

## Variant: *NM\_006218.4(PIK3CA):c.2176G>A (p.Glu726Lys)*

Version: 2.0

[CA16602910](#)

[376476 \(ClinVar\)](#)

**Gene:** PIK3CA ([HGNC:5290](#))

**Condition:** overgrowth syndrome and/or cerebral malformations due to abnormalities in MTOR pathway genes ([MONDO:0016054](#))

**Inheritance Mode:** Autosomal dominant inheritance (mosaic)

**UUID:** 8d9a648c-9ee0-4820-8635-a9b83415906d

**Approved on:** 2022-02-12

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### *HGVS expressions*

#### **NM\_006218.4:c.2176G>A**

NM\_006218.4(PIK3CA):c.2176G>A (p.Glu726Lys)

NC\_000003.12:g.179221146G>A

CM000665.2:g.179221146G>A

NC\_000003.11:g.178938934G>A

CM000665.1:g.178938934G>A

NC\_000003.10:g.180421628G>A

NG\_012113.2:g.77624G>A

ENST00000263967.4:c.2176G>A

ENST00000462255.2:n.638G>A

ENST00000643187.1:c.2176G>A

ENST00000674534.1:n.3084G>A

ENST00000674622.1:n.597G>A

ENST00000675467.1:n.4983G>A

ENST00000675786.1:c.\*743G>A

ENST00000263967.3:c.2176G>A

ENST00000462255.1:n.450G>A

NM\_006218.2:c.2176G>A

NM\_006218.3:c.2176G>A

**Pathogenic**

#### Met criteria codes **4**

PM2\_Supporting PS2 PS4 PP2

#### Not Met criteria codes **22**

PM6 PM4 PM3 PM1 PM5  
BA1 BS2 BS4 BS3 BS1 BP3  
BP2 BP4 BP1 BP7 BP5  
PVS1 PS3 PS1 PP4 PP1  
PP3

#### Evidence Links **4**

### Expert Panel

[Brain Malformations VCEP](#)

### Criteria Specification Information **!**

[Criteria Specifications for this VCEP](#)

## Brain Malformations VCEP

The c.2176G>A (NM\_006218.4) variant in PIK3CA is a missense variant predicted to cause substitution of (p.Glu726Lys). This variant is absent from gnomAD v2.1.1 (PM2\_Supporting). PIK3CA, in which the variant was identified, is defined by the ClinGen Brain Malformations Expert Panel as a gene that has a low rate of benign missense variation and where pathogenic missense variants are a common mechanism of disease (PP2). The prevalence of the variant in affected individuals is significantly increased compared with the prevalence in controls (PS4\_VS; identified in at least 15 individuals with a clinical diagnosis of megalencephaly-polymicrogyria-polydactyly-hydrocephalus syndrome; (MPPH) or megalencephaly-capillary malformation-polymicrogyria syndrome; (MCAP), it has been shown to significantly increase phosphorylation levels in patient cell lines (PMID: 28566443), and is in at least 15 tumor samples in the literature and COSMIC (PMID: 22729224, PMID: 28941273, PMID: 24497998 ). This variant has been confirmed de novo and has been identified with variable allelic fractions consistent with a post-zygotic event (PS2\_Strong; PMIDs: 22729224, 22729224). In summary, this variant meets the criteria to be classified as Pathogenic for mosaic autosomal dominant overgrowth with or without cerebral malformations due to abnormalities in MTOR-pathway genes based on the ACMG/AMP criteria applied, as specified by the ClinGen Brain Malformations Expert Panel: PM2\_P, PP2, PS4\_VS, PS2; 14 points (VCEP specifications version 1; Approved: 1/31/2021)

### Met criteria codes

<b>PM2_Supporting</b>	✓	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PS2</b>	✓	LR08-261 (12% blood 41% buccal), LR06-333 (14% LCL and 15% saliva) <a href="#">PubMed:22729224</a>
<b>PS4</b>	✓	15MCAP, 104 tumors in cosmic  001P, 333, 261 all have MCAP <a href="#">PubMed:22729224</a> 10 individuals with MCAP <a href="#">PubMed:27631024</a> P2 and P3 have MCAP 8% and 18% in lymph tissue <a href="#">PubMed:28941273</a>
<b>PP2</b>	✓	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline

### Not Met criteria codes

<b>PM6</b>	✗	LR08-261 (12% blood 41% buccal), LR06-333 (14% LCL and 15% saliva) <a href="#">PubMed:22729224</a>
<b>PM4</b>	✗	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PM3</b>	✗	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PM1</b>	✗	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PM5</b>	✗	

No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline

<b>BA1</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BS2</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BS4</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BS3</b>	✘	Patient cell lines show increased phos <a href="#">PubMed:28566443</a>
<b>BS1</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BP3</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BP2</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BP4</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BP1</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BP7</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BP5</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PVS1</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PS3</b>	✘	Patient cell lines show increased phos <a href="#">PubMed:28566443</a>
<b>PS1</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PP4</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline

<b>PP1</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PP3</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline

Curation History [↗](#)




See Report	Preferred Variant Title	Classification	Condition	Published Date	Version	Criteria Specification	Gene
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No matching records found

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