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BACKGROUND

Frontotemporal lobar degeneration (FTLD) shows heterogeneous clinical phenotypes. Approximately 40% of FTLD patients have a history that is suggestive of familial transmission and the most common genes associated are GRN, MAPT and C9ORF72. We describe an Italian family showing different clinical phenotypes of the FTD spectrum without a known genetic mutation.

CASE REPORT

The family was native of Ancona, Italy. Three siblings, two sisters (S1 e S2) and one brother (B1) came to our attention and are described in details. History of dementia characterized by prominent behaviour problems was reported in other seven members of the family (Fig.1).

S1 is a 64 year-old, right-handed lady with an atypical semantic dementia. She presented with a two year history of progressive language disturbance, mainly characterized by word finding problems, semantic and phonological paraphasias, associated with behavioural alterations such as impulsiveness and verbal aggressiveness. The *neuropsychological evaluation* revealed an atypical language disturbance characterized by a prevalent semantic impairment together with phonological and syntactical errors. Semantic breakdown was present also in the non-verbal domain with associated agnosia and prosopagnosia. *MRI* showed predominantly left temporal atrophy; *PET* revealed decreased metabolic activity in left frontal and temporal areas.

B1 is a 61 year-old, right-handed man with Corticobasal syndrome. He referred a two year history of progressive motor impairment in his left arm associated with mild behavioural alterations such as verbal disinhibition and irritability. Neurological examination showed an extrapyramidal syndrome. *Neuropsychological evaluation* revealed ideomotor apraxia and astereognosia in his left upper limb. *MRI* scan showed right fronto-parietal cortical atrophy (Fig. 2A-B); *FDG-PET* revealed decreased metabolic activity in the same regions (Fig. 2C).

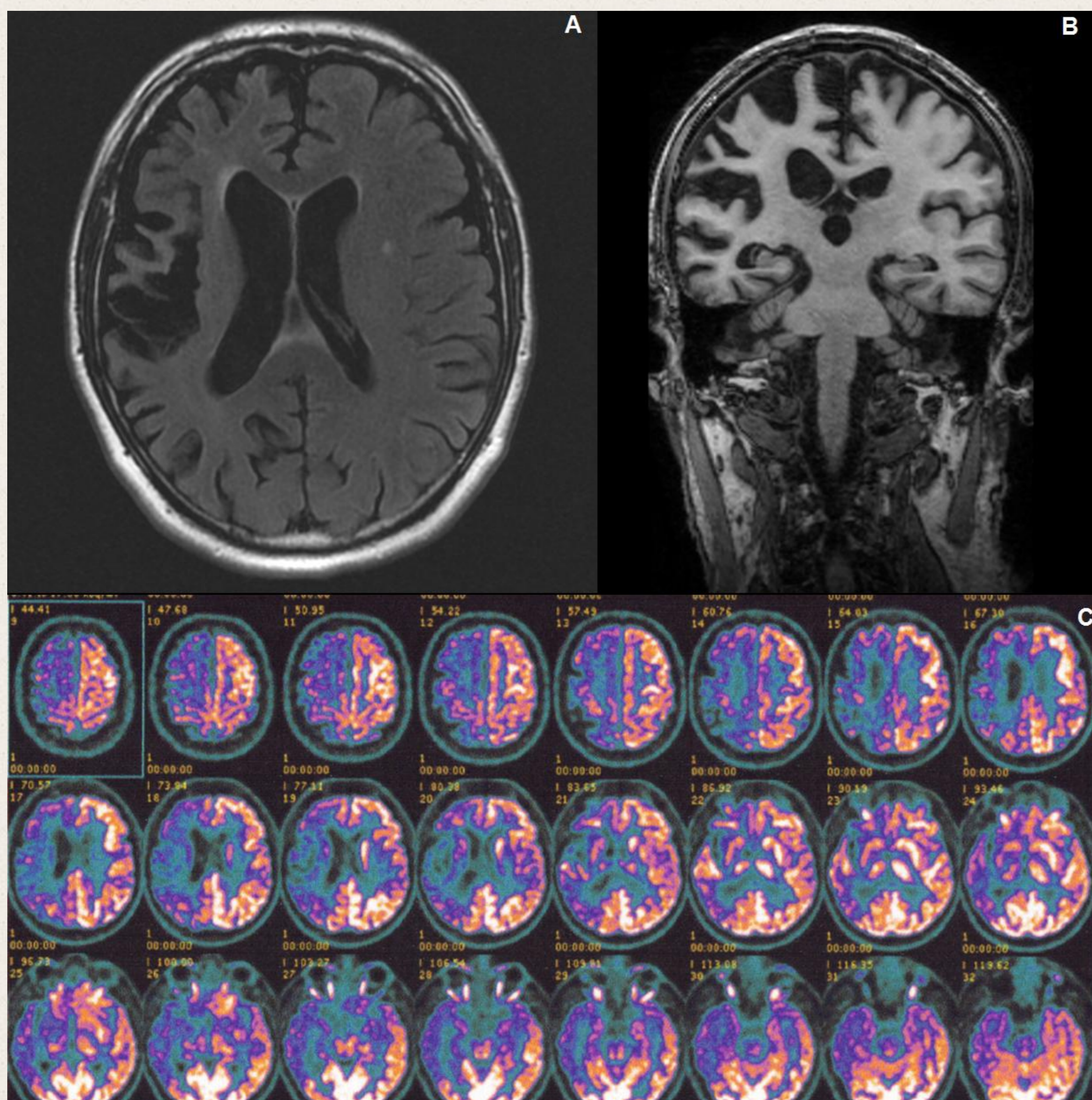


Fig.2. Patient B1: MRI scan showed right fronto-parietal cortical atrophy (A, B) and PET revealed decreased metabolic activity in the same areas (C).

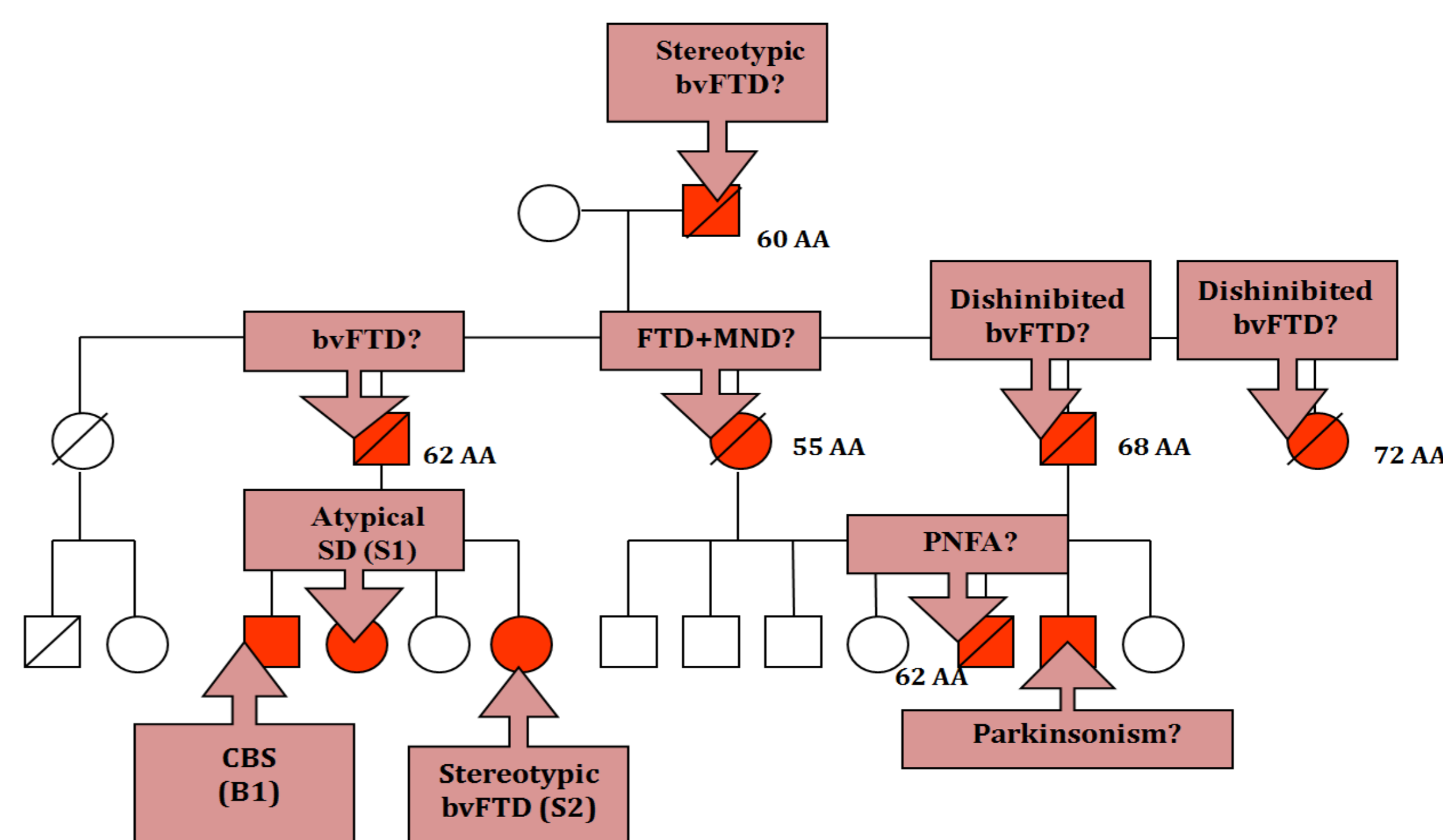


Fig.1. Family tree of the three siblings S1, S2, B1.

S2 is a 65 year-old, right-handed lady with bvFTD. It was referred a two year history of attention disturbance and behavioural problems including verbal aggressiveness, impulsiveness, binge eating, compulsive attitudes together with psychosis (delusions and visual hallucinations). *Neuropsychological evaluation* showed sever frontal behavioural syndrome. *CT* scan showed predominantly right fronto-temporal atrophy (Fig.3).

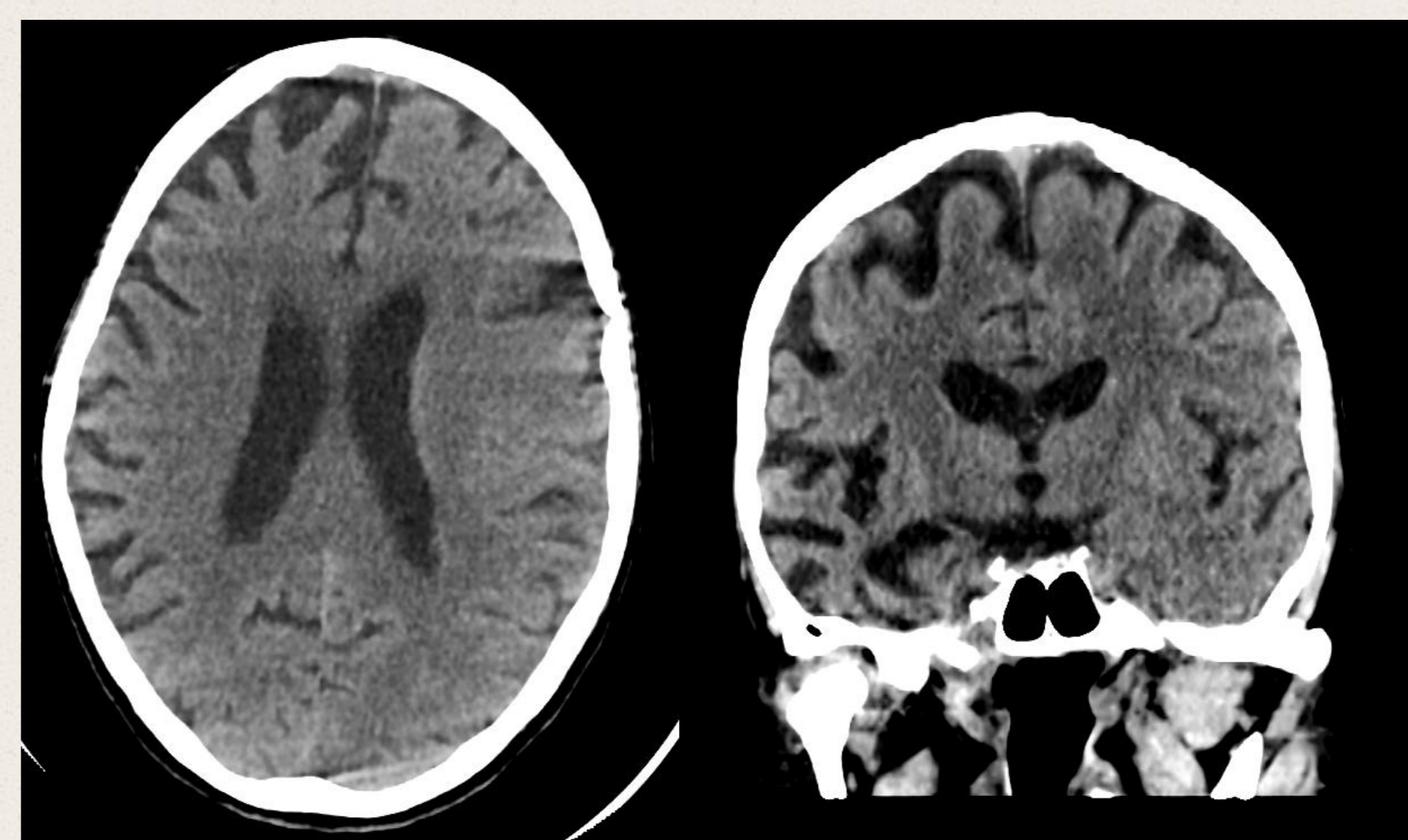


Fig. 3. Patient S2: CT scan showed right fronto-parietal cortical atrophy

Genetical analyses of the known mutations of C9ORF72, MAPT and GRN were negative, but low plasma progranulin levels were detected in the siblings.

CONCLUSION

Likely the family described carries still unknown genetic mutation and permit to infer that FTD Italian families should carry different mutations from the ones described in other countries.