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***Niemann-Pick disease type C (NPC) can present like many different diseases, so accurate diagnosis and early intervention are critical.<sup>1,2</sup>***

## NPC presentation and progression are heterogeneous—making timely diagnosis crucial<sup>1-3</sup>

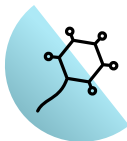
NPC is an ultra-rare, relentlessly progressive, inherited disease, and its variable symptom presentation makes it difficult to diagnose<sup>1-3</sup>

NPC is a lysosomal storage disease (LSD) caused by mutations in either the *NPC1* or *NPC2* genes, with an estimated prevalence of 1 in 1,000,000 individuals in the United States. NPC is progressive, irreversible, and ultimately fatal.<sup>3,4</sup>

### Symptoms are<sup>2</sup>:



Visceral



Neurological



Psychiatric

**Early recognition and diagnosis can be pivotal, as this may allow more time to access appropriate treatment.<sup>1,2</sup>**

## Recognizing symptom patterns is key to timely diagnosis<sup>1</sup>

Patients with NPC can present with many different symptoms – and combinations of symptoms – at different ages as the disease progresses and prognosis worsens. Disease progression can be **rapid or slow, making symptom recognition more difficult.**<sup>1-3</sup>

### Childhood NPC frequently impacts visceral organs<sup>1,2</sup>

#### Neonatal (<2 months)

Most commonly presents as cholestatic jaundice and hepatosplenomegaly

#### Early-infantile (2 months – <2 years)

Commonly characterized by developmental milestone delay and hepatosplenomegaly

#### Late-infantile (2 – <6 years)

Commonly characterized by disturbed gait or clumsiness and vertical supranuclear saccade palsy

#### Juvenile (6 – 15 years)

Most commonly presents as cognitive impairment, coordination problems, seizures, and vertical supranuclear saccade palsy

### NPC progression in adults is mostly cognitive<sup>1</sup>

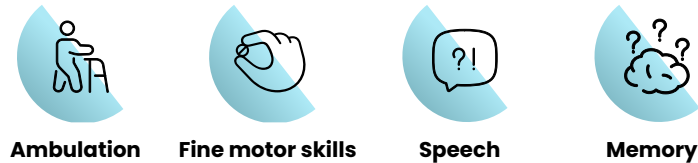
#### Adolescent/adult (>15 years)

Commonly presents with cognitive impairment and psychiatric illness, and vertical supranuclear saccade palsy

**Symptoms can appear at any age** with some features more often seen in younger patients; but in many adults with NPC, childhood development will have been completely normal. In some individuals there may have been a long history of slowly progressing symptoms before the diagnosis is made. Compared to pre-adolescent onset patients (<15 years), adolescent (>15 years) and adult-onset patients may be even more challenging to diagnose.<sup>1,2</sup>

Some NPC symptoms are consistent with other more common diseases making identification difficult<sup>1,2,5</sup>

#### NPC symptom categories:



#### Symptoms:

Ataxia	●	●		
Cataplexy	●	●	●	
Dementia				●
Dysarthria			●	
Dystonia	●	●		
Hypotonia	●	●		
Psychosis			●	●

For illustrative purposes only.

## NPC's variable symptom presentation makes diagnosis challenging<sup>1,2</sup>

NPC may be hard to diagnose due to the **heterogeneity of symptom presentation** and because individual symptoms **overlap with other common diseases**. This makes identification difficult resulting in delayed diagnosis or misdiagnosis.<sup>1-3</sup>

To diagnose as early as possible, **collaborating with a multidisciplinary team** including a referring physician, treatment specialists, and treatment supporting physicians is essential.<sup>1</sup>

***As a genetic disease characterized by neurodegeneration, NPC can cause many combinations of symptoms.<sup>5</sup>***

More common conditions like Alzheimer's Disease, Parkinson's Disease, and Schizophrenia have similar symptoms to NPC, which can make NPC difficult to identify.<sup>5</sup>

### Treatment options are available

Disease-modifying therapies can slow the progression of NPC across symptom domains of ambulation, speech, swallow, and fine motor skills.<sup>1,6,7</sup>

**Learn about a treatment option or request a rep.**



## Testing options on the path to diagnosis

In an unpredictable, irreversible, and degenerative disease such as NPC, timely diagnosis is imperative.<sup>1,3</sup> **Testing is readily available and may be available for no charge to eligible patients.**

### Types of tests:



#### Blood test

Considered first step to NPC diagnosis. Biomarkers currently analyzed include oxysterols, lysosphingolipids (primarily lysosphingomyelin-509), and bile acids.<sup>1</sup>



#### Genetic test

Gene panels for some of the symptoms of NPC include screenings for mutations in *NPC1* or *NPC2*. Single gene sequencing should be conducted in cases with a high clinical suspicion of NPC.<sup>1</sup>



#### Skin biopsy

Filipin test\* of skin sample on cultured fibroblasts to look for unesterified cholesterol accumulation within the lysosomes.<sup>1</sup>

\*No longer standard and only used as confirmatory evidence following inconclusive genetic testing.

In addition, a medical history and clinical examination can aid in proper diagnosis. NPC is not curable, but **management with available treatments is possible.**<sup>1,3</sup>



### Learn more about sponsored genetic testing

Genetic testing can help in determining diagnosis. Genetic counselors are available if needed to assist.



**Start here for more information about sponsored genetic testing.**

**References:** 1. Geberhiwot T, Moro A, Dardis A, et al. Consensus clinical management guidelines for Niemann-Pick disease type C: *Orphanet J Rare Dis.* 2018;13(1):50. doi:10.1186/s13023-018-0785-7 2. Vanier MT. Niemann-Pick disease Type C. *Orphanet J Rare Dis.* 2010;5(16):1-18. doi:10.1186/1750-1172-5-16 3. Mengel E, Patterson MC, Gissen P, et al. Impacts and burden of Niemann pick type-C: a patient and caregiver perspective. *Orphanet J Rare Dis.* 2021;16(1):493. doi:10.1186/s13023-021-02105-8 4. Burton BK, Ellis AG, Orr B, et al. Estimating the prevalence of Niemann-Pick disease type C (NPC) in the United States. *Mol Genet Metab.* 2021;134(1-2):182-187. doi:10.1016/j.ymgme.2021.06.011 5. Patterson MC, Hendriksz CJ, Walterfang M, et al; NP-C Guidelines Working Group. Recommendations for the diagnosis and management of Niemann-Pick disease type C: an update. *Mol Genet Metab.* 2012;106(3):330-344. doi: 10.1016/j.ymgme.2012.03.012 6. Cortina-Borja M, te Vrugte D, Mengel E, et al. Annual severity increment score as a tool for stratifying patients with Niemann-Pick disease type C and for recruitment to clinical trials. *Orphanet Rare J Dis.* 2018;16;13(1):143. doi:10.1186/s13023-018-0880-9 7. Patterson MC, Lloyd-Price L, Guldberg C, et al. Validation of the 5-domain Niemann-Pick type C Clinical Severity Scale. *Orphanet J Rare Dis.* 2021;16:79. doi:10.1086/s13023-021-01719-2

Get more information for timely and accurate diagnosis of NPC at [learnNPC.com](https://learnNPC.com).