# **Examples of IncRNA and Epigenetics**

# DBE-T AND (EPI-)GENETIC DISEASE

#### THE ROLE OF THE IncRNA DBE-T IN FACIOSCAPULOHUMERAL MUSCULAR DYSTROPHY (FSHD)

#### FSHD: http://www.omim.org/entry/158900

Facioscapulohumeral muscular dystrophy (FSHD) is a genetic muscle disorder that starts in the second decade. Frequency 1:20000

Characterized byProgressive muscle weakness Initially: facial, scapular and humeral muscles Later: abdominal muscles and muscles of the lower limb and feet Asymmetric body

The long name comes from facies, the Latin word and medical term for face; scapula, the Latin word and anatomical term for shoulder blade; and humerus, the Latin word for upper arm and the anatomical term for the bone that goes from the shoulder to the elbow.

The term muscular dystrophy means progressive muscle degeneration, with increasing weakness and atrophy (loss of bulk) of muscles. In FSHD, weakness first and most seriously affects the face, shoulders and upper arms, but the disease usually also causes weakness in other muscles.

#### Genetic disease: variable amongst family members

Aberrant expression of genes in vicinity to subtelomeric D4Z4 repeats, including DUX4, ANT1, FRG1, FRG2 in FSHD patients are thought to mediate the syndrome (have a "toxic" effect) Muscles affected by wasting in FSHD patients





# **FSDH** impairs muscle cell function

Moreover, in patients affected with FSHD, it is quite common to observe the co-existence of affected and apparently healthy muscles. Myoblasts, which were obtained from muscle typically affected in FSHD, manifested an increased susceptibility to oxidative stress during proliferation. Myotubes obtained from patient/healthy myblasts show abnormal morpholgy and muscle marker expression



anti-troponinT immunostaining of myotubes obtained by differentiating myblasts cells isolated from healthy or FSHD patients

control





#### The genetics if FSDH

#### FSDH is linked with aberrant D4Z4 repeat numbers at subtelomeric repeats of Chr4q

D4Z4: 3,3kb, repeats oriented head-to-tail, 11-100 repeat in healthy individuals - polymorphic Located on Chr4q  $\rightarrow$  disease relevant Located on Chr10q  $\rightarrow$  not disease relevant (99% identical to Chr4q D4Z4 repeats)



Facioscapulohumeral muscular dystrophy-1 (FSHD1) is associated with contraction of the D4Z4 macrosatellite repeat in the subtelomeric region of **chromosome 4q35**.





![](_page_5_Figure_2.jpeg)

Repeat aberrations can be detected by

Pulsed-field gelelectrophoresis (PFGE) analysis of kindred 25 affected with FSHD using probe **p13E-11**. a, We digested DNA with EcoRI and HindIII (E) and with EcoRI and BlnI (B), separated fragments by PFGE and hybridized them with p13E-11 (left panel). Ade novo fragment of 21 kb is visible for individual III-1 (arrow).

![](_page_6_Figure_0.jpeg)

DUX4 gene in D4Z4 repeats must be linked with disease, AATAAA stabilizes most distal DUX4 mRNA

![](_page_7_Figure_1.jpeg)

Observation: repeat restriction leads to upregulation of ANT1, FRG1, and FRG2 genes → Epigenetic effect?

MISS-EXPRESSION OF DUX4 and ANT1, ANT2 and FRG2 causes "cell wasting" of muscles

#### NORMAL SITUATION 11-100 DZ4Z repeat units

![](_page_8_Figure_2.jpeg)

DZ4Z repeats contain
methylated CpG island; repeat
retraction leads to
variable/reduced DNA
methylation
DZ4Z repeats show
H3K9me3; repeat retraction
leads to variable/reduced
H3K9me3
Also observed:
H3K27me3/Polycomb

![](_page_9_Figure_1.jpeg)

Normal situation

H3K27me3 H3K9me3-HP1

**Reduced D4Z4 repeats** - No polymorphism in pLAM box - No poly-A site for most distal DUX4 ORF - RNA degradation

**Reduced D4Z4 repeats** 

pLAM

Transcription

ΑΤΤΑΑΑ

Translation O<sub>DUX4 protein</sub>

ممممم

- TEL

- polymorphism in pLAM box
- poly-A site for most distal DUX4 ORF
  - **RNA** stable
  - **DUX4** expression

![](_page_10_Figure_1.jpeg)

![](_page_10_Figure_2.jpeg)

DUX4 expression: → DUX4 is a TF that contains homeobox domains (HD1, HD2)

- $\rightarrow$  Interferes with muscle differentiation
- → Impairs muscle for muscle regeneration
- $\rightarrow$  wasting

DUX4 is expressed in facioscapulohumeral muscular dystrophy (FSHD) myoblasts and in consecutive nuclei in FSHD myotubes. Co-immunofluorescence with MAb 9A12 = DUX4 (green) and a rabbit serum directed against desmin = muscle marker (red) on FSHD (dFSHD12) and control (CTL10) primary myotubes, 5 days after the induction of differentiation. a, b and c correspond to enlarged fields from the left boxes. Arrows indicate the most stained nuclei and the dotted arrows the intensity gradient of the DUX4 staining (D: merge panel). DAPI (blue) was used to visualize nuclei.

# The transcriptional cascade caused by DUX4 in FSDH

![](_page_11_Figure_1.jpeg)

A transcription dysregulation cascade in FSHD. The DUX4 gene mapped in the D4Z4 repeated element at 4q35 is activated either by the pathogenic deletion that contracts the repeat array, or by another uncharacterized mutation that leads to chromatin opening of normal sized repeat arrays. The chromatin changes allow transcription of the DUX4 gene. On permissive alleles that carry the poly-A signal in the pLAM region this results in a stable mRNA that can be translated. The expressed DUX4 protein is a transcription factor that may directly or indirectly interact with a set of target genes. Among those, DUX4 expression results in the inhibition of the MyoD gene which encodes the transcription master switch of muscle differenti-ation thus **causing inhibition of the MyoD target genes in FSHD**. DUX4 over-expression also **inhibits the expression of genes involved in response to oxidative stress**, and probably inducing the lcrystallin (CRYM) gene whose promoter carries a DUX4 binding site. A direct DUX4 target gene is PITX1 at 5q31 which encodes a transcription factor that is the **master switch for hindlimb** development in embryogenesis. PITX1 is specifically induced in FSHD muscles as compared to 11 neuromuscular disorders; it induces E3 ubiquitin ligase which is linked to atrophy in adult skeletal muscles and is involved in inflammation. Among the PITX1 target genes is TP53 which has major roles in the control of DNA repair, cell cycling and apoptosis as well as in multiple levels of cell metabolism and muscle atrophy.

# **FSDH** impairs muscle cell function

Moreover, in patients affected with FSHD, it is quite common to observe the co-existence of affected and apparently healthy muscles. Myoblasts, which were obtained from muscle typically affected in FSHD, manifested an increased susceptibility to oxidative stress during proliferation. Myotubes obtained from patient/healthy myblasts show abnormal morpholgy and muscle marker expression

![](_page_12_Figure_2.jpeg)

anti-troponinT immunostaining of myotubes obtained by differentiatin myblasts cells isolated from healthy or FSHD patients

![](_page_12_Figure_4.jpeg)

![](_page_12_Figure_5.jpeg)

control

healthy

# A Long ncRNA Links Copy Number Variation to a Polycomb/Trithorax Epigenetic Switch in FSHD Muscular Dystrophy

Daphne S. Cabianca,<sup>1</sup> Valentina Casa,<sup>1,2</sup> Beatrice Bodega,<sup>3,5</sup> Alexandros Xynos,<sup>1</sup> Enrico Ginelli,<sup>3</sup> Yujiro Tanaka,<sup>4</sup> and Davide Gabellini<sup>1,\*</sup>

<sup>1</sup>Dulbecco Telethon Institute at San Raffaele Scientific Institute, Division of Regenerative Medicine, Stem Cells, and Gene Therapy, 20132 Milan, Italy

<sup>2</sup>Università Vita-Salute San Raffaele, 20132 Milan, Italy

<sup>3</sup>Department of Biology and Genetics for Medical Sciences, University of Milan, 20133 Milan, Italy

<sup>4</sup>Genome Structure and Regulation, School of Biomedical Science and Biochemical Genetics, Medical Research Institute, Tokyo Medical and Dental University, Tokyo 113-8510, Japan

<sup>5</sup>Present address: Dulbecco Telethon Institute at Fondazione Santa Lucia, 00143 Rome, Italy

\*Correspondence: gabellini.davide@hsr.it

DOI 10.1016/j.cell.2012.03.035

Cell 149, 819-831, May 11, 2012 ©2012 Elsevier Inc. 819

# D4Z4 repeats in Chr. 4q subtelomeres give rise to various transcripts

![](_page_14_Figure_1.jpeg)

A schematic of D4Z4 locus on chromosome 4: The D4Z4 locus is in the sub-telomeric region of 4q. The figure shows a three repeat D4Z4 array. CEN indicates the centromeric end and TEL indicates the telomeric end. The DUX4 gene is shown as a gray rectangle with exon 1 and exon 2 in each repeat and exon 3 in the pLAM region telomeric to the last partial repeat (numbered 1, 2, and 3). PAS indicates the polyadenylation site on the permissive 4qA allele that is not present on the non-permissive 4qB allele or on chromosome 10. The arrowed lines represent: <u>Blue, DBE-T</u> transcripts (2.4, 4.4, and 9.8 kb) found in FSHD cells and reported to de-repress DUX4 expression; Black and red, transcripts in the sense and antisense direction were detected in both FSHD and control cells and might originate from the mapped sense promoters (black) and anti-sense promoters (red) with dashed lines indicating areas that might be degraded or produce si-like small RNAs. NDE, non-deleted element identified as the transcription start site for the DBE-T transcripts.

HETEROCHROMATIN AT D4Z4 REPEATS SILENCES LOCAL GENE EXPRESSION

![](_page_15_Figure_1.jpeg)

Formation of a loop structure that supports silencing of DUX4, ANT1, FRG1, FRG2

#### **IS SILENCING IMPAIRED IN FSDH PATIENTS??**

![](_page_16_Figure_1.jpeg)

# **IS SILENCING IMPAIRED IN FSDH PATIENTS??**

#### CHEMICALLY CROSSLINKED CHROMATIN ISOLATED FROM

- a. Patient primary muscle cells
- b. Normal primary muscle cells

![](_page_17_Figure_4.jpeg)

Precipitate-Ab-Chromatin complex with beads that bind heavy chain of antibody

Make PCR with primers that amplify specific regions in D4Z4 repeats

![](_page_17_Figure_7.jpeg)

![](_page_18_Figure_1.jpeg)

# D4Z4 repeats in Chr. 4q subtelomeres give rise to various transcripts

![](_page_19_Figure_1.jpeg)

A schematic of D4Z4 locus on chromosome 4: The D4Z4 locus is in the sub-telomeric region of 4q. The figure shows a three repeat D4Z4 array. CEN indicates the centromeric end and TEL indicates the telomeric end. The DUX4 gene is shown as a gray rectangle with exon 1 and exon 2 in each repeat and exon 3 in the pLAM region telomeric to the last partial repeat (numbered 1, 2, and 3). PAS indicates the polyadenylation site on the permissive 4qA allele that is not present on the non-permissive 4qB allele or on chromosome 10. The arrowed lines represent: <u>Blue, DBE-T</u> transcripts (2.4, 4.4, and 9.8 kb) found in FSHD cells and reported to de-repress DUX4 expression; Black and red, transcripts in the sense and antisense direction were detected in both FSHD and control cells and might originate from the mapped sense promoters (black) and anti-sense promoters (red) with dashed lines indicating areas that might be degraded or produce si-like small RNAs. NDE, non-deleted element identified as the transcription start site for the DBE-T transcripts.

# LOSS OF PRC2 FUCNTION INCREASES ANT1, FRG1, FRG2 and DUX4 EXPRESSION

![](_page_20_Figure_1.jpeg)

![](_page_20_Figure_2.jpeg)

![](_page_20_Figure_3.jpeg)

# LOSS OF PRC2 FUCNTION CAUSES AN UPREGUALTION OF A NOVEL IncRNA – DBE-T

![](_page_21_Figure_1.jpeg)

### **DBE-T IncRNA COLOCALIZES TO D4Z4 REPEATS**

![](_page_22_Figure_1.jpeg)

![](_page_22_Figure_2.jpeg)

Human D4Z4 repeats inserted into hamster cell line

#### THE HMTase Ash1L localizes to DZ4Z REPEATS

![](_page_23_Figure_1.jpeg)

# DBE-T INTERACTS WITH Ash1L

![](_page_24_Figure_1.jpeg)

### DBE-T BRINGS Ash1L TO D4Z4 REPEATS

![](_page_25_Figure_1.jpeg)

![](_page_25_Figure_2.jpeg)

# A lincRNA IS USED TO TRANSMIT D4Z4 REPEAT NUMBER INTO A DISEAS RELEVANT MECHANISM

![](_page_26_Figure_1.jpeg)

![](_page_26_Figure_2.jpeg)

Transcription

HD1 HD2

- TEL