

# PMSF Symposium

## Genetics 101

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# Outline

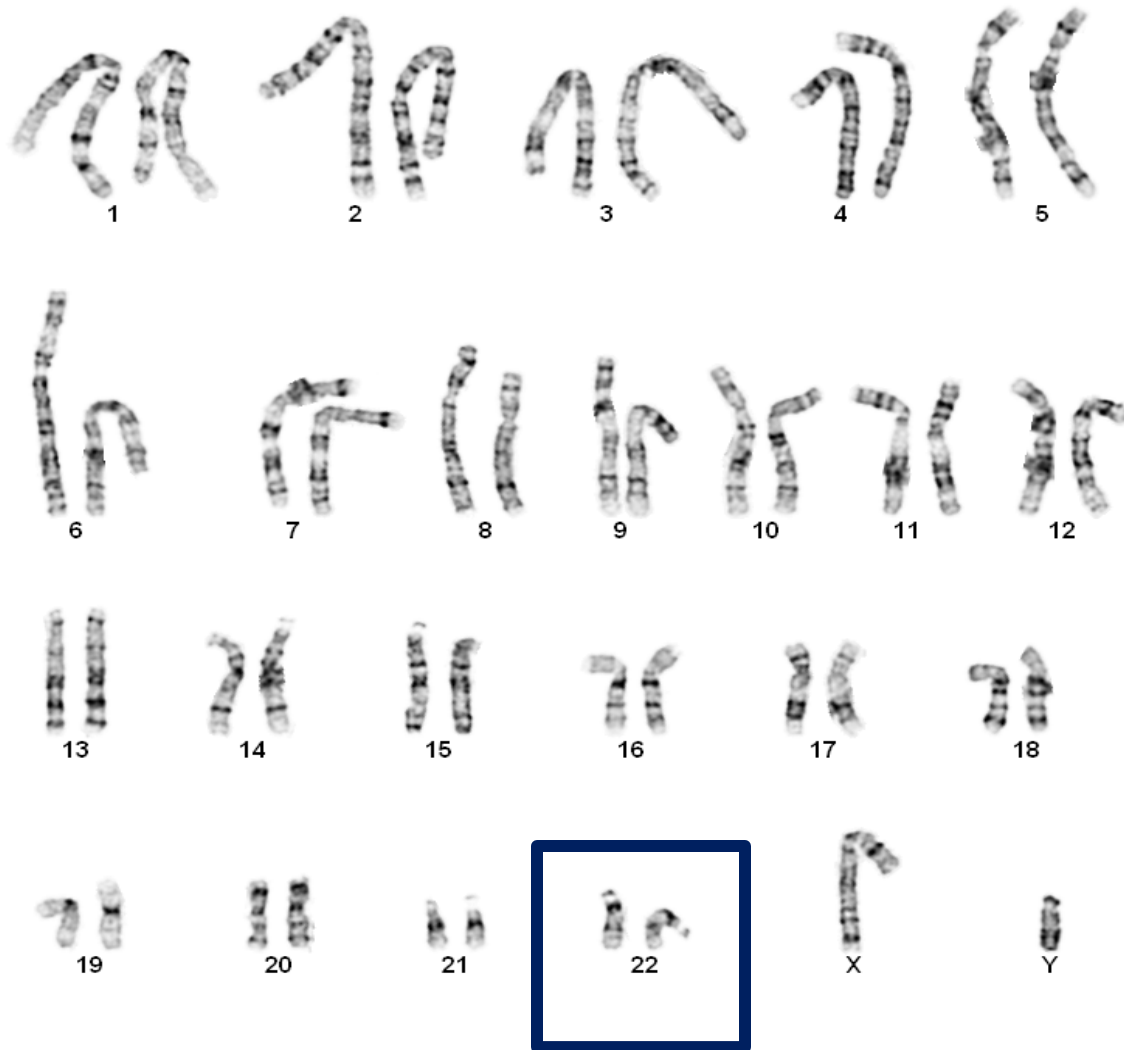
- Overview of genetic terminology
- Types of genetic mutation related to Phelan-McDermid syndrome and how they are detected
- Relationships between mutation type and characteristics and manifestations of the condition

\*Note that the material presented is not necessarily applicable to all families with Phelan-McDermid syndrome or other genetic conditions. Professional consultation should be obtained to guide interpretation of genetic testing results.

# Phelan-McDermid Syndrome

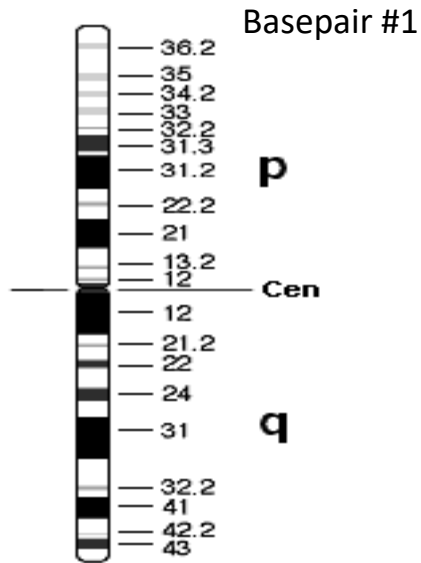
- Intellectual disability, autism
  - Limited to absent speech
  - Greater receptive than expressive communication
- Seizures
- Increased pain tolerance
- Limited mobility
  - Delayed ability to walk, unsteady gait, unable to walk
- Characteristic physical features
  - Thin toenails, large fleshy hands

# The Human Genome



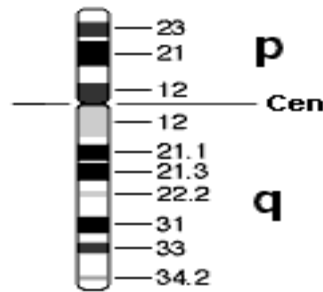
# Describing Chromosomes

#1



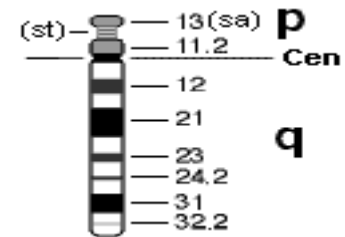
Metacentric

#9



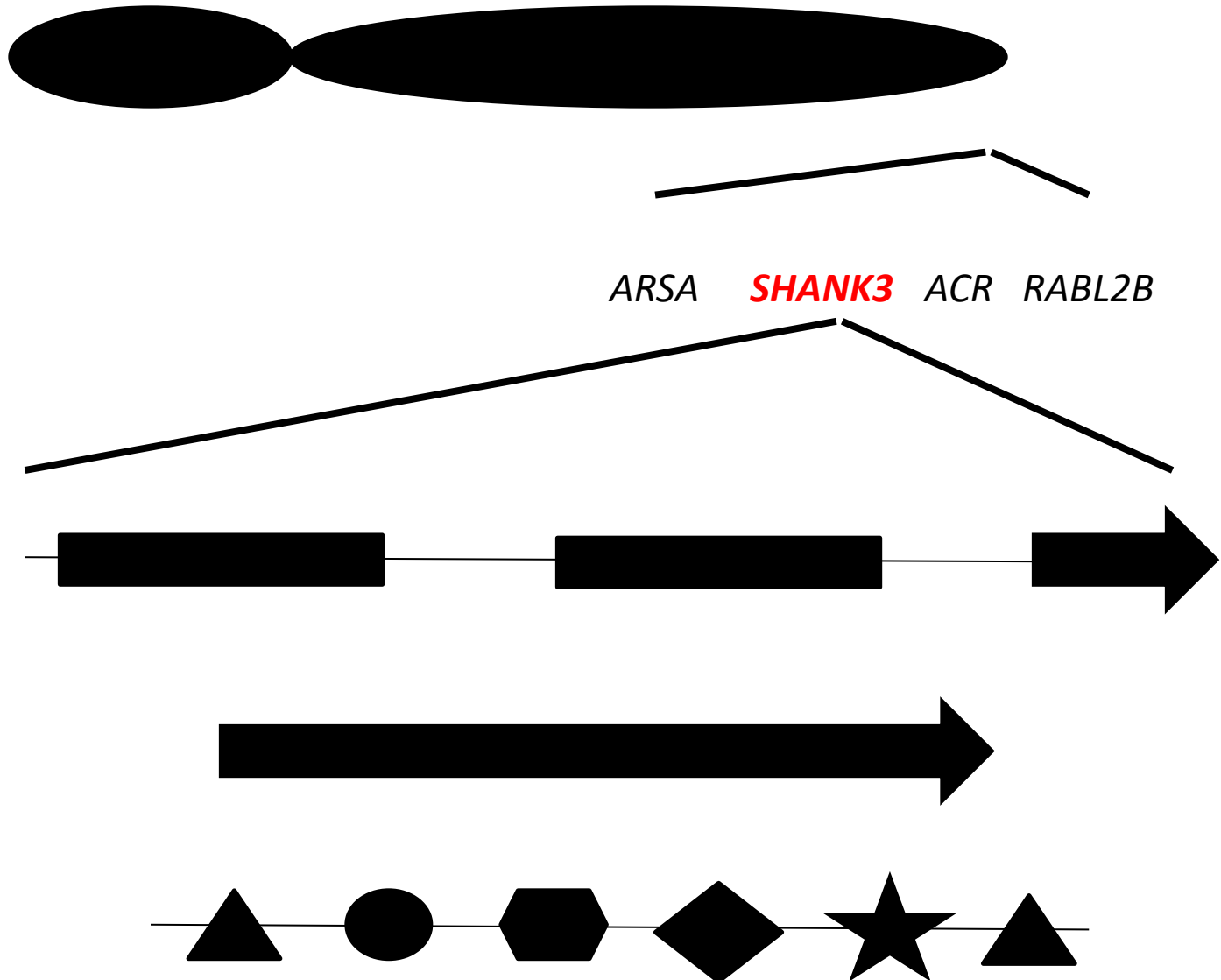
Submetacentric

#14



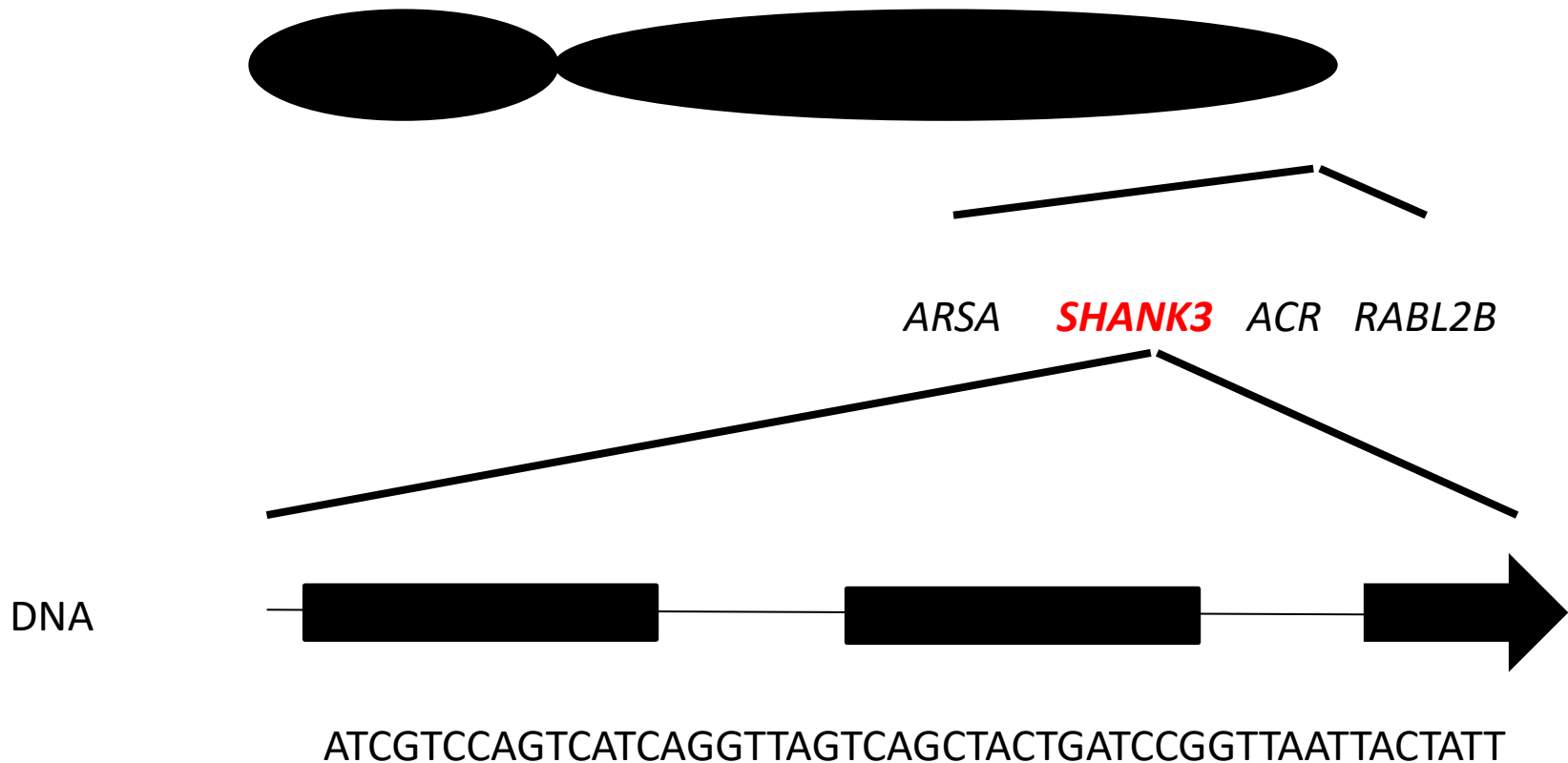
Acrocentric

# Distal Chromosome 22



# Scales of Genetic Variation

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# Deletions



Terminal



Interstitial





# Interstitial Deletions

Interstitial



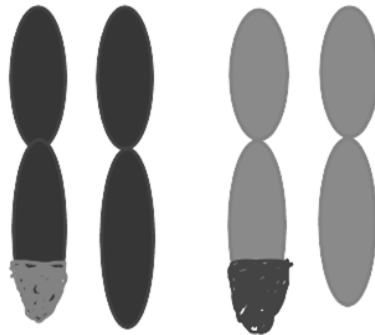
- Many interstitial deletions are new or *de novo*
- Individuals with an interstitial deletion in *SHANK3* typically have a 50% of passing it on.
- If parents do not detectably have the deletion or a predisposing genetic change in their blood the likelihood of another family member having the same mutation are reduced, but not eliminated.

# Terminal Deletions

Terminal



Translocation Carrier

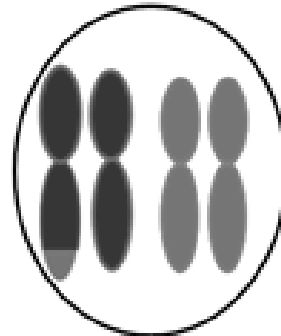


Meiotic Pairing



Balanced translocation

A balanced translocation in a parent  
Can lead to an unbalanced translocation  
In a child and is therefore associated with  
an increased risk of familial recurrence

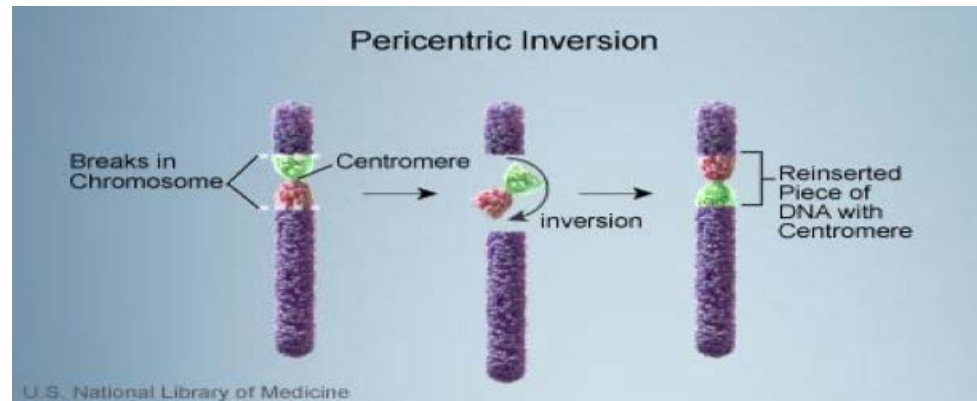


# Terminal Deletions

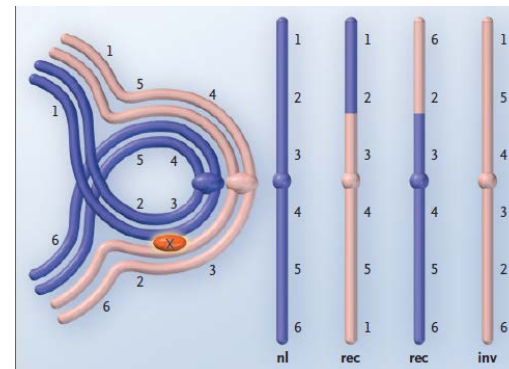
Terminal



Balanced inversion



A balanced inversion in a parent  
Can lead to an unbalanced inversion product  
In a child and is therefore associated with  
an increased risk of familial recurrence



Stoler et al., N Engl J Med 2004;351:2319-26.

# Terminal Deletions

Terminal



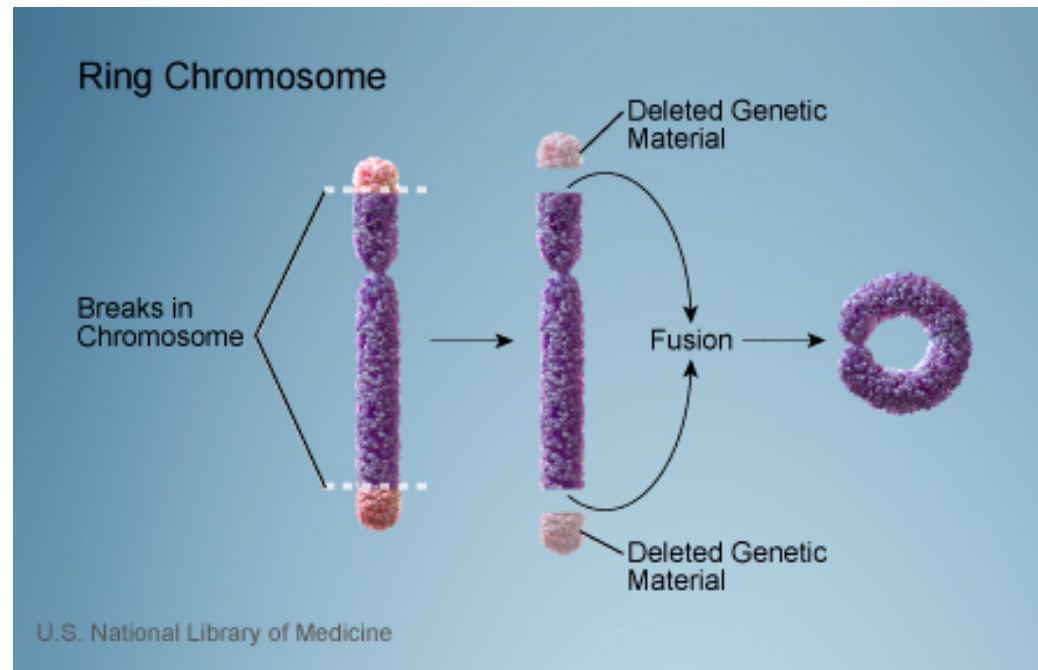
- Some terminal deletions are new or *de novo*
- Individuals with an interstitial deletion in *SHANK3* typically have a 50% of passing it on.
- If parents do not detectably have the deletion or a predisposing genetic change in their blood the likelihood of another family member having the same mutation are reduced, but not eliminated.
- Unbalanced translocations can also be new or *de novo*, however, they can also arise from a translocation in a parent

# Translocations and Inversions

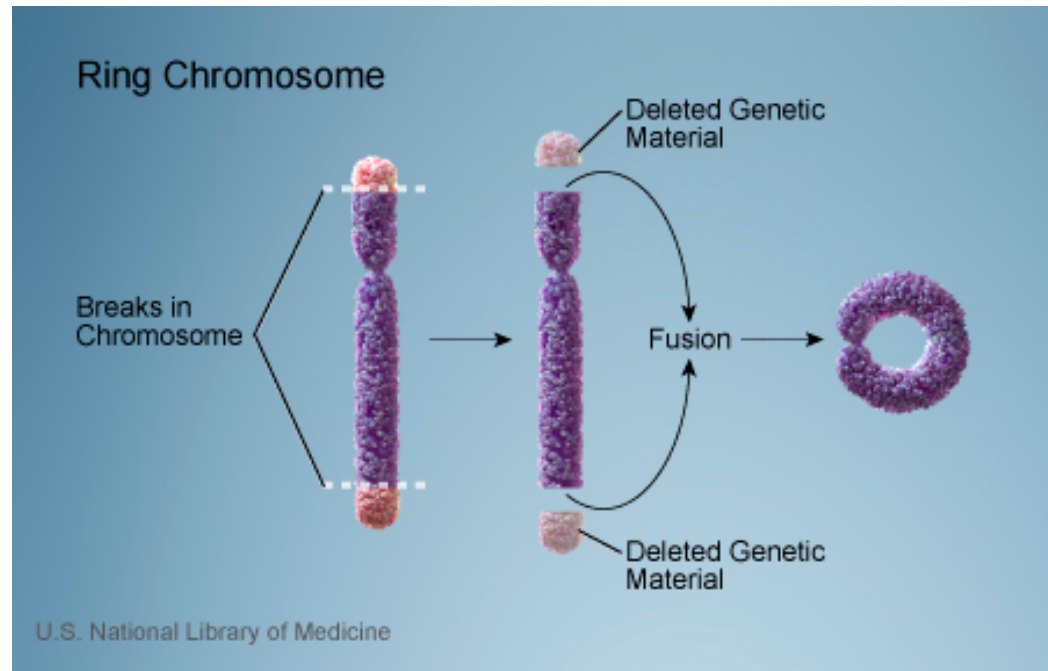
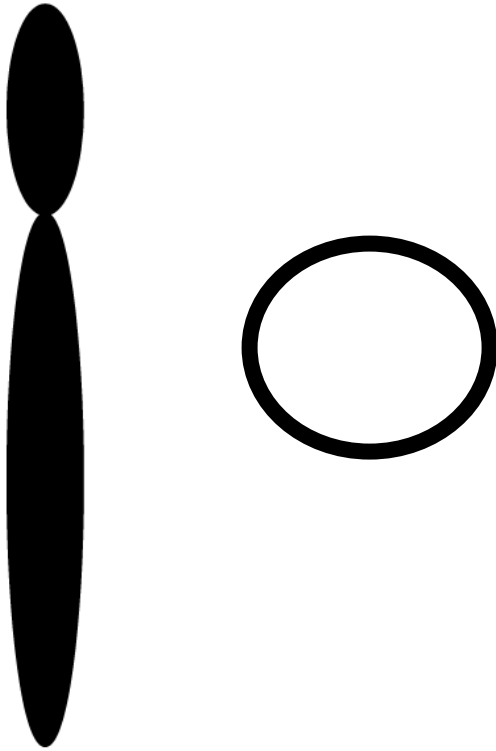
- Terminal deletions resulting from translocations or inversions typically have an accompanying duplication.
- Investigation for a these rearrangements is recommended even when the duplication is not initially detected.

# Terminal Deletions

Terminal

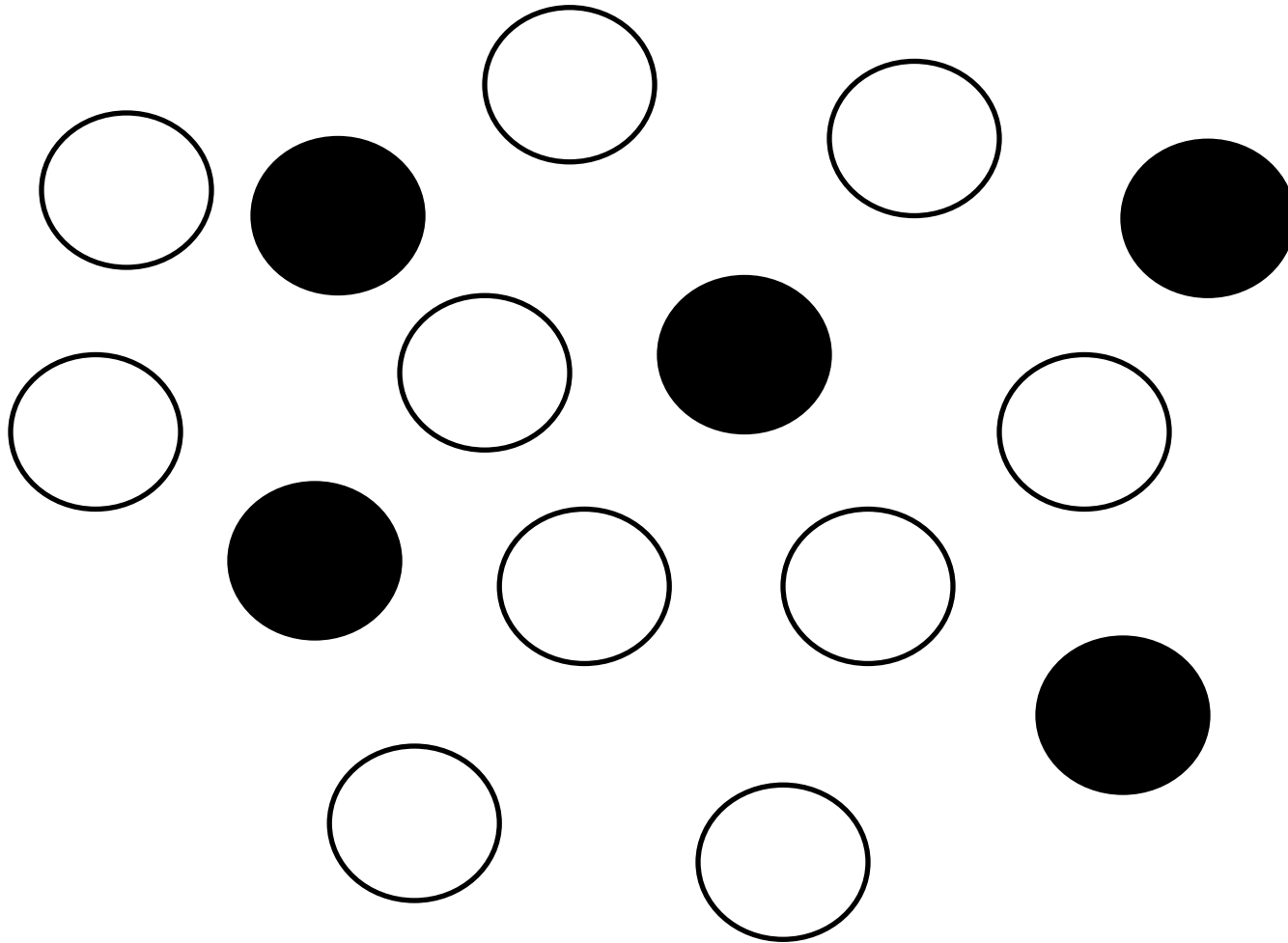


# Ring chromosomes



- Ring chromosomes are often mosaic and can be unstable
- If chromosome 22 is lost cell there can be a risk of medical complications including tumors

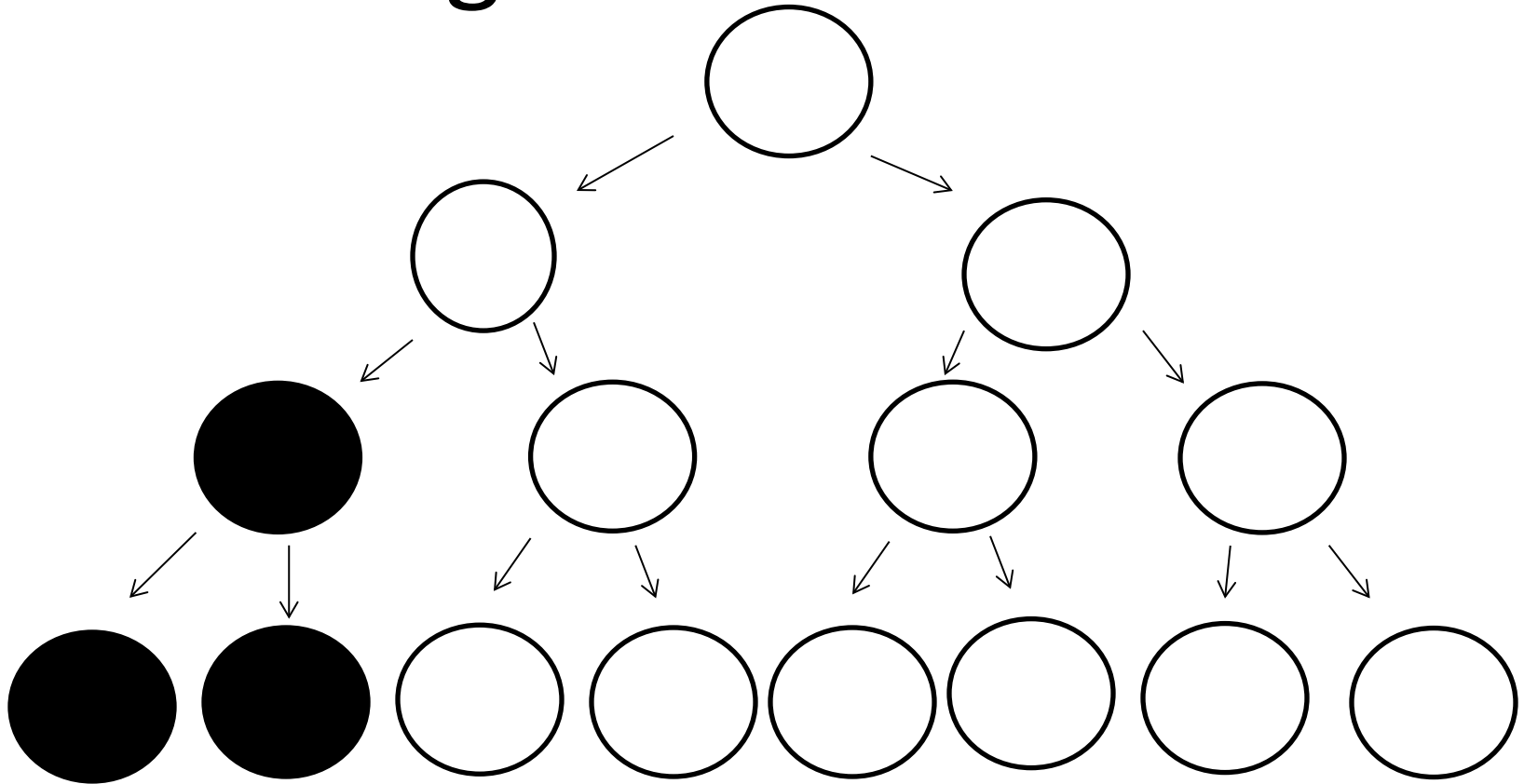
# Mosaicism



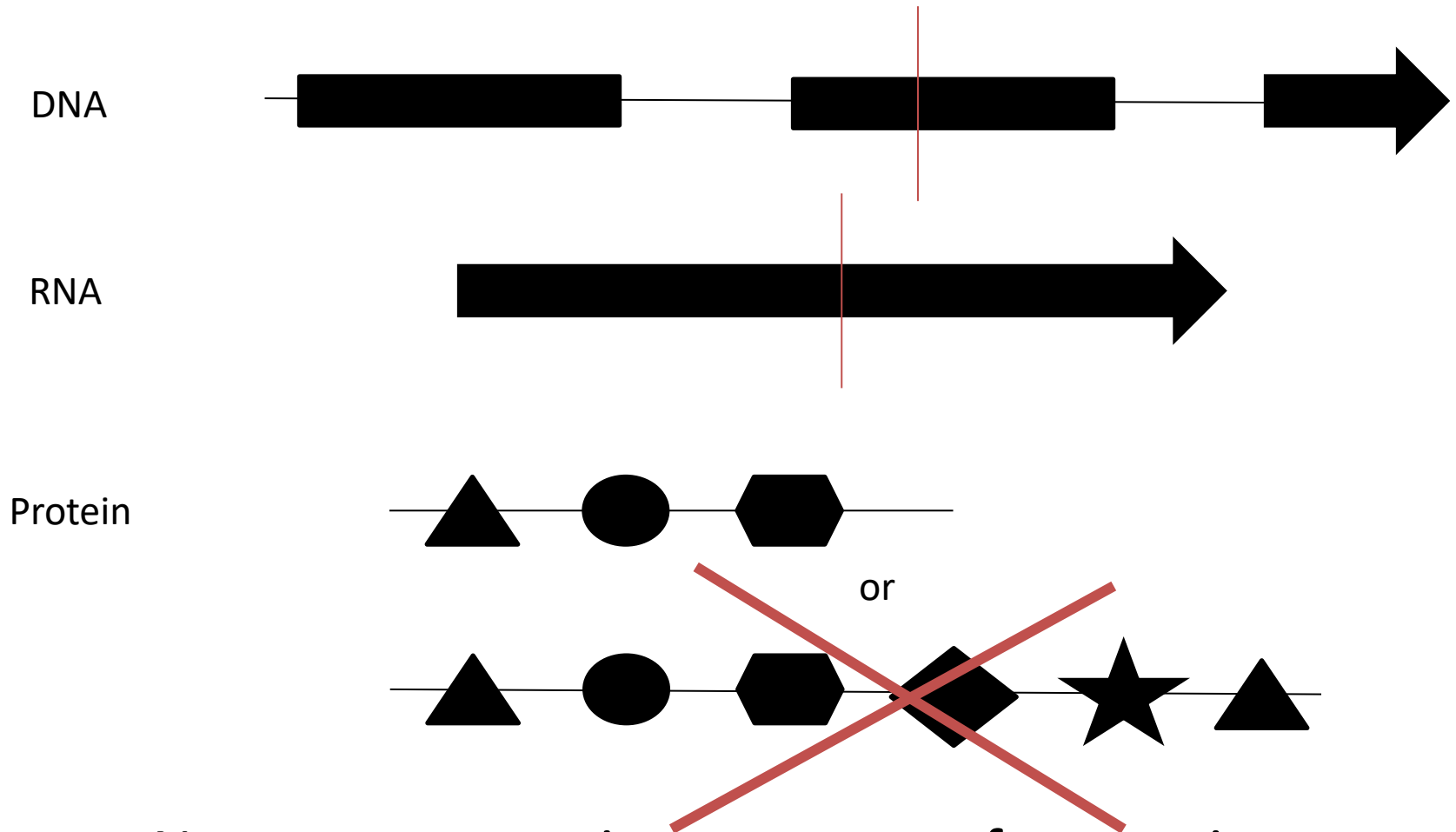
Some cells have a specific genetic change while others do not



# Origin of Mosaicism

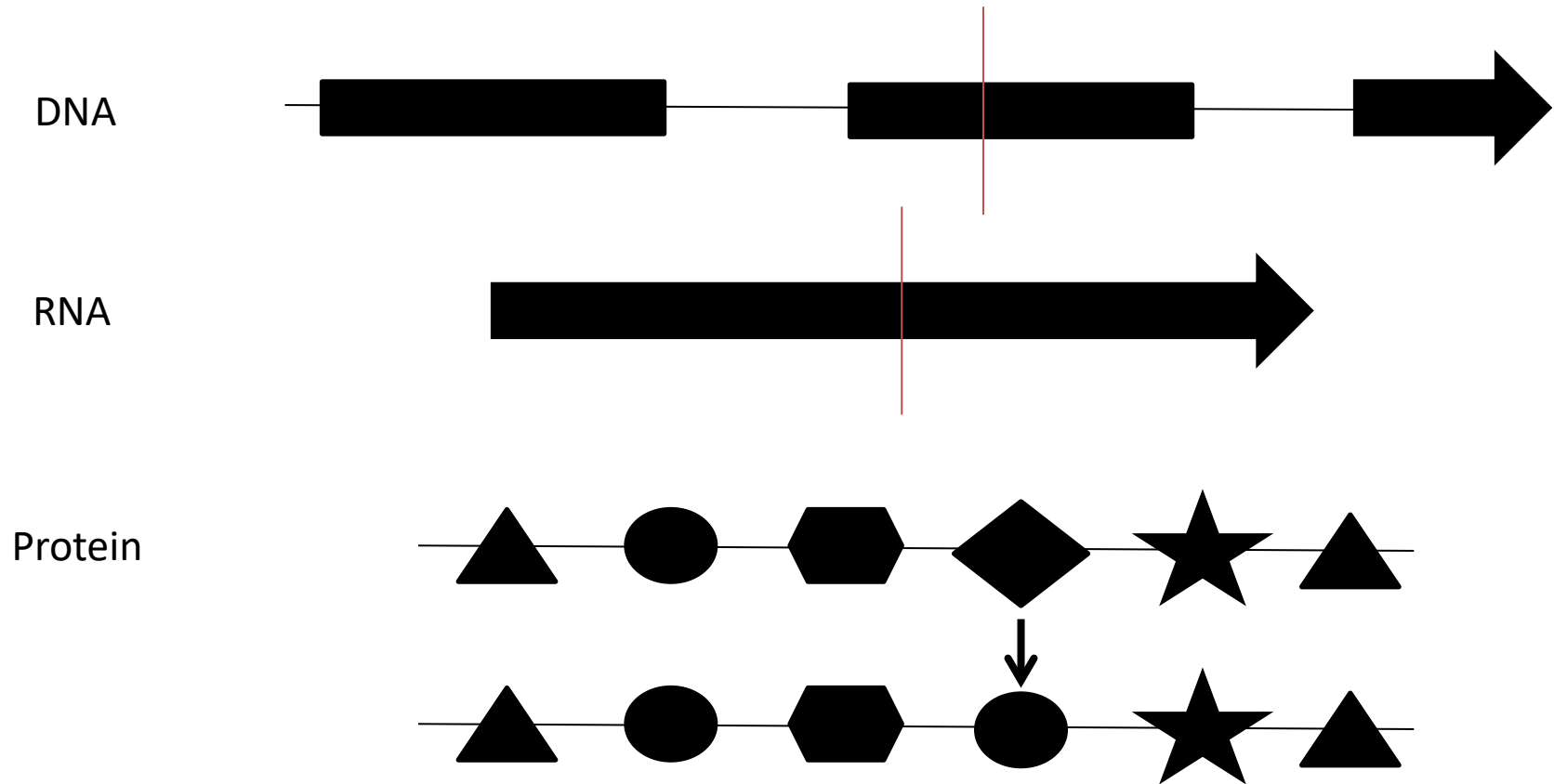


# Point mutations



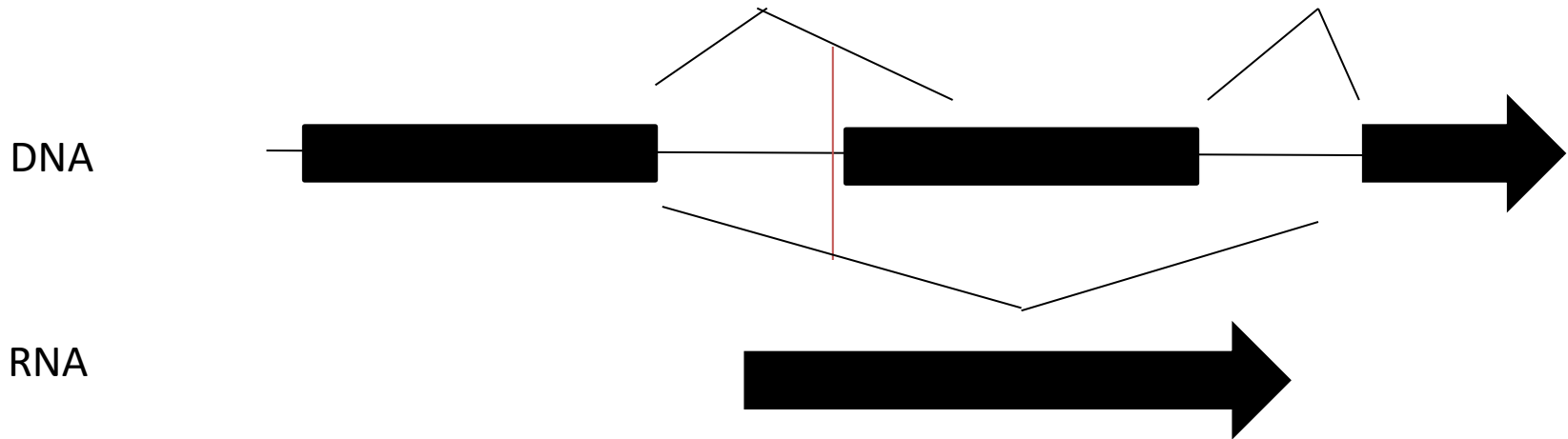
Nonsense mutations – a type of truncating mutation

# Another type of point mutation



Missense mutation

# Another type of point mutation



Splice mutation – one example

# Point mutations

- Many point mutations are new or *de novo*
- Individuals with a point mutation in *SHANK3* typically have a 50% of passing it on.
- If parents do not detectably have the point mutation in their blood the likelihood of another family member having the same mutation are reduced, but not eliminated

# Variants vs mutations

- Are all genetic changes strongly associated with a medical condition – No
- Variant – a genetic change that differs from the most commonly seen version of a particular location in the genome
- Mutation – a variant that is associated with a medical condition or other genetic trait

# Variants of uncertain significance

- For some variants it can be difficult to tell if it is a disease causing (pathogenic) mutation or a benign variant.
- Geneticists use a rating scale to roughly estimate the chance that a variant of uncertain significance is disease causing

# Relationships between genotype and phenotype

- How “severe” is a particular mutation?
- In general it is difficult to predict
  - Some trends have been suggested
  - The smallest deletions and point mutations appear to be associated with an incomplete tendency towards less extensive language impairment

Sarasua et al., Human Genetics, July 2014,  
Volume 133, Issue 7, pp 847–859

- Why would the same mutation not always have the same outcome?



# Summary

- Phelan-McDermid syndrome is a well known cause of developmental disability
- It results primarily, from disruption of the normal function of the *SHANK3*, potentially by one of a number of types of genetic mutation
- Different types of genetic variation are currently best detected by different types of genetic testing

# Summary

- Understanding the specific type of genetic mutation can sometimes help guide medical care and help estimate the chance that multiple members of a family may have the condition