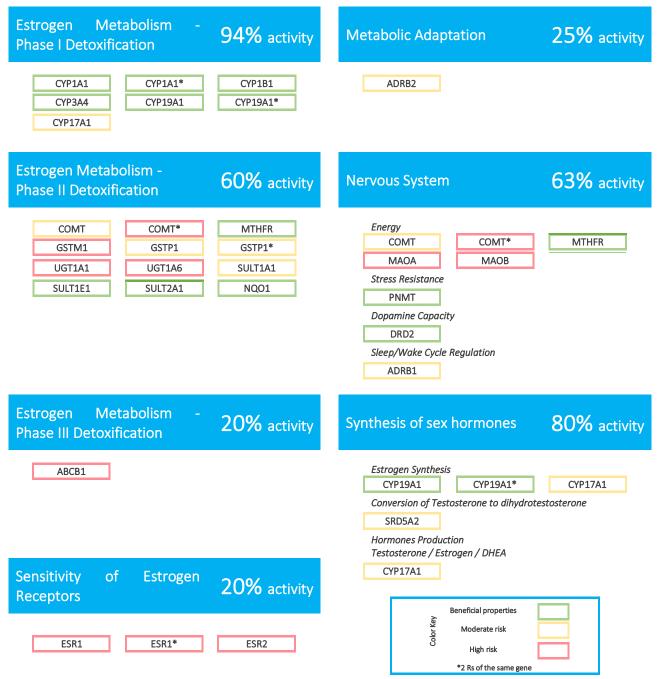


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# **GENETIC REPORT OF WOMAN'S HORMONAL HEALTH - SAMPLE**

The Woman's Hormonal Health genetic testing investigates risks of hormonal metabolism disorders caused by certain gene polymorphisms. This test evaluates: sensitivity of estrogen receptors, synthesis of sex hormones, balance of active forms of sex hormones, metabolism of sex hormones (all three phases of detoxification), metabolism of hypothalamic-pituitary-adrenal system hormones.



# Brief Explanation of the Functions of the Studied Genes

### Sensitivity of estrogen receptors

Mutations in a gene encoding the estradiol receptor may lead to increased sensitivity of cells to estradiol with its normal amount in the blood, and as a consequence, receptor relative hypoestrogenemia.

This has been shown to affect reproductive function, lead to disruption of calcium metabolism and disorganization of connective tissue.

#### Synthesis of sex hormones

In this section, we analyze the genes encoding the enzymes 17-alpha-hydroxylase and aromatase, which belong to the class of cytochromes. 17-alpha-hydroxylase is involved in the synthesis of all sex hormones (androgens and estrogens). Mutations in this gene can lead to increased hormone synthesis, i.e. hyperandrogenism and hyperestrogenism. Aromatase converts testosterone into estradiol (all female sex hormones are synthesized from male hormones). If aromatase activity is enhanced, this leads to increased synthesis of estradiol and hyperestrogenism.

Hyperestrogenism is a condition characterized by an excess of estrogens in the blood. Estrogens play the role of catalyst for the proliferation of the endometrium and mammary gland cells. Not only the reproductive system depends on them, but also the brain, bones and hair follicles. Hyperestrogenism can lead to such consequences as irregular or absent menstruation, insulin resistance, miscarriage, infertility, hypertension and atherosclerosis before the age of 50, osteoporosis and depression.

Hyperandrogenism is a syndrome caused by an increased amount of androgens in the peripheral blood and/or their increased activity. Among the symptoms of this disease in women are disruption of proper functioning of hair follicles and sebaceous glands (acne, seborrheic dermatitis, hirsutism), reproductive problems (algo menorrhea, oligomenorrhea, polymenorrhea, amenorrhea, infertility).

Deviations from the normal range of active forms of androgens/estrogens can cause many pathological conditions. These include an increased amount of dihydrotestosterone, one of the most active androgens, formed from testosterone directly in the "target organs" with the participation of a special enzyme (5-alpha-reductase). By controlling the activity of SRD5A2, such misbalances can be prevented.

#### Metabolism of sex hormones (3 phases of detoxification), balance of active forms of sex hormones

Sex hormones play a vital role in woman's health. It is important to note that despite the division of sex hormones into female and male, in the female body, androgens (male sex hormones) serve as precursors of estrogens (female sex hormones). Therefore, a deficiency of androgens in the female body is as undesirable as an excess thereof (hyperandrogenism).

The endometrium contains a very large number of estrogen receptors. High levels of estrogen receptor expression is a risk factor for development of endometriosis and endometrial neoplasms. An important target for treatment and prevention of endometrial diseases (endometriosis, malignant neoplasms) is aromatase, a key enzyme in the biosynthesis of estrogens, responsible for their biosynthesis from male sex hormones. On the other hand, metabolic activation with the formation of estrogen derivatives, sometimes having even greater proliferative activity compared to estrogens themselves, plays no less a role in endometrial dysplastic processes.

It has been established that androgens also affect the proliferation of endometrial cells. Dysregulation of androgen biosynthesis is associated with endometrial pathologies and dysfunction and plays a role in the development of infertility and miscarriages. Androgen receptors are one of the most important therapeutic targets for the prevention and treatment of endometrial disorders.

Estrogen metabolites can have a significant impact on the body; they are most often associated with the development of cancer, as they have a carcinogenic effect and damage cellular DNA.

The CYP1A1 gene is responsible for the formation of an enzyme that is involved in the metabolism of estrogens along a non-oncogenic pathway. Variants of the CYP1A1 gene can affect the rate and activity of estrogen metabolism and, therefore, an individual's predisposition to the development of cancer and other diseases.

The CYP1B1 gene encodes an enzyme that leads estrogens along a more dangerous detoxification pathway, where metabolites that can cause DNA damage to accumulate. They also increase oxidation and inflammation, which explains their association with PMS, oncology, menstrual cramps, headaches, and other pathologies.

The COMT gene encodes the enzyme catechol-O-methyltransferase, which is involved in the metabolism of dopamine, norepinephrine, and epinephrine. Variations in this gene can affect our response to stress, emotional states, and cognitive functions. COMT also participates in the inactivation of estrogens, transforming them into forms that are safe for the body. Mutations in this gene and decreased COMT activity are associated with increased risks of breast cancer, ovarian cancer, and other pathologies.

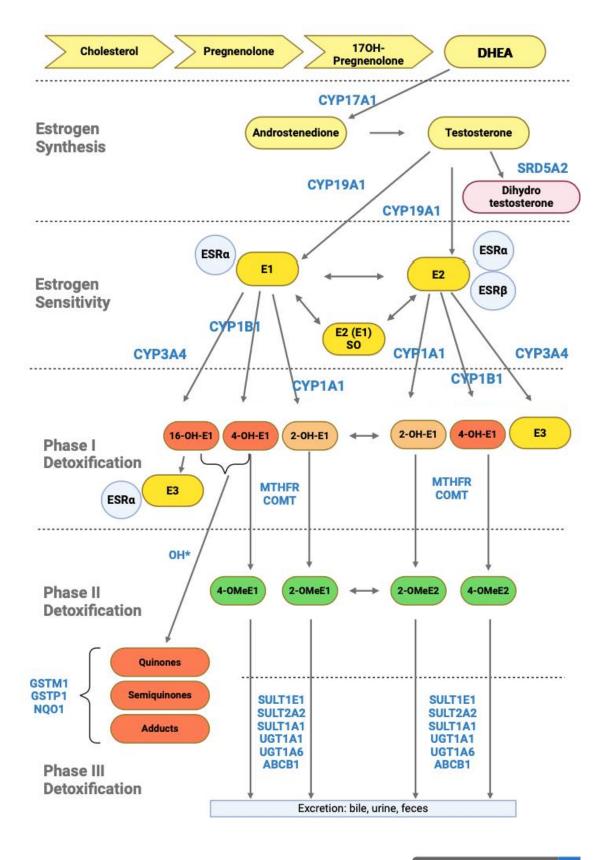
The function of the UGT1A1 gene is to convert estrogens into their conjugates with glucuronic acid. The conjugation process allows the body to safely metabolize and remove estrogens from the body. Some variants of the UGT1A1 gene can affect its activity and effectiveness. This can lead to the accumulation of estrogens in the body and increase the risk of developing certain diseases, such as breast cancer.

The function of the GSTT1 and GSTM1 genes is to convert estrogens into their conjugates with glutathione. Polymorphisms in the GSTT1 gene lead to a lack of enzyme activity, which, when combined with COMT deficiency, increases the concentrations of carcinogenic estrogen metabolites and increase the risk of hypoestrogenemia, reproductive disorders, and estrogen-dependent proliferative diseases.

#### Hypothalamic-pituitary-adrenal system hormone metabolism

The HPA axis is a major neuroendocrine system. It is responsible for regulating response to stress and other body processes, including digestion, immune responses, emotional regulation, sexual activity, as well as energy storage and expenditure.

# Sex Steroid Hormones Metabolism



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## **GENETIC ANALYSIS RESULTS of Sensitivity of estrogen receptors**

*Role:* Steroid hormones are a group of hormones that are synthesized from cholesterol.

Sensitivity of steroid receptors, such as estrogen, is associated with polymorphisms in the ESR1, ESR2 genes.

These genes encode receptors that interact with hormones and can affect various physiological processes.

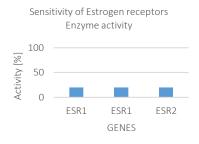
*Key Enzymes:* ESR1: This polymorphism can affect the expression of the estrogen receptor and is associated with the risk of developing of various diseases, such as breast cancer and osteoporosis. ESR1 is associated with response to stress and estrogen production, as well as increased risk of estrogen-linked conditions.

Genotypes and acticity of Sensitivity of estrogen receptors				
GENES	Genomic Coordinates	Genotype	Zygosity	Enzyme activity
ESR1	Chr6: 151842246	GG	Homozygous	20
ESR1	Chr6:151842200	CC	Homozygous	20
ESR2	Chr14:64233098	π	Homozygous	20

Global activity: 20%

ESR1: This polymorphism can also affect the function of the estrogen receptor and is associated with the risk of cardiovascular diseases, cancer, dyslipidaemia, hypertension, obesity, and cognitive brain function.

ESR2: Polymorphism in the ESR2 gene can affect sensitivity to estrogen and is associated with the risk of cancer and other diseases. ESR2 is activated by estrogen, with generally anticancer effects. This genotype has an increased risk of cardiovascular and metabolic conditions after menopause.



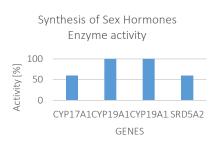
### **GENETIC ANALYSIS RESULTS of Synthesis of sex hormones**

*Role:* Activity of enzymes influences the level of cortisol, androgens and estrogen.

*Key Enzymes:* CYP17A1 enzymatic activity shows conversion from progesterone to cortisol, androgens and estrogens. This activity can be up-regulated by stress, blood sugar dysregulation, excess insulin, and alcohol. Adequate physical activity and stress management needs to be ensured.

CYP19A1 enzymatic activity shows conversion of androgens
into estrogens. Inflammation, high level of insulin, chronic
stress will increase CYP19A1 activity.

SRD5A2 enzymatic activity shows conversion from testosterone to 5a-DHT. Controlling SRD5A2 activity gives benefit in cancer prevention. It is also beneficial for women with PCOS to protect against hair loss.



Genotypes and acticity of Synthesis of sex hormones						
GENES	Genomic Coordinates	Genotype	Zygosity	Enzyme activity		
CYP17A1	Chr10: 102837395	GT	Heterozygous	60		
CYP19A1	Chr15: 51242350	π	Homozygous	100		
CYP19A1	Chr15: 51210789	GG	Homozygous	100		
SRD5A2	Chr2: 31580636	CG	Heterozygous	60		

Global activity: 80%

#### **GENETIC ANALYSIS RESULTS of Phase I enzymes**

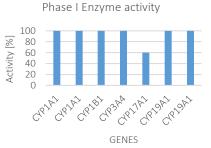
**Role:** Phase I detoxification involves the modification of toxins through chemical reactions, such as oxidation, reduction, and hydrolysis. These reactions introduce or expose a functional group (such as a hydroxyl group) on the toxin, making it more reactive. **Key Enzymes:** Cytochrome P450 enzymes (CYPs):

G	enotypes and acticity of	Phase I enz	ymes	
GENES	Genomic Coordinates	Genotype	Zygosity	Enzyme activity
CYP1A1	Chr15: 74720644	π	Homozygous	100
CYP1A1	Chr15: 74719300	AA	Homozygous	100
CYP1B1	Chr2: 38071060	CC	Homozygous	100
CYP3A4	Chr7:99784473	π	Homozygous	100
CYP17A1	Chr10: 102837395	GT	Heterozygous	60
CYP19A1	Chr15: 51242350	π	Homozygous	100
CYP19A1	Chr15: 51210789	GG	Homozygous	100

Global activity: 94%

### **GENETIC ANALYSIS RESULTS of Phase II enzymes**

These are the most important Phase I enzymes. They are a large family of enzymes that catalyze the oxidation of organic substances. CYP enzymes, such as CYP1A1, CYP1B1, CYP3A4, CYP17A1, and CYP19A1 play a major role in drug metabolism and detoxification of various toxins.



**Role:** Phase II of detoxification involves Sulphation, Conjugation with glutathione, Glucuronidation, Acetylation, Amino-Acid Conjugation, Methylation to form more stable and water-soluble compounds that can be easily excreted.

**Key Enzymes:** The UGT1A1 gene encodes UDP-glucuronyl transferase, the main enzyme responsible for the glucuronidation of bilirubin and some other compounds. The UGT1A1 gene is expressed mainly in the liver. Certain genetic variants affecting the production of UDP-glucuronyl transferase are a risk factor for the development of Gilbert's syndrome. The function of the UGT1A1 gene is to convert estrogens into their conjugates with glucuronic acid. The conjugation process allows the body to safely metabolize and eliminate estrogens from the body.

Glutathione-S-transferases (GSTs): Catalyze the conjugation of glutathione to reactive intermediates, neutralizing them and making them more water-soluble.

Glutathione S-transferase Pi (GSTP1) is an isozyme encoded by

Geno	types and acticity of	Phase II en	zymes	
GENES	Genomic Coordinates	Genotype	Zygosity	Enzyme activity
Glucoronidation				
UGT1A1	Chr2: 233764076	GG	Homozygous	30
UGT1A6	Chr2:233693631	π	Homozygous	25
Sulphation				
SULT1A1	Chr16:28606193	TC	Heterozygous	60
SULT1E1	Chr4: 69860103	CC	Homozygous	100
SULT2A1	Chr19:47868938	π	Homozygous	100
Glutathion Conjugation				
GSTM1	Null Allelle	AA	Homozygous	0
GSTP1	Chr11: 67585218	GA	Heterozygous	70
GSTP1	Chr11:67586108	π	Heterozygous	50
Methylation				
MTHFR	Chr1: 11796321	GG	Homozygous	100
COMT	Chr22: 19963748	AA	Homozygous	25
COMT	Chr22: 19962712	СТ	Heterozygous	60
NQO1	Chr16: 69711242	GG	Homozygous	100

#### Global activity: 60%

#### **GENETIC ANALYSIS RESULTS of Phase III enzymes**

*Role:* Phase III detoxification involves elimination of water-soluble molecules out of the body through bile/intestine (stool), kidneys (urine) and skin (sweat).

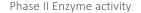
*Key Enzymes:* ABCB1 enzyme regulates Phase III of the detoxification process and allows toxins to move across cellular barriers in the liver, gastrointestinal system, kidneys, and the blood-brain barrier.

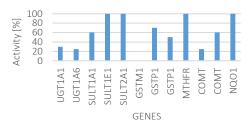
	Genotypes and acticity of	Phase III en	zymes	
GENES	Genomic Coordinates	Genotype	Zygosity	Enzyme activity
ABCB1	Chr7:87509329	GG	Homozygous	20
	Global activi	ty: 20%		

the GST pi gene that plays an important regulatory role in detoxification, anti-oxidative damage, and the occurrence of various diseases. Polymorphisms of this gene reduce the activity of the enzyme, which inhibits Phase II xenobiotics, including detoxification of medicinal derivatives.

Sulfotransferases (SULTs): Transfer sulphate groups to hydroxyl groups on toxins, increasing their water solubility. Sulfotransferase enzymes family (SULT1A1, SULT1E1, SULT2A1) catalyze the sulphate conjugation of many hormones, neurotransmitters, drugs, and xenobiotic compounds.

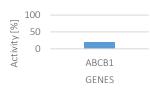
The end products of Phase II detoxification are generally nontoxic, highly water-soluble, and can be readily excreted from the body through urine or bile.





The ABCB1 gene regulates the production of important ATPdependent Phase 3 antiporter protein responsible for transporting various xenobiotics, drugs, lipids, and other exogenous and endogenous toxins out of cells for excretion. It can also be found under the name of MultiDrug Resistance 1 (MDR1) or the P-Glycoprotein (P-GP).





#### GENETIC ANALYSIS RESULTS of Nervous System / Stress Resistance

*Role:* Neurotransmitter imbalance causes fatigue, mood swings, sleep disorders, depression and aggression. Neurotransmitter levels relate to adrenaline, noradrenaline, dopamine, serotonin whose levels depend on the methylation processes and hypothalamic-pituitary-adrenal system activity.

*Key Enzymes:* Variants on COMT, MAOA & MAOB, MTHFR relate to neurotransmitter levels and lead to imbalances causing mood swings and chronic fatigue.

Gene expression of PNMT (phenyl-ethanolamine N -methyl

transferase), the enzyme catalyzing the transfer of a methyl group from S-adenosyl-L-methionine (SAM) to norepinephrine in the final step of the biosynthesis of epinephrine.

DRD2 gene is responsible for regulating synthesis, storage and

It has been shown that mutation of DRD2 gene can increase the risk of developing addiction and neuropsychiatric diseases. Moreover, it can inhibit dopamine production and activity, leading to psychiatric and psychotic effects. The function of each dopamine receptor D2: attention, sleep, memory, learning.

The ADRB1 gene encodes for the  $\beta$ 1-adrenergic receptor. These receptors respond to hormones (including the hormones that regulate the sleep cycle). The ADRB1 gene is related to adrenaline and noradrenaline.

ADRB2 controls the physiological response to adrenaline, as it stimulates heart rate, blood flow, and availability of glucose for immediate energy.

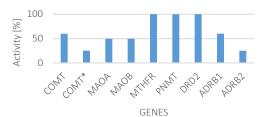
release of dopamine.

Genotypes and a	acticity of Nervous Sy	stem Enzyn	ies	
GENES	Genomic Coordinates	Genotype	Zygosity	Enzyme activity
Methylation/Energy				
COMT	Chr22: 19962712	СТ	Heterozygous	60
COMT*	Chr22: 19963748	AA	Homozygous	25
MAOA	ChrX: 43731789	π	Homozygous	50
MAOB	ChrX: 43768752	CC	Homozygous	50
MTHER	Chr1: 11796321	GG	Homozygous	100
Methylation/Stress Resistance				
PNMT	Chr17:39668292	GG	Homozygous	100
HPA Axis/Dopamine Capacity				
DRD2	Chr11:113412966	CC	Homozygous	100
HPA Axis/Sleep-Wake Cycle Regulation				
ADRB1	Chr10:114045297	CG	Heterozygous	60
HPA Axis/Metabolic Adaptation				
ADRB2	Chr5: 148826877	GG	Homozygous	25

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Global activity: 63%

Nervous System Enzyme activity



## Method

DNA was extracted from a cheek swab sample in accordance with the kit manufacturer's instructions. Genotyping was performed using Agena's MassARRAY © System. In a first step, raw results were analyzed using the MassARRAY Report software. In a second step, this report was generated using proprietary scripts.

# References

## - ABCB1

De Azevedo Delou, J.M. et al. (2017) 'Loss of constitutive <em>ABCB1</em> expression in breast cancer associated with worse prognosis,' Breast Cancer Targets and Therapy, Volume 9, pp. 415–428. https://doi.org/10.2147/bctt.s131284.

- ADRB1

Shi, G. et al. (2019) 'A rare mutation of B1-Adrenergic receptor affects Sleep/Wake behaviors,' Neuron, 103(6), pp. 1044-1055.e7. https://doi.org/10.1016/j.neuron.2019.07.026.

- ADRB2

Mitra, S.R., Tan, P.Y. and Amini, F. (2019) 'Association of ADRB2rs1042713 with Obesity and Obesity-Related Phenotypes and Its Interaction with Dietary Fat in Modulating Glycaemic Indices in Malaysian Adults,' Journal of Nutrition and Metabolism, 2019, pp. 1–10. https://doi.org/10.1155/2019/8718795.

- COMT

Zahid, M. et al. (2013) 'Unbalanced estrogen metabolism in ovarian cancer,' International Journal of Cancer, 134(10), pp. 2414–2423. https://doi.org/10.1002/ijc.28565.

Janacova, L. et al. (2023) 'Catechol-O-methyl transferase suppresses cell invasion and interplays with MET signaling in estrogen dependent breast cancer,' Scientific Reports, 13(1). https://doi.org/10.1038/s41598-023-28078-1.

Stein, D.J. et al. (2006) 'Warriors versus Worriers: The role of COMT gene Variants,' CNS Spectrums, 11(10), pp. 745–748. https://doi.org/10.1017/s1092852900014863.

- CYP1A1

Hecht, S.S. et al. (2006) 'Comparison of Polymorphisms in Genes Involved in Polycyclic Aromatic Hydrocarbon Metabolism with Urinary Phenanthrene Metabolite Ratios in Smokers,' Cancer Epidemiology Biomarkers & Prevention, 15(10), pp. 1805–1811. https://doi.org/10.1158/1055-9965.epi-06-0173.

- CYP1B1

Zahid, M. et al. (2013b) 'Unbalanced estrogen metabolism in ovarian cancer,' International Journal of Cancer, 134(10), pp. 2414–2423. https://doi.org/10.1002/ijc.28565.

- CYP3A4

Samavat H, Kurzer MS. Estrogen metabolism and breast cancer. Cancer Lett. 2015;356(2):231-43.

- CYP17A1

Suleeporn Sangrajrang et al. Genetic polymorphisms of estrogen metabolizing enzyme and breast cancer risk in Thai women. Int J Cancer. 2009.

Szczepańska, M. et al. (2013) 'Polymorphic variants of CYP17 and CYP19A and risk of infertility in endometriosis,' Acta Obstetricia Et Gynecologica Scandinavica, 92(10), pp. 1188–1193. https://doi.org/10.1111/aogs.12210.

- CYP19A1

Thompson, D.J., O'mara, T.A., Glubb, D.M., Painter, J.N., Cheng, T., Folkerd, E., Doody, D., Dennis, J., Webb, P.M., Gorman, M. and Martin, L., 2016. CYP19A1 fine-mapping and Mendelian randomization: estradiol is causal for endometrial cancer. Endocrine-related cancer, 23(2), p.77.

Miron L, Negură L, Peptanariu D, Marinca M. Research on aromatase gene (CYP19A1) polymorphisms as a predictor of endocrine therapy effectiveness in breast cancer. Rev Med Chir Soc Med Nat Iasi. 2012 Oct-Dec;116(4):997-1004. PMID: 23700878

Dunning, A.M. et al. (2004) 'Polymorphisms associated with circulating sex hormone levels in postmenopausal women,' JNCI Journal of the National Cancer Institute, 96(12), pp. 936–945. https://doi.org/10.1093/jnci/djh167.

- DRD2

Jiang, Y. et al. (2020) 'Dopamine receptor D2 gene (DRD2) polymorphisms, job stress, and their interaction on sleep dysfunction,' International Journal of Environmental Research and Public Health, 17(21), p. 8174. https://doi.org/10.3390/ijerph17218174.

Shi, G. et al. (2019b) 'A rare mutation of B1-Adrenergic receptor affects Sleep/Wake behaviors,' Neuron, 103(6), pp. 1044-1055.e7. https://doi.org/10.1016/j.neuron.2019.07.026.

- ESR1

Dustin D., Gu G., Fuqua S.A.W. 2019. ESR1 mutations in breast cancer. Cancer. 125 (21), 3714–3728.

Angus L., Beije N., Jager A., Martens J.W.M., Sleijfer S. 2017. ESR1 mutations: Moving towards guiding treatment decisionmaking in metastatic breast cancer patients. Cancer Treat. Rev. 52, 33–40.

Reinert T., Gonçalves R., Bines J. 2018. Implications of ESR1 Mutations in Hormone Receptor-Positive Breast Cancer. Curr. Treat. Options Oncol. 19 (5), 24.

- ESR2

Yu, K.-D. et al. (2010) 'A systematic review of the relationship between polymorphic sites in the estrogen receptor-beta (ESR2) gene and breast cancer risk,' Breast Cancer Research and Treatment, 126(1), pp. 37–45. https://doi.org/10.1007/s10549-010-0891-2.

De Padua Mansur, A. et al. (2005) 'Genetic Polymorphisms of Estrogen Receptors in Patients with Premature Coronary Artery Disease,' Archives of Medical Research, 36(5), pp. 511–517. https://doi.org/10.1016/j.arcmed.2005.04.002.

Fujimiya, T. et al. (2016) 'Effect of the <i>GSTM1</i> Null Genotype on Glutathione S-Transferase (GST) Activity in Patients with Non-Viral Liver Tumors,' The Showa University Journal of Medical Sciences, 28(2), pp. 113–121. https://doi.org/10.15369/sujms.28.113.

Catherine Tcheandjieu, Emilie Cordina-Duverger, Claire Mulot, Dominique Baron-Dubourdieu, AnneValérie Guizard, et al..

Role of GSTM1 and GSTT1 genotypes in differentiated thyroid cancer and interaction with lifestyle factors: Results from casecontrol studies in France and New Caledonia. PLoS ONE, 2020, 15 (1), pp.e0228187. 10.1371/journal.pone.0228187. inserm-02468903

Almeida, M. et al. (2019) 'Prognosis of hormone-dependent breast cancer seems to be influenced by KEAP1, NRF2 and GSTM1 genetic polymorphisms,' Molecular Biology Reports, 46(3), pp. 3213–3224. https://doi.org/10.1007/s11033-019-04778-8.

- GSTP1

Ji F, Zhu S, Sun P, Wang W. [Relationship between genetic polymorphisms of phase I and phase II metabolizing enzymes and DNA damage of workers exposed to vinyl chloride monomer]. Wei Sheng yan jiu = Journal of Hygiene Research. 2009 Jan;38(1):7-11. PMID: 19267064.

- MAOA

Shih, J.C., Chen, K. and Ridd, M.J. (1999) 'MONOAMINE OXIDASE: From genes to behavior,' Annual Review of Neuroscience, 22(1), pp. 197–217. https://doi.org/10.1146/annurev.neuro.22.1.197.

Ziegler, C. and Domschke, K. (2018) 'Epigenetic signature of MAOA and MAOB genes in mental disorders,' Journal of Neural Transmission, 125(11), pp. 1581–1588. https://doi.org/10.1007/s00702-018-1929-6.

Zhang, J. et al. (2010) 'A CIS-Phase interaction study of genetic variants within the MAOA gene in major depressive disorder,' Biological Psychiatry, 68(9), pp. 795–800. https://doi.org/10.1016/j.biopsych.2010.06.004.

- MAOB

Huang, L.-C., Hsu, S.-Y. and Lin, E. (2009) 'A comparison of classification methods for predicting Chronic Fatigue Syndrome based on genetic data,' Journal of Translational Medicine, 7(1). https://doi.org/10.1186/1479-5876-7-81.

- MTFHR

Bhatia, P. and Singh, N. (2015) 'Homocysteine excess: delineating the possible mechanism of neurotoxicity and depression,' Fundamental and Clinical Pharmacology, 29(6), pp. 522–528. https://doi.org/10.1111/fcp.12145.

Li, K., Li, W. and Dong, X. (2014) 'Association of 677 C>T (rs1801133) and 1298 A>C (rs1801131) Polymorphisms in the MTHFR Gene and Breast Cancer Susceptibility: A Meta-Analysis Based on 57 Individual Studies,' PLoS ONE, 9(6), p. e71290. https://doi.org/10.1371/journal.pone.0071290.

- NQO1

Yuhan, L., Ghadiri, M.K. and Gorji, A. (2024) 'Impact of NQO1 dysregulation in CNS disorders,' Journal of Translational Medicine, 22(1). https://doi.org/10.1186/s12967-023-04802-3.

Tossetta, G. et al. (2023) 'The role of NQO1 in ovarian cancer,' International Journal of Molecular Sciences, 24(9), p. 7839. https://doi.org/10.3390/ijms24097839.

- PNMT

Wong, D.L. et al. (2004) 'Genetic Mechanisms for Adrenergic Control during Stress,' Annals of the New York Academy of Sciences, 1018(1), pp. 387–397. https://doi.org/10.1196/annals.1296.048.

Betito K, Diorio J, Meaney MJ, Boksa P. Adrenal phenylethanolamine N-methyltransferase induction in relation to glucocorticoid receptor dynamics: evidence that acute exposure to high cortisol levels is sufficient to induce the enzyme. J Neurochem; 1992 May; 58(5):1853-62. PubMed ID: 1560238.

- SRD5A2

M Graupp et al. Association of genetic variants in the two isoforms of  $5\alpha$ -reductase, SRD5A1 and SRD5A2, in lean patients with polycystic ovary syndrome. Eur J Obstet Gynecol Reprod Biol. 2011 Aug.

Beesley, J. et al. (2007) 'Association Between Single-Nucleotide Polymorphisms in Hormone Metabolism and DNA Repair Genes and Epithelial Ovarian Cancer: Results from Two Australian Studies and an Additional Validation Set,' Cancer Epidemiology Biomarkers & Prevention, 16(12), pp. 2557–2565. https://doi.org/10.1158/1055-9965.epi-07-0542.

- SULT1A1

Shatalova, E.G. et al. (2005) 'Genetic polymorphisms in human SULT1A1 and UGT1A1 genes associate with breast tumor characteristics: a case-series study,' Breast Cancer Research, 7(6). https://doi.org/10.1186/bcr1318.

- SULT1E1

Timothy R. Rebbeck, Andrea B. Troxel, Yiting Wang, Amy H. Walker, Saarene Panossian, Stephen Gallagher, Ekaterina G. Shatalova, Rebecca Blanchard, Greta Bunin, Angela DeMichele. Estrogen Sulfation Genes, Hormone Replacement Therapy, and Endometrial Cancer Risk. JNCI: Journal of the National Cancer Institute, Volume 98, Issue 18, 20 September 2006, Pages 1311–1320.

- SULT2A1

Goodarzi, M.O., Antoine, H.J. and Azziz, R. (2007) 'Genes for Enzymes Regulating Dehydroepiandrosterone Sulfonation Are Associated with Levels of Dehydroepiandrosterone Sulfate in Polycystic Ovary Syndrome,' The Journal of Clinical Endocrinology & Metabolism, 92(7), pp. 2659–2664. https://doi.org/10.1210/jc.2006-2600.

He, T. et al. (2022) '27-Hydroxycholesterol promotes metastasis by SULT2A1-dependent alteration in hepatocellular carcinoma,' Cancer Science, 113(8), pp. 2575–2589. https://doi.org/10.1111/cas.15435.

- UGT1A1

Kim YH, Yeon JE, Jung GM, Kim HJ, Kim JS, Byun KS, Bak YT, Lee CH. A study of polymorphism in UDP-glucuronosyltransferase 1 (UGT-1A1) promoter gene in Korean patients with Gilbert's syndrome. Taehan Kan Hakhoe Chi. 2002 Jun;8(2):132-8. Korean. PMID: 12499798.

Guillemette, C. Pharmacogenomics of human UDP-glucuronosyltransferase enzymes.Pharmacogenomics J 3, 136–158 (2003). https://doi.org/10.1038/sj.tpj.6500171

- UGT1A6

Justenhoven, C. et al. (2013) 'The UGT1A6\_19\_GG genotype is a breast cancer risk factor,' Frontiers in Genetics, 4. https://doi.org/10.3389/fgene.2013.00104.

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