

Mobile Elements in the Human Genome: Implications for Disease

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Mobile Elements in the Human Genome: Implications for Disease 1

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3

4 Abstract

5 Transposable elements (TEs) are mobile DNA sequences that represent a great portion of the 6 human genome. TEs are divided into retrotransposons, the more abundant, and DNA 7 transposon, which differ by their structure and transposition mechanisms. The major LINE-1 8 and Alu elements represent about one third of the human genome and are responsible for 9 several chromosomal rearrangements, gene deletion, insertional mutagenesis as well as RNA 10 splicing alteration and epigenetic regulation. DNA transposons and human endogenous retroviruses are also a source of genetic alterations. Consequently, TE insertion and mobility 11 12 lead to human diseases including (but not limited to) cancer, hematologic disease, metabolic 13 disease, neurodegenerescence, neurologic and psychiatric diseases. The herein presented 14 examples of TE-related diseases aim to highlight the interest of increasing our knowledge of 15 TEs through extensive genomic approaches, which may lead to new potential diagnostic 16 markers of diseases.

- 17
- 18 Key words: Transposable elements, transposon, retrotransposon, human disease,

19 chromosome rearrangement, gene recombination, cancer, neurologic disease, metabolic

disease, genetic disease 20

21

22 **Key concepts**

- 23 Transposable element are numerous in the human genome and the most abundant Alu
- 24
- and LINE-1 retro-elements represent about one third of the human genome • Transposable elements are source of genomic rearrangements that may lead to 25
- several human diseases 26
- 27 Gene expression may be affected by transposable elements through the modification 28 of regulatory elements and epigenetic control

29 30 • Examples of human disease related to transposable element include (but are not limited to) cancer, hematologic, metabolic and neurologic diseases

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32 Introduction: Mobile elements in the human genome

33 Mobile elements or transposable elements (TEs) represent a substantial fraction of the 34 human genome, from 45% according to the most common data (Lander et al., 2001) and 35 even up to 66% according to further analysis (de Koning et al., 2011). The two major 36 characteristics of these DNA sequences are their mobility in a given genome and across 37 different genomes and their ability to increase in number in the genome, both leading to an 38 important role in genome plasticity and evolution. TEs are diverse in nature and two main 39 classes are identified on the basis of their mechanism of transposition: class-I (retro-) 40 elements, or retrotransposons, use a reverse transcriptase enzyme to copy an RNA transcript 41 into the host DNA, whereas class-II elements, or DNA transposons, mainly move through a 42 "cut and paste" mechanism involving the excision and reinsertion of the DNA sequence of 43 the element. In addition, a large number of repeated sequences are related to TEs but non-44 autonomous, i.e. dependent of the enzyme(s) encoded by a helper element, which is an 45 autonomous TE, in order to ensure their mobility and amplification in the genome. The short 46 interspersed nuclear elements (SINEs) are the leader class of such non-autonomous TEs that 47 have greatly invaded the human genome (de Koning et al., 2011). See also: DOI: 48 10.1002/9780470015902.a0001899.pub3; DOI: 10.1002/9780470015902.a0006126.pub3 49 By far the most successful type of TEs in the human genome is class-I elements, which is 50 subdivided into Long Terminal Repeats (LTR) and non-LTR elements. The latter are very 51 predominant and 76% of human TEs are non-LTR elements, which represent at least 33.6% 52 of the whole human genome (Lander et al., 2001) (Fig. 1). On its own, the long interspersed 53 element (LINE)-1 accounts for 38% of the human TEs and 16.9% of the entire genome (Fig. 54 1), followed by the non-autonomous SINEs, particularly the Alu repeats, which account for 55 24% of TEs and 10.6% of the genome (de Koning et al., 2011, Lander et al., 2001). Other 56 SINEs found in humans are MIR and MIR3 elements. The LTR-elements are less present in 57 the human genome and mainly represented by endogenous retroviruses (HERVs, including 58 HERV-I, HERV-K, HERV-L) that resemble retroviruses in both their structure and mobility

59 mechanism, but lacking a functional envelope gene. See also: <u>DOI</u>:
60 10.1002/9780470015902.a0026264; <u>DOI</u>: 10.1002/9780470015902.a0026711

Class-II elements, or DNA transposons, are present in small amounts in the human genome,
accounting for only 6% of TEs and 2.8% of the entire genome (Fig. 1). They mainly belong to
the TC-1/mariner superfamily (*i.e. mariner*, MER2-Tigger, Tc2), *hAT*superfamily (*i.e.* MER-1-*Charlie, Zaphod*), and some *PiggyBac*-like elements (Lander *et al.*, 2001). See also: <u>DOI</u>:
10.1002/9780470015902.a0026264; <u>DOI</u>: 10.1002/9780470015902.a0020996.pub2

66 Long been considered as junk DNA or parasite DNA, TEs are now accepted as an evolutionary 67 force that contributes to the genetic diversity of organisms. TE could be recruited on behalf 68 of the genome to become a new gene and such TE exaptation or domestication is a source of 69 genetic innovation, but the transposition activity may also contribute to human disorders 70 through chromosome rearrangements, insertional mutagenesis, deregulation of gene 71 expression, and epigenetic changes (Chénais, 2015). See also: <u>DOI</u>: 72 10.1002/9780470015902.a0026265; <u>DOI</u>: 10.1002/9780470015902.a0020996.pub2

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74 Mechanisms of TE's impact on human genome

75 Several mechanisms are involved to explain the impact of TE on the genome and gene 76 expression (Chénais, 2015). Genome rearrangements are favoured by the repetition of TE in 77 the genome and the abundance of LINE-1 and Alu repeats (i.e. about 17% and 11% of the 78 human genome, respectively) promotes ectopic recombination, leading to gene deletions, 79 duplications and chromosome translocations or inversions (Table 1). In addition, LINE-1 and 80 Alu elements are frequently observed within or near the breakage points of chromosomal 81 rearrangement and *LINE-1* alone account for 19% of the 2081 breakpoints junction analysed 82 in a dataset of 17 whole human genomes (Kidd et al., 2010). Although less present in the 83 human genome, DNA transposons may also be a source of chromosome rearrangement as 84 shown by a study conducted on ten types of hematolymphoid neoplasms (Rodic et al., 85 2013). This work showed that most translocations have no propensity to involve genomic 86 repeats, but 47% of the translocations at the TCF3 locus on chromosome 19 involve a MER20 87 DNA transposon al., 2013). (Rodic et See also: DOI: 10.1002/9780470015902.a0005493.pub2; DOI: 10.1002/9780470015902.a0020996.pub2 88

89 The second way in which TEs may impact the human genome and induce diseases is through 90 the modification of gene structure and regulatory regions (Table 2). This include the creation 91 of new polyadenylation sites (Table 3), new exons (also called "exonisation") and new 92 introns (or "intronisation") as well as alternative splicing modifications, e.g. exon skipping 93 and intron retention (Table 2, Fig. 2) (Chénais, 2015). The creation of a new exon causes a 94 frameshift or creates premature stop codons in about 79% of cases, resulting in non-95 functional sequences, which are often alternatively spliced. However, exonisation events 96 following LINE-1 or Alu insertion may lead to human diseases (Table 2) (reviewed in Chénais, 2015). Using the LTR of HERV as promoter/enhancer is also a way to modify gene expression. 97 98 This was observed, for example, in the case of the MID1 gene, associated with the X-linked 99 form of Opitz syndrome, which transcript is fused to HERV-E LTR acting as a tissue-specific 100 promoter/enhancer (Landry et al., 2002). See also: <u>DOI</u>: 101 10.1002/9780470015902.a0005493.pub2; <u>DOI</u>: 10.1002/9780470015902.a0020996.pub2; 102 DOI: 10.1002/9780470015902.a0022886; DOI: 10.1002/9780470015902.a0026711

103 The third way to modify the expression of the genome concerns the epigenetic mechanisms 104 induced or modified by TEs. A correlation between the activity of TEs and chromatin 105 regulation, mainly DNA methylation, has been observed and hypomethylation of DNA is a 106 cause of TEs activation (Ross et al., 2010). The relationship between pathological markers 107 and the methylation status of whole genome CpG islands and LINE-1 elements has been 108 particularly studied in the case of cancers (Chénais 2015). In addition, the repression of TEs 109 through RNA interference involved essentially endogenous small interfering RNA (endo-110 siRNA) in somatic cells and PIWI-interacting RNA (piRNA) in the germline (Saito & Siomi, 111 2010). Both endo-siRNA and piRNA are transcribed from TEs themselves and a priori do not 112 disturb the expression of protein-coding genes (Saito & Siomi, 2010). Cancer cells are known 113 to contain significantly lower quantities of micro-RNAs, but currently, in the absence of 114 endo-siRNA and piRNA expression pattern in pathologic cells, it is impossible to answer the 115 question of the putative impact of TE-related regulatory RNA on cancer or other diseases. 116 See also: DOI: 10.1002/9780470015902.a0023593; DOI: 10.1002/9780470015902.a0025688; 117 DOI: 10.1002/9780470015902.a0026316

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119 Involvement of TEs in human cancer

120 • Alu/LINE-1 insertion

121 Several examples of cancers have been reported in the literature as related to LINE or 122 SINE/Alu insertion (Table 1) (reviewed in Chénais, 2015). More recently an increased 123 insertional activity of *LINE-1* and an elevated level of *LINE-1* transcript were found in primary 124 tumour samples of breast invasive carcinoma, head and neck squamous cell carcinoma and 125 lung adenocarcinoma (Clayton et al., 2016). The insertion of the LINE-1 retroelement into 126 the human proto-oncogene c-MYC was reported as early as in 1988 in human breast 127 carcinoma cells (Morse et al., 1988). This study compared the structure of the c-MYC gene 128 from breast ductal adenocarcinoma and from normal breast tissue of the same patient and 129 revealed a tumour-specific rearrangement of one MYC locus and the amplification of the 130 other MYC locus. A non-MYC sequence with near complete homology to a LINE-1 sequence 131 was found within the second intron of the rearranged locus. In this case, the LINE-1 132 sequence functioned as a mobile genetic element to produce a somatic mutation (Morse et 133 al., 1988). Another example of a LINE-1 element somatic insertion was observed in the 134 tumor-suppressing gene APC (adenomatous polyposis coli) from several patients with a 135 colon cancer and also in association with desmoid tumors (reviewed in Chénais, 2015). The 136 BRCA1 and BRCA2 genes, which are associated with breast and ovarian cancer, are also the 137 sites of Alu insertions. For example, one of the first evidenced germline mutations was the 138 insertion of a transcriptionally active Alu element into exon 22 of BRCA2, which resulted in 139 alternative splicing that skipped exon 22 (reviewed in Chénais, 2015). Finally, Alu insertions 140 in the von Hippel-Lindau (VHL) gene cause large alteration at the origin of the von Hippel-141 Lindau disease, a familial autosomal-dominant syndrome, predisposing to the development 142 of benign and malignant tumors (Franke *et* al., 2009). See also: <u>DOI</u>: 10.1002/9780470015902.a0005493.pub2 143

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Alu recombination leading to deletion, duplication or translocation

As noted above *Alu* repeats account for 11% of the human genome (**Fig. 1**). These repeats are thought to induce non-allelic homologous recombination, or ectopic recombination, at the origin of several cancer diseases. Numerous deletion events have been reported at the *BRCA1* locus and in a lesser extent for the *BRCA2* gene, related to the unusually high density of *Alu* repeats (**Table 1**). The insertion of *Alu* elements in the *VHL* gene is also involved in *Alu*mediated deletions associated with cancer (Franke *et al.*, 2009). Large deletions in the 152 cadherin-1 (CDH1) gene occur in 4% of hereditary diffuse gastric cancer families (Oliveira et 153 al., 2009). These deletions involve mainly non-allelic homologous recombination in Alu 154 repeat sequences, as supported by the statistically significant over-representation of Alu 155 elements around breakpoints (Oliveira et al., 2009). Homologous recombination between 156 Alu sequences and subsequent deletion have been detected at high frequency within the 157 caspase-activated DNase (CAD) gene in 13 out of the 20 human hepatoma tissues and in 158 eight of the para-cancerous cirrhotic livers (Hsieh et al., 2005) (Table 1). The recombination 159 caused exon-3 deletion, which in turn led to exon-3 skipping or replacement with a partial 160 Alu sequence, and consequential C-terminal truncation of the CAD protein (Hsieh et al., 161 2005). These data highlight the role of *Alu* repeats in mediating genome instability in human 162 cancers. See also: <u>DOI</u>: 10.1002/9780470015902.a0005493.pub2

163 Homologous recombination between Alu elements results sometimes in gene duplication as 164 reported for the BRCA1 gene, the MLL-1 (myeloid/lymphoid or mixed-lineage leukemia) gene 165 involved in acute myeloid leukemia, and the MYB proto-oncogene the duplication of which 166 leads to T-cell acute lymphoblastic leukemia (reviewed in Chénais, 2015). Duplication of the 167 MYB locus, which encodes an essential transcription factor, is frequent in human cancers. 168 The human MYB locus is flanked by Alu repeats that are responsible for its duplication 169 through somatic homologous recombination between the flanking Alu elements on sister 170 chromatids as observed in T cell acute lymphoblastic leukemia (O'Neil et al., 2007).

The recombination between *Alu* repeats is also involved in the generation of the Philadelphia chromosome (*i.e.* translocation between chromosomes 9q34 and 22q11) leading to *BCR/ABL* gene fusion in chronic myeloid leukemia (Jeffs *et al.*, 1998). Finally, the translocation between chromosomes 5q23-31 and 18q12, which involves the *TRE-2* oncogene (TRE-USP6, ubiquitin-specific protease-6), is due to recombination between *Alu* elements and play an important role in Ewing sarcoma development (Onno *et al.*, 1992).

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• TE-related epigenetic regulation and cancer

The relation between *LINE-1* activation and the methylation status of DNA has been particularly investigated in the case of cancers. Indeed the frequent hypomethylation of chromatin in tumour cells is regarded as a facilitator of TE mobility, and especially concerning *LINE-1* (Ross *et al.*, 2010). Whole genome studies revealed the preferential *LINE-1* insertion in hypomethylated DNA regions of cancer cells of different origins (Ferreira *et al.*, 184 2014, Tubio et al., 2014). Besides, several studies highlighted the hypomethylation of the LINE-1 element itself in several types of cancers (Chénais 2015) and the transcriptome 185 186 analysis of chronic lymphocytic leukaemia showed that TEs are globally derepressed 187 (Ferreira et al., 2014). However Lee et al. have shown that LINE-1 and Alu insertions 188 occurred preferentially in epithelial cancer but not in blood and brain cancer (Lee et al., 189 2012). In this study the authors identified almost two hundred somatic insertions of LINE-1 190 (94.5%), Alu (5.0%) and HERV (0.5%) in 43 high-coverage whole genome sequencing datasets 191 from five cancer types (i.e. colorectal, glioblastoma, multiple myeloma, ovarian and prostate 192 cancer) (Lee et al., 2012). Finally, in the case of melanoma, the LINE-1 hypomethylation is 193 accompanied by the shortened relapse-free survival of patients, and a global under-194 methylation of DNA impacts the metastatic formation of primary melanomas (Ecsedi et al., 195 2013).

Epigenetic modification of TE's regulatory sequences can impact the expression of neighbouring genes. When comparing the histone enrichment, TE neighbourhood and expression divergence of human genes between normal and cancer cells, a correlation was observed between the presence of TEs near genes and greater changes in histone enrichment (Grégoire *et al.*, 2016).

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202 TEs in hematologic, metabolic and/or genetic diseases

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• Alu-mediated deletion causing human diseases

204 In addition to cancer, several human diseases can be attributed to Alu-mediated 205 rearrangements (**Table 1**). Deletions involving *Alu* repeats account for numerous mutations 206 in several other genes, among which the apolipoprotein B (APOB) gene, the LDL receptor 207 (*LDLR*) gene, and the α -globin and β -globin gene clusters. In a patient with homozygous 208 hypobetalipoproteinemia, the deletion of exon 21 of APOB is the consequence of a crossover 209 event between the Alu sequences in introns 20 and 21 resulting in nonreciprocal exchange 210 between two chromosomes (Huang et al., 1989). The LDLR gene is also a place of large deletions (or duplications) through homologous recombination between Alu repetitive 211 212 elements, which are numerous within almost all introns and in the 3'-UTR (reviewed in 213 (Hobbs et al., 1992). For example, the analysis of autosomal dominant hypercholesterolemia 214 in two Tunisian families showed the presence of a large deletion in the LDLR gene due to intrachromatid non-allelic homologous recombination between two homologous *Alu*sequences located apart from splice sites in intronic sequences (Jelassi *et al.*, 2012).

217 The reported TE-mediated rearrangements in the β -globin gene cluster include γ -, δ - and β -218 globin genes (Harteveld et al., 1997, Yu et al., 2014). For example, in an individual with 219 hereditary persistence of foetal haemoglobin, the β-globin cluster displays a large deletion of 220 48.5 kb downstream of the β -globin gene and the 5' deletion breakpoint occurs in an Alu 221 element 3' to the Ay-globin gene. However, in this particular case, the recombination 222 mechanism involve non-homologous recombination since the 3' breakpoint was located 223 within a region that contains various repeats including a portion of a *LINE-1* repeat, a perfect 224 160-bp palindrome, and a set of 41-bp direct repeats also present elsewhere in the human 225 genome (Henthorn et al., 1986).

226 Concerning the α -globin gene cluster, recombination events are numerous and globally lead 227 to diverse forms of thalassemia. Following are a few examples of Alu- and/or LINE-1-228 mediated recombination that lead to α -thalassemia, an inherited hemoglobin disorder 229 characterized by a microcytic hypochromic anaemia caused by a quantitative reduction of 230 the α -globin chain. In a Chinese family with α -thalassemia patients, a 28.5 kb deletion 231 involving Alu repeats has been described that eliminated one of the duplicated α -globin genes (Yu *et al.*, 2014). A 33-kb α^0 -thalassaemia deletion encompassing the α - and ζ -globin 232 genes and pseudogenes has been observed in a Dutch family and this deletion appears 233 234 similar to a previously described one (Harteveld et al., 1997). The molecular analysis of deletion breakpoints indicate that the mechanism leading to these α^0 -thalassaemia deletions 235 236 involves misalignment between the highly homologous Alu tandem repeats at both parental 237 sides, which are normally 33 kb apart. Moreover, comparison of breakpoint positions along 238 the Alu consensus sequence indicate the involvement of a 26-bp core sequence in two out of five α^{0} -thalassaemia deletions, suggesting that this sequence is a possible hotspot of 239 240 recombination (Harteveld et al., 1997). This suggests that Alu repeats could stimulate 241 recombination events not only by homologous pairing, but also by providing binding sites for 242 recombinogenic proteins (Harteveld *et al.*, 1997). Finally a 8.2 kb deletion in the α -globin 243 gene cluster was found in a Dutch family. This deletion involves both α -globin genes in *cis* 244 and is caused by a non-homologous recombination event between an Alu and a LINE-1 245 element (Phylipsen et al., 2010). See also: DOI: 10.1002/9780470015902.a0005493.pub2

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• Alu- and LINE-1-mediated exonisation

248 The creation of a new exon, so called exonisation (Fig. 2A, Table 2), is involved in the 249 ornithine delta-aminotransferase (OAT) deficiency, which causes the gyrate atrophy of the 250 choroid and retina, a progressive loss of vision. In this case, a G-to-C mutation in an Alu 251 element present in the intron 3 of the OAT gene results in the creation of a new donor splice 252 site and potentially to a new exon (Mitchell et al., 1991). This Alu insertion also causes 253 premature termination, which again results in OAT deficiency (Mitchell et al., 1991). The Alu-254 mediated exonisation in the gene of the collagen type IV alpha-3 chain (COL4A3) may be at 255 the origin of the Alport syndrome, a nephropathy (glomerulonephritis) due to a collagen IV defect (Knebelmann et al., 1995). In the same way, Alu-mediated exonisation has been 256 257 reported in the glucuronidase beta (GUSB) gene that causes the Sly syndrome or type VII 258 mucopolysaccharidosis (Vervoort et al., 1998). The LINE-1 element is also a potential source 259 of exonisation as observed for the X-linked CYBB gene, encoding the beta chain of 260 cytochrome B245 and involved in at least one case of chronic granulomatous disease 261 (Meischl et al., 2000). The LINE-1 insertion into intron 5 of the CYBB gene cause internal 262 rearrangements and new splice sites that result in a highly heterogeneous splicing pattern 263 with introduction of two LINE-1 fragments as new exons into the transcripts and 264 concomitant skipping of exonic coding sequence (Meischl et al., 2000).

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• Alu- and LINE-1 mediated alternative splicing and intron retention

267 Alternative splicing is often affected by TE insertion (Table 2). For example, insertion of the 268 non-autonomous SINE Alu element into an intron of the human Factor VIII (F8) gene results 269 in exon skipping (Fig. 2B) and consequent onset of haemophilia A (Ganguly et al., 2003). 270 Another example is the insertion of an Alu element within the exon 9, or just upstream of 271 the start of exon 9, of the fibroblast growth factor receptor-2 (FGFR2) gene, which was 272 reported as a cause of Apert syndrome (Oldridge et al., 1999). The latter mutation affects 273 the utilisation of the 3' splice site leading to the generation of different, and non-functional, 274 splice forms of *FGFR2* transcripts (Oldridge *et al.*, 1999).

The dystrophin (*DMD*) gene is a giant gene, sizing about 2.5 Mb of the X chromosome with more than 60 exons, where numerous TEs have inserted to create deletions or exon skipping. For example the insertion of *LINE-1* induces skipping of exon 44, causing Duchenne muscular dystrophy (Narita *et al.*, 1993). Insertion of an *Alu*-like sequence downstream of 279 intron 11 was observed in individuals with X-linked dilated cardiomyopathy (Ferlini et al., 280 1998). The insertion induces a rearrangement that activates a cryptic splice site in intron 11 281 and produces an alternative transcript containing the Alu-like sequence and part of the 282 adjacent intron 11, spliced between exons 11 and 12, but not translated due to the presence 283 of numerous stop codons (Ferlini *et al.*, 1998). The *LINE-1* element is responsible for a large 284 deletion in the X-linked pyruvate dehydrogenase E1 (PDHX) gene, but the LINE-1 insertion 285 may also lead, at last in one patient, to an aberrantly spliced isoform resulting from the use 286 of two cryptic splice sites (Mine *et al.*, 2007).

Finally, intron retention (**Fig. 2C**) may happen when an error occurs in normal splicing leading to retention of a transcript-confirmed intron within a transcript-confirmed exon and thus in the mature mRNA. Such events may be affected by TEs, as demonstrated in the case of *LINE-1* insertion in the *CYBB* gene that causes chronic granulomatous disease (Meischl *et al.*, 2000).

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Alu and LINE-1 derived new polyadenylation sites

294 LINE-1 elements include a polyadenylation signal within their own sequence, and the 295 polyadenylation signal (i.e. AATAAA sequence) is frequently created in the A-rich tails of 296 both SINEs and LINEs. Therefore human retroelements, such as LINE-1 and Alu, may 297 introduce intragenic polyadenylation signals creating new mRNA isoforms. Several diseases 298 have been linked to the introduction of a new polyadenylation site through LINE-1 or Alu 299 element insertion in human genes, such as haemophilia A and B, X-linked dilated 300 cardiomyopathy, autoimmune lymphoproliferative syndrome, hypo-calciuric hypercalcemia 301 and neonatal severe hyperparathyroidism as reviewed in Chénais (2015) (Table 3).

Besides, the LTR sequence of HERV is also a source of new polyadenylation signal as observed with *HERV-K* in the breast cancer cell line T47D (Baust *et al.*, 2000) and with *HERV-H* in the *HHLA2* and *HHLA3* genes (Mager *et al.*, 1999); but no obvious relation with a pathology was described to date.

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307

LINE-1 and chromatin regulation

308 As described above for cancer, the chromatin structure and/or epigenetic regulation 309 associated with TE insertion may lead to non-cancer human diseases but examples are rare 310 to date. The β -globin_{L1} allele results from the insertion of a full length *LINE-1* element in the 311 intron 2 of the β -globin gene. The decreased rate of transcription of this β -globin_{L1} allele is 312 due to the hypermethylated profile of its promoter and enhancer sequences, which results 313 in a transcriptional down-regulation and thus the β^+ -thalassemia phenotype (Lanikova *et al.*, 314 2013).

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316 TE involvement in neurological diseases

As for cancer, metabolic and hematologic diseases, TE insertion may be the cause of neurological diseases or syndromes. The insertion of a *LINE-1* element in the ribosomal S6 kinase 2 (*RSK2*) gene was reported in a patient with Coffin-Lowry syndrome, a disease characterised by psychomotor and growth retardation, facial dysmorphy and squeletic abnormalities. This *LINE-1* insertion at position -8 of intron 3 leads to a skipping of exon 4 and then to a reading-frame shift and the appearance of a premature stop codon (**Table 2**) (Martinez-Garay *et al.*, 2003).

324 The Fabry disease, characterized by a neurodegenerescence of the central nervous system, is 325 an X-linked recessive disorder of glycosphingolipid catabolism, which results from the 326 deficient activity of the lysosomal hydrolase α -galactosidase A encoded by an Alu-rich gene, 327 that displays 12 Alu elements within its 12 kb sequence (Kornreich et al., 1990). Several 328 mutations and gene rearrangements have been described to be at the origin of the disease 329 (Table 1), among which only one deletion was originally identified as an Alu-Alu 330 recombination, and ten other as Alu-Alu rearangements (Kornreich et al., 1990). Thereafter, 331 a large 3.1 kb deletion due to Alu-Alu recombination and including the whole exon 2 was 332 identified among 50 new mutations at the origin of Fabry disease (Shabbeer et al., 2006).

The Sandhoff disease, a recessive lysosomal storage disease, is another example of TErelated neurodegenerative disease (**Table 1**). The deficience of β -hexosaminidase (HEXB) activity is due to deletion alleles of the *HEXB* gene in 27% of the examined dataset (Neote *et al.*, 1990). *HEXB* contains two *Alu* repeats that are involved in the deletion event, which removes about 16kb including the *HEXB* promoter, exons 1 to 5, and part of intron 5. The deletion also resulted in a reconstituted *Alu* sequence, the left half of which comes from the 5' *Alu* sequence and the right half of which from the 3' *Alu* sequence (Neote *et al.*, 1990). Neurofibromatosis type I is a common genetic disease linked to the *NF-1* tumor suppressor gene and characterized by changes in skin coloring and the growth of benign tumors along nerves (i.e. neurofibromas). The insertion of an *Alu* sequence in the intron of the *NF-1* gene leads to a deletion and reading frame shift in the downstream exon during splicing, which could be a cause of the disease (**Table 2**) (Wallace *et al.*, 1991). See also: <u>DOI</u>: 10.1002/9780470015902.a0005493.pub2

Elevated expression of TEs has been observed in several human neurodegenerative disorders including sporadic Creutzfeld-Jakob disease, age-related macular degeneration and amyotrophic lateral sclerosis (ALS). For example, the RNA-binding protein TDP-43, which is involved in ALS and frontotemporal lobar degeneration (FTLD), was shown to interact with many TE transcripts and moreover this association of TDP-43 with many of its TE targets is reduced in FTLD patients (Li *et al.*, 2012).

Finally, a link between TEs and psychiatric disorders was also highlighted (Guffanti *et al.*, 2014). Particularly, whole-genome sequencing revealed brain specific *LINE-1* insertion in patients localized preferentially to synapse- and schizophrenia-related genes, suggesting a causal role of *LINE-1* in the onset of the disease (Bundo *et al.*, 2014).

356

357 Conclusion

First considered as junk DNA, TEs are now considered as major actors of genome evolution and their role in genome plasticity is now obviously demonstrated. This involves several molecular mechanisms besides TEs insertion *per se*, including DNA recombination and chromosome rearrangements (especially deletion), modification of gene expression through the introduction or alteration of poly-A sites, splicing sites, exons or introns and regulatory elements, and finally the domestication of TEs leading to new functionalities.

The high abundance of TEs in the human genome, especially *Alu* and *LINE-1* repeats, make them responsible for the molecular origin of several diseases as presented above. Therefore increasing our knowledge of TEs through extensive genomic approaches may lead to new potential diagnostic markers of diseases and prenatal markers of genetic disorders. In this way the recent development of combined molecular and bioinformatics tools is of great interest, such as the work by Tang *et al.*, which have detected somatic *LINE-1* insertions in ovarian cancer (Tang *et al.*, 2017).

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507 Further readings

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- 533

534 Glossary

- 535 Ectopic recombination: aberrant form of DNA recombination between non-homologous loci,
- rather than along homologous loci. Such recombination is often driven by transposable
- element and results in dramatic chromosomal rearrangement, which is generally
- 538 deleterious.
- 539 Exonisation: recruiting of a new exon from non-protein-coding, such as intronic DNA540 sequences or transposable elements.
- 541 Exon skipping: splicing modification following the insertion of a transposable element that
- result in the skipping of one or more exon during mRNA maturation.
- 543 Intronisation: creation of new intron following the insertion of a transposable element
- 544 sequence.
- 545 Retrotransposon or retroelement: transposable element that needs to be retro-transcribed
- 546 from RNA before reinsertion in the genomic DNA. The structure of retrotransposons may
- 547 be more or less complex and could include, or not, long terminal repeat (LTR) sequences.
- 548 Transposon: in eukaryotes, sequence of repeated DNA that encodes the transposase enzyme
- 549 sufficient to assume the mobility of the transposable element.
- 550

Gene	Type of TE	Type of event	Disease or disorder
APC	LINE-1	insertion	Colon cancer, desmoid tumours
APOB	Alu	deletion	Hypo beta lipoproteinemia
BCR-ABL	Alu	translocation t(9;22)(q34;q11)	Chronic myeloid leukemia
BRCA1	Alu	insertion, deletion and duplication	Breast/ovarian cancer
BRCA2	Alu	insertion, duplication	Breast/ovarian cancer
CAD	Alu	deletion	Hepatoma
CDH1	Alu	deletion	Hereditary diffuse gastric cancer
EWSR1-ETV	Alu	translocation t(5q23q31)(18q12)	Ewing sarcoma
a-GALA	Alu	deletion	Fabry disease
HBB	Alu	deletion	Thalassemia
HEXB	Alu	deletion	Sandhoff disease
LDLR	Alu	deletion	Familial hyper-cholesterolemia
NF1	Alu	insertion	Neurofibroma
MLL1	Alu	duplication	Acute myeloid leukemia
МҮВ	Alu	duplication	T-cell lymphoblastic leukemia
МҮС	LINE-1	insertion	Breast carcinoma
TCF3	MER20	translocation	hematolymphoid neoplasm
VHL	Alu	deletion	Von Hippel Lindau disease

Table 1. Examples of human diseases linked to TE insertion, TE-mediated deletions or TE-mediated chromosomal rearrangements.

Gene	Type of TE	Type of event ^a	Disease or disorder
BRCA2	Alu	aberrant splicing	Breast cancer
COL4A3	Alu	exonisation	Alport syndrome
СҮВВ	LINE-1	exonisation,	Chronic granulomatous disease
		intron retention	
DMD	LINE-1	exon skipping	Duchenne Muscular Dystrophy
DMD	Alu	aberrant splicing	X-linked dilated cardiomyopathy
F8	Alu	exon skipping	Hemophilia A
FAS	Alu	exon skipping	Autoimmune lymphoproliferative
			syndrome
FGFR2	Alu	exon skipping,	Apert syndrome
		aberrant splicing	
FKTN	LINE-1	exon skipping	Fukuyama-type congenital muscular
			dystrophy
GUSB	Alu	exonisation	Sly syndrome
IDS	Alu	exon skipping	Hunter syndrome
MID1	HERV-E	new regulatory	Opitz syndrome
		region	
NF1	Alu	aberant splicing,	Neurofibromatosis type 1
		reading frame shift	
OAT	Alu	exonisation	ornithine delta-aminotransferase
			deficiency
OPA1	Alu	exon skipping	Autosomal dominant optic atrophy
PDHX	LINE-1	aberrant splicing	Pyruvate dehydrogenase complex
			deficiency
RP2	LINE-1	aberrant splicing,	X-linked retinitis pigmentosa
		reading frame shift	
RSK2	LINE-1	exon skipping	Coffin-Lowry syndrome

Table 2. Examples of TE-mediated alterations of mRNA splicing at the origin of humandiseases, including exonisation, exon skipping, intron retention and aberrant splicing.

Gene	Type of TE	Disease or disorder
APC	LINE-1	Colon cancer
CASR	Alu	Hypocalciuric hypercalcemia and neonatal severe hyper-parathyroidism
DMD	LINE-1	X-linked dilated cardiomyopathy
F9	Alu	Hemophilia B
F9	LINE-1	Hemophilia B
FAS	Alu	Autoimmune lympho-proliferative syndrome
HHLA2, 3	HERV-H	unkwown

Table 3. Examples of TE-mediated creation of new polyadenyation site involved in the onsetof human diseases.



Figure 1. Proportion of TEs in the human genome (Chénais, Current Cancer Drug Targets 2015). The percentage of each class or sub-class of TE is indicated with respect to the whole genome according to data from Lander et al. (2001).

A) Exonisation



→ New protein isoform or mRNA degradation



\rightarrow Aberrant protein or mRNA degradation

Figure 2. Simplified view of the main consequences of TE insertion on mRNA splicing. A) exonisation; B) exon skipping; C) intron retention. Red box figure the TE and colored boxes correspond to exons; introns are represented as black lines; dashed lines indicate the splicing events. (Chénais, Current Cancer Drug Targets 2015).