

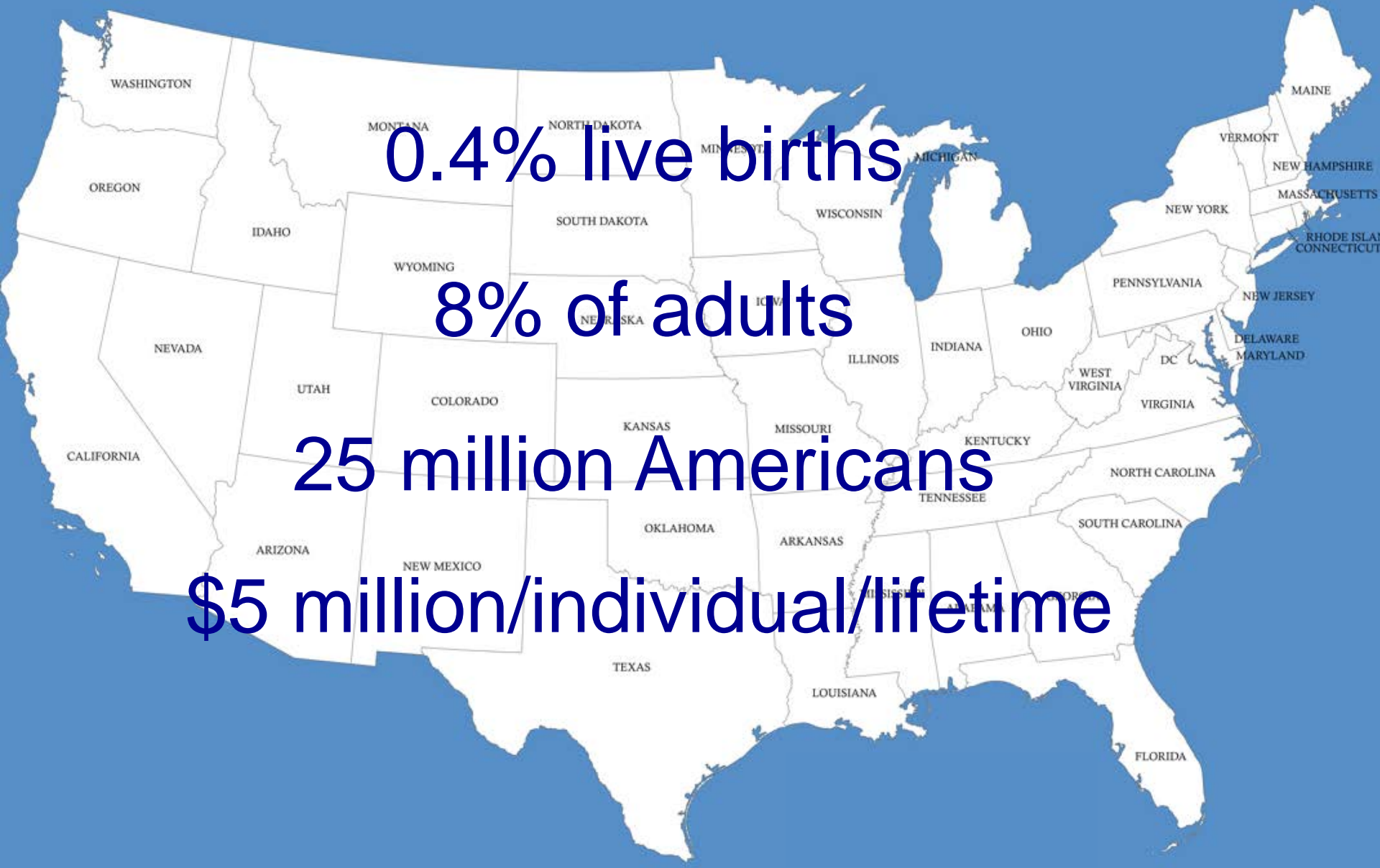
# Discovering the Genomic Bases of Mendelian Diseases

NHGRI Workshop  
July 28, 2014

*Roderick R. McInnes  
Alva Chair in Human Genetics,  
Director, Lady Davis Institute  
McGill University*

- *What is the value of Mendelian genomic research to medicine & society?*
- *Are the Centres for Mendelian Genomics making a substantial contribution?*

MCs are individually uncommon, but collectively



0.4% live births

8% of adults

25 million Americans

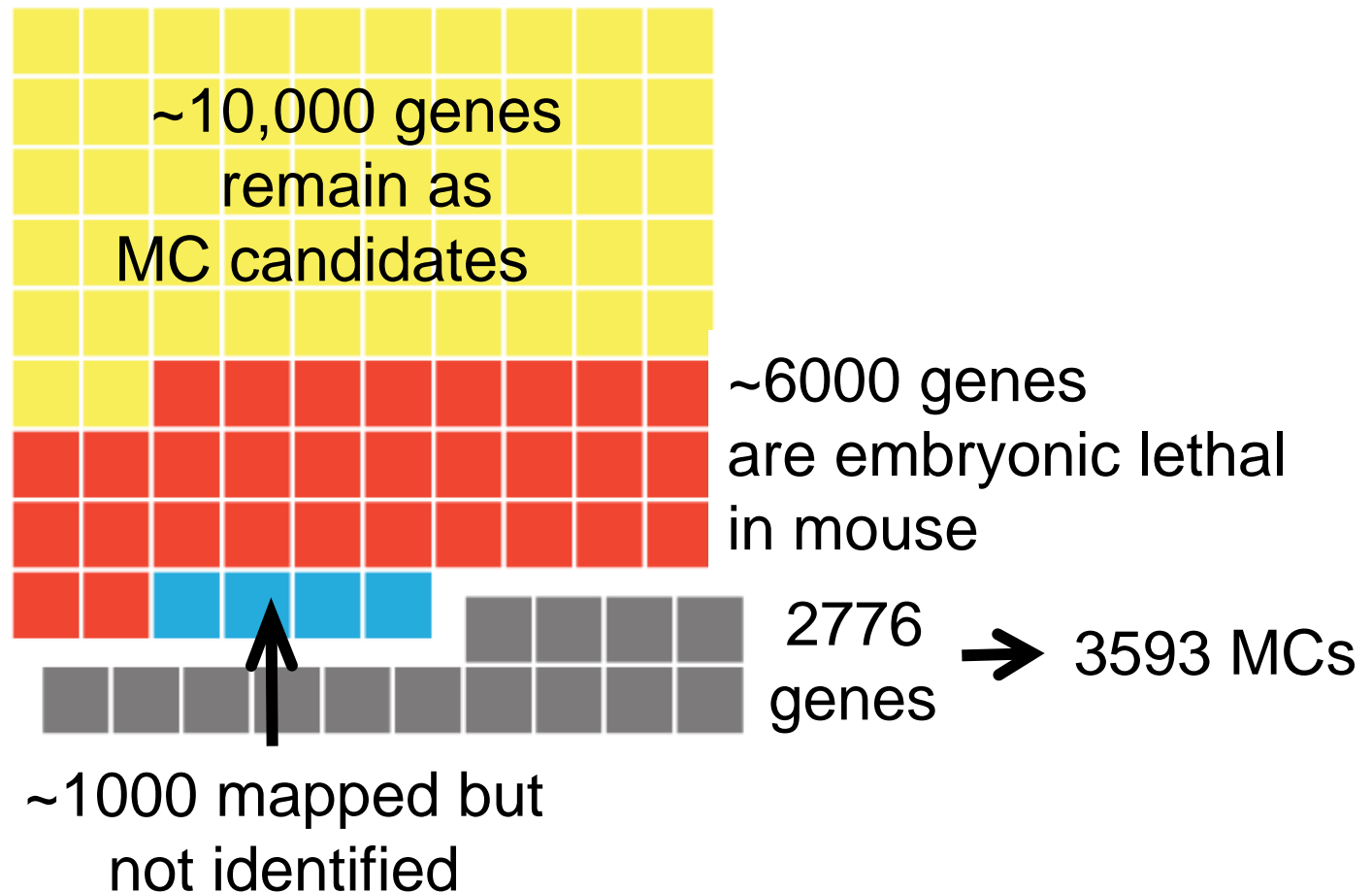
\$5 million/individual/lifetime

# *Mendelian Conditions: current scorecard*

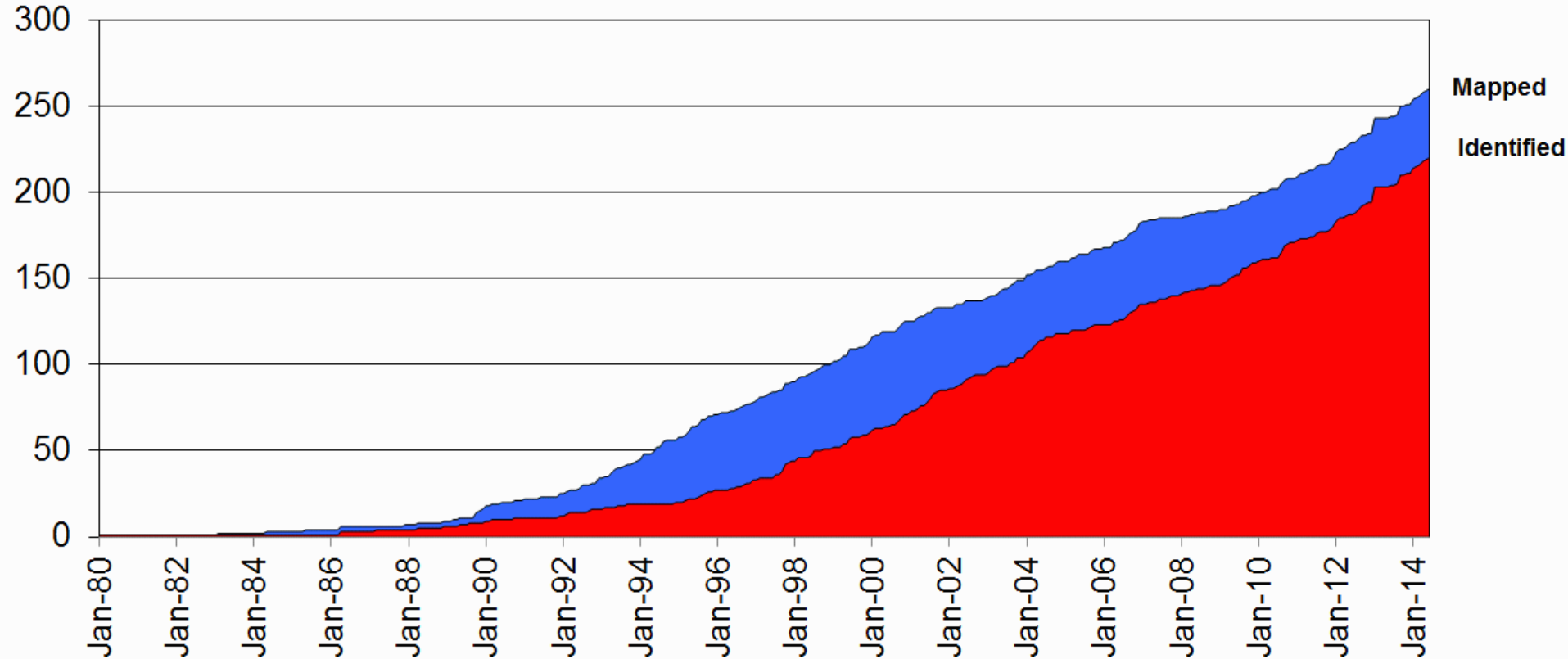
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- Mendelian conditions ~7,300
- Disease genes ~2,776
- Explained phenotypes ~3,593
- Unexplained phenotypes ~3,703
- New MCs per year ~300

~17,000 genes remain as MC candidates



# *No evidence of saturation for MCs*



**Mapped and Identified Retinal Disease Genes 1980 - June 2014**

# Coding vs. Non-coding genes

- ~20,000 coding genes

*Ezkurdia et al. HMG '14*

- ~20,000 non-coding genes

*Makrythanasis, Clin Gen '13*

- long non-coding RNAs
- lincRNAs
- short non-coding RNAs
- miRNAs

- **BUT** only 8.2% of genome may be functional

*Rands, PLoS Gen '14*

# Non-coding genes & 20 Mendelian conditions

Table 2. Representative examples of non-protein-coding pathogenic variants in genetic disorders

Genomic Element	Name	Disorder
MIR	MIR96	DFNA50 (Autosomal Dominant deafness 50)
	MIR184	EDICT syndrome
	MIR17HG	Feingold syndrome 2
Long ncRNA	TERC	AD dyskeratosis congenita; susceptibility to aplastic anemia
	RMRP	CHH (cartilage hair hypoplasia) syndrome; anauxetic dysplasia; metaphyseal dysplasia without hypotrichosis
	CISTR-ACT lincRNA	Type E polydactyly
	HELLP lincRNA	HELLP (Hemolysis, Elevated Liver enzymes, Low Platelets) syndrome
Small ncRNA	ATXN8/ATXN8OS	Spinocerebellar ataxia 8 (SCA8)
	snRNA RNU4ATAC	Microcephalic Osteodysplastic Primordial Dwarfism, type I (MOPD I)
Enhancer CNC	1 Mb from SHH	Postaxial polydactyly
	460 kb from SHH	Holoprocencephaly
	50 kb from SOST	Van Buchem disease
	Enhancer of IRF6	Cleft lip
	Up to 1.5 Mb 5' or 3' from SOX9	Pierre Robin sequence
	280 kb from FOXL2	BPES
	110 kb from BMP2	Brachydactyly type A2
	Intron of RET	Hirschprung disease (20x risk)



*Why identifying the genes  
for MCs matters  
enormously to patients & their families*

# Unmet Medical Need

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When there is **NO** diagnosis...



**No** prognosis

**No** best practice guidelines

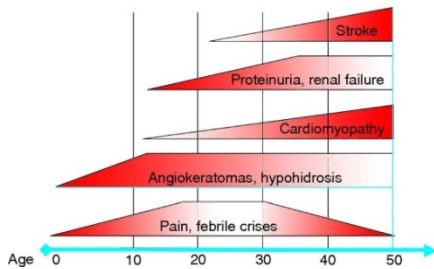
**No** accurate reproductive counseling

**No** available therapy

# When there is a diagnosis...



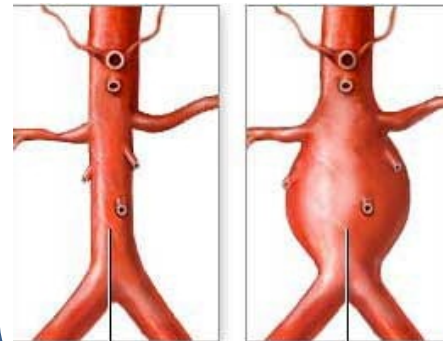
## Natural history



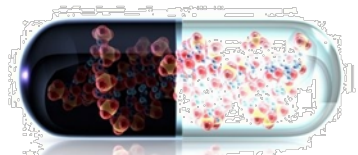
## Accurate genetic counselling



## Prevention of complications



## Tailored therapy



*Does Mendelian variation contribute  
to our understanding of complex  
diseases?*

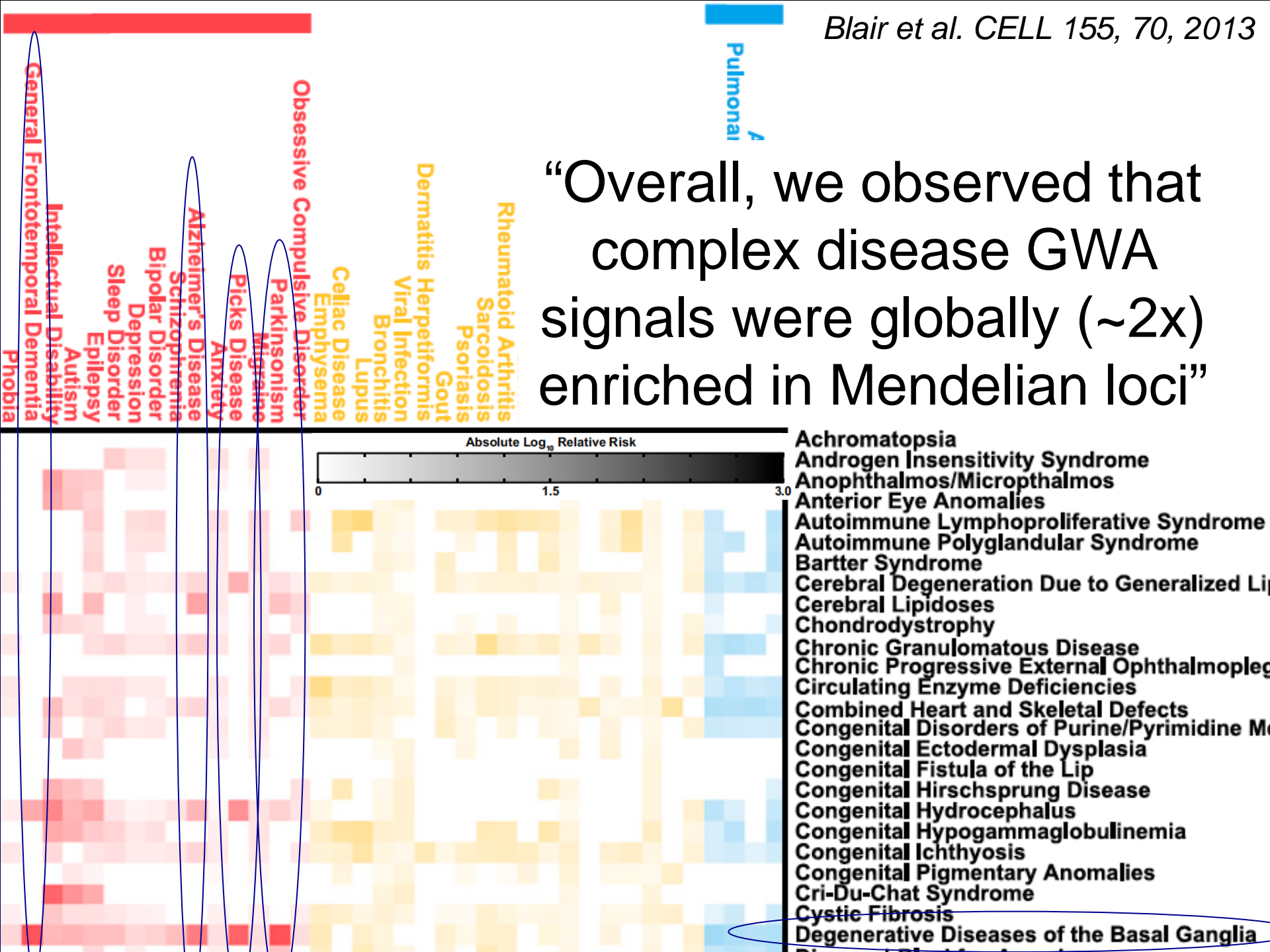
# A Nondegenerate Code of Deleterious Variants in Mendelian Loci Contributes to Complex Disease Risk

*Blair et al. CELL 155, 70, 2013*

## *The question:*

Are common variants for complex diseases enriched within loci implicated by Mendelian comorbidities?

- Each Mendelian variant highlights a subset of genes that also play a role in common complex traits
- Each complex disease has a *unique* Mendelian disease allelic architecture, a “nondegenerate code” that identifies each illness by its associated Mendelian loci



“Overall, we observed that complex disease GWA signals were globally (~2x) enriched in Mendelian loci”

# NHGRI Centers for Mendelian Genomics (CMGs)

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University of Washington Center  
for Mendelian Genomics  
*(coordinating center)*

Yale

Yale Center for Mendelian  
Disorders



JOHNS HOPKINS  
MEDICINE

BCM

Baylor College of Medicine

Baylor-Johns Hopkins Center  
for Mendelian Genomics

[www.mendelian.org](http://www.mendelian.org)  
[gmendel@mendelian.org](mailto:gmendel@mendelian.org)

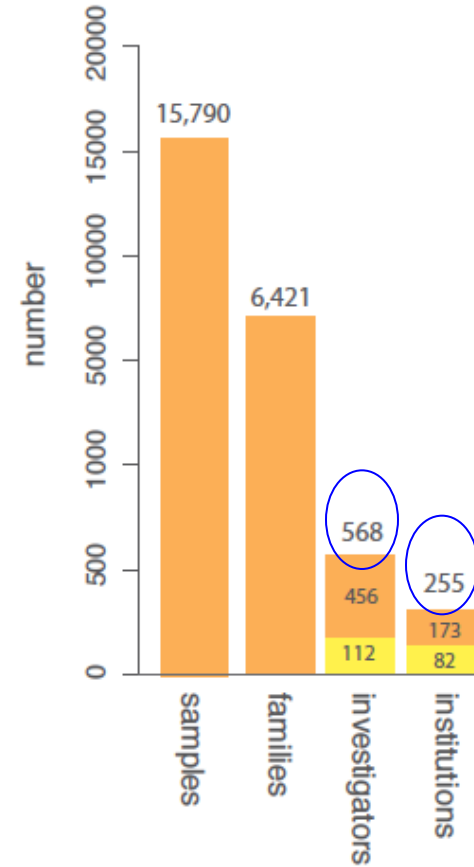
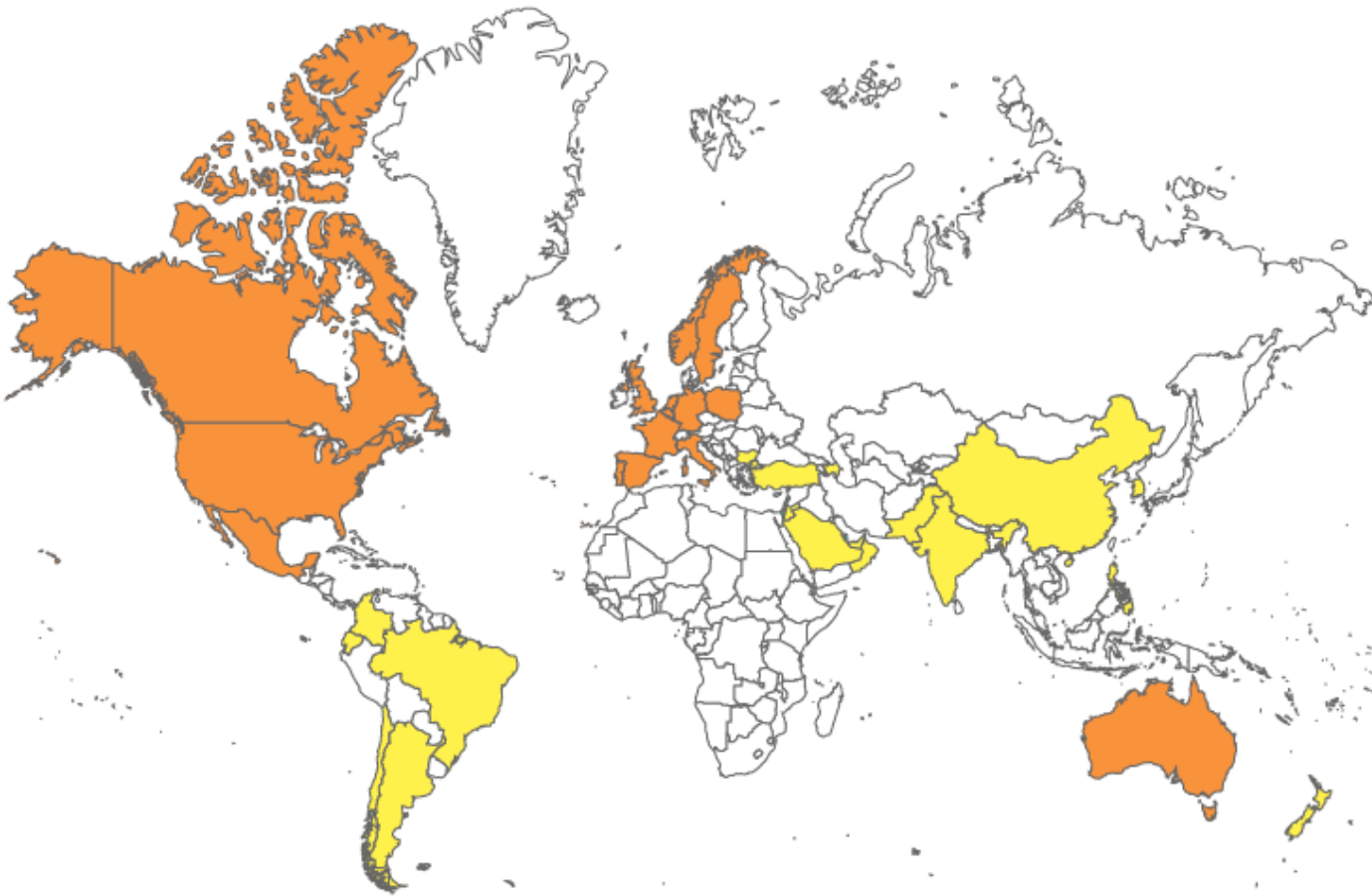


Centers for Mendelian Genomics

**Goal:** Identify and define the causes of  
all human monogenic diseases



# The CMGs are an international research platform



The goal of solving most/all MCs requires unprecedented cooperation & coordination among clinicians & scientists worldwide



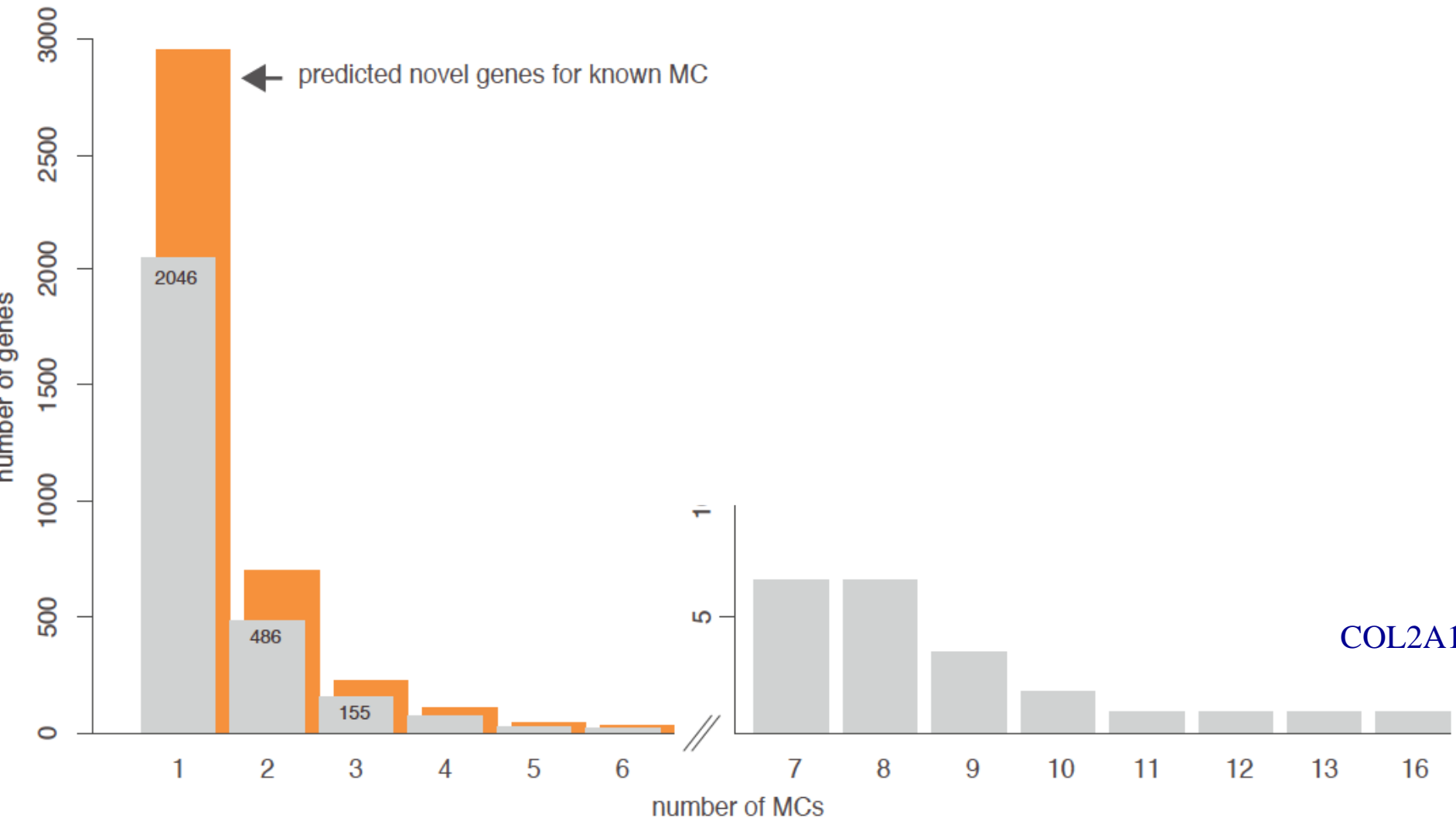
*Biomedical & Clinical  
Impact of the CMGs*

# *Progress to date\**

- 15,790 samples
- 6421 families studied: 673 known, 760 novel MCs
- 11,801 Wes, 60 WGs → 1/2 to dbGaP
- 286 novel MC genes discovered
- 229 known genes for MCs identified
- The clinical features of 139 known MCs were expanded

*\* provided by the CMGs*

# Phenotropy: spectrum of phenotypes caused by variants in a gene



- provided by the CMGs

*Identifying MC genes  
greatly enhances our understanding of  
human biology & pathophysiology*

# *CMG Publications\**

- 98 papers, including 60 new disease loci & genetic disorders
- Nature (1), Science (1), Cell (2), Nature Genetics (6), NEJM (2), AJHG (17), Hum Mol Gen (4)

*\* provided by the CMGs*

A Form of the Metabolic Syndrome  
Associated with Mutations in *DYRK1B*

Keramati *et al.* NEJM 369, 621, 2013

Mutations in *DSTYK* and Dominant Urinary  
Tract Malformations

Sanna-Cherchi *et al.* NEJM 369, 621, 2013

4.5 % of the 423 original articles over the past 24 months  
in the NEJM  
were reports of new Mendelian disease genes

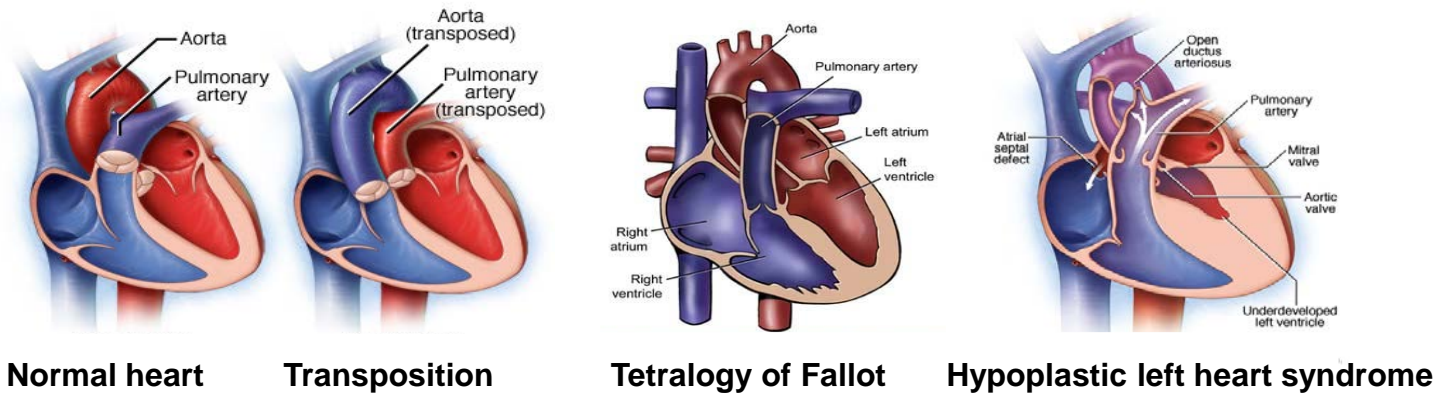
- E. Phimister

# *De novo* mutations in histone-modifying genes in congenital heart disease

Saidi + 49 others

*Nature* **498**, 220–223 (13 June 2013)

 AGTC  
Centers for Mendelian Genomics



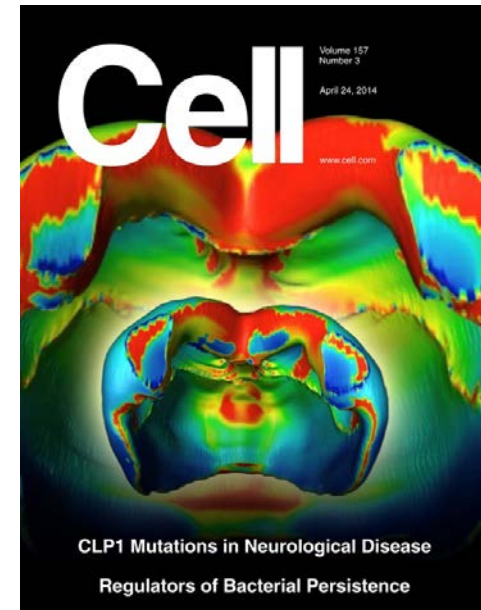
- The most frequent birth defect, 0.8% of live births,
- Many cases are sporadic -> a role for *de novo* mutations?
- 362 severe CHD cases, parents: WES
- Enrichment of mutations in proteins that modulate H3K4 methylation
- *De novo* point mutations in several hundreds of genes that together → 10% of severe CHD

# Human *CLP1* Mutations Alter tRNA Biogenesis, Affecting Both Peripheral and Central Nervous System Function

Ender Karaca,<sup>1,2†</sup> Stefan Weitzer,<sup>2,2†</sup> Davut Pehlivan,<sup>1,2†</sup> Hiroshi Shiraishi,<sup>2,2†</sup> Tasos Gogakos,<sup>3</sup> Toshikatsu Hanada,<sup>2,2</sup> and 38 others



  
Centers for Mendelian Genomics



Mutation in *CLP1*, a kinase required for tRNA splicing,  
→ abnormal neurodevelopment, & neurodegeneration



# *Finding families with new MCs*

## **PhenoDB: A New Web-Based Tool for the Collection, Storage, and Analysis of Phenotypic Features**

Ada Hamosh,<sup>1\*</sup> Nara Sobreira,<sup>1</sup> Julie Hoover-Fong,<sup>1</sup> V. Reid Sutton,<sup>2</sup> Corinne Boehm,<sup>1</sup> François Schiettecatte,<sup>3</sup> and David Valle<sup>1</sup>

<sup>1</sup>*McKusick-Nathans Institute of Genetic Medicine Johns Hopkins University, Baltimore, Maryland;* <sup>2</sup>*Department of Molecular & Human Genetics Baylor College of Medicine, Houston, Texas;* <sup>3</sup>*FS Consulting, Salem, Massachusetts*

Hum Mut 34:561,

2013

- Rapid & efficient entry of families or cohorts
- Provides unique identifiers
- Clinical features based on OMIM Clinical Synopses
- Searchable

*Identifying the genes for MCs is of major importance to the development of Rx for common diseases, as well as MCs*

# Mendelian genes identify drug targets applicable to the general population

Of 348 proteins linked to a human gene and specifically targeted by current therapeutics:

- 42.5% encode a gene underlying a MC
  - vs. 28.2% of proteins targeted by current therapeutics are found within GWAS signals
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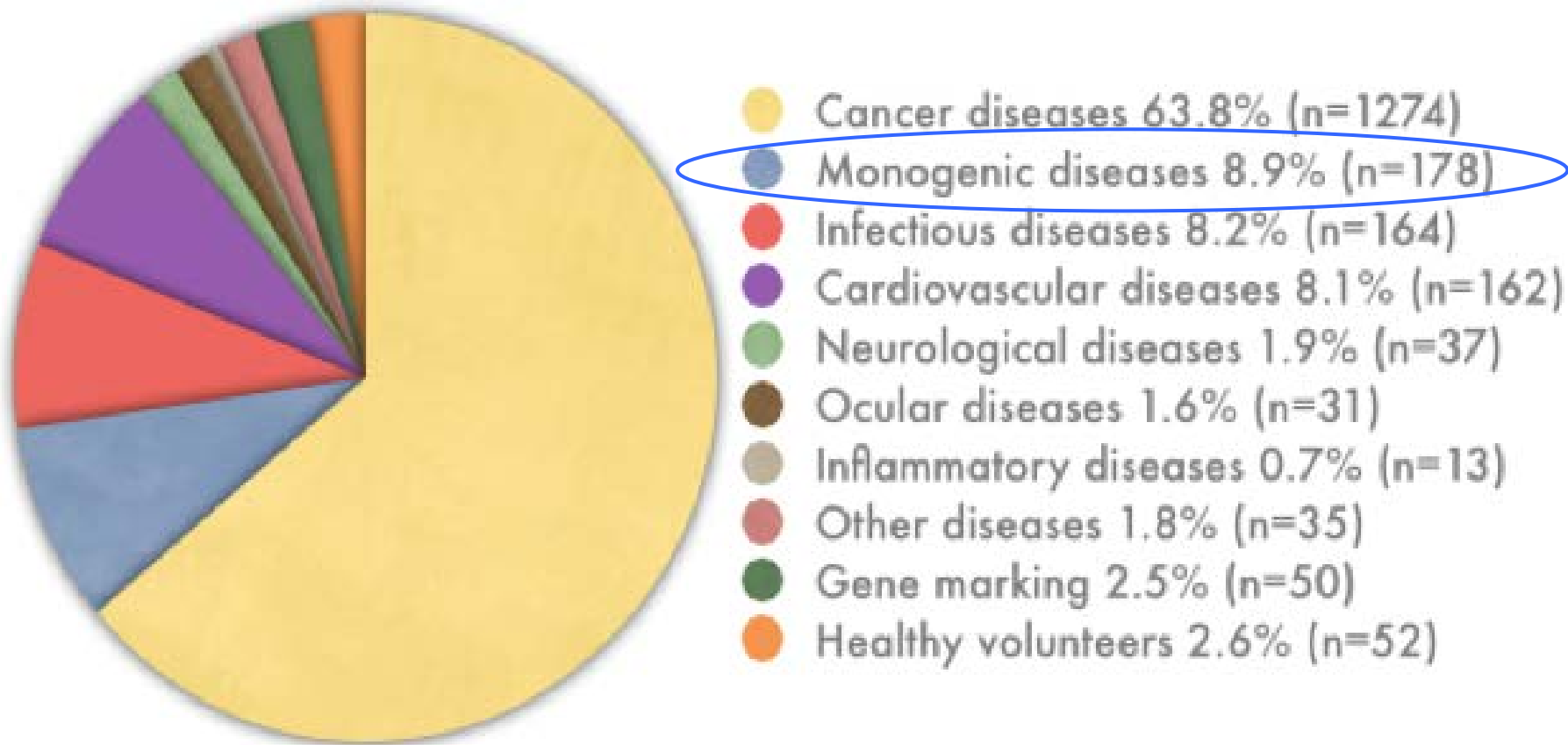
# Mendelian genes identify drug targets applicable to the general population

## *Mutations in*

- Nav1.7 Na<sup>+</sup> channel channel = loss of pain
- ROMK K<sup>+</sup> channel, Bartter syndrome = low blood pressure
- PCSK9 protease = low LDL cholesterol
- Orexin receptor, narcolepsy = sleeping pill
- SOST; LRP5 = high bone mass
- APP and  $\gamma$ -secretase = Alzheimer's disease targets

# Gene Therapy: 1966 Human Trials in 2014

## Indications Addressed by Gene Therapy Clinical Trials



# Gene Therapy Benefits Metachromatic Leukodystrophy

Alessandra Biffi,\* Eugenio Montini, Laura Lorioli, Martina Cesani, Francesca Fumagalli,

*Science*, 341, 864, 2013



age 5 yr.

- A lysosomal enzyme defect: Aryl sulfatase A deficiency
- Progressive neurological deterioration, death 3-10 yr,

# MCs are the epitome of Personalized Medicine

*The application of knowledge of  
an individual's genome to  
their health care*

# *Orphan Drugs*

~ 200 companies are now conducting orphan drug clinical trials

a \$50 billion industry, growing at rate of 25% per year

Some amazing successes:

[http://www.phrma.org/sites/default/files/pdf/Rare Diseases 2013.pdf](http://www.phrma.org/sites/default/files/pdf/Rare_Diseases_2013.pdf)

<http://thomsonreuters.com/business-unit/science/subsector/pdf/the-economic-power-of-orphan-drugs.pdf>



# *The Mouse Knockout Project*

## Phase I: 2011 –2016

- 18 centres around the world
- 5000 genes
- ~ \$250 million committed, multiple funders
  - + NIH \$ for embryo phenotyping
  - + NIH \$3M for a Cas9-RGN mouse production tech development

## Phase I: 2017 –2021

The remaining 15, 000 genes

# *Many human MCs have no mouse equivalent*

IMMUNOLOGY REPORTS

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## *Mycobacterium szulgai* Chronic Multifocal Osteomyelitis in an Adolescent With Inherited STAT1 Deficiency

*Oded Shamriz, MD,\* Dan Engelhard, MD,†† Andrea Psorn Rajs, MD,§ Hasia Kaidar-Shwartz, PhD,¶  
Jean-Laurent Casanova, MD, PhD,|| and Diana Averbuch, MD\*†*

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*The Pediatric Infectious Disease Journal* • Volume 32, Number 12, December 2013

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# *Some general principles likely to be exposed by a larger collection disease genes*

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- Relationship of genes and variants to phenotype
- Phenotypic “expansion”
- Informing systems biology
- Relationship of Mendelian genes and variants to those contributing risk for complex traits
- A library of drug targets

# Advantages of CMGs

- Deep experience in study design, sequencing and data analysis
  - Cost-effective, rigorous & productive access to cutting edge technology for experienced and naïve investigators with useful families/patient cohorts

# Advantages of CMGs (cont'd)

- CMGs are immersed in broad issues re. Mendelian genomics, issues applicable to diverse projects
- CMGs are agnostic to clinical area, focused on solving all Mendelian traits

# Summary: What has been the impact of CMG discoveries?

- CMGs have made relatively inexpensive, high-throughput gene discovery for MCs available worldwide
- Enormous amount of information about the biological function of each gene is provided by each MC “solved”
- Changing the thinking about extent of pleiotropy and genetic heterogeneity
- Enabled diagnostic and predictive testing for hundreds of MCs that that were undiagnosable
- Added 100s of starting points for the development and testing of targeted therapies
  - Key - only ~300 proteins targeted by current therapeutics

# Summary: What differences have the CMGs made?

- Catalyzed the discovery of genes underlying Mendelian Conditions conditions
- 100s of new phenotypes and novel genes for Mendelian Conditions delineated
- 100s of “novel” genes for Mendelian Conditions
- Found new biological mechanisms for Mendelian Conditions
- Fostered development of statistical framework for assessing causality of variants for Mendelian Conditions
- Equipped PIs in the human genetics community with tools and skills to interpret and in many cases complete their own analysis

*Thank you*