

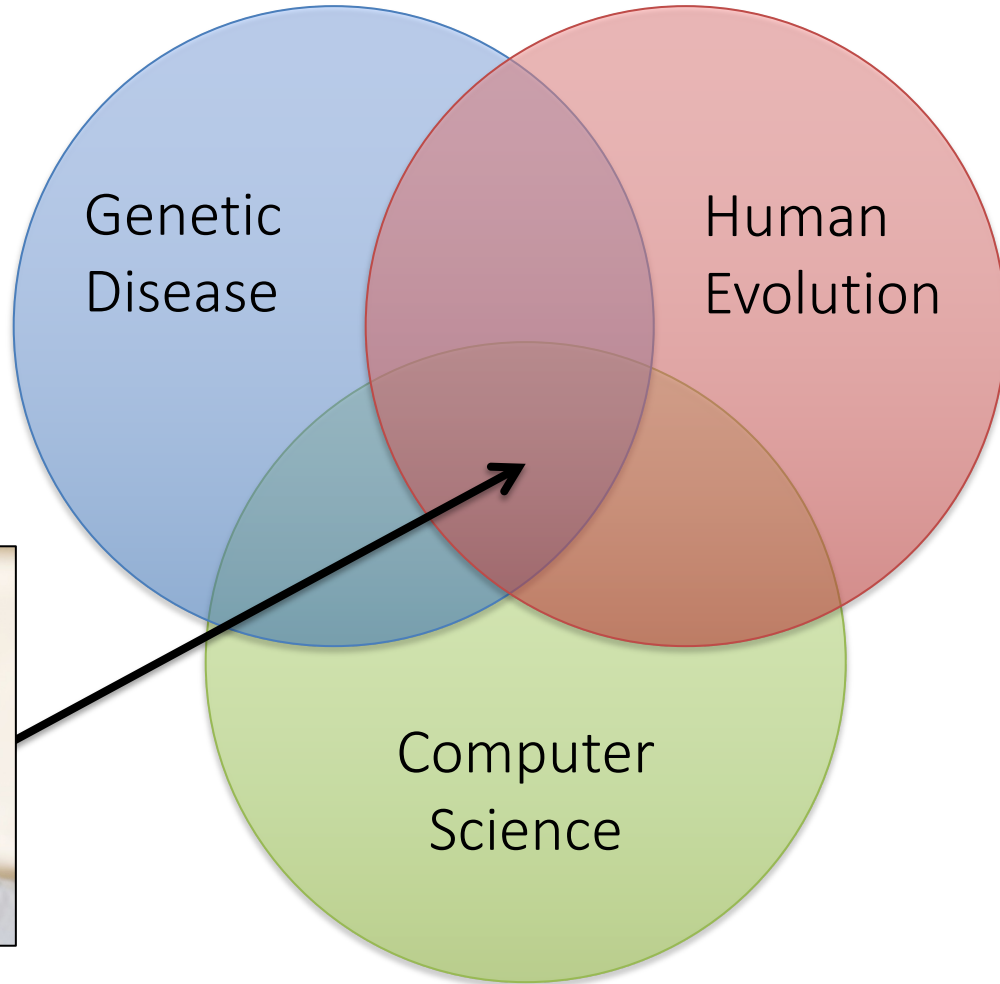
Personalized Structural Biology for Genome Interpretation

Tony Capra

Associate Professor – BCHSI, Epi&Biostats

<http://www.capralab.org/>

Pizza Talks 2022/3



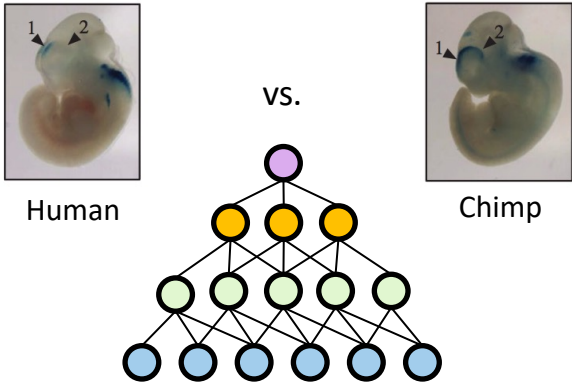


Research Foci

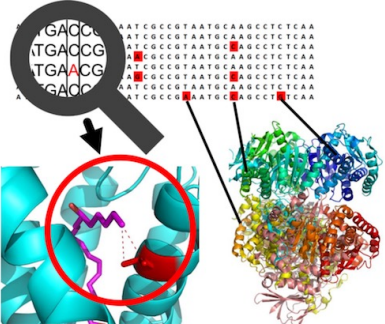
1. Recent Human Evolution



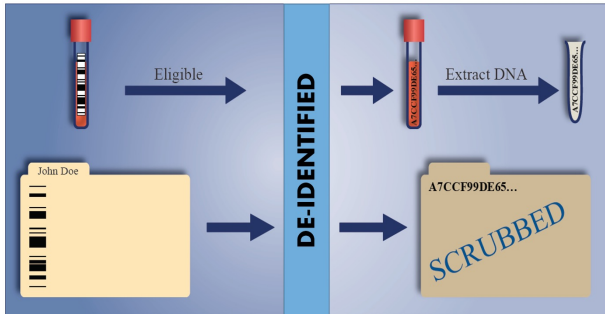
2. Machine Learning + Gene Regulation



3. Personalized Structural Biology

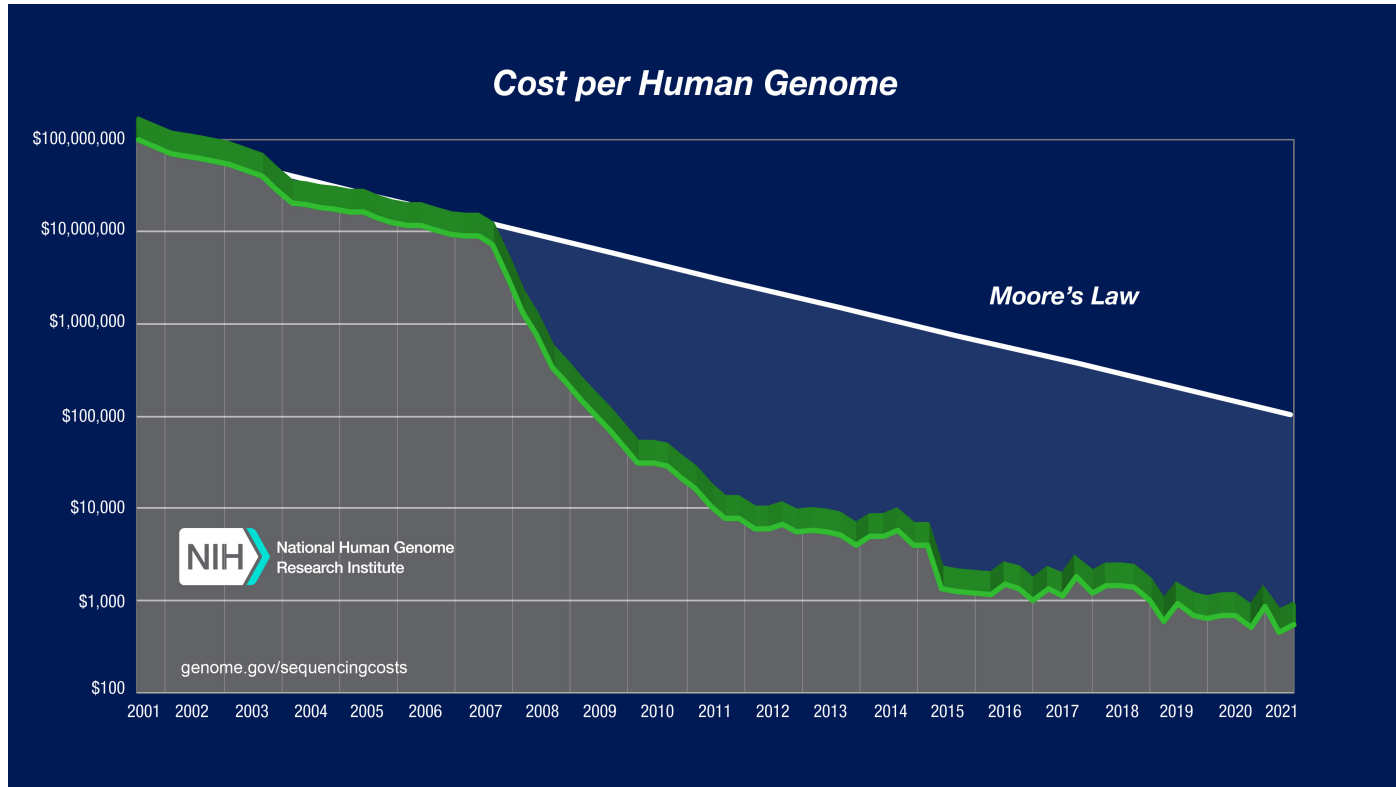


4. EHRs, Biobanks, and Genetics



How many protein sequence altering variants does your genome carry?

Genome sequencing is “cheap”



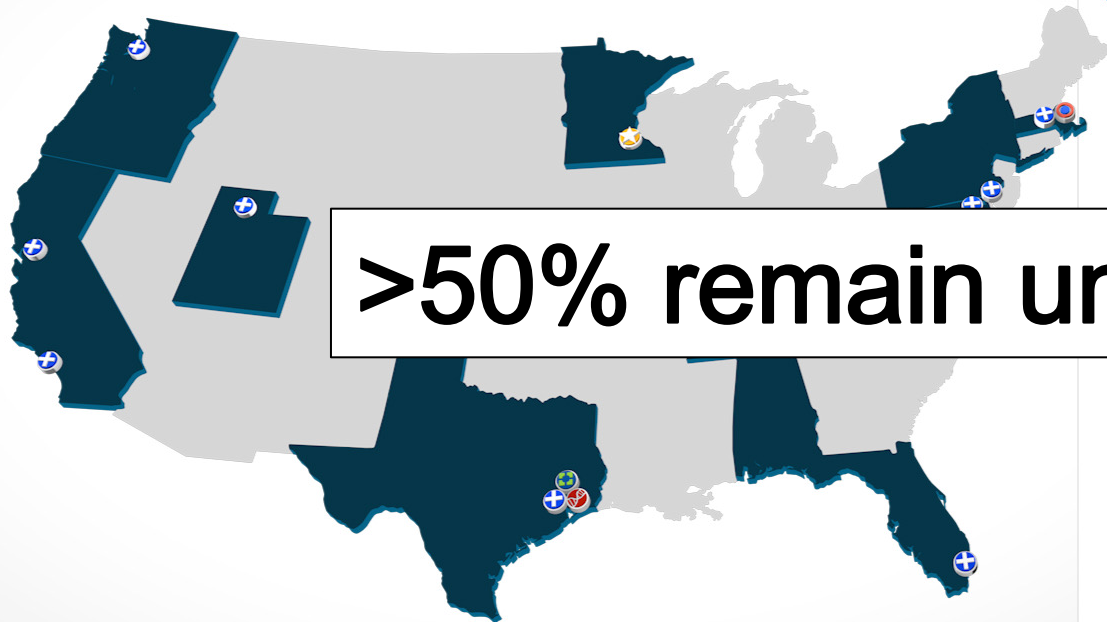
How many protein sequence-altering variants does your genome carry?

- 10,000–12,000 protein altering variants
- 50–100 protein truncating variants

Each of us carries thousands of rare coding germline variants.

- Most of these variants have not been functionally characterized
 - aka Variants of Unknown Significance (VUS)
- Most of these variants are benign.

How do we distinguish these from causal rare disease variants?



Baylor College of Medicine
Houston, TX



**Baylor College of Medicine
and University of Oregon**
Houston, TX



**Brigham and Women's Hospital,
Boston Children's Hospital,
Massachusetts General Hospital**
Boston, MA



**Harvard Medical School
and University of Alabama
at Birmingham**
Boston, MA



Mayo Clinic
Rochester, MN



National Institutes of Health
Bethesda, MD



Stanford Medicine
Stanford, CA



UCLA
Los Angeles, CA



**University of Miami
School of Medicine**
Miami, FL



University of Utah
Salt Lake City, UT



**University of Washington
School of Medicine and
Seattle Children's Hospital**
Seattle, WA



**Vanderbilt University
Medical Center**
Nashville, TN



**Washington University
in St. Louis**
St. Louis, MO



Clinical site



Coordinating center



DNA sequencing core



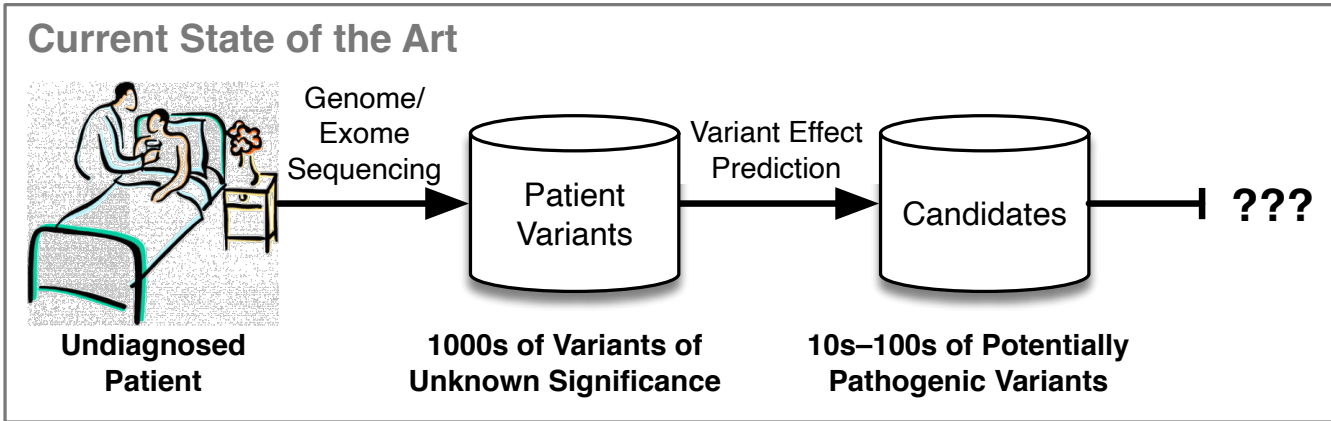
Central Biorepository



Model Organisms Screening Center

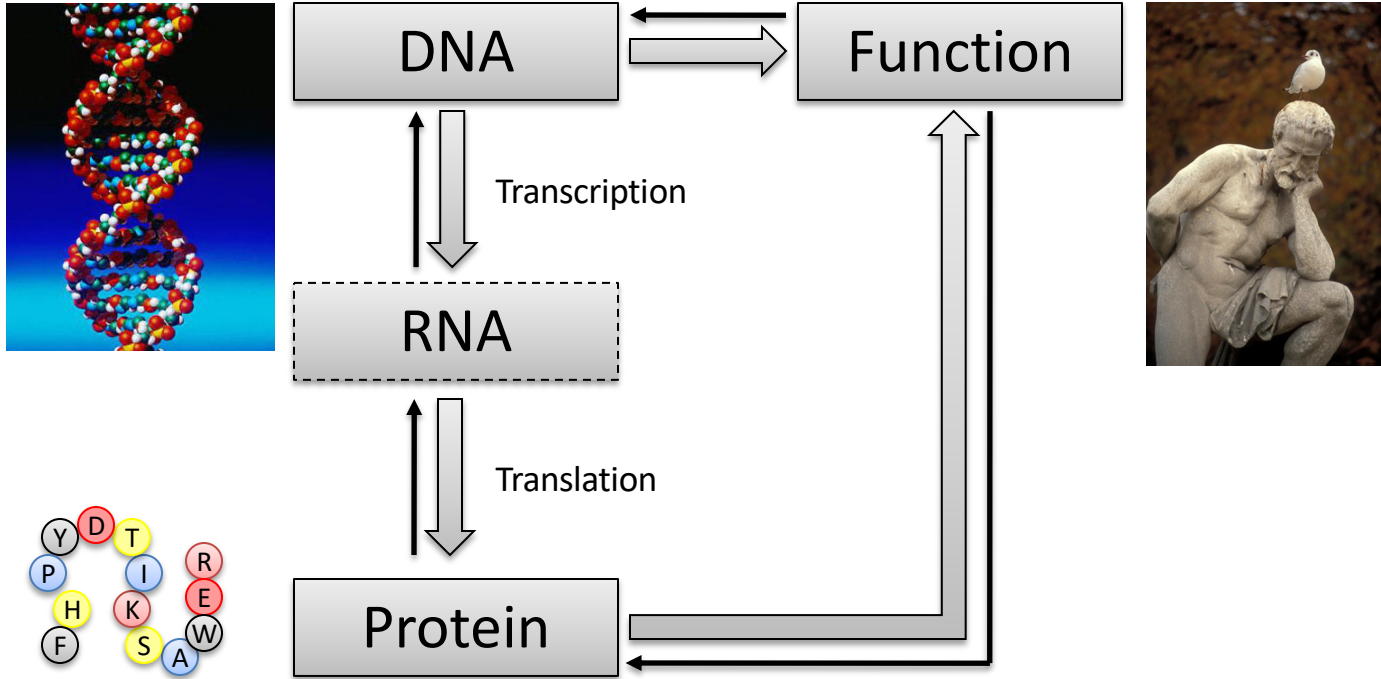


Metabolomics Core

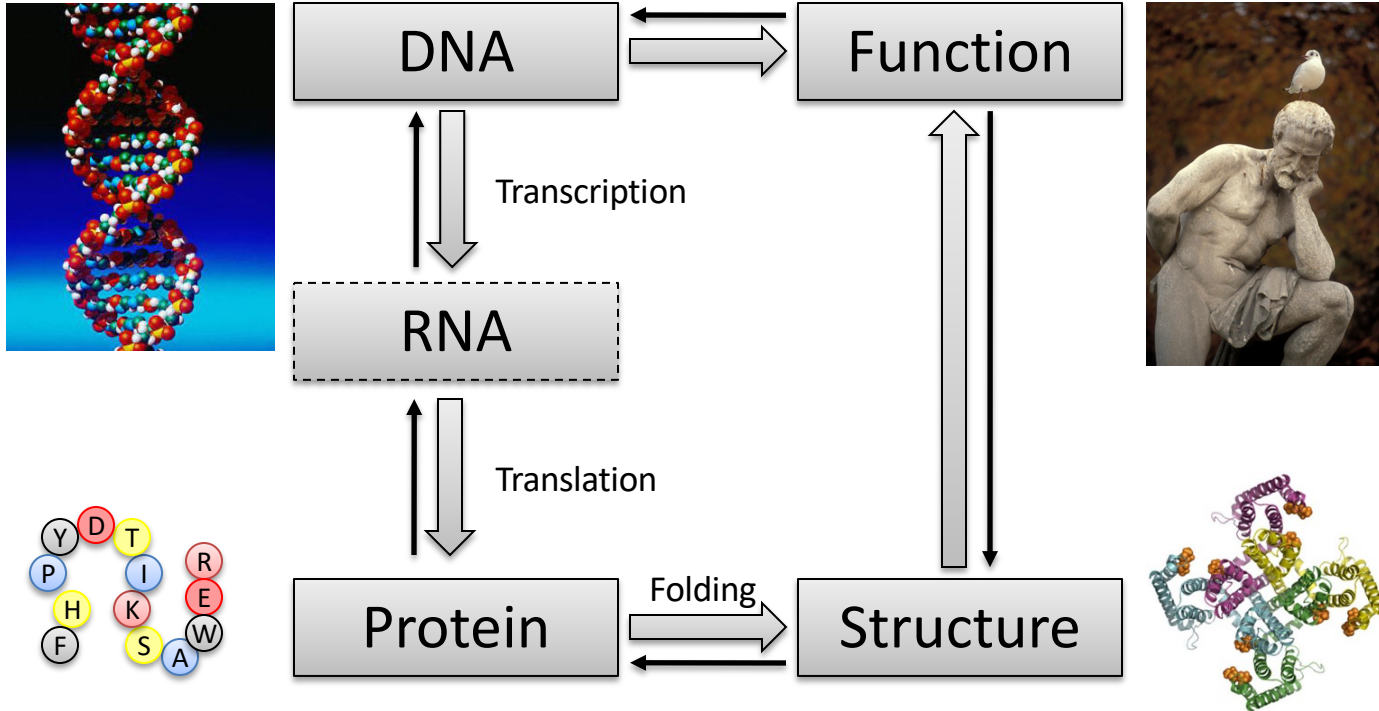


How can **we** help distinguish the 1000s of rare benign variants from causal rare disease variants?

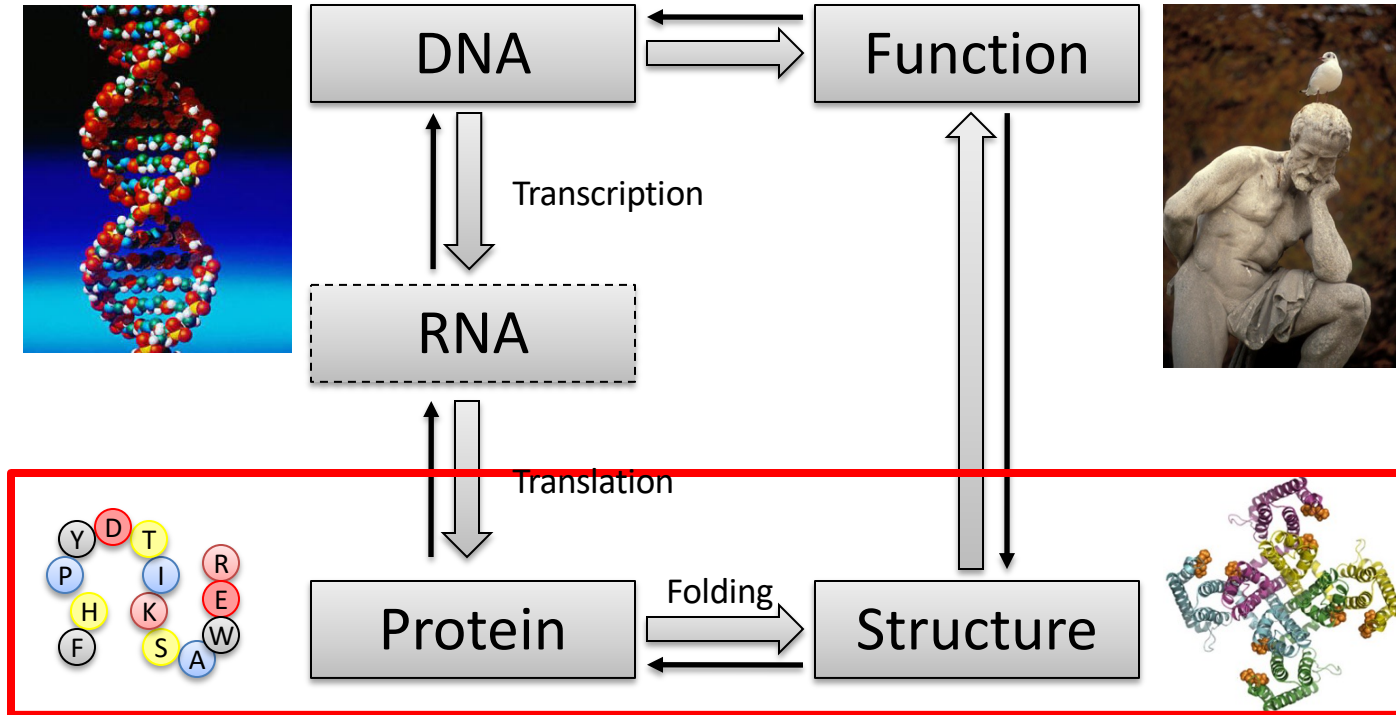
Central Dogma of Molecular Biology



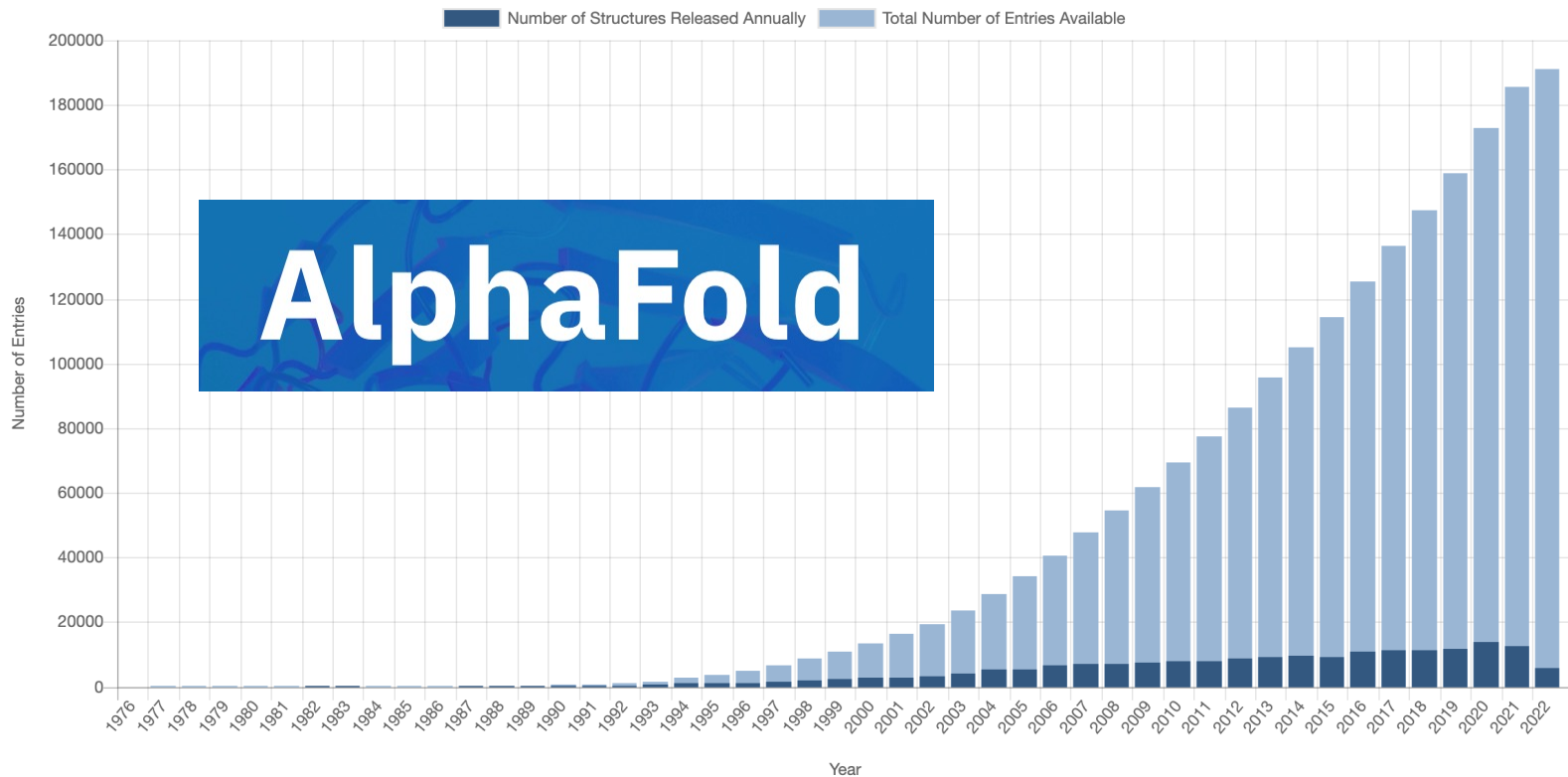
Central Dogma of Structural Biology



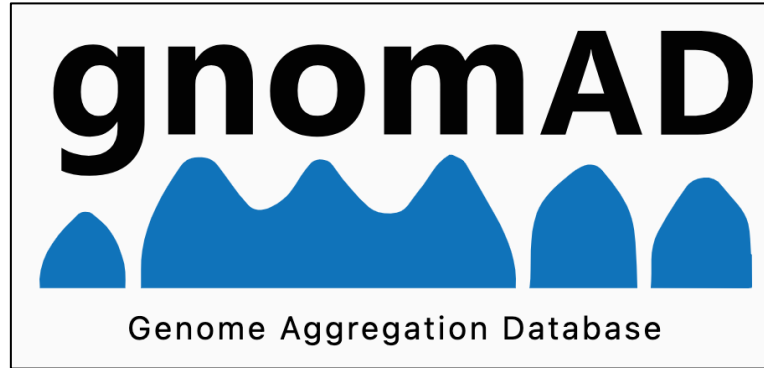
Central Dogma of Structural Biology



>200,000 3D structural models



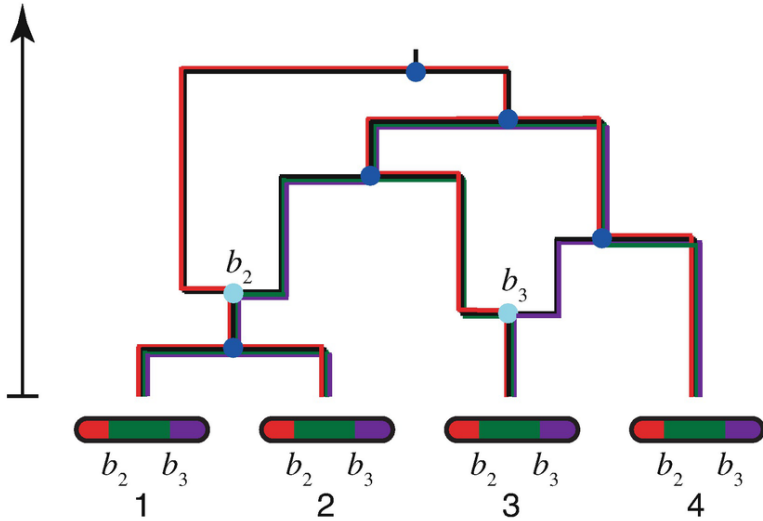
>200 million human protein variants



>140,000 exomes and genomes

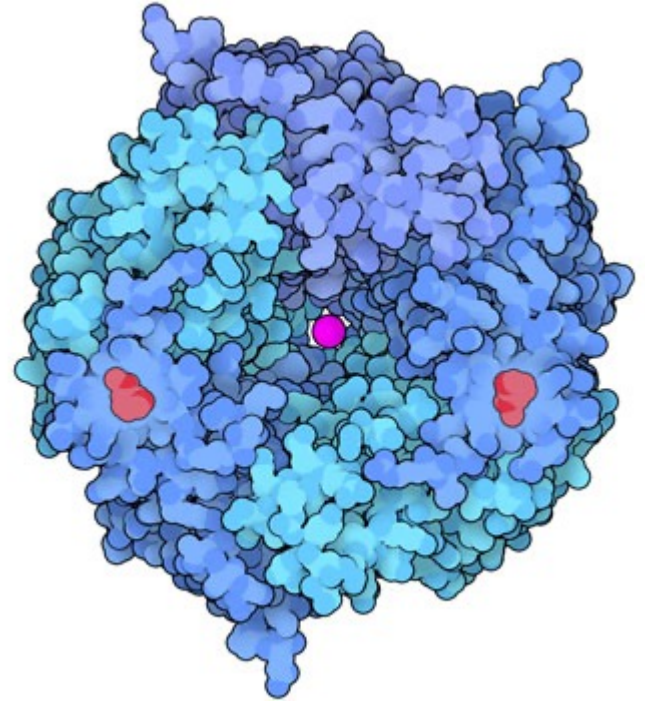
Opportunity!

generations before present



Population Genetics

+



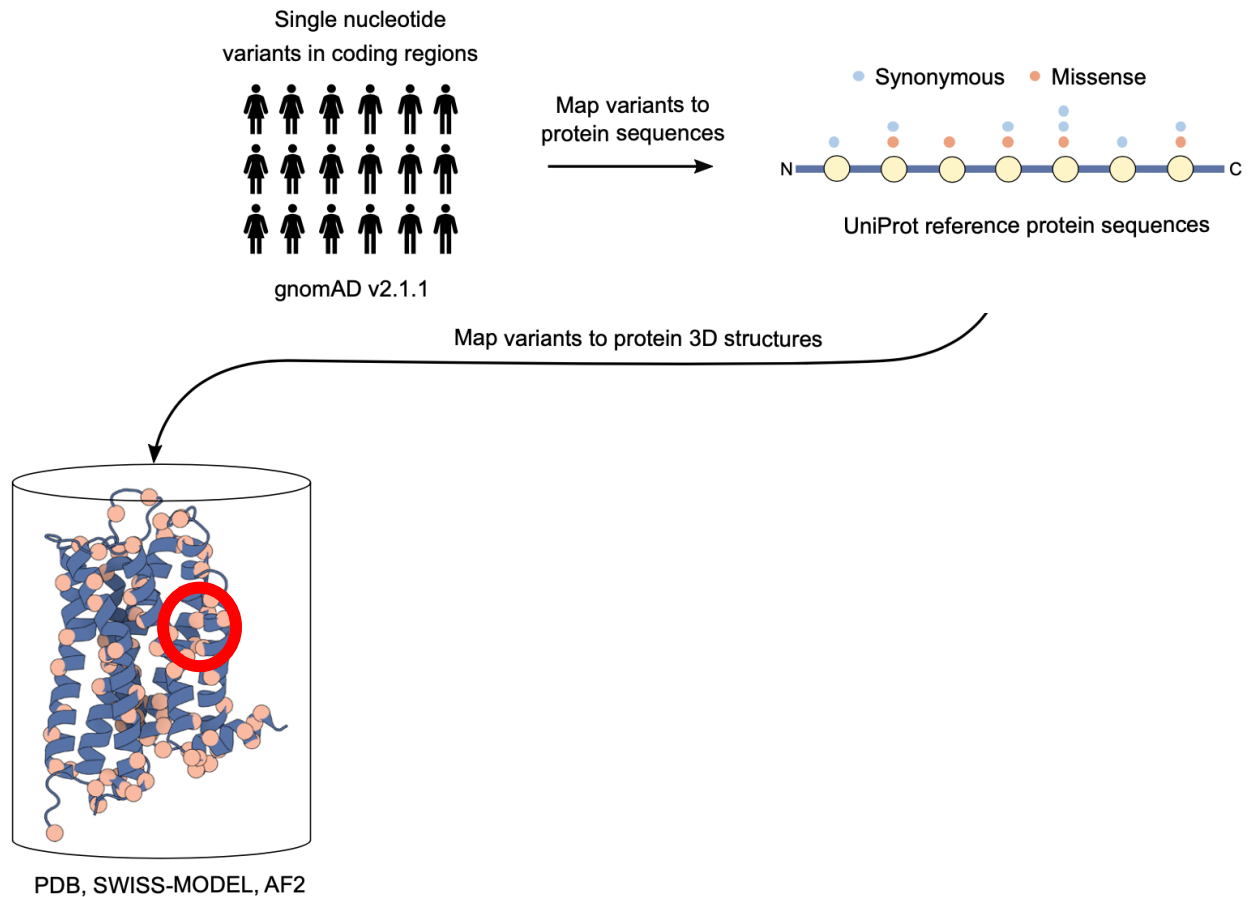
Structural Biology

Which spatial regions of human proteins tolerate genetic variation?

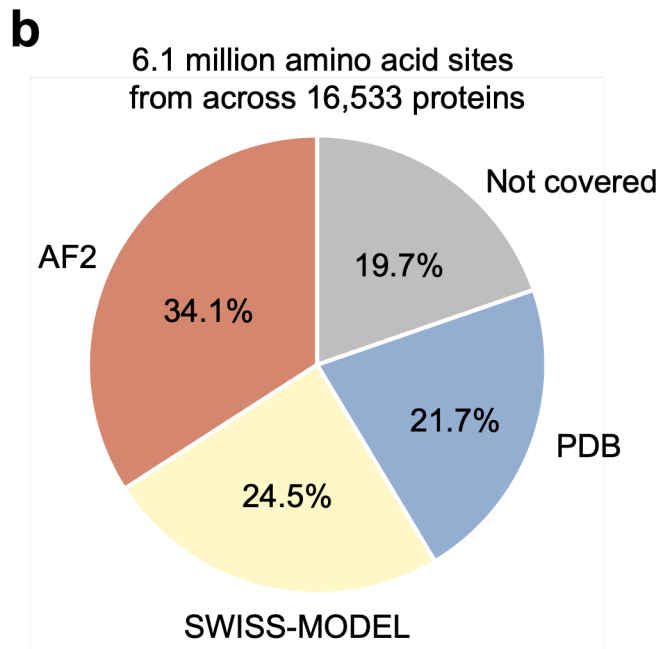
Intuition:

Spatial regions that do not vary in large healthy populations are functionally constrained.

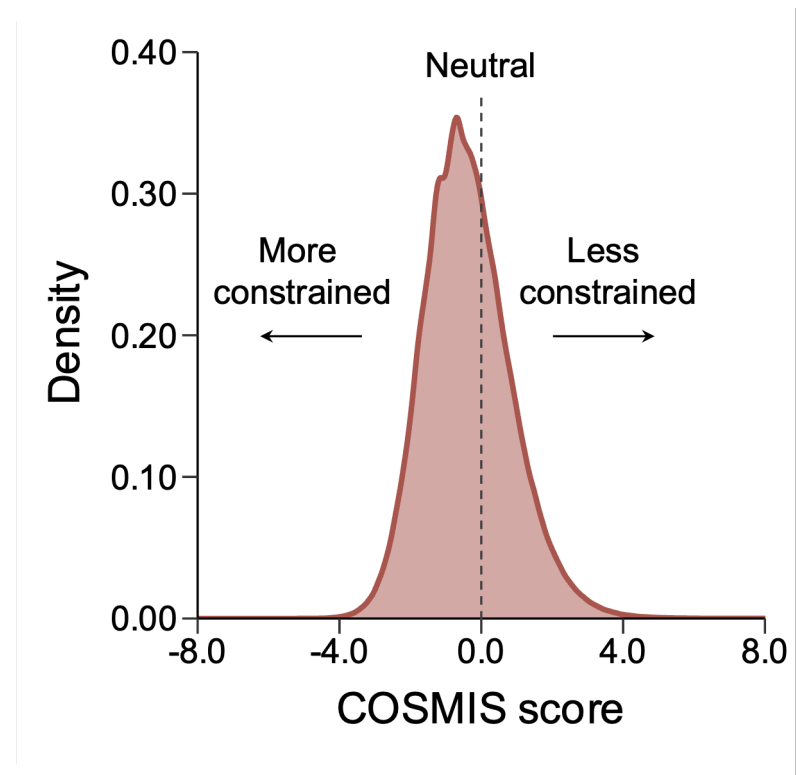
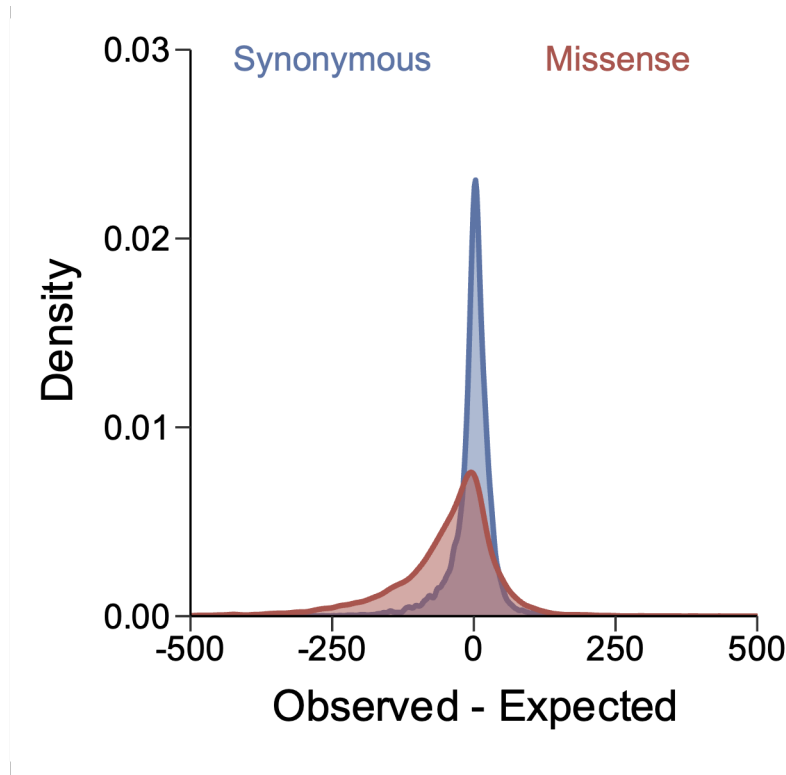
Variants in these regions are candidates for disease.



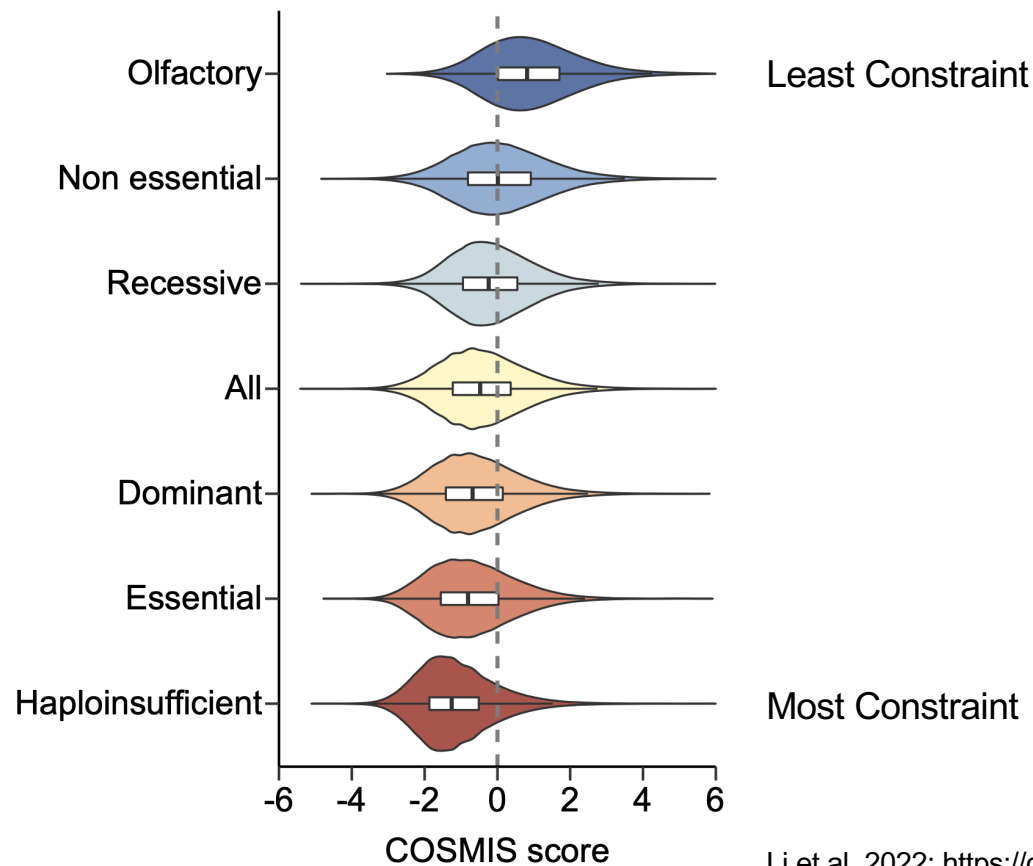
Alphafold substantially increased our coverage of protein space



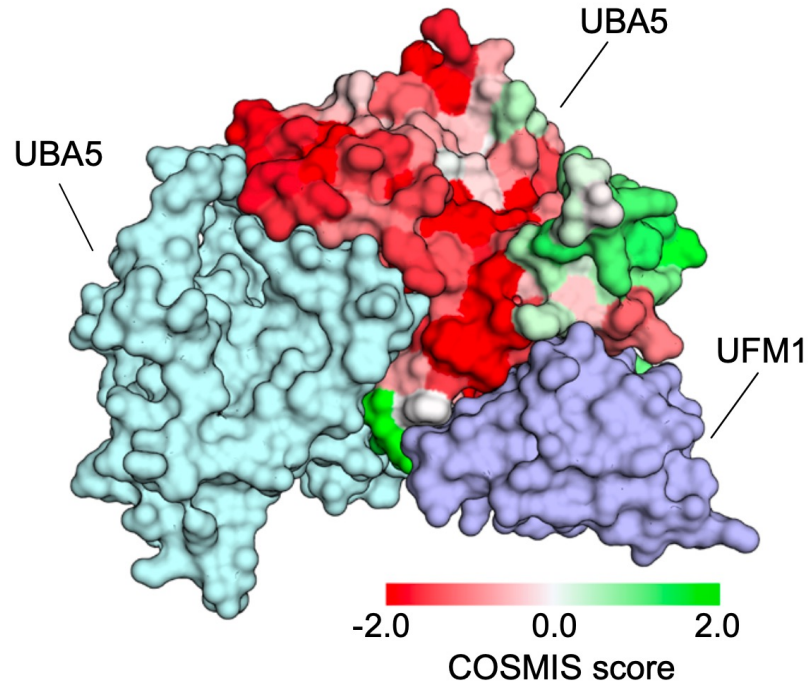
COSMIS quantifies depletion of missense variants in contact sets



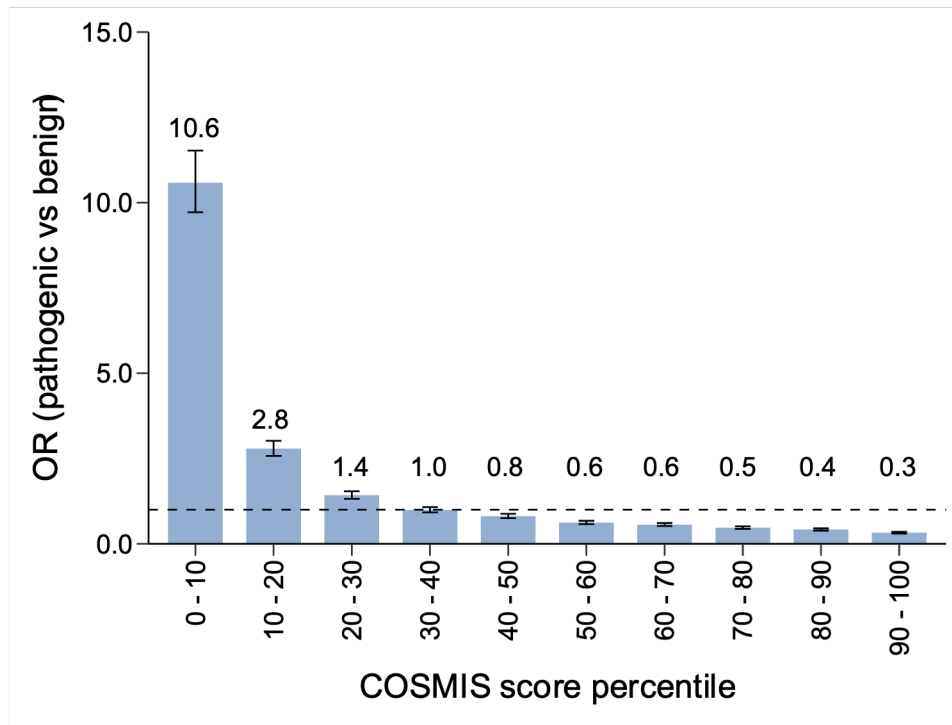
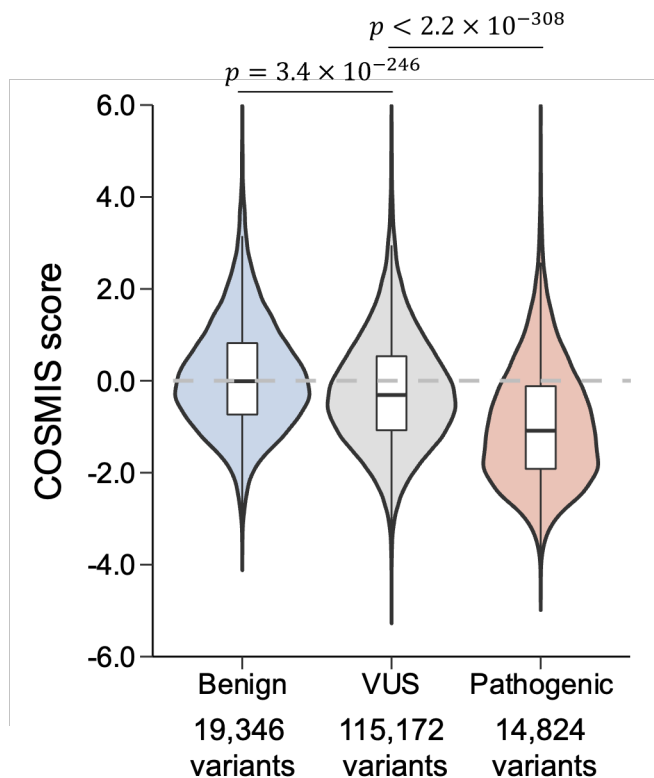
A range of mutational constraint...



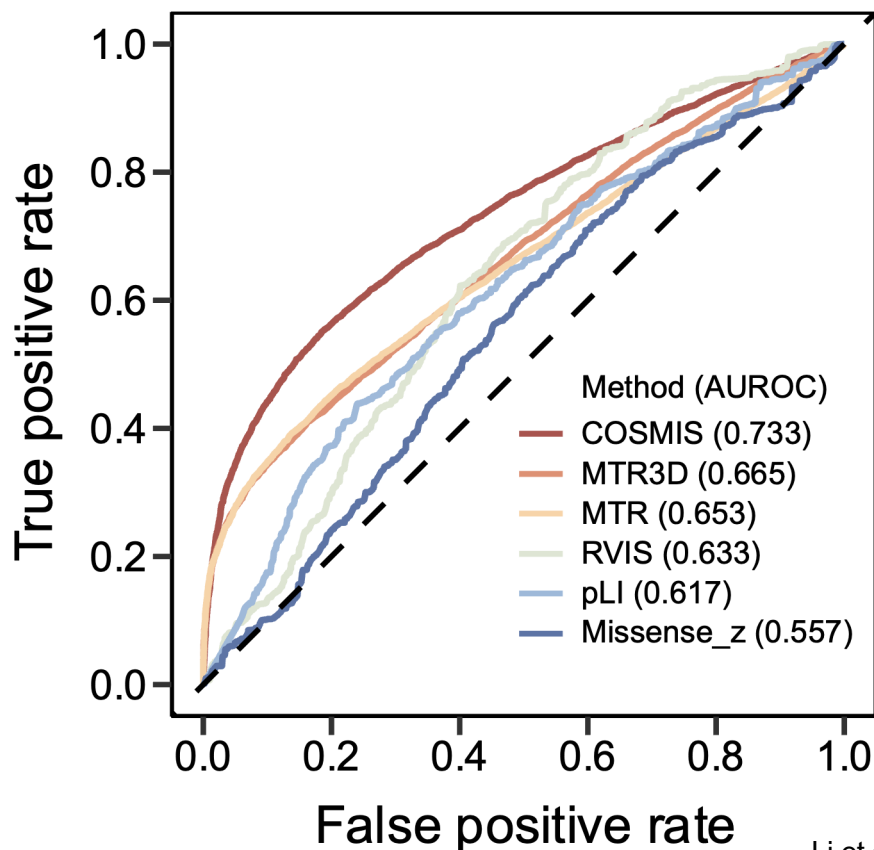
Which spatial regions are constrained?



COSMIS strongly predicts pathogenicity

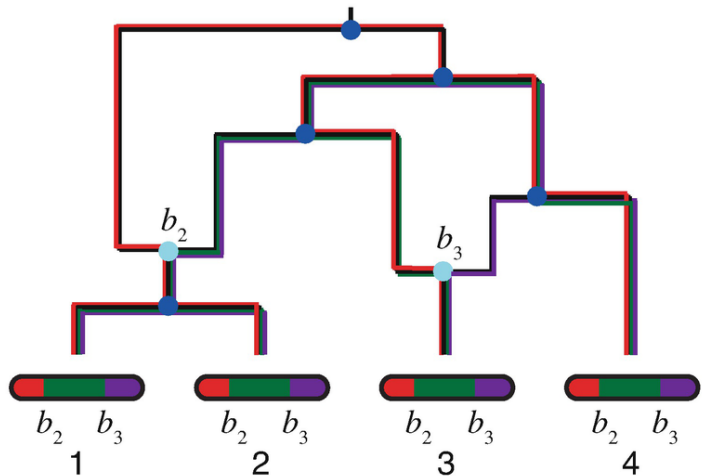


COSMIS outperforms other constraint metrics

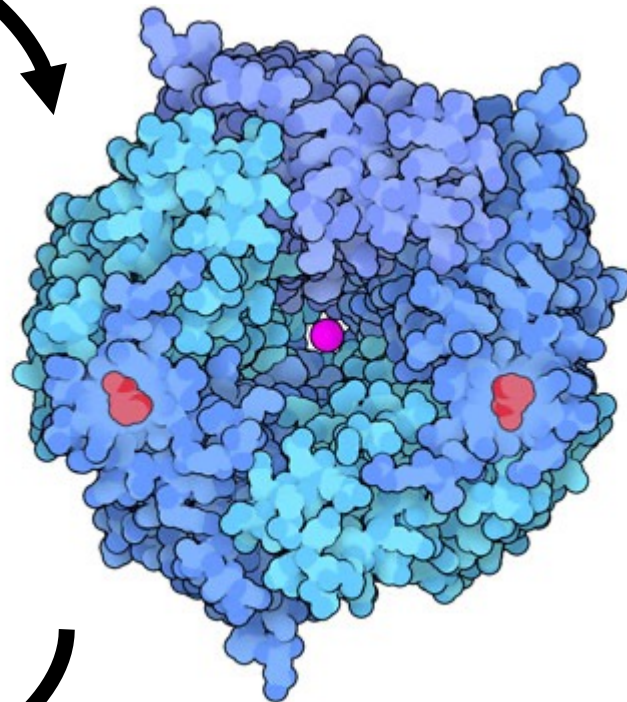


Opportunity!

generations before present



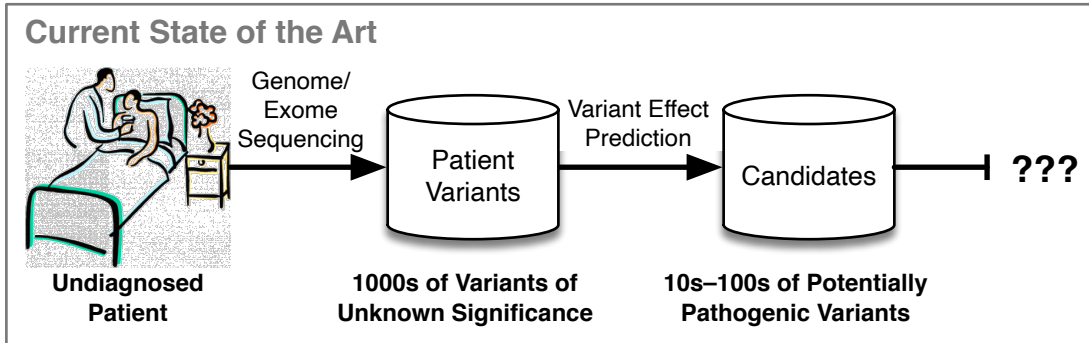
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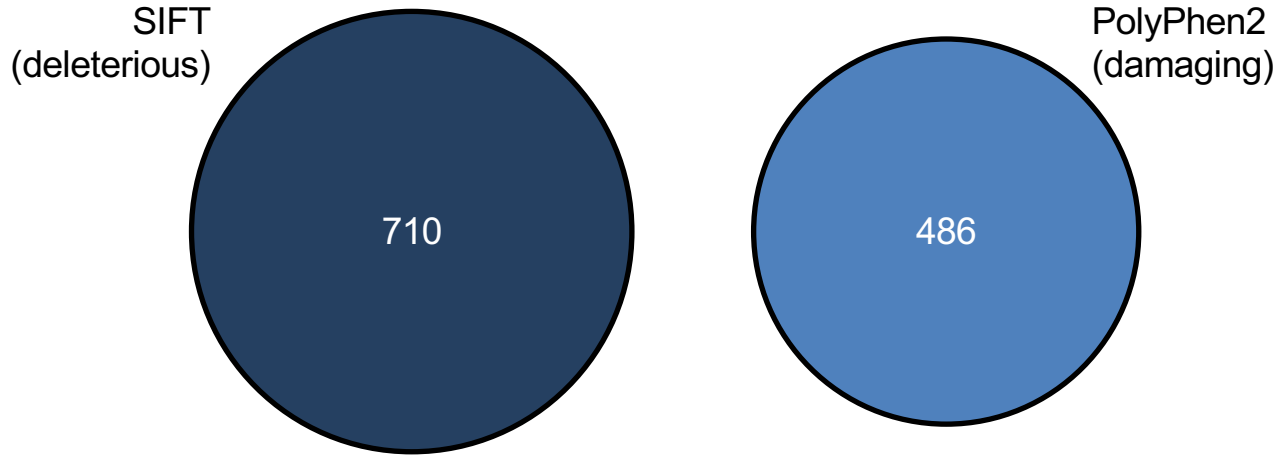
Population Genetics

Structural Biology

What can we do to help?

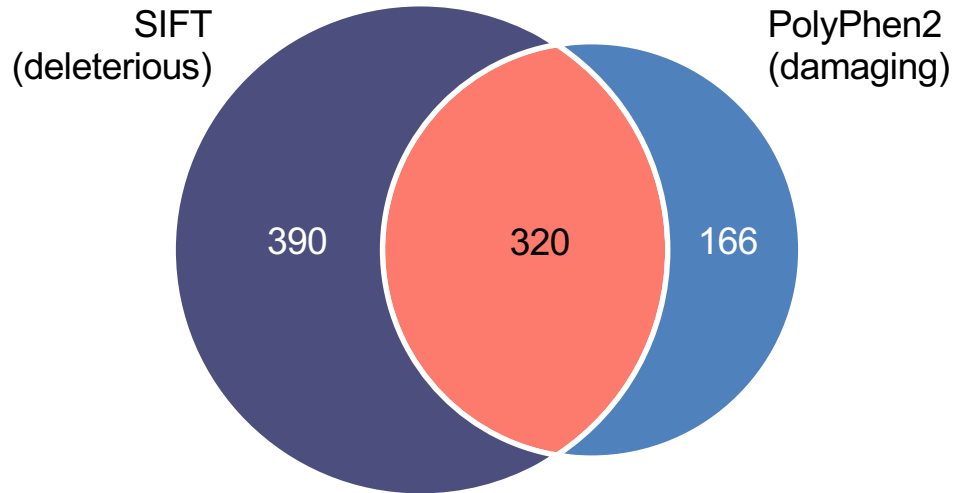


Variant Effect Predictions Disagree



Analyzed 1400 VUS

Variant Effect Predictions Disagree



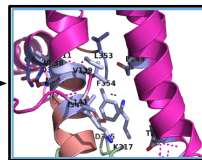
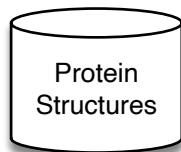
Only 44% agree!

Variant Effect Prediction Challenges

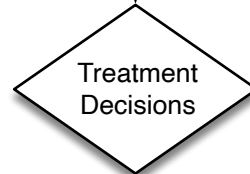
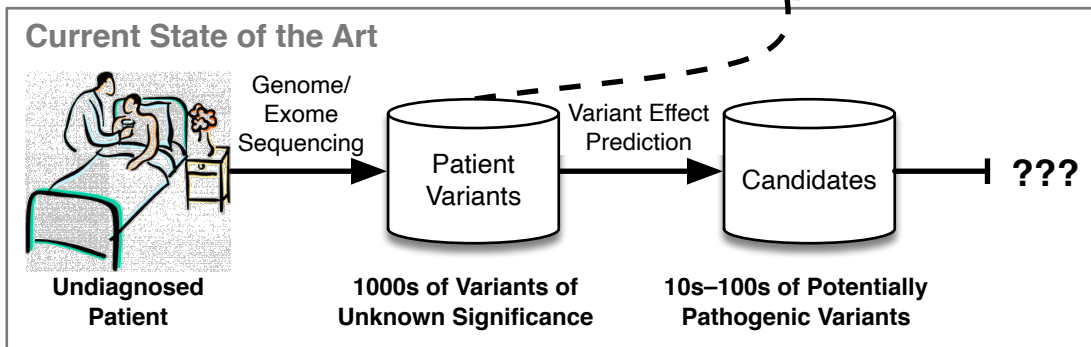
- Methods frequently disagree
- May not be applicable across human populations
- Do not provide mechanistic justification for predictions

GOAL: Evaluate functional effects in a less biased / more interpretable way.

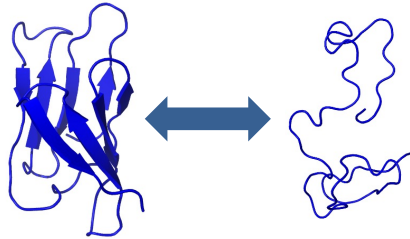
**Hypothesis I:
3D Structure
Disruption**



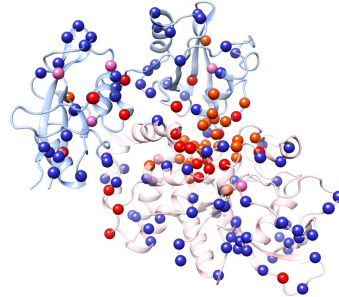
**Actionable
Hypotheses about
Variant Effects**



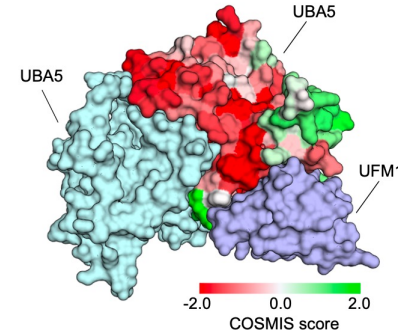
Tools for computational interpretation of structural effects of patient variants



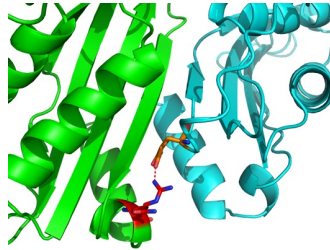
Stability



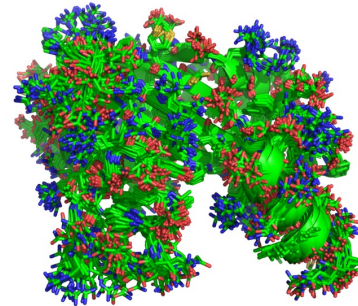
Variant Clustering



Evolutionary Constraint

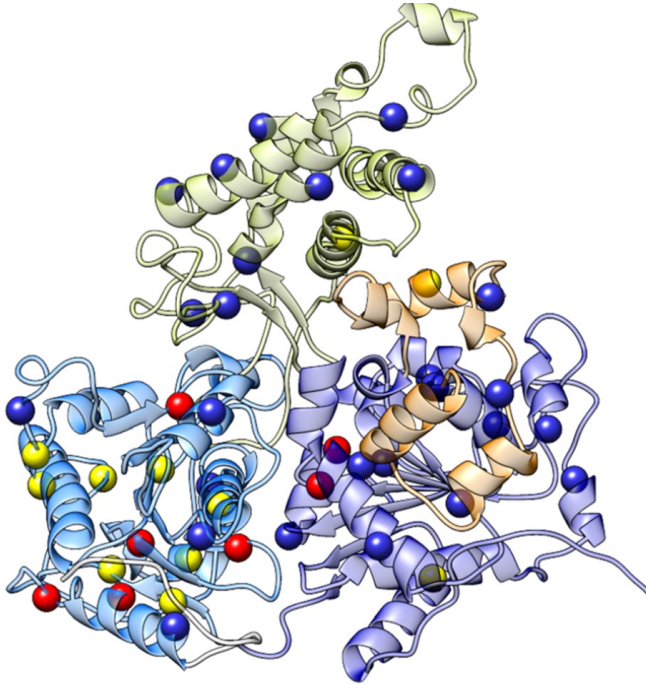


Interactions

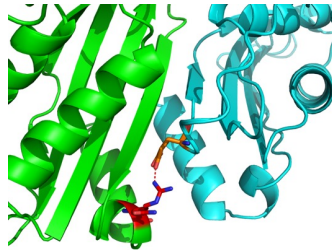
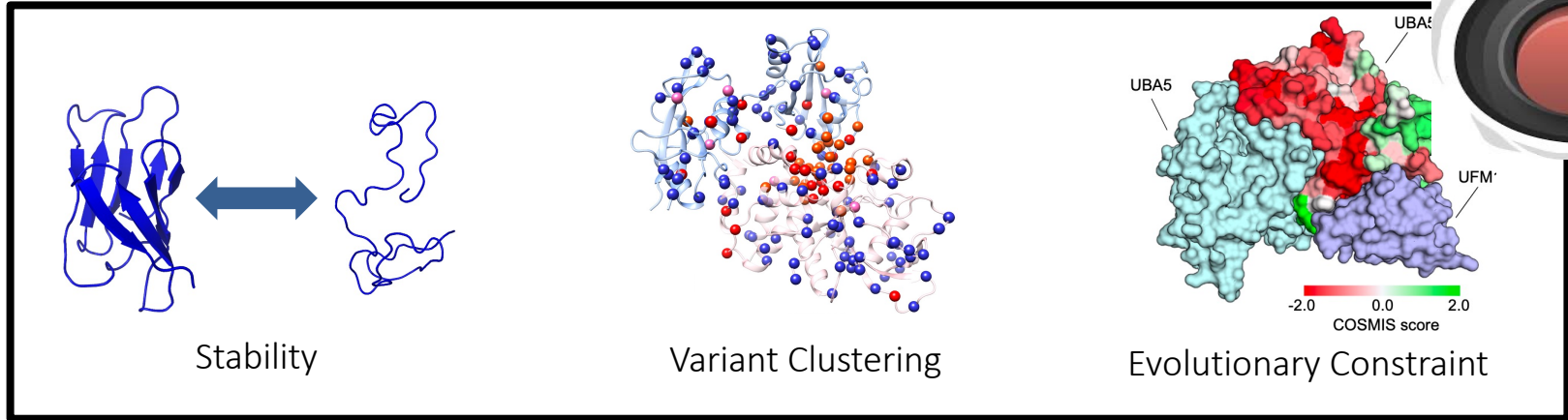


Dynamics

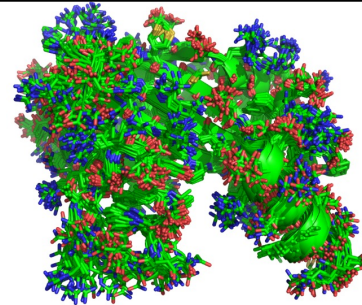
Pathogenic Proximity (PathProx)



Tools for computational interpretation of structural effects of patient variants



Interactions



Dynamics

Incorporating 3D structure improves rare variant interpretation



Jens Meiler PhD



Jonathan Sheehan PhD

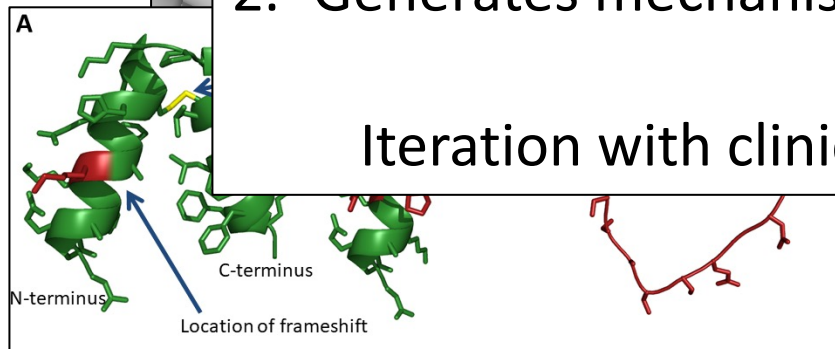


Chris Moth PhD

Personalized structural biology:

1. Valuable filter of candidate variants
2. Generates mechanistic hypotheses

Iteration with clinicians is essential.



>100 patients analyzed — **>2100** variants considered

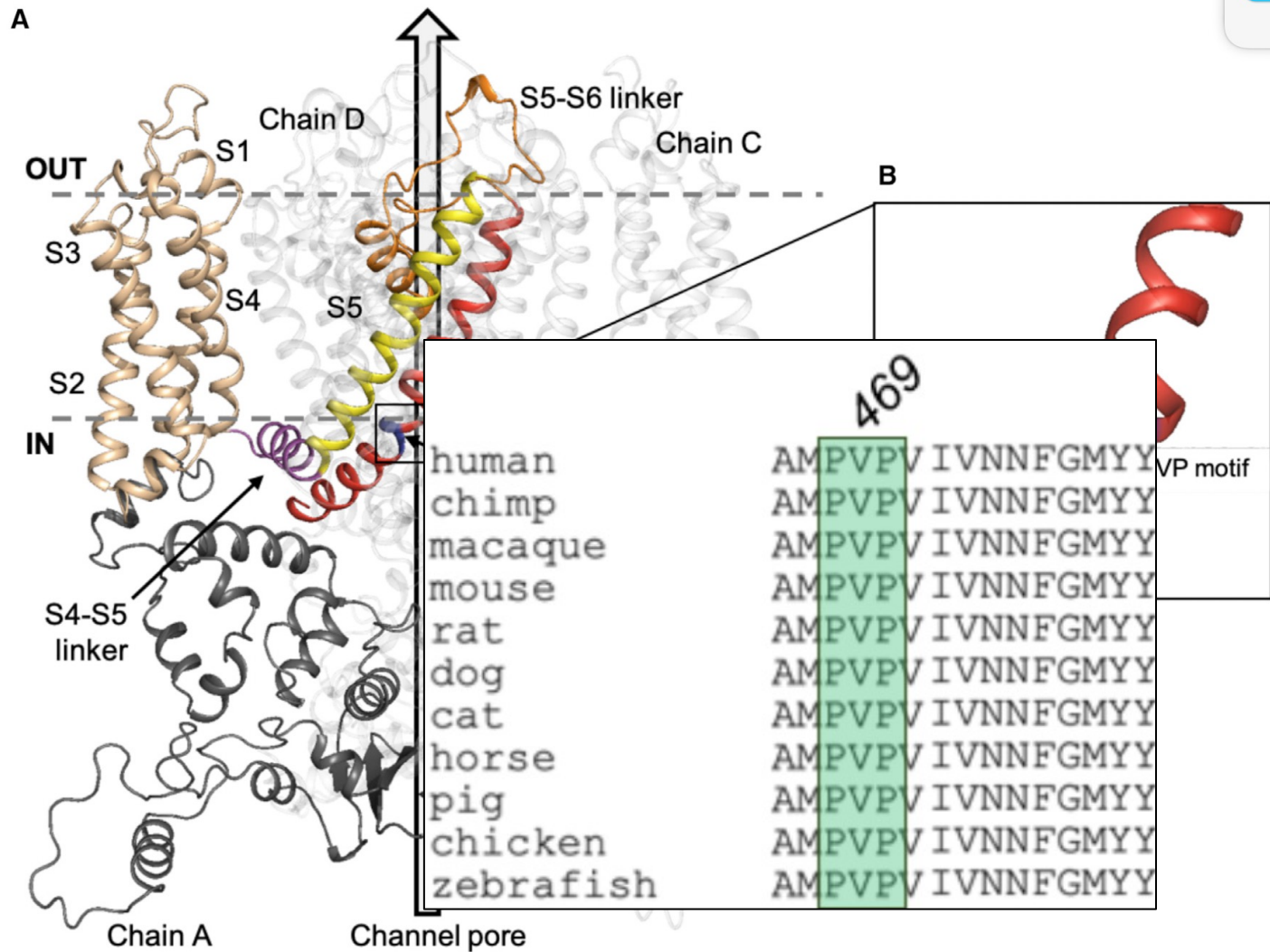
UDN Patient with DEE-like Symptoms

A 4-year-old boy at the Vanderbilt University UDN site presented with DEE-like phenotypes, including multiple types of refractory seizure and global developmental delay. Around 18 months of age, he developed generalized tonic clonic seizures, and was **diagnosed with Lennox-Gastaut syndrome**, a severe form of DEE. *However, he continued to have frequent myoclonic absence seizures and occasional generalized tonic clonic seizure.*

Negative on Athena epilepsy gene panel

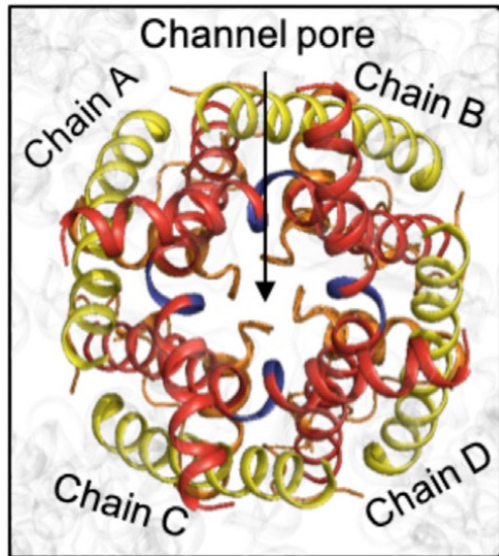
WGS reveals KCNC2 p.V469

- homo-tetrameric voltage-gated potassium channel Kv3.2
- highly expressed in GABAergic interneurons in the CNS

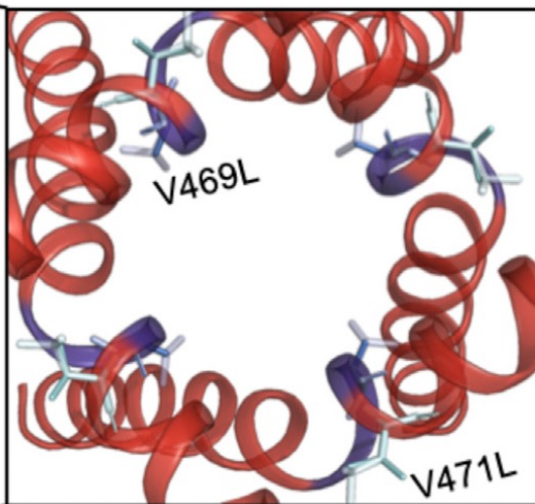


Leucine at position 469 is bulkier than native residue Valine and could block channel pore

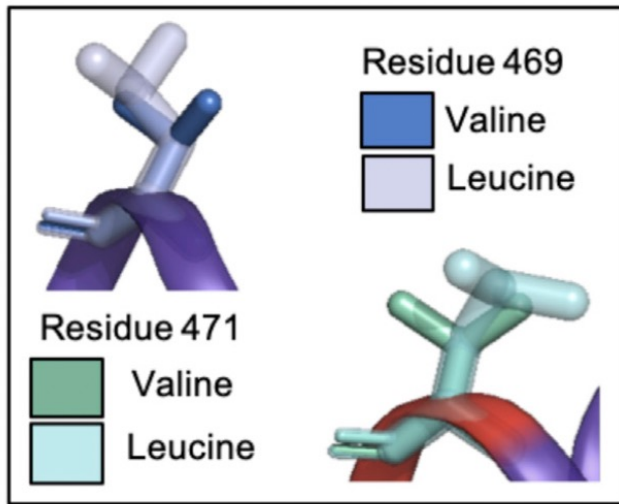
C



D

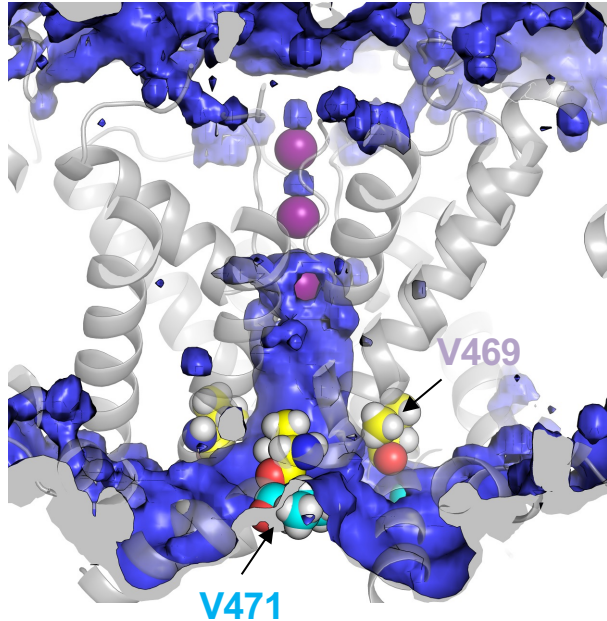


E

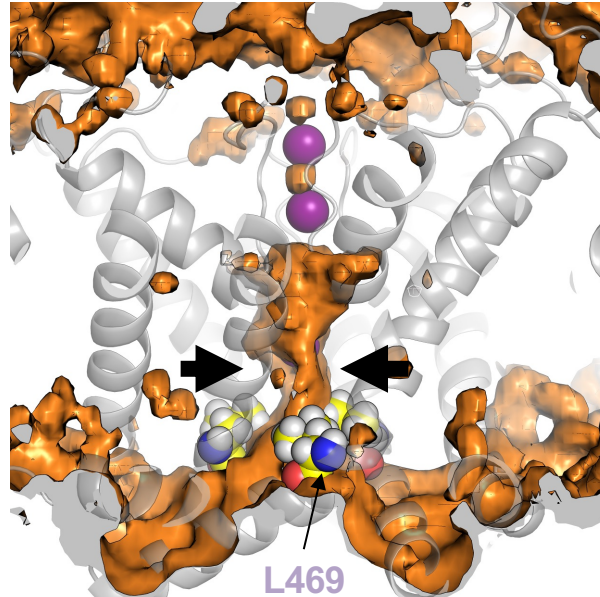


Conventional MD simulations reveal decrease in pore radius for V469L

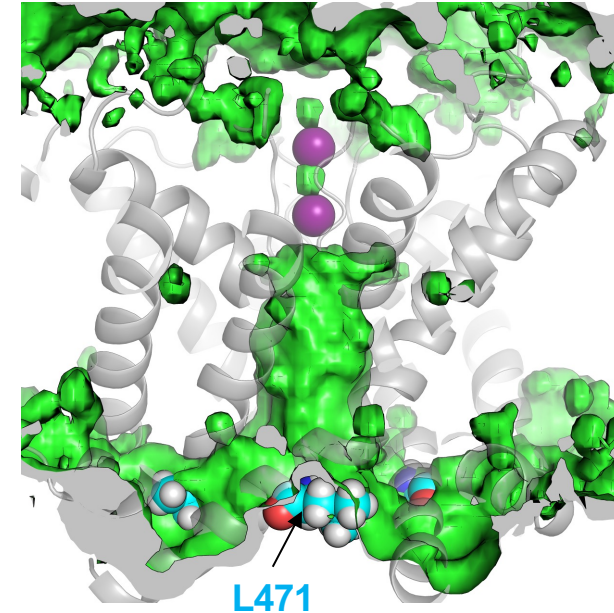
WT



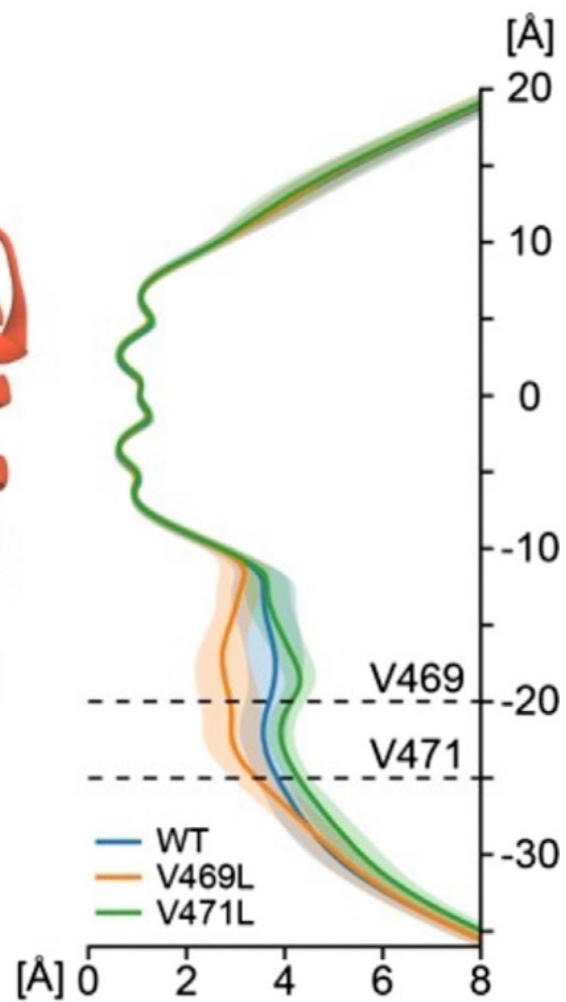
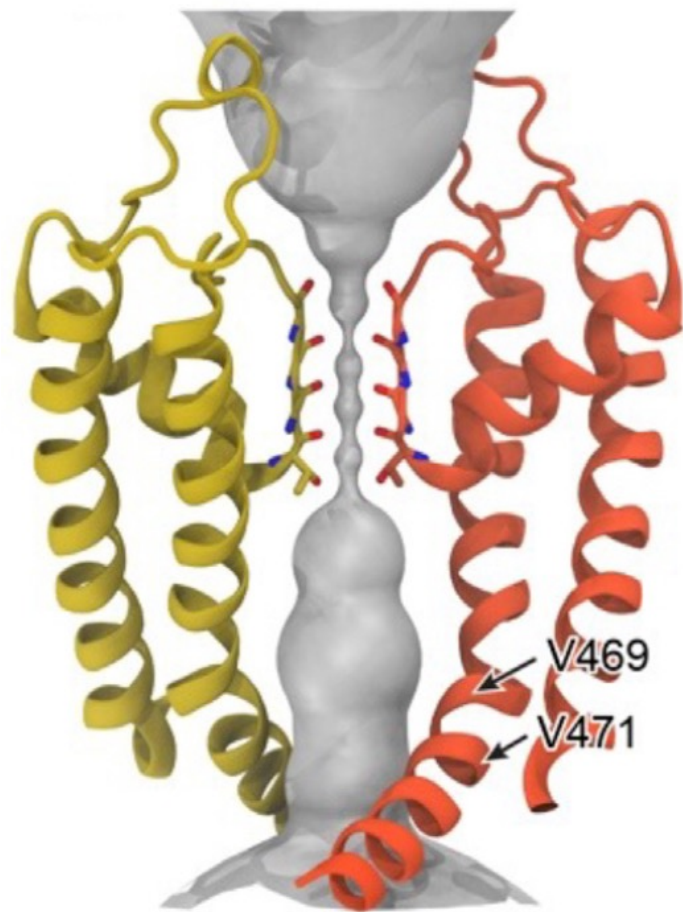
V469L

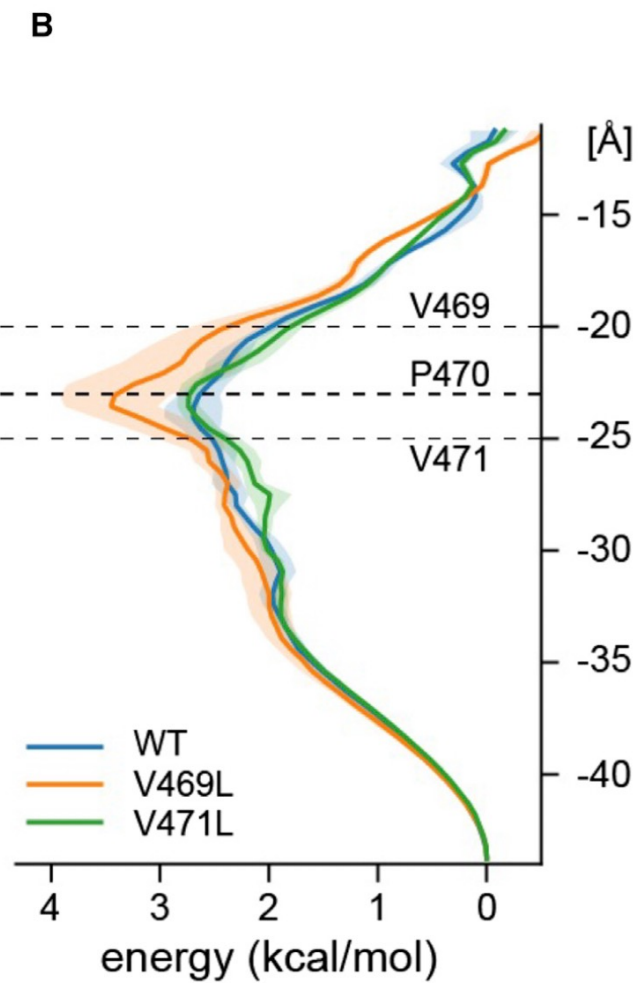
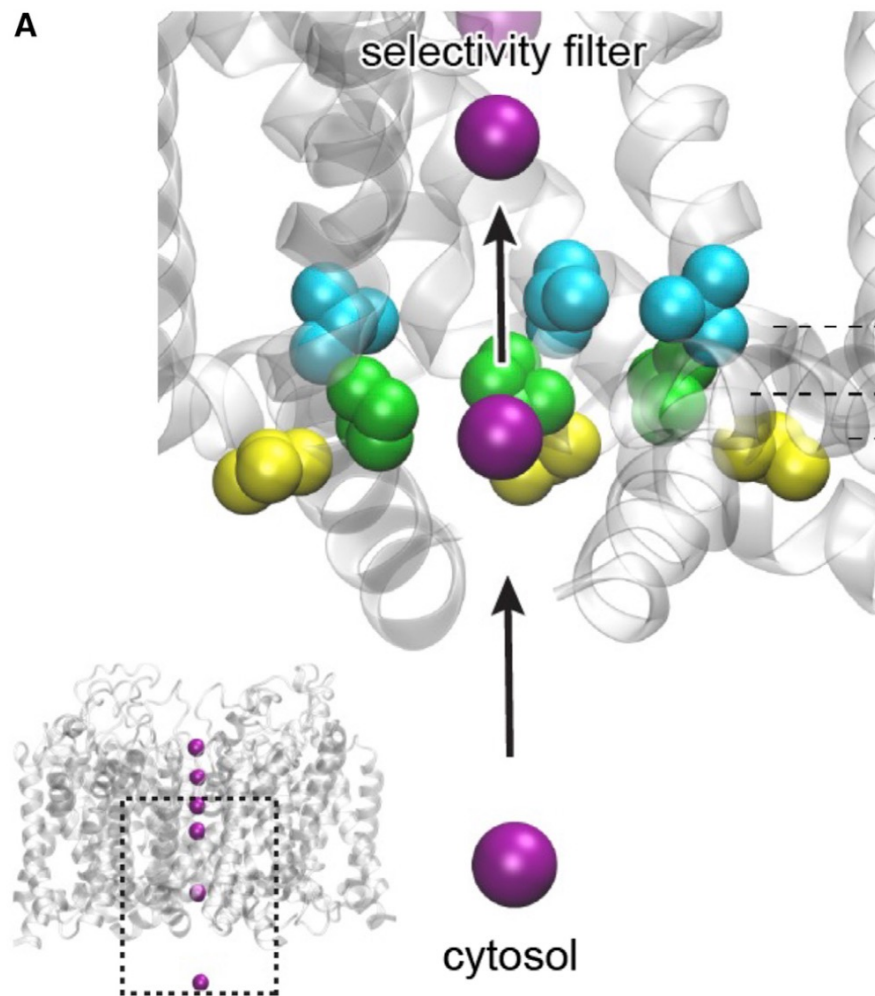


V471L



- Isosurface representation of the average spatial density of water in MD simulations of WT (blue), V469L (orange), and V471L (green).
- Constriction and dewetting of the inner cavity observed in MD simulations of V469L.
- L471 appears to stabilize S6-S6 inter-subunit interactions which help to keep the inner channel gate open.

D



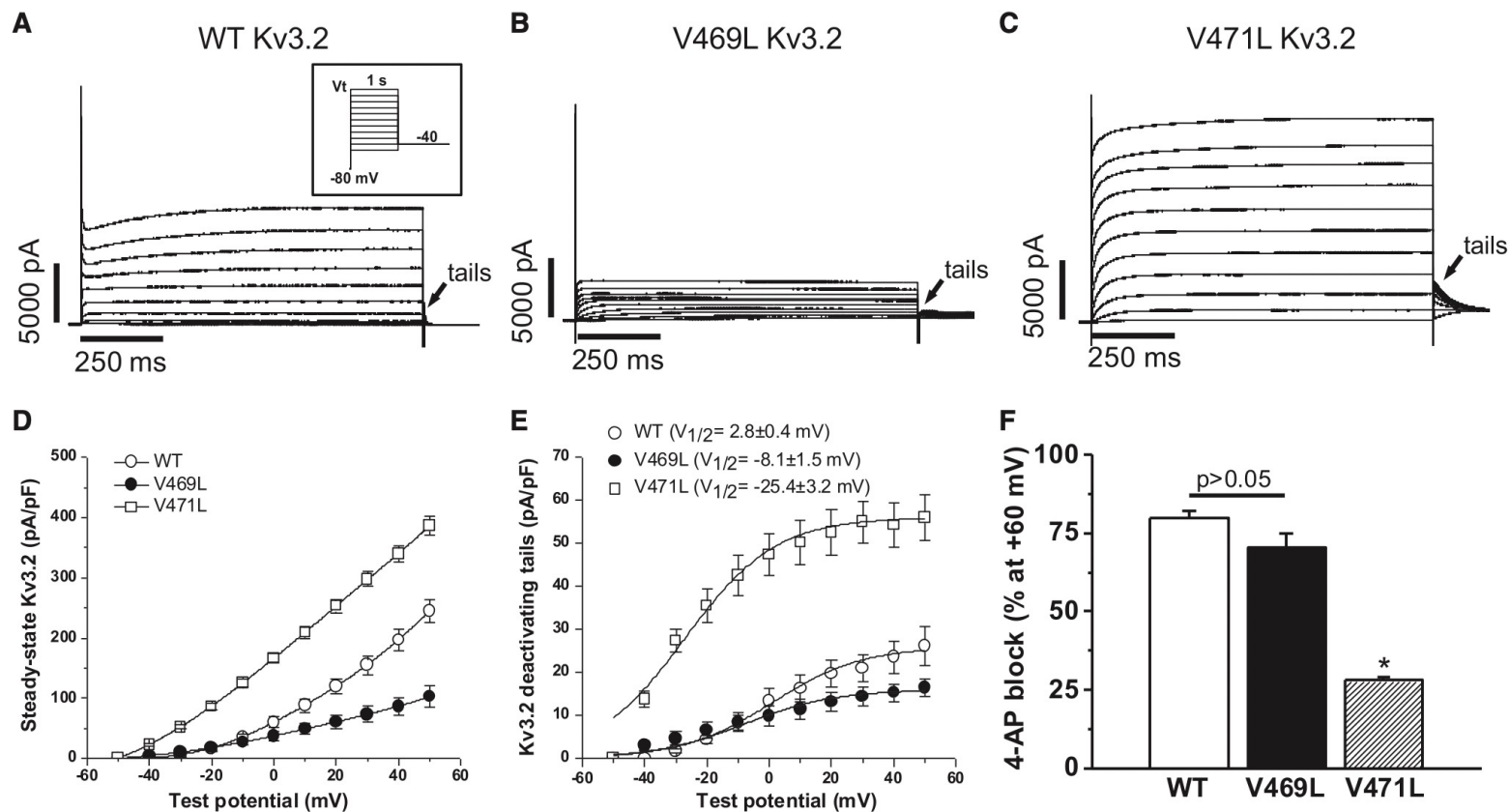
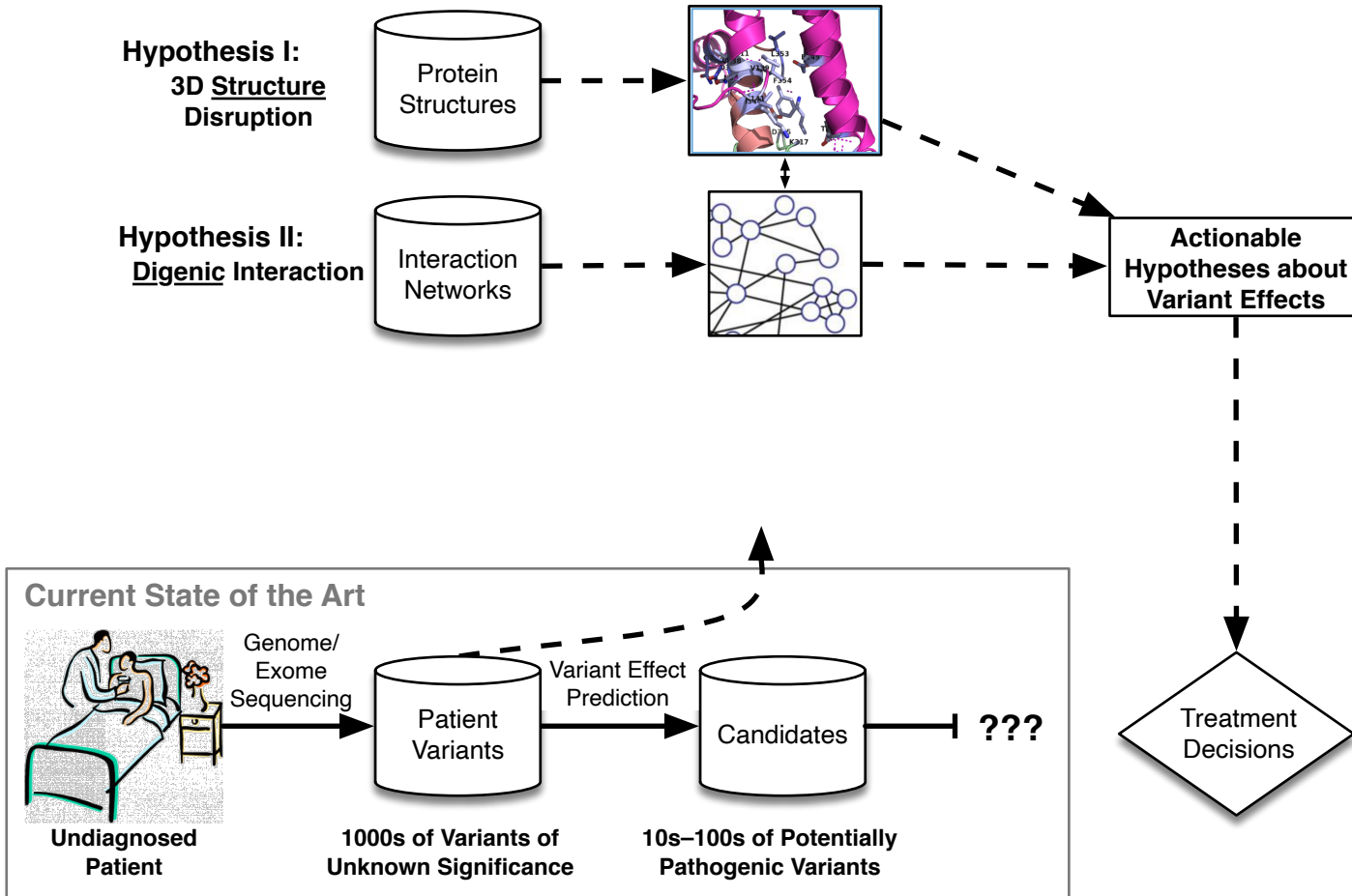
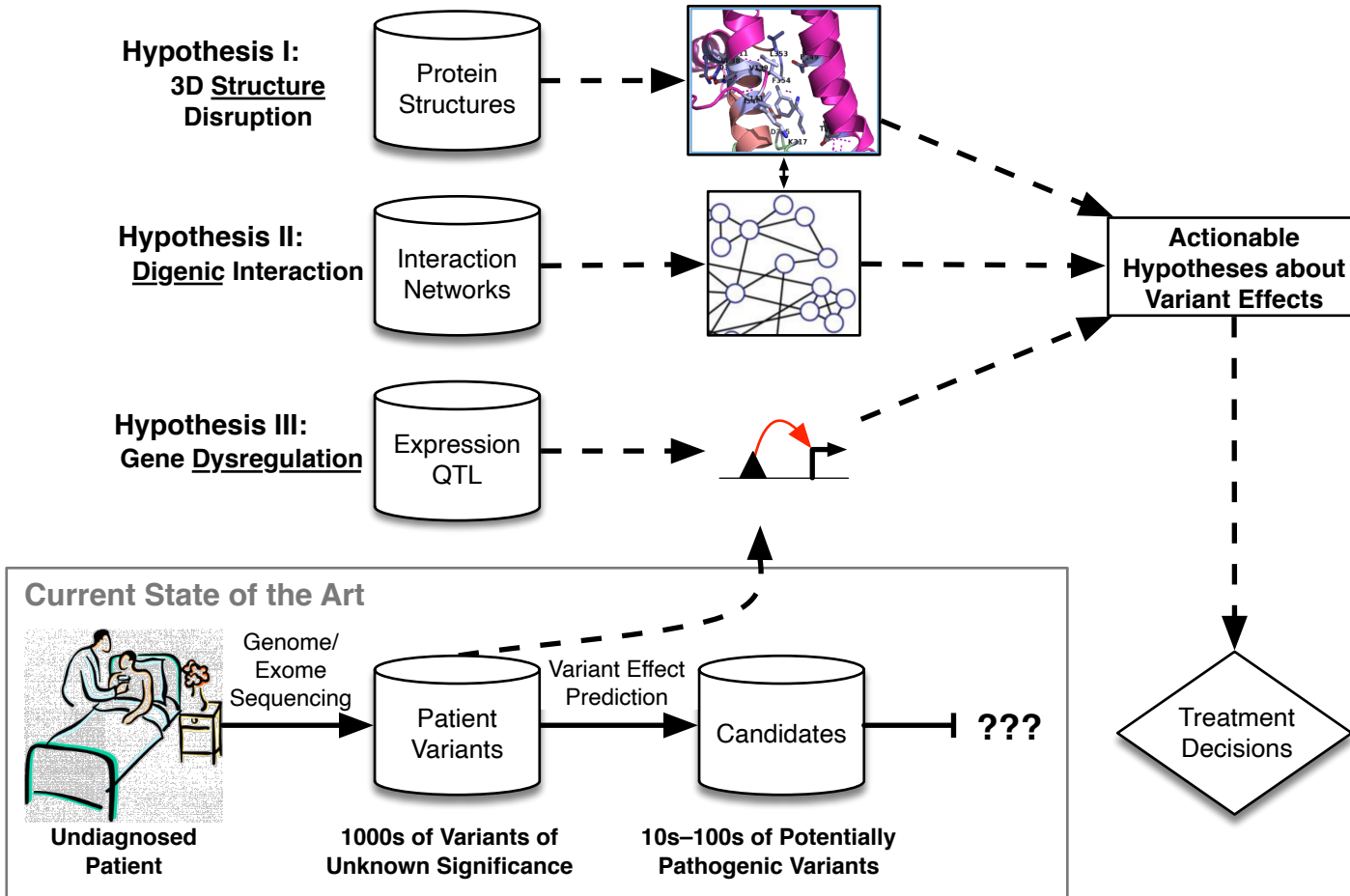


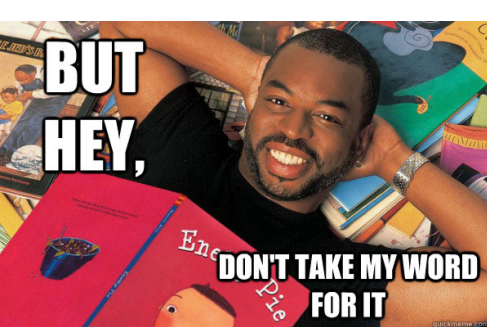
Figure 2. Candidate Kv3.2 variants cause loss and gain of channel function

KCNC2 Summary

- Protein structural modeling and MD simulations rationalize the mechanistic basis for the phenotypic heterogeneity of candidate variants
- Demonstrate heterogeneous loss-of-function and gain-of-function effects, despite both affecting the essential hinge region of Kv3.2
- Validate links between KCNC2 and heterogeneous DEE phenotypes
- Blueprint for integrating genetics, protein structural modeling, and experimental validation to develop mechanistic understanding of the molecular effects of *de novo* variants in rare disease.







<https://doi.org/10.1038/s41467-022-30936-x>

OPEN

The 3D mutational constraint on amino acid sites in the human proteome

Bian Li^{1,2}, Dan M. Roden^{2,3} & John A. Capra^{1,4}

Do available protein 3D structures reflect human genetic and functional diversity?

Gregory Sliwoski, Neel Patel, R. Michael Sivley, Charles R. Sanders, Jens Meiler, William S. Bush, John A. Capra

Personalized structural biology reveals the molecular mechanisms underlying heterogeneous epileptic phenotypes caused by *de novo* KCNC2 variants

Souhrid Mukherjee,^{1,6} Thomas A. Cassini,^{11,17} Ningning Hu,^{8,9,17} Tao Yang,^{5,17} Bian Li,^{1,5,6,17} Wangzhen Shen,⁸ Christopher W. Moth,⁶ David C. Rinker,^{4,6} Jonathan H. Sheehan,^{6,10} Joy D. Cogan,² Undiagnosed Diseases Network, John H. Newman,³ Rizwan Hamid,² Robert L. Macdonald,^{5,8} Dan M. Roden,^{5,7,15} Jens Meiler,^{4,5,6,7,12,13,14} Georg Kuenze,^{4,6,12,*} John A. Phillips,^{2,*} and John A. Capra^{1,6,7,15,16,*}

Thank you!



Funding:



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We are hiring!