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Conflicts of Interests/ Disclosure

- Senior Consultant, The Population Council, New York , New York since 1986

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Pharmacogenetics in Ovarian Stimulation

- Tailoring ovarian stimulation to the individual patient can be challenging because the ovarian response varies substanstially between patients.
- Pharmacogenetics has emerged as a new area of research to improve the balance between desired and undesired action of drugs, based on the the genetic predisposition of the individual patient.

Pharmacogenetics in ovarian stimulation

Therefore genotyping of patients scheduled for ovarian stimulation could be an attractive tool to individualize FSH/LH dosing according to genetic differences in ovarian sensitivity.

FSH and LH receptor polymorphisms

Polymorphisms are gene DNA variants that exist in the normal population at a frequency of 1% or more

Mainly in the form of so-called single nucleotide polymorphisms (SNPs).

Functional Genetic Polymorphisms and Female Reproduction.

Simoni et al.



RFLP, restriction fragment length polymorphism.

Figure 1: Graphic representation of types of genetic variants, showing insertion/deletion (ins/del) polymorphisms, both coding and non-coding SNPs, and repeat polymorphisms such as tandem repeats or VNTR.

Variants are shown occurring within a gene (in this example the *INS* gene), but can also occur outside of genes. Other types of genetic variations that affect larger regions, such as copy number variations, are not shown. SNP, single-nucleotide polymorphism; VNTR, variable number of tandem repeats.

Human Reproduction Update, 14: 459-84,2008

Polymorphic Variants (M Simoni 2008)

- Variants can occur within or outside a gene
- Within the gene: in exons, introns or regulatory regions. They can be silent or functional.
- Outside the gene: they can be used as tags to identify functional regions. They may affect RNA transcription and processing.









Bouligand J et al NEJM, 2009

Polymorphisms: GnRH1

 A polymorphism in the first exon of
 GnRH 1has been described, constituting an amino acid variation at codon 16 (Trp16Ser).

Results are contradictory in terms of Estrogen exposure.







Vassart et al. (2004), TRENDS in Biochemical Sciences., 29:119-126



Yves COMBARNOUS

	mâle	femelle		
FSH	Cellules de Sertoli	Cellules de granulosa		
LH	Cellules de Leydig	Cellules de granulosa Cellules de thèque Cellules lutéales		



LH receptor gene mutations

Activating mutations

Inactivating mutations

More subtle: polymorphisms

APN Themmen



Familial male-limited precocious puberty

- •onset before the age of four
- high testosterone levels
- Iow LH levels
- autosomal dominant inheritance
- only boys are affected

Hypothesis - activated LH receptor

hLHR mutants



APN Themmen



Leydig Cell Hypoplasia



very low testosterone levels; high LH levels
FSH levels within the normal range
testes with very few Leydig cells

Hypothesis - inactive LH receptor

46 XY DSD: inactivating LH receptor mutants



APN Themmen

LH receptor

► LH receptor mutations - disasters

pseudohermaphroditism <-> precocious puberty

What about polymorphisms

Production and action of estrogens



Estrogen and the risk of breast cancer. M Clemons and P Goss. NEJM 2001; 344(4): 276-285.

LHR polymorphisms

► 282 SNPshave been identified

Most are located in large introns, which account for more than 95% of the LHR gene

- The most frequent polymorphisms is the absence or presence of a 2 aminoacid insertion at positon 18 in exon 1,
- And 2 variable aminoacids in postions 291 and 312: 291 NS, and 312 SN in exon 10.

LH receptor polymorphisms

- LQ (Leu-GIn) insertion at pos 18 in signal peptide
- ► N291S glycosylation site
- ► N312S near glycosylation site
- others silent (no AA change)

Human LH receptor



APN Themmen

LQ variant

insLQ-LHR polymorphism exon 1- codon 18 h-region of signal sequence



Polymorphisms: LHR

- An insertion of 2 aa L(leucine) & Q (glutamine) in the signal peptide of LHR (18insLQ) was shown in vitro to result in a increased LH receptor activity (Piersma, 2006).
- In BC this pm is associated with a shorter disease free interval (Powell 203 and Piersma 2006).



Mutational insert (inactivating)

APN Themmen

LH receptor LQ variant and breast cancer

751 breast cancer cases
 median 130 months follow-up
 LQ not a risk allele
 disease free survival



APN Themmen













Summary

Association

worse disease free survival effect strong in premenopause effect strong in obese women

Effect of insLQ on LH receptor function?

Functional studies LQ variant: EC 50



Functional studies LQ variant: B max



Conclusions insLQ-LHR:

Breast cancer patients

- worse disease free survival
- interaction ovary and peripheral aromatase

In vitro function

- more sensitive
- higher cell surface expression
- more effective translocation into ER membrane

Polymorphisms: LHR

- In addition, Exon 10 of LHR contains 2 coding SNPs that cause a change in amino acids: Asn 291Ser and Ser312Asn).
- Asn312 has been associated with increased rik of BC (piersma 2007) suggesting a more active LHR;
- Similarly, a lower frequency of the Asn312 allele has been described in infertile men with impaired spermatogenesis (Simoni 2008).

LHR polymorphisms

LH receptor ECD N291 S291



LH receptor

Central to sex differentiation
 Activating vs inactivating mutations
 Polymorphic variants and disease

Récepteurs pour les hormones gonadotropes

. Localisation des mutations dans le récepteur FSH.





UB Kaiser NEJM 2003 **FSHR polymorphisms**

The FSHR harbours more than 900 SNPs arranged in two major linkage disequilibrium blocks.

Polymorphisms and PCOS



Polymorphisms: FSHR (p.N680S)

- Simoni et al 1999
- Perz Mayorga 2000
- Sudo 2002
- De Castro 2003, 2004
- Laven 2003
- Behre 2005
- Falconer 2005
- ► Jun 2006
- Loutradis 2006
- ► De Koning 2006, Yang 2006

Functional genetic polymorphisms and female reproductive disorders: Part I: polycystic ovary syndrome and ovarian response

M. Simoni^{1,5}, C.B. Tempfer², B. Destenaves³ and B.C.J.M. Fauser⁴

Human Reproduction Update, Vol.15, No.1 pp. 97–118, 2009 Advanced Access publication on September 19, 2008 doi:10.1093/humupd/dmn040

human reproduction update

Functional genetic polymorphisms and female reproductive disorders: Part II—endometriosis

C.B. Tempfer^{1,5}, M. Simoni², B. Destenaves³, and B.C.J.M. Fauser⁴

Human Reproduction, Vol.24, No.8 pp. 2014–2022, 2009 Advanced Access publication on April 29, 2009 doi:10.1093/humrep/dep113



Genetic polymorphisms of GnRH and gonadotrophic hormone receptors affect the phenotype of polycystic ovary syndrome

O. Valkenburg^{1,5}, A.G. Uitterlinden^{2,3}, D. Piersma², A. Hofman³, A.P.N. Themmen², F.H. de Jong², B.C.J.M. Fauser⁴, and J.S.E. Laven¹

Polymorphisms: FSHR

- A well known combination of two polymorphisms has been described in exon 10 of the FSHR gene
- As coding SNPs at codon position 307 and 680 (Simoni 1999).
- The minor allele at position 680 (Ser 680) is associated with significantly higher levels of FSH, and altered ovarian response to FSH: N680S or N/N vs S/S (Perez Mayorga 2000)

Polymorphisms: FSHR Ser/Asn 680

Higher frequency of Ser 680 has been reported in anovulatory subjects (Laven 2003).

However, although the FSHR is less responsive, this polymorphism does not modify the response to exogenous FSH.



N680S

Simoni et al.



Figure 5: Serum levels of oestradiol before ovulation induction were significantly lower in women with the Ser/Ser allele variant (group I, n=24) compared to the Asn/Asn allele variant (group III, n=44) of the FSH receptor (lower panel: *significant difference between group I and III). This difference in ovarian response could be overcome by increasing the daily FSH dose from 150U/day to 225U/day (upper panel:*significant higher total FSH dose) in women with the Ser/Ser allele variant (group II, n=25); lower panel: no significant difference between group II and III.

Simoni et al.

Table VI. Comparison of the study designs and outcomes of two conflicting studies investigating the relation between the FSHR polymorphism at amino acid position 680 (Asn/Ser) and pregnancy rate.

	Jun et al. (2006)	Klinkert et al. (2006)
Number of patients	263	105
Status regarding ICSI patients	Not excluded	Excluded
Frequency of unexplained infertility (%)	35.6	25.0
Genotype associated with significantly higher FSH levels	Ser/Ser	No difference
Genotype associated with significantly higher clinical pregnancy rate	Asn/Asn	Ser/Ser

ICSI, intracytoplasmic sperm injection.

Human Reproduction, Vol.24, No.8 pp. 2014-2022, 2009

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human reproduction ORIGINAL ARTICLE Reproductive genetics

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Polymorphisms: PCOS

Gene variant	Rs number	PCR primers		Taqman probes					
GNRHI									
Serl 6Trp	rs6185	Fw	AATTCAAAAACTCCTAGCTGGCCTTA	VIC	CACGCACCAAGTCA				
		Rv	CATAGGACCAGTGCTGGCT	FAM	ACGCACGAAGTCA				
FSHR									
Ala307Thr	rs6165	Fw	GCAACAAATCTATTTTAAGGCAAGAAGTTGA	VIC	TGACCCCTAGTCTGAGTC				
		Rv	TGTCTTCTGCCAGAGAGGATCT	FAM	ACCCCTAGCCTGAGTC				
Asn680Ser	rs6 66	Assay	on demand (Applied Biosystems, C_2676874_10)						
LHR									
Asn291Ser	rs 2470652	Fw	CTGAAGTCCAAAAGCTCAAATGCT	VIC	CAGACAGAATTTTTC				
		Rv	TGTGCTTTCACATTGTTTGGAAAAGT	FAM	CAGACAGAGTTTTTC				
Ser312Asn	rs2293275	Fw	TTTTCCAAACAATGTGAAAGCACAGT	VIC	TTACAGTGTTTTGTTATTCACT				
		Rv	GATACGACTTCTGAGTTTCCTTGCA	FAM	CAGTGTTTTGTTACTCACTT				

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Valkenburg et al 2009

Polymorphisms: GnRH1 in PCOS

- The GnRH1 Trp16 Ser polymorphism was associated with milder forms of PCOS.
- However this polymorphism has no effect on FSH/LH levels
- This argues against a direct effect of this polymorphism on the function of GnRH.

Valkenburg et al 2009

Polymorphisms: PCOS: The most striking association was observed with FSHR



Figure I Median FSH levels in women with PCOS, stratified according to number of allelic variants (FSH receptor Ser⁶⁸⁰ and LH receptor Asn³¹²).

Polymorphisms: Ser 680 in PCOS

- This variant did not constitue a risk allelle for PCOS,
- And no association was found with the number of antral follicules or with AMH levels.
- ► FSH levels were increased in carriers
- but also LH levels.

Polymorphisms: PCOS

The contributions of these polymorphisms to the phenotype of PCOS is small and may only be relevant in conjunction with other genetic variants that contribute to minor phenotypical variation (Simoni 2008).

Gene Polymorphisms

In the coming years, the focus of research will be on the association studies of gene polymorphism with endpoints of disease in cohort of sex differentiation and infertility patients and other patients with aberrations of hormonal homeostasis. **Acknowledgements**

► APN Themmen, Erasmus University