

Whole Genome Analyses (WGA)

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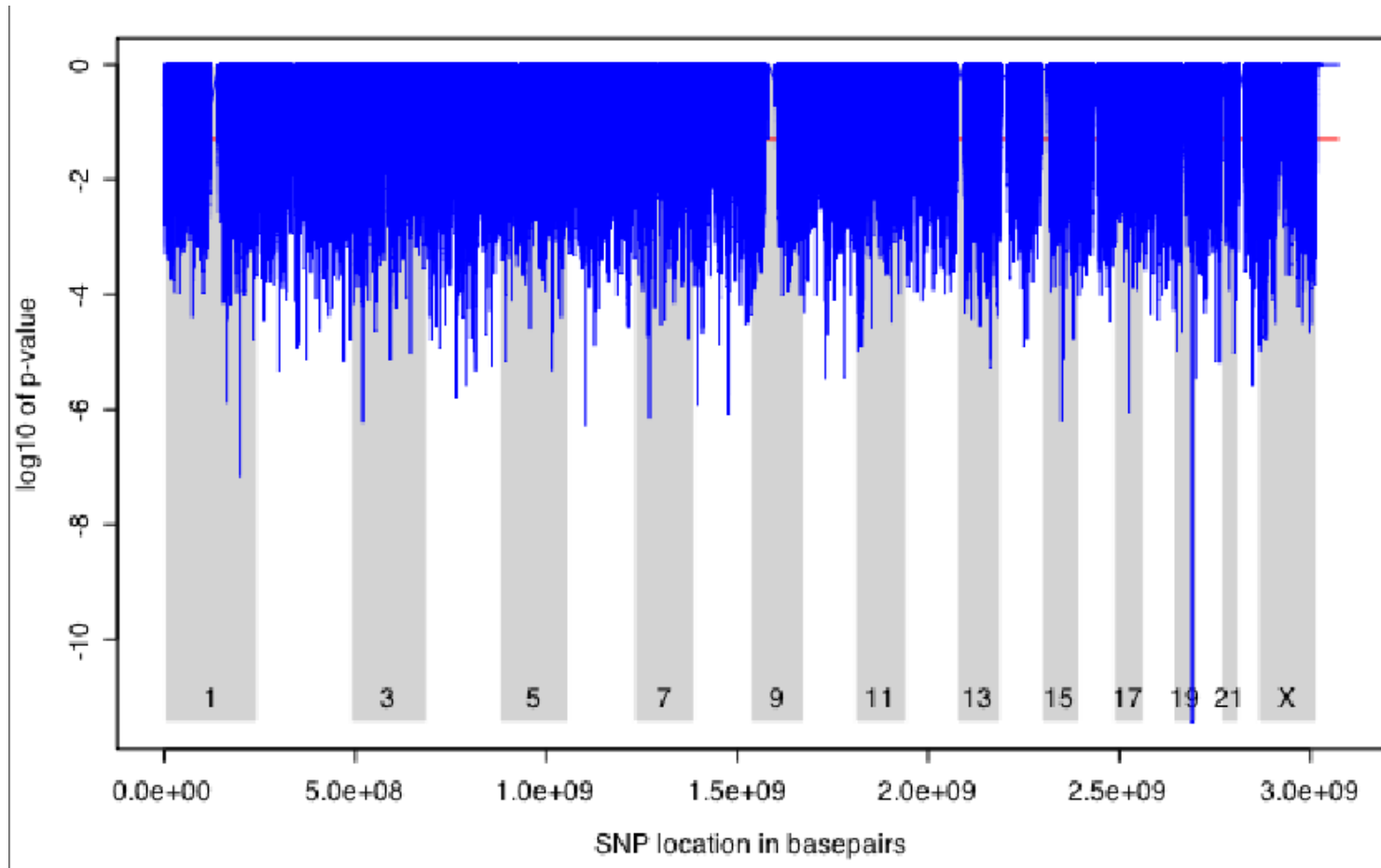
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Whole Genome Study For Alzheimer's Disease

500K Affymetrix Array

(presently underpowered ~180 cases and controls: collaboration with TGen: now 800 cases and controls: data analysis ongoing)



Our Studies (Illumina Bead Station)

- Whole Genome Association Analysis of Parkinson's Disease
 - 276 Cases and Controls NIA/NINDS funded (completed: in follow up)
- Whole Genome Association Analysis of Ischemic Stroke
 - 276 Cases and Controls NIA/NINDS funded (completed: in follow up)
- Whole Genome Association Analysis of ALS
 - 276 Cases and Controls NIA/NINDS/ALSA funded (in progress)
- Whole Genome Analysis of Haplotypic Brain Expression
 - 300 Control Brains NIA/TGen funded (in progress)
- Whole Genome Analysis of African Americans
 - 200 from the HANDLs Study (Baltimore, NIA/Michele Evans PI) (in progress: more planned)

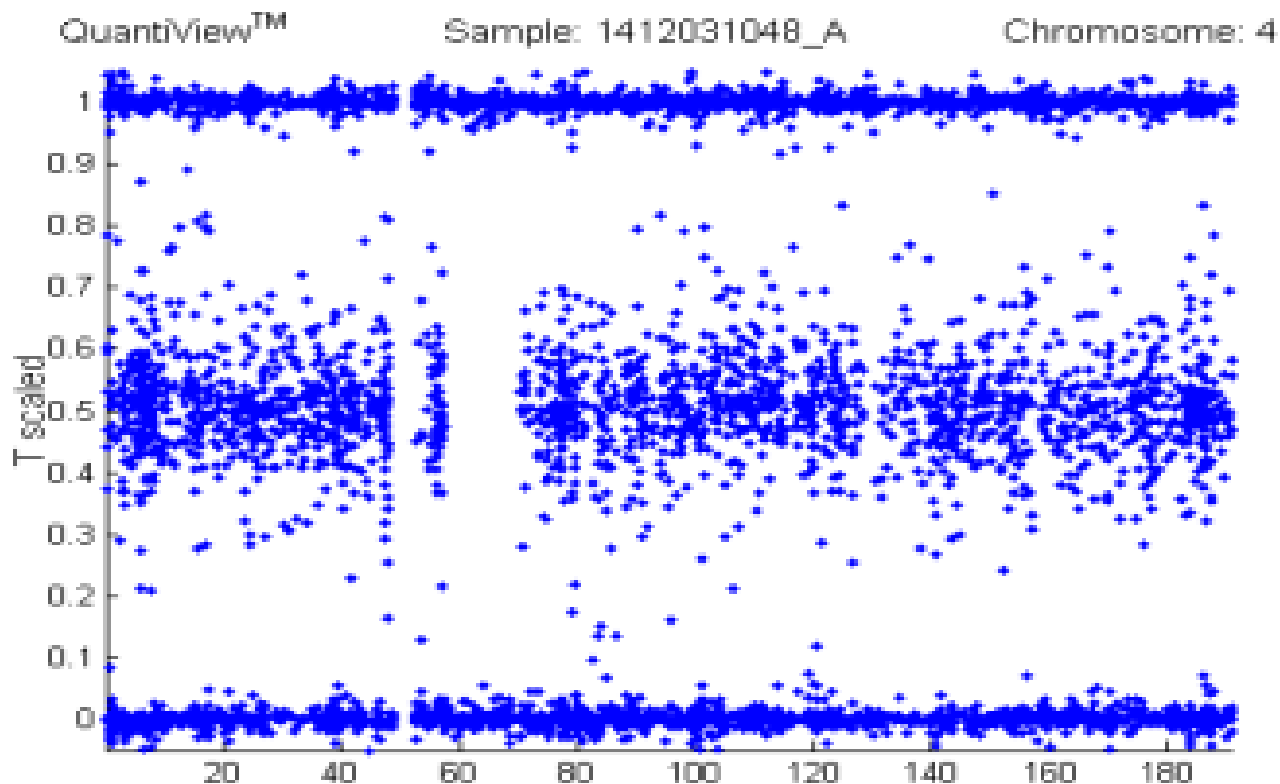
Three Surprises:-

- Data quality: routinely >99% of data
- In North American Caucasian Controls, ~10% showed extensive homozygosity (not true of African Americans)
 - (parents were ~2nd-4th cousins)
- In North American Controls, ~9% had significant structural variability (large insertions and deletions)
 - (some was cell line specific, but much was not: what is “normal”?)
- Realized both homozygosity and structural variability could be disease-related

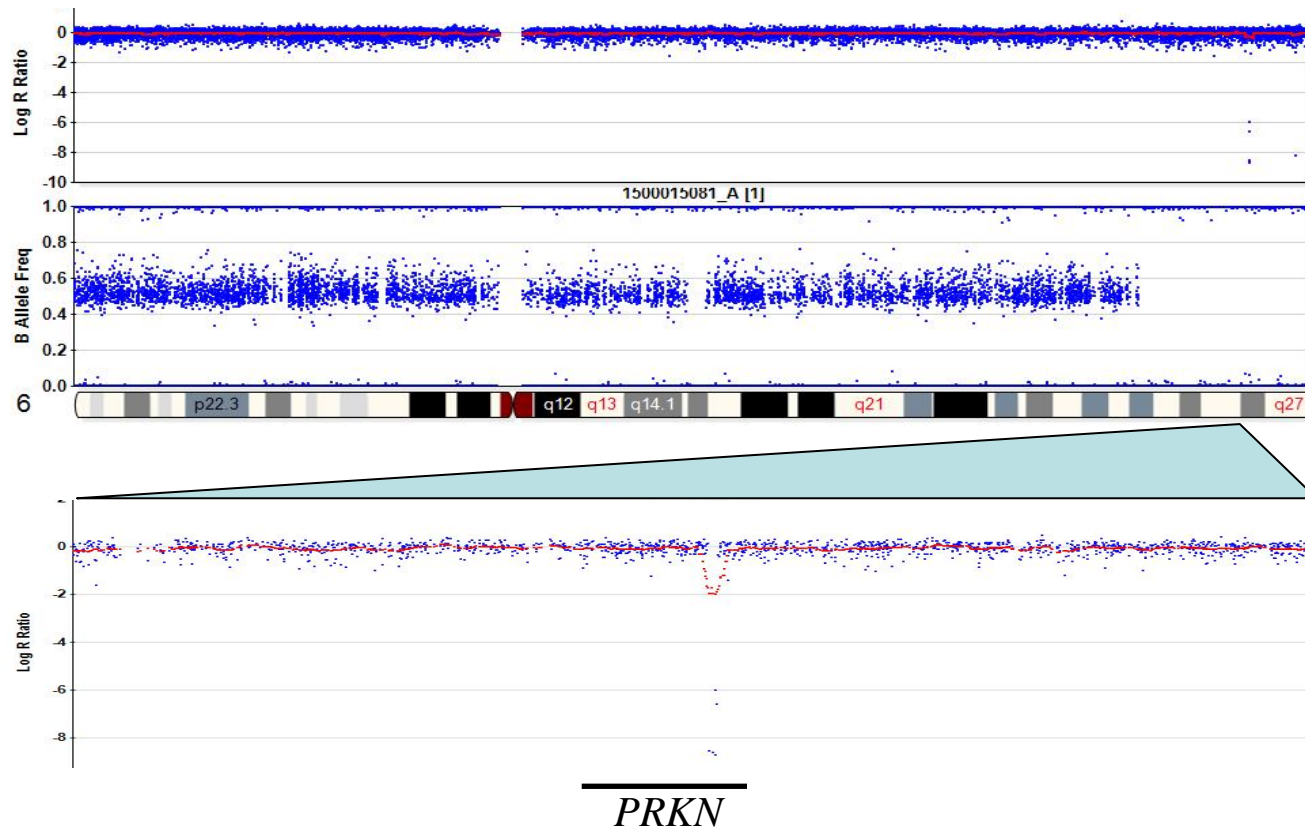
<http://ccr.coriell.org/ninds/>

Loss of Heterozygosity

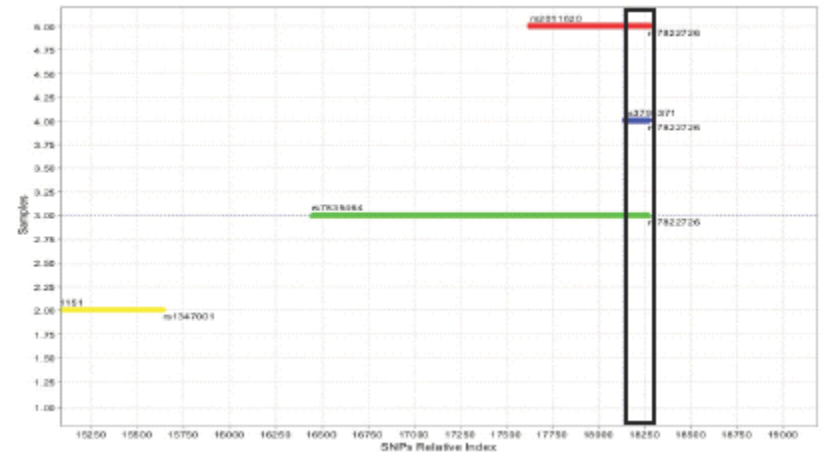
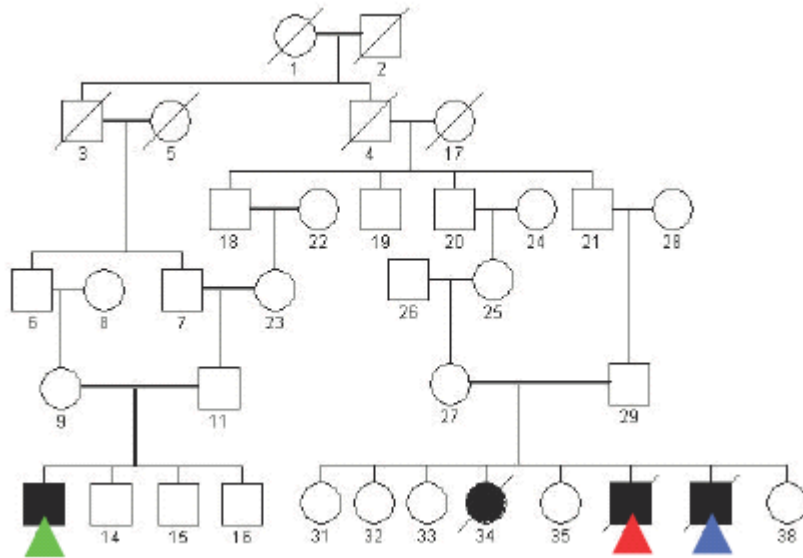
(10% North American Controls Show Evidence for Consanguinity)



Detection of homozygous parkin deletion causing Parkinson's disease



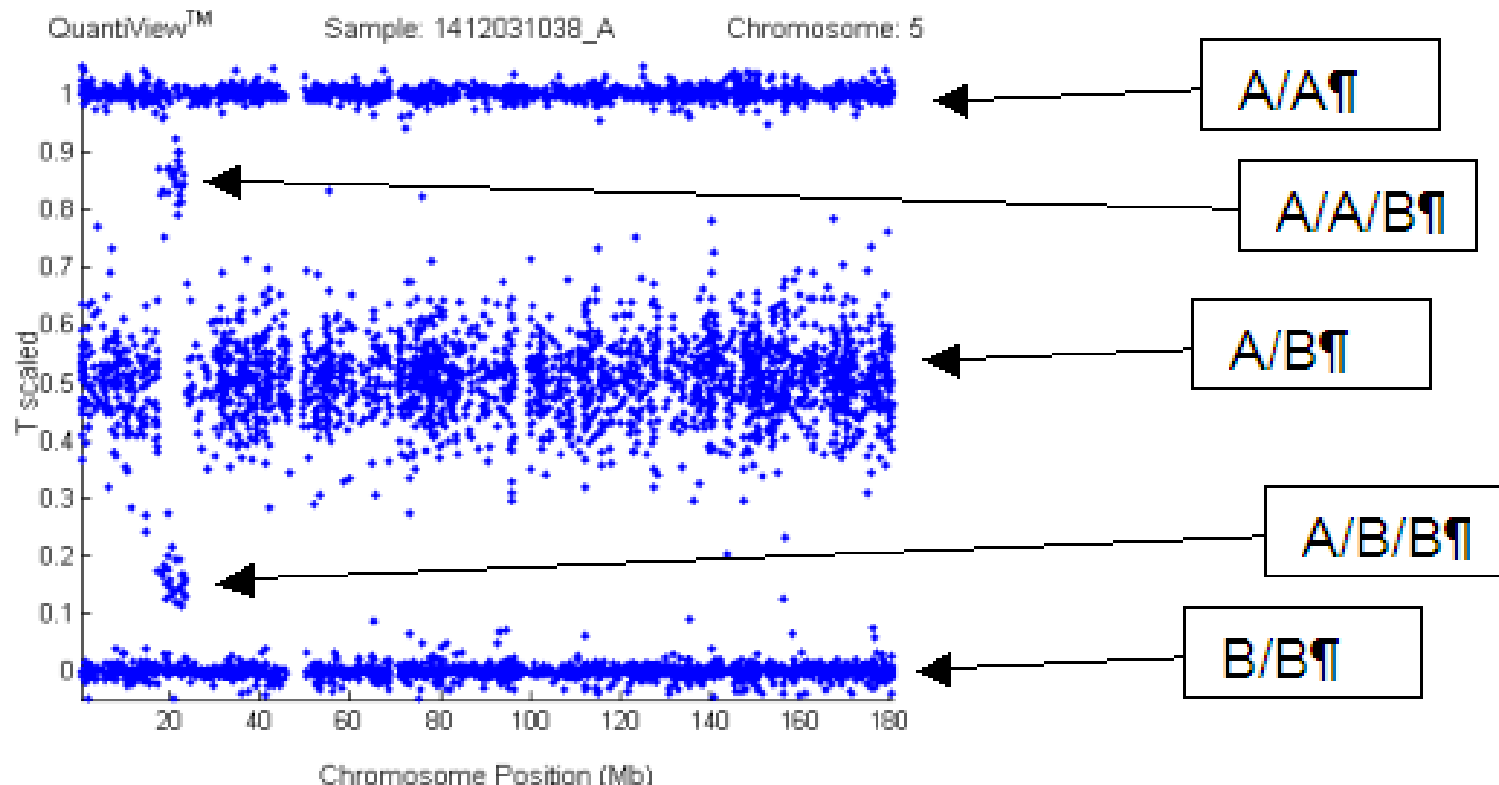
Homozygosity Mapping on Infinium 300K: one hit linkage for a new disease



- Recessive young onset ataxia
- Single segregating region ~1 Mb

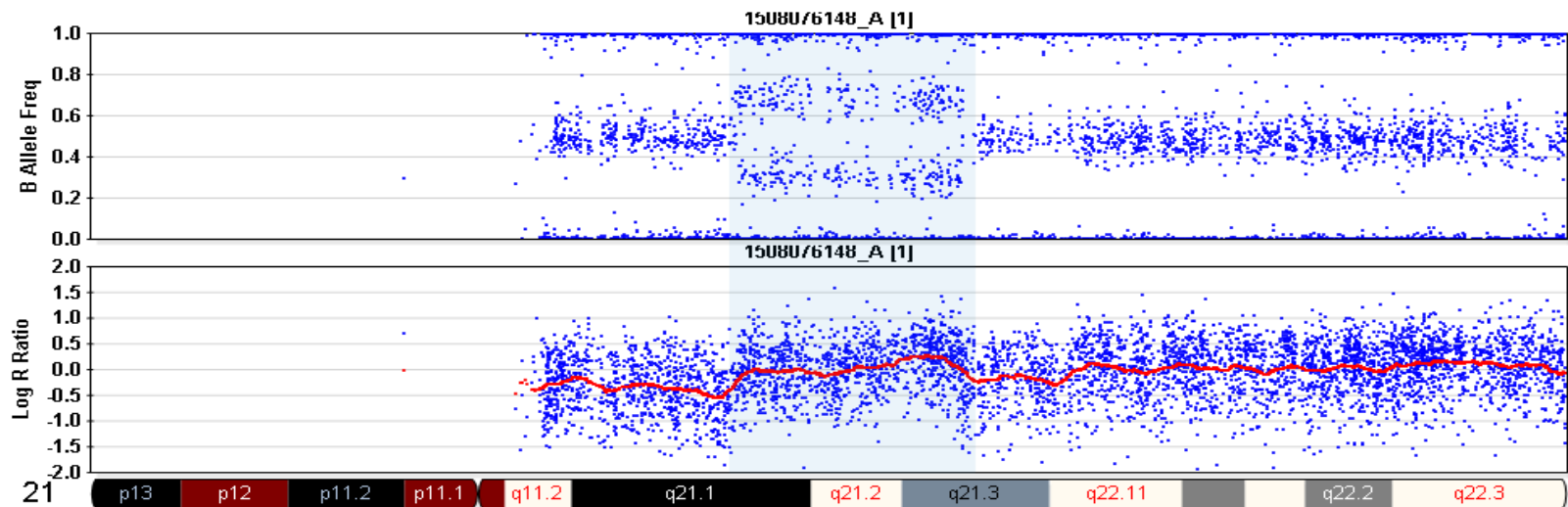
Structural Alterations

Chromosome 5 Control Male of 65 years



APP locus duplication causes autosomal dominant early-onset Alzheimer disease with cerebral amyloid angiopathy

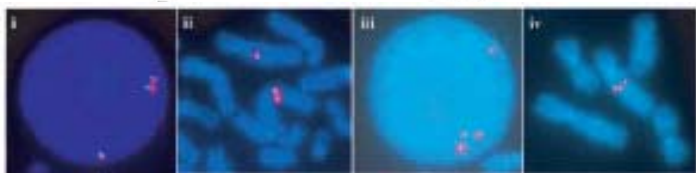
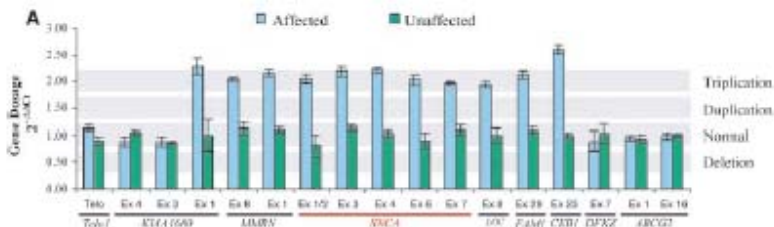
Anne Rovelet-Lecrux¹, Didier Hannequin^{1,2}, Gregory Raux¹,
Nathalie Le Meur³, Annie Laquerrière⁴, Anne Vital⁵,
Cécile Dumanchin¹, Sébastien Feuillet¹, Alexis Brice⁶,
Martine Vercelletto⁷, Frédéric Dubas⁸, Thierry Frebourg¹ &
Dominique Campion^{1,9}



BREVIA

α -Synuclein Locus Triplication Causes Parkinson's Disease

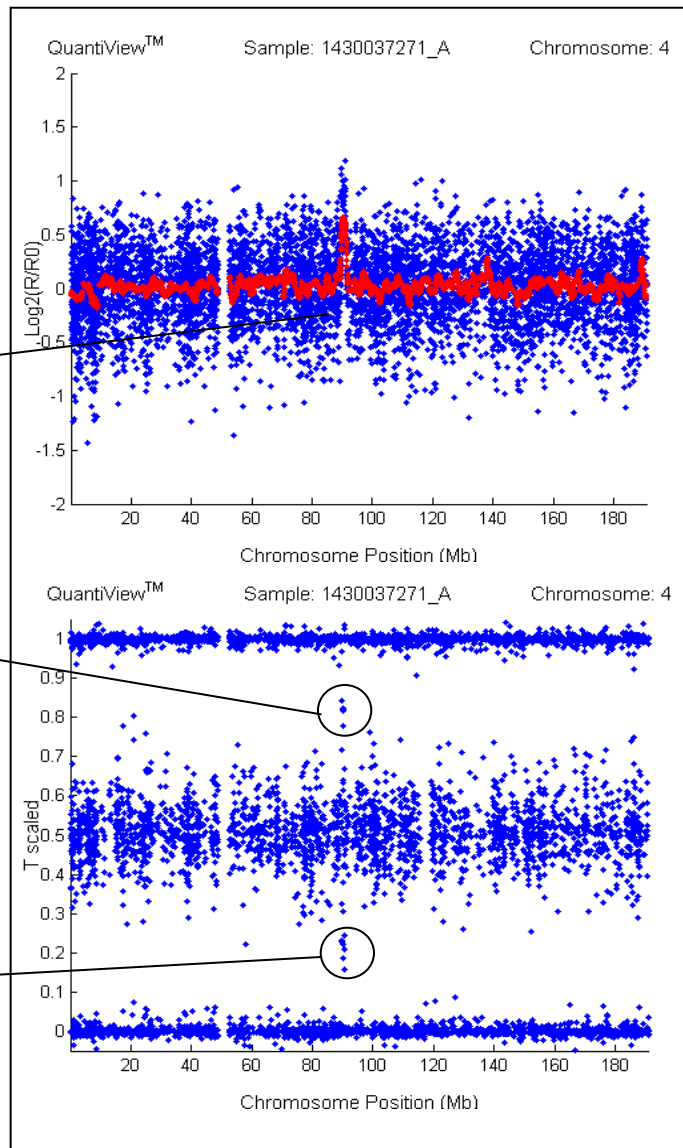
A. B. Singleton,^{1*} M. Farrer,^{4†} J. Johnson,¹ A. Singleton,²
 S. Hague,¹ J. Kachergus,⁴ M. Hulihan,⁴ T. Peuralinna,¹ A. Dutra,³
 R. Nussbaum,² S. Lincoln,⁴ A. Crawley,² M. Hanson,¹
 D. Maraganore,⁵ C. Adler,⁶ M. R. Cookson,¹ M. Muentert,⁶
 M. Baptista,¹ D. Miller,¹ J. Blancato,⁷ J. Hardy,¹ K. Gwinn-Hardy²



TRIP

A/A/A/B

A/B/B/B



Whole Genome Association Analyses

- Population choice is important
- Data handling is not trivial
 - (our lab has been generating ~6,000,000 a day for 6 months) and now has ~1,000,000,000 genotypes)

Population Choice: LRRK2 and PD

Genetic screening for a single common LRRK2 mutation in familial Parkinson's disease

William C Nichols, Nathan Pankratz, Dana Hernandez, Coro Paisán-Ruiz, Shushant Jain, Cheryl A Halter, Veronika E Michaels, Terry Reed, Alice Rudolph, Clifford W Shults, Andrew Singleton, Tatiana Foroud, for the Parkinson Study Group-PROGENI investigators*

A common LRRK2 mutation in idiopathic Parkinson's disease

William P Gilks, Patrick M Abou-Sleiman, Sonia Gandhi, Shushant Jain, Andrew Singleton, Andrew J Lees, Karen Shaw, Kailash P Bhatia, Vincenzo Bonifati, Niall P Quinn, John Lynch, Daniel G Healy, Janice L Holton, Tamas Revesz, Nicholas W Wood

A frequent LRRK2 gene mutation associated with autosomal dominant Parkinson's disease

Alessio Di Fonzo, Christian F Rohé, Joaquim Ferreira, Hsin F Chien, Laura Vacca, Fabrizio Stocchi, Leonor Guedes, Editto Fabrizio, Mario Manfredi, Nicola Vanacore, Stefano Goldwurm, Guido Breedveld, Cristina Sampaio, Giuseppe Meco, Egberto Barbosa, Ben A Oostra, Vincenzo Bonifati, and the Italian Parkinson Genetics Network*

Am. J. Hum. Genet. 76:000-000, 200.

Report

Identification of a Novel LRRK2 Mutation Linked to Autosomal Dominant Parkinsonism: Evidence of a Common Founder across European Populations

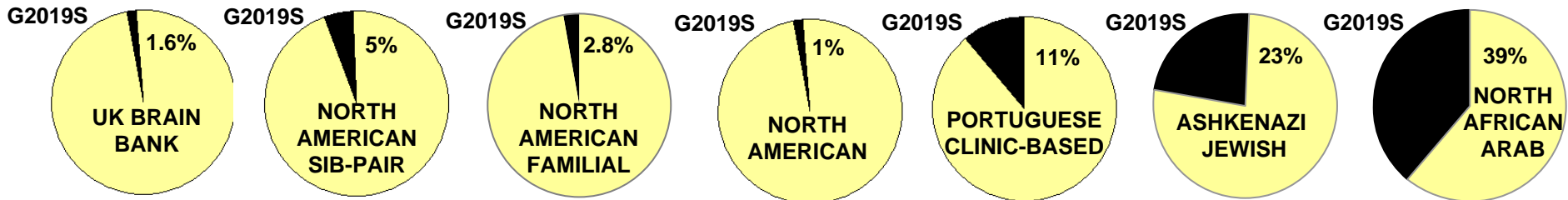
Jennifer Kachergus,^{1,2} Ignacio F. Mata,^{1,2} Mary Hulihan,¹ Julie P. Taylor,¹ Sarah Lincoln,¹ Jan Aasly,² J. Mark Gibson,² Owen A. Ross,^{1,4} Timothy Lynch,^{2,8} Joseph Wiley,^{7,8} Haydeh Payami,² John Nutt,¹⁰ Demetrius M. Maraganore,⁹ Krzysztof Chyżewski,¹² Maria Styczynska,¹³ Zbigniew K. Wszolek,² Matthew J. Farrer,¹ and Mathias Toft^{1,4}

LRRK2 mutations and Parkinsonism

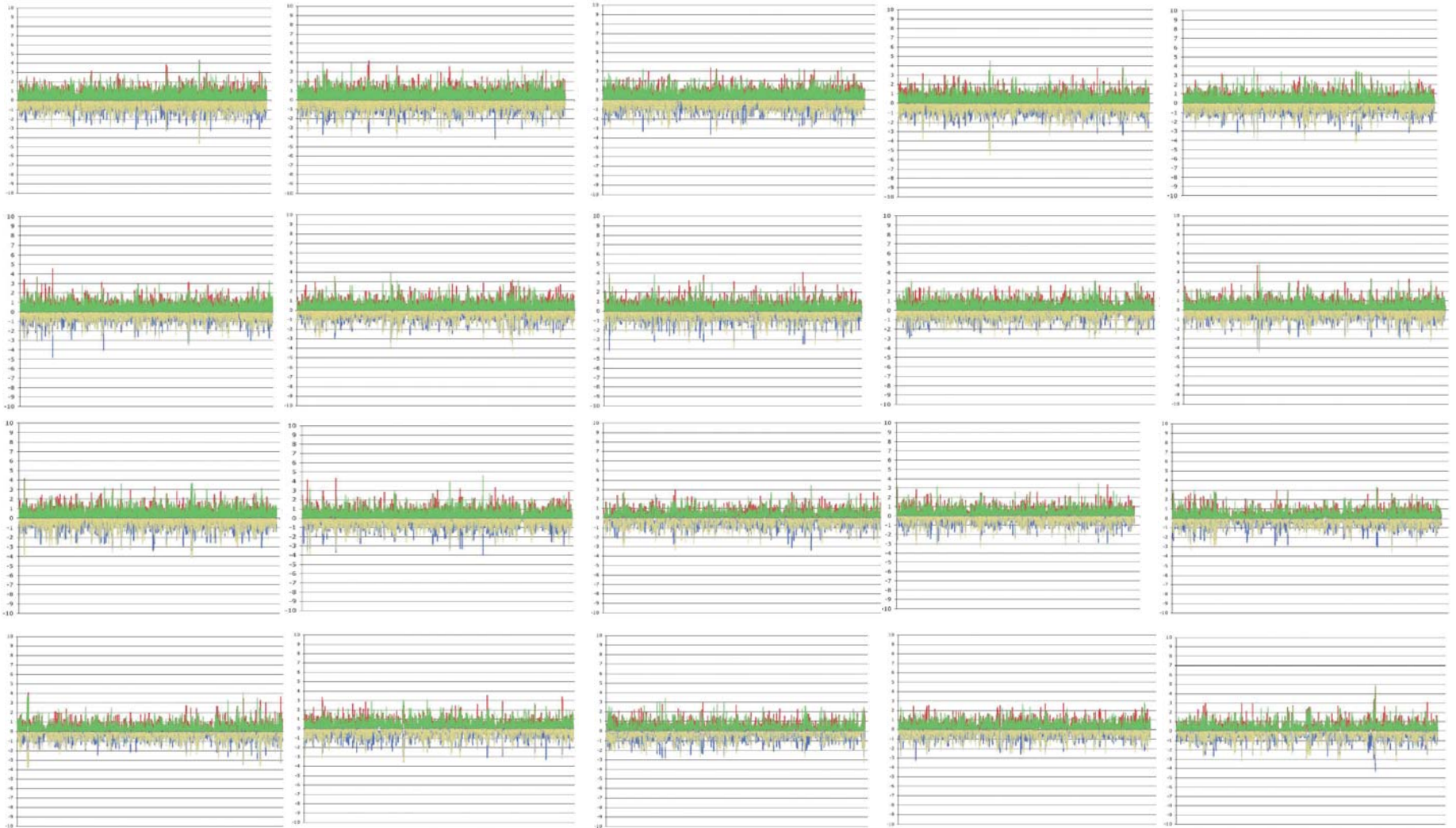
Mathias Toft, Ignacio F Mata, Jennifer M Kachergus, Owen A Ross.

- Gly2019Ser, alters conserved aa within the kinase activation loop
- Could this be constitutively active? Involved in target recognition?

H. sapiens	AAIIAKIADYGLIAQYCCRMGIKTSEGTPGFRAPENVARGNVIY
R. norvegicus	AAIIAKIADYGLIAQYCCRMGIKTSEGTPGFRAPENVARGNVIY
M. musculus	AAIIAKIADYGLIAQYCCRMGIKTSEGTPGFRAPENVARGNVIY
X. laevis	SAIIAKIADYGLIAQYCCRMGIKTSEGTPGFRAPENVARGNVIY
D. melanogaster	NLVHIKLDYGLISRQTAPSGAKGFGGTEGFMAPELIRYNG--
A. mellifera	HPVHVKVADYGLSRLTLPTGAKGFGGTEGFMAPELIKYNGEE



Whole Genome Analyses of 276 US PD cases





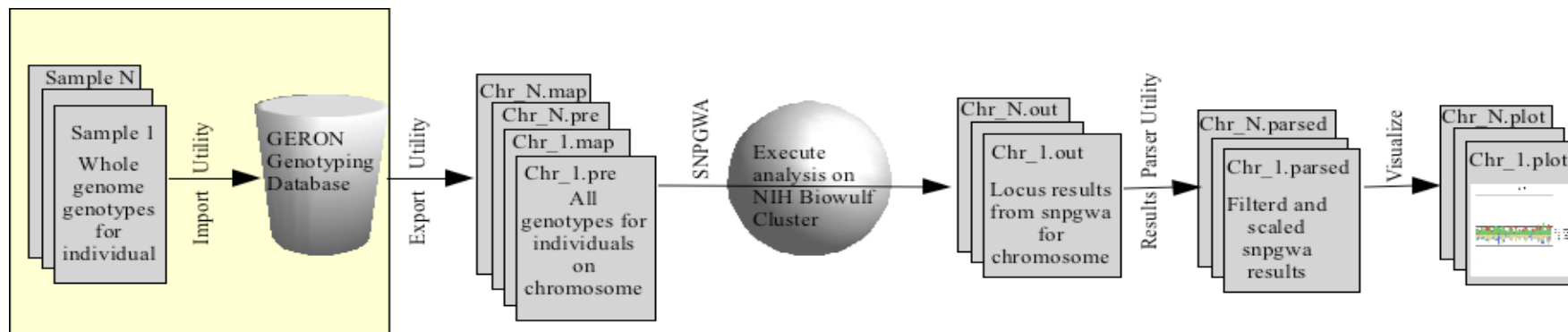
LNG Data Management Software

GERON (Raph Gibbs, Andy Singleton):

- Clinical data, sample tracking and genotype storage

SNP GWA (Carl Langefeld, Matt Stiegert at Wake Forest):

- Analysis (Hardy Weinberg; dominant; recessive; additive; haplotypic)



Whole Genome Data

- Association... sure...
 - Probably OK down to $\sim \lambda$ s of 1.5-2.0
- Homozygosity mapping
 - In kindreds and in populations
- Insertion/deletion cataloguing
 - What is “normal” and what is pathologic?
- Genetic Ancestry
 - Different populations
- Whole genome diplotype/expression correlation
 - 300 Human Cortical Samples (500K Affy SNP data from TGen: 24K Illumina Expression data)
- Cell lines
 - What are (stem) cell lines like? (a mess)

Whole Genome Analyses

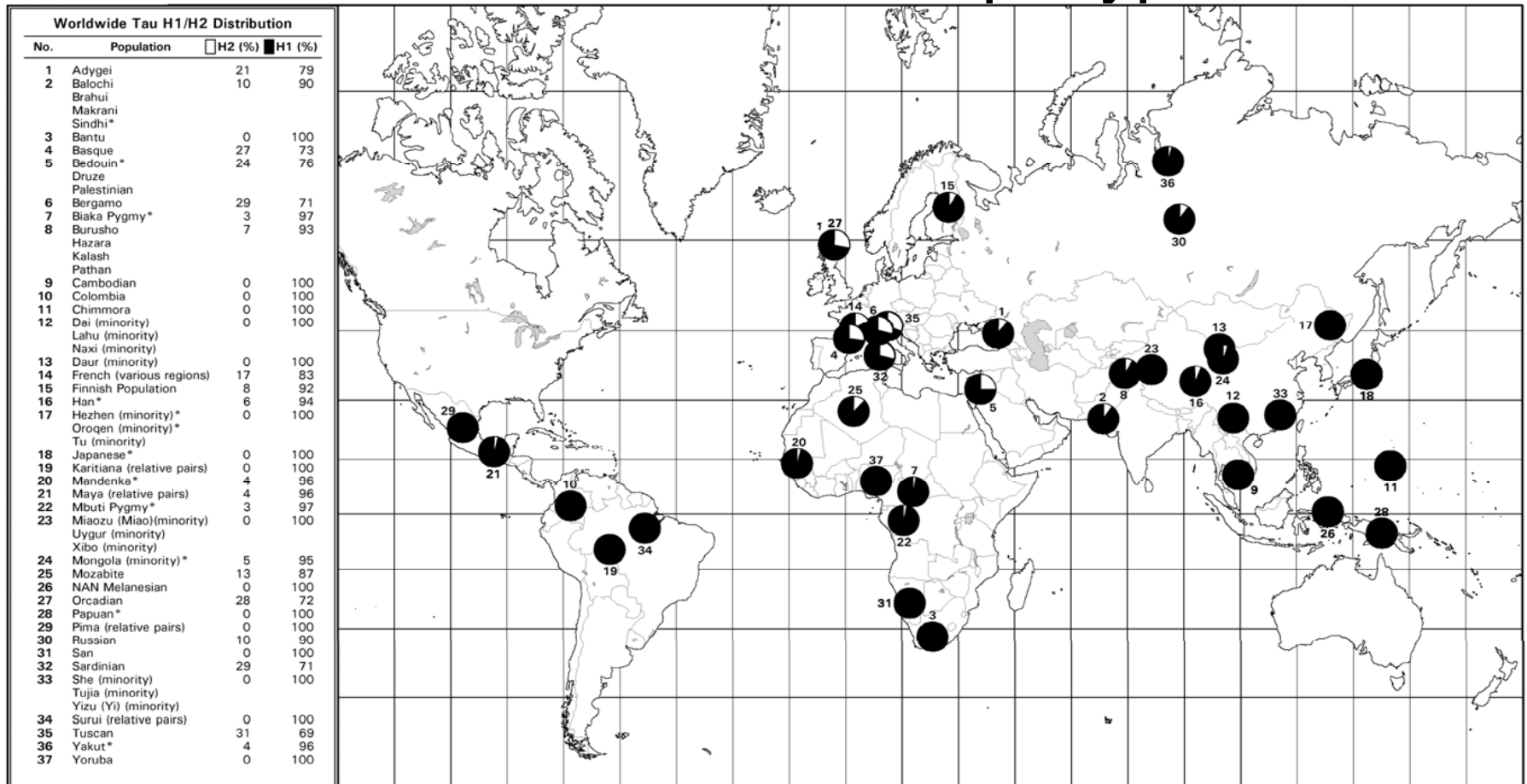
- 1) Whole genome associations will pick up alleles of large effect
- 2) Tell you what is *NOT* there (valuable to NIH) (within the bounds of the study design and population of course)
- 3) They are *ADDITIVE*: allowing studies to be pooled easily
- 4) Identify quickly and easily insertions/deletions (need a normal catalogue)
- 5) Enables homozygosity mapping in “outbred” populations (parkin example)
- 6) Enables cell lines to be characterized (stem cells etc)
- 7) Enables genotype/expression correlations for cis/(trans?) correlations of gene expression (valuable for complex trait genetic associations)

Many Genetic Associations Likely to Reflect Differences in Expression:-

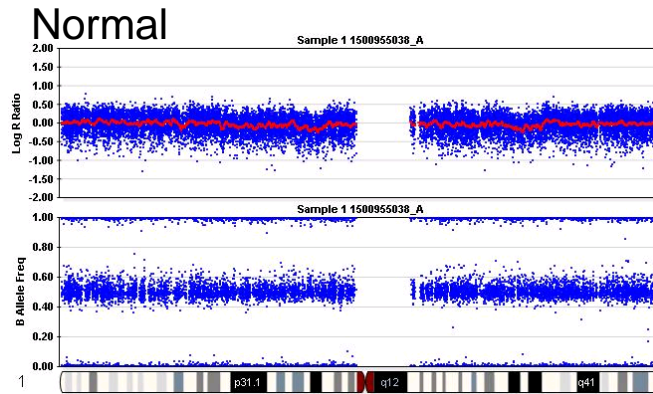
- Three Common Haplotypes of Gene ω
 - ωA gives \uparrow
 - ωB gives \rightarrow
 - ωC gives \downarrow
- 300 Human Control Cortices: Fully Genotyped (Affy 500K array): and Full Expression Array (Illumina 24K expression Array)
- If disease is associated with High Expression, genetic association should be seen in ωAA homozygotes and protection in ωCC with ωBB intermediate

Need to have proper diversity to know what is normal and to find admixture (CEPH Diversity series)

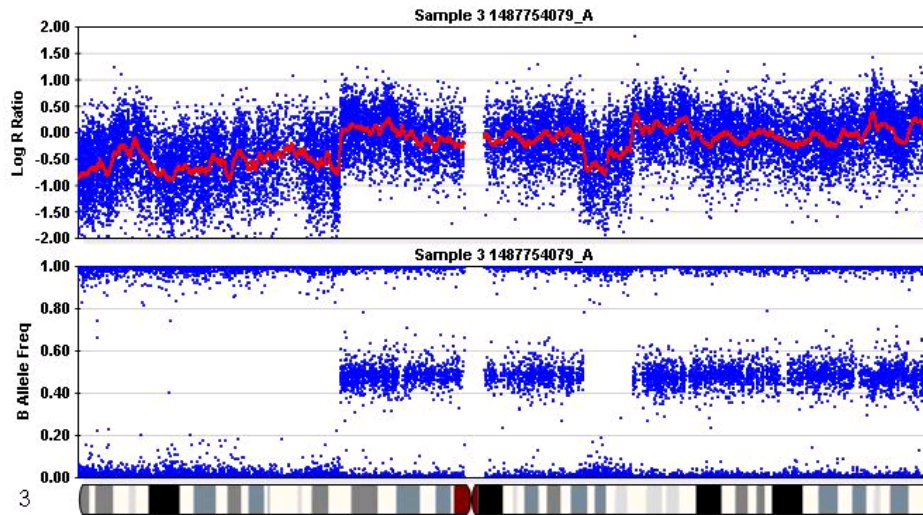
Distribution of Tau Haplotype



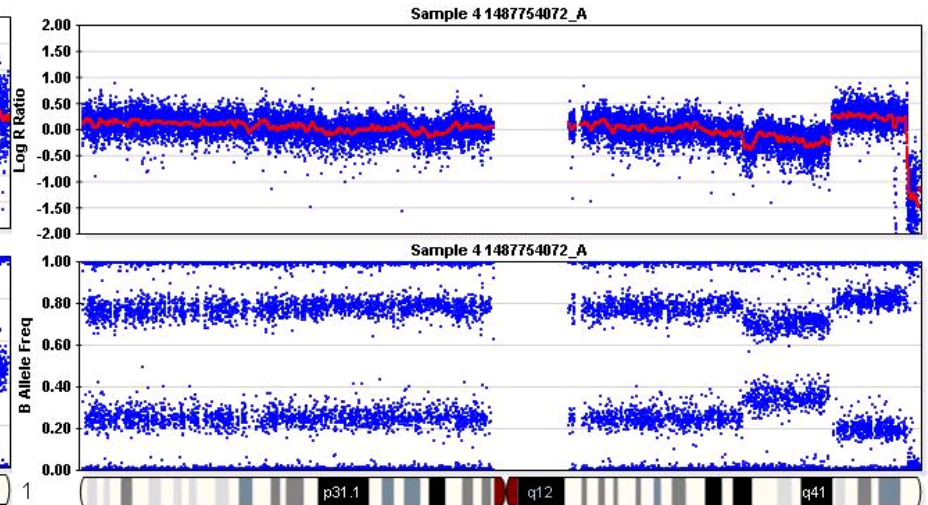
Common cell lines



M17

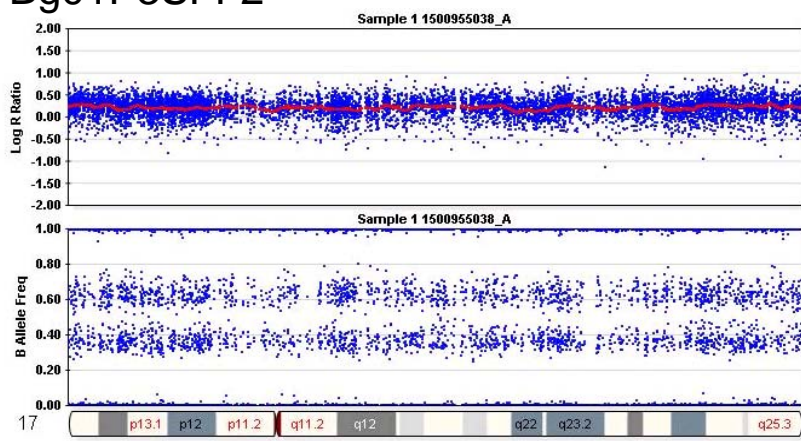


HEK293

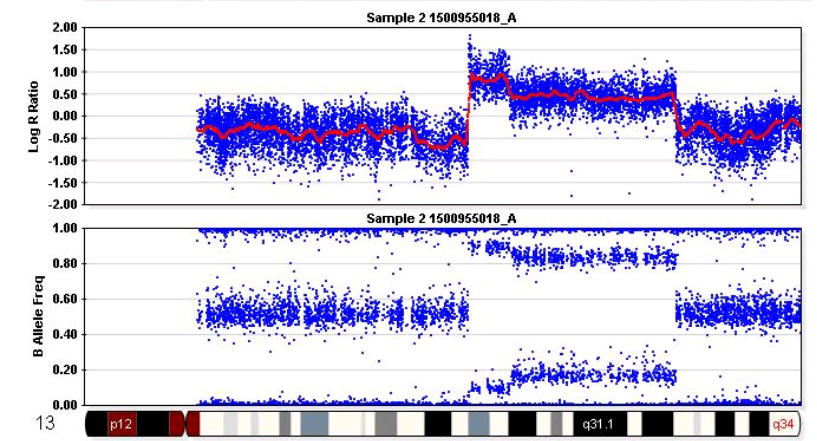
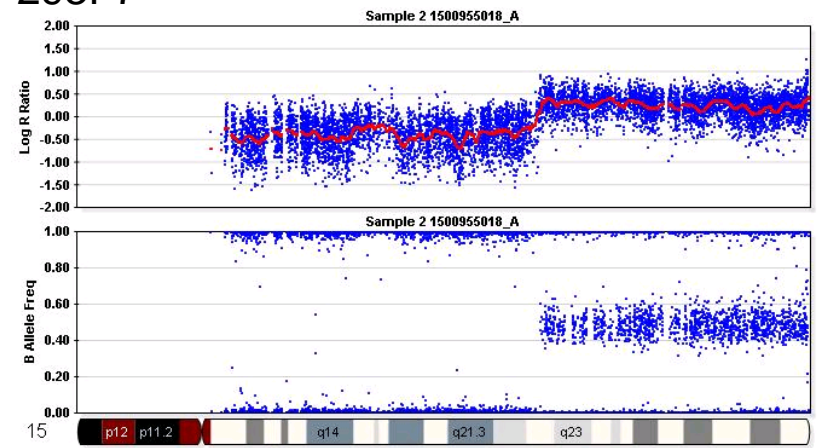


Federally approved Stem Cell Lines

Bg01P3SFF2



293F7



The Future

- All genetic samples will have WG data (now ~\$700 a sample)
- All cell lines will have WG data
- Need a catalogue of variability
- Need real diversity
- Perhaps start with homogenous cohorts for whole genome association analyses