

Introduction

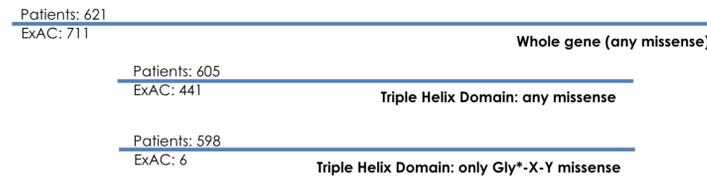
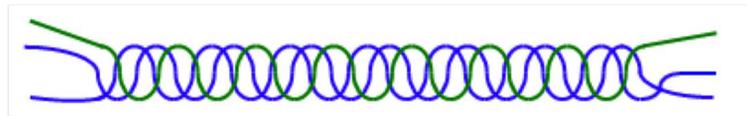
Amino acid residues that are critical for proper protein structure or function are intolerant of variation, and this understanding is key in the accurate clinical variant classification of novel variants. However, clear guidelines for objectively identifying a residue or region as “critical” do not exist. Therefore, we developed an approach to critical residue classification that takes into account background variation, the distribution of clinically observed variants, and knowledge of protein structure. We intend to incorporate this new category of evidence into Sherlock, our evidence-based system for variant interpretation. We selected COL3A1 as the paradigm for protein domain evaluation. COL3A1 is a well-characterized gene associated with vascular Ehlers-Danlos syndrome (vEDS). Most of the COL3A1 protein comprises a triple-helix (TH) domain encoded by 343 Gly-X-Y (GXY) repetitions, and Gly residues therein are crucial to protein structure and macromolecular assembly. Missense genetic variation at these residues is significantly lower than background variation affecting other residues and regions of COL3A1, and vEDS cohorts show an enrichment for variants at TH Gly residues. Together, these observations provide a method for identifying critical residues. We have applied this analysis to all the collagen genes associated with human disease and to missense variants in cysteine residues in known protein domains in fibrillin-1 (FBN1).

Methods

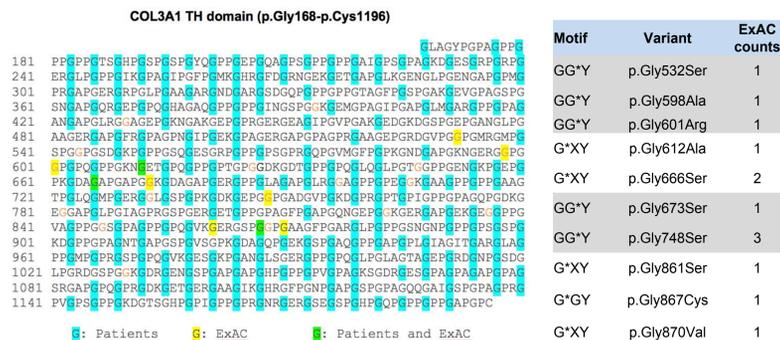
We identified all reported missense variants in the COL3A1 protein and analyzed their location and frequency in both patients and the general population. Patients were collated from the Ehlers Danlos Syndrome Variant Database (<https://eds.gene.le.ac.uk>), and the ExAC database was used for the general population. We first calculated the ratio of patients with any COL3A1 missense variant to the number of individuals (“controls”) in ExAC with any COL3A1 missense variant (i.e., whole gene: patients/controls). Variants with a frequency greater than 0.1% in ExAC were excluded from this analysis. We then calculated the patient/control ratio both for any missense variants and for Gly missense variants (Gly*-X-Y) within the TH domain. Finally, enrichment of patients with vEDS and a TH Gly missense variant was calculated as a ratio of patients/controls with TH Gly missense variant over patients/controls with any COL3A1 missense variant and denoted as the key residue ratio. Similar analyses were performed for TH Gly variants in other collagen genes associated with human disease and Cys missense variants in FBN1. For the determination of the GXY motif, we used data from COL1A1, COL1A2, COL2A1, COL3A1, COL4A1, COL6A1, COL6A2, COL6A3, and COL7A1.

Results

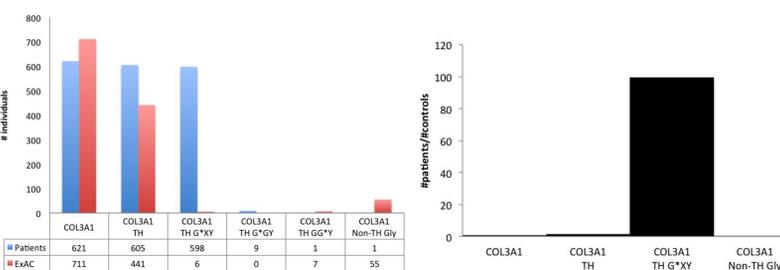
Glycine variants in the COL3A1 TH are enriched in vEDS patients.



Gly variants are distributed throughout the TH in the Gly*-X-Y motif.

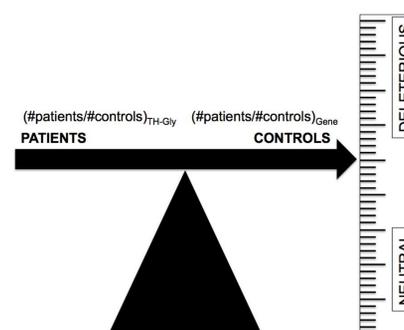


Patient enrichment is confined to the first position of the Gly*-X-Y motif.



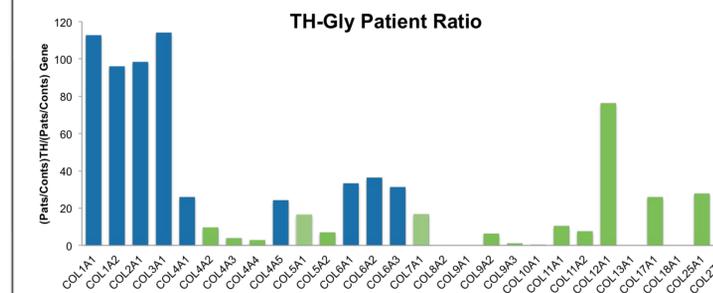
Establishing a metric to estimate the likelihood of a COL3A1 TH Gly missense variant to be pathogenic and comparing it with other collagens

TH	EXAC EXCEPTIONS		ALL GENE MISSENSE			ALL TH MISSENSE			TH G*XY			RATIO
	3-7	>7	Patients	Controls	Pats/Conts	Patients	ExAC	Pats/Conts	Patients	Controls	Pats/Conts	
p.Gly168-p.Cys1196	0	0	621	711	0.873	605	441	1.37	598	6	99.7	114.1



This analysis can be extended to other collagens.

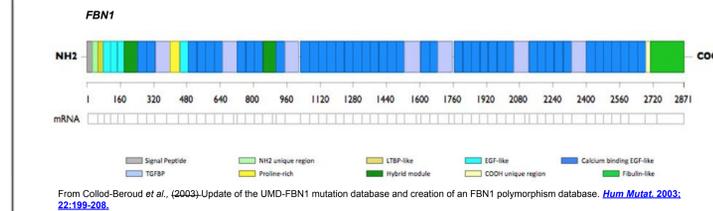
Protein	TH	EXAC EXCEPTIONS		ALL GENE MISSENSE			TH G*XY			RATIO
		3-7	>7	Patients	Controls	Pats/Conts	Patients	Controls	Pats/Conts	
COL1A1	p.Gly179-p.Pro1192	0	0	892	913	0.978	771	7	110.1	112.7
COL3A1	p.Gly168-p.Cys1196	0	0	621	711	0.873	598	6	99.7	114.1
COL5A2	p.Gly203-p.Leu1229	2	2	14	1234	0.011	7	88	0.08	7.01
COL10A1	p.Gly289-p.Ala756	2	2	22	696	0.032	1	119	0.008	0.27



Can this analysis be extended to infer severity?

	N-FLANKING Glycines			C-FLANKING Gs		
	GXG*XY	GGY G*XY	GY G*XY	G*GY	G*GG	G*YG
Patients	14	25	1	17	4	11
Controls	4	2	1	3	0	4
Pats/Conts	3.5	12.5	1	5.7	NA	2.75
Ratio	0.2	0.73	0.067	0.33	NA	0.16

This analysis can be extended to other proteins and key residues.



Category 1	Cys forming								
	All missense	FBN1	Domain	Non-domain	EGF-L	TGFBR	Hybrid	4-Cys	Cys disrupting
Patients	1773	243	241	2	340	69	14	18	805
Controls	1568	34	13	21	10	3	0	0	3
Pats/Conts	1.13	7.06	18.5	0.1	14	23	NA	NA	268
	1	6.2	16.2	0.09	NA	20.4	NA	NA	257

Conclusions

We used the COL3A1 as a paradigm for evaluating the clinical significance of key amino acid residues in essential protein domains. Missense variants involving the Gly residues of the TH are highly enriched in patients with vEDS. By comparing the frequency of missense variants in COL3A1 in patients and controls, we were able to establish the Gly*-X-Y motif as an essential domain and Gly* as a key residue in this domain. Importantly, a missense change of the Gly in this motif is very likely associated with disease, whereas a missense variant of the X-Y position is not associated with disease. We also developed an objective metric (#patients/controls with missense variants in a specific domain vs. #patients with missense variants throughout the entire protein) for comparing the likelihood that missense variants in key residues are associated with disease across paralogs and related proteins.