## **Community Genetics**

## Hanan Hamamy Department of Genetic Medicine & Development Geneva University Hospital

Training Course in Sexual and Reproductive Health Research Geneva 2010

## Definition of Community Genetics

Community genetics is the art and science of the responsible and realistic application of health and disease-related genetics and genomics knowledge and technologies in human populations and communities to the benefit of individuals therein. Community genetics is multi-, inter- and transdisciplinary and aims to maximize benefits while minimizing the risk of harm, respecting the autonomy of individuals and ensuring equity.

Leo ten kate et al, J of Community Genetics, 2010 (http://www.springerlink.com/content/rh7761342130p643/fulltext.html)

# Activities and areas of interest within the field of community genetics

- Genetic screening
- Genetic literacy/education
- Access and quality of genetic services
- Genetics in primary care
- Genetics in middle and low income countries
- Genetics in disadvantaged subpopulations
- Registries of congenital and genetic disorders
- Genetics in preconception care
- Public consultation about genetic issues
- Epidemiologic issues
- **Economic issues**
- Psychosocial issues
- Ethical and legal issues
- Policy issues

Leo ten kate et al, J of Community Genetics, 2010 (http://www.springerlink.com/content/rh7761342130p643/fulltext.html)

## Community Genetics and Clinical Genetics

Although benefit to the individual is central to both community genetics and clinical genetics, community genetics seeks to locate people within the wider community who may be at increased risk of a genetic problem, but have not yet been identified or helped. Whereas clinical geneticists deal with persons or families with a particular problem or concern who have requested or been referred for a consultation.

Leo ten kate et al, J of Community Genetics, 2010 (http://www.springerlink.com/content/rh7761342130p643/fulltext.html)

## Strategies for the introduction of Community Genetic Services

Why do Genetic services have a low priority as health programs in most developing countries

Paucity of resources, genetic services are thought to be expensive

Paucity of resources, genetic services thought to be expensive

Inadequacy of data on magnitude and burden of congenital disorders

Paucity of resources, genetic services thought to be expensive

Inadequacy of data on magnitude and burden of genetic disorders

Insufficient numbers of trained health professionals in the area of medical genetics

Paucity of resources, genetic services thought to be expensive

Inadequacy of data on magnitude and burden of genetic disorders

Insufficient numbers of trained health professionals in the area of medical genetics

other competing priorities, chronic diseases ( diabetes, CVD, cancer)

Paucity of resources, genetic services thought to be expensive Inadequacy of data on magnitude and burden of genetic disorders Insufficient numbers of trained health professionals in the area of medical genetics other competing priorities

Cultural, social and religious limitations

#### What is meant by Community Genetic Services

- It means genetic services targeted to the population with the goal of reducing the burden imposed by congenital disorders on individuals in the population
- Involve programs for the prevention and care of congenital disorders specifically at the primary health care level.
- Provide services with equity and efficiency to all those in need



### What is meant by specialized genetic services

- Means genetic services targeted to individuals and families who request them with the goal of enabling people with a genetic disadvantage to live and reproduce as normally as possible and to make informed and voluntary choices on reproductive matters
- Provided by specialists in secondary and tertiary centers



#### Goals of community genetic Services



Prerequisites for the organization of community genetic services programs

- Political commitment
- Collection of epidemiological data
- Situation analysis of existing health care programs
- Financial resources
- Formation of a national committee

#### Is this the right time to introduce Community Genetic services in developing countries?

Declining infant mortality from infectious diseases

## Relation of infant mortality to impact of birth defects

- The lower the infant mortality rate, the higher the contribution of congenital disorders to infant mortality
- Around 20/1000 of all livebirths have a major birth defect, of whom around 40% (8/1000) die in infancy, and 40% live with a severe disability.
- When infant mortality rate is around 20/1000, about 40% of all infant deaths are related to congenital disorders

Is this the right time to introduce Community Genetic services in developing countries?

> Declining infant mortality from infectious diseases

Good coverage of reproductive primary health care programs

#### The health care network in developing countries



#### Is this the right time to introduce Community Genetic services in developing countries?

 Declining infant mortality

 from infectious diseases

 Good coverage of reproductive

 primary health care programs

 Care and Prevention is feasible

 and cost-effective

Examples of congenital disorders with feasible community services care and prevention

- Congenital malformations such as neural tube defects can be reduced by periconceptional folic acid supplementation
- Early management of congenital hypothyroidism detected by newborn screening can prevent mental retardation
- Early management of phenylketonuria detected by newborn screening can prevent mental retardation

Common single gene disorders that can be targeted by genetic services

- Hemoglobinopathies (thalassemias and sickle cell anemia): feasible care and prevention community programs are documented
- Early detection of cystic fibrosis, congenital adrenal hyperplasia, hereditary deafmutism and G6PD deficiency helps in proper management

#### Examples of relatively common single gene disoders



Is this the right time to introduce Community Genetic services in developing countries?



## Global prevalence of Consanguinity



## Reproductive health among consanguineous and non-consanguineous couples

- Earlier parental age at marriage
- Jounger maternal age at first livebirth
- Higher number of infants born to consanguineous parents
- Same or lower rates of abortion
- Higher rates of postnatal mortality in offspring
- Higher rates of congenital malformations in offspring Generally speaking, frequency of congenital malformations among newborns of first cousin unions is double the frequency among the general population (around 5%).
- Higher risk of having offspring with autosomal disorder if the gene segregates in the family

#### <u>Premarital advice regarding consanguineous</u> <u>marriages</u>

- If there is a suspected autosomal recessive disorder or other genetic disorder, refer family for professional genetic counseling
- If there is no known inherited disorder in the family, then first cousin marriages are given a risk for birth defects of about double the population risk. If general population rate for birth defects is 2.5%, it is estimated to be around 5% in first cousin couples.

Is this the right time to introduce Community Genetic services in developing countries?



## Strategies for the introduction of community genetic services

- Periconceptional counselling to maximize the chance of having a healthy baby
- Premarital screening for common recessive disorders
- Prenatal screening and counselling
- Newborn screening for treatable congenital disorders
- Initiation of registries for congenital disorders



Education and training in the context of community genetic services

Medical education

- Training of health care providers
- Population education

## Training of the health sector

Health workers need to be educated in basic scientific principles of genetics and in the ethics and practice of genetic counselling

- > Delivering periconceptional counselling
- Delivering prescreening counseling
- When and where to refer families to genetic centers
- > Implications of consanguinity on health and the society

### Education of the public

- Education is an integral part of any community health program. Organized information, education and communication need to be addressed to the population in general through different channels that include
- school curricula
- Population education

#### 1- School curricula

school curricula could include :

 Basic principles of Human genetics
 Information on common congenital disorders in the community and on available screening programs

### 2- Population Education

- Information acquired through trained primary health care workers
- Health pamphlets addressing methods for the care and prevention of congenital disorders
- Messages through the media. These should be scientific and properly formulated ,since inaccurate messages could do more harm than good and would eventually interfere with the successful implementation of the program

## Medical and Nursing Education

- Basic clinically oriented course on the principles & practice of Medical genetics
- Integrated education on applied genetics into the clinical specialties
- Training on the incorporation of community genetic services into the primary health care system

#### Integration of community genetic services into primary health care systems

- Preconception counseling (nutrition, maternal infections, Rh status, parental age, maternal disease, teratogenic drugs and chemicals, Rubella prevention, cessation of smoking, family planning)
- Monitoring of maternal health before and during pregnancy (diabetes, hypertension, epilepsy, detection and treatment of maternal thrombophilia)
- Examination of all neonates
- Caring for affected children

#### Main Services Offered by a Medical Genetics Centre

- Genetic counselling to families reporting to the centre
- Laboratory services for the diagnosis of congenital disorders (cytogenetics, molecular genetics, biochemical tests)
- Teaching and Training of health professionals on the principles and practice of medical genetics
- Research
- Development of community genetics services for the care and prevention of congenital disorders in the community

Examples of population screening programs for the care and prevention of congenital disorders

- Antenatal screening for Down syndrome, neural tube defects and major malformations
- Newborn screening for hypothyroidism, phenylketonuria, G6PD deficiency
- Premarital screening for beta thalassemia

## Genetic registries

- What conditions should be initially registered
- Training personnel
- Defining responsibilities
- Recruiting experts for planning and implementation of the project
- Training physicians and nurses on examination of newborns to detect congenital malformations

## Ethical, legal and Religious issues

Generally the main ethical standards that need to be addressed involve the following issues:

- Genetic services should reach all those in need
- Education of the public
- Services should not contradict cultural and religious beliefs
- Definition of guidelines for therapeutic abortion
- Definition of guidelines for premarital counseling
- Definition of guidelines for counseling and media messages

## Conclusions

- This is the time to introduce community genetic services in developing countries
- Services can be integrated into primary health care programs
- Education of health care providers is a priority
- Guidelines for prenatal screening, testing and selective abortion of an affected fetus are needed
- In some countries premarital screening programs can be introduced
- Introduction of newborn screening
- Initiation of genetic registries