

Functional Variant in Complement *C3* Gene Promoter and Genetic Susceptibility to Temporal Lobe Epilepsy and Febrile Seizures

Sarah Jamali^{19a}, Annick Salzmann²⁹, Nader Perroud³, Magali Ponsole-Lenfant⁴, Jennifer Cillario⁴, Patrice Roll¹, Nathalie Roeckel-Trevisiol¹, Ariel Crespel⁵, Jorg Balzar⁶, Kurt Schlachter⁷, Ursula Gruber-Sedlmayr⁸, Ekaterina Pataraia⁶, Christoph Baumgartner⁹, Alexander Zimprich⁶, Fritz Zimprich⁶, Alain Malafosse^{2,3*}, Pierre Szepetowski^{1,4*}

1 INSERM UMR 910, University of Méditerranée, Marseille, France, 2 Department of Medical Genetics and Development, University Hospital of Geneva, Geneva, Switzerland, 3 Department of Psychiatry, University Hospital of Geneva, Geneva, Switzerland, 4 Mediterranean Institute of Neurobiology (INMED), INSERM UMR901, University of Méditerranée, Marseille, France, 5 Epilepsy Unit, University Hospital of Montpellier, Montpellier, France, 6 Department of Clinical Neurology, Medical University of Vienna, Vienna, Austria, 7 Department of Pediatrics, LKH Bregenz, Bregenz, Austria, 8 Department of Pediatrics, Medical University of Graz, Austria, 92nd Neurological Department, General Hospital Hietzing with Neurological Center Rosenhuegel, Vienna, Austria

Abstract

Background: Human mesial temporal lobe epilepsies (MTLE) represent the most frequent form of partial epilepsies and are frequently preceded by febrile seizures (FS) in infancy and early childhood. Genetic associations of several complement genes including its central component C3 with disorders of the central nervous system, and the existence of C3 dysregulation in the epilepsies and in the MTLE particularly, make it the C3 gene a good candidate for human MTLE.

Methodology/Principal Findings: A case-control association study of the C3 gene was performed in a first series of 122 patients with MTLE and 196 controls. Four haplotypes (HAP1 to 4) comprising GF100472, a newly discovered dinucleotide repeat polymorphism [(CA)8 to (CA)15] in the C3 promoter region showed significant association after Bonferroni correction, in the subgroup of MTLE patients having a personal history of FS (MTLE-FS+). Replication analysis in independent patients and controls confirmed that the rare HAP4 haplotype comprising the minimal length allele of GF100472 [(CA)8], protected against MTLE-FS+. A fifth haplotype (HAP5) with medium-size (CA)11 allele of GF100472 displayed four times higher frequency in controls than in the first cohort of MTLE-FS+ and showed a protective effect against FS through a high statistical significance in an independent population of 97 pure FS. Consistently, (CA)11 allele by its own protected against pure FS in a second group of 148 FS patients. Reporter gene assays showed that GF100472 significantly influenced C3 promoter activity (the higher the number of repeats, the lower the transcriptional activity). Taken together, the consistent genetic data and the functional analysis presented here indicate that a newly-identified and functional polymorphism in the promoter of the complement C3 gene might participate in the genetic susceptibility to human MTLE with a history of FS, and to pure FS.

Conclusions/Significance: The present study provides important data suggesting for the first time the involvement of the complement system in the genetic susceptibility to epileptic seizures and to epilepsy.

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- * E-mail: szepetowski@inmed.univ-mrs.fr (PS); alain.malafosse@hcuge.ch (AM)
- These authors contributed equally to this work
- ¤ Current address: CINaM-CNRS, Campus de Luminy, Marseille, France