 et 0.1 mg/kg (3 patients / dose)
 - 0.3 et 0.6 mg/kg (2 patients /dose)
 - 1 mg/kg (1 patient)
- Tolérance, pK, pD

McGovern MM, et al. Genet Med 2016;18:34-40.

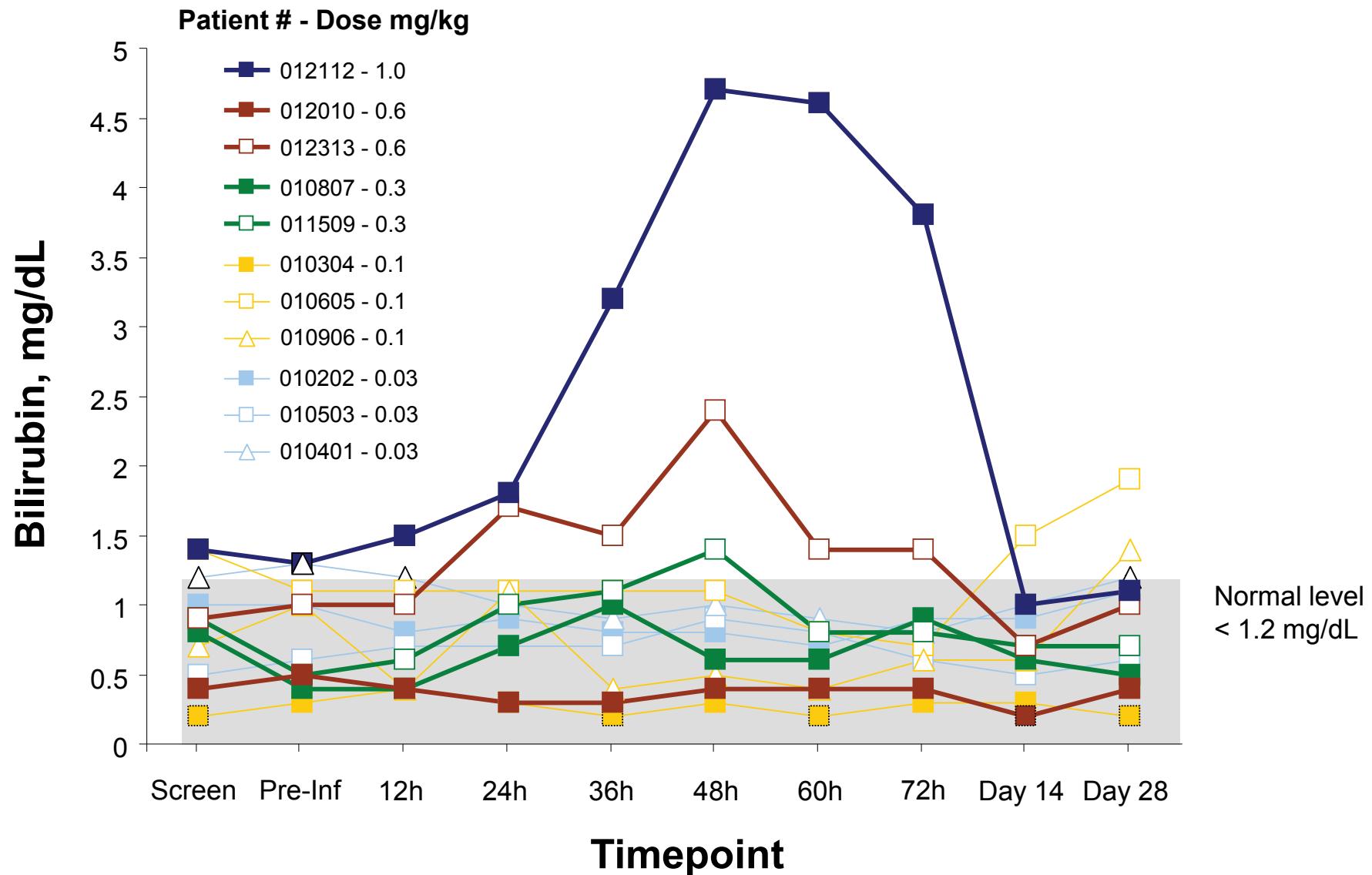
Plasma Ceramide Levels



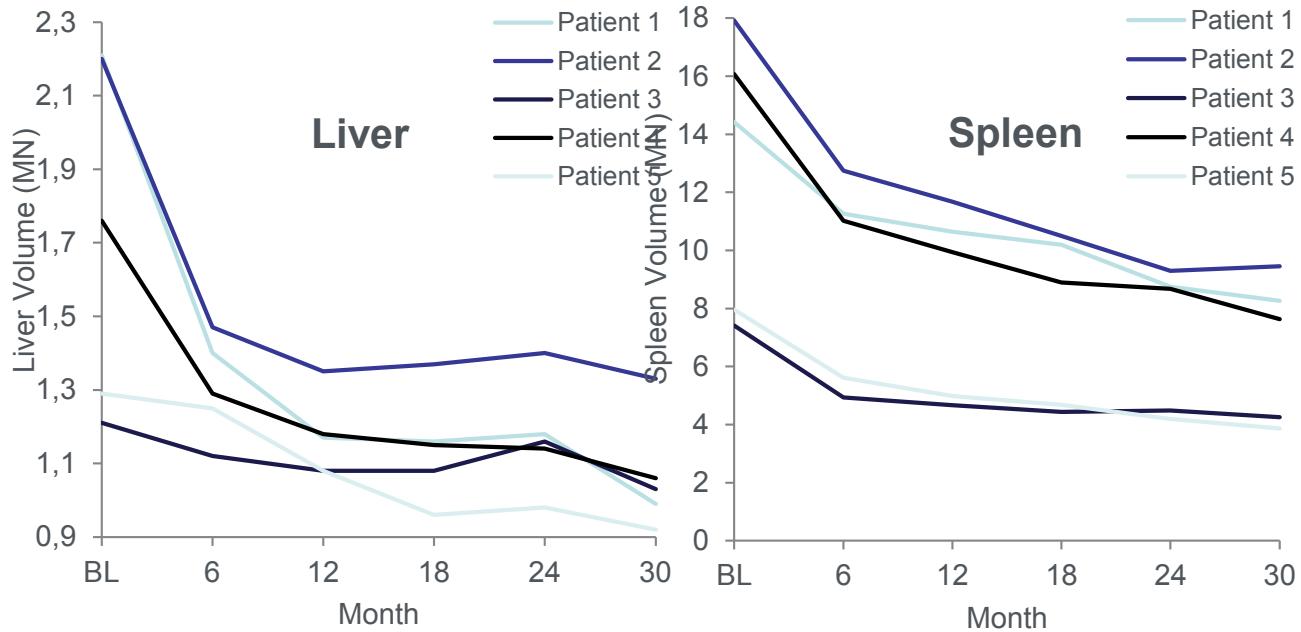
C-Reactive Protein Levels



Total Bilirubin Levels

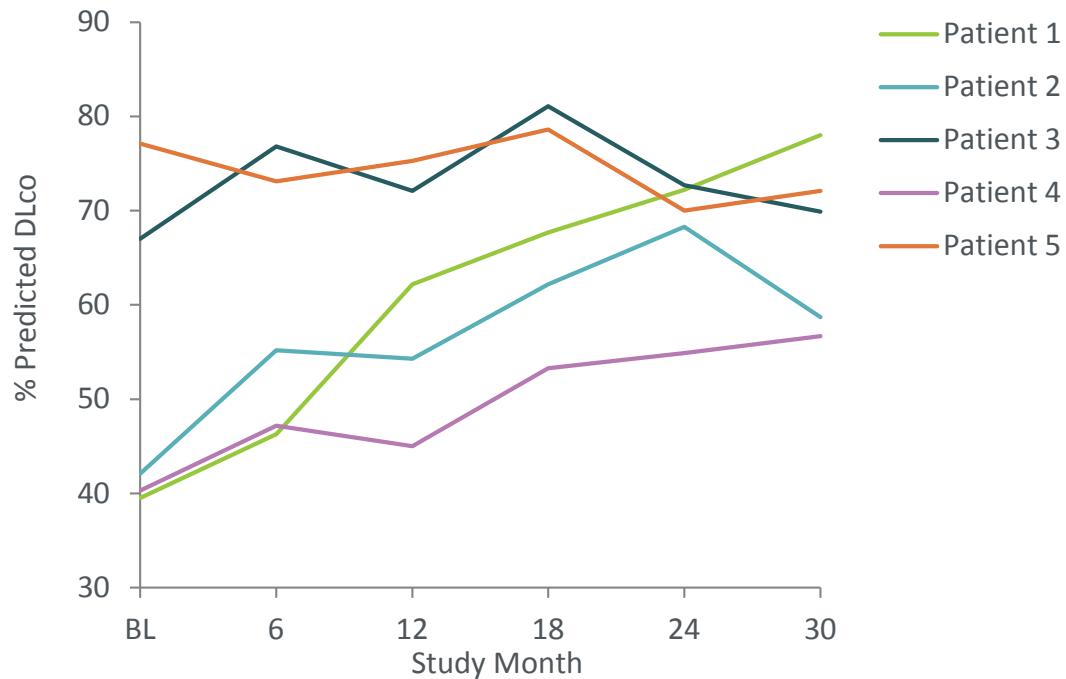


Spleen and Liver Volumes



- Spleen and liver volumes decreased in all patients relative to baseline
- Mean spleen volumes decreased from 12.8 multiples of normal (MN) at baseline to 6.7 MN at 30 months, >47% decrease from baseline ($p<0.0001$)
- Mean liver volumes decreased from 1.7 MN at baseline to 1.1 MN at 30 months, >35% decrease from baseline ($p=0.006$)

Infiltrative Lung Disease – % Predicted DL_{CO}



- Mean percent predicted DL_{CO} increased from 53.2% predicted at baseline to 67.08% predicted (mildly reduced DL_{CO}) at 30 months
- The most prominent changes were observed in the 3 patients with the lower DL_{CO} values at baseline

Conclusion

- **Maladie de Niemann Pick B (autosomique récessive):**
 - Hépato-splénomégalie
 - Fibrose interstitielle pulmonaire (crépitants antérieurs)
 - Risque hémorragique (thrombopénie)
 - Profil lipidique athérogène (HDLc effondré)
- **Médecins concernés :**
 - Pédiatres
 - Pneumologues, hépatologues, hématologues, ...
- **Traitements par enzymothérapie recombinante (essai thérapeutique de phase 2/3 en cours)**

Synthèse

Niemann Pick B vs Fabry (1)

Niemann Pick B

- Maladie lysosomale
- Accumulation de substrat
- Hommes et femmes
- Fibrose

Fabry

- Maladie lysosomale
- Accumulation de substrat
- **Hommes** et femmes
- Ischémie - Fibrose

Niemann Pick B vs Fabry (2)

Niemann Pick B

- AR (**consanguinité**)
- Macrophage
- Phénotype « serré »
- Phase 2/3 ...
 - Céramide pro-inflammatoire

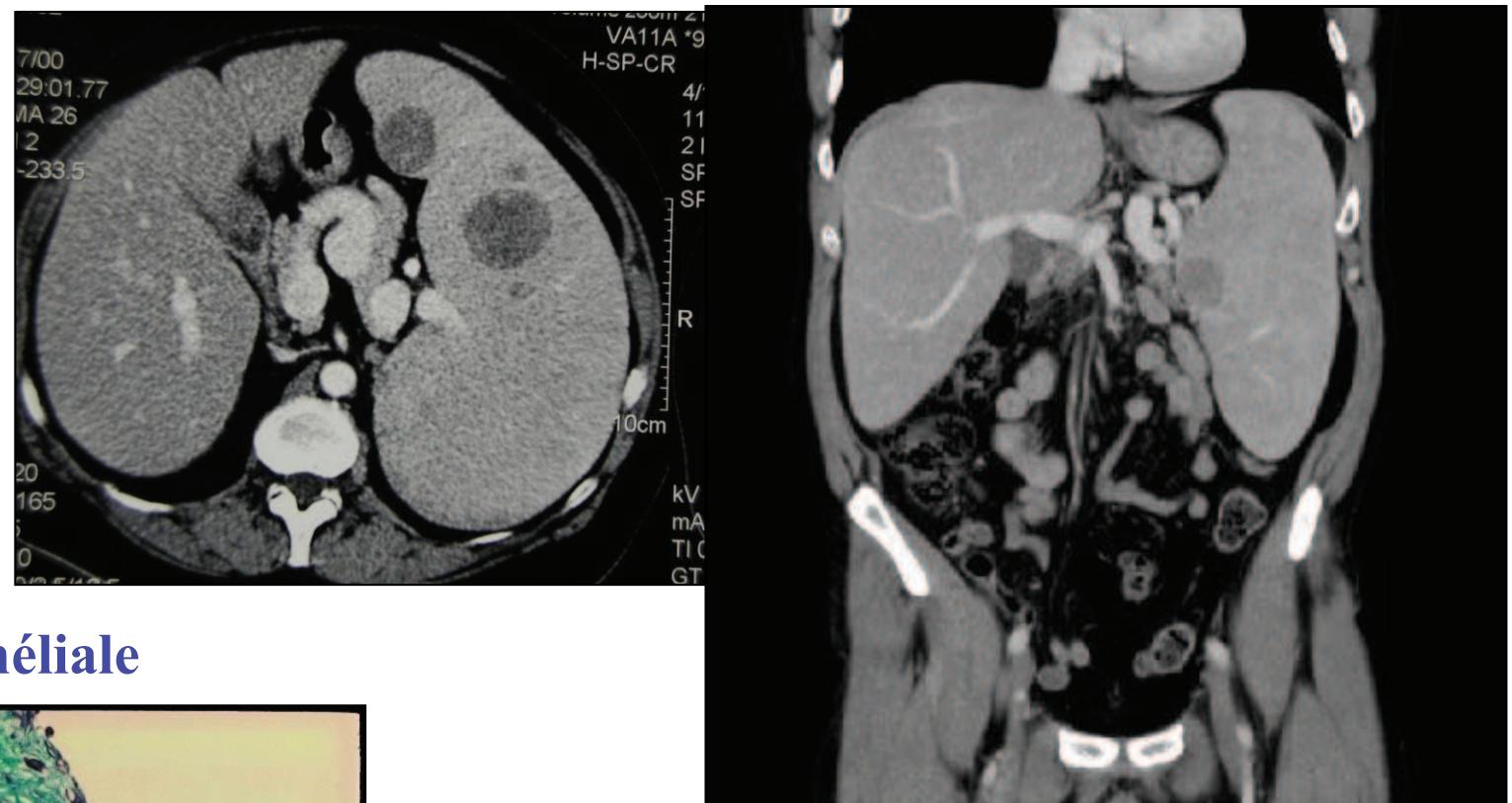
Fabry

- Liée à l'X (**famille**)
- Cellule endothéliale
- Phénotype polymorphe
- Enzymothérapies
 - Ac anti-enzymes
 - Point de non-retour = fibrose

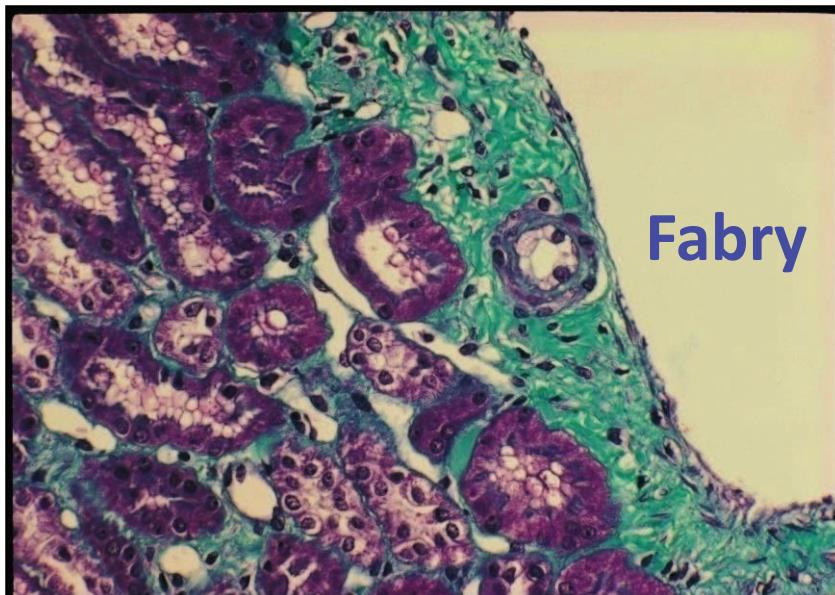
Tableaux cliniques

► Macrophage

Gaucher
type 1



► Cellule endothéliale



Fabry

Niemann-Pick
type B

Remerciements

- **Patients et familles**
- **Associations de patients :**
 - APMF
 - VML
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- **Co-auteurs des travaux**
 - Groupe collaboratif français
- **Collaborateurs**
 - Cliniciens
 - Biochimistes
 - Généticiens



