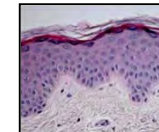
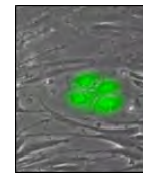
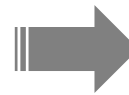
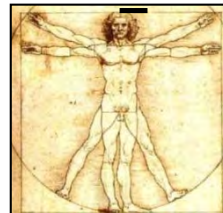


DE LA RECHERCHE À L'INDUSTRIE

cea

## Laboratory of Genomics and Radiobiology of Keratinopoiesis

Human skin integrity, low-dose radiation, stem cells



*Nicolas O FORTUNEL, PhD – CEA Scientist*

*Michèle T MARTIN, PhD – Direction of LGRK*

**CEA – Evry, France**

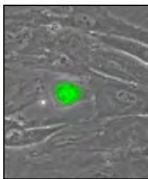
*Institut of Cellular and Molecular Radiobiology - INSERM/UMR967*

## Biological material

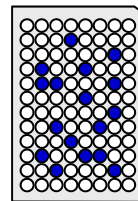
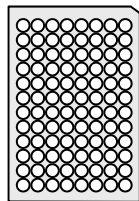
- Normal primary skin cells (keratinocytes, fibroblasts, stem/progenitor cell-enriched).
- Skin cells from patients: radiosensitive genetic diseases ; adverse reactions after radiotherapy cohort

## Cell level assays

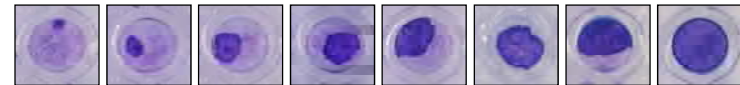
### Single-cell sorting



### Clonal cultures



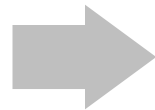
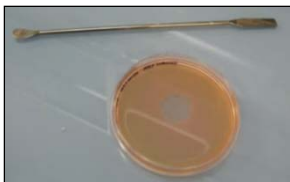
### Individual cell identity and responses



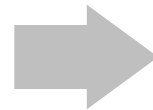
6.4 mm

## Tissue regeneration assays

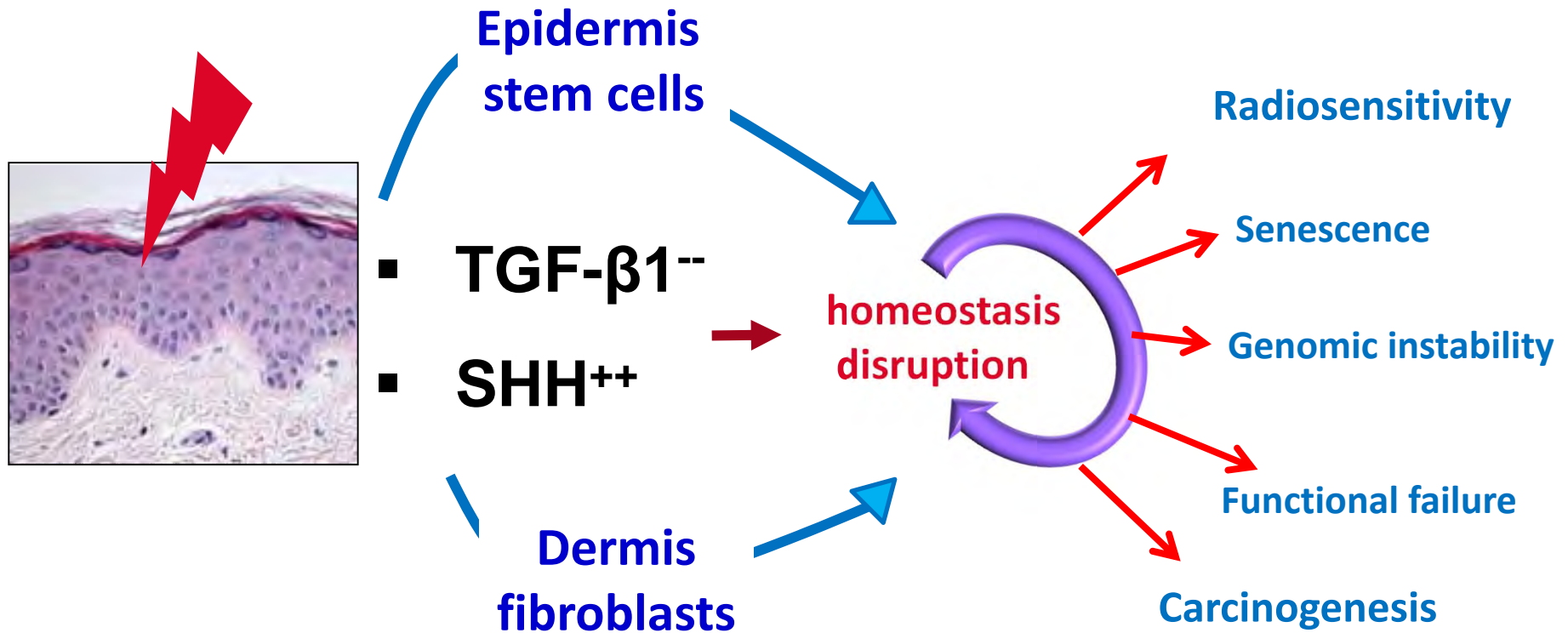
### Graft bioengineering



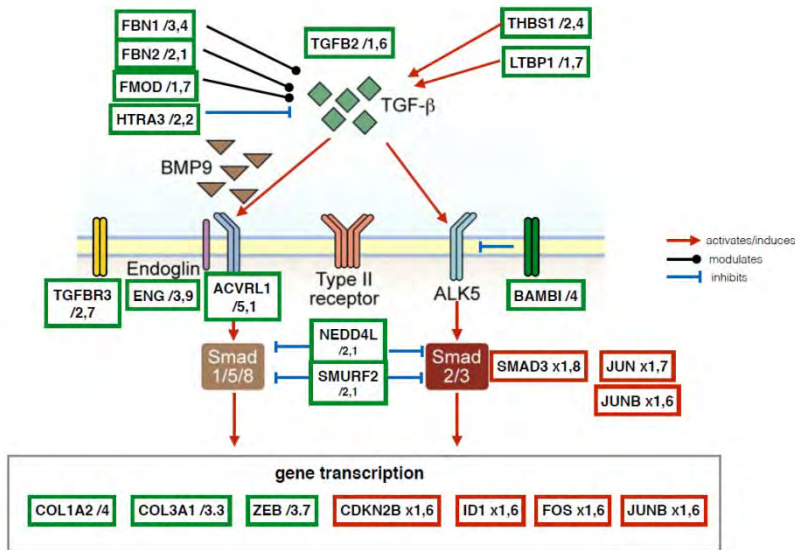
### Xenografting in nude mice



# MOLECULAR CONTROLS OF RADIOSENSITIVITY ?



## Signaling pathways



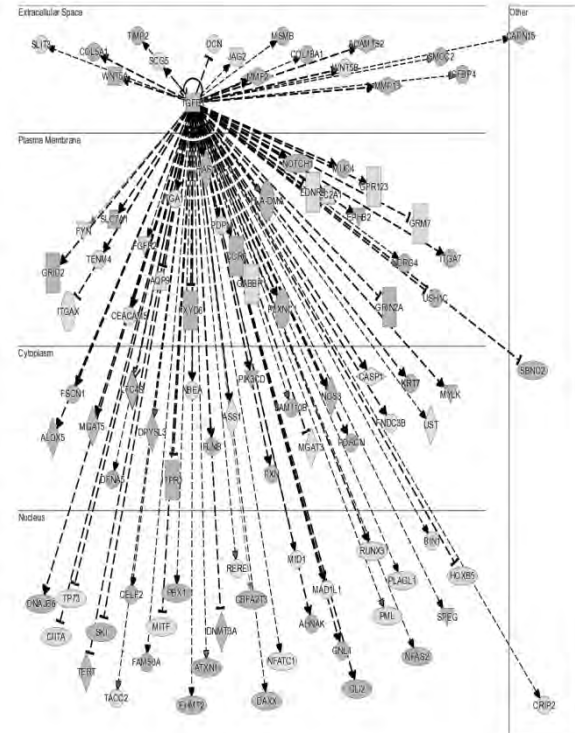
## RNA-seq data

## Epigenomics

- DNA methylation changes
- miRNAs
- LcRNAs



Illumina 450K arrays

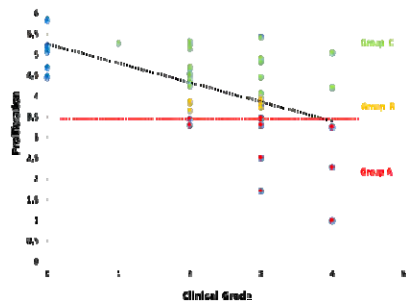


## Methylation mapping data

# INDIVIDUAL RADIOSENSITIVITY: IDENTIFYING HYPER-SENSITIVE INDIVIDUALS

## 1) COPERNIC cohort: RT patients

150 patients who developed adverse reactions after radiotherapy



- Segregation of patients according to phenotype: P-ATM (Inserm-Lyon) ; prolifération (CEA-Evry)

- Segregation according to genome/epigenome (iRCM/CNG). Present stage: 100 exome sequencing performed and currently analyzed.  
Next: explore non-coding RNA roles

## 2) INDIRA cohort: healthy donors



- . Constituting a cohort representative of the French population
- . 500 healthy volunteers
- . Segregate into sub-populations with low, medium, high radiosensitivity
- . Develop original assays for radiosensitivity assessment
- . Genomics and epigenomics