

# Human gene mutations causing infertility: Genetics of hypogonadism

**Dr Ambroise Wonkam (M.D.)**  
*Medical geneticist*

Postgraduate Training in Reproductive Health Research  
Faculty of Medicine, University of Yaoundé 2007

# INTRODUCTION: overview

## Gene mutation and Clinical presentation :

- Gonadal function deficiency
- Deficient puberty
- Infertility
- Abnormal genitalia



# INTRODUCTION: overview

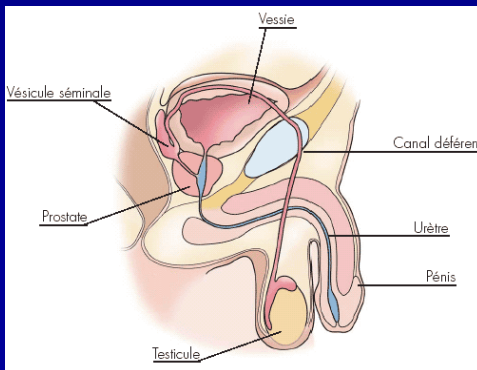
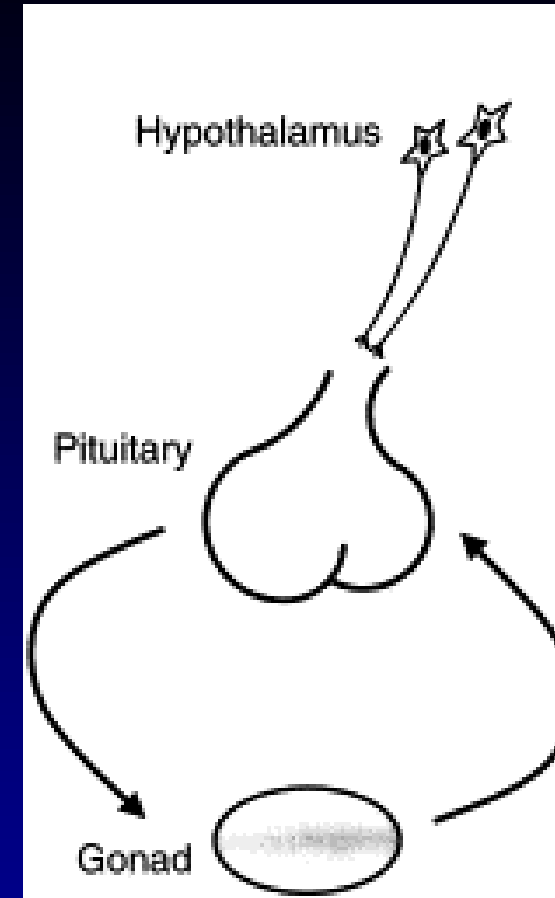
4 compartments:

hypogonadotropic  
hypogonadism:

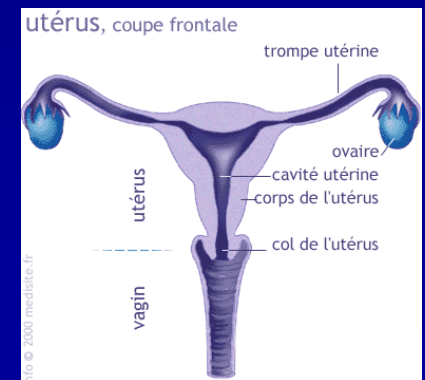
I, hypothalamic  
II, pituitary

hypergonadotropic  
hypogonadism :

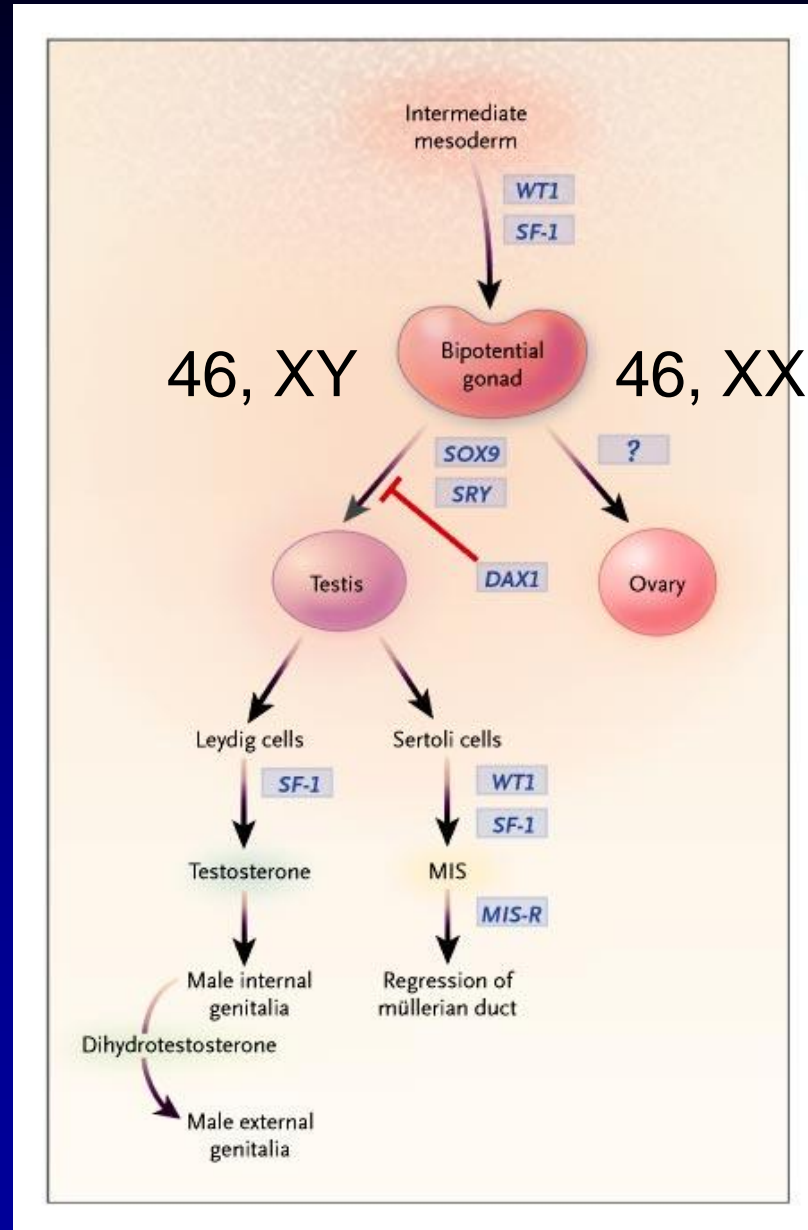
III, gonadal



IV, outflow tract

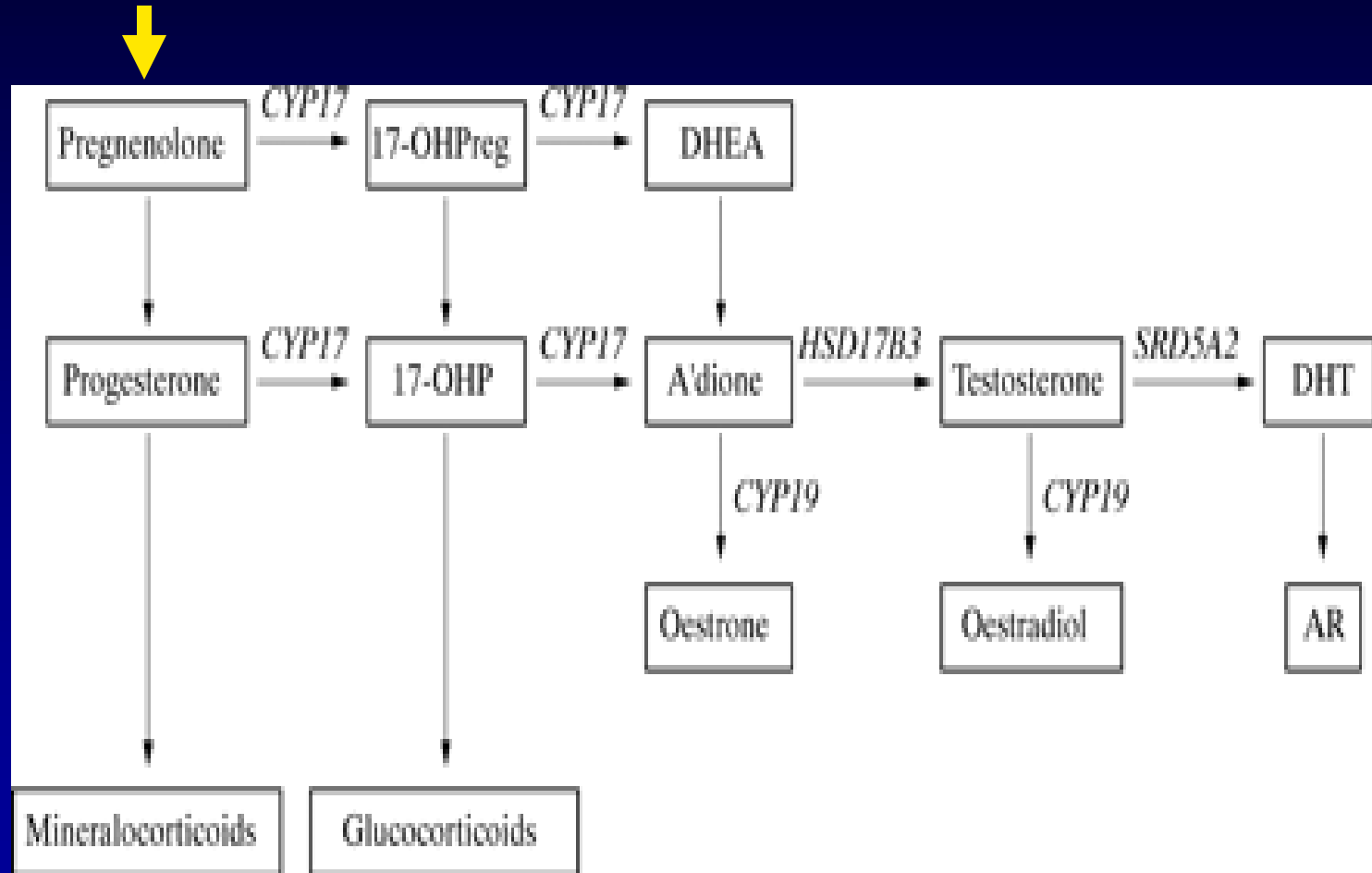


# INTRODUCTION: Sexual differentiation



# INTRODUCTION: the steroid pathway and gene defect

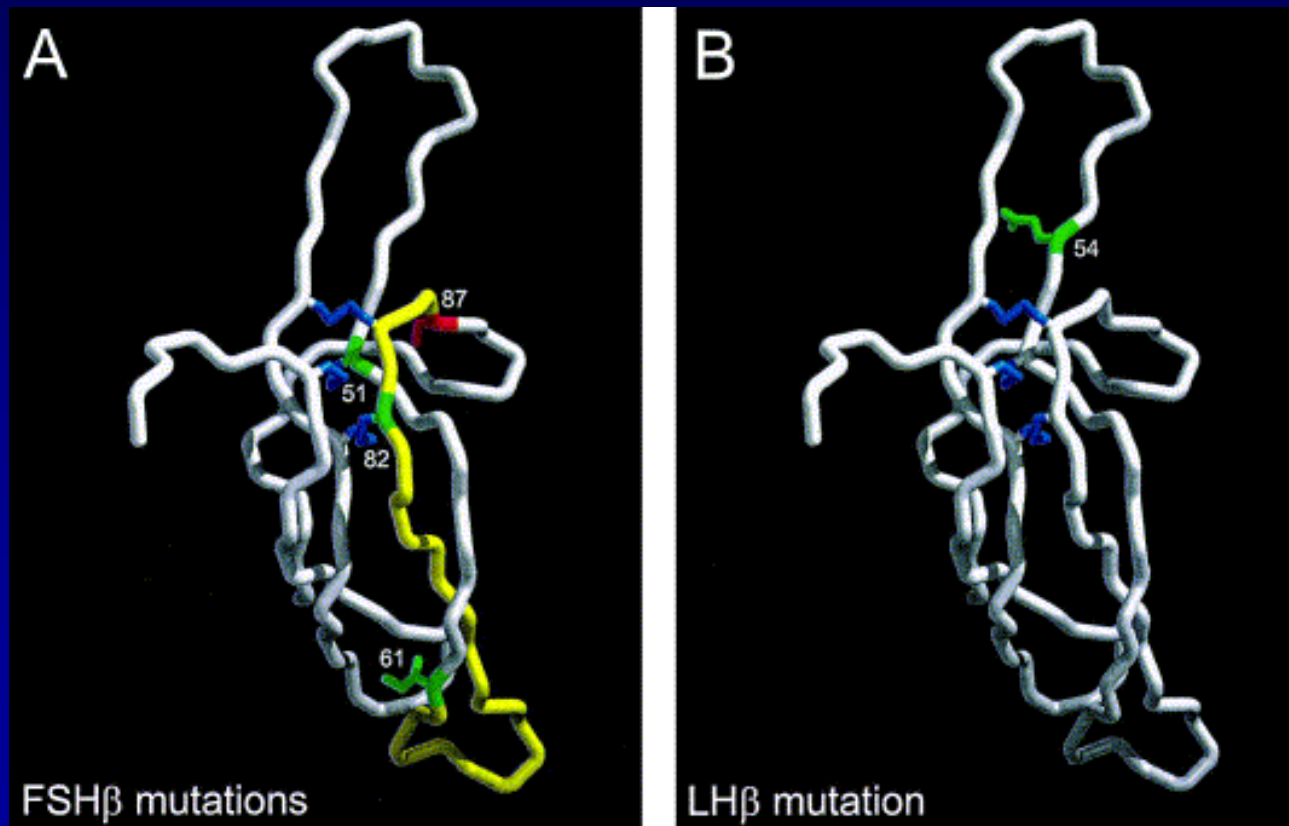
Cholesterol



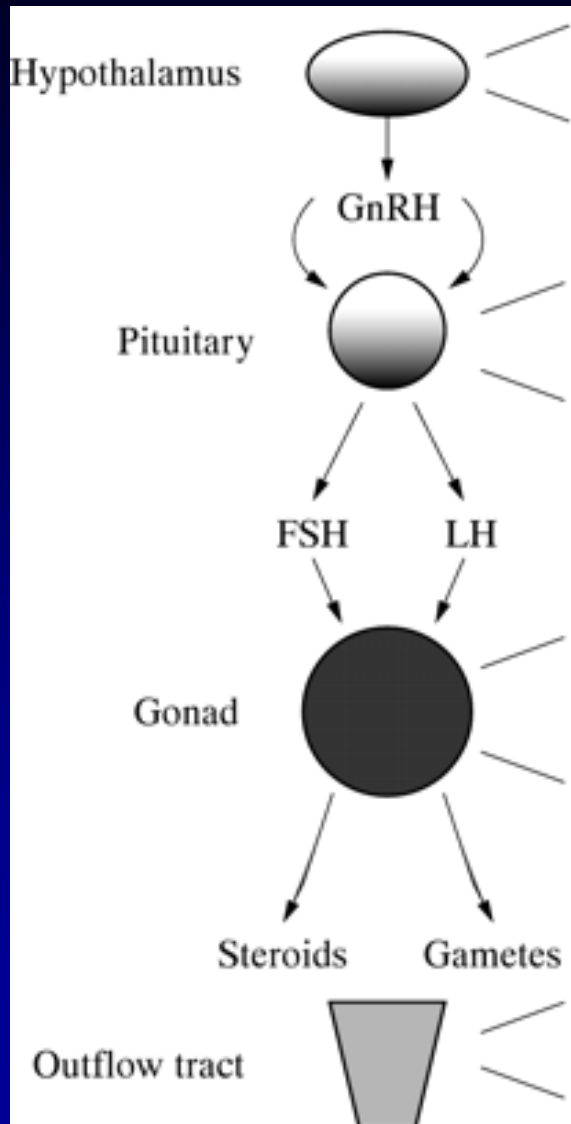
# INTRODUCTION: gonadotrophic hormones

FSH, LH, hCG, TSH:

- Glycoprotein hormones
- Common  $\alpha$ -subunits
- Specific  $\beta$ -subunits



# INTRODUCTION: the HH-G axis gene



## *GPR54*

*KALI*  
*LEP*  
*LEPR*  
*AHC*

*GNRHR*  
*FSH $\beta$*   
*LH $\beta$*   
*PROP1*  
*HESX1*  
*AHC*

*FSHR*  
*LHCGR*  
*GALT*  
*AIRE*  
*CYP19*  
*CYP17*  
*HSD17B3*  
*NR5A1*  
*SRD5A2*  
*SOX9*  
*WT1*

*AR*  
*CFTR*  
*HOXA13*

45,X  
delXp/Xq  
*FMR1*  
*DIAPH2*  
*POF1*  
*FOXL2*

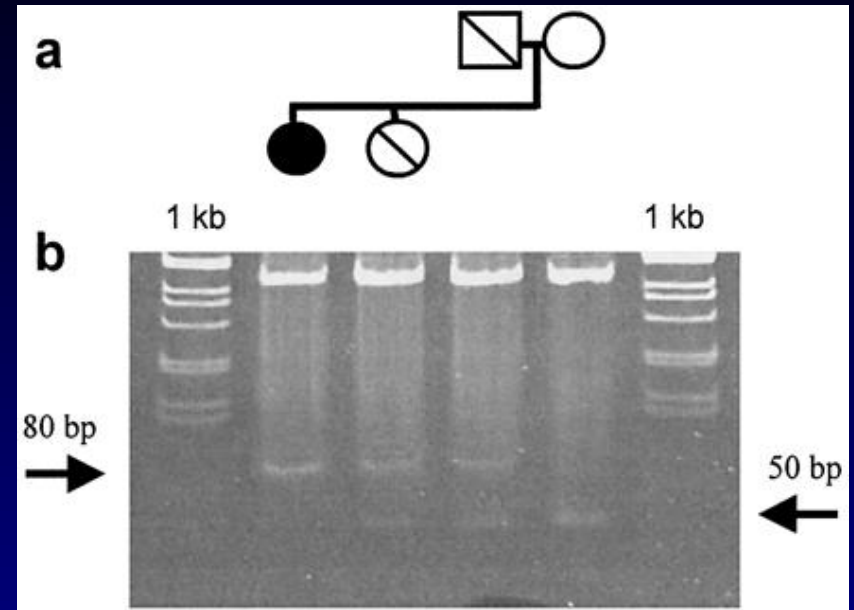
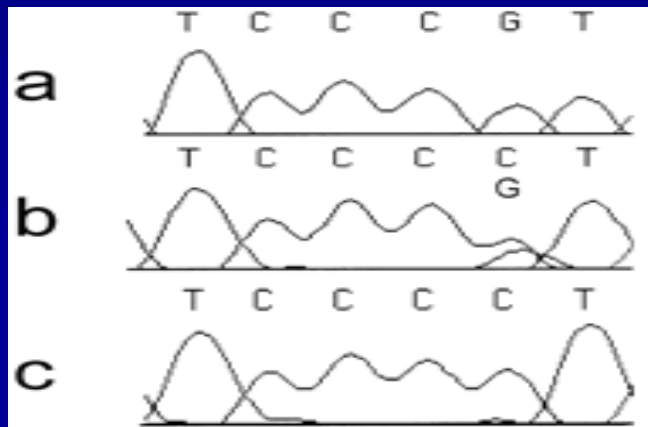
*SRY*  
*DAZ*  
*YRBM*  
*USP9Y*  
*DBY*

# INTRODUCTION: hunting disease genes

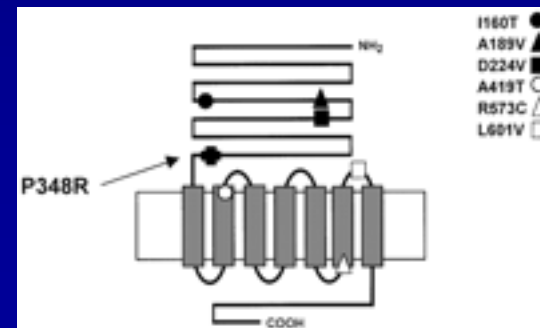
Clinical observations  
Families history, pedigree

Linkage analysis  
Positional cloning

Candidate genes  
Mutation identification

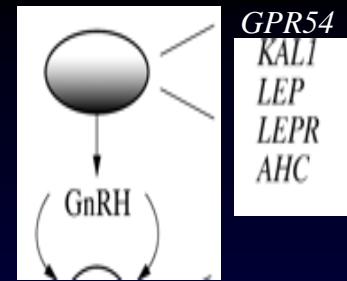


Functional studies





# Hypogonadotrophic hypogonadism: The hypothalamic compartment



## GnRH is the master

Mutations of genes expressed in the hypothalamus:

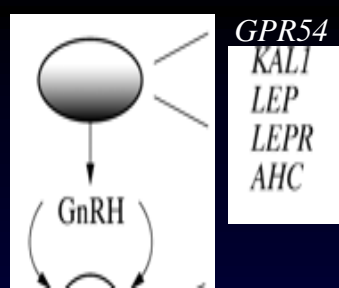
- Absent or deficient puberty
- ↓↓ FSH
- ↓ LH
- The gonads are normal

Fertility is possible: exogenous GnRH, FSH, LH

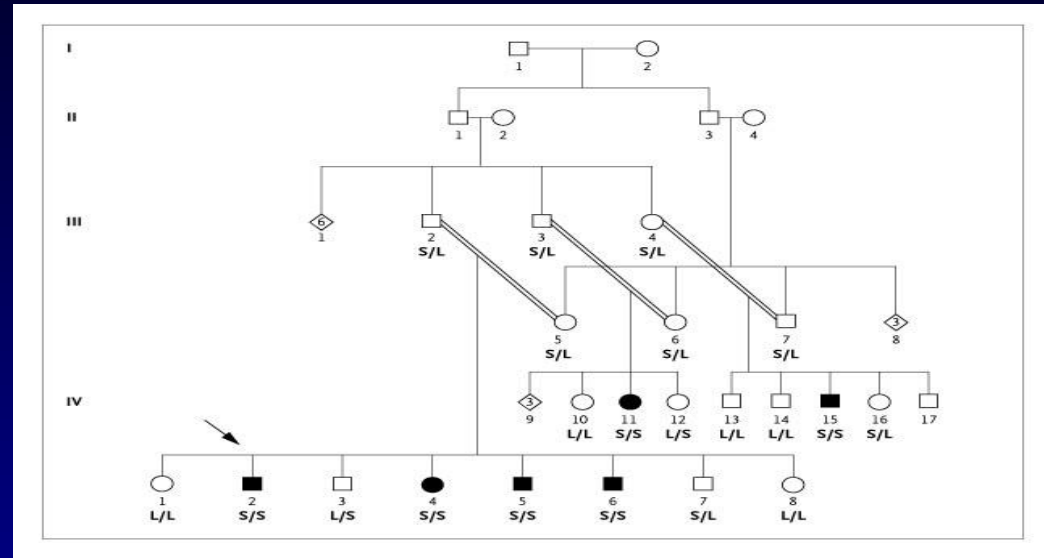
# Hypogonadotrophic hypogonadism

## The hypothalamic compartment

## The *GPR54* gene



- Consanguinous family



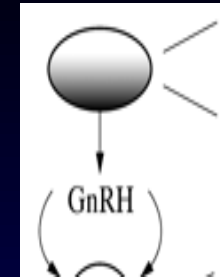
- Patients with lacked pubertal development
- Idiopathic hypogonadotropic hypogonadism (IHH)
- Candidate gene *GPR54* encodes a receptor
- Affected patients : homozygous for an L148S Mutation

An unrelated proband: R331X and X399R mutations

# Hypogonadotrophic hypogonadism

The hypothalamic compartment

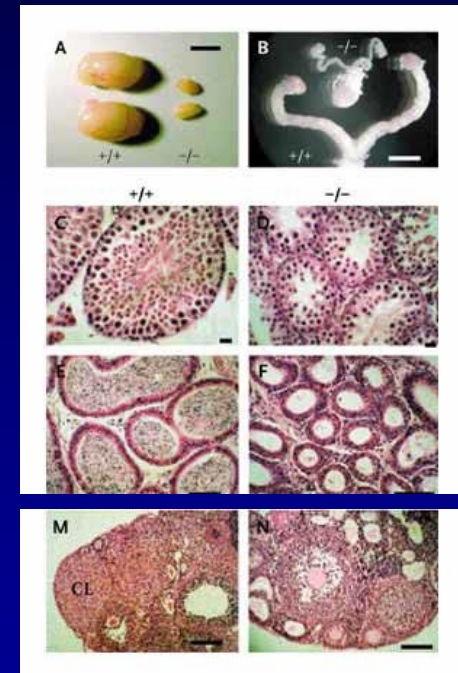
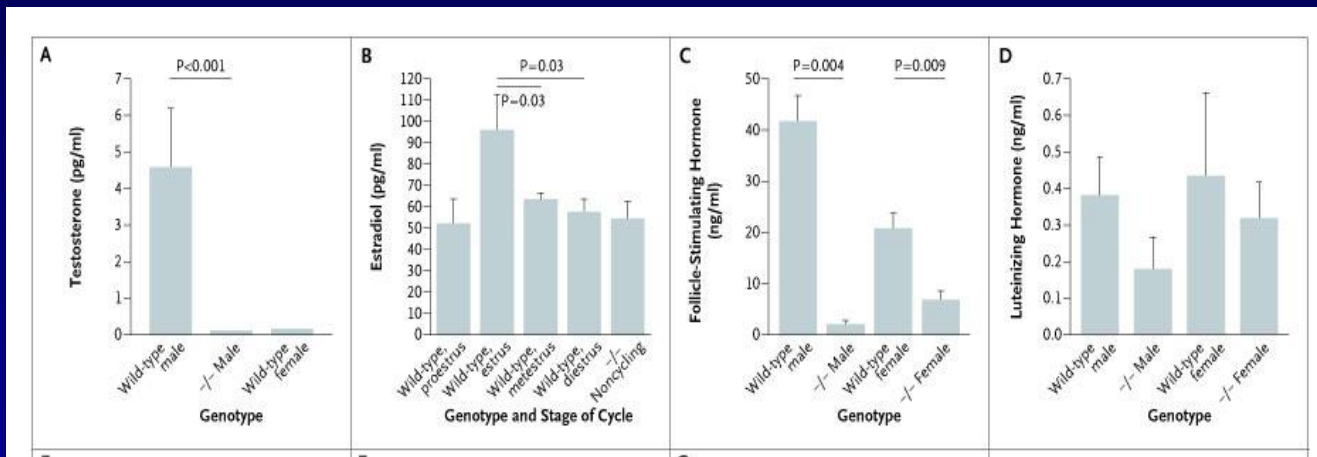
The *GPR54* gene



*GPR54*

KALI  
LEP  
LEPR  
AHC

Gpr54-deficient mice:  
Isolated hypogonadotrophic hypogonadism



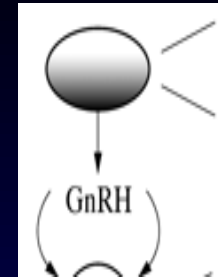
- Small testis / Absence of follicular maturation
- Responsiveness to exogenous GnRH and gonadotrophin
- Normal level of GnRH in the hypothalamus

GPR54 receptor is essential for normal GnRh and puberty

# Hypogonadotrophic hypogonadism

## The hypothalamic compartment

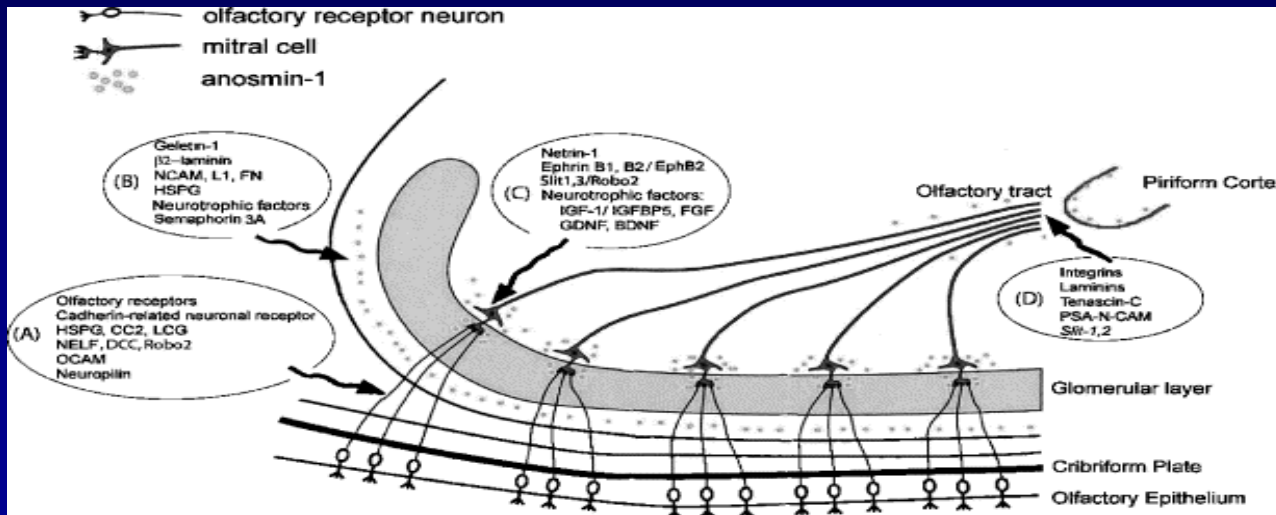
### The *KAL1* gene



GPR54

KALI  
LEP  
LEPR  
AHC

- Kallmann syndrome: X linked recessive IHH + anosmia
- Mutations in the *KAL1* gene (Xp)



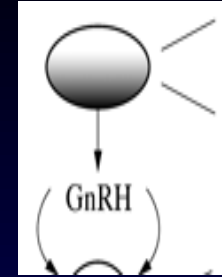
- *KAL1* pt., anosmin, neural cell adhesion molecule

A scaffold for GnRH neurones and olfactory nerves to migrate  
If defective : GnRH /olfactory neurones fail to synapse normally

# Hypogonadotrophic hypogonadism

The hypothalamic compartment

The *LEP* and *LEPR* gene



GPR54

KALI  
LEP  
LEPR  
AHC

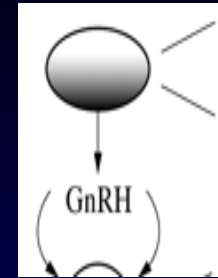
- The leptin deficient *ob/ob* mice and leptin resistant *db/db* mice: obesity and hypogonadotrophic hypogonadism
- Leptin mutations have been found in a human families:  
Obese subjects + hyperinsulinaemia  
Hypogonadism + irreversible pubertal delay
- A leptin receptor mutation produced a similar phenotype

Leptin plays an important role in metabolism and in puberty

# Hypogonadotrophic hypogonadism

The hypothalamic compartment,

The *AHC* gene



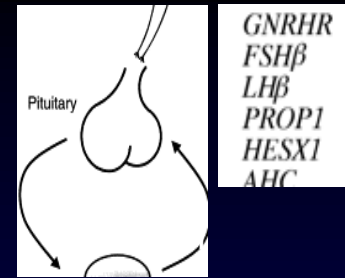
GPR54

KALI  
LEP  
LEPR  
AHC

- Males with adrenal hypoplasia congenita (AHC) display
  - Adrenal failure: ↓↓ glucocorticoids and mineralocorticoids
  - AHC children fail to undergo puberty : HH ± cryptorchidism
- 
- The AHC gene encodes pt. DAX1 (Xp): A transcription factor
  - Development of the pituitary gonadotrophs and adrenal cortex
  - DAX1 regulate hypothalamic and pituitary gonadotrophin

# Hypogonadotrophic hypogonadism

## The pituitary compartment



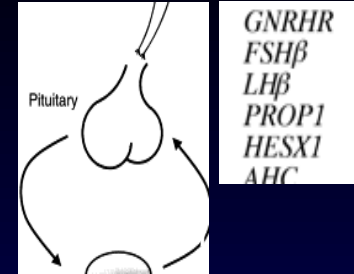
- Mutations can cause deficiency in of all or some of the hormones (TSH, prolactin, Gh, FSH LH)
- Phenotype of isolated hormone deficiencies :
  - impairment of pubertal development
  - infertility

Therapy for pituitary causes of infertility is very successful

# Hypogonadotrophic hypogonadism

## The pituitary compartment

### The *GNRHR* gene



- **GNRHR**: the first AR gene to possess mutations in IHH  
Prevalence : 2.2% of all IHH
- **Phenotype** : complete to incomplete IHH  
no puberty / fertility or partial pubertal defects

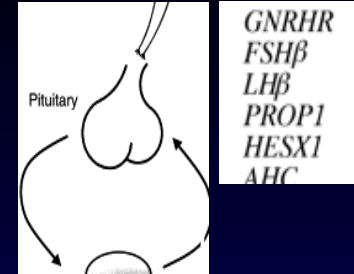
Exogenous GnRH  $\uparrow$  pituitary gonadotrophin responses



# Hypogonadotrophic hypogonadism

## The pituitary compartment

## The *FSH $\beta$* / *LH $\beta$* / *hCG $\beta$* genes



### Female with *FSH $\beta$* mutations:

- $\downarrow$  FSH     $\downarrow$  oestradiol     $\uparrow$  LH
- absent /incomplete breast development
- sterility

Male: Azoospermia,  $\downarrow$  testosterone  $\pm$  puberty

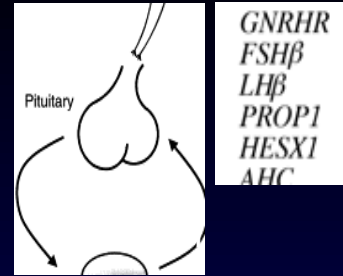
### 1 known homozygous missense mutation in the *LH $\beta$* gene

- The proband presented with pubertal delay
- Bilaterally small descended testes
- $\downarrow$  testosterone     $\uparrow$  gonadotrophins
- He responded to hCG administration

# Hypogonadotrophic hypogonadism

## The pituitary compartment

### *The PROP1 gene*



Mutations of PROP1 in humans cause combined pituitary hormone deficiency: GH, TSH, prolactin, FSH, and LH

They present with:

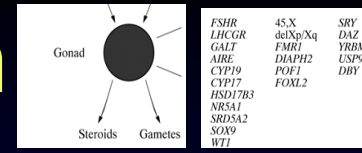
Short stature

Hypothyroidism

Absent puberty

# Hypergonadotrophic hypogonadism

## The GONAD: overview



Gonadal causes of infertility constitute the largest group of disorders for which a molecular basis is known

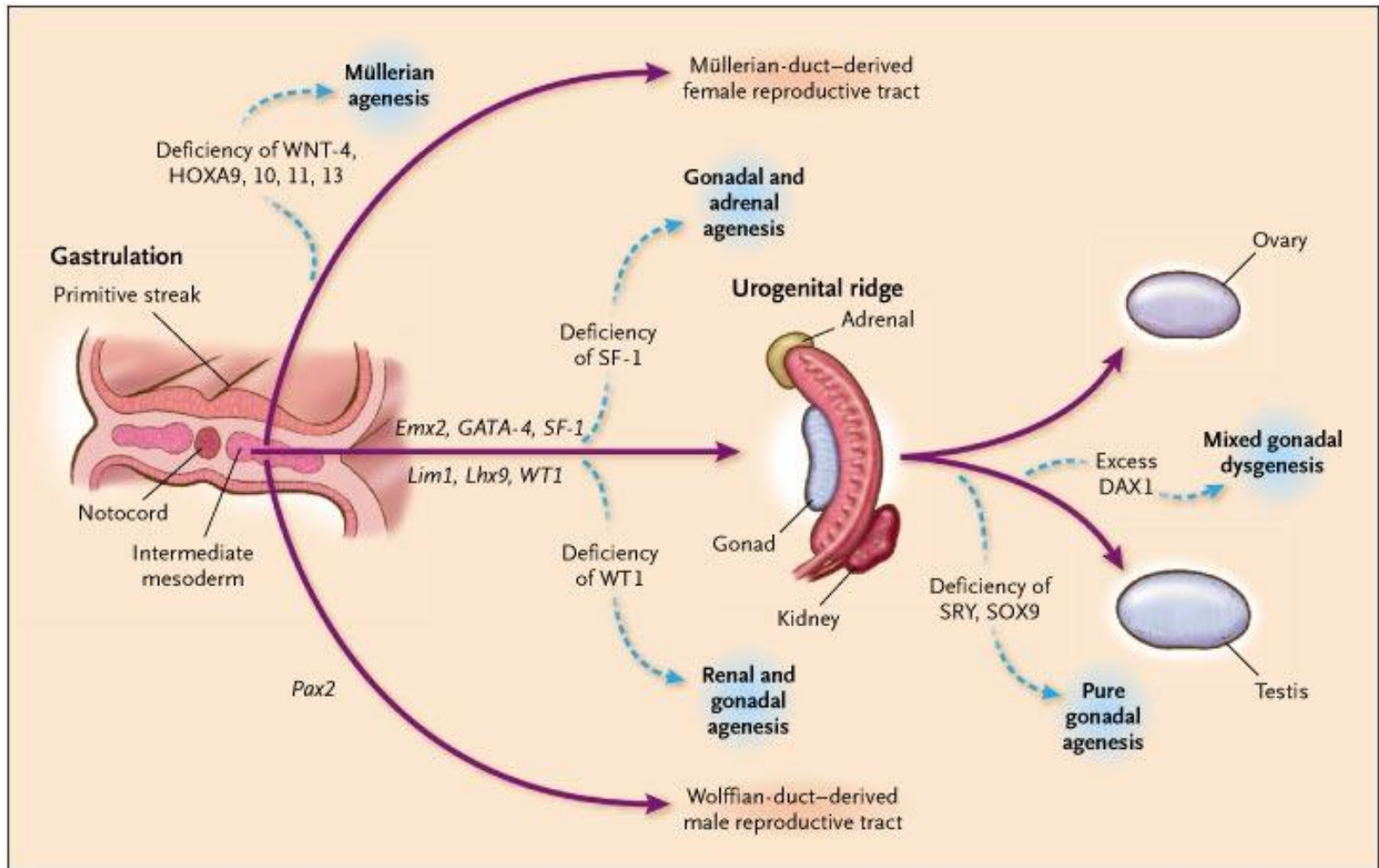
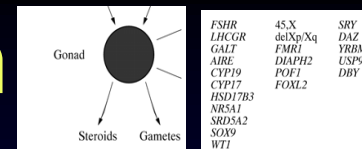
Mutations affecting gonadal function include:

- Gonadotrophin receptors
- Steroid hormone receptors
- Steroid synthesis defects
- Miscellaneous causes

Infertility caused by gonadal failure has a poor prognosis  
The best therapy involves the use of donor gametes

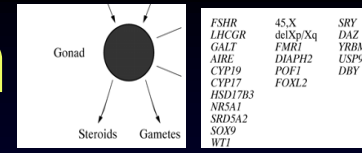
# Hypergonadotrophic hypogonadism

## The GONAD: overview



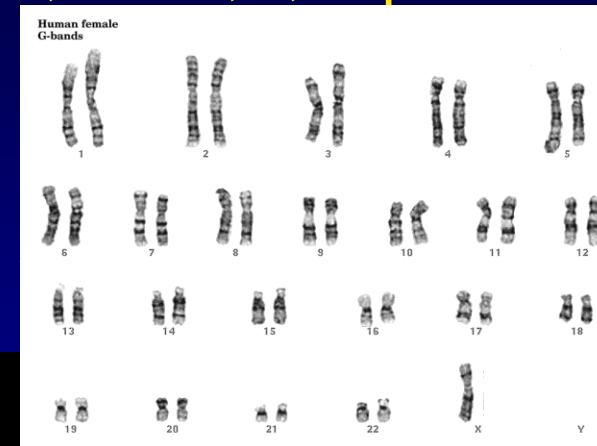
# Hypergonadotrophic hypogonadism

## The GONAD: X chromosome



**Whole X chromosome deletions:** Turner syndrome, 45,X; mosaicism 46,XY, 46,XX, 47,XXX, or 46,X,iXq

- Haploinsufficiency of multiple genes
- Gonadal failure ;No puberty/menarche
- Short stature

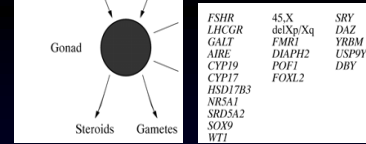


### X chromosome deletions

- Most women with Xp deletions are short
- Xp11 result in ovarian failure in about half of women
- Deletion involving Xq generally result in ovarian failure
- POF1 region at Xq26-q28 and the POF2 region at Xq13.3-q22

### X;Autosome translocations

Rare; may affect reproduction depending of the X breakpoints

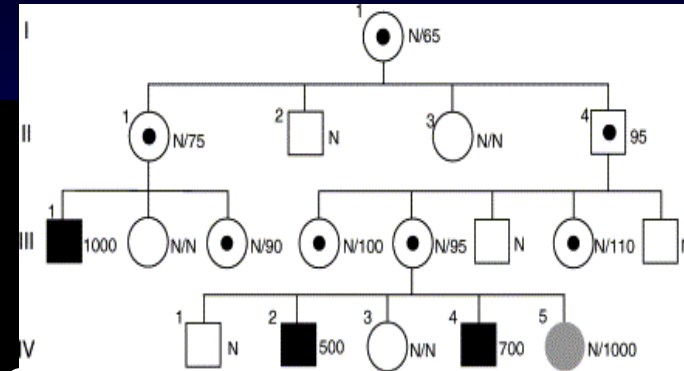


# Hypergonadotrophic hypogonadism

## The GONAD: Single gene disorders of the X

### FMR1 gene

- Fragile X syndrome is an X linked AD
- Presentation: Mental deficiency in male
- The FMR1 gene (Xq27) fragile site: CGG repeat
- Premutation in carrier female



### Female carriers: ↑ risk of POF

Premutation in 3% women with sporadic POF

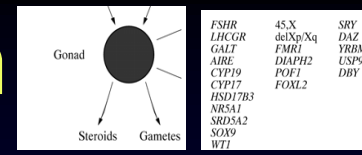
Families with POF: 12-15% FMR1 premutation alleles

### Diaphanous gene (DIAPH2) :

The DIAPH2 gene in the POF2 region was disrupted in a woman with ovarian failure and balanced  $t(X;12)(q21;p1.3)$

# Hypergonadotrophic hypogonadism

## The GONAD: Y chromosome



### ↓sperm parameters :

Oligospermia (< 20 million/cc) azoospermia (0 sperm)  
 Asthenospermia (< 50% motility),  
 Teratospermia (< 30% normal sperm)

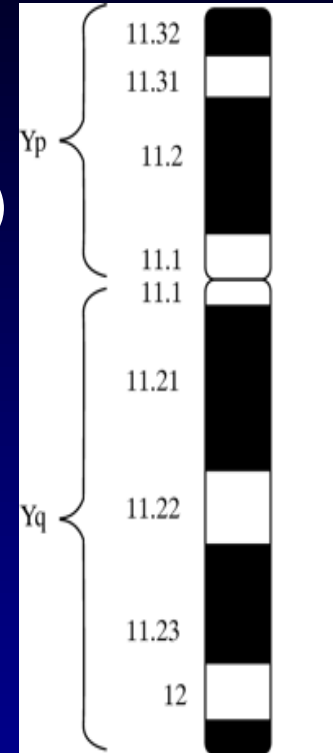
### Chromosomal disorders in men

Severe oligospermia or azoospermia:

eg: 47,XXY

46,XX men

Balanced translocations (1-2% oligozoo)



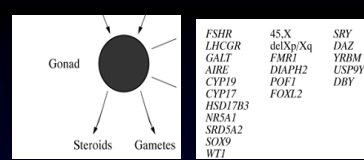
### SRY gene (Yp)

SRY mutations 10-15% of patients with 46,XY gonadal dysgenesis (Swyer syndrome)



# Hypergonadotrophic hypogonadism

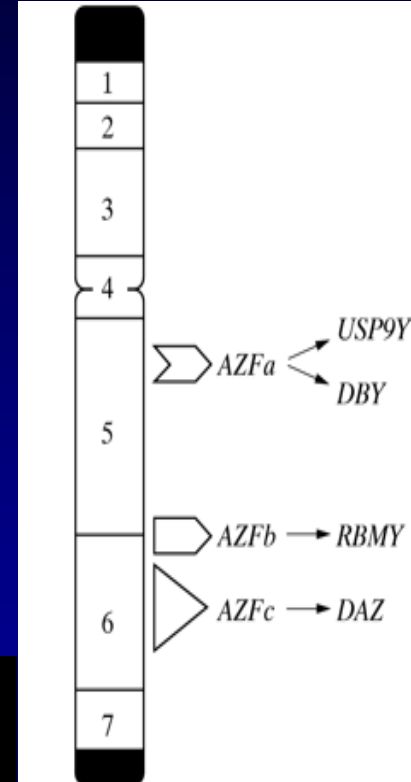
## The GONAD: Y Spermato-genesis genes



### The AZF (azoospermia factor) region on Yq11

3 regions AZFa, AZFb, AZFc

spermatogenesis genes: USP9Y, DBY RBMY, DAZ



8.2% of infertile patients have deletions of one or more AZF (prevalence : 1-35%)

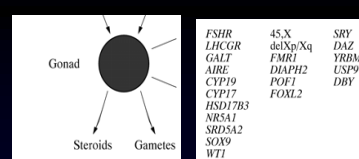
24% of men with azoospermia/cryptozoospermia



# Hypergonadotrophic hypogonadism

## The GONAD: autosomal disorders genes

### *FSHR, LHCGR*



Females with **FSHR gene mutations** display FSH resistance  
absent or normal breast development  
primary amenorrhoea or secondary amenorrhoea

### The inactivating **LHCGR** mutations

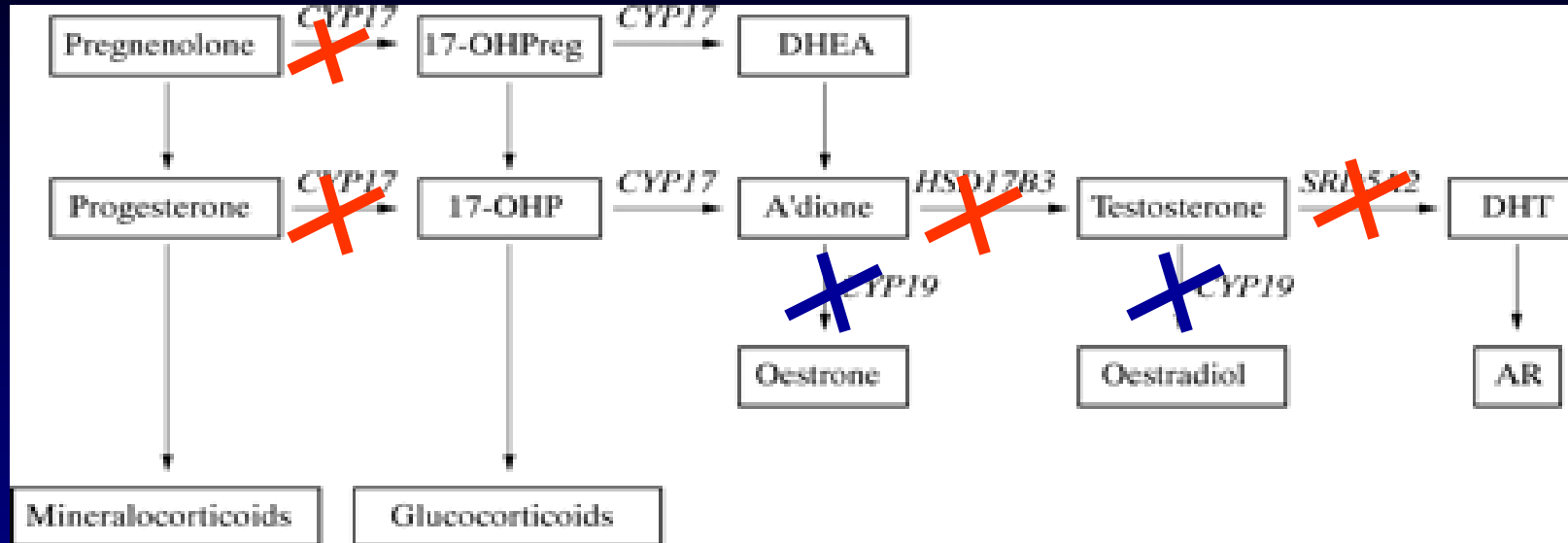
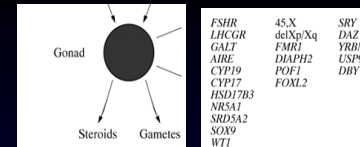
46,XY: Undermasculinisation  
Blind ending vagina  
Absent uterus and fallopian tubes  
Germ cells absent



46,XX: normal sexual development and amenorrhoea

# Hypergonadotrophic hypogonadism

## The GONAD: *Steroid enzyme genes*



### CYP17, HSD17B3, and SRD5A2 (5 $\alpha$ -reductase)

46,XY: female external genitalia phenotype  
but not have a uterus or upper vagina

### CYP19 (aromatase)

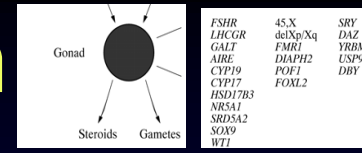
46,XX: sexual ambiguity with clitoromegaly  
multicystic ovaries, no menarche



46,XX

# Hypergonadotrophic hypogonadism

## The GONAD: *other genes*



### **FLOX2 gene ( 3q23): syndrome (BPES)**

Blepharophimosis-ptosis-epicanthus inversus

Affected women with type I may have POF



### **WT1 and SOX9 genes**

Sexual ambiguity in 46,XY and infertility  $\pm$  Wilms tumour (WT1)

### **Autoimmune regulatory (AIRE); gene (APECED)**

Autoimmune polyendocrinopathy-candidiasis-ectodermal dystrophy

### **NR5A1 gene**

Steroidogenic factor 1 (SF1), in the adrenal glands and gonads

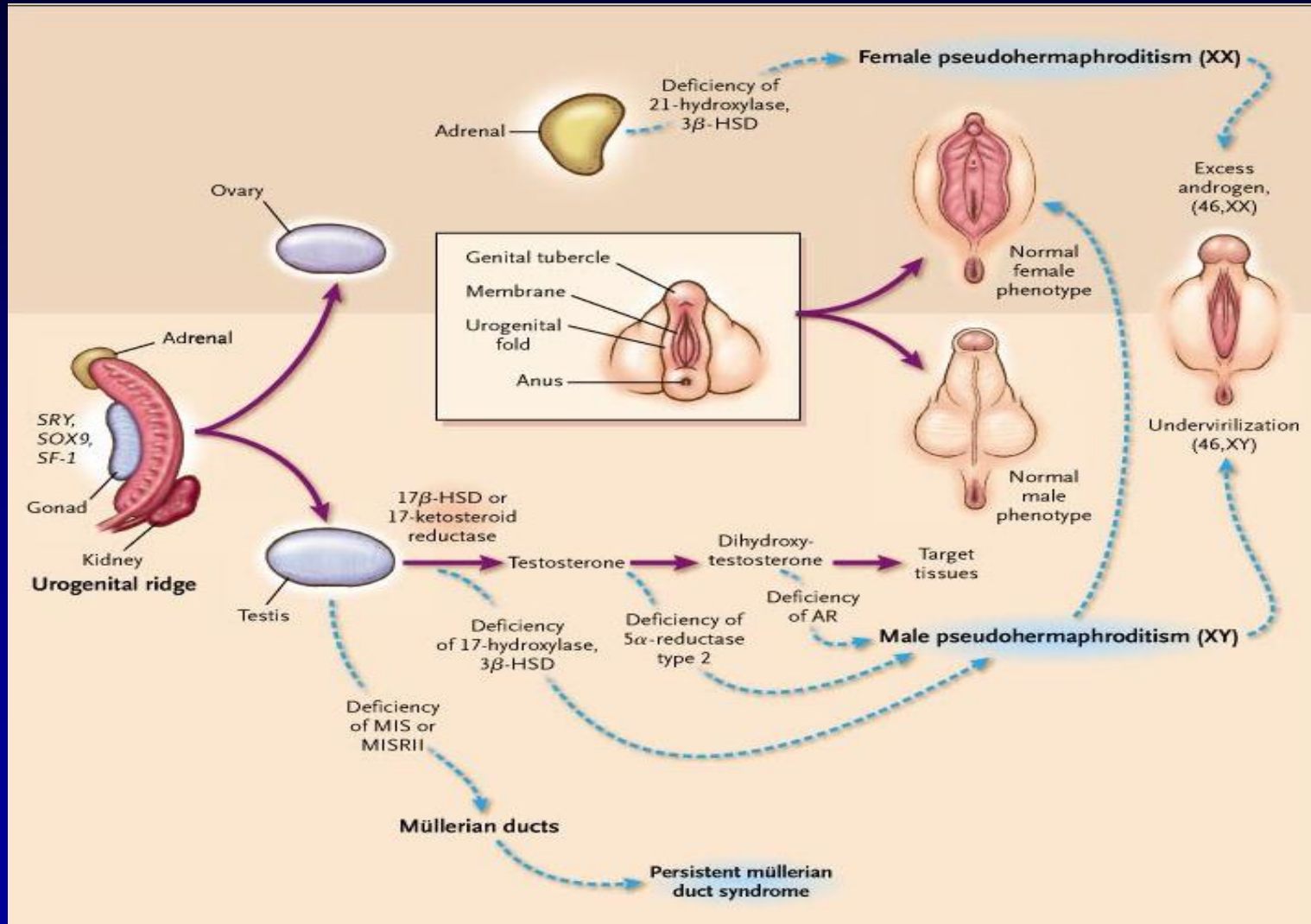
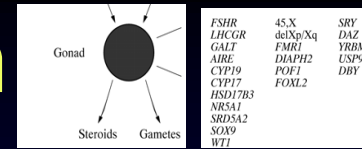
### **GALT (galactose-1-phosphate uridylyltransferase) gene**

Galactose cannot be converted to glucose

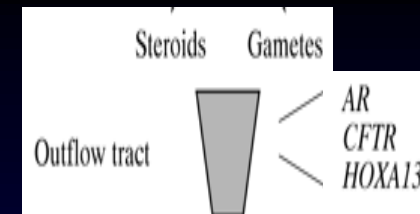
Digestive and neurologic symptomatology + POF in female

# Hypergonadotrophic hypogonadism

## The GONAD: overview



# COMPARTMENT IV: THE OUTFLOW TRACT



## Androgen receptor (*AR*) gene

Nuclear hormone receptors

Mutation in 46,XY : phenotypic female + primary amenorrhoea

## *CFTR* gene

Congenital bilateral absence of the vas deferens (CAVD):

1% of infertile males

80-90% of CAVD patients are *CFTR* compound heterozygotes

Normal testicular sperm ; ICSI /FIV

## The *HOXA13* gene

Only one single gene that affect uterine development :

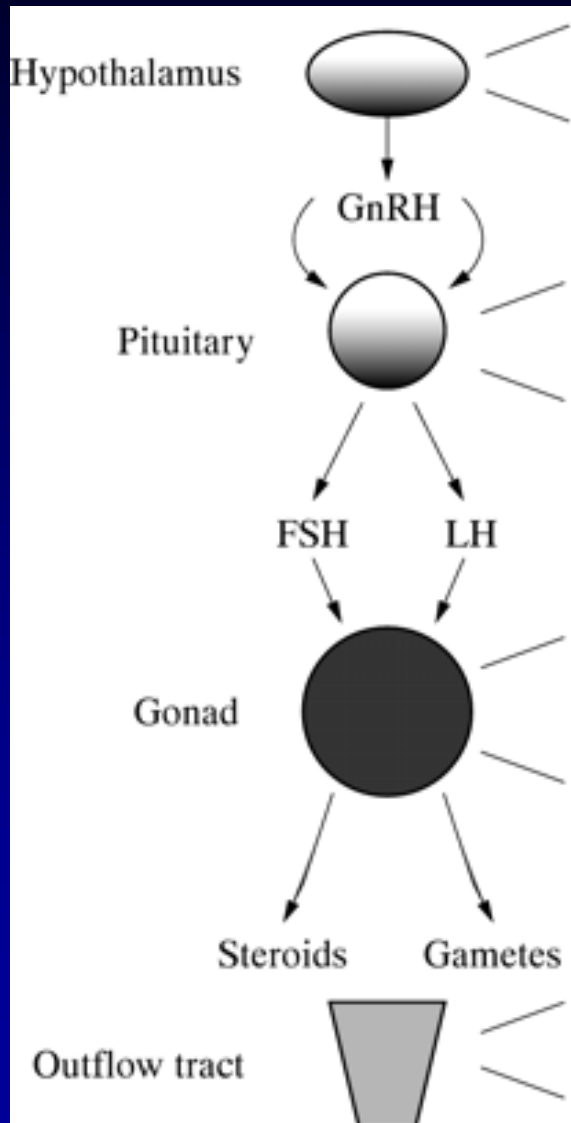
Uterus: bicornuate or didelphic

Recurrent pregnancy loss

Hand-foot-genital syndrome

# Genetics of Hypogonadism

## Human gene mutations causing infertility



### *GPR54*

*KAL1*  
*LEP*  
*LEPR*  
*AHC*

*GNRHR*  
*FSH $\beta$*   
*LH $\beta$*   
*PROP1*  
*HESX1*  
*AHC*

*FSHR*  
*LHCGR*  
*GALT*  
*AIRE*  
*CYP19*  
*CYP17*  
*HSD17B3*  
*NR5A1*  
*SRD5A2*  
*SOX9*  
*WT1*

*AR*  
*CFTR*  
*HOXA13*

45,X  
delXp/Xq  
*FMR1*  
*DIAPH2*  
*POF1*  
*FOXL2*

*SRY*  
*DAZ*  
*YRBM*  
*USP9Y*  
*DBY*

# **CONCLUSIONS:** genetics of hypogonadism

## Human gene mutations causing infertility

- Modest number of gene mutations known to cause infertility
- With the completion of the HGP, the number will increase

Ultimate goal:

- Understanding of normal reproductive physiology
- Improved infertility treatments



*Genetics alone would not save Africa,  
But without genetics, Africa would not be saved*