

PROPEL 101: Molecular mechanisms

10/26/23

Kristen J. Wade, PhD

UCSF Postdoc, Neurology

Laboratory of Jill Hollenbach

kristen.wade@ucsf.edu

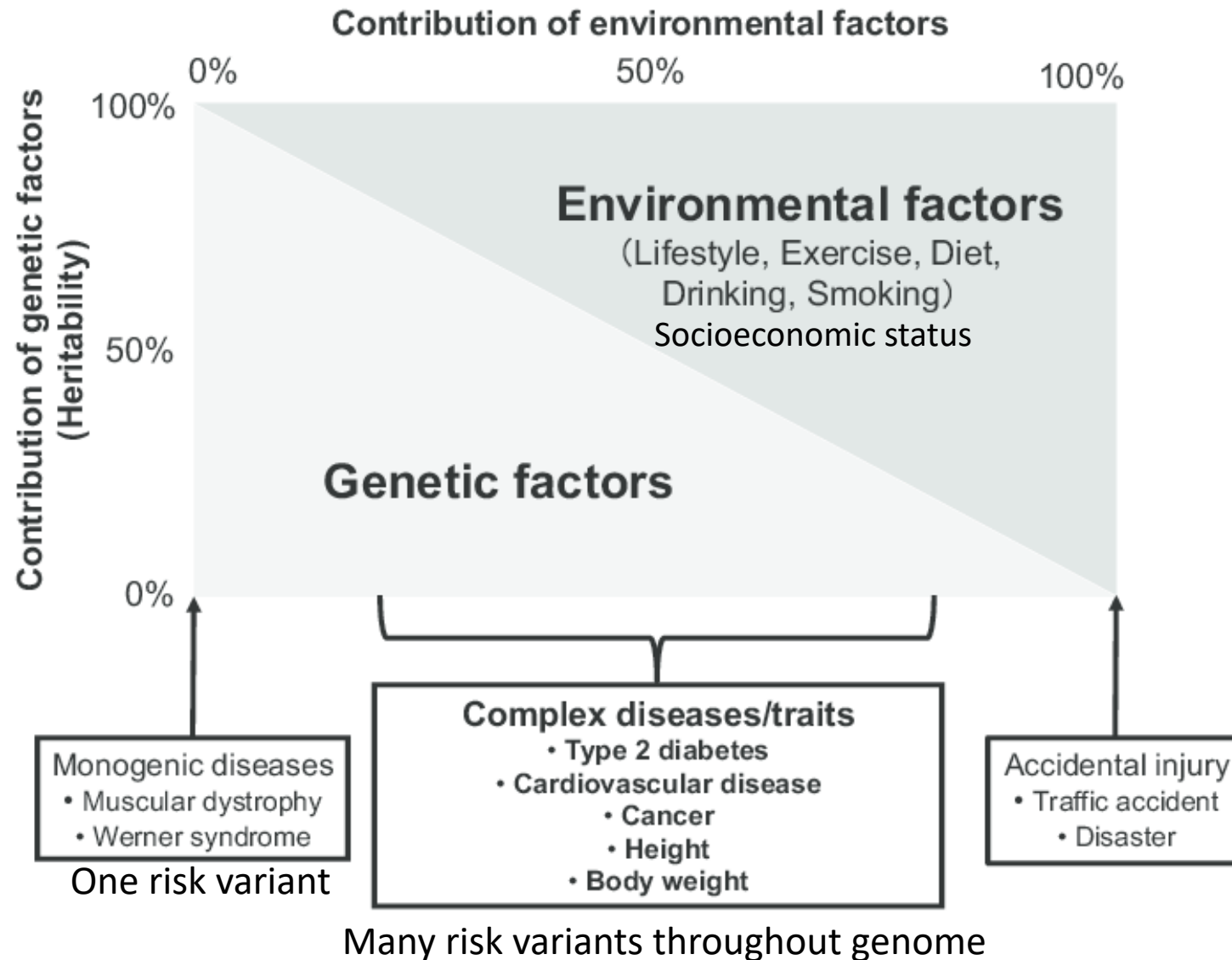
Recommendations for approaching the reading materials

- For the Supplemental material:
 - Not about memorizing/learning ALL the different mutations, etc.
 - Meant to help appreciate the scope of just how many ways genetic variation, acting through RNA and protein functionally, can contribute to disease
 - Pick a couple sections that sound most interesting and do a deep dive on those. But don't worry about absorbing the details of all of it
- For the journal club
 - Primary goal to translate the 6 major mechanism stages we're about to discuss to describe the specific approach/details of the paper

Why do we perform scientific research?

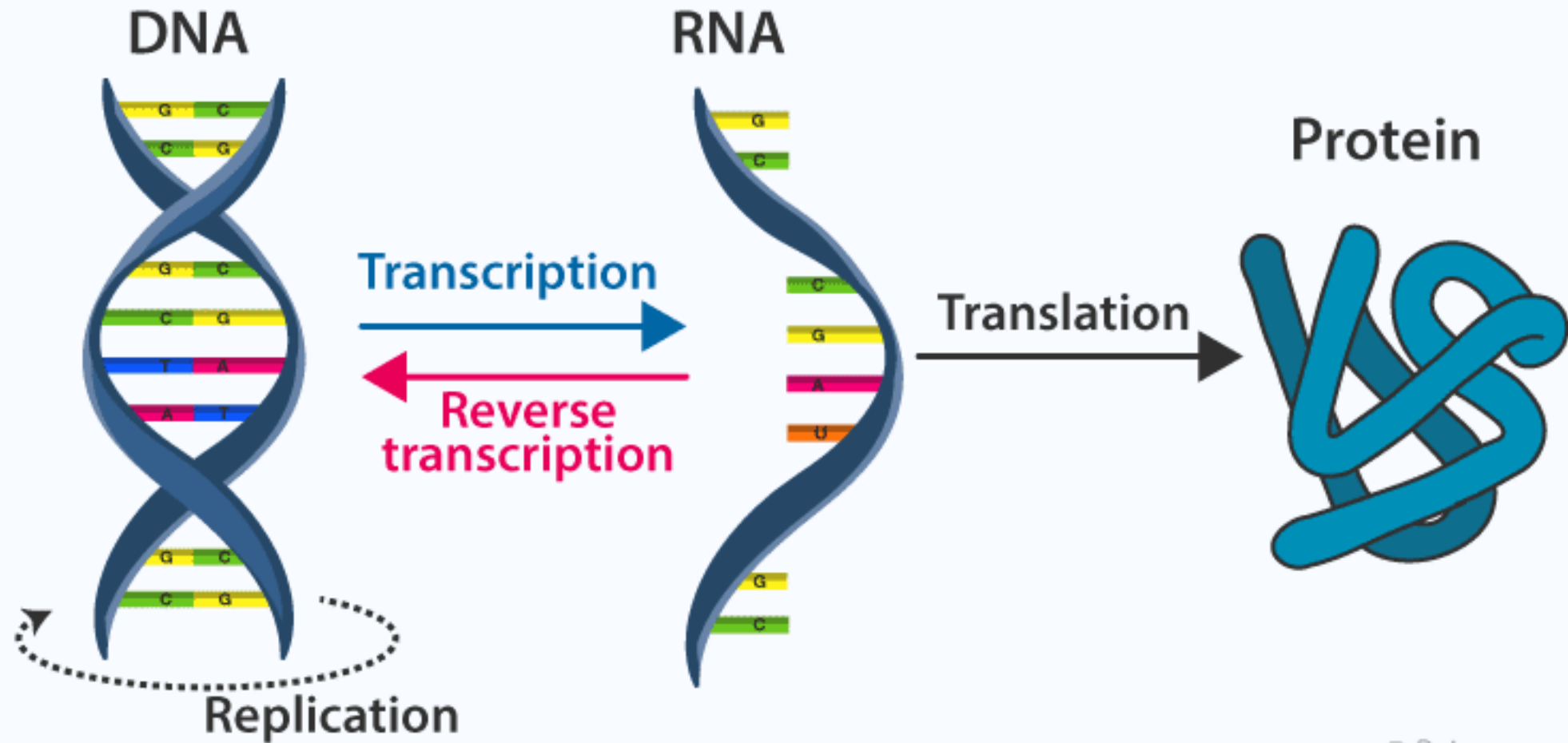
- In your previous two sessions, you've learned about some tools we have at our disposal to perform research.
- But why do we do it?

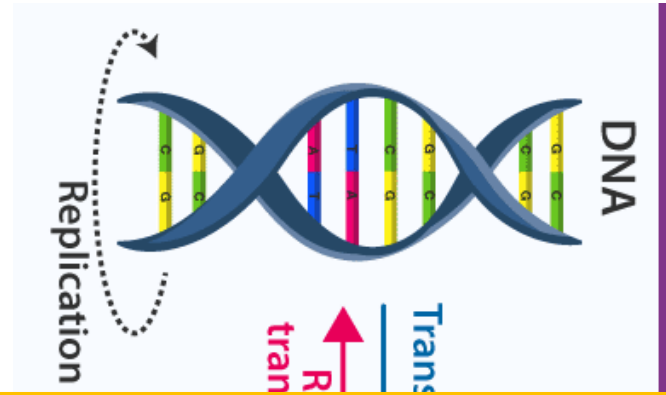
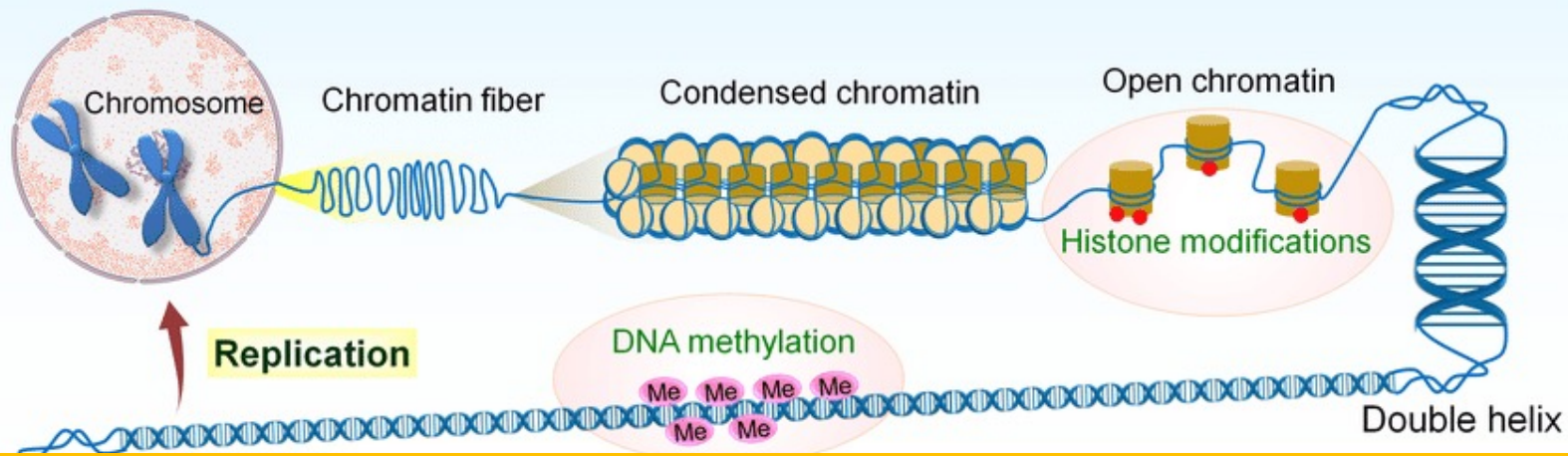
What is disease?



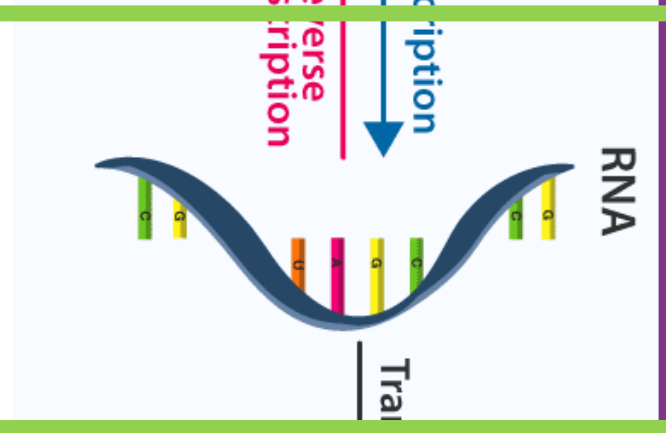
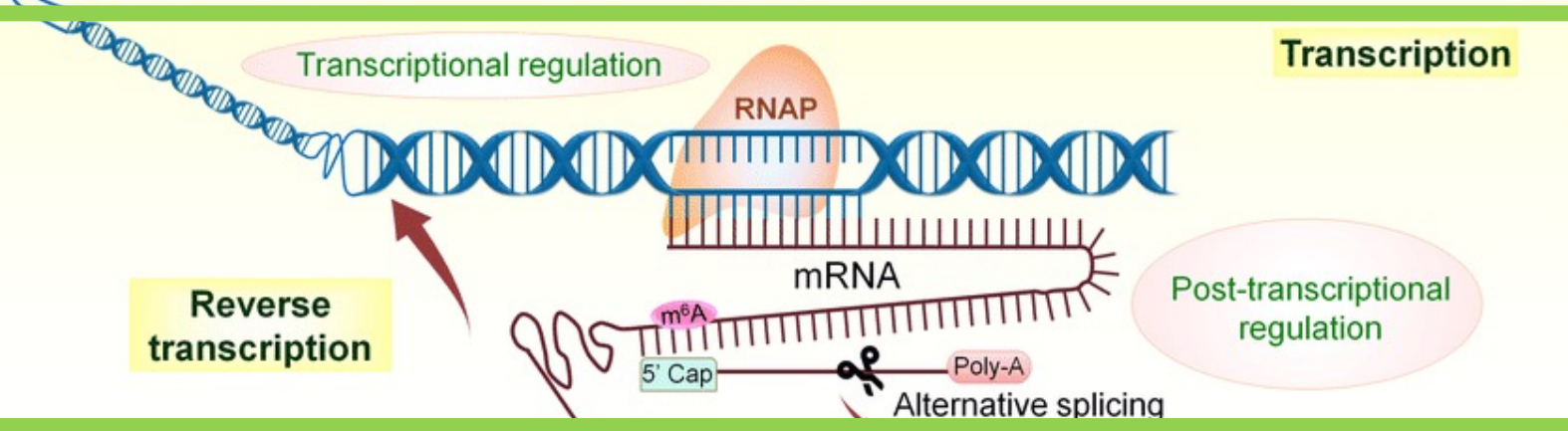
What is a “molecular mechanism”?

CENTRAL DOGMA : DNA TO RNA TO PROTEIN

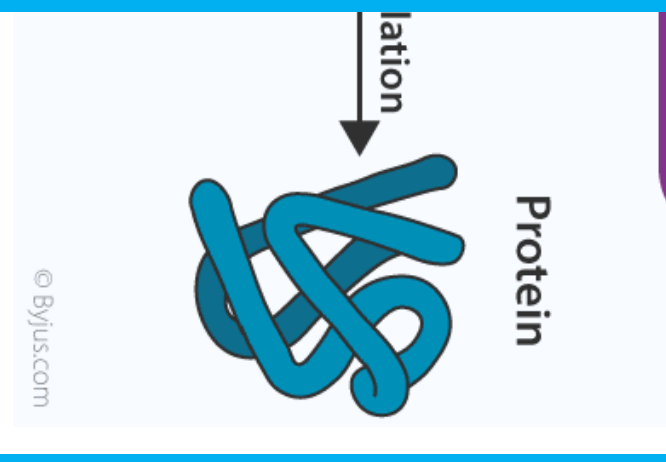
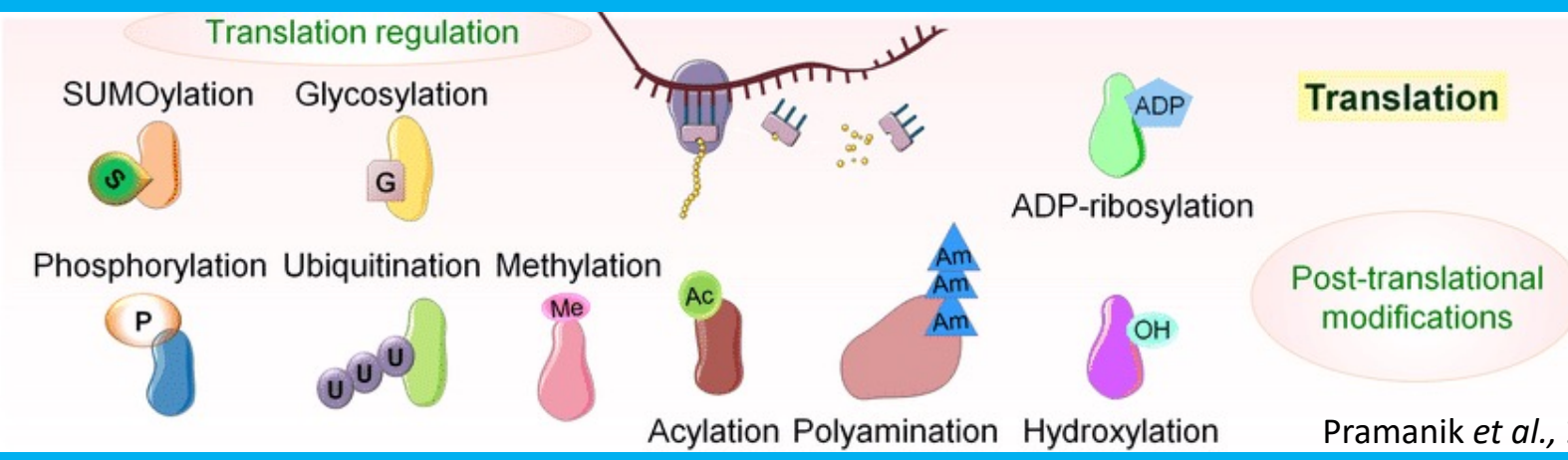




CENTRAL DOGM



: DNA TO RNA TO



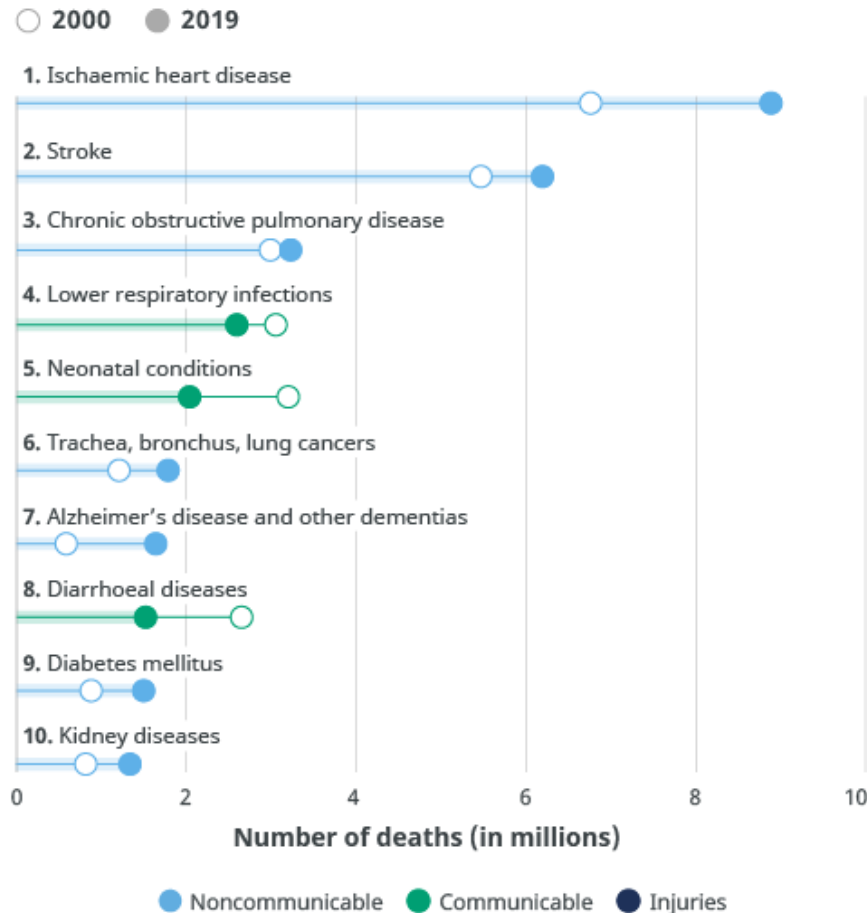
PROTEIN

How to establish a convincing molecular mechanism

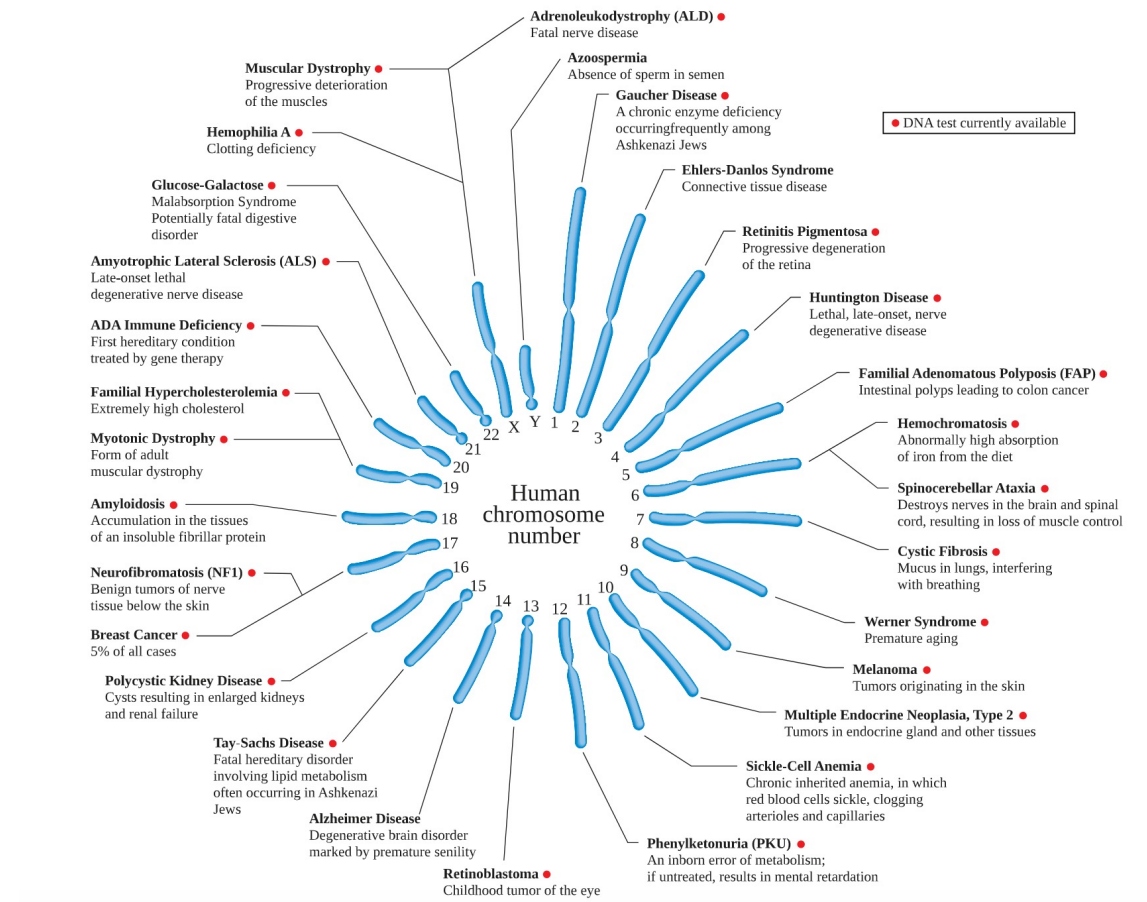
- *The journal club paper follows this construct, so if you can isolate the different stages of their analysis and associate them with each of these steps, it will make understanding and presenting it a little easier*

1. Choose your disease/phenotype of interest

Leading causes of death globally

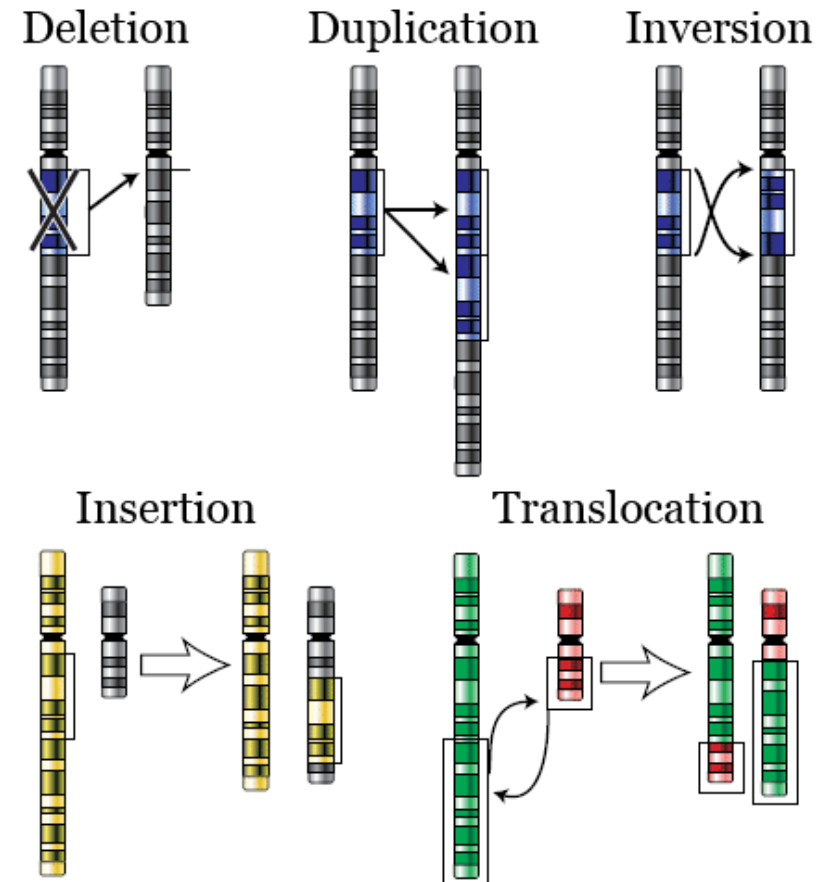
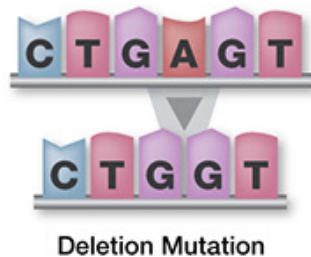
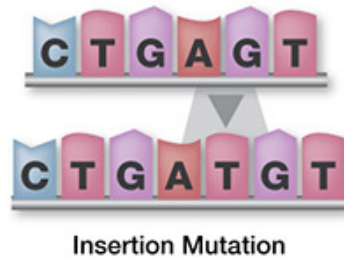
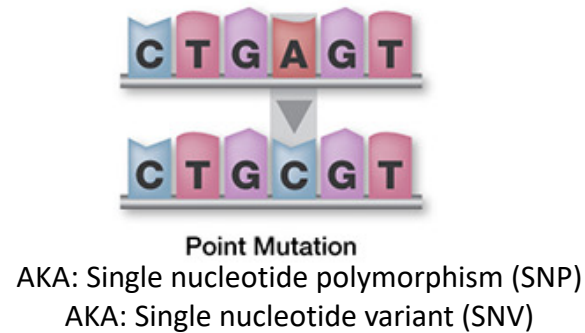


Source: WHO Global Health Estimates.

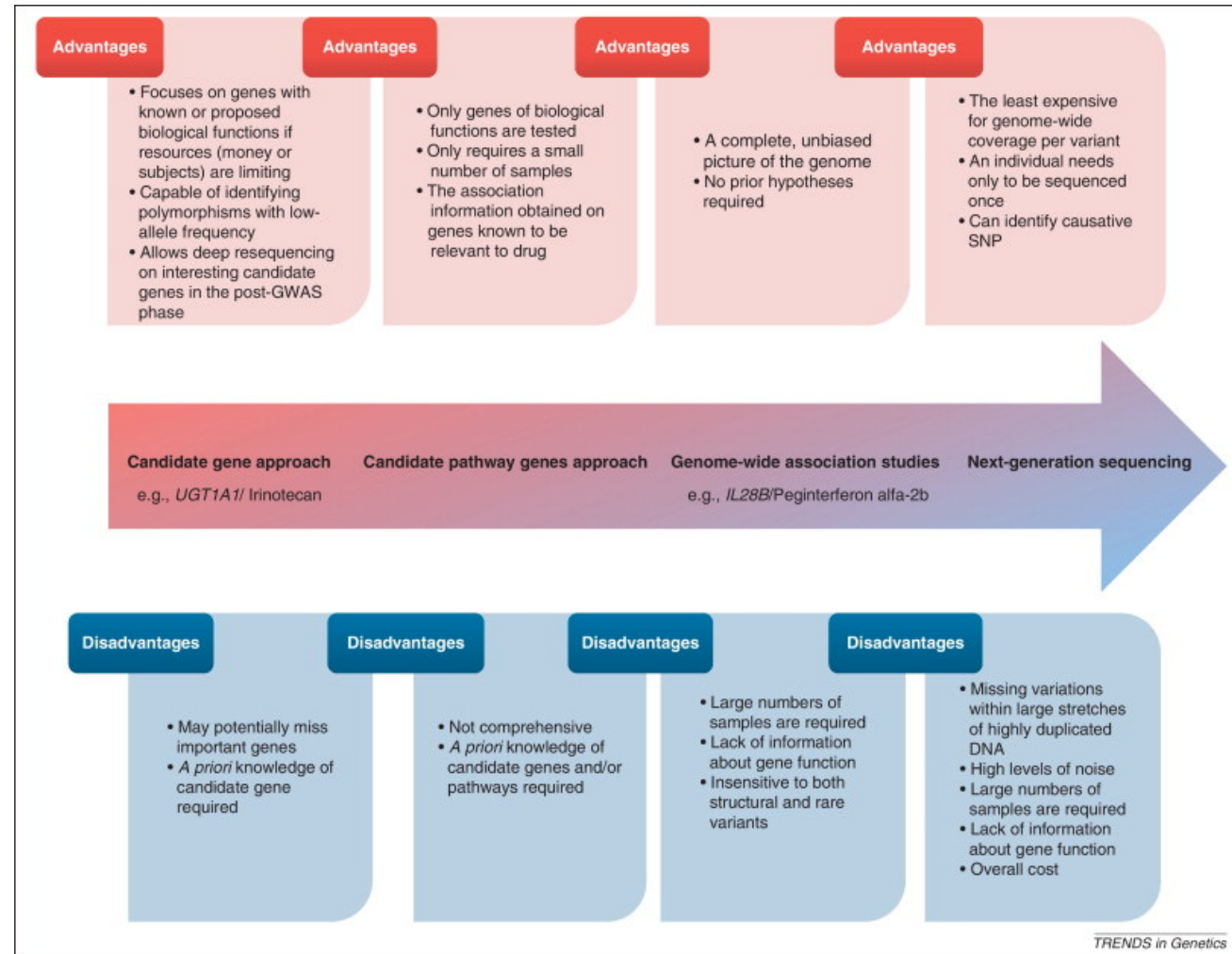


Wikipedia

2. Choose the genetic variation (DNA) you have reason to believe might be involved



Strategies for identifying genetic variation that may be relevant to disease phenotype

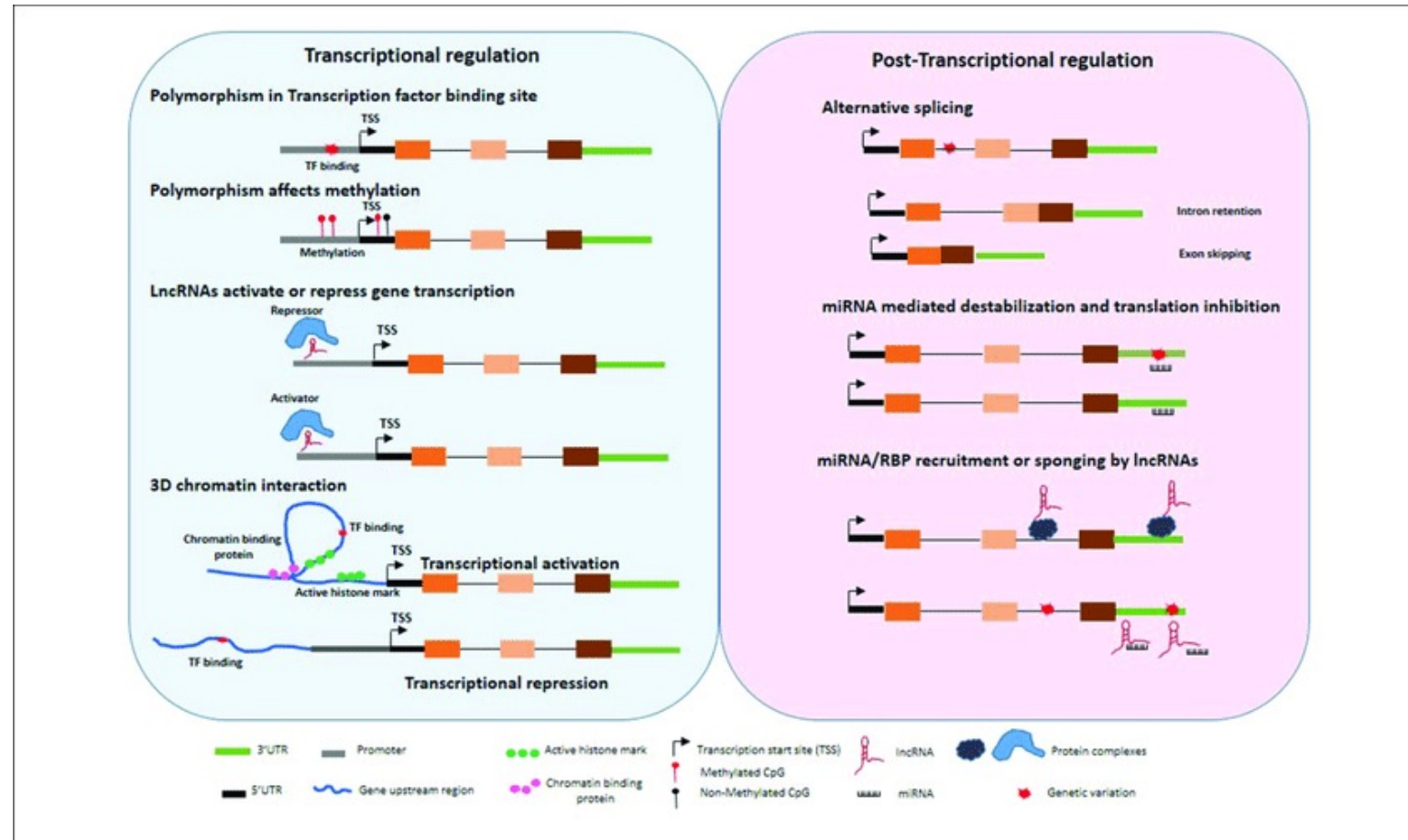


Relating genetic variation to “function” is one of the biggest and most active fields in current genetics research

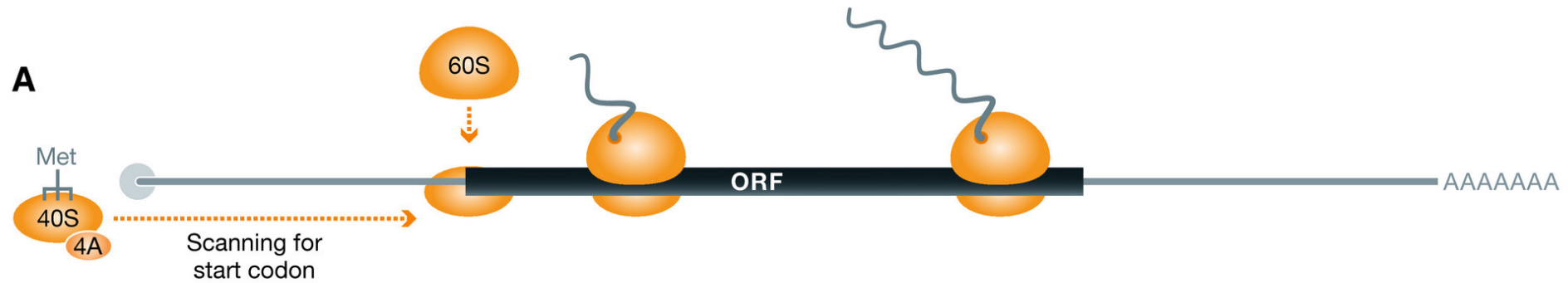
The image is a screenshot of the National Human Genome Research Institute (NHGRI) website. At the top left is the NIH logo and the text "National Human Genome Research Institute". To the right is a navigation bar with icons and labels: "ABOUT GENOMICS", "RESEARCH FUNDING", "RESEARCH AT NHGRI", "ABOUT HEALTH", "CAREERS & TRAINING", "NEWS & EVENTS", and "ABOUT NHGRI". Below the navigation bar is a search bar with the placeholder text "...Begin your search here" and a magnifying glass icon. The main content area has a dark blue background with a glowing DNA helix. The breadcrumb trail reads "Home / Research Funding / Funded Programs and Projects / Impact of Genomic Variation on Function (IGVF) Consortium". The main heading is "Impact of Genomic Variation on Function (IGVF) Consortium". Below the heading is a short paragraph: "The IGVF will develop a framework for systematically understanding the effects of genomic variation on genome function and how these effects shape phenotypes."

<https://www.genome.gov/Funded-Programs-Projects/Impact-of-Genomic-Variation-on-Function-Consortium>

3. Consider how your favorite variant may impact transcription (gene expression)



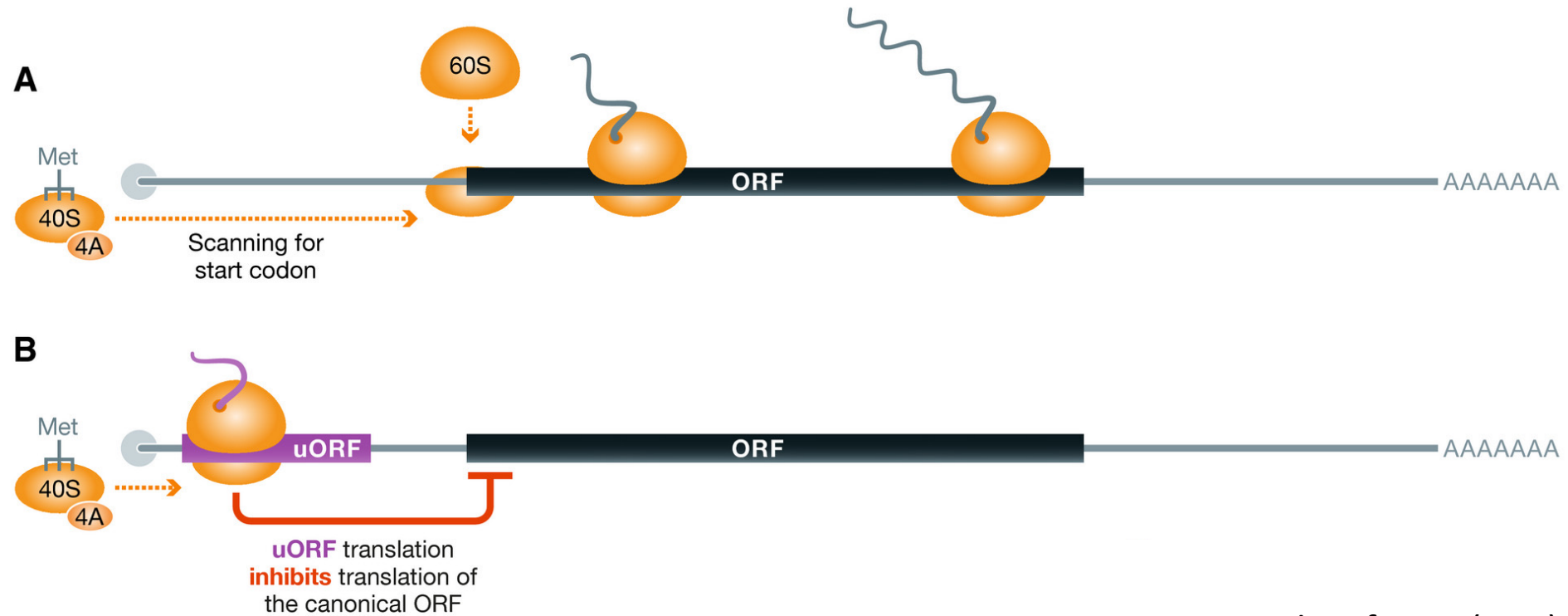
upstreamORFs (uORFs) and translation initiation



Open reading frame (ORF):

Any genomic region that has the correct upstream sequence motifs to be recognized by **ribosomes** and translated

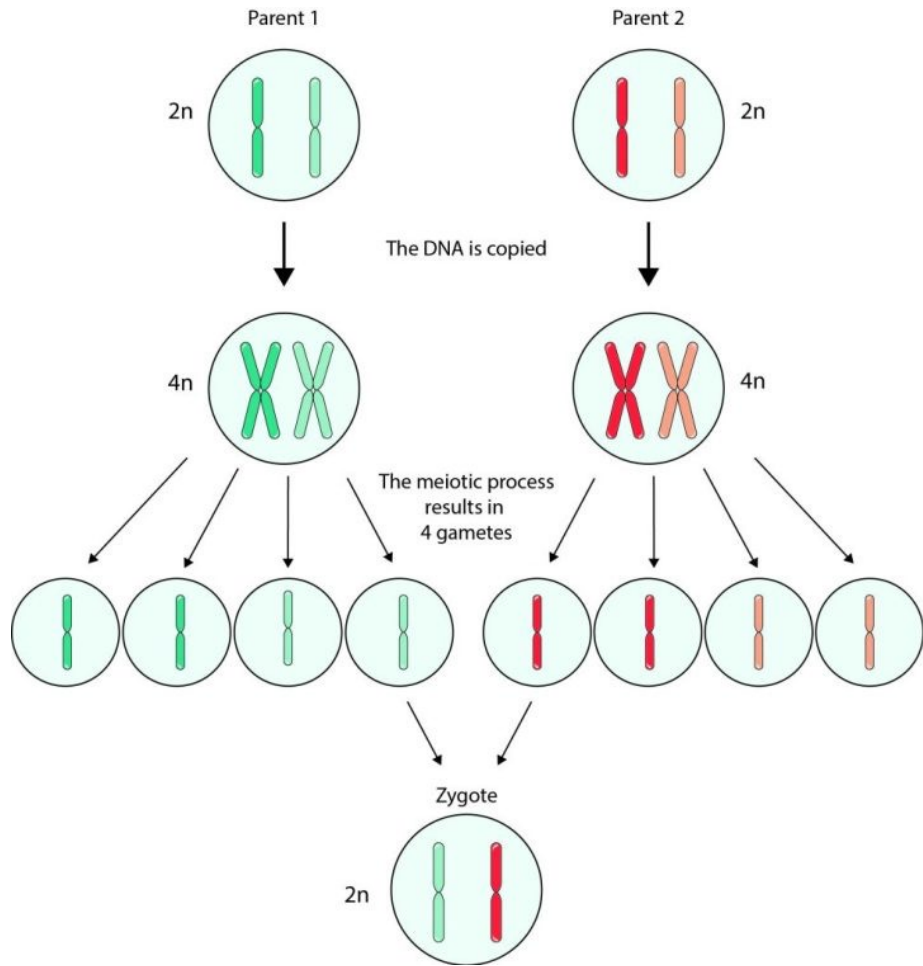
upstreamORFs (uORFs) and translation initiation



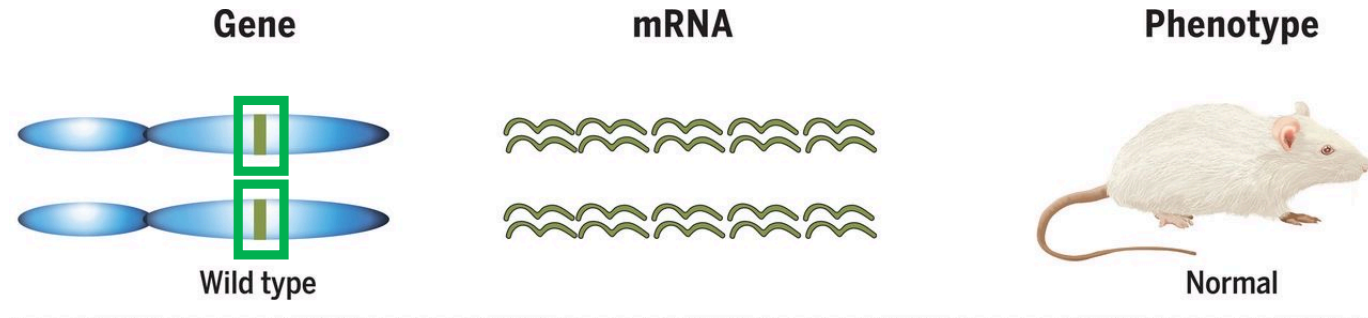
Open reading frame (ORF):

Any genomic region that has the correct upstream sequence motifs to be recognized by **ribosomes** and translated

What is haploinsufficiency and how does it impact transcription?

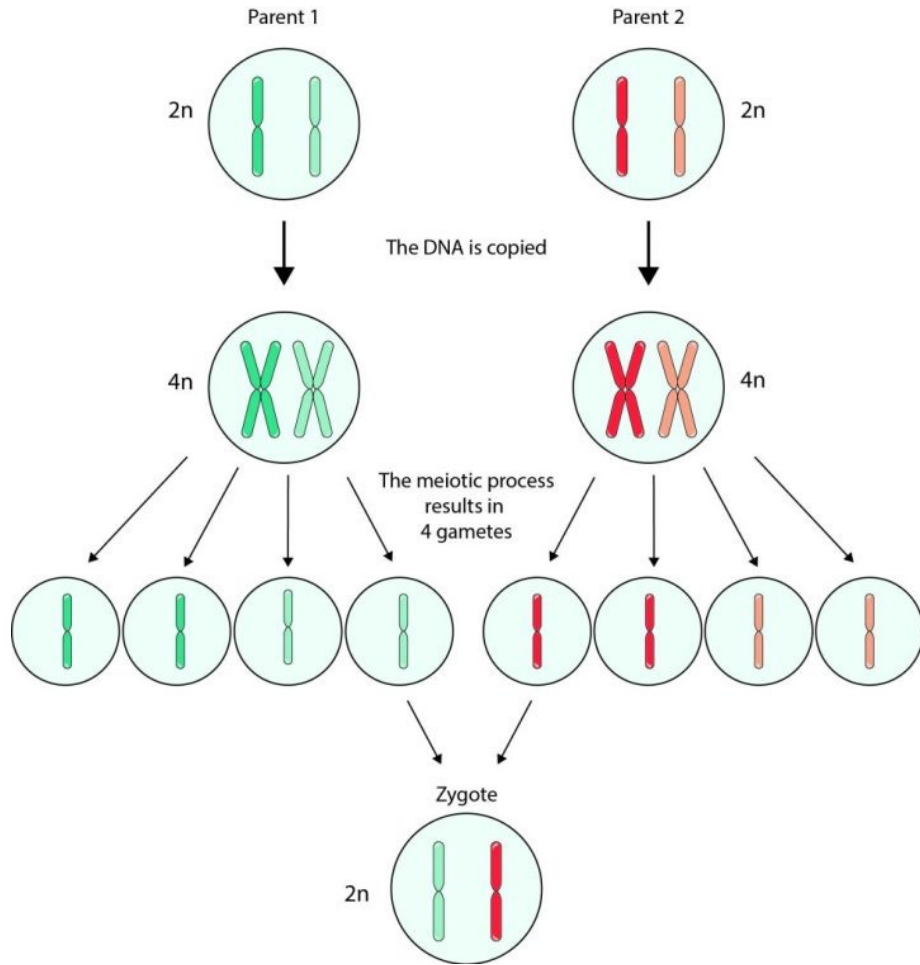


sitn.hms.harvard.edu

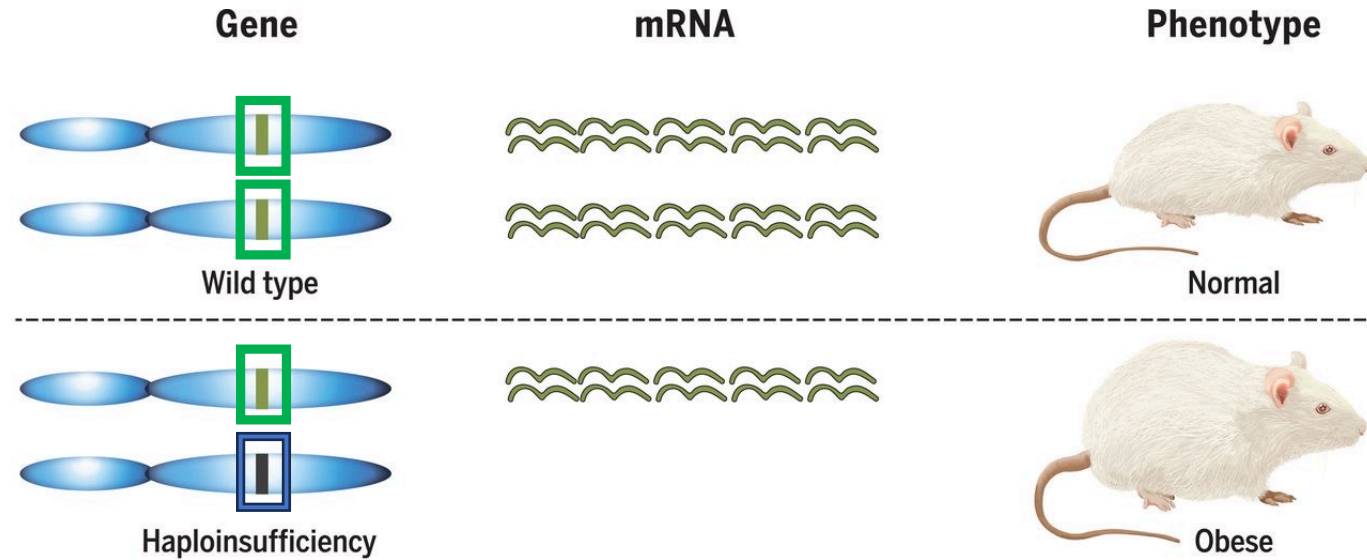


Matharu et al., 2018, *Science*

What is haploinsufficiency and how does it impact transcription?

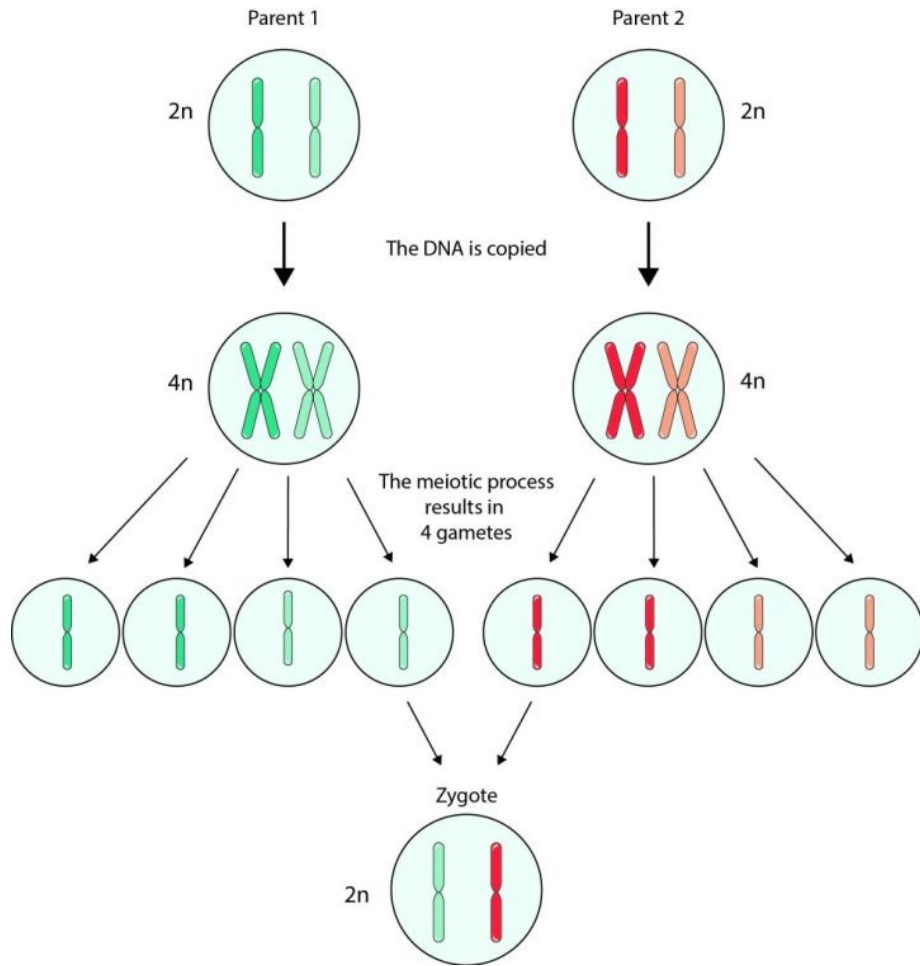


sitn.hms.harvard.edu

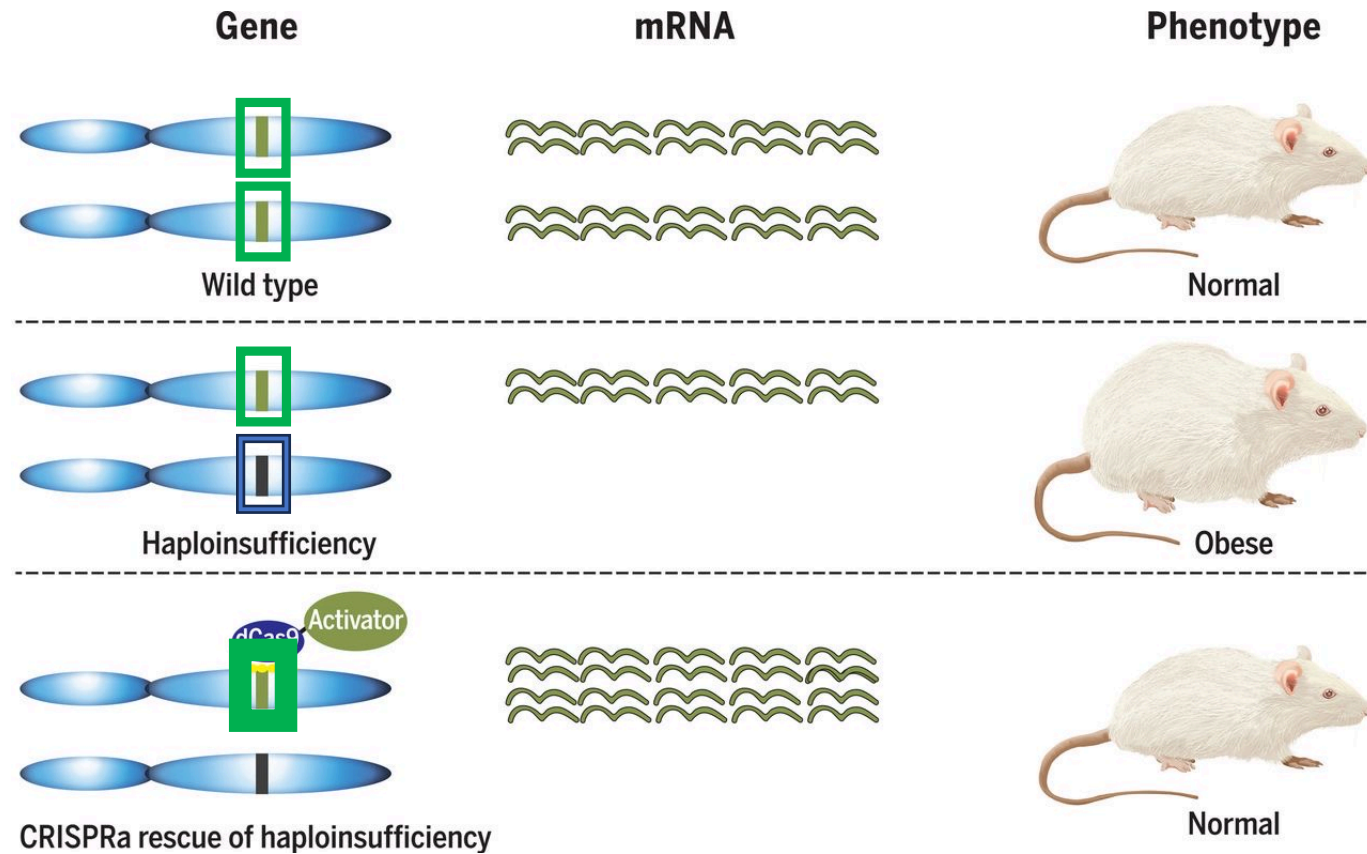


Matharu et al., 2018, *Science*

What is haploinsufficiency and how does it impact transcription?

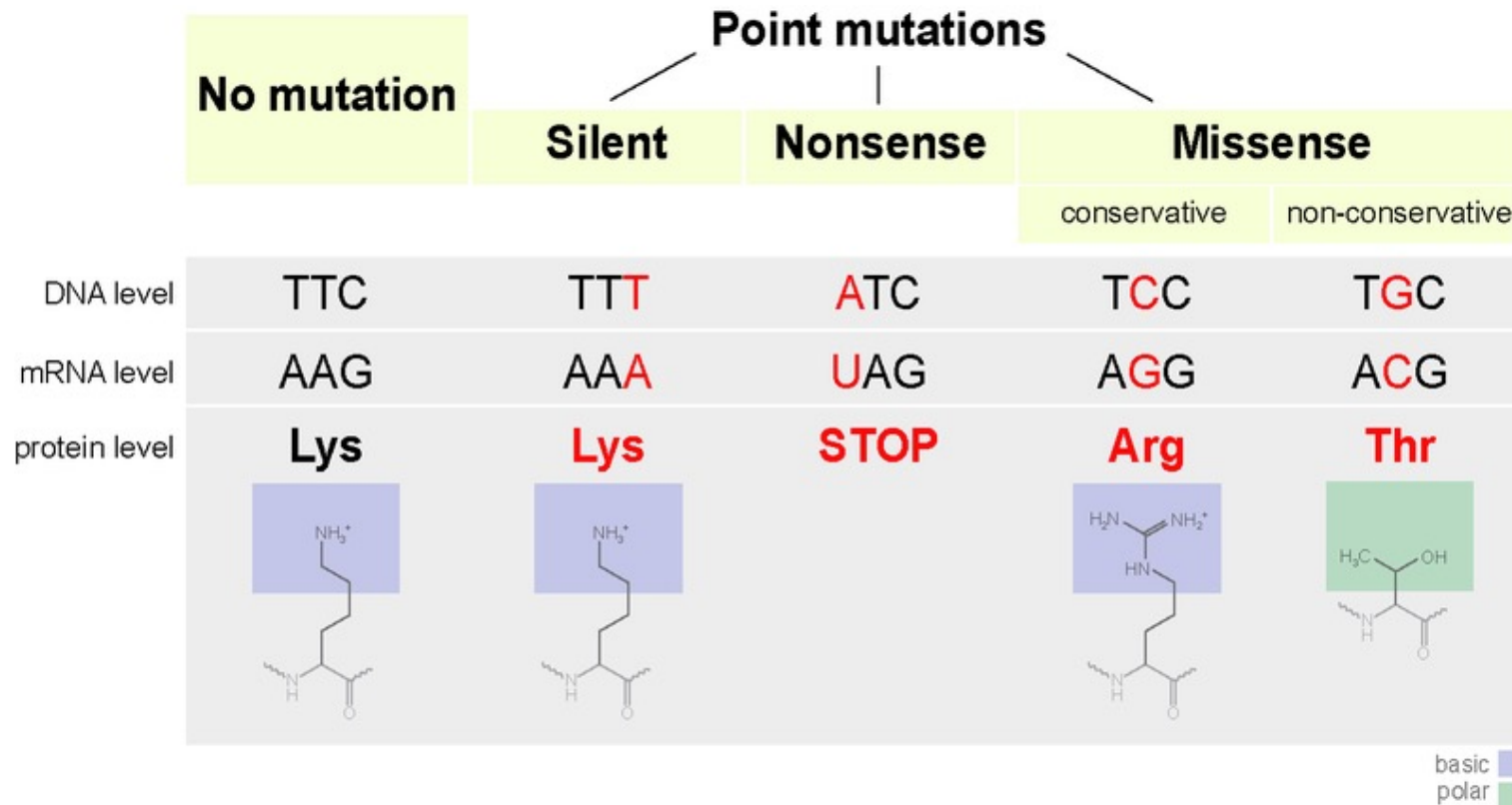


sitn.hms.harvard.edu

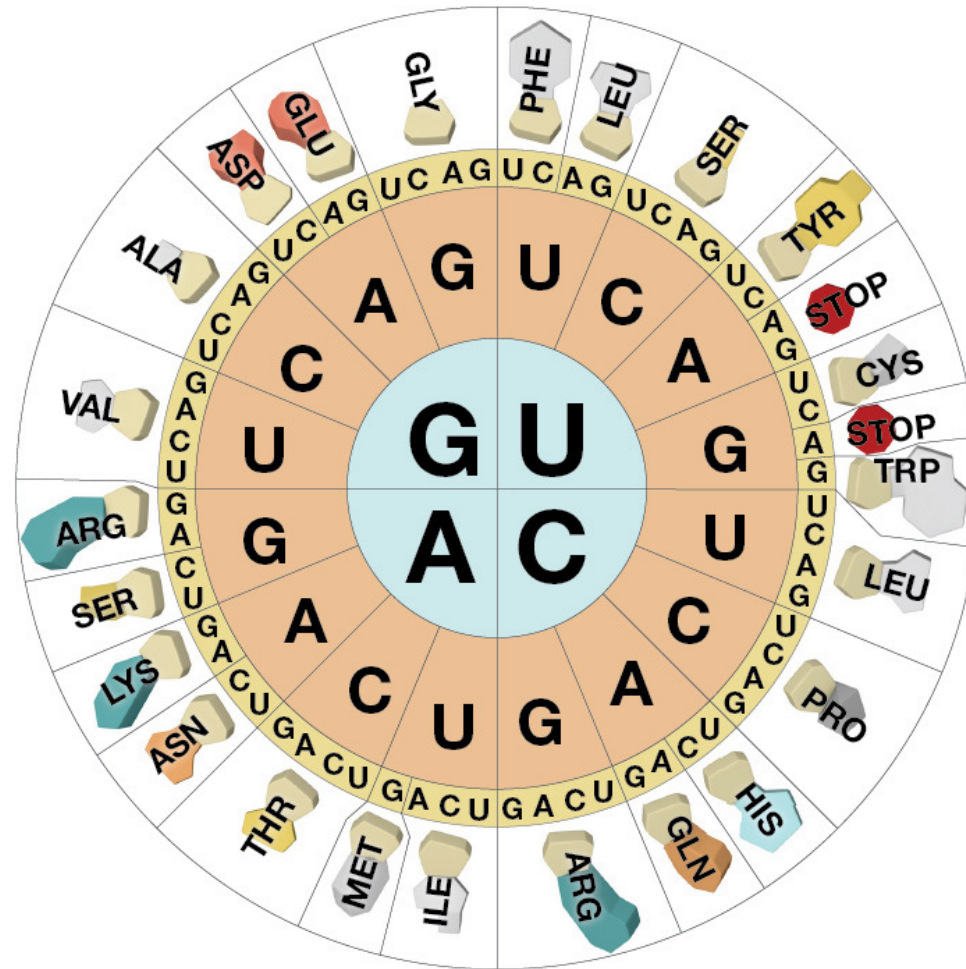


Matharu et al., 2018, *Science*

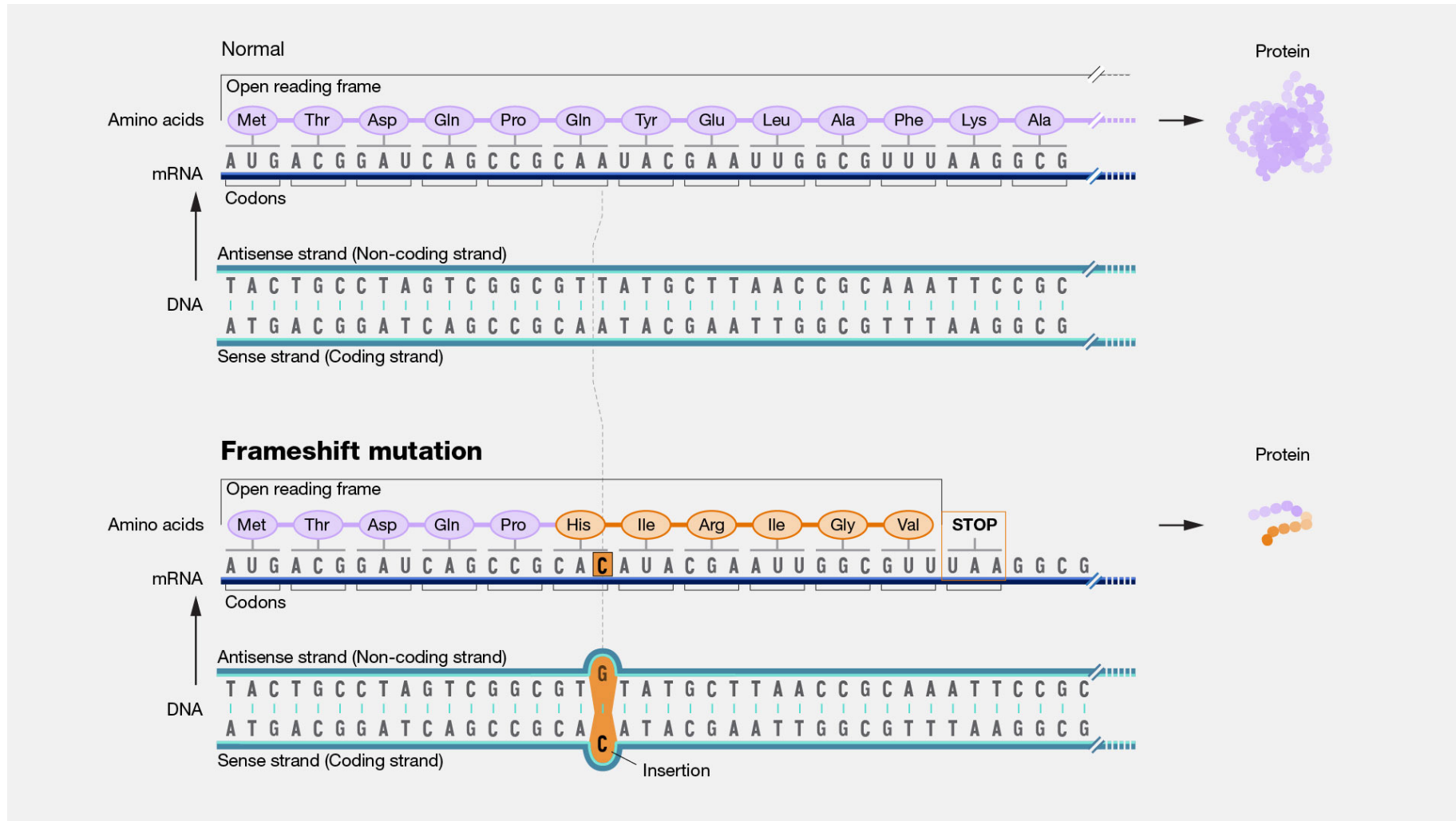
4. Consider how your favorite variant may impact translation (protein expression)



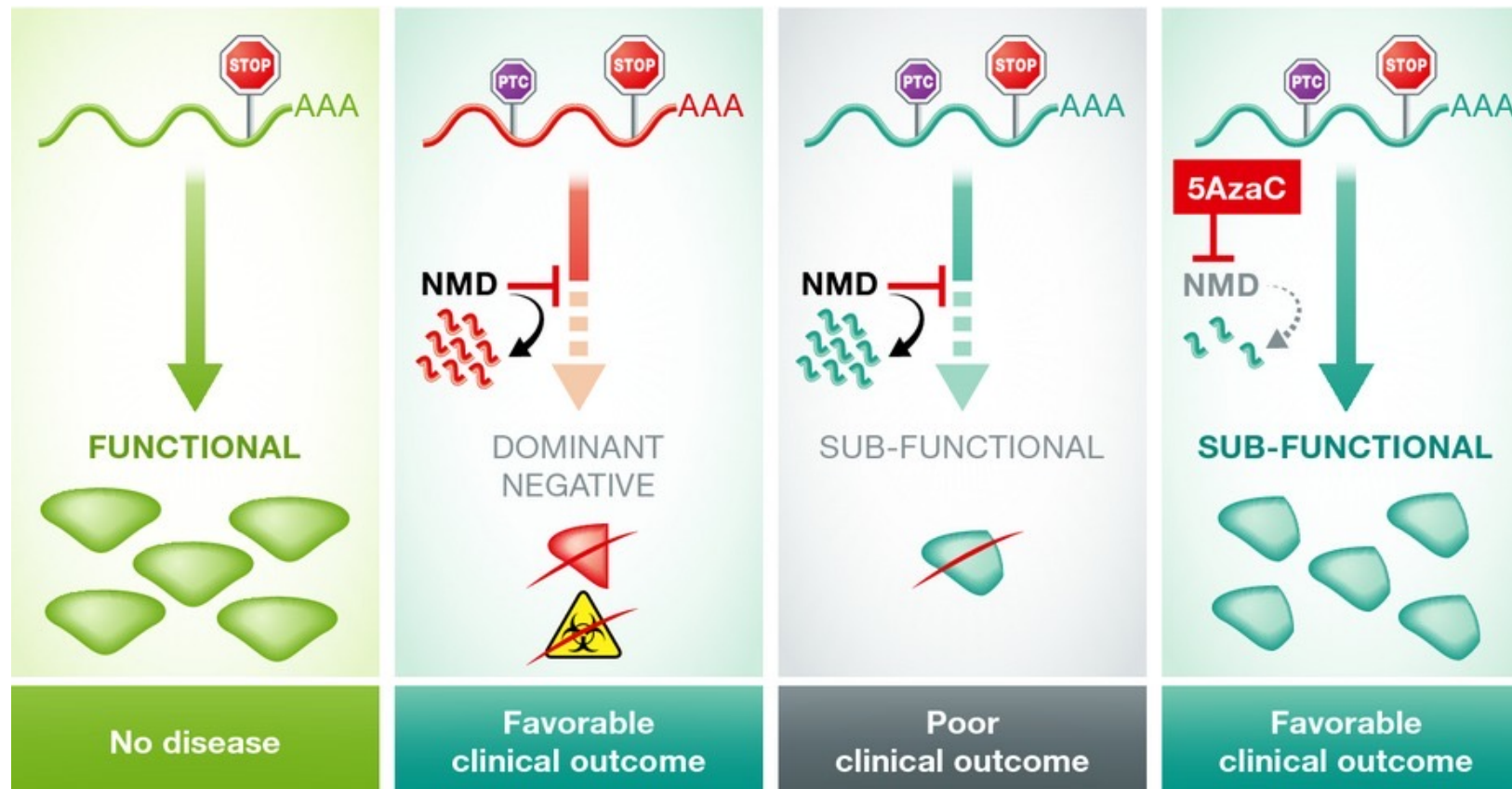
Protein structure == protein function



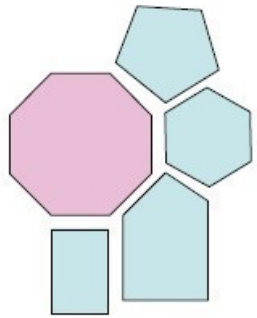
Frameshift mutations can change the coding sequence (CDS) that gets translated



5. Come up with a hypothesis for how you think your favorite variant may be impacting your disease/phenotype of interest

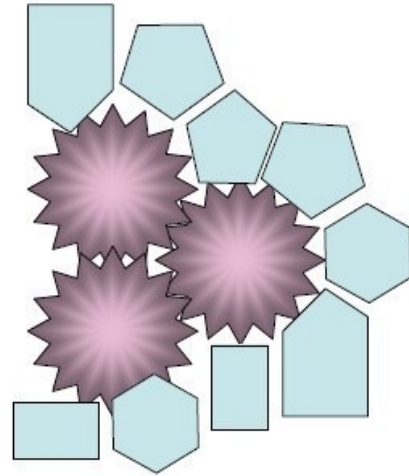


Wild-type



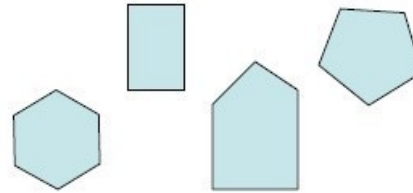
- Complex formed
- Normal cell physiology

Gain-of-function



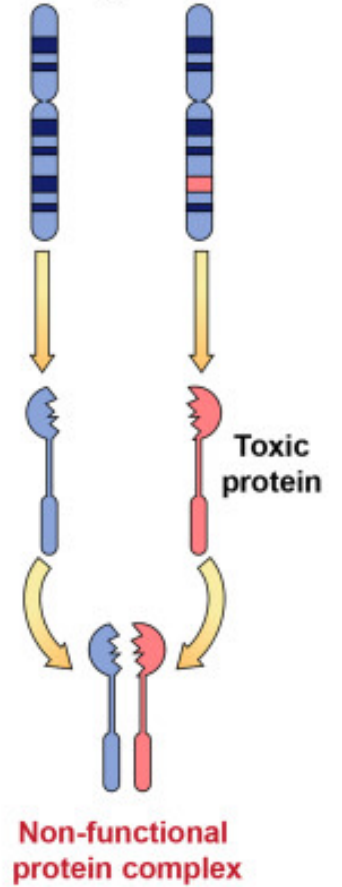
- Hyperactivation of signalling pathways
- Formation of protein aggregates

Loss-of-function

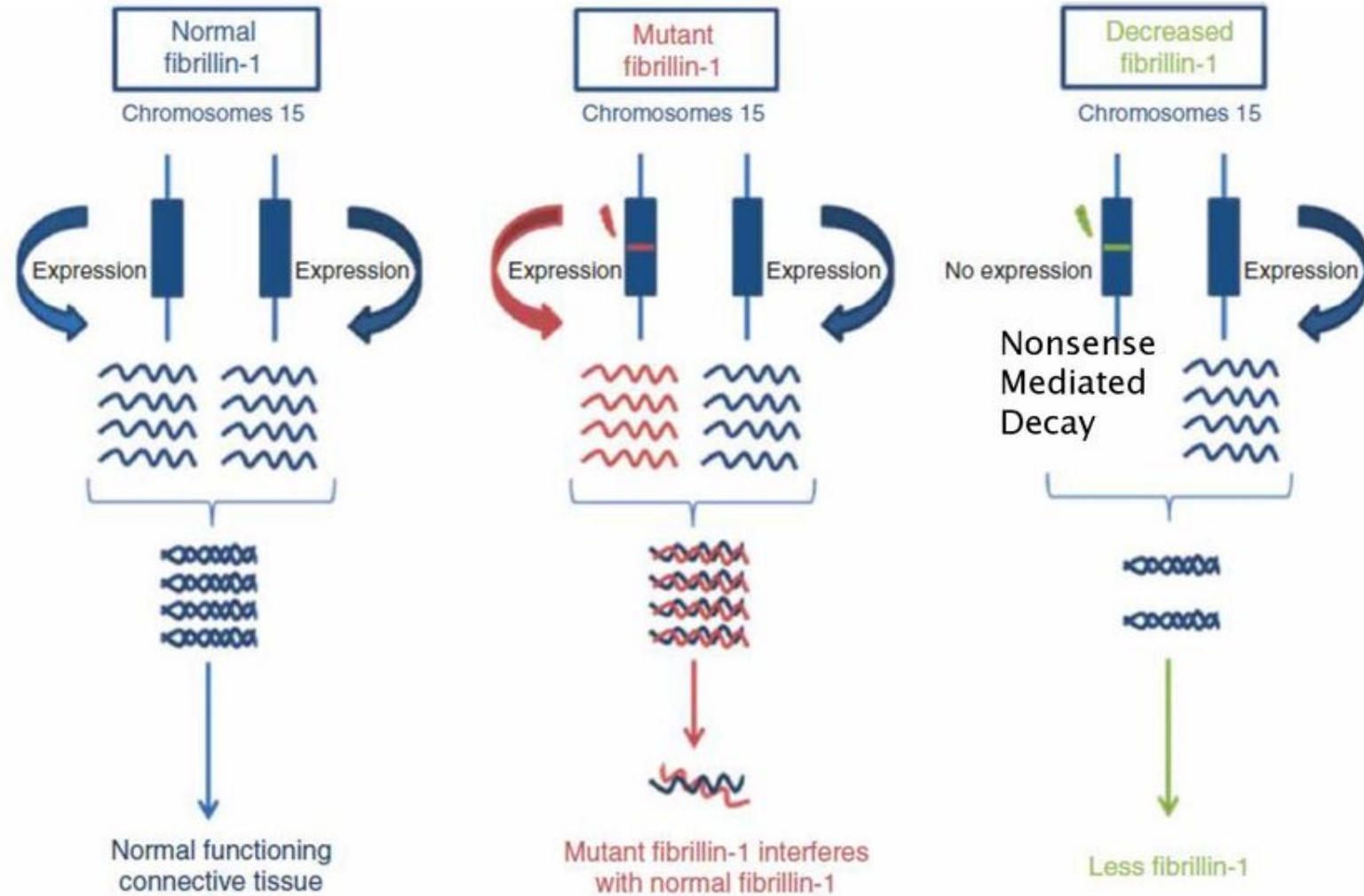


- Complex not formed
- Complex function not performed

Dominant Negative

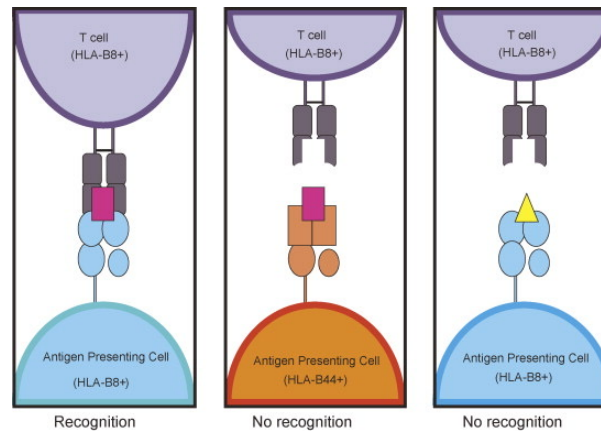


dominant negative vs haploinsufficiency



6. Design *in silico/in vitro/in vivo* experiments to test

The signatures of function are passed on through our DNA



Function/trait

Sequence

Fitness



H. sapiens

S. cerevisiae

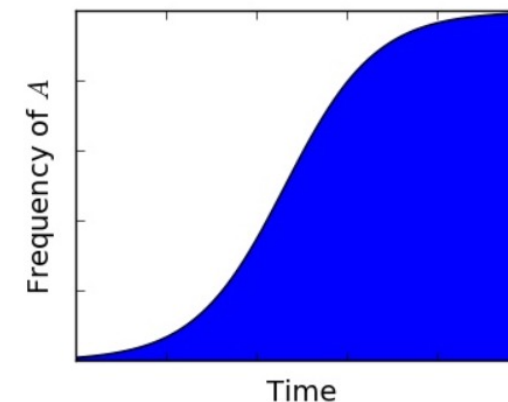
M. tuberculosis



E. coli

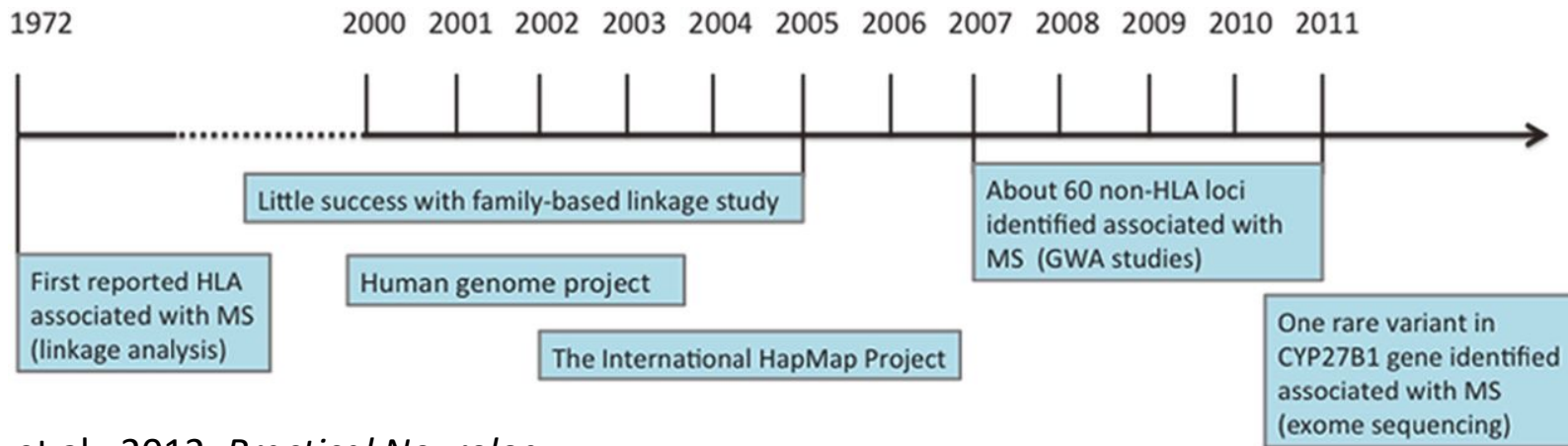
T	L	V	V	D	R	Y	A	F	S	G	V	A	F	T
N	I	V	M	D	R	Y	V	Y	S	G	V	A	Y	S
V	V	I	L	D	R	Y	V	A	S	N	A	A	Y	S
W	V	I	G	D	R	H	D	L	S	T	Q	A	Y	Q

Protein amino acid sequence



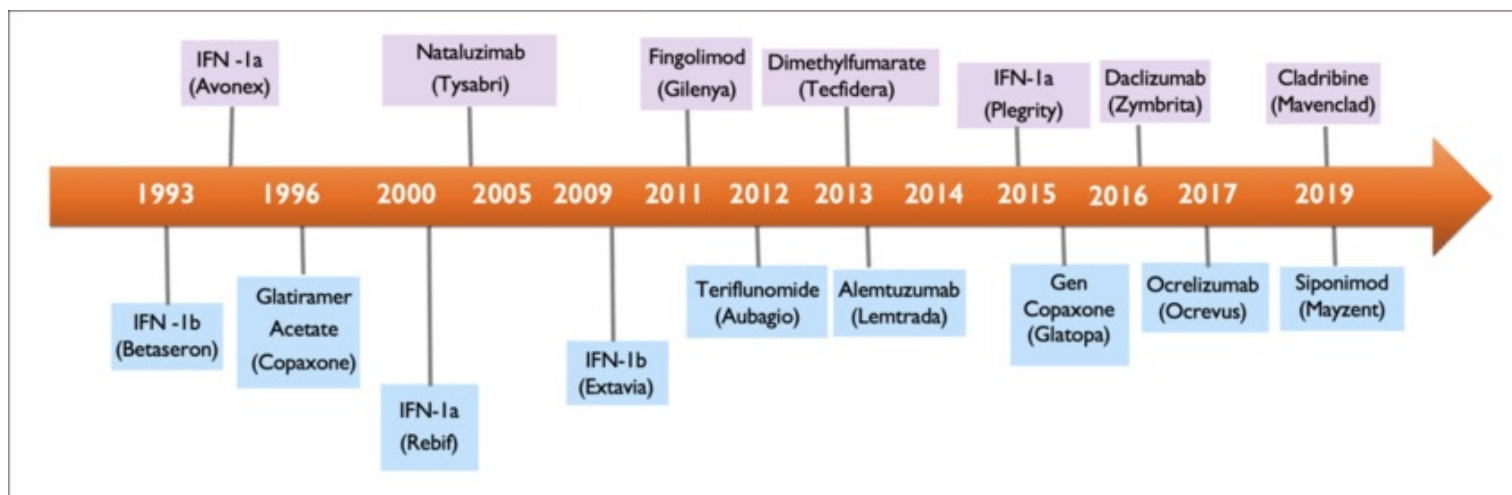
Why are the mechanisms we build from our understanding of basic biology so important for how we think about disease?

Multiple sclerosis has been considered a disease of the immune system since the 1970s



Our interpretation of disease mechanism shapes clinical treatment

Lin et al., 2012, *Practical Neurology*



“Various clinical and experimental findings suggest a pathogenic role of antibodies in multiple sclerosis (MS). **Yet, whether antibodies contribute to the pathogenesis or progression of MS is still a subject of intense debate.**”

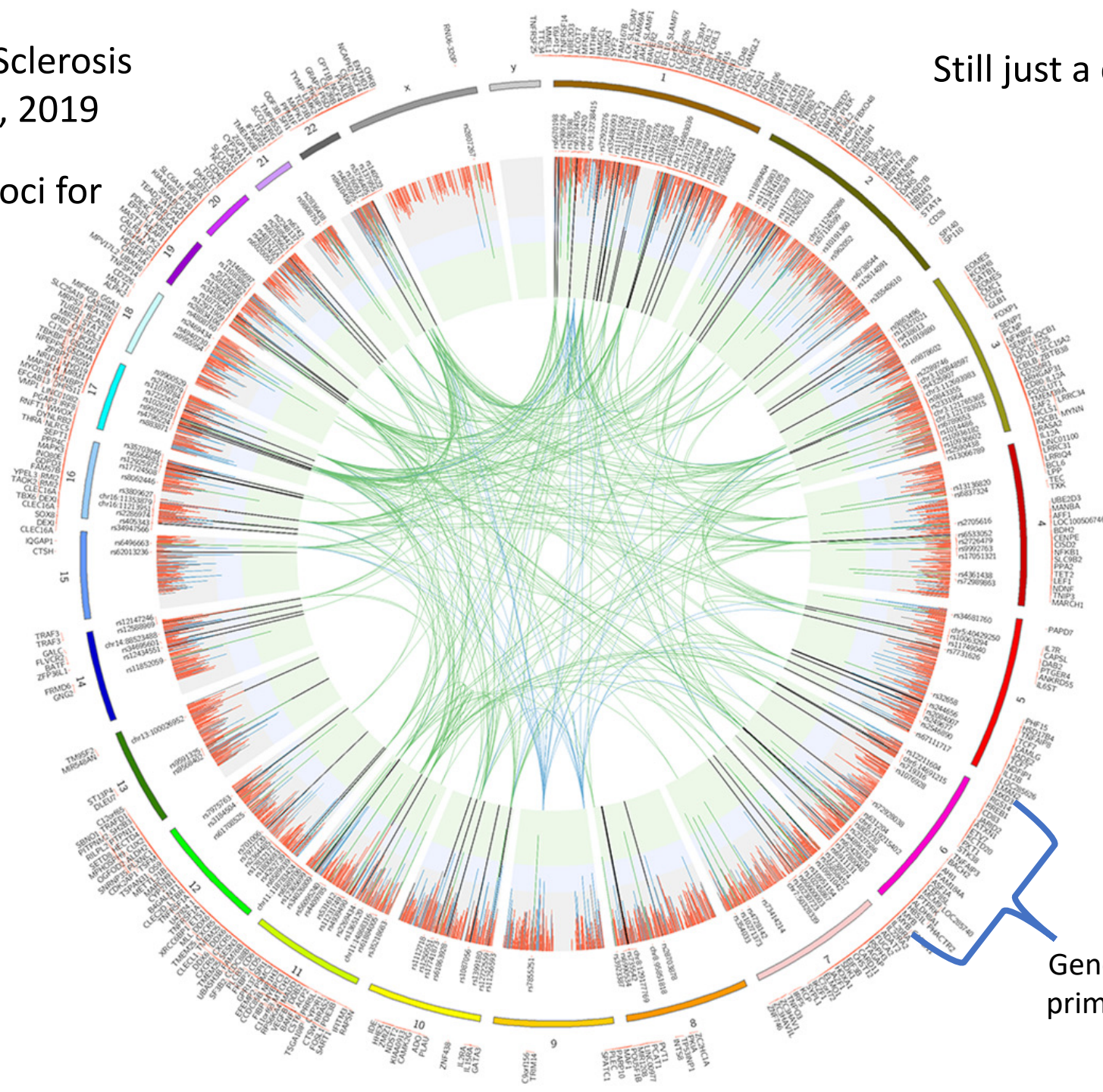
- den Dunnen, et al., 2021, *Neural Regen Res.*

Melamed and Lee, 2020, *Front. Imm.*

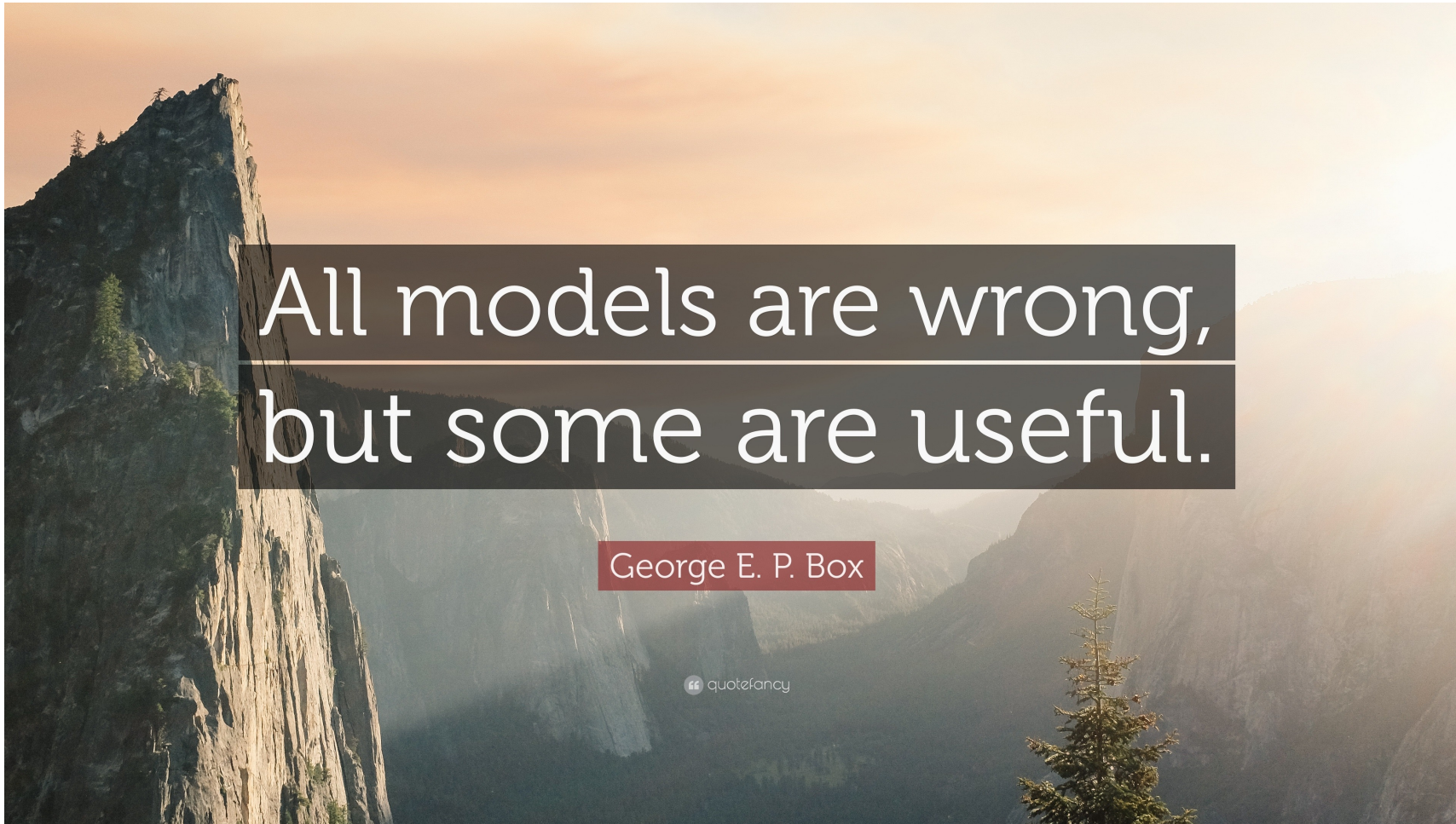
International Multiple Sclerosis Genetics Consortium, 2019

>200 genome wide risk loci for multiple sclerosis

Still just a disease of the immune system?



Genomic region containing primary immune risk genes



We are all just figuring this out as we go, based on what is known at any given moment... which is constantly changing as we learn more.

So state your assumptions and don't take things too seriously.

Thanks for your interest!

- Feel free to email me: kristen.wade@ucsf.edu