

Detecting Novel Variants in Alpha Thalassemia Carriers

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Financial Disclosure for:
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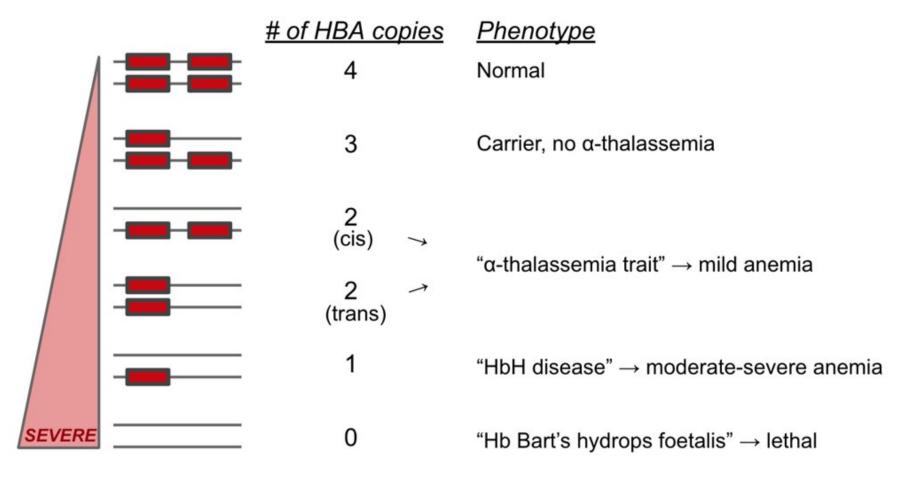
Myriad Women's Health Employee and share holder



Background



- Alpha thalassemia is caused by the loss of alpha globin chains encoded by HBA1 and HBA2.
- Alpha Thalassemia carrier screening is recommended for all women who are pregnant or planning a pregnancy.¹







Background

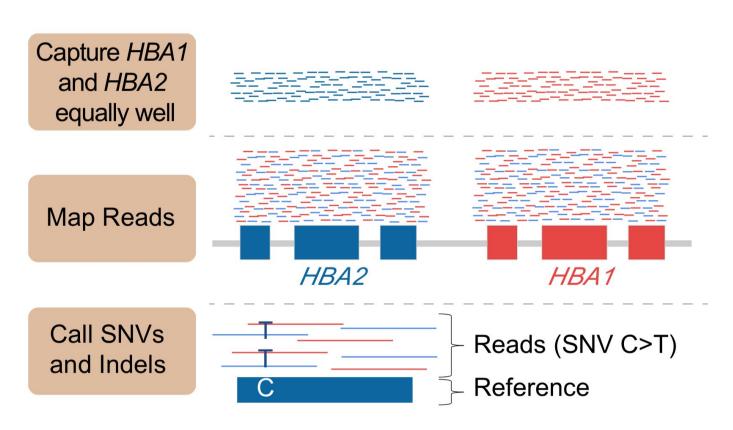
- Determining alpha thalassemia carrier status via NGS is technically challenging because of high homology between HBA1 and HBA2.
- We previously developed a hybrid capture-based NGS assay that detects common copy number variants (CNVs) and the Constant Spring variant², resulting in a 90% detection rate for alpha thalassemia in high-risk ethnicities.³
- Here we present an improvement to the assay to identify novel variants (both single nucleotide variants (SNVs) and insertions/deletions (indels)), resulting in a >99% detection rate in high-risk ethnicities.



Methods



Hybrid Capture



- Our previously established hybridcapture assay was updated to detect novel SNVs and indel via tetraploid calling.
- 259 patient samples were analyzed with the improved assay.
- Long range PCR (LR-PCR), utilizing unique regions in the genome, was also performed on all samples and served as an orthogonal truth dataset.



Results



- 79 SNVs and 10 indels were identified in the set of 259 samples.
- The improved alpha thalassemia hybrid capture (HC) assay achieved 100% concordance with the LR-PCR data.
- No FNs or FPs were identified.

	<u>SNV</u>	0	1	2	3	4	NC
Hybrid Capture	0	11315	0	0	0	0	0
	1	0	70	0	0	0	0
	2	0	0	8	0	0	1
	3	0	0	0	0	0	1
	4	0	0	0	0	1	0
Î	NC	0	0	0	0	0	0

Long Range PCR

	<u>INDEL</u>	0	1	2	3	4	NC
Hybrid Capture	0	1026	0	0	0	0	0
	1	0	10	0	0	0	1
	2	0	0	0	0	0	0
	3	0	0	0	0	0	0
	4	0	0	0	0	0	0
	NC	0	0	0	0	0	0





Conclusions



• These results demonstrate that the improved NGS can be used to detect novel SNVs and indels in the *HBA1* and *HBA2* genes.







- 1 American College of Obstetricians and Gynecologists' Committee on Genetics. Obstet. Gynecol. 2017. 129, 41–55
- Hogan et al. *Clinical Chemistry.* 2018. 64:7 1063–1073
- Shang et al. *EBioMedicine*. 2017. 23, 150–157
- DePristo et al. *Nature Genetics*. 2011. 43, 491–498.

