## Analysis of Genes with Pseudogenes: Balancing what you get, what you don't get, and what you need.

Lora J.H. Bean, PhD, FACMG

**EGL** Genetics





Lora Bean is a laboratory director at EGL, a laboratory that does fee for service testing.

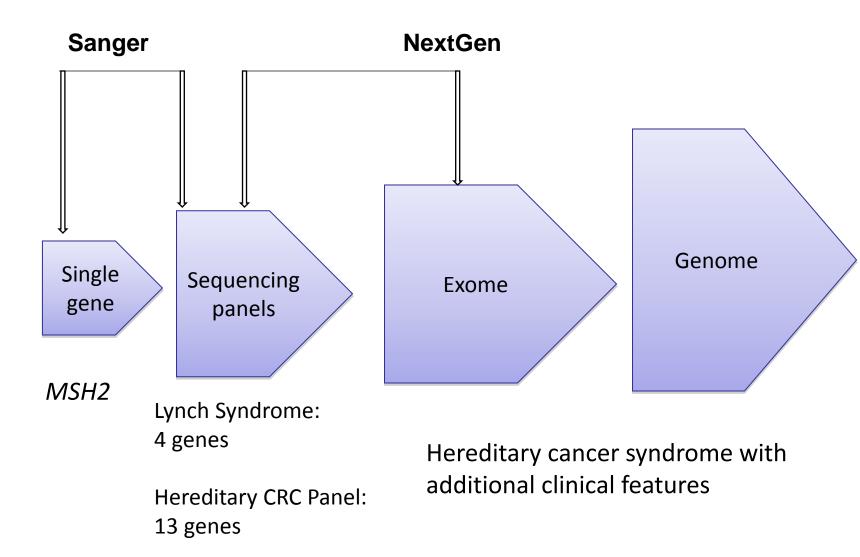


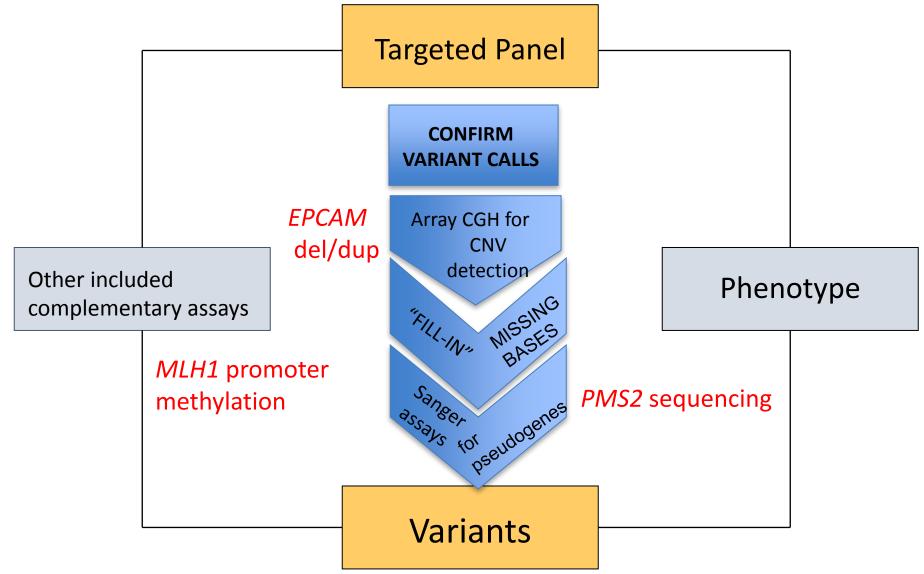
# Objectives

- Present the benefits and limitations of NGS
- Briefly review the nature and origin of pseudogenes
- Discuss the difficulties pseudogenes present for molecular diagnostics
- Present methods to interrogate clinically relevant genes with pseudogenes.



### Choosing the Right Clinical Test





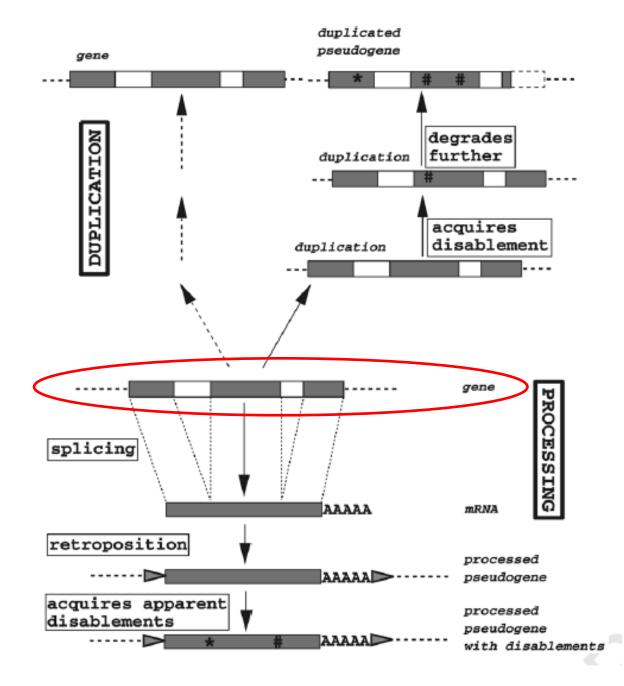
XLID/Autism panel: *FMR1, FMR2,* Biochemical assays Short stature panel: Russell Silver (H19/Lit1 methylation), UPD7 Lynch syndrome: *EPCAM* del/dup, *PMS2* sequencing, *MLH1* promoter methylation

Chin et al, BMC Genetics, 2012, Askree et al, BMC Genetics, 2013, Valencia et al, J Mol Diag, 2013, Valencia et al, PLoS One, 2013

# Genes and Pseudogenes

- Gene
  - Original copy
  - Functional (Active gene)
- Pseudogene
  - Derived from active gene
    - Duplication
    - Retrotransposition (Processed pseudogene)
  - Non-functional





Harrison and Gerstein 2002

https://www.ncbi.nlm.nih.gov/pubmed/12083509

### Techniques Used in Molecular Genetics

Sequencing

- Sanger

- Next-generation sequencing

Deletion / Duplication analysis

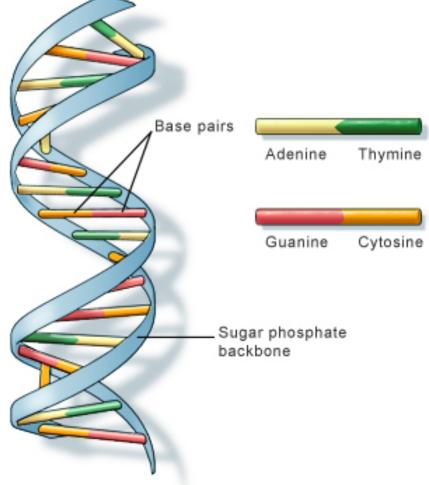
- Arrays

-Southern blotting

- MPLA



### **Properties of DNA**

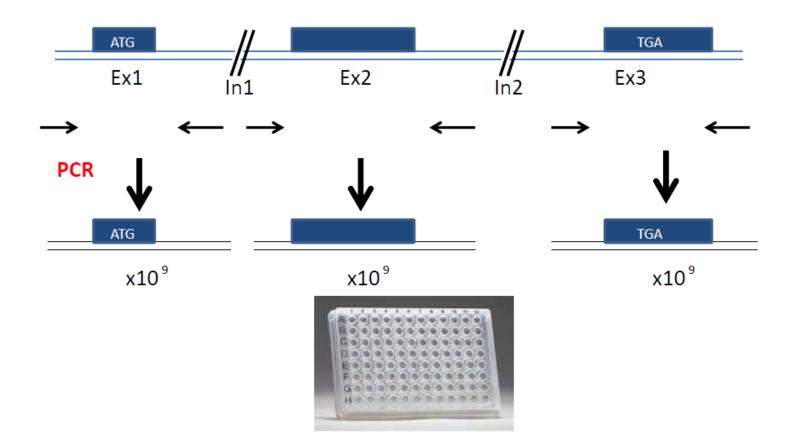


- •Double stranded
- •Denatures with heat
- •Complementary basepairing
- •Primers and enzymes to replicate
- •Large
- •Negatively charged

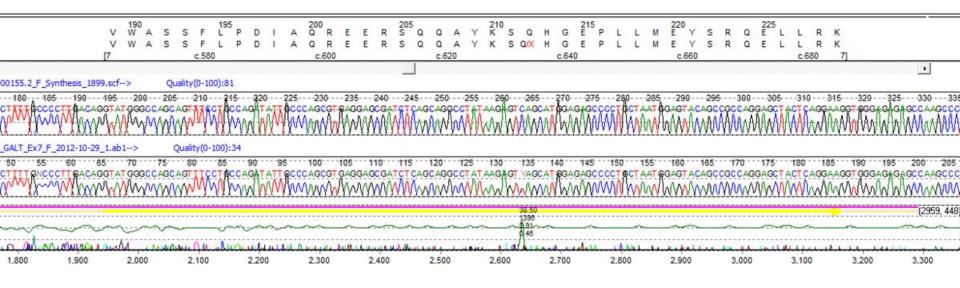
U.S. National Library of Medicine

### Sanger (di-deoxy termination) sequencing

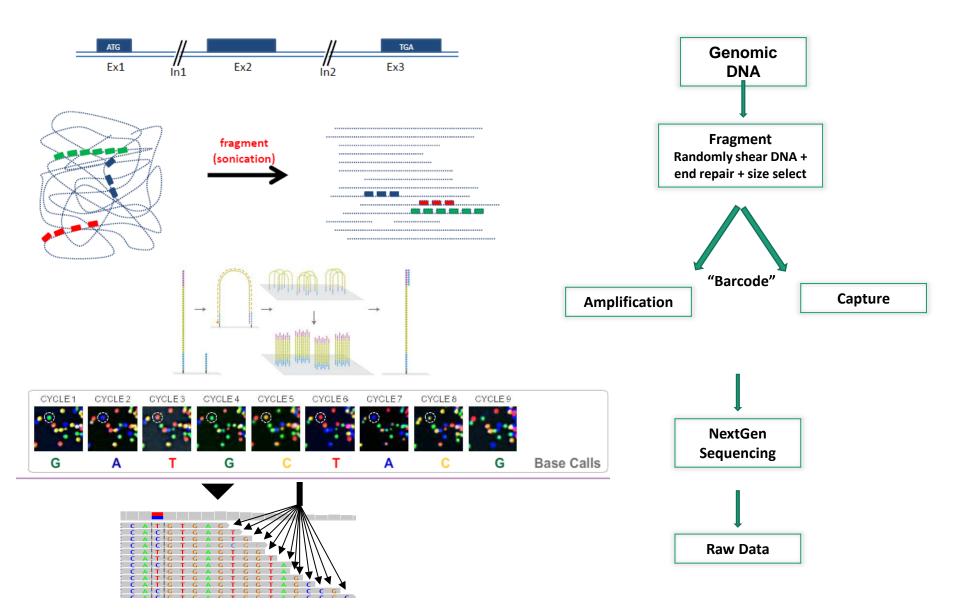
Step 1: PCR amplification of target segments of genome (amplicons)



### Sanger Sequencing



### **Next Generation Sequencing**



### NGS "Reads"

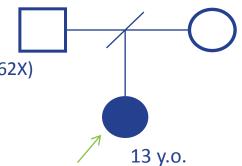
osition	X:31,187,350	X:31,187,400	X:31,187,450	X:31,187,500	X:31,187,550	X:31,187,600	X:31,187,650	X:31,187,700	X:31,187,750	X:31,187,800	X:31,187,850
slation					RNEEELDA	LI RELEGREESEL SI L	DMD 035 1030 1025 1020 I QAP SRP QSLP SD QNL SQ I QAP SRP QSLP SD QNL SQ				
SNP		1				1	1				
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# Pseudogenes in NGS Analysis: A Cautionary Tale



# Exome Sequencing – A suspected case of Schachman-Diamond syndrome plus

- Shwachman-Diamond syndrome
  - Previous testing found only one pathogenic
     variant in the SBDS gene (c.183\_184delTAinsCT (p.K62X)
- Short stature
- Failure to thrive
- Hypothyroidism, vitamin D deficiency
- Pancreatic insufficiency
- Bone mineral density abnormalities, sparse hair, maldentition
- Intestinal lymphangiectasia with protein losing enteropathy
- Neutropenia
- Multiple bacterial infections
- History of lymphopenia with combined cellular and humoral immune deficiency
- Dilated vasculature, collateral artery formation, stenosis of blood vasculature



# RAG1: c.256\_257delAA/c.322C>T (p.R108X)

c.322C>T (p.R108X)

### • c.256\_257delAA: Pathogenic

- Previously reported in the literature in individuals with severe combined immunodeficiency
- Of a type expected to cause disease
- c.322C>T (p.R108X): Pathogenic
  - Previously reported in the literature in individuals with severe combined immunodeficiency
  - Of a type expected to cause disease

### But what about the SBDS variant?

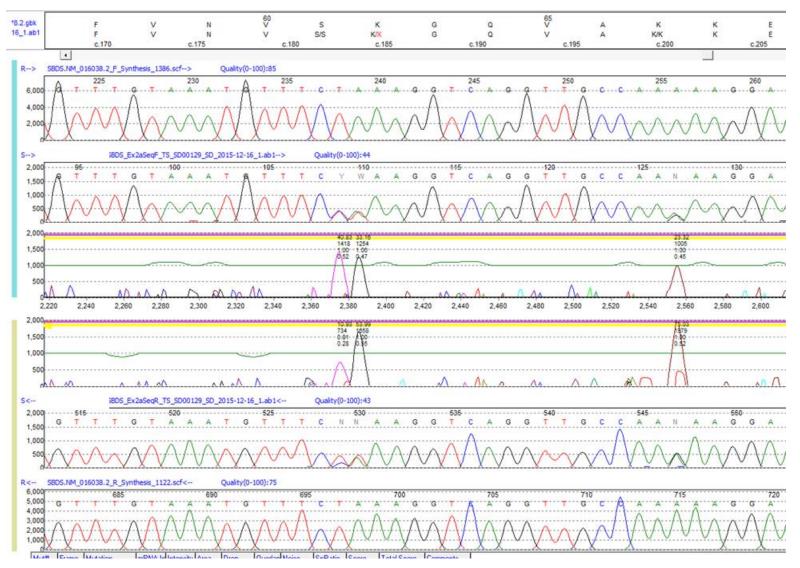
- Previous sequencing of the *SBDS* gene performed at Duke and at GeneDx identified a heterozygous c.183\_184delTAinsCT (p.K62X) pathogenic variant.
- Deletion/duplication analysis for the *SBDS* gene performed at Prevention Genetics was negative.



### NGS reads for pseudogene (SBDSP1)

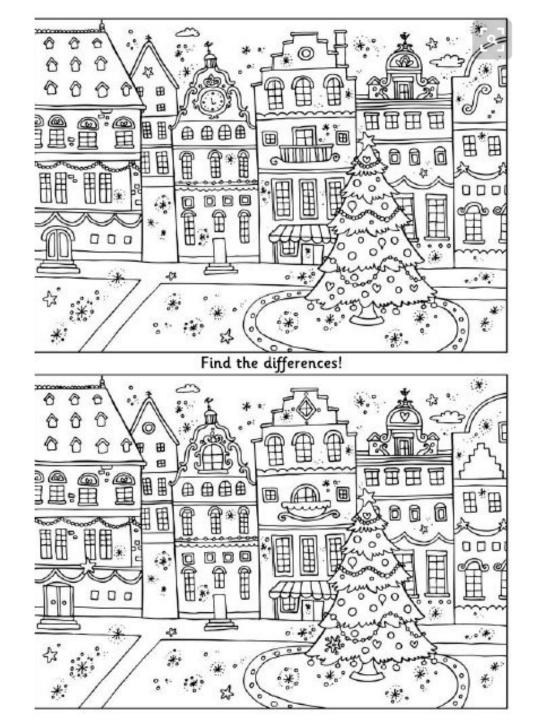
Position			22			33	100	14.4		5 5		6 6	7 7	77	-	8 9	9	10		11 12		1212	1313	15	15 16	1617	1000	0100000000		22 XX X
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### Sanger - exon 2 - SBDS gene



# Sanger Confirmation

Gene	Accession Number	Exon	Nucleotide	AA	Proband	Mother
RAG1	NM_000448.2	2	c.256_257delAA	FS	Heterozygous	Negative
RAG1	NM_000448.2	2	c.322C>CT	p.R108XR	Heterozygous	Heterozygous
SBDS	NM_016038.2	2	c.183_184delTAinsCT	p.K62X	Heterozygous	Negative
SBDS	NM_016038.2	2	c.201A>AG	р.К67КК	Heterozygous	Negative



### Gene

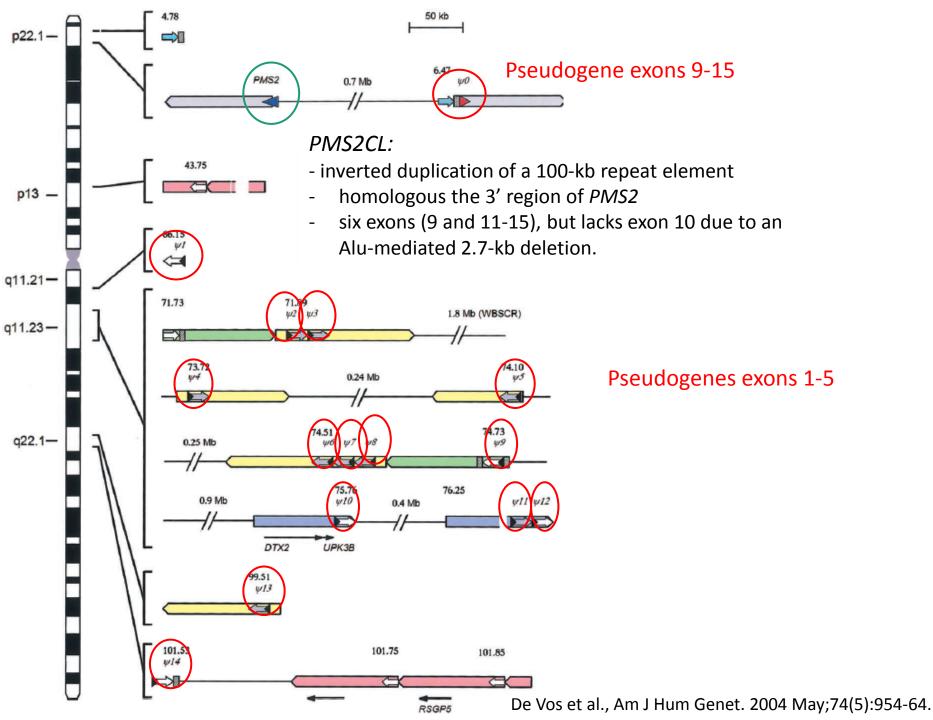
# Pseudogene

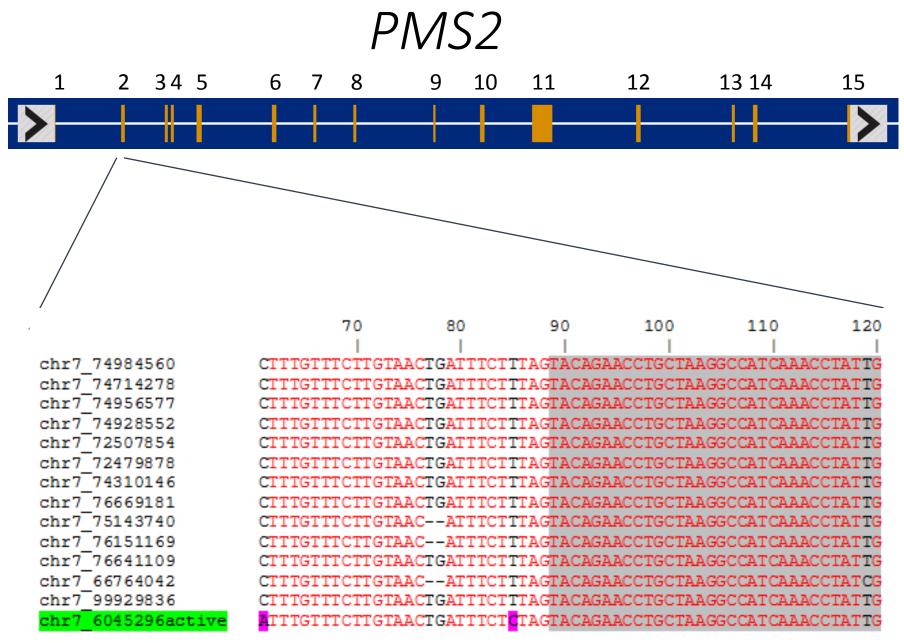




# Lynch syndrome

	Proportion of	Proportion of Pathogenion this Method	c Variants Detectable by
Gene	Lynch Syndrome	Sequence analysis	Gene-targeted deletion/duplication analysis
MLH1	50%	90-95%	5-10%
MSH2	40%	~80%	~20%
MSH6	7%-10%	>95%	Rare
PMS2	<5%	~80%	~20%
EPCAM	~1%-3%	None	All



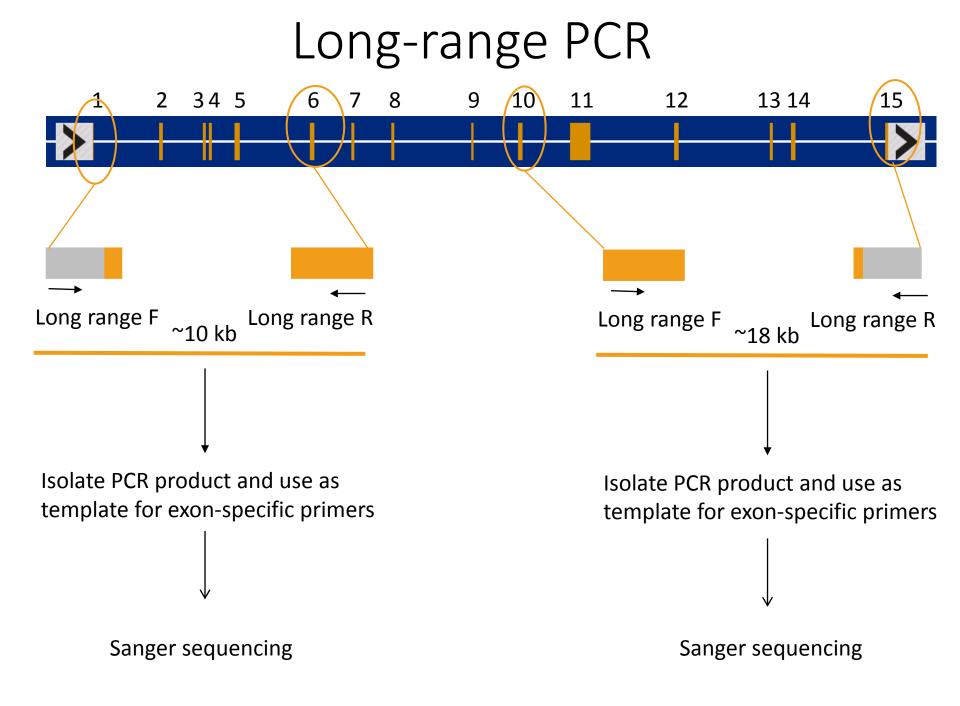


Intron 1 Exon 2

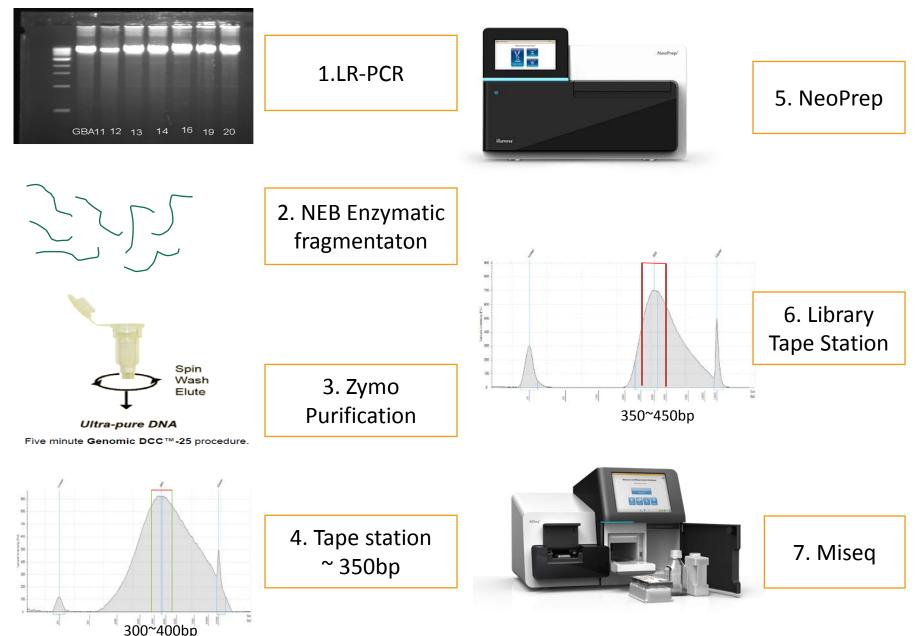
# How can we deal with repetitive regions?

# Sequencing





### LR-PCR\_NeoPrep\_Miseq



# Long-range PCR (Sanger or NGS)

- Benefits
  - Amplify unique sequence
  - Interrogate regions of interest
- Limitations
  - Working with amplified product is a contamination risk
  - Gene conversion events may not be detected
  - Labor intensive

# How can we deal with repetitive regions?

# **Deletion / Duplication**



### Gene Deletion / Duplication Testing

### Quantitative Assay (e.g. Quantitative PCR, MLPA):

Benefits:

Many small regions (exons) can be tested

Accurate

Limitations: Labor intensive

Significant QA/QC investment

Single base pair changes can interfere with probe binding

### Southern blotting:

Benefit:

Technically simple, can be performed in most laboratories Limitations:

High cost, labor intensive

Low resolution: may miss small deletions or duplications

### Array-based technologies:

Benefits:

Highly accurate

High resolution

Limitations:

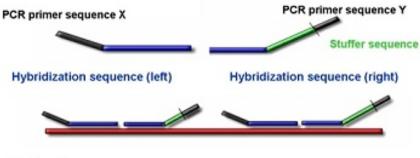
Technically sophisticated and significant platform investment

required

Probes must be in unique regions

### Multiplex Ligation-dependent Probe Amplification (MLPA)

1. Denaturation and Hybridization



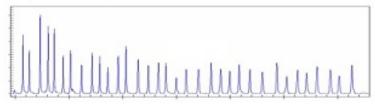
Ligation



3. PCR with universal primers X and Y exponential amplification of ligated probes only



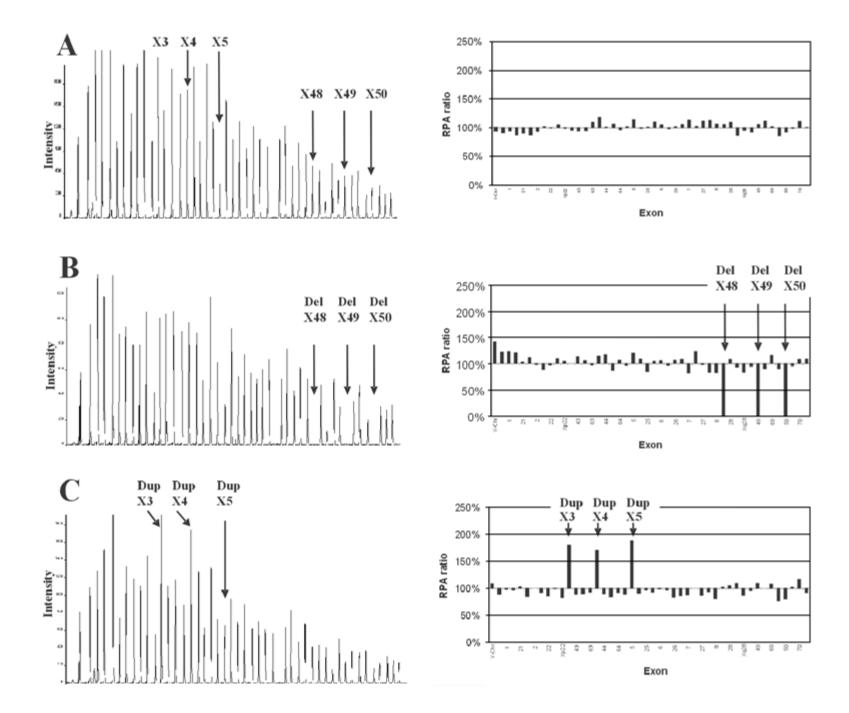
4. Fragment analysis

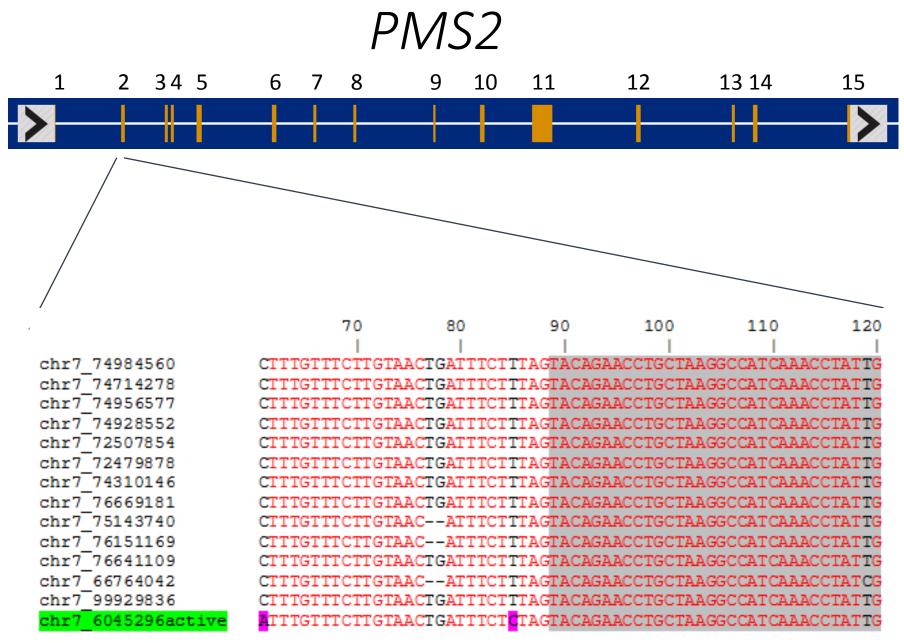


1 – 2 probes per exon

### Capillary electrophoresis

### www.MLPA.com

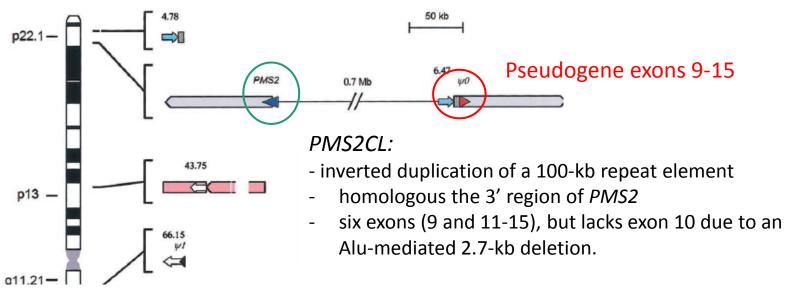


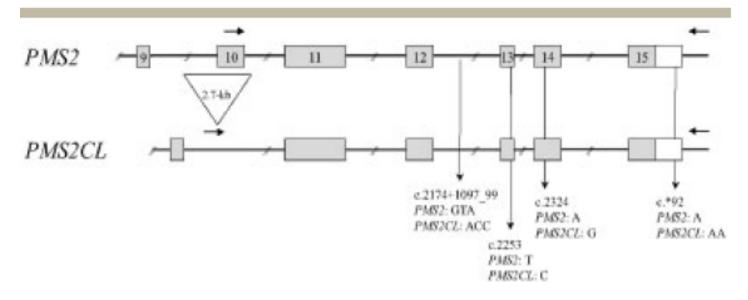


Intron 1 Exon 2

### Table 1. SALSA MLPA P008-C1 PMS2 probemix

Length (nt)	SALSA MLPA probe	Reference	Chromosomal pos PMS2	ition PMS2CL	
64-70-76-82	Q-fragments: DNA quantity; only				1
88-92-96	D-fragments: Low signal of 88 or 9				1
100	X-fragment: Specific for the X chro		indicacco incomposition		1
105	Y-fragment: Specific for the Y chro				1
128	Reference probe 00797-L00093	5q31	<u>-</u>	-	1
133	PMS2 probe 14452-L00900	5451	Exon 11		4
140	PMS2 probe 14448-L16160	l	Exon 9	-	1
146	PMS2 probe 07935-L16148	ł	Exon 1		1
154	Reference probe 02417-L04306	6p21			1
160	Reference probe 08583-L08584	17q23			1
165	PMS2 probe 14453-L16164	1/ 4-2	Exon 11 (SNP)	-	SNP-specific Probes hybridizing
171	PMS2 probe 14453-L16165			Exon 11 (SNP)	to either PMS2 or PMS2CL
177	Reference probe 04359-L03779	7p13			<b>1</b>
184	PMS2 probe 01176-L16620	/	Exon 2		
190	PMS2 probe 15768-L18167	1	Exon 14	Exon 14	Universal Probes hybridizing
196	Reference probe 07510-L07172	14q24			to both PMS2 and PMS2CL
202	PMS2 probe 14458-L16176	19451	Exon 14 (SNP)		41
202	PMS2 probe 14458-L16177	ł		Exon 14 (SNP)	SNP-specific Probes hybridizing
214	PMS2 probe 14456-L16511	ł	Exon 13 (SNP)		to either PMS2 or PMS2CL
220	PMS2 probe 14456-L16512	l		Exon 13 (SNP)	
226	Reference probe 07083-L06712	11p13			1 <mark>-</mark>
232	PMS2 probe 14445-L16154	11910	Exon 5		1
238	PMS2 probe 14455-L16168	1	Intron 12 (SNP)	-	SNP-specific Probes hybridizing
244	PMS2 probe 14455-L16169	1		Intron 12 (SNP)	to either PMS2 or PMS2CL
250	PMS2 probe 01180-L16157	1	Exon 6		
261	PMS2 probe 15767-L17448		Exon 13	Exon 13	Universal Probes hybridizing
268	Reference probe 19040-L09299	3q29			to both PMS2 and PMS2CL
276	PMS2 probe 01181-L16158		Exon 7	-	1
283	PMS2 probe 15769-L17786		Exon 12	Exon 12	Universal Probes hybridizing
292	Reference probe 11087-L11770	2p24			to both PMS2 and PMS2CL
299	PMS2 probe 01182-L16159		Exon 8	-	
310 *	PMS2 probe 19910-L26895		Exon 3	-	1
319	PMS2 probe 01184-L00745		Exon 10		1
328	Reference probe 08543-L08544	3q24			1
339	PMS2 probe 07934-L16147		Exon 1	_	
349	PMS2 probe 14460-L04046		Exon 15 (SNP)	-	SNP-specific Probes hybridizing
356	PMS2 probe 14460-L16180		i i	Exon 15 (SNP)	to either PMS2 or PMS2CL
364	PMS2 probe 14451-L16163		Exon 11		1
373	Reference probe 02528-L01959	17q11			
382	PMS2 probe 15293-L17051		Exon 14	Exon 14	Universal Probes hybridizing
390 *	PMS2 probe 19915-L26898		Exon 3		to both PMS2 and PMS2CL
400	PMS2 probe 14441-L16150		Exon 2		
409	PMS2 probe 01189-L00750		Exon 15	Exon 15	Universal Probes hybridizing
418 *	PMS2 probe 19906-L26893		Exon 4		to both PMS2 and PMS2CL
427	Reference probe 06029-L05485	11p13			
436	PMS2 probe 14447-L16623		Exon 6	_	
445	PMS2 probe 14449-L16622		Exon 9		
454	PMS2 probe 14446-L16621		Exon 5	-	
463	PMS2 probe 14450-L16162		Exon 10		]
472	Reference probe 15978-L18133	8q12			]
483	Reference probe 08480-L08491	10p12	-	-	
-			-	•	-





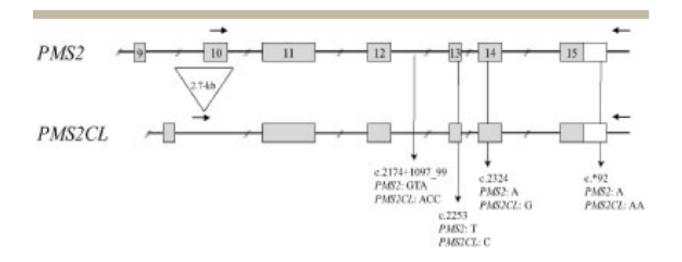
### *PMS2* copy number by MLPA

- Reference:
  - 2 copies PMS2
  - 2 copies PMS2CL
- *PMS2-* and *PMS2CL-*specific probes relative ratio:
  - 0= 0 copy
  - 0.5= 1 copy
  - 1= 2 copies
  - 1.5= 3 copies
  - 2= 4 copies

- The reference has two copies of each
  - Compare patient to reference!
- *PMS2-* and *PMS2CL* universal probes relative ratio:
  - 0= 0 copy
  - 0.25= 1 copy
  - 0.5= 2 copies
  - 0.75= 3 copies
  - 1= 4 copies
  - 1.25= 5 copies
  - 1.5= 6 copies.
- Ten SNP-specific probes targeting exon 11-15 detect a polymorphic sequence: copy numbers for these probes in normal individuals can be 0, 1, 2, 3 or 4. The combined copy number of the two probes of one pair of SNP probes should be 4 in normal individuals.

### **LR-PCR** Sequencing

- Recombination with crossover and/or gene-conversion between PMS2 and PMS2CL:
  - hybrid *PMS2* alleles that contain *PMS2CL-derived* sequences
  - hybrid *PMS2CL* alleles with sequences derived from *PMS2*.
- *PMS2* or *PMS2CL* long-range PCR to amplify exons 11-15



		MLPA ratios		Possible §	genotypes <sup>d</sup>	Corresponding s	sequencing results <sup>d</sup>		
	Both <sup>a</sup>	PSV-G <sup>b</sup>	PSV-P <sup>c</sup>	PMS2	PMS2CL	PMS2	PMS2CL	PMS2 deletion	
A1	1	1	1	GG	PP			No	
A2				GP	GP			No	
A3				PP	GG			No	
A4	1	0.5	1.5	GP	РР	No deletions pre	sent in the sample;	No	
A5				РР	GP	sequencing	g not necessary	No	
A6	1	1.5	0.5	GG	GP			No	
A7				GP	GG			No	
A8	1	0	2	РР	РР			No	
A9	1	2	0	GG	GG			No	

Probes complimentary to the *PMS2* reference sequence are designated as "PSV-G"

Probes complimentary to the *PMS2CL* reference sequence are designated as "PSV-P"

Probes that bind both the gene and pseudogene are designated as "Both"

#### "G" corresponding to the PMS2 reference sequence

#### "P" corresponding to the *PMS2CL* reference sequence

**BUT** - Recombination with crossover and/or gene-conversion between *PMS2* and *PMS2CL* produces hybrid *PMS2* alleles that contain *PMS2CL-derived* sequences as well as hybrid *PMS2CL* alleles with sequences derived from *PMS2* 

	equencing results <sup>d</sup>	Corresponding s	genotypes <sup>d</sup>	Possible g		MLPA ratios		
PMS2 deletion	PMS2CL	PMS2	PMS2CL	PMS2	PSV-P <sup>c</sup>	PSV-G <sup>b</sup>	Both <sup>a</sup>	
Yes	Р	G	PP	G_	1	0.5	0.75	
No	Р	GP	P_	GP				
No	G	Р	G_	PP				
Yes	GP	Р	GP	P_				
No	Р	G	P_	GG	0.5	1	0.75	
Yes	GP	G	GP	G_				
No	G	GP	G_	GP				
Yes	G	Р	GG	P_				

Probes complimentary to the *PMS2* reference sequence are designated as "PSV-G"

Probes complimentary to the *PMS2CL* reference sequence are designated as "PSV-P"

Probes that bind both the gene and pseudogene are designated as "Both"

"G" corresponding to the *PMS2* reference sequence

"P" corresponding to the PMS2CL reference sequence

**BUT** - Recombination with crossover and/or gene-conversion

between *PMS2* and *PMS2CL* produces hybrid *PMS2* alleles that contain *PMS2CL-derived* sequences as well as hybrid *PMS2CL* alleles with sequences derived from *PMS2* 

	MLPA ratios			Possible §	genotypes <sup>d</sup>	Corresponding s	equencing results <sup>d</sup>			
	Both <sup>a</sup>	PSV-G <sup>b</sup>	PSV-P <sup>c</sup>	PMS2	PMS2CL	PMS2	PMS2CL	PMS2 deletion		
B9 B10	0.75	0	1.5	PP P_	P_ PP	Cannot differentiate	by sequencing	Family studies required to		
B11 B12	0.75	1.5	0	GG G_	G_ GG	Cannot differentiate	by sequencing	determine whether deletion is in <i>PMS2</i> or <i>PMS2CL</i>		

Probes complimentary to the *PMS2* reference sequence are designated as "PSV-G"

Probes complimentary to the *PMS2CL* reference sequence are designated as "PSV-P"

Probes that bind both the gene and pseudogene are designated as "Both"

"G" corresponding to the *PMS2* reference sequence

"P" corresponding to the *PMS2CL* reference sequence

**BUT** - Recombination with crossover and/or gene-conversion

between *PMS2* and *PMS2CL* produces hybrid *PMS2* alleles that contain *PMS2CL-derived* sequences as well as hybrid *PMS2CL* alleles with sequences derived from *PMS2* 

Table 2.	Algorithm for	Determining	PMS2 Deletions in	Exons 12–15
	Algoritanii ioi	Determining	THICL DETECTORS IN	EXCHOLE 1

_		MLPA ratios		Possible §	genotypes <sup>d</sup>	Corresponding s	equencing results <sup>d</sup>			
]	Both <sup>a</sup>	PSV-G <sup>b</sup>	PSV-P <sup>c</sup>	PMS2	PMS2CL	PMS2	PMS2CL	PMS2 deletion		
A1	1	1	1	GG	РР			No		
2				GP	GP			No		
3				РР	GG			No		
4	1	0.5	1.5	GP	РР	No deletions pres	sent in the sample;	No		
;				РР	GP	sequencing	g not necessary	No		
6	1	1.5	0.5	GG	GP			No		
7				GP	GG			No		
8	1	0	2	РР	РР			No		
.9	1	2	0	GG	GG			No		
1	0.75	0.5	1	G_	РР	G	Р	Yes		
2				GP	P_	GP	Р	No		
3				PP	G_	Р	G	No		
4				P_	GP	Р	GP	Yes		
5	0.75	1	0.5	GG	Р_	G	Р	No		
5				G_	GP	G	GP	Yes		
7				GP	G_	GP	G	No		
3				P_	GG	Р	G	Yes		
)	0.75	0	1.5	РР	P_	Cannot differentiate	by sequencing			
10				P_	PP			Family studies required to determine whether deletior		
11	0.75	1.5	0	GG	G_	Cannot differentiate	by sequencing	is in PMS2 or PMS2CL		
12			Ū.	G_	GG		oy adjaming			
-	0.5	0.5	0.5	G_	P_	G	Р	Yes		
2				GP	_	GP	No amplification	No		
3				P_	G_	Р	G	Yes		
4				_	GP	No amplification	GP	Yes (homozygous)		
5	0.5	0	1	РР	_	Р	No amplification	No		
6				P_	P_	Р	Р	Yes		
7				_	РР	No amplification	Р	Yes (homozygous)		
8	0.5	1	0	GG		G	No amplification	No		
9				G_	G_	G	G	Yes		
10				_	GG	No amplification	G	Yes (homozygous)		
	0.25	0	0.5	P_	_	Р	No amplification	Yes		
2				_		No amplification	Р	Yes (homozygous)		
3	0.25	0.5	0	G_	_	G	No amplification	Yes		
4				_	 G	No amplification	G	Yes (homozygous)		
-	0	0	0	_	_	No amplification	No amplification	Yes (homozygous)		
						-	-			

Probes complimentary to the *PMS2* reference sequence are designated as "PSV-G"

Probes complimentary to the *PMS2CL* reference sequence are designated as "PSV-P"

Probes that bind both the gene and pseudogene are designated as "Both"

"G" corresponding to the *PMS2* reference sequence

"P" corresponding to the *PMS2CL* reference sequence

Sequencing cannot resolve the location of a deletion if all the alleles harbor the same sequence at each PSV site.

Vaughn et al., 2011

### From a clinical laboratory....

PMS2/PMS2CL

SUMMARY

Gross Deletion:

EX13\_14del (see COMMENT)

### **INCONCLUSIVE: Variants of Unknown Significance Detected**

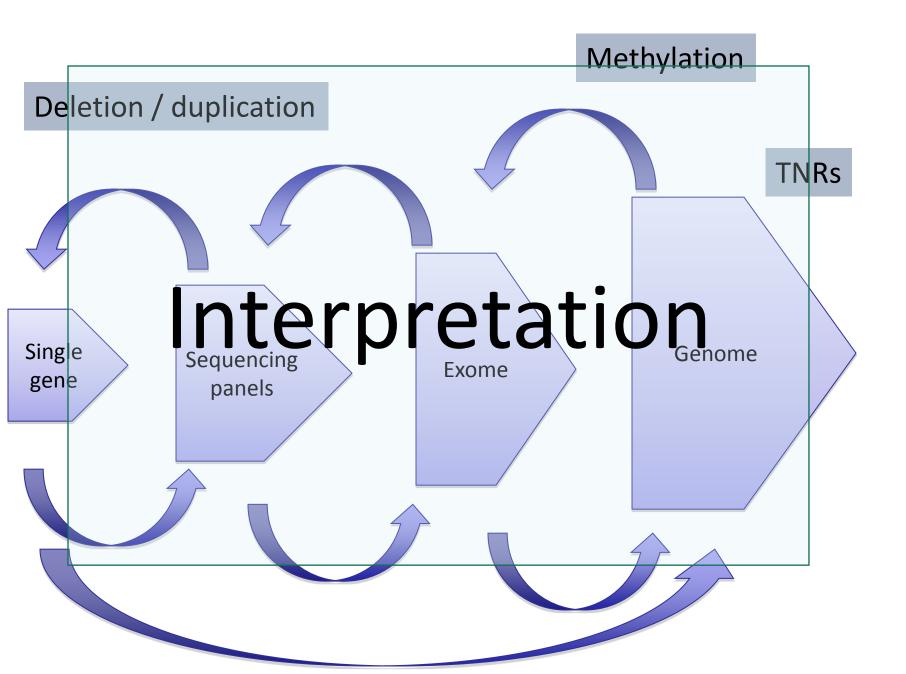
COMMENT: Deletion/duplication analysis of the 3' region of the PMS2 gene is complicated by significant homology with the PMS2CL pseudogene and frequent gene conversion events. Double stranded sequencing of exons 13 and 14 of the pseudogene PMS2CL can sometimes be performed to help clarify an individual's result. However, based on the MLPA data, this analysis is not expected to be informative for this patient, and for this reason, it was not performed. Therefore, the possibility that the EX13\_14del gross deletion is in the PMS2CL pseudogene cannot be ruled out.

			MLPA ratios			Sequenc	e results <sup>f,g</sup>	Corresponding rows from	
Patient no.	Exon	PMS2-specific <sup>a,b</sup>	Both <sup>c,b</sup>	PSV-G <sup>d</sup>	PSV-P <sup>e</sup>	PMS2	PMS2CL	algorithm (Table 2)	Result
1	9	0.471, 0.518							PMS2 deletion, exons 9-15
	10	0.514, 0.536							
	11	0.530, 0.529							
	12		0.776	0.494	1.004	G	Р	B1	
	13		0.797	0.495	0.971	G	Р	B1	
	14		0.798, 0.752	0.476	0.961	G	Р	B1	
	15		0.737	0.541	0.991	G	Р	B1	

	Proportion of	Proportion of Patho Detectable by this I	
Gene	Lynch Syndrome	Sequence analysis	Gene-targeted deletion/duplication analysis
MLH1	50%	90-95%	5-10%
MSH2	40%	~80%	~20%
MSH6	7%-10%	>95%	Rare
PMS2	<5%	~80%	~20%
EPCAM	~1%-3%	None	All

# Is it worth the limitations?

#### Table 3. Patient ResultsVaughn et al., 2011



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