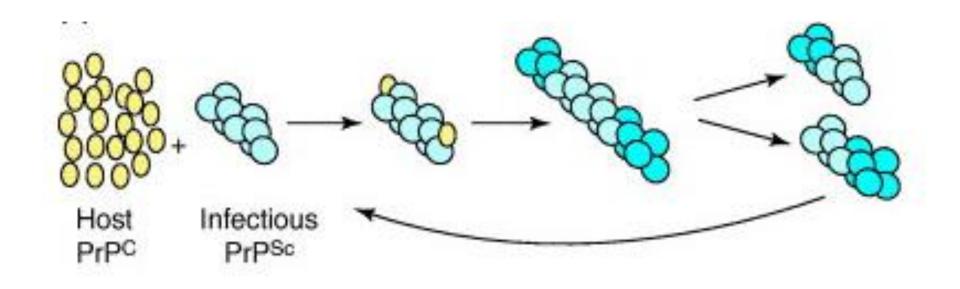


Prion Disease Overview

What is a prion?

- protein and infectious
- -ion (infectious, e.g. virion)
- No nucleic acid (e.g., DNA, RNA, "building blocks of life)
- Non-degradable by typical sterilization



PrP: prion protein

PrP^C: normal prion protein (c=cellular)

PrPSc: disease causing protein (Sc=scrapie)

Soto C, Trends Biochem Sci 2006

Animals

- Scrapie: sheet & goat
- Bovine spongiform encephalopathy (BSE): cow
- Chronic wasting disease (CWD): deer, elk, moose, caribou

Etiologies

Sporadic



Genetic CJD
Fatal familial insomnia
Gerstmann-Sträussler-Scheinker



Kuru Iatrogenic CJD Variant CJD



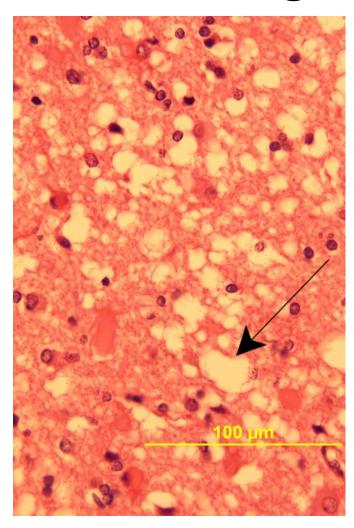
Age & Survival

- Age at disease onset
 - sCJD: mid to late life
 - genetic prion disease: mid to late life
 - variant CJD: young adulthood and mid life
- Duration
 - sCJD: 4-6 months on average, 25% live > 1 year
 - genetic prion disease: generally longer than sCJD,
 but varies widely by mutation (e.g., GSS)
 - vCJD: generally over a year

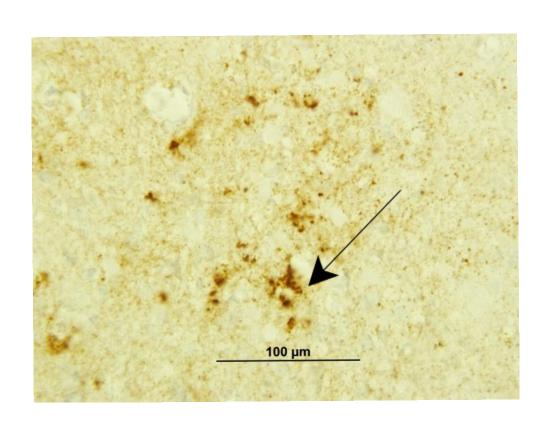
Epidemiology

- 1-2 new cases per million individuals per year across the entire population (all ages)
- 1/10,000 US deaths per year
- OH=10.5 million people
 - 10.5 new cases/yr
 - ~2.5 cases living past one year
 - Would not be unusual to have 13 active cases in OH

Definite Diagnosis-Neuropathology



H & E Staining (spongiform changes)



Immunohistochemistry (abnormal prion protein)

Probable sCJD

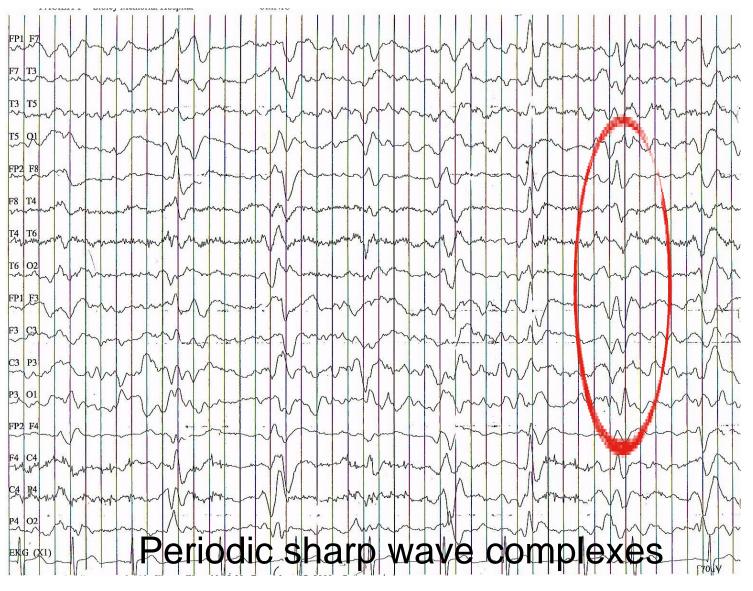
At least two clinical signs with dementia:

- 1. Myoclonus (e.g., twitches)
- Cerebellar or visual symptoms (e.g., "drunken" walking, incoordination, depth misperception)
- 3. Pyramidal or extrapyramidal symptoms (e.g., weakness, tremors, Parkinson's disease like walking)
- 4. Akinetic mutism (lack of voluntary speech & movement)

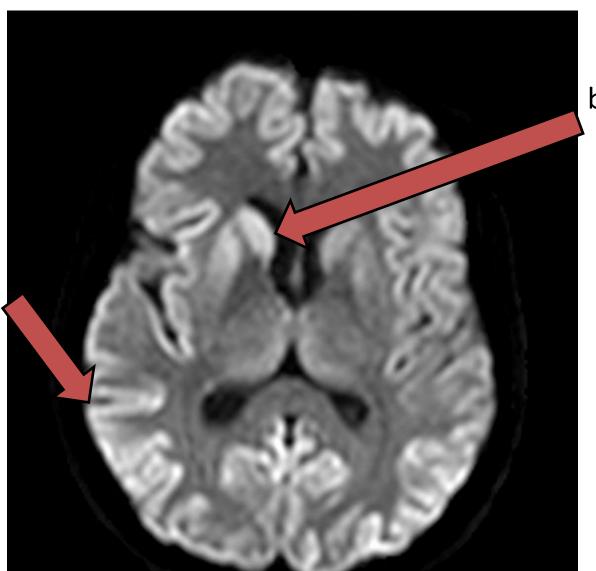
At least one of the following:

- 1. Periodic sharp wave complexes on electroencephalogram (EEG) (looks at brain waves)
- 2. 14-3-3 in spinal fluid and disease duration < 2 years
- 3. Abnormal findings in basal ganglia or at least two cortical (e.g., outside) regions on specific sequences on brain MRI

Electroencephalogram (EEG)



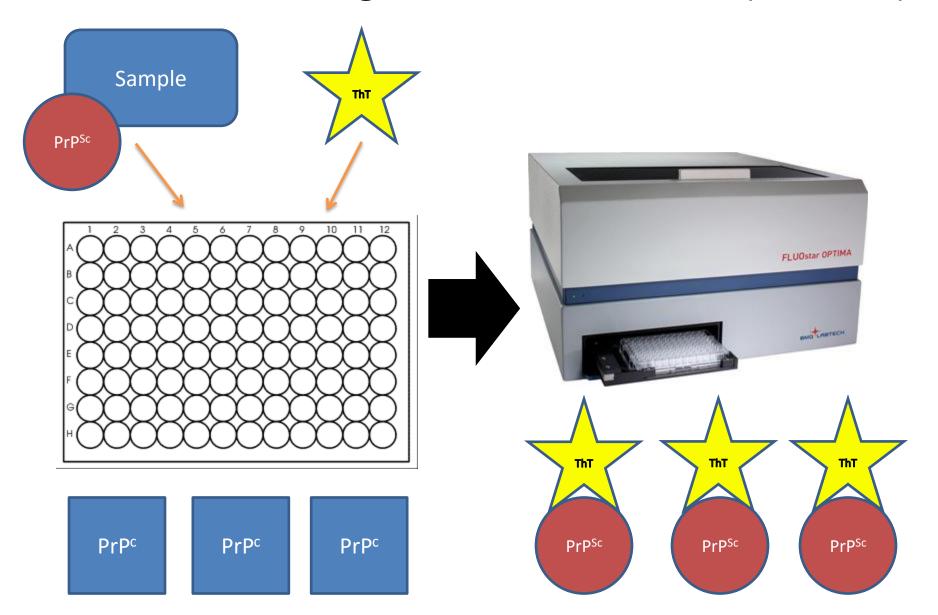
Brain MRI



basal ganglia

cortex

Real-Time Quaking-Induced Conversion (RT-QuIC)



Genetic Prion Disease

Table 1 Variations in the human prion protein gene coding region

Polymorphism		Mutation		
Silent	Influential	Point		Insertional
P68P A117A G124G V161V N173N* H177H T188T* D202D Q212Q R228R S230S	M129V N171S? E219K? 24bp deletion?	P102L P105L A117V G131V I138M* G142S* Y145s Q160s D178N-129V D178N-129M V180I V180I + M232R T183A H187R T188R	T188A T188K E196K F198S E200K D202N V203I R208H V210I E211Q Q212P Q217R M232R M232T P238S	24bp 48bp 96bp 120bp 144bp 168bp 192bp 216bp

(**Bold** indicates CJD phenotype, <u>underlined</u> indicates GSS, *italics* indicate FFI. Others are not categorised, as the published data are insufficient, or findings are unusual to the known disease subtypes. * Referred from: http://www.mad-cow.org/prion_point_mutations.html)

Kovács GG, J Neurol 2002

Acquired Prion Disease

- Kuru
- latrogenic CJD (iCJD)
- Variant CJD (vCJD)

Kuru



latrogenic CJD

Table 2 Clinical features of introgenic Creutzfeldt-Jakob disease according to the mode and route of infection

Mode of infection	Agent entry into brain	Mean incubation period (range)	Clinical presentation
Corneal transplant	Optic nerve	18 and 320 mo	Dementia/cerebellar
Stereotactic EEG	Intracerebral	16 and 20 mo	Dementia/cerebellar
Neurosurgery	Intracerebral	17 mo (12–28 mo)	Visual/dementia/cerebellar
Dura mater graft	Cerebral surface	11 y (16 mo-23 y)	Cerebellar (visual/dementia)
Growth hormone	Hematogenous (?)	15 y (4–36 y)*	Cerebellar
Gonadotrophin	Hematogenous (?)	13 y (12–16 y)	Cerebellar
Blood transfusion	Hematogenous (?)	$6.5 \text{ and } 8 \text{ y}^{\dagger}$	Psychiatric

^{*} Median and range were 12 (4 to 22) years in France; 17 (8 to 27) years in the United Kingdom; and 21 (10 to 28) years in the United States. The case with the longest incubation period (36 years) occurred in a New Zealand patient (hormone prepared in the United States).

Two criteria for acquired prion disease*:

- 1) Taken from central nervous system
- 2) Placed in central nervous system, injected into body, or ingested
- *Only vCJD has been transmitted by blood transfusions

[†] The incubation period of a third case is unknown, as the transmission was discovered only by detection of the pathognomonic misfolded protein in spleen and lymph node at autopsy in a patient with neither neurologic symptoms nor brain pathology, who died from an unrelated disease 5 years after having received contaminated blood (i.e., in a preclinical or subclinical stage of Creutzfeldt–Jakob disease).

VARIANT CREUTZFELDT-JAKOB DISEASE CURRENT DATA (FEBRUARY 2015)

COUNTRY	TOTAL NUMBER OF PRIMARY CASES (NUMBER ALIVE)	TOTAL NUMBER OF SECONDARY CASES: BLOOD TRANSFUSION (NUMBER ALIVE)	RESIDENCE IN UK > 6 MONTHS DURING PERIOD 1980-1996
UK	174 (0)	3 (0)	177
France	27 (0)	-	1
Republic of Ireland	4 (0)	-	2
Italy	2 (0)	-	0
USA	4† (0)	-	2
Canada	2 (0)	-	1
Saudi Arabia	1 (0)	-	0
Japan	1* (0)	-	0
Netherlands	3 (0)	-	0
Portugal	2 (0)	-	0
Spain	5 (0)	-	0
Taiwan	1 (0)	-	1

[†] The third US patient with vCJD was born and raised in Saudi Arabia and has lived permanently in the United States since late 2005. According to the US case-report, the patient was most likely infected as a child when living in Saudi Arabia. In the fourth US patient "the history....., including extensive travel to Europe and the Middle East, supports the likelihood that infection occurred outside USA"

http://www.cjd.ed.ac.uk/documents/worldfigs.pdf

^{*} The case from Japan had resided in the UK for 24 days in the period 1980-1996.

sCJD subtypes

- A. Polymorphism (differences in code) at position 129 of the prion protein gene(MM, MV, or VV)
- B. Prion protein type (differ by size/weight) (1, 2, or VPSPr)

sCJD subtype=A+B (MM1, VV2, etc)

Subtypes vary in neuropathology and clinical characteristics.