

Viszeralmedizin 2015
16.-19. September
Leipzig

Genetische Grundlagen, neue Erkenntnisse der Forschung und Besonderheiten des Krankheitsverlaufs

J. Rosendahl
Universitätsklinik für Innere Medizin I
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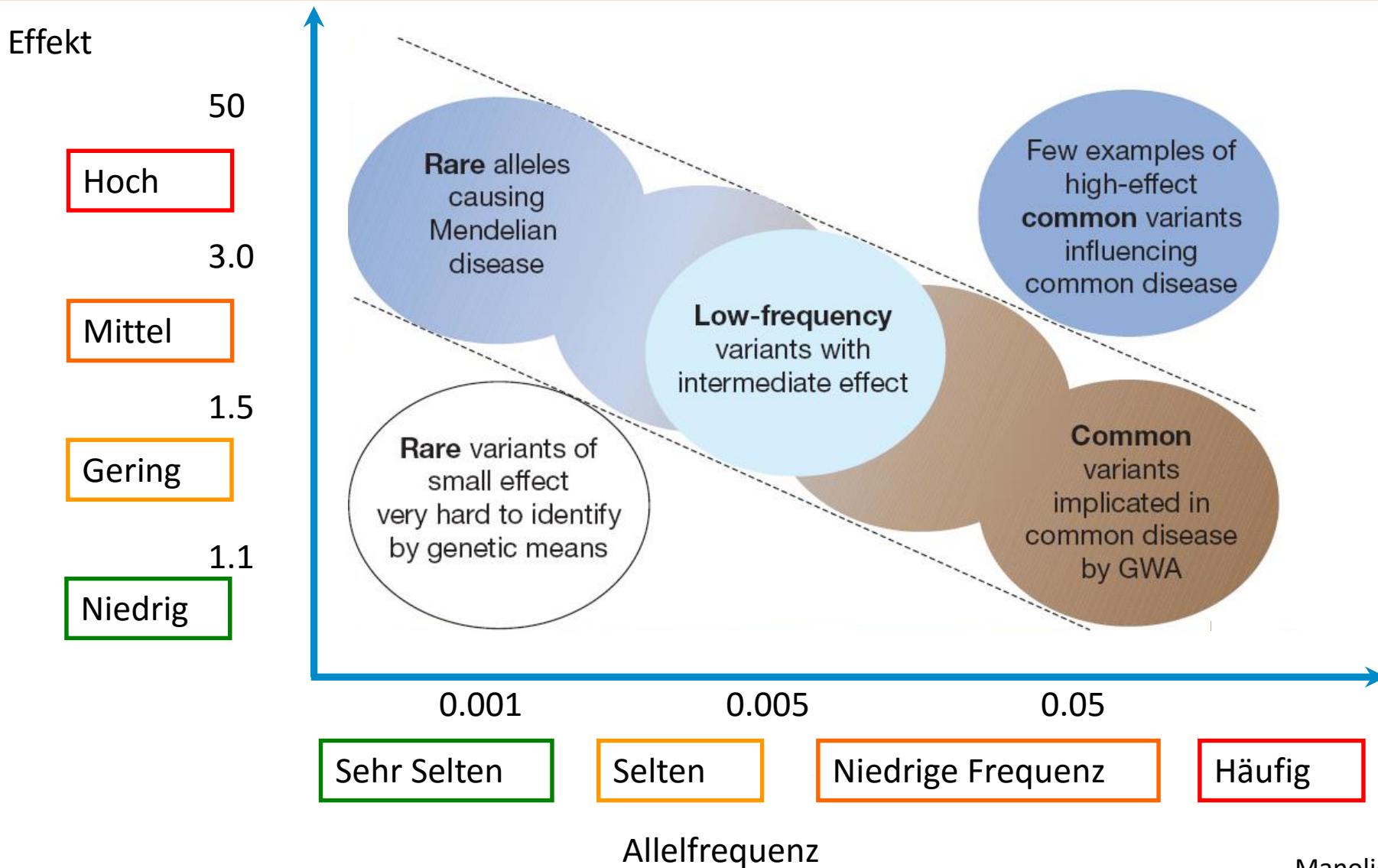


Martin-Luther-Universität
Halle-Wittenberg

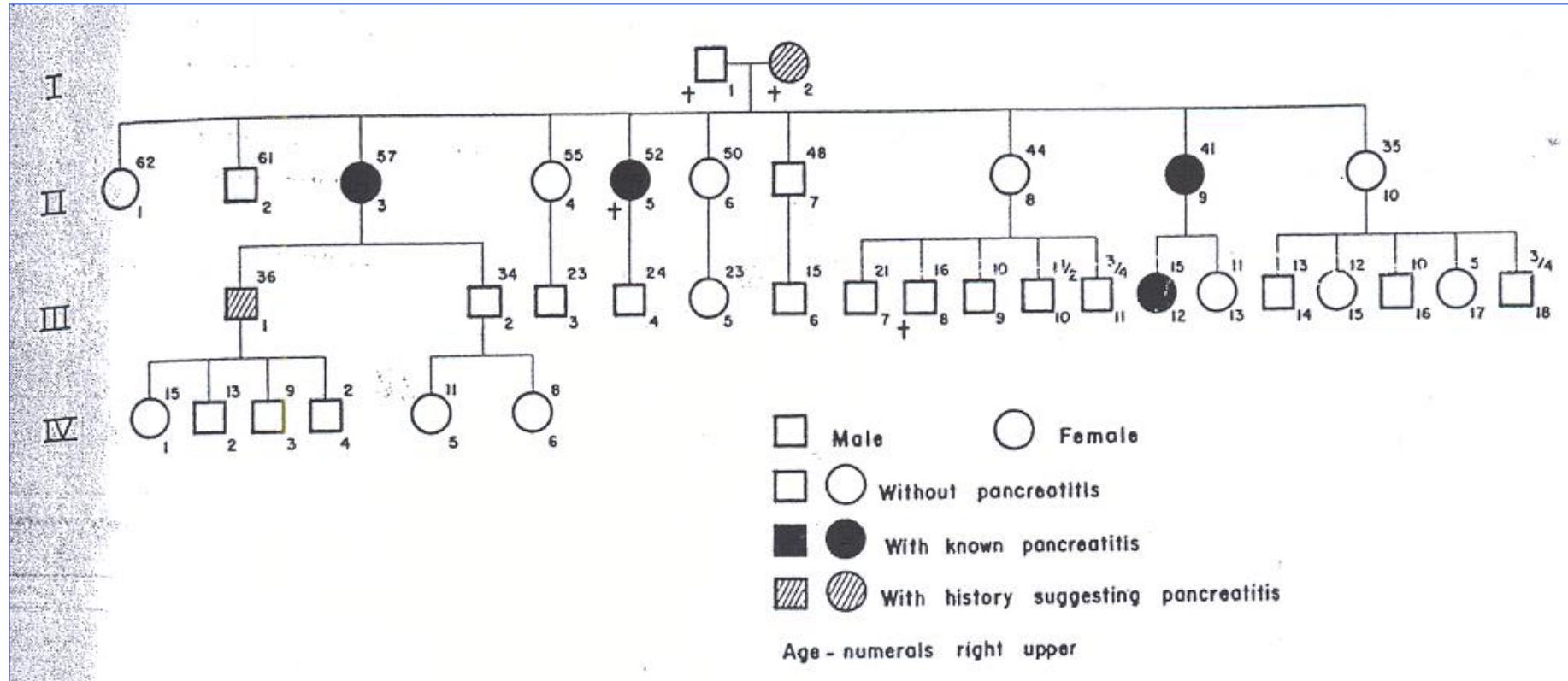


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Genetische Studien



Hereditäre Pankreatitis

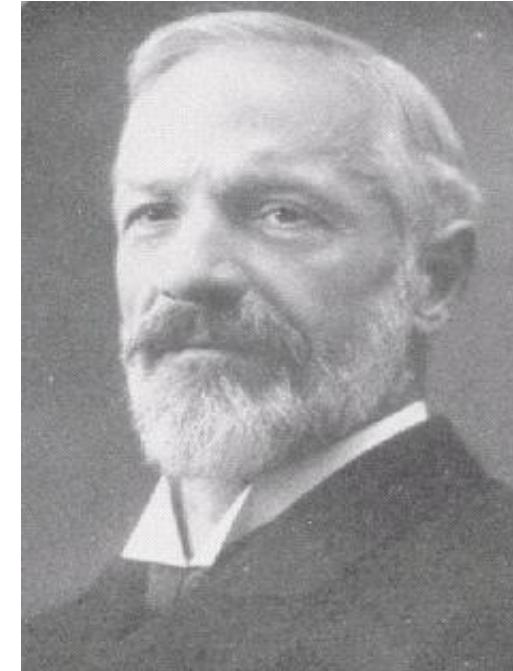


Pathogenese

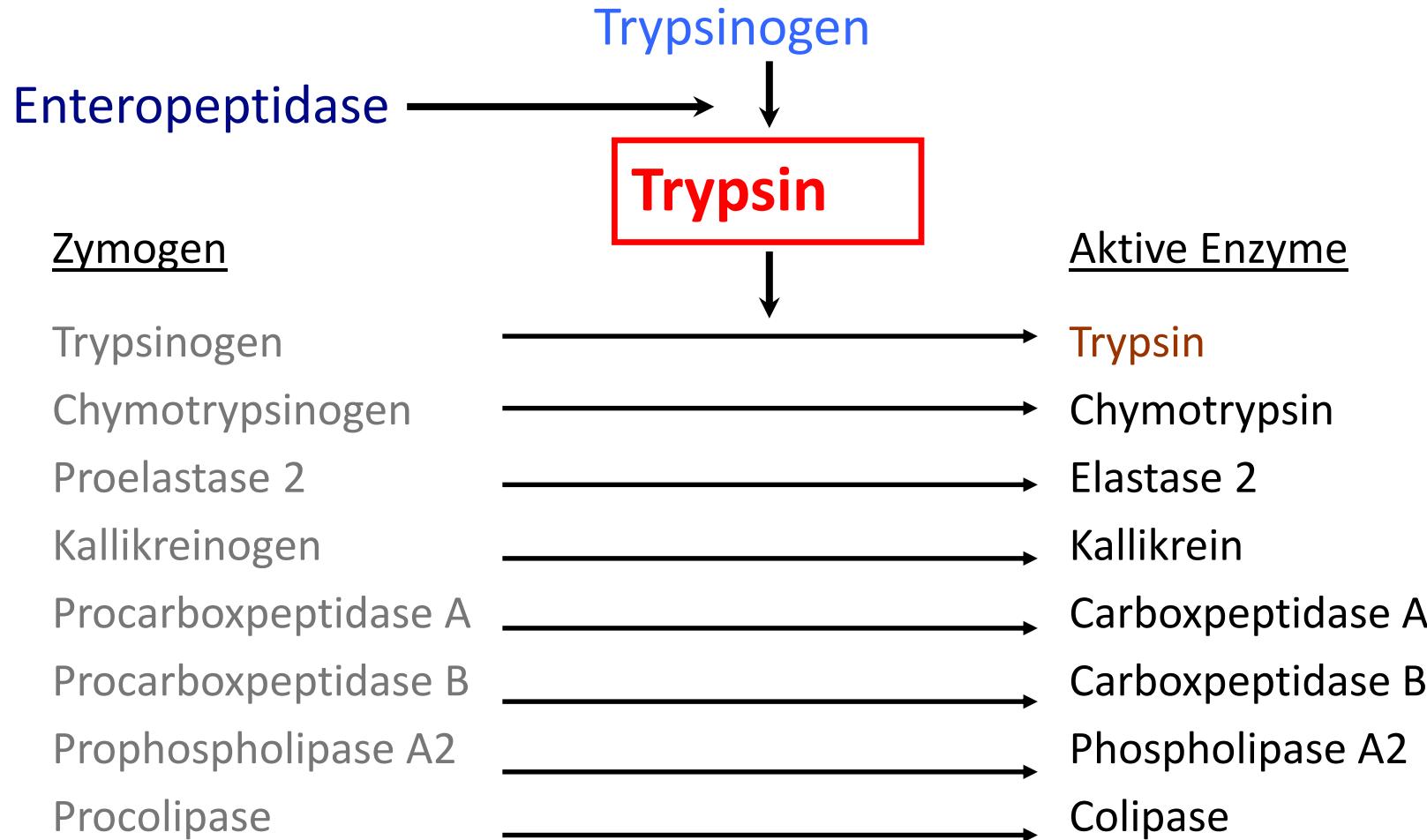
Hans Chiari (*1851-†1916)

"...eine herdweise Nekrose des Pankreas durch Autodigestion entstehen könne, an die sich eine reactive Pancreatitis interstitialis chronica anschliesst..."

Über Selbstverdauung des menschlichen Pankreas.
Hans Chiari, Zeitschrift für Heilkunde 1896;17:69-96



Verdauungsenzymkaskade

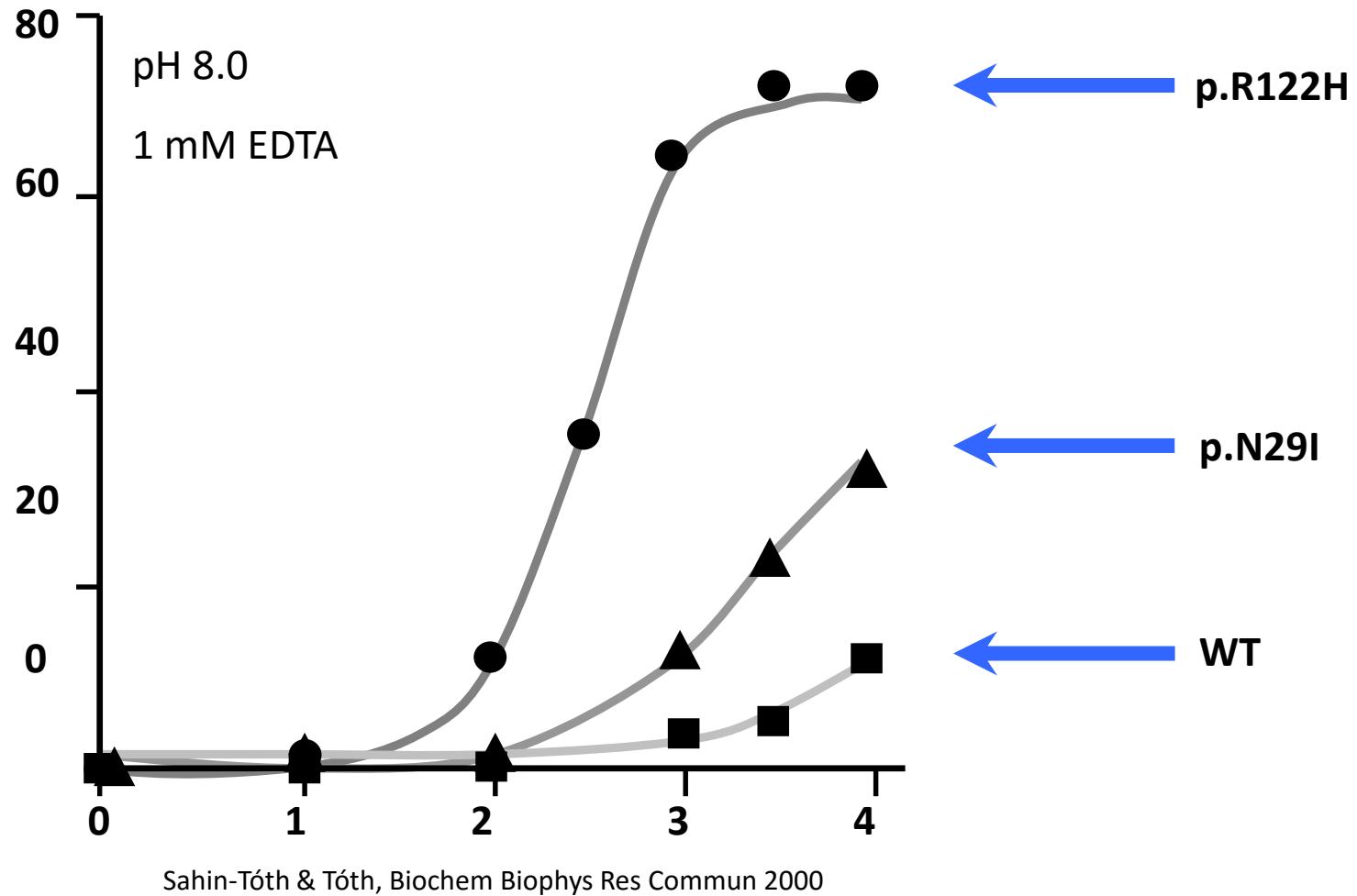


Kationisches Trypsinogen - PRSS1

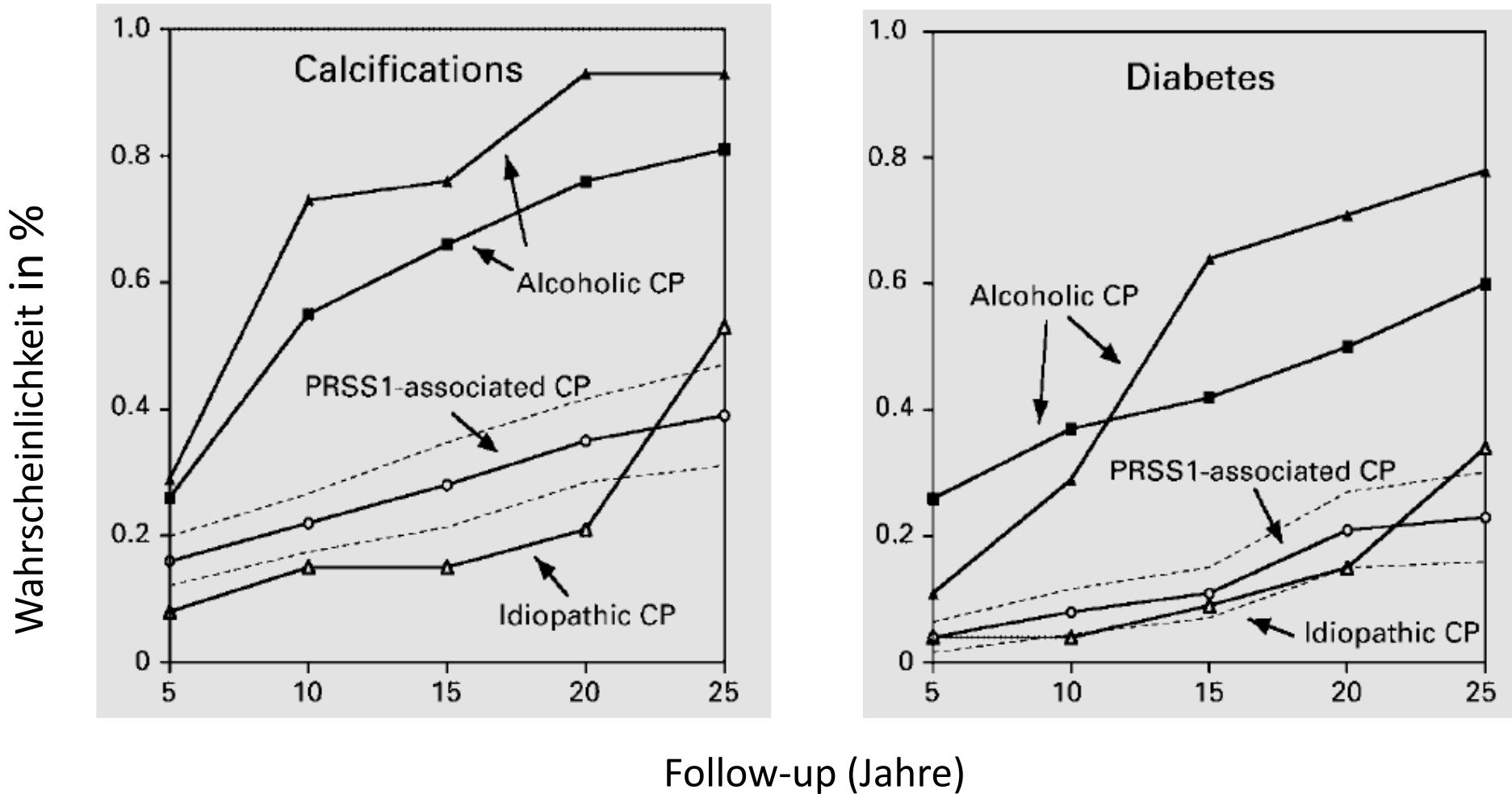


Modified from Whitcomb *et al.*, Nat Genet 1996

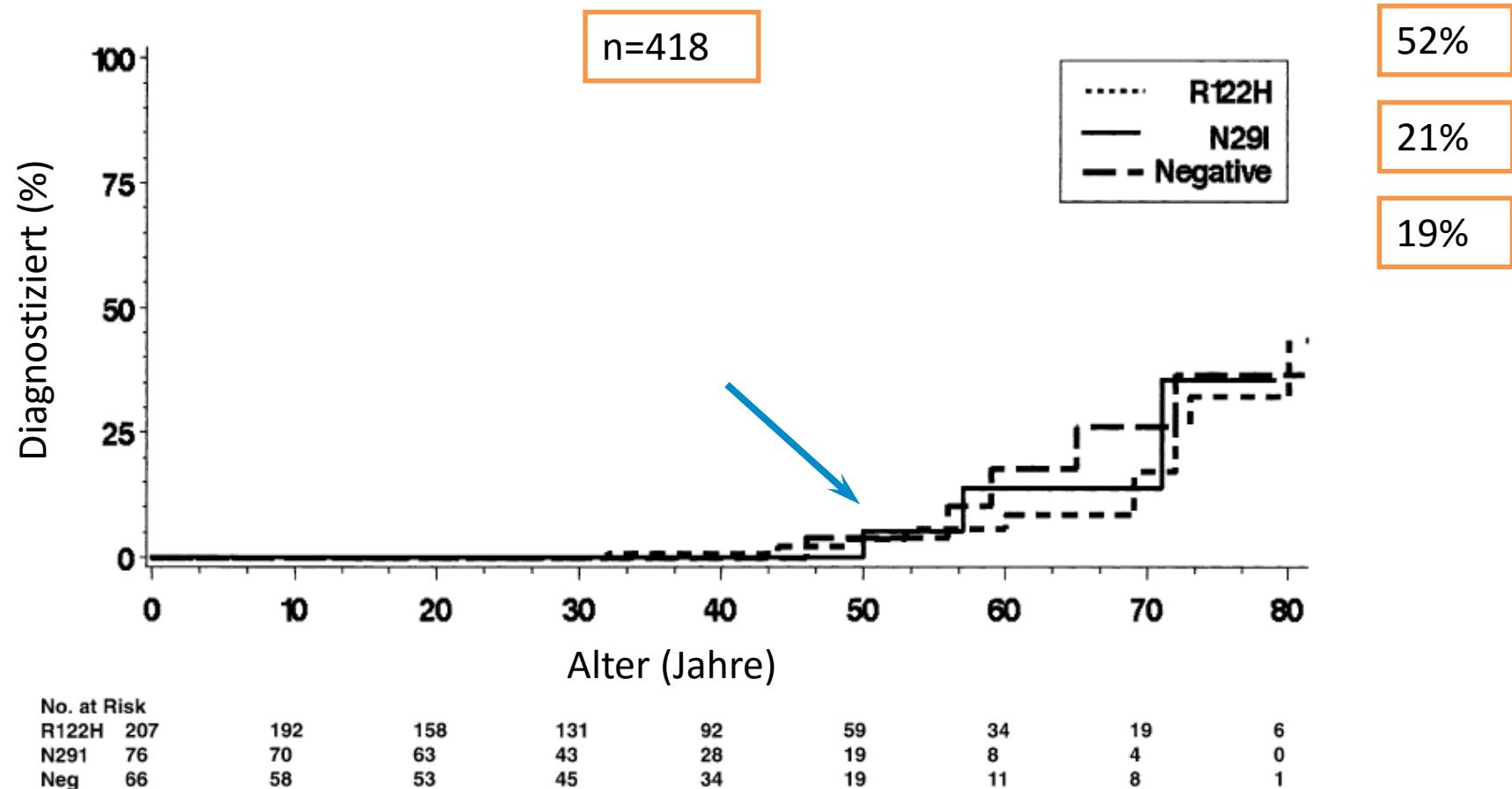
Gesteigerte Autoaktivierung - PRSS1



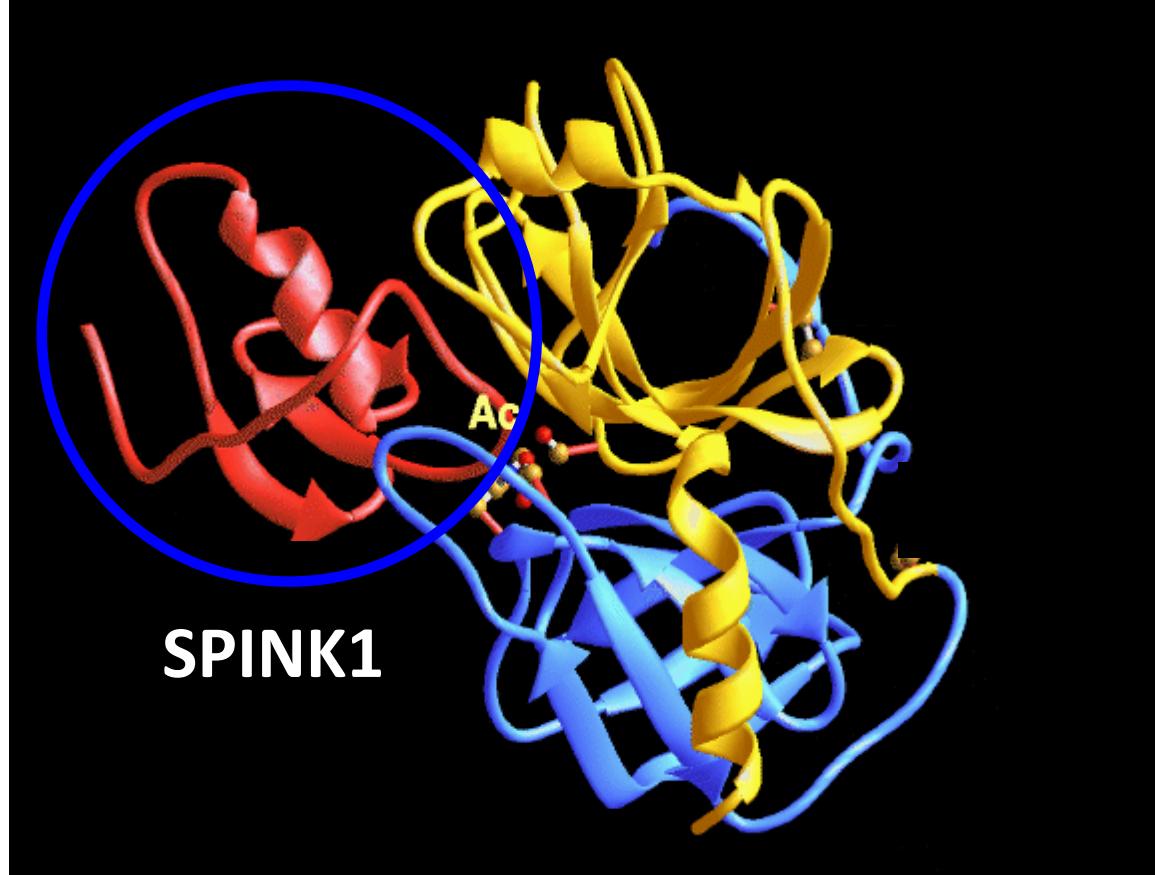
Verlauf der CP - Genetik vs. Alkohol

Keim *et al.*, Dig Dis 2003

Pankreaskarzinom bei HP - EUROPAC



SPINK1

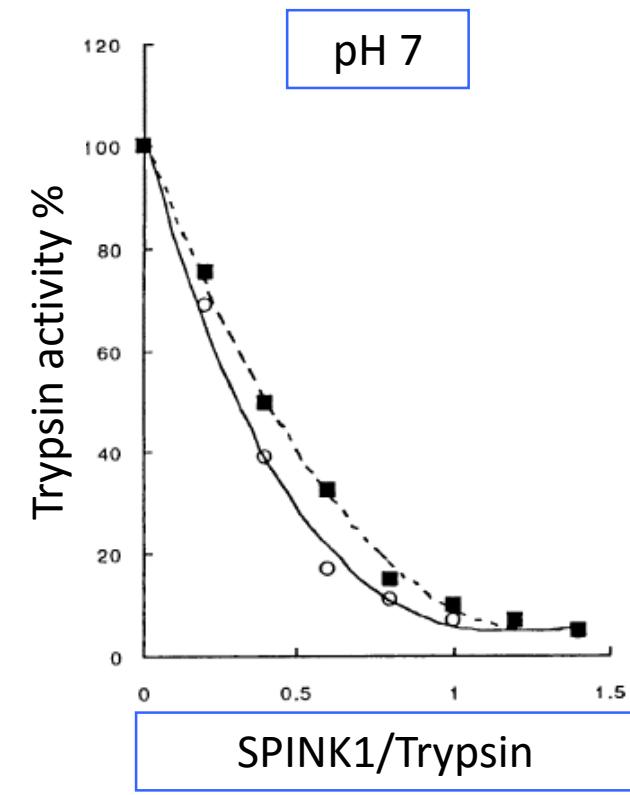
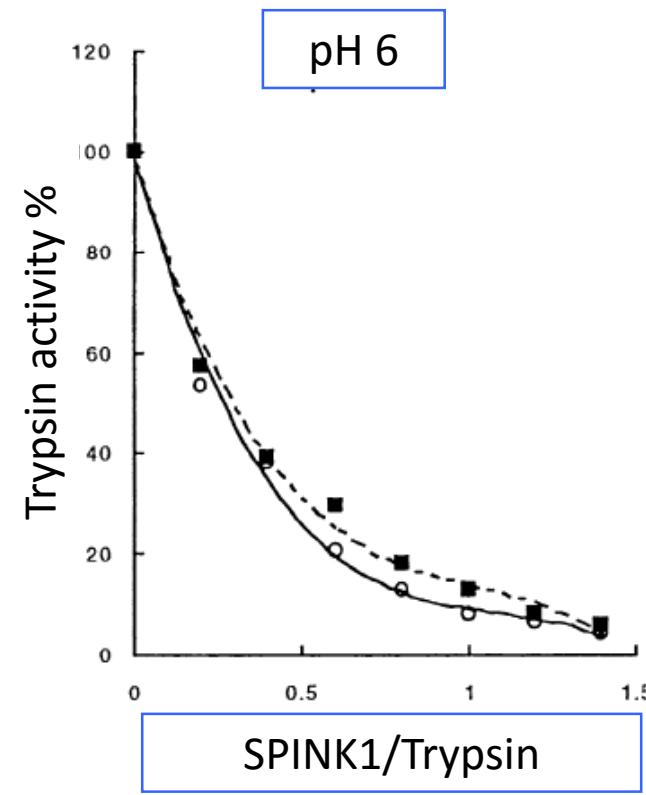
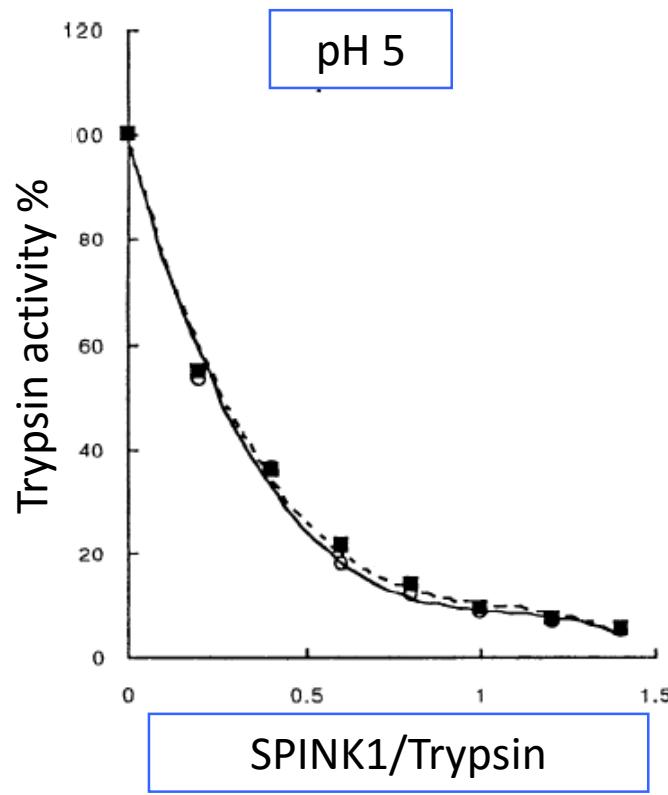


Modified from Whitcomb *et al.*, Nat Genet 1996

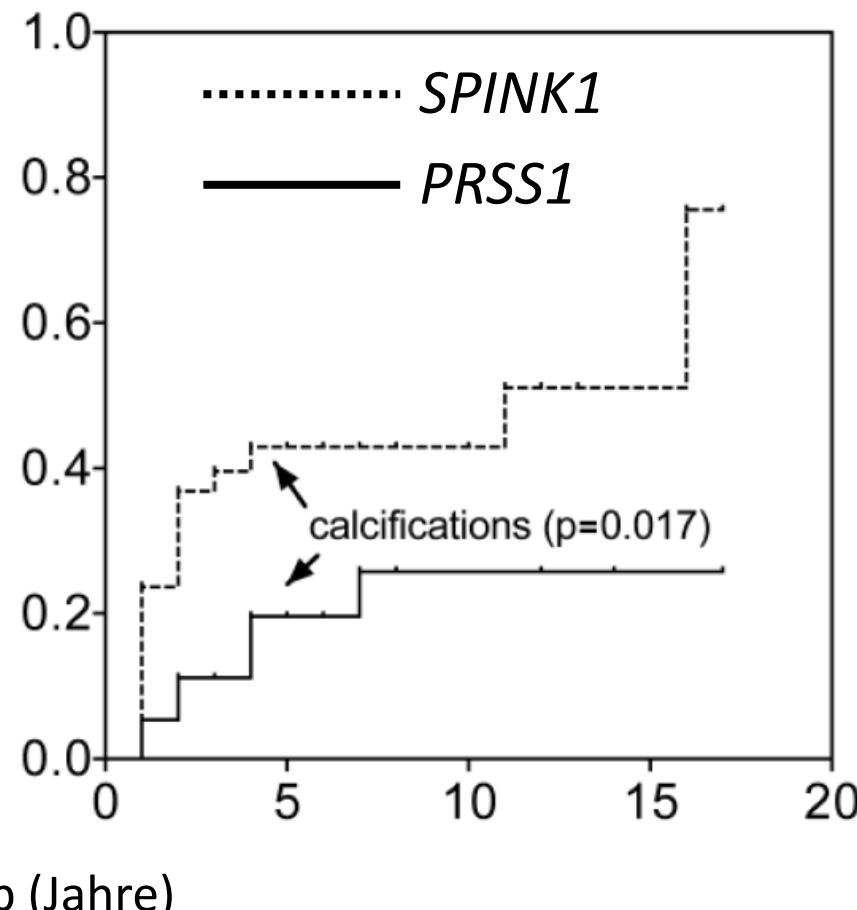
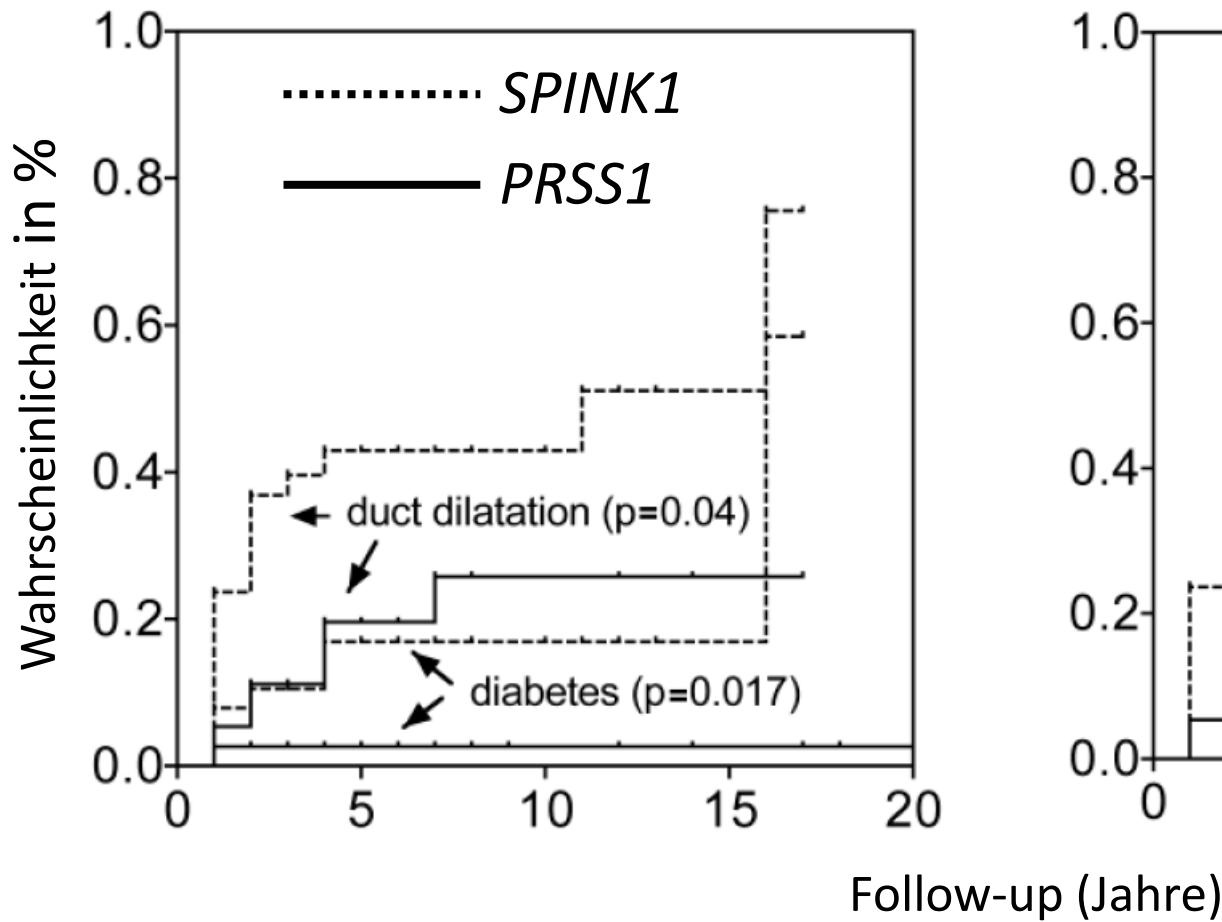
Inhibitorische Kapazität

WT —

p.N34S - - -

Modified from Kuwata *et al.*, J Gastroenterol 2002

Verlauf der CP- PRSS1 - SPINK1



Keim et al., JOP 2003



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Chymotrypsinogen C - CTRC

CHYMOTRYPSIN C (CALDECRIN) STIMULATES AUTOACTIVATION OF HUMAN CATONIC TRYPSINOGEN

Zsófia Nemoda and Miklós Sahin-Tóth

Department of Molecular and Cell Biology, Boston University, Goldman School of Dental Medicine,
Boston, MA, 02118

Running title: Chymotrypsin C stimulates trypsinogen autoactivation

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Chymotrypsin C (caldecrin) promotes degradation of human cationic trypsin: Identity with Rinderknecht's enzyme Y

Richárd Szmola and Miklós Sahin-Tóth*

Department of Molecular and Cell Biology, Goldman School of Dental Medicine, Boston University, Boston, MA 02118

Communicated by Phillips W. Robbins, Boston Medical Center, Boston, MA, May 2, 2007 (received for review March 19, 2007)



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Chymotrypsinogen C - CTRC

LETTERS

nature
genetics

Chymotrypsin C (CTRC) variants that diminish activity or secretion are associated with chronic pancreatitis

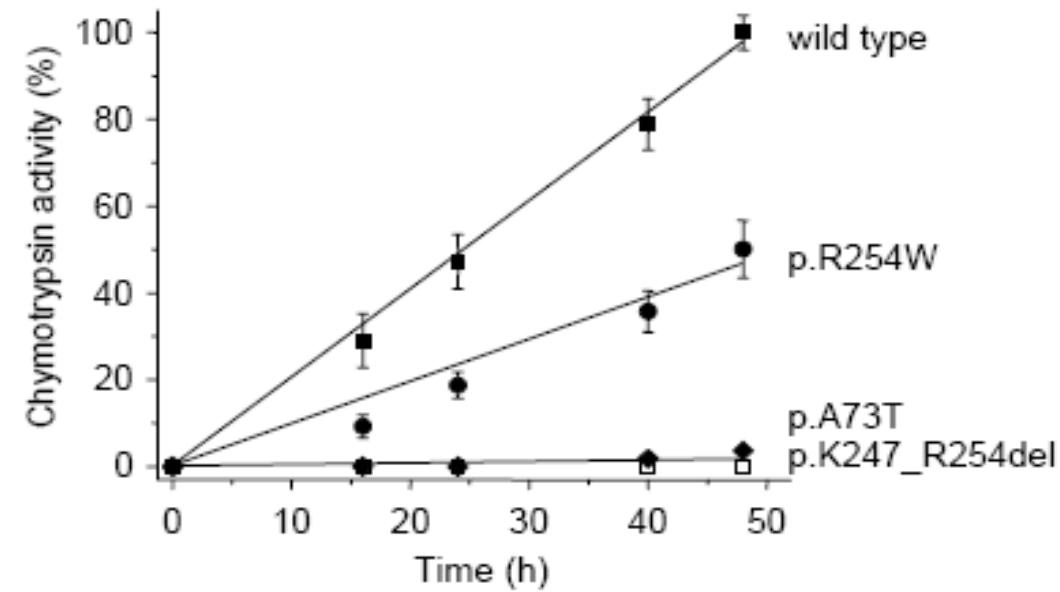
Jonas Rosendahl^{1,23}, Heiko Witt^{2,23}, Richárd Szmola^{3,23}, Eesh Bhatia⁴, Béla Ózsvári^{3,5}, Olfert Landt⁶, Hans-Ulrich Schulz⁷, Thomas M Gress⁸, Roland Pfützer⁹, Matthias Löhr¹⁰, Peter Kovacs¹¹, Matthias Blüher¹², Michael Stumvoll¹², Gourdas Choudhuri¹³, Péter Hegyi⁵, René HM te Morsche¹⁴, Joost PH Drenth¹⁴, Kaspar Truninger¹⁵, Milan Macek Jr¹⁶, Gero Puhl¹⁷, Ulrike Witt¹⁷, Hartmut Schmidt¹⁸, Carsten Büning¹⁹, Johann Ockenga¹⁹, Andreas Kage²⁰, David Alexander Groneberg²¹, Renate Nickel²², Thomas Berg², Bertram Wiedenmann², Hans Bödeker¹, Volker Keim¹, Joachim Mössner¹, Niels Teich^{1,23} & Miklós Sahin-Tóth^{3,23}

Vorwiegend Varianten in Exon 7 (Europa)

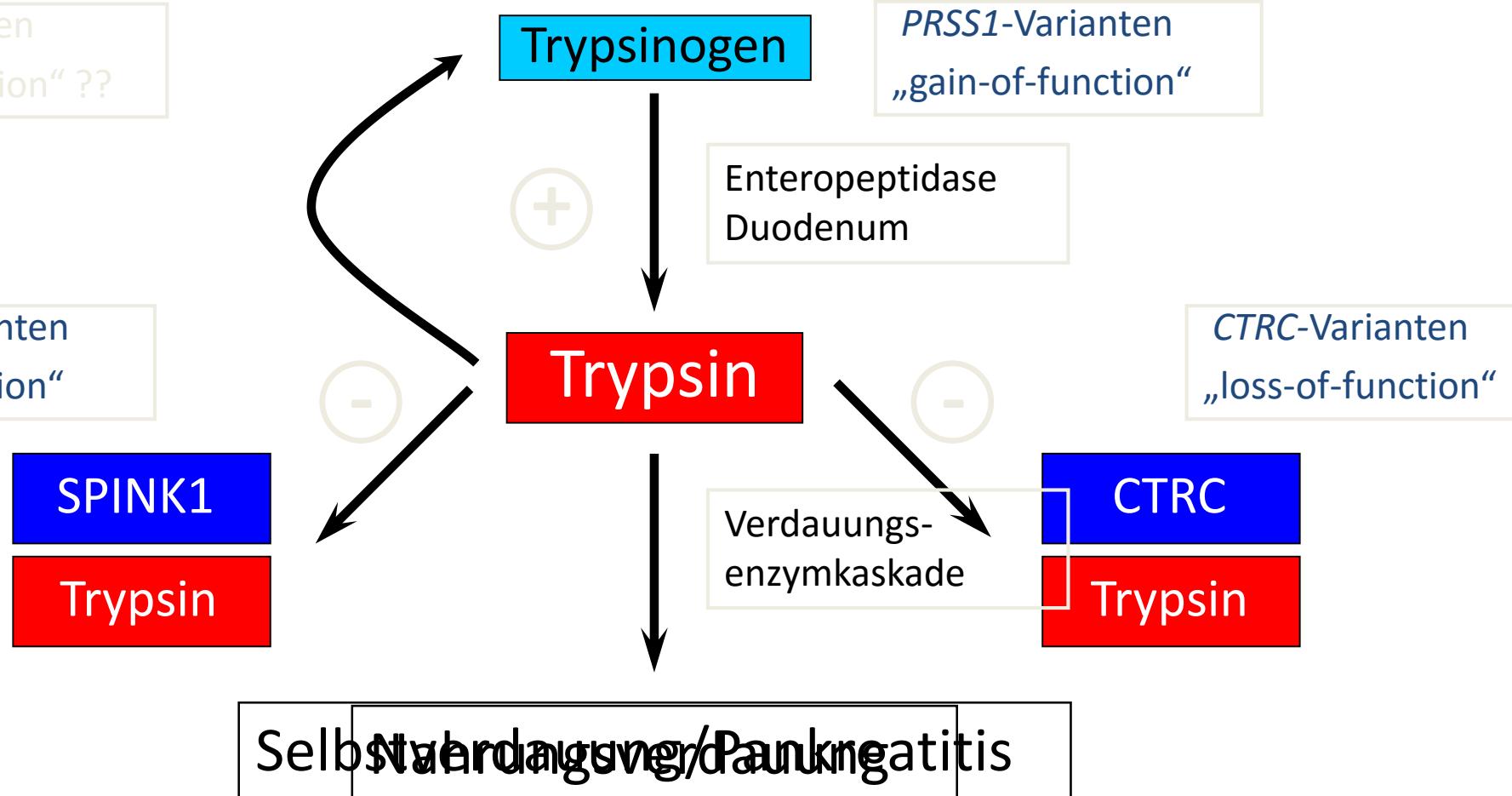
Exon	Nucleotide-substitution	Variant	Patients	Controls	P-value	OR	95% CI
2	c.103G>C	p.D35H	0/901 (0%)	1/2689 (0.04%)	1.0	-	-
2	c.103G>A	p.D35N	0/901 (0%)	1/2689 (0.04%)	1.0	-	-
2	c.110G>A	p.R37Q	6/901 (0.7%)	10/2689 (0.4%)	0.25	-	-
3	c.143A>G	p.K172E	3/901 (0.2%)	1/2689 (0.04%)	0.15	-	-
30/901 (3.3%) Patienten v.s. 21/2804 (0.7%) Kontrollen		P-Wert = 1.3 x 10⁻⁷, OR = 4.6, 95% CI = 2.6-8.0					
4	c.308delG	p.G103VfsX31	1/621 (0.2%)	0/614 (0%)	1.0	-	-
6	c.514A>G	p.K172E	0/621 (0%)	1/614 (0.2%)	0.5	-	-
7	c.649G>A	p.G217S	2/901 (0.2%)	1/2804 (0.04%)	0.15	-	-
7	c.652G>A	p.G218S	0/901 (0%)	1/2804 (0.04%)	1.0	-	-
7	c.659T>G	p.L220R	0/901 (0%)	1/2804 (0.04%)	1.0	-	-
7	c.674A>C	p.E225A	0/901 (0%)	1/2804 (0.04%)	1.0	-	-
7	c.703G>A	p.V235I	1/901 (0.1%)	1/2804 (0.04%)	0.43	-	-
7	c.760C>T	p.R254W	19/901 (2.1%)	18/2804 (0.6%)	0.0004*	3.3	1.7-6.4
7	c.738_761del24	p.K247_R254del	11/901 (1.2%)	3/2804 (0.1%)	0.00003*	11.5	3.2-41.5

Verminderte Aktivität und Expression

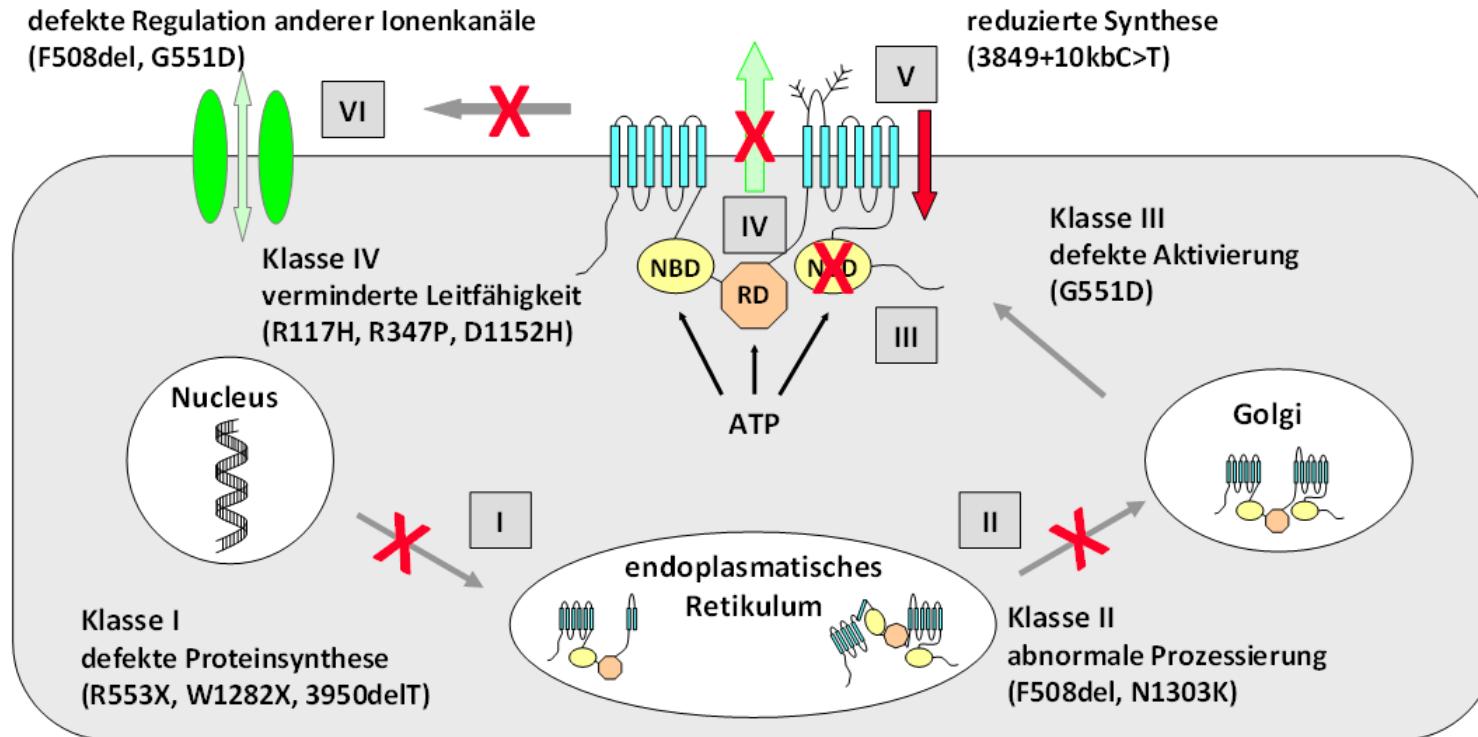
CTRC Aktivität



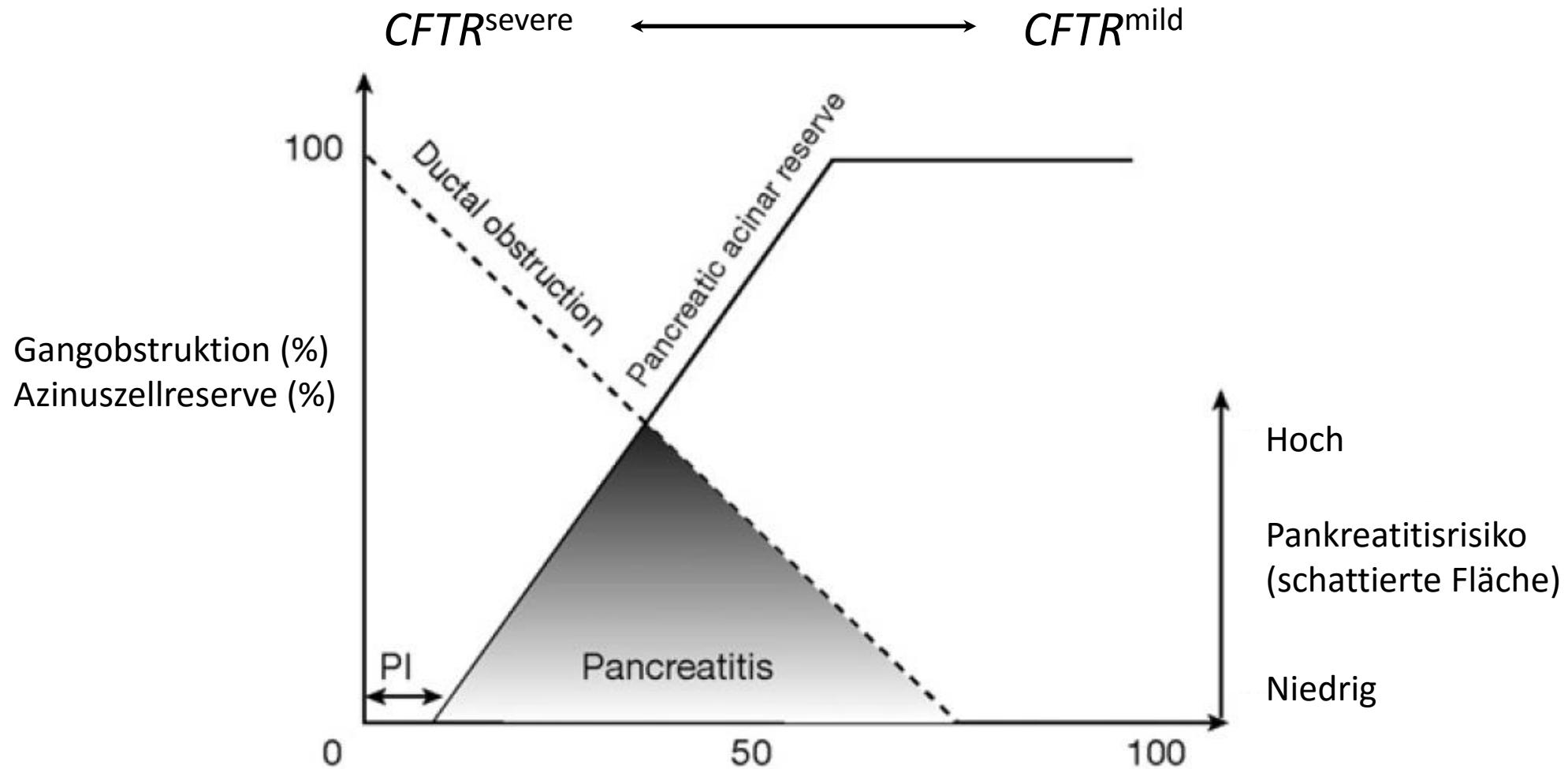
Nachteilige Störung - Physiologisch



CFTR - Mutationsklassen



CFTR - Kompliziert?



CFTR - Überschätzter Einfluß?

1. **CFTR - CF-verursachend (hart)** - 8,3% Patienten (55/660) vs. 3% (53/1,758) Kontrollen

OR 2,9, 95% CI 2-4,3

2. **CFTR - CF-verursachend (mild)** - 3,5% Patienten (23/660) vs. 0,8% Kontrollen (14/1758)

OR 4,5, 95% CI 2,3-8,8

3. **CFTR - Nicht CF-verursachend** - 3,8% Patienten (25/660) vs. 2,6% Kontrollen (45/1758)

P-Wert nicht signifikant

CFTR - Überschätzter Einfluß?

1. **CFTR - CF-verursachend (hart)** - 8,3% Patienten (55/662) vs. 3% (53/1,758) Kontrollen

OR 2.9, 95% CI 2-4,3

2. **CFTR - CF-verursachend (mild)** - 3,6% Patienten (24/662) vs. 0.8% Kontrollen (14/1758)

OR 4.7, 95% CI 2,4-9,1

3. **CFTR - Nicht CF-verursachend** - 4,1% Patienten (27/662) vs. 2,6% Kontrollen (45/1758)

P-Wert nicht signifikant

4. **CFTR - Alle (ohne. p.R75Q, p.E528E)** - 15,6% Pat. (103/660) vs. 6,4% Kon. (112/1758)

OR 2,7, 95% CI 2-3,6

Carboxypeptidase A1

LETTERS

nature
genetics

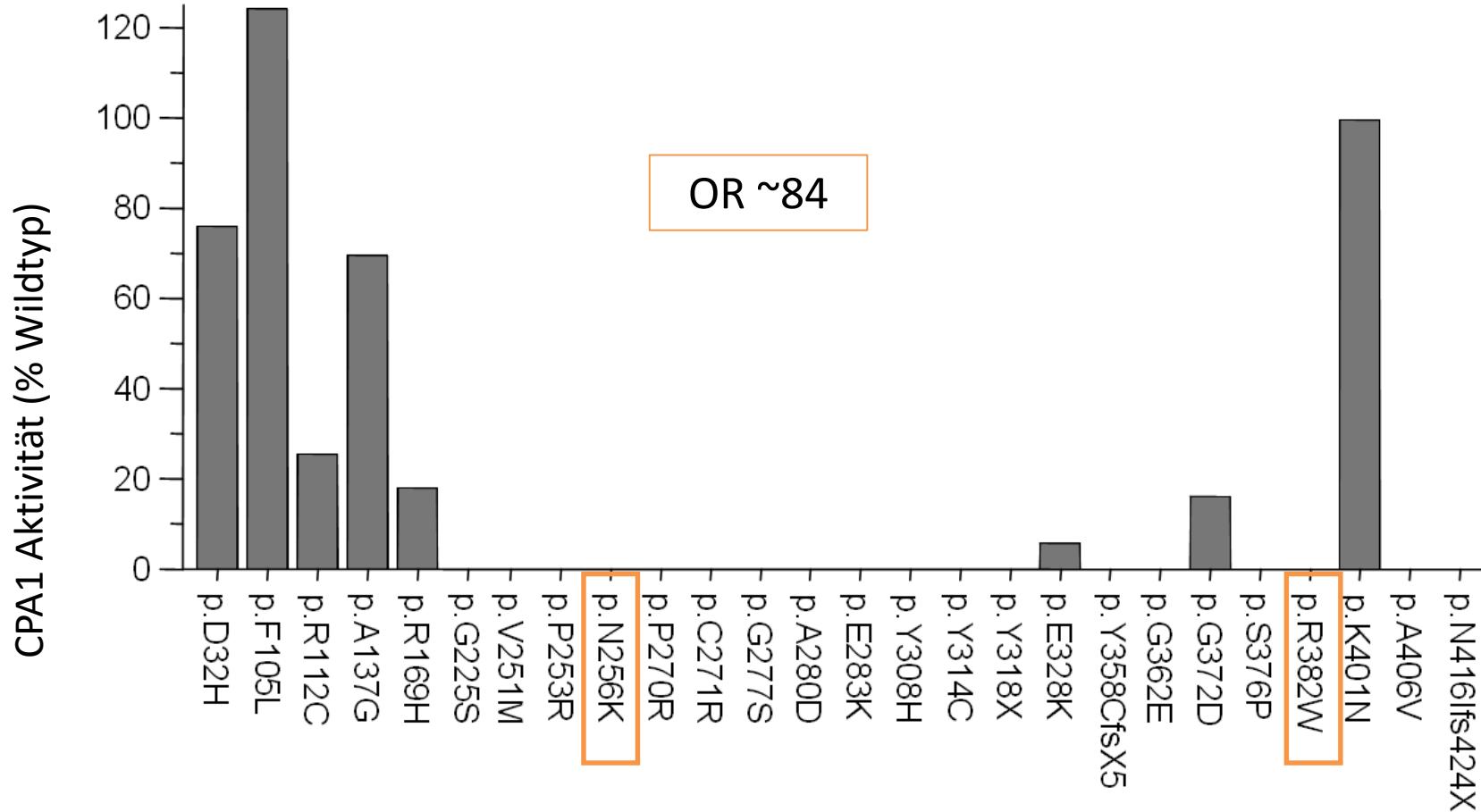
Variants in CPA1 are strongly associated with early onset chronic pancreatitis

Heiko Witt¹⁻³, Sebastian Beer^{4,44}, Jonas Rosendahl^{5,44}, Jian-Min Chen^{6,7,44}, Giriraj Ratan Chandak^{8,44}, Atsushi Masamune^{9,44}, Melinda Bence^{4,44}, Richárd Szmola^{4,10,44}, Grzegorz Oracz¹¹, Milan Macek Jr¹², Eesh Bhatia¹³, Sandra Steigenberger^{1,2}, Denise Lasher^{1,2}, Florence Bühler^{1,2}, Catherine Delaporte^{1,2}, Johanna Tebbing^{1,2}, Maren Ludwig^{1,2}, Claudia Pilsak^{1,2}, Karolin Saum^{1,2}, Peter Bugert¹⁴, Emmanuelle Masson^{6,7}, Sumit Paliwal⁸, Seema Bhaskar⁸, Agnieszka Sobczynska-Tomaszewska^{15,16}, Daniel Bak¹⁶, Ivan Balascak¹⁷, Gourdas Choudhuri¹⁸, D Nageshwar Reddy¹⁹, G Venkat Rao¹⁹, Varghese Thomas²⁰, Kiyoshi Kume⁹, Eriko Nakano⁹, Yoichi Kakuta⁹, Tooru Shimosegawa⁹, Lukasz Durko²¹, András Szabó⁴, Andrea Schnúr^{4,22}, Péter Hegyi²², Zoltán Rakonczay Jr²², Roland Pfützer²³, Alexander Schneider²⁴, David Alexander Groneberg²⁵, Markus Braun²⁵, Hartmut Schmidt²⁶, Ulrike Witt²⁷, Helmut Friess²⁷, Hana Algül²⁸, Olfert Landt²⁹, Markus Schuelke^{30,31}, Renate Krüger³², Bertram Wiedenmann³³, Frank Schmidt³⁴, Klaus-Peter Zimmer³⁵, Peter Kovacs^{36,37}, Michael Stumvoll^{36,37}, Matthias Blüher^{36,37}, Thomas Müller³⁸, Andreas Janecke^{38,39}, Niels Teich⁴⁰, Robert Grützmann⁴¹, Hans-Ulrich Schulz⁴², Joachim Mössner⁵, Volker Keim⁵, Matthias Löhr⁴³, Claude Férec^{6,7} & Miklós Sahin-Tóth⁴

Carboxypeptidase A1

Age of cases	Cases (%)	Controls (%)	P	OR	95% CI
All	29/944 (3.1)	5/3,938 (0.1)	1.5×10^{-16}	24.9	9.6–64.6
>20 years	2/358 (0.6)	5/3,938 (0.1)	0.2	–	–
≤20 years	27/586 (4.6)	5/3,938 (0.1)	6.8×10^{-20}	38.0	14.6–99.1
≤10 years	22/228 (9.7)	5/3,938 (0.1)	4.1×10^{-24}	84.0	31.5–224.1

CPA1 Varianten - Funktionelle Untersuchung



Erste GWAS bei CP

LETTERS

nature
genetics

Common genetic variants in the *CLDN2* and *PRSS1-PRSS2* loci alter risk for alcohol-related and sporadic pancreatitis

David C Whitcomb¹⁻³, Jessica LaRusch¹, Alyssa M Krasinskas⁴, Lambertus Klei⁵, Jill P Smith⁶, Randall E Brand¹, John P Neoptolemos⁷, Markus M Lerch⁸, Matt Tector⁹, Bimaljit S Sandhu¹⁰, Nalini M Guda⁹, Lidiya Orlichenko¹, Alzheimer's Disease Genetics Consortium¹¹, Samer Alkaade¹², Stephen T Amann¹³, Michelle A Anderson¹⁴, John Baillie¹⁵, Peter A Banks¹⁶, Darwin Conwell¹⁶, Gregory A Coté¹⁷, Peter B Cotton¹⁸, James DiSario¹⁹, Lindsay A Farrer^{20,89,90,95}, Chris E Forsmark²¹, Marianne Johnstone⁷, Timothy B Gardner²², Andres Gelrud¹, William Greenhalf⁷, Jonathan L Haines^{23,24}, Douglas J Hartman⁴, Robert A Hawes¹⁸, Christopher Lawrence¹⁸, Michele Lewis²⁵, Julia Mayerle⁸, Richard Mayeux^{26,27}, Nadine M Melhem⁵, Mary E Money²⁸, Thiruvengadam Muniraj²⁹, Georgios I Papachristou¹, Margaret A Pericak-Vance^{30,31}, Joseph Romagnuolo¹⁸, Gerard D Schellenberg³², Stuart Sherman¹⁷, Peter Simon⁸, Vijay P Singh¹, Adam Slivka¹, Donna Stolz², Robert Sutton⁷, Frank Ulrich Weiss⁸, C Mel Wilcox³³, Narcis Octavian Zarnescu¹, Stephen R Wisniewski³⁴, Michael R O'Connell¹, Michelle L Kienholz¹, Kathryn Roeder³⁵, M Michael Barmada³, Dhiraj Yadav¹ & Bernie Devlin^{3,5}

GWAS - Ergebnisse

CHR	SNP	BP	CP + RAP		CP		CP + RAP		CP + RAP			
			Allele Frequency (A1)		Stage 1		Stage 2		Combined			
			A1	A2	cases	controls	OR	se(OR)	P	OR	se(OR)	P
7	rs10273639	142456928	T	C	0.350	0.424	0.712	0.044	3.0×10^{-8}	0.748	0.039	7.5×10^{-8}
X	rs7057398	106144529	C	T	0.374	0.281	1.493	0.075	1.4×10^{-15}	1.210	0.066	1.8×10^{-5}
X	rs12688220	106244767	T	C	0.367	0.261	1.612	0.081	2.4×10^{-21}	1.238	0.073	2.3×10^{-6}
										0.734	0.029	2.0×10^{-14}
										1.321	0.049	4.6×10^{-17}
										1.385	0.054	2.3×10^{-22}

OR ~0,73-1,38



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Carboxylesterlipase - CEL

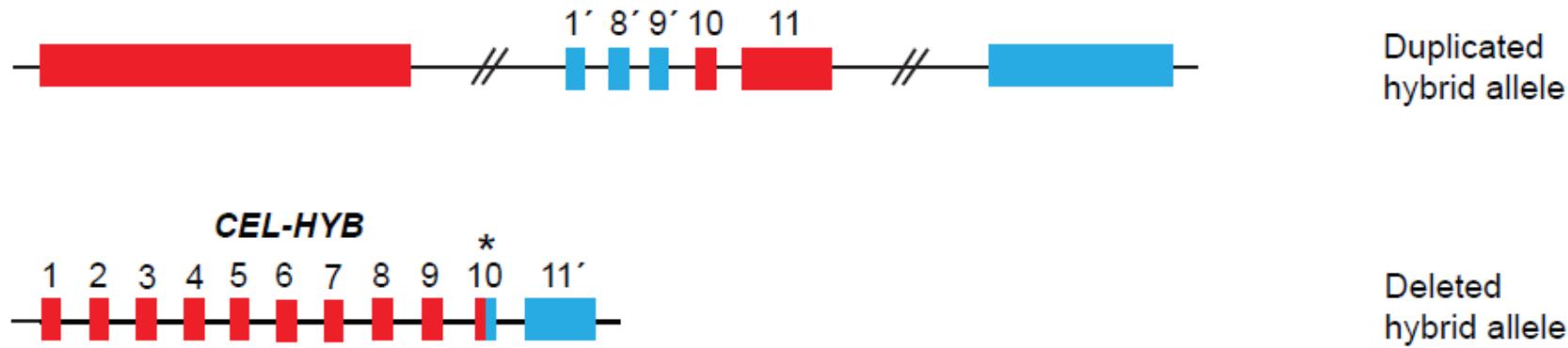
LETTERS

nature
genetics

A recombined allele of the lipase gene *CEL* and its pseudogene *CELP* confers susceptibility to chronic pancreatitis

Karianne Fjeld^{1,2}, Frank Ulrich Weiss^{3,25}, Denise Lasher^{4,5,25}, Jonas Rosendahl^{6,25}, Jian-Min Chen^{7-9,25}, Bente B Johansson^{1,2}, Holger Kirsten¹⁰⁻¹², Claudia Ruffert^{6,13,14}, Emmanuelle Masson^{7,15}, Solrun J Steine^{1,16}, Peter Bugert¹⁷, Miriam Cnop^{18,19}, Robert Grützmann²⁰, Julia Mayerle³, Joachim Mössner⁶, Monika Ringdal^{1,2}, Hans-Ulrich Schulz²¹, Matthias Sendler³, Peter Simon³, Paweł Sztromwasser^{1,2,22}, Janniche Torsvik^{1,2}, Markus Scholz^{11,12}, Erling Tjora^{1,23}, Claude Férec^{7-9,15}, Heiko Witt^{4,5}, Markus M Lerch³, Pål R Njølstad^{1,23}, Stefan Johansson^{1,2} & Anders Molven^{1,16,24}

CEL - Hybrid Allel



CEL - Hyb Allel

Table 1 Carrier frequencies of the CEL-HYB variant in German and French subjects with chronic pancreatitis

Patient material	Cases		Controls		OR	CI	<i>P</i> value*
	+/N	%	+/N	%			
Discovery cohort a	10/71	14.1	5/478	1.0	15.5	5.1 – 46.9	1.3×10^{-6}
ICP/FCP cohort 1 b	22/474	4.6	16/2362	0.7	7.1	3.7 – 13.7	3.4×10^{-9}
ICP/FCP cohort 2 c	11/252	4.4	5/569	0.9	5.1	1.8 – 15.0	0.002
ICP/FCP cohort 3 d	9/339	2.7	9/1221	0.7	3.7	1.4 – 9.3	0.007
Meta-analysis**	-	-	-	-	6.4	4.1 - 9.9	1.1×10^{-16}
Alcoholic CP cohort*** e	15/853	1.8	26/3409	0.8	2.3	1.2 – 4.4	0.008

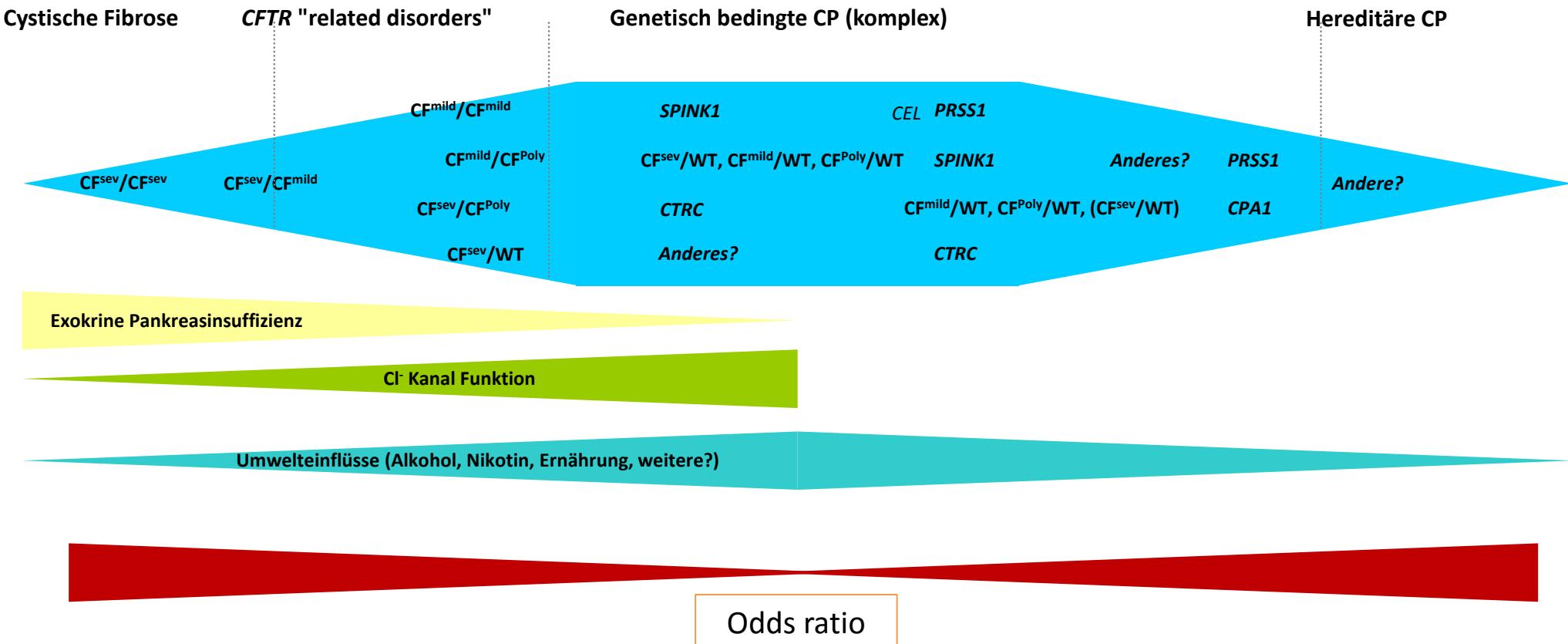
* Two-tailed Fisher's exact test

** Fixed effect model using the method of Mantel and Haenszel (Stata metan command)
 $Z = 8.29$, Heterogeneity chi-squared = 4.09 (d.f. = 3), $p = 0.252$,
I-squared (variation in OR attributable to heterogeneity) = 26.7%

*** One-tailed Fisher's exact test.

OR ~2,3-6,4

CP - Genetik und Umwelt


Modifiziert nach Rosendahl *et al.*, Gut 2012



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Vielen Dank!



Statement 2 – 1-6

Statement 2 – 2-1

Statement 2 – 2-3

Eine Mutationsanalyse auf Veränderungen im SPINK1-Gen, CFTR-Gen, CTRC-Gen oder einer anderen assoziierten Genveränderungen kann im Rahmen von Forschungsprojekten oder zur vertieften Ursachenabklärung erfolgen.

[Evidenzgrad 3b, Empfehlungsgrad C, Konsens]

[Evidenzgrad 3b, Empfehlungsgrad B, Konsens]

15 % in der gesunden Bevölkerung. Somit stellen CFTR-Mutationen einen Risikofaktor für die chronische idiopathische Pankreatitis dar.

[Evidenzgrad 3b, starke Konsens]

Patientencharakteristika

	Alcohol-related pancreatitis ^a	CP	RAP	CP + RAP
Stage 1	All cases	676	–	676
	Yes	264	–	264
	No	411	–	411
	Unknown	1	–	1
Stage 2	All cases	331	579	910
	Yes	70	113	183
	No	256	462	718
	Unknown	5	4	9
Combined	All cases	930	579	1,506
	Yes	334	113	447
	No	667	462	1,129
	Unknown	6	4	10

CFTR - Chronische Pankreatitis



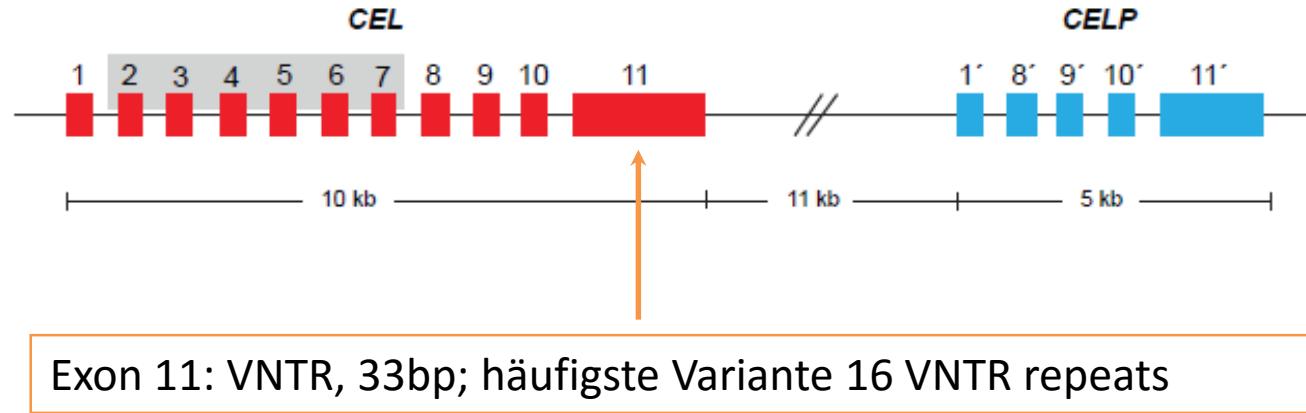
Joseph Beuys, 1964



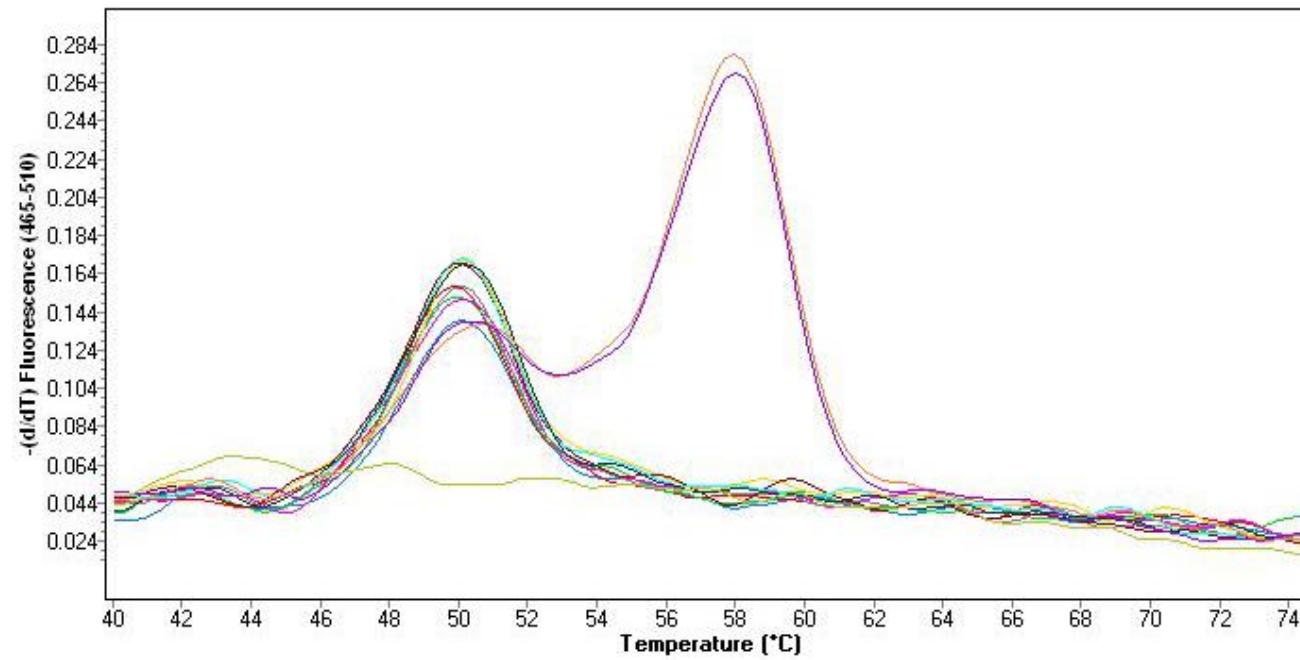
Klinik-Alltag, 2007

CEL - Carboxylesterlipase

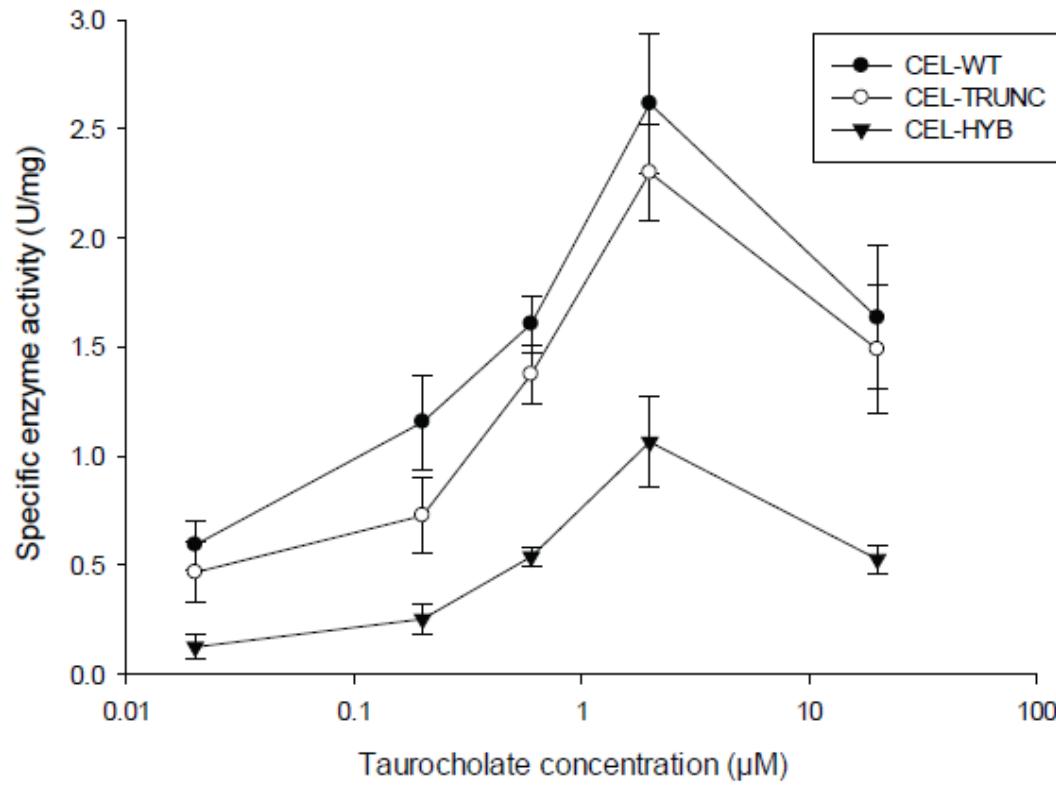
- Carboxylesterlipase "wesentlicher" Bestandteil des Pankreassekrets
- verantwortlich für die Hydrolyse von Cholesterin und anderen Estern der Nahrung
- CEL-MODY (MODY8); ein monogenes Syndrom mit exokriner und endokriner Fehlfunktion



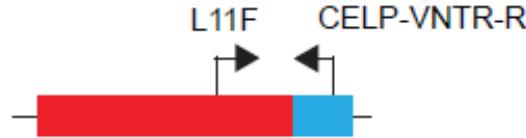
CEL - Hybrid Allel - LC



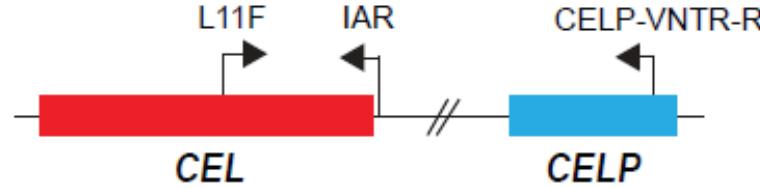
CEL Hyb - Verminderte Aktivität



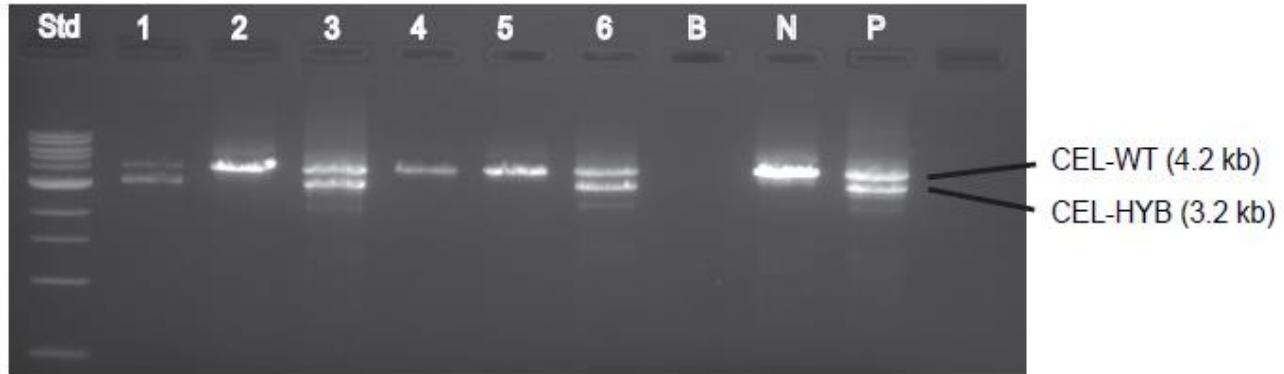
CEL - Hyb



CEL-HYB



CEL-WT (normal allele)



Field *et al.*, Nat Genet 2015