

1. Lecture opened with statement that in 161 years no significant discoveries uncovering the cause of Ménière's or a viable treatment have happened.
2. Clinical Presentation-
  - a. Vertigo, aural pressure, roaring tinnitus and fluctuating hearing loss
  - b. Hearing loss begins with low frequencies, then proceeds to a tent like audiogram and then a progression downwards.
3. Mean age of onset is 38 years. Mean age of diagnosis is 50-54 years.
4. Impact on Quality of life is severe as shown in slide below based on a survey of patients.

## Impact of Meniere's disease on Quality of Life

Study mean	Study population description
900	Probability sample of children in San Diego County
810	Pre-injury (baseline) trauma recovery project adult patients
788	Probability sample of adults in San Diego County
720	Adult patients with non-insulin-dependent diabetes
700	Patients treated at UCSD Regional Burn Treatment Center, at point of maximum recovery
650	Trauma recovery project patients six months after release from hospital
649	Baseline score for AIDS patients treated with AZT
634	Baseline score for AIDS patients treated with placebo
616	Baseline score for Health Care Utilization Project, No. 1 (HCUPI) patients: ill adults with life-threatening diseases (AIDS, cancer, renal, pulmonary, etc.); live patient scores stayed at about this level throughout the study
600	Mean QWB study end score for AIDS patients treated with AZT
<b>.561</b>	<b>Baseline, Ménière's disease patients</b>
.550	Elderly adults with severe chronic obstructive pulmonary disease
.506	Noninstitutionalized Alzheimer's patients
<b>.505</b>	<b>Ménière's disease patients, days with active episode of disease</b>
.457	Patients with AIDS or cancer, six days before death

*Representative scores to aid interpretation of Ménière's disease study Quality of Well-being (QWB) results*

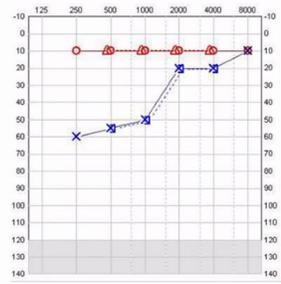
**Source**  
Impact of Ménière's Disease on Quality of Life

Otology & Neurotology 22(6):888-894, November 2001.

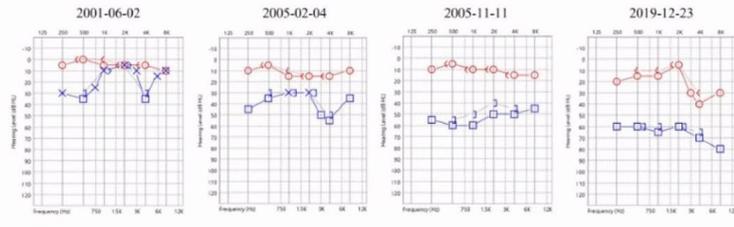
Anderson, J. P., & Harris, J. P. (2001). Impact of Meniere's disease on quality of life. *Otology & Neurotology*, 22(6), 888-894.

# Typical hearing loss

Hearing loss over time



A Case 1



Chen H-L, Tan C-T, Lai J-T, Liu T-C. Long-term hearing progression of Ménière's disease. Ear, Nose & Throat Journal. 2022;0(0)

Need to be careful with TX in case Bilateral develops

## Longterm course

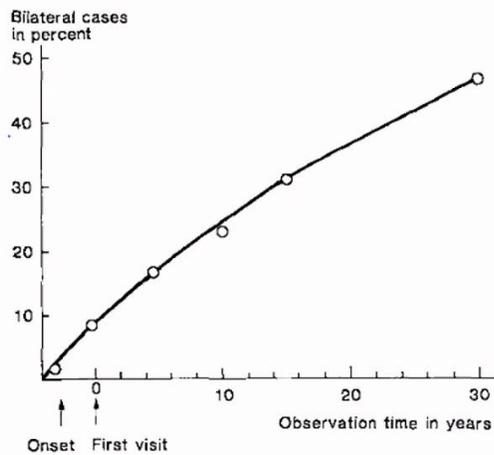
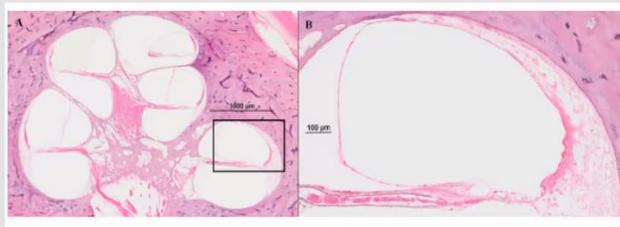
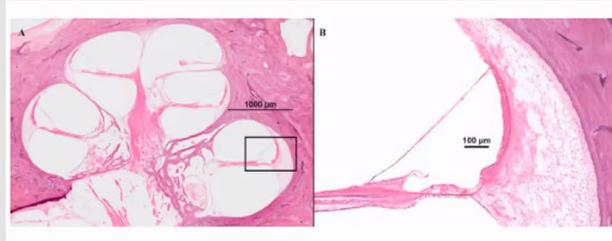


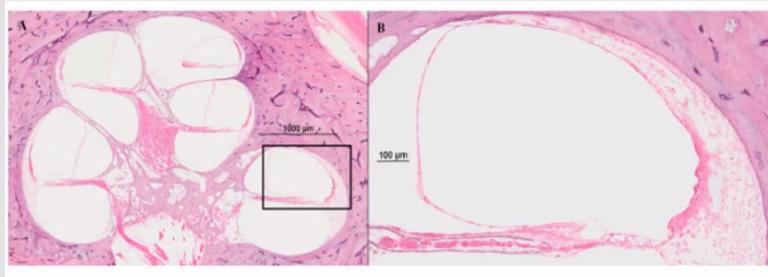
Fig. 1. Number of bilateral cases in percent related to duration of disease.

## Histopathology of Meniere's disease



*Courtesy of M. Paparella*

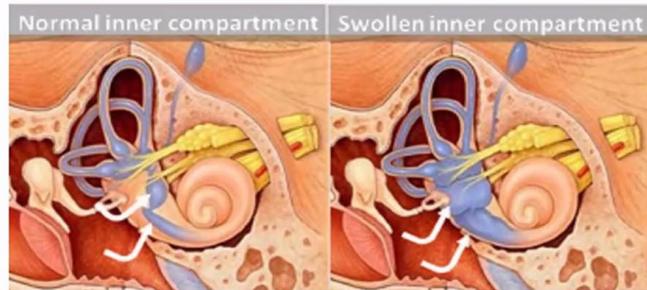
Meniere's  
disease is  
characterized  
by  
endolymphatic  
hydrops



*Courtesy of M. Paparella*

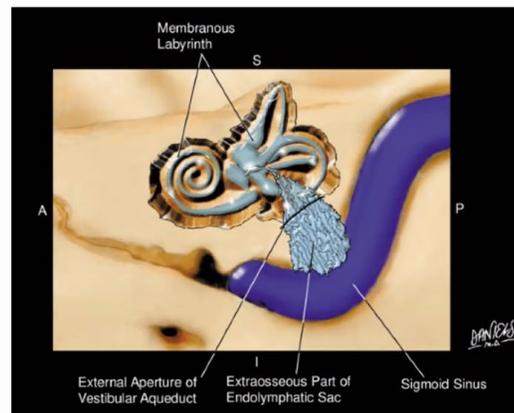
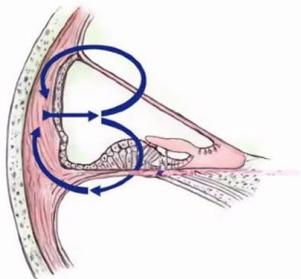
All Meniere's cases have endolymphatic hydrops but not all ears with endolymphatic hydrops have Meniere's

- Rauch SD, Merchant SN, Thedinger BA. Meniere's Syndrome and Endolymphatic Hydrops: Double-Blind Temporal Bone Study. *Annals of Otolaryngology, Rhinology & Laryngology*. 1989;98(11):873-883



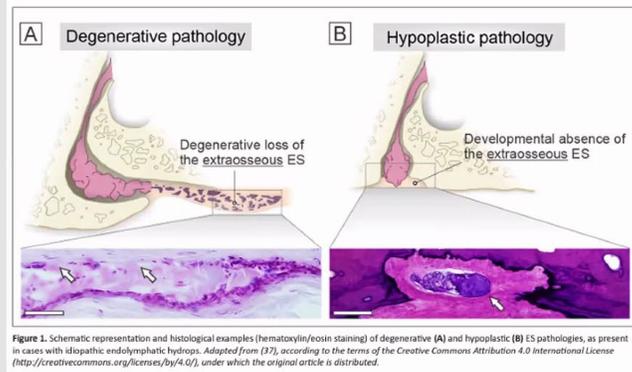
Fluid circulation in the inner ear- In Meniere's too much secretion or too little reabsorption?

- Radial flow
- Longitudinal flow



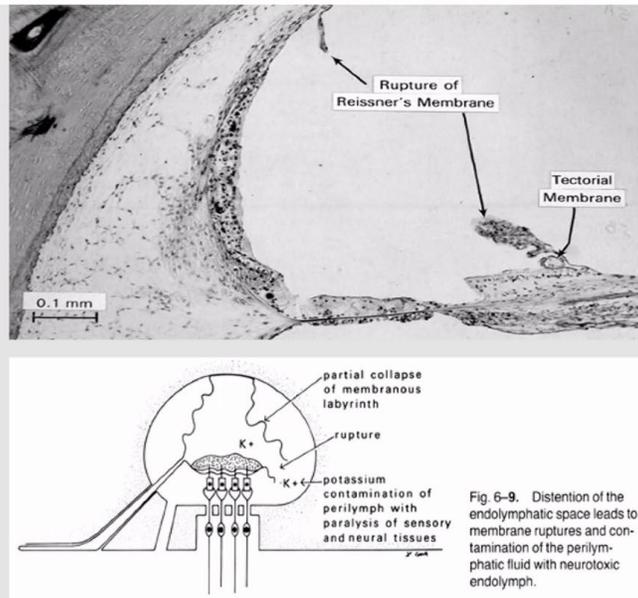
Why do MD ears have too much endolymph?

- One hypothesis is that the endolymphatic sac malfunctions and there is decreased resorption



Another hypothesis

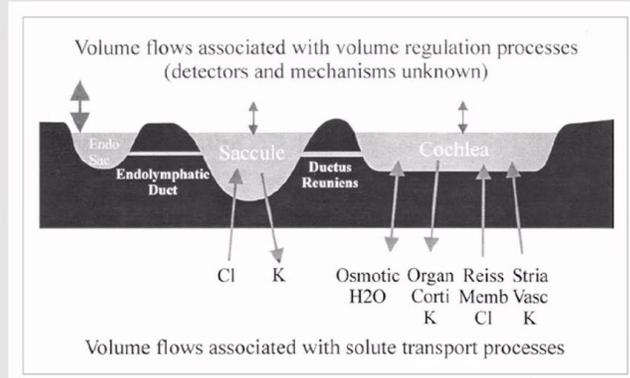
Histopathology of Meniere's disease "rupture theory"



After: H.F. Schuknecht

At steady state each compartment can manage quite well, but more absorption of fluid means the endolymphatic sac takes on more importance.

Inner ear fluid regulation and flow varies according to volume

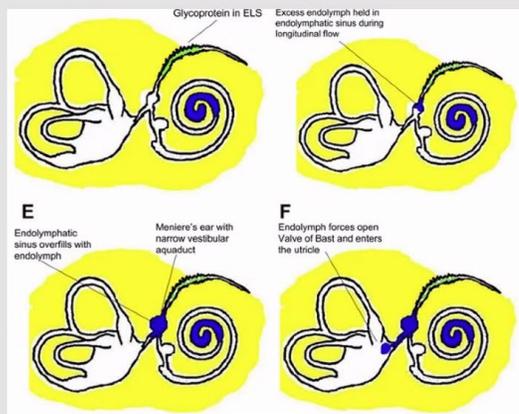


SALT, A.N. (2001), Regulation of Endolymphatic Fluid Volume. Annals of the New York Academy of Sciences, 942: 306-312

Bill Gibson's Hypothesis

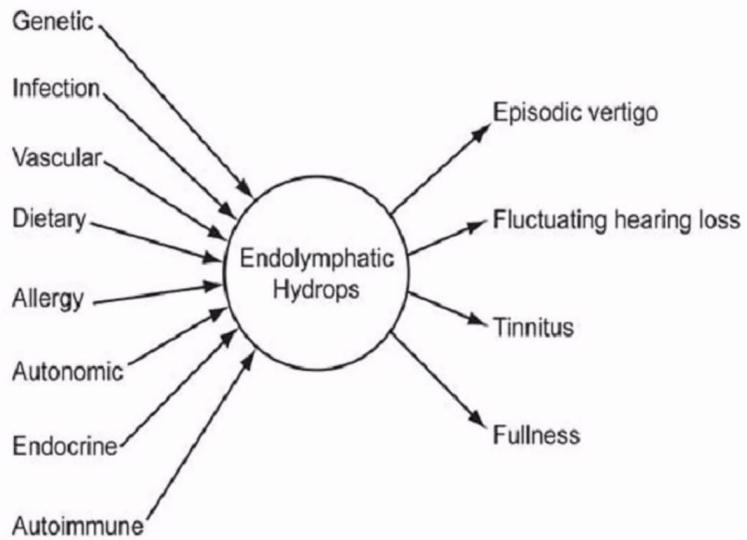
Why does e. hydrops lead to attacks of vertigo?

- Another hypothesis is that the endolymphatic sac malfunctions and there is reverse flow into utricle that initiates attacks of vertigo (Gibson)



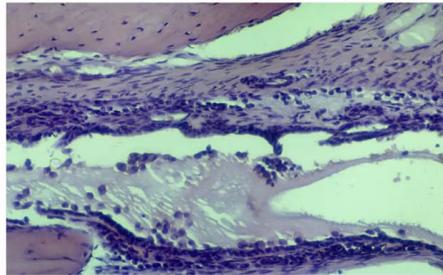
There are a number of known causes:

Polygenic traits often have an environmental trigger.



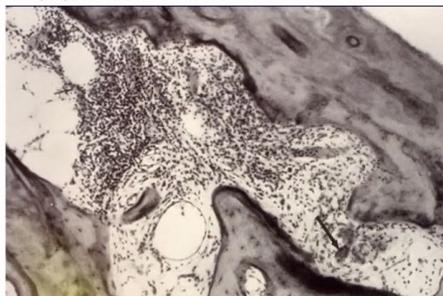
Examples of immunity and infection: Patients with Syphilis are known to have Meniere's like attacks:

Environmental triggers causing Meniere's-like syndromes



Immune reactivity-sterile antigen or viruses "lymph node of inner ear"

Tomiyama & Harris, Acta Otolaryngol. 1989 Mar-Apr;107 (3-4):202



Syphilitic inflammation

Courtesy of F. Linthicum, M.D.

Around 8% of families have genes known to cause Ménière's:

## The Genetics of Meniere's Disease

- Evidence for ethnic diversity in MD
- Sex bias (females)
- Familial 6-8%
- Caucasian
- Implicated genes:
  - FAM136A, DTNA, PRKCB, SEMA3D and DPT (familial).
  - GJB2, USH1G, SLC26A4, ESRRB, and CLDN14, NTN4 and NOX3 (sporadic).

Self-identified ethnicity (count, %)	Ménière's disease cohort	House clinic patients		
African	5 (1.3)	12 (3.2)		
Asian	16 (4.3)	45 (11.9)		
Hispanic	45 (12)	60 (15.9)		
Caucasian	310 (82.4)	260 (69.0)		
Total	376	377	$\chi^2$	$p$
			23.2	<0.001

Genetic Evidence for an Ethnic Diversity in the Susceptibility to Ménière's Disease  
Otolology & Neurotology 34(7):1336-1341, September 2013.

<https://pubmed.ncbi.nlm.nih.gov/23598705/>

## What do we think we know:

- Radial flow versus longitudinal flow or both
- Over production versus under absorption
- E. sac hypoplastic or degenerative
- Hyperosmolar products in the e. sac (Saccin, Aquaporins)
- Reverse flow from endolymphatic sinus into utricle
- e. sac is lymph node of the inner ear and is immunoreactive

But we do not have any idea of what creates the trigger for endolymphatic hydrops

This portion was presented by Rick Friedman, a clinician scientist with many years' experience with Ménière's:



## Overview: The Age of Genomics

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- Vast database of human genomic sequence.
- First task, finding single nucleotide variation (SNV) between cases and controls.
- Establishing causation depends upon allele frequency in population vs. cases, regions of expression, assessing potential of disease causation of identified SNV, analysis of connectivity between discovered genes.
- ULTIMATE PROOF lies in model organism.

A family member of the group who owned the Minnesota Twins has Ménière's and they provided the money for this research project:

### Charitable foundation

- Family member with Meniere's disease for many years contacted me to see if I had a vision for high-risk research into this disorder
- Dr. Friedman at UCSD had a stored bank of DNA samples from 527 patients with Meniere's
- Met with the family and proposed to do a Whole Genome Wide analysis of these patients to see if there might be common mutations that could point to underlying pathogenesis and potential therapeutic targets
- Family provided \$1.3 million for this project



## Full Disclosure

- I am not a geneticist
- From here on in I am reporting the results of the team from Computational Biology and the Genome Institute

Stopped at 527 as data was repeating and on the interest of cost:



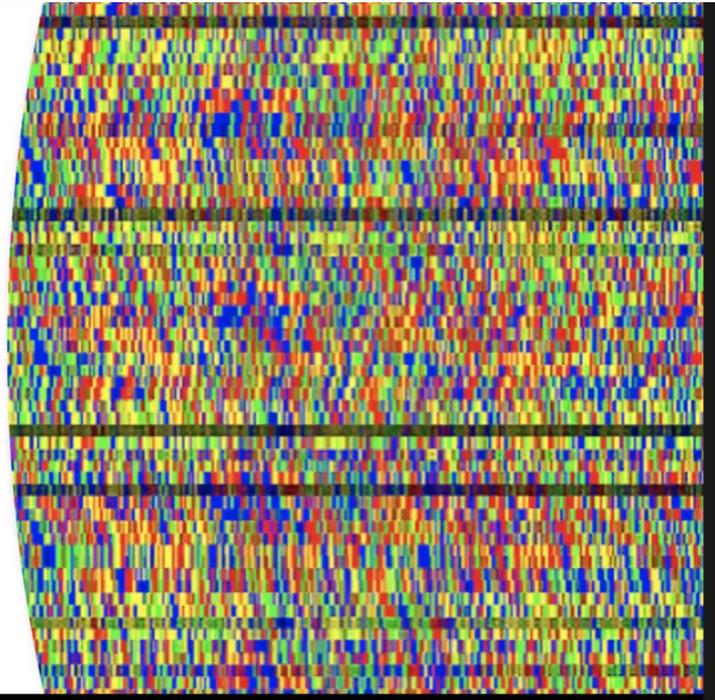
### Overriding Hypothesis: MD is a Polygenic Trait

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- We sequenced 527 genomes of well-characterized MD patients with unilateral disease.
- Restricted analysis to SNVs with extremely rare population frequencies.
- Assessed the probability of our “disease causing” SNVs occurring randomly.
- Assessed connectivity via STRING analysis.

## How to sort out large sequence data sets.

- Well-phenotyped population.
- Salivary DNA purified (AmpureXP beads) quality controlled.
- Seq libraries (400bp frags; Kappa Biosystems).
- Sequencing (NovaSeq 6000) 30X coverage.
- Include variants based upon rarity in the MD population vs. controls.
- Assess impact of variant on protein structure/function.
- Look for appropriate tissue expression.

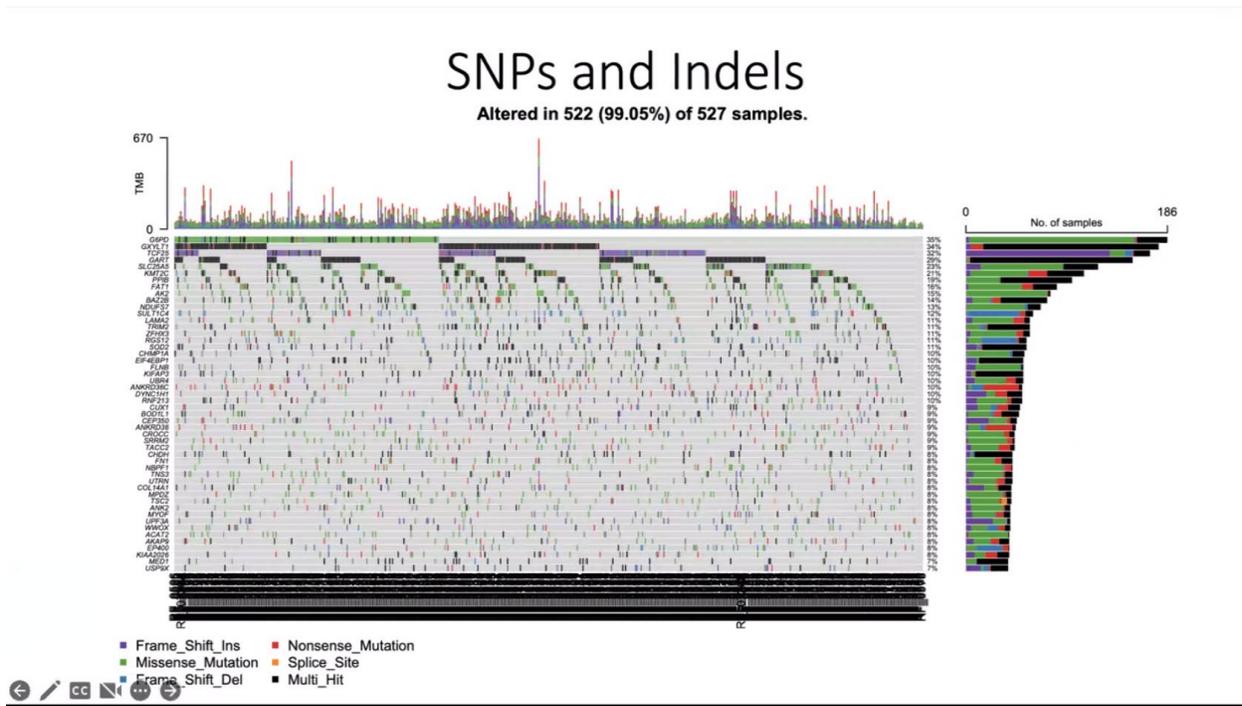


## Variant Prioritization

- 527 samples (definite MD):
  - ~4 million variants per sample
  - Filtered to 16606 unique variants
- Filtering criteria
  - Protein altering events
  - Gnomad v3 max population allele frequency < 0.01 (rare variants)
  - Deleterious according to SIFT and PolyPhen software
  - Expressed in adult mouse cochlea or human developing cochlea – single cell RNAseq in public data bases



Genes on the left panel were altered in 99% of Ménière's patients:



Wanted to know if the discoveries were linked.

## Variant Analysis: Network propagation

- STRING network specific to human cochlea (10,763 expressed genes, filtered by in-house RNA-seq of human cochlea)
- Network propagation from mutated genes (9509 unique genes - almost every expressed gene, Flag\* genes removed)
- z-scores under null model (mutations are random).
- Look for functional clues using Gene Set Over-representation Analysis of 273 top genes with  $fdr < 0.2$

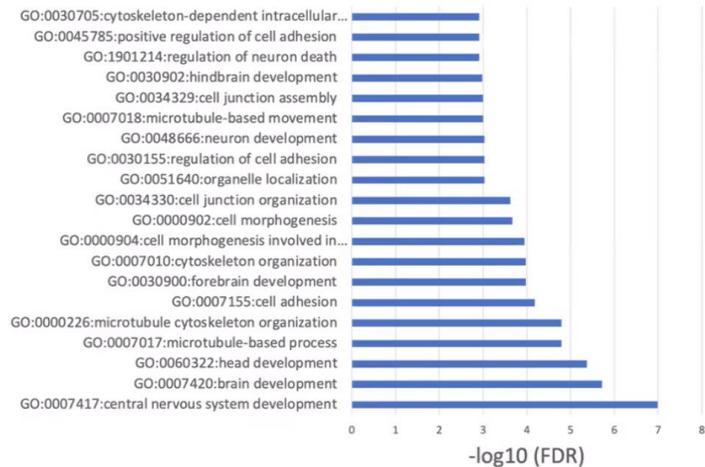
\*<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4267152/>

Highly significant discovery- IE the P Values very significant, indication the genes are responsible:

## Frequency/z-score (top 30 genes) compared to population controls

	A	B	C	D	E	F	G
1	query	entrez gene symbol	name	z	lfr	freq	
2	ENSG000001591	2618 GART	phosphoribosylglycinamide formyltransferase	22.419542814	3.79043165445E-14	0.29601518	
3	ENSG000000783	54715 RBFOX1	RNA binding fox-1 homolog 1	22.197271424	5.1147615417E-14	0.548387097	
4	ENSG000001602	2539 G6PD	glucose-6-phosphate dehydrogenase	18.352734678	6.65486546374E-09	0.356736243	
5	ENSG000001961	3123 HLA-DRB1	major histocompatibility complex, class II, DR	17.749137256	3.10661769538E-08	0.434535104	
6	ENSG000000050	292 SLC25A5	solute carrier family 25 member 5	17.645778687	3.87843260173E-08	0.352941176	
7	ENSG000001120	56940 DUSP22	dual specificity phosphatase 22	16.446413356	5.92875084228E-07	0.461100569	
8	ENSG000001767	197322 ACSF3	acyl-CoA synthetase family member 3	16.126016052	1.14584705949E-06	0.375711575	
9	ENSG000001001	23331 TTC28	tetratricopeptide repeat domain 28	15.195832587	6.73272920152E-06	0.366223909	
10	ENSG000001972	5265 SERPINA1	serpin family A member 1	14.348816983	3.06065249994E-05	0.24288425	
11	ENSG000000351	84908 FAM136A	family with sequence similarity 136 member A	13.676128798	9.21640849299E-05	0.39658444	
12	ENSG000001964	9612 NCOR2	nuclear receptor corepressor 2	13.517336062	0.0001167142	0.159392789	
13	ENSG000001667	5479 PPIB	peptidylprolyl isomerase B	12.961964544	0.0002760987	0.187855787	
14	ENSG000001109	506 ATP5F1B	ATP synthase F1 subunit beta	12.848940605	0.0003245088	0.149905123	
15	ENSG000001512	283464 GX YLT1	glucoside xylosyltransferase 1	12.203136487	0.0008175089	0.339658444	
16	ENSG000000703	8219 CLTCL1	clathrin heavy chain like 1	11.960186507	0.0011574336	0.151802657	
17	ENSG000001973	3064 HTT	huntingtin	11.839207898	0.0013557816	0.132827324	
18	ENSG000001987	10497 UNC13B	unc-13 homolog B	11.622065307	0.0018150627	0.193548387	
19	ENSG000001059	4967 OGDH	oxoglutarate dehydrogenase	11.583367864	0.001896962	0.174573055	
20	ENSG000001393	6996 TDG	thymine DNA glycosylase	11.564100596	0.0019377182	0.210626186	
21	ENSG000001154	2335 FN1	fibronectin 1	11.47947122	0.0021837511	0.10056926	
22	ENSG000001789	2580 GAK	cyclin G associated kinase	11.346919932	0.0025992448	0.110056926	
23	ENSG000001643	51752 ERAP1	endoplasmic reticulum aminopeptidase 1	11.311872825	0.0027091031	0.185958254	
24	ENSG000001570	491 ATP2B2	ATPase plasma membrane Ca2+ transporting	11.126138648	0.0034107933	0.134724858	
25	ENSG000001320	10207 PATJ	PATJ crumbs cell polarity complex component	10.980361237	0.0040739209	0.132827324	
26	ENSG000001311	5119 CHMP1A	charged multivesicular body protein 1A	10.883760276	0.0045133494	0.170777989	
27	ENSG000000044	204 AK2	adenylyate kinase 2	10.599534817	0.0063989197	0.15370019	
28	ENSG000001230	29994 BAZ2B	bromodomain adjacent to zinc finger domain	10.574457927	0.0064962978	0.1146110057	
29	ENSG000002579	1523 CLX1	cut like homeobox 1	10.53323069	0.0067822297	0.111954459	
30	ENSG000001245	56897 WRNIP1	WRN helicase interacting protein 1	10.490641141	0.0071648768	0.170777989	

## Over-representation Analysis



Over-representation (or enrichment) analysis is a statistical method that determines whether genes from pre-defined sets are present more than would be expected (over-represented) in a subset of data

## Over-representation analysis: microtubule-based processes

- These 21 genes “explain” 95.3% of cases

### Gene set: GO:0007017 microtubule-based process <sup>+</sup>

FDR	P Value		
<b>0.0014179</b>	<b>1.3127e-7</b>		
Gene Set Size	Expected Value	Overlap	Enrichment Ratio
<b>480</b>	<b>5.6281</b>	<b>21</b>	<b>3.7313</b>

User ID <sup>+</sup>	Gene Symbol	Gene Name
AKAP9	AKAP9	A-kinase anchoring protein 9
AP351	AP351	adaptor related protein complex 3 subunit sigma 1
ATXN7	ATXN7	ataxin 7
C2CD3	C2CD3	C2 calcium dependent domain containing 3
CEP350	CEP350	centrosomal protein 350
CHMP1A	CHMP1A	charged multivesicular body protein 1A
CUL9	CUL9	cullin 9
DNAH14	DNAH14	dynein axonemal heavy chain 14
DNHD1	DNHD1	dynein heavy chain domain 1
DYNC1H1	DYNC1H1	dynein cytoplasmic 1 heavy chain 1
FLNA	FLNA	Filamin A
FMN2	FMN2	formin 2
HTT	HTT	huntingtin
HYDIN	HYDIN	HYDIN, axonemal central pair apparatus protein
KATNAL2	KATNAL2	katanin catalytic subunit A1 like 2
KIFAP3	KIFAP3	kinesin associated protein 3
MAP2	MAP2	microtubule associated protein 2
NEFH	NEFH	neurofilament heavy
OBSL1	OBSL1	obscurin like 1
PCM1	PCM1	pericentriolar material 1
SON	SON	SON DNA binding protein

## Over-representation analysis: cell junction assembly

- These 10 genes “explain” 77.2% of cases

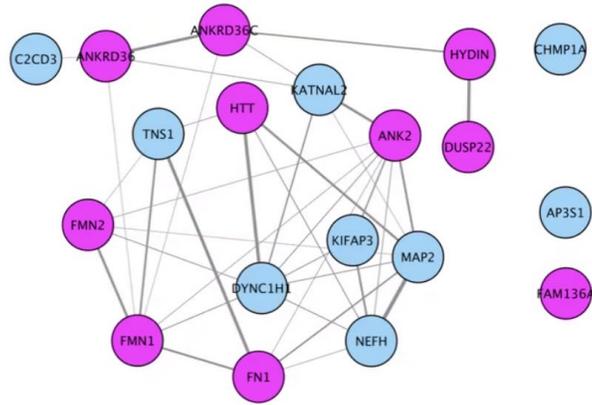
### Gene set: GO:0034329 cell junction assembly <sup>+</sup>

FDR	P Value		
<b>0.044281</b>	<b>0.000024598</b>		
Gene Set Size	Expected Value	Overlap	Enrichment Ratio
<b>167</b>	<b>1.9581</b>	<b>10</b>	<b>5.1070</b>

User ID <sup>+</sup>	Gene Symbol	Gene Name
ANK2	ANK2	ankyrin 2
DUSP22	DUSP22	dual specificity phosphatase 22
EPHA2	EPHA2	EPH receptor A2
FLNA	FLNA	filamin A
FMN1	FMN1	formin 1
FN1	FN1	Fibronectin 1
ITGB4	ITGB4	integrin subunit beta 4
KDR	KDR	kinase insert domain receptor
RUNX1	RUNX1	runt related transcription factor 1
TNS1	TNS1	tensin 1

These 16 functionally related genes explain 95.1% of cases

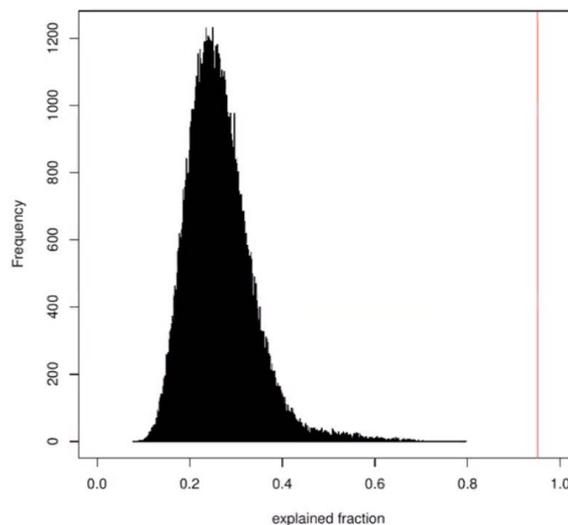
- Solitary genes are not known to interact with the rest of the genes (STRING)
- Line thickness reflects confidence that the interaction exists, range 30-90% (STRING)
- Magenta genes are linked to hearing disorders



STRING Analysis: software package assessing connectivity of proteins in cellular physiological pathways.

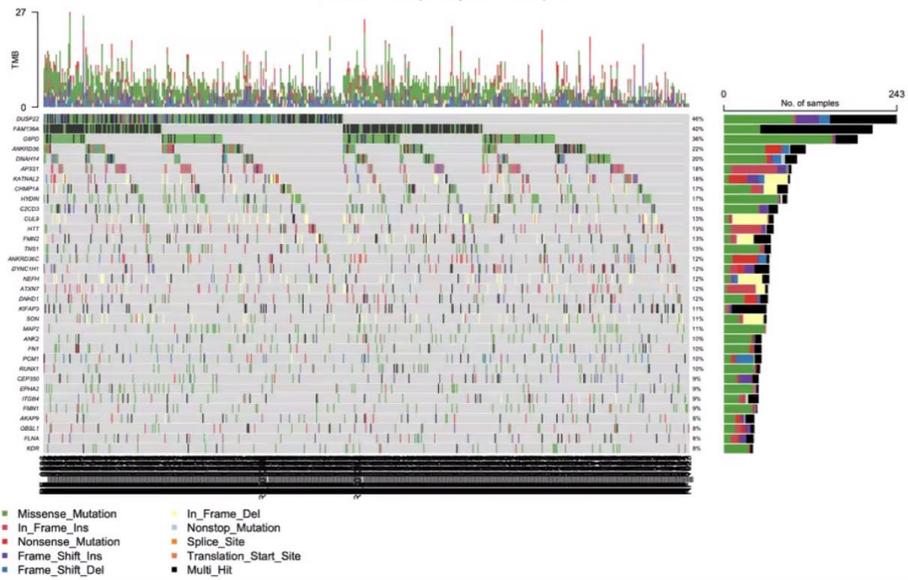
### Statistical test of significance of the 16 genes

- Under the null model in which a gene set size of the 16 is chosen at random from the set of 9509 genes known to carry mutations in a random population, the probability of explaining more cases than our set of 16 genes is  $p < 0.00001$ .
- The set of 16 genes is hugely significant.



## 30 genes + FAM163A, ANKRD36, ANKRD36C, G6PD

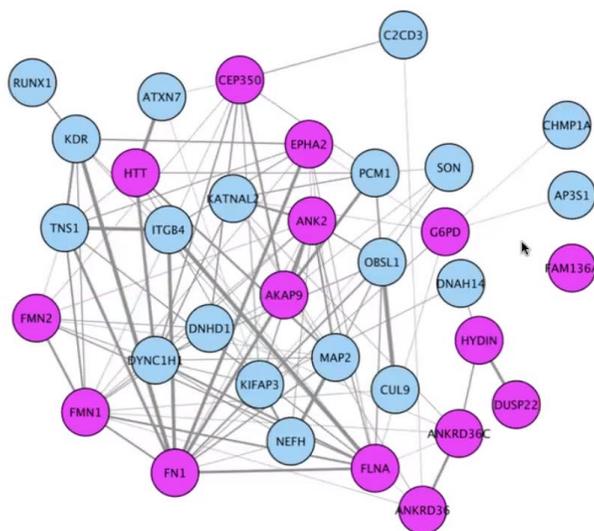
Altered in 524 (100%) of 524 samples.



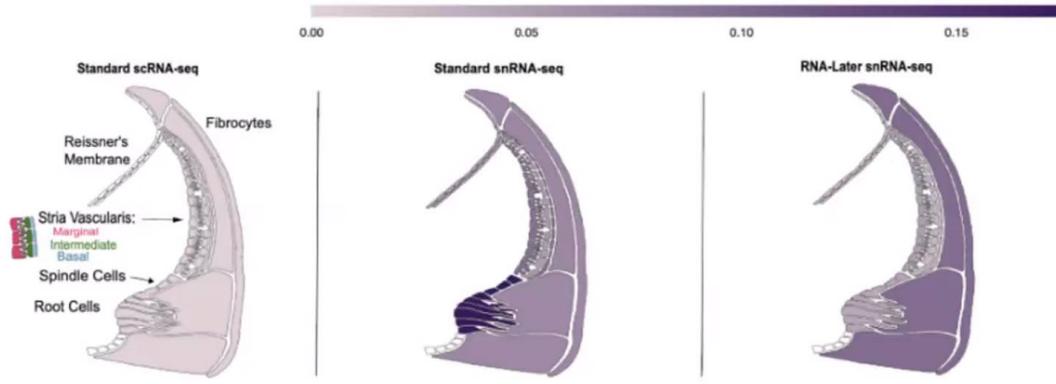
ANKRD 36 gene- only some have it:

Mutations in 30+4 genes explain 99.4% of the genetic load

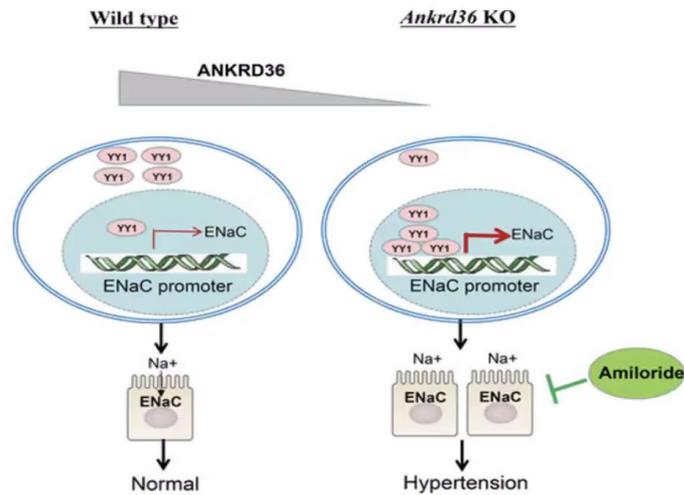
- Magenta genes have known link to deafness or balance problems
- Line thickness reflects confidence that the interaction exists, range 30-90% (STRING)



## RNA-seq labeling of inner ear and stria in mouse



gEAR; Hoa M.

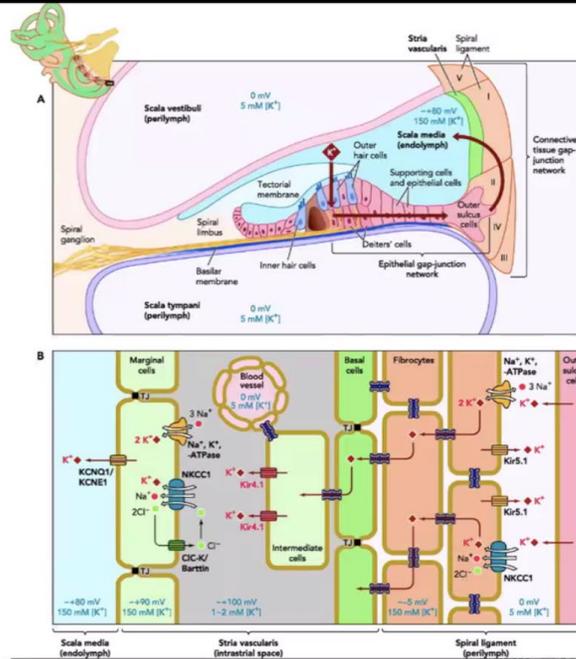


Yupeng Yan. Circulation Research. ANKRD36 Is Involved in Hypertension by Altering Expression of ENaC Genes, Volume: 129, Issue: 11, Pages: 1067-1081, DOI: (10.1161/CIRCRESAHA.121.319883)

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# Conclusions Based Upon Data: Cell- Cell/ECM interface

- Popular thought: increased endolymph production or reduced reabsorption.
- Aberrations in Cell-Cell/ECM interface leading to swelling within the endolymphatic space?



## Observation and a Hypothesis

- FAM136A, which is known to be associated with Menière's disease, does not explain most cases (only 39.7%), and does not point to a mechanism of the disease (not enough is known about it).
- No evidence for migraine or inflammatory pathways.

## Ongoing Directions

- Replicated findings in a large cohort-UKBB exome/whole-genome database.
  - Generate mouse model (CRISPR).