

<i>Clinical presentation</i>	<i>Necessary diagnostic tests</i>	<i>Possibly affected genes</i>
Newborn with epilepsy and microcephaly	Enzyme testing for cathepsin D (CtsD) (leucocytes or fibroblasts)	CtsD deficient: <i>CLN10</i>
Young child (>6 months) with developmental stillstand or regression and / or newly occurring severe epilepsy of unknown cause	enzyme testing for PPT1 and TPP1 (dry blood spots; confirmation in leucocytes or fibroblasts) PPT1 TPP1 If PPT1 and TPP1 enzyme activity is normal: Electron microscopic examination (skin biopsy or lymphocytes): If storage material is present: genetic testing.	PPT1 deficient: <i>CLN1</i> TPP1 deficient: <i>CLN2</i> <i>CLN5</i> <i>CLN6</i> <i>CLN7</i> <i>CLN8</i> <i>CLN14 (KCTD7)</i>
School child with visual loss and / or dementia and epilepsy	Search for lymphocyte vacuoles (light microscopy of blood smear). If lymphocyte vacuoles are present: genetic testing of the <i>CLN3</i> gene If no lymphocyte vacuoles, enzyme testing for PPT1, TPP1 and CtsD (see above) If PPT1 and TPP1 enzyme activity is normal: Electron microscopic examination (skin biopsy or lymphocytes). If storage material is present: genetic testing.	<i>CLN3</i> PPT1 deficient: <i>CLN1</i> TPP1 deficient: <i>CLN2</i> CtsD deficient: <i>CLN10</i> <i>CLN5</i> <i>CLN6</i> <i>CLN7</i> <i>CLN8</i> <i>CLN12 (ATP13A2)</i>
Young adult with non-specific mental, motor or behavioural abnormalities.	Enzyme testing for PPT1, TPP1 and CtsD (see above) If PPT1 and TPP1 enzyme activity is normal: Electron microscopic examination (skin biopsy or lymphocytes). If storage material is present: genetic testing (eventually in special cases even without detection of storage material), consider possible mode of inheritance.	PPT1 deficient: <i>CLN1</i> TPP1 deficient: <i>CLN2</i> CtsD deficient: <i>CLN10</i> If autosomal dominant: <i>CLN4 (DNAJC5)</i> If autosomal recessive : <i>CLN6</i> <i>CLN11 (GRN)</i> <i>CLN13 (CTSF)</i>