Clinical Features: Patients with Rubinstein-Taybi syndrome (RSTS) [OMIM #180849] have characteristic facial features, short stature, broad (often angulated) thumbs and great toes, and moderate to severe mental retardation. Facial features include arched eyebrows, down-slanting palpebral fissures, a beaked nose with long columella, high arched palate, and grimacing smile. Many patients with RSTS develop obesity in childhood or adolescence. Other features include eye findings, undescended testes, urinary tract anomalies, and congenital heart defects. Patients with RSTS also have an increased risk for tumors including meningioma, pilomatrixoma, rhabdomyosarcoma, pheochromocytoma, and leukemia (1).

Molecular Genetics: Mutations of the CREBBP (CREB binding protein) [OMIM #600140] gene have been identified in a majority of patients with RSTS (2). CREBBP encodes a co-activator in cyclic-AMP-regulated gene expression and has 31 coding exons. Approximately 10-20% of patients with RSTS have deletions involving the CREBBP gene. These deletions may be as small as single exon or include the entire CREBBP gene along with other nearby genes (1). Intragenic deletions/duplications will not be detected by FISH or genomic CGH analysis. In addition, 30-50% of patients with RSTS have mutations in the CREBBP gene (3, 4). Nonsense, missense, frameshift and splicing mutations have all been identified in the CREBBP gene (4).

Mutations of the EP300 (E1A binding protein, 300-KD) [OMIM #602700] gene have been identified in approximately 3% of patients with RSTS (1, 5). EP300 encodes a histone acetyltransferase that is important in the process of cell proliferation and differentiation and has 31 coding exons. Only nonsense mutations, frameshift and interstitial deletions have been identified in the EP300 gene to date.

Mutations in either gene are associated with the classic facial features, mental retardation and other abnormalities typically associated with RSTS (5).

Inheritance: RSTS is an autosomal dominant condition that occurs in 1 in 125,000 live births. Most cases appear to be de novo. Recurrence risk for unaffected parents of an isolated case is approximately 0.1%. Individuals with RSTS rarely reproduce. Recurrence risk for affected individuals is theoretically 50%.

Additional Resources: Rubinstein-Taybi Parent Group PO Box 146 Smith Center KS 66967 Phone: 888-447-2989; 785-697-2984 Fax: 785-697-2985 Email: lbaxter@ruraltel.net

Test methods: We offer full gene sequencing of the entire coding region for CREBBP and EP300. We also offer deletion/duplication analysis of the CREBBP and EP300 genes by MLPA or oligonucleotide array-CGH to identify deletions/duplications of one or more exons. Partial exonic copy number changes and rearrangements of less than 400 bp may not be detected by array-CGH. Array-CGH will not detect low-level mosaicism, balanced translocations, inversions, or point mutations that may be responsible for the clinical phenotype. This testing will also detect the 16p13.3 microdeletion. The sensitivity of our deletion/duplication assay may be reduced when DNA is extracted by an outside laboratory. For best results, please provide a fresh blood sample for this testing.
**CREBBP sequencing analysis**
Sample specifications: 3 to 10 cc of blood in a purple top (EDTA) tube
Cost: $2400
CPT codes: 81407
Turn-around time: 4 - 6 weeks

**CREBBP deletion/duplication testing**
Sample specifications: 3 to 10 cc of blood in a purple top (EDTA) tube
Cost: $1000
CPT codes: 81406
Turn-around time: 4 weeks

**EP300 sequencing analysis**
Sample specifications: 3 to 10 cc of blood in a purple top (EDTA) tube
Cost: $2400
CPT codes: 81407
Turn-around time: 4 - 6 weeks

**EBP deletion/duplication testing**
Sample specifications: 3 to 10 cc of blood in a purple top (EDTA) tube
Cost: $1000
CPT codes: 81406
Turn-around time: 4 weeks

**Testing for a known mutation in additional family members by sequence analysis**
Sample specifications: 3 to 10 cc of blood in a purple top (EDTA) tube
Cost: $390
CPT codes: 81403
Turn-around time: 3-4 weeks

**Prenatal testing for a known mutation by sequence analysis**
Sample specifications: 2 T25 flasks of cultured cells from amniocentesis or CVS or 10 mL of amniotic fluid
Cost: $540
CPT codes: 81403
Turn-around time: 1-2 weeks

**Results:**
Results, along with an interpretive report, will be faxed to the referring physician. Additional reports will be provided as requested. All abnormal results will be reported by telephone.

**References:**

Committed to CUSTOMIZED DIAGNOSTICS, TRANSLATIONAL RESEARCH & YOUR PATIENTS’ NEEDS