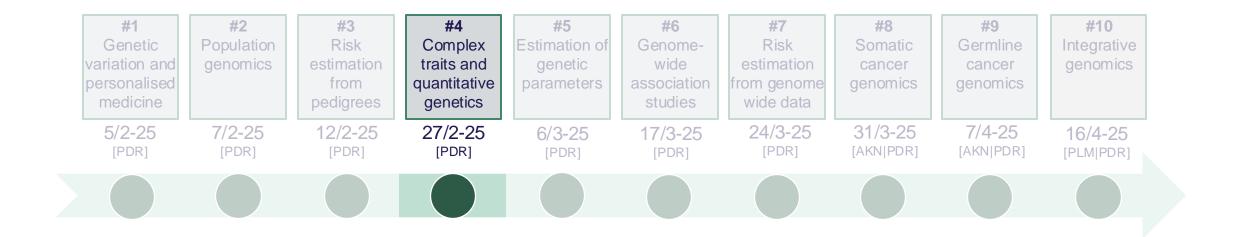


LETS GET STARTED





LINKAGE AND GENETIC TESTING

Today we will talk about

- Molecular tools for diagnosis;
- Moved from session 3

- direct vs indirect test
- Complex traits and multifactorial diseases
- Quantitative genetics



AGENDA

- **08:15 08:45** Lecture 1 [*Recap* + *indirect testing*]
- **08:45 09:15** Exercises A + Break
- **09:15 09:40** Lecture 2 [*Multifactorial traits*]
- **09:40 10:00** Exercises B
- **10:00 10:40** Break + Group work
- **10:40 11:15** Lecture 3 [*Quantitative genetic theory*]
- **11:15 11:50** Break + Exercises C
- 11:50 12:00 Evaluation at Moodle



AGENDA

08:15 – 08:45 Lecture 1 [*Recap* + *indirect testing*]

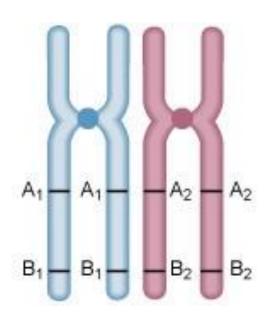
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LINKAGE

Mendel's 2. postulate: *Alleles in different loci segregate independently during meiosis*

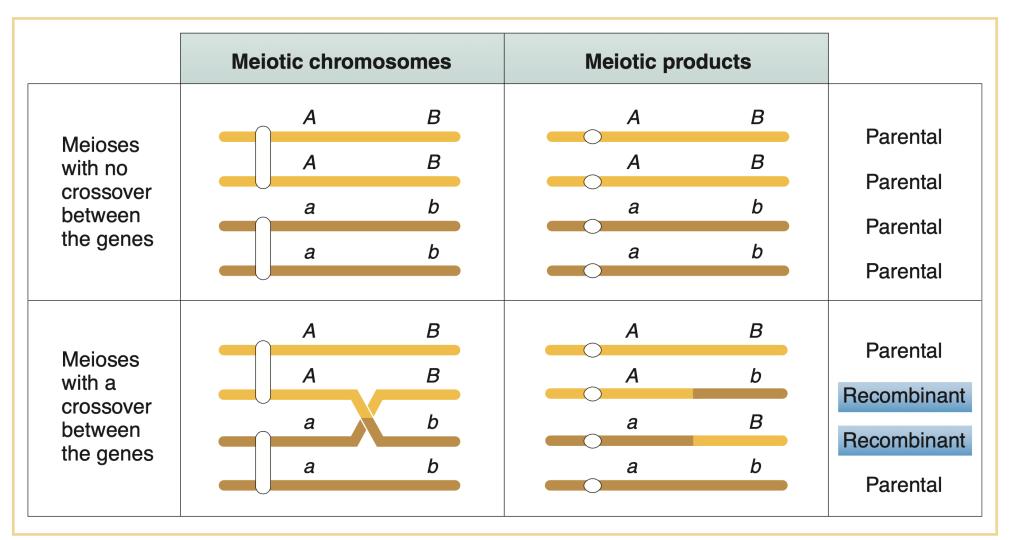
When two loci are linked (are physically close) the alleles segregate together more often than by chance

We can measure the distance between two loci with **genetic distance** (cM): probability of recombination (R) during meiosis [(number of R chromosomes / total chromosomes) x 100]



CROSSOVERS

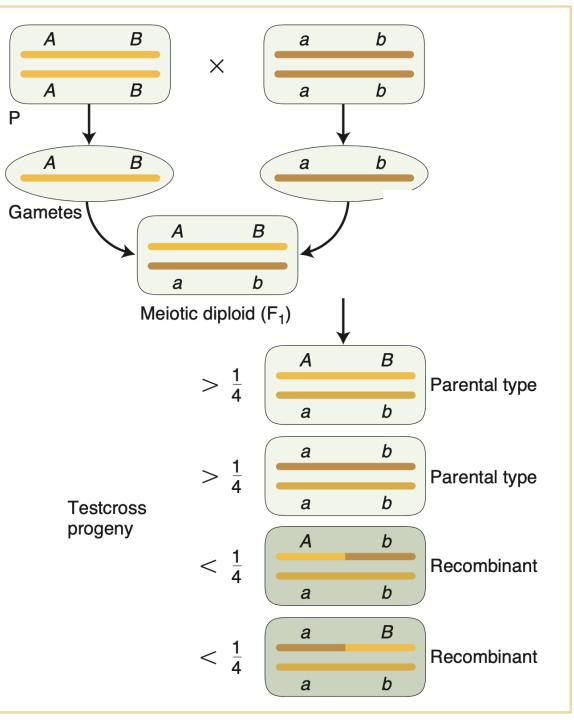
BETWEEN NON-SISTER CHROMATIDES



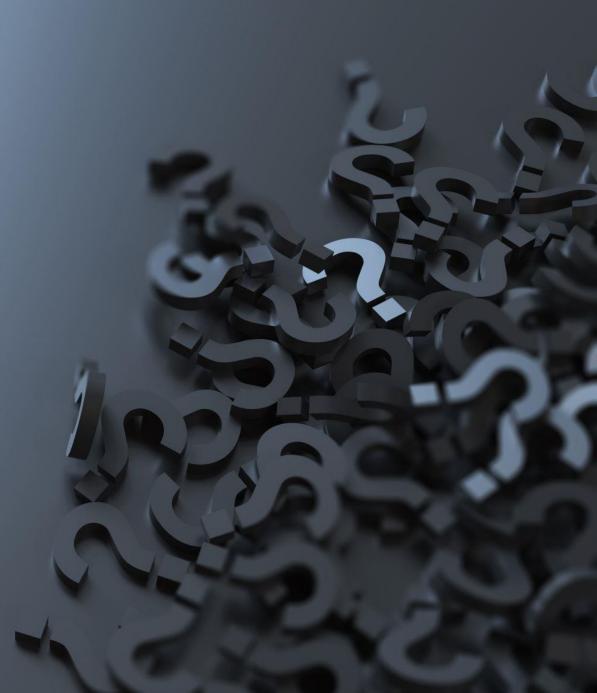
LINKAGE RECOMBINATION

Maximum 50% of the gametes can be recombinants

If 50% of the gametes are recombinants then there will be two parental and two recombinant gametes.



Why is the maximum genetic distance between two loci 50cM?



If there is 10 cM between locus A and locus B – what are the expected gamete frequencies from from an individual with the following haplotype AB//ab ?

GENETIC TESTING

Direct test

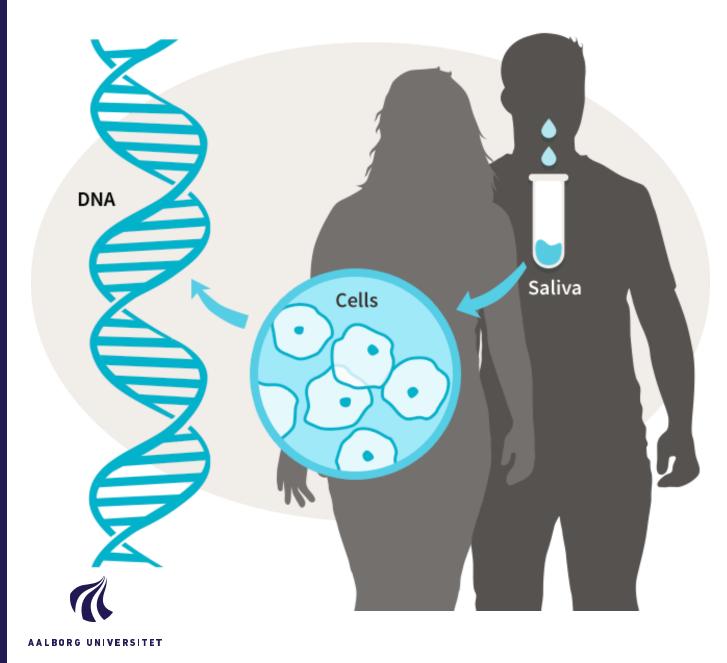
- When the pathogenic variant is known
 - Track the mutation in a pedigree and design a molecular test

Indirect test

- When the pathogenic variant is unknown
 - Recurrence risk from family history
 - Recurrence risk from linkage
 - NGS

GENETIC TESTS

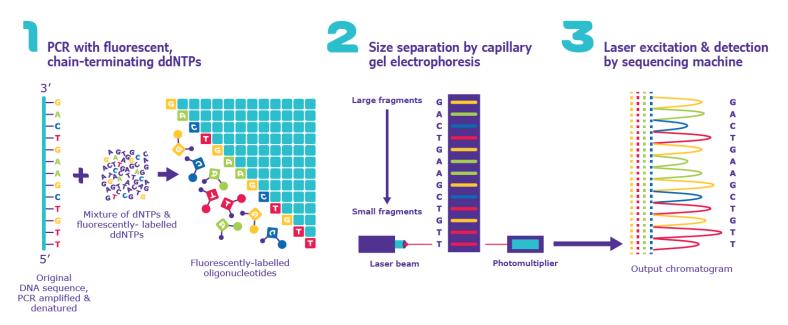
- Direct diagnosis known pathogenic variant
- Indirect diagnosis unknown pathogenic variant
- Clinical application of Nextgeneration sequencing (NGS)



DIRECT GENETIC DIAGNOSIS

KNOWN PATHOGENIC VARIANT

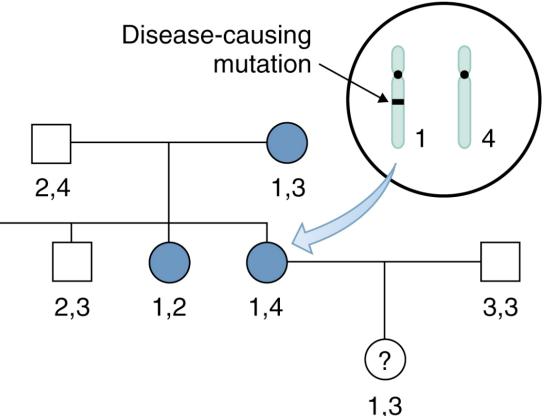
- We know the disease-causing mutation.
- Design a molecular assay that can target that specific mutation, e.g., Sanger sequencing



INDIRECT GENETIC DIAGNOSIS

3,4

- We do not know the exact disease-causing mutation.
- Instead, we look at genetic markers close to the disease-causing mutation.
 - Advantange the marker tells us whether the atrisk person has inherited the chromosome region that contains a disease-causing mutation.



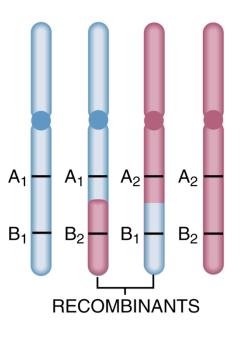


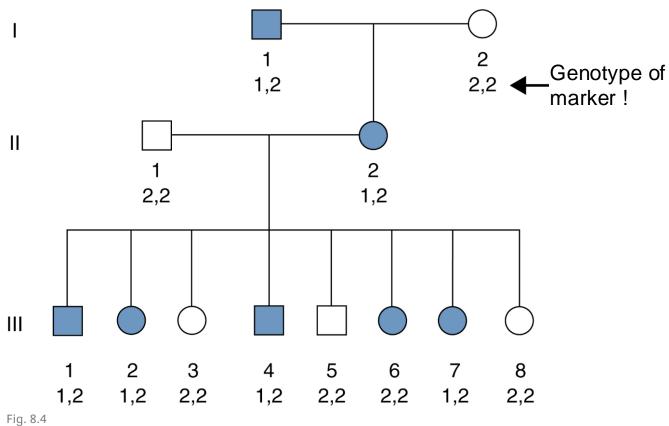
LINKAGE MAPPING

Follow the genotype with the disease thorugh the pedigree

П

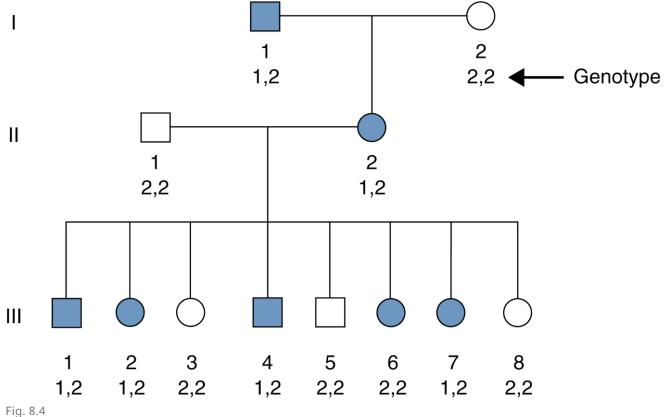
Linkage phase (identify haplotypes) \mathbf{O}



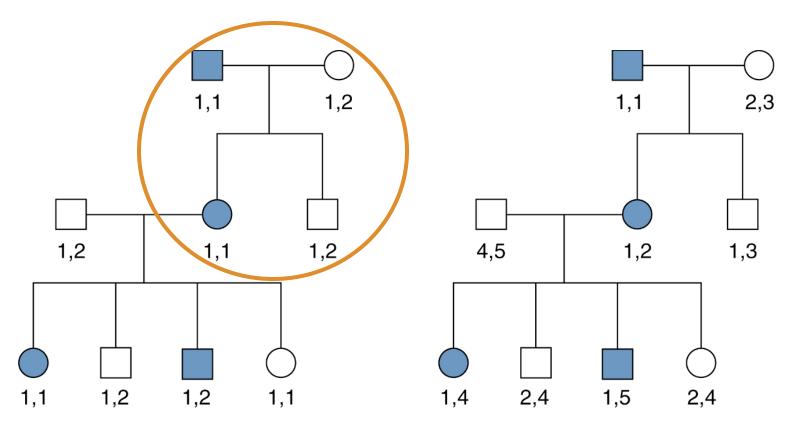


LINKAGE MAPPING

Is there something strange going on in the 3rd generation?



(UN)INFORMATIVE MARKERS



Which marker is linked with the disease?

We cannot tell by certainty because we don't know the linkage phase

Much better to find a highly polymorphic variant!

Marker 1 is closely linked to the disease-causing variant

MANY POLYMORPHIC MAKRERS HELPS

Recombination events aids to pinpoint the disease-causing region

 A_2

 B_2 C_2

 D_1

E1

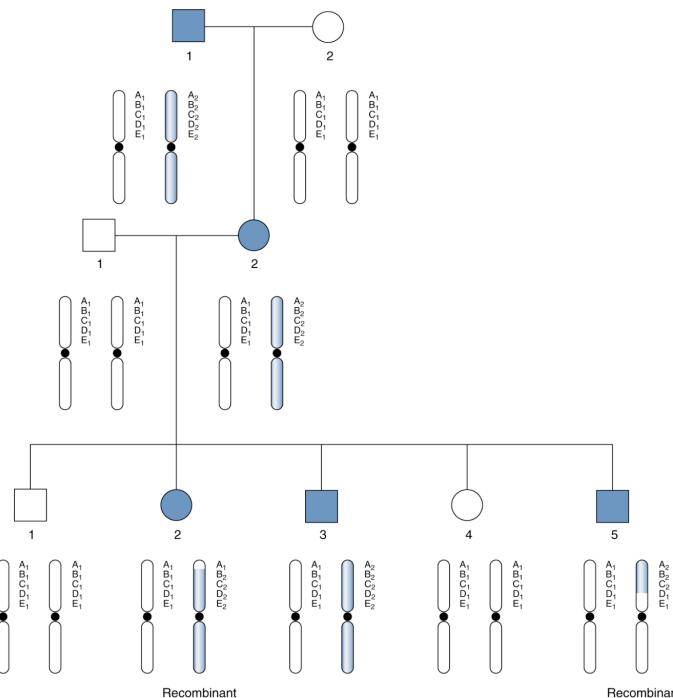
A₁

 B_2 C_2 D_2 E_2

Recombinants localize the disease-causing gene to the region between markers A and D

Ш

Ш



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Recombinant

FOLLOW THE DISEASE AND GENETIC MARKERS

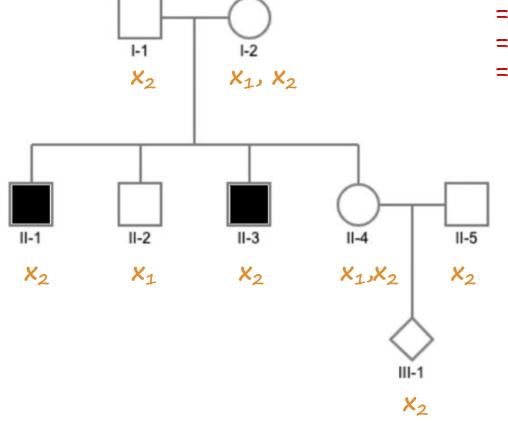
1) Based on the pedigree, what is the risk that III-1 will have the disease?

=p(11.4 XX')*p(transmit to 111.1)*p(male) =1/2*1/2*1/2 =<u>1/8</u>

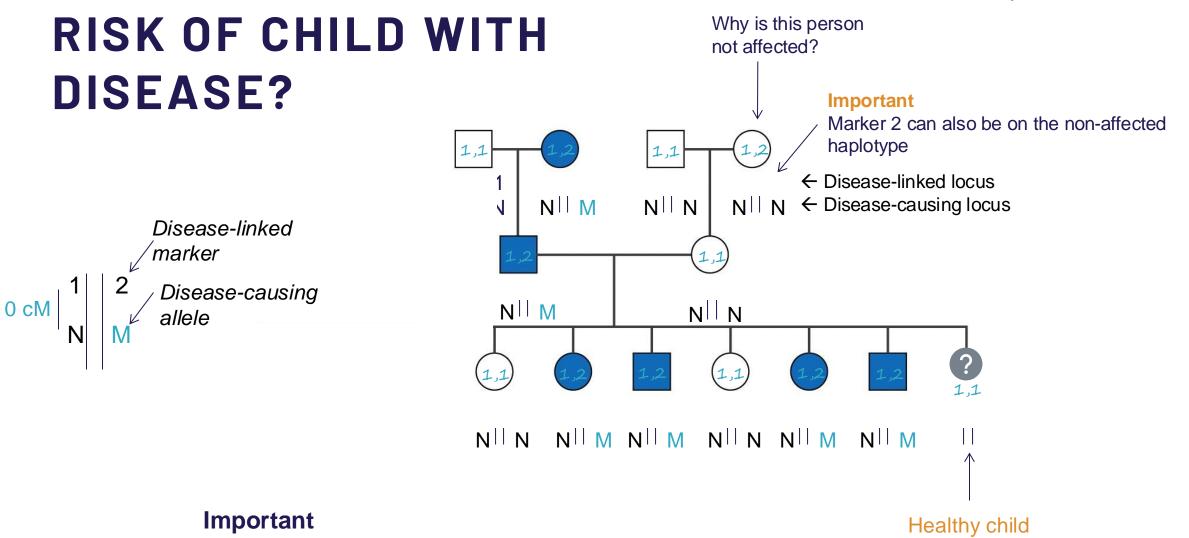
2) Based on the molecular data, what is the risk that III-1 will have the disease?

=<u>0</u>

Assume X-linked



Assume dominant inheritance, full penetrance



Marker 2 is the disease-linked allele in the disease-linked locus

Allele 2 is not pathogenic in itself

Allele 2 can also be on the non-affected haplotype

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INDIRECT VS DIRECT DIAGNOSIS Because we ke

Because we know the mutation, family information is not needed, uninformative markers and recombination is not an issue

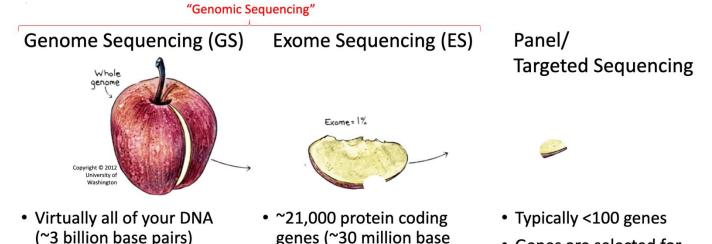
Attribute	Indirect Diagnosis	Direct Diagnosis	
Family information needed	Yes	No	
Errors possible because of recombination	Yes	No	
Markers may be uninformative	Yes	No	
Single test can uncover multiple mutations	Yes	Yes (by DNA sequencing)	
Disease-causing mutation must be identified	No	Yes	

- Markers should be informative

- Large families are needed to establish linkage phase
- Recombination events make it tricky chose markers that are 0 cM to disease-causing locus

CLINICAL APPLICATION OF NEXT-GENERATION SEQUENCING (NGS)

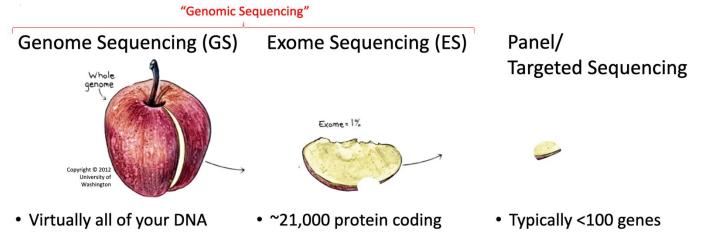
- A general disadvantage is that often multiple different assays are needed – NGS solves this
 - e.g., in the case of genetic heterogeneity
- NGS can be used on disorders that have variable penetrance



- Includes known disease genes, novel genes, and noncoding regions
- genes (~30 million base pairs)
- Includes known disease genes and novel genes
- Genes are selected for well-established role in disease

CLINICAL APPLICATION OF NEXT-GENERATION SEQUENCING (NGS)

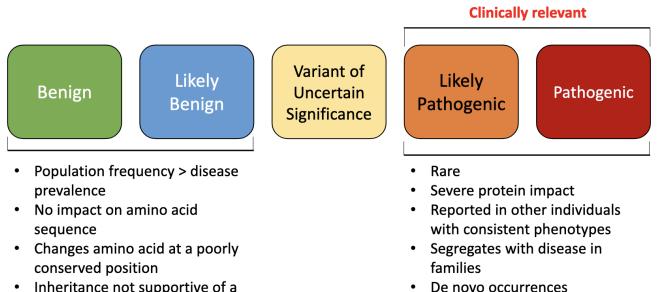
- In principle all variants detected
- Relatively low cost (3000 kr)
- Things that took 20 years can now be done in few days
- Produces lots of data
- Can be hard to find the real pathogenic variant, if not seen before
- Mutations, that we were not looking for (e.g., BRCA1 mutation) – incidental finding



- (~3 billion base pairs)
- Includes known disease genes, novel genes, and noncoding regions
- ~21,000 protein coding genes (~30 million base pairs)
- Includes known disease genes and novel genes
- Genes are selected for well-established role in disease

VARIANTS ON INTEREST?

- ACMG guidelines [American College of Medical Genetics and Genomics]
 - Put all variants into any of these categories by looking at the variants impact on the protein (missense, synonymous, nonsens)



• Inheritance not supportive of a disease causing role

 Functional studies supportive of an impact

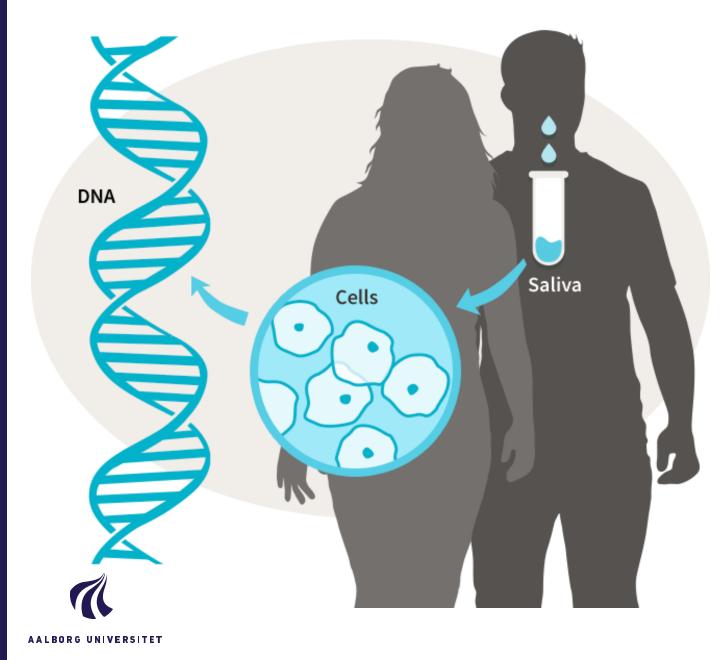
GENETIC TESTS

When the pathogenic variant is known

 \rightarrow Risk from direct test

When the pathogenic variant is unknown

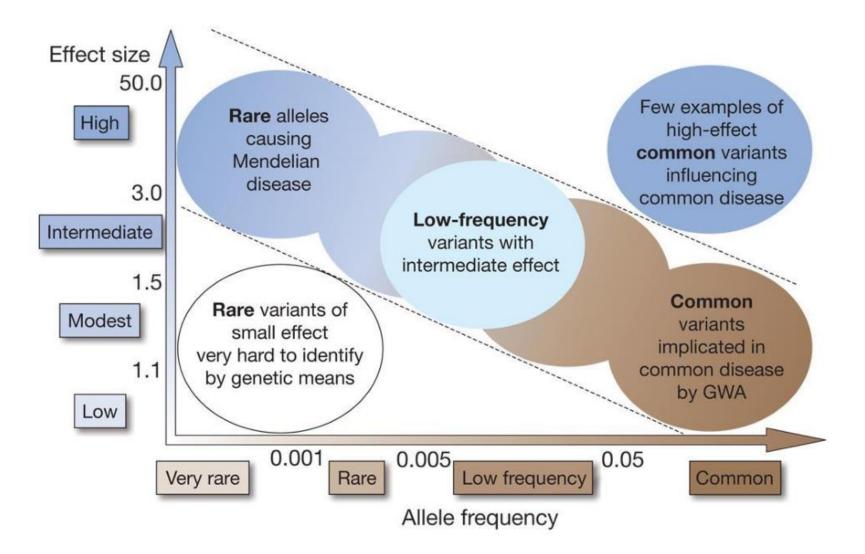
- \rightarrow Risk from pedigree [inheritance pattern]
- \rightarrow Risk from indirect test [genomic region]
- \rightarrow Risk from NGS [filter, filter, filter...]



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AGENDA

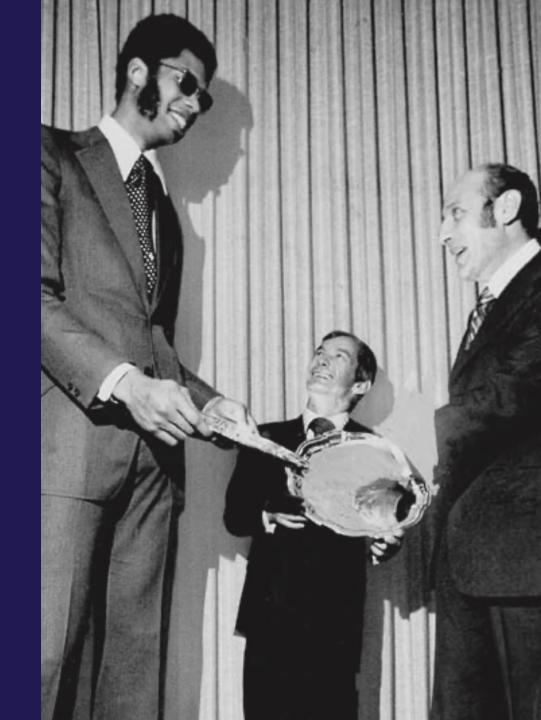
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MULTIFACTORIAL TRAITS

- Types of trait-inheritance
- Liability model
- ✤ Recurrence risk
- Environmental exposures modulate outcomes





DIFFERENT MODE OF INHERITANCES

- Monogenic (single gene variant)
- Polygenic (many gene variants)
- Multifactorial (many gene variants plus environment exposures)





MENDELIAN (MONOGENIC) **TRAITS** QUALITATIVE TRAITS

Seed		Flower	Pod		Stem	
Form	Cotyledons	Color	Form	Color	Place	Size
			X	X		A A A A A A A A A A A A A A A A A A A
Grey & Round	Yellow	White	Full	Yellow	Axial pods, Flowers alon	g Long (6-7ft)
L)			X	X		××
White & Wrinkled	Green	Violet	Constricted	Green	Terminal pod Flowers top	^{5,} Short <i>≹</i> -1ft
1	2	3	4	5	6	7

QUANTITATIVE TRAITS



Many quantitative traits has continous variation



QUANTITATIVE TRAITS

Continous variation



Categorical variation



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People without condition People with condition Threshold zone Frequency Clinical diabetes

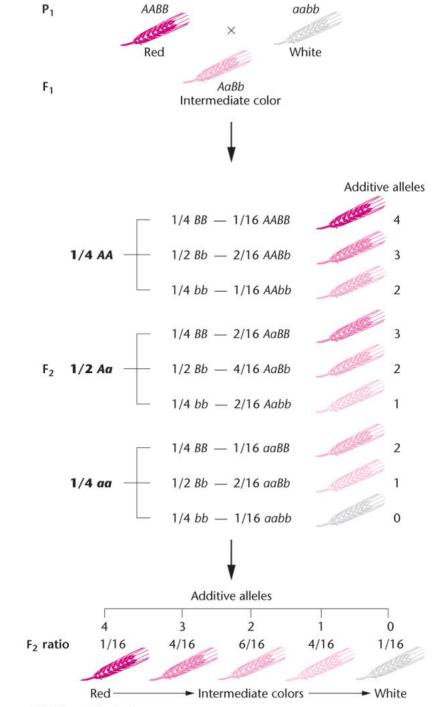
Threshold traits

Why do quantitative traits follow a normal distribution?

MULTIPLE GENE MODEL

The normal distribution of quantitative traits is caused by the joint action of *many gene varieties with additive genetic effects*.

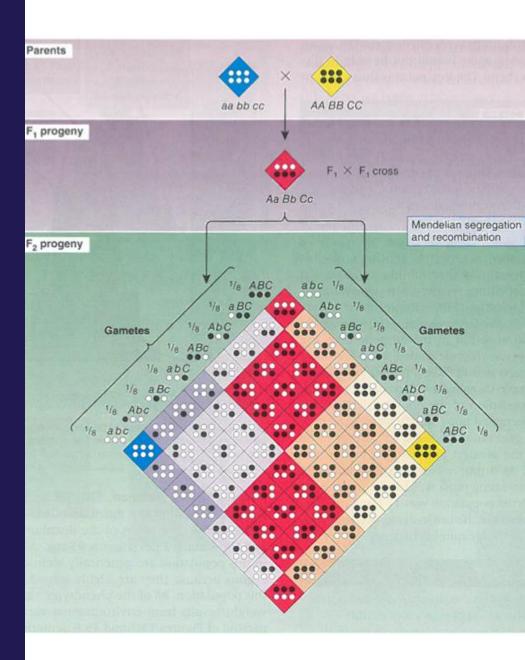
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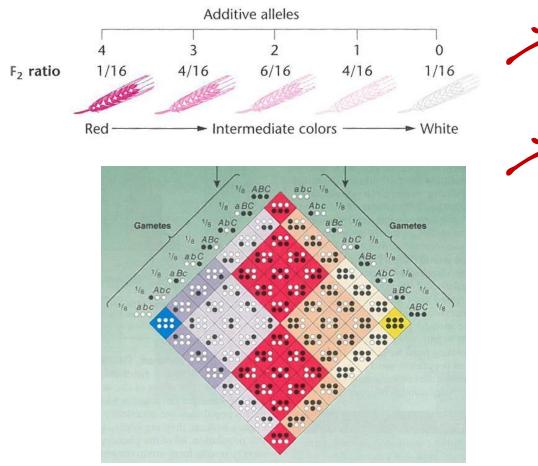
MULTIPLE GENE MODEL

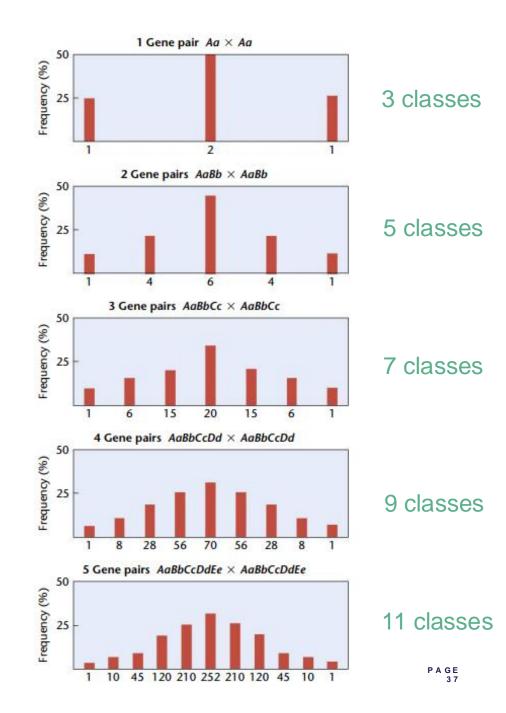
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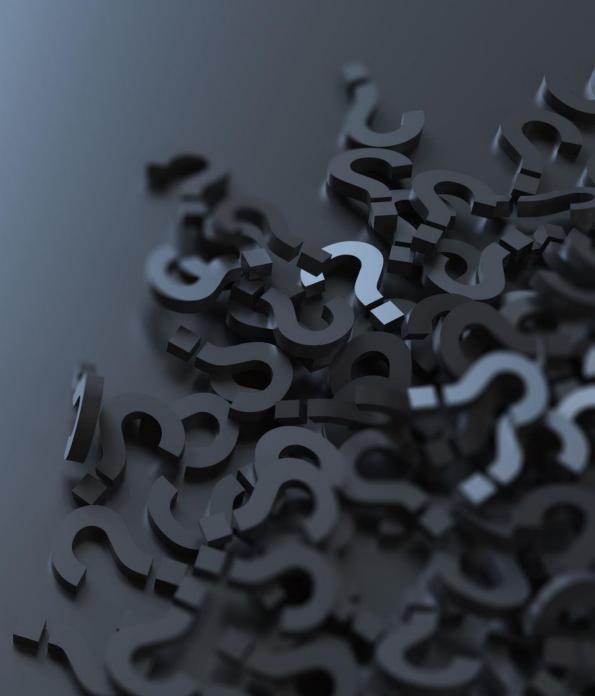


POLYGENIC TRAITS

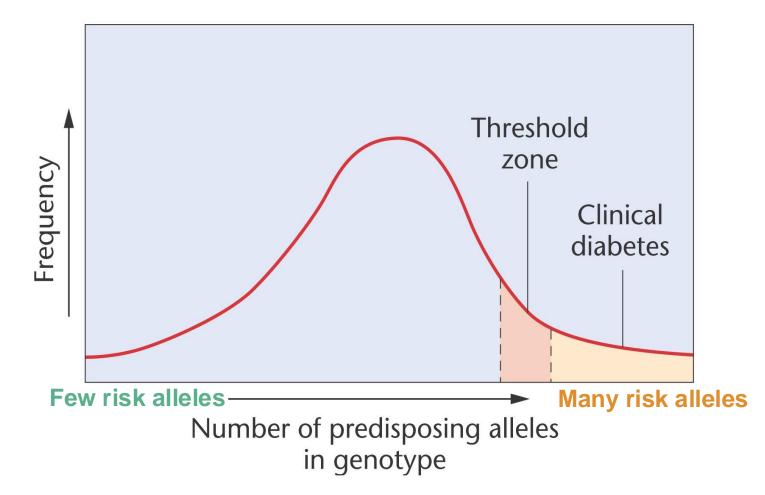




How can dichotomous traits (i.e., diseases) have a polygenic distribution?



LIABILITY (THRESHOLD) MODEL

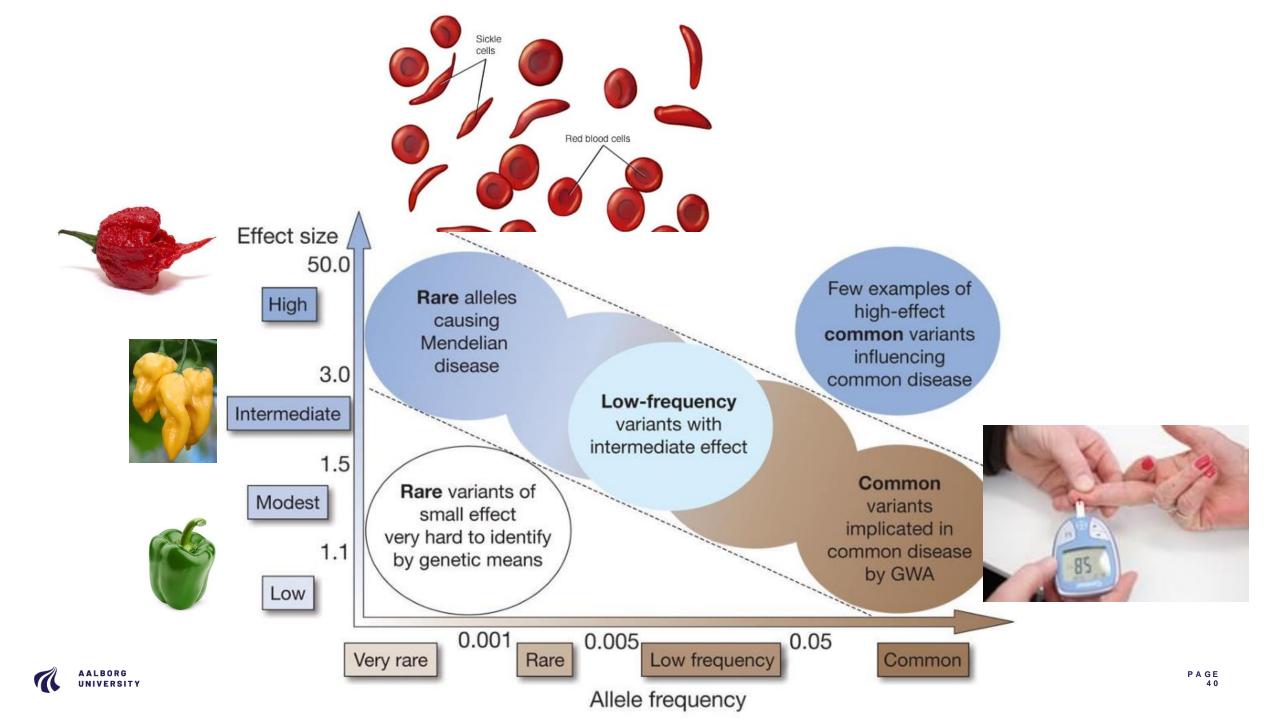


Liability model

Only individuals with a liability over a certain threshold will become affected

The **sum** of many genetic variants with **small effect/risk**.

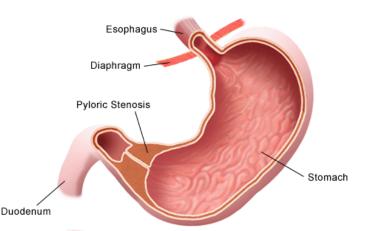
Each locus follow Mendelian inheritance pattern, although the trait does not

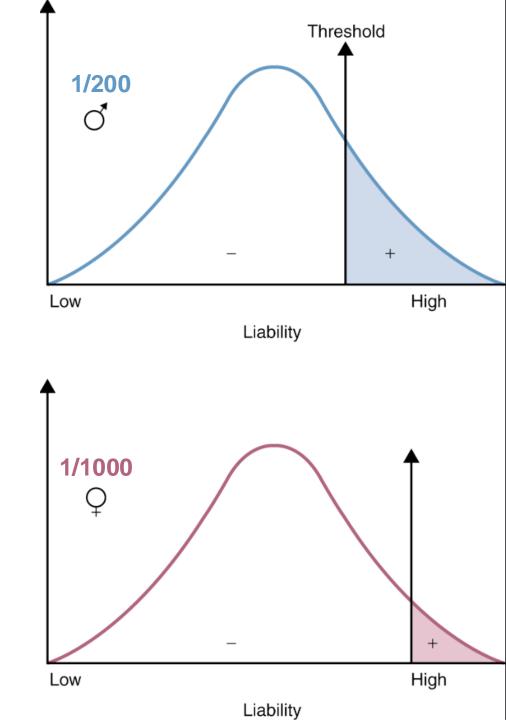


DIFFERENT THRESHOLD VALUES BETWEEN SEXES

Pylorus-stenose is a condition that is more frequent among boys than girls.

Boys have a lower genetic threshold value than girls \rightarrow do not need as many genetic risk variants to become affected as girls need.



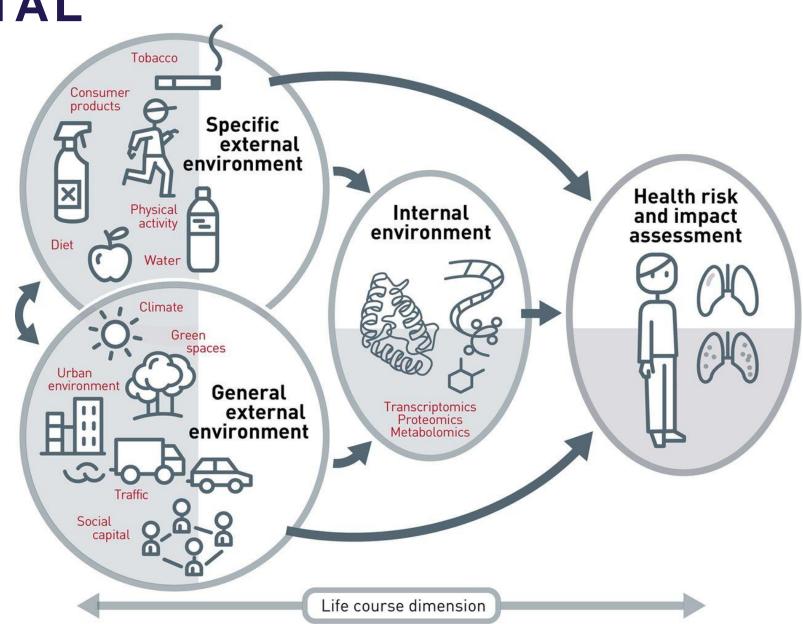


ENVIRONMENTAL EXPOSURE

Complex traits have a **genetic component** and an **environmental component**

The relative genetic contribution is called *heritability*.

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INHERITANCE PATTERN OF MULTIFACTORIAL TRAITS

The exact inheritance pattern depends on

- The number of risk genes/alleles involved
- The effect size distribution of the genetic risk variants
- The interaction among genetic variants
- The interaction with environmental exposures
- → The genetic architecture of the complex trait [Session 6 on GWAS]



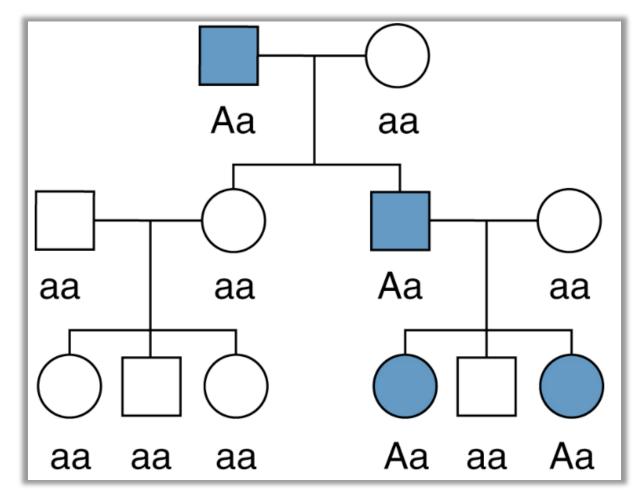
RECURRENCE RISK

The probability that a future children will be affected.

What is the recurrence risk that II.3 and II.4 gets a fourth child that is affected?

 \rightarrow 1/2

Independent on the population.





RECURRENCE RISK

The probability that a future children will be affected.

Much harder to determine because

- Risk genes are unknown
- Environmental factors unknown

Empirical estimates (collect families with one affect proband)

→ The empirical recurrence risk estimates become population specific

DIFFERENTIAL RECURRENCE RISK

1. Higher recurrence risk when proband is a girl

→ Affected girls have higher genetic burden on average compared to affected boys (more risk alleles segregate in the family).

2. Higher risk for brothers

 \rightarrow Boys have lower genetic threshold value

3. Same trend in Belfast and London

→ there are different environmental factors in the two cities

TABLE 12-1

Recurrence Risks (%) for Pyloric Stenosis, Subdivided by Gender of Affected Probands and Relatives*

Relatives	M Proba	ale nds	Female Probands	
	London	Belfast	London	Belfast
Brothers	3.8	9.6	9.2	12.5
Sisters	2.7	3.0	3.8	3.8

(Adapted from Carter CO: Genetics of common single malformations. Br Med Bull 1976;32:21-26.)

How to distinguish a multifactorial disease from a monogenic disease with low penetrance and variable expressivity?





Imagine a disease which have a recurrence risk of 5% for siblings.

This risk could be a result of two different scenarios

- Multifactorial inheritance
- An autosomal dominant gene with 10% penetrance

How can we test which one is the correct one?



Imagine a disease which have a recurrence risk of 5% for siblings.

This risk could be a result of two different scenarios

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How can we test which one is the correct one?



Imagine a disease which have a recurrence risk of 5% for siblings.

This risk could be a result of two different scenarios

 An autosomal dominant gene with 10% penetrance

Multifactorial inheritance



Four criteria supportive for it to be a multifactorial disease

If we observe larger recurrence risk in families with <u>more</u> <u>affected</u> individuals \rightarrow **multifactorial**

If we observe larger recurrence risk in families with more severely affected proband \rightarrow multifactorial

If we observe a different threshold values for boys and girls, and we see higher risk in families where affected individual are the "rare" gender \rightarrow multifactorial

If we observe that the recurrence rate decrease faster with increasing genealogical distance \rightarrow multifactorial



Why is the recurrence risk population specific?

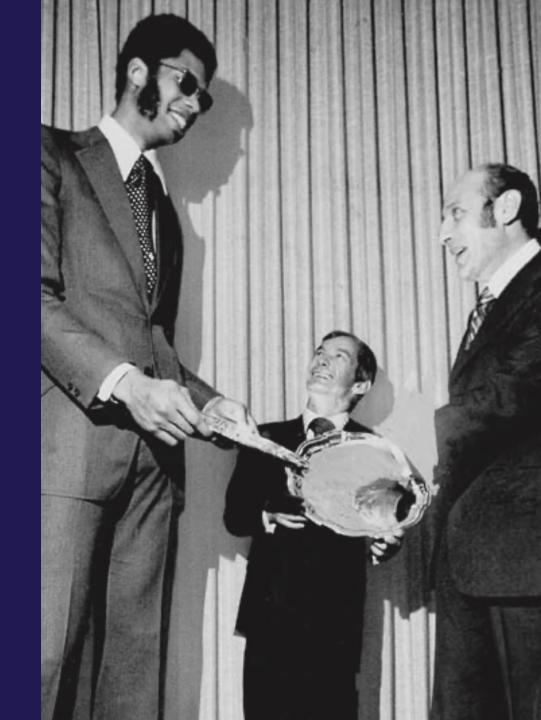
Because it is "measured" in different populations with
1) different environmental exposures,

2) difference in allele frequencies



MULTIFACTORIAL TRAITS

- Types of trait-inheritance
- Liability model
- ✤ Recurrence risk
- Environmental exposures modulate outcomes





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GROUP WORK

- 1) Go into groups of 3
- 2) Select one complex traits; either one with continous variation or a disease
- 3) Use the literature to find:
 - i. trait characteristics (age of onset, sex difference, symptons, prevalence, diagnosis, pathology, etc)
 - ii. environmental exposures associated with the trait
 - iii. genetic contributions to the selected trait

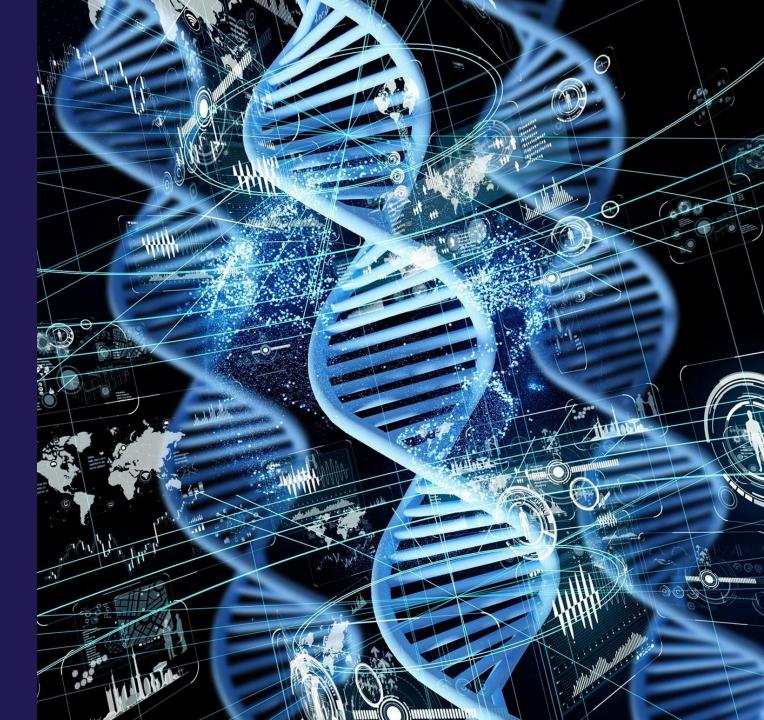


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QUANTITATIVE GENETICS

- Unidentified genotypes but measured trait variability.
- Phenotypic vs Genotypic values
- Gene action
- Heritability

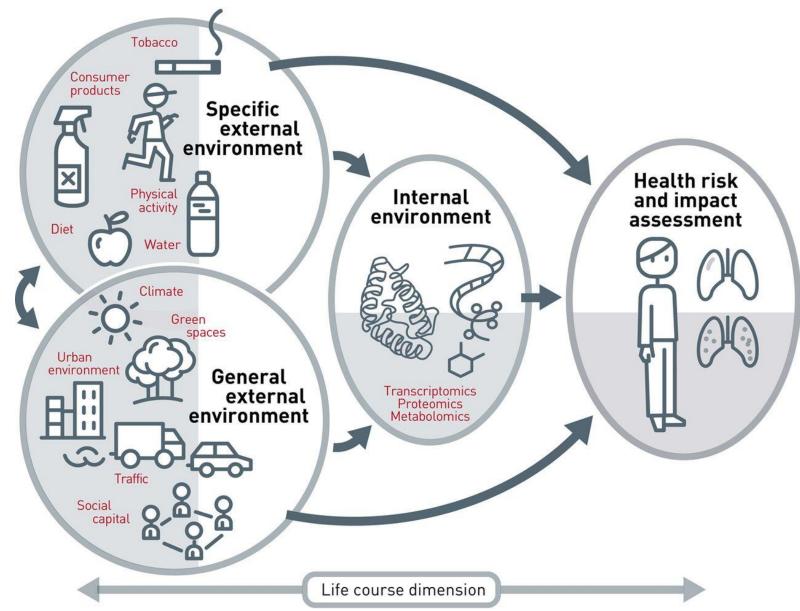




Complex traits have a **genetic component** and an **environmental component**

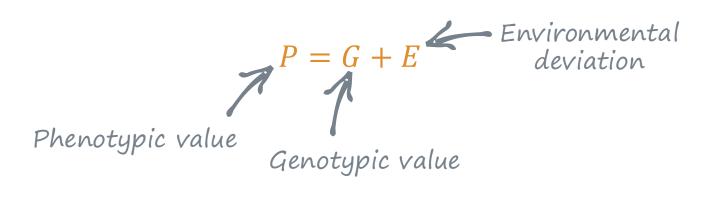
The relative genetic contribution is called *heritability*.

How do we separate the genetic and environmental contribution?



THE PHENOTYPIC VALUE

The phenotypic value can be partitioned in different components:



The value that we observe when we measure a trait, is the **phenotypic value for that individual**.

Every individual has a phenotypic value.





ENVIRONMENTAL DEVIATION

P = G + E

External effects that modulates the phenotypic value.

... or things that we cannot explain

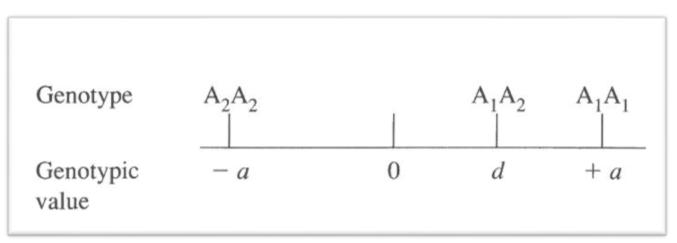




THE GENOTYPIC VALUE

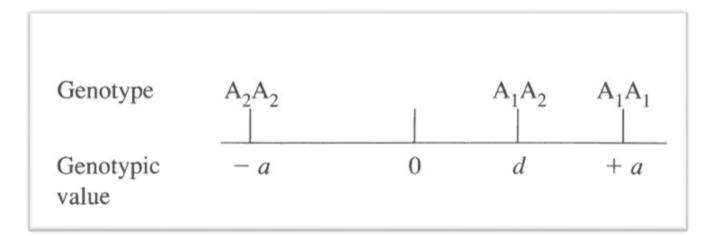
 $P = \mathbf{G} + E$

If we consider one locus with two alleles; A_1 and A_2 , and we assume additivity, then we can assign genotypic values to each genotype:





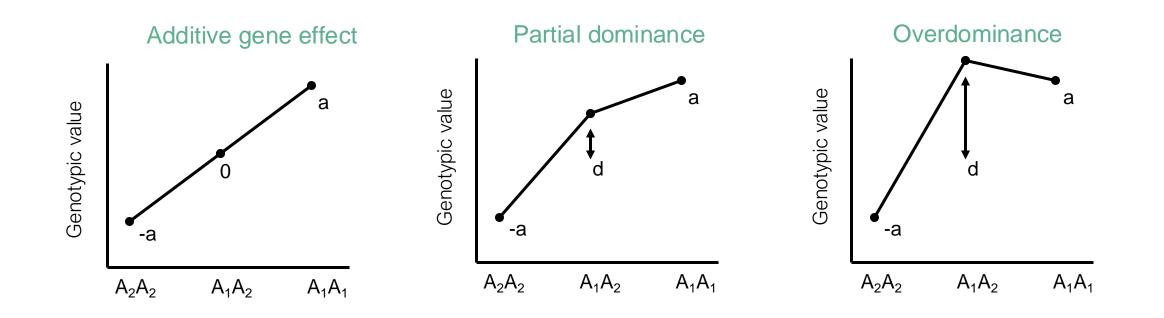
THE GENOTYPIC VALUE



If the genotypic value of A ₁ A ₂ is zero (<i>pure additiv</i>)	d = 0
If, A_1 is dominant over A_2 :	<i>d</i> > 0
If, A_2 is dominant over A_1 :	<i>d</i> < 0
Complete dominance	d = a -a
Partial dominance of A ₁	0 < d < a
If A ₁ A ₂ is greater than homozygote (overdominance)	d > a
If A ₁ A ₂ is lesser than homozygote (underdominance)	d < -a

THE GENOTYPIC VALUE

Genotype	A ₂ A ₂	1	A ₁ A ₂	A ₁ A ₁
Genotypic value	- <i>a</i>	0	d	+ a

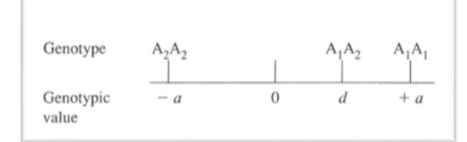


ESTIMATE G P = G + E

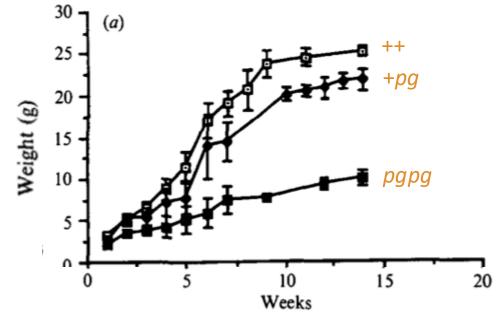
In mice, the gene *pygmy* (*pg*) is strongly correlated with body size.

Genotype	++	+ pg	bd bd
Weight (g)	25	22	10

Is the effect of *pg* additive?







Benson and Chada 1994, Genet Res Camb



ESTIMATE G

P = G + E

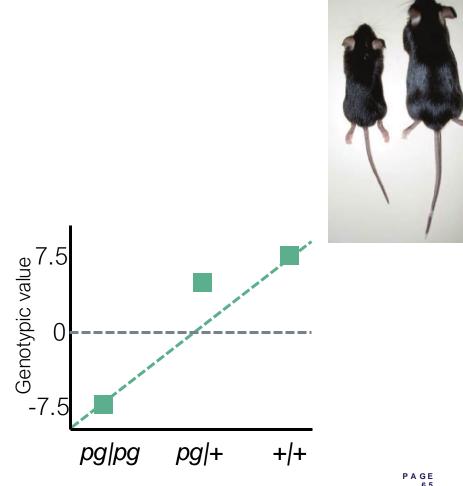
Genotype	++	+ pg	bd bd
Weight (g)	25	22	10

m is the mean of the homozygotes: m = (25+10)/2 = 17.5

a is the difference between homozygote and m a = 25 - 17.5 = 7.5

d is the difference between heterozygote and m d = 22 - 17.5 = 4.5

Genotype	A ₂ A ₂	I	A ₁ A ₂	A ₁ A ₁
Genotypic value	- a	0	d	+a

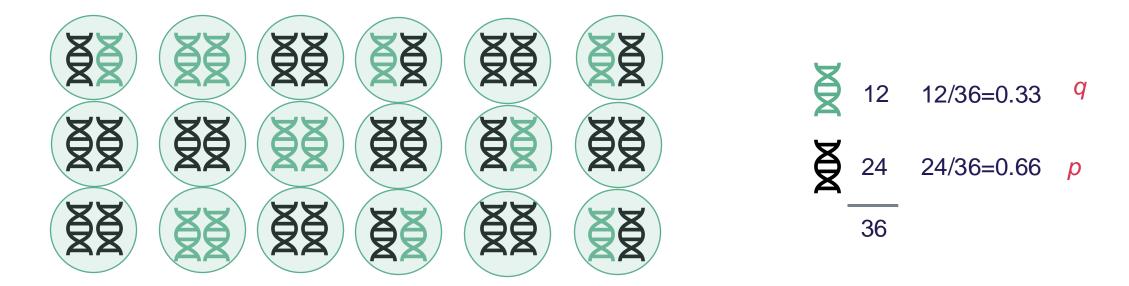


pg does act additive, but with partial dominace



ALLELE FREQUENCY

Allele frequency is the proportion of the one allele out of all alleles in the population



ALLELE FREQUENCY CHANGE THE POPULATION MEAN

Allele frequency has an influence on the trait population mean

Genotype	Frequency	Value	Freq. \times Val.
A ₁ A ₁	p^2	+a	p^2a
A_1A_2	2pq	d	2pqd
$A_2^T A_2^T$	q^2	-a	$-q^2a$
	•/	Sum =	a(p-q) + 2dpq

Population mean (expressed as the deviation from the mid-homozygote value m):

M = a(p-q) + 2dpq



POPULATION MEAN

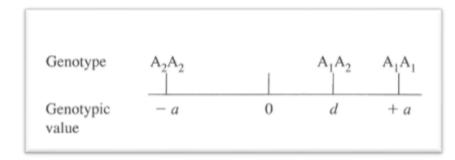
M = a(p - q) + 2dpqm = 17.5 a = 7.5 d = 4.5

If p = 0.9 and q = 0.1
M=7.5(0.9-0.1)+2*4.5*0.9*0.1=6.81

Popoluation mean is then, m+M=17.5+6.81 = 24.31

If p = 0.6 and q = 0.4
M=7.5(0.6-0.4)+2*4.5*0.6*0.4=3.66

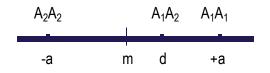
Population mean, m+M=17.5+3.66 = 21.16



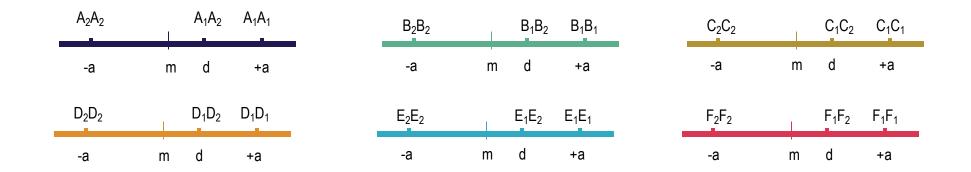




FROM ONE LOCUS TO MANY LOCI



M = a(p-q) + 2dpq



$$M = \sum a(p-q) + 2\sum dpq$$



AVERAGE EFFECT

- Because parents pass on their alleles and not their genotypes to the next generation, we need another metric than the genotypic value.
- The average effect (α) depends on the genotypic values and allele frequencies, $\alpha = a + d(q p)$.

Type of gamete		and ncies of pes prod	luced	Mean value of genotypes produced	Population mean to be deducted	Average effect of gene	
	A ₁ A ₁ a	A_1A_2	$\begin{smallmatrix} A_2A_2\\ -a \end{smallmatrix}$	14			
A ₁ A ₂	P	q P	4	pa + qd -qa + pd	-[a(p-q) + 2dpq] -[a(p-q) + 2dpq]	q[a+d(q-p)] = p[a+d(q-p)]	

The average effect of a particular allele is the mean deviation from the population mean of individuals which received that allele from one parent, the allele received from the other parent having from at random from the population

ADDITIVE GENETIC VALUE OR BREEDING VALUE

- The average effect is useful because parent pass on their alleles and not their genotypes to the progeny.
- Thus, it is the average effects of the parents' alleles that determine the mean genotype value of the progeny.

Genotype	Breeding value
A ₁ A ₁	$2\alpha_1 = 2q\alpha$
A ₁ A ₂	$\alpha_1 + \alpha_2 = (q - p)\alpha$
A ₂ A ₂	$2\alpha_2 = -2p\alpha$



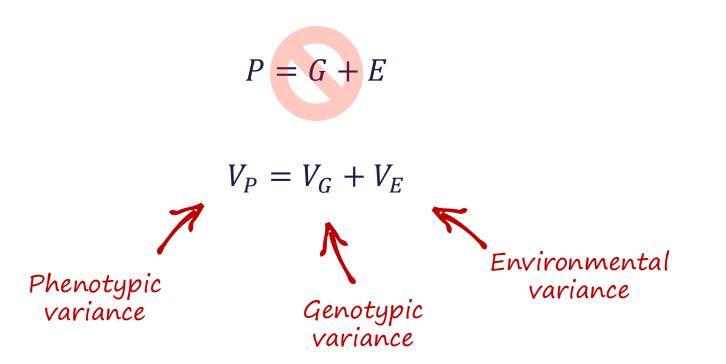
PHENOTYPIC VARIANCE

In quantitative genetics, our interests is to investigate now much of the <u>observed</u> <u>variation</u> that is due to <u>genetic differences</u> <u>among individuals</u> and how much is due to <u>environmental variation</u>.





VARIANCE NOT MEAN

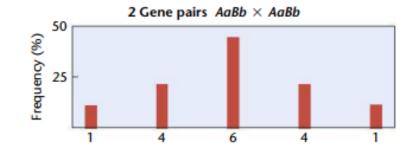




ENVIRONMENTAL VARIATION

Individuals with the same genotype are subjected to slightly different micro-environment

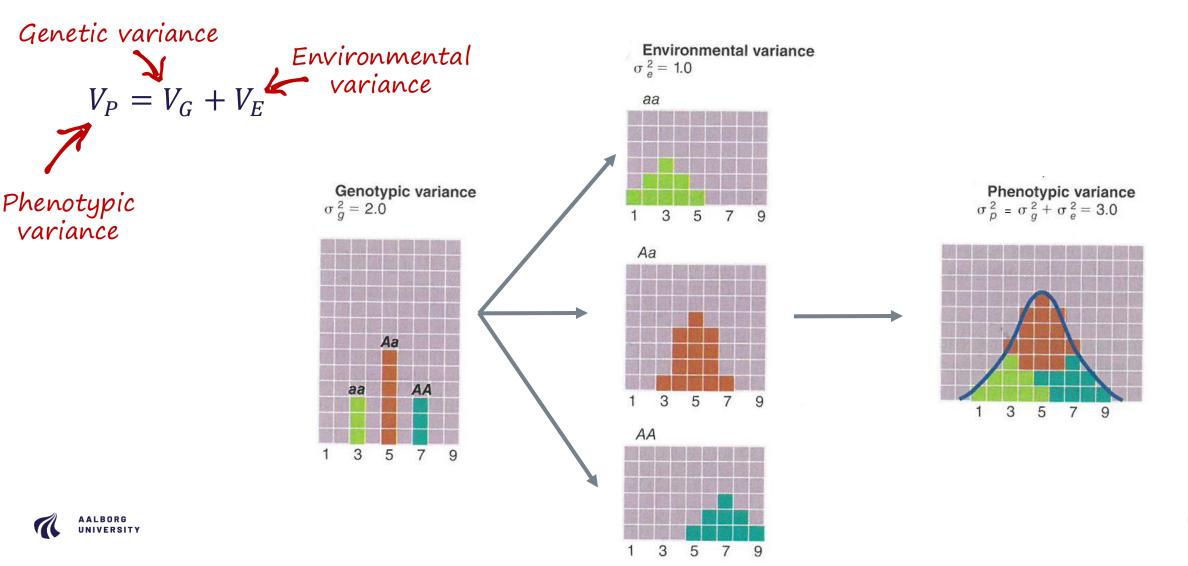
 \rightarrow this blurs the genotypic classes.







PARTITION OF PHENOTYPIC VARIANCE



GENETIC AND ENVIRONMENTAL VARIANCE

Important...!

$$V_P = V_G + V_E$$

This partition only holds when V_G and V_E are independent:

$$\sigma^{2}(x + y) = \sigma^{2}(x) + \sigma^{2}(y) + 2Cov(x, y)$$
$$Cov(x, y) = 0$$

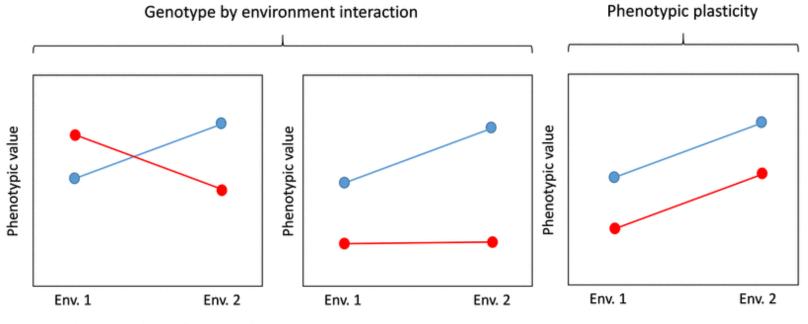


GENETIC AND ENVIRONMENTAL VARIANCE

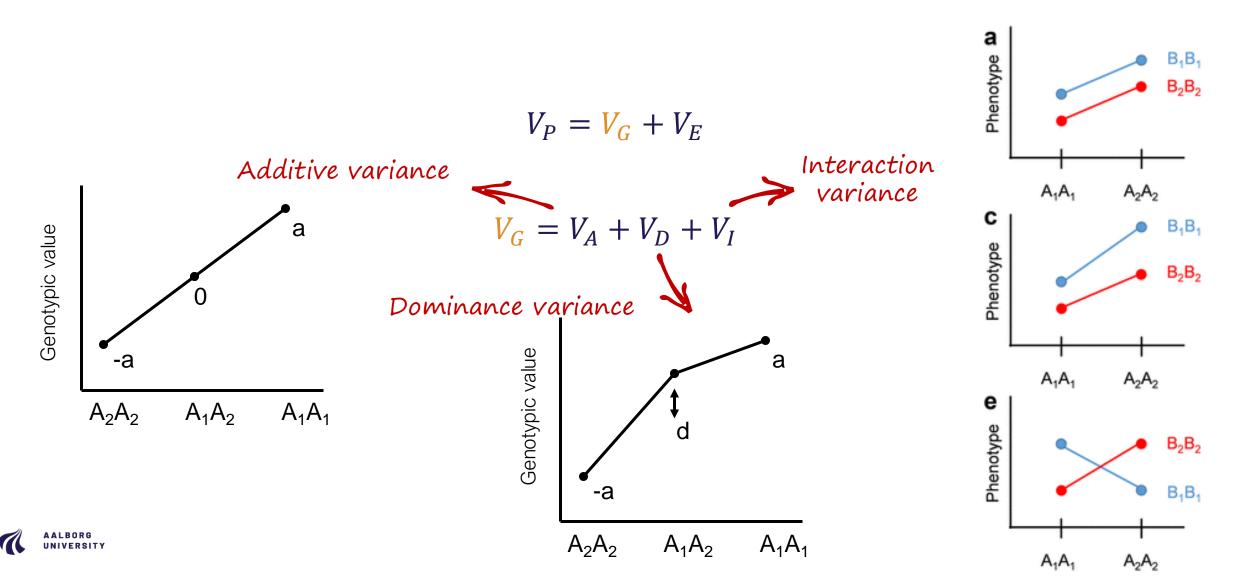
If, they are not independent:

 $V_P = V_G + V_E + V_G \times V_E$





PARTITION OF GENETIC VARIANCE



HERITABILITY

The concept heritability is an important concept as it describes the proportion of the *phenotypic variance that is due to genetic variation*.





But... the heritability of a trait is specific for an environment and a population.

The heritability is **NOT A QUANTITY FOR THE IMPORTANCE** of the genotypes for the trait





A heritability of 0.70 for human height do not mean that your height is due to 70% of genes.

A heritability of 0.70 means that in a specific population,70% of the variation in height can be explained by genetic difference between individuals in the sample, from which is was estimated.





Traits with low heritability can be under strong genetic control.

Traits that are evolutionary important have low heritability estimates (due to selection)



BROAD-SENSE HERITABILITY

Broad-sense heritability (H^2) describes the proportion of the phenotypic variance that is explained by genetic difference between individuals in the population.

$$V_P = V_G + V_E$$

$$H^2 = \frac{V_G}{V_P} = \frac{V_G}{V_G + V_E}$$

H^2 can take values between 0 and 1:

 $H^2 = 0 \rightarrow$ all variation is due to environmental variation

 $H^2 = 1 \rightarrow$ all variation is due to genetic variation



NARROW-SENSE HERITABILITY

 $V_P = V_G + V_E$ $V_P = V_A + V_D + V_I + V_E$

Narrow-sense heritabilitet (h^2) is the proportion of the phenotypic variance that is explained by additive genetic variance

$$h^2 = \frac{V_A}{V_P}$$



 $H^2 \mathbf{VS} h^2$

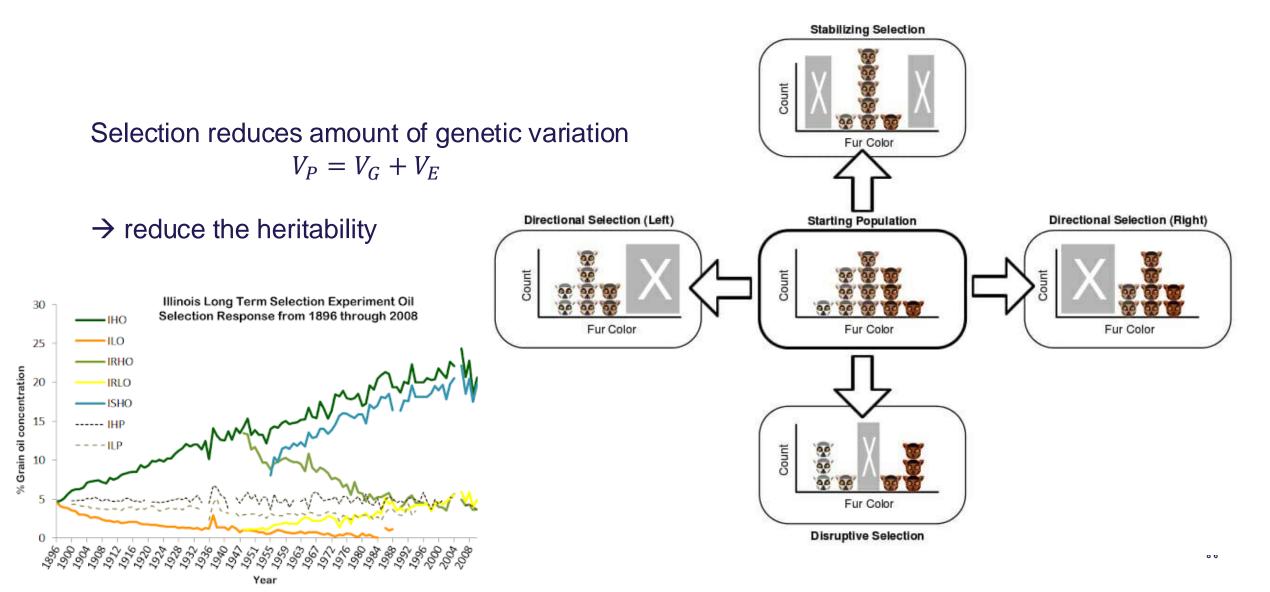
Broad-sense heritability (H²) is an estimate for the proportion of phenotypic variation that is due to genetic variation

h² is always smaller than H²

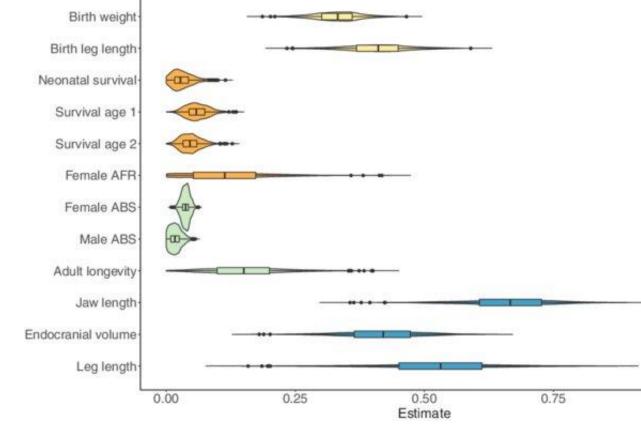
Narrow-sense heritability (h²) Is an estimate of the proportion of phenotypic variation that is caused by additive genetic variation – the part of the genetic variation that is directly transmitted from generation to generation

Additive genetic variance: hereditary | one allele from mom, one from dad Dominance variance: is established after gamete formation Interaction variance: is established after gamete formation

SELECTION AND GENETIC VARIATION



HERITABILITY AND SELECTION



Traits closely linked to **fitness** (under strong directional selection) have **low heritability** estimates (because selection removed V_A).

TABLE 24.4

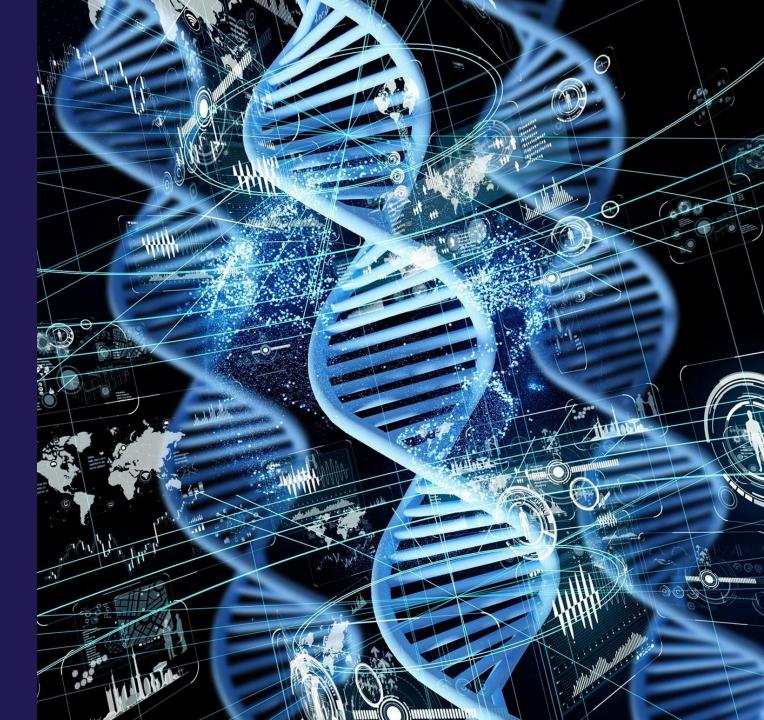
1.00

ESTIMATES OF HERITABILITY FOR TRAITS IN DIFFERENT ORGANISMS

Trait	Heritability (<i>h</i> ²)	
Mice		
Tail length	60%	
Body weight	37	
Litter size	15	
Chickens		
Body weight	50	
Egg production	20	
Egg hatchability	15	
Cattle		
Birth weight	45	
Milk yield	44	
Conception rate	3	

QUANTITATIVE GENETICS

- Unidentified genotypes but measured trait variability.
- Phenotypic vs Genotypic values
- Gene action
- Heritability





AGENDA

- **08:15 08:45** Lecture 1 [*Recap* + *indirect testing*]
- **08:45 09:15** Exercises A + Break
- **09:15 09:40** Lecture 2 [*Multifactorial traits*]
- **09:40 10:00** Exercises B
- **10:00 10:40** Break + Group work
- 10:40 11:15 Lecture 3 [Quantitative genetic theory]
- 11:15 11:50 Break + Exercises C
- **11:50 12:00** Evaluation at Mor

MOODLE EVALUATION

- **08:15 08:45** Lecture 1 [*Recap + indirect testing*]
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