

REAL ACADEMIA DE MEDICINA DE VALENCIA

Valencia 17 de Mayo 2012

GENETICA Y PSIQUIATRÍA

cibersam

Centro de Investigación Biomédica En Red
de Salud Mental



Julio Sanjuan

incliwa
Instituto de Investigación Sanitaria

Fundación
Investigación
Clínico de Valencia

MENU

1-Heredabilidad de las enfermedades psiquiatricas

2.Datos generales genetica molecular

-Estudios de todo el genoma amplio

-Cambios en expresión génica

3-Interacción genético-ambiental

4- El Futuro - Practica Clinica

MENU

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Genética y Psiquiatría

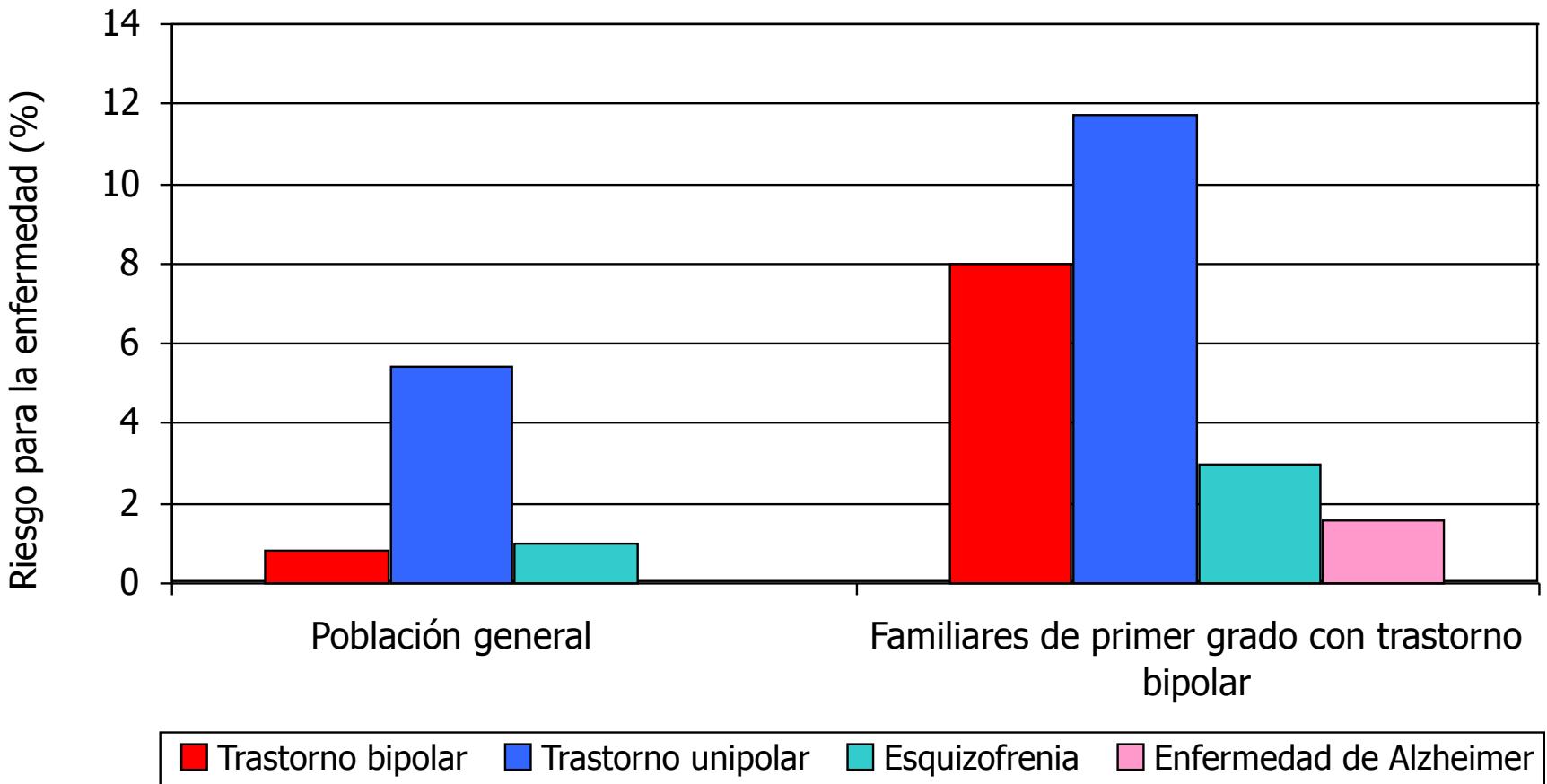
Preguntas	Métodos
GENETICA CUANTITATIVA	
¿Se trata de una enfermedad familiar?	Estudios familiares
¿Cuál es la contribución relativa de los genes?	Estudios de gemelos y adopción
GENETICA MOLECULAR	
¿Dónde se localiza el gen/es?	Estudios de ligamiento
¿Cual es el gen/es?	Estudios de asociación

¿SE TRATA DE UNA ENFERMEDAD FAMILIAR?



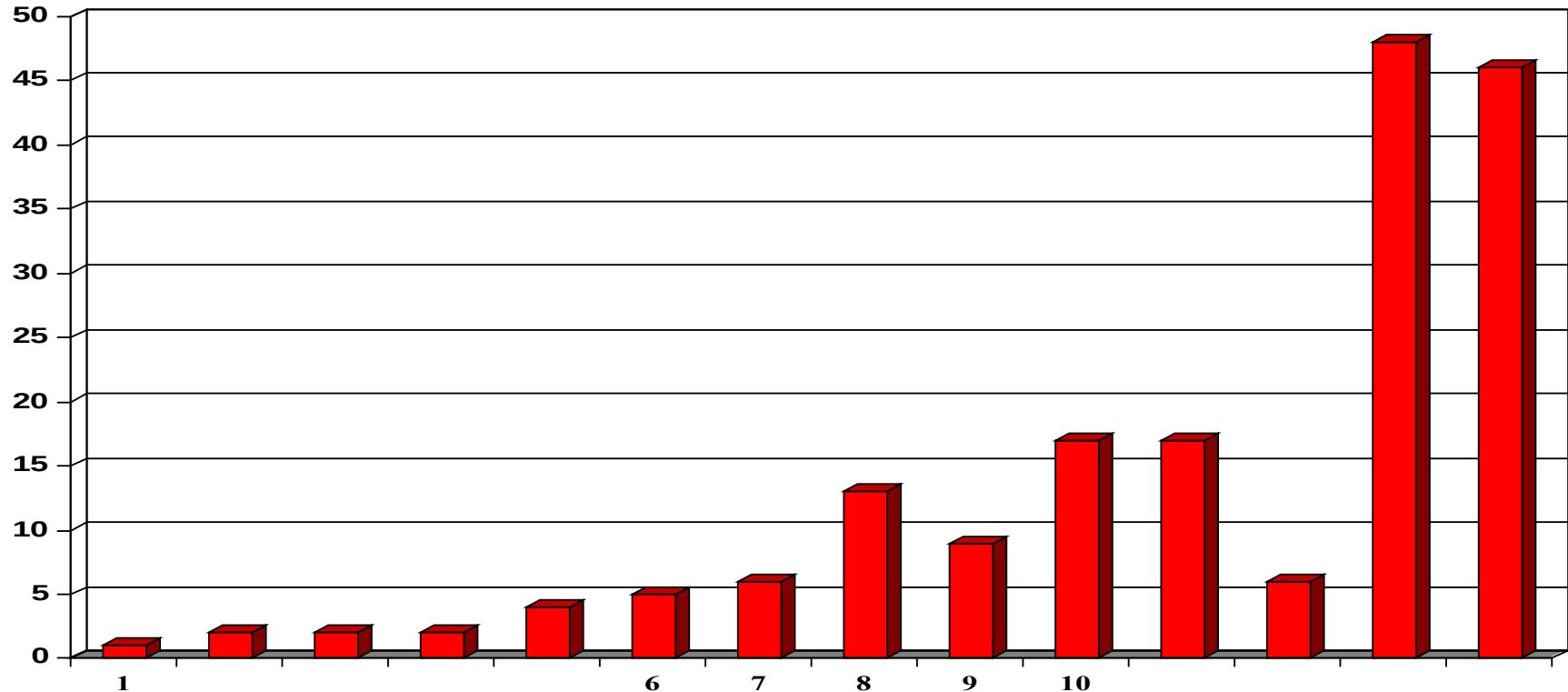
T. Bipolar

Riesgo en Familiares



Fañanás, 2002

Prevalencia en familias



- | | |
|-------------------------|--|
| 1. Población general | 8. Hijos |
| 2. Esposas de pacientes | 9. Hermanos |
| 3. Primos hermanos | 10. Hermanos con un parente esquizofrénico |
| 4. Tios | 11. Gemelos dizigóticos |
| 5. Sobrinos | 12. Padres |
| 6. Nietos | 13. Gemelos monozigóticos |
| 7. Medios hermanos | 14. Hijos de dos padres esquizofrénicos |

(1991)

Adaptación de Gottesman

2. ¿Cuál es la contribución relativa de los genes?

ESTUDIOS DE GEMELOS



MONOCIGOTOS (100%)



DICIGOTOS (50%)

Heredabilidad de distintos trastornos mentales

Trastorno	Heredabilidad (%)
Trastorno de ansiedad generalizada	30
Fobias	35
Depresión mayor	30-40
Trastorno de angustia	40
Suicidio	45
Alcoholismo	60
Esquizofrenia	60-80
Trastorno bipolar	70-80

CONCLUSIONES

- Hay un claro componente genético
- Pero el componente genético explica solo una parte del origen de la enfermedad
- Existe una influencia ambiental

MENU

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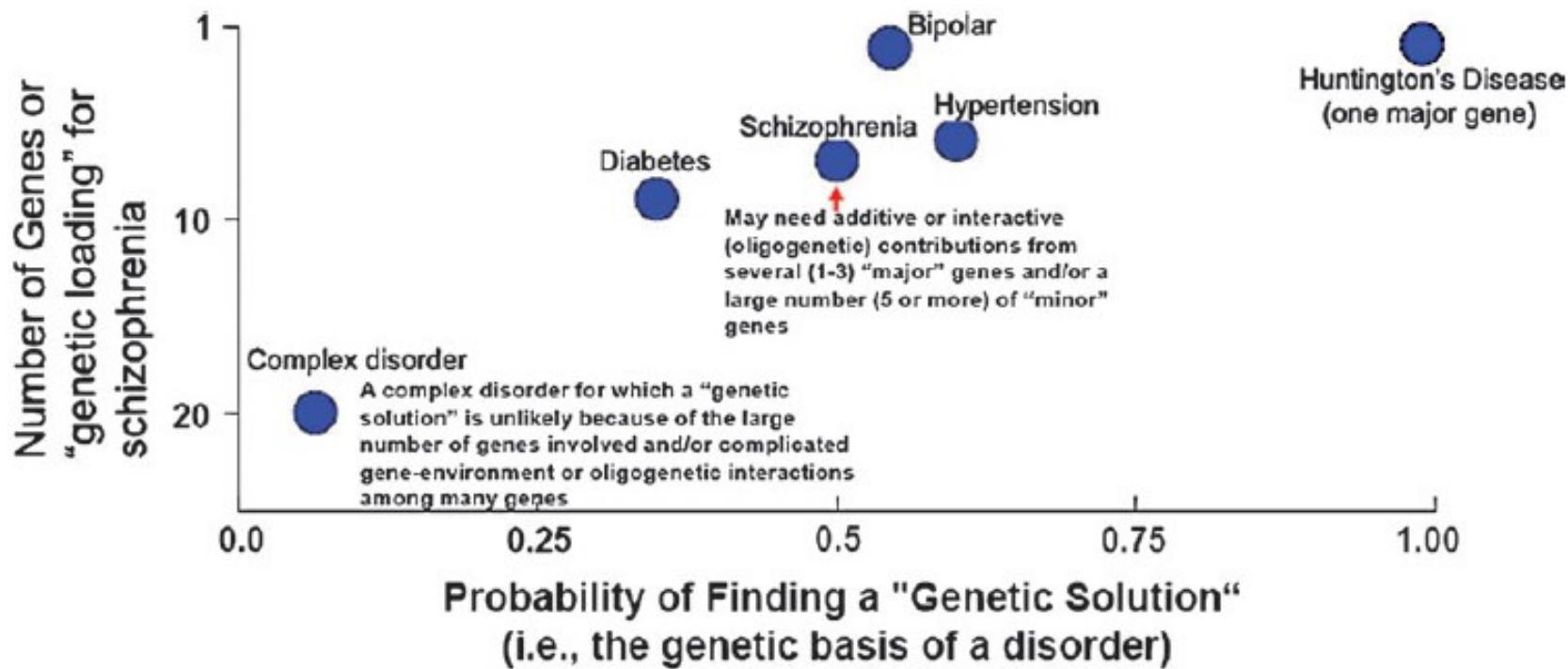
2.Datos generales genetica molecular

-Estudios de todo el genoma amplio

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4- Futuro- Practica Clinica



Schizophrenia genes at last?

Table 1 Schizophrenia susceptibility genes and the strength of evidence in four domains

Gene ^a	Locus	Strength of evidence (0 to + + + + +) for			
		Association with schizophrenia ^b	Linkage to gene locus ^c	Biological plausibility ^d	Altered expression in schizophrenia ^e
COMT	22q11	+++	+++	+++	Yes, +
DTNBP1	6p22	+++++	+++	++	Yes, ++
NRG1	8p12–21	+++++	+++	+++	Yes, +
RGS4	1q21–22	++	++	++	Yes, ++
GRM3	7q21–22	++	+	+++	No, ++
DISC1	1q42	++	++	++	Not known
G72	13q32–34	++	++	++	Not known
DAAO	12q24	++	+	+++	Not known
PPP3CC	8p21	+	+++	+++	Yes, +
CHRNA7	15q13–14	+	++	++	Yes, ++
PRODH2	22q11	+	+++	++	No, +
Akt1	14q22–32	+	+	++	Yes, ++



Review

TRENDS in Genetics Vol.21 No.9 September 2005

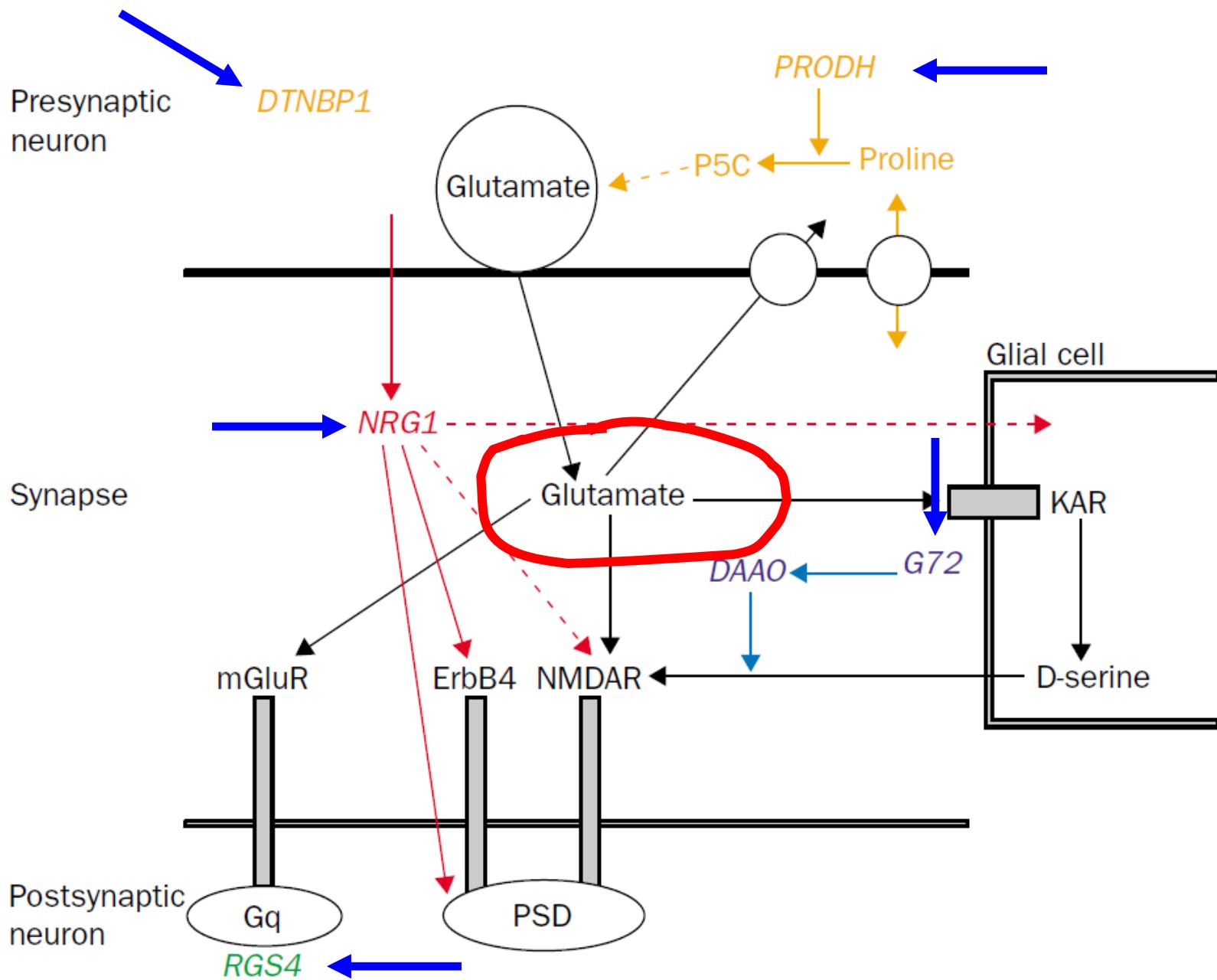
at least three positive

^aG
^bB
^cB
^dB
^eA

Schizophrenia: genes at last?

M.J. Owen, N. Craddock and M.C. O'Donovan

Harrison y Weinberger, Mol Psychiatry 2005



RESULTS

Association of schizophrenia with *DTNBPI* but not with *DAO*, *DAOA*, *NRG1* and *RGS4* nor their genetic interaction

Elisabet Vilella ^{a,*}, Javier Costas ^{b,h}, Julio Sanjuan ^c, Míriam Guitart ^d, Yolanda De Diego ^e, Angel Carracedo ^{b,h}, Lourdes Martorell ^a, Joaquín Valero ^a, Antonio Labad ^a, Rosa De Frutos ^f, Carmen Nájera ^f, M. Dolores Moltó ^f, Ivette Toirac ^f, Roser Guillamat ^d, Anna Brunet ^d, Vicenç Vallès ^g, Lucía Pérez ^e, Melquiades Leon ^e, Fernando Rodríguez de Fonseca ^e, Christopher Phillips ^h, María Torres ^h

In Spanish sample of 800 patients 800 controls

Only significant Association with DTNB1

We were unable to detect any significant gene-gene interaction

between SNPs DAO, DAOA, DTNBPI, NRG1, RGS4.

Schizophrenia Candidate Genes: Are We Really Coming Up Blank?



1.900 patients y 2000 controls, 789 SNPs

*RGS4, DISC1, DTNBP1, STX7, TAAR6, PPP3CC, NRG1,
DRD2, HTR2A, DAOA, AKT1, CHRNA7, COMT, and ARVCF.*

NO SIGNIFICANT ASSOCIATION

THE OPTIMISTIC VIEW



SureGene, LLC

Utilizes modern genetic technology
to discover the underlying genetic basis for psychiatric diseases.

Our primary goal is to empower patients and physicians with knowledge
to make the best possible healthcare decisions based on
individual genetic profiles. SureGene, LLC will accomplish these
goals through DNA-based diagnostic tests that predict drug response
and aid in the diagnosis and classification of disease,
such as the **AssureGeneTM Test for Schizophrenia**

SENTENCIA PROVISIONAL

HAS-

Un pesimista es
solamente un optimista
bien informado
-Mario Benedetti-

NGUN



2007 WGS en PSICOSIS

*International
Schizophrenia
Consortium*

3.800 casos

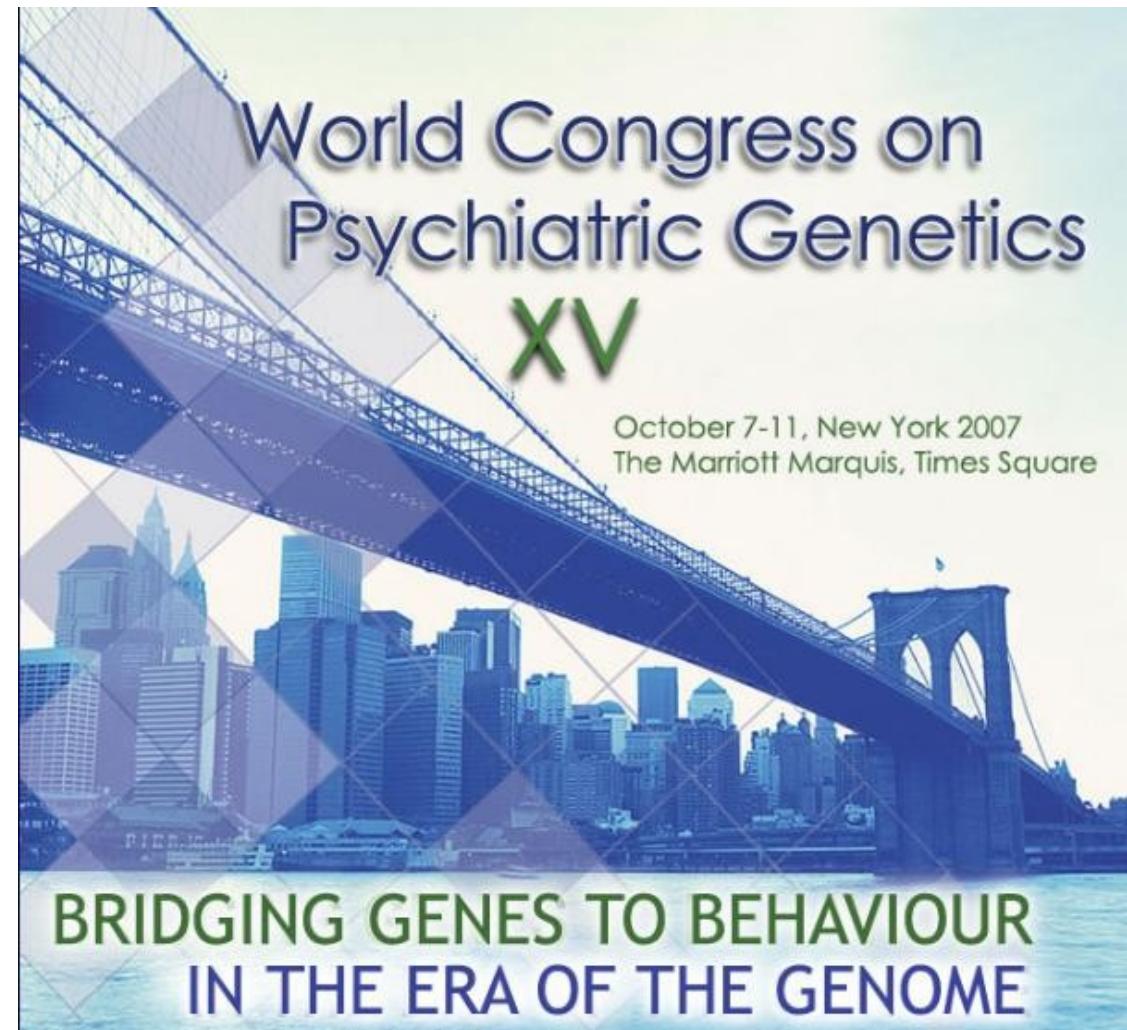
4.200 controles

1.000.000 SNPs

**Resultados
preliminares:**

**Se ha encontrado
alguna asociación
con $P = 10^{-8}$**

**pero NO en los
genes candidatos
reconocidos
en estudios previos**



Common variants conferring risk of schizophrenia

Hreinn Stefansson^{1*}, Roel A. Ophoff^{2,3*}, Stacy Steinberg^{1*}, Ole A. Andreassen⁴, Sven Cichon⁵, Dan Rujescu⁶, Thomas Werge⁷, Olli P. H. Pietiläinen^{8,9}, Ole Mors¹⁰, Preben B. Mortensen¹¹, Engilbert Sigurdsson^{12,13}, Omar Gustafsson¹, Mette Nyegaard¹⁴, Annamari Tuulio-Henriksson¹⁵, Andres Ingason¹, Thomas Hansen⁷, Jaana Suvisaari¹⁵, Jouko Lonnqvist¹⁵, Tiina Paunio¹⁶, Anders D. Børglum^{10,14}, Annette Hartmann⁶, Anders Fink-Jensen¹⁷, Merete Nordentoft¹⁸, David Hougaard¹⁹, Bent Norgaard-Pedersen¹⁹, Yvonne Böttcher¹, Jes Olesen²⁰, René Breuer²¹, Hans-Jürgen Möller²², Ina Giegling⁶, Henrik B. Rasmussen⁷, Sally Timm²³, Manuel Mattheisen⁵, István Bitter²⁴, János M. Réthelyi²⁴, Brynja B. Magnusdottir^{12,13}, Thordur Sigmundsson^{12,13}, Pall Olason¹, Gisli Masson¹, Jeffrey R. Gulcher¹, Magnus Haraldsson^{12,13}, Ragnheiður Fossdal¹, Thorgeir E. Thorgeirsson¹, Unnur Thorsteinsdottir^{1,13}, Mirella Ruggeri²⁵, Sarah Tosato²⁵, Barbara Franke²⁶, Eric Strengman², Lambertus A. Kiemeney²⁷, GROUP†, Ingrid Melle⁴, Srdjan Djurovic²⁸, Lilia Abramova²⁹, Vasily Kaleda²⁹, Julio Sanjuan³⁰, Rosa de Frutos³¹, Elvira Bramon³², Evangelos Vassos^{32,33}, Gillian Fraser³⁴, Ulrich Ettinger^{32,33}, Marco Picchioni³², Nicholas Walker³⁵, Timi Toulopoulou³³, Anna C. Need³⁶, Dongliang Ge³⁶, Joeng Lim Yoon³⁷, Kevin V. Shianna³⁶, Nelson B. Freimer³, Rita M. Cantor^{3,37}, Robin Murray^{32,33}, Augustine Kong¹, Vera Golimbet²⁹, Angel Carracedo³⁸, Celso Arango³⁹, Javier Costas⁴⁰, Erik G. Jönsson⁴¹, Lars Terenius⁴¹, Ingrid Agartz⁴¹, Hannes Petursson^{12,13}, Markus M. Nöthen⁴², Marcella Rietschel²¹, Paul M. Matthews⁴³, Pierandrea Muglia⁴⁴, Leena Peltonen^{8,9}, David St Clair³⁴, David B. Goldstein³⁶, Kari Stefansson^{1,13} & David A. Collier^{32,45}

Table 1 | Genome-wide significant association of seven markers with schizophrenia

Chromosome/ megabases	SNP[allele]	Frequency	SGENE-plus*		Follow-up		SGENE-plus + follow-up		SGENE-plus + follow-up + ISC + MGS		Region/ neighbouring gene
			(2,663 cases; 13,498 controls)	OR (95% CI)	P value	OR (95% CI)	P value	OR (95% CI)	P value	OR (95% CI)	P value
6/27.2	rs6913660[C]†☆	0.85	1.22 (1.10, 1.36)	0.00023	1.11 (1.04, 1.19)	0.0021	1.14 (1.08, 1.21)	4.7×10^{-6}	1.15 (1.10, 1.21)	1.1×10^{-9}	MHC/ <i>HIST1H2BJ</i>
6/27.3	rs13219354[T]‡☆	0.90	1.25 (1.11, 1.42)	0.00043	1.19 (1.08, 1.30)	0.00022	1.21 (1.12, 1.30)	4.4×10^{-7}	1.20 (1.14, 1.27)	1.3×10^{-10}	MHC/ <i>PRSS16</i>
6/27.4	rs6932590[T]§☆	0.78	1.15 (1.05, 1.26)	0.0024	1.17 (1.10, 1.25)	4.9×10^{-7}	1.17 (1.11, 1.23)	4.4×10^{-9}	1.16 (1.11, 1.21)	1.4×10^{-12}	MHC/ <i>PRSS16</i>
6/28.4	rs13211507[T] ☆	0.92	1.24 (1.08, 1.42)	0.0027	1.27 (1.15, 1.40)	3.1×10^{-6}	1.26 (1.16, 1.36)	3.1×10^{-8}	1.24 (1.16, 1.32)	8.3×10^{-11}	MHC/ <i>PGBD1</i>
6/32.3	rs3131296[G]¶☆	0.87	1.21 (1.08, 1.36)	0.0011	1.20 (1.11, 1.30)	5.3×10^{-6}	1.21 (1.13, 1.29)	2.1×10^{-8}	1.19 (1.13, 1.25)	2.3×10^{-10}	MHC/ <i>NOTCH4</i>
11/124.1	rs12807809[T]	0.83	1.19 (1.08, 1.32)	0.00045	1.13 (1.06, 1.21)	0.00022	1.15 (1.09, 1.22)	5.0×10^{-7}	1.15 (1.10, 1.20)	2.4×10^{-9}	NRGN
18/51.3	rs9960767[C]#☆	0.056	1.30 (1.11, 1.51)	0.0011	1.20 (1.08, 1.33)	0.00044	1.23 (1.13, 1.34)	2.2×10^{-6}	1.23 (1.15, 1.32)	4.1×10^{-9}	TCF4

Histocompatibility complex (MHC) 6p21.322.1

Neurogranin gene (NRGN) on 11q24.2

New candidate genes are not related with previous candidates

Table 2 | Significant association of deletions at 1q21.1, 15q11.2 and 15q13.3 with schizophrenia and related psychoses in the combined samples

Locus	Chromosome 1: 144.94–146.29 (Mb)		Chromosome 15: 20.31–20.78 (Mb)		Chromosome 15: 28.72–30.30 (Mb)	
	Cases	Controls	Cases	Controls	Cases	Controls
Germany	2 of 911	0 of 1,297	3 of 911	4 of 1,297	0 of 911	0 of 1,297
Scotland	2 of 451	0 of 441	5 of 451	1 of 441	0 of 451	0 of 441
The Netherlands	0 of 806	0 of 4,039	4 of 806	12 of 4,039	3 of 806	1 of 4,039
Norway	0 of 237	0 of 272	0 of 237	0 of 272	1 of 237	0 of 272
Denmark*	3 of 442	0 of 1,437	4 of 442	3 of 1,432	0 of 375	0 of 501
China*	0 of 438	0 of 463	0 of 438	0 of 463	NA	NA
Phase II						
OR		∞ (2.85, ∞)		2.18 (1.01, 4.60)		16.47 (1.52, 833.38)
P-value		5.6×10^{-4}		0.032		7.9×10^{-3}
Phase I and II						
OR		14.83 (3.55, 60.40)		2.73 (1.50, 4.89)		11.54 (2.53, 49.58)
P-value		2.9×10^{-5}		6.0×10^{-4}		5.3×10^{-4}

MICRODELETIÓN	OR	FREQUENCY
1Q21.1 (N = 7)	14.80	0.15
15Q11.2 (N = 16)	2.73	0.35
15Q.13.3 (N = 4)	11.54	0.08

CONCLUSIONES (PROVISIONALES) ESTUDIOS DE GENOMA AMPLIO

- Descubrimiento de formas genéticas de esquizofrenia pero muy poco frecuentes. Apaprecen tambien en otros Trastornos Psiquiatricos
- Descubrimiento de nuevos Polimorfismos con un alta asociación pero con una OR muy baja. Tambien aparecen en otros Tyrastornos Psiquiatricos.
- Necesidad de modelos matematicos que permitan analizar combinaciones de mas de 1.000.000 de SNPs

1. EXPRESIÓN GENICA EN ESTUDIO POSTMORTEM EN LA ESQUIZOFRENIA

A. EXPRESIÓN DE GENES ESPECIFICOS

B. MICRORRAYS: TRANSCRIPTOMICA

THE REELIN PATHWAY TO SCHIZOPHRENIA

Reelin promoter hypermethylation in schizophrenia

Dennis R. Grayson*, Xiaomei Jia, Ying Chen, Rajiv P. Sharma, Colin P. Mitchell, Alessandro Guidotti, and Erminio Costa

Cellular Basis of Reduced Cortical Reelin Expression in Schizophrenia

Sharon L. Eastwood, D.Phil.

Paul J. Harrison, D.M. (Oxon), F.R.C.Psych.

Results: Reelin mRNA was expressed by layer I neurons, i neurons, and interstitial white matter neurons. In subjects schizophrenia, less reelin mRNA was expressed by inters

ASSOCIATE EDITOR: D.L. KROKH

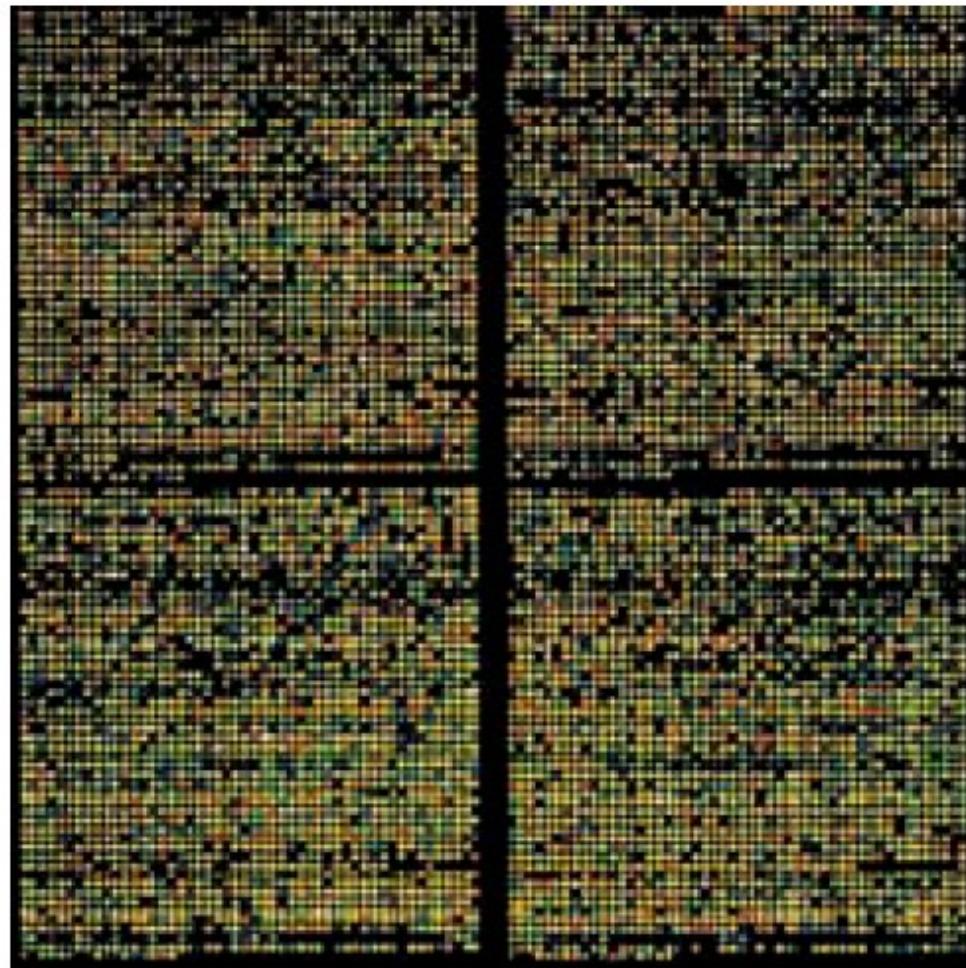
The human reelin gene: Transcription factors (+), repressors (-) and the methylation switch (+/-) in schizophrenia

Dennis R. Grayson *, Ying Chen, Erminio Costa, Erbo Dong, Alessandro Guidotti, Marija Kundakovic, Rajiv P. Sharma

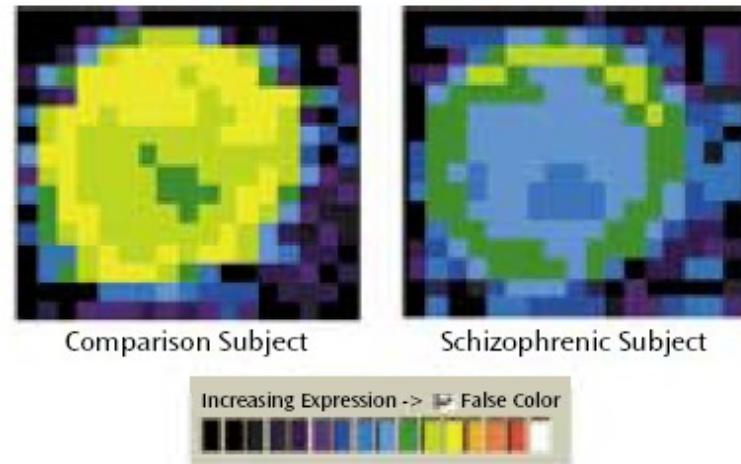
B. MICRORRAYS: TRANSCRIPTOMICA

The Human Genome

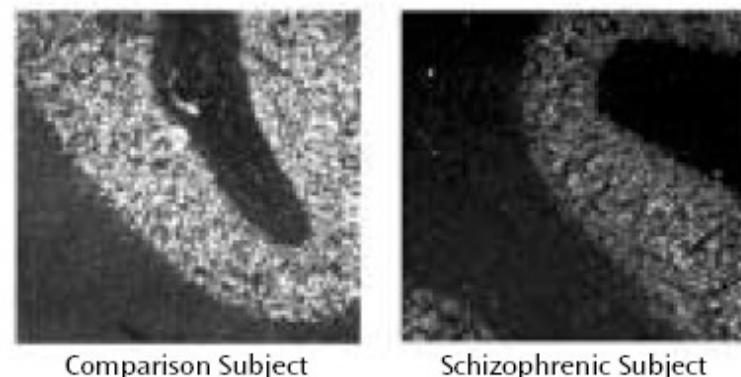
UniGEM-V Microarray



NSF Microarray



NSF *In Situ* Hybridization



Mirmics Am J Psychiatry 2001

B. MICRORRAYS: TRANSCRIPTOMICA

RESULTADOS PRINCIPALES (18 estudios revisados 2001-2011)

ALTERACIÓN EN LA EXPRESIÓN DE GENES IMPLICADOS EN:

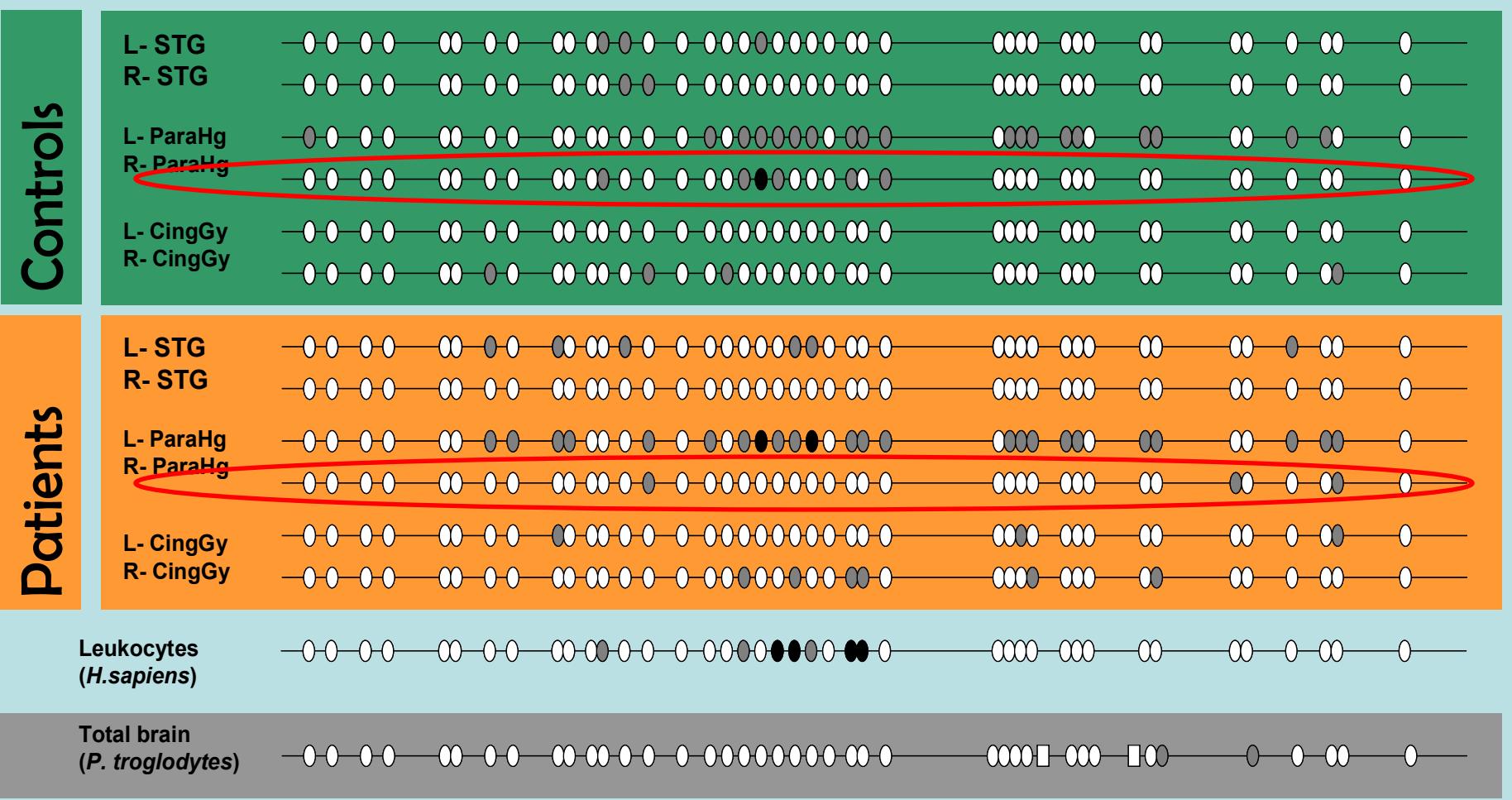
- MECANISMOS SINÁPTICOS
- PROCESOS DE MIELINIZACIÓN
- METABOLISMO MITOCONDRIAL
- OLIGODENDROCITOS
- SISTEMA GABAERGICO
- SISTEMA GLUTAMATERGICO

EXPRESIÓN GENICA CEREBRAL

FACTORES DE CONFUSIÓN

- EDAD
- SEXO
- PH
- INTERVALO POSTMORTEM
- CALIDAD TEJIDO
- MEDICACIÓN PREVIA
- ENFERMEDADES MEDICAS-CEREBRALES ASOCIADAS
- FORMA DE MUERTE
- PSICOPATOLOGÍA PREVIA

EPIGENETIC CHANGES OF FOXP2 IN SCHIZOPHRENIA



1. BRAIN BANK FROM SAN JOAN DE DEU

NOW 32 BRAINS OF PATIENTS WITH SCHIZOPHRENIA



CONCLUSIONES (PROVISIONALES) ESTUDIOS DE EXPRESIÓN GENICA

- Hallazgos prometedores en anormal expresión de algunos genes (Reelina)
- Hallazgos sugestivos pero no concluyentes con las tecnicas de micro-rrays
- Necesidad de nuevos bancos de cerebros con control de las variables de confusión.

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MEDICAL MODEL OF COMPLEX DISEASE

Estivill 16/02/04

HIGHER DISEASE RISK

**GENETIC
RISK
FACTORS**

**GENETIC
PROTECTIVE
FACTORS**

**ENVIRONMENTAL
RISK
FACTORS**

**ENVIRONMENTAL
PROTECTIVE
FACTORS**



LOWER DISEASE RISK

EXAMPLES OF GENE-ENVIRONMENTAL INTERACTION IN COMPLEX MEDICAL DISEASE

Gene symbol	Variant(s)	Environmental exposure	Outcome and nature of interaction
Genes for skin pigmentation (for example, <i>MC1R</i>)	Variants for fair skin colour	Sunlight or ultraviolet light B	Risk of skin cancer is higher in people with fair skin colour that are exposed to higher amounts of sunlight
<i>CCR5</i>	Δ-32 deletion	HIV	Carriers of the receptor deletion have lower rates of HIV infection and disease progression
<i>MTHFR</i>	Ala222Val polymorphism	Folic acid intake	Homozygotes for the low activity Ala222Val variant are at different risk of colorectal cancer and adenomas if nutritional folate status is low
<i>NAT2</i>	Rapid versus slow acetylator SNPs	Heterocyclic amines in cooked meat	Red meat intake is more strongly associated with colorectal cancer among rapid acetylators
<i>F5</i>	Leiden prothrombotic variant	Hormone replacement	Venous thromboembolism risk is increased in factor V Leiden carriers who take exogenous steroid hormones
<i>UGT1A6</i>	Slow-metabolism SNPs	Aspirin	Increased benefit of prophylactic aspirin use in carriers of the slow metabolism variants
<i>APOE</i>	<i>E4</i> allele	Cholesterol intake	Exaggerated changes in serum cholesterol in response to dietary cholesterol changes in <i>APOE4</i> carriers
<i>ADH1C</i>	γ-2 alleles	Alcohol intake	Inverse association between ethanol intake and myocardial infarction; risk is stronger in carriers of slow-oxidizing γ-2 alleles
<i>PPARG2</i>	Pro12Ala	Dietary fat intake	Stronger relation between dietary fat intake and obesity in carriers of the Pro12Ala allele
<i>HLA-DPB1</i>	Glu69	Occupational beryllium	Exposed workers who are carriers of the Glu69 allele are more likely to develop chronic beryllium lung disease
<i>TPMT</i>	Ala154Thr and Tyr240Cys	Thiopurine drugs	Homozygotes for the low-activity alleles of <i>TPMT</i> are likely to experience severe toxicity when exposed to thiopurine drugs
<i>ADRB2</i>	Arg16Gly	Asthma drugs	Arg16Gly homozygotes have a greater response in the airway to albuterol

SKIN
CANCER

HIV

COLORECTAL
CANCER

COLORECTAL
CANCER

VASCULAR

ASPIRINE
BENEFIT

COLESTEROL

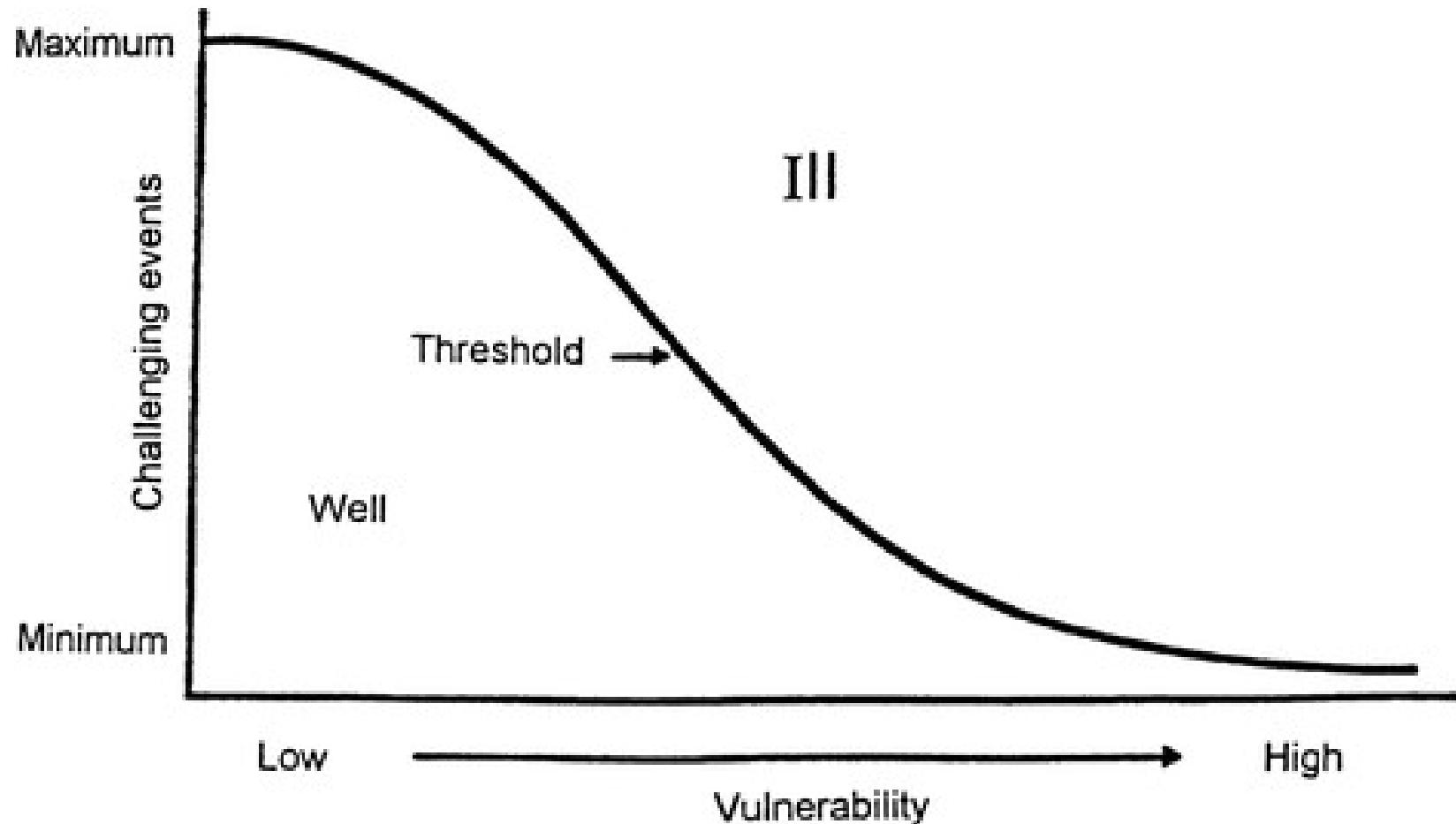
MYOCARDIAL
OBESITY

LUNG DISEASE

THIOPURINE

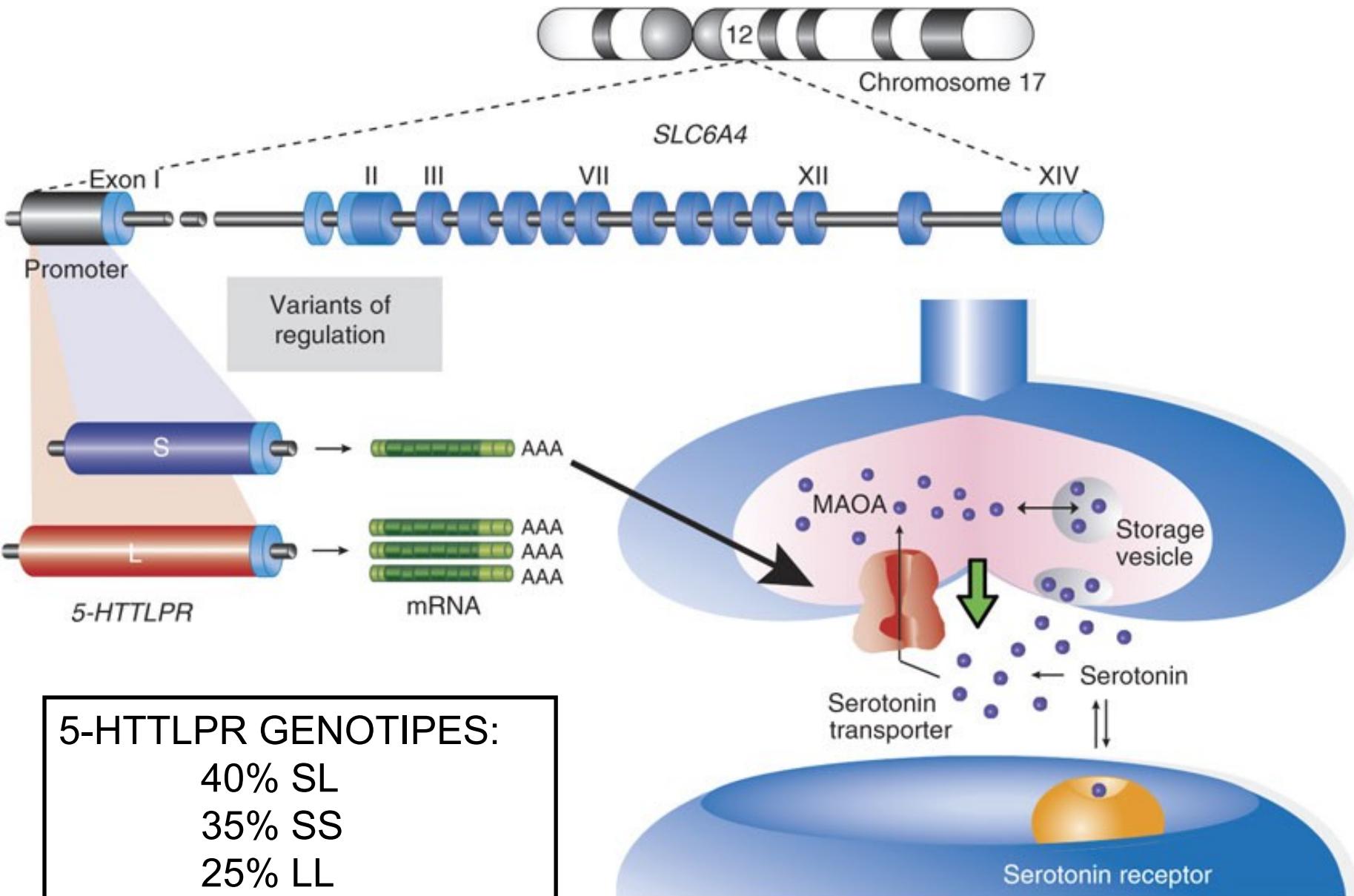
ASTMA DRUG

VULNERABILITY STRESS MODEL



1997

5-HTTLPR AND EMOTIONAL RESPONSE



5-HTLPR: Association Studies Before 2003

The Same Gene –variant relate with many Psychiatric Disorder

Anxiety and hostility	Brummett BH 2003	Bipolar affective disorder	Heiden A 2000
Anxiety disorders	Ohara K et al. 1998	Bipolar and unipolar disorder	Serretti A et al. 2001
Anxiety symptoms	Evans J et al. 1997	Bipolar disorder	Myennett-Johnson L 2000
Anxiety traits	Murakami F et al. 1999	Bipolar disorder	Liu W et al. 1998
Anxiety-related temperament	Jorm AF et al. 2000	Major and bipolar depressives	Serretti A et al. 2001
Anxiety-related traits	Katsuragi S et al. 1999	Schizophrenia	Malhotra AK et al. 1998
Anxiety-related traits	Lesch KP et al. 1996	Smoking	Ishikawa H et al. 1999
Autism	Klauck SM et al. 1997	Suicide	Joiner TE Jr et al. 2002
Alcoholism	Ishiguro H et al. 1999	Suicide	Baca-Garcia E et al. 2002
Anorexia nervosa	Fumeron F et al. 2001	Violent suicidal behavior	Courtet P et al. 2001
Personality traits	Kumakiri C et al. 1999	Violent suicide	Bondy B et al. 2000
Personality traits	Du L et al. 2000	Pathological gambling	Perez de Castro I et al., 1999
Personality traits	Retz W et al. 2002	Harm avoidance behaviour	Ricketts MH et al. 1998
Affective disorder	Lenzinger E et al. 1999		
Major depression	Ogilvie AD et al. 1996		
Major depression	Yu YW et al. 2002		
Depression	Neumeister A et al. 2002		

**NO CONCLUSIVE
RESULTS**



A. Caspi

Influence of Life Stress on Depression: Moderation by a Polymorphism in the 5-HTT Gene

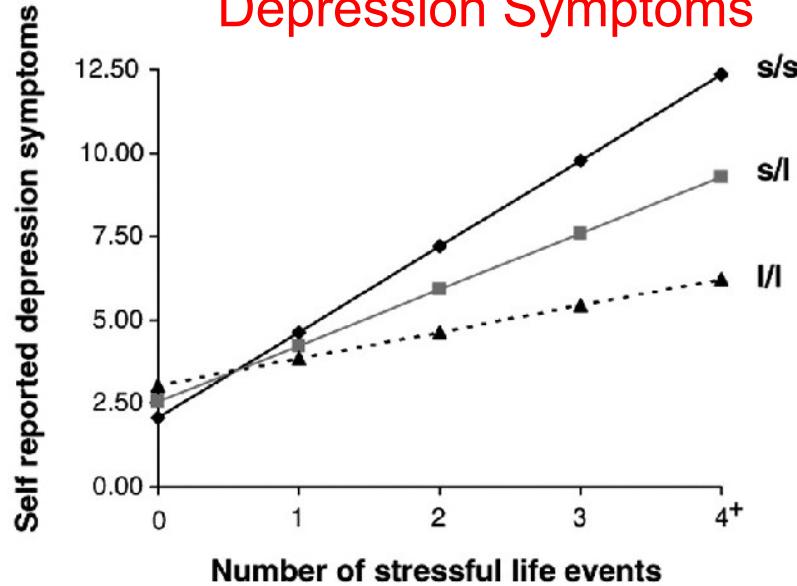
Avshalom Caspi,^{1,2} Karen Sugden,¹ Terrie E. Moffitt,^{1,2*}
Alan Taylor,¹ Ian W. Craig,¹ Honalee Harrington,²
Joseph McClay,¹ Jonathan Mill,¹ Judy Martin,³
Antony Braithwaite,⁴ Richie Poulton³

18 JULY 2003 VOL 301 SCIENCE www.sciencemag.org

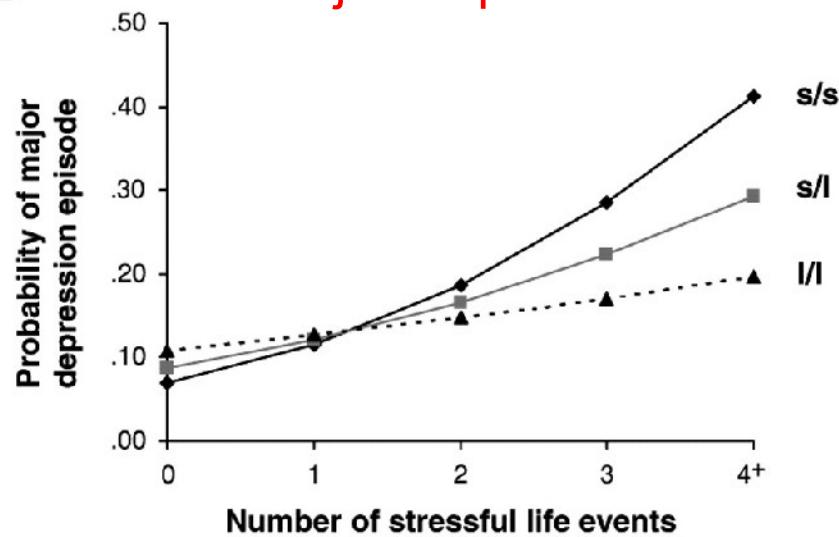
Number of citations = 2.673 < 9 years)

A

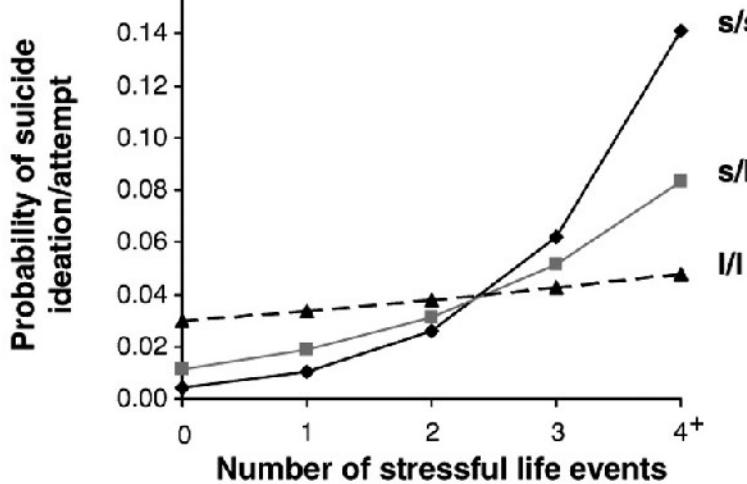
Depression Symptoms

**B**

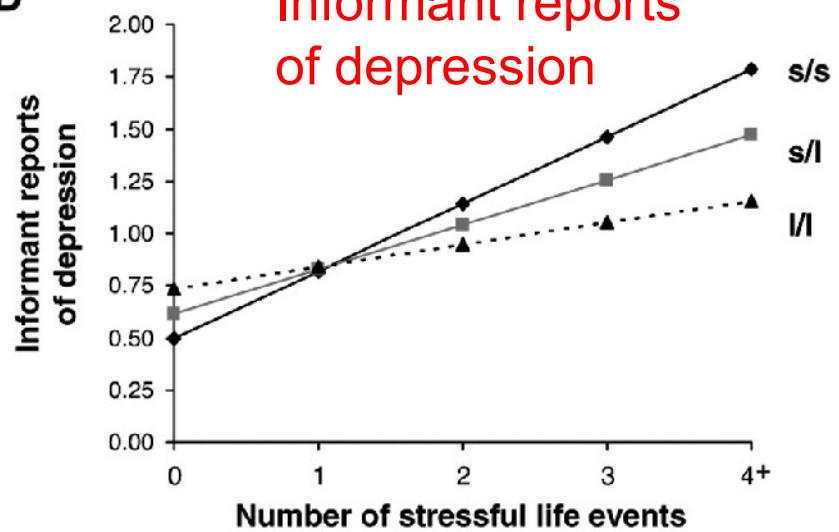
Major Depression

**C**

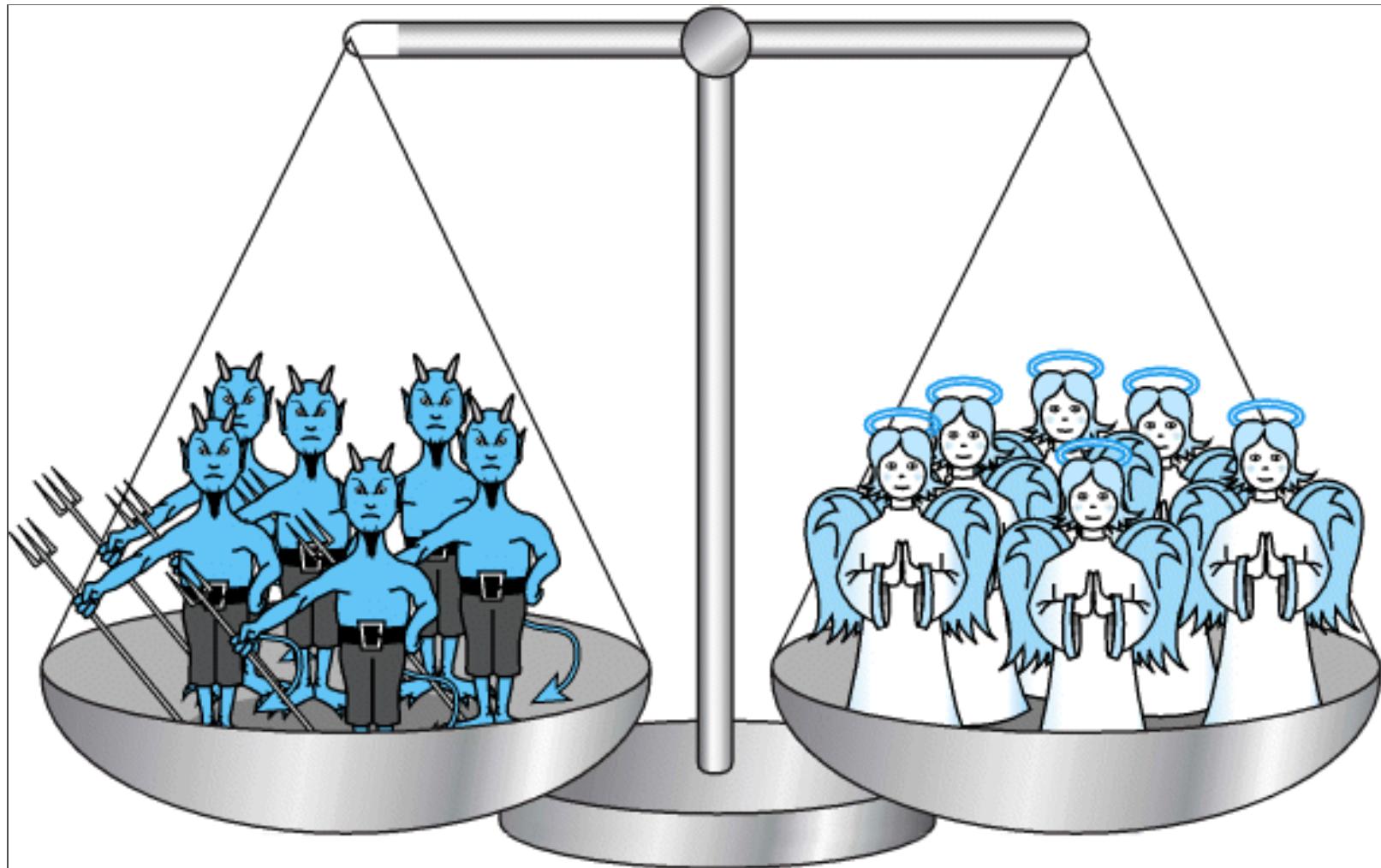
Suicide/ideation/attempt

**D**

Informant reports of depression



Is the “Short” variant always a bad/risk factor?

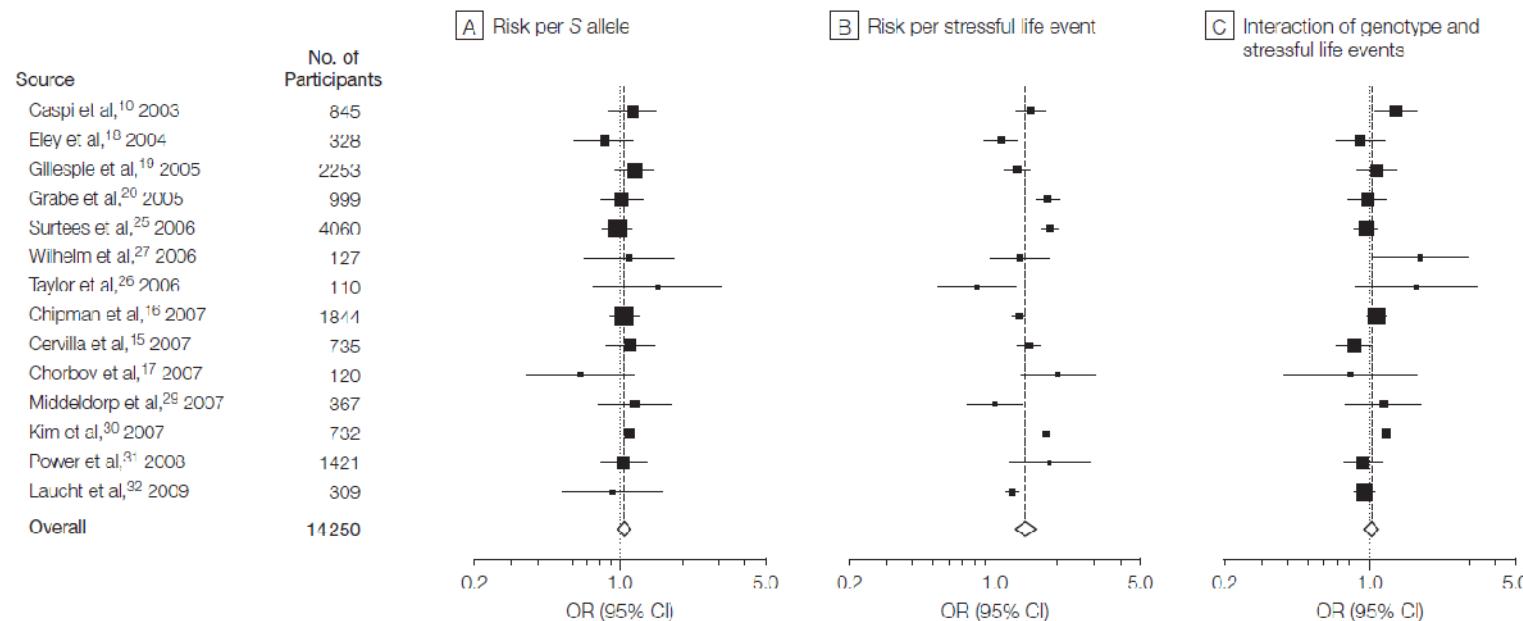


SS= BAD BOY

LL = GOOD BOY

2009

Figure 2. Logistic Regression Analyses of Risk of Depression for 14 Studies



..no evidence that the serotonin transporter genotype alone or in interaction with stressful life events is associated with an elevated risk of depression

Risch et al JAMA 2009; 301, 462-71

The positive results for the 5-HTTLPR SLE interactions in logistic regression models are compatible with chance findings.

Munafo et al Biological psychiatry 2009; 65: 211-19



!!! INNOCENT !!!

14 studies included

2010

META-ANALYSIS

ONLINE FIRST

The Serotonin Transporter Promoter Variant (5-HTTLPR), Stress, and Depression Meta-analysis Revisited

Evidence of Genetic Moderation

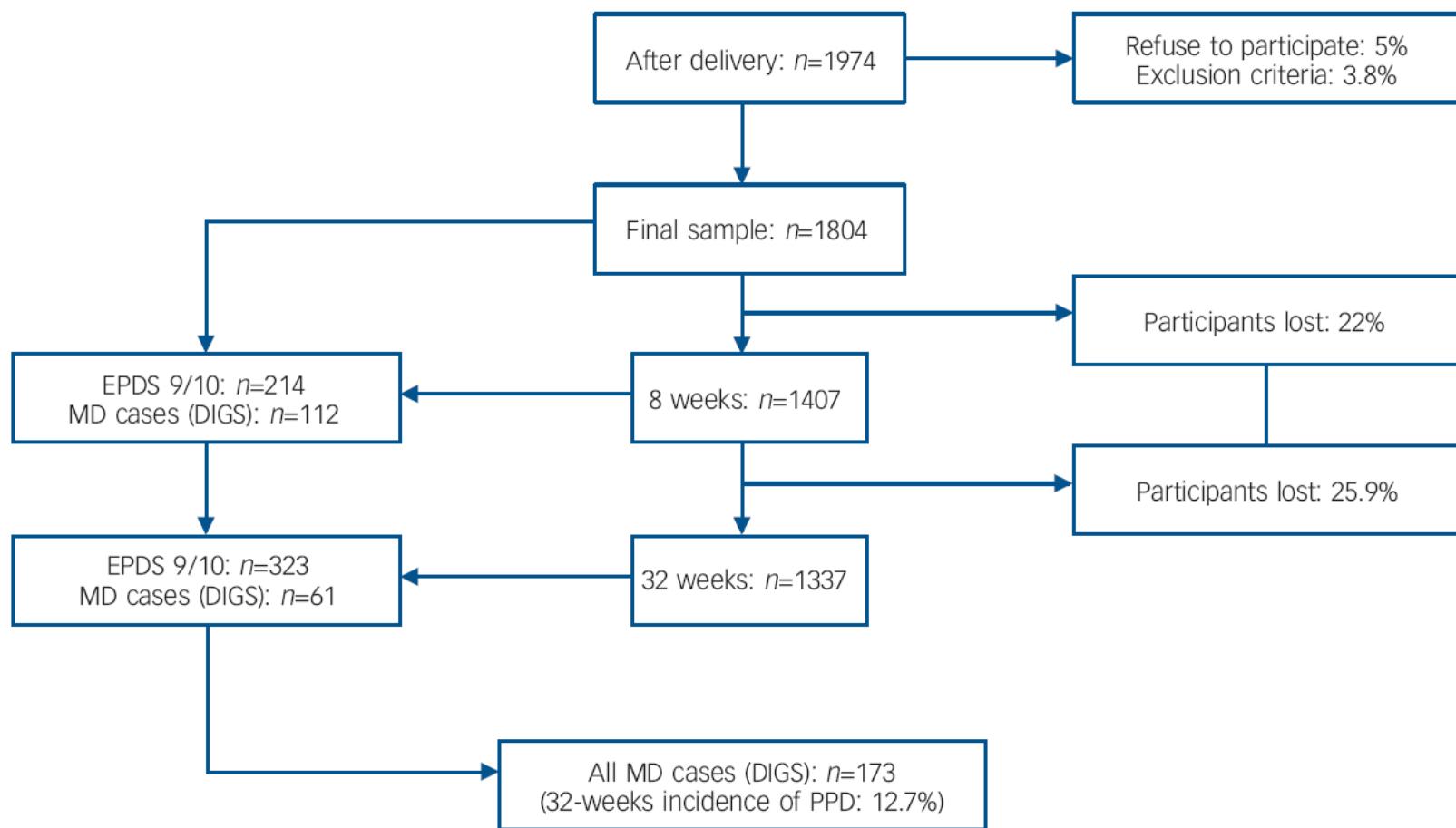
Katja Karg, BSc; Margit Burmeister, PhD; Kerby Shedden, PhD; Srijan Sen, MD, PhD

Conclusion: Contrary to the results of the smaller earlier meta-analyses, we find strong evidence that the studies published to date support the hypothesis that 5-HTTLPR moderates the relationship between stress and depression.

54 studies included

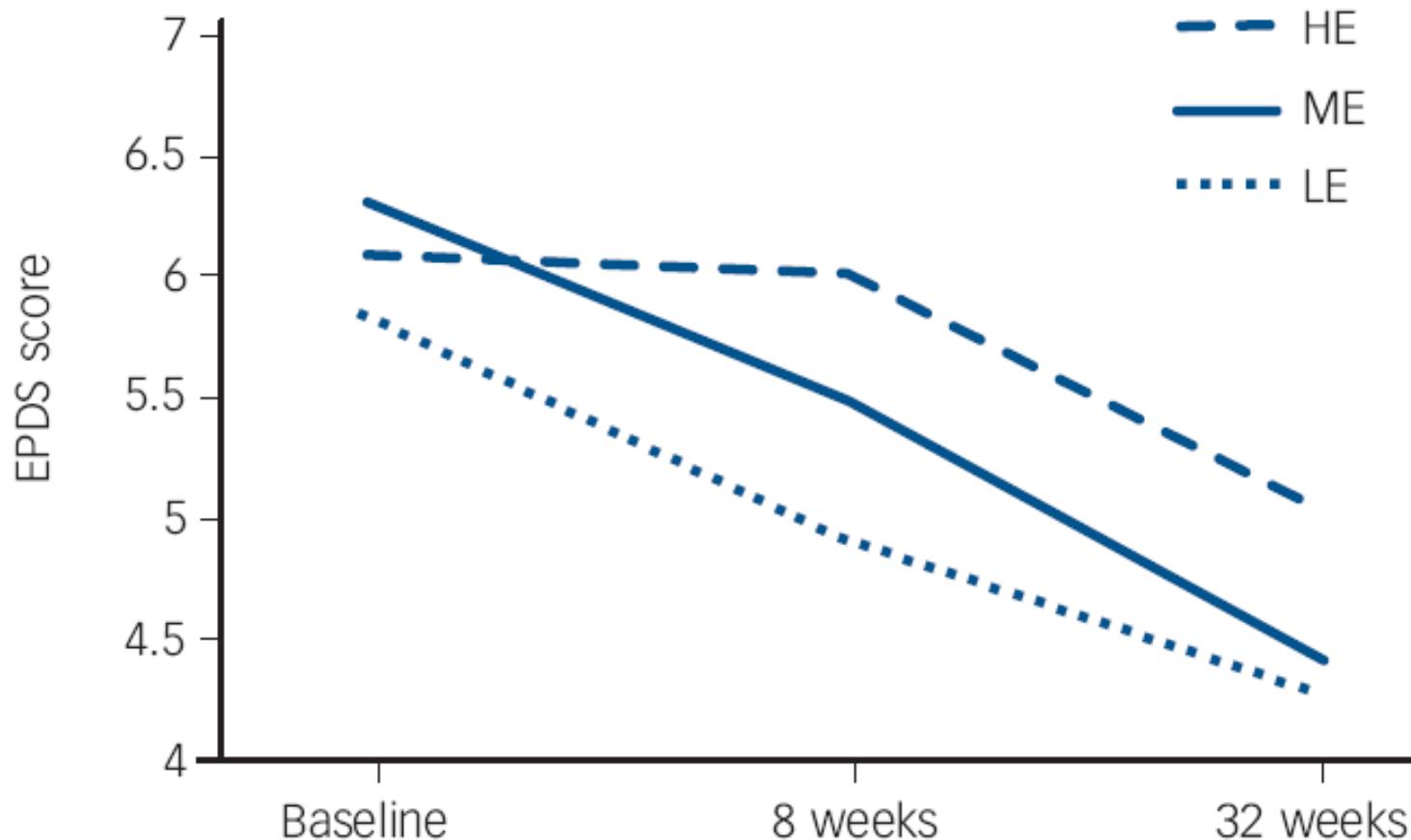
Kang Arch Gen Psychiatry 2010

Postpartum Depression Multicentric Genetic Study



Mood changes after delivery: role of the serotonin transporter gene

J. Sanjuan, R. Martin-Santos, L. Garcia-Esteve, J. M. Carot, R. Guillamat, A. Gutierrez-Zotes,
I. Gornemann, F. Canellas, E. Baca-Garcia, M. Jover, R. Navines, V. Valles, E. Vilella, Y. de Diego,
J. A. Castro, J. L. Ivorra, E. Gelabert, M. Guitart, A. Labad, F. Mayoral, M. Roca, M. Gratacos,
J. Costas, J. van Os and R. de Frutos

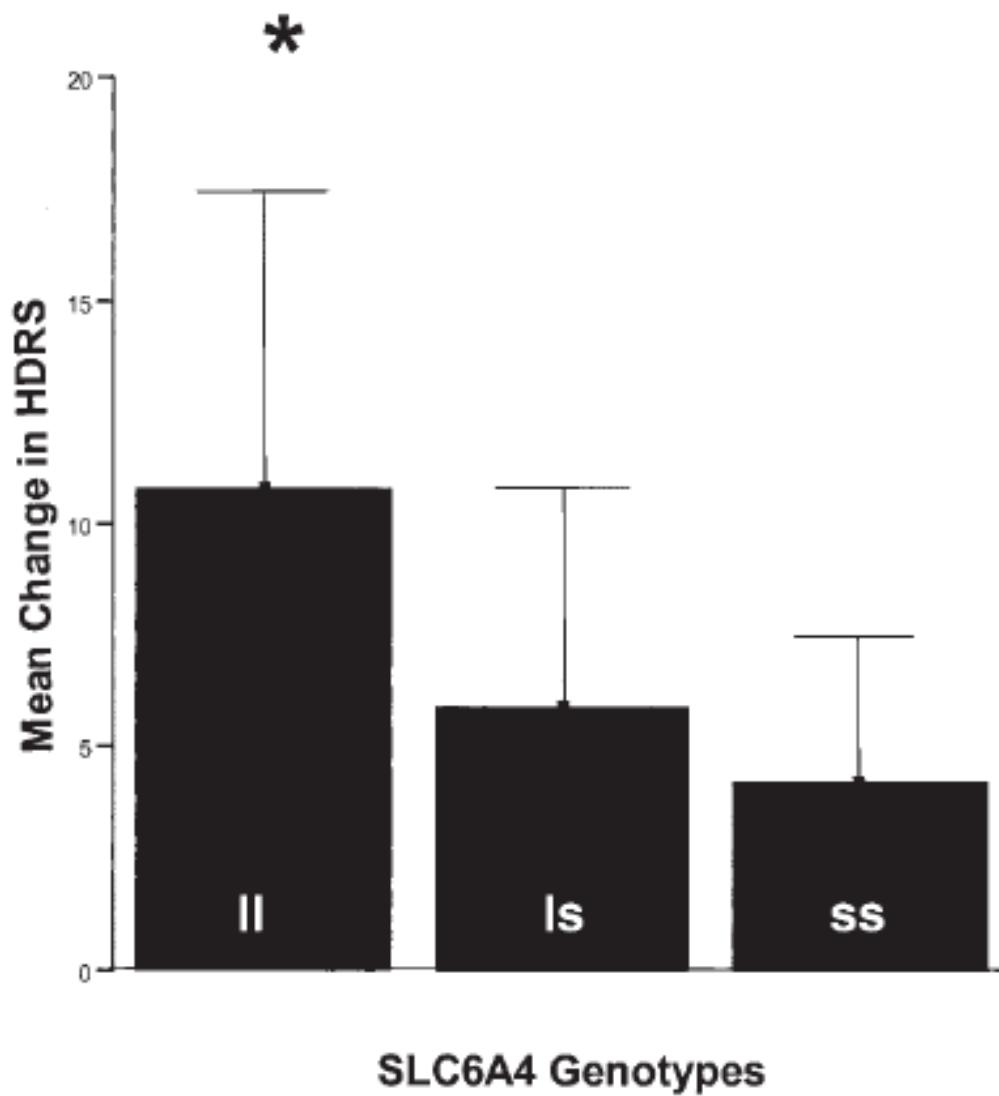


Associative region pol tryptophai

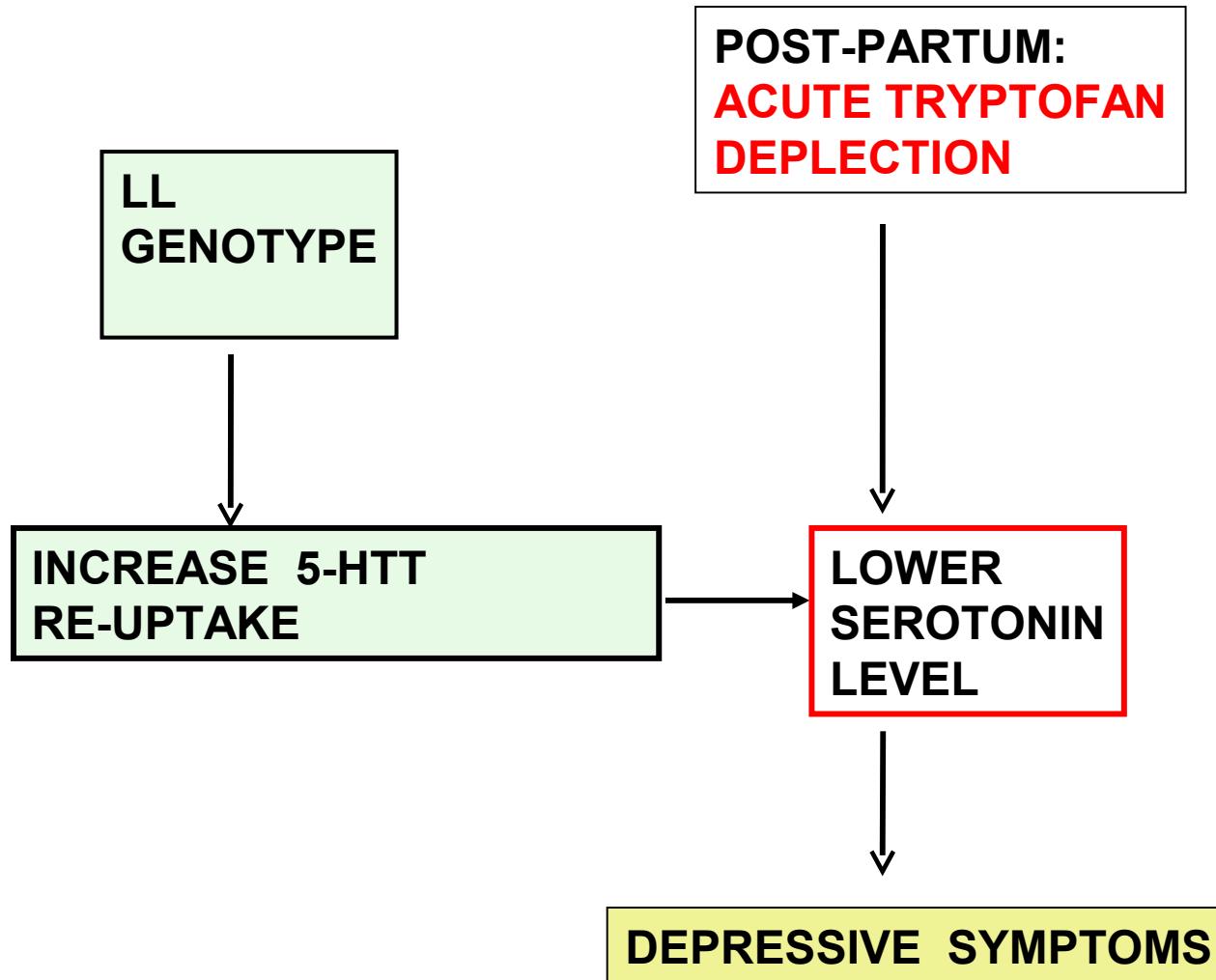
FA Moreno¹, DC

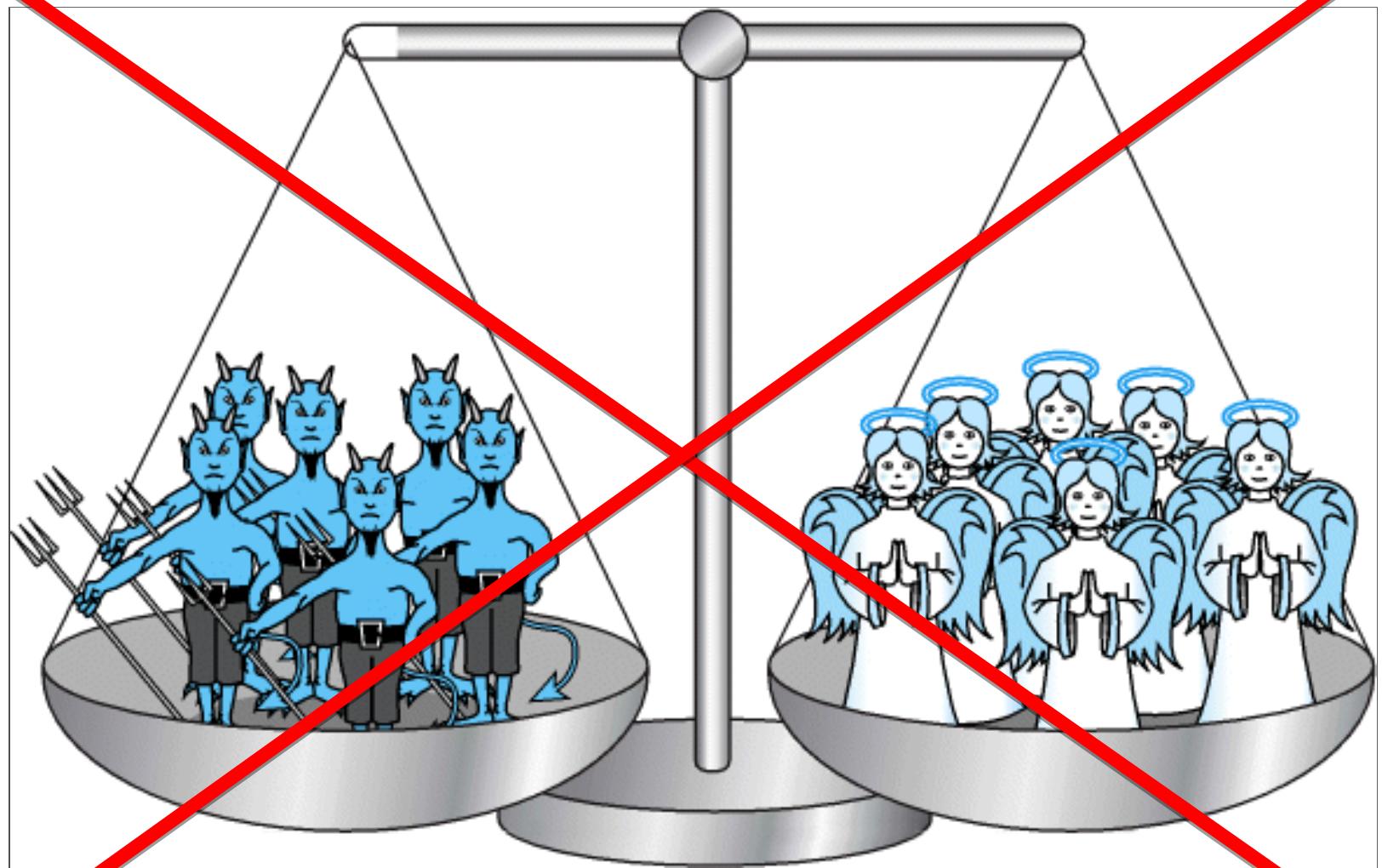
Tomoter
ng

Elgado⁴



POSTPARTUM A DIFFERENT GENETIC WAY TO DEPRESSION?





SS= BAD BOY

LL = GOOD BOY

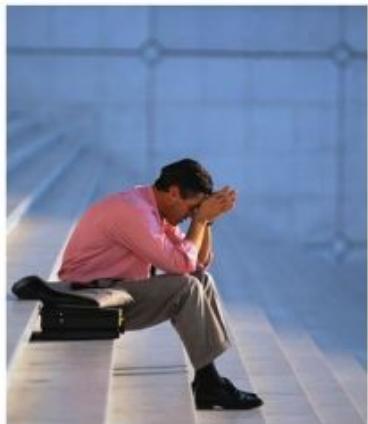
WHEN DOES A LIFE EVENT BECOME A RISK FACTOR FOR DEPRESSION?



BEREAVEMENT



DIVORCE



JOB LOSS

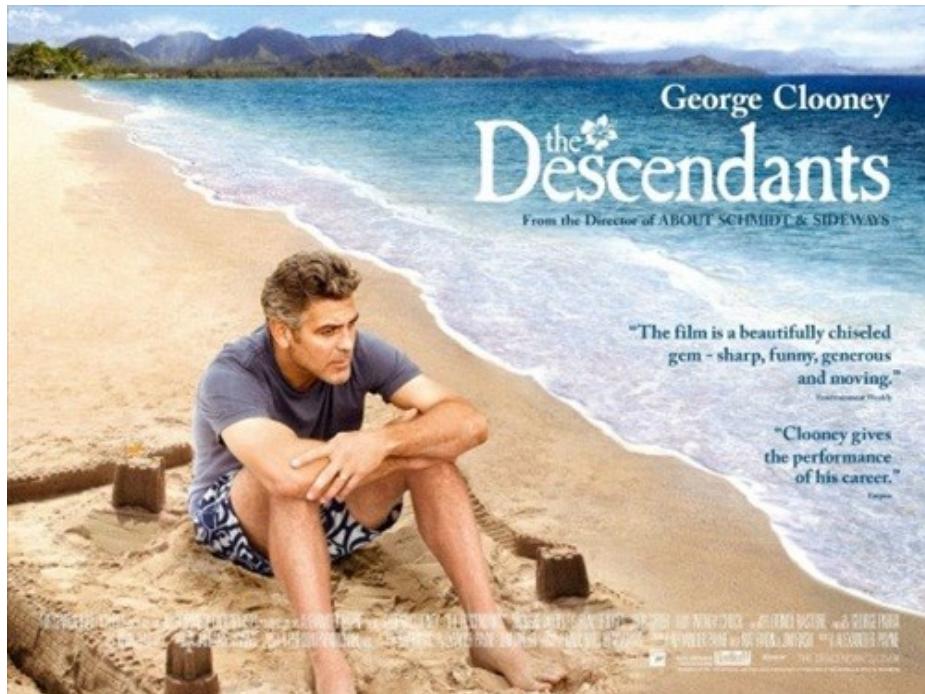


MALTREATMENT

Meaning of Life Events - Adulthood

Table 4. Studies Included in the Stressful Life Events Group Meta-Analysis

Source, Year	Total No. of Participants	1-Tailed P Value	Fisher P Value After Study Exclusion
Caspi et al, ¹ 2003	845	.010	.054
Eley et al, ⁷² 2004	374	.258	.034
Kendler et al, ¹⁰ 2005	549	.007	.047
Jacobs et al, ²⁰ 2006	374	.020	.040
Sjöberg et al, ²¹ 2006	198	.472	.032
Surtees et al, ⁷⁴ 2006	4175	.500	.014
Taylor et al, ⁶³ 2006	110	.028	.034
Wilhelm et al, ⁷⁵ 2006	127	.118	.034
Zalsman et al, ⁶⁴ 2006	79	.342	.033
Cervilla et al, ⁷⁶ 2007	737	.014	.050
Chipman et al, ⁶¹ 2007	2094	.292	.039
Chcrbov et al, ⁷⁷ 2007	236	.99995	.025
Dick et al, ³⁵ 2007	956	.004	.062
Kim et al, ⁷⁸ 2007	732	.039	.046
Mandelli et al, ¹⁵ 2007	670	.011	.049
Middeldorp et al, ⁷⁹ 2007	367	.500	.032
Scheid et al, ¹⁶ 2007	568	.080	.040
Lazary et al, ³⁸ 2008	567	.002	.050
Power et al, ⁸⁰ 2010	1421	.620	.026
Araya et al, ³⁴ 2009	4334	.500	.013
Coventry et al, ⁴² 2010	3243	.500	.021
Bukh et al, ⁴³ 2009	290	.035	.037
Laucht et al, ⁶² 2009	309	.500	.032
Ritchle et al, ⁶² 2009	942	.539	.030
Wichers et al, ⁸³ 2009	502	.380	.033
Zhang et al, ⁴⁵ 2009	792	.998	.016
Hammen et al, ¹³ 2010	346	.376	.034
Goldman et al, ⁵⁰ 2010	984	.020	.055
Total	26 921		
Average sample size	961		.03



BEREAVEMENT = Life Event = 5 points
INFIDELITY = Life Event = 5 points
TOTAL 10 points

CONCLUSIONES (PROVISIONALES)

ESTUDIOS DE

INTERACCIÓN G X E

- No hay polimorfismos buenos y malos en variantes comunes
- Dificultad para definir cuales son los factores de riesgo ambiental
- Necesidad de modelos matemáticos que permitan analizar combinaciones de miles de variables

MENU

1-Heredabilidad de las enfermedades psiquiatricas

2.Datos generales genetica molecular

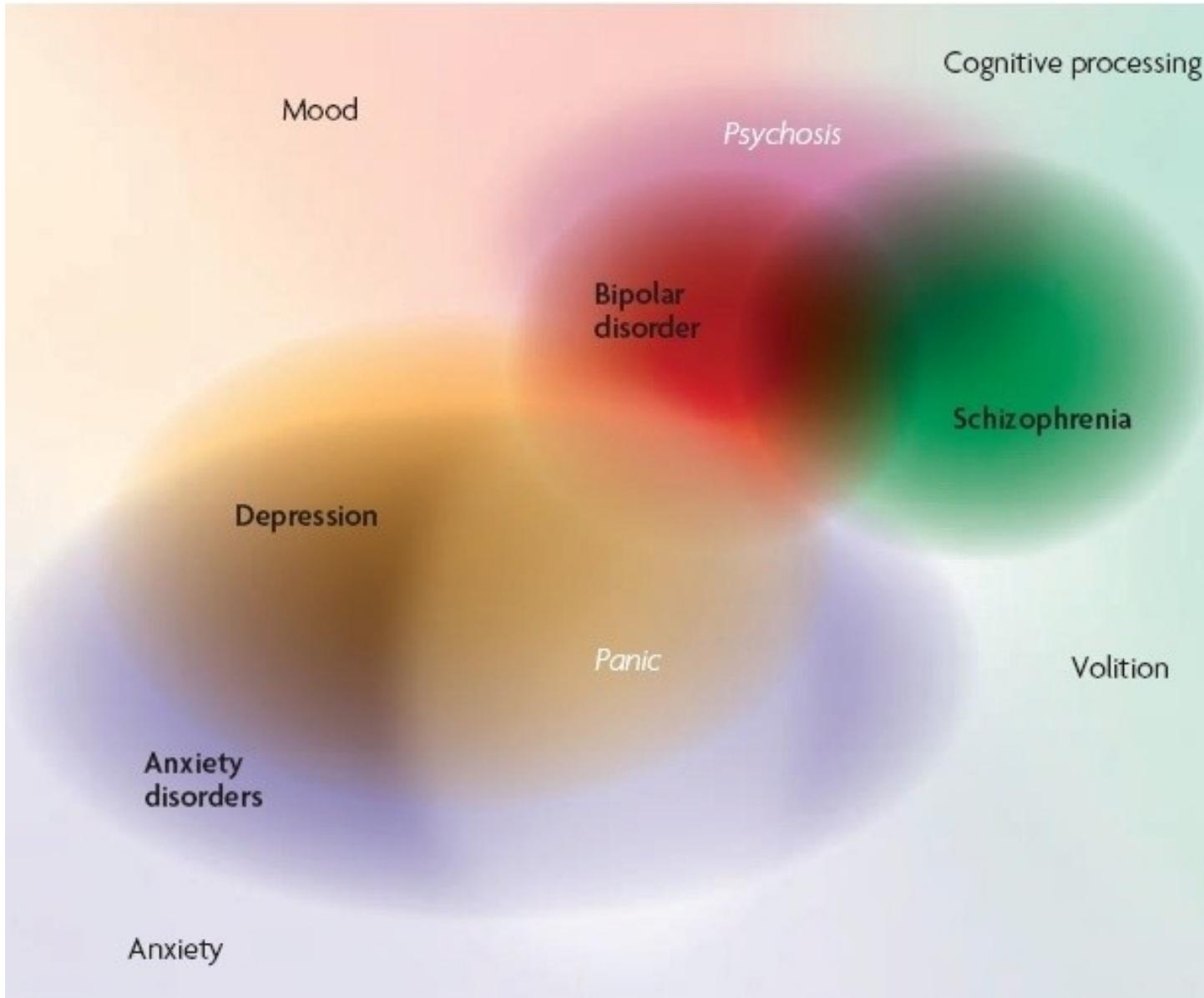
-Estudios de todo el genoma amplio

-Cambios en expresión génica

3-Interacción genético-ambiental

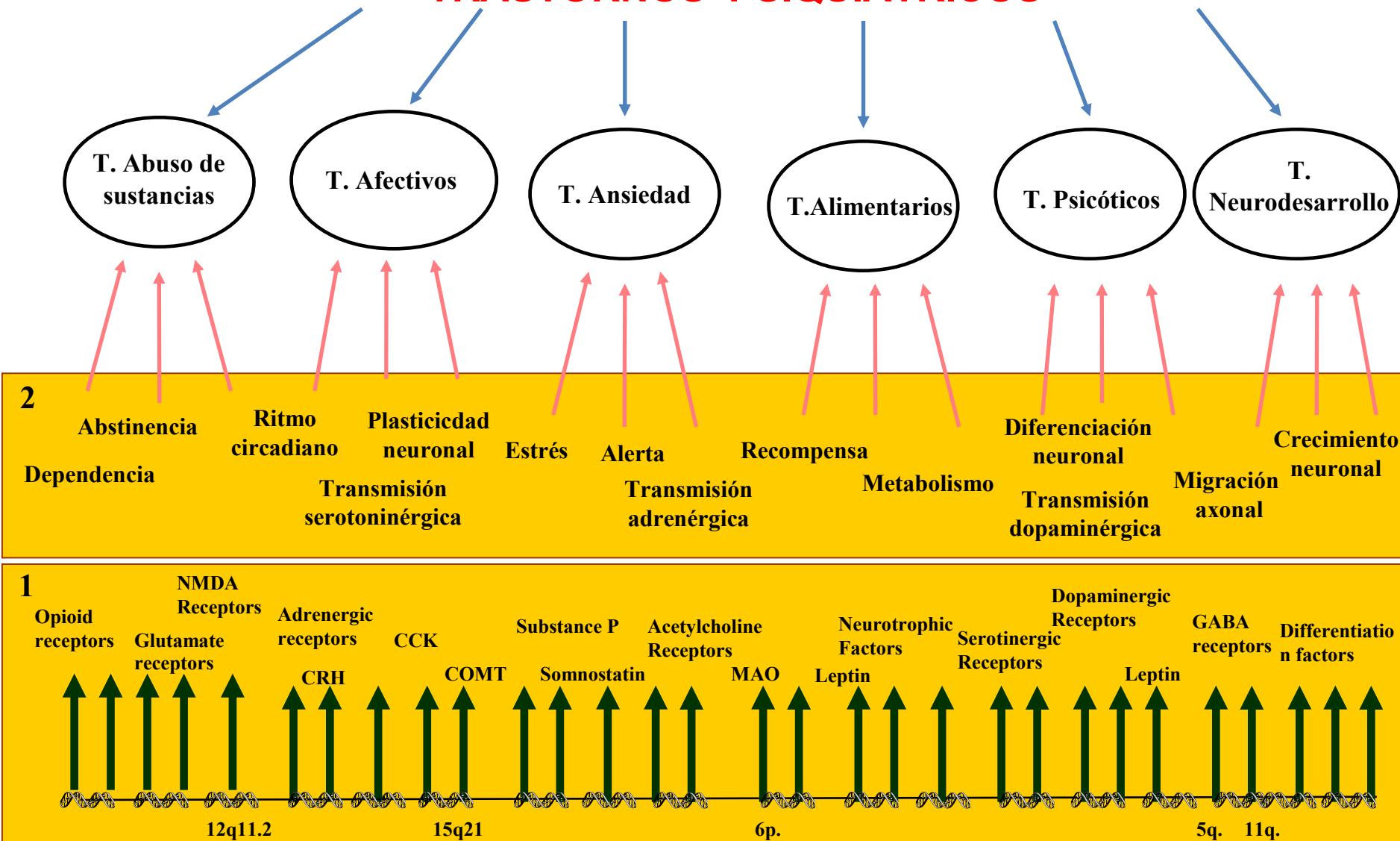
5-Futuro- Practica Clinica

SOLAPAMIENTO DE TRASTORNOS MENTALES

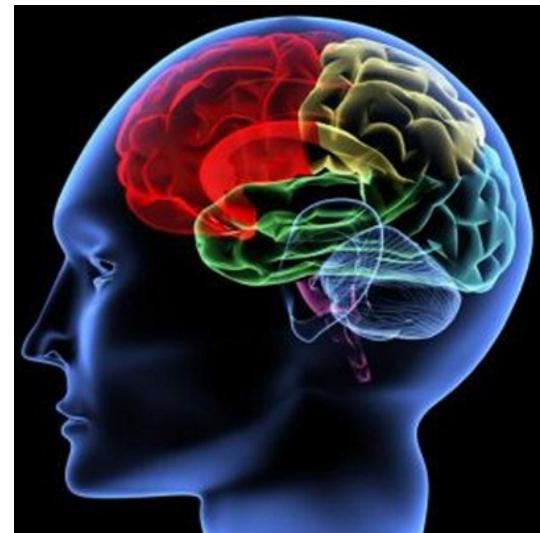
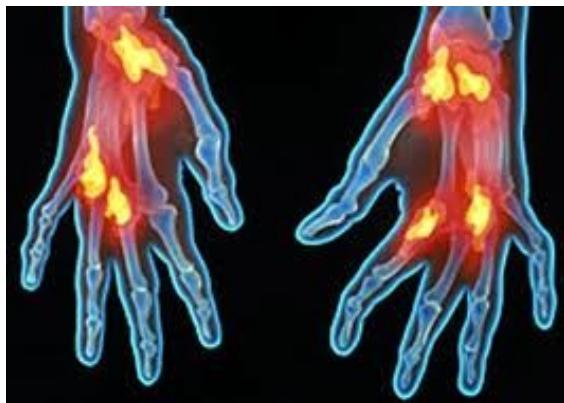


AMPLIANDO EL FENOTIPO

TRASTORNOS PSIQUIÁTRICOS



¿ES LA ESQUIZOFRENIA UN FACTOR DE PROTECCIÓN DE ALGUNAS ENFERMEDADES INMUNOLÓGICAS ARTRITIS REUMATOIDE?

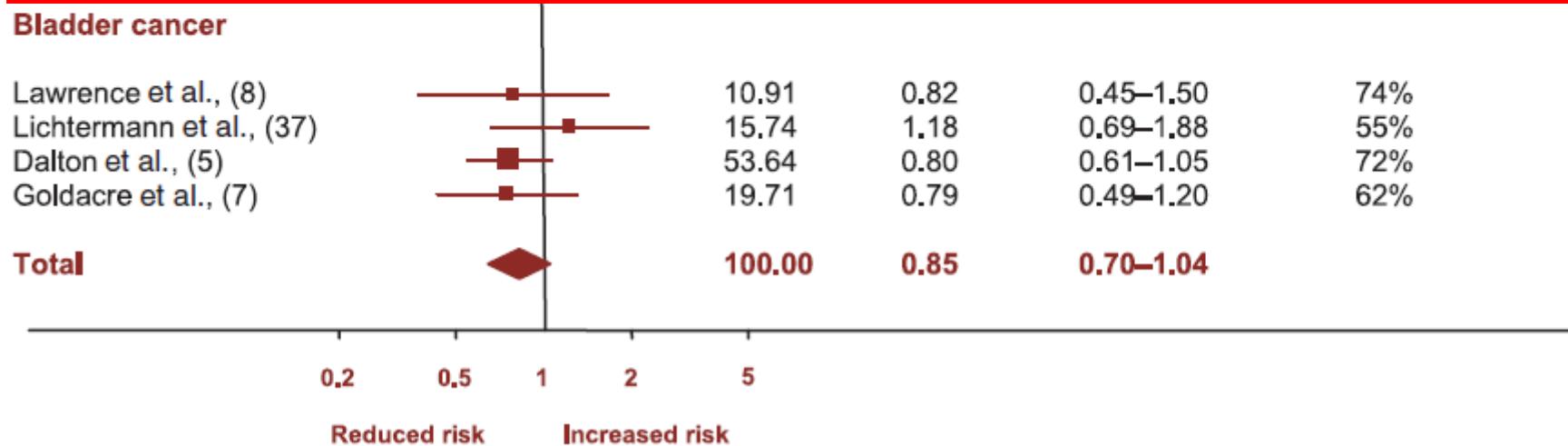


CANCER Y ESQUIZOFRENIA

Cancer incidence in patients with schizophrenia and their first-degree relatives
– a meta-analysis

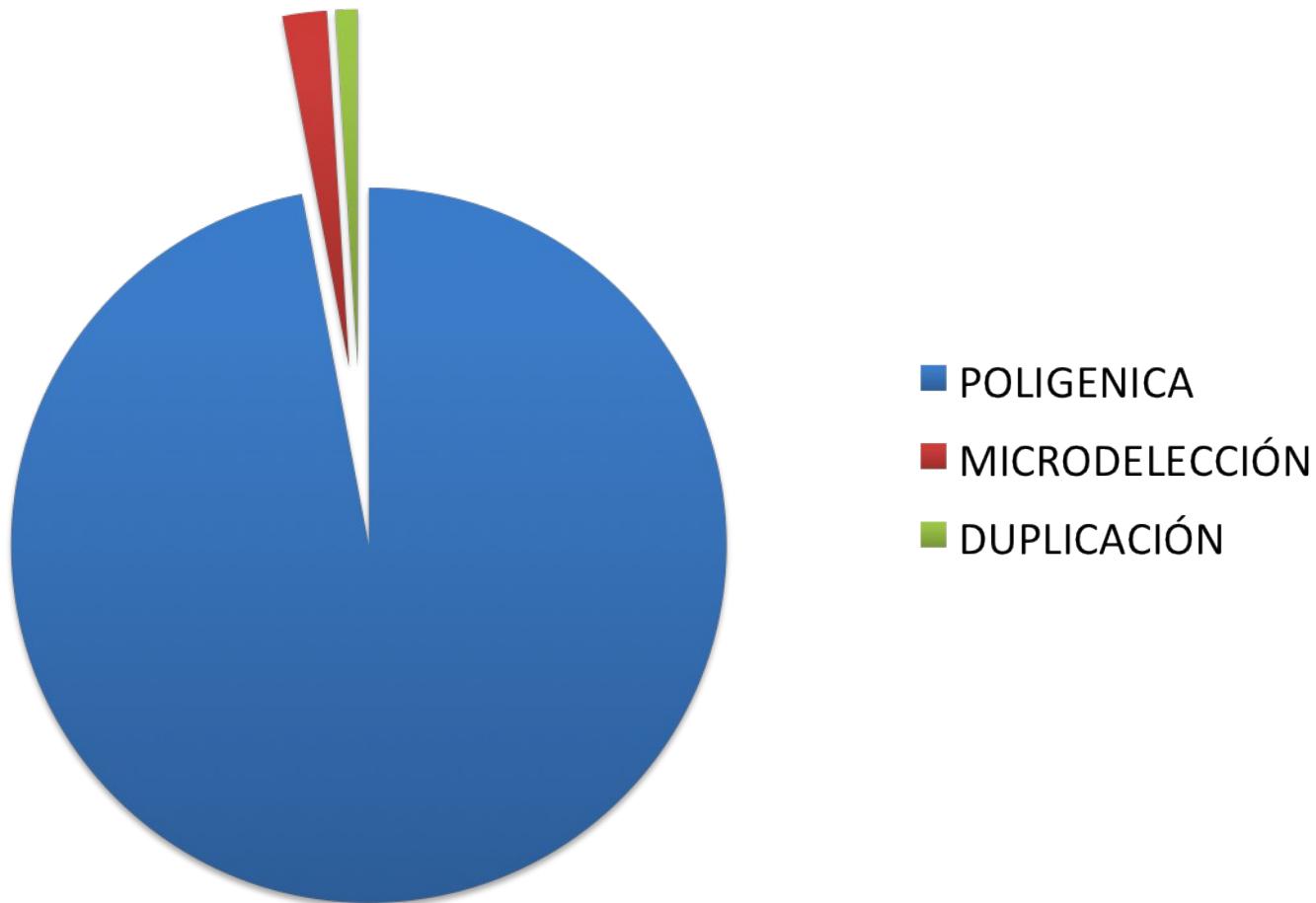


Conclusion: The meta-analysis aided exploration of inconsistent study findings. There is a discrepancy between cancer risk exposure and cancer incidence in schizophrenia consistent with a protective effect.



RECORTANDO EL FENOTIPO

ESQUIZOFRENIA CLASIFICACIÓN MOLECULAR





13 - 14 September 2011.

PHENOMENOLOGY – Frank Laroia

COGNITION – Flavie Waters

EMOTIONS - Andre Aleman

ELECTROPHYSIOLOGY – Judith Ford

NEUROBIOLOGY – Paul Shotbolt

NEUROIMAGING – Paul Allen

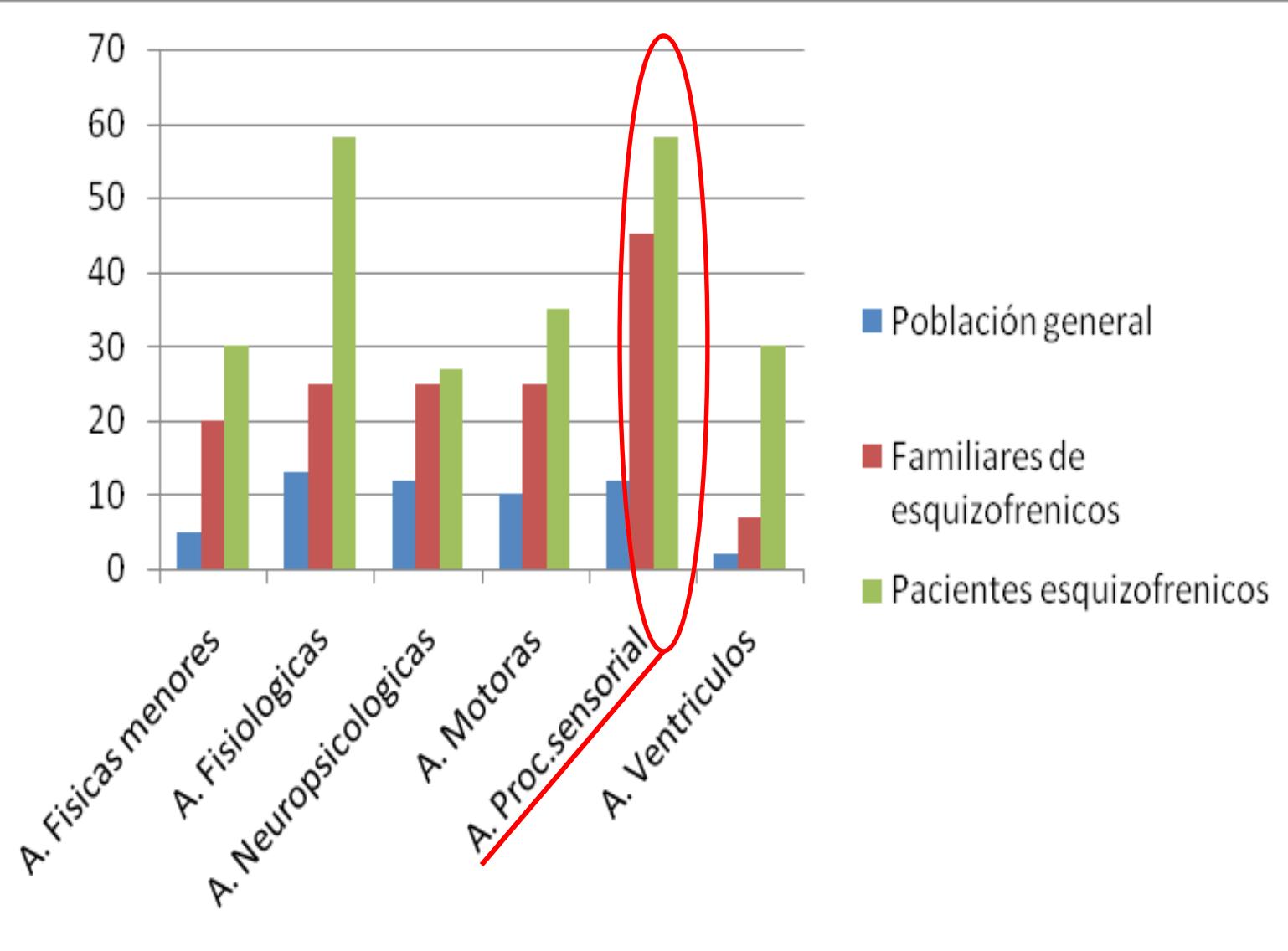
GENETICS - Julio Sanjuan

TREATMENT – Iris Sommer

VOCES EN LA CABEZA.COM

OUR GENETIC STUDIES OF HALLUCINATIONS IN PSYCHOSES

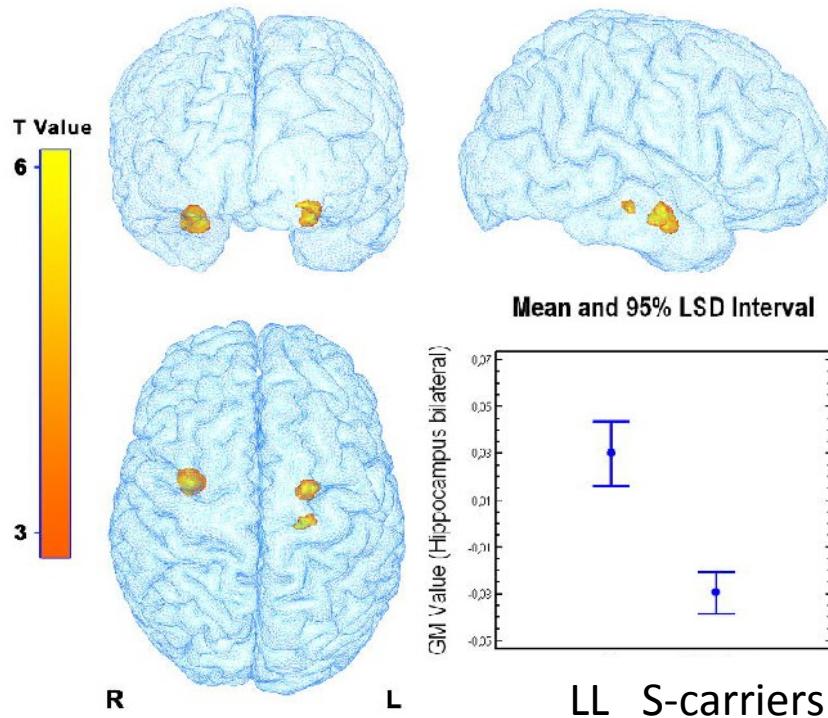
Author/year Journal	Sample	Gene/ nº of SNPs	RESULTS
Sanjuan et al 2004 Eur J. Psychiatry	Schizophrneic Auditory Hallucinations	CCK-AR 4 SNPs	Negative (Positive in persistant)
Toirac et al 2007 Psychiatric Genetics	Schizophrenic Auditory Hallucinations	CCK-AR 12 SNPs	Positive
Sanjuan et al 2005 J. NeuroPsychopharmacology	Schizophrenic Auditory Hallucinations	HTTLPR 4 SNPs	Positive
Rivero et al 2006 Schizophrenia Research	Schizophrenic Auditory Hallucinations	ASPM 6 SNPs	Negative
Sanjuan et al 2005 Schizophrenia Research	Schizophrenic Auditory Hallucinations	FOXP2 3 SNPs	Negative
Tolosa et al 2008 Schizophrenia Research	Schizophrneic Auditory Hallucinations	HAR1 10 SNPs	Negative (positive In Auditory Hallucinations)
Carrera et al 2008 Am J Med Gen	Schizophrneic	MAOB 50 SNPs	POSITIVE
Sanjuan et al 2006 Psychiatric Genetics	Schizohrenic Auditory Hallucinations	FOXP2 10 SNPs	Positive



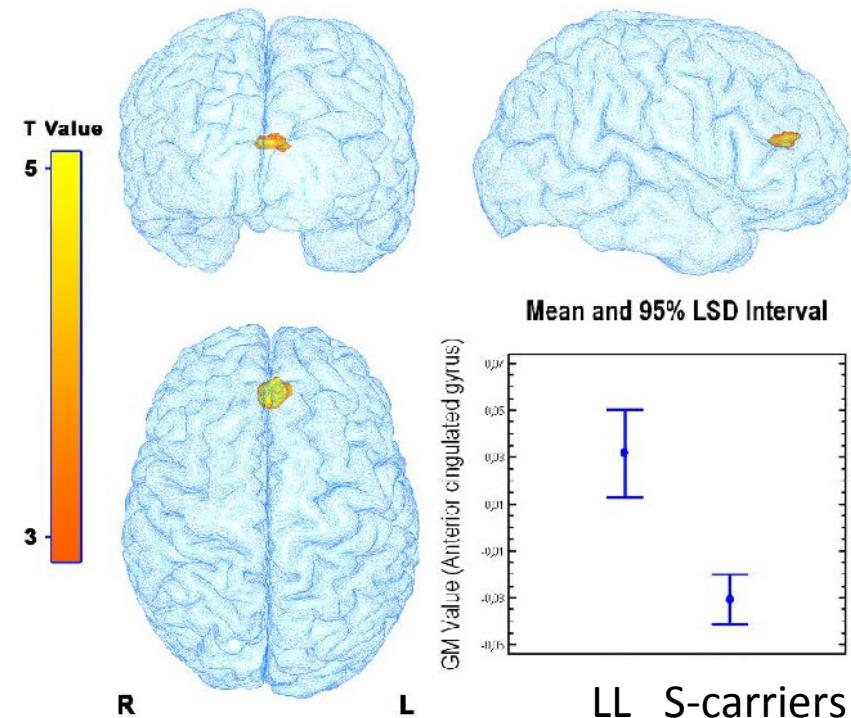
SLC6A4 gene: 5-HTTLPR and neuroimaging phenotypes

Effect of 5-HTTLPR on brain structure (VBM)

Controls



Patients

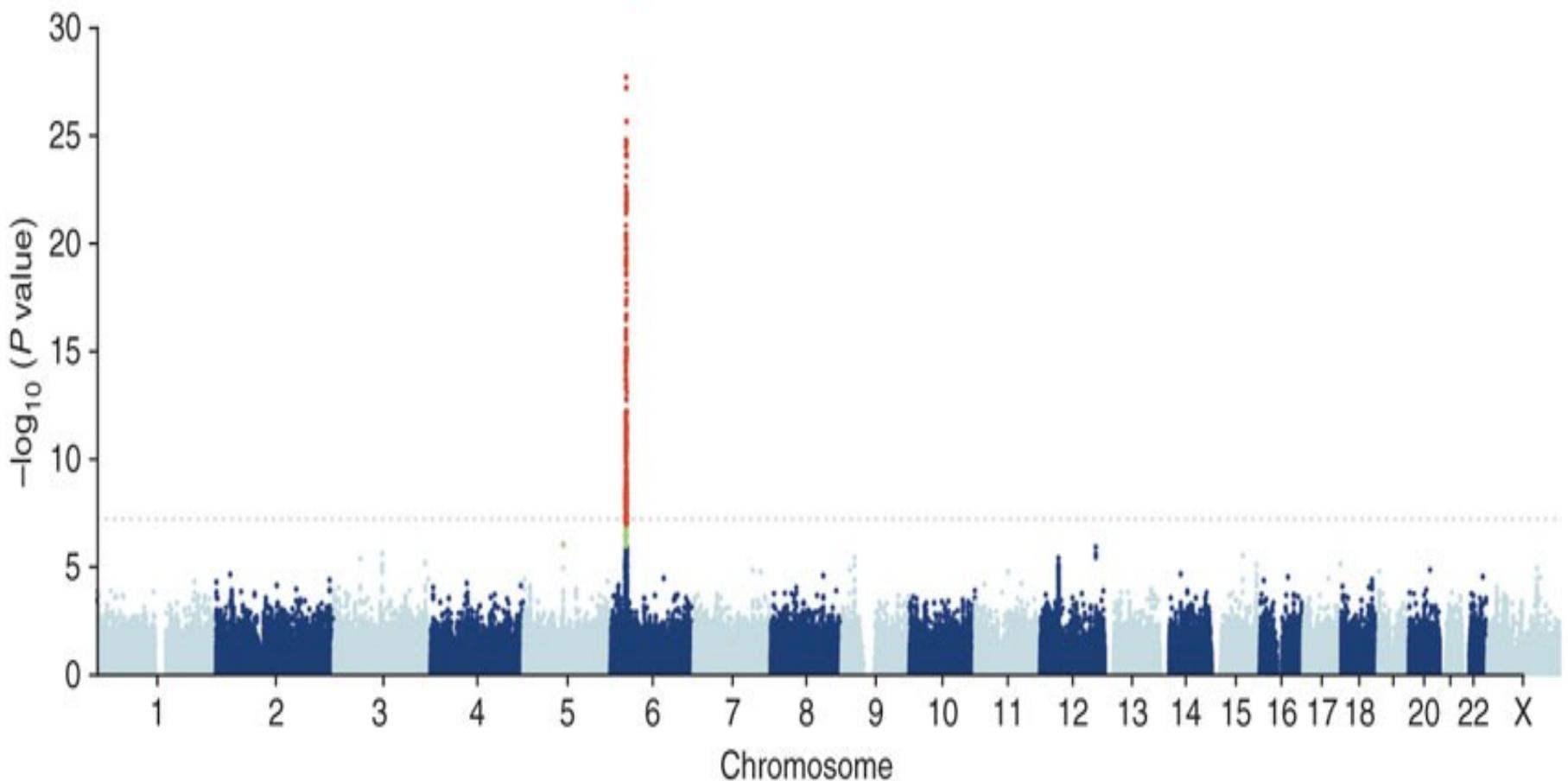


- ✓ Hippocampus (bilateral)
- ✓ Parahippocampal gyrus (left)

- ✓ Anterior cingulate gyrus

Rivero et al (under review)

GWAS of Drug-induced Liver Injury due to Flucloxacillin



Daly et al. *Nature Genetics*, 2009

FUTURO

1. MEJORAR LA DEFINICIÓN DEL FENOTIPO

2. PROYECTOS COLABORATIVOS INTERNACIONALES

3. MEJORAR INTEGRACIÓN BASICOS-CLINICOS

**4. NECESIDAD DE NUEVAS IDEAS
HIPOTESIS FISIO-PATOLOGICAS**

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Coordinator PI. J. Sanjuan

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de Salud Mental