



Genetic Lab Insights: Methodologies, Prevention and Diagnostic Advances

Email: paulo.gaspar@insa.min-saude.pt

Outline

1. GENETICS:
 1. PREVENTION
 2. DIAGNOSTIC
 3. PERSONALIZED MEDICINE
2. ANIMAL MODELS IN GENETICS
3. RESEARCH

Há mais de
6.000
doenças RARAS
conhecidas



80% das
DOENÇAS RARAS
são
GENÉTICAS



70% das
Doenças
Genéticas Raras
surge na INFÂNCIA



Há **300 milhões**
de pessoas
que vivem com
uma Doença RARA
em todo o MUNDO



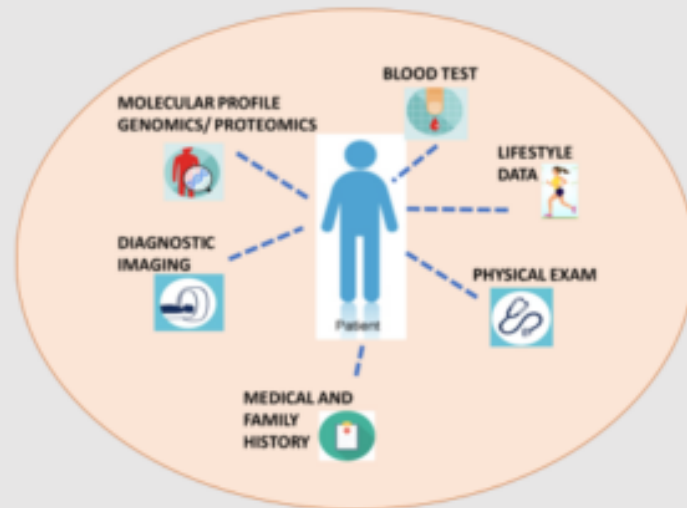
Same laboratory: Different approaches

PREVENTION



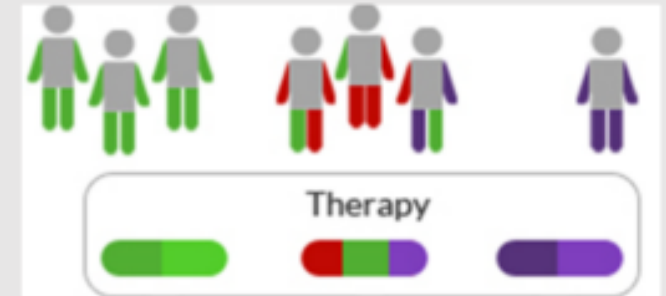
Early detection of patients at risk, Improve preventive measures (individual/collective)

DIAGNOSIS



Accurate disease diagnosis enabling individualized treatment strategy

TREATMENT



Improved outcomes through targeted treatments and reduced side effects

Inclusion Criteria: Wilson and Jungner Foundations

Early Impact Assessment

Conditions must demonstrate early onset with significant health consequences requiring immediate intervention.

Treatment Availability

Effective, timely therapeutic interventions must be accessible and proven to improve patient outcomes.

Screening Reliability

Robust, cost-effective screening methodologies with high sensitivity and specificity are essential.

The condition sought should be an important health problem.

There should be an accepted treatment for patients with recognized disease.

Facilities for diagnosis and treatment should be available.

There should be a recognizable latent or early symptomatic stage.

There should be a suitable test or examination.

The test should be acceptable to the population.

The natural history of the condition, including development from latent to declared disease, should be adequately understood.

There should be an agreed policy on whom to treat as patients.

The cost of case-finding (including diagnosis and treatment of patients diagnosed) should be economically balanced in relation to possible expenditure on medical care as a whole.

Case-finding should be a continuing process and not a “once and for all” project.

Phenylketonuria

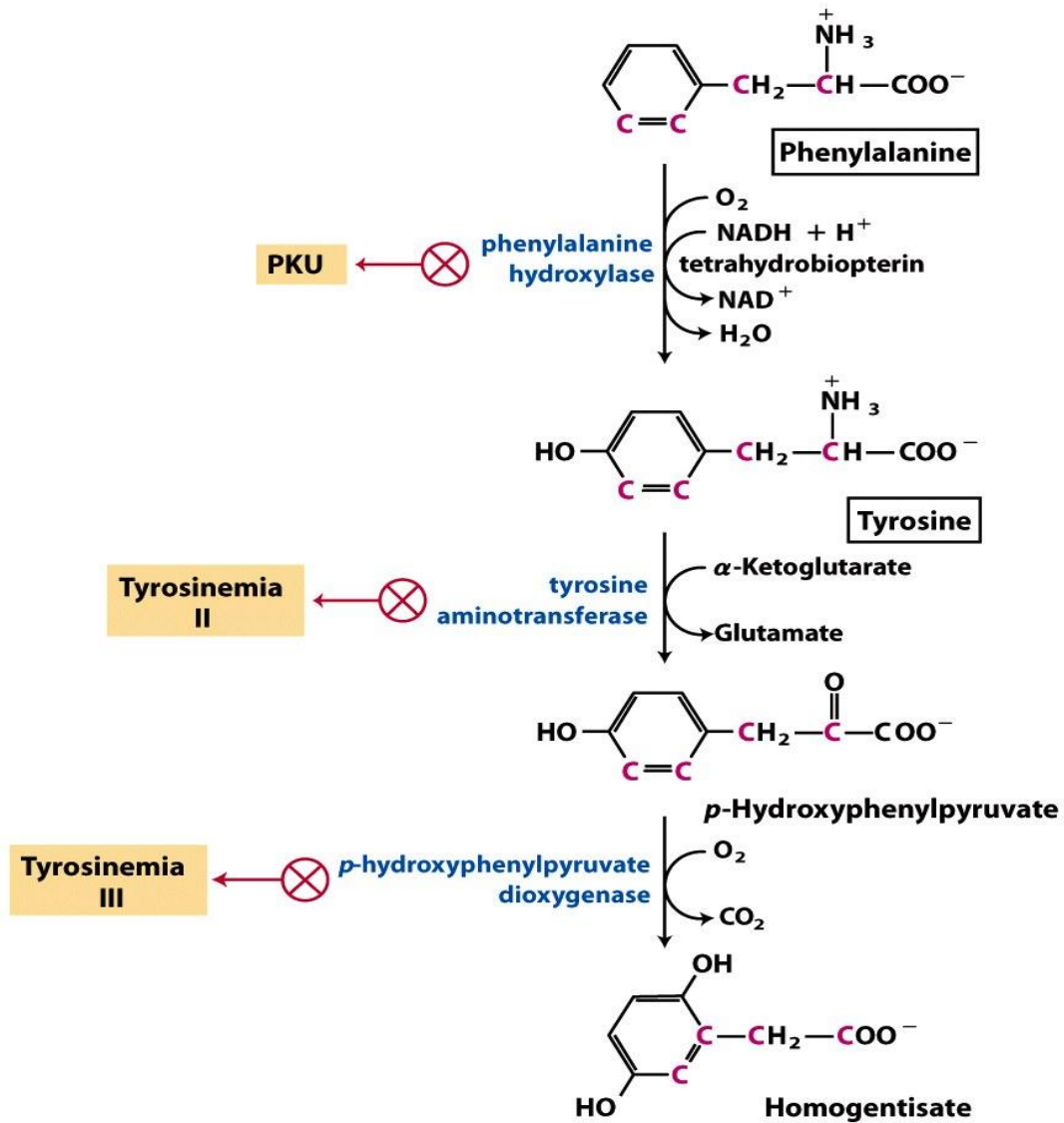


Figure 18-23 part 1

Lehninger Principles of Biochemistry, Fifth Edition

© 2008 W. H. Freeman and Company



Molecular Genetics: From Confirmation to First-Line

Traditional Paradigm

Molecular genetic testing historically served as a confirmatory tool following clinical and biochemical characterization. Identification of pathogenic variants confirmed suspected diagnoses and enabled cascade testing of family members.

Contemporary Approach

Short-read next-generation sequencing technologies enable simultaneous analysis of multiple genes through panels, exomes, or genomes. This approach has transformed molecular genetics from confirmatory to first-line diagnostic testing.

Massive Variation in Gene Selection in NBSeq – pilot studies

4,390

Total Unique Genes

Genes included across at least one of the 27 NBSeq programs analyzed

134-4,299

Gene List Range

Number of genes included per program, with a median of 306 genes

1,85 – 9,43%

Screening positive rate

Results of nine programs with published screening results (68,628) infants,

93%

Low Agreement

Of genes were included by 10 or fewer programs, showing substantial heterogeneity

The analysis revealed striking discordance across NBSeq programs. Most genes had minimal consensus: 4,089 genes (93%) were included by 10 or fewer programs, and 3,793 genes (87%) appeared on five or fewer lists. This heterogeneity reflects differences in international disease prevalence, healthcare system capacity, treatment availability, and individual program objectives.

Gene Panel Design Considerations

Variant Interpretation Challenges

60+

LSDs Identified

1000+

Gene Variants

40%

Uncertain Significance

Variant interpretation remains the biggest challenge as more genotypes are generated. Significant advances through experience sharing, population databases, and functional studies are improving LSD gene-specific interpretation guidance.

Gene Panel Design Considerations – Pilot studies



Gene Selection

Panels should include only genes with validated disease associations for lysosomal storage disorders, guided by ClinGen clinical validity assessments and expert consensus.



Variant Detection

Comprehensive analysis must address technical challenges including pseudogene interference (GBA1, NEU1, IDS), large deletions, and inversions. Supplemental testing often required.



Allelic Spectrum

Understanding common pathogenic variants (deletions for GALC, HEXB, CLN3, CTNS; inversions for IDS) ensures appropriate assay design and interpretation frameworks.

NBSeq Challenges

1. Technical Feasibility

- Response Time
- Result Confirmation
- Result Interpretation

2. Economic Considerations

- Sequencing Price
- Specialized Human Resources
- Computing Resources
- Confirmatory Tests

3. Medical Considerations

- Gene Selection Criteria
- Interpretation of Results
- How to Report

4. Legal, Ethical and Psychological Implications

- Need for Informed Consent
- Child welfare
- Benefits for siblings and parents
- Late-onset diseases

Same laboratory: Different approaches

PREVENTION



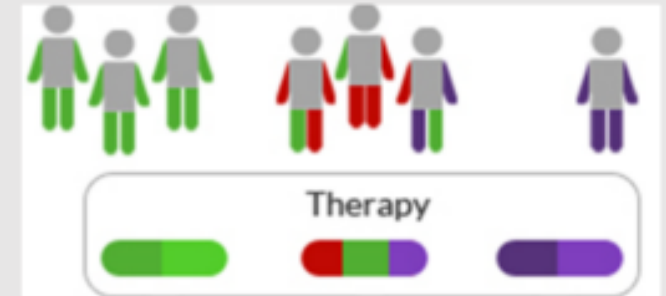
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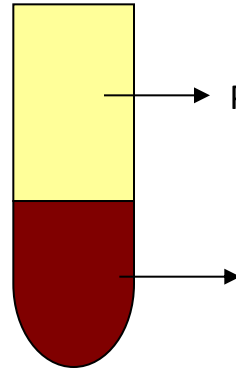
TREATMENT



Improved outcomes through targeted treatments and reduced side effects



Centrifugação



Plasma

Centrifugação

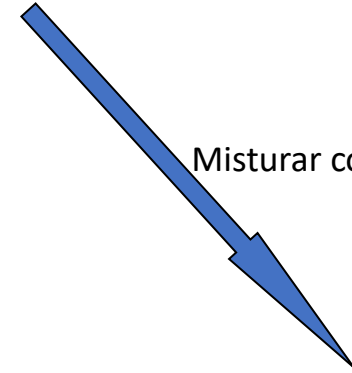
Plasma



Aliquotas (-20° C)

sedimento com
Leucócitos e
Eritrócitos

Misturar com Solução de Lise



Armazenar -20° C



DNA



Understanding Inheritance: The Four Classic Patterns

Autosomal Dominant

One mutated gene copy causes disease. Affected individuals have 50% chance of passing condition to offspring.

Example: Huntington's disease

Autosomal Recessive

Two mutated copies needed for disease expression. Carriers remain unaffected but can transmit mutations.

Example: Cystic Fibrosis

X-linked Inheritance

Mutations on X chromosome show distinct patterns. Males more severely affected due to single X chromosome.

Example: Haemophilia A

Mitochondrial Inheritance

Passed exclusively from mother to all children. Affects cellular energy production in both sexes.

Example: Leber's optic neuropathy

Next Generation Sequencing



Painéis Dirigidos

Análise focada em genes específicos associados a fenótipos clínicos definidos



Exoma

Sequenciação de todas as regiões codificantes do genoma humano



Genoma Completo

Análise abrangente incluindo regiões não codificantes e estruturais

Bioinformatic tools

<https://www.ensembl.org/index.html/>

[LOVD - An Open Source DNA variation database system](#)

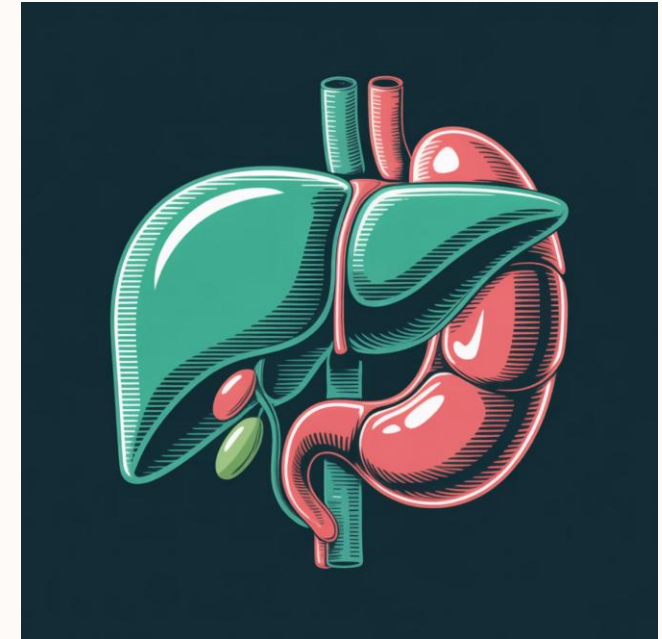
<https://varchat.engenome.com/>

<https://franklin.genoox.com/clinical-db/home/>

<http://v1.marrvel.org/search/gene/grn/>

What is Gaucher Disease?

- A rare inherited lysosomal storage disorder caused by mutations in the *GBA1* gene
- Deficiency of **glucocerebrosidase (GCCase)** enzyme prevents breakdown of fatty substances
- Glucosylceramide\Glucosylsphingosine accumulates in organs: spleen, liver, bone marrow, causing progressive damage



1

**Type 1 (Non-neuronopathic)
neuronopathic)**

Most common form

Affects spleen, liver, bones

No brain involvement

Variable severity and age of onset

2

**Type 2 (Acute neuronopathic)
neuronopathic)**

Severe, early onset in infancy

Rapid neurological decline

Usually fatal by age 4

Most aggressive form

3

**Type 3 (Chronic neuronopathic)
neuronopathic)**

Milder neurological symptoms

Onset in childhood

Progressive brain involvement

Intermediate severity



Fabry Disease: A Rare Genetic Disorder

X-linked Inheritance

Lysosomal storage disorder caused by α -galactosidase A deficiency affecting predominantly males

Cellular Accumulation

Progressive accumulation of glycosphingolipids, primarily globotriaosylceramide (Gb3) in lysosomes

Multi-organ Impact

Systemic involvement affecting kidneys, heart, nervous system, skin, and gastrointestinal tract

Clinical Variability

Manifestations vary between classic and late-onset forms, with gender differences

Diagnostic Markers and Tools

01

Clinical Suspicion

Recognition of characteristic symptoms, family history, and multi-organ involvement triggers diagnostic workup.

03

Genetic Testing

Confirmatory DNA sequencing identifying specific **GBA** or **GLA** gene mutations, essential for definitive diagnosis and family screening.

02

Enzyme Activity Assays

Gaucher: Blood test measuring glucocerebrosidase activity in leucocytes or dried blood spots.

Fabry: Alpha-galactosidase A activity assay—reliable in males, less so in female carriers.

04

Biomarker Monitoring

Elevated **glucosylsphingosine** (lyso-Gb1) in Gaucher disease and **globotriaosylsphingosine** (lyso-Gb3) in Fabry disease aid diagnosis and treatment monitoring.

Diagnostic Utility Across Fabry Phenotypes



Classic Males

Markedly elevated Lyso-Gb3 correlates directly with severe multi-organ disease manifestations and early symptom onset



Some Late-Onset Cardiac forms

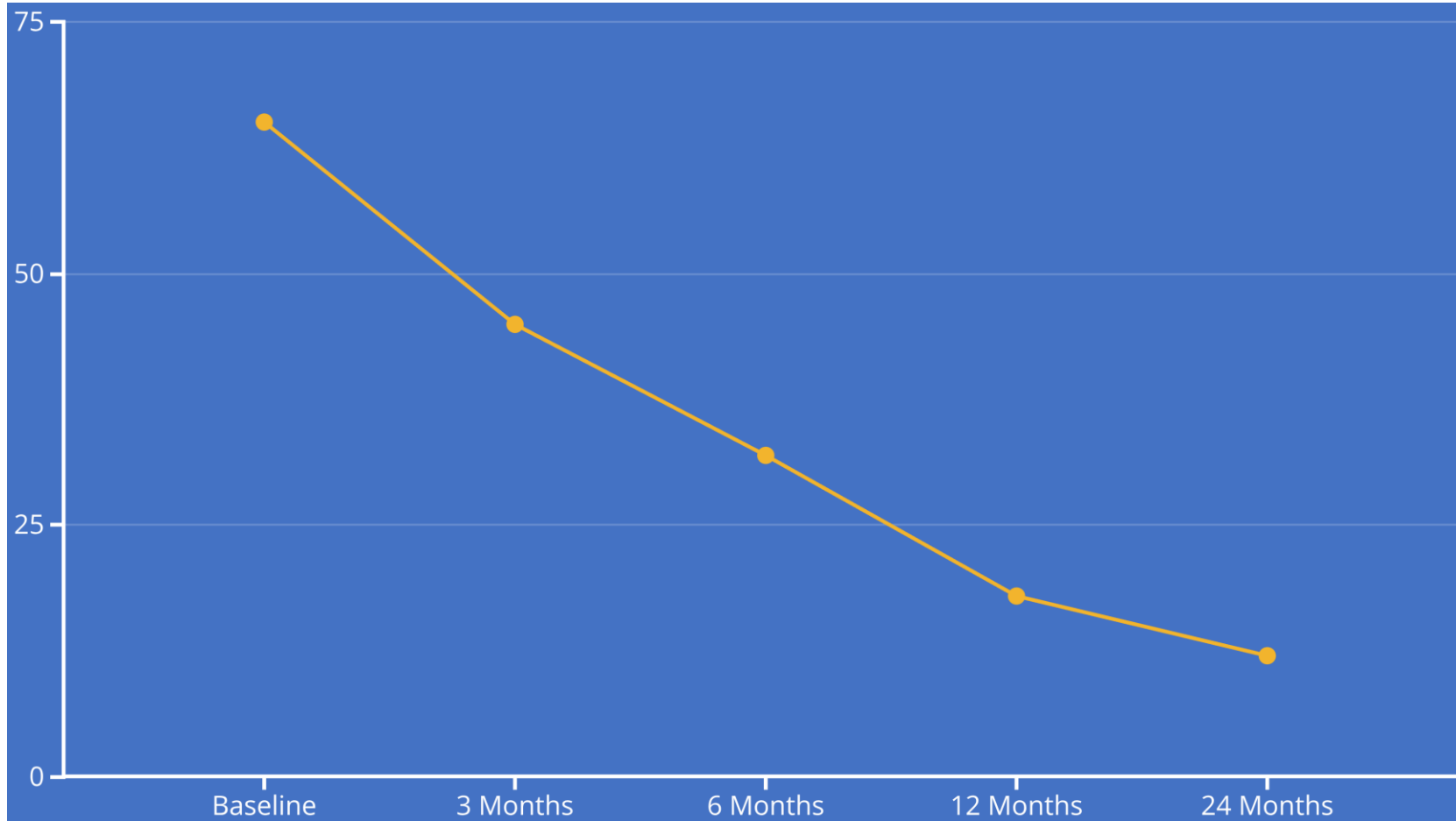
Intermediate Lyso-Gb3 levels effectively distinguish patients from healthy controls,



Female Heterozygotes

Variable Lyso-Gb3 levels reflect the broad phenotypic spectrum, serving as valuable adjunct to genetic testing

Treatment Evolution: LysoGb3 Level Changes



Typical response pattern showing progressive reduction in LysoGb3 levels following enzyme replacement therapy initiation.

Hunter disease: IDS Gene Mutation

01

Mucopolysaccharidosis, type II

Hunter disease, scientifically known as Mucopolysaccharidosis type II (MPS II), is a rare genetic disorder that predominantly affects males. This condition arises from a deficiency of the enzyme iduronate 2-sulfatase (IDS), .

02

X-Linked Recessive Inheritance

Hunter disease follows an X-linked recessive pattern, meaning the defective gene is located on the X chromosome.

03

IDS Gene Mutations

Mutations in the IDS gene significantly reduce or completely eliminate the production of functional IDS enzyme.

04

Cellular Accumulation

Without adequate IDS enzyme, glycosaminoglycans build up inside lysosomes, progressively damaging tissues and organs.

05

Inheritance Risk

Carrier mothers have a 50% chance of passing the mutation to each child—sons become affected whilst daughters become carriers.

Lyssomal Storage disorders - The Challenge of Early Detection

Patients with LSDs are primarily identified after presenting with symptoms following a diagnostic odyssey

Earlier diagnosis through family history or newborn screening enables access to beneficial treatments

Treatment Landscape

Enzyme Replacement

Available for multiple disorders including Gaucher, Fabry, and MPS types



Substrate Reduction

Reduces accumulation of harmful substances in affected cells



Transplantation

Bone marrow or organ transplant for severe cases when initiated early



Gene Therapy

FDA-approved for metachromatic leukodystrophy, trials ongoing for others



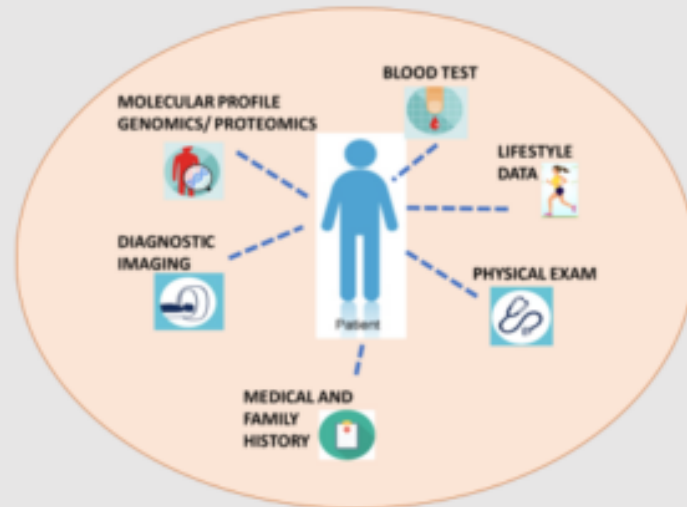
Same laboratory: Different approaches

PREVENTION



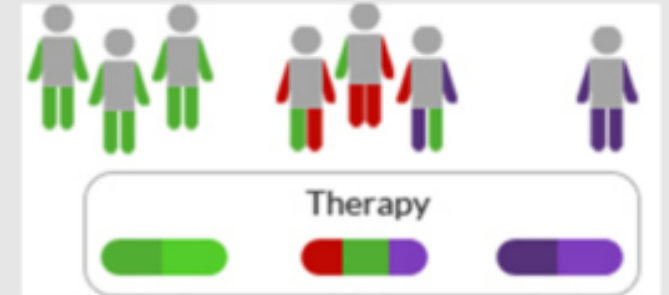
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Personalized medicine



Personalised medicine



Single treatment (one-fits-all)



DIAGNOSTIC



Genetic analysis



Biomarker analysis



Life style analysis

Personalised treatment



PM and Oncology

Cancer:

5-fluorouracil (5-FU), capecitabine, and tegafur - colorectal, breast, head and neck, pancreatic, and gastric cancers.

Treatment

Fluoropyrimidines - Although crucial for the treatment, patients may experience severe toxicity.

The dihydropyrimidine dehydrogenase (DPD) enzyme is the first and rate-limiting enzyme in the catabolic pathway. If DPD activity is lower, may increase a person's risk of toxicity.

<https://www.pharmvar.org/>

PM and Oncology



The Pharmacogene Variation (PharmVar) Consortium is a central repository for pharmacogene (PGx) variation that focuses on haplotype structure and allelic variation.

The information in this resource facilitates basic and clinical research as well as the interpretation of pharmacogenetic test results to guide precision medicine.

i PharmVar API Services are now available for third party use. For more information, visit the [API Service Documentation Page](#)

[What's New](#) **1**

Follow us on [Twitter](#)

PharmVar Publications

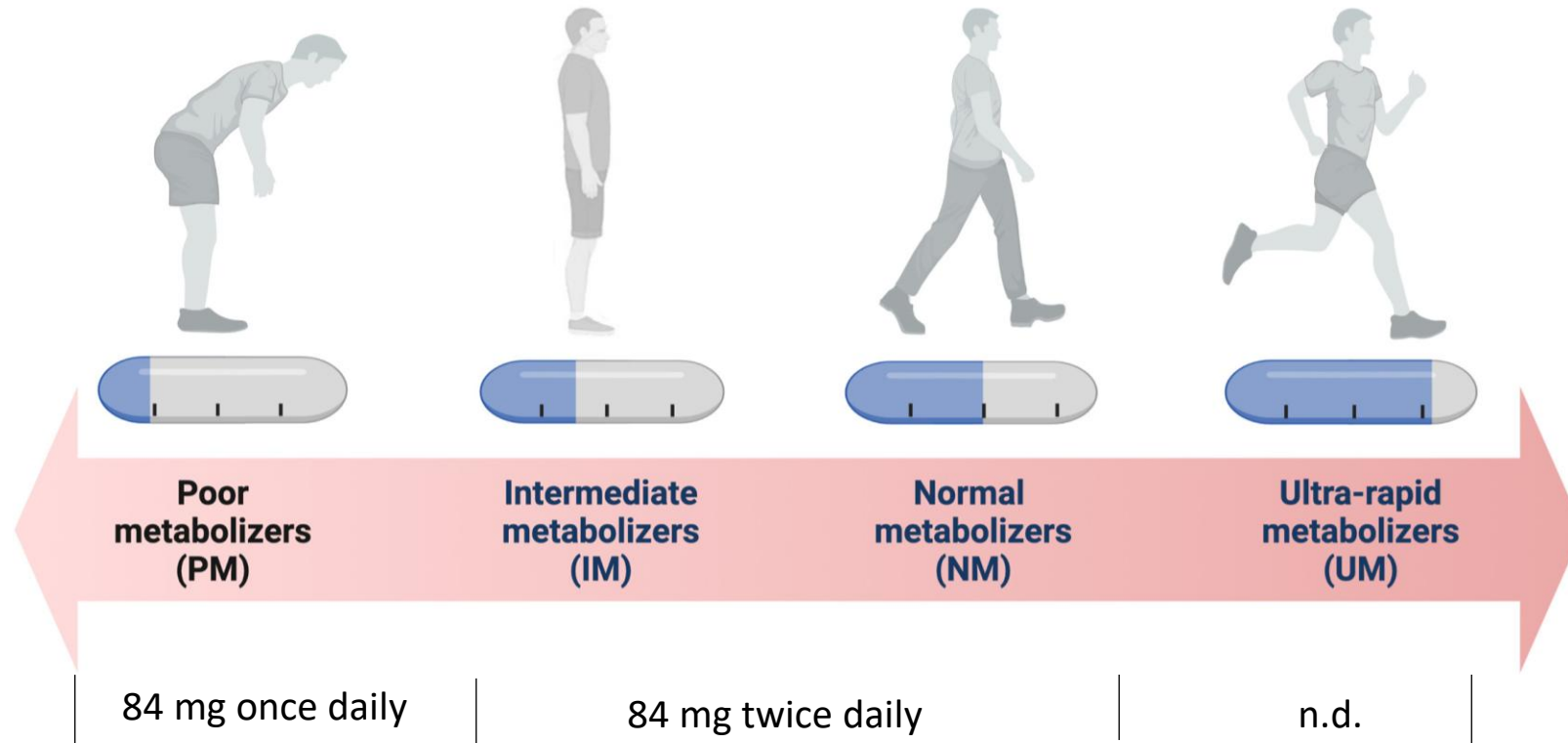
Articles published by PharmVar are available on the [resources](#) page.

PM and Lysosomal Storage disorders

Gaucher

- Gaucher Deficiency in *GBA* gene leading to a deficiency in B-glucosidase.
- **Main treatment Options** - Enzyme replacement therapy (ERT) and Substrate reducing therapy (SRT)
- Cerdelga(Eliglustat) – belongs to SRT class, long-term treatment of adult patients with Gaucher disease type 1
- Eliglustat is metabolized by Cytochrome P450 2D6 (CYP2D6), expressed essentially in the liver.
- Potential toxicity might be observed in patients concurrently treated with known CYP2D6 inhibitors or which are power metabolizers.
- <https://www.pharmvar.org/gene/CYP2D6>

PM and Lysosomal Storage disorders Gaucher



PM and Lysosomal Storage disorders

Fabry

← → ↻ <https://www.galafoldamenabilitytable.com> ☆

Search *GLA* Mutations

You can use this search tool to find out whether a specific *GLA* mutation has been classified as amenable to treatment with GALAFOLD[®] according to the approved SmPC.

GALAFOLD[®] is indicated for long-term treatment of adults and adolescents aged 12 years and older with a confirmed diagnosis of Fabry disease (α -galactosidase A deficiency) and who have an amenable mutation.

Female patients have two *GLA* genes on two different chromosomes. The patient is considered amenable if the *GLA* mutations on either chromosome are amenable. Please utilize the appropriate search function to determine if the mutation or mutations on each chromosome are amenable.

PATIENT HAS A SINGLE MUTATION

PATIENT HAS MULTIPLE MUTATIONS*

Enter either a nucleotide or amino acid change.

For Nucleotide Change
Please use format c.#A>B or c.A#B for nucleotide sequence changes, where 'c.' is optional; # indicates a number; A and B are letters. Examples: c.8T>C or c.T8C

For Amino Acid Change
Please use format p.A#B for protein sequence changes, where 'p.' is optional; # indicates a number; A and B are letters. Example: p.L3P

RESULT: NOT AMENABLE
p.R301X is not amenable

See the SmPC for full prescribing information

Last Updated: 27 August 2021

Animal Models for Studying Genetic Disorders: Unlocking Human Disease Mysteries

Exploring how model organisms help us understand, diagnose, and treat inherited human diseases





Shared Genetic Heritage

Many animals share a remarkable percentage of key genes and biological pathways with humans, creating natural parallels for study.



Translational Power

This genetic conservation enables researchers to extrapolate findings from animal studies directly to human physiology and disease mechanisms.



Accelerated Discovery

Understanding disease in animals fast-tracks therapeutic development for human patients with genetic disorders.

Small but Mighty: The Usual Suspects



Mice (*Mus musculus*)

Share 95% genome similarity with humans, high reproduction rates, and low maintenance costs make mice the workhorse of genetic research.



Fruit Flies (*Drosophila*)

Pioneered early gene mapping techniques and mutant screening approaches that revolutionized genetics.



Roundworms (*C. elegans*)

Transparent bodies reveal nervous system development in real-time, ideal for aging and neural studies.



Zebrafish (*Danio rerio*)

Transparent embryos enable direct observation of organ development and rapid gene function identification.

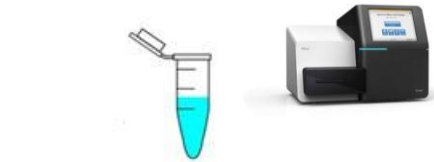
A MODERN LAB



- Classical biochemical and molecular analyses negative or unclear

- No sample for biochemical analysis

- Mutations in several genes could explain the phenotype



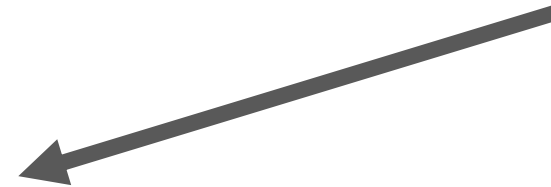
NGS-TARGETED GENES PANELS
Clinical Exome
Whole Exome Sequencing
RNA sequencing

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ACTTTCGCGCTTGACTC
TCGCGTTG
GAGTTGA
TTTCGCGCTT
TTTCGAGCTTGACT
TTTCGAGT
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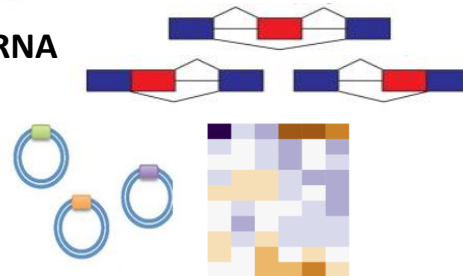
Data Analysis Pipeline

in silico prediction of mutation effect on gene function

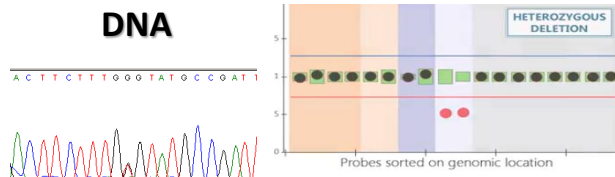
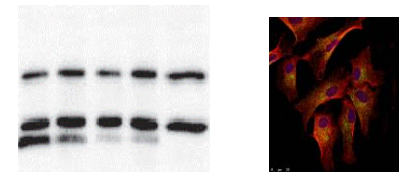


Experimental Studies

RNA



Protein/Biomarkers



Do you want to know your future?



Egypt Divided / Pot's Big Moment / Best of 2012 Movies, Music, Books & More

TIME

Want to Know My Future?

A baby is sitting on a table, surrounded by various medical conditions labeled in boxes with arrows pointing to the baby. The conditions include: Alzheimer's, Diabetes, Cancer, Tay-Sachs disease, Huntington's disease, Epilepsy, Parkinson's, Glaucoma, Asthma, Breast cancer, Colon cancer, Crohn's disease, Burkitt's lymphoma, Malignant melanoma, Prostate cancer, Obesity, Hemochromatosis, and Cystic fibrosis.

New genetic tests can point to risks — but not always a cure

BY BONNIE ROCHMAN