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Pharmacogenetics research in different disease models: Genetic diversity in an ethnic admixture population

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In humans, the enzyme N-acetyltransferase2 (NAT2), coded by *NAT2* gene, is the main metabolizer of isoniazid, dapsone and hydralazine, used for the treatment of tuberculosis, leprosy and resistant hypertension, highly incident diseases in Brazil. We studied *NAT2* in different Brazilian populations for these three diseases. In the first study, we showed the predominance of *NAT2* slow acetylation alleles in Rio and Goias states. However, population from Rio showed a higher heterogeneity in *NAT2* allele distribution and significant higher frequency of intermediate phenotype. We identified six new SNPs allowing characterization of seven new alleles. Further, we performed an *in silico* molecular modeling and structural protein analyses of *NAT2*. The results strongly indicates the direct involvement of the new SNP (152G>T-Gly51Val) in substrate recognition, SNP (203G>A-Cys68Tyr) in the modification of the catalytic site by the loss of a functional group and SNPs (458C>T, 578C>T, 683C>T and 838G>A) in enzyme degradation, all altering the acetylation activity to slow acetylation. In a subsequent study to evaluate the influence of *CYP2E1*, *GSTT1*, *GSTM1* and *NAT2* genotypes on isoniazid-induced hepatitis in TB patients, we found that only the NAT2 slow acetylation phenotype represented a risk factor for the occurrence of this outcome during TB treatment. In a more recent study, the influence of slow acetylation phenotype was observed and only slow acetylators had significant blood pressure reductions after hydralazine use, however, with a high incidence of ADRs.

Biography

Adalberto Rezende Santos is PhD in Cellular and Molecular Biology from Oswaldo Cruz Foundation, Rio de Janeiro, Brazil. Actually, he is a Senior Investigator and Head of the Laboratory of Molecular Biology Applied to Mycobacteria of Oswaldo Cruz Institute, Supervisor at the post-graduation programs of Cellular, Molecular Biology, and Clinical Medicine from Fiocruz and Federal University of Rio de Janeiro respectively. He is *ad hoc* consultant of the Executive Secretariat of Science Technology and Environment and of the Ministry of Health, Brazil. He is also referee of the *Journal of Infectious Diseases and Pharmacogenomics*.

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