

## Classification of the mutation

- spontaneous vs. induced mutation
- gametic vs. somatic mutation
- lethal or conditional mutation

## Spontaneous mutations

- are those that happen naturally
- no specific agents are associated with their occurrence
- and they are generally assumed to be random changes in the nucleotide sequences of genes

## Induced mutations

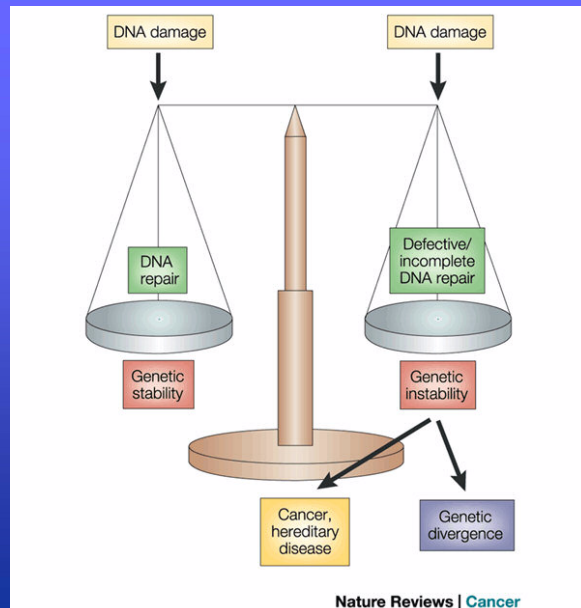
- those that result from the influence of any artificial factor
- various forms of radiation
- a wide spectrum of chemical agents
- biological agents (e.g. viruses)

## Gametic vs. somatic mutations

- **Mutation** arising in **somatic cells** are not transmitted to future generations
- **Mutations in gametes** or gamete-forming tissue are of greater significance because they are transmitted to offspring as part of the germ line
  - dominant
  - recessive
  - X-linked

## Lethal vs. conditional mutations

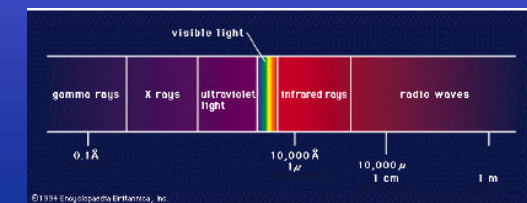
- Mutation may interrupt a process that is essential to the survival of the organism
  - in this case, it is referred to as a **lethal mutation**
- **Conditional mutation** is present in the genome of an organism, but it is expressed and can be detected only under certain conditions



## Induced mutagenesis

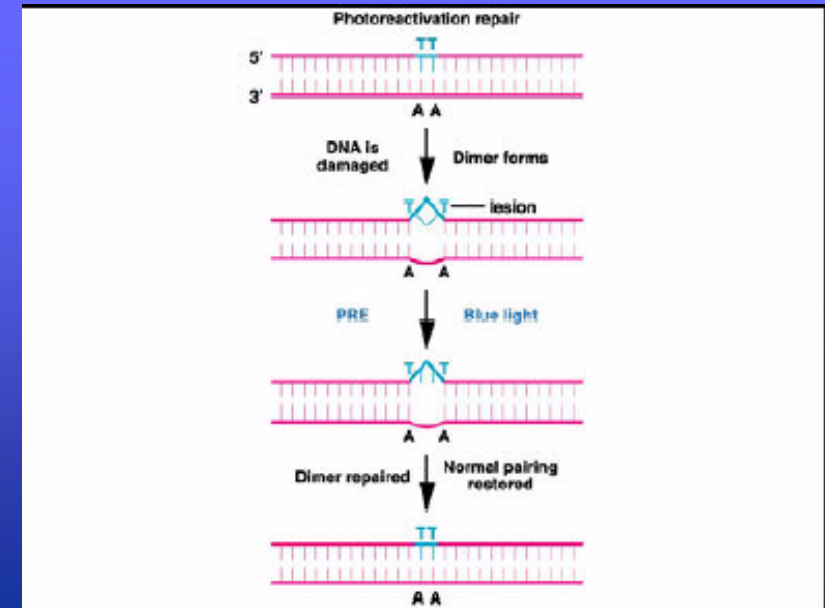
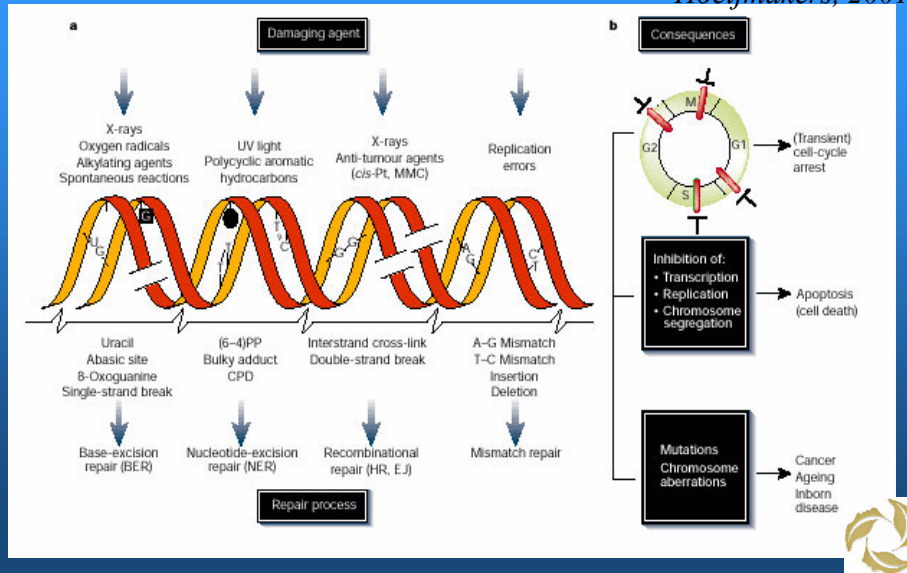
Can be caused by environmental agents that damage DNA:

- UV light
  - X rays and  $\gamma$ -rays
  - Chemical carcinogens e.g. cigarette smoke
- DNA damage can lead to mutations unless it is removed by DNA repair enzymes  
Unrepaired damage can have serious consequences



# IMPORTANCE OF DNA REPAIR

Hoeijmakers, 2001



## Photoactivation Repair in *E. coli*

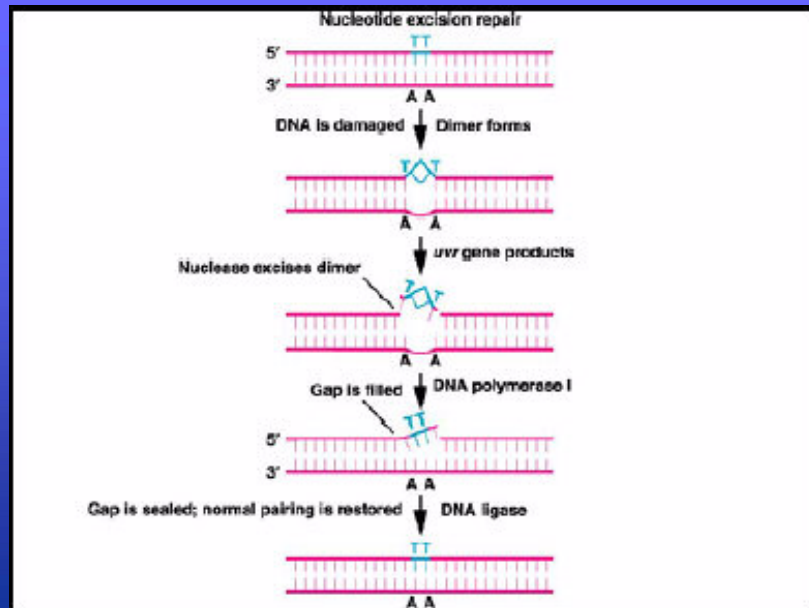
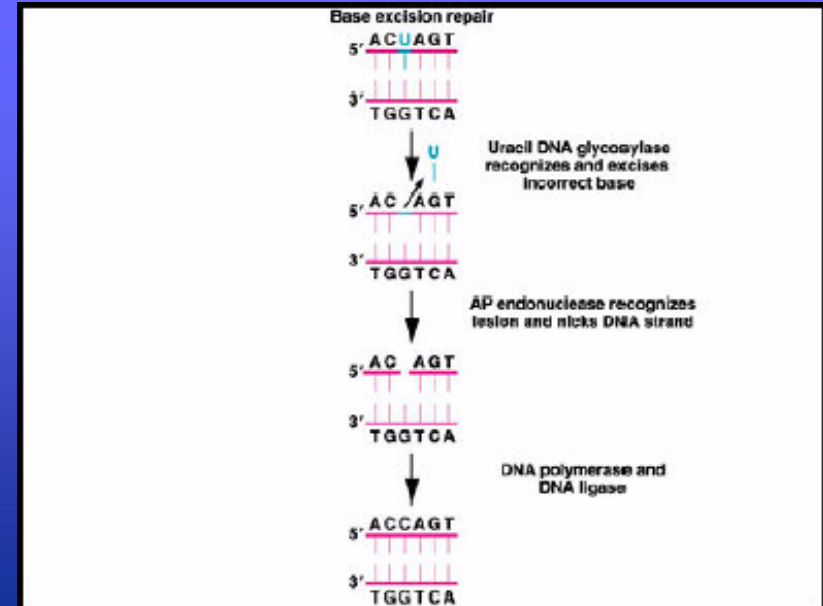
- Exposing UV treated cells to blue light results in a reversal of the thymine dimer formation
- Enzyme, photoactivation repair enzyme (PRE) absorbs a photon of light (from blue light) and is able to cleave the bond forming the thymine dimer.
- Once bond is cleaved, DNA is back to normal

## Excision Repair

- Conserved throughout evolution, found in all prokaryotic and eukaryotic organisms
- Three step process:
  - 1. Error is recognized and enzymatically clipped out by a nuclease that cleaves the phosphodiester bonds (uvr gene products operate at this step)
  - 2. DNA Polymerase I fills in the gap by inserting the appropriate nucleotides
  - 3. DNA Ligase seals the gap

## Excision Repair

- Two known types of excision repair
  - **Base excision repair (BER)**
    - corrects damage to nitrogenous bases created by the spontaneous hydrolysis of DNA bases as well as the hydrolysis of DNA bases caused by agents that chemically alter them
  - **Nucleotide excision repair (NER)**
    - Repairs “bulky” lesions in DNA that alter or distort the regular DNA double helix
    - Group of genes (*uvr*) involved in recognizing and clipping out the lesions in the DNA
    - Repair is completed by DNA pol I and DNA ligase



## Proofreading and Mismatch Repair

- In bacterial systems, proofreading decreases the error rate in DNA replication by two orders of magnitude
  - from 1 mismatch in every 10<sup>5</sup> nucleotide pairs to 1 in every 10<sup>7</sup> base pairs
- Mismatch repair is another mechanism by which mismatches can be fixed in the DNA strand
- In bacteria, mismatch repair is based on the process of DNA Methylation, which labels one strand, providing a basis for the mismatch repair.

## Post-Replication Repair

- Post-replication repair– Discovered in *E. coli* by Miroslav Radman
  - Responds when damaged DNA escapes repair and the damage disrupts replication
  - Rec A protein stimulates recombination between donor strand and new strand
  - Creates gap in donor strand which can be repaired
  - DNA Polymerase and DNA Ligase involved

## Diseases in which DNA repair is damaged

- **Xeroderma pigmentosum (XP)**: Patients are hypersensitive to UV light; patients often develop malignancies of the skin.
- **Ataxia telangiectasia (AT)**: Patients are sensitive to gamma irradiation; patients develop neurological and skin lesions.
- **Fanconi's anemia**: Patients demonstrate aplastic anemia, growth retardation, and congenital anomalies; related to a deficiency in repair of DNA cross-links.

## Xeroderma Pigmentosum (XP) and DNA Repair Defects

- XP is an autosomal recessive disease associated with dry skin, freckling, corneal ulceration, and skin tumors
- Many patients die before age 30 from metastases of malignant skin tumors
- One form of XP is produced by a defect in the human endonuclease that removes pyrimidine dimers
- Mutations in at least seven other genes involved in repairing UV-damaged DNA can cause XP

## DNA Repair and Clinical Syndromes: Increased Sensitivity; Chromosomal Instability and Increased Cancer Risk

**Table 1 Human syndromes with defective genome maintenance**

Syndrome	Affected maintenance mechanism	Main type of genome instability	Major cancer predisposition
Xeroderma pigmentosum	NER ( $\pm$ TCR)	Point mutations	UV-induced skin cancer
Cockayne syndrome	TCR	Point mutations	None*
Trichothiodystrophy	NER / TCR	Point mutations	None*
Ataxia telangiectasia (AT)	DSB response/repair	Chromosome aberrations	Lymphomas
AT-like disorder	DSB response/repair	Chromosome aberrations	Lymphomas
Nijmegen breakage syndrome	DSB response/repair	Chromosome aberrations	Lymphomas
BRCA 1/BRCA2	HR	Chromosome aberrations	Breast (ovarian) cancer
Werner syndrome	HR?/TLS?	Chromosome aberrations	Various cancers
Bloom syndrome	HR?	Chromosome aberrations (SCE $\uparrow$ )	Leukaemia, lymphoma, others





# Xeroderma Pigmentosum (XP)



Symptoms include:

- Extreme sensitivity to sunlight
- Early onset of skin cancer

# XP cases

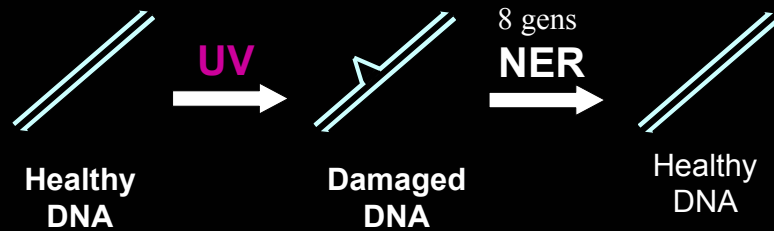


Sunlight-induced dermatologic abnormalities in a patient with xeroderma pigmentosum.



Typical skin manifestation of xeroderma pigmentosum with numerous areas of hypopigmentation and freckles (ie, solar lentigines) with different intensities of pigmentation.

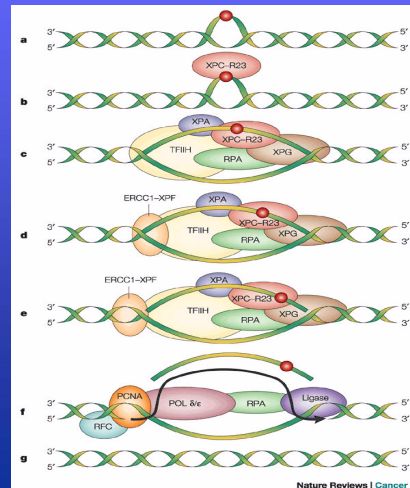
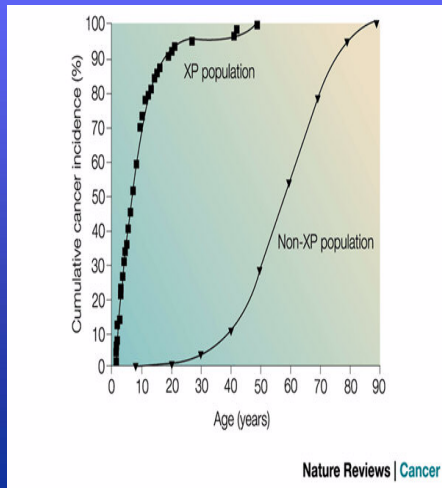
# Why are XP patients sensitive to sunlight?



# Why are XP patients sensitive to sunlight?



## XP: Skin Cancer Incidence Rapid Secondary to NER Faulty Repair of UV-induced DNA Damage and Genetic NER Mutations



## Molecular Genetics of Xeroderma Pigmentosum

Complementation Group	Locus Name	Gene Symbol	Chromosomal Locus	Protein Name
A	XPA	XPA	9q22.3	DNA-repair protein complementing XP-A cells
B	XPB	ERCC3	2q21	TFIIH basal transcription factor complex helicase XPB subunit
C	XPC	XPC	3p25	DNA-repair protein complementing XP-C cells
D	XPD	ERCC2	19q13.2-q13.3	TFIIH basal transcription factor complex helicase subunit
E	XPE	DDB2	11p12-p11	DNA damage binding protein 2
F	XPF	ERCC4	16p13.3-p13.13	DNA-repair protein complementing XP-F cells
G	XPG	ERCC5	13q33	DNA-repair protein complementing XP-G cells
XP variant		POLH	6p21.1-p12	Error prone DNA photoproduct bypass polymerase

Data are compiled from the following standard references: Gene symbol from [HUGO](#); chromosomal locus, locus name, critical region, complementation group from [OMIM](#); protein name from [Swiss-Prot](#).

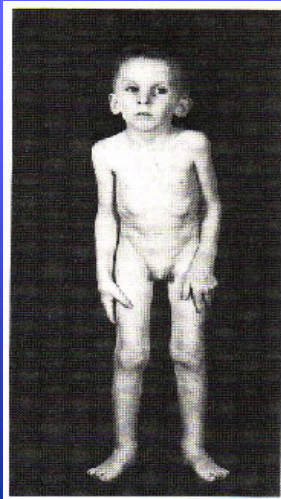
## Fanconi anemia (FA)

- Fanconi anemia (FA) is an autosomal recessive disease characterized by progressive bone marrow failure due to defective stem cell function.
- FA cells are hypersensitive to DNA cross-linking agents such as mitomycin C (MMC) resulting in cytogenetic aberrations, G2-M cell cycle arrest, apoptosis, and cell death.
- Seven complementation groups (termed FANCA -G) are identified. Group A (FANCA) mutations are the most prevalent (70%).
- There are at least seven FA genes: A, C, D2, E, F, G and BRCA2
- The function of the FANCA genes are still unclear. Involvement in DNA repair system is suggested.

## Cockayne's Syndrome

- Occurrence: 1 per million population
- Sensitivity: ultraviolet radiation (sunlight)
- Disorder: arrested development, mental retardation, dwarfism, deafness, optic atrophy, intracranial calcifications; (no increased risk of cancer)
- Biochemical: defect in NER
- Genetic: autosomal recessive, five genes (A, B and XPA, D & G)

## Cockayne's Syndrome



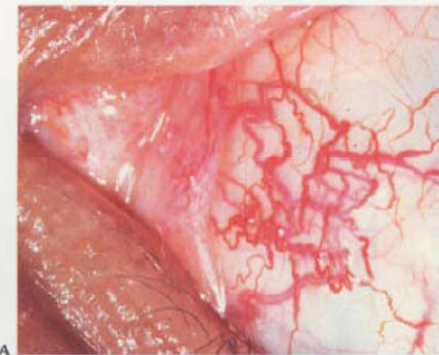
## Trichothiodystrophy

- Occurrence: 1-2 per million population
- Sensitivity: ultraviolet radiation (sunlight) in subset of patients
- Disorder: sulfur deficient brittle hair, mental and growth retardation, peculiar face with receding chin, ichthyosis; (no increased cancer risk)
- Biochemical: defect in NER
- Genetic: autosomal recessive, three genes (TTDA, XPB, XPD)

## Trichothiodystrophy



## Ataxia telangiectasia (AT):



**Color Plate 11** Some of the clinical features of ataxia telangiectasia (AT). (A) The conjunctiva of the eye of an individual showing telangiectasia (abnormal dilation of blood vessels). (B) This 22-year-old patient has severe ataxia and is wheelchair bound. (Reproduced with permission from K. H. Kraemer. Progressive degenerative diseases associated with defective DNA repair: xeroderma pigmentosum and ataxia telangiectasia, p. 37-71. In W. W. Nichols and D. G. Murphy (ed.) *DNA repair processes. Symposia Specialists, Miami, 1977.*)