Studies on Linkage Between Phenylketonuria and the Blood Groups¹

DAVID YI-YUNG HSIA² AND ARTHUR G. STEINBERG³

PENROSE AND OTHERS (Munro, Penrose, and Taylor, 1939, Penrose, 1945 and 1951) reported data which suggested that loose linkage between phenylketonuria and the ABO locus may exist. The data were too few to permit a statistically valid conclusion to be reached. The difficulty of accumulating the large samples necessary to test loose linkage for a recessive character rigorously, prevented these authors from bringing the analysis to a statistically significant conclusion.

In 1956 Hsia, Driscoll, Troll, and Knox reported that the heterozygous carriers for phenylketonuria can be detected by means of a phenylalanine tolerance test. A load of 0.1 gm. per kg. body weight of L-phenylalanine was administered by mouth, and samples of blood were taken at one, two, and four hours, and the plasma phenylalanine levels determined. It was found that the heterozygotes had plasma levels on the average twice that seen among normal controls and the difference between the two groups was highly significant. The ability to detect the heterozygote combined with newly reported methods for the detection of linkage in man (Morton, 1955) made it seem worth while to reinvestigate the problem.

The purpose of the present paper is to report on linkage relationships between the genes for phenylketonuria and those for the blood groups. The data have been subjected to sequential analysis with the phenylketonuric gene being treated both as a recessive and as an intermediate dominant, where the heterozygote is identified by means of the phenylalanine tolerance test.

MATERIALS AND METHODS

A total of 23 families located in New England and the Midwest were studied. In each instance, the diagnosis of phenylketonuria in the homozygote was confirmed by the presence of phenylpyruvic acid in the urine or the elevation of phenylalanine in the plasma, or both. With one exception, which has been reported in a separate communication (Hsia, Knox, and Paine, 1957), all of the homozygotes were mentally deficient.

Venous blood samples were tested for the following blood groups: (1) ABO (2) MNS (3) Rh (4) P (5) K and (6) Fy.

Available relatives (as shown in Appendix Table A) were subjected to a stand-

Received March 17, 1960.

¹These studies were aided by grants from the United States Public Health Service (M-1945) and the Otho. S. A. Sprague Memorial Institute, Chicago.

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ard phenylalanine tolerance test (Hsia et al., 1956). One-tenth of a gram per kg. of L-phenylalanine (obtained from Nutritional Biochemicals, Cleveland, Ohio) in crystalline form was mixed with fruit juice and given by mouth after an overnight fast. Samples of plasma were taken one and two hours after the load and the phenylalanine level determined by the phenylethylamine method of Udenfriend and Cooper (1953) as modified by Hsia, Knox, Quinn, and Paine (1957). The plasma phenylalanine levels at one and two hours were summed and used to establish the discriminant between heterozygotes and normal controls.

The tolerance test to detect heterozygotes for phenylketonuria (Hsia et al., 1956) is not completely successful (Hsia, 1958). Regardless of the score used (phenylalanine-tyrosin ratio, the sum of the one- and two-hour phenylalanine levels, etc.) there is considerable overlap of the scores for known heterozygotes and presumed homozygous normals. An example of this is shown in Fig. 1, where the logarithms of the sums of the one- and two-hour phenylalanine levels in mgms % for 48 heterozygotes (parents of affected children) and 38 presumed normals are plotted. (Unpublished calculations showed that for our data this score was as satisfactory as any other for discriminating between homozygotes and heterozygotes.) We were confronted with the alternatives of treating phenylketonuria as a complete recessive, or of using some arbitrary criteria for deciding whether an individual was homozygous or heterozygous. We decided to utilize both alternatives.

The heterozygosity of a nonphenylketonuric member of a family was determined as follows: 1. Normal curves were fitted to the distributions of the

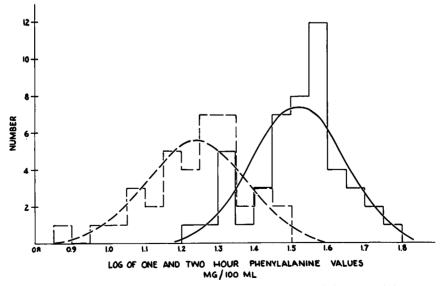


FIG. 1. Histograms and fitted normal curves for the distribution of the sums of the one- and two-hour phenylalanine levels in 38 normal adults (dashed lines) and 48 heterozygotes (solid lines).

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logarithms of the sum of the one- and two-hour phenylalanine levels for known heterozygotes and for presumed normals. 2. When it was ascertained that the fitted normal curves were satisfactory representations of these distributions, deviations from the means were computed, taking into account the prior odds (segregation ratios), so that the frequency, at these deviations, of homozygous normals would be to that of heterozygotes as 4:1 or as 1:4. Values falling at or to the left of the former point were considered to be for homozygous normals; those at or to the right of the latter point were considered to be for heterozygotes. Values falling between these points were classified as indeterminate and not used for linkage analyses. By this procedure the odds were at least 4:1 that the classification of each individual was correct.

The decision points were determined by equating the ratio of the ordinate of the normal curve fitted to the distribution of the sum of the one and two hour plasma phenylalanine levels of the homozygotes, to the ordinate fitted to that of the heterozygotes, at 4 for the upper limits for normals and at 0.25 for the lower limit for heterozygotes, and solving for the value of the sum of the one and two hour levels which would satisfy these values of the equation.

The equation is:

$$\frac{y_1}{y_2} = \frac{\frac{N_1}{\sigma_1 \sqrt{2\pi}} \exp - \frac{(x_i - \bar{X}_1)^2}{2\sigma_1^2}}{\frac{N_2}{\sigma_2 \sqrt{2\pi}} \exp - \frac{(x_i - \bar{X}_2)^2}{2\sigma_2^2}} = Y$$

where $y_i = \text{ordinate of normal curve}$

- N_1 = the *a priori* frequency of homozygous normals relative to that of heterozygotes
- N_2 = the *a priori* frequency of heterozygotes relative to that of homozygous normals
- $\mathbf{x}_i = \text{logarithm}$ of the sum of the one- and two-hour phenylalanine levels at a decision point
- $\overline{\mathbf{X}} = \text{mean}$
- $\sigma =$ standard deviation

The subscripts refer to homozygous normals (1) and to heterozygotes (2).

The relative frequencies of homozygotes and heterozygotes are 1:1 for matings of Phph \times PhPh and 1:2 for matings of Phph \times Phph. Using the values and the computed means and standard deviations, the following "cut-off" points in mgms % for the sum of the one- and two-hour phenylalanine levels were established:

Mating	x _i at Y of In	dicated Value
macing	Y = 4	Y = 0.25
1. Phph \times PhPh	20.3	29.1
2. Phph \times Phph	18.5	25.9

Thus for cross 1 all those whose scores were 20.3 mgms % or lower were con-

sidered homozygous normal; those whose scores were 29.1 mgms % or higher were considered heterozygous; all others were excluded from consideration. Similarly, for cross 2 all those whose scores were 18.5 mgms % or lower were considered homozygous normal; those whose scores were 25.9 mgms % or higher were considered heterozygous; all others were excluded from consideration.

The family data upon which the linkage caculations are based are presented in Appendix Table A. Since only two of the parents and one of the siblings tested had weights exceeding 90 kilograms, the heights and weights of the individuals are not recorded in the table, nor were they considered in determining heterozygotes (Renwick, Lawler, and Cowie, 1960).

Scores for the sequential test for linkage (Morton, 1955) were computed for the ABO, MNS, Rh, Fy, K, and P loci, treating phenylketonuria as an intermediate dominant and as a recessive. We have in addition computed the linkage scores for the MN, and Rh loci for the families reported by Munroe (1947) and by Penrose (1951), treating phenylketonuria as a recessive. The totals for the scores are presented in Tables 1 and 2. Renwick et al. (1960) have examined the ABO data in detail.

When phenylketonuria is treated as an intermediate dominant (Table 1), the following conclusions may be drawn: ABO: linkage of .1 or less is excluded and probably also linkage of .2; MNS and Rh: linkage of .1 or less is excluded; K: linkage of .05 or less is excluded. No conclusions may be drawn concerning looser linkages than those mentioned above for these loci, nor for any linkage (except absolute linkage which is excluded) concerning the Fy and P loci.

Blood Groups ABO MNS Rh Fy K	No. of Families	z at Specified Values of θ													
		.05	.10	.20	.30	.40									
ABO	12	-7.6839 ²	-4.5465	-1.9450	7061	0455									
MNS	15	-7.0652^{3}	-3.8228	-1.1862	2749	+.1717									
Rh	16	-6.2933	-3.3098	9829	1651	0650									
$\mathbf{F}\mathbf{v}$	4	68074	5104	1038	+.0074	+.0361									
•	5	-2.3537	-1.3516	5307	1908	0424									
Р	5	1912	0112	+ .0666	+.0476	+.014									

TABLE 1. SEQUENTIAL ANALYSIS SCORES FOR LINKAGE BETWEEN PHENYLKETONURIA AND VARIOUS BLOOD GROUP LOCI. PHENYLKETONURIA TREATED AS AN INTERMEDIATE DOMINANT¹

¹ Based on determination of the heterozygote by means of the phenylalanine stress test. Those for whom the *a priori* expectation of heterozygosity was $\frac{1}{2}$ and for whom the sum of the 1- and 2-hour plasma phenylalanine levels was less than 20.3 mgm/100 ml., were considered homozygous normal; if the sum exceeded 29.1 mgm/100 ml., they were considered heterozygotes. All others were excluded from consideration. Those for whom the *a priori* expectation of heterozygosity was $\frac{2}{3}$ were considered homozygous normal if the sum of the 1- and 2-hour readings was less than 18.5 mgm/100 ml.; they were considered heterozygous if the sum exceeded 25.9 mgm/100 ml. All others were excluded from consideration. Parents of affected children were accepted as heterozygotes regardless of their scores.

² Based on 11 families.

³ Based in 12 families.

⁴ Based on 3 families.

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	C	No. of														
Blood Groups	Source	Fami- lies	.05	.10	.20	.30	.40									
ABO	This study	14	-1.9539	-1.0060	3065	0803	0128									
MNS	This study	18	-3.8833 ¹	-2.0976	7709	2607	0536									
	Munro (1947)	16	—	-1.1207	0844	+.1076	+.050									
	Penrose (1951)	2	—	+.0793	+.0540	+.0275	+.007									
	The 3 studies	36	-3.88331	-3.1390	8013	1256	– . 121:									
Rh	This study	19	-1.9938^{2}	-1.7446	6425	2133	043									
	Penrose (1951)	5	8744	5294	2098	0723	015									
	The 2 studies	24	-2.8682	-2.2740	8523	2856	0588									
Fy	This study	5	5845	1856	+.0370	+.0509	+.0178									
K	This study	4	5181	2712	0834	0213	003									
Р	This study	4	+.5147	+.4198	+.2498	+.1162	+.0300									

TABLE 2. SEQUENTIAL ANALYSIS SCORES FOR LINKAGE BETWEEN PHENYLKETONURIA AND VARIOUS BLOOD GROUP LOCI. PHENYLKETONURIA TREATED AS A RECESSIVE

¹ Based on 17 families.

² Based on 14 families.

Similar conclusions may be drawn from the data derived when phenylketonuria is treated as a recessive, except that the amount of information for each locus is less. The latter observation indicates that few if any errors were made in classifying heterozygotes on the basis of the stress test and the derived "cut-off" points.

It is perhaps worth noting that the scores for the P locus are suggestive of linkage. None of the scores are significant, but only 5 families were available for analysis with phenylketonuria treated as an intermediate dominant and 4 families with phenylketonuria treated as a recessive.

It is apparent that many more data are required to exclude loose linkage (.3 or .4). It is also apparent that such data can best be obtained by treating phenylketonuria as an intermediate dominant. Unfortunately, the available tests for detecting the heterozygote are relatively inefficient; hence, until they are improved, it would not seem desirable to pursue the linkage study.

SUMMARY

Linkage between phenylketonuria and the ABO, MNS, Rh, P, K, and Fy loci was examined by Morton's sequential method, treating phenylketonuria as an intermediate dominant and as a recessive.

Linkage with ABO, Rh, or MNS as close as .1 or less is excluded.

Linkage with K of .05 or less is excluded.

The data are insufficient to permit other conclusions.

ACKNOWLEDGMENT

The authors wish to express their appreciation to Shirley G. Driscoll, M.D., Kenneth Hugh-Jones, M.D., M.R.C.P., Michael Krans, M.D., and Ting-Chien Lee, M.D., for clinical help; to Constance Harwood, B.A., and Susan Gerber, B.S., for technical assistance; and to June Samuels Cosbey, M.F.A., for contacting the families. They wish to express their particular gratitude to the many members of the families, who without exception, cooperated with us in every way to make this study possible.

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TABLE A. FAMILY DATA In each family the father is listed first, followed by the mother and their children.

Fam.	No. in Ped.	Sex	Year of Birth	Sum of 1 and 2 hour phenyl- alanine levels in mgms %	Genotype	A	в	м	N	s	c	D	Е	с	e	Fy"	к	Р
9-P5	I-1 2 II-1 2	M F F M	06 16 43 46	30.1 17.6 24.2 —	Phph Phph Ph? phph	- + + +	- +	+	+	++	+++++++++++++++++++++++++++++++++++++++	++	+ -	- + - +	n + n +	+++++++++++++++++++++++++++++++++++++++	-	-
10-P11	I-1 2 II-1 2 3	M F F F	24 29 50 52	40.2 29.8 31.2 20.8	Phph Phph phph Phph Ph?	n +	+ n -	- n (+	+ (n +	+ n +	+ + n +	+ n +	n n	-	n n n n	- + n - n	- + ^b n -	+ + n +
11-P10	I-1 2 1I-2 3	M F M M	12 12 49 51	34.3 n 15.5 —	Phph Phph PhPh phph	++	+	- +	+	n	+	+		+	n n	+ + + +	 	+ + + +
12-P2	I-1 2 II-1 2 3 4 5 6	M F M M F F	79 78 08 10 13 15 22 28	$\begin{array}{c} 39.2 \\ 15.8 \\ 23.7 \\ 31.5 \\ 29.7 \\ 26.0 \\ 3.9 \\ 13.3 \end{array}$	Phph PhPh Ph? Phph Phph Ph? PhPh PhPh	+ - +	- - - -	+ + + + + +	+ + -	n n n + n	+	+ + + + + + +		+ + -	n n n n n	+ - - - +	- + + + + + + - + - + -	+ + + + + + + + + n + + + + + + + + + +
13-P2	II-2 2a III-1 2	M ^c F M M	10 	31.5 n 15.4 16.2	Phph PhPh⁴ PhPh PhPh PhPh		_	+	_		+-				n n	- + - +	+ - + +	+
14-P2	II-3 3a III-3 4 5 6	M ^c F F F F F	13 15 41 44 46 52	29.7 28.9 17.8 28.3 — —	Phph Phph PhPh Phph phph phph	-	-	- + +	+ + +	- + - +	+++++++++++++++++++++++++++++++++++++++	+ + +	_	+ - -		-	+ + + + + + +	
15-P2	II-4 4a III-3 4	M ^c F M F	15 42 46	26.0 n 15.7 10.7	Ph? PhPh ^d PhPh PhPh		-	+	_	+ +	+++	+ +		_	n n	- + - +	-	+ - + -
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TABLE A.—Continued

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	No. in		Year	Sum of 1 and 2 hour					N								 K	P
Fam.	No. in Ped.	Sex	of Birth	phenyl- alanine levels in mgms %	Genotype		D	M	N	3	L	D	E	C	e	Fy ^a	ĸ	r
17-P17	I-1 2 II-1 2	M F M M	17 20 42 44	25.7 20.7 15.0	Phph Phph PhPh phph	- - -	- + + +	++	-	++	+	++	-	+++	n n	+++++	- - n	
18-P16	I-1 2 II-1 3 4 5	M F M F F	91 96 19 23 28 31	38.3 52.8 17.8 22.1 	Phph Phph phph PhPh Ph? phph	+ - + - + +		+++++	+ -	_				+++++++++++++++++++++++++++++++++++++++	n n n n	+ + n + + n		
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20c-P18	11-3 1 111-1 2	M¢ F∕ F F	30 29 53 56	22.0 19.9 15.1 —	Phph Phph PhPh phph	+ + +		+	+ +	- +	_	- +	_	+ + + +	n n	+++++++++++++++++++++++++++++++++++++++		+ + + + +
21-P19	II-1 2 III-1 2	M F M M	20 24 48 —	27.7 16.0 2.0 —	Phph Phph PhPh phph	++++++		+	+ + + +	_		+ +	- - -	-	n	+ + + +		- + +
21a-P19	I-1 2 II-2 3	M F Fø F	88 98 24 27	$26.7 \\ 16.1 \\ 16.0 \\ 6.5$	Phph PhPh Phph PhPh	- + +		1 ·	- + + +	-	+	-	- - -	+ -	n n n n	+ - + +		+ + + +
22	I-1 2 II-2 4	M F F F	28 28 51 56		Phph Phph Phph phph	_	+	_ +	+ +	- +	+ -	+ +	- +	+++++++++++++++++++++++++++++++++++++++	n +		 	+++++++++++++++++++++++++++++++++++++++
26-P21	I-1 2 II-1 2	M F M M	30 35 57 57	38.9 19.9 — —	Phph Phph phph phph	+ +		-	+	_	+ +	+ +	_	++++++	n n	+ + + +	- - -	-

TABLE A.—Continued

Fam.	No. in Ped.	Sex	Year of Birth	Sum of 1 and 2 hour phenyl- alanine levels in mgms %	Genotype	A	B	м	N	s	с	D	E	с	e	Fy ^a	ĸ	P
27-P22	I-1	м	26	48.9	Phph	+	_	+	+	+	_	+	+	+	_	+	_	+
	2	F	31	55.7	Phph	-	_	+		+	+	+	_	+	n	+	-	+
	II-2	M	50	30.0	Phph	-	_	+	+	+		+	+	+	+	+	-	+
	3	M	52	-	phph	+	-	+	+	n		+	+	+	+	+	-	+
	4	F	53	51.0	Phph	-		+	-	+	—	+	+	+	+	+	-	+
	5	M	55	22.0	Ph?	+	—	+	_	+		+	+	+	+	+	-	+
	6	F	56	—	phph	+	_	+	_	+	+	+	+	+	+	+	-	+
	7	M	57	40.4	Phph	-	_	+	+	+	+	+	+	+	+	+	-	+
	8	M	58	-	phph	-	_	+	+	-	-	+	+	+	+	+	-	+

TABLE A.—Continued

^a His parents are I-1 and I-2 of 7-P3.

^b Tested with k.

^c His parents are I-1 and I-2 of 12-P2.

^d Assumed.

* His parents are I-3 and I-4 of 20a-P18.

/ Her parents are I-1 and I-2 of 20b-P18.

• Mother of Family 21-P19.