Clinical, Imaging, and Genetic Spectrum of Polymicrogyria in Indian Children

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INTRODUCTION

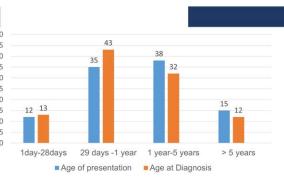
- Polymicrogyria (PMG) is one of the commonest 45 cortical malformations associated with varied clinical presentations.
- It also has heterogenous radiological features with various subtypes with genetic correlation,1 yet large studies defining the clinical, imaging and genetic heterogenicity are lacking among Indian children.
- · Herein, we describe the clinical, imaging and genetic spectrum of PMG in pediatric population, and classify polymicrogyria in terms of pattern and subtypes.

OBJECTIVES

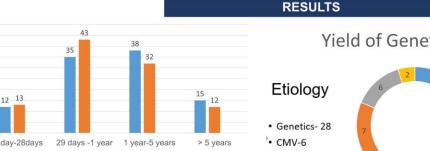
- · Primary Objective: To describe clinical profile, imaging findings of children with polymicrogyria
- Secondary Objective:
- a) To classify polymicrogyria in terms of pattern and subtype
- b) To describe genetic spectrum of polymicrogyria

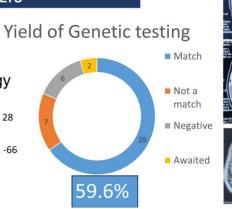
MATERIAL AND METHODS

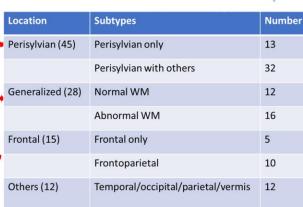
- Type of study: Descriptive, cross-sectional, observational study
- Sample size: 100
- Study Period: Oct 2021 to Oct 2023
- Study place: Department of Pediatric Neurology, Rainbow Children Hospital, Hyderabad.
- · Inclusion Criteria: Children aged 1 day to 16 years with a radiological diagnosis of polymicrogyria.



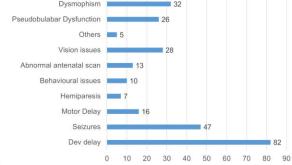
Clinical presentation



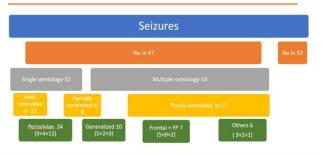




Abnormal Neurological examination

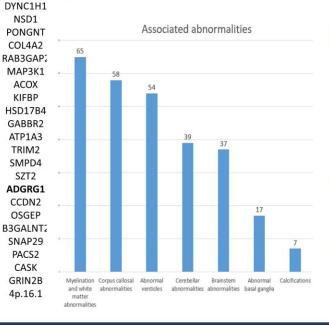


Distribution of data based on seizures





• Unknown -66



ADGRG1 mutation was found in 7 patients and all had generalized polymicrogyria and brainstem changes

CONCLUSION

- Most common presentation is developmental delay followed by seizures with most common age of presentation is between 1year to 5 years.
- Perisylvian PMG is the commonest radiological pattern followed by generalized polymicrogyria.
- ADGRG1 is the commonest genetic cause of PMG in Indian children

REFERENCES

1.Stutterd CA, Brock S, Stouffs K, et al. Genetic heterogeneity of polymicrogyria: study of 123 patients using deep sequencing. Brain Commun. 2020;3(1):fcaa221. Published 2020 Dec 26. doi:10.1093/braincomms/fcaa221