

Familial Dysautonomia

Familial dysautonomia is a rare genetic disorder that affects many different parts of the body. It is characterized by severe dysfunction in different parts of the nervous system involved in movement, the senses, and involuntary (autonomic) functions. A person must have two variants in the ELP1 gene in order to have this condition.

Overview Scientific Details

Jamie, you do not have the variant we tested.

You could still have a variant not covered by this test.



How To Use This Test

This test does not diagnose any health conditions.

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

- To test for the 2507+6T>C variant in the ELP1 gene.
- To identify carrier status for familial dysautonomia.

- 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 likely not a carrier.

This result may be less relevant for you because the variants that cause familial dysautonomia are rarely found in people of your ethnicity.

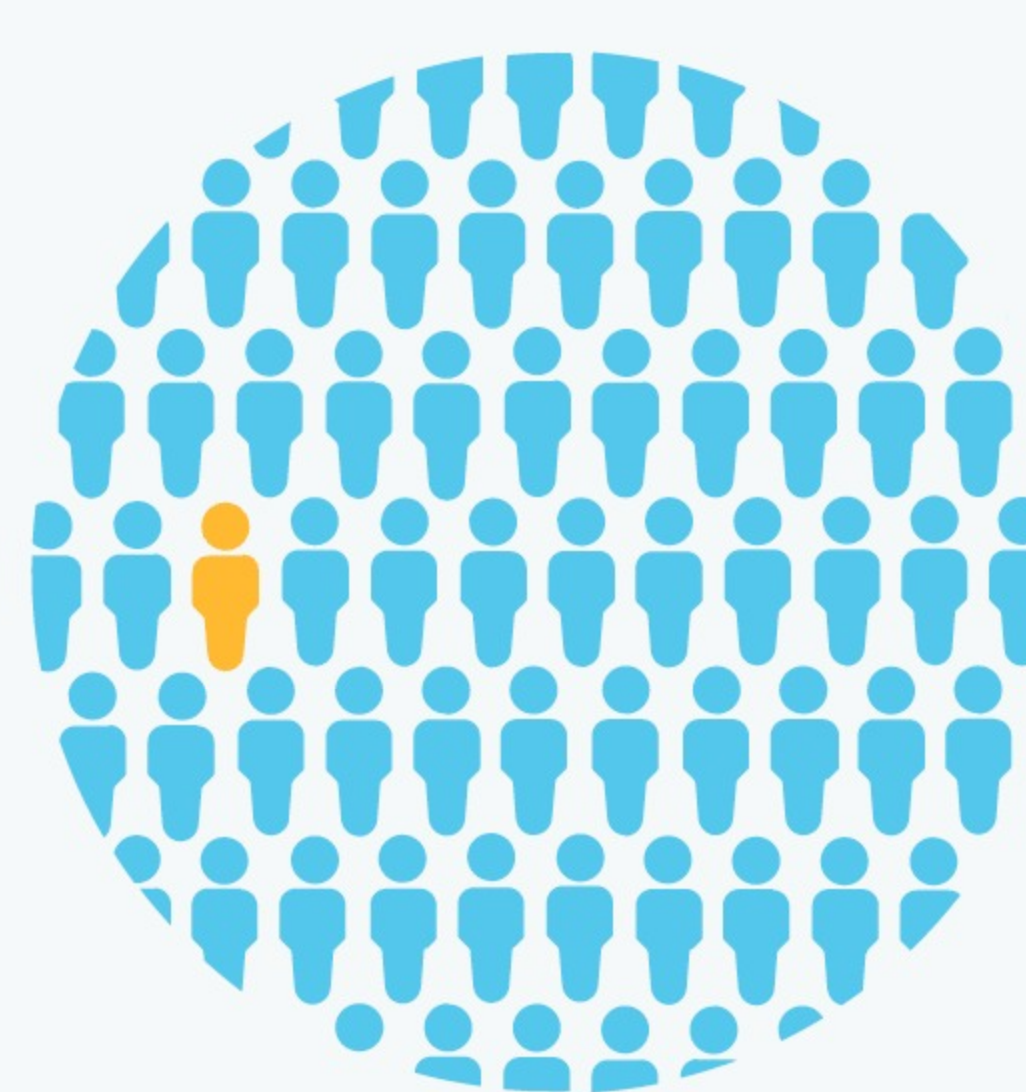


We ruled out the tested variant for familial dysautonomia.

This variant is most common in people of **Ashkenazi Jewish** descent.

You still have a chance of being a carrier for familial dysautonomia.

We cannot estimate your chances because this condition is rare and not well studied in your ethnicity.



About Familial Dysautonomia

Also known as: Hereditary Sensory and Autonomic Neuropathy Type III, Riley-Day Syndrome

📅 When symptoms develop

Symptoms are typically present at birth.

🏥 Typical signs and symptoms

- Episodes of involuntary nerve impairment
- Motor and sensory nerve impairment
- Poor growth
- Developmental delay

👥 Ethnicities most affected

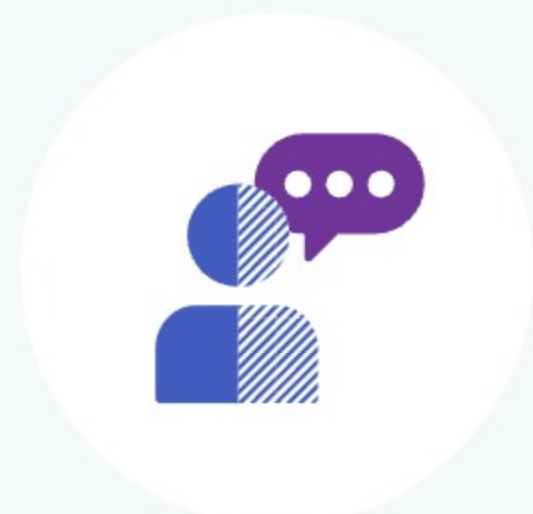
This condition is most common in people of **Ashkenazi Jewish** descent.

💊 How it's treated

There is currently no known cure. Treatment focuses on managing nerve dysfunction by providing medications and supportive care.

Read more at: [Genetics Home Reference](#) [GeneReviews](#)

Consider talking to a healthcare professional if you are concerned about your results.



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 a healthcare professional.

Print report



Learn more about this condition and connect with support groups.

Learn more



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Familial Dysautonomia

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Overview **Scientific Details**

Familial dysautonomia is caused by variants in the ELP1 gene.

ELP1

The [ELP1 gene](#) (previously known as [IKBKAP](#)) contains instructions for making a protein called elongator complex protein 1 (ELP1; previously called IKAP). This protein plays a role in reading information from genes, especially those needed for the structure and movement of [cells](#). Certain [variants](#) in the ELP1 gene result in too little ELP1 protein, especially in the brain.

Read more at [Genetics Home Reference](#)*


Chromosome 9



You have no variants detected by this test.

Variants Detected

View All Tested Markers

Marker Tested	Your Genotype*	Additional Information
2507+6T>C Gene: ELP1 Marker: i4000334	A Typical copy from one of your parents	 A Typical copy from your other parent
Biological explanation Typical vs. variant DNA sequence(s) Percent of 23andMe customers with variant References [1] ClinVar *		

*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.

23andMe 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 Interpretation

This report provides an estimate of the chances of still being a [carrier](#) for people who do not have the [variant\(s\)](#) tested. This is known as the **post-test carrier risk**.

Post-test carrier risk is based on the average chance of being a carrier for a given ethnicity and the carrier detection rate of the test for a given ethnicity.

[View technical article on estimating post-test carrier risk.](#)

Post-Test Carrier Risk

This report provides an estimate of the post-test carrier risk for people of **Ashkenazi Jewish descent only**.

- For people of partial [Ashkenazi Jewish](#) descent, post-test carrier risk is less than that for those who are fully Ashkenazi Jewish. The exact post-test risk depends on how much Ashkenazi Jewish ancestry a person has.
- Post-test risk for other ethnicities cannot be provided because sufficient data is not available.

Post-test carrier risk for relevant ethnicities

Ashkenazi Jewish	1 in 2,300	[1]
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Test Details

Indications for Use

The 23andMe PGS Carrier Status Test for Familial Dysautonomia is indicated for the detection of the [2507+6T>C variant](#) in the [ELP1 gene](#). This test is intended to be used to determine carrier status for familial dysautonomia 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

- Carrier testing for familial dysautonomia is recommended by [ACMG](#) for people of Ashkenazi Jewish descent considering having children. This test includes one of two variants recommended for testing by ACMG.

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%	[1]
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Analytical Performance

Accuracy was determined by comparing results from this test with results from sequencing. Greater than 99% of test results were correct. While unlikely, this test may provide false positive or false negative results. For more details on the analytical performance of this test, refer to the package insert.

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

- [Gross SJ et al. \(2008\). "Carrier screening in individuals of Ashkenazi Jewish descent." *Genet Med.* 10\(1\):54-6.](#)
- [Norcliffe-Kaufmann L et al. \(2017\). "Familial dysautonomia: History, genotype, phenotype and translational research." *Prog Neurobiol.* May;152:131-148.](#)
- [Shohat M et al. \(2003\). "Familial Dysautonomia." \[Accessed Aug 28, 2020\].](#)

Change Log

Your report may occasionally be updated based on new information. This Change Log describes updates and revisions to this report.

Date	Change
Nov. 5, 2020	The gene name was updated to ELP1.
Oct. 21, 2015	Familial Dysautonomia report created.



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