

The molecular genetics related to polydactyly: an updated review

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Abstract: Polydactyly is the most common hereditary limb malformation in clinical practice. It can appear as an isolated disease or as part of a complex syndrome. This paper summarizes and updates the classification and phenotype of independent polydactyly, the cellular molecular basis of their development, the key signaling pathways that regulate polydactyly and related genes (*SHH-GLI3* pathway and the *Hox* family). We believe that this information has very important clinical value. On the other hand, it can also help researchers understand the molecular basis of forming polydactyly more deeply, and will contribute to more systematic genetic studies in the future.

Keywords: Polydactyly; preaxial polydactyly (PPD); postaxial polydactyly (PAP); genetics

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Introduction

Polydactyly is the most common hereditary limb malformation, and its total incidence is about 0.3–3.6‰ of the surviving infants (1). The disease is autosomal dominant and clinically manifested as extra fingers or toes. Polydactyly has similar phenotypes in different species including humans, mice, and chickens, and its clinical typing principles are basically the same (2,3). Polydactyly is more common in the thumb and little finger, and the extra phalangeal shape and structure can be either a small fleshy growth or a nearly normal developing finger with nails, bones, joints, tendons, and neurovascular bundles (4). The only current treatment for the disease is surgical removal of excess fingers or toes, which will not regenerate after surgery, and there is no other treatment (5).

The exact etiology of polydactyly is not clear at present, most are sporadic, on the one hand, the disease is related to environmental factors. For example, during the early 4–8 weeks of pregnancy, embryonic limb bud

differentiation is affected by viral infection, drugs, radiation and other environmental factors, which may lead to finger differentiation disorders and limb deformity (6–10). On the other hand, many clinical samples have proved that some patients have a family disease, and the pathogenic genes of multi-toed babies may be inherited from their parents (11,12). In recent years, with the further development of sequencing technology, some studies have found that *de novo* mutations of important genes related to polydactyly can also lead to polydactyly in the next generation (13–17). For the former, we call for better health care and nutrition during pregnancy to avoid bacterial and viral infections and possible teratogenic factors such as radiation and drugs. For the latter, it is important to understand the genetic and molecular characteristics of polydactyly and to identify and confirm the genes and loci that cause the disease, which can provide an important reference for the subsequent genetic and molecular biology studies of the disease. This paper reviews and updates the above information.

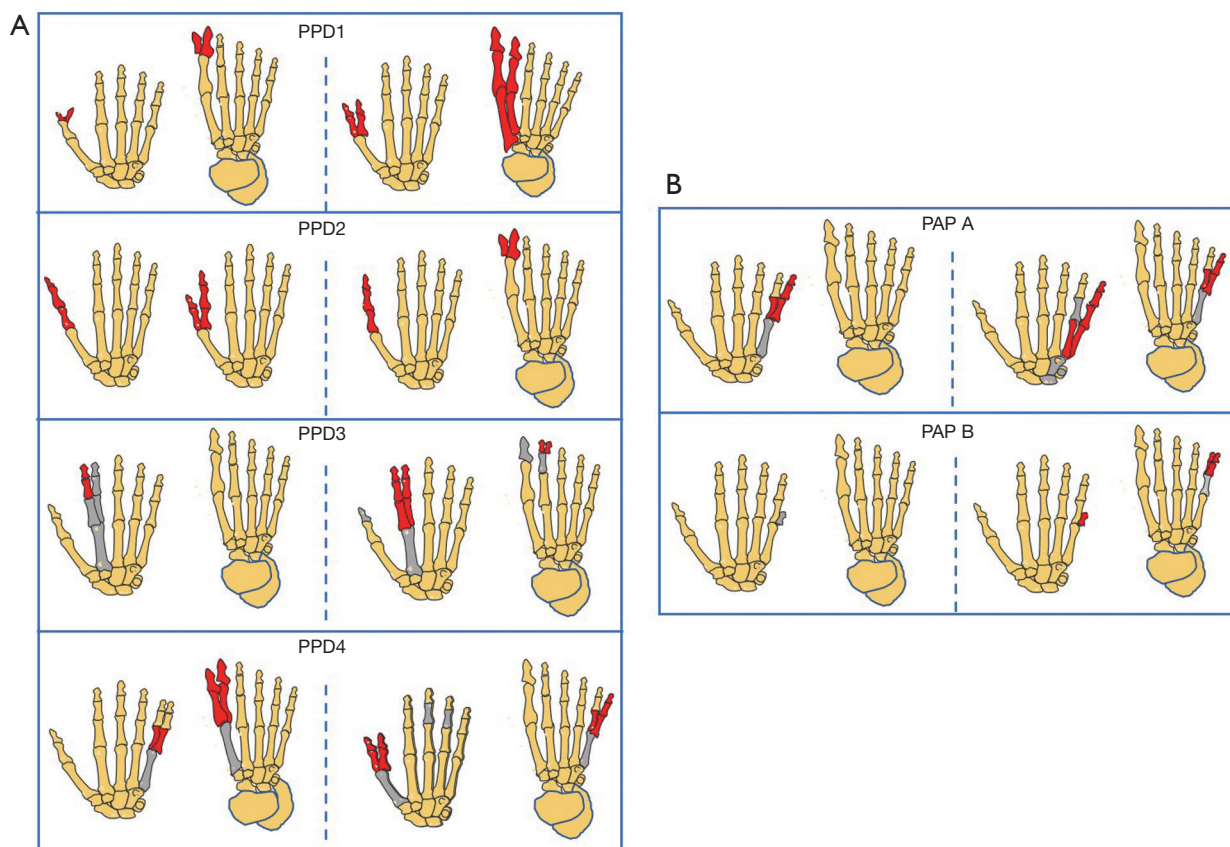


Figure 1 Cartoon diagrams of autopods showing PPD and PAP. (A) Four types of PPD; (B) two types of PAP. Yellow represents normal fingers (toes); red is for extra fingers (toes); the grey is for stunted fingers (toes). PPD, preaxial polydactyly; PAP, postaxial polydactyly.

Clinical classification of polydactyly

Polydactyly can occur as an isolated disease (non-syndromic polydactyly) or as part of an abnormal syndrome (syndromic polydactyly). From an anatomical perspective, the two most common types of polydactyly are the preaxial polydactyly (PPD) and the postaxial polydactyly (PAP) (Figure 1). Of course, there are more rare types, such as mesoaxial or central polydactyly, mirror image polydactyly (MIP), palmer and dorsal polydactyly, etc. (18,19). PPD is defined as a supernumerary digit affecting the first digits, this type of polydactyly is rare, accounting for about 8% to 15% of polydactyly. This type is mostly found in southeast Asia, such as Malaysia and the Philippines, etc. PPD is further subdivided into four subclasses according to the location and morphology of redundant fingers (toes). PAP involves the fifth digits and is the most common type of polydactyly, accounting for approximately 77% to 87% of the total polydactyly. The incidence of this type of polydactyly varies along ethnic lines and is particularly common in African.

PAP can be further classified into types A and B, according to the extra digit(s) being either well developed (type A, PAPA) or rudimentary (type B, PAPB). And PAPA can be divided into six genetic types (20). In this paper, according to the specific classification of polydactyly, we summarized and updated the information of disease phenotype, chromosome location, genetic mode and related pathogenic genes (Table 1).

Cellular molecular basis of limb development

Morphogenesis of fingers (toes)

Fingers (toes) is a special product of the evolution of tetrapods. During embryonic development, they condense as a single cartilage, which then divides and grows. Human limb buds begin to form at the fourth weekend of embryonic development, after which the interaction between genes and various signaling factors guarantees the normal shape, function and number of fingers (toes) (53,54). During

Table 1 Well-characterized polydactyly types: phenotype, loci and related genes

Polydactyly type	Abbreviation	Phenotype	Loci	Inheritance	Related genes	OMIM number	Reference
Preaxial polydactyly type 1	PPD1	The duplication of a biphalangeal thumb	7q36	AD	ZRS/SHH	174400	(4,21-25)
Preaxial polydactyly type 2	PPD2	The thumb has an extra middle phalanx with abnormally long and thin first metacarpal, having epiphyses at both ends	7q36	AD	ZRS	174500	(26,27)
Preaxial polydactyly type 3	PPD3	The index finger is usually duplicated, one or two triphalangeal digits replace the thumb, the metacarpal of the accessory digit shows distal epiphysis	-	AD	-	174600	(24,28,29)
Preaxial polydactyly type 4	PPD4	The thumb is duplicated mildly, the distal phalanges show radial deviation or with a broad and bifid thumb, syndactyly of third and fourth fingers is rarely present	7p14.1	AD	GLI3	174700	(1,22,24,30)
Postaxial polydactyly type A1	PAPA1	Polydactyly of fifth finger/Toe, type A: well-formed articulating extra digit containing one to three phalanges;	7p14.1/ 7p15-q11.23	AD	GLI3	174200	(30-33)
Postaxial polydactyly type A2	PAPA2	Phenotypes A, extra digit is well-formed	13q21-32	AD	-	602085	(34,35)
Postaxial polydactyly type A3	PAPA3	Phenotypes A/B in hands and feet	19p13.1-13.2	AD	-	607324	(36)
Postaxial polydactyly type A4	PAPA4	Phenotypes A/B in hands and feet, two to three syndactyly	7q21-34	AD	-	608562	(37)
Postaxial polydactyly type A5	PAPA5	In hands and feet, minor syndactyly, five to six metacarpal synostoses	13q13.3-21.2	AR	-	263450	(38)
Postaxial polydactyly type A6	PAPA6	Functionally developed digit in hands and/or feet	4p16.3-p16.2	AR	ZNF141	615226	(39)
Postaxial polydactyly type A7	PAPA7	PAP restricted to lower limbs, with well-developed nails	7p22.3	-	IQCE	617631	(40,41)
Postaxial polydactyly type A with or without EVC phenotypes	PAP type A-EVC	Short stature, ASD, mild nail dysplasia, or genu valgum classified as typical EVC syndrome features	12q13.3	-	GLI1	165220	(42,43)
Postaxial polydactyly type B	PAPB	The extra digit is rudimentary ranging from a minor sign of small protuberance on the ulnar aspect of fifth finger to spine-like outgrowth, to a 2-3 cm long nubbin-like "pedunculated postminimus" which usually contains an osseous element and a nail	7q21-q34/ 13q21-q32	AD	-	608562/263450	(37,44)

Table 1 (continued)

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Polydactyly type	Abbreviation	Phenotype	Loci	Inheritance	Related genes	OMIM number	Reference
Mirror-image polydactyly	MIP	Posterior digits duplication occurs, while the anterior digits are completely exchanged in reverse order by the posterior digits	14q11.2-13, 5q31.1, 7q36	AD	ZRS/ MIPOL1/ PITX1	606850/602149	(45-47)
Mesoaxial or central polydactyly	-	A "hidden" duplication with apparent syndactyly or in the middle part of the hand, synonychia, may be present as a mass of tissue, though all mesoaxial types are not hidden	-	-	-	-	(48,49)
Palmer and dorsal polydactyly	-	Extra digit usually arise from the ventrum or dorsum part of autopods. It may be shown as a poorly developed digit ray or a small skin (tag), or a developed digit with or without nail and implanted into the autopod as a hook	-	-	-	-	(50,51)
Haas type polysyndactyly	-	All the digits are fused cutaneously, and there is a postaxial or a preaxial extra ray in the web	7q36	AD	ZRS	186200	(1,52)

AD, autosomal dominant inheritance; AR, autosomal recessive inheritance; ZRS, the ZPA regulatory sequence; ZPA, zone of polarizing activity; ASD, atrial septal defect.

limb development, biological signals generated at specific locations play a crucial role in the fate of cells in later embryonic development, and errors in these signaling pathways can lead to congenital limb malformations (55). The appendage of vertebrates is formed by the mesoderm of the body wall and the outer epidermis. The bones in these limbs consist of three main parts: the ones near the side of the body wall called stylopod (e.g., humerus, femur), the middle part zeugopod (e.g., ulna, radius), and the most distant one autopod (e.g., metacarpal, digits) (56) (Figure 2A). Building a complete appendage requires accurate location information, that is, functioning in a three-dimensional (or four-dimensional including time) coordinated system. A series of proteins have been identified that play a role in the formation of the anterior-posterior axis (A-P axis), the proximal-distal axis (P-D axis) and the dorsal-ventral axis (D-V axis) of appendages (57) (Figure 2B).

The first sign of early appendage development is the proliferation of mesodermal cells along the long axis of the embryo, gradually forming thick clumps of cells under the epidermis, which are separated from the lateral lamellar mesoderm and ganglionic mesoderm of the appendage field, and then transformed into mesenchymal cells for migration. Thereafter, limb development begins with the proliferation of mesenchymal cells separated from the limb skeletal precursors and from the limb muscle precursors. These cells converge under the endodermal tissue to form a circular protuberant called a limb bud. Therefore, the signal of limb bud formation comes from the lateral plate mesoderm cells, which secrete the fibroblast growth factor 10 (FGF10), and FGF10 can promote the interaction of limb formation between the ectoderm and mesoderm. Studies have shown that FGF10 is highly expressed in the lateral plate mesoderm where the limb is normally formed. When the researchers artificially transplanted cells that secreted FGF10 into the flanks of the chicken embryo, FGF10 caused an ectophobic limb to form (58,59).

The regulatory effect of the apical ectodermal ridge (AER)

In birds and mammals, the mesoderm induces the elongation of the ectoderm cells at the anterior and posterior edges of the tip of limb buds to form a thickened special structure called the AER (60,61). This ribbed structure will move with the fingerlike edges of the limb and will become the main signaling center of the developing limb. It plays the following roles: (I) to maintain the mesenchymal cells below it in a plastic, proliferating

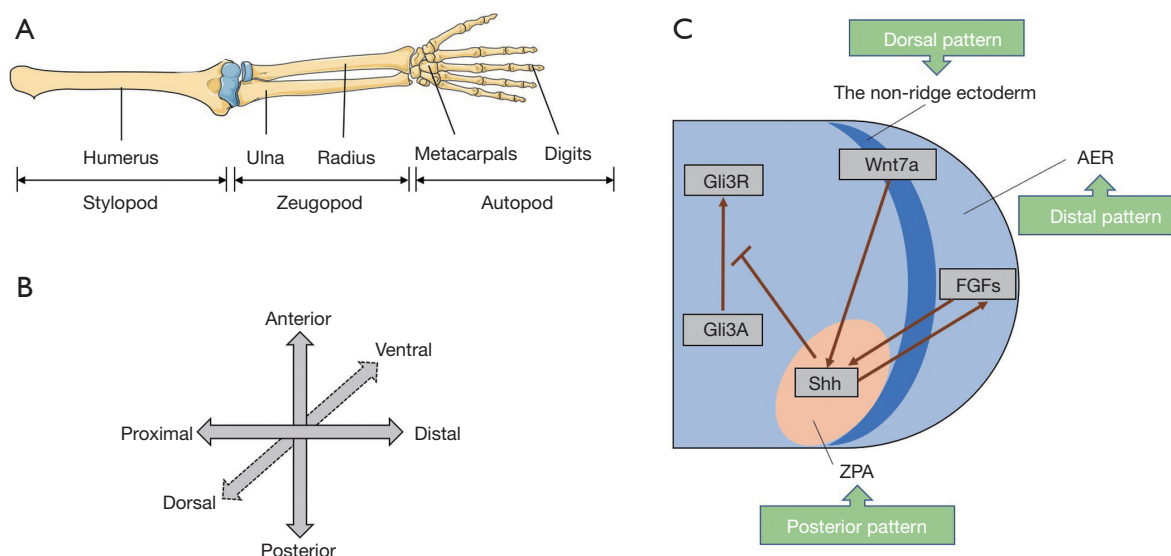


Figure 2 Cellular molecular basis of limb development. (A) The bone composition of these appendages; (B) three axis of limb development; (C) three signal centers and their interactions during limb development.

phase, enabling it to complete the growth of the P-D limb; (II) maintain a certain amount of performance for those molecules that can cause the A-P axis (i.e., thumb to pinky) formation; (III) and leads to protein interaction of the A-P axis and the D-V axis, so that each cell can get how to differentiate instruction. The outward growth of appendages involves a continuous interaction between AER and mesoderm (62). Once the mesoderm induces the formation of AER in the ectoderm above it, the interaction between the AER and the mesoderm is the most important FGFs for the outward growth of appendages, including FGF8, FGF4, FGF2, FGF9, and FGF17, which are all expressed in the AER (63-65). Among them, FGF8 is expressed in the AER of all cells, throughout the beginning and end of limb development, and is considered as a marker of AER. Therefore, FGF8 plays a leading role in the interaction between AER and mesoderm (66,67).

The regulatory effect of the zone of polarizing activity (ZPA)

The second important signal center in limb development is ZPA in the mesenchymal cells at the back of the limb bud. The signal factor SHH generated by ZPA is the basis for the formation of the A-P axis. Artificial transplantation of posterior limb bud cells to anterior edge cells can cause the production of extra limbs, and it was found that ZPA was produced in this process (68). ZPA cells produce SHH, which is thought to be a signaling molecule that

originates from ZPA and regulates all of its function. The resulting replicative limb, or polydactyly, is caused by an early activation of abnormal SHH signals, which can be influenced by the external environment or caused by the body's own signal disorders (69).

The regulatory effect of the non-ridge ectoderm

The formation of the limb D-V axis depends on the ectoderm without AER (70). The D-V axis is associated with cell specialization from both the mesoderm and ectoderm, and its differentiation may be induced by the specific paracrine factor (Wnt7a) in the ectoderm of the dorsal limb bud (71). This region has a special gene expression characteristic. The dorsal mesoderm induced both rFng and Wnt7a expression in dorsal limb buds, while the abdominal mesoderm induced Engrailed-1 (En-1) expression in the limb buds. The mutual inhibition between En-1 expressing cells and rFng expressing cells will determine the central margin of the apical ectodermal crest. En-1 and Wnt7a inhibited each other, so the abdominal area of limb bud was located (71,72).

The three signal centers in limb formation are interdependent and this interaction is necessary for the normal development of the limb. The specific manifestations are as follows: (I) the polarizing active region (Sonic hedgehog) was established by AER (FGF8) and dHAND; (II) FGFs generation is induced by Sonic

hedgehog (in the polarizing active region) (in the AER) by SHH inducing Gremlin, which inhibits FGFs BMP inhibition; (III) maintain the expression of Sonic hedgehog by Wnt7a (in the ventral ectoderm); (IV) Sonic hedgehog blocks the division of Gli3 into the form of repressor, and maintains the concentration gradient between Gli3 activator and Gli3 repressor (73,74) (Figure 2C).

Key signaling pathways and related genes

So far, some progress has been made in the study of genetic regulation of Polydactyly, and some genes related to Polydactyly have been located, which are mainly concentrated on chromosome 2 and 7 of human. In addition, polydactyly-related genes were also found in 13q21–q32 and 19p13–p13.2 regions of human chromosome. At present, the genes related to limb development have been known to be *SHH*, *LMBR1/2*, the *Hox* family, The *Gli* family, *PTCH1*, *SMO*, *EN-2*, *BMP*, etc. The genes and signaling pathways that affect polydactyly are basically the same among different species (75).

SHH-Gli3 pathway

SHH is an important secretory factor in limb development and has been located in the 7q36 region of human chromosome. *SHH* can cause limb abnormalities in vertebrates including mice, chickens and humans. Normally, *SHH* is only expressed in the back of limb buds of mice, and the loss of function of *SHH* leads to severe limb fracture, while the abnormal expression of *SHH* in the forelimb will lead to finger (toe) duplication. The factors controlling *SHH* expression in limb buds can be divided into positive and negative regulators (68). Studies have shown that at least 216 mutations in the *SHH* gene can lead to abnormal limb development, with polydactyly occurring more frequently (30). Hand2, Tbx3, Pbx1, Pbx2, Hox10, Hox11, Hox12 and Hox13 may activate *SHH* expression in the posterior limb bud, and loss-of-function mutants of those genes can cause reduced or absent *SHH* expression in this region (20). Among these regulators of *SHH*, *ZRS* has been reported to be associated with many types of Polydactyly. *ZRS* is located in the 5th intron of *LMBR1*, close to 1 MB from *SHH*, and is highly conserved in excess of 800 bp. It is necessary to control the expression of *SHH* in limb buds, but not in other parts of the developing embryo (27,68,76). Mutations in the *ZRS* lead to the heterotopic expression of the *SHH*, which has been reported to cause PPD in many

species, including mice, dogs, cats, chickens, and humans (77-82).

Gli3 is another crucial gene in this pathway. It is a member of the *Gli* family of zinc finger transcription factors, located on the human chromosome 7p13, and is a gene encoding zinc finger proteins (83). *Gli3* transcription factor plays an important role in the regulation of *SHH* gene expression, and its mutation affects its normal expression, resulting in anteroposterior polydactyly, anteroposterior polydactyly and minor facial deformities. *Gli3* exists in two different forms (*Gli3R* and *Gli3A*), and the proportion of *Gli3R/Gli3A* is directly involved in the development of digits (84). According to reports, 225 genes have been identified in the *Gli3* gene that can cause limb abnormalities, many of which can lead to polydactyly (30).

LMBR1 and *LMBR2* are the key genes leading to abnormal limb development in mammals, including human (85). *LMBR1* encodes a transmembrane receptor that is an important regulator of SHH upstream. The intron 5 (*ZRS*) of this gene contains cis-acting element of SHH, so its expression changes can lead to PPD (86). Multiple studies have shown that mutations in *ZRS* in humans and mice lead to different types of preaxial polydactyl phenotypes, such as *ZRS* 404 G>A, *ZRS* 404 G>T, *ZRS* 404 G>C, *ZRS* 417 A>G and *ZRS* 619 C>T (23,87-90).

PTCH1 and *SMO* are also important intermediate genes in this pathway. After SHH-PTCH interaction, due to the loss inhibition of PTCH to SMO, SMO activates *Gli3R* into the activated *Gli3A* form. SMO, on the other hand, activates SHH signals in the presence of SHH. In the absence of SHH, PTCH receptor inhibits SMO function and thus has inhibitory function (91,92). Therefore, we believe that *PTCH1*, *SMO* and SHH have regulatory roles in both pairs, maintaining a dynamic balance between them to ensure normal limb development. Finally, *SHH* expression of the regulatory factors Twist1, Hand2, and Etv also maintains a precise balance during embryonic development, forming an AP pattern in the limb. Twist1 can form homodimers/heterodimers with Hand2, which can be antagonized by overexpressing Etv (69). Additionally, *Gli3* protein directly inhibits the transcription of Hand2 (93).

The dynamic balance between *Gli3R/Gli3A*, Twist1-Hand2-Etv and SHH-PTCH-SMO is an important cornerstone to maintain the stability of the SHH-*Gli3* pathway. Once this balance is broken, the pathway will show abnormal signals, which will eventually lead to abnormal limb development and malformation during embryonic development. And these three kinds of balance

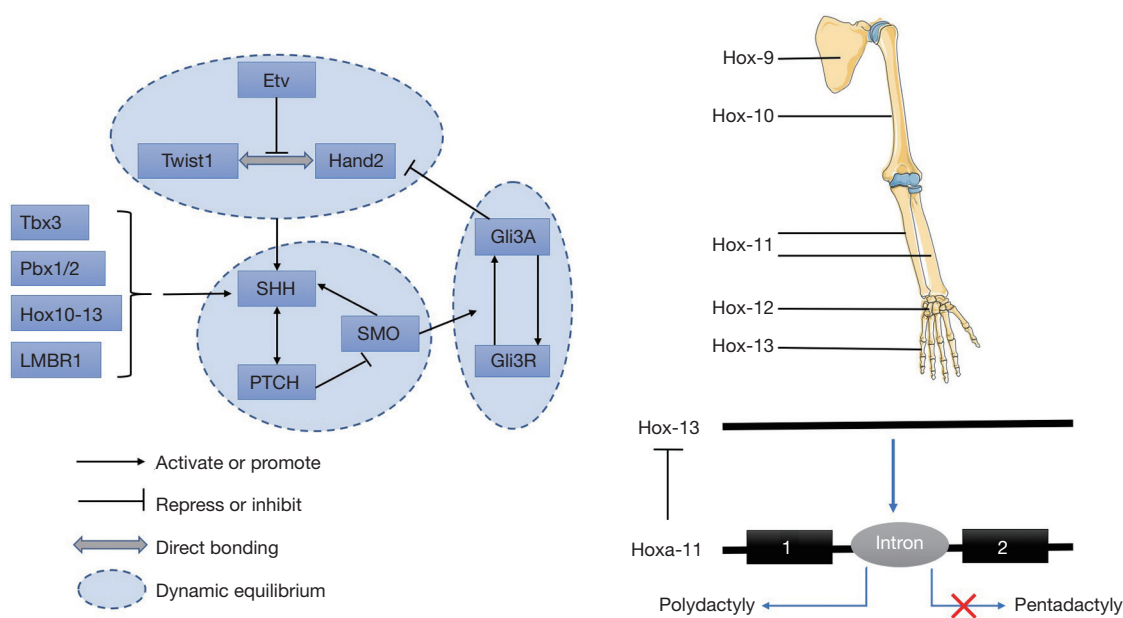


Figure 3 Key signaling pathways and related genes. (A) The specific regulation mechanism of SHH-Gli3 signaling pathway; (B) the hypothesis that *Hox* gene specializes in specific parts of a limb; (C) the correlation between *Hoxa11* and *Hox13* in the regulating digits.

also have mutual influence among themselves, so they further constitute a fine regulation network (Figure 3A). For example, mice with one or two Gli3 alleles destroyed in SHH-deficient embryos can gradually restore distal limb development and finger formation. This suggests that SHH neutralizes Gli3-mediated inhibition of key regulatory genes, cell survival, and distal progression of limb bud development (94).

Hox gene family

Transcription factors encoded by the *Hox* gene play a key role in establishing the normal structure of the human body (95). During embryonic development, the genes from each *Hox* cluster are activated in sequence in time and space according to the relative order on the chromosomes, leading to the differential expression of *Hox* genes along the main axis of the body, thus establishing morphological diversity (Figure 3B). The limb bone pattern requires the activity of the *Hox* gene, mainly from the *HoxA* and *HoxD* clusters (96-98). During limb development, *Hox* gene expression is divided into two stages. In the early limb buds, they were expressed in nested patterns along the A-P axis, and the expression of late activated genes was limited to the posterior buds. With the development of the limb, *Hox* expression entered the second stage, and *HoxA/D* gene from

the heterozygote group was differentially expressed along the P-D axis, and gradually transferred from the proximal to the distal (99). The function loss experiment proved that the differential expression of *HoxA/D* gene on the P-D axis was the reason for the segment-pattern formation of the three limbs. For example, the combined loss of function of *Hoxa11* and *Hoxd11* seriously impaired the development of zeugopod, while the inactivation of *Hoxa13* and *Hoxd13* resulted in complete finger loss (100,101). *Hoxa11* and *Hoxa13* expression domains are mutually exclusive. The absence of *Hoxa11* distally is due to the presence of a transcriptional enhancer within *Hoxa11* intron, which upon *Hox13*-dependent activation, drives antisense transcription that prevents *Hoxa11* expression in the presumptive digit-forming region. the evolution of *Hoxa11* regulation leading to *Hoxa11* repression in the *Hoxa13* domain must have been implemented prior the emergence of pentadactyly species and has possibly contributed to the transition from polydactyly in stem group tetrapods to pentadactyly in extant tetrapods (102-104) (Figure 3C). For a long time, most researchers believed that the remodeling of distal limbs, from fingerlike limbs to multi-fingered limbs and finally to five-fingered limbs, may depend on the change of *Hox* regulation during the evolutionary process, while *HoxA* and *HoxD* clusters occurred independently.

Abnormal expression of *Hox* gene family can lead to

polydactyly, and dysregulation of *SHH* signal can also lead to limb development disorders. So, is this mechanism related to each other? Research shows that ectopic *SHH* expression was systematically associated with the PPD in limbs overexpressing 5'*HoxA/D* genes, consistent with the function of 5'*HoxA/D* genes in controlling *SHH* expression (105-107). Further, there is evidence that the distally expressed Hox proteins directly interact with *Gli3*. The study found that the Hoxd12 protein can bind to *Gli3*, transforming *Gli3R* into *Gli3A*. Therefore, once *Hoxd12* is overexpressed, the whole SHH-*Gli3* signaling pathway will be out of whack, resulting in Polydactyly. The same experimental results were also presented in *Hoxd11* and *Hoxd13*, it was proposed that the ratio between *Gli3* and distal *Hox* family puts on the digit-forming capacity of the distal limb and digit number (108). Sheth *et al.* combined genetics, quantitative analysis and computer modeling, suggest that the equilibrium resulting from the cross-regulation between SHH-*Gli3* and distal *Hox* genes have led to the stabilization of the pentadactyl state (109).

Challenges and perspective

In recent years, with the rapid development of genetics, molecular biology and embryology, we have a more detailed understanding of the types, phenotypes and genetic patterns of polydactyly. However, the emergence and innovation of technologies such as RNA sequencing, systems bioinformatics, WGS/WES and CRISPR Cas9 can more accurately help us to study the relationship between phenotypes and genotypes. In the foreseeable future, these technologies will provide us with rapid, effective and economical genetic screening, which will help to fully understand the pathogenesis of polydactyly and provide effective intervention against the molecular targets that cause it.

According to the current research, the genes and signaling pathways that cause polydactyly are not single or completely independent, and they often interact with each other or even have a regulatory effect. This suggests that we should systematically consider the relationship between genes, pathways and disease in our research. In addition, we also found that the introduction of Turing machine into the research thought opened a new world for the original understanding of the mechanism of *Hox* gene family regulating polydactyly (110,111). This also suggests that we should try to conduct interdisciplinary thinking, hypothesis and even experimental design in future research, instead of

being trapped in the old research methods and stereotypes.

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Footnote

Conflicts of Interest: All authors have completed the ICMJE uniform disclosure form (available at <http://dx.doi.org/10.21037/prpm-20-2>). HHZ and ZQL serve as the editors-in-chief of *Pharmacogenomics Research and Personalized Medicine*. The authors have no other conflict of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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