

Noonan Spectrum Disorders Panel

Last Literature Review: February 2019 Last Update: October 2023

Noonan spectrum disorders (NSDs) are a group of genetic syndromes caused by pathogenic germline variants in genes in the Ras/mitogen activated protein kinase (MAPK) pathway, which controls the cell cycle and cell differentiation. The vast majority of causative variants increase pathway signaling; thus, the resulting syndromes exhibit phenotypic overlap and share a predisposition for developing malignancies.

Disease Overview

Symptoms of Noonan Syndrome (NS)

- Characteristic facial features
- Short stature
- Broad webbed neck (fetal cystic hygroma/increased nuchal translucency)
- Congenital heart defect
- Developmental delay
- Undescended testes
- Coagulation defects
- Lymphatic dysplasias

Etiology of NSDs

Pathogenic sequence variants in Ras pathway genes

Prevalence

NS: 1/1,000-2,500

Inheritance

Autosomal dominant for all analyzed genes

Genotype-Phenotype Correlation

Variants in multiple genes cause overlapping phenotypes for NSD

Test Description

See [Genes Tested](#) table for genes included in this panel.

Clinical Sensitivity

Dependent on clinical phenotype

- Approximately 99% for cardiofaciocutaneous syndrome (CFCS)¹
- Approximately 80-90% for Costello syndrome (CS)^{2,3,4,5}
- Approximately 70-80% for NS⁶⁻¹³

Featured ARUP Testing

[Noonan Spectrum Disorders Panel, Sequencing 2010772](#)

Method: Massively Parallel Sequencing

Confirm a suspected clinical diagnosis of:

- Noonan syndrome (NS)
- Cardiofacial cutaneous syndrome (CFCS)
- Costello syndrome (CS)
- Legius syndrome (LS)
- Noonan syndrome with multiple lentigines (LEOPARD syndrome)
- Noonan-like syndrome
- Noonan-like syndrome with loose anagen hair (NS/LAH)

Given the genotypic and phenotypic overlap among NSDs, the NSD panel is the recommended first-line test for determining a genetic etiology.

Contraindications: This panel should not be ordered in individuals with primary juvenile myelomonocytic leukemia (JMML) as the assay may not detect mosaicism for somatic variants associated with malignancy.

[Noonan Spectrum Disorders Panel, Sequencing, Fetal 2010769](#)

Method: Massively Parallel Sequencing

Confirm a diagnosis of an NSD in a pregnancy with clinically suggestive findings, such as increased nuchal translucency, cystic hygroma, and cardiac defects. For a fetus with ultrasonographic abnormalities, genomic microarray should be ordered prior to the NSD panel.

If a familial sequence variant has been previously identified, targeted sequencing for that variant may be appropriate; refer to the [Laboratory Test Directory](#) for additional information.

Limitations

- A negative result does not exclude a diagnosis of a MAPK pathway disorder.
- Diagnostic errors can occur due to rare sequence variations.
- Interpretation of this test result may be impacted if the individual has had an allogeneic stem cell transplantation.
- The following will not be evaluated:
 - Variants outside the coding regions and intron-exon boundaries of the targeted genes
 - Regulatory region variants and deep intronic variants
 - Large deletions/duplications
 - Noncoding transcripts
- The following may not be detected:
 - Deletions/duplications/insertions of any size by massively parallel sequencing
 - Some variants due to technical limitations in the presence of pseudogenes, repetitive, or homologous regions
 - Low-level somatic variants

Analytic Sensitivity

For massively parallel sequencing:

Variant Class	Analytic Sensitivity (PPA) Estimate ^a (%)	Analytic Sensitivity (PPA) 95% Credibility Region ^a (%)
SNVs	99.2	96.9-99.4
Deletions 1-10 bp	93.8	84.3-98.2
Deletions 11-44 bp	100	87.8-100
Insertions 1-10 bp	94.8	86.8-98.5
Insertions 11-23 bp	100	62.1-100

bp, base pairs; PPA, positive percent agreement; SNVs, single nucleotide variants

Genes Tested

Gene	Alias Symbol(s)	MIM Number	Disorder
<i>BRAF</i>	BRAF1	164757	CFCS 1 NS 1 NS 7 LEOPARD syndrome 3
<i>CBL</i>	CBL2, RNF55, c-Cbl	165360	NS-like disorder with or without juvenile myelomonocytic
<i>HRAS</i>	HRAS1	190020	Melanocytic Nevus syndrome, congenital Schimmelpenning-Feuerstein-Mims syndrome CS
<i>KRAS</i>	KRAS2, KRAS1	190070	Schimmelpenning-Feuerstein-Mims syndrome NS 3 CFCS 2
<i>LZTR1</i>	LZTR-1, BTBD29	600574	NS 10

Gene	Alias Symbol(s)	MIM Number	Disorder
<i>MAP2K1</i>	PRKMK1, MEK1, MAPKK1	176872	NS 1 CFCS 3
<i>MAP2K2</i>	PRKMK2, MEK2	601263	CFCS 4
<i>NRAS</i>	N-ras	164790	Schimmelpenning-Feuerstein-Mims syndrome NS 6
<i>PTPN11</i>	NS1, BPTP3, SH-PTP2, SHP-2, PTP2C, SHP2	176876	LEOPARD syndrome 1 NS 1
<i>RAF1</i>	Raf-1, c-Raf, CRAF	164760	NS 5 LEOPARD syndrome 2
<i>RASA2</i>	GAP1M	601589	
<i>RIT1</i>	RIT, RIBB, ROC1, MGC125864, MGC125865	609591	NS 8
<i>SHOC2</i>	KIAA0862, SOC2, SUR-8, SOC-2, SUR8	602775	NS-like disorder with loose anagen hair 1
<i>SOS1</i>	GINGF, HGF, GF1	182530	NS 4
<i>SOS2</i>		601247	NS 9
<i>SPRED1</i>	FLJ33903, PPP1R147	609291	Legius syndrome

References

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Related Information

[Laboratory Testing for Developmental Delay, Intellectual Disability, and Autism Spectrum Disorder Testing for Genetic Syndromes Related to Developmental Delay \(DD\) and Intellectual Disability \(ID\)](#)

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