

Cystic fibrosis modifier genes related to *Pseudomonas aeruginosa* lung disease

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Background. The remarkable heterogeneity among CF patients in the time of onset as well as in the severity of *P. aeruginosa* lung disease raised the question whether other genetic loci in addition to the CFTR can contribute to the clinical variation. Recently, Collaborative Cross (CC) mouse population has been generated as an innovative and powerful source to model the diversity of the *human population*.

Hypothesis and objectives. By using the CC lines as a novel and high genetically diverse mouse resource population, this project aims to identify genetic factors that may influence the severity of *P. aeruginosa* respiratory infections in CF.

Methods. 39 CC lines were challenged with *P. aeruginosa* and recorded for disease phenotypic traits of morbidity and mortality, as markers for disease progression. Quantitative trait locus (QTL) mapping associated with host susceptibility to *P. aeruginosa* was performed.

Results. Our data demonstrated that level of *P. aeruginosa* pneumonia infection is controlled by host genetic determinants, which impact on disease severity. Comprehensive analysis of CC mice showed that initial variables including, body weight, age and gender have a limited influence on *P. aeruginosa* outcome, emphasizing the role of complex genetic traits in the severity of infection. Survival time and weight lost were considered markers for mortality and morbidity as associated disease phenotypic traits, and subsequently were used for QTL mapping. A significant locus was mapped on chromosome 3 and was named *Pseudomonas* respiratory infection resistant locus (PrIrl2). Within this genetic locus, 14 candidate genes, including those related to host defense and immunity were ranked and considered as promising candidate gene modifiers for validation.

Spin-off for research & clinical purposes. We set up an innovative approach as CC mice to investigate the effect of the host genetic makeup on the *P. aeruginosa* disease establishment and progress. Our results can be translated into human population to identify novel modifier genes that can be used as predictive factors of clinical outcome in CF patients and may open the possibility of new therapeutic approaches.

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