

## 5.7 MUTATION

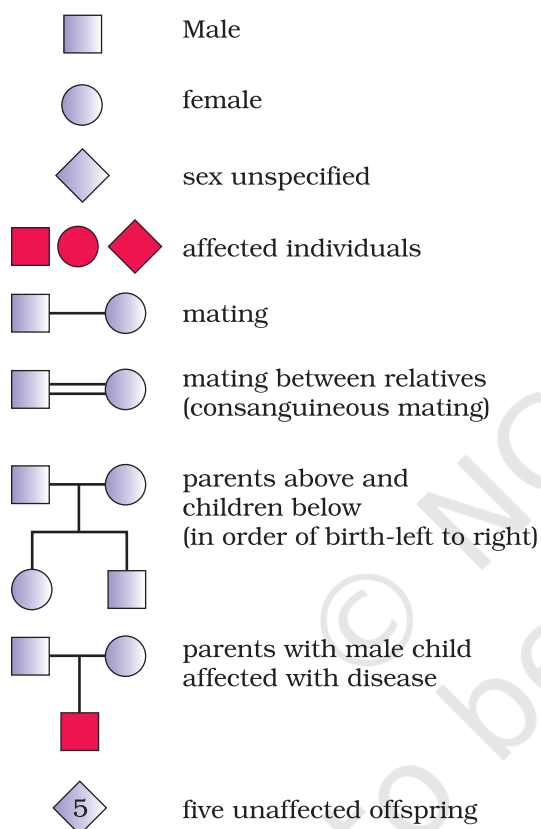
Mutation is a phenomenon which results in alteration of DNA sequences and consequently results in changes in the genotype and the phenotype of an organism. In addition to recombination, mutation is another phenomenon that leads to variation in DNA.

As you will learn in Chapter 6, one DNA helix runs continuously from one end to the other in each chromatid, in a highly supercoiled form. Therefore loss (deletions) or gain (insertion/duplication) of a segment of DNA, result in alteration in chromosomes. Since genes are known to be located on chromosomes, alteration in chromosomes results in

abnormalities or aberrations. Chromosomal aberrations are commonly observed in cancer cells.

In addition to the above, mutation also arise due to change in a single base pair of DNA. This is known as point mutation. A classical example of such a mutation is sickle cell anemia. Deletions and insertions of base pairs of DNA, causes frame-shift mutations (see Chapter 6).

The mechanism of mutation is beyond the scope of this discussion, at this level. However, there are many chemical and physical factors that induce mutations. These are referred to as mutagens. UV radiations can cause mutations in organisms – it is a mutagen.



**Figure 5.13** Symbols used in the human pedigree analysis

## 5.8 GENETIC DISORDERS

### 5.8.1 Pedigree Analysis

The idea that disorders are inherited has been prevailing in the human society since long. This was based on the heritability of certain characteristic features in families. After the rediscovery of Mendel's work the practice of analysing inheritance pattern of traits in human beings began. Since it is evident that control crosses that can be performed in pea plant or some other organisms, are not possible in case of human beings, study of the family history about inheritance of a particular trait provides an

alternative. Such an analysis of traits in a several of generations of a family is called the **pedigree analysis**. In the pedigree analysis the inheritance of a particular trait is represented in the family tree over generations.

In human genetics, pedigree study provides a strong tool, which is utilised to trace the inheritance of a specific trait, abnormality or disease. Some of the important standard symbols used in the pedigree analysis have been shown in Figure 5.13.

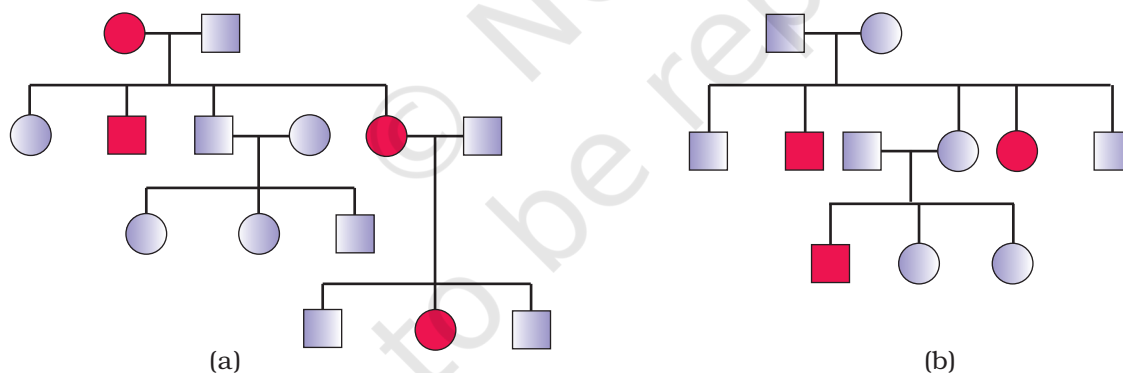
As you have studied in this chapter, each and every feature in any organism is controlled by one or the other gene located on the DNA present



in the chromosome. DNA is the carrier of genetic information. It is hence transmitted from one generation to the other without any change or alteration. However, changes or alteration do take place occasionally. Such an alteration or change in the genetic material is referred to as mutation. A number of disorders in human beings have been found to be associated with the inheritance of changed or altered genes or chromosomes.

### 5.8.2 Mendelian Disorders

Broadly, genetic disorders may be grouped into two categories – Mendelian disorders and Chromosomal disorders. Mendelian disorders are mainly determined by alteration or mutation in the single gene. These disorders are transmitted to the offspring on the same lines as we have studied in the principle of inheritance. The pattern of inheritance of such Mendelian disorders can be traced in a family by the pedigree analysis. Most common and prevalent Mendelian disorders are Haemophilia, Cystic fibrosis, Sickle-cell anaemia, Colour blindness, Phenylketonuria, Thalassemia, etc. It is important to mention here that such Mendelian disorders may be dominant or recessive. By pedigree analysis one can easily understand whether the trait in question is dominant or recessive. Similarly, the trait may also be linked to the sex chromosome as in case of haemophilia. It is evident that this X-linked recessive trait shows transmission from carrier female to male progeny. A representative pedigree is shown in Figure 5.14 for dominant and recessive traits. Discuss with your teacher and design pedigrees for characters linked to both autosomes and sex chromosome.



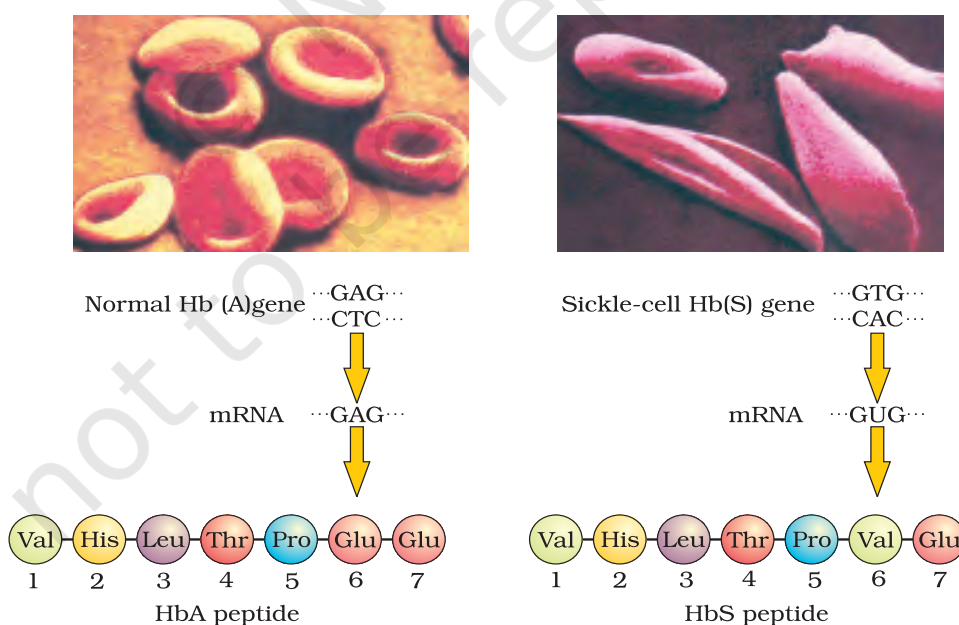
**Figure 5.14** Representative pedigree analysis of (a) Autosomal dominant trait (for example: Myotonic dystrophy) (b) Autosomal recessive trait (for example: Sickle-cell anaemia)

**Colour Blidness** : It is a sex-linked recessive disorder due to defect in either red or green cone of eye resulting in failure to discriminate between red and green colour. This defect is due to mutation in certain genes present in the X chromosome. It occurs in about 8 per cent of males and only about 0.4 per cent of females. This is because the genes that lead to red-green colour blindness are on the X chromosome. Males have only one X chromosome and females have two. The son of a woman who carries

the gene has a 50 per cent chance of being colour blind. The mother is not herself colour blind because the gene is recessive. That means that its effect is suppressed by her matching dominant normal gene. A daughter will not normally be colour blind, unless her mother is a carrier and her father is colour blind.

**Haemophilia** : This sex linked recessive disease, which shows its transmission from unaffected carrier female to some of the male progeny has been widely studied. In this disease, a single protein that is a part of the cascade of proteins involved in the clotting of blood is affected. Due to this, in an affected individual a simple cut will result in non-stop bleeding. The heterozygous female (carrier) for haemophilia may transmit the disease to sons. The possibility of a female becoming a haemophilic is extremely rare because mother of such a female has to be at least carrier and the father should be haemophilic (unviable in the later stage of life). The family pedigree of Queen Victoria shows a number of haemophilic descendants as she was a carrier of the disease.

**Sickle-cell anaemia** : This is an autosome linked recessive trait that can be transmitted from parents to the offspring when both the partners are carrier for the gene (or heterozygous). The disease is controlled by a single pair of allele,  $Hb^A$  and  $Hb^S$ . Out of the three possible genotypes only homozygous individuals for  $Hb^S$  ( $Hb^S Hb^S$ ) show the diseased phenotype. Heterozygous ( $Hb^A Hb^S$ ) individuals appear apparently unaffected but they are carrier of the disease as there is 50 per cent probability of transmission of the mutant gene to the progeny, thus exhibiting sickle-cell trait (Figure 5.15). The defect is caused by the substitution of Glutamic acid



**Figure 5.15** Micrograph of the red blood cells and the amino acid composition of the relevant portion of  $\beta$ -chain of haemoglobin: (a) From a normal individual; (b) From an individual with sickle-cell anaemia



(Glu) by Valine (Val) at the sixth position of the beta globin chain of the haemoglobin molecule. The substitution of amino acid in the globin protein results due to the single base substitution at the sixth codon of the beta globin gene from GAG to GUG. The mutant haemoglobin molecule undergoes polymerisation under low oxygen tension causing the change in the shape of the RBC from biconcave disc to elongated sickle like structure (Figure 5.15).

**Phenylketonuria** : This inborn error of metabolism is also inherited as the autosomal recessive trait. The affected individual lacks an enzyme that converts the amino acid phenylalanine into tyrosine. As a result of this phenylalanine is accumulated and converted into phenylpyruvic acid and other derivatives. Accumulation of these in brain results in mental retardation. These are also excreted through urine because of its poor absorption by kidney.

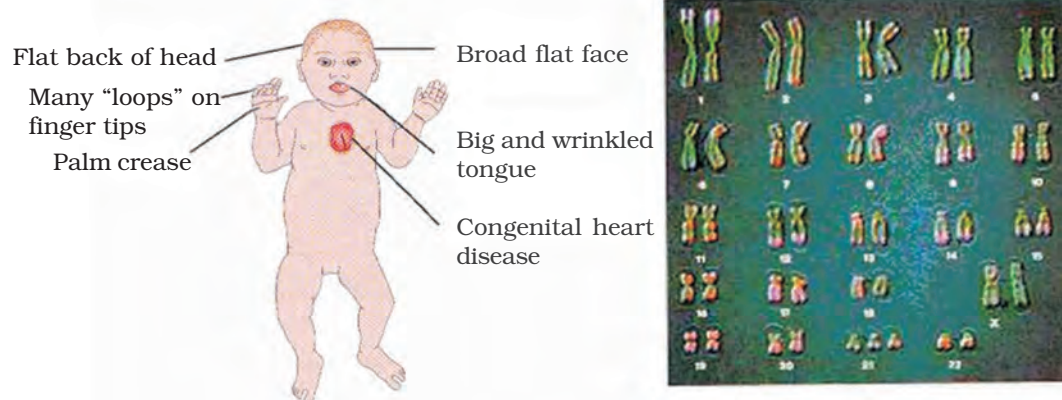
**Thalassemia** : This is also an autosome-linked recessive blood disease transmitted from parents to the offspring when both the partners are unaffected carrier for the gene (or heterozygous). The defect could be due to either mutation or deletion which ultimately results in reduced rate of synthesis of one of the globin chains ( $\alpha$  and  $\beta$  chains) that make up haemoglobin. This causes the formation of abnormal haemoglobin molecules resulting into anaemia which is characteristic of the disease. Thalassemia can be classified according to which chain of the haemoglobin molecule is affected. In  $\alpha$  Thalassemia, production of  $\alpha$  globin chain is affected while in  $\beta$  Thalassemia, production of  $\beta$  globin chain is affected.  $\alpha$  Thalassemia is controlled by two closely linked genes HBA1 and HBA2 on chromosome 16 of each parent and it is observed due to mutation or deletion of one or more of the four genes. The more genes affected, the less alpha globin molecules produced. While  $\beta$  Thalassemia is controlled by a single gene HBB on chromosome 11 of each parent and occurs due to mutation of one or both the genes. Thalassemia differs from sickle-cell anaemia in that the former is a quantitative problem of synthesising too few globin molecules while the latter is a qualitative problem of synthesising an incorrectly functioning globin.

### 5.8.3 Chromosomal Disorders

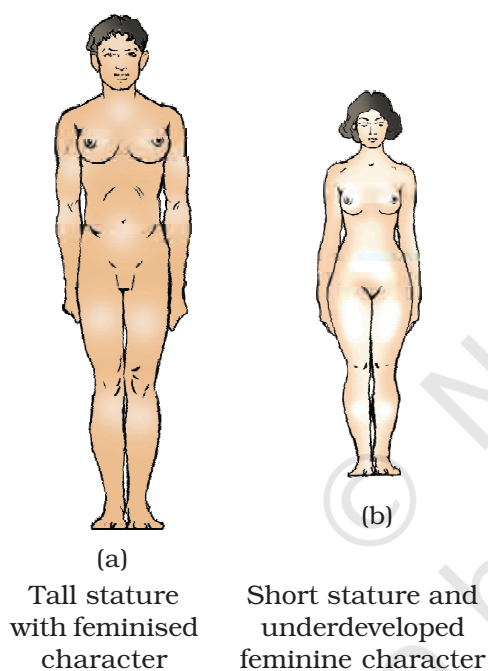
The chromosomal disorders on the other hand are caused due to absence or excess or abnormal arrangement of one or more chromosomes.

Failure of segregation of chromatids during cell division cycle results in the gain or loss of a chromosome(s), called **aneuploidy**. For example, Down's syndrome results in the gain of extra copy of chromosome 21. Similarly, Turner's syndrome results due to loss of an X chromosome in human females. Failure of cytokinesis after telophase stage of cell division results in an increase in a whole set of chromosomes in an organism and, this phenomenon is known as **polyploidy**. This condition is often seen in plants.

The total number of chromosomes in a normal human cell is 46 (23 pairs). Out of these 22 pairs are autosomes and one pair of chromosomes are sex chromosome. Sometimes, though rarely, either an additional copy of a chromosome may be included in an individual or an



**Figure 5.16** A representative figure showing an individual inflicted with Down's syndrome and the corresponding chromosomes of the individual



**Figure 5.17** Diagrammatic representation of genetic disorders due to sex chromosome composition in humans : (a) Klinefelter Syndrome; (b) Turner's Syndrome

individual may lack one of any one pair of chromosomes. These situations are known as trisomy or monosomy of a chromosome, respectively. Such a situation leads to very serious consequences in the individual. Down's syndrome, Turner's syndrome, Klinefelter's syndrome are common examples of chromosomal disorders.

**Down's Syndrome** : The cause of this genetic disorder is the presence of an additional copy of the chromosome number 21 (trisomy of 21). This disorder was first described by Langdon Down (1866). The affected individual is short statured with small round head, furrowed tongue and partially open mouth (Figure 5.16). Palm is broad with characteristic palm crease. Physical, psychomotor and mental development is retarded.

**Klinefelter's Syndrome** : This genetic disorder is also caused due to the presence of an additional copy of X-chromosome resulting into a karyotype of 47, XXY. Such an individual has overall masculine development, however, the feminine development (development of breast, i.e., Gynaecomastia) is also expressed (Figure 5.17 a). Such individuals are sterile.

**Turner's Syndrome** : Such a disorder is caused due to the absence of one of the X chromosomes, i.e., 45 with X0, Such females are sterile as ovaries are rudimentary besides other features including lack of other secondary sexual characters (Figure 5.17 b).



## SUMMARY

Genetics is a branch of biology which deals with principles of inheritance and its practices. Progeny resembling the parents in morphological and physiological features has attracted the attention of many biologists. Mendel was the first to study this phenomenon systematically. While studying the pattern of inheritance in pea plants of contrasting characters, Mendel proposed the principles of inheritance, which are today referred to as 'Mendel's Laws of Inheritance'. He proposed that the 'factors' (later named as genes) regulating the characters are found in pairs known as alleles. He observed that the expression of the characters in the offspring follow a definite pattern in different—first generations ( $F_1$ ), second ( $F_2$ ) and so on. Some characters are dominant over others. The dominant characters are expressed when factors are in heterozygous condition (Law of Dominance). The recessive characters are only expressed in homozygous conditions. The characters never blend in heterozygous condition. A recessive character that was not expressed in heterozygous condition may be expressed again when it becomes homozygous. Hence, characters segregate while formation of gametes (Law of Segregation).

Not all characters show true dominance. Some characters show incomplete, and some show co-dominance. When Mendel studied the inheritance of two characters together, it was found that the factors independently assort and combine in all permutations and combinations (Law of Independent Assortment). Different combinations of gametes are theoretically represented in a square tabular form known as 'Punnett Square'. The factors (now known as gene) on chromosomes regulating the characters are called the genotype and the physical expression of the characters is called phenotype.

After knowing that the genes are located on the chromosomes, a good correlation was drawn between Mendel's laws : segregation and assortment of chromosomes during meiosis. The Mendel's laws were extended in the form of 'Chromosomal Theory of Inheritance'. Later, it was found that Mendel's law of independent assortment does not hold true for the genes that were located on the same chromosomes. These genes were called as 'linked genes'. Closely located genes assorted together, and distantly located genes, due to recombination, assorted independently. Linkage maps, therefore, corresponded to arrangement of genes on a chromosome.

Many genes were linked to sexes also, and called as sex-linked genes. The two sexes (male and female) were found to have a set of chromosomes which were common, and another set which was different. The chromosomes which were different in two sexes were named as sex chromosomes. The remaining set was named as autosomes. In humans, a normal female has 22 pairs of autosomes and a pair of sex chromosomes (XX). A male has 22 pairs of autosomes and a pair of sex chromosome as XY. In chicken, sex chromosomes in male are ZZ, and in females are ZW.

Mutation is defined as change in the genetic material. A point mutation is a change of a single base pair in DNA. Sickle-cell anemia is caused due to change of one base in the gene coding for beta-chain of hemoglobin. Inheritable mutations can be studied by generating a pedigree of a family. Some mutations involve changes in whole set of



chromosomes (polyploidy) or change in a subset of chromosome number (aneuploidy). This helped in understanding the mutational basis of genetic disorders. Down's syndrome is due to trisomy of chromosome 21, where there is an extra copy of chromosome 21 and consequently the total number of chromosome becomes 47. In Turner's syndrome, one X chromosome is missing and the sex chromosome is as XO, and in Klinefelter's syndrome, the condition is XXY. These can be easily studied by analysis of Karyotypes.

## EXERCISES

1. Mention the advantages of selecting pea plant for experiment by Mendel.
2. Differentiate between the following –
  - (a) Dominance and Recessive
  - (b) Homozygous and Heterozygous
  - (c) Monohybrid and Dihybrid.
3. A diploid organism is heterozygous for 4 loci, how many types of gametes can be produced?
4. Explain the Law of Dominance using a monohybrid cross.
5. Define and design a test-cross.
6. Using a Punnett Square, workout the distribution of phenotypic features in the first filial generation after a cross between a homozygous female and a heterozygous male for a single locus.
7. When a cross is made between tall plant with yellow seeds (TtYy) and tall plant with green seed (Tt yy), what proportions of phenotype in the offspring could be expected to be
  - (a) tall and green.
  - (b) dwarf and green.
8. Two heterozygous parents are crossed. If the two loci are linked what would be the distribution of phenotypic features in F<sub>1</sub> generation for a dihybrid cross?
9. Briefly mention the contribution of T.H. Morgan in genetics.
10. What is pedigree analysis? Suggest how such an analysis, can be useful.
11. How is sex determined in human beings?
12. A child has blood group O. If the father has blood group A and mother blood group B, work out the genotypes of the parents and the possible genotypes of the other offsprings.
13. Explain the following terms with example
  - (a) Co-dominance
  - (b) Incomplete dominance
14. What is point mutation? Give one example.
15. Who had proposed the chromosomal theory of the inheritance?
16. Mention any two autosomal genetic disorders with their symptoms.