

Diagnosis First



Cornelia de Lange Syndrome 1: 10.000 - 1: 30.000 Severe developmental delay with characteristic features



1981 Chromosome Abnormality ??

Prometaphase Chromosomes in Five Patients With the Brachmann-de Lange Syndrome

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Departments of Pathology, Pediatrics and ton and Children's Orthopedic Hospital and Washington (E.J.B., C.D., J.G.H.); Genetics Department of Social and Health Services ics Program, Walla Walla, Washington (P.C.

We analyzed the prometaphase chromosomes of sibs) with the Brachmann-de Lange syndrou significant chromosome abnormality in any of tinct entities can be distinguished on clinical ariand the dup(3q) syndrome. We still recommentients with BDLS and BDLS-like manifestation

NIPBL, encoding a homolog of fungal Scc2-type sister chromatid cohesion proteins and fly Nipped-B, is mutated in Cornelia de Lange syndrome

2003 DNA mutation

Cornelia de Lange syndrome (CdLS) is a multiple malformation disorder characterized by dysmorphic facial features, mental retardation, growth delay and limb reduction defects^{1,2}. We indentified and characterized a new gene, NIPBL, that is mutated in individuals with CdLS and determined its structure and the structures of mouse, rat and zebrafish homologs. We named its protein product delangin. Vertebrate delangins have substantial homology to orthologs in flies, worms, plants and fungi, including Scc2-type sister chromatid cohesion proteins, and D. melanogaster Nipped-B. We propose that perturbed delangin function may inappropriately activate DLX genes, thereby contributing to the proximodistal limb patterning defects in CdLS. Genome analyses typically identify individual delangin or Nipped-Blike orthologs in diploid animal and plant genomes. The evolution of an ancestral sister chromatid cohesion protein to acquire an additional role in developmental gene regulation suggests that there are parallels between CdLS and Roberts syndrome.

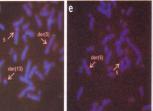
Figure 1 FISH mapping of a 5p13 translocation breakpoint in an individual with classical CdLS. (a) Individual with classical CdLS with characteristic limb and facial abnormalities (including an upturned triangular nose, long philtrum, thin upper lip, downturned corners of the mouth; see fuller description for individual P46 in Table 1). (b) Giemsa chromosome banding showing a balanced de novo t(5;13)(p13.1;q12.1) translocation. (c-e) Metaphase chromosome FISH with the breakpointspanning BAC clone CTD-2653m23 (c) and overlapping fosmid clones G248P84262B4 (d) and G248P8840C10 (e), all labeled with Spectrum Red. Labeled in green is a chromosome 5q telomere-specific probe. Arrows indicate the normal chromosome 5 and the der(5) t(5:13)(p13.1:q12.1) and der(13) t(5:13)(p13.1:q12.1) chromosomes. In occasional metaphases a weak G248P84262B4 signal can be detected on the der(5) chromosome as well as a strong signal on the der(13). The combined data suggest that the most likely location for the breakpoint is close to the proximal end of the region of overlap for inserts of G248P84262B4 and G248P8840C10 (Fig. 2a).

The multisystem nature of the CdLS phenotype suggests that it is caused by a microdeletion or microduplication affecting several genes or by a single gene that regulates various target genes. A high-density BAC microarray comparative genome hybridization screen found no evidence for a consistent pattern of microdeletion or microduplication³. Because CdLS is rare and most cases are sporadic, genome-wide linkage screens are problematic. As an alternative, we analyzed chromosomal breakpoints associated with CdLS, focusing first on three classical cases with de novo balanced translocations, including the

previously described translocations t(3;17)(q26.3;q23.1)4 and

t(14:21)(g32;g11)5. We first analyzed the 3g26.3 breakpoint because of





SMITH'S Recognizable Patterns of Human Malformation

Sri Lanka, Kandy 21-09-2018

Abandoned





2014 - 2018

Georgia has become one of the first ex-Soviet republics to abolish state orphanages in favour of foster care.

But disabled children continue to be marginalised and face the prospect of lifelong isolation from society.

www.bbc.com/news/world-europe-25575094

Sickle cell disease

1.1% of couples worldwide are at risk for having children with a haemoglobin disorder WHO: Africa majority of children with the most severe form of the disease die before the age of 5, usually from an infection or severe blood loss



WHO, 7 December 2010

Fact sheet N°172

 A collaborative management approach at primary health care level with patients, their families and other health care actors is a must to effectively prevent many major contributors to the burden of disease.

Essential elements for action

- Support a paradigm shift towards integrated, preventive health care
- Promote financing systems and policies that support prevention in health care
- Equip patients with needed information, motivation, and skills in prevention and self-management
- Make prevention an element of every health care interaction
 Sri Lanka, Kandy 21-09-2018

Rare Diseases Global Action

EURORDIS, Vienna, May 2018





RD as a Collective Health and Social issue

European Conference on Rare Diseases & Orphan Products

- RD Universal Health Coverage
- Access to Diagnostics
- Access to Medicines / fair pricing
- Inclusion in the Non- Communicable Disease agenda
- RD in the Sustainable Development Goals

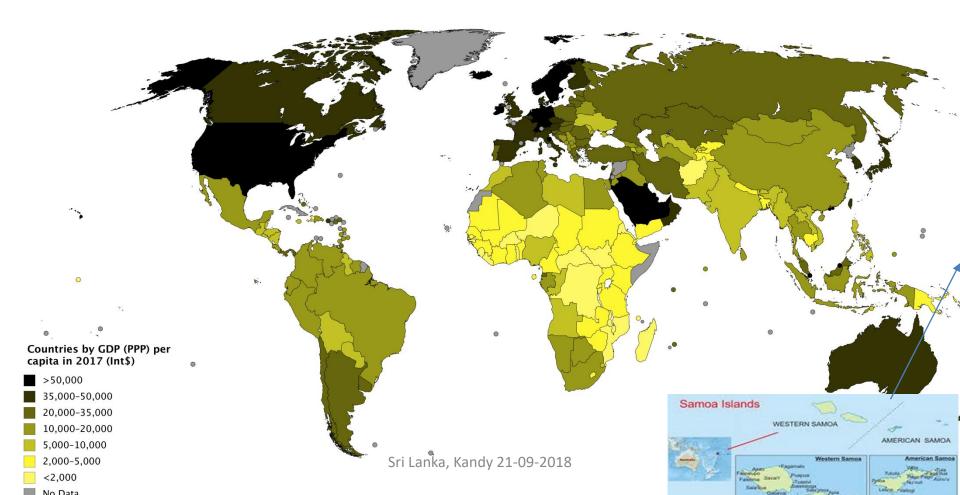




Bruck Syndrome 1: 1.000.000 world wide; bone fractures, limited movement, high incidence Samoa Islands

Gross Domestic Product per Capita in Purchasing Power Parity per capita

estimated by IMF for year 2017



Brugada syndrome 5-50: 10.000; higher in south east Asia, recognizable through ECG abnormality



Sri Lanka College of Paediatricians is hosting the 6th Global Congress for Consensus in Paediatrics and Child Health

CIP 2017

COLOMBO, SRI LANKA November 12-15, 2017

www.cipediatrics.org



Revesz Syndrome: Rare Variant of Dyskeratosis Congenita. A Case Report Imalke Kankananarachchi¹, Nuwan Wickramasinghe², Su eewa Am Sadani Vithana², Thilina Madushanka²

¹Paediatrics, Faculty Of Medicine University of Ruhuna, Sri Lanka ²University Paediatric Unit, Teaching Hospital Karapitiya, Sri Lanka

PP54:

PP78:

Oculo-Auricular- Vertebral (Oav) Spectrum Disorders: Experience From Sr WMDAS Wanninayake¹, Romesh Gunasekera², Saman Yasawarden Basnayake⁴, Malka Jayathilake⁵, DDC Nilini⁶, De pthi de Silva⁷

¹Demonstrator, Department of Physiology, Faculty of Medicine, Un Kelaniya, Sri Lanka, *Consultant Plastic Surgeon, Lady Ridgway Hos

Colombo, Sri Lanka

³Consultant ENT Surgeon, Lady Ridgway Hospital, Colombo,

⁴Lady Ridaway Hospital, Colombo, Consultant Orthodontist,

⁵Speech and Language Therapist, Lady Ridgway Hospital, Col ⁶Research Assistant, Department of Chemistry, Faculty of Sci

PP65:

A Child with a Limp-A Presentation of Maccune Albright Sync

Gayan Sampath¹, Sadani Vithana², Charith Udagedara Navoda Atapattu³

¹Peadiatrics, Provincial General Hospital, Ratnapura, Si

²Paediatrics, Teaching Hospital-Karapitiya, Sri Lanka

³Paediatrics, Lady Ridgeway Hospital for Children, Sri Lanka

Are Sri Lankan Children with Congenital Adrenal Hyperplasia at Risk of Morbidity and Mortality in the Absence of Newborn Screening?

Partial 1Q Trisomy Syndrome Due Maternal T(1;4) Balance Translocation; A Case Report

R.J.M.K.A Jayasundara¹, M.D.C.J.P. Jayamanne¹, G.B.A.M. Rathnasiri¹, S. Mayoorathy1, Ranmali Rodrigo

¹Colombo North Teaching Hospital, Registrar in Paediatrics, Sri Lanka ²Faculty of Medicine, University of Kelaniya, Consultant Neonatologist, Sri

Department of Chemistry, Faculty of Science, University of Colombo, Research Assistant, Sri Lanka, ²Department of Physiology, Faculty of Medicine, University of Kelaniya, Demonstrator, Sri Lanka, 3Lady Ridgway Hospital, Consultant

⁴Department of Human Genetics, Radboud University Medical centre, Nijmegen, the Netherlands, Clinical Laboratory Geneticist, Netherlands ⁵Department of Physiology, Faculty of Medicine, University of Kelaniya,

180 Posters 36 Rare Diseases 24 from Sri Lanka

Oculocerebrorenal Syndrome of Lowe - A Case Report

Sadani Vithana¹, Imalke Kankananarachchi¹, Thilina Madusha Wickramasinghe¹, Sujeewa Amarasena¹, Harshini Dharmawai

 1 professorial unit, Paediatrics, Teaching Hospital Karapitiya, S ²paediatric Nephrology, Teaching Hospital Karapitiya, Sri Lan

A Case Report

Randula Ranawaka¹, Nirmala Sirisena², Kavinda Dayasiri³, Manoji Gamage⁴, Andrea Cogal⁵ John Lieske⁵ Vajira Dissanavake²

¹Department of Paediatrics, Faculty of Medicine, University of Colombo, Sri

²Human Genetics Unit, Faculty of Medicine, University of Colombo, Sri Lanka ³University Paediatric Unit, Lady Ridaeway Hospital for Children, Colombo, Sri

⁴Human Nutrition Unit, Lady Ridgeway Hospital for Children, Colombo, Sri

⁵Rare Kidney Stone Consortium/Dent Disease Program, Mayo Clinic Division of Nephrology and Hypertension, USA

Navabalasooriyar Pratheep, Kavinda Dayasiri, Nalin Kitulwatte Medical Intensive Care Unit, Lady Ridgeway Hospital for Children, Sri Lanka

PP50:

A Paediatric Case of Brugada Syndrome

Navabalasooriyar Pratheep, Kankananarachchi Imalke, Kitulwatte Nalin Medical Intensivecare Unit, Lady Ridgeway Hospital for Children, Sri Lanka

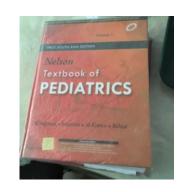
SN Seneviratne, HGU Sandakelum, WAAM Weerasinghe, WAPS Wickramarachchi, KSH de Silva Department of Paediatrics, Faculty of Medicine, University of Colombo, Sri Lanka

Dyskeraotosis congenita X-linked recessive (OMIM 305000), autosomal dominant (OMIM 127550), and autosomal recessive (OMIM 224230)



Rare Diseases Forum

- Well trained and experienced paediatricians
- Families have their own data and are co-managing
- Little access to diagnostic tests
- Little access to internet
- No facilities for electronic data collections



With limited resources: accurate diagnosis!

Rare Diseases Paediatric Global Action

What can paediatricians do to improve health and wellbeing of children with a rare and disabling condition and their families?

RECOGNIZE

- strengthen primary paediatric care with sufficient knowledge
- advocate for access to proper diagnostics and treatment
- collect and share data
- support families

Turner syndrome: 50 per 100,000 liveborn females; coarctation of the aorta and bicuspid aortic valve reduce life expectancy

> Primary Health Care can meet 80-90% of an individual's needs over the course of their life http://www.who.int/primary-health/en





@WHO Europe 7 sep.

#PrimaryHealthCare has a strong focus on quality of care.

Quality health services, build trust in patients and encourage individuals to engage in their health and the health of their families. We cannot have Health For All without guality care. Sri Lanka, Kandy 21-09-2018

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Next Generation Sequencing







Welcome to NGS

The massively parallel sequencing technology known as next-generation sequencing (NGS) has revolutionised the biological sciences. With its ultra-high throughput, scalability, and speed, NGS enables researchers to perform a wide variety of applications and study biological systems at a level never before possible.

https://www.illumina.com/science/technolog y/next-generation-sequencing.html



Fabry 1: 40 - 60,000 males Fabrazyme X linked, pain skin pigmentations, Heart disease, stroke

Orphan Drugs: European Academy of Paediatrics position statement on the Paediatric Regulations and Rare diseases December 2017

- Rare diseases should not be overlooked in discussing how to improve impact of Paediatric Regulation
- Developers of medicines for rare paediatric diseases need to comply with both the Orphan and Paediatric Regulations. Decisions of the Orphan and Paediatric Committees should be aligned.
- To improve the availability of high quality medicines for use in children, transparency on development costs and agreement on maximum price, is warranted.
- The price should match a considerable and measurable clinical benefit.

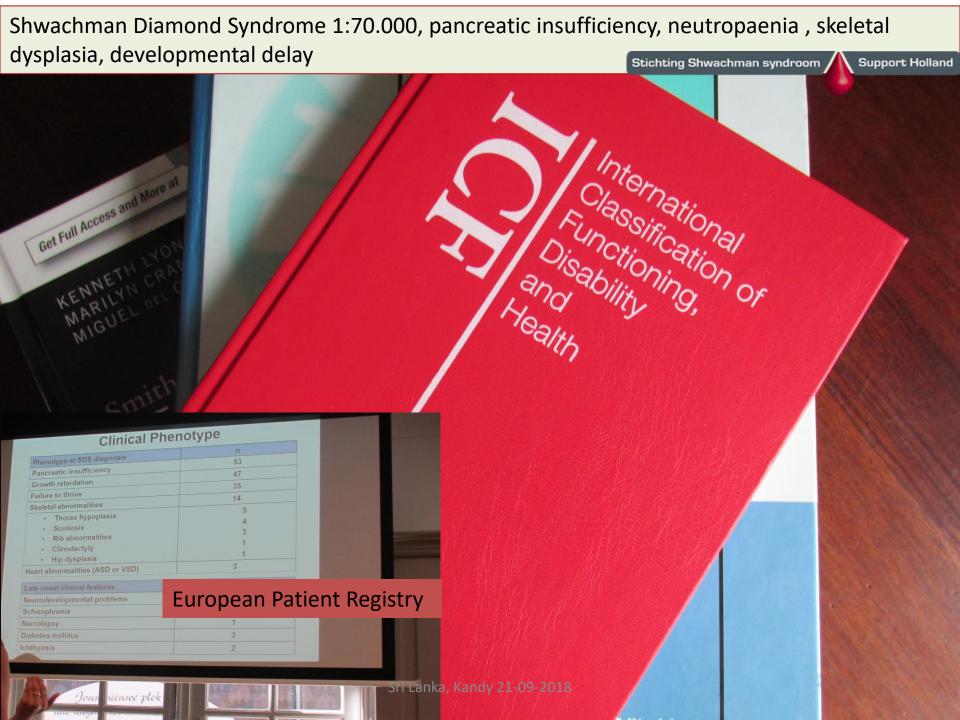
Retinoblastoma, 3.4 to 42.6 cases per million live births eye tumor, screening in recognizable signs

Rare Diseases Paediatric Global Action

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Building the Rare Disease

knowledge and information ecosystem

Thalassemia, 3500 patients have been identified in Sri Lanka.

RareCare.World

thalassemia

SEARCH

Find and share knowledge about

Rare diseases all over the world

ATC

- L01XX05 Hydroxycarbamide (Hydroxyurea) (1)
- V03AC01 Deferoxamine (1)
- V03AC02 Deferipron (1)
- V03AC03 Deferasirox (1)

ICD

· D57 Sickle-cell disorders (1)

ICPC Reference

- B78.01 Thalassemia (1)
- B87 Splenomegaly (1)

LOINC

OMIM

- 718-7 Hemoglobin in blood (1)
- 20567-4 Ferritin in Serum or Plasma (1)
- 46740-7 Hemoglobin disorders newborn screen interpretation (1)
- 53857-9 Hemoglobin F (1)

fractures or vertebral deformities. Thalassemia major or Beta Thalassemia ...

Rare Condition

Thalassemia major or Beta Thalassemia

Large spleen

Feature

... costal margin. A large spleen is a feature of for example **Thalassemia** Infections Nieman Pick disease Gaucher disease Splenomegaly Splenomegaly in **thalassemia Thalassemia** major or Beta **Thalassemia** ...

Rare Condition

Thalassemia major or Beta Thalassemia

Symptom

Splenomegaly in thalassemia

Abnormality

Splenomegaly

Carrier screening thalassemia

Symptom

... Carrier screening **thalassemia** Related family members with elevated HbA2 In carrier screening for the classical beta-**thalassemia** trait, the hallmark is the presence of an ... 2 (α 2 δ 2). Another way of identifying people with **thalassemia** major is neonatal screening. Neonatal screening ...

Rare Condition

Thalassemia major or Beta Thalassemia andy 21-09-2018

Disease

Hemoglobinopathies



			Collaborative care			
www.shwachman.nl	Growth retardate Recurrent infect (LOINC)	tions	Guideline SDS (Orphanetcode; SNOMED, ATC e.a.)		Recurrent illness Fatigue, Short (ICF-CY; ISO 9999)	
Ne	w Diagnostics LOINC ICPC	Diagnosis Hurler syndrome PKU, Duchenne MD, FOP Shwachman Diamond Syndrome Orphanetcode OMIM SNOMED -CT				
	Sign primary care Heelstick screening Hearing screening Growth; Development			Guideline Collaborative Health Care		
	ISO 3166-1 HL7	ISO9999				erapeutics
	Data collection Systematically of computer production med	on with organised cessable	Social reh	iuideline I services and nabilitation		1 00

Diagnosis

Social Services

Patient Informatiom

Primary Care

Rare Diseases Paediatric Global Action

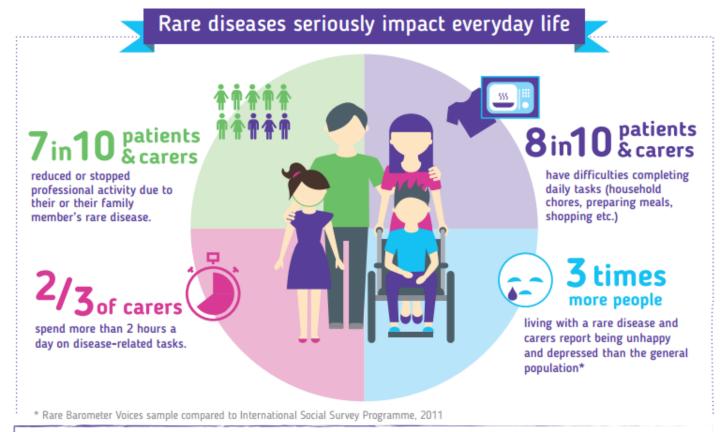


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Anal atresia 1:5000, after operation parents daily wash the bowel, child will not easily be toilet trained if at all





Rare Barometer

A EURORDIS X INITIATIVE

Voices

Rare Barometer Voices is a EURORDIS-Rare Diseases Europe online survey initiative. It brings together over 6,000 patients, carers and family members to make the voice of the rare disease community stronger. Results are shared with policy decision makers to bring about change for people living with a rare disease.

people responded to the survey.

The survey was conducted in 23 languages across 42 countries

Thank you to all Rare Barometer Voices participants and partners!

For more information visit eurordis.org/voices or email rare.barometer@eurordis.org

www.eurordis.org/content/contribute-rare-barometer-programme Sri Lanka, Kandy 21-09-2018



@EU_Health 25 April 2018



What EU citizens expect...

90% agree

To access their own health data

(requiring interoperable and quality health data)

80% agree

To share their health data

(if privacy and security are ensured)

80% agree

To provide feedback on quality

of treatments

Sri Lanka, Kandy 21-09-2018

EU_Health

Citizens' expectations on digital health: access to their own data, privacy & security and the ability to give feedback on treatment.

Data in the EU:
Commission steps up
efforts to increase
availability and boost
health care data
sharing

Familial Hypercholesterolaemia1:250, diet and medicine will prolong life expectancy, patient organisation developped and app https://fheurope.org/about-fh/familial-hypercholesterolaemia/



@WHO_Europe 30 August 2018 Q: What is health literacy?









Quality health care is people-centred.

This means that decisions about your care are tailored to your needs and preferences and you are treated with respect and compassion.





THE "UNIVERSAL" IN **UNIVERSAL HEALTH COVERAGE**

MEANS:

OUT-OF-POCKET PAYMENTS DO NOT PUSH PEOPLE INTO POVERTY









#HealthForAll