

Summer school 2021

Orphan disease: A 4-year-old boy with an unknown muscle disease



*Photo: The patient with his father (right) and the medical doctors/(clinician-)scientists (left).
Copyright Ivar Pel, 2018.*

© 2021

The copyrights of this syllabus are held by the University Medical Center Utrecht. No part of this document may be reproduced and / or made public by means of print, photocopy, microfilm or in any other way, nor stored in a data retrieval system, without the prior written permission of the UMC Utrecht.

Coordinator:

Dr. N. Bovenschen
UMCU Department of Pathology
Heidelberglaan 100
3584 CX Utrecht
Tel: 088-7553889
Secretary: 088-7556565 (Ms E. Post)
E-mail: n.bovenschen@umcutrecht.nl
E-mail (secr.): e.t.m.post@umcutrecht.nl

Staff:

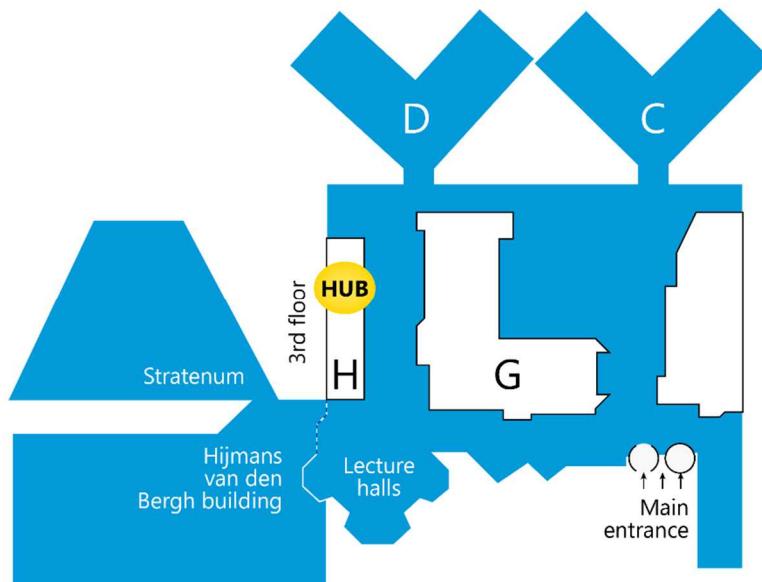
Dr. N. Bovenschen	Pathology-UMCU	n.bovenschen@umcutrecht.nl
Dr. T. ten Broeke	Pathology-UMCU	A.G.tenBroeke-2@umcutrecht.nl 0648114432
Drs. S. Crnko	Pathology-UMCU	s.crnko@umcutrecht.nl 0627548184
Emma Pijnappel, Bsc	Pathology-UMCU	E.W.Pijnappel-2@umcutrecht.nl 0610425310
Jan Meeldijk	Pathology-UMCU / CTI	J.Meeldijk@umcutrecht.nl

Preface

Welcome to the first edition of the Bachelor Research Hub Summer school, taking place in the newly equipped laboratory positioned in the heart of the University Medical Centre Utrecht. During the 2-week period you will be performing an authentic and real-world actual research under supervision of professionally trained teacher-researchers. You will experience a “crash-course” in the scientific world: from thinking about the topic, investigating the current literature, and writing a short project proposal, to conducting the experimental part of the research, and finally presenting and discussing your data. Sharing your findings and knowledge is always an important part of the research, therefore it is useful to get acquainted with it and practice it at the very start of your scientific careers.

The topic of the Summer school will revolve around a four-year-old boy with an unknown (orphan) disease. The boy suffers from muscle weakness and inadequate muscle reflexes with signs of floppy infant syndrome. This hinders his every-day life as well as his development due to the tiredness and frequent need for a wheelchair. While many diseases have been ruled out by extensive medical testing, no diagnosis has yet been established and the cause of the patient’s disease remains unknown. The first insights towards unravelling the mechanisms behind the disease were hinted via whole-genome sequencing where a previously unrecognized single-nucleotide change in the patient’s genomic DNA was revealed. During the course, you will continue investigating this disease by incorporating your own ideas and choosing your own research paths. As a starting point, see the brief proposal below.

We wish to welcome you to our laboratory where, with a support of many supervisors, you can get a glimpse of the real scientific world. Happy researching!



Location: Bachelor Research Hub (H03.201), UMC Utrecht (Heidelberglaan 100, 3584 CX Utrecht)

With kind regards,

Niels Bovenschen, Toine ten Broeke, Sandra Crnko, Emma Pijnappel and Jan Meeldijk

Literature

The following articles and videos will give you an insight into the topic and techniques you will be using during the Summer school.

1. How a four-year-old boy connects healthcare, biomedical research and undergraduate education

Rijkent H Drost, Wim J A G Dictus, Berent J Prakken, Niels Bovenschen

Nat Biotechnol. 2019 Sep;37(9):1092-1095.

<https://pubmed.ncbi.nlm.nih.gov/31485047/>

2. Bachelor Research Hub

<https://www.youtube.com/watch?v=PmBeLLvpXHw>

3. Western blot tutorial

<https://www.youtube.com/watch?v=CEEekahiqMo>

4. Cell culture tutorial

<https://www.thermofisher.com/nl/en/home/references/gibco-cell-culture-basics/introduction-to-cell-culture.html>

5. Flow cytometry tutorial

<https://www.youtube.com/watch?v=sfWWxFBItpQ>

Schedule

Week July 5th-9th:

Monday:

1. Gathering at the main entrance of UMC Utrecht	08:55-09:00h	Everyone
2. Introduction to the Summer school	09:00-09:15h	N. Bovenschen
3. Introduction of the topic	09:15-10:00h	N. Bovenschen
4. Hypothesis formulation, planning and preparations	10:15-17:00h	Students

Tuesday:

1. Lab journal	09:00-09:30h	T. ten Broeke
2. Discussion of the hypothesis and planned lab work	09:30-10:00h	Everyone
3. Lab work*	10:15-17:00h	Students

Wednesday:

1. Lab work	09:00-17:00h	Students
-------------	--------------	----------

Thursday:

1. Lab work	09:00-17:00h	Students
-------------	--------------	----------

Friday:

1. Recap results (short ppt) + Planning for the next week	09:00-09:45h	Everyone
2. Lab work	10:00-17:00h	Students

Week July 12th-16th:

Monday:

1. Lab work	09:00-17:00h	Students
-------------	--------------	----------

Tuesday:

1. Lab work	09:00-17:00h	Students
-------------	--------------	----------

Wednesday:

1. Lab work	09:00-17:00h	Students
-------------	--------------	----------

Thursday:

1. Lab work	09:00-17:00h	Students
-------------	--------------	----------

Friday:

1. Presentation preparation	09:00-15:00h	Students
2. Final presentation (30min+discussion)	15:15-16:00h	Students
3. Closing remarks	16:00-17:00h	N. Bovenschen

*Lab work includes: molecular biology, cell culture, Western blot, Flow cytometry, etc

Proposal

Investigating the cause of congenital muscle weakness by studying phosphorylation of Pyk2 and FAK

Abstract

A *de novo* point mutation in the protein Pcdh- γ , V694A, has been found in a patient suffering from muscle weakness. Pyk2 and FAK are kinases that interact with Pcdh- γ and are involved in intracellular signaling related to neuronal function. Mutation could potentially impair the binding of Pcdh- γ to Pyk2 and/or FAK, thereby increasing phosphorylation of these kinases and causing neuronal defects.

Introduction

A patient (age 4) has suffered from severe muscle weakness since birth, experiencing reduced muscle tonus and delayed development. After birth a small visage, disproportionately large extremities, *pectus excavatum*, heart murmurs, a small palate and low birth weight were noted. Physiotherapy and supplementary feeding improved the patient's condition, resulting in him being able to sit and walk on his own.

Multiple tests were used to determine the cause of this phenotype. MRI-scans of the brain, metabolic testing and genomic tests specific for Angelman syndrome and Williams syndrome showed no abnormalities. Analysis of a muscle biopsy taken at the age of two revealed a significant increase in type C2 muscle fibers, a sign of muscle development and/or regeneration. The muscle fibers were overall smaller and more spaced out, while in certain regions myofibril destruction and loss of mitochondria were noted.

After previous testing being inconclusive, Whole Exome Sequencing (WES) was performed. This resulted in the detection of one possibly significant mutation in the gene PCDH γ B3, located on chromosome 5. It concerns a T2081C *de novo* mutation resulting in the amino acid substitution V694A. The PCDH γ B3 gene encodes for protocadherin gamma B3, which is part of the protocadherin gamma gene cluster. Protocadherin gamma is a transmembrane protein that is part of the cadherin superfamily found in multiple species, for example Rhesus macaques (*Macaca mulatta*)¹. It is predominantly located in synapses², although it is also present in other tissues such as skeletal muscle³. The extracellular domain of this protein binds to other protocadherins, while the intracellular domain prevents autophosphorylation of the kinases FAK and Pyk2 (figure 1)⁴. Protocadherin gamma is believed to play a critical role in the formation of synaptic connections. This notion is supported by reduced synapse formation and increased synapse apoptosis in mice lacking this gene cluster². Inhibition of FAK and Pyk2 auto-phosphorylation also stimulates development of neural dendrites.⁴ This makes the mutant PCDH γ B3 allele a likely contributor to the phenotype of our patient, and thus an interesting target for further research.

Aim of the study

The aim of the study is therefore to determine the influence of V694A mutated PCDH γ B3 on the amount of phosphorylation of downstream effector proteins FAK and Pyk2 compared to the wild type protein.

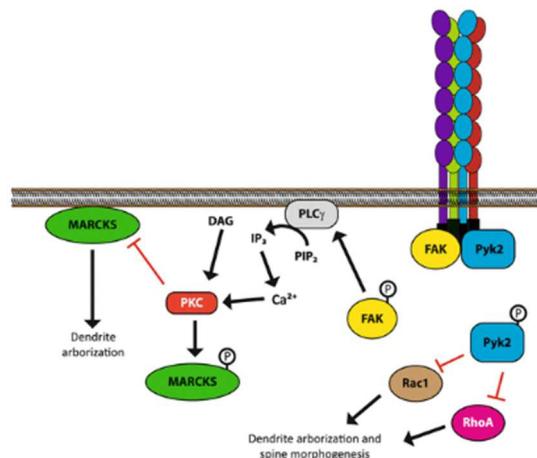


Fig. 1: Downstream signaling cascade of PCDH γ B3: FAK and Pyk2 directly bind to PCDH γ B3 intracellularly⁴.

Methods

First, both the wild type PCDHyB3 gene and mutant (V694A) PCDHyB3 gene will be multiplied by infecting *E. coli* bacteria with the corresponding plasmids. From these colonies plasmids containing the wild type/mutant PCDHyB3 gene are isolated. Then, the plasmids are transiently transfected into separate HeLa cells. The protocadherins will be expressed after 24 hours, so the HeLa cells will be incubated for 24 hours. The HeLa cells will then be lysed using SDS-buffer, after which the isolated proteins will be run on a SDS-PAGE gel. Thereafter, the protein solution will be transferred to a Western Blot to identify FAK and Pyk2. This is done with fluorescently labelled monoclonal antibodies specifically binding to the phosphorylated proteins and antibodies binding to both the phosphorylated and unphosphorylated versions. Based on the ratio between both bands, the rate of phosphorylation can be determined semi-quantitatively.

Anticipated results

The rate of phosphorylation of the downstream effector proteins FAK and Pyk2 is measured for both cultures. The expectation is that the amount of phosphorylation of both FAK and Pyk2 will be higher in the HeLa cells transfected with mutant PCDHyB3 (V694A) compared to the HeLa cells transfected with wild type PCDHyB3. This indicates that the activity of mutant PCDHyB3 is lower than the activity of wild type PCDHyB3.

Discussion:

The assumption is made that PCDHyB3 will be absent in the wild type HeLa cells. Research of Han *et al*⁵ showed transfection of HeLa cells with the PCDHyB3 gene. However, it is not proven that HeLa cells do not contain the PCDHyB3 gene. Absence of this protein in the cell line is important, as native PCDHyB3 proteins will also inhibit autophosphorylation, influencing the results. Secondly, it is important that downstream proteins FAK and Pyk2 are present in the HeLa-cells, as they need to be phosphorylated by the PCDHyB3 protein. Several studies do indicate that both downstream proteins are present in HeLa-cells^{6,7}.

References

1. NCBI. Ortholog_gene_56102 [internet]. Available from: [https://www.ncbi.nlm.nih.gov/gene/?Term=ortholog_gene_56102\[group\]](https://www.ncbi.nlm.nih.gov/gene/?Term=ortholog_gene_56102[group]) [Accessed 15rd Octobre 2018]
2. Weiner J.A., Wang X., Tapia J.C., and Sanes J.R. Gamma protocadherins are required for synaptic development in the spinal cord. Proc Natl Acad Sci U S A. 2005;102(1):8-14.
3. Hangelbroek R.W., Fazelzadeh P., Tieland M., Boekschoten M.V., Hooiveld G.J., van Duynhoven J.P. et al. Expression of protocadherin gamma in skeletal muscle tissue is associated with age and muscle weakness. J Cachexia Sarcopenia Muscle. 2016;7(5):604-614.
4. Mah K.M., Weiner J.A. (2016) Clustered Protocadherins. In: Suzuki S., Hirano S. (eds) The Cadherin Superfamily. Springer, Tokyo.
5. Han M.H., Lin C., Meng S., Wang X. Proteomics Analysis Reveals Overlapping Functions of Clustered Protocadherins. Mol Cell Proteomics. 2010;9(1):71-83.
6. Da Costa P.E., Batista W.L., Moraes M.S., Stern A., Monteiro H.P. Src kinase activation by nitric oxide promotes resistance to anoikis in tumour cell lines. Free Radic Res. 2018;52(5):592-604. doi: 10.1080/10715762.2018.1455095.
7. Shi C.S., Sinnarajah S., Cho H., Kozasa T., Kehrl J.H. G13alpha-mediated PYK2 activation. PYK2 is a mediator of G13alpha -induced serum response element-dependent transcription. J Biol Chem. 2000;11;275(32):24470-6.