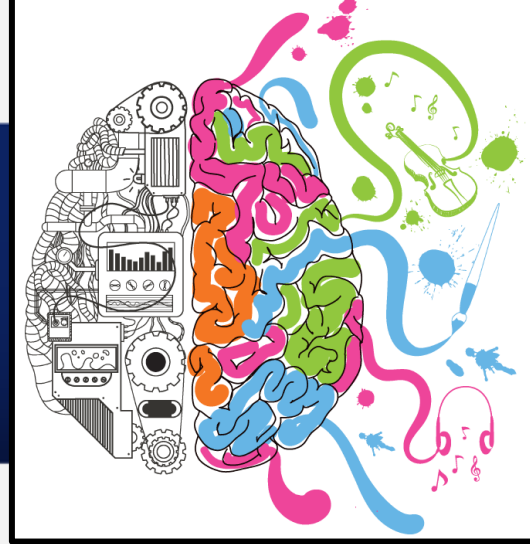


*La richiesta di competenza
neurologica nel prossimo futuro*
Sesta edizione



Le malattie mitocondriali: *la diagnosi genetica*

Daniele Ghezzi

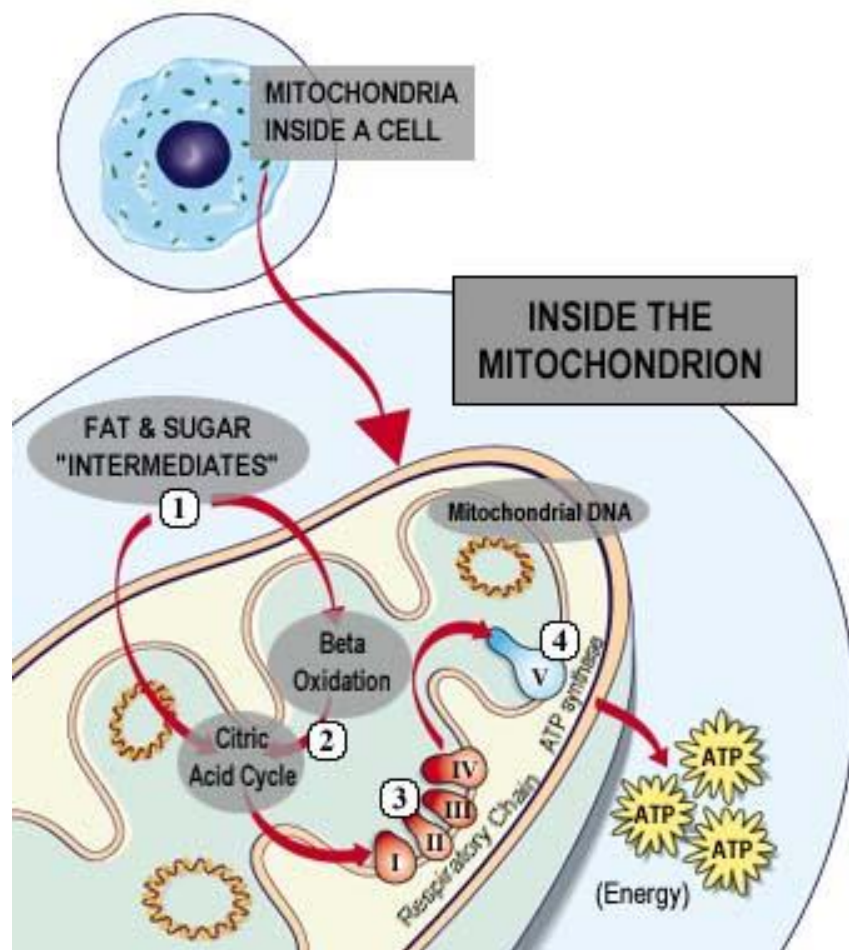
daniele.ghezzi@unimi.it

daniele.ghezzi@istituto-besta.it

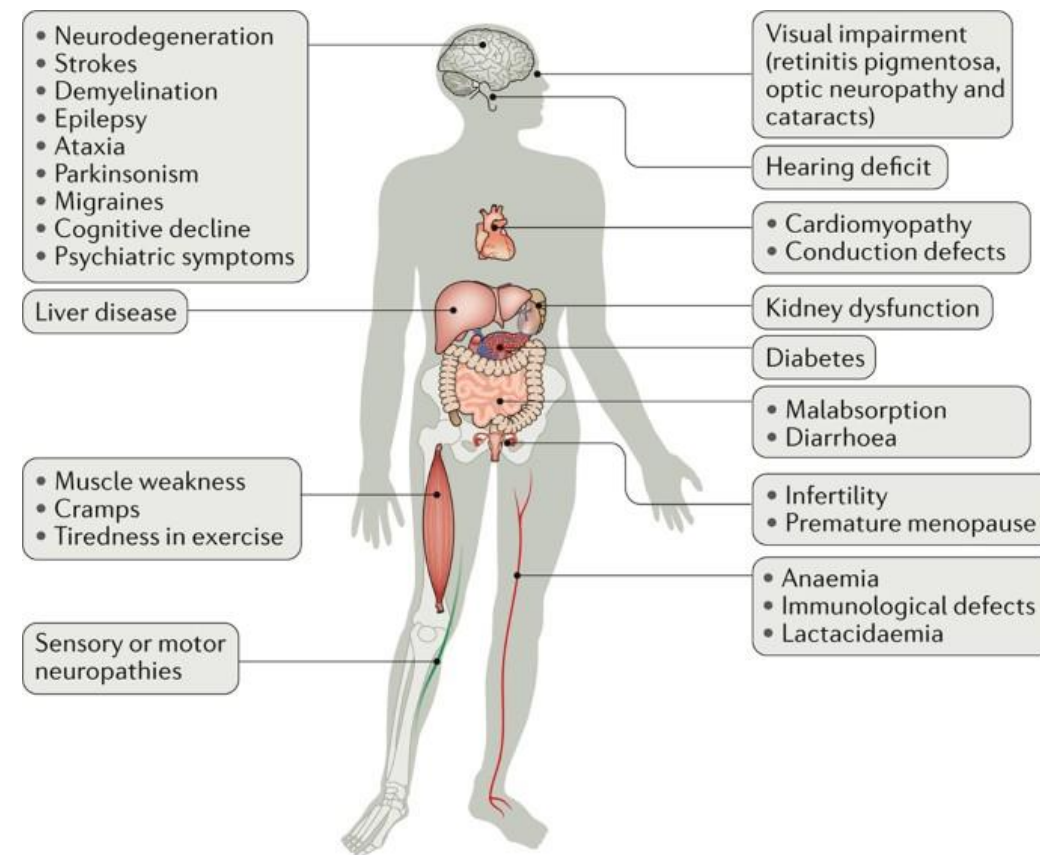


MITOCHONDRIAL DISORDERS

Mitochondrial Disorders affect the mitochondrial respiratory chain (MRC) and Oxidative Phosphorylation (OXPHOS)

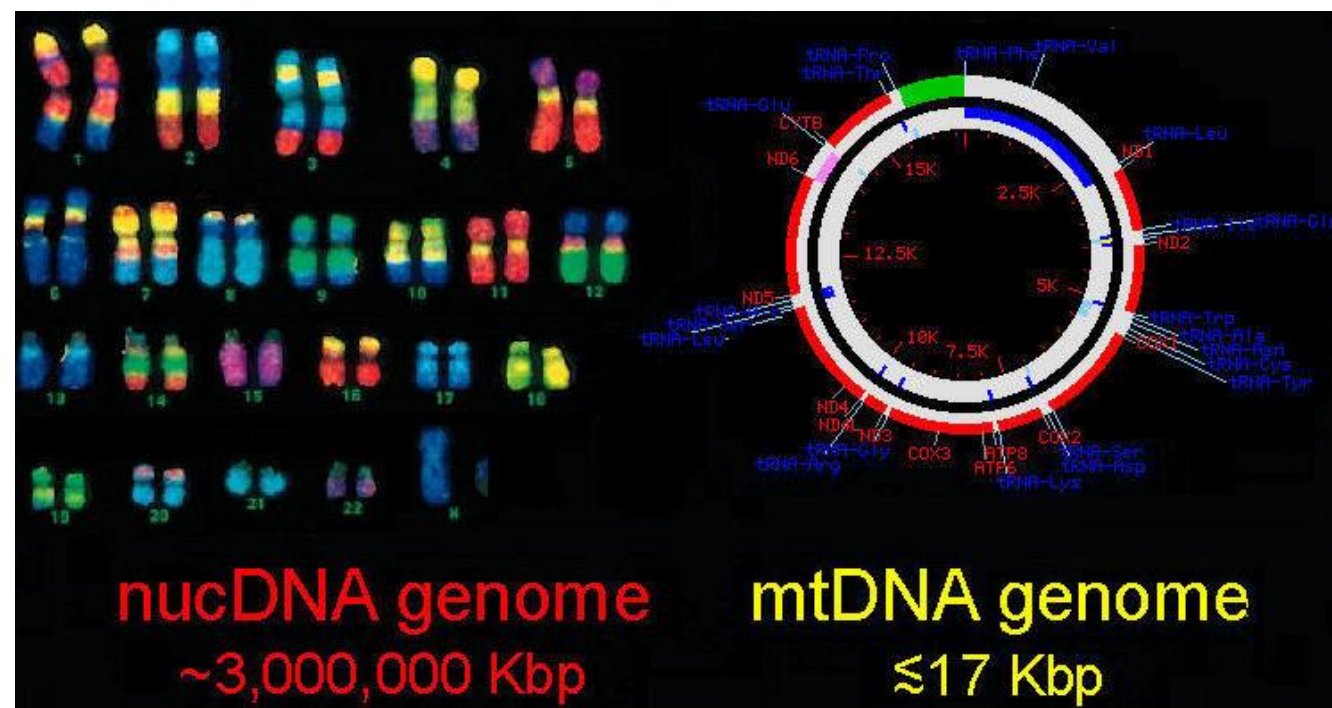
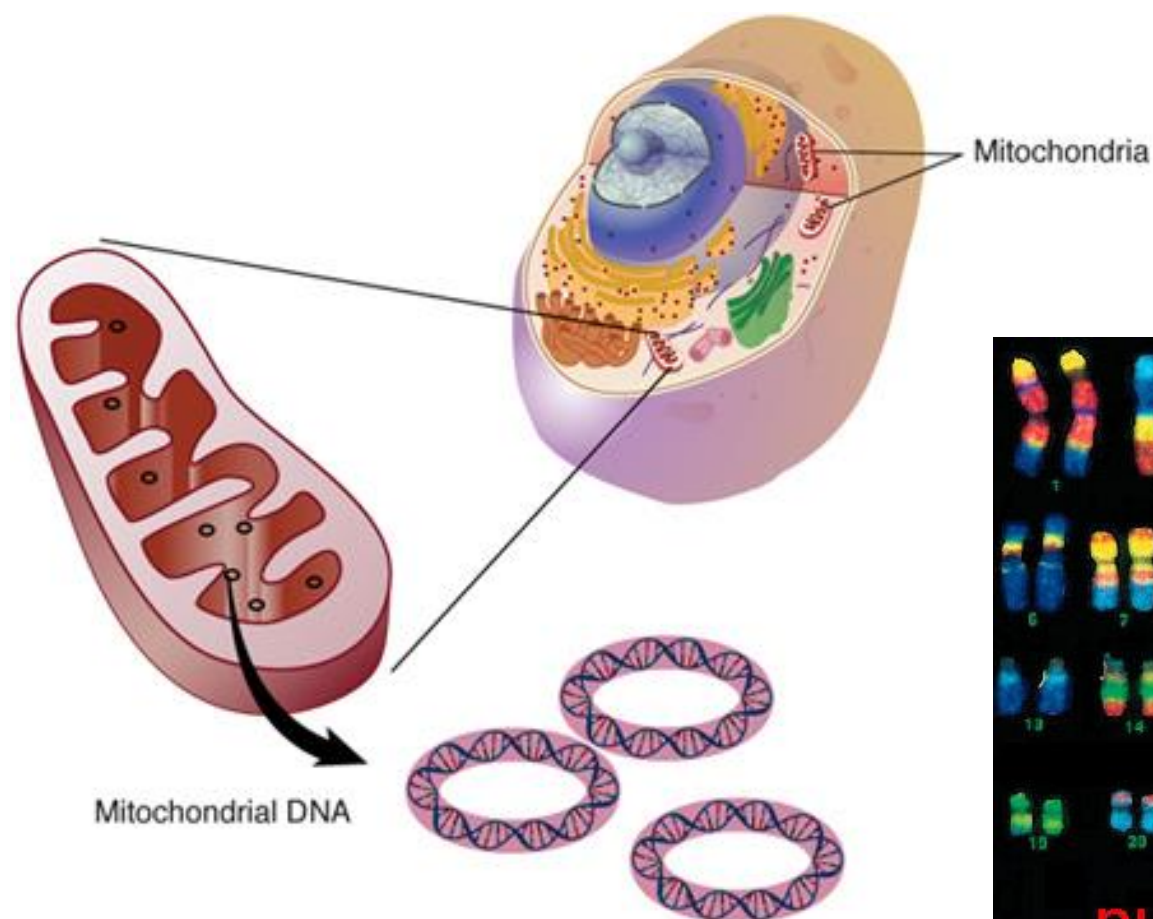


Mitochondrial medicine
"any tissue, any symptom, any age"



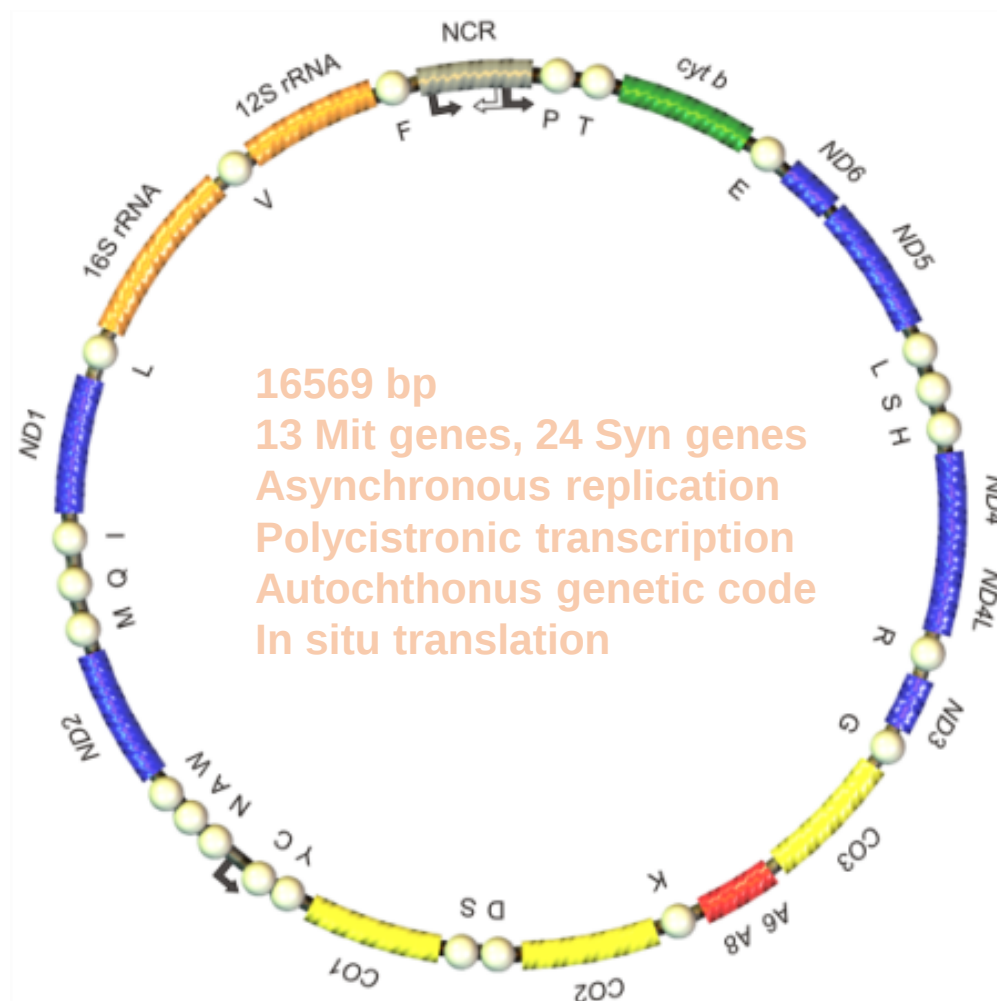


MITOCHONDRIAL DNA - mtDNA





MTDNA FEATURES



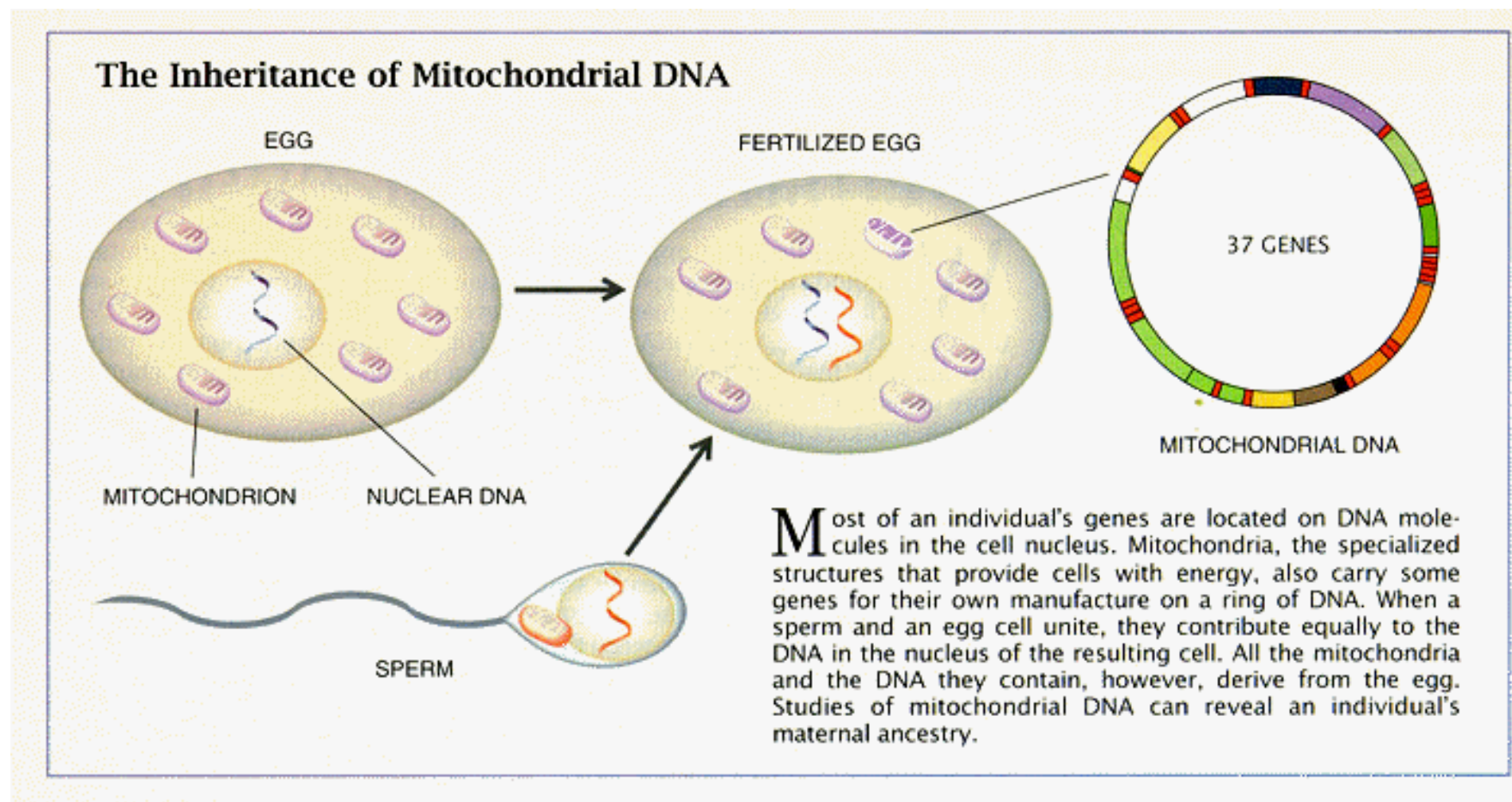
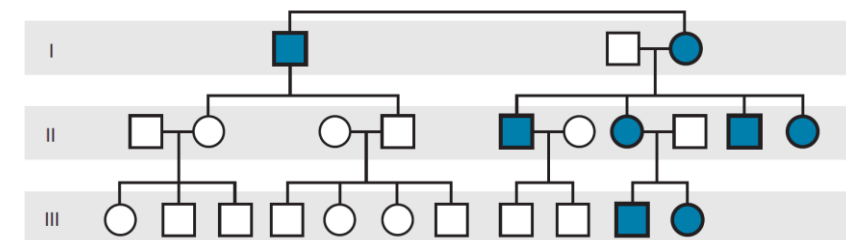
Mitochondrial DNA rules

- Maternal inheritance
- Heteroplasmy
- Mitotic Segregation
- Threshold Effect



MTDNA RULES

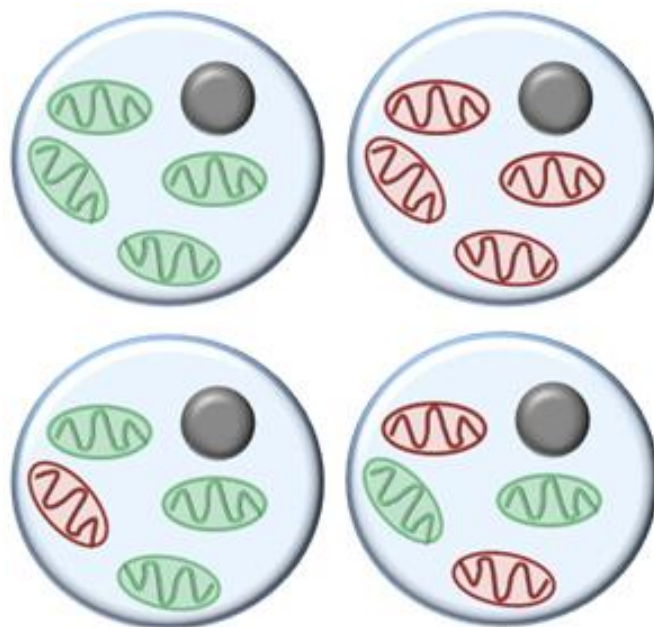
- Maternal inheritance



MTDNA RULES

- Polyplasmmy**

Each human cell has thousands of mitochondria and within each single mitochondrion are present multiple copies (2 to 10) of mtDNA. Usually all these copies are identical, a status known as homoplasmy.



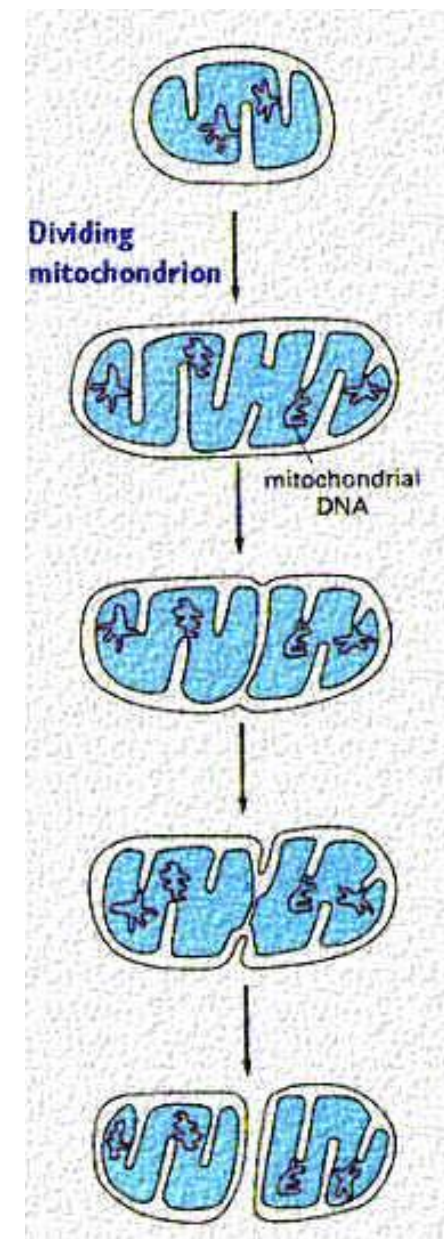
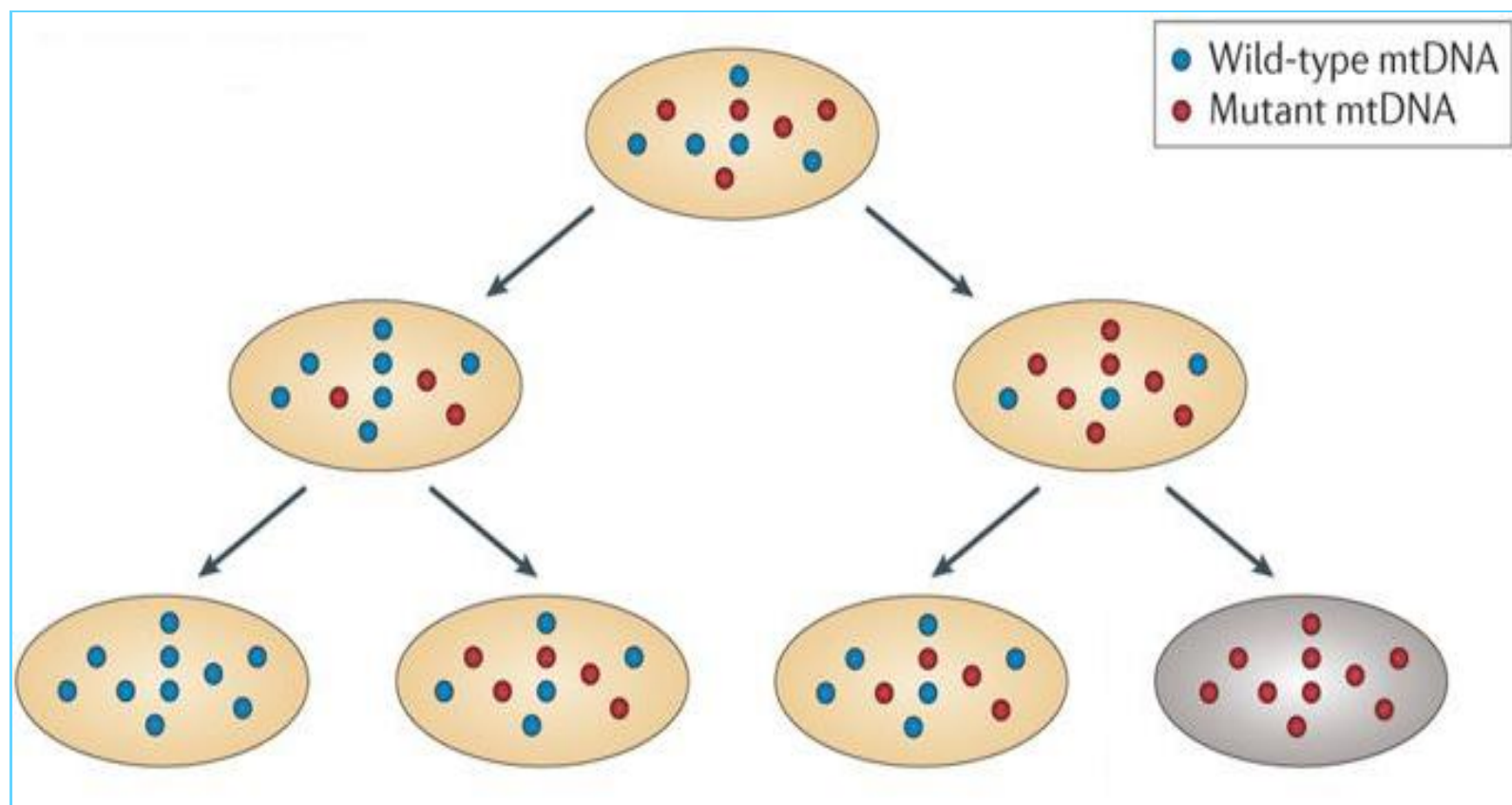
Homoplasmy

Heteroplasmy

However, mutant mtDNA could coexist with wt mtDNA in the same cell. This coexistence is called heteroplasmy.

MTDNA RULES

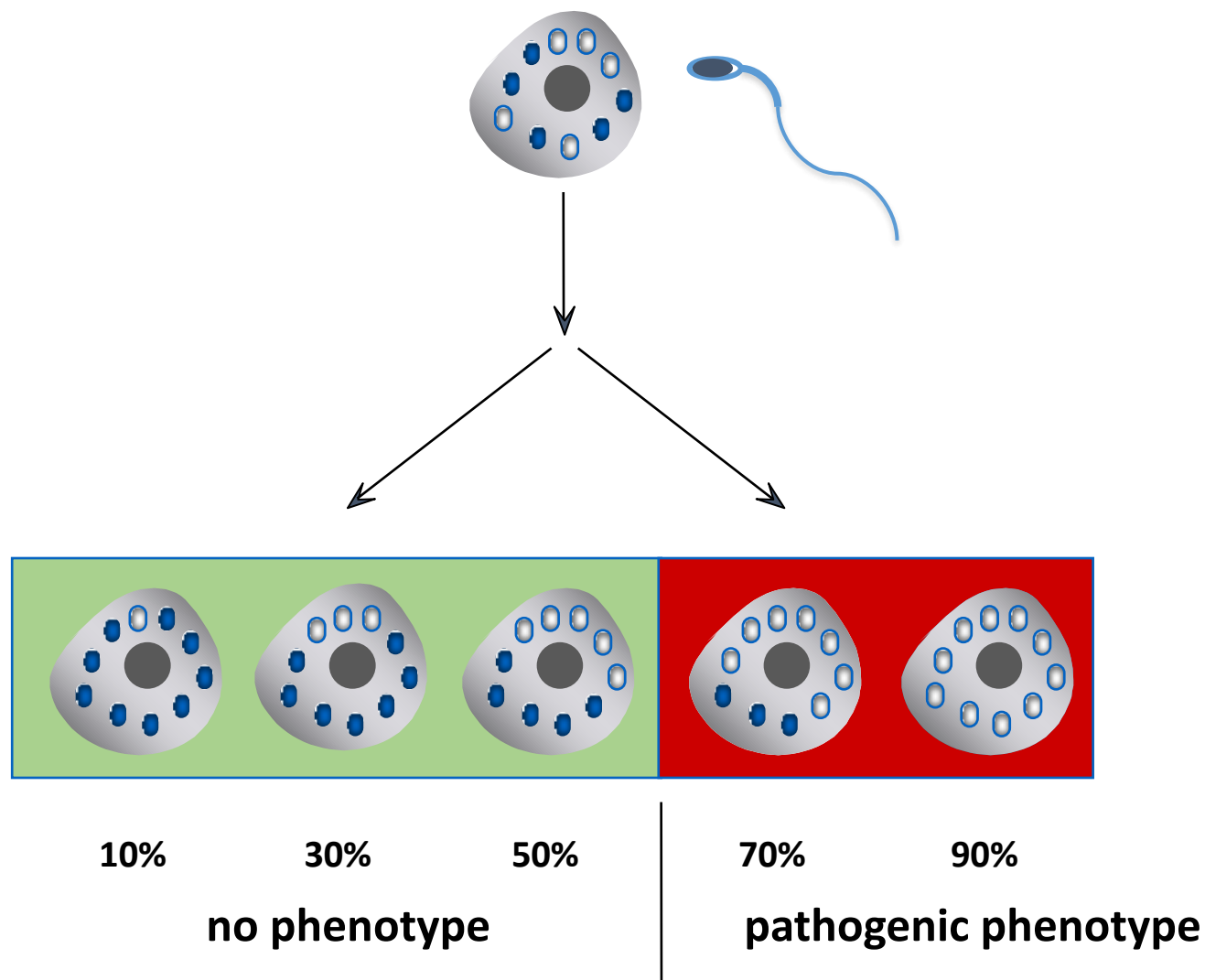
- Mitotic/random Segregation





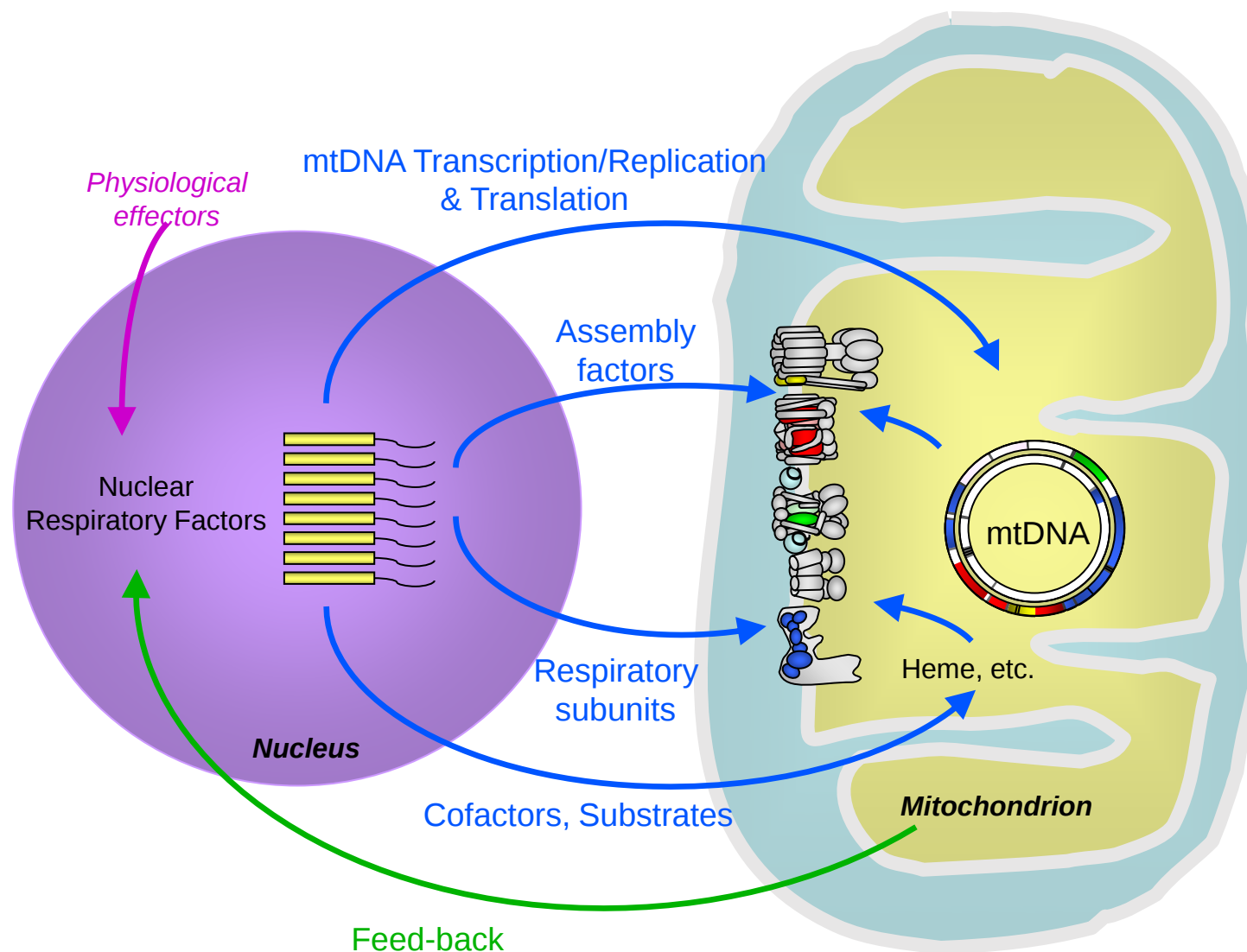
MTDNA RULES

- Threshold Effect



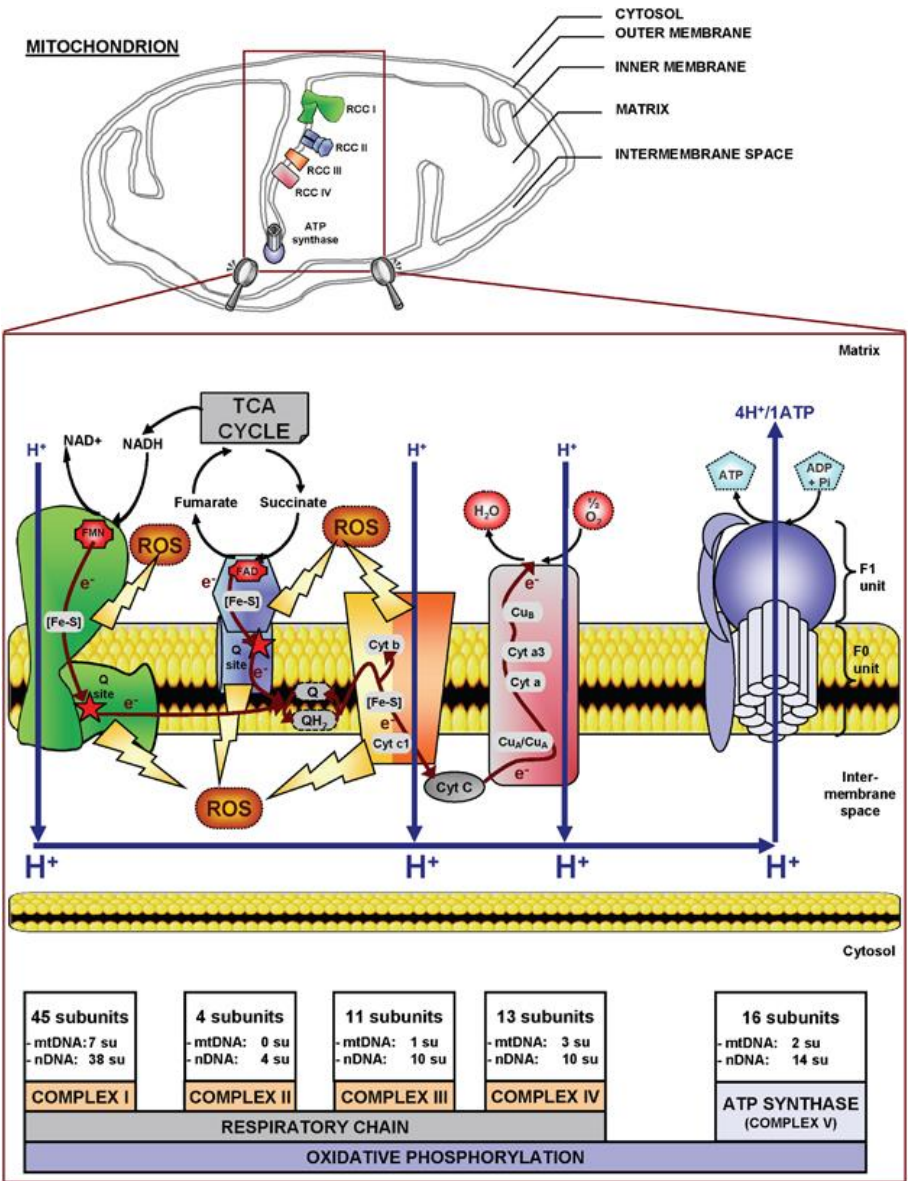


Mitochondrial Disorders: not only mtDNA!

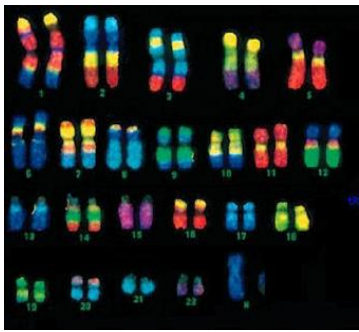
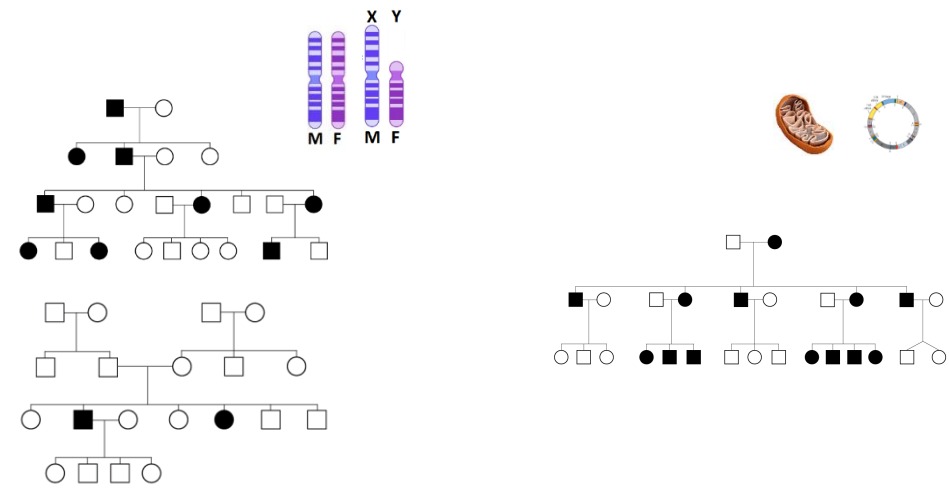




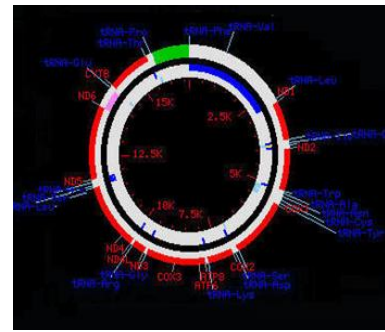
MITOCHONDRIAL DISORDERS: GENETIC HETEROGENICITY



Mitochondrial medicine
"any mode of inheritance"



nDNA

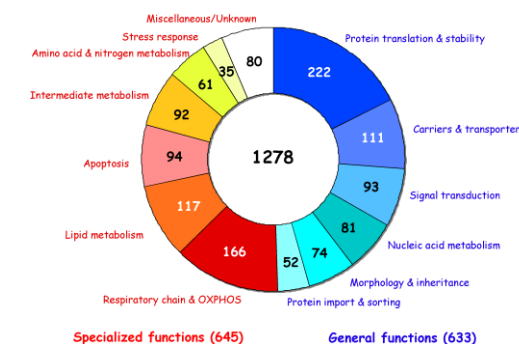


mtDNA

Mitochondrial DNA defects



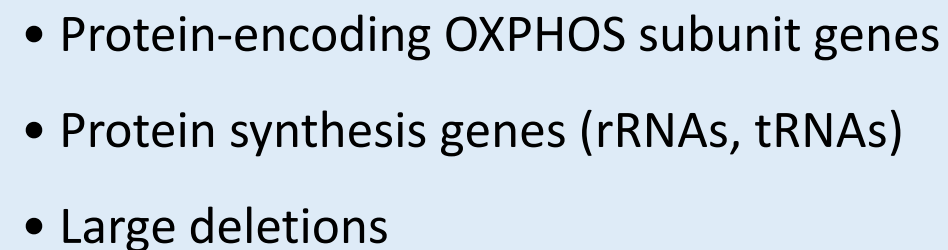
Nuclear DNA mutations



Mendelian rules

- Maternal inheritance
- Heteroplasmy
- Mitotic Segregation
- Threshold Effect

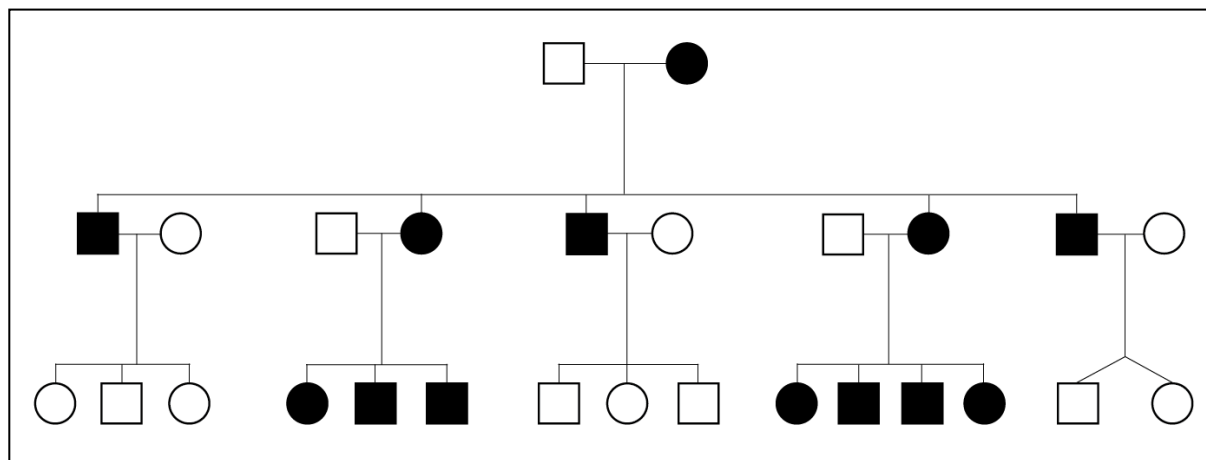
Mutation map



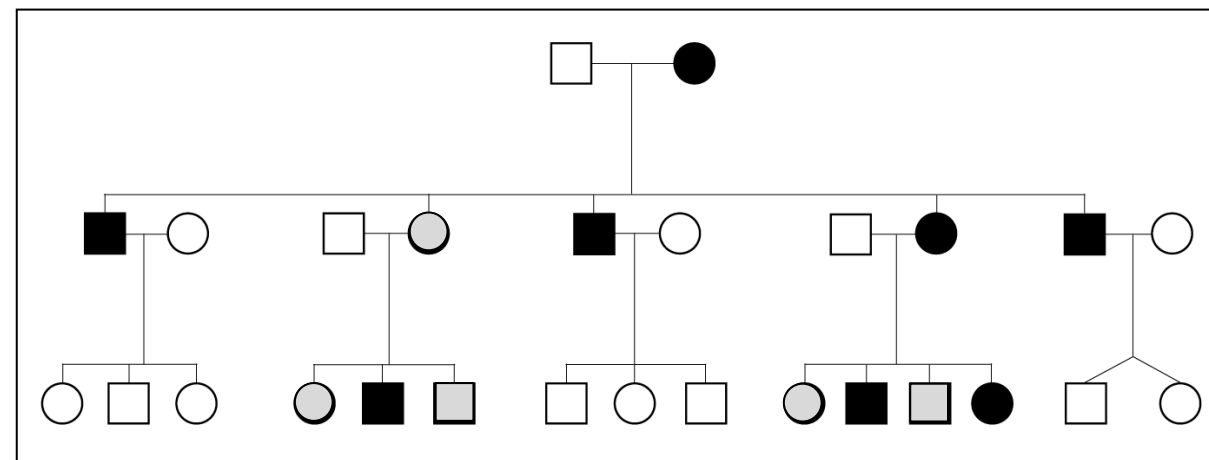
Homoplasmic mutations



MITOCHONDRIAL DNA DEFECTS



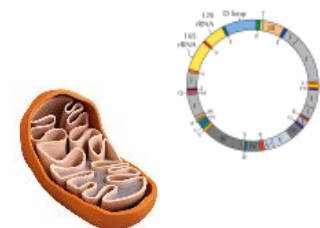
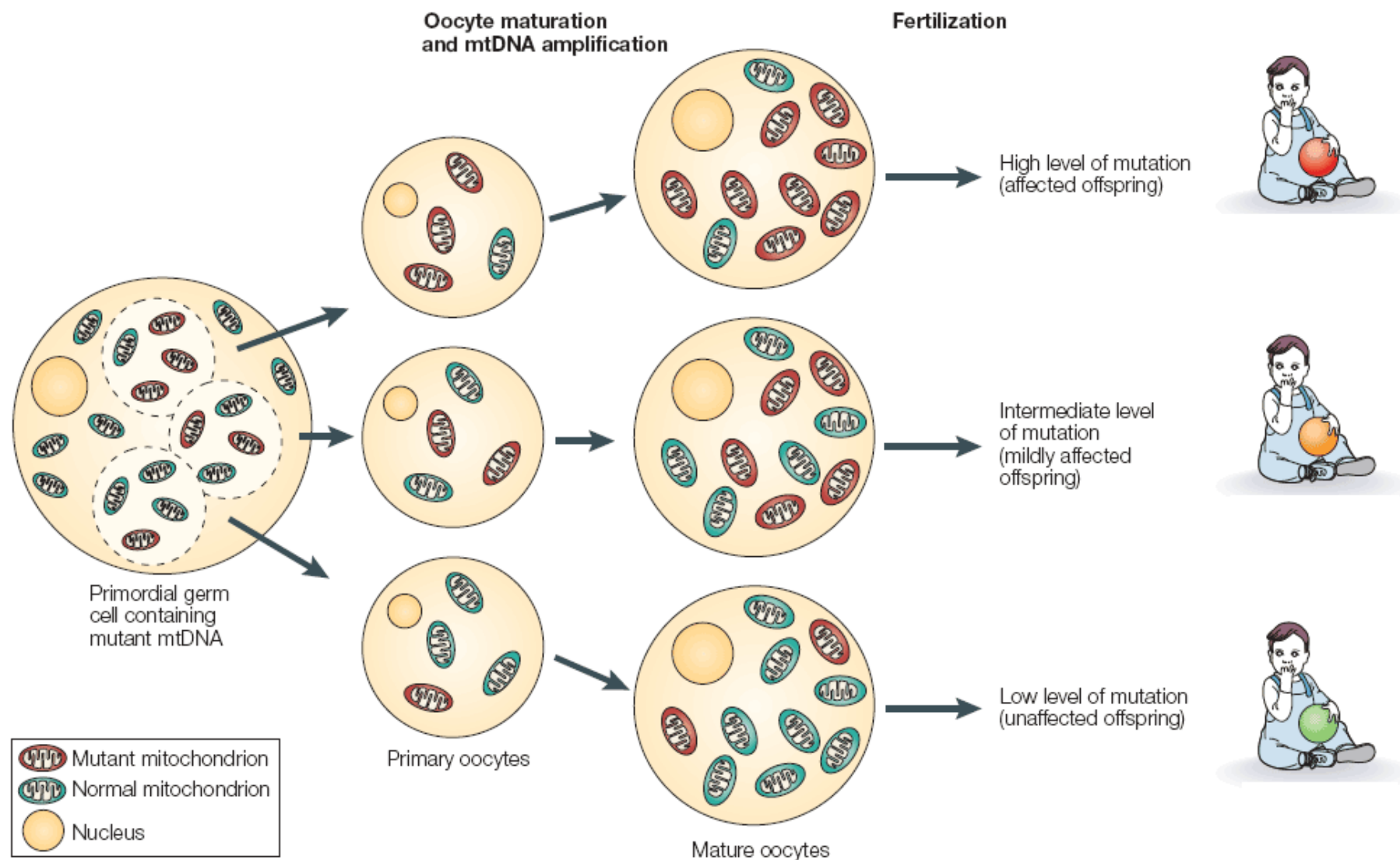
- *Homoplasmic mutation*
- *Complete penetrance*



- *Heteroplasmic mutation*
- *Random segregation/Threshold effect*



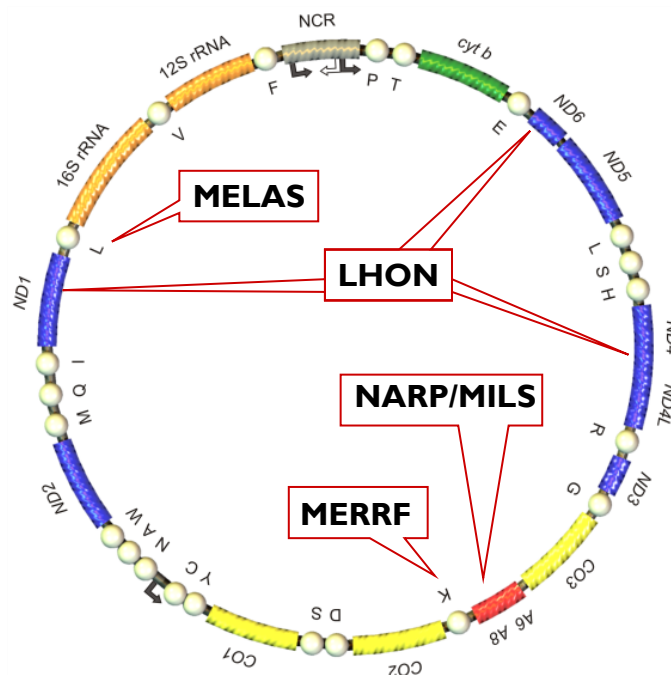
MITOCHONDRIAL DNA DEFECTS





MITOCHONDRIAL DNA DEFECTS

- Protein-encoding OXPHOS subunit genes
- Protein synthesis genes (rRNAs, tRNAs)
- Large deletions



1988: first mtDNA mutations

Today > 200 mutations reported;
the most common are:

- m.3460G>A MT-ND1
- m.11778G>A MT-ND4
- m.14484T>C MT-ND6
- m.3243A>G MT-TL1, tRNA^L
- m.8344A>G MT-TK, tRNA^K
- m.8993T>G MT-ATP6

LHON: Leber Hereditary Optic Neuropathy

MELAS: mitochondrial Myopathy, Encephalopathy, Lactic Acidosis, and Stroke-like episodes.

MERRF: Myoclonic Epilepsy associated with Ragged-Red Fibers. Additional symptoms: ataxia, hearing loss, lipomas

NARP: Neuropathy, Ataxia, Retinitis Pigmentosa.

MILS: Maternally Inherited Leigh Syndrome; early-onset progressive neurodegenerative disorder with a characteristic neuropathology (necrotizing encephalopathy, infantile subacute)



MITOCHONDRIAL DNA DEFECTS

Heteroplasmic point mutations

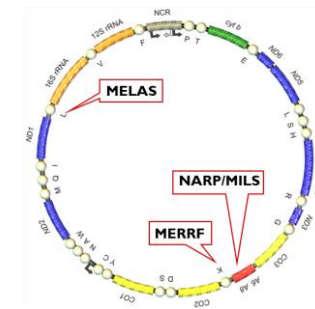
Maternally inherited

Qualitative correlation btw mutation and phenotype e.g. MERRF, MELAS, NARP, MMC, MM, etc.

Quantitative correlation btw % of mutation load and clinical severity

m.8993T>G (p.L156R) in **MTATP6**

Mutation load:	• Up to 60%	unaffected
	• 60-90%	NARP
	• >90%	MILS



Warning for mtDNA analysis



- Heteroplasmy may be highly variable in various tissues in the same subject
- **The analysis has to be performed on DNA extracted from affected tissues, typically from muscle**
- Need to determine heteroplasmy level
- Useful to assess heteroplasmy level in different tissues
- Useful to assess heteroplasmy level in family members (maternal relatives)

**Prenatal or
preimplantation
analysis**



MITOCHONDRIAL DNA DEFECTS

- Protein-encoding OXPHOS subunit genes
- Protein synthesis genes (rRNAs, tRNAs)
- **Large deletions**

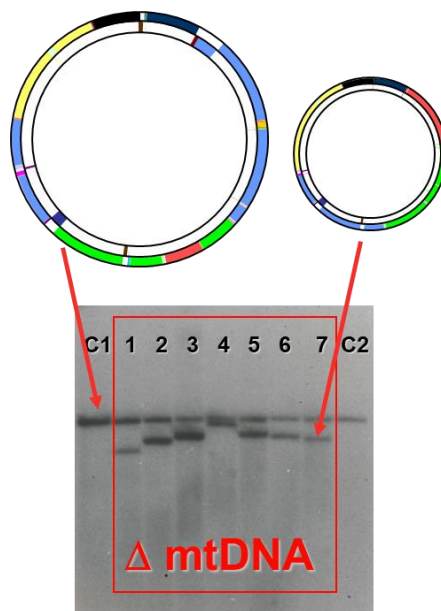
Single mtDNA deletions

Sporadic

Heteroplasmic

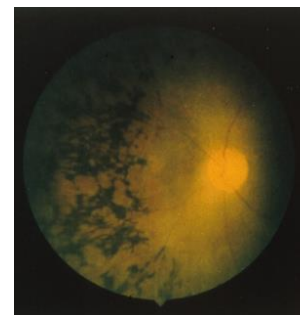
Correlation with tissue distribution of Δ mtDNA

No clear quantitative correlation btw % and size of Δ mtDNA and clinical severity



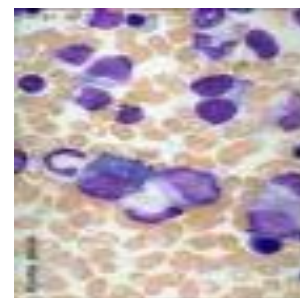
sporadic PEO: Δ only in muscle

PEO, proximal mit. myopathy



Kearns Sayre s.: Δ mostly in muscle

juvenile onset, PEO, mit. myopathy
ataxia, progressive neurological failure
retinitis pigmentosa, heart blocks



Pearson's: Δ everywhere

neonatal pancytopenia
pancreatic failure
may evolve into KSS



MITOCHONDRIAL DNA DEFECTS

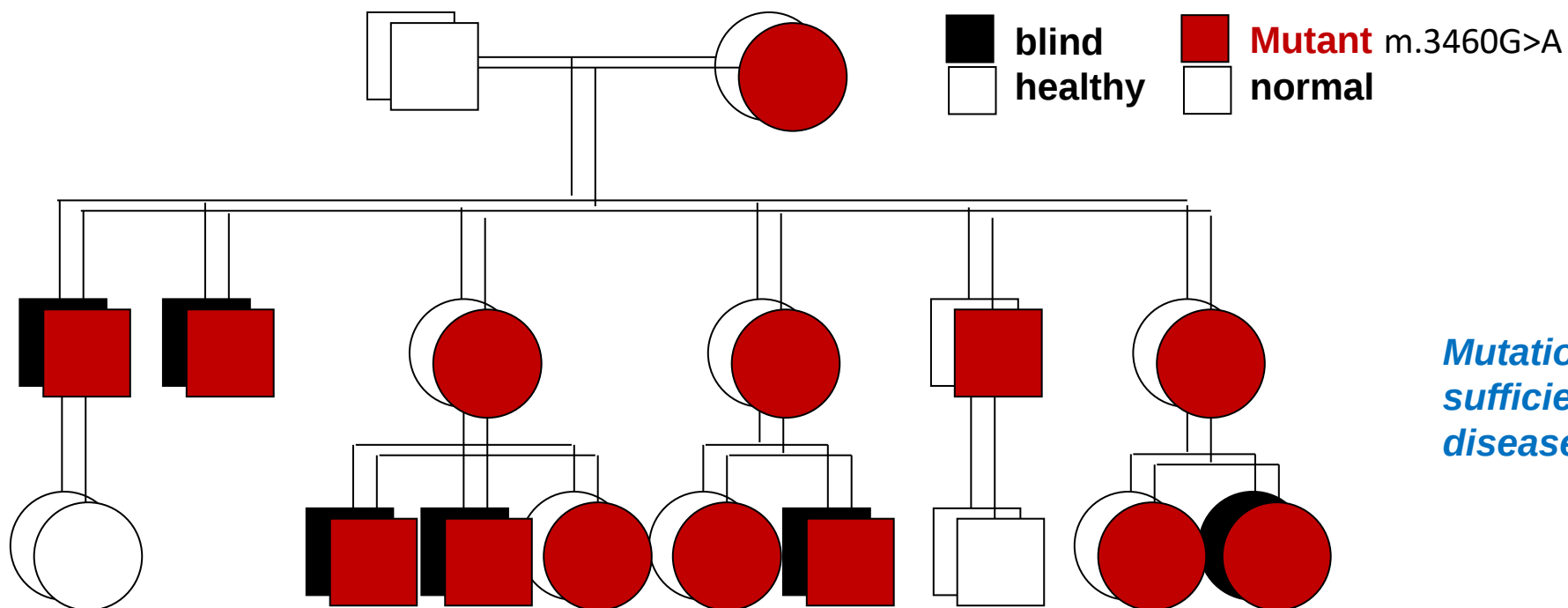
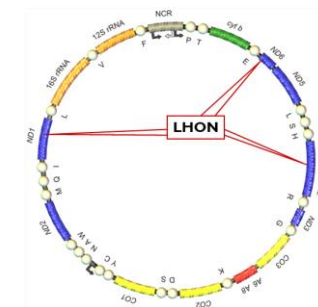
Homoplasmic point mutations

Maternally inherited

Qualitative correlation btw mutation and phenotype

Incomplete (sex dependent) penetrance

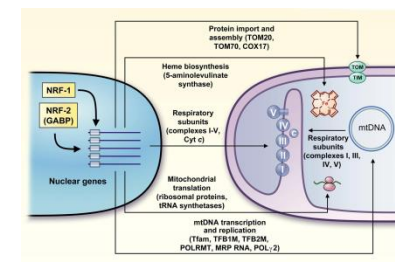
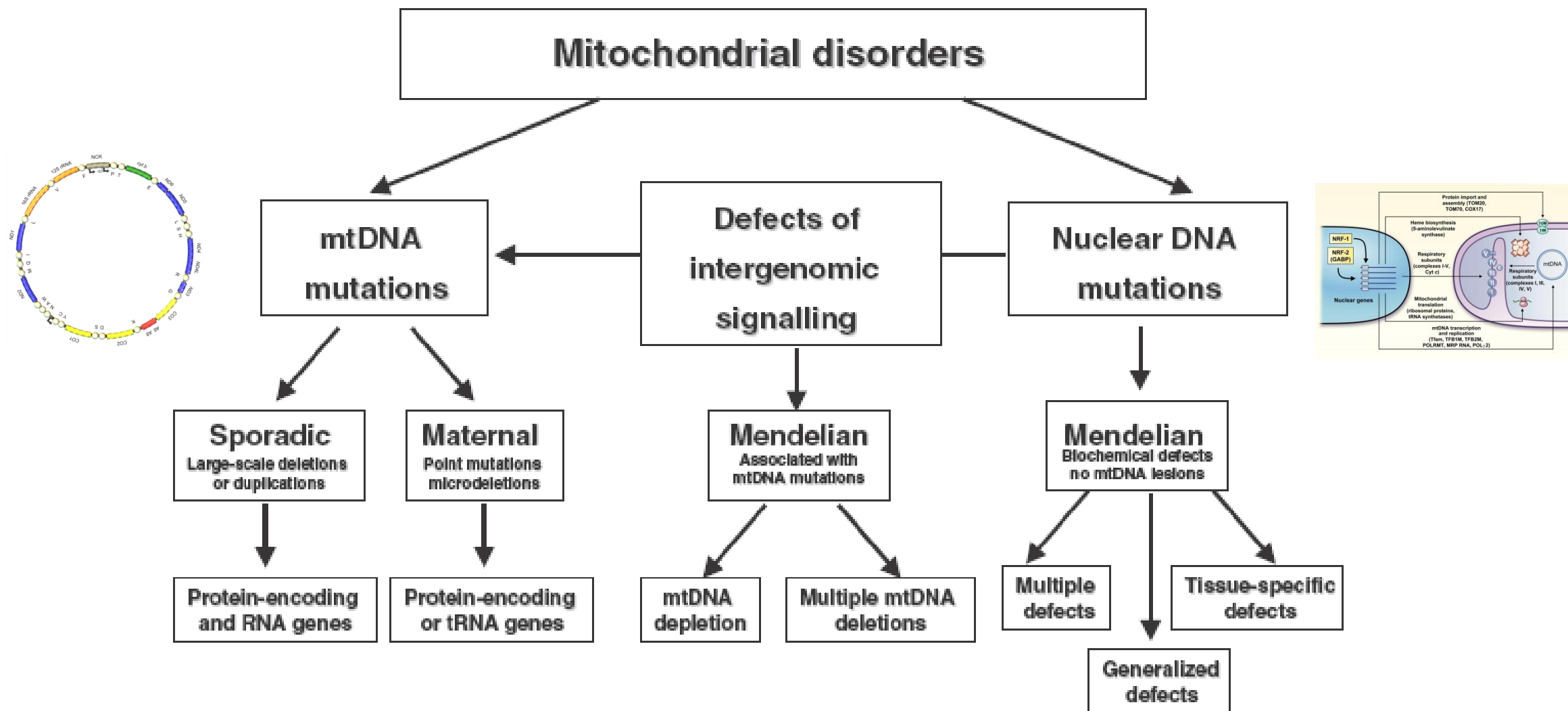
LHON: Leber Hereditary Optic Neuropathy



Mutation is necessary but not sufficient to produce the disease phenotype



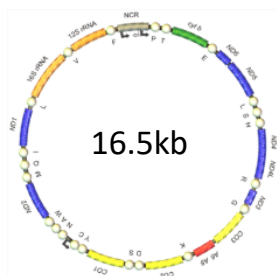
MITOCHONDRIAL DISORDERS: GENETIC ANALYSIS





MITOCHONDRIAL DISORDERS: GENETIC ANALYSIS

Mitochondrial DNA defects

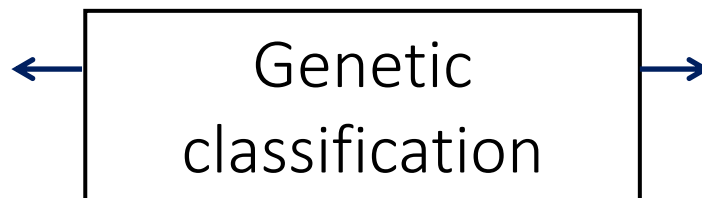


Direct sequencing of the whole mtDNA
RFLP for heteroplasmy quantification
Southern blot - Long range PCR - qPCR

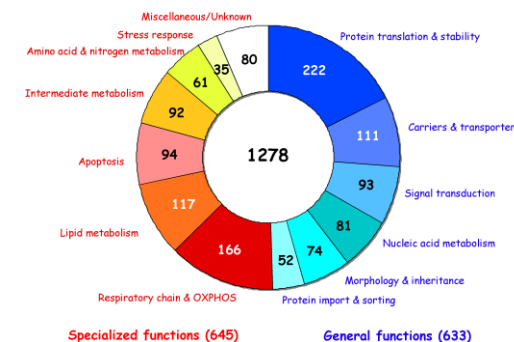


NGS strategies for:

- Sequencing
- Quantification of heteroplasmy
- Detection of large deletions



Nuclear DNA mutations



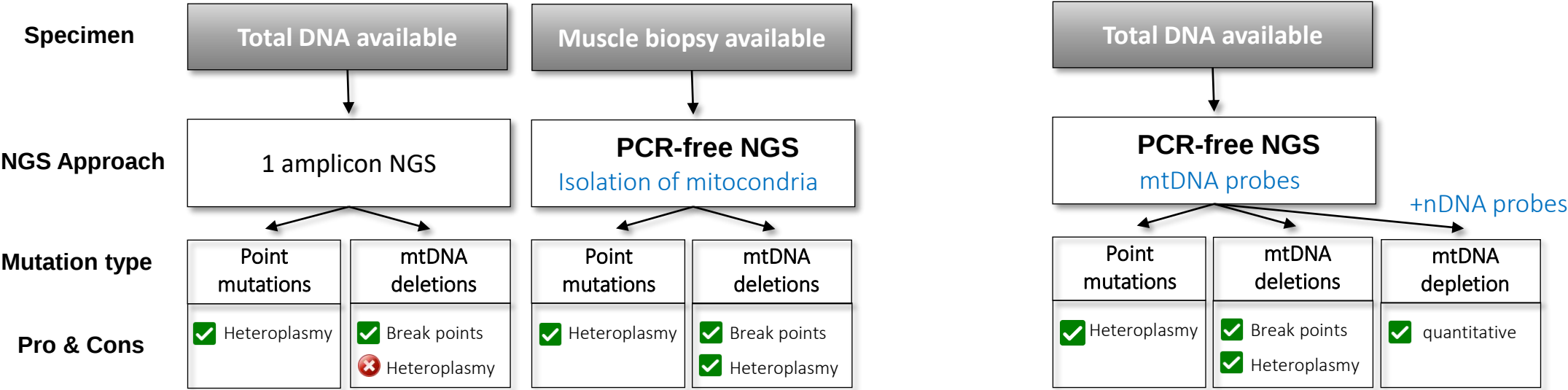
NGS strategies:

- **Targeted gene panels** (~300 genes associated with MD)
- **Clinical Exome** (~3000-5000 genes associated with human diseases)
- **Whole exome** (Exons of all nuclear genes, ~20000–25000)
- **Whole genome** (entire nuclear DNA)



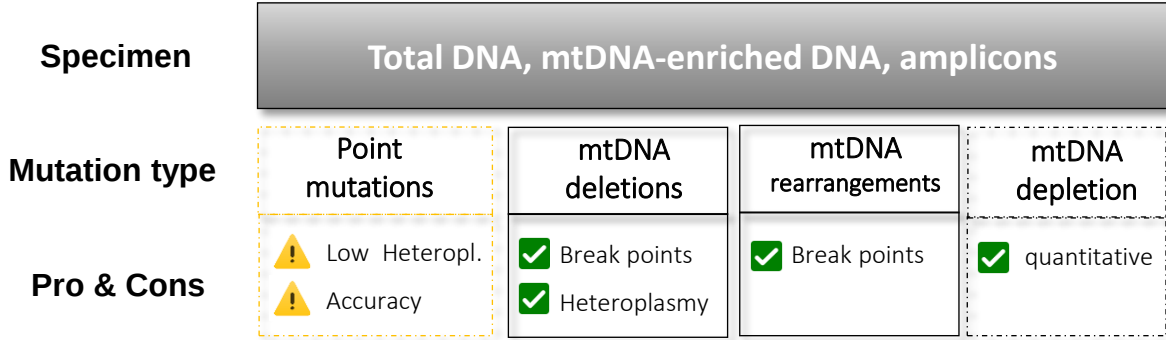
NEW NGS APPROACHES FOR MTDNA ANALYSIS

• Short read NGS



Legati et al. 2021

• Long read NGS



➤ WGS (WES)

Low Heteroplasmy

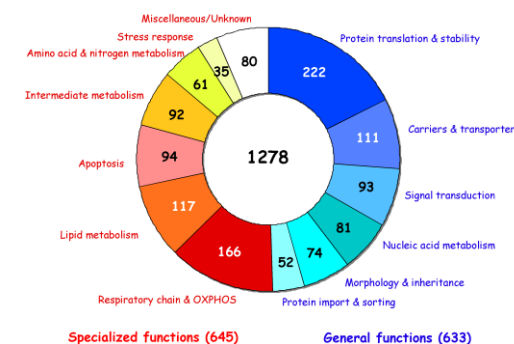
NUMTs



MITOCHONDRIAL DISORDERS: NUCLEAR DNA ANALYSIS

Genetic
classification

Nuclear DNA mutations



Targeted panel sequencing

40-400 genes



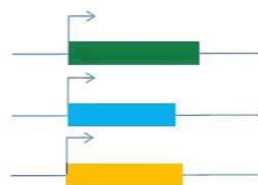
High coverage



Rapid (a few days), high accuracy but small number of mutations tested

Whole-exome sequencing

22,000 genes



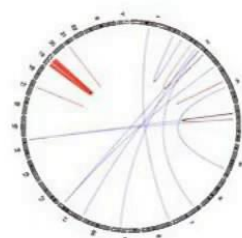
Intermediate coverage



Slower (a few weeks), good accuracy, many mutations tested

Whole-genome sequencing

All genes, translocations and non-coding DNA



Lower coverage



Slower (several weeks), all mutations tested but lower accuracy



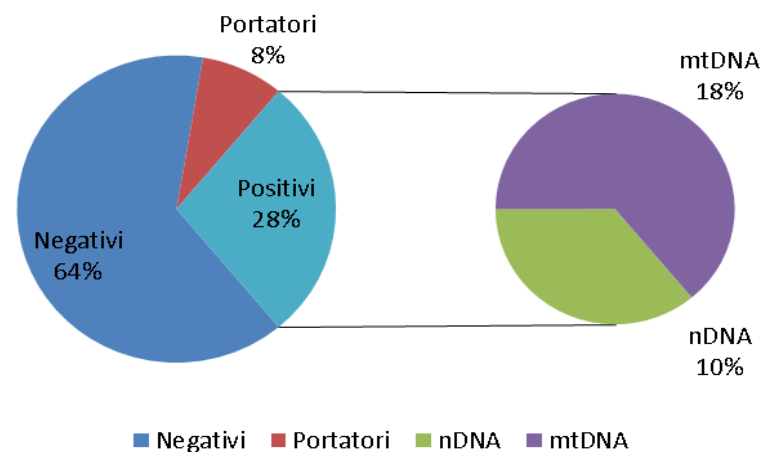
NGS strategies:

- **Targeted gene panels** (~300 genes associated with MD)
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- **Whole exome** (Exons of all nuclear genes, ~20000–25000)
- **Whole genome** (entire nuclear DNA)



TARGETED GENE PANELS

- Increased diagnostic yield



- New phenotypes
- Concurrent variants/
Digenic cases
- (New disease-genes)

Human Mutation

Variation, Informatics, and Disease



Homozygous mutations in *C1QBP* as cause of progressive external ophthalmoplegia (PEO) and mitochondrial myopathy with multiple mtDNA deletions

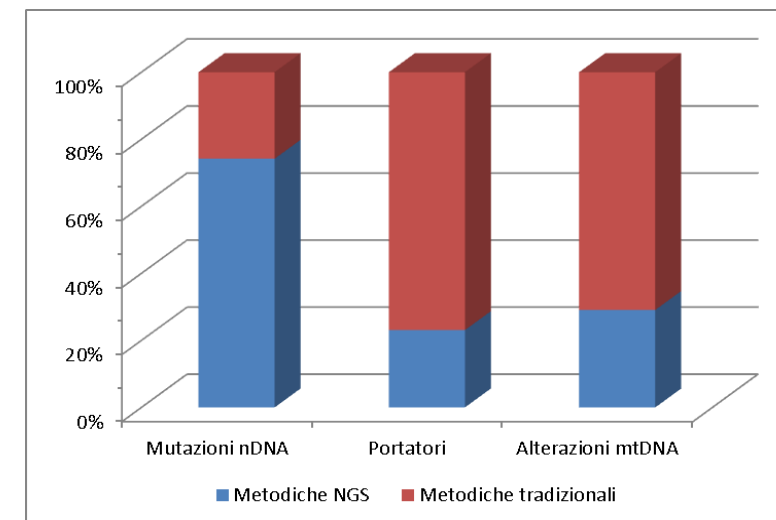
Silvia Marchet, Andrea Legati, Alessia Nasca, Ivano Di Meo, Manuela Spagnolo, Nadia Zanetti, Eleonora Lamantea, Alessia Catania, Costanza Lamperti, Daniele Ghezzi

MUSCLE & NERVE

New missense variants of *NDUFA11* associated with late-onset myopathy

Lorenzo Peverelli MD, Andrea Legati PhD, Eleonora Lamantea MSc, Alessia Nasca MSc, Alberto Lerario MD, Valentina Galimberti PhD, Daniele Ghezzi PhD, Costanza Lamperti MD,

IRCCS Besta – children cohort



Bi-allelic pathogenic variants in *NDUFC2* cause early-onset Leigh syndrome and stalled biogenesis of complex I

Ahmad Alahmad, Alessia Nasca, Juliana Heidler, Kyle Thompson, Monika Oláhová, Andrea Legati, Eleonora Lamantea, Jana Meisterknecht, Manuela Spagnolo, Langping He, Seham Alameer, Fahad Hakami, Abeer Almehdar, Anna Ardisson, Charlotte L Alston, Robert McFarland, Ilka Wittig, Daniele Ghezzi, Robert W Taylor

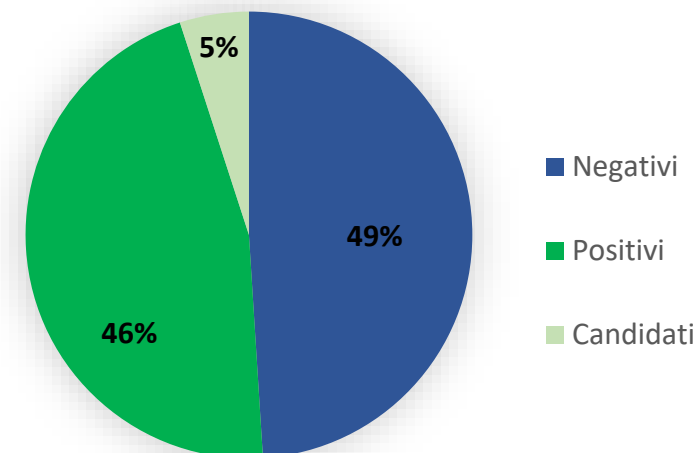
EMBO Mol Med (2020) 12: e12619



WHOLE EXOME SEQUENCING

- Further increased diagnostic yield

<i>Wortmann et al. 2015:</i>	39%
<i>Taylor et al. 2016:</i>	52%
<i>Stenton et al. 2021</i>	55%



- New disease-genes
- New phenotypes / new pathomechanisms

Annals of NEUROLOGY
An Official Journal of the American Neurological Association and the Child Neurology Society

ATPase Domain *AFG3L2* Mutations Alter OPA1 Processing and Cause Optic Neuropathy

Leonardo Caporali ScD, PhD, Stefania Magri ScD, PhD, Andrea Legati ScD, PhD, Valentina Del Dotto ScD, PhD, Francesca Tagliavini ScD, PhD, Francesca Balistreri ScD, Alessia Nasca ScD, Chiara La Morgia MD, PhD, Michele Carbonelli MD, Maria L. Valentino MD, Eleonora Lamantea ScD, Silvia Baratta ScD, Ludger Schöls MD, Rebecca Schüle MD, Piero Barboni MD, Maria L. Cascavilla MD, Alessandra Maresca ScD, PhD, Mariantonietta Capristo ScD, PhD, Anna Ardisson MD, Davide Pareyson MD, Gabriella Cammarata MD, Lisa Melzi MD, Massimo Zeviani MD, PhD, Lorenzo Peverelli MD, Costanza Lamperti MD, PhD, Stefania B. Marzoli MD, Mingyan Fang MD, Matthis Synofzik MD, Daniele Ghezzi ScD, PhD, Valerio Carelli MD, PhD, Franco Taroni MD

Human Mutation
Variation, Informatics, and Disease

Novel *NDUFA12* variants are associated with isolated complex I defect and variable clinical manifestation

Alessandra Torraco, Alessia Nasca, Daniela Verrigni, Alessandra Pennisi, Maha S. Zaki, Giorgia Olivieri, Zahra Assouline, Diego Martinelli, Reza Maroofian, Teresa Rizza, Michela Di Nottia, Federica Invernizzi, Eleonora Lamantea, Daniela Longo, Henry Houlden, Holger Prokisch, Agnès Rötig, Carlo Dionisi-Vici, Enrico Bertini, Daniele Ghezzi, Rosalba Carrozzo, Daria Diodato

Impaired complex I repair causes recessive Leber's hereditary optic neuropathy

Sarah L. Stenton,^{1,2} Natalia L. Sheremet,³ Claudia B. Catarino,⁴ Natalia A. Andreeva,³ Zahra Assouline,⁵ Piero Barboni,⁶ Ortal Barel,^{7,8,9} Riccardo Berutti,^{1,2} Igor Bychkov,¹⁰ Leonardo Caporali,¹¹ Mariantonietta Capristo,¹¹ Michele Carbonelli,¹¹ Maria L. Cascavilla,⁶ Peter Charbel Issa,^{12,13} Peter Freisinger,¹⁴ Sylvie Gerber,¹⁵ Daniele Ghezzi,^{16,17} Elisabeth Graf,^{1,2} Juliana Heidler,¹⁸ Maja Hempel,¹⁹ Elise Heon,²⁰ Yulya S. Itkis,¹⁰ Elisheva Javasky,^{7,8,9} Josseline Kaplan,¹⁵ Robert Kopajtich,^{1,2} Cornelia Kornblum,²¹ Reka Kovacs-Nagy,^{1,22} Tatiana D. Krylova,¹⁰ Wolfram S. Kunz,²³ Chiara La Morgia,^{11,24} Costanza Lamperti,¹⁶ Christina Ludwig,²⁵ Pedro F. Malacarne,²⁶ Alessandra Maresca,¹¹ Johannes A. Mayr,²⁷ Jana Meisterknecht,¹⁸ Tatiana A. Nevinitsyna,³ Flavia Palombo,¹¹ Ben Pode-Shakked,^{8,28,29} Maria S. Shmelkova,³ Tim M. Strom,¹ Francesca Tagliavini,¹¹ Michal Tzadok,^{8,30} Amelie T. van der Ven,¹⁹ Catherine Vignal-Clermont,³¹ Matias Wagner,^{1,2} Ekaterina Y. Zakharova,¹⁰ Nino V. Zhorzholadze,³ Jean-Michel Rozet,¹⁵ Valerio Carelli,^{11,24} Polina G. Tsygankova,¹⁰ Thomas Klopstock,^{4,32,33} Ilka Wittig,^{16,34} and Holger Prokisch^{1,2}

A homozygous *MRPL24* mutation causes a complex movement disorder and affects the mitoribosome assembly

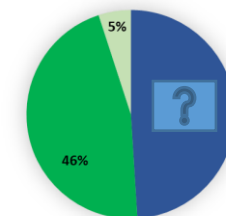
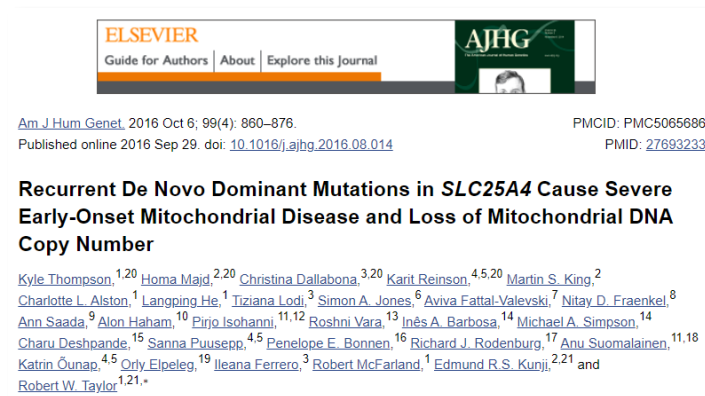
Michela Di Nottia^{a,1}, Maria Marchese^{b,1}, Daniela Verrigni^a, Christian Daniel Mutti^c, Alessandra Torraco^a, Romina Oliva^d, Erika Fernandez-Vizarra^e, Federica Morani^b, Giulia Trani^a, Teresa Rizza^a, Daniele Ghezzi^{a,f}, Anna Ardisson^{g,h}, Claudia Nesti^b, Gessica Vascoⁱ, Massimo Zeviani^c, Michal Minczuk^c, Enrico Bertini^a, Filippo Maria Santorelli^{b,2}, Rosalba Carrozzo^{a,2}

WHOLE EXOME SEQUENCING

Trio WES

- New mode of inheritance/de novo AD

- Incomplete penetrance



Mitochondrion
Volume 51, March 2020, Pages 68-78



LONP1 de novo dominant mutation causes mitochondrial encephalopathy with loss of LONP1 chaperone activity and excessive LONP1 proteolytic activity

Arnaud Besse^a, Daniel Brezavar^a, Jennifer Hanson^a, Austin Larson^b, Penelope E. Bonnen^a

Journal of Medical Genetics

A novel de novo dominant mutation in *ISCU* associated with mitochondrial myopathy

Andrea Legati¹, Aurelio Reyes², Camilla Ceccatelli Berti³, Oliver Stehling⁴, Silvia Marchet¹, Costanza Lamperti¹, Alberto Ferrari³, Alan J Robinson², Ulrich Mühlenhoff⁴, Roland Lill^{4, 5}, Massimo Zeviani², Paola Goffrini³, Daniele Ghezzi¹



Molecular Genetics and Metabolism Reports
Volume 5, December 2015, Pages 51-54



Mitochondrial leukoencephalopathy and complex II deficiency associated with a recessive *SDHB* mutation with reduced penetrance

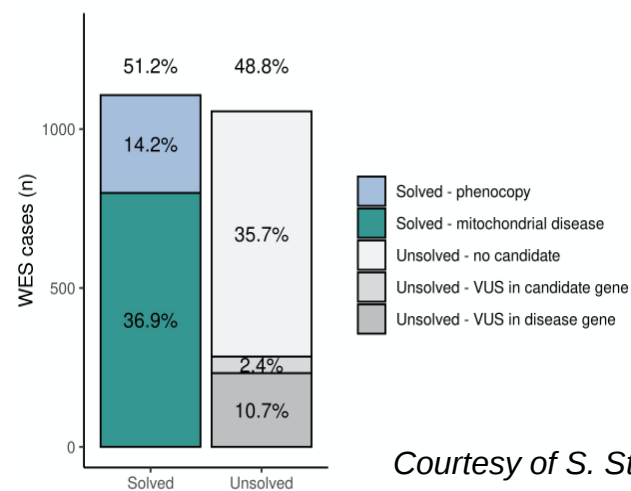
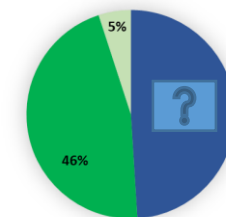
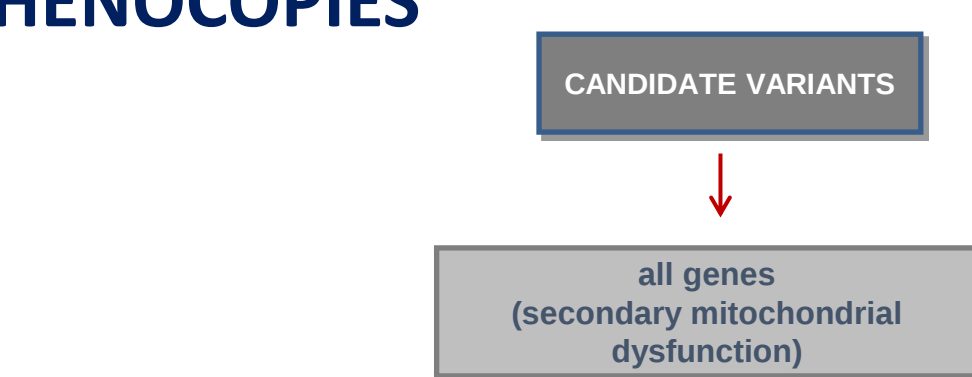
Anna Ardisson^a, Federica Invernizzi^b, Alessia Nasca^b, Isabella Moroni^a, Laura Farina^c, Daniele Ghezzi^a

Impaired complex I repair causes recessive Leber's hereditary optic neuropathy

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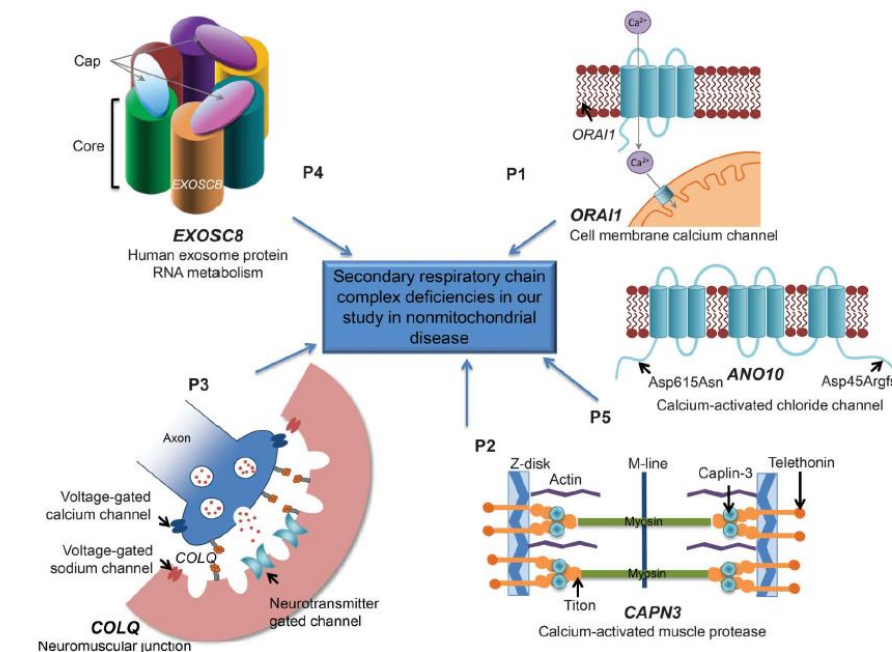
WES: PHENOCOPIES



Respiratory chain deficiency in nonmitochondrial disease

Neurology.org/ng

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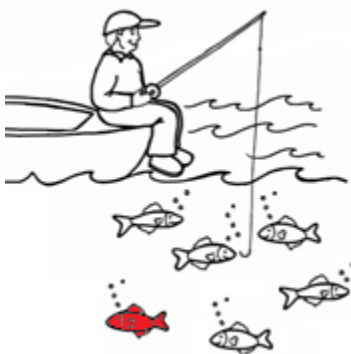




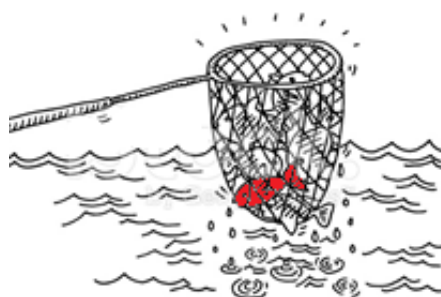
DIFFERENT NGS APPROACHES

Differences in detection power, output size and data interpretation

Sanger: 1-5 genes, it needs high phenotype/genotype concordance



NGS panel: 2-300 genes, more power, disease mutation easy to find if sequenced



NGS Exome: 20,000 genes, very likely to sequence the disease mutation but hard to find



NGS Genome: entire DNA (~30000000000 bp), almost sure to sequence the disease mutation but extremely hard to find





ACKNOWLEDGMENTS

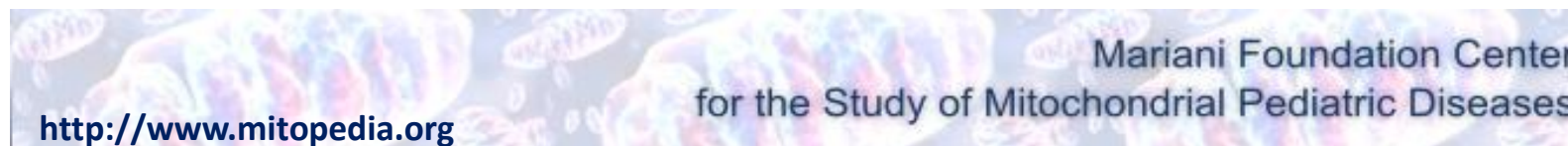
Unit of Medical Genetics and Neurogenetics - Istituto Neurologico Besta

Biologists/biotechnologists...: Andrea Legati, Alessia Nasca, Mirko Baglivo, Rossella Izzo, Chiara Frascarelli, Eleonora Lamantea, Federica Invernizzi, Nadia Zanetti, Silvia Marchet, Manuela Spagnolo, Ivano DiMeo, Dario Brunetti, Celeste Panteghini, Chiara Reale, Barbara Garavaglia, Valeria Tiranti...
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THANK YOU!

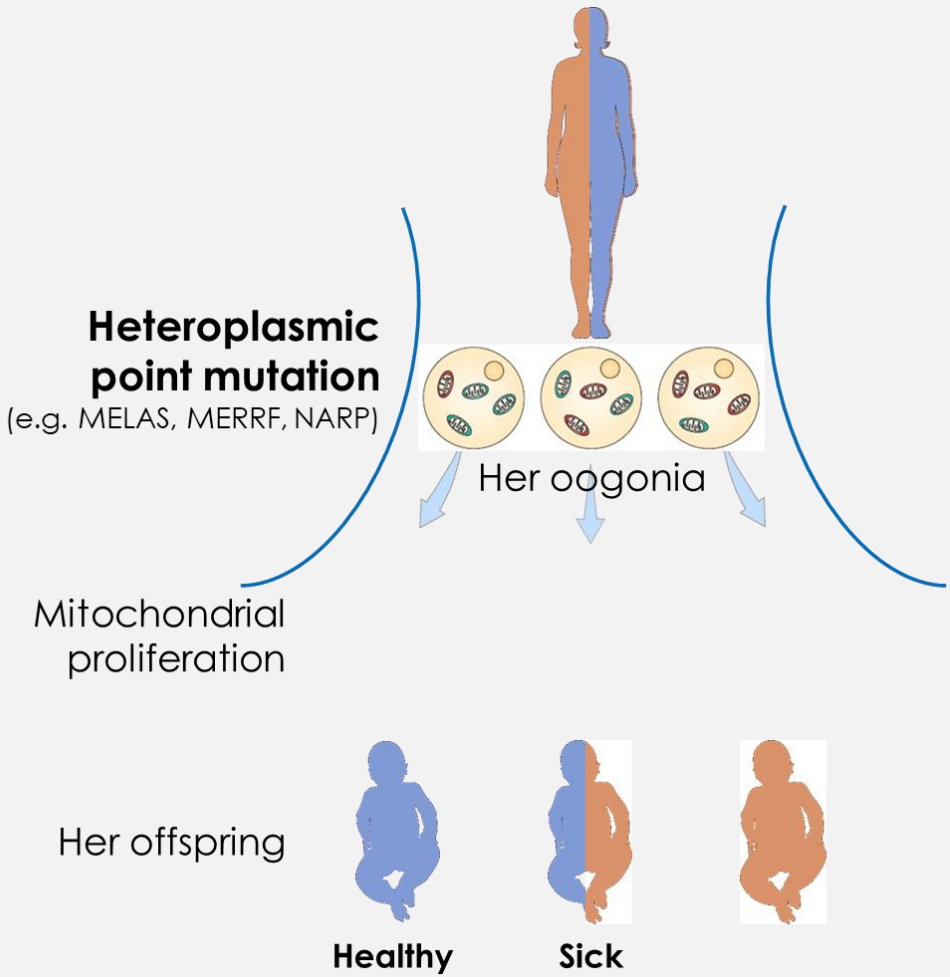


La richiesta di competenza neurologica nel prossimo futuro

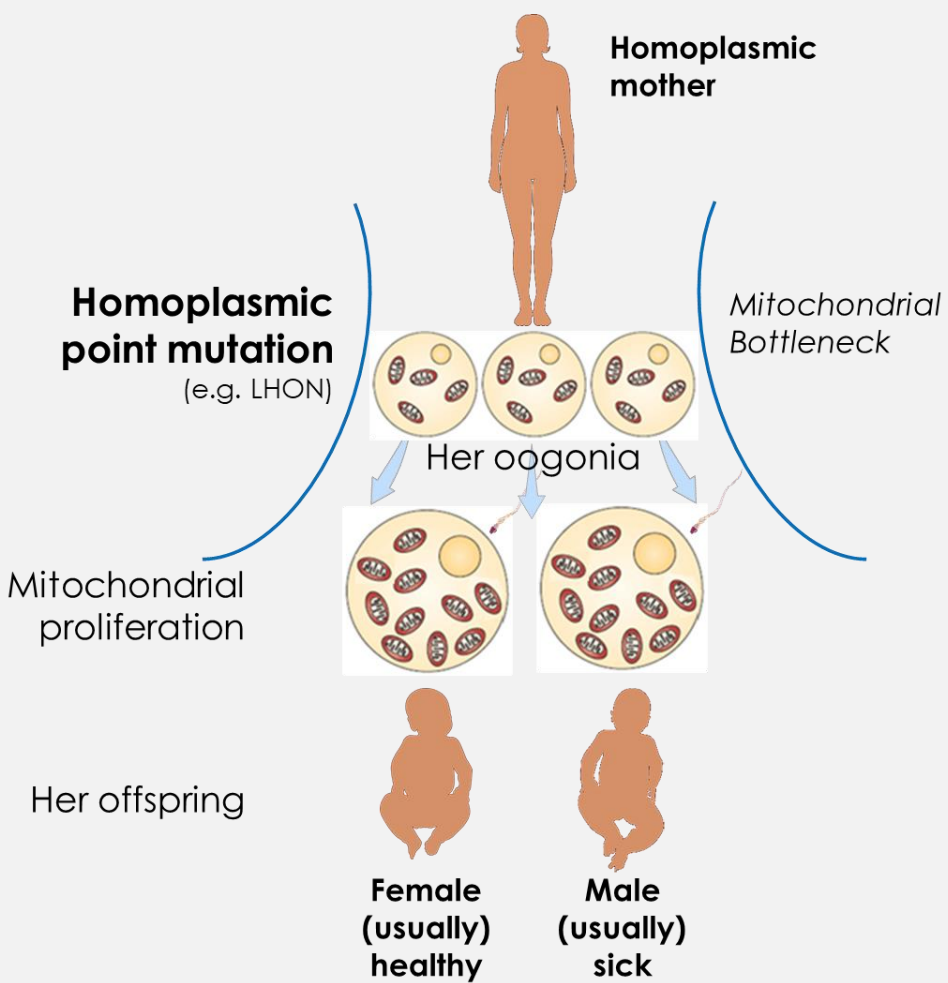
Sesta edizione



Transmission of mtDNA point mutations



Mutation load can change abruptly in the offspring, due to tight bottleneck in maternal oögonia

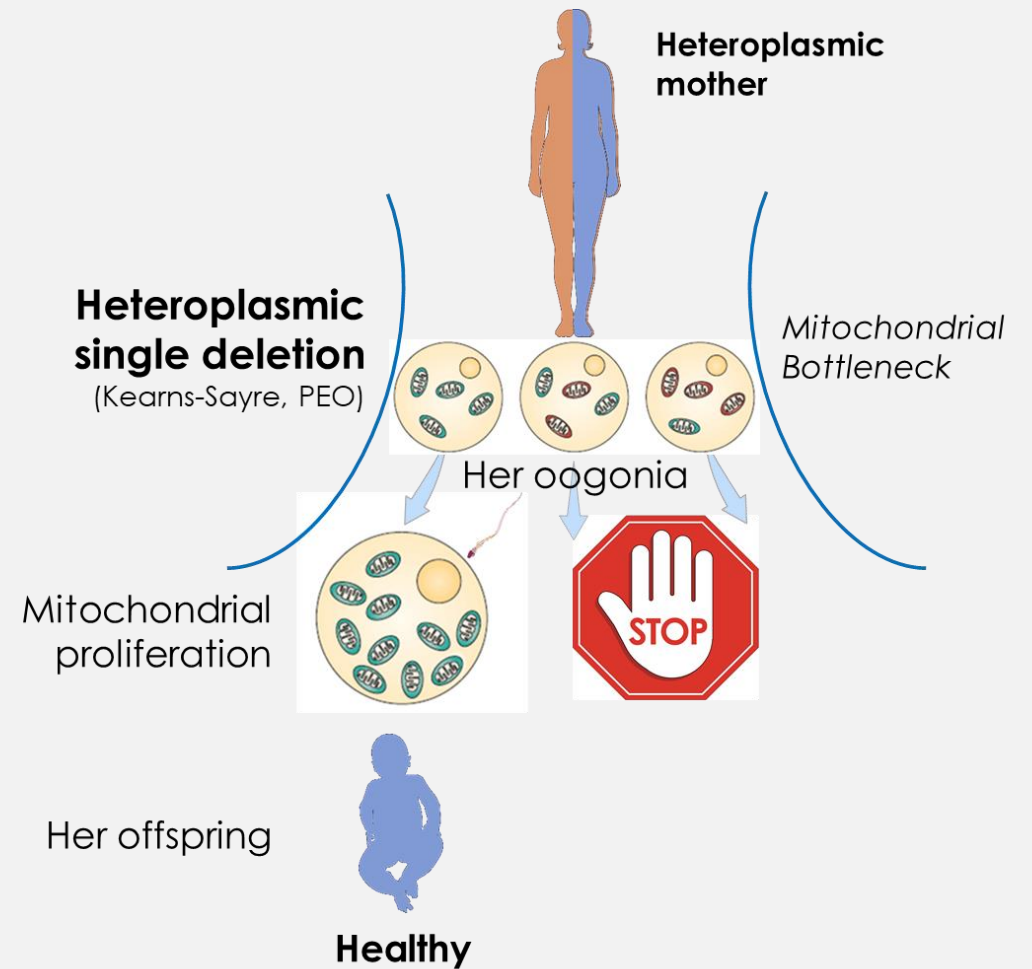


Mutation is necessary but not sufficient to produce the disease phenotype

Transmission of mtDNA single deletions

Defects of Mitochondrial DNA

- Protein synthesis genes (rRNAs, tRNAs)
- Protein-encoding OXPHOS subunit genes
- **Large deletions**



Single deletions are usually NOT transmitted

WES AND WGS TO STUDY MTDNA



WES

- not all commercial kits for WE capture include probes for mtDNA

WES/WGS

- different analysis pipelines do not annotate mtDNA variants

WES/WGS WES/WGS

- On blood DNA heteroplasmy can be low (high depth)
- **NUMTs** (nuclear DNA of mitochondrial origin)

NUMTs: mitochondrial genome regions can be integrated into the nuclear genome

NUMT Confounding Biases Mitochondrial
Heteroplasmy Calls in Favor of the Reference Allele

Molecular Poltergeists: Mitochondrial DNA Copies (*numts*) in
Sequenced Nuclear Genomes

