

**Gemelli**



Fondazione Policlinico Universitario Agostino Gemelli IRCCS  
Università Cattolica del Sacro Cuore

**Guido Primiano**

# **La richiesta di competenza neurologica nel prossimo futuro**

**Sesta edizione**

## **MITOCONDRIALI - Up to date**

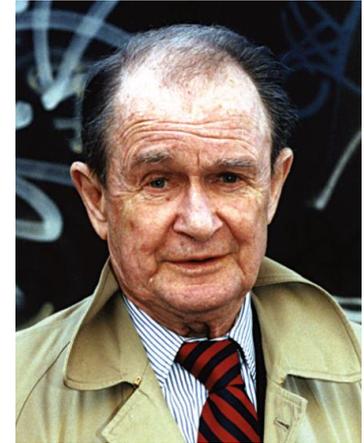
***Fondazione Policlinico Universitario A. Gemelli IRCCS, Roma  
Dipartimento Universitario di Neuroscienze, UCSC, Roma***

# Mitochondrial Medicine

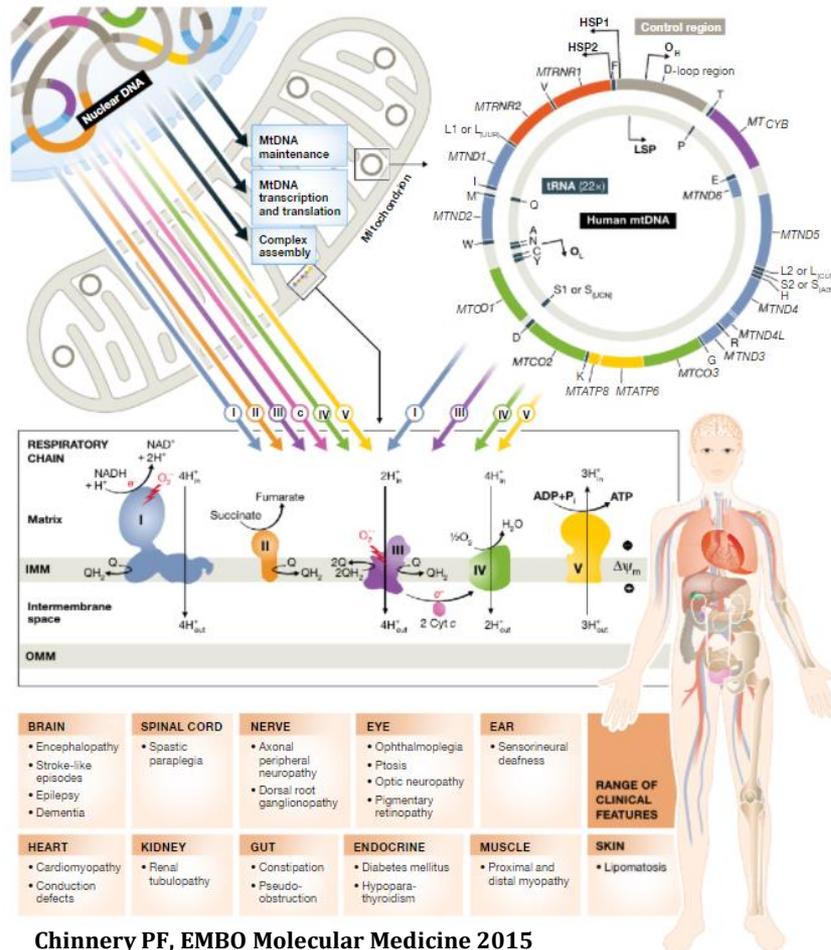


“In 1959, the first biochemical studies of a cell organelle in humans were undertaken, following observations made at the bedside of a patient with striking symptoms, never before encountered. These clinical observations, first, led to an idea about the origin of the symptoms and, second, to studies of the particular organelle: the **mitochondrion**”

*Luft R. The development of mitochondrial medicine. PNAS 1994.*



Rolf Luft, MD, PhD (1914-2007)



# Mitochondrial Diseases



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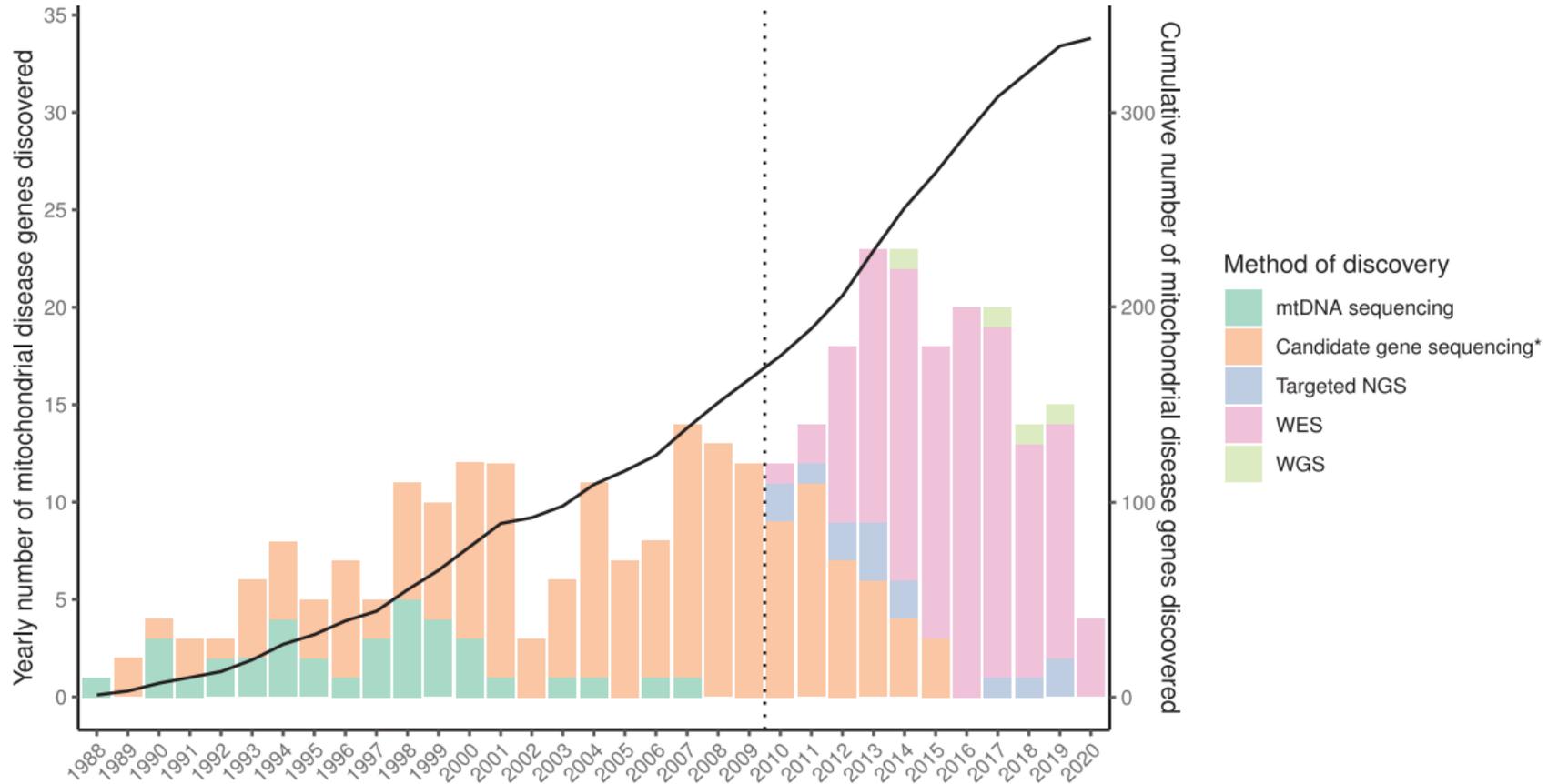


2020-2022

# Mitochondrial Diseases



S.L. Stenton and H. Prokisch / EBioMedicine 56 (2020) 102784



# Mitochondrial Diseases

## Pathogenesis



TISSUE-SPECIFIC STEM CELLS



### Mitochondria in neurogenesis: Implications for mitochondrial diseases

Dario Brunetti<sup>1,2</sup> | Werner Dykstra<sup>3</sup> | Stephanie Le<sup>4</sup> | Annika Zink<sup>4</sup> | Alessandro Prigione<sup>3,4</sup>

*Nature* 524, 234–238 (2015)

### Metabolic rescue in pluripotent cells from patients with mtDNA disease

Hong Ma<sup>1,2</sup>, Clifford D. L. Holmes<sup>1</sup>, Jun Wu<sup>4</sup>, Robert Morey<sup>5</sup>, Sergio Mora-Castilla<sup>5</sup>, Alejandro Ocampo<sup>6</sup>, Li Ma<sup>4</sup>, Joanna Poulton<sup>6</sup>, Xinjian Wang<sup>7</sup>, Rifkat Ahmed<sup>2</sup>, Jianju Kang<sup>2</sup>, Yeonmi Lee<sup>2</sup>, Tomonari Hayama<sup>1,2</sup>, Yang Li<sup>1,2</sup>, Crystal Van Dyken<sup>1,2</sup>, Nuria Marti Gutierrez<sup>1,2</sup>, Rebecca Tippler-Hedges<sup>1,2</sup>, Amy Koski<sup>1,2</sup>, Nargiz Mitalipov<sup>1,2</sup>, Paula Amato<sup>8</sup>, Don P. Wolf<sup>2</sup>, Taosheng Huang<sup>1</sup>, Andre Terzic<sup>3</sup>, Louise C. Laurent<sup>3</sup>, Juan Carlos Izpisua Belmonte<sup>2</sup> & Shoukhrat Mitalipov<sup>1,2</sup>

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### Human iPSC-derived cerebral organoids model features of Leigh Syndrome and reveal abnormal corticogenesis

Alejandra I. Romero-Morales, Gabriella L. Robertson, Anuj Rastogi, Megan L. Rasmussen, Hoor Temuri, Gregory Scott McElroy, Ram Prosad Chakrabarty, Lawrence Hsu, Paula M. Almonacid, Bryan A. Millis, Navdeep S. Chandel, Jean-Philippe Cartiailler, Vivian Gama  
doi: <https://doi.org/10.1101/2020.04.21.054361>

*Cell Death and Disease* (2020)11:182

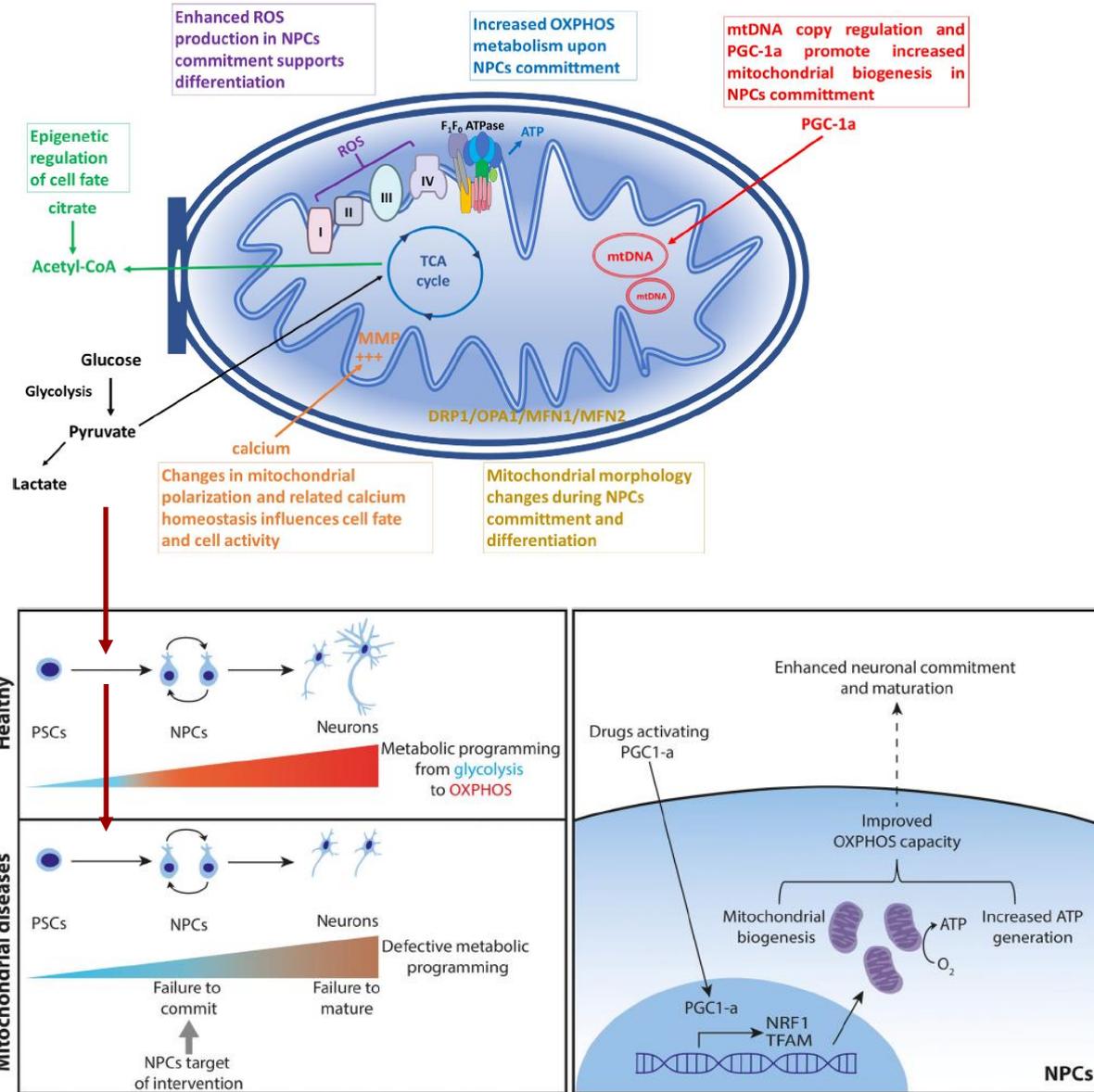
### Organoid cultures of MELAS neural cells reveal hyperactive Notch signaling that impacts neurodevelopment

Winanto<sup>1</sup>, Zi Jian Khong<sup>1,2</sup>, Boon-Seng Soh<sup>1,3,4</sup>, Yong Fan<sup>4</sup> and Shi-Yan Ng<sup>1,4,5,6</sup>

### Defective metabolic programming impairs early neuronal morphogenesis in neural cultures and an organoid model of Leigh syndrome

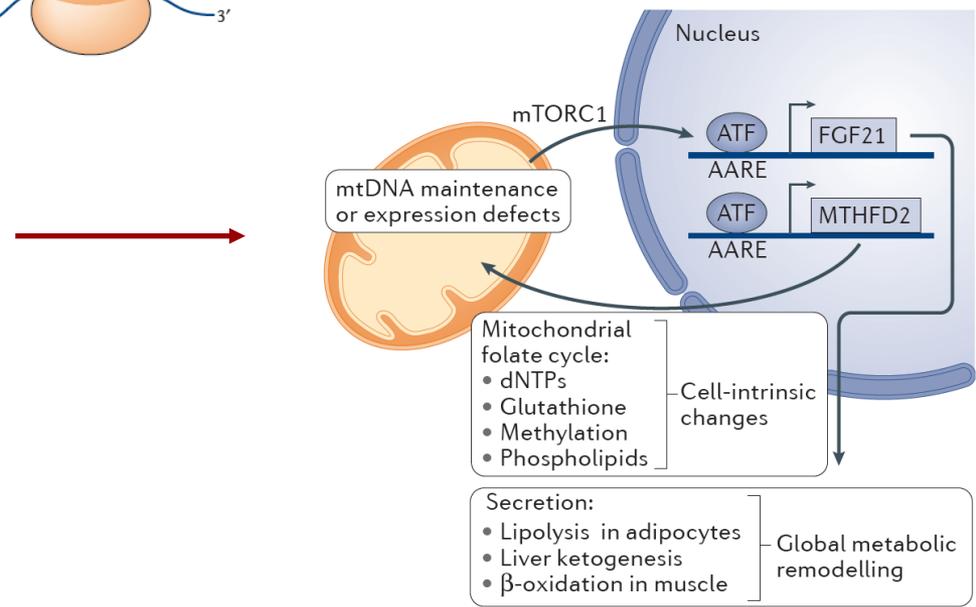
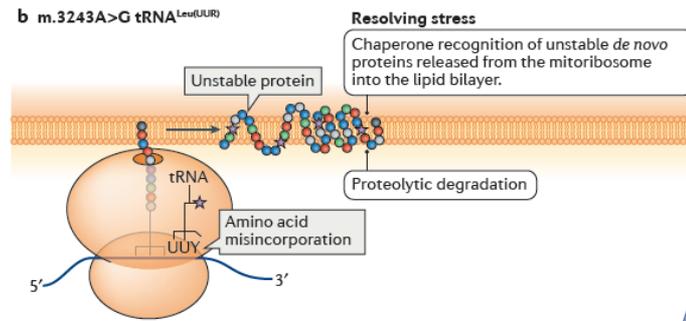
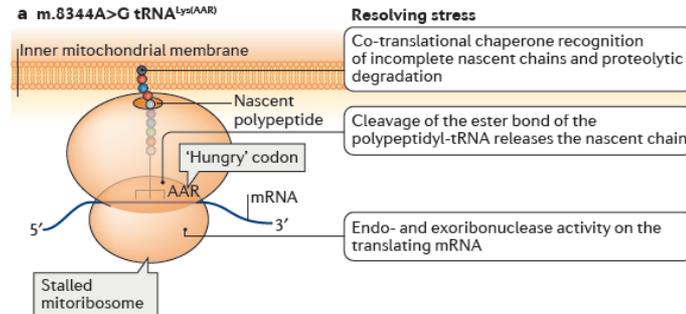
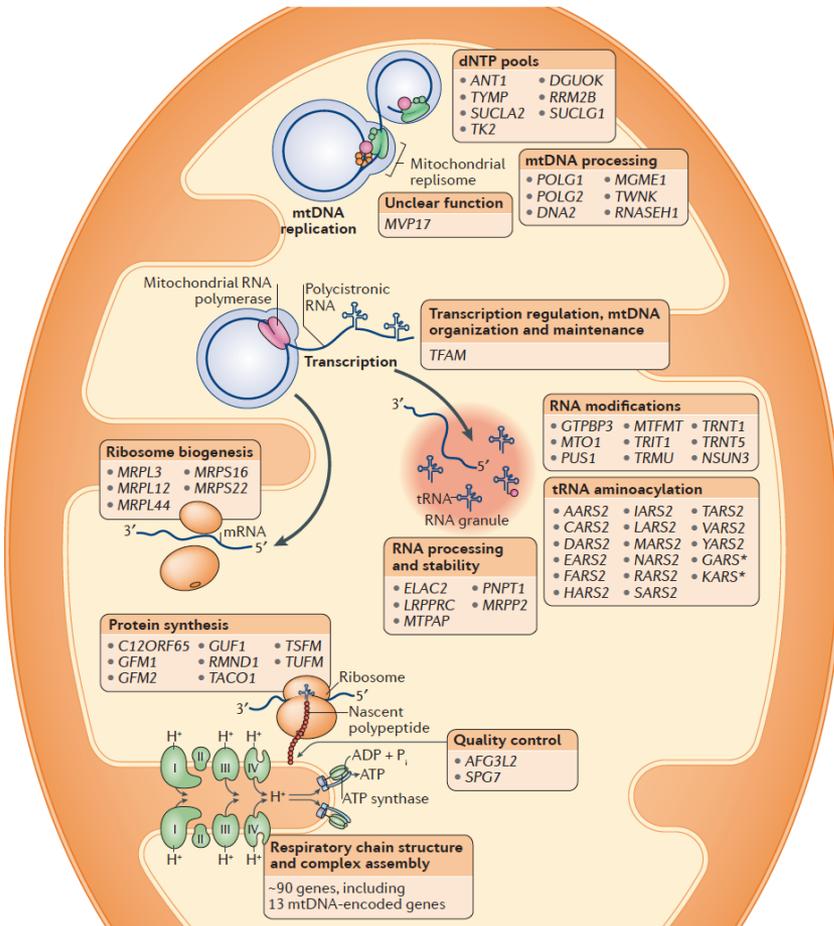
Gizem Inak, Agnieszka Rybak-Wolf, ... Alessandro Prigione [+ Show authors](#)

*Nature Communications* 12, Article number: 1929 (2021) [Cite this article](#)



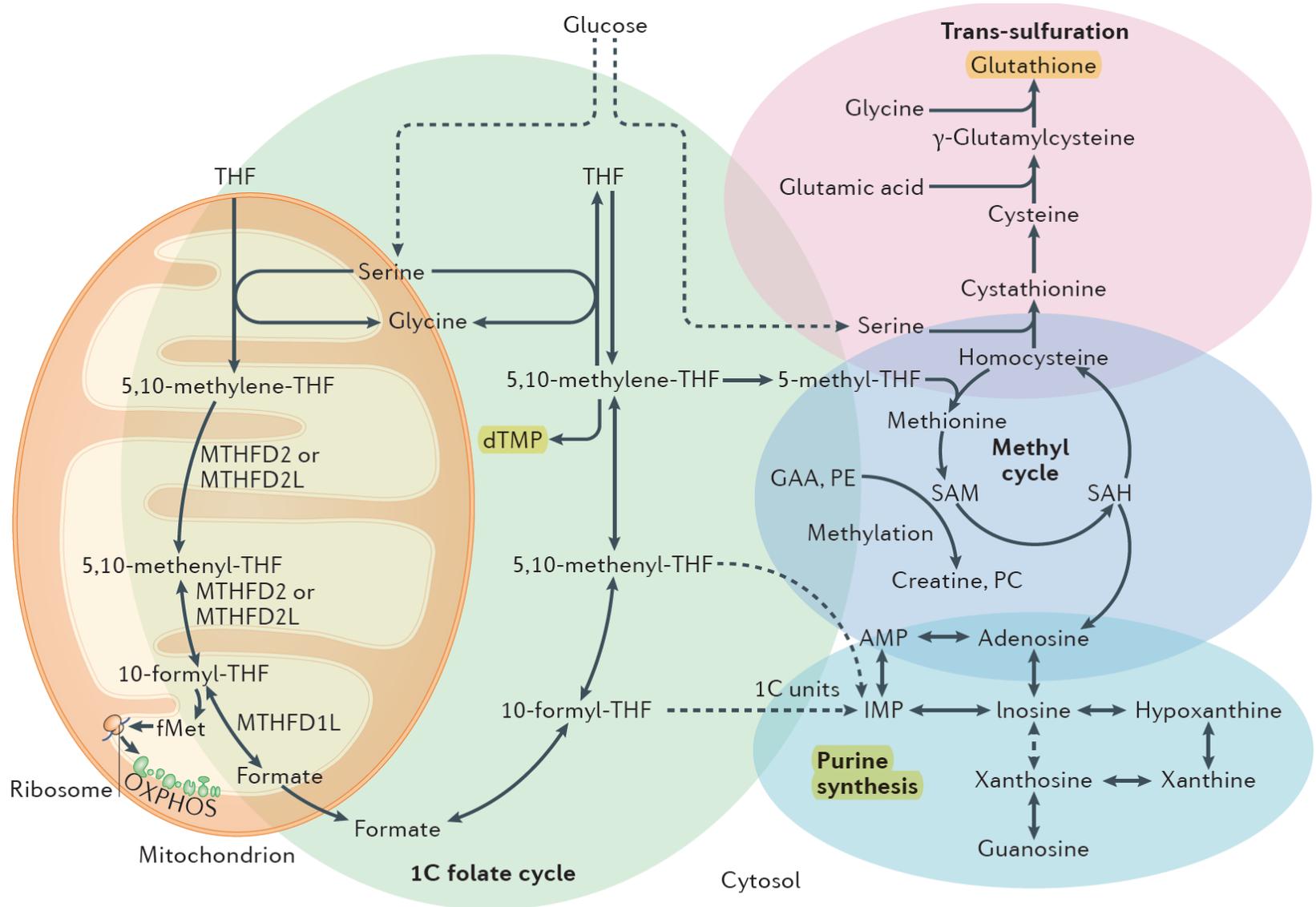
### Mitochondrial diseases: the contribution of organelle stress responses to pathology

Anu Suomalainen<sup>1-3</sup> and Brendan J. Battersby<sup>4</sup>



# Mitochondrial Diseases

## Pathogenesis



dTMP, deoxythymidine monophosphate

# Mitochondrial Diseases

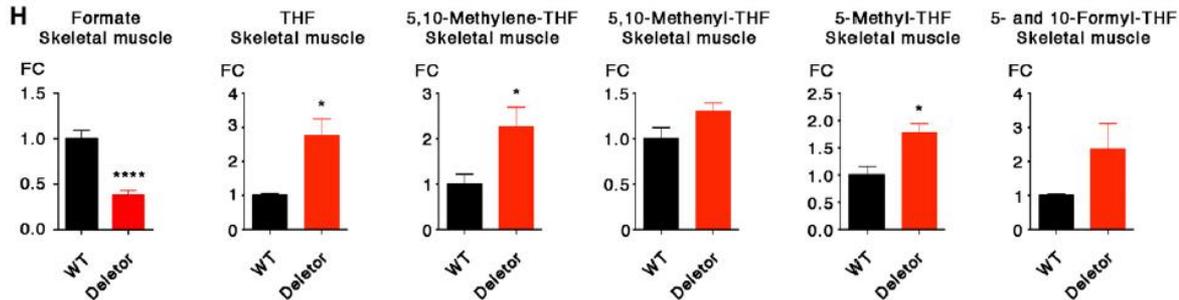
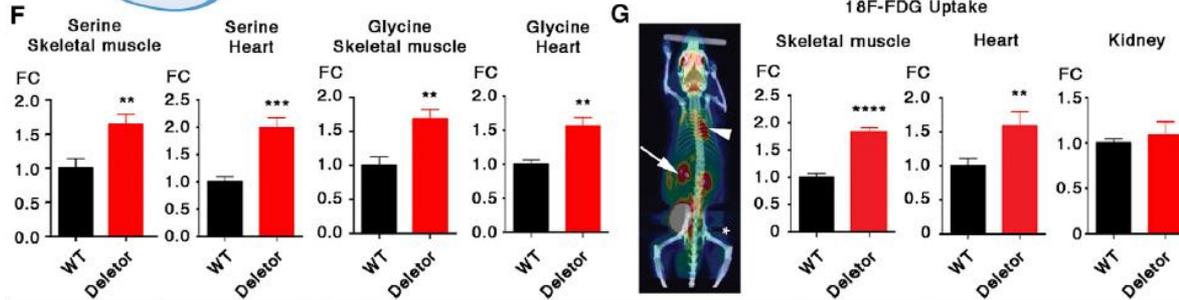
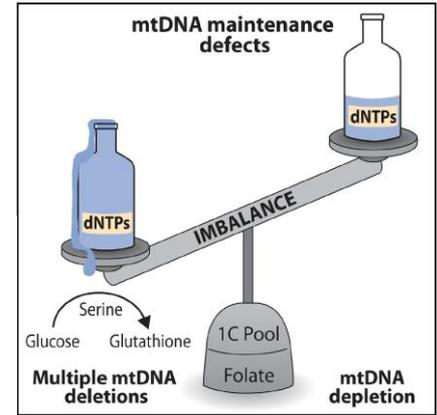
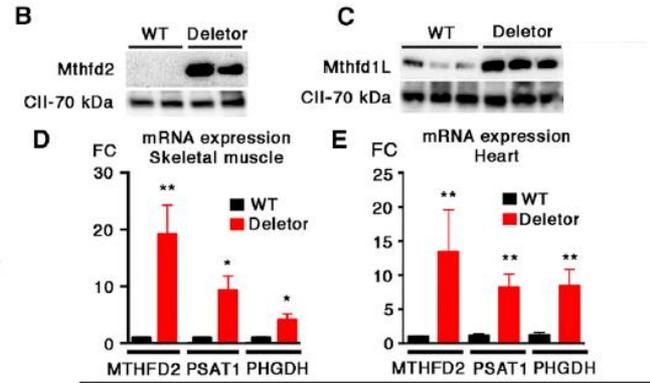
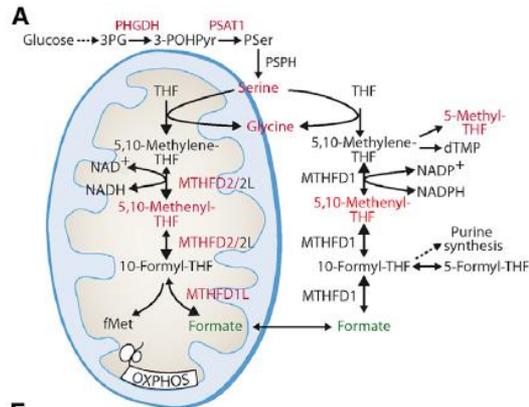
## Pathogenesis



Cell Metabolism 23, 635–648, April 12, 2016

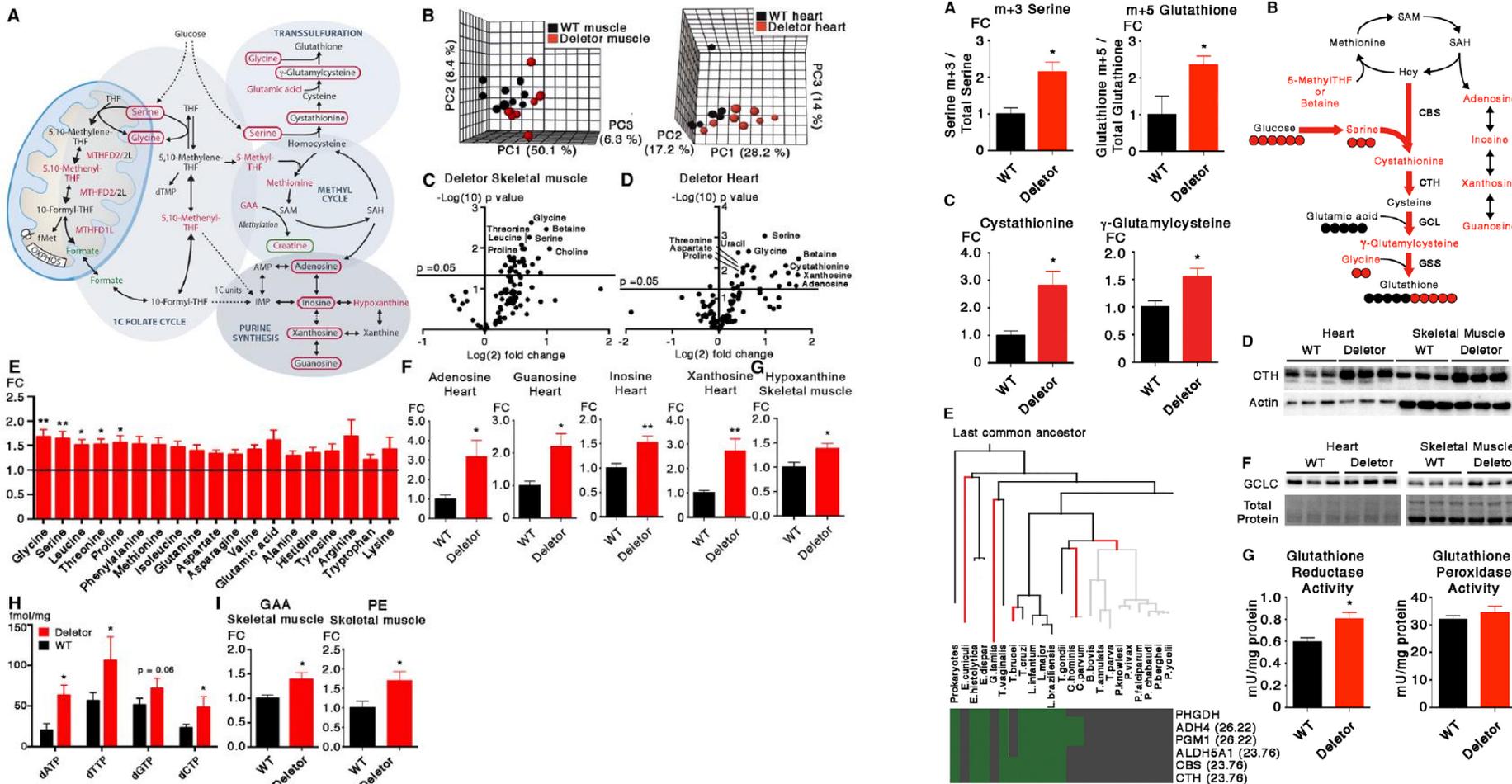
### Mitochondrial DNA Replication Defects Disturb Cellular dNTP Pools and Remodel One-Carbon Metabolism

Joni Nikkanen,<sup>1</sup> Saara Forsström,<sup>1</sup> Liliya Euro,<sup>1</sup> Ilse Paetau,<sup>1</sup> Rebecca A. Kohnz,<sup>2</sup> Liya Wang,<sup>3</sup> Dmitri Chilov,<sup>1</sup> Jenni Viinamäki,<sup>4</sup> Anne Roivainen,<sup>5,6</sup> Päivi Marjamäki,<sup>6</sup> Heidi Liljenbäck,<sup>5,6</sup> Sofia Ahola,<sup>1</sup> Jana Buzkova,<sup>1</sup> Mügen Terzioğlu,<sup>1</sup> Nahid A. Khan,<sup>1</sup> Sini Pimes-Karhu,<sup>1</sup> Anders Paetau,<sup>7</sup> Tuula Lönnqvist,<sup>8</sup> Antti Sajantila,<sup>4</sup> Pirjo Isohanni,<sup>1,6</sup> Henna Tyynismaa,<sup>1,10</sup> Daniel K. Nomura,<sup>2</sup> Brendan J. Battersby,<sup>1</sup> Vidya Velagapudi,<sup>11</sup> Christopher J. Carroll,<sup>1,2</sup> and Anu Suomalainen<sup>1,9,12,\*</sup>



# Mitochondrial Diseases

## Pathogenesis



eLife 2016;5:e10575.

### Mitochondrial dysfunction remodels one-carbon metabolism in human cells

Xiaoyan Robert Bao<sup>1,2,3†</sup>, Shao-En Ong<sup>3†</sup>, Olga Goldberger<sup>1</sup>, Jun Peng<sup>1,3</sup>, Rohit Sharma<sup>1</sup>, Dawn A Thompson<sup>3</sup>, Scott B Vafai<sup>1,3</sup>, Andrew G Cox<sup>4</sup>, Eizo Marutani<sup>5</sup>, Fumito Ichinose<sup>5</sup>, Wolfram Goessling<sup>3,4</sup>, Aviv Regev<sup>3,6</sup>, Steven A Carr<sup>3</sup>, Clary B Clish<sup>3</sup>, Vamsi K Mootha<sup>1,2,3\*</sup>



Article

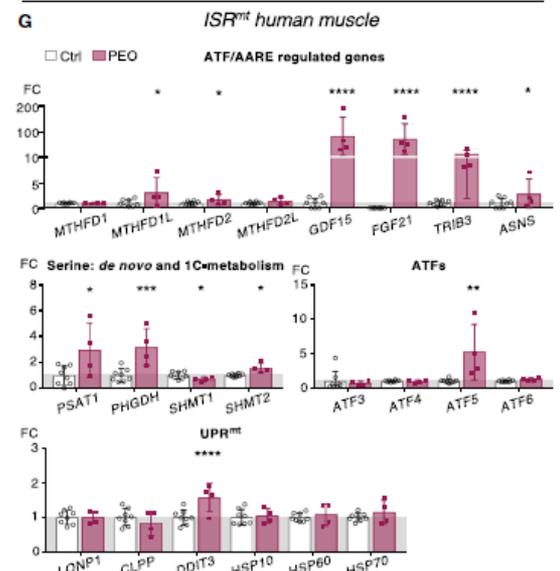
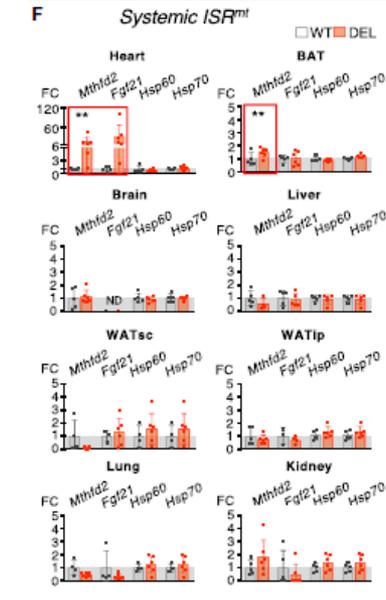
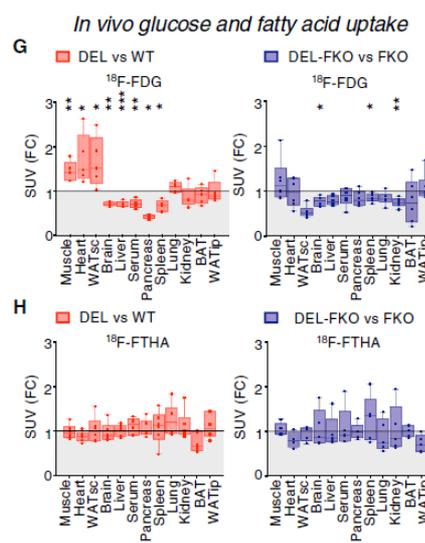
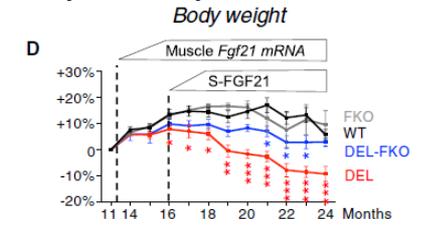
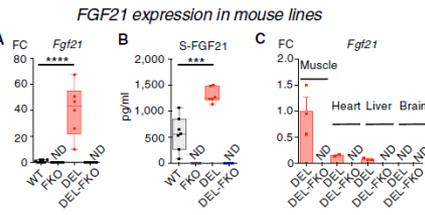
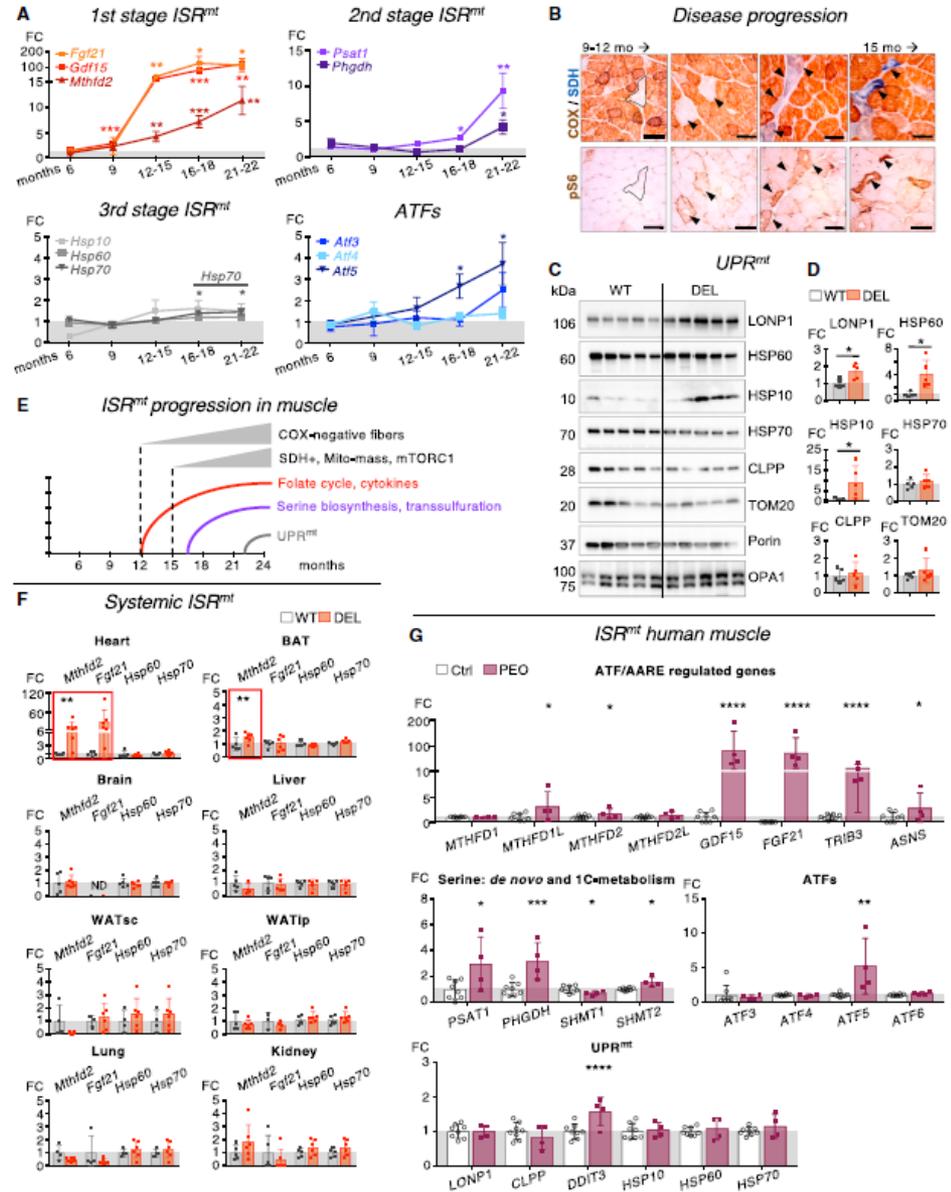
### Cell Metabolism

#### Fibroblast Growth Factor 21 Drives Dynamics of Local and Systemic Stress Responses in Mitochondrial Myopathy with mtDNA Deletions

Saara Forsström,<sup>1,11</sup> Christopher B. Jackson,<sup>1,11</sup> Christopher J. Carroll,<sup>1,12</sup> Mervi Kuronen,<sup>1</sup> Eija Pirinen,<sup>3</sup> Swagat Pradhan,<sup>1</sup> Anastasia Marmyleva,<sup>1</sup> Mari Auranen,<sup>4</sup> Iida-Marja Kleine,<sup>1</sup> Nahid A. Khan,<sup>1</sup> Anne Roivainen,<sup>5,6</sup> Paivi Marjamäki,<sup>9</sup> Heidi Liljenbäck,<sup>10</sup> Liya Wang,<sup>7</sup> Brendan J. Battersby,<sup>8</sup> Uwe Richter,<sup>9</sup> Vidya Velagapudi,<sup>9</sup> Joni Nikkanen,<sup>1</sup> Liliya Euro,<sup>1</sup> and Anu Suomalainen<sup>1,4,10,12\*</sup>

Mitochondrial stress responses are

- **only partially conserved in species**
- **not generalizable** between organisms or even mammalian cell types
- **FGF21** is a key mediator of metabolic remodeling and progression of ISR<sup>mt</sup> locally and systemically



# Mitochondrial Diseases

## Pathogenesis

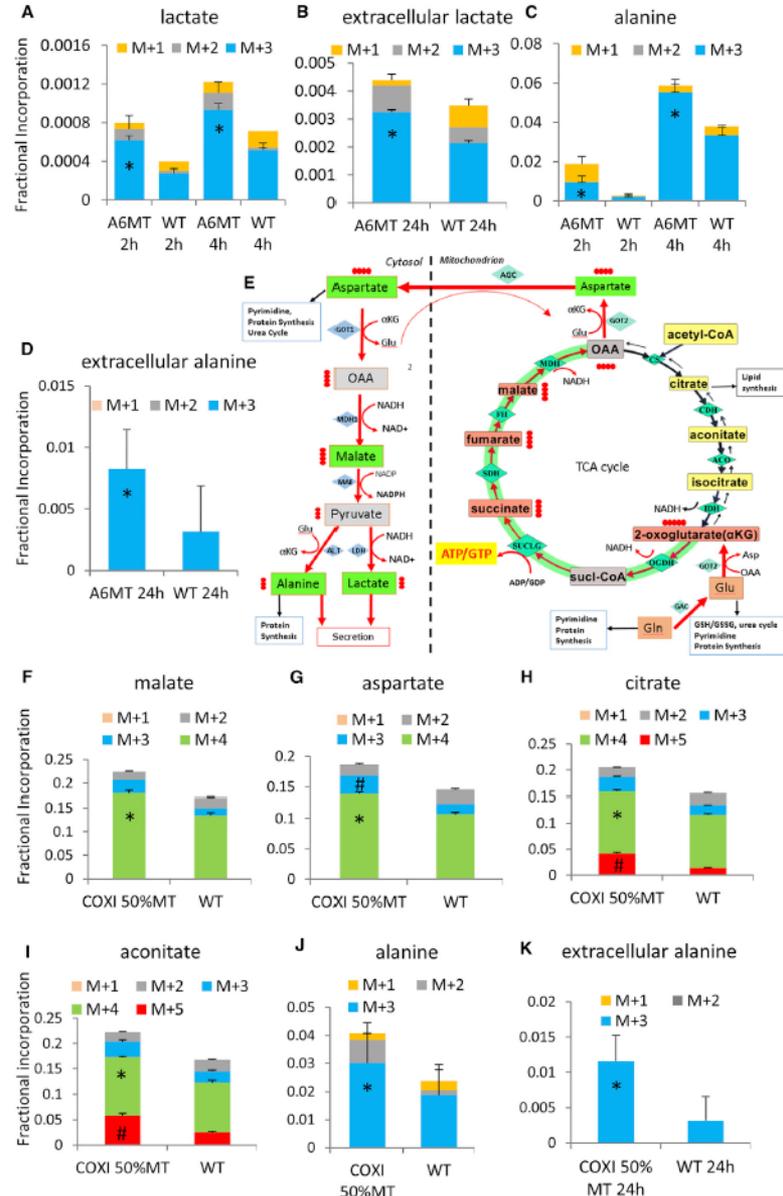
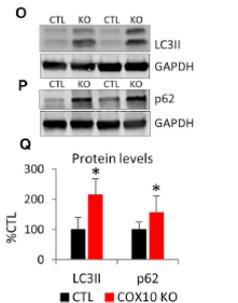
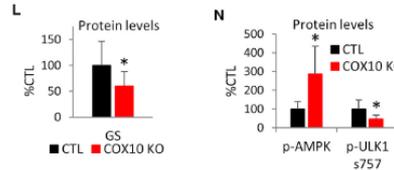
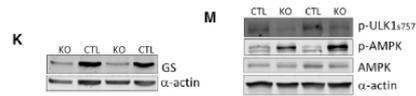
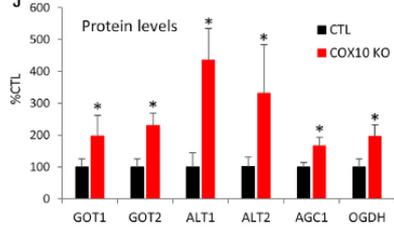
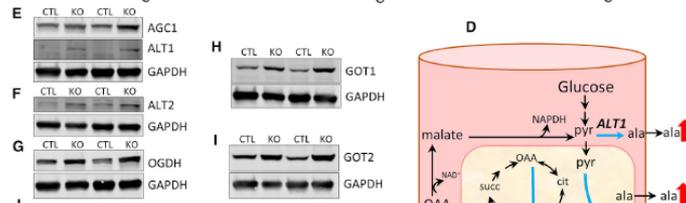
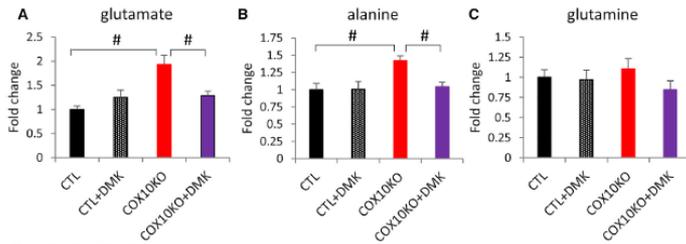


Article

### Cell Metabolism

## Rewiring of Glutamine Metabolism Is a Bioenergetic Adaptation of Human Cells with Mitochondrial DNA Mutations

Qiuying Chen,<sup>2,8</sup> Kathyne Kirk,<sup>1,8</sup> Yevgeniya I. Shurubor,<sup>1</sup> Dazhi Zhao,<sup>1</sup> Andrea J. Arreguin,<sup>1</sup> Ifrah Shahi,<sup>1</sup> Federica Valsecchi,<sup>1</sup> Guido Primiano,<sup>3</sup> Elizabeth L. Calder,<sup>4</sup> Valerio Carelli,<sup>5,6</sup> Travis T. Denton,<sup>7</sup> M. Flint Beal,<sup>1</sup> Steven S. Gross,<sup>2</sup> Giovanni Manfredi,<sup>1\*</sup> and Marielena D'Aurelio<sup>1,3,\*</sup>





*Lancet Neurol* 2011; 10: 806–18

## FGF-21 as a biomarker for muscle-manifesting mitochondrial respiratory chain deficiencies: a diagnostic study

ANN NEUROL 2015;78:814–823

## Growth Differentiation Factor 15 as a Useful Biomarker for Mitochondrial Disorders

**ANNALS**  
*of Clinical and Translational Neurology*

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RESEARCH ARTICLE

## Accuracy of FGF-21 and GDF-15 for the diagnosis of mitochondrial disorders: A meta-analysis

Yan Lin<sup>1</sup>, Kunqian Ji<sup>1</sup>, Xiaotian Ma<sup>2</sup>, Shuangwu Liu<sup>1</sup>, Wei Li<sup>1</sup>, Yuying Zhao<sup>1</sup> & Chuanzhu Yan<sup>1,2,3</sup> 

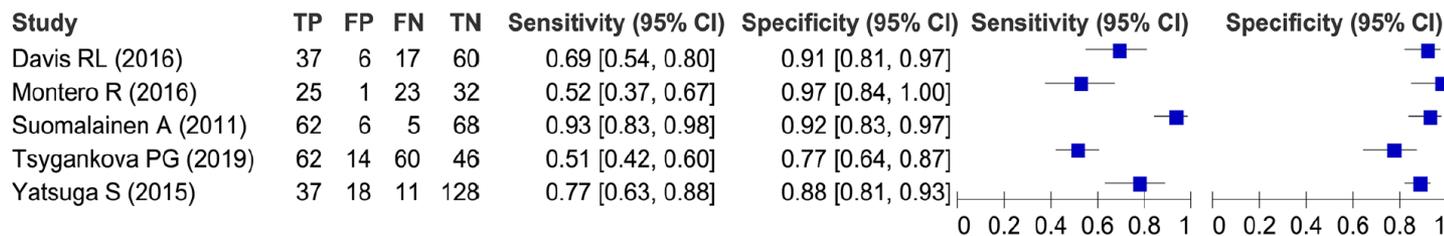
# Biomarkers



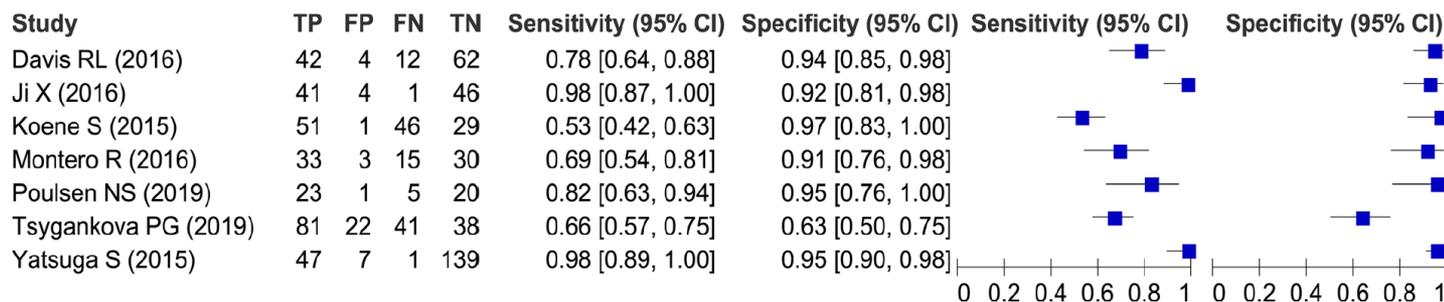
Estimates (95% CI)

	FGF-21	GDF-15
Number of included studies	5	7
Number of subjects	718	845
Sensitivity	0.71 (0.53, 0.84)	0.83 (0.65, 0.92)
Specificity	0.88 (0.82, 0.93)	0.92 (0.84, 0.96)
Positive likelihood ratio	6.10 (3.40, 10.70)	9.90 (4.60, 21.20)
Negative likelihood ratio	0.33 (0.19, 0.58)	0.19 (0.08, 0.42)
Diagnostic odds ratio	18.00 (6.00, 54.00)	52.00 (13.00, 205.00)
AUC	0.90 (0.87, 0.92)	0.94 (0.92, 0.96)

## A. FGF-21



## B. GDF-15



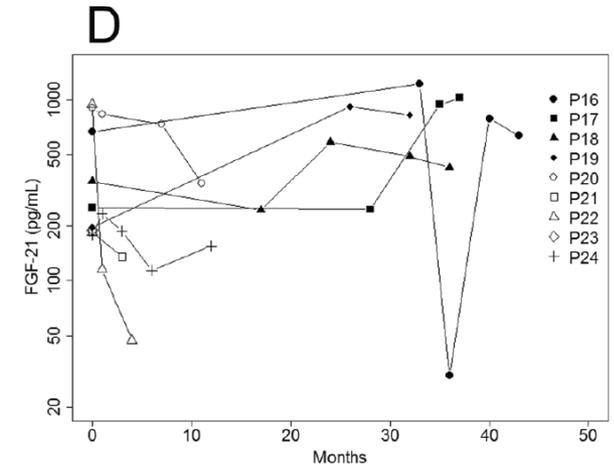
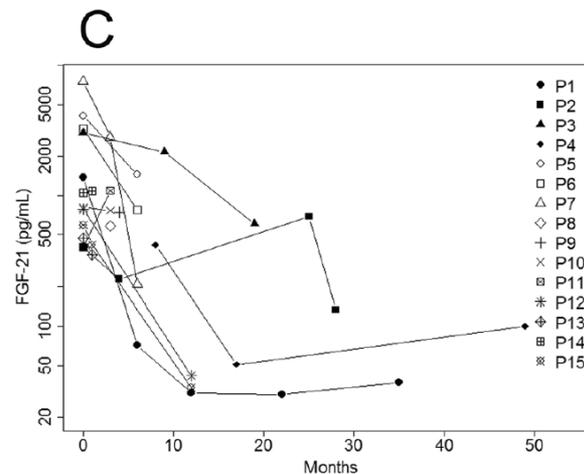
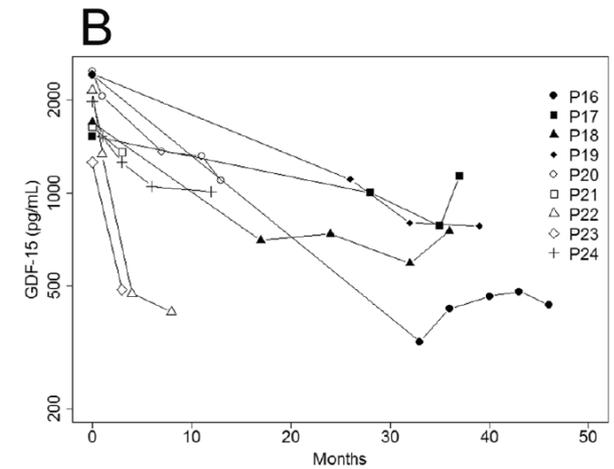
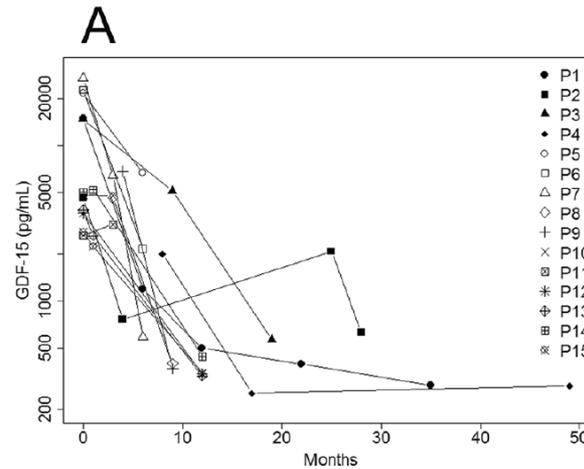


SCIENTIFIC REPORTS | (2020) 10:10111

## Growth Differentiation Factor 15 is a potential biomarker of therapeutic response for TK2 deficient myopathy

Cristina Dominguez-Gonzalez<sup>1,2,3</sup>, Carmen Badosa<sup>4</sup>, Marcos Madruga-Garrido<sup>5</sup>, Itxaso Marti<sup>6</sup>, Carmen Paradas<sup>7,8</sup>, Carlos Ortez<sup>4</sup>, Jordi Diaz-Manera<sup>3,9</sup>, Andres Berardo<sup>11</sup>, Jorge Alonso-Pérez<sup>9</sup>, Selena Trifunov<sup>4</sup>, Daniel Cuadras<sup>11</sup>, Susana G. Kalko<sup>12</sup>, Cora Blázquez Bermejo<sup>3,13</sup>, Yolanda Cámara<sup>3,13</sup>, Ramon Martí<sup>3,13</sup>, Fabiola Mavillard<sup>7,8</sup>, Miguel A. Martí Julio Montoya<sup>3,14</sup>, Eduardo Ruiz-Pesini<sup>3,14</sup>, Joan Villarroya<sup>15,16</sup>, Raquel Montero<sup>3,17</sup>, Francesc Villarroya<sup>15,16</sup>, Rafael Artuch<sup>3,17</sup>, Michio Hirano<sup>10</sup>, Andrés Nascimento<sup>3,4</sup> & Cecilia Jimenez-Mallebrera<sup>3,4,18</sup> 

- **24 patients** with TK2 deficiency
- Significant correlation between basal GDF-15 and **6MWT**
- During treatments with oral deoxynucleosides, **GDF15 significantly declined**





## Diagnostic value of serum biomarkers FGF21 and GDF15 compared to muscle sample in mitochondrial disease

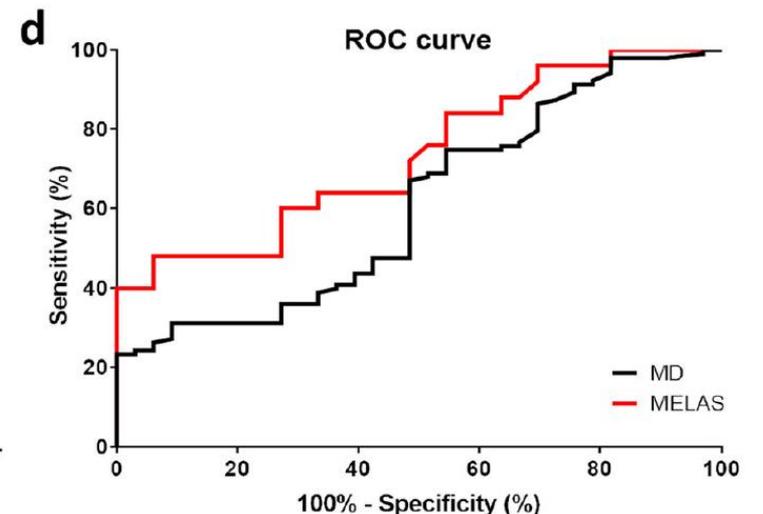
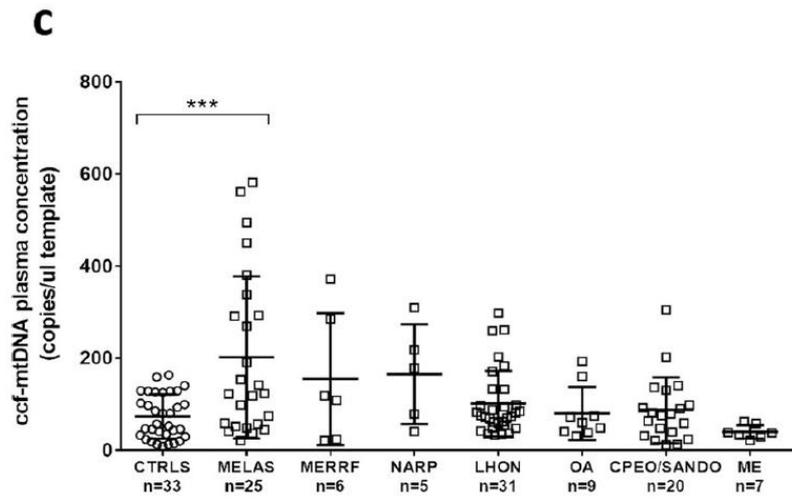
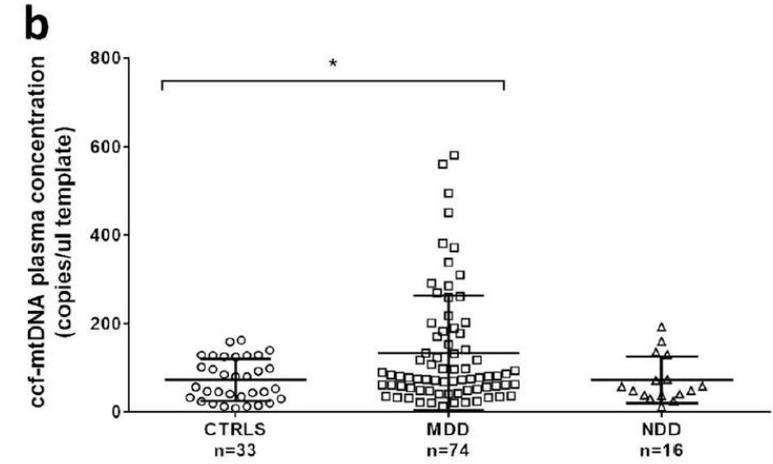
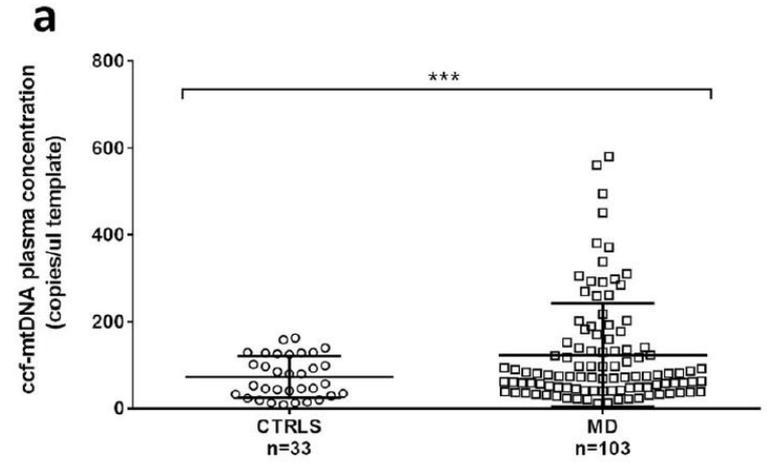
Jenni M. Lehtonen<sup>1</sup> | Mari Auranen<sup>1,2</sup> | Niklas Darin<sup>3</sup> | Kalliopi Sofou<sup>3</sup> |  
Laurence Bindoff<sup>4,5</sup> | Omar Hikmat<sup>4,6</sup> | Johanna Uusimaa<sup>7</sup> | Päivi Vieira<sup>7</sup> |  
Már Tulinius<sup>3</sup> | Tuula Lönnqvist<sup>8</sup> | Irenaeus F. de Coo<sup>9,10</sup> |  
Anu Suomalainen<sup>1,11</sup> | Pirjo Isohanni<sup>1,8</sup> 

- **194 suspected mitochondrial disorders** (88 children and 106 adults)
- **FGF21 and GDF15 identified 62%** of patients with genetically verified MD (**82% muscle manifesting**)
- Serum biomarkers pointed to mitochondrial disease in **69% patients who had no diagnostic findings in the muscle sample**
- **FGF21 and GDF15** was highly restricted to **muscle-manifesting mitochondrial diseases** caused by mitochondrial translation defect or mtDNA deletions
- FGF21 and GDF15 together as **first-line diagnostic tools in patients with muscle involvement**; they can be used in all patients with a suspicion of mitochondrial disease, although in pure encephalopathies biomarkers often remain normal
- Analysis of serum biomarkers complement but **do not entirely remove the need for muscle biopsy**
- Biomarkers might be useful in **evaluation of genetic findings**, for example, variants of unknown significance



## Expanding and validating the biomarkers for mitochondrial diseases

Alessandra Maresca<sup>1</sup> · Valentina Del Dotto<sup>2</sup> · Martina Romagnoli<sup>1</sup> · Chiara La Morgia<sup>1,2</sup> · Lidia Di Vito<sup>1</sup> · Mariantonietta Capristo<sup>1</sup> · Maria Lucia Valentino<sup>1,2</sup> · Valerio Carelli<sup>1,2</sup> · the ER-MITO Study Group



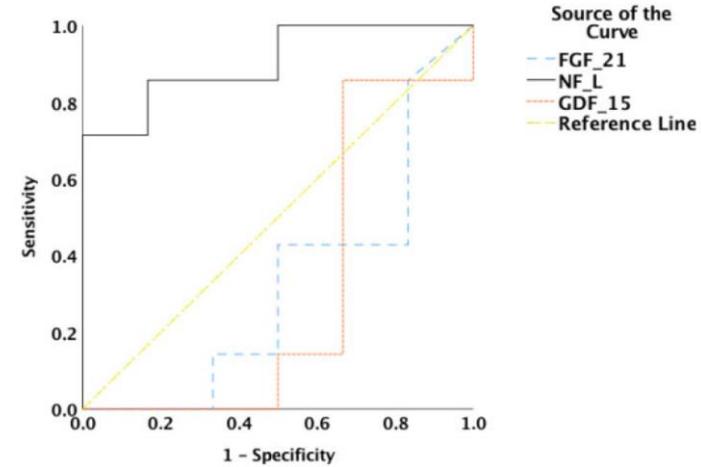
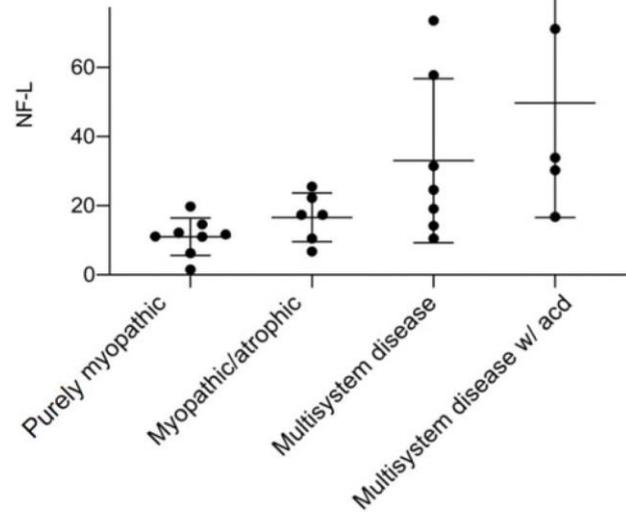
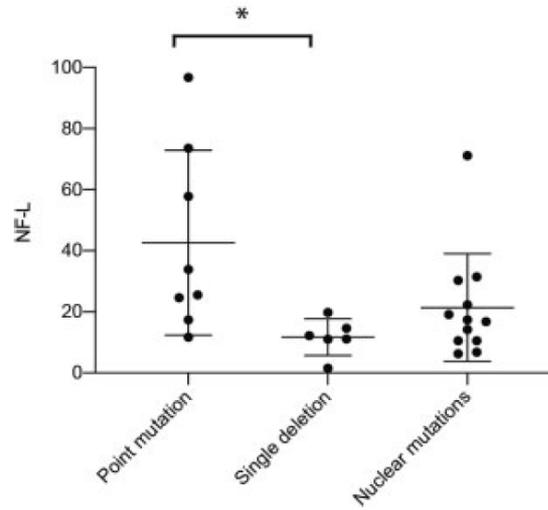


BRAIN COMMUNICATIONS 2021:

## Serum biomarkers in primary mitochondrial disorders

Kristin N. Varhaug,<sup>1,2</sup> Omar Hikmat,<sup>2,3</sup> Hanne Linda Nakkestad,<sup>1,4</sup> Christian A. Vedeler<sup>1,2,4</sup>  
 and Laurence A. Bindoff<sup>1,2,4</sup>

	MtDNA point mutations	N	Single deletions	Nuclear gene mutations	N
Genetic diagnose	8344 A>G	2		<i>POLG</i>	7
	3243 A>G	4		<i>TWINKL</i>	2
	13271 T>C	1		<i>PITRM1</i>	1
	5556 G>C	1		<i>DHX30</i>	1
				<i>ICSU</i>	1
Age (mean years)	58		43	47	
Gender (female %)	63 %		100 %	83 %	
Total		8	6		12

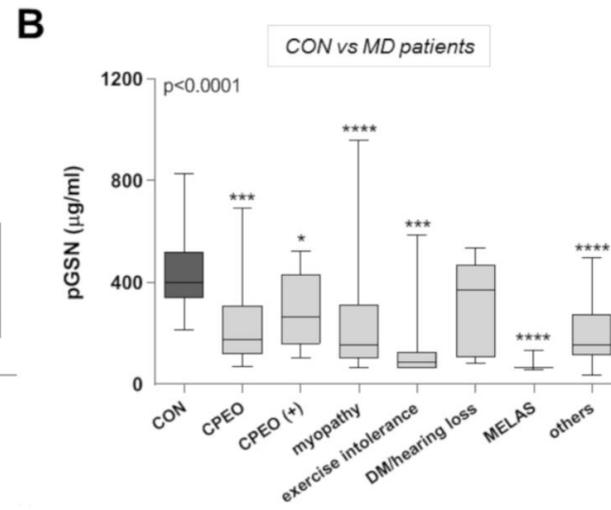
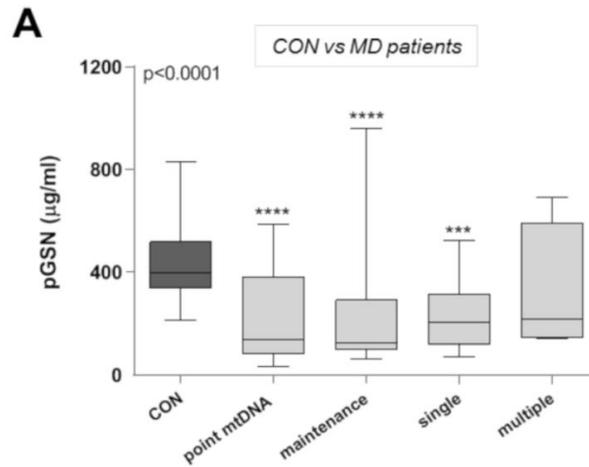
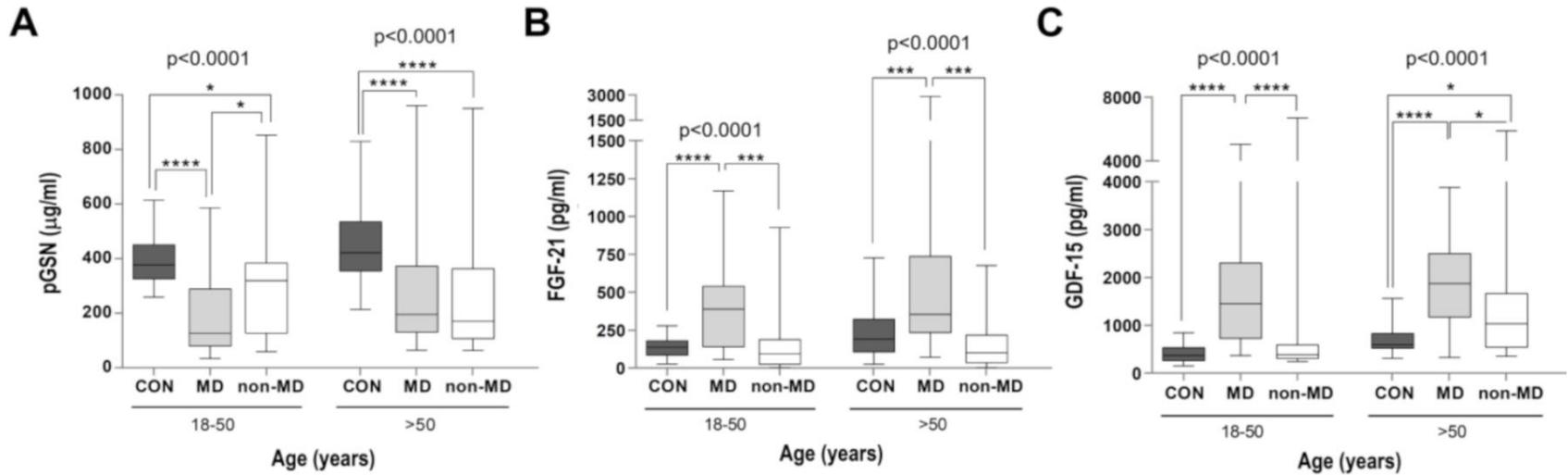




*Int. J. Mol. Sci.* **2021**, *22*, 6396.  
 Article

## Plasma Gelsolin Reinforces the Diagnostic Value of FGF-21 and GDF-15 for Mitochondrial Disorders

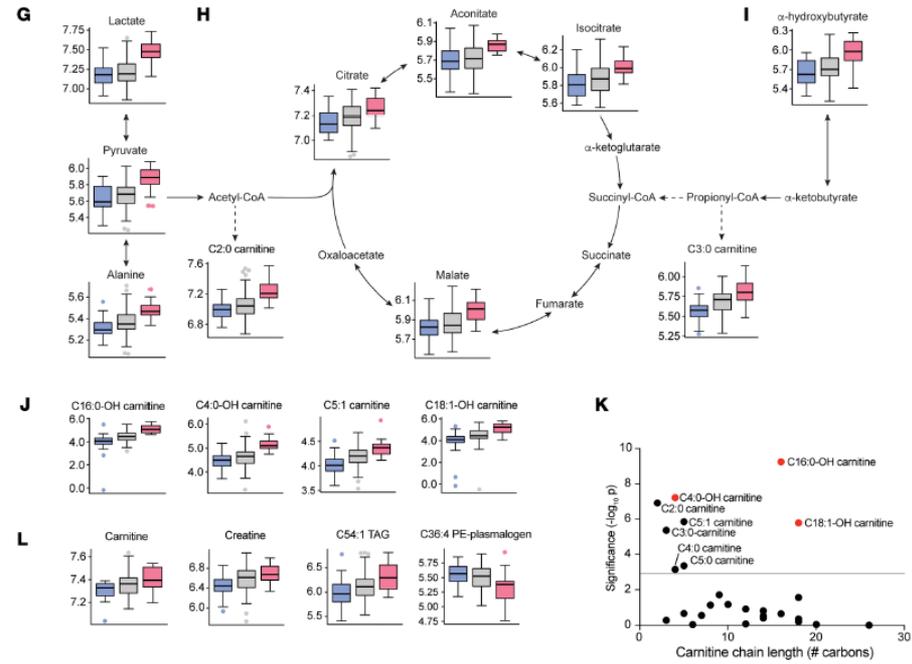
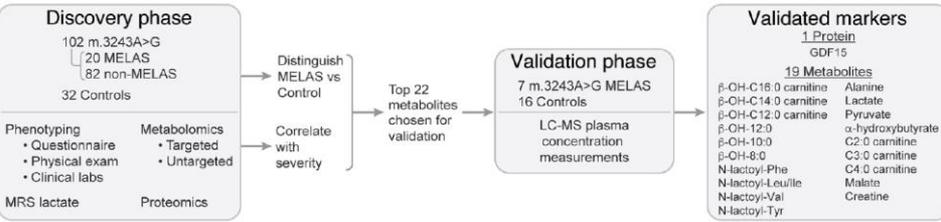
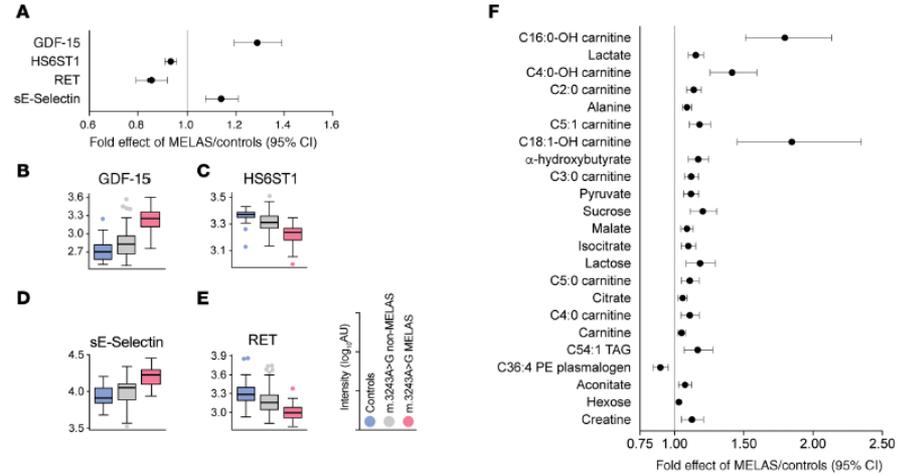
Ana Peñas <sup>1</sup>, Miguel Fernández-De la Torre <sup>1</sup>, Sara Laine-Menéndez <sup>1</sup>, David Lora <sup>2,3,4</sup>, María Illescas <sup>1</sup>, Alberto García-Bartolomé <sup>1</sup>, Montserrat Morales-Conejo <sup>1,5,6</sup>, Joaquín Arenas <sup>1,6</sup>, Miguel A. Martín <sup>1,6,7</sup>, María Morán <sup>1,6</sup>, Cristina Domínguez-González <sup>1,6,8,\*</sup> and Cristina Ugalde <sup>1,6,\*</sup>





## Circulating markers of NADH-reductive stress correlate with mitochondrial disease severity

Rohit Sharma,<sup>1,2,3,4</sup> Bryn Reinstadler,<sup>1,2,3,4</sup> Kristin Engelstad,<sup>5</sup> Owen S. Skinner,<sup>1,2,3,4</sup> Erin Stackowitz,<sup>5</sup> Ronald G. Haller,<sup>6,7</sup> Clary B. Clish,<sup>4</sup> Kerry Pierce,<sup>4</sup> Melissa A. Walker,<sup>1,2,3,4,8</sup> Robert Fryer,<sup>9</sup> Devin Oglesbee,<sup>9</sup> Xiangling Mao,<sup>10</sup> Dikoma C. Shungu,<sup>10</sup> Ashok Khatri,<sup>11</sup> Michio Hirano,<sup>5</sup> Darryl C. De Vivo,<sup>5</sup> and Vamsi K. Mootha<sup>1,2,3,4</sup>



**Comparison of 1310 proteins and 376 targeted metabolites in plasma of patients with MELAS and controls.**





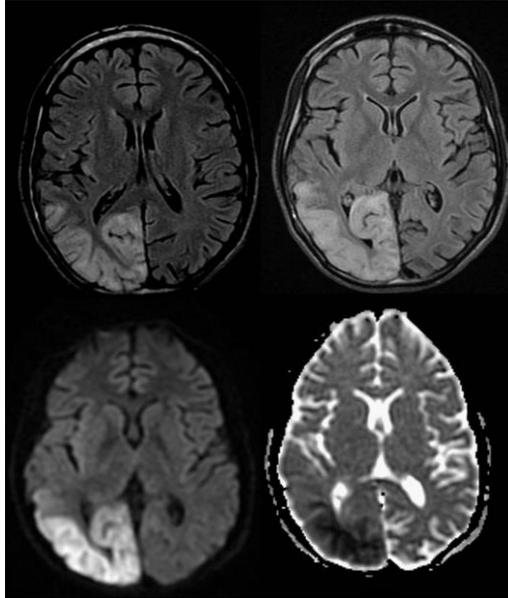
# Classical mitochondrial syndromes



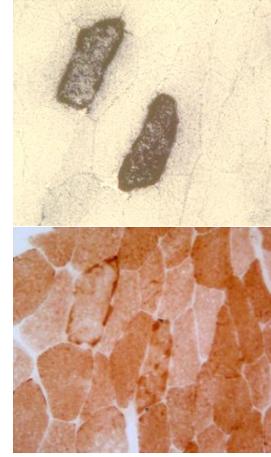
## PEO spectrum/Kearns-Sayre syndrome



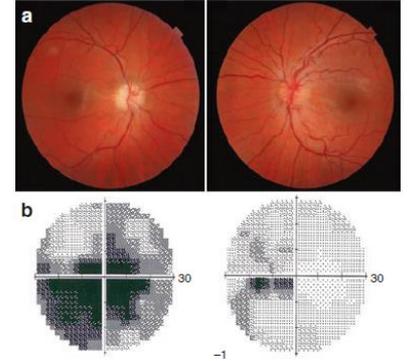
## MELAS



## MIDD

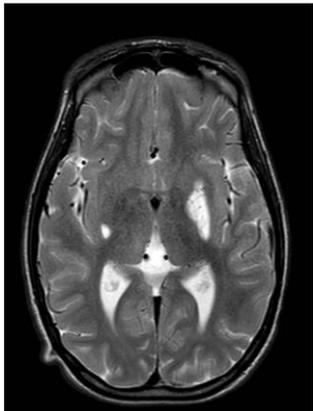


## LHON



Carelli V, et al. 2019

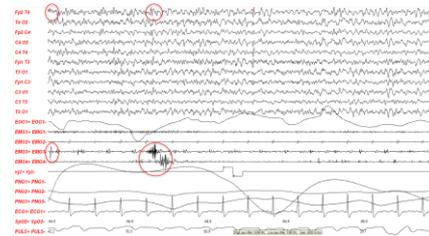
## Leigh Syndrome



## MNGIE



## MERRF



# Classical mitochondrial syndromes

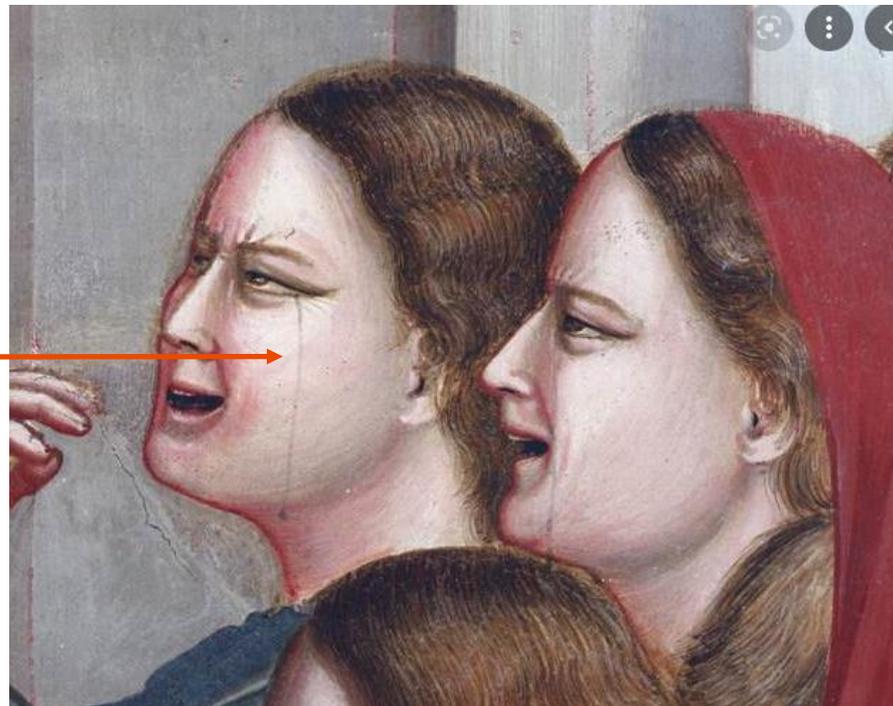


Laocoönte and His Sons, Vatican Museums

“The first time I was in Rome when I was very young, the Pope [Julius II] was told about **the discovery of some very beautiful statues in a vineyard near Santa Maria Maggiore** [on the Esquiline Hill]. The pope ordered one of his officers to run and tell **Giuliano da Sangallo** to go and see them... Since **Michelangelo Buonarroti** was always to be found at our house, my father having summoned him and having assigned him the commission of the Pope's tomb, my father wanted him to come along too... I had climbed down to where the statues were, when immediately **my father said, 'That is the Laocöon, which Pliny mentions.'** Then they dug the hole wider so that that they could pull the statue out. As soon as it was visible everyone started to draw, all the while discoursing on ancient things, chatting about the ones [ancient statues owned by the Medici] in Florence.”

Letter of Francesco da Sangallo, quoted in Leonard Barkan, *Unearthing the Past: Archaeology and Aesthetics in the Making of Renaissance Culture* (1999)

# Refined phenotypes



The Massacre of the Innocents, Scrovegni Chapel, Padova, Italy

# Refined phenotypes



thebmj | BMJ 2021;375:e066288 | doi: 10.1136/bmj-2021-066288

## Use of whole genome sequencing to determine genetic basis of suspected mitochondrial disorders: cohort study

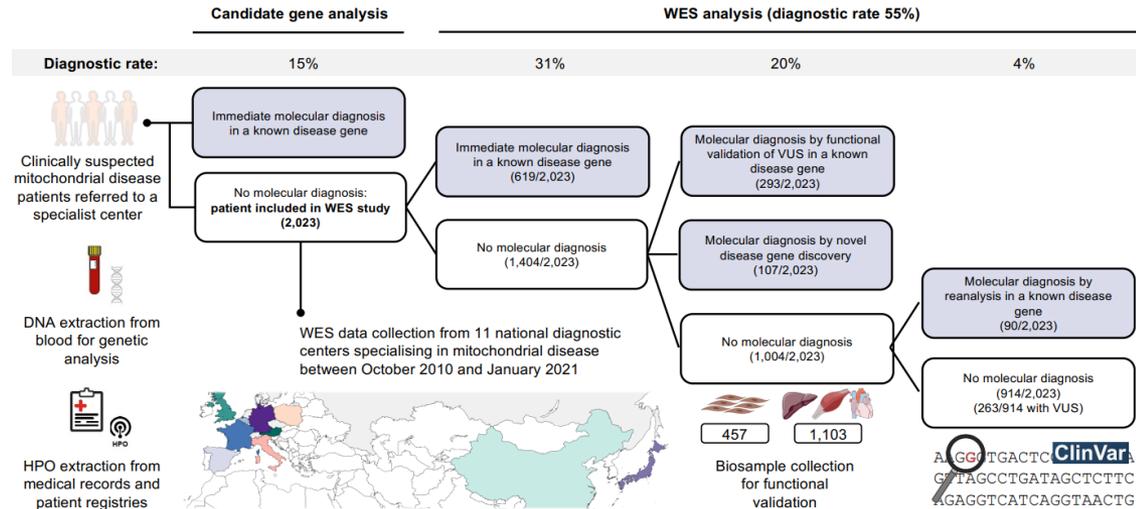
### Human Phenotype Ontology (HPO) terms in patients with mitochondrial diagnoses.

	MT-ATP6 (13)	TTC19 (29)	MT-ATP6 (12)	MRPS25 (11)	AFMT (2)	MRPL44 (10)	NDUFAB8 (20)	MT-ND3 (14)	FBXL4 (7)	HIBC8 (8)	MTOT1 (18)	PDPT1 (23)	SCO2 (26)	AARS2 (1)	ATAD3 duplication (4)	ATAD3 duplication (3)	SCO2 (27)	C12orf65 (13)	KARS1 (9)	PDHA1 (22)	PDPT1 (23)	EAARS2 (6)	POLG (24)	OPA1 (21)	NDUFAF5 (19)	RRM2B (25)	RRM2B (25)	MT-TE (16)	SLC25A4 (28)	TWINK (30)
Nervous	8	7	5	8	8	1	10	11	5	10	3	5	7	4	4	1	4	4	9	8	7	3	2	4	3					
Musculoskeletal	2	1	2	3	4	1	1	1	1	1	1	2	2	1					1	1	1	1	1		1	1	1	3	1	
Eye	1	3					1	3	1		1	1																		
Metabolism	1	2	1	2	1	2	3	1	2	3	3	2	1	1	2	2	1	1	2	1	1	1						3	1	
Cellular			2				2	2	1	1	2	2	1					1	1	1								3		
Growth	2		1	1	2	1								1	1					1	1									
Cardiovascular	1					2	1			1						1	1	1		1										
Digestive	2	1					1		1																					
Ear			1				1	1											1											
Head or neck	2				1								1																	
Genitourinary	2			1			1																							
Integument	2									1																				
Constitutional	1	1		1																							1	1		
Prenatal or birth	1				1											1														
Endocrine			1	1							1	1																	1	
Limbs		1																												
Respiratory	2																													
Blood		1																												
Immune	2																													

## Diagnosing pediatric mitochondrial disease: lessons from 2,000 exomes

Sarah L. Stenton, Masaru Shimura, Dorota Piekutowska-Abramczuk, Peter Freisinger, Felix Distelmaier, Johannes A. Mayr, Christine Makowski, Boriana Büchner, Bader Alhaddad, Charlotte L. Alston, Anna Ardissonne, Rui Ban, Ivo Barić, Riccardo Berutti, Theresa Brunet, Elzbieta Ciara, Dasha Deen, Julien Gagneur, Daniele Ghezzi, Mirjana Gusic, Tobias B. Haack, Maja Hempel, Ralf A. Husain, Daniela Karall, Stefan Kölker, Urania Kotzaeridou, Thomas Klopstock, Robert Kopajtich, Vassiliki Konstantopoulou, Steffen Liez, Dominic Lenz, Albert Z. Lim, Hanna Mandel, Robert McFarland, Wolfgang Müller-Felber, Gerard Muñoz-Pujol, Akira Ohtake, Yasushi Okazaki, Rikke Olsen, Ewa Pronicka, Angela Pyle, Antonia Ribes, Dariusz Rokicki, René Santer, Manuel Schiff, Markus Schuelke, Dmitrii Smirnov, Wolfgang Sperl, Tim Strom, Frederic Tort, Polina Tsygankova, Rudy van Coster, Patrick Verlooy, Jürgen-Christoph von Kleist-Retzow, Ekkehard Wilichowski, Tekla Wolstein, Manting Xu, Vicente Yépez, Michael Zech, Saskia Wortmann, Matias Wagner, Costanza Lamperti, Robert W. Taylor, Fang Fang, Agnès Rötig, Kei Murayama, Thomas Meitinger, Holger Prokisch

doi: <https://doi.org/10.1101/2021.06.21.21259171>



# Refined phenotypes



## MitoPhen database: a human phenotype ontology-based approach to identify mitochondrial DNA diseases

Thiloka E. Ratnaike<sup>1,2,3,†</sup>, Daniel Greene<sup>4,5,†</sup>, Wei Wei<sup>1,2</sup>, Alba Sanchis-Juan<sup>1</sup>, Katherine R. Schon<sup>1,2,6</sup>, Jelle van den Ameel<sup>1,2</sup>, Lucy Raymond<sup>6</sup>, Rita Horvath<sup>1,2</sup>, Ernest Turro<sup>7,†</sup> and Patrick F. Chinnery<sup>1,2,7,†</sup>

- 89 mtDNA variants, spanning 27 genes
- 676/1352 publications
- Data from 6688 individuals in 1424 families



## The MitoPhen Database 1.7

Ratnaike, Greene et al. (2021), Nucleic Acids Research.



[Download database](#)

Select patients with variant

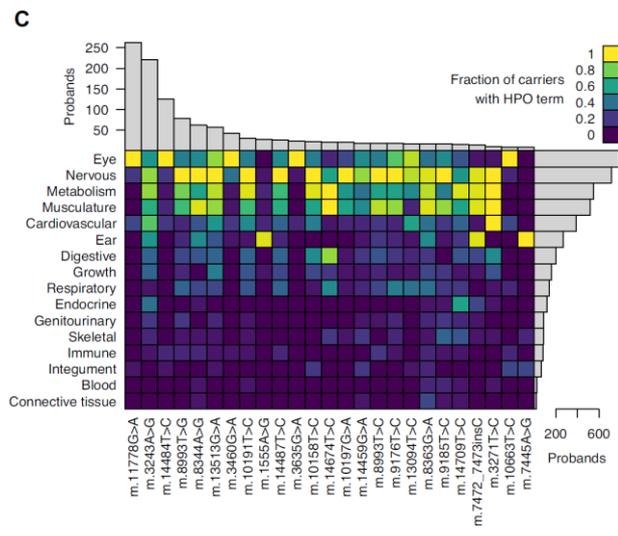
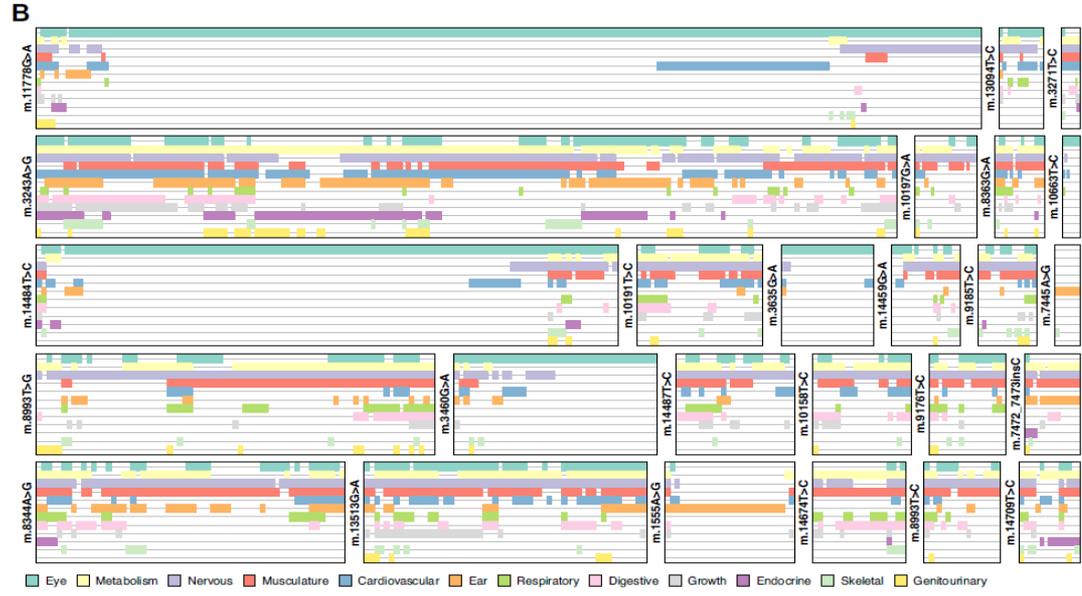
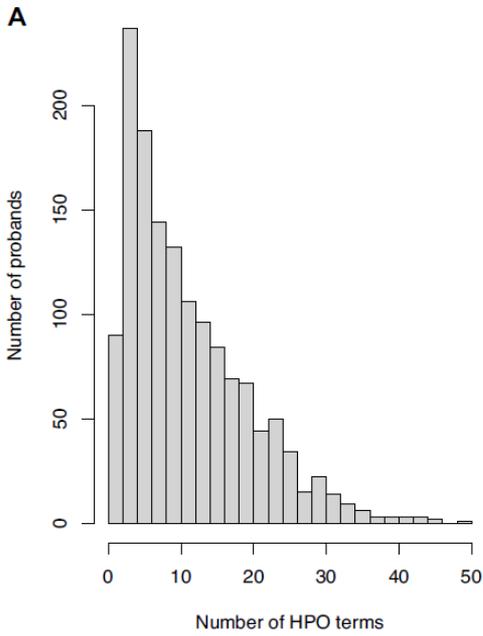
Select patients by PubMed ID

Select patients with  HPO terms:  
No terms selected

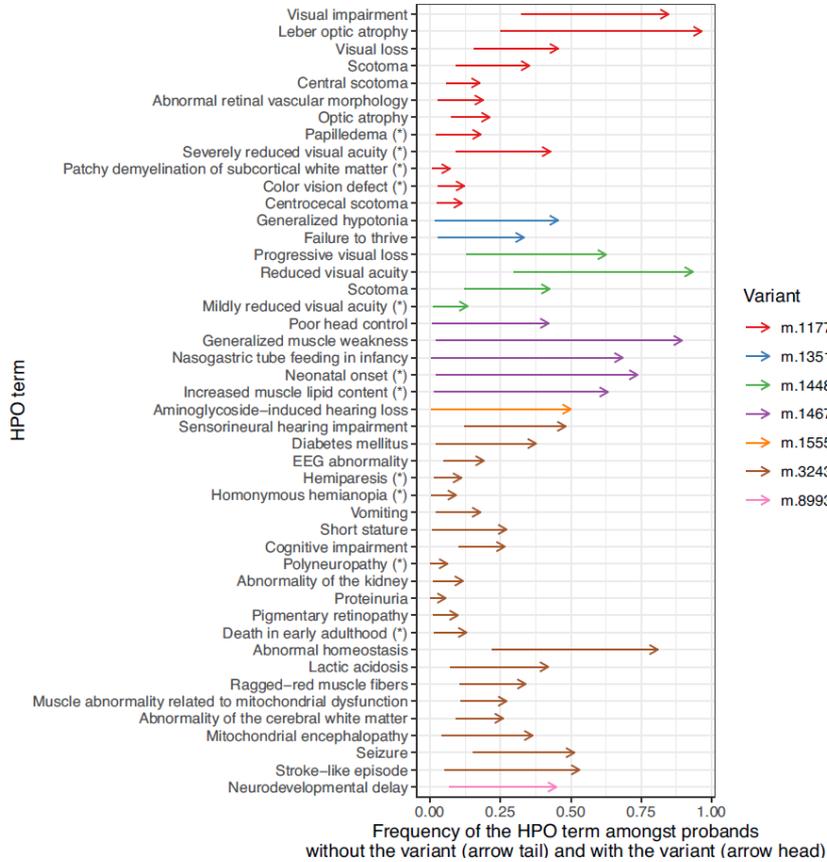
# Refined phenotypes



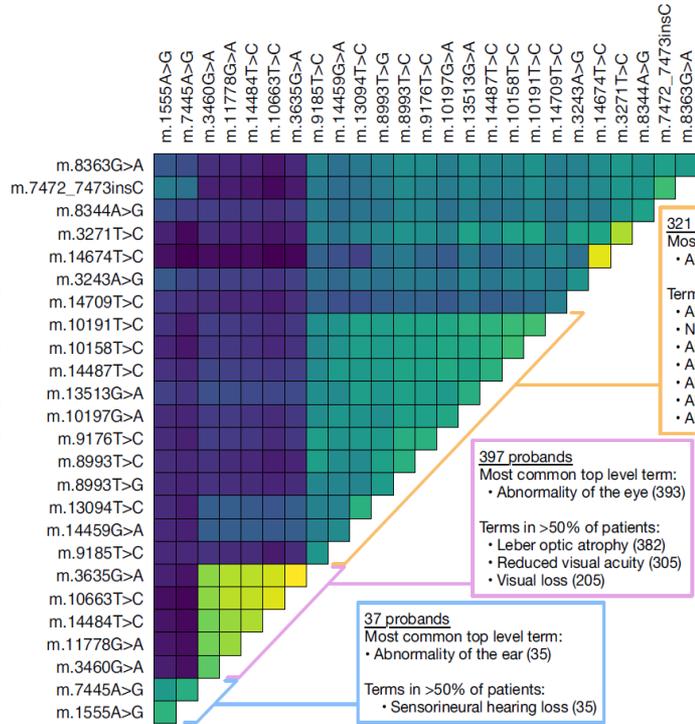
- The **mean number of terms** per proband was **11.4**
- **HPO terms:** nervous system, musculature, metabolism, cardiovascular, ear and eye



# Refined phenotypes



- Variant**
- m.11778G:
  - m.13513G:
  - m.14484T:
  - m.14674T:
  - m.1555A>
  - m.3243A>
  - m.8993T>



**321 probands**  
Most common top level term:  
• Abnormal nervous system (315)

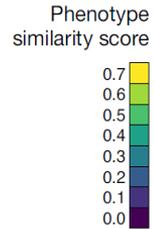
Terms in >50% of patients:  
• Abnormal muscle physiology (200)  
• Necrotizing encephalopathy (199)  
• Abnormality of the basal ganglia (176)  
• Abnormality of the eye (175)  
• Abnormal central motor function (168)  
• Abnormality of acid-base homeostasis (161)  
• Abnormality of movement (161)

**397 probands**  
Most common top level term:  
• Abnormality of the eye (393)

Terms in >50% of patients:  
• Leber optic atrophy (382)  
• Reduced visual acuity (305)  
• Visual loss (205)

**37 probands**  
Most common top level term:  
• Abnormality of the ear (35)

Terms in >50% of patients:  
• Sensorineural hearing loss (35)



# New Phenotypes

## LIG3



doi:10.1093/brain/awab056

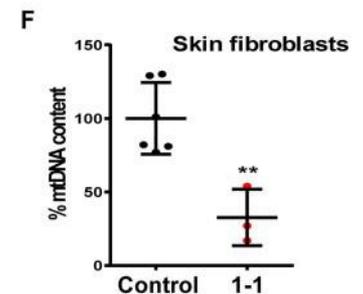
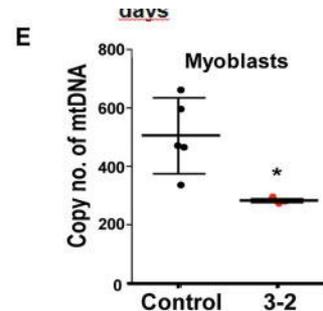
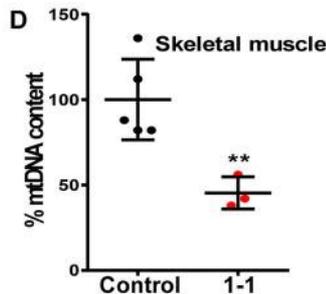
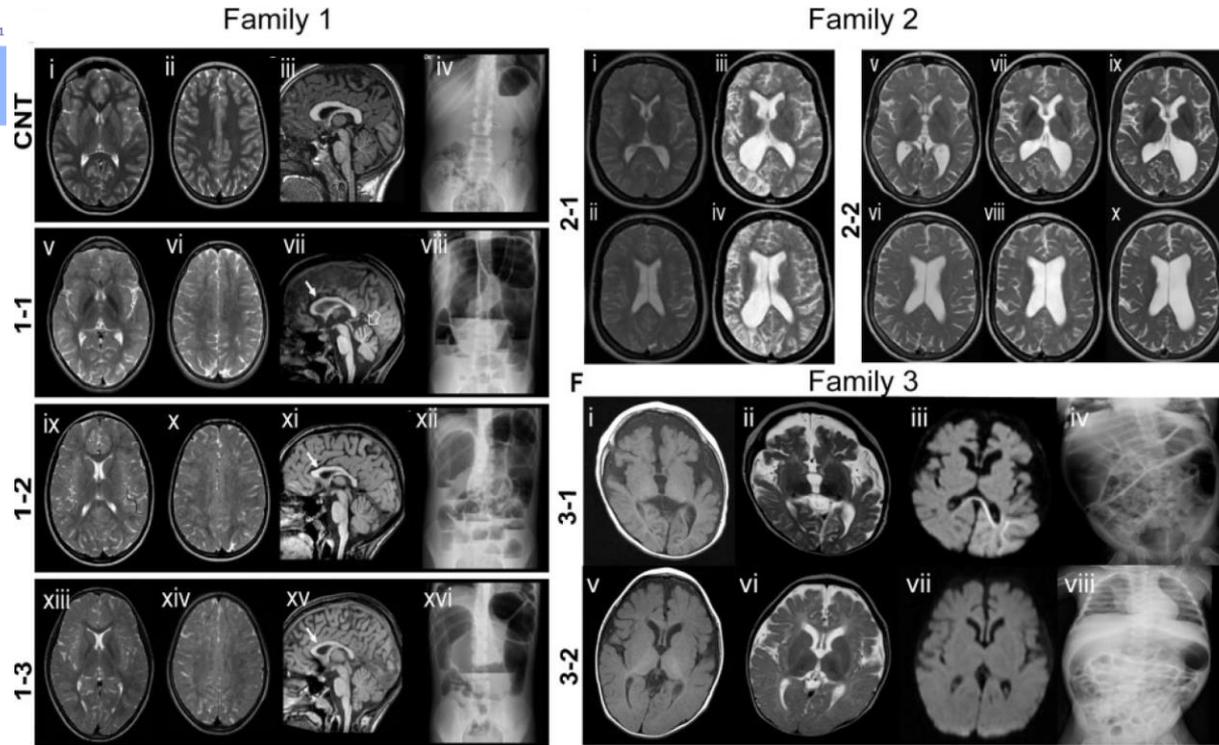
BRAIN 2021; 144; 1451-1466 | 1451

BRAIN  
ORIGINAL ARTICLE



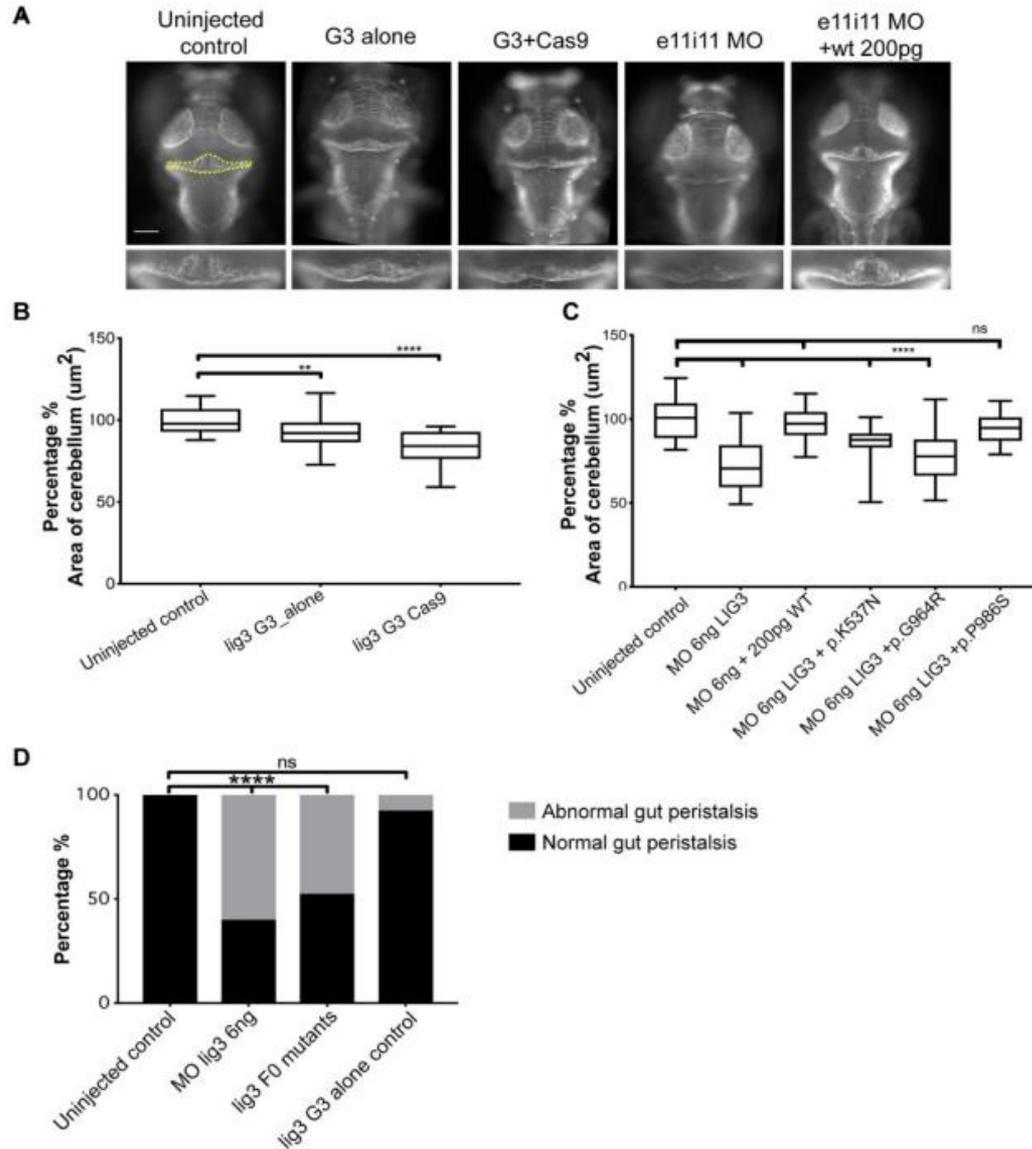
### Biallelic variants in *LIG3* cause a novel mitochondrial neurogastrointestinal encephalomyopathy

- *LIG3* is the only ligase responsible for mitochondrial DNA (mtDNA) replication and maintenance
- **Seven** affected individuals
- neurogastrointestinal encephalomyopathy characterized by CIPO, neurogenic bladder, myopathic changes, and neurological impairment with stroke-like episodes, epilepsy and leukoencephalopathy



# New Phenotypes

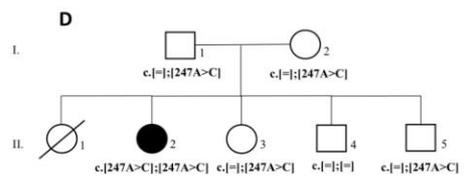
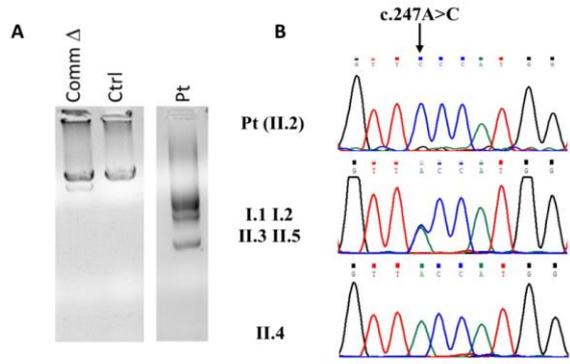
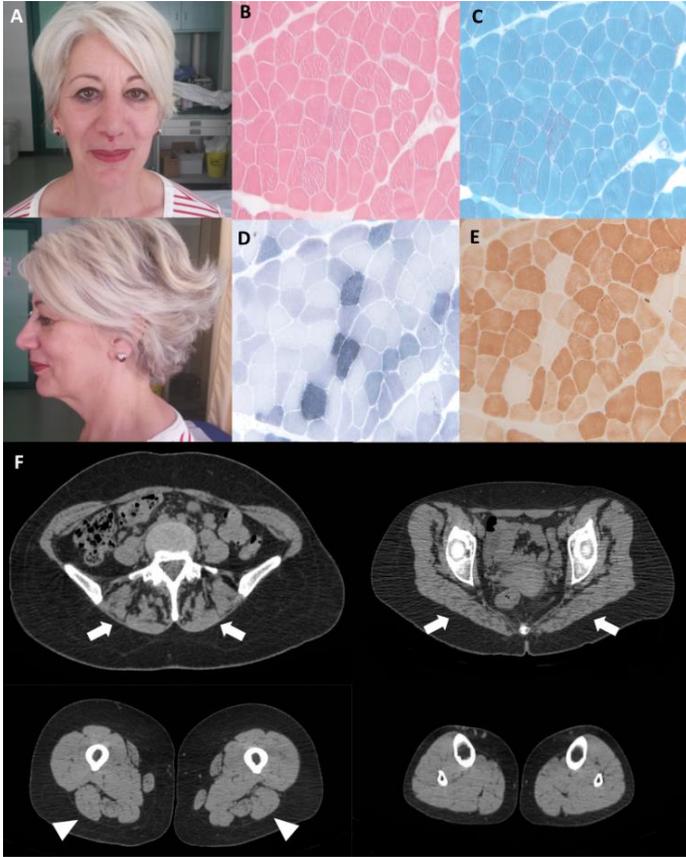
## LIG3



# New Phenotypes TOP3A

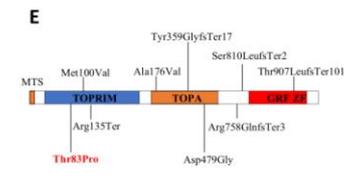


  
 Bambino Gesù  
 Ospedale Pediatrico  
**Rosalba Carrozzo**  
 Alessandra Torracco  
 Daniela Verrigni  
 Enrico Bertini



**C**

Zebrafish	DAAKGIAEIMSNGRSRRREGCSVYNIYEVEYVFLFGQITITNMTSVSGHLLALEFKAPFQ	100
Indian	DAAKGISEIMSNGRSRRREGHSKFNKIYEVEYVFLFGQITITNMTSVSGHLLGLEFKAPFQ	120
chicken	DAARGIADLLSNRMRREGFSKFNKIYEVEYVQVFGQITITNMTSVSGHLLAHDFKLPFR	105
Rabbit	DAAKGIADLLSGGRMRREGLSKFNKIYEFDYHLCGQITITNMTSVSGHLLAHDFQIQFR	104
Goat	DAAKGIADLLSGGRMRREGLSKFNKIYEFDYHLCGQITITNMTSVSGHLLAHDFQIQFR	103
Human	DAAKGIADLLSNRMRREGLSKFNKIYEFDYHLYGQITITNMTSVSGHLLAHDFQIQFR	103
House	DAAKGIADLLSNRMRREGLSKFNKIYEFDYHLYGQITITNMTSVSGHLLAHDFQIQFR	103



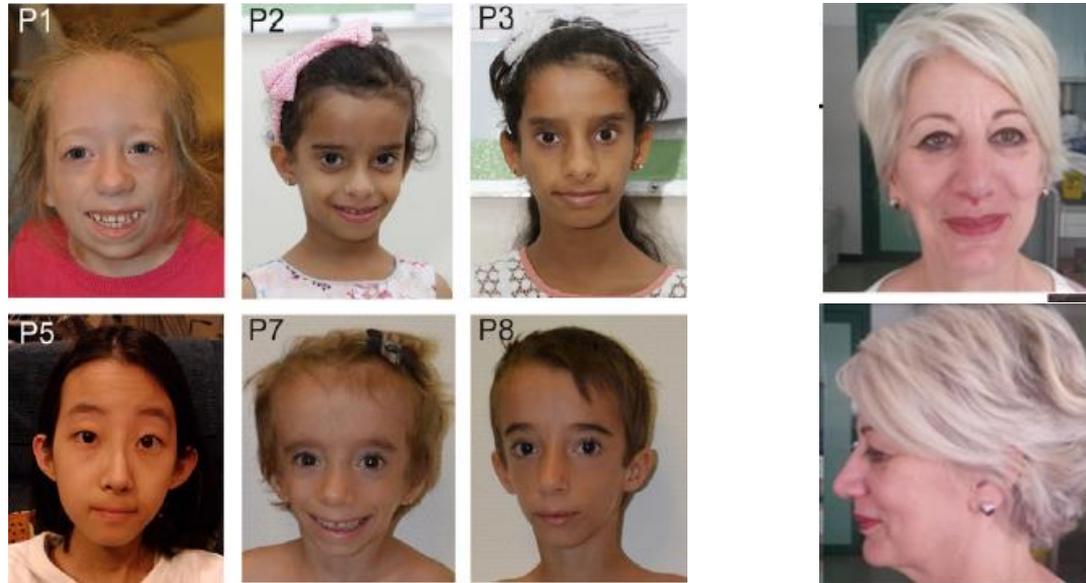
# New Phenotypes

## TOP3A



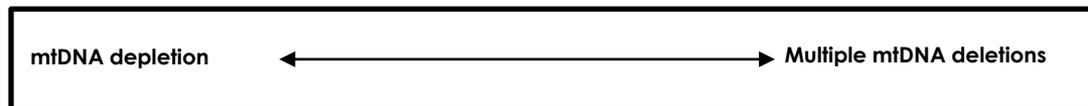
The American Journal of Human Genetics 103, 221–231, August 2, 2018 **ARTICLE**

Mutations in *TOP3A* Cause a Bloom Syndrome-like Disorder



Bloom syndrome-like disorder

PMM/PEO Plus



- **Similarities:** short stature, dilated cardiomyopathy, narrow face with prominent nose for paucity of subcutaneous fat, absence of malignancies
- **Differences:** a late onset of disease, no café'-au-lait macules

# Expanding phenotypes

## *Movement disorders*



Journal of Neurology  
https://doi.org/10.1007/s00415-021-10697-1

ORIGINAL COMMUNICATION



### Adult-onset mitochondrial movement disorders: a national picture from the Italian Network

V. Montano<sup>1</sup> · D. Orsucci<sup>2</sup> · V. Carelli<sup>3,4,5</sup> · C. La Morgia<sup>3,4</sup> · M. L. Valentino<sup>3,4,5</sup> · C. Lamperti<sup>6</sup> · S. Marchet<sup>6</sup> · O. Musumeci<sup>7</sup> · A. Toscano<sup>7</sup> · G. Primiano<sup>8,9</sup> · F. M. Santorelli<sup>10</sup> · C. Ticci<sup>10</sup> · M. Filosto<sup>11</sup> · A. Rubegni<sup>10</sup> · T. Mongini<sup>12</sup> · P. Tonin<sup>13</sup> · S. Servidei<sup>8,9</sup> · R. Ceravolo<sup>1</sup> · G. Siciliano<sup>1</sup> · Michelangelo Mancuso<sup>10</sup>

Journal of  
*Clinical Medicine*



Article

### Movement Disorders in Children with a Mitochondrial Disease: A Cross-Sectional Survey from the Nationwide Italian Collaborative Network of Mitochondrial Diseases

Chiara Ticci<sup>1</sup>, Daniele Orsucci<sup>2</sup>, Anna Ardisson<sup>3</sup>, Luca Bello<sup>4</sup>, Enrico Bertini<sup>5</sup>, Irene Bonato<sup>6</sup>, Claudio Bruno<sup>6</sup>, Valerio Carelli<sup>7,8</sup>, Daria Diodato<sup>5</sup>, Stefano Doccini<sup>10</sup>, Maria Alice Donati<sup>9</sup>, Claudia Dosi<sup>1</sup>, Massimiliano Filosto<sup>10</sup>, Chiara Fiorillo<sup>11</sup>, Chiara La Morgia<sup>7,12</sup>, Costanza Lamperti<sup>13</sup>, Silvia Marchet<sup>13</sup>, Diego Martinelli<sup>5</sup>, Carlo Minetti<sup>11</sup>, Maurizio Moggio<sup>14</sup>, Tiziana Enrica Mongini<sup>15</sup>, Vincenzo Montano<sup>16</sup>, Isabella Moroni<sup>3</sup>, Olimpia Musumeci<sup>17</sup>, Elia Pancheri<sup>18</sup>, Elena Pegoraro<sup>4</sup>, Guido Primiano<sup>19,20</sup>, Elena Procopio<sup>9</sup>, Anna Rubegni<sup>1</sup>, Roberta Scalise<sup>1,21</sup>, Monica Sciacco<sup>14</sup>, Serenella Servidei<sup>19,20</sup>, Gabriele Siciliano<sup>16</sup>, Costanza Simoncini<sup>16</sup>, Deborah Tolomeo<sup>1</sup>, Paola Tonin<sup>18</sup>, Antonio Toscano<sup>17</sup>, Flavia Tubili<sup>9</sup>, Michelangelo Mancuso<sup>16</sup>, Roberta Battini<sup>1,16,\*</sup> and Filippo Maria Santorelli<sup>10</sup>



***POLG c.428C>T [Ala143Val], 2956T>G [Tyr986Asp]***

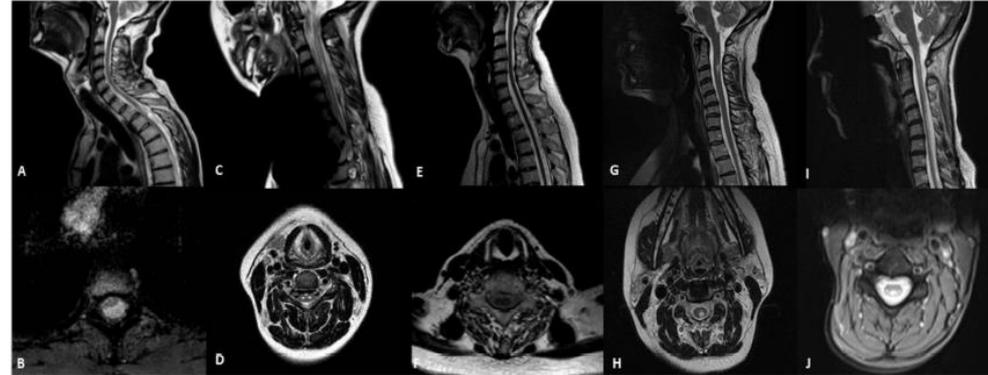


Communication

### Spinal Cord Involvement in Adult Mitochondrial Diseases: A Cohort Study

Guido Primiano <sup>1,2,\*</sup>, Paolo Mariotti <sup>1</sup>, Ida Turrini <sup>1</sup>, Cristina Sancricca <sup>1</sup>, Andrea Sabino <sup>2</sup>, Alessandra Torraco <sup>3</sup>, Rosalba Carrozzo <sup>3</sup> and Serenella Servidei <sup>1,2</sup>

- 9,8%, 5/51 patients



Neurological Sciences (2022) 43:2081–2084  
<https://doi.org/10.1007/s10072-022-05881-8>

BRIEF COMMUNICATION



### Kearns-Sayre syndrome: expanding spectrum of a “novel” mitochondrial leukomyeloencephalopathy

Marco Moscatelli<sup>1</sup> · Anna Ardisone<sup>2</sup> · Eleonora Lamantea<sup>3</sup> · Giovanna Zorzi<sup>2</sup> · Claudio Bruno<sup>4</sup> · Isabella Moroni<sup>2</sup> · Alessandra Erbetta<sup>1</sup> · Luisa Chiapparini<sup>1</sup>

Neuroradiology (2020) 62:1315–1321  
<https://doi.org/10.1007/s00234-020-02501-0>

PAEDIATRIC NEURORADIOLOGY



### Spinal cord involvement in Kearns-Sayre syndrome: a neuroimaging study

Pasquini Luca<sup>1,2</sup> · Guamera Alessia<sup>1,2</sup> · Rossi-Espagnet Maria Camilla<sup>1,2</sup> · Napolitano Antonio<sup>3</sup> · Martinelli Diego<sup>4</sup> · Deodato Federica<sup>4</sup> · Diodato Daria<sup>5</sup> · Carrozzo Rosalba<sup>5</sup> · Dionisi-Vici Carlo<sup>4</sup> · Longo Daniela<sup>1</sup>

- 54.5%, 6/11

AJNR Am J Neuroradiol 42:389–96 Feb 2021

### Involvement of the Spinal Cord in Primary Mitochondrial Disorders: A Neuroimaging Mimicker of Inflammation and Ischemia in Children

C.A.P.F. Alves, A. Goldstein, S.R. Teixeira, J.S. Martin-Saavedra, I.P. de Barcelos, G. Fadda, L. Caschera, M. Kidd, F.G. Gonçalves, E.M. McCormick, M.J. Falk, Z. Zolkipli-Cunningham, A. Vossough, and G. Zuccoli

- 58%, 19/33



ARTICLE

## Sleep-Disordered Breathing in Adult Patients With Mitochondrial Diseases

A Cohort Study

Guido Primiano, MD, Valerio Brunetti, MD, Catello Vollono, MD, PhD, Anna Losurdo, MD, Rossana Moroni, PhD, Giacomo Della Marca, MD, and Serenella Servidei, MD

Neurology® 2021;96:e241–e249. doi:10.1212/WNL.00000000000011005

Correspondence

Dr. Primiano  
guido.primiano@gmail.com

Figure 1 Distribution of the SDB in Mitochondrial Diseases

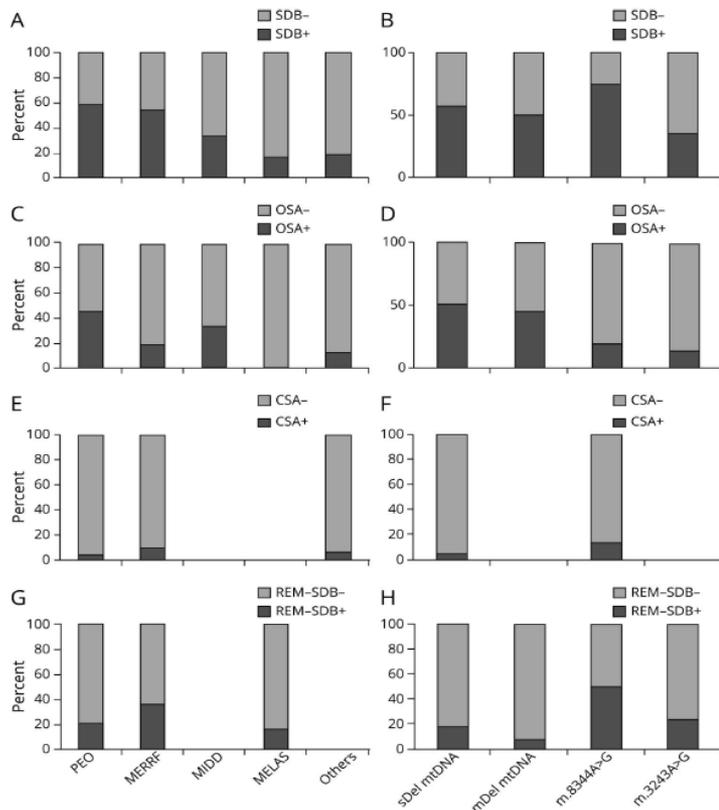
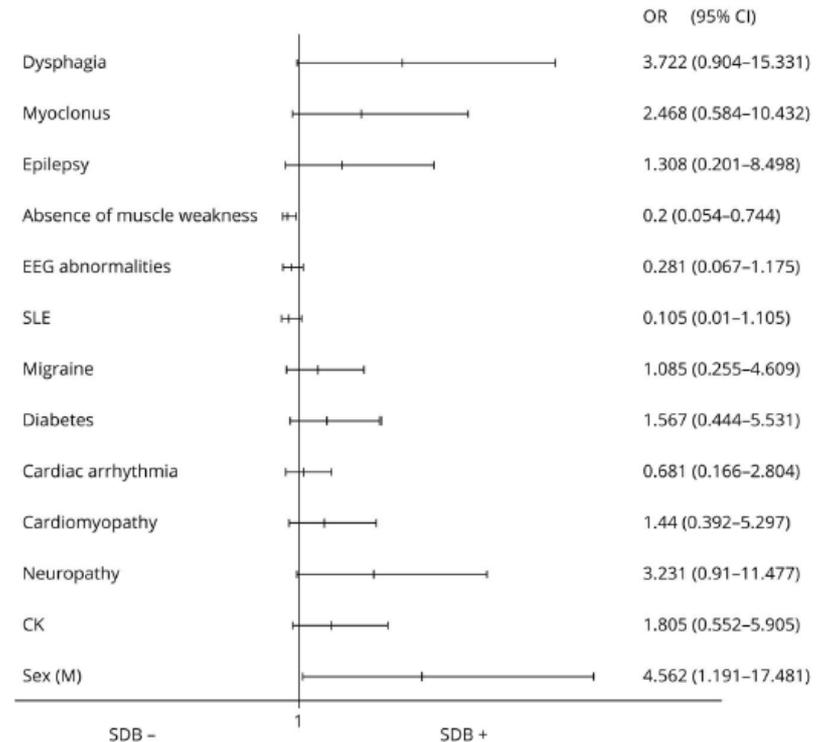


Figure 2 Association Between SDB and Clinical Variables





NATURE REVIEWS | ENDOCRINOLOGY

VOLUME 13 | FEBRUARY 2017 |

## Mitochondrial disease and endocrine dysfunction

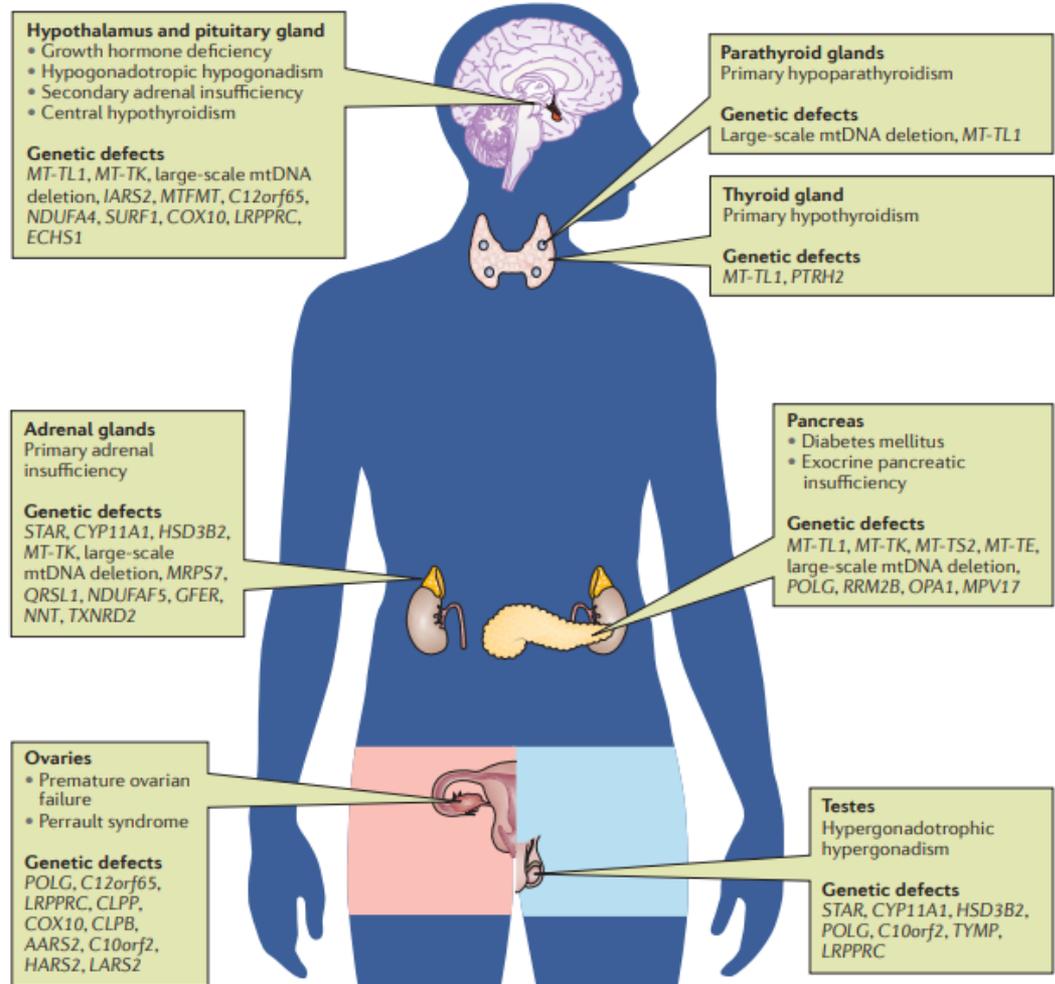
Jasmine Chow<sup>1</sup>, Joyeeta Rahman<sup>2</sup>, John C. Achermann<sup>2</sup>, Mehul T. Dattani<sup>2,3</sup> and Shamima Rahman<sup>2,4</sup>



### Mitochondrial Dysfunction in Primary Ovarian Insufficiency

Dov Tiosano, Jason A. Mears, and David A. Buchner

Endocrinology  
Endocrine Society





## Safety of drug use in patients with a primary mitochondrial disease: An international Delphi-based consensus

Maaik C. De Vries<sup>1</sup> | David A. Brown<sup>2</sup> | Mitchell E. Allen<sup>2</sup> |  
 Laurence Bindoff<sup>3,4</sup> | Gráinne S. Gorman<sup>5,6</sup> | Amel Karaa<sup>7</sup> |  
 Nandaki Keshavan<sup>8,9</sup> | Costanza Lamperti<sup>10</sup> | Robert McFarland<sup>5,6</sup> |  
 Yi Shiao Ng<sup>5,6</sup> | Mar O'Callaghan<sup>11,12</sup> | Robert D. S. Pitceathly<sup>13</sup> |  
 Shamima Rahman<sup>8,9</sup> | Frans G. M. Russel<sup>14</sup> | Kristin N. Varhaug<sup>3,4</sup> |  
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## A severe linezolid-induced rhabdomyolysis and lactic acidosis in Leigh syndrome

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 Serenella Servidei<sup>1,2</sup>

TABLE 2 Points of attention regarding drug prescription in patients with a mitochondrial disease (detailed description in Section 4)

Specific drug/drug group/clinical condition/genotype	Points of attention
<i>Specific drug/drug group/genotype</i>	
Aminoglycosides	The mitochondrial 12S rRNA is a hot spot for mutations associated with both aminoglycoside-induced and non-syndromic hearing loss. Screening for these mtDNA mutations is strongly recommended before elective long-term treatment is planned. The benefits of the drug in emergency treatment, as a very effective broad-spectrum antibiotic, outweigh the risks in these situations.
Valproic acid	Should be used only in exceptional circumstances. The drug is absolutely contraindicated in patients with mitochondrial disease due to <i>POLG</i> mutations. Valproic acid should not be used in patients with known liver disease and/or clinical signs suspicious for <i>POLG</i> disease.
Neuromuscular blocking agents	Extra caution and monitoring should be performed for patients manifesting a predominantly myopathic phenotype.
<i>Specific clinical condition</i>	
General anaesthesia and surgery	Catabolism should be prevented by minimising preoperative fasting and administering intravenous glucose perioperatively during prolonged anaesthesia, unless the patient is on a ketogenic diet.
Duration of treatment	The duration of drug administration may play a role in whether or not side effects develop. Duration of treatment should be guided by individual patient needs and their response to specific treatments.
Renal impairment	Many patients with a mitochondrial disease have renal impairment; drug dose adjustment should be considered particularly when active drug moieties are renally cleared.
Metabolic acidosis (lactic acidosis)	Metabolic acidosis (lactic acidosis) may occur in patients with mitochondrial disease, therefore drugs that can cause acidosis should be prescribed with caution. Regular clinical review and monitoring of acid-base status in blood is recommended.



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## SARS-CoV-2 infection in patients with primary mitochondrial diseases: Features and outcomes in Italy

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CLINICAL/SCIENTIFIC NOTE

OPEN ACCESS

## COVID-19–Related Outcomes in Primary Mitochondrial Diseases

An International Study

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Robert D. S. Pitceathly, MD, PhD, on behalf of the MitoCOVID-19 Study Group

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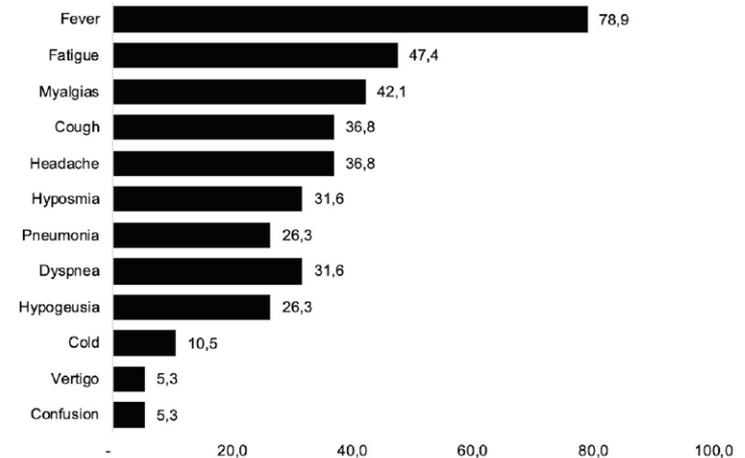


Fig. 1. Percentage of COVID-19-related symptoms in the 27 symptomatic mitochondrial patients.

- **Seventy-nine PMDs** from 10 countries (mean age  $41.5 \pm 18$  years);
- 25 (**32%**) were **hospitalized**, 48 (61%) recovered fully, 28 (35%) improved with sequelae, and 3 (**4%**) **died**;
- Statistically significant differences in **hospitalization status** were observed in baseline status, including the **NMDAS score** ( $p = 0.003$ ) and mRS ( $p = 0.001$ ), presence of **respiratory dysfunction** ( $p < 0.001$ ), **neurologic involvement** ( $p = 0.003$ ), and **more than 4 comorbidities** ( $p = 0.002$ ).
- **Respiratory dysfunction** is an independent risk factor for severe COVID-19 in PMDs while high **disease burden and coexisting comorbidities contribute toward COVID-19–related hospitalization**.



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## Neurodegenerative and functional signatures of the cerebellar cortex in m.3243A>G patients

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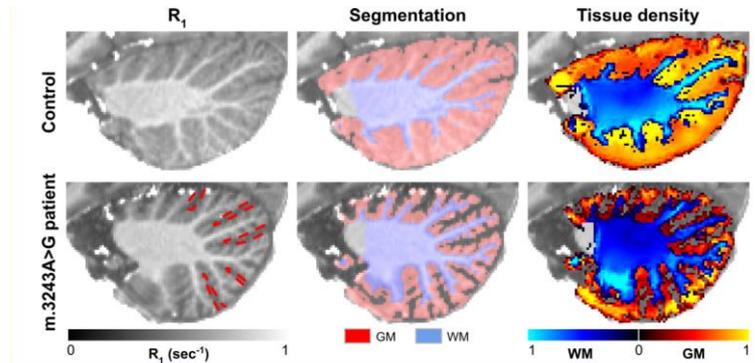
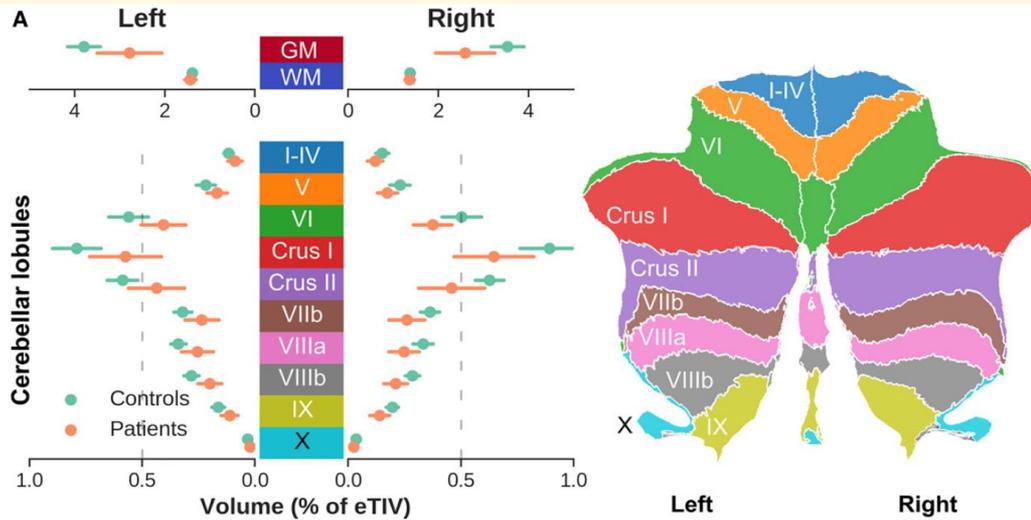


Figure 1 Example data. Left to right:  $R_1$ , GM (red) and WM (blue) segmentation masks and corresponding tissue density maps are shown for a control (top row) and m.3243A>G patient (bottom row). Dashed red lines indicate the inter-folial spacing for the patient.

**Figure 2** Cerebellar GM and WM volumes. **(A)** Comparison of volume (presented as % of eTIV) on the x-axis between controls (green) and m.3243A>G patients (orange) for left and right hemisphere GM and WM (top), as well as per cerebellar lobule GM (bottom), colour-coded based on the right panel legend. **(B)** First two columns: correlation between GM volume (y-axis) and NMDAS or corrected UEC mutation load (x-axes). Last two columns: similar to first two columns but using WM volume (y-axis). Shaded areas show 95% confidence intervals.

# Mitochondrial diseases



Mitochondrial Diseases

Gemelli



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# Medicina mitocondriale



Gemelli



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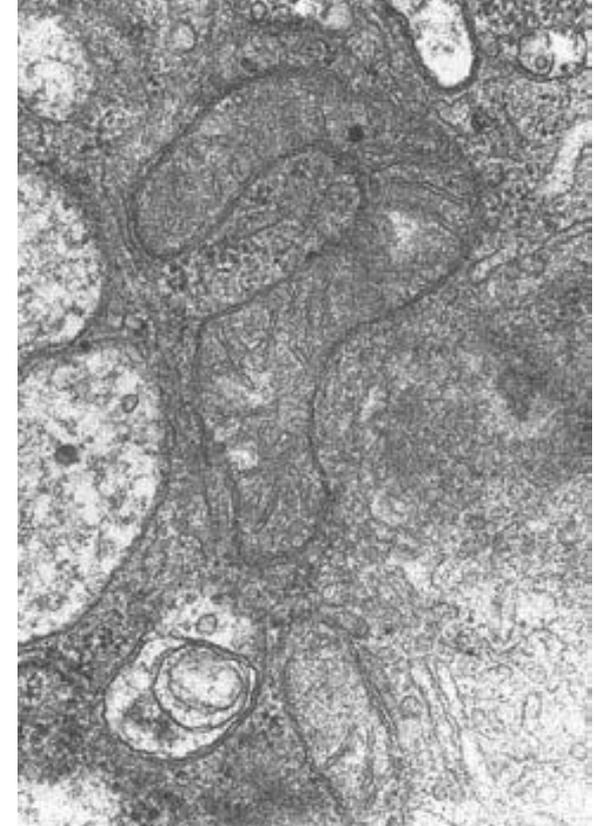


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