

REVIEW

## From caveman companion to medical innovator: genomic insights into the origin and evolution of domestic dogs

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**Abstract:** The phenotypic and behavioral diversity of the domestic dog has yet to be matched by any other mammalian species. In their current form, which comprises more than 350 populations known as breeds, there is a size range of two orders of magnitude and morphological features reminiscent of not only different species but also different phylogenetic families. The range of both appearance and behavior found in the dog is the product of millennia of human interference, and though humans created the diversity, it remains a point of fascination to both lay and scientific communities. In this review, we summarize the current understanding of the history of dog domestication based on molecular data. We examine the ways that canine genetic and genomic studies have evolved and look at examples of dog genetics in the light of human disease.

Keywords: dog, population, GWAS, mapping, comparative genetics

## The origin of the domesticated dog

The origin and history of the domestic dog has been a topic of interest to humans for centuries. As the earliest domesticated animal, our association with the dog far predates our historical records; therefore, the circumstances surrounding our initial meeting and collaboration must be deduced from data that we can obtain through scientific means. The archeological record places the remains of dogs or proto-dogs in sites in Belgium and Siberia more than 30,000 years ago (ya). 1,2 Evidence from mitochondrial DNA (mtDNA) sequences suggests that these findings represent domestic lines that died out and do not contribute to our modern dogs; however, analysis of the morphometrics of the skulls suggests that they are extinct wolf lineages rather than dogs.<sup>3-5</sup> Fossils that are molecularly or phenotypically more similar to modern dogs have been found in the Middle East and Europe dating 14,000–17,000 ya.<sup>3,6</sup> This creates a gap in the archeological record to time the first domestication event. The conditions may have been right for canine domestication as much as 30,000 ya, and it was achieved at least 15,000 ya. Experiments with selection on tameness in foxes have shown that under rigorous selective pressures, phenotypic changes can be accomplished within 20 generations.<sup>7</sup> Phenotypic changes may have happened quickly in the dog if we assume that humans had an active role in the domestication process. However, if we assume the domestication of the dogs came from a more gradual move into the human niche, it may have taken much longer to significantly alter their appearance. Because it is possible that the process was repeated multiple times and in multiple locations, the exact temporal placement of the episode or episodes that created our modern dogs is most likely somewhere in between 15,000 ya and 30,000 ya.

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Advances in Genomics and Genetics 2015:5 239-255

Molecular studies have attempted to date the divergence of dog from wolf using multiple data sets and methodologies. mtDNA analyses have timed the divergence of the dog from wolf between 5,400 va and >100,000 va.<sup>3,8-10</sup> Two recent studies that examined whole-genome sequences of both dogs and wolves estimate the divergence time at 13,000–32,000 ya.<sup>11,12</sup> The difficulty in establishing an exact time of domestication stems from multiple sources of conflict. First, the mutation rate of the dog genome is not known. The divergence times are often estimated based on assumed mutation rates, which vary with each study (ie, 1.4×10<sup>-8</sup> vs 2.2×10<sup>-9</sup> mutations per base pair per generation). 11,12 Additionally, wolf-dog introgression must be factored into the calculations. During early domestication, dogs and wolves would have been in close contact and fully capable of interbreeding. Examination of mitochondrial haplotypes and nuclear microsatellite markers in a collection of dogs and wolves from the Caucasus in Georgia indicates that 13% of dogs and 10% of wolves show evidence of hybridization.<sup>13</sup> Pervasive hybridization throughout the natural history of the domestic dog confounds attempts at precise estimates of divergence, making dogs and wolves appear more similar and therefore more recently diverged. Finally, the genome of the domestic dog, as a close companion of humans, has been consistently altered through intensive selective pressures to obtain specialized traits. 14,15 Thus, while the molecular clock works well in determining species divergence in wild populations, assuming a steady rate of mutation could produce misleading results for a genome in which large regions are being driven to fixation and purifying selection is prevented. 16 As we continue to gather more complete genomic information about the full range of dogs and their wild progenitors, we will be able to take all of these factors into account in our search for a precise answer to the time of first domestication.

In the mean time, there are other directions that can be explored to understand early domestication. The large influx of whole-genome sequence data that are currently being produced offers the opportunity to examine the functional genetic alterations that have developed between domesticates and their closest wild relatives. Recent studies have taken this route to identify the genes that were disrupted when dogs became domesticated from wolves. 11,17-23 In a comparison of 60 domestic purebred dogs and 12 pooled wolf DNAs, 36 regions of the genome containing 122 genes were found to be under strong selection in the dogs. By mining the gene ontology database, three main gene groups were significantly highlighted: nervous system development, sperm competition, and metabolism/digestion. 17 Specifically,

under the metabolism heading, three genes involved in starch metabolism stood out. One of these was a copy number increase in dogs (4-30 compared to two in wolves) that increased the expression of the AMY2B (alpha-2B-amylase) gene. The authors hypothesized that the change in diet from largely meat to more plant-based food sources was a primary contributor to domestication, supporting the idea that wolves were first domesticated by scavenging around human agricultural settlements. 18 Further investigation of the AMY2B locus, however, shows that the copy number variant (CNV) is not increased in all dog breeds and is polymorphic in some wolves.<sup>11</sup> Rather than driving domestication, the AMY2B CNV may be a marker of more recent adaptation to a high-starch diet. A similar, though less dramatic, association has been identified in humans from high starch-consuming populations and the AMY1 genes.19

A second study comprising whole-genome data from three wolves and ten dogs identified fixed clusters of single-nucleotide polymorphisms (SNPs) in each species. Using this method, the study found 204 genes with at least six fixed sequence changes and significantly reduced nucleotide diversity. <sup>20</sup> The gene ontology terms that were most significantly overrepresented in this set of genes were behavioral, including response to stress, fear, and defense. These findings were verified in a second set of three wolves and three indigenous dogs. The overrepresentation of behavioral genes in the fixed differences between dogs and wolves suggests that a reduced fear response may have been the driver of early domestication allowing the proto-dog to live comfortably in close contact with early humans.

Finally, an analysis of the sequence of four purebred dogs, four wolves, and four indigenous dogs identified 311 genes under positive selection in the dogs. 12 These genes largely represent three gene ontology groups that are identical or nearly identical to those identified in the first study: reproductive, neurological processes, and metabolism/digestion. The authors compared these genes to those under selection in humans and found 32 in common, including genes involved in neurological processes, metabolism, and cancer. The common sites of selection across the genomes of both species indicate similar selective pressures, which is likely the result of our shared environments and constant close interaction. This parallel selection can be seen in the sequence comparison of dogs from high, mid, and low altitudes in the People's Republic of China.<sup>21</sup> The dogs that come from the highest altitudes differed from those of low-altitude regions over the EPAS1 gene and a beta-hemoglobin cluster. EPAS1 is a transcription factor that activates in response to hypoxic

conditions or oxygen deprivation and has been identified as a target of selection in the Tibetan highlanders.<sup>22,23</sup>

Selection on both the *AMY2B* polymorphism and the *EPAS1* gene highlights the convergent selective pressures found in dogs and humans and encourages the further use of dog genetics to inform human evolutionary history. The finding that disease-associated genes, such as those that lead to cancer development, are under selection in both species further strengthens the commonly held hypothesis that disease mutations mapped in dogs will be directly applicable to human-disease studies.<sup>24</sup>

# Techniques used in the study of canine genetics and genomics

The techniques researchers have used to study canine genomics have evolved with the field. Early insights into canine genetics came from pedigree analysis and trait observation. These methods were used to determine the inheritance pattern of physical traits. Physical characteristics of dogs such as blood pressure, pupil diameter, and rectal temperature were attributed to heredity through studies of different breeds of purebred dogs. In a pioneering study, such methods were used to demonstrate that genetic factors, and not just environment, are main contributors to diversity across dog breeds.<sup>25</sup>

Karyotyping and cytological methods became popular in the 1960s and were used to study a number of aspects about the dog including, but not limited to, sexual abnormalities, <sup>26</sup> reproduction, <sup>27</sup> and disease. <sup>28</sup> Cytogenetics found a resurgence in molecular biology with the advent of more specific probes that allow for chromosome painting and fluorescence in situ hybridization. These methods were used to compare the arrangement of the dog's small, acrocentric chromosomes to the human genome and showed that gene order is highly conserved between the two. <sup>29,30</sup> Further refining the probes has also allowed for more precise identification of chromosome abnormalities and genomic rearrangements. <sup>31</sup>

Proteins were the focus of canine studies during the 1970s. Many investigations focused on blood diseases or traits such as the clotting disorder von Willebrand disease. Further information on canine biology and its similarities to human was gained through comparison of protein functions across species such as the catalytic properties of enolase,<sup>32</sup> retinol transport in plasma,<sup>33</sup> and pituitary dosage curves of prolactin,<sup>34</sup> which implied a similar structure and function between the dog and human proteins.

New molecular techniques in the 1980s allowed for direct assays of the DNA sequences improving the ability to make comparisons between dogs and humans. Southern blot analysis using cDNA from human leukocyte antigen genes as a probe was able to detect dog leukocyte antigen gene regions, indicating a high level of similarity in the gene sequences of both species' major histocompatibility complex<sup>35</sup> and highlighted the importance of the canine in modeling human diseases. The similarity in dog and canine immune systems was irreplaceable in developing strategies to overcome graft-versus-host disease in bone marrow transplantation and will likely play a future role in disease therapeutics.<sup>36–38</sup> It was not until sequencing methods became more automated, however, that large-scale homology studies between dog and human became feasible.

Genetic maps of the dog were created once marker genotyping and analysis methodologies improved in the 1990s.<sup>39</sup> Microsatellites, or short tandem repeats, are sequences of DNA that can be identified through restriction enzyme assays or polymerase chain reactions and are the backbone of linkage maps.<sup>40–42</sup> The identification of a large number of highly polymorphic microsatellites enabled the construction of the first genetic maps of the dog genome.<sup>43,44</sup> These genetic maps made possible the discovery of many genes involved in disease and phenotype determination (reviewed in Parker et al<sup>24</sup>) and produced the scaffold for assembly of the first complete genome sequence of the dog. The most recent comprehensive linkage map was developed based on the completed sequence specifically to determine recombination rates, given the small size of the dog chromosomes.<sup>45</sup>

The release of the 7.5× whole-genome sequence of the dog in 2005 represented the culmination of the preceding work on characterizing the dog genome.<sup>39</sup> The assembled reference sequence was that of a Boxer and was done through a whole-genome shotgun approach, in which the DNA was fragmented into smaller, clonable segments that allowed for Sanger sequencing. With the assembly of a dog genome sequence, over two million SNPs were identified enabling genome-wide association studies (GWASs). These became a high-powered tool to study dog disease and morphology.

GWASs compare a large number of SNPs across the entire genome of two disparate groups, usually affected cases and unaffected controls for categorical traits, or a range of phenotype values for quantitative traits. Statistical methods are used to identify differences between the groups that associate with the affected status. Such studies have been successful in identifying variants in a number of genes as well as in suggesting candidate regions for specific traits (reviewed in Parker et al<sup>24</sup> and Karlsson and Lindblad-Toh<sup>46</sup>).

SNP genotyping has also been a key in allowing for other genome-wide analyses such as homozygosity mapping and

identity-by-descent mapping, in which areas of the genome are compared across multiple individuals to identify common regions of shared alleles. <sup>15,47</sup> Both methods can be successfully used to identify genomic regions that are under selection for specific traits or to identify recessive disease traits. For example, homozygosity mapping of six Spinone Italiano with spinocerebellar ataxia and six healthy controls of the same breed identified a disease locus on chromosome 20 that was further narrowed to a repeat expansion in *ITPR1*. <sup>48</sup> This gene has also been associated with ataxias in humans (Table 1).

Haplotype mapping is another powerful tool that employs SNPs to establish a pattern of variants that are commonly inherited. A combination of homozygosity mapping and haplotype comparisons was used to fine map the region associated with chondrodysplasia in a multi-breed GWAS.<sup>49</sup> A 24 kb region on canine chromosome 18 (CFA18) was found to be homozygous in 26 dogs from eight chondrodysplastic breeds. All breeds carried an identical haplotype indicating a common ancestral source of the mutation, an *fgf4* retrogene inserted in the homozygous region. This technique has been used successfully multiple times in both disease and morphology mapping (Figure 1).

There are now many canine sequences available due to the advent of next-generation sequencing technologies. The new sequences have been used to identify additional SNPs such as the 4.6 million found by comparing the Korean Jindo sequence to the publically available Boxer and the 1.5× Poodle sequences, 50 and to identify insertion/deletions and structural variants.51 The relative low cost and general availability of next-generation sequencing allow for largescale sequencing to supplement GWASs and linkage studies when searching for disease-associated variants. For instance, a GWAS of patellar luxation in Flat-Coated Retrievers identified four distinct regions of association.<sup>52</sup> Instead of fine mapping each of the loci or picking candidate genes, custom genomic hybridization arrays were used to enhance the coding regions in all loci for targeted resequencing in 15 cases and 15 controls. SNPs with the largest difference in frequency between cases and controls were genotyped on a larger panel revealing eight genes that appear associated with the disorder.

Similarly, targeted next-generation sequencing was used to investigate a region on CFA4 that was associated with ataxia in both GWASs and linkage analyses of Old English Sheepdogs.<sup>53</sup> The sequencing combined with genotyping and haplotype comparisons in additional affected breeds identified a missense mutation in the *RAB24* gene. In contrast, whole-genome sequence of a single Chinese Crested dog with

neuronal ceroid lipofuscinosis was compared to the sequence of 101 unaffected dogs of other breeds to identify what was predicted to be a rare disease-causing variant. A deletion was identified in the *MFSD8* gene that was homozygous in the diseased dog, absent from the other 101 dogs, and predicted to alter protein structure.<sup>54</sup>

Next-generation sequencing can enhance the ability to identify variants that are resistant to traditional sequencing or genotyping methods. Targeted next-generation sequencing of a locus from a GWAS in Tibetan Spaniels with late-onset progressive retinal atrophy identified a short interspersed nuclear element (SINE) insertion in an intron of the *FAM161A* gene that creates a reading frame shift and exon skipping.<sup>55</sup> SINE insertions are not annotated in the public sequence databases and can only be identified through exploratory sequencing. Targeted sequencing of the entire associated region proved instrumental in finding this causative mutation.

As it stands today, the dog reference genome is on its third and most updated derivation, CanFam3.1, which includes approximately 2.41 billion base pairs across the 38 autosomal chromosome pairs, the X chromosome, and the mtDNA. The available data have led to the development of highly informative tools for genome analysis in the dog including a high-density SNP chip, expression chips, and a whole-exome enrichment array, which offers a less-expensive alternative to whole-genome sequencing. 47,56 The addition of RNAseq data from ten canine tissues has improved the annotation of the canine genome with the current version displaying 20,700 protein-coding genes, 4,600 antisense transcripts, and 7,200 noncoding RNA transcripts positioned confidently and available for mutation analysis.<sup>57</sup> Some of the most common resources discussed above can be found in Table 2. The next step in genome annotation will be to identify the regulatory regions, as there is likely to be a subset unique to the dog that will be invaluable for disease studies.

## Phenotypic diversity among breeds

By far, the most intriguing aspect of canine genetics is the chance it offers to understand the source of extreme phenotypic diversity (Figure 2). The dog, as we know it today, is the result of centuries of controlled breeding to obtain specialized traits and behaviors. The physical differences between the breeds have long been recognized, but it is through genomic analysis that we have been able to understand the differences at a genetic level. Shortly after the first microsatellites were discovered in the dog, they were being used to assess differences between the breeds. These early studies, often analyzing

Table I A summary of naturally occurring diseases in dogs and humans that are caused by or associated with mutations in orthologous genes and gene family members

Option loginus genes         COLLAS         SAMO         Alport syndrome         COLLAS           C3 deficiency         C3 deficiency         C3 deficiency         C3 deficiency         C3 deficiency         C3 deficiency           C4 deficiency         C4 deficiency         C4 deficiency         C3 deficiency         C3 deficiency         C3 deficiency           C4 deficiency         C4 deficiency         C4 deficiency         C3 deficiency         C3 deficiency         C3 deficiency           C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency           C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency           C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency           C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency           C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency           C5 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency         C4 deficiency           C4 deficiency	Dog disease	Dog gene	Breed	Human disease	Human gene	Reference
Appert 8	Orthologous genes					
BRIT C3 deficiency	Alport syndrome	COL4A5	SAMO	Alport syndrome	COL4A5	107
ADMATISSO NSDT Centronuclear myopathy  ADMATISSO NSDT Ceft ip and palace  CNG33  AMA, GSHP Achromatopsia  3.C.2.8.1  NEWF Arromatopsia  AMA, GSHB Achromatopsia  AMA, GSHB Achromatopsia  AMA, GSHB Achromatopsia  Actor VIII BSB, WHWT Erythrocyte pyruvate kirase deficiency  ESSP Coult-or miscular dystrophy  COLZAI BSB, WHWT Erythrocyte pyruvate kirase deficiency  ESSP Fuctor VIII RSE Hemophilia A  Factor VIII BEAG, LHSA Hemophilia A  Factor VIII CSD  COSD AMA  Multiple Intersluciosis congenital catarates  CUBN or AMN Multiple Intersluciosis and DLA-DQA  SAMO, CAIR, TIBT Type I clabsets  CUN family  CALV  CALV  Multiple Intersluciosis Intersluciosis  LAMA, SAMO, CAIR, TIBT Type I clabsets  CALV  AMA COLD ATPI 320 DACH, BBLL, TIBT Neuronal ceroid lipofuscinosis  LAMA, CALV  CALVI MSNZ  PACH, ABULL, TIBT Neuronal ceroid lipofuscinosis  CALV  CALVI MSNZ  CALVI MSNZ  PACH, SET, BOND Neuronal ceroid lipofuscinosis  CALV  CALVI MSNZ  CALVI MSNZ  CALVI MSNZ  PACH ABULL TIBT Neuronal ceroid lipofuscinosis  CALV  AMA MINISPI MANN  Multiple RSE Leukocyte adhesion deficiency  RREES BRIA Leber congenital annarrosis spells  RRESS Multiple Retinitis pigmentosa  RRESS Multiple Retinitis pigmentosa  RRESS MASS, CARD  Severe combined immunodeficiency  Multiple Nor WWIII Spinnen on Multiple Nor Willebrand disease  Nor WWF  Multiple Nor Multiple Nor Willebrand disease  Nor WWIII MSNS, CARD  Multiple Nor Multiple Nor Willebrand disease  Nor WWIII MINISPI SPIN  Multiple Nor WWIII MINISPIN Nor WIII MINISPIN Nor WWIII MINISPIN Nor WWIII MINISPIN Nor WWIII MINISPIN NOR WIII MINISPIN NOR WWIII MINISPIN NOR WIII MINISPIN NOR WWIII MINISPIN NOR	C3 deficiency	$\Box$	BRIT	C3 deficiency	$\mathbb{S}$	108,109
ADAMTS20         NSDT NGS3         Cleft lip and palate APML, GSHP         Cleft lip and palate APML, GSHP         APML, GSHP         APMCH of various and standard of various and standard and stan	Centronuclear myopathy	BINI and PTPLA	BORD	Centronuclear myopathy	BINI and PTPLA	110-112
AMAL, GSHP Achromatopsia  SuCAM NAVE TYPE Type Lystumine  SODI SODI SODI SODI SODI SODI SODI SOD	Cleft lip and palate	ADAMTS20	NSDT	Cleft lip and palate	ADAMTS20	113
SICAAI NEWF Type I cystinuria SICAAI BONY, PEMB Amycrophic lateral sclerosis DMD (dystrophin) GOLD Duchene muscular dystrophy GOLDAI BOX, PEMB Amycrophic lateral sclerosis DMD (dystrophin) GOLDAI BOX, PEMB COLDAI BOX, PEMB COLDAI BOX, PEMB BOX, PTCVAIDON BOX, CARD Severe compleined immunocial ciency PTCVAID BOX, CARD BOX, CARD Severe compleined immunocial cien	Cone degeneration	CNGB3	AMAL, GSHP	Achromatopsia	CNGB3	114,115
SOD I  BOX, PEMB Amyotrophic lateral sclerosis  DMD (dystrophin) GOLD Duchene muscular dystrophy COL7A I GSHP Dystrophic addicency ESSP  RCA I ESSP Hemophilia A Foctor VIII RSE Hemophilia B H5F4 Hemophilia B H5F5 Hemophilia B H5F5 Hemophilia B H5F6 Hem	Cystinuria	SLC3A1	NEWF	Type I cystinuria	SLC3A1	116,117
DMD (dystrophin) GOLD Duchene muscular dystrophy COLTA! GSHP Dystrophic epidermolysis bullosa GRY BSJI, WHWT Erythrocyce pyruvate kinase deficiency RUCA! ESSP Cocae in the cocae deficiency RUCA! ESSP HALT Glycogen storage disease type la Foctor IX BEAG, LHSA Hemophilia A Foctor IX BEAG, LHSA Hemophilia A FOCTOR MILIPPE Congenial cataracts GSD Hypohidrotic ectodermal dysplasia CUBN or AMN Multiple Inerslund-Gräsbeck syndrome DAA-DR8 and DAA-DOR SAMO, CAIR, TIBT Type-1 diabetes NHLCI and EPM2A Multiple Inerslund-Gräsbeck syndrome DAA-DR8 and DAA-DOR SAMO, CAIR, TIBT Type-1 diabetes NHLCI and EPM2A Multiple Inerslund-Gräsbeck syndrome DAA-DR8 and DAA-DOR DACH BETT, BOACH Narroid secaie dipofuscinosis CAIR Manily DACH, ESET, BOACH Narroid ecroid lipofuscinosis CAIR Manily GSHP Neuronal ecroid lipofuscinosis CAIR Manily GSHP Neuronal ecroid lipofuscinosis CAIR MAN3 CALC NHWAT, CAIR Krabbe disease PNPLAI GOLD Auctoral experimate principle or proceedial anaurosis PNDE6A Multiple Retinitis pigmentosa PNCD MAST Retinitis pigmentosa PNCD MASS, CARD Severe combined immunodeficiency TITRR SPIN SPIN SpinN SpinN SpinN SpinN SpinN SpinNerosa VWF WUltiple VON Williber Aud disease	Degenerative myelopathy	SODI	BOX, PEMB	Amyotrophic lateral sclerosis	SODI	118,119
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HUGAI ESSP Hucocyte pyruvate kinase deficiency  G6PT MALT Glycogen storage disease type la Foctor IXI BEAG, LHSA Hemophilia B Foctor IXI BEAG, LHSA Hemophilia B HSF4 Multiple Congenital cataracts  DIA-DRB and DIA-DQA SAMO, CAIR, TIBT Type-1 diabetes  HCRTR2 LAB, DACH, RBLT, BORD PACH, ABULT, TIBT Type-1 diabetes  HARTR2 DACH, ESET, BORD Neuronal ceroid lipofuscinosis  LAMA3 WHWT, CAIR RYABU Autosomal recessive congenital ichthyoses  CUSN i mily GSLP Autosomal recessive congenital ichthyoses  CLON MSNZ HOUGH REST, BORD HOLD CONGENITY CONGRIGHES Retniits pigmentosa  RACO MAST REST REST REST RETNITES I PROFECTION OF CONGRESSIVE Autosomal recessive congenital ichthyoses  CLON MSNZ HOUTPIPE RETNITY Retnitis pigmentosa  RACO MAST Retniits pigmentosa  RACO MAST RETNIES RETNI	Dystrophic epidermolysis bullosa	COL7A1	GSHP	Dystrophic epidermolysis bullosa	COL7AI	121,122
FUCOSIGOSIS  GGPT MALT GIVOSGEN Storage disease type la Factor IX BEAG, LHSA Hemophilia A Hemophilia A HSF4 Multiple CUBN or AMN Multiple DLA-DRB and DLA-DQA NHUTIPLE CLAB AMO CARL, TIBT Multiple DLA-DRB and DLA-DQA SAMO, CAIR, TIBT Type-1 diabetes HCRTRZ PTT, TPP I, CTSD, ATP I 3A2 DACH, ABBUL, TIBT CLN family GSP MALY GOLD Neuronal ceroid lipofuscinosis LAMA3 CALC CN Mamily GSHP MSNZ CALC MHUTIPL GOLD MULTIPL GOLD GOLL Leber congenital amarrosis type 12 Leber congenital amarrosis type 15 LTGA2B MULTIPL Signemerosa RD3 GOLL Leber congenital amarrosis type 15 LTGA2B MULTIPL Signemerosa MULTIPL GOLD MASS. CARD Severe combined immunodeficiercy Spinocerebellar ataxia type 15 LTGA2B MULTIPL MULT	Erythrocyte pyruvate kinase deficiency	PK	BSJI, WHWT	Erythrocyte pyruvate kinase deficiency	PK	123,124
G6PT     MALT     Glycogen storage disease type la Foctor VIII       RSE     Hemophilia A Hemophilia A Hemophilia B HSF4     Hemophilia B Hemophilia B Hemophilia B HSF4       PAST4     Multiple     Congenital cataracts       CUBN or AMN     Multiple     Birr+Hogg-Dubé syndrome       DIA-DRB and DIA-DQA     SAMO, CAIR, TIBT     Type-I diabetes       NHLRCR and EPMZA     Multiple     Imerslund-Gräsbeck syndrome       LAR DOBP, DACH     Narrolepsy     LAB, DOBP, DACH       HCRTRZ     LAB, DOBP, DACH     Narrolepsy       ALAMA3     GSHP     Neuronal ceroid lipofuscinosis       CALC     WHWT, CAIR     Neuronal ceroid lipofuscinosis       ALAMA3     GSHP     Neuronal ceroid lipofuscinosis       CALC     WHWT, CAIR     Krabbe disease       PNPAI     GOLD     Aurosomal recessive congenital lichthyoses       CLN I     MSNZ     Aurosomal recessive congenital lichthyoses       CLN I     MSNZ     Aurosomal recessive congenital amaurosis       PDE6A     Multiple     Retinitis pigmentosa       RHO     MAST     Retinitis pigmentosa       RHO     Spinocerebellar azaxia xppe 15       ITRR     Glanzmann thrombasthenia       WH     Multiple     Spinocerebellar azaxia xppe 15       ITGA2B     Multiple     Von Williebrand disease<	Fucosidosis	FUCAI	ESSP	Fucosidosis	FUCAI	125,126
Factor VIII RSE Hemophilia A Factor IX BEAG, LHSA Hemophilia B Factor IX BEAG, LHSA Hemophilia B FISTA Multiple Congenital cataracts  CDB Ordenital Cataracts  BIN CONGENITY BT CONGENITY  CDB ORDEN DACH, RDBT Type-1 diabetes  NHIRCI and EPM2A Multiple Lafora disease  HCRTR2 LAB, DOBP, DACH ABUL, TIBT Type-1 diabetes  NHIRCI and EPM2A Multiple Lafora disease  HCRTR2 DACH, ABUL, TIBT Neuronal ceroid lipofuscinosis  CLN family DACH, ABUL, TIBT Neuronal ceroid lipofuscinosis  LAMA3 DACH, ABUL, TIBT Neuronal ceroid lipofuscinosis  CAN family DACH, ESET, BORD Neuronal ceroid lipofuscinosis  LAMA3 WHWT, CAIR Krabbe disease  RPE65 BRIA Leber congenital anaurosis  RPE65 BRIA Leber congenital anaurosis type 12  RCD Multiple Retinitis pigmentosa  RCD Multiple Retinitis pigmentosa  RCD Multiple Retinitis pigmentosa  RAD MAST Retinitis pigmentosa  RAD RASS, CARD Severe combined immunodeficiency  ITPR SPIN Spinocerebellar ataxia type 15  ITGA2B Multiple von WVIIIebrand disease  WWF Multiple Von WVIIII CASB VON CASB VON WVIIII CASB VON CASB	Glycogen storage disease type la	G6PT	MALT	Glycogen storage disease type la	G6PT	127,128
H254 Hemophilia B H254 Hultiple Congenital cataracts H254 Multiple Congenital cataracts CUBN or AMN Multiple Imersiund-Gräsbeck syndrome DL4-DR8 and DL4-DQA SAMO, CAIR, TIBT Type-1 diabetes NHLRC1 and EPM2A Multiple Lafora disease HCRTR2 LAB, DOBB, DACH Narcolepsy PTT1, TPP1, CTSD, ATP13A2 DACH, ABUL, TIBT Neuronal ceroid lipofuscinosis CLN family DACH, EBET, BORD Neuronal ceroid lipofuscinosis CLN family GSHP JUNCTIONAL SET, BORD Neuronal ceroid lipofuscinosis CLN family GSHP AUCH, EBET, BORD Neuronal ceroid lipofuscinosis CLN family GSHP AUCH, EBET, BORD Neuronal ceroid lipofuscinosis CLN family GSHP AUCH, EBET, BORD Neuronal ceroid lipofuscinosis CLN family GSHP AUCH, EBET, BORD Neuronal ceroid lipofuscinosis CLN family GSHP AUCH, EBET, BORD Neuronal ceroid lipofuscinosis CLN family GSHP AUCH SET, BORD Neuronal ceroid lipofuscinosis CLN family GSHP AUCH SET, BORD Neuronal ceroid lipofuscinosis RPE65 BRIA Leber congenital amaurosis PRCD Multiple Retinitis pigmentosa RPCD Multiple Retinitis pigmentosa RPCD Multiple Retinitis pigmentosa RPCD Multiple Retinitis pigmentosa RPCD MAST Retinitis pigmentosa RPCD MAST Retinitis pigmentosa RPCD MAST Spinocerebellar ataxia type 15 ITGA2B OTTR Glanzmann thrombasthenia VMF Multiple von WVIIIebrand disease	Hemophilia A	Factor VIII	IRSE	Hemophilia A	Factor VIII	129,130
HSF4 Multiple Congenital cataracts  EDA GSD GSD Hypohidrotic ectodermal dysplasia CUBN or AMN Multiple HCRTR2 HCRTR2 HCRTR3 HCRTR3 HCRTR3 HCRTR3 HCRTR4 HCRTR2 HCRTR3 HCRTR4 HCRTR5 HCRTR5 HCRTR5 HCRTR5 HCRTR5 HCRTR6 HCRTR6 HCRTR7 CLN family GSHP HCRTR7 GOLD HCRTC1 HCRTR7 GOLD HCRTC2 HCRCN	Hemophilia B	Factor IX	BEAG, LHSA	Hemophilia B	Factor IX	131,132
EDA GSD Hypohidrotic ectodermal dysplasia CUBN or AMN HURCI and EPMZA HUIPPE ALA-DRB and DIA-DQA Nultiple HYPOHidrotic ectodermal dysplasia NHLRCI and EPMZA HUIPPE AMO CAIR, TIBT HORTRZ HCRTRZ HCRTRZ ALA DOBP, DACH Narcolepsy PTT1, TPP1, CTSD, ATP13A2 DACH, ABUL, TIBT ALA SET, BORD Neuronal ceroid lipofuscinosis DACH, ESET, BORD Neuronal ceroid lipofuscinosis DACH, ESET, BORD HURCi and EPMZA HORTRZ DACH, ABUL, TIBT Neuronal ceroid lipofuscinosis DACH, ESET, BORD Neuronal ceroid lipofuscinosis CALC WHWYT, CAIR Krabbe disease NWHYT, CAIR RYAD Autosomal recessive congenital ichthyoses CD18 RNSZ COLD Retinitis pigmentosa Multiple Retinitis pigmentosa RHO NAST Retinitis pigmentosa Multiple Retinitis pigmentosa RHO NAST Retinitis pigmentosa RHO NAST Retinitis pigmentosa RHO Spinocerebellar atxia type 15 TIGA2B Multiple von Willebrand disease	Hereditary cataracts	HSF4	Multiple	Congenital cataracts	HSF4	133,134
EDA CUBN or AMN Multiple DLA-DRB and DLA-DQA SAMO, CAIR, TIBT NPLACI and EPM2A NULTIPL CLAB, DOBP, DACH ABUL, TIBT CALC ABUL, TIBT CALC ABUL, TIBT ACALC ABUL, TIBT ANDORD ACH, ESET, BORD ACH, EST,	Hereditary multifocal renal cystadenocarcinoma	FLCN	GSD	Birt-Hogg-Dubé syndrome	FLCN	135,136
EDA  GSD  Hypohidrotic ectodermal dysplasia  CUBN or AMN  Multiple  DIA-DRB and DIA-DQA  SAMO, CAIR, TIBT  Type-I diabetes  NHLRCI and EPM2A  Hultiple  Lafora disease  HCRTR2  LAB, DOBP, DACH  BTT1, TPP1, CTSD, ATP13A2  DACH, SET, BORD  Hypohidrotic ectodermal dysplasia  Lafora disease  HCRTR2  LAMA3  CALK  ABOLL, TIBT  Neuronal ceroid lipofuscinosis  Junctional epidermolysis bullosa  Rybyl  Autosomal recessive congenital ichthyoses  COLB  Retinitis pigmentosa  RHO  Multiple  Retinitis pigmentosa  RHO  Multiple  Retinitis pigmentosa  RAD  Multiple  Retinitis pigmentosa  RAD  Severe combined immunodeficiency  TITRI  SPIN  TITRA  TITRA  Multiple  Non Willebrand disease	and nodular dermatofibrosis					
CUBN or AMN     Multiple     Imerslund-Gräsbeck syndrome       DIA-DRB and DIA-DQA     SAMO, CAIR, TIBT     Type-I diabetes       NHLRC1 and EPM2A     Multiple     Lafora disease       HCRTR2     LAB, DOBP, DACH     Narcolepsy       PT1, TPP1, CTSD, ATP13A2     DACH, ABUL, TIBT     Neuronal ceroid lipofuscinosis       CLN family     GSHP     Neuronal ceroid lipofuscinosis       DACH, EBET, BORD     Junctional epidermolysis bullosa       GALC     WHWT, CAIR     Krabbe disease       PNPLAI     GOLD     Autosomal recessive congenital ichthyoses       CLO I8     RSE     Leukocyte adhesion deficiency       MSS     Mystonia congenita     Preber congenital amaurosis       PDE6A     Multiple     Retinitis pigmentosa       PRCD     Multiple     Retinitis pigmentosa       RHO     MAST     Retinitis pigmentosa       RHO     MAST     Severe combined immunodeficiency       II-2R (gamma)     BASS, CARD     Severe combined immunodeficiency       ITPR I     SPIN     Spinocerebellar ataxia type 15       ITGA2B     Multiple     von Willebrand disease	Hypohidrotic ectodermal dysplasia	EDA	GSD	Hypohidrotic ectodermal dysplasia	EDA	137,138
DIA-DRB and DIA-DQA SAMO, CAIR, TIBT Type-I diabetes  NHLRCI and EPM2A Multiple Lafora disease  HCRTR2 LAB, DOBP, DACH Narcolepsy PTT1, TPP1, CTSD, ATP13A2 DACH, ABUL, TIBT Neuronal ceroid lipofuscinosis  CLN family GSHP Neuronal ceroid lipofuscinosis  GALC WHWYT, CAIR Krabbe disease PNPLAI GOLD ACHOSOMAI recessive congenital ichthyoses  CD18 RSE Leukocyte adhesion deficiency CLN MSNZ Multiple Retinitis pigmentosa RPE65 RPCD Multiple Retinitis pigmentosa RPCD Multiple Retinitis pigmentosa RPCD MAST Retinitis pigmentosa RPCD MAST Retinitis pigmentosa RPCD MAST Retinitis pigmentosa RPCD Multiple Severe compined immunodeficiency ITPR1 SPIN SPIN SPIN SPIN Glanzmann thrombasthenia  WFF Multiple von Willebrand disease	Imerslund-Gräsbeck syndrome	CUBN or AMN	Multiple	Imerslund-Gräsbeck syndrome	CUBN or AMN	139,140
NHLRCI and EPM2A       Multiple       Lafora disease         HCRTR2       LAB, DOBP, DACH       Narcolepsy         PTT1, TPP1, CTSD, ATP13A2       DACH, ABUL, TIBT       Neuronal ceroid lipofuscinosis         CLN family       GSHP       Neuronal ceroid lipofuscinosis         LAMA3       WHWT, CAIR       Krabbe disease         PNPLA1       GOLD       Autosomal recessive congenital ichthyoses         CD18       IRSE       Leukocyte adhesion deficiency         CD18       MSE       Leukocyte adhesion deficiency         CD18       MSNZ       Myotonia congenital amaurosis         RPE65       BRIA       Leber congenital amaurosis         PRCD       Multiple       Retinitis pigmentosa         RHO       MAST       Retinitis pigmentosa         RD3       COLL       Leber congenital amaurosis type 12         RD3       COLL       Leber congenital amaurosis type 15         IL-2R (gamma)       BASS, CARD       Severe combined immunodeficiency         ITPR1       SPIN       Spinocerebellar ataxia type 15         ITGA2B       OTTR       von Willebrand disease	Insulin-dependent diabetes	DLA-DRB and DLA-DQA	SAMO, CAIR, TIBT	Type-1 diabetes	HLA-DRB and HLA-DQA	141,142
HCRTR2       LAB, DOBP, DACH       Narcolepsy         PTT1, TPP1, CTSD, ATP13A2       DACH, ABUL, TIBT       Neuronal ceroid lipofuscinosis         CLN family       DACH, ESET, BORD       Neuronal ceroid lipofuscinosis         LAMA3       WHWT, CAIR       Krabbe disease         CALC       WHWT, CAIR       Krabbe disease         PNPLA I       GOLD       Autosomal recessive congenital ichthyoses         CD I8       IRSE       Leukocyte adhesion deficiency         CLCN I       MSNZ       Myotonia congenital         RPE65       BRIA       Leber congenital         RPE65       BRIA       Leber congenital         RPCD       Multiple       Retinitis pigmentosa         RHO       MAST       Retinitis pigmentosa         RHO       MAST       Retinitis pigmentosa         RD3       COLL       Leber congenital amaurosis type I2         IL-2R (gamma)       BASS, CARD       Spinocerebellar ataxia type I5         ITGA2B       OTTR       Von Willebrand disease	Lafora disease	NHLRC1 and EPM2A	Multiple	Lafora disease	NHLRCI and EPM2A	88,143
PTT1, TPP1, CTSD, ATP13A2 DACH, ABUL, TIBT Neuronal ceroid lipofuscinosis  CLN family GSHP Junctional epidermolysis bullosa  GALC WHWT, CAIR Krabbe disease  PNPLA1 GOLD Autosomal recessive congenital ichthyoses  CLN MSNZ Hyotonia congenital ichthyoses  CLN MSNZ Hyotonia congenital ichthyoses  CLN MSNZ Hyotonia congenital amaurosis  PDE6A Multiple Retinitis pigmentosa  RHO MAST Retinitis pigmentosa  RHO MAST Retinitis pigmentosa  RHO MAST Retinitis pigmentosa  RHO Severe compined immunodeficiency  IL-2R (gamma) BASS, CARD Severe combined immunodeficiency  ITRR SPIN Spinocerebellar ataxia type 15  ITGA2B OTTR Glanzmann thrombasthenia  VWF Multiple von Willebrand disease	Narcolepsy	HCRTR2	LAB, DOBP, DACH	Narcolepsy	HCRTR2	86,87,144
CLN family     DACH, ESET, BORD     Neuronal ceroid lipofuscinosis       LAMA3     GSHP     Junctional epidermolysis bullosa       CALC     WHWT, CAIR     Krabbe disease       PNPLA I     GOLD     Autosomal recessive congenital ichthyoses       CD I 8     IRSE     Leukocyte adhesion deficiency       CLCN I     MSNZ     Myotonia congenital ichthyoses       PDE6A     Multiple     Retinitis pigmentosa       PRCD     MAST     Retinitis pigmentosa       RAO     MAST     Retinitis pigmentosa       RAD3     COLL     Leber congenital amaurosis type 12       RD3     COLL     Leber congenital amaurosis type 12       RD3     COLL     Severe combined immunodeficiency       ITFR I     SPIN     Spinocerebellar ataxia type 15       ITGA2B     OTTR     Von Willebrand disease	Neuronal ceroid lipofuscinosis	PTT1, TPP1, CTSD, ATP13A2	DACH, ABUL, TIBT	Neuronal ceroid lipofuscinosis	PTT1, TPP1, CTSD, ATP13A2	90,145
LAMA3GSHPJunctional epidermolysis bullosaGALCWHWT, CAIRKrabbe diseasePNPLAIGOLDAutosomal recessive congenital ichthyosesCD I8IRSELeukocyte adhesion deficiencyCLCN IMSNZMyotonia congenitaRPE65BRIAALeber congenital amaurosisPDE6AMultipleRetinitis pigmentosaRCDMASTRetinitis pigmentosaRHOMASTRetinitis pigmentosaRD3COLLLeber congenital amaurosis type 12IL-2R (gamma)BASS, CARDSevere combined immunodeficiencyITRA ISPINSpinocerebellar ataxia type 15ITGA2BOTTRVon Willebrand disease	Neuronal ceroid lipofuscinosis	CLN family	DACH, ESET, BORD	Neuronal ceroid lipofuscinosis	CLN family	90,146
GALCWHWT, CAIRKrabbe diseasePNPLAIGOLDAutosomal recessive congenital ichthyosesCD I8IRSELeukocyte adhesion deficiencyCLCN IMSNZMyotonia congenitaRPE65BRIAALeber congenital amaurosisPDE6AMultipleRetinitis pigmentosaPRCDMultipleRetinitis pigmentosaRHOMASTRetinitis pigmentosaRD3COLLLeber congenital amaurosis type 12IL-2R (gamma)BASS, CARDSevere combined immunodeficiencyITRR ISPINSpinocerebellar ataxia type 15ITGA2BOTTRGlanzmann thrombastheniavWFMultiplevon Willebrand disease	Junctional epidermolysis bullosa	LAMA3	GSHP	Junctional epidermolysis bullosa	LAMA3	147,148
PNPLAI GOLD Autosomal recessive congenital ichthyoses  CD I8  RSE Leukocyte adhesion deficiency  CLCN I MSNZ Myotonia congenita  RPE65 Multiple Retinitis pigmentosa  RACD Multiple Retinitis pigmentosa  RHO MAST Retinitis pigmentosa  RHO MUltiple Severe combined immunodeficiency  SPIN Spinocerebellar ataxia type 15  ITGA2B OTTR Glanzmann thrombasthenia  VWF Multiple von Willebrand disease	Krabbe disease	GALC	WHWT, CAIR	Krabbe disease	GALC	149,150
CD18       IRSE       Leukocyte adhesion deficiency         CLCN I       MSNZ       Myotonia congenita         RPE65       BRIA       Leber congenita amaurosis         PDE6A       Multiple       Retinitis pigmentosa         PRCD       Multiple       Retinitis pigmentosa         RHO       MAST       Retinitis pigmentosa         RD3       COLL       Leber congenital amaurosis type 12         RD3       COLL       Leber congenital amaurosis type 12         IL-2R (gamma)       BASS, CARD       Severe combined immunodeficiency         ITPR I       SPIN       Spinocerebellar ataxia type 15         ITGA2B       OTTR       Glanzmann thrombasthenia         vWF       Multiple       von Willebrand disease	Lamellar ichthyosis	PNPLAI	GOLD	Autosomal recessive congenital ichthyoses	PNPLAI	51
CLCN I     MSNZ     Myotonia congenita       RPE65     BRIA     Leber congenital amaurosis       PDE6A     Multiple     Retinitis pigmentosa       PRCD     Multiple     Retinitis pigmentosa       RHO     MAST     Retinitis pigmentosa       RHO     COLL     Leber congenital amaurosis type 12       RD3     COLL     Leber congenital amaurosis type 12       IL-2R (gamma)     BASS, CARD     Severe combined immunodeficiency       ITPR I     SPIN     Spinocerebellar ataxia type 15       ITGA2B     OTTR     Glanzmann thrombasthenia       VWF     Multiple     von Willebrand disease	Leukocyte adhesion deficiency	CD 18	IRSE	Leukocyte adhesion deficiency	CD 18	151,152
RPE65       BRIA       Leber congenital amaurosis         PDE64       Multiple       Retinitis pigmentosa         PRCD       Multiple       Retinitis pigmentosa         RHO       MAST       Retinitis pigmentosa         RD3       COLL       Leber congenital amaurosis type 12         IL-2R (gamma)       BASS, CARD       Severe combined immunodeficiency         ITPR I       SPIN       Spinocerebellar ataxia type 15         ITGA2B       OTTR       Glanzmann thrombasthenia         vWF       Multiple       von Willebrand disease	Myotonia congenital	OLCN I	MSNZ	Myotonia congenita	CTCN I	153,154
PDE6A Multiple Retinitis pigmentosa PRCD Multiple Retinitis pigmentosa RHO MAST Retinitis pigmentosa RHO COLL Leber congenital amaurosis type 12 IL-2R (gamma) BASS, CARD Severe combined immunodeficiency ITPR I SPIN Spinocerebellar ataxia type 15 ITGA2B OTTR Glanzmann thrombasthenia  VWF Multiple von Willebrand disease	Night blindness	RPE65	BRIA	Leber congenital amaurosis	RPE65	155,156
PRCD Multiple Retinitis pigmentosa RHO MAST Retinitis pigmentosa RD3 COLL Leber congenital amaurosis type 12 IL-2R (gamma) BASS, CARD Severe combined immunodeficiency ITPR I SPIN Spinocerebellar ataxia type 15 ITGA2B OTTR Glanzmann thrombasthenia  vWF Multiple von Willebrand disease	Progressive retinal atrophy	PDE6A	Multiple	Retinitis pigmentosa	PDE6A	157,158
RHO MAST Retinitis pigmentosa  RD3 COLL Leber congenital amaurosis type 12  leficiency IL-2R (gamma) BASS, CARD Severe combined immunodeficiency  ITPR I SPIN Spinocerebellar ataxia type 15  ITGA2B OTTR Glanzmann thrombasthenia  VWF Multiple von Willebrand disease	Progressive rod-cone degeneration	PRCD	Multiple	Retinitis pigmentosa	PRCD	84,85
AD3 COLL Leber congenital amaurosis type 12 leficiency IL-2R (gamma) BASS, CARD Severe combined immunodeficiency ITPR I SPIN Spinocerebellar ataxia type 15 ITGA2B OTTR Glanzmann thrombasthenia vWF Multiple von Willebrand disease	Retinal degeneration	RHO	MAST	Retinitis pigmentosa	RHO	159,160
nodeficiency IL-2R (gamma) BASS, CARD Severe combined immunodeficiency ITPR I SPIN Spinocerebellar ataxia type 15 bopathia ITGA2B OTTR Glanzmann thrombasthenia vWF Multiple von Willebrand disease	Rod-cone dysplasia type 2	RD3	COLL	Leber congenital amaurosis type 12	RD3	161,162
ITPR   SPIN Spinocerebellar ataxia type 15  bopathia ITGA2B OTTR Glanzmann thrombasthenia  vWF Multiple von Willebrand disease	Severe combined immunodeficiency	IL-2R (gamma)	BASS, CARD	Severe combined immunodeficiency	IL-2R (gamma)	163,164
bopathia ITGA2B OTTR Glanzmann thrombasthenia  vWF Multiple von Willebrand disease	Spinocerebellar ataxia	ITPRI	SPIN	Spinocerebellar ataxia type 15	ITPRI	48,165
vWF Multiple von Willebrand disease	Thrombasthenic thrombopathia	ITGA2B	OTTR	Glanzmann thrombasthenia	ITGA2B	166,167
	von Willebrand disease	vWF	Multiple	von Willebrand disease	vWF	168
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Dog disease	Dog gene	Breed	Human disease	Human gene	Reference
Gene families and pathways					
Chondrodysplasia	fgf4 retrogene	Multiple	Achondroplasia	FGFR3 <sup>a</sup>	49,169
Copper toxicosis	COMMDI	BEDT	Wilson disease	ATP7B <sup>b</sup>	170,171
Cyclic hematopoiesis	AP3	COIL	Cyclic hematopoiesis	ELA2°	172
Neonatal encephalopathy with seizures	ATF2	SPOO	Neonatal encephalopathy	AP-I⁴	173,174
Primary epilepsy	TC12	LARO	Autosomal dominant lateral temporal epilepsy	PCI16	175,176
Somatic mutations					
Burkitt lymphoma	MYC-IGH translocation	GOLD	Burkitt lymphoma	MYC-IGH translocation	103,177
Chronic myelogenous leukemia	BCR-ABL translocation	GOLD	Chronic myelogenous leukemia	BCR-ABL translocation	103,178
Transitional cell carcinoma of the bladder	BRAF <sup>VS95E</sup>	Multiple	Urothelial bladder cancer and other cancers	BRAF <sup>V600E</sup>	105,179
Behavioral disorders					
Canine compulsive disorder	CDH2	DOBP	Obsessive-compulsive disorder	CDH2	180,181
Impulsivity and inattention; novelty seeking	DRD4	GSD, HUSK, SHIB	Activity-impulsivity-related traits (ADHD)	DRD4	182,183

one as ligand and one as receptor; cOMMD1 interacts directly with ATP7B; cAP3B1 and ELA2 act in the same pathway regulating intracellular trafficking of neutrophil Notes: \*FGF4 and FGFR3 are both in the fibroblast growth factor family,

Briard; Retriever; GSD, Miniature Schnauzer Standard Poodle; TIBT, Tibetan Terrier; WHWT, Boxer; BRIA, Lhasa Apso; MALT, Maltese; MAST, Mastiff; MSNZ, ESSP, Bedlington Doberman Pinscher; ESET, BEAG, Basset Hound; BASS, Pembroke Welsh Corgi; Collie; DACH, Dachshund; RSE, Irish

small numbers of markers and dogs, revealed differences that appeared breed related.<sup>58–60</sup> In 2004, a study was released that examined nearly 400 dogs from 85 breeds at 96 microsatellite markers. This study showed definitively that the breeds, with the exception of a single pair, were genetically distinguishable.<sup>61</sup> In addition, the study showed that there were four primary clusters of breeds that shared genetic similarity with one another. The first was a group of breeds that were developed in Asia and Africa, the second consisted of mastiff-type breeds, the third cluster combined sighthounds with herding breeds, and the fourth (and the largest) was that of sporting/hunting and companion dogs. These breed clusters grouped on similar physical traits, behavioral traits, or geographic origin. When the study was expanded to over 100 breeds, a fifth breed cluster of large mountain dogs was identified.<sup>62</sup>

With the development of large-scale SNP genotyping technologies came a large multi-breed study that examined breed relationships and phenotype diversity.<sup>63,64</sup> Nearly 50,000 SNPs were genotyped on 912 dogs and 225 wolves collected worldwide. Using a phylogenetic analysis of the SNP genotypes and haplotypes built from the SNPs, the authors confirm that the breeds cluster by phenotype or functional ability (Figure 3). They further refine the breed relationships by defining additional clusters within the established groupings such as scent hounds and spaniels within the fourth cluster, and sighthounds separate from herding dogs in the third cluster. This same data set was instrumental in mapping phenotypes that are specific to breed development. Recently, another study examining 1,375 dogs and 19 wolves at the same loci confirmed the separation of the Asian/African breeds from the modern breeds. The authors postulate that this division is likely the result of isolation of these breeds during the explosion of breed creation in Europe preventing hybridization between the breed types.65

Some of the earliest phenotype mapping in dogs was done through candidate gene studies of coat color, primarily in the *MC1R/ASIP* pathway (reviewed in Schmutz and Berryere<sup>66</sup>). These studies showed that most mutations affecting canine phenotypes were shared across breeds indicating that they arose once and were then maintained in the breeds where the result was desirable. However, in a minority of cases, multiple mutations could be found in the same gene with no breed specificity.<sup>67</sup> For example, three mutations were identified in the *TYRP1* gene that creates brown coat color. Combinations of these mutations were identified within the same breed and even within the same dog that suggest that the phenotype has arisen multiple times independently in the history of the dog, likely before the advent of the breeds.

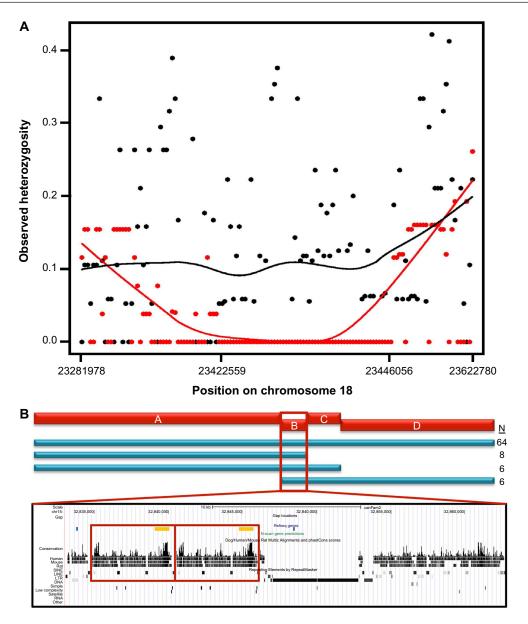


Figure I Examples of homozygosity and haplotype mapping from studies of morphology and disease phenotypes.

Notes: (A) Complete loss of heterozygosity in nine chondrodysplastic breeds (red) is observed across 50 SNPs in a 24 kb region. Observed heterozygosity remains unchanged throughout the region in the eleven control breeds (black). The x-axis shows the position on chromosome 18 (canfam2), and the y-axis shows observed heterozygosity. Copyright © 2015. Courtesy of JSTOR. Reproduced from Parker HG, VonHoldt BM, Quignon P, et al. An expressed Fgf4 retrogene is associated with breed-defining chondrodysplasia in domestic dogs. Science. 2009;325(5943):995–998. (B) Comparison of haplotypes found in 84 Standard Poodles with squamous cell carcinoma of the digit identifies a 28 kb haplotype shared by all, in which a CNV was identified that segregates perfectly with the disease. The red blocks on top indicate LD blocks, and the blue lines show the four haplotypes observed in the data set. The repeat elements that make up the disease associated CNV are outlined in red on the UCSC genome plot of the associated region on chromosome 15. Two copies are found in the reference. Affected individuals carry four to five copies. Reproduced from Karyadi DM, Karlins E, Decker B, et al. A copy number variant at the KITLG locus likely confers risk for canine squamous cell carcinoma of the digit. PLoS Genet. 2013;9(3):e1003409. Abbreviations: SNP, single-nucleotide polymorphism; CNV, copy number variant; UCSC, University of California, Santa Cruz; LD, linkage disequilibrium.

The development of linkage and radiation hybrid maps of the dog genome allowed researchers to begin looking for novel gene variants that lead to major phenotypes. Using a linkage strategy in a crossbred pedigree of dogs, a new locus was identified that associated with solid black and brindle coat colors. <sup>68</sup> Sequencing and haplotype analysis across multiple breeds found that the beta-defensin gene (*CBD103*), a gene usually associated

with the immune system, was responsible for dominant black coat.<sup>69</sup>

The first GWAS performed in the dog analyzed very small numbers to identify trait-associated loci of large effect.<sup>70</sup> Less than ten cases and ten controls were chosen to represent segregating coat types in Boxers and Rhodesian Ridgebacks and were genotyped at 27,000 SNPs. Complete sequencing of the associated haplotypes identified a 100 kb

**Table 2** A list of common internet resources available for accessing canine genome information and tools

Resource	Source	Reference
Canine genome browsers	UCSC	185
	Ensembl	186
	NCBI	187
Transcript annotations	Broad Institute	188
	Ensembl	189
Canine BAC libraries	CHORI (Boxer)	190
	CHORI (Doberman)	191
Canine SNP genotyping	Illumina, Inc.	192
	Affymetrix	193
	Broad	194
Canine expression array	Agilent	195
Canine CGH array	NCSU	196
	Agilent	197
Canine linkage maps	NHGRI	198
	UCDavis	199
Canine RH maps	NHGRI	200
Comparative genome maps	Rennes	201

Abbreviations: BAC, bacterial artificial chromosome; CGH, comparative genomic hybridization; CHORI, Children's Hospital Oakland Research Institute; NCBI, National Center for Biotechnology Information; NCSU, North Carolina State University; NHGRI, National Human Genome Research Institute; Rennes, University of Rennes; RH, radiation hybrid; SNP, single-nucleotide polymorphism; UCDavis, University of California, Davis; UCSC, University of California, Santa Cruz.

region around *MITF* as the source of white spotting in Boxer and Boxer-related breeds. A follow-up analysis found that a large CNV on CFA18 was responsible for the hair ridge in the Rhodesian Ridgebacks.<sup>71</sup> The success of these association studies confirmed the power of the canine GWASs to uncover simple genetic traits.

Many of the most interesting traits found in dogs are those that define the breeds. These cannot be traced through pedigrees because they do not segregate within breeds (Figure 2). In order to identify these genes, large multi-breed mapping sets were developed. Brachycephaly, the foreshortened skull and snout, is a complex trait found in many breeds such as Bulldogs, Pugs, and Pekingese. Multi-breed GWASs have identified up to eight loci significantly associated with the skull phenotype. 64,72,73 Homozygosity mapping and haplotype comparisons at one of these loci identified a missense mutation in BMP3 that was shown to have biological relevance through zebrafish knock-down and rescue assays.<sup>73</sup> The combination of multi-breed GWAS and homozygosity/ haplotype analysis has been used successfully to identify mutations responsible for traits such as leg length, coat type and color, skull shape, and body size. 47,49,64,74-76

A comprehensive study of canine skeletal traits came from the collection of a large cohort of Portuguese Water Dogs (PWDs) with extensive morphologic data.<sup>77</sup> Based on radiographic measurements, genome regions were

associated with skeletal traits such as skull length, pelvic width, bone width, and overall body size. Body size was associated with two markers on chromosome 15, one of which was near the insulin-like growth factor 1 (*IGF1*). This finding was extended using a multi-breed approach to identify the causative alleles. The initial 4 Mb associated region was fine mapped by SNP genotyping both large and small PWDs as well as dogs from small (<9 kg) and large (>30 kg) breeds. A single haplotype was identified in all 14 small breeds that included the *IGF1* gene. This same haplotype was present in the small PWDs clearly displaying that studies carried out in a single breed could be significant in other breeds, especially in the case of highly selected morphologic traits.

Variation in canine body size is a particularly popular subject in mapping studies. 64,78,79 From the smallest breeds like the Chihuahua to the giant English Mastiff, there can be a tenfold increase in height and a 50-fold increase in weight.80 This variation is almost entirely inherited as it is maintained within breed structures where variation in size and weight is extremely low (Figure 4). A recent study shows that seven variants in six genes can explain 50% of size reduction in dogs. 76 The smallest breeds carry all seven of the mutations, while breeds averaging 41 kg (90 lbs) or more rarely carry any of the mutations (Figure 5). In comparison, the mapping of height in humans has identified 180 loci and yet explains approximately 10% of observed variation.81 This is an excellent example of how canine population structure can help simplify the genetics of a complex phenotype. The constant selective pressure on desirable traits while maintaining current standards can fix the most effective mutations while eliminating the steady build of lesser deleterious mutations. If this axiom holds true across phenotypes, it will prove especially important when applied to disease mapping.

## The dog as a model to study human genetic disease

Dogs share more genetic similarity with humans than do traditional model organisms such as the mouse<sup>39</sup> and an estimated 360 naturally occurring analogous diseases.<sup>82</sup> Further, many of the traditional gene discovery methods discussed above (linkage analysis, GWAS) can be difficult and costly in humans due to the need for large numbers of samples to make up for short stretches of linkage disequilibrium and extensive disease heterogeneity. These same studies can be enhanced in dogs due to the predisposition to certain diseases within breeds where the unique population structure limits heterogeneity and increases linkage



Figure 2 Domestic dogs display a range of morphologies some of which are represented here.

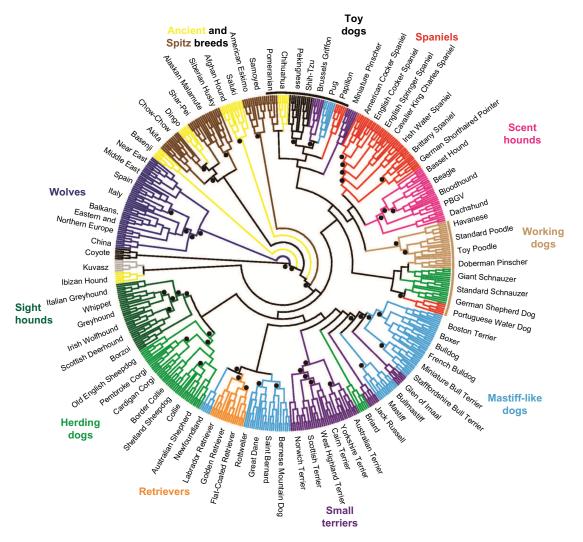
Notes: Profiles of an (A) Afghan Hound and (B) Pug display two of the most prominent skull morphologies – dolichocephalic and brachycephalic, respectively. (C) The Irish Wolfhound standing side by side with the Border Terrier are examples of the range in sizes found in full-grown dogs of different breeds. (D) The group of Bernese Mountain Dogs display the phenotypic homogeneity that is found within a breed.

disequilibrium.<sup>82,83</sup> As such, the dog offers an alternative and parallel system in which human diseases can be studied, both for discovering information about susceptibility and disease development and for predicting the course of a disease and optimal treatments.

Simple, monogenetic diseases in dogs often have the same genetic causes in humans (Table 1). One such example of this is progressive rod—cone degeneration (prcd) in dogs and its analogous disease in humans, retinitis pigmentosa (RP). §4 In one of the first linkage-mapping studies, prcd was mapped to canine chromosome 9, orthologous to human chromosome 17q where a human RP locus was suggested to reside. Using haplotype analysis and a retinal cDNA library, a novel gene (*PRCD*) was identified that harbored a mutation segregating

perfectly with the canine disease. The identical mutation was found in a woman diagnosed with autosomal recessive RP.85 This is a perfect example of how canine disease genetics mimics human and in this case allowed for the identification of a previously unknown gene and mutation. There are many other examples in which genetic mapping of diseases in dogs has led to the discovery of mutations in a homologous gene in humans, some of which can be found within the list of gene mutations in Table 1.

Single-gene disorders have played an important part in establishing the canine system as an exemplary counterpart to human studies; however, complex diseases are the area of greatest need. Because of the nature of the disorder, complex diseases are difficult to model in a laboratory as



 $\textbf{Figure 3} \ \text{Phylogenetic tree of 80 domestic dog breeds rooted with the coyote.}$ 

Notes: The neighbor-joining cladogram in based on consensus haplotype sharing of phased, ten-SNP windows spanning the genome. Each breed is represented by six dogs. Color coding of the branches is based on phenotypical or historical groups developed by dog fanciers. By Dots indicate >95% bootstrap support from 1,000 replications. Reproduced from Vonholdt BM, Pollinger JP, Lohmueller KE, et al. Genome-wide SNP and haplotype analyses reveal a rich history underlying dog domestication. Nature. 2010;464(7290):898–902.63

Abbreviations: SNP, single-nucleotide polymorphism; PBGV, Petit Basset Griffon Vendéen.

they require interactions or correlated action from multiple genes as well as some degree of environmental interaction. As an intermediate, the dogs provide an intriguing option to traditional models or human studies. They develop disease naturally through inheritance and interactions with our environment, yet their breed structure creates independent and unique strains in which heterozygosity is reduced and mapping is less complex.

One of the best examples of the canine role in elucidating genetic contributors to a complex human disorder can be found in the sleeping disorder narcolepsy. Canine narcolepsy with cataplexy was one of the first diseases mapped in the dog using microsatellites in a colony of narcoleptic Doberman Pinschers and Labrador Retrievers where the disorder segregated as an autosomal recessive trait. Extensive fine mapping

and resequencing identified a SINE insertion in the *HCRTR2* gene. <sup>86</sup> This finding revealed a family of neurotransmitters that had not been previously associated with sleep. Shortly following this discovery, a mutation was identified in a human early-onset narcolepsy case, and more importantly, a deficiency in the hypocretin system was identified in the majority of cases of narcolepsy with cataplexy showing the importance of the gene family in the human disease and altering the future of sleep studies. <sup>87</sup>

Many of the most prevalent complex diseases in people are also very common in dogs such as diabetes, epilepsy, heart disease, and cancer. In 2005, a canine GWAS identified a repeat expansion in *NHLRC1* (previously known as *EPM2B*) as the cause of a canine version of epilepsy in Dachshunds that is similar to Lafora disease.<sup>88</sup> This finding

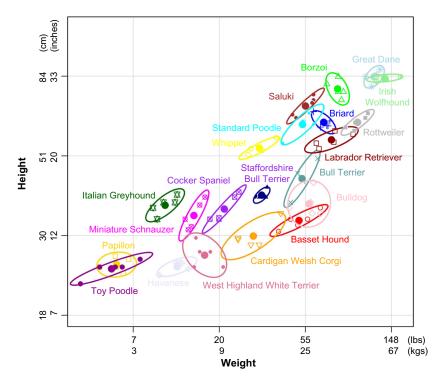


Figure 4 Average size range of domestic dog breeds.

**Notes:** Average size of the domestic dog can range from 12 to 92 centimeters in height and 2 to 70 kilograms in weight. This range is found across all breeds, while individual breeds will cover only a subset of that range. The measured height at the withers and weight of five dogs from 21 different breeds are graphed with weight on the x-axis and height on the y-axis. The full range of sizes is represented, but each breed comprises only a fraction of the variation. Breeds are indicated by different colors. The points representing the five individuals of each breed are circled with the same color line.

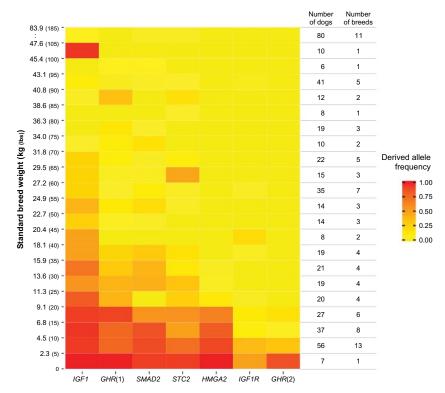


Figure 5 Alleles at six size loci combine to reduce size in dogs.

Notes: The frequency of each size-associated allele is indicated by the shade of red in a block with red =100% and yellow =0%. Five hundred dogs were genotyped at each locus and grouped by breed average weight divided into 5-pound increments. The frequency of the derived variant allele increases with a decrease in size at all loci. Copyright © 2013. Rimbault M, Beale HC, Schoenebeck JJ, et al. Derived variants at six genes explain nearly half of size reduction in dog breeds. Genome Res. 2013;23(12): 1985–1995.76

coincided almost exactly with the discovery of mutations in the same gene in the human disease. Since then, mutations in ten different genes have been identified as causative for forms of epilepsy in ten different breeds of dog (reviewed in Ekenstedt and Oberbauer). The availability of many breeds, each with independent disease inheritance, allows for the discovery of complex disease pathways, one gene at a time.

Cancers in dogs offer a unique opportunity to inform human disease. As a result of the founder effect, canine cancers are often breed specific or overrepresented in particular breeds. For instance, 25% of Bernese Mountain Dogs (BMDs) are estimated to develop histiocytic sarcoma, and 12.5% of Rottweilers develop osteosarcoma. That certain cancers tend to segregate within specific breeds reduces the genetic and environmental noise that is associated with those cancers, and allows for a genetic association to be made more readily than would be in human cases.

One example is histiocytic sarcoma, a rare, lethal cancer in humans that often strikes juveniles. It is also a rare tumor in dogs but is very common in BMDs allowing for mapping studies that can elucidate genetic factors that may be informative in both species. The first GWAS on histiocytic sarcoma was undertaken in BMD and revealed an association with the MTAP-CDKN2A locus on CFA11,92 a locus homologous to human 9p21 which is implicated in many human diseases including cancers. 93 Similarly, squamous cell carcinoma of the digit in Standard Poodles, Giant Schnauzers, and Briards is associated with a CNV on CFA15 near KITLG.94 These studies capitalized on the minimal genetic heterozygosity of cancer inheritance in the dog. Lymphomas are common in both dogs and humans and represent an area of oncology study that would immediately benefit both species. A recent GWAS in Golden Retrievers has identified two loci on CFA5 that are associated with both lymphoma and hemangiosarcoma in the breed.95 Different forms of cancers associated with the same locus suggest that there are mutations that affect tumor formation in general and comparing different tumor types with the same causative mutations may help to ferret out the genetics behind tissue specificity.

### **Conclusion and future prospects**

The promise of dog genetic studies lies in translation of our findings to improved treatments in both dogs and people. For instance, Golden Retriever muscular dystrophy, a homologue of Duchenne muscular dystrophy (DMD), is caused by exon skipping followed by early truncation of the dystrophin (*dmd*) gene, the same gene that is mutated in two thirds of human beings with DMD.<sup>96</sup> Because *dmd* is one of the longest genes

in the genome, new genetic approaches to treat DMD have been to promote in-frame exon skipping of the mutated area of *dmd* to produce a more functional, partial protein leading to a less severe phenotype. To find a tolerable and long-lasting therapy, a small nuclear RNA delivered through a recombinant adenovirus was tested on Golden Retrievers with muscular dystrophy. <sup>97,98</sup> The success of these trials has recently led to a delivery and safety trial specifically staged to prepare for human trials. <sup>99</sup>

Muscular dystrophy is not the first area in which gene therapy has been used successfully in the dog leading to human trials. Multiple forms of canine progressive retinal atrophy have been successfully treated using gene supplementation (reviewed in Petersen-Jones<sup>100</sup>). Clinical trials on RPE65-deficient RP, Leber congenital amaurosis type 2, treated with gene augmentation therapy, showed stable vision improvement and no adverse effect over 3 years.<sup>101</sup> Recent success in treating X-linked RP in the dog shows similar promise for translation to human.<sup>102</sup>

In addition to inherited mutations, studies are showing that canine diseases share many somatic alterations with human diseases. For example, the Philadelphia chromosome, a common translocation between human chromosomes 9 and 22 found in chronic myelogenous leukemia, is also found in dogs with the same disease (translocation between canine chromosomes 9 and 26).<sup>103</sup> A similar translocation has been found in human and canine Burkitt lymphoma (between human chromosomes 8 and 14 and between canine chromosomes 13 and 8), and the RB1 gene locus is deleted in both human and canine chronic lymphocytic leukemia. These findings suggest that there are inherently fragile regions of the genome that support tumorigenesis and further comparison of human and canine tumor DNA may enable the discovery of novel cancer genes and mutations. Studies investigating osteosarcoma in dogs have suggested some candidate genes that may be important in the human disease. A comparison of the expression profiles of human and canine osteosarcoma found that overall, the expression profiles were indistinguishable, but a closer inspection of individual genes identified two genes that were expressed in all dogs but only a subset of humans. These genes, IL-8 and SLC1A3, are associated with a more aggressive form of the cancer. 104

Highly similar mutation loads will allow for the testing of targeted treatments and therapies in dogs that have the potential to benefit humans as well. The goal of personalized medicine is to tailor treatment strategies to fit the individual patient. Sequencing of the transcriptome of canine invasive bladder cancers has recently identified the common human BRAF<sup>V600E</sup>

mutations in >85% of tumors.<sup>105</sup> Because the BRAF<sup>V600E</sup> mutations are present in 8% of all human cancers, they have been the focus of multiple clinical trials using targeted drug therapies.<sup>106</sup> Identification of identical mutations in a naturally occurring dog tumor puts the dog at the forefront of preclinical trial strategies for highly specific therapies enabling the determination of dosage amounts, testing combination therapies, and determining efficacy prior to costly human trials.

Tremendous advances have been made in canine genetic and genomic studies since the first backcrosses were performed and proteins isolated. As a system for scientific discovery, canine genomic researchers now have the necessary tools and the ability to answer questions of inheritance, association, and causality. Novel treatment strategies have been introduced based on canine genetic studies, and the population structure encourages the development of assays to interrogate the effects of environmental and genetic background on inherited mutations. With modern molecular techniques, canine genomic information is booming, adding to our knowledge of the dog, how we have shaped its history, and how it, in turn, is helping us to improve our future.

#### **Disclosure**

The authors report no conflicts of interest associated with this work.

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