

# Understanding the science and technology of whole genome sequencing

Dag Undlien

Department of Medical Genetics

Oslo University Hospital

University of Oslo

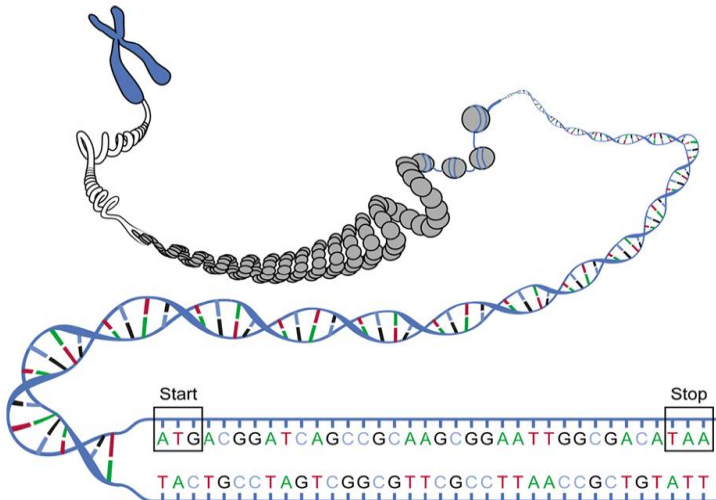
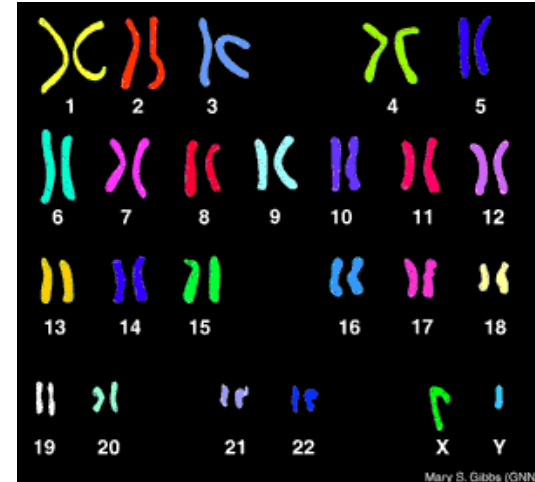
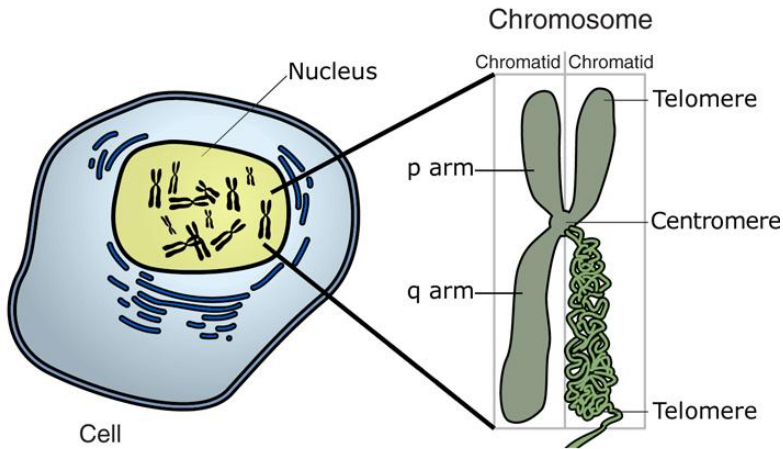
and

The Norwegian Sequencing Centre

[d.e.undlien@medisin.uio.no](mailto:d.e.undlien@medisin.uio.no)

# DNA sequencing technology

# DNA



↳ 4 bases - A, G, C, T

GATC  
CTAG

↳ Human **genome** ~3 billion bases

↳ How can we read the sequence of bases?

# DNA sequencing

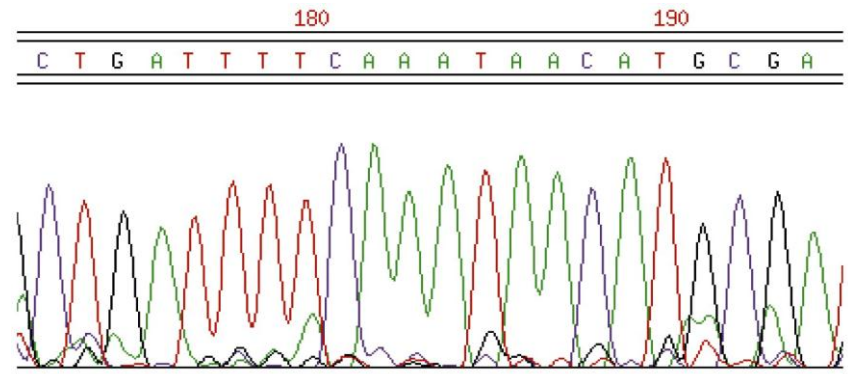
Mimic the way DNA replication occurs in living cells in a test tube.

Monitor the chemical reactions that take place

- 1 Sanger sequencing

- 2 Detect nucleotide extension with radioactivity or fluorescence

- 3 Accurate but slow

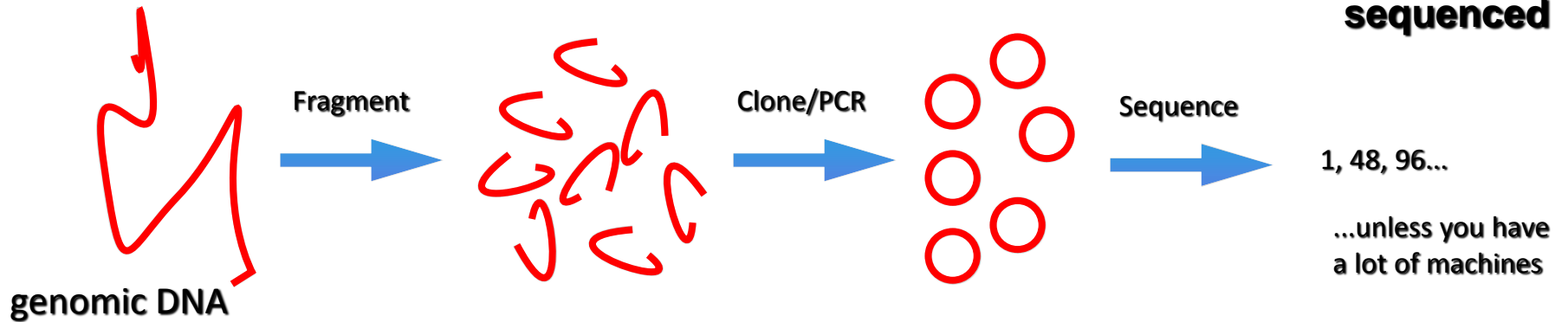


# High-throughput sequencing

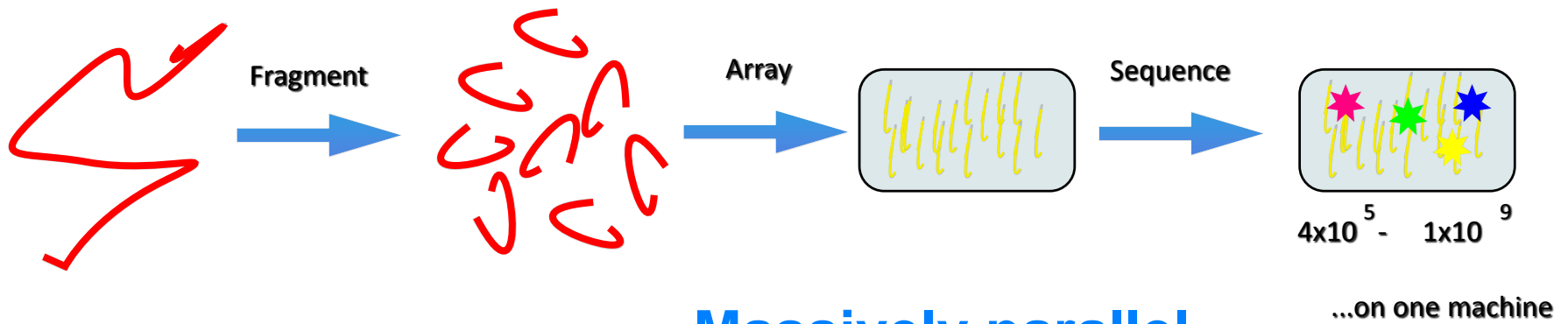
also known as next generation sequencing,  
deep sequencing, massively parallel sequencing.....

# Sequencing: old and next

## LTS (Sanger)



## HTS (High-throughput sequencing)



**Massively parallel**

# Illumina sequence data

Random DNA library of short fragments ~300 bp

***3 billion DNA sequence reads***

50, 100 bp long

Single-end reads



Paired-end reads



Run time: 1-9 days

Data volume: 1-500 GB

# Sequencing platforms

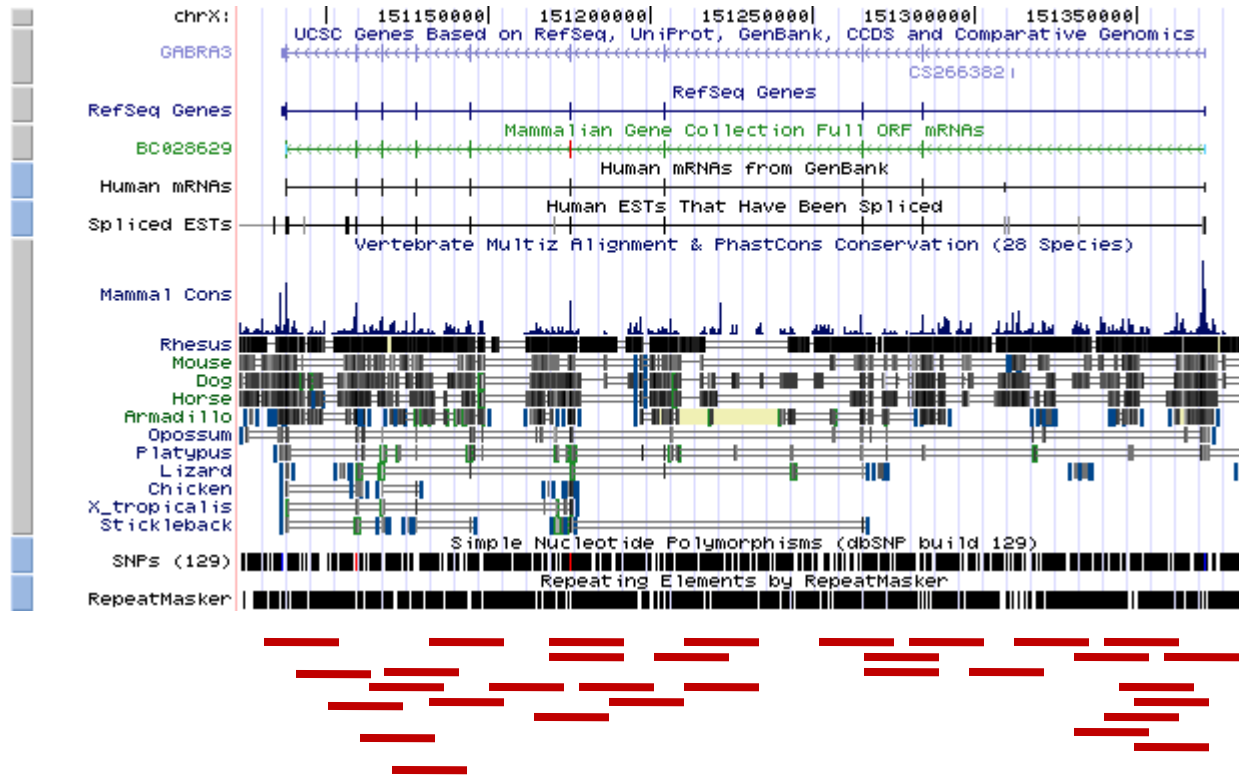


Platform	454	Illumina HiSeq	Illumina MiSeq	PacBio	Ion Torrent
System cost	-	--	++	---	+++
Prep	-	+	++	+	+
Running cost	--	+	++	++	++
Run time	10 hours	1-9 days	27 hours	2 hours	2 hours
Read accuracy	99%	98%	98%	87%	98.8%
Read number	100000	3000000000	3500000	75000	6 x 10 <sup>6</sup>
Read length	400 bp	2x100	2x150	~2700 (10kb)	2-400 bp
Output	35 Mb	600 Gb	>1 Gb	90 Mb	>1 Gb





# HT sequencing - commonalities



- Many short sequence fragments – assembly
- “Stochastic” how many times a given sequence is sequenced
- The technology can be used for quantitative investigations
  - E.g. CNVs, gene expression
  - *Well suited for many non-genetic studies*

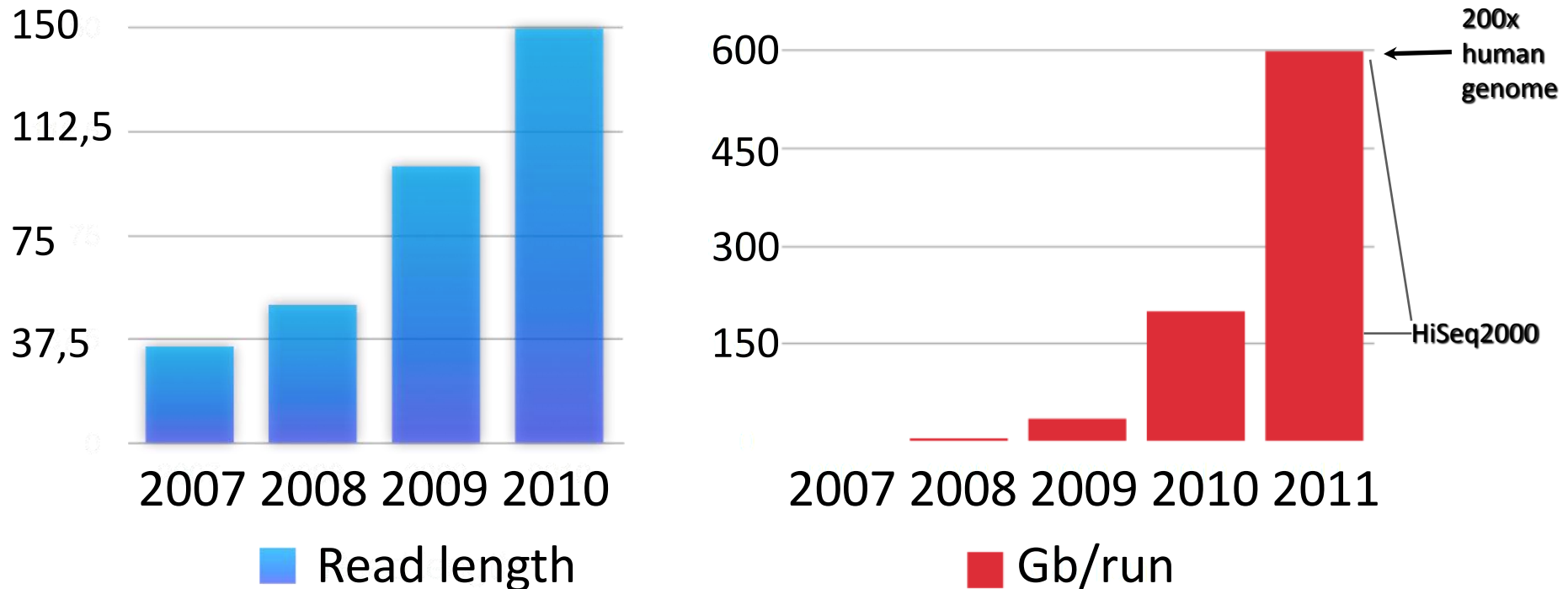
# High throughput sequencing - applications



Platform	454	Illumina HiSeq	Illumina MiSeq*	PacBio	Ion Torrent
Resequencing	-	+++	++	+	+++
de novo	+++	+	+	+++	+++
metagenomics	+++	++	+	++	+++
mRNA	++	+++	++	++	++
miRNA	-	+++	+++	-	-
ChIP	-	+++	++	-	-
DNA meth	-	+++	+	???	-



# Illumina throughput



- Human genome 3 billion bases - 3 Gb
- Illumina HiSeq 600 Gb per run
- 200 x human genome per run

# So what?



Parameter	ABI 3100	ABI 3730	Illumina HiSeq
Read length	~700	~700	100 (x2)
Reads per run	16	96	3000000000
Run time	2 hours	30 minutes	9 days
Time for 1x human genome (3 Gb)	120 years	15 years	1 hour

# HTS and medical genetics

- Finding mutations which cause disease

# Genetic disease: the challenge

Single gene (monogenic) disorders

Approximately 50% of children with congenital syndromes/mental retardation do not receive a firm etiological diagnosis

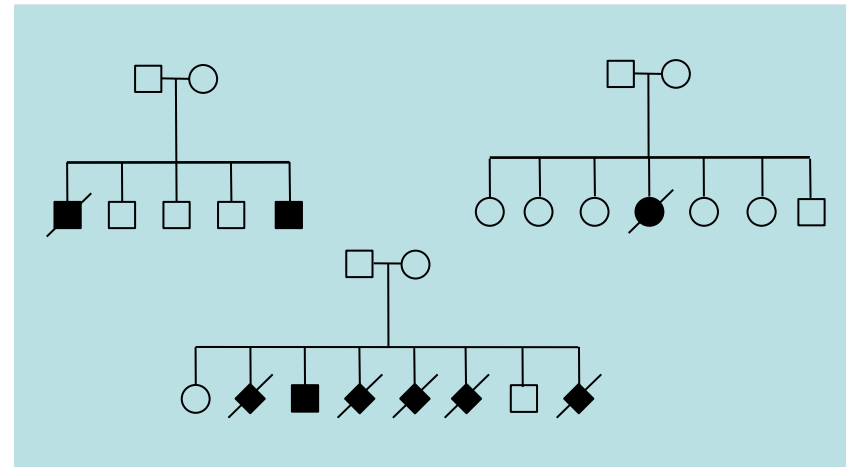
Many of these children have disorders that are primarily genetic in origin.

Many disorders are individually rare and difficult to recognize even for experts.

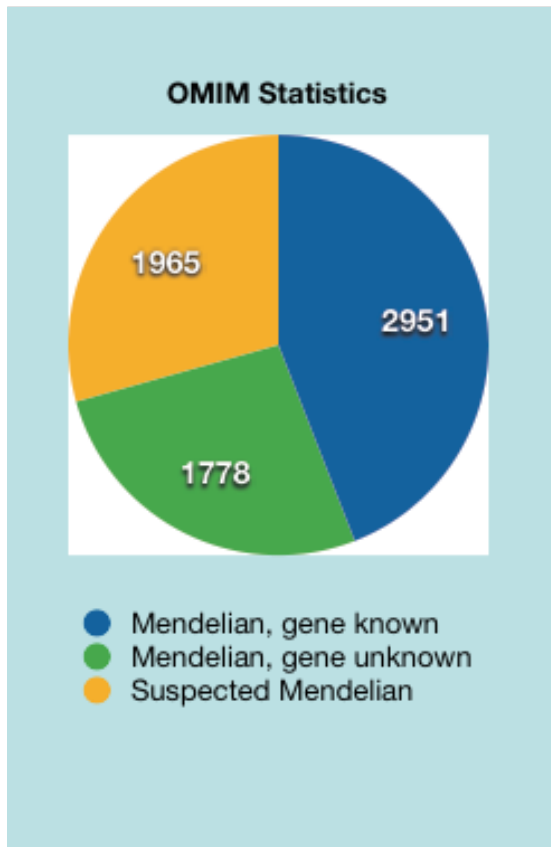
Clinical phenotypes can be non-specific and variable.

Many phenotypes are genetically heterogeneous.

- ↳ **Human genome is (quite) big**
- ↳ **~23 000 genes**
- ↳ **~3 billion bases pairs**
- **How can we (rapidly) identify a mutation causing disease?**



# Mendelian disease in man



2951 of the well-characterized phenotypes registered in OMIM have a known molecular basis  
3743 registered phenotypes with known or suspected Mendelian basis, no associated gene has been identified

***Improve speed/cost of diagnosis of known genetic disorders***

***Improve speed/cost of identification of the cause new/suspected genetic disorders***

# Aim

```
@EAS54_6_R1_2_1_413_324
CCCTTCTTGTCTTCAGCGTTTCTCC
+
;;3;.....;7;.....;88
@EAS54_6_R1_2_1_540_792
TTGGCAGGCCAAGGCCGATGGATCA
+
.....;7;.....;3;83
@EAS54_6_R1_2_1_443_348
GTTGCTTCTGGCGTGGGTGGGGGGG
+EAS54_6_R1_2_1_443_348
.....;9;7;;.7;39333
```



R|G

**Compare to  
reference**

FASTQ format

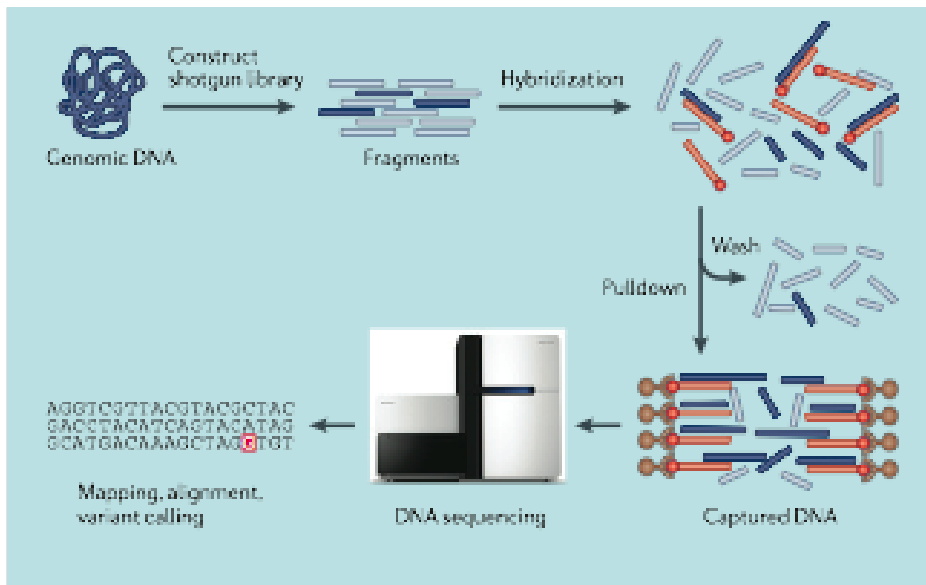
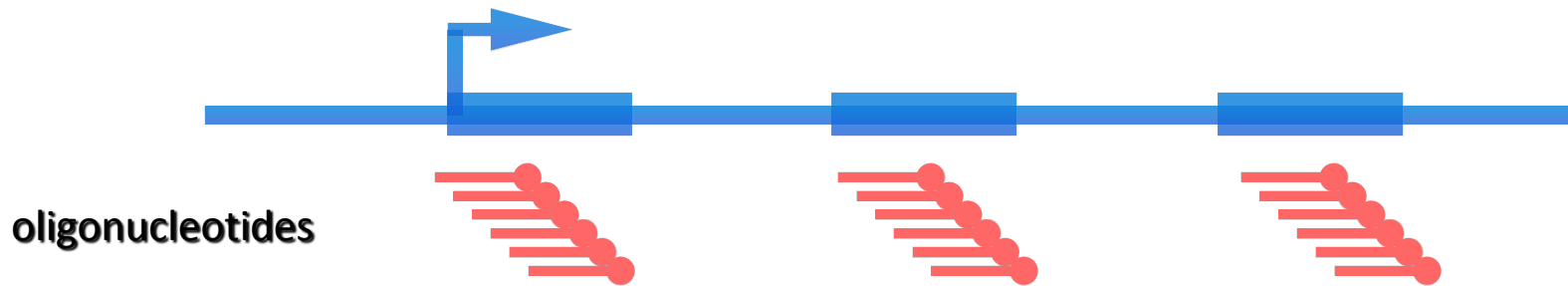
**3 billion reads**

**3 billion bases**

**1 mutation**

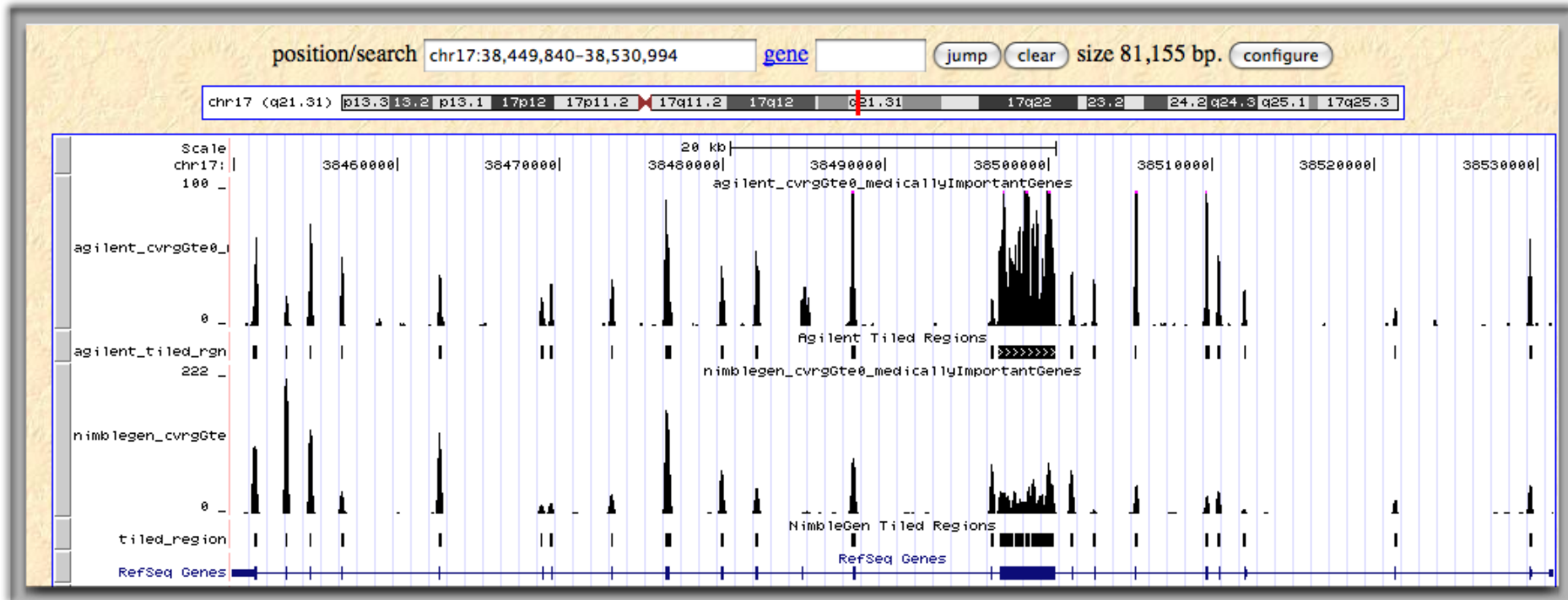


# Exome sequencing – still more common than whole genome



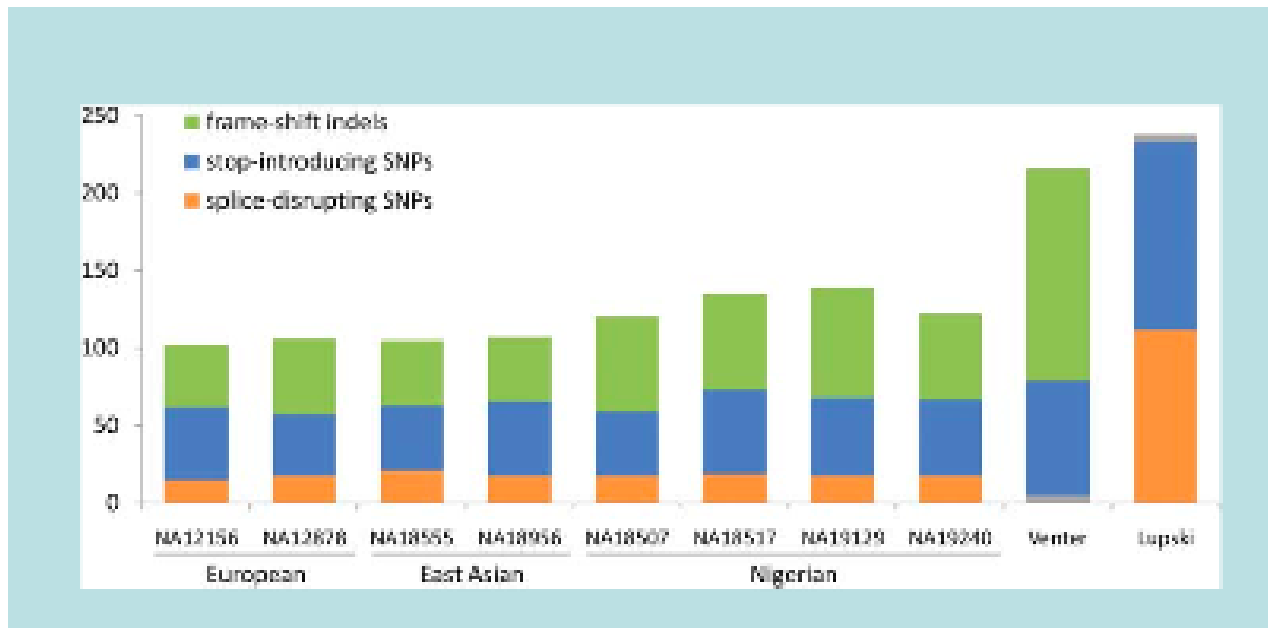
Design exome capture array  
Make sequence library from patient DNA  
Hybridize and capture  
Sequence

# Exome sequencing data



# What's in an exome?

> 20 000 variants



Many loss-of-function variants

MacArthur & Tyler-Smith Hum Mol Genet 19 (2010).

## MUSINGS

# The \$1,000 genome, the \$100,000 analysis?

Elaine R Mardis\*

**Many, many variants will be found**

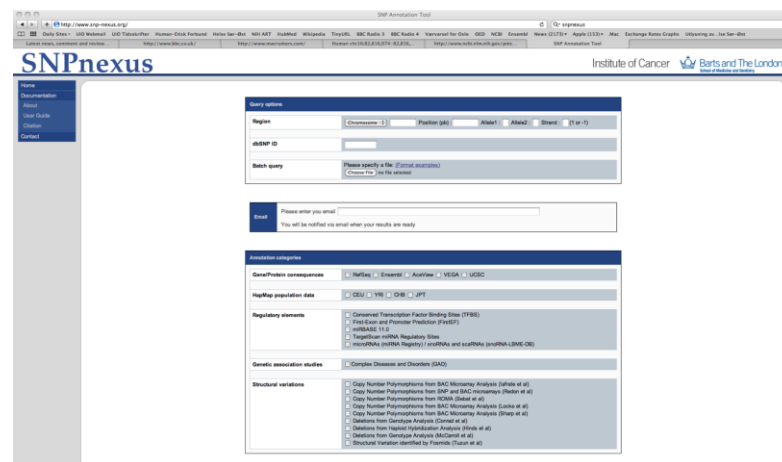
Which variants are deleterious?

Novel? (dbSNP, 1000genomes, HGMD)

Synonymous/non-synonymous?

Conserved?

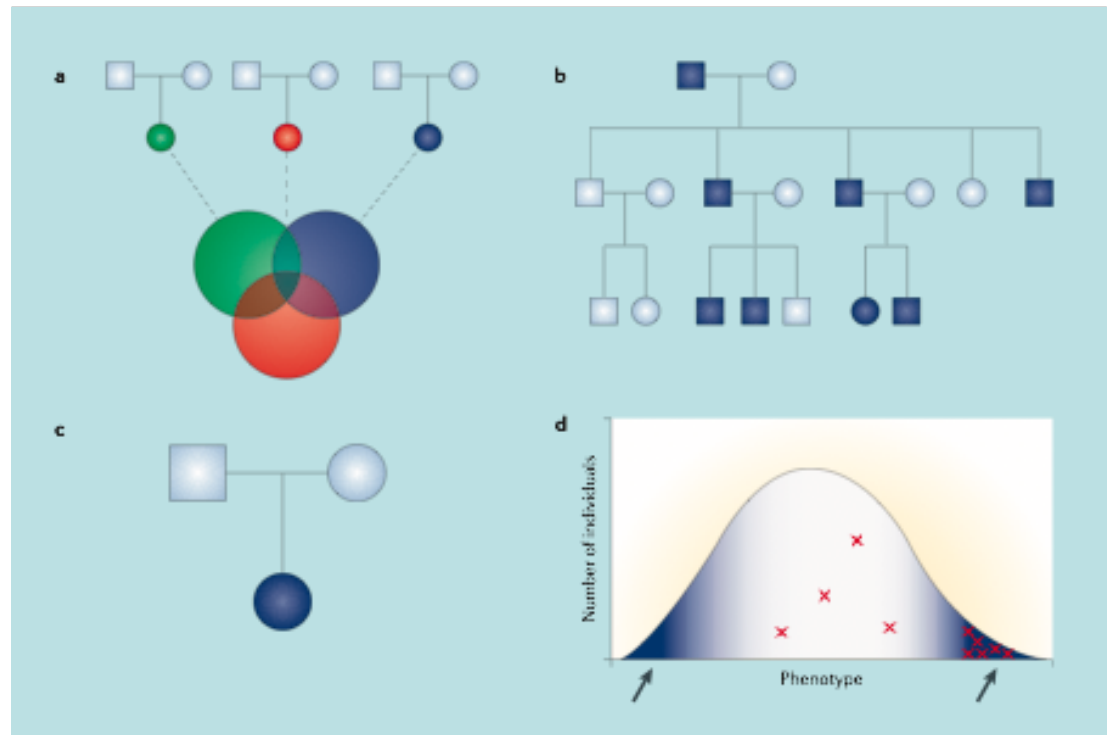
Alter protein structure?



**SNPnexus**  
**PolyPhen2**  
**MutationTaster**  
**ANNOVAR**  
**SeattleSeq Annotation**

# Strategies to identify mutations

multiple individuals same disease  
large multigenerational pedigrees  
de novo mutations  
population frequency for complex diseases



Bamshad et al. Nature Reviews Genetics Nov 2011

# Family data - Shendure table

more exomes

stricter criteria

**Table 3 Number of candidate genes identified based on different filtering strategies**

	Number of affected exomes			Subsets of 3 exomes		Subsets of all 4 exomes		
	1	2	3	Any 1	Any 2	Any 1	Any 2	Any 3
<b>Dominant model</b>								
NS/SS/I	4,645-4,687	3,358-3,940	2,850-3,099	6,658	4,489	6,943	5,167	3,920
Not in dbSNP129	634-695	136-369	72-105	1,617	274	1,829	553	172
Not in HapMap B	898-979	181-506	55-117	2,336	409	2,628	835	222
Not in either	453-528	40-228	10-26	1,317	109	1,516	333	44
Predicted damaging	204-284	10-83	3-8	682	37	787	126	11
<b>Recessive model</b>								
NS/SS/I	2,780-2,863	1,993-2,362	1,646-1,810	4,097	2,713	4,293	3,172	2,329
Not in dbSNP129	92-115	30-53	22-31	226	61	270	90	42
Not in HapMap B	111-133	13-46	5-13	329	32	397	75	19
Not in either	31-45	2-9	2-3	100	6	121	14	4
Predicted damaging	6-16	0-2	0-1	35	2	44	4	1

Comparing two exomes identifies ~20 000 SNPs

Which is the causal variant?

In a family, compare more exomes

# Genetic diagnosis and rare diseases

**2009**

Confirm diagnosis

Test series of single genes

Often international labs

Very expensive

Time-consuming (years)

**2012**

Confirm or clarify diagnosis

1000s genes tested at once

Costs decreasing

Fast (weeks)

## A diagnostic revolution

# The future?

## Oxford Nanopore MinION

disposable device

plug directly into computer USB port

compatible with blood, serum and environment

~1 Gb sequence

~\$900

Personal genomics?





# Summary

## High-throughput sequencing

Dramatic increase in sequence production

Many applications on one platform

Field new and moving very quickly

Diagnostic (exome) sequencing in place

Huge impact on human/medical genetics

## Challenges/opportunities

Data storage/backup/distribution

Data analysis

Whole-genome sequencing?

Incidental findings