

**NEUROLOGIA DE LAS
ENFERMEDADES NEURODEGENERATIVAS**

Demencias Frontotemporales

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LAS DEMENCIAS NEURODEGENERATIVAS

Peculiaridades de la clasificación

Presentación clínica

- ✓ Deterioro cognitivo
- ✓ Trastornos del comportamiento
- ✓ Síntomas psicóticos
- ✓ Trastornos del lenguaje
- ✓ Alteraciones del ritmo vigilia-sueño
- ✓ Trastornos del movimiento

Cuadro neuropatológico

- ✓ **Regiones neuroanatómicas afectadas**
- ✓ **Tipos celulares afectos**
 - Neuronas
 - Astrocitos
 - Oligodendrocitos
- ✓ **Proteínas implicadas**
- ✓ **Etiología**
 - Hereditarias
 - Esporádicas

Un síndrome clínico específico



Diferentes causas patológicas

Múltiples y diferentes síndromes clínicos



Un proceso patológico específico

LAS DEMENCIAS NEURODEGENERATIVAS

Perspectiva histórica

Arnold Pick (1892)	Varón de 71 años Deterioro mental progresivo + afasia Atrofia cortical focal lób. temporal	Clínica y morfológicamente diferentes a la atrofia generalizada (EA)
Pick, Spielmeyer, Scheneider, Alzheimer	Descripciones histológicas y clínicas	
Primeras décadas XX		Variante de la EA
Lund, Brun y Gustafson (1986) Neary y colaboradores (1988)	Degeneración Lobar Frontotemporal Demencia tipo frontal Degeneración Corticobasal DLFT con parkinsonismo DLFT asociada a enf de motoneurona	
Mesulam (1982)	Afasia lentamente progresivas sin demencia	
Snowden (1989)	Demencia Semántica	Determinación clínica actual
Hutton et al, 1998 Baker et al; Cruts et al. 2006	Descubrimiento del gen MAPT Mutaciones en progranulina	Genética
2006	Detección inmunohisquímica de: TDP-43	Caracterización proteica

FORMAS CLINICAS DE LA DEMENCIA FRONTOTEMPORAL

- ✓ Cambios en la personalidad o en la conducta
- ✓ Asociados con una afectación del lenguaje

TRES SÍNDROMES

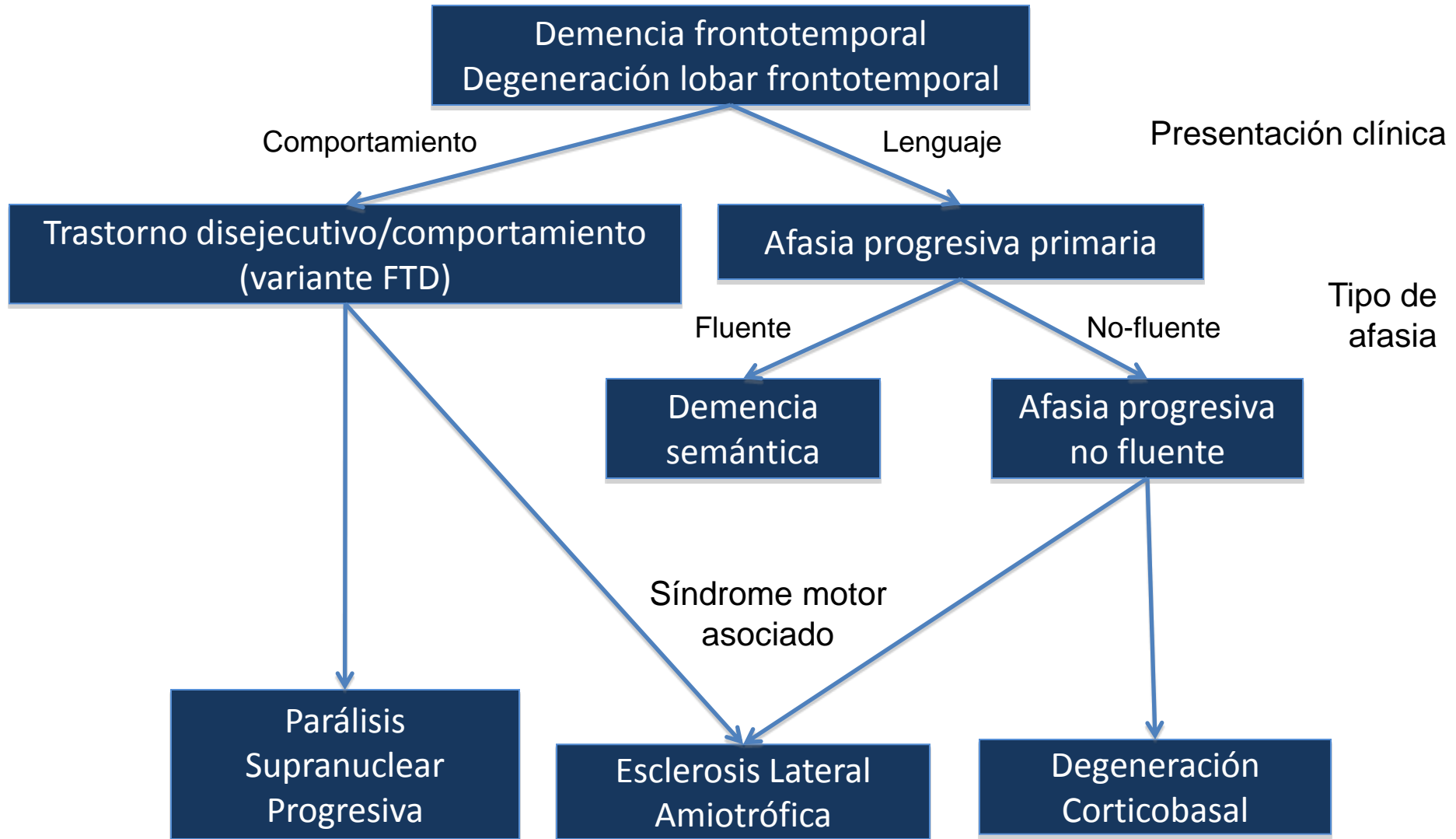
(diferentes a la demencia característica de la enfermedad de Alzheimer)

- 1. Demencia fronto-temporal (prefrontal/temporal anterior)**
- 2. Demencia semántica (frontotemporal izquierdo)**
- 3. Afasia primaria progresiva (temporal bilateral)**

Posible asociación con trastornos del movimiento:

- Parkinsonismo
- Enfermedad de neurona motora

FORMAS CLINICAS DE LA DEMENCIA FRONTOTEMPORAL

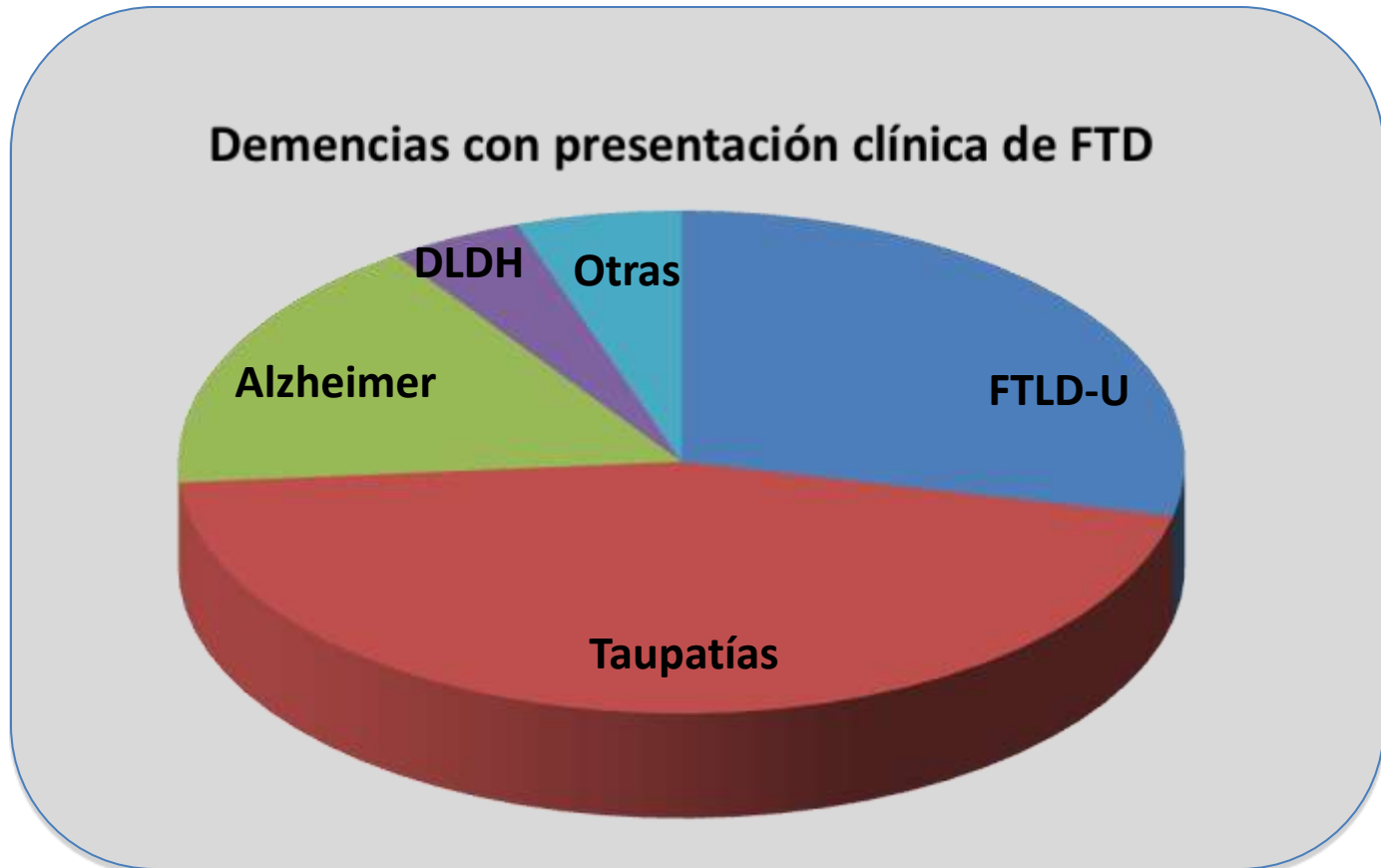


CORRELACION CLINICO-PATOLOGICA

No es siempre lo que parece

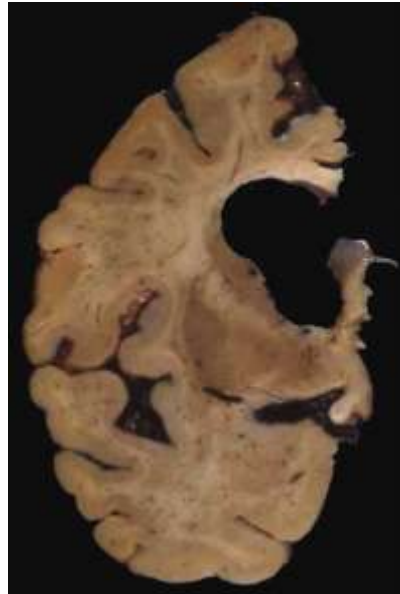
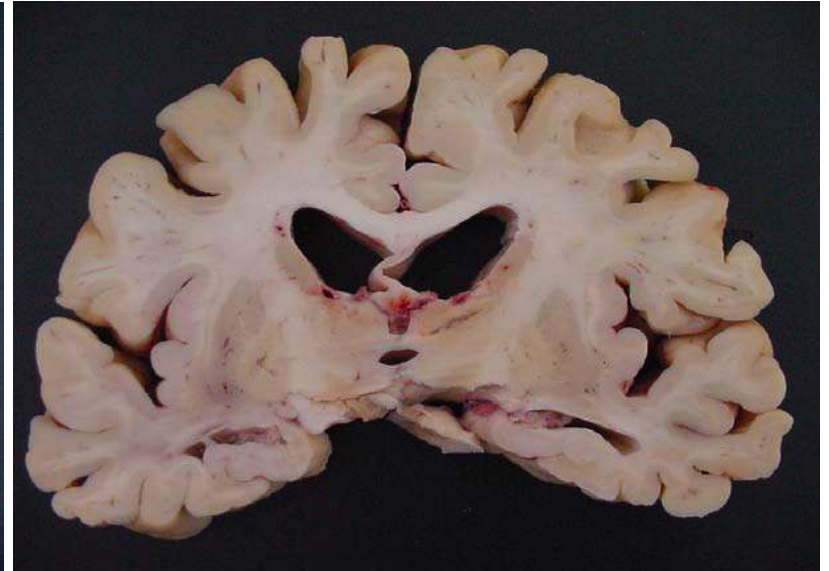
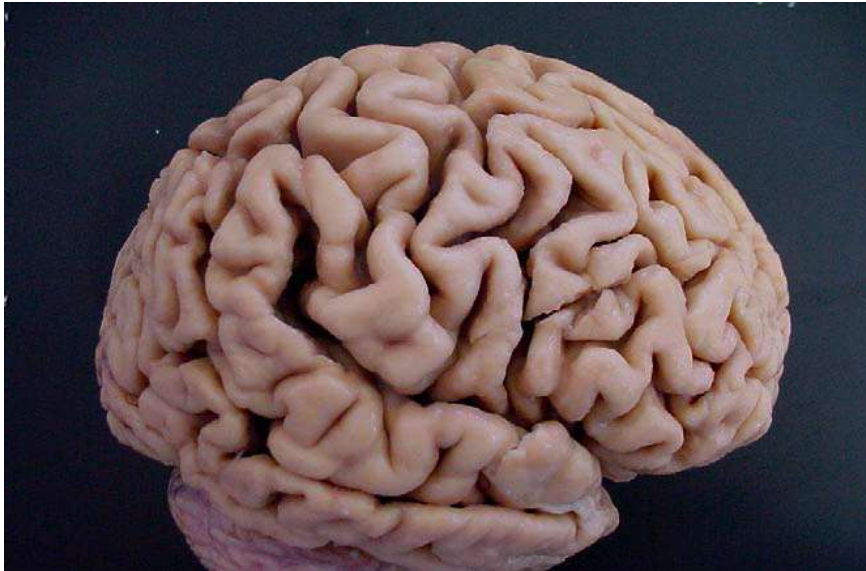
Frontotemporal dementia: clinicopathological correlations

Mark S. Forman and al. Annals of Neurology 2006; 59: 952-962



DEGENERACIÓN LOBAR FRONTOTEMPORAL

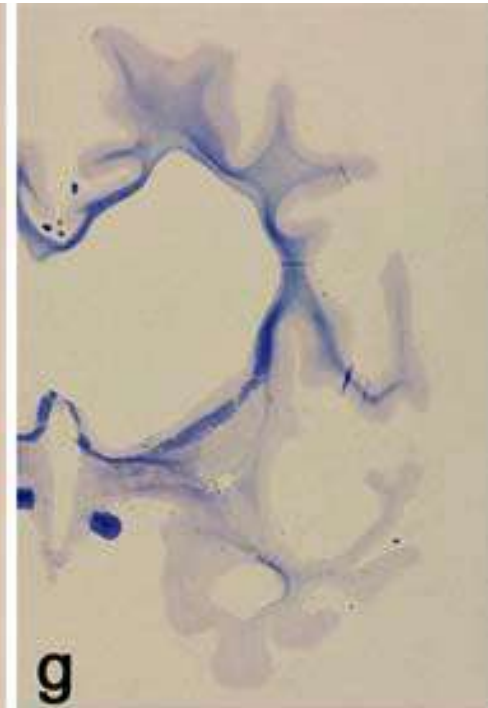
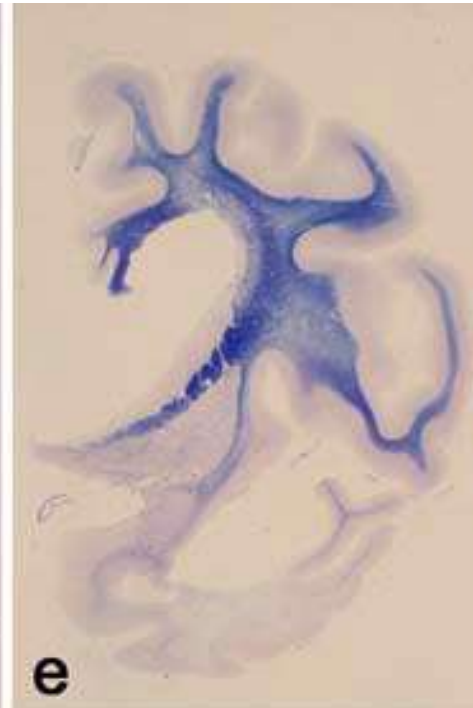
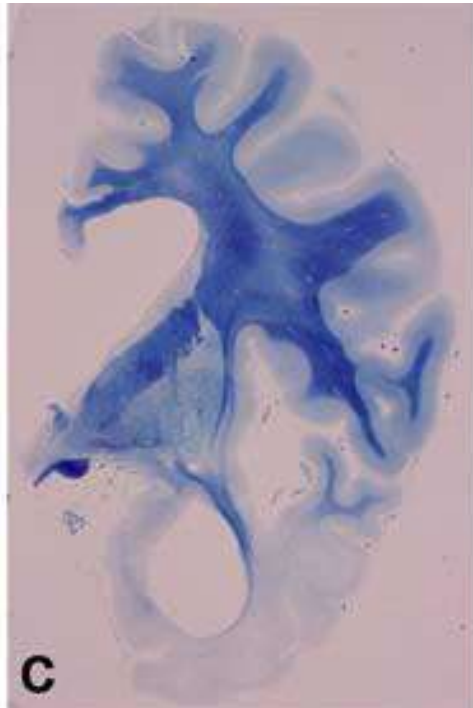
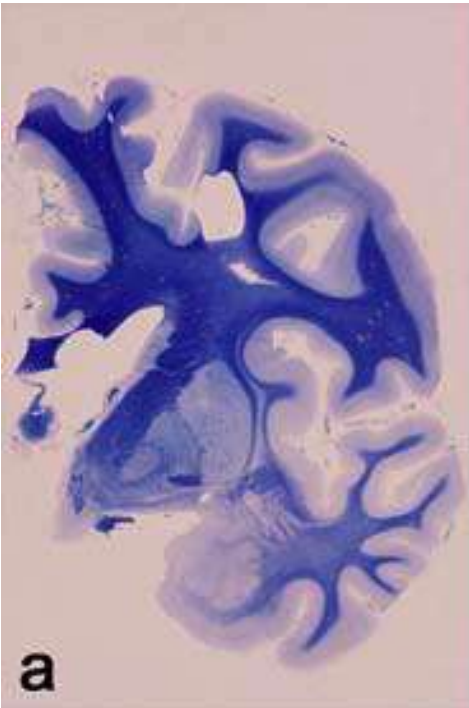
Apariencia macroscópica



Despigmentación de la sustancia negra

DEGENERACIÓN LOBAR FRONTOTEMPORAL

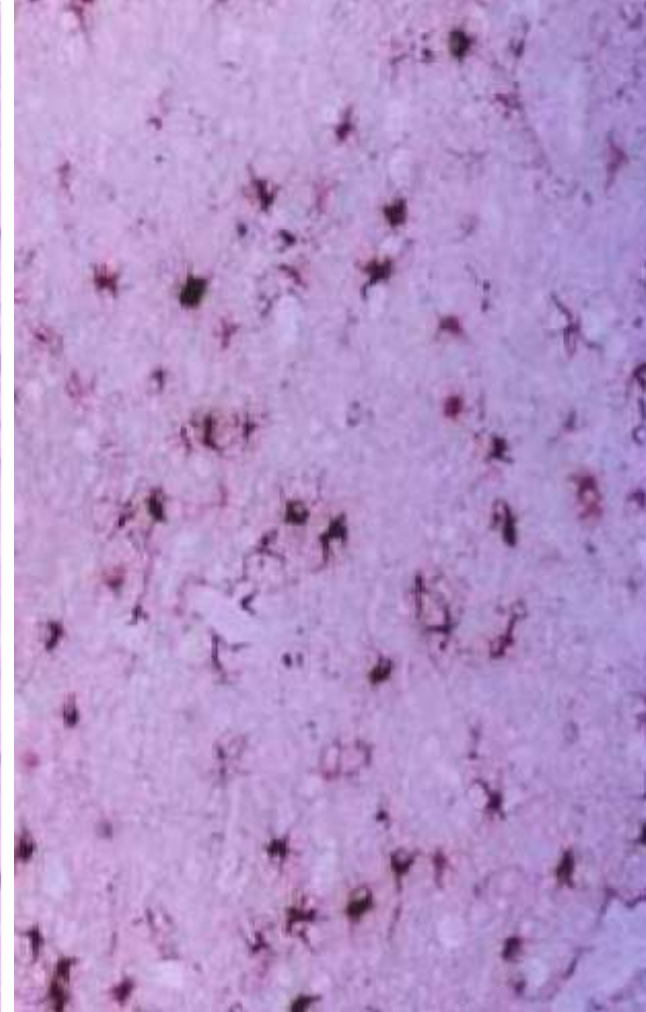
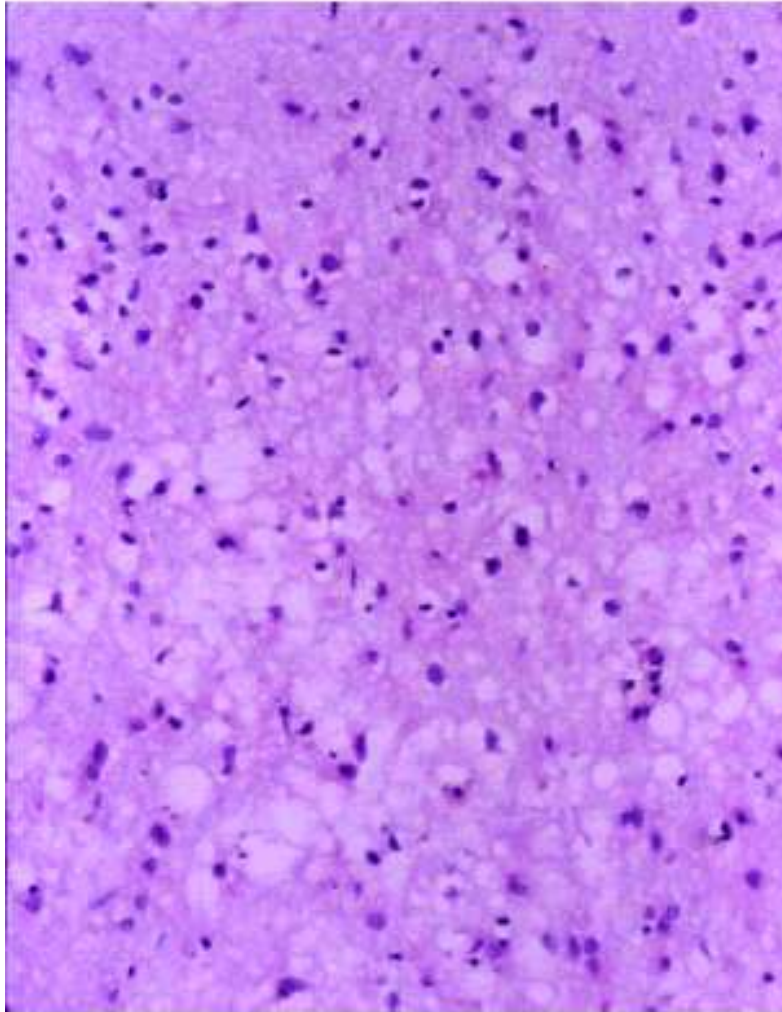
Apariencia macroscópica



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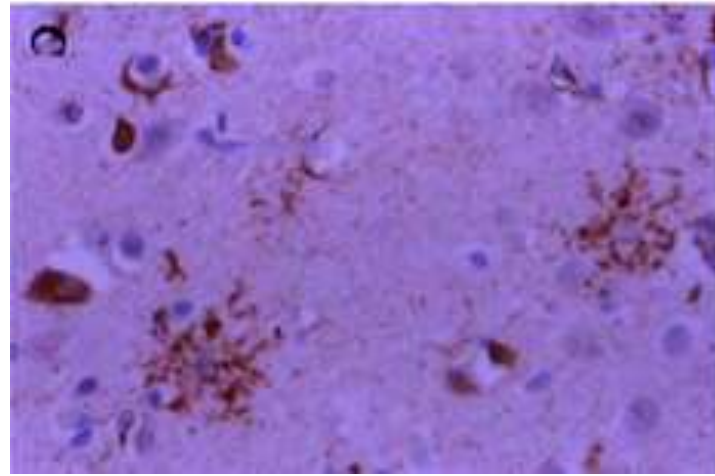
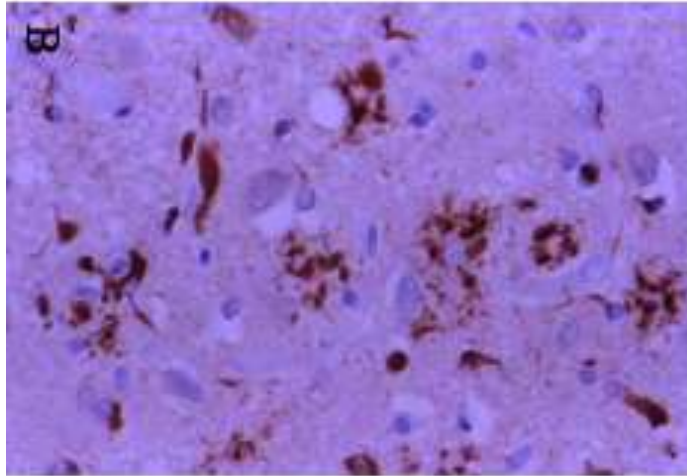
Características histológicas

- Espongiosis superficial
- Pérdida neuronal
- Astrocitosis reactiva



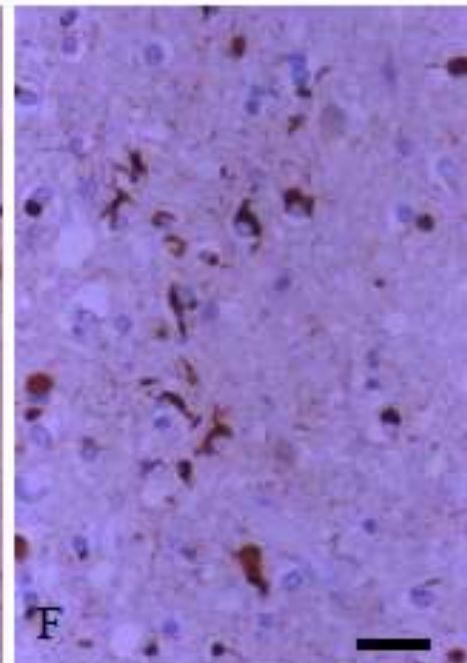
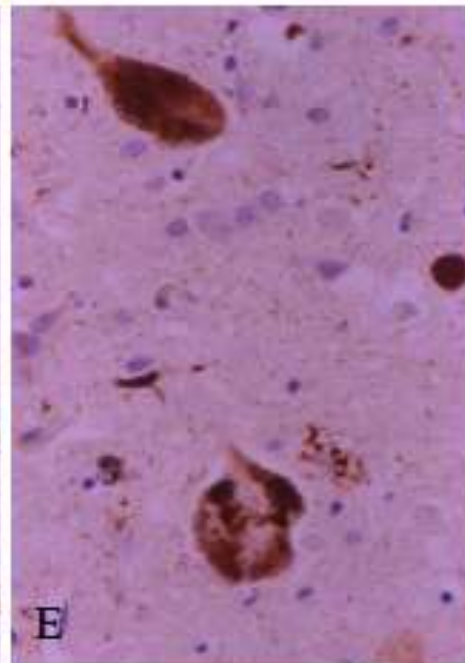
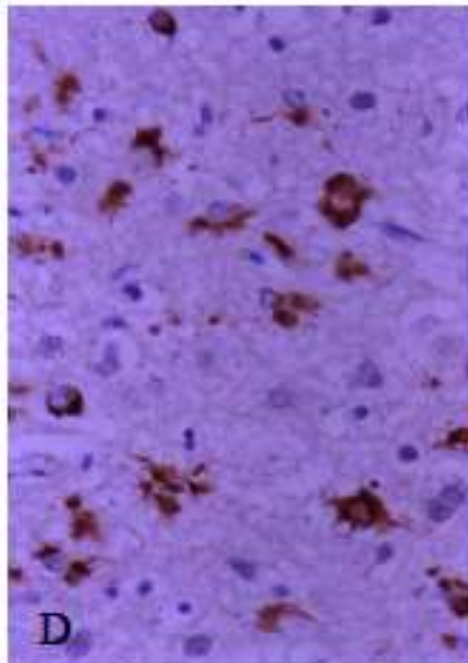
DEGENERACIÓN LOBAR FRONTOTEMPORAL

Características histológicas



Astrocytos
fibrosos

Astrocytos
"tufted"



Inclusiones
globosas

"Coiled
bodies"

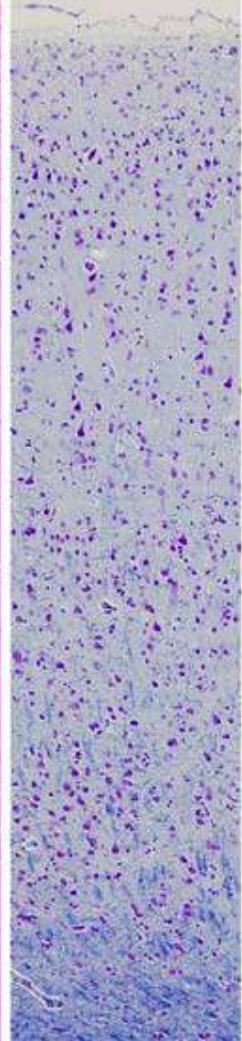
DEGENERACIÓN LOBAR FRONTOTEMPORAL

Características histológicas

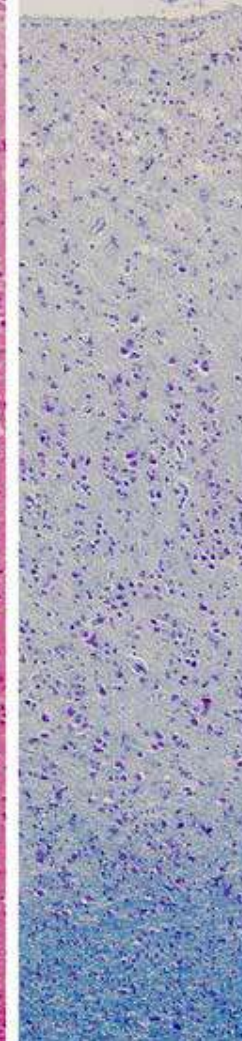
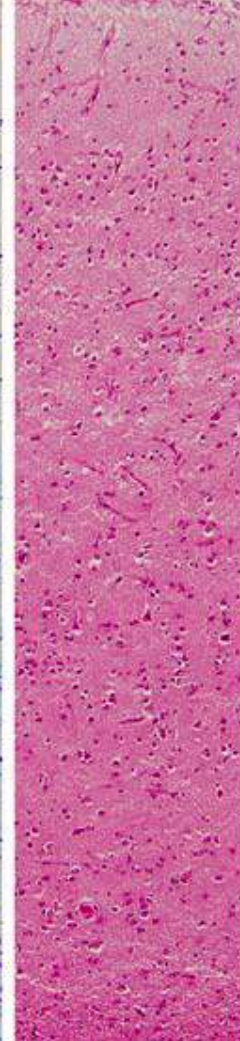
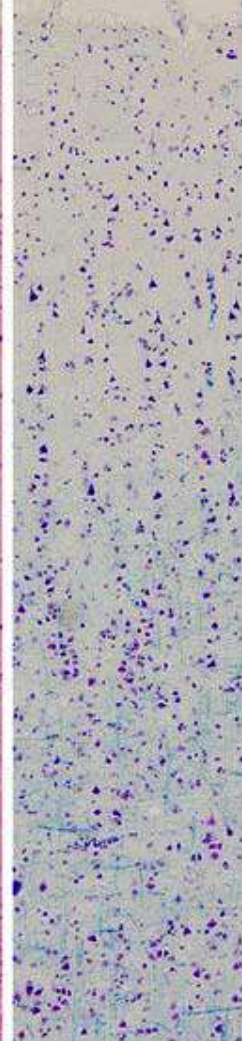
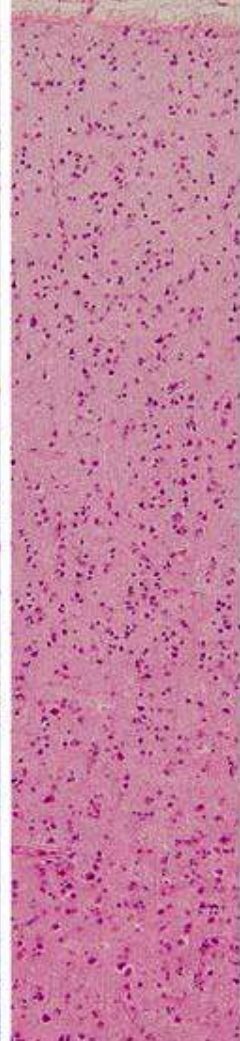
Estadio 0



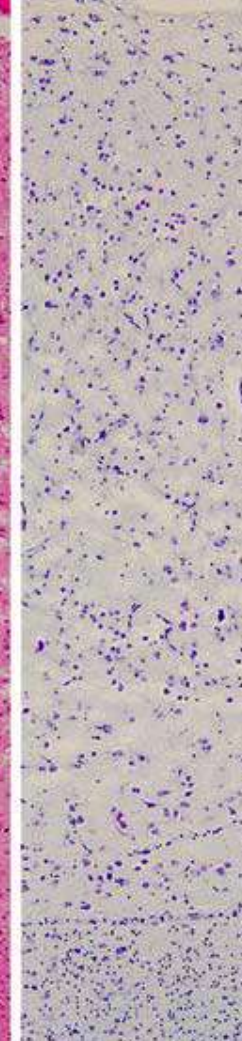
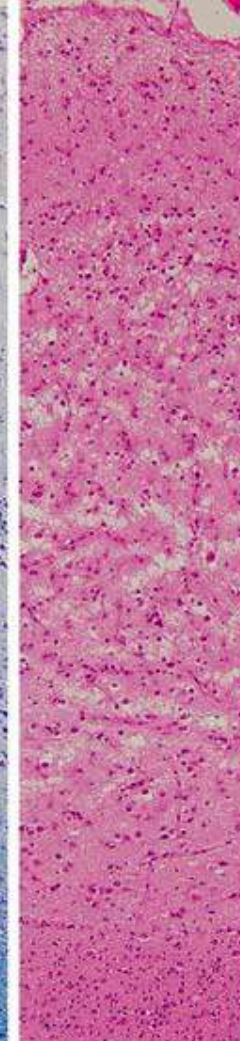
Estadio 1



Estadio 2

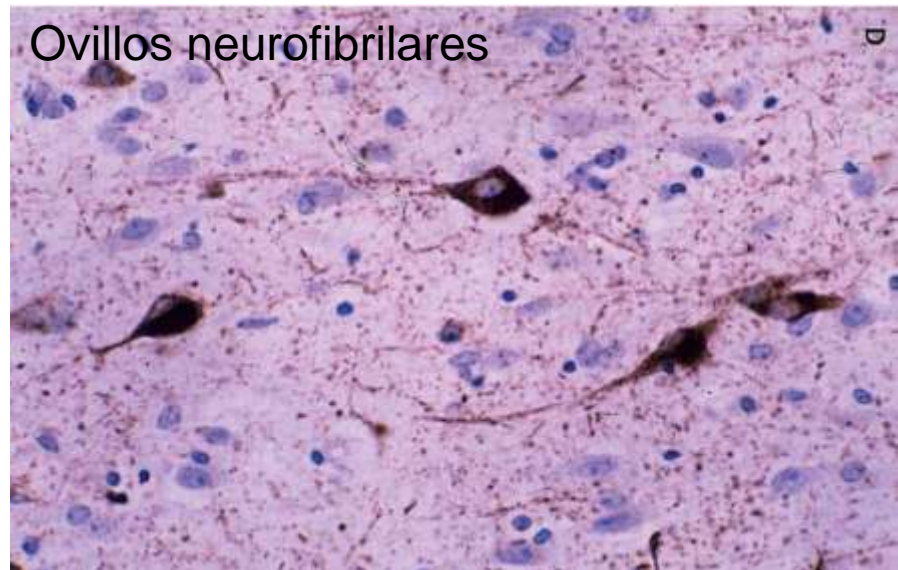
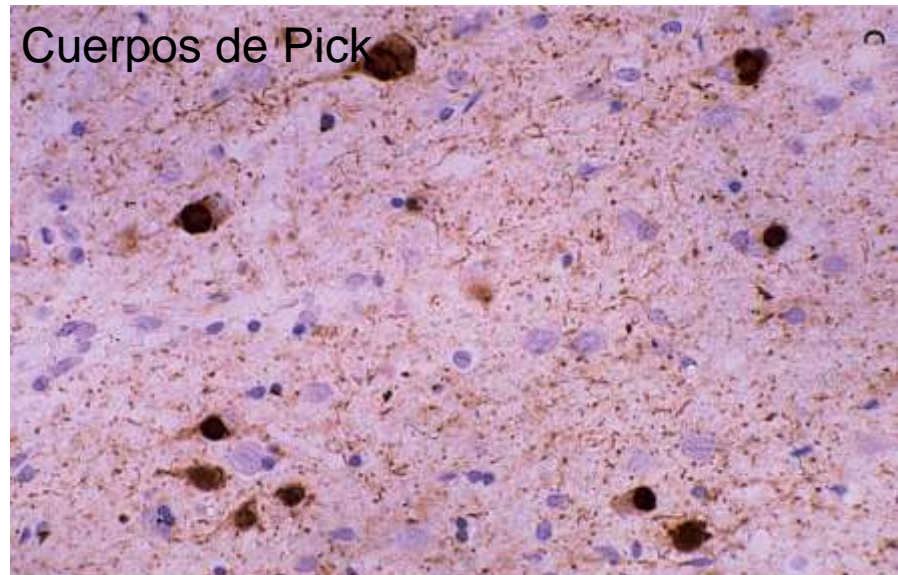
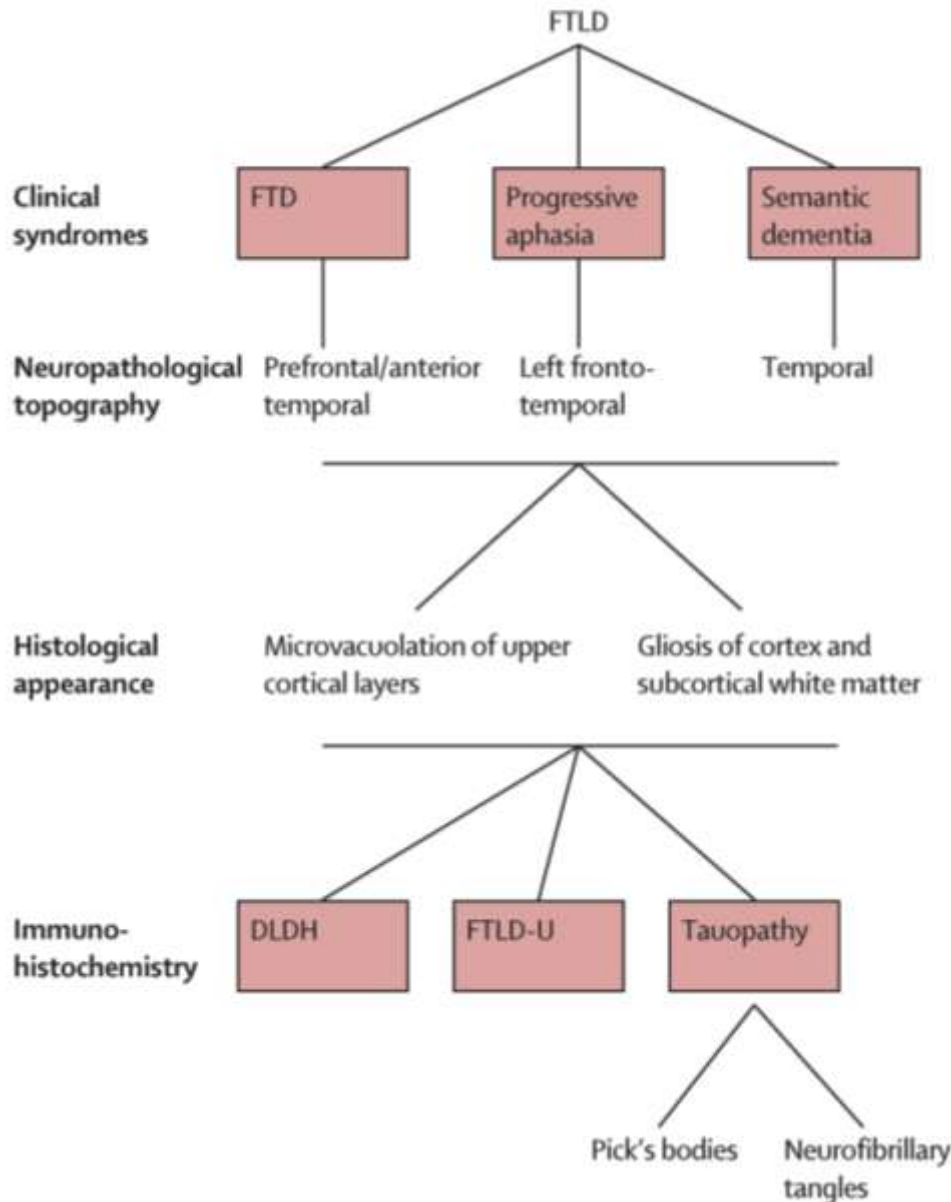


Estadio 3



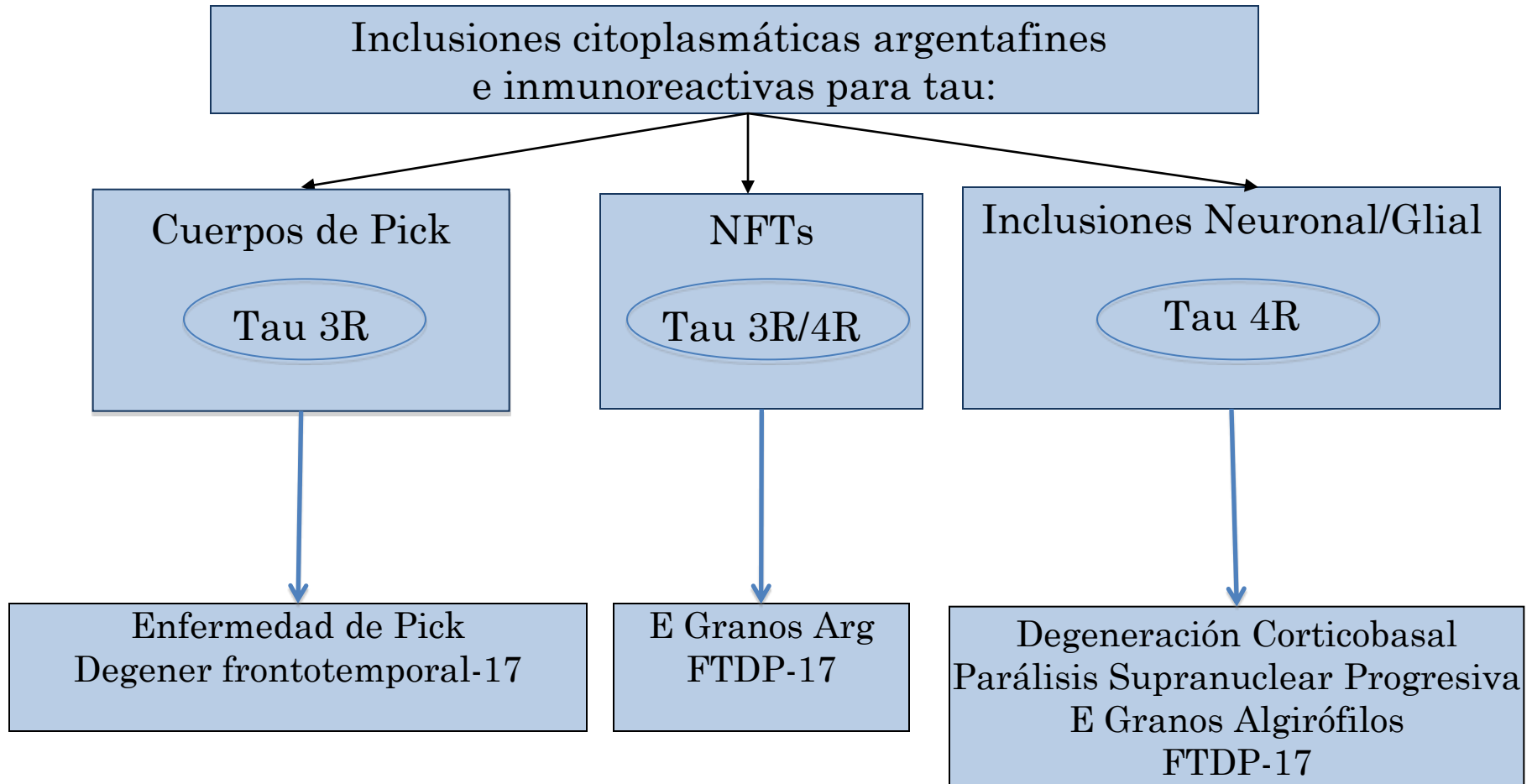
DEGENERACIÓN LOBAR FRONTOTEMPORAL

Características histológicas



DEGENERACIÓN LOBAR FRONTOTEMPORAL

Clasificación según criterios neuropatológico: taupatías

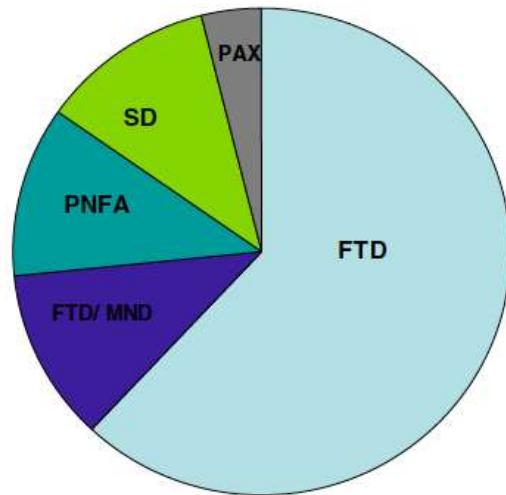


Taupatías no-familiares: Pick, PSP, AGD, CBD

Taupatías familiares: FTLD - mutaciones *MAPT*

DEGENERACIÓN LOBAR FRONTOTEMPORAL

Correlación clínico-patológica



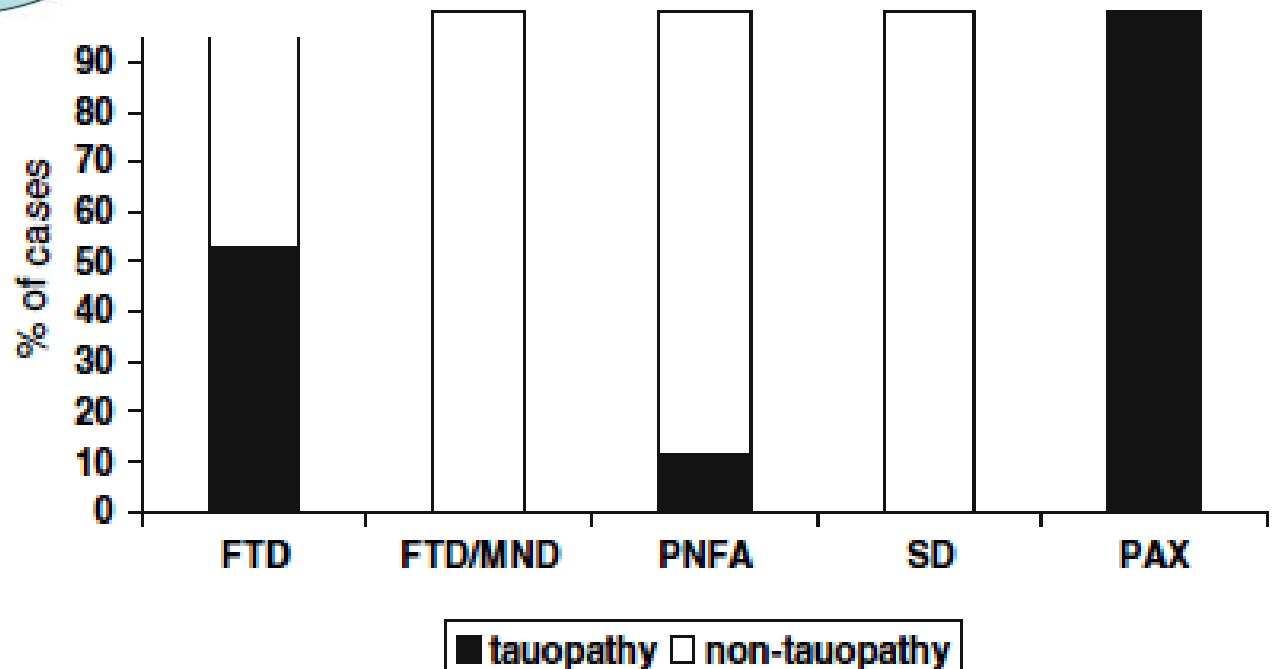
Acta Neuropathol (2007) 114:31–38

DOI 10.1007/s00401-007-0236-3

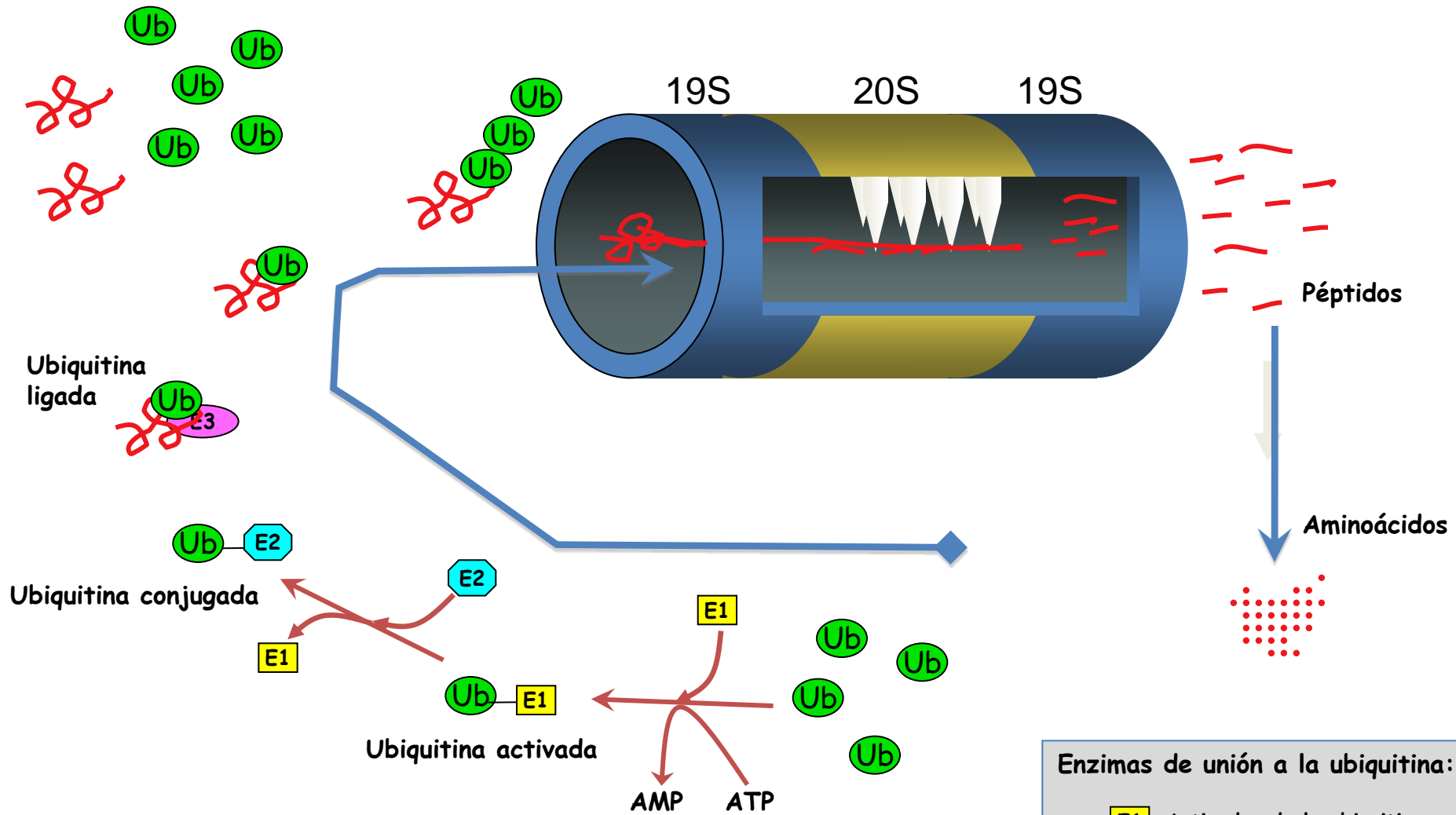
REVIEW

Frontotemporal lobar degeneration: clinical and pathological relationships

Julie Snowden · David Neary · David Mann



PROTEOLISIS VÍA UBIQUITINA-PROTEASOMA



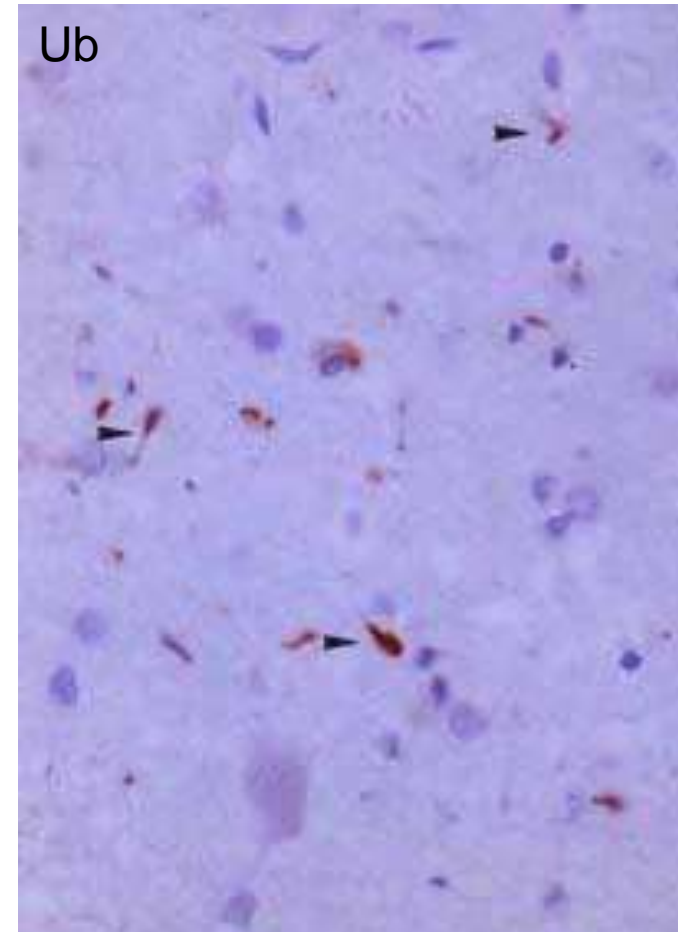
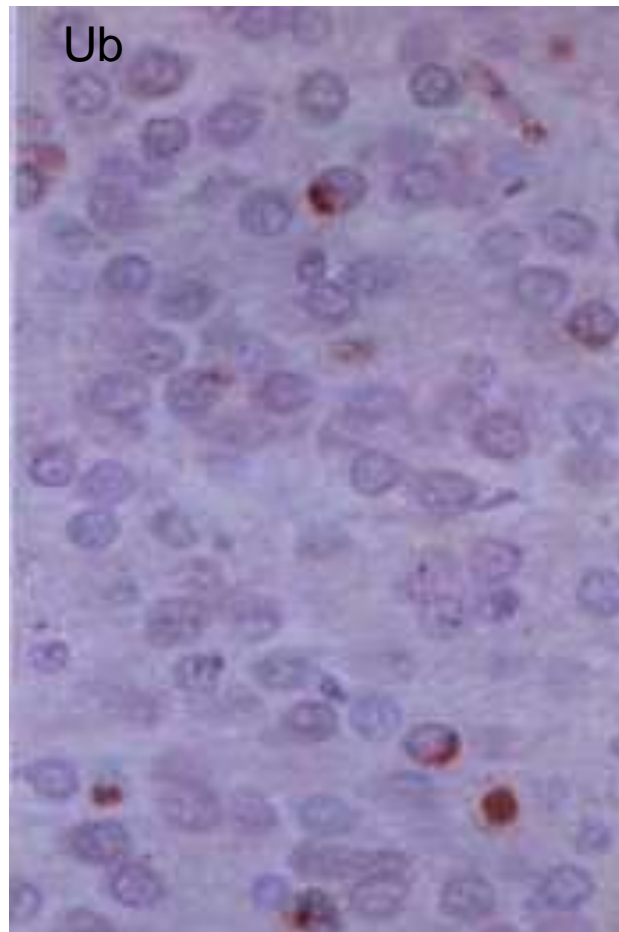
Enzimas de unión a la ubiquitina:

- E1** Activador de la ubiquitina
- E2s** Conjugasas de la ubiquitina con el sustrato
- E3s** Ligasas de la ubiquitina con el sustrato

DEGENERACIÓN LOBAR FRONTOTEMPORAL

FTLD con tau-, inclusiones ubiquitina +

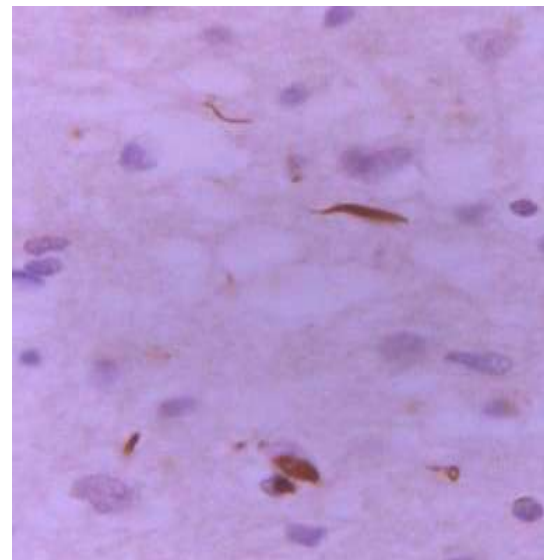
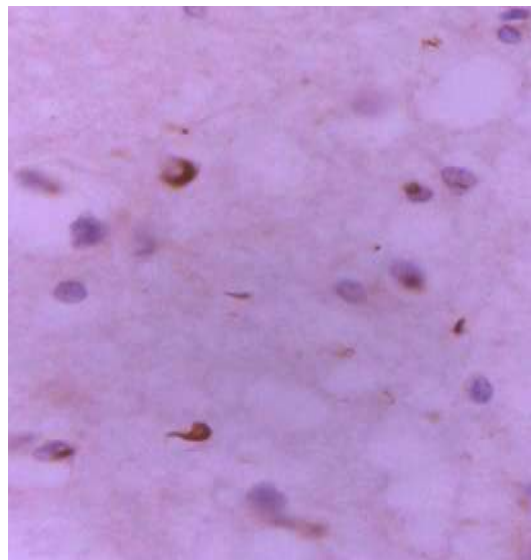
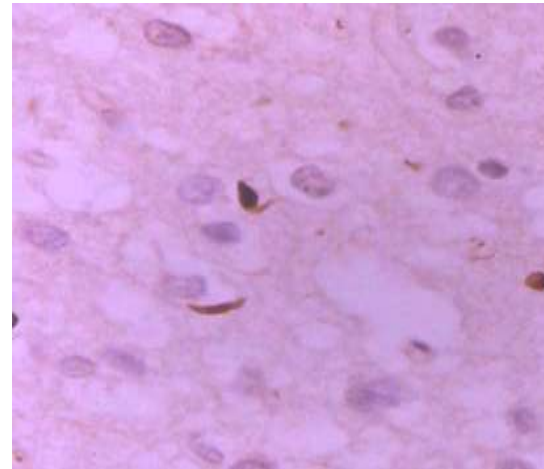
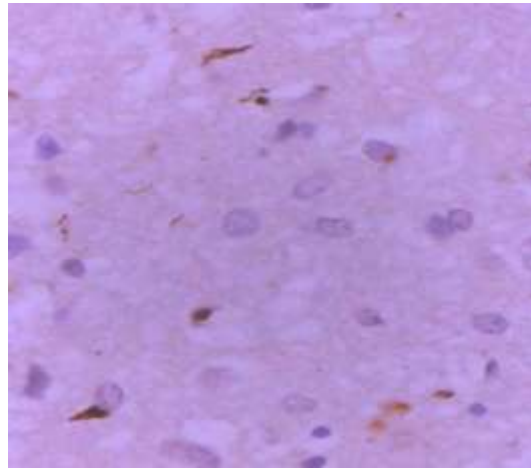
- Inclusiones neuronales citoplasmáticas, en anillo o en herradura
- Inclusiones neuronales intranucleares
- Inclusiones neuríticas, neuritas finas/gruesas
- Inclusiones gliales



DEGENERACIÓN LOBAR FRONTOTEMPORAL

FTLD con tau-, inclusiones ubiquitina +

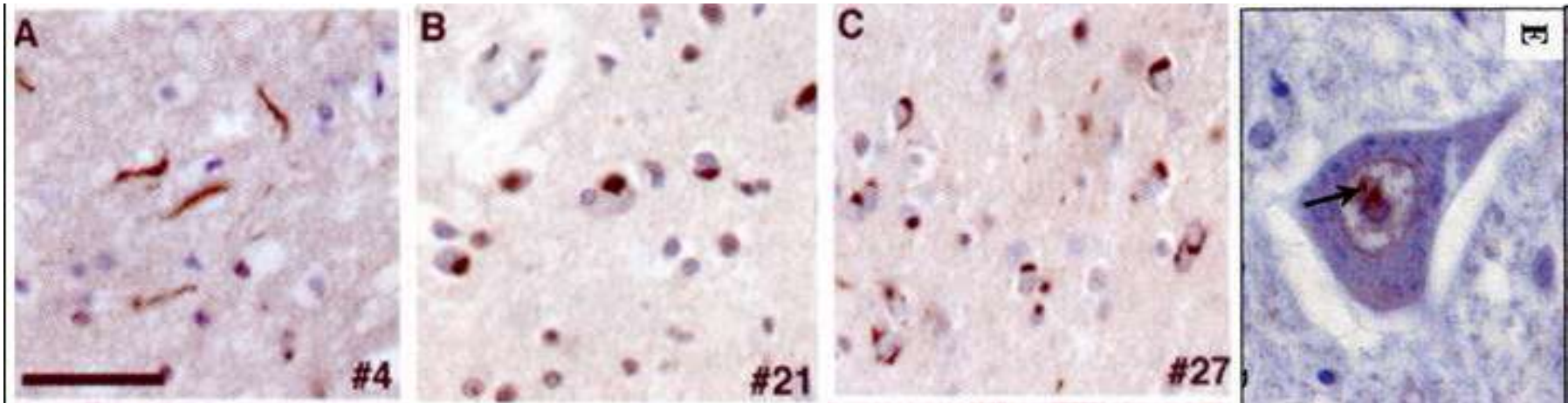
Inclusiones intraneuronales y neuritas Inmunoreactivas para Ubiquitina en cortex



SUBTIPOS HISTOPATOLÓGICOS DE FTLD-U

Estadaje según la expresión de ubiquitina

Según Sampathu	Tipo 1	Tipo 2	Tipo 3	Tipo 4
Patología	Grandes neuritas NII y NCI raras / -	NCI, NIIs y DN escasos	Pequeñas neuritas NCI y NIIs frec-abundant	IINs pequeñas DN
Distribución laminar	Superficial > profunda	Superficial = profundas	Superficial >> profunda	Superficial > profunda
Inclusiones gliales	Ausentes	Moderado-frecuente	Moderado-frecuente	Ausentes
Síntomas	Demencia semántica	FTD frec con MND	FTD o afasia progresiva no-fluente	IBMPFD
Formas familiares	-	Cromosoma 9p	GRN	VCP



Sampathu et al., Mackenzie IR et al., Cairns et al.,

SUBTIPOS HISTOPATOLÓGICOS DE FTLD-U

Correlación clínico-patológica

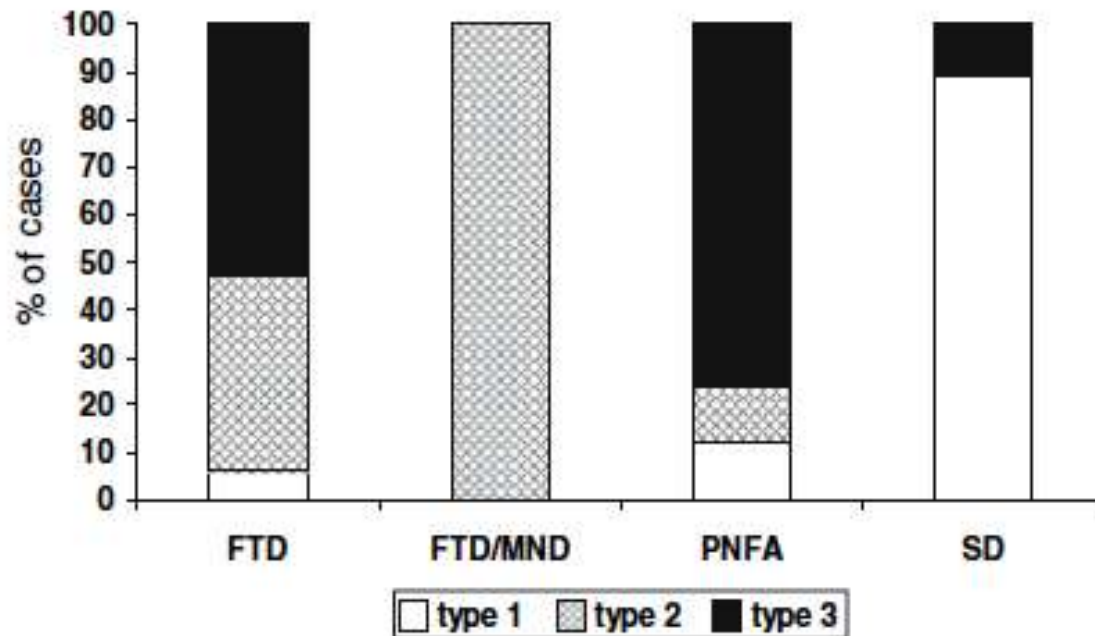
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REVIEW

Frontotemporal lobar degeneration: clinical and pathological relationships

Julie Snowden · David Neary · David Mann



DEGENERACIÓN LOBAR FRONTOTEMPORAL

Clasificación según criterios neuropatológicos

FTLD tau-, inclusiones ubiquitina +

TDP-43 +: esporádico/hereditario

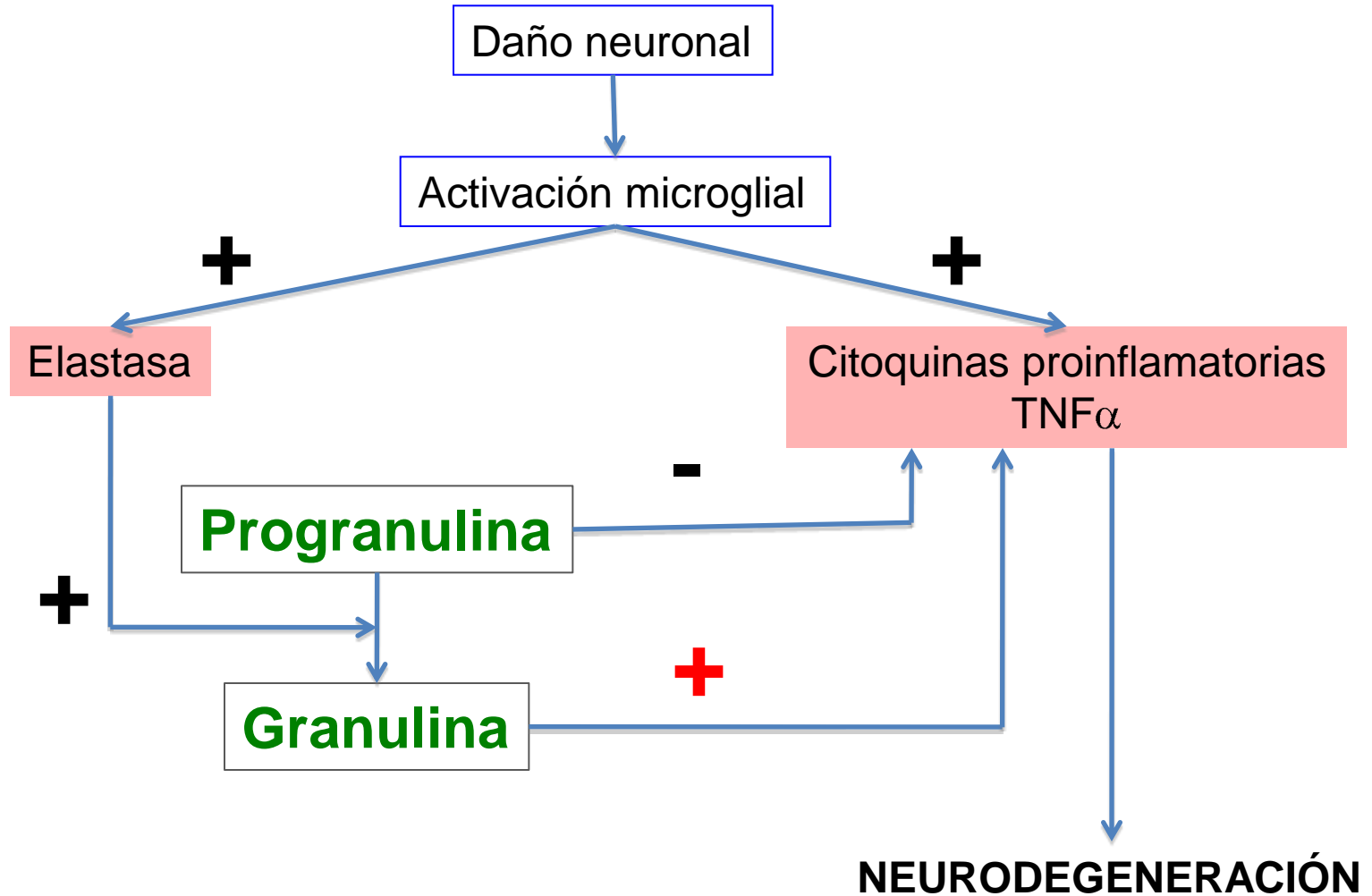
- Mutaciones en el gene progranulina (**PGRN**)
- Mutaciones en el gen valosin-containing protein (**VCP**): IBMPFD + enfermedad de neurona motora: FTLD+MND

TDP-43 -:

- Mutación en el gen **CHMP2B** (Charged Multivesicular body Protein 2B)
- Enfermedad por inclusiones de **filamentos intermedios** neuronales (NIFID)
- Inclusiones **FUS +**

FTLD no específica sin inclusiones (?)

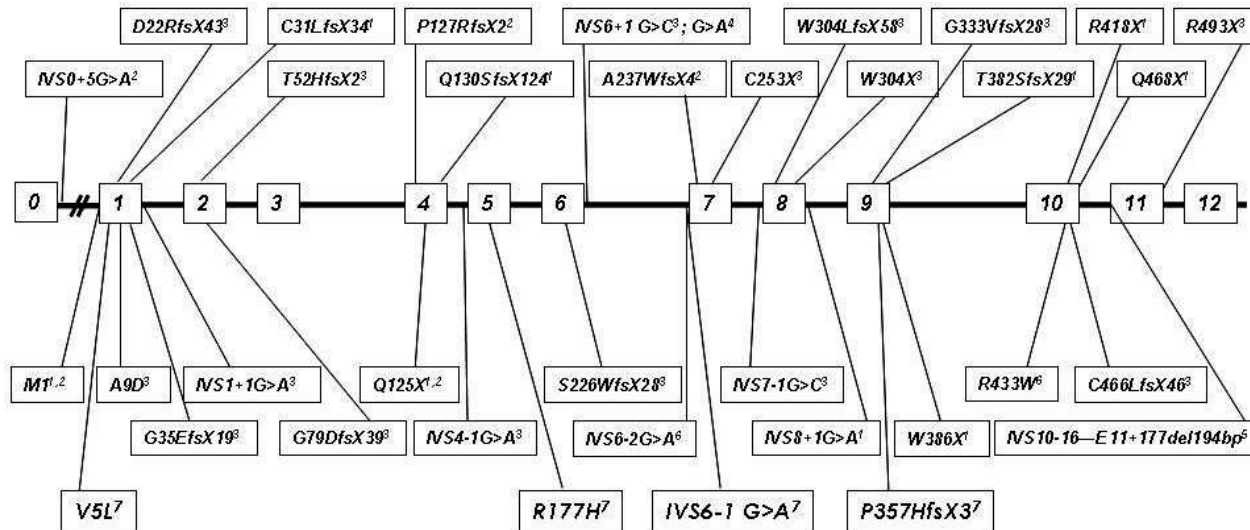
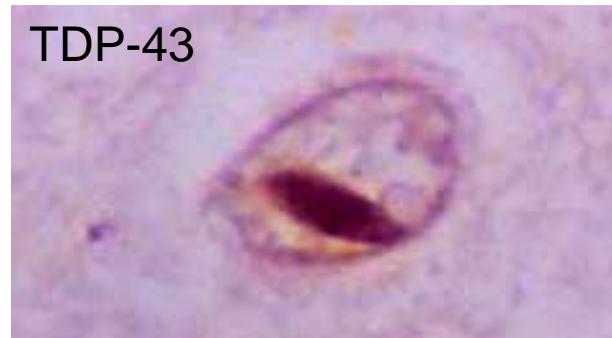
FUNCION DE PROGRANULINA EN EL SNC



DEGENERACIÓN LOBAR FRONTOTEMPORAL

FTLD Tau -, Ubiquitina +, TDP-43 +, Mutación en PGRN

Demencia frontotemporal y parkinsonismo

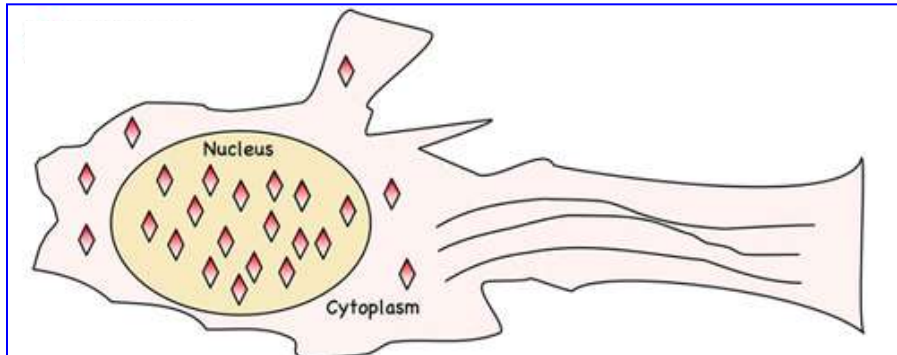


DEGENERACIÓN LOBAR FRONTOTEMPORAL

TDP-43: *transactive response DNA-binding protein*

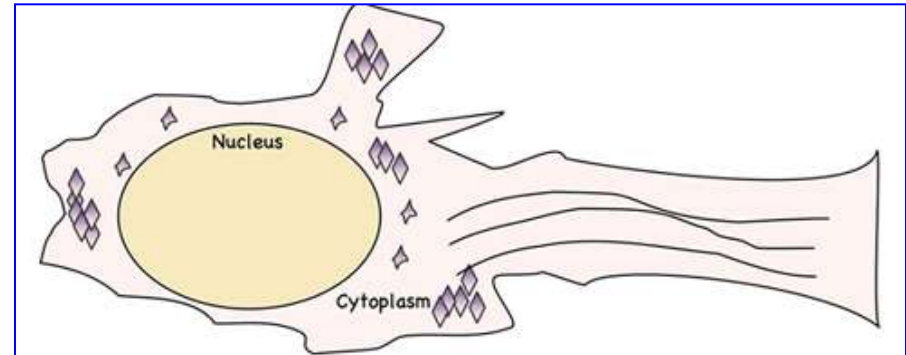
- ✓ Es una proteína nuclear reguladora del n° de exones (splicing/skipping)
- ✓ Se descubrió investigando el HIV-1
(*Journal of virology, June 1995, p. 3584-3596*)

TDP-43 hiperfosforilada/ubiquitilada



Normal

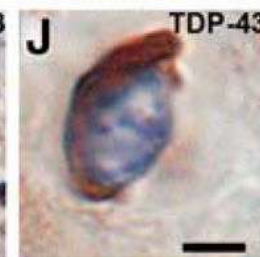
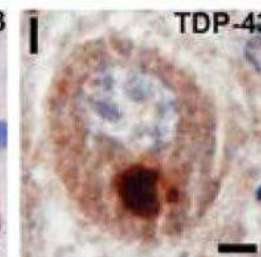
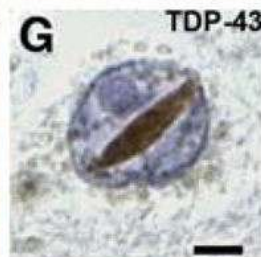
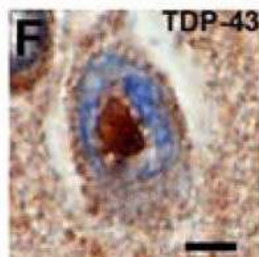
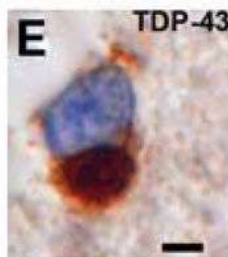
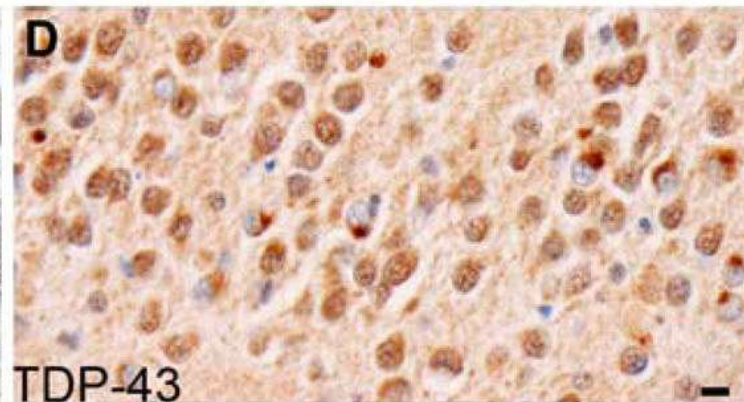
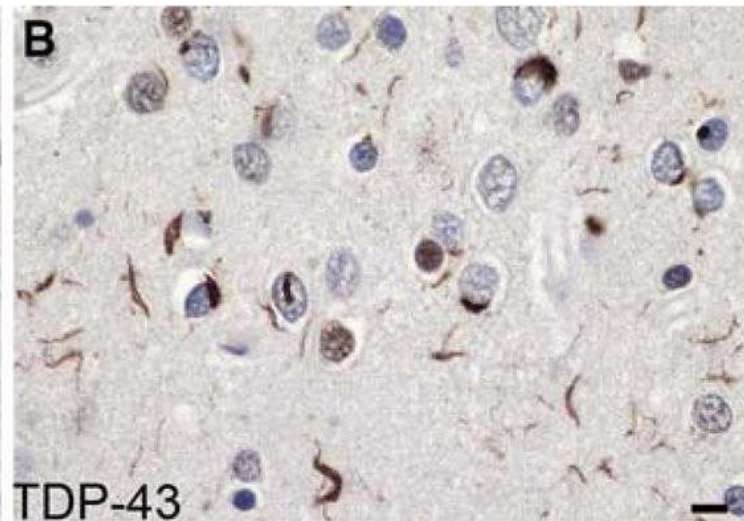
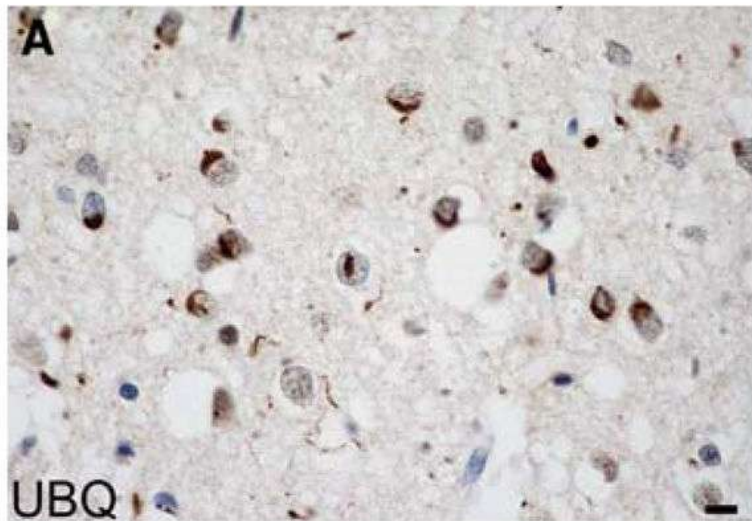
TDP-43/fragmentos C-terminal separados



FTLD-U / ALS

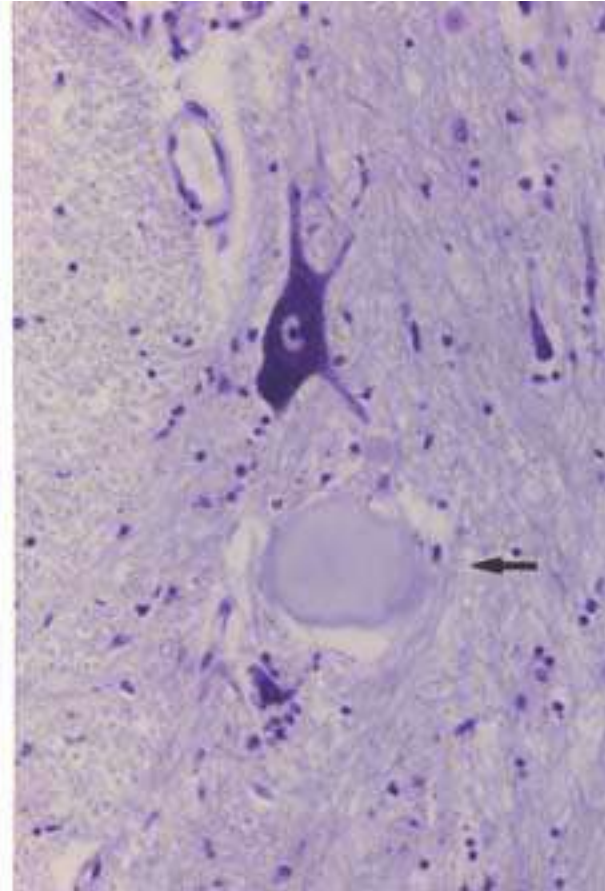
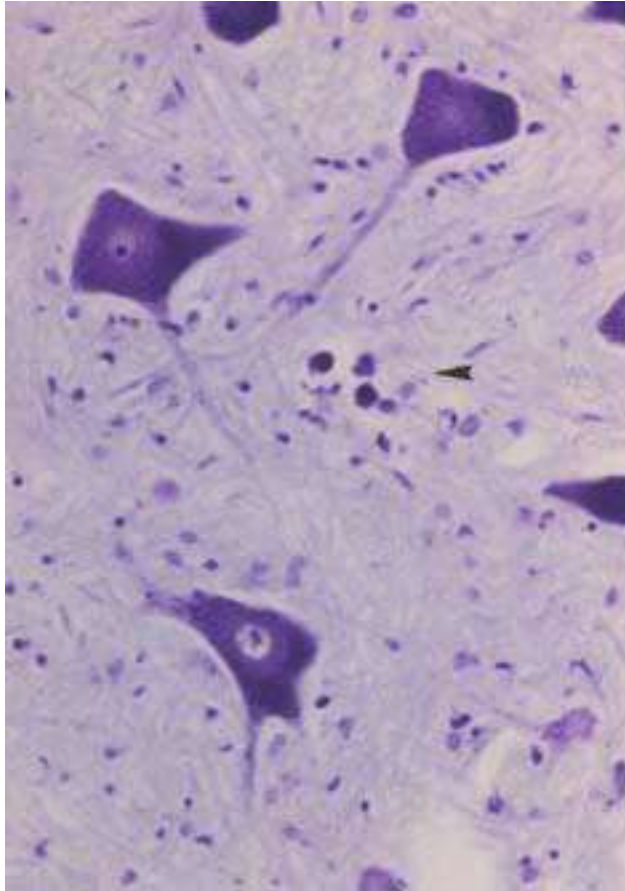
DEGENERACIÓN LOBAR FRONTOTEMPORAL

FTLD Tau -, Ubiquitina +, TDP-43 + Mutación en PGRN



DEGENERACIÓN LOBAR FRONTOTEMPORAL

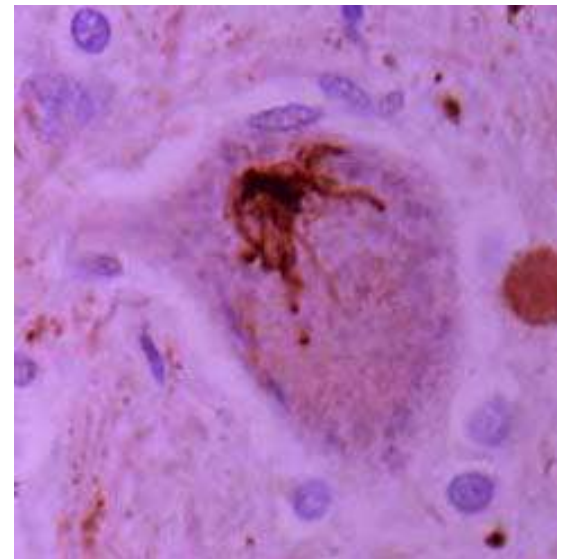
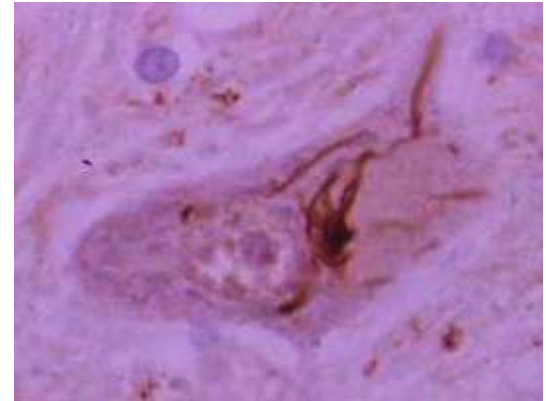
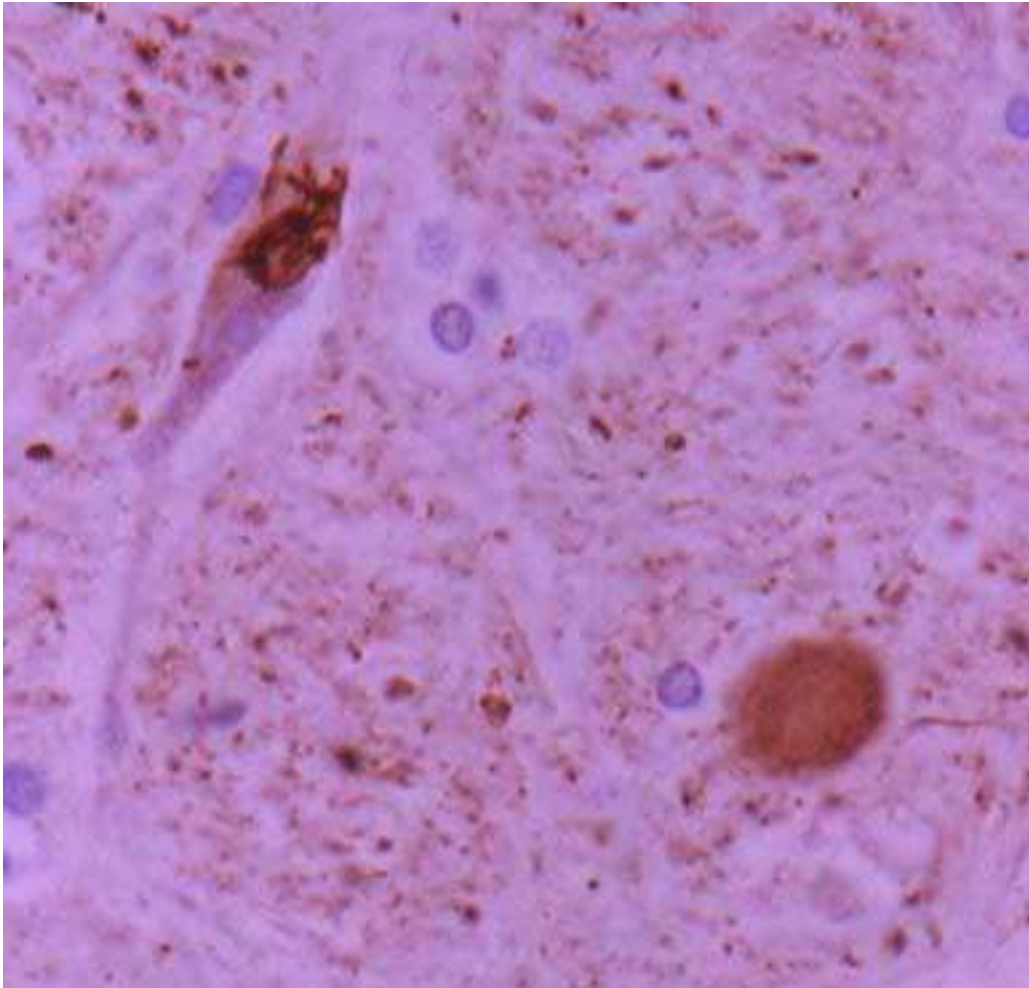
FTLD con tau-, ubi+, TDP-43+ inclusiones asociadas con MND



DEGENERACIÓN LOBAR FRONTOTEMPORAL

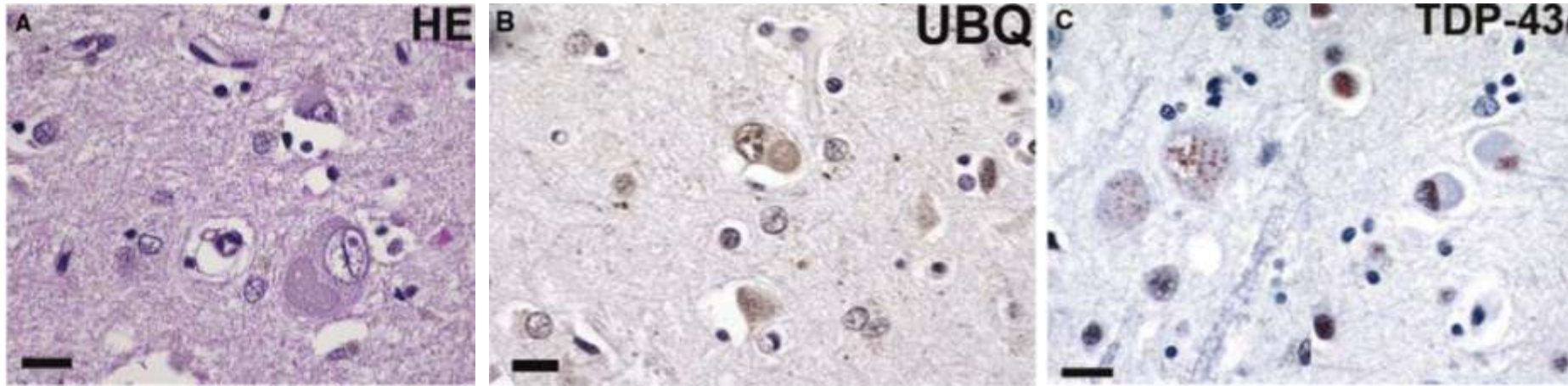
FTLD con tau-, ubi+, TDP-43+ inclusiones asociadas con MND

Inclusiones skein-like en motoneuronas



ENFERMEDAD POR CUERPOS DE INCLUSION BASOFILICOS

TDP-43 +, circunvolución precentral



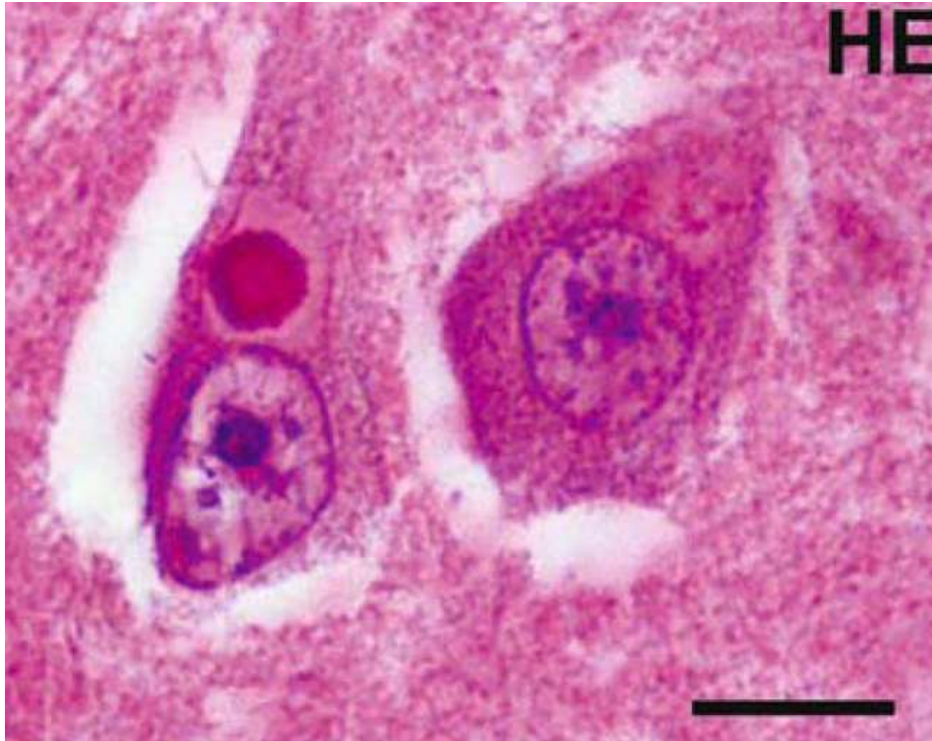
- ✓ Inclusiones basofílicas citoplasmáticas neuronales
- ✓ Positivas para Ubiquitina
- ✓ Inclusiones con fino marcaje granular citoplasmático con TDP-43
- ✓ Inclusiones negativas para TDP-43

Cairns et al, 2007

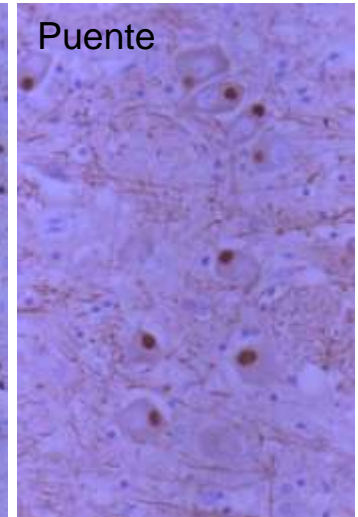
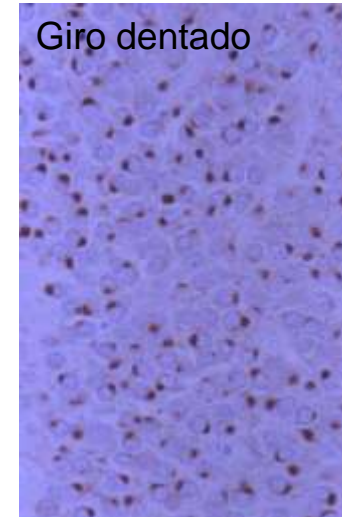
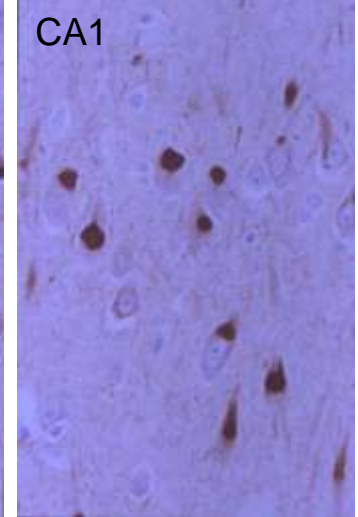
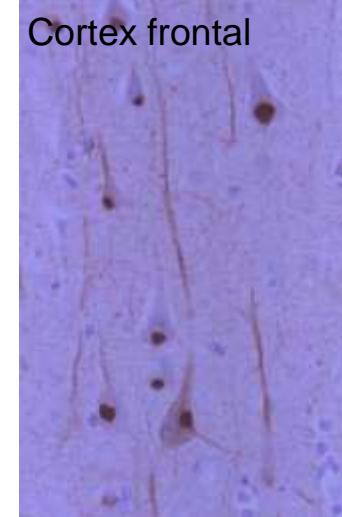
DEGENERACIÓN LOBAR FRONTOTEMPORAL

Neuronal intermediate filament inclusion disease (NIFID)

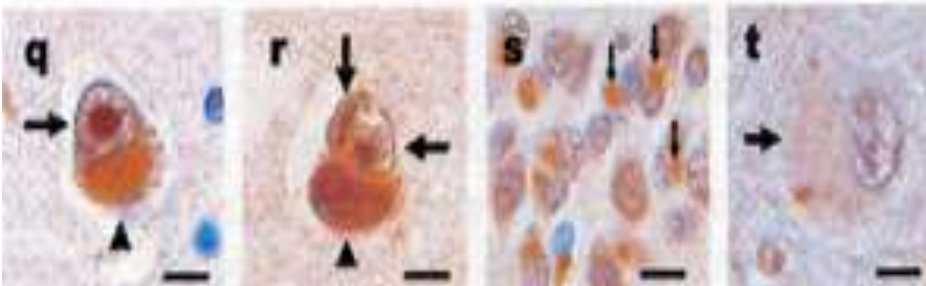
Inclusiones citoplasmáticas neuronales redondas y pálidas H&E. Cairns, 2007



Inclusiones de Internexina presentes en varios tipos neuronales



NEUROLOGY 2004;63:1376-1384

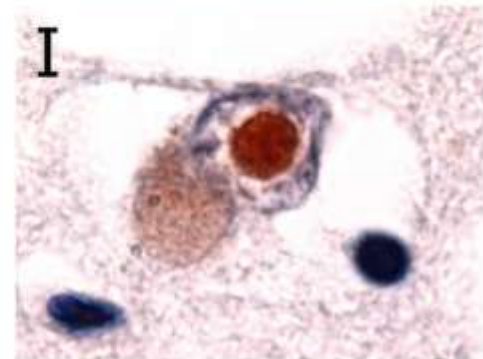
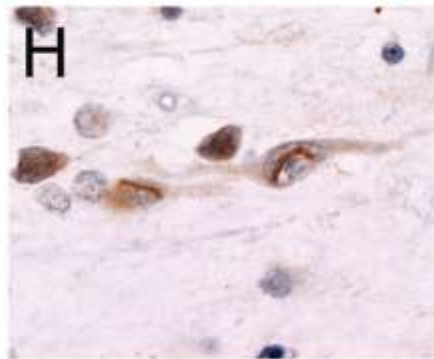
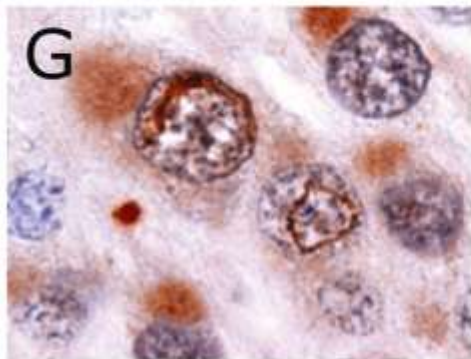
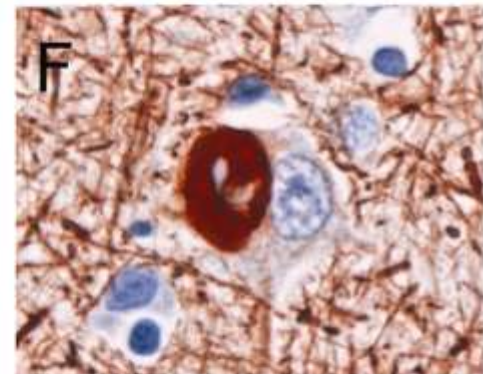
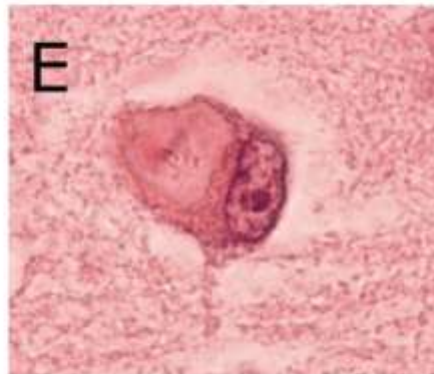
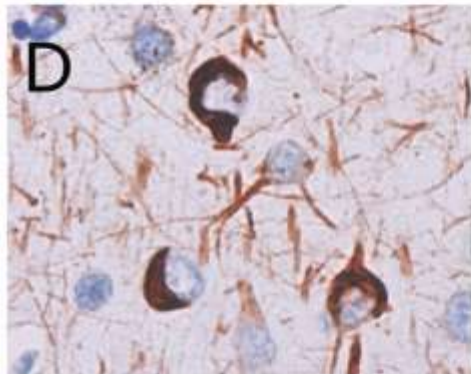
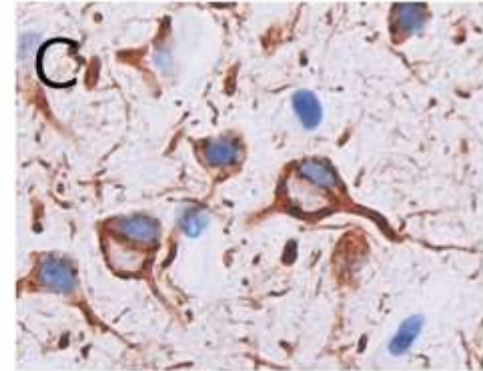
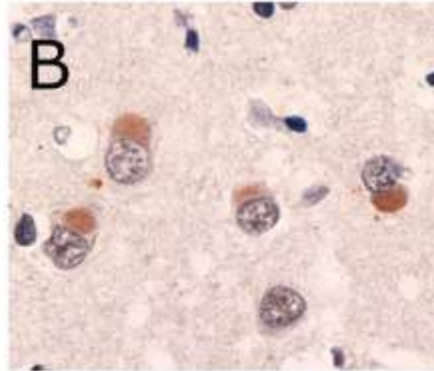
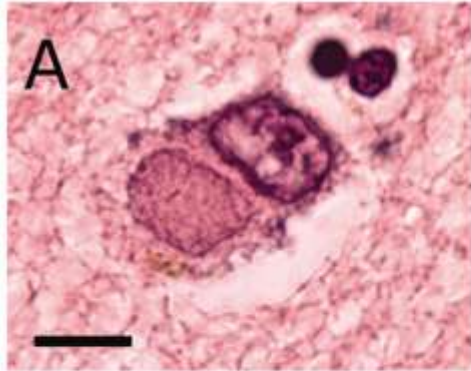


Ub NCI and NII, giro dentado

I. Ferrer

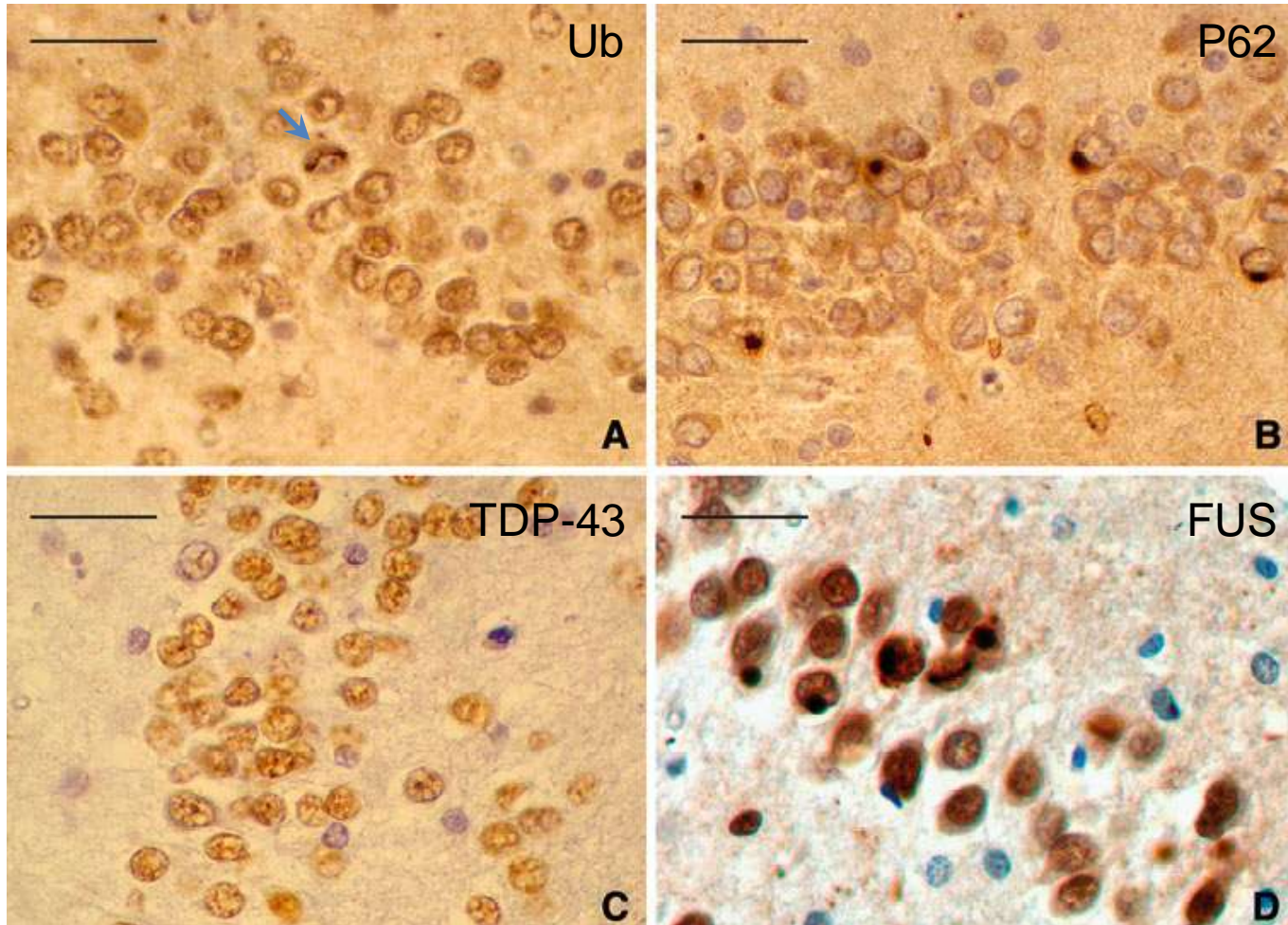
DEGENERACIÓN LOBAR FRONTOTEMPORAL

Neuronal intermediate filament inclusion disease (NIFID)



DEGENERACIÓN LOBAR FRONTOTEMPORAL

Tau-, Ubiquitina +, TDP-43- FUS +



Seelarr et al, 2010

DEGENERACIÓN LOBAR FRONTOTEMPORAL

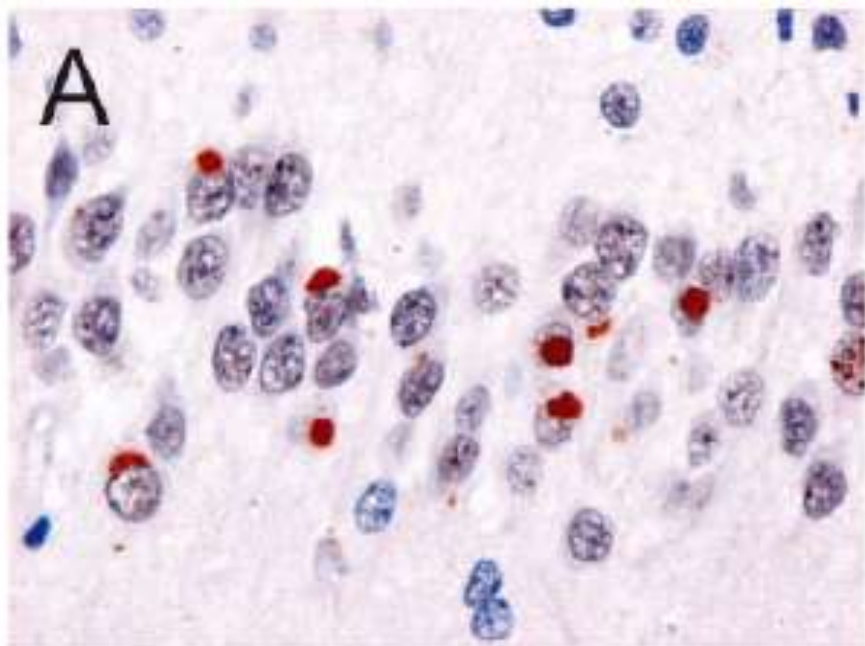
FTLD with tau-, ubi+, TDP-43-

doi:10.1093/brain/awn061

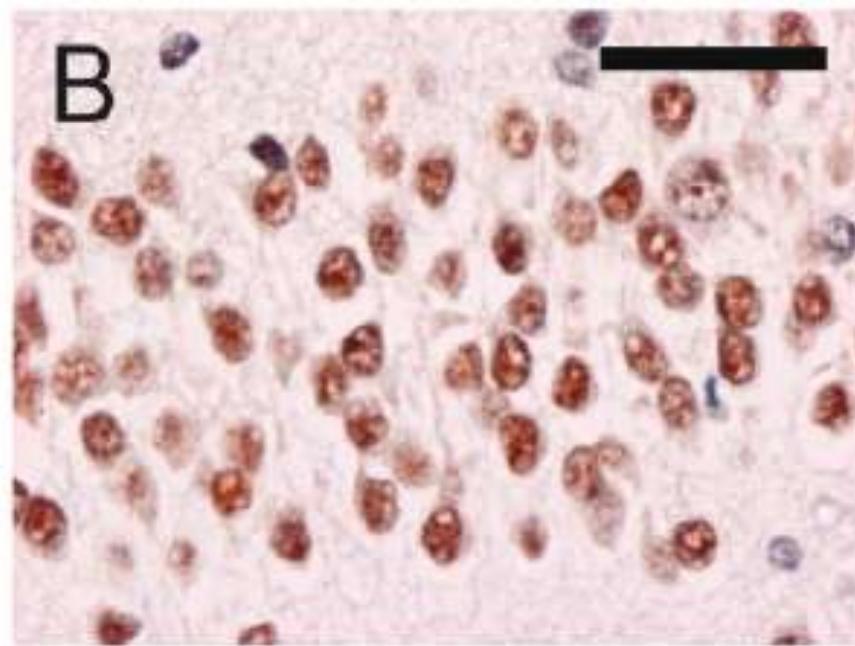
Brain (2008), 131, 1282–1293

Atypical frontotemporal lobar degeneration with ubiquitin-positive, TDP-43-negative neuronal inclusions

Ian R. A. Mackenzie,¹ Dean Foti,² John Woulfe³ and Trevor A. Hurwitz⁴



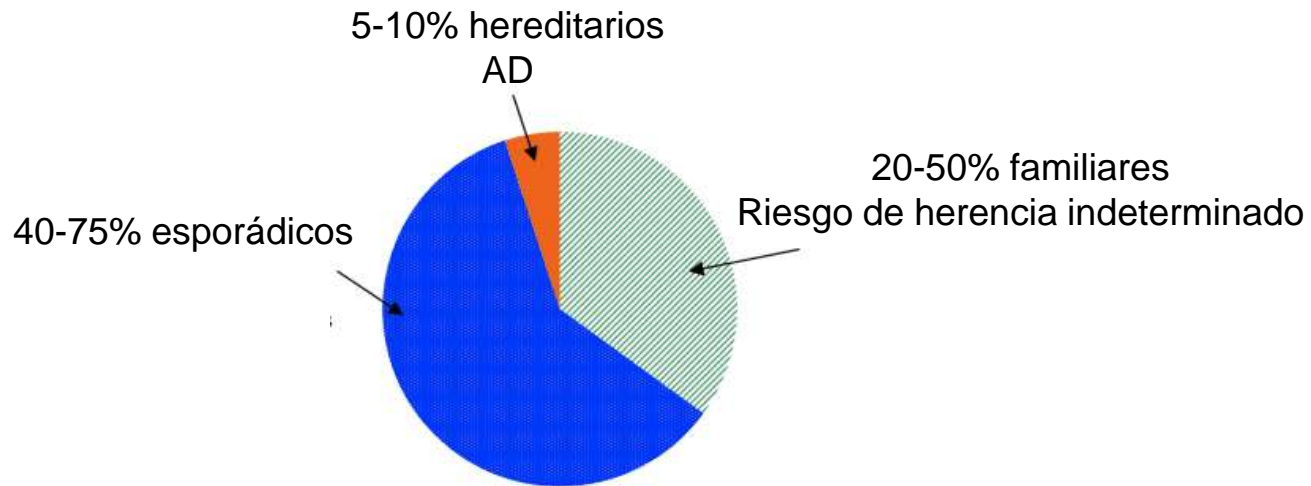
Ub+ inclusiones citoplásmicas



TDP43-
Expresión nuclear normal

DEGENERACIÓN LOBAR FRONTOTEMPORAL

Alteraciones genéticas



MAPT-17: Microtubule-Associated Protein Tau

FTLD-17 : Fronto-Temporal Lobar Degeneration cr17

VCP-9 : Valosin- Containing Protein

inclusion body myopathy Paget disease of the bone and FTD (IBMPFD)

CHMP2B-3: Charged Multivesicular body Protein 2B

PGRN-17: ProGRaNuline cr17

TARDBP cr1

PS1: FTD familiar

FUS/TLS (Kwiatkowski, et al. 2009)

DEGENERACIÓN LOBAR FRONTOTEMPORAL

Alteraciones genéticas, correlación clínico-patológica

Table 1 Genetics and TDP-43 pathology correlates of FTD and ALS

Gene name	Chromosome loci	Protein product	Clinical features	Pathological features		
				Ubiquitin positivity	TDP-43 positivity	FTLD-U subtypes ^a
Not known ^b	NA	NA	FTD FTD-MND	Yes	Yes	3 > 2 > 1
<i>GRN</i>	17q21.32	Progranulin	FTD FTD-parkinsonism	Yes	Yes	3
<i>VCP</i>	9p13.2-p12	Valosin-containing protein	FTD- inclusion body myopathy- Paget disease	Yes	Yes	4
Not known ^b	9p	NA	FTD FTD-MND MND	Yes	Yes	2
<i>CHMP2B</i>	2p11.2	Chromatin modifying protein 2B	FTD FTD-ALS ALS	Yes	No	NA
Not known ^b	NA	NA	ALS ALS-FTD	Yes	Yes	NA
<i>SOD1</i>	21q22.1	Cu/Zn superoxide dismutase	ALS	Yes	No	NA

NA not applicable

^a Classification based on Sampathu et al. [46] (type 1–3)/Neumann et al. [39] (type 4)

^b Familial cases with unknown chromosome linkage

DEGENERACIÓN LOBAR FRONTOTEMPORAL

FTLD with tau-, ubi+, TDP-43-

FTLD Protocol Flowchart

REGIONS: MFG, STG, PL, HIP (with DG), CG
STAINS: H & E, Tau (e.g. PHF1, AT8), Ub or p62, α -Synuclein
 If not high-Braak stage AD or high-probability DLB, proceed with specific FTLD protocol

Tau +

Tau IHC on additional sections, if indicated: OL, AMYG, STR, GP, THAL/SUBTN, MID, PONS, MED, CBLM including DN
 Use morphological criteria (e.g. tufted astrocytes, grains, etc) and, as required, use tau isoform-specific IHC:
 3R & 4R tau on HIP & MFG if Tau +, additional sections as indicated.

3R Tau +

MAPT mutation

4R Tau +

3R & 4R Tau +

FTLD with Pick bodies

FTLD with MAPT mutation (3R, 4R, or 3R & 4R Tau)

CBD
PSP
AGD
MSTD
Unclassifiable tauopathy

Neurofibrillary tangle dementia

***Note:**

1. "Unclassifiable sporadic tauopathies" may be predominantly either 3R, 4R, or combined 3R and 4R tauopathies.
2. Coexisting neurodegenerative disease(s) may also be present.

Ub +/p62 +, Tau -, -Syn -, OR case is ALS

TDP-43 IHC on STR, MED, SC (if available), or same sections as for Tau IHC AND

NF or INA IHC on area with highest density of Ub+ or p62 +inclusions;
 If either is positive, repeat on MFG, STG, HIP, CING
 Mutation analysis (PGRN, VCP, CHMP2B, IFT74) as indicated.

TDP-43 +, NF or INA -

TDP-43 proteinopathy:
FTLD-U
FTLD-U with MND
with or without PGRN or VCP mutation or chr 9p linkage

TDP-43 -

NF or INA +

NF or INA -

α -internex
NIFID

BIBD or FTLD-U with CHMP2B mutation

FUS

Tau - & no Ub/p62 Inclusions seen

Prion + \rightarrow Prion disease
 Prion - \rightarrow DLDH or FTLD, NOS

NIFID: Neuronal Intermediate Filament Inclusion Disease
BIBD: Basophilic Inclusion Body Disease

DEGENERACIÓN LOBAR FRONTOTEMPORAL

Nomenclatura actual

doi:10.1093/brain/awn061

Brain (2008), 131, 1282–1293

Atypical frontotemporal lobar degeneration with ubiquitin-positive, TDP-43-negative neuronal inclusions

Ian R. A. Mackenzie,¹ Dean Foti,² John Woulfe³ and Trevor A. Hurwitz⁴

Únicamente los casos donde no ha sido posible demostrar una proteína específica que co-precipite con la ubiquitina se denominarán FTLD-U

Si una proteína “patógena” ubiquitilada es detectada formando parte de inclusiones, esta se incluirá en la denominación de la enfermedad:

FTLD-TDP

NIFID

FTLD-FUS

*XXV Congreso Nacional de la SEAP
y División Española de "International Academy of Pathology"
Zaragoza Mayo 2011*

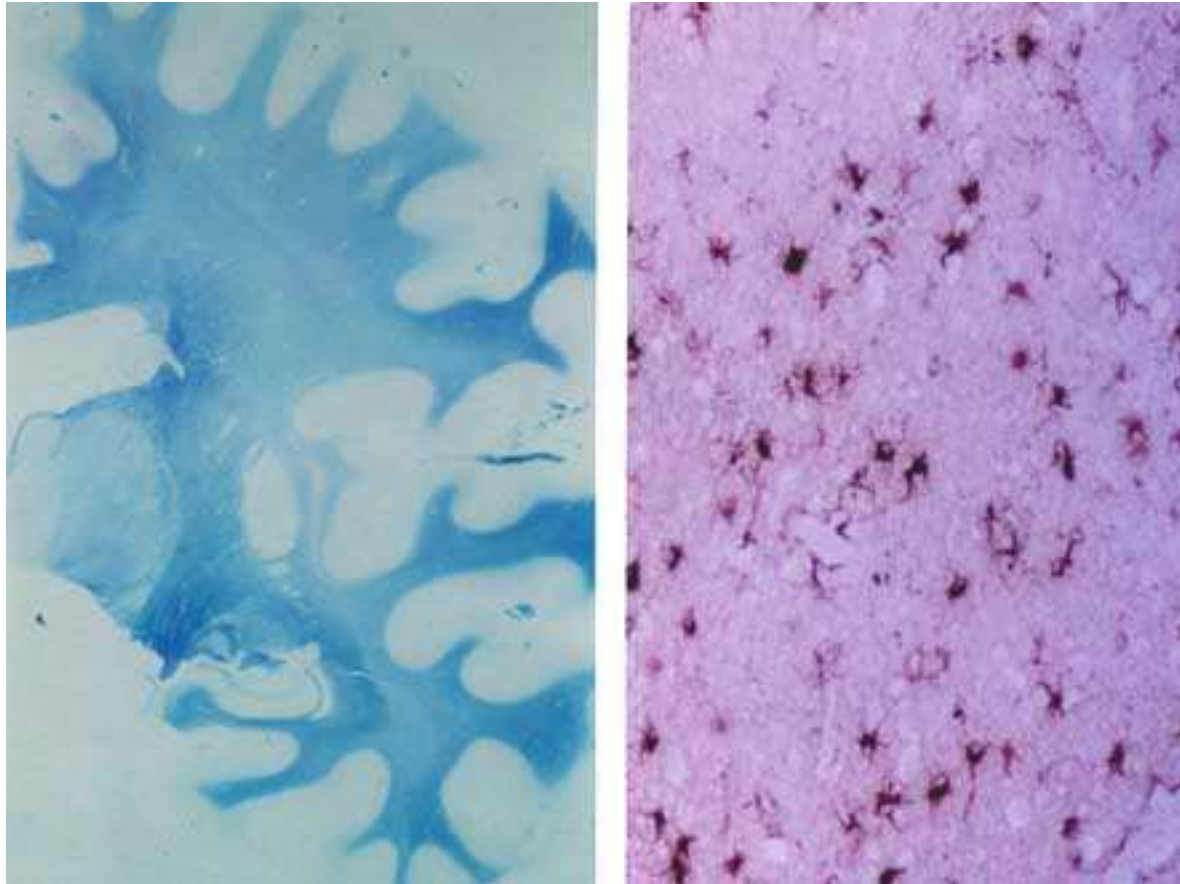
GRACIAS!

o+ehun
biobanco vasco para
la investigación
Fundación Vasca de Innovación
e Investigación Sanitarias



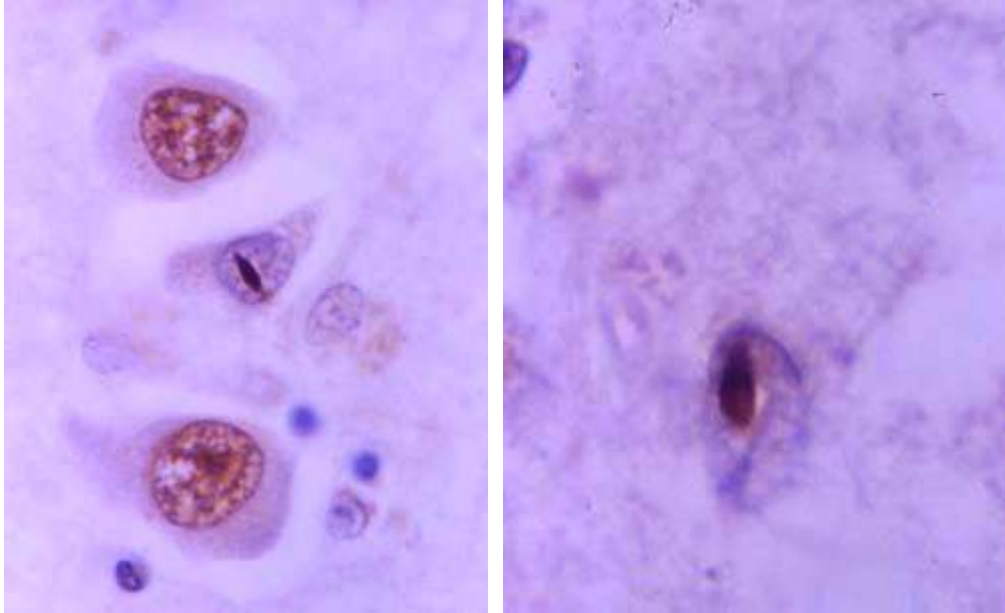
DEGENERACIÓN LOBAR FRONTO-TEMPORAL

Myelin pallor and astrocytic gliosis in the cerebral white matter.



DEGENERACIÓN LOBAR FRONTOTEMPORAL

FTLD Tau -, Ubiquitina +, TDP-43 + Mutación en PGRN



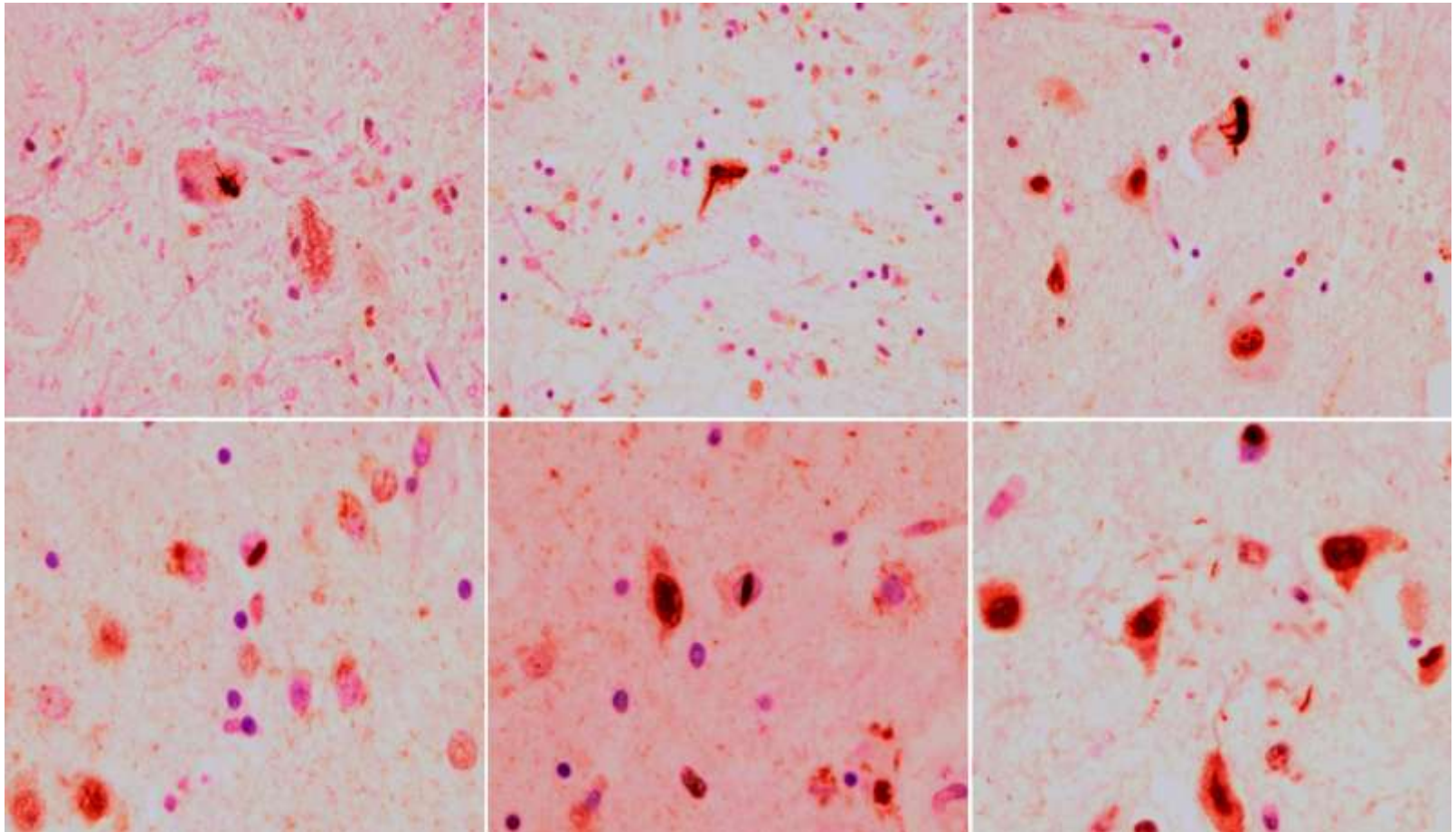
Inclusiones intranucleares en ojo de gato en relación con TPD-43 acumulación

TARDBP gene at the ALS10 locus on chromosome 1.

DEGENERACIÓN LOBAR FRONTO-TEMPORAL

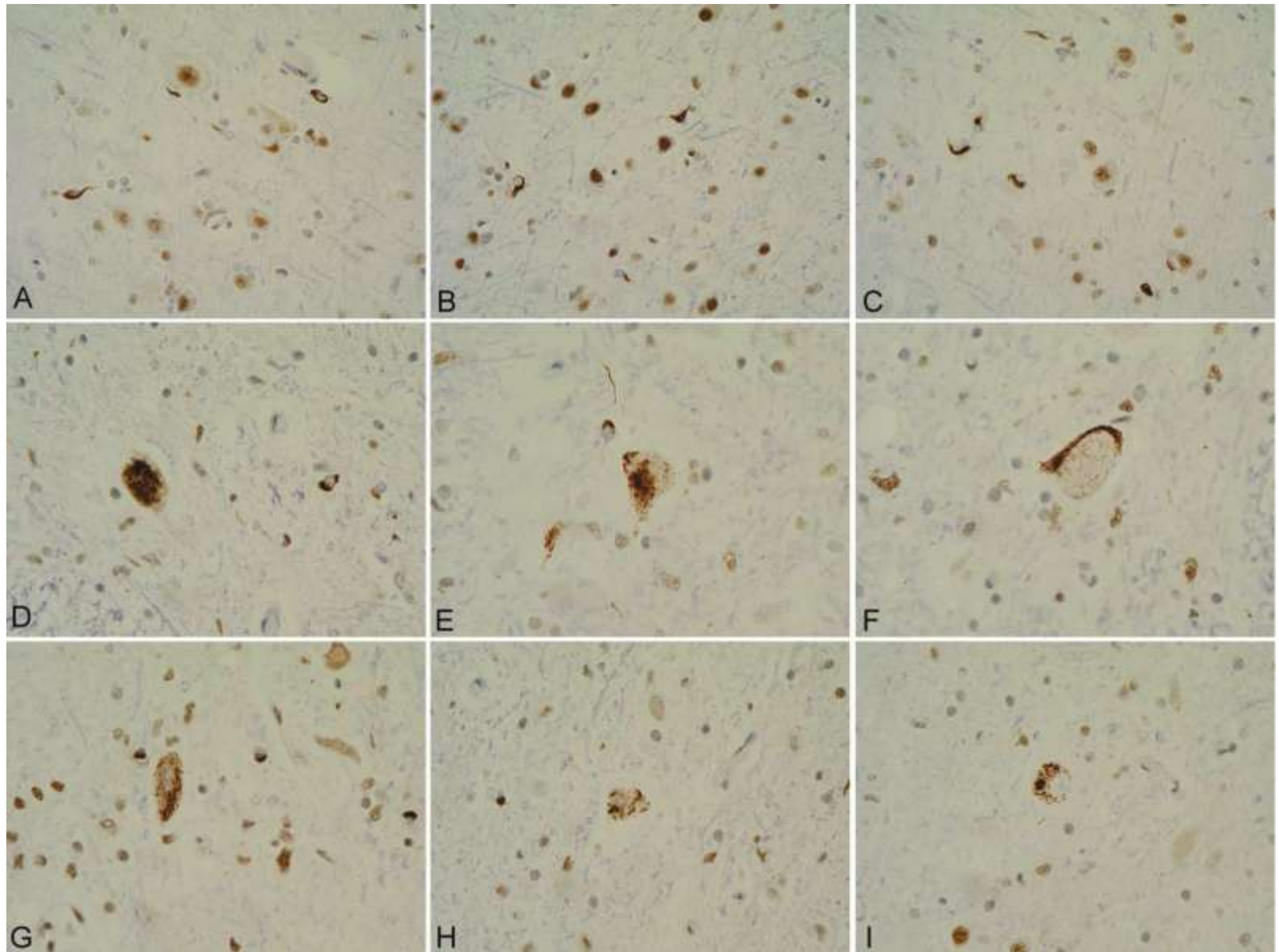
FTLD-TDP-43 TAR (*transactive response DNA-binding protein*)

TDP-43 is present in the nucleus under normal conditions. Loss of nuclear staining and bizarre intranuclear, intracytoplasmic and neuritic inclusions are characteristics of TDP-43 pathology



DEGENERACIÓN LOBAR FRONTOTEMPORAL

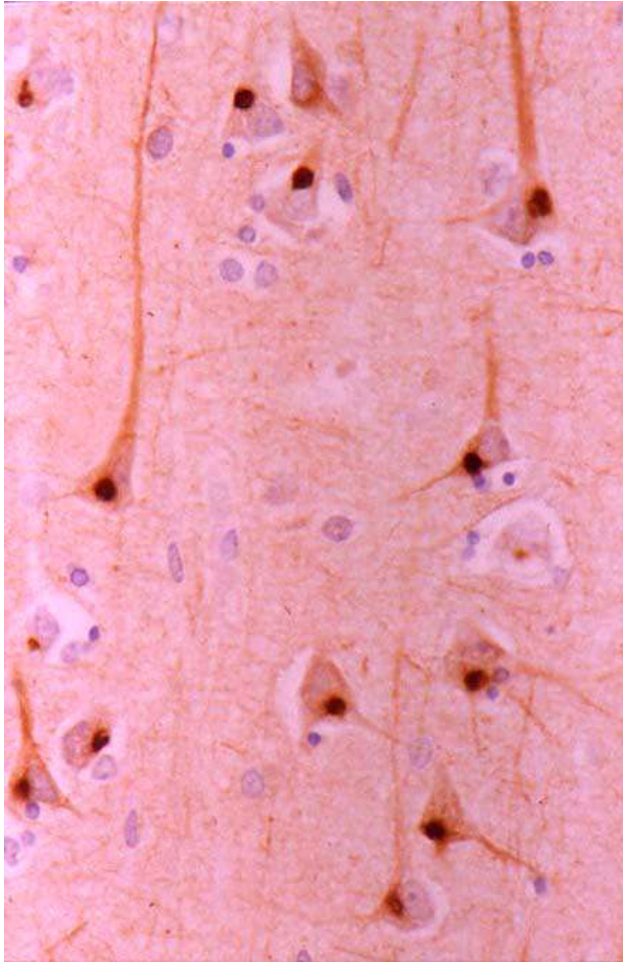
FTLD con tau-, ubi+, TDP-43+ inclusiones asociadas con MND



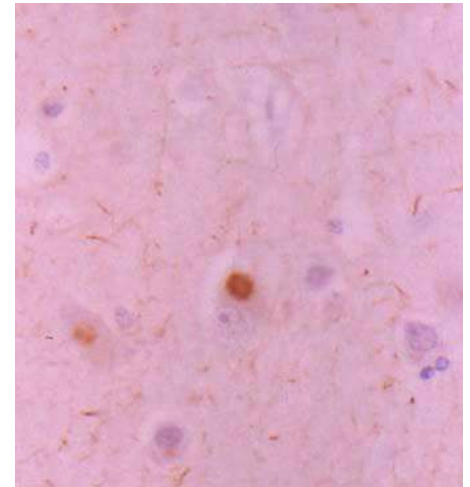
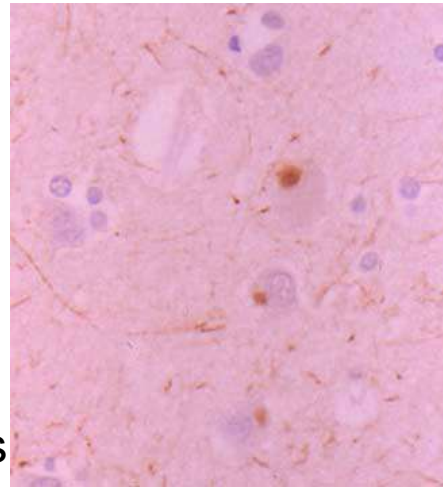
DEGENERACIÓN LOBAR FRONTO-TEMPORAL

Neuronal intermediate filament inclusion disease (NIFID)

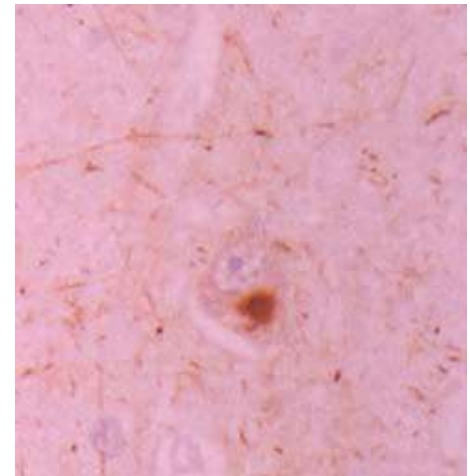
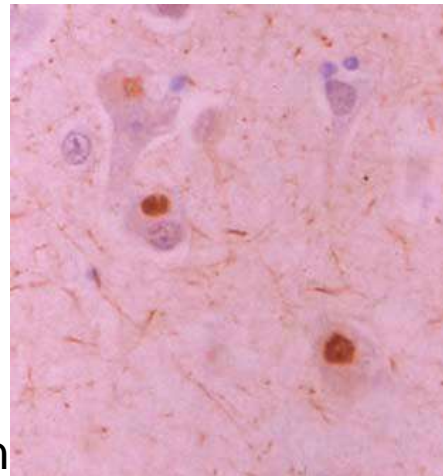
Internexin



NFTs



Internexin



DEGENERACIÓN LOBAR FRONTO-TEMPORAL

Neuronal intermediate filament inclusion disease (NIFID)

Inclusions are immunoreactive to FUS. A: cerebral cortex; B: dentate gyrus

