

Estimation of Mitochondrial DNA Sequences (HVI and HV II) Variations in Iraqi Population

Zaid J. Alshalah¹, Mohammed I. Nader¹, Ali H. Alsaad², Ayad I. Khaleel³

¹ Institute of Genetic Engineering and Biotechnology for Postgraduate Studies, University of Baghdad ²Biology Department, College of Science, University of Babylon. ³Al-Qasim Green University, Agriculture Faculty, Department of Horticulture

Received: 1/6/2022 Accepted: 25/9/2022 Published: December 20, 2022

Abstract: The current study aims to estimate the efficiency of mitochondrial DNA sequences (HVI and HV II) variations in the Iraqi population, The study population classified to two groups (individuals and families), the classification according to gender shows the women in families was higher than individuals in significant differences (P 0.007). The identities of HVI and HVII with data base of NCBI were detected in present study, the results showed non-significant changes between HVI and HV II in study population with NCBI data, and there were significant association between study groups (individuals HVI v HVII) and (families HVI v HVII) and also in HVII between individuals and families, significant highly identities of families female (HVII) and of individuals male, significant highly identities in HVI individuals. The variance in HVII was higher than HVI while in HVI the family's variance was a higher than individuals, in families' groups about five families have higher variance than others, in HVII the variance in individuals was higher than families and one family has higher and one family has higher variance. The results concluded that current output show fluctuation between HVI and HVII identities and variance

Keywords: mitochondrial MtDNA, Hypervariable region 1, Hypervariable region 1, sequences (scnp's), massive parallel sequencing

Corresponding author: (Email: zaid.jawad1100a@ige.uobaghdad.edu.iq).

Introduction

Even though the mitochondrion only comprises "0.25" percent of a cell's total DNA, 100 mitochondria live in the cytoplasm, making mtDNA the most abundant genetic molecules in forensic samples. MtDNA analysis is possible due to these properties of known population-specific variation and copy amount. Applications in forensic investigations (1).

The Displacement loop, which is made up of around 1100bp of the noncoding DNA, is known as the hypervariable area because of its higher mutation rate than the rest of the mtGenome. Three segments make up

the hypervariable area. Hypervariable region 1 (HV1) encompasses nucleotide sites 16024-16365, hypervariable region (HV2) encompasses nucleotide 11 sites73-340, and hypervariable region III (HV3) encompasses nucleotide sites 438-574. HVI and HV2 are the most commonly tested in forensic settings, but HV3 is rarely examined. Other regions of the nuclear genome, such as nuclear one -copy polymorphic have sequences (scnp's), been discovered to mutate 10 to 17 times faster than the hypervariable area (2).

mtDNA is particularly beneficial in forensic examinations involving calcified tissues and hair in ancient samples, according to current studies, missing individuals, and mass disasters, where DNA materials are typically damaged or severely deteriorated. Because each nucleated cell has 100 to 1000 mt genomes, the chances of mtDNA forensic indicators alive cellular damage are higher than those of the nuclear genome (3).

Methods

The current study was conducted in the molecular laboratory in the

Department of Life Sciences, College of Science, University of Babylon. Samples were collected in the January 2021; they included males and females from sample of Iraqi population Collecting of blood samples from 150 persons consisting of; 100 males and 50 females. Samples and data collection to ethical approval according of environment.

Table (1): HVI and HVII primers Sequences					
Primer Name	Sequences				
HVI F	5- CTC-CAC-CA-TAG-CAC-CCA-AAG-C-3				
HVI R	5- CCT-GAA-GTA-GGA-ACC-AGA-TG-3				
HVII F	5-GGT-CTA-TCA-CCC-TAT-TAA-CCA-C-3				
HVII R	5-CTG-TTA-AAA-GTA-ACC-GCC-A-3				

Sequencing: Sequencing is done by Macrogen company ,then data analysis were implemented using NCBI, blast tool https://blast.ncbi.nlm.nih.gov/Blast.cgi?PROGRAM=blastnandPAGE_TYPE=BlastSearchandLINK_LO

C=blasthome, and multiple alignment using https://mafft.cbrc.jp/alignment/software/.

Statistically analysis: All statistical analysis was performed via using SPSS version 23. all data were excited as (mean \pm SE) by using the one-way ANOVA test, Chi-square test, Duncan's, and Pearson correlation analysis used to determine significant variances among groups (P ≤ 0.05).

Results

The socio-demographic analysis of study population, and study groups (individuals and families)

The socio-demographic distribution of study population according to gender shows 59>3% men and 40.7% women (table 2). Regarding to employment, high percentage was no employments (28%), then employments was (25.3%), house wife was (20.7%) and students was (20%) and finally retired was (7%).

The endogamy shows that (48.7%) was in closed marriage and (51.3%) was hasn't. the output of genetic disease find

(5.3%) has genetic disease and (94.7%) was healthy. Other disease including diabetes mellitus type 2 and hypertension were (10.7%) and healthy individuals were (89.3%) (table 2). The study population classified to two groups (individuals and families), the classification according to gender shows the women in families was higher than individuals in significant differences (OR 0.0943, CI95% 0.0491 to 0.1814, P 0.007). employment The shows significant differences (p 0.000) among employments types, a higher percentage of students (40%) and house wife (28%) in families and no employment in individuals (39%). Significant changes (p 0.000) in endogamy were observed, about (60%) of individuals in closed marriage while in families was (74%). The healthy percentages were higher in non-significant both groups in differences (p 0.519). the other disease shows non-significant differences (p

families).								
Subjects	Population	Individuals	Families	Test	Р			
Gender								
Men	59.3	77	76	OR 0.0943 CI	0.007			
Women	40.7	23	24	95%(0.0491 - 0.1814)	0.007			
		Employ	ment					
No employment	28	39	6					
Student	20	10	40	\mathbf{X}^2	0.000			
Employment	25.3	26	24	48.5689				
House wife	20.7	17	28	40.0009				
Retired	6	8	2					
		Endoga	amy					
Yes	48.7	60	26	OR 0.2342, CI%	0.0001			
No	51.3	40	64	0.1286 to 0.4267	0.0001			
		Genetic d	lisease					
Yes	5.3	6	4	OR 0.6528, CI%	0.5191			
No	94.7	94	96	0.1785 to 2.3875	0.3191			
Other disease								
Yes	10.7	11	10	OR 0.8990, CI%	0.8176			
No	89.3	89	90	0.3636 to 2.2225, P	0.0170			

The identities of HV1 with NCBI data

0.817) in both groups that have high

percentages of healthy people.

The match with NCBI data was implemented for each study sample of population, individuals and families, results show non-significant (p0.160) between individuals and families (Figure 1). Regarding to gender the identities percentages individuals and families HIV I with NCBI show non-significant changes (p 0.922) between men, and significant between (0.015) between women (figure 2).

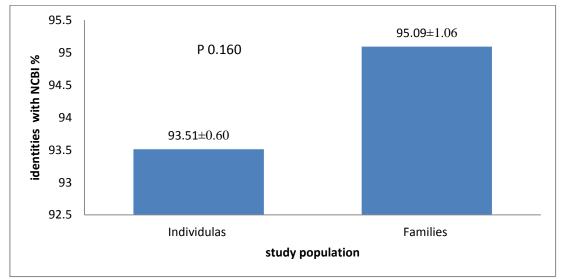


Figure (1): The identities percentages of study population (individuals and families) with NCBI (HV I).

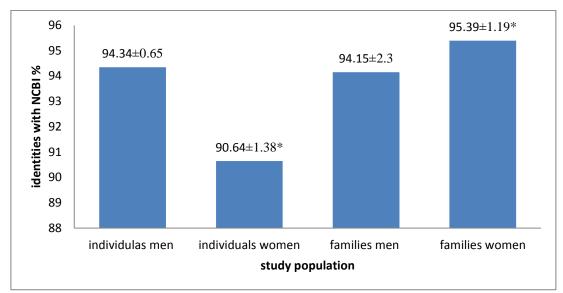


Figure (2): The identities percentages of study population (individuals and families) with NCBI (HIV I) according to gender (mean \pm SE, independent t test at p<0.5).

The comparisons among employment types in study groups show non-significant changes for individuals (p0.072) and for families (p 0.700). the higher identities percentages were observed in no employee, students of individuals than families and in employee, house wife and retired of families (figure 3).

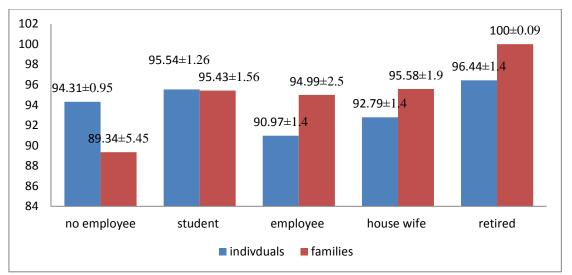


Figure (3): The identities percentages of study population (individuals and families) with NCBI (HV I) according to employment.

The samples with genetic disease show non-significant differences between individuals and families (p0.094) while the healthy recorded less identities (p 0.174) in both individuals and families in non-significant differences (p 0.124, 0.362) respectively (table 3). Other disease also recorded non-significant differences for all comparisons in slightly differences (Table 3).

families).									
Subjects	Individuals	Families	Sig						
	Genetic disease								
Yes	97.18±0.74	99.90±0.100	0.094						
No	93.27±0.63	94.89±1.09	0.174						
Sig	0.124	0.362							
	Other disease								
Yes	95.16±1.60	93.72±3.7	0.683						
No	93.32±0.65	95.24±1.17	0.121						
Sig	0.115	0.672							

Table (3): The socio-demographic analysis of study population, and study groups (individuals and families).

The identities mean of individuals and families show that some families have high identities percentages (B, C, D, E, G, F, I, L, Q, P, O) while other have low percentages (A, H, J, K, M, N) (figure 6), these differences were significantly (p 0.000) (Table 4).

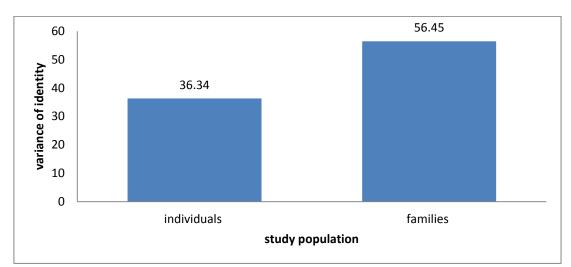


Figure (4): The variance value of identity percentage of individuals and families in study population.

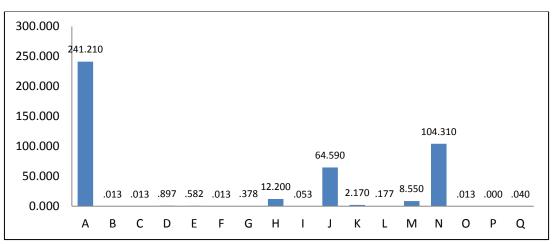


Figure (5): The variance value of identity percentage of families in study population(A-Q).

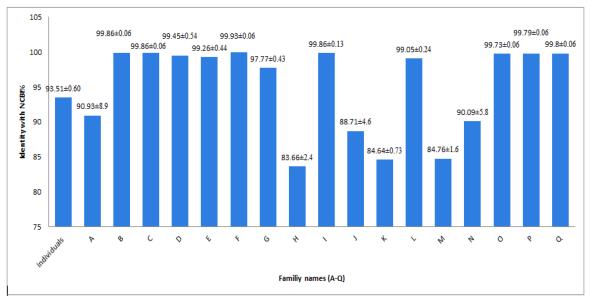


Figure (6): The identity percentages of HV I among individuals and families (A-Q) (mean ±SD).

Table (4): The statistical analysis of the identity percentages of HV I among individuals and families (A-Q) (p 0.000). (ANOVA one way, p<0.05, NS non-significant, S significant).

	Individuals	Α	В	C	D	E	F	G	Η	Ι	J	K	L	М	N	0	Р	Q
Individuals		NS	S	NS	NS	S	NS	S	NS	NS	NS	NS						
Α			NS															
B				NS	NS	NS	NS	NS	S	NS	S	S	NS	S	S	NS	NS	NS
С					NS	NS	NS	NS	S	NS	S	S	NS	S	S	NS	NS	NS
D						NS	NS	NS	S	NS	S	S	NS	S	NS	NS	NS	NS
E							NS	NS	S	NS	S	S	NS	S	NS	NS	NS	NS
F								NS	S	NS	S	S	NS	S	S	NS	NS	NS
G									S	NS	NS	S	NS	S	NS	NS	NS	NS
H										S	NS	NS	S	NS	NS	S	S	S
Ι											S	S	NS	S	S	NS	NS	NS
J												NS	S	NS	NS	S	S	S
K													S	NS	NS	S	S	S
L														S	NS	NS	NS	NS
М															NS	S	S	S
N																S	S	S
0																	NS	NS
Р																		NS
Q																		

The phylogenic tree of HVI was constructed; it's shown multiple rot with different branches and genetic distances (figure 7).

The identities of HVII with NCBI data

The identity with NCBI data was implemented for each study sample of population, individuals and families, results show significant (p0.000) between individuals and families High percentage of identity was observed in families than individuals (figure 8). According to gender the identities percentages of individuals and families with NCBI show high percentage of identities were higher in men of both groups, significant differences (p 0.02) between men and (p 0.000) between women between individuals and families (Figure 9).

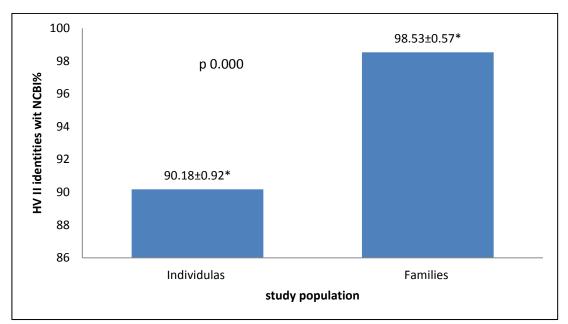


Figure (8): The identities percentages of study population (individuals and families) with NCBI (HV II) (mean ±SE, independent t test at p<0.5, * p 0.000).

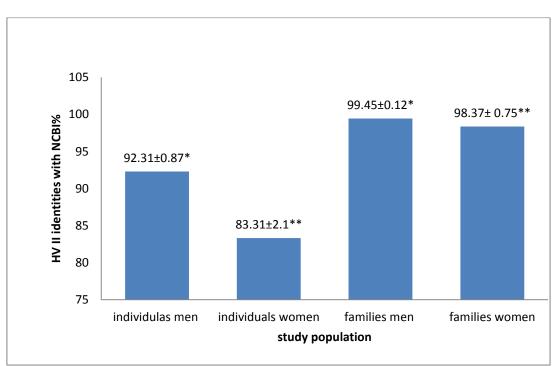


Figure (9): The identities percentages of study population (individuals and families) with NCBI (HIV II) according to gender (* p 0.02 between men, ** p 0.000 between women) mean \pm SE, independent t test at p<0.5.

The comparisons among employment types in study groups show significant changes for individuals (p 0.004) and non-significant for families (p0.829). the higher identities percentages were observed in all types of employments of families than individuals (figure 10).

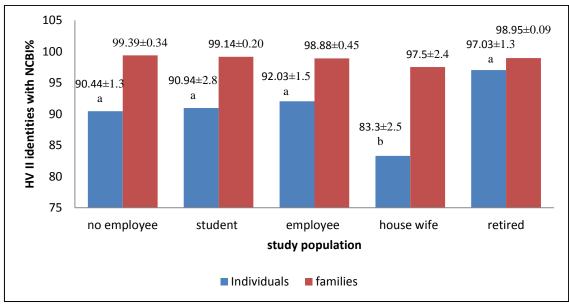


Figure (10): The identities percentages of study population (individuals and families) with NCBI (HV II) according to employment (p for individuals 0.004, Different letters refer to significant differences, p for families 0.829).

The samples with genetic disease show non-significant differences between individuals and families (p0.094) while the healthy recorded less identities individuals in significant differences (p 0.000) (table 5).

Other disease also recorded nonsignificant differences (p 0.176)between individuals and families that suffered from other disease and significant differences in healthy population (p 0.000) table (5).

Table (5): The identities percentages of study population (individuals and families) with NCBI (HIV II) according to disease infected (mean \pm SE, independent t test at p<0.5).

Subjects	Individuals	Families	Sig						
Genetic disease									
Yes	90.93±3.50	99.47±0.52	0.231						
No	90.17±0.94	98.59±0.59	0.000						
Sig	0.843	0.768							
Other disease									
Yes	93.89±2.56	99.42±0.192	0.176						
No	89.76±0.96	98.54±0.63	0.000						
Sig	0.156	0.560							

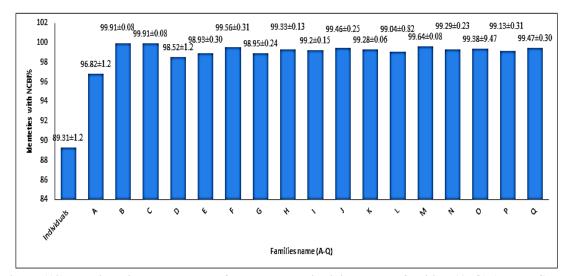


Figure (10): The identity percentages of HV II among individuals and families (A-Q) (mean ±SE, p 0.068).

The variance values of study groups were detected; in families the variance value was lower than individuals (figure 11). Families variance were varied (90.38-99.95) (figure 12).

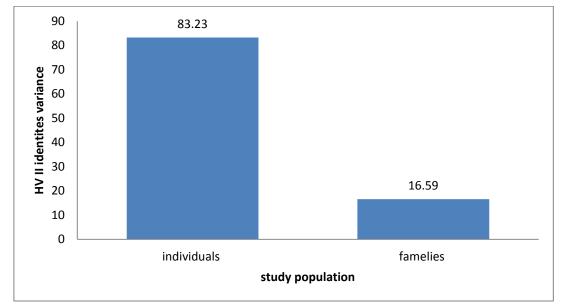


Figure (11): The variance value of identity percentage of individuals and families in study population.

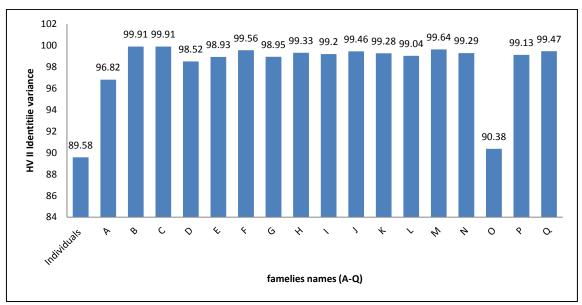


Figure (12): The variances value of identity percentage of families in study population(A-Q).

Discussion

The socio-demographic analysis of study population, and study groups (individuals and families)

The Iraqi population consists of categories different and different genders addition diverted in to nationalities, thus the genetic elements may be affected by other factors like pollution lifestyle, exposures and efficiency of DNA repair mechanisms. Although of absence the genetic data base of Iraqi population and poor information about the genetic diversity, some studies were suggested in last years, Hayder et al., (4) used Twentythree Y-STR loci included in the PowerPlex Y23 (Promega, Madison, WI, USA) were typed in 254 males from the Iraqi Arab population. Ohied and Al-Badran(5) found that the phylogenetic analysis showed a large variability of the communities of Basrah; they didn't cluster on the phylogenetic tree.. Current study was suggested to estimate the genetic variation in 150 individuals in Babylon province utilized HVI and HVII region, The presence D- loop in the mtDNA

control region is the most rapidly evolution due to the variations in sequances. There are 3 regions of hypervariable (HVI, HVII and HVIII) which tended to mutate 5–10 round quickly than DNA in nucleus, The mutation rate elevation of these hypervariable regions made utilized in population genetic investigations and for individuals discrimination analyzing (6).

Some investigations characterized variations in nucleotide the in contemporary populations and observed in modern Europeans typical variations of dozens nucleotides, more varied in Africa than in Europe(7, 8), and proved findings expand these output in a wide geographical range(10) suggested that the computational approaches power to process the questions about mtDNA population structure and its establishment by several studies that represented by an automated workflow. Furthermore, several of these statistics' interpretation about the possibility of mtDNA segregation and its contribution in disease still under investigation, like the characterize and expected variation

in different modern populations with social and biological data. In Iraq there were poor data about mtDNA variations, haplogroups and diversity in Iraqi populations in spite of the diverted in gender, nationalities and geographical differences.

The analysis of Mitochondrial DNA (mtDNA) genome has been a robust approach in forensic practice as well as in the understanding of human phylogeny in the maternal lineage. The control region is the traditional mtDNA analysis targeting, but the introduction of massive parallel sequencing (MPS) has made the typing of the entire mtDNA genome (mtGenome) more accessible for routine analysis. The complete mtDNA information can provide large amounts of novel genetic data for diverse populations as well as improved discrimination power for identification (11). The genetic diversity of the mtDNA sequence in different ethnic populations has been revealed through MPS analysis, but the Korean population not only has limited MPS data for the entire mtGenome, the existing data is mainly focused on the control region(12).

The identities of HVI and HVII with NCBI data

The results of current output show fluctuation between HVI and HVII identities and variance, the identities of HVI and HVII with data base of NCBI were detected in present study, the results showed non-significant changes between HVI and HV II in study population with NCBI data, and there were significant association between study groups (individuals HVI v HVII) and (families HVI v HVII) and also in HVII between individuals and families. significant highly identities of families female (HVII) and of individuals male, significant highly identities in HVI individuals and families with genetic disease and in healthy individuals, high identity observed in HVII in families than individuals. The variance in HVII was higher than HVI while in HVI the families variance was a higher than individuals, in families groups about five families have higher variance than others, in HVII the variance in individuals was higher than families and one family has higher and one family has higher variance, The diversity. similarities and difference in mtDNA are generated from different factors, first the high variable region in mtDNA have ability to mutate more times faster than nuclear DNA, second, absence of DNA repair system, third exposure to pollution through the life that made it more mutated(6).

Also, the rate of mtDNA mutation depends on other factors, like long exposure to oxidative stress value (OS) and the accuracy of the mtDNA polymerase, the ROS production is an inescapable of oxidative phosphorylation mechanisms generation in the mitochondrion, and these have harmful effect lead to DNA damage. Thus, the mtDNA experiences a raise mutation induction rate regarding to its proximity with the ROS production source, ROS levels also elevation by excess calories, pre-existing mtDNA damage, genetic variation in the regional mtDNA, and nDNA generation changes of stress response genes (13) where increased ROS production that lead to more ROS production over time. There was an exceptionally elevate mutation rate in mtDNA regarding to several unique characterizations of the mitochondrion, like heteroplasmy, its somatic mtDNA damage, meaning that wild-type and mutant mtDNA is coexisted, which randomly segregated through cell division that may be caused heteroplasmy shifts. Since human cells have (hundreds – thousands) mtDNA copies (14). The ROS have been proved that Iraqi individuals have higher level of ROS and low level of total antioxidants molecules that may be impacted in the mtDNA.

In current study the comparison between identities with NCBI between HVI and HV II in study groups According to gender shows significant changes, the HVII of families was higher than HVI. The effect of sex in the mtDNA diversity were established to determine its impacted in some sexbased phenotyping (15). Frank and Hurst (16) suggested the theory of Population genetic predict that mtDNA development that male-harming mutations must be accumulated mtDNA when they have simple impact on women fitness. This evolutionary men-harming mutations build-up capable of potentially inflate the responsible of mitochondrial the encoded sequence to the phenotypic and fitness diversity of men, and encourage to asymmetries in mtDNA diversity in men relative to women. Gemmell et al. (17) introduced models determined the specific genetic adverbs of population that made big versus tiny asymmetries, in fitness diverted between the men and women. These theory proposed that the structure of population. inbreeding and kin selection perhaps restrict the menharming mutations accumulation in the mtDNA(18, 19, 20).

The differences between men and women may be because the variation in effective population size of men and women. HEYER *et al.*, (21) suggested some anthropological mechanisms that may clarified sex-specific diverted in population size impacted therefore, the human genomic variation: (i) reproductive success differences resulted from polygyny; (ii) rules of descent; and (iii) reproductive success transmission.

The genetic disease and other disease showed high identities in patients than healthy individuals in both HVI and HVII, Investigations clarified that Any mutation in coding sequence of mtDNA molecules combined with mutation in a D-loop construct a strong proliferative feature, would have the potential harmful impacts in old age, especially the neoplastic properties acquired, that lead to load of accumulate mutation in the population of mtDNA will create general problems in function and mitochondrial health and age-related senescence contributing (22). Other studies found there was no association between D- loop region and some disease (23) later other studies found an association between disease and high variable variation (24, 25).

Moreover, the variation in d-loop that including HVI and HVII may be undergo random genetic drift in somatic cells, it has been proved that the variation of D-loop may be impact in the mtDNA proliferation in embryoderived stem cell lines (26).

Chinnerv and Hudson (27)suggested that the mtDNA diversity is actually neutral or nearneutral, despite of the high number of research that deal with humans and animal models, there were non-pathogenic mtDNA sequences correlated with some phenotypic impacts, like longevity, disease susceptibility and livestock fertility (13, 14, 28, 29, 30). Johnston et al., (31) noted that there were evidences about the phenotypic impacts, other analyses have non-significant statistically about claims of mtDNA related to different diseases.

The exploitation of **mtDNA** diversity has increasingly become a source of recent forensic and anthropological evidences worldwide. Some investigations buttress the notion that mtDNA variation associate highly with the ethnic and geographic origin of individual (32,an 33. 34). Hypervariable region typing is powerful because it boasts a higher mutation rate and does not undergo.

Mendelian inheritance (only the mother passes clonal copies of her mtgenome to her progeny) or recombination. Thus, barring mutation, progeny maternally inherit an identical mtDNA haplotype. Although the hypervariable regions 1 and 2 (HV1, HV2) comprise forensic mitotypes, the HV1 region is primarily used to assign haplogroups (hg) in population genetics and anthropological investigations as the HV2 region has been demonstrated to show less genetic variability in various populations (35, 36).

The correlation coefficient of HVI identities with NCBI and individuals age shows non-significant weak positive correlation, in families' identities and age shows non-significant weak inverse correlation the correlation coefficient of identities with **NCBI** HVII and individuals shows significant age positive correlation. While the correlation of families' identities and age shows non-significant weak positive correlation. The association of age with genetic diversity depended on other factors like stress exposure, lifestyle and inherited patterns, Li et al., (22) found that more than 90% of non-proliferating cells may have at least one hindered mutation in each cell at the age of 70, and there wasn't cells would have less than ten mutations, proved in mtDNA mutation perhaps implicate the significantly with adult onset diseases.

The discrimination individuals HVI and HVII with their families

The comparison between identities HVI and HV II in families' relations shows non-significant in Girl identities with mother (p 0.757) and girl with sister (p 0.610), while other relation were significantly, these identities were performed among families members with them and with others families, results indicated that HVII was the best in these relations.

The mtDNA typing was used from 25 years cross the world to overcome the many human identification mass disasters, violent crimes, terrorism acts, simple crimes, in addition of missing problems. The persons typing of mtDNA still developing with the technologies progressing from tinv fragments examination to multiple mtDNA genomes sequencing in a short time. Forming a lineage genetic typing, the mtDNA genome can predicted the ancestors state, like health and disease expected (37). In spite of many peoples have acceptable reasons of information found about an unknown suspect's potential ancestral information, others have been found a potential genetic dispositions to disorders as being unacceptable. Moreover, de-nova approaches can sequence mitogenome for more information about forensic applications (38, 39).

DNA typing was initially used to bolster a case against a suspect previously identified through traditional means of evidence gathering. However, the evolution of DNA typing has far surpassed the limited confirmatory role of DNA evidence and led to the increase of DNA's probative value. Reid (40) supports this role by demonstrating that mtDNA HV1-based sequence analysis has a higher power of

discrimination for self- identified U.S. African Americans than for U.S. European Americans. With the Reid findings, he challenged the preconception of limited mtDNA utility and make three observations concerning mtDNA analysis for forensic typing: First, the discriminatory power of mtDNA analysis will vary based on the maternal lineage. There is greater variability mtgenome amongst populations with maternal African ancestry, Second, in cases of weak or alternative suspects, mtDNA HV1based sequence analysis and haplogroup discrimination may provide new avenues for consideration and offer investigative leads, such as, inferring ethnicity from an unknown evidentiary sample. He also demonstrated greater than 90% concordance of selfidentified ethnicity and haplogroup assignment, which supports the idea of inferring ethnicity based on mtDNA haplotype. Third, an increase in mtDNA HV1 population data will help to increase the power of discrimination for mtDNA typing by providing stronger statistical support.

References

- Chung, J. K.; Lee, S. Y.; Park, M.; Joo, E. J. and Kim, S. A. (2019). Investigation of mitochondrial DNA copy number in patients with major depressive disorder. Psychiatry Research, 282: 112616.
- Singh, L.; Saini, N.; Pushker, N.; Bakhshi, S.; Sen, S.; Nag, T. C., *et al.* (2019). Mutational analysis of the mitochondrial DNA displacement-loop region in human retinoblastoma with patient outcome. Pathology and Oncology Research, 25(2): 503-512.
- De Gaetano, A.; Solodka, K.; Zanini, G.; Selleri, V.; Mattioli, A. V.; Nasi, M., *et al.* (2021). Molecular mechanisms of mtdnamediated inflammation. Cells, *10*(11): 2898.
- 4. Hayder, L.; Almohammed, E. K.; Hadi, S.

and Smith, J. (2020). Population genetic diversity in an Iraqi population and gene flow across the Arabian Peninsula.

- Ohied, B. M. and Al-Badran, A. I. (2020). Mitochondrial DNA (hypervariable region I) diversity in Basrah population– Iraq. Genomics, *112*(5): 3560-3564.
- Verma, K.; Sharma, S.; Sharma, A.; Dalal, J. and Bhardwaj, T. (2018). Data on haplotype diversity in the hypervariable region I, II and III of mtDNA amongst the Brahmin population of Haryana. Data in brief, 17: 305-313.
- Briggs, A. W.; Good, J. M.; Green, R. E.; Krause, J.; Maricic, T.; Stenzel, U., *et al.* (2009). Targeted retrieval and analysis of five Neandertal mtDNA genomes. Science, 325(5938): 318-321.
- Fu, W.X.; Liu, Y.; Lu, X.; Niu, X.Y.; Ding, X.D.; Liu, J.F., *et al.* (2012). Zhang Q. A genome-wide association study identifies two novel promising candidate genes affecting *Escherichia coli* F4ab/F4ac susceptibility in swine. PLoS One, 7(3): e32127.
- Lippold, S.; Xu, H.; Ko, A.; Li, M.; Renaud, G.; Butthof, A., *et al* M. (2014). Human paternal and maternal demographic histories: insights from high-resolution Y chromosome and mtDNA sequences. Investigative genetics, 5(1), 1-17.
- Blanco, S.; Kurowski, A.; Nichols, J.; Watt, F. M.; Benitah, S. A. and Frye, M. (2011). The RNA–methyltransferase Misu (NSun2) poises epidermal stem cells to differentiate. PLoS genetics, 7(12): e1002403.
- Galtier, N.; Nabholz, B.; Min, S. S. and Hurst, G. (2009). Mitochondrial DNA as a marker of molecular diversity: a reappraisal. Molecular Ecology, 18: 4541-4550.
- 12. Park, S.; Cho, S.; Seo, H. J.; Lee, J. H.; Kim, M. Y. and Lee, S. D. (2017). Entire mitochondrial DNA sequencing on massively parallel sequencing for the Korean population. Journal of Korean Medical Science, *32*(4): 587-592.
- 13. Wallace, D. C. (2015). Mitochondrial DNA variation in human radiation and disease. Cell, 163(1): 33-38.
- 14. Wallace, D. C. and Chalkia, D. (2013). Mitochondrial DNA genetics and the heteroplasmy conundrum in evolution and disease. Cold Spring Harbor perspectives

in Biology, 5(11), a021220.

- 15. Smith, S. R. and Connallon, T. (2017). The contribution of the mitochondrial genome to sex- specific fitness variance. Evolution, 71(5): 1417-1424.
- 16. Frank, S. A. and Hurst, L. D. (1996). Mitochondria and male disease. *Nature*, 383(6597): 224-224.
- 17. Gemmell, N. J.; Metcalf, V. J. and Allendorf, F. W. (2004). Mother's curse: the effect of mtDNA on individual fitness and population viability. Trends in ecology and evolution, 19(5): 238-244.
- Wade, M. J. and Brandvain, Y. (2009). Reversing mother's curse: selection on male mitochondrial fitness effects. *Evolution:* International Journal of Organic Evolution, 63(4): 1084-1089.
- 19. Hedrick, P. W. (2012). Reversing mother's curse revisited. *Evolution: International* Journal of Organic Evolution, *66*(2): 612-616.
- Zhang, H.; Guillaume, F. and Engelstädter, J. (2012). The dynamics of mitochondrial mutations causing male infertility in spatially structured populations. *Evolution:* International Journal of Organic Evolution, 66(10): 3179-3188.
- 21. Heyer, E.; Chaix, R.; Pavard, S. and Austerlitz, F. (2012). Sex- specific demographic behaviours that shape human genomic variation. Molecular ecology, 21(3): 597-612.
- 22. Li, H.; Slone, J.; Fei, L.; and Huang, T. (2019). Mitochondrial DNA Variants and Common Diseases: A Mathematical Model for the Diversity of Age-Related mtDNA Mutations. Cells, 18;8(6):608.
- Chinnery, P. F.; Mowbray, C.; Patel, S. K.; Elson, J. L.; Sampson, M.; Hitman, G. A., *et al.* (2007). Mitochondrial DNA haplogroups and type 2 diabetes: a study of 897 cases and 1010 controls. Journal of medical genetics, *44*(6), e80.
- 24. Liou, C. W.; Chen, J. B.; Tiao, M. M.; Weng, S. W.; Huang, T. L.; Chuang, J. H., *et al.* (2012). Mitochondrial DNA coding and control region variants as genetic risk factors for type 2 diabetes. Diabetes, 61(10): 2642-2651.
- Jiang, W.; Li, R.; Zhang, Y.; Wang, P.; Wu, T.; Lin, J., *et al.* (2017). Mitochondrial DNA mutations associated with type 2 diabetes mellitus in Chinese Uyghur population. Scientific reports, 7(1): 1-9.

- Kang, E.; Wu, J.; Gutierrez, N. M.; Koski, A.; Tippner-Hedges, R.; Agaronyan, K., *et al.* (2016). Mitochondrial replacement in human oocytes carrying pathogenic mitochondrial DNA mutations. Nature, 540(7632): 270-275.
- Chinnery, P.F. snd Hudson, G. (2013). Mitochondrial genetics. Br Med Bull; 106: 135–159.
- Dowling, D. K. (2014). Evolutionary perspectives on the links between mitochondrial genotype and disease phenotype. Biochimica et Biophysica Acta (BBA)-General Subjects, 1840(4): 1393-1403.
- Latorre-Pellicer, A.; Moreno-Loshuertos, R.; Lechuga-Vieco, A. V.; Sánchez-Cabo, F.; Torroja, C.; Acín-Pérez, R., *et al.* (2016). Mitochondrial and nuclear DNA matching shapes metabolism and healthy ageing. Nature, 535(7613): 561-565.
- John, J. C. S. (2016, April). Mitochondrial DNA copy number and replication in reprogramming and differentiation. In Seminars in cell and developmental Biology, 52: 93-101. Academic Press.
- Johnston, I. G. (2016). Multiple hypothesis correction is vital and undermines reported mtDNA links to diseases including AIDS, cancer, and Huntingdon's. Mitochondrial DNA Part A, 27(5): 3423-3427.
- 32. Yao, Y. G.; Nie, L.; Harpending, H.; Fu, Y. X.; Yuan, Z. G. and Zhang, Y. P. (2002). Genetic relationship of Chinese ethnic populations revealed by mtDNA sequence diversity. American Journal of Physical Anthropology: The Official Publication of the American Association of Physical Anthropologists, *118*(1): 63-76.
- Lee, C.; Măndoiu, I. I. and Nelson, C. E. (2011, December). Inferring ethnicity from mitochondrial DNA sequence. In BMC Poceedings, 5(2): 1-9.
- 34. Catelli, M. L.; Álvarez-Iglesias, V.; Gómez-Carballa, A.; Mosquera-Miguel, A.; Romanini, C.; Borosky, A., *et al.* (2011). The impact of modern migrations on present-day multi-ethnic Argentina as recorded on the mitochondrial DNA genome. BMC genetics, *12*(1): 1-13.
- 35. Lian, L. H. and Koh, C. L. (2005). Genetic polymorphisms in mitochondrial DNA hypervariable regions I, II and III of the Malaysian population. *Asian Pacific* Journal of Molecular Biology and Biotechnology 13 (2): 79–85.

Science

- 36. Stoneking, M. (2000). Hypervariable sites in the mtDNA control region are mutational hotspots. The American Journal of Human Genetics, 67(4): 1029-1032.
- Amorim, A.; Fernandes, T. and Taveira, N. (2019). Mitochondrial DNA in human identification: a review. Peer Journal, 7: e7314.
- 38. Tully, G.; Bär, W.; Brinkmann, B.; Carracedo, A.; Gill, P.; Morling, N., *et al.* (2001). Considerations by the European DNA profiling (EDNAP) group on the working practices, nomenclature and interpretation of mitochondrial DNA

profiles. Forensic International, 124(1): 83-91.

- 39. Prinz, M.; Carracedo, A.; Mayr, W. R.; Morling, N.; Parsons, T. J.; Sajantila, A., *et al.* (2007). DNA Commission of the International Society for Forensic Genetics (ISFG): recommendations regarding the role of forensic genetics for disaster victim identification (DVI). Forensic Science International: Genetics, *1*(1): 3-12.
- 40. Reid, R. S. (2013). Evaluation of Mitochondrial DNA Typing in a Forensically Relevant Population of Self-Identified US African Americans.