

Well over a thousand different mutations involving more than a dozen genes have been associated with OI. Currently, there are several systems for addressing the clinical and genetic variability of OI. Some focus on clinical severity as the overriding measure while others focus on specific gene causes to distinguish types. Others integrate both. Broadly speaking, based on severity of the clinical picture, OI can be grouped into 4 classes – mild, moderate, severe, and extremely severe or lethal. About 85-90% of cases are inherited in an autosomal dominant manner, in which collagen gene mutations affect the quantity or quality of type 1 collagen. These cases are described in Types I-IV on this chart. Genotype/phenotype relationships are incomplete for both dominant and recessive OI and knowing the OI type is not predictive of future function. Knowledge of the mutation provides useful information for genetic counseling. Knowledge of the Type or degree of severity can help establish an initial treatment plan.

This chart is a genetic classification system that includes a description of severity. Additional clinical features are included in the accompanying document, “Distinguishing Clinical Features of OI.”

Table: Nosology of Osteogenesis imperfecta

Osteogenesis imperfecta type	Inheritance	Phenotype	Gene Defect
Defects in collagen synthesis, structure or processing			
I	AD	Mild	Null COL1A1 allele
II	AD	Lethal	COL1A1 or COL1A2
III	AD	Progressive deforming	COL1A1 or COL1A2
IV	AD	Moderate	COL1A1 or COL1A2
XIII	AR	Mild to severe	BMP1
Defects in bone mineralization			
V	AR	Variable, distinctive histology	IFITM5
VI	AR	Moderate to severe	SERPINF1
Defects in collagen modification			
VII	AR	Severe (hypomorphic) Severe to lethal (null)	CRTAP
VIII	AR	Severe to lethal	LEPRE1
IX	AR	Moderate to lethal	PPIB
XIV	AR	Severe	TMEM38B
Defects in collagen folding and cross-linking			
X	AR	Severe to lethal	SERPINH1
XI/BRKS1	AR	Mild to severe	FKBP10
BRKS2	AR	Moderate to severe	PLOD2
Defects in osteoblast development with collagen insufficiency			
XII	AR	Severe	SP7
XV	AR	Severe	WNT1
XVI	AR	Severe	CREB3L1

Abbreviations: AD = autosomal dominant; the mutation is inherited in a dominant manner
AR = autosomal recessive; the mutation is inherited in a recessive manner

References

Forlino, A., Cabral, W.A., Barnes, A.M., and Marini, J.C. (2011) New Perspectives on Osteogenesis Imperfecta. Invited Review. Nature Reviews Endocrinology, 7(9): 540-57.

Marini JC, Blissett AR. 2013. New Genes in Bone Development: What's New in Osteogenesis Imperfecta. Journal of Clinical Endocrinology and Metabolism 98:3095-3103.

Shapiro JR. Clinical and Genetic Classification of Osteogenesis Imperfecta and Epidemiology (253-257). In Shapiro JR, (Ed.). (2014) Osteogenesis Imperfecta: A Translational Approach to Brittle Bone Disease 1st edition. New York, NY: Elsevier Academic Press.

Warman, ML, et al. Nosology and Classification of Genetic Skeletal Disorders: 2010 Revision. American Journal of Medical Genetics, 2011: 155: 943- 968.

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