

Mitochondrial Diseases

Genetics in Medicine - 0504321

2022-2023 Second Semester

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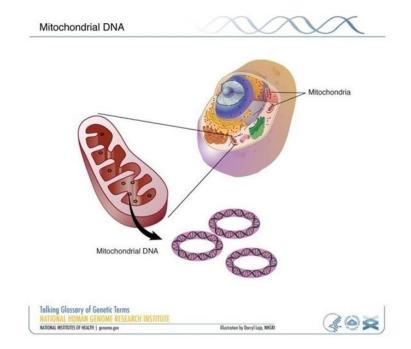
What is Mitochondrial disease?

- Range of symptoms (can be late onset) extreme tiredness, heart problems, diabetes, difficulties with mobility/ balance, deafness, epilepsy
- Symptoms depend on the ratio between mutated mitochondria to healthy mitochondria
- Mitochondrial disease can be due to mutations in nuclear DNA or mitochondrial DNA
- Diseases caused by mutations in mitochondrial DNA are inherited through the maternal line.

Mitochondrial Genetics

The mitochondria contain its own DNA

- Small 16,569 base pairs
- > 2-10 copies of mtDNA per mitochondria
- maternally inherited
- > 37 genes
 - 22 tRNAs
 - > 2 rRNA
 - > 13 proteins
- some mutations are more harmful than others
- mutations are not all or none (heteroplasmy)
- Only 13 of the ~ 1500 mitochondrial structural proteins are encoded by the mtDNA



Organization of the mitochondrial genome

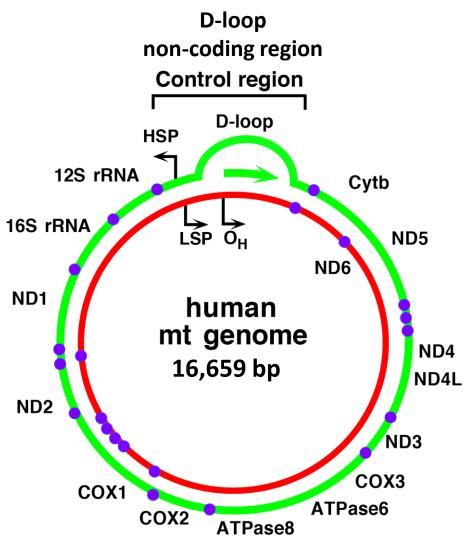
Mitochondrial genetic code has different genetic code as compared to that in nucleus

UGA = tryptophan not STOP AGA = STOP not arginine AUA = methionine not isoleucine

NO INTRONS- polycistronic mRNAs

• tRNAs

D-loop: displacement loop HSP and LSP: heavy- and light- strand promoters for transcription O_H: origin of replication



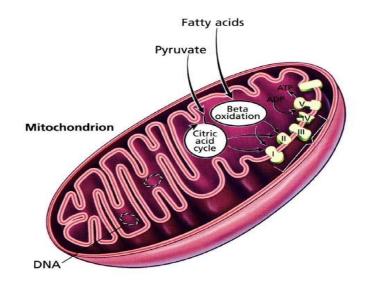
Mitochondria Functions

(1) generate ATP 🔆

(2) critical component of apoptosis

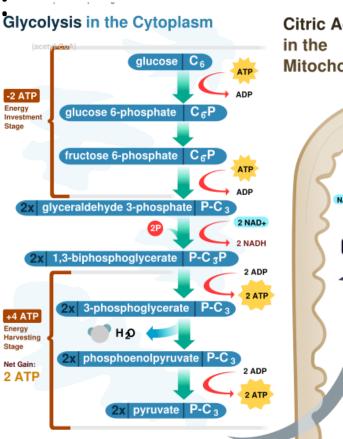
(3) generate free radicals $0_2 \implies 0_2 \bullet$

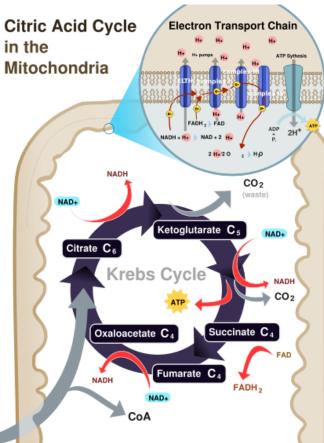
(4) Roles in most neurodegenerative diseases and some cancers



The synthesis of ATP

- From glucose and fatty acids
- 3 main processes: Glycolysis in the Cytoplasm
 - 1. Glycolysis
 - 2. Citric acid cycle
 - 3. Terminal oxidation



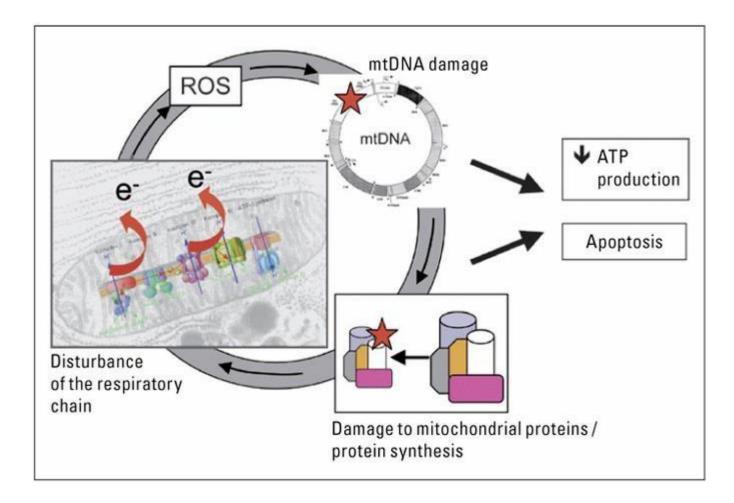


Mutation of mtDNA

No histone proteins

Weak Proofreading and repair

➢ Free radicals → damage of the DNA, proteins and of the inner membrane



MITOCHONDRIAL vs. MENDELIAN GENETICS

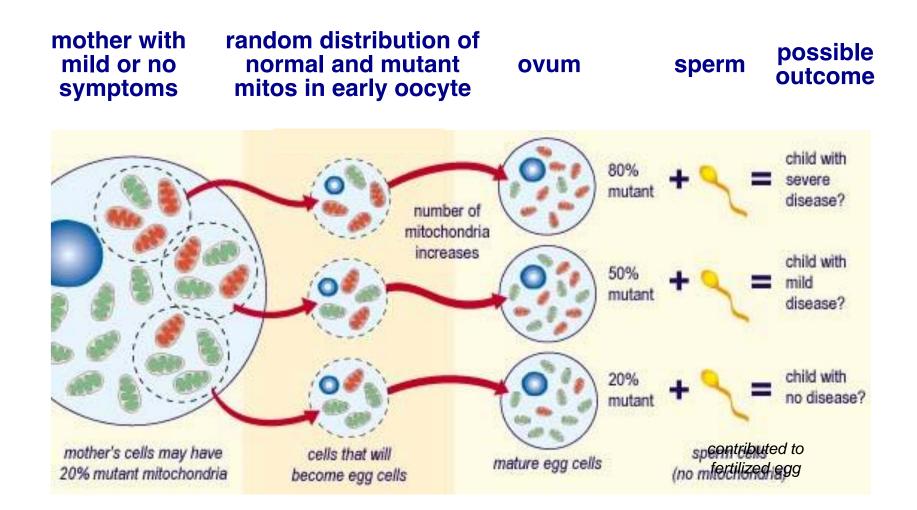
Maternal inheritance

Heteroplasmy

Stochastic (random) segregation of mtDNA

Threshold effect

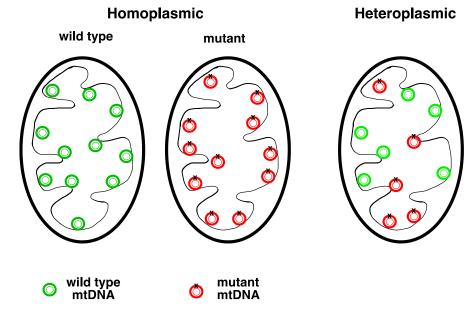
Random segregation of mitochondria and mtDNA



red mitos are mutant, green are normal

Mitochondrial DNA Mutations and Heteroplasmy

- An individual cell may contain normal and mutated mtDNA at different proprtions
- Proportions may change as cells divide and mitochondria proliferate
- ➢ Generally, the larger the percentage of mutant mtDNA molecules, the more severe the expression of the disease is



Threshold Effect

Different tissues have different energy needs and thus, a different levels of tolerance for mtDNA mutations

Examples:

<u>Tissue</u>	Evidence of disease
Fibroblasts	asymptomatic
Liver	asymptomatic
Heart	dysfunction
Brain	dysfunction
Muscle	dysfunction

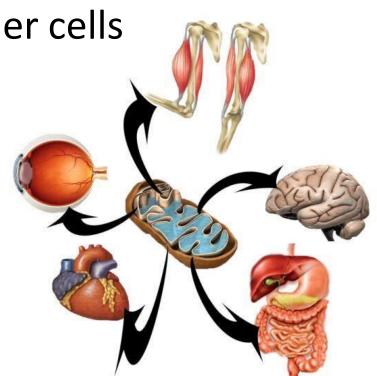
Threshold sensitivity is also affected by nuclear genetics, environment, age.

Examples of mitochondrial inherited diseases:

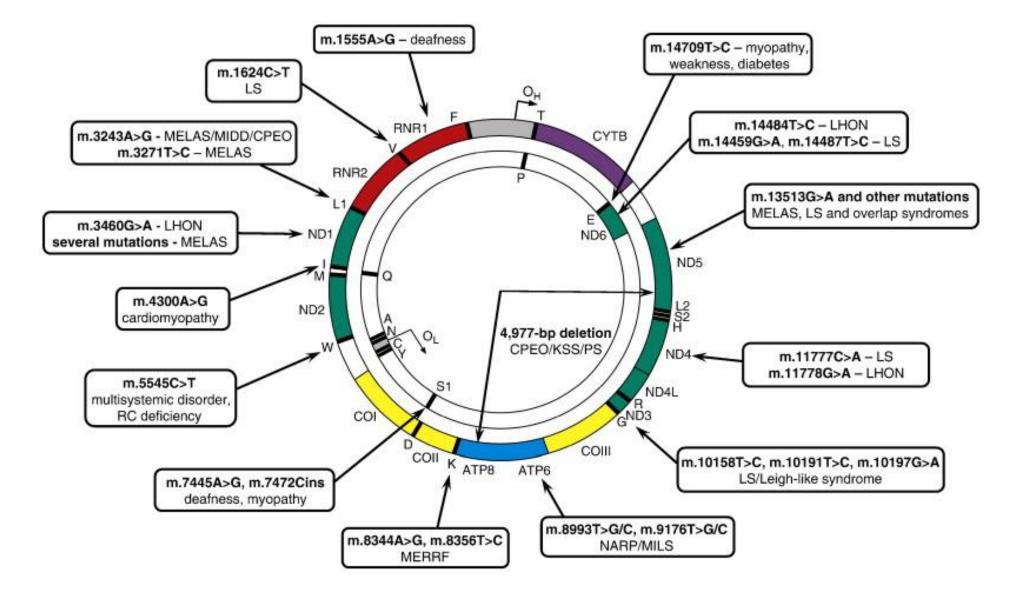
- Aminoglycoside-induced Deafness
- **KSS:** Kearns-Sayre Syndrome
- >LHON: Leber's Hereditary Optic Neuropathy
- MELAS: Mitochondrial Encephalopathy with Lactic Acidosis and Stroke-like episodes
- ► MERRF: Myoclonic Epilepsy with Ragged-Red Fibres
- MIDD: Maternally Inherited Diabetes and Deafness
- >NARP: Neuropathy, Ataxia and Retinitis Pigmentosa
- Pearson syndrome

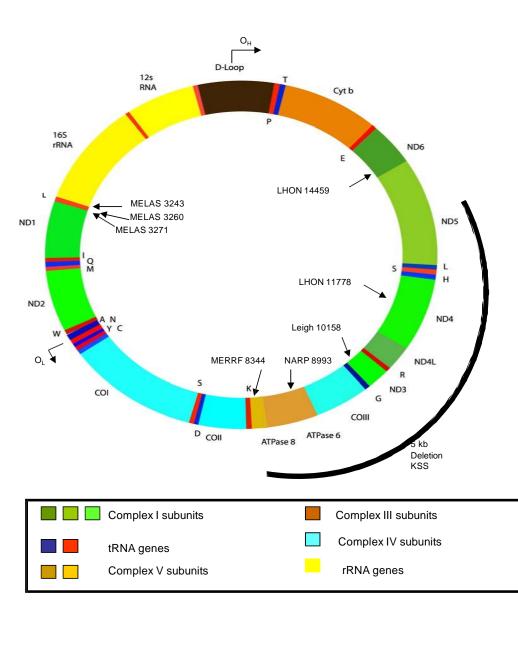
Mitochondrial diseases

- Sensory organs, muscle, heart, nervous system, pancreas,... are affected → these cells use more energy than other cells
- neurological disorders
- Diabethes mellitus
- blindness
- myopathy (muscular weakness)



Mitochondrial DNA mutations directly linked to human disease

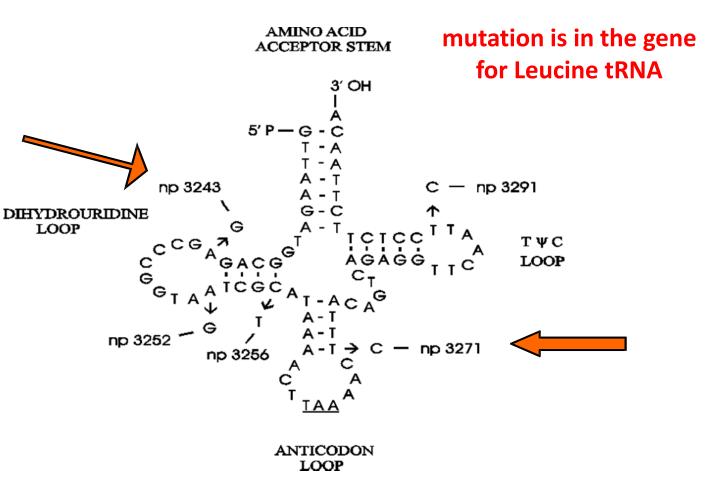




Mutation	Clinical Symptons
MELAS 3243 A→G (tRNA-leu)	Stroke-like episodes, type 2 diabetes, deafness, migraines, short stature, encephalopathy (with stress), exercise intolerance, cardiomyopathy.
MELAS 3260 A→G (tRNA-leu)	Similar to MELAS 3243 but cardiomyopathy more common, exercise induced rhabdomyolysis.
MELAS 3271 T→C (tRNA-leu)	Similar to MELAS 3243 (less common).
MERRF 8344 A→G ((tRNA- Lys)	Myoclonus, epilepsy, ataxia, dementia, deafness, neuropathy.
NARP 8993 T→C or T→G NARP/MILS	Adult: Retinitis pigmentosa, ataxia, neuropathy. Child (Leigh's syndrome): Psychomotor regression, ataxia, ophthalmoparesis, ataxic breathing, episodic vomiting and encephalopathy.
Leigh 10158 T→C ND3	Leigh's disease as above for MILS 8993.
LHON 11778 G→A ND4	Painless visual loss over weeks > months, more common in men (onset 20s).
LHON 14459 G→A ND6	LHON as above +/- dystonia.

Mitochondrial Encephalopathy with Lactic Acidosis and Stroke-like episodes (MELAS)

- > Variable Age of Onset (4 months through adult)
 - weakness and fatigability
 - Short Stature
 - Strokes and stroke-like episodes
 - > Progressive Dementia
 - Hearing loss and DM
 - > Anorexia from autonomic gut neuropathy
 - > Migraine
 - Myoclonic or tonic-clonic seizures
 - Hypertrophic > dilated cardiomyopathy
 - > Ophthalmoplegia
 - renal tubular acidosis
 - > Droopy eyelids, Short stature
- > A3243G tRNALeu (UUR) gene;
- > C3271G tRNALeu (UUR) gene
- > > 20 other mtDNA mutations causing this disorder
- Pavlakis SG, Phillips PC, DiMauro S, et al: Mitochondrial myopathy, encephalopathy, lactic acidosis, and strokelike episodes: a distinctive clinical syndrome. Ann Neurol 1984 Oct; 16(4): 481-8



Kearns-Sayre Syndrome = KSS (pp. 358-359)

- Ophthalmoplegia (paralysis or weakness of one or more
- eye muscles)
- Degeneration of pigment layer of retina
- Cardiac abnormalities
- Neurological abnormalities
- Onset at age 20 (fatal in few years)
- Large deletions (1000s bp) of mtDNA; duplications
- > Is not typically inherited, but rather is 'sporadic' (meaning
- it just seems to show up in people)

Leigh Syndrome

- > Healthy child until age 3
- Non-specific viral infection
- Lost the ability to ambulate due to ataxia, hemiparesis then bilateral hemiparesis
- > lactic acidosis
- eye movement and bulbar dysfunction
- > dystonia
- neuropathy
- some recovery over 6 months followed by deterioration
- muscle biopsy may be normal unless due to complex IV defects
- clinical: heavily CNS/PNS during the natural life span
- host of mtDNA, nDNA mutations result in this presentation
- not clear why some mutations cause Leigh Syndrome and others do not





≻ Leigh, D. :

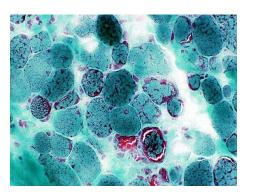
Subacute necrotizing encephalomyelopathy in an infant. J. Neurol. Neurosurg. Psychiat. 14: 216-221,

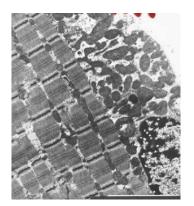
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Pearson Syndrome

- > Anemia
- Lactic acidosis
- Sideroblastic anemia
- > digestive problems
- > moderate mental retardation
- > Myopathy, neuropathy
- > progressive hearing loss
- diabetes mellitus
- heart block,
- > cardiomyopathy







Mitochondrial Transfer (Therapy options)

