



HOW TO READ **CTNNB1 GENETIC RESULTS**

TONY KING

VERSION 1.0

GENES 101



RIBOSOME READER

When a mutation occurs in a codon (word) it causes the wrong amino acid to be produced which causes Ribosomes (the reader) in a cell to translate the sentence (protein) incorrectly. Specific one letter changes can code for ending the synthesis ie an early termination. The protein is now shorter than normal and can be missing critical parts.

TYPES OF GENE MUTATIONS



Chromosomes are like encyclopedias; one set is from the mother, one is from the father



Genes are like pages of descriptions.

RED

RDD

THE CAR WAS RED

THE WAS RED

Mutations are like misspelled words or the disruption of a sentence

MISSENSE MUTATIONS change one word or letter

THE CAR WAS RED → THE CAR WAS HAT
→ THE CAR WAS RDD

NONSENSE MUTATIONS end the instructions too soon

THE CAR WAS RED → THE CAR

INSERTION MUTATIONS add one word or letter

THE CAR WAS RED → THE CAR HAT WAS RED
→ THE CAR ESW ASR ED

DELETION MUTATIONS

THE CAR WAS RED → THE WAS RED
→ THE RWA SRE D

**Insertions and deletions can disrupt the three letters per codon rule causing a frameshift mutation. Ribosomes in a cell only read genes in groups of three bases. The shift alters all the downstream codons effectively disrupting the production of the protein – Beta Catenin in our case.*

TYPES OF MUTATIONS EXPLAINED



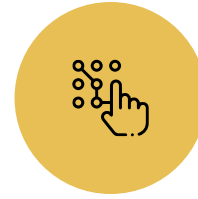
MISSENSE

- Change in letter changes single amino acid
- Protein made but may be incorrect since wrong amino acid



NONSENSE

- Change in letter leads to “stop” instruction codon
- No protein or a very shortened protein is made



FRAMESHIFT

Insertion/deletion

- Affects pattern of ‘3 letters= 1 codon’
- Change in letter affects multiple amino acids
- Protein may or not may not be made, possibly wrong shape



SPLICE SITE

- Changes part of gene that affects how gene is processed into instruction to make protein
- Without correct instruction, protein not made correctly or at all



AN EXAMPLE



Specimen Type:

OraCollect Buccal

Date Specimen Received:

11/6/2018

Submitters ID No:

56270996

Date Test(s) Started:

11/7/2018

Ordered By:

DR. REBECCA AHRENS-NICKLAS

Date of Report:

2/5/2019

Test(s) Requested:

Diagnostic Testing / XomeDx / Whole Exome Sequence Analysis

Clinical Indication:

Male with global developmental delay, speech disorder, spastic diplegia, abnormal muscle tone, and microcephaly

A sample from this individual's father (GeneDx #1910476) and mother (GeneDx #1910511) were also submitted for variant segregation analysis by whole exome sequencing.

1. Causative Variants in Disease Genes Associated with Reported Phenotype:

Gene	Disease	Mode of Inheritance	Variant	Coding DNA	Zygosity	Inherited From	Classification
CTNNB1	CTNNB1-Related Disorder	Autosomal Dominant	p.R587X	c.1759 C>T	Heterozygous	De Novo	Pathogenic Variant

ACMG Secondary Findings:

None identified.

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Gene – CTNNB1

There are approximately 30,000 genes in the human genome, each of them have a specific name, and they each provide the instructions to make an average of 3 proteins. Each protein has a specific job to do in the body. CTNNB1 is one of these genes and it produces the protein Beta Catenin. Beta Catenin is responsible for cell to cell adhesion and gene transcription.

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Disease– CTNNB1 Related Disorder

Aka CTNNB1 Syndrome is a rare and generally non-inherited genetic neurological disorder. Some genes are associated with more than one disorder or set of symptoms. An individual's specific symptoms or disorder often depends on the type of mutation you have and where your mutation falls within your gene. (aka did it occur in the beginning, middle, or end).

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Mode of Inheritance– Autosomal Dominant

Autosomal just means the genetic disease is located on one of the numbered, or non-sex, chromosomes. Dominant simply means a single copy of the disease mutation is enough to cause a disease. In contrast, a Recessive disorder means two copies of the mutation are needed to cause disease.



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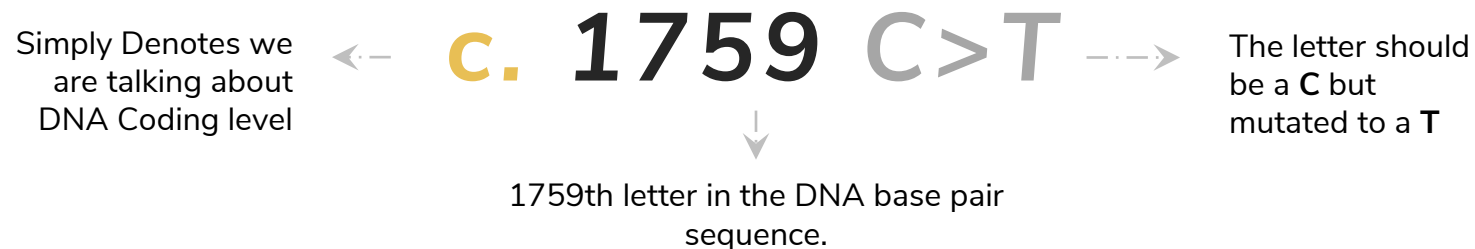
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Coding DNA – c.1759 C>T

Precisely where in the DNA the mutation occurred.



The 1759th letter of the CTNNB1 gene should be a C but was mutated to a T.

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Variant – p.R587x- aka Gene Mutation.

Simply denotes we are talking about the protein (Beta Catenin) level

← p.R587x →

Stop Codon resulting from mutation (C>T)

R denotes the amino acid, Arginine.
Sometimes written as “Arg”

587th Codon

So, because of the previously mentioned mutation (C>T) the 587th codon was supposed to code for Arginine but instead read as a stop codon, which tells the body to stop making the CTNNB1 protein at that position. This caused one copy of Tony’s CTNNB1 gene to not properly produce Beta Catenin leading to either an absent or shortened version of the CTNNB1 protein

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Zygosity

The degree to which both copies of a chromosome or gene have the same genetic sequence

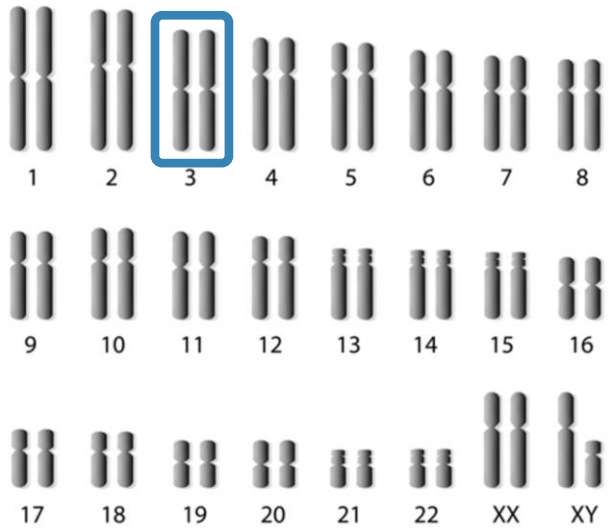
Heterozygous

The Genetic change is only found on one of the two copies of the gene.

Hemizygous

The Genetic change is found on the X chromosome in a male. Males only have one X chromosome so the term is –hemi versus –hetero

NORMAL HUMAN KARYOTYPE



CTNNB1 is located on chromosome 3

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Inherited from– De Novo

Literal translation is “New” De Novo mutations are not inherited from Mom or Dad. It is a Spontaneous Mutation that occurs during embryonic development. No one is at “fault”.

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Everyone has mutations or spelling differences resulting in thousands of genetic changes, but most don't cause medical issues or disease. When a mutation is identified, the lab needs to figure out whether the particular change found is disease causing (pathogenic) or not (benign). The lab will label or classify a change on how certain they are that this change is disease causing. The following is the different types of classification:

- **Pathogenic:** The variant is responsible for causing disease. There is ample scientific research to support an association between the disease and the gene variant. These variants are often referred to as mutations.
- **Likely pathogenic:** The variant is probably responsible for causing disease, but there is not enough scientific research to be certain.
- **Variant of uncertain significance (VUS or VOUS):** The variant cannot be confirmed to play a role in the development of disease. There may not be enough scientific research to confirm or refute a disease association or the research may be conflicting.
- **Likely benign:** The variant is probably not responsible for causing disease, but there is not enough scientific research to be certain.
- **Benign:** The variant is not responsible for causing disease. There is ample scientific research to disprove an association between the disease and the gene variant.

*** This change was reported as pathogenic meaning the lab was very certain that this change caused disease. Contributing factors includes the fact that this mutation had been reported in another patient with CTNNB1 related disorder, and the type of change (nonsense mutation).*



CONTACT US



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