



The protein Matriptase-2 damaged by a novel missense mutation in the *TMPRSS6* gene originates an IRIDA-like phenotype in an African child

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Introduction

Iron-refractory iron deficiency anemia (IRIDA) is a rare autosomal recessive anemia usually unresponsive to oral iron intake and partially responsive to parenteral iron treatment¹. This disease is the result of mutations in *TMPRSS6* gene, encoding Matriptase-2, a transmembrane serine protease that plays a key role in down-regulating hepcidin, allowing iron bioavailability for erythropoiesis (Figure 1)^{1,2}.

Once *TMPRSS6* is mutated, the corresponding protein is absent or inactive at the hepatocyte membrane leading to uncontrolled high levels of hepcidin and impaired iron absorption³.

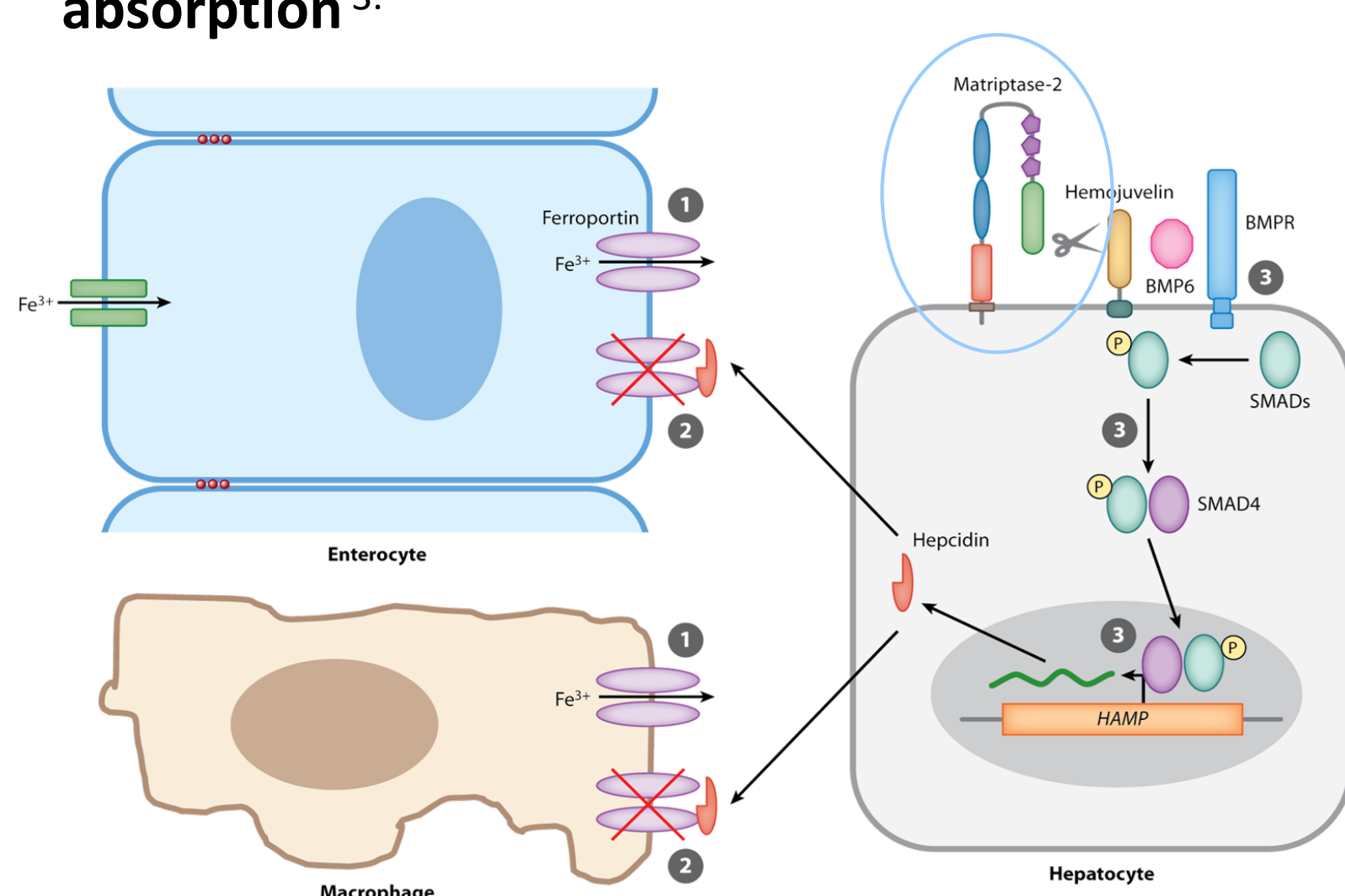


Figure 1: Matriptase-2 (circled in blue) regulates cellular iron export:

- (1) Dietary iron and iron recycled from erythrocytes are stored in enterocytes and splenic macrophages and are released to the circulation through ferroportin;
- (2) Hepcidin produced by hepatocytes binds ferroportin and targets the channel for degradation.
- (3) Hepcidin gene (*HAMP*) expression is positively regulated by bone morphogenic protein (BMP)6, which signals through the BMP receptor (BMPR)-SMAD pathway in a hemojuvelin-dependent manner. Matriptase-2 increases cellular iron export by degrading hemojuvelin to reduce hepcidin production and thus increase ferroportin².

Material and Methods

The subject is a α -^{3.7kb}-thalassemia carrier. *TMPRSS6* gene was screened for variants by Next-Generation Sequencing using Nextera XT libraries in a MiSeq platform (Illumina). Genetic variants found were validated by Sanger sequencing. *In silico* analyses were performed in HSF, SIFT, Poly-Phen2 and Missense3D softwares. In order to run a Missense3D analysis, we predicted a 3D Structure for matriptase-2 in the software Phyre2.

Table 1: Hematologic parameters and iron status of the patient before and after intravenous iron treatment in comparison to reference values

Hematologic and biochemical parameters	1-4 years old Reference	Patient Iron treatment	
		Before	After
RBC (x10 ¹² /L)	3.50–5.30	4.51	4.38
Hb (g/dL)	10.7–15.1	9.8	10.2
Ht (%)	31.0–45.0	31.7	33.1
MCV (fL)	72.0–100.0	70.3	75.6
MCH (pg)	23.8–34.2	21.7	23.3
MCHC (g/dL)	31.6–34.9	30.9	30.8
RDW (%)	11.6–13.9	17.7	16.6
Fe (µg/dL)	62–68	19	51
TIBC (µg/dL)	228–428	313	273
TSAT (%)	16.0–45.0	6.07	18.68
Ft (µg/L)	30.0–300.0	33.0	242.3

Aims

This study aimed to investigate a 4-year-old boy of sub-Saharan ancestry (Mozambique/Angola), presenting with microcytic hypochromic anemia, low transferrin saturation, normal ferritin, and having a partial response to intravenous iron treatment (Table 1).

Results and Discussion

✓ **DNA analysis** revealed a novel missense mutation c.871G>A in heterozygosity, in *TMPRSS6* exon 8. Additionally, 3 SNPs previously associated with a greater risk of developing iron deficiency anemia (K253E, V736A and Y739Y) were also identified (Figure 2). At protein level, the novel variant gives rise to the G291S mutation, located in the first CUB1 domain, which suggest it may affect the enzyme activation and substrate recognition (Figure 2).

✓ **In silico analysis** indicates the conserved amino acid G291 change may be damaging to the protein stability (Figure 3).

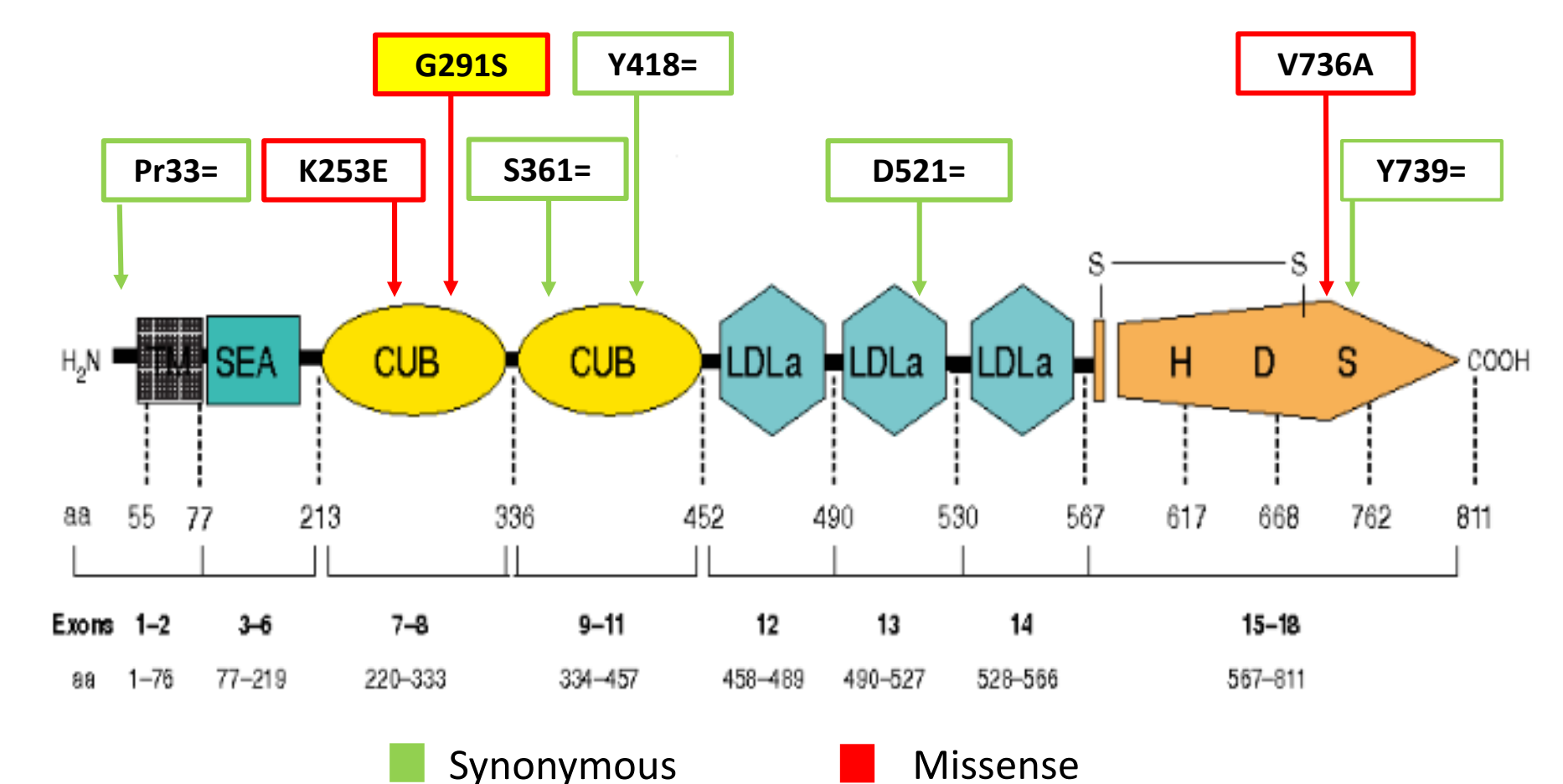
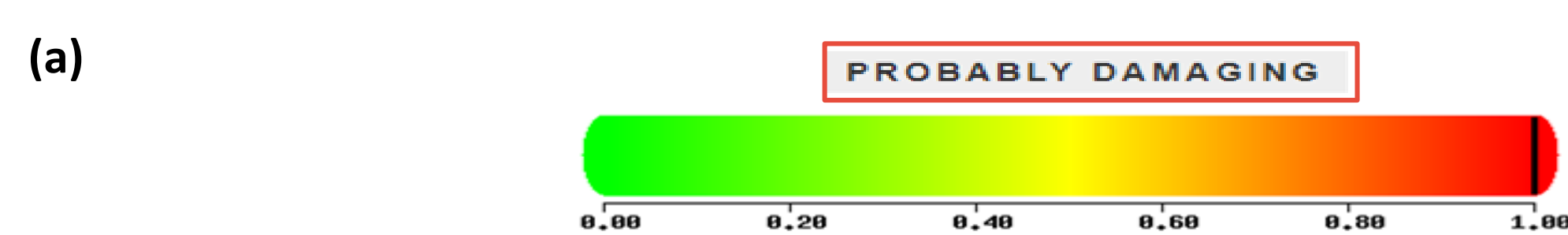


Figure 2: Schematic model of matriptase-2. Structurally, matriptase-2 contains a short N-terminal cytoplasmic domain, a membrane-spanning region (TM), an SEA domain, 2 CUB domains, three LDLa domains, and a trypsin-like serine protease domain. Coding region mutations are indicated by arrows. The novel G291S mutation is highlighted in yellow. Adapted from Lee *et al.* 2009⁴



(b)

dbSNP	# CHR	POS	REF_ ALLELE	ALT_ ALLELE	AA_ CHANGE	SIFT_ SCORE	SIFT_ MEDIAN	#_SEQS_AT_ POSITION	SIFT_ PREDICTION
rs145053404	22	37482452	G	A	G291S	0	3.01	22	DELETERIOUS

(c)

#	Variants	Analysis Results
1	final (-) 291 GLY > SER	Cavity altered Gly in a bend

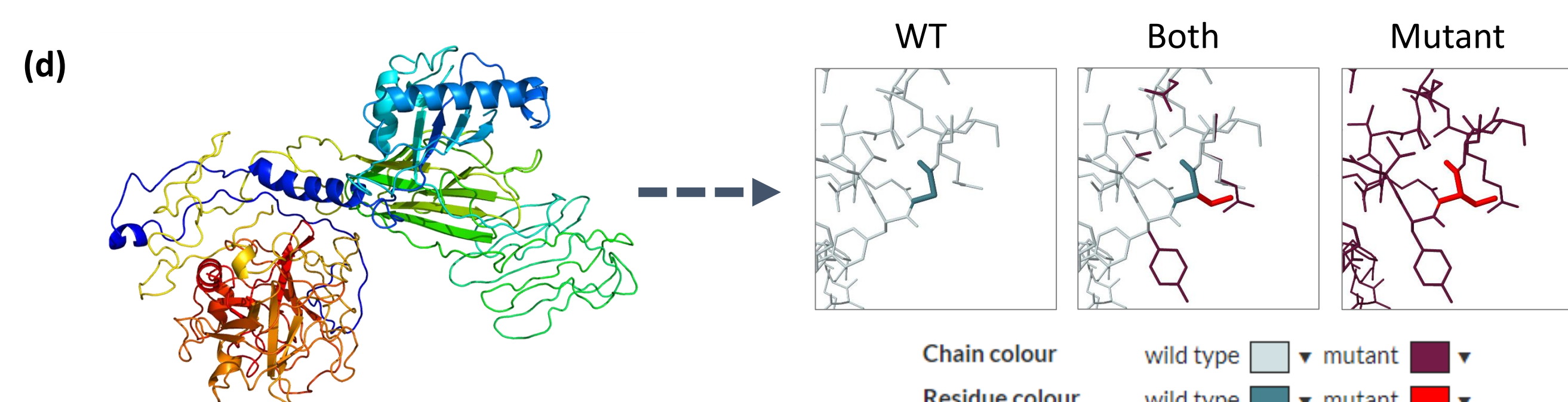


Figure 3: Results from *in silico* analysis showing potential damage to the protein stability. Results from:

- Poly-Phen2** that takes into consideration differences between human proteins and homologous proteins in other mammals (score = 1.000);
- SIFT**, that assumes the importance of one amino acid based on its level of conservation within protein the family;
- Missense3D**, that perceives the importance of a amino acid based on 3D structure of the whole protein;
- Also in **Missense3D** we can compare, based on the predicted structure for matriptase-2 obtained in the software Phyre2, with 90% of confidence, the amino acids alteration consequence in the protein structure.

Conclusions

Although IRIDA is noted as an autosomal recessive disease, we infer that, in this case, the result of a digenic inheritance of the novel damaging mutation (c.871G>A; G291S) and 3 common modulating SNPs in the same gene in addition to the co-inheritance of the α -thalassemia allele, may add up to an IRIDA-like phenotype. Further functional studies of the mutated protein as well as family studies should be conducted.

References

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The authors declare no conflict of interest.