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Neurofibromatosis Type 2 (NF2)

Legend: - Linked research
 Red font - NFRP-funded research

1996

1997

Molecular Biology & Genetics

Gene for NF2 localized to 22q12 (formal separation of NF1 and NF2). 1987

NF2 gene cloned; NF2 gene product identified as Merlin/Schwannomin. 1993

Mutation rate for NF2 is $\sim 6.5 \times 10^{-6}$. 1993

Two major isoforms (splice variants) of NF2 identified. 1994

Correlations made between genotype and phenotype:
 *Pary et al.
 *Rutledge et al.
 *Kluewe et al. 1996

NF2 gene product shares similarity with the 4.1 family of cytoskeleton-associated proteins - specifically, the ERM (Ezrin Radixin Moesin) proteins. 1997

Cellular Biology

Merlin is expressed in the nervous system, smooth muscle, Schwann cells, melanocytes, RBCs, endothelial cells, and neurons such as Purkinje cells and motor neurons, but not in glial cells. 1996

Immunocytochemistry shows Merlin localized to the cell membrane (filopodia, ruffling membrane, and leading edge). 1996

Truncated forms of Merlin are not detected in NF2 tumors, suggesting protein instability and degradation. 1997

Merlin self-interaction (N- to C-terminal) is involved in growth suppression. 1997

Merlin co-localized with CD44 and the actin cytoskeleton. 1997

Pathobiology

NF2 mutations detected in $\sim 50\%$ - 80% of NF2 tumors. 1992*

Merlin (NF2 mutation) is implicated in breast cancers and colorectal cancers. 1994

Merlin is lost in $\sim 80\%$ of sporadic meningiomas and $\sim 80\%$ of sporadic schwannomas. 1994

Merlin (NF2 mutation) is implicated in mesotheliomas. 1995

Germline mutations in NF2 found in at least two-thirds of all individuals with typical bilateral vestibular schwannoma. 1996

Technology/Animal Models

Drosophila NF2 mutations isolated and characterized. 1997

Drosophila homologue of NF2 (Merlin) identified. 1997

Inactivation of mouse NF2 gene results in embryonic lethality between day 6.5 and 7.0. 1997

NF2 heterozygous (+/-) mice are developed; predisposed to cancer at advanced age, but do not develop the hallmark tumors of NF2. 1997

Imaging, Detection, & Diagnosis

Type 2 neurofibromatosis first described by Dr. Wishart. 1820

Type 1 neurofibromatosis first identified in the literature by Dr. Friedrich von Recklinghausen. 1882

NF2 characterized by schwannomas of the 8th cranial nerve - can also involve schwannomas of other cranial nerves, meningiomas, ependymomas, and ocular manifestations. 1987

Gadolinium-enhanced Magnetic Resonance Imaging (MRI) made available for imaging, detection, and diagnosis of vestibular schwannoma; lesions as small as 2 mm are detectable. 1988

Diagnostic criteria for NF2 outlined:
 • Bilateral masses of the 8th cranial nerve; or
 • 1 or more 1st degree relative with NF2 + unilateral vestibular mass of 8th cranial nerve; or
 • 2 of the following: Neurofibroma, meningioma, glioma, schwannoma, juvenile posterior subcapsular lenticular opacities 1990

Two types of NF2 identified:
 (1) Gardner type - mild with late onset and few tumors other than vestibular schwannoma
 (2) Wishart type - severe, early onset with multiple tumors 1992

Mosaicism at NF2 locus is uncommon and probably under-recognized; unilateral vestibular schwannoma, ipsilateral intracranial tumors, schwannomatosis, and/or asymmetric involvement. 1996

Schwannomatosis described as a separate clinical entity from other forms of NF: Multiple schwannomas without evidence of vestibular schwannoma. 1996

Diagnostic criteria for NF2 outlined:
 • Bilateral vestibular schwannoma; or
 • 1 or more 1st degree relative with NF2 + unilateral vestibular schwannoma at <30 years; or
 • 2 of the following: Meningioma, glioma, schwannoma, juvenile posterior lenticular opacities 1997

Epidemiology

Birth incidence of NF2 is determined to be $\sim 1:33,000$ - $40,000$. 1992

Diagnostic prevalence of NF2 is $\sim 1:200,000$ because of late onset and early death. 1992

Correlations made between genotype and phenotype:
 • Nonsense/frameshift mutations = severe phenotypes
 • Splice-site mutations = variable phenotype within/between families
 • Very few non-truncating mutations detected
 • Mutations not detected by exon-scanning = mild phenotype 1996

Experimental Therapeutics

First auditory brainstem implant for treatment of hearing loss from NF2. 1979

FDA granted an Investigational Clinical Trial of a multichannel Auditory Brainstem Implant for NF2. 1994

Calpain inhibitors or calcium channel-blocking agents could prevent growth/release of tumors (in vitro); more studies required. 1995

Aminoglycosides suppress expression of nonsense mutations of NF2 and modify the neoplastic phenotype of tumor cells in culture. 1996

SU-101 tested in Phase II trial for patients with recurrent malignant gliomas. 1997

Symptom Management

Recommended screening:
 • Routine eye exams
 • Enhanced MRI scanning should occur annually, beginning in the teens
 • Surveillance of at-risk but asymptomatic individuals 1980s

Total excision of vestibular schwannomas or radiation therapy. 1991

Stereotactic radiosurgery (gamma-knife) available for vestibular schwannoma (typically results in loss of hearing). 1992

Hearing preservation/augmentation strategies: Hearing aids, cochlear implants, training in lip reading and/or sign language. 1992

Partial excision of vestibular schwannoma in cases of large tumors. 1993

Important Meetings & Symposia

Foundation of the National Neurofibromatosis Foundation (NNFF). 1978

National Institutes of Health (NIH) Consensus Development Conference on Neurofibromatosis: Delineated NF1 from NF2 and diagnostic criteria for each. 1987

Foundation of Neurofibromatosis, Inc. 1988

NIH Consensus Development Conference on Acoustic Neuroma. 1991

Department of Defense Neurofibromatosis Research Program (NFRP) established. 1996

NNFF Clinical Care Advisory Board: Diagnostic Evaluation and Management of NF1 and NF2. 1997

House Ear Institute and NNFF workshop on NF2: Reviewed current knowledge, made short-term and long-term goals. 1997

NF2

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1998

1999

2000

2001

Molecular Biology & Genetics

Merlin lacks the conventional C-terminal actin-binding site, but has other actin-binding sites within its FERM (4.1 ERM) domain. 1998

Correlations made between genotype and phenotype: Evans et al. 1998

High resolution microarray-CGH detected an overall 20.7% detection rate out of 116 NF2 patients with differing severity; found a high frequency of large chromosome 22 deletions. 2001

Cellular Biology

Merlin indirectly associates with the actin cytoskeleton through an interaction with β II-Spectrin. 1998

Merlin interacts with hNHE-RF, which localizes to actin-rich structures. 1998

Merlin binds Paxillin, which facilitates binding to the cell membrane. 1998

Merlin co-localizes with F-actin filaments along the membrane. 1998

Merlin constitutively degraded by the calpain system in intact cells; N-terminal 35 kD fragment results. 1998

Merlin interacts with β -integrin in differentiating Schwann cells. 1998

Method developed for establishing short-term primary schwannoma cells in culture. 1999

Merlin interacts with schwannomin – interacting protein-1 (SCHIP-1), a novel protein that interacts specifically with spliced forms of Merlin. 2000

Hepatocyte growth factor –regulated tyrosine kinase substrate (HRS) interacts with Merlin both in vivo and in vitro. 2000

Activation of Rac1 or Cdc42 promotes Merlin phosphorylation (inactivation). 2001

Five multi-allelic complementation groups (including scribbler/brakeless, blistered, and net) identified that alter the subcellular localization of Merlin. 2001

Syntenin specifically interacts with Merlin isoform 1 – links active Merlin to membrane protein signaling through the actin cytoskeleton. 2001

HRS interacts with the C-terminus of Merlin in its open form. 2001

Regulated overexpression of cells has HGS (HRS) in rat schwannoma the same effect as Merlin overexpression. 2001

Pathobiology

Naturally occurring mutant NF2 proteins demonstrate altered localizations; C-terminal deletions = cell membrane, N-terminal deletions = perinuclear/cytoplasmic region. 1998

NF2 schwannoma-derived cells have abnormal actin cytoskeletal architecture and proliferation defects. 1998

Technology/ Animal Models

Somatic cell mosaic analysis reveals Drosophila Merlin acts as a tumor suppressor. 1998

Transgenic mice expressing the first 314 amino acids of Merlin are normal. 1999

Transgenic mice expressing a mutant NF2 that lacks exon 2-3 develop peripheral nerve sheath tumors and Schwann cell hyperplasia. 1999

Conditional NF2 knockout mice developed (NF2 disrupted specifically in myelin P0-expressing cells); these develop schwannomas in association with peripheral nerves. 2000

Drosophila Merlin mutants show defects in nuclear migration and mRNA localization in the oocyte. 2001

Imaging, Detection, & Diagnosis

Pre-symptomatic diagnosis available for ~86% of all classically affected NF2 patients. 2000

Epidemiology

Families with splice-site or missense mutations or large deletions of the NF2 gene tend to have fewer tumors and later onset. 1998

Preliminary work done on growth rate of vestibular schwannomas. 1998

Experimental Therapeutics

Phase I trial of SU-101 in children. 1999

FDA approval of Nucleus 24-Multichannel Auditory Brainstem Implant. 2000

Symptom Management

MRI annually to screen tumor growth and other intracranial risks + annual audiometric studies to monitor hearing (surgery required when hearing is no longer useful or tumor grows enough to endanger patient). 1998

Middle fossa internal auditory canal bony decompression – useful when a change in hearing is documented (for long-term hearing stabilization). 1998

Translabrynthine total tumor removal with auditory brainstem implant – used for patients with non-useful hearing or large tumors with brainstem compression. 1998

Suboccipital approach total tumor removal – used for smaller, medially based tumors (hearing preservation is unlikely and risk of tumor recurrence is high). 1998

Strategic radiation therapy (gamma knife) – used in elderly patients with documented tumor growth (low chance of hearing preservation). 1998

Important Meetings & Symposia

National Institute of Neurological Disorders and Stroke (NINDS) Workshop: Defining the Future of Neurofibromatosis Research. 2000

