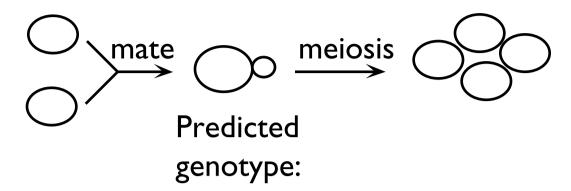
Discovery of **cytoplasmic inheritance**Boris Ephrussi, ~1949: Genetics of respiration in yeast

- Respiration: oxidative breakdown of nutrients to release energy; coupled to ATP synthesis to allow cells to use the released energy
- Site of oxidative phosphorylation:

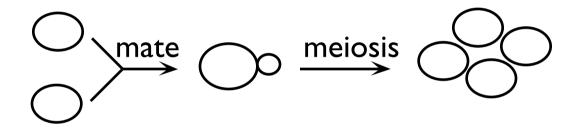
"Petite" and "grande" yeast

Two kinds of "petite" mutations:

◆ Normal **Mendelian** inheritance



◆ Non-Mendelian inheritance



Ephrussi's explanation: cytoplasmic inheritance; predicted "rho factor" in mitochondria

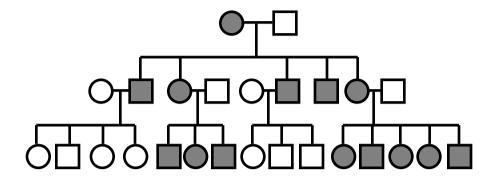
The mitochondrial genome

♦ Yeast

- ◆ Human
 - ♦ 37 genes

Expression coordinated with nuclear genes

Maternal inheritance of mtDNA



Explanation: Mitochondrial contribution of sperm vs. egg

Mitochondrial DNA disorders in humans

- inherited
- spontaneous mutations in egg or early embryo
- somatic mutations during the life of the individual

But with >>100's of mtDNAs per cell, how could sporadic (recessive) changes give a disease phenotype?

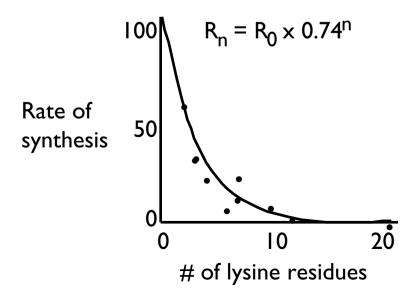
- Cumulative changes –
- Impaired central function (e.g., protein synthesis)

Random segregation of mitochondria:
 homoplasmy from heteroplasmy

MERRF (Myoclonic epilepsy and ragged red fibers):

Defect: non-functional lysine tRNA (tRNA^{Lys})

Different proteins affected to different extents:



Interaction with the environment

Nonsyndromic deafness

♦ Mutation: A1555G — in 12S rRNA gene

Variable age-of-onset, severity

 Common thread? Correlation between manifestation of disorder and treatment with aminoglycosides

Why the high mutation rate?

- ♦ little or no DNA repair, poor error-correction
- proximity of oxidative phosphorylation centers –
 free radicals!
- ◆ A connection with aging?

Practical applications

◆ Forensics

◆ Tracing population migrations