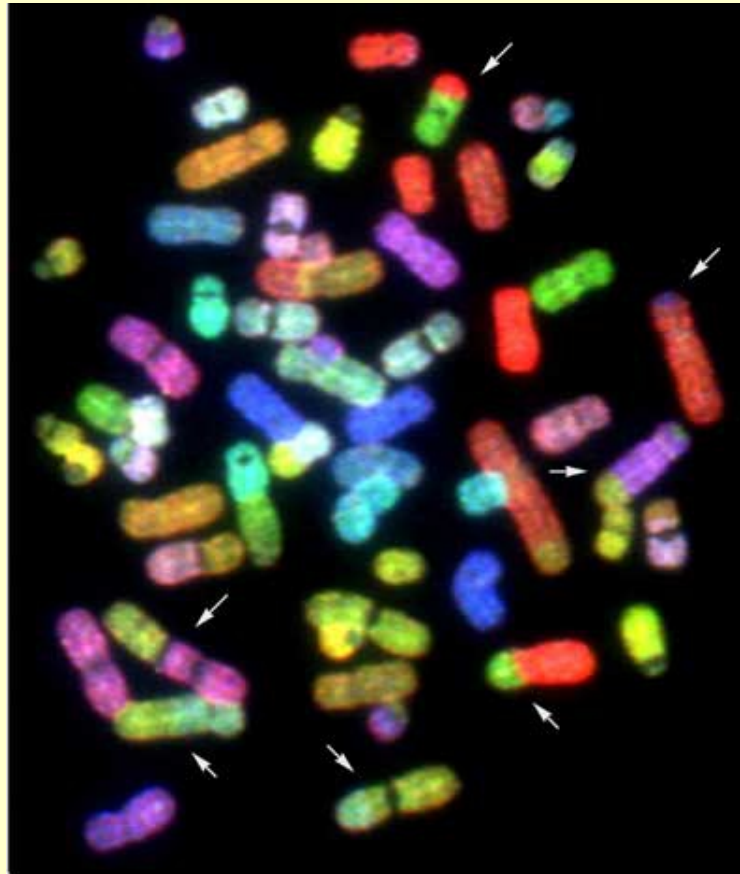


Your Genes and Your Health

<http://bio84.stanford.edu/>

Diseases and Disease Databases



Doug Brutlag, Professor Emeritus
Biochemistry & Medicine
Stanford University School of Medicine

Stanford at The Tech: Understanding Genetics

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Genomics as the Basis of Preventive Medicine

- If we know the gene that causes an inherited disease
- And we know the function of that gene
- Then we can understand the cause of the disease at the molecular level,
- This knowledge permits development of better diagnoses, treatments, drugs, therapies and other interventions to cure the disease.

Where would you go for information on inherited diseases?

- Google or Google Scholar?
- National Center for Biotechnology Information
- Genes and Disease
- Genetics Home Reference
- Medline Plus
- Gene Reviews
- Online Mendelian Inheritance in Man (OMIM)
- MedGen – human medical genetics
- PubMed Keywords or PubMed MeSh search?
- PubMed Central
- PubMed Health
- Clinical Trials Database

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NCBI Announcements

RefSeq Release 74 now available on FTP

20 Jan 2016

RefSeq Release 74 is now accessible online, on the FTP site, and through

January 28th webinar: "Genomic Data Sharing with dbGaP: Registration and Submission" for IRP investigators

13 Jan 2016

In two weeks, NCBI will present a

NCBI staff will attend the International Plant and Animal Genome Conference XXIV in January

30 Dec 2015

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Databases

[Bookshelf](#)

A collection of biomedical books that can be searched directly or from linked data in other NCBI databases. The collection includes biomedical textbooks, other scientific titles, genetic resources such as *GeneReviews*, and NCBI help manuals.

[ClinVar](#)

A resource to provide a public, tracked record of reported relationships between human variation and observed health status with supporting evidence. Related information in the [NIH Genetic Testing Registry \(GTR\)](#), [MedGen](#), [Gene](#), [OMIM](#), [PubMed](#) and other sources is accessible through hyperlinks on the records.

[ClincialTrials.gov](#)

A registry and results database of publicly- and privately-supported clinical studies of human participants conducted around the world.

[Database of Genotypes and Phenotypes \(dbGaP\)](#)

An archive and distribution center for the description and results of studies which investigate the interaction of genotype and phenotype. These studies include genome-wide association (GWAS), medical resequencing, molecular diagnostic assays, as well as association between genotype and non-clinical traits.

[Database of Major Histocompatibility Complex \(dbMHC\)](#)

An open, publicly accessible platform where the HLA community can submit, edit, view, and exchange data related to the human major histocompatibility complex. It consists of an interactive Alignment Viewer for HLA and related genes, an MHC microsatellite database, a sequence interpretation site for Sequencing Based Typing (SBT), and a Primer/Probe database.

[Gene](#)

A searchable database of genes, focusing on genomes that have been completely sequenced and that have an active research community to contribute gene-specific data. Information includes nomenclature, chromosomal localization, gene products and their attributes (e.g., protein interactions), associated markers, phenotypes, interactions, and links to citations, sequences, variation details, maps, expression reports, homologs, protein domain content, and external databases.

[GeneReviews](#)

A collection of expert-authored, peer-reviewed disease descriptions on the NCBI Bookshelf that apply genetic testing to the diagnosis, management, and genetic counseling of patients and families with specific inherited conditions.

[Genes and Disease](#)

Summaries of information for selected genetic disorders with discussions of the underlying mutation(s) and clinical features, as well as links to related databases and organizations.

MedGen

A portal to information about medical genetics. MedGen includes term lists from multiple sources and organizes them into concept groupings and hierarchies. Links are also provided to information related to those concepts in the [NIH Genetic Testing Registry \(GTR\)](#), [ClinVar](#), [Gene](#), [OMIM](#), [PubMed](#), and other sources.

NCBI Pathogen Detection Project

A project involving the collection and analysis of bacterial pathogen genomic sequences originating from food, environmental and patient isolates. Currently, an automated pipeline clusters and identifies sequences supplied primarily by public health laboratories to assist in the investigation of foodborne disease outbreaks and discover potential sources of food contamination.

Online Mendelian Inheritance in Man (OMIM)

A database of human genes and genetic disorders. NCBI maintains current content and continues to support its searching and integration with other NCBI databases. However, OMIM now has a new home at omim.org, and users are directed to this site for full record displays.

PubMed

A database of citations and abstracts for biomedical literature from MEDLINE and additional life science journals. Links are provided when full text versions of the articles are available via PubMed Central (described below) or other websites.

PubMed Central (PMC)

A digital archive of full-text biomedical and life sciences journal literature, including clinical medicine and public health.

PubMed Health

A collection of clinical effectiveness reviews and other resources to help consumers and clinicians use and understand clinical research results. These are drawn from the NCBI Bookshelf and PubMed, including published systematic reviews from organizations such as the Agency for Health Care Research and Quality, The Cochrane Collaboration, and others (see [complete listing](#)). Links to full text articles are provided when available.

Bookshelf ID: NBK22183



Genes and Disease

National Center for Biotechnology Information (US)

Bethesda (MD): National Center for Biotechnology Information (US); 1998-

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Genes and Disease is a collection of articles that discuss genes and the diseases that they cause. These genetic disorders are organized by the parts of the body that they affect. As some diseases affect various body systems, they appear in more than one chapter.

With each genetic disorder, the underlying mutation(s) is discussed, along with clinical features and links to key websites.

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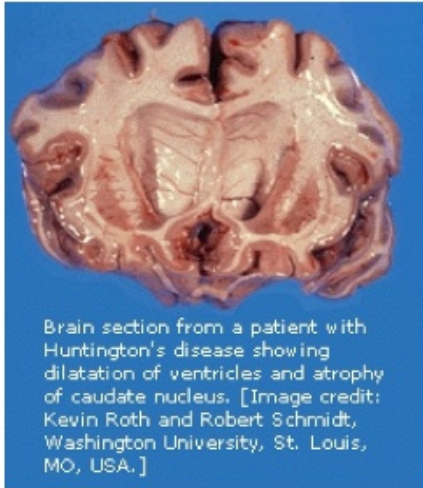
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Huntington disease



Huntington disease (HD) is an inherited, degenerative neurological disease that leads to dementia. About 30,000 Americans have HD and about 150,000 more are at risk of inheriting the disease from a parent.

The HD gene, whose mutation results in Huntington disease, was mapped to chromosome 4 in 1983 and cloned in 1993. The mutation is a characteristic expansion of a nucleotide triplet repeat in the DNA that codes for the protein huntingtin. As the number of repeated triplets - CAG (cytosine, adenine, guanine) - increases, the age of onset in the patient decreases. Furthermore, because the unstable trinucleotide repeat can lengthen when passed from parent to child, the age of onset can decrease from one generation to the next. Since people who have those repeats always suffer from Huntington disease, it suggests that the mutation causes a gain-of-function, in which the mRNA or protein takes on a new property or is expressed inappropriately.

Related diseases

[See other Diseases of the Nervous System](#)



Genes and Disease [Internet].
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[OMIM](#) catalog of human genes and disorders

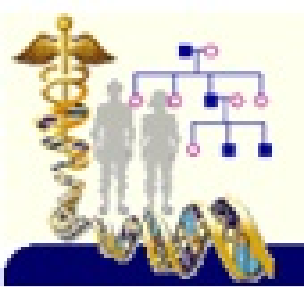
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The genetics of more than 550 health conditions, diseases, and syndromes.



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More than 750 genes, health effects of genetic differences, and gene families.



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Handbook

Learn about mutations, inheritance, genetic counseling, genetic testing, genomic research, and more.



Glossary

Medical and genetics definitions.



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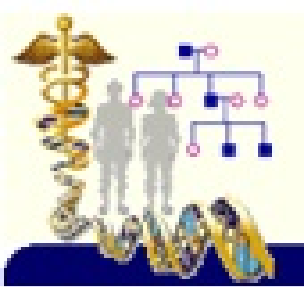
Genetics Home Reference provides consumer-friendly information about the effects of genetic variations on human health.

The resources on this site should not be used as a substitute for professional medical care or advice. Users seeking information about a personal genetic disease, syndrome, or condition should consult with a qualified healthcare professional. See [How can I find a genetics professional in my area?](#) in the Handbook.

Published: September 19, 2010

Huntington Disease in Genetics Home Reference

<http://ghr.nlm.nih.gov/condition/huntington-disease>



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Huntington disease

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Genetic disorder catalog

What is Huntington disease?

Huntington disease is a progressive brain disorder that causes uncontrolled movements, emotional problems, and loss of thinking ability (cognition).

Adult-onset Huntington disease, the most common form of this disorder, usually appears in a person's thirties or forties. Early signs and symptoms can include irritability, depression, small involuntary movements, poor coordination, and trouble learning new information or making decisions. Many people with Huntington disease develop involuntary jerking or twitching movements known as chorea. As the disease progresses, these movements become more pronounced. Affected individuals may have trouble walking, speaking, and swallowing. People with this disorder also experience changes in personality and a decline in thinking and reasoning abilities. Individuals with the adult-onset form of Huntington disease usually live about 15 to 20 years after signs and symptoms begin.

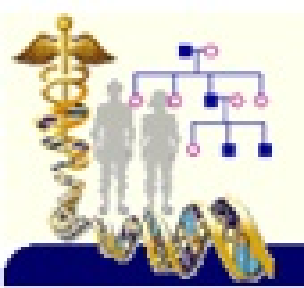
A less common, early-onset form of Huntington disease begins in childhood or adolescence. It also involves movement problems and mental and emotional changes. Additional signs of the early-onset form include slow movements, clumsiness, frequent falling, rigidity, slurred speech, and drooling. School performance often declines as thinking and reasoning abilities become impaired. Seizures occur in 30 percent to 50 percent of children with this condition. Early-onset Huntington disease tends to progress more quickly than the adult-onset form; affected individuals usually live 10 to 15 years after signs and symptoms appear.

How common is Huntington disease?

Huntington disease affects an estimated 3 to 7 per 100,000 people of European ancestry. The disorder appears to be less common in some other populations, including people of Japanese, Chinese, and African descent.

Huntingtin Gene HTT in Genetics Home Reference

<http://ghr.nlm.nih.gov/gene/HTT>



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What is the official name of the *HTT* gene?

The official name of this gene is “huntingtin.”

HTT is the gene's official symbol. The *HTT* gene is also known by other names, listed below.

Read more about gene names and symbols on the [About](#) page.

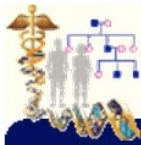
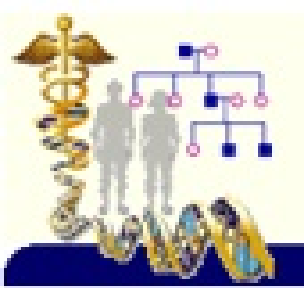
What is the normal function of the *HTT* gene?

The *HTT* gene provides instructions for making a protein called huntingtin. Although the exact function of this protein is unknown, it appears to play an important role in nerve cells (neurons) in the brain and is essential for normal development before birth. Huntingtin is found in many of the body's tissues, with the highest levels of activity in the brain. Within cells, this protein may be involved in chemical signaling, transporting materials, attaching (binding) to proteins and other structures, and protecting the cell from self-destruction (apoptosis).

One region of the *HTT* gene contains a particular DNA segment known as a CAG trinucleotide repeat. This segment is made up of a series of three DNA building blocks (cytosine, adenine, and guanine) that appear multiple times in a row. Normally, the CAG segment is repeated 10 to 35 times within the gene.

Newborn Screening in Genetics Home Reference

<http://ghr.nlm.nih.gov/nbs>



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Newborn Screening

Quick Reference:

- ▶ [Description of disorders detected through newborn screening](#)

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Newborn screening is the practice of testing all babies for certain disorders and conditions that can hinder their normal development. Babies with these conditions appear healthy at birth but can develop serious medical problems later in infancy or childhood. Early detection and treatment can help prevent intellectual and physical disabilities and life-threatening illnesses.

Newborn screening usually begins with a blood test 24 to 48 hours after the baby is born. The test is performed by pricking the baby's heel to collect a few drops of blood. The blood is placed on a special piece of paper and sent to a laboratory for analysis. Parents can ask for a copy of the test results, which are sent to the baby's doctor or clinic.

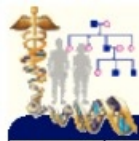
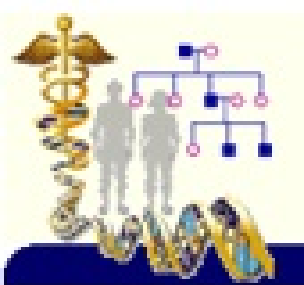
Sometimes a repeat blood test is required, particularly if the first test was done before the baby was 24 hours old. If the results of the test are abnormal, additional testing is required to confirm the result. Parents are notified within a few days of the first test if retesting is necessary. The blood test should be repeated as soon as possible.

Newborn screening varies from state to state. All states must screen for at least 21 disorders by law, and some states test for 30 or more. Parents can ask their doctor about expanded (supplemental) screening if they live in an area that screens for a limited number of disorders.

To encourage uniform and comprehensive newborn screening throughout the United States, the Health Resources and Services Administration (HRSA) issued a report that recommends screening for 29 specific conditions. The recommendations include a test for hearing loss in newborns. The hearing test uses a soft earphone or other instrument that is placed in the baby's ear.

Please use the links below to learn more about newborn screening.

- [Description of disorders detected through newborn screening](#) (Genetics Home Reference)
- [Newborn screening resources](#) (U.S. National Library of Medicine)
- [Frequently Asked Questions about Newborn Bloodspot Screening](#) (National Newborn



Handbook

Help Me Understand Genetics

Help Me Understand Genetics presents basic information about genetics in clear language and provides links to online resources.

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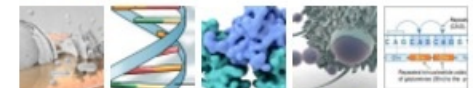
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Huntington Disease

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Huntington disease



Huntington disease is a disorder in which nerve cells in certain parts of the brain waste away, or degenerate. The disease is passed down through families.

Causes

Huntington disease is caused by a genetic defect on chromosome 4. The defect causes a part of DNA, called a CAG repeat, to occur many more times than it is supposed to. Normally, this section of DNA is repeated 10 to 28 times. But in persons with Huntington disease, it is repeated 36 to 120 times.

As the gene is passed down through families, the number of repeats tend to get larger. The larger the number of repeats, the higher your chance of developing symptoms at an earlier age. Therefore, as the disease is passed along in families, symptoms develop at younger and younger ages.

There are two forms of Huntington disease.

- Adult-onset Huntington disease is the most common. Persons with this form usually develop symptoms in their mid 30s and 40s.
- Early-onset Huntington disease affects a small number of cases and begins in childhood or the teens.

If one of your parents has Huntington disease, you have a 50% chance of getting the gene. If you get the gene from your parents, you can also pass it on to your children, who will also have a 50% chance of getting the gene. If you do not get the gene from your parents, you cannot pass the gene on to your children.

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Huntington Disease

Huntington Chorea

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Initial Posting: October 23, 1998; Last Update: April 22, 2010.

Summary

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[Top](#)

Disease characteristics. Huntington disease (HD) is a progressive disorder of motor, cognitive, and psychiatric disturbances. The mean age of onset is 35 to 44 years and the median survival time is 15 to 18 years after onset.

Diagnosis/testing. The diagnosis of HD rests on positive [family history](#), characteristic clinical findings, and the detection of an expansion of 36 or more CAG [trinucleotide repeats](#) in *HTT*.

Management. *Treatment of manifestations:* pharmacologic therapy including typical neuroleptics (haloperidol), atypical

GeneReviews [Internet].
Pagon RA, Bird TC, Dolan CR, et al., editors.
Seattle (WA): [University of Washington, Seattle](#); 1993-.
[\[Table of Contents Page\]](#)

In this GeneReview

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[Diagnosis](#)

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[Differential Diagnosis](#)

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GeneReviews Links

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[GeneReviews Advanced Search](#)

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GTR: GENETIC TESTING REGISTRY

C0020179[DISCU]

Tests

Search

[GTR Home](#) > [Tests](#) > [Search results - Huntington's chorea](#) > [Filter applied \(Remove all\)](#)

Apply filters

Condition/Phenotype

Showing test for 1 condition

Enter text to filter the conditions

Select a condition

reset

Homocystinuria, cbID type, variant 1

Homocystinuria-Megaloblastic anemia due to defect in cobalamin metabolism, cbIE complementation type

Huntington's chorea

Compare labs

Test type

reset

Clinical (85)

Test purpose

- Diagnosis (31)
- Mutation Confirmation (12)
- Pre-Implantation Genetic Diagnosis (1)
- Pre-symptomatic (21)

Test method

Molecular Genetics (38)

- Sequence analysis of the entire coding region (2)

Clinical test, Research test

Showing 1 to 20 of 85 tests for 1 condition in 80 labs

<< First < Prev Page 1 of 5 Next > Last >>

[Huntington disease](#)

Lab: [Molecular Diagnostic Laboratory Diagnostic Services of Manitoba, Health Sciences Centre site Winnipeg, Manitoba, Canada](#)

Condition	Test target	Methods
Huntington's chorea	HTT	<input checked="" type="checkbox"/> Targeted variant analysis

[Huntington's Disease](#)

Lab: [Molecular Pathology Laboratory Ohio State University Columbus, Ohio, United States](#)

Condition	Test target	Methods
Huntington's chorea	HTT	<input checked="" type="checkbox"/> Targeted variant analysis

[Huntington's Disease](#)

Lab: [Center for Human Genetics, Inc Cambridge, Massachusetts, United States](#)

Condition	Test target	Methods
Huntington's chorea	HTT	<input checked="" type="checkbox"/> Targeted variant analysis

[Huntington Disease](#)

Lab: [Knight Diagnostic Laboratories - Molecular Diagnostic Center Oregon Health and Science University Portland, Oregon, United States](#)

Condition	Test target	Methods
Huntington's chorea	HTT	<input checked="" type="checkbox"/> Targeted variant analysis

Huntington Disease Gene

<http://www.ncbi.nlm.nih.gov/gene/3064>

Entrez Gene
Genes and mapped phenotypes

Search:

[Limits](#) [Advanced search](#) [Help](#)



[Display Settings:](#) Full Report

[Send to:](#)

HTT huntingtin [*Homo sapiens*]

Gene ID: 3064, updated on 3-Jan-2011

Table of contents

- [Summary](#)
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- [General gene info](#)
- [General protein info](#)
- [Reference sequences](#)
- [Related sequences](#)
- [Additional links](#)

Summary



Official Symbol HTT provided by [HGNC](#)

Official Full Name huntingtin provided by [HGNC](#)

Primary source [HGNC:4851](#)

See related [Ensembl:ENSG00000197386](#); [HPRD:00883](#); [MIM:613004](#)

Gene type protein coding

RefSeq status REVIEWED

Organism [Homo sapiens](#)

Lineage Eukaryota; Metazoa; Chordata; Craniata; Vertebrata; Euteleostomi; Mammalia; Eutheria; Euarchontoglires; Primates; Haplorrhini; Catarrhini; Hominidae; Homo

Also known as HD; IT15; HTT

Summary Huntingtin is a disease gene linked to Huntington's disease, a neurodegenerative disorder characterized by loss of striatal neurons. This is thought to be caused by an expanded, unstable trinucleotide repeat in the huntingtin gene, which translates as a polyglutamine repeat in the protein product. A fairly broad range in the number of trinucleotide repeats has been identified in normal controls, and repeat numbers in excess of 40 have been described as pathological. The huntingtin locus is large, spanning 180 kb and consisting of 67 exons. The huntingtin gene is widely expressed and is required for normal development. It is expressed as 2 alternatively polyadenylated forms displaying different relative abundance in various fetal and adult tissues. The larger transcript is approximately 13.7 kb and is expressed predominantly in adult and fetal brain whereas the smaller transcript of approximately 10.3 kb is more widely expressed. The genetic defect leading to Huntington's disease may not necessarily eliminate transcription, but may confer a new property on the mRNA or alter the function of the protein. One candidate is the huntingtin-associated protein-1, highly expressed in brain, which has increased affinity for huntingtin protein with expanded polyglutamine repeats. This gene contains an upstream open reading frame in the 5' UTR that inhibits expression of the huntingtin gene product through translational repression. [provided by RefSeq]

Links

- [Order cDNA clone](#)
- [BioAssay, by Gene target](#)
- [BioSystems](#)
- [Books](#)
- [CCDS](#)
- [Conserved Domains](#)
- [Full text in PMC](#)
- [GEO Profiles](#)
- [Genome](#)
- [HomoloGene](#)
- [Map Viewer](#)
- [Nucleotide](#)

Huntington Disease Protein Sequence

<http://www.ncbi.nlm.nih.gov/protein/296434520?report=fasta>

Protein

Translations of Life

Search: Protein

Limits Advanced search Help

Search Clear

Display Settings: FASTA

Send to:

Change region shown

RecName: Full=Huntingtin; AltName: Full=Huntington disease protein; Short=HD protein

Swiss-Prot: P42858.2

[GenPept](#) [Graphics](#)

```
>gi|296434520|sp|P42858.2|HD_HUMAN RecName: Full=Huntingtin; AltName:
Full=Huntington disease protein; Short=HD protein
MATLEKLMKAFESLKSFQQQQQQQQQQQQQQQQQQPPPPPPPPPPQLPQPQPAQPLLQPQPQPP
PPPPPPGPAVAEEPLHRPKKELSATKKDRVNHCLTICENIVAQSVRNSPEFQKLLGIAMELFLLCSDDAE
SDVRMVADECLNKVIKALMDSNLPRLQLELYKEIKKNGAPRSLRAALWRFAELAHVLRPQKCRPYLVNLL
PCLTRTSKRPEESVQETLAAAVPKIMASFGNFANDNEIKVLLKAFIANLKSSSPTIRRTAAGSAVVICQH
SRRTQYFYSWLLNVLLGLLVPVEDEHSTLLILGVLLTLRYLVPLLQQQVQKDTSLKGSFGVTRKEMEVS
AEQLVQYVELTLHHTQHGDHNVVTGALELLQQLFRTPPELLQTLTAVGGIGQLTAAKEESGGRSRSGSI
VELIAGGSSCSPVLSRKQKGVLLGEEALEDDSESRSDVSSSALTASVKDEISGELAASSGVSTPGSA
GHDITTEQPRSQHTLQADSVDLASCDLTSSATDGDDEEDILSHSSQVSAVPSDPAMDLDNGTQASSPISD
SSQTTTEGPDSAVTPSDSSEIVLDGTDNQYLGQIQQPQDEDEEATGILPDEASEAFRNSSMALQQAHL
KNMSHCRQPSDSSVDKFLVRDEATEPGDQENKPCRIGDQIGQSTDDDSAPLVHCVRLLSASFLLTGGKNV
LVPDRDRVRSVKALALSCVGAVALHPESFFSKLYKVPDTEYPEEQYVSDILNYIDHGDPQVRGATAI
LCGTLICISLSRSRFHVGDMGTIRTLTGNFTSLADCIPLLRKTLKDESSVTCKLACTAVRNCVMSLCS
SYSELGLQLIIDVLTLRNSSYWLVRTELETLAEIDFRVLSFLEAKAENLRHGAHHTGLLKLQERVLNN
VVIHLLGDDEPRVRHVAASLIRLVPKLFYKCDQGGADPVVAVARQSSVYLKLLMHETQPPSHFSVSTI
TRIRYRGNLLPSITDVTMENNLSRVIAAVSHELITSTTRALTFGCCEALCLLSTAFPVCIWSLGHWCVP
PLSASDESRSKCTVGMATMILTLSSAWFPLDLSAHQDALILAGNLLAASAPKSLRSSWASEEEANPAAT
KQEEVWPALGDRALVPMVEQLFSHLLKVINICAHVLDVAPGPAIKAALPSLTNPPSLSPIRRKGKEKEP
```

Analyze this sequence

[Run BLAST](#)

[Identify Conserved Domains](#)

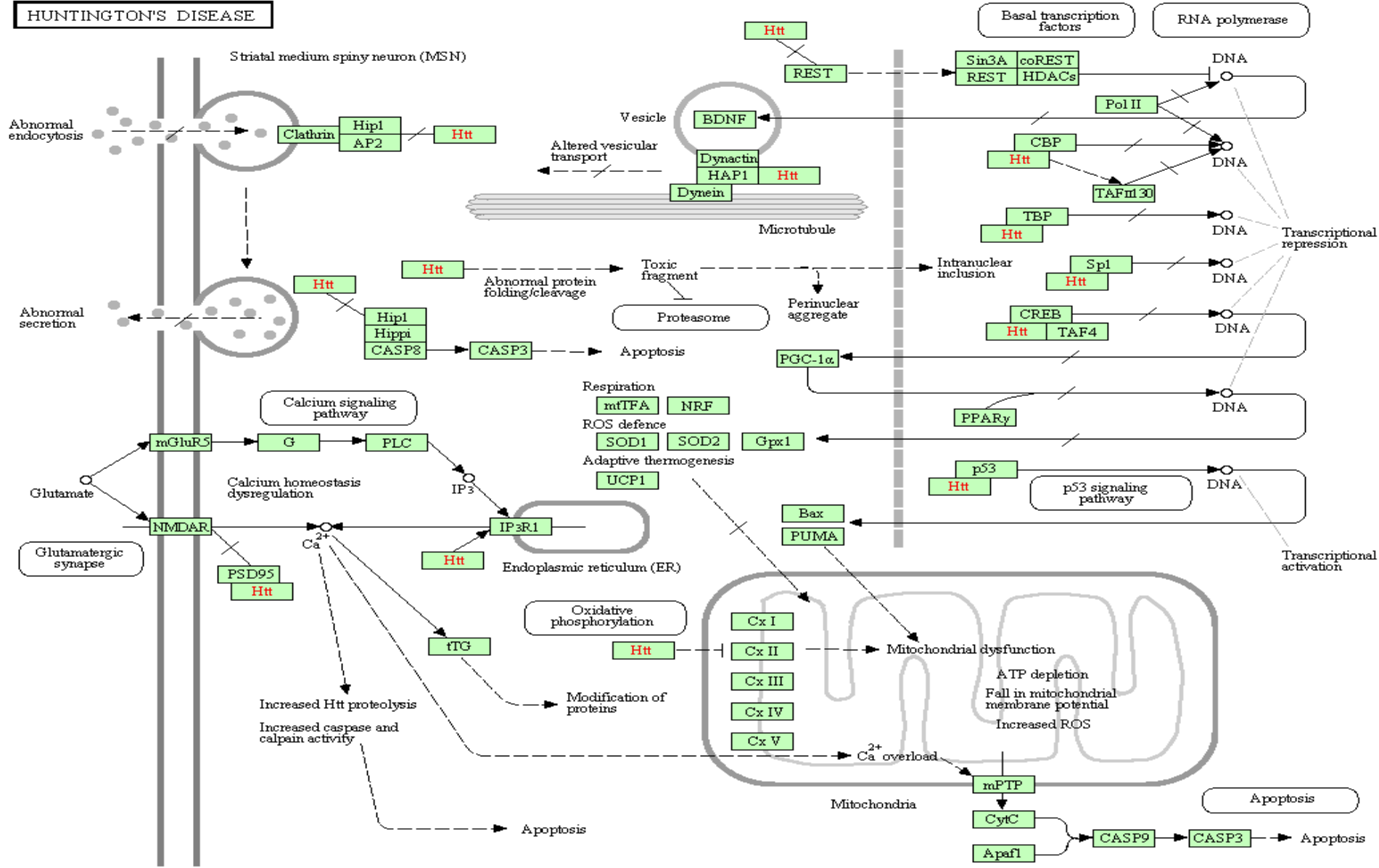
[Find in this Sequence](#)

Find in Sequence Video Tutorial

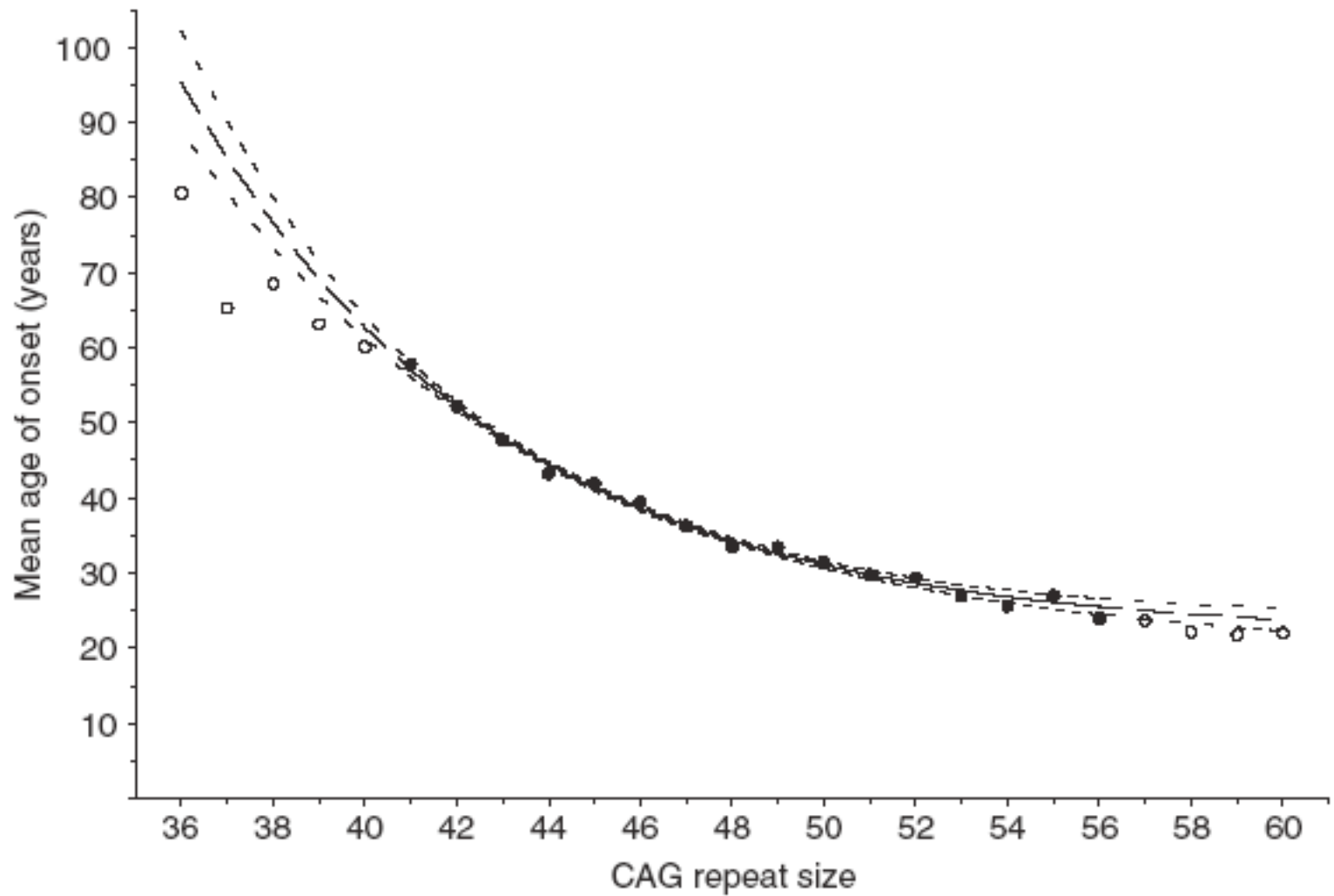
[See larger video at YouTube](#)

[See all NCBI YouTube video channel videos](#)

HUNTINGTON'S DISEASE

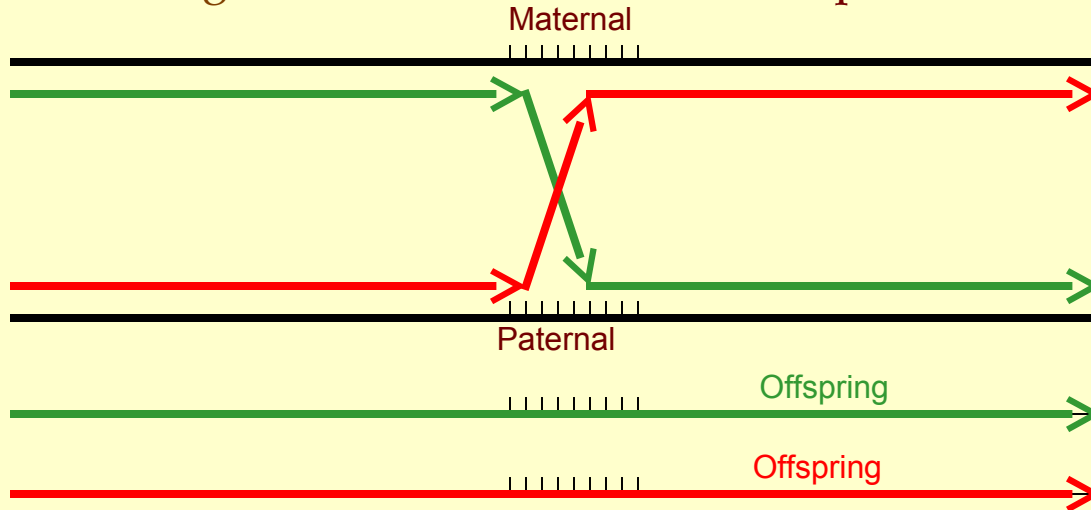


Age of Onset and Repeat Length

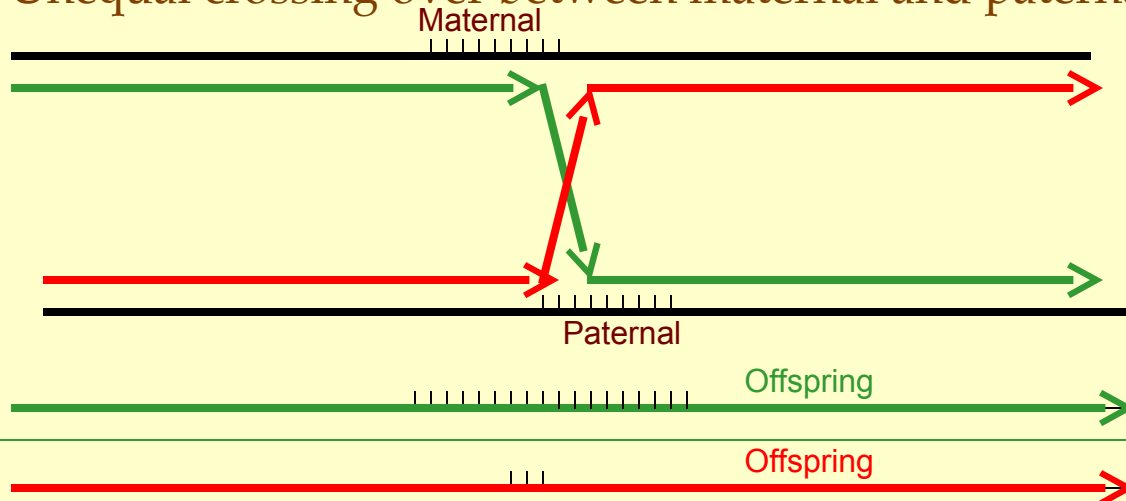


Huntington Disease can Arise from Unequal Crossing Over During Meiosis

- Crossing over between maternal and paternal chromosomes



- Unequal crossing over between maternal and paternal chromosomes



Trinucleotide Repeat Disorders

https://en.wikipedia.org/wiki/Trinucleotide_repeat_disorder



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Trinucleotide repeat disorder

From Wikipedia, the free encyclopedia



This article **needs additional citations for verification**. Please help [improve this article](#) by [adding citations to reliable sources](#). Unsourced material may be challenged and removed. *(December 2011)*

Trinucleotide repeat disorders (also known as **trinucleotide repeat expansion disorders**, **triplet repeat expansion disorders** or **codon reiteration disorders**) are a set of [genetic disorders](#) caused by [trinucleotide repeat expansion](#), a kind of mutation where [trinucleotide](#) repeats in certain [genes](#) exceed the normal, stable threshold, which differs per gene. The mutation is a subset of unstable [microsatellite](#) repeats that occur throughout all [genomic](#) sequences. If the repeat is present in a healthy [gene](#), a [dynamic mutation](#) may increase the repeat count and result in a defective gene.

Trinucleotide Repeat Disorders

https://en.wikipedia.org/wiki/Trinucleotide_repeat_disorder

Polyglutamine (PolyQ) Diseases [\[edit \]](#)

Type	Gene	Normal PolyQ repeats	Pathogenic PolyQ repeats
DRPLA (Dentatorubropallidoluysian atrophy)	ATN1 or DRPLA	6 - 35	49 - 88
HD (Huntington's disease)	HTT (Huntingtin)	6 - 35	36 - 250
SBMA (Spinal and bulbar muscular atrophy)	AR	9 - 36	38 - 62
SCA1 (Spinocerebellar ataxia Type 1)	ATXN1	6 - 35	49 - 88
SCA2 (Spinocerebellar ataxia Type 2)	ATXN2	14 - 32	33 - 77
SCA3 (Spinocerebellar ataxia Type 3 or Machado-Joseph disease)	ATXN3	12 - 40	55 - 86
SCA6 (Spinocerebellar ataxia Type 6)	CACNA1A	4 - 18	21 - 30
SCA7 (Spinocerebellar ataxia Type 7)	ATXN7	7 - 17	38 - 120
SCA17 (Spinocerebellar ataxia Type 17)	TBP	25 - 42	47 - 63

Trinucleotide Repeat Disorders

https://en.wikipedia.org/wiki/Trinucleotide_repeat_disorder

Non-Polyglutamine Diseases [edit]

Type	Gene	Codon	Normal/wild type	Pathogenic
FRAXA (Fragile X syndrome)	<i>FMR1</i> , on the X-chromosome	CGG	6 - 53	230+
FXTAS (Fragile X-associated tremor/ataxia syndrome)	<i>FMR1</i> , on the X-chromosome	CGG	6 - 53	55-200
FRAXE (Fragile XE mental retardation)	<i>AFF2</i> or <i>FMR2</i> , on the X-chromosome	CCG	6 - 35	200+
FRDA (Friedreich's ataxia)	<i>FXN</i> or X25, (frataxin—reduced expression)	GAA	7 - 34	100+
DM (Myotonic dystrophy)	<i>DMPK</i>	CTG	5 - 37	50+
SCA8 (Spinocerebellar ataxia Type 8)	<i>OSCA</i> or <i>SCA8</i>	CTG	16 - 37	110 - 250
SCA12 (Spinocerebellar ataxia Type 12)	<i>PPP2R2B</i> or <i>SCA12</i>	nnn On 5' end	7 - 28	66 - 78



HUNTINGTON'S OUTREACH PROJECT
FOR EDUCATION, AT STANFORD

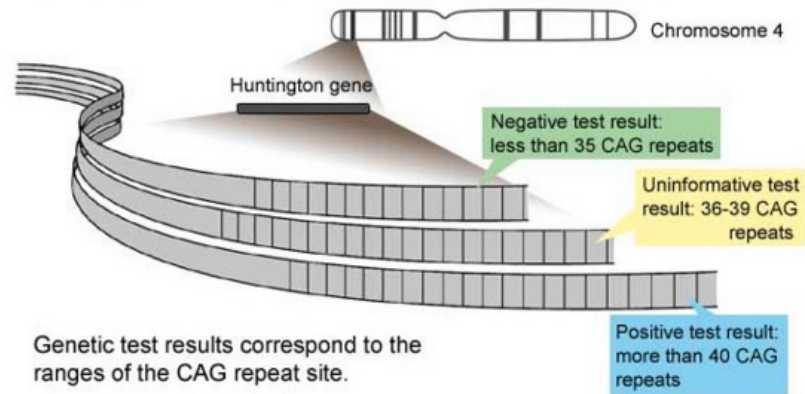


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Figure S-3: CAG Repeat Counts on the Huntington gene



The HOPES Brain
Tutorial

Cerebral Cortex

Genetic Testing

TRiC and Huntington
Protein Aggregation

Trojan Therapy
The Science Behind Trojan
Therapy



Huntington Outreach Project at Stanford

http://web.stanford.edu/group/hopes/cgi-bin/hopes_test/trinucleotide-repeat-disorders/



HUNTINGTON'S OUTREACH PROJECT
FOR EDUCATION, AT STANFORD



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Other neurodegenerative disorders

Trinucleotide Repeat Disorders

By Stephanie Liou 26 Jun, 2010 Other neurodegenerative disorders

When the cause of a disease can be traced to having too many copies of a certain nucleotide triplet in the DNA, the disease is said to be a trinucleotide repeat disorder. Today, there are 14 documented trinucleotide repeat disorders that affect human beings**. Huntington's Disease is part of this group.

Some of these 14 trinucleotide repeat disorders are more alike than others. While the symptoms and the affected body parts vary by disease, scientists consider two illnesses to be similar if they share the same repeated codon as their cause. Six of the 14 trinucleotide repeat disorders have little or no apparent similarity to each other, or to the 8 remaining diseases. These 6 are described in brief at the end of this section. The 8 remaining disorders, one of which is Huntington's Disease, all share the same repeated codon as their cause: CAG. Since CAG codes for an amino acid called glutamine, these 8 trinucleotide

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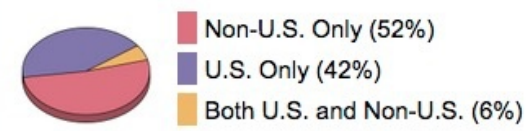
Example: "Heart attack" AND "Los Angeles"

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Locations of Recruiting Studies



Total N = 34,362 studies
Data as of January 20, 2015

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Huntington Disease Clinical Trials

<https://clinicaltrials.gov/ct2/results?term=Huntington+Disease&recr=Open/>

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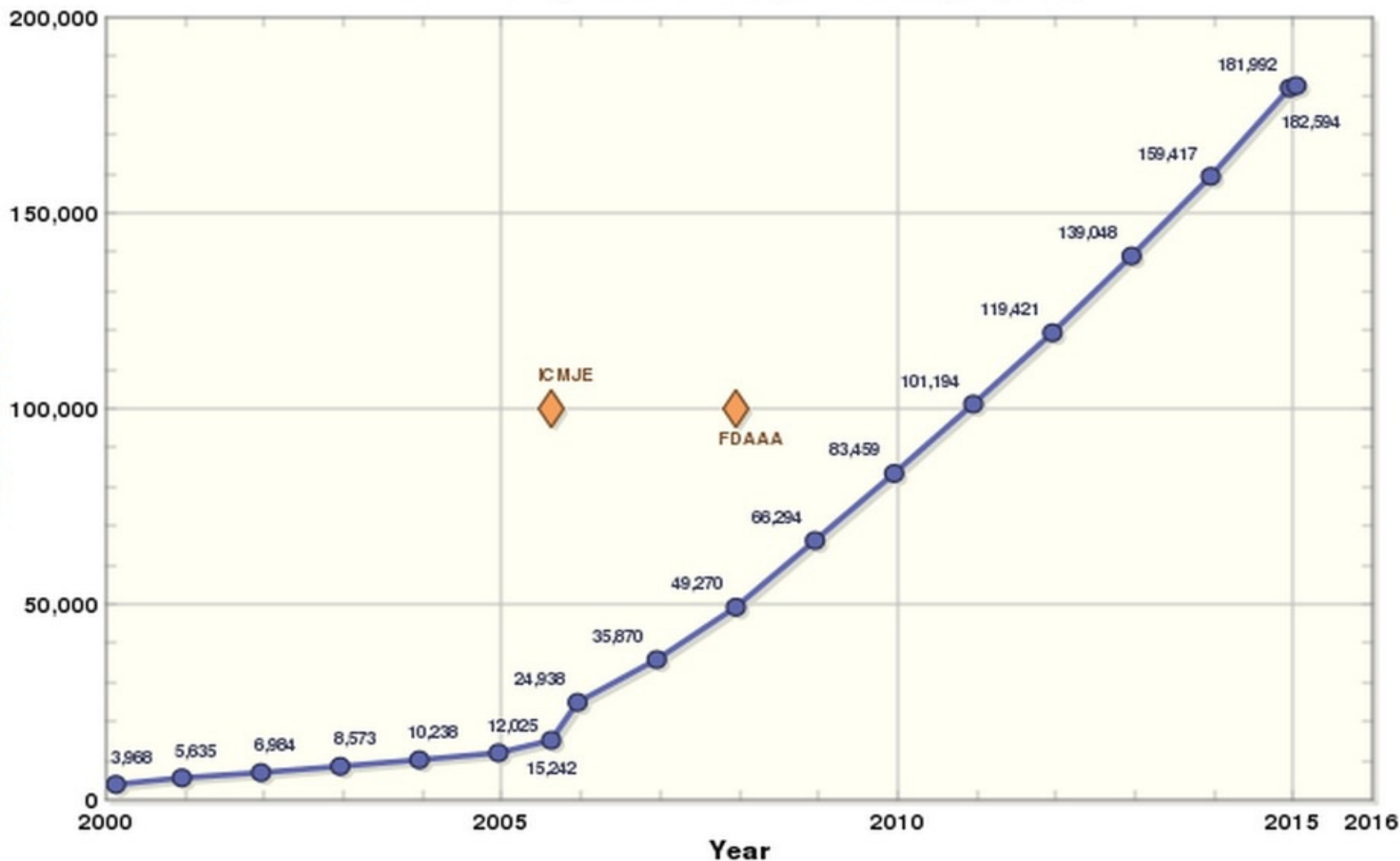
Include only open studies Exclude studies with unknown status

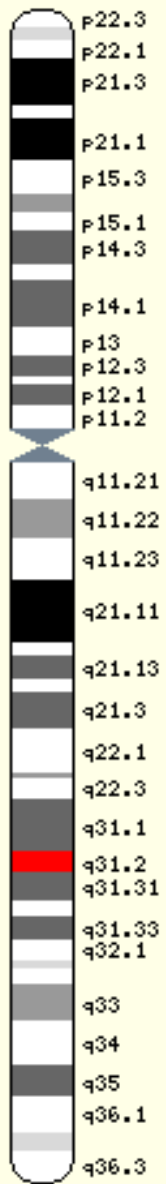
Rank	Status	Study
1	Recruiting	Study of Huntington Patients in Connection With European Huntington's Disease Network (EHDN) Condition: Huntington Disease Intervention:
2	Recruiting	REGISTRY - an Observational Study of the European Huntington's Disease Network (EHDN) Conditions: Huntington Disease; Huntington's Disease Intervention:
3	Recruiting	Brain Structure and Function in Children at Risk for Huntington's Disease Condition: Huntington's Disease Intervention:
4	Recruiting	A Phase 2, to Evaluating the Safety and Efficacy of Pridopidine Versus Placebo for Symptomatic Treatment in Patients With Huntington's Disease Condition: Huntington's Disease Interventions: Drug: Pridopidine; Other: Placebo

Registered Studies in Clinical Trials

<https://clinicaltrials.gov/ct2/resources/trends>

**Number of Registered Studies Over Time
and Some Significant Events (as of January 20, 2015)**

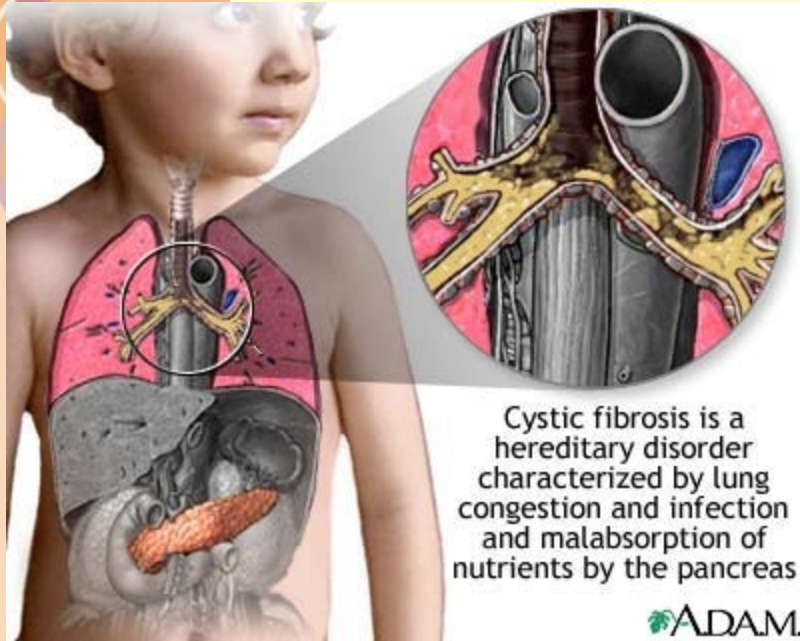




Cystic Fibrosis

- Autosomal (chromosome 7q31.2) recessive.
- Inhibits many bodily secretions
 - Pancreatic digestive enzymes
 - Sweat glands
 - Lung mucosa in alveoli and bronchi
 - Infertility in males (>97%)
 - Cirrhosis of the liver
 - Hepatic steatosis
- Caused by mutations in the CFTR gene that encodes a chloride ion channel that pumps chloride ion and water out of cells.

Cystic Fibrosis



Cystic fibrosis is a hereditary disorder characterized by lung congestion and infection and malabsorption of nutrients by the pancreas

ADAM.

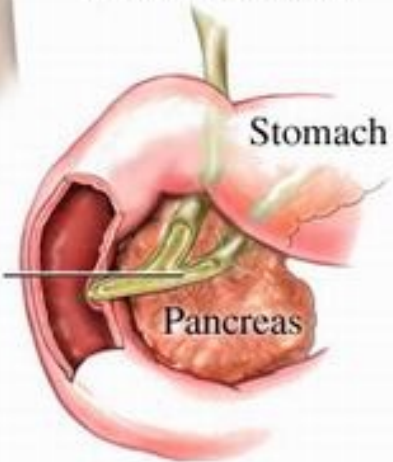


Mucus blocks air sacs (alveoli) in the lungs

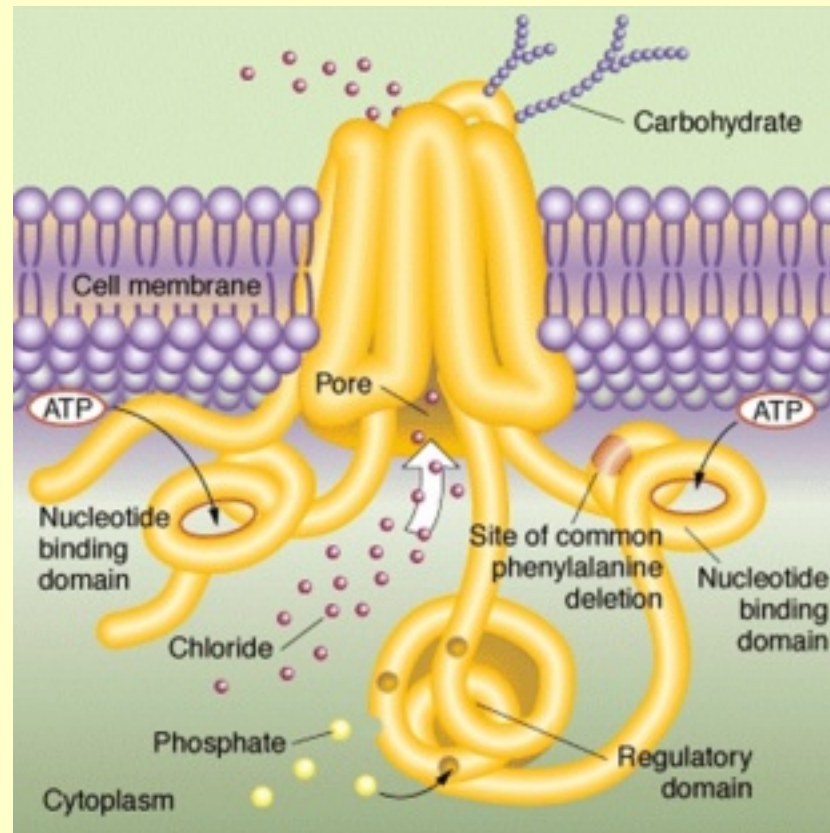


Mucus blocks pancreatic ducts

Pancreatic duct



Cystic Fibrosis Transmembrane Conductance Regulator



CFTR is a chloride/water ion channel or pore

Mutations Causing Cystic Fibrosis

Mutation	Relative Frequency	Mutation Functional Class ¹
$\Delta F508$	66.0%	II
G542X	2.4%	I
G551D	1.6%	III
N1303Lys	1.3%	II
W1282X	1.2%	I
R553X	0.7%	I
621+1G>T	0.7%	I
1717-1G>A	0.6%	I
R117H	0.3%	IV
R1162X	0.3%	Not clear ⁴

Population Group	Approximate Carrier Frequency
Ashkenazi Jewish	1:29
North American Caucasian	1:28
African American	1:61

Genetic and Medical Web Sites

- National Library of Medicine and the
- National Center for Biotechnology Information
 - Genes and Diseases
 - Genetics Home Reference
 - Medline Plus
 - GeneReviews
 - Genetic Testing Registry
 - Clinical Trials

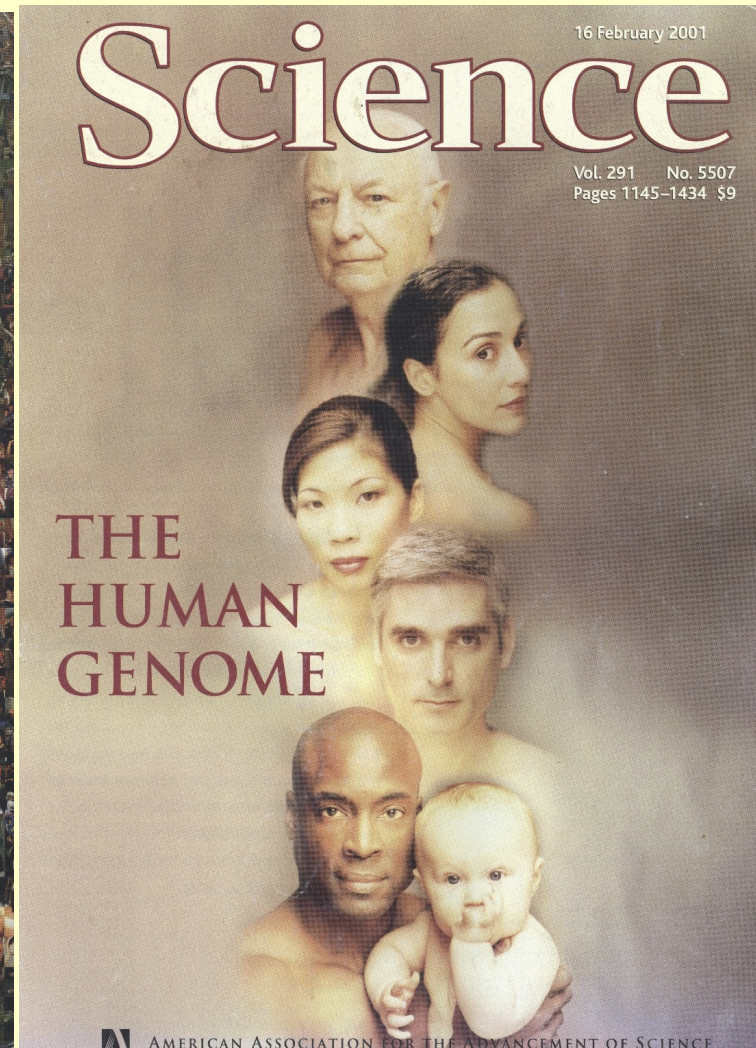
Where would you go for information on inherited diseases?

- Google or Google Scholar?
- National Center for Biotechnology Information
- Genes and Disease
- Genetics Home Reference
- Medline Plus
- Gene Reviews
- Online Mendelian Inheritance in Man (OMIM)
- MedGen – human medical genetics
- PubMed Keywords or PubMed MeSh search?
- PubMed Central
- PubMed Health
- Clinical Trials Database

Human Genome First draft February 2001

Public Effort

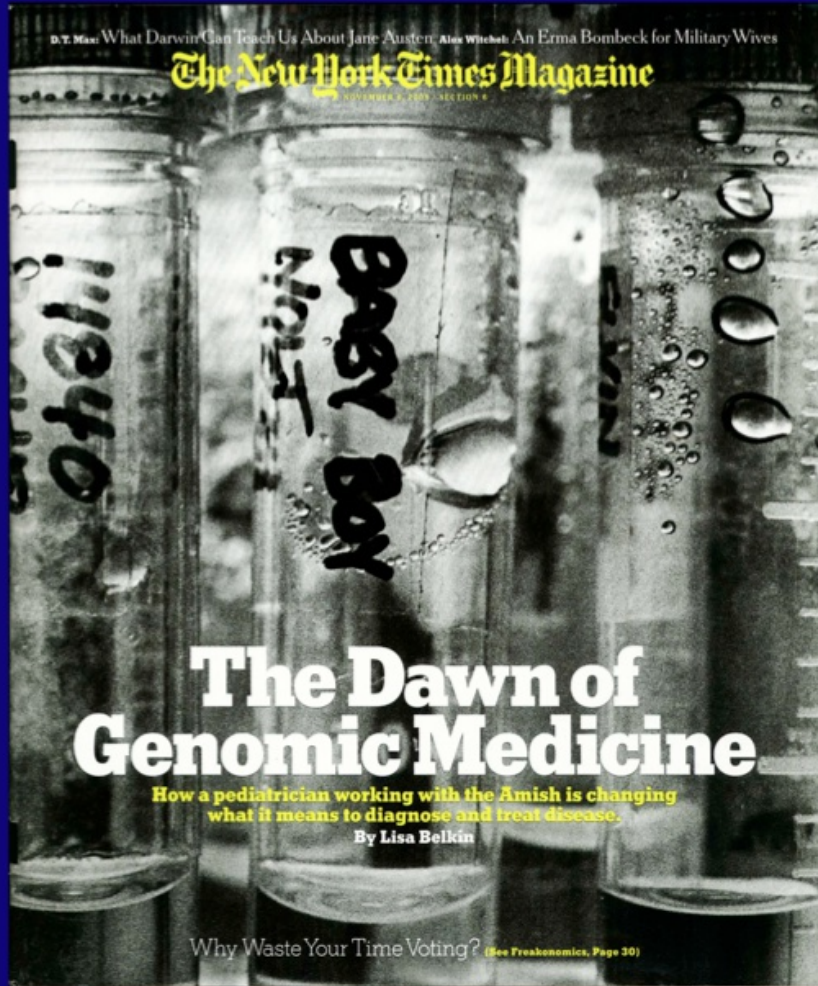
Private Effort (Celera)



April, 2003 Completion



Genomic Medicine



Genomic Medicine

*Healthcare tailored to the individual
based on genomic information*



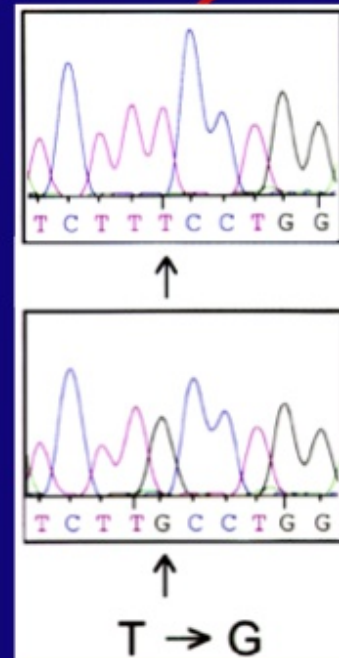
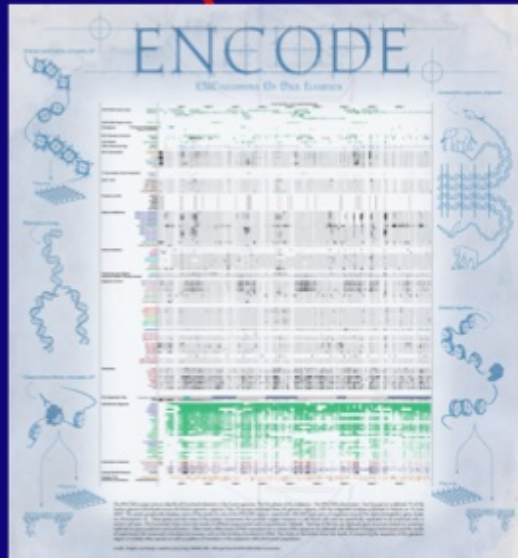
The Pathway to Genomic Medicine

**Interpreting
the Human
Genome Sequence**

**Implicating
Genetic Variants
with Human Disease**



HGP



**Realization of
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Highlights

NIH genome sequencing program targets the genomic bases of common, rare disease

The National Institutes of Health will fund a set of genome sequencing and analysis centers whose research will focus on understanding the genomic bases of common and rare human diseases. On January 14, the National Human Genome Research Institute (NHGRI), part of NIH, launched the Centers for Common Disease Genomics (CCDG), which will use genome sequencing to explore the genomic contributions to common diseases. [Read more](#)



Genome Advance of the Month

Gene-editing technology harnessed to protect plants from viruses



Scientists are using an exciting gene editing tool called CRISPR/Cas9 to protect plants from harmful DNA viruses. The CRISPR/Cas9 system has previously been adapted for use in many organisms, and this latest iteration develops gene-editing for use in plants. The November *Genome Advance of the Month* describes how these scientists inserted the code for an ancient bacterial immune system into a plant's genome to successfully strengthen the plant's protection against viruses. [Read more](#)

The Genomics Landscape

Future of ENCODE: Looking Deeper into Genome Function

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GenomeTV



Family Health History Day - Dr. Eric Green



Newsroom

[Scientists create world's largest catalog of human genomic variation](#)
September 30, 2015

[Grants to help identify variants in the genome's regulatory regions that affect disease risk](#)
September 21, 2015

[Undiagnosed Diseases Network launches online application portal](#)
September 16, 2015

[NIH grants seek best ways to combine genomic information and EHRs](#)
September 1, 2015

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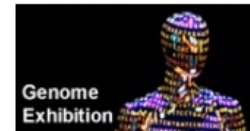
NHGRI Director



NHGRI Brochure



Image Gallery



Genome Exhibition

Genome: Unlocking Life's Code

<http://www.genome.gov/Smithsonian/>



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Smithsonian NHGRI Genome Exhibition >

Talking Glossary

Genome: Unlocking Life's Code

GENOME
UNLOCKING
LIFE'S
CODE



The Genome Unlocking Life's Code Exhibition

On June 14, 2013, the Smithsonian Institution in Washington, D.C. opened the high-tech, high-intensity exhibition **Genome: Unlocking Life's Code** to celebrate the 10th anniversary of researchers producing the first complete human genome sequence - the genetic blueprint of the human body - in April 2003. The exhibition is a collaboration between the Smithsonian's National Museum of Natural History (NMNH) and the National Human Genome Research Institute (NHGRI) of the National Institutes of Health.

Ongoing Programs

- **Exhibition Website:** [Genome: Unlocking Life's Code](http://www.genome.gov/Smithsonian/) [unlockinglifescode.org]
- **Traveling Exhibit** [unlockinglifescode.org]
- **Past Public Education Programs and Events**

Genome: Unlocking Life's Code

<http://www.genome.gov/Smithsonian/>

Ongoing Programs







- **Exhibition Website:** [Genome: Unlocking Life's Code](http://unlockinglifescode.org) [unlockinglifescode.org]
- **Traveling Exhibit** [unlockinglifescode.org]
- **Past Public Education Programs and Events**

Information to Enhance Your Visit

The Genomics Landscape a Decade After the Human Genome Project

Information and events about the 10th anniversary of the the Human Genome Project completion.



Genome: Unlocking Life's Code - Videos and Animations

-  [Genome: Unlocking Life's Code](#) (2 videos)
-  [History Channel ® Videos](#) (4 Videos)
-  [Medical Mystery Videos](#) (3 Videos)
-  [Parts of the Cell, Chromosomes and Genes](#) (23 animations)
-  [What's a Gene?](#)
Listen to some well-known scientists respond to the question, "What's a gene?"
-  [The African Diaspora: Integrating Culture, Genomics and History](#)
Videos from the September 12, 2013 symposium at the Smithsonian's National Museum of Natural History.



Knome®

The Human Genome Interpretation Company™

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Genome Voyager™ ALPHA



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Accurate Whole Human Genome Sequencing & Analysis

Complete Genomics is a leader in accurate whole human genomic sequencing. Using our proprietary sequencing instruments, chemistry, and software, we have sequenced more than 15,000 whole human genomes for our research customers over the past three years. Our mission is to provide the technology for sequencing one million human genomes, enabling researchers and clinicians to improve human health through the prevention, diagnosis, and treatment of genetic diseases and conditions.

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Genomes

Decoded and Delivered

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Learn how we make your clinical R&D more efficient →

Software and services that simplify the analysis and visualization of genome-scale data in clinical research and development. →





Opal: Unlocking individualized medicine

Advances in whole-genome sequencing technology are paving the way for genome analysis to become a routine part of healthcare delivery. Interpretation of genomes is the key factor limiting their utility for clinical applications.

Introducing Omicia Opal

Omicia Opal empowers researchers and clinicians to analyze genomes and prioritize disease-causing variants and genes.

Omicia Opal combines powerful, peer-reviewed analysis tools with proprietary disease gene sets into an interactive genome mining, filtering, prioritizing, and reporting environment.

Omicia Opal is cloud-based, scalable, and secure. Genome interpretation is now at your fingertips.





GENOMICS PROMISES TO ADVANCE HEALTH

Our health depends upon both our genes and our environmental exposure. The current revolution in genomics makes it possible not only to determine our entire DNA sequence but also to begin to understand how our specific genome sequence can inform our health. In addition, our Center has recently demonstrated that it is possible to measure tens of thousands of components in blood to obtain a clear picture of our molecular picture during healthy and disease states. A combination of such sequence and molecular omics profiling is expected to be powerful in preventing, detecting, understanding, and treating complex diseases such as cancer and inherited diseases that are otherwise difficult to diagnose. [Learn more ...](#)

SCGPM FACILITATES TRANSLATION OF GENOMICS INTO PATIENT CENTERED MEDICINE

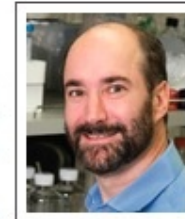


SCGPM
Brochure

The Stanford Center for Genomics and Personalized Medicine (SCGPM) seeks to advance genomic technology so that someday both genetic and molecular profiling will become powerful and routine tools for predicting disease risk and monitoring and treating a wide range of pathologies. Towards this mission, the SCGPM serves to centralize and develop collaborative intellectual and technological resources that promote genomic research and analysis, predict drug response, educate physicians, and examine the ethics of personalized medicine. This includes large basic science projects such as ENCODE that decipher the human genome as well as clinical research projects such as the sequencing of cancer genomes and individuals with inherited diseases. Through these efforts, the Center aims to bring genomics to the clinic.

A MESSAGE FROM THE DIRECTOR

"Genomics is transforming both biological research and medicine. Stanford has long been a leader in this area and continues to develop new approaches to revolutionize the way medicine is practiced, so that disease can be rapidly diagnosed and the right treatment is applied at the right time."



Mike Snyder, PhD

Chair, Stanford Department of Genetics
Stanford W. Ascherman, MD, FACS, Professor of Genetics
Director, SCGPM

ANNOUNCEMENTS

2013 SGTP Symposium

4th Annual Symposium on Genomics and Personalized Medicine

[View Announcement and Registration](#)

*Note: Registration deadline is March 29, 2013;
open to Stanford community only*

SCGPM MEMBER RESEARCH AND NEWS

SCGPM Members & Staff

- » Executive Committee
- » Affiliated Faculty
- » Staff

News & Events

- » 2013 SGTP Symposium Announcement & Registration
- » Members in the News
- » Stanford Seminars

Scientific Background

- » General Information
- » Genome & Genome Variation

Portrait of a Glitch

- Revere La Noue, MFA, Stanford, 2005

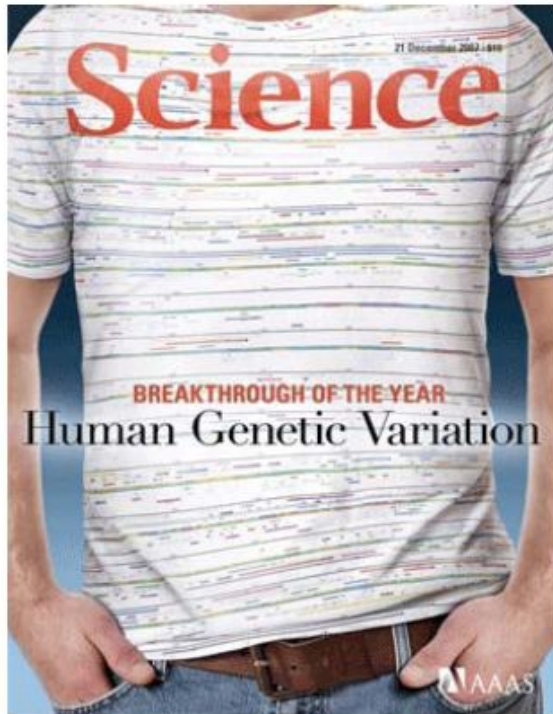


Portrait of a Glitch

- Revere La Noue, MFA, Stanford, 2005
- What is this film about?
- What classes of glitches are mentioned?
- What do these glitches cause?
- Why did I show this film?

2007 SCIENTIFIC BREAKTHROUGH OF THE YEAR

Science Magazine, December 21, 2007



“It’s all about me!”

Single Nucleotide Polymorphisms (SNPs)

SNP



SNP



Individual 1

A A C A **C** G C C A T T C G **G** G G T C

Individual 2

A A C A **C** G C C A T T C G **A** G G T C

Individual 3

A A C A **T** G C C A T T C G **G** G G T C

Individual 4

A A C A **C** G C C A T T C G **G** G G T C

The Great Wave of GWAS Studies

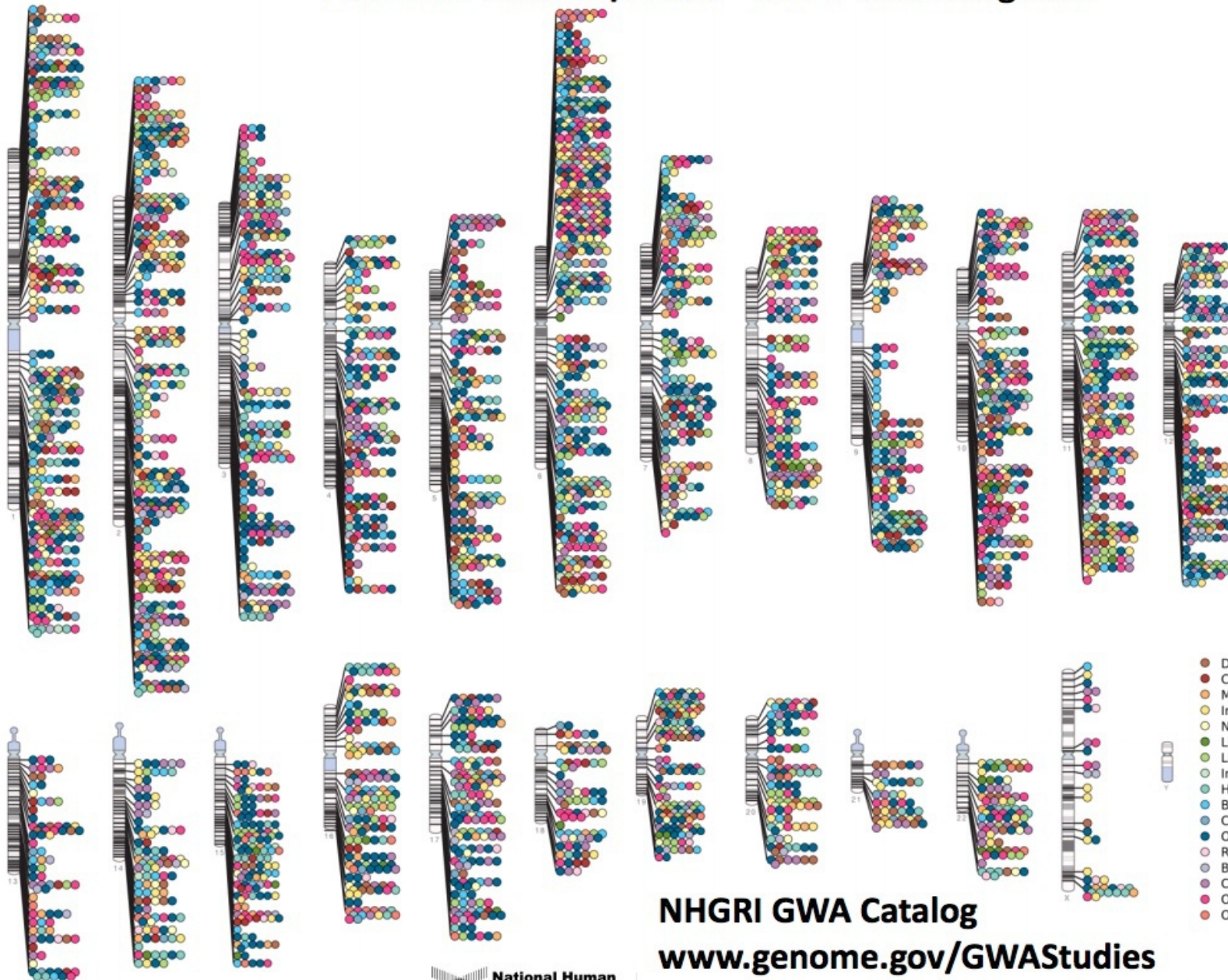
<http://www.genome.gov/gwastudies/>



Hokusai, K. *The Great Wave*

Published Genome-Wide Associations through 12/2013

Published GWA at $p \leq 5 \times 10^{-8}$ for 17 trait categories



- Digestive system disease
- Cardiovascular disease
- Metabolic disease
- Immune system disease
- Nervous system disease
- Liver enzyme measurement
- Lipid or lipoprotein measurement
- Inflammatory marker measurement
- Hematological measurement
- Body measurement
- Cardiovascular measurement
- Other measurement
- Response to drug
- Biological process
- Cancer
- Other disease
- Other trait

NHGRI GWA Catalog

www.genome.gov/GWASudies

www.ebi.ac.uk/fgpt/gwas/

- Abdominal aortic aneurysm
- Acute lymphoblastic leukemia
- Adhesion molecules
- Adiponectin levels
- Age-related macular degeneration
- AIDS progression
- Alcohol dependence
- Alopecia areata
- Alzheimer disease
- Amyloid A levels
- Amyotrophic lateral sclerosis
- Angiotensin-converting enzyme activity
- Ankylosing spondylitis
- Arterial stiffness
- Asparagus anosmia
- Asthma
- Atherosclerosis in HIV
- Atrial fibrillation
- Attention deficit hyperactivity disorder
- Autism
- Basal cell cancer
- Behcet's disease
- Bipolar disorder
- Biliary atresia
- Bilirubin
- Bitter taste response
- Birth weight
- Bladder cancer
- Bleomycin sensitivity
- Blond or brown hair
- Blood pressure
- Blue or green eyes
- BMI, waist circumference
- Bone density
- Breast cancer
- C-reactive protein
- Calcium levels
- Cardiac structure/function
- Cardiovascular risk factors
- Carnitine levels
- Carotenoid/tocopherol levels
- Celiac disease
- Celiac disease and rheumatoid arthritis
- Cerebral atrophy measures
- Chronic lymphocytic leukemia
- Chronic myeloid leukemia
- Cleft lip/palate
- Coffee consumption
- Cognitive function
- Conduct disorder
- Colorectal cancer
- Corneal thickness
- Coronary disease
- Creutzfeldt-Jakob disease
- Crohn's disease
- Crohn's disease and celiac disease
- Cutaneous nevi
- Cystic fibrosis severity
- Dermatitis
- DHEA-s levels
- Diabetic retinopathy
- Dilated cardiomyopathy
- Drug-induced liver injury
- Drug-induced liver injury (amoxicillin-clavulanate)
- Endometrial cancer
- Endometriosis
- Eosinophil count
- Eosinophilic esophagitis
- Erectile dysfunction and prostate cancer treatment
- Erythrocyte parameters
- Esophageal cancer
- Essential tremor
- Exfoliation glaucoma
- Eye color traits
- F cell distribution
- Fibrinogen levels
- Folate pathway vitamins
- Follicular lymphoma
- Fuch's corneal dystrophy
- Freckles and burning
- Gallstones
- Gastric cancer
- Glioma
- Glycemic traits
- Hair color
- Hair morphology
- Handedness in dyslexia
- HDL cholesterol
- Heart failure
- Heart rate
- Height
- Hemostasis parameters
- Hepatic steatosis
- Hepatitis
- Hepatocellular carcinoma
- Hirschsprung's disease
- HIV-1 control
- Hodgkin's lymphoma
- Homocysteine levels
- Hypospadias
- Idiopathic pulmonary fibrosis
- IFN-related cytopeni
- IgA levels
- IgE levels
- Inflammatory bowel disease
- Insulin-like growth factors
- Intracranial aneurysm
- Iris color
- Iron status markers
- Ischemic stroke
- Juvenile idiopathic arthritis
- Keloid
- Kidney stones
- LDL cholesterol
- Leprosy
- Leptin receptor levels
- Liver enzymes
- Longevity
- LP (a) levels
- LpPLA(2) activity and mass
- Lung cancer
- Magnesium levels
- Major mood disorders
- Malaria
- Male pattern baldness
- Mammographic density
- Matrix metalloproteinase levels
- MCP-1
- Melanoma
- Menarche & menopause
- Meningococcal disease
- Metabolic syndrome
- Migraine
- Moyamoya disease
- Multiple sclerosis
- Myeloproliferative neoplasms
- Myopia (pathological)
- N-glycan levels
- Narcolepsy
- Nasopharyngeal cancer
- Natriuretic peptide levels
- Neuroblastoma
- Nicotine dependence
- Obesity
- Open angle glaucoma
- Open personality
- Optic disc parameters
- Osteoarthritis
- Osteoporosis
- Otosclerosis
- Other metabolic traits
- Ovarian cancer
- Pancreatic cancer
- Pain
- Paget's disease
- Panic disorder
- Parkinson's disease
- Periodontitis
- Peripheral arterial disease
- Personality dimensions
- Phosphatidylcholine levels
- Phosphorus levels
- Photic sneeze
- Phytosterol levels
- Platelet count
- Polycystic ovary syndrome
- Primary biliary cirrhosis
- Primary sclerosing cholangitis
- PR interval
- Progranulin levels
- Progressive supranuclear palsy
- Prostate cancer
- Protein levels
- PSA levels
- Psoriasis
- Psoriatic arthritis
- Pulmonary funct. COPD
- QRS interval
- QT interval
- Quantitative traits
- Recombination rate
- Red vs.non-red hair
- Refractive error
- Renal cell carcinoma
- Renal function
- Response to antidepressants
- Response to antipsychotic therapy
- Response to carbamazepine
- Response to clopidogrel therapy
- Response to hepatitis C treat
- Response to interferon beta therapy
- Response to metformin
- Response to statin therapy
- Restless legs syndrome
- Retinal vascular caliber
- Rheumatoid arthritis
- Ribavirin-induced anemia
- Schizophrenia
- Serum metabolites
- Skin pigmentation
- Smoking behavior
- Speech perception
- Sphingolipid levels
- Statin-induced myopathy
- Stroke
- Sudden cardiac arrest
- Suicide attempts
- Systemic lupus erythematosus
- Systemic sclerosis
- T-tau levels
- Tau AB1-42 levels
- Telomere length
- Testicular germ cell tumor
- Thyroid cancer
- Thyroid volume
- Tooth development
- Total cholesterol
- Triglycerides
- Tuberculosis
- Type 1 diabetes
- Type 2 diabetes
- Ulcerative colitis
- Urate
- Urinary albumin excretion
- Urinary metabolites
- Uterine fibroids
- Venous thromboembolism
- Ventricular conduction
- Vertical cup-disc ratio
- Vitamin B12 levels
- Vitamin D insufficiency
- Vitiligo
- Warfarin dose
- Weight
- White cell count
- White matter hyperintensity
- YKL-40 levels



Personal Genomics: 23andMe

<https://www.23andme.com/>



23andMe genetics just got personal.

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ancestry

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With a simple saliva sample we'll help you gain insight into your traits, from baldness to muscle performance. Discover risk factors for 94 diseases. Know your predicted response to drugs, from blood thinners to coffee. And uncover your ancestral origins.

Plus, get alerts as new discoveries are made about your DNA!*

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Your Ancestry

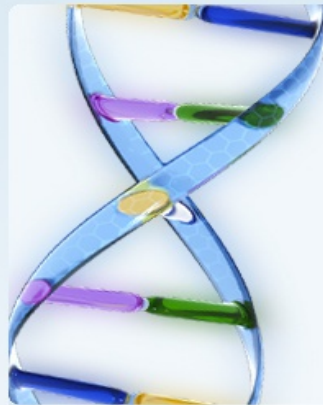
- Trace your ancestral lineage
- Find and connect with family members
- Uncover your heritage



You'll also get exclusive access to participate in groundbreaking genetic research.

Gene-ius. A smart way to look at your health.

Navigenics is the leading provider of clinically guided genetic analysis. Our goal is to empower you with genetic insights to help motivate you to improve your health. We also put a premium on privacy, keeping you in control of your genetic information.



New: Your genes, your medications

Will a new medication be effective for you? Will a treatment cause serious side effects? Now, genetic insights from Navigenics can help you and your doctor select **medications** that may be right for your genetic makeup.

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Success Stories



"We hear a lot of different – and sometimes conflicting – opinions about how to take care of our health. I'm very excited about receiving only the most relevant information to me, based on my DNA."

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Find a physician

Find a physician in your area who offers the Navigenics genetic testing services, so you can focus your health plan on prevention.

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Next Steps

- I'm new to Navigenics
- Adding to family history
- Genetic testing: Myths and truths
- Genetic knowledge can help you

For Physicians

- Free educational webinars
- More personalized care
- Genetic counselors for patients and you
- Foundation that rests on strong science

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We deliver guidance and decision support for genomic medicine to patients, providers and payors — reducing health risks, preventing disease, and better targeting therapies.

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President & CEO, Genetic Alliance

WEBINAR - Healthcare Plans
Learn about innovative utilization management and clinical decision support to manage genetic testing and molecular diagnostics.

Guest Speaker — Dr. Lou Hochheiser, Humana, Inc.

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We enable providers to integrate genomic medicine into clinical care resulting in improved outcomes and quality.

HEALTHCARE PLANS

We help healthcare plans manage genetic testing to improve outcomes and reduce costs.

EMPLOYERS

We help employers integrate personalized medicine programs that result in cost savings and healthier lives.

CONSUMERS

Find information about genetic testing and resources near you.

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Genetic Counseling

Understanding your risks,
being prepared



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Independent genetic counseling assures that our genetic testing advice is the most appropriate for you. [Learn More>>](#)

SCHEDULE
APPOINTMENT

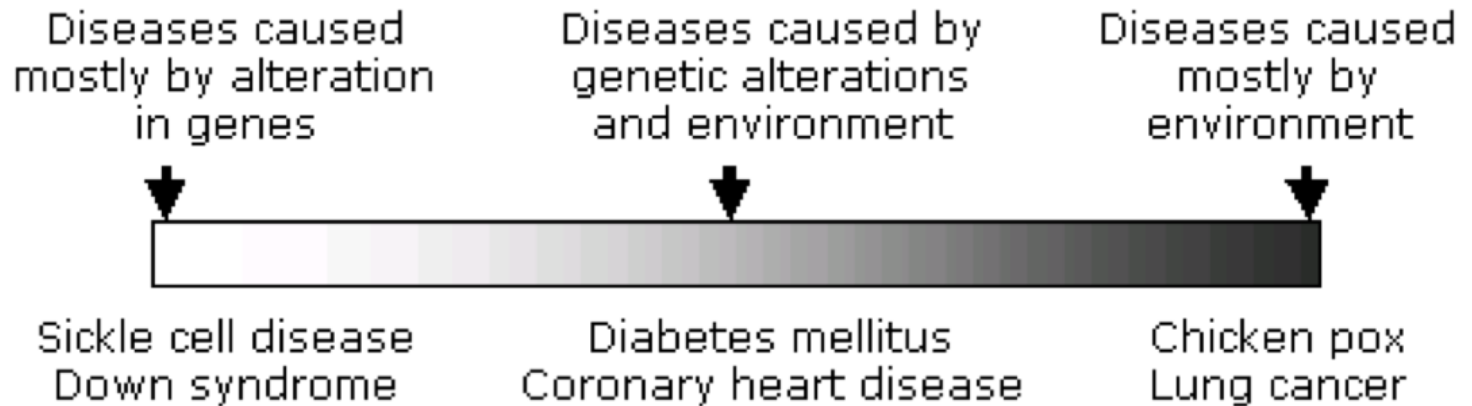

To schedule a telephone appointment with a genetic counselor

[Click here](#)
or call

1-800-975-4819

We accept most commercial health insurance plans.

Genetic Penetrance



Genetic diseases, at the left of the spectrum, are categorized as **single gene** or **chromosomal** disorders, depending on the **specific genetic cause**.

Diseases in the middle of the spectrum — including most common diseases — are **multifactorial**, and result from the interaction or additive effect of genetic and non-genetic factors.