

Evaluation of the AmplideX[®] SMA Plus Kit for comprehensive *SMN1*/*SMN2* analysis in Spinal Muscular Atrophy

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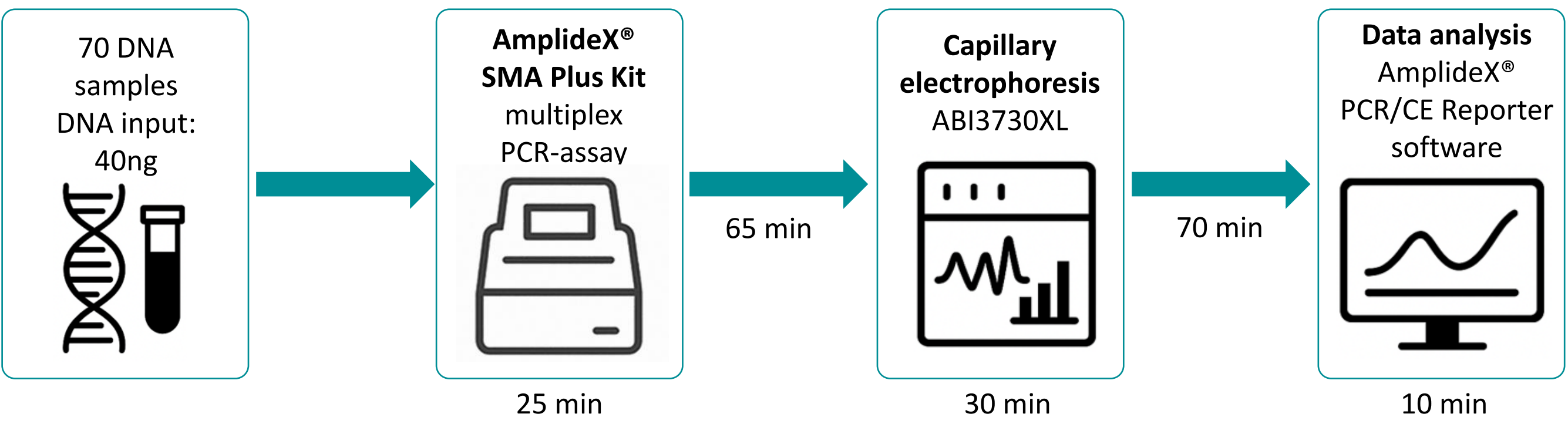
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Objectives |

- **Spinal muscular atrophy (SMA)** is an autosomal recessive neuromuscular disorder characterized by progressive muscle weakness and atrophy caused by **copy number variations** or mutations in the *SMN1* gene. Disease severity is modulated by the number of *SMN2* gene copies.
- Recent studies have highlighted the potential influence of **specific modifiers**: the *SMN2* c.859G>C variant, which is associated with a milder phenotype, and the *SMN1* variants c.*3+80T>G and c.*211_*212del, which are linked to *SMN1* duplication and silent carrier status. However, the clinical significance of these *SMN1* variants is ethnicity-dependent, particularly important in Asian, Spanish and Ashkenazi Jewish populations.
- **Accurate and fast molecular analysis** is essential for confirming diagnosis in symptomatic **patients** and facilitating early access to targeted therapies given that SMA is a leading genetic cause of infant mortality, and for identifying **carriers** in the context of reproductive counseling as ~1 in 45 individuals in the Caucasian population is a SMA carrier.

This study aimed to evaluate the performance of the AmplideX[®] SMA Plus Kit (Asuragen, CE-IVD) for simultaneous *SMN1*/*SMN2* copy number analysis and detection of clinically relevant variants and hybrid genes.

Methods |



- Data analysis was performed using AmplideX[®] PCR/CE Reporter software with a user-defined calibration and control sample; and user-defined bin settings to accommodate for the used extraction method (MagCore DNA extraction).
- Copy number results of *SMN1* and *SMN2* were compared with MLPA results (P021 kit, MRC Holland).

Results and discussion |

Copy number determination

Accurate identification of *SMN1* and *SMN2* copy number:
0 (SMA diagnosis), 1 (carrier), 2, 3, >4

| SMN1 copy number result (MLPA P021 kit) | SMN1 copy number result (AmplideX [®] SMA Plus Kit) | | | | | |
|---|--|----|----|----|---|----|
| | 0 | 1 | 2 | 3 | 4 | |
| | 0 | 10 | | | | 10 |
| | 1 | | 11 | | | 11 |
| | 2 | | 1 | 36 | | 37 |
| | 3 | | | 7 | | 7 |

98% concordance with MLPA in determining *SMN1* copy number

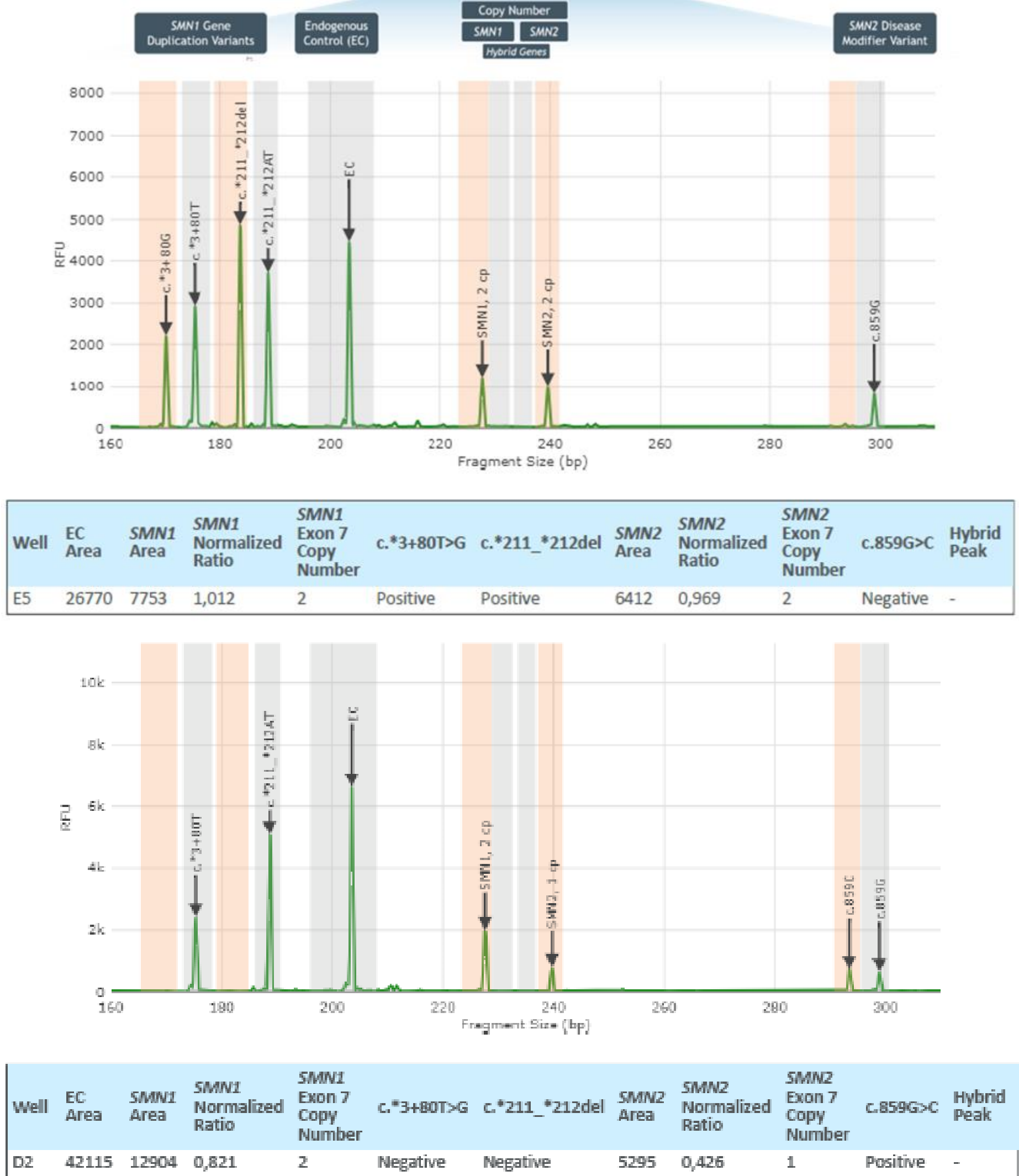
| SMN2 copy number result (MLPA P021 kit) | SMN2 copy number result (AmplideX [®] SMA Plus Kit) | | | | | |
|---|--|---|----|----|---|----|
| | 0 | 1 | 2 | 3 | 4 | |
| | 0 | 8 | | | | 8 |
| | 1 | | 19 | | | 19 |
| | 2 | | | 24 | | 24 |
| | 3 | | | | 8 | 8 |

100% concordance with MLPA in determining *SMN2* copy number

Analysis of **70 DNA samples**:

- for **66 samples** the copy number for *SMN1* and *SMN2* was calculated
 - 1 sample showed a discordant *SMN1* result compared to MLPA: SNP analysis is in progress
- 1 sample showed a *SMN1* hybrid peak
- 3 samples were 'Marked for Rerun' during data analysis
 - 1 sample had insufficient DNA concentration
 - 2 samples showed *SMN1* normalized ratios outside defined BIN thresholds:
 - one extracted from a Coriell cell line (different source material)
 - one with 4 *SMN1* copies confirmed by MLPA showing a normalized ratio between 3 and 4 copies

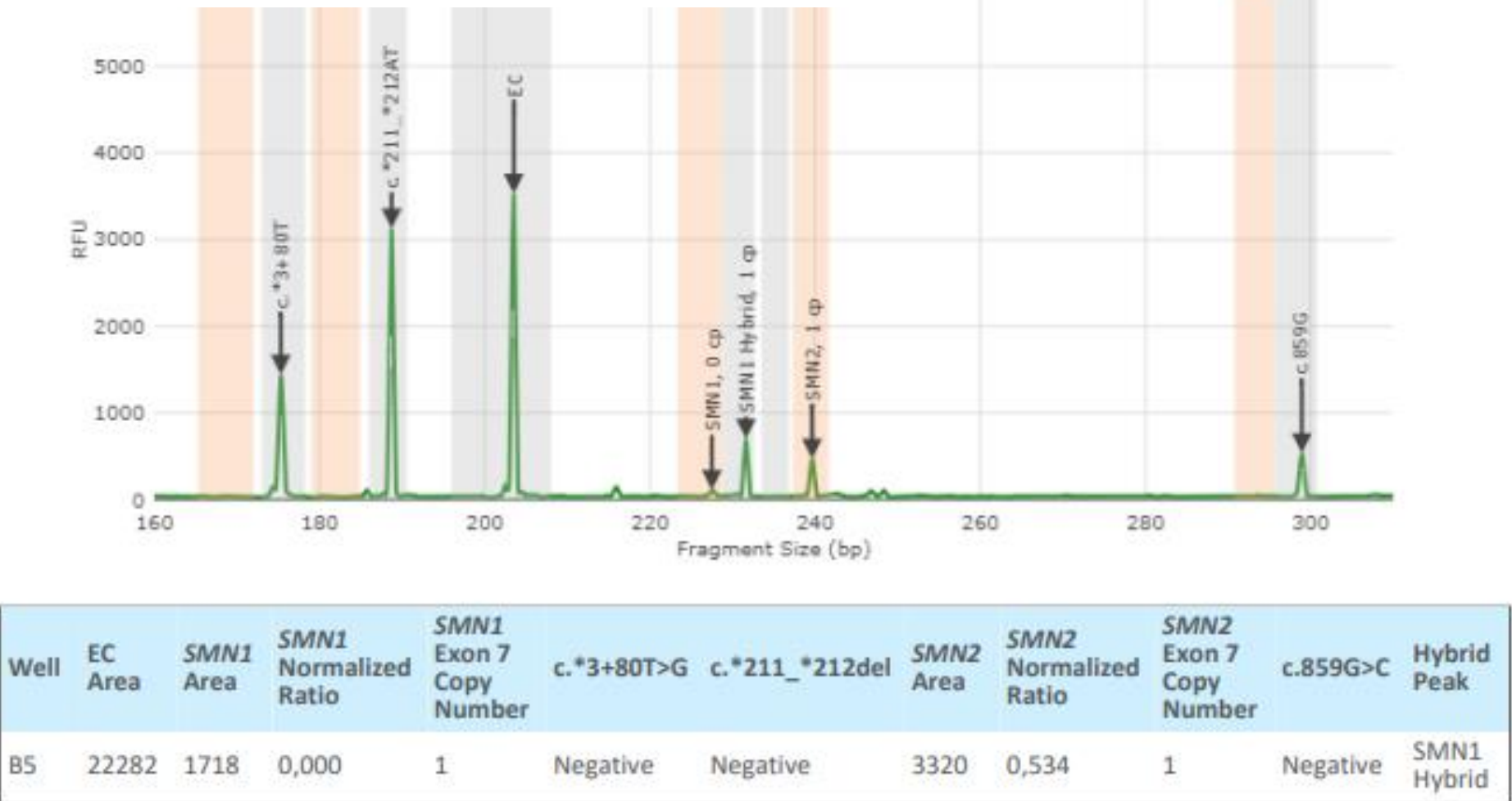
Variant detection



SMN1 variants c.*3+80T>G and c.*211_*212del, associated with increased risk of silent carrier status, were observed in 4 samples. Further evaluation of family members is recommended to confirm carrier status.

SMN2 variant c.859G>C detected in 1 sample: in affected patients this variant is associated with a milder phenotype. In this sample *SMN1* copy number was normal.

Hybrid gene detection



SMN1-*SMN2* hybrid peak detected (chimeric gene with both *SMN1* and *SMN2* sequences) in 1 sample. Further evaluation is ongoing (discordant result with MLPA – total of 2 *SMN1* copies).

Conclusions and future perspectives |

The implementation of the AmplideX[®] SMA Plus Kit streamlines SMA genetic analysis by providing a comprehensive, fast, and high-throughput solution for both **diagnostic and carrier screening**.

Our evaluation of the AmplideX[®] SMA Plus Kit in a routine diagnostic laboratory setting demonstrated the following key findings:

- Comprehensive **SMA genotyping** in 1 single assay, enabling detection of both copy number variations and variants associated with milder phenotype or silent carrier status.
- **End-to-end solution** including all reagents in 1 kit and automated result calling using AmplideX[®] PCR/CE Reporter software.
- Higher **reagent costs**, but significantly shorter workflow compared to MLPA (same-day results; **turnaround time <4 hours** from DNA to result),
- **Ongoing validation** on additional samples, as well as in-depth evaluation of discordant results and assessment of inter- and intra-run precision will be essential before implementation can be considered in routine diagnostics and carrier screening programs, including the confirmation of positive **newborn screening** results.