Medical Genetics



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Why medical genetics

- Genome role in diagnostics, therapy and prevention
 - = application in medical practice

It is possible to implement into practice only what I know and what I have in mind

What you should already know

What is a gene

genes: structural

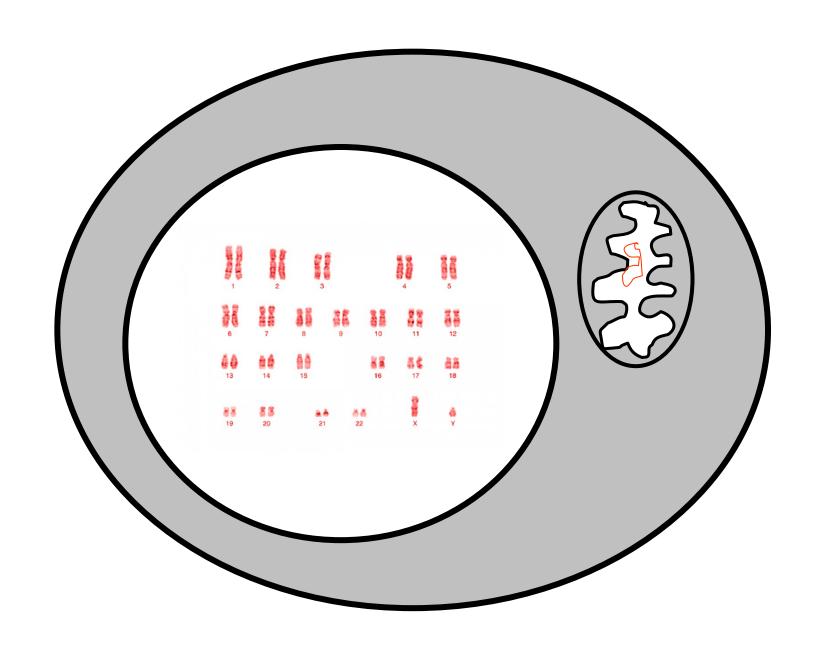
for functional RNAs

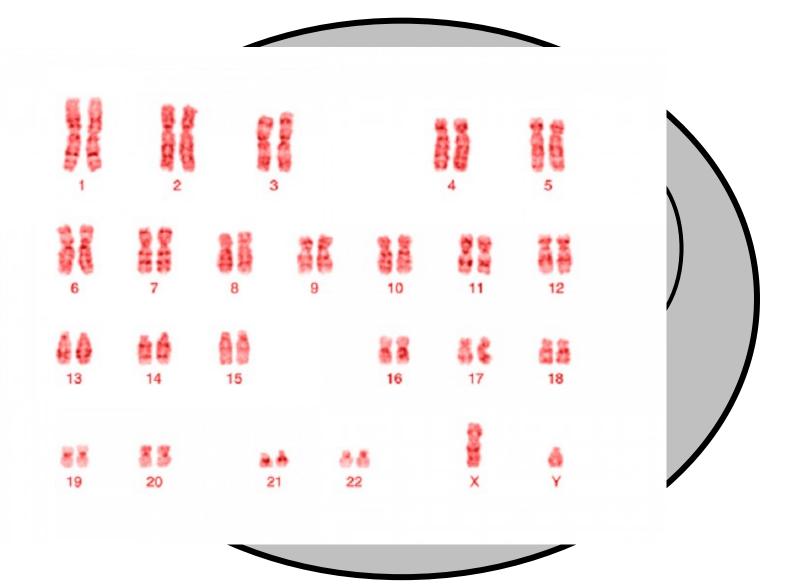
- housekeeping genes
- gene expression
- exones, intrones, non-transcribed regions, promotors
- > Informational macromolecules
- > Transcription, alternative splicing, translation
- Chromosomes

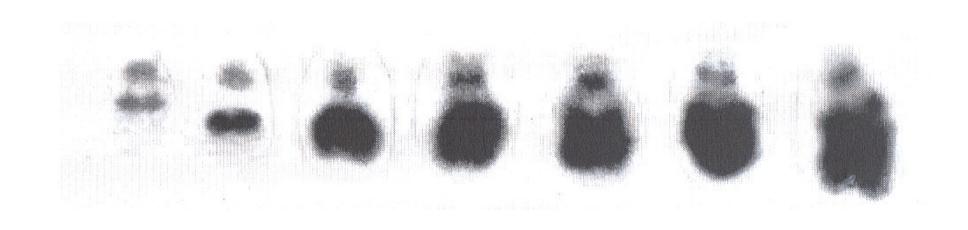
What is a DNA?



cold ethanol + salt + detergent > 1 m DNA



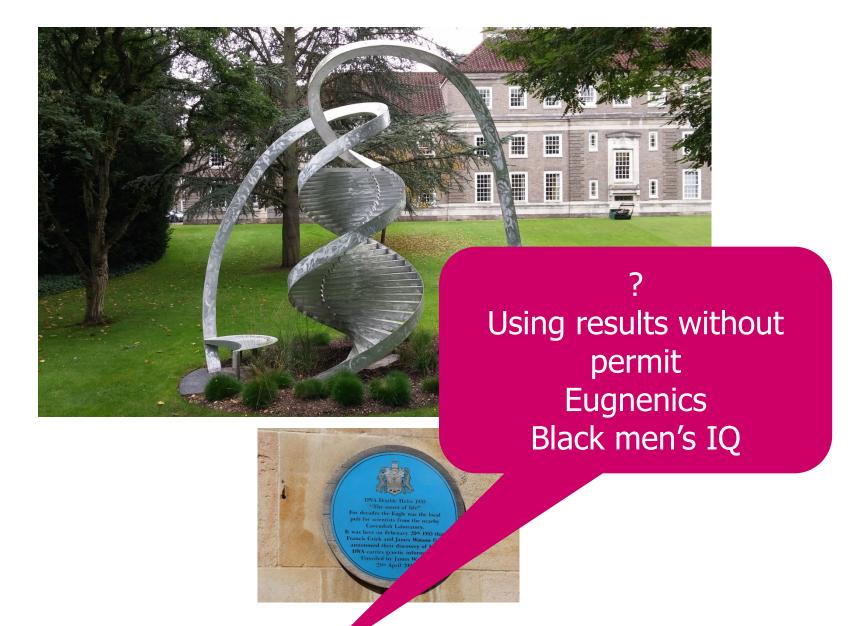








Cavendish Laboratory and The Eagle Pub Watson + Crick + Wilkins + Franklin



Cavendish Laboratory and The Eagle Pub Watson + Crick + Wilkins + Franklin

- ➤ **Genetics:** study of genes, genetic variation, and heredity in living organism
- ➤ **Genome:** complete set of DNA within a single cell of an organism
- ➤ **Genomics:** focuses on the structure, function, evolution, and mapping of genomes

Genome is more than just a sum of genes

- > Genetics
- > Genome
- **Genomics**

- > Genetics
- > Genome
- > Genomics

- Structural (DNA, chromosomes)
- Functional (RNA, gene expression)
 - Comparative

- Genetics
- > Genome
- **Genomics**
- > Microbiome
- > Transcriptome
- > Epigenetics

Genetics

Genome

Genomics

> Microbiome

> Transcriptome

> Epigenetics

Community
of microorganisms
inhabiting
a particular
environment

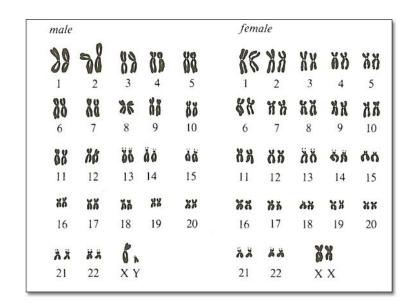
- Genetics
- > Genome
- > Genomics
- Microbiome
- > Transcriptome
- **>** Epigenetics

Set of all RNA molecules in one cell or a population of cells in certain time

- Genetics
- > Genome
- Genomics
- Microbiome
- > Transcriptome
- > Epigenetics

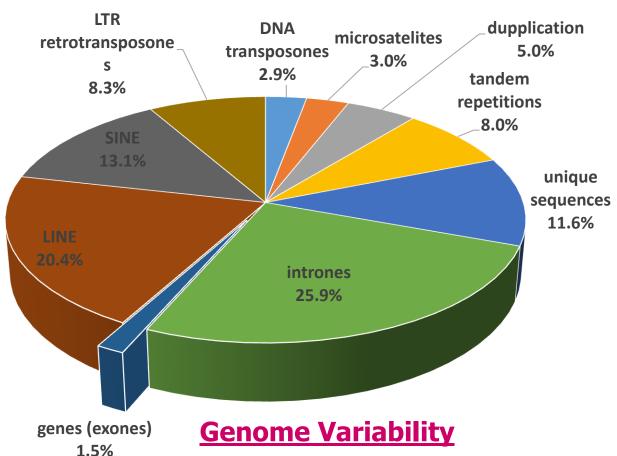
Study of heritable changes in gene function that do not involve changes in the DNA sequence

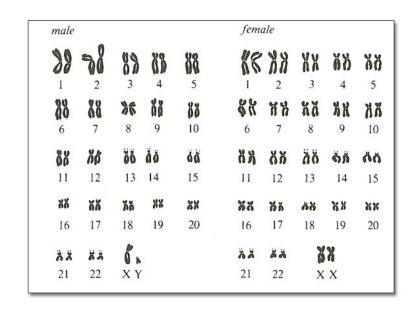
What is a genome?



Human genome: 3.2 x 10⁹ bp, ~ 20,000 genes

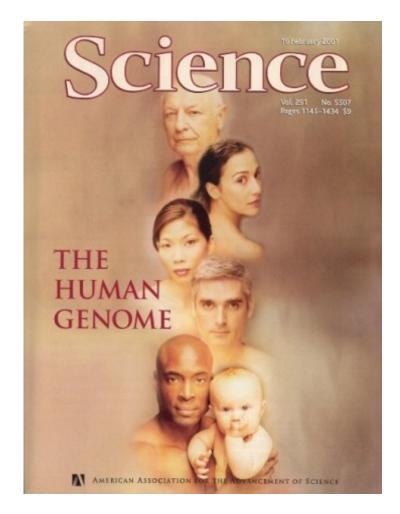
What is a genome?

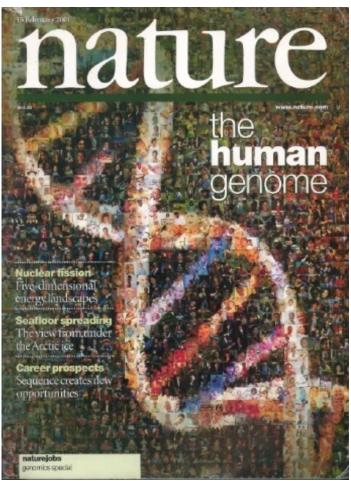




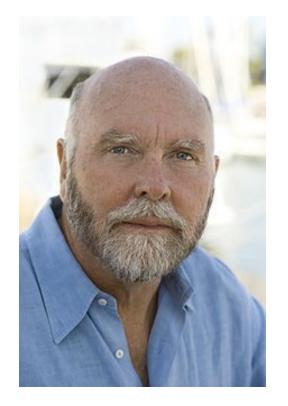
- Nucleotide polymorphism
 - Single Nucleotide Polymorphisms SNP
- Structural variations
 - Copy Number Variations CNV
 - Short Tandem Repeats STR (2-5)

Human genome: 3.2 x 10⁹ bp, ~ 20,000 genes

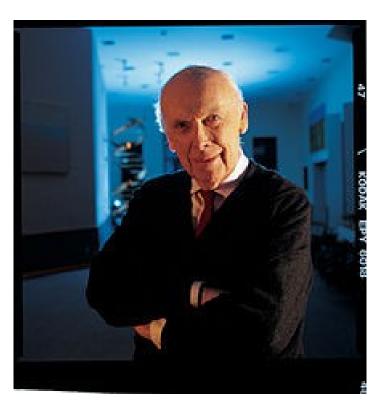




Human genome was published in 2001

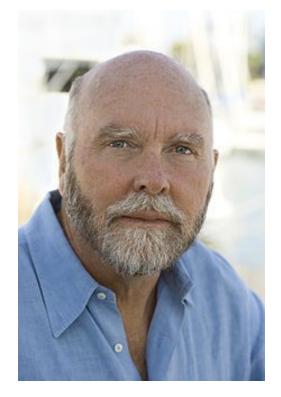


C. Venter

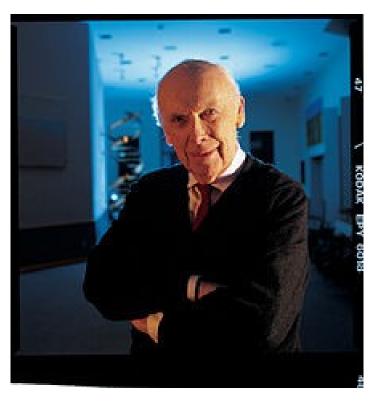


J. D. Watson

Individual sequences of human genomes were published in 2007 and 2008



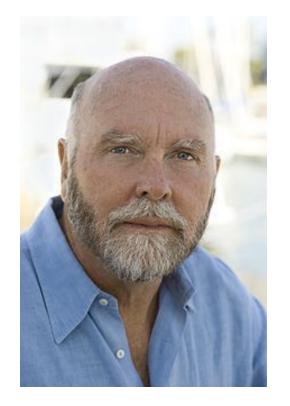
C. Venter



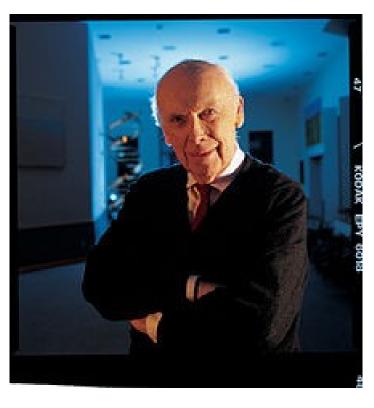
J. D. Watson

Individual sequences of human genomes were published in 2007 and 2008

Difference in 7648 amino acid substitutions



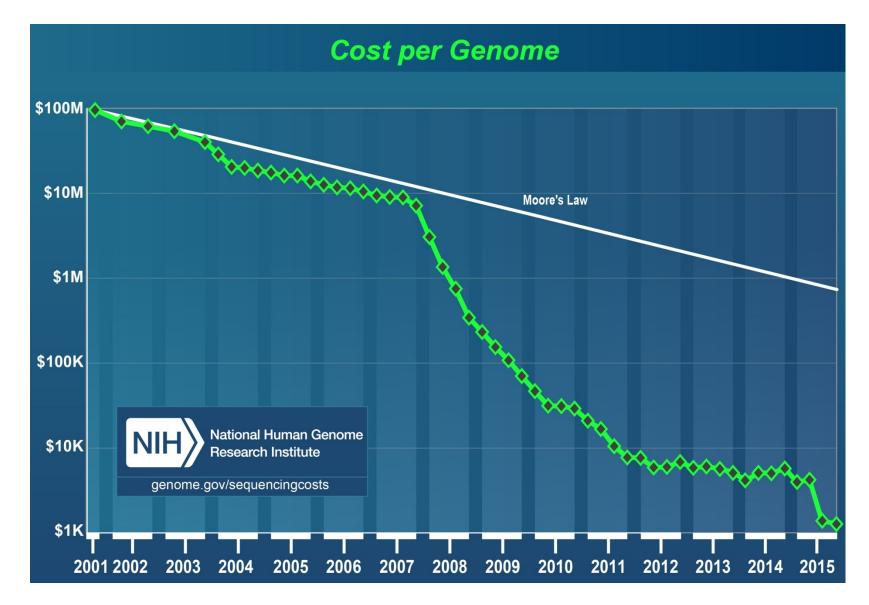
C. Venter



J. D. Watson

Individual sequences of human genomes were published in 2007 and 2008

The 1000 genome project published in 2010



Moore's law (1965): "The number of transistors (hence the processing power) that can be squeezed onto a silicon chip of a given size will double every 18 months".

Postgenomic era

- Genomes were described
- Ongoing genomes annotations



Genetics today

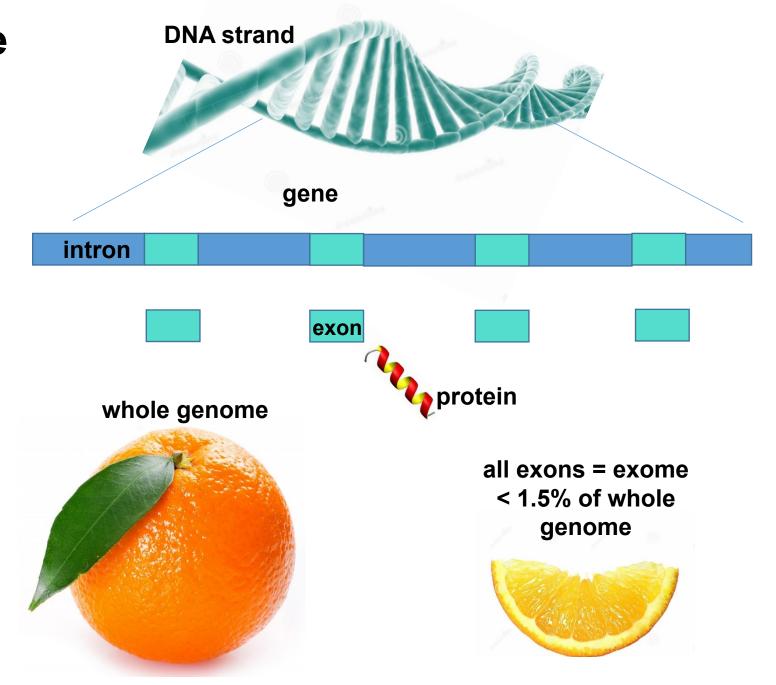
from phenotype to genotype

from genotype to phenotype

Modern techniques of genome analysis

Whole-Genome Sequencing vs. Whole-Exome

- · humar Sequencing
- $= 3.2 * 10^9 bp$
- ~ 20 000 genes
- Exome = < 1.5% of human genome
 contains ~ 85% of known disease causing mutations



NGS – flexibility

whole genome



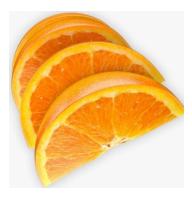
3 200 000 000 bp 30 x coverage

exome



20 000 genes 100 x coverage

targeted genes or hotspots



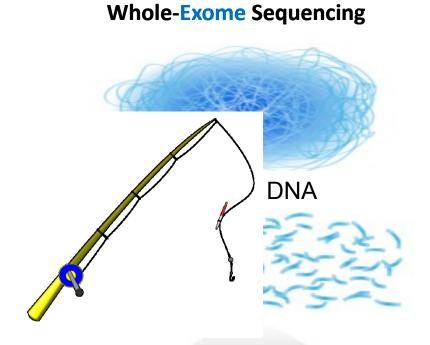
< 100 genes ≥ 1000 x coverage

Whole-Genome Sequencing Genomic DNA .TATGCGATGCGTATTTCGTAAA. Reference

Generating a Person's Genome Sequence

Break genome into small pieces

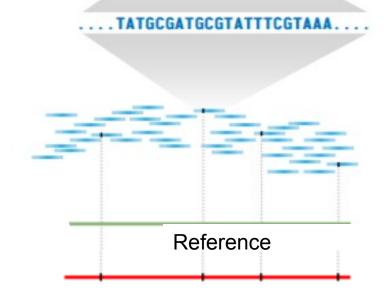
Capture library



Generate millions of sequence reads

Align sequence reads to establish reference sequence

Deduce starting sequence and identity differences from reference sequence



- Every 1000th base could be mutated \Rightarrow 3.2 x 10⁶ variants
- One men has approx. 0.5 x 10⁶ variants
- Exome analysis (1.5% of genome) ⇒ tens thousands of variants

Which of the found variants is the disease causing one?

- Every 1000th base could be mutated \Rightarrow 3.2 x 10⁶ variants
- One men has approx. 0.5 x 106 variants
- Exome analysis (1.5% of genome)

 s thousands of variants

Which of the found variants is the one?

mutation frequency $1.1 - 1.3 \times 10^{-8}$

- Every 1000th base could be mutated \Rightarrow 3.2 x 10⁶ variants
- One men has approx. 0.5 x 10⁶ variants
- Exome analysis (1.5% of genome) ⇒ tens thousands of variants

mutation x polymorfisms d variants is the disease causing

Mutations: **spontaneous** vs. **induced**

gene vs. chromosomal

Mutations: missense

nonsense (terminating triplet)

same sense

frameshift

Single nucleotide polymorphisms (SNPs)

cgcgcggcctcctccttgtggccatcctggtcctcctaaaccacctggac

cgcgcggcctcctccttgtggtcatcctggtcctcctaaaccacctggac

Insertions/deletions (indels)

cgcgcggcctcctccttgtggccatcctggtcctcctaaaccacctggac

cgcgcggcctcctccttgtgg-----ctggtcctcctaaaccacctggac

Microsatelites (STR)

cgcgcggcctcctccttgtggcacacacacacacactctggtcctcctaaaccacctgga

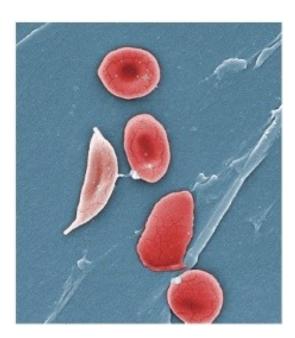
Copy number variants (CNV)

>1 kb – 1MGb

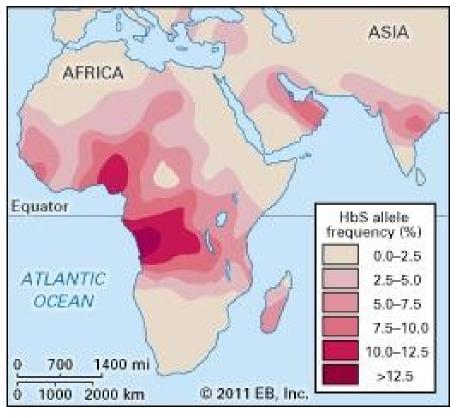
Mutation vs. human genome variability



Sickle-cell anemia



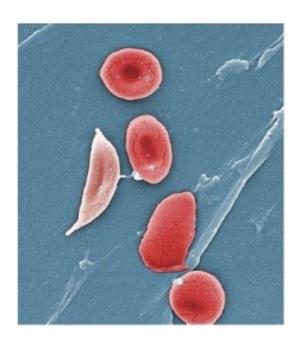


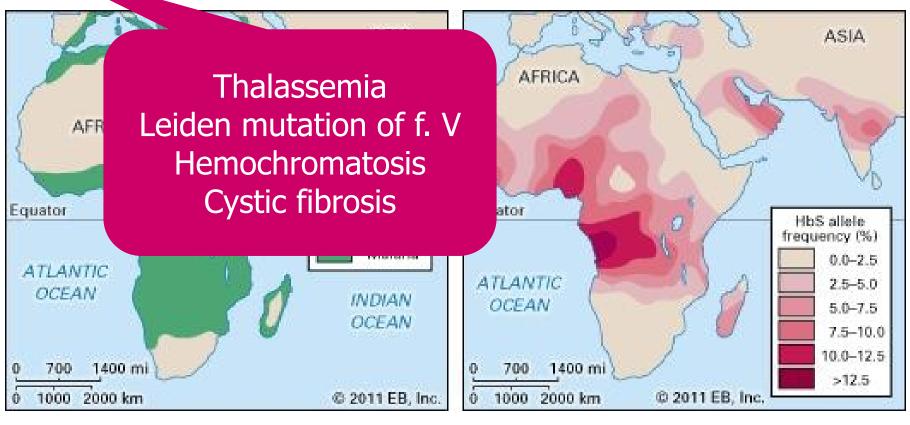


Mutation vs. human genome variability

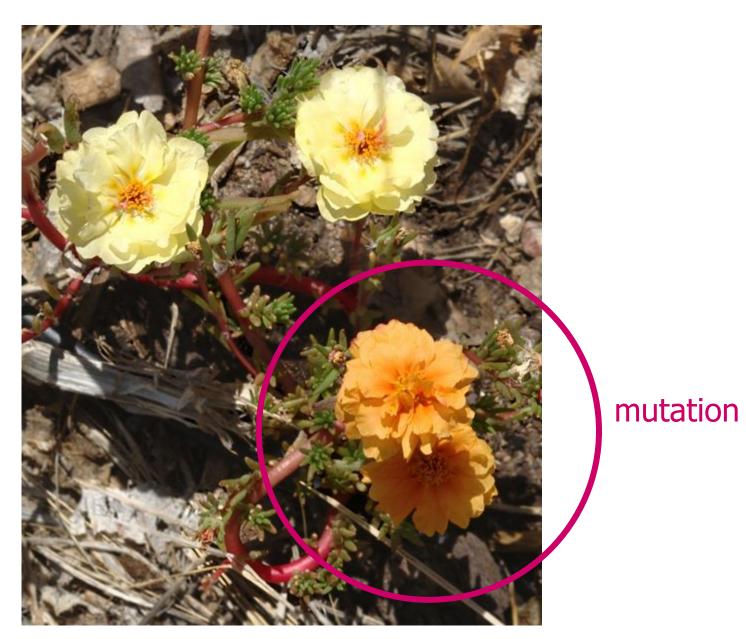


Sickle-cell anemia



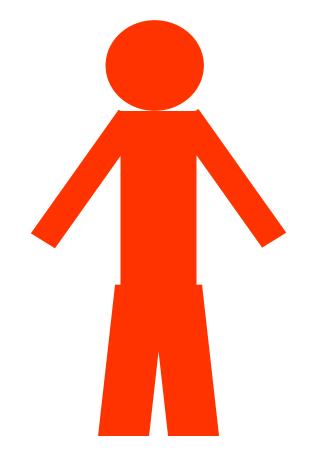


Positive mutations

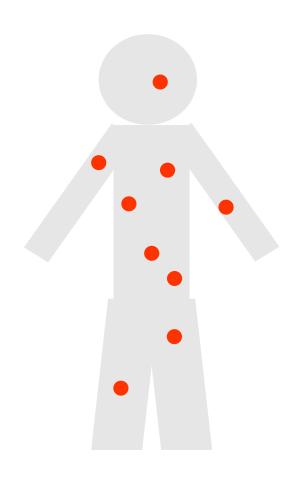


Germinal vs. somatic mutations

Germinal vs. somatic mutation



Germinal mutation



Somatic mutation

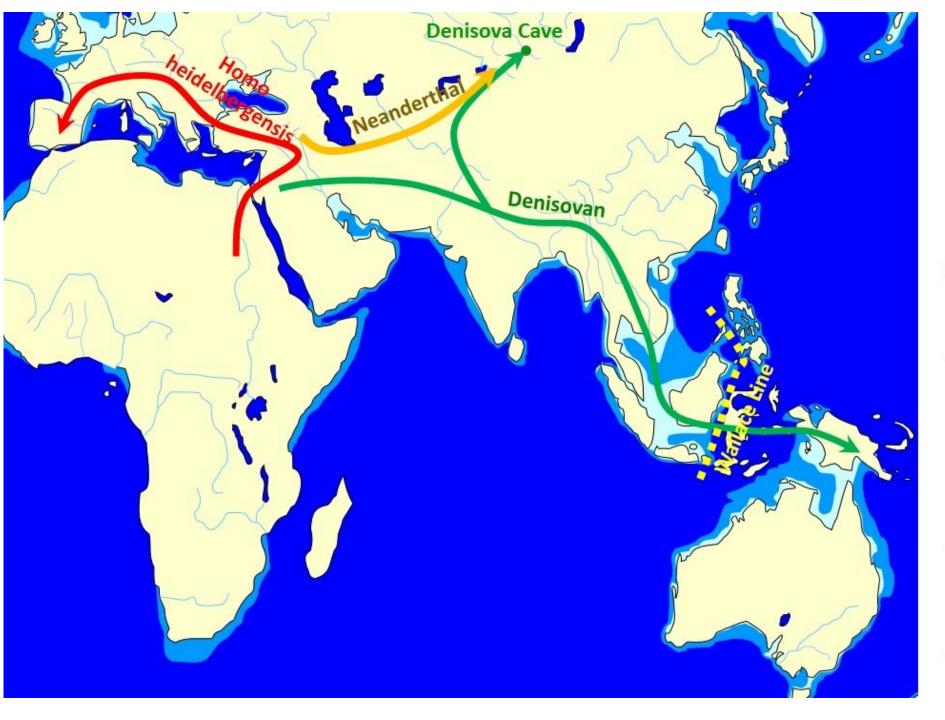
Are we Homo sapiens?

Are we Homo sapiens?





Denisova hominins, 41 000 years ago mtDNA

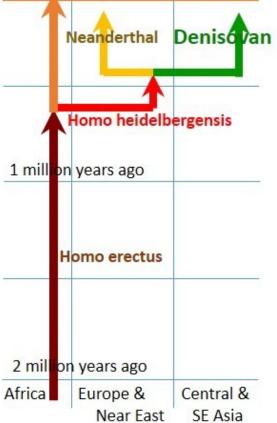


Key

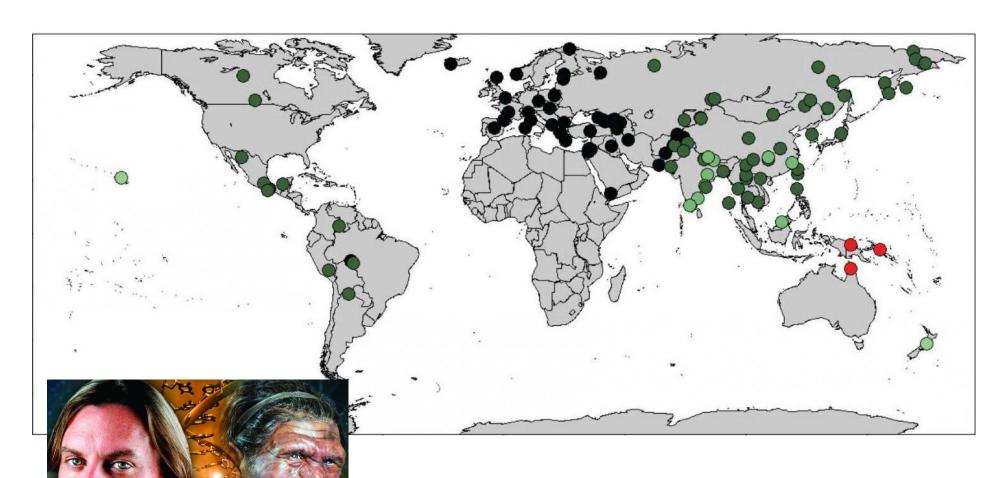
Maximum Sea Level during the Ice Age



Today – modern Homo sapiens



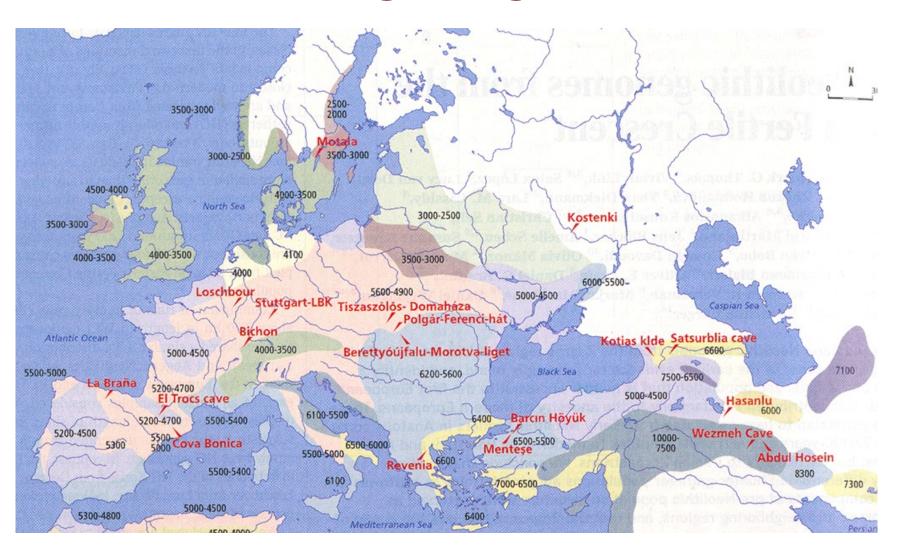
Are we Homo sapiens?



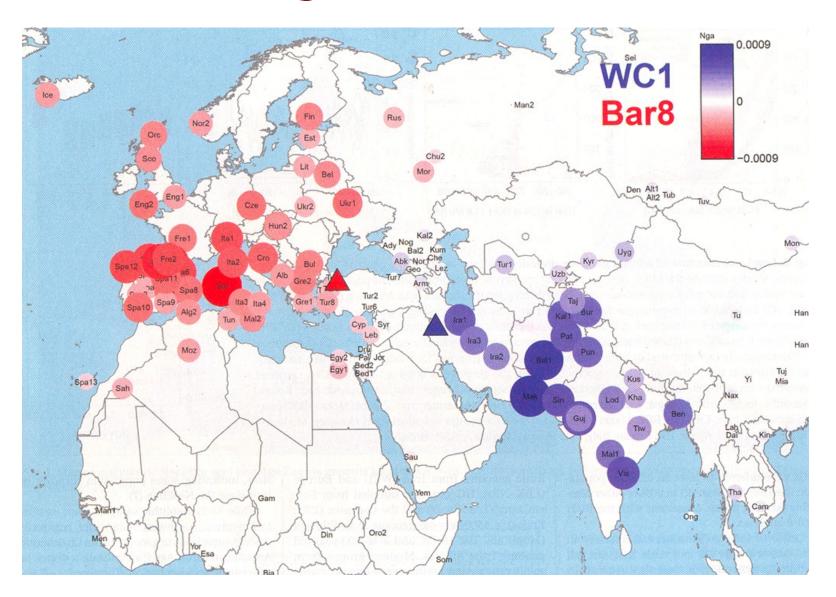
Europe 1-3% of the genome Some diseases of Neanderthal origin – depression, skin disorders?

Ancient genomes analysis

Genome from the Younger Stone Age and Iron Age - Zagros, Iran



Two ancient genomes in modern humans



Famous ancient genomes

Őtzi Cheddar man

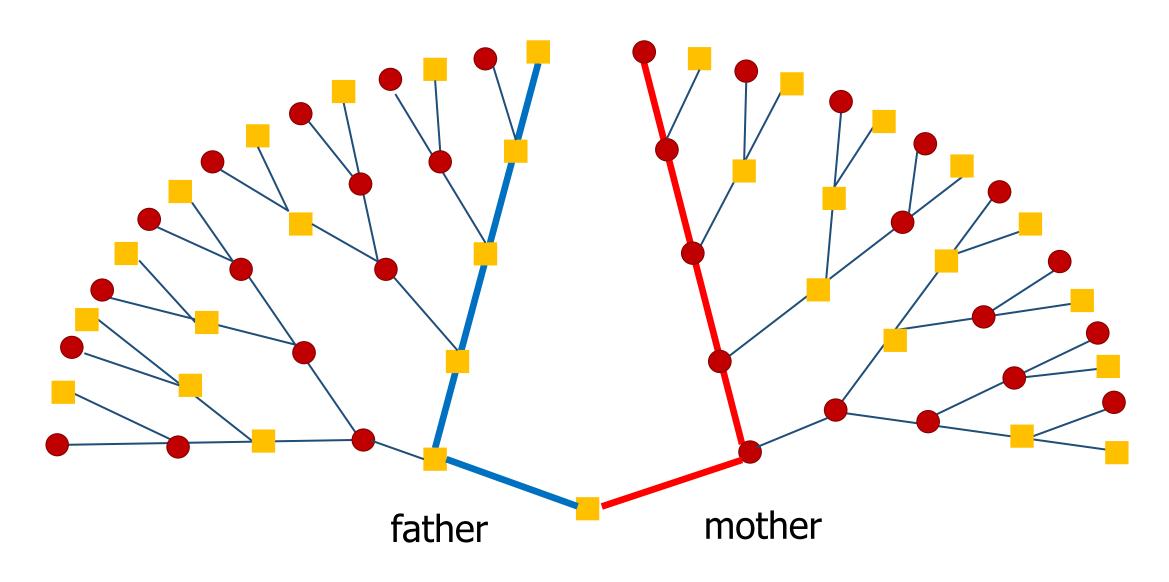






Origin based on mitochondrial DNA

Mitochondrial and Y-inheritance



The seven daughters of Eve Xenia **25 000 years** Helena Velda 20 000 years Katrine 16 000 years 17 000 years Tara 17 000 years Ursula 1 30 – 50 000 years **Jasmine** 43 000 years

The seven daughters of Eve

- > mitochondrial Eve (140 000 years ago in Ethiopia)
- > 7 main mitochondrial haplotypes in Europe
- > 29 haplotypes worldwide

Results are not as accurate as from other methods – mtDNA is very similar

offspring of the mitochondrial Eve may still live

The seven daughters of Eve in the Czech population

- Helena 43.51% (dominant lineage from Polland and european part of Russia)
- Ursula 17.6% (mainly UK and Scandinavia)
- > Tara 11.17%
- Jasmine 8.78%
- Katrine 5.89% (Ashkenazi Jews)
- Velda 4%
- > Xenia 3%

The seven daughters of Eve after the Ice Age Helena Velda 20 000 years 17 000 years Tara 17 000 years Ursula 10000 years

The seven daughters of Eve after the Ice Age Helena Velda 20 000 years 17 000 years Tara 17 000 years Ursula 10000 years

The role of genome in the disease onset

- Mendelian hereditary diseases 8%
- Multifactorial 90%
- **▶ Others 2%**

The role of genome in the disease onset

- Mendelian hereditary diseases 8%
- Multifactorial 90%
- ▶ Others 2%

⇒ genetic background plays almost always a role in the disease onset

Inheritance types

Inheritance types

Mendelian

monogenic: one gene \Rightarrow one feature

X-linked and Y-linked (sex-linked disorders)

Polygenic

several genes \Rightarrow one feature

Mitochondrial

Environmental factors

What is the procedure of hereditary diseases tracing?

> family studies:

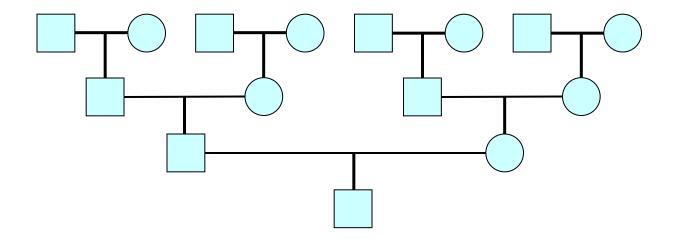
pedigree monozygous twins odds ratio relative risk

- disease frequency in population
- molecular biology methods
- genetic linkeage and functional tests



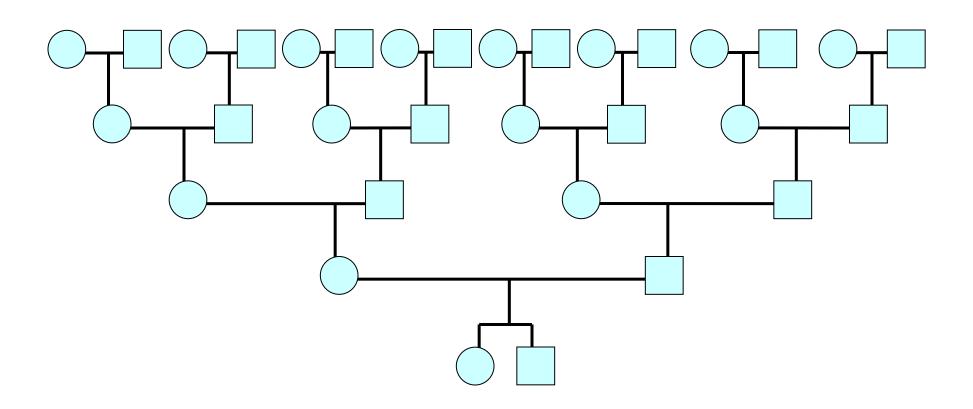
Common ancestor

- two common ancestors in previous generation: parents
- 4 grandparents, 8 great-grandparents
- the number of ancestors in generation n is 2ⁿ

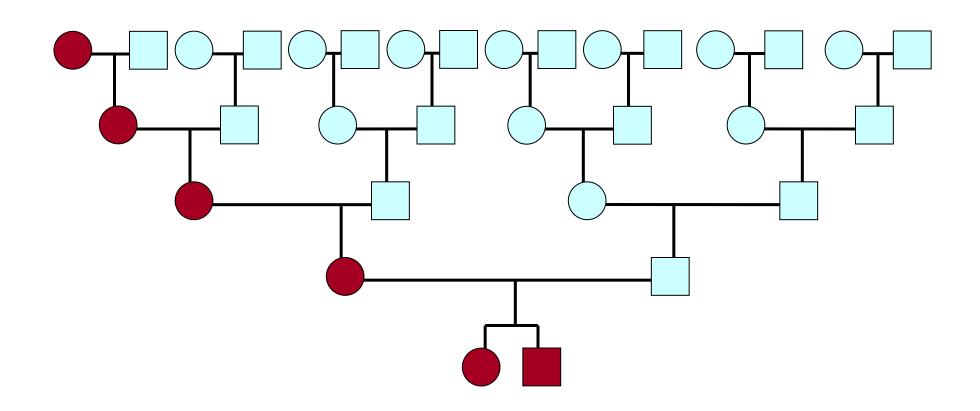


- 40^{th} generation (1000 years back): $2^{40} = 1.09 \times 10^{12}$
- so many people didn't live on this planet (7.0 x 10⁹)

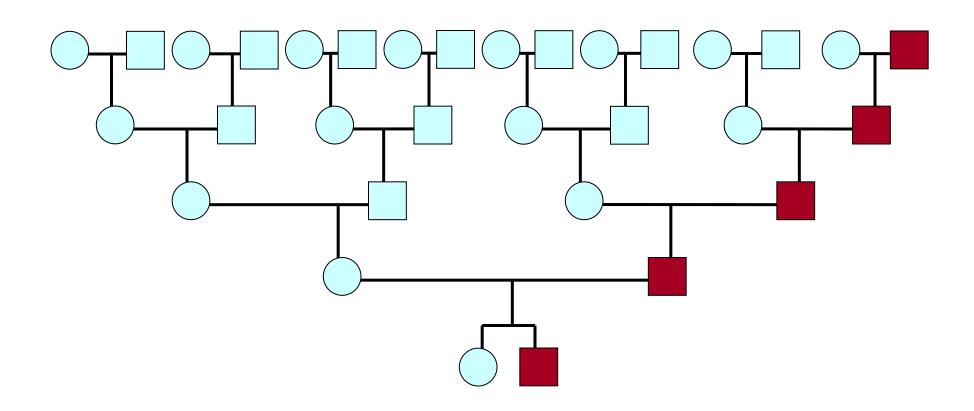
Pedigree



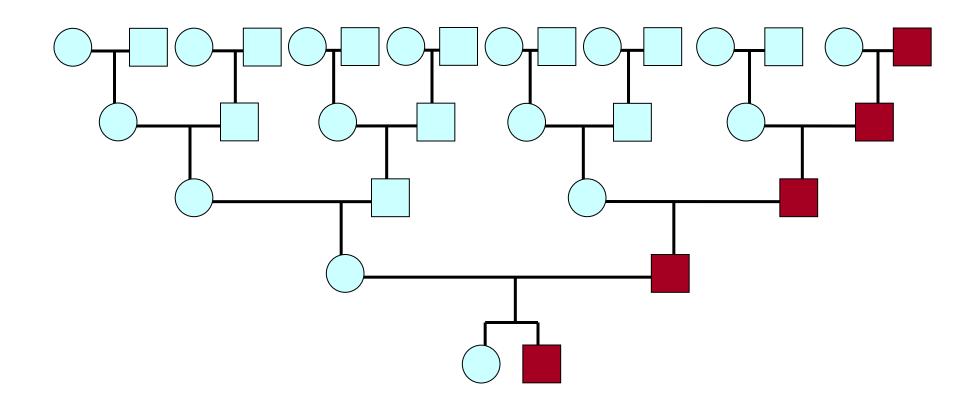
Mitochondrial inheritance



Y-chromosome inheritance

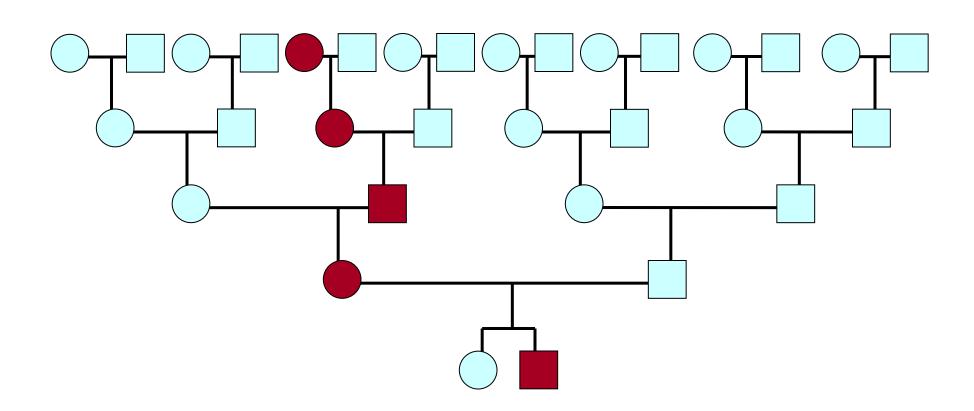


Y-chromosome inheritance

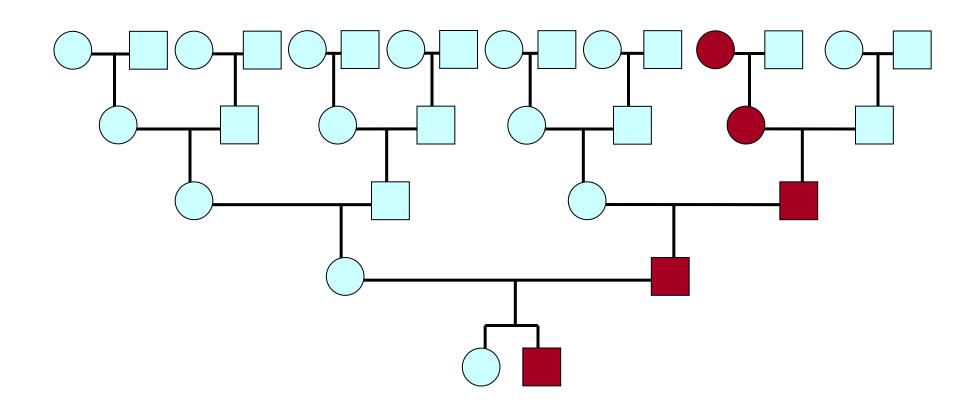


What Y-chromosome carries on?

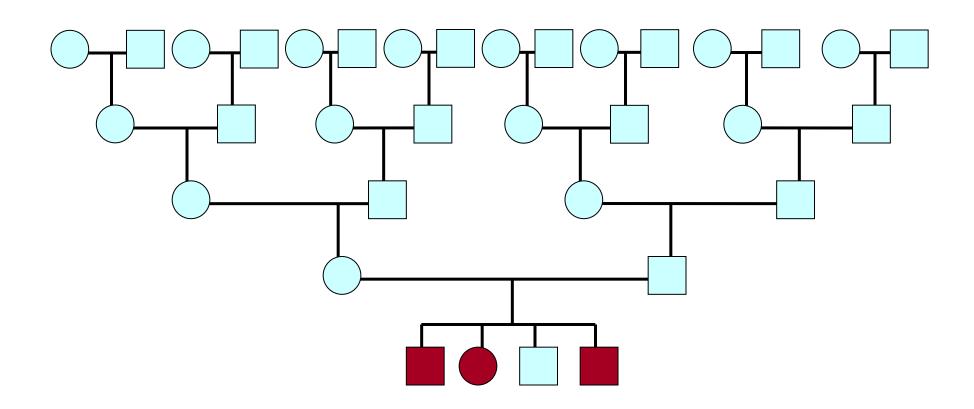
Autosomal dominant inheritance



Autosomal dominant inheritance



Autosomal recessive inheritance



Environmental factors



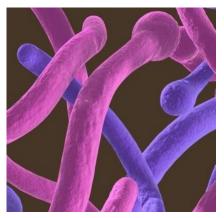














Monogenic disorders

How many monogenic disorders exist?

 ≈ 1000

 $\approx 10~000$

≈ 100 000

How many monogenic disorders exist?

 ≈ 1000

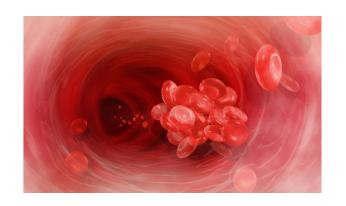
 ≈ 10000

≈ 100 000

Recessive disorders

Dominant disorders

- hemochromatosis (1:10)
- mutation of factor V Leiden (1:20)
- cystic fibrosis (1:25)
- spinal muscular atrophy (1:40)



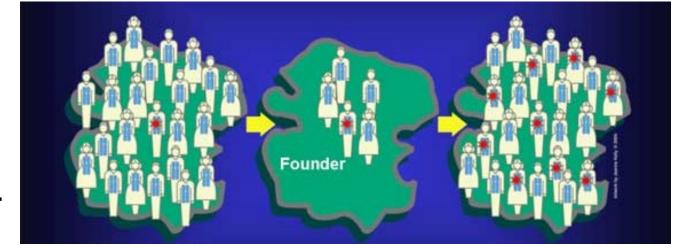
- deafness
- polydactyly



- Huntington's Chorea
- Li-Fraumeni syndrome
- breast and ovarian cancer

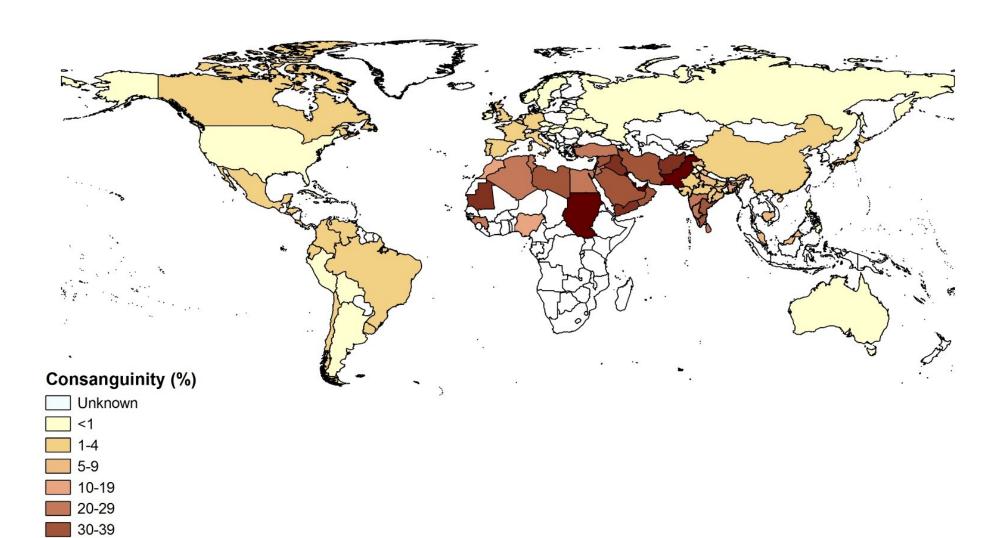
Origin by mutation type

- > Founder effect
- Small closed populations: Ashkenazi Jews franco-Canadiens Iceland surroundings od Maracaibo lake...

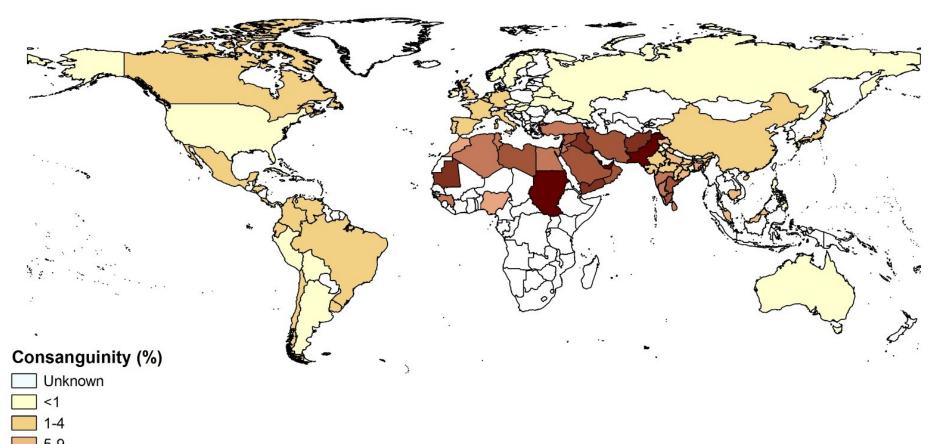


Marriages of relatives

Consanguinity map



Consanguinity map



Mandatory genetic testing of partners: Bahrajn

Saudi Arabia (Iceland)

40-49 50+

Consanguinity example





Consanguinity example

Homozygous mutation *BLM* gene c.1642C>T, p.(Gln548*)

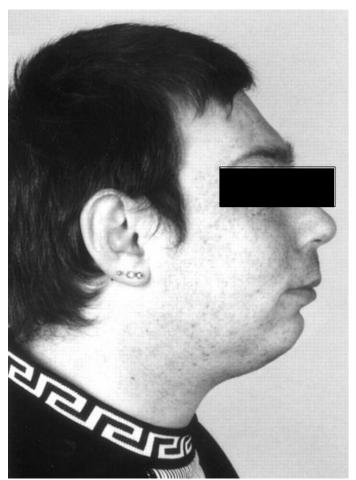




Genetic diseases in Czech population

Nijmegen breakage syndrome = Seeman syndrome (NBS)

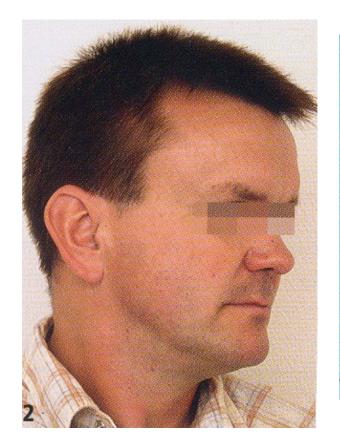
NBN gene for nibrin in 8q21 Heterozygotes 1:130-150 Common ancestor



Seemanová, 1985

Czech dysplasia

COL2A1 gene absence of ocular and orofacial anomalies shortening of third and/or fourth toes



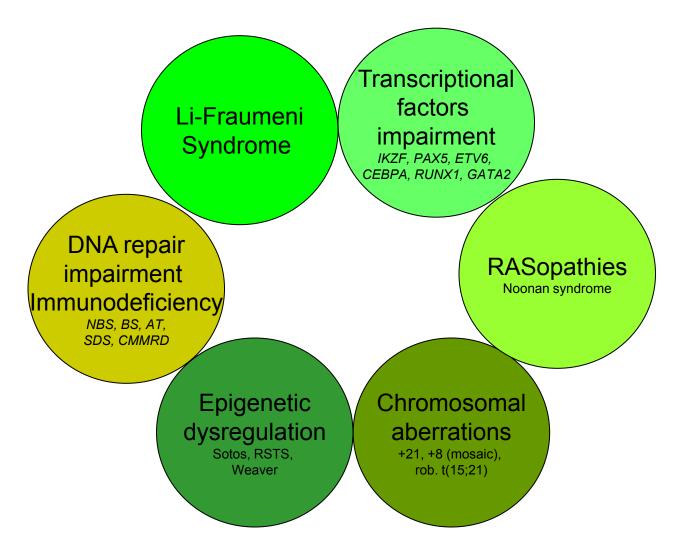


How do we search for new genetic disorders?

Molecular biology methods

- > Analysis of known disease-associated genes
- Comparing genetic information of healthy and affected family members
- Looking for new variants and "new" genes
- Verification by functional tests

DNA variants and disorders



genes together with non-coding regions



Twins



- > Genetic vs. nongenetic influences
 - monozygotic: 100% of identical alelleles
 - dizygotic: twins/siblings 50% of identical alelleles

➤ Genetic influence: (concordance in MZ and DZ twins):

Diabetes mellitus

Schizophrenia

Lupus

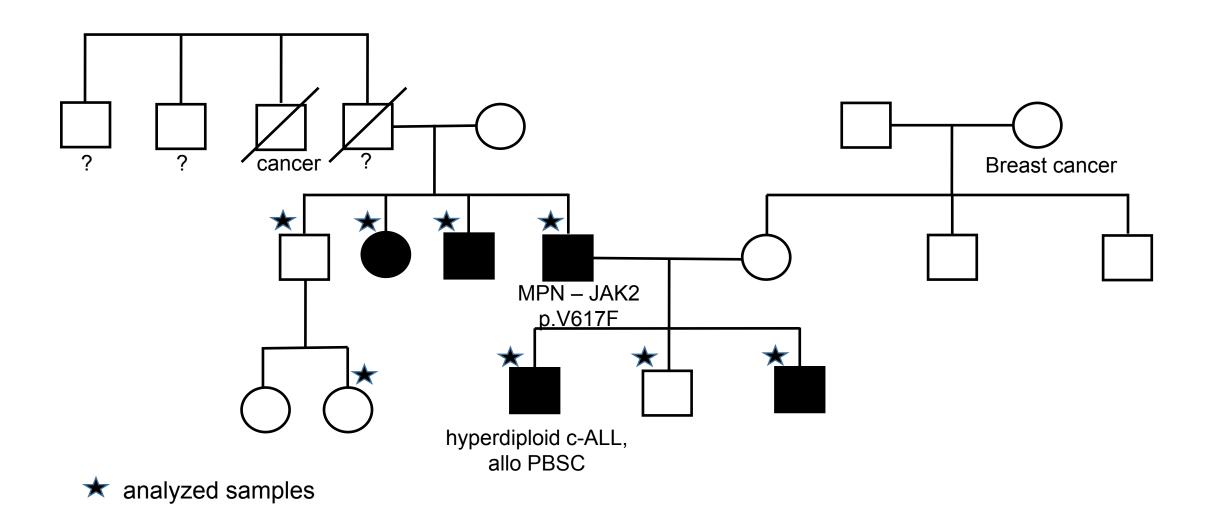
Cleft

Sclerosis multiplex

Are monozygotic twins genetically identical?

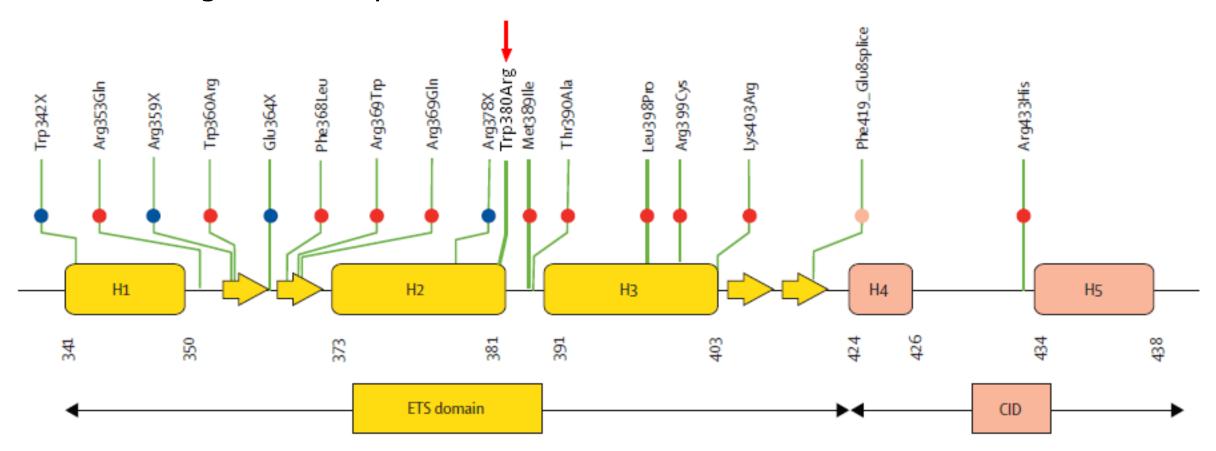
Clinical cases

Clinical case: thrombocytopenia



ETV6

- Exome sequencing exome comparison of healthy and affected family members
- variant in gene *ETV6*: p.W380R



Bioinformatics and biostatistics

- Mapping on a reference sequence (BWA-mem)
- build-up of two variant files (Samtools mpileup):
- 1. file affected family members
- 2. file healthy family members

Exclusion of population and familial variants (VarScan):

Selection of variants present only in affected family members

Identification of potentionally causal variants:

variant anotation (Annovar)

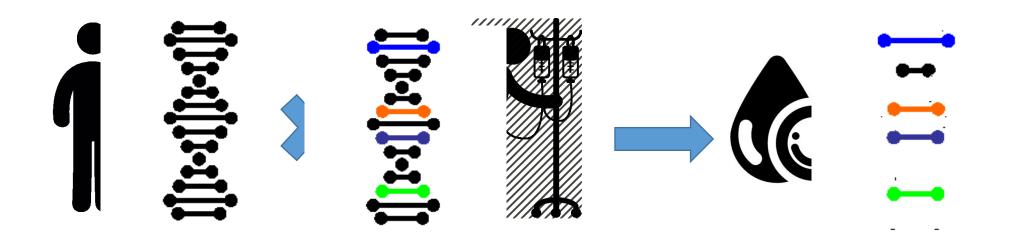
filters: coverage > 20

left only exonic, ncRNA exonic, downstream and upstream variants

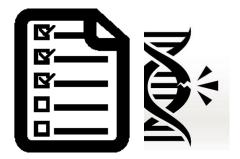
left out synonymous variants

excluded variants annotated in dbSNP dtb. with rsXXXXX ID

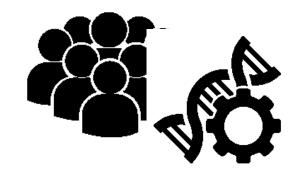
Bioinformatics and biostatistics



Annotated mutations



Variant frequency in population

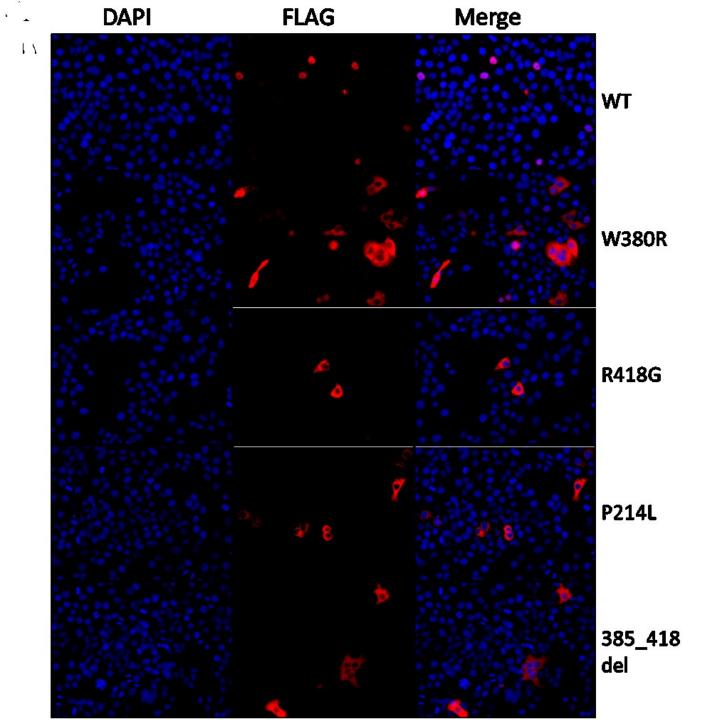


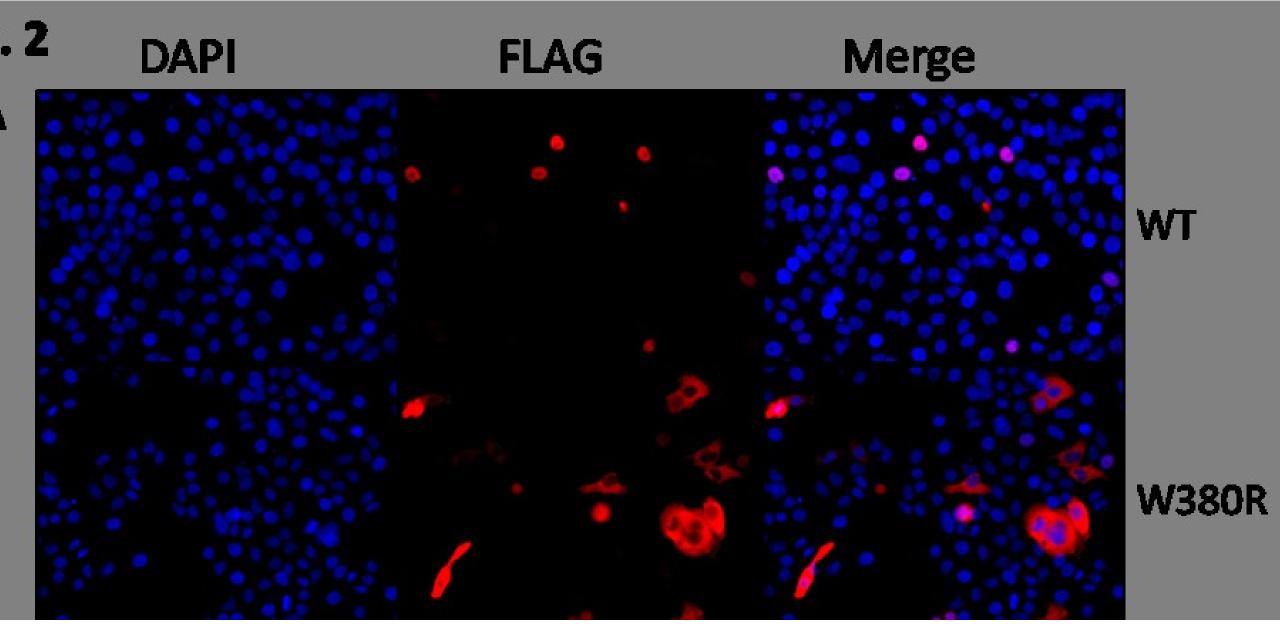
Variant effect on the protein structure



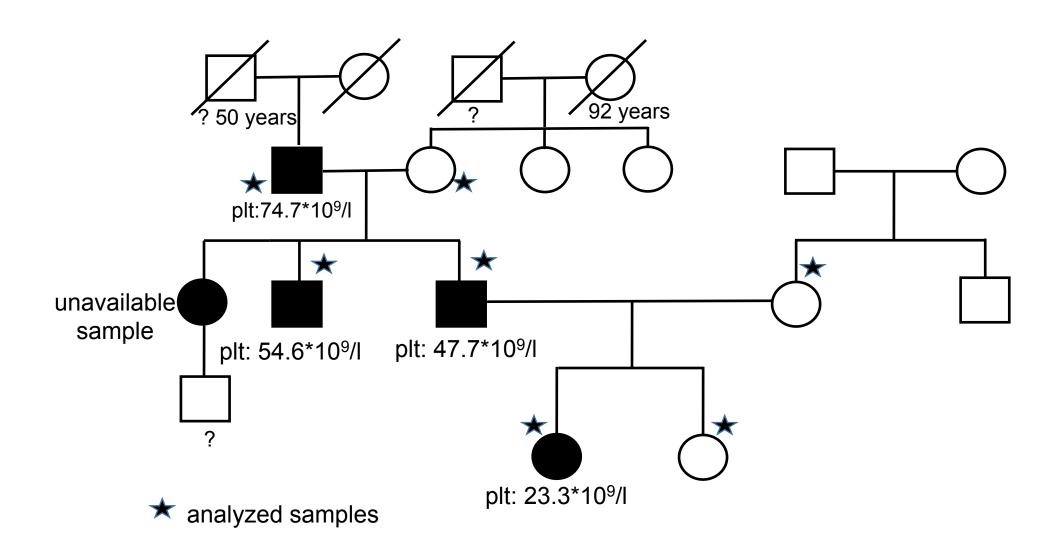
Functional analysis of *ETV6*:

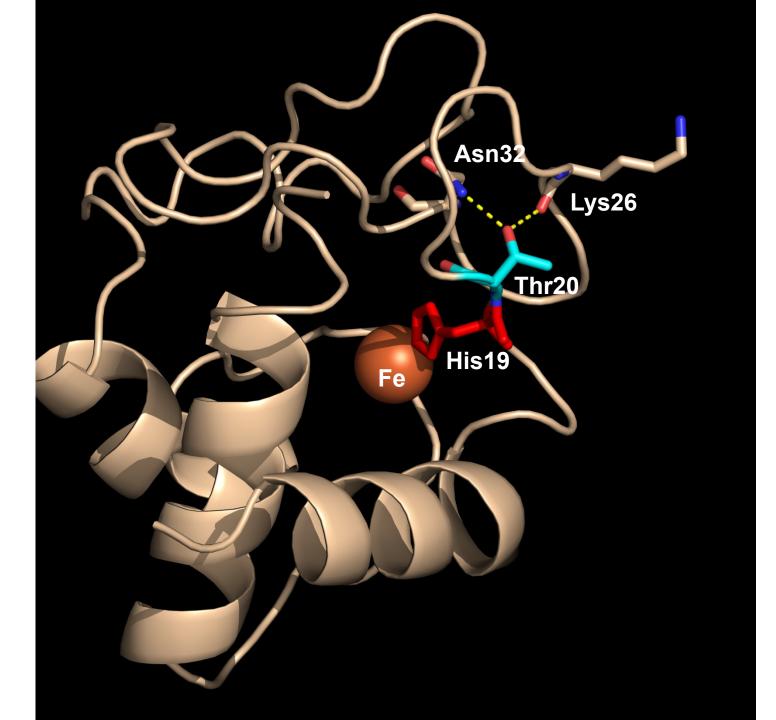
fluorescence microscopy





CYCS: exon 2, p.T20I





CYCS: p.T20I



What are the skills of clinical geneticist?

- complex examination
- gene/s analysis indication
 - exome sequencing
 - genome sequencing
 - functional tests
- results interpretation(from practitioners to clinical geneticists)



- therapeutic and preventive intervenation proposal
 - respecting wishes of affected individuals together with ethical aspects

What are the skills of clinical geneticist?

- > complex examination
- gene/s analysis indication
 - exome sequencing
 - genome sequencing
 - functional tests

results interpretation (from practitioners to clinical geneticists)

Complex information analysis

– complex is more than the
sum of individual parts

- therapeutic and preventive intervenation proposal
 - respecting the desire of affected individuals together with ethical aspects

Why genetics?

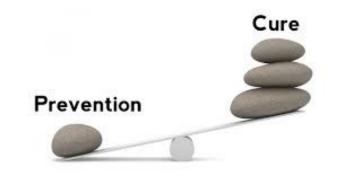
Disease diagnostics:
 prenatal
 preimplantational
 genetic counselling

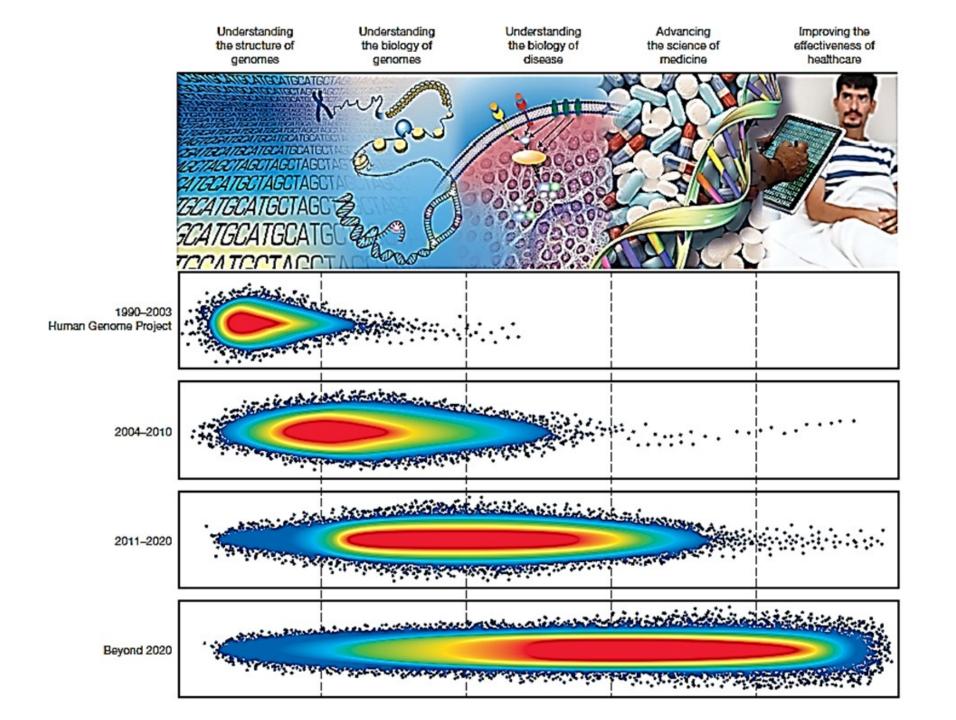
Therapy:pharmacogeneticspharmacogenomicsimmunogenetics

- Prevention
- > Gene therapy, genome editing



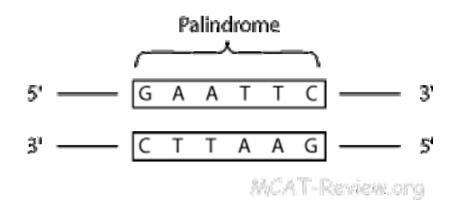




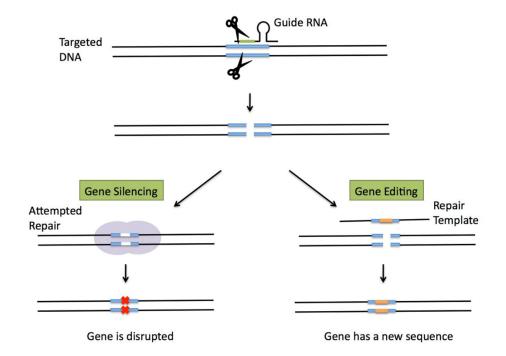


CRISPR-Cas9

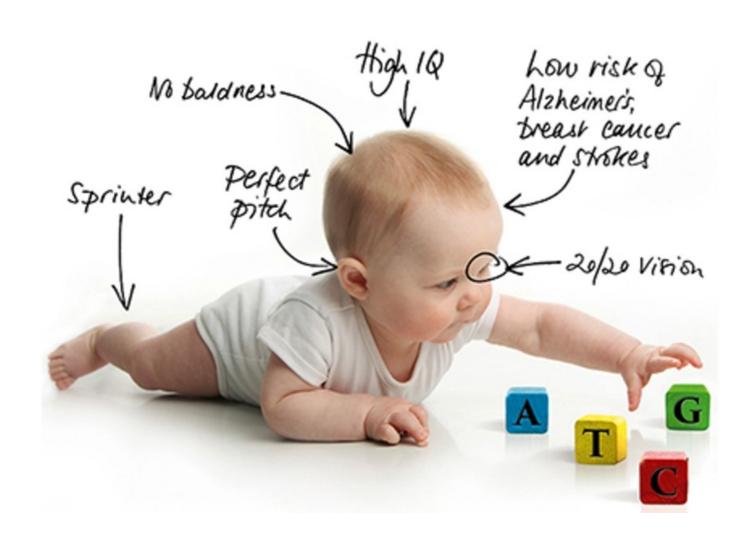




Pompeie, 79AD



Made-to-order children?





"Your weight problem is partly genetic and partly Boston Cream pie."