

Accurately resolving copy number variation in highly homologous *SMN1* and *SMN2* genes using next-generation sequencing and rhPCR

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Introduction

Spinal muscular atrophy (SMA) is a neuromuscular disorder characterized by progressive degeneration of spinal cord motor neurons, atrophy of skeletal muscles, and generalized weakness. The clinical phenotype ranges from a severe infantile form with a limited life expectancy to an adult-onset mild form of the disease. In the majority of cases, the disease is caused by the homozygous absence of the survival motor neuron 1 (*SMN1*) gene. The highly homologous survival motor neuron 2 (*SMN2*) gene differs from *SMN1* by a single coding nucleotide resulting in a splicing defect and reduced *SMN2* function. *SMN2* copy number is a modifier of disease severity. Patients with a higher *SMN2* copy number usually present with a milder clinical phenotype. To address the clinical importance of accurate and efficient *SMN1* and *SMN2* copy number analysis, we developed a custom bioinformatic analysis based on next-generation sequencing (NGS) data combined with a novel RNase H2-dependent PCR (rhPCR) for confirmation analysis.

NGS-based Bioinformatic Analysis

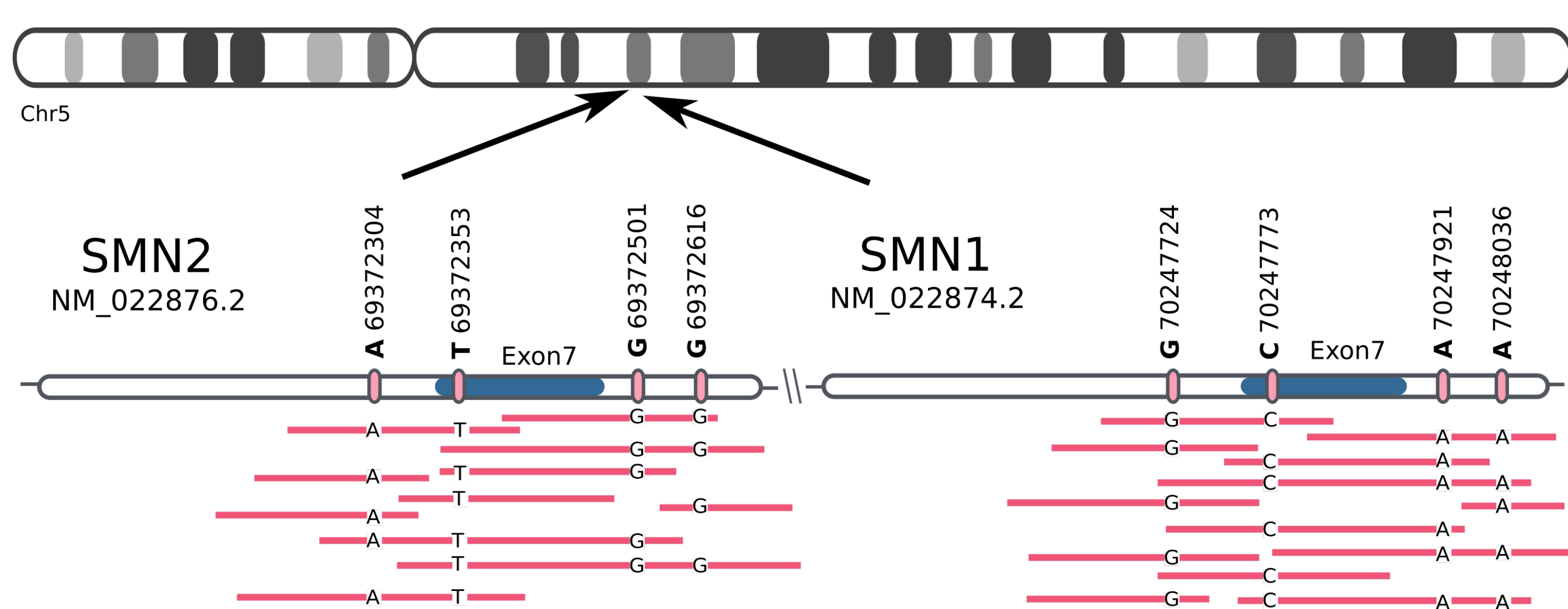


Figure 1. Whole exome sequencing was performed using the IDT xGEN Exome Research Panel with added custom clinical content and the Illumina NovaSeq platform. Bioinformatic *SMN1* and *SMN2* copy number analysis was based on calculating sequence read ratios at four nucleotide positions differing between the genes and inferring the copy numbers in relation to the normalized total *SMN* coverage modifying a previously published method [1]. Chromosomal positions are given in the Hg19 reference genome.

RNase H2-dependent PCR

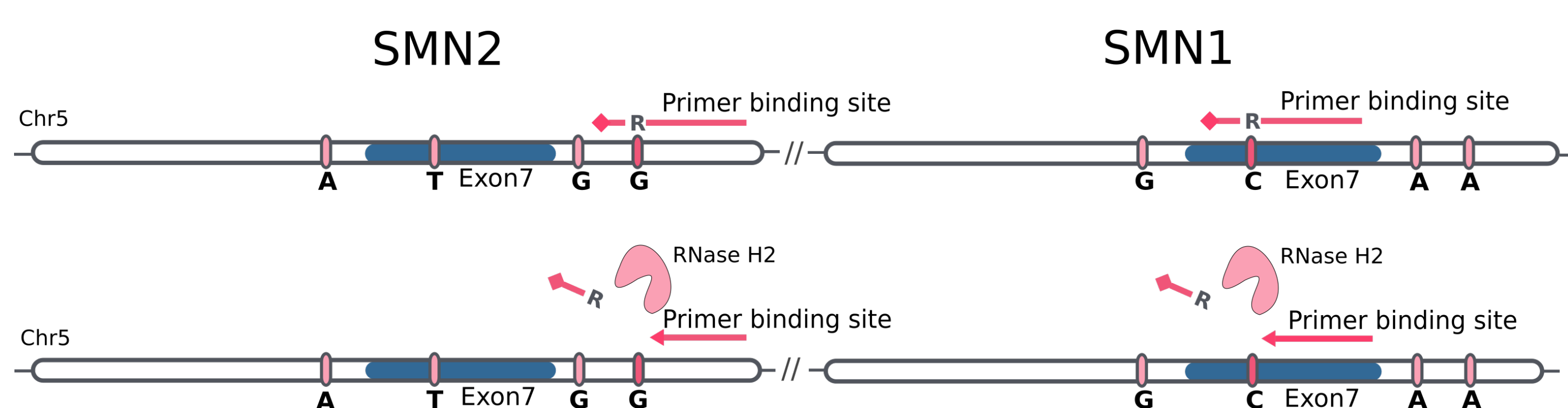


Figure 2. rhPCR utilizes blocked primers that are activated by RNase H2 enzyme after their hybridization to the target sequence [2]. RNA modification in the primer targeting a mismatched base allows improved discrimination between highly homologous sequences. Signal detection was based on 5'nuclease fluorescent probes and gene copy numbers were calculated using the $\Delta\Delta C_t$ method similar to a standard quantitative PCR.

Results

Table 1. Analytical validation of bioinformatic and rhPCR methods by using 27 Coriell reference samples with known *SMN1*/*SMN2* copy numbers.

Copy number	NGS-based analysis identified correctly	rhPCR identified correctly
<i>SMN1</i>		
0	6/6	5/5
1	10/10	10/10
2	6/6	5/5
≥ 3	5/5	4/5
<i>SMN2</i>		
1	1/1	1/1
2	2/2	1/1
≥ 3	4/4	4/4
Accuracy	100.0%	96.8%
Sensitivity	100.0%	96.0%
Specificity	100.0%	100.0%

Table 2. Analysis of 89 clinical samples (55 blood, 6 saliva, 28 primary DNA) showed high concordance between the methods for *SMN1* copy numbers 0-2 and *SMN2* copy numbers 0-3 or higher. Performance of the methods was not affected by the sample material.

Copy number	Number of samples	Number of concordant calls between NGS and rhPCR	Concordance
<i>SMN1</i>			
0	2	2	100%
1	1	1	100%
2	70	69	99%
≥ 3	16	6	38%
<i>SMN2</i>			
0	9	9	100%
1	27	27	100%
2	48	48	100%
≥ 3	5	5	100%

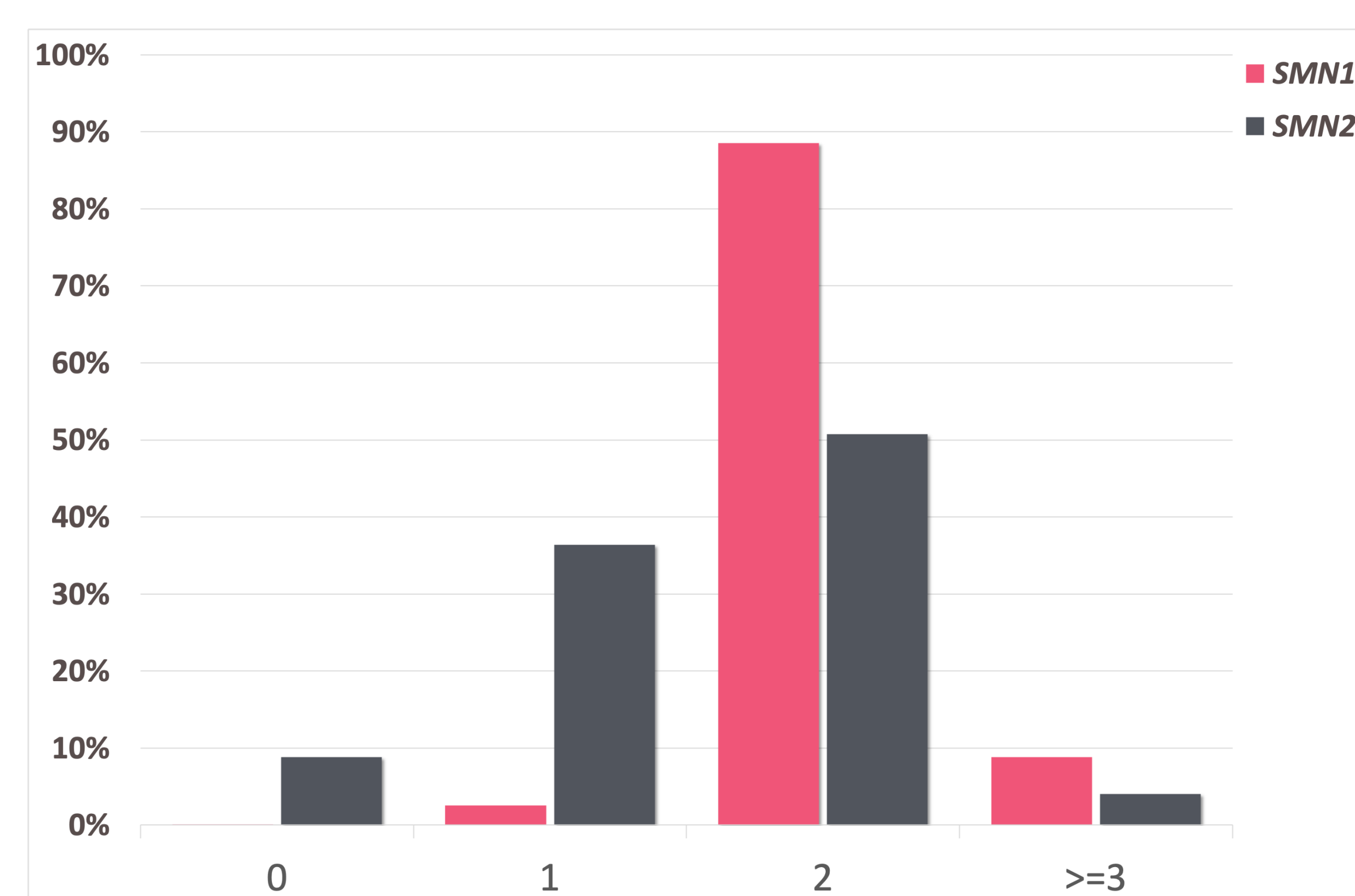


Figure 3. Frequencies of *SMN1* and *SMN2* copy numbers in 2196 de-identified samples submitted to Blueprint Genetics for genetic testing. Copy numbers were analyzed using whole exome sequencing data. Heterozygous *SMN1* deletion was observed in 2.6% of the samples, which is in agreement with frequencies reported earlier [3].

Summary

We have established an accurate and high-throughput approach to test for *SMN1* and *SMN2* copy numbers in blood and saliva samples enabling diagnostics of SMA and application of novel therapeutic strategies.

References:

- Feng Y, Ge X, Meng L et al. The next generation of population-based spinal muscular atrophy carrier screening: comprehensive pan-ethnic *SMN1* copy number and sequence variant analysis by massively parallel sequencing. *Genet Med* 2017;19:936-44.
- Dobosy JR, Rose SD, Beltz KR et al. RNase H-dependent PCR (rhPCR): improved specificity and single nucleotide polymorphism detection using blocked cleavable primers. *BMC Biotechnol* 2011;11:80.
- Larson JL, Silver AJ, Chan D et al. Validation of a high resolution NGS method for detecting spinal muscular atrophy carriers among phase 3 participants in the 1000 Genomes Project. *BMC Med Genet* 2015;16:100.