

Complex Disorders

9/26/13

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Lecture Outline

- Trust worthy resources for medical genetics
- Brief review of basic inheritance patterns
- Genetics of common disorders
- Genome-wide association studies
- Searches for missing heritability

Trust worthy internet resources

- **Genetics Home Reference**

ghr.nlm.nih.gov

- **Gene Reviews**

www.ncbi.nlm.nih.gov/sites/GeneTests/review

- **One Mendelian Inheritance of Man**

www.ncbi.nlm.nih.gov/omim



Genetics Home Reference

Your Guide to Understanding Genetic Conditions

[About](#) [Site Map](#) [Contact Us](#)

A service of the U.S. National Library of Medicine®

What's New

- abdominal wall defect
- familial isolated hyperparathyroidism
- chronic granulomatous disease
- More...

Newborn Screening

Detecting genetic disorders for early treatment

In the Spotlight

- Learning Activities
- Information Rx
- What is direct-to-consumer genetic testing?

Genetic Disorders A to Z and related genes and chromosomes

Genetic Conditions

The genetics of more than 750 health conditions, diseases, and syndromes.



Genes

More than 1,000 genes, health effects of genetic differences, and gene families.



Chromosomes

Chromosomes, mitochondrial DNA, and associated health conditions.



Concepts & Tools

for understanding human genetics

Handbook

Learn about mutations, inheritance, genetic counseling, genetic testing, genomic research, and more.



Glossary

Medical and genetics definitions.



Resources

Links to other genetics information and organizations.



Genetics Home Reference provides consumer-friendly information about the effects of genetic variations on human health.

The resources on this site should not be used as a substitute for professional medical care or advice. Users seeking information about a personal genetic disease, syndrome, or condition should consult with a qualified healthcare professional. See [How can I find a genetics professional in my area?](#) in the Handbook.

ghr.nlm.nih.gov/



GeneReviews

GeneReviews are expert-authored, peer-reviewed, current disease descriptions that apply genetic testing to the diagnosis, management, and genetic counseling of patients and families with specific inherited conditions. [Read more...](#)

About Search Options

Search GeneReviews and Laboratory Directory

Disease Name	contains	<input type="text"/>	<input type="button" value="Go"/>
Gene Symbol	begins with	<input type="text"/>	<input type="button" value="Go"/>
Protein Name	begins with	<input type="text"/>	<input type="button" value="Go"/>

Search GeneReviews

Author Last Name	begins with	<input type="text"/>	<input type="button" value="Go"/>
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Enter a search term in any field above and select applicable button. Or browse Titles, Overviews, or Authors at right.

Click here to reset all search fields:

Browse GeneReviews

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www.ncbi.nlm.nih.gov/sites/GeneTests/review

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OMIM

OMIM is a comprehensive, authoritative compendium of human genes and genetic phenotypes that is freely available and updated daily. OMIM is authored and edited at the McKusick-Nathans Institute of Genetic Medicine, Johns Hopkins University School of Medicine, under the direction of Dr. Ada Hamosh. Its official home is omim.org.

Using OMIM

- [Getting Started](#)
- [FAQ](#)

OMIM tools

- [OMIM API](#)

Related Resources

- [ClinVar](#)
- [Gene](#)
- [GTR](#)
- [MedGen](#)

www.ncbi.nlm.nih.gov/omim

Continuum of genetic disease risks



Genetic diseases
(cystic fibrosis)

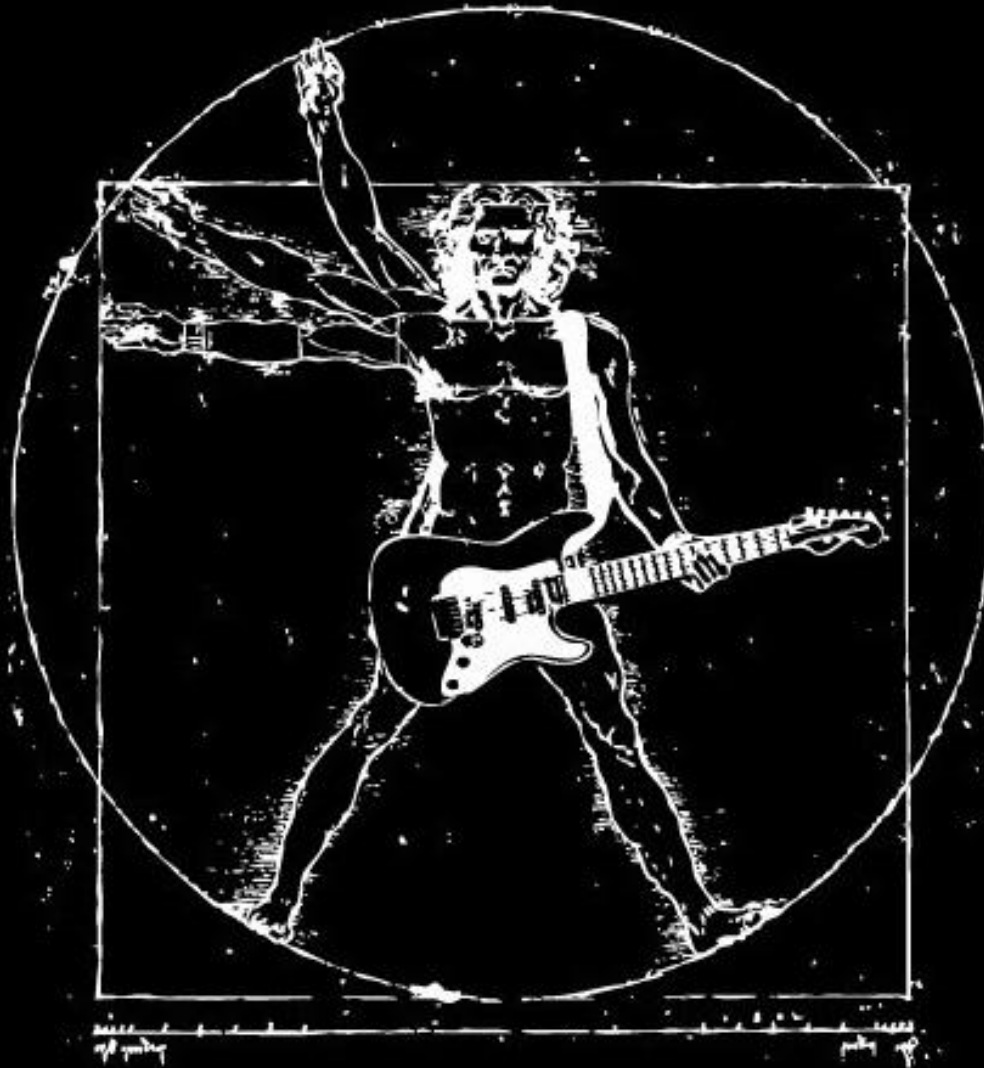
Common diseases
(diabetes, most cancers)

Infectious diseases
(chicken pox)

Mainly caused by
genetic change

Mainly caused by
genes & environment

Mainly caused by
environment



HEAVY MENDEL

Mendelian Traits and Diseases

- Monogenic (single gene) traits inherited in a comparatively simple pattern
- Involve genetic variation present in the nuclear genome
- >4,000 diseases with Mendelian inheritance patterns



Gregor Mendel
1822 – 1884

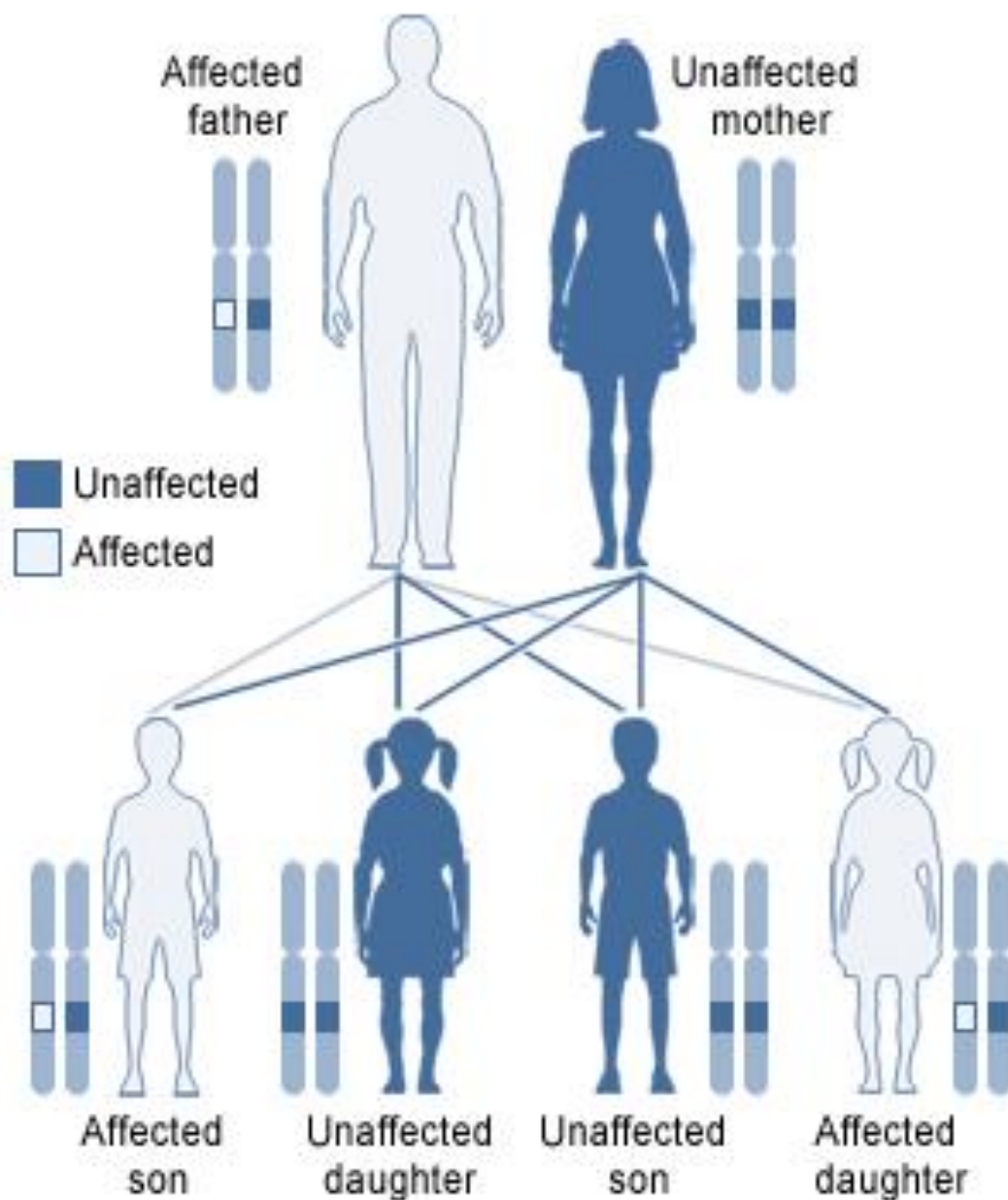
GIVE PEAS A CHANCE



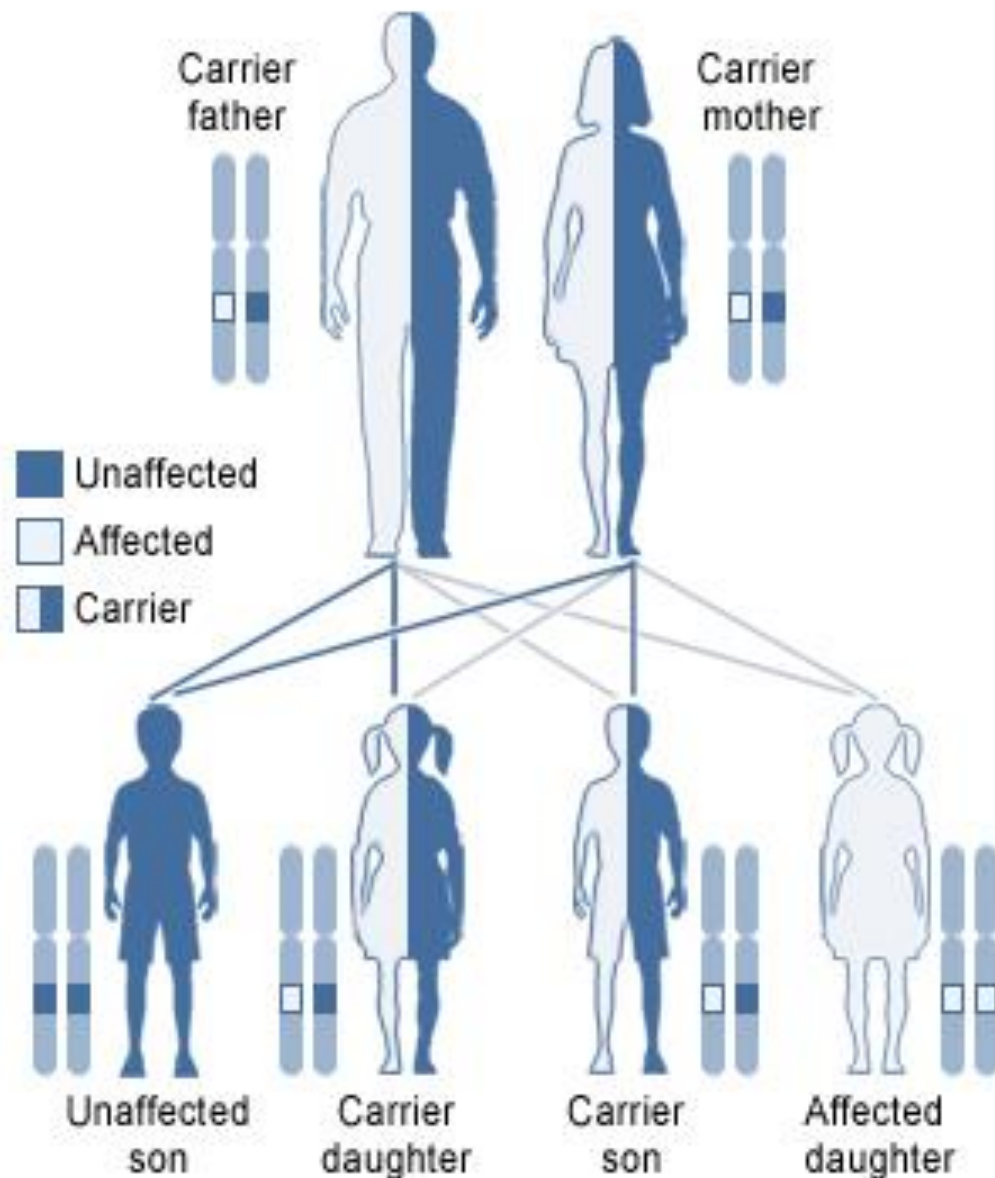
Mendelian Inheritance Patterns

- Autosomal
- X-linked
- Y-linked (exceptionally rare)
- Dominant
- Recessive

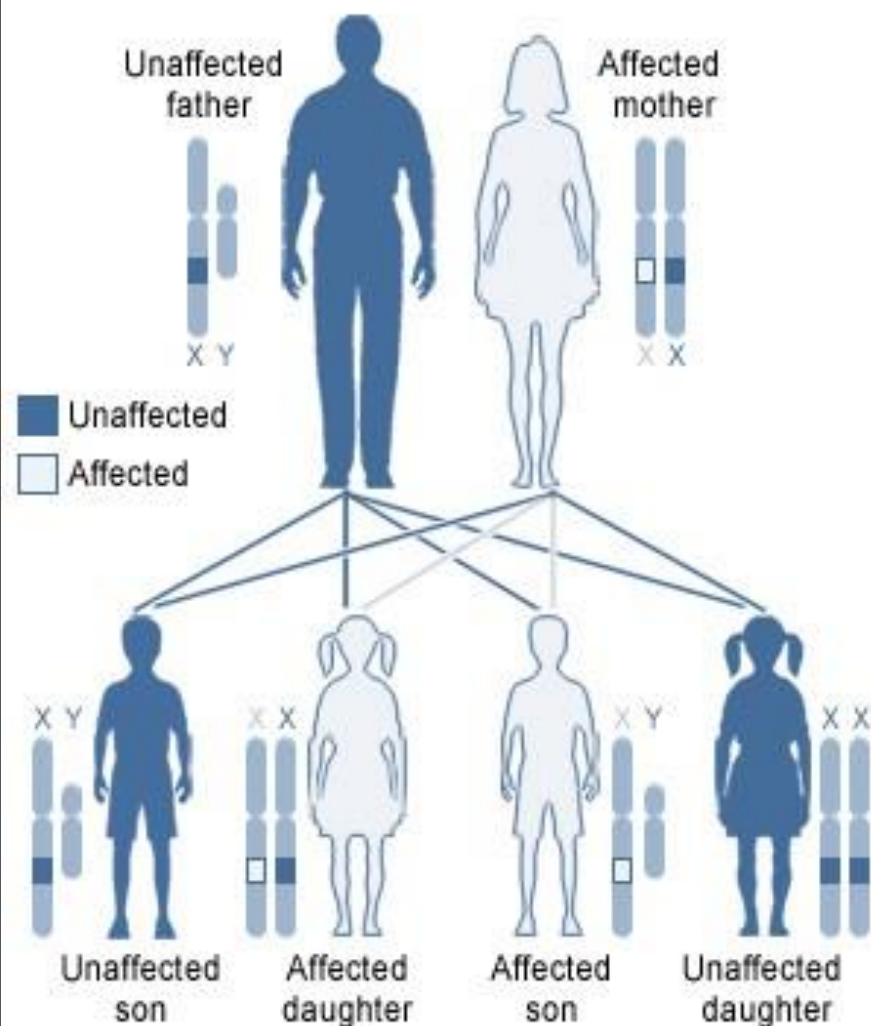
Autosomal dominant



Autosomal recessive

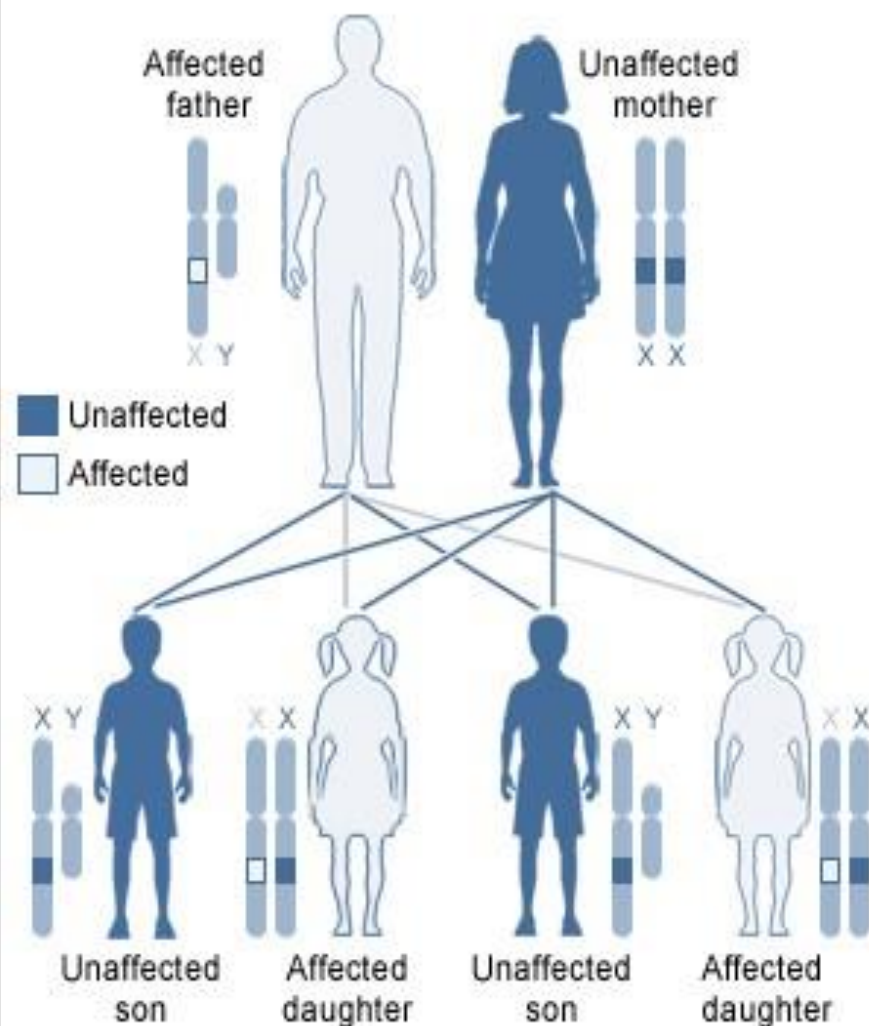


X-linked dominant, affected mother



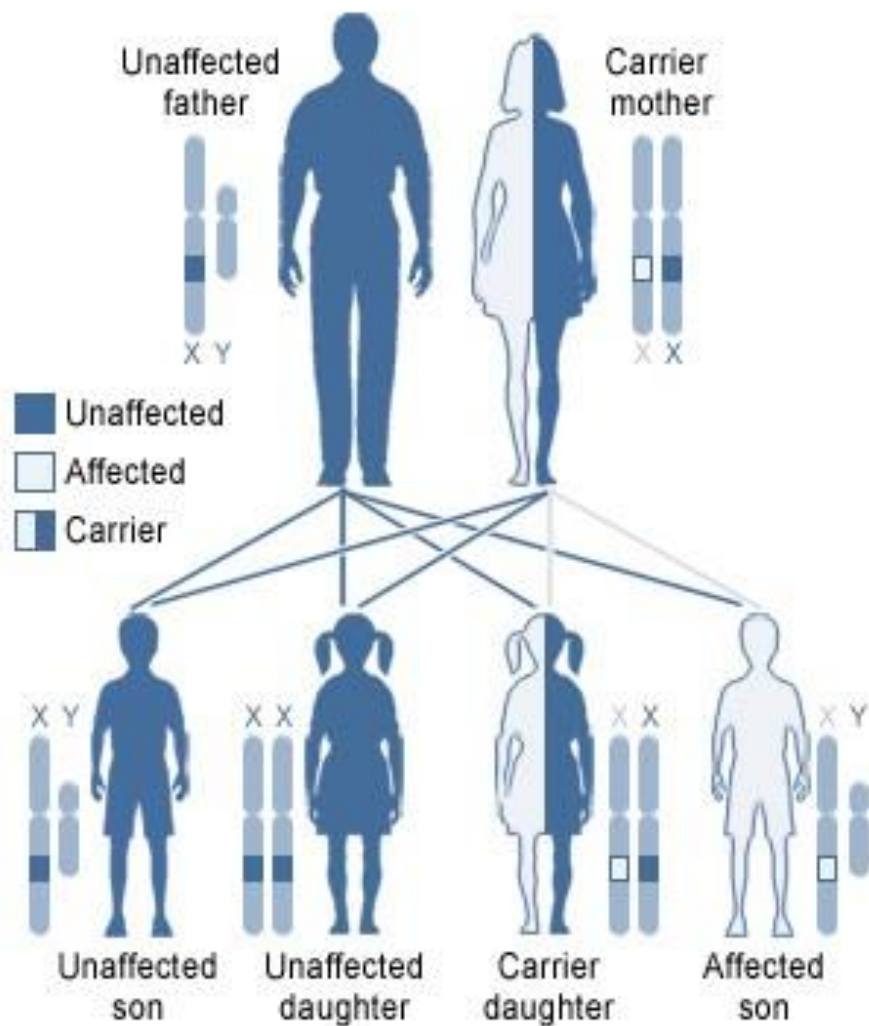
U.S. National Library of Medicine

X-linked dominant, affected father



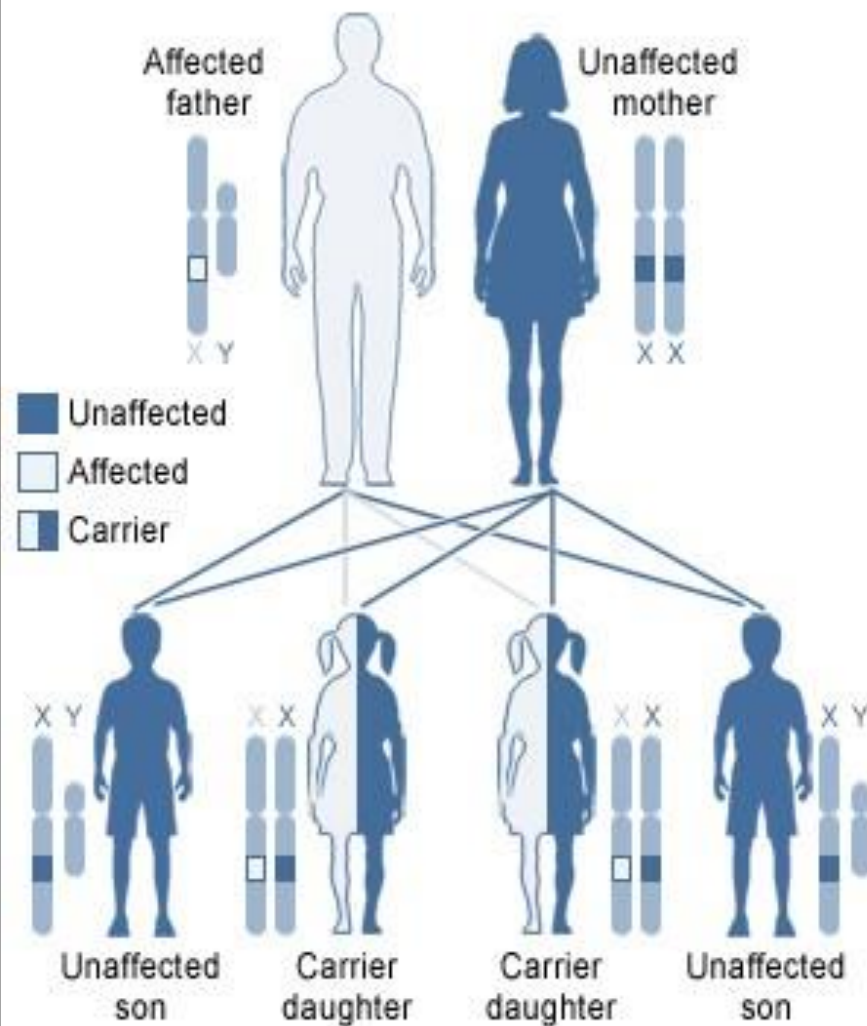
U.S. National Library of Medicine

X-linked recessive, carrier mother



U.S. National Library of Medicine

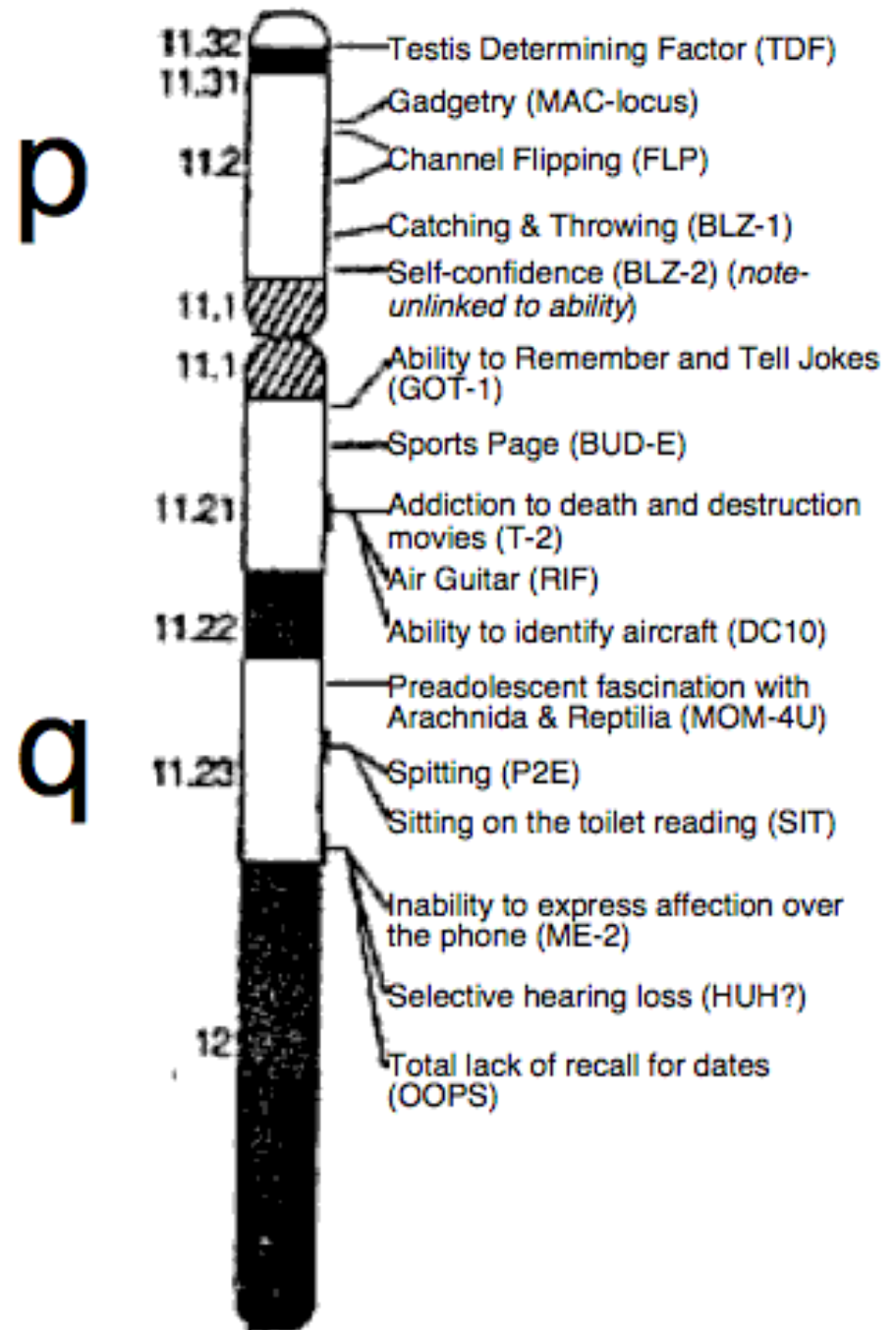
X-linked recessive, affected father



U.S. National Library of Medicine

Some genes on the
Y chromosome:

This explains a lot!!



Brief look at special cases

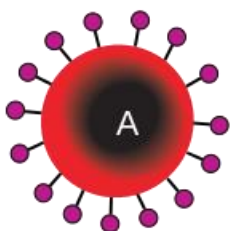
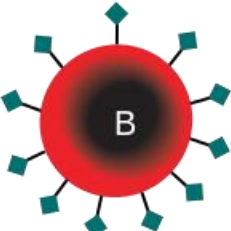
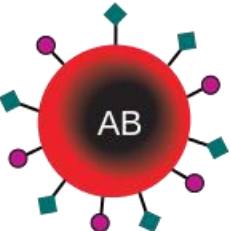
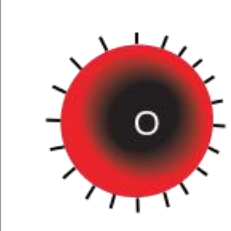


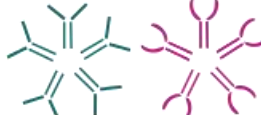







Codominant trait

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Inheritance of ABO Blood Group System

	Group A	Group B	Group AB	Group O
Red blood cell type				
Antibodies in Plasma	 Anti-B	 Anti-A	None	 Anti-A and Anti-B
Antigens in Red Blood Cell	 A antigen	 B antigen	 A and B antigens	None

en.wikipedia.org/wiki/ABO_blood_group_system

- *ABO* gene encodes a glycosyltransferase enzyme
- “A” allele: modifies the H antigen with D-galactose ●
- “B” allele: modifies the H antigen with N-acetylgalactosamine ◆
- “O” allele: no activity and thus H antigen is unmodified
- A and B alleles are codominant; O allele is recessive

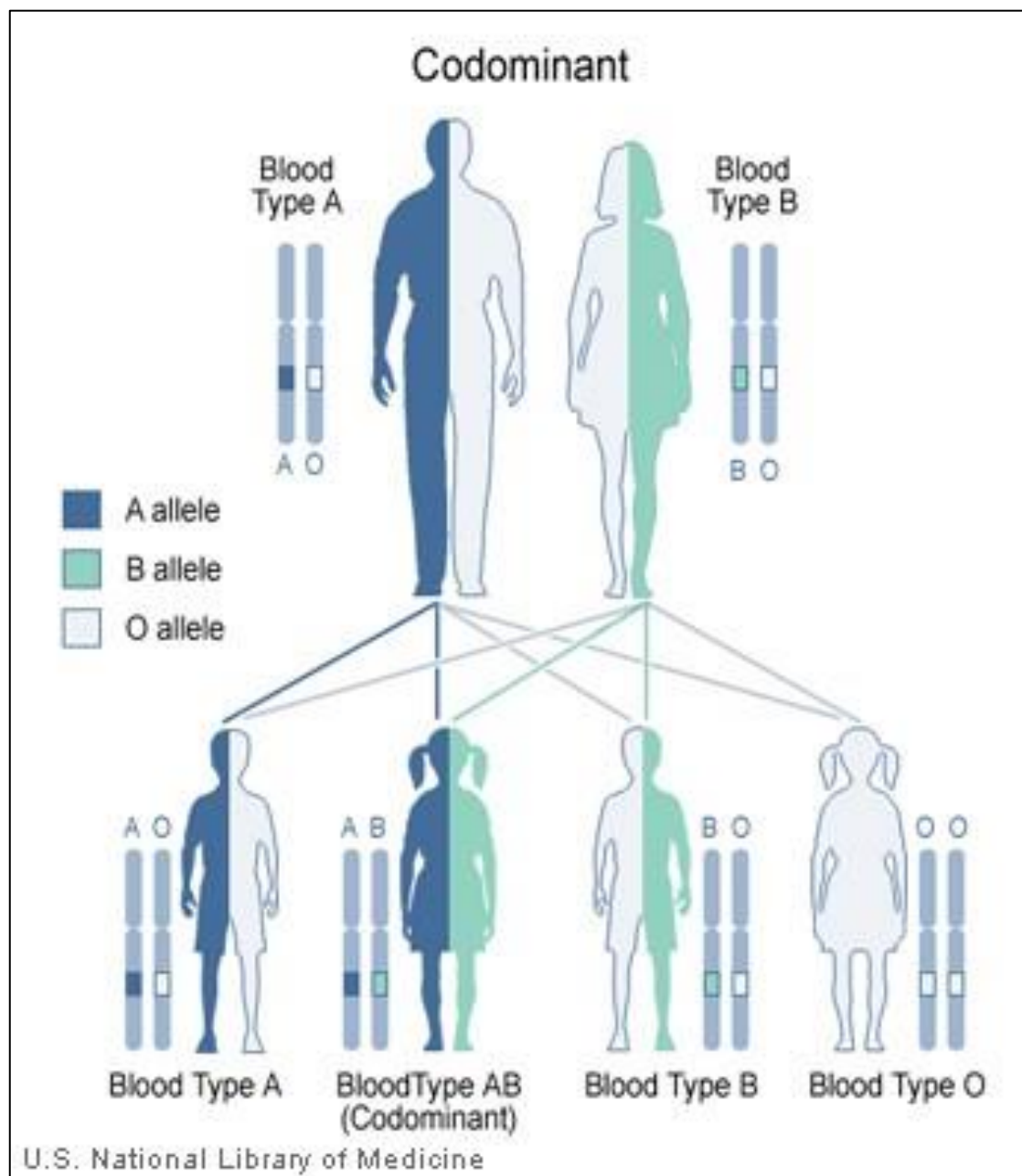


“A” allele
homozygous

“B” allele
homozygous

“AB” alleles
heterozygous

**Scenario demonstrating
codominant inheritance of A and B alleles**

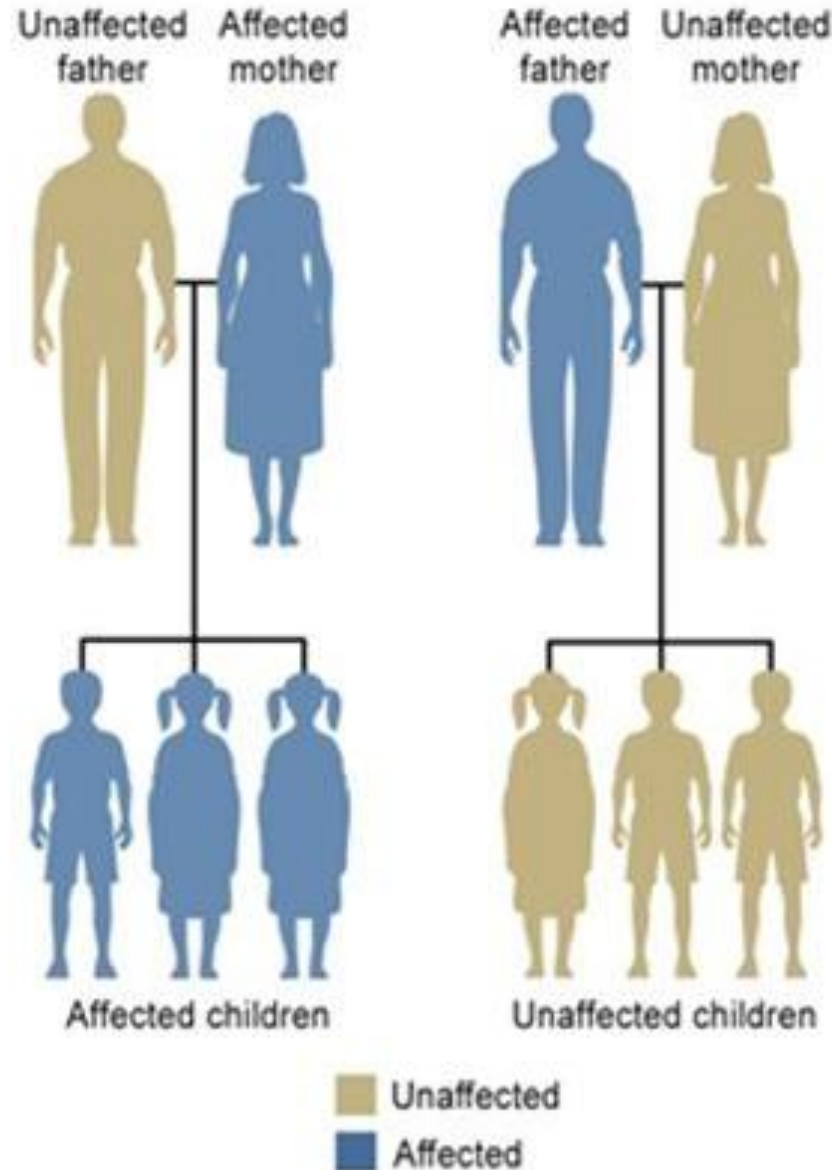


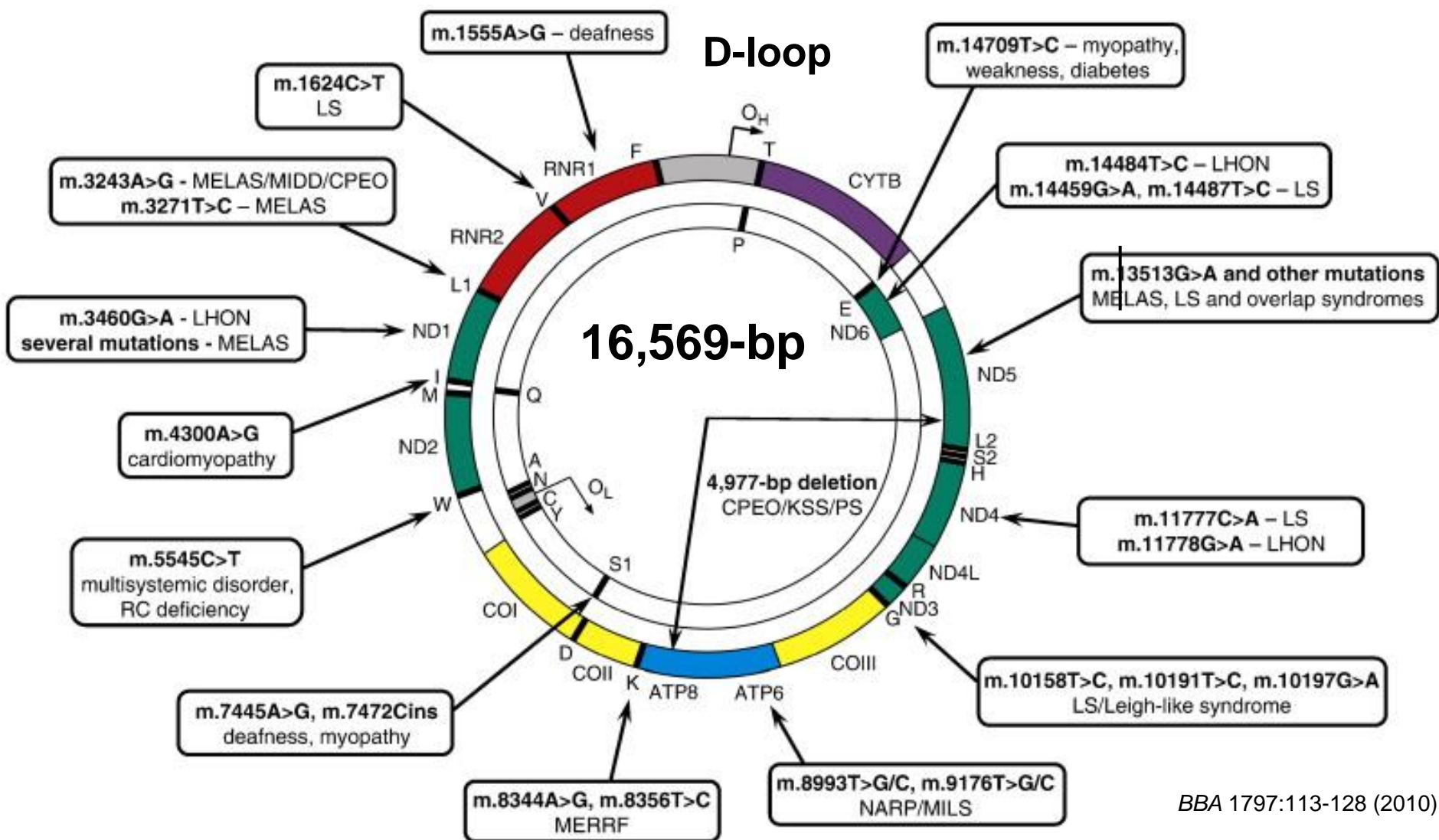
Example with heterozygous parents

Mitochondrial Disorders

- 44 diseases listed by the United Mitochondrial Disease Foundation <www.umdf.org>
- Caused by mutations in mtDNA or in genomic DNA
- Overall prevalence of ~1/8,800 individuals
- Maternal inheritance of mtDNA mutations
- Most of mitochondrial disorders with gDNA mutations are autosomal recessive
- Estimating relevance is complicated by disease complexity and difficulty in diagnosis

Mitochondrial Inheritance (Non-Mendelian)





BBA 1797:113-128 (2010)

- 37 genes: 13 protein coding (all respiratory complex)
- 22 transfer RNAs, 2 ribosomal RNAs
- D-loop contains origins of replication and transcription

Life is never simple ...

Oocyte maturation and mtDNA amplification

Fertilization

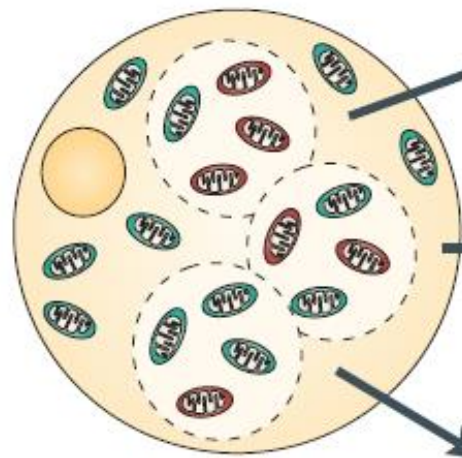
Homoplasmy

High mutation level: affected offspring

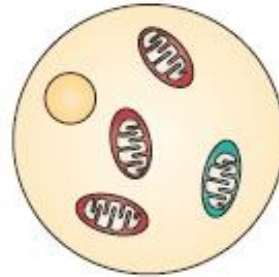
Intermediate mutation level: mildly affected offspring

Low mutation level: mildly affected offspring

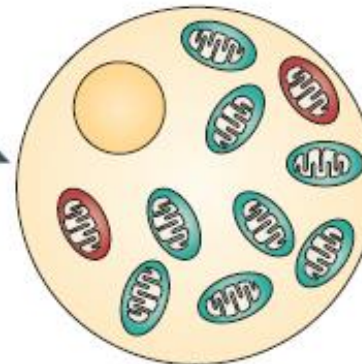
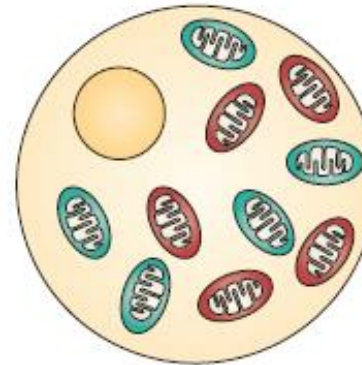
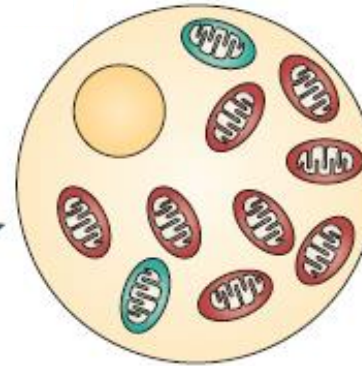
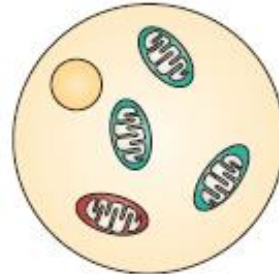
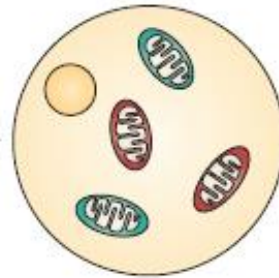
Heteroplasmy



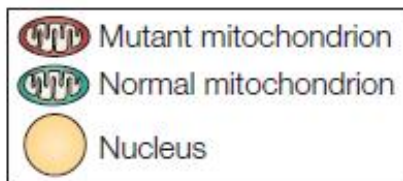
Primordial germ cell



Primary oocytes



Mature oocytes



Mitochondrial Heteroplasmy

- Varies among cells
- Mutation-dependent
- Tissue-dependent
- Threshold effect for each tissue
 - Influences disease severity
 - Influences age of onset

Heteroplasmy is common in MELAS

- Mitochondrial Myopathy, Encephalopathy, Lactic Acidosis and Stroke-Like episodes
- Prevalence still being determined
- 80% patients have A3243G mutation in tRNA-leu^{UUR}
- Many other reported phenotypes including diabetes and deafness occur due to this mutation

Homoplasmy in Leber Hereditary Optic Neuropathy (LHON)

- Likely the most common mitochondrial disorder
 - 1/30,000 – 1/50,000 in Europe
- Heteroplasmy in only 10-15% of patients
- Three common mutations in mtDNA complex I genes
- Rapid visual loss in second and third decades
 - Males are 4x more likely to go blind than females
- Low penetrance: ~50% of males and ~90% of females with LHON-causing mutations do not develop disease

Continuum of genetic disease risks



Genetic diseases
(cystic fibrosis)

Common diseases
(diabetes, most cancers)

Infectious diseases
(chicken pox)

Mainly caused by
genetic change

Mainly caused by
genes & environment

Mainly caused by
environment

Complex traits and disorders

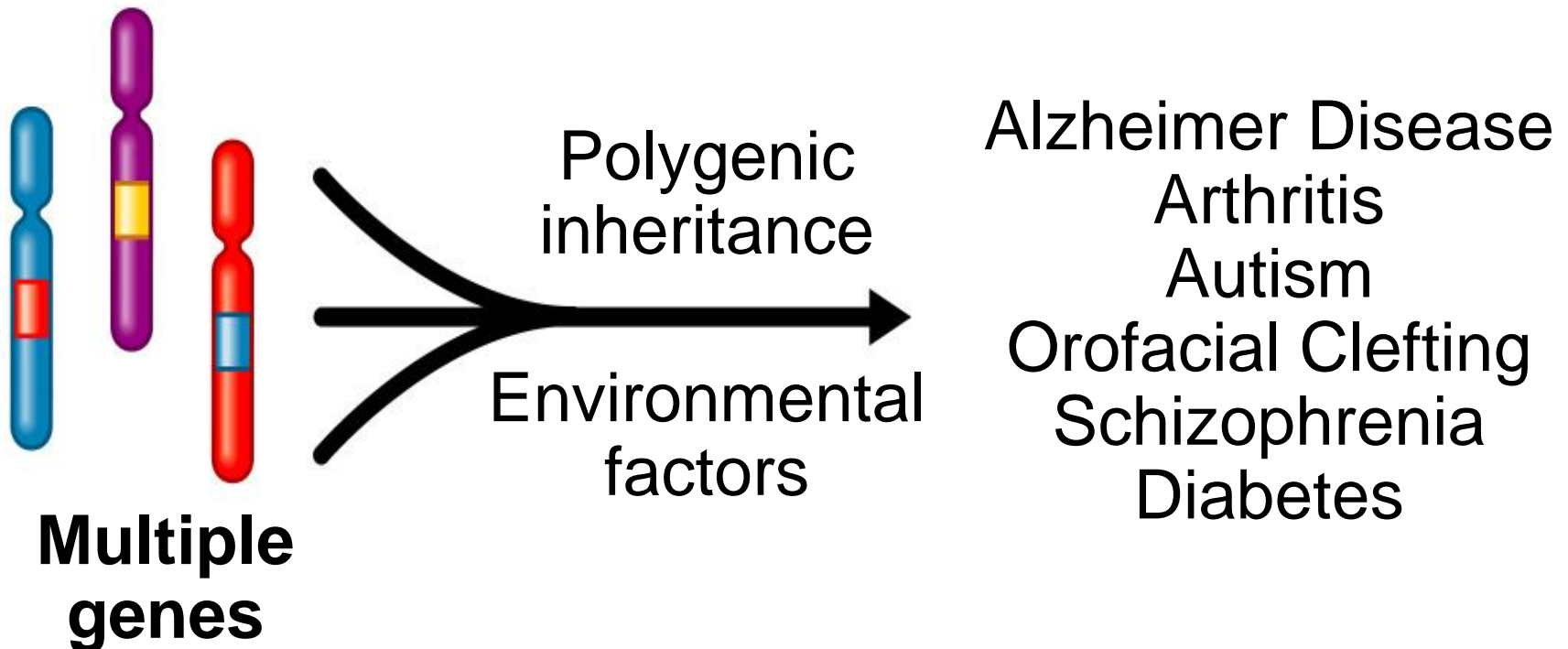
- Non-Mendelian inheritance patterns
- Familial aggregation (clustering in families), but no clearly defined pattern of transmission
- Complex disorders are present at higher population frequency than 'Mendelian' disorders

Frequency of Different Types of Genetic Diseases

Type (Disorders Due To ...)	Incidence at birth (per 1000)	Prevalence at Age 25 Years (per 1000)	Population Prevalence (per 1000)
Chromosome abnormalities	6	1.8	3.8
Single-gene mutations	10	3.6	20
Multifactorial inheritance	□ 50	□ 50	□ 600

Complex traits and disorders

- Can be polygenic: many loci, each with small effect, but no environmental factors (e.g. eye color)
- Can be multifactorial: dependent on a combination of genetic and environmental factors (most of the time)



Relative risk ratios (λ_r) of some common diseases

Disease	Relation	λ_r
Schizophrenia	Sibling	12
Autism	Sibling	150
Manic-depressive disorder	Sibling	7
Type 1 diabetes mellitus	Sibling	35
Crohn's disease	Sibling	25
Multiple sclerosis	Sibling	24

Prevalence of disease in
relatives of affected person

/

Prevalence of disease
in general population

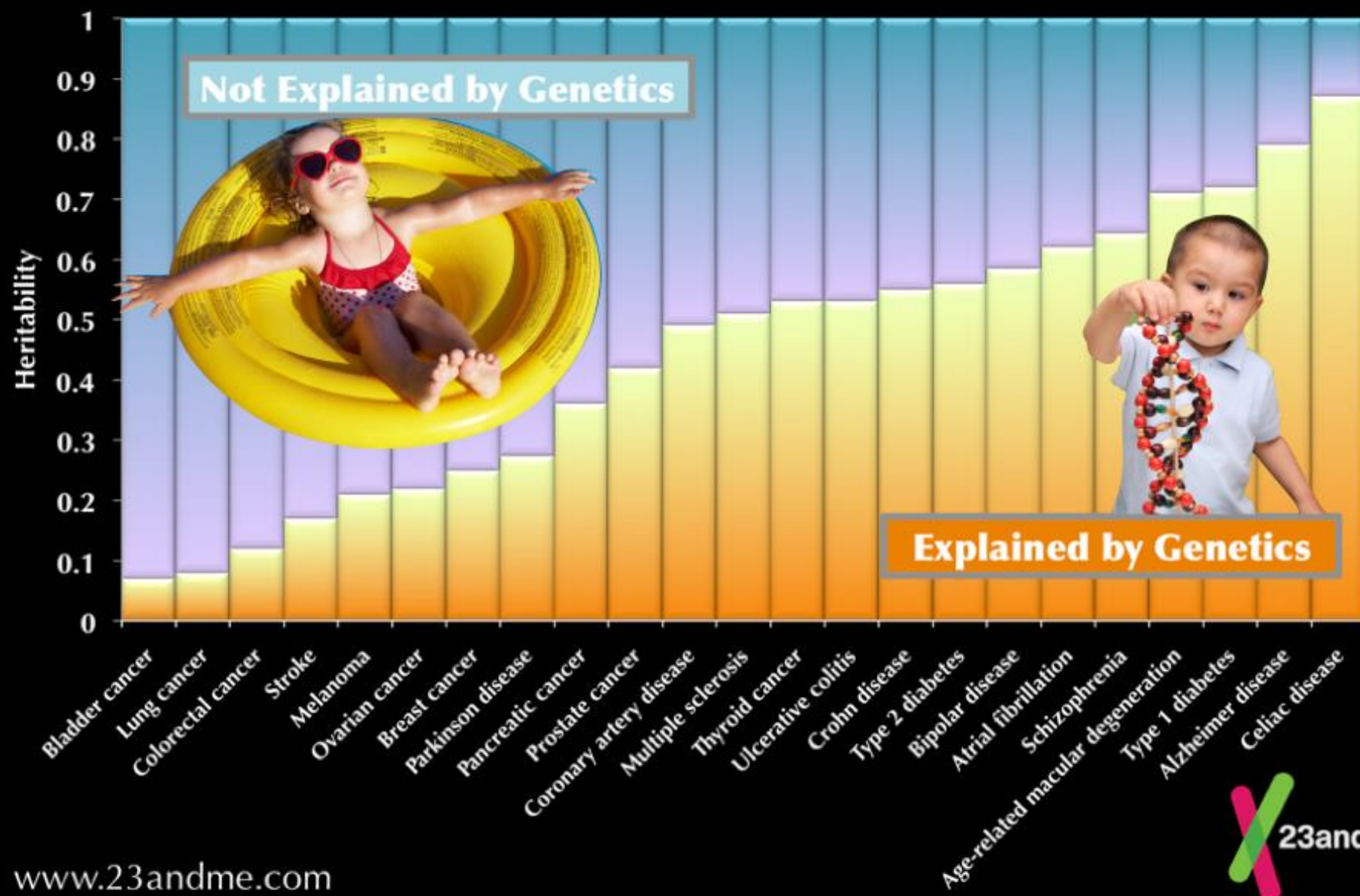
Heritability

- Fraction of total phenotypic variance of a quantitative trait that is caused by genes
- Measures the extent to which different alleles at various loci are responsible for the variability in that trait seen across a population
- Heritability (h^2) can be estimated based on twin studies
 - Ranges from 0 (no genetic basis) to 1 (complete genetic basis)

$$\frac{\text{Variance in DZ pairs} - \text{Variance in MZ pairs}}{\text{Variance in DZ pairs}}$$

DZ = dizygotic (fraternal twins) ; MZ = monozygotic (identical twins)

How Heritable Is This Disease?

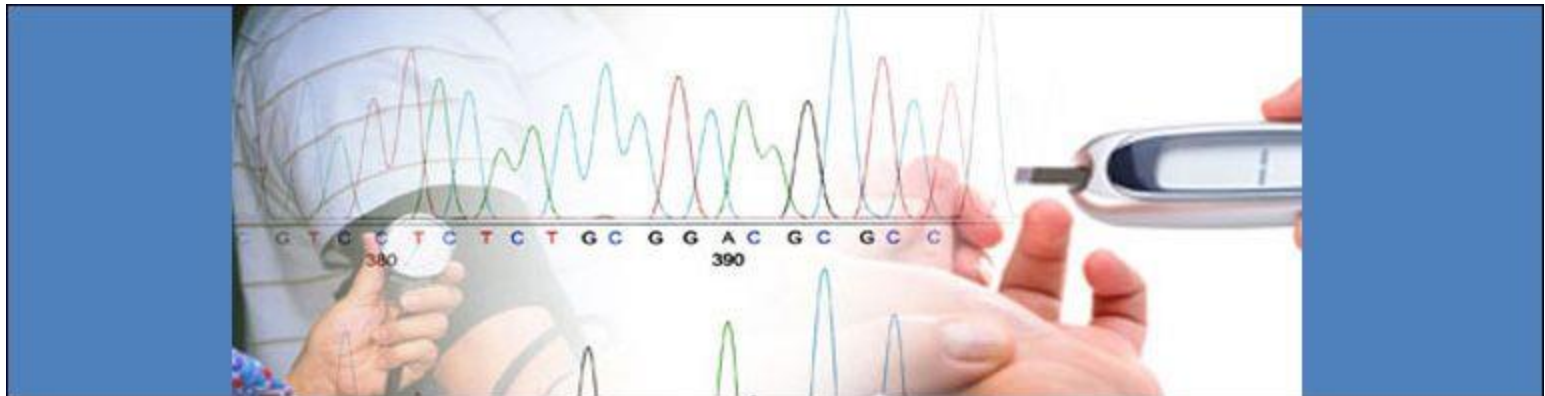


Common Disease – Common Variant Hypothesis

Common, interacting disease alleles underlie most common diseases, perhaps in association with environmental factors

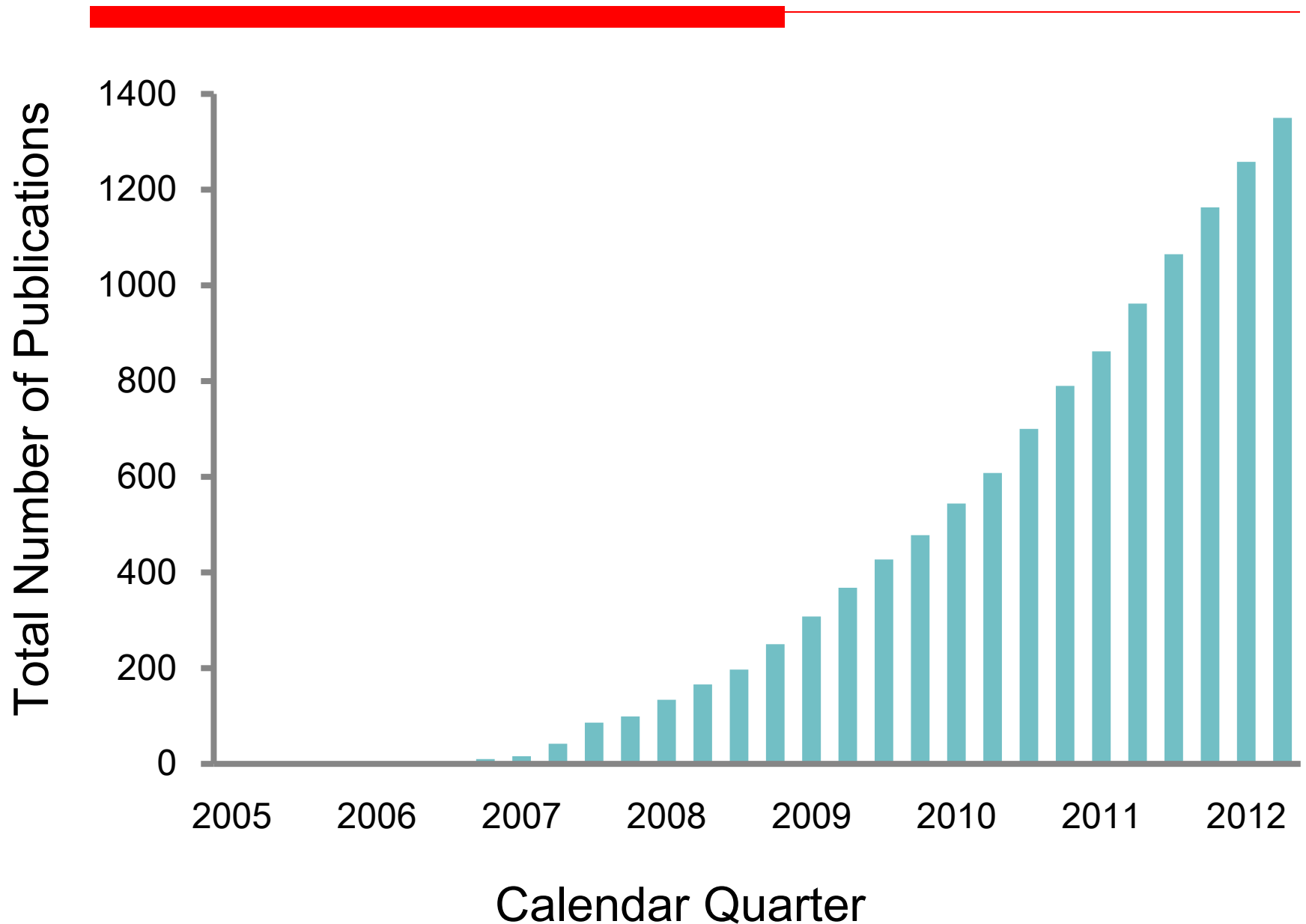
Genome Wide Association Studies (GWAS)

- Test a significant portion of common genetic variation in human populations for association with a disease or variation in a quantitative trait
- Find disease/quantitative trait-related variants without a prior hypothesis of gene function



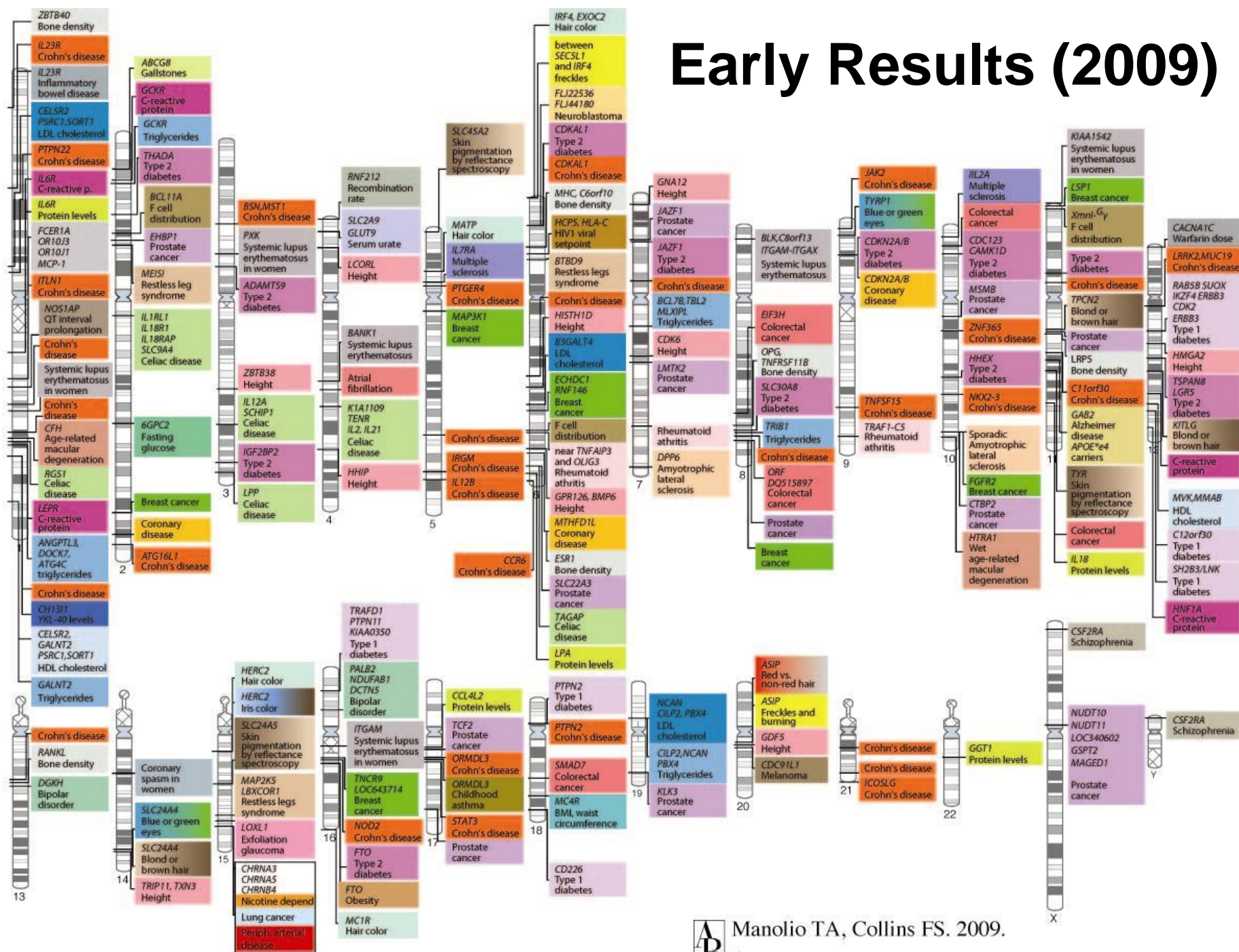
gwas.nih.gov

Published GWA Reports, 2005 – 6/2012



AR

Annu. Rev. Med. 60:443-56





[Home](#) > [Research Funding](#) > [Research Funding Divisions](#) > [Division of Genomic Medicine](#) > [GWAS Catalog](#)

Division of Genomic Medicine

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A Catalog of Published Genome-Wide Association Studies

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[Potential Sample Collections for Sequencing](#) : [Programs](#) : [Publications](#) : [Trans-NIH Sequencing Inventory](#)

Additional information has been added to the HTML catalog columns below. For a description of column headings for the HTML catalog, go to: [Catalog Heading Descriptions](#)

[Potential etiologic and functional implications of genome-wide association loci for human diseases and traits](#)

Click here to read our recent *Proceedings of the Academy of Sciences (PNAS)* article on catalog methods and analysis.

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Published Genome-Wide Associations

The genome-wide association study (GWAS) publications listed here include only those attempting to assay at least 100,000 single nucleotide polymorphisms (SNPs) in the initial stage. Publications are organized from most to least recent date of publication, indexing from online publication if available. Studies focusing only on candidate genes are excluded from this catalog. Studies are identified through weekly PubMed literature searches, daily NIH-distributed compilations of news and media reports, and occasional comparisons with an existing database of GWAS literature ([HuGE Navigator](#)).

SNP-trait associations listed here are limited to those with p-values $< 1.0 \times 10^{-5}$ (see full methods for additional details). Multipliers of powers of 10 in p-values are rounded to the nearest single digit; odds ratios and allele frequencies are rounded to two decimals. Standard errors are converted to 95 percent confidence intervals where applicable. Allele frequencies, p-values, and odds ratios derived from the largest sample size, typically a combined analysis (initial plus replication studies), are recorded below if reported; otherwise statistics from the initial study sample are recorded. For quantitative traits, information on % variance explained, SD increment, or unit difference is reported where available. Odds ratios < 1 in the original paper are converted to $OR > 1$ for the alternate allele. Where results from multiple genetic models

www.genome.gov/GWAStudies/

Fundamentals of GWAS

- Study Design
 - Acquire DNA from appropriate individuals with disease or trait of interest and matching controls
- Genotyping
 - Determine allele frequencies in each group
- Statistical Analysis
 - Identify alleles found more frequently than expected by chance in the affected relative to control group
- Validation
 - Confirm findings in other case-control studies

Study Design



Strategies to maximize the size of genetic effects



Cases

- More extreme phenotypes
- Other relative has phenotype
- Younger age-of-disease onset



Controls

- Less extreme phenotypes
- No family history of phenotype
- Matched ancestry, age, sex, etc.

Many thousands of DNA samples are genotyped

Genotyping



**In theory, 3 SNPs can appear in 8 different patterns
called 'haplotypes'**

ACCGTAA**C**GCGCTAGC**A**CATGCT**A**CCGTC
ACCGTAA**C**GCGCTAGC**A**CATGCT**G**CCGTC
ACCGTAA**C**GCGCTAGC**C**CATGCT**A**CCGTC
ACCGTAA**C**GCGCTAGC**C**CATGCT**G**CCGTC
ACCGTAA**T**GCGCTAGC**A**CATGCT**A**CCGTC
ACCGTAA**T**GCGCTAGC**A**CATGCT**G**CCGTC
ACCGTAA**T**GCGCTAGC**C**CATGCT**A**CCGTC
ACCGTAA**T**GCGCTAGC**C**CATGCT**G**CCGTC

**In practice, not all 'haplotypes' are present
in a given population**

ACCGTAA**C**GCGCTAGC**A**CATGCT**A**CCGTC

ACCGTAA**C**GCGCTAGC**A**CATGCT**G**CCGTC

ACCGTAA**C**GCGCTAGC**C**CATGCT**A**CCGTC

ACCGTAA**C**GCGCTAGC**C**CATGCT**G**CCGTC

ACCGTAA**T**GCGCTAGC**A**CATGCT**A**CCGTC

ACCGTAA**T**GCGCTAGC**A**CATGCT**G**CCGTC

ACCGTAA**T**GCGCTAGC**C**CATGCT**A**CCGTC

ACCGTAA**T**GCGCTAGC**C**CATGCT**G**CCGTC

These 3 variants are in linkage disequilibrium

ACCGTAA**C**GCGCTAGC**A**CATGCT**A**CCGTC

ACCGTAA**C**GCGCTAGC**A**CATGCT**G**CCGTC

ACCGTAA**C**GCGCTAGC**C**CATGCT**A**CCGTC

ACCGTAA**C**GCGCTAGC**C**CATGCT**G**CCGTC

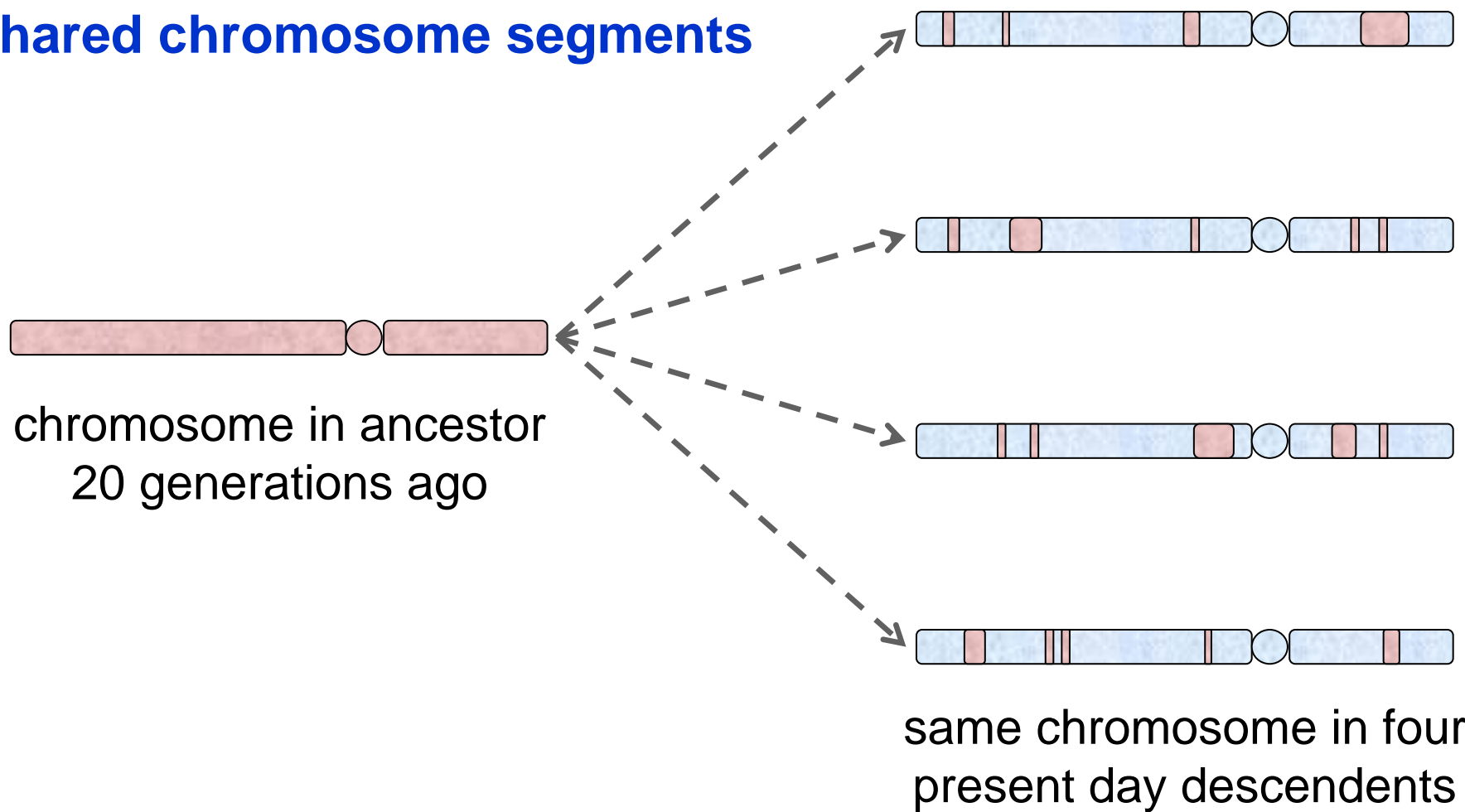
ACCGTAA**T**GCGCTAGC**A**CATGCT**A**CCGTC

ACCGTAA**T**GCGCTAGC**A**CATGCT**G**CCGTC

ACCGTAA**T**GCGCTAGC**C**CATGCT**A**CCGTC

ACCGTAA**T**GCGCTAGC**C**CATGCT**G**CCGTC

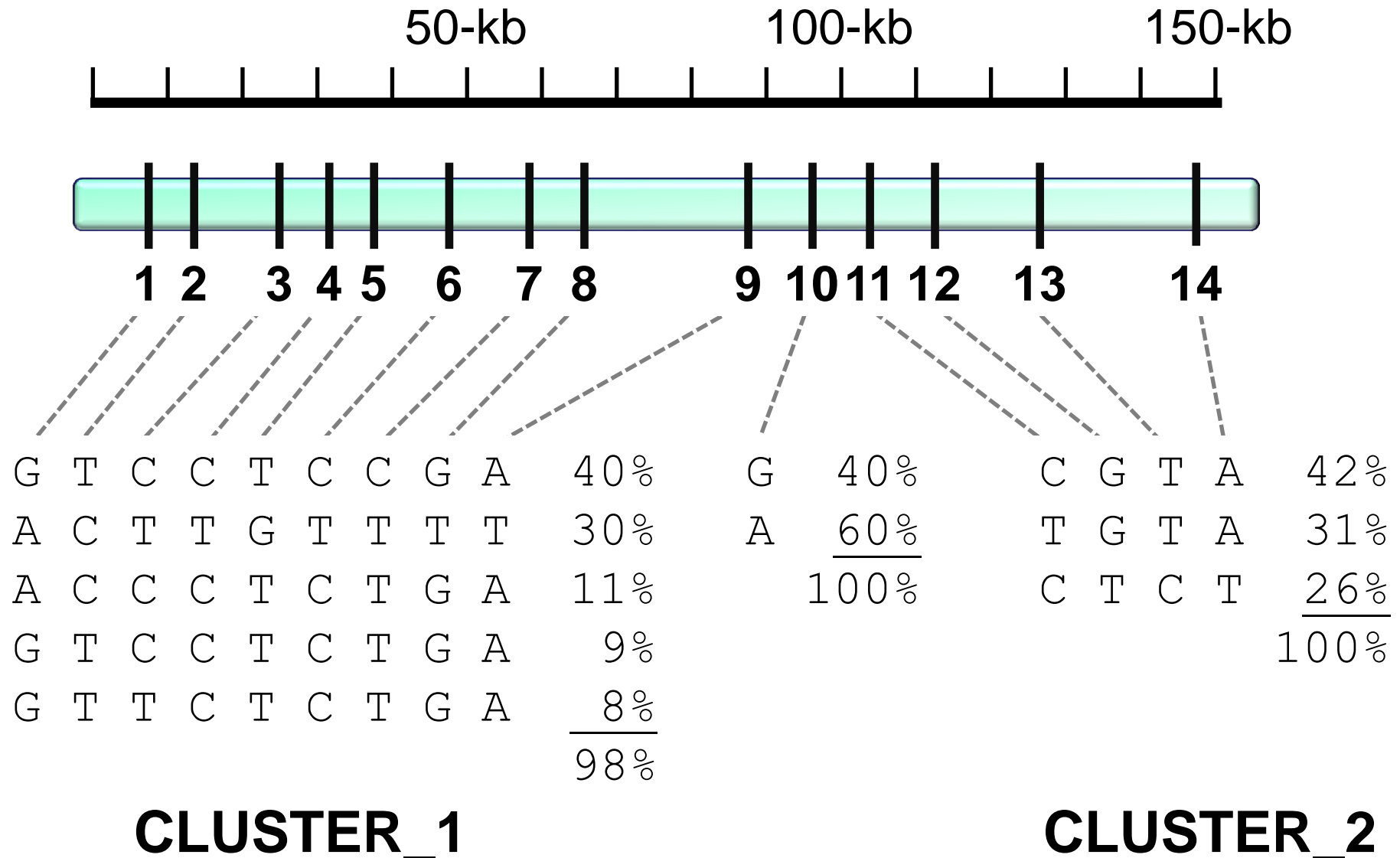
Effect of recombination on shared chromosome segments

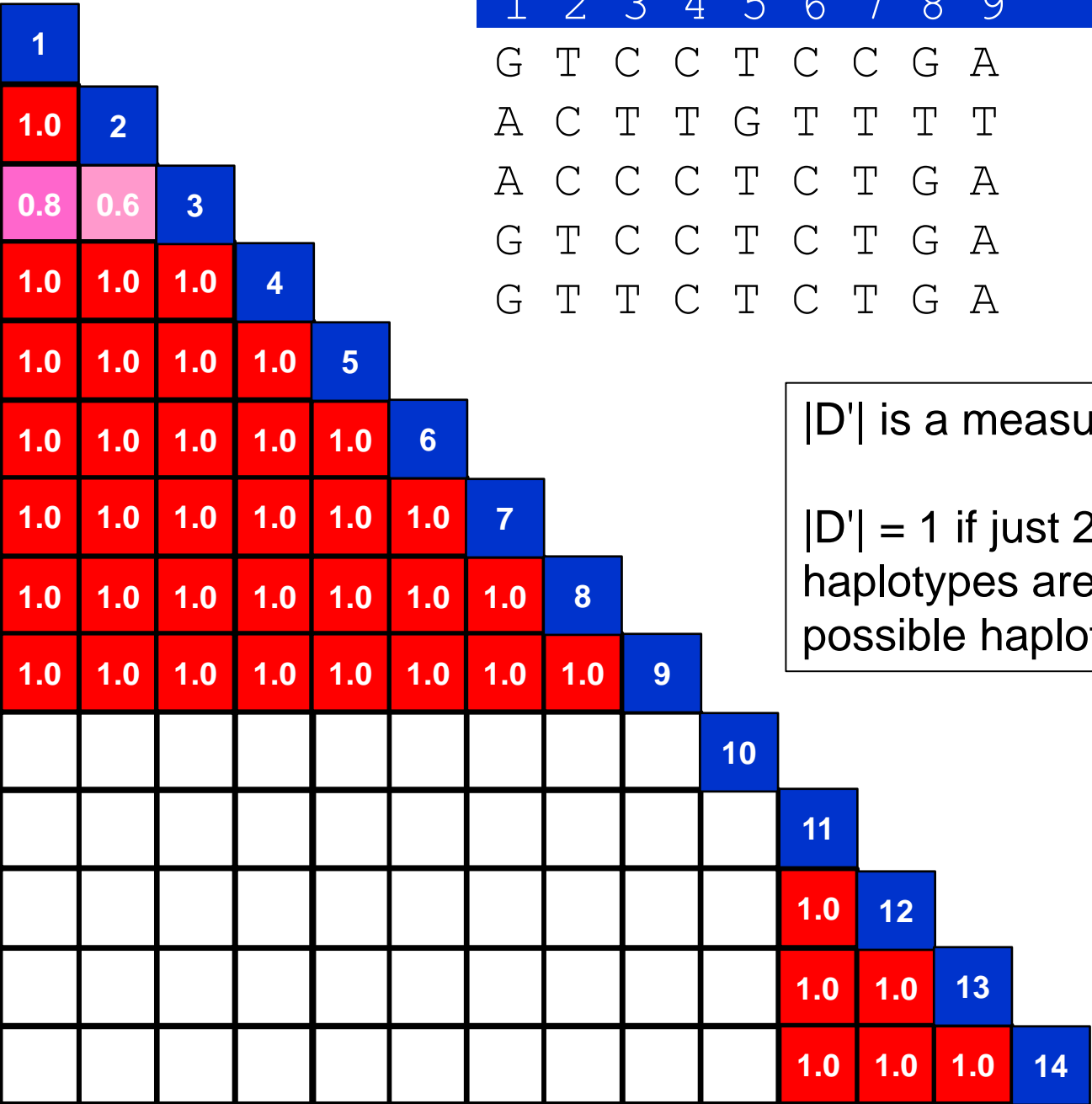


20 meioses with 1-2 random crossovers in each arm per meiosis

Ancestral segments shared by a significant number of descendants in this situation is typically 5 – 15-kb

Linkage Disequilibrium (LD) Blocks

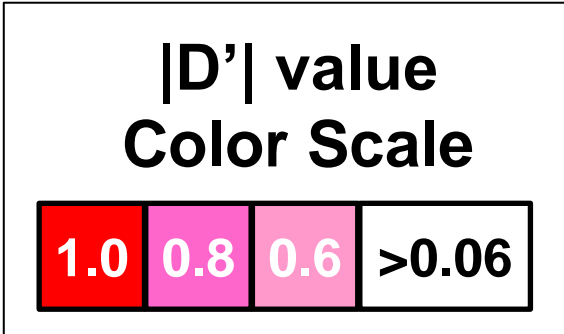




1	2	3	4	5	6	7	8	9	10	11	12	13	14
G	T	C	C	T	C	C	G	A	G	C	G	T	A
A	C	T	T	G	T	T	T	T	A	T	G	T	A
A	C	C	C	T	C	T	G	A		C	T	C	T
G	T	C	C	T	C	T	G	A					
G	T	T	C	T	C	T	G	A					

$|D'|$ is a measure of LD

$|D'| = 1$ if just 2 or 3 of the possible haplotypes are present, and <1 if all 4 possible haplotypes are present

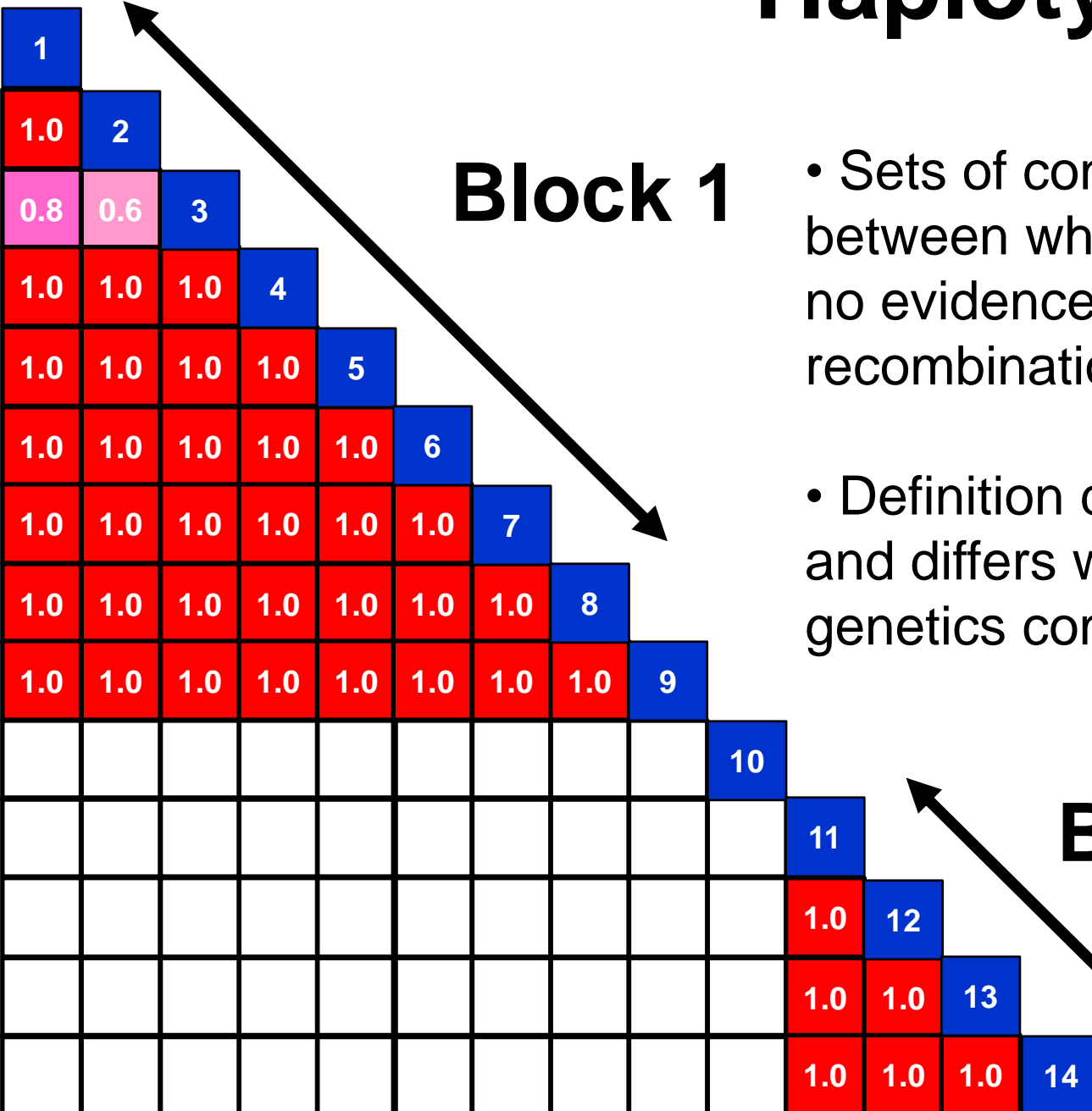


Haplotype Blocks

Block 1

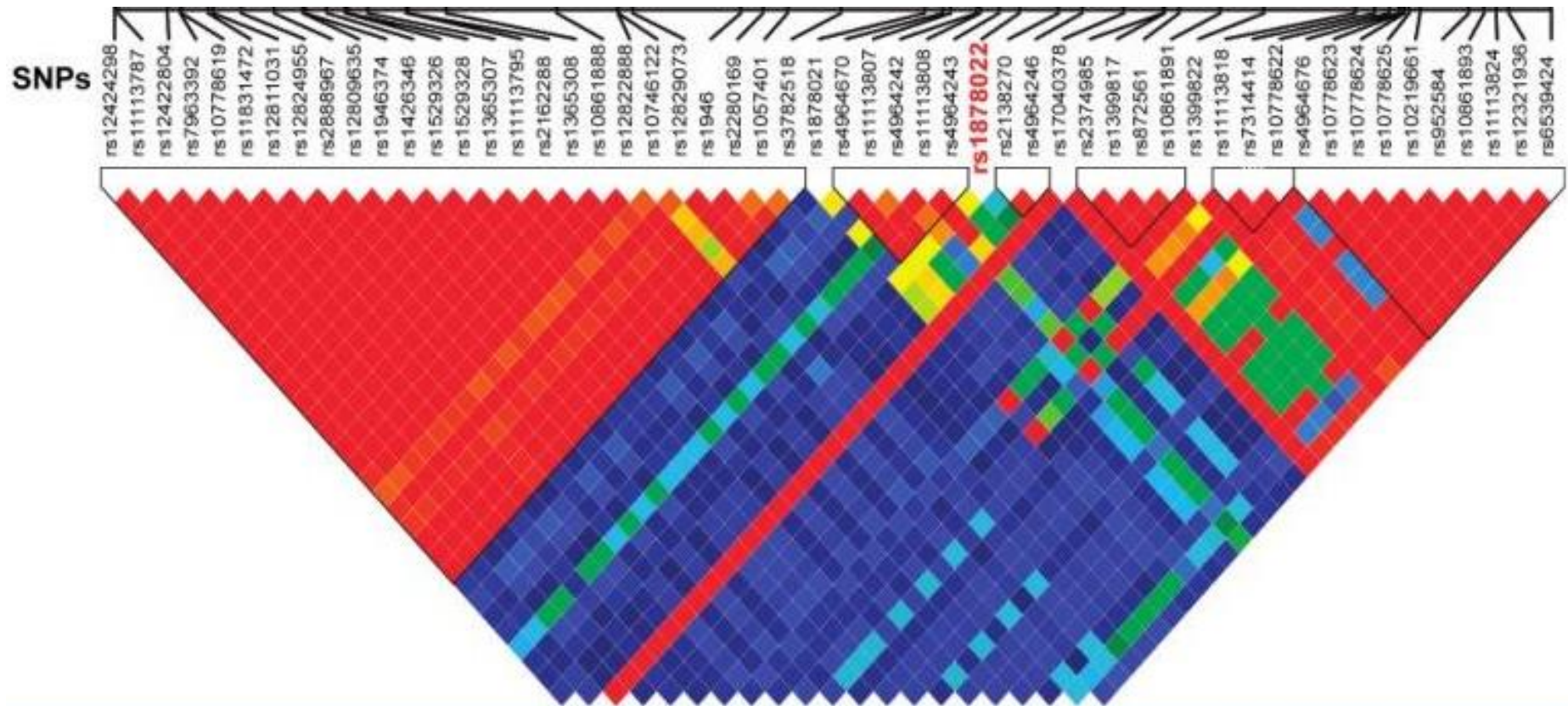
- Sets of consecutive sites between which there is little or no evidence of historical recombination.
- Definition depends on context and differs within the population genetics community

Block 2



Haploptype blocks in GWAS of Chemotherapy Responses

Chromosome 12q 23.3 region



Source: J Natl Cancer Inst © 2011 Oxford University Press



|D'| value color scale

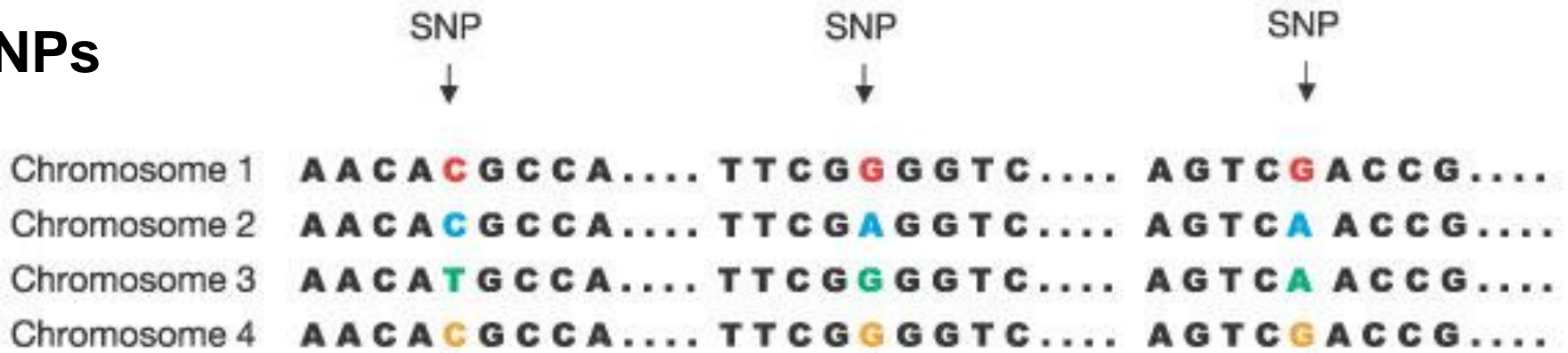
Haplotype blocks in human populations

Parameter	YRI (Nigerian)	CEU (N & W Europe)	CHB & JPT (Chinese & Japanese)
Average # SNPs per block	30.3	70.1	54.4
Average length per block (kb)	7.3	16.3	13.2
% of genome spanned by block	67	87	81
Average # haplotypes per block	5.6	4.7	4.0
% of chromosomes accounted for by these haplotypes	94	93	95

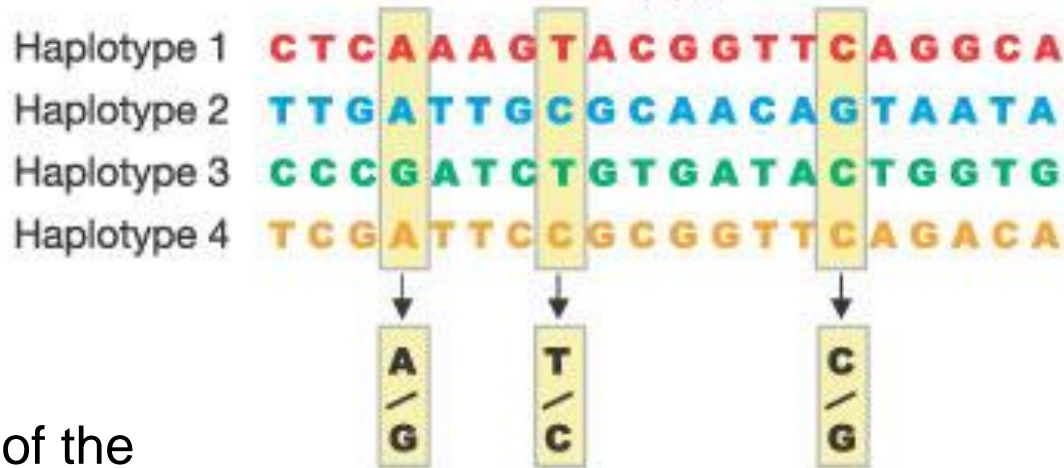
Nature 437: 1299-1320 (2005)

<http://ftp.1000genomes.ebi.ac.uk/vol1/ftp/README.populations>

SNPs



Haplotypes



only variable
positions are
depicted

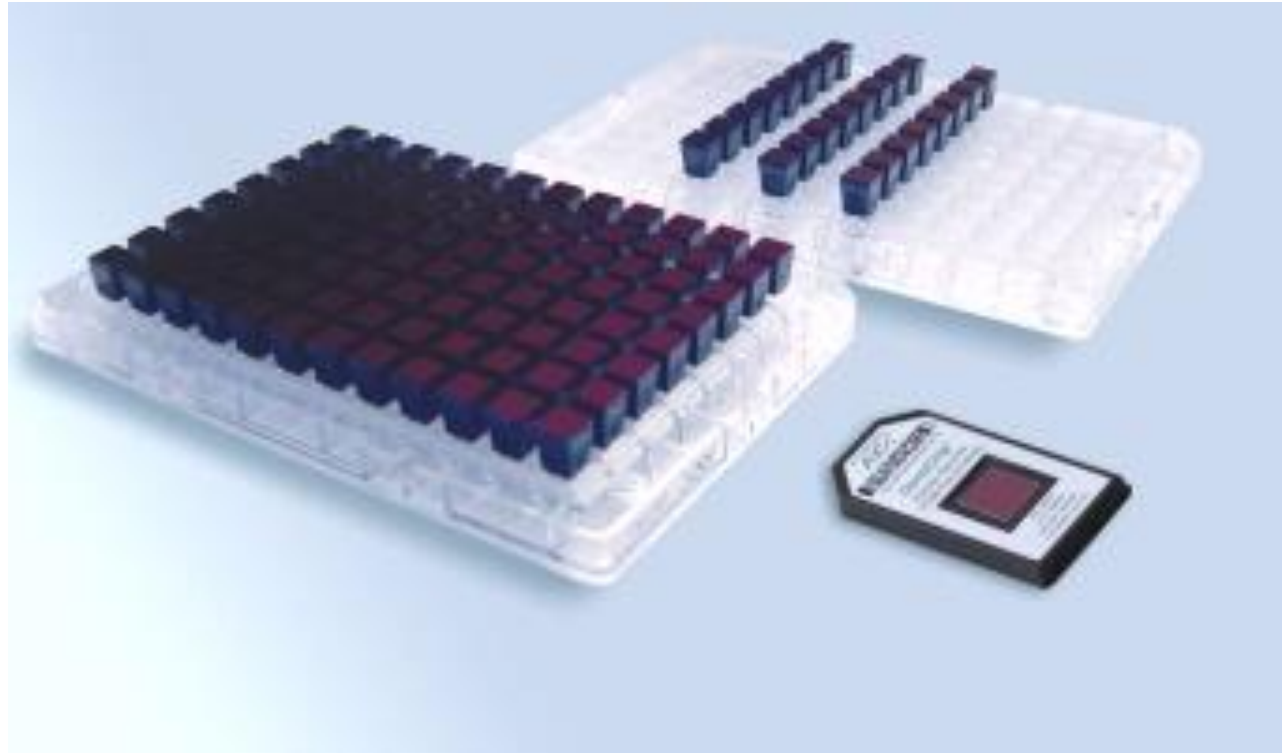
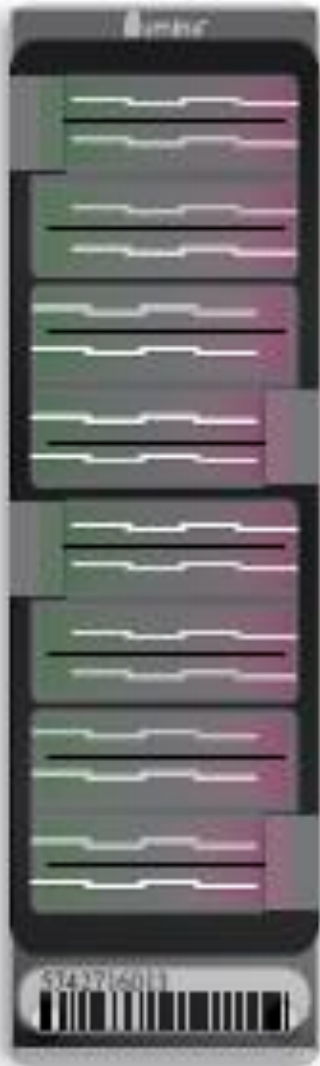
Tag SNPs

capture the bulk of the
information content

Practical application:

Tag SNPs greatly reduce the genotyping workload!

Commonly Used Genotyping Platforms

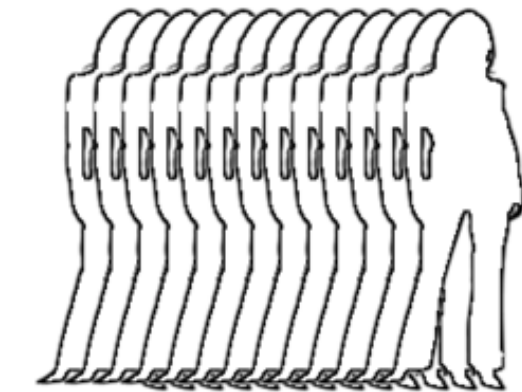


www.atlas-biolabs.de/snp_genotyping/affymetrix_snp_genotyping_service

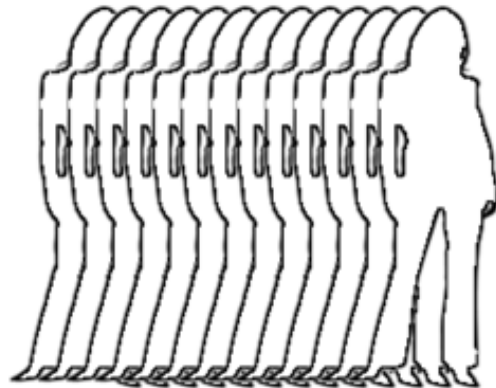
Genotype several million human SNPs

Statistical Analysis





GC CC GG GC CC GC GC
GG CC GC GG GC GG



GC CC GC GC GG CC CC
CC GC GC GG GC GG

SNP1

Cases

Count of G:
2104 of 4000

Frequency of G:
52.6%

Controls

Count of G:
2676 of 6000

Frequency of G:
44.6%

P-value:

$5.0 \cdot 10^{-15}$

SNP2

Cases

Count of G:
1648 of 4000

Frequency of G:
41.2%

Controls

Count of G:
2532 of 6000

Frequency of G:
42.2%

P-value:

0.33

SNP...

*Repeat for all
SNPs*

en.wikipedia.org/wiki/File:Method_example_for_GWA_study_designs.png

Pearson's chi-square test is often used to assess departure from the null hypothesis that case and controls have the same the distribution of genotype counts. Cold Spring Harbor Protoc; 2012; doi:10.1101/pdb.top068163

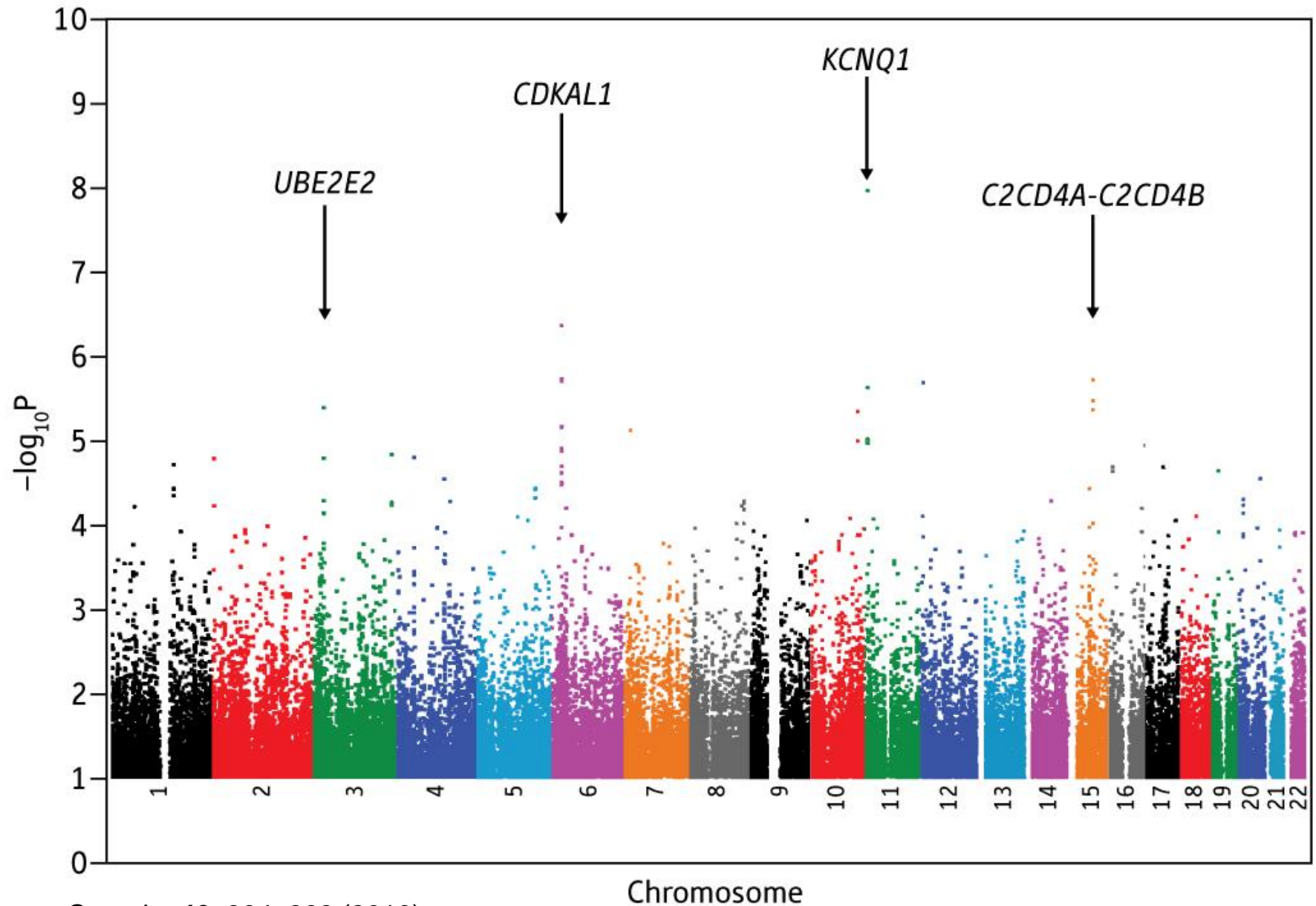
Multiple hypothesis testing

- Millions of independent hypotheses tested
- Type I error: incorrect rejection of null hypothesis
 - Without true effect, 5% of results will be significant at $p = 0.05$ level
- Correction factors that minimize Type I errors
 - Bonferroni correction: divide p by the # of tests
 - More permissive correction methods exist

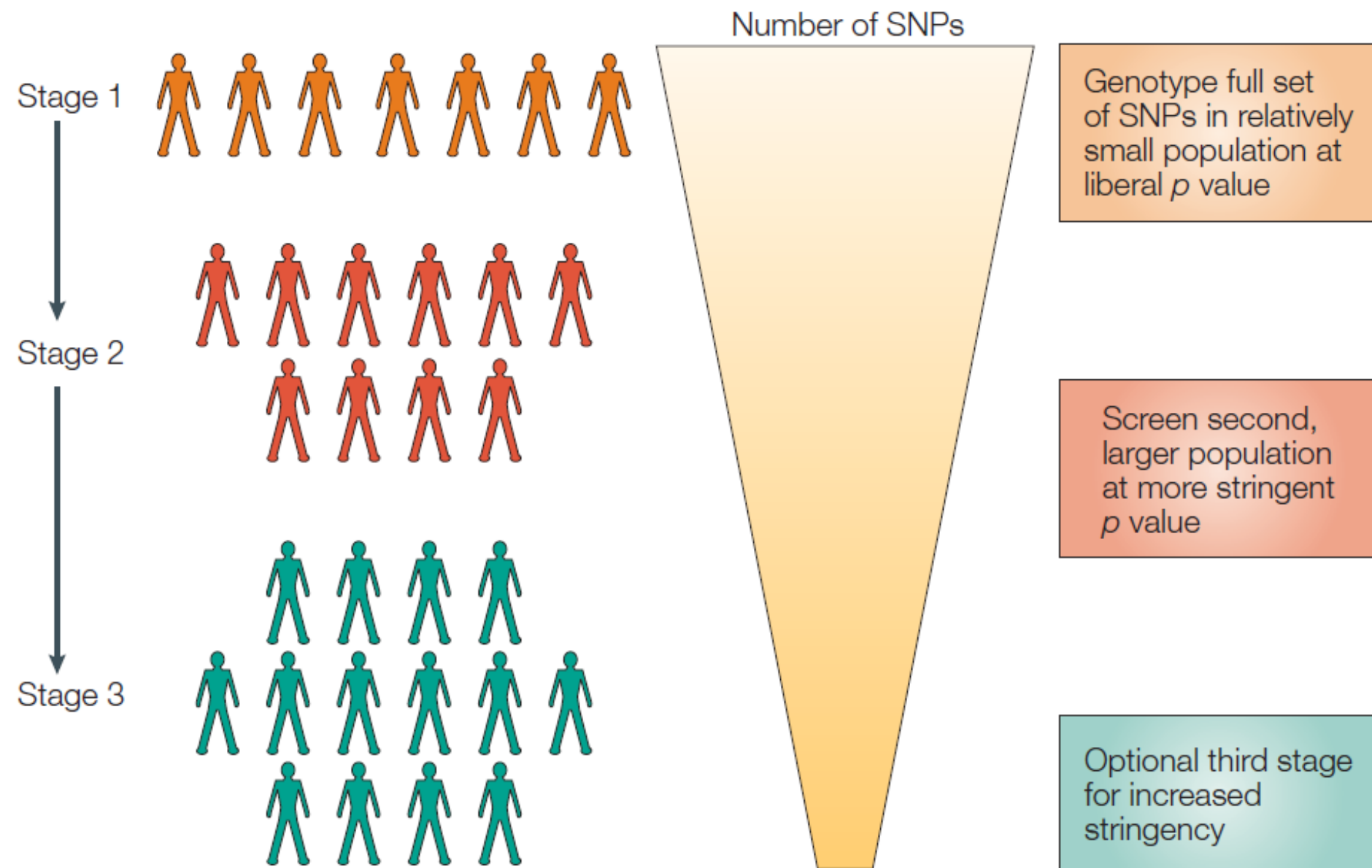
Manhattan Plots



GWAS for T2DM Risk Alleles in the Japanese Population



Validation and Study Replication



Magnitude of the Effect

**Disease
Odds Ratio
(OR)**

$$\left(\frac{\text{carriers with disease}}{\text{carriers without disease}} \right) / \left(\frac{\text{noncarriers with disease}}{\text{noncarriers without disease}} \right)$$

**Disease
Odds Ratio
(OR)**

$$\frac{(\text{carriers with disease}) (\text{noncarriers without disease})}{(\text{carriers without disease}) (\text{noncarriers with disease})}$$

Commonly used when summarizing the results of GWAS

Example of Disease Odds Ratio Calculation

Allele	Cases	Controls	Total
Present	2100	750	2850
Absent	1250	1400	2650
Total	3350	2150	5500

**Disease OR
for allele**

$$\left(\frac{\text{carriers with disease}}{\text{carriers without disease}} \right) / \left(\frac{\text{noncarriers with disease}}{\text{noncarriers without disease}} \right)$$

Example of Disease Odds Ratio Calculation

Allele	Cases	Controls	Total
Present	2100	750	2850
Absent	1250	1400	2650
Total	3350	2150	5500

**Disease OR
for allele**

$$\frac{2100}{\text{carriers without disease}} / \frac{\text{noncarriers with disease}}{\text{noncarriers without disease}}$$

Example of Disease Odds Ratio Calculation

Allele	Cases	Controls	Total
Present	2100	750	2850
Absent	1250	1400	2650
Total	3350	2150	5500

Disease OR for allele $\left(\frac{2100}{750} \right) / \left(\frac{\text{noncarriers with disease}}{\text{noncarriers without disease}} \right)$

Example of Disease Odds Ratio Calculation

Allele	Cases	Controls	Total
Present	2100	750	2850
Absent	1250	1400	2650
Total	3350	2150	5500

Disease OR for allele $\left(\frac{2100}{750} \right) / \left(\frac{1250}{\text{noncarriers without disease}} \right)$

Example of Disease Odds Ratio Calculation

Allele	Cases	Controls	Total
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Total	3350	2150	5500

Disease OR for allele $\left(\frac{2100}{750} \right) / \left(\frac{1250}{1400} \right)$

Example of Disease Odds Ratio Calculation

Allele	Cases	Controls	Total
Present	2100	750	2850
Absent	1250	1400	2650
Total	3350	2150	5500

Disease OR for allele: 3.14

Early GWAS Success Story



Age-Related Macular Degeneration

Age-Related Macular Degeneration (AMD)

- Leading cause of vision loss for >55 year olds in US
 - >10 million affected individuals in the US
 - ~15% disease risk: ages 70-79
 - ~30% disease risk: age >80
- Affects the macula, a region near the center of the retina where visual perception is most acute



Normal retina

Optic disc

Macula

Fovea centralis



Normal Vision

"Wet" macular degeneration



Abnormal blood vessels grow under the macula (10 - 15% of cases)

"Dry" macular degeneration



Light sensitive cells die (85 - 90% of cases)

drusen



AMD

Aggregate of lipids, glyconjugates, proteins, and complement proteins

Age-Related Macular Degeneration (AMD)

- ~70% of risk can be inferred based on SNP genotypes and environmental factors (smoking)
- *CFH* Y402H, *ARMS2* A69S, *C3* R102G alleles are associated with increased risk of developing AMD
- *CFB* R32Q is a protective allele
- Genes highlight the role of inflammation in disease

What usually is found ...



Type II Diabetes

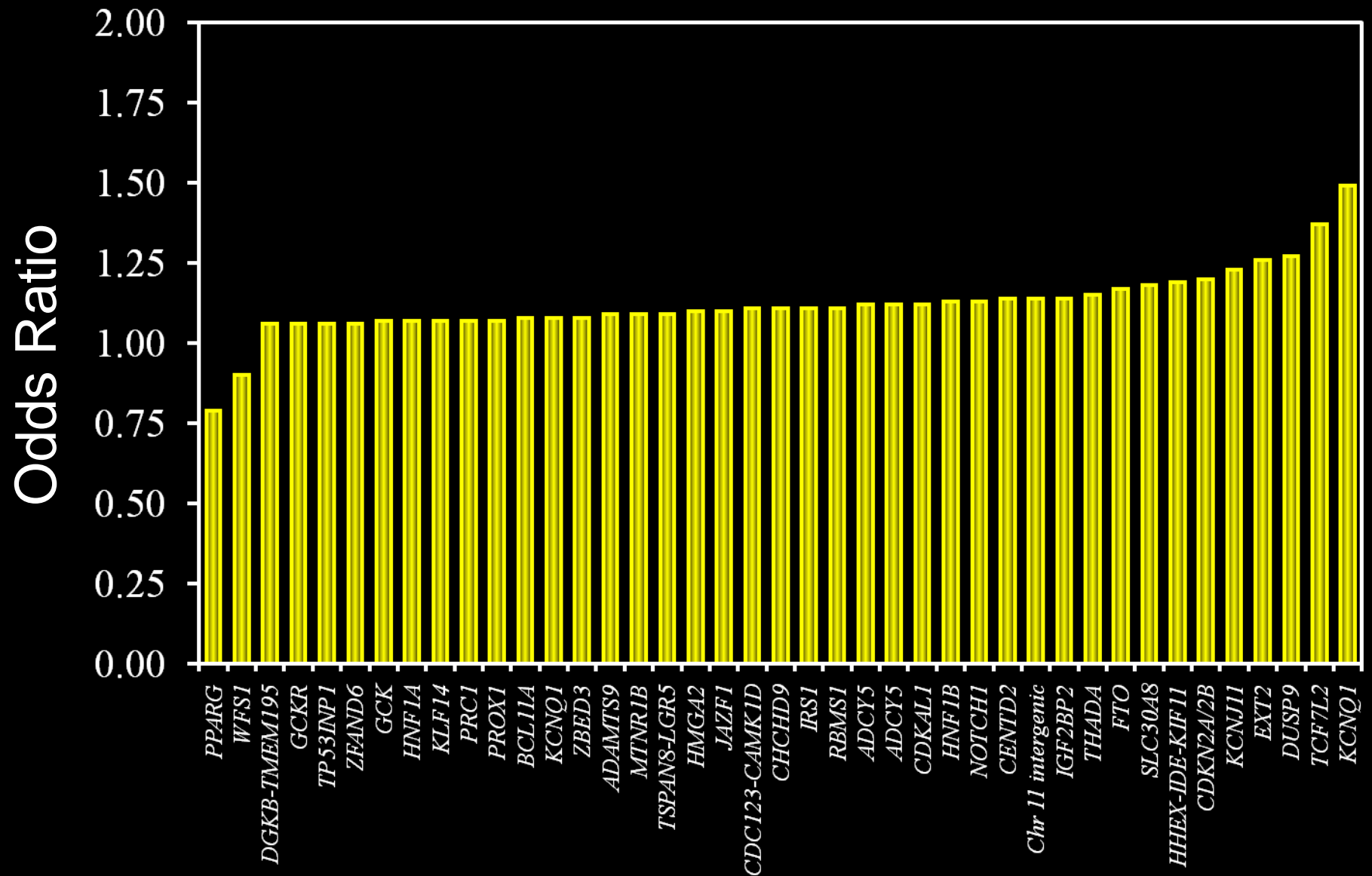
Diabetes in the United States

- Syndrome of impaired carbohydrate, fat, and protein metabolism
- 25.8 million children and adults (8.3% of US population)
 - 18.8 million and 7.0 million cases, respectively
 - 79 million prediabetic cases
- Leading cause of kidney failure, non-traumatic lower-limb amputations, blindness, heart attack, and stroke among US adults

Type 2 Diabetes Mellitus (T2DM)

- Most common type of diabetes (>80% of cases)
- Decreased sensitivity of target tissues to insulin
 - Pancreatic hormone that plays a critical role in energy metabolism
- Complex risk factors
 - increased age, obesity, family history, impaired glucose metabolism, physical inactivity, and ethnic origin

Effect Sizes of T2DM Susceptibility Loci



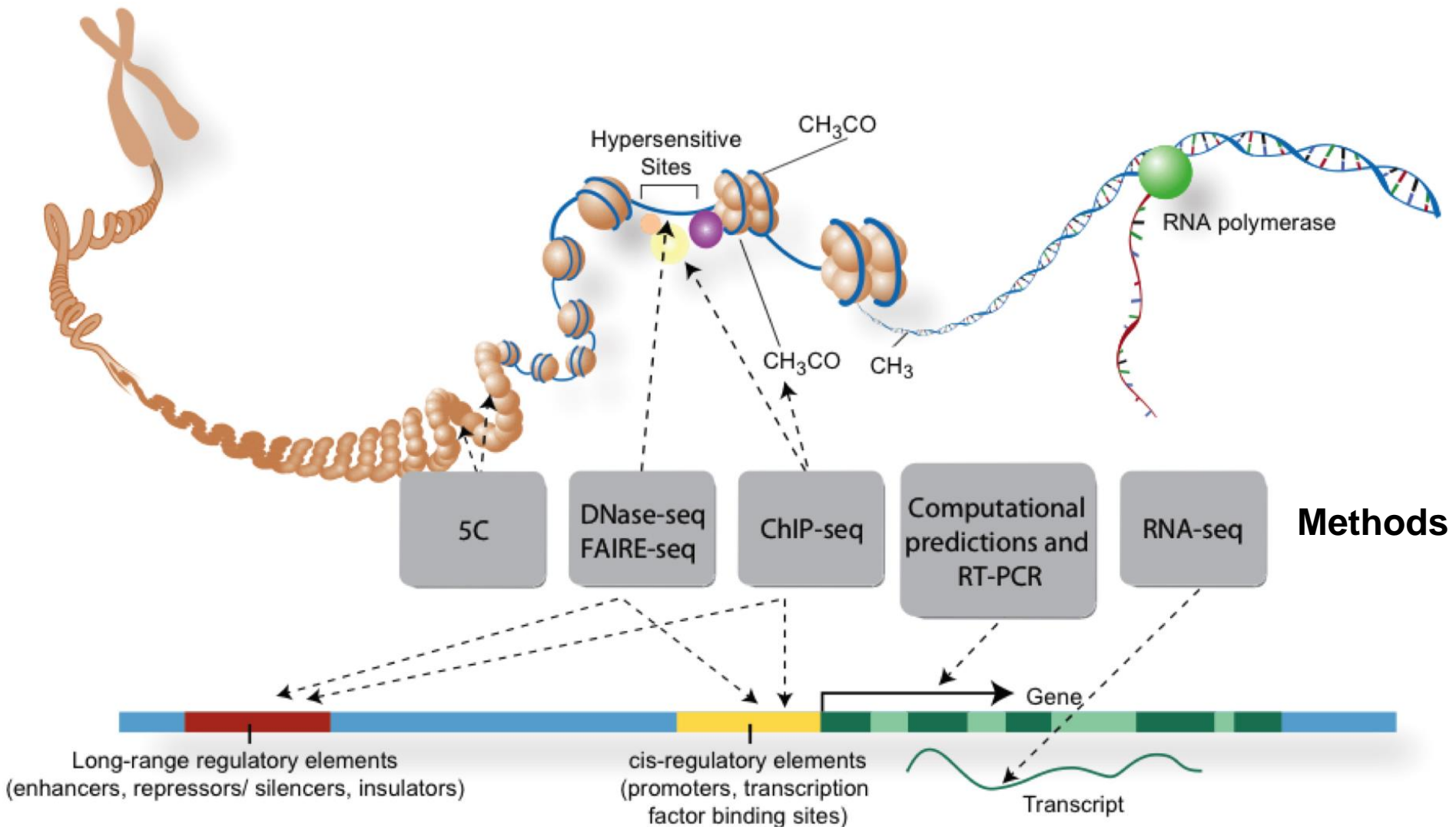
Results of T2DM GWAS

- To date, only 10% of calculated genetic risks identified
 - Studies in different populations are still ongoing
- Predictive power using genes alone vs. clinical parameters (age, body mass index, etc.) are about the same
- Loci highlight disease mechanisms
 - Abnormal insulin processing and secretion

Lessons from GWAS

- Most common variants have modest effects on risk
 - Less than 1.5-fold odds ratio (OR)
- For most common diseases/traits: identified SNPs only account for <5-10% of overall risk
 - Not useful clinically
- Useful for understanding pathophysiology
 - New biologic pathways and drug targets
- >80% of GWAS variants are noncoding

Annotating the human genome





The case of the missing heritability

The usual suspects

- Rare variants
- *De novo* mutations: germline and/or somatic
- Copy number variants (CNVs)
- Gene × Gene interactions (epistasis)
- Gene × Environment interactions
- Mitochondrial contribution
- Epigenetic influence
- Combinations of all and/or a subset of the above

Rare variants circa late 2012

ARTICLE

doi:10.1038/nature11632

An integrated map of genetic variation from 1,092 human genomes

The 1000 Genomes Project Consortium*

Nature 491: 56 – 65 (November, 2012)

De novo mutations in human genetic disease

Joris A. Veltman and Han G. Brunner

NATURE REVIEWS | **GENETICS** 13: 565-575 (2012)

Rate of *de novo* mutations and the importance of father's age to disease risk

Augustine Kong¹, Michael L. Frigge¹, Gisli Masson¹, Soren Besenbacher^{1,2}, Patrick Sulem¹, Gisli Magnusson¹, Sigurjon A. Gudjonsson¹, Asgeir Sigurdsson¹, Aslaug Jonasdottir¹, Adalbjorg Jonasdottir¹, Wendy S. W. Wong³, Gunnar Sigurdsson¹, G. Bragi Walters¹, Stacy Steinberg¹, Hannes Helgason¹, Gudmar Thorleifsson¹, Daniel F. Gudbjartsson¹, Agnar Helgason^{1,4}, Olafur Th. Magnusson¹, Unnur Thorsteinsdottir^{1,5} & Kari Stefansson^{1,5}

Nature **488**: 471-475 (2012)

De Novo Mutations

- Sequence variant present for the first time in a family member as a result of a mutation in a germ cell of one of the parents or in the fertilized egg itself
- □ 70 *de novo* single nucleotide variants per diploid genome
- □ 3 *de novo* insertion or deletion (1-50 bp) per diploid genome
- □ 1 *de novo* mutation per exome

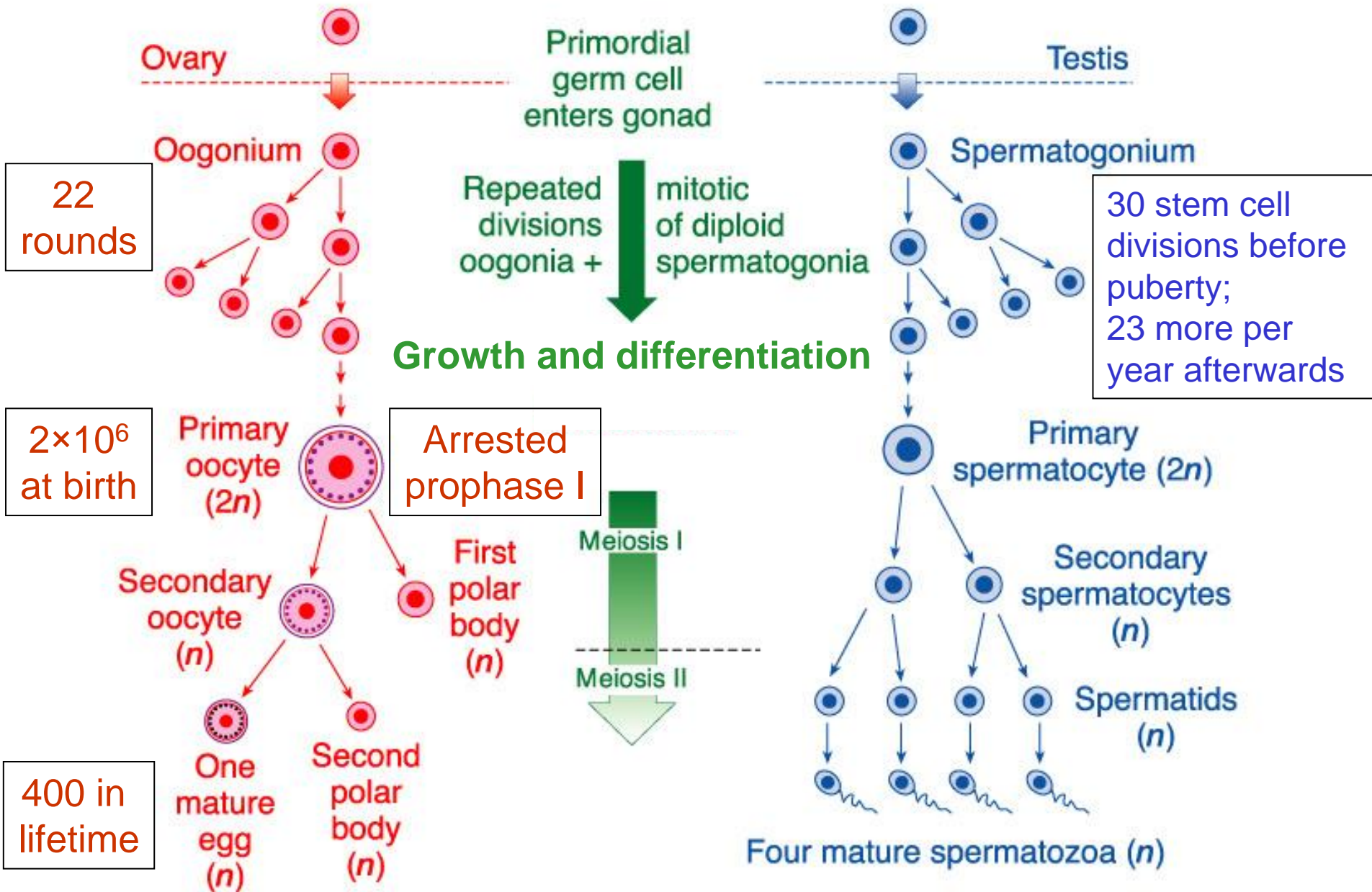


Figure 2-9 Human Molecular Genetics, 3/e. (© Garland Science 2004)

Parent of Origin Effects

- 78 Icelandic parent-offspring trios were sequenced
- Average of 55.4 paternal and 14.2 maternal mutations
- Variation in *de novo* mutation rates driven by paternal contribution
- Number of *de novo* mutations increases with paternal age
 - Two additional *de novo* mutations per year
 - Paternal mutations double about every 16.5 years
- Factors other than father's age did not contribute substantially to the mutation rate diversity in this study

Autism Spectrum Disorders

Autistic Disorder

Asperger's
Disorder

Childhood
Disintegrative
Disorder

Rett's Disorder

Pervasive Developmental
Disorder - Not
Otherwise Specified

Autism Spectrum Disorders (ASD)

- Affects 1/100 - 1/150 children in the United States
- Shared features include: impaired social relationships, impaired language & communication, repetitive behaviors, narrow range of interests
- Approximately 75% have lifelong disability requiring social and educational support
- Genetic cause is unknown in >70% of cases

Identified Prevalence of Autism Spectrum Disorders

ADDM Network 2000-2008

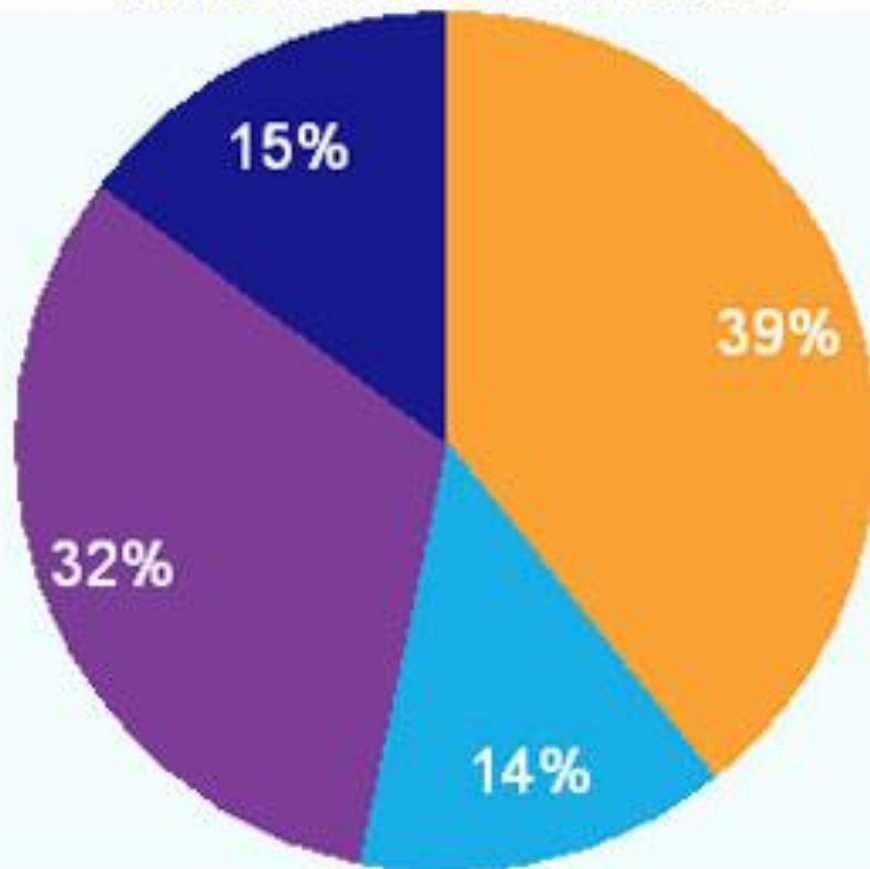
Combining Data from All Sites

Surveillance Year	Birth Year	Number of ADDM Sites Reporting	Prevalence per 1,000 Children (Range)	This is about 1 in X children...
2000	1992	6	6.7 (4.5-9.9)	1 in 150
2002	1994	14	6.6 (3.3-10.6)	1 in 150
2004	1996	8	8.0 (4.6-9.8)	1 in 125
2006	1998	11	9.0 (4.2-12.1)	1 in 110
2008	2000	14	11.3 (4.8-21.2)	1 in 88

Children with Autism Spectrum Disorders

Initial Diagnosis

IAN data updated Feb 17 2010 N=7931



Autism



Asperger Syndrome



PDD-NOS



Other ASD

Rett Syndrome (X-linked dominant)



Rett Syndrome Facts

Every two hours a girl is born with Rett syndrome.

Rett syndrome is the only Autism spectrum disorder with a known cause.

[find out more](#)

www.rettsyndrome.org

- Caused by *MECP2* (methylCpG-binding protein 2) mutations
- Prevalence of $\square 1/12,000$ female births
- Males with severe (null) *MECP2* mutations are not live born
- Progressive neurodevelopment disease, onset at 6-18 months

Individual common variants exert weak effects on the risk for autism spectrum disorders

“Despite genotyping over a million SNPs covering the genome, no single SNP shows significant association with ASD or selected phenotypes at a genome-wide level.”

“ ... it is reasonable to conclude that common variants affect the risk for ASD but their individual effects are modest.”

Sporadic autism exomes reveal a highly interconnected protein network of *de novo* mutations

Brian J. O’Roak¹, Laura Vives¹, Santhosh Girirajan¹, Emre Karakoc¹, Niklas Krumm¹, Bradley P. Coe¹, Roie Levy¹, Arthur Ko¹, Choli Lee¹, Joshua D. Smith¹, Emily H. Turner¹, Ian B. Stanaway¹, Benjamin Vernot¹, Maika Malig¹, Carl Baker¹, Beau Reilly², Joshua M. Akey¹, Elhanan Borenstein^{1,3,4}, Mark J. Rieder¹, Deborah A. Nickerson¹, Raphael Bernier², Jay Shendure¹ & Evan E. Eichler^{1,5}

Multiplex Targeted Sequencing Identifies Recurrently Mutated Genes in Autism Spectrum Disorders

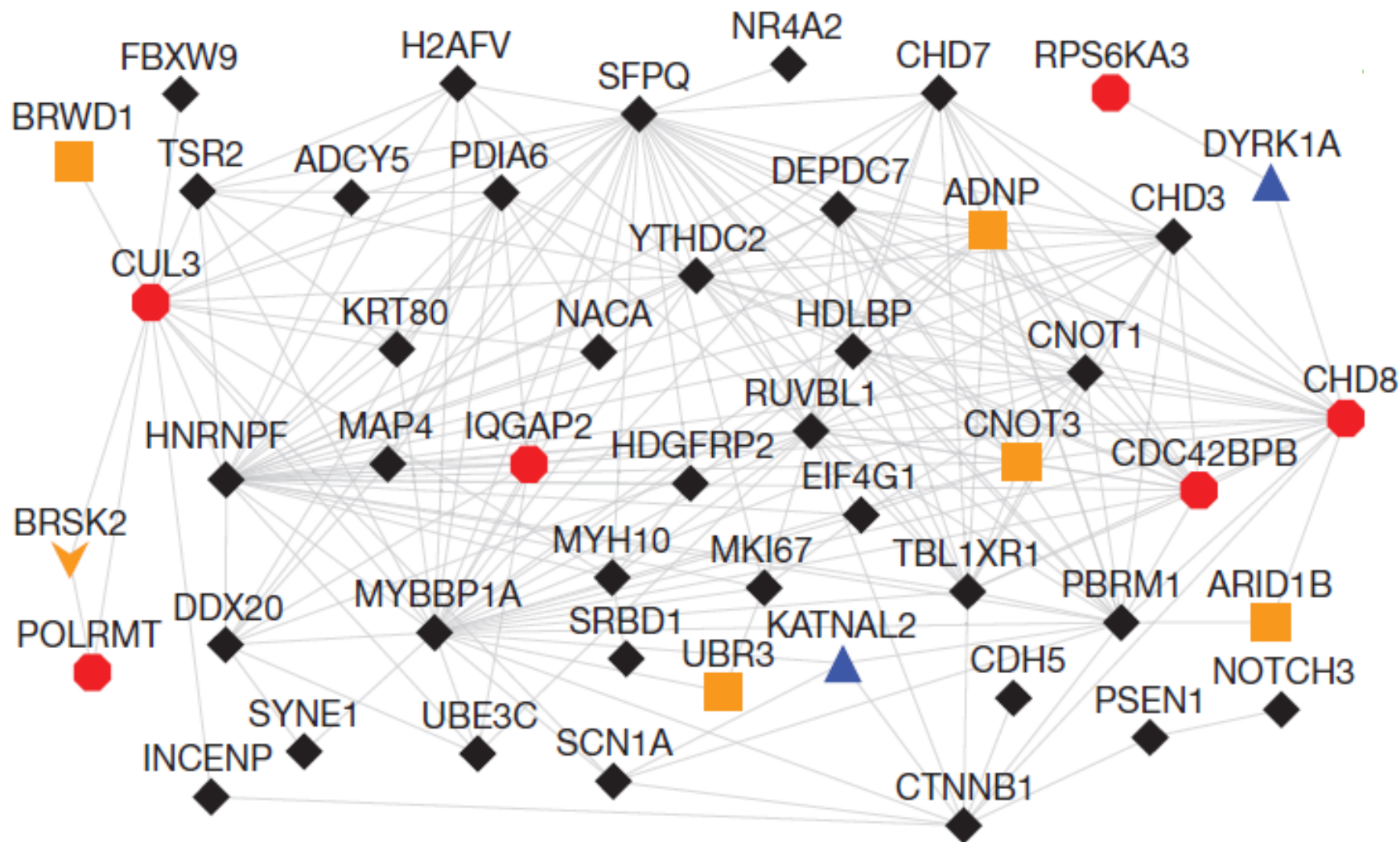
Brian J. O’Roak,¹ Laura Vives,¹ Wenqing Fu,¹ Jarrett D. Egertson,¹ Ian B. Stanaway,¹ Ian G. Phelps,^{2,3} Gemma Carvill,^{2,3} Akash Kumar,¹ Choli Lee,¹ Katy Ankenman,⁴ Jeff Munson,⁴ Joseph B. Hiatt,¹ Emily H. Turner,¹ Roie Levy,¹ Diana R. O’Day,² Niklas Krumm,¹ Bradley P. Coe,¹ Beth K. Martin,¹ Elhanan Borenstein,^{1,5,6} Deborah A. Nickerson,¹ Heather C. Mefford,^{2,3} Dan Doherty,^{2,3} Joshua M. Akey,¹ Raphael Bernier,⁴ Evan E. Eichler,^{1,7*} Jay Shendure^{1*}

Science 338:1619-1622 (2012)

Rare variants and *de novo* mutations

- *Nature* paper: 677 individual exomes from 209 families
- About 40% of severe/disruptive *de novo* mutations map to β -catenin/chromatin remodeling protein network
- *Science* paper: Followed up on these results by sequencing 44 candidate genes in 2446 patients
- Mutations in 6 genes (*CHD8*, *DYRK1A*, *GRIN2B*, *TBR1*, *PTEN*, & *TBL1XR1*) may contribute to 1% of sporadic ASDs
- Consistent with oligogenic model where *de novo* mutations and rare variants contribute to genetic risk

Gene Network Analysis




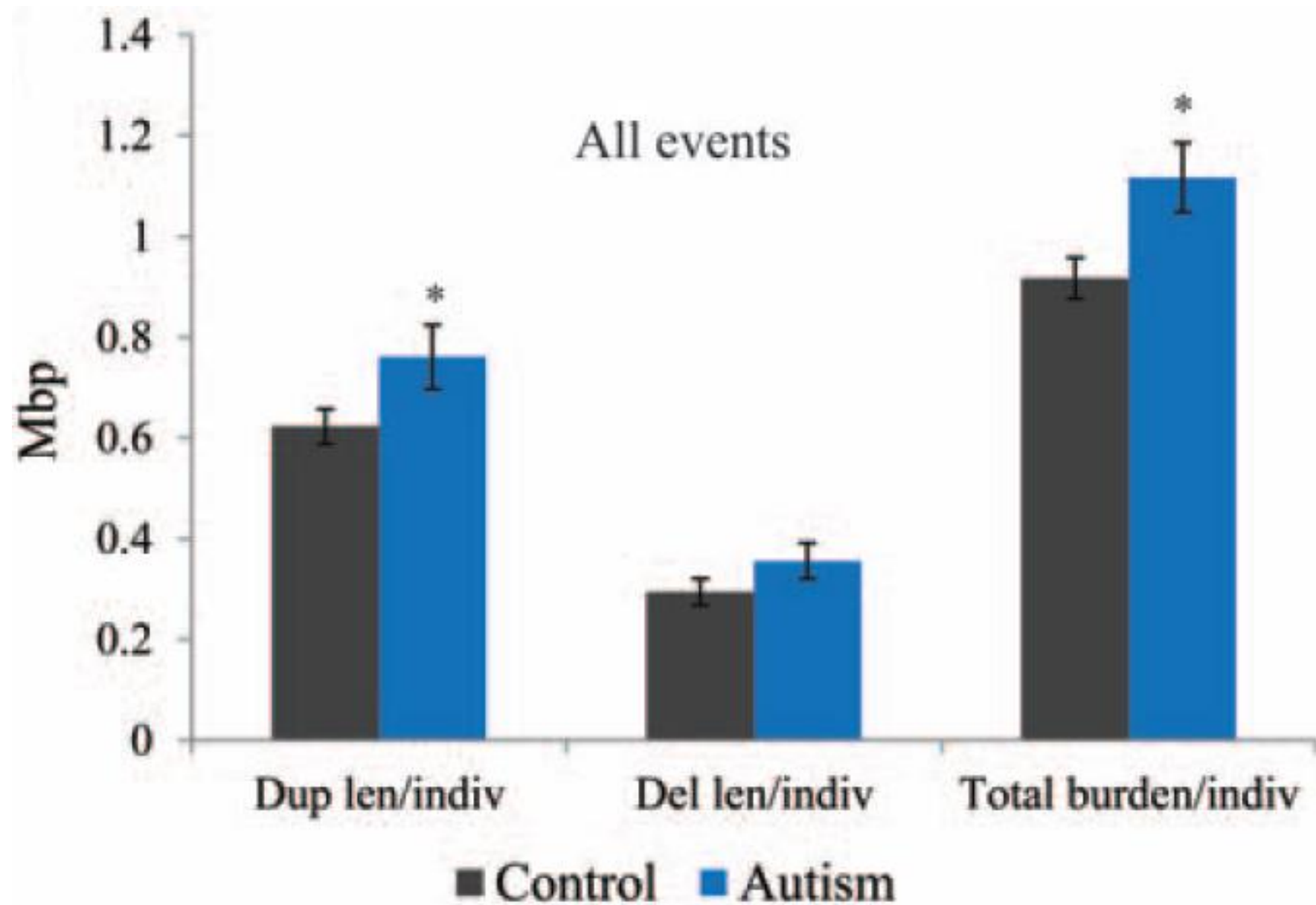
● Nonsense ▲ Splice ◆ Missense ■ Frameshift ▼ Deletion of amino acid

Global increases in both common and rare copy number load associated with autism

Santhosh Girirajan^{1,2,3,*}, Rebecca L. Johnson^{4,5}, Flora Tassone^{6,8}, Jorune Balciuniene^{4,5,10}, Neerja Katiyar², Keolu Fox¹, Carl Baker¹, Abhinaya Srikanth², Kian Hui Yeoh², Su Jen Khoo², Therese B. Nauth^{4,5}, Robin Hansen^{6,7}, Marylyn Ritchie², Irva Hertz-Picciotto⁶, Evan E. Eichler¹, Isaac N. Pessah^{6,9} and Scott B. Selleck^{2,4,5,*}

Human Molecular Genetics Advanced Access April 19, 2013

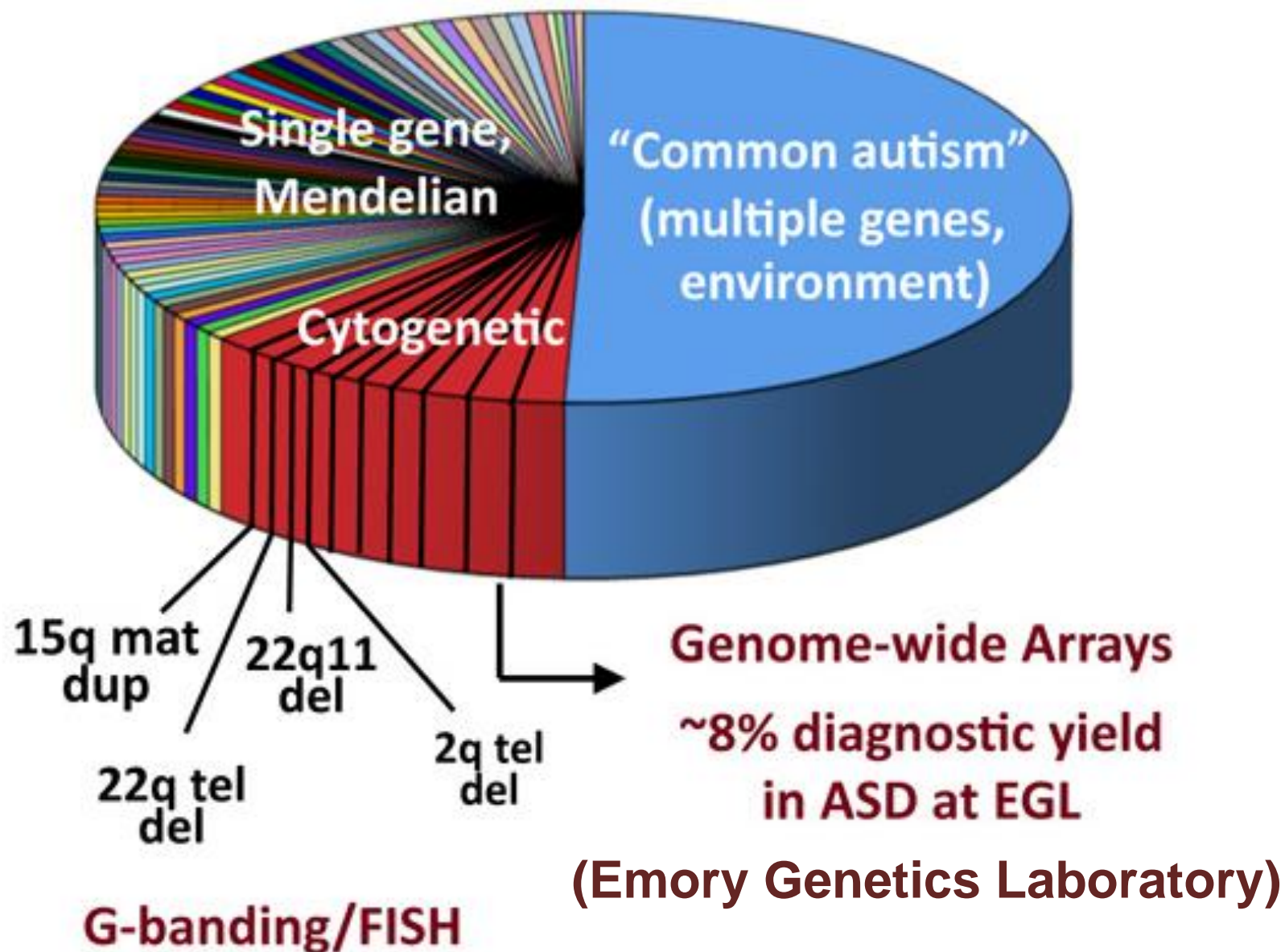
- 
-
- CNV data from 274 cases and 242 controls
 - 120 genomic hotspots for >50-kb events
 - Entire genome for variants >300-kb using arrayCGH



Take home messages

- CNV load, predominantly duplications, predisposes to autism
- Genomic regions with a significant role in autism are associated with substantial clinical heterogeneity
 - seizure disorder, schizophrenia, and developmental delay
- Few autism-specific genes, but a collection of genes affecting phenotypes associated with autism
- Autism-associated genetic variants discovered thus far only begin to account for the estimated heritability
- Anything that increases genomic instability could contribute to the genesis of these disorders

Causes of Autism



Risk allele frequency and genetic effect sizes

