



1

### Learning Outcomes 1

1. List the major parts of a chromosome.
2. List the types of chromosomes based on centromere position.
3. Describe the ways that chromosomes are obtained, prepared, detected, and depicted in detail.
4. Explain how atypical chromosome numbers arise.
5. Distinguish polyploidy from aneuploidy.
6. Describe specific aneuploid conditions.
7. Distinguish between the consequences of having balanced versus unbalanced chromosomes.

2

### Learning Outcomes 2

8. Describe deletions, duplications, and the two major types of translocation.
9. Distinguish the two types of inversions.
10. Describe the consequence of having an isochromosome.
11. Describe the consequence of having a ring chromosome.
12. Explain how a person could inherit both copies of a DNA sequence from one parent.
13. Describe how inheriting both copies of DNA from one parent can affect a person's health.

3

### Cytogenetics

**Cytogenetics** is the classical area of genetics that links chromosome variations to specific traits, including illnesses.

Excess genetic material has milder effects on health than a deficit

Large-scale chromosomal abnormalities present in all cells disrupt or halt prenatal development

- As a result, only 0.65% of all newborns have chromosomal anomalies that produce symptoms.

4

### Portrait of a Chromosome 1

A chromosome consists primarily of DNA and proteins with a small amount of RNA.

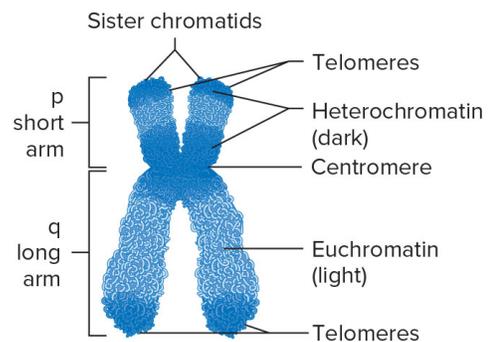
Chromosomes are distinguished by size and shape

The essential parts of a chromosome are:

- Telomeres
- Origins of replication sites
- Centromere

5

### Portrait of a Chromosome 2



6

**Portrait of a Chromosome 3**

**Heterochromatin** is darkly staining.

- Consists mostly of repetitive DNA

**Euchromatin** is lighter-staining.

- Contains most protein-encoding genes

**Telomeres** are chromosome tips composed of many repeats of TTAGGG.

- Shorten with each cell division

7

**Centromeres**

Largest constriction of the chromosome and where spindle fibers attach

- Lie within vast stretches of heterochromatin.

Bases that form the centromere are repeats of a 171-base DNA sequence

Replicated at the end of S phase

- Facilitated by **centromere protein A**

**CENP-A** is passed to next generation

- Example of an epigenetic change

8

**Subtelomeres 1**

Chromosome regions between the centromere and telomeres

Consists of 8,000 to 300,000 bases

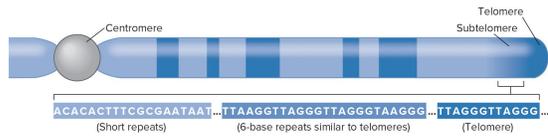
Near telomere the repeats are similar to the telomere sequence

Contains at least 500 protein-encoding genes

- About 50% are multigene families that include pseudogenes

9

**Subtelomeres 2**



Centromere

Telomere

Subtelomere

ACACACTTTCCGGAATAAT...TTAAGGTTAGGTTAGGTTAAGGG...TTAGGGTTAGGG...  
 (Short repeats) (6-base repeats similar to telomeres) (Telomere)

[Access the full alternative for slide image.](#)

10

**Karyotype 1**

A chromosome chart

Major clinical tool

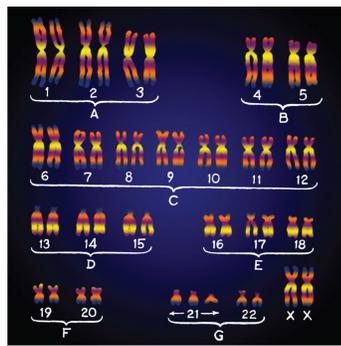
Displays chromosomes arranged by size and structure

Humans have 24 chromosome types

- Autosomes are numbered 1–22 by size
- Sex chromosomes are X and Y

11

**Karyotype 2**



1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 X X

A B C D E F G

[Access the full alternative for slide image.](#)

12

**Karyotype 3**

Karyotypes are typically performed on cells during mitotic metaphase, when DNA coils tightly, enabling it to be visualized

Karyotypes are useful at several levels

They can:

- Confirm a clinical diagnosis
- Reveal effects of environmental toxins
- Clarify evolutionary relationships

13

**Centromere Positions**

- **Telocentric**—At the tip
- **Acrocentric**—Close to center
- **Submetacentric**—Off-center
- **Metacentric**—At center

14

**Detecting Chromosomes**

Chromosomes can be imaged from any type of human cell that has a nucleus (RBCs do not).

The most common application of human chromosome testing is in prenatal diagnosis.

- Chromosomes are also checked in relatives of people known to have atypical chromosomes, to explain infertility, or to diagnose or track cancers.

**Techniques**

- Older approaches: amniocentesis and chorionic villus sampling (CVS)
- Newer approaches: Cell-Free Fetal DNA Testing

15

**Amniocentesis 1**

- A needle is used to remove a small sample of amniotic fluid from the uterus of a pregnant woman
- Ultrasound is used to follow needle's movement

(a) Amniocentesis

16

**Amniocentesis 2**

(c) Ultrasound image

17

**Chorionic Villus Sampling**

Performed during 10 to 12<sup>th</sup> week of pregnancy  
Provides earlier results than amniocentesis  
Does not detect metabolic problems

- Has greater risk of spontaneous abortion

(b) Chorionic villus sampling

18

### The Maternal Age Effect

- For many years amniocentesis was limited to women over age 35, when the risk of the procedure equals the risk of miscarriage, which rises with maternal age

Frequency

Maternal age (years)

Trisomy 21 in liveborn infants

© McGraw Hill

19

### Staining Chromosomes

Early karyotypes used generalized stains

- These could not distinguish chromosomes of similar size, which were considered in groups.

Improved staining techniques gave banding patterns unique to each chromosome

### Fluorescence *in situ* hybridization (FISH)

- DNA probes labeled with fluorescent dye bind complementary DNA sequences on chromosomes
- Use of an algorithm applies a unique false color to each chromosome, "painting" a karyotype from several fluorescent dyes.

© McGraw Hill

20

### FISHing for Chromosomes

© McGraw Hill

21

### Cell-Free Fetal DNA Testing 1

In a pregnant woman, about 20% of small DNA pieces found in the blood come from the placenta, and therefore represent the fetus

Tests of cell-free fetal DNA are done at 10 weeks or later, and are rapidly replacing older techniques

- Called noninvasive prenatal diagnosis or testing.

Analysis of cell-free fetal DNA is based on proportions.

- Entire genomes can be reconstructed from the DNA pieces.

© McGraw Hill

22

### Cell-Free Fetal DNA Testing 2

Maternal cell-free DNA

Fetal cell-free DNA

Nucleated red blood cell

White blood cell

© McGraw Hill

23

### Chromosomal Shorthand 1

The information in a karyotype is abbreviated by listing the chromosome number, sex chromosome makeup, and atypical

Symbols and shorthand describe the type of aberration

- After the shorthand, numbers correspond to bands and subbands

A chromosomally normal male is designated 46,XY and a female 46,XX.

- Bands and subbands identify specific genes.

© McGraw Hill

24

**Chromosomal Shorthand 2**

Abbreviation	Meaning
46,XY	Normal male
46,XX	Normal female
45,X	A female with one X
47,XXY	A male with an extra X
47,XYY	A male with an extra Y
46,XY,del (7q)	A male missing part of the long arm of chromosome 7
47,XX,+21	A female with trisomy 21 Down syndrome
46,XY,t(7;9)(p21.1; q34.1)	A male with a translocation between the short arm of chromosome 7 at band 21.1 and the long arm of chromosome 9 at band 34.1
48,XXYY	A male with an extra X and an extra Y chromosome

25

**Ideogram**

Graphical representations called **ideograms** depict the arms (p or q), bands, and subbands of chromosomes aberration

- Major regions are delineated by banding patterns

26

**Chromosome Abnormalities 1**

Karyotype may be abnormal in:

- Chromosome number
- Chromosome structure

Abnormal chromosomes account for at least 50% of spontaneous abortions, yet only 0.65% of newborns have them.

- Therefore, most embryos and fetuses with atypical chromosomes stop developing before birth.

More people are being diagnosed with chromosome abnormalities due to improved technology

27

**Chromosome Abnormalities 2**

Type of Abnormality	Definition
Polyploidy	Extra chromosome sets
Aneuploidy	An extra or missing chromosome
Monosomy	One chromosome absent
Trisomy	One chromosome extra
Deletion	Part of a chromosome missing
Duplication	Part of a chromosome present twice
Translocation	Two chromosomes join long arms or exchange parts
Inversion	Segment of chromosome reversed
Isochromosome	A chromosome with identical arms
Ring chromosome	A chromosome that forms a ring due to deletions in telomeres, which cause ends to adhere
Chromothripsis	One or more chromosomes shatters

28

**Polyploidy**

Cell with extra chromosome sets

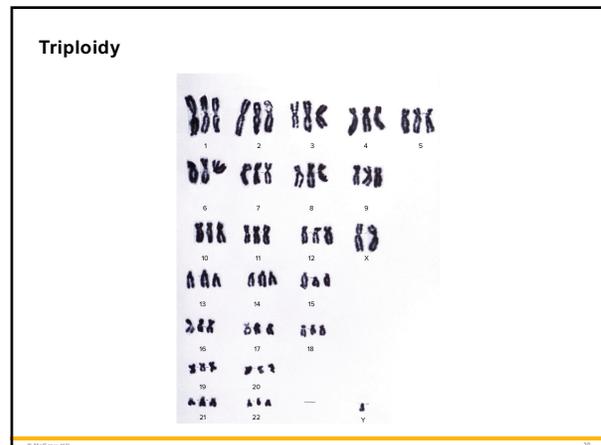
**Triploid (3N)** cells have three sets of chromosomes

- Produced by:
  - Fertilization of one egg by two sperm
  - Fusion of haploid and diploid gametes
- Account for 17% of all spontaneous abortions and 3% of stillbirths and newborn deaths

Polyploids are common among flowering plants

- Fish farmers raise triploid salmon

29



30

**Aneuploidy 1**

Normal chromosomal number is **euploid**.

Cells with extra or missing chromosomes are **aneuploid**.

Autosomal aneuploids are spontaneously aborted.

- Those born are more likely to have an extra chromosome (**trisomy**) rather than a missing one (**monosomy**).

31

**Aneuploidy 2**

- Arises during mitosis, producing groups of somatic cells with the extra or missing chromosomes
- Individual with two chromosomally-distinct cell populations is called a **mosaic**
- Mitotic nondisjunction event that occurs early in development can have serious effects on the health of the individual

32

**Nondisjunction**

- Meiotic error that causes aneuploidy
- Produces gamete with an extra chromosome and another with one missing chromosome
- Nondisjunction during meiosis I results in copies of both homologs in one gamete
- Nondisjunction during meiosis II results in both sister chromatids in one gamete

33

**Nondisjunction at Meiosis I**

(a) Nondisjunction at meiosis I

34

**Nondisjunction at Meiosis II**

(b) Nondisjunction at meiosis II

35

**Autosomal Aneuploids**

Most autosomal aneuploids cease developing long before birth

Frequently seen trisomies in newborns are those of chromosomes 21, 18, and 13.

- Carry fewer genes than other autosomes

Type of Trisomy	Incidence at Birth	Percentage of Conceptions That Survive 1 Year After Birth
13 (Patau)	1/12,500–1/21,700	<5%
18 (Edwards)	1/6,000–1/10,000	<5%
21 (Down)	1/800–1/826	85%

36



**Turner (XO) Syndrome**

About 1 in 2,500 female births

99% of affected fetuses die in utero

Features:

- Short stature
- Webbing at back of neck
- Incomplete sexual development (infertile)
- Impaired hearing

Individuals who are mosaics may have children

43

**Triplo-X Syndrome**

- About 1 in every 1,000 female births
- Few modest effects on phenotype include tallness, menstrual irregularities, and slight impact on intelligence
- The lack of symptoms reflects the protective effect of X inactivation—all but one of the X chromosomes is inactivated.

44

**Klinefelter (XXY) Syndrome**

About 1 in 500 male births

Features include:

- Incomplete sexual development
- Rudimentary testes and prostate
- Long limbs, large hands and feet
- Some breast tissue development

The most common genetic or chromosomal cause of male infertility.

45

**47,XXYY Syndrome**

About 1 in 17,000 newborn boys

Arises due to unusual oocyte and sperm

Associated with more severe behavioral problems than Klinefelter syndrome

- AAD, obsessive compulsive disorder, learning disabilities

Individuals are infertile

Treated with testosterone

46

**Jacobs (XYY) Syndrome**

One in 1,000 male births

Arises from nondisjunction in the male, producing a sperm with two Y chromosomes that fertilizes a normal oocyte

96% are phenotypically normal

Modest features

- Great height
- Acne
- Speech and reading disabilities

Studies suggest increase in aggressive behaviors are not supported

47

**Atypical Chromosome Structure**

A chromosome can be structurally atypical in several ways:

- It may have too much or too little genetic material
- It may have a stretch of DNA that is inverted or moved and inserted into a different type of chromosome

Atypical chromosomes are:

- *Balanced* if they have the normal amount of genetic material
- *Unbalanced* if they have extra or missing DNA sequences.

48



### Translocation Down Syndrome

5% of Down syndrome results from a Robertsonian translocation between chromosomes 21 and 14

Tends to recur in families, who also have more risk of spontaneous abortions

One of the parents is a translocation carrier

- May have no symptoms
- Distribution of the unusual chromosome leads to various imbalances

55

### A Robertsonian Translocation

56

### Reciprocal Translocations 1

Two nonhomologous chromosomes exchange parts.

About 1 in 600 people is a carrier for a reciprocal translocation.

- Usually healthy because they have the normal amount of genetic material.

If translocation breakpoint interrupts a gene, there may be an associated phenotype.

57

### Reciprocal Translocations 2

58

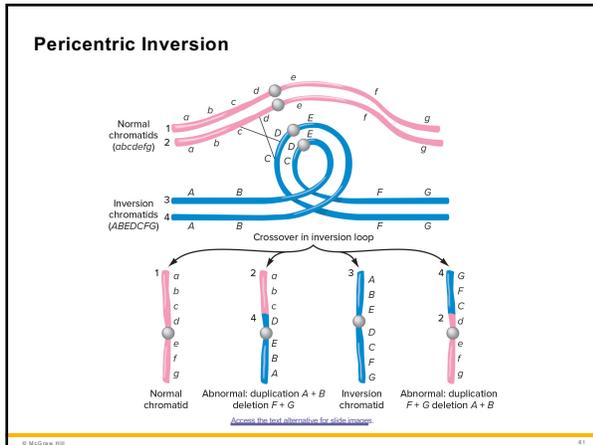
### Inversions

- Chromosome segment that is flipped in orientation
- 5 to 10% cause health problems probably due to disruption of genes at the breakpoints
- **Paracentric inversion**—Inverted region does not include centromere
- **Pericentric inversion**—Inverted region includes centromere
- Inversions with devastating effects can be traced to meiosis, when a crossover occurs between the inverted chromosome segment and the noninverted homolog.

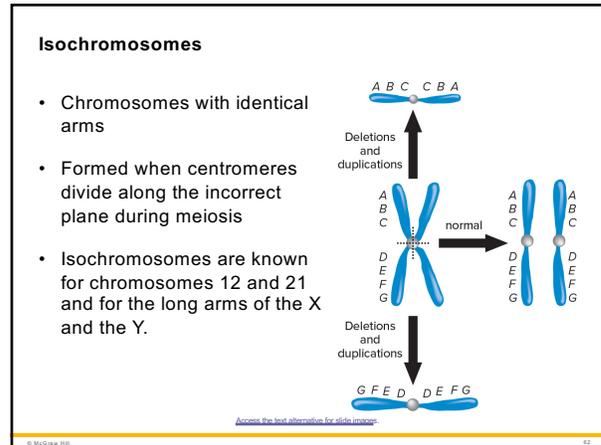
59

### Paracentric Inversion

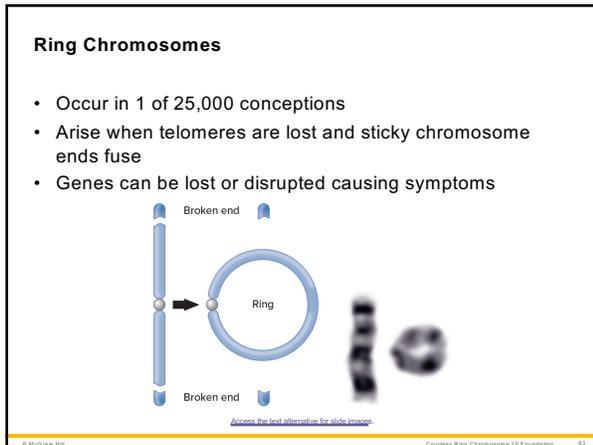
60



61



62



63

### Causes of Chromosome Aberrations

Abnormalities	Causes
<b>Numerical Abnormalities</b>	
Polyploidy	Multiple fertilization or diploid gamete leads to extra sets of chromosomes
Aneuploidy	Nondisjunction (in meiosis or mitosis) leads to lost or extra chromosomes when not all chromatid pairs separate in anaphase
<b>Structural Abnormalities</b>	
Deletions and duplications	Translocation Crossover between a chromosome that has a pericentric inversion and its noninverted homolog
Translocation	Exchange between nonhomologous chromosomes at parts that are unstable due to symmetrical DNA sequences
Inversion	Breakage and reunion of fragment in same chromosome, but with wrong orientation
Dicentric and acentric chromatids	Crossover between a chromosome with a paracentric inversion and its noninverted homolog
Ring chromosome	A chromosome loses telomeres and the ends fuse, forming a circle
Chromothripsis	Up to three chromosomes spontaneously shatter

© McGraw Hill

64

### Uniparental Disomy (UPD)<sub>1</sub>

Inheritance of two chromosomes or chromosome parts from the same parent is called **uniparental disomy (UPD)**

Requires the simultaneous occurrence of two rare events

- Nondisjunction of the same chromosome in *both* sperm and egg
- Trisomy followed by chromosome loss

Many cases of UPD are probably never seen

© McGraw Hill

65

### Uniparental Disomy (UPD)<sub>2</sub>

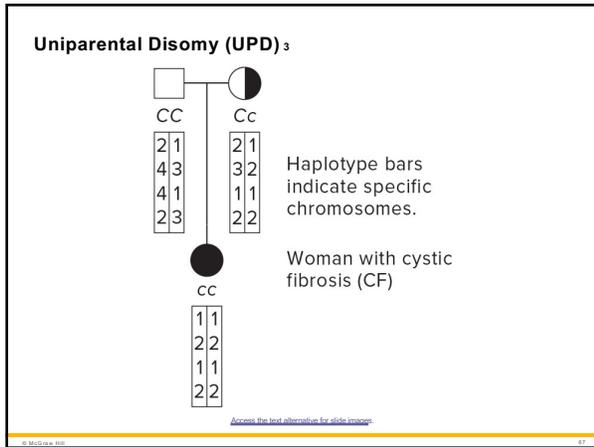
Uniparental disomy causes symptoms if it creates a homozygous recessive state associated with an illness, or if it affects an imprinted gene.

Examples:

- A woman with cystic fibrosis inherited two copies of her mother's chromosome 7 (bearing the mutant *CFTR* allele) and neither of her father's.
- Some children with Prader-Willi syndrome have inherited two chromosome 15 from their mothers.
- Some children with Angelman syndrome have inherited two chromosome 15 from their fathers.

© McGraw Hill

66



67

Because learning changes everything.®

[www.mheducation.com](http://www.mheducation.com)

© 2011 McGraw Hill. All rights reserved. Authorized only for instructor use in the classroom. No reproduction or further distribution permitted without the prior written consent of McGraw Hill.

68