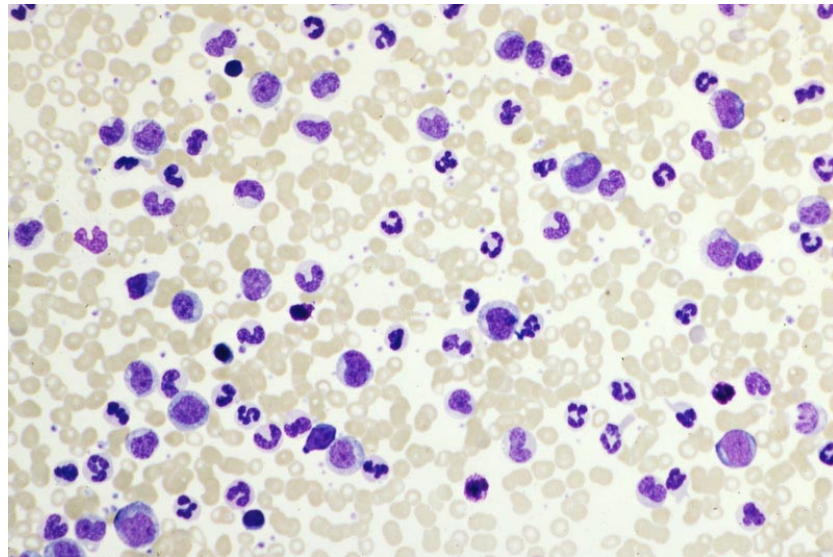
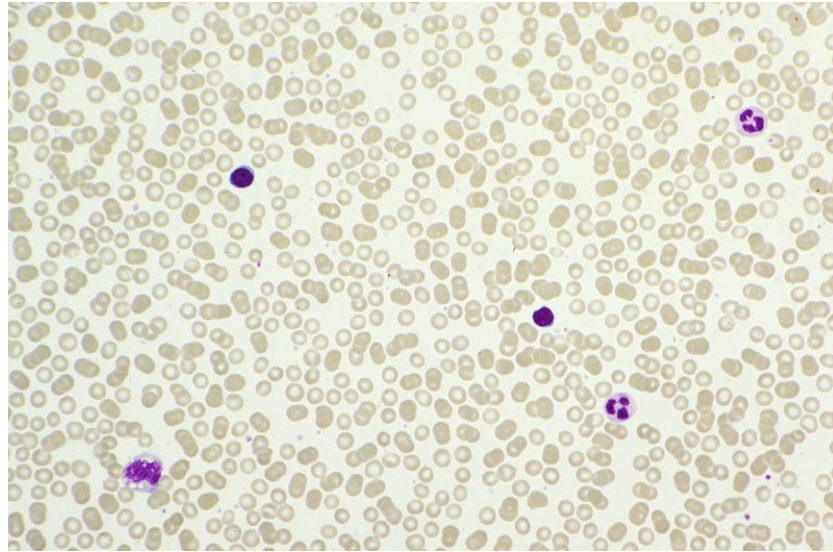
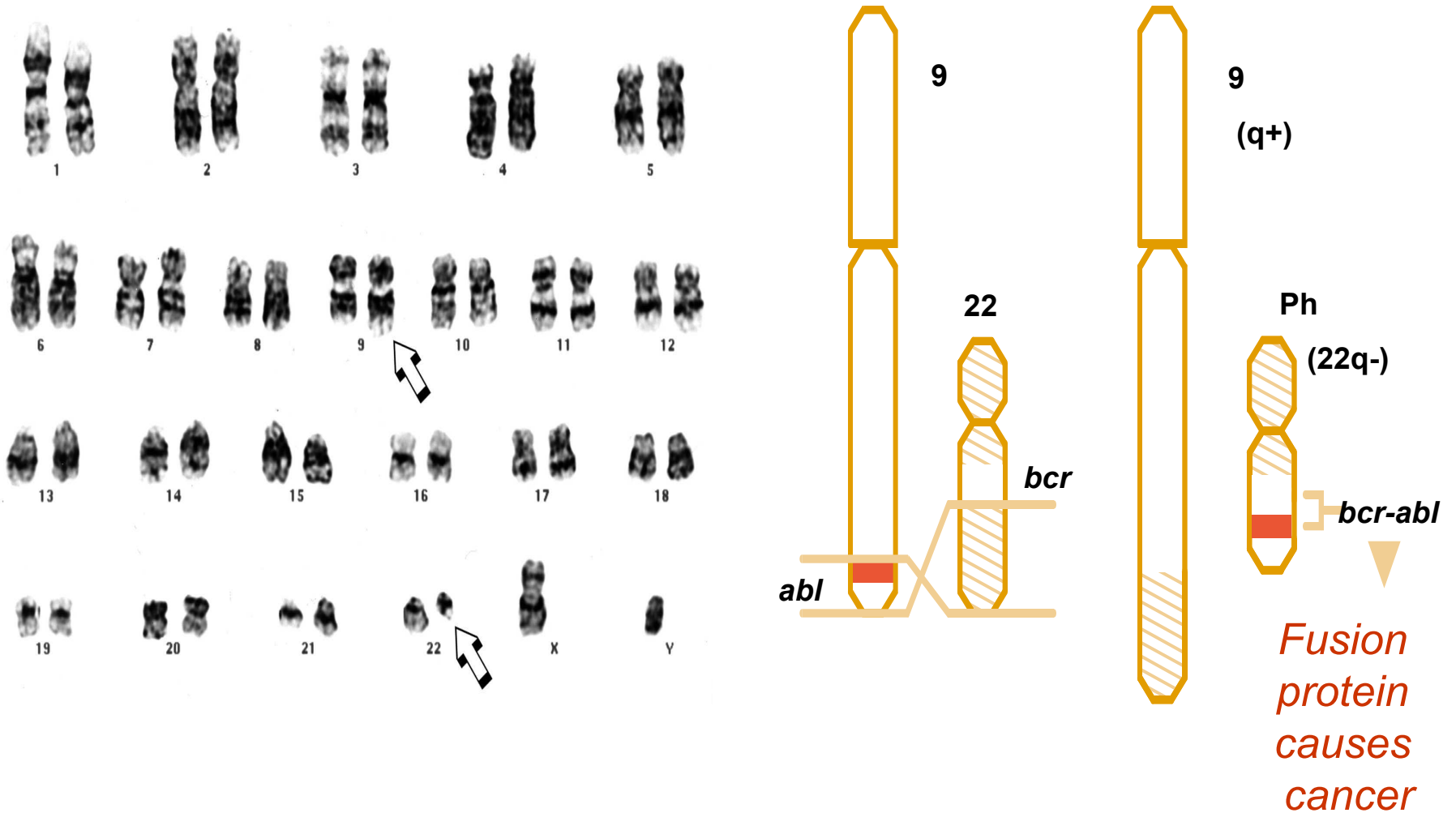


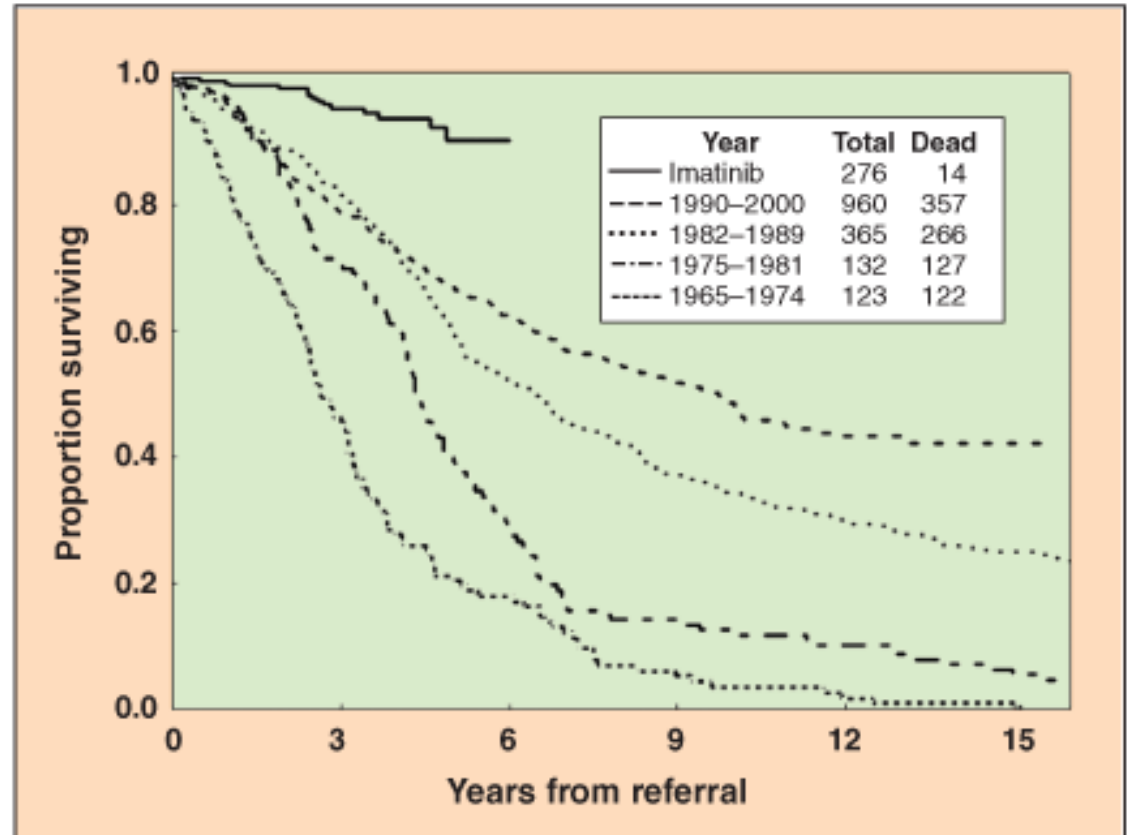
# CHRONIC MYELOGENOUS LEUKEMIA



# SHUFFLING THE GENETIC DECK IN CML



# GLEEVEC AND BCR-ABL FUSION PROTEIN



**Figure 2: Survival of Chronic Myeloid Leukemia**—Survival of patients treated at the University of Texas M.D. Anderson Cancer Center since 1965, by year of therapy and with the advent of imatinib.

# **GENETIC MEDICINE**

***A. Genetic diseases***

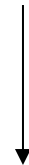
B. Genetic testing

C. Genetics and cancer

D. Genome and treatment

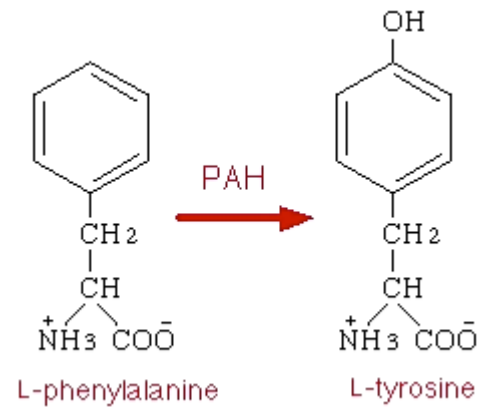
# GENE AND PROTEIN

Gene (DNA)



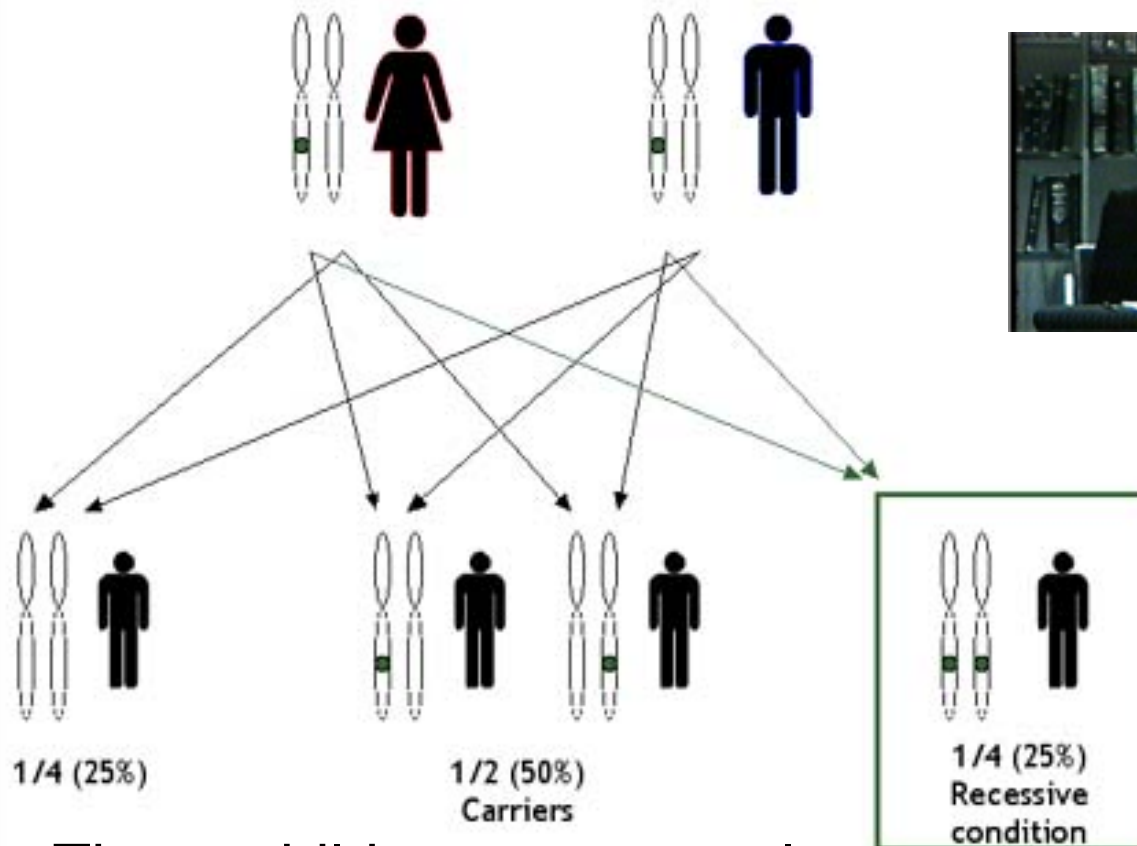
protein

Substance A -----> Substance B



# A GENETIC DISEASE

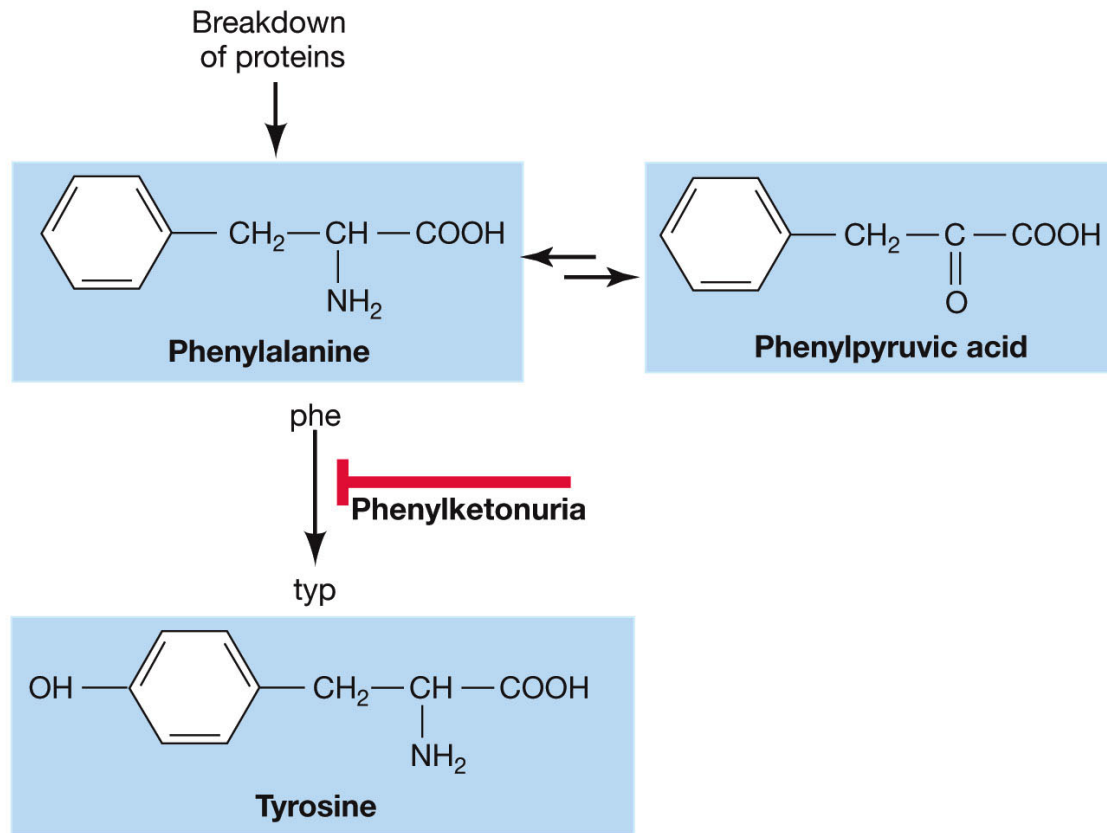
Parents are both normal



This child has PKU

These children are normal

# A GENETIC DISEASE: PROTEIN



Phenotype: Mental retardation  
1 birth in 14,000

# A GENETIC DISEASE: DNA

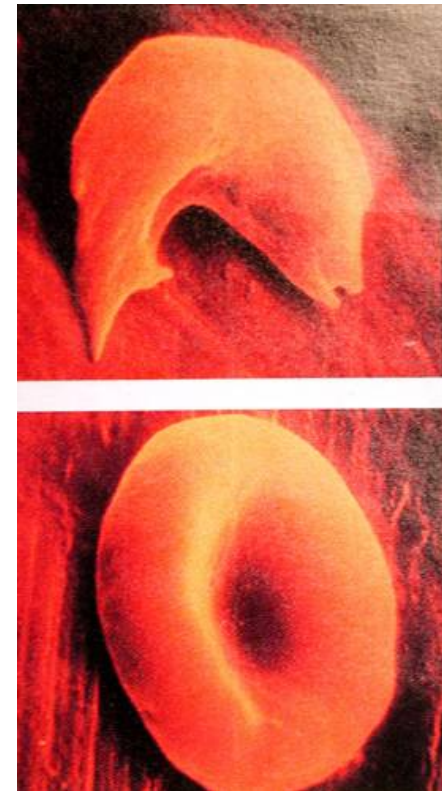
	<i>Normal</i>	<i>PKU</i>
Length of protein	451 amino acids	451 amino acids
DNA at codon 408	xxx <b>C</b> GGxxx xxx <b>G</b> CCxxx	xxx <b>T</b> GGxxx xxx <b>A</b> CCxxx
Amino acid at pos. 408	arginine	tryptophan
Protein works?	Yes	No



# GENETIC VARIATION OF HEMOGLOBIN

		Amino acid position (of 146)								
		2	6	7	16	24	26	56	63	95
A (Wild type)		His	Glu	Glu	Gly	Gly	Glu	Gly	His	Lys
	Tokuchi	Tyr								
	S		Val							
	C		Lys							
	G			Gly						
	J Baltimore				Asp					
	Savannah					Val				
	E						Lys			
	Bangkok							Asp		
	Zürich								Arg	
	M Saskatoon								Tyr	
	N Baltimore									Glu

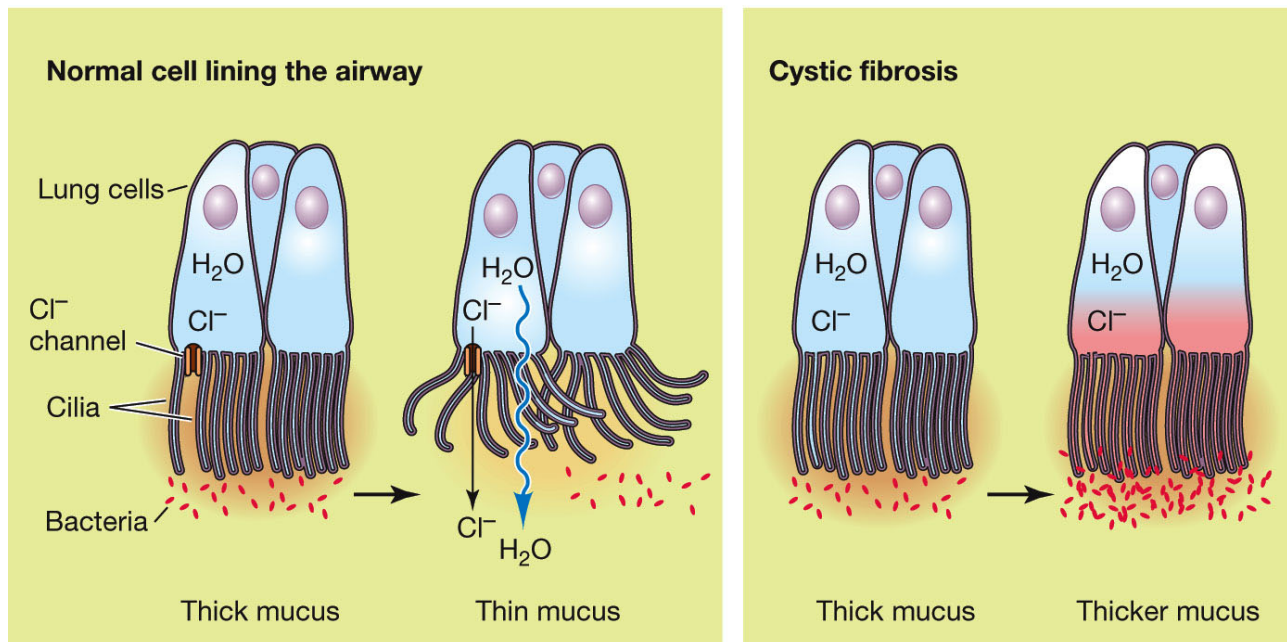
Only three hemoglobin variants (S, C, and E) lead to clinical problems.



For hemoglobin S, one birth in 100 in African-Americans

# A GENETIC DISEASE

## Cystic fibrosis



1 birth in 4,000

# GENETIC MEDICINE

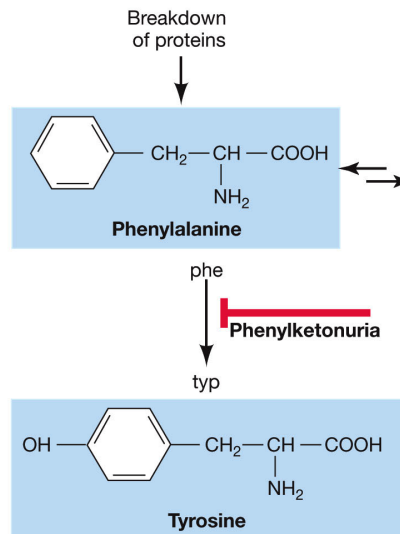
- A. Genetic diseases
- B. ***Genetic testing***
- C. Genetics and cancer
- D. Genome and treatment

# GENETIC TESTING BY PHENOTYPE

## *Newborn screening for phenylketonuria*



Blood sample from 2-4 day old infant



Measure phenylalanine in blood and look for very high level

*Legally required*

# BENEFIT OF TESTING

- Can diagnose the baby in time to treat and avoid all clinical consequences of the disease

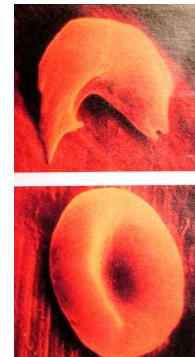
Treatment: Restrict phenylalanine in the diet. Result: no mental retardation

- Can test siblings of affected child to see if they are carriers for the disease (1 in 70 in the general population are carriers)



# GENETIC TESTING BY DNA

	<i>Sickle-cell anemia</i>
<i>Protein phenotype</i>	hemoglobin
<i>Length chain</i>	146 amino acids
<i>Normal</i>	Pos. 6: glutamic acid
<i>Disease</i>	Pos. 6: valine
<i>Length gene</i>	1512 bp
<i>Normal gene</i>	Pos. 6: GAG
<i>Disease gene</i>	Pos. 6: GTG



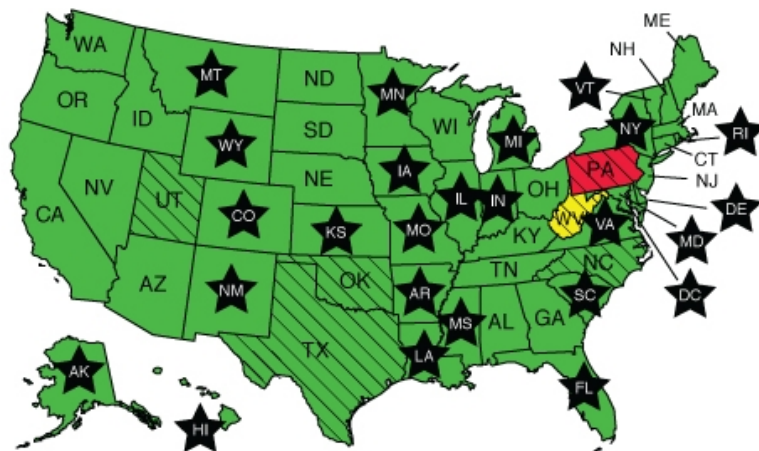
- Do not need red blood cells
- Can be done on any tissue at any time

Examine DNA for the specific change

# BENEFIT OF TESTING

- Can use same blood drop in newborn screening for PKU or test at any time
- Can initiate therapy
- Genetic counseling for family

# GENETIC TESTING OF NEWBORNS



- 21 or more core conditions (49)
- 10 - 20 core conditions (1)
- Fewer than 10 core conditions (1)
- Hatch marks indicate screening for additional core conditions required but not yet implemented.
- Screening 29 Core Conditions

COMPLETELY FILL ALL CIRCLES  
SIGN ALLOW FOR AUNT/DR  
SAS 9/18/04 LOT # W-0351

COMPLETELY FILL ALL CIRCLES  
SIGN ALLOW FOR AUNT/DR  
SAS 9/18/04 LOT # W-0351

Medical Record Number

Infant's Name - Last Name, First Name

Infant's Date of Birth: Month, Day, Year

Time of Birth: Hour, Minute

Birth Weight (in Grams): \_\_\_\_\_

Multiple Births:  Single  Twins  Triplet

Gestational Weeks (A, B, C, etc.): \_\_\_\_\_

Sex:  F  M

Infant's Race or Ethnicity:  White  Asian  Black  Hispanic  Native American  Other

Risk Factors:  Sick baby  No  Yes  Deformed/Anomalous  No  Yes  Downward Slanting  No  Yes  Malformed/Regenital  No  Yes  Congenital (eg. PKU, PHE, P)  No  Yes  Other

Date of First Feeding: Month, Day, Year

Time of First Feeding: Hour, Minute

Type of Feeding:  Breast  TPN  FORMULA: Trade Name: \_\_\_\_\_

Date of Collection: Month, Day, Year

Time of Collection: Hour, Minute

Special Circumstances:  Second  Home  Test  TPN  Antibiotic  Transfused

Date of Transfusion: Month, Day, Year

Mother's Name - Last Name, First Name

Mother's Date of Birth: Month, Day, Year

Mother's Address - Street Address, City, State

Mother's Phone Number: Area Code, Number

Submitter's Name

Submitter's Phone Number: Area Code, Number

Physician Responsible for Infant Follow Up

Physician's Phone Number: Area Code, Number

Physician's Fax Number: Area Code, Number

HEARING SCREENING - Non-Standard Protocol Last Screen

Date of Last Screen: Month, Day, Year

Right Ear:  Pass  Other

Left Ear:  Pass  Other

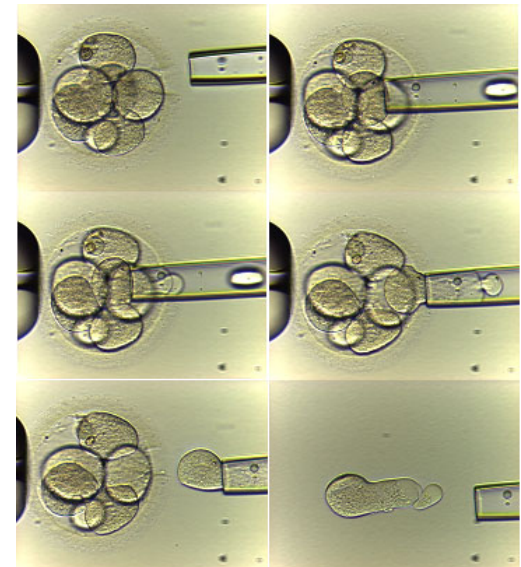
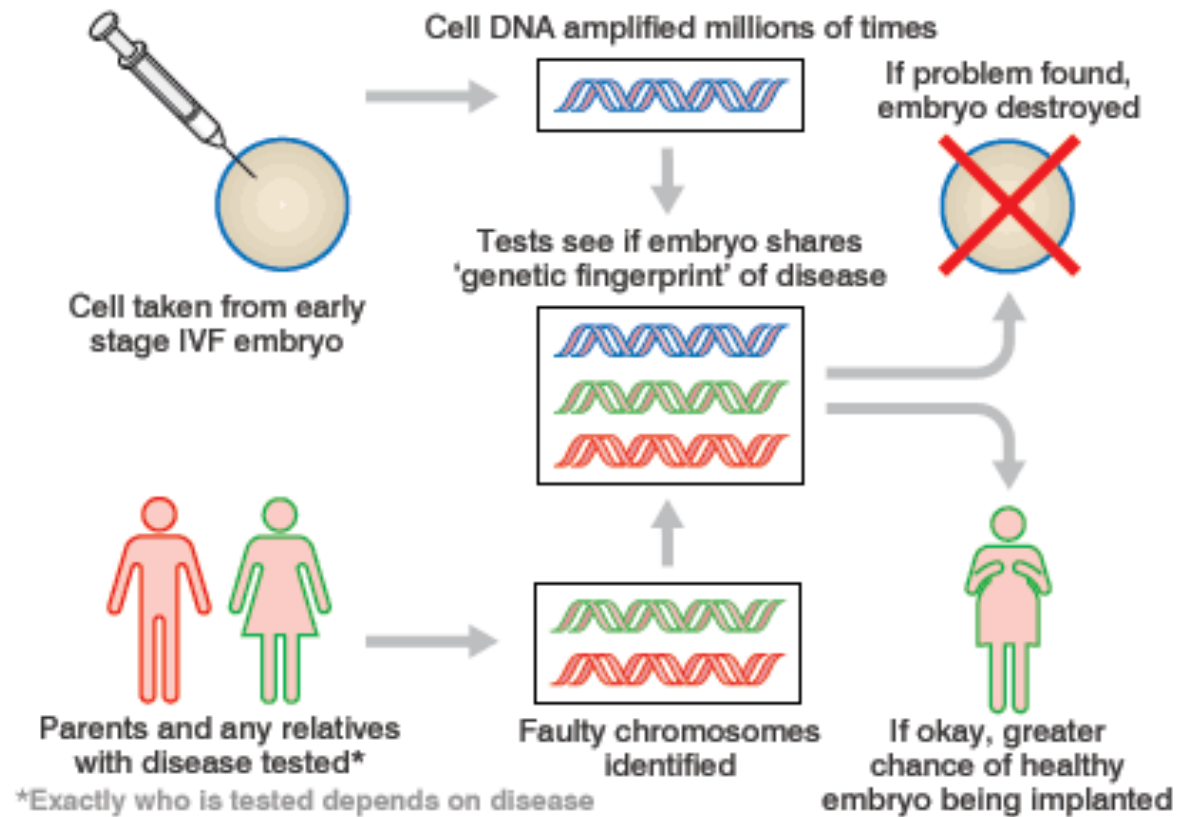
Screening Method:  OAE  COCHLEA  N/A  Program  Collected  Not  Not used  Delayed  Equipment Problem  Referred (Larynx)

Minnesota Department of Health, Newborn Screening Program, 717 Delaware Street SE, Minneapolis, MN 55414, Phone 612-676-6300, Fax 612-676-9103



# PREIMPLANTATION TESTING

## NEW EMBRYO TEST: PRE-IMPLANTATION GENETIC HAPLOTYPING



# CARRIER TESTING

[Achondrogenesis Type 1B](#)  
[Achromatopsia](#)  
[Alkaptonuria](#)  
[Alpha-1 Antitrypsin Deficiency](#)  
[Andermann Syndrome](#)  
[ARSACS](#)  
[Aspartylglycosaminuria](#)  
[Ataxia With Vitamin E Deficiency](#)  
[Ataxia-Telangiectasia](#)  
[Autosomal Recessive Polycystic Kidney Disease](#)  
[Bardet-Biedl Syndrome\\_BBS1-Related](#)  
[Bardet-Biedl Syndrome\\_BBS10-Related](#)  
[Beta Thalassemia](#)  
[Biotinidase Deficiency](#)  
[Bloom Syndrome](#)  
[Canavan Disease](#)  
[Carnitine Palmitoyltransferase IA Deficiency](#)  
[Carnitine Palmitoyltransferase II Deficiency](#)  
[Cartilage-Hair Hypoplasia](#)  
[Choroideremia](#)  
[CLN5-Related Neuronal Ceroid Lipofuscinosis](#)  
[Congenital Disorder of Glycosylation Type Ia](#)  
[Congenital Disorder of Glycosylation Type Ib](#)  
[Congenital Finnish Nephrosis](#)  
[Cystic Fibrosis](#)  
[Cystinosis](#)  
[Diastrophic Dysplasia](#)  
[Factor V Leiden Thrombophilia](#)  
[Factor XI Deficiency](#)  
[Familial Dysautonomia](#)  
[Familial Mediterranean Fever](#)  
[Fanconi Anemia Type C](#)  
[Fumarase Deficiency](#)  
[Galactosemia](#)  
[Gaucher Disease](#)  
[GJB2-Related DFNB 1 Nonsyndromic Hearing Loss and Deafness](#)  
[Glucose-6-Phosphate Dehydrogenase Deficiency](#)  
[Glutaric Acidemia Type 1](#)  
[Glycogen Storage Disease Type Ia](#)  
[Glycogen Storage Disease Type Ib](#)  
[Glycogen Storage Disease Type III](#)  
[Glycogen Storage Disease Type V](#)  
[GRACILE Syndrome](#)  
[Hereditary Fructose Intolerance](#)  
[Hereditary Thymine-Uraciluria](#)  
[Herlitz Junctional Epidermolysis Bullosa\\_LAMA3-Related](#)  
[Herlitz Junctional Epidermolysis Bullosa\\_LAMB3-Related](#)

hundreds of tests

\$100,000+



one test

FREE with insurance  
(or just \$349)

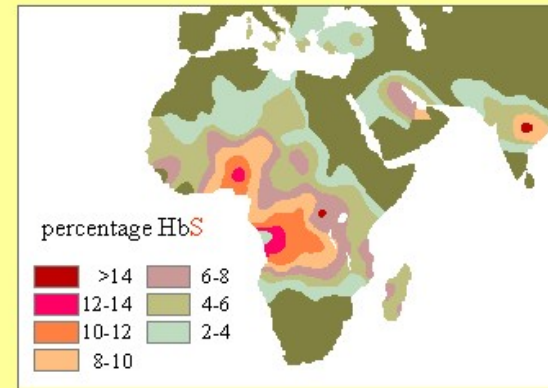
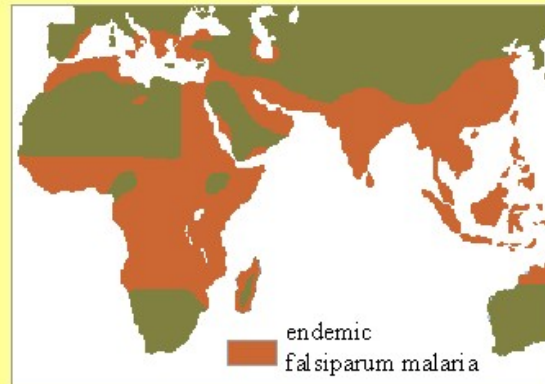


- [Hexosaminidase A Deficiency](#)
- [HFE-Associated Hereditary Hemochromatosis](#)
- [Homocystinuria Caused by Cystathionine Beta-Synthase Deficiency](#)
- [Hurler Syndrome](#)
- [Hyperornithinemia-Hyperammonemia-Homocitrullinuria Syndrome](#)
- [Hypophosphatasia\\_Autosomal Recessive](#)
- [Inclusion Body Myopathy 2](#)
- [Infantile Refsum Disease](#)
- [Isovaleric Acidemia](#)
- [Krabbe Disease](#)
- [Leigh Syndrome\\_French-Canadian Type](#)
- [Limb-Girdle Muscular Dystrophy Type 2E](#)
- [Long Chain 3-Hydroxyacyl-CoA Dehydrogenase Deficiency](#)
- [Maple Syrup Urine Disease Type 1B](#)
- [Maple Syrup Urine Disease Type 3](#)
- [Medium Chain Acyl-CoA Dehydrogenase Deficiency](#)
- [Metachromatic Leukodystrophy](#)
- [Mucopolidosis IV](#)
- [Muscle-Eye-Brain Disease](#)
- [MYH-Associated Polyposis](#)
- [Niemann-Pick Disease Type A](#)
- [Niemann-Pick Disease Type C](#)
- [Nijmegen Breakage Syndrome](#)
- [Northern Epilepsy](#)
- [Pendred Syndrome](#)
- [Phenylalanine Hydroxylase Deficiency](#)
- [Polyglandular Autoimmune Syndrome Type 1](#)
- [Pompe Disease](#)
- [PPT1-Related Neuronal Ceroid Lipofuscinosis](#)
- [Primary Hyperoxaluria Type 1](#)
- [Primary Hyperoxaluria Type 2](#)
- [Pycnodysostosis](#)
- [Recessive Multiple Epiphyseal Dysplasia](#)
- [Rhizomelic Chondrodysplasia Punctata Type 1](#)
- [Salla Disease](#)
- [Segawa Syndrome](#)
- [Short Chain Acyl-CoA Dehydrogenase Deficiency](#)
- [Sickle Cell Disease](#)
- [Sjogren-Larsson Syndrome](#)
- [Smith-Lemli-Opitz Syndrome](#)
- [Spinal Muscular Atrophy](#)
- [Tay-Sachs Disease](#)
- [TPP1-Related Neuronal Ceroid Lipofuscinosis](#)
- [Tyrosinemia Type I](#)
- [Usher Syndrome Type 1F](#)
- [Usher Syndrome Type 3](#)
- [Wilson Disease](#)
- [X-Linked Juvenile Retinoschisis](#)

# EVOLUTION AND THE GENOME: NATURAL SELECTION OF A DISEASE GENE

Malaria

Sickle-cell disease



# GENETIC TESTING OF SPECIFIC POPULATIONS

	Overall US: carriers	Jews in US: carriers
Canavan disease	1 in 800	1 in 40
Familial dysautonomia	1 in 3000	1 in 30
Gaucher disease	1 in 200	1 in 16
Niemann-Pick disease	1 in 400	1 in 80
Tay-Sachs disease	1 in 250	1 in 25

## JEWISH GENETIC DISEASES EDUCATION AND SCREENING EVENT

SUNDAY, MARCH 14, 2010

10:00 AM - 4:00 PM

INA LEVINE JEWISH COMMUNITY CAMPUS  
12701 N. SCOTTSDALE ROAD



# WHOLE GENOME SEQUENCING AND DISEASE

Charcot-Marie-Tooth Disease: inherited; 1 in 2,500 births (common)



Variable symptoms: neurological;  
foot drop, limb weakness,  
hammer toes, carpal tunnel

Treated with physical therapy

*Method:* sequenced entire genome of patient (2010)

looked for mutations in some candidate genes


found one mutated: *SH3TC2* (expressed in nervous system)

found same mutation in family: carriers

*Significance:* First gene for disease identified by whole genome sequencing

Target for therapy

# GENETIC TESTING BY SNP

David Sadava | Account | Help | Log outSearch

---

[My Home](#)  
Inbox (2)

**Health**  
Clinical Reports  
Research Reports  
Health Labs

**Ancestry**  
Maternal Line  
Paternal Line  
Relative Finder  
Ancestry Painting  
Global Similarity  
Ancestry Labs

**Sharing & Community**  
Compare Genes  
Family Inheritance  
23andMe Community  
Genome Sharing

**23andMe**  
My Surveys (25)  
Research Initiatives

## research reports

Intended for research and educational purposes. Not for diagnostic use.

[Basal Cell Carcinoma](#) ← Prev Next →  
Baldness Beta-Blocker Response

★★★ [Research Report](#) on 2 reported markers. [View all Research Reports »](#)

**Your Data**

**About Basal Cell Carcinoma** [Printable Version](#)

Basal cell carcinoma is the most common cancer in the United States, with approximately 800,000 new cases every year. Although basal cell carcinomas tend not to metastasize like more serious skin cancers, they can still invade and destroy adjacent and underlying tissue, and must be treated to prevent permanent damage. Sun exposure, having light skin, hair, or eyes, or being over 50 years old are known risk factors to developing basal cell carcinomas. People who have had one basal cell carcinoma are likely to develop additional ones within five years, so continued monitoring is necessary.

**Research Report**  
This Research Report includes results from studies that still need to be confirmed by the scientific community. It also includes topics where there may be contradictory evidence. The results of these studies are not conclusive.

[Show results for all profiles](#)

Who	Genotype	What It Means
	AA	Slightly higher odds of developing basal cell carcinoma.
David Sadava	AG	Typical odds of developing basal cell carcinoma.
	GG	Slightly lower odds of developing basal cell carcinoma.

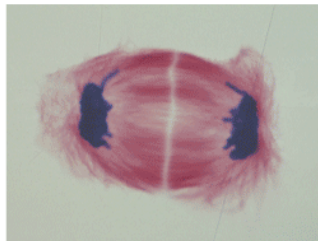
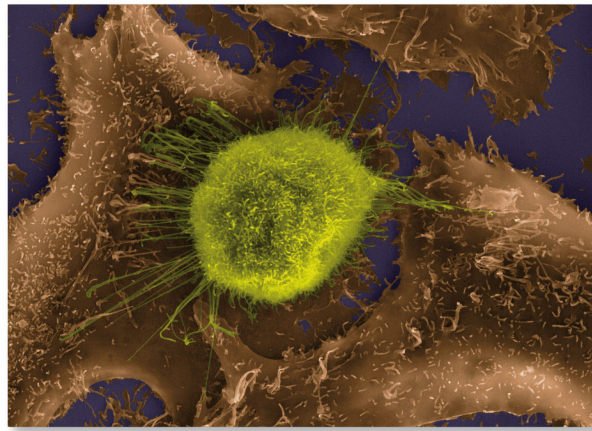
This study compared 2,137 basal cell carcinoma (BCC) patients with 35,921 healthy controls from Icelandic and Eastern European populations and found that rs7538876 in the PADI6 gene is associated with the disease. Having an A at both copies of rs7538876 increased a person's odds of developing BCC about 1.3 times compared to the AG genotype; the GG genotype decreased a person's odds about 1.3 times.

**Citations**  
[Stacey SN et al. \(2008\)](#). "Common variants on 1p36 and 1q42 are associated with cutaneous basal cell carcinoma but not with melanoma or pigmentation traits." *Nat Genet* 40(11):1313-8.

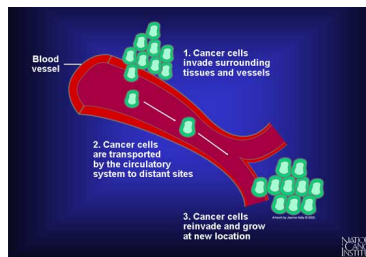
# GENETIC MEDICINE

- A. Genetic diseases
- B. Genetic testing
- C. ***Genetics and cancer***
- D. Genome and treatment

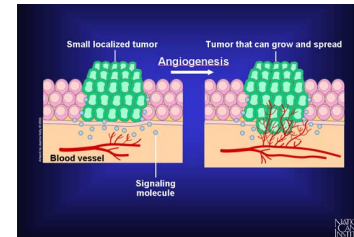
# SMALL-CELL LUNG CARCINOMA CELL WITH NORMAL CELLS



Inappropriate cell reproduction



Metastasis



Angiogenesis



# **GENES CHANGED IN CANCER**

## **ONCOGENES:**

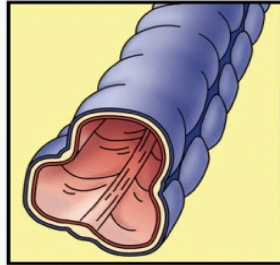
**“Gas pedals” to stimulate cell  
reproduction**

## **TUMOR SUPPRESSOR GENES:**

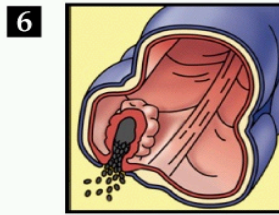
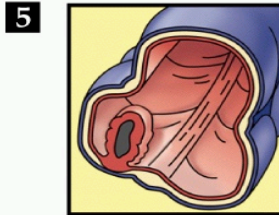
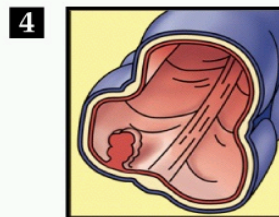
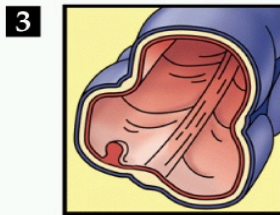
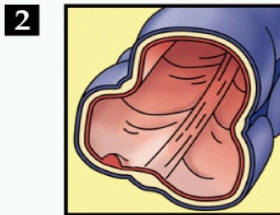
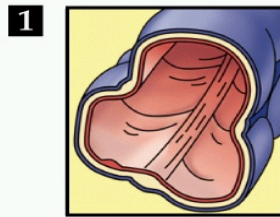
**“Brakes” cut off so reproduction  
is allowed to occur**



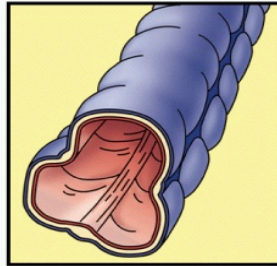
# THE PATH TO COLON CANCER



Section through colon

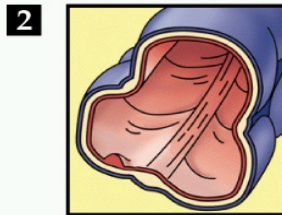
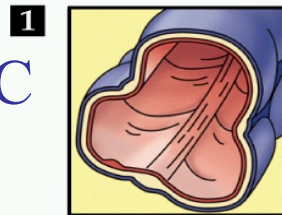


# THE PATH TO COLON CANCER

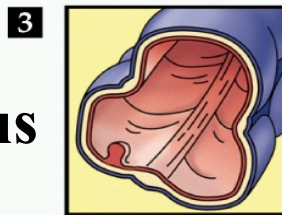


Section through colon

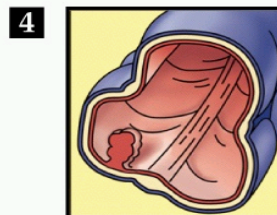
Mutation in **APC**  
gene: **Polyp**



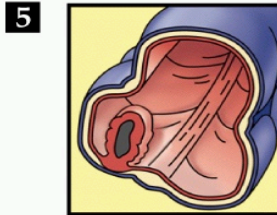
Mutation in **ras**  
gene: **Precancerous lesion**



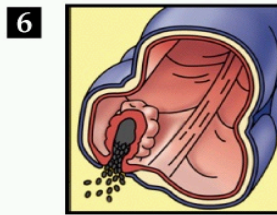
Mutation in **DCC**  
gene: **Adenoma**



Mutation in **p53**  
gene: **Carcinoma**

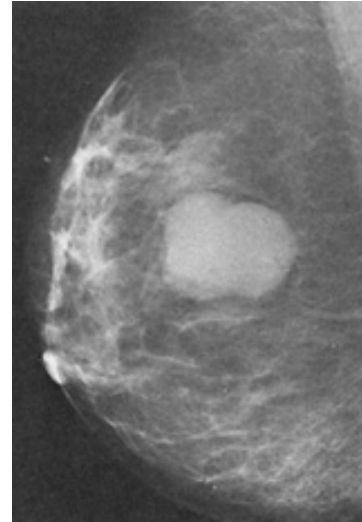


Mutation in **anti-metastasis** genes:  
**Metastatic tumor**

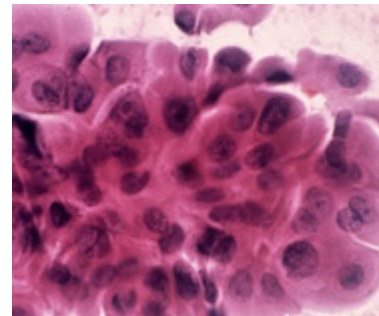


# BREAST CANCER

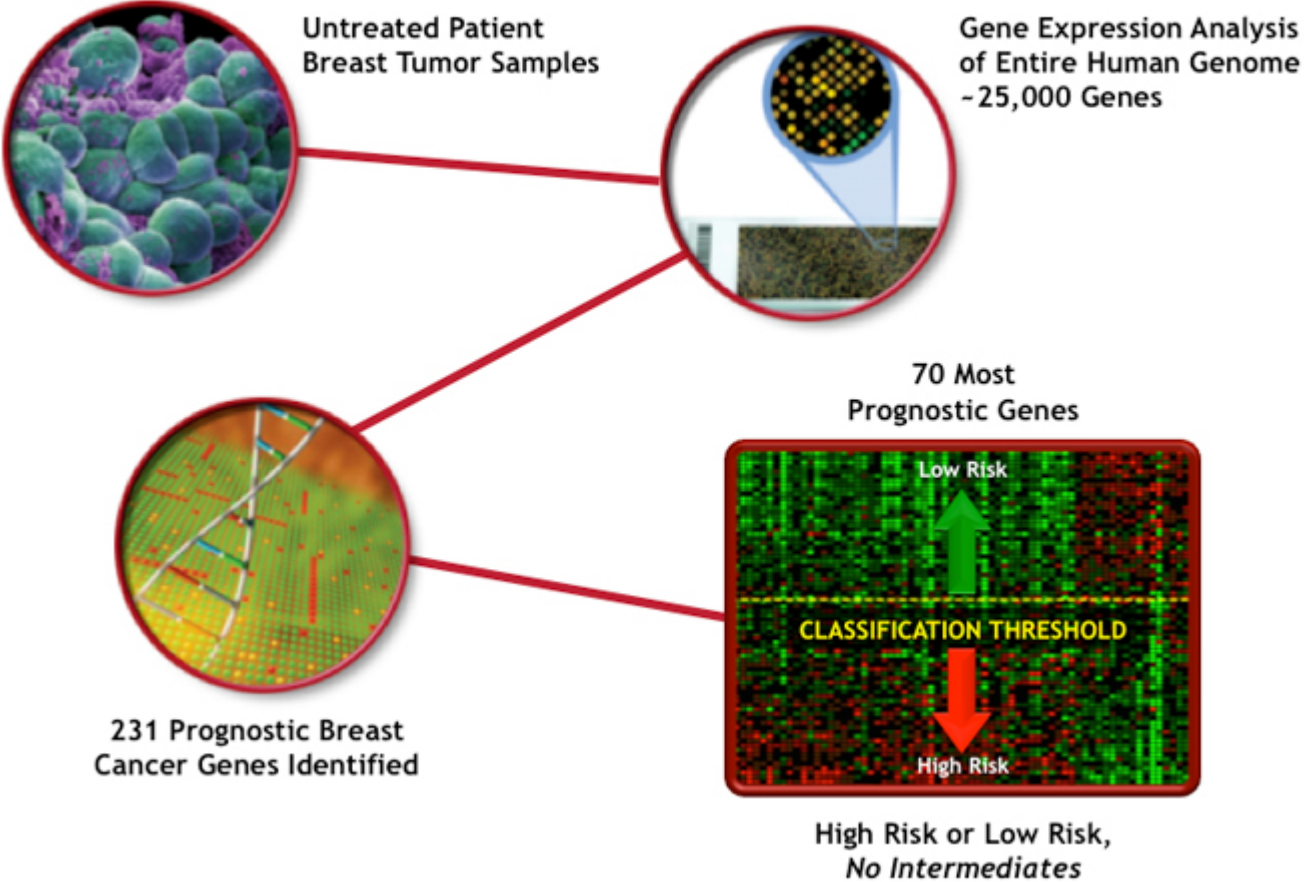
192,370 new cases,  
40,170 deaths,  
USA, 2009



**Problem: Prognosis  
after surgery**



# GENE EXPRESSION SIGNATURE FOR BREAST CANCER



# GENETIC MEDICINE

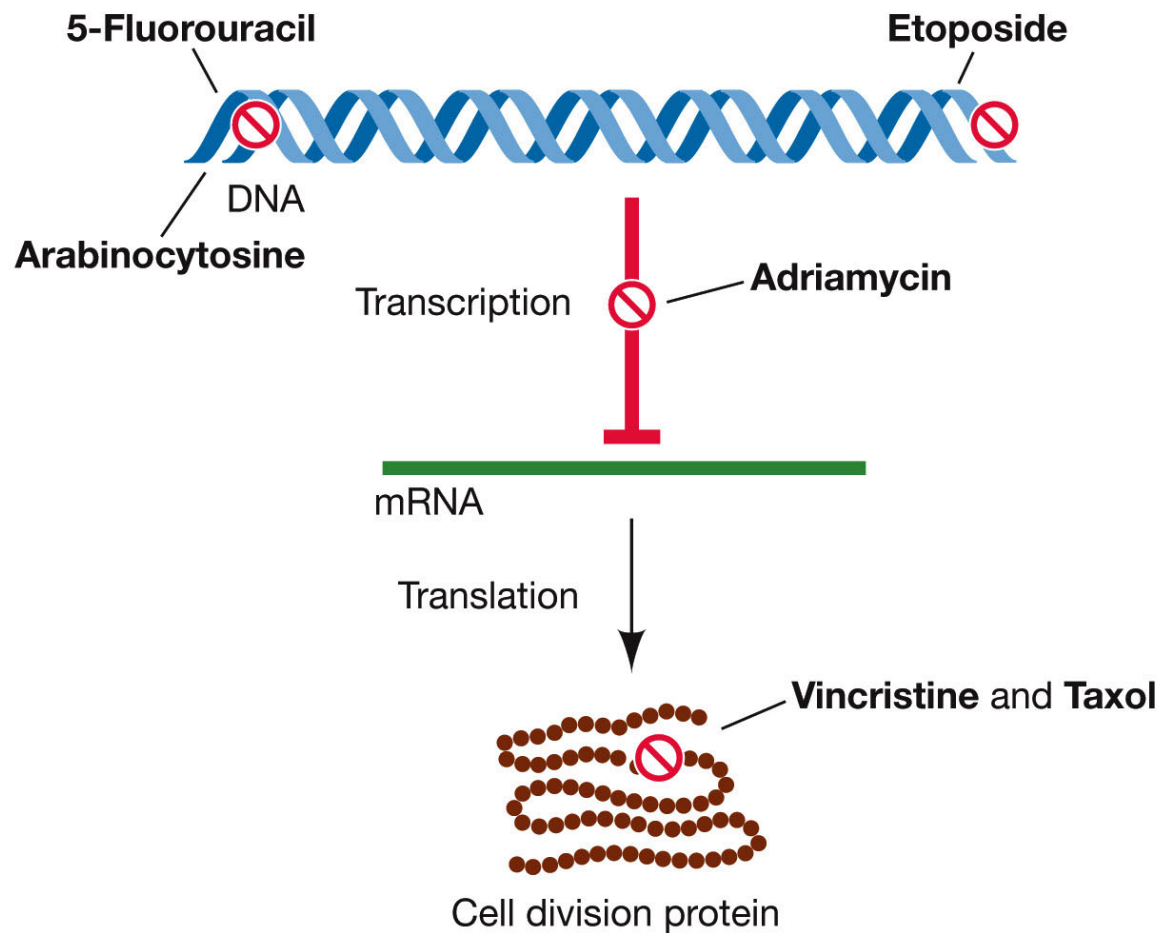
A. Genetic diseases

B. Genetic testing

C. Genetics and cancer

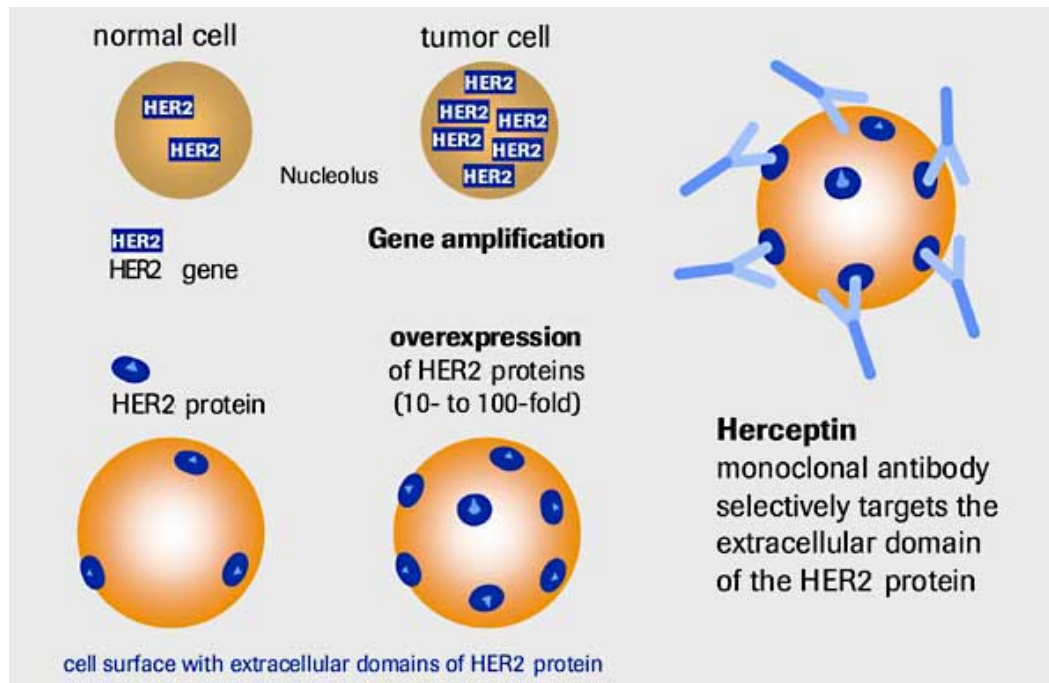
D. ***Genome and treatment***

# CHEMOTHERAPY FOR CANCER: GENERAL



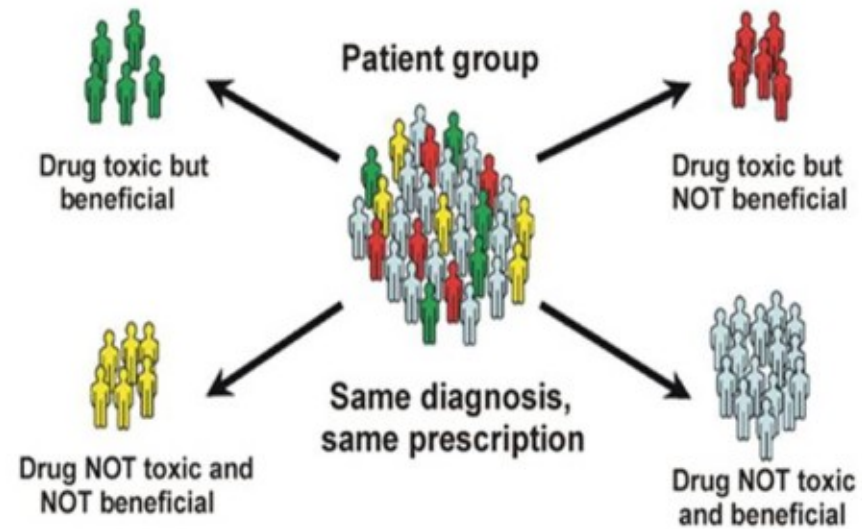


# CHEMOTHERAPY FOR CANCER: SPECIFIC





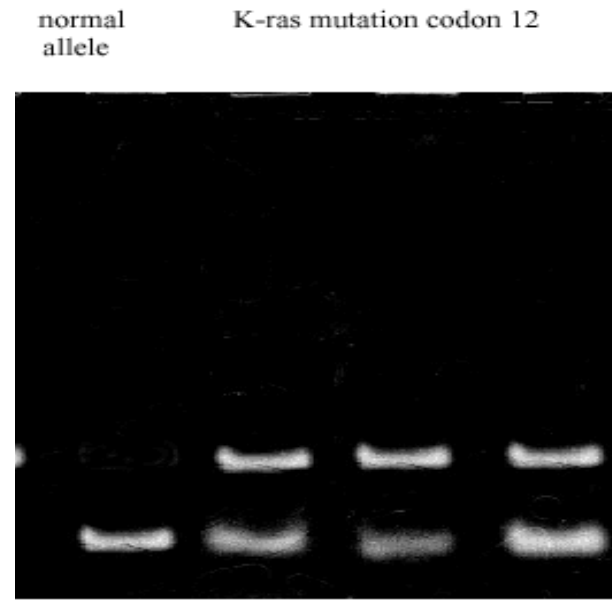
# PHARMACOGENOMICS



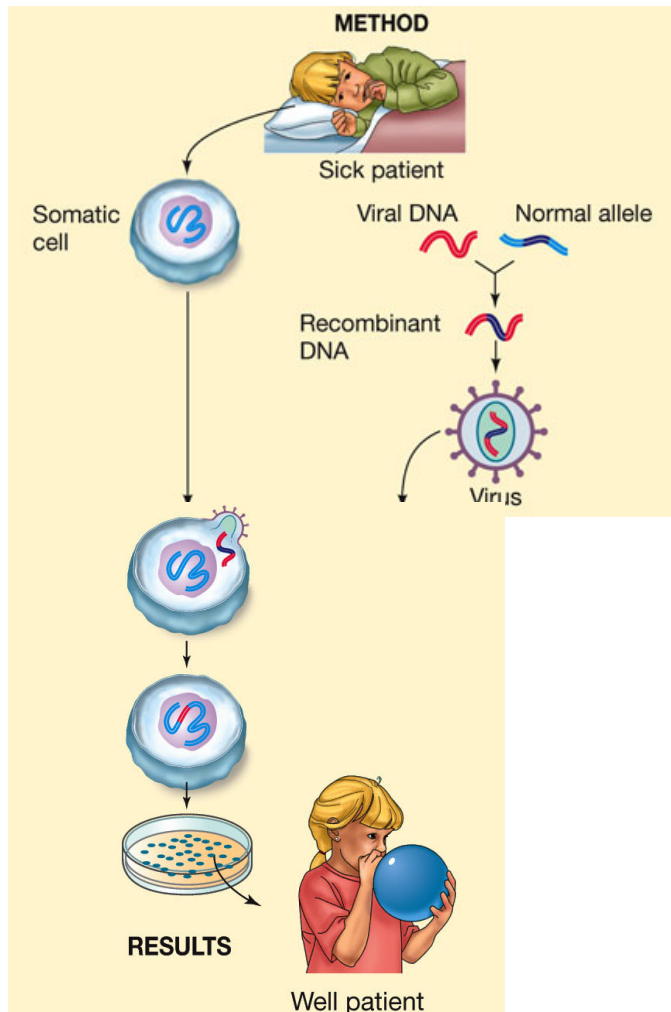
*Identify patient groups by SNP*

# PHARMACOGENOMICS: CANCER

- *KRAS* DNA mutation makes protein less susceptible to treatment with cetuximab
- Genetic test on tumor tissue to choose treatment



# GENE THERAPY FOR IMMUNODEFICIENCY



1990

# **GENETIC MEDICINE**

- A. Genetic diseases
- B. Genetic testing
- C. Genetics and cancer
- D. Genome and treatment