

# Week 2.2 Introduction to Genomics

Ted Laderas

2018-04-11

# Reading Assignments

1. Why do genomics? <https://discoveringthegenome.org/discovering-genome/what-genomics-why-do-genomics/health>
2. What are proteins and what do they do?  
<https://ghr.nlm.nih.gov/primer/howgeneswork/protein>
3. How do genes direct the production of proteins?  
<https://ghr.nlm.nih.gov/primer/howgeneswork/makingprotein>
4. Interactive Presentation about Central Dogma and Genetic Medicine:  
<http://www.hhmi.org/biointeractive/central-dogma-and-genetic-medicine>
5. Intro to sequencing: <https://discoveringthegenome.org/discovering-genome/dna-sequencing/sequencing-synthesis>

# Genomics

What is genomics?

As opposed to *genetics*, which is more concerned with single genes, the term *genomics* covers the entire genome

# Last Time

- We talked about finding association of disease with SNPs
- This time, we're actually looking at understanding the effect and mechanism of mutations

# What is the difference...

What is the difference between a mutation and a variant?

# What is the difference...

What is the difference between a mutation and a variant?

Has to do with frequency - mutations are much more rare than variants

# What is the difference...

What is the difference between a mutation and a variant?

Has to do with frequency - mutations are much more rare than variants

# Our Motivation

## Pamela's Story

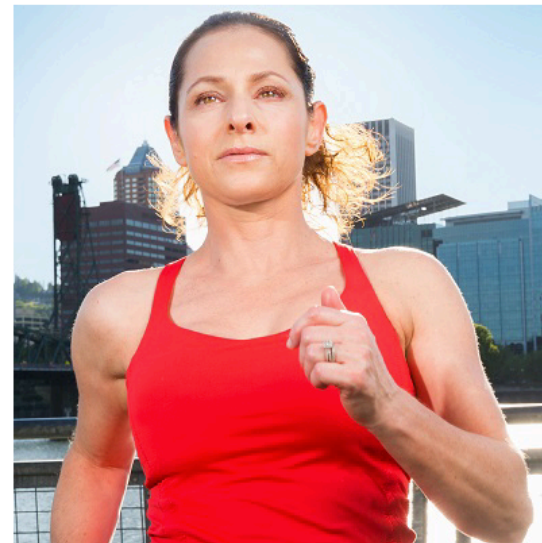
Pamela's Story Pamela, an OHSU breast cancer patient, shares her story. Pamela, an OHSU breast cancer patient, shares her story.

### Thriving with love, wisdom and gratitude

By Pamela Feidelson

My cancer journey started almost 10 years ago while at a routine check-up with my gynecologist. As she was doing the breast exam, she felt a lump. She instructed me to go immediately to the Breast Center at OHSU to have what would be my first mammogram at 38 years old. I'd say I was nervous but with not a huge amount of concern since it's not like breast cancer was prevalent in my family, nor did I know any woman my age with the disease. But my doctor said it was worth being checked out, and I was able to get an appointment right away. I went in for the mammogram and then an ultrasound, and it was after the ultrasound that the radiologist told me she was concerned and wanted to do a biopsy. It was at that moment that I became considerably emotional. I broke down and cried. I think I knew. Three agonizing days later, while sitting in my office at OHSU where I worked at the time, I got the phone call that changed my life with those three little words: You have cancer.

No stone unturned



<https://www.ohsu.edu/xd/health/services/cancer/patient-stories/pamelas-story.cfm>

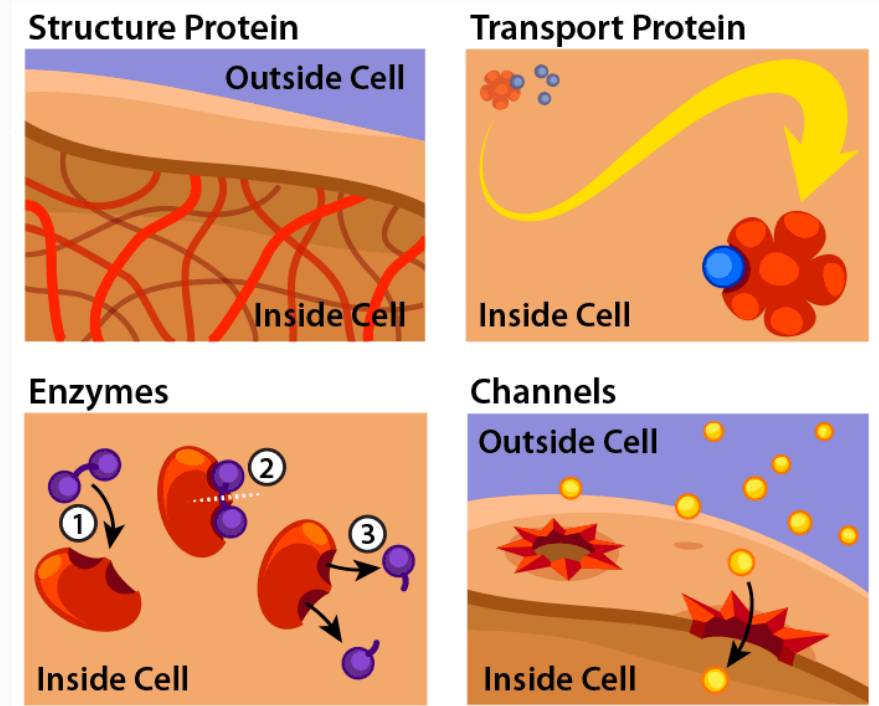


# Learning Objectives

1. What are proteins and how are they made in the body?
2. What is a mutation? How can mutations disrupt protein functions?
3. What is a reference sequence and why is it important in sequencing?
4. What is Next Generation Sequencing and how do we use it to detect mutations?
5. Activity: Looking at a mutation in cancer
6. Biology of Cancer

# Proteins are the machinery of the cell

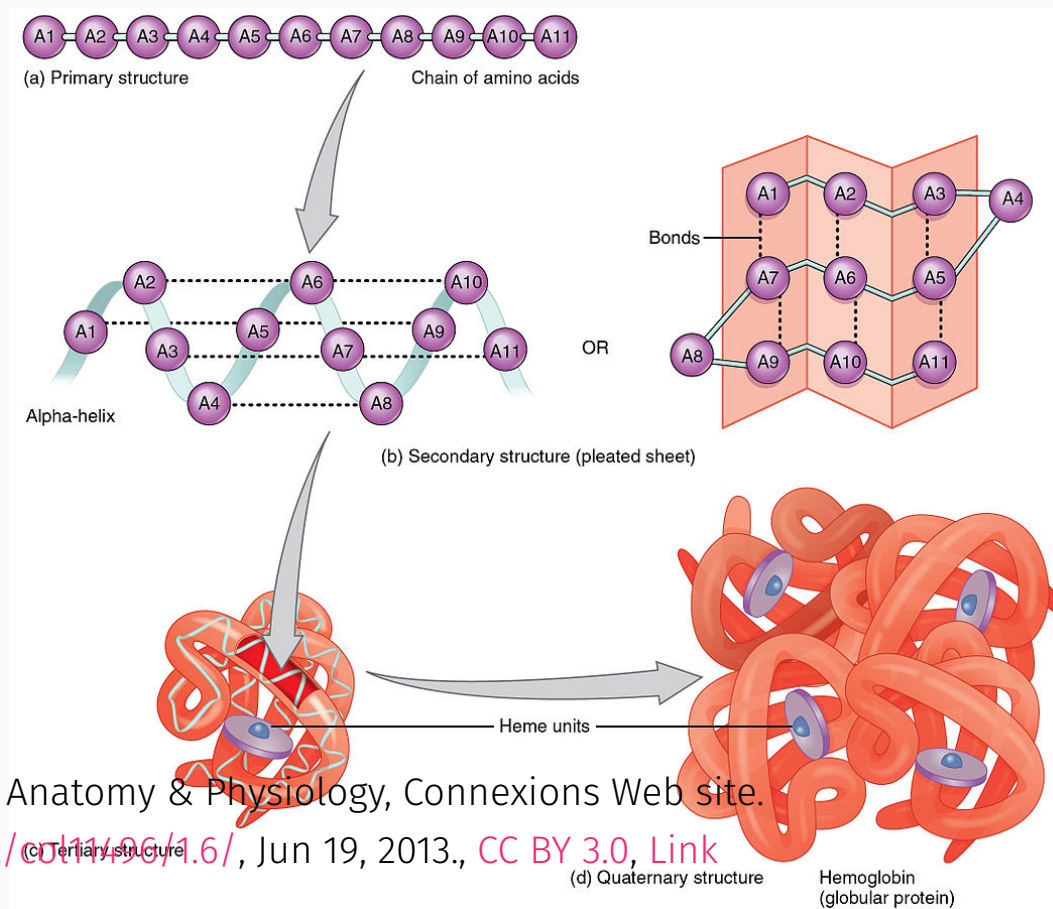
- Proteins serve **lots of different functions** in the cell
  - Structure
  - Antibody (allergies)
  - Messenger (hormones)
  - Enzyme (assist with reactions)
  - Transport/Storage



<https://askabiologist.asu.edu/venom/what-are-proteins>

# How are proteins constructed?

- Sequences of 20 different amino acids make up parts of the protein
- amino acid chains "fold" to make up parts
- sequence of amino acids determines the structure



By OpenStax College - Anatomy & Physiology, Connexions Web site.

<http://cnx.org/content/col11966/1.6/>, Jun 19, 2013, CC BY 3.0, Link

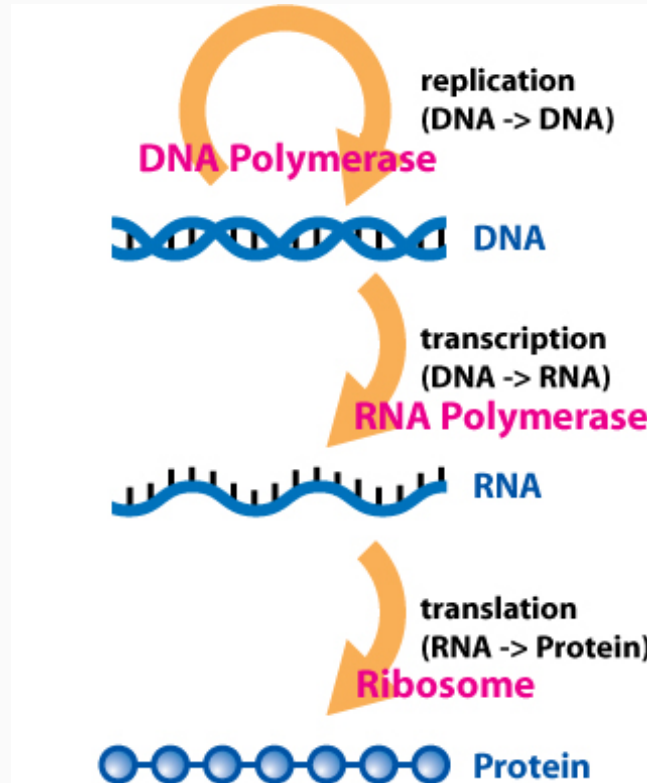
# Proteins gone bad

- Specifying the wrong amino acid in a sequence can lead to changes in the protein structure
- Changes in protein structure can disrupt the function of proteins
- Can change phenotype!

We're going to be looking at BRAF, which is a protein that is altered in cancer.

# How do we get from gene to protein?

Central Dogma:



[https://en.wikipedia.org/wiki/Central\\_dogma\\_of\\_molecular\\_biology](https://en.wikipedia.org/wiki/Central_dogma_of_molecular_biology)

# For right now, just think

Gene -> Complementary Strand -> Protein

# 3 bases = 1 codon

Codons: 3 nucleotide bases in the DNA = 1 amino acid in protein

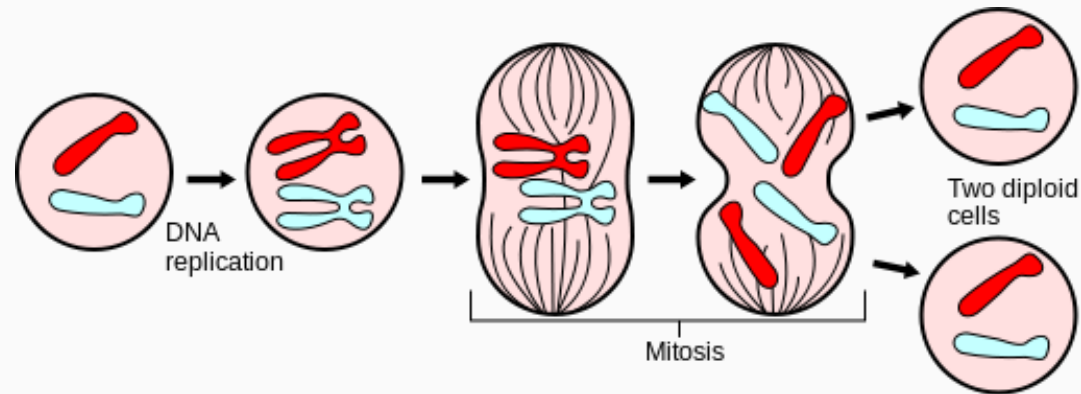
Example: GCT = Alanine

What AA is coded by CAC?

<https://www.yourgenome.org/activities/kras-cancer-mutation>

# Our cells replicate

- During cell division (mitosis), chromosomes line up to be replicated in each cell
- Special enzymes (polymerases) produce copies of the cell DNA
- Each step has an opportunity to go wrong and introduce mistakes in the replication



[https://commons.wikimedia.org/wiki/File:Major\\_events\\_in\\_mitosis.svg](https://commons.wikimedia.org/wiki/File:Major_events_in_mitosis.svg)



# Mistakes Happen

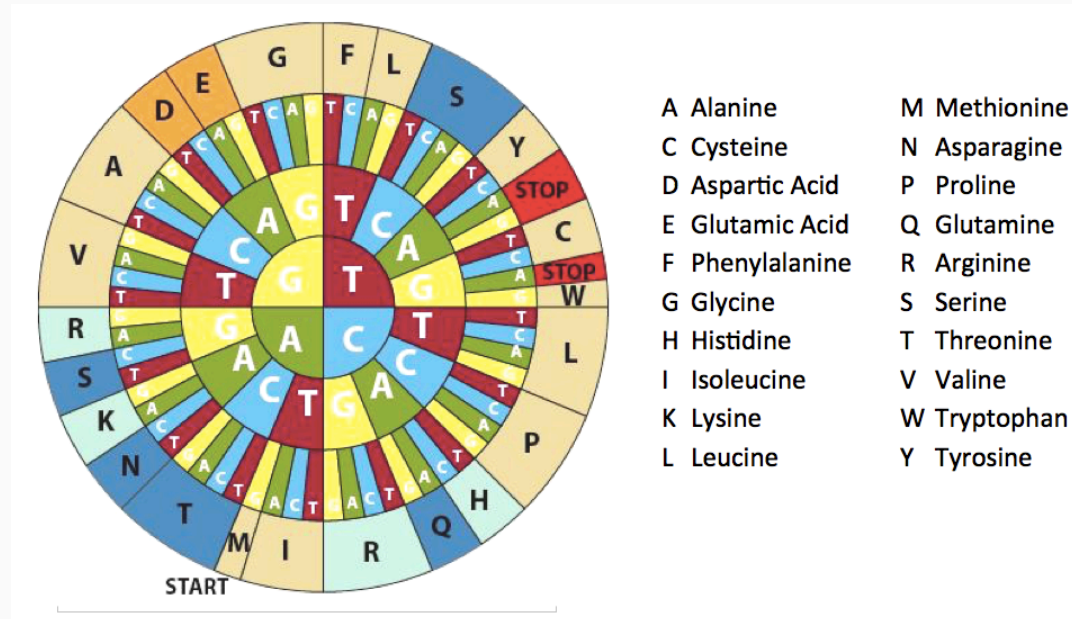
- Mistakes may happen in replication
- Introduce mutations in the sequence of replicated cells
- Enzymes can correct some mistakes, but not all

# Mutations can alter protein function

- Mutations can change amino acid specified
- Genetic mutations can alter which amino acid is used in a protein sequence
- Alterations in Amino Acids

# Not all Mutations are the same!

What do you notice about the coding wheel?



- *synonymous mutations* (no change in AA)
- *non-synonymous mutations* (cause change in AA)

<https://www.yourgenome.org/activities/kras-cancer-mutation>

# Reference Genomes are Important

We need **reference genomes**, which are derived from only a few individuals.

We need these to *align* our own sequencing samples to locations in the genome

This works because human genomes are 99.9% similar to each other.

# Lots of little pieces

- Extract DNA from tissue sample
- **Fragment DNA** into tiny pieces
- Sequence these tiny pieces all at once!
- *Sequence Read*: one of these tiny pieces

W3110 Contig 1 — Editor

Locked Text View Prefs Replica Add Seqs Remove Seqs Align Translations Dots Create Width First Mismatch Next M

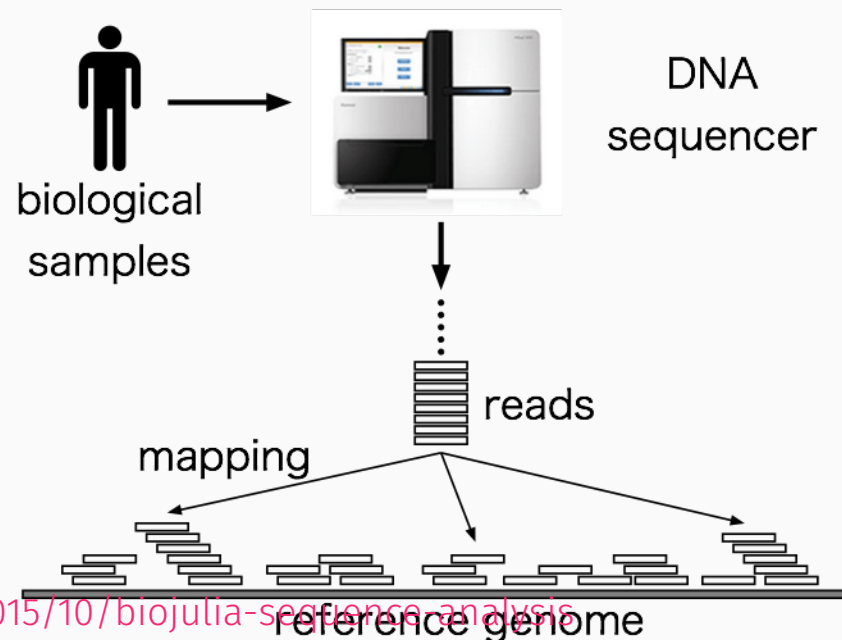
Editor	Map	Features	Annotations	Summary	SNPs	VCF
W3110 Contig 1						
Consensus						
SLXA-EAS....339:896/1						
SLXA-EAS....452:760/1						
SLXA-EAS....825:469/1						
SLXA-EAS....335:636/2						
SLXA-EAS....461:859/1						
SLXA-EAS....255:588/2						
SLXA-EAS....8:56:956/1						
SLXA-EAS....799:274/2						
SLXA-EAS....374:277/2						
SLXA-EAS....3:79:686/2						
SLXA-EAS....320:432/2						
SLXA-EAS....493:698/2						
SLXA-EAS....359:811/2						
SLXA-EAS....6:50:156/2						
SLXA-EAS....805:642/1						
SLXA-EAS....739:704/2						
SLXA-EAS....834:453/2						
SLXA-EAS....474:375/1						
SLXA-EAS....869:872/2						
SLXA-EAS....821:564/2						
SLXA-EAS....685:895/1						
SLXA-EAS....170:477/1						
SLXA-EAS....908:435/1						
SLXA-EAS....975:622/2						
SLXA-EAS....674:735/1						
SLXA-EAS....615:818/1						

<http://macvector.com/Assembler/bowtiensassembly.html>

# Aligners

Heavy duty programs that take all the sequence pieces and align them to genome

- Aligning one read may take time
  - need to search over 3 Billion places in the genome
- Aligners try to align many reads at once
- Still takes a long time!
- Using them requires understanding sequencing technology

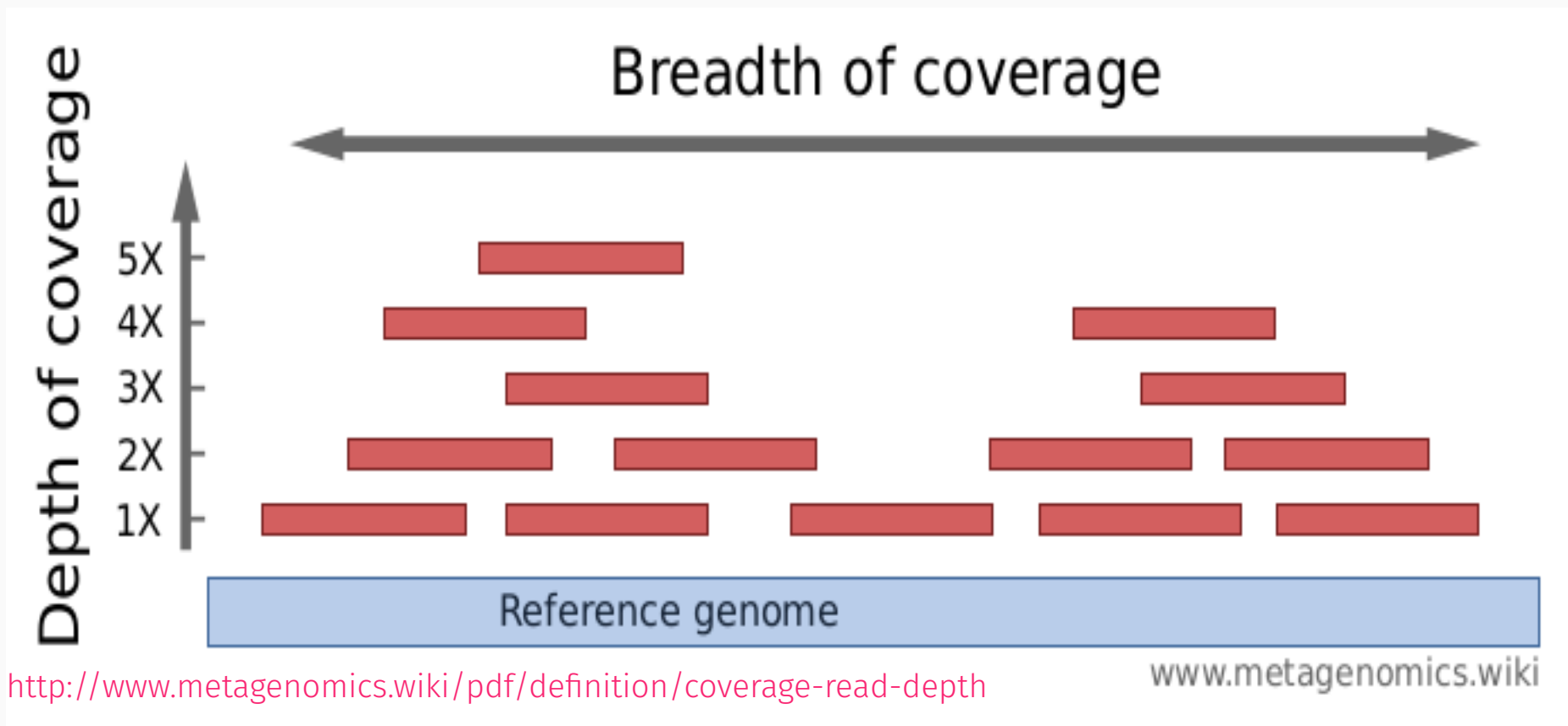


<https://julialang.org/blog/2015/10/biojulia-sequence-analysis>

# What evidence is there?

Our results can be summarized with two terms:

- *Coverage* - How much of the genome do our reads align to?
- *Depth* - How many reads are there for a particular position at the genome



# Errors in sequencing

- Sequence calling process has errors
- Can impact alignment and evidence
  - Good aligners incorporate thinking about types of errors
- Solution: incorporate *quality* scores for each position
- Look for errors in the sequence data



# Matched Normal/Tumor samples

In cancer, we try to compare *tumor* tissue with *normal* tissue when we sequence. Why?

# Matched Normal/Tumor samples

In cancer, we try to compare *tumor* tissue with *normal* tissue when we sequence. Why?

We do this to separate genomic alterations into two types:

- *germline* - alterations that are inherited by birth
- *somatic* - alterations that are acquired after birth

# In-class assignment: Genomics

Today we're going to look at a particular oncogene that is implicated in cancer: BRAF

Download the Codon Wheel and the Sample Sheet in [2.2/in-class-activity/](#) in D2L

Put your results here:

<https://docs.google.com/spreadsheets/d/1QqQ4x2kBlkxA8kt9ookbXVq6otoeuqNM6CaQse22Wj8/edit?usp=sharing>

<https://www.yourgenome.org/sites/default/files/downloads/activities/braf-from-gene-to-cancer-therapy/>

# Translating

1. Find the consensus sequence first
2. Translate that into the complementary strand
  1. Remember, A pairs with T and C pairs with G
3. Working backwards, translate the complementary sequence into Amino Acids

consensus sequence

ATT TCT TAC

TAA AGA ATG

complementary sequence

I R V <----

amino acid sequence (work backwards)

# Some things to think about

What does an error look like, and what does a mutation look like?

When you translate to amino acids, read in the 5' to the 3' direction

# Discussion: What are your findings?

# Point mutations are only one kind

- Lots of other genomic alterations are associated with cancer
- Genomic Rearrangement
- Immune system
- Epigenome

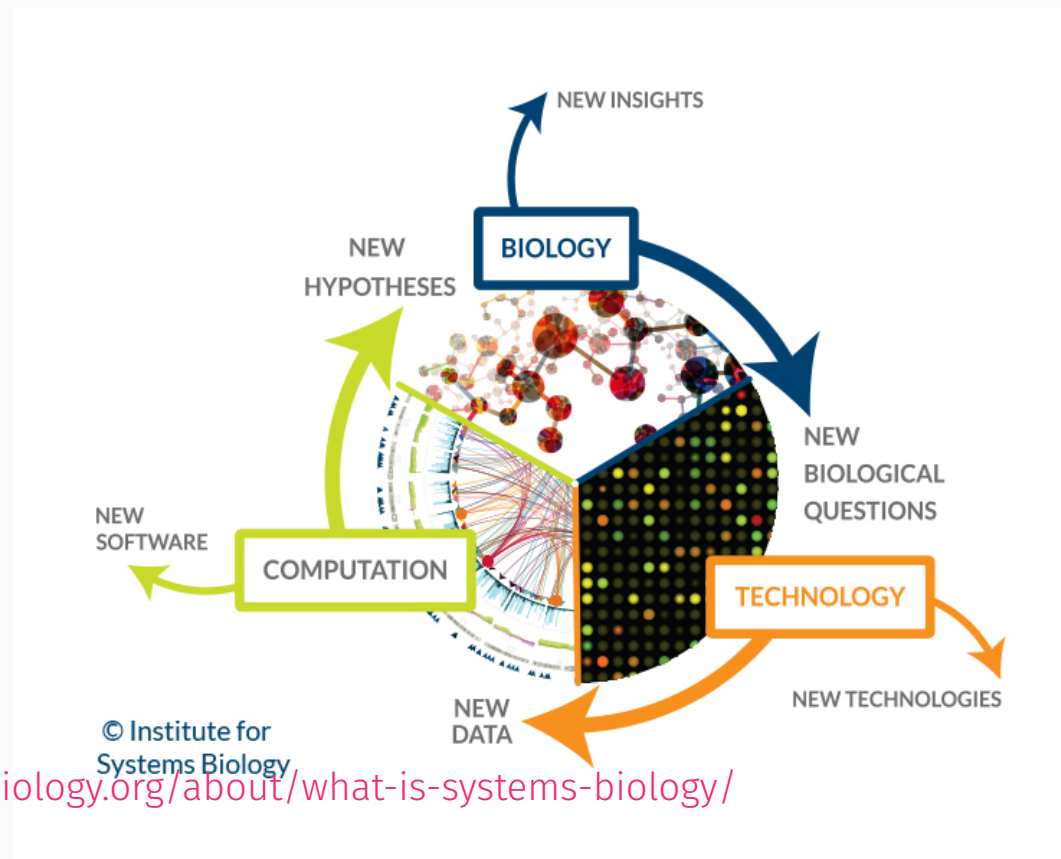
# "omics"

- quantitative measurements on cells and people
  - multiple things are measured at once ("high-throughput")
    - proteomics - measure levels of proteins
    - transcriptomics - measure levels of RNA
    - metabolomics - measure abundance of bacteria
    - immunomics - measure immune system cells



# Need the bigger picture!

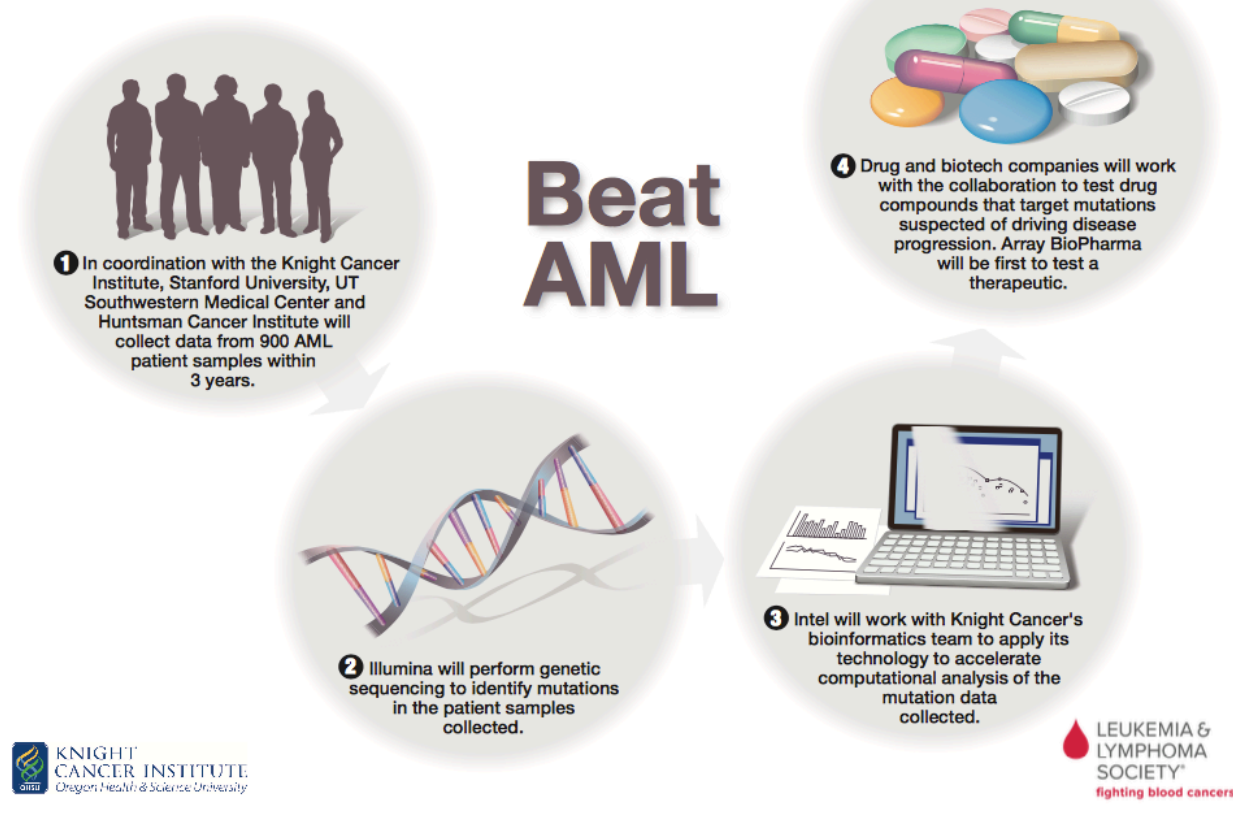
- Systems Biology of Cancer
- Understand how cell function is dysregulated
- Requires integrating across omics measurements
- Requires previous knowledge of low-throughput biology



# BeatAML

## Personalized medicine approach to treating AML

The Leukemia & Lymphoma Society (LLS) and the Knight Cancer Institute at Oregon Health & Science University are leading a pioneering collaboration to develop a precision medicine approach to improve outcomes for patients with acute myeloid leukemia (AML), a particularly devastating cancer of the blood and bone marrow. LLS provided \$8.2 million to fund Beat AML and here is how the collaboration will work:



<http://www.ohsu.edu/xd/health/services/cancer/about-us/druker/beat-acute-myeloid-leukemia.cfm>