

Bicarbonate defective CFTR variants in chronic pancreatitis: A meta-analysis.

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INTRODUCTION

Cystic fibrosis transmembrane conductance regulator (CFTR) plays a central role in pancreatic ductal secretory functions by carrying Cl- and HCO³⁻ ions across the apical membrane. Two CFTR mutations that eliminate effective chloride conductance cause cystic fibrosis. It has been hypothesized, that a group of mutations that cause selective bicarbonate defect in CFTR channel function (CFTR^{BD}) may play a role in the development of chronic pancreatitis (CP). Although functional studies support this notion, large genetic association studies are lacking to confirm this association.

AIMS

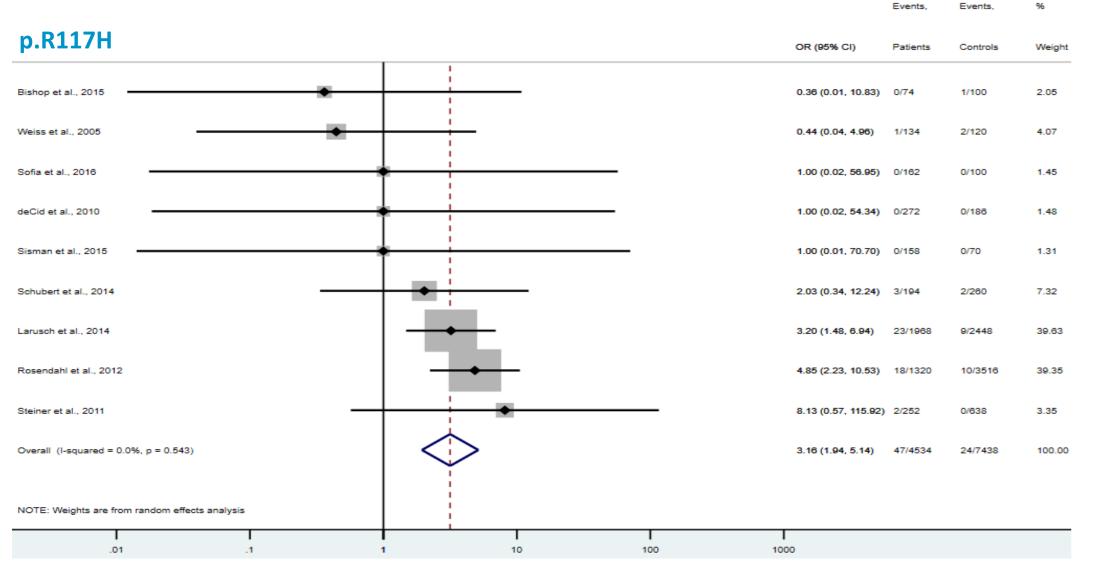
To investigate the role of CFTR^{BD} variants in chronic pancreatitis.

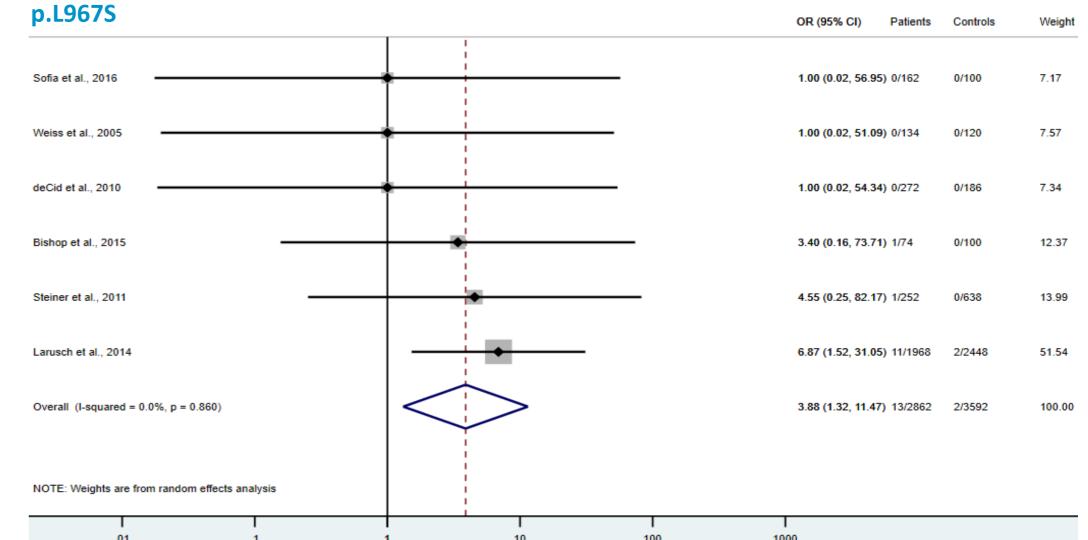
METHODS

A systematic search was conducted in 4 databases to identify case-control studies where the nine CFTR^{BD} variants (p.R74Q, p.R75Q, p.R117H, p.R170H, p.L967S, p.L997F, p.D1152H, p.S1235R, p.D1270N) in pancreatitis were investigated. Twenty-one articles were eligible for qualitative synthesis. As these variants are rare in Asian and African populations, cohorts with European ancestry were analyzed further.

RESULTS

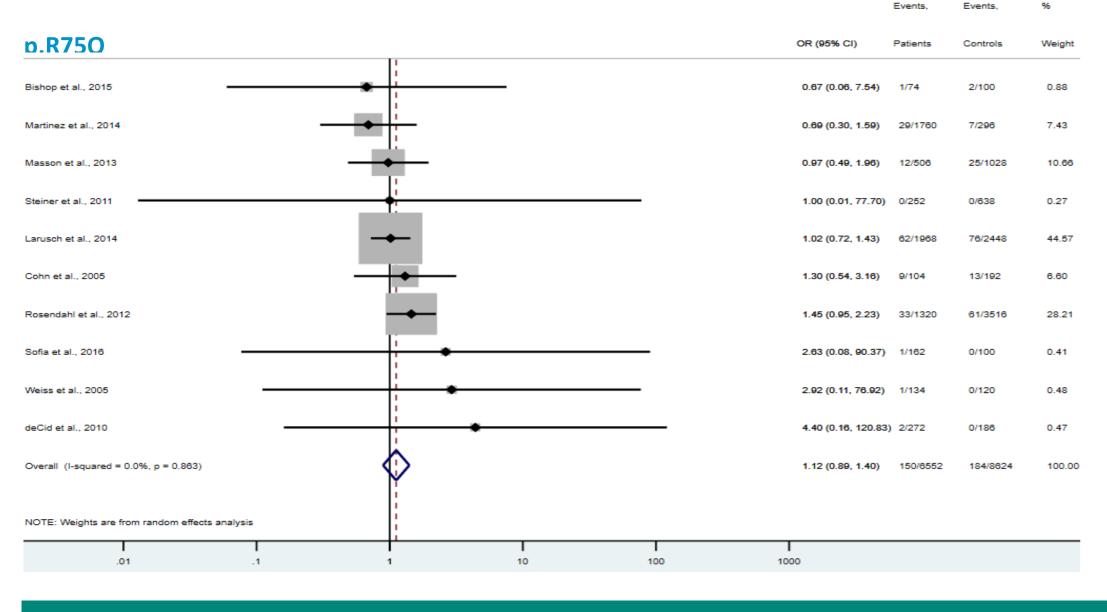
Variants p.R117H and p.L967S were significantly overrepresented in pancreatitis cases relative to controls (OR=3.16, 95% CI=1.94-5.14 and OR=3.88, 95% CI=1.32-11.47).

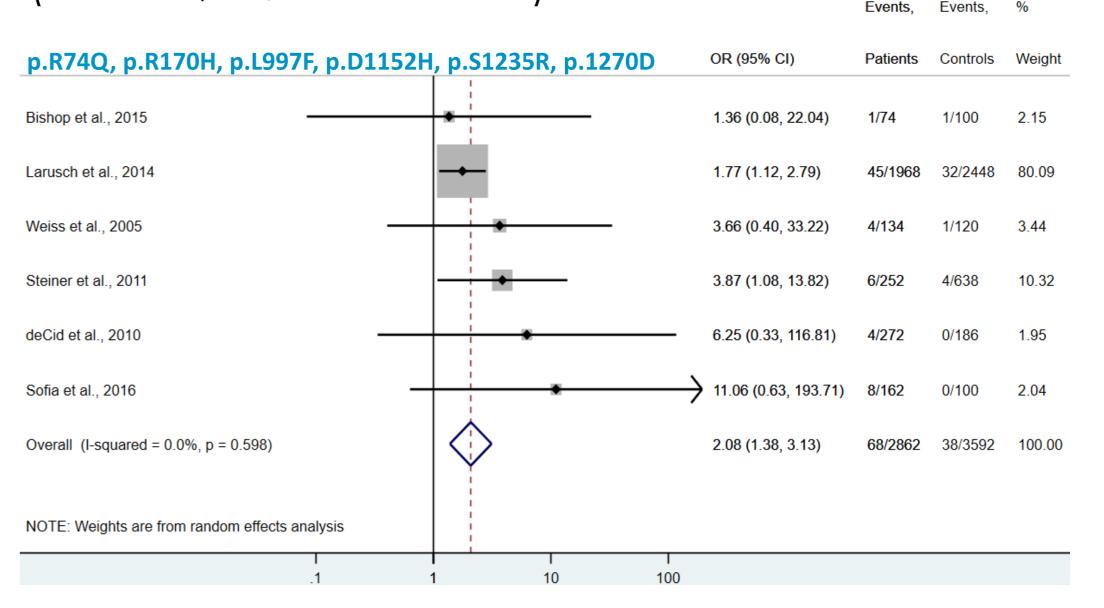




There was **no enrichment** of the relatively frequent **p.R75Q** mutation in patients compared to controls (OR=1.12, 95% CI=0.89-1.40).

Due to the rarity and/or inconclusive effect of p.R74Q, p.R170H, p.L997F, p.D1152H, p.S1235R and p.1270D variants, their cumulative analysis has been performed (OR=2.08, 95% CI=1.38-3.13).





CONCLUSIONS

Despite their similar functional effect on bicarbonate permeability and conductance, CFTR^{BD} variants affect chronic pancreatitis risk heterogeneously. While there is no relation between p.R75Q and CP, variants p.R117H and p.L967S significantly increase CP risk and should be considered as risk factors for CP.