

Genetic Counselling in Mitochondrial Disorders

Jacqui Robinson

Genetic and Metabolic Nurse Practitioner

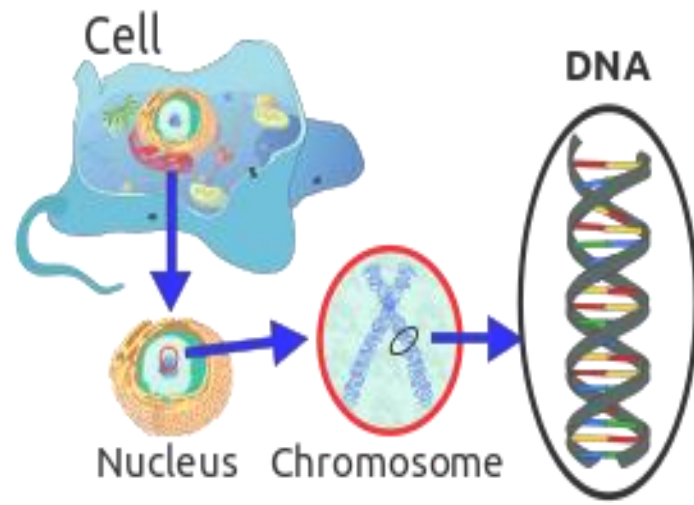
Sydney Children's Hospital, Randwick

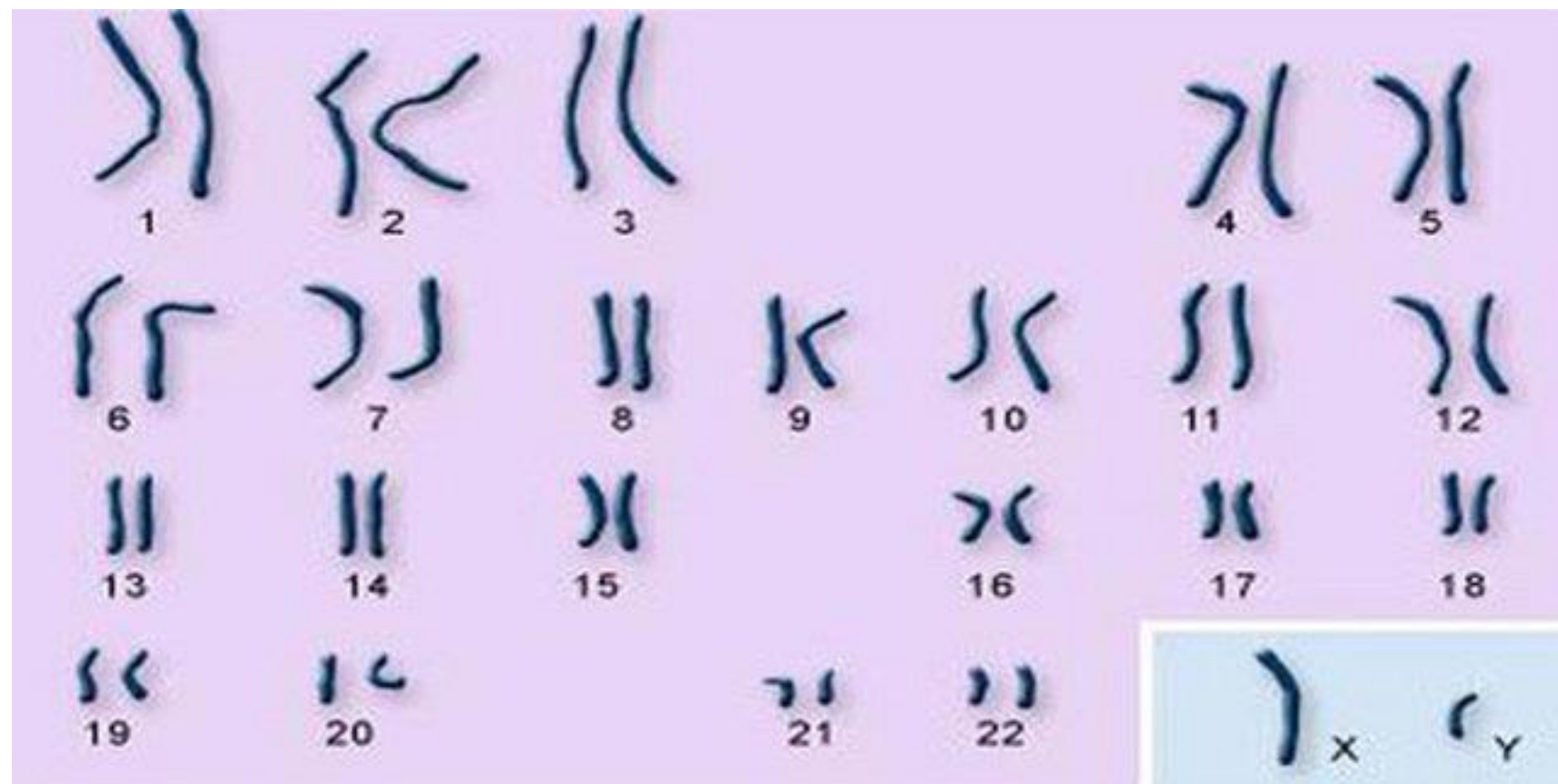
DNA

- The blueprint of life
- Recipe to make us who we are
- Inherited from our parents
- Shared with our relatives
- Sometimes the code is wrong
- Two types
 - Nucleic
 - Mitochondrial

Nuclear DNA

- Found in the nucleus
- Half from mum, half from dad
- Packaged as chromosomes
- 23 pairs
 - 22 pairs autosomes
 - 1 pair sex chromosomes
- 20,000 pairs of genes
- Mutations can cause mitochondrial disorders

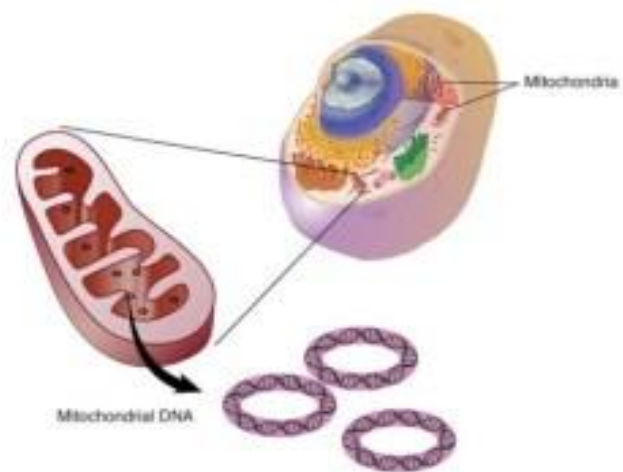




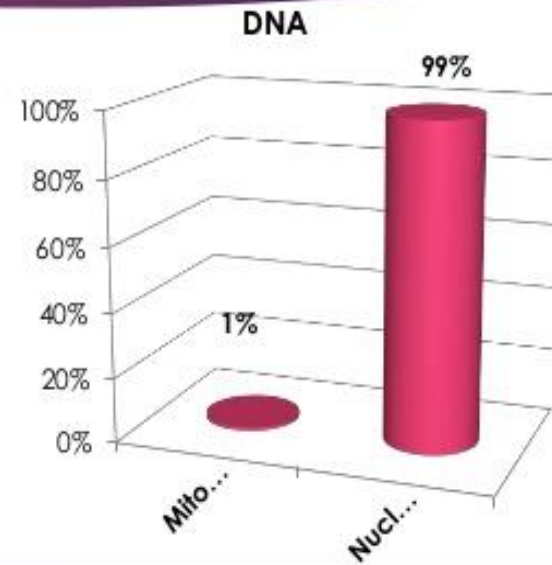
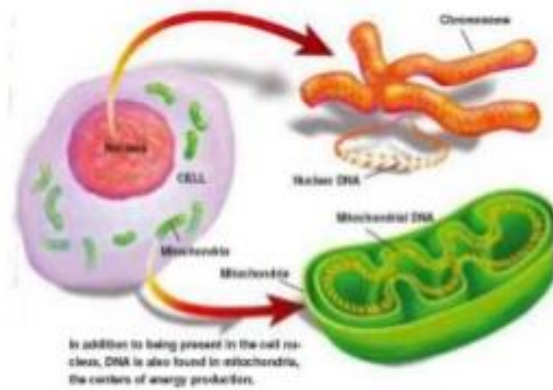
Mitochondrial DNA

- Mitochondria have their own DNA (mtDNA)
- Inherited from mum
- Circular chromosome
- Mutations can cause mitochondrial disorders
- 37 genes
- Most cells contain 1000 mtDNA molecules distributed among hundreds of individual mitochondria

Mitochondrial DNA



NUCLEAR DNA VS MITOCHONDRIAL DNA



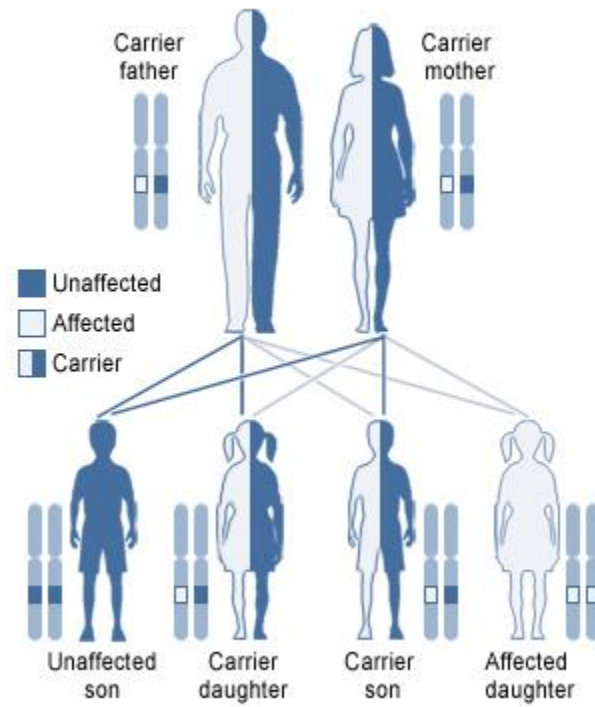
Inheritance of Mitochondrial Disorders

- Can be caused by mutations in both nuclear DNA and mtDNA
- Can be caused by different types of inheritance
- Need to know the exact genetic change for accurate genetic counselling

Autosomal Recessive Inheritance

- Nuclear DNA
- Need mutations in both copies of the gene to have the disorder
- Parents are both healthy carriers
- Equally likely for boys and girls to be affected
- 25% recurrence risk
- Usually no family history
- Probably the most common inheritance in mitochondrial disorders

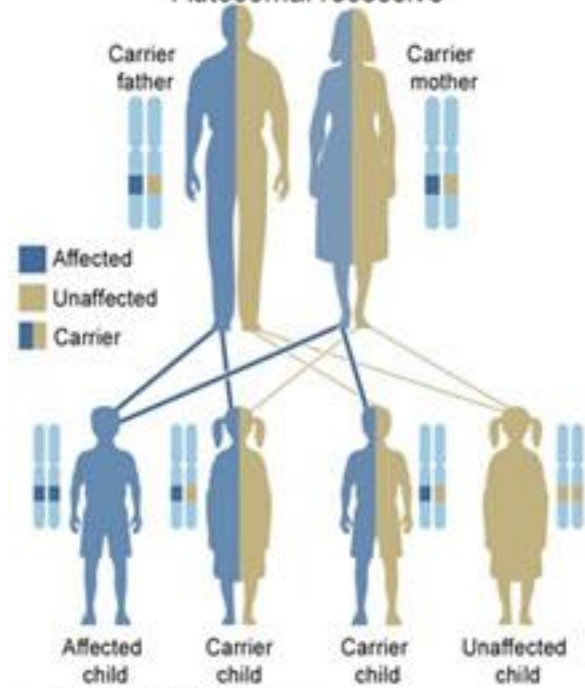
Autosomal recessive



Autosomal Dominant Inheritance

- Nuclear DNA
- Need a mutation in only one copy of the gene (mutation is *dominant* over the good copy)
- Usually one parent is affected or can be a new mutation (de novo)
- Equally likely for boys and girls to be affected
- Up to 50% recurrence risk
- Often a family history
- Not very common in mitochondrial disorders

Autosomal recessive

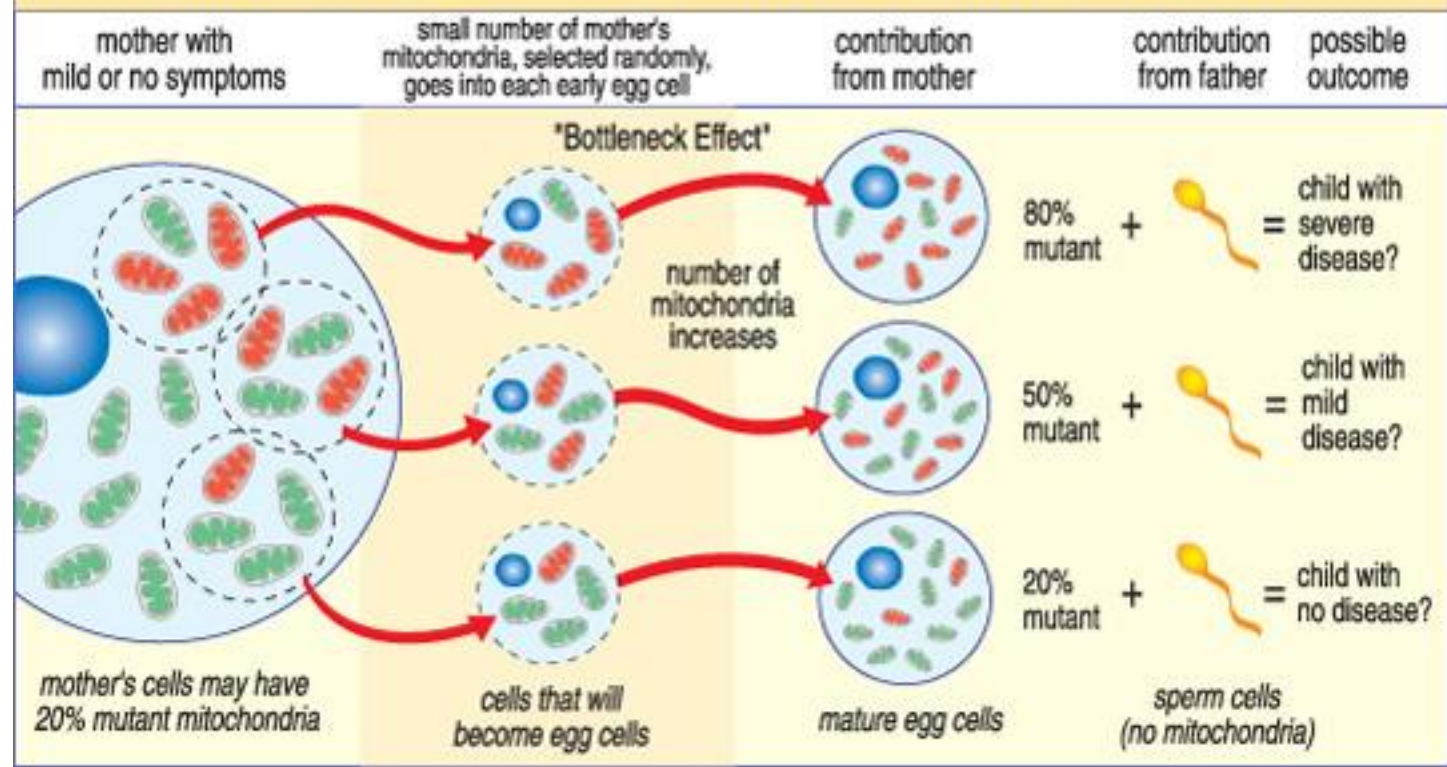


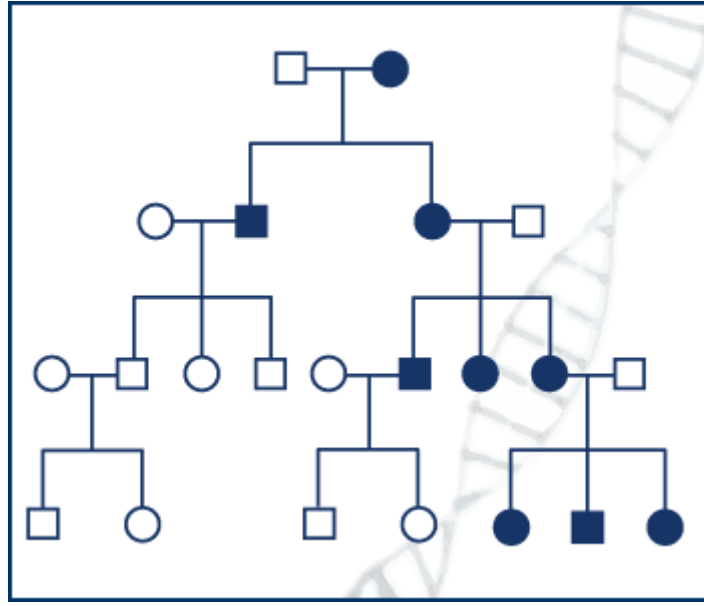
U.S. National Library of Medicine

Mitochondrial Inheritance

- Maternal inheritance
- Men can not pass it on to their children
- Mother can either be affected herself, have a very low mutant load, or it is a de novo mutation
- Very variable between affected people in the family
- Recurrence risk up to 100%

MATERNAL INHERITANCE OF MITOCHONDRIAL DNA MUTATIONS

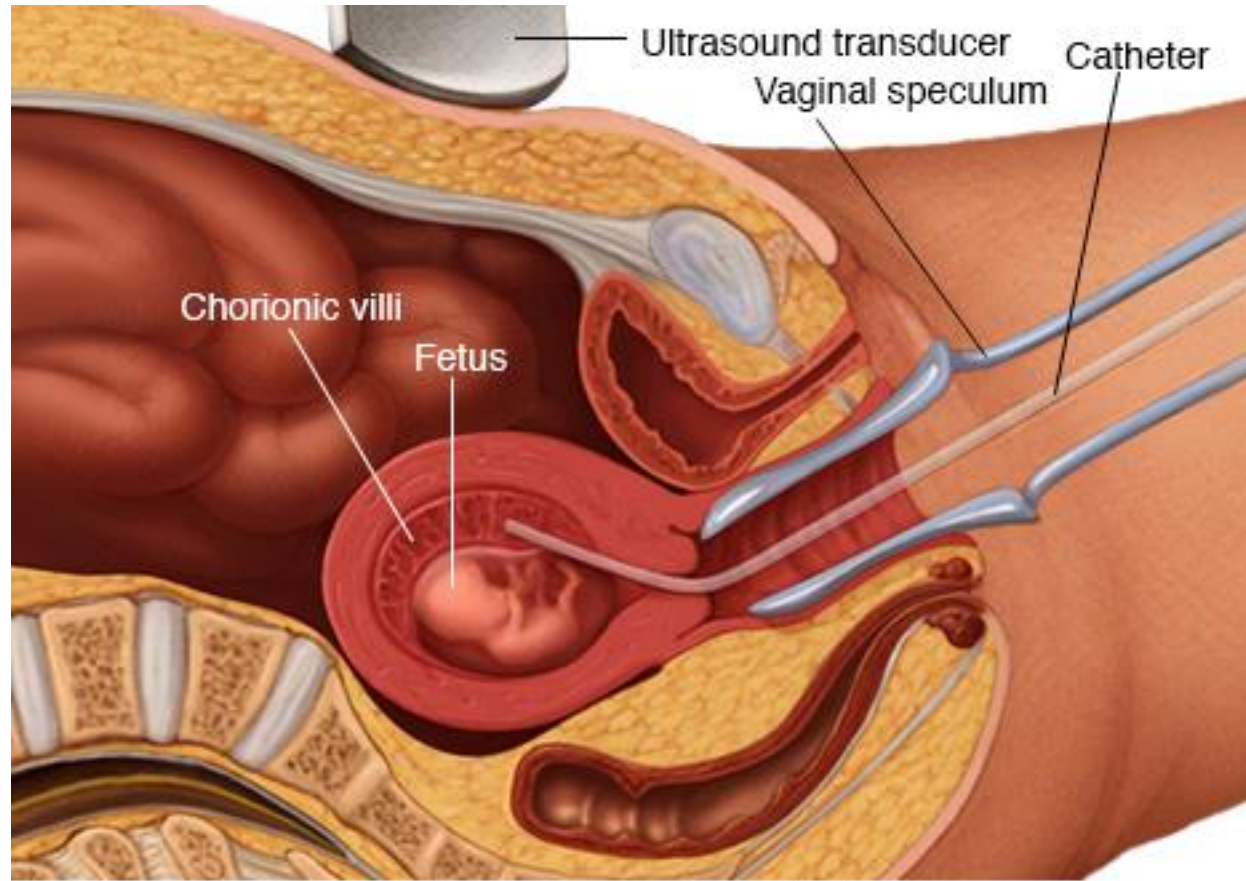




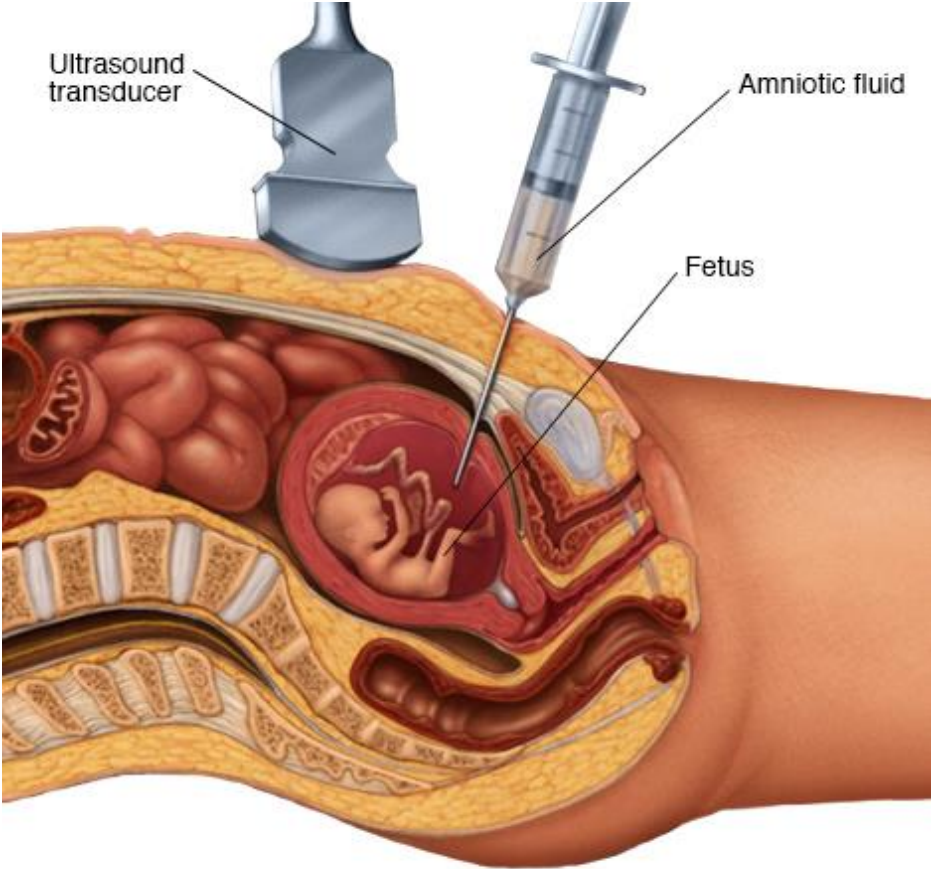
Options for future pregnancies

- Natural Conception
 - Do nothing
 - Do CVS
 - Do amniocentesis
- IVF pregnancy
 - PGD
- Donor
 - Donor egg
 - Donor sperm
 - Donor mitochondria

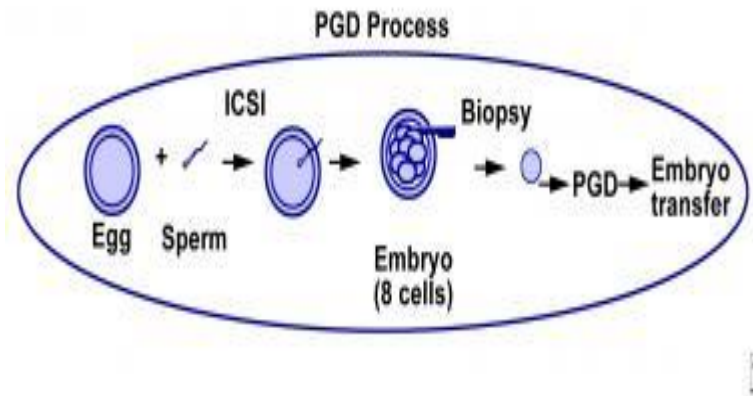
Chorionic Villus Sampling



Amniocentesis



Pre-implantation Genetic Diagnosis



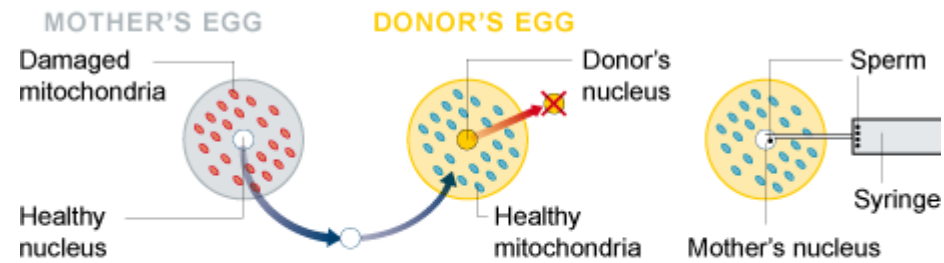
Donor Gamete

- Helpful for when you don't know the genetic mutation
- Best to use donor egg because it also rules out mtDNA
 - Don't use a female relative!
- Easier to get sperm donor than egg donor
- Disadvantage is that one parent will not be a 'biological' parent

Mitochondrial Donor

- Transfer the mother's nucleus into the donor's egg
- Retains mother's nuclear DNA but uses mutation free mtDNA
- So called 3 parents
- Approved in UK but not done here in Australia yet
- Don't use a female relative

CREATING A THREE-PARENT FAMILY



1 Healthy nucleus is extracted from mother's defective egg

2 Nucleus removed from healthy donor egg and replaced with mother's nucleus

3 Egg carrying genetic material of two women fertilised by male sperm and implanted into mother