## Polish pancreatitis working group and activities

### Institute of Mother and Child, Warsaw

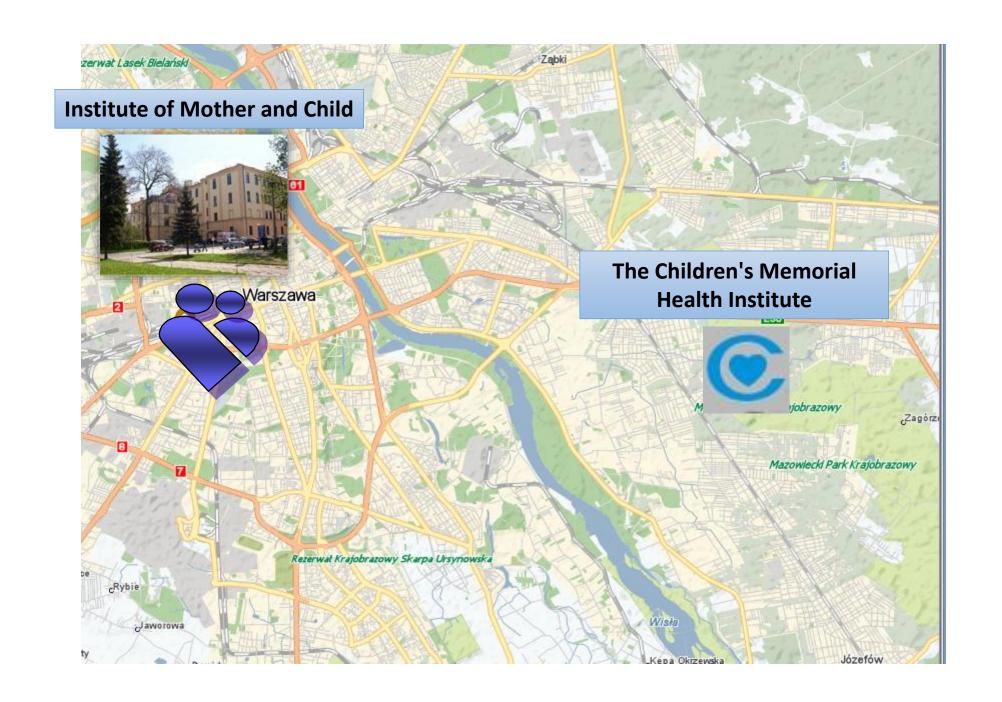
Associated Prof. Agnieszka Rygiel, PhD; Katarzyna Wertheim-Tysarowska, PhD



### The Children's Memorial Health Institute, Warsaw

Associated Prof. Grzegorz Oracz, MD,PhD





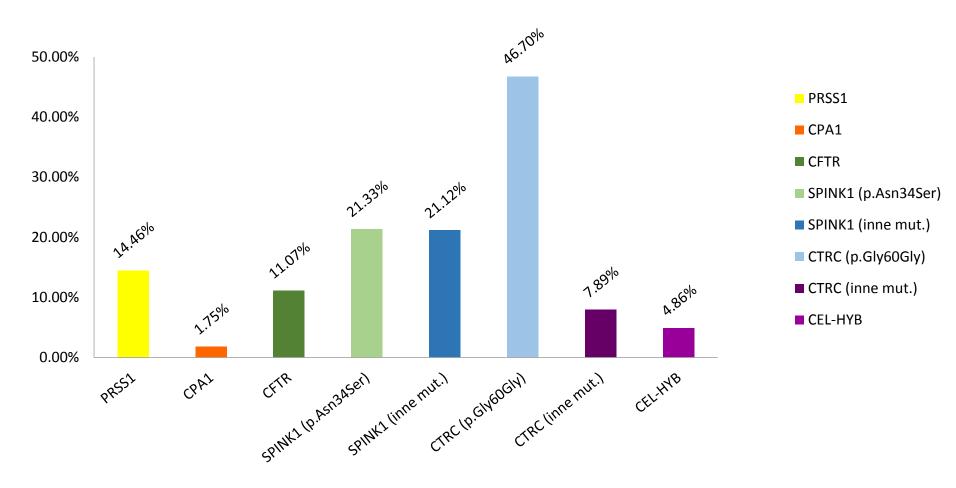
## 1. Institute of Mother and Child, Warsaw, Poland Department of Medical Genetics (Molecular, Cytogenetic unit and Genetic counseling)



- Since 1970s molecular diagnostic unit for various inherited disorders
- DNA bank of 6000 DNA samples including around 500 cases of RAP/CP from various hospitals
- 30 and 18 years of experience in molecular diagnostic of cystic fibrosis (CF) and chronic pancreatitis (CP), respectively
- 2. The Children's Memorial Health Institute, Warsaw, Poland
  Department of Gastroenterology, Hepatology, Feeding Disorders and Pediatrics
- Polish reference center for children with CP
- Single center cohort of around 400 cases: Grzegorz Oracz

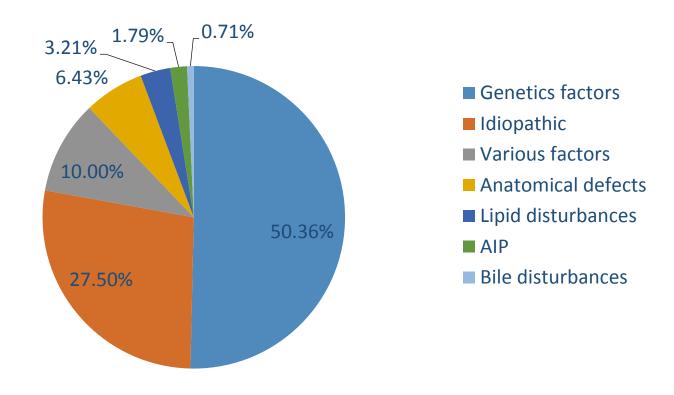


# Genetic variants in CP children cohort (mean age at diagnosis 10 years)



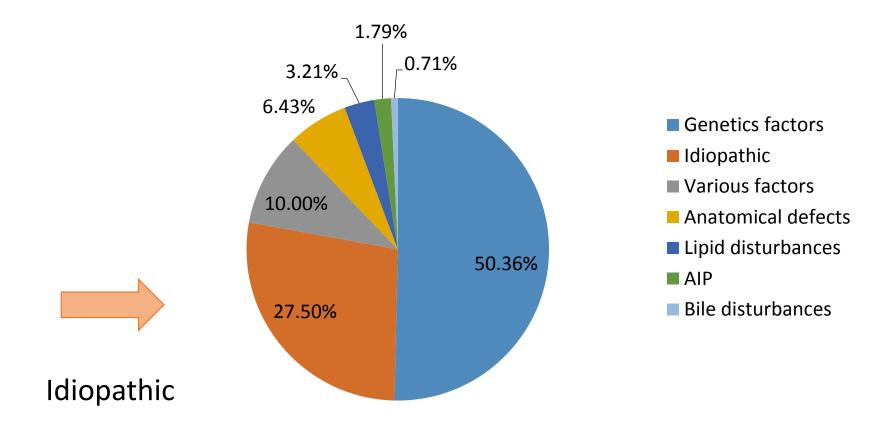
**CP children cohort of the Children's Memorial Health Institute** 

## Etiological factors in CP children (mean age at diagnosis 10 years)



CP children cohort of the Children's Memorial Health Institute

## Etiological factors in CP children (mean age at diagnosis 10 years)



CP children cohort of the Children's Memorial Health Institute

## **Ongoing Project**

Identification of novel genetic variants associated with risk of chronic pancreatitis by whole exome sequencing.

Lider: Institute of Mother and Child, Agnieszka Rygiel

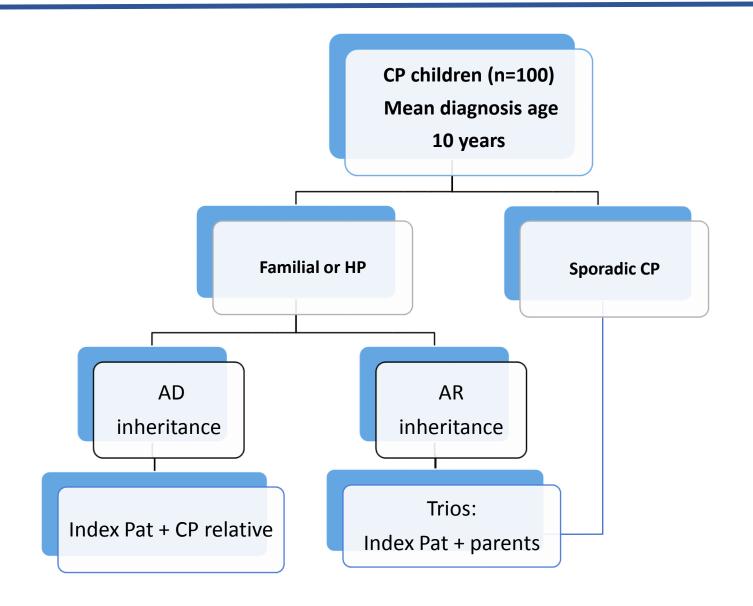
### **Collaboration:**

The Children's Memorial Health Institute, **Grzegorz Oracz** Medical Warsaw University: Prof. **Rafał Płoski** 





## Patients enrolled for WES



AD - autosmal dominat AR - autosomal recessive

## Pipeline of data analysis

WES (Illumina HiSeq)
Variants calling &
anotation



### **Variants Selection**

MAF < 0.01: gnomAD (ExAC) missense, frameshift, stop, intronic



In sillico predition

MutationTaster SIFT, PolyPhen-2



Co-segregation
of the variants with
CP in families



Variants validation by Sanger



Gene selection

gene's function
high expression in
pancreas



### Identification of novel and rare recurrent genetic variants in early onset chronic pancreatitis by whole exome sequencing

Agnieszka Magdalena Rygiel<sup>1</sup>, Grzegorz Oracz<sup>3</sup>, Tomasz Gambin<sup>1</sup>, Elwira Kołodziejczyk<sup>3</sup>, Joanna Kosińska<sup>2</sup>, Piotr Stawiński<sup>2</sup>, Katarzyna Wertheim-Tysarowska<sup>1</sup>, Rafał Płoski<sup>2</sup>, Jerzy Bal<sup>1</sup>

<sup>1</sup>Department of Medical Genetics, Institute of Mother and Child, Warsaw, Poland

<sup>2</sup>Department of Medical Genetics, Medical University of Warsaw, Warsaw, Poland <sup>3</sup>Department of Gastroenterology, Hepatology and Feeding Disorders and Pediatrics, The Children's Memorial Health Institute, Warsaw, Poland

#### Background

The early onset non-alcoholic chronic pancreatitis (CP) is often associated with genetic mutations driving uncontrolled trypsin activity or inducing endoplasmic reticulum stress. Despite of a progress in a discovery of new CP genes, the genetic basis of the disease in considerable number of patients remains unknown.

To identify novel and rare genetic variants associated with early onset CP patients by using whole exome sequencing (WES).

#### Patients and Methods

Before WES, Sanger sequencing was performed to exclude known genetic causes of CP. In total, 27 CP children (mean age at diagnosis 8 years) with familial or sporadic CP and their relatives (n=22) were included for WES. WES data (HiSeg 2500, Illumina) were compared between index patient and affected or/and unaffected relatives. The variants were selected taking into account: in silico prediction (SIFT, MutationTaster, PolyPhen-2), MAF <0.01 in genomic databases, gene function and expression in the pancreas (Figure 1). All selected variants were confirmed by Sanger sequencing.

Upon qualification for WES, we detected novel, pathogenic variant Ser282Pro in CPA1 and Glu190Lys in PRSS1. In 7 out of 27 cases analyzed by WES, 2 novel variants (Leu100VfsX21 CTRC and c.56-1G>A SPINK1) and stutus was confirmed by functional studies: Najho AA et al., Gut 2018; Jancard 2 et al., Frontiers in Genet 2019. 5 recurrent variants were detected in other know CP genes (Table 1). Besides, we selected novel or rare variants in several susceptibility genes candidates as depicted in Table 2. In 9/27 of the index patients, the transheterozygous variants in two different genes (known CP gene and susceptibility gene candidate) were observed.

#### Conclusion

We identified novel and rare recurrent variants in fragments of known CP genes routinely not examined by Sanger sequencing (PRSS1: exon 4; SPINK1: intron 1, exon 1; CTRC: exon 4; CFTR: 3, 14a, 17a, 18). We have selected several potentially pathogenic variants in susceptibility genes candidates encoding proteins highly expressed in the pancreas. Their clinical significance needs to be elucidated by the functional and the case-control studies.

Financed: National Science Center Poland:2015/19/B/NZ5/02224 The authors declare no competing financial interests. Informed consent from all patients was obtained.

#### Figure 1: Strategy to select the potentially pathogenic variants



of the variants with CP



SIFT, PolyPhen-2

#### Table 1: Novel and recurrent variants in CP genes

CP gene	Exon/intron	Variant	CP carriers Nr	Novel/recuurent
	8	Ser282Pro	2	novel
CPA1*	10	Arg382Trp	1	recurrent
	10	Trp318X	1	recurrent
PRSS1*	4	Glu190Lys	1	novel
CTRC	4	Leu100VfsX21	1	novel
SPINK1	intron 1	c.56-1G>A	1	novel
SPINKI	1	Ser10VfsX5	1	recurrent
CFTR	3	Arg75Gln	1	recurrent
	14a	Arg851X	1	recurrent
	18	Asp1152His	1	recurrent
	17a	Leu997Phe	1	recurrent

#### Table 2: New candidates for CP susceptibility genes

Gene candidate	Protein function	Variant	CP carriers	GnomAD
			Nr	MAF %
CUZD1	zymogen granule	Cys229Ser	1	novel
COZDI	protein	Cys207Thr	1	novel
PNLIP	trigliceryde lipase	Gln323Leu	1	novel
GCK	glucokinase	Val101Met	1	0.009
	transcription factor, pancreatic islet cell differentiation	Ala648Thr	1	novel
BENE		Ser883Phe	1	novel
RFX6 p		Thr680Lys	2	0.001
CPB1	carboxypepeitase	Aso172Glu	2	0.01
SERPINA12	serine-type endopeptidase inhibitor	Gly327Asp	1	0.003

Contents lists available at ScienceDirect



### Pancreatology

journal homepage: www.elsevier.com/locate/pan



Original article

The clinical course of hereditary pancreatitis in children — A comprehensive analysis of 41 cases

Grzegorz Oracz <sup>a, \*</sup>, Elwira Kolodziejczyk <sup>a</sup>, Agnieszka Sobczynska-Tomaszewska <sup>b, c</sup>,

### Research Article

Human Mutation

# Gene Conversion Between Cationic Trypsinogen (*PRSS1*) and the Pseudogene Trypsinogen 6 (*PRSS3P2*) in Patients with Chronic Pancreatitis



Agnieszka Magdalena Rygiel,<sup>1</sup>† Sebastian Beer,<sup>2</sup>† Peter Simon,<sup>3</sup> Katarzyna Wertheim-Tysarowska,<sup>1</sup> Grzegorz Oracz,<sup>4</sup> Torsten Kucharzik,<sup>5</sup> Andrzej Tysarowski,<sup>6</sup> Katarzyna Niepokój,<sup>1</sup> Jarosław Kierkus,<sup>4</sup> Marta Jurek,<sup>1</sup> Paweł Gawliński,<sup>1</sup> Jarosław Poznański,<sup>7</sup> Jerzy Bal,<sup>1</sup> Markus M. Lerch,<sup>3</sup> Miklós Sahin-Tóth,<sup>2</sup>† and Frank Ulrich Weiss<sup>3</sup>\*†

Published in final edited form as:

Gut. 2017 September; 66(9): 1728–1730. doi:10.1136/gutjnl-2017-313816.

ELSEVIER

## A novel p. dominant

Aleksandra Ki Antoniuk<sup>1</sup>, Ka Sahin-Tóth<sup>2,#</sup>.



# Chymotrypsinogen C Genetic Variants, Including c.180TT, Are Strongly Associated With Chronic Pancreatitis in Pediatric Patients

ORIGINAL ARTICLE: PANCREATOLOGY

\*Alicja Monika Grabarczyk, †Grzegorz Oracz, \*Katarzyna Wertheim-Tysarowska, \*Aleksandra Anna Kujko, †Karolina Wejnarska, †Elwira Kolodziejczyk, \*Jerzy Bal,

Contents lists available at ScienceDirect

### Pancreatology

journal homepage: www.elsevier.com/locate/pan

### Novel | p.Glu19 Pancre

Zsanett Jancsó

The hybrid allele 1 of carboxyl-ester lipase (*CEL-HYB1*) in Polish pediatric patients with chronic pancreatitis

Grzegorz Oracz <sup>a</sup>, Aleksandra Anna Kujko <sup>b</sup>, Karianne Fjeld <sup>c, d</sup>, Katarzyna Wertheim-Tysarowska <sup>b</sup>, Wioletta Adamus-Białek <sup>e</sup>, Solrun Johanne Steine <sup>f</sup>, Dorota Koziel <sup>e</sup>, Stanislaw Gluszek <sup>e</sup>, Anders Molven <sup>f, g</sup>, Agnieszka Magdalena Rygiel <sup>b, \*</sup>



Instytut Pomnik Centrum Zdrowia Dziecka, dr hab. G.Oracz



Uniwersytet w Bergen Prof. A. Molven



Uniwersytet Jana Kochanowskiego w Kielcach, Prof. S.Głuszek



Instytut Biochemii i Biofizyki, PAN, Prof. J.Poznański



Technische Universität München



Uniwersytet w Bostonie, Prof. M. Sahin-Thoth

Uniwersytet w Monachium, Niemcy Prof. H. Witt



Uniwersytet w Greifswald, Niemcy Prof. U.Weiss



Uniwersytet Warszawski, Prof. Płoski; Dr Drożak

# Molecular diagnostics at Department of Medical Genetics, IMCh

Diagram of routine molecular diagnostics

### **PART 1 – FREQUENT MUTATIONS**

**PRSS1** ex. 2 i 3 **SPINK1** ex. 3 **CFTR** ex. 4, 9 – 11, dele 2,3 **CTRC** ex. 2,3,7



### **PART 2 – RARE MUTAIONS**

**PRSS1** ex. 1, 4, 5 **SPINK1** ex. 1, 2, 4, 5 **CPA1** ex 7 – 10

## Implementation of Panel-based CP genetic analysis using NGS sequencing

### **ETAP 1 – RARE MUTATIONS**

**PRSS1** ex. 2 i 3 **SPINK1** ex. 3 **CFTR** ex. 4, 9 – 11, dele 2,3 **CTRC** ex. 2,3,7



**PRSS1** ex. 1, 4, 5 **SPINK1** ex. 1,2,5, (4), **CPA1** ex 7 – 10

### **NGS GENE PANEL for CP:**

One step analysis for all CP genes

**Shorter procedure and lower cost** 

POWER "Choroby genetycznie uwarunkowane - edukacja i diagnostyka"









# The European Molecular Genetic Quality Network (EMQN) for Sanger and NGS sequencing





#### EMQN Office

Manchester Centre for Genomic Medicine, 6th Floor, St Mary's Hospital, Hathersage Road, Manchester M13 9WL, United Kingdom.

**SEASON: 2018** 

Tel: +44 161 276 6741 Fax: +44 161 276 6606 Email: office@eman.org

### INDIVIDUAL LABORATORY REPORT (ILR) - Lab 0134

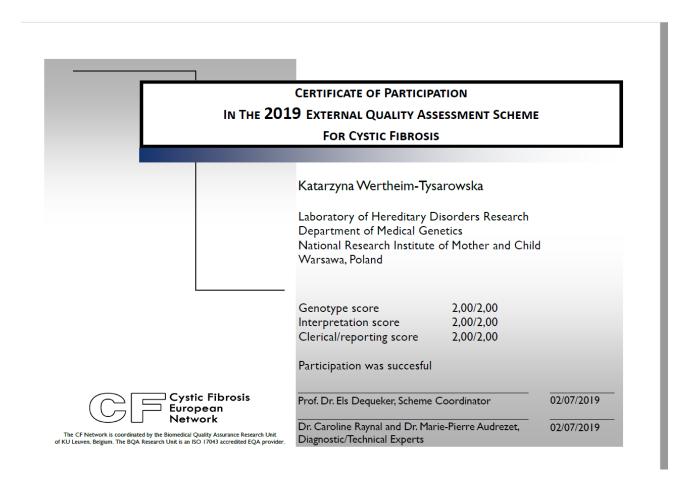
SCHEME: DNA SEQUENCING - SANGER (Full version)

Case 1		
Assessment Category	Score <sup>1</sup>	Comments (& deductions²)
Genotyping	2.00	No deduction (0)
cDNA Interpretation	2.00	No deduction (0) We encourage using the LRG reference locus when available, in this case LRG_292t1 (comment for all cases)
Protein Interpretation	2.00	No deduction (0) Please use soft brackets for protein prediction

Case 2		
Assessment Category	Score <sup>1</sup>	Comments (& deductions <sup>2</sup> )
Genolyping	2.00	No deduction (0)
cDNA Interpretation	2.00	No deduction (0)
Protein Interpretation	2.00	No deduction (0)
		Please use soft brackets for protein prediction

Case 3		
Assessment Category	Score <sup>1</sup>	Comments (& deductions <sup>2</sup> )
Genotyping	2.00	No deduction (0)
cDNA Interpretation	2.00	No deduction (0)
Protein Interpretation	2.00	No deduction (0)

# External Quality assesment scheme for Cystic fibrosis (CF European Netwok)



## Department of Medical Genetics, IMID





# Laboratory of research on inherited diseases: CP genetic group





# The Children's Memorial Health Institute Warsaw and others





## Thank you!