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HIGH PREVALENCE AND SIGNIFICANT PHARMACOKINETIC IMPLICATIONS
OF THE *CYP2C19* GAIN-OF-FUNCTION ALLELE *17
IN PSYCHOTROPIC-TREATED PATIENTS

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Objective: To establish the frequency of the *CYP2C19* *17 gain-of-function promoter polymorphism (-806 C>T, rs12248560, increased transcription) and determine its combinatorial genotypes with *CYP2C9* and *CYP2D6*. A patient homozygous for *17 is classified as an ultra-rapid metabolizer for the *CYP2C19* isoenzyme, and the *CYP2C19* *17 allele has been associated with escitalopram therapeutic failure.

Method: We examined 199 European-American psychiatric patients referred to the Genomas Laboratory of Personalized Health at Hartford Hospital for intolerance or resistance to psychotropics. Their DNA was genotyped to detect 10 alleles in *CYP2C19*, including *17 (AutoGenomics Infinity® assays) and 26 alleles in *CYP2C9* and *CYP2D6* (6 and 20, respectively, Luminex xTag® assays).

Results: The *CYP2C19* *17 allele frequency was 18.6%, consistent with previous reports. Of the 199 patients, 52 were *CYP2C19* *17 heterozygotes, 12 were compound heterozygotes of *17 and null-function alleles, and 5 were homozygotes. The number of patients with non-Reference alleles in *CYP2C19*, *CYP2C9*, and *CYP2D6* (triple gene alterations) was 20. Of these, 14 patients were *CYP2C19* *17 carriers and 6 were carriers for *CYP2C19* null alleles. Ultra-rapid metabolizer status for isoenzyme *CYP2C19* was assigned to the 5 patients who were *17 homozygotes. Of these, 1 patient was an ultra-rapid metabolizer for both *CYP2C19* and *CYP2D6*, which correlated with therapeutic failures to multiple psychotropics. The other 4 *CYP2C19* ultra-rapid metabolizers were deficient or poor metabolizers for *CYP2D6*, resulting in pronounced functional disparity between the *CYP2C19* and *CYP2D6* isoenzymes, which are the two major routes for psychotropic metabolism.

Conclusions: The *17 allele significantly increases the polymorphism of *CYP2C19* and contributes to a supra-functional status for the isoenzyme, leading to an ultra-rapid metabolizer status in 3-4% of patients. In combination with *CYP2C9* and *CYP2D6* polymorphisms, the *CYP2C19* *17 more than doubled the prevalence of individuals with triple gene alterations. The pharmacogenetic profile of psychiatric patients is critically enhanced by incorporation of *CYP2C19* *17 in the diagnostic allele panel.

Educational Objectives: At the conclusion of this presentation, participants will be able to (1) describe the prevalence and significance of *CYP2C19* loss- and gain-of function drug metabolism alterations, (2) assess the utility of CYP450 combinatorial genotyping in characterizing an individual's metabolic phenotype, and (3) utilize CYP450 combinatorial genotype values to improve psychotropic management.

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