

Preimplantation Genetic Diagnosis:
A Celebration of 20 Years
ESHRE Campus Symposium
Rome, July 1st, 2010

The evolution of technologies over 20 years

Alan H Handyside

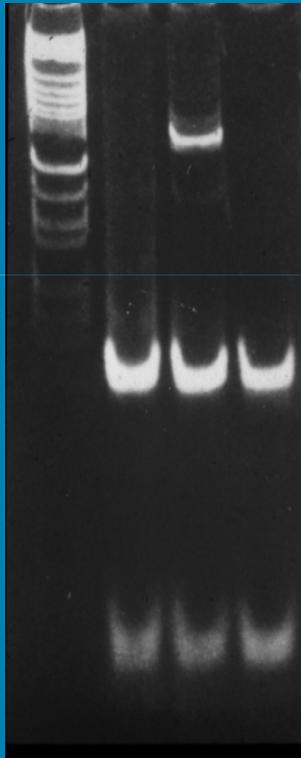
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And Genetics Centre
London
United Kingdom

Preimplantation Genetic Diagnosis (PGD)

- In Vitro Fertilisation (IVF)
 - Downregulation of ovarian folliculogenesis
 - Superovulation and egg collection
 - Intracytoplasmic sperm microinjection (ICSI) and embryo culture
 - Cleavage stage biopsy by zona drilling and micromanipulation
- Single cell genetic analysis (12-72h)
- Selective transfer of unaffected embryos 3-5 days post fertilisation

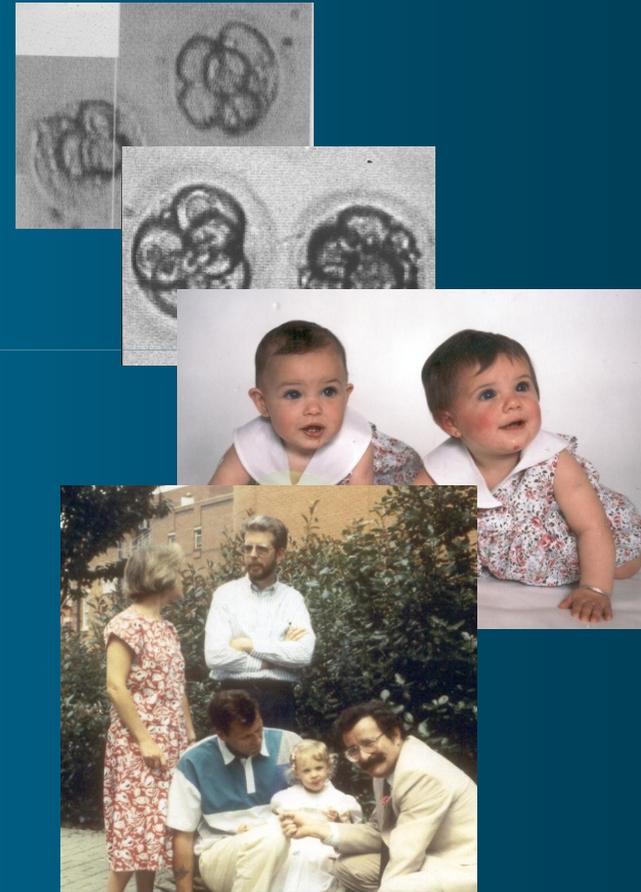


Pregnancies from biopsied human preimplantation embryos sexed by Y-specific amplification



Gender identification and selective transfer of unaffected female embryos in X-linked disease

Amplification of DYZ1 using 40 cycles of PCR from single cleavage stage blastomeres



Handyside et al Nature (1990) 344, 768

Born July, 1990

Identification of sex in X-linked disease

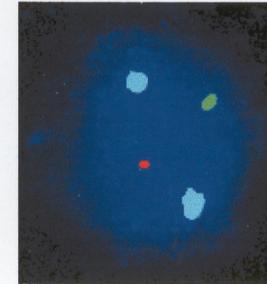
Biopsy FISH summary

2319C1

Biopsy Date 18/07/98 **Referral** X-LINKED ADRENOLEUKODYSTROPHY

Nucleus Ref 2319C1E13N1
Constitution XY1818
Classification Diploid male
Embryo Fate Spread

FISH Image



Embryo Image
E13



Nucleus Ref 2319C1E16N1
Constitution XY1818
Classification Diploid male
Embryo Fate Spread

FISH Image



Embryo Image
E16



Nucleus Ref 2319C1E1N1
Constitution X1818

FISH Image



Embryo Image
E1



Aneuploid female

Spread

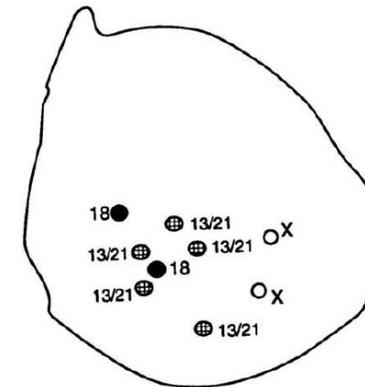
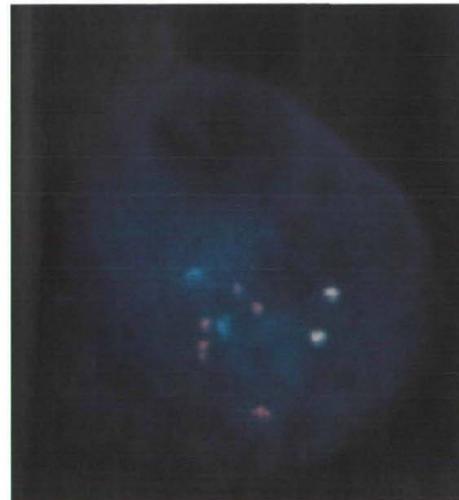
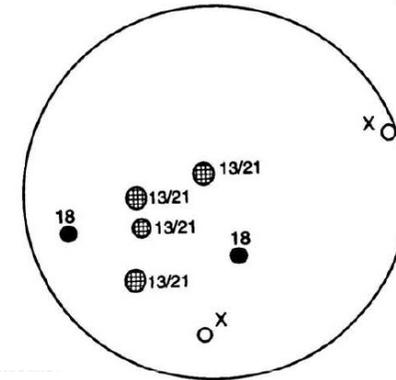
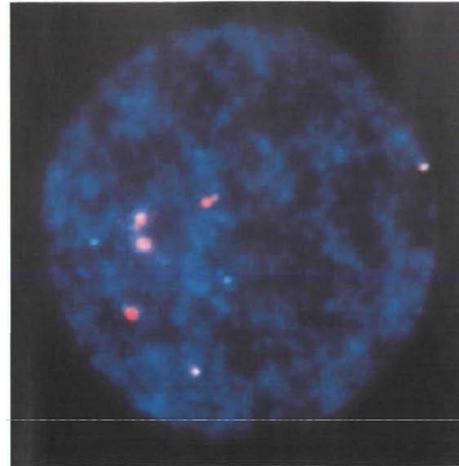
Griffin et al (1991) Hum Reprod 6, 101
 Griffin et al (1993) BMJ 306, 1382

Diagnosis of major chromosome aneuploidies in human preimplantation embryos

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Preimplantation genetic diagnosis increases the implantation rate in human in vitro fertilization by avoiding the transfer of chromosomally abnormal embryos

Luca Gianaroli, M.D.

M. Cristina Magli, M.Sc.

Anna Pia Ferraretti, Ph.D.

Agnese Fiorentino, B.Sc.

John Garrisi, Ph.D.

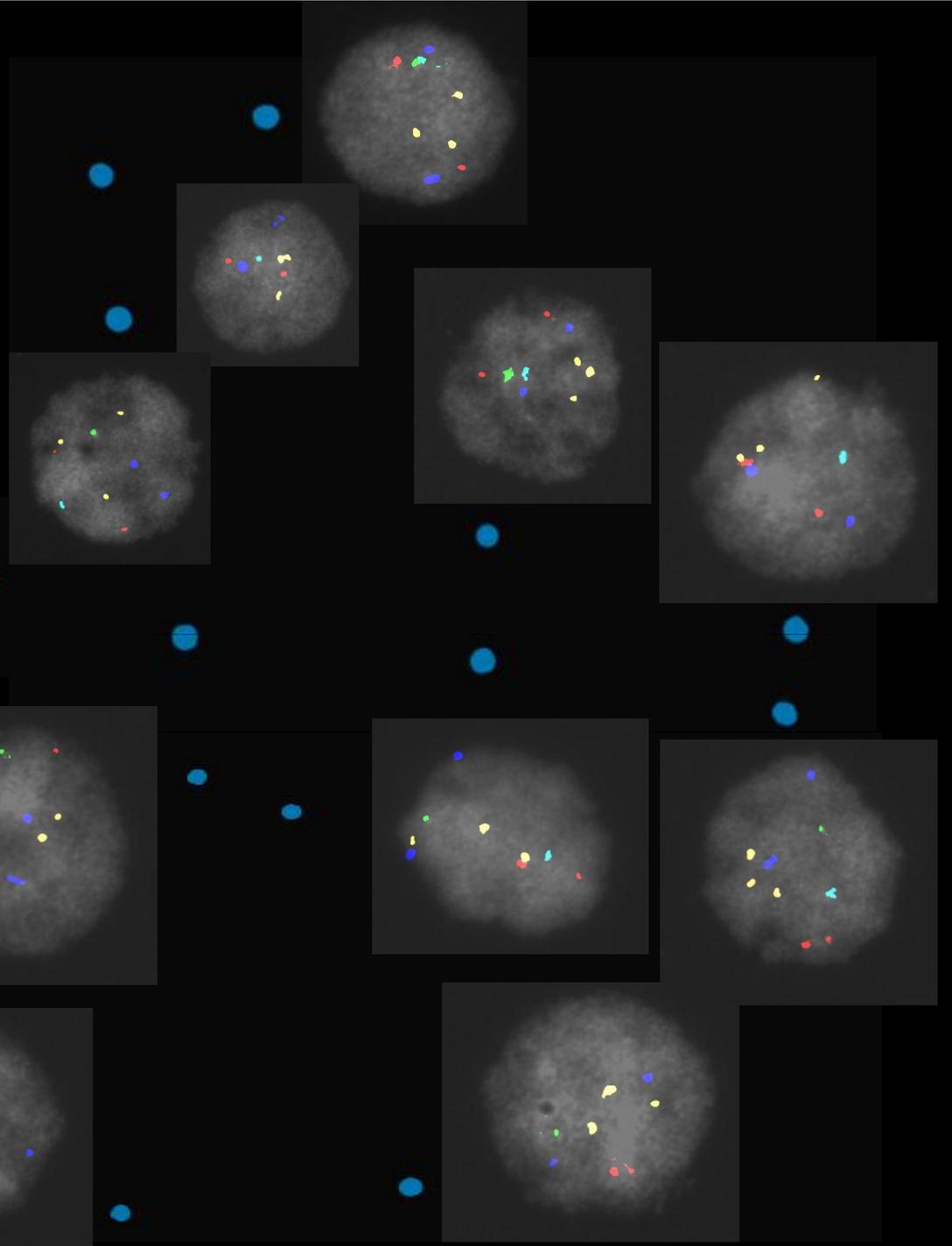
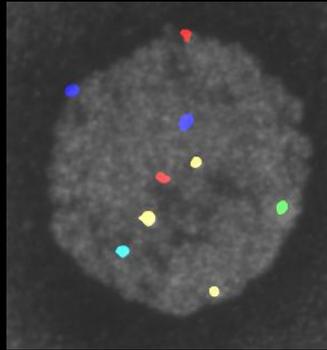
Santiago Munné, Ph.D.

Società Italiana Studi Medicina della Riproduzione, Bologna, Italy; and The Institute for Reproductive Medicine and Science of St. Barnabas Medical Center, Livingston, New Jersey

Embryo 2

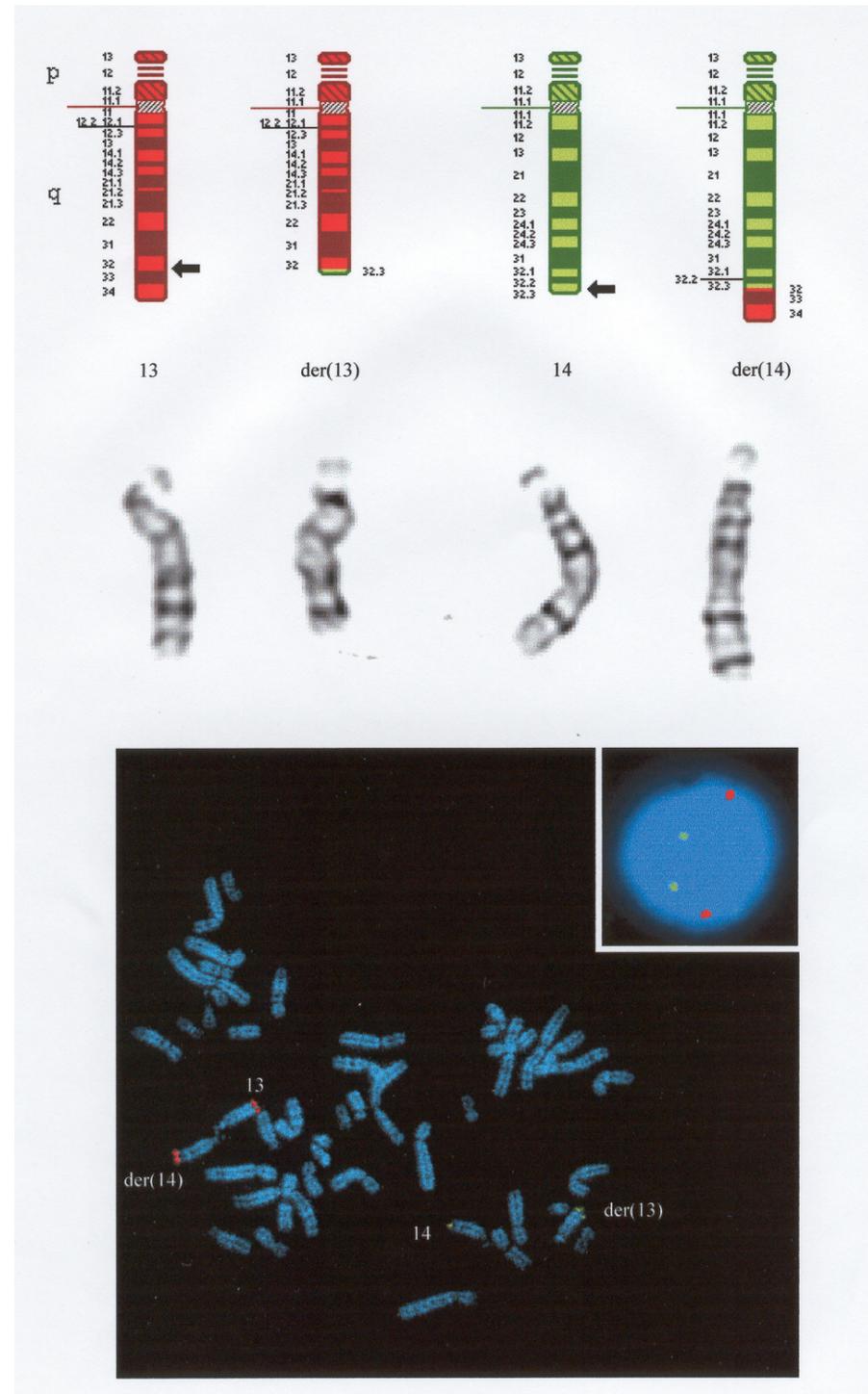
Monosomy 16, 21

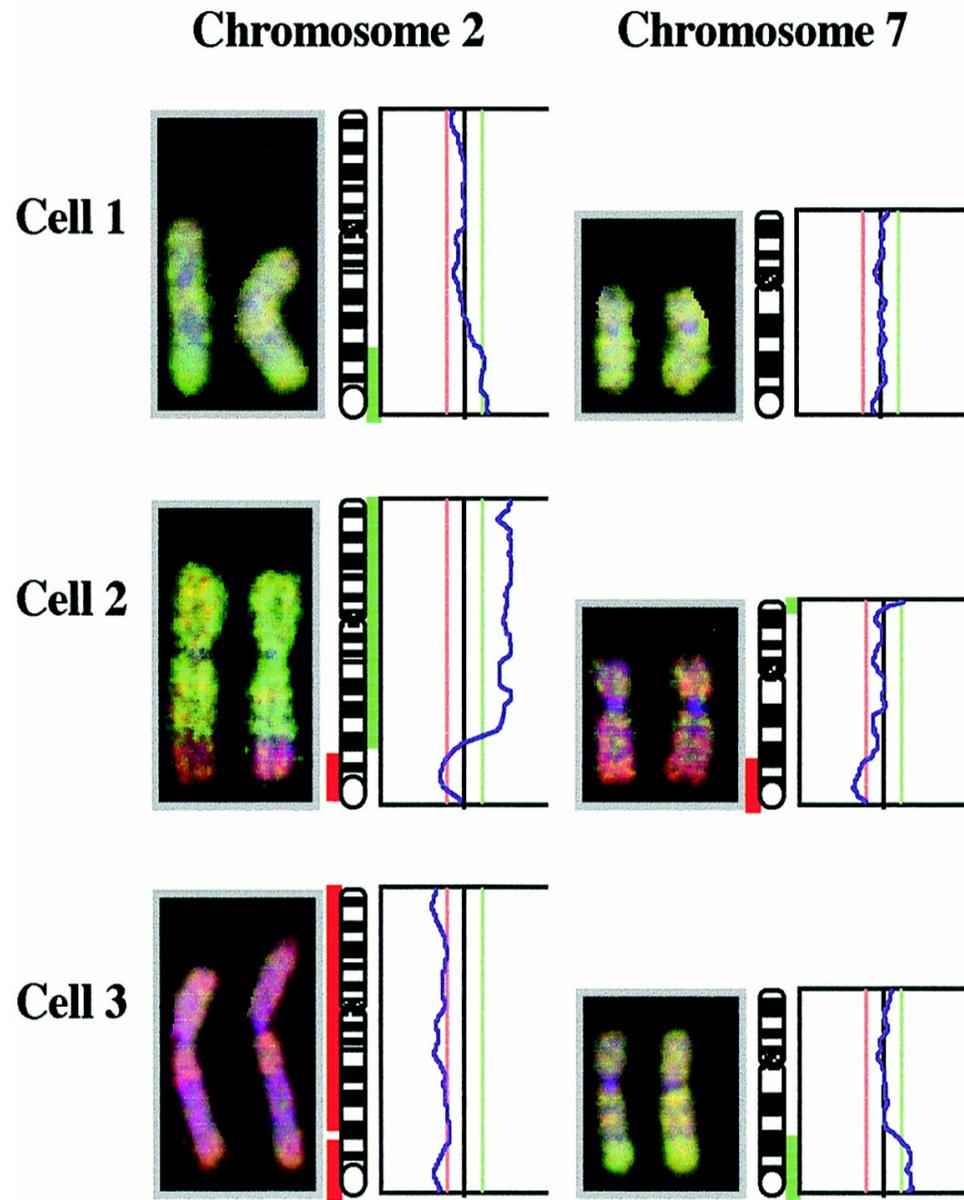
Trisomy 22



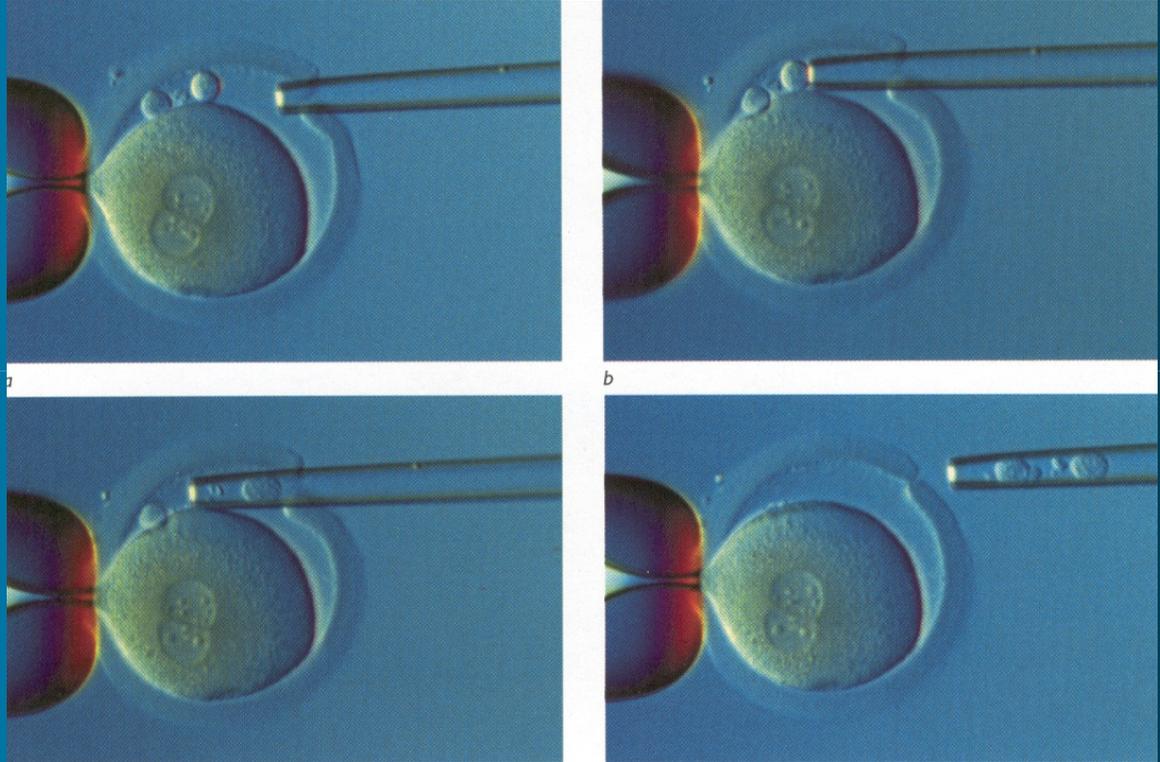
PGD of reciprocal translocations using subtelomeric probes

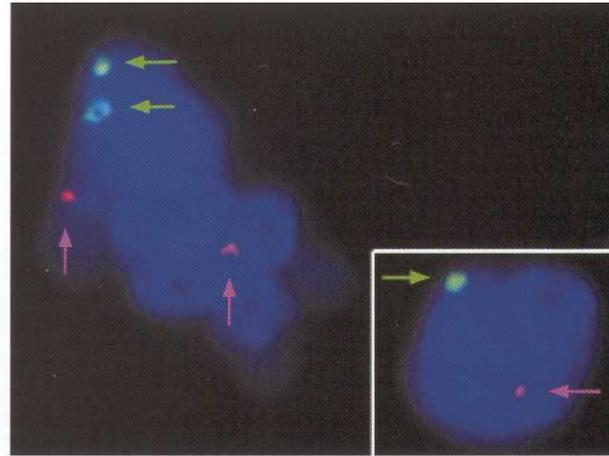
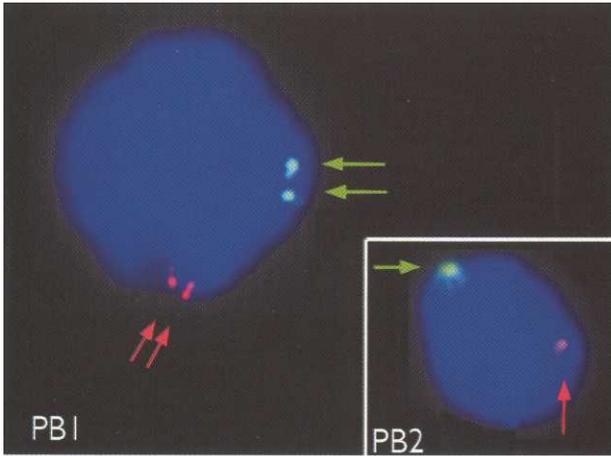
Scriven, Handyside and Ogilvie (1998) Prenatal Diagn 18, 1437



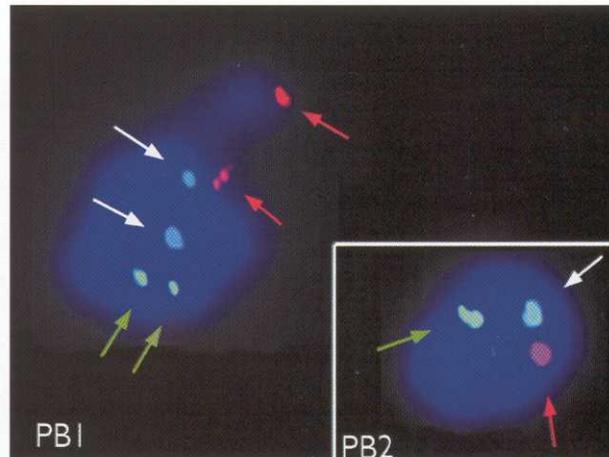
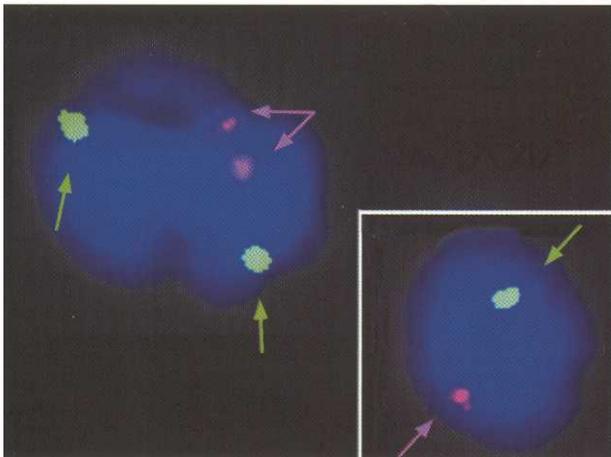


Wells et al (1999) NAR 27, 1214-1218

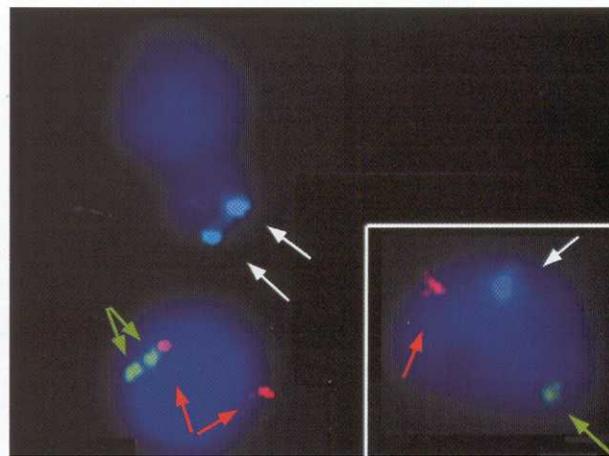
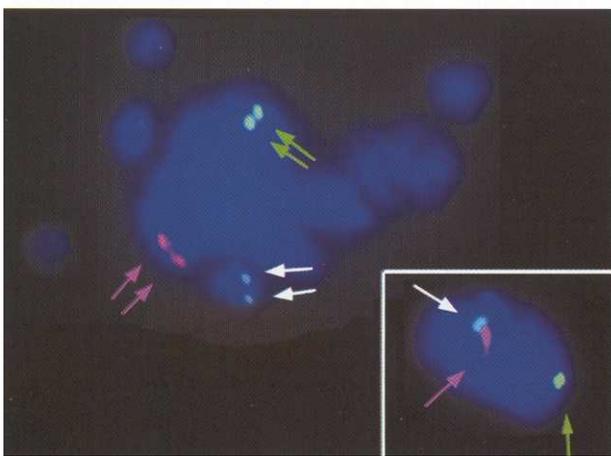




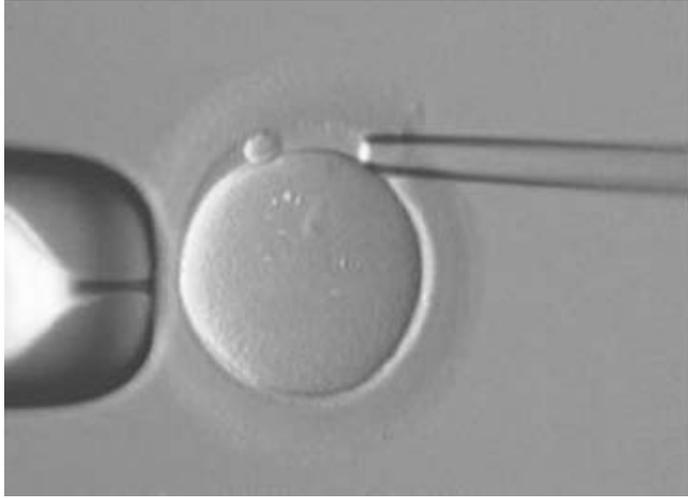
a-c mFISH with probes to 18 and 21



Normal signals in PB1 and PB2

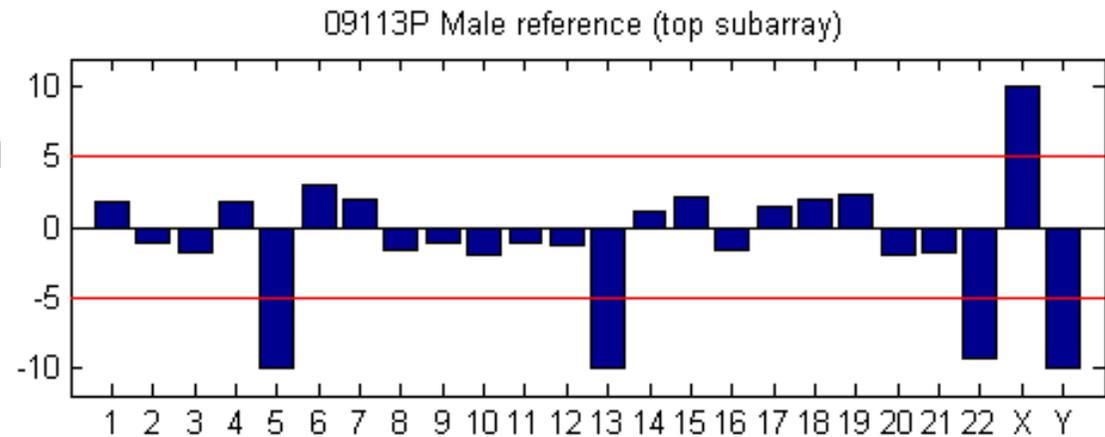


d-f mFISH with probes to 13, 18 and 21

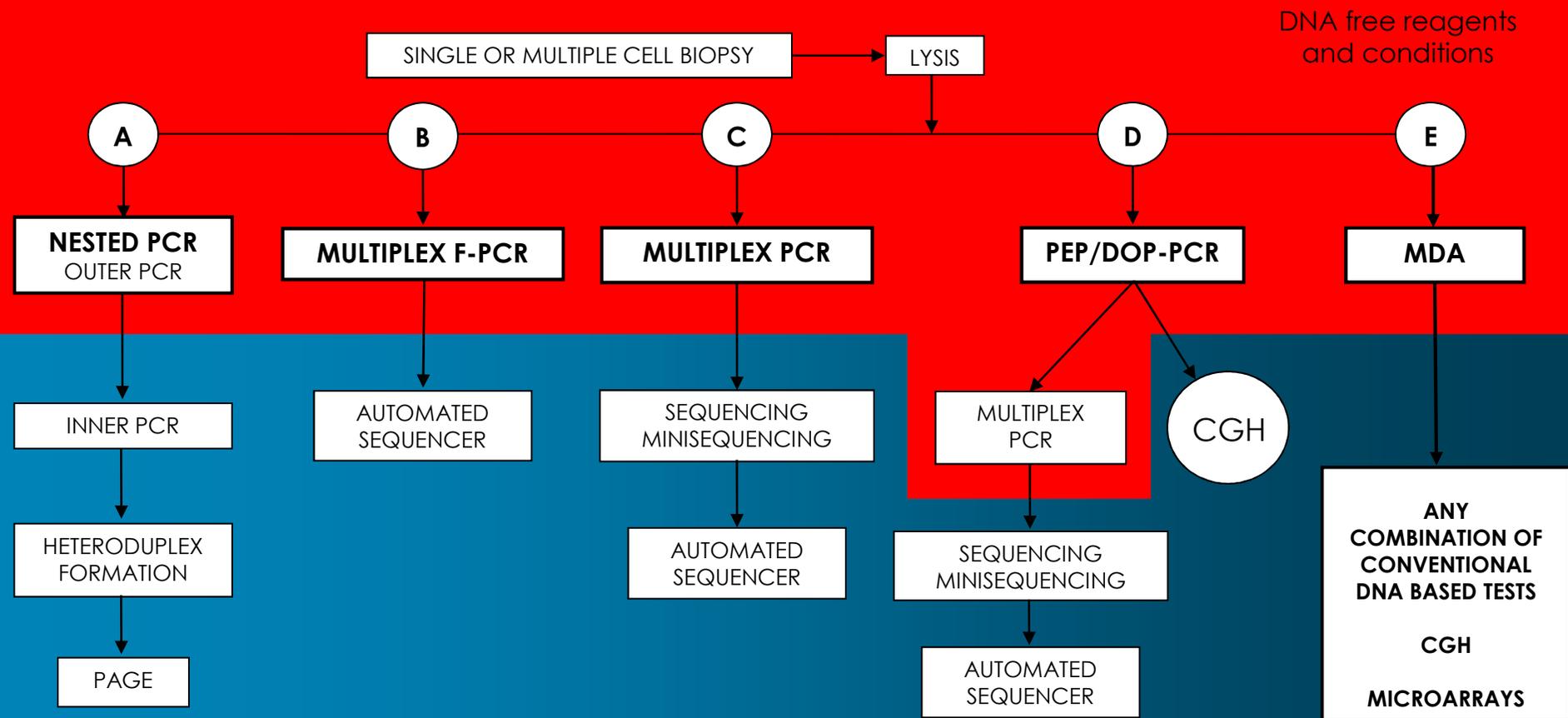


First or first and second polar body biopsy on day 0 or day 1

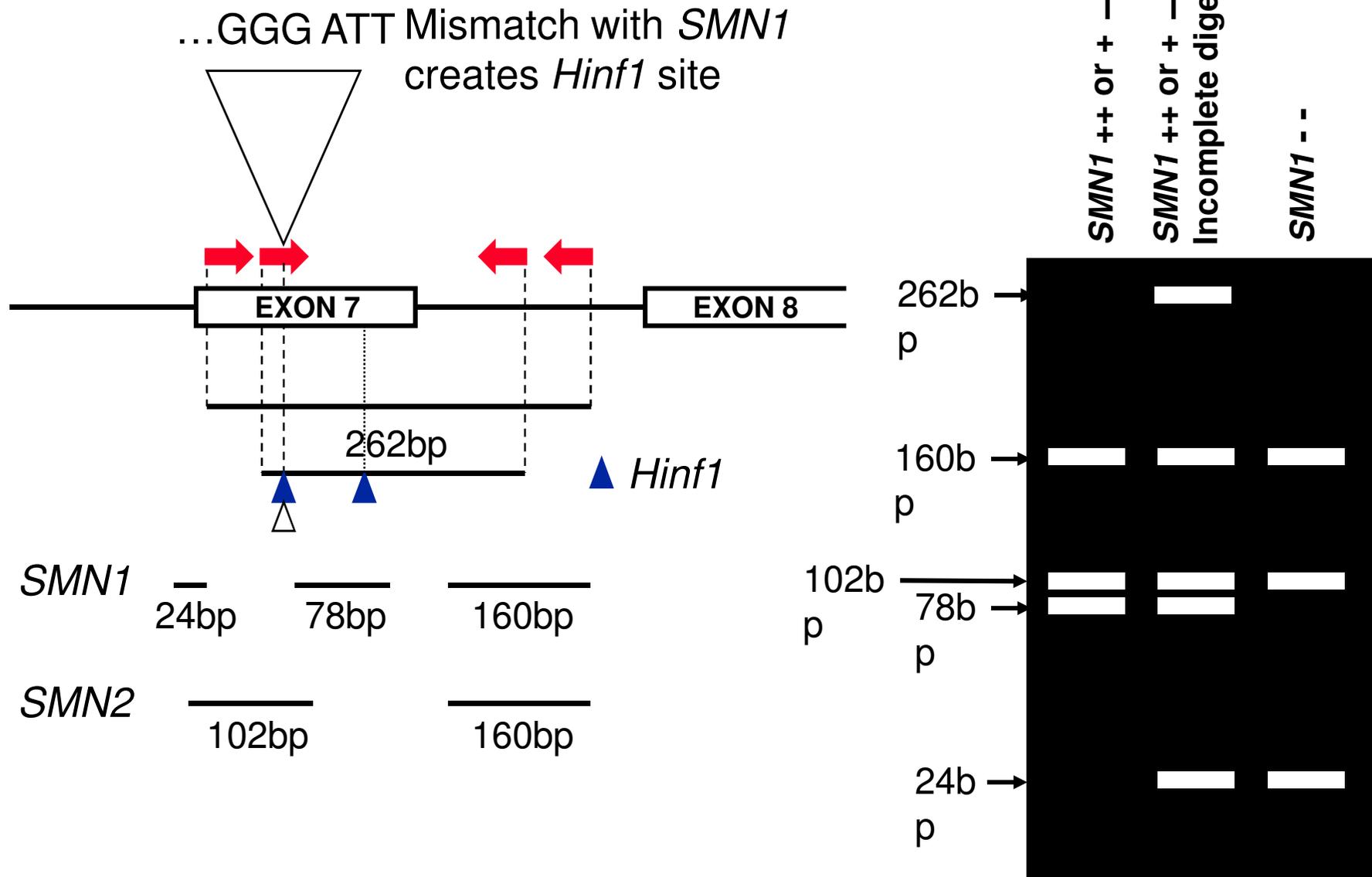
Array comparative genomic hybridisation (CGH) following whole genome amplification

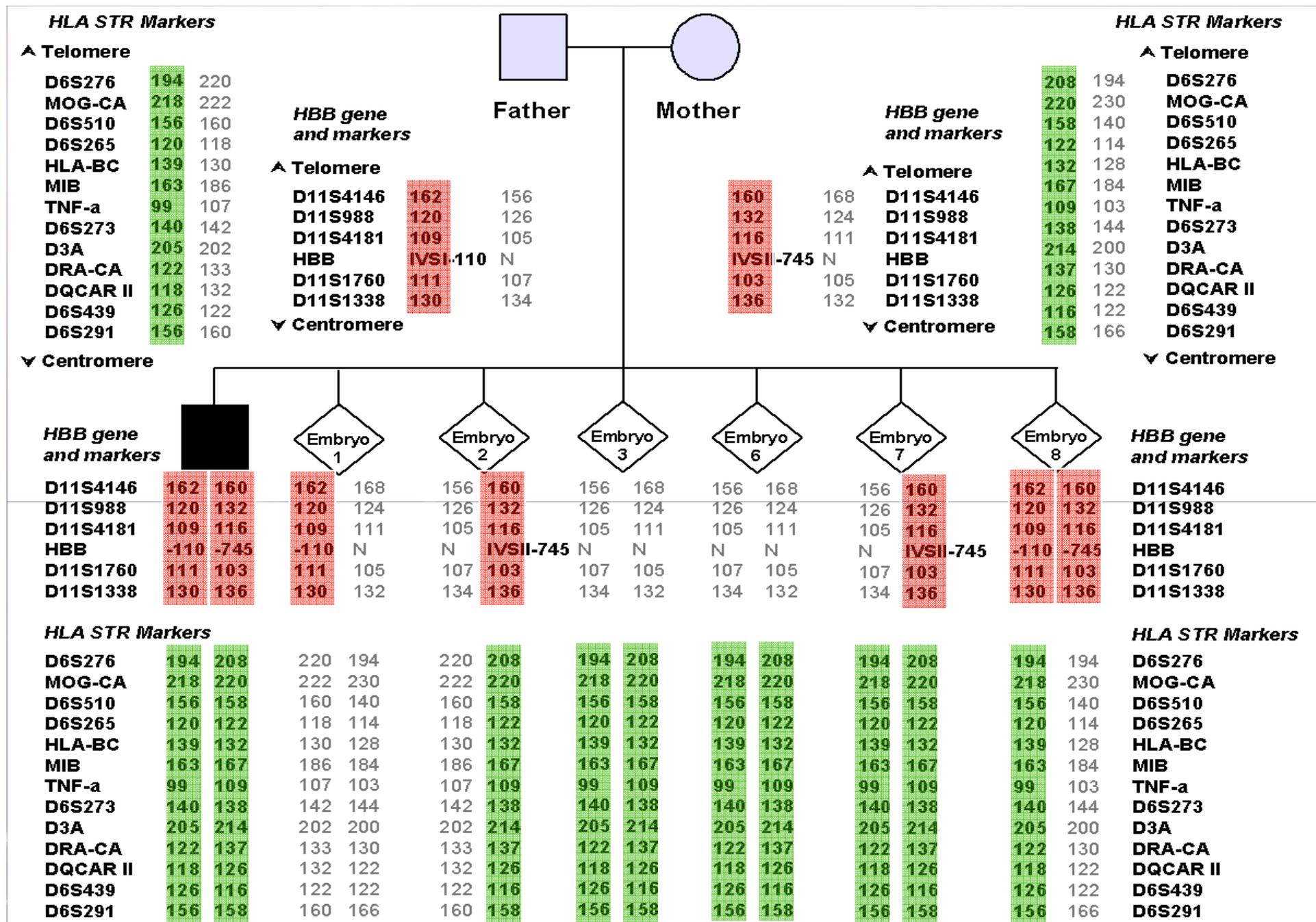


Strategies for single cell genetic analysis



Primer mismatch strategy for detecting *SMN1* and *SMN2*







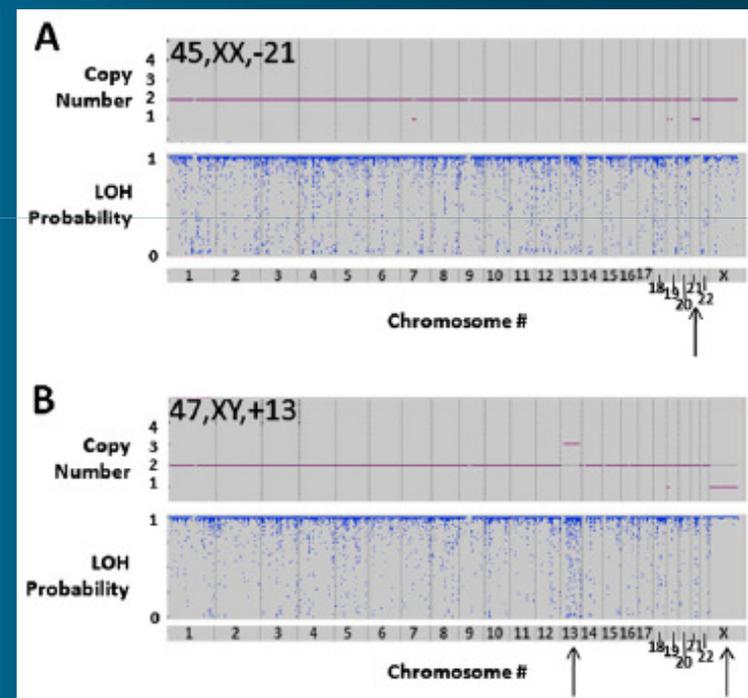
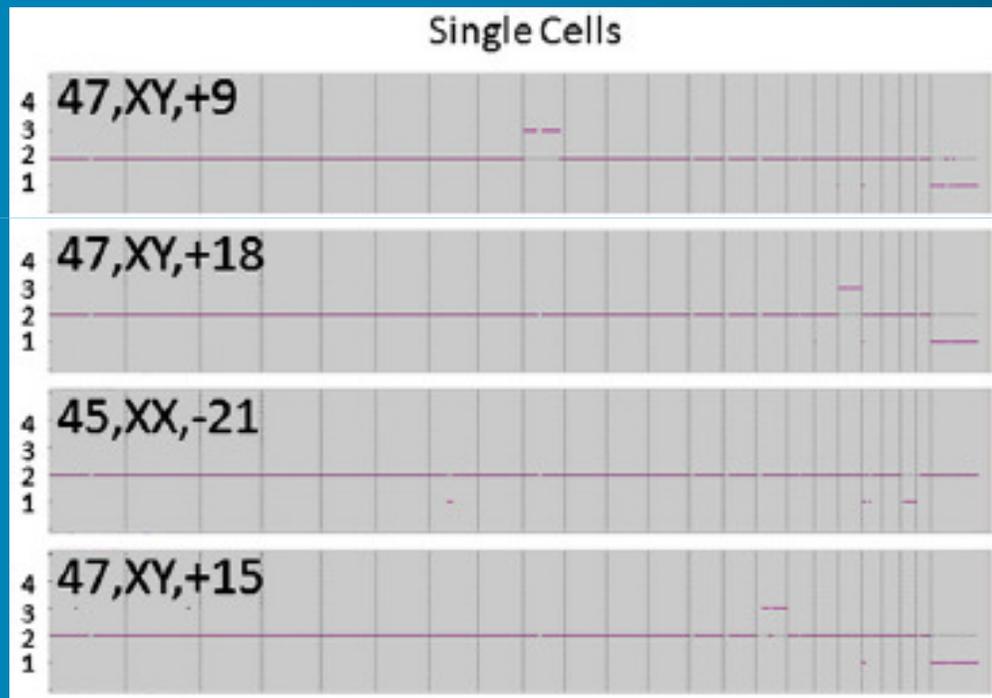
Single nucleotide polymorphisms (SNPs)

- 10 million SNPs across human genome
- Many biallelic (AA, AB, BB)
- Major contribution to genetic diversity, inherited disease and variants associated with common multifactorial conditions

Accurate single cell 24 chromosome aneuploidy screening using whole genome amplification and single nucleotide polymorphism microarrays

Nathan R. Treff, Ph.D.,^{a,b} Jing Su, M.Sc.,^a Xin Tao, M.Sc.,^a Brynn Levy, Ph.D.,^{a,c} and Richard T. Scott, Jr., M.D.^{a,b}

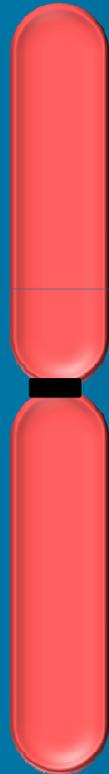
^a Reproductive Medicine Associates of New Jersey, Morristown; ^b Division of Reproductive Endocrinology, Department of Obstetrics Gynecology and Reproductive Science, UMDNJ-Robert Wood Johnson Medical School, New Brunswick, New Jersey; and ^c Department of Pathology, College of Physicians and Surgeons of Columbia University, New York, New York



Treff et al (2009) Fertil Steril in press



A
A
B

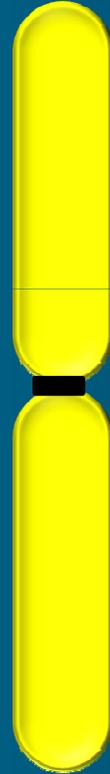


A
A
B

A
B
A

A
A
B

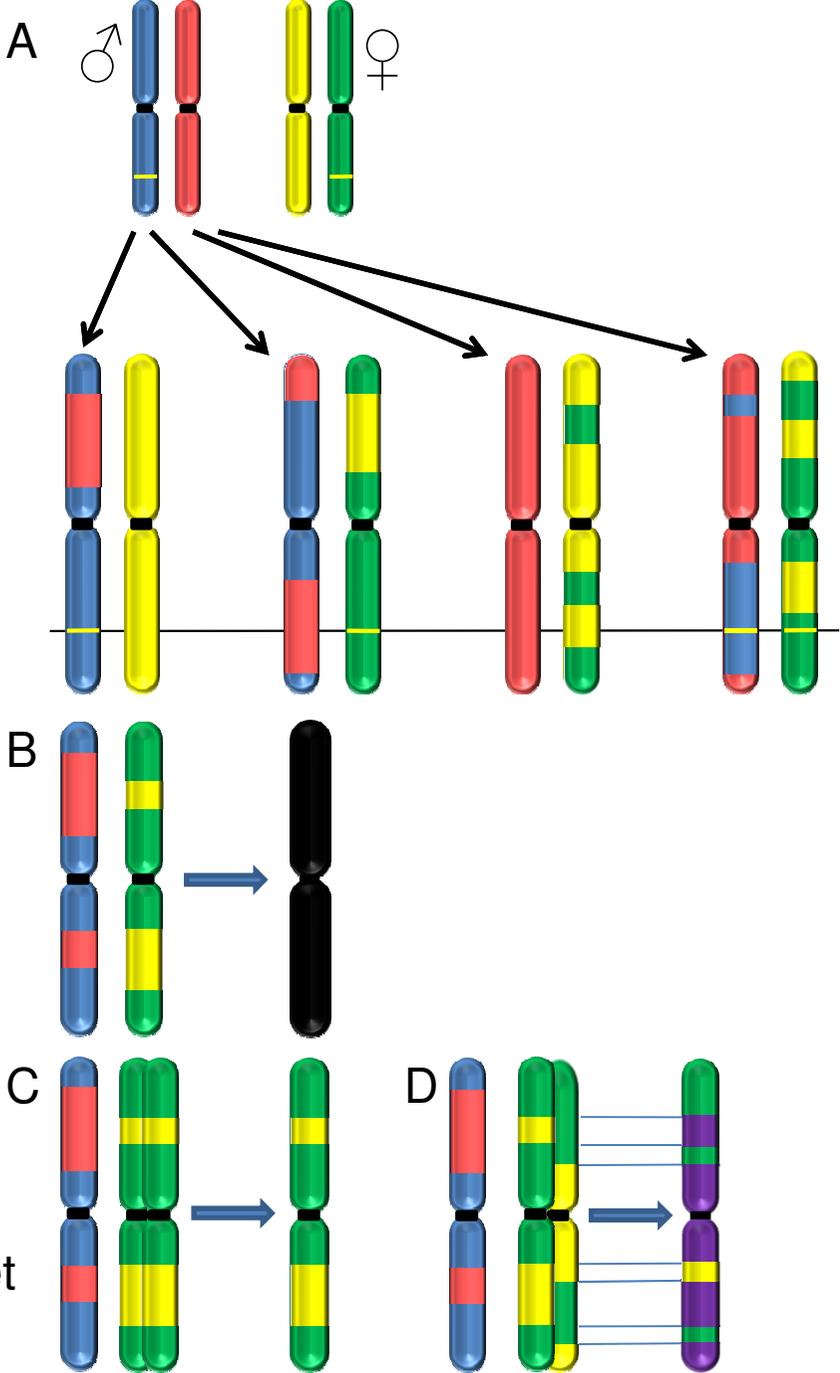
B
B
A



B
A
A

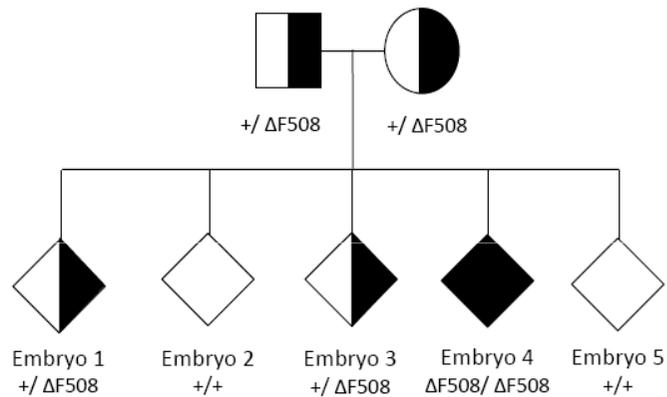
A
B
A

Karyomapping combines genome wide linkage based detection of single gene defects (A) with chromosomal aneuploidy including monosomy/deletions (B) and trisomies involving inheritance of two different meiotic chromosomes from one parent (D). Chromosome duplication is not detected (C).

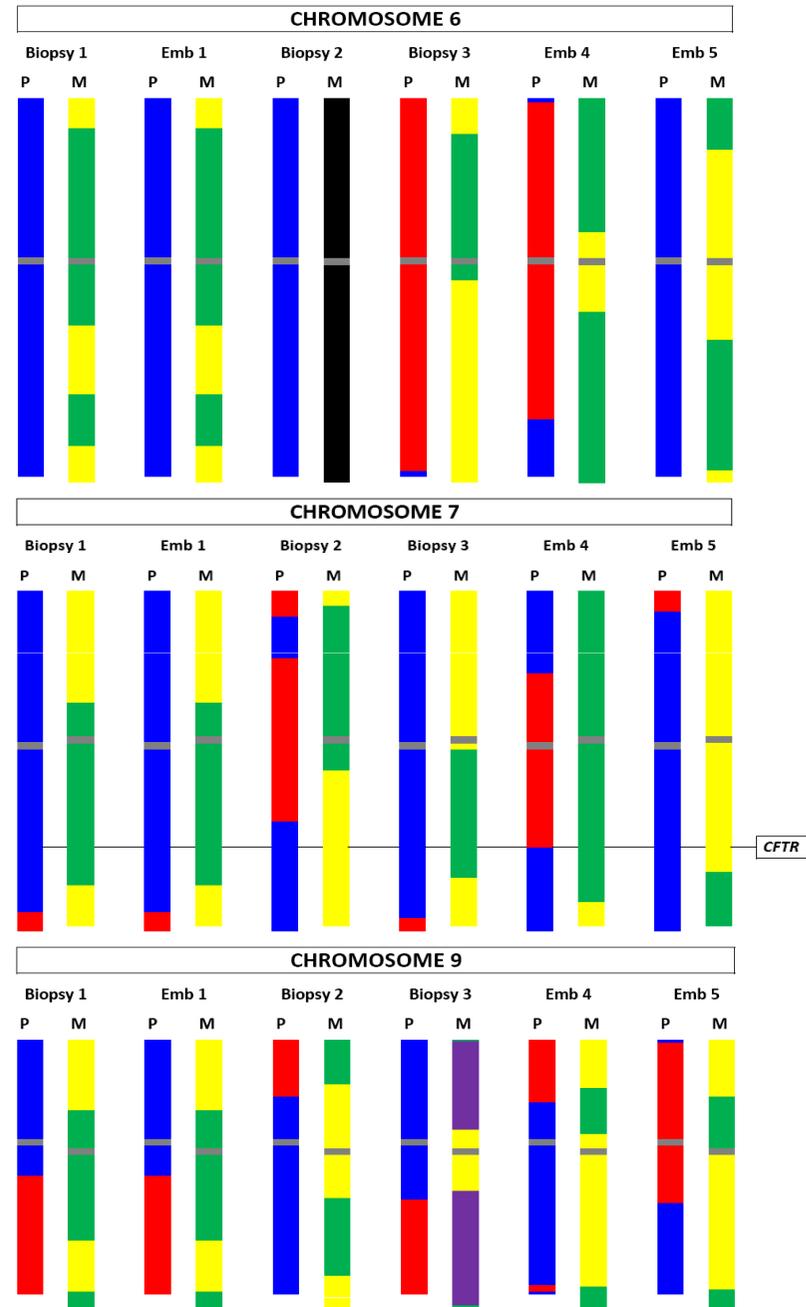


Handyside et al (2009) J Med Genet

Family 2 Preimplantation genetic diagnosis for cystic fibrosis



Whole genome amplification by isothermal multiple displacement amplification of 2-10 cells in each biopsy/embryo



	Mutation detection	Multiplex PCR and minisequencing	Preimplantation genetic haplotyping	Fluorescence in situ hybridisation	Array CGH	Quantitative SNP array analysis and Karyomapping
Single gene defects						
Single or combination	✓	Any	✓			Any
Exclusion	✗	✓	✓			✓
SGD + HLA typing	✗	✓	✗			✓
Chromosome screening						
Aneuploidy			✗	✓ (5-12 chr)	✓ (24 chr)	✓ (24 chr)
Meiotic aneuploidy				✓ (PB only)	✓ (PB only)	✓ Trisomy only
With parental origin		✓		✗	✗	✓
With meiotic origin		✗		✗	✗	✓
Mosaicism				✓	✓ ✗	✓ ✗
Duplications/deletions				✗	✓ ✗	✓ ✗
Uniparental disomy				✗	✗	✓
Translocation chromosome imbalance						
Reciprocal/Robertsonian		✓		✓	✗	✓
Normal vs balanced		✗		✗	✗	✓
With 24 chr aneuploidy		✗		✗	✗	✓
Other						
Multifactorial recurrence risk						✓
Copy Number Variants						✓
Errors						
Allele dropout		✓	✓			✓
Contamination		✓	✓			✓