



# Medical Genetics

## LECTURE 4

### Atypical Patterns of Inheritance



# Lecture Objectives

By the end of this lecture, students should be able to appreciate the possibility of atypical patterns of inheritance with special emphasis on:

1. **Codominant traits**
2. **Pseudodominant inheritance**
3. **The mitochondrial inheritance**
4. **Anticipation**
5. **Pleiotropy**
6. **Variable expressivity**
7. **Heterogeneity**
8. **New mutation**
9. **Complex trait: multifactorial/Polygenic**



# Inheritance of Codominant Alleles



# Codominance

*Codominance*: two allelic traits that are both expressed in the heterozygous state.

Example: Blood group AB: the A and B blood groups are ***codominant***.

# Possible genotypes, phenotypes & gametes formed from the four alleles: $A_1$ , $A_2$ , B, & O at the ABO locus

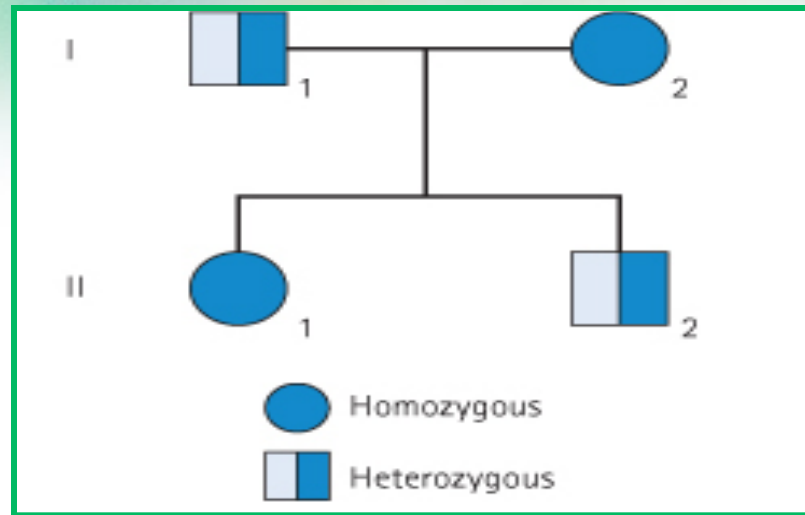
Genotype	Phenotype	Gamete
$A_1A_1$	$A_1$	$A_1$
$A_2A_2$	$A_2$	$A_2$
BB	B	B
OO	O	O
$A_1A_2$	$A_1$	$A_1$ or $A_2$
$A_1B$	$A_1B$	$A_1$ or B
$A_1O$	$A_1$	$A_1$ or O
$A_2B$	$A_2B$	$A_2$ or B
$A_2O$	$A_2$	$A_2$ or O
BO	B	B or O



# PSEUDODOMINANT INHERITANCE

C558  
C556  
C596

# Pedigree: Pseudodominant inheritance



- A woman **homozygous for an autosomal recessive** disorder whose husband is **heterozygous** for the same disorder.
- Their children have a **1 in 2 (50%)** chance of being affected (homozygous ) i.e. **pseudodominant**



# Atypical inheritance of single-gene disorders







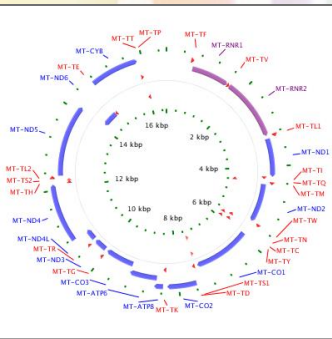
# What are the situations in which the inheritance of single-gene disorders diverges from typical mendelian patterns?

- ✓ Maternal inheritance of mitochondrial mutations
- ✓ Anticipation
- ✓ Atypical presentation for Autosomal Dominant defects:
  - Pleiotropy
  - Variable expressivity
  - Reduced penetrance
  - New mutation
- Unusual inheritance patterns due to Genomic Imprinting
- Mosaicism:
  - Somatic mosaicism
  - Germline mosaicism



# MITOCHONDRIAL INHERITANCE

# Mitochondrial DNA (mtDNA)



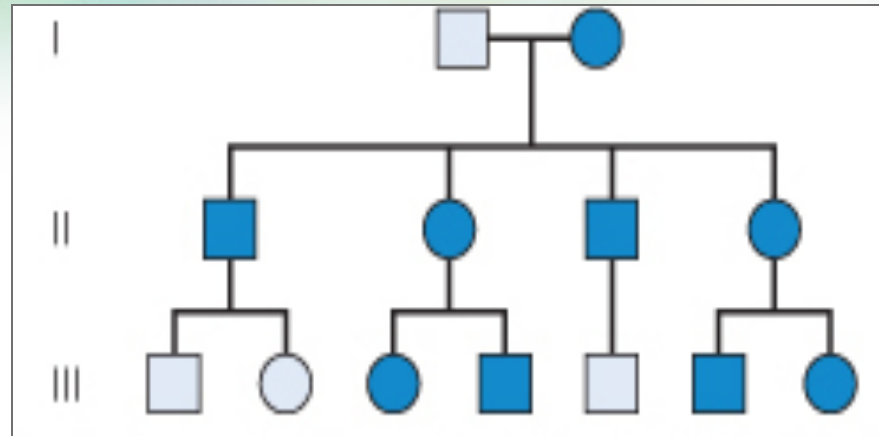
- Each cell contains thousands of copies of mitochondrial DNA with more being found in cells having high energy requirement (e.g. brain & muscle)
- Mitochondria (& their DNA) are **inherited from the mother** (through ova)
- mtDNA is a **small circular double-stranded** molecule containing **37 genes** (coding for rRNA, tRNA, and some of the proteins of the mitochondrial electron transport chain)



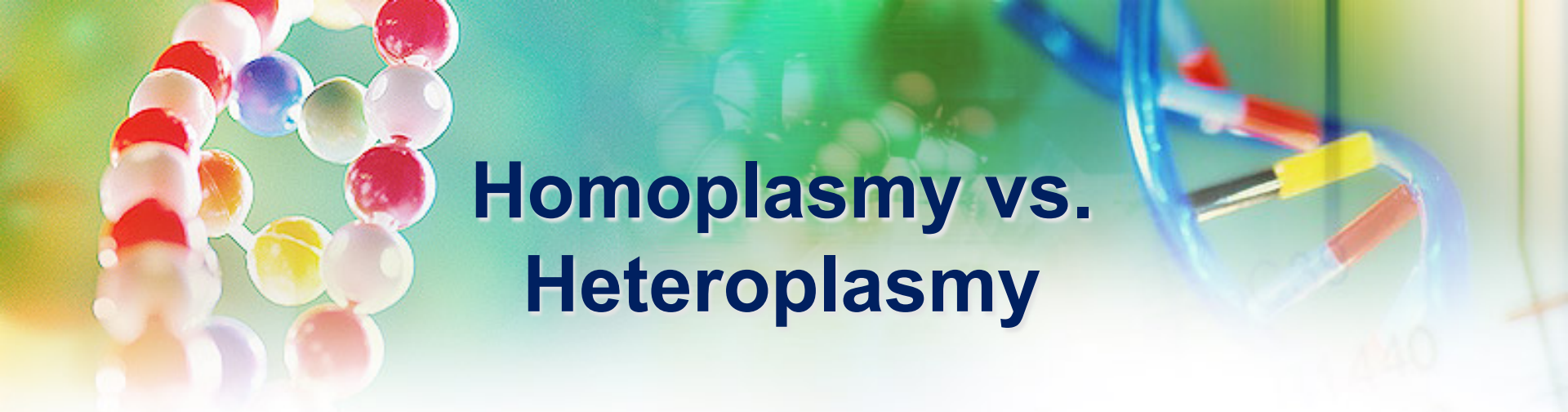
# Mitochondrial Disorders

- The defective gene is present on the mitochondrial DNA
- Affect generally energy metabolism
- Affect more those tissues which require constant supply of energy e.g *muscles*
- Show maternal inheritance:
  - Affected **mother** transmits the disorder **equally to all** her children
  - Affected **father does not** transmit the disease to his children

# Mitochondrial Inheritance



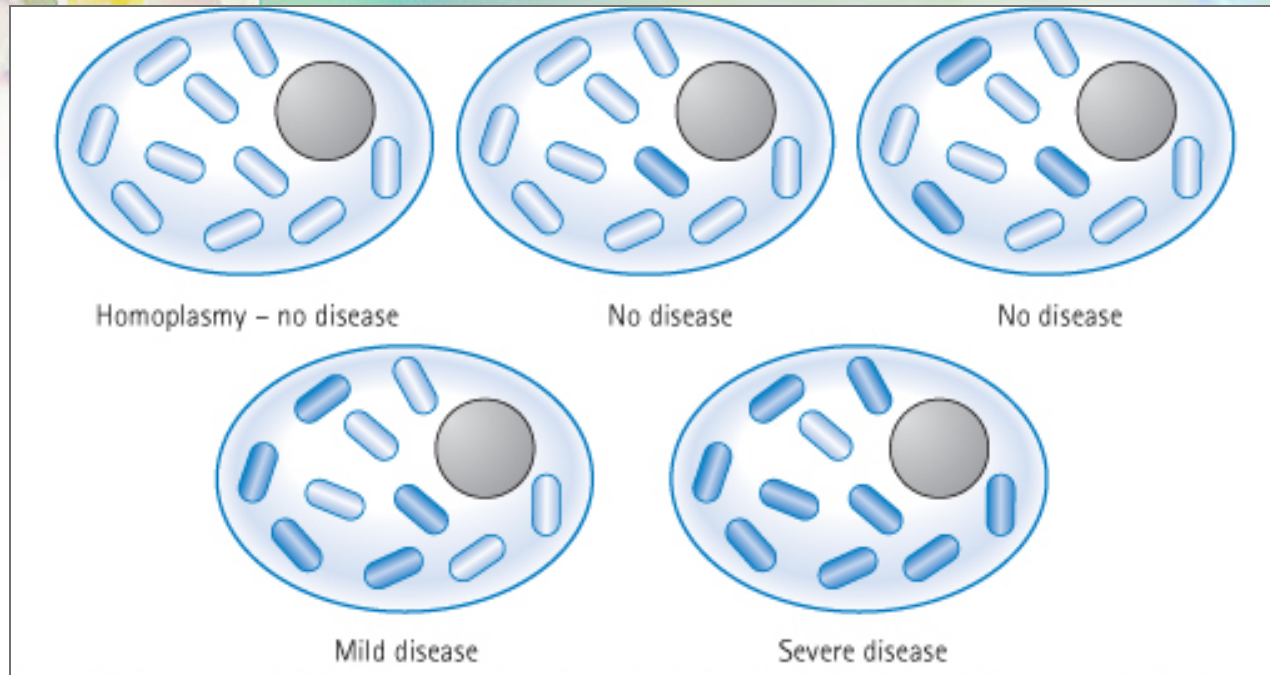
**Males cannot transmit the disease as the cytoplasm is inherited only from the mother, and mitochondria are present in the cytoplasm.**



# Homoplasmy vs. Heteroplasmy

- **Homoplasmy** = in most persons, the **mtDNA** from different mitochondria is **identical**.
- **Heteroplasmy** = the presence of **two populations of mtDNA** in a cell; the normal mtDNA & the mutant mtDNA.
- The proportion of mutant mtDNA varies between cells & tissues → a range of phenotypic severity in mitochondrial inheritance.

# The progressive effect of **Heteroplasmy** on the clinical severity of mitochondrial genetic disorders



- **Low proportions of mutant mitochondria are not associated with disease**
- **As the proportion increases, the disease will be manifested**



# Example of Mitochondrial Disorders

## Lebers hereditary optic neuropathy (LHON)

Rapid Optic nerve death → blindness in young adult life





# ANTICIPATION

C596

R1357

C451

R309

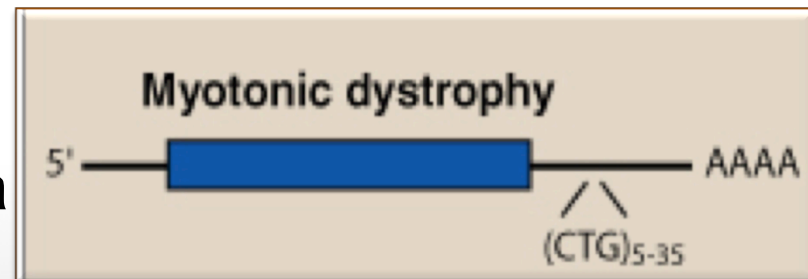


# Anticipation

- A pattern of inheritance in which individuals in the most recent generations of a pedigree develop a disease **at an earlier age or with greater severity** than do those in earlier generation.
- The reason might be the gradual expansion of trinucleotide repeat polymorphisms within or near a coding gene
- Examples of diseases showing anticipation:
  - Huntington disease
  - Myotonic dystrophy

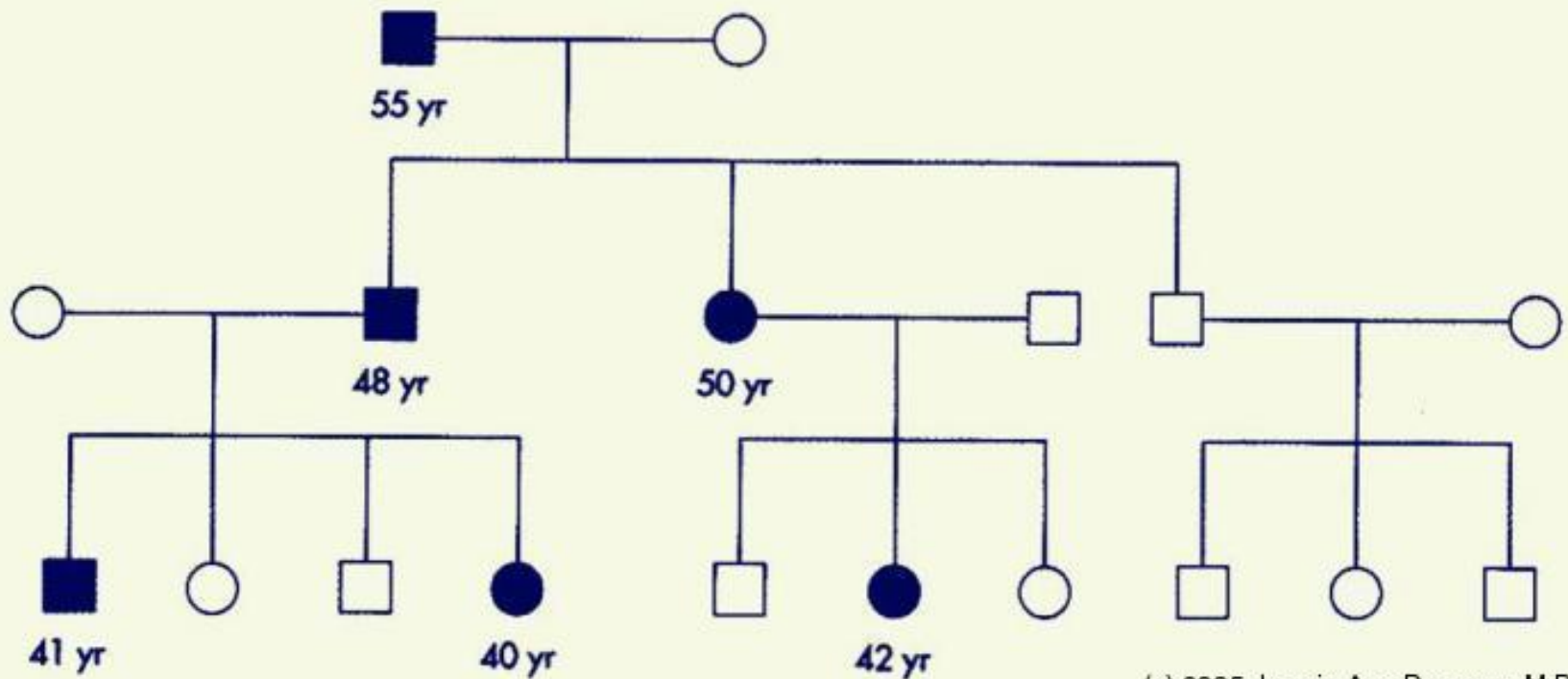
# Myotonic Dystrophy

- Autosomal dominant disease
- Relatively common
- The affected gene is on chromosome 19
- The mutation is triplet repeat (CTG) expansion in the 3' untranslated region of the myotonic dystrophy gene
- Clinical manifestations:
  - **Myotonia (Muscular loss & weakness)**
  - **Cataracts**
  - **Testicular atrophy**
  - **Heart disease: arrhythmia**
  - **Dementia**
  - **Baldness**



# Myotonic Dystrophy, CONTD.

Myotonic Dystrophy pedigree showing Anticipation



# Myotonic Dystrophy, CONTD.



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Newborn baby with severe hypotonia requiring ventilation as a result of having inherited myotonic dystrophy from his mother



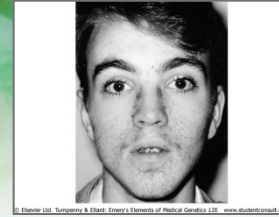
# Atypical presentation for Autosomal Dominant defects





***Pleiotropy, reduced penetrance*** and ***variable expressivity*** of a mutant allele need to be taken into account when providing **genetic counseling** to individuals at risk for autosomal dominant inherited disorders.

# Pleiotropy



It is common for autosomal dominant disorders to manifest in ***different systems*** of the body ***in a variety of ways***.

**Pleiotropy:-** a single gene that may give rise to two or more apparently unrelated effects.

Example: In **tuberous sclerosis**: affected individuals can present with either

- learning difficulties,
- epilepsy,
- a facial rash,
- **or**, all features





# Variable expressivity

The clinical features in autosomal dominant disorders can show striking variation from person to person, even in the same family.

Example: In ***autosomal dominant polycystic kidney disease***:

some affected individuals develop ***renal failure*** in early adulthood

others have just a ***few renal cysts*** that do not significantly affect renal function



# Reduced penetrance

- In some individuals **heterozygous** for gene mutations giving rise to certain **autosomal dominant** disorders there may be **no abnormal clinical features**, representing so-called ***reduced penetrance*** or '**skipping a generation**'
- Reduced penetrance might be due to:
  - **modifying effects of other genes**
  - **interaction of the gene with environmental factors**



# New mutations

- In autosomal dominant disorders an affected person will **usually** have an affected parent.
- However, this is **not always** the case and it is **not unusual** for a trait to appear in an individual when there is no family history of the disorder.
- The sudden unexpected appearance of a condition arising as a result of a mistake occurring in the transmission of a gene is called a ***new mutation***.

# Achondroplasia



- A form of short-limbed dwarfism, in which the parents **usually** have normal stature
- **Diagnosis/testing:**
  - **Characteristic clinical and radiographic finding**
  - **Molecular genetic tests: mutation in the *FGFR3* gene on chromosome 4p16.3 (coding for fibroblast growth factor receptor 3)**
- The offspring of persons with achondroplasia had a **50%** chance of having achondroplasia
- What other possible explanations for the 'sudden' appearance of this disorder?
  - **non-penetrance:** One of the parents might be heterozygous for the mutant allele but so mildly affected that it has not previously been detected
  - **Variable expressivity**
  - the family relationships not being as stated, e.g. **non-paternity**



# MULTIFACTORIAL/ POLYGENIC DISORDERS



# Complex Traits

- Complex traits are conditions which are likely to be due to the interaction of more than one gene.
- The effects may be additive, one may be rate-limiting over the action of another, or one may enhance or multiply the effect of another.
- **e.g. *Digenic inheritance***: where a disorder has been shown to be due to the additive effects of **heterozygous mutations at two different gene loci**
- In man one form of **retinitis pigmentosa**, a disorder of progressive visual impairment, is caused by **double heterozygosity** for mutations in **two unlinked genes**, which both encode proteins present in photoreceptors. Individuals with only one of these mutations are not affected.

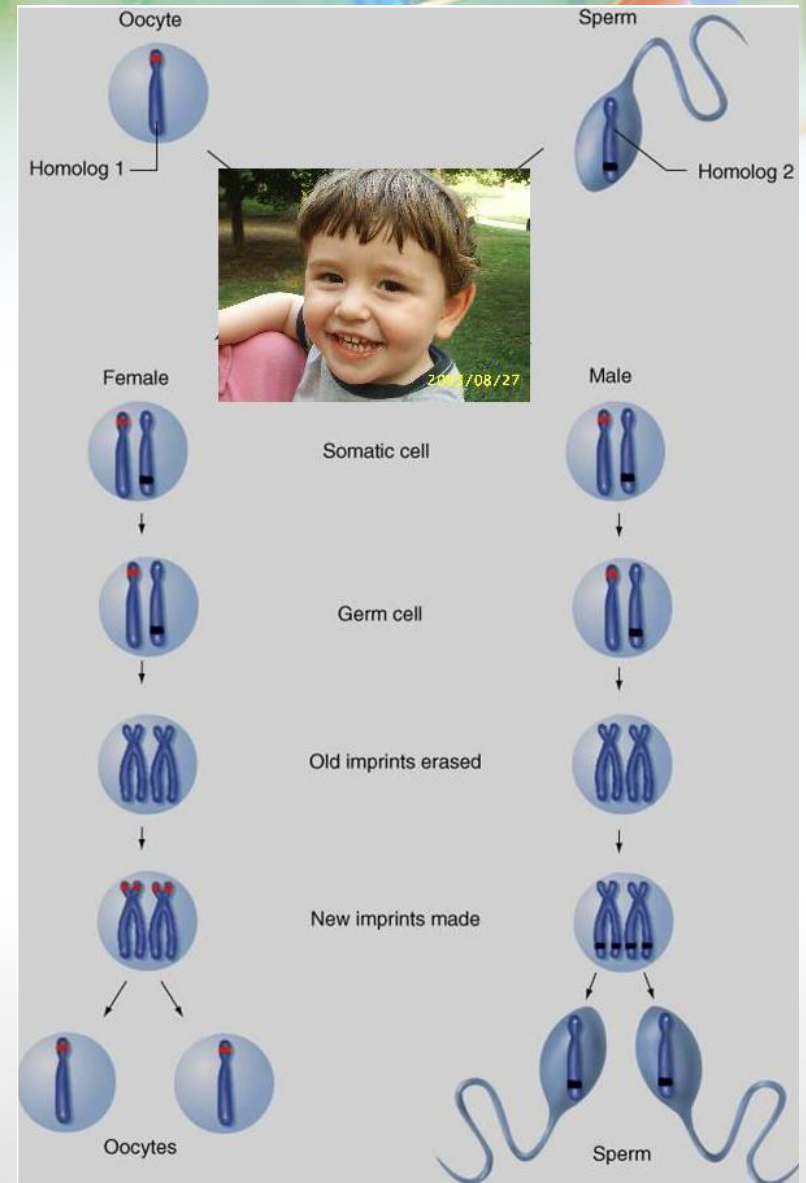
# Multifactorial/Polygenic Disorders

- Human characteristics such as height, skin color and intelligence could be determined by the interaction of **many genes**, each exerting a small additive effect.
- This model of **quantitative inheritance** can explain the pattern of inheritance for many relatively common conditions including
  - **congenital malformations such as cleft lip and palate**
  - **late-onset conditions such as**
    - Hypertension
    - Diabetes mellitus
    - Alzheimer disease
- The prevailing view is that **genes at several loci** interact to generate a **susceptibility** to the effects of **adverse environmental** trigger factors.

# Genomic Imprinting

## *An example of Non-Mendelian Inheritance*

- Certain chromosomes retain a memory or “imprint” of parental origin that influences whether genes are expressed or not during gametogenesis







## Take home Message:

- An accurate determination of the family pedigree is an important part of the workup of every patient
- Exceptions to Mendelian inheritance do occur in single-gene disorders.
- The inheritance pattern of an individual pedigree may be obscured by a number of other factors that may make the mode of inheritance difficult to interpret
- Some characteristics and many common familial disorders, do not usually follow a simple pattern of Mendelian inheritance.



Thank you 😊