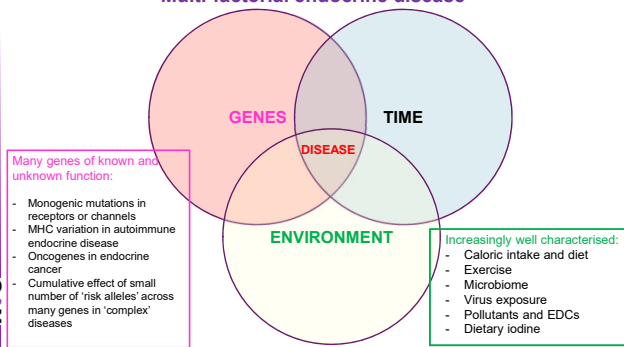


Clinical Genomics in Endocrinology

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2025 Conti Symposium on Veterinary Continuing Education
Current Concepts and Controversies in Clinical Genomics

Multi-factorial endocrine disease



Endocrine disorders

- **Overproduction of hormones**
 - Hyperthyroidism
 - Cushing's (hyperadrenocorticism)
 - Hyperaldosteronism
 - Insulinoma
 - Hypersomatotropism (Acromegaly)
 - Hyperparathyroidism
 - **Deficiency (relative or absolute):**
 - Hypothyroidism
 - Diabetes mellitus
 - Addison's (hypoadrenocorticism)
- > Overproduction** – lack of response to normal signals, and expansion of the endocrine organ
- Hyperplasia (nodule)
 - Tumour (benign or malignant)
- > Deficiency** – lack of response to normal signals, and expansion of the endocrine organ
- Autoimmune destruction
 - Antibodies blocking signalling
 - Gland destroyed by infection, tumour, surgery or radiation

SUMMARY

- **Canine Diabetes Mellitus**
 - Genetic basis of human diabetes
 - Investigating canine diabetes genetics
- **Feline Hyperthyroidism**
 - Can we predict which cats will become hyperthyroid?
 - Acquired genetic mutations in the feline thyroid gland
- **Canine insulinoma**
 - Using single-cell transcriptomics to understand a rare cancer



Invited review
Genetics of canine diabetes mellitus part 1: Phenotypes of disease
Alice L. Denyer^a, Brian Catchpole^a, Lucy J. Davison^{b,c,d},
Canine Diabetes Genetics Partnership^a



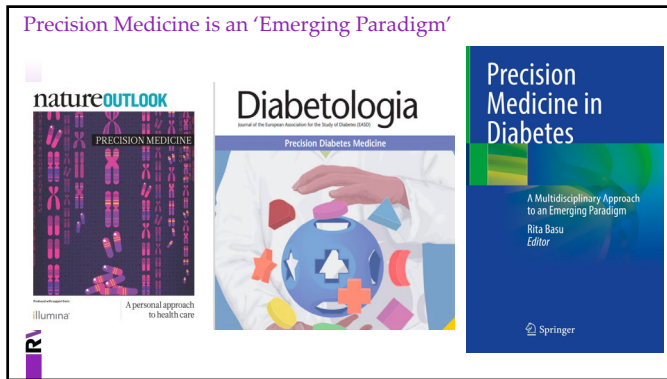
Review
Genetics of canine diabetes mellitus part 2: Current understanding and future directions
Alice L. Denyer^a, Brian Catchpole^a, Lucy J. Davison^{b,c,d},
Canine Diabetes Genetics Partnership

Thursday, 7 June 2007
Wellcome Trust Case Control Consortium Nature 2007



There are now >75 genetic regions associated with type 1 diabetes and >200 regions associated with type 2 diabetes in humans

Most cases of canine diabetes are likely to have a similarly 'complex' genetic basis



THE LANCET Diabetes & Endocrinology Log in

COMMENT | VOLUME 6, ISSUE 8, P504-506, AUGUST 01, 2018

Precision medicine in *KCNJ11* permanent neonatal diabetes

Siri Anna W Greeley¹ · Lisa R Letourneau² · Linda H Philpott³

Open Access · Published: June 04, 2018 · DOI: [https://doi.org/10.1016/S2213-8587\(18\)30138-4](https://doi.org/10.1016/S2213-8587(18)30138-4)

Neonatal diabetes mellitus – assumed to be “type 1” autoimmune and insulin dependent

Poor or erratic response to injectable insulin therapy

Clinical whole genome sequencing (WGS)

Excellent clinical response to oral sulphonylureas

Mutation in *KCNJ11* identified (a potassium channel involved in insulin release in pancreatic beta cells)

Canine Diabetes Mellitus – how many diseases is it?

The Veterinary Journal 2017, 202(2), 109-120

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DEFINITION

“random (fasted or unfasted) blood glucose ≥ 11.1 mmol/L (≥ 200 mg/dL) with classic clinical signs of hyperglycaemia (with no other plausible cause), or hyperglycaemic crisis”

PHENOCOPIES

Agreeing Language in Veterinary Endocrinology (ALIVE): Diabetes mellitus – a modified Delphi-method-based system to create consensus disease definitions

Rijn J.M. Nissem^{1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36,37,38,39,40,41,42,43,44,45,46,47,48,49,50,51,52,53,54,55,56,57,58,59,60,61,62,63,64,65,66,67,68,69,70,71,72,73,74,75,76,77,78,79,80,81,82,83,84,85,86,87,88,89,90,91,92,93,94,95,96,97,98,99,100,101,102,103,104,105,106,107,108,109,110,111,112,113,114,115,116,117,118,119,120,121,122,123,124,125,126,127,128,129,130,131,132,133,134,135,136,137,138,139,140,141,142,143,144,145,146,147,148,149,150,151,152,153,154,155,156,157,158,159,160,161,162,163,164,165,166,167,168,169,170,171,172,173,174,175,176,177,178,179,180,181,182,183,184,185,186,187,188,189,190,191,192,193,194,195,196,197,198,199,200,201,202,203,204,205,206,207,208,209,210,211,212,213,214,215,216,217,218,219,220,221,222,223,224,225,226,227,228,229,230,231,232,233,234,235,236,237,238,239,240,241,242,243,244,245,246,247,248,249,250,251,252,253,254,255,256,257,258,259,260,261,262,263,264,265,266,267,268,269,270,271,272,273,274,275,276,277,278,279,280,281,282,283,284,285,286,287,288,289,290,291,292,293,294,295,296,297,298,299,300,301,302,303,304,305,306,307,308,309,310,311,312,313,314,315,316,317,318,319,320,321,322,323,324,325,326,327,328,329,330,331,332,333,334,335,336,337,338,339,340,341,342,343,344,345,346,347,348,349,350,351,352,353,354,355,356,357,358,359,360,361,362,363,364,365,366,367,368,369,370,371,372,373,374,375,376,377,378,379,380,381,382,383,384,385,386,387,388,389,390,391,392,393,394,395,396,397,398,399,400,401,402,403,404,405,406,407,408,409,410,411,412,413,414,415,416,417,418,419,420,421,422,423,424,425,426,427,428,429,430,431,432,433,434,435,436,437,438,439,440,441,442,443,444,445,446,447,448,449,450,451,452,453,454,455,456,457,458,459,460,461,462,463,464,465,466,467,468,469,470,471,472,473,474,475,476,477,478,479,480,481,482,483,484,485,486,487,488,489,490,491,492,493,494,495,496,497,498,499,500,501,502,503,504,505,506,507,508,509,510,511,512,513,514,515,516,517,518,519,520,521,522,523,524,525,526,527,528,529,530,531,532,533,534,535,536,537,538,539,540,541,542,543,544,545,546,547,548,549,550,551,552,553,554,555,556,557,558,559,560,561,562,563,564,565,566,567,568,569,570,571,572,573,574,575,576,577,578,579,580,581,582,583,584,585,586,587,588,589,590,591,592,593,594,595,596,597,598,599,600,601,602,603,604,605,606,607,608,609,610,611,612,613,614,615,616,617,618,619,620,621,622,623,624,625,626,627,628,629,630,631,632,633,634,635,636,637,638,639,640,641,642,643,644,645,646,647,648,649,650,651,652,653,654,655,656,657,658,659,660,661,662,663,664,665,666,667,668,669,670,671,672,673,674,675,676,677,678,679,680,681,682,683,684,685,686,687,688,689,690,691,692,693,694,695,696,697,698,699,700,701,702,703,704,705,706,707,708,709,710,711,712,713,714,715,716,717,718,719,720,721,722,723,724,725,726,727,728,729,730,731,732,733,734,735,736,737,738,739,740,741,742,743,744,745,746,747,748,749,750,751,752,753,754,755,756,757,758,759,760,761,762,763,764,765,766,767,768,769,770,771,772,773,774,775,776,777,778,779,780,781,782,783,784,785,786,787,788,789,790,791,792,793,794,795,796,797,798,799,800,801,802,803,804,805,806,807,808,809,810,811,812,813,814,815,816,817,818,819,820,821,822,823,824,825,826,827,828,829,830,831,832,833,834,835,836,837,838,839,840,841,842,843,844,845,846,847,848,849,850,851,852,853,854,855,856,857,858,859,860,861,862,863,864,865,866,867,868,869,870,871,872,873,874,875,876,877,878,879,880,881,882,883,884,885,886,887,888,889,890,891,892,893,894,895,896,897,898,899,900,901,902,903,904,905,906,907,908,909,910,911,912,913,914,915,916,917,918,919,920,921,922,923,924,925,926,927,928,929,930,931,932,933,934,935,936,937,938,939,940,941,942,943,944,945,946,947,948,949,950,951,952,953,954,955,956,957,958,959,960,961,962,963,964,965,966,967,968,969,970,971,972,973,974,975,976,977,978,979,980,981,982,983,984,985,986,987,988,989,990,991,992,993,994,995,996,997,998,999,1000}

What will genetics reveal?

RVC

Epidemiology supports a strong genetic risk in canine diabetes

Diabetes mellitus in dogs attending UK primary-care practices: frequency, risk factors and survival

Angela M. Haines¹, Gillian G. O'Neill², Lucy J. Edwards³, Sarah B. Church⁴, Ellen M. Corbett⁵ and David C. Brodbelt⁶

Table 2 Descriptive and univariable logistic regression results

Variable	Cases (No. n = 420)	Controls (No. n = 618)	Odds Ratio	95% CI*	P-value	Category	Variable	P-value
Predicted status								0.001
Controlled	80 (23.5%)	236 (37.7%)	Baseline					
Uncontrolled	317 (77.5%)	391 (62.3%)	1.15	1.00-1.32	0.001			
Breed: ≤ 10 dogs and/or ≤ 5 case dogs								< 0.001
Controlled	88 (21.3%)	254 (40.9%)	Baseline					
Uncontrolled	317 (77.5%)	391 (62.3%)	1.15	1.00-1.32	0.001			
Border Terrier	9 (2.2%)	10 (1.6%)	4.67	2.25-10.76	<0.001			
Cairn Terrier	5 (1.2%)	3 (0.4%)	3.86	0.90-16.52	0.068			
Miniature Schnauzer	10 (2.4%)	6 (0.9%)	3.86	1.36-10.36	0.011			
West Highland White Terrier	53 (12.6%)	32 (5.2%)	3.84	2.32-6.36	<0.001			
Yorkshire Terrier	30 (7.2%)	23 (3.7%)	3.02	1.66-5.50	<0.001			
Welsh Corgi	11 (2.7%)	10 (1.6%)	1.70	0.75-3.85	0.203			
Cocker Spaniel	16 (3.8%)	22 (3.5%)	1.69	0.84-3.36	0.138			
Jack Russell Terrier	32 (7.6%)	31 (5.0%)	1.45	0.88-2.42	0.148			
Border Collie	13 (3.1%)	37 (5.9%)	1.31	0.60-2.70	0.460			
Cocker Spaniel	13 (3.1%)	26 (4.2%)	1.16	0.57-2.36	0.684			
Parson Russell Terrier	71 (17.1%)	269 (43.3%)	0.90	0.61-1.33	0.597			
Labrador Retriever	25 (6.1%)	76 (12.2%)	0.76	0.46-1.28	0.344			
Irish Wolfhound	4 (1.0%)	13 (2.1%)	0.71	0.23-2.25	0.564			
Staffordshire Bull Terrier	12 (2.9%)	56 (9.0%)	0.30	0.25-0.37	0.001			
Springer Spaniel - unspecified	2 (0.5%)	12 (1.9%)	0.39	0.08-1.76	0.219			
Golden Retriever	1 (0.2%)	9 (1.4%)	0.26	0.03-2.06	0.201			
Boxer	1 (0.2%)	11 (1.8%)	0.21	0.03-1.66	0.159			

FIGURE 1 Diabetes mellitus in dogs attending UK primary-care practices: frequency, risk factors and survival

FIGURE 2 Diabetes mellitus in dogs attending UK primary-care practices: frequency, risk factors and survival

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FIGURE 99 Diabetes mellitus in dogs attending UK primary-care practices: frequency, risk factors and survival

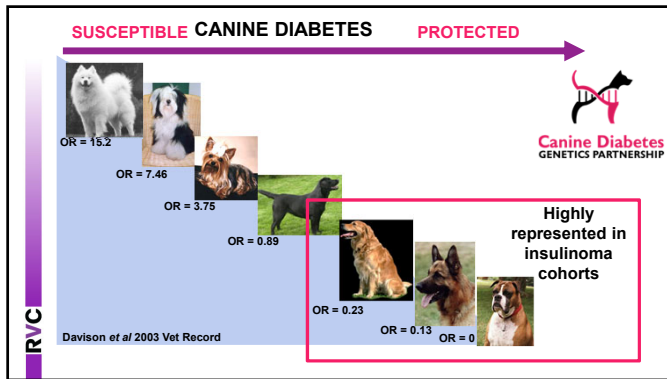
FIGURE 100 Diabetes mellitus in dogs attending UK primary-care practices: frequency, risk factors and survival

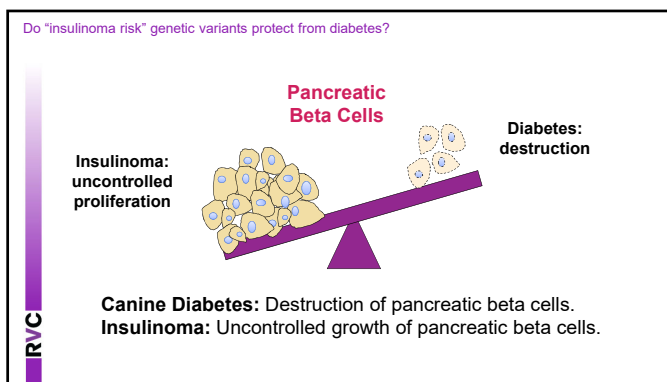
Canine Diabetes GENETICS PARTNERSHIP

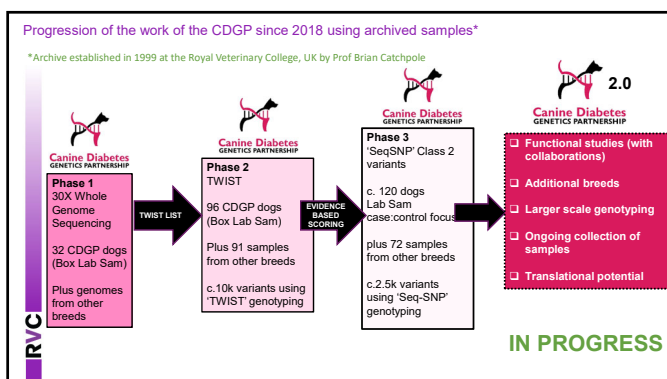
The Canine Diabetes Genetics Partnership is an interdisciplinary consortium formed to discover and understand genetic variants contributing to canine pancreatic beta cell health and disease

Petplan CHARITABLE TRUST
Dechra Veterinary Products

RVC







What attributes give a genetic variant (SNP) a 'high' evidence score for further evaluation?

- **Statistics:**
 - High frequency in high diabetes risk breed(s)
 - Distinct in high diabetes risk breed(s)
 - Low frequency or absence in low diabetes risk breed(s) and insulinomas
 - P value of case / control analysis within a breed
 - P value of case / control analysis in the whole cohort
- **Plausible link to disease**
 - Tier 1: direct link to disease
 - Tier 2: gene / pathway relevant to disease
- **Impact**
 - Coding sequence
 - Predicted effect on gene function or splicing

CLUSTER COMPUTING



How can genetic variants contribute to risk in a complex disease?

1. High-frequency & fixed variants in a breed

- providing an overall increased susceptibility of the whole breed to the disease (may or may not be exclusive to the breed)

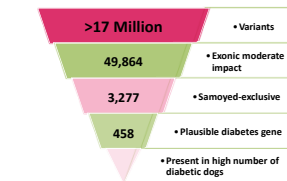
2. Variants in a subset of individuals with the breed

- modifying susceptibility to the disease within a breed (i.e. seen in more cases than controls within a breed)

3. Low-frequency or unique variants

- modifying risk of the disease in individual dogs or cats

SAMOYED DIABETES

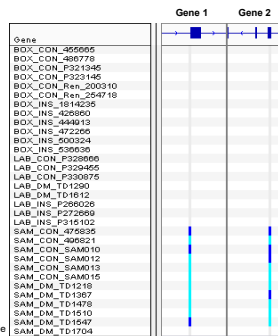


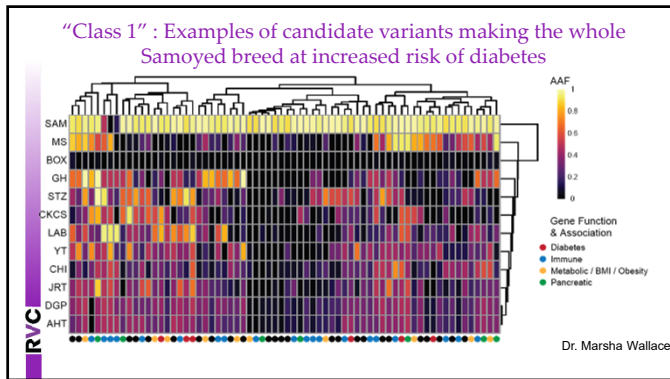
Gene 1

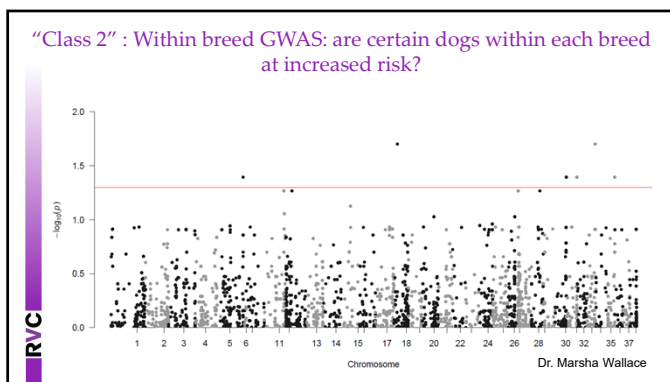
- Missense (p.Val→Gly)
- regulation of insulin receptor signalling pathway

Gene 2

- Missense (p.Arg→Lys); (p.Gly→Arg)
- response to insulin







THE LANCET
Diabetes & Endocrinology

Log in

COMMENT | VOLUME 6, ISSUE 6, P504-505, AUGUST 01, 2018

Precision medicine in *KCNJ11* permanent neonatal diabetes

Siri Arma W Greeley • Lisa R Letourneau • Louis M Philpott

Open Access • Published: June 04, 2018 • DOI: [https://doi.org/10.1016/S2213-8587\(18\)30138-4](https://doi.org/10.1016/S2213-8587(18)30138-4)

Neonatal diabetes mellitus – assumed to be “type 1” autoimmune and insulin dependent

Poor or erratic response to injectable insulin therapy

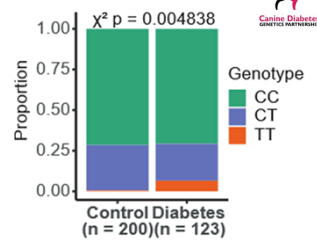
Clinical whole genome sequencing (WGS)

Excellent clinical response to oral sulphonylureas

Mutation in *KCNJ11* identified (a potassium channel involved in insulin release in pancreatic beta cells)

Class 3 (Monogenic diabetes) variant in the same gene (KCNJ11) in Labrador retrievers

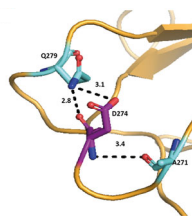
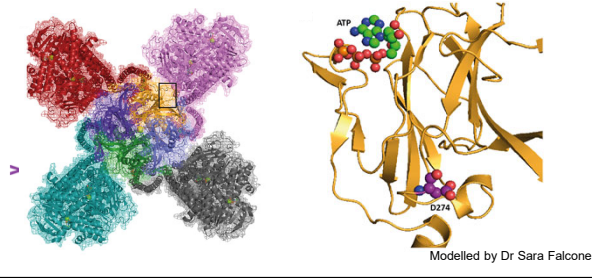
- 200 non-diabetic Labrador retrievers – **1 homozygote**
- 123 Labrador retrievers with diabetes (adult onset) – **8 homozygotes**
- Not (yet) seen in any other breeds



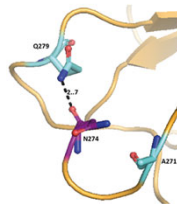
These data are supportive of possible monogenic recessive inheritance of DM associated with the mutation rs851344999 (D274N) in *KCNJ11* in the Labrador retriever

Dr. Marsha Wallace
Manuscript in preparation
Patent submitted

KCNJ11 encodes a subunit of the K_{ATP} channel expressed in beta cells, and involved in the electrophysiological process of insulin release



Reference:
D (Aspartic Acid) at position 274



Diabetes-associated:
N (Asparagine) at position 274

Would diabetic dogs with this mutation benefit from sulphonylurea drugs like humans?

Can we prevent diabetes occurring in these dogs?

Modelled by Dr Sara Falcone

SUMMARY

- **Canine Diabetes Mellitus**
 - Genetic basis of human diabetes
 - Investigating canine diabetes genetics
- **Feline Hyperthyroidism**
 - Can we predict which cats will become hyperthyroid?
 - Acquired genetic mutations in the feline thyroid gland
- **Canine insulinoma**
 - Using single-cell transcriptomics to understand a rare cancer

scientific reports

OPEN Transcriptomic analysis reveals a critical role for activating $G_s\alpha$ mutations in spontaneous feline hyperthyroidism

Thomas K. Hiron^{1,2}, Joana Aguiar^{1,3}, Jonathan M. Williams⁴, Sara Falcone⁵, Paul A. Norman¹, Jonathan Elliott¹, Robert C. Fowkes^{1,2}, Harriet M. Syme⁶ & Lucy J. Davidson^{1,102}



10% of cats over the age of 10 years are hyperthyroid

Hyperthyroidism is less common in color-point breed cats

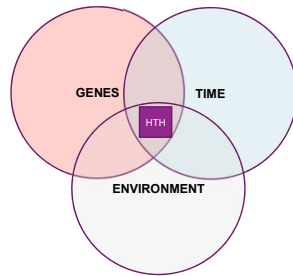
- Can we use clinical genetics to predict which cats will get hyperthyroidism?
- Can we use genetics or transcriptomics to understand the pathogenesis of hyperthyroidism so we can design more targeted treatments?

Multifactorial additive risks in development of feline HTH

What do we mean by "genetics"?

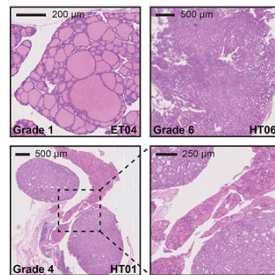
- ✓ Inherited (germline) variation
- AND
- ✓ Acquired (somatic) mutations within individual cells in the thyroid

NEW TREATMENT TARGETS



What is actually happening in the feline thyroid?

- Feline hyperthyroidism shares several histopathological and clinical similarities with human toxic multinodular goitre (TMG).
- The major risk factors for TMG, besides advanced age and female sex, are iodine deficiency and **acquired mutations** in the genes encoding TSHR or Gsα.

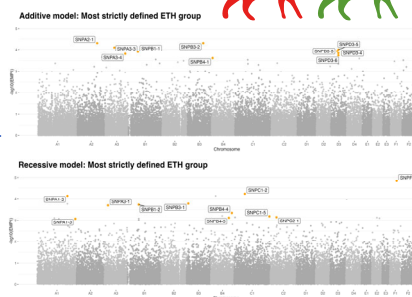


Feline euthyroid (ET) and hyperthyroid (HT) thyroid tissue: Hiron et al 2024

Discovery GWAS results: Case-control



- Using a SNP chip
- A total of 71 variants associated with feline hyperthyroidism (nominal significance) were identified.
- 15 variants were repeatedly associated with hyperthyroidism across different association tests.



Paul Norman PhD student – manuscript in preparation

ONGOING WORK

The most promising variants have been prioritised, using a bespoke bioinformatics pipeline for “**evidence scoring**”.

DNA has been extracted from archived blood samples from a further 144 cases and 263 controls from the RVC geriatric cat clinic, for **targeted sequencing** at 673 selected variants, using a technology called Seq-SNP

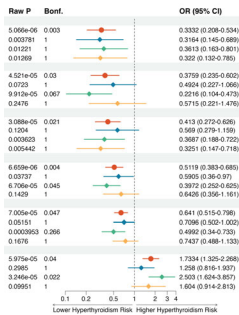
Analysis is ongoing in the form of a meta-analysis from the original SNP-chip GWAS data and the new targeted sequencing data – more data to be published 2025-2026



NEW TREATMENT TARGETS?

Paul Norman PhD student

Forest Plot of Genome-wide Significant Variants Associated with Hyperthyroidism
Analysis group: ● Meta-analysis ● Well phenotyped controls ● F99L controls ● UK controls



UNPUBLISHED PRELIMINARY ANALYSIS:

Six feline variants are significantly associated with feline hyperthyroidism risk in the meta-analysis

Could these eventually form the basis of a clinical test?

Manuscript in preparation

Paul Norman
Marsha Wallace

Multifactorial additive risks in development of feline HTH

What do we mean by “genetics”?

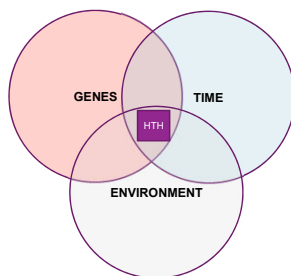
✓ Inherited (germline) variation

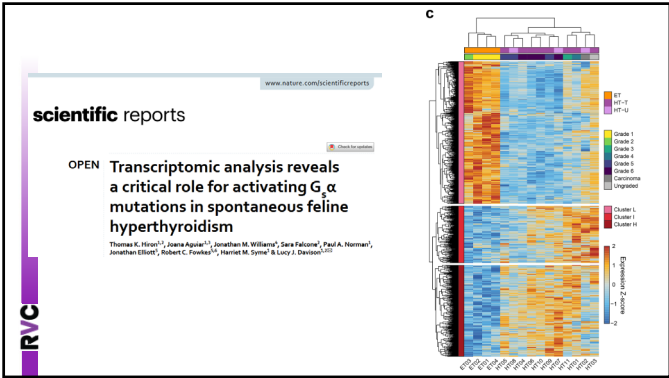
AND

✓ Acquired (somatic) mutations within individual cells in the thyroid



NEW TREATMENT TARGETS



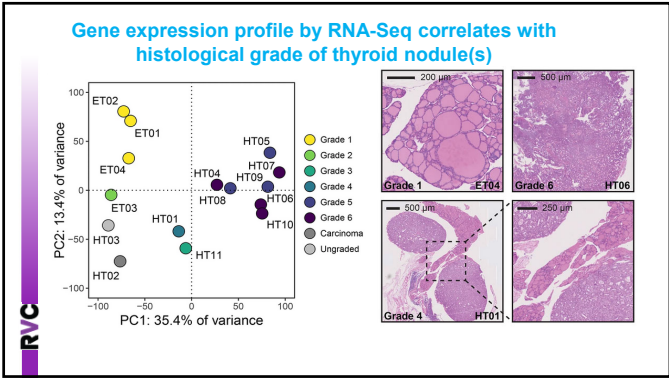


Study design (Hiron et al 2024)

Thyroid tissue histopathology and RNA sequencing

Sample ID	Reason for collection	Age at collection	Sex	Breed	T4 at diagnosis (nmol/L)	T4 at collection (nmol/L)	TSH (ng/mL)	Thyroid status	Treatment status	Treatment duration (days)
ET01	euthanasia	15y 3m	MN	DLH	-	18.8	0.05	euthyroid	-	-
ET02	euthanasia	9y 6m	FN	DSH	-	7.3	0.06	euthyroid	-	-
ET03	euthanasia	17y 5m	MN	DSH	-	35.9	0.07	euthyroid	-	-
ET04	euthanasia	15y 2m	FN	DSH	-	20	0.07	euthyroid	-	-
HT01	euthanasia	15y 6m	MN	DSH	77.6	86.6	-	hyperthyroid	treated	1539
HT02	euthanasia	20y	FN	DLH	82.5	91.2	-	hyperthyroid	untreated	-
HT03	euthanasia	15y 1m	FE	DSH	251	107	-	hyperthyroid	treated	77
HT04	thyroidectomy	10y 8m	FN	DSH	299	4.1	-	hyperthyroid	treated	88
HT05	thyroidectomy	9y 2m	MN	DSH	261	-	-	hyperthyroid	treated	31
HT06	thyroidectomy	12y 7m	FN	DSH	138	-	-	hyperthyroid	treated	48
HT07	euthanasia	12y 7m	FN	DSH	237	-	-	hyperthyroid	untreated	-
HT08	thyroidectomy	14y 2m	FN	DSH	170	-	-	hyperthyroid	untreated	-
HT09	euthanasia	21y 8m	MN	DLH	43.9	15.7	<0.03	hyperthyroid	treated	1343
HT10	thyroidectomy	12y 11m	MN	DSH	>300	-	-	hyperthyroid	treated	21
HT11	euthanasia	15y	FN	DSH	169	4	-	hyperthyroid	treated	263

Joana Aguiar PhD student
Dr Tom Hiron



Which genes might be involved?

Looking for **acquired** mutations in thyroid nodules, that might explain why thyroid hormone is still made and secreted in hyperthyroid cats, even when TSH is low

Hyperthyroid cats have low or no TSH

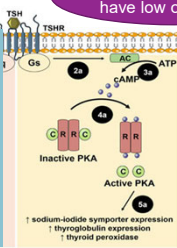


Figure from: Pereira, Sofia & Lobato, Carolina & Monteiro, Mariana. (2020). Cell Signaling Within Endocrine Glands: Thyroid, Parathyroids and Adrenal Glands. 10.1007/978-3-030-44436-5_3.

Acquired mutations in feline hyperthyroidism: The TSH receptor (*TSHR*)

- Watson *et al.* reported mutations in exon 10 of *TSHR*, encoding the transmembrane and intracellular domains, in thyroid nodules from 28/50 HT cats
- We saw this mutation, and some additional mutations in *TSHR* – but in both hyperthyroid and euthyroid cats

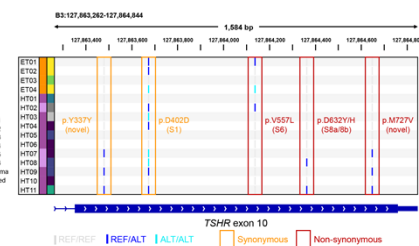
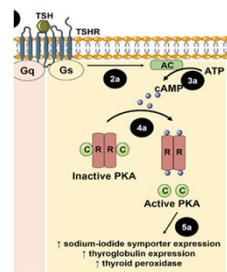
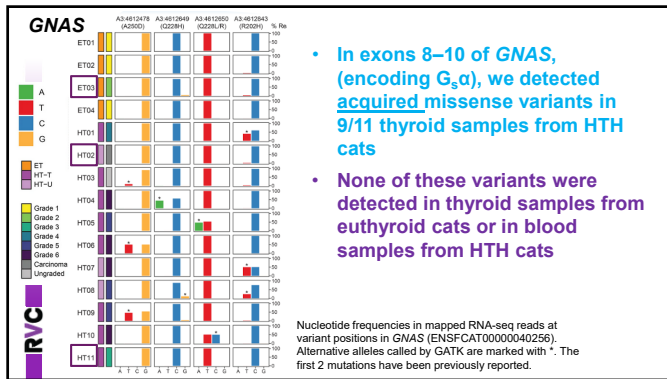


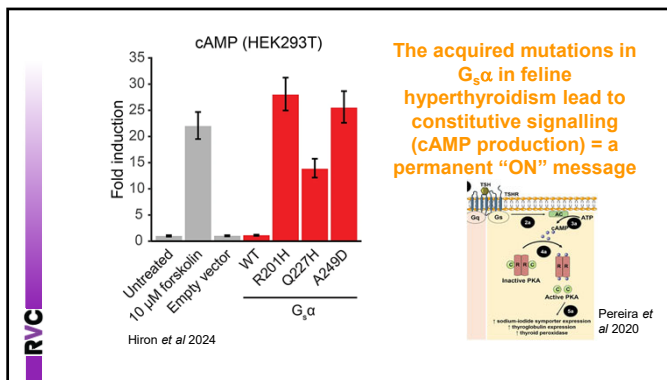
Figure: Genotypes of *TSHR* variants detected in RNA-seq reads from HT and ET samples. Genomic coordinates are for the feline reference genome (see Methods). Variants are labeled with the resulting amino acid substitution in *TSHR*, and with the variant ID from Watson *et al.* where applicable.

- GNAS* is the gene encoding the alpha subunit of Gs (*Gsa*), which is **critical in downstream signalling from TSHR**
- Peeters *et al.* detected *Gsa* mutations in 4/10 HTH cats at two different sites.
- We also detected these two mutations in hyperthyroid cats in our RNA-Seq data
- We also found a third, **novel mutation in *GNAS* in thyroid tissue** from cats with hyperthyroidism.



Pereira et al 2020

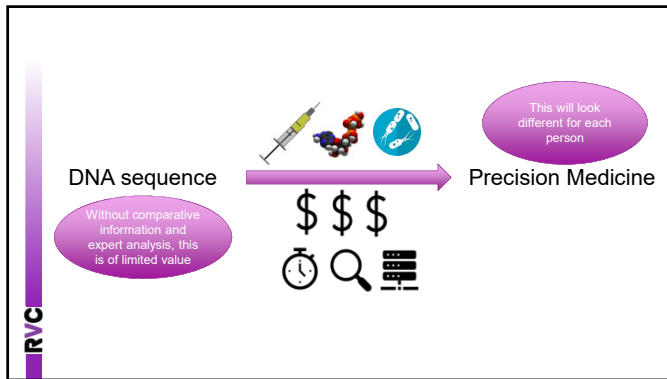




WHAT DOES THIS MEAN?

- ☑ The $G_s\alpha$ variants detected in feline thyroids in this study are acquired mutations
- ☑ These mutations result in constitutive $G_s\alpha$ activation and elevated intracellular cAMP
- ☑ This makes the mutations a likely causal factor in feline hyperthyroidism

The question remains:
Why and how do mutations arise in feline thyroid glands?



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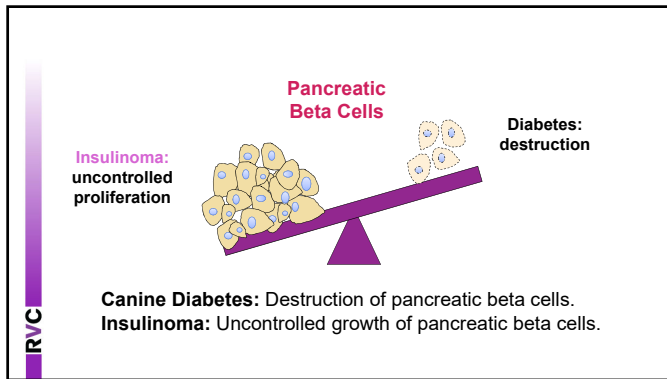
Wallace et al. *Veterinary Oncology* (2025) 2:13
<https://doi.org/10.1186/s44556-025-00026-3>

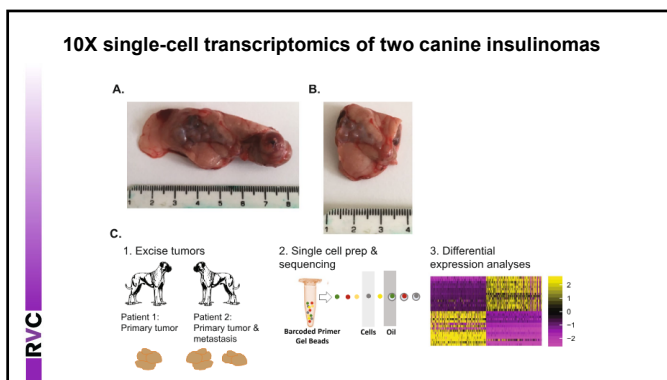
Veterinary Oncology

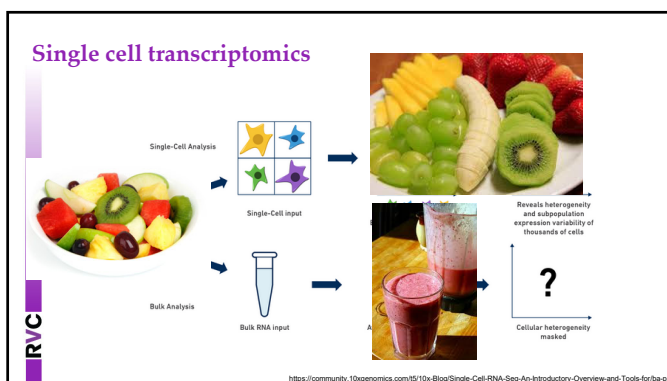
RESEARCH Open Access

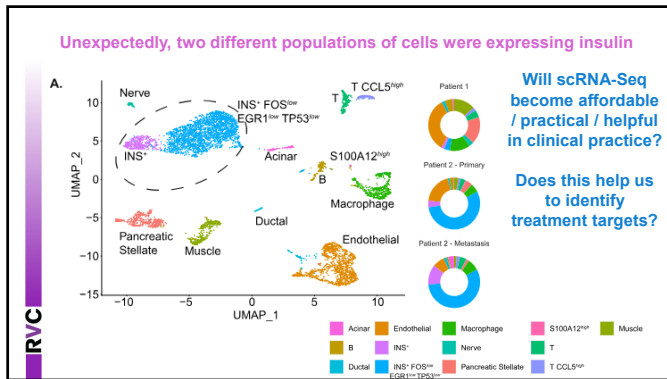
Single-cell transcriptomic analysis of canine insulinoma reveals distinct sub-populations of insulin-expressing cancer cells

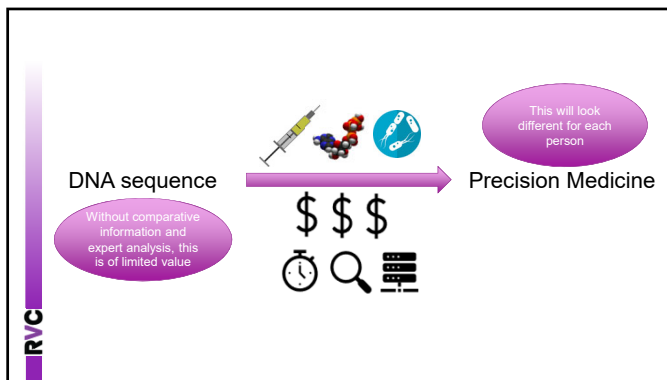
M. D. Wallace^{1,2}, M. E. Herrtage³, R. Goselow¹, L. Owen¹, L. Rutherford¹, K. Hughes¹, A. Denyer⁴, B. Catchpole⁴, C. A. O'Callaghan¹ and L. J. Davison^{1,2*}











Clinical Genomics in Endocrinology

THANK YOU FOR YOUR ATTENTION – QUESTIONS?

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2025 Conti Symposium on Veterinary Continuing Education
Current Concepts and Controversies in Clinical Genomics
