STAR Training - 2/22/2018

Genetics and Genetic Testing for Autism:

Demystifying the Journey to Find a Cause

Alyssa (Ah-leesa) Blesson, MGC, CGC

Certified Genetic Counselor Center for Autism and Related Disorders (CARD) Kennedy Krieger Institute



KennedyKrieger.org

Conflicts of Interest

• None.

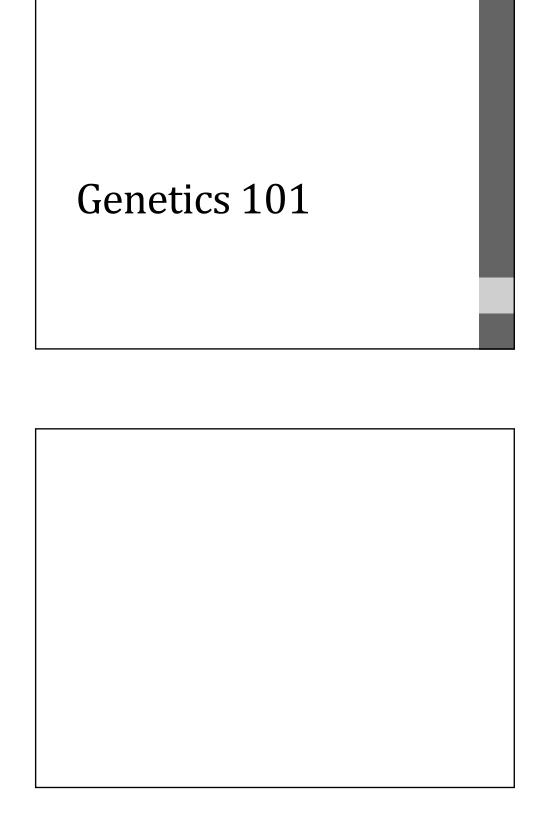
Objectives

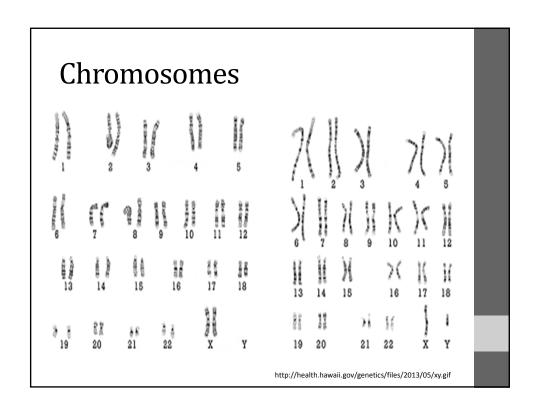
- To provide general background information about our current understanding of the genetics of autism spectrum disorder
- To summarize types of genetic tests and general approach to genetic evaluation of autism spectrum disorder
- To highlight considerations for genetic testing and the utility of genetic counseling for individuals/families thinking about genetic testing
- To provide information about genetic counseling services at the Center for Autism and Related Disorders (CARD) and the Kennedy Krieger Institute

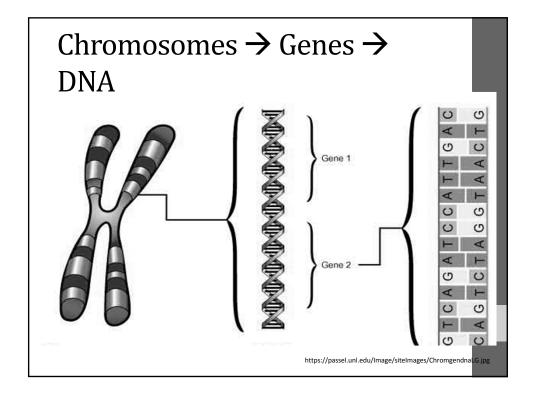
Overview

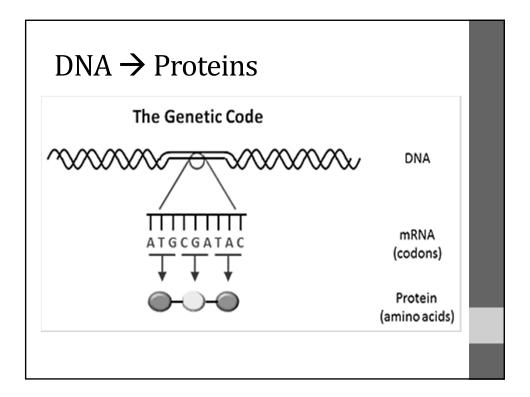
- Genetics 101
- Genetics of Autism
- · Clinical Genetic Testing
 - Types of tests
 - Possible results
 - Inheritance patterns
 - Considerations
- Genetic Counseling
- Questions



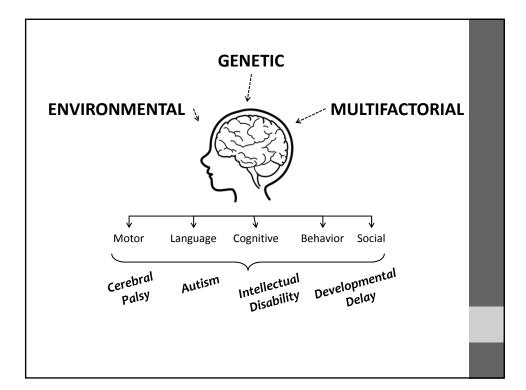






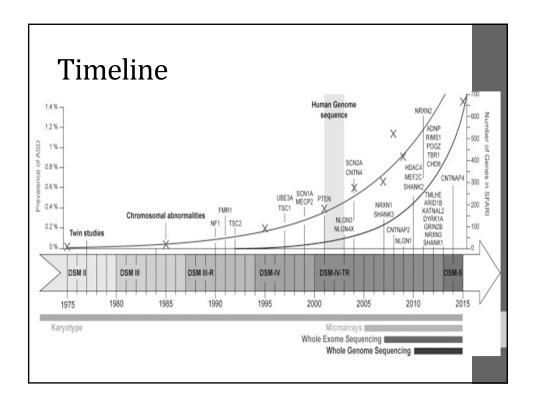


Genetics & Autism



Genetics of Autism

- Multifactorial: there is no singular known cause for autism
 - Genetics
 - Environment
 - · Other factors
- There is a strong, complex genetic component
 - Various types of genetic changes in multiple genes
- Our knowledge of the genetics of autism is not perfect:
 - We're still discovering associations with specific genetic changes to autism
 - There is a lot we still do not know
 - Many times, we cannot find the underlying genetic cause



Purpose of Genetic Testing

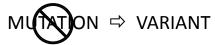
- Genetic testing is a **tool** to identify the underlying genetic cause for an individual's diagnosis of autism spectrum disorder
 - Genetic testing does not diagnose an individual with autism
 - Testing analyzes genetic material for a particular types of genetic changes (chromosomes, DNA variants)
- There is no single genetic test to look for every type of genetic change at one time.
- Our testing is limited to our knowledge of genetics and our technology at the time testing is performed.
- Genetic testing has been recommended by multiple medical/healthcare organizations (American Academy of Pediatrics).

Reasons for Genetic Testing

- Prognosis
- Medical management
 - In rare cases, a specific treatment may be known
 - Most likely there will not be a definitive "cure" at this time
- Establish inheritance pattern to determine risks to family members and future children
 - Genetic changes are not always inherited
 - Allows for reproductive options for future pregnancies
- Psychosocial benefits
 - Closure
 - · Opportunity to connect with other families
 - Alleviation of guilt/blame

Clinical Genetic Testing

Types of Genetic Changes



- Variant is neutral term that means a change in DNA/chromosome.
- Everyone has variants
 - Unique, normal changes
 - Causative (pathogenic)
- Changes in the chromosomes (that may affect many genes)
 - · Numerical chromosome abnormality
 - · Copy number variant: deletion or duplication of a region of a chromosome
 - Structural chromosomal abnormality/rearrangement
- Changes in a single gene
 - DNA sequence alteration
 - · Deletion or duplication

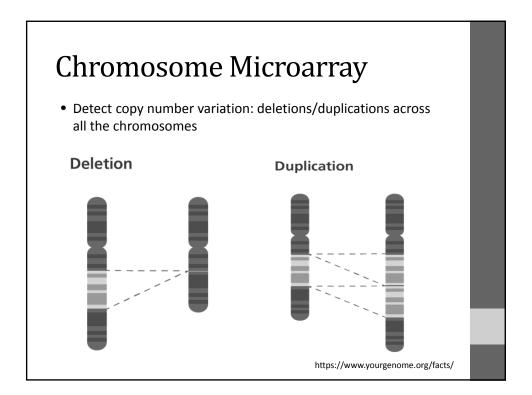
Testing Strategy

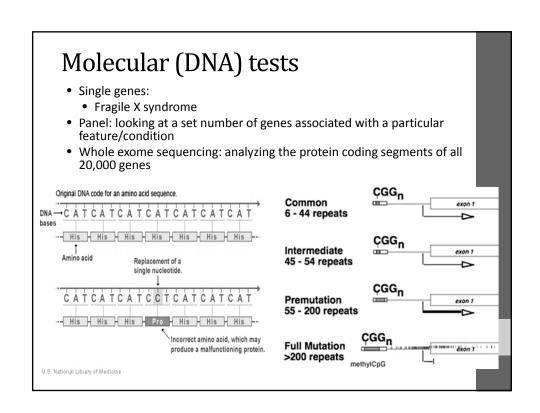
FIRST TIER

- Chromosome microarray
- Fragile X syndrome testing
- Specific single gene DNA tests, depending on indication

SECOND TIER

 Molecular DNA tests: specific genes vs. whole exome sequencing





Possible Results from Genetic Testing



Positive (Abnormal)

- Identified a known genetic change related to autism
- Resources are available for information about other individuals with the same/similar genetic cause
 - UNIQUE: Rare Chromosome Disorder Support Group
 - Simons VIP connect
 - · Facebook groups
 - Clinicaltrials.gov





Negative (Normal)

- Did not identify any of the genetic changes analyzed on that particular test
- Does not rule out an underlying genetic cause because our knowledge and technology is not perfect
- Consider further workup/testing

Variant of Uncertain Significance

- Genetic change identified without clear evidence that it is related to autism or a benign change
- Testing other family members may be recommended

This interpretation may change over time as new information





Incidental/Unexpected Finding

- Genetic change identified that is unrelated to autism
- Examples:
 - Parental relationships: consanguinity, non-paternity, non-maternity
 - Carrier status
 - Risks for other health conditions

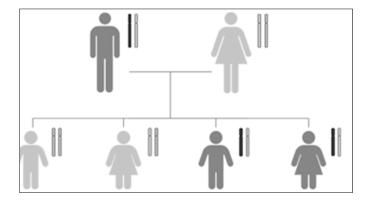
Inheritance

Inheritance

- We inherit one copy of each chromosome (and therefore one copy of each gene) from each of our parents
- Patterns of inheritance:
 - Autosomal Dominant
 - Autosomal Recessive
 - X-linked
- Genetic disorders are not always inherited
 - Sporadic or "de novo"

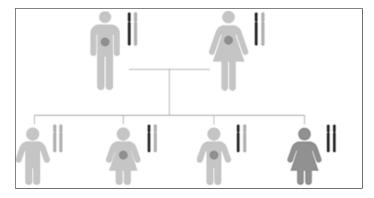


Autosomal Dominant



- Genes on numbered chromosomes
- One gene copy not working → affected with condition
- 50% chance in each pregnancy to have affected child
- Same for males and females

Autosomal Recessive

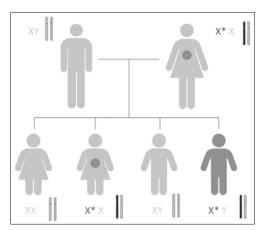


- Genes on numbered chromosomes
- One gene copy not working → unaffected carrier
- Both gene copies not working → affected with condition
- 25% chance in each pregnancy to have affected child
- Same for males and females

X-Linked Disorders

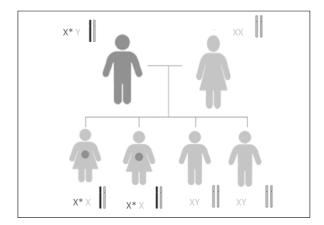
- Males have one X chromosome therefore only one copy of the gene
 - If only copy of gene not working, he will be affected
- Females have two X chromosomes therefore two gene copies
 - If one copy is not working, she is a carrier
 - · Carriers usually unaffected or partially affected

X-Linked – mother carries mutation



- Sons: 50% chance affected
- Daughters: 50% chance carrier

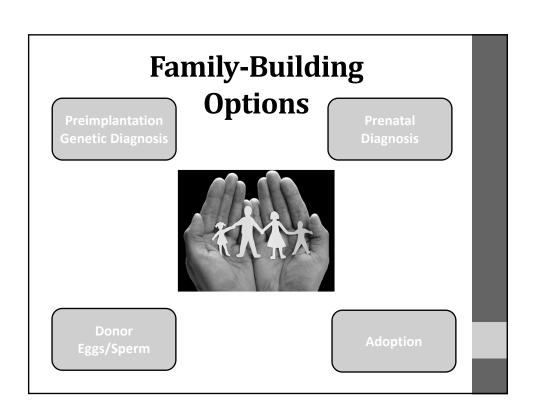
X-Linked – father carries mutation



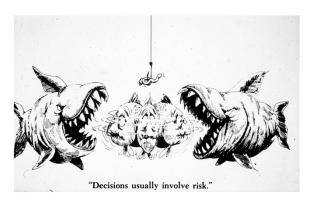
- All daughters are carriers
- All sons are unaffected

Other scenarios

- De novo variant spontaneous genetic change in child, not inherited from parents
- Mosaicism variant is present in egg/sperms cells of the parent, but not elsewhere. The parent is likely unaffected, but is at increased risk to have another child with the condition
- Variable expression range of signs and symptoms that can occur in different people with the same genetic change, even within the same family



Considerations: Genetic Testing is a Choice



Logistics

- Typically performed on a blood sample
 - Alternative samples: buccal (cheek swab), saliva
- Start testing in the individual diagnosed with autism
 - May consider targeted testing in parents once results received
 - In affected siblings, start with the sibling who is more severely affected
- · Insurance coverage
 - Most insurances have benefits for genetic testing, but pre-authorization may be the first step
 - Most genetic testing laboratories have patient friendly billing policies
- Results come back at varying times:
 - Chromosome microarray: 4-6 weeks
 - Fragile X syndrome testing: 3-4 weeks
 - Whole exome sequencing: 4-5 months

Limitations/Risks of Genetic Testing: Not "just" a blood test

- Will not lead to definitive cure or treatment
- Results not always clear-cut
 - · Positive/abnormal
 - Negative/normal
 - · Variant of uncertain significance
 - · Incidental/unexpected finding
- · Genetic test results often have implications for family members
- Genetic discrimination and information privacy

The Genetic Information Nondiscrimination Act (GINA)

- GINA outlines protections and limitations of existing legislation to protect against potential discrimination based on genetic test results. At the federal level:
 - GINA prohibits group and individual health insurers from using genetic information (including genetic test results and family history) as eligibility or premium criteria and from requiring a patient to take a genetic test.
 - GINA prohibits employers with greater than 15 employees from using genetic information in decisions related to the hiring, firing, promotion, etc. of employees.
- GINA does not protect against discrimination based on genetic information as it may apply to:
 - life insurance
 - long-term care insurance
 - · disability insurance
 - members of the federal government and/or military

Genetic Counseling

Genetic Counseling

- Genetic counseling is the process of helping individuals understand and adapt to the medical, psychological, and familial implications of genetic contributions to disease.
- Genetic counselors have advanced training in medical genetics and counseling to interpret genetic test results, and to guide and support patients seeking more information about such things as:
 - How inherited diseases and conditions might affect them or their families.
 - How family and medical histories may impact the chance of disease occurrence or recurrence.
 - Which genetic tests may or may not be right for them, and what those tests may or may not tell.
 - How to make the most informed choices about healthcare conditions.

Genetic Counselors

- Genetic Counselors work in a variety of settings including:
 - Prenatal and Preconception for women who are pregnant or thinking about becoming pregnant
 - Pediatric for children and their family members
 - Cancer for patients with cancer and their family members
 - Cardiovascular for patients with diseases of the heart or circulatory system and their family members
 - Neurology for patients with diseases of the brain and nervous system and their family members.
 - And more
- Find A Genetic Counselor Tool:
 - https://www.nsgc.org/findageneticcounselor

Informed Consent	
✓ Nature/Scope	☐ simple explanation of test☐ purpose = find genetic cause☐ possible result outcomes
✓ Benefits	May identify the genetic cause/diagnosisMedical & psychosocial benefits to diagnosis
✓ Limitations	 Does not rule-out all genetic conditions Will not lead to definitive cure or treatment May need to test parents
√ Risks	☐ Ambiguous results☐ Unexpected/unrelated information☐ Familial implications
✓ Costs	☐ Check with insurance for authorization!

Genetic Counseling at CARD

- Either a healthcare provider makes a recommendation for first-tier genetic testing or family expresses interest in testing. Provider will place a referral for genetic counseling at CARD for pre-test counseling.
 - Informed consent
 - · Family history
 - Coordinate sample collection
- Going to a genetic counseling appointment does not commit you to have genetic testing
- Result disclosure
 - In person meeting with a neurogeneticist and genetic counselor for interpretation of any abnormal genetic test results and further evaluation
 - Discuss options for further workup/testing if results are normal

Research Opportunities



Summary

- We know there is a genetic component to autism spectrum disorder, but we do not have a complete knowledge of every genetic cause.
- Genetic testing is available as a tool to potentially identify a genetic cause, based on current knowledge and technology capabilities.
- Genetic testing is a choice.
 - Reasons to do genetic testing: informational for prognosis and medical management as well as family planning
 - Reasons some families choose not to do testing: risks for uncertain/unexpected results, no guarantee of positive result/management information, concerns for discrimination
- Genetic counseling is strongly recommended for individuals/families before, during, and after genetic testing.
- Genetic counseling is available at CARD and at the Kennedy Krieger Institute.

Resources

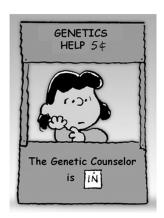
- National Society of Genetic Counselors: Find a Genetic Counselor Tool
 - www.nsgc.org
- Genetics Home Reference
 - www.ghr.nlm.nih.gov



- Genetics and Rare Diseases Information Center:
 - https://rarediseases.info.nih.gov/gard



Thank you!



Specific Questions?
CONTACT ⊠:
blesson@kennedykrieger.org