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Complex Diseases

- defining "complex" is important

Most genetic diseases are due to multiple gene effects

Mendelian Disorders

- mutations are rare + of recent origin (individual mutations)
- mutational diversity high
- mutation necessary + sufficient for disease

Complex Disorders

- multiple genes
- susc. alleles have low penetrance
- susc. alleles have high pop. freq.
- environ, stochastic, + somatic/epigenetic factors important

Genetic Risk

$\lambda_R = \frac{\text{incidence among relatives}}{\text{population incidence}}$ = measurement of familial effects

$\lambda_R \approx 1000$ for mendelian ($\lambda_{\text{single gene}} \therefore = 1000$)

$\lambda_R \approx 10$ for complex

$\lambda_{\text{gene}} \approx 2$ for complex

In humans

- presence of RET mutations had low penetrance
- so ... maybe other genes

LOD Scores

- most families show linkage to RET
- found another peak on Chr 9 (near PD locus) (9q31)

Segregation of RET + Chr 9q31

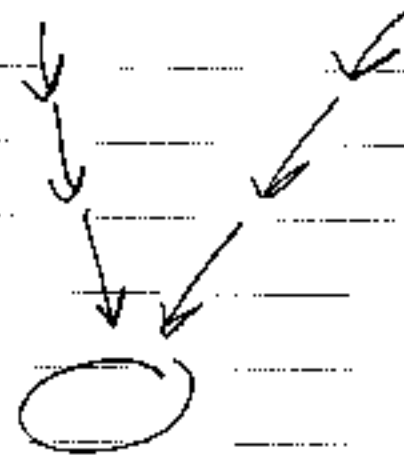
Family	RET haplo sharing	RET mutation	9q31 haplo sharing
	+	standard	-
	+	standard	-
	+	standard	-
	+	unusual	+
	+	unusual	+
	-	"	+

NOT ALL
RET MUTATIONS
HAVE SAME
PATTERNS

Multiple Genes found → then what

Combined the alleles should better explain inheritance

if you have two pathways



Variation in BP candidates

	Density ($1/\theta$)	
	African	US Whites
Coding	2200 bp	1900
Synonymous	1250	900
Non-syn.	2900	3100
Noncoding	1400	1550
Total	1700	1700

θ = nuc. diversity
= avg. het.

5' UTR } more highly conserved than coding/intron
3' UTR }

Coding + introns sim. in degree of polymorphism

SNP

- rarer = younger (assume) } will that differ for
- younger = less different than others