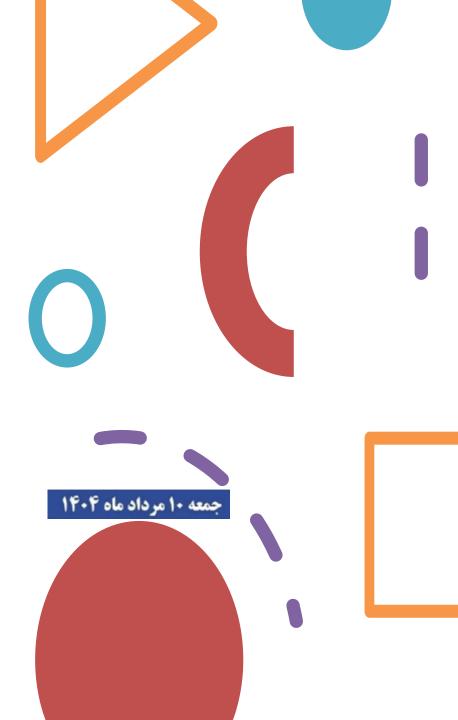
Neurogenetics in Pediatric Neurologic Disorders

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Why
Neurogenetics
Matters

Genetic factors underlie many pediatric neurologic disorders

Early diagnosis can improve outcomes

Guides treatment and prognosis

Basic Concepts in Neurogenetics

Genes, mutations, inheritance patterns

Genetic heterogeneity: one phenotype, many genes

Common testing methods: karyotype, CMA, WES, WGS

When to Suspect a Genetic Cause

Global developmental delay or regression

Dysmorphic features or congenital anomalies

Family history of neurologic or genetic disease

Common Genetic Neurologic Disorders

Epileptic syndromes (e.g., SCN1A, KCNQ2 mutations)

Neurodevelopmental disorders (e.g., Rett, Fragile X)

Neuromuscular diseases (e.g., DMD, SMA)

Neurocutaneous syndromes (e.g., TSC, NF1)

Dravet Syndrome (SCN1A)

Genetic Epilepsies: Examples

Benign familial neonatal seizures (KCNQ2)

Lissencephaly (PAFAH1B1, TUBA1A)

Autism spectrum disorder: monogenic in ~10-20%

Neurodevelopmental Disorders

Intellectual disability: chromosomal and single gene causes

Many have overlapping features and etiologies

Tuberous sclerosis complex (TSC1, TSC2)

Neurocutaneous Syndromes Neurofibromatosis type 1 (NF1 gene)

Clinical diagnosis supported by genetics

Approach to Genetic Testing

First-line: CMA for global delay, dysmorphism

WES/WGS: for undiagnosed complex cases

Consider targeted gene panels for epilepsy or neuromuscular concerns

Genetic Counseling in Practice

Important before and after testing

Interpretation of results: pathogenic vs VUS

Communicating risk and recurrence

Case 1: Genetic Epilepsy

2-year-old with febrile and afebrile seizures

Normal MRI, developmental slowing



Case 1: Genetic Epilepsy

2-year-old with febrile and afebrile seizures

Normal MRI, developmental slowing WES → SCN1A
pathogenic variant
→ Dravet
Syndrome

Case 2: Regression + Hypotonia

6-month-old with milestone loss

Elevated lactate, basal ganglia lesions on MRI



Case 2: Regression + Hypotonia

6-month-old with milestone loss

Elevated lactate, basal ganglia lesions on MRI Mitochondrial panel: SURF1 mutation → Leigh syndrome

Current Advances in Neurogenetics



NEXT-GEN SEQUENCING (NGS), WGS BECOMING MORE ACCESSIBLE



GENE THERAPY (E.G., SMA)



MULTIDISCIPLINARY GENOMIC CLINICS





Cost and insurance



Incidental findings



Limitations of testing and interpretation



Genetics is key in pediatric neurology

Take-Home Messages



Recognize when to refer or test



Early diagnosis can guide therapy and counseling

Questions & Discussion

• Thank you for your attention.

