

Genetic diagnostics

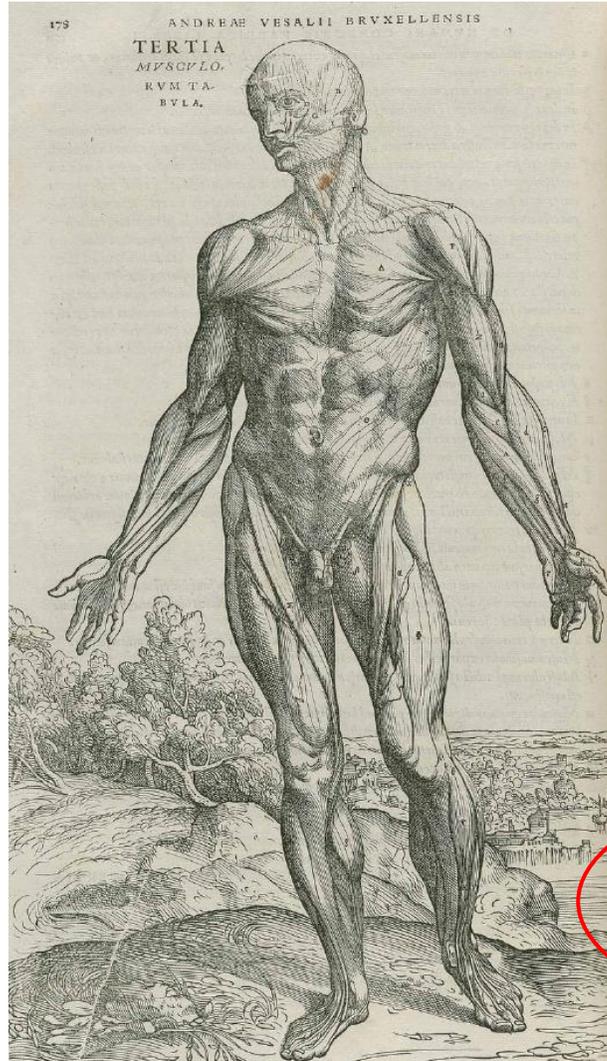
Marina Noris

ESPN RESEARCH CONFERENCE
Florence, 12-14 March 2026



- **The presenter received grant/research support and/or honoraria from commercial entities:**
 - *Alexion (research grant and honoraria for educational talks)*
 - *Novartis (research grant and advisory board)*
 - *Sobi (research grant and advisory board)*
 - *Gemini (research and travel grants)*
 - *Eleva (research grant)*

DISEASES ASSOCIATED WITH COMPLEMENT DYSREGULATION



Stroke

Alzheimer's diseases

Age-related macular degeneration

Asthma

Myocardial infarction

Crohn's disease

Rheumatoid arthritis

Membranous nephropathy

IgA nephropathy

SLE

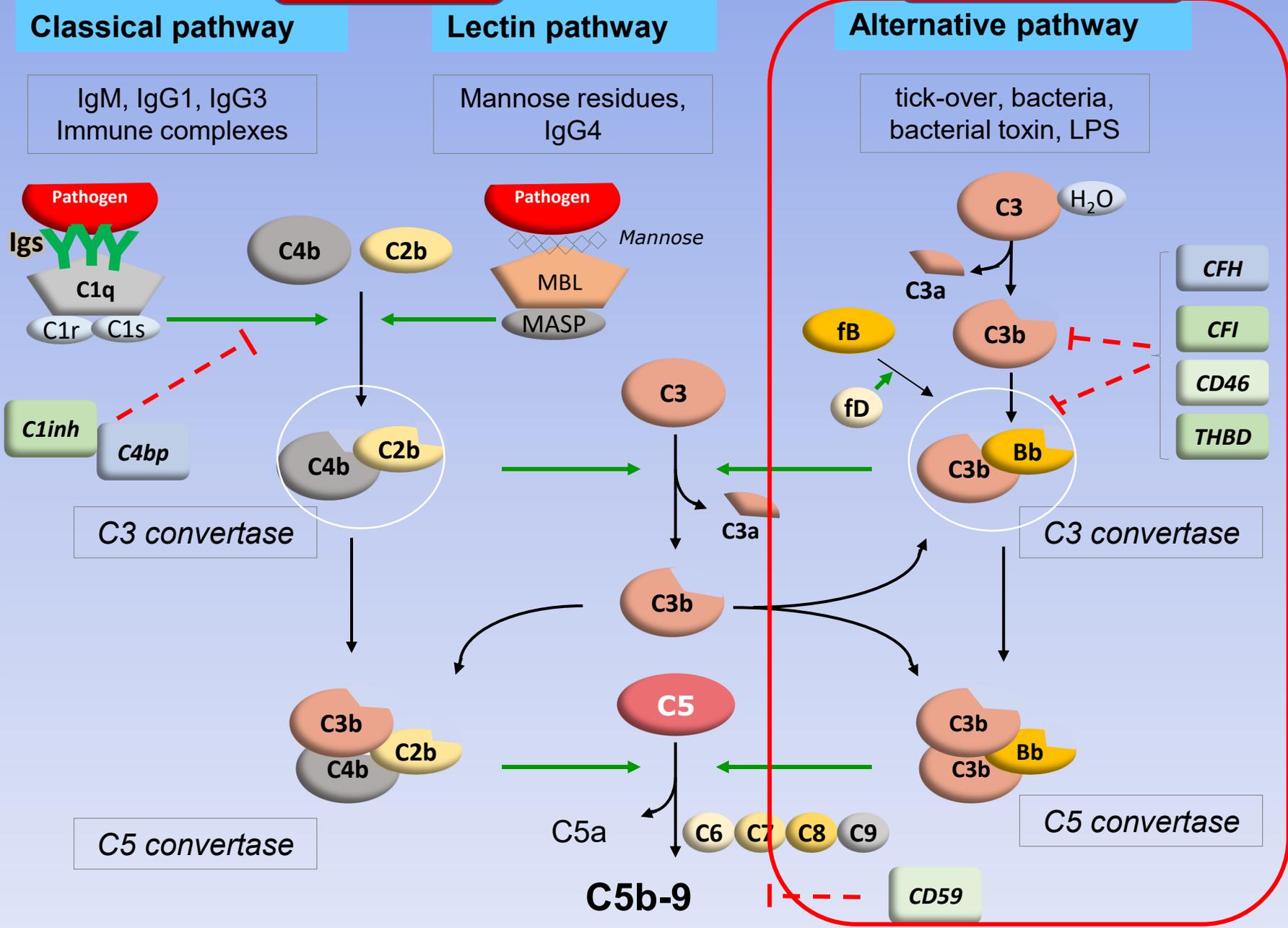
ANCA vasculitis

Hemolytic uremic syndrome

MPGN /C3 glomerulopathy

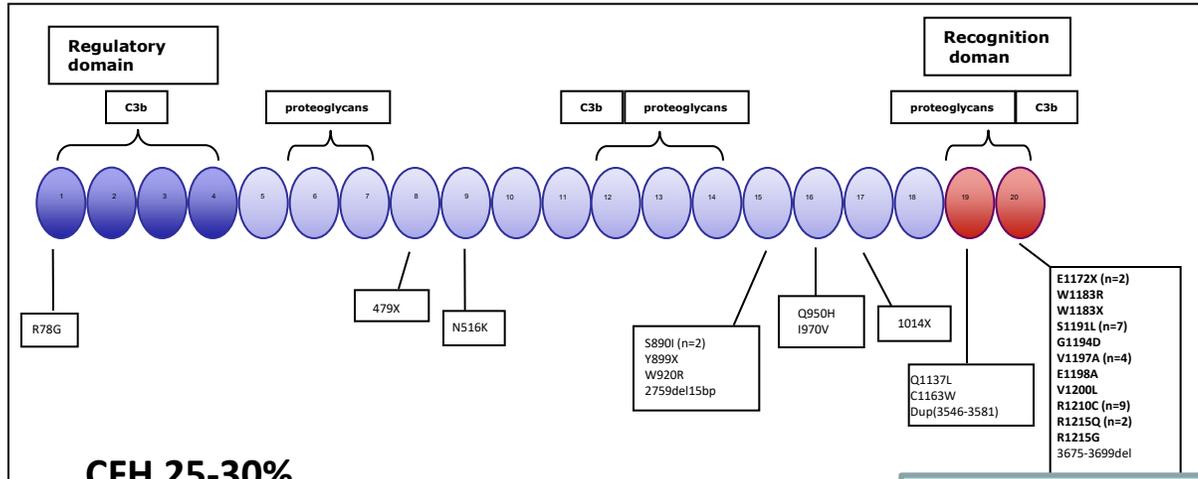
Active after trigger

Low grade constitutively active

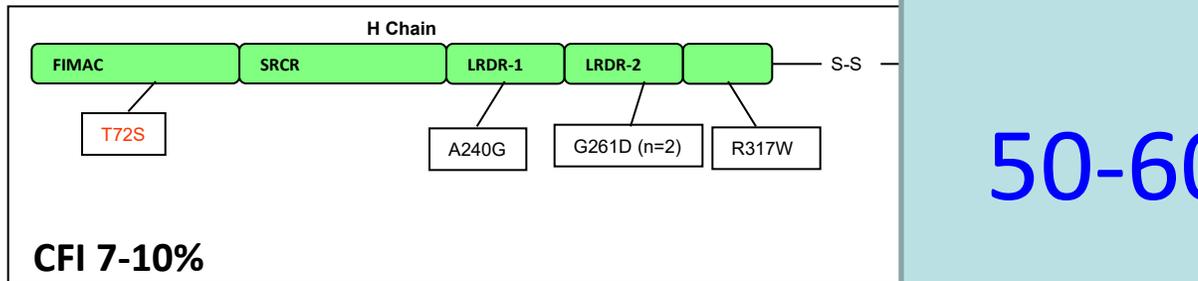


COMPLEMENT GENE VARIANTS IN aHUS PATIENTS

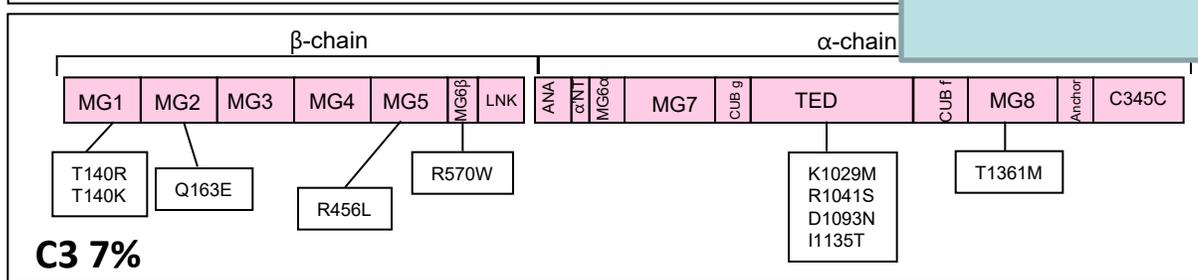
Published data



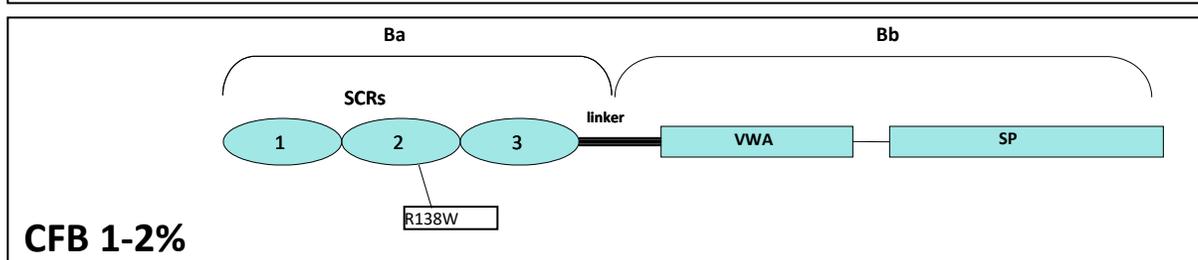
CFH 25-30%



CFI 7-10%

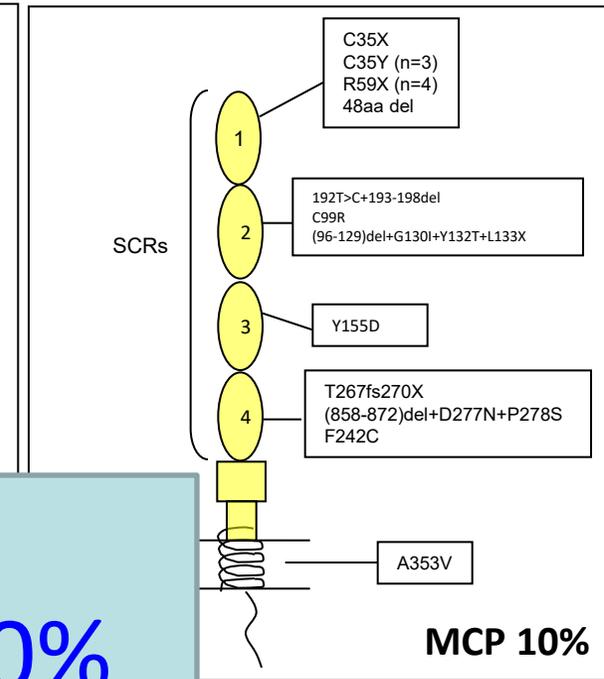


C3 7%

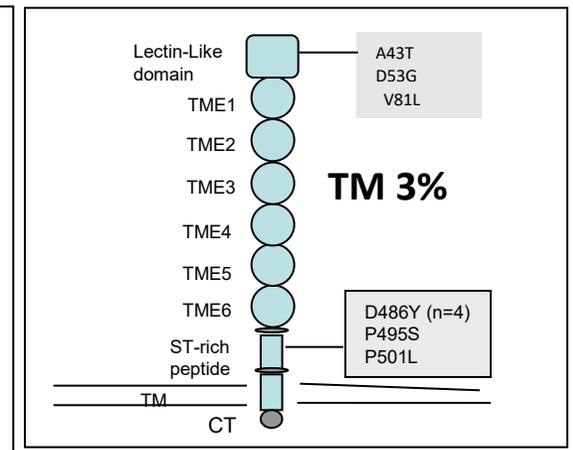


CFB 1-2%

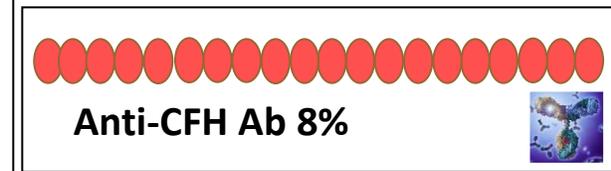
50-60%



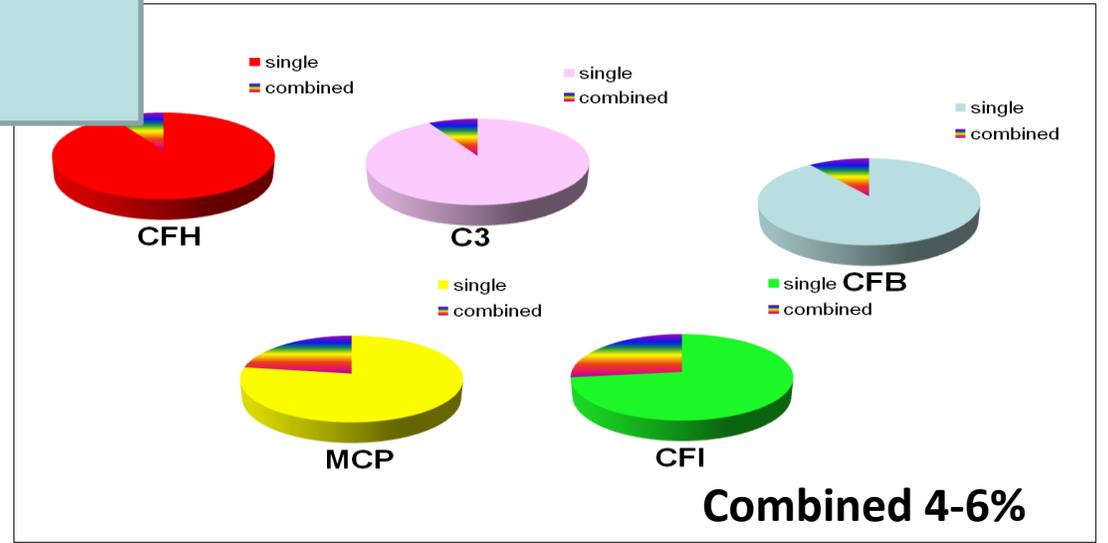
MCP 10%



TM 3%

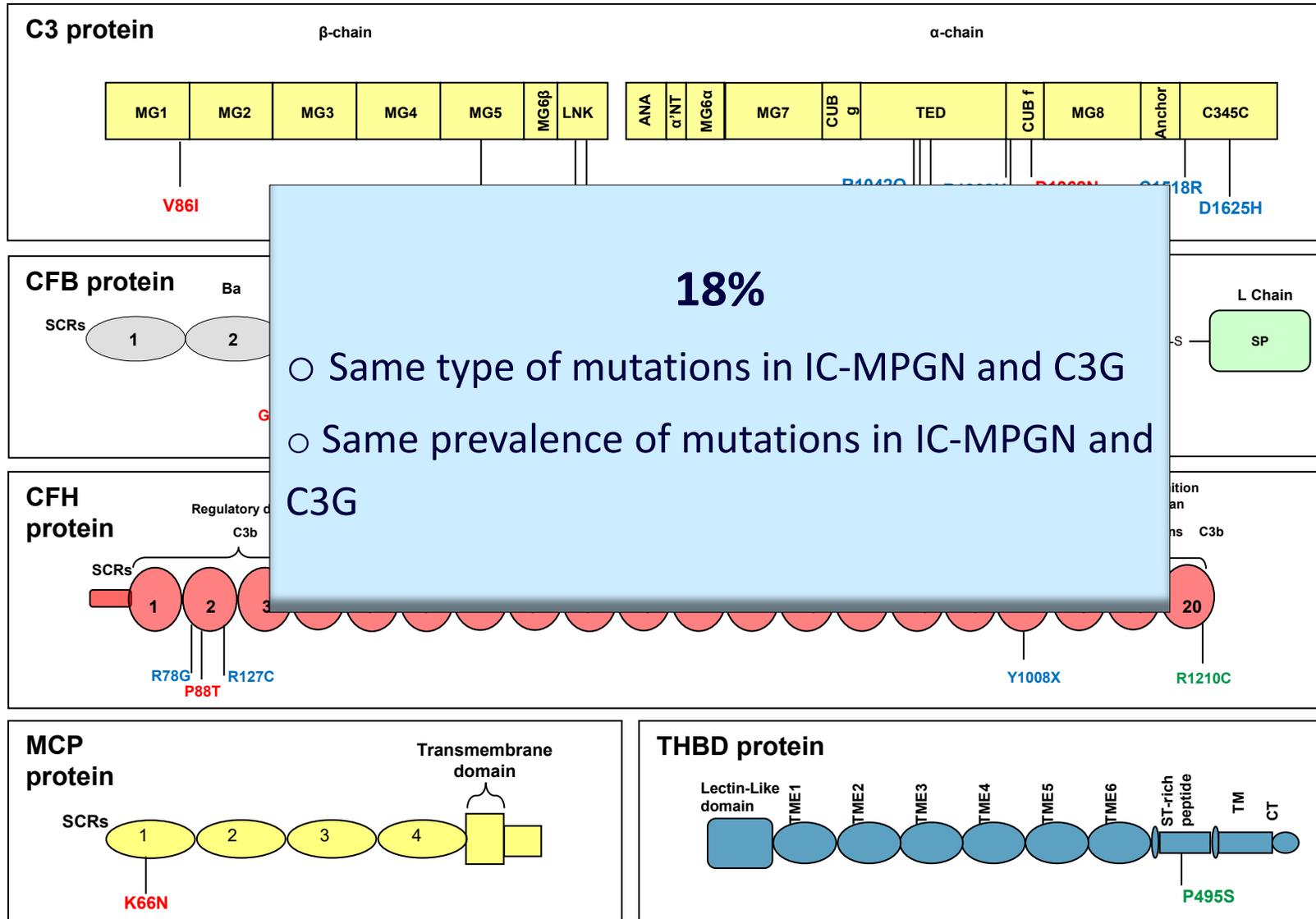


Anti-CFH Ab 8%



Combined 4-6%

COMPLEMENT GENE MUTATIONS IN IC-MPGN C3GN DDD PATIENTS

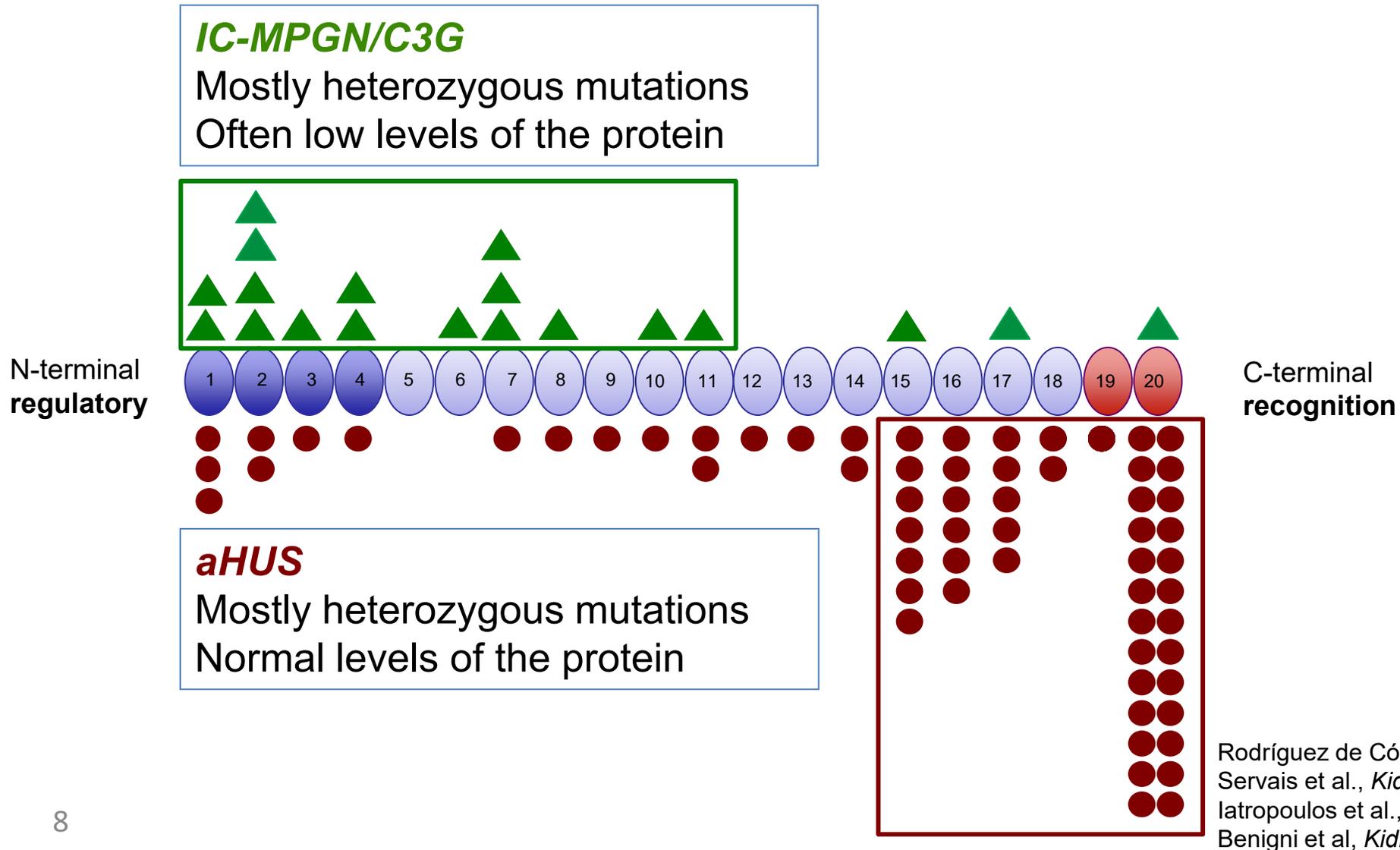


Iatropoulos et al, *Mol Immunol*, 2016

	C3G/IC-MPGN	aHUS
<i>C3</i>	9%	8%
<i>MCP</i>	1%	10%
<i>CFI</i>	2%	7%
<i>CFB</i>	1%	/
<i>CFH</i>	4%	25%
<i>THBD</i>	1%	3%
LPVs (total)	18%	53%

LPV: Likely Pathogenic Variant

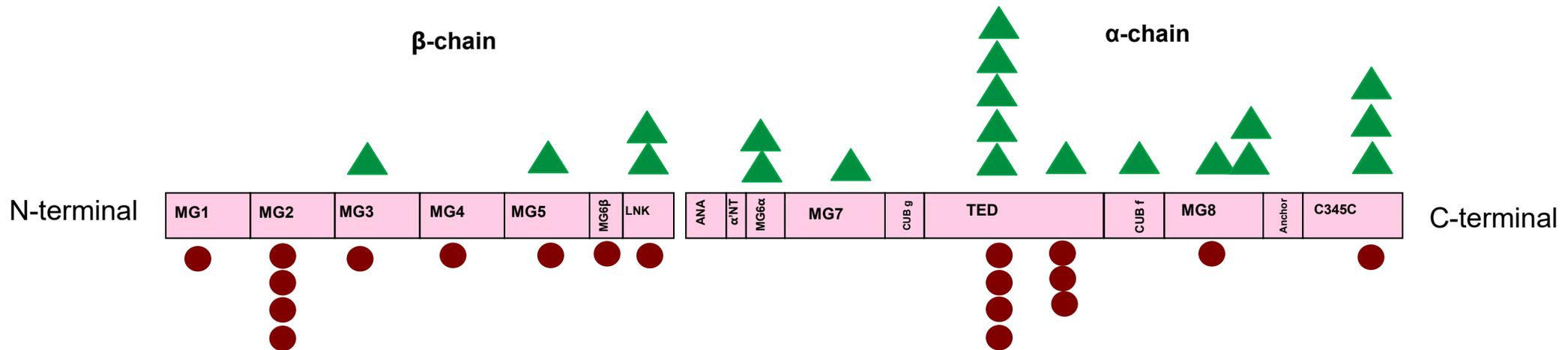
CFH GENE MUTATIONS IN IC-MPGN/C3G AND aHUS



C3 GENE ABNORMALITIES IN IC-MPGN/C3G AND aHUS

IC-MPGN/C3G

All heterozygous mutations
Cluster in the alpha chain

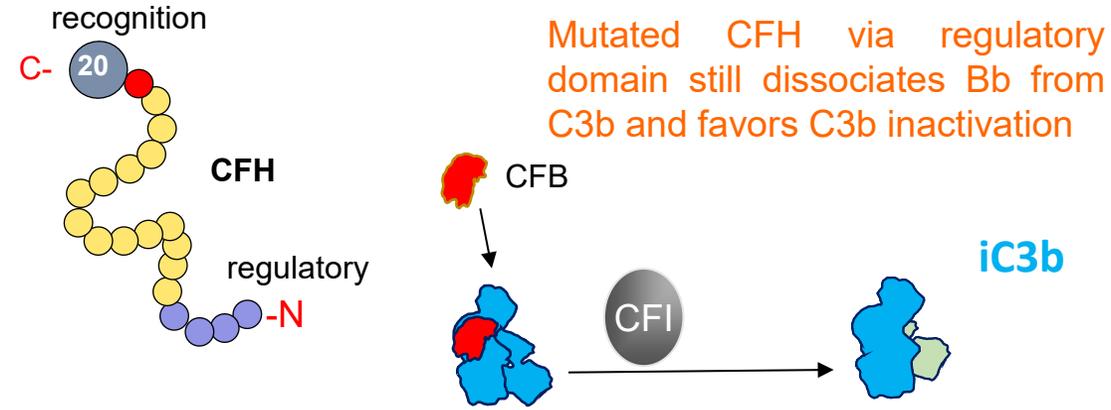


aHUS

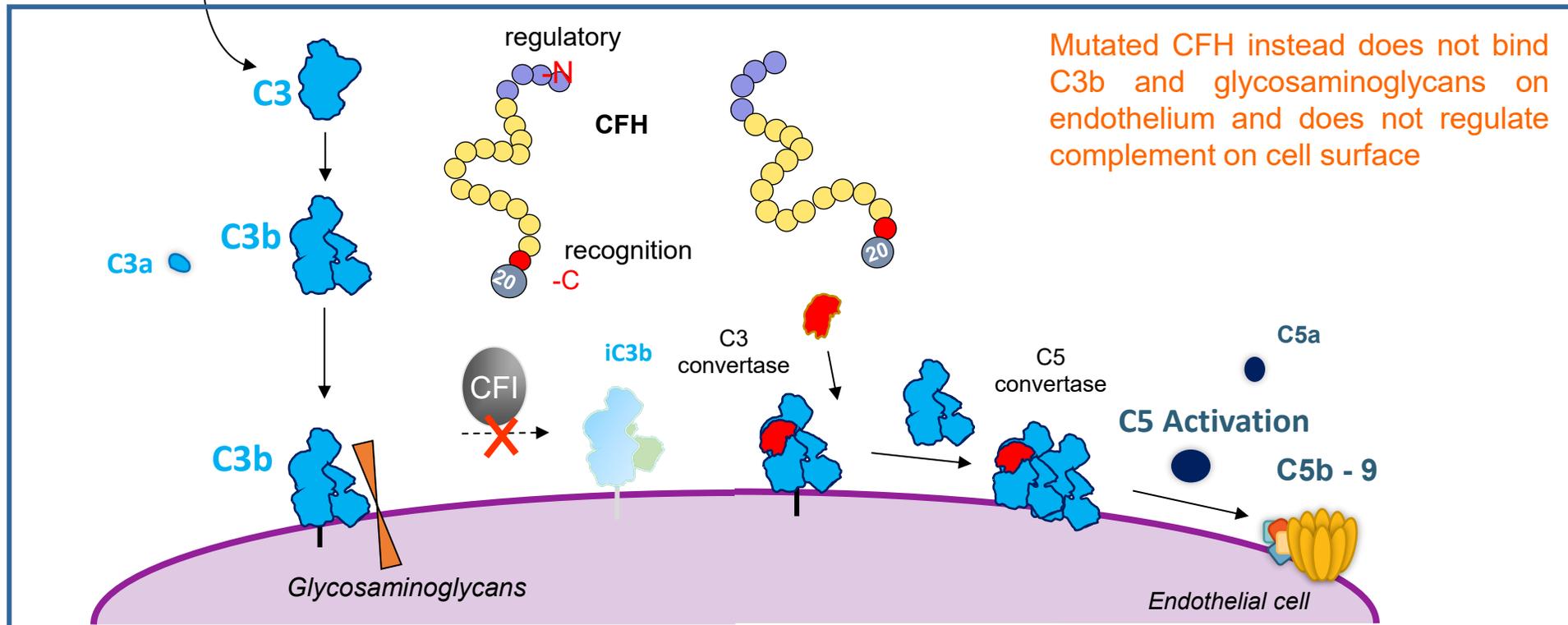
All heterozygous mutations
More broadly distributed

Scharamm et al., *Blood* 2015
Servais et al., *Kidney Int*, 2012
Iatropoulos et al., *JASN*, 2018
Benigni et al., *Kidney Int*, 2025

SOLID-PHASE RESTRICTED COMPLEMENT ACTIVATION IN aHUS



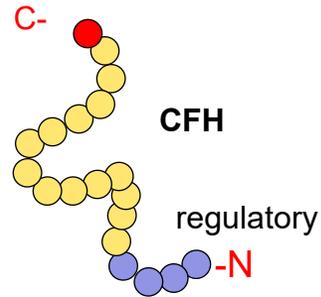
Alternative pathway activation
(spontaneous hydrolysis,
bacteria, viruses)



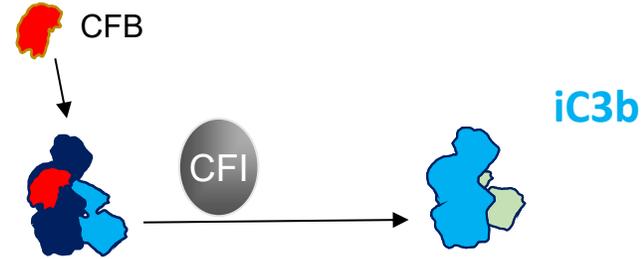
Manuelian et al., *JCI*, 2003
 Sanchez-Corral et al., *Am J Hum Gen*, 2002
 Heinen et al., *JASN*, 2007
 Noris et al, *Blood* 2014
 Merinero HM et al, *Kidney Int* 2018

C3 GAIN OF FUNCTION VARIANTS IN aHUS

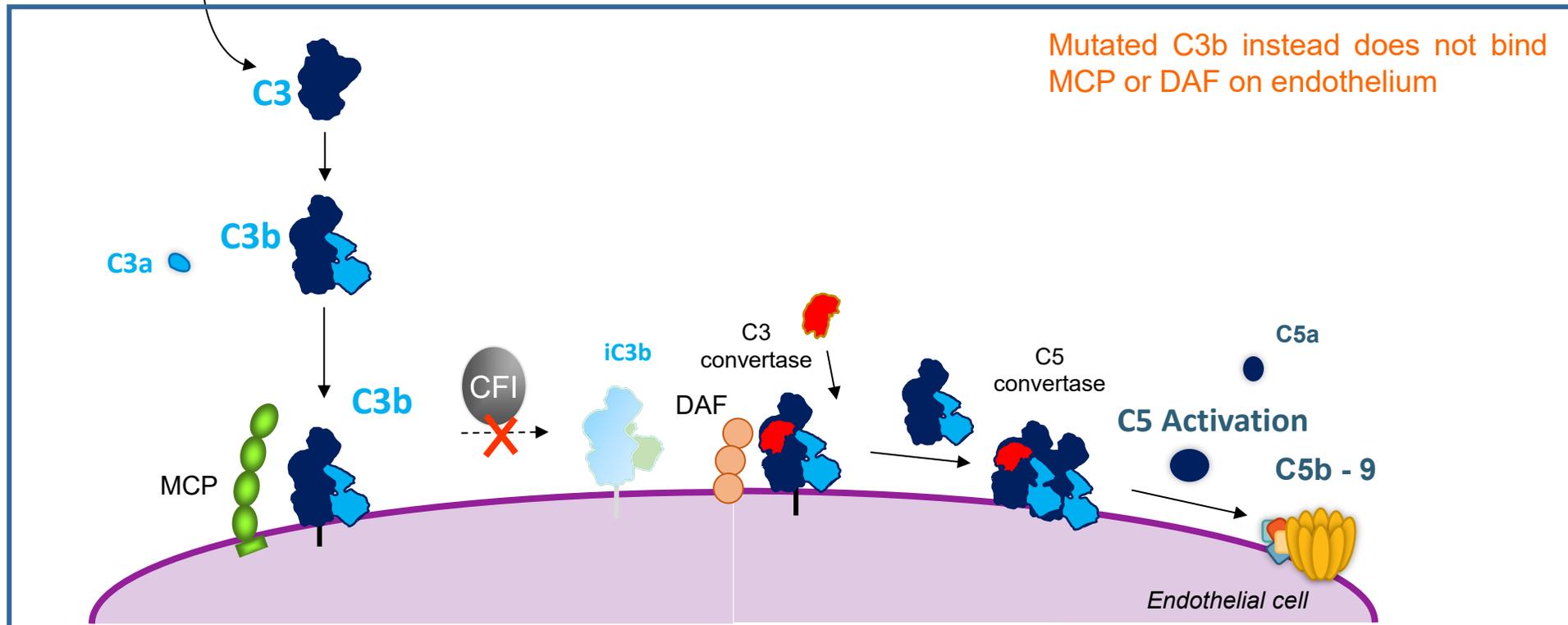
recognition



CFH still recognizes mutated C3, dissociates Bb from C3b and favors C3b inactivation

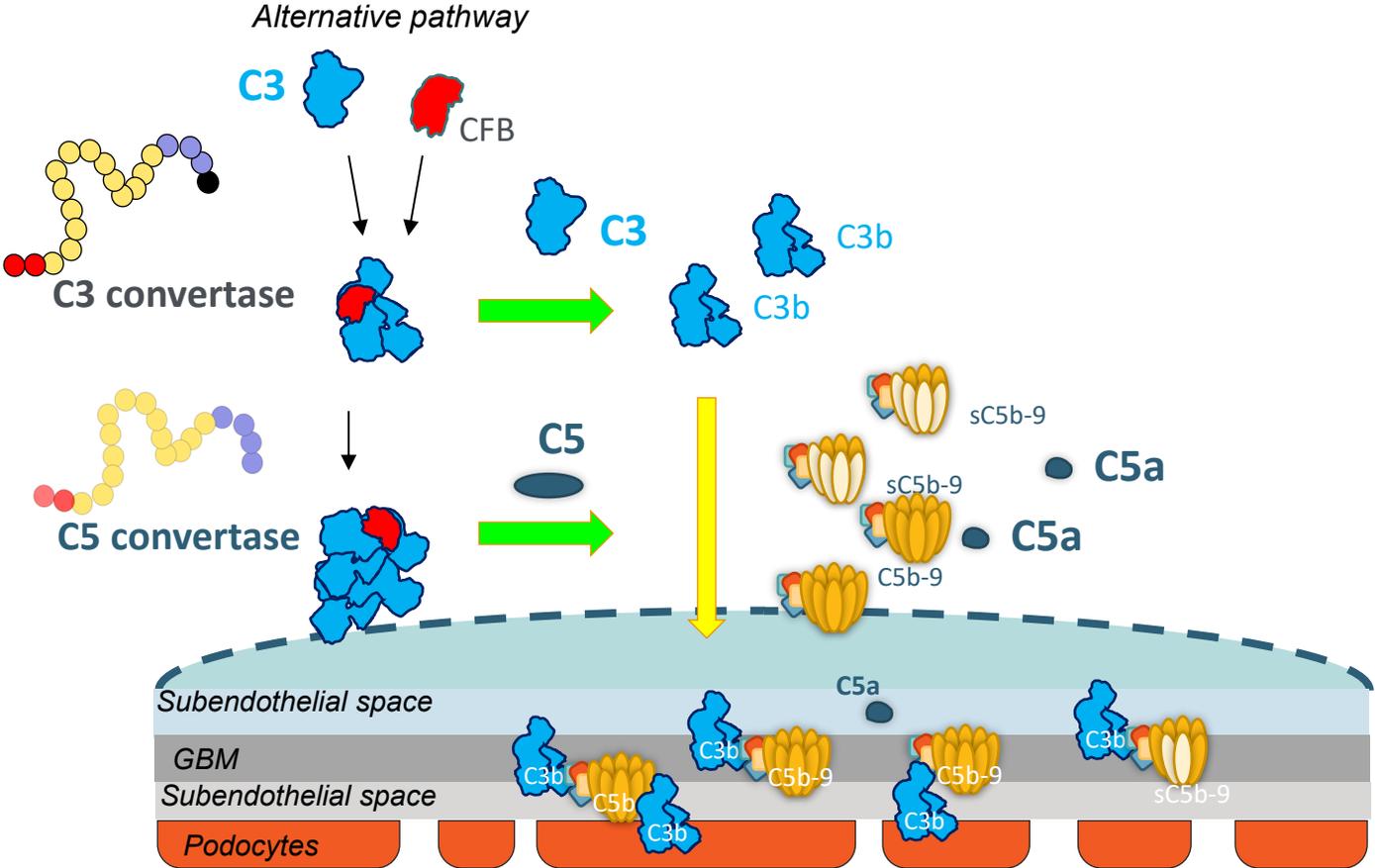


Alternative pathway activation
(spontaneous hydrolysis,
bacteria, viruses)

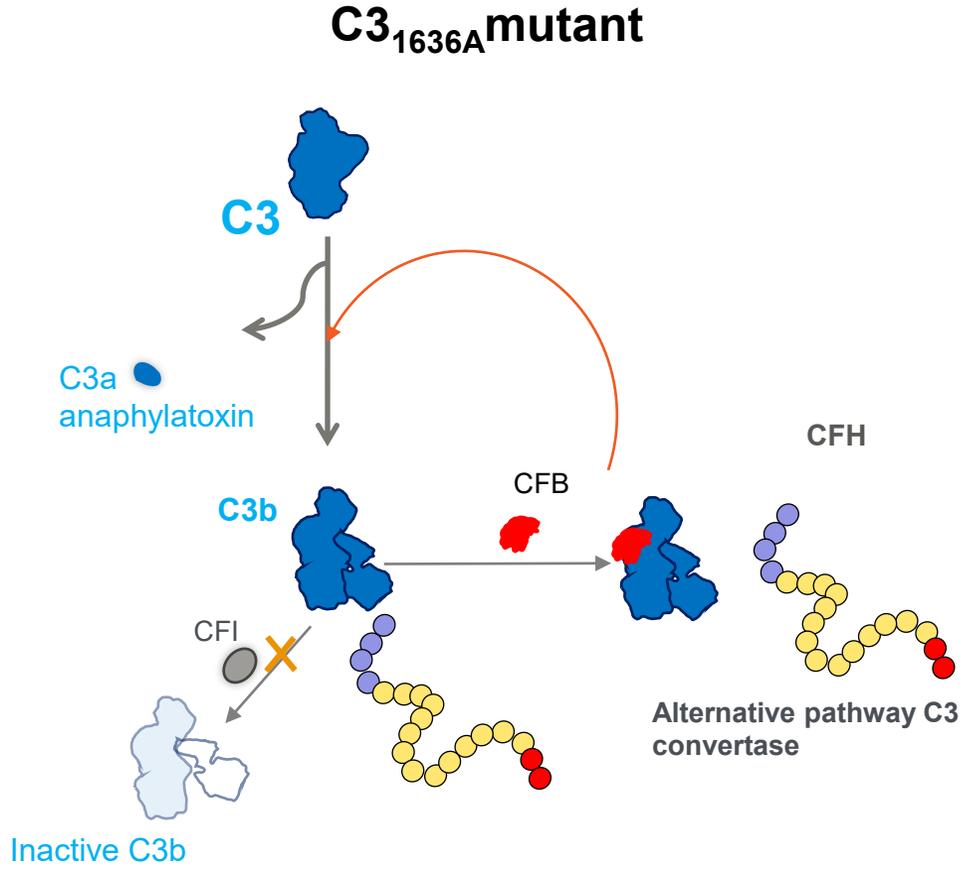


Manuelian et al., *JCI*, 2003
 Sanchez-Corral et al., *Am J Hum Gen*, 2002
 Heinen et al., *JASN*, 2007
 Noris et al, *Blood* 2014
 Merinero HM et al, *Kidney Int* 2018

FLUID-PHASE COMPLEMENT ACTIVATION IN C3G/IC-MPGN



C3 variants in C3G and primary IC-MPGN cause alternative pathway dysregulation



C3_{1636A} mutant

C3_{734T} mutant

- Interactions with FB and FH normal
- Less efficiently cleaved by FI in presence of FH

- Decreased binding to CR1, a complement regulator highly expressed on podocytes

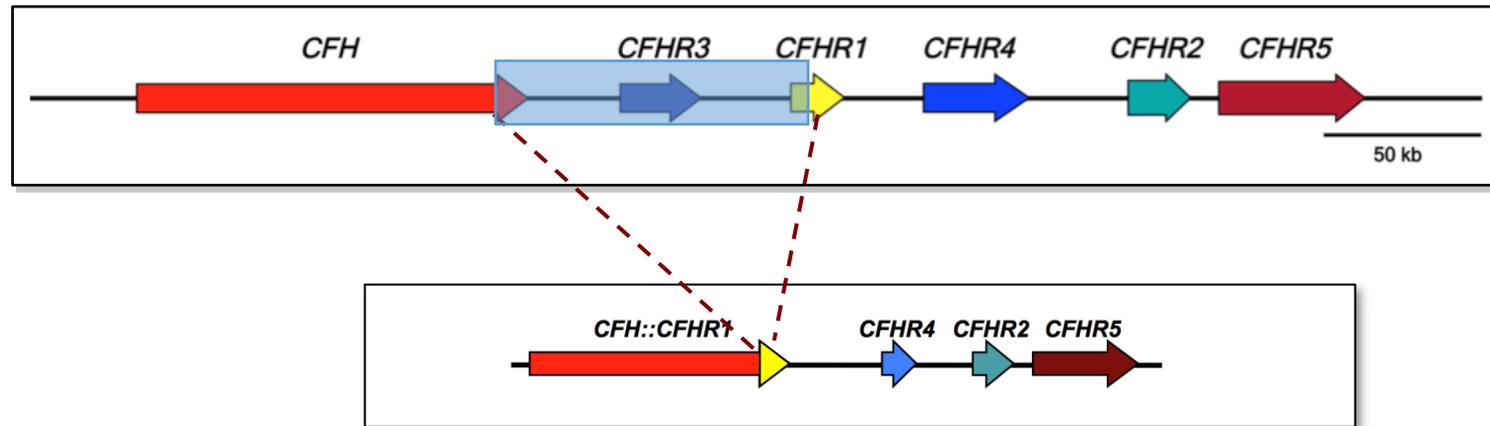
Fluid phase

Solid phase

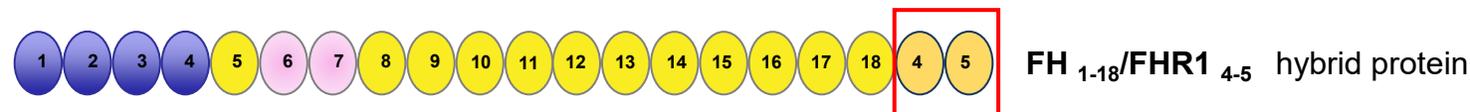
Fluid phase dysregulation

Cell surface dysregulation on podocytes

HIGH HOMOLOGY IN THE REGULATORS OF COMPLEMENT GENE CLUSTER



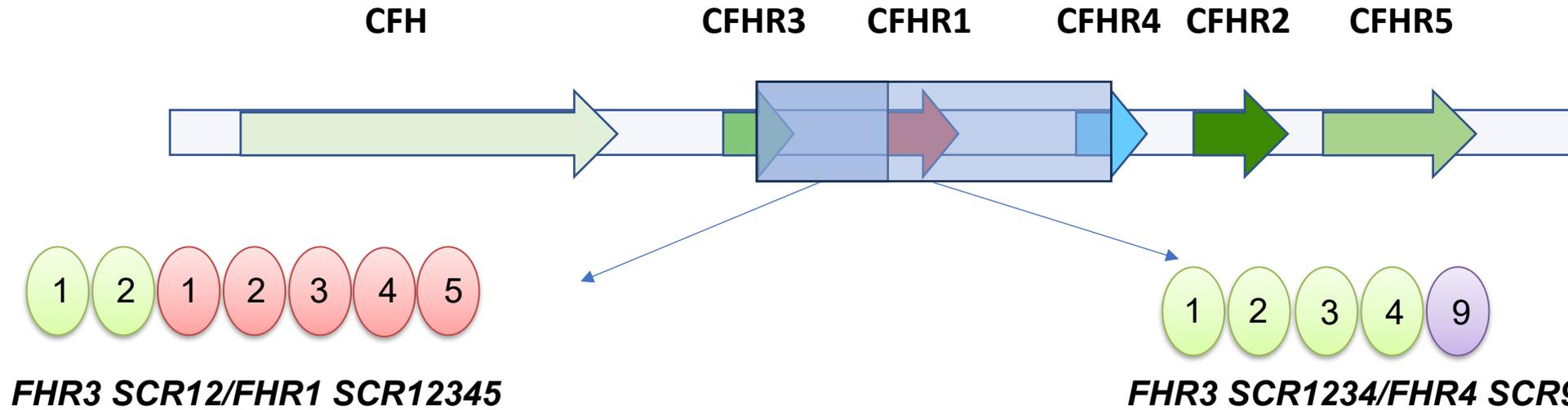
Venables et al., *Plos Medicine*, 2006



- High degree of sequence identity between the gene for factor H and the genes for the five factor H-related proteins (CFHR1 to 5) which favors non-allelic homologous recombinations giving rise to hybrid genes.
- Copy number variation assays (CGH arrays or MLPA) are required to detect hybrid genes
- Identified in 20/258 aHUS patients (8%).

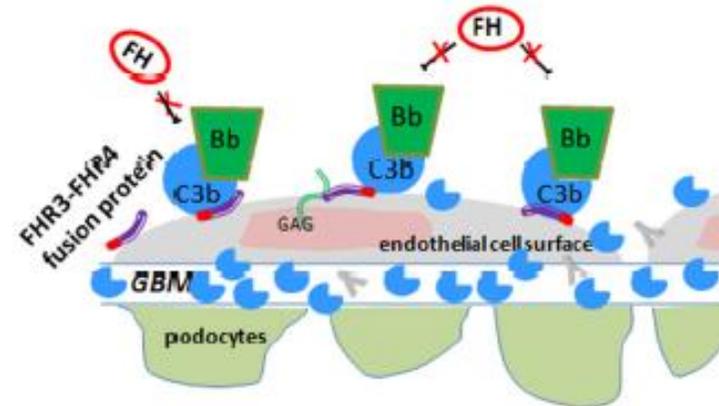
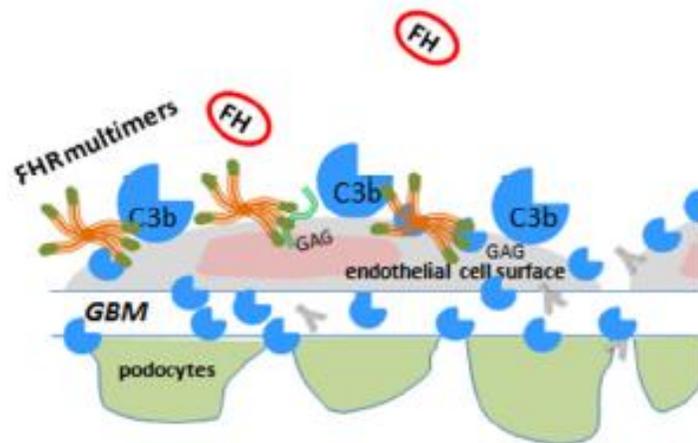
Piras et al., *Frontiers in Medicine*, 2020

CFHR STRUCTURAL VARIANTS IN C3G/IC-MPGN



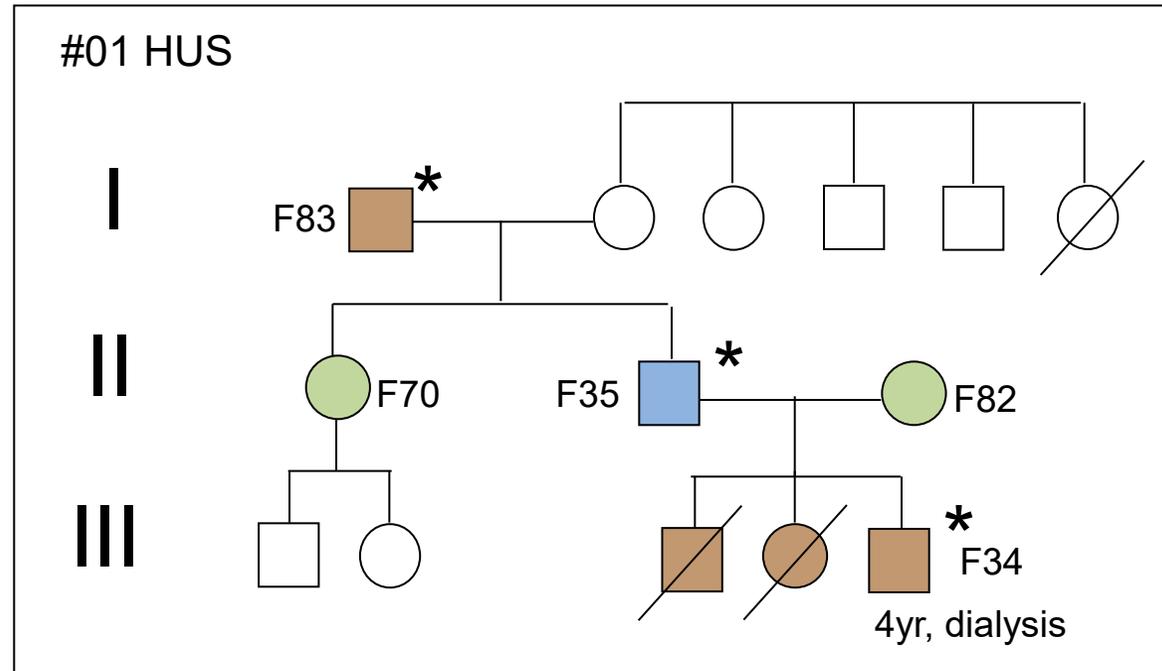
Oligomerization and deregulation of complement locally in the glomeruli. Normal C3 levels

High avidity for C3b and cell surface ligands and enhanced C3 convertase activity .



Malik et al., JASN 2012
 Piras et al., Front Genet 2021

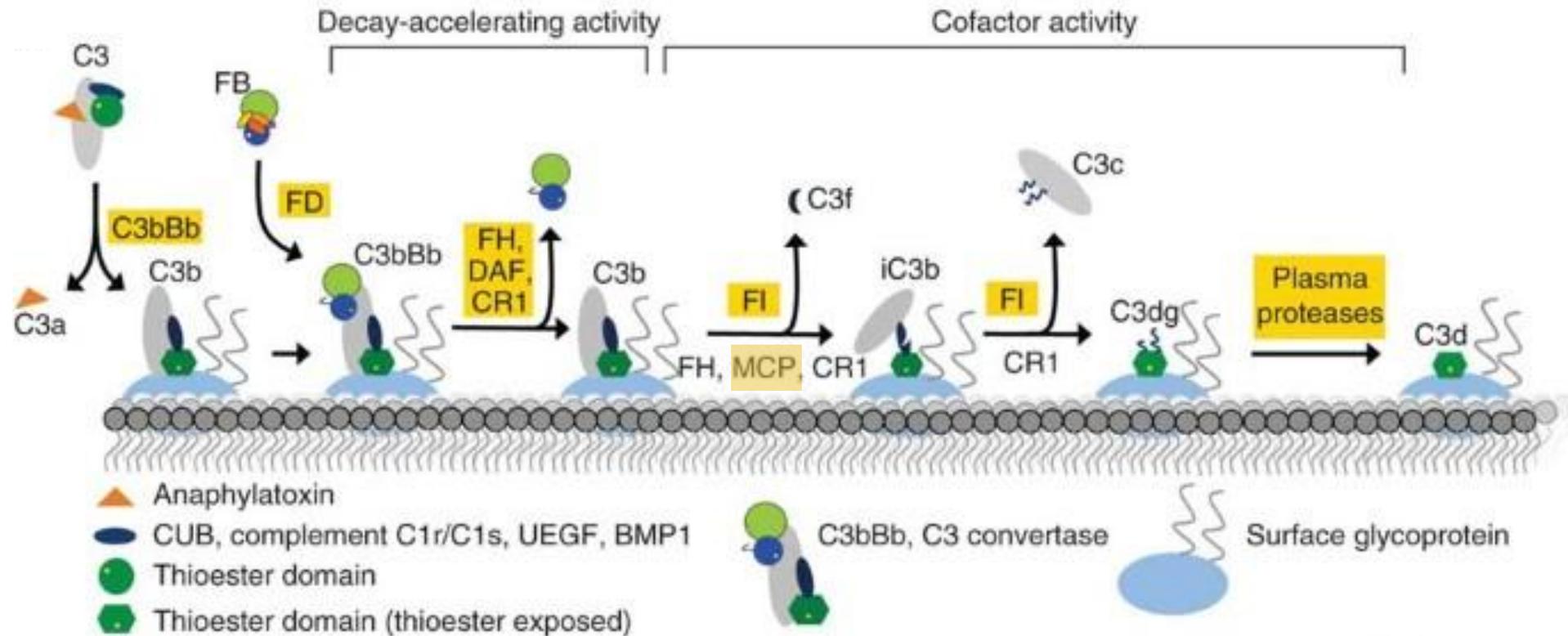
INCOMPLETE PENETRANCE OF aHUS IN CARRIERS OF COMPLEMENT GENE VARIANTS



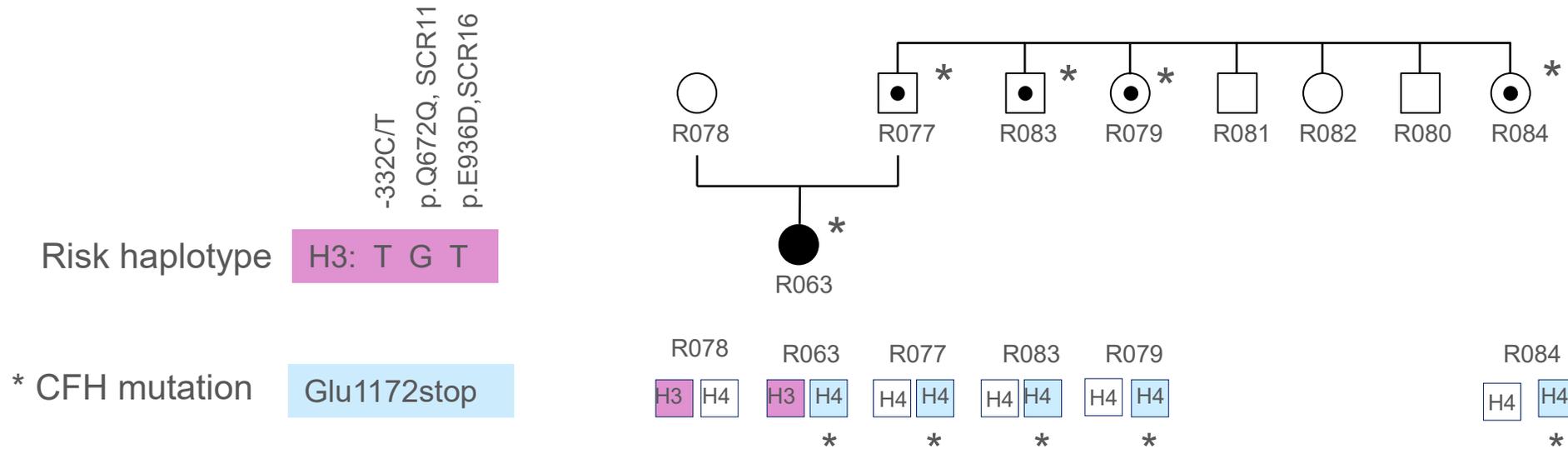
* R1215Q pathogenic change in CFH

- 3 subjects in the III generation developed aHUS in infancy: 2 died, 1 reached ESRD
- F35 never developed aHUS
- Subject F83, carrier of the R1215Q mutation developed aHUS and died at 82 years of age

IN NORMAL CONDITIONS HUMAN CELLS ARE PROTECTED FROM COMPLEMENT ATTACK BY SEVERAL REGULATORY PROTEINS WITH REDUNDANT



THE CASE OF GENE POLYMORPHISMS IN CARRIERS OF PATHOGENETIC VARIANTS TO EXPLAIN DISEASE PENETRANCE



Caprioli et al., *Hum Molec Genet*, 2003

- In 80 pedigrees with a mutation in complement genes (CFH, or MCP or C3 or CFB) aHUS penetrance was 58% in subjects who also carried the CFH-H3 and the MCPggaac risk haplotypes, while only 18% of mutation carriers with neither risk haplotypes developed the disease.

Arjona E et al., *Blood* 2020

HOW TO CLASSIFY A COMPLEMENT GENE VARIANT?

Rules for combining criteria to classify sequence variants

Pathogenic

- 1 Very strong (PVS1) *AND*
 - (a) ≥ 1 Strong (PS1–PS4) *OR*
 - (b) ≥ 2 Moderate (PM1–PM6) *OR*
 - (c) 1 Moderate (PM1–PM6) *AND* 1 supporting (PP1–PP5) *OR*
 - (d) ≥ 2 Supporting (PP1–PP5)
- ≥ 2 Strong (PS1–PS4)
- 1 **Strong** (PS1–PS4) *AND*
 - (a) ≥ 3 Moderate (PM1–PM6) *OR*
 - (b) **2 Moderate (PM1–PM6) *AND* ≥ 2 Supporting (PP1–PP5) *OR***
 - (c) 1 Moderate (PM1–PM6) *AND* ≥ 4 supporting (PP1–PP5)

Likely pathogenic

- 1 Very strong (PVS1) *AND* 1 moderate (PM1–PM6) *OR*
- 1 Strong (PS1–PS4) *AND* 1–2 moderate (PM1–PM6) *OR*
- 1 Strong (PS1–PS4) *AND* ≥ 2 supporting (PP1–PP5) *OR*
- ≥ 3 Moderate (PM1–PM6) *OR*
- 2 Moderate (PM1–PM6) *AND* ≥ 2 supporting (PP1–PP5) *OR*
- 1 Moderate (PM1–PM6) *AND* ≥ 4 supporting (PP1–PP5)

Benign

- 1 Stand-alone (BA1) *OR*
- ≥ 2 Strong (BS1–BS4)

Likely benign

- 1 Strong (BS1–BS4) and 1 supporting (BP1–BP7) *OR*
- ≥ 2 Supporting (BP1–BP7)

Very strong: PVS1: null variant

Strong: PS1: same aa as in previously PV; PS2: de novo; **PS3: functional studies;** PS4: prevalence increased than in controls;

Moderate: PM1: in mut hot spot or funct domain; PM2: absent from ctrs; PM3: rec in trans with a PV; PM4: protein length change; PM5 novel change at an aa with previous PV; PM6: presumed de novo

Supporting: PP1: cosegregation with disease ; PP2: missense in a gene with low rate of BV; **PP3: in silico deleterious;** PP4: patient phenotype specific for single gen etiology; **PP5: PV reported by other source**

CFH c.C3628T, p.R1210C (aHUS)



SNV: 1-196747245-C-T(GRCh38) Copy variant ID Gene page Dataset: gnomAD v4.1.0

Filters	Exomes	Genomes	Total
Pass	Pass	Discrepant frequencies	
Allele Count	194	27	221
Allele Number	1461694	152178	1613872
Allele Frequency	0.0001327	0.0001774	0.0001369
Grpmax Filtering AF (95% confidence)	0.0001388	0.0002428	0.0001502
Number of homozygotes	0	0	0

External Resources

- dbSNP (rs121913059)
- UCSC
- ClinVar (16558)
- ClinGen Allele Registry (CA128563)
- All of Us

Feedback

[Report an issue with this variant](#)

Genetic Ancestry Group Frequencies

gnomAD | HGDP | 1KG | Local Ancestry

Genetic Ancestry Group	Allele Count	Allele Number	Number of Homozygotes	Allele Frequency
European (non-Finnish)	200	1179908	0	0.0001695
Remaining	10	62472	0	0.0001601
Admixed American	6	59998	0	0.0001000
African/African American	3	74916	0	0.00004004
European (Finnish)	1	64028	0	0.00001562
South Asian	1	91080	0	0.00001098
Ashkenazi Jewish	0	29598	0	0.000
East Asian	0	44880	0	0.000
Middle Eastern	0	6080	0	0.000
Amish	0	912	0	0.000
XX	106	812366	0	0.0001305
XY	115	801506	0	0.0001435
Total	221	1613872	0	0.0001369

missense

1. CFH
 1. ENST00000367429.9
 MANE Select transcript for CFH
 HGVS: p.Arg1210Cys
 HGVS: c.3628C>T
 Domains: PF00084 (Pfam), and 23 more

non coding transcript exon

1. CFH
 1. ENST00000466229.5
 HGVS: n.6726C>T

In Silico Predictors

- CADD: 0.181
- REVEL: 0.280
- SpliceAI: 0.00
- Pangolin: 0.0300
- phyloP: -4.47
- PolyPhen (max): 0.280

Benign
Benign
 No effect
 No effect
 Low conservation
Likely Benign

Note The SpliceAI and Pangolin predictions displayed here were precomputed by Illumina and Invitae. For more detailed and up to date SpliceAI and Pangolin predictions, please visit our [SpliceAI Lookup browser](#).

! Present in controls : not so rare
! In silico : BV/LBV

NM_000186.4(CFH):c.3628C>T (p.Arg1210Cys)

Cite

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Germline

Classification
★☆☆☆?

Conflicting classifications of pathogenicity

Pathogenic(6); Uncertain significance(3)

9 out of 14 submissions contributed to this classification ?



Conditions - Germline

Condition ?	Classification ? (# of submissions)	Review status ?	Last evaluated ?	Variation/condition record ?
Factor H deficiency	Pathogenic (1)	★★★★	Jul 1, 2015	RCV000018025.29
Hemolytic uremic syndrome, atypical, susceptibility to, 1	risk factor (2)	★★★★	Jul 1, 2015	RCV000018026.16
Age related macular degeneration 4	Pathogenic (2)	★☆☆☆	Aug 9, 2018	RCV000022540.12
CFH-Related Dense Deposit Disease / Membranoproliferative Glomerulonephritis Type II	Uncertain significance (1)	★☆☆☆	Jun 16, 2017	RCV001099303.4
Basal laminar drusen	Uncertain significance (1)	★☆☆☆	Jun 16, 2017	RCV001099304.4

- In a mut hot spot: PM1
- PV reported by other sources: PP5
- Prevalence increased than in controls: PS4

CFH c.G341A, p.C114Y (C3G)

gnomAD v4.1.0 Search

About Team Federated Stats Policies Publications Blog Change

SNV: 1-196673952-T-C(GRCh38) [Copy variant ID](#) [Gene page](#) Dataset: gnomAD v4.1.0

Filters	Exomes	Genomes	Total
Pass	No variant		
Allele Count	1	0	1
Allele Number	1455268	152266	1607534
Allele Frequency	6.872e-7		6.221e-7
Grpmax Filtering AF (95% confidence)	—		—
Number of homozygotes	0		0

External Resources

- UCSC
- All of Us

Feedback

[Report an issue with this variant](#)

Genetic Ancestry Group Frequencies

Genetic Ancestry Group	Allele Count	Allele Number	Number of Homozygotes	Allele Frequency
▶ Middle Eastern	1	6052	0	0.0001652
▶ African/African American	0	74896	0	0.000
▶ Admixed American	0	60004	0	0.000
▶ Ashkenazi Jewish	0	29534	0	0.000
▶ East Asian	0	44736	0	0.000
▶ European (Finnish)	0	63994	0	0.000
▶ European (non-Finnish)	0	1174172	0	0.000
▶ Amish	0	912	0	0.000
▶ South Asian	0	90954	0	0.000
▶ Remaining	0	62280	0	0.000
XX	0	808604	0	0.000
XY	1	798930	0	0.00001252
Total	1	1607534	0	6.221e-7

Include: Exomes Genomes

In Silico Predictors

- CADD: 27.3
- REVEL: 0.933
- SpliceAI: 0.0100
- Pangolin: 0.0100
- phyloP: 6.33
- PolyPhen (max): 1.00

Likely Damaging
Damaging
 No effect
 No effect
High conservation
Damaging

Almost absent in controls : PM2
 In silico deleterious: PP3
 ! Not present in HGMD, nor in ClinVar
 ! No functional studies

- the criteria for benign and pathogenic are contradictory.

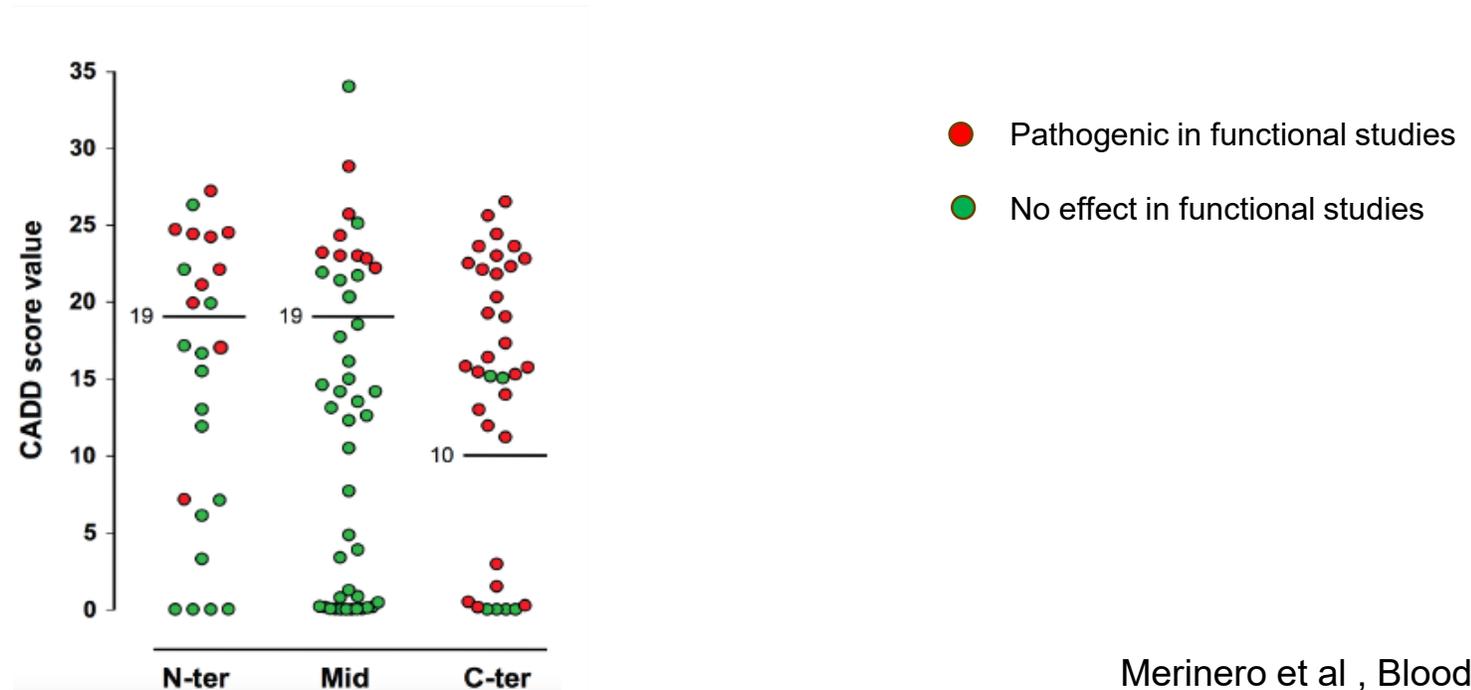
Uncertain significance

VUS !



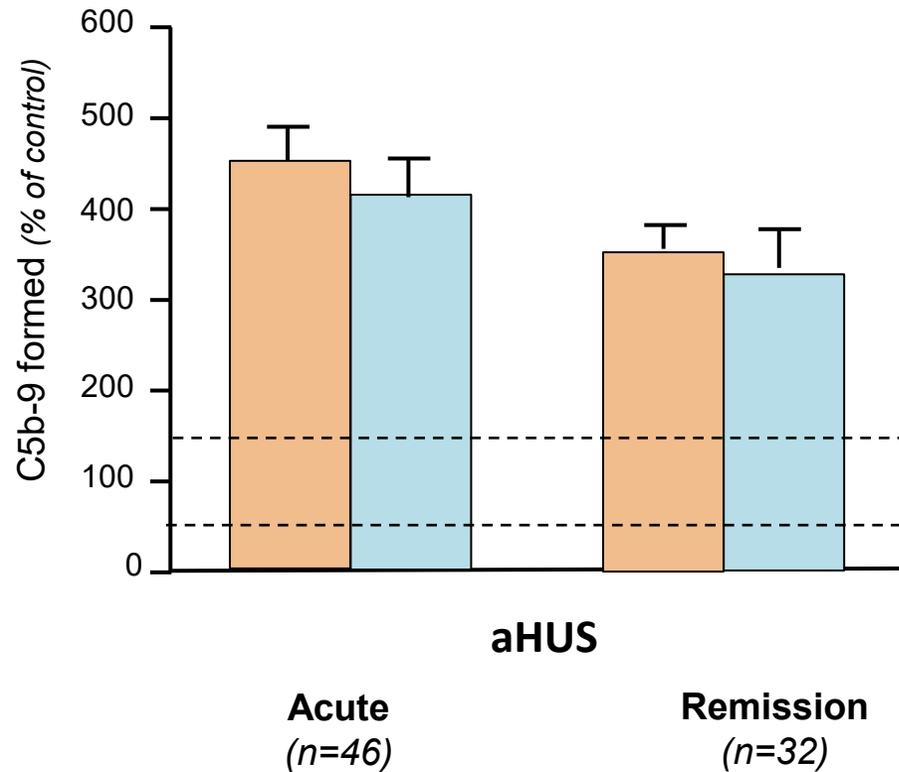
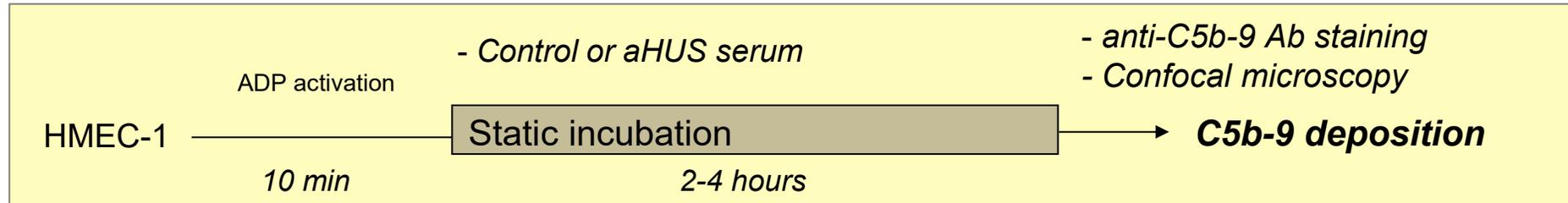
EMERGING TECHNOLOGIES: FUNCTIONAL STUDIES AND CADD THRESHOLDS

- Of 79 uncharacterized variants, only 29 (36.7%) alter FH *in vitro* expression or function and are proposed to be pathogenic.
- Rarity in databases is not informative for variant classification.
- There are limitations in applying prediction algorithms to FH variants.
- We recommend applying specific CADD thresholds to the different domains of FH. This approach has limitations because it only improves the classification from 73% to 83% and should be validated with additional studies.



Merinero et al , Blood, 2021

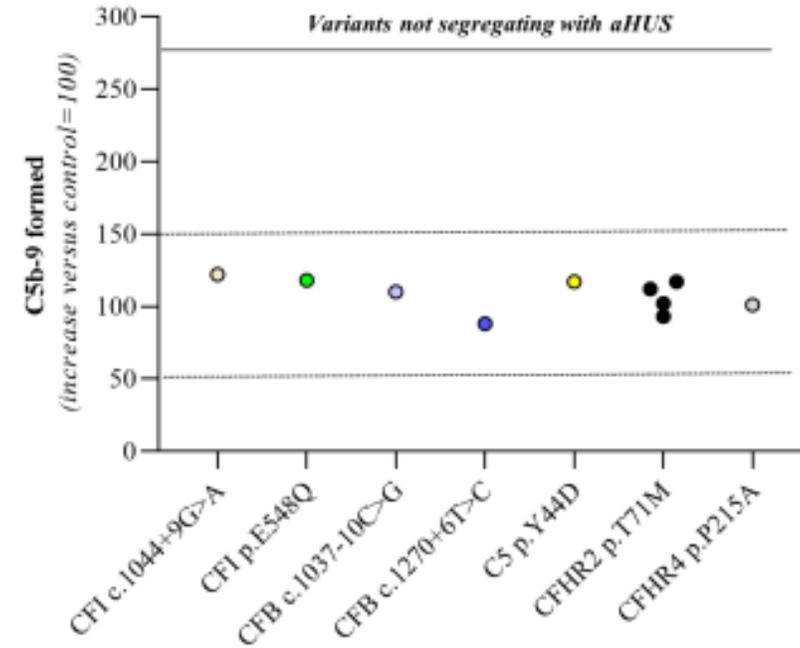
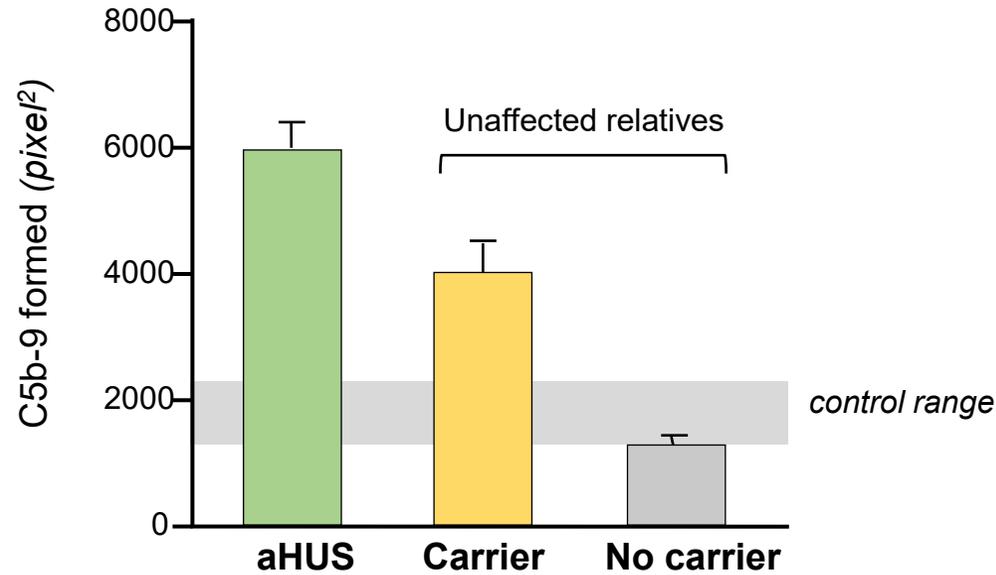
EMERGING TECHNOLOGIES: THE EX VIVO C5B-9 FORMATION ASSAY



■ mutations
■ no mutations

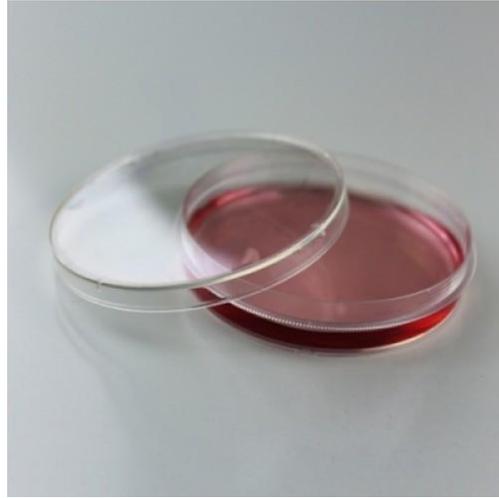
- Complement dysregulation: sensitivity 100 %
- Positive both in acute phase and in remission
- Positive regardless from mutation status

EMERGING TECHNOLOGIES: THE EX VIVO C5b-9 FORMATION ASSAY



- 92.7% (38/41) of unaffected relatives with known PV exhibited positive serum-induced C5b-9 formation test.
- The test was negative in all non-carrier relatives (28) and in relatives (10) with variants non-segregating with aHUS.

COMPLEMENT-MEDIATED HUS: A DISEASE IN A DISH



Diagnosis



Genetic characterization



Monitoring

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Marina Noris, PhD.

Mario Negri Institute for
Pharmacological Research,
Bergamo, Italy

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