

Genetic diseases

We study the pathogenetic mechanisms of Kabuki Syndrome and related pathologies, called Chromatinopathies, using cellular models combined with biochemical and bioinformatic models. Our primary goals are: i) to profile the DNA methylation signature in a larger cohort of Chromatinopathies patients, in order to use it as molecular diagnosis tool, ii) to study the functional interplay between alteration of topology associated domains (TADs), and transcriptional profiles in Kabuki syndrome patients, and iii) to identify the role of KMT2D-mediated epigenetic modifications related to metabolism. By combining biochemical and metabolomic approaches in mouse and human cell models, we demonstrated a rewiring of the mitochondrial metabolic phenotype due to KMT2D alteration that might contribute to the onset of Kabuki syndrome. We currently using our cellular models to go deeply in the biological mechanisms underpinning this metabolic control.

Finally, we have Biobanked about 800 individuals with Kabuki syndrome and related chromatinopathies, of which we have a careful clinical description, Primary cell lines such as skin fibroblasts and stem cell lines such as hiPSC have been generated and made available for the international scientific community.

1. [Loss of Function of the Gene Encoding the Histone Methyltransferase KMT2D Leads to Deregulation of Mitochondrial Respiration.](#)

Pacelli C, Adipietro I, Malerba N, Squeo GM, Piccoli C, Amoresano A, Pinto G, Pucci P, Lee JE, Ge K, Capitanio N, Merla G. *Cells*. 2020 Jul 13;9(7):1685. doi: 10.3390/cells9071685. PMID: 32668765

2. [A restricted spectrum of missense KMT2D variants cause a multiple malformations disorder distinct from Kabuki syndrome.](#)

Cuvertino S, Hartill V, Colyer A, Garner T, Nair N, Al-Gazali L, Canham N, Faundes V, Flinter F, Hertecant J, Holder-Espinasse M, Jackson B, Lynch SA, Nadat F, Narasimhan VM, Peckham M, Sellers R, Seri M, Montanari F, Southgate L, Squeo GM, Trembath R, van Heel D, Venuto S, Weisberg D, Stals K, Ellard S; Genomics England Research Consortium, Barton A, Kimber SJ, Sheridan E, Merla G, Stevens A, Johnson CA, Banka S. *Genet Med*. 2020 May;22(5):867-877. doi: 10.1038/s41436-019-0743-3. Epub 2020 Jan 17. PMID: 31949313

3. [Kabuki syndrome: international consensus diagnostic criteria.](#)

Adam MP, Banka S, Bjornsson HT, Bodamer O, Chudley AE, Harris J, Kawame H, Lanpher BC, Lindsley AW, Merla G, Miyake N, Okamoto N, Stumpel CT, Niikawa N; Kabuki Syndrome Medical Advisory Board. *J Med Genet*. 2019 Feb;56(2):89-95. doi: 10.1136/jmedgenet-2018-105625. Epub 2018 Dec 4. PMID: 30514738

4. [Dissecting KMT2D missense mutations in Kabuki syndrome patients.](#)

Cocciadiferro D, Augello B, De Nittis P, Zhang J, Mandriani B, Malerba N, Squeo GM, Romano A, Piccinni B, Verri T, Micale L, Pasqualucci L, Merla G. *Hum Mol Genet*. 2018 Nov 1;27(21):3651-3668. doi: 10.1093/hmg/ddy241. PMID: 30107592

5. [Molecular analysis, pathogenic mechanisms, and readthrough therapy on a large cohort of Kabuki syndrome patients.](#)

Micale L, Augello B, Maffeo C, Selicorni A, Zucchetti F, Fusco C, De Nittis P, Pellico MT, Mandriani B, Fischetto R, Boccone L, Silengo M, Biamino E, Perria C, Sotgiu S, Serra G, Lapi E, Neri M, Ferlini A, Cavaliere ML, Chiurazzi P, Monica MD, Scarano G, Faravelli F,

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