

# Alport Syndrome Natural History from the RaDaR Registry: Associations with gene, variant type and sex

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- Sanofi Genzyme
- Travere therapeutics
- Eloxx Pharmaceuticals Inc

# Background



- Second commonest genetic kidney disease
- *COL4A3-COL4A5* genes
- X linked Alport syndrome  
1 : 2000
- COL4A3 or COL4A4 variants  
1 : 100



- Clinical course can be highly variable
- Males with protein length altering *COL4A5* variants have a more severe phenotype
- Contradicting results in genotype - phenotype correlation studies in females<sup>2,3</sup>



- Small patient numbers
- Challenges in collecting sufficient, high quality, longitudinal data to accurately describe the natural history of Alport Syndrome

(1) Gibson, Joe<sup>1</sup>; Fieldhouse, Rachel<sup>2</sup>; Chan, Melanie M.Y.<sup>3,4</sup>; Sadeghi-Alavijeh, Omid<sup>3,4</sup>; Burnett, Leslie<sup>2</sup>; Izzi, Valerio<sup>5</sup>; Persikov, Anton V.<sup>6</sup>; Gale, Daniel P.<sup>3,4</sup>; Storey, Helen<sup>7</sup>; Savage, Judy<sup>1</sup>; on behalf of the Genomics England Research Consortium. Prevalence Estimates of Predicted Pathogenic COL4A3–COL4A5 Variants in a Population Sequencing Database and Their Implications for Alport Syndrome. *JASN* 32(9)p 2273-2290, September 2021.

(2) Bekheriania MR, Reed B, Gregory MC, McFann K, Shamshirsaz AA, Masoumi A, Schrier RW. Genotype-phenotype correlation in X-linked Alport syndrome. *J Am Soc Nephrol*. 2010 May;21(5):876-83.

(3) Yamamoto T, Nozu K, Fu XJ, et al. Natural History and Genotype-Phenotype Correlation in Female X-Linked Alport Syndrome. *Kidney Int Rep*. 2017;2(5):850-855. Published 2017 May 4. doi:10.1016/j.kir.2017.04.011

# The UK National Registry of Rare Kidney Diseases (RaDaR)



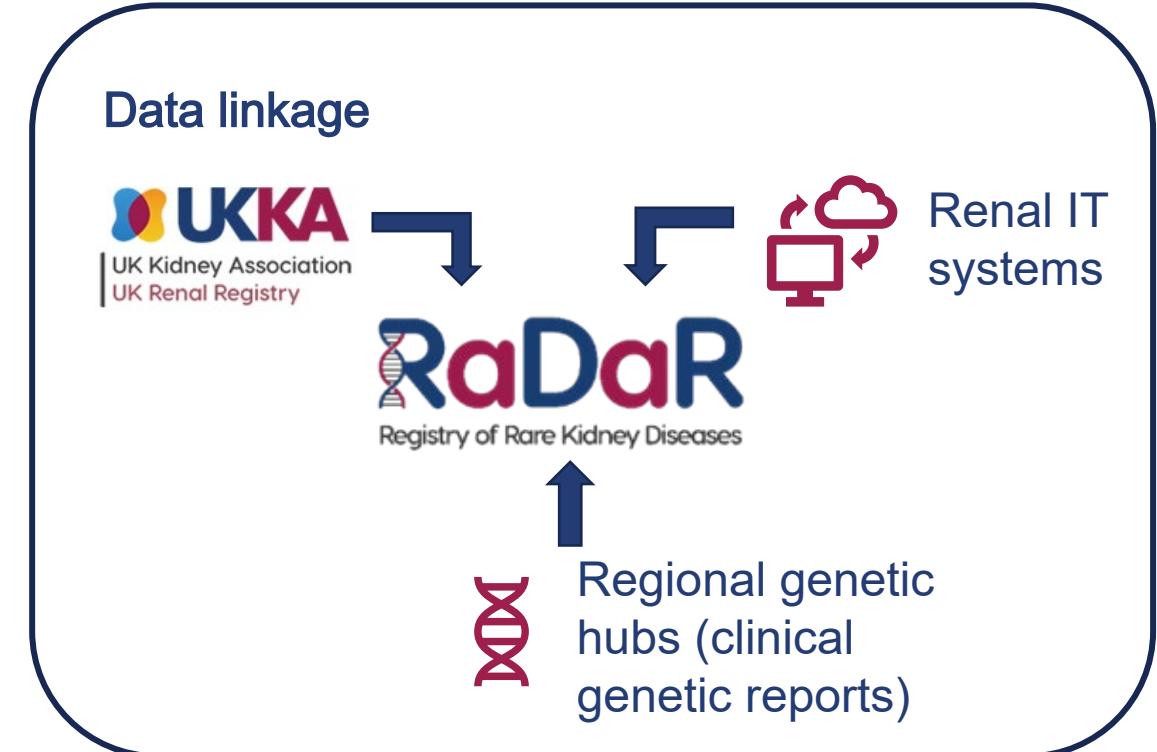
- Recruiting patients with Alport syndrome since 2013
- Longitudinal and retrospective data for patients with rare kidney diseases in the UK
- >100 UK renal units

## Aims

To describe

- Demographics
- Renal outcomes associated with
  - pathogenic variant type
  - in Males and Females

with Alport Syndrome



# Results

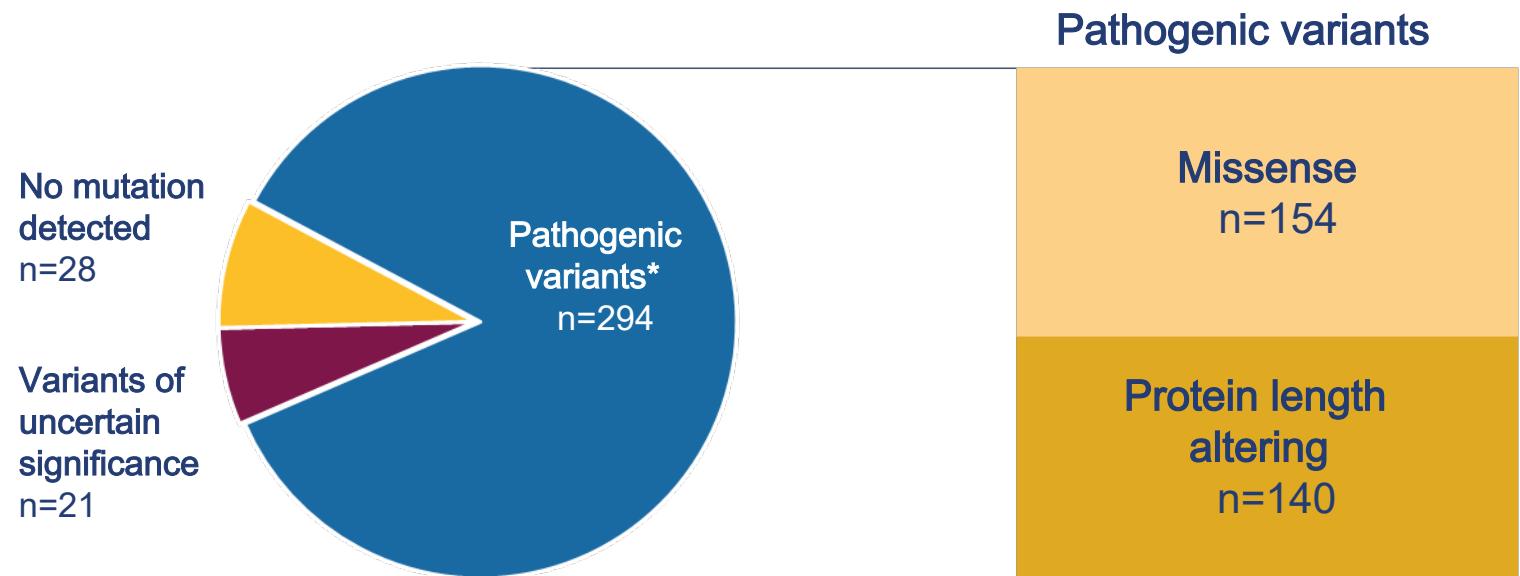


**920 Alport Syndrome Patients**

- Male n=488 (53%)
- Female n=432 (47%)



- Clinical genetic reports available for **343/920 (37%)** patients



\* American College of Medical Genetics (ACMG) criteria



# Demographics

# Genotype, stratified by sex



Males  
n=148

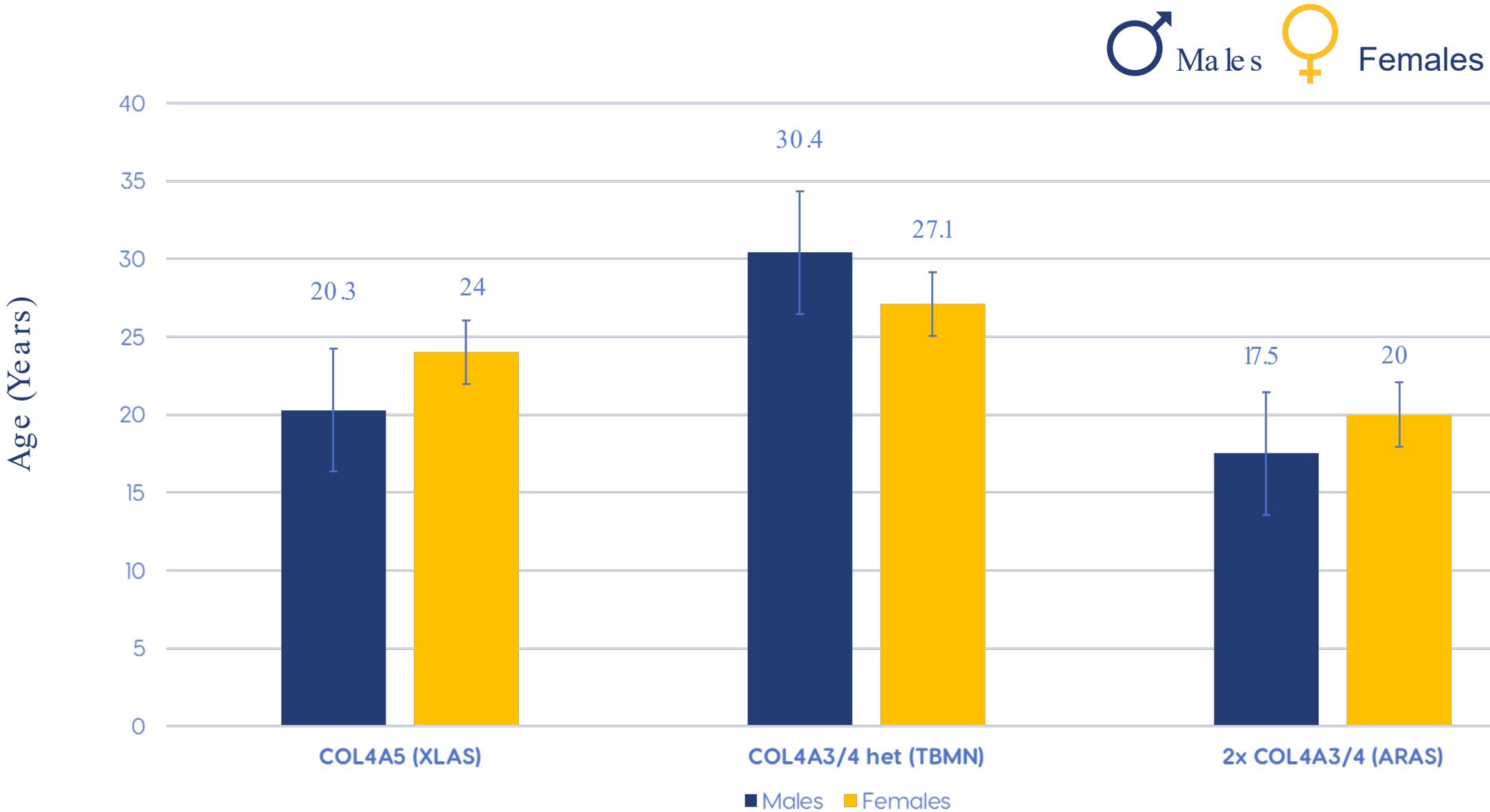


Females  
n=146

	n	n
<i>COL4A5</i>	104	73
Protein length altering	48	36
Missense	56	37
<i>COL4A3/4</i> heterozygous	26	57
Protein length altering	14	22
Missense	12	35
<i>COL4A3/4</i> homozygous or 2x variants*	18	16
Protein length altering	14	6
At least one missense	4	10

\*11 confirmed biallelic

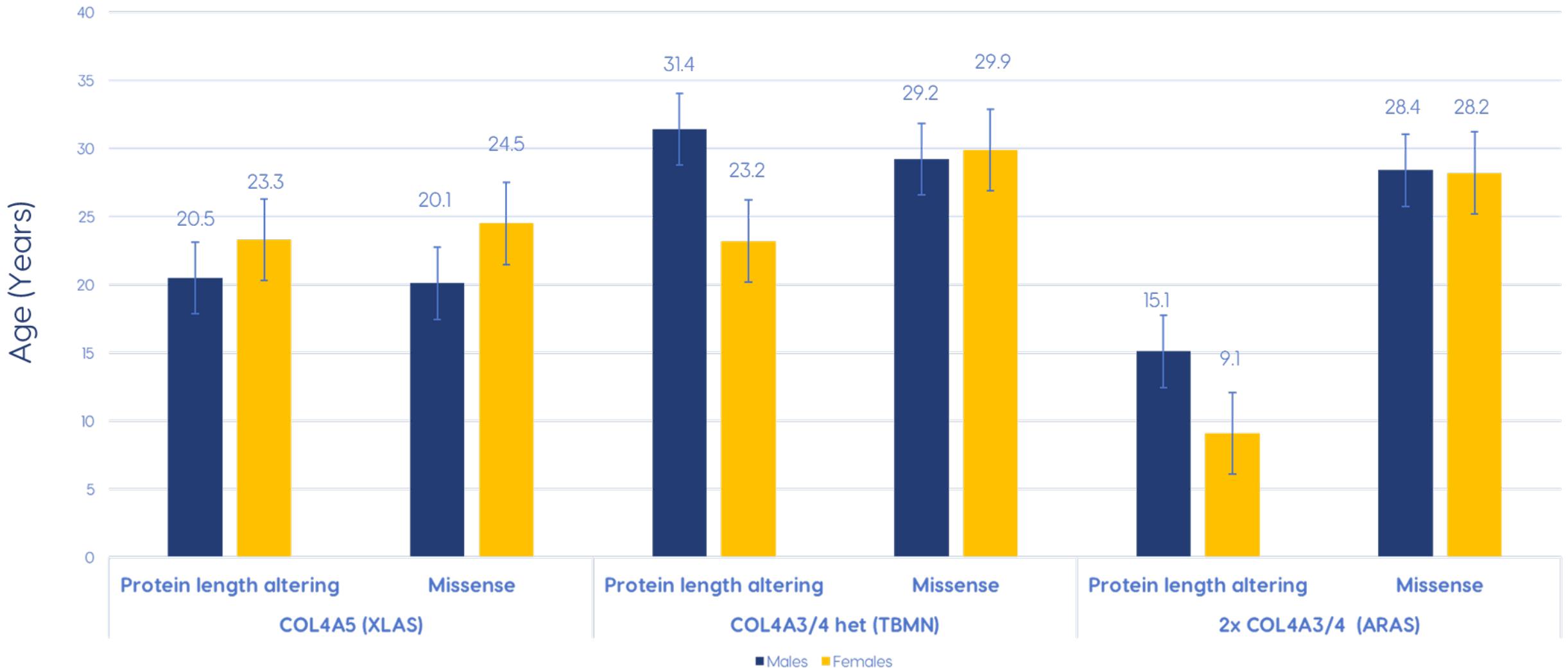
# Median age at diagnosis, by genotype and Sex



# Median age at diagnosis, by genotype, Sex and variant type



♂ Males ♀ Females

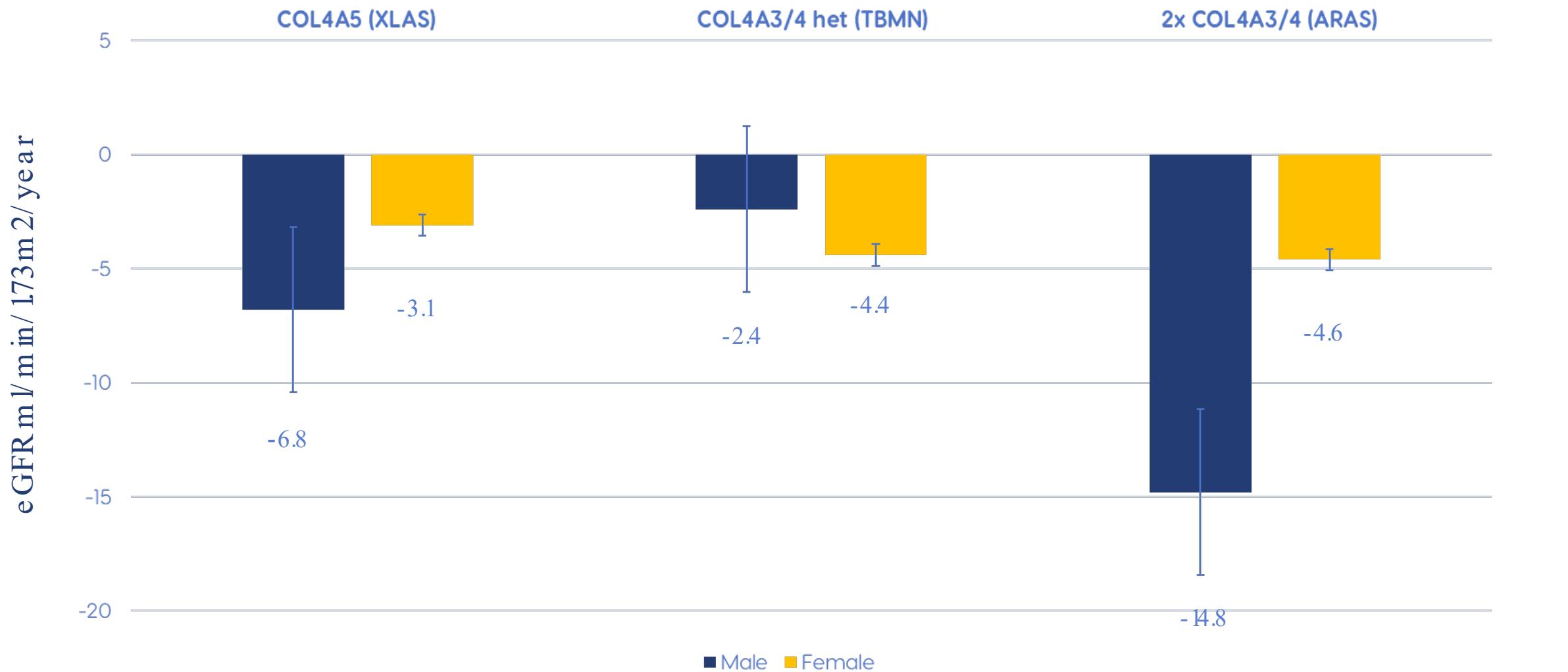




# Renal outcomes

# Annualised eGFR slope, by genotype and Sex

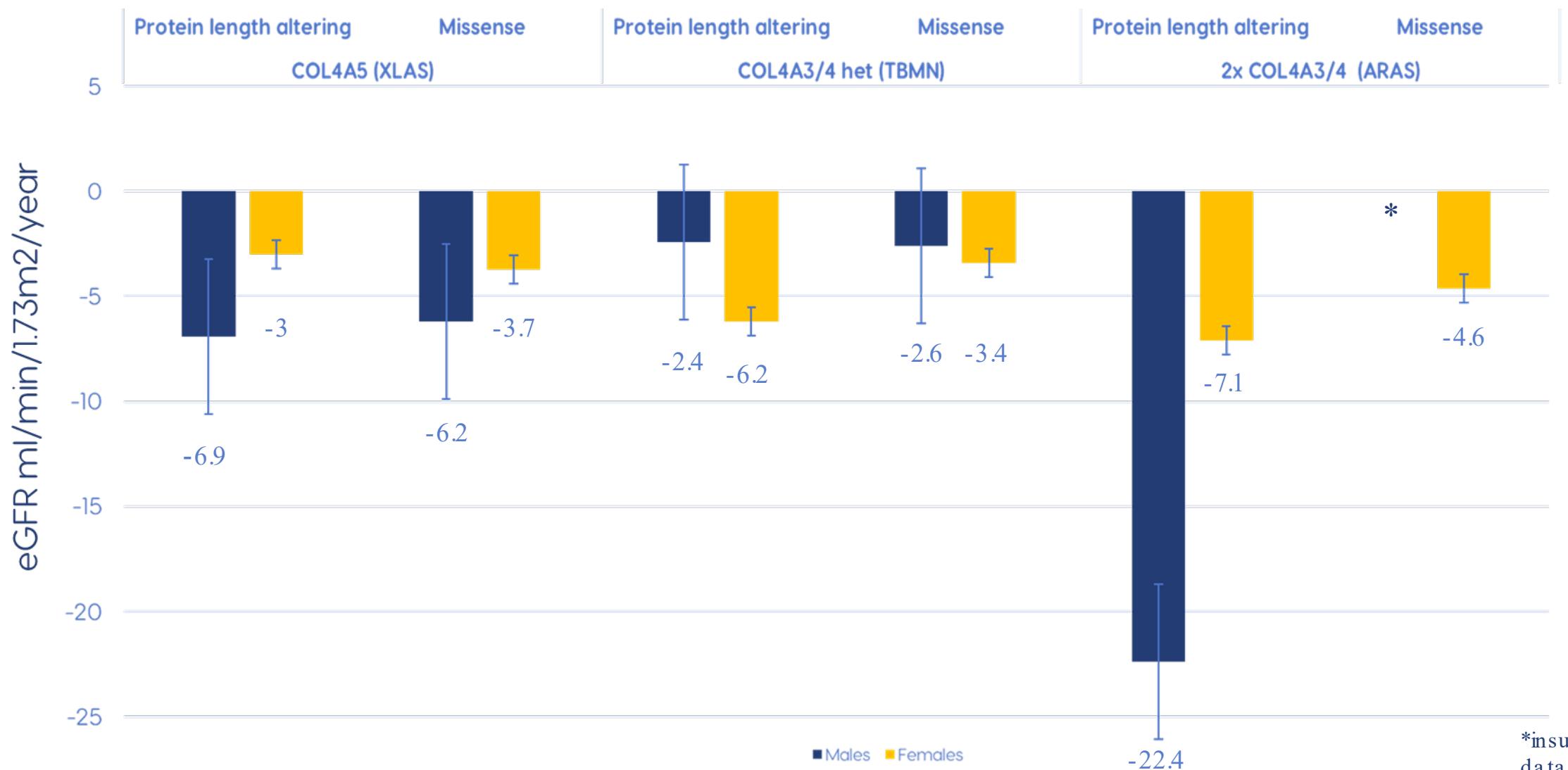
♂ Males   ♀ Females



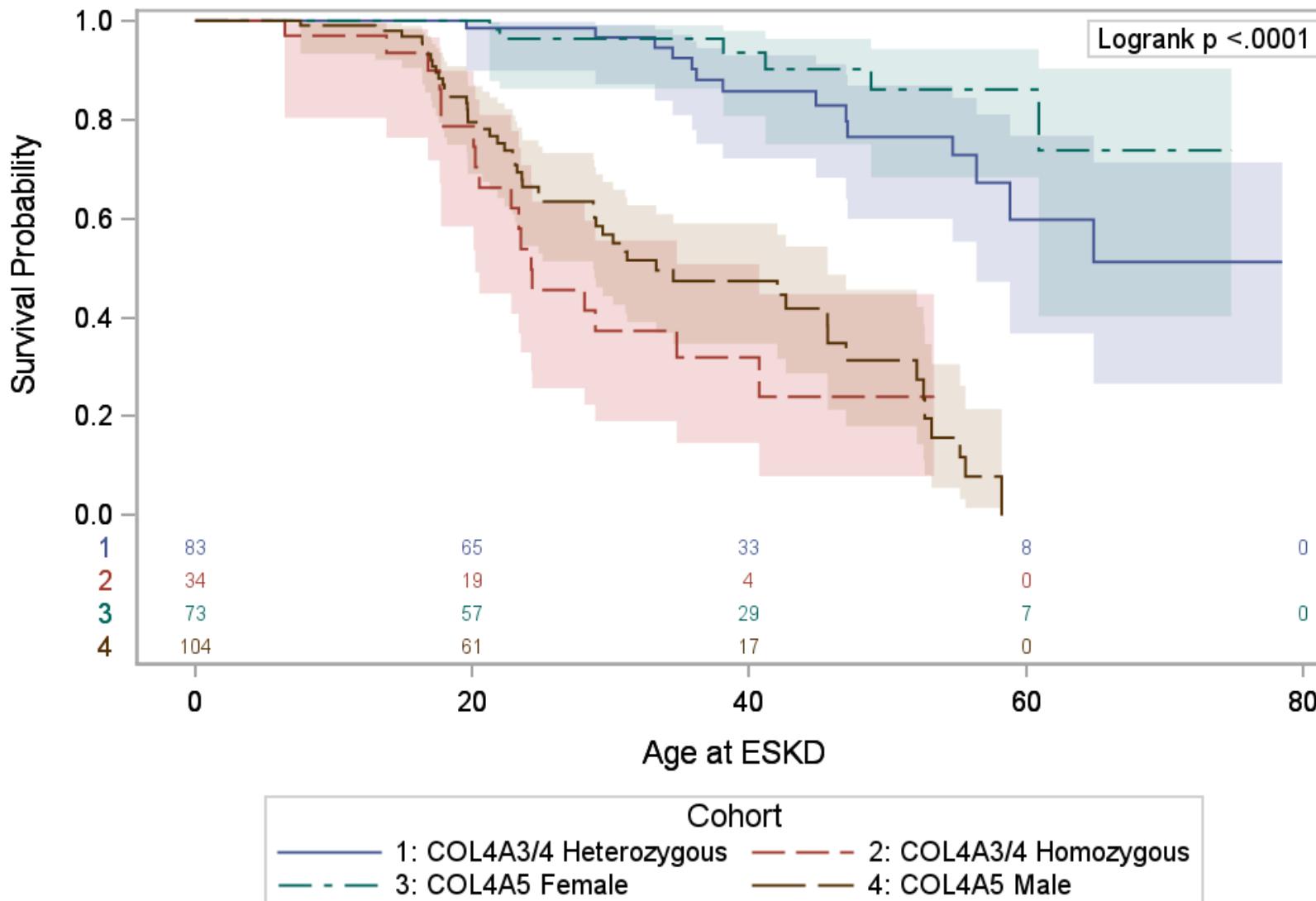
# Annualised eGFR slope

♂ Males

♀ Females



# Age at End Stage Kidney Disease (ESKD)



Median age at ESKD

**COL4A5 female** 60.9 years (LQ)

**COL4A3/4 heterozygous** 54.7 years (LQ)

**COL4A5 male** 33.2 years

**COL4A3/4 2x variants** 24.2 years

# *COL4A5* variants



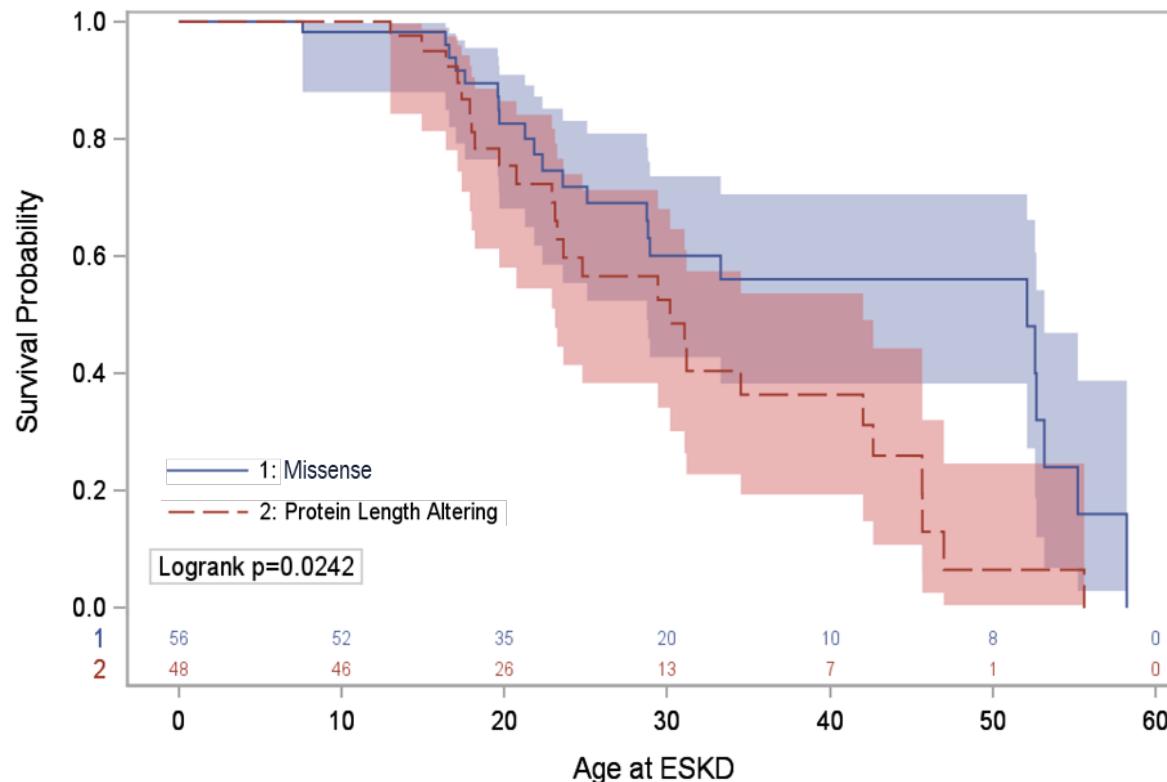
Males



Missense  
Protein length altering

Median age at ESKD

52.1 years  
30.2 years



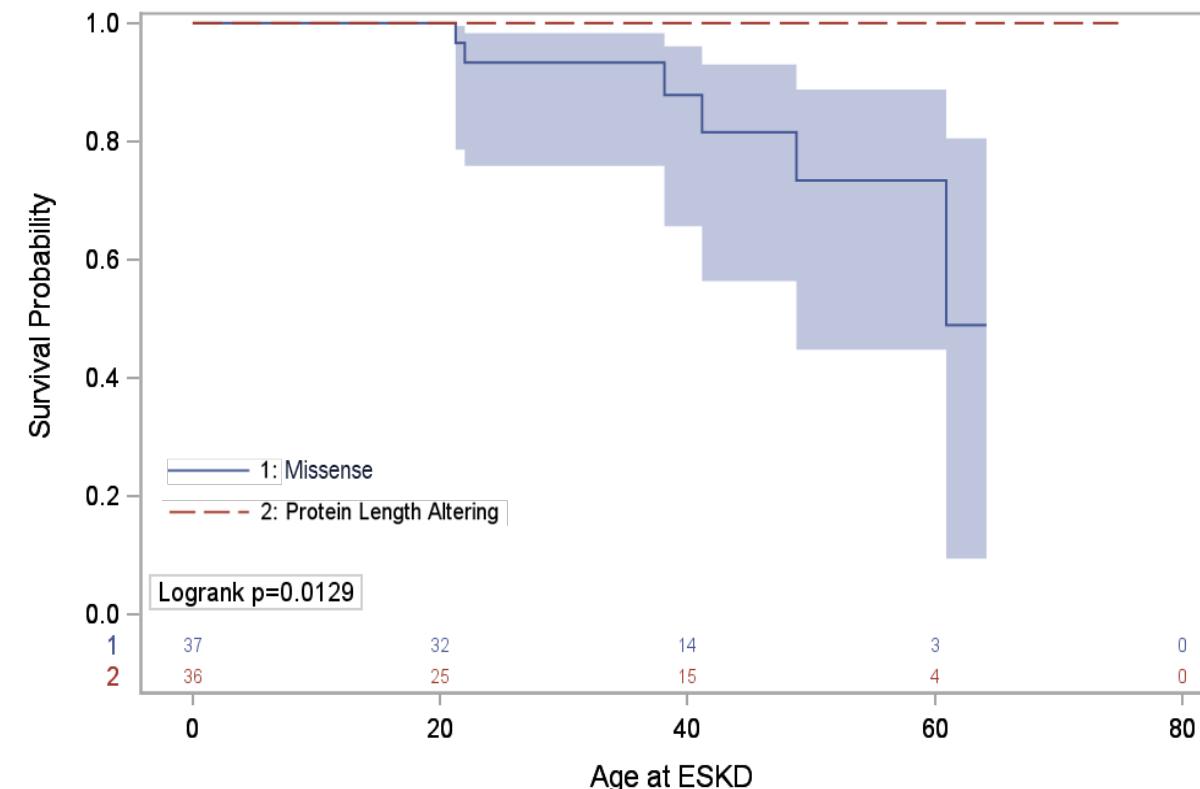
Females



Missense  
Protein length altering

Median age at ESKD

60.9 years  
0/36 started RRT



# *COL4A3/4 heterozygous* variants

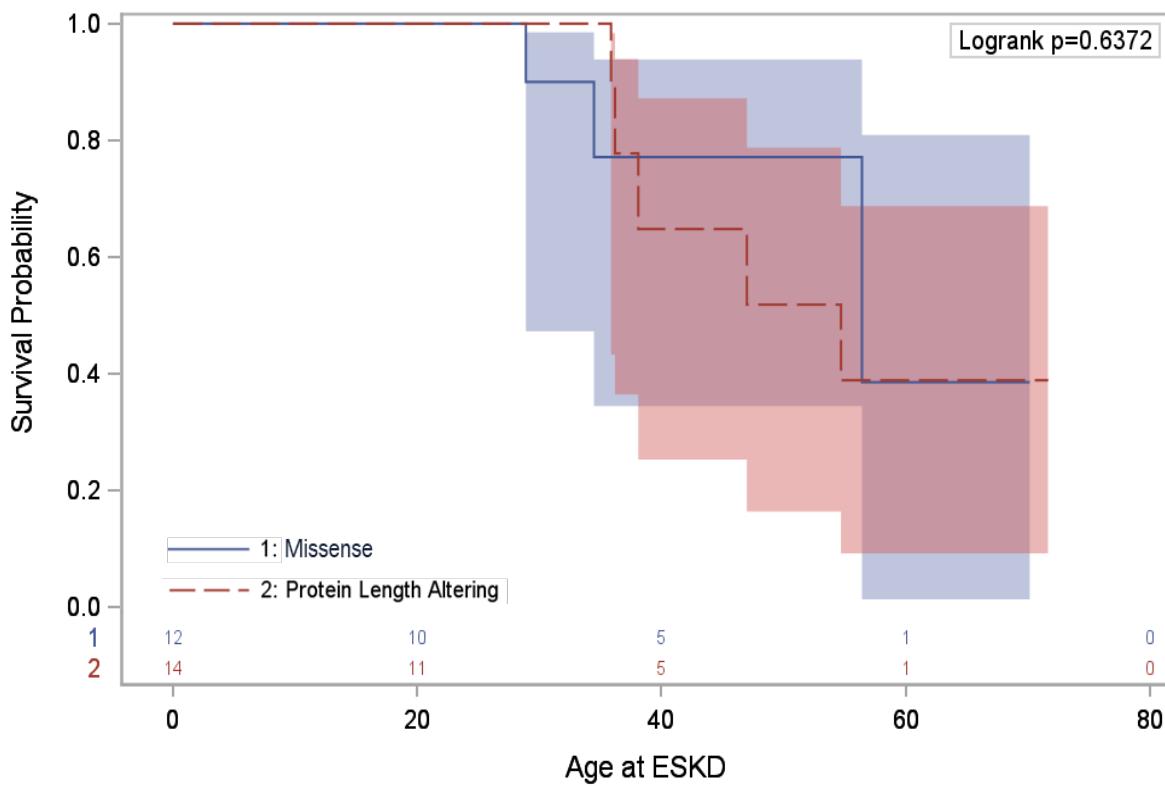


Males

♂ Missense  
Protein length altering

Median age at ESKD

56.4 years  
54.7 years

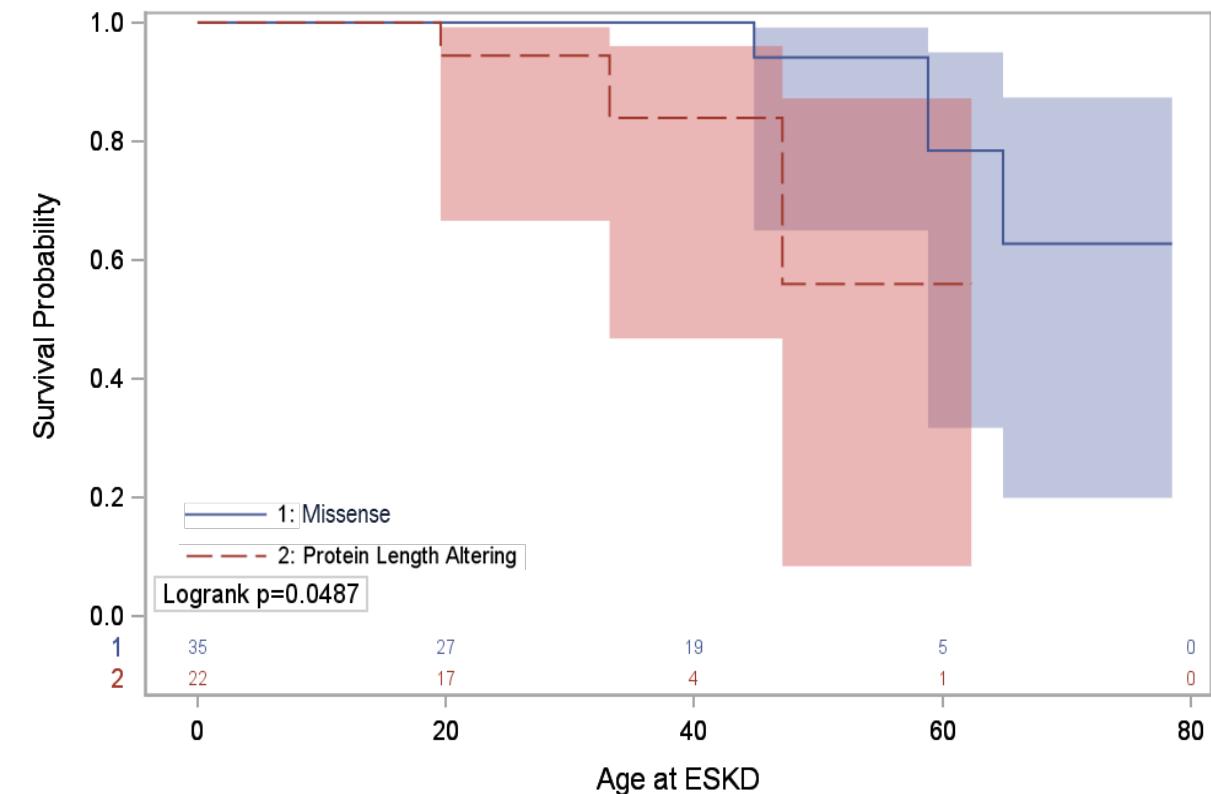


Females

♀ Missense  
Protein length altering

Lower Quartile age at ESKD

64.9 years  
47.1 years



# *COL4A3/4* homozygous or 2x variants



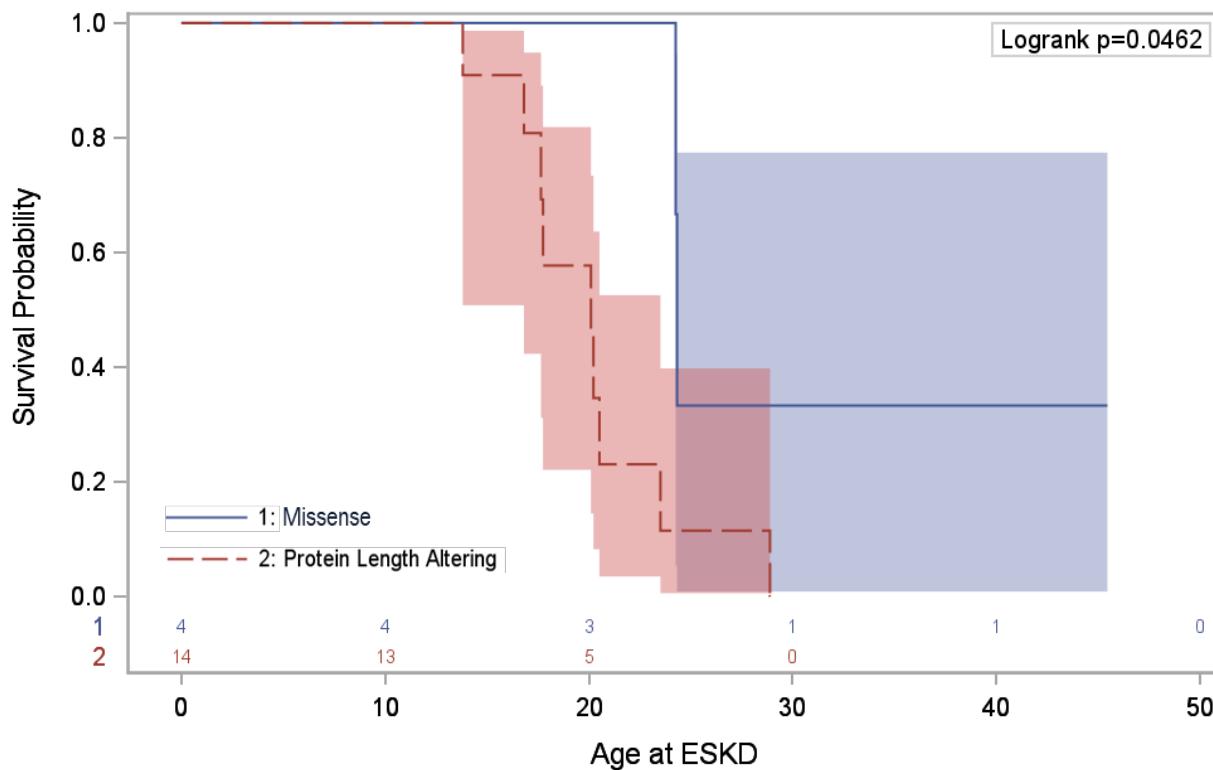
Males



Missense  
Protein length altering

Median age at ESKD

24.3 years  
20.1 years



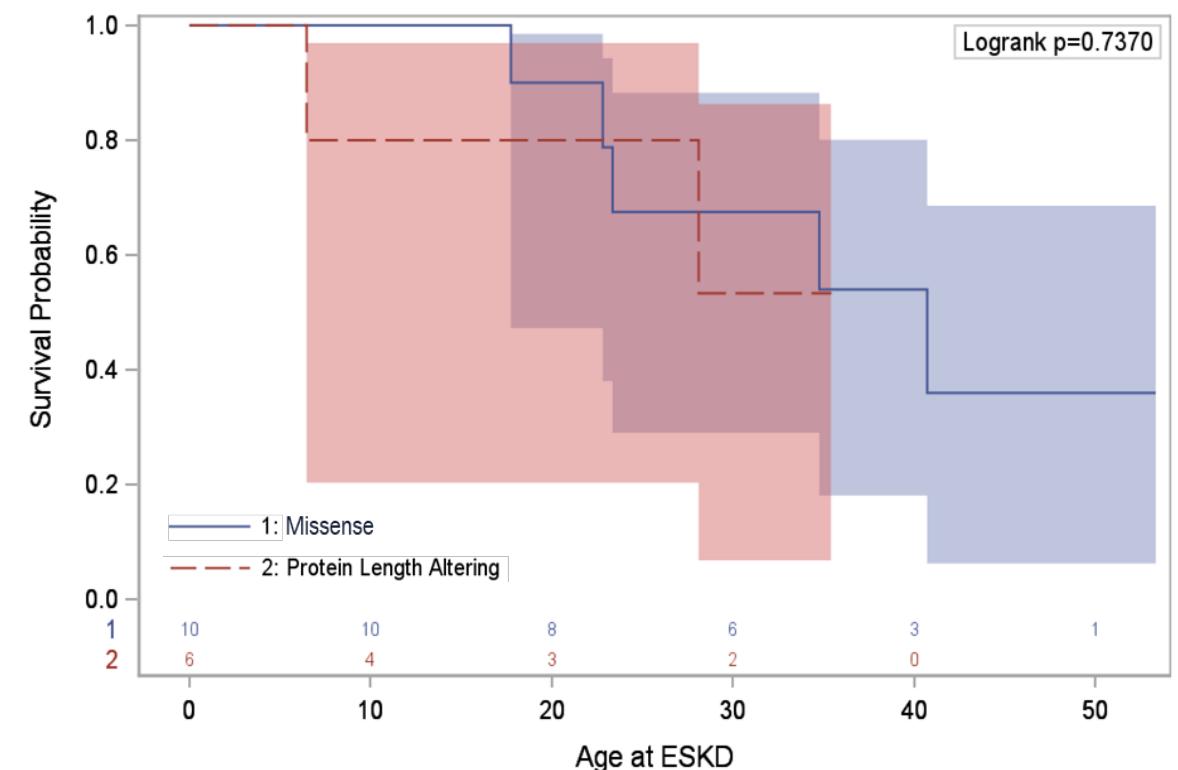
Females



Lower Quartile age at ESKD

Missense  
Protein length altering

23.4 years  
28.1 years





# Conclusions

- The observed effect of pathogenic variant type on renal outcomes varied by gene affected, number of mutations and sex.
- The relatively reduced severity among females harbouring a protein length altering *COL4A5* variant may represent an effect of skewed X -inactivation or a missense gain -of -function mechanism – needs confirmation with a larger cohort

## Future

- We have used **large -scale registry data** from the UK to describe the renal outcomes for Males and Females with different pathogenic variant types
- These analyses are **scalable** : upload of clinical genetic reports is ongoing

# Acknowledgements



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