

Variant: *NM\_000552.5(VWF):c.3788C>T (p.Ser1263Leu)*

Version: 1.0

CA6402670 [↗](#)

1703401 (ClinVar) [↗](#)

**Gene:** VWF ([HGNC:7450](#))

**Condition:** hereditary von Willebrand disease ([MONDO:0019565](#))

**Inheritance Mode:** Autosomal dominant inheritance

**UUID:** 79ef832a-3ca0-4760-a3fd-221316a3f0f7

**Approved on:** 2024-08-12

**Published on:** 2024-08-12

### HGVS expressions

**NM\_000552.5:c.3788C>T**

NM\_000552.5(VWF):c.3788C>T (p.Ser1263Leu)

NC\_000012.12:g.6019630G>A

CM000674.2:g.6019630G>A

NC\_000012.11:g.6128796G>A

CM000674.1:g.6128796G>A

NC\_000012.10:g.5999057G>A

NG\_009072.1:g.110041C>T

NG\_009072.2:g.110041C>T

ENST00000261405.10:c.3788C>T

ENST00000261405.9:c.3788C>T

ENST00000538635.5:n.421-25696C>T

ENST00000539641.1:n.586C>T

NM\_000552.3:c.3788C>T

NM\_000552.4:c.3788C>T

Uncertain Significance

Met criteria codes **3**

PP4

PM2\_Supporting

BP4

Not Met criteria codes **2**

PP3

PS4

Evidence Links **0**

### Expert Panel

von Willebrand Disease VCEP [↗](#)

### Criteria Specification Information

[↗](#) **Criteria Specification:** ClinGen von Willebrand Disease Expert Panel Specifications to the ACMG/AMP Variant Interpretation Guidelines for VWF Version 1.0.0

[↗](#) **Criteria Specification Approval History**

[↗](#) **Criteria Specifications for this VCEP**







Evidence submitted by expert panel

### von Willebrand Disease VCEP





NM\_000552.5(VWF):c.3788C>T is a missense variant in VWF predicted to encode substitution of serine by leucine at amino acid 1263. The Grpmax filtering allele frequency in gnomAD v4.1 is 0.000008780 (based on 2/91076 alleles in the South Asian population), which is lower than the ClinGen VWD VCEP threshold of <0.0001 (PM2\_Supporting). The computational predictor REVEL gives a score of 0.143, which is

below the ClinGen VWD VCEP PP3 threshold of <0.290 and does not predict a damaging effect on VWF function (BP4). Additionally, the computational splicing predictor SpliceAI indicates that the variant has no impact on splicing. At least 2 patients with this variant have been reported, only 1 of whom displayed excessive mucocutaneous bleeding as well as a laboratory phenotype of low VWF:RCo/VWF:Ag ratio, which together are specific for VWD type 2M (PP4, PMID: 28971901). Both reported patients exhibited low FVIII activity relative to VWF antigen, leading one to be diagnosed with VWD Type 1-2N (PMID: 22315491). This variant is classified as a variant of unknown significance for VWD based on the ACMG/AMP criteria applied, as specified by the ClinGen VWD VCEP: PP4, PM2\_Supporting, BP4.

#### Met criteria codes

<b>PP4</b>	 	At least 1 patient with this variant displayed excessive mucocutaneous bleeding as well as a laboratory phenotype of low VWF:RCo/VWF:Ag ratio (0.62), which together are specific for VWD type 2M (PP4, PMID: 28971901). A second patient with this variant was diagnosed with VWD Type 1-2N but exhibited low VWF:Co (0.49) without a low VWF:RCo/VWF:Ag ratio (1), (PMID: 22315491). Both patients had the inconsistent feature of low FVIII activity (0.12-20) relative to VWF antigen (0.49-0.78), resulting in one publication flagging the patient / variant as having "a discrepant phenotype-genotype correlation" (PMID: 28971901). The presence of the D1472H variant was ruled out by the use of next-generation sequencing-based genotyping in both patients.
<b>PM2_Supporting</b>	 	The Grpmax filtering allele frequency in gnomAD v4.1 is 0.000008780 (based on 2/91076 alleles in the South Asian population), which is lower than the ClinGen VWD VCEP threshold of <0.0001 (PM2_Supporting).
<b>BP4</b>	 	The computational predictor REVEL gives a score of 0.143, which is below the ClinGen VWD VCEP threshold of <0.290 and does not predict a damaging effect on VWF function (PP3).

#### Not Met criteria codes

<b>PP3</b>	 	The computational predictor REVEL gives a score of 0.143, which is below the ClinGen VWD VCEP PP3 threshold of >0.644 and does not predict a damaging effect on VWF function. Additionally, the computational splicing predictor SpliceAI indicates that the variant has no impact on splicing.
<b>PS4</b>	 	This variant has been reported in 2 probands, 1 of whom has met PP4. PS4_Supporting cannot be applied because the second proband has not met PP4, and because it is not clear whether the two probands are unrelated (PMID: 28971901, PMID: 22315491).

#### Curation History [↗](#)

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