

# **Familial Amyloidosis**

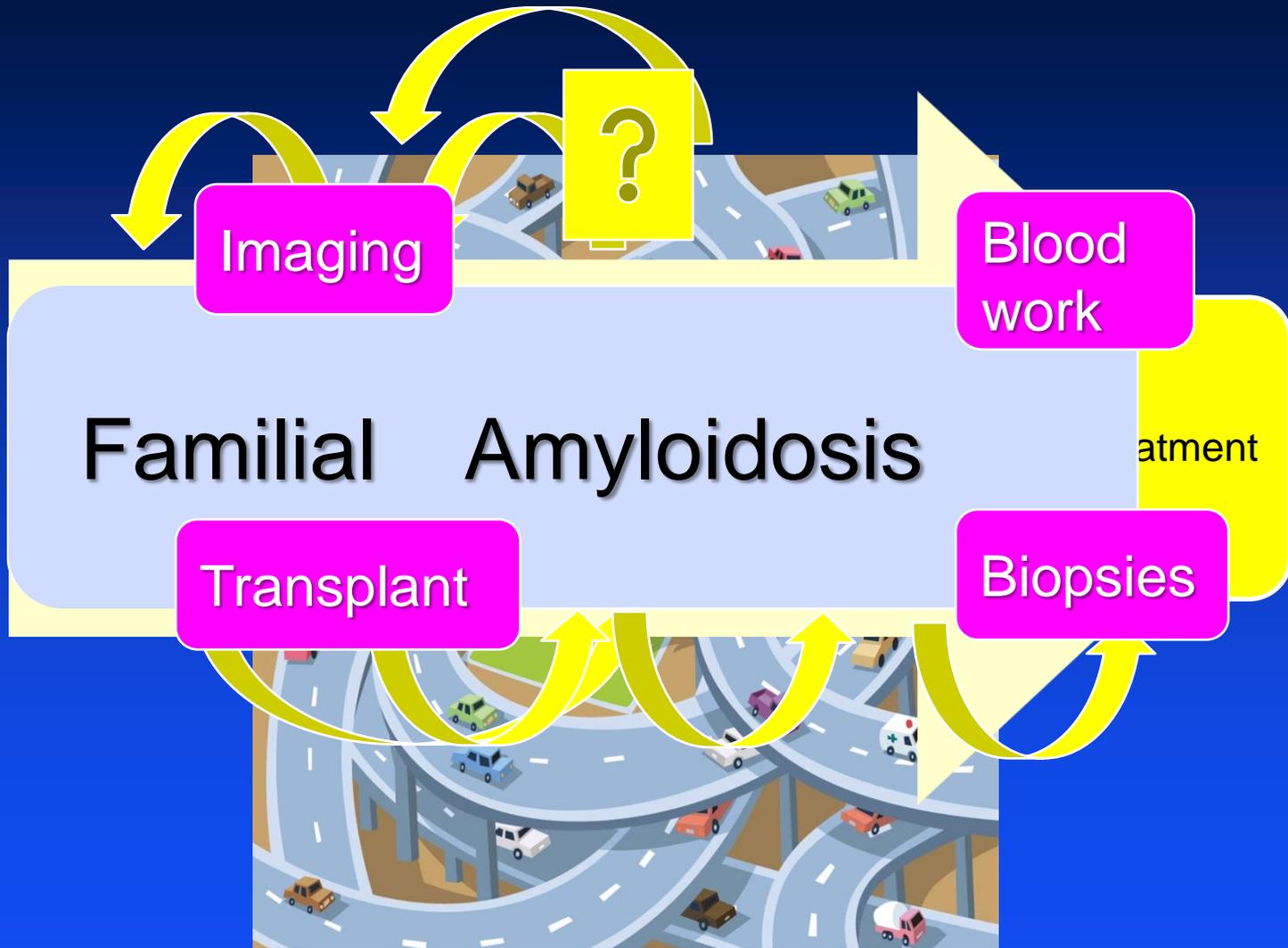
## **What Does it Mean for Your Family?**

**Sarah Mets, MS, CGC**

**Certified Genetic Counselor**

**Mayo Clinic, Rochester MN**

# The Journey



# Familial Amyloidosis

How do I tell my family?

How will they react?

How did I get this?

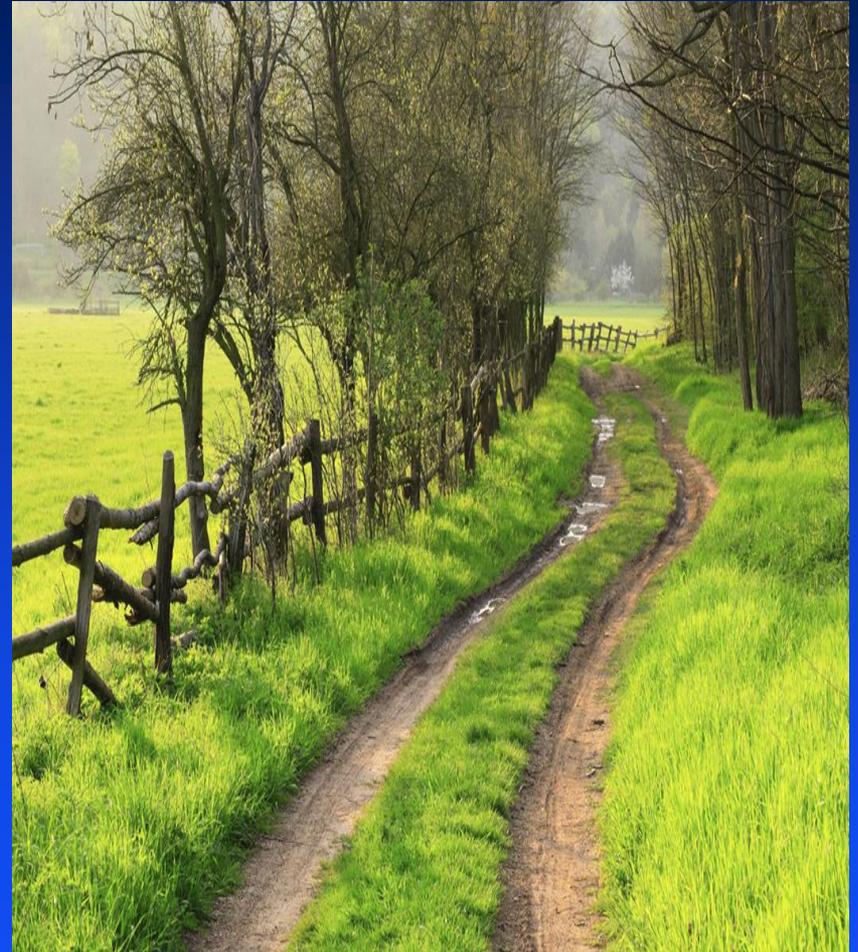
What does Val30Met mean?

Who in my family is at risk?



# Roadmap

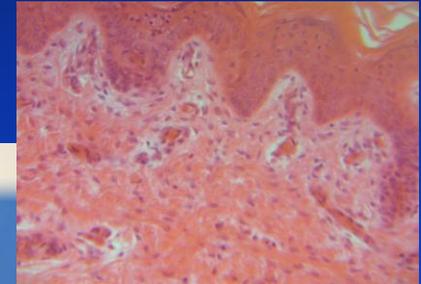
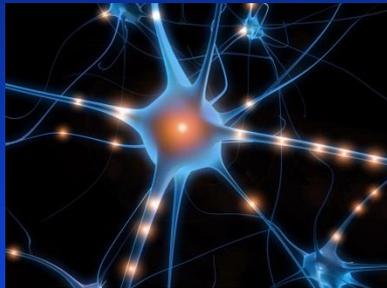
- **HOW and WHY**
  - **Genetics of Familial Amyloidosis**
- **WHO'S at RISK**
  - **Describe how Familial Amyloidosis passed on**
- **COMMUNICATION**
- **GENETIC TESTING**



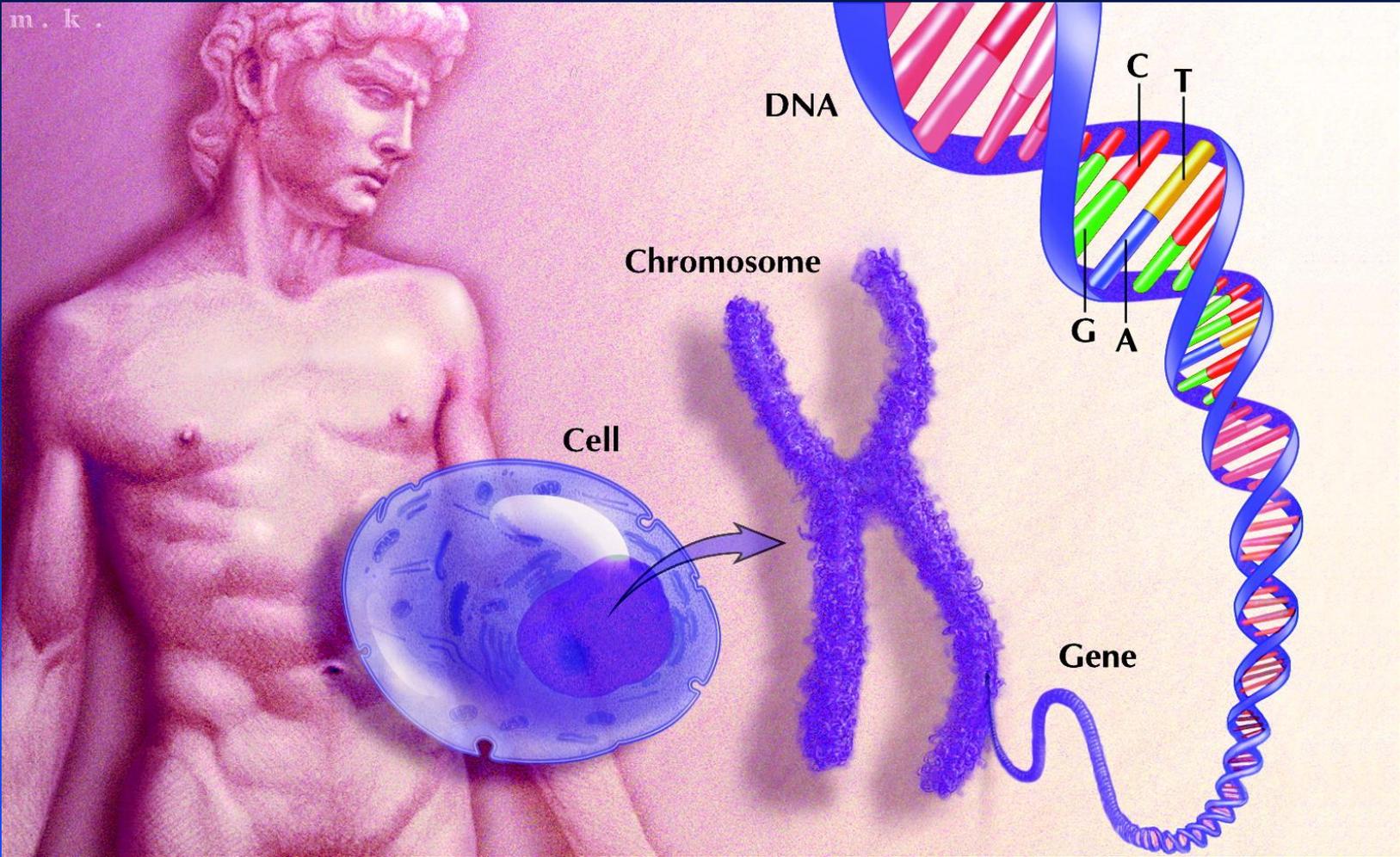
# Genetics – Back to the Basics



- Our bodies are made of millions of cells



# Cells and DNA



# DNA and Genes



- **GENES** are made up of special sequences of DNA
- Genes code for the **proteins** in our body that do the work
- GAT CCT GCA TAC GAT



# Mutations

- DNA changes result in changes in protein

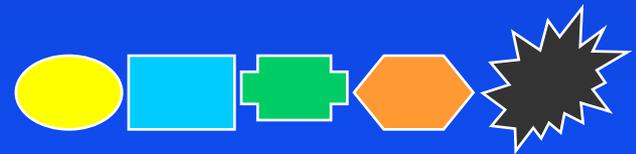
• THE CAT ATE THE RAT



• THE CAT ATE THE MAT



• THE CAT ATE THE RRT

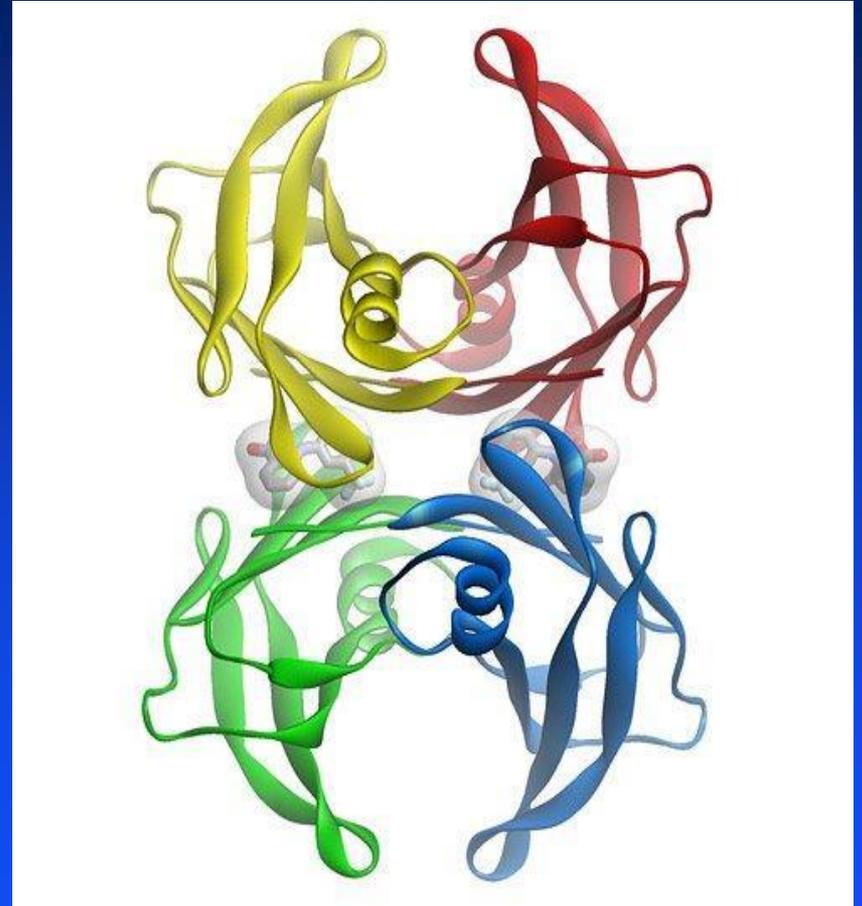


# Example: Pigment



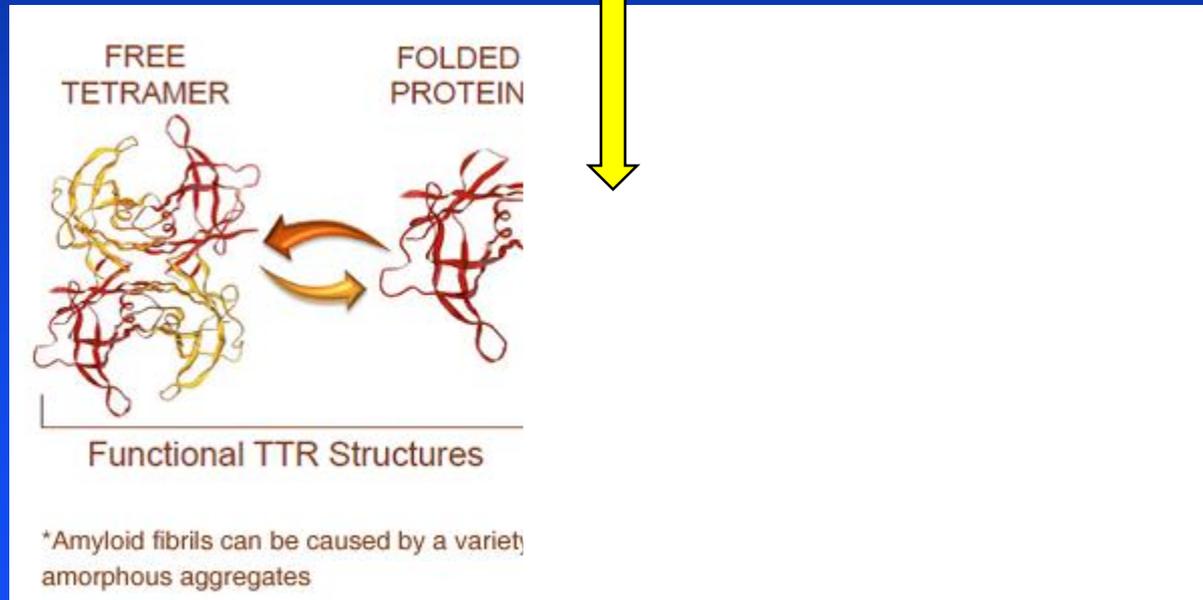
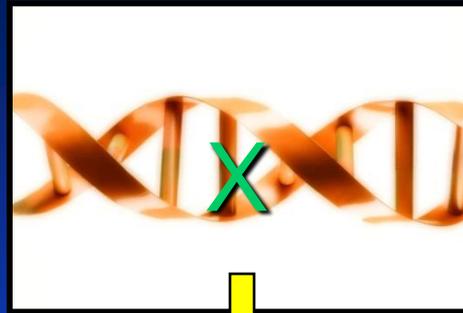
# Genetics of Familial Amyloidosis

- **Transthyretin (TTR)**
- **Carries thyroid hormone and retinol**
- **Soluble – able to be dissolved**



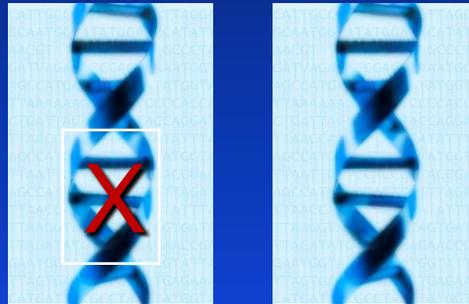
How did  
I get  
FA?

# DNA Changes can Lead to FA



# Genetics of FA

- We all have 2 copies of all of our genes, including TTR, GSN, APOA1



- Dominant Inheritance
  - A mutation in 1 of the 2 copies is enough to cause condition

# What's in a Name

What does Val30Met mean?  
(c.148G>A)

DNA

140

148



GTG GCC GTG CAT GTG

Protein



Valine (Val or V)

GTG GCC GT<sup>A</sup> CAT GTG



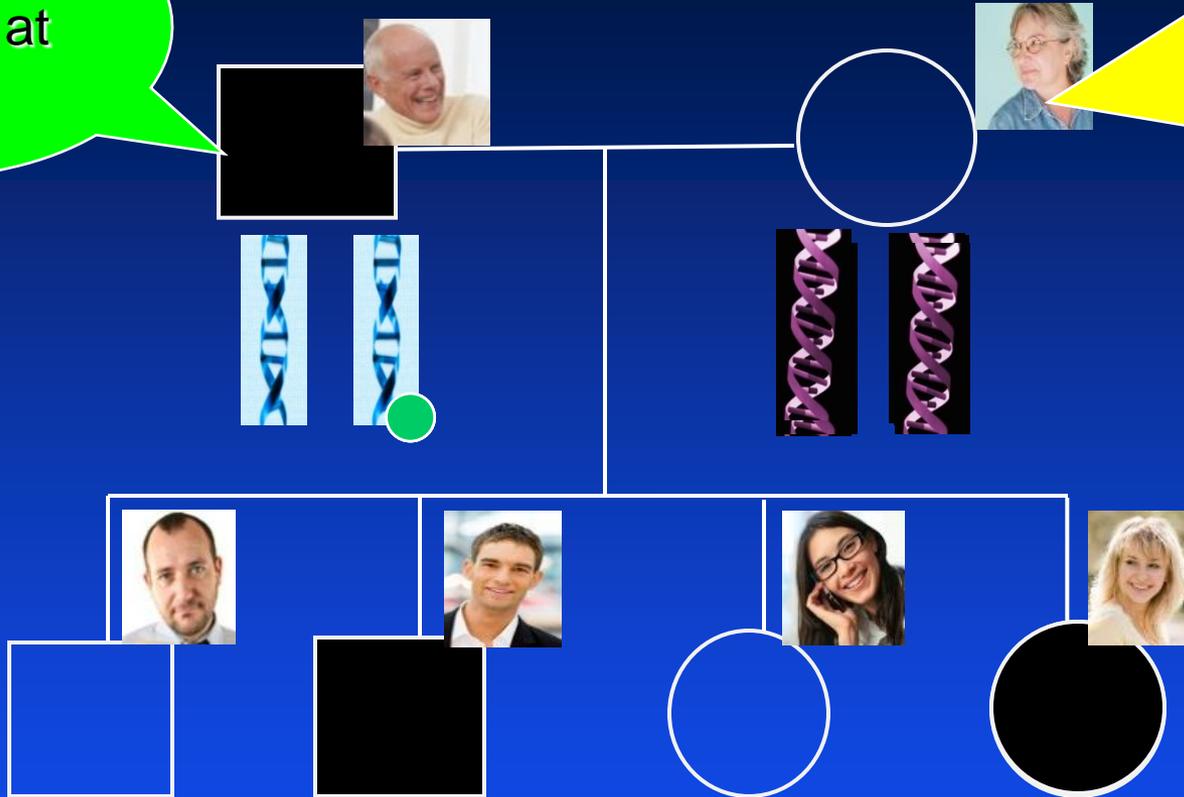
Methionine (Met or M)

# What's in a Name

- **Over 100 different mutations**
- **Specific code change may provide information about symptoms**
  - **T60A – Heart & autonomic nerves**
  - **V30M – Peripheral and autonomic Neuropathy**
  - **V122I – Cardiac**
- **Same mutation exist in a given family**

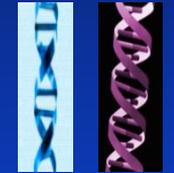
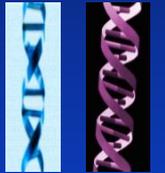
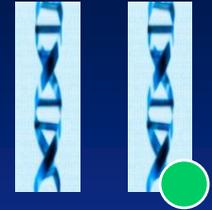
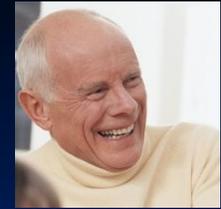
# FA is a Family Condition

Who in the family is at risk?

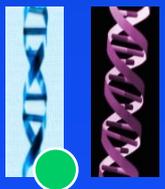


All the kids have a 50% chance of inheriting the gene with the mutation

# Genetic Testing for Family Members



- No mutation found
- Did not inherit mutation
- Further evaluations not needed



- Mutation identified
- Inherited mutation from father
- Seek care with physician and team
- Continue with regular evaluations

# Who else is at risk?



- **All first degree relatives of person with FA**
  - **Children**
  - **Parents**
  - **Brothers and Sisters**
- **Symptoms of FA are variable**
  - **Age**
  - **Symptoms**
  - **Severity**



# Should a person **with FA** have genetic testing?



- Part of diagnostic work-up
- Important in understanding cause of Amyloidosis (inherited or not)
- May provide information about what to expect medically
- Will impact treatment and eligibility to clinical trials
- Necessary to determine prior to genetic testing other family members

How do I tell my family?  
How will they react?

# Family Communication

- **Understand the condition yourself**
  - Educational info from providers
  - Patient support groups
- **Think through how your family members will respond**
  - Each will respond differently
  - Each has their own coping mechanism
  - How have they handled other information in the past

# Family Communication



- **Familial Amyloidosis**

- ~~AL~~ \ ~~AA~~ **ary (AA)**

- **Open the**

- **Family m** **uestions**  
**that are i**



- **You don't have to have all the answers**

- **Will need more than one discussion**

Should my kids have testing, when?

# Genetic Testing for Family Members

## Benefits

- “I felt like I needed to know so I could follow through with my doctor if needed, rather than being worried and having a bunch of tests I may not need if I was tested negative”

## Limitations

- “Yesterday I knew I might be at risk, today I know I am. I wonder if I would have thought about it less if I hadn’t had the test”

Should my  
kids have  
testing, **when?**

# Genetic Testing for family members

- **When is the right time for testing?**
  - “right time” and “right way”
- **Adult onset**
  - Testing of young children is not advised
- **Individual choice; informed decision**
  - Take into consideration how information will be used now – will change over time

# Making informed decisions about pre-symptomatic testing

- How will I use the information?
- How will I react if my test confirms that I am at risk?
- How will I feel if I am not at risk?
- How will my family react if some of us are found to be at risk and some are not?
- Am I able to handle the medical and psychological impact of a positive result?
- Is now the right time?

# Testing Logistics

- **Blood Draw or Cheek Swab**
- **Only looking at FA related genes**
- **Cost ~ \$800-\$1000 (TTR)**
- **Family specific testing ~ \$400-500**
- **Results 2-3 weeks**
- **Set up appropriate time for results**

# Insurance Concerns

- **Will my insurance cover it?**
  - **Possibly**
- **Will my health insurance raise my rates or deny coverage?**
- **Will my employer discriminate against me?**
  - **No – Protected by Federal Law (GINA)**
  - **Note: Life insurance not covered by this law**

# Summary

- **FA is inherited and can be passed on to the next generation**
- **Take the time to understand the condition**
- **Communicate with Family and Support Systems**
- **Genetic testing is an option for family members**
- **Work with professionals who understand FA**
- **Learning and understanding never ends**

