Russell-Silver syndrome

Russell-Silver syndrome is a growth disorder characterized by slow growth before and after birth. Babies with this condition have a low birth weight and often fail to grow and gain weight at the expected rate (failure to thrive). Head growth is normal, however, so the head may appear unusually large compared to the rest of the body. Affected children are thin and have poor appetites, and some develop recurrent episodes of low blood sugar (hypoglycemia) as a result of feeding difficulties. Adults with Russell-Silver syndrome are short; the average height for affected men is about 151 centimeters (4 feet, 11 inches) and the average height for affected women is about 140 centimeters (4 feet, 7 inches).

Many children with Russell-Silver syndrome have a small, triangular face with distinctive facial features including a prominent forehead, a narrow chin, a small jaw, and downturned corners of the mouth. Other features of this disorder can include an unusual curving of the fifth finger (clinodactyly), asymmetric or uneven growth of some parts of the body, and digestive system abnormalities. Russell-Silver syndrome is also associated with an increased risk of delayed development, speech and language problems, and learning disabilities.

Frequency

The exact incidence of Russell-Silver syndrome is unknown. Worldwide estimates range from 1 in 30,000 to 1 in 100,000 people.

Genetic Changes

The genetic causes of Russell-Silver syndrome are complex. The disorder often results from the abnormal regulation of certain genes that control growth. Research has focused on genes located in particular regions of chromosome 7 and chromosome 11.

People normally inherit one copy of each chromosome from their mother and one copy from their father. For most genes, both copies are expressed, or “turned on,” in cells. For some genes, however, only the copy inherited from a person’s father (the paternal copy) is expressed. For other genes, only the copy inherited from a person’s mother (the maternal copy) is expressed. These parent-specific differences in gene expression are caused by a phenomenon called genomic imprinting. Both chromosome 7 and chromosome 11 contain groups of genes that normally undergo genomic imprinting; some of these genes are active only on the maternal copy of the chromosome, while others are active only on the paternal copy. Abnormalities involving these genes appear to be responsible for many cases of Russell-Silver syndrome.

Researchers suspect that 30 to 50 percent of all cases of Russell-Silver syndrome result from changes in a process called methylation on the short (p) arm of
chromosome 11 at position 15 (11p15). Methylation is a chemical reaction that attaches small molecules called methyl groups to certain segments of DNA. In genes that undergo genomic imprinting, methylation is one way that a gene's parent of origin is marked during the formation of egg and sperm cells. Russell-Silver syndrome has been associated with changes in methylation involving the $H19$ and $IGF2$ genes, which are located near one another at 11p15. These genes are thought to be involved in directing normal growth. A loss of methylation disrupts the regulation of these genes, which leads to slow growth and the other characteristic features of this disorder.

Abnormalities involving genes on chromosome 7 can also cause Russell-Silver syndrome. In 7 percent to 10 percent of cases, people inherit both copies of chromosome 7 from their mother instead of one copy from each parent. This phenomenon is called maternal uniparental disomy (UPD). Maternal UPD causes people to have two active copies of some imprinted genes and no active copies of others. An imbalance in certain active paternal and maternal genes on chromosome 7 underlies the signs and symptoms of the disorder.

In about 40 percent of people with Russell-Silver syndrome, the cause of the condition is unknown. It is likely that changes involving imprinted genes on chromosomes other than 7 and 11 play a role. Researchers are working to identify additional genetic changes that underlie this disorder.

**Inheritance Pattern**

Most cases of Russell-Silver syndrome are sporadic, which means they occur in people with no history of the disorder in their family.

Rarely, Russell-Silver syndrome can run in families. In some affected families, the condition appears to have an autosomal dominant pattern of inheritance. Autosomal dominant inheritance means one copy of a genetic change in each cell is sufficient to cause the disorder. In other families, the condition appears to have an autosomal recessive pattern of inheritance. Autosomal recessive inheritance means both copies of a gene are altered in each cell. The parents of an individual with an autosomal recessive condition each carry one copy of the mutated gene, but they typically do not show signs and symptoms of the condition.

**Other Names for This Condition**

- RSS
- Silver-Russell dwarfism
- Silver-Russell syndrome
- SRS
Diagnosis & Management

Genetic Testing

• Genetic Testing Registry: Russell-Silver syndrome

Other Diagnosis and Management Resources


• GeneReview: Russell-Silver Syndrome
  https://www.ncbi.nlm.nih.gov/books/NBK1324

• MedlinePlus Encyclopedia: Russell-Silver syndrome
  https://medlineplus.gov/ency/article/001209.htm

General Information from MedlinePlus

• Diagnostic Tests
  https://medlineplus.gov/diagnostictests.html

• Drug Therapy
  https://medlineplus.gov/drugtherapy.html

• Genetic Counseling
  https://medlineplus.gov/geneticcounseling.html

• Palliative Care
  https://medlineplus.gov/palliativecare.html

• Surgery and Rehabilitation
  https://medlineplus.gov/surgeryandrehabilitation.html

Additional Information & Resources

MedlinePlus

• Encyclopedia: Russell-Silver syndrome
  https://medlineplus.gov/ency/article/001209.htm

• Health Topic: Growth Disorders
  https://medlineplus.gov/growthdisorders.html

Genetic and Rare Diseases Information Center

• Russell-Silver syndrome
Educational Resources

• Disease InfoSearch: Silver-Russell syndrome
  http://www.diseaseinfosearch.org/Silver-Russell+syndrome/6606

• KidsHealth from the Nemours Foundation: What is a Growth Disorder?

• MalaCards: silver-russell syndrome
  http://www.malacards.org/card/silver_russell_syndrome

• Orphanet: Silver-Russell syndrome
  http://www.orpha.net/consor/cgi-bin/OC_Exp.php?Lng=EN&Expert=813

Patient Support and Advocacy Resources

• Child Growth Foundation (UK)

• Human Growth Foundation
  http://hgfoundation.org/

• Little People of America
  http://www.lpaonline.org/

• Little People UK
  http://littlepeopleuk.org/

• National Organization for Rare Disorders (NORD)
  https://rarediseases.org/rare-diseases/russell-silver-syndrome/

• Resource list from the University of Kansas Medical Center
  http://www.kumc.edu/gec/support/russell.html

• The MAGIC Foundation
  https://www.magicfoundation.org/Growth-Disorders/Russell-Silver-Syndrome/

GeneReviews

• Russell-Silver Syndrome
  https://www.ncbi.nlm.nih.gov/books/NBK1324

ClinicalTrials.gov

• ClinicalTrials.gov
  https://clinicaltrials.gov/ct2/results?cond=%22Russell-Silver+syndrome%22
Scientific Articles on PubMed

- PubMed
  https://www.ncbi.nlm.nih.gov/pubmed?term=%28%28russell-silver+syndrome%5BTIAB%5D%29+OR+%28silver-russell+syndrome%5BTIAB%5D%29%29+AND+english%5Bla%5D+AND+human%5Bmh%5D+AND+%22last+1080+days%5D%22%5Bdp%5D

OMIM

- SILVER-RUSSELL SYNDROME
  http://omim.org/entry/180860

MedGen

- Russell-Silver syndrome

Sources for This Summary

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  Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/27585961

  Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/21349887

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