



# Genetics, Genomics, and You: Don't Fear Your Genotype!

Mohamed Noor  
Duke University

Bright Horizons 11  
Sunday, Oct 9, 2011

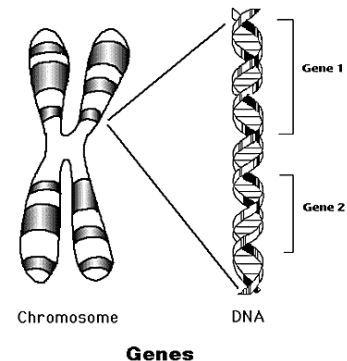
# Lab tomorrow...

- What we'll do
  - Isolate/ precipitate your DNA
  - *NOT* a “genetic test” of any sort
- **Please avoid coffee beforehand**



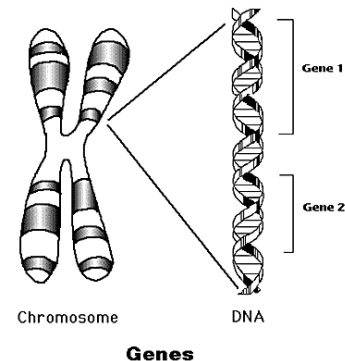
# Disease genes in the news

- **Parkinson's Disease** gene is found
  - 15 Apr 2004, BBC News
- Gene Increases **Diabetes** Risk, Scientists Find
  - 16 Jan 2006, NY Times
- Gene 'increases **Alzheimer's** risk'
  - 15 Apr 2007, BBC News
- Researchers find big batch of **breast cancer** genes
  - 28 May 2007, CNN

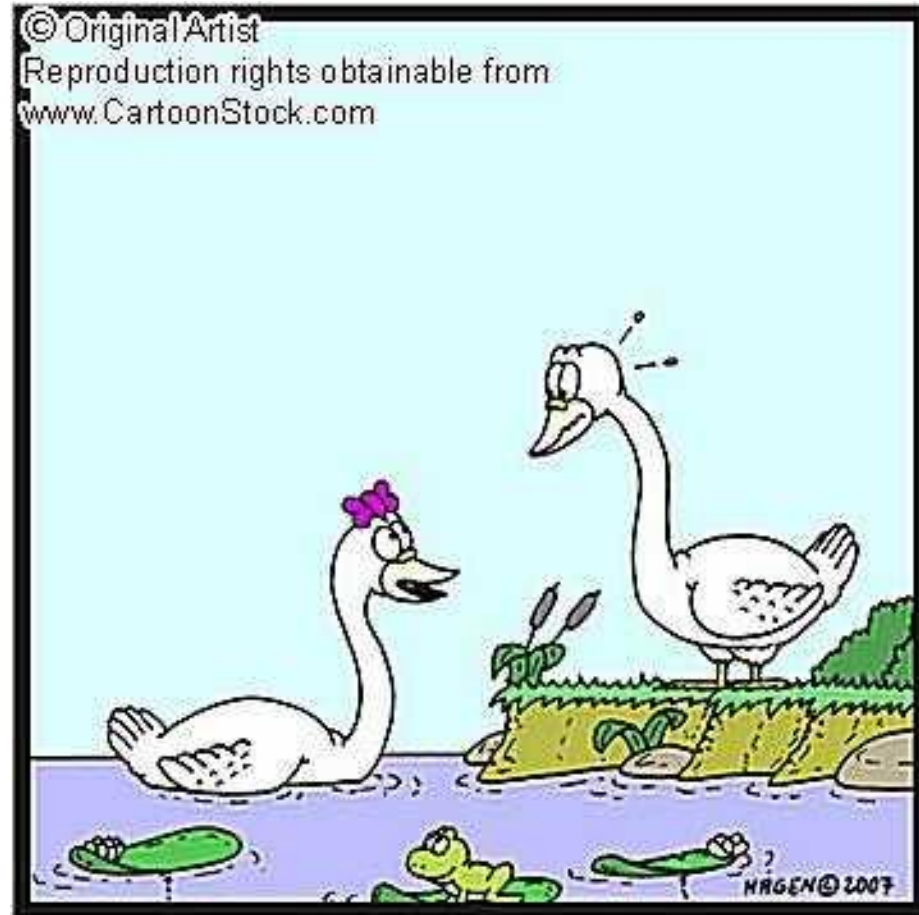


# Other genes in the news

- Researchers Identify **Alcoholism Gene**
  - 26 May 2004, WebMD News
- '**Fat**' gene found by scientists
  - 13 April 2007, The Times
- Gene for **left-handedness** is found
  - 31 July 2007, BBC News
- “Has the ‘**gay** gene’ been found in female mice?”
  - 14 July, 2010, Popular Science



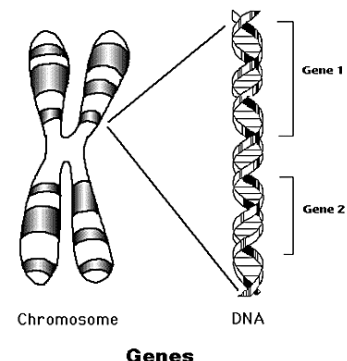
# ... but then there's some "raging debate" about Nature vs Nurture



Well, you walk like a duck, you quack like a duck...  
May I ask who brought you up?

# ... and the genes don't always hold up...

- 18 January 2007, ABC News: Scientists Debunk So-Called 'Fat Gene'
  - CNN: Exercise blocks effect of fat gene
- 8 January 2008, NY Times: Breast Cancer Gene Risk May Be Overstated

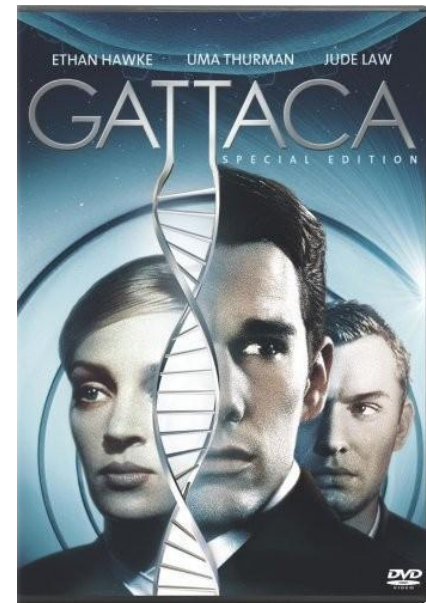


# There's controversy associated with DTC genetic testing...

- July 2010 *NY Times*: “F.D.A. Faults Companies on Unapproved Genetic Tests”
- Walgreens drops its plan to sell personal genomic tests



nonetheless...



# ... yet interest remains high

From Oct 5, 2011,  
*Nature* magazine

(Istanbul day 1)

## GENOMES BY THE NUMBERS

Of 1,588 respondents, 289 report having taken a total of 396 genetic tests, ranging from whole-genome sequencing to testing of a single gene.

For full poll results, visit [go.nature.com/9ihtf2](http://go.nature.com/9ihtf2)

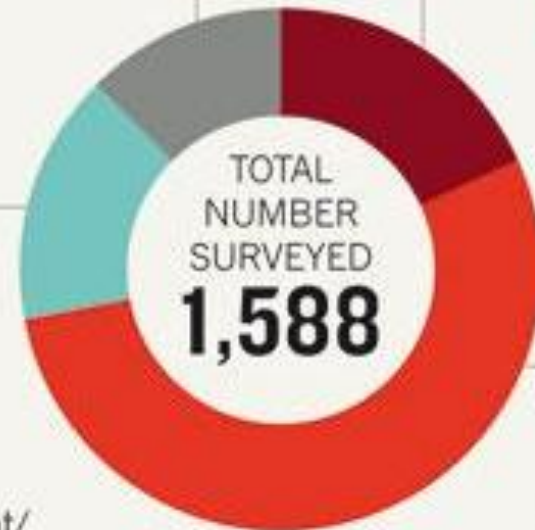
**Q** Have you had a genome analysis and if not, would you?

Not sure whether  
I would  
13%

Have had a  
genome analysis  
18%

Have not/  
would not  
15%

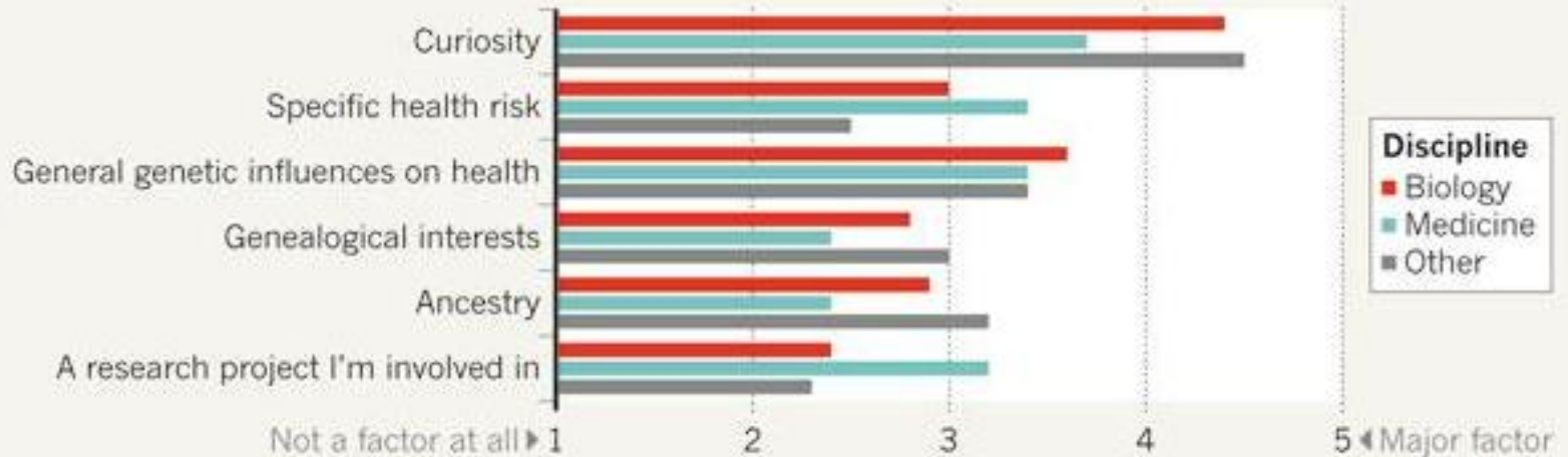
Would if given  
the opportunity  
54%



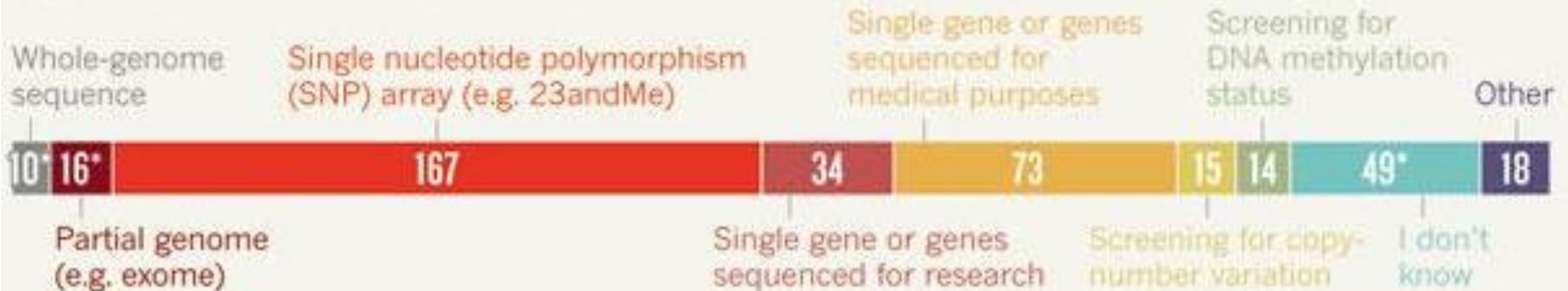


# ... interest remains high

**Q** How important were the following factors in influencing your decision to have a genome analysis done?



**Q** What types of test or analysis have you had done?



\*corrected for likely reporting errors

# Today's talk



- Basics of genetic inheritance
- Genetics of human diseases
- Nature vs. nurture
- What is the success of identifying genetic bases to common human diseases?
- What are the benefits & risks to knowing your “genotype”?

# Basics of genetic inheritance

- Familial resemblance is obvious...





# Darwin attributed family resemblance to “gemmules”

- “If I ask myself how you derive, and where you place the innumerable *gemmules* contained within the spermatozoa formed by a male animal during its whole life, I cannot answer myself.” - letter to Galton
- Famous Mendel pea experiments had been done, but Darwin did not know about them.



# One of Mohamed Noor's (many) high-school errors















- In 10<sup>th</sup> grade Biology, Mr. Bennett asked:
  - “If you were to cut someone’s left arm off, and they have kids, would the kid have **one** or **two** arms?”
    - Mohamed wrote “two” 
  - “If you were to cut someone’s left arm off, and cut their kid’s left arm off, repeating for 20 generations, would the 21<sup>st</sup> generation kid have **one** or **two** arms?”
    - Mohamed wrote “one” 

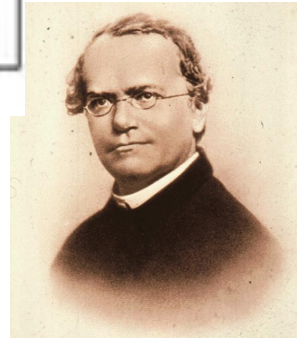
# THE REASON

- We have **particulate inheritance**
  - Not simple copy of parents
  - Not necessarily “midpoint” of parents
  - Can have blue-eyed offspring from brown-eyed parents: traits can be “masked”
  - Genetic diseases can crop up
  - All this was discovered **long** before we knew that DNA carried the code...

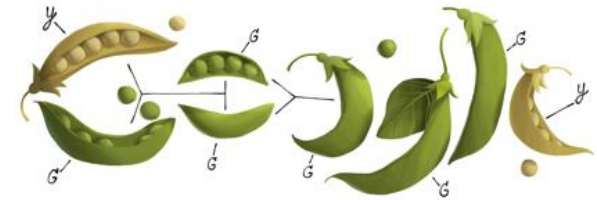
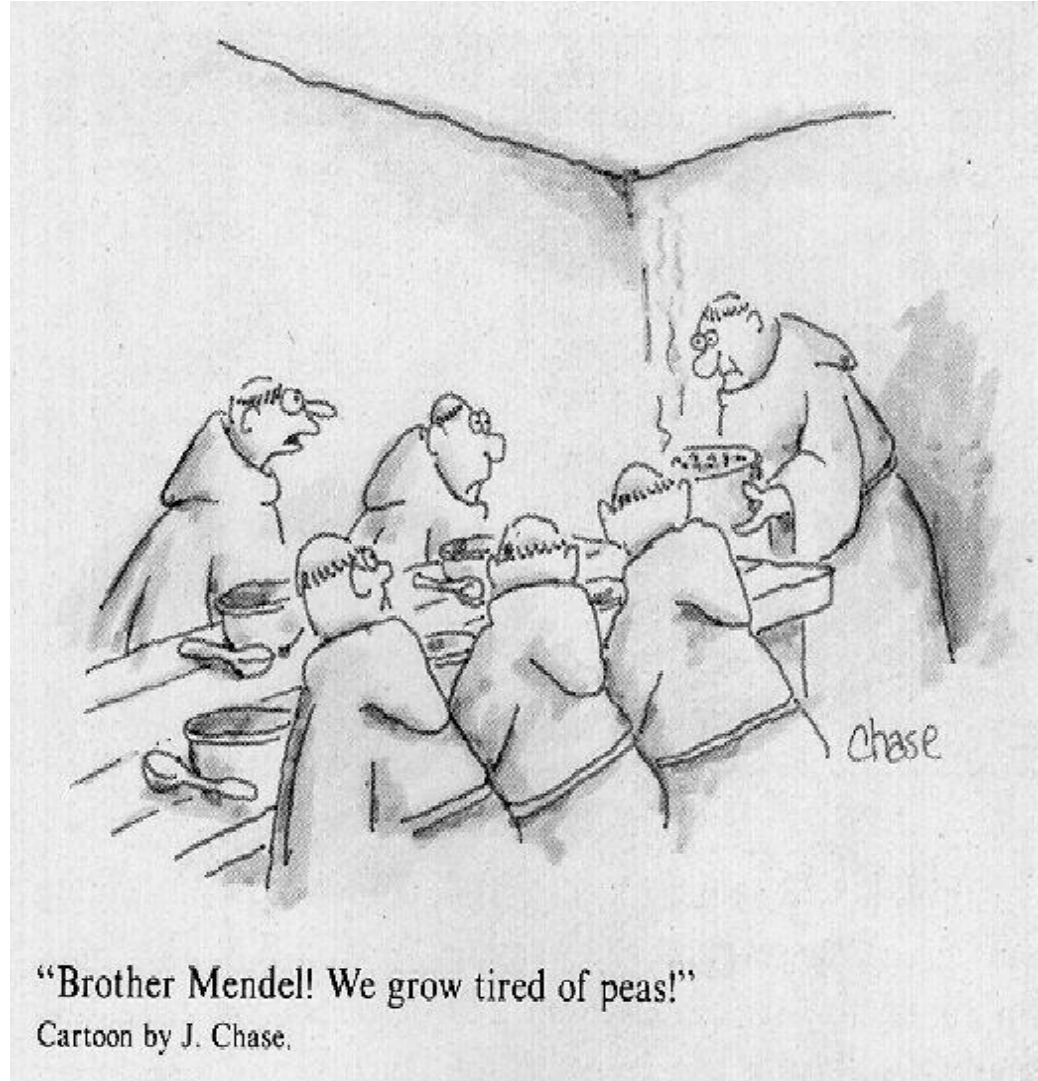


# Gregor Mendel studied inheritance in peas

	Seed form	Seed color	Pod form	Pod color	Flower position	Seed coat color	Stem length
Dominant	 Round ( <i>R</i> )	 Yellow ( <i>Y</i> )	 Inflated ( <i>V</i> )	 Green ( <i>G</i> )	 Axial ( <i>F</i> ) along stem	 Gray or gray-brown ( <i>A</i> )	 Tall ( <i>L</i> )
Recessive	 Wrinkled ( <i>r</i> )	 Green ( <i>y</i> )	 Restricted ( <i>v</i> )	 Yellow ( <i>g</i> )	 Terminal ( <i>f</i> ) on top	 White ( <i>a</i> )	 Short ( <i>f</i> )



# Mendel in public view...

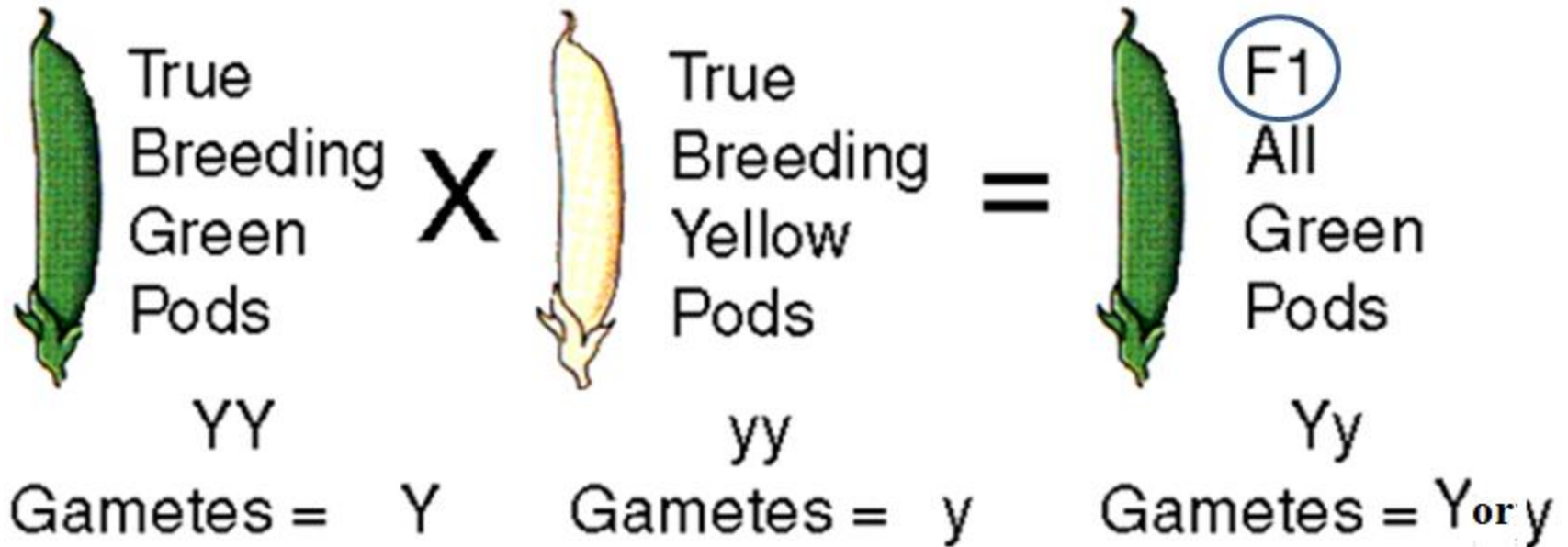


Google Search

I'm Feeling Lucky



# Identified simple rules of inheritance

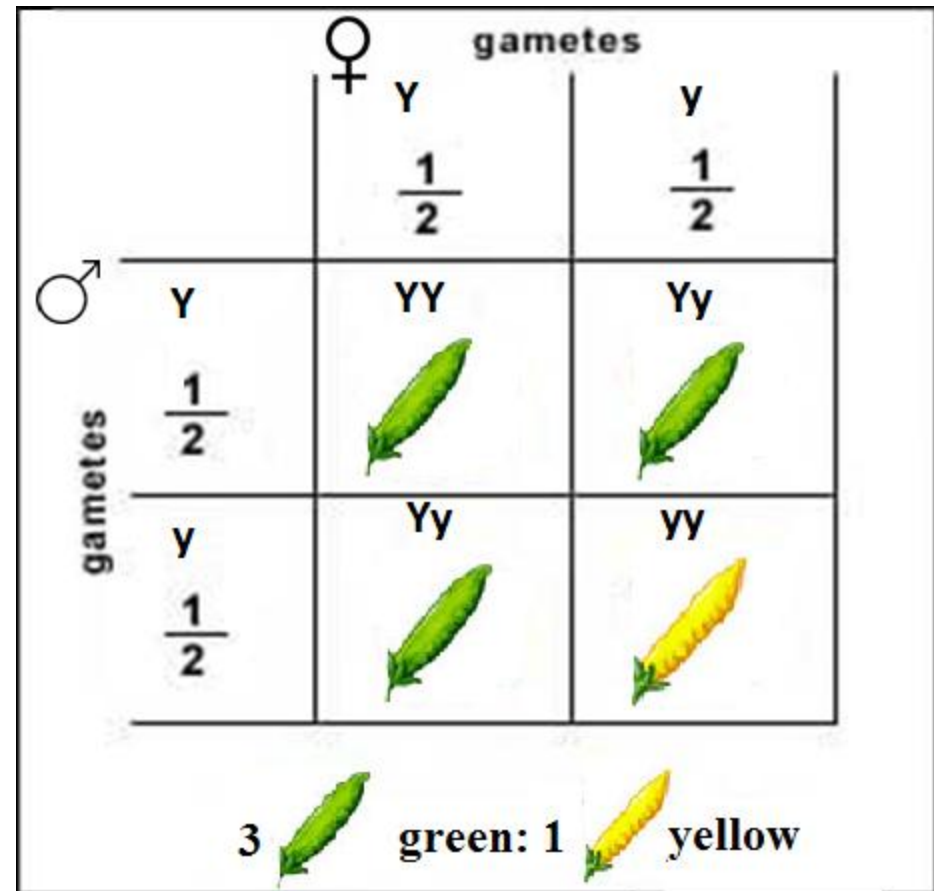


***Masking*** of yellow color by green color copy (Y) is called "dominance" of Y.

**Green (Y) is *dominant*, yellow (y) is *recessive*.**

# What happens when breed $F_1$ s?

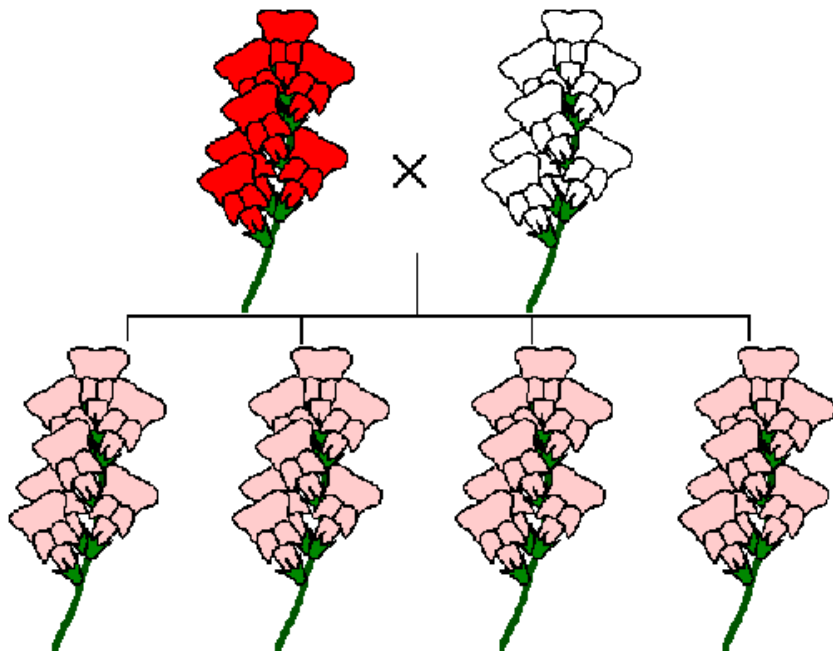
- $Yy$  are called “heterozygous” since have both alleles.
- Can use Punnett square to follow inheritance.



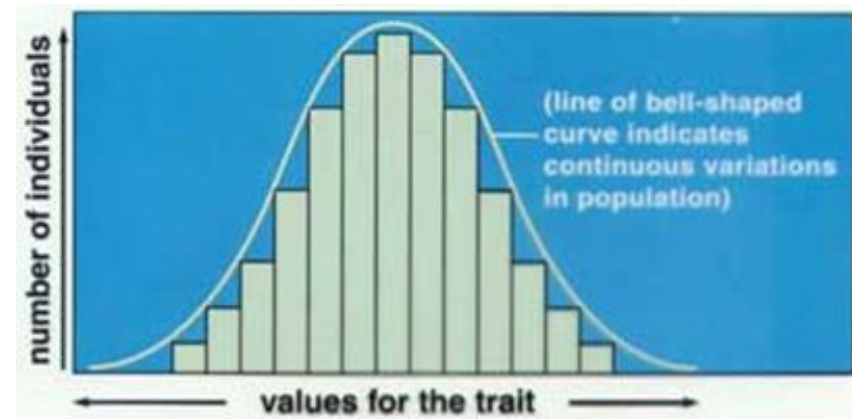
Mendel got 428 green, 152 yellow peas from this cross.

# ... but Mendel's rules don't seem to hold consistently?

Intermediates



Continuously varying traits



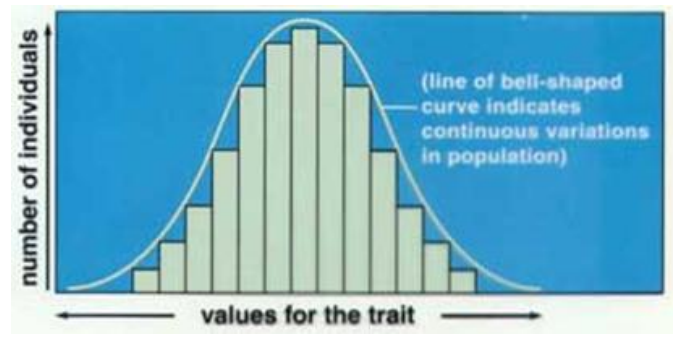
# Resolution- early 1900's

- LOTS of genes contribute to variation in each trait, with each gene being inherited in the manner Mendel described.
- This explains the continuous distributions.
- Not all are dominant- many do show intermediacy when have two different forms

# Fictional (simplified) example: 6 genes for “height”

<u>Person:</u>	1	2	3	4	5	6	7
Gene 1	AA	aa	Aa	Aa	aa	Aa	AA
Gene 2	Aa	Aa	AA	Aa	Aa	aa	AA
Gene 3	AA	aa	Aa	AA	Aa	Aa	AA
Gene 4	Aa	Aa	Aa	Aa	Aa	AA	AA
Gene 5	Aa	aa	Aa	AA	Aa	Aa	Aa
Gene 6	aa	aa	aa	Aa	AA	Aa	Aa
Height	5'7"	5'2"	5'6"	5'8"	5'6"	5'6"	5'10"

Height in inches = 5'0" + number capital letter copies  
Hence, range 5'0" – 6'0"

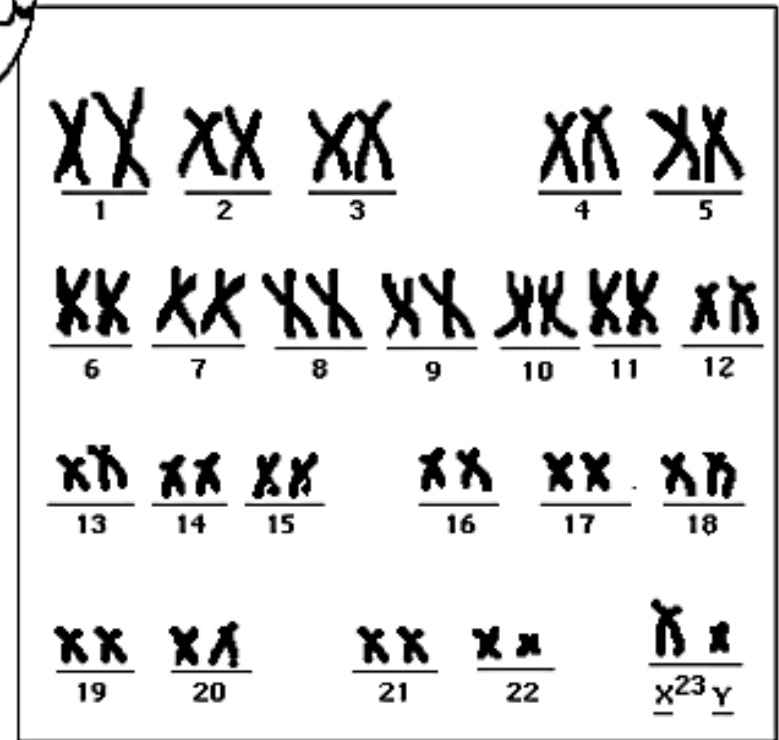


# Genes inherited on 23 pairs of threads called “chromosomes”

- Very long- have many genes on them
- One odd pair: X/Y
  - Cause one to be male or female

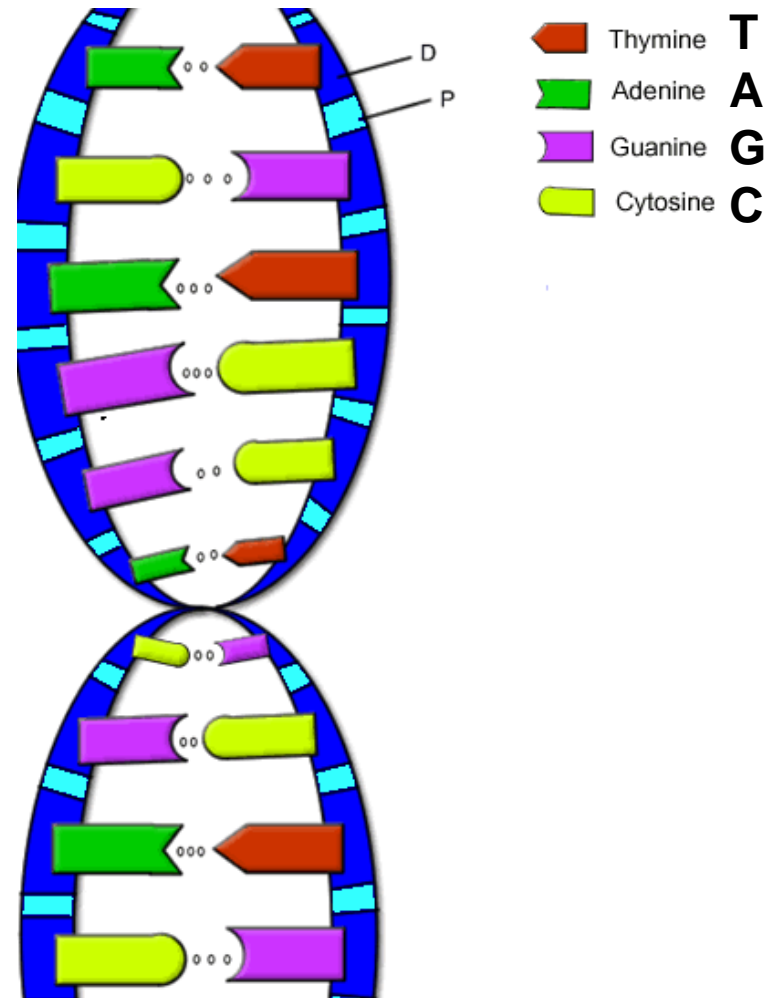


HUMAN CHROMOSOMES



# Genes themselves made up of building blocks

- Blocks comes in 4 forms: T, A, G, C
- Average # building blocks per gene: 3000
- Variation in how peas look (yellow vs. green) is caused by differences among individuals in these blocks  
(e.g., a “C” at position 5 instead of an “A”)



# Single gene traits vs. multiple gene traits

- *Very few* traits are solely caused by one gene
  - PTC taste: 70% of people can taste, 30% can't
  - **ACTIVITY: which traits did you inherit?**



# Tongue-rolling



Inheritance of this one is suspect...

# Free or attached earlobes



# Clasp hands together



# “Hitchhiker’s” Thumb



# Widow's peak vs. straight hairline



# Dimpled chin

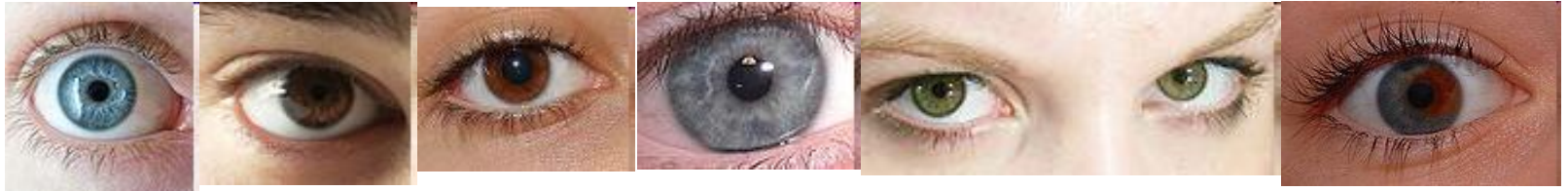


# Mid-digital hair (last one)



# Single gene traits vs. multiple gene traits

- ... but *most* traits that people even discuss as single gene are not single gene traits
  - Eye color
  - Hair color



- Lots of contributing genes, some with bigger effects, many with small effects



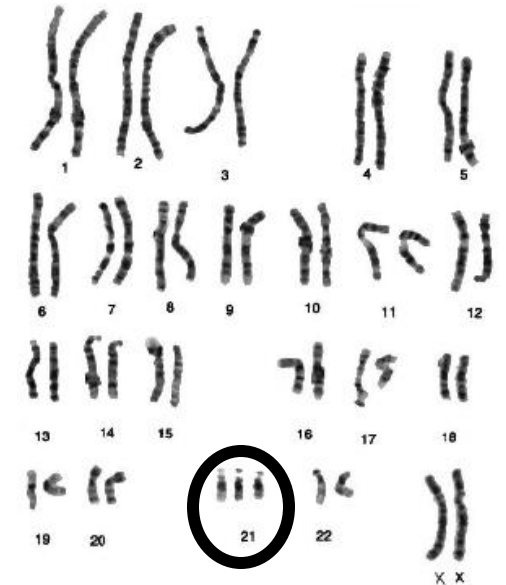
# Today's talk



- Basics of genetic inheritance
- Genetics of human diseases
- Nature vs. nurture
- What is the success of identifying genetic bases to common human diseases?
- What are the benefits & risks to knowing your “genotype”?

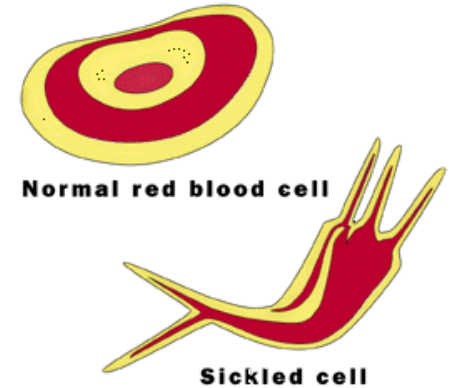
# Human genetic diseases

- Some genetic diseases are from problems in inheritance:
  - Down syndrome (3 copies of chromosome 21)
- Not our focus here...



# Human genetic diseases

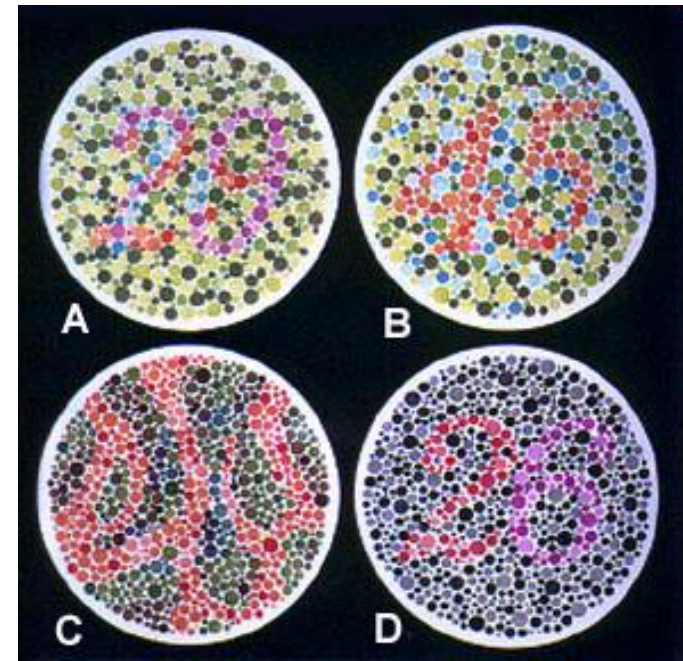
- Sickle cell anemia



- Lactose intolerance

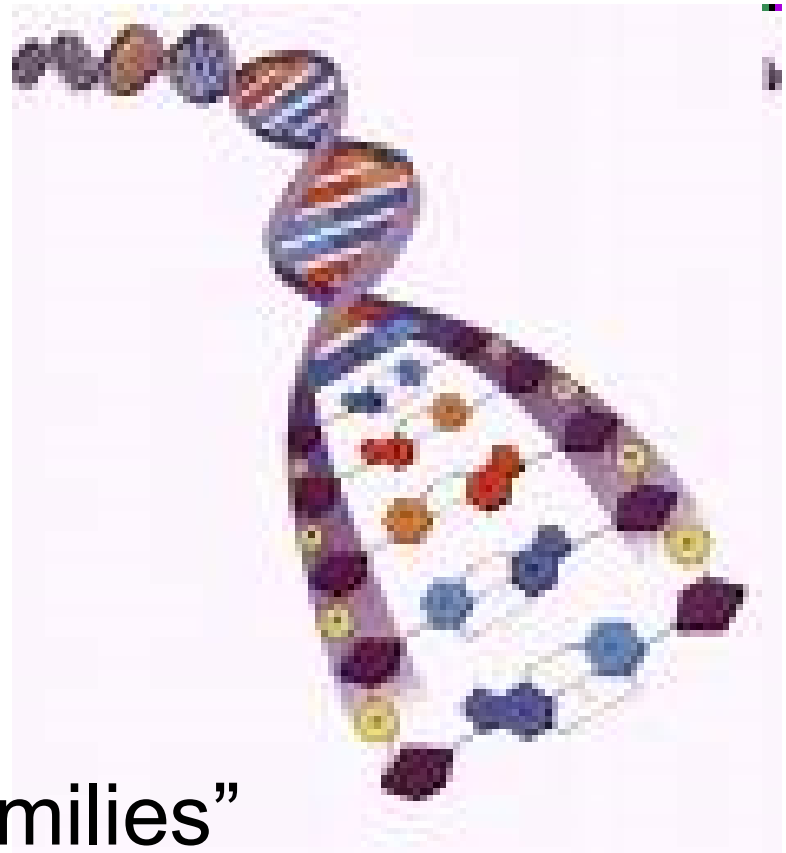


- Color blindness



# Other human diseases have large genetic component

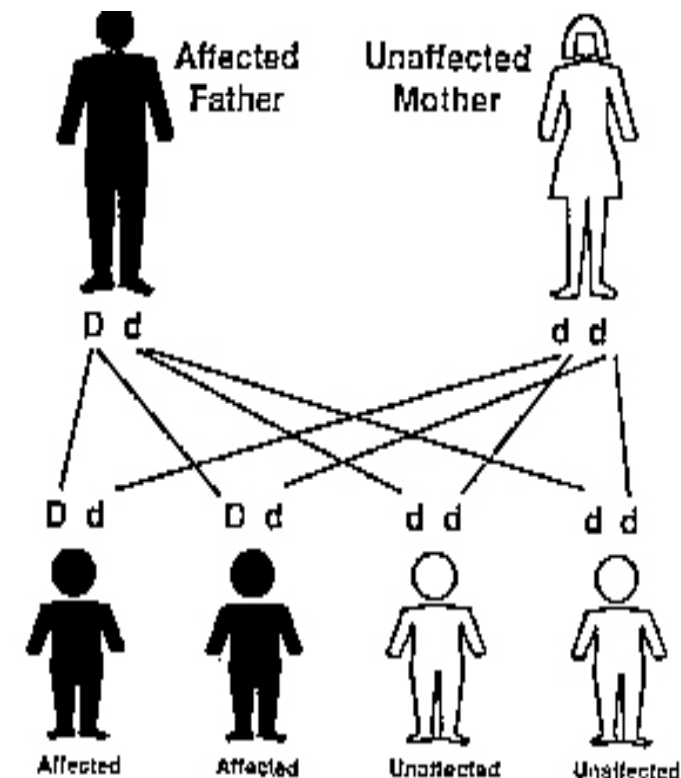
- Heart attack risk
- Diabetes
- Various cancers
- Alzheimer's
- Arthritis
- Atherosclerosis
  
- See as “running in families”



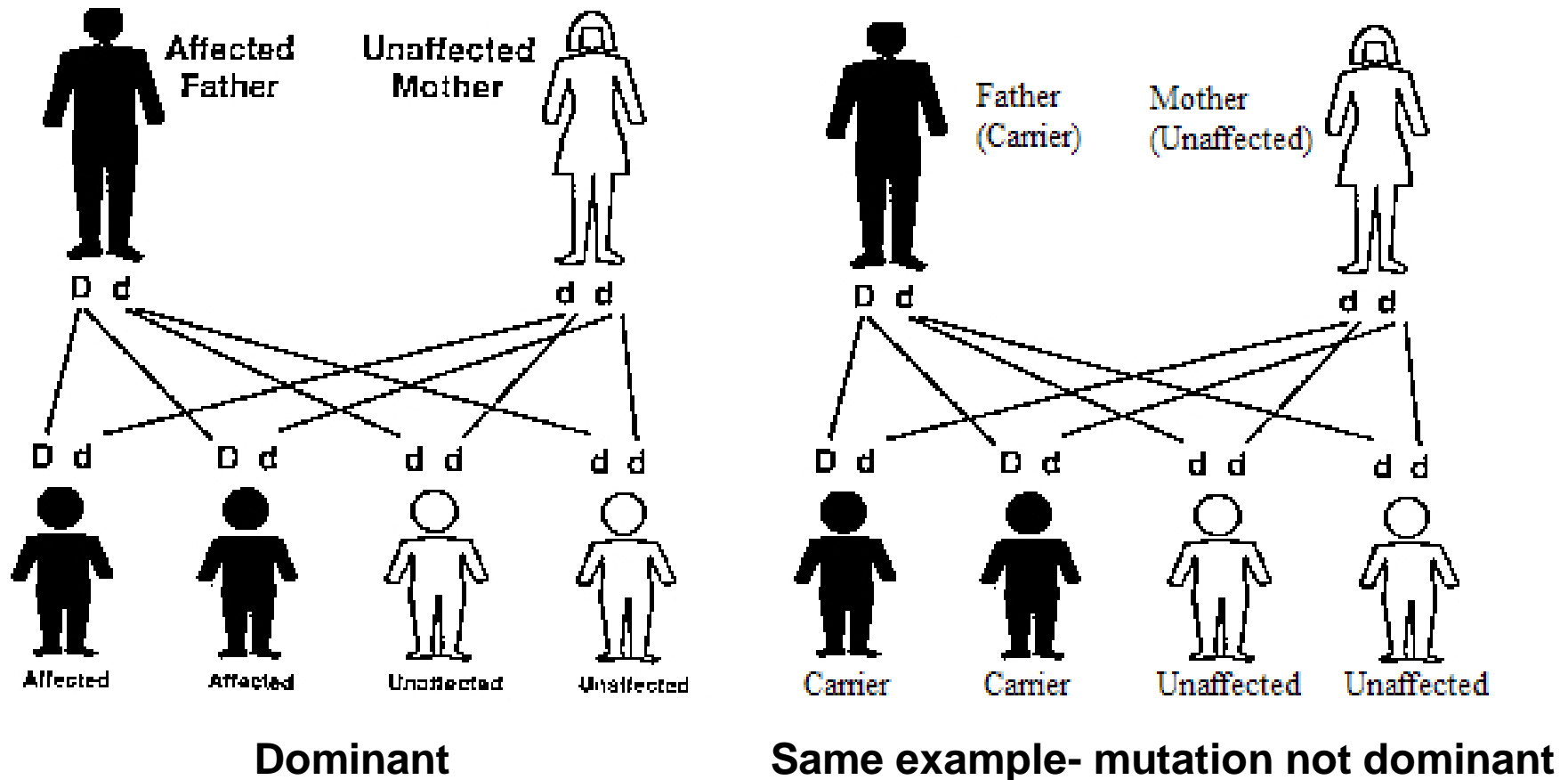
# What are these diseases really?

- No gene “functions” to cause a disease
  - Would never spread.
- Instead result from “mutations” that disrupt the normal function of a gene
  - e.g., to form a proper eye photoreceptor for “green”
- If the bearer of the mutation lives and reproduces, the mutant form is passed on to kids

**d** ACACCTGGTTCGACGGG  
↓  
**D** ACACCTGGTTCGATGGG

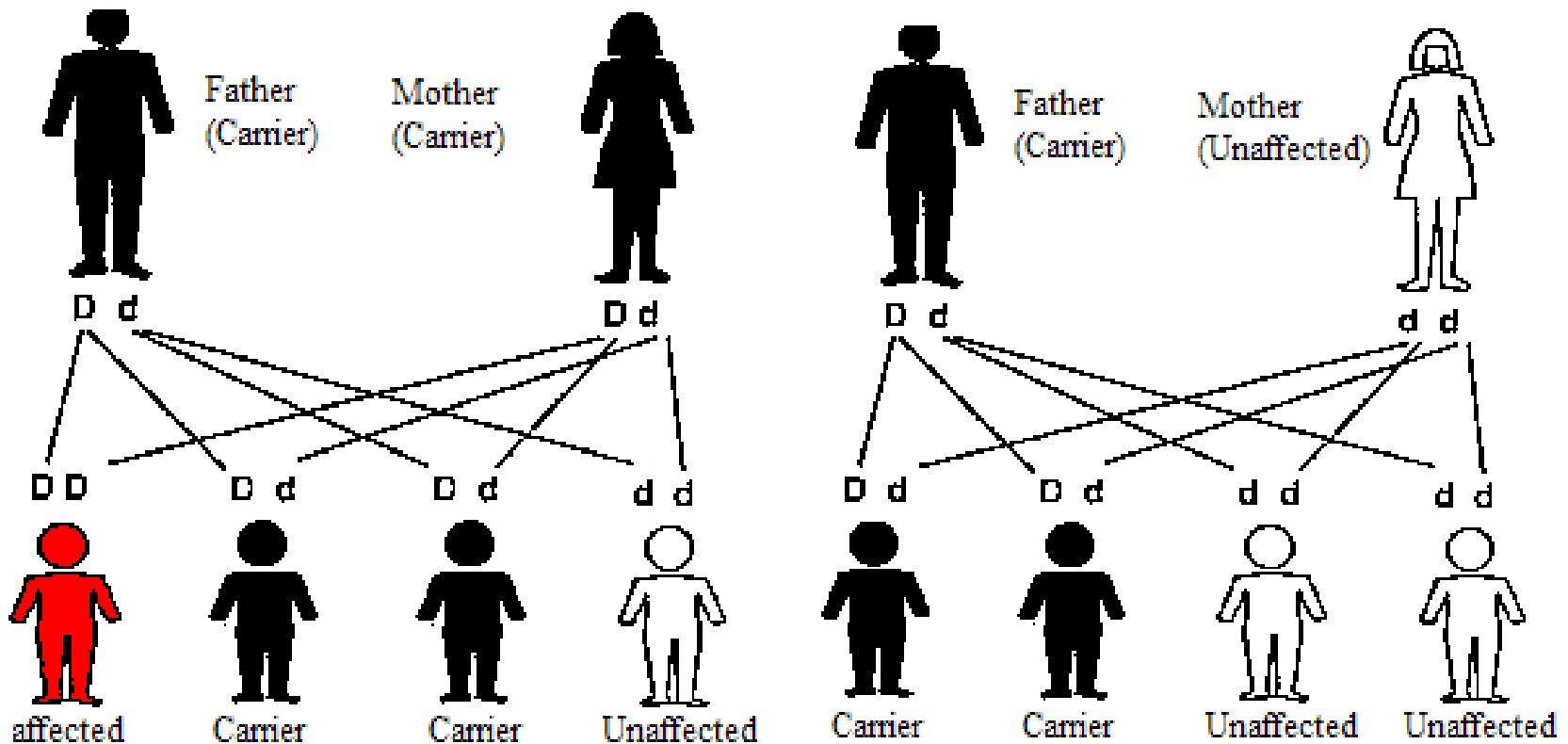


# ... and most genetic diseases are NOT dominant



“D” form causes disease

# ... and most genetic diseases are NOT dominant

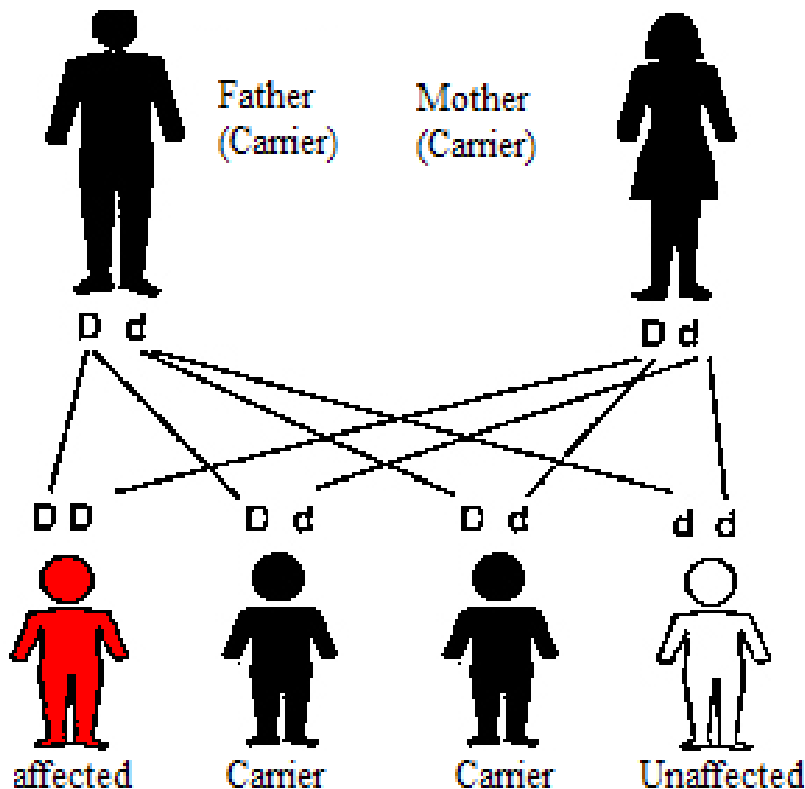


Same example- mutation not dominant

Same example- carrier x carrier

“D” form causes disease

# ... and most genetic diseases are NOT dominant



- Can be a “carrier” for disease without displaying
- Can have kids with disease even if neither parent displayed it

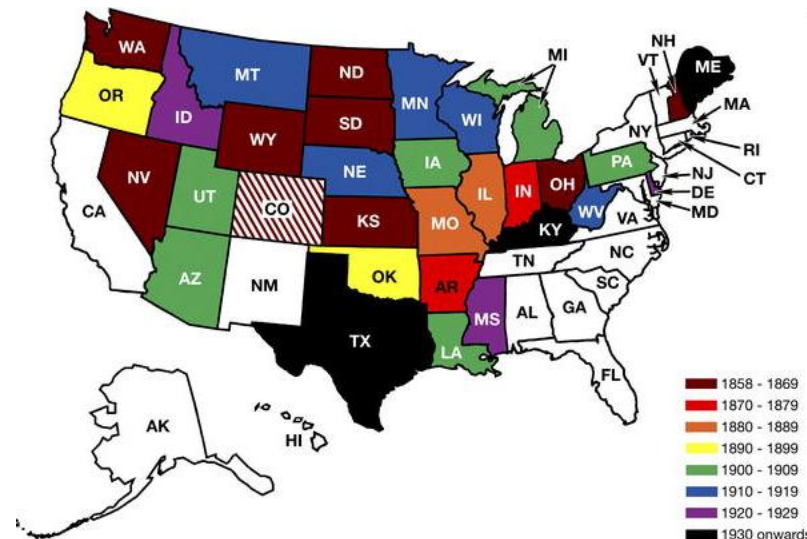
Same example- carrier x carrier

“D” form causes disease



# People being “carriers” for such diseases is thought to be the main reason for inbreeding avoidance

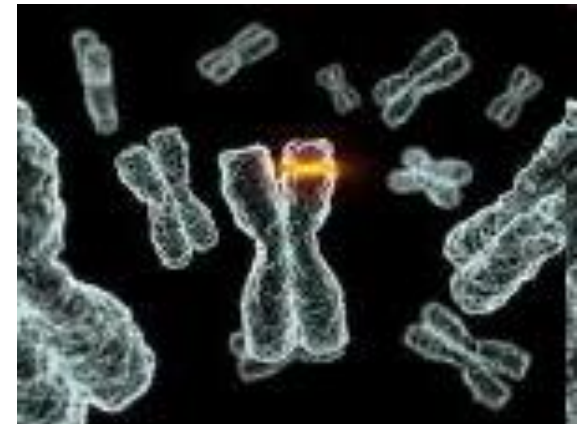
- Nearly everyone is probably a carrier for some non-ideal conditions/ diseases
- Breeding with relatives increases odds that the kids will have disease
- ~2% more likely to have kids with serious disease if with your cousin



# Where do these mutations come from?

- Errors in replication of genes
- 3 billion “letters” in human genome
- Mutation rate: 2 per 100 million letters per generation
  - 60 changes between parent and offspring!
- ~1-2 detectably affect “fitness”
- Some treatments induce higher mutation rates (e.g., UV light, chemical exposure)

d ACACCTGGTTCGACGGG  
↓  
D ACACCTGGTTCGATGGG



# Hollywood versions



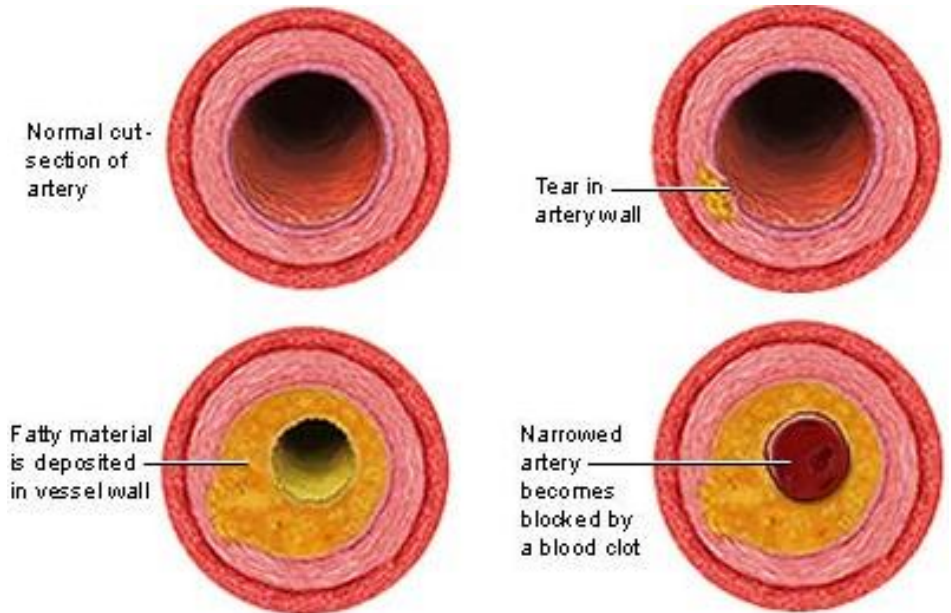
**Super powers and/ or disfigurement**

# Most mutations probably far more subtle

- Slight developmental defects- perhaps not even visible externally
- Some cause changes in production of enzyme or hormone
- Very often, effect may not be noticeable unless have multiple risk mutations and/ or specific environmental condition

# Typically, need many risk mutations together

- Multiple factors contribute to **atherosclerosis**:
- Some **mutation combinations** associated with higher risk, but no mutations alone caused high risk



Simple genetic association not enough...

# Today's talk

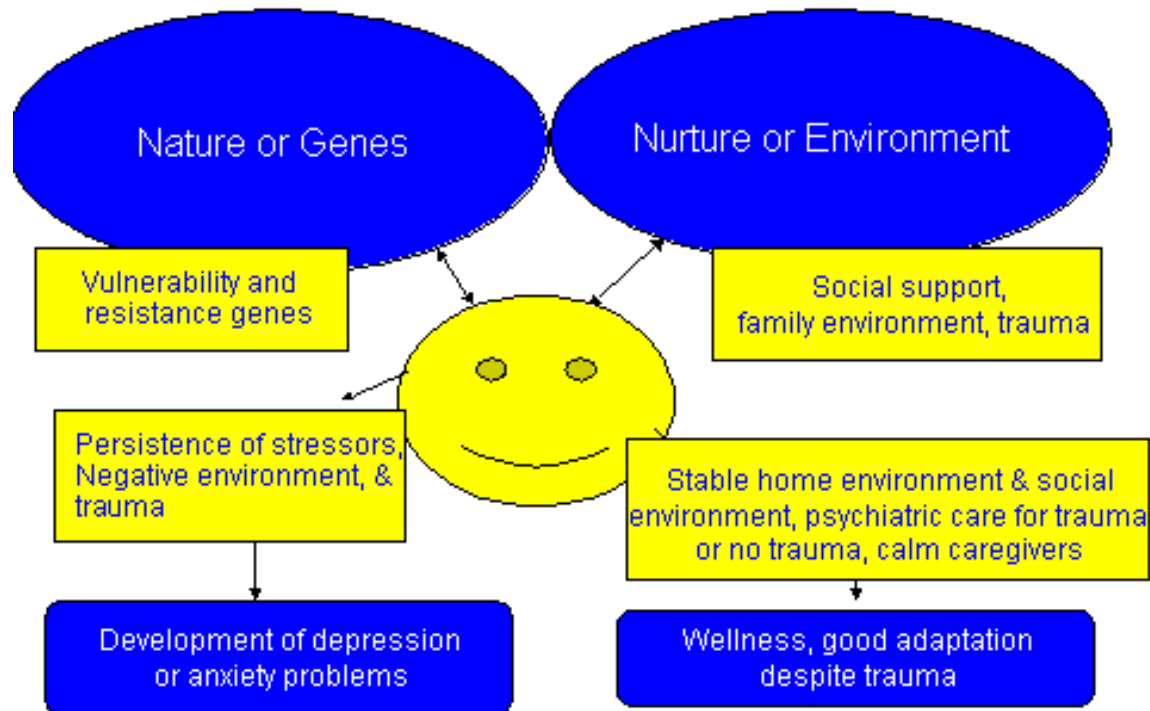


- Basics of genetic inheritance
- Genetics of human diseases
- Nature vs. nurture
- What is the success of identifying genetic bases to common human diseases?
- What are the benefits & risks to knowing your “genotype”?

# There is no either-or debate of “nature” vs. “nurture”

- For almost any trait one looks at, the answer is unambiguously **BOTH**

## Nature versus Nurture



# Concept of “heritability”

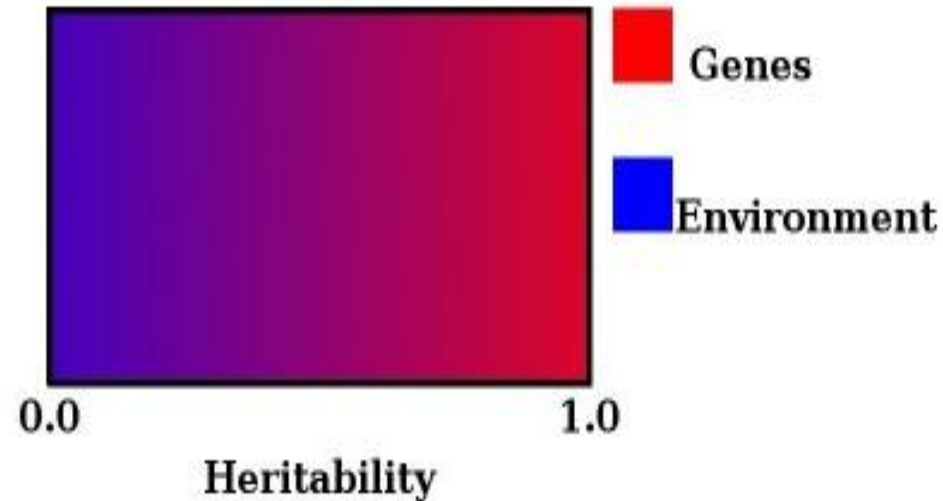
- Some traits are much more heavily influenced by genetics (“nature”)
  - Facial features
- Some traits are much more heavily influenced by environment (“nurture”)
  - Language ability
- Many traits have strong influences of both
  - Obesity
- The relative contribution of genetics (0-100%) to a trait is called “heritability”





# ... and even more complicated...

- Heritability varies across traits
- Heritability varies among populations & across time
- Interactions with environment
  - Inherit sensitivity to environment risks
    - Skin color/ risk of UV damage or cancer



# RECAP:

- While some diseases are fully inherited (e.g., sickle cell anemia), many others have just some genetic component
- Often involve many genes
- Heritability of these diseases is often low
  - Often substantial environmental factors
- Associations with any genetic component often indirect

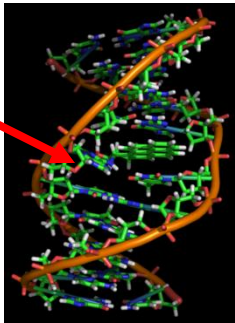
# Today's talk



- Basics of genetic inheritance
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# Typical way to test: “association studies”

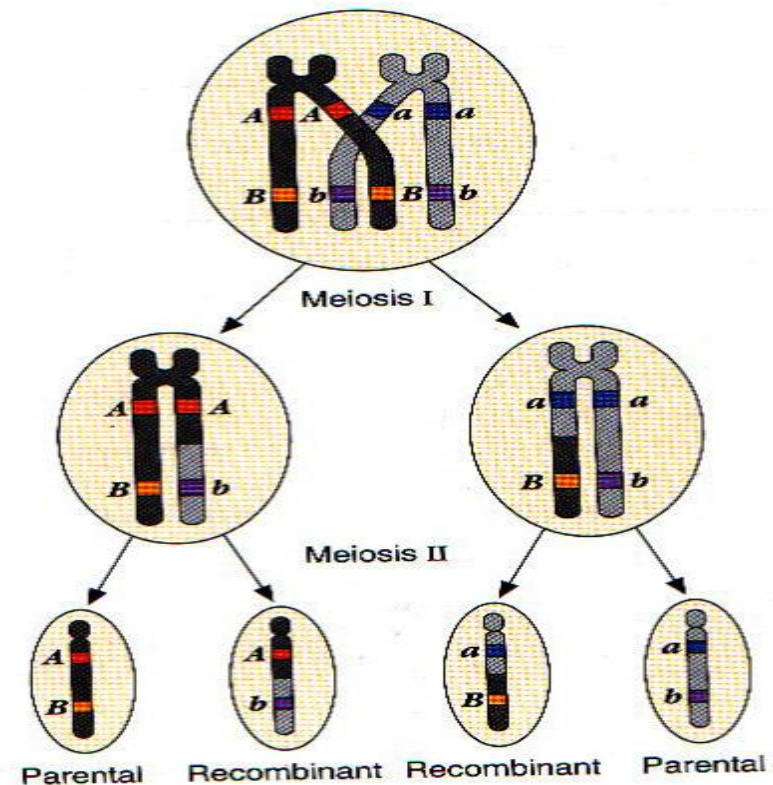
- Goal: find gene variants associated with disease
- Two broad designs:
  - Family-based association studies
  - Population-based association studies
- In association studies, looking for strength of association between variants at a position in a gene and the disease



# Principle:

- Genes “nearby” each other on chromosomes tend to be inherited together
- If see an association between a gene variant and disease, then it is either the causal or “close” to causal change

Gamete formation



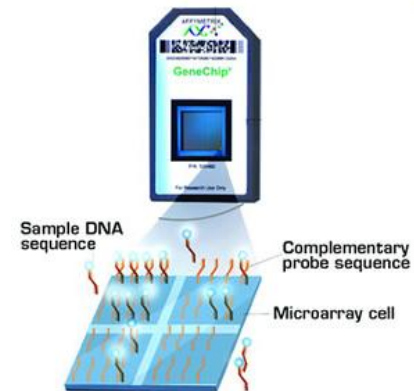
# Association studies

- In association studies, looking for strength of association between a “letter” in one part of the genome and the disease

Individual 1	CCAGCTTTTCAGCGAGCAGG <b>A</b> GGCTAGGG	<b>sick</b>
Individual 2	CTAGCTTTTCAGCGAGCAGG <b>A</b> GGCTAGGG	<b>sick</b>
Individual 3	CTAGCTTTTC <b>G</b> GCGAGCAGGGGGCTAGGG	OK
Individual 4	CTAGCTTTTCAGCGAGCAGGGGGCTAGGG	OK
Individual 5	CCAGCTTTTCAGCGAGCAGGGGGCTAGGG	OK
Individual 6	CTAGCTTTTCAGCGAGCAGG <b>A</b> GGCTAGGG	<b>sick</b>
Individual 7	CTAGCTTTTCAGCGAGCAGGGGGCTAGGG	OK

# Approaches

- Have a “guess” which gene(s) may be involved, and look at letter variants within those genes
  - For example, look at lactase gene for lactose intolerance
- Look at spots spread across the entire genome—because of recent technological improvements, can examine ~1 million letters simultaneously!
  - “Shotgun” approach: look everywhere



# Family-based designs

- One way is to compare affected and non-affected siblings, to find gene variants disproportionately associated with the affected sibling across multiple families.

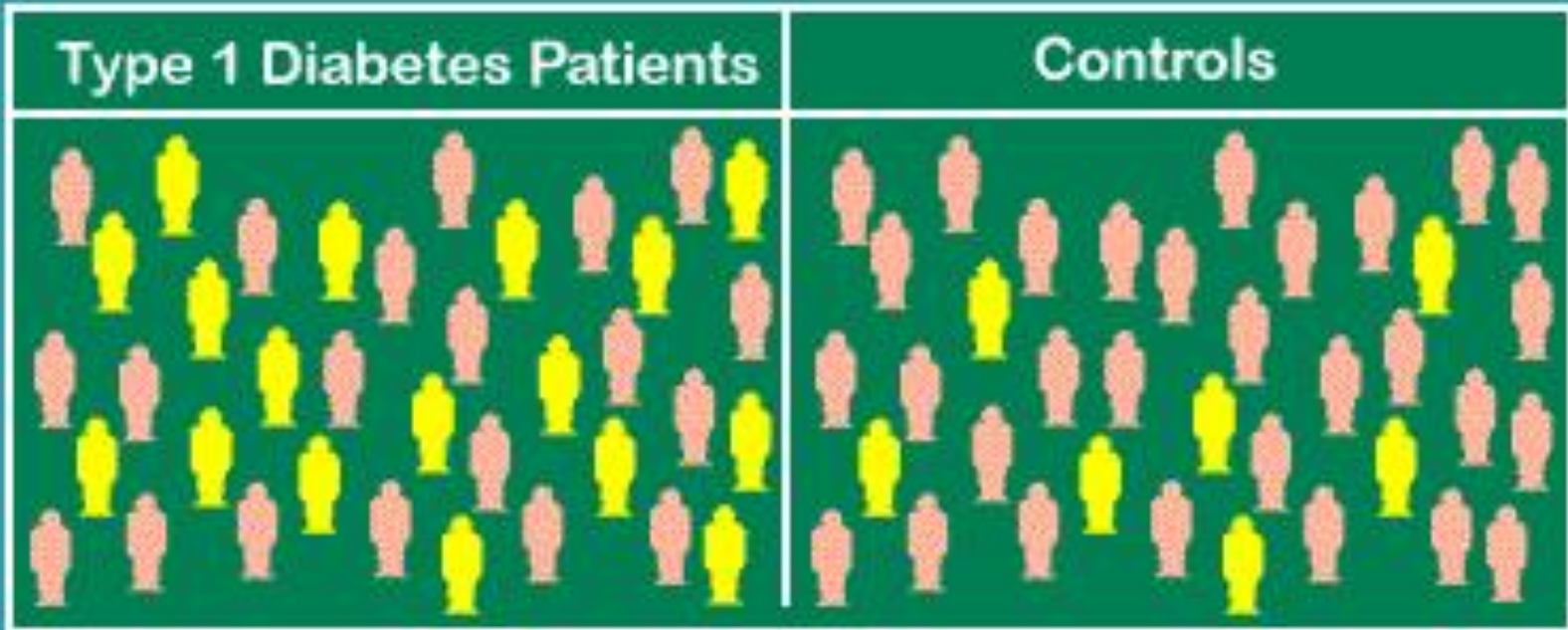
Hypothetical example:  
Among families with kids having  
Adrenoleukodystrophy (ALD)

Affected siblings: 25% had “C” at focal spot  
Unaffected siblings: 15% had “C” at focal spot





# Population Association Studies



Genotype	Type 1	Controls	Total
HLA DR4	17	7	24
NON-HLA DR4	20	30	50
	37	37	

People with Type 1 Diabetes  
2.5X greater likelihood of having HLA DR4 type

 = HLA DR4

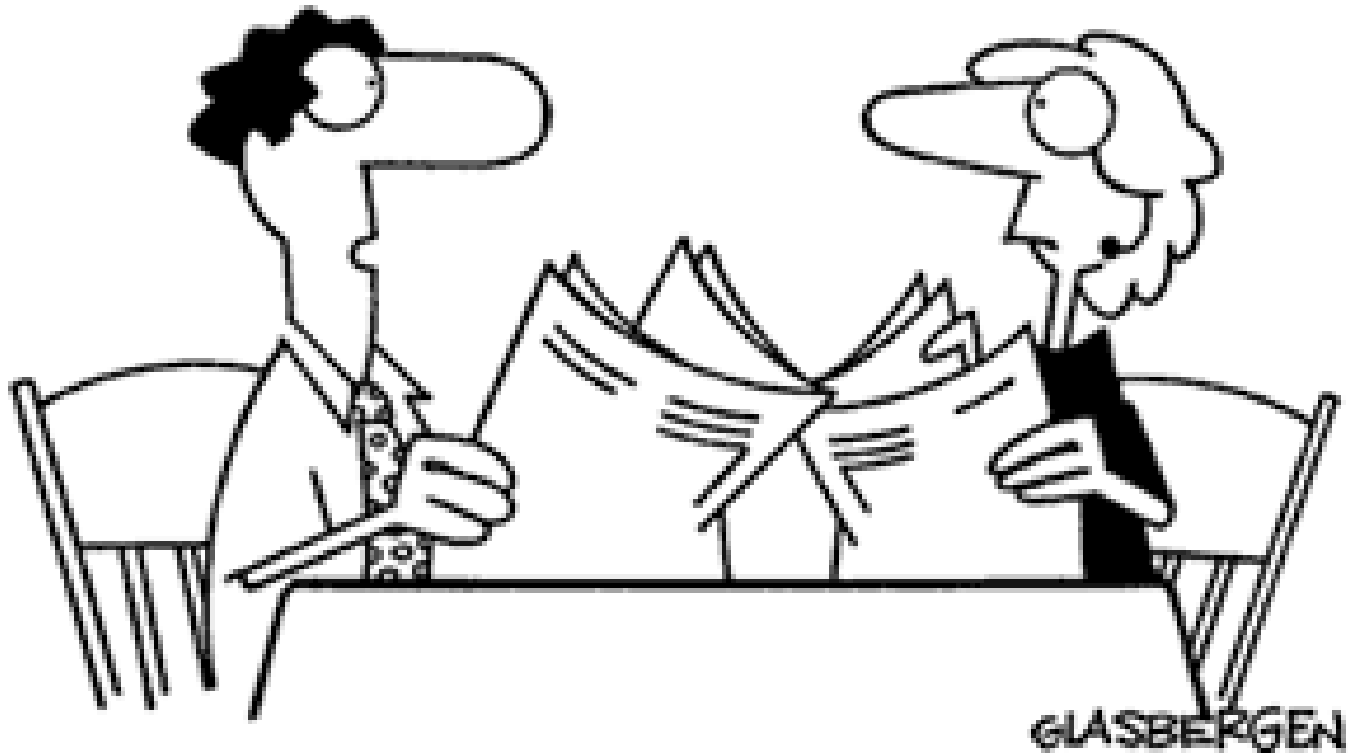
46%

19%

 = non-HLA DR4

# How well has it worked?

© 1999 Randy Glasbergen. [www.glasbergen.com](http://www.glasbergen.com)



**“Scientists have isolated the gene that makes scientists want to isolate genes.”**

# Many associations discovered...

- National Institutes of Health funds “OMIM”:  
Online Mendelian Inheritance in Man®
  - Began as books showing heritable disorders in the 1960’s
  - Now searchable online: >12000 genes!

The screenshot shows the OMIM website interface. At the top, there is a search bar with 'OMIM' selected and 'lupus' entered. Below the search bar, there are buttons for 'Go', 'Clear', and 'Save Search'. The results are displayed in a table with columns for 'Limits', 'Preview/Index', 'History', 'Clipboard', and 'Details'. The first two results are visible:

Item	Description	Gene map locus
1: #152700	SYSTEMIC LUPUS ERYTHEMATOSUS; SLE EXCESS LYMPHOCYTE LOW MOLECULAR WEIGHT DNA, INCLUDED	1q41-q42.16p13.3.1q23.1q23.13q32.1q22.12q24.11q14.1p13.6p21.3.4q22-q24.4p16-p15.2.3p21.3-p21.2.2q37.3
2: #601744	SYSTEMIC LUPUS ERYTHEMATOSUS, SUSCEPTIBILITY TO, 1; SLEB1 SYSTEMIC LUPUS ERYTHEMATOSUS, RESISTANCE TO, 1, INCLUDED	1q41-q42.1q41-q42

The left sidebar contains navigation links for 'Entrez', 'OMIM', 'Help', and 'FAQ'. The top navigation bar includes 'All Databases', 'PubMed', 'Nucleotide', 'Protein', 'Genome', and 'Structure'.

# New associations every month: From: September 2011 Nature Genetics

- Common variation near *MLLT10* influences **meningioma** risk pp825-827
- Analysis of genome-wide association studies of **asthma** in ethnically diverse **North American** populations pp887-892
- Genome-wide association study identifies three new susceptibility loci for adult **asthma** in the **Japanese** population pp893-896
- A genome-wide association study identifies two new risk loci for **Graves' disease** pp897-901

# So... we know a lot. Or do we?

- A few cases have held up very well
  - ~12% of women in the general population will develop breast cancer, compared with ~50% of women with altered **BRCA1** or **BRCA2**
  - Currently being used extensively to evaluate risk
- The vast majority have not done so well
  - Not repeatable in later studies
  - Effects associated with gene negligible- increase odds of disease by 3% or less

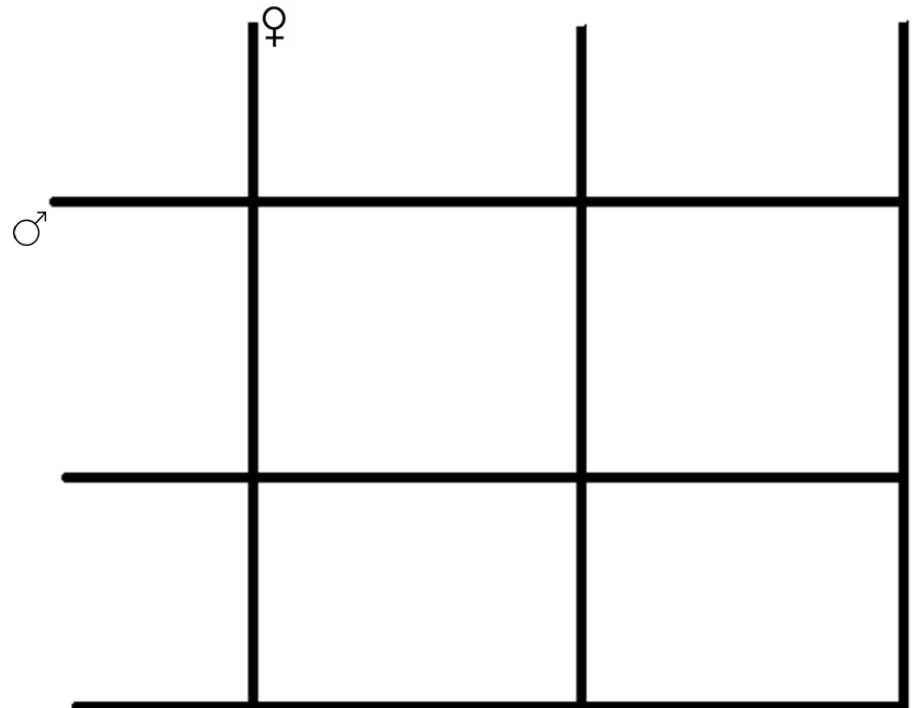
# Example

- 1/8 (~12%) of women get breast cancer
- Known mutations in *FGFR2* gene associated with increased risk of breast cancer
  - Let's call “nonmutant” form **FF**: ~**12%** risk
  - Heterozygote **Ff**: ~20% higher, so ~**15%** risk
  - Homozygote **ff**: ~60% higher, so ~**19%** risk



# Usefulness, even in this case?

- You meet someone who you discover has an FGFR2 mutation
- Assume you're FF, Your proposed hubby is Ff
- What is the probability that your daughters could get breast cancer?



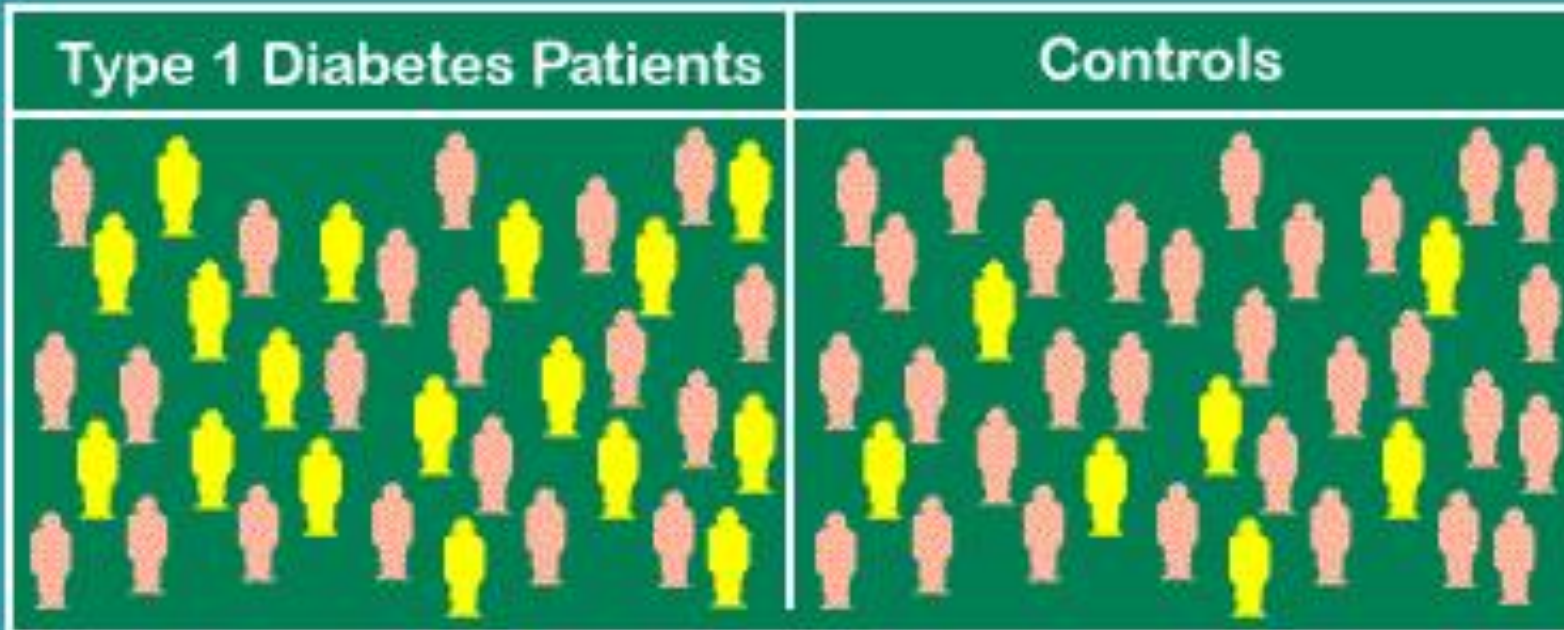
**FF: 12%**  
**Ff: 15%**  
**ff: 19%**

# Why are associations weak?

- Familial-inherited diseases not genetic
- Genetic effects are just that small
- Many variants within gene cause same effect
- Interactions between genes
- Interactions with environment
- Didn't find the "right" gene (or spot within gene)



# Population Association Studies



Genotype	Type 1	Controls	Total
HLA DR4	17	7	24
NON-HLA DR4	20	30	50
	37	37	

2.5X greater likelihood of Type 1 with HLA DR4

0.2% → 0.5%

Odds of dying in car accident: 1.2%

 = HLA DR4

46%


19%

 = non-HLA DR4

# Multiple rare variants within a gene *individually* cause risk

*Hypothetical* example

Individual 1	AA <b>T</b> AGCTAGCAGT	OK
Individual 2	AAGAGCTAGCAGT	OK
Individual 3	AAGAGCTAGCAGT	OK
Individual 4	AAGAGCTAG <b>T</b> AGT	OK
Individual 5	AAGAGCTAGCAGT	OK
Individual 6	AAGA <b>A</b> CT <b>C</b> GCAGT	<b>sick</b>
Individual 7	A <b>G</b> GAGCTAGCAGT	<b>sick</b>



# Multiple gene variants needed *together* for risk

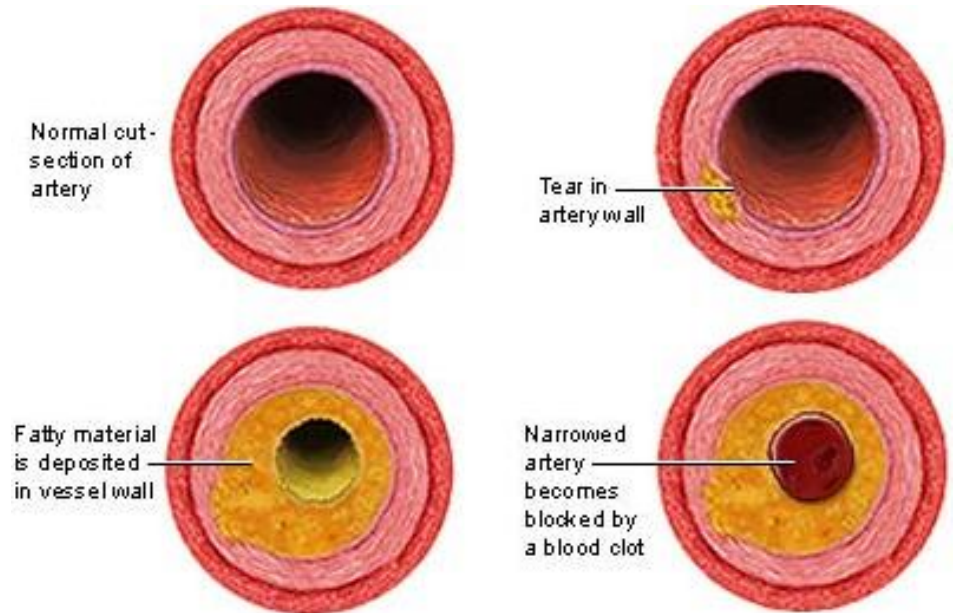
- Variants of genes

lymphotoxin-  
alpha and  
methylene-  
tetrahydrofolate  
reductase

together

associated with

atherosclerosis: Neither by itself!



# Summary:

- Many heritable components of diseases have been identified
- In a few cases, genes with strong effects identified: breast cancer BRCA1/ BRCA2
- In most cases, fleetingly small effects have been identified
  - For example, increase risk of disease by 1%

# Today's talk



- Basics of genetic inheritance
- Genetics of human diseases
- Nature vs. nurture
- What is the success of identifying genetic bases to common human diseases?
- **What are the benefits & risks to knowing your “genotype”?**

# Easy to get lots of data

- Lots of companies do this for under \$200
- User sends them swab of DNA (from inside of cheek or spit)
- They send user their “letters” for 500,000 – 2 million spots of genome, and tell which are associated with disease predisposition



# What can we do with this information?

- Personalized medicine
  - Begin treatments/ monitoring early
  - Know specific medicines more likely to work for you (pharmacogenomics)
  - Pre-emptive surgical removals (e.g., ovaries)
- Be “pro-active” with environmental components
  - If know predisposed to diabetes, extra care to exercise, watch weight, limit sugar intake



# Pre-emptive surgeries

- 2008 study showed ovarian removal reduced cancer risk in women with a BRCA2 mutation by **72%** while breast removal reduced by **>90%**
  - Pre-emptive action (or knowledge) is scary:  
of 275 female patients from families known to carry *BRCA* mutations, only **48% were willing to undergo genetic testing**
- People don't want a “death sentence”





# ... but **no guarantees**...

- Can take drastic actions and still get disease
- May take no actions and never get the disease
- “The expensive airbag effect”



# ... and most of the results won't tell you a whole lot...

- Effect sizes for all but a few mutations known are  $<3\%$  of total risk
- Some may even be “wrong” in that the causal mutation is not the one surveyed- can get false sense of security or insecurity

Let's look at data...



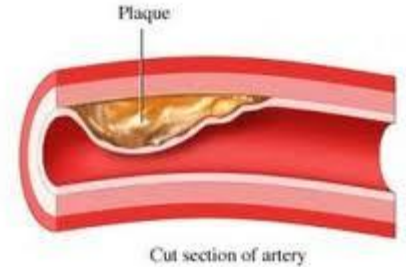
# Personal genotype!

- Trait: Asthma
- General prevalence: 5-7% of US adults
- One variant associated: rs7216389 (17q21)
  - Risk allele: T
  - M Noor genotype: T/T
- Risk increase is 45%
  - From 5-7% to **7-10%** risk
- **23%** of Europeans are T/T!



# Personal genotype!

- Trait: High cholesterol
- Three variants associated
  - Risk variant marker 1: C (reduces cholesterol)
    - M Noor genotype: A/C – **GOOD!**
  - Risk variant marker 2: A (increases cholesterol)
    - M Noor genotype: C/C – NEUTRAL
  - Risk variant marker 3: C (increases cholesterol)
    - M Noor genotype: C/C – **BAD...**



# 23andMe Sample Data

[Account](#) | [Help](#) | [Blog](#) | [Log out](#)

 Search

You do not have a genetic profile yet. You are viewing data for the people who have shared with you. To see your own genetic data, order your [Personal Genome Service](#) now.

[My Home](#)

Inbox

**My Health**

Disease Risk

Carrier Status

Drug Response

Traits

Health Labs

**My Ancestry**

Maternal Line

Paternal Line

Relative Finder

Ancestry Painting

Global Similarity

Ancestry Labs

**Sharing & Community**

Compare Genes

Family Inheritance

23andMe Community

Genome Sharing

## disease risk

Show results for

[See new and recently updated reports »](#)

23andMe Discoveries were made possible by 23andMe members who took surveys.

### Elevated Risk

Name	Confidence	Your Risk	Avg. Risk	Compared to Average
<a href="#">Age-related Macular Degeneration</a>	★★★★★	11.3%	7.0%	1.61x
<a href="#">Restless Legs Syndrome</a>	★★★★★	5.2%	4.2%	1.24x
<a href="#">Type 1 Diabetes</a> <a href="#">update</a>	★★★★★	2.5%	1.0%	2.48x
<a href="#">Celiac Disease</a>	★★★★★	0.7%	0.2%	3.09x
<a href="#">Lupus (Systemic Lupus Erythematosus)</a>	★★★★★	0.4%	0.2%	1.69x
<a href="#">Esophageal Squamous Cell Carcinoma (ESCC)</a>	★★★★★	0.09%	0.07%	1.21x
<a href="#">Stomach Cancer (Gastric Cardia Adenocarcinoma)</a>	★★★★★	0.08%	0.07%	1.22x
<a href="#">Alopecia Areata</a>	★★★			
<a href="#">Bladder Cancer</a>	★★★			

# 23andMe Sample Data

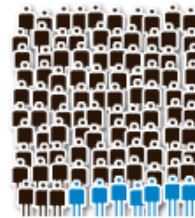
## Your Genetic Data

Show information for  assuming  ethnicity and an age range of



**John Smith**  
**11.3 out of 100**

people of European ethnicity who share John Smith's genotype will develop Age-related Macular Degeneration between the ages of 43 and 79.



**Average**

**7 out of 100**

people of European ethnicity will develop Age-related Macular Degeneration between the ages of 43 and 79.

What does the [Odds Calculator](#) show me?

Use the ethnicity and age range selectors above to see the estimated incidence of Age-related Macular Degeneration due to genetics for someone with John Smith's genotype. The 23andMe Odds Calculator assumes that a person is free of the condition at the lower age in the range. You can use the name selector above to see the estimated incidence of Age-related Macular Degeneration for the genotypes of other people in your account.

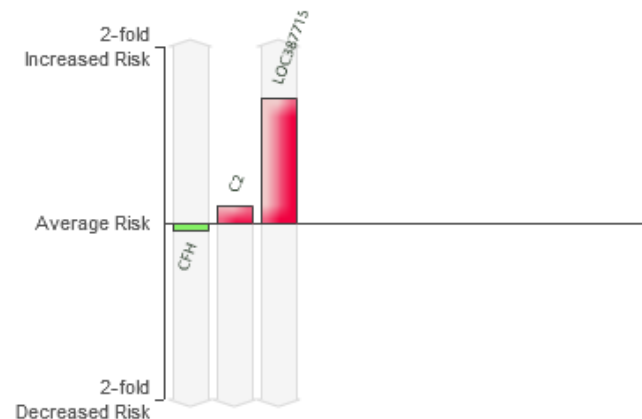
The 23andMe Odds Calculator only takes into account effects of markers with known associations that are also on our genotyping chip. Keep in mind that aside from genetics, environment and lifestyle may also contribute to one's chances of developing late-stage AMD.

## Genes vs. Environment

**45-71 %**  
Attributable to  
Genetics

Estimates of the [heritability](#) of AMD vary from 45% to 71%. This means that genetic factors contribute at least as much as [environmental factors](#) do to risk of AMD. Genetic factors that play a role in AMD include known factors, such as the SNPs we describe here, and unknown factors. Established environmental risk factors include age, family history of AMD, cigarette smoking, low dietary intake or blood levels of antioxidant vitamins and zinc, and European ancestry. Other possible risk factors may include being female, having light-colored irises, a history of cardiovascular disease, or increased exposure to sunlight. ([sources](#))

## Marker Effects



What does this chart show?




The chart shows the approximate effects of the selected person's genotype at the 3 reported markers. Higher, **red bars** indicate **increased risk** from the average, while lower, **green bars** indicate **decreased risk** from the average. The light gray bars show the maximum possible effects for the possible genotypes at the marker.

# 23andMe Sample Data

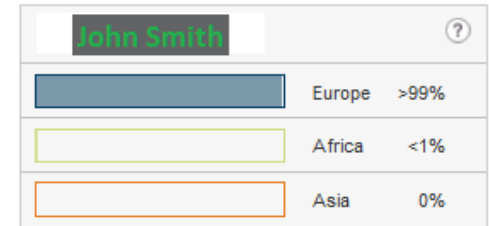
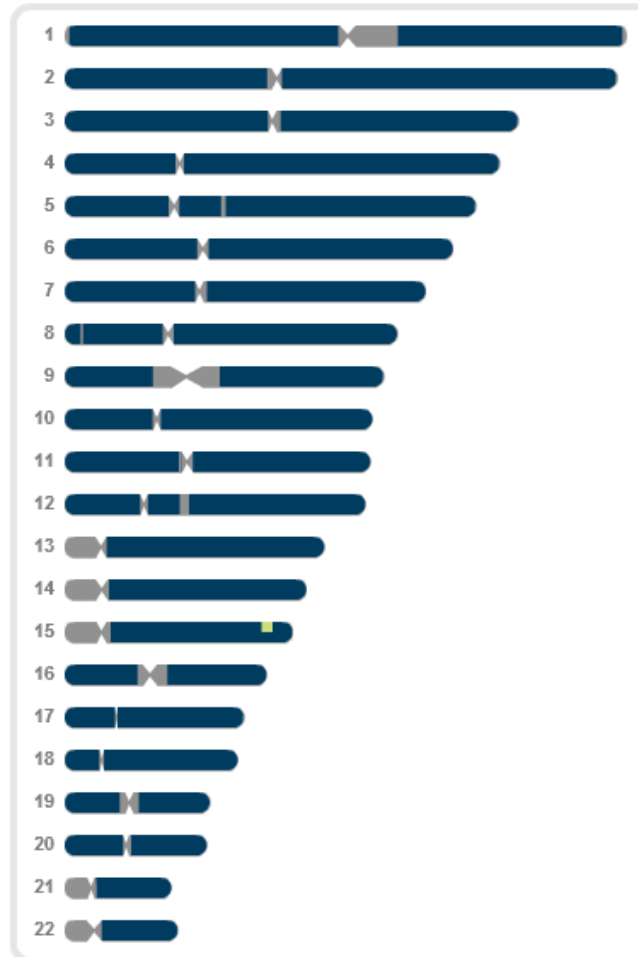
## ancestry painting

Trace the ancestry of your chromosomes, one segment at a time. Last updated [April 23, 2008](#).

### Chromosome View

-  Solid segments indicate that both chromosomes come from the same geographic region. [See a Cambodian Woman's painting.](#)
-  Dual-colored segments indicate chromosomes from different geographic regions. [See an African American Man's painting.](#)
-  Gray segments indicate regions where 23andMe's genotyping chip has no markers.

Select a person:



### Worldwide Examples

Click on the icons in the map below to see example paintings of individuals from across the globe.



### Tell Me About...

- [...using Ancestry Painting.](#)
- [...the three reference populations.](#)
- [...why only three populations are used.](#)
- [...the people linked to my account.](#)
- [...why it says I'm European/African/Asian when I'm really an American/Australian/South African.](#)
- [...how the percentages are calculated.](#)
- [...where the X and Y chromosomes are.](#)

# 23andMe Firefox Plugin

## New FireFox plugin for 23andMe customers

By Daniel MacArthur January 11, 2011 | 5:00 pm | Categories: Genetic Future, Science Blogs

Software company 5AM Solutions has just launched a neat little FireFox plug-in for customers of consumer genomics company 23andMe.

The idea is very simple:

1. Download your raw data from 23andMe (or use one of the files from me or my colleagues at [Genomes Unzipped](#));
2. Install the plug-in from [here](#) and point it to your 23andMe data;
3. Browse to a website discussing one of the genetic variants included on the 23andMe chip, and you'll see highlights around the rsID of any variant on the page (rsIDs are unique codes assigned by dbSNP to most of the common variants targeted by personal genomics companies);
4. Mouse over the rsID and your own genotype for that SNP will appear.

For any 23andMe user who's ever come across a variant on PubMed and wondered what their own genotype was, then gone through the process of logging into 23andMe and checking, the value of this tool is immediately obvious.

Here's a screenshot using my own data:

[Hum Mol Genet.](#) 2010 Mar 15;19(6):1129-36. Epub 2009 Dec 16.

### European lactase persistence genotype shows evidence of association with increase in body mass index.

Kettunen J, Silander K, Saarela O, Amin N, Müller M, Timpson N, Surakka I, Ripatti S, Laitinen J, Hartikainen AL, Pouta A, Lahermo P, Anttila V, Männistö S, Jula A, Virtamo J, Salomaa V, Lehtimäki T, Raitakari O, Gieger C, Wichmann EH, Van Duijn CM, Smith GD, McCarthy ML, Järvelin M, Perola M, Peltonen L.

Wellcome Trust Sanger Institute, Wellcome  
johannes@sanger.ac.uk

**Abstract**  
The global prevalence of obesity has increased in recent decades, mainly due to excess calorie intake and increasingly obesity measured by body mass index (BMI). There is strong selective pressure: the function of the lactase gene. We tested this variant since it is presumed to provide nutritional advantage in

Your genotype at rs4988235 is AA.

View this SNP at:  
[23andme.com](#)  
[SNPedia.com](#)  
[dbSNP](#)  
[Google Scholar](#)

powered by



# ... and most of the recommendations are obvious for general health

- Exercise vigorously and regularly
- Maintain a healthy diet
  - High fiber
  - Vitamins/ minerals
- Watch your weight
- Don't smoke
- Limit toxins (e.g., caffeine)
- Get enough rest



OCTOBER 27, 1917

5c. THE COPY



**Knowledge is Power!**

Or is it?

# What are the risks of getting this information?

- Over-interpretation and taking extreme, unrequired procedures
  - Assume it's correct and informative if it's not
- Undue anxiety or undue sense of security
  - Often associated with weak understanding of statistics and “relative risk”
- Misuse of information by others
  - Personal stigma by peers / family
  - Insurance and health plans responding
  - Employers not hiring

# How might insurance companies (mis)use this type of information?

Allstate insurance commercial guy "Mayhem"



I'm a mutation, causing rampant, uncontrollable cell growth that can ultimately kill you...

# Genetic Information Nondiscrimination Act (GINA)

- American insurance companies and health plans prohibited from:
  - looking at your genetic information before you enroll
  - "requesting or requiring" that you or your family members take a genetic test
  - restricting enrollment based on genetic information
  - changing your premiums based on genetic information

... and ...



# Genetic Information Nondiscrimination Act (GINA)

- American employers prohibited from:
  - discriminating against who they hire or how much they pay on the basis of genetic information
  - "requesting or requiring" that you or your family members take a genetic test
  - disclosing genetic information in their possession except under specific and specially controlled circumstances

Signed into law in May, 2008



... but the risks are not **gone**

- How well does the consumer understand how their data will be used/ shared?
- Is “consent” always fully informed- may companies take advantage of users?
- What if GINA goes away (or is modified)?
- What are protections in other spheres of life besides health care and employment?

– Long-term care insurance



# Should you try to discover your genotype?

- A very personal decision
- Right now, my impression is greatest risks are personal- you have to evaluate
- Greatest benefits: unlikely to significantly affect your long-term health *with information we have today*
  - Useful for curiosity / interest
  - Useful for community if you allow your data to be used for further study





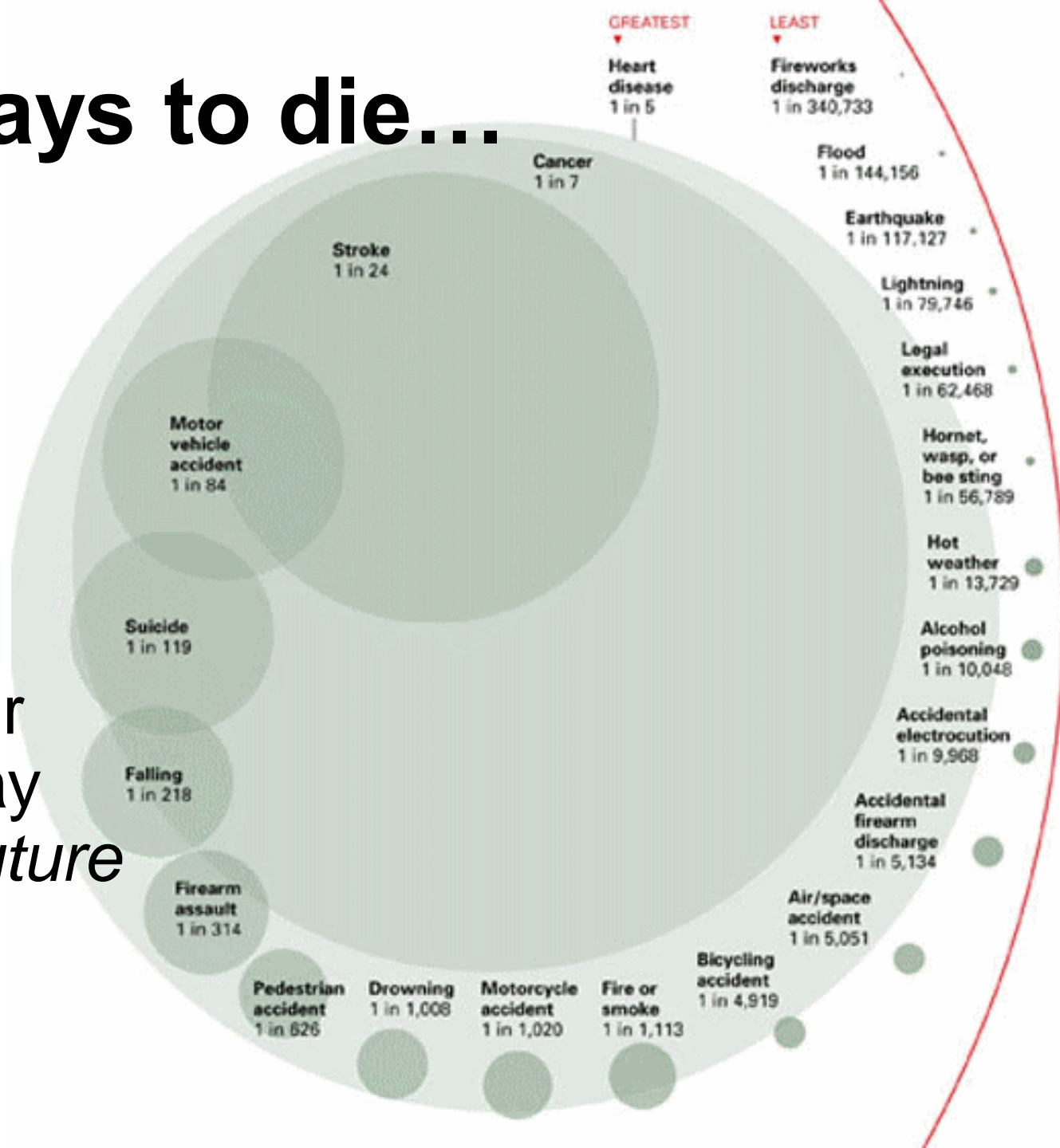
# Today's talk



- Basics of genetic inheritance
- Genetics of human diseases
- Nature vs. nurture
- What is the success of identifying genetic bases to common human diseases?
- What are the benefits & risks to knowing your “genotype”?

# Lots of ways to die...

- Many are disease-related & preventable
- Knowing your genotype may help *in the future* but not often today



# THANK YOU!

