

# 四种方法获取 DNA 用于检测 IL-1 基因多态性的比较分析

段海燕 章锦才 黄萍 张蕴惠

**摘要** 目的:寻求一种能方便、简捷、有效地获取患者 DNA 的方法,以用于检测患者基因多态性。方法:采用 4 种方法获取患者 DNA,即静脉血中用酚-氯仿法抽提,指尖血血痕中用 Chelex-100 法抽提,颊粘膜拭子中用 Chelex-100 法抽提及直接用干燥血痕作为 PCR 扩增的 DNA 模板。对同一个体分别用 4 种来源的 DNA 检测其 IL-1 基因多态性,比较结果的特异性和敏感性。结果:颊粘膜拭子抽提 DNA 作基因多态性分析特异性高、敏感性强,优于静脉血酚-氯仿法抽提 DNA,且取颊粘膜拭子无创、方便。Chelex-100 法抽提 DNA 比酚-氯仿法更简单、快速。结论:颊粘膜拭子结合 Chelex-100 法抽提 DNA 适于对牙周炎患者作基因多态性分析。

**关键词** 基因多态性 聚合酶链反应-内切酶片断长度多态性 IL-1 基因 牙周病

## Buccal Swab : A Convenient Source of DNA for Analysis of IL-1 Gene Polymorphisms

Duan Haiyan , Zhang Jincai , Huang Ping , et al

College of Stomatology , West China University of Medical Sciences

### Abstract

**Objective** :PCR-RFLP based techniques have become standard procedures for gene polymorphism screening. Peripheral venous blood is currently the most commonly employed source of DNA for human genome analysis. However, it has many practical disadvantage and inherent limitations to use blood as DNA source. Blood sampling is invasive, painful and involves a potential risk of contamination with hepatitis. The classic procedure to extract genomic DNA from whole blood is phenol/ chloroform technique, which is relative complicated and time consuming. Therefore, this study was performed to try an alternative instead of using blood as DNA source for gene polymorphism analysis. **Methods** : Four methods were employed to obtain DNA from the same subject including DNA from venous blood through phenol/ chloroform extraction, DNA from dried blood spot through Chelex 100 technique, DNA from buccal swab through Chelex 100 technique and the dried blood spot directly as DNA template for PCR. Then, these various forms of DNA were used in PCR RFLP procedure to analyze IL-1 gene polymorphisms, and their specificity and sensitivity were evaluated. **Results** : Our results indicate that both the buccal swab and the blood based assays reached complete concordance in typing the IL-1 gene polymorphisms, while the Chelex 100 procedure for extracting DNA from buccal swab is much simpler and more rapid. It is noninvasive to get buccal swab. The amount of DNA obtained through one buccal swab is  $63.8\mu\text{g} \pm 18.7\mu\text{g}$ , which is enough for 10 PCR reactions. **Conclusion** : Buccal swab appears to be an excellent source of DNA for detection of polymorphisms of human IL-1 gene.

**Key words** : gene polymorphism PCR-RFLP IL-1 gene periodontitis

为检测患者基因多态性需获得患者的 DNA,经典的方法是抽取静脉血,用酚-氯仿法抽提,获得高纯度的 DNA。此法操作繁杂耗时,使用试剂较

多,不便在临床检验中推广,而且此法采血量较多,患者不易接受。寻求能方便、简捷、有效、准确地获取患者 DNA 的方法具有重要的实用价值。本实验采用 4 种方法获取患者 DNA,即静脉血中用酚-氯仿法抽提,指尖血血痕中用 Chelex-100 法抽提,颊粘膜拭子中用 Chelex-100 法抽提及直接用干燥血



的白细胞<sup>5</sup>。由于口腔内定植了数百种微生物,从颊粘膜拭子中抽提的DNA里肯定含有相当数量的细菌、霉菌或病毒DNA。但Baechtel等<sup>6</sup>证明细菌和霉菌DNA并不干扰人类DNA模板的PCR反应。本实验结果也表明,颊粘膜拭子DNA与静脉血DNA扩增出的基因带型完全吻合,这与van Schie等<sup>7</sup>的结果一致。van Schie等收集患者的全唾液,用从中提取的DNA检测患者FcR<sub>A</sub>和FcR<sub>B</sub>基因多态性,结果全唾液DNA扩增出的基因带型特异性很高,未见任何杂带。这可能是由于口腔微生物的基因组DNA与人类IL-1基因几乎无同源性,不会发生交叉反应。所以,颊粘膜拭子中口腔微生物的存在不会干扰基因分型结果。

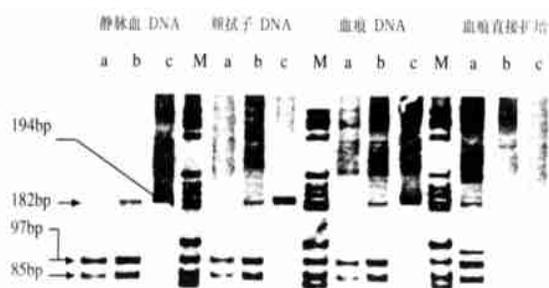


图1 4种来源DNA作IL-1B + 3953/ TaqI基因型分析电泳结果  
a、b 酶切产物, a为纯合子, b为杂合子;  
c: PCR产物; M: Marker为pBR 322/ Hae

酚-氯仿法抽提DNA的纯度最高,但步骤繁多,在抽提过程中损失了较多DNA,所以2ml静脉血中获得的DNA量仅与1支颊粘膜拭子中抽提的DNA量相当。Chelex-100是一种金属离子螯合剂,能与Mg<sup>++</sup>、Ca<sup>++</sup>等核酸反应必需的二价金属阳离子螯合,从而保护DNA,防止基因组DNA在抽提过程中降解成小片段,故有利于靶DNA片段的扩增,并减少由降解的DNA片段形成的杂带<sup>1</sup>。由于此方法没有专门用酚将DNA从上清液中抽提出来,所以DNA纯度不高,但是PCR反应对模板DNA纯度的要求不象基因克隆那样高,少量蛋白质或其它杂质对PCR反应并无太大影响,只要有特异性引物,就能从Chelex-100法抽提的DNA模板中扩增出特异的靶基因片段,所以用Chelex-100法处理颊粘膜拭子后,残留的蛋白质对PCR反应完全无影响,用这种DNA检测患者基因型的特异性和敏感性均可与酚-氯仿法抽提的高纯度DNA相媲美,其结果是可靠的。

曾有报道<sup>8</sup>直接将干燥血痕置于PCR反应体系中,经过加热,可释出足量DNA,并可通过PCR扩增出所需的靶基因片段。但本实验结果表明,直接用干燥血痕作PCR扩增结果不稳定,仅部分样品扩增出靶带;结果的特异性也不高,常在靶带附近见到明亮的非特异性片段,干扰基因型的分析。这是由于没有加入任何保护剂,经过加热后,血痕中DNA大部分已降解;而且血痕成份复杂,其中大量的血卟啉蛋白及多种杂质就可能抑制PCR反应。所以,虽然直接用血痕作PCR扩增的方法是目前报道的最简单的方法,不必经过任何提纯DNA的步骤,但其效果在本实验中未得到证实,不宜用于基因多态性的检测。

本研究结果显示:颊粘膜拭子中抽提DNA作基因多态性分析特异性高、敏感性强,优于经典的静脉血酚氯仿法抽提DNA,取颊粘膜拭子无创、方便,Chelex-100法抽提DNA比酚氯仿法更为简单、快速、价廉。所以该方法适宜于对牙周炎患者作基因多态性分析,易于普及,具有广泛的临床应用价值及发展前景。

### 参考文献

- 1 吴梅筠主编. 法医学物证学. 北京:人民卫生出版社,1998: 202
- 2 McDowell IL, Symons JA, Ploski R, et al. A genetic association between juvenile rheumatoid arthritis and a novel interleukin-1A polymorphism. *Arthritis Rheum*, 1995, 38(2): 221 ~ 228
- 3 Pociot F, Mølviig J, Wøgenesen L, et al. A TaqI polymorphism in the human interleukin 1 (IL-1B) gene correlates with IL-1 secretion in vitro. *Eur J Clin Invest*, 1992, 22(6): 396 ~ 402
- 4 Tarlow JK, Blakemore AIF, Lennard A, et al. Polymorphism in the human IL-1 receptor antagonist gene intron 2 is caused by variable numbers of an 86-bp tandem repeat. *Hum Genet*, 1993, 91(4): 403 ~ 404
- 5 Hagerman RJ, Wilson P, Staley LW, et al. Evaluation of school children at high risk for fragile X syndrome utilizing buccal cell FMR-1 testing. *Am J Med Genet*, 1994, 51(4): 474 ~ 481
- 6 Baechtel FS, Presley KW, Smerick JB. D1S80 typing of DNA from simulated forensic specimens. *J Forensic Sci*, 1995, 40(4): 536 ~ 545
- 7 van Schie RCAA, Wilson ME. Saliva: a convenient source of DNA for analysis of bi-allelic polymorphisms of Fc receptor A (CD32) and Fc receptor B (CD16). *J Immunol Methods*, 1997, 208(1): 91 ~ 101
- 8 Kornman KS, Crane A, Wang HY, et al. The interleukin-1 genotype as a severity factor in adult periodontal disease. *J Clin Periodontol*, 1997, 24(1): 72 ~ 77

(1999-09-08 收稿, 2000-12-05 修回)

(本文编辑 王 晴)