

Rethinking neurofibromatosis type 1

About neurofibromatosis type 1 and plexiform neurofibromas

Neurofibromatosis type 1 (NF1) is a rare genetic disorder that arises from mutations in the NF1 gene, which encodes for neurofibromin, a key suppressor of the MAPK pathway.^{1,2}

The symptoms of NF1 can manifest in a variety of ways across a variety of organ systems, potentially causing abnormal skin pigmentation, skeletal deformities, tumor growth and neurological complications, such as cognitive impairment.³

People with NF1 have a 30%–50% lifetime risk of developing plexiform neurofibromas (PN), which are tumors that grow along the peripheral nerve sheath.^{3,4,5} These tumors are typically diagnosed within the first two decades of life and grow more rapidly during childhood.^{6,7} PNs can cause severe disfigurement, pain, and functional impairment, and in rare cases can be fatal.^{3,4,5}

Quick facts: NF1-PN



NF1 is the most common form of neurofibromatosis, with an estimated global birth incidence of approximately 1 in 2,500 individuals.^{4,8}



NF1 affects approximately 3 in 10,000 people in the EU, or an estimated **135,000 people**.⁹



Approximately half of NF1 sufferers are the **first in their family** to be diagnosed with the condition.⁸



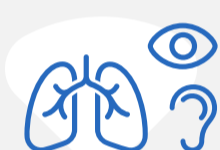
PNs are most often diagnosed in the **first two decades** of life.⁴



Surgical removal of PNs is often difficult due to their infiltrative growth pattern, which can lead to permanent nerve damage and disfigurement.³



Patients with NF1 had an **8 to 15-year mean reduction in their life expectancy** compared to the general population.¹⁰



Depending on the location of PNs, some people may experience a variety of symptoms including issues with **breathing, vision or hearing**.¹¹



Patients with NF1 have an 8% to 15% lifetime risk of transformation to **malignant tumors**.^{7,12}



According to guidelines, people with NF1 and PN should be evaluated and managed by a **multidisciplinary team, with treatment options specific to the individual**.¹³

NF1-PN symptoms can include^{3,5,14}



- Pain
- Difficulty moving around
- Changes in appearance
- Abnormal skin pigmentation
- Neurofibromas (benign tumors)
- Skeletal deformities
- Migraine headaches
- Tumor growth
- Neurological complications such as cognitive impairment

Treatment of NF1-PN

- NF1-PN's have historically been limited primarily to **surgical intervention**, which often poses significant challenges due to the infiltrative nature of the tumors.^{15,8}
- Where surgery was available, up to **85%** of plexiform neurofibromas could not be completely removed.^{3,5,11}
- Nearly **1 in 4** plexiform neurofibromas regrew post-surgery.⁷

References

1. Yap YS, McPherson JR, Ong CK, et al. The NF1 gene revisited – from bench to bedside. *Oncotarget*. 2014;5(15):5873–5892. doi:10.18632/oncotarget.2194.
2. Rasmussen S, Friedman J, NF1 Gene and Neurofibromatosis 1. *Am J Epidemiol*. 2000;151(1):33–40. doi:10.1093/oxfordjournals.aje.a010118.
3. Weiss BD, Walters PL, Plotkin SR, et al. NF106: A neurofibromatosis clinical trials consortium Phase II trial of the MEK inhibitor mirdametinib (PD-0325901) in adolescents and adults with NF1-related plexiform neurofibromas. *J Clin Oncol*. 2021;JCO.20.02220. doi:10.1200/JCO.20.02220.
4. Prada C, Rangwala F, Martin L, et al. Pediatric plexiform neurofibromas: impact on morbidity and mortality in neurofibromatosis type 1. *J Pediatr*. 2012;160(3):461–467. doi:10.1016/j.jpeds.2011.08.051.
5. Miller DT, et al. Health supervision for children with neurofibromatosis Type 1. *Pediatrics*. 2019;143(5):e20190660. doi:10.1542/peds.2019-0660.
6. Gross A, Singh G, Akshintala S, et al. Association of plexiform neurofibroma volume changes and development of clinical morbidities in neurofibromatosis 1. *Neuro Oncol*. 2018;20(12):1643–1651. doi:10.1093/neuonc/now067.
7. Nguyen R, Dombi E, Widemann B, et al. Growth dynamics of plexiform neurofibromas: a retrospective cohort study of 201 patients with neurofibromatosis 1. *Orphanet J Rare Dis*. 2012;7(1):75. doi:10.1186/1750-1172-7-75.
8. Ferner RE. Neurofibromatosis 2: a twenty-first-century perspective. *Lancet Neurol*. 2007;6(4):340–351. doi:10.1016/s1474-4422(07)70075-3.
9. European Medicines Agency (EMA). EU/3/18/2050 – orphan designation for treatment of neurofibromatosis type 1. Available at: <https://www.ema.europa.eu/en/medicines/human/orphan-designations/eu-3-18-2050#--text=On%2031%20July%202018%2C%20orphan,since%20date%2017%20June%202021>. Accessed June 12, 2025.
10. Lee TJ, et al. Incidence and prevalence of neurofibromatosis type 1 and 2: a systematic review and meta-analysis. *Orphanet J Rare Dis*. 2023;18(1):292. doi:10.1186/s13023-023-02911-2.
11. Fisher MJ, Blakeley JO, Weiss BD, et al. Management of neurofibromatosis type 1-associated plexiform neurofibromas. *Neuro Oncol*. 2022;24(11):1827–1844. doi:10.1093/neuonc/noac146.
12. Miettinen MM, Antonescu CR, Fletcher CDM, et al. Histopathologic evaluation of atypical neurofibromatous tumors and their transformation into malignant peripheral nerve sheath tumor in patients with neurofibromatosis 1—a review. *Hum Pathol*. 2017;67:1–10. doi:10.1016/j.humpath.2017.05.010.
13. Carton C, Evans DG, Blanco I, et al. ERN GENTURIS tumour management in neurofibromatosis type 1 guideline. *EClinicalMedicine*. 2023. doi:10.1016/j.eclinm.2022.101818.
14. Houpt AC, Schwartz SE, Coover RA. Assessing psychiatric comorbidity and pharmacologic treatment patterns among patients with neurofibromatosis type 1. *Cureus*. 2021;13(12):e20244. doi:10.7759/cureus.20244.
15. Ejerskov C, Farholt S, Nielsen FSK, et al. Clinical characteristics and management of children and adults with neurofibromatosis type 1 and plexiform neurofibromas in Denmark: a nationwide study. *Oncol Ther*. 2023;11:97–110. doi:10.1007/s40487-022-00213-4.