

Titin-truncating variants affect heart function in disease cohorts and the general population

Dr António de Marvão, PhD MBA MRCP
Specialist Registrar in Cardiology and in General (Internal) Medicine
MRC Chain-Florey Clinical Lecturer in Cardiology

MRC

London Institute
of Medical Sciences

- No conflicts of interest
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- Prevalence of DCM ~1:250
- Results in progressive cardiac failure, arrhythmia and sudden death. Most frequent indication for cardiac transplantation
- Titin-truncating variants (TTNtv) account for about 25% of cases of end-stage dilated cardiomyopathy
- TTNtv occur in ~15% of ambulant DCM but also in ~2% of the population
?effects position dependent



ORIGINAL ARTICLE

Truncations of Titin Causing Dilated Cardiomyopathy

Daniel S. Herman, Ph.D., Lien Lam, Ph.D., Matthew R.G. Taylor, M.D., Ph.D., Libin Wang, M.D., Ph.D., Polakitt Teekakirikul, M.D., Danos Christodoulou, B.S., Lauren Conner, B.S., Steven R. DePalma, Ph.D., Barbara McDonough, R.N., Elizabeth Sparks, R.N.P., Debbie Lin Teodorescu, M.A., Allison L. Cirino, C.G.C., Nicholas R. Banner, F.R.C.P., Dudley J. Pennell, M.D., Sharon Graw, Ph.D., Marco Merlo, M.D., Andrea Di Lenarda, M.D., Gianfranco Sinagra, M.D., J. Martijn Bos, M.D., Ph.D., Michael J. Ackerman, M.D., Ph.D., Richard N. Mitchell, M.D., Ph.D., Charles E. Murry, M.D., Ph.D., Neal K. Lakdawala, M.D., Carolyn Y. Ho, M.D., Paul J.R. Barton, Ph.D., Stuart A. Cook, M.D., Luisa Mestroni, M.D., J.G. Seidman, Ph.D., and Christine E. Seidman, M.D.
N Engl J Med 2012; 366:619-628 | February 16, 2012 | DOI: 10.1056/NEJMoa1110186

RESEARCH ARTICLE | GENETIC MEDICINE

Integrated allelic, transcriptional, and phenomic dissection of the cardiac effects of titin truncations in health and disease

Angharad M. Roberts^{1,2,*}, James S. Ware^{2,3,4,5,*}, Daniel S. Herman^{4,5,6,*}, Sebastian Schafer⁷, John Baksí², Alexander G. Bick^{4,5}, Rachel J. Buchan², Roddy Walsh², Shibu John², Samuel Wilkinson², Francesco Mazzarotto^{2,3}, Leanne E. Felkin^{2,3}, Sungsam Gong², Jacqueline A. L. MacArthur⁸, Fiona Cunningham⁸, Jason Flannick^{5,9}, Stacey B. Gabriel⁵, David M. Altshuler^{5,10}, Peter S. Macdonald^{11,12,13}, Matthias Heinig⁷, Anne M. Keogh^{11,12,13}, Christopher S. Hayward^{11,12,13}, Nicholas R. Banner^{3,14}, Dudley J. Pennell^{2,3}, Declan P. O'Regan¹, Tan Ru San¹⁵, Antonio de Marvao¹, Timothy J. W. Dawes¹, Ankur Gulati², Emma J. Birks^{3,16}, Magdi H. Yacoub³, Michael Radke¹⁷, Michael Gotthardt^{17,18}, James G. Wilson¹⁹, Christopher J. O'Donnell^{20,21}, Sanjay K. Prasad², Paul J. R. Barton^{2,3}, Diane Fatkin^{11,12,13}, Norbert Hubner^{7,18,22}, Jonathan G. Seidman⁴, Christine E. Seidman^{4,5,23,24,†,‡} and Stuart A. Cook^{1,3,15,25,†,‡}

+ Author Affiliations

*Corresponding author. E-mail: stuart.cook@nhcs.com.sg (S.A.C.); cseidman@genetics.med.harvard.edu (C.E.S.)

* These authors contributed equally to this work.

† These authors are co-senior authors.

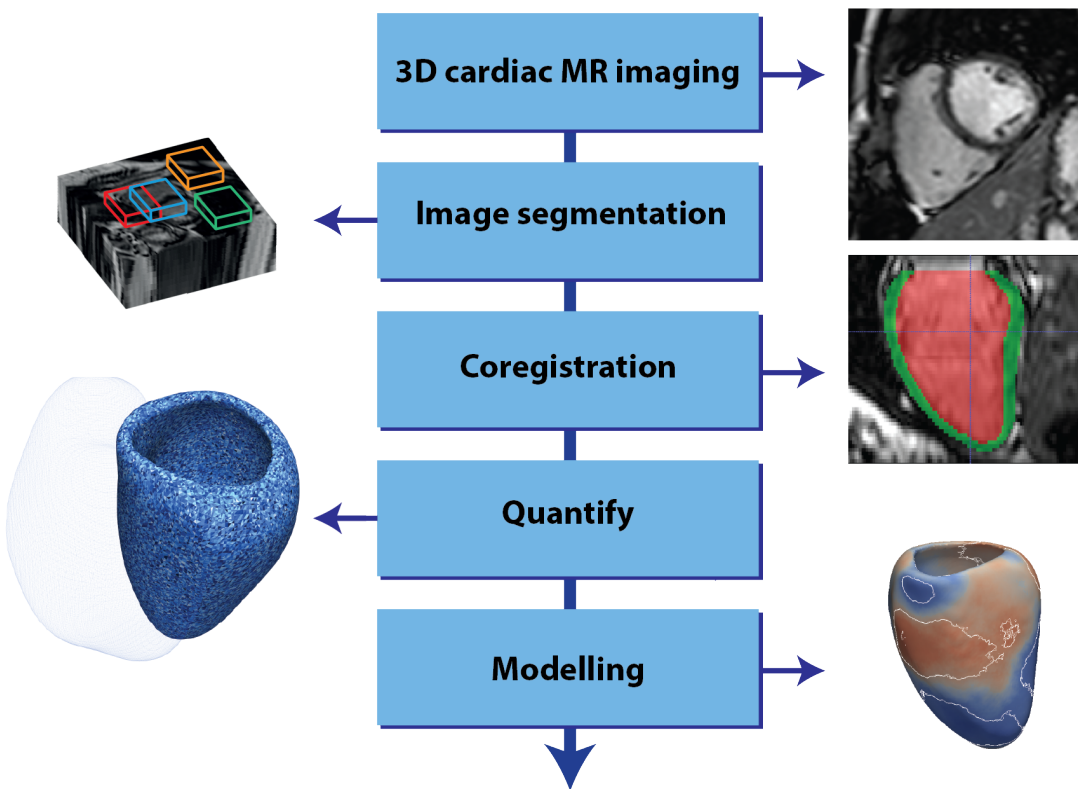
Science Translational Medicine 14 Jan 2015;
Vol. 7, Issue 270, pp. 270ra6
DOI: 10.1126/scitranslmed.3010134

Remaining questions:

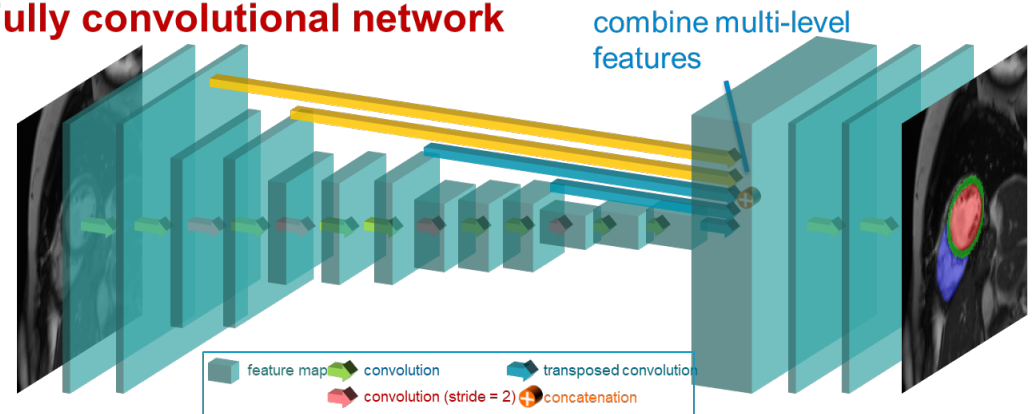
- Do proximal and distal truncations affect TTN RNA and protein in a similar or dissimilar way?
 - What are the molecular mechanisms underlying the cardiomyopathy?
 - Do all TTNtv have an effect on the heart that can be revealed using advanced imaging?
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1. meta-analysis of TTNtv in DCM patients (n = 2,495) and controls (n = 61,834)
 2. RNA-sequencing (RNA-seq) and ribosome profiling (Ribo-seq) + metabolic and signalling studies to outline potential disease mechanisms
 3. deep phenotyping of rats with TTNtv at opposite ends of the Ttn molecule
 4. deep phenotyping and genetic sequencing of healthy volunteers (n = 1,409)
-

CMR machine learning analysis



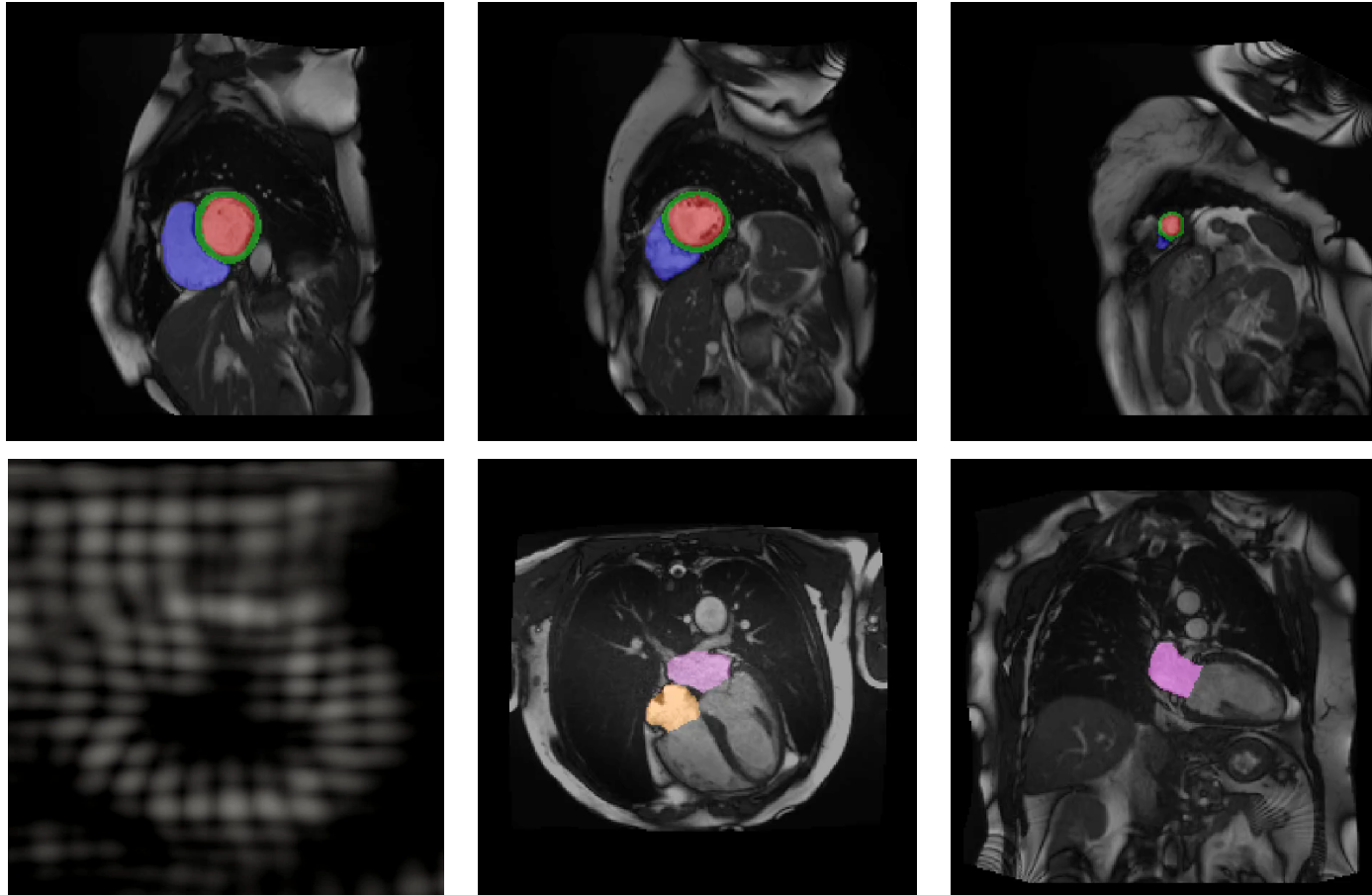
Fully convolutional network



Unpublished work with Jinming Duan and Wenjia Bai

- **de Marvao A, et al.** Population-based studies of myocardial hypertrophy: high resolution cardiovascular magnetic resonance atlases improve statistical power. *J Cardiovasc Magn Reson*. 2014.
- **de Marvao A, et al.** Precursors of Hypertensive Heart Phenotype Develop in Healthy Adults: A High-Resolution 3D MRI Study. *JACC Cardiovasc Imaging*. 2015.
- **Corden B*, de Marvao A*, et al.** Relationship between body composition and left ventricular geometry using three dimensional cardiovascular magnetic resonance. *J Cardiovasc Magn Reson*. 2016.

Deep learning analysis methods

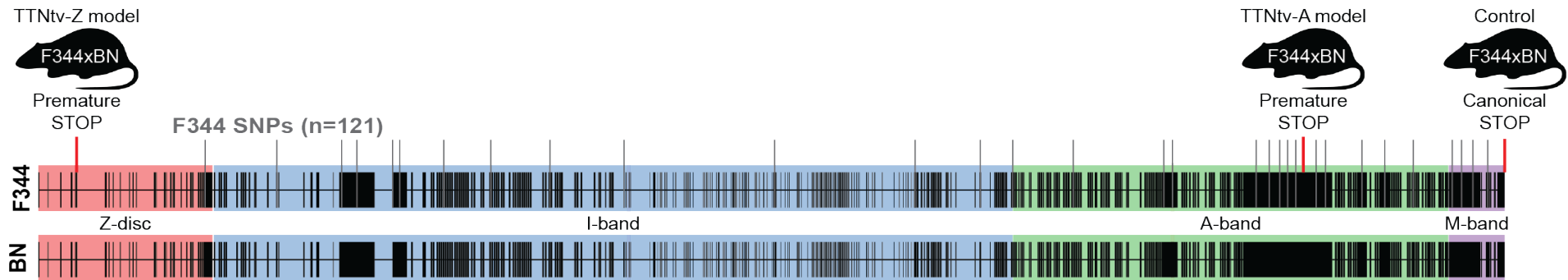


Bai W, et al. A bi-ventricular cardiac atlas built from 1000+ high resolution MR images of healthy subjects and an analysis of shape and motion. *Med Image Anal.* 2015;26:133-45.

TTNtv in constitutive exons throughout TTN are associated with DCM

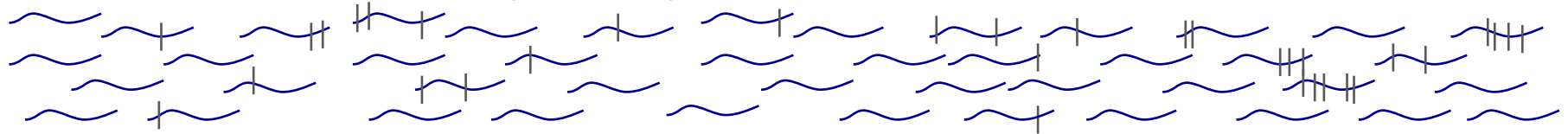
TTN sarcomere domain affected by variant	DCM (n=2,495)	Controls (n=61,834)	DCM prevalence (%)	Control prevalence (%)	Odds ratio	P value
A-band (constitutive)	268	149	10.74	0.24	49.8	2.4×10^{-260}
I-band (distal, constitutive, post-Cronos)	9	7	0.36	0.01	32	2.5×10^{-9}
I-band (distal, constitutive, pre-Cronos)	18	23	0.72	0.04	19.5	6.6×10^{-15}
I-band (non-constitutive)	6	102	0.24	0.17	1.5	0.46
I-band (proximal, constitutive)	22	29	0.88	0.05	19	1.1×10^{-17}
M-band (constitutive)	6	40	0.24	0.07	3.7	0.01
Z-disc (constitutive)	7	33	0.28	0.05	5.3	0.001
Z-disc (non-constitutive)	0	11	0	0.02	NA	NA

Transcriptional and translational profiles of TTNtv



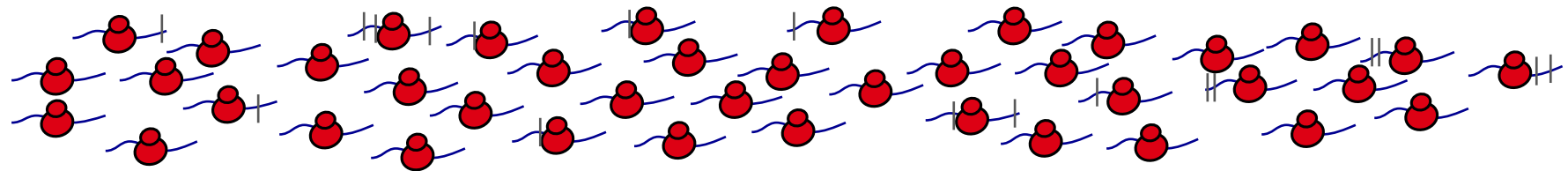
Transcriptional profile of TTNtvA & TTNtvZ

RNA-seq



Translational profile of TTNtvA & TTNtvZ

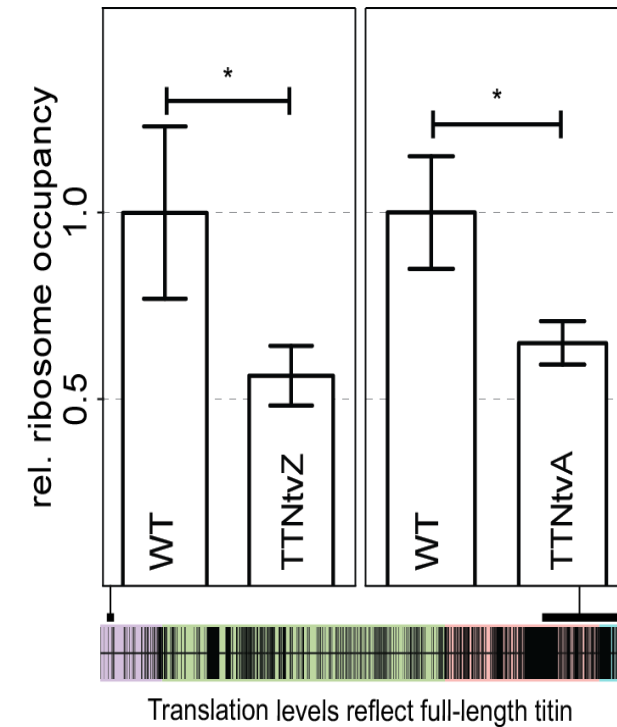
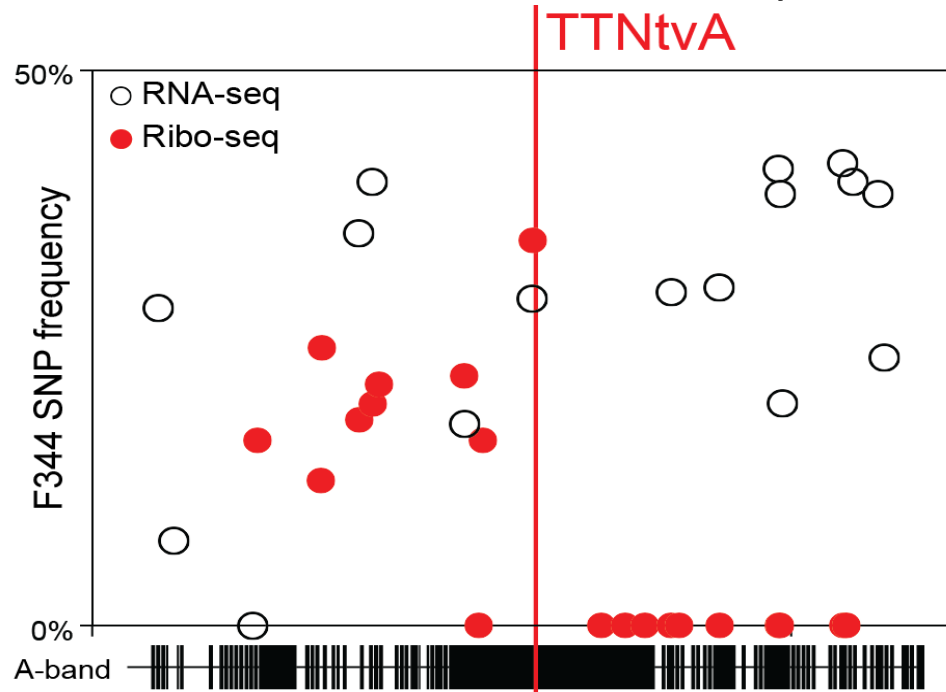
Ribo-seq



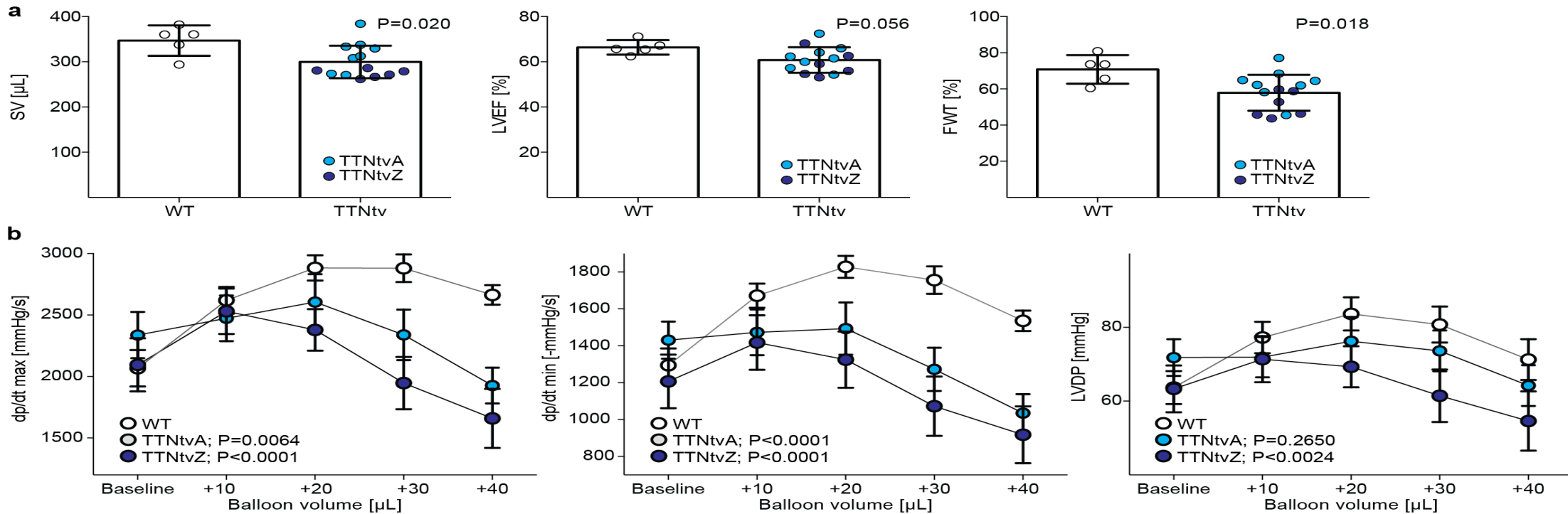
TTNtv efficiently stop translation

First time we saw translation / synthesis of a short mutant TTN and demonstrate nonsense mediated decay

Disease mechanism is haploinsufficiency



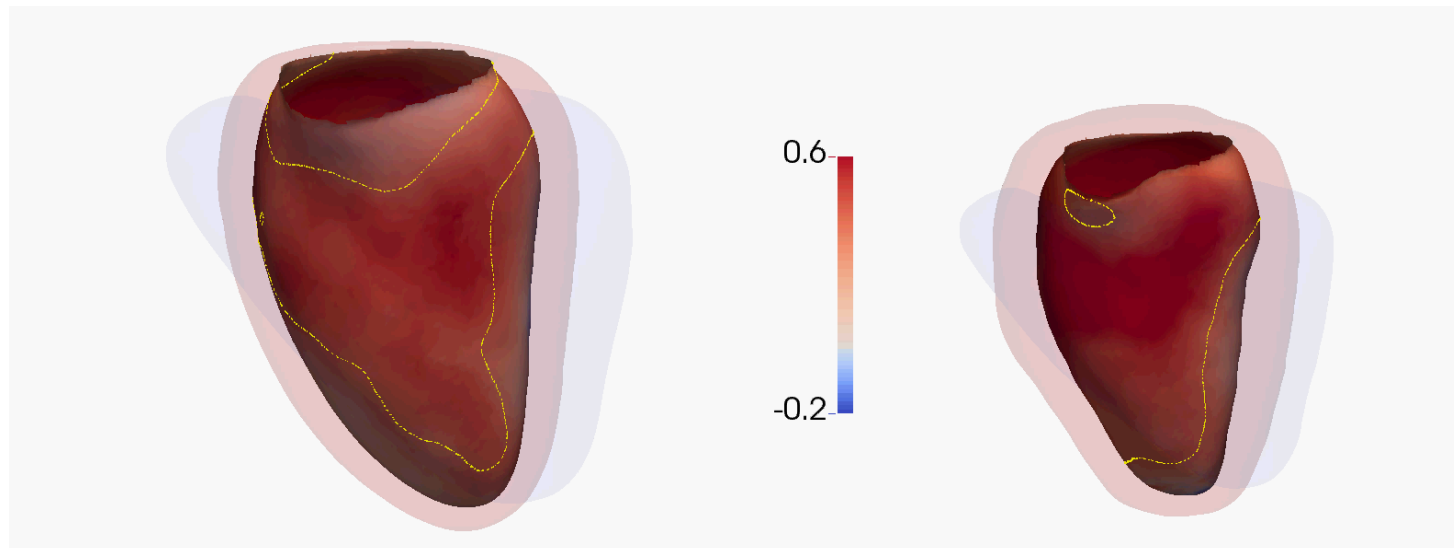
TTNtv in rats adversely affect cardiac function



a CMR derived SV (Stroke Volume), LVEF (Left Ventricular Ejection Fraction) and FWT (Fractional Wall Thickening) in 13-16 month old male WT and TTNtv rats

b Measurements of *ex vivo* myocardial function during volume overload stress in 4 month old WT and TTNtv rats

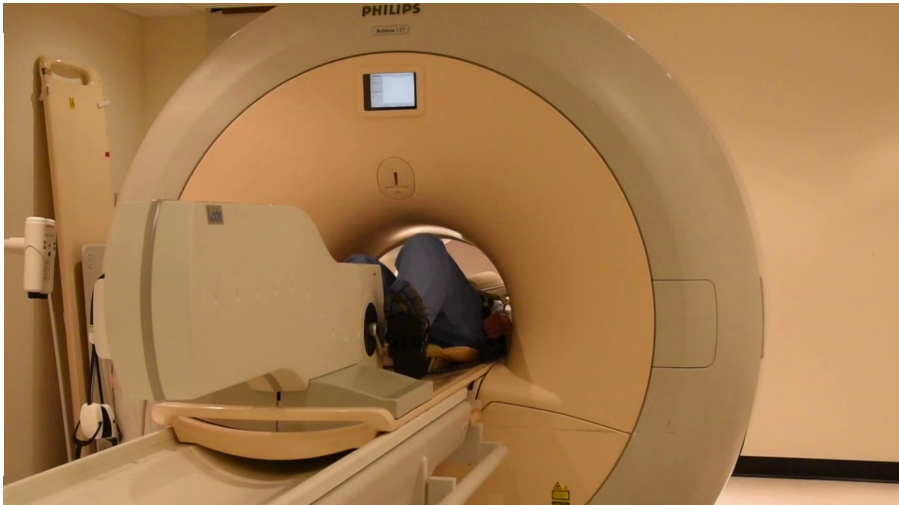
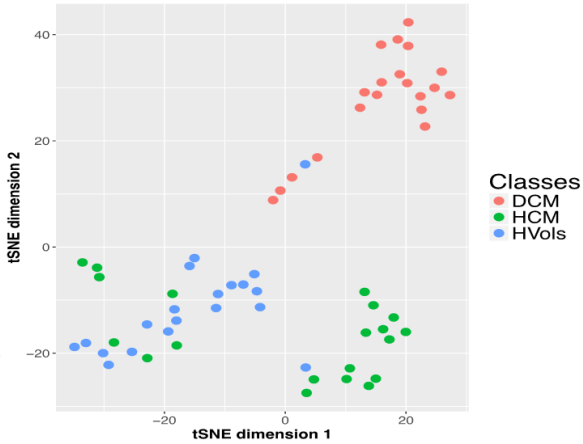
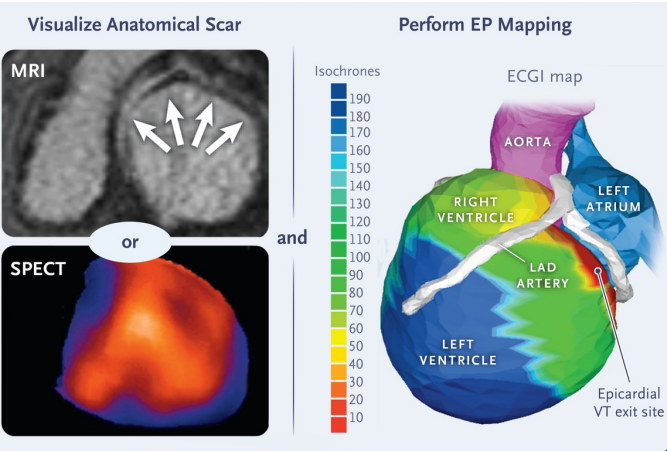
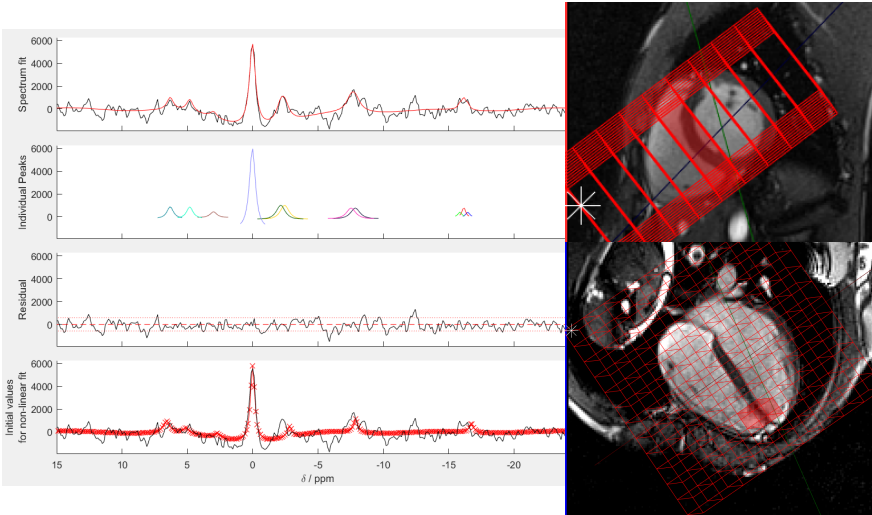
Application of Machine learning: The effects of titin-truncating variants in health and in DCM



TTNtv are present in ~1% of the population and are penetrant:
Positive standardised beta coefficients (red) indicate where TTNtv
genotype is associated with enlargement of the LV cavity

Biffi C, de Marvao A, et al. Three-dimensional cardiovascular imaging-genetics: a mass univariate framework. *Bioinformatics*. 2018;34(1):97-103.

- TTNtv are present in about 1% of the population and are penetrant.
- In TTNtv disease mechanism is haploinsufficiency.
- Computational modelling enables a deeper understanding of genotype-phenotype associations.
- The heart is maintained in a compensated state and therefore inflexible to additional stress.





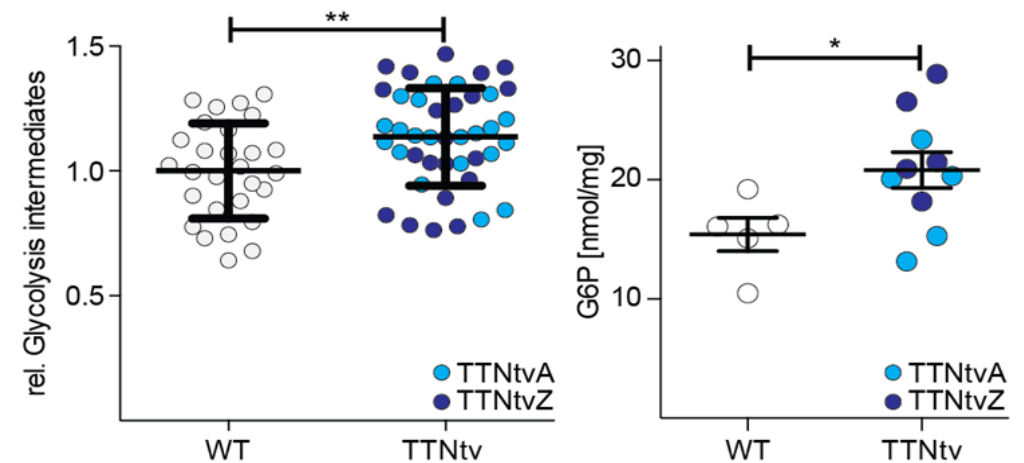
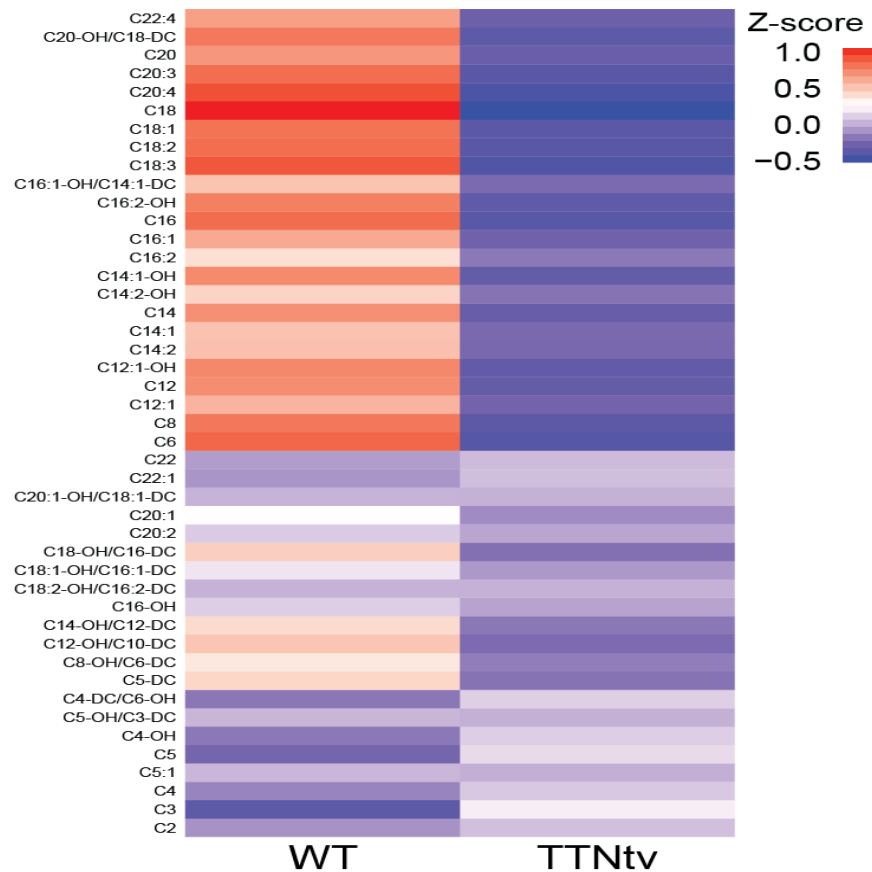
@AdeMarvao

**Imperial College
London**



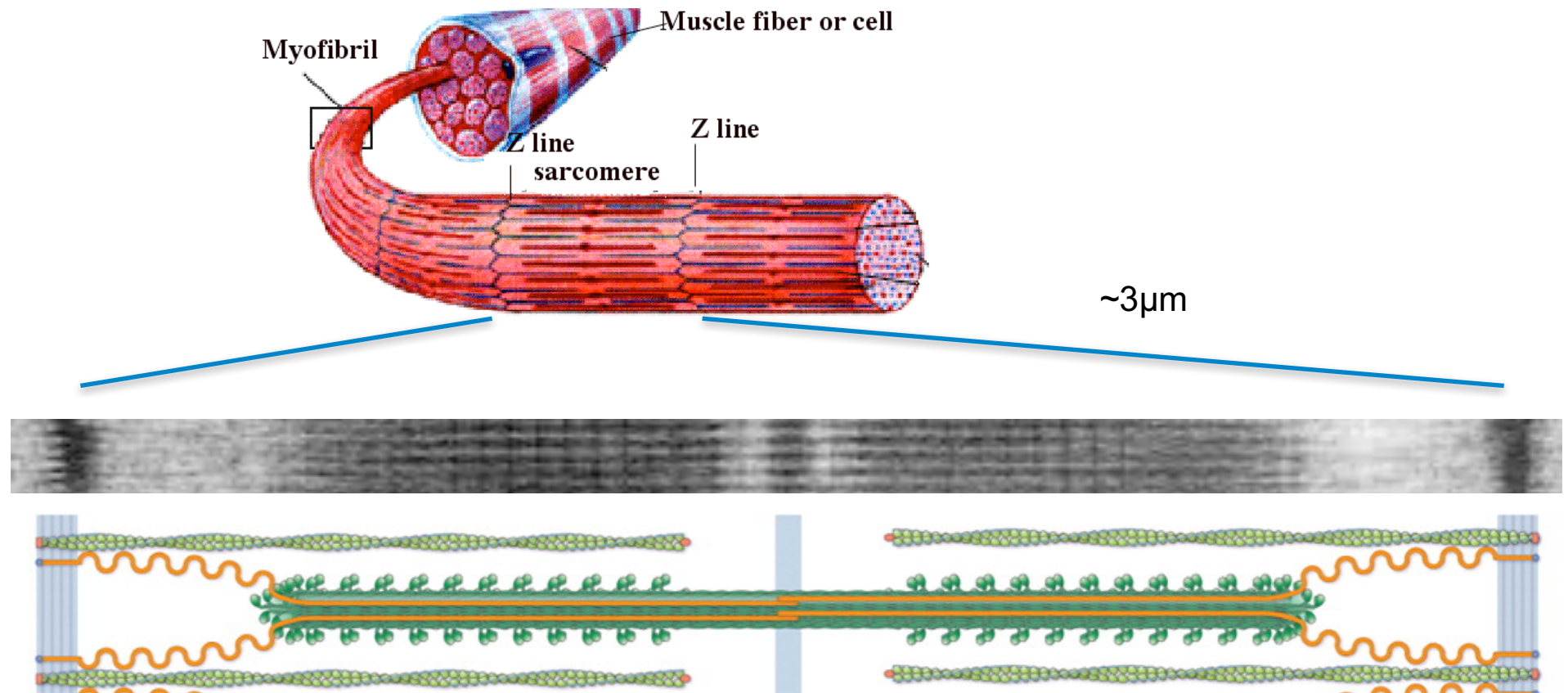
Sebastian Schafer, Carlo Biffi, Roddy Walsh, Georgia Doumou, Timothy Dawes, Wenzhe Shi, Wenjia Bai, Alaine Berry, Rachel Buchan, Iain Pierce, Pawel Tokarczuk, Ben Statton, Ghalib Bello, Catherine Francis, Jinming Duan, Marina Quinlan, Leanne Felkin, Thu-Thao Le, Anish Bhuva, Hak Chiaw Tang, Paul Barton, Calvin Woon-Loong Chin, Sanjay Prasad, Daniel Rueckert, Jonathan G Seidman, Christine E Seidman, James Ware, Declan P O'Regan, Norbert Hubner, Stuart Cook

TTNtv shift heart metabolism from lipids to sugars

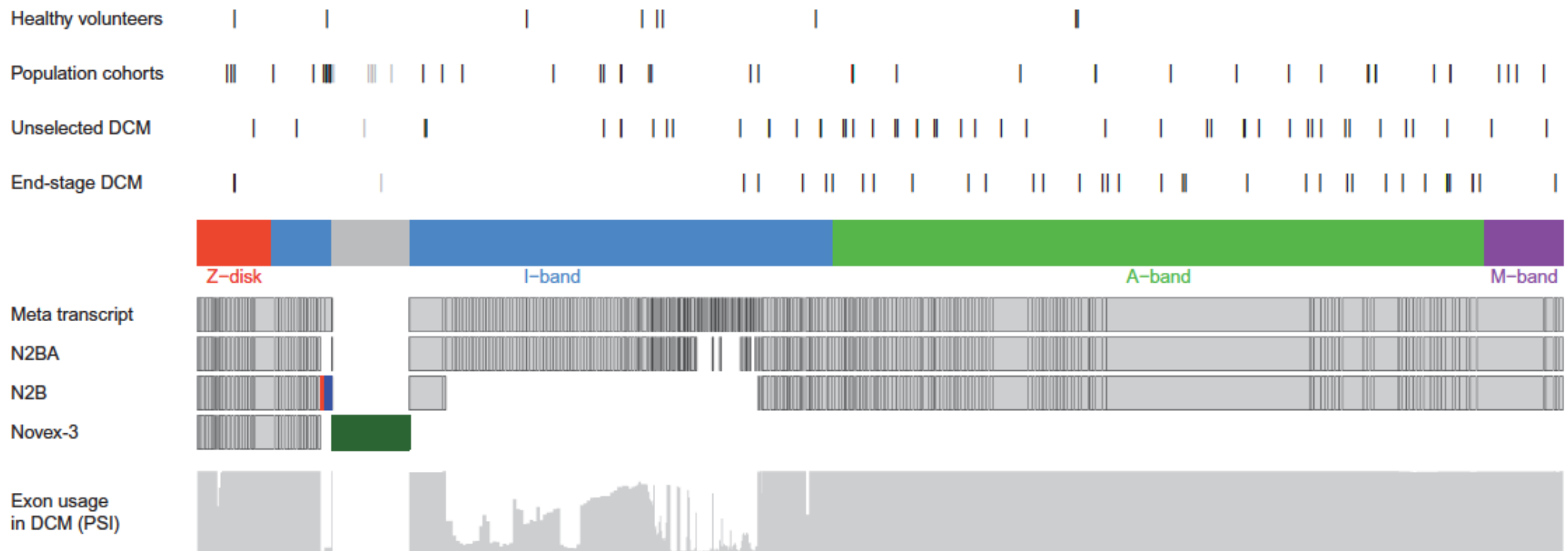


Work by Sebastian Schafer

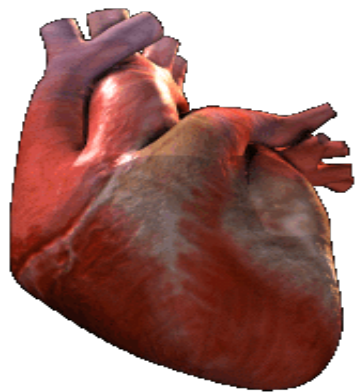
Titin (TTN) in the sarcomere



Is the effect of TTNtv position dependent?



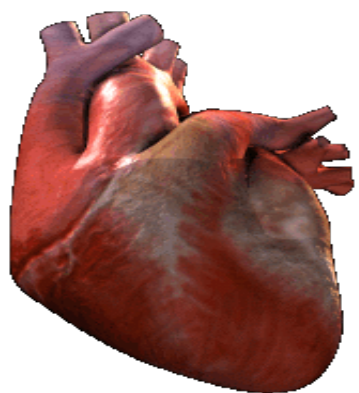
Roberts AM, et al. Integrated allelic, transcriptional, and phenomic dissection of the cardiac effects of titin truncations in health and disease. *Sci Transl Med.* 2015;7:270ra6.



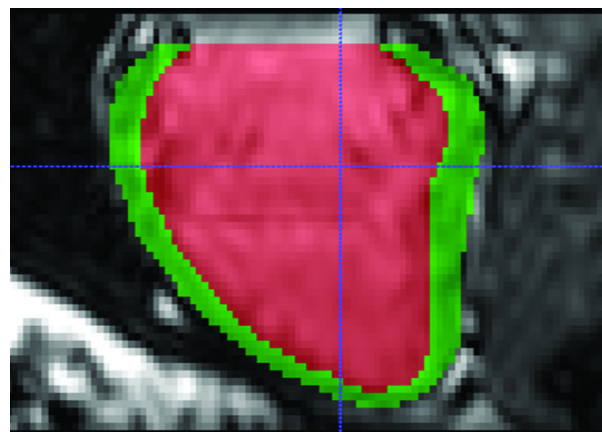
Biological ground truth

SAX3D Stack LV Function	
EDV:	119 ml
ESV:	42 ml
SV:	78 ml
EF:	65 %
CO:	4805 ml/min
CI:	2 l/min/m ²
HR:	62.0/min
Myo Mass (Diast):	96 g
Phase Diastole:	1
Phase Systole:	12
EDV/H:	64 ml/m
EDV/BSA:	59 ml/m ²
ESV/H:	22 ml/m
ESV/BSA:	21 ml/m ²
SV/H:	42 ml/m
SV/BSA:	38 ml/m ²
Myo Mass/H (Diast):	52 g/m
Myo Mass/BSA (Diast):	48 g/m ²

1D volumes/mass



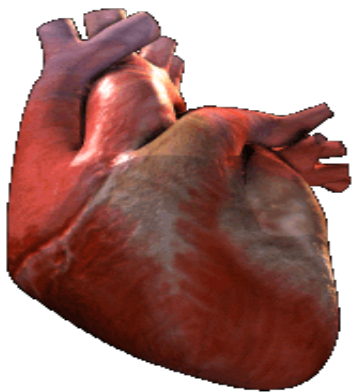
Biological ground truth



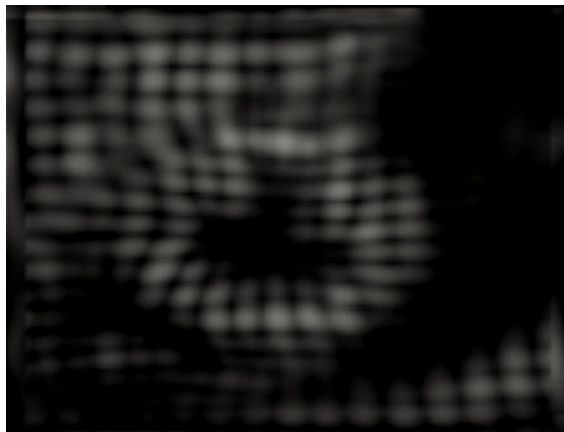
3D approximation

SAX3D Stack LV Function	
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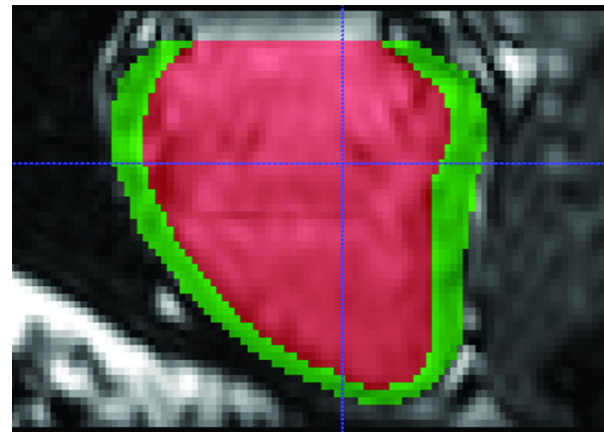
1D volumes/mass



Biological ground truth



Complete 3D model



3D approximation

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EDV:	119 ml
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1D volumes/mass