Cytogenetics & Integrated laboratory of molecular cytogenetics, Brno



What are we going to talk about?

- 1. What is cytogenetics
- 2. History
- 3. Chromosome morphology and aberrations
- 4. Molecular cytogenetics and its techniques
- 5. Our laboratory and work

1. What is cytogenetics?

Cytogenetics is a branch of genetics focusing on the study of chromosome changes (number, morphology, numerical and structural abnormalities, segregation in normal and pathological conditions) and their correlation with phenotype.

2. Just a little history...

- 1866 Gregor Johan Mendel Experiment in Plant Hybridization
- Father of genetics
- Defined the basic principals of heredity (principle of segregation and combination)
- During his life, his work was ignored
- Later, Mendel s work was rediscovered
- 1910 Thomas Hunt Morgan proved that genes are located on chromosomes (using Drosophila)
- 1953 James Watson and Francis Crick determined DNA structure
- 1956 Tjio, Levan Human chromosome number is 46

Development of human cytogenetics

- **____Dark Ages**" the development and improvement of tissue culture techniques
- "Hypotonic Period"
 - hypotonization of cell samples (1951 0,075 m KCl)
 - using phytohaemagglutinin (PHA) stimulation of peripheral blood lymphocytes - 1960
- "Trisomy Period" trisomy of chromosome 21-1959
- The first deletion syndrome "Cri du chat" 1963
- **"Banding Area"** chromosome banding techniques 1968 1970
- "Molecular Area"
 - in situ hybridization technique 1970
 - FISH 1986
 - Comparative genomic hybridization (CGH) 1992
 - Spectral karyotyping (M-FISH, SKY) 1996
 - M banding 2001
 - Array CGH molecular karyotyping

"take home message"

Basic conditions for development of human cytogenetics

- improved techniques of cell cultivation in vitro
- use of hypotonic solution (0.075 M KCl)
- establishing squash techniques
- use of colchicine arrest of mitotic division
- 1% orcein staining

Nomenclature of human chromosomes

- 1960: Denver Conference sort of human chromosomes into groups according to size and shape
- 1963: London Conference chromosomes are sorted into 7

groups A – G

> **1966:** Chicago *Conference* - the description of chromosome

changes

- 1971: Paris Conference the identification and labeling of chromosomes using banding techniques
- An International System for Human Cytogenetic Nomenclature (ISCN 1978)

I S C N. 1995

An International System for Human Cytogenetic Nomenclature (1995)

Editor: Felix Mitelman

Recommendations of the International Standing Committee on Human Cytogenetic Nomenclature



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Editors Lisa G. Shaffer Jean McGowan-Jordan Michael Schmid



KARGER

Fatished in Cytogenetic and Genome Research

What is a chromosome?

- Structures in the nucleus that are composed of the DNA wrapped around a protein
- Humans have 46 chromosomes in their body cells (only 23 in sex cells)
 - There are 22 pairs of homologous chromosomes (chromosomes that contain the same alleles in the same location)
 - Alleles are one type of a gene. There are dominant and recessive alleles.



Two Pairs of Homologous Chromosomes

3. Chromosome morphology

DNA



Chromosome morphology



Chromosome staining

Classical staining

using Giemsa Romanowski solution

gained chromosome aberation detection

<mark>G</mark> – bands

using trypsin, salty solution and Giemsa each chromosome has characteristic stripes congenital chromosomes aberation detection



R – bands

using salty solution of different pH and temperature

reverse to G - bands



Human caryotype



"take home message"

Human somatic cell contains

- 23 pairs or 46 chromosomes
 - 22 autosomic pairs
 - 1 gonozomic pair (XX or XY)

7 groups ordered according to chromosome size and morphology

- A large metacentric chromosomes
- B large submetacentric chromosomes
- C middle size submetacentric chromosomes, X
- D large acrocentric chromosomes
- E small meta- to submetacentric chromosomes
- F the smallest metacentric chromosomes "ribbons"
- G small acrocentric chromosomes, Y

AUTOSOMIC

- 1. Structural
 - Polymorphysmus
 - different lenght of chromosomes in homologous pair
 - no phenotype effect
 - Inversion
 - pericenric including centromere
 - paracentric does not include centromere
 - usually has no phenotype effect
 - Ring chromosomes
 - breaks on both chromatides and their connection
 - mental and physical retardation
 - always newly created
 - sometimes redundant



Deletion

- terminal one break
- intersticial two breaks
- deletion syndromes:
 - Wolf-hirschhorn syndrome; 4p deletion
 - Cri-Du-Chat syndrome; 5p deletion
- microdeletion syndromes:
 - Prader-Willi syndrome; 15q11-12 deletion
 - DiGeorge syndrome; 22q13 deletion
 - Angelman syndrome; 15q11-13 deletion
 - Williams-Beuren syndrome; 7q11.23 deletion
- Insertion
 - inserted part can be in the same or inverted position

Translocation

- reciprocal
 - mutual exchange between two or more nonhomologic chromosomes
 - balanced no phenotype effect
 - genetic risics of unbalanced genom gamets formation

robertsonian

- between two acrocentric chromosomes
- breaks in the area of centromeres and deletion of short arms
- centric fusion of the remaining arms
- balanced normal phenotype
- tandem
 - deletion of part of an acrocentric chromosome
 - fusion of the remaining part with another chromosome





http://drugline.org/medic/term/robertsonian-translocation/

- 2. Numerical
 - Trisomy
 - 21 chromosome trisomy Down syndrome
 - 18 chromosome trisomy Edwards syndrome
 - 13 chromosome trisomy Patau syndrome
 - Triploidy
 - 69,XXX; 69,XXY
 - nonviable
 - mosaic triploidy mental retardation, syndactyly, abnormal genitals, lateral asymetry

GONOSOMIC

Chromosome Y

- structural aberrations very rare
- numerical aberrations
 - 47,XYY supermale syndrom
- Chromosome X (male)
 - Numerical aberration
 - 47,XXY Klinefelter syndrom
- Chromosome X (female)
 - numerical aberrations
 - 45,X Turner syndrom
 - 47,XXX XXX syndrom
- Fragile X fraX

- the most common cause of mental retardation
- nonspecific phenotype

Down syndrome (47,XX or XY,+21)

- 1866 J.L.Down
- IQ 25-50
- small dumpy figur
- round face
- short neck
- mongoloid eyes
- epicanthic fold
- wide nose root and flattened nose
- small mouth, large tongue, small teeth
- single transverze palmar crease
- heart diseases









Edwards syndrome (47,XX or XY,+18)

- growth retardation
- microcephaly
- dolichocephaly elongate head
- cleft palate
- Iow-set malformed ears
- finger holding
- structural heart defect at birth
- survive only few months







Patau syndrome (47,XX or XY,+13)

- hard growth and mental retardation
- microcephaly
- trigonocephaly
- cutis aplasia
- congenital brain defects
- cleft palate
- hexadactily
 - kidney defects







Cri-Du-Chat syndrome (del 5p)

- Iow birth weight, poor growth
- hypotonia
- severe cognitive speech and motor delays
- behavioral problems hyperactivity, agression
- small head and jaw
- wide eyes
- constipation
- abnormal larynx development
 - difficulty of swallowing and sucking
 - drooling
 - cat-like cry



Cri-du-chat Chromosome 5 pair



http://learn.genetics.utah.edu/content/disorders/whataregd/cdc/

Wolf-hirschhorn syndrome (del 4p)

- microcephaly
- micrognathia (small jaw)
- ocular hypertelorism
- dysplastic ears
- growth and mental retardation
- muscle hypotonia
- seizures
- congenital heart defects





Prader-Willi syndrome (del 15q11-q13)

- paternal deletion
- Iow fetal activity
- hypotonia
- excessive weight gain, hyperphagia
- short stature
- hypogonadism
- mental retardation
- hypopigmentation
- skeletal development delay (acromicria)





Angelman syndrome (del 15q11-q13)

- maternal deletion
- hard mental retardation
- hypotonia
- epilepsia, seizures
- hypopigmentation
- hyperactivity
- speech absence
- prominent scull shape (mandibul, microcephaly, flat back of head..)
- "happy character"
- movement or balance disorder



DiGeorge syndrome (del 22q11.2)

- Iow-set malformed ears
- small mouth and lower jaw
- narrow eye-lits
- submucosal or visible cleft palate
- hypocalcemia
- interupted aortic arch
- cardiac abnormality tetralogy of Fallot
 - incomplete ventricular septum
 - right-to-left shunt of aorta
 - left ventricle hypertrophy
 - Iung stenosis





https://www.google.cz/gearch?q=digeorge+syndrom&&spv=210&es_m=93&source=Inms&Ibm=isch&as=X &del=99CFUo21HaqR7AbP1IBI&eeOAAC0_AUOAQ&biw=1920&bih=989#facrc=_&limgdia__&imgrc=0EhFF G2IOAvB3M%_aA%3BFGRA3YXEX/hsM/%BIbttp%253A%252F%252Fd



Williams Beuren syndrome (del 7q11)

- developmental delay
- mental disability
- failure to thrive
- heart defects (heart murmur, narrowing of main blood vessels)
- flattened nasal bridge
- widely spaced teeth
- hypercalcemia
- gastrointestinal problems
- urinary difficulties





https://www.google.cz/search?q=williams-beuren+syndrome&source=hms&lbtm=isc h&sa=X&ei=MimGUrDpC4GctQa.IM7GwCg&ved=OCAcQ_AUoAQ&biw=1920&bih=9i 9#facrca_almgig=_almgrc+MaTDkcoV/Bwg-WM%3A%3BTK422TKDIm1YIM%3Bhttp%253A%252F%252Fwww.thespeciallife.com %252Fimages%252F

https://www.google.cz/search?q=williams+beuren+syndrome&source=Inms&tbm =isch&sa=X&ei=MimGUvDpC4GctQaJhYGwCg&ved=0CAcQ_AUoAQ&biw=192 0&bih=989#facre_&&imgdi=_&imgrc=HTjyFEuSnZo4JM%3A%3BkqK81uaGRtK PIM%3Bhttp%253A%252F%252Fgeneticsf.laba

Supermale syndrome (47,XYY)

- increased growth velocity
- no unusual physical features
- normal testosteron level, fertility and sexual development
- possible learning disabilities
- delayed development of speech and language skills
- behavioral and emotional difficulties





Clinical Tools, Ini

80 s – "double Y" (Alien 3 – 1992)

Alien 3 (1992)

FIORINA "FURY" 16 OUTER-VEIL MINERAL ORE REFINE DOUBLE Y CHROMOSOME-WORK CORRECTIONAL FACILI

Klinefelter syndrome (47,XXY)

48,XXYY; 48,XXXY; 49,XXXXY

- tall figure
- less facial and body hair
- female distribution of body fat
- hypogonadism (decreased testicular hormon function)
- infertility
- gynecomastia (increased breast tissue)
- Iower intelect degree
- variations: 48,XXYY; 48,XXXY; 49,XXXXY

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Turner syndrome (45,X)

- Iower birth length and weight
- Iow hairline
- pterigya
- broad chest, widely spaced nipples
- small growth
- infertility, absence of menstrual period
- coarctation of the aorta
- webbed neck
- Iymphederma







XXX syndrome (47,XXX)

- majority of triple X females are never diagnosed
- normal fertility
- inactivated Barr body
- most often only mild effects
 - tall stature
 - small head
 - speech, language and learning disabilities

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88

19

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20

weak muscle tone



4. Molecular cytogenetics

presents the connections between classical cytogenetics and molecular biology

- utilizes the latest knowledge of molecular biology, microscopy and computer image analysis to study the structure and properties of chromosomal changes
- allows the analysis of numerical and structural chromosomal imbalances unidentified classical cytogenetic techniques
- does not require the presence of mitosis
- sources of material for cytogenetic investigation
- samples from different tissues
- amniotic fluid cells, chorionic villi, placenta umbilical cord blood
- bone marrow
- samples of solid tumors



bone marrow

peripheral blood

FISH

fluorescent in situ hybridization



FISH

- detection of the fluorescent signals through microscope equipped with specific fluorescent filters
- material
 - cultivated peripheral blood
 - cultivated bone marrow
 - cultivated amniotic fluid cells
 - uncultivated amniocytes
 - tumor and bone marrow prints
- we determine:
 - 1. presence of signals
 - 2. number of signals
 - 3. position of signals
- the use of FISH
 - clinical cytogenetics
 - onco cytogenetics
 - human genom mapping



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Advantages and disadvanages of FISH

advantages

- does not require the presence of mitoses (mostly)
- quick assessment of big amount of cells

disadvantages

does not provide whole genomic view

SKY spectral caryotyping

mikroskop equipped with 2 fluorescent filters (SKY, DAPI)

fluorochromes (FITC Rhodamin TexasRed Cy5 Cy5.5) scanned by one filter, based on a wave lenght each chromosome pair is coloured — pseudocoloures



Image Acquisition with SkyVision[™]

Picture analyse using SkyView



Display Image

Classified Image

The objective of the SkyView spectral karyotyping software is to automatically classify and karyotype chromosomes in the Display image, thereby overcoming the ambiguity inherent in the display colors.



Chromosomes: 46 Out of image

88%

Advantages and disadvantages of SKY

advantages

- detects balanced rearrangements
- detects aberations in one step
 - kryptic translocations and insertions
 - marker chromosomes
 - redundant material with unknown origin
 - komplex rearrangements

disadvantages

- need of quality mitoses
- succesful hybridisation
- expensive method

a modification of FISH technique to measure DNA gains or losses throughout the entire genome

enables detection of unbalanced chromosomal changes (gains or losses) throughout an entire genome in one hybridization reaction

is based on comparison of two genomes

Conventional FISH

normal DNA \rightarrow select DNA \rightarrow make probe \rightarrow label abnormal target \rightarrow abnormal target identified

Comparative genomic hybridization

normal DNA \rightarrow no DNA selection \rightarrow make probe (entire genome) \rightarrow quantify on normal target \rightarrow abnormal genome quantified

CGH requirements

Materials :

- Good quality DNA isolated from
 peripheral blood
 - bone marrow
 - solid tumour
 - amniocytes

Equipment :

•Fluorescent miroscope (filters DAPI, SpGreen, SpRed)

- Sensitive CCD kamera
- Computer with software for CGH analysis and data interpretation (LUCIA CGH Advanced Statistics, Laboratory Imaging Ltd., Prague, Czech Republic)





CGH principle



www.abbottmoleculars.com

CGH principle





www.abbottmoleculars.com



Relative brightness depends on amount of labeled DNA with appropriate complementary sequences, i.e. on the DNA copy number at this locus

Mitoses scanning, CCD camera filters for B, G, R



Identification of aberrations

Flore scent ratio profile is compared to the fixed tresholds (15-20% from ratio 1). The ratio profile that deviates 15 % - 20 % from ratio 1.0 is typically regarded as aberrant.





Advantages of CGH

- detects and quantifies DNA copy number gains and losses throughout an entire genome in a single analysis
- does not require cell culturing and metaphases from test tissue
- is able to identify not only the chromosome from which the additional unknown material is derived, but also to map the region involved to specific bands on the source chromosome
- in combination with whole-genome PCR, can analyze DNA from a single or very few cells

Disadvantages of CGH

low genomic sensitivity: about 10 Mbp for single copy changes

solution: microarrays

does not detect balanced rearrangements (inversions, balanced translocations)

solution: mFISH

cannot detect overall ploidy changes, e.g. tetraploid tumor

solution: use in conjunction with regular FISH

requires minimally 50 % aberrant cells for reliable results

solution: HR-CGH, microarrrays

Modifications of CGH

High Resolution Comparative Genomic hybridization (HR-CGH)

- Kirchhoff et al., 1997
- the same principles and laboratory processing as CGH
- different data interpretation based on dynamic standard
- reference intervals special software
- genome resolution is about 4 Mbp
- abnormal cell detection limit is about 30 %



Modifications of CGH

Array-CGH

- Solinas-Toldo et al. 1997
- based on principle of CGH
- the chromosomes (CGH) are replaced by separated clones (array-CGH)
- miniaturized array of DNA (genetic material)

CGH





array-CGH



The origin of clones

BAC, PAC, c-DNA clones, oligonucleotides



Array-CGH





Advantages and disadvantages of array-CGH

- advantages
 - detects and quantifies DNA copy number gains and losses throughout an entire genome in a single analysis
 - precise aberration locating
- disadvantages
 - does not detect balanced rearrangements (translocation, inversion)
 - does not detect ploidy changes

MLPA

Multiplex Ligation-dependend Probe Amplification

- sensitive method able to detect differences in one nucleotide
- detects changes of copy number in 45 sequences in one reaction
- simple all the reaction takes place in one test tube
- relatively cheap method



MLPA principle





Advantages and disadvantages of MLPA

- advantages
 - sensitive
 - specific
 - multiplex
 - simple
 - cheap
- disadvantages
 - higly sensitive to contamination
 - time difficulty
 - the aberation have to occur in 50% of cells
 - some mutations or polymorphismus can lead to false results

5. Integrated laboratory of molecular cytogenetics, Brno





Brno, the cradle of genetics





Augustinian monastery in Brno - place of G. J. MENDEL s work

Who are we?

Integrated laboratory of molecular cytognetics is an integrated clinical and research centre, which is a result of co-operation among:

- Dept. of Genetics and Molecular Biology, Inst. of Experimental Biology, Faculty of Science, Masaryk University
- Dept. of Medical Genetics, University Hospital Brno
- University Research Centre Czech Myeloma Group Brno







Department of Medical Genetics, University Hospital Brno: the centre for genetic investigation for South Moravia region



What is our interest?

The main interest of the Integrated laboratory is the research of chromosomal aberrations using **molecular cytogenetic techniques.**



Methods



- Fluorescence in situ hybridization (FISH)
 - Spectral karyotyping (SKY)
- Comparative genomic hybridization (CGH)
 - High resolution CGH (HR-CGH)





- Array-CGH (Agilent)
 - MLPA







The equipment

Classical Cytogenetics, FISH, CGH/HR-CGH

- Microscopes Olympus BX61
- CD cameras Voskuhler
- Digital Image Analysis System (LUCIA, LIM Ltd.):
 - LUCIA-KARYO
 - LUCIA-FISH
 - LUCIA-CGH/CGH Advanced Statistics

System for SKY (SKY View – Applied Spectral Imaging Ltd, Israel)

- System for array-CGH: Agilent Scanner
- System for MLPA: capillary electrophoresis Beckman Coulter









Molecular cytogenetic investigations at Department. Of Medical Genetics

- Prenatal cytogenetic diagnosis
- Postnatal cytogenetic analyses
- Cancer cytogenetic analyses

Prenatal cytogenetic analyses

Uncultered and cultured amniotic cells, fetal blood, chorion villi I-FISH

AneuVysion Assay Kit (Abbott Vysis) Mix1:

- CEP 18 Sp. Aqua
- **CEP X Sp. Green**
- **CEP Y Sp. Orange**

Mix 2:

- LSI 21 Sp. Orange
- LSI 13 Sp. Green

Microdeletion syndromes (DiGeorge)



FISH Pro

Prenatal cytogenetic analyses



Postnatal cytogenetic analyses

Peripheral lymhocytes, buccal swab
 FISH, CGH, HR-CGH, array-CGH, MLPA, SKY



ToTel Vysion Kit, Abbott-Vysis

Microdeletion syndromes – FISH probes, MLPA kits P245, P297

DiGeorge syndrome

Prader-Willi/Angelman syndrome

Williams-Beuren syndrome

1p36 microdeletion syndrome

- Subtelomeric screening MLPA kits P036, P070 (MRC-Holland), ToTel Vysion kit (Vysis)
- Origin of marker chromosomes CGH, SKY, WCP FISH probes
- Identification and specification of numerical and structural aberrations – CGH, SKY
- Detection of gonosomal mozaics FISH (X/Y probes) in infertile couples or gonosomal syndromes

Postnatal cytogenetic analyses

 $X \rightarrow Y$



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FISH: deletion of (22)(q11.2) (DiGeorge syndrome) SKY: marker chromosome identification (chr. 11)



Case interpretation Patient : del(4p)dup(8p)



- Born in 2001
- Clinical symptoms:
 - hard PMR
 - facial dysmorphy
 - stigmata
 - hypertelorism
 - hemangiom on right eye lid

Examination

- karyotype: 46,XY,der(4)
- HR CGH: negative
- MLPA: P036B del(4p)dup(8p)
 P070 del(4p)dup(8p)

Pacient 1 - MLPA



Deletion confirmation by the FISH method



Array CGH – confirmation of the aberation

dup(8)(p23.2pter) ~ 6.5 Mb

del(4)(p16.2pter) ~3.7 Mb



