Genomic Approaches to the Study of Complex Genetic Diseases

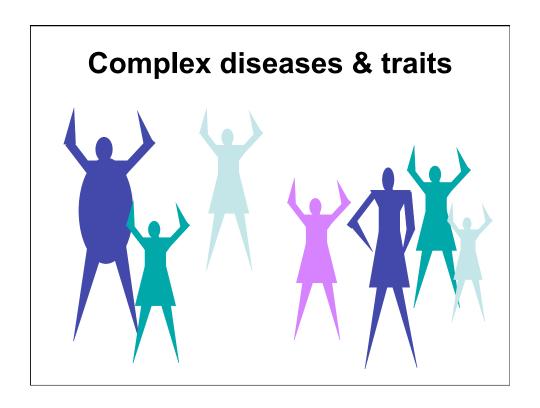
Karen Mohlke, PhD
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April 23, 2014

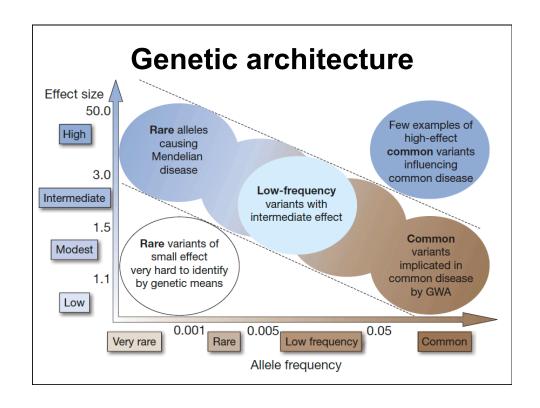


Current Topics in Genome Analysis 2014

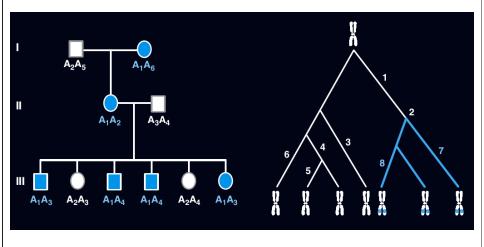
Karen Mohlke

No Relevant Financial Relationships with Commercial Interests





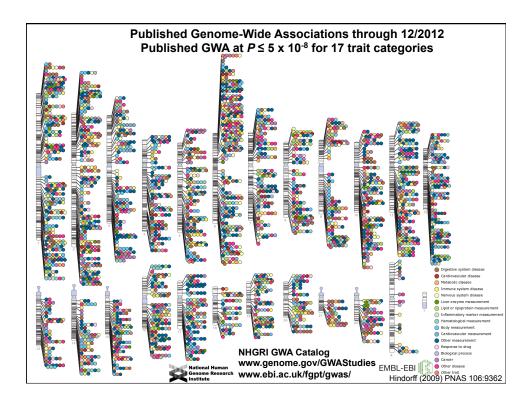
Gene mapping in populations



Altshuler and Clark (2005) Science 307:1052

Genome-wide association study goals

- Test a large portion of the common single nucleotide genetic variation in the genome for association with a disease or variation in a quantitative trait
- Find disease/quantitative trait-related variants without a prior hypothesis of gene function



Outline

- Genome-wide association study design
 - Samples/study participants
 - Genotyping
 - Tests of association
 - Imputation and meta-analysis
- Interpretation of results
 - Effect size and significance
 - Example locus characteristics
- Sequencing/rare variant studies

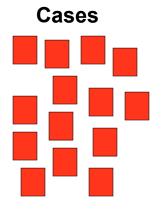
Study design depends on disease or trait

- Disease (case/control)
 - Rare
 - Common
- Quantitative traits
 - Easy to measure: Weight, height
 - Requires testing: Coronary artery thickness
 - Requires experiment: Gene expression

Selection of cases and controls Cases Controls Cases and controls should be comparable in

other respects except disease status.

Selection of cases



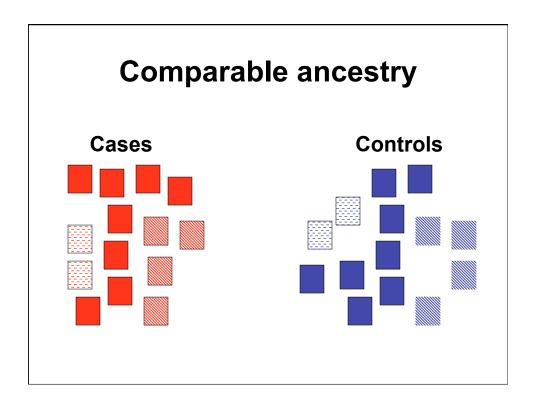
- Potential criteria to enrich genetic effect size
 - More severely affected individuals
 - Require other family member to have disease
 - Younger age-of-disease onset

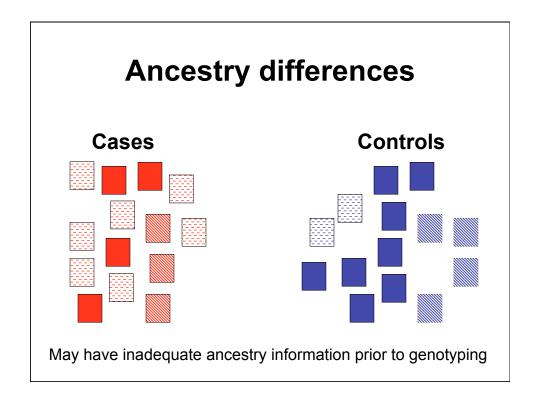
Selection of controls

- Potential criteria to enrich genetic effect size
 - Low risk of disease rather than population-based samples
- Matched to cases on age, sex, demographics

Controls

See McCarthy (2008) for the effect of selection of controls on power and sample size.





Population stratification

- Systematic differences in allele frequencies between subpopulations that may be due to different ancestry
- Can produce spurious associations in case-control studies

Population stratification

Example: IgG haplotype 'Gm' association with type 2 diabetes in Gila River Indian Community

Presence of Gm marker associated with lower prevalence of diabetes

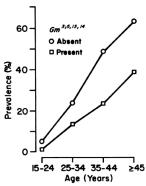


Figure 1 Prevalence of diabetes by age and the presence of the haplotype $Gm^{\lambda, \ell, l, l, \ell}$ among residents of the Gila River Indian Community.

Apparent association with diabetes is due to an association between Gm marker and amount of Indian heritage

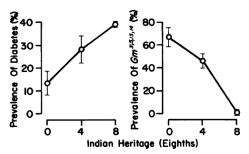


Figure 3 Age-adjusted prevalence (± 1 standard error) of diabetes (left) and of $Gm^{3:5,13,1d}$ (right), according to Indian heritage, among residents of the Gila River Indian Community.

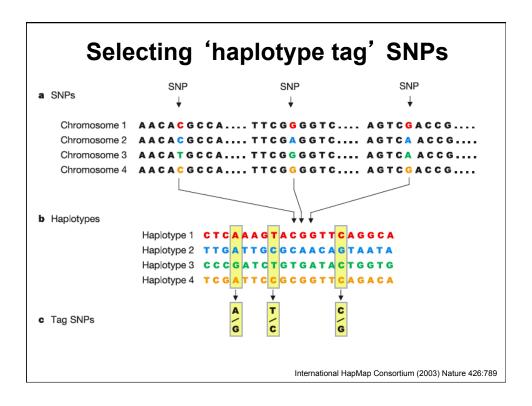
Knowler (1998) AJHG 43:520

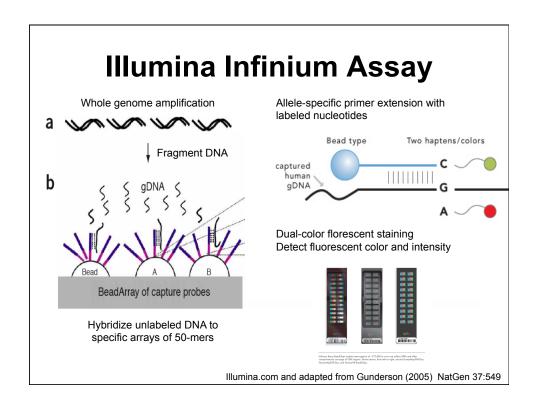
Account for or avoid population stratification

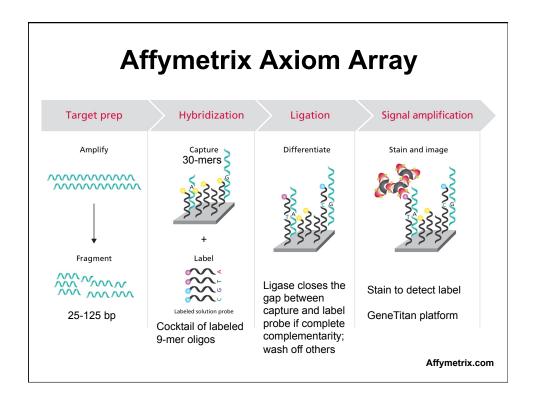
- Match cases with controls
- Restrict to one subgroup
- Adjust for genetic background
 Use principle components (PCs) to infer ancestry from genotype data and adjust for PCs in association analysis
- Family-based study design genotype relatives and analyze transmission of alleles from heterozygous parents to offspring Transmission disequilibrium test (TDT), familybased association test (FBAT)

Genome-wide SNP panels

- 10,000 5 million SNPs
- · Affymetrix, Illumina
 - Random SNPs
 - Selected haplotype tag SNPs
 - Copy number probes
 - More lower frequency variants
 - Exome variants
 - · Some arrays allow SNPs to be added







Global genomic coverage

Global coverage (%) by SNP chips

| SNP chip | CEU | CHB+JPT | YRI |
|---------------|-----|---------|-----|
| SNP Array 5.0 | 64 | 66 | 41 |
| SNP Array 6.0 | 83 | 84 | 62 |
| HumanHap300 | 77 | 66 | 29 |
| HumanHap550 | 87 | 83 | 50 |
| HumanHap650Y | 87 | 84 | 60 |
| Human1M | 93 | 92 | 68 |

Percent of SNPs present on the chip or tagged at r²>0.8 by at least one SNP in the chip within 250 kb

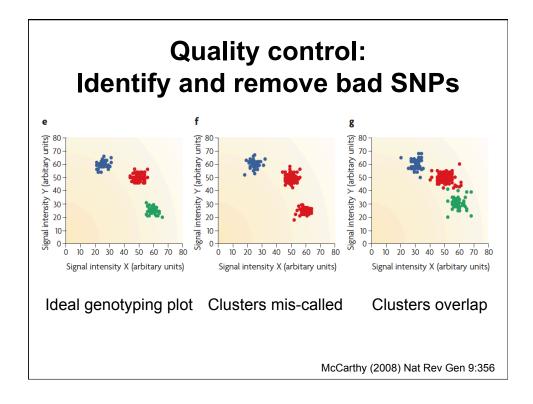
Li (2008) EJHG 16:625

Quality control: Identify and remove bad samples

- Poor quality samples
 - Sample success rate < 95 %</p>
 - Excess heterozygous genotypes
- Sample switches
 - Wrong sex
- Unexpected related individuals
 - Pair-wise comparisons of genotype similarity
 - Duplicates
- Ancestry different from the rest of sample

Quality control: Identify and remove bad SNPs

- Genotyping success rate < 95%
- Different genotypes in duplicate samples
- Expected proportions of genotypes are not consistent with observed allele frequencies
- Non-Mendelian inheritance in trios
- Differential missingness in cases and controls



Test for association

Differences between cases & controls

| | AA | AC | CC |
|---------|----|----|----|
| Case | | | |
| Control | | | |

- Ex. Cochran-Armitage test for trend
- Covariates (age, sex, ...)
- Other genetic models

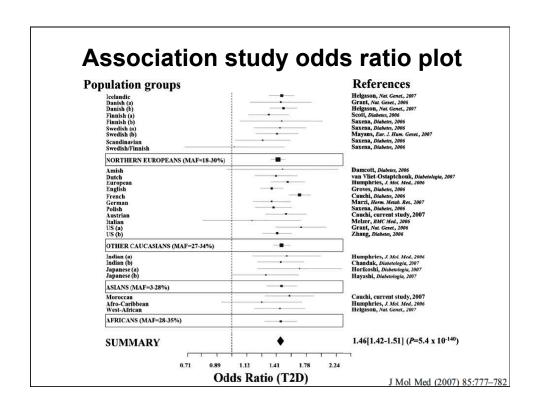
Odds ratio

 Surrogate measure of effect of allele on risk of developing disease

| Allele | Α | С | Total |
|---------|------|------|-------|
| Case | 860 | 1140 | 2000 |
| Control | 1000 | 1000 | 2000 |
| Total | 1860 | 2140 | 4000 |

Odds of C allele given case status = <u>Case C / Case A</u> Odds of C allele given control status = <u>Control C / Control A</u>

Odds Ratio =
$$\frac{\text{Case C / Case A}}{\text{Control C / Control A}} = \frac{1140 / 860}{1000 / 1000} = 1.33$$

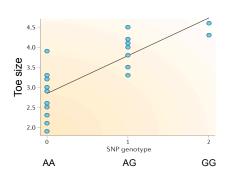


Linear regression

$$y = \beta_0 + \beta_1 x$$

Trait =
$$\beta_0 + \beta_1 SNP_1$$

Toe size =
$$\beta_0 + \beta_1 rs 123456$$



Linear regression

$$y = \beta_0 + \beta_1 x$$

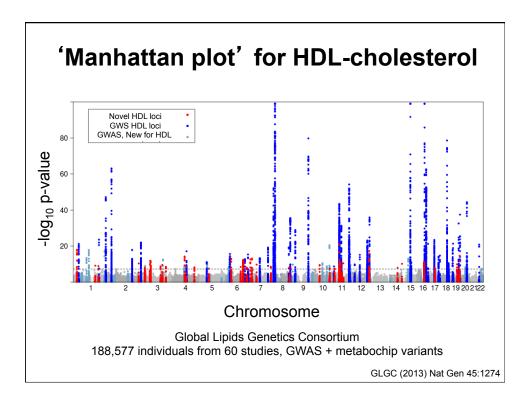
Trait =
$$\beta_0 + \beta_1 SNP_1$$

Toe size =
$$\beta_0 + \beta_1 rs 123456$$

Toe size = $\beta_0 + \beta_1 \text{rs} 123456 + \beta_2 \text{sex} + \beta_3 \text{age} + \beta_4 \text{age}^2 + \beta_5 \text{BMI}$ covariates

Assumptions

- Trait is normally distributed for each genotype, with a common variance
- Subjects independent (e.g. unrelated)

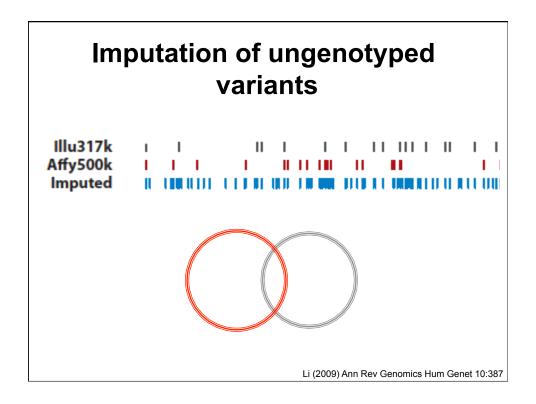


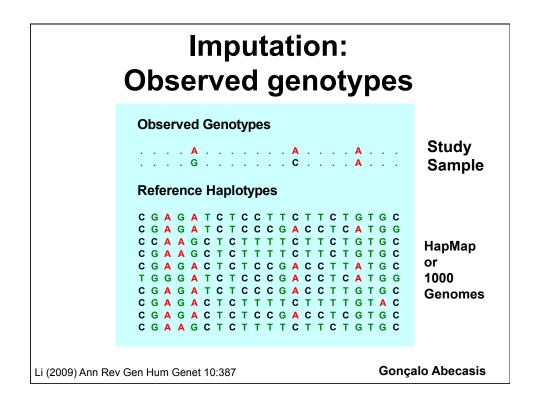
Multiple testing

- Genotype and test > 300K 5M SNPs
- Correct for the multiple tests

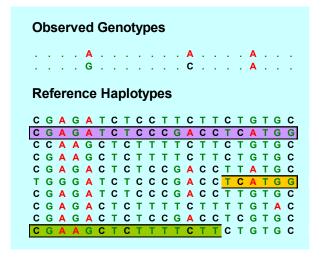
$$\frac{.05 P\text{-value}}{\text{-1 million common SNPs}} = 5 \times 10^{-8}$$

Need large effect or large sample size





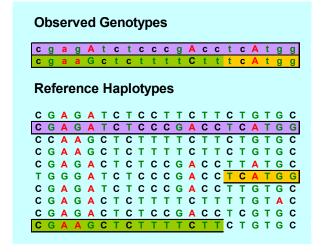
Identify match among reference



Li (2009) Ann Rev Gen Hum Genet 10:387

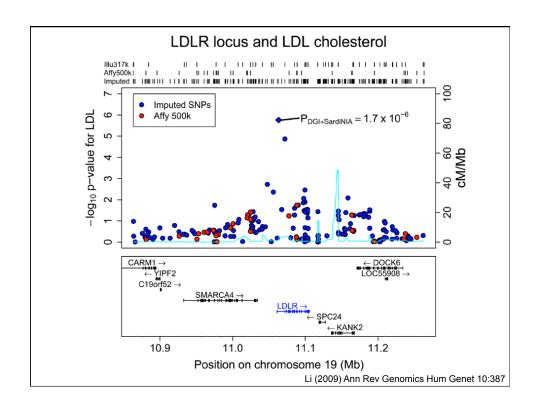
Gonçalo Abecasis

Phase chromosomes, impute missing genotypes



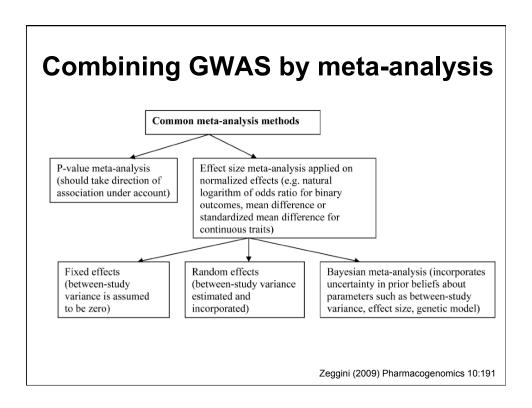
Li (2009) Ann Rev Gen Hum Genet 10:387

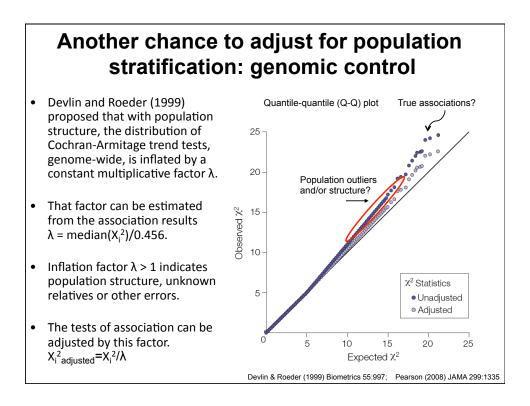
Gonçalo Abecasis



Combining GWAS by meta-analysis

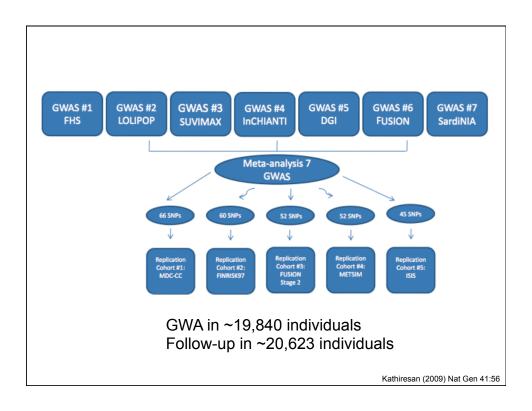
- Combine studies giving more weight to studies with greater precision
- Increase power vs individual studies
- Can investigate consistency of effects across studies
- Potential sources of heterogeneity:
 - Phenotype definitions are different
 - Different genotyping and analysis strategies
 - Environmental effects may differ

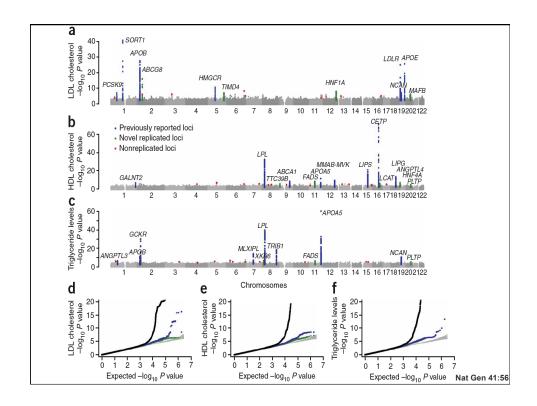


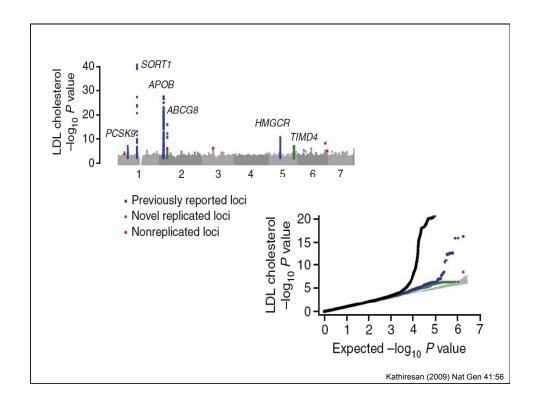


Outline

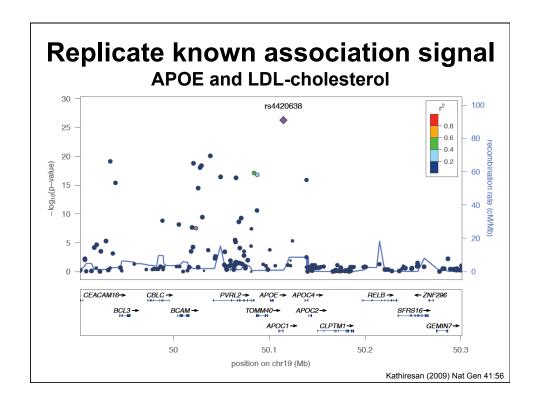
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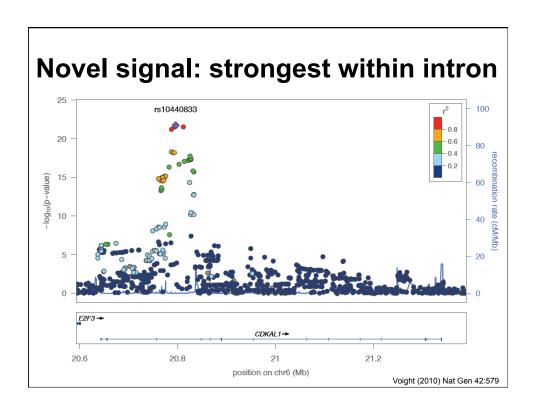


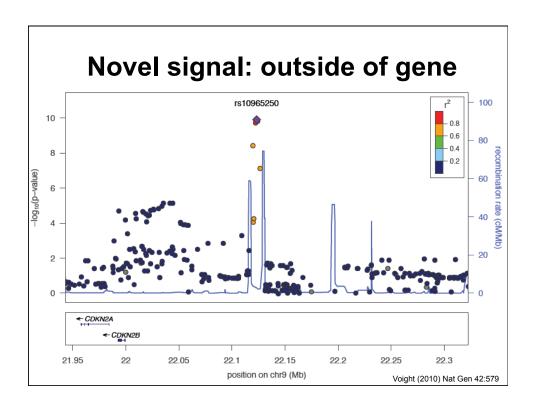


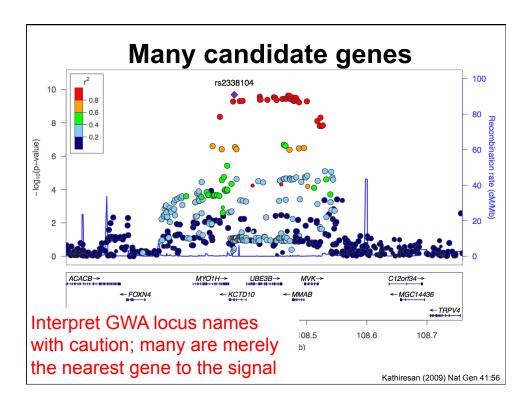


| | | | | | | | | matesa |
|-------------|------------|------------------------|--|--------|---|--|-------------------------------------|---------------------------------------|
| Trait C | Chr. | SNP | P for combined stage 1 + 2 association | | Associated interval size, kb (no. of genes within interval) | Gene(s) of interest within or near associated interval | Major allele, minor allele (MAF) | Effect size for minor allele (s.e.m.) |
| Newly iden | ntified co | mmon SNPs ^d | | | | | | |
| LDL 2 | 2p21 | rs6544713 | 2 × 10 ⁻²⁰ | 23,456 | 52 (2) | ABCG8 | C. T (0.32)c | 0.15 (0.02) |
| | 5q23 | rs1501908 | 1×10^{-11} | 27,280 | 153 (2) | TIMD4-HAVCR1 | C, G (0.37) | -0.07 (0.02) |
| | 20a12 | rs6102059 | 4 × 10 ⁻⁹ | 28,895 | 104 (0) | MAFB | C, T (0.32)c | -0.06 (0.02) |
| LDL 1 | 12q24 | rs2650000 | 2 × 10 ⁻⁸ | 39,340 | 112 (3) | HNF1A | C, A (0.36) | 0.07 (0.02) |
| Loci with o | definitive | prior association | evidence | | | | | |
| LDL 1 | 1p13 | rs12740374 | 2×10^{-42} | 19,648 | 85 (4) | CELSR2, PSRC1, SORT1 | G, T (0.21) ^c | -0.23 (0.02) |
| LDL 2 | 2p24 | rs515135 | 5×10^{-29} | 19,648 | 214 (1) | APOB | C, T (0.20)c | -0.16 (0.02) |
| LDL 1 | 19q13 | rs4420638 | 4×10^{-27} | 11,881 | 79 (4) | APOE-APOC1-APOC4-APOC2 | A, G (0.16) ^c | 0.29 (0.06) |
| LDL 1 | 19p13 | rs6511720 | 2×10^{-26} | 19,648 | 30 (1) | LDLR | G, T (0.10) ^c | -0.26 (0.04) |
| LDL 5 | 5q13 | rs3846663 | 8×10^{-12} | 19,648 | 476 (4) | HMGCR | C, T (0.38) | 0.07 (0.02) |
| LDL 1 | 19p13 | rs10401969 | 2×10^{-8} | 19,648 | 503 (18) | NCAN, CILP2, PBX4 | T, C (0.06)c | -0.05 (0.04) |
| LDL 1 | 1p32 | rs11206510 | 4 × 10 ⁻⁸ | 19,629 | 16 (1) | PCSK9 | T, C (0.19) | -0.09 (0.02) |

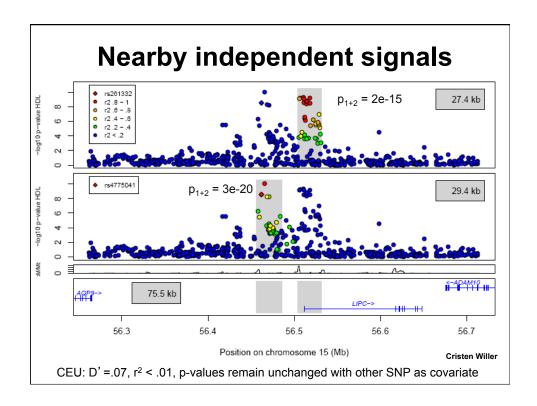








| Locus | Nearest Gene | Nearest Gene (kb) | No. of Genes within 100kb | Literature Candidate | Gene with Nonsynonymous SNP (r ² >0.8) | eQTL Gene (<i>P</i> <5x10 ⁻⁸) | Pathway Analysis |
|--------------|-----------------|----------------------|------------------------------|---|---|---|---------------------|
| | | | and the second | - | | | |
| PIGV-NROB2 | PIGV | 13.5 | with HDL Cholest | | AUIDC# C1(172# | | NROB2 |
| PIGV-NKUB2 | PIGV | 13.5 | , | PIGV, NROB2 | NUDC*, C1orf172*, NROB2 | | NKUB2 |
| HDGF-PMVK* | RRNAD1 | 0 | 10 | HDGF, CRABP2 | HDGF | | |
| ANGPTL1* | C1orf220 | 0 | 3 | , | | | |
| CPS1 | CPS1 | 0 | 2 | | CPS1 | | CPS1 |
| ATG7 | ATG7 | 0 | 2 | | | | |
| SETD2 | SETD2 | 0 | 4 | | NBEAL2 | | |
| RBM5 | RBM5 | 0 | 4 | | MST1R* | RBM5 | |
| STAB1 | STAB1 | 0 | 10 | STAB1, NISCH | NISCH | | |
| GSK3B | GSK3B | 0 | 3 | GSK3B, NR1I2 | | | GSK3B |
| C4orf52* | C4orf52* | 131.5 | 0 | | | | |
| FAM13A | FAM13A | 0 | 2 | | | | |
| ADH5 | ADH5 | 4.9 | 4 | | | ADH5 | |
| RSPO3 | RSPO3 | 4 | 1 | | | | |
| DAGLB | DAGLB | 0 | 5 | DAGLB | | DAGLB | DAGLB |
| SNX13 | SNX13 | 0 | 1 | SNX13 | | | |
| IKZF1 | IKZF1 | 0 | 1 | IKZF1 | | | |
| TMEM176A | ABP1 | 20.1 | 5 | | | TMEM176A | |
| MARCH8-ALOX5 | MARCH8 | 0 | 3 | ALOX5 | MARCH8 | | |
| OR4C46 | OR4C46 | 3.2 | 2 | | OR5W2*, OR5D13*, OR5AS1* | | |



Conditional analysis

$$y = \beta_0 + \beta_1 x$$

Trait =
$$\beta_0 + \beta_1 SNP_1 + \beta_2 SNP_2$$

$$[HDL] = \beta_0 + \beta_1 rs261332 + \beta_2 rs4775041$$

[HDL] = β_0 + β_1 rs261332 + β_2 rs4775041 + β_3 sex + β_4 age + β_5 age²

Tests independence of SNP effects

If β_1 changes when β_2 is included in the model, then SNP₁ is sometimes inherited with SNP₂ If neither β changes in reciprocal tests, then the two SNPs independently affect the trait

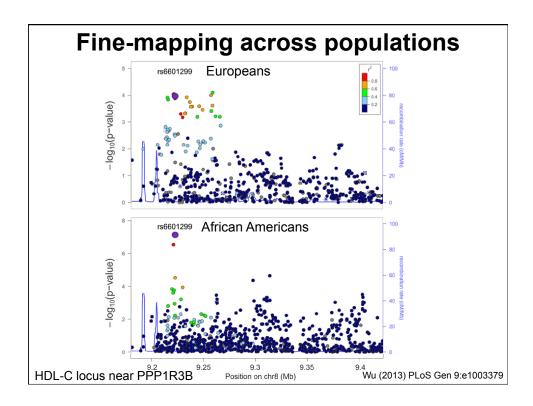


Table 1. Population Variation Explained by GWAS for a Selected Number of Complex Traits

h² Pedigree h² GWAS h² All

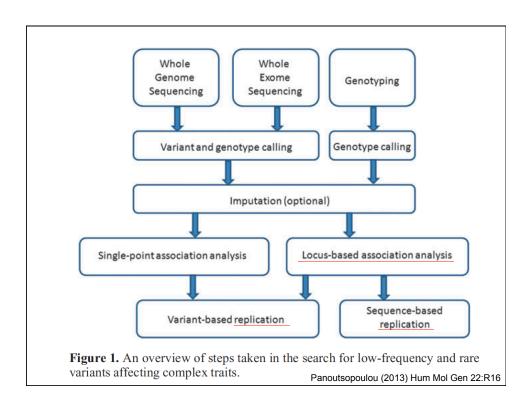
| h ² Pedigree Studies | h ² GWAS Hits ^a | h ² All GWAS SNPs ^b |
|------------------------------------|---|--|
| 0.9^{98} | 0.6 ^{99,c} | 0.3^{12} |
| $0.3 - 0.6^{100}$ | $0.05 \text{-} 0.10^{34}$ | |
| $0.4 - 0.6^{101,102}$ | $0.01 \text{-} 0.02^{36}$ | 0.2 ¹⁴ |
| $0.6 - 0.8^{103}$ | 0.1^{11} | 0.4^{12} |
| 0.5^{103} | 0.05^{12} | |
| $0.3 - 0.8^{104}$ | 0.1^{45} | |
| | 0.9 ⁹⁸ 0.3-0.6 ¹⁰⁰ 0.4-0.6 ^{101,102} 0.6-0.8 ¹⁰³ 0.5 ¹⁰³ | StudiesHitsa 0.9^{98} 0.6^{99} ,c $0.3-0.6^{100}$ $0.05-0.10^{34}$ $0.4-0.6^{101,102}$ $0.01-0.02^{36}$ $0.6-0.8^{103}$ 0.1^{11} 0.5^{103} 0.05^{12} |

Use of the current information in clinical practice will be disease dependent

Partial table from Visscher (2012) AJHG 90:12

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- Sequencing/rare variant studies



Some sequencing study designs for complex traits

- Sequence selected individuals
 - extreme trait values (>95% vs <5% level)
 - cases and controls
- Increase the number of individuals
 - by decreasing sequencing coverage (\$)
 - by collecting rare variants onto a less expensive genotyping array
- Sequence population isolates, where rare variants may have drifted to higher frequencies and LD may be longer

REPORT

Medical Sequencing at the Extremes of Human Body Mass

Nadav Ahituv, Nihan Kavaslar, Wendy Schackwitz, Anna Ustaszewska, Joel Martin, Sybil Hébert, Heather Doelle, Baran Ersoy, Gregory Kryukov, Steffen Schmidt, Nir Yosef, Eytan Ruppin, Roded Sharan, Christian Vaisse, Shamil Sunyaev, Robert Dent, Jonathan Cohen, Ruth McPherson, and Len A. Pennacchio

Sequenced coding regions and splice junctions of 58 genes in 379 obese individuals with mean BMI 49 and 378 lean individuals with mean BMI 19

Found >1000 variants, including 8 in MC4R that were subsequently tested for function

| Table 4. Functional Characterization of MC4R Nonsynonymous Variants in the Obese Cohort |
|---|
|---|

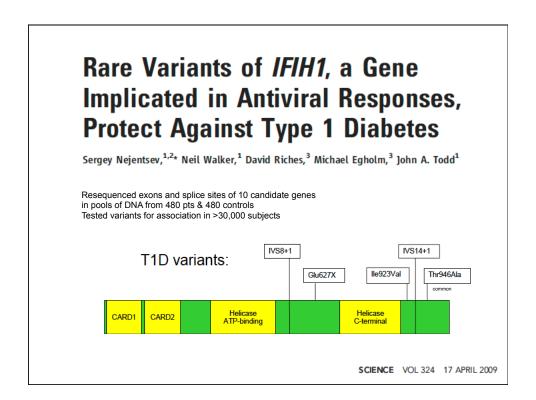
| | | | | Results of Functional Studies | | | | | | | |
|--------------------|------------------|---|----------------------|---------------------------------|---------------------------------|--------------|--|--|--|--|--|
| Variant | Sequence | n | Known or Novel | alpha-MSH Activation (EC50) | Basal Activity | Summary | | | | | |
| S30F | tgagt[c/t]ccttg | 1 | Known ¹⁸⁵ | Not tested alone ¹⁸² | Not tested alone ¹⁸² | | | | | | |
| G32E | ccttg[g/a]aaaag | 1 | Novel | .3 nM | 70% | Minor | | | | | |
| E61K | tgttg[g/a]agaat | 1 | Novel | Low | ≤10% | Severe | | | | | |
| S127L | tgact[c/t]ggtga | 1 | Known ¹⁸² | 29 nM | 80% | Intermediate | | | | | |
| L211Dela | ttct[ctct/-]atgt | 2 | Known175 | Truncated receptor | Truncated receptor | Severe | | | | | |
| P299H ^a | cgatc[c/a]tctga | 2 | Known ¹⁸² | Negative | ≤10% | Severe | | | | | |
| A303T | tttat[g/a]cactc | 1 | Novel | Low | ≤10% | Severe | | | | | |
| C326R | gcctt[t/c]gtgac | 1 | Novel | .4 nM | 150% | Minor | | | | | |
| Wild type | | | | .3 nM | 100% | | | | | | |

^a Individuals who had the L211Del also had the P299H variant.

Am. J. Hum. Genet. 2007;80:779-791.

Sequencing at a GWAS locus

- Sequence 'positional candidate' genes in cases & controls or individuals with extreme trait values
- Identify variants in cases (one extreme) that are absent from controls (other extreme)
- Hypothesize that occasional 'smoking gun' variants with strong effect will be identified
- Use evidence that variants affect gene function and lead to the same disease/trait to implicate that gene at the association signal
- Does not require finding the variant(s) responsible for association signal that may have a weaker effect



Rare variants confirmed to be associated with T1D in more samples

Table 2. Association analysis of the four rare IFIH1 polymorphisms in T1D patients and controls and in families that have one or more offspring with T1D and their parents. Results for additional IFIH1 SNPs are shown in table S5. CI, confidence interval; T/NT, number of alleles transmitted and nontransmitted to the affected offspring.

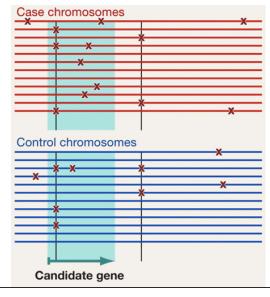
| | | | | | | | Cas | e-cont | trol st | tudy | | | Fami | ly study | |
|------------------------|------------------|----------|------|--------|-----|-------|-----|--------|------------|-----------------|-----------------------|--------|-----------------|----------------------|-----------------------|
| | Allele* 1 > 2 | | 11 | (%) | 12 | (%) | 22 | (%) | MAF (%) | OR (95% CI)† | P value‡ | T/NT | RR (95% CI)† | P value§ | Combined P valuell |
| rs35667974/I923V | A > G | T1D | 7853 | (97.8) | 172 | (2.1) | 3 | (0.04) | 1.1 | 0.51 | 1.3×10^{-14} | 67/111 | 0.60 | 5.9×10^{-4} | 2.1×10^{-16} |
| Exon 14 | | controls | 9166 | (95.7) | 404 | (4.2) | 4 | (0.04) | 2.2 | (0.43 - 0.61) | | | (0.45 - 0.82) | | |
| rs35337543/IVS8+1 | G > C | T1D | 7945 | (98.0) | 163 | (2.0) | 0 | (0.0) | 1.0 | 0.68 | 1.1×10^{-4} | 51/60 | 0.85 | 0.20 | 1.4×10^{-4} |
| Intron 8, splice site | | controls | 9330 | (97.1) | 280 | (2.9) | 0 | (0.0) | 1.5 | (0.56 - 0.83) | | | (0.59 - 1.23) | | |
| rs35744605/E627X | G > T | T1D | 8109 | (99.1) | 76 | (0.9) | 0 | (0.0) | 0.46 | 0.69 | 9.0×10^{-3} | 17/31 | 0.55 | 2.8×10^{-2} | 1.3×10^{-3} |
| Exon10 | | controls | 9621 | (98.7) | 131 | (1.3) | 0 | (0.0) | 0.67 | (0.52 - 0.91) | | | (0.30 - 0.99) | | |
| rs35732034/IVS14+1 | G > A | T1D | 8047 | (98.6) | 109 | (1.3) | 2 | (0.03) | 0.69 | 0.74 | 1.2×10^{-2} | 35/56 | 0.63 | 2.1×10^{-2} | 1.1×10^{-3} |
| Intron 14, splice site | | controls | 9552 | (98.1) | 180 | (1.9) | 1 | (0.01) | 0.93 | (0.59 - 0.94) | | | (0.41 - 0.95) | | |

Major allele is coded 1; minor allele is coded 2. †OR and relative risks (RR) for minor (rarer) alleles are shown. ‡Two-tailed P values were calculated with logistic regression. \$00ne-tailed values were calculated with transmission disequilibrium test with robust variance estimates. || IlCombined P values for the case-control and family data were calculated with a score test as escribed previously (26).

Establishes the role of IFIH1 in T1D and demonstrates that resequencing studies can pinpoint disease-causing genes in regions initially identified by GWASs.

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Identify an increased 'burden' of variants in a single gene or locus

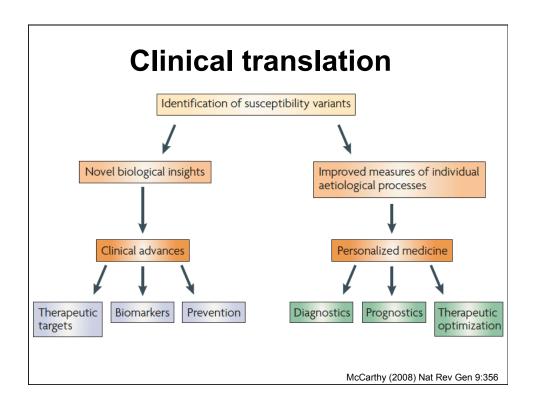


- Many individually important variants will be too rare to detect the association with the trait; however, there will often be more than one important variant in a gene
- Gene-based tests combine information from multiple variants into a single test statistic to be used as predictor in genetic association tests
- What information about the variants should we use?

Raychaudhuri (2011) Cell 147:57

Rare variant burden tests

- Many alternative forms an active area of research
- Collapse information from multiple variants into single test
- Some tests allow the direction of effect of each variant to be different
- The choice of variants included in tests has a large impact on the test
- Including too many null variants can kill statistical power but so can not including the right ones
- Filter missense variants on minor allele frequency and predictive function?
- Restrict tests to obvious functional variants?



Future of Complex Trait Analyses

- · More and more loci identified
- Larger meta-analyses
- Deeper follow-up of signals
- More diverse populations
- Gene-based results from rare variants
- Gene-gene and -environment interactions
- Molecular and biological mechanisms