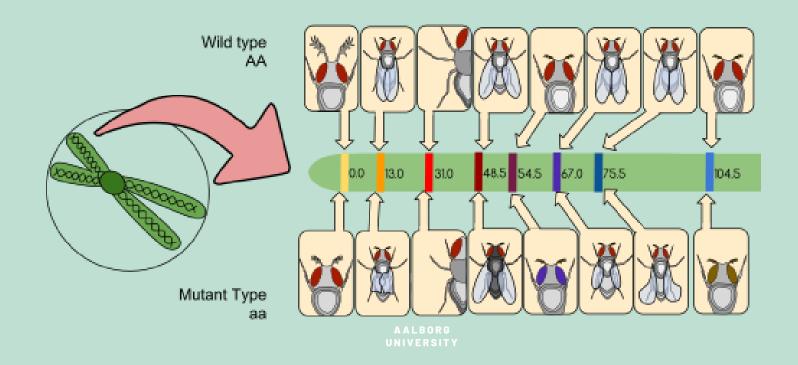
#### RISK ESTIMATION FROM PEDIGREES

#3

#### PALLE DUUN ROHDE

palledr@hst.aau.dk



### LETS GET STARTED

#1 Genetic variation and personalised medicine	#2 Population genomics	#3 Risk estimation from pedigrees	#4 Complex traits and quantitative genetics	#5 Estimation of genetic parameters	#6 Genome- wide association studies	#7 Risk estimation from genome wide data	#8 Somatic cancer genomics	#9 Germline cancer genomics	#10 Integrative genomics
5/2-25 [PDR]	7/2-25 [PDR]	12/2-25 [PDR]	27/2-25 [PDR]	6/3-25 [PDR]	17/3-25 [PDR]	24/3-25 [PDR]	31/3-25 [AKN PDR]	7/4-25 [AKN PDR]	16/4-25 [PLM PDR]



#### LINKAGE AND GENETIC TESTING

#### Today we will talk about

- Risk calculations [Bayes theorem]
- Linkage
- Molecular tools for diagnosis;
  - direct vs indirect test

Moved to session 4



#### OUTLINE

```
08:15 - 09:00
                Recap + Exercises E15 [Part III]
09:00 - 09:10
                Break
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                Lecture 2 [Linkage]
11:15 – 11:55
                Break + Exercises 2 [4-8]
11:55 – 12:00
                Reflection
```



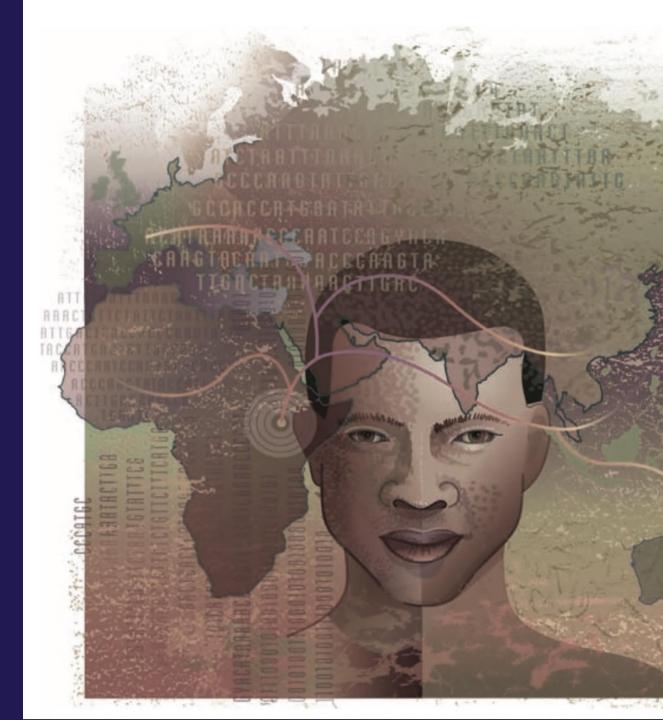
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## SHORT RECAP FROM LAST

- Population genomics
  - ❖ The study of the distribution of hereditary variation across time and space in species and populations [Bugge, F. 2008]





# WHY IS POPULATION GENETICS IMPORTANT?

Population genomics tackles questions about genetic diversity

0.08% of nucleotide base pair in human DNA vary among individuals

Humans and orangutans are ~97% similar

#### Why this little genetic diversity?

- Selection favour functionally different DNA alleles in different circumstances
- DNA variation is tolerated when the alleles of a gene are functionally equivalent

The aim of population genomics is to model the dynamics of evolutionary change within and between populations.



#### THE FOUR FORCES

Mutation Copying errors during DNA replication, which introduce new alleles into the population

Natural selection differential transmission of alleles into the next generation due to the consequences of functional differences on an individual's survival and reproductive success

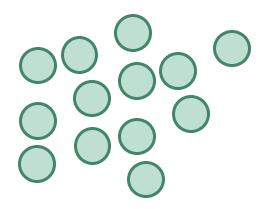
Genetic drift differential transmission of alleles into the next generation as a result of random sampling, and has the greatest potential impact in small populations

Gene flow spreads alleles from one population into another via migration, making them more genetically similar to each other, and countering genetic differentiation by drift



#### **GENETIC VARIATION**

#### IN A SINGLE LOCUS



A random sample of individuals of whom we know the genotype of in a single locus

Co-dominant (i.e., we can observe both alleles in heterozygote individuals).

The population is polymorph in one autosomal locus with the alleles A and a, and three genotypes, AA, Aa and aa.

The frequencies of the alleles are denoted p and q, and the frequency of the genotypes are  $P_{AA}$ ,  $P_{Aa}$  and  $P_{aa}$ .

**Note!** There is a difference between  $\widehat{\mathbf{p}}$  and  $\mathbf{p}$ . The hat  $(\widehat{\phantom{p}})$  indicates that it is an estimate  $(\widehat{\mathbf{p}})$  over the true parameter  $(\mathbf{p})$ . For simplicity we ignore  $\widehat{\phantom{p}}$ .



### **FREQUENCIES**

Genotype	AA	Aa	aa	$\sum$
Count	$n_{AA}$	$n_{Aa}$	$n_{aa}$	N
Genotype frequency	$n_{AA}/N$	$n_{Aa}/N$	n <sub>aa</sub> /N	1

Allele frequency of A: 
$$p = (2 \times n_{AA} + n_{Aa})/2 \times N$$
 We are counting the alleles Allele frequency of a:  $q = (2 \times n_{aa} + n_{Aa})/2 \times N$ 

Check! 
$$p + q = 1$$
 All alleles are counted



#### **HARDY-WEINBERG LAW**

So far, we have computed allele frequencies by counting genotypes

Genotype frequencies → Allele frequencies

Under certain conditions, we can compute genotype frequencies in the next generation

Allele frequencies → Genotype frequencies

However, that requires some assumptions.



#### THE NEUTRAL POPULATION

- Random mating
- No selection
- No genetic drift (infinite population size)
- No migration
- No mutation

Hardy-Weinberg principal describes the relationship allele- and genotype frequencies in the neutral population



#### HARDY-WEINBERG EQUILIBRIUM

After one generation under HW assumptions the genotype frequencies will be in equilibrium:

Genotype

AA

Aa

aa

Frequency

 $p^2$ 

2pq

 $q^2$ 

Allele frequencies do not change!

		Males		
		<b>A</b> (p)	a (q)	
les	<b>A</b> (p)	p <sup>2</sup>	pq	
Females	a (q)	pq	$q^2$	



### MODULATION OF FREQUENCIES

**Mutation** introduces new alleles

diversity within populations

**Migration** introduces new alleles

diversity within populations diversity between populations

**Genetic drift** loss of alleles

diversity within populations

diversity between populations

Selection removes harmfull alles

diversity within populations diversity between populations

Non-random mating do not change alleles, but change genotype frequencies



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## MONOGENIC RISK ASSESSMENT

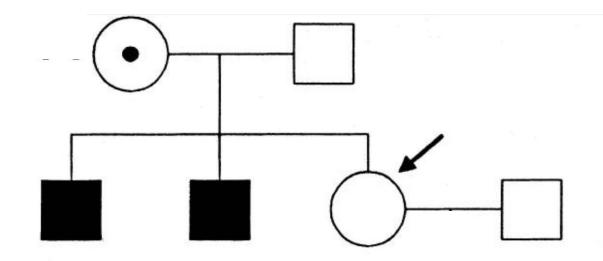




#### MONOGENIC INHERITANCE



What type of inheritance is seen in the pedigree?

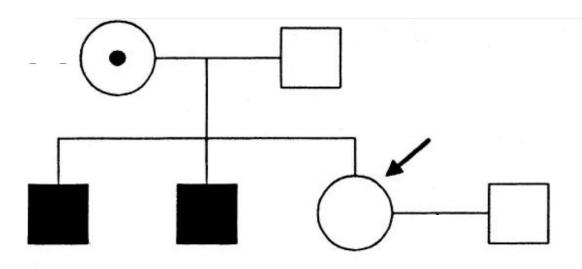




### MONOGENIC INHERITANCE



What type of inheritance is seen in the pedigree?



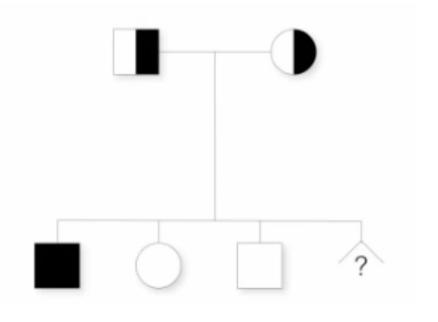
What is the probability that II.3 is a carrier?



#### **AUTOSOMAL RECESSIVE I**

Both parents must be carriers (Aa) to get an affected child.

Their risk of getting a fourth affected child is =  $\frac{1}{4}$  [draw punnet square]





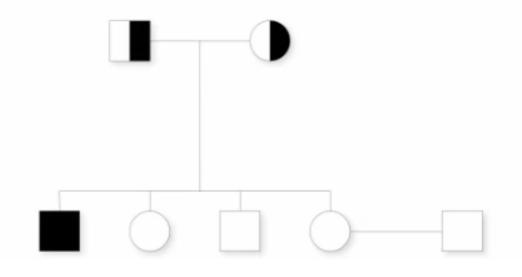
#### **AUTOSOMAL RECESSIVE II**

The risk of II.4 being a carrier must be 2/3 [we know that she is not affected, thus se cannot be aa].

The risk of II.5 of being a carrier (given no family history of the disease) is the population risk.

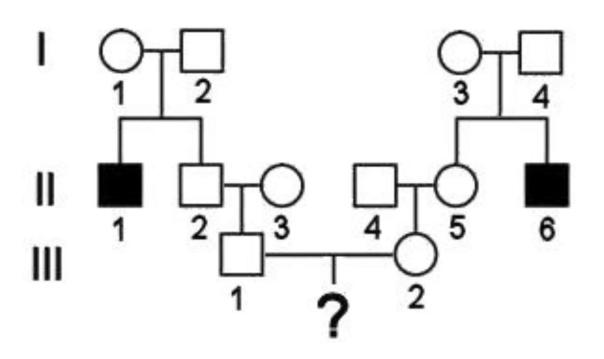
For an AR the population frequency could be 1/25.

The risk the couple will get an affected child is then:  $\frac{1}{2}$ \*2/3 \*1/25\*1/2= 1/150





#### **AUTOSOMAL RECESSIVE III**

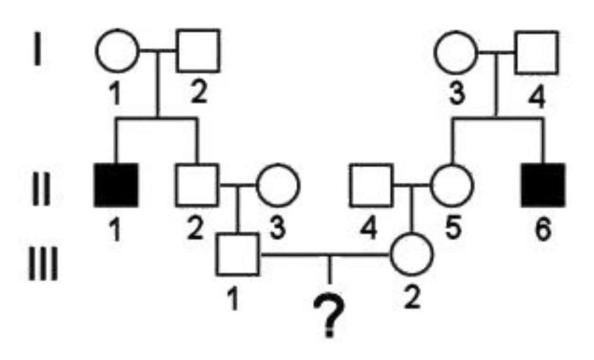


# What is the probability that IV.1 is affected (aa)?

- 1. IV.1 must inherit an a-allele from III.1 and III.2
- 2. II.1 has the genotype aa, thus I.1 and I.2 most both have the genotype Aa.
- 3. II.2 has the dominant phenotype, thus he must have at least one A. The probability that the other is a, is 2/3 (he is not affected).
- 4. II.3 is from outside the family, thus we assume she is AA.
- 5. III.1 has the dominant phenotype (A-). The probability that he is Aa is the probability that II.2 is Aa and passes a to his son, ½ \* 2/3 = 1/3
- 6. The probability that III.2 is Aa is  $\frac{1}{2}$  \*  $\frac{2}{3}$  =  $\frac{1}{3}$
- 7. The probability that IV.1 is aa  $\frac{1}{4}$  \*  $\frac{1}{3}$  \*  $\frac{1}{3}$  =  $\frac{1}{36}$



#### **AUTOSOMAL RECESSIVE IV**

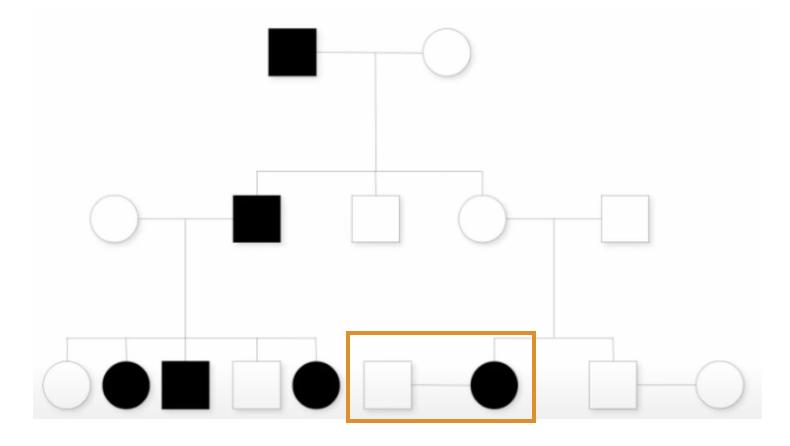


# What is the probability that IV.1 is a carrier (Aa)?

- 1. The probaility that III.1 is Aa  $\frac{1}{2}$  \*  $\frac{2}{3}$  =  $\frac{1}{3}$
- 2. The probability that III.2 is Aa is  $\frac{1}{2}$  \*  $\frac{2}{3}$  =  $\frac{1}{3}$
- 3. The probability that IV.1 is Aa 2/4 \*1/3 \*1/3 = 1/18



#### RISK WITH INCOMPLETE PENETRANCE



Assuming 80% penetrance

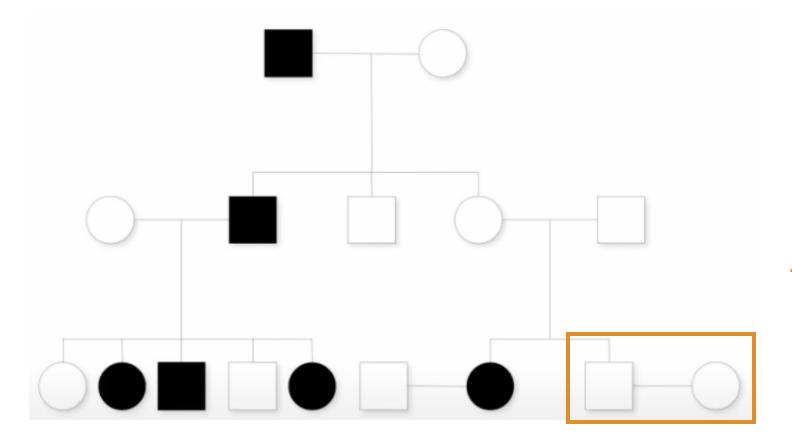
→ 80% probability that an
individual that inherrent the
mutation will show the phenotype

This couples risk of getting an affected child:

$$\frac{1}{2}$$
 \* 0.8 = 0.4



#### RISK WITH INCOMPLETE PENETRANCE



Assuming 80% penetrance

→ 80% probability that an
individual that inherrent the
mutation will show the phenotype

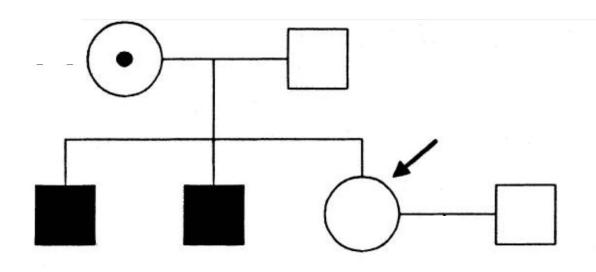
This couples risk of getting an affected child: 1/2\*0.2\*1/2\*0.8=0.04

Fathers risk of being a carrier Childs risk of being affected



### MONOGENIC INHERITANCE

#### WITH ADDITIONAL INFORMATION



What type of inheritance is seen in the pedigree?

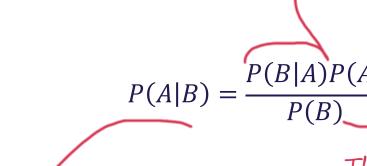
What is the probability that II.3 is a carrier?



#### **BAYES' THEOREM**

The probability of B given that A is true.

→ Likelihood of A given a fixed B



The probability of A given that B is true.

→ The posterior probability of A given B

The probabilities of observing A and B, respectively without any conditions.

> prior probability



# BAYES' THEOREM IN GENETICS

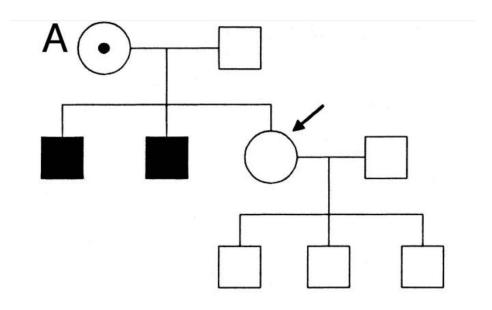
Hypothesis	H: Is a carrier	H: Is not a carrier	
Prior probability	<b>x</b> 1	x2	
Conditional probability	y1	y2	
Joint probability	x1*y1	X2*y2	
Posterior probability	j.prob1 / (j.prob1+j.prob2)	j.prob2 / (j.prob1+j.prob2)	

Used when additional information becomes available.



# BAYES' THEOREM IN GENETICS

What is the probability that II.3 is a carrier now?



Hypothesis	H: Is a carrier	H: Is not a carrier	
Prior probability	1/2	1/2	
Conditional probability (three normal sons)	<b>½^3=1/8</b>	1	
Joint probability	1/16	1/2	
Posterior probability	(1/16)/(1/16+1/2) =1/9	(1/2)/(1/16+1/2) =8/9	



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# Make 4 groups

Find Group-exercise on Github

Group 1 and 3 works with 'Bayesian Analysis Using Pedigree Information'

Group 2 and 4 works with 'Bayesian Analysis Using Genetic

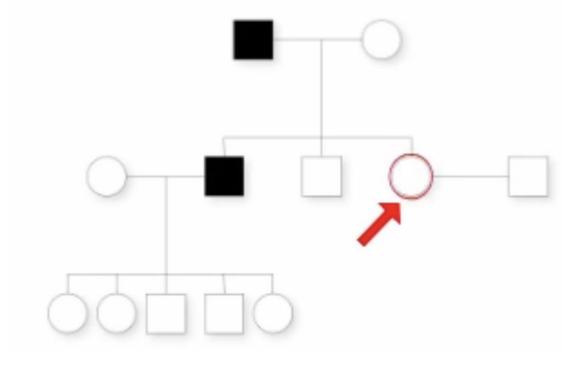
Test Results'

25 min to read and understand your example

15 min to explain example to new group

# AGE-DEPENDENT PENETRANCE

Hypothesis	H: Is a carrier	H: Is not a carrier
Prior probability	0.5	0.5
Conditional probability (unaffected at age 30)	0.7	1
Joint probability	0.35	0.5
Posterior probability	$   \begin{array}{r}     0.35 \\     \hline     0.35 + 0.5 \\     = 0.41   \end{array} $	$\frac{0.5}{0.35 + 0.5} = 0.59$

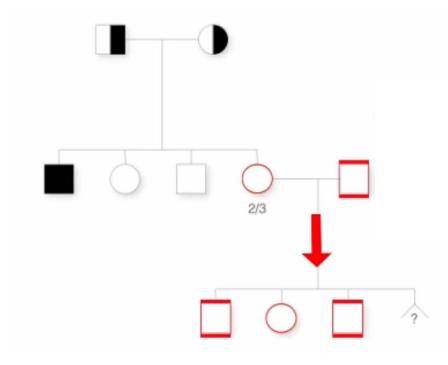




#### **AUTOSOMAL RECESSIVE**

New evidence, the couple has three unaffected children.

Hypothesis	Couple at risk	Couple not at risk
Prior probability	2/3*1/25=0.026	1-0.026=0.974
Conditional probability (three unaffected kids)	³⁄₄^3=0.42	1
Joint probability	0.01	0.974
Posterior probability	$\frac{0.01}{0.01 + 0.974}$	$\frac{0.974}{0.01 + 0.974}$



Probability that they are at risk (vs not at risk) and having three unaffected kids



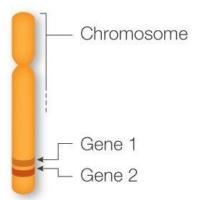
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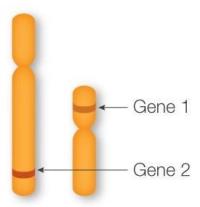


### LINKAGE

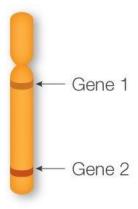
When alleles travel together



#### Linked



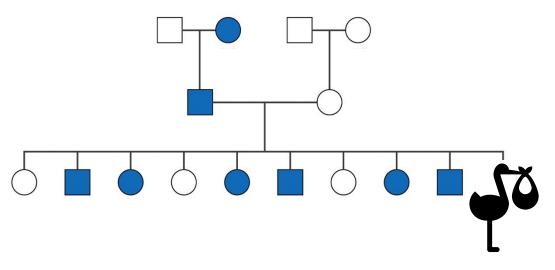
#### Not Linked



Not Linked



#### **OVERALL WE AIM TO**



We need to understand how variants segregate in families first

- Carrier status / prenatal testing
- Prognosis
- Guided treatment
- ❖ Genetic counselling you can help even without knowing the mutation



## INDEPENDENT ASSORTMENT

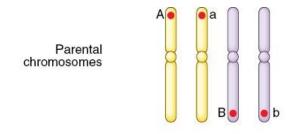


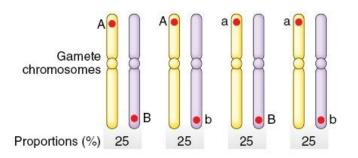
# genloci blomsterfarve frøfarve 1 2 3 blomstens bælgens placering udseende bælgfarve plantehøjde 5 6 7 frøets udseende

#### Mendels 2. law

Alleles at different loci segregate independently during meiosis.

Only true for independent loci







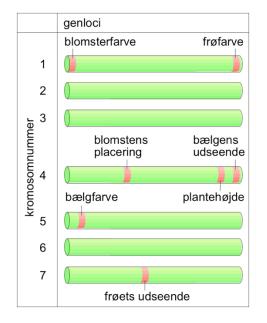
#### INDEPENDENT ASSORTMENT



#### Mendels 2. law

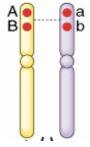
Alleles at different loci segregate independently during meiosis.

Only true for independent loci.



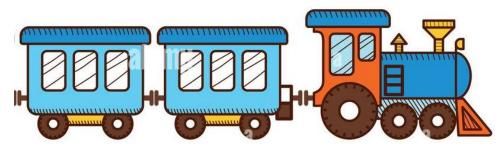
If – *in contrast* – loci are close, alleles do no longer segregate independently.

When this happens – we say the loci are *linked* 





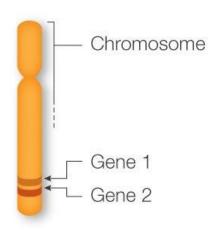
# LINKAGE



Linked train wagons



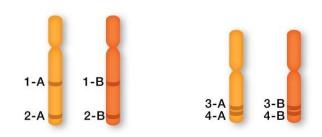
Linked prisoners

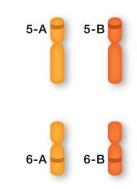


Linked loci (Physical proximity)



#### LINKED LOCI





Two **loci** are linked when the **alleles** segregate together more often than by chance



Linked or unlinked?

Gene 1 and Gene 2

Gene 3 and Gene 4

Gene 5 and Gene 6

What about the other combinations?



The **prisoners**are linked when
they are seen
together more
often than by
chance

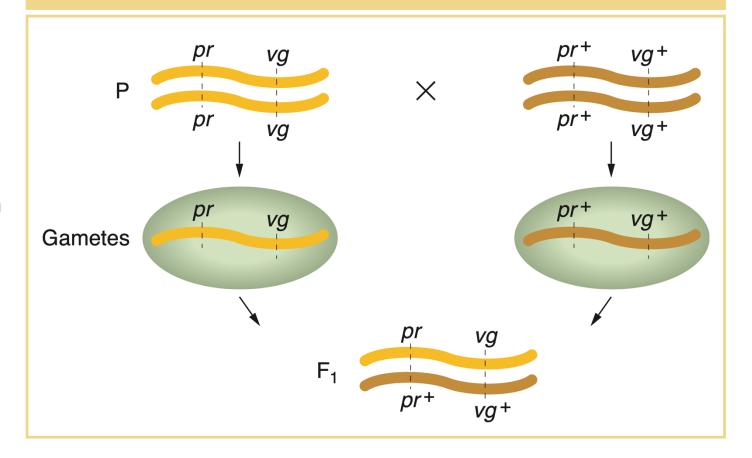


# LINKED GENES

#### **DURING MEIOSIS**

**HAPLOTYPE** = haploid genotype combination of genetic information on a single chromosome.

#### Linked alleles tend to be inherited together





#### LINKED GENES

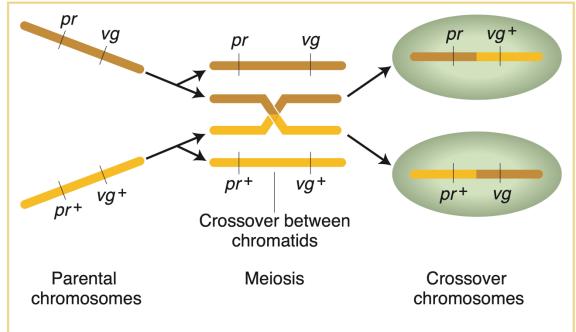
#### **DURING MEIOSIS**

$$\frac{pr^+ \quad vg^+}{pr \quad vg}$$

Genes segregate independently if they are on different chromosomes, but can be linked if they are on the same chromosome

At complete linkage only parental gametes are seen (non-crossover; NCO).

If crossover happens between 2 (or more) genes both parental and recombinant gametes are seen.



## **CROSSOVERS**

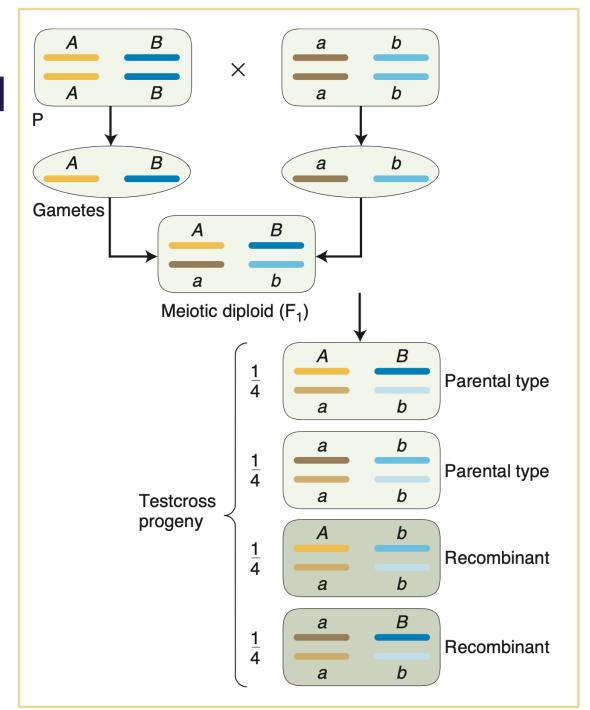
#### BETWEEN NON-SISTER CHROMATIDES

	Meiotic chrom	osomes	Meiotic pro	ducts	
Meioses with no crossover between the genes	A A a	В	A B A B a b	Parental	
		B b			Parental Parental Parental
	Meioses with a crossover between the genes	A A a	В	A B	
B b			A	Becombinar	
			a	В	Recombinar
а		b	a	b	Parental



# FREE RECOMBINATION

When genes are located on different chromosomes (= free recombination) equal amount of each gamete type is produced.

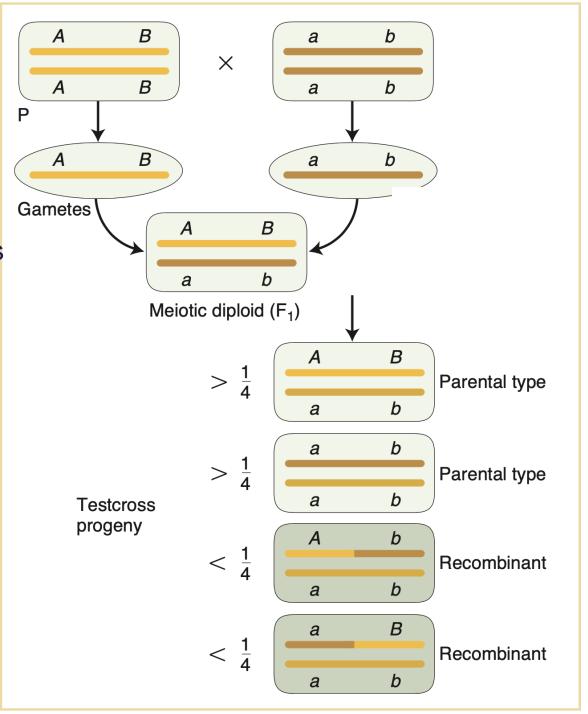




#### LINKAGE RECOMBINATION

Maximum 50% of the gametes can be recombinants

If 50% of the gametes are recombinants then there will be two parental and two recombinant gametes.



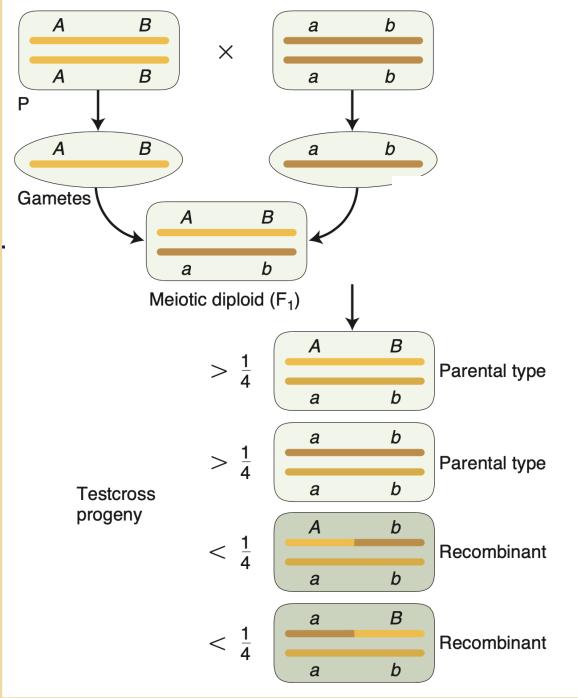


#### LINKAGE RECOMBINATION

Genes on the same chromosome is a linkage group.

The proportion of recombinant gametes depend on the distance between the two genes.

Short distance – small probability for crossovers.





## RECOMBINATION FREQUENCY

#### A MEASURE OF DISTANCE

One map unit (mu) is defined as 1% recombination between two genes (RF=0.01).

Map unit is also known as centimorgan (cM) [named after Thomas Hunt Morgan]

Genetic distance (cM) = (number of recombinant chromosomes / total chromosomes)  $\times 100$ 

Disrtance between 
$$A - B = \frac{9+11}{100} = 0.2$$
; 20cM



#### **GENETIC DISTANCE**

- Distance between two loci (two markers) is measured as a probability (cM)
- Two loci could be
  - Two neutral loci; Locus1 and Locus2
  - One neutral and one disease-causing locus; Locus1 and a disease locus

0 cM= no recombination (loci completely linked; always segregate together)

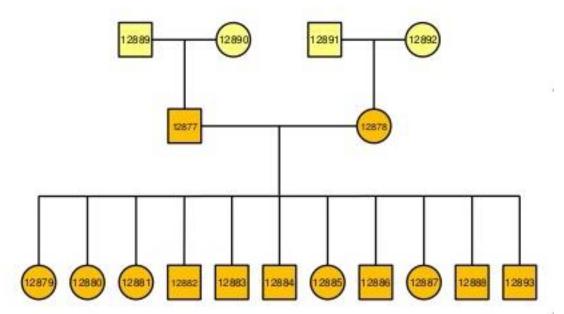
10 cM = 10% probability of crossover in each meiosis

50 cM = 50% probability (the two loci are completely unlinked, as if loci were on different chromosomes)



# MANY MEIOSIS' ARE NEEDED TO BUILD A MAP

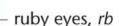
Large families (CEPH families, had many children)
Pick any two loci. Count parental and recombinant haplotypes.



Took systematically all loci – one pair at a time Build a map



scute bristles, sc white eyes, w



crossveinless wings, cv

- singed bristles, sn

lozenge eyes, Iz

vermilion eyes, v

sable body, s

scalloped wings, sd

Bar eyes, B

- carnation eyes, car

- little fly, If











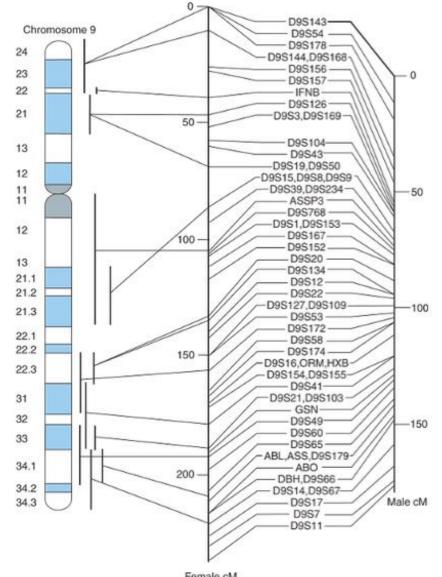
## THE MAP OF THE HUMAN GENOME

All loci got a position in the human genetic map.

However, it turned out, that the female map was longer than the male map.

#### Why?!

- difference in amount of meiosis between sexes;
- higher recombination frequency among females (increase distance)



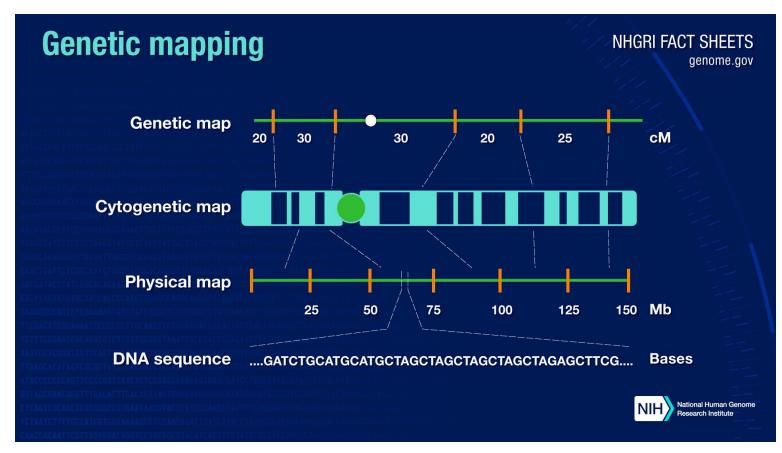


#### TWO TYPES OF MAPS

With genome sequencing of the human genome a physical map was generated.

Genes appear closer together when there is low recombination frequency between two genes.

Genes appear farther apart when there is high recombination frequency between two genes.





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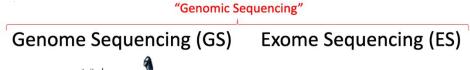
#### OUTLINE

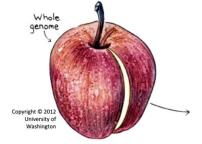
```
08:15 - 09:00
               Recap + Exercises E15 [Part III]
09:00 - 09:10
               Break
09:10 - 09:30
               Lecture 1 [Genetic risk assessment]
09:30 - 10:00
10:00 - 10:40
               Break + Exercises 1 [1-3]
10:40 – 11:15 Lecture 2 [Linkage]
11:15 – 11:55
               Break + Exercises 2 [4-8]
11:55 – 12:00
               Reflection
```



# CLINICAL APPLICATION OF NEXT-GENERATION SEQUENCING (NGS)

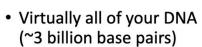
- A general disadvantage is that often multiple different assays are needed – NGS solves this
  - e.g., in the case of genetic heterogeneity
- NGS can be used on disorders that have variable penetrance







Exome = 1%



- Includes known disease genes, novel genes, and noncoding regions
- ~21,000 protein coding genes (~30 million base pairs)
- Includes known disease genes and novel genes

Panel/ Targeted Sequencing



- Typically <100 genes</li>
- Genes are selected for well-established role in disease

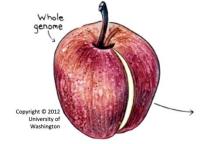


# CLINICAL APPLICATION OF NEXT-GENERATION SEQUENCING (NGS)

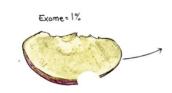
- In principle all variants detected
- Relatively low cost (3000 kr)
- Things that took 20 years can now be done in few days
- Produces lots of data
- Can be hard to find the real pathogenic variant, if not seen before
- Mutations, that we were not looking for (e.g., BRCA1 mutation) – incidental finding

"Genomic Sequencing"

Genome Sequencing (GS) Exome Sequencing (ES)



- Virtually all of your DNA (~3 billion base pairs)
- Includes known disease genes, novel genes, and noncoding regions



- ~21,000 protein coding genes (~30 million base pairs)
- Includes known disease genes and novel genes

Panel/ Targeted Sequencing



- Typically <100 genes</li>
- Genes are selected for well-established role in disease



#### **VARIANTS ON INTEREST?**

- ❖ ACMG guidelines [American College of Medical Genetics and Genomics]
  - ❖ Put all variants into any of these categories by looking at the variants impact on the protein (missense, synonymous, nonsens)



Likely Benign Variant of Uncertain Significance

Like Pathog

#### **Clinically relevant**

Likely Pathogenic

Pathogenic

- Rare
- Severe protein impact
- Reported in other individuals with consistent phenotypes
- Segregates with disease in families
- De novo occurrences
- Functional studies supportive of an impact

- Population frequency > disease prevalence
- No impact on amino acid sequence
- Changes amino acid at a poorly conserved position
- Inheritance not supportive of a disease causing role

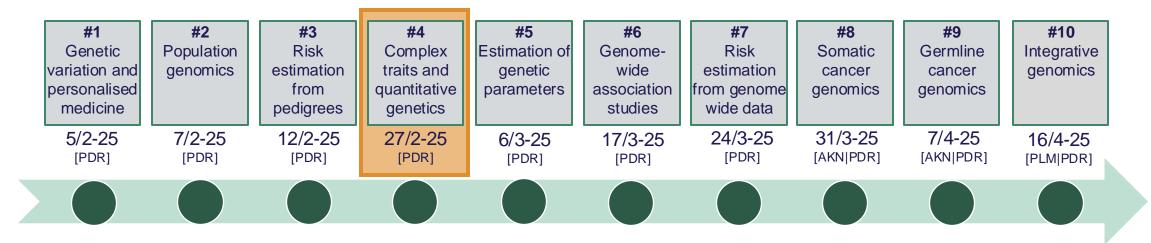


# REFLECT TOGETHER 2 AND 2



- What will you remember from today?
- -What did you find difficult?
  -What do you need to follow-up on?
  - Feedback / Questions to PDR?

#### **NEXT TIME**



Molecular tools for diagnosis;direct vs indirect test

Moved to session 4

