

Mendelian Inheritance

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Genes — Mendelian Inheritance



Gregor Mendel, monk in a monastery in Brünn (now Brno in Czech Republic): Breeding experiments with the garden pea: Flower color and seed shape (phenotypes) are determined by “factors” (now “genes”) that are passed through generations. He formulated two laws of inheritance that he thought were generally valid.



Mendel's Laws

- **First Law, *Segregation of Characteristics*:** Of a pair of characteristics (e.g. blue and brown eye color) only one can be represented in a gamete even though there are two genes in ordinary cells.
- **Second Law, *Independent Assortment*:** For two characteristics, the genes are inherited independently. Today we make use of deviations from this law for statistical gene mapping.

Mendel's paper



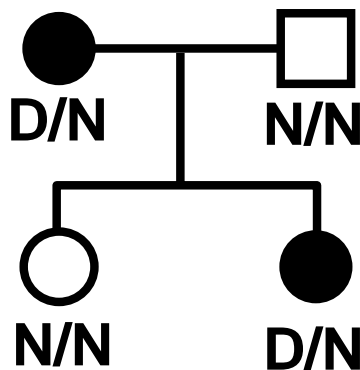
Mendel GJ (1866)
Versuche über Pflanzen-Hybriden. *Verh Naturforsch Ver Brünn* 4:3-47

Ironically, when Mendel's paper was published in 1866, it had little impact. It wasn't until the early 20th century that the enormity of his ideas was realized.

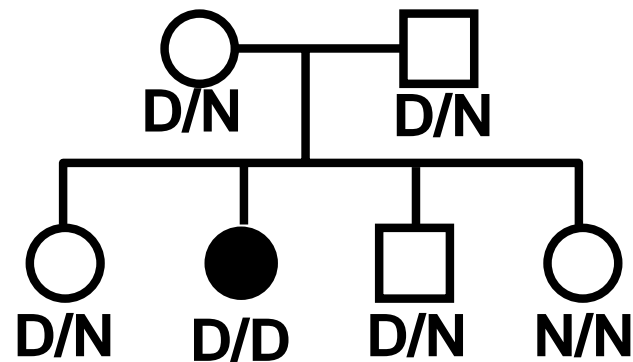
Simple Modes of Inheritance

- Trait due to a single gene
- Examples:
 - Huntington disease (dominant)
 - Cystic fibrosis (recessive)

Dominant

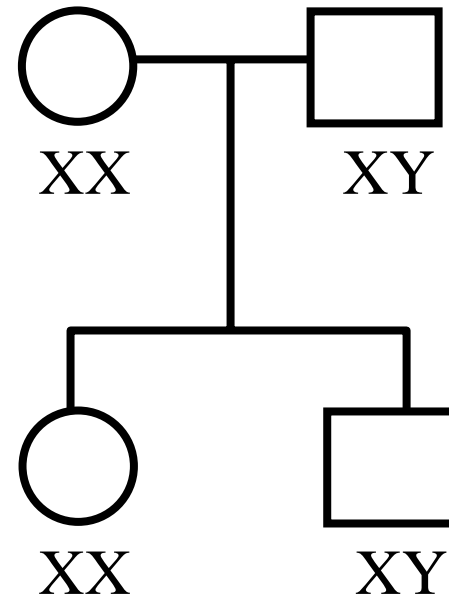


Recessive

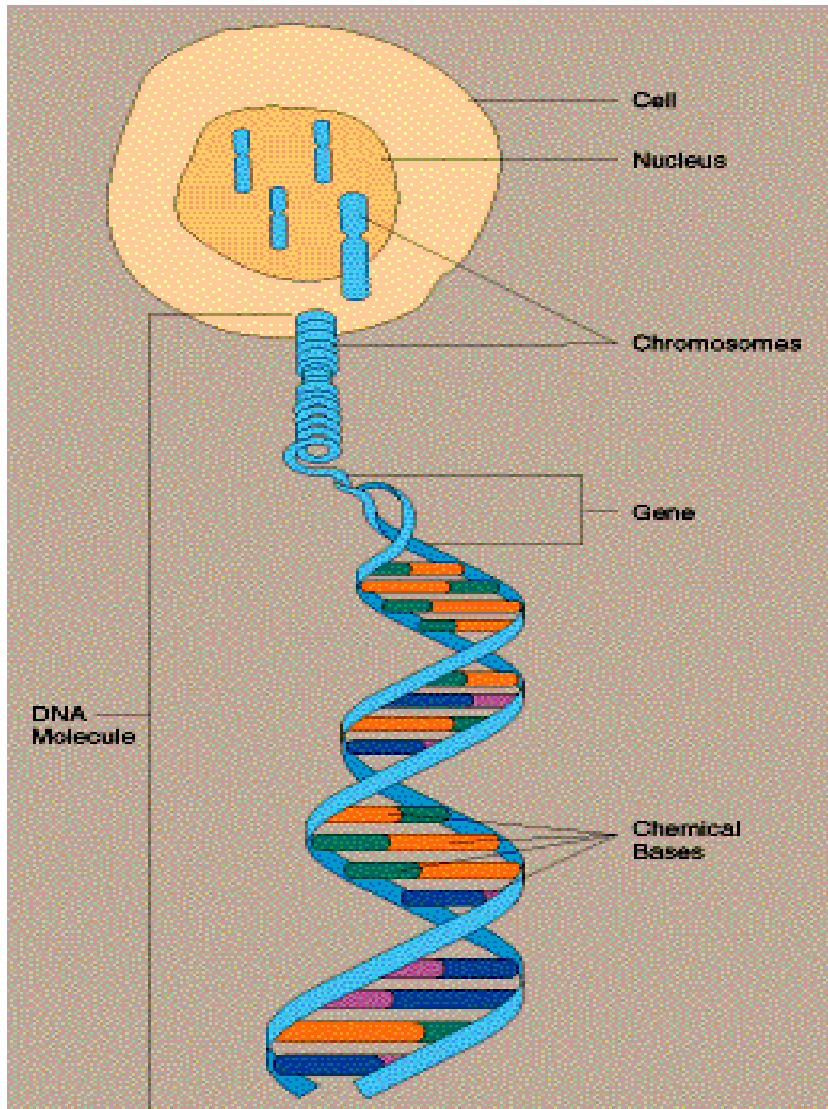


X-Linked Inheritance

- *Female genotypes:*
As for autosomal genes
- *Male genotypes:* N/y and D/y (hemizygous)
- Examples (usually recessive): hemophilia, red/green color blindness, Duchenne muscular dystrophy



Genetic Inheritance



- Genes are arranged along chromosomes
- Genes code for enzymes, blood groups, etc.
- Gene defects may cause disease.
- Chromosomes and genes are passed from parents to children.

Genotype and Phenotype

- **Genotype** = set of 2 alleles at a locus (gene) in an individual. *Examples:* A/G (marker alleles), N/A (disease alleles)
- **Phenotype** = “what you see”, expression of this genotype. *Examples:* A/G (marker), affected (disease).

Relation between Genotype and Phenotype

Dominant

| <i>Pheno- type</i> | <i>Genotype</i> | | |
|------------------------|-----------------|------------|------------|
| | <i>N/N</i> | <i>A/N</i> | <i>A/A</i> |
| <i>unaffected</i> | 1 | 0 | 0 |
| <i>affected</i> | 0 | 1 | 1 |

Recessive

| <i>Pheno- type</i> | <i>Genotype</i> | | |
|------------------------|-----------------|------------|------------|
| | <i>N/N</i> | <i>A/N</i> | <i>A/A</i> |
| <i>unaffected</i> | 1 | 1 | 0 |
| <i>affected</i> | 0 | 0 | 1 |

Table entries = penetrances. Usually, only 1 line needed (affected).

Penetrance = conditional probability of phenotype given genotype.

Penetrance = probability of being affected given genotype (diseases).

ABO Blood Types

3 alleles: A, B, 0

| <i>Pheno- type</i> | <i>Genotype</i> | | | | | |
|------------------------|-----------------|------------|------------|------------|------------|------------|
| | <i>A/A</i> | <i>A/B</i> | <i>A/0</i> | <i>B/B</i> | <i>B/0</i> | <i>0/0</i> |
| <i>A</i> | 1 | 0 | 1 | 0 | 0 | 0 |
| <i>B</i> | 0 | 0 | 0 | 1 | 1 | 0 |
| <i>AB</i> | 0 | 1 | 0 | 0 | 0 | 0 |
| <i>0</i> | 0 | 0 | 0 | 0 | 0 | 1 |

Generalized mendelian inheritance

| <i>Genotype</i> | <i>NN</i> | <i>DN</i> | <i>DD</i> |
|-------------------|-------------|-------------|-----------|
| <i>Frequency</i> | $(1 - p)^2$ | $2p(1 - p)$ | p^2 |
| <i>Penetrance</i> | f_1 | f_2 | f_3 |

p = population frequency of D allele

$$\text{Prevalence} = (1 - p)^2 f_1 + 2p(1 - p) f_2 + p^2 f_3$$

Penetrance: Cystic fibrosis

p = frequency of disease alleles, 0.025

| <i>Genotype</i> | <i>NN</i> | <i>DN</i> | <i>DD</i> |
|-------------------|-----------|-----------|-----------|
| <i>Frequency</i> | 0.9506 | 0.0488 | 0.0006 |
| <i>Penetrance</i> | 0 | 0 | 1 |

Incidence = Prevalence at birth = 0.0006 = 1/1600

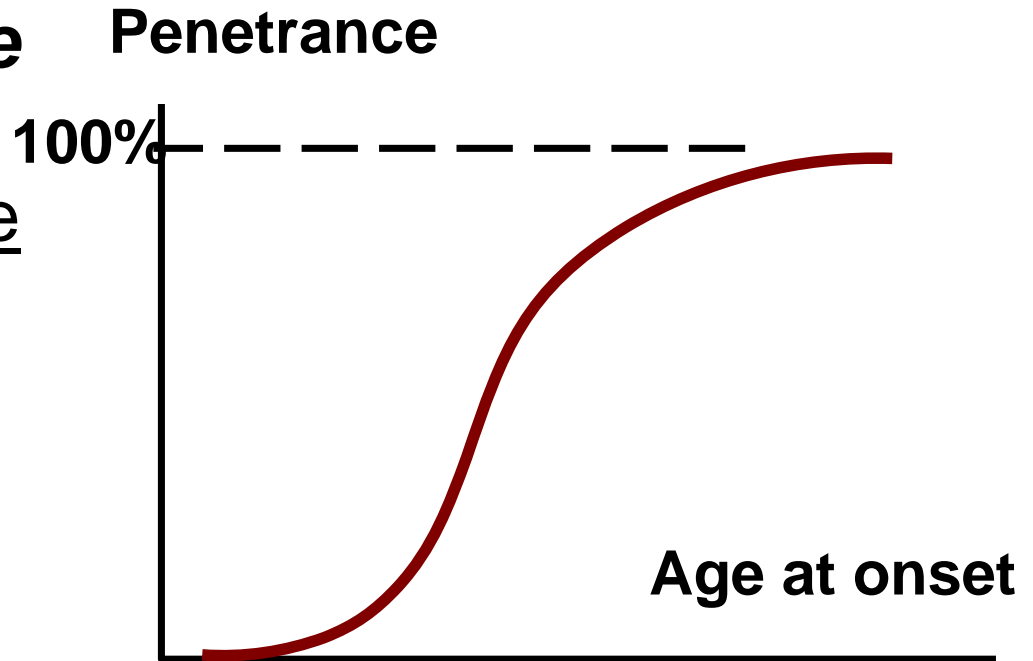
Carrier frequency = 0.0488 \approx 1/20

Age-dependent penetrance

Huntington disease

| <u>Age class</u> | <u>Penetrance</u> |
|------------------|-------------------|
|------------------|-------------------|

| | |
|-------|------|
| 0-15 | 0.02 |
| 16-30 | 0.33 |
| 31-45 | 0.58 |
| 46-60 | 0.71 |
| 61+ | 0.94 |



Penetrance = Proportion of susceptible individuals affected by given age

Torsion Dystonia

Median age of onset \approx 10 years

Penetrance at high age \approx 30%

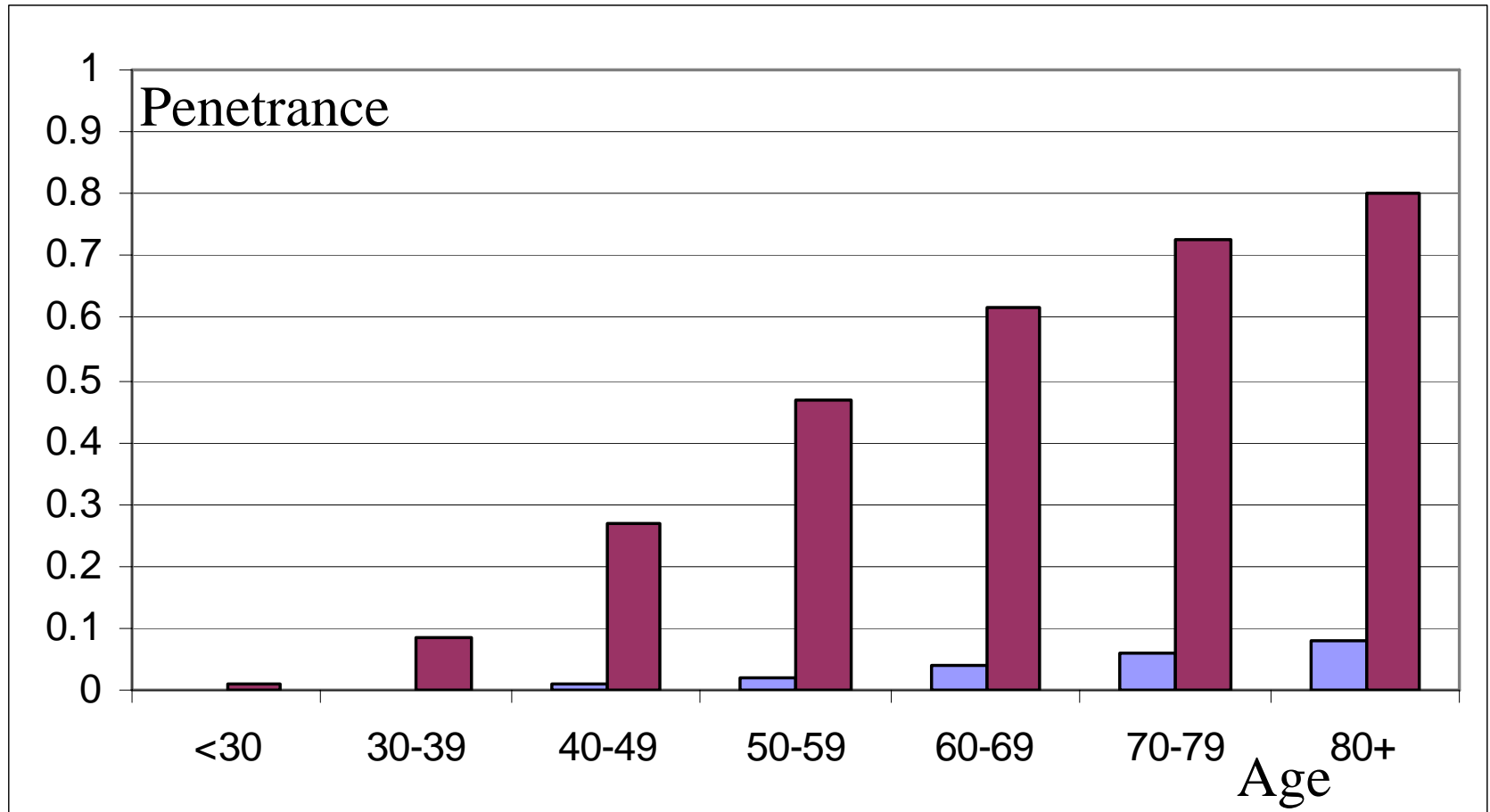
Familial Breast Cancer, BRCA1

Newman et al. (1988) *PNAS* **85**, 3044

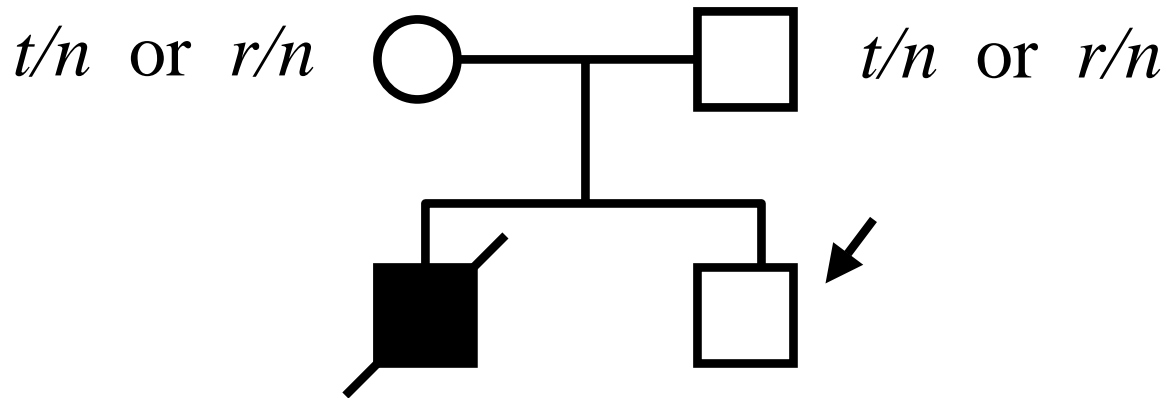
Easton et al. (1993) *Am J Hum Genet* **52**, 678

| <i>Age group</i> | <i>P(affected by given age)</i> | | |
|----------------------|---------------------------------|-----------|-----------|
| | <i>dd</i> | <i>Dd</i> | <i>DD</i> |
| <30 | .00009 | .008 | .008 |
| 30-39 | .00146 | .083 | .083 |
| 40-49 | .0083 | .269 | .269 |
| 50-59 | .021 | .469 | .469 |
| 60-69 | .039 | .616 | .616 |
| 70-79 | .061 | .724 | .724 |
| 80+ | .082 | .801 | .801 |

Breast Cancer Penetrances



Cystic fibrosis — 3 mating types



Counselee =
unaffected child,
negative for tested
mutations. Carrier?
No genetic marker
information.

t = tested CF mutations
cover 80% of mut.

r = remaining mutations,
20%

| <i>Mother</i> | <i>Father</i> | |
|---------------|---------------|-----------|
| | t/n 0.8 | r/n 0.2 |
| t/n 0.8 | 0.64 | 0.16 |
| r/n 0.2 | 0.16 | 0.04 |

Cystic fibrosis — Calculations

| Mating types | Counselee's genotype | | | |
|----------------|----------------------|-----------------|-----------------|----------|
| | 1/4 | 1/4 | 1/4 | 1/4 |
| t/n × t/n 0.64 | t/t 0.16 | t/n 0.16 | t/n 0.16 | n/n 0.16 |
| t/n × r/n 0.32 | t/r 0.08 | t/n 0.08 | r/n 0.08 | n/n 0.08 |
| r/n × r/n 0.04 | r/r 0.01 | r/n 0.01 | r/n 0.01 | n/n 0.01 |

Risk:
$$\frac{8 + 1 + 1}{8 + 1 + 1 + 16 + 8 + 1} = \frac{10}{35} = \frac{2}{7} = 29\%$$

Heritability

- Linear model for phenotype:
 - $x = g + c + e$. Heritability = $\text{Var}(g)/\text{Var}(x)$
- Gene-environment interactions:
 - CCR5: No effect of mutation without infection
 - Sickle cell anemia: heterozygote advantage in malaria
 - Pima Indians: Obesity, “thrifty gene” hypothesis
- Measure degree of genetic influence by how consistently a trait runs in families

Framingham Study

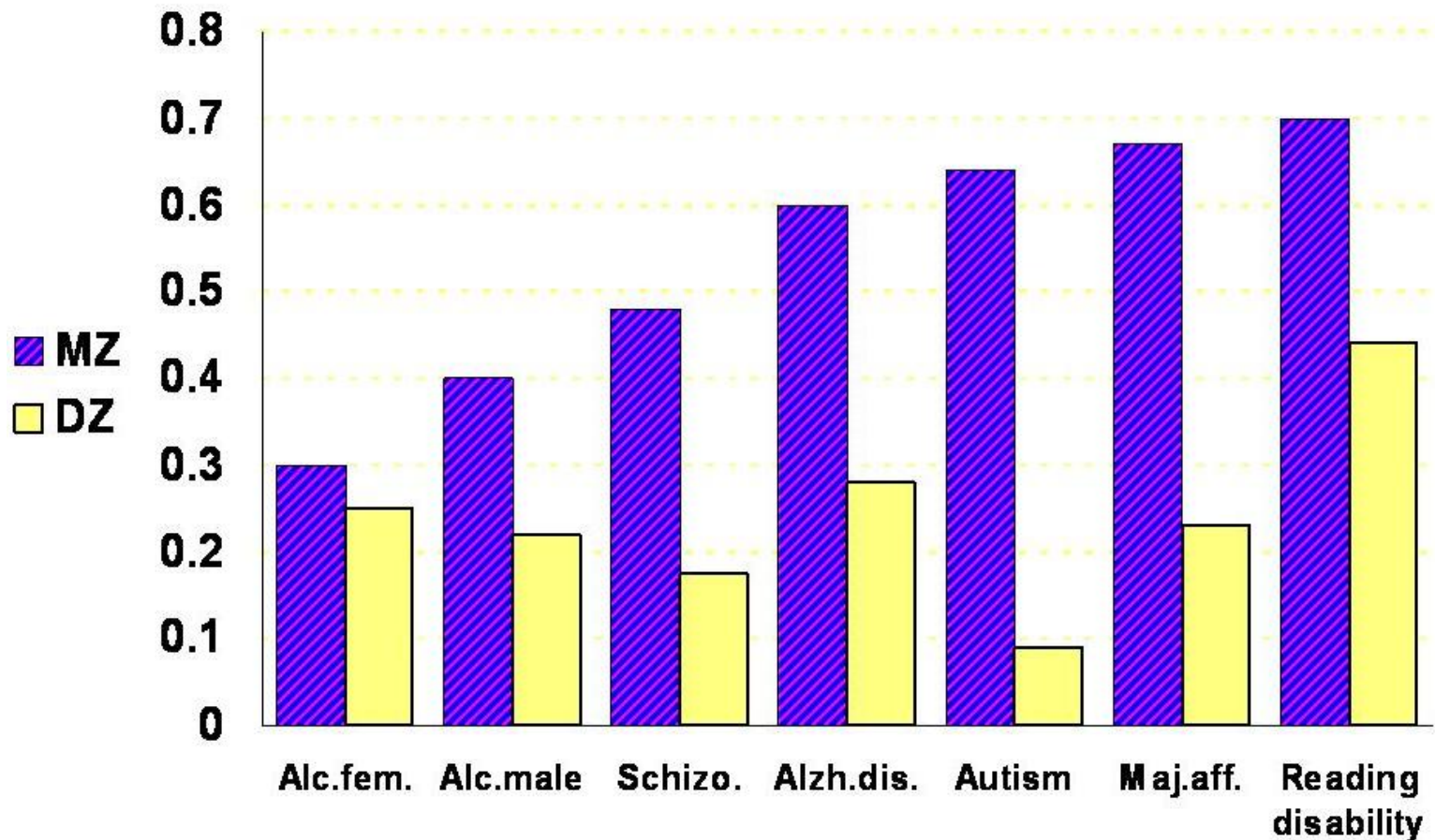
<http://www.nhlbi.nih.gov/about/framingham/policies/pagetwelve.htm>

| Blood Pressure Variable | Families | Subjects | Heritability |
|--|----------|----------|-------------------|
| Systolic Blood Pressure, adjusted for age | 238 | 2067 | 0.323 ± 0.043 |
| Systolic Blood Pressure, adjusted for age, BMI | 238 | 2064 | 0.339 ± 0.043 |

| Lipid Variable | Families | Subjects | Heritability |
|-----------------------------|----------|----------|---------------------------------|
| Total Cholesterol, adjusted | 1366 | 4527 | 0.462 ± 0.034 |
| HDL Cholesterol, adjusted | 1366 | 4527 | 0.433 ± 0.034 |
| Log Lp(a), adjusted | 902 | 1832 | <u>0.805</u> ± 0.064 |
| Log TG, adjusted | 1366 | 4527 | 0.396 ± 0.033 |
| TC / HDL Ratio, adjusted | 1366 | 4527 | 0.410 ± 0.032 |
| TG / HDL Ratio, adjusted | 1366 | 4527 | 0.332 ± 0.031 |

Twin Concordance Rates "Complex Diseases"

Plomin et al. (1994) *Science* **264**, 1734



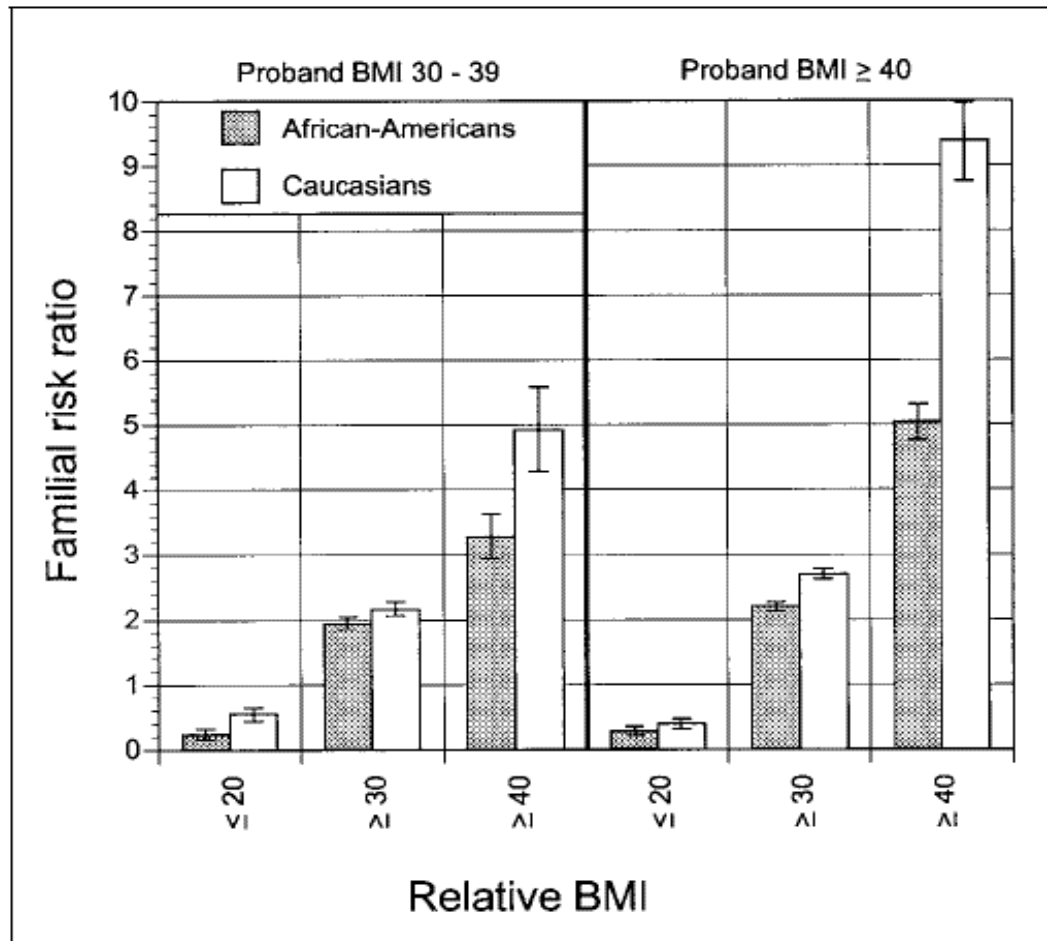
Risch's lambda measure

Risch (1990) *Am J Hum Genet* **46**, 222-228

- Risk, $R_r = \text{Prob}(\text{relative or type } r \text{ has trait given index case has trait})$
- Risk ratio, $\lambda_r = R_r / R_{\text{unrelated}} = R_r / K$, K = population prevalence
- Most common: λ_s = risk ratio to a sib
- CF: $\lambda_s = 1/4 / 0.0006 = 417$

Sib risk ratios for obesity

Price and Lee (2001) *Hum Hered* 51, 35-40



Risk ratios higher when proband and sibling have high BMI → strong obesity is more heritable than mild obesity.