

Global screening and extended nomenclature for 230 aphidicolin-inducible fragile sites, including 61 yet unreported ones

KRISTIN MRASEK, CHRISTIANE SCHODER, ANNE-CHRISTIN TEICHMANN, KATJA BEHR, BRITTA FRANZE, KATHLEEN WILHELM, NANCY BLAUROCK, UWE CLAUSSEN, THOMAS LIEHR and ANJA WEISE

Institute of Human Genetics and Anthropology, D-07740 Jena, Germany

Received November 9, 2009; Accepted January 5, 2010

DOI: 10.3892/ijo_00000572

Abstract. Since the first description of human fragile sites (FS) more than 40 years ago, a variety of substances were reported to induce chromosomal breaks at non-random, breakage-prone regions. According to information available from human genome browsers aphidicolin, an inhibitor of DNA replication induces 77 of 88 known common FS. However, in the literature additional FS are reported, which are also, at least in part, inducible by aphidicolin. To the best of our knowledge, here we present the first and largest ever done systematic, whole genome-directed and comprehensive screening for aphidicolin-inducible breakage-prone regions. The study was performed on stimulated peripheral blood lymphocytes of 3 unrelated healthy individuals. Twenty-five thousand metaphase spreads were analyzed and overall 22,537 FS located in 230 different loci were recorded. Sixty-one of those FS were never observed before and 52 were already previously reported but not included in genome browsers and yet verified. Interestingly, aphidicolin was able to induce all types of rare and common FS, suggesting that these breakage-prone regions are less dependent on the inducing chemicals than originally supposed. Overall, we provide the first comprehensive genome wide map for FS and studied possible correlations of chromosome length and GTG-banding level with FS-frequency. To handle FS better in future, an extension of the already existing alphabetical nomenclature for FS on single chromosomes is suggested.

Introduction

The first description of human fragile sites (FS) dates back more than 40 years (1), and the term fragile site was introduced by Magenis five years later (2). Since that time fragile sites continued as an active area of research in cytogenetics

and their definition and classification was subject for several controversies with the increasing knowledge (3,4). Today FS are understood as specific loci that preferentially exhibit gaps and break on metaphase chromosomes following partial inhibition of DNA synthesis. Rare FS are present in a small proportion of individuals and are inherited in a Mendelian manner. In contrast, common FS are present in all individuals and represent the largest class of FS (5). A number of substances are in use to induce common FS e.g. the bromodeoxyuridine (BrdU) or 5-azacytidine (5-azaC) (5,6). Common FS are also inducible by aphidicolin that acts as an inhibitor of DNA polymerase α and σ (7). Common FS are part of the normal mammalian chromosome structure. With a frequency of >5% in normal population they are usually not associated with disease, except for a possible correlation of some FS with cancer-related breakpoints (e.g. 5,7,8,9) or a molecular cytogenetic co-localization with breakpoints in Fanconi anemia patients (10).

According to the present knowledge, only 77 of 88 common FS listed in human genome browsers like NCBI (<http://www.ncbi.nlm.nih.gov/>) are inducible by aphidicolin. The three most frequently observed such FS are FRA3B in 3p14, FRA16D in 16q23 and FRAXB in Xp22. Therefore, it is not surprising that they are also part of the up to now 22 molecular characterized common FS: FRA1H, FRA1E, FRA2G, FRA3B, FRA4F, FRA6E, FRA6F, FRA7E, FRA7G, FRA7H, FRA7K, FRA7I, FRA8C, FRA9E, FRA9G, FRA11E, FRA11F, FRA11G, FRA13A, FRA16D, FRA18C and FRAXB. Interestingly, not all common FS are necessarily detectable in only one individual. Additionally, differences in the observable FS-frequency within different individuals are well known (11,12). Besides these 88 official, database-annotated common FS others were observed and reported, including six recently reported new sites, particularly FRA4F (13), FRA7K (14), FRA6H (15), FRA9G (16), FRA13E (15) and FRA18C (17).

Thus, with a systematic genome-wide screening for aphidicolin inducible FS in lymphocytes of 3 unrelated healthy individuals here the question should be solved which regions of the human genome are really breakage prone and to what extent they are affected when applying aphidicolin. Twenty-five thousand metaphase spreads presenting 22,537 break events were analyzed by cytogenetics. As a result, 61 new, by now unreported and unclassified FS were detected and the existence of 52 further FS (18,19) was proven.

Correspondence to: Dr Anja Weise, Institute of Human Genetics and Anthropology, D-07740 Jena, Germany
E-mail: awaise@mti.uni-jena.de

Key words: fragile sites, aphidicolin, nomenclature

Materials and methods

Cytogenetics and induction of FS. Peripheral blood lymphocytes from three unrelated, healthy persons with normal female karyotype were studied (proband I, II and III). Proband I and II were Caucasian and proband III Caucasian-Asian in origin. Using cytogenetic standard protocols lymphocyte cultures were incubated for 72 h at 37°C in RPMI medium supplemented with 10% fetal calf serum and 2% phytohemagglutinin. Aphidicolin (0.2 µM) dissolved in dimethylsulfoxide was added 24 h before harvesting (20). Colcemid (0.04 µg/ml) was added 2 h before culture termination. Chromosome preparation was done according to standard protocols (21). Additionally lymphocytes from all three subjects were cultivated without aphidicolin and 100 metaphase spreads were evaluated, each, as negative controls, without finding any spontaneous break events. The chromosomes were banded by diamidinophenylindol (DAPI) and evaluation was done using ISIS software (MetaSystems, Altlußheim, Germany) based inverted DAPI-banding.

The 25,000 analyzed metaphase spreads were categorized according to their band level in 300-350, 400-500, 550-650 and >650 bands per haploid karyotype. Fifty-eight percent of the metaphase spreads were arrested at a 400-500 band level, 29% at 550-650, 11% at 300-350 and 2% at a band level of >650.

A chromosomal lesion was counted when it appeared as a chromatide or chromosome gap or break according to ISCN 2009 (22). A chromosomal site was determined to be a fragile site when it appeared more than once in this study or was reported before elsewhere in the literature.

Results

New aphidicolin-induced FS. A total of 25,000 metaphase spreads from three female subjects were analyzed after aphidicolin-induced lymphocyte culture. Overall, cytogenetic analysis revealed 22,537 break-events, i.e. 0.91 breaks per metaphase spread. Two hundred and thirty different FS including 61 until now not reported break-prone regions could be described (Table I, entries in bold, and Figs. 2 and 3). A FS was included here as new in case it was observed in this study at least twice. If a break-event was observed at least once in this study and also previously reported as FS it was also included into the 230 ones described here.

The mean frequency of all FS detected in this study was 0.279% and only 21 out of 230 detected FS appeared with a frequency over 1%. In contrast 92 specific FS have a frequency between 0.1 and 1% and the main part of 109 FS is expressed between 0.009 and 0.099% (Table I). The most frequently observed FS were FRA3B (14.153%), FRA16D (7.576%), FRAXB (5.494%), FRA2H (3.905%), FRA1M (3.333%) and FRA1I (2.299%) whereas FS that were described before and detected only once in this study had a frequency of 0.004% like FRA8F and FRA17D.

Additionally, single-break events were observed in the current study and not described in literature before. These breaks were not rated as new FS. In detail these were 1p34 (proband II), 2q14.2-14.3 (proband II), 3q23 (proband III), 4q32 (proband II), 15q24 (proband II), 20q13.3 (proband I)

and 21q11.2 (proband I). Aphidicolin was able to induce different types of known rare and common FS that were also classified as 5-azacytidine, BrdU, folate sensitive and distamycin type before (Table I).

Frequency of FS per metaphase spread and per haploid band level. Not surprisingly the highest amount of breaks per metaphase were found in the highest band levels (>650: 3-12; 550-650: 3-8) compared to 300-350 and 400-500 band level with 1-4 and 2-5 breaks per metaphase, respectively.

Frequency of FS in different individuals. The FS-frequencies found in the three different studied individuals are detailed in Table I. Interindividual frequency differences for the expression of FS were found. As typical example for individual-specific FS inducibility results obtained for chromosome 10 are summarized in Fig. 1. Especially proband III expressed the highest rate of chromosome 10-specific FS while proband II showed here an extremely low rate and e.g. no expression of FRA10K. Overall, 41% of all here detected FS were found in proband I, 38% in proband III and only 21% in proband II. Strong FS-expression variation rates were also found e.g. for FRA1I, FRA2J, FRA4C, FRA4H, FRA6B, FRA10F and FRA16C. However, beside these strong variations, there were also sites with practically identical expression in all three studied subjects, such as FRA1A, FRA3C or FRA11C (Table I).

Distribution of FS. As shown in Figs. 2 and 3 the break-prone areas are almost equally distributed along each chromosome. Table II summarizes the number of FS per chromosome and the average interval size in megabases (Mb) between the individual FS. The latter is on average 13.63 Mb. The chromosome with the highest number of FS is human chromosome 2 with twenty-one break-prone regions. The number of FS is not correlated with chromosomal size as can be exemplified on chromosome 16, which is the most unstable chromosome with FS every 9.89 Mb. The smallest human chromosomes 21 and 22 show only two FS each and are the most stable chromosomes with an average breaking distance of 23.50 and 25.00 Mb besides the Y chromosome, which was not studied here and has only one FS reported in the literature. Moreover, half of human chromosomes contain a FS at the centomere including chromosomes 1, 2, 3, 5, 6, 8, 11, 12, 16, 17, 19 and X. Breakage-prone regions were also detected in heterochromatic blocks of human chromosome 1, 9 and the Y-chromosome.

Of the FS, 24.5% are located in GTG dark bands, 62% in light bands, 5% in centromeres and 8.5% at the boarder of light and dark bands. The major part of breaks result from chromatide breaks and only a small portion show chromosome breaks or reunions.

Nomenclature of FS. The nomenclature of FS is chromosome-specific and starts with the abbreviation FRA followed by chromosome number and a capital letter according to the appearance of the FS description from pter to qter, starting from A to Z e.g. FRA1A in 1p36. In accordance with these rules, the here reported new FS and also recently reported FS that were not included in human genome browsers before were

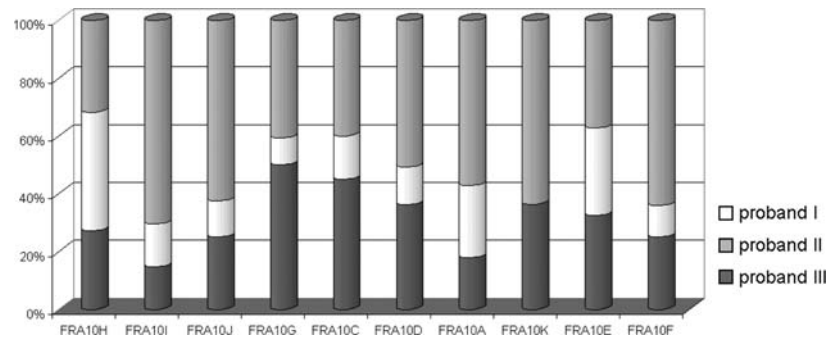


Figure 1. Aphidicolin-induced FS of human chromosome 10 and their frequency in three different individuals (I, II and III). The absolute numbers are given in Table I.

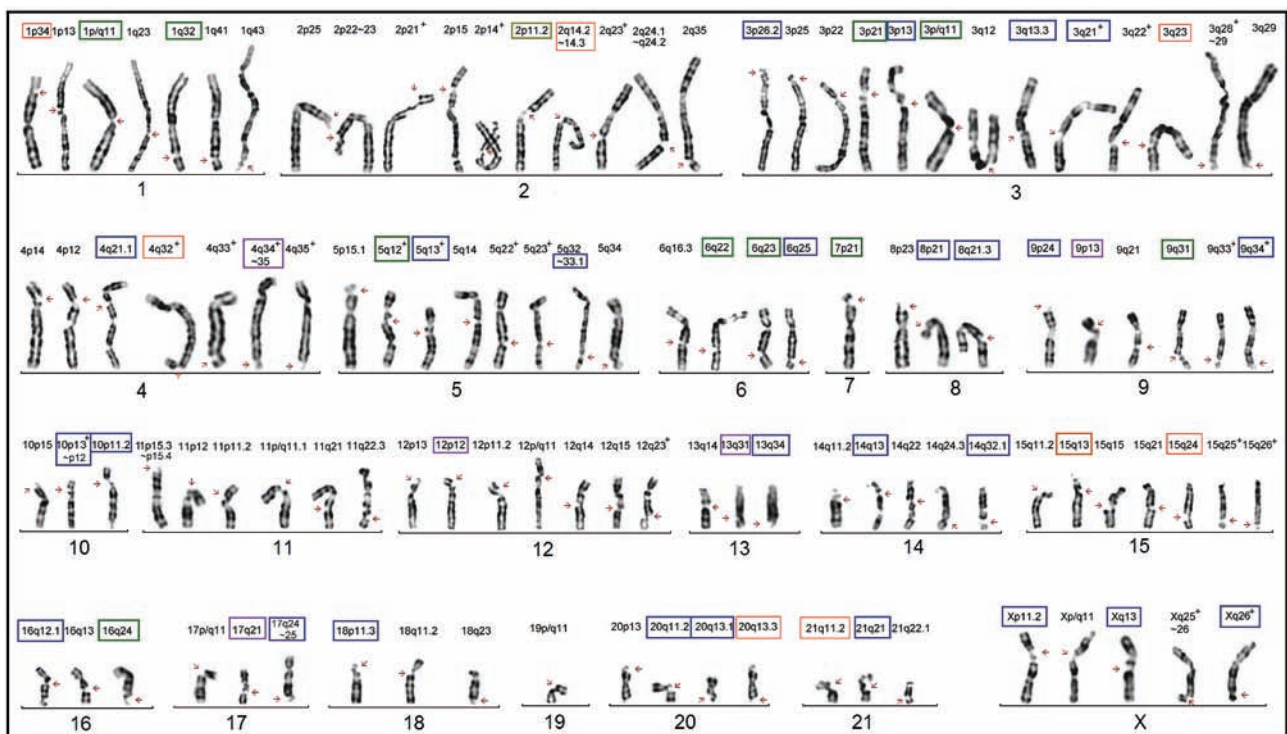


Figure 2. Cytogenetic detection of new aphidicolin-induced FS. Also shown are FS that were not included in the genome browser but described before. For each site the cytoband is given and an arrow indicates the FS. +, FS that might be larger and fused with a neighbor FS; green frame, taken from (37); blue frame, taken from (19); olive frame, taken from (34); brown frame, taken from (38); purple frame, taken from (29); red frame, single break events in the current study.

added to the existing 88 genome browser entries (Table I and Fig. 3).

Discussion

Frequency of FS. The common classification of FS is based on their induction with specific chemicals or frequencies in the population. The latter is divided into common and rare FS. Common FS are thought to be part of the normal chromosome structure and can be expressed in every individual (11). Nevertheless, they were also differentially expressed between different individuals, ethnic groups, sex and inducibility (12,19,20,23,24,25). According to the literature, the most frequently-detected FS are FRA3B (3p14.2) and FRA16D (16q23.2), which was confirmed in the current study. Even

within the three investigated individuals the frequencies for those two FS were almost the same. Contrary, it is known that not all common FS were inducible in every individual (26). This could also be shown in this study; although a huge number of metaphases were analyzed certain FS were exclusively observed only in one of the investigated test persons e.g. FRA17D (Table I). Additionally, most FS vary in their inter-individual frequency; examples are given in Fig. 1 and Table I. Only a few authors discuss the ethnic influence on FS expression (27). In this study proband III was Caucasian-Asian descent whereas probands I and II were of Caucasian origin. Inter-individual frequency variations in FS-expression were also observed in other mammals like the mouse (28) and also between different tissues (29,30). Although aphidicolin-induced FS were previously studied, for a closer

Table I. Summary of all known and newly described aphidicolin-induced FS analyzed in 25,000 metaphase spreads with the extended nomenclature, cytogenetic localization, absolute numbers in different band levels (300-350, 400-450, 550-650, >650 bands per haploid karyotype) for three different subjects (I, II and III) and the frequency of every FS after aphidicolin induction in the current study.

All FS	Cytogenetic localization	Number of FS per band level												Σ (all subjects and band levels)	Frequency in % (all subjects and band levels)
		300-350			400-500			550-650			>650				
		III	I	II	III	I	II	III	I	II	III	I	II		
FRA1A	1p36	10	2	2	25	17	7	21	15	6	2	2	1	110	0.488
FRA1^h	1p34	-	-	-	-	-	1	-	-	-	-	-	-	1	0.004
FRA1B	1p32	25	5	1	81	55	38	51	37	26	7	5	5	336	1.491
FRA1L	1p31	9	3	1	18	28	8	8	20	9	2	1	1	108	0.479
FRA1D	1p22	-	-	-	-	-	-	-	1	-	1	-	-	2	0.009
FRA1M ^d	1p21.3	55	7	13	178	118	75	73	116	83	10	12	11	751	3.333
FRA1E	1p21.2	-	-	-	5	2	1	2	3	1	1	-	-	15	0.067
FRA1N	1p13	2	-	-	8	1	-	1	-	1	-	-	-	13	0.058
FRA1O ^e	1p11/q11	4	3	4	20	23	9	8	15	9	-	1	3	99	0.439
FRA1J ^a	1q12	2	-	-	8	5	1	3	6	-	-	1	1	27	0.120
FRA1F	1q21	-	1	-	4	7	5	1	3	1	-	-	-	22	0.098
FRA1P	1q23	1	-	1	3	-	-	1	-	1	-	1	-	8	0.036
FRA1G	1q25.1	17	2	2	39	25	26	14	26	19	2	4	4	180	0.799
FRA1K	1q31	5	-	-	7	2	4	4	7	1	-	1	-	31	0.138
FRA1Q ^e	1q32	1	-	-	9	5	4	1	2	-	-	-	-	22	0.098
FRA1R	1q41	2	2	-	3	4	-	4	1	1	1	-	1	19	0.084
FRA1H ^a	1q42	1	1	-	6	3	1	9	5	1	1	1	-	29	0.129
FRA1S	1q43	-	-	-	1	1	-	1	-	-	-	-	-	3	0.013
FRA1I	1q44	16	10	2	84	97	52	39	115	74	2	9	18	518	2.299
FRA2M	2p25	-	-	2	7	4	1	2	6	3	-	-	1	26	0.115
FRA2C	2p24.2	19	7	4	65	99	25	24	50	27	8	7	6	341	1.513
FRA2N	2p22-23	1	-	-	7	5	2	3	4	2	-	-	-	24	0.107
FRA2O	2p21	-	1	-	1	1	-	1	3	1	1	-	-	9	0.040
FRA2D	2p16.2	38	11	6	158	93	27	53	80	39	4	6	9	524	2.325
FRA2P	2p15	-	-	-	4	-	-	2	-	2	3	-	-	11	0.049
FRA2Q	2p14	-	-	-	4	-	-	2	-	-	-	-	-	6	0.027
FRA2E	2p13	3	2	-	14	11	5	5	6	5	-	1	1	53	0.235
FRA2L ⁱ	2p11.2	-	-	-	3	-	4	1	-	4	-	-	1	13	0.058
FRA2R	2p11/2q11	3	2	2	11	6	2	6	5	2	-	-	1	40	0.178
FRA2A ^d	2q11.2	-	-	-	11	-	4	1	4	-	-	-	-	20	0.089
FRA2B ^d	2q13	-	-	-	4	3	3	1	1	3	-	-	-	15	0.067
FRA2^h	2q14.2-14.3	-	-	-	-	-	-	-	-	1	-	-	-	1	0.004
FRA2F	2q21.3	12	4	1	49	60	24	19	33	16	-	3	3	224	0.994
FRA2K ^d	2q22.3	15	5	2	33	22	11	13	17	20	2	-	1	141	0.626
FRA2S	2q23	4	-	1	8	4	3	2	1	-	-	-	-	23	0.102
FRA2T	2q24	1	-	-	1	4	-	-	4	1	-	-	1	12	0.053
FRA2G	2q31	8	1	2	16	8	4	11	11	2	1	1	4	69	0.306
FRA2H	2q32.1	69	29	17	223	182	74	73	139	49	10	9	6	880	3.905
FRA2I	2q33	27	11	6	75	104	27	28	73	25	5	1	6	388	1.722
FRA2U	2q35	-	1	1	5	7	-	3	3	2	-	-	1	23	0.102
FRA2J	2q37.3	9	2	5	39	22	9	24	18	9	3	4	4	148	0.657
FRA3E ^g	3p26	3	-	1	13	13	8	5	14	12	1	1	-	71	0.315

Table I. Continued.

All FS	Cytogenetic localization	Number of FS per band level												Σ (all subjects and band levels)	Frequency in % (all subjects and band levels)
		300-350			400-500			550-650			>650				
		III	I	II	III	I	II	III	I	II	III	I	II		
FRA3F	3p25	4	2	3	7	9	10	6	3	4	2	2	1	53	0.235
FRA3A	3p24.2	21	10	2	137	35	19	24	29	11	8	2	1	299	1.327
FRA3G	3p22	-	-	-	-	-	-	-	1	2	1	-	-	4	0.018
FRA3H ^e	3p21	2	1	-	-	10	5	2	9	3	-	-	2	34	0.151
FRA3B	3p14.2	202	71	53	682	751	256	289	544	233	36	24	48	3189	14.153
FRA3I ^g	3p13	2	1	-	11	7	4	4	5	3	1	-	1	39	0.173
FRA3J ^e	3p/q11	-	-	-	1	5	3	4	3	-	-	-	-	16	0.071
FRA3K	3q12	-	-	-	-	1	2	-	1	1	-	-	-	5	0.022
FRA3L ^g	3q13.3	6	1	4	13	28	12	14	24	6	1	2	2	113	0.501
FRA3M ^g	3q21	-	-	-	5	-	-	2	3	-	-	-	-	10	0.044
FRA3N	3q22	-	-	-	3	2	1	2	3	-	1	-	-	12	0.053
FRA3^h	3q23	-	-	-	-	-	-	1	-	-	-	-	-	1	0.004
FRA3D	3q25	3	3	2	43	15	10	12	22	9	2	1	1	123	0.546
FRA3O ^f	3q26	-	-	-	-	-	-	-	-	-	-	-	-	0	0.000
FRA3C	3q27	12	8	4	50	45	14	24	45	24	5	4	4	239	1.061
FRA3P	3q28-29	-	1	1	3	1	1	2	-	-	-	-	1	10	0.044
FRA3Q	3q29	-	-	-	2	-	1	-	1	-	-	-	-	4	0.018
FRA4A	4p16.1	8	1	4	35	32	8	8	20	12	3	3	4	138	0.612
FRA4D	4p15	1	2	-	8	5	-	3	2	2	-	1	1	25	0.111
FRA4G	4p14	-	-	-	-	-	2	1	-	1	-	-	-	4	0.018
FRA4H	4p12	1	-	-	1	2	-	-	2	-	-	-	-	6	0.027
FRA4B ^b	4q12	1	1	-	9	5	4	3	5	2	1	-	1	32	0.142
FRA4I ^g	4q21	4	1	2	23	4	17	10	4	13	-	1	2	81	0.359
FRA4F ⁱ	4q22	27	5	6	35	34	11	11	17	6	1	1	-	154	0.683
FRA4J ^e	4q23	-	-	-	-	-	-	-	-	-	-	-	-	0	0.000
FRA4E	4q27	14	4	3	25	14	8	6	6	4	-	2	-	86	0.382
FRA4C	4q31.1	34	25	6	95	135	41	19	92	28	2	8	5	490	2.175
FRA4^h	4q32	-	-	-	-	-	-	-	1	-	-	-	-	1	0.004
FRA4K	4q33	-	-	1	3	1	-	3	-	-	-	-	-	8	0.036
FRA4L ^f	4q34-35	-	-	-	1	1	-	-	3	-	-	-	-	5	0.022
FRA4M ^g	4q35	1	-	1	2	1	-	1	1	1	-	-	1	9	0.040
FRA5H	5p15	-	-	2	8	7	2	3	6	1	-	-	-	29	0.129
FRA5E	5p14	7	3	1	6	22	6	4	7	4	1	3	2	66	0.293
FRA5A	5p13	2	2	1	13	8	6	1	7	3	-	-	-	43	0.191
FRA5I	5p11/5q11	7	2	1	19	11	7	9	12	6	1	1	1	77	0.342
FRA5J ^e	5q12	-	-	-	3	1	1	2	-	1	-	-	1	9	0.040
FRA5K ^g	5q13	-	1	-	-	6	3	-	6	3	-	-	-	19	0.084
FRA5L	5q14	-	-	-	4	3	2	1	6	1	-	1	-	18	0.080
FRA5D	5q15	13	11	10	33	59	24	13	20	5	-	-	-	188	0.834
FRA5F	5q21	5	2	3	24	15	23	8	12	18	1	1	4	116	0.515
FRA5M	5q22	-	-	-	5	1	1	1	-	1	-	-	-	9	0.040
FRA5N	5q23	-	-	1	1	1	-	2	1	-	1	-	-	7	0.031
FRA5C	5q31.1	2	2	1	19	19	8	4	19	6	1	2	1	84	0.373
FRA5O ^g	5q33	-	-	-	-	-	1	-	1	1	-	-	1	4	0.018
FRA5P	5q34	-	-	-	4	1	1	4	1	-	-	-	-	11	0.049

Table I. Continued.

All FS	Cytogenetic localization	Number of FS per band level												Σ (all subjects and band levels)	Frequency in % (all subjects and band levels)
		300-350			400-500			550-650			>650				
		III	I	II	III	I	II	III	I	II	III	I	II		
FRA5G	5q35	1	1	-	6	6	3	1	4	3	-	2		27	0.120
FRA6B	6p25.1	7	5	5	30	41	32	12	36	42	3	2	7	222	0.985
FRA6A ^d	6p23	-	-	-	-	-	-	-	2	-	-	-	-	2	0.009
FRA6C	6p22.2	-	-	-	2	1	1	1	4	5	-	-	-	14	0.062
FRA6H ⁱ	6p21.1	1	-	-	1	4	3	1	7	5	-	-	-	22	0.098
FRA6I	6p11/q11	1	2	1	7	4	4	6	7	2	1	1	1	37	0.164
FRA6D ^b	6q13	2	1	-	-	1	-	1	2	-	-	-	-	7	0.031
FRA6G	6q15	3	-	2	5	3	2	2	3	4	-	-	2	26	0.115
FRA6J	6q16.3	3	-	-	9	2	-	3	-	2	-	-	-	19	0.084
FRA6F	6q21	15	7	2	30	27	11	7	22	7	8	-	1	137	0.608
FRA6K ^e	6q22	1	2	-	8	8	7	4	8	10	2	-	2	52	0.231
FRA6L ^e	6q23	1	1	2	10	8	2	4	1	1	-	-	1	31	0.138
FRA6M ^g	6q25	1	1	2	6	4	4	2	4	1	-	2	1	28	0.124
FRA6E	6q26	50	21	5	155	153	19	56	128	25	10	4	10	636	2.823
FRA7B	7p22	3	2	1	41	21	8	16	30	37	3	3	15	180	0.799
FRA7L ^e	7p21	2	-	-	3	1	1	-	-	-	-			7	0.031
FRA7C	7p14.2	7	3	2	26	33	13	10	21	4	1	1	1	122	0.541
FRA7D	7p13	2	2	-	35	23	10	15	27	6	-	3	1	124	0.550
FRA7A ^d	7p11.2	1	-	-	3	1	-	4	-	2	-	2	-	13	0.058
FRA7J	7q11.23	19	8	2	41	49	22	10	26	6	1	-	3	187	0.830
FRA7E	7q21.2	6	1	2	45	11	8	23	7	7	1	2	-	113	0.501
FRA7F	7q22	1	-	1	7	5	4	4	1	1	-	-	-	24	0.107
FRA7K ⁱ	7q22-31.1	36	21	13	111	160	81	42	100	49	7	9	6	635	2.818
FRA7G	7q31.2	2	-	1	4	4	-	4	3	5	-	1	1	25	0.111
FRA7H	7q32.3	20	11	5	104	91	73	33	104	67	7	8	12	535	2.374
FRA7M	7q34	7	2	2	26	7	17	21	11	14	2	-	1	110	0.488
FRA7I	7q36	1	-	-	6	5	2	1	3	1	-	-	-	19	0.084
FRA8G	8p23	1	-	-	4	3	-	2	4	1	-	-	-	15	0.067
FRA8H ^g	8p21	-	-	1	3	1	2	1	1	-	-	-	-	9	0.040
FRA8I	8p11/q11	-	1	-	8	5	9	4	7	3	-	-	4	41	0.182
FRA8F	8q13	-	-	-	-	-	-	-	1	-	-	-	-	1	0.004
FRA8J ^g	8q21.3	-	-	-	3	-	-	2	2	-	-	-	-	7	0.031
FRA8B	8q22.1	20	1	1	52	27	30	23	34	14	-	-	6	208	0.923
FRA8A ^d	8q22.3	-	-	-	2	-	1	-	1	-	-	-	-	4	0.018
FRA8C	8q24.1	9	3	3	28	30	20	23	27	23	4	2	8	180	0.799
FRA8D	8q24.3	3	-	-	10	2	4	3	8	8	2	1	-	41	0.182
FRA9H ^g	9p24	-	-	-	-	2	1	2	2	-	-	-	-	7	0.031
FRA9G ⁱ	9p22	1	-	-	4	-	1	2	-	1	-	-	-	9	0.040
FRA9A ^d	9p21	-	1	-	4	7	3	2	5	-	1	-	-	23	0.102
FRA9I ^f	9p13	-	-	-	-	-	1	1	-	1	-	-	-	3	0.013
FRA9F ^a	9q12	6	-	2	13	22	11	14	18	9	4	2	1	102	0.453
FRA9J ^e	9q13	-	-	-	-	-	-	-	-	-	-	-	-	0	0,000
FRA9K	9q21	1	1	-	2	4	3	1	2	3	-	-	-	17	0.075
FRA9D	9q22.1	4	1	1	11	15	4	3	12	1	-	-	-	52	0.231
FRA9L ^e	9q31	2	-	-	1	-	1	2	1	1	-	-	-	8	0.036

Table I. Continued.

All FS	Cytogenetic localization	Number of FS per band level												Σ (all subjects and band levels)	Frequency in % (all subjects and band levels)
		300-350			400-500			550-650			>650				
		III	I	II	III	I	II	III	I	II	III	I	II		
FRA9B	9q32	22	5	3	93	65	24	44	49	28	5	-	3	341	1.513
FRA9M	9q33	1	-	-	2	-	2	-	2	2	-	-	-	9	0.040
FRA9N ^g	9q34	-	1	1	2	5	4	3	2	4	-	1	-	23	0.102
FRA10H	10p15	2	1	1	4	4	4	1	1	3	-	-	1	22	0.098
FRA10I ^g	10p12-13	2	1	1	14	1	3	2	2	-	1	-	-	27	0.120
FRA10J ^g	10p11.2	2	-	-	10	2	1	3	4	2	-	-	-	24	0.107
FRA10G	10q11.2	-	1	-	9	9	1	4	6	2	-	-	-	32	0.142
FRA10C ^b	10q21	-	-	-	7	4	2	1	5	-	-	-	1	20	0.089
FRA10D	10q22.1	7	3	1	23	16	5	5	6	3	-	-	-	69	0.306
FRA10A ^a	10q23.3	1	-	2	7	3	2	8	2	2	-	-	1	28	0.124
FRA10K ^d	10q24.2	2	-	-	7	5	-	5	3	-	-	-	-	22	0.098
FRA10E	10q25.2	-	-	1	10	7	8	6	7	2	-	-	2	43	0.191
FRA10F	10q26.1	5	1	1	32	11	4	20	10	3	2	1	2	92	0.408
FRA11J	11p15.3-p15.4	1	-	-	1	3	-	1	1	1	-	-	-	8	0.036
FRA11C	11p15.1	6	5	-	23	25	13	10	22	3	2	1	5	115	0.510
FRA11D	11p14.2	17	5	1	53	40	13	22	34	14	4	1	5	209	0.928
FRA11E	11p13	6	3	4	28	32	7	17	29	8	-	3	3	140	0.621
FRA11K	11p12	-	-	-	2	-	-	-	-	-	-	-	-	2	0.009
FRA11L	11p11.2	-	-	-	2	1	1	-	1	1	-	-	-	6	0.027
FRA11M	11p11/q11	1	-	1	8	7	2	7	3	2	2	-	2	35	0.155
FRA11H	11q13.3	-	1	1	2	7	-	2	2	2	-	-	-	17	0.075
FRA11F	11q14.2	24	12	9	122	64	30	38	55	31	7	6	1	399	1.771
FRA11N	11q21	-	-	-	1	5	1	1	8	-	-	1	-	17	0.075
FRA11O	11q22	1	-	-	3	-	1	2	2	-	-	-	-	9	0.040
FRA11G	11q23.3	1	1	1	4	5	-	4	2	2	1	1	-	22	0.098
FRA12F	12p13	1	-	-	1	2	-	1	-	1	-	-	-	6	0.027
FRA12G ^f	12p12	-	-	-	2	4	-	2	-	1	1	-	-	10	0.044
FRA12H	12p11.2	1	1	-	-	1	2	-	-	-	-	-	-	5	0.022
FRA12I	12p11/q11	1	-	-	2	6	-	1	4	-	-	-	2	16	0.071
FRA12A	12q13.1	1	-	-	1	4	3	1	2	4	1	-	-	17	0.075
FRA12J	12q14	-	-	-	-	-	-	-	1	2	-	-	1	4	0.018
FRA12K	12q15	-	1	-	2	-	-	-	3	-	2	1	-	9	0.040
FRA12B	12q21.3	7	-	1	26	8	6	13	10	6	2	1	2	82	0.364
FRA12L	12q23.1	3	-	-	7	-	2	3	6	5	-	-	-	26	0.115
FRA12E	12q24	4	1	3	12	14	11	6	6	6	1	-	1	65	0.288
FRA13A	13q13.2	15	7	2	63	45	23	28	32	19	2	1	2	239	1.061
FRA13G	13q14	1	-	1	3	1	-	1	1	-	-	-	-	8	0.036
FRA13C	13q21.2	1	-	-	6	2	6	4	5	2	-	-	2	28	0.124
FRA13E ⁱ	13q22	-	1	-	4	4	2	2	6	2	-	-	-	21	0.093
FRA13H ^f	13q31	-	-	-	-	-	2	-	-	1	-	-	-	3	0.013
FRA13D	13q32	1	-	2	6	10	3	4	7	3	-	1	3	40	0.178
FRA13I ^g	13q34	3	-	1	10	4	3	9	6	7	1	1	1	46	0.204
FRA14D	14q11.2	-	-	-	-	1	-	-	1	1	-	-	-	3	0.013
FRA14E ^g	14q13	1	-	-	9	6	4	5	8	4	1	-	1	39	0.173
FRA14A	14q21.2	3	-	1	9	4	3	3	4	3	-	-	1	31	0.138

Table I. Continued.

All FS	Cytogenetic localization	Number of FS per band level												Σ (all subjects and band levels)	Frequency in % (all subjects and band levels)
		300-350			400-500			550-650			>650				
		III	I	II	III	I	II	III	I	II	III	I	II		
FRA14F	14q22	-	-	-	7	3	3	-	1	3	1	-	1	19	0.084
FRA14B	14q23	6	5	4	39	54	45	23	87	35	4	7	13	322	1.429
FRA14C	14q24.1	4	3	3	12	20	18	8	9	8	1	-	-	86	0.382
FRA14G	14q24.3	-	-	-	1	-	-	-	1	-	-	-	-	2	0.009
FRA14H ^g	14q32	-	1	-	4	-	3	-	1	-	-	-	-	9	0.040
FRA15C	15q11.2	-	-	-	1	-	1	-	-	1	-	-	-	3	0.013
FRA15B ⁱ	15q13	1	1	-	6	2	-	-	1	-	-	-	1	12	0.053
FRA15D	15q15	2	-	-	4	9	2	-	2	1	-	-	-	20	0.089
FRA15E	15q21	-	-	-	-	1	2	-	1	1	-	-	-	5	0.022
FRA15A	15q22	-	1	-	5	2	5	1	-	1	1	-	2	18	0.080
FRA15^h	15q24	-	-	-	-	-	1	-	-	-	-	-	-	1	0.004
FRA15F	15q25	-	-	-	2	-	-	1	1	1	-	-	-	5	0.022
FRA15G	15q26	-	-	-	-	1	-	-	1	1	-	-	-	3	0.013
FRA16A ^d	16p13.11	-	-	-	-	2	1	1	4	1	-	1	2	12	0.053
FRA16E ^c	16p12.1	1	-	-	-	1	1	-	1	-	-	1	1	6	0.027
FRA16F	16p11/16q11	-	-	-	3	4	3	2	1	1	-	-	1	15	0.067
FRA16G ^g	16q12	-	-	-	-	1	1	-	2	-	-	1	-	5	0.022
FRA16H	16q13	-	-	-	2	-	-	-	-	-	-	-	-	2	0.099
FRA16I ^e	16q21	-	-	-	1	-	-	-	1	-	-	-	-	2	0.099
FRA16C	16q22.1	4	5	-	14	18	17	9	23	15	1	3	1	110	0.488
FRA16D	16q23.2	78	36	18	283	443	110	133	381	146	17	26	36	1707	7.576
FRA16J ^e	16q24	-	-	-	3	3	-	-	1	2	-	2	1	12	0.053
FRA17A ^c	17p12	-	-	-	2	-	4	2	2	1	-	-	-	11	0.049
FRA17C	17p11/17q11	-	-	-	1	2	-	1	4	-	-	-	-	8	0.036
FRA17D ^f	17q21	-	-	-	1	-	-	-	-	-	-	-	-	1	0.004
FRA17B	17q23.1	-	-	-	4	4	1	2	2	1	1	1	-	16	0.071
FRA17E ^g	17q24-25	3	-	-	10	12	4	5	9	8	1	2	-	54	0.240
FRA18D ^g	18p11.3	-	-	-	3	3	1	-	5	1	-	-	1	14	0.062
FRA18E	18q11.2	-	-	-	1	1	1	1	2	-	-	1	1	8	0.036
FRA18A	18q12.2	2	1	5	29	18	3	18	23	8	-	-	-	107	0.475
FRA18B	18q21.3	3	2	1	7	7	6	3	8	4	-	-	-	41	0.182
FRA18C ⁱ	18q22	1	-	1	2	2	1	3	1	4	-	-	-	15	0.067
FRA18F	18q23	2	-	-	1	2	2	1	2	-	-	-	1	11	0.049
FRA19B ^d	19p13.1	-	-	-	1	3	-	2	-	2	-	-	-	8	0.036
FRA19C	19p11/q11	-	-	-	-	-	1	-	1	-	-	-	1	3	0.013
FRA19A ^a	19q13	-	-	-	3	3	1	2	2	-	-	-	1	12	0.053
FRA20C	20p13	-	-	-	2	7	4	-	9	1	-	-	1	24	0.107
FRA20B	20p12.2	1	-	-	7	10	8	4	13	10	-	-	2	55	0.244
FRA20A ^d	20p11.23	-	-	-	-	4	1	-	-	1	-	-	-	6	0.027
FRA20D ^g	20q11.2	-	-	-	1	2	-	1	1	-	-	-	-	5	0.022
FRA20E ^g	20q13.1	1	-	-	3	4	2	3	5	1	3	-	1	23	0.102
FRA20^h	20q13.3	-	-	-	-	-	-	-	1	-	-	-	-	1	0.004
FRA21^h	21q11.2	-	-	-	-	1	-	-	-	-	-	-	-	1	0.004
FRA21A ^g	21q21	-	-	-	1	1	-	1	2	-	-	-	-	5	0.022
FRA21B	21q22.1	1	-	-	3	1	1	-	1	3	-	1	-	11	0.049

Table I. Continued.

All FS	Cytogenetic localization	Number of FS per band level												Σ (all subjects and band levels)	Frequency in % (all subjects and band levels)
		300-350			400-500			550-650			>650				
		III	I	II	III	I	II	III	I	II	III	I	II		
FRA22B	22q12.2	2	-	2	12	10	4	5	13	11	-	-	3	62	0.275
FRA22A ^d	22q13.2	3	-	-	17	10	4	5	28	5	1	-	1	74	0.328
FRAXB	Xp22.31	70	24	30	261	267	130	93	201	116	13	13	20	1238	5.494
FRAXG ^g	Xp11.2	-	-	-	1	-	-	-	1	-	-	-	-	2	0.009
FRAXH	Xp11/q11	-	1	-	7	5	-	4	9	2	1	2	-	31	0.138
FRAXI ^g	Xq13	-	-	2	11	6	2	2	8	4	1	-	1	37	0.164
FRAXC	Xq22.1	31	13	8	109	90	40	40	83	44	6	3	11	478	2.121
FRAXJ	Xq25	1	-	-	3	1	-	1	2	1	1	-	-	10	0.044
FRAXK ^g	Xq26	-	-	-	-	1	1	-	-	-	-	-	-	2	0.009
FRAXD	Xq27.2	2	1	1	7	17	2	2	14	-	1	-	-	47	0.209
FRAXE	Xq28	-	-	-	-	1	-	-	1	-	-	1	1	4	0.018
Σ (all FS)		1344	516	358	4978	4625	2032	2059	3806	1871	282	260	406	22537	0.276

Entries in bold are all new identified FS of the current study with new nomenclature. ^a5-azacytidin type, ^bBrdU type, ^cdistamycin A type, ^dfolic acid type, ^e(37) with new nomenclature, ^f(23) with new nomenclature, ^g(19) with new nomenclature, ^hnew identified FS but only one time recorded and not included in the nomenclature, ⁱFS that were already assigned to the nomenclature by other authors but not included in genome browsers.

Table II. Number of FS and average distance in Mb between FS for single chromosomes.

Chromosome	1	2	3	4	5	6	7	8	9	10	11	12
Number of FS	17	21	17	13	15	13	13	9	12	10	12	10
Interval in Mb	14.53	11.52	11.76	14.69	12.07	13.15	12.23	16.22	11.67	13.35	11.17	13.20
Chromosome	13	14	15	16	17	18	19	20	21	22	X	Y
Number of FS	8	8	7	9	5	6	3	5	2	2	9	1
Interval in Mb	14.25	13.25	14.29	9.89	15.80	12.67	21.33	12.40	23.50	25.00	17.22	29.00

look on inter-individual and/or ethnic influences on FS frequency variation, larger population studies on comparable conditions would be needed.

New FS. The current study identified 61 until now not reported FS and 7 unique break events that were not reported before. The frequency of these new sites varies between 0.009% (FRA14G) and 0.231% (FRA3E). Other, well-established aphidicolin-induced sites range from 0.067% (FRA1E) to 14.153% (FRA3B), indicating that the newly described sites have a low expression rate and therefore were not detected or reported previously. Although some authors stress the necessity for fragility to be defined as a statistical phenomenon (e.g. 12,31), the main part of fragile sites is expressed in low frequencies, sometimes limited to single

individuals and depends on several other factors such as aphidicolin concentration, gender or ethnic origin. Furthermore, complicating is the definition of a fragile site since several authors use different definitions or count also single breaks as fragile sites (11,30,32). Therefore, we decided to use a more practical definition where all sites are included that were observed more than once in this study or were already published elsewhere to minimize false positive random background breaks.

Only little is known about the influence of local chromatin structure for FS expression. Obviously FS are overrepresented in GTG light bands. This holds also true for the new identified FS, 59% of which appears in GTG-light bands. Recently, an unusual chromatin structure or failure of chromatin condensation was postulated as inductors of FS (33).

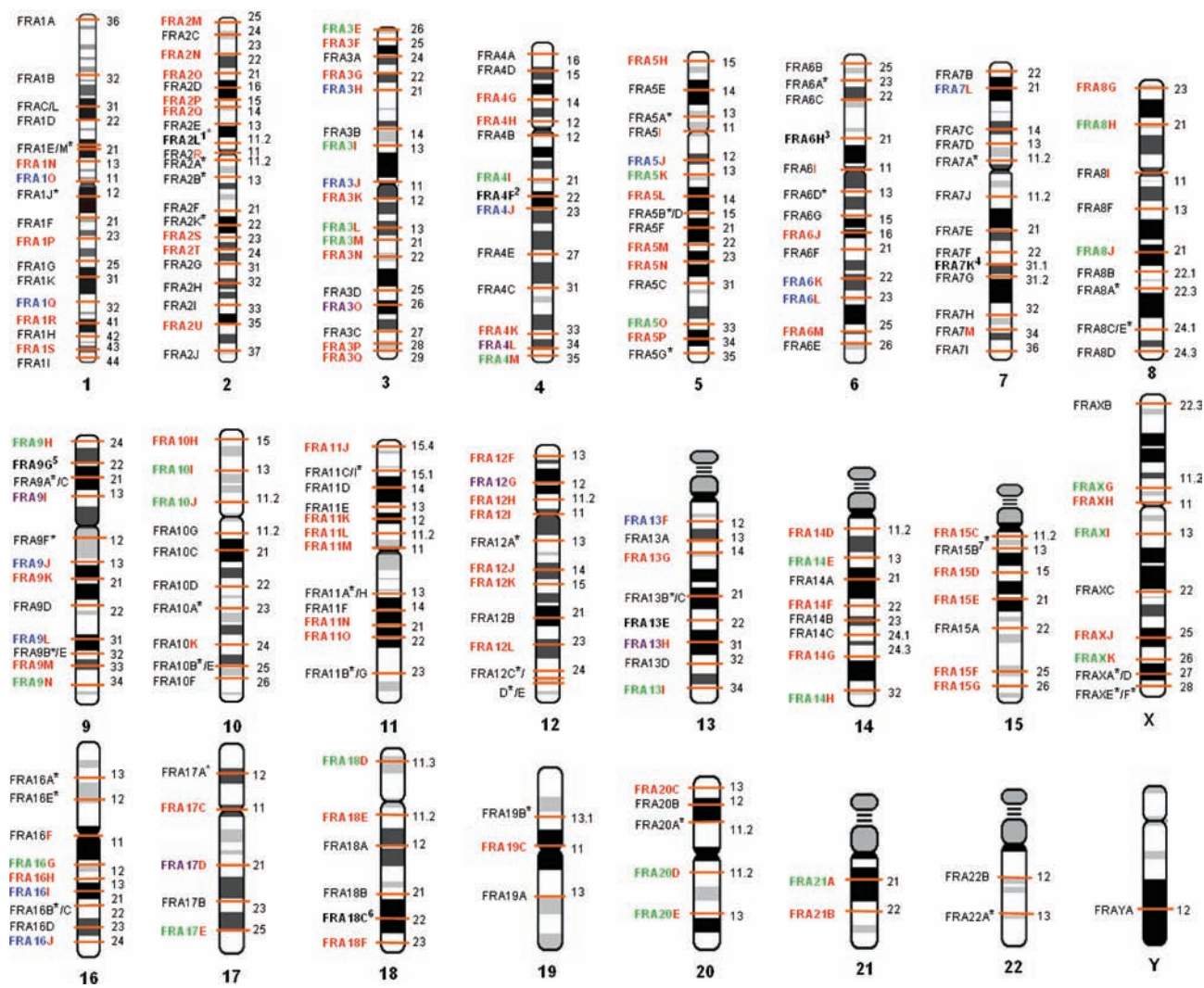


Figure 3. Overview of all known and newly described FS (orange line in ideograms). Left to the ideograms is shown the FS nomenclature, to the right the cytoband. Bold text FS are not listed in NCBI 36.3 genome browser; black, are NCBI 36.3 listed FS; red, are newly described FS in the current study; blue, taken from (37); green, taken from (19); light blue, taken from (23); *FS not reported as aphidicolin type before; 1: (34), 2: (13), 3: (15), 4: (14), 5: (16), 6: (17), 7: (38).

Table III. Comparison of FS, not reported as aphidicolin inducible before, with literature data.^a

FS	Cytogenetic localization	Frequency in the current study (%) n=25,000	Frequency in (%)			
			Manjunatha <i>et al</i> , 2002 (39) n=100	Takahashi <i>et al</i> , 1988 (40) n=?	Rao <i>et al</i> , 1988 (32) n=800	Tastemir <i>et al</i> , 2006 (41) n=1,443
FRA1Q	1q32	0.098	-	-	-	1.68
FRA2A	2q11.2	0.089	1.0	-	-	-
FRA5J	5q12	0.040	-	-	0.4	-
FRA10C	10q21	0.089	-	-	-	1.01
FRA17A	17p12	0.049	-	0.1	-	-
FRAXK	Xq26	0.009	-	-	-	0.33

^a(39): 5-fluorodeoxyuridin (FUDR); (40): distamycin A; (32): FUDR; (41): folate absence; n = number of studied metaphases.

Nomenclature. The common nomenclature system for FS includes the abbreviation FRA followed by chromosome number and a letter starting with A arranged in a linear order from pter to qter. Chromosome and chromatide breaks in this study were counted as new FS and included in the nomenclature when they were observed more than one time. Seven unique breaks were also recorded (Fig. 2 and Table I), but not included in the nomenclature (Fig. 3 and Table I).

The current study identified 230 compared to only 129 rare and common FS, which are listed in the NCBI genome browser. Even more complicating is the fact that 15 of these sites map at the same cytogenetic region but have different names because of different ways of induction (NCBI genome browser, Fig. 3). Additionally, 52 identified and in parts mapped FS were already published, but not included in the current genome browser versions (13,14,15,16,17,19,23,34). Most of these sites were confirmed in this study which underlines their eligibility to be appreciated as FS.

FS classification. FS are commonly classified in rare FS that can be induced by folate absence, distamycin A, 5-fluorodeoxyuridin or BrdU, and in common FS inducible by aphidicolin, BrdU or 5-azacytidine. In the current study exclusively aphidicolin induction was used, and surprisingly nearly every type of rare and common FS could be recorded. Overall, this makes the classification in rare and common FS at least questionable. The main reason to explain this surprising finding might be a relative small amount of FS studied in near-comparable studies. Differences to literature data were also observed in the frequency of single sites when the induction was done in a different way (Table III).

Based on frequency differences within expression rates of so-called common FS from 14.153% (FRA3B, this study) to 0.004% (e.g. FRA17D, this study) some authors (12,24,28) suggested a classification in high (HFFS) and low frequency FS (LFFS). This classification seems to be more reliable than the historical division in common and rare FS. Also a classification based on the chemical induction of FS seems questionable; particularly as in this study every type of FS could be induced by aphidicolin.

Conclusion. Location of FS seems to be independent of the chemical agents used. Thus, a classification in different induction types is no longer warranted. According to Hecht *et al* (4) and others we prefer a classification of high and low frequency FS. In order to prevent double naming of FS in the same cytogenetic location, caused historically by different modes of induction, an expanded definition of FS into fragile regions is helpful as it becomes more and more clear from molecular mapping data that especially aphidicolin inducible FS do not break at defined sequences but in breakage-prone regions up to 10 Mb (35,36) where the break is most likely to appear.

Acknowledgments

Supported by the Evangelische Studienwerk e.V. Villigst and in parts by DFG (WE3617/2-1, LI820/11-1, 436 RUS 17/135/03, 436 RUS 17/109/04, 436 RUS 17/22/06), Boehringer Ingelheim Fonds, IZKF Jena (Start-up S16), IZKF MD-

Fellowships, Prochance 2008, Stefan Morsch Stiftung and Stiftung Leukämie. We thank T. Lehmann (Jena University Hospital, Institute of Medical Statistics, Informatics and Documentation) for helpful discussion.

References

1. Dekaban A: Persisting clone of cells with an abnormal chromosome in a woman previously irradiated. *J Nucl Med* 10: 740-746, 1965.
2. Magenis RE, Hecht F and Lovrien EW: Heritable fragile site on chromosome 16: probable localization of haptoglobin locus in man. *Science* 170: 85-87, 1970.
3. Berger R, Bloomfield CD and Sutherland GR: Report of the committee on chromosome rearrangements in neoplasia and on fragile sites (Human Gene Mapping 8, Helsinki Conference). *Cytogenet Cell Genet* 40: 490-535, 1985.
4. Hecht F: Rare, polymorphic, and common fragile sites: a classification. *Hum Genet* 74: 207-208, 1986.
5. Durkin SG and Glover TW: Chromosome fragile sites. *Annu Rev Genet* 41: 169-192, 2007.
6. Sutherland GR: Fragile sites on human chromosomes: demonstration of their dependence on the type of tissue culture medium. *Science* 197: 265-266, 1977.
7. Lukusa T and Fryns JP: Human chromosome fragility. *Biochim Biophys Acta* 1779: 3-16, 2008.
8. Mitelman F: Recurrent chromosome aberrations in cancer. *Mutat Res* 462: 247-253, 2000.
9. Güntis G, Sunguroglu A, Tükün A, Sayin DB and Bökesoy I: Common fragile sites associated with the breakpoints of chromosomal aberrations in hematologic neoplasms. *Cancer Genet Cytogenet* 133: 168-171, 2002.
10. Schoder C, Liehr T, Velleuer E, Wilhelm K, Blaurock N, Weise A and Mrasek K: New aspects on chromosomal instability: Chromosomal break-points in Fanconi anemia patients co-localize on the molecular level with fragile sites. *Int J Oncol* 36: 307-312, 2010.
11. Craig-Holmes AP, Strong LC, Goodacre A and Pathak S: Variation in the expression of aphidicolin-induced fragile sites in human lymphocyte cultures. *Hum Genet* 76: 134-137, 1987.
12. Denison SR, Simper RK and Greenbaum IF: How common are common fragile sites in humans: interindividual variation in the distribution of aphidicolin-induced fragile sites. *Cytogenet Genome Res* 101: 8-16, 2003.
13. Rozier L, El-Achkar E, Apiou F and Debatisse M: Characterization of a conserved aphidicolin-sensitive common fragile site at human 4q22 and mouse 6C1: possible association with an inherited disease and cancer. *Oncogene* 23: 6872-6880, 2004.
14. Helmrich A, Stout-Weider K, Matthaai A, Hermann K, Heiden T and Schrock E: Identification of the human/mouse syntenic common fragile site FRA7K/Fra12C1-relation of FRA7K and other human common fragile sites on chromosome 7 to evolutionary breakpoints. *Int J Cancer* 120: 48-54, 2007.
15. Fechter A, Buettel I, Kuehnelt E, Schwab M and Savelyeva L: Cloning of genetically tagged chromosome break sequences reveals new fragile sites at 6p21 and 13q22. *Int J Cancer* 120: 2359-2367, 2007.
16. Sawinska M, Schmitt JG, Sagulenko E, Westermann F, Schwab M and Savelyeva L: Novel aphidicolin-inducible common fragile site FRA9G maps to 9p22.2, within the C9orf39 gene. *Genes Chromosomes Cancer* 46: 991-999, 2007.
17. Debacker K, Winnepeninckx B, Ben-Porat N, Fitz Patrick D, Van Lwijk R, Scheers S, Kerem B and Frank Kooy R: FRA18C: a new aphidicolin-inducible fragile site on chromosome 18q22, possibly associated with in vivo chromosome breakage. *J Med Genet* 44: 347-352, 2007.
18. Wyandt HE and Tonk VS: Atlas of Human Chromosome Heteromorphisms. Kluwer Academic Publishers, Dordrecht, 2004.
19. Simonic I and Gericke GS: The enigma of common fragile sites. *Hum Genet* 97: 524-531, 1996.
20. Glover TW, Berger C, Coyle J and Echo B: DNA polymerase alpha inhibition by aphidicolin induces gaps and breaks at common fragile sites in human chromosomes. *Hum Genet* 67: 136-142, 1984.
21. Verma RS and Babu A: Human chromosomes - manual of basic techniques. Pergamon Press, New York, Oxford, 1989.

22. Shaffer LG, Slovak ML, Campbell LJ (eds): ISCN: An International System for Human Cytogenetic Nomenclature. S. Karger, Basel, 2009.
23. Kuwano A, Sugio Y, Murano I and Kajii T: Common fragile sites induced by folate deprivation, BrdU and aphidicolin: their frequency and distribution in Japanese individuals. *Jinrui Idengaku Zasshi* 33: 355-364, 1988.
24. Hecht F, Tajara EH, Lockwood D, Sandberg AA and Hecht BK: New common fragile sites. *Cancer Genet Cytogenet* 33: 1-9, 1988.
25. Tedeschi B, Vernole P, Sanna ML and Nicoletti B: Population cytogenetics of aphidicolin-induced fragile sites. *Hum Genet* 89: 543-547, 1992.
26. Sutherland GR, Baker E and Richards RI: Fragile sites still breaking. *Trends Genet* 14: 501-506, 1998.
27. Takahashi E, Hori T and Murata M: Population cytogenetics of rare fragile sites in Japan. *Hum Genet* 78: 121-126, 1988.
28. McAllister BF and Greenbaum IF: How common are common fragile sites: variation of aphidicolin-induced chromosomal fragile sites in a population of the deer mouse (*Peromyscus maniculatus*). *Hum Genet* 100: 182-188, 1997.
29. Kuwano A, Murano I and Kajii T: Cell type-dependent difference in the distribution and frequency of excess thymidine-induced common fragile sites: T lymphocytes and skin fibroblasts. *Hum Genet* 84: 527-531, 1990.
30. Murano I, Kuwano A and Kajii T: Fibroblast-specific common fragile sites induced by aphidicolin. *Hum Genet* 83: 45-48, 1989.
31. Greenbaum IF, Fulton JK, White ED and Dahm PF: Minimum sample sizes for identifying chromosomal fragile sites from individuals: Monte Carlo estimation. *Hum Genet* 101: 109-112, 1997.
32. Rao PN, Heerema NA and Palmer CG: Fragile sites induced by FUDR, caffeine, and aphidicolin. Their frequency, distribution, and analysis. *Hum Genet* 78: 21-26, 1988.
33. Wang YH: Chromatin structure of human chromosomal fragile sites. *Cancer Lett* 232: 70-78, 2006.
34. Schuffenhauer S, Lederer G and Murken J: A heritable folate-sensitive fragile site on chromosome 2p 11.2 (FRA2L). *Chromosome Res* 4: 252-254, 1996.
35. Curatolo A, Limongi ZM, Pelliccia F and Rocchi A: Molecular characterization of the human common fragile site FRA1H. *Genes Chromosomes Cancer* 46: 487-493, 2007.
36. Zhu Y, McAvoy S, Kuhn R and Smith DI: RORA, a large common fragile site gene, is involved in cellular stress response. *Oncogene* 25: 2901-2908, 2006.
37. Borgaonkar DS: Chromosomal Variation in Man. 7th edition, Wiley-Liss, NY, 1994.
38. Karadeniz NN, Tunca Y and Imirzalioglu N: New heritable fragile site at 15q13 in both members of a nonconsanguineous couple. *Am J Med Genet* 118: 290-292, 2003.
39. Manjunatha KR, Chetan GK, Arathi R, Bhaskara Rao GV, Latha P, Padma S, Venkatesh HN, Srinath S, Girimaji SR and Sheshadri S: Frequency, association and Genetic implications of chromosomal fragile sites in mental retardation. *IJHG* 2: 33-39, 2002.
40. Takahashi E, Kaneko Y, Ishihara T, Minamihisamatsu M, Murata M and Hori T: A new rare distamycin A-inducible fragile site, fra(11) (p15.1), found in two acute nonlymphocytic leukemia (ANLL) patients with t(7;11)(p15-p13;p15). *Hum Genet* 80: 124-126, 1988.
41. Tastemir D, Demirhan O and Sertdemir Y: Chromosomal fragile site expression in Turkish psychiatric patients. *Psychiatry Res* 144: 197-203, 2006.