

Preinatal Types of Niemann-Pick disease type C

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Niemann-Pick type C disease is a neurodegenerative atypical lysosomal storage disease. This disease is characterized by accumulation of unesterified cholesterol in the lysosomes in the liver, spleen, brain, and lung. Niemann-Pick type C is an autosomal recessive disorder that is rare, progressive, and irreversible. This disease occurs in approximately 1/120,000 to 1/150,000 live births. Niemann-Pick type C has a wide clinical spectrum ranging from perinatal presentation to adult-onset chronic neurological and ophthalmological disease. The perinatal presentation is visceral.

Fetal presentation is rare and includes in utero splenomegaly or hepatomegaly or ascites and non-immune hydrops fetalis and intra-uterine growth retardation and oligohydramnios and placentomegaly and fetal death. After birth, it may be presented with low birth weight and congenital anemia or thrombocytopenia and petechial rash. Some patients died within the first months of life from a rapidly fatal neonatal cholestatic disease. The prenatal ultrasonographic findings of Niemann-Pick type C include hepatomegaly, ascites, and splenomegaly. Each of these findings in a fetus should consider fetal Niemann-Pick type C.

Prolonged cholestatic jaundice in a neonate has a great diagnostic value in Niemann-Pick type C.

The neurological involvement may occur after systemic signs such as cholestatic jaundice or hepatosplenomegaly in the neonatal period or infancy.

Diagnosis requires skin or fibroblast culture to confirm accumulation of cholesterol in lysosomes with filipin staining. In some patients, molecular genetic testing of Niemann-Pick type C is useful to confirm the diagnosis and essential for prenatal diagnosis.

The differential diagnosis depends on signs and symptoms, for example non-immune hydrops fetalis or hepatosplenomegaly or cholestatic jaundice in neonates.

Management is symptomatic and crucial. Miglustat is a specific treatment of the neurological manifestations.

Prognosis correlates with the age at onset of the neurological finding.

Keywords: Preinatal; Niemann-Pick type C; Cholestatic jaundice; Hepatosplenomegaly; Lysosomal storage; Filipin staining

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