### **Bio393: Genetic Analysis**

Human variation and allele frequency spectrum



#### In human genetics, experiments are all post hoc

No controlled crosses

No defined genetic backgrounds

Large genome (haploid three gigabase pairs)

Good phenotyping!

Lots of \$\$\$

How do we identify genes in humans?

#### Draft human genome announced in June 2000



It took more than 10 years and \$3 billion

### We need physical pieces of DNA to sequence



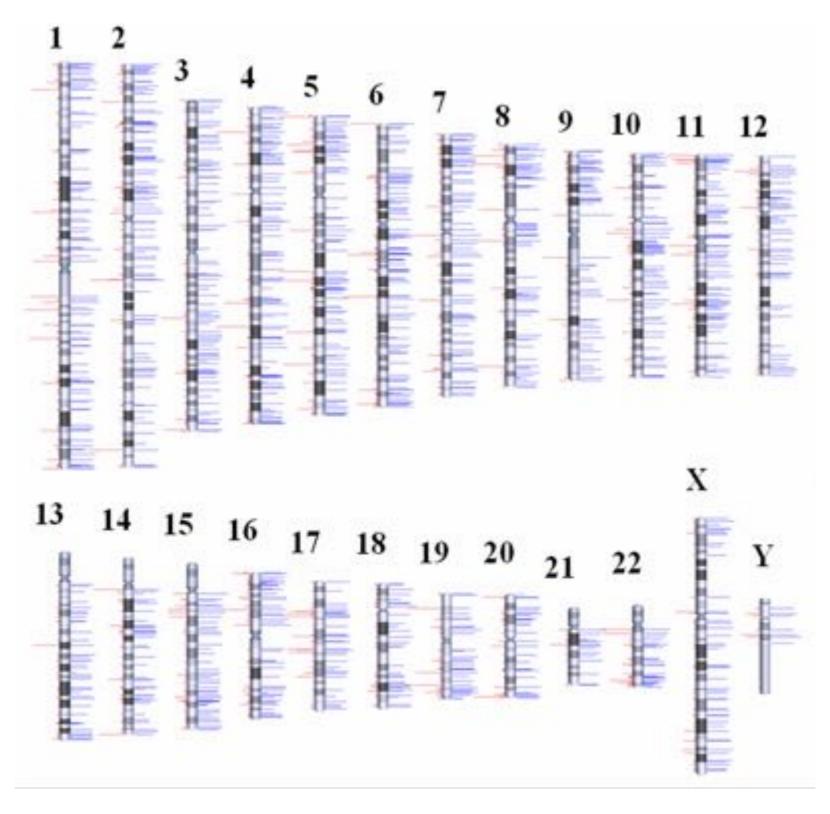
Who was sequenced?

#### We don't have one human genome



Nine humans had parts of their genomes sequenced to make the first draft.

#### A genome sequence gives us the (incomplete) parts list

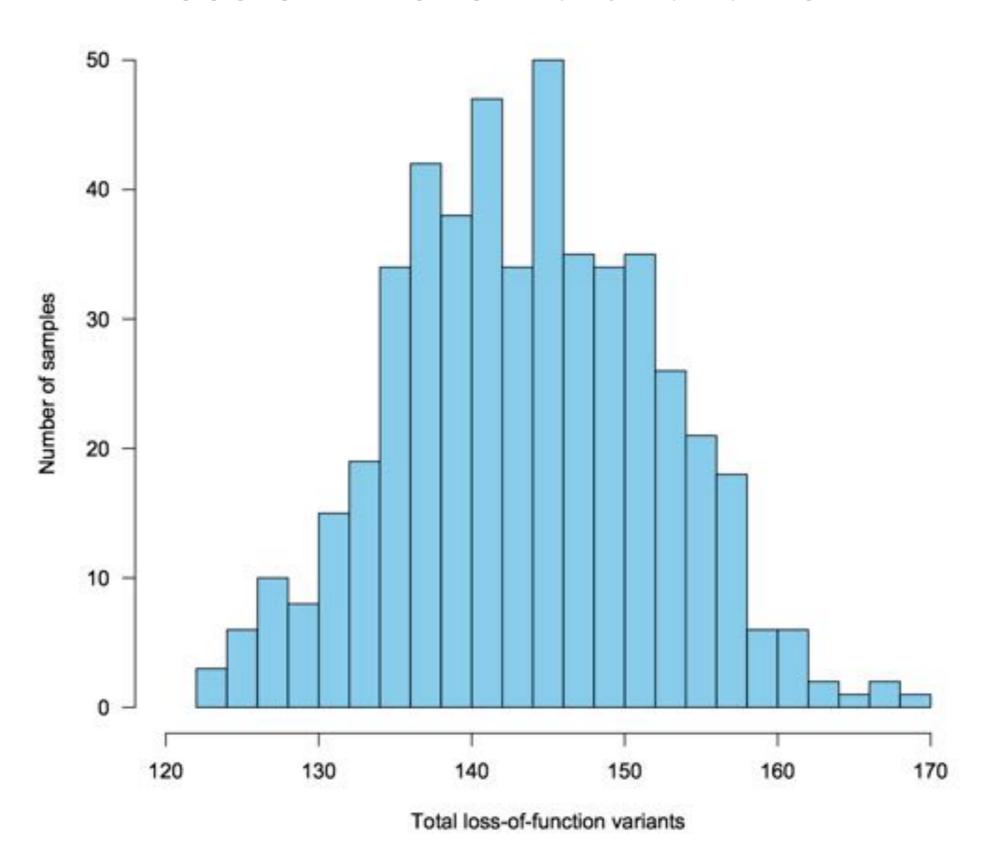


#### Types of variation



Rare = variants found in less than 1% in population

## We each have over 100 unique loss-of-function rare variants



## Over 3,000 rare diseases have a known underlying genetic cause



One in twelve people have a rare disease

Compound heterozygosity underlies many diseases

#### Types of variation



Rare = variants found in less than 1% in population

Common = variants found in more than 5% of the population

Intermediate = variants found in 1-5% of the population

#### Where does variation come from?

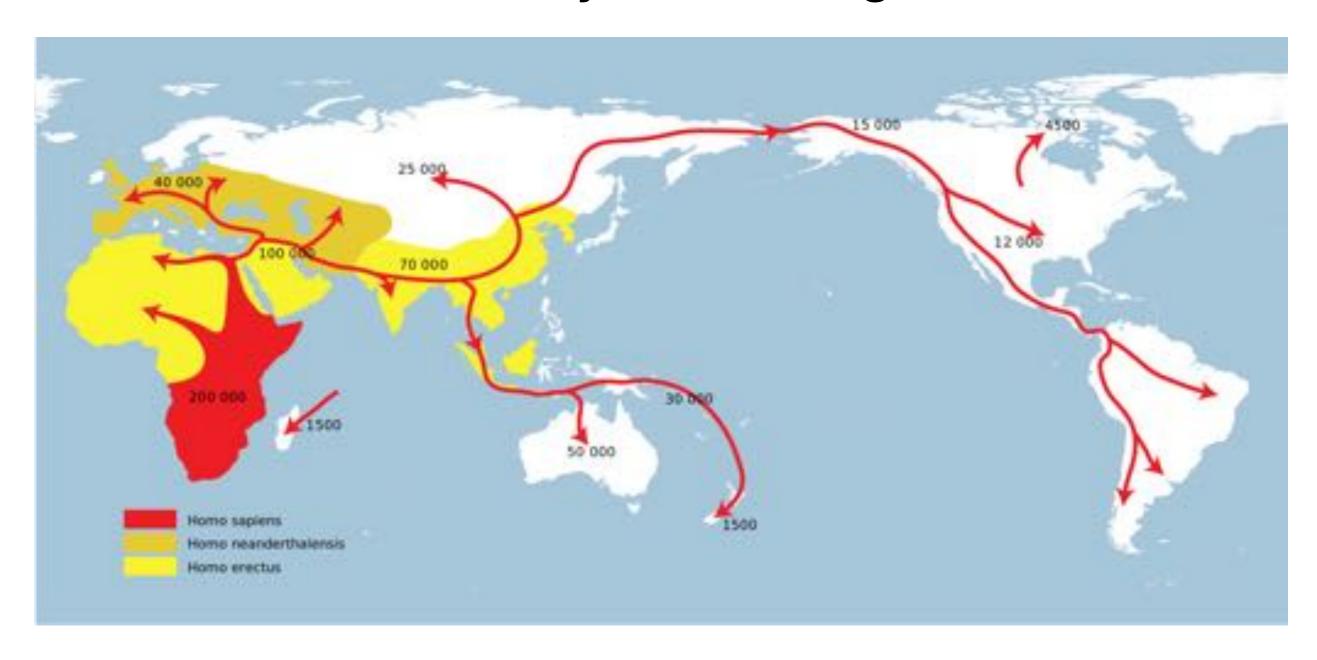


Random errors in replication, transcription, DNA repair, etc.

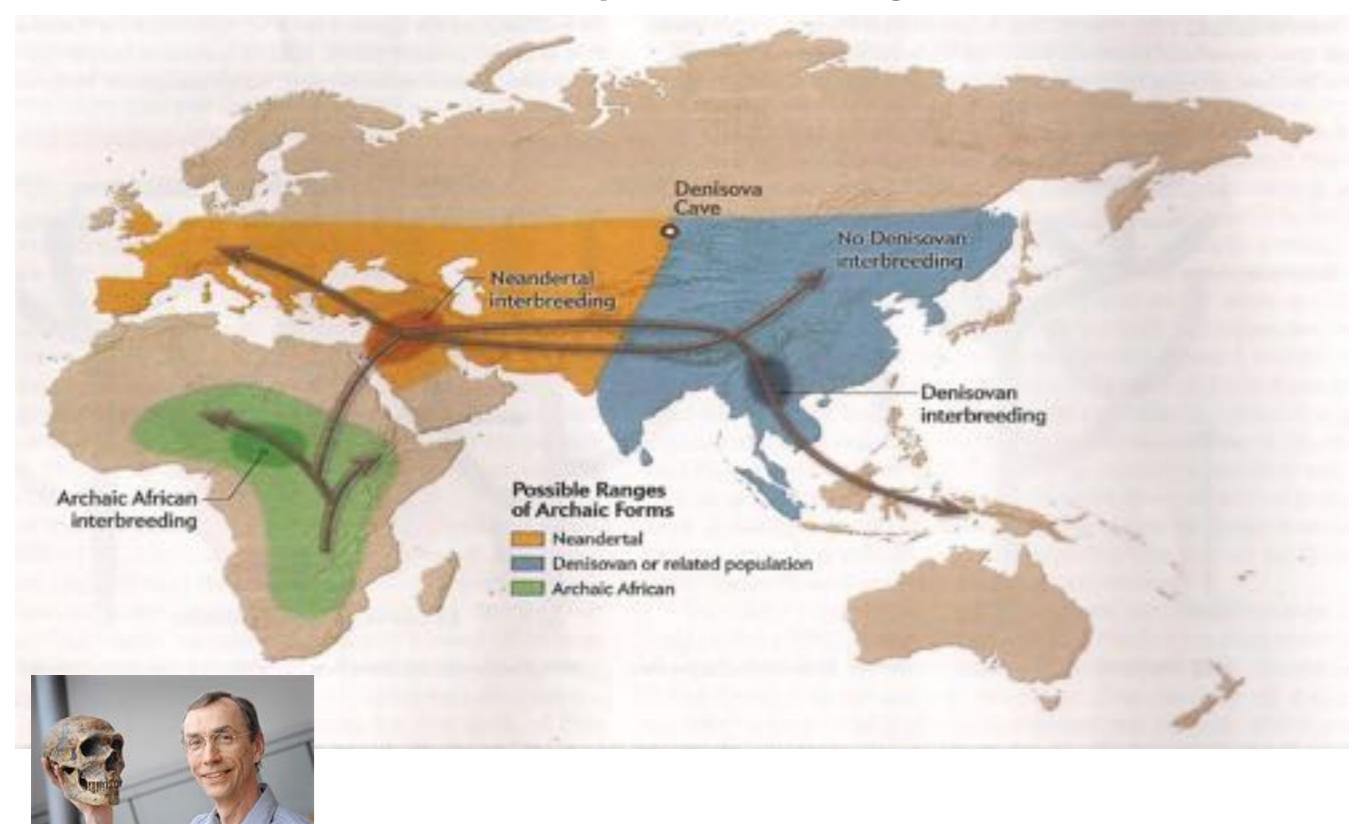
Somatic or germline errors

Once generated, germline variants are inherited

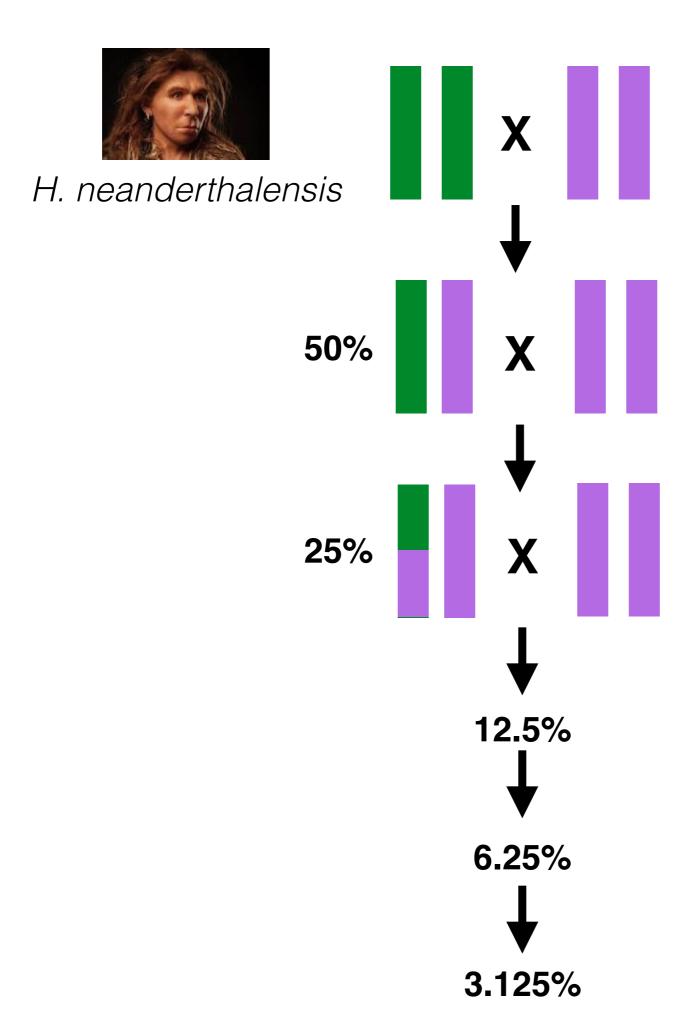
### Human history drives our genetics



### Human history drives our genetics



**Svante Pääbo** 





H. sapiens

### Human history drives our genetics

Copyright © The McGraw-Hill Companies, Inc. Permission required for reproduction or display. bottleneck: catastrophic reduction in population original chance new population population survivors

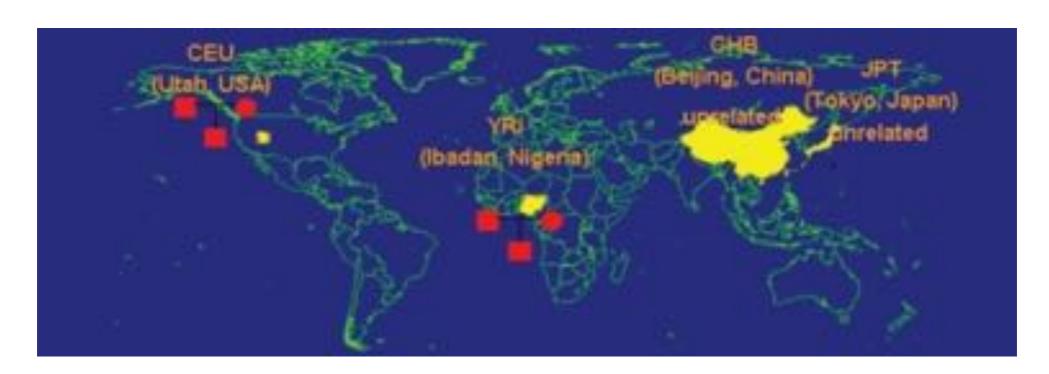
# The common disease - common variant (CD-CV) hypothesis



Diseases shared by lots of people will be caused by variants shared by those same people

How do we find all these common variants?

# To find common variants, we need markers shared by lots of people



Goal is to find all the common variants

After the HGP, the HapMap project was born.

#### All three types of variation can cause disease



Rare = variants found in less than 1% in population

Common = variants found in more than 5% of the population

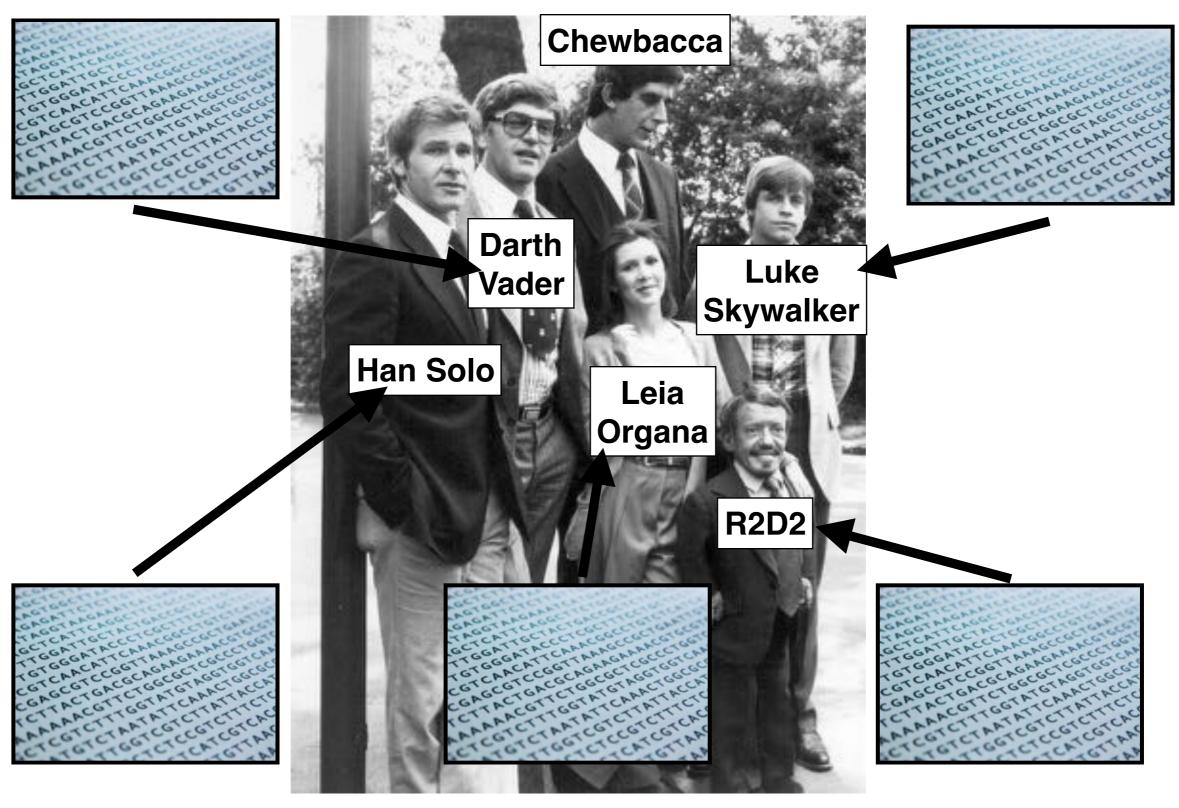
Intermediate = variants found in 1-5% of the population

#### An array to genotype at >4.3 million sites



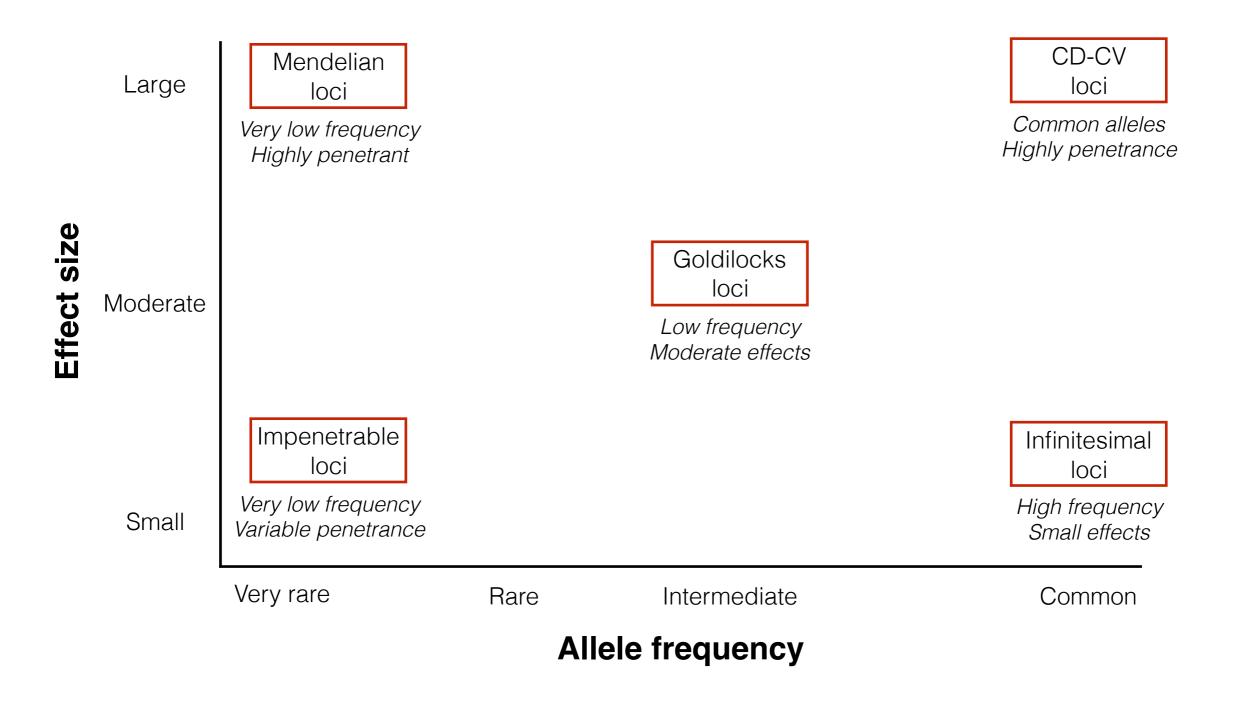
Tool to genotype intermediate and common variation

## We want to be able to read genomes and make predictions



The cast of the original Star Wars

#### The spectrum of how variation contributes to disease

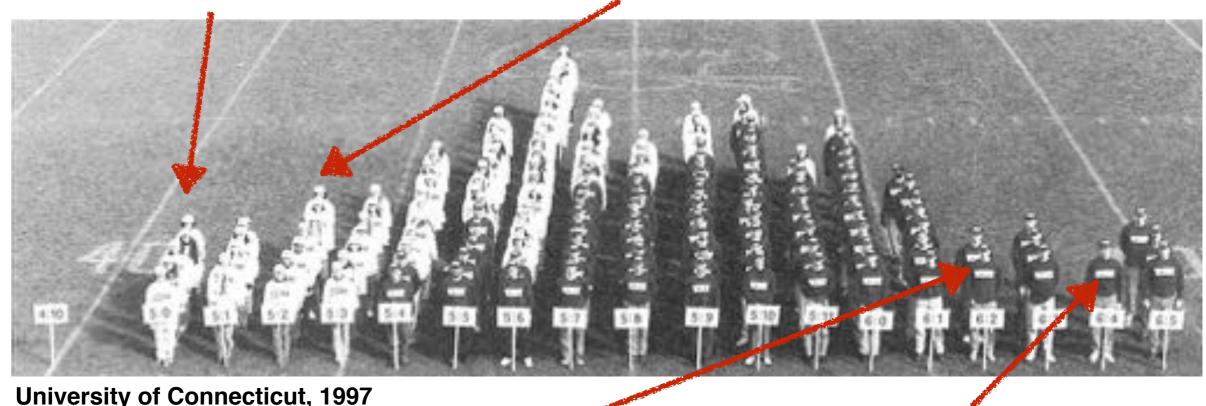


How do we find the variants that cause common disease?

### To find genes in humans, we must correlate genotype with phenotype

CAGCGATAGGCTTTAATGTT **AGCCCGTTTTTATGACCAACG** GGGTTCACAGTGAGCTGTGT

CAGCGATAGGCTTTAATGTT **AGCCCGTTTTTATGACCAACG GGGTTCACAGTGAGCTGTGT** 

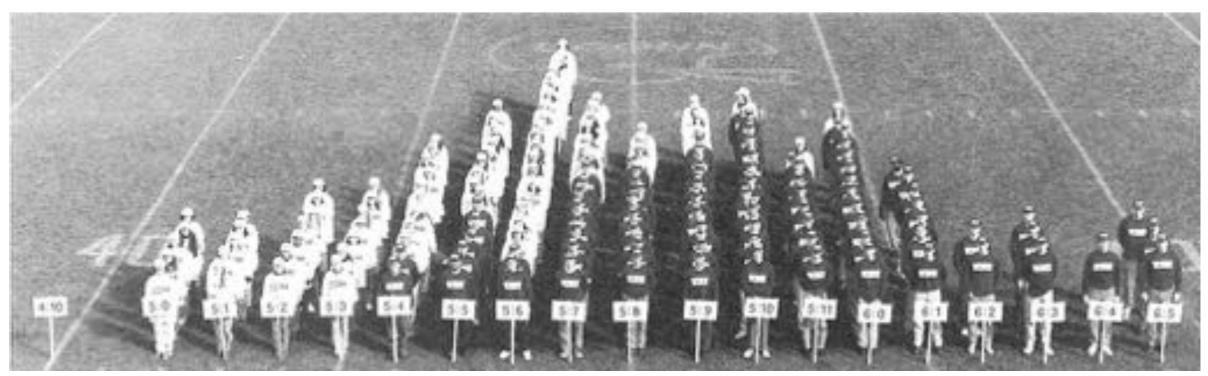


**University of Connecticut, 1997** 

CAGCGATAGGCTTTAATGTT AGCCCGTTTGATGACCAACG GGGTTCACAGTGAGCTGTGT

CAGCGATAGGCTTTAATGTT **AGCCCGTTTGATGACCAACG** GGGTTCACAGTGAGCTGTGT

## For traits controlled by many genes, we need many, many people

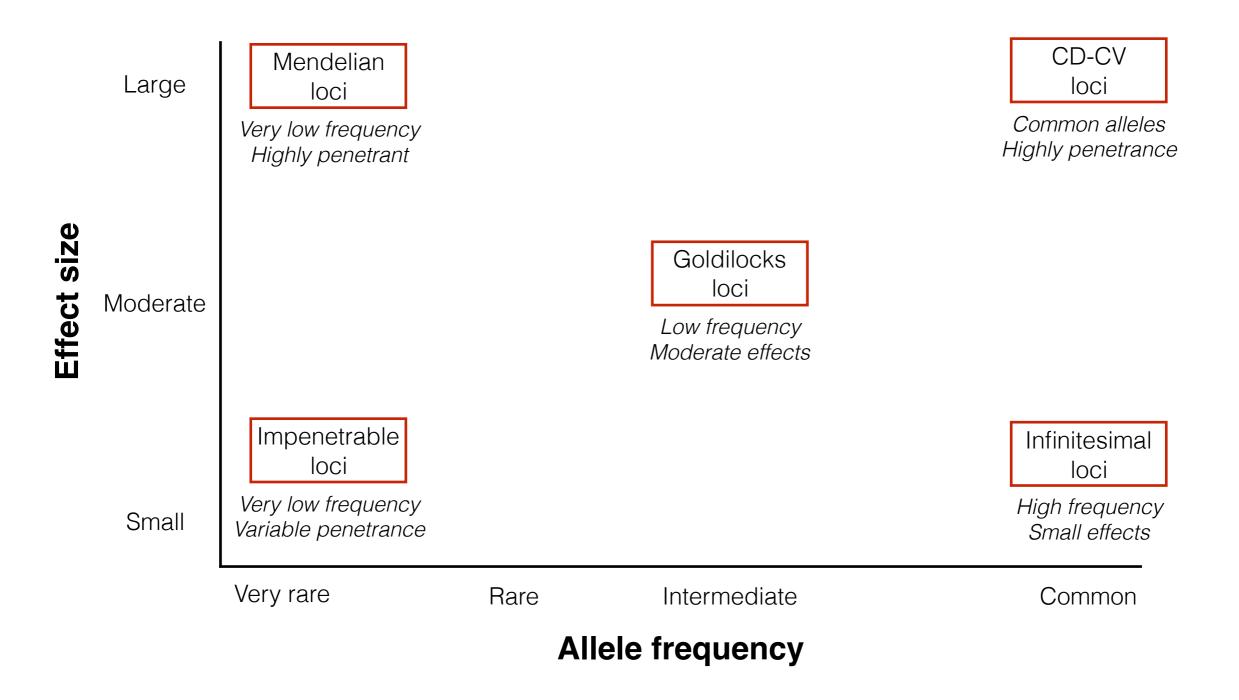


**University of Connecticut, 1997** 

Variation shared by lots of tall people and not shared by lots of short people

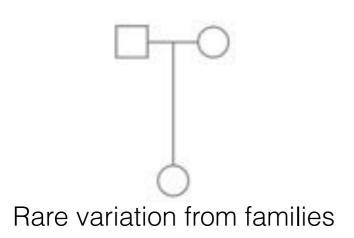
~250,000 people genotyped led to 20% of height differences explained

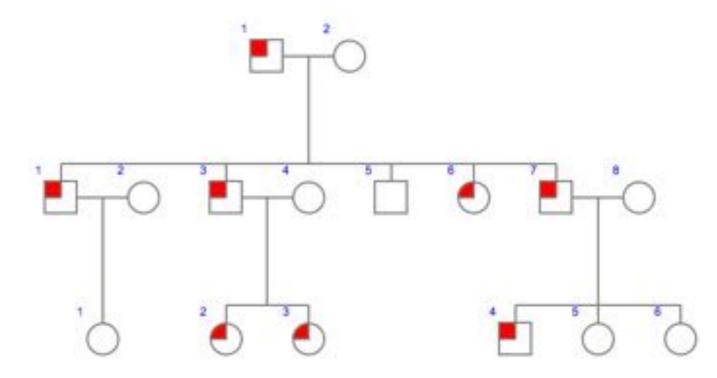
#### The spectrum of how variation contributes to disease



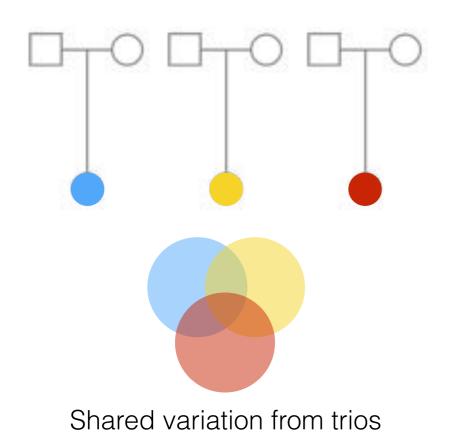
How do we find the variants that cause rare disease?

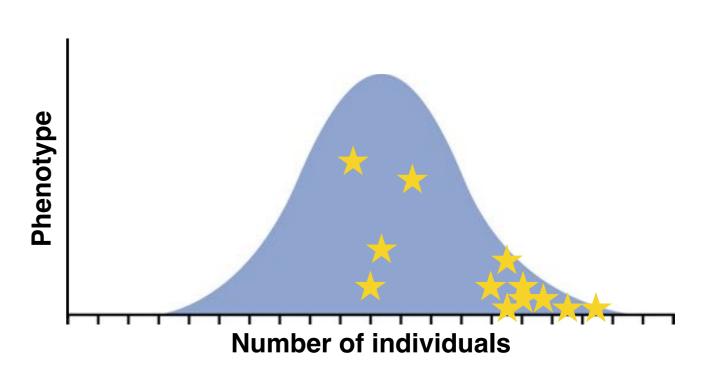
### Strategies to identify disease-causing rare variants





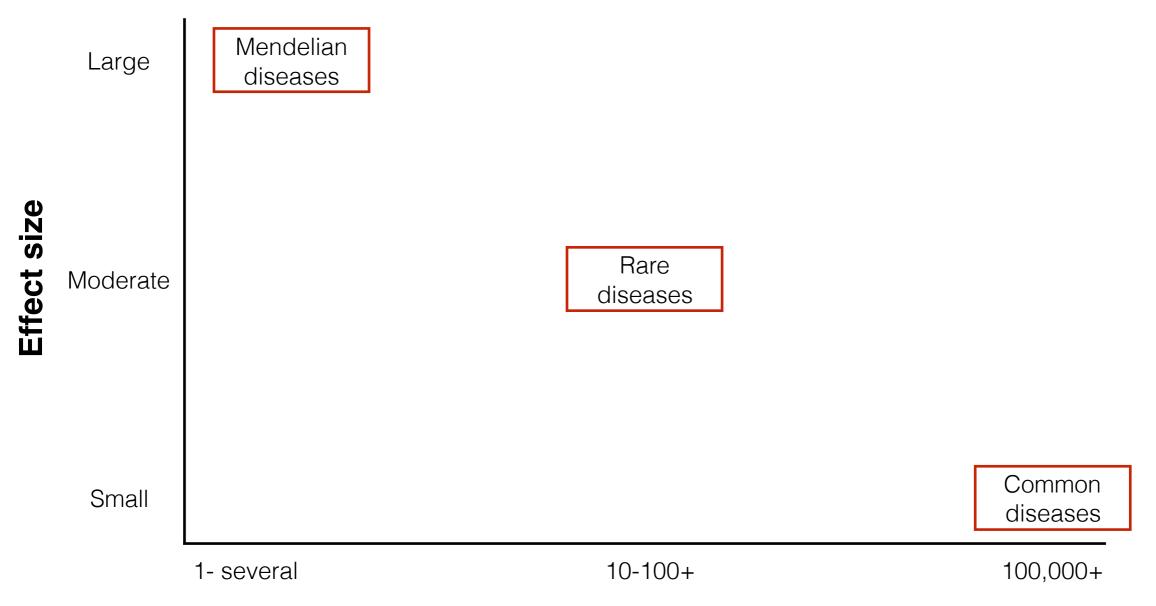
Shared variants from affected individuals in large families





Shared variants from many people

#### How can sequencing help us to identify these variants?



Number of individuals that need to be sequenced

#### Why can't we read the genome?



We don't know all the variants.

We don't know which ones affect phenotype.

Single genes don't cause most disease or control most traits

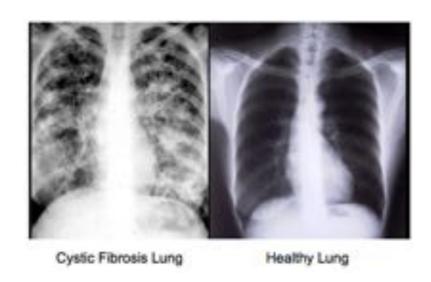
The human genome is big.

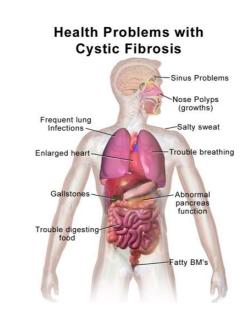
Phenotypes are highly variable.

### What is precision medicine?



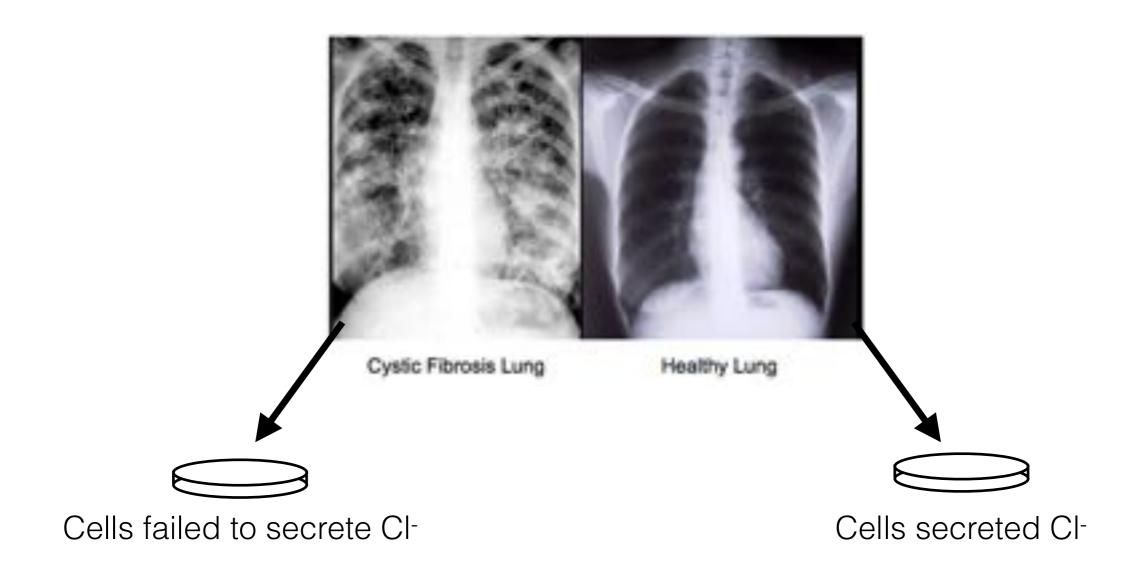
#### What about cystic fibrosis?



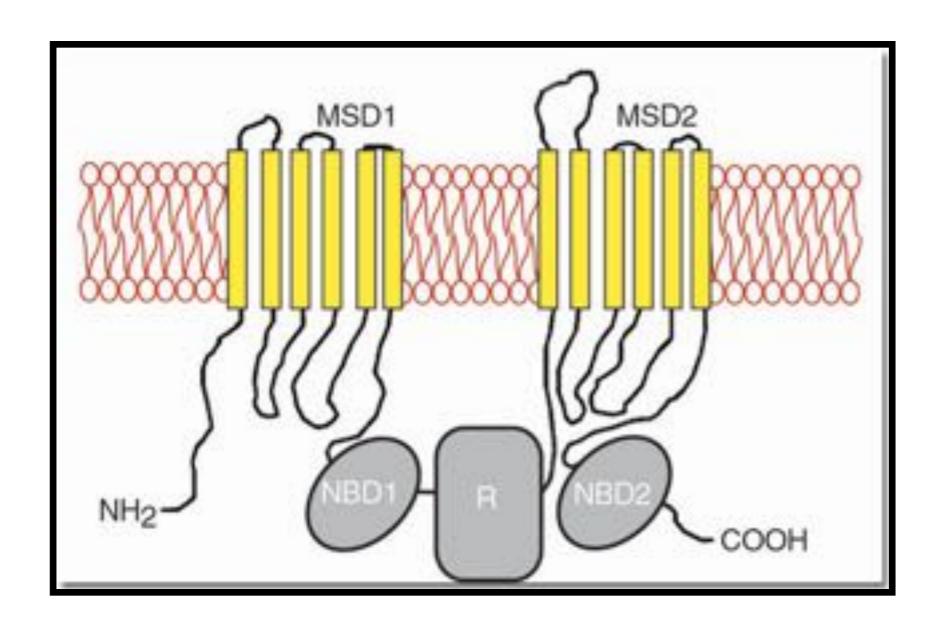


- 1. Autosomal recessive disorder
- 2. Not caused by chromosomal aberrations or meiotic NDJ
- 3. Mapped to chromosome 7
- 4. Mutations in CF gene are null or hypomorphs
- 5. Compound heterozygosity (failure to complement) is common
- 6. No known epistatic genes to CF gene
- 7. Genetic enhancers are known (immune modulatory genes)
- 8. No genetic suppressors are known yet.

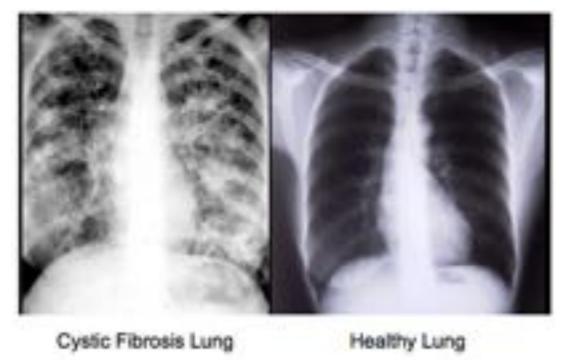
#### Cell autonomy of CF mutation was shown in the 1960's



## Cystic fibrosis was mapped to the chloride ion channel CFTR



# Cystic fibrosis is caused by a mix of common and rare variants



Rare disease affects 1/10,000 live births

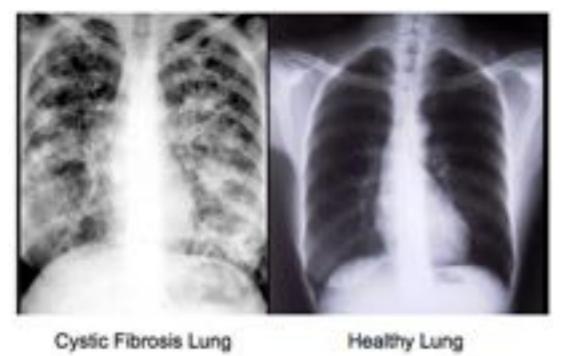
Caused by mutations in the CFTR gene

Selection removes homozygotes from population

Hardy-Weinberg equilibrium tell us that 1/50 people are carriers

### Why is eugenics (or genome editing) next to impossible?

# Cystic fibrosis is caused by a mix of common and rare variants

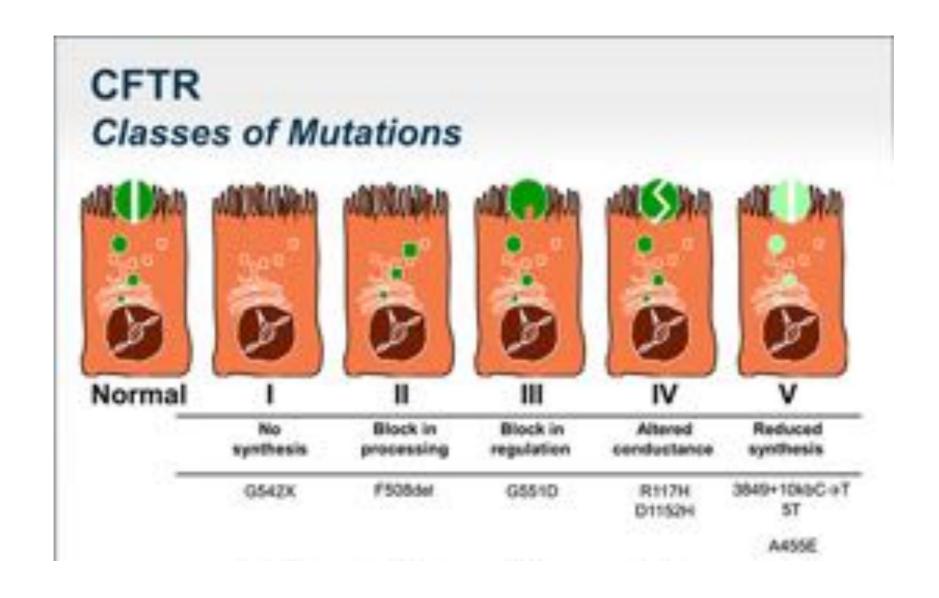


50% of all cases have the same allele  $\Delta$ F508

Over 1000 other mutations are known

Compound heterozygotes found often

Genetic heterogeneity



## What do you think the phenotypes of these mutations are?

#### We are living in the human genetics renaissance



Under \$1000 genome
Rare disease sequencing for Mendelian disorders
Family genetics
Fetal testing from sequence
Disease outbreaks and diagnosis
Drug response prediction
Cancer genome sequencing