

# CRISPR and Diagnostics: Challenges and Strategies for Understanding Results from Sequencing including Variants of Unknown Significance

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UNIVERSITY OF UTAH  
HEALTH SCIENCES

# Outline

1. Pediatric Neurology and the Diagnosis Problem
2. Diagnosis: Costs and NGS (Next-Generation Sequencing)
  1. Leukodystrophy as an example
3. Crispy Zebrafish (... CRISPR and Zebrafish)
4. Perils and Successes with CRISPR Modeling
  1. Neuromuscular Disease
  2. The nav1 problem
  3. Lou Gehrig's disease

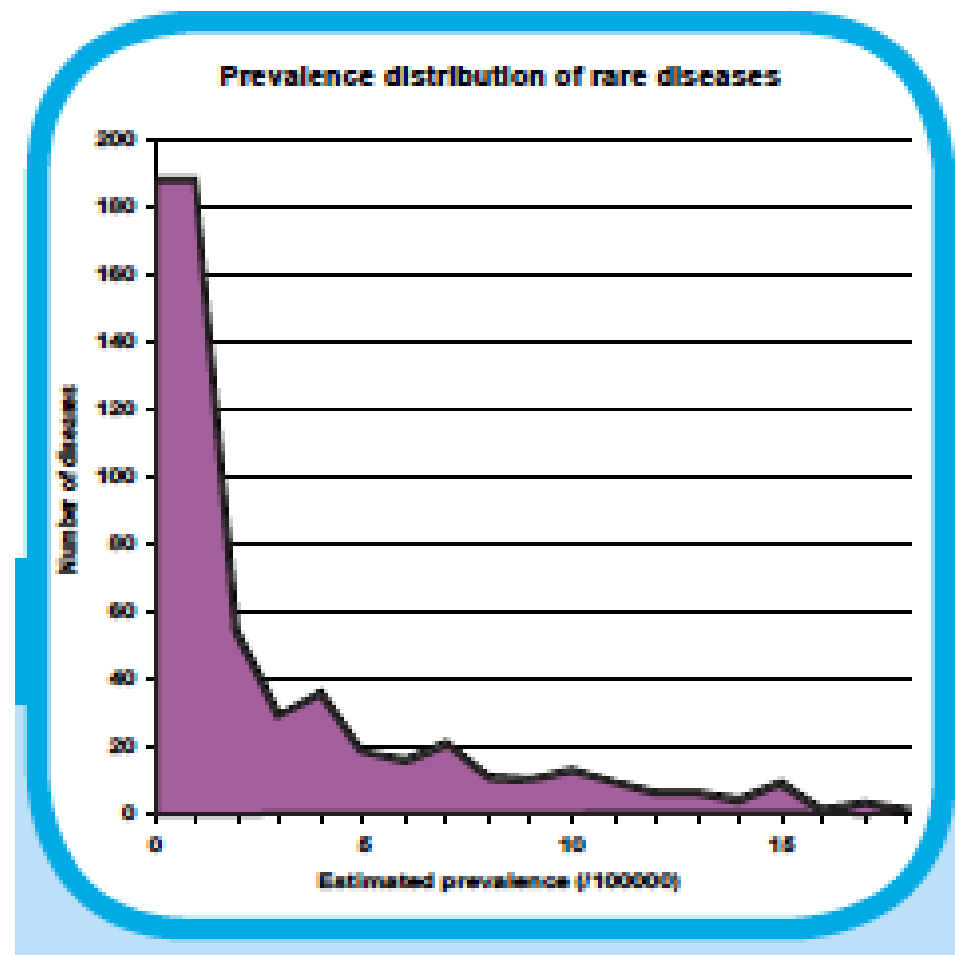
# Pediatric Neurology and the Diagnosis Problem

# Pediatric Neurological Diseases

- ~5% of all children
- Life-long morbidity; higher mortality
- Largest single group of healthcare costs for children
  - contribution to the “Diagnostic Odyssey”
    - Berry, Poduri, Bonkowsky et al., 2012, *PLoS Medicine*
- Known and unknown causes of disease
  - many rare diseases
  - for most patients the genetic cause has been unknown

# Rare and Orphan Diseases

- >2,025 rare diseases
- 25 million Americans affected
- orphan disease:  
“for which there is no reasonable expectation that the cost of developing and making available in the United States a drug for such disease or condition will [be] recovered from sales in the United States of such drug”



# Orphan Diseases and Leukodystrophies

## RARE DISEASES BY THE NUMBERS

A disease is defined as orphan in the U.S. when it affects fewer than

**200,000 people**

There are approximately

**7,000**

**types** of rare diseases and disorders

**30 million people** in the U.S. are living with a rare disease. This equates to 1 in 10 Americans.



**95%**

of rare diseases have no FDA-approved drug treatment

**80%**

of rare diseases are genetic in origin

Approximately  
**50%**

of those affected by rare diseases are children

**30%**

of children with a rare disease will not live to see their fifth birthday

**8:** Average number of physicians visits before diagnosis

**3:** Average number of misdiagnoses

**7+ years:** Average time until diagnosis

**SOURCES:** National Organization for Rare Diseases, Global Genes Project

# What is an undiagnosed disease?

- A disease that has not been diagnosed because the correct test has not yet been performed
  - rare disease
  - atypical presentation of a more common disease
- A disease that has not been diagnosed because we didn't know the disease existed
  - majority of undiagnosed diseases are neurologic

# Why does diagnosis matter?

- Cure
- Therapy/Treatment
- Clinical Trials
- Natural history studies
- Prognosis for family
- Genetic counseling
- Genetic and biochemical pathways of disease



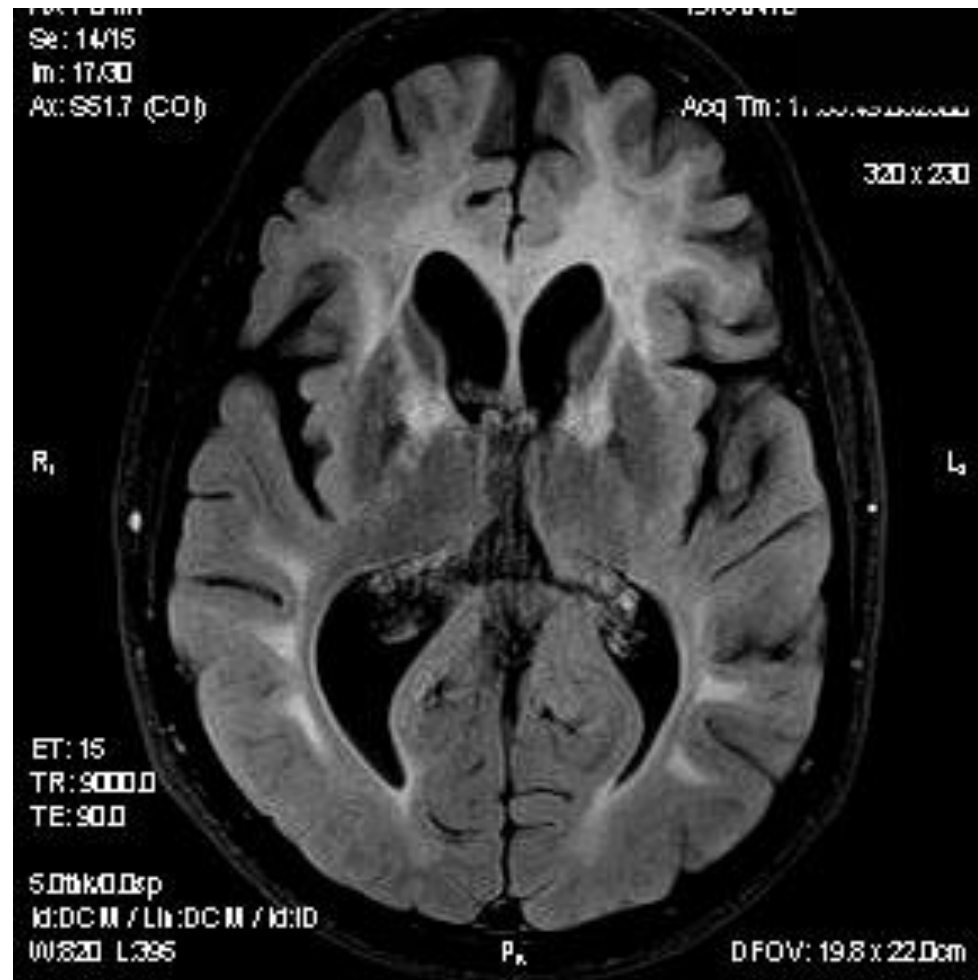
# How good are we at diagnosis?

## Pediatric Neurology

- MRI: 20% diagnosis
- CGH microarray: 10%
- NGS (Next-Generation Sequencing): 40%

# Leukodystrophy

- Leukodystrophy:
  - Genetic
  - Involvement of white matter (myelin)
    - Not secondary to a different etiology (trauma, prematurity, etc.)

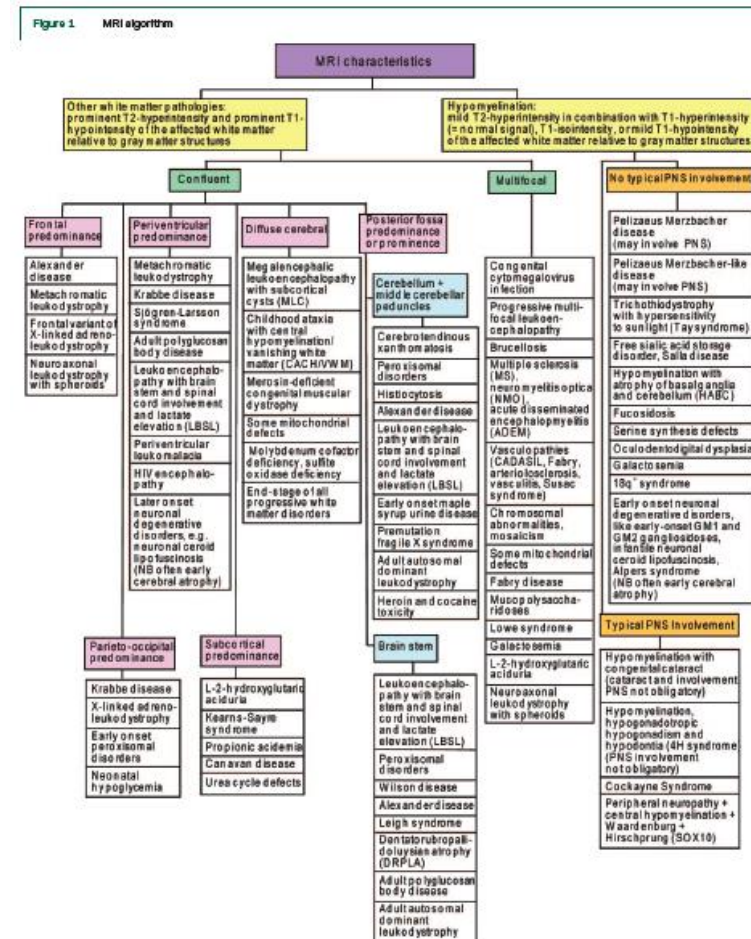


# What is a Leukodystrophy?

- Three types:
  - Hypomyelination
  - Dysmyelination
  - Demyelination
- 30 canonical genes, >700 total genes
- Diagnosis rates ~50%

# Leukodystrophy Problems

- Causes of leukodystrophies not known
- How to diagnose unknown
- No treatments





**W**ESTERN

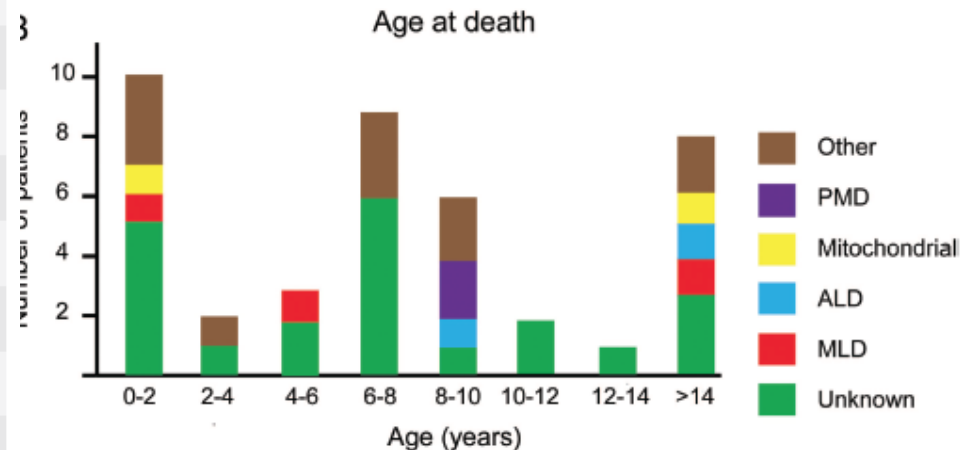
**L**EUKODYSTROPHY

**P**ROJECT

# The Burden of Leukodystrophies

**Table 2** Death, neurologic features, and costs in the leukodystrophy cohort<sup>a</sup>

Outcomes	Values
Death, n (%)	42 (34)
Average age at death, y	8.2
Epilepsy, n (%)	60 (49)
Average age at onset, y	4.0
Developmental regression, n (%)	39 (32)
Feeding tube, n (%)	53 (43)
<b>Costs</b>	
Total cohort cost	\$14,315,919
Average yearly cost/patient	\$22,579



# Diagnosis: Costs and NGS (Next-Generation Sequencing)

# The Diagnostic Odyssey

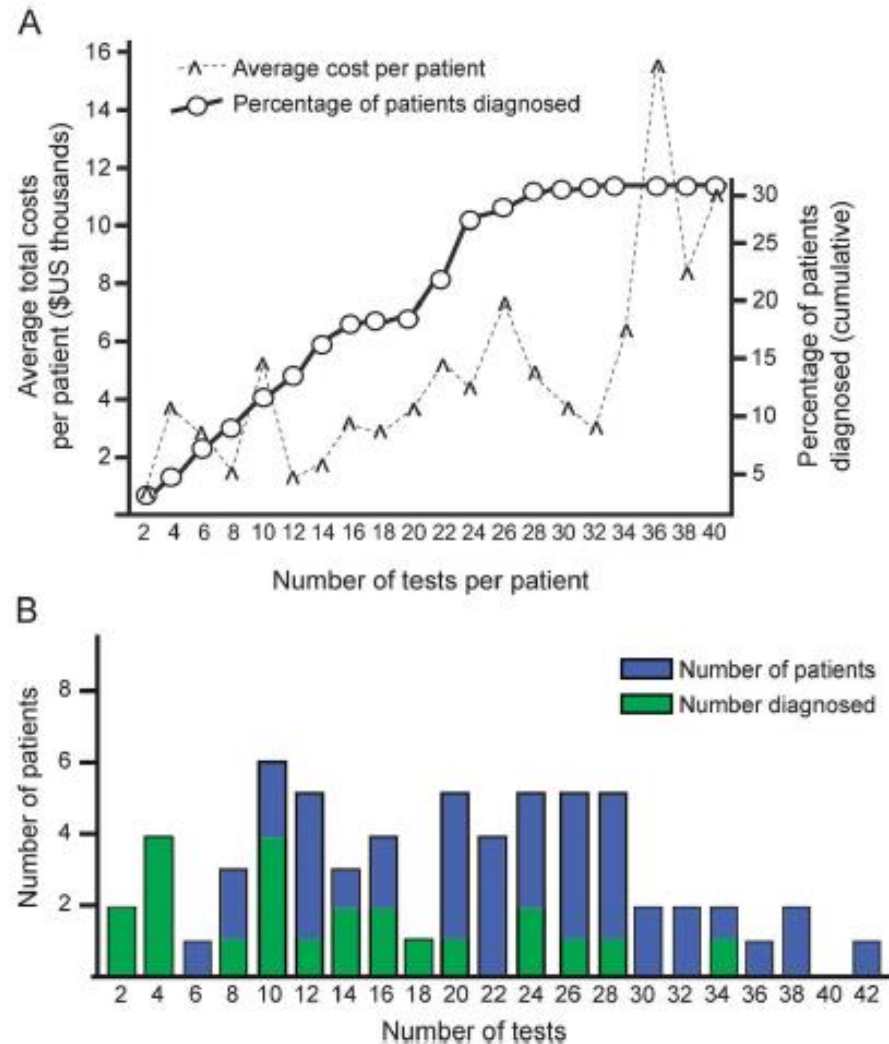
Hypotheses:

1. costs are substantial.
2. NGS will help.



# 1. Costs are substantial

- **False**
- Average costs of \$4209/patient
  - Compared to average healthcare costs of \$107,000/patient
- Conclusion: *reaching a diagnosis is not the primary driver of costs*



## 2. NGS will help

- True
- Charges for the entire cohort= \$538,053
- If NGS had been performed instead= \$371,200
  - and equal or better diagnosis rate
- Conclusion: *Use NGS early*

Richards et al., 2015, Neurology

Richards et al., 2015, Am J Med Genetics

# Next Generation Sequencing: NGS

- NGS has revolutionized diagnosis
  - Sequencing technology is on the time-scale of hours/days
    - Interpretation is weeks to months
- But accompanying limitations:
  - sequencing informatics bottleneck
  - ***biology bottleneck of variants***
    - each individual has ~74 germline de novo mutations
  - the spectre of non-coding variants
  - the role of somatic mutations

# Diagnosis: Today!

Two Steps:

## **1. Test treatable disorders**

Either:

Leukocyte Lysosomal Enzymes and  
Serum Very Long Chain Fatty Acids

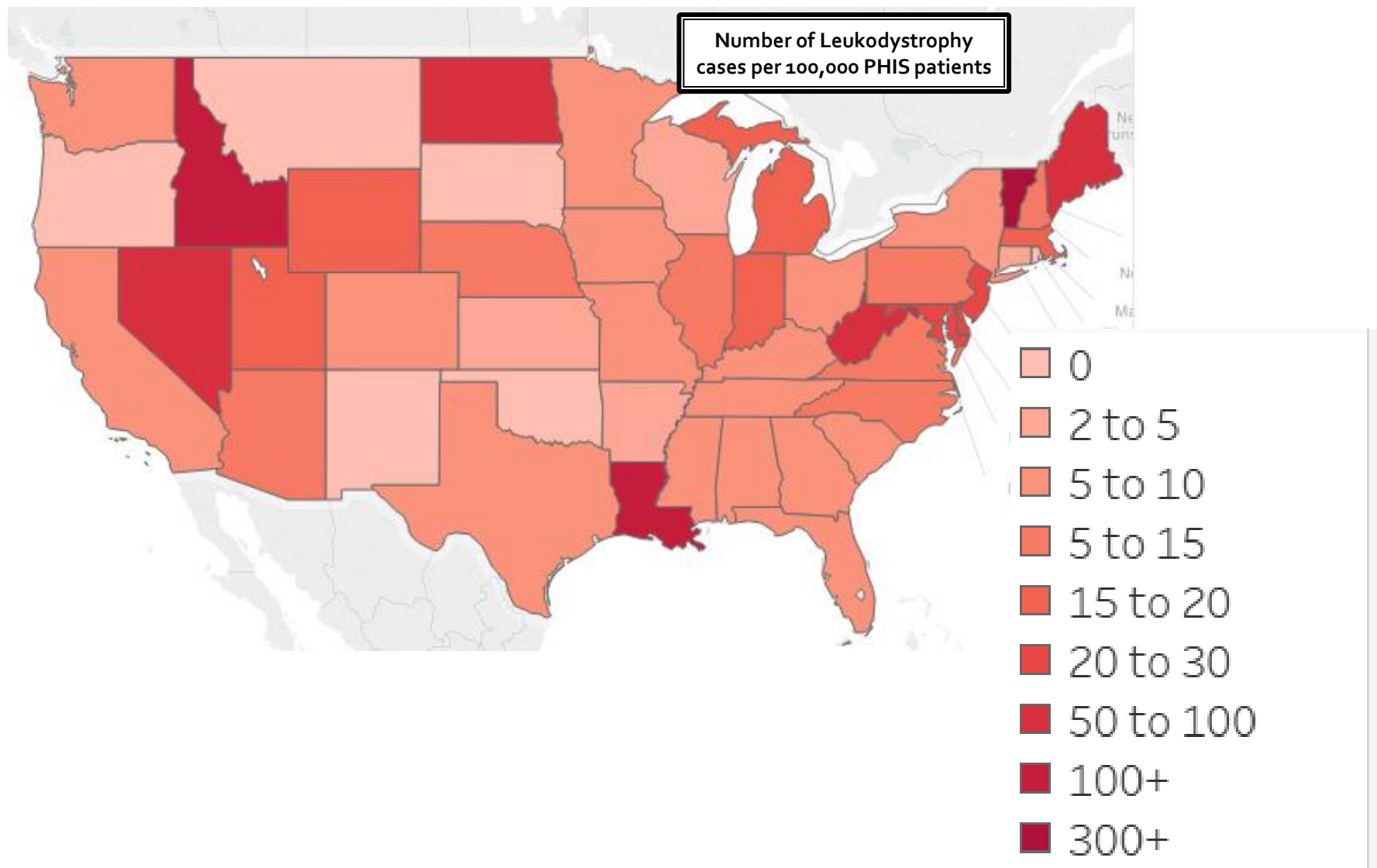
*or*

Rapid Whole Exome

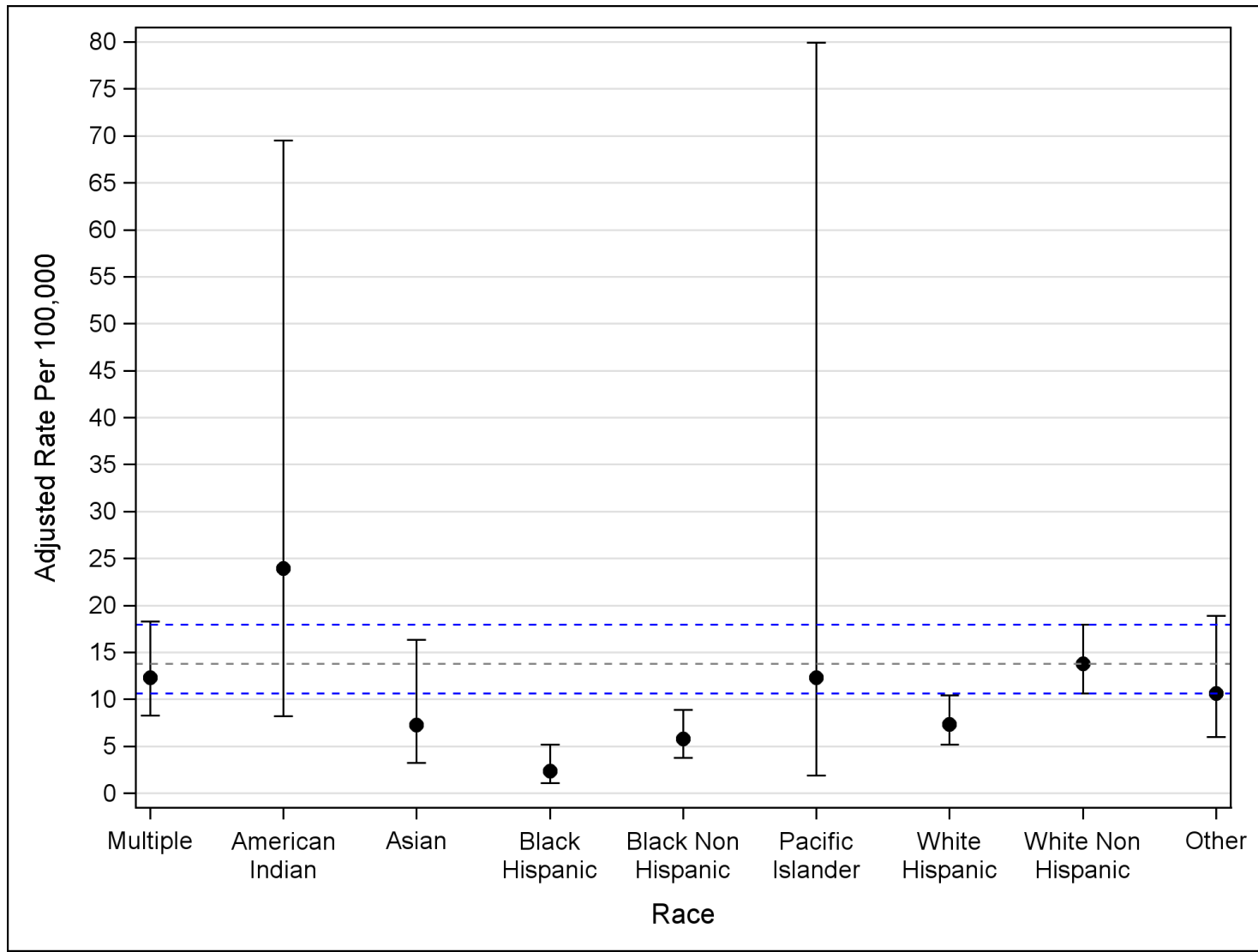
## **2. Whole exome/genome or leukodystrophy gene panel**

# Diagnosis Disparities- a role for NGS?

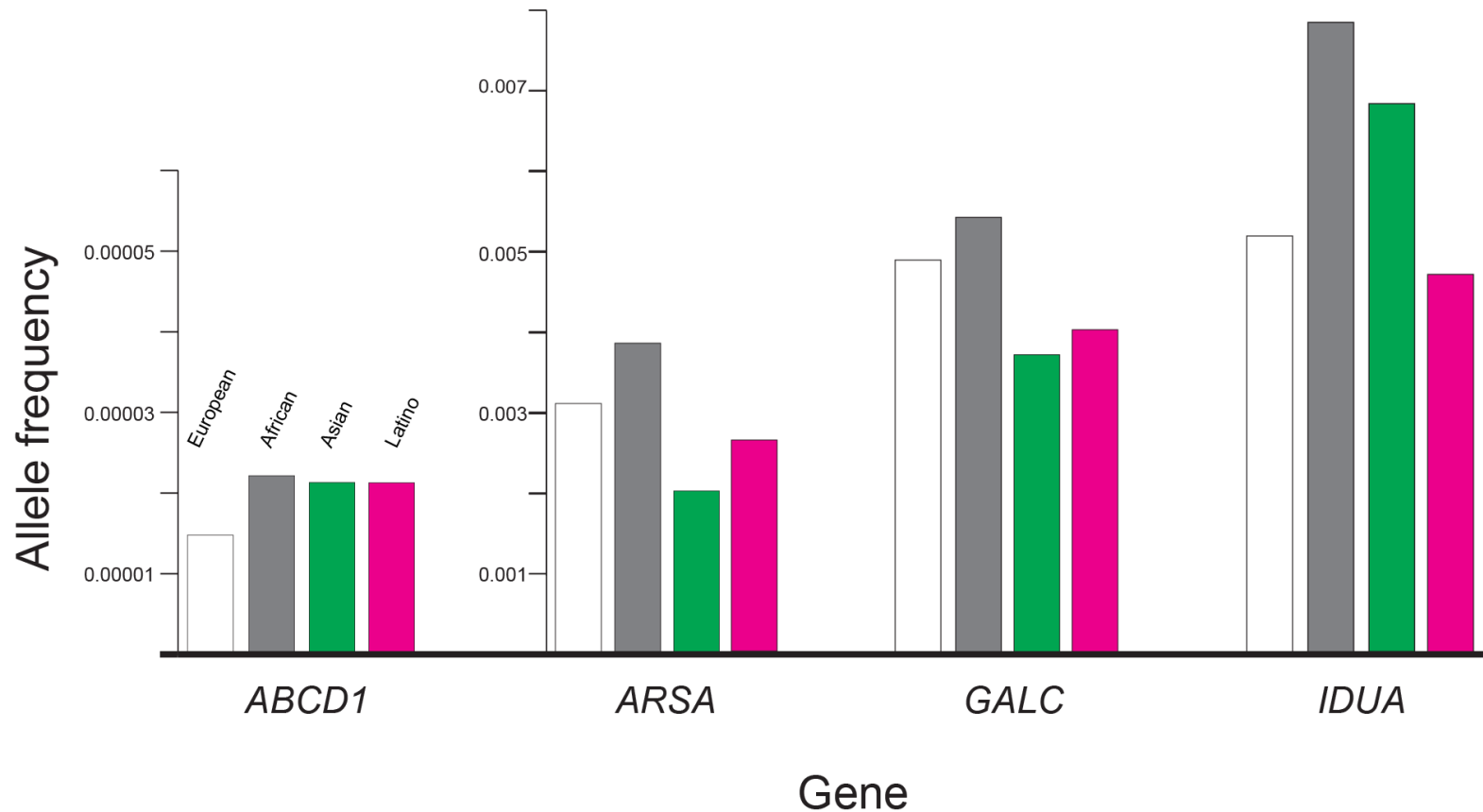
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# Diagnosis rates are >50% lower in some racial groups



# No evidence for genetic





# Conclusions

- NGS diagnosis is less expensive
  - Than traditional diagnosis
  - Than clinical care
    - The Diagnostic Odyssey can be finite
- NGS algorithms for diagnosis should be developed
- Consider NGS to reduce diagnosis disparities

# Crispy Zebrafish

## (CRISPR and Zebrafish)

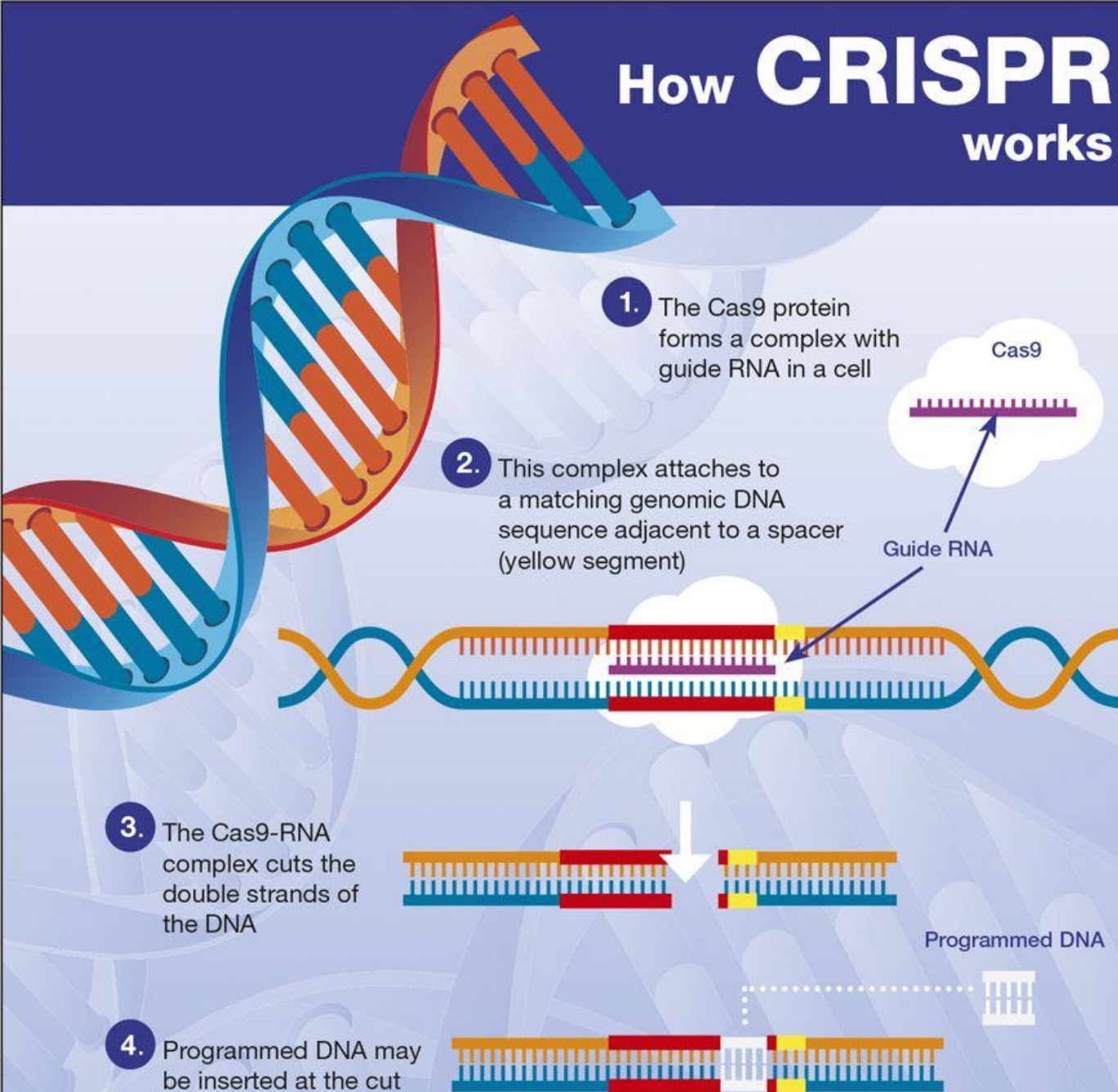
# CRISPR

- CRISPR is the most recent and most successful of genome editing techniques
  - ZFN (zinc-finger nucleases)
  - TALENs (transcription activator-like effector nucleases)
- ZFNs and TALENs require customization to efficiently target a sequence, and are more costly and difficult to develop for each target

# CRISPR mechanics

- CRISPR/Cas system is a prokaryotic (bacterial) “immune” system to attack foreign DNA
  - CRISPR:  
Clustered Regularly Interspaced Short Palindromic Repeats
  - Cas: CRISPR-associated system
    - Cas9: an RNA-guided DNA endonuclease
- Synthetic gRNA (guide RNA) matches a sequence in the target, and then guides the Cas9 system over to cut at that locus

# How CRISPR works

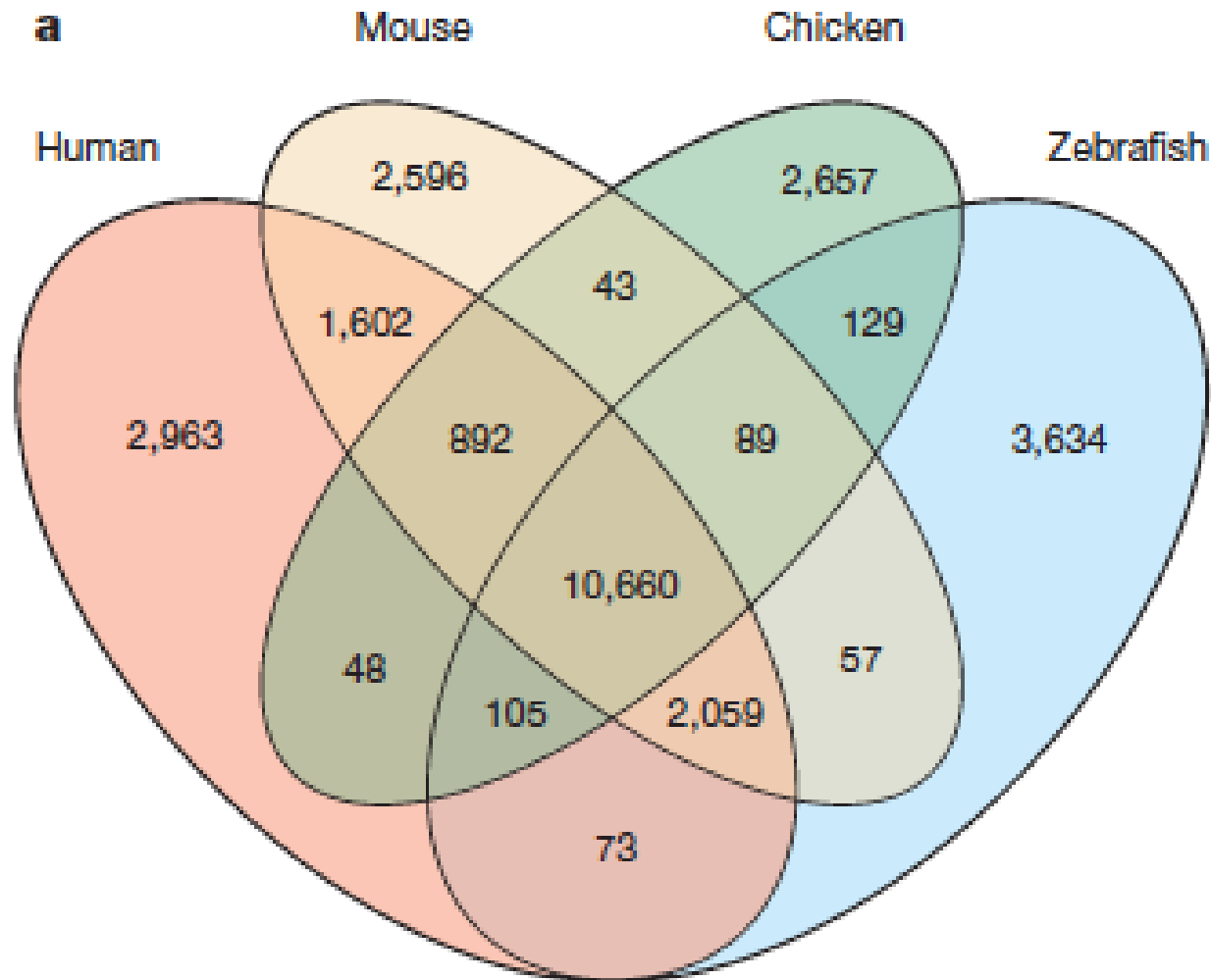


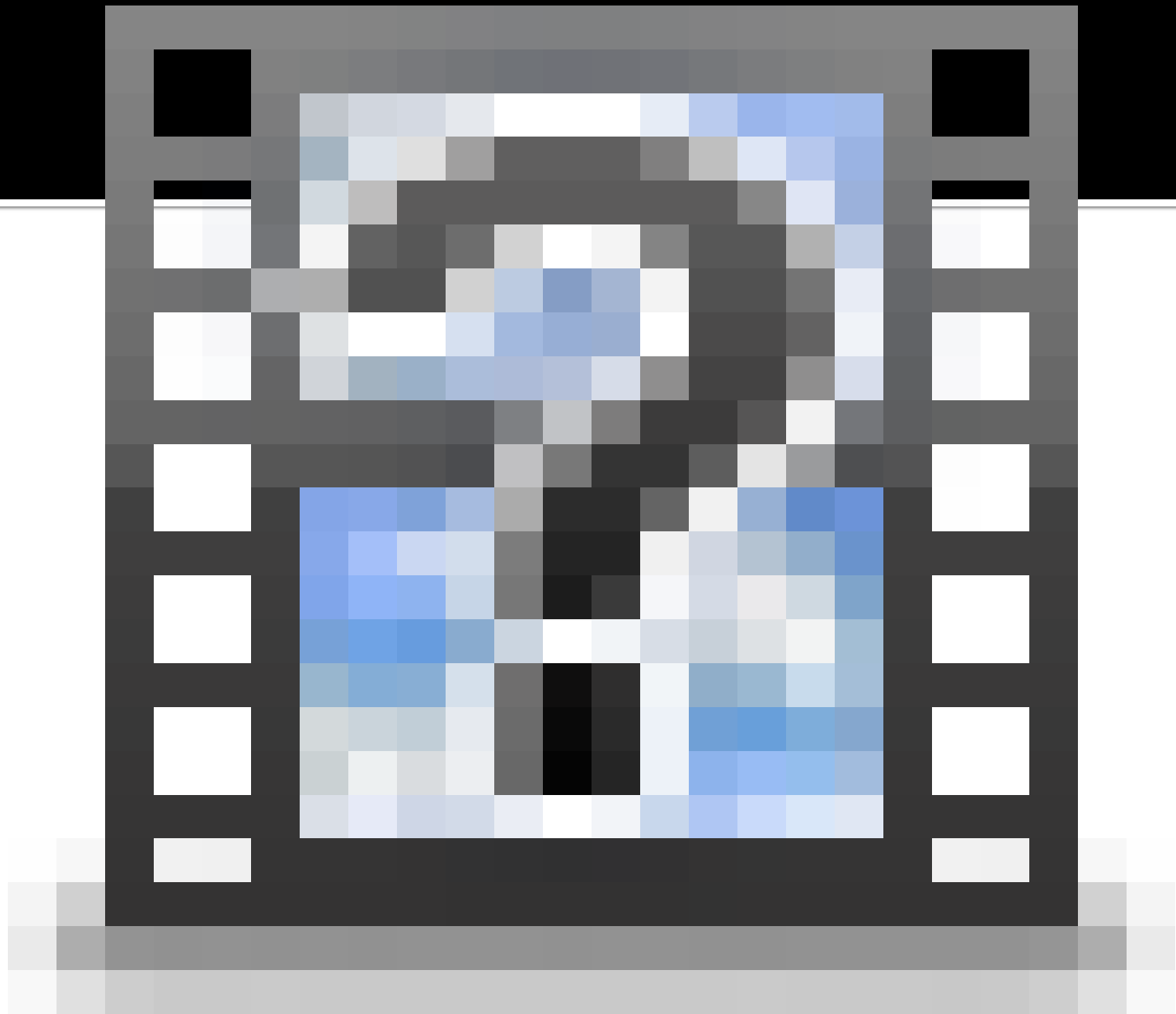
# Zebrafish as a Model Organism



1. Vertebrate
2. Conserved genes
3. Rapid development
4. Inexpensive

# Zebrafish and Human Genes are Conserved







# Using Model Systems

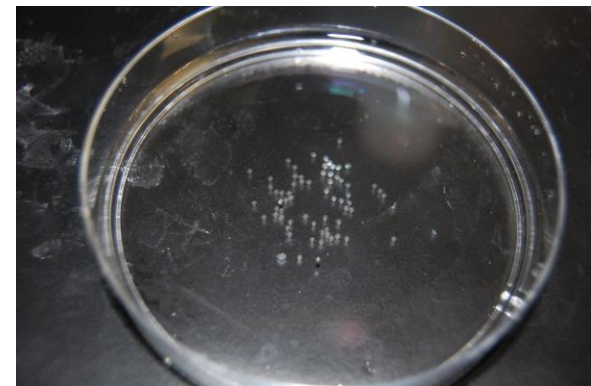
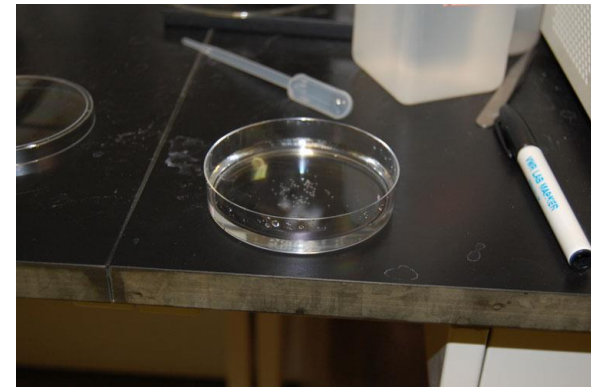
## Genomic responses in mouse models poorly mimic human inflammatory diseases

Junhee Seok<sup>a,1</sup>, H. Shaw Warren<sup>b,1</sup>, Alex G. Cuenca<sup>c,1</sup>, Michael N. Mindrinos<sup>a</sup>, Henry V. Baker<sup>c</sup>, Weihong Xu<sup>a</sup>, Daniel R. Richards<sup>d</sup>, Grace P. McDonald-Smith<sup>e</sup>, Hong Gao<sup>a</sup>, Laura Hennessy<sup>f</sup>, Celeste C. Finnerty<sup>g</sup>, Cecilia M. López<sup>c</sup>, Shari Honari<sup>f</sup>, Ernest E. Moore<sup>h</sup>, Joseph P. Minei<sup>i</sup>, Joseph Cuschieri<sup>j</sup>, Paul E. Bankey<sup>k</sup>, Jeffrey L. Johnson<sup>h</sup>, Jason Sperry<sup>l</sup>, Avery B. Nathens<sup>m</sup>, Timothy R. Billiar<sup>l</sup>, Michael A. West<sup>n</sup>, Marc G. Jeschke<sup>o</sup>, Matthew B. Klein<sup>j</sup>, Richard L. Gamelli<sup>p</sup>, Nicole S. Gibran<sup>j</sup>, Bernard H. Brownstein<sup>q</sup>, Carol Miller-Graziano<sup>k</sup>, Steve E. Calvano<sup>r</sup>, Philip H. Mason<sup>e</sup>, J. Perren Cobb<sup>s</sup>, Laurence G. Rahme<sup>t</sup>, Stephen F. Lowry<sup>r,2</sup>, Ronald V. Maier<sup>j</sup>, Lyle L. Moldawer<sup>c</sup>, David N. Herndon<sup>g</sup>, Ronald W. Davis<sup>a,3</sup>, Wenzhong Xiao<sup>a,t,3</sup>, Ronald G. Tompkins<sup>t,3</sup>, and the Inflammation and Host Response to Injury, Large Scale Collaborative Research Program<sup>4</sup>

Among genes changed significantly in humans, the murine orthologs are close to random in matching their human counterparts (e.g.,  $R^2$  between 0.0 and 0.1).

# Economy of scale

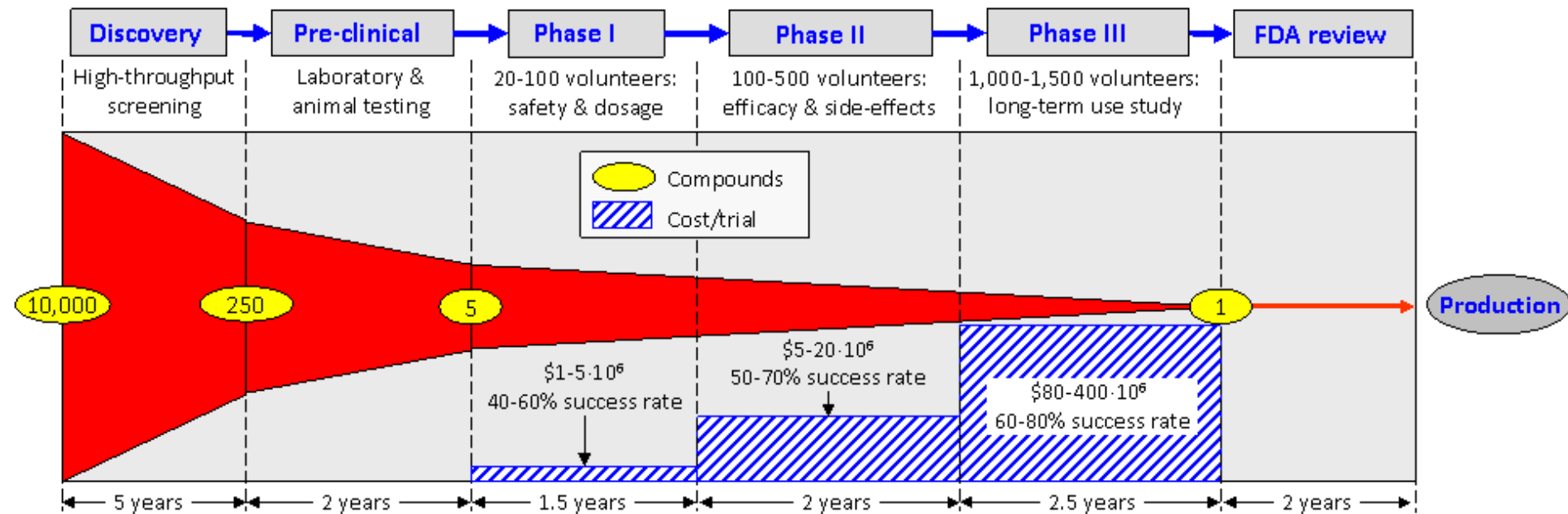
- Analyze 1000s of animals per day
- 1000s of tanks in a facility
- Generation time: 8 weeks



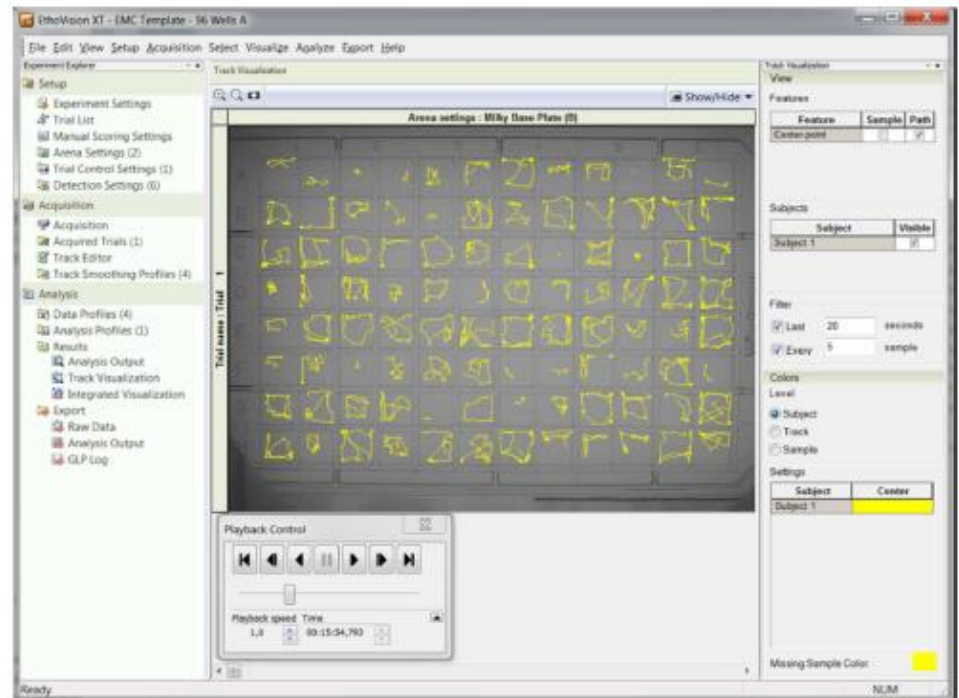
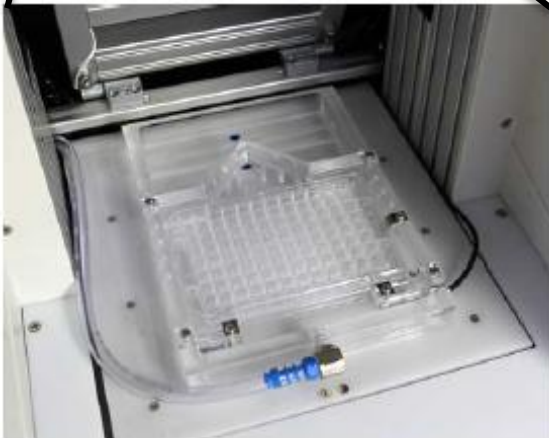
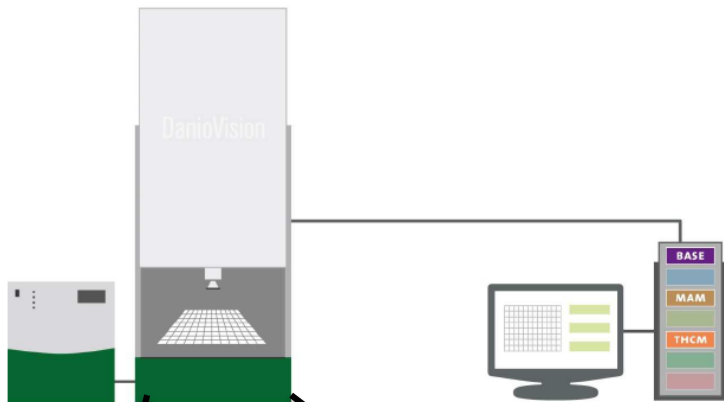
# Power of Drug Discovery in Zebrafish

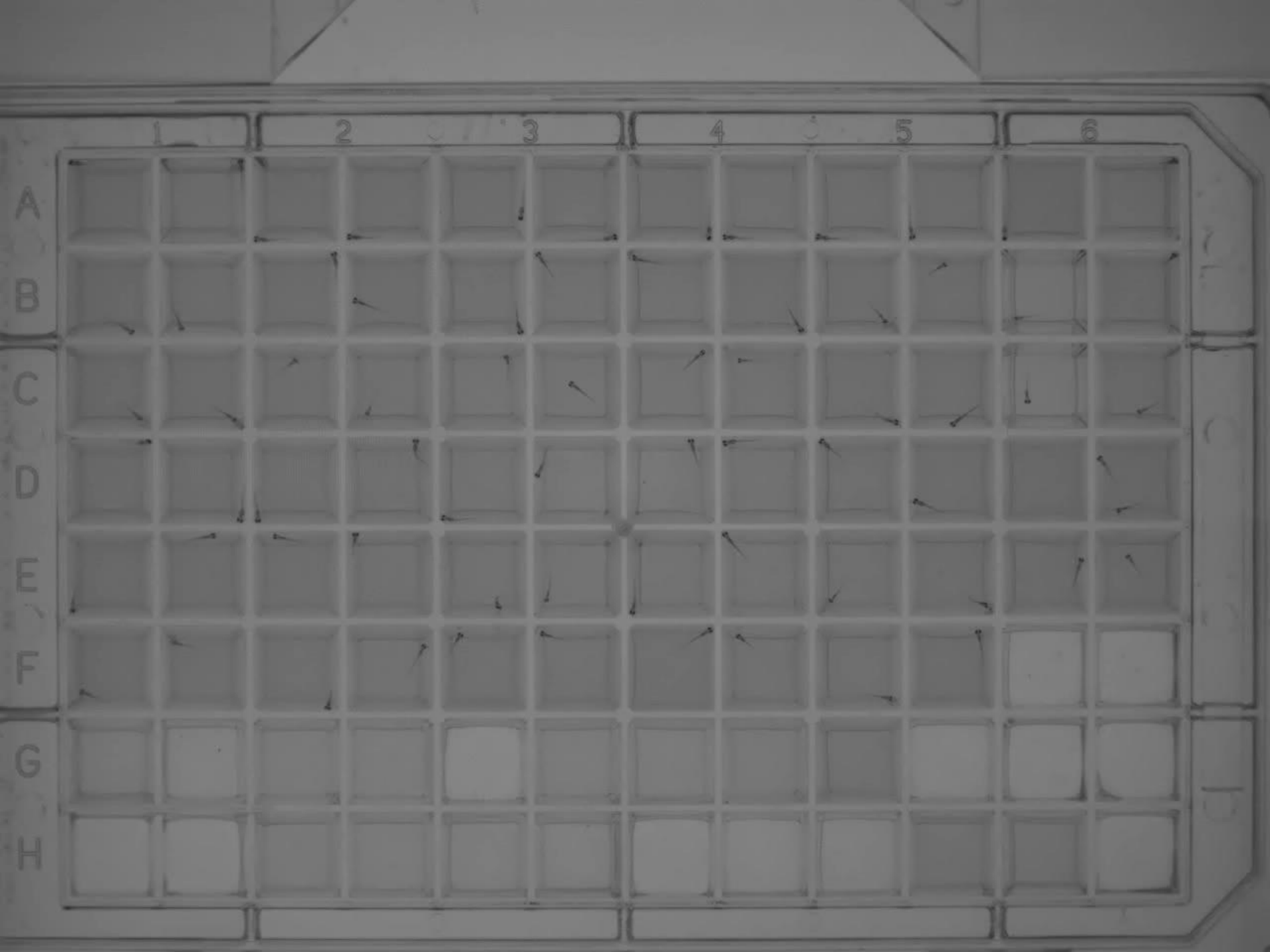
- whole animal biological complexity
- rapid development
- high-throughput screening
  - 62% of new drugs discovered using phenotypic screening

# Drug Pipeline



# Automated screening





A  
B  
C  
D  
E  
F  
G  
H

1 2 3 4 5 6



# CRISPR in Zebrafish

- Bi-allelic knockdown using CRISPR >80%
  - Both copies of a gene are mutated
  - From the 1-2 cell stage of life
- CRISPR construct is easy to make and can be ready in <1 week and <\$400
- Multiple genes can be targeted simultaneously
- >1000 animals can be generated in a week and tested by an undergraduate
- Results can be known in 1-2 weeks for developmental disorders
  - Because embryogenesis occurs in first 3 – 7 days

# Zebrafish CRISPR limits

## ■ *Limits*

- Some genes in the zebrafish genome are duplicated
- A stable mutant for long-term studies takes 1 year to generate
- Some disorders are not amenable for zebrafish (for example, thumb development, or disorders of the placenta, etc.)
- Some “rescue” may occur by orthologs



# Conclusions

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Zebrafish have unique benefits as a vertebrate model organism

- rapid generation time, high numbers, and inexpensiveness

CRISPR is fast and efficient in zebrafish

Zebrafish have emerged as a powerful tool for testing NGS results

# Perils and Successes with CRISPR Modeling

Three tales (tails?)

# Guidelines for Demonstrating Variant Pathogenicity

1. specific gene variant enriched/specifically associated with a disease
2. a mutant phenotype in a model system matches a phenotype from human
3. Rescue of the mutant phenotype with wild-type allele
4. Inability of mutant allele to rescue phenotype

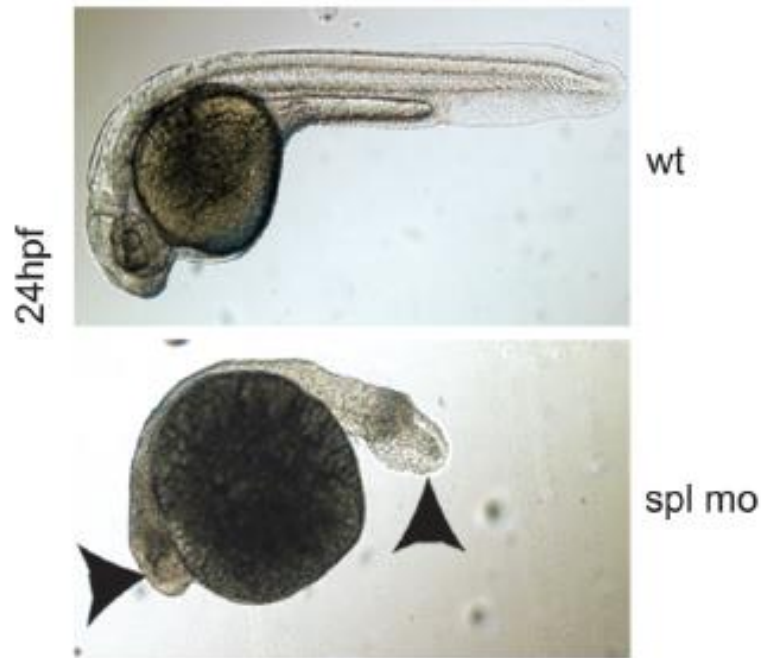
adapted from Chakravarti et al., 2013, Cell

# Two congenital motor neuron diseases: ...a New Gene... and the Wrong Gene

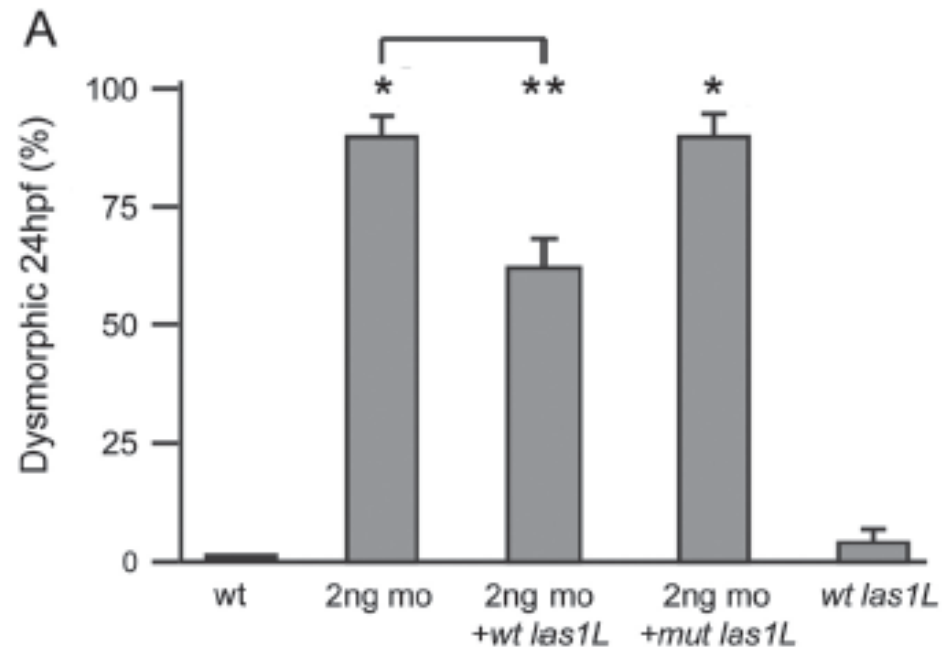
- Case 1:
  - Newborn infant requiring artificial ventilation
  - Genetic testing showed that it was not SMA
  - Guidance needed for parents and physicians

# LAS1L gene identified and had phenotype in zebrafish

C



A

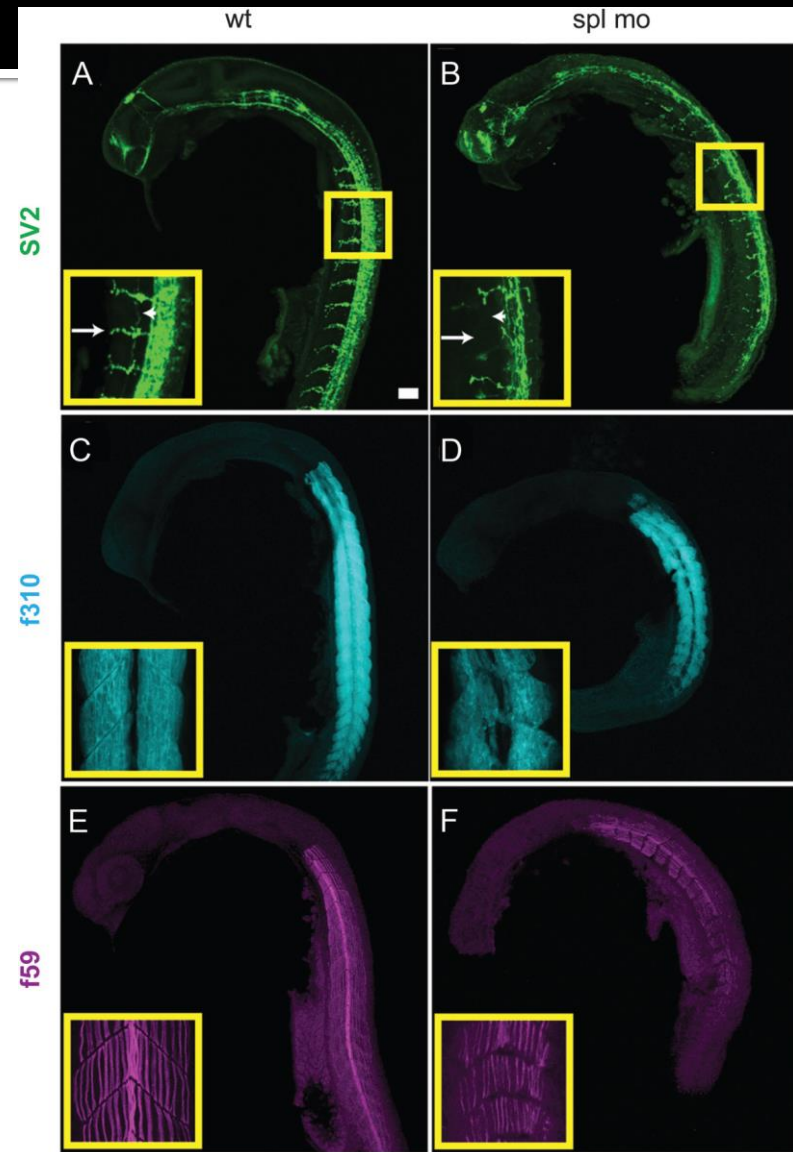


# LAS<sub>1</sub>L Pathogenicity

- Sequencing showed p.S477N mutation in a ribosomal biogenesis protein: LAS<sub>1</sub>-like
- Confirmed in zebrafish
- New biochemical pathway in neurological disease

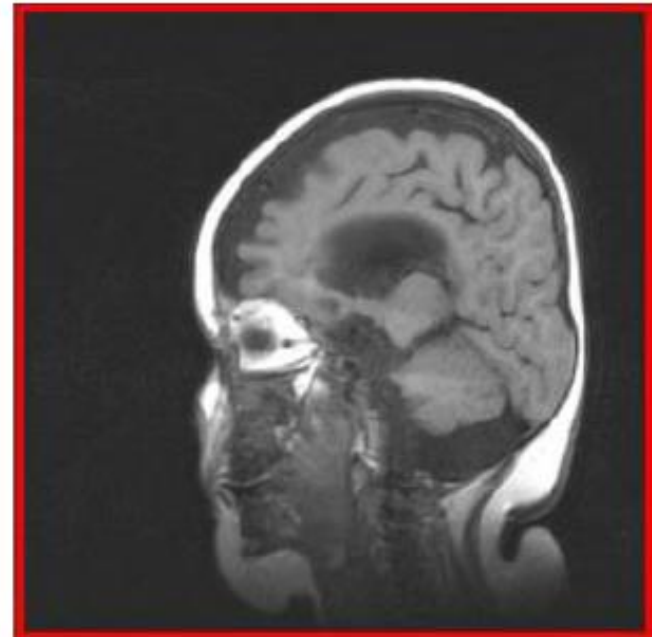
Congenital lethal motor neuron disease  
with a novel defect in ribosome biogenesis

Butterfield et al., Neurology, 2014

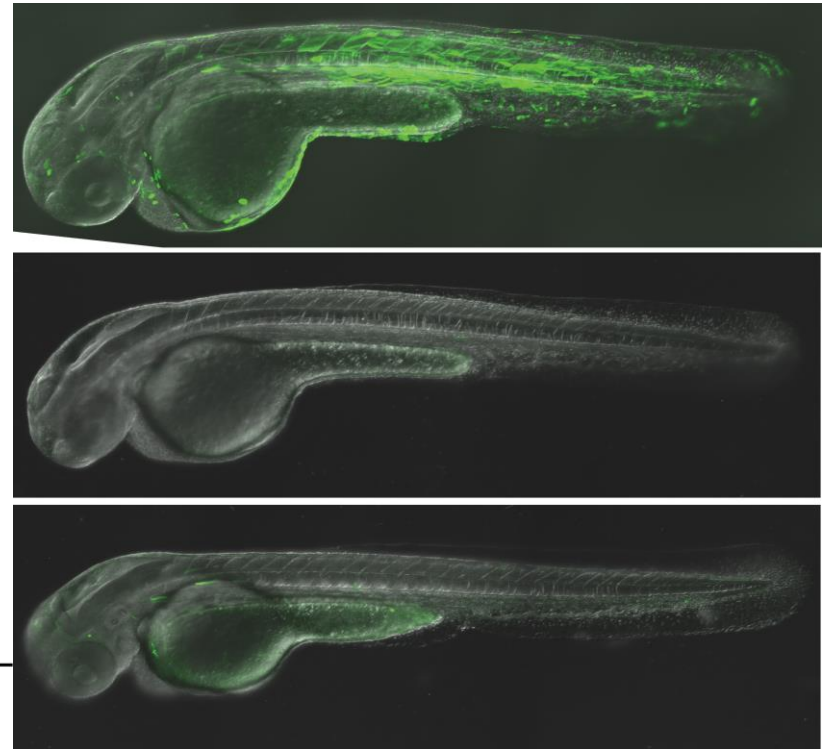
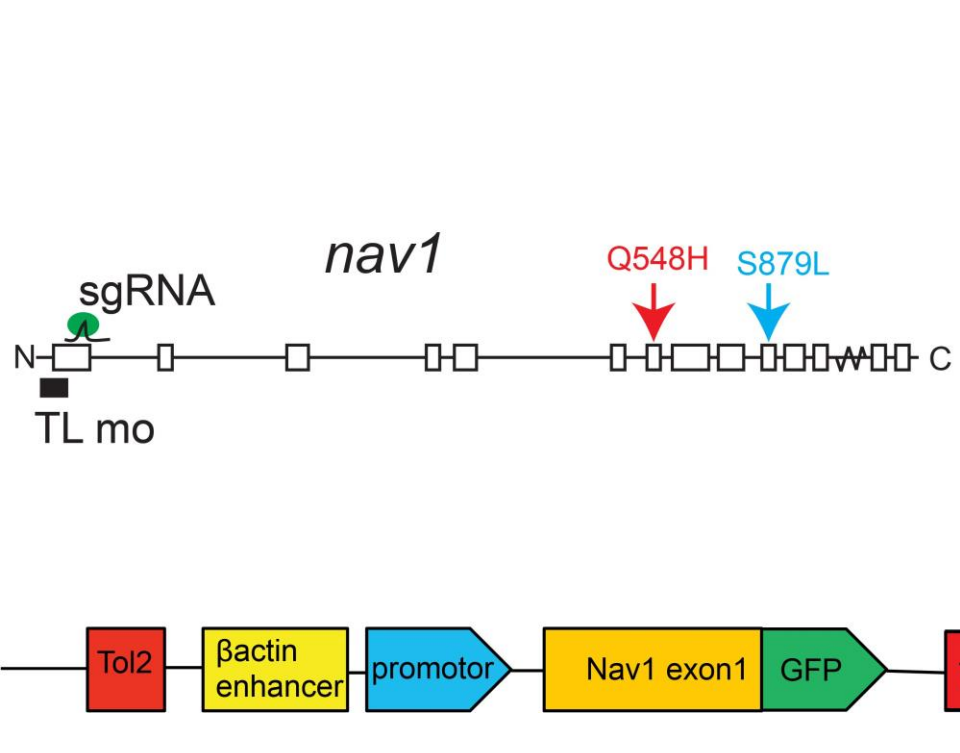


# Case 2

- Stevenson and Carey, AJMG, 2007
- Siblings with muscular contractures, seizures, and brain structural abnormalities
- NGS suggested NAV1 gene



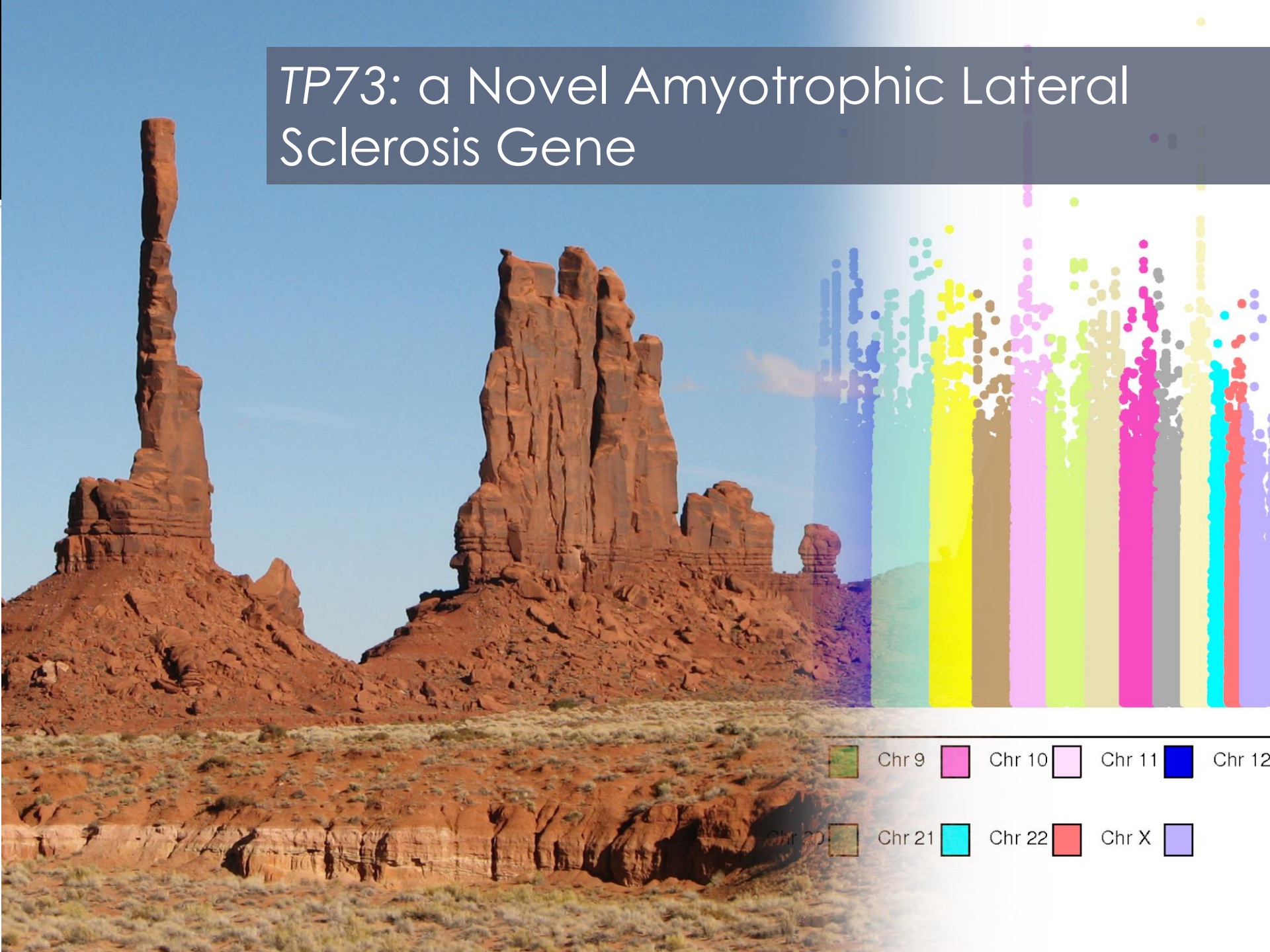
# NAV1 gene incorrect



- zebrafish morphants and CRISPR are normal
  - *sequence re-analysis did not confirm NAV1 (and did not identify other better candidates)!*

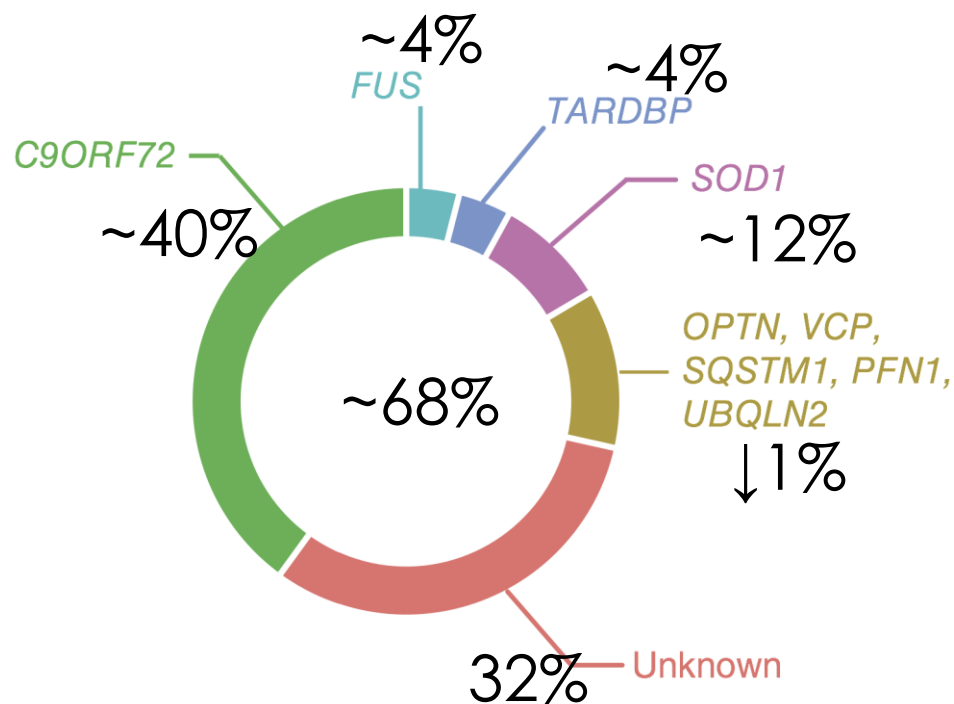


# *TP73*: a Novel Amyotrophic Lateral Sclerosis Gene



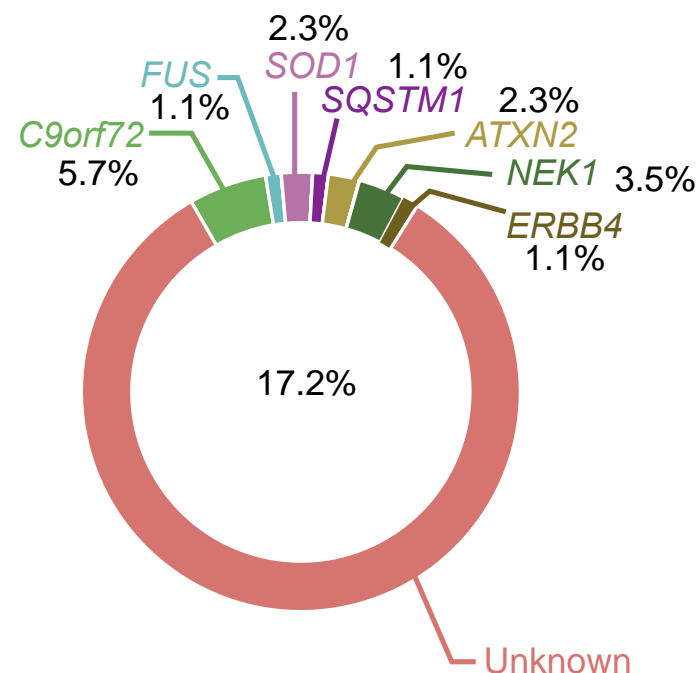
# Most ALS cases have an unknown genetic cause for disease

Familial ALS (10%)



Renton et al. (2014),  
*Nat. Neurosci*

Sporadic ALS (90%)



Gibson, Downie et al. (2017),  
*Neurology*

# Determine whether novel loci ALS loci can be identified using next-generation sequencing

87 SALS patients  
(exome sequenced)

324 controls  
(Simons Simplex Collection)



Candidate gene list  
applicable to a  
phenotype/disease

Burden testing

Prioritized gene list  
by burden

Re-ranked gene list  
with  
genes relevant to a  
phenotype  
ranked higher



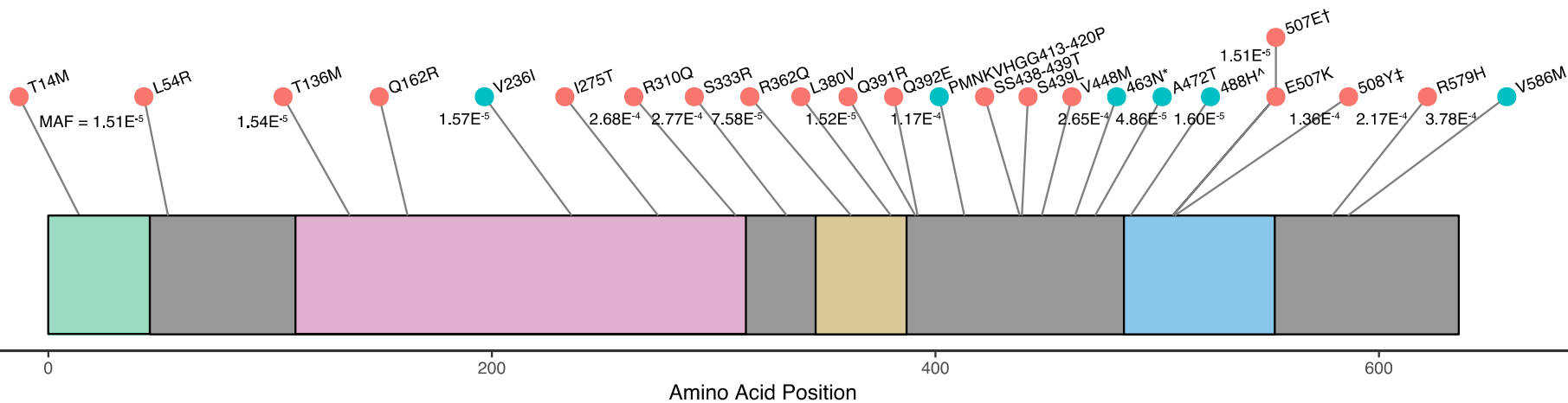
# **TP73 has multiple qualities that make it an attractive ALS gene candidate**

- Two known ALS genes in top 5 ranked genes from VAAST/PHEVOR
  - *MAPT* (rank: 3)
  - *SOD1* (rank: 5)
- *TP73* (rank 2)
  - One of two genes that possessed a VAAST burden level approaching genome-wide significance
  - Four different rare missense SNVs in five patients
    - 1 in-frame indel upon screening for indels
  - Part of the p53 family of tumor suppressor proteins
  - Neuronal survival factor

# Rare, deleterious variants in *TP73* are found at appreciable frequency in ALS patients

24 rare (MAF<0.0005) *TP73* coding variants were found in ~2,900 ALS patients

*TP73*; ENST00000378295



All SNVs are deleterious according to MetaSVM

In the Utah cohort

● No ● Yes

Domain

Transactivating domain  
DNA binding domain  
Tetramerization domain  
Sterile alpha motif domain

\* = Arg365Trp

^ = Arg390Cys

† = Val409Ile

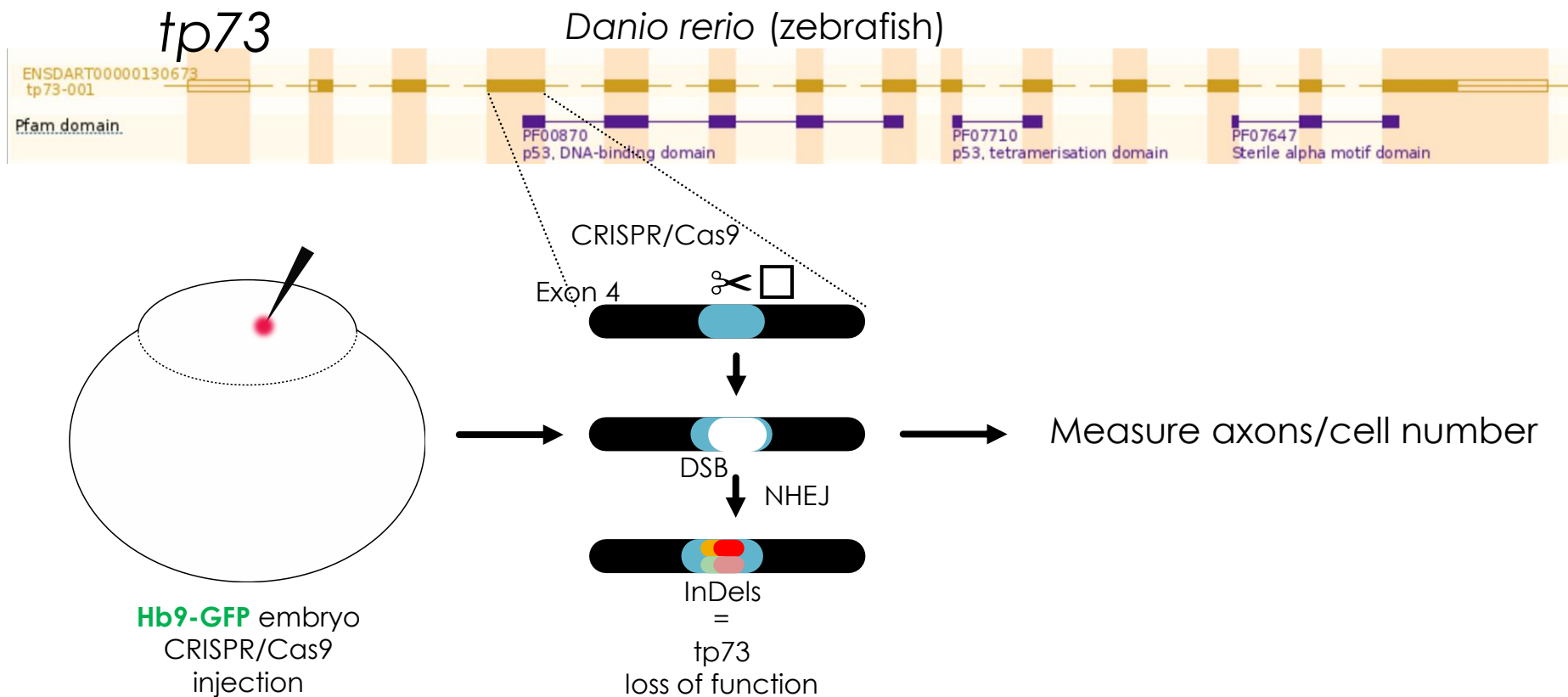
‡ = Phe410Leu

... for ENST00000378280

~2,800 patients from Cirulli et al. (2015) Science



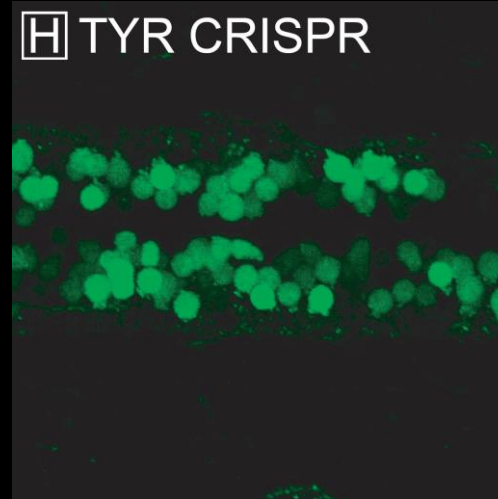
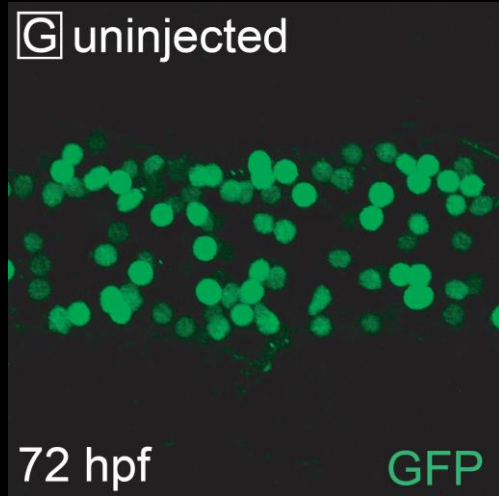
# A CRISPR/Cas9 zebrafish system was developed to test how loss of p73 affects spinal motor neurons



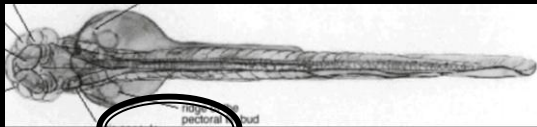
Orange = target sequence

The Company of Biologists, Ensembl, Lizzy Griffiths.

# The number of spinal motor neurons is significantly reduced in *tp73* zebrafish mutants



Tg[Hb9:Gal4-UAS:GFP]



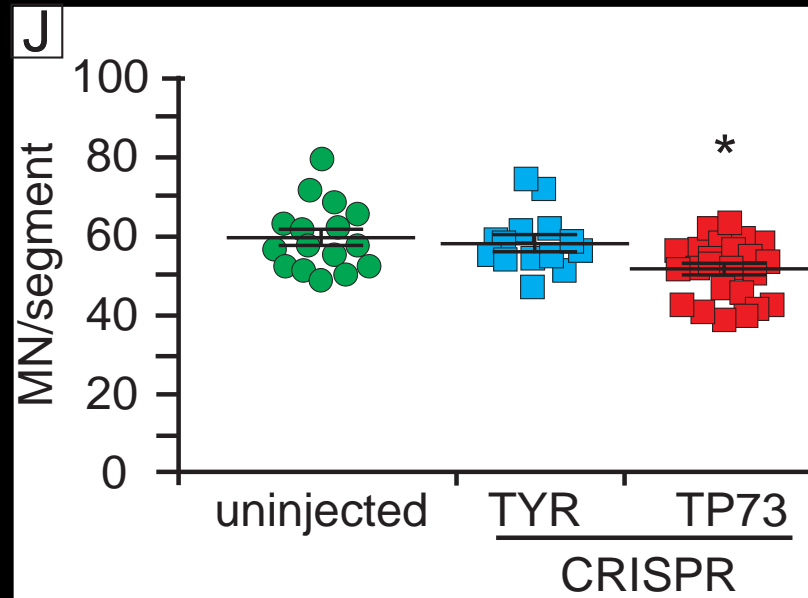
Confocal: 10x; 5μm/step, 21 steps

Hb9 = motor neuron promoter

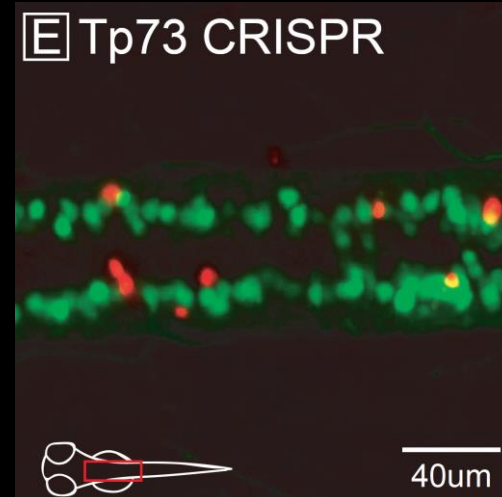
hpf = hours post fertilization

MN = motor neuron

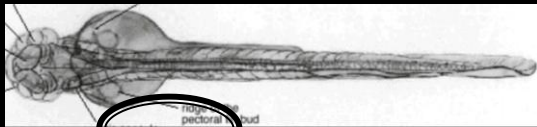
\* =  $p < 0.01$



# p73 CRISPR zebrafish have increased apoptosis of spinal motor neurons



*Tg[Hb9:Gal4-UAS:GFP]*



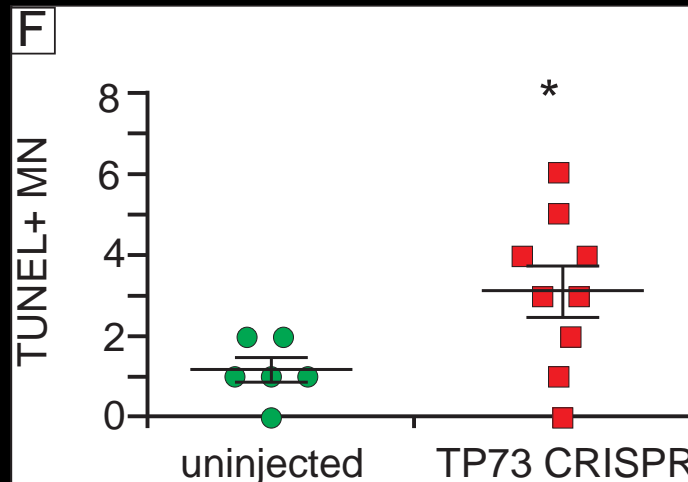
Confocal: 10x; 5μm/step, 21 steps

*Hb9* = motor neuron promoter

hpf = hours post fertilization

MN = motor neuron

\* =  $p < 0.05$





# Conclusions

- May have identified a new ALS risk gene.
  - Rare and deleterious variants *TP73* are found in ALS patients
  - These variants impair *TP73* function
    - Loss of C2C12 myoblast ability to escape differentiation
  - Development and survival of motor neurons are negatively affected in *Tp73* mutant zebrafish
- Expands the list of cellular processes involved in ALS pathogenesis.

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Biogen

Utah Neuroscience Initiative



(GM118335)



# Conclusions

- NGS is changing the landscape not only of diagnosis, but redefining what diseases exist
- NGS results can be challenging to interpret, as often the results are the first of their kind
- CRISPR genome editing is a powerful, efficient, and inexpensive method for testing gene function
- The zebrafish is a uniquely powerful vertebrate model system for testing certain diseases and NGS results

# Funding





# People





University Health Care  
Pediatrics