Bloom Syndrome

Bloom syndrome is a rare genetic disorder characterized by impaired growth and increased risk of infections and cancer. A person must have two variants in the BLM gene in order to have this condition.

Erin, you have the variant we tested.

You could pass this variant on to your children.







How To Use This Test

This test does not diagnose any health

Please talk to a healthcare professional if this condition runs in your family, you think you might have this condition, or you have any concerns about your results.

Review the Carrier Status tutorial See Scientific Details

Intended Uses

- $\bullet~$ To test for the BLM $^{\mbox{\scriptsize Ash}}$ variant in the BLM gene.
- To identify carrier status for Bloom syndrome.

Limitations

- Does **not test** for all possible variants for the condition.
- Does **not report** if someone has two copies of a tested variant.

Important Ethnicities

This test is most relevant for people of **Ashkenazi Jewish** descent.

You are a carrier.

You could pass this variant on to your children.



We detected one variant for Bloom syndrome.

People with only one variant are not expected to have Bloom syndrome.

Your results may be relevant for you if you're thinking about starting a family.

If you and your partner are both carriers, each child may have a 25% chance of having this condition. Your relatives may also wish to consider testing if they plan to have children.



About Bloom Syndrome

Also known as: Bloom-Torre-Machacek Syndrome, Congenital Telangiectatic Erythema



When symptoms develop

Symptoms typically develop during infancy.

How it's treated

There is currently no known cure. Treatment focuses on managing symptoms and preventing complications such as infection and cancer.



Typical signs and symptoms

- Small body size
- · Recurring infections
- Cancer at a young age
- Sun-sensitive skin
- Infertility in men
- Early menopause in women



Ethnicities most affected

This syndrome is most common in people of Ashkenazi Jewish descent.

Read more at

Genetics Home Reference ☑

GeneReviews 🗷

National Organization for Rare Disorders 🗷

Consider talking to a healthcare professional if you are thinking about having children.



If you're starting a family, a genetic counselor can help you and your partner understand if additional testing might be appropriate.

Connect with a GC



Share your results with your family.

Share your report



If you have other concerns about your results, consult with a healthcare professional.

Print report



Learn more about this condition and connect with support groups.

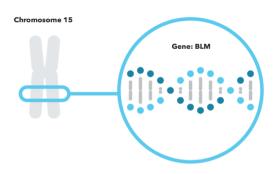
Learn more

Bloom syndrome is caused by variants in the BLM gene.

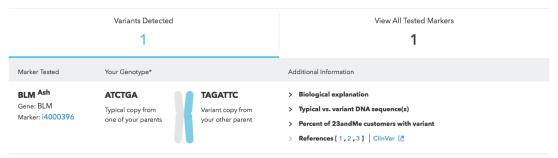
BLM

The BLM gene contains instructions for making a protein called Bloom Syndrome Protein, also known as RecQ2. This protein helps protect DNA when it is copied and repaired. Certain variants in BLM disrupt this protective function, which can lead to harmful breaks and rearrangements in DNA.

Read more at Genetics Home Reference



You have one variant detected by this test.



^{*}This test cannot distinguish which copy you received from which parent. This test also cannot determine whether multiple variants, if detected, were inherited from only one parent or from both parents. This may impact how these variants are passed down.

23 and Me always reports genotypes based on the 'positive' strand of the human genome reference sequence (build 37). Other sources sometimes report genotypes using the opposite strand

Test Details

Indications for Use

The 23andMe PGS Carrier Status Test for Bloom Syndrome is indicated for the detection of the BLM Ash variant in the BLM gene. This test is intended to be used to determine carrier status for Bloom syndrome in adults, but cannot determine if a person has two copies of a tested variant. The test is most relevant for people of Ashkenazi Jewish descent.

Special Considerations

- Symptoms of Bloom syndrome may vary between people with the condition even if they have the same genetic variants.
- Carrier testing for Bloom syndrome is recommended by ACMG for people of Ashkenazi Jewish
 descent considering having children. This test includes the variant recommended for testing by
 ACMC

Test Performance Summary

Carrier Detection Rate & Relevant Ethnicities

The "carrier detection rate" is an estimate of the percentage of carriers for this condition that would be identified by this test. Carrier detection rate differs by ethnicity and is provided only where sufficient data is available.

Ashkenazi Jewish >99% [3]

Analytical Performance

Accuracy was determined by comparing results from this test with results from sequencing for 70 samples with known variant status. 70 out of 70 genotype results were correct. Fewer than 1 in 100,000 samples may receive a **Not Determined** result. This can be caused by random test error or unexpected DNA sequences that interfere with the test. It can also be caused by having two copies of a variant tested.

Warnings and Limitations

- This test does not cover all variants that could cause this condition.*
- This test does not diagnose any health conditions.
- Positive results in individuals whose ethnicities are not commonly associated with this condition may be incorrect. Individuals in this situation should consider genetic counseling and follow-up testing.
- Share results with your healthcare professional for any medical purposes.
- If you are concerned about your results, consult with a healthcare professional.

See the Package Insert for more details on use and performance of this test.

* Variants not included in this test may be very rare, may not be available on our genotyping platform, or may not pass our testing standards.

References

- 1. Ellis NA et al. (1998). "The Ashkenazic Jewish Bloom syndrome mutation blmAsh is present in non-Jewish Americans of Spanish ancestry." Am J Hum Genet. 63(6):1685-93. F.
- 2. German J et al. (2007). "Syndrome-causing mutations of the BLM gene in persons in the Bloom's Syndrome Registry." Hum Mutat. 28(8):743-53. 🗷
- 3. Gross SJ et al. (2008). "Carrier screening in individuals of Ashkenazi Jewish descent." Genet Med. 10(1):54-6.
- 4. Sanz MM et al. (1993). "Bloom's Syndrome" 🗷