# EPIGENETIC RISKS OF CLONING

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# EPIGENETIC RISKS OF CLONING

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# Preface

Cloning technology has the potential to be a valuable tool not only in basic research, but also in agriculture and clinical medicine. The agricultural and clinical applications that are being explored include reproductive cloning of farm animals and therapeutic cloning for human cell, tissue, and organ replacement [1,2]. Embryos produced by nuclear transfer from a patient's somatic cell offer one potential source of embryonic stem (ES) cells [3,4] that would be histocompatible with the patient's cells and in principle be a source of any other cell type. Studies in animal models show that transplantation of ES-derived cells can successfully treat a variety of chronic diseases, including cardiovascular diseases, diabetes, and traumatic spinal cord injury, that underlie the promising role of human ES cells in tissue regeneration and modern medicine [5].

Several laboratories have used a variety of somatic cell types to create cloned animals, including sheep, cattle, mice, pigs, and goats; the list is ever expanding. The present procedures have proved to be repeatable, but are very inefficient when only between 1 and 4% of reconstructed embryos typically develop to adulthood [1,2]. The low overall success rate is the cumulative result of inefficiencies at all stages of development, although species and donor cell types may differ in the precise pattern of loss. In addition to embryonic loss, somatic cell nuclear transfer is also associated with very high rates of fetal, perinatal, and neonatal loss, and production of abnormal offspring [1,2,6]. Common abnormalities include respiratory distress, increased birth weight, and major cardiovascular abnormalities. Other abnormalities that may develop later include failure of the immune system; structural abnormalities of the brain and other viscera; accelerated aging; and obesity, which may be influenced by species, genetic background, or donor cell type.

Increasing evidence from a range of mammals shows a propensity for epigenetic errors with embryo technologies; if paralleled in human embryos, the effect on tumorigenic and differentiation properties of ES cells needs to be established [7]. Epigenetic risks are also related to assisted reproductive technologies in humans as known for imprinting disorders such as Beck–Wiedemann and Angelman syndromes. Therefore, it is important to evaluate the consequences of cloning in resulting embryo and offspring before widespread use of the technology.

We hope that this book helps the reader understand embryonal, fetal, perinatal, neonatal, and postnatal development of clones of various species for further technological advances.

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# Editor

Akio Inui completed his M.D. and Ph.D. degrees at Kobe University. In 1984, he was appointed assistant professor at the same university and became associate professor in 1998. Between 1985 and 1989, he also served as chief physician of the Medical Ward at Kobe University Hospital. Since 2001, Dr. Inui has been engaged as associate professor in the Division of Diabetes, Digestive and Kidney Diseases in the Department of Clinical Molecular Medicine at Kobe University Graduate School of Medicine. He is recognized for his studies in elucidating the role of gut–brain peptides in the regulation of gastrointestinal motility, feeding, and body weight, and the identification of the ghrelin–neuropeptide Y pathway from stomach to brain in the pathogenesis of obesity and cachexia. He has an interest in the role of gut–brain peptides in the development of behavior in animal models, including clones.

Dr. Inui received the Janssen Award of the American Gastrointestinal Association in 2004. He is editor of *Peptides*, *Nutrition*, and the *International Journal of Oncology*. Between 2000 and 2002, he also edited the *International Journal of Molecular Medicine*. His efforts are now focused on translational research on peptides that bridges the gap between basic and clinical disciplines for better understanding and management of human behavioral disorders, including obesity, cancer cachexia, and eating disorders.

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