



The Genotype-Tissue Expression (GTEx) pilot analysis: multi-tissue gene regulation in humans.

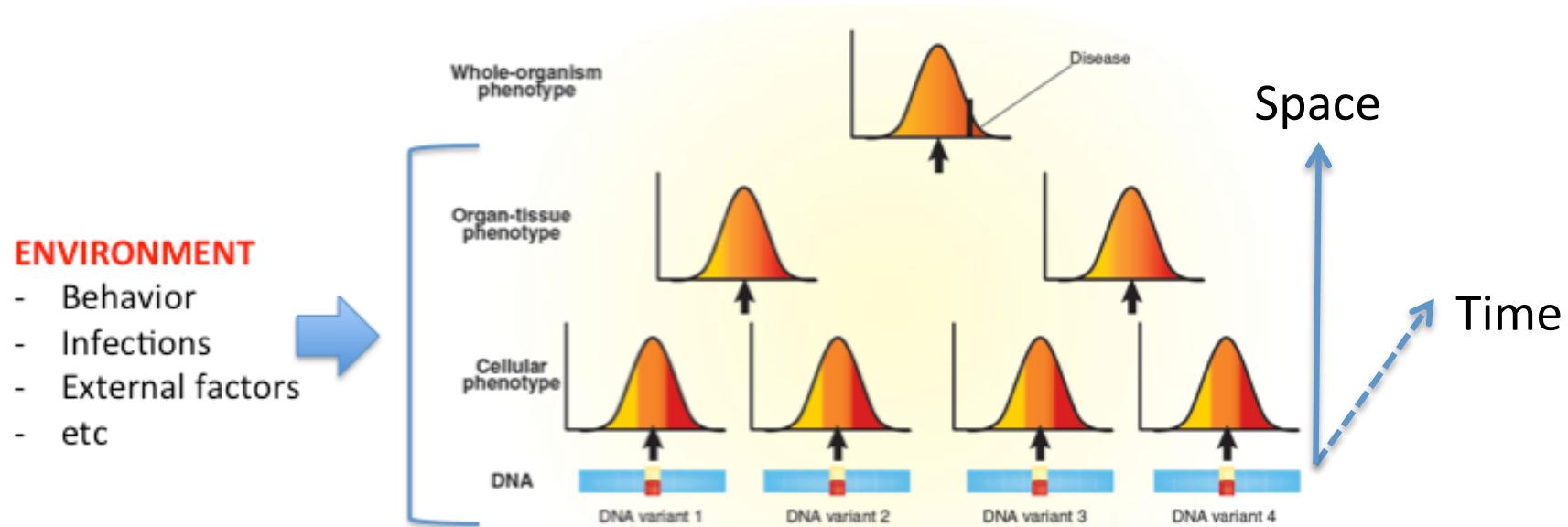
Manolis Dermitzakis
(University of Geneva, Switzerland - GTEx analysis PI)
on behalf of the GTEx consortium



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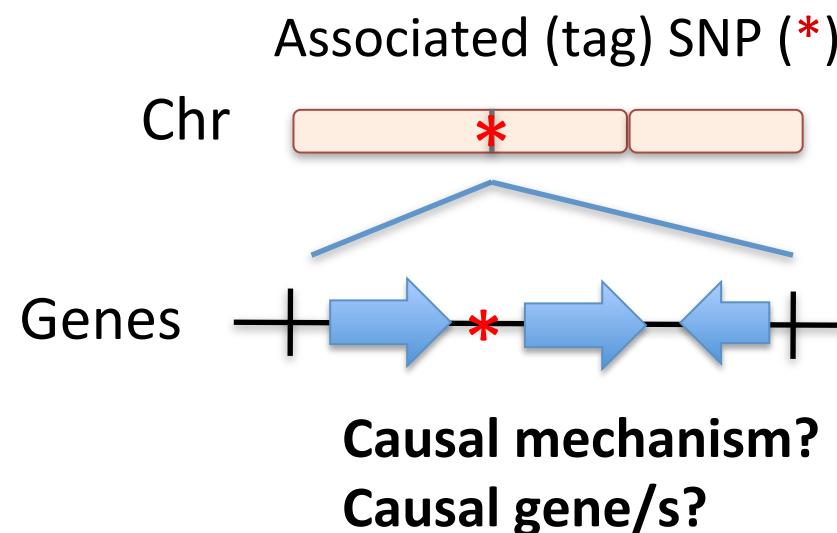
Challenge: How do we go from trait-associated variants to biological mechanism?



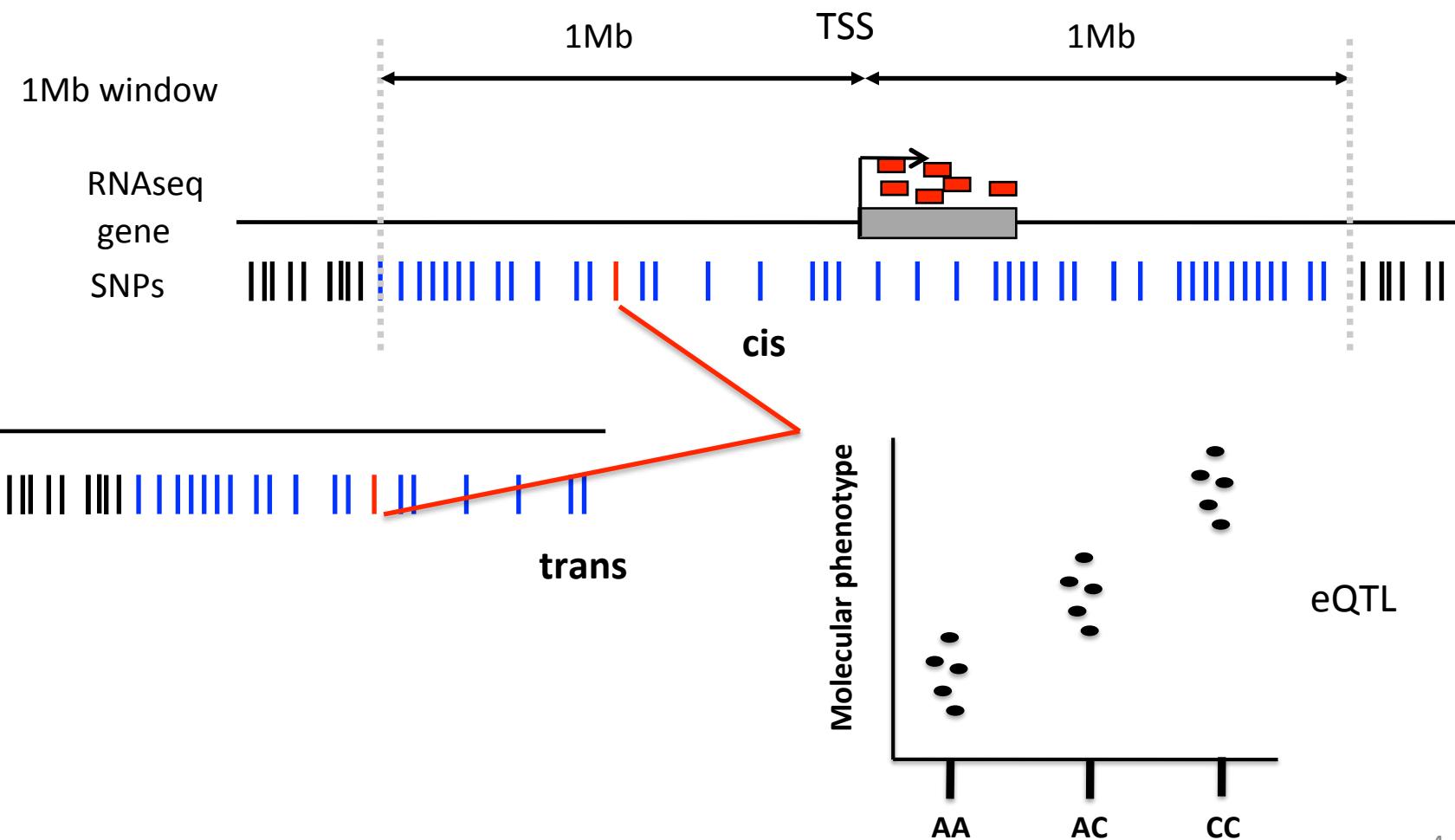
Background Rationale

Genome-wide association studies (**GWAS**) have identified **hundreds of common DNA variants** associated with multiple **complex diseases and traits**.

>2/3 GWAS SNPs lie in noncoding regions (e.g. intergenic, introns).



Expression Quantitative Trait Loci (eQTL)



Many studies show trait-associated SNPs enriched for eQTLs

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PLOS GENETICS

Trait-Associated SNPs Are More Likely to Be eQTLs: Annotation to Enhance Discovery from GWAS

LCL
eQTLs

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PLOS GENETICS

LCL
eQTLs

Candidate Causal Regulatory Effects by Integration of Expression QTLs with Complex Trait Genetic Associations

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Coanalysis of GWAS with eQTLs reveals disease-tissue associations

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Eric E. Schadt, Ph.D.², Atul J. Butte, M.D., Ph.D.¹

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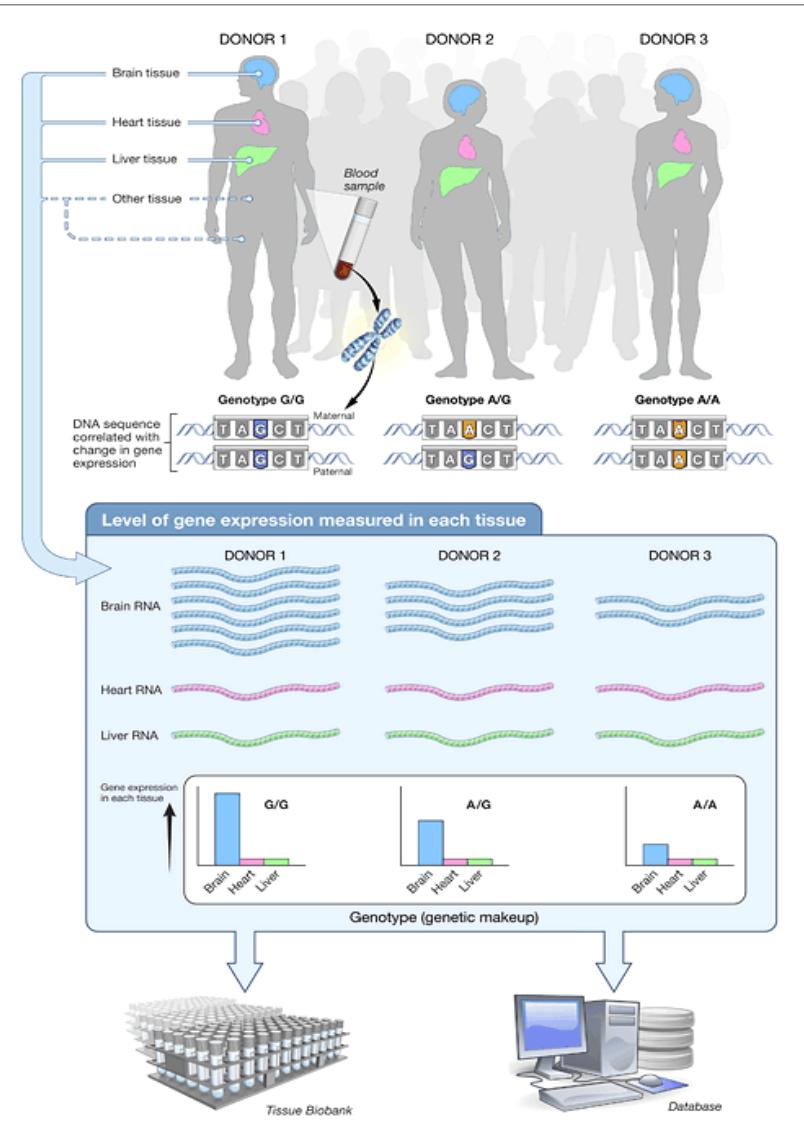
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New York, NY

Peripheral blood
monocyte, liver and
adipose eQTLs

Challenges in using eQTLs to interpret disease associations

- Measuring eQTLs in disease-relevant tissues or cell types
- Most human tissue types are hard to obtain
- Large sample sizes are required for statistical power

GTEx = Genotype-Tissue Expression



GTEx GOALS:

- Atlas (database) of gene expression, regulation, and eQTLs from a wide range of non-diseased human tissues
- Biobank of tissues, DNA, RNA

ULTIMATE STUDY SIZE (by 1/2016):

- 900 Postmortem Donors
- Whole exome sequencing
- Whole genome sequencing
- RNA-Seq of ~30 tissues/donor (>20,000 tissues)

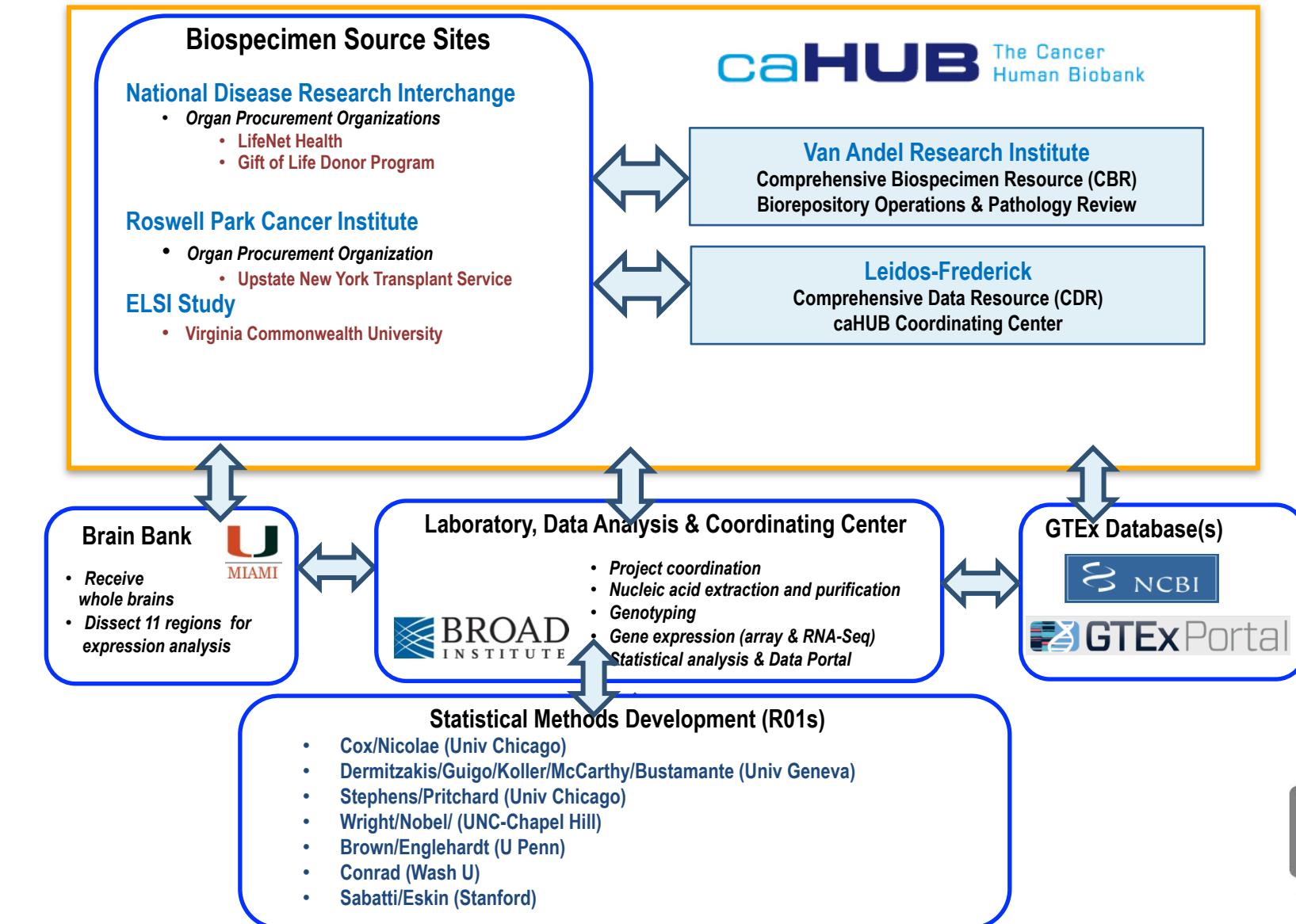


The Common Fund

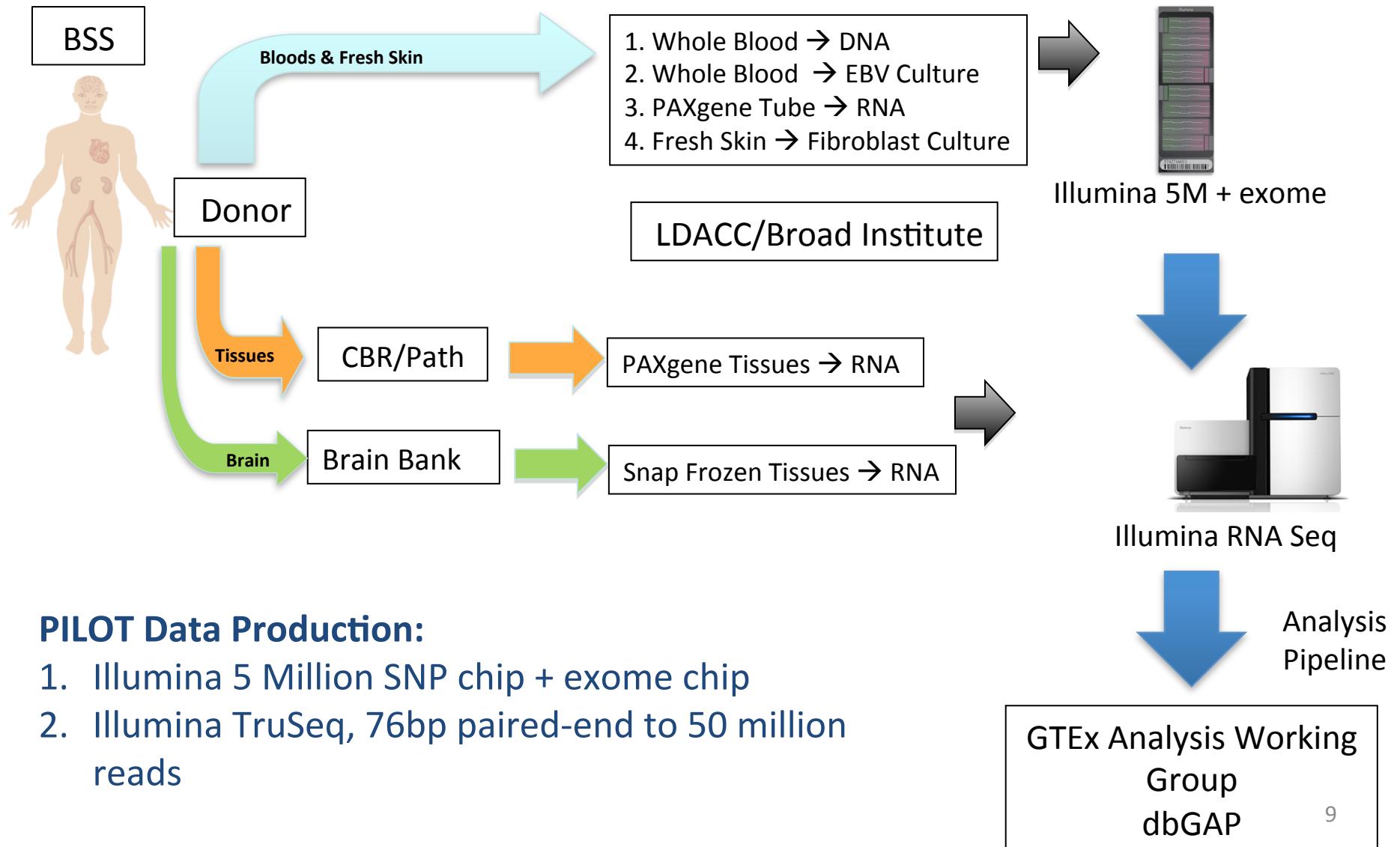
PILOT PHASE (in 2010):

- 175 Postmortem Donors
- 1641 RNA-Seq of ~28 tissues/donor

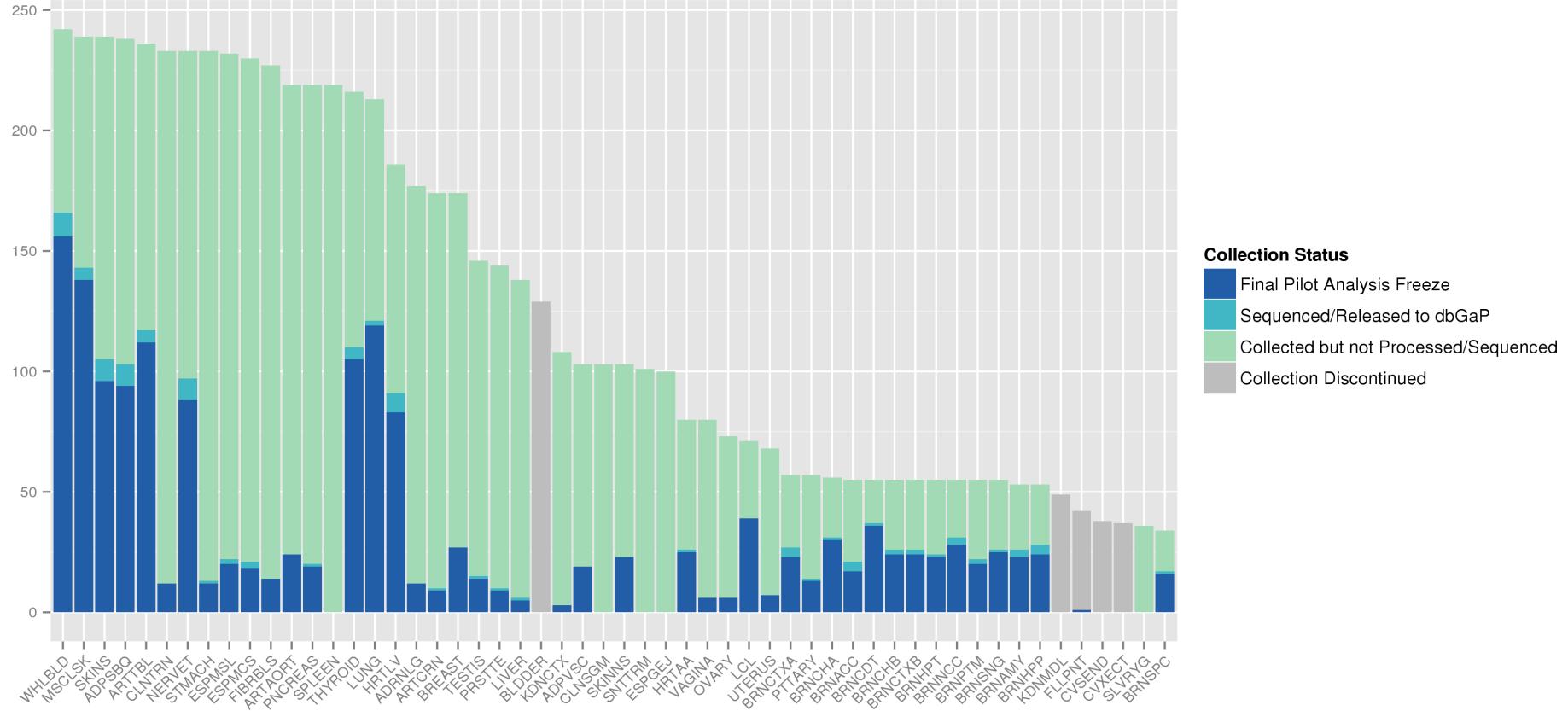
Pilot GTEx Consortium



Laboratory Data Analysis and Coordinating Center GTEx Workflow



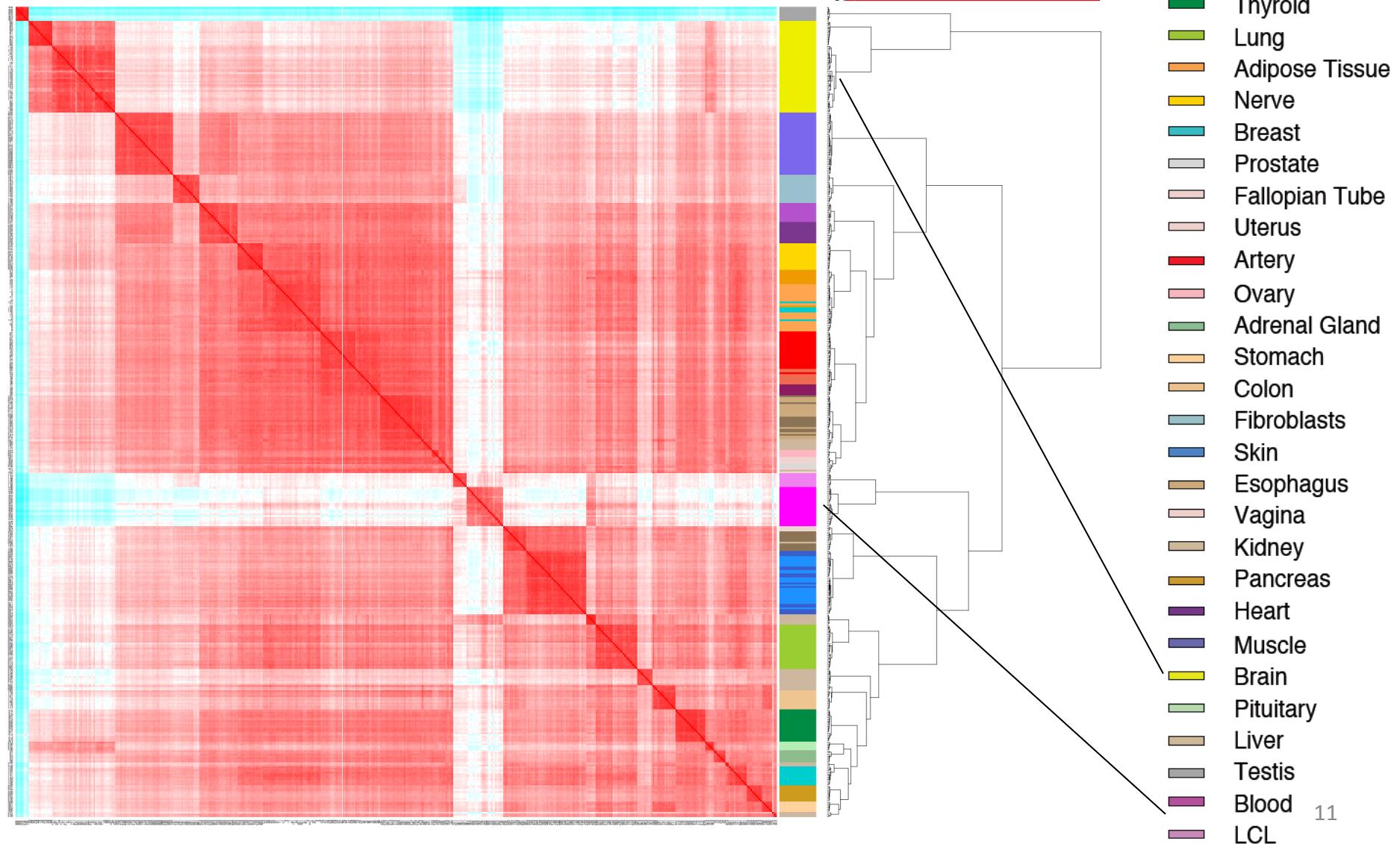
Pilot Phase Data



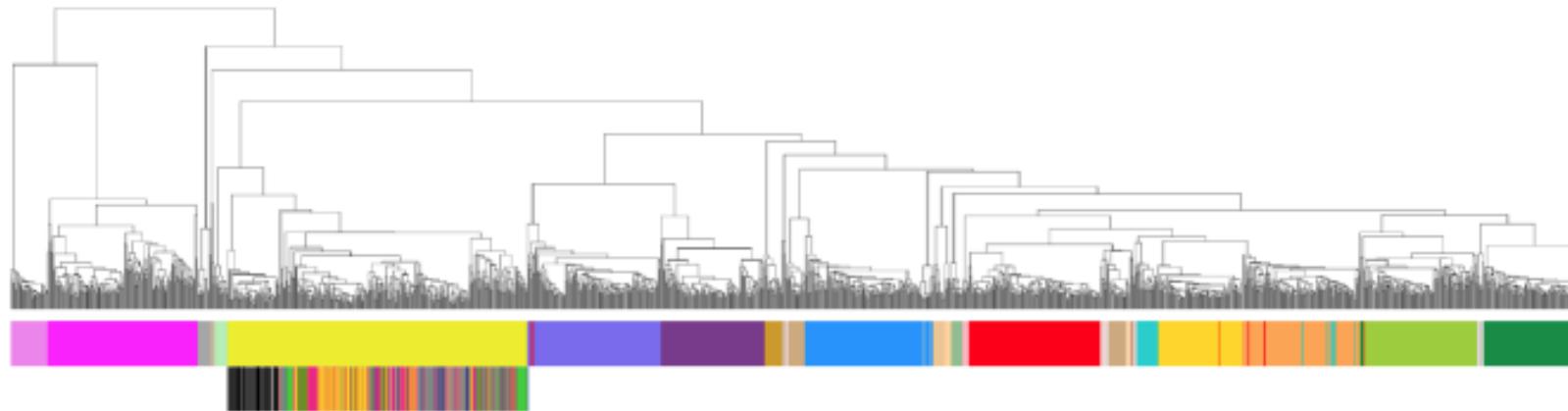
Pilot phase collected an average of ~ 28 tissue samples per donor from 54 distinct sites

Analysis Freeze = 175 Donors and 1,641 tissue RNA-seq samples

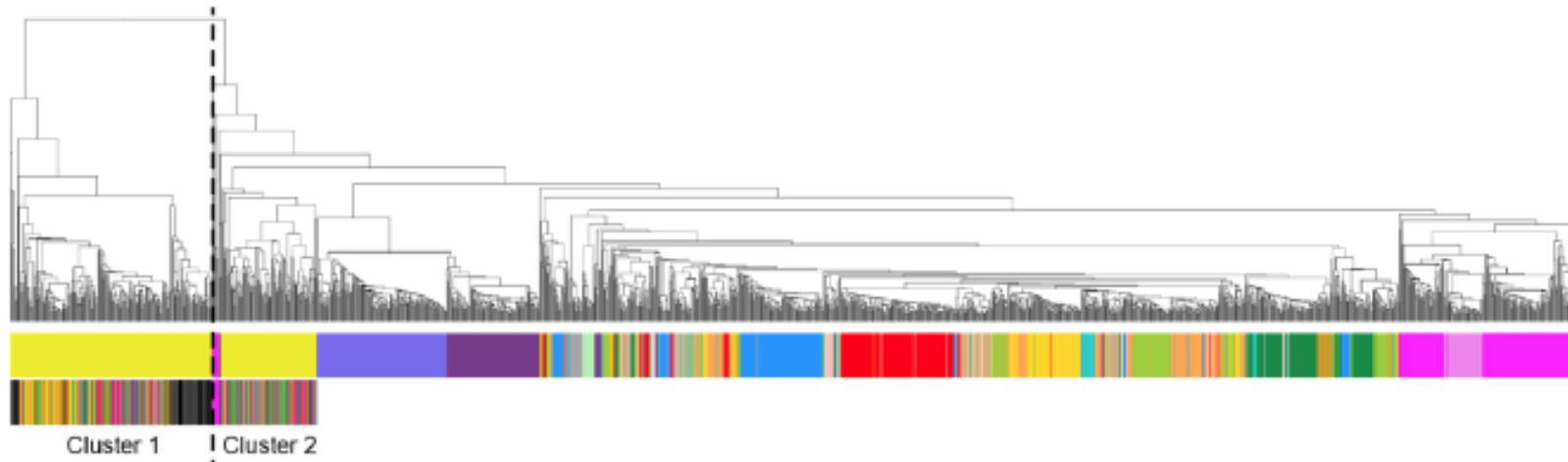
Clustering of Expression Data



A Gene expression clustering



B Exon (PSI) clustering



Brain subregions

Amygdala	Frontal cortex (BA9)
Anterior cingulate cortex (BA24)	Hippocampus
Caudate (basal ganglia)	Hypothalamus
Cerebellar hemisphere	Nucleus accumbens (basal ganglia)
Cerebellum	Putamen (basal ganglia)
Cortex	Spinal cord (cervical c.1)
	Substantia nigra

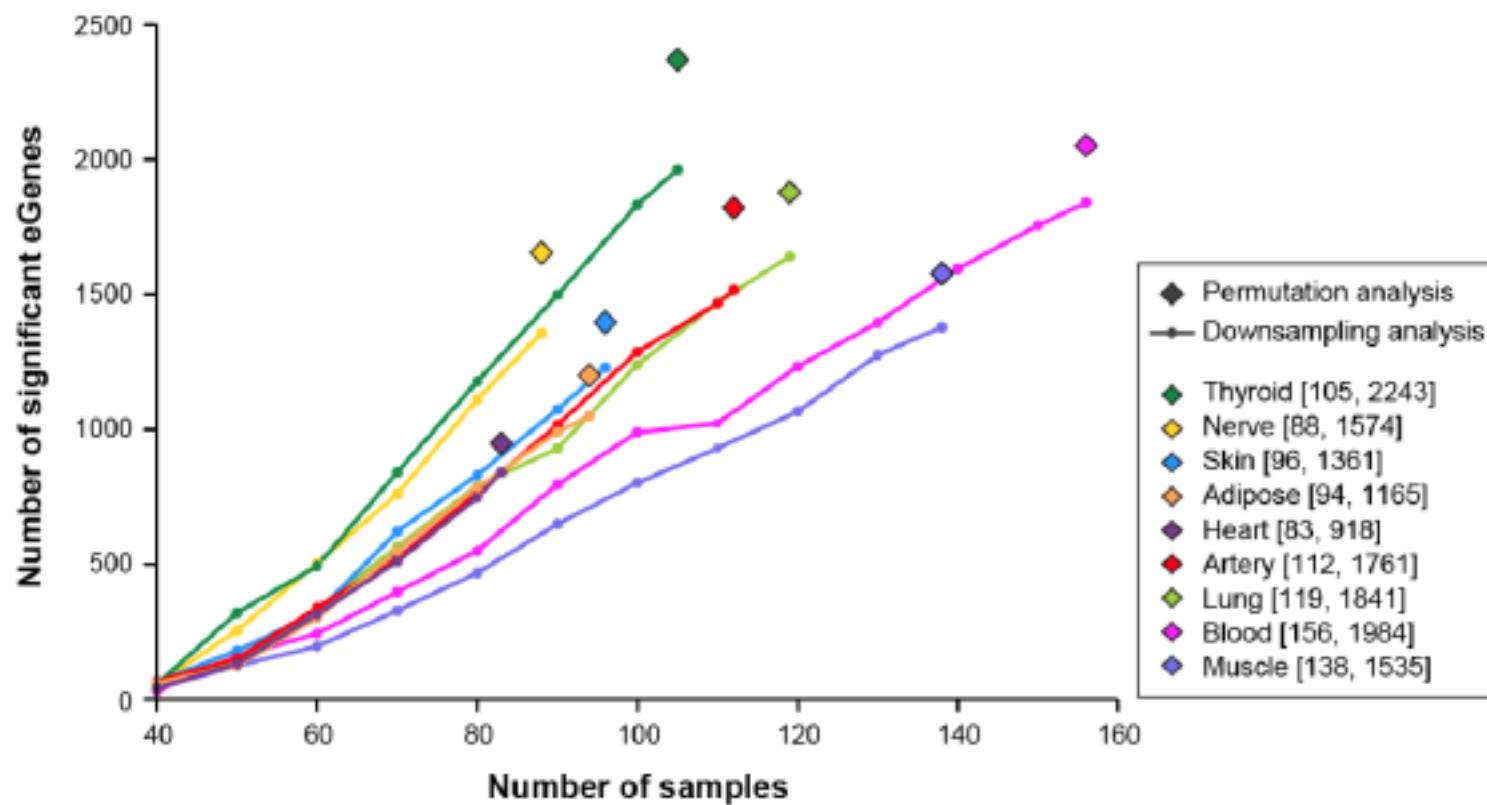
All tissues (main tissues in bold)

Adipose tissue	Colon	Lung	Prostate
Adrenal gland	Esophagus	Muscle	Reproductive organs
Artery	Fibroblasts	Nerve	Skin
Blood	Heart	Ovary	Stomach
Brain	Kidney / Liver	Pancreas	Testis
Breast	LCL	Pituitary	Thyroid

eQTL methodology

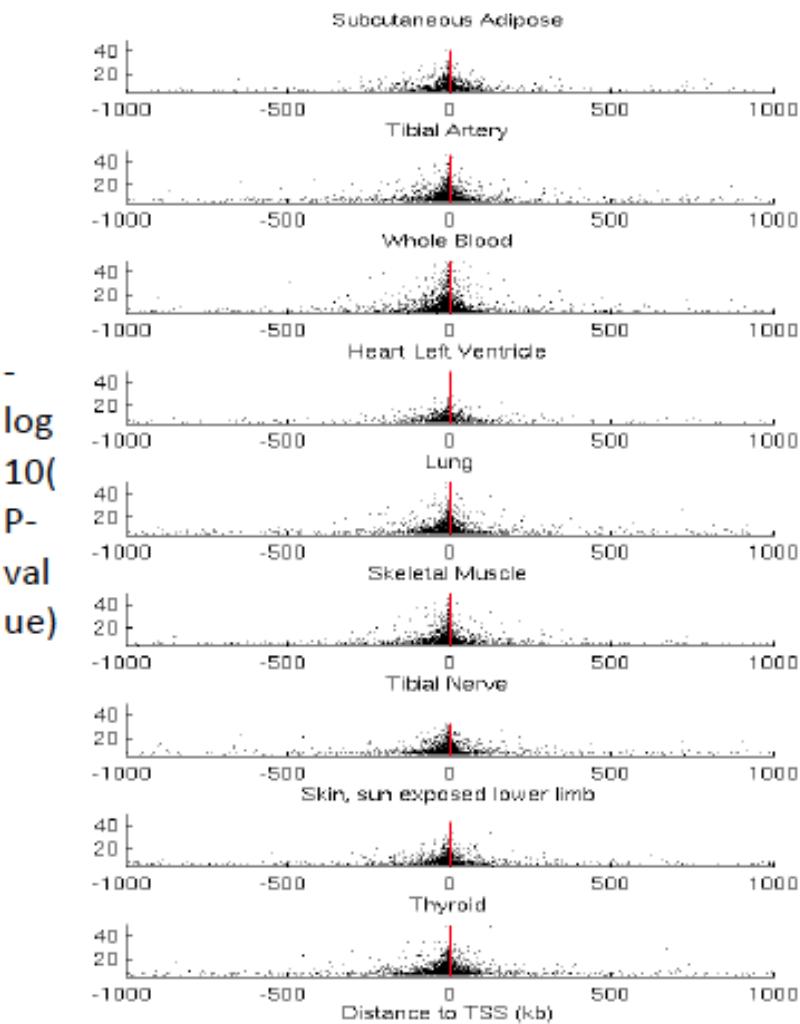
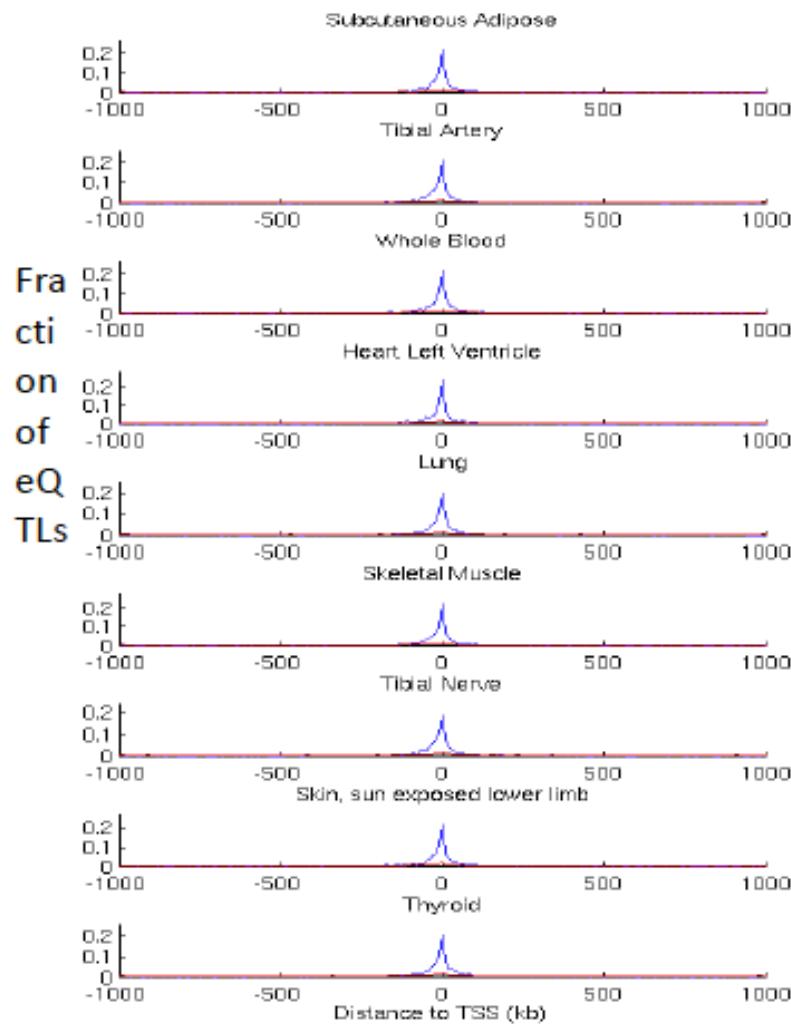
- 1 Mb (or 100Kb from TSS)
- PEER correction to remove undesirable effects (batch, other experimental etc)
- Matrix eQTL with permutations to discover eQTLs
(now we use FastQTL developed by Olivier Delaneu)

eQTL discovery



A.

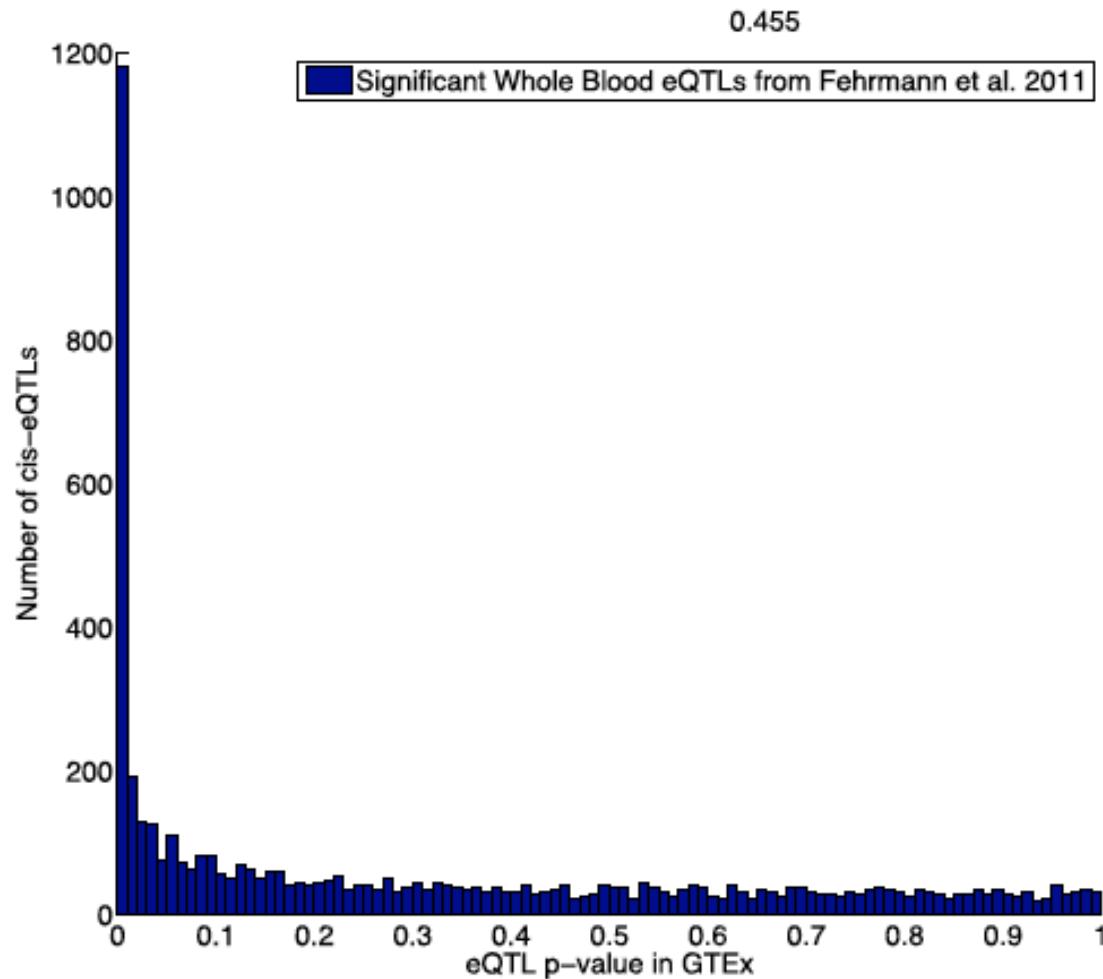
eQTL properties



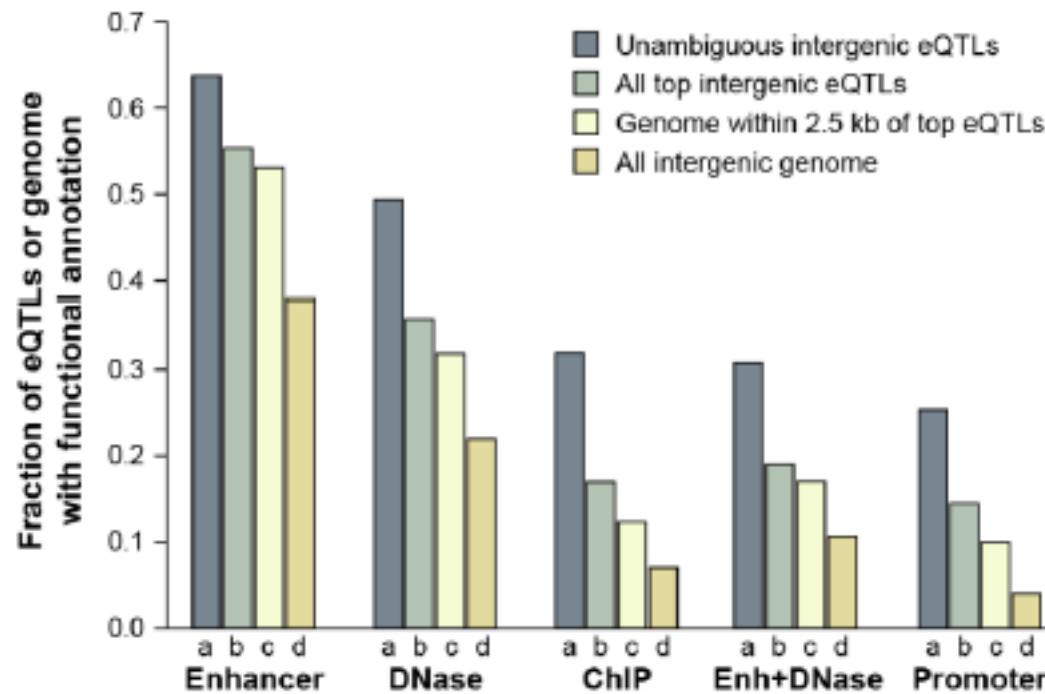
- Significant best eQTLs per gene, FDR<5%
- Non-significant best eQTLs per gene, FDR>5%
- All SNP-gene pairs

eQTL replication

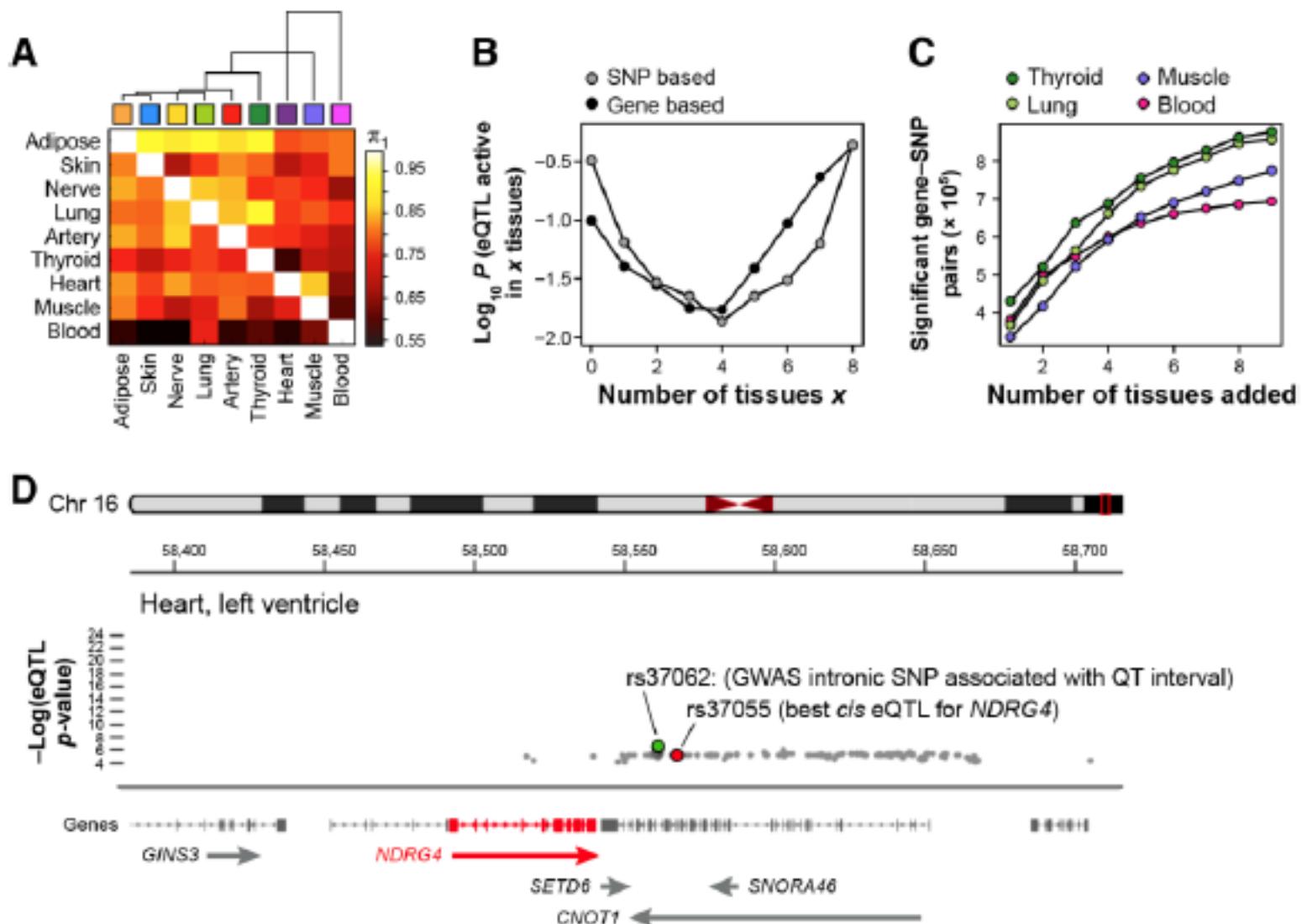
A.



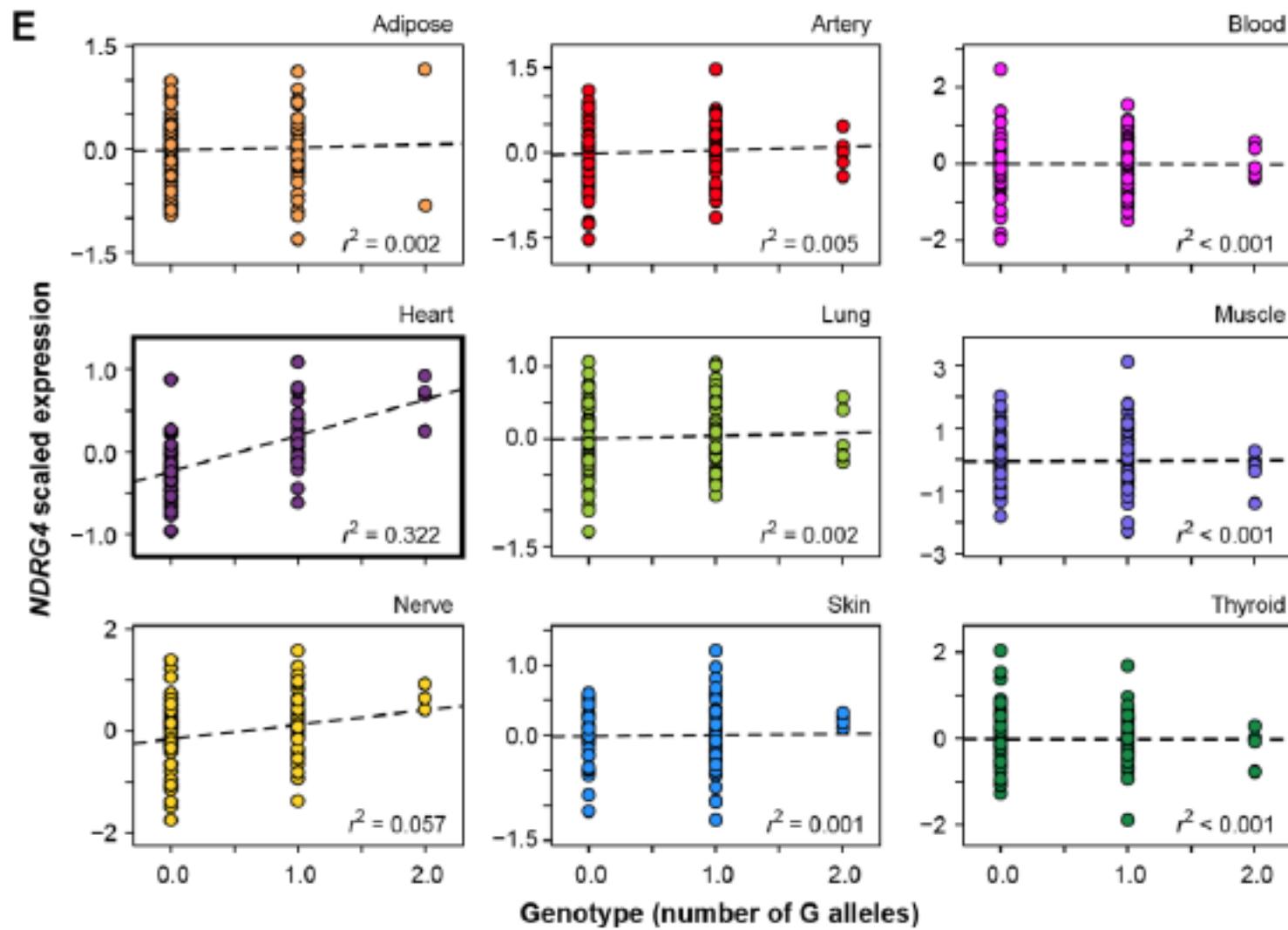
eQTL functional enrichment



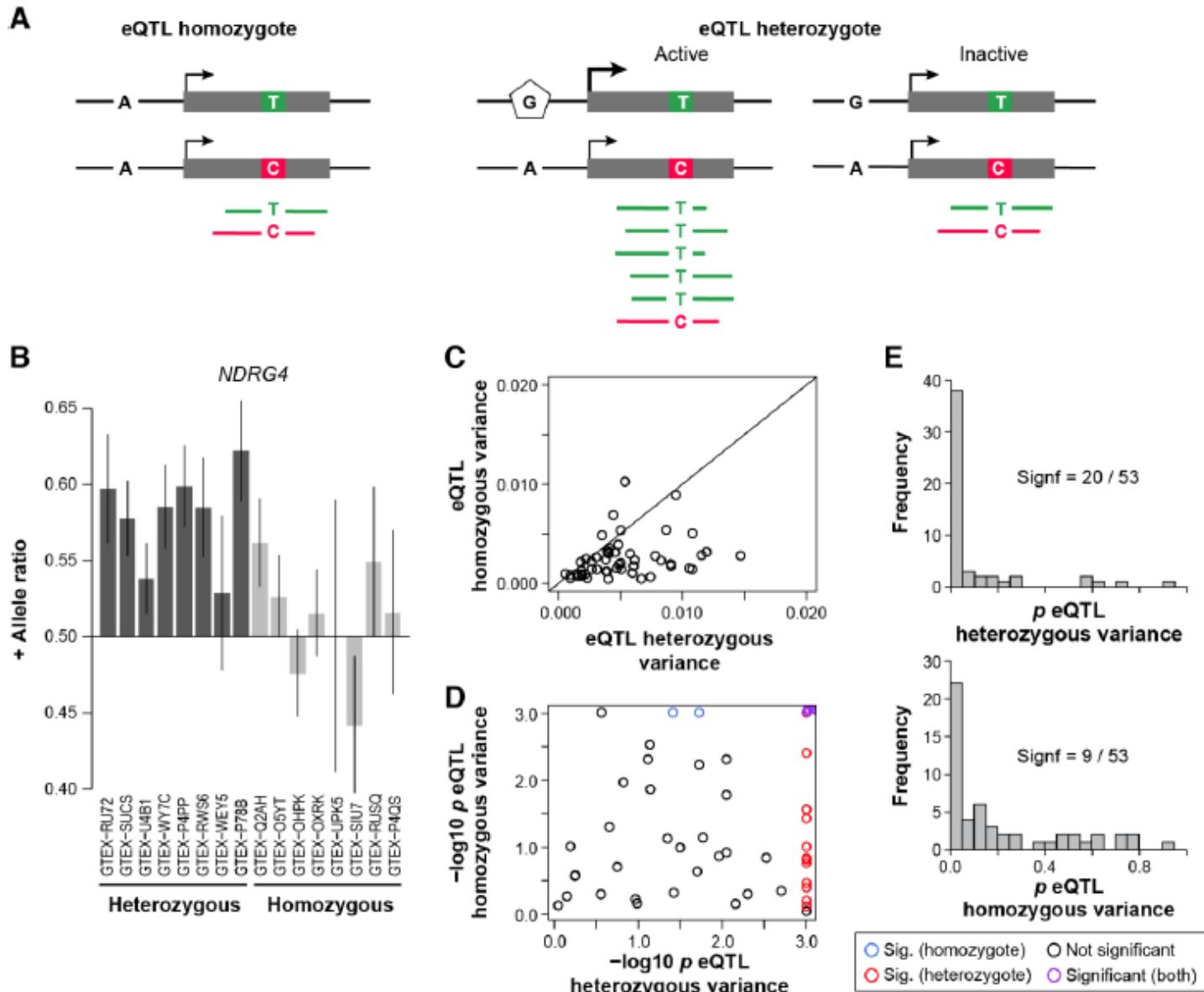
Multi-tissue eQTL discovery



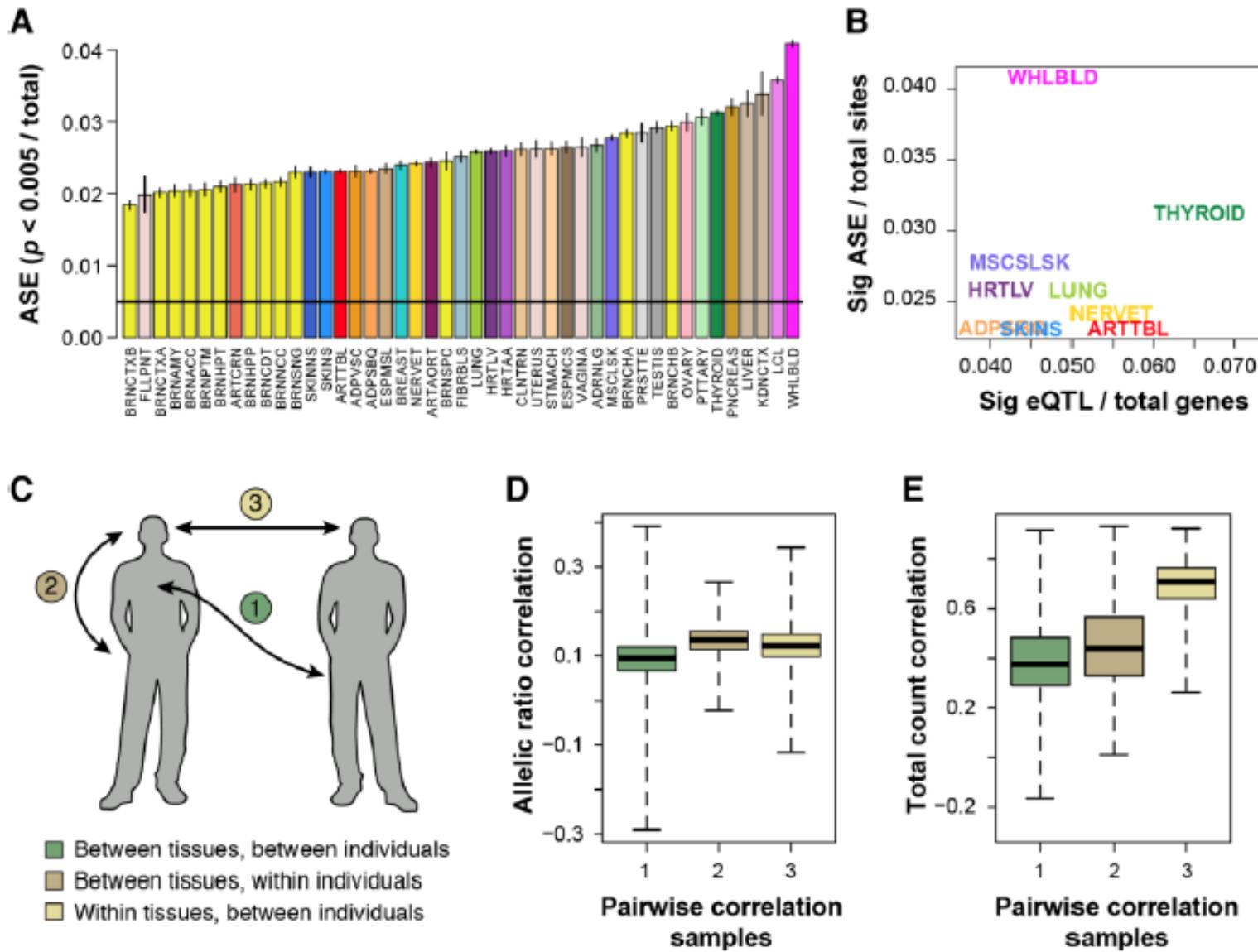
Multi-tissue eQTL discovery



Allele Specific Expression and eQTLs

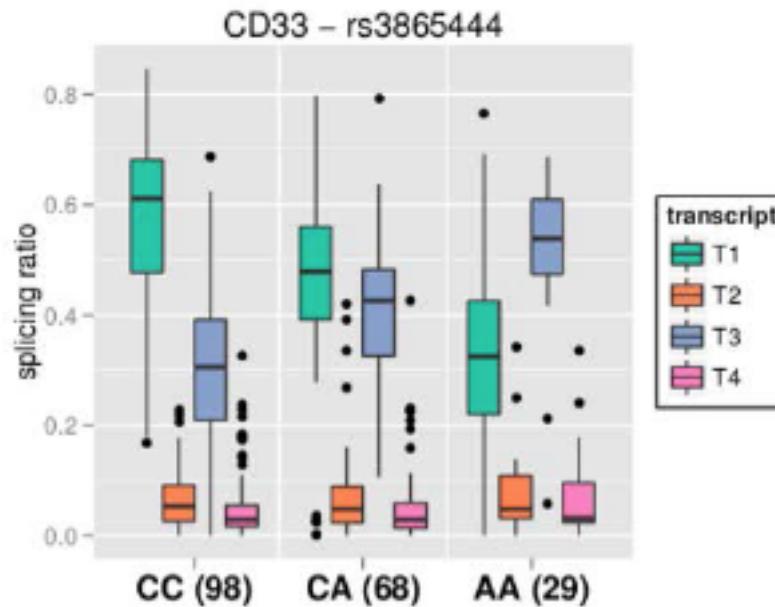


Allele Specific Expression

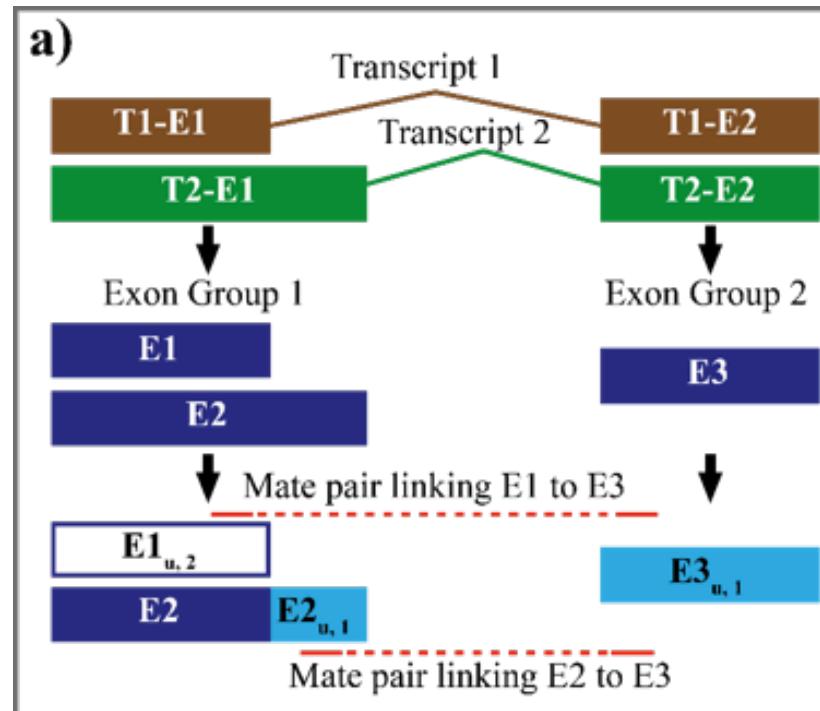


Alternative splicing QTLs

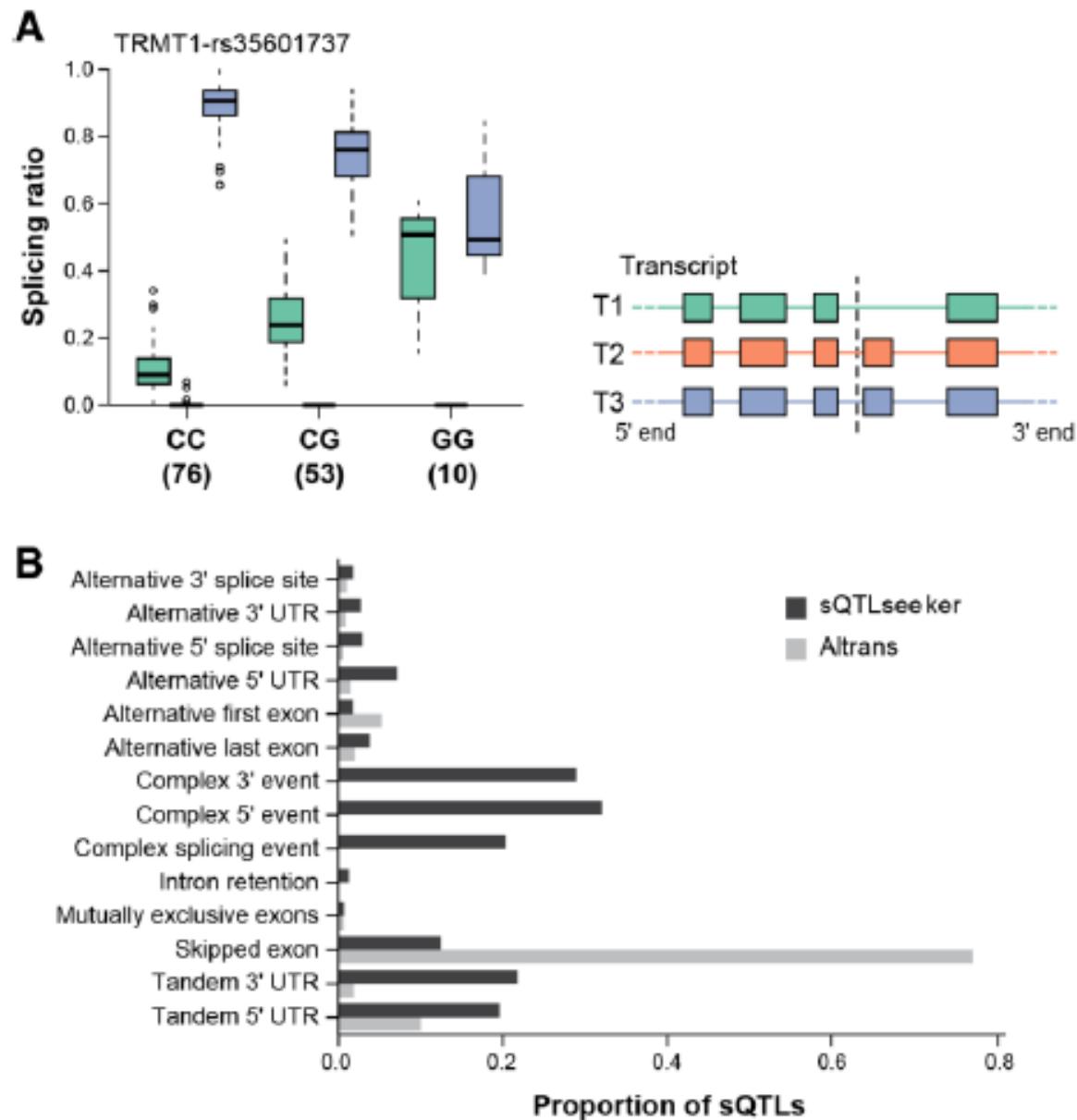
sQTL seeker



Altrans

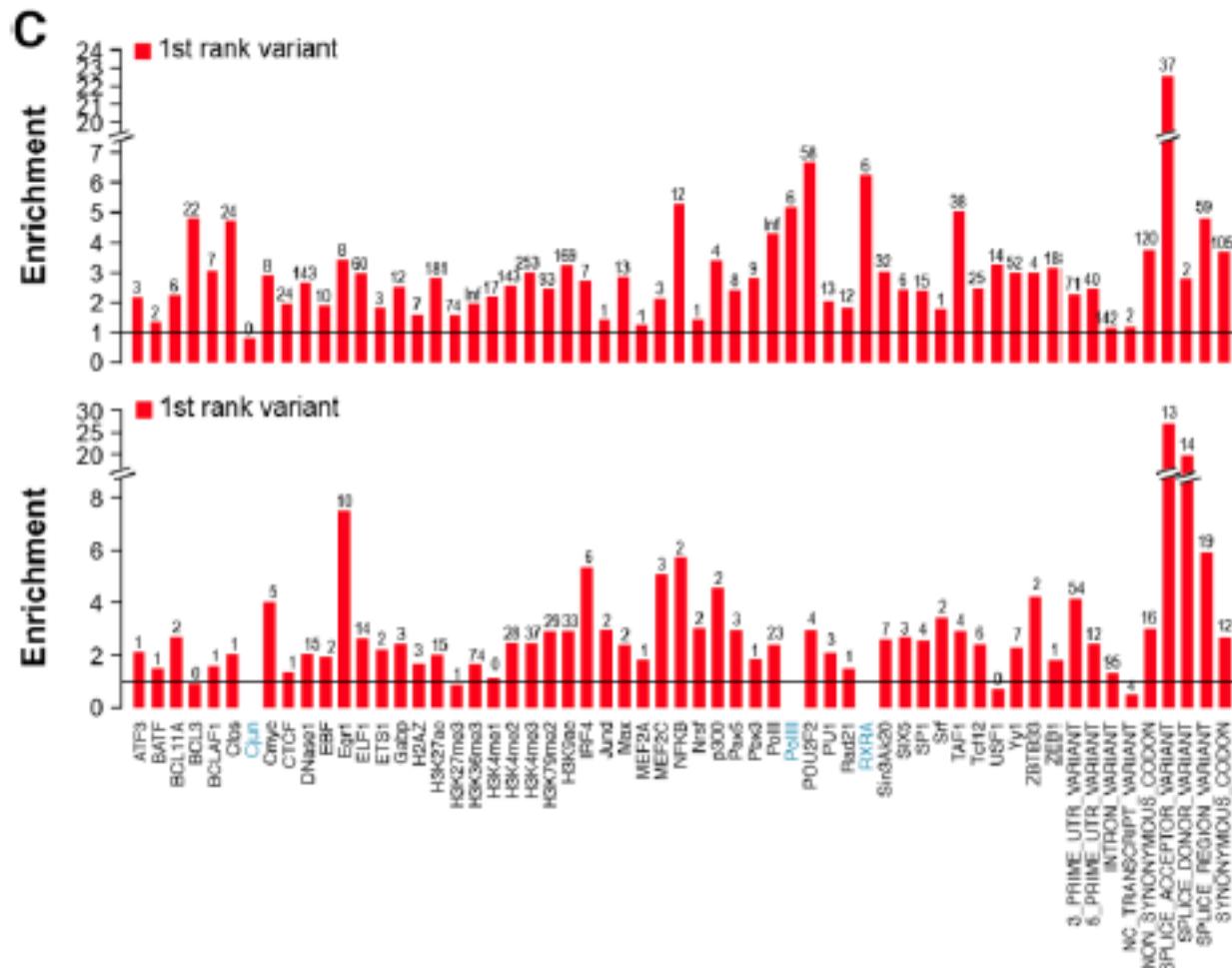


Alternative splicing QTLs

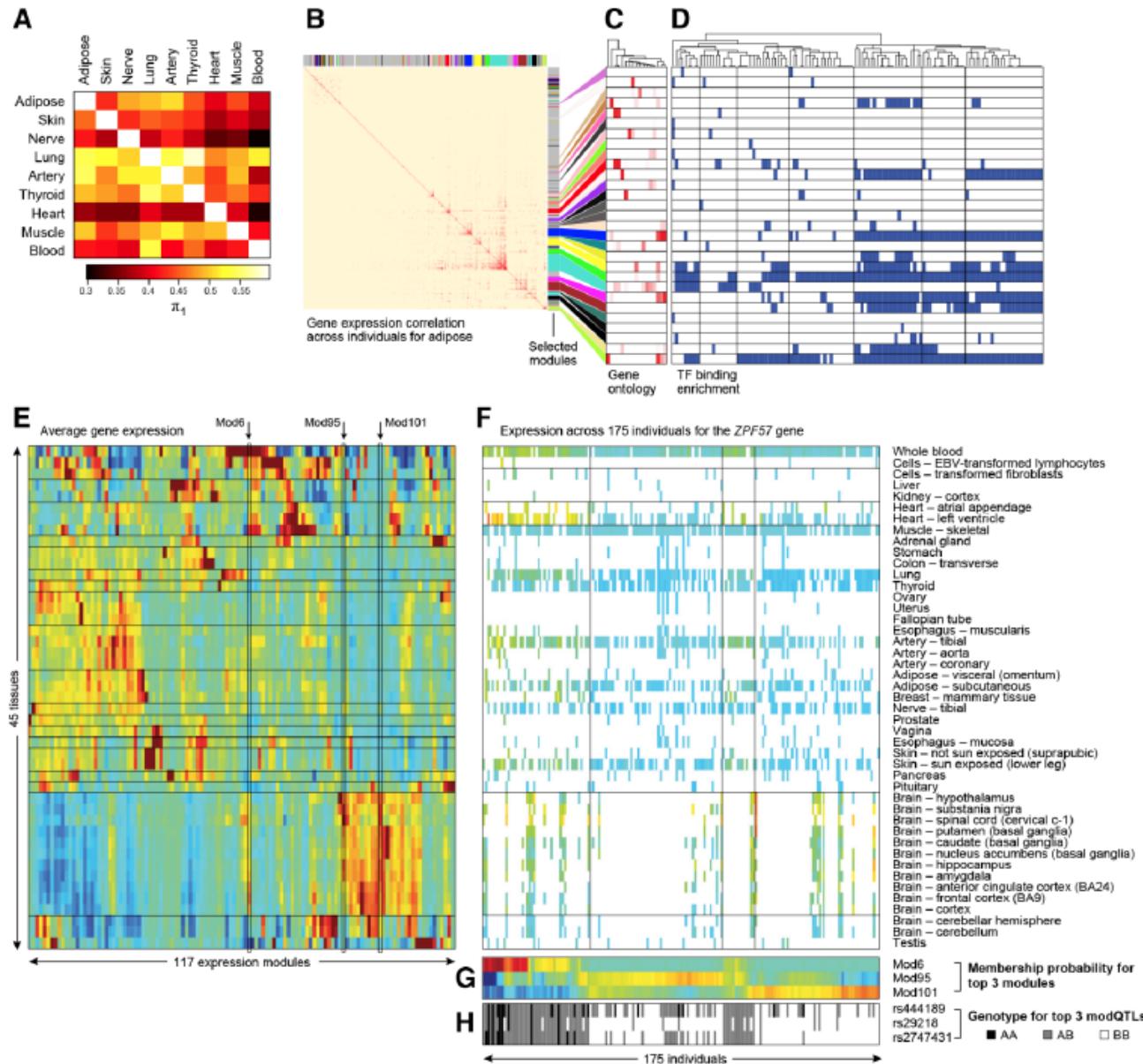


Alternative splicing QTLs

Functional element enrichment

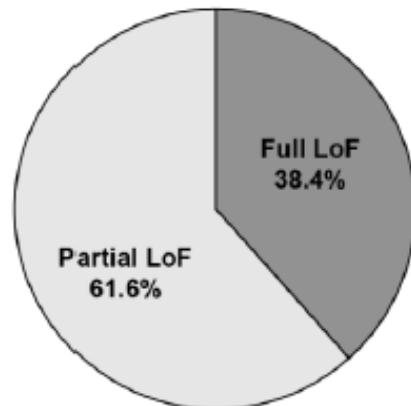


Network module QTLs

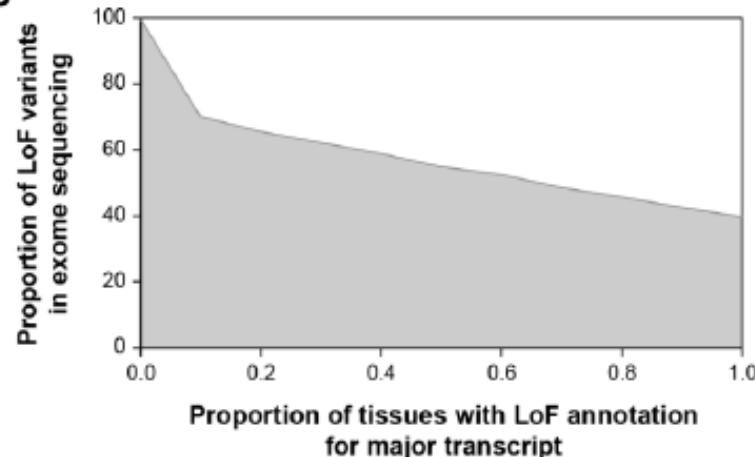


Truncating Variants in the transcriptome

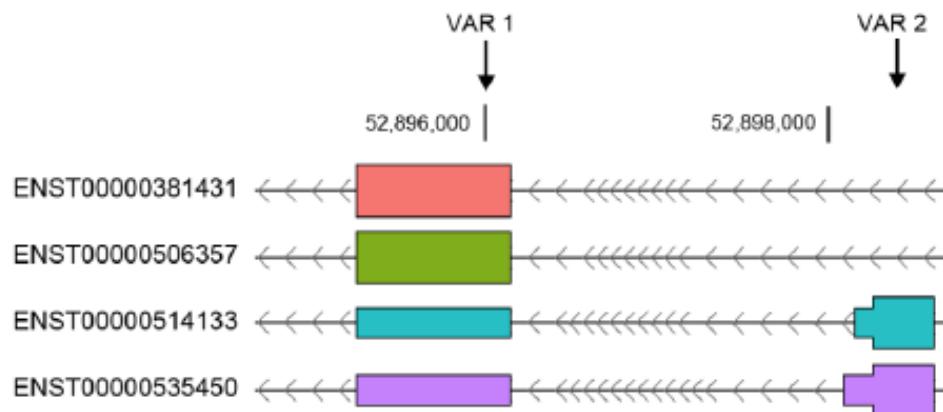
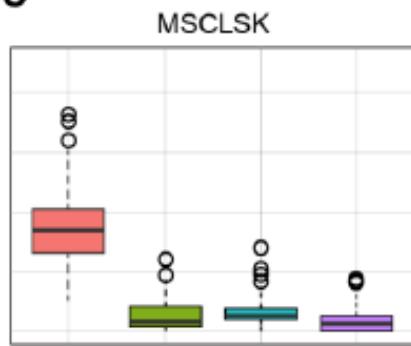
A



B



C



In silico

Transcript ← RNA-Seq*

Stop gain

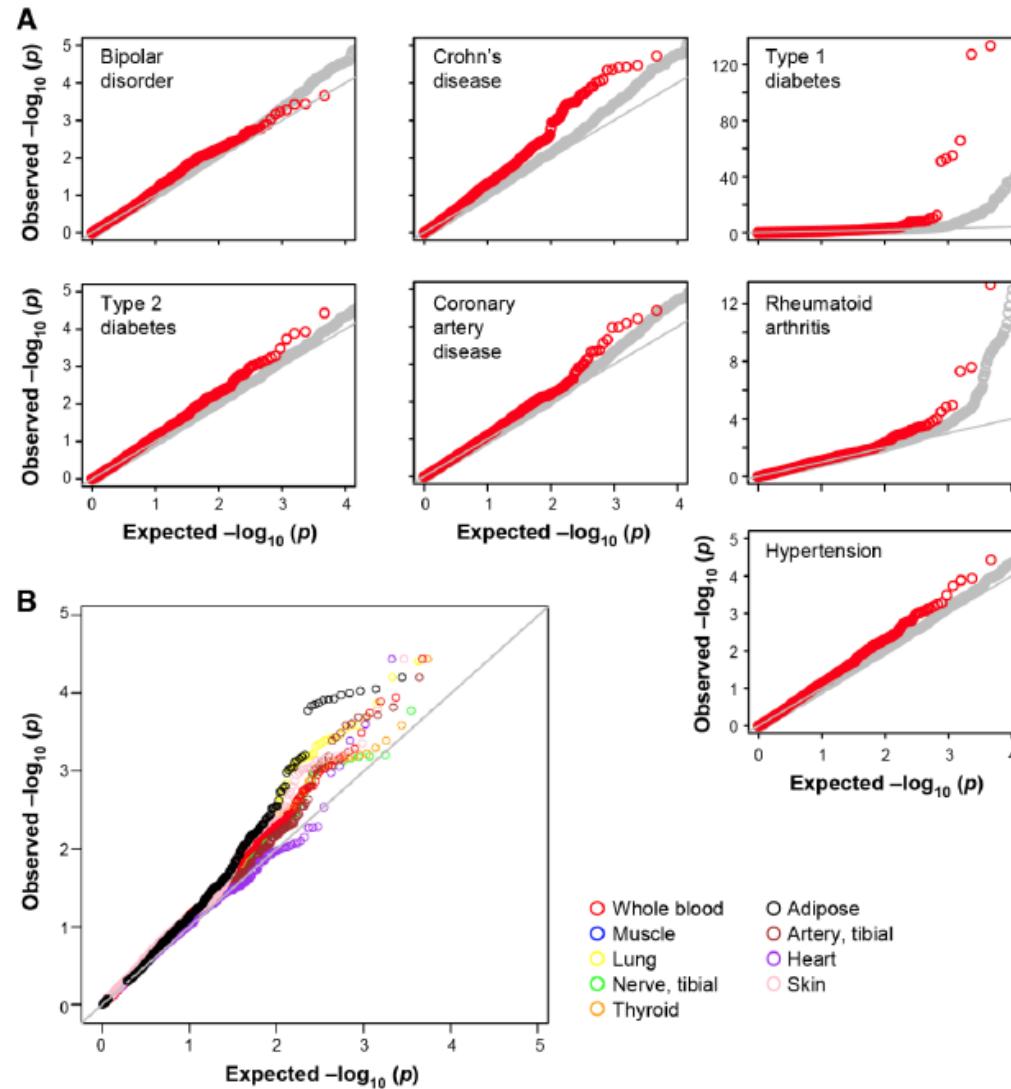
Stop gain

Stop gain

Intronic

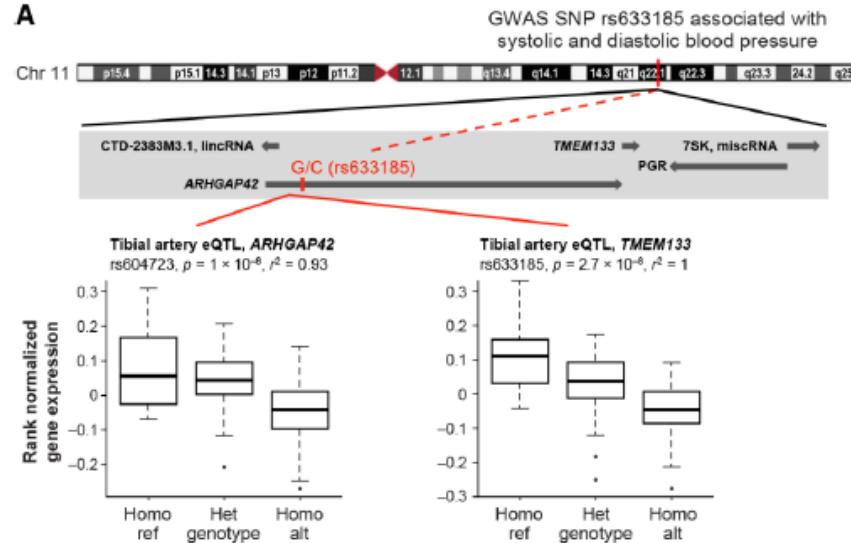
* DNA variant annotation informed by tissue RNA-Seq quantification.

Link eQTLs to GWAS

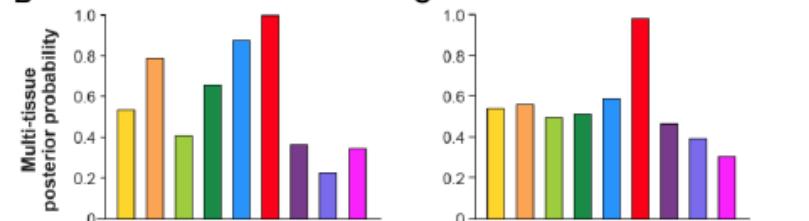


Link eQTLs to GWAS

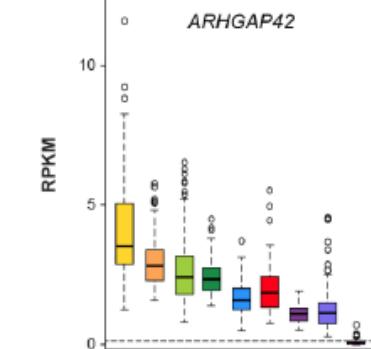
A



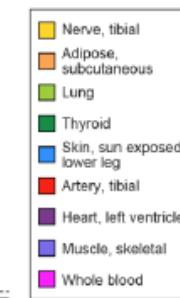
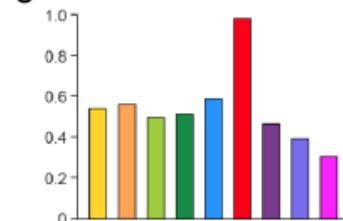
B



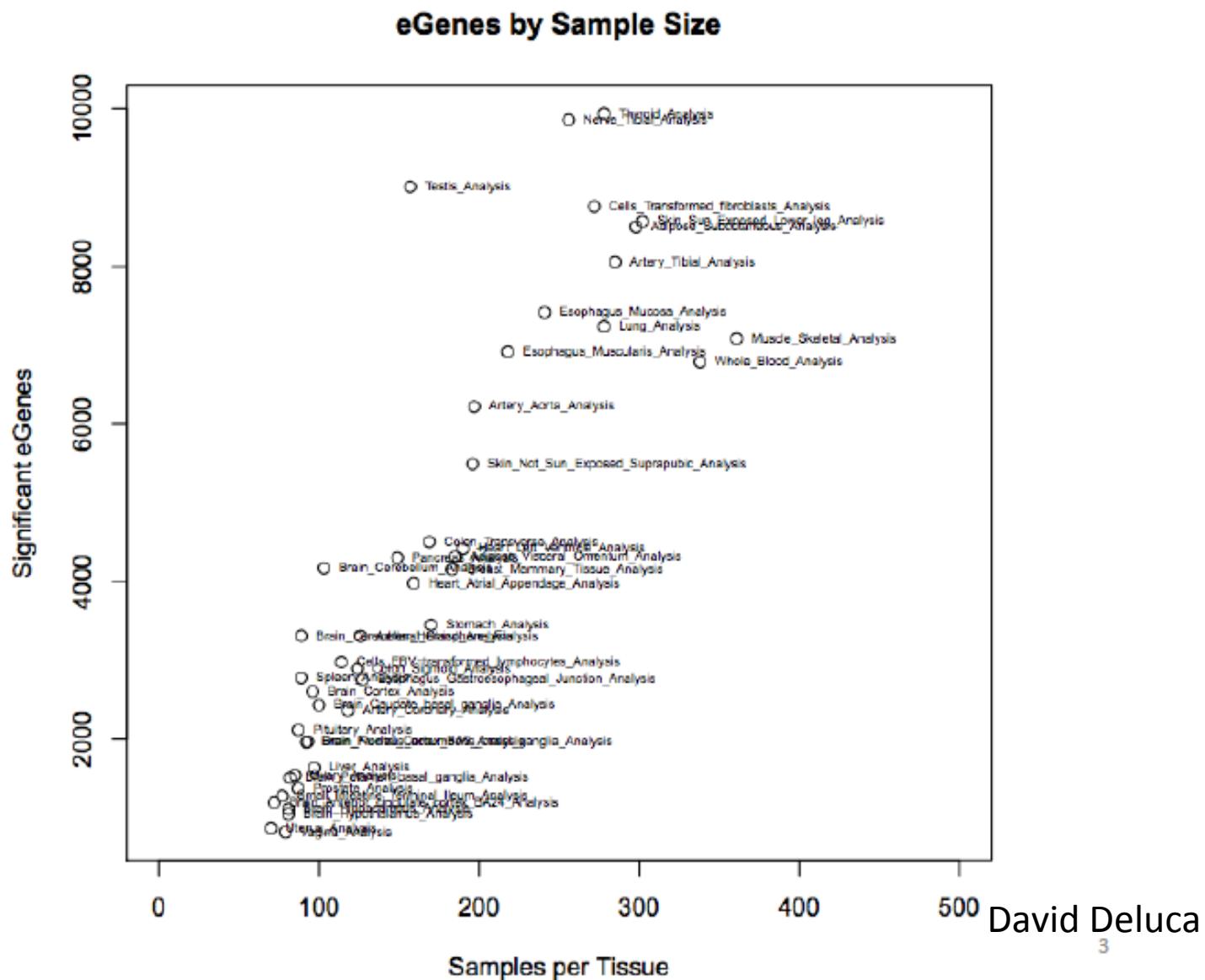
RPKM



C



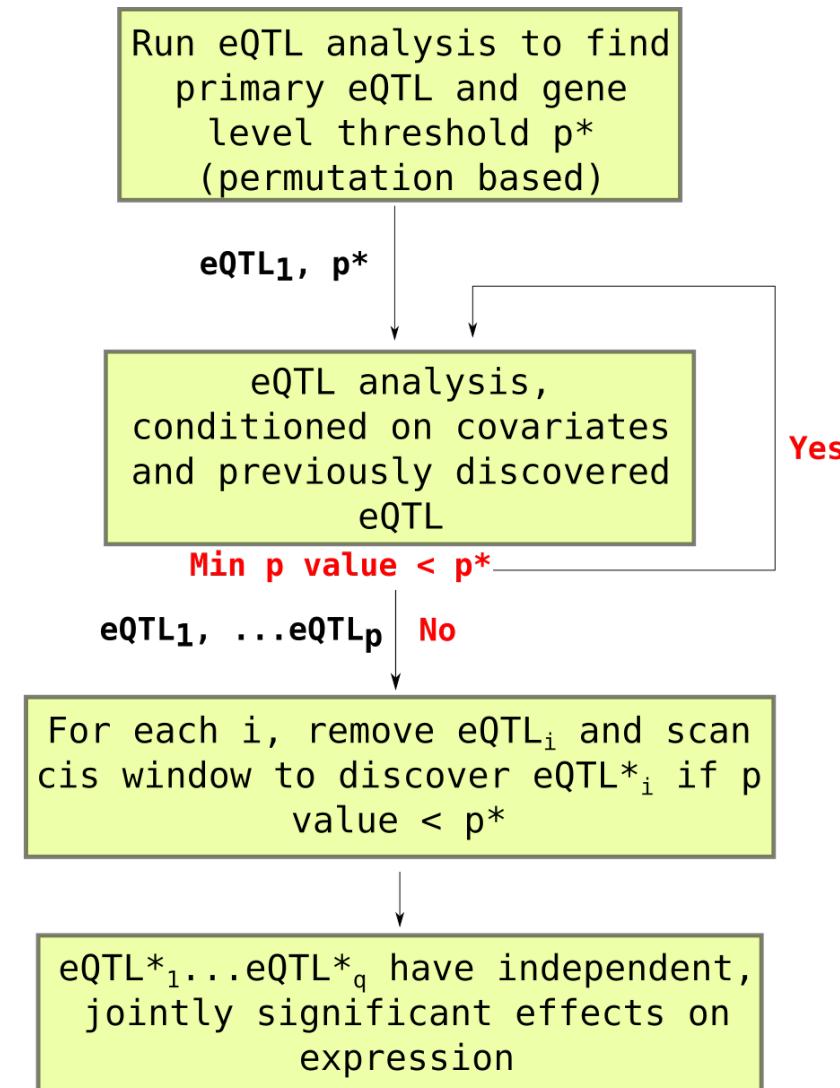
GTEx eQTLs in 44 tissues



Multiple eQTLs per gene

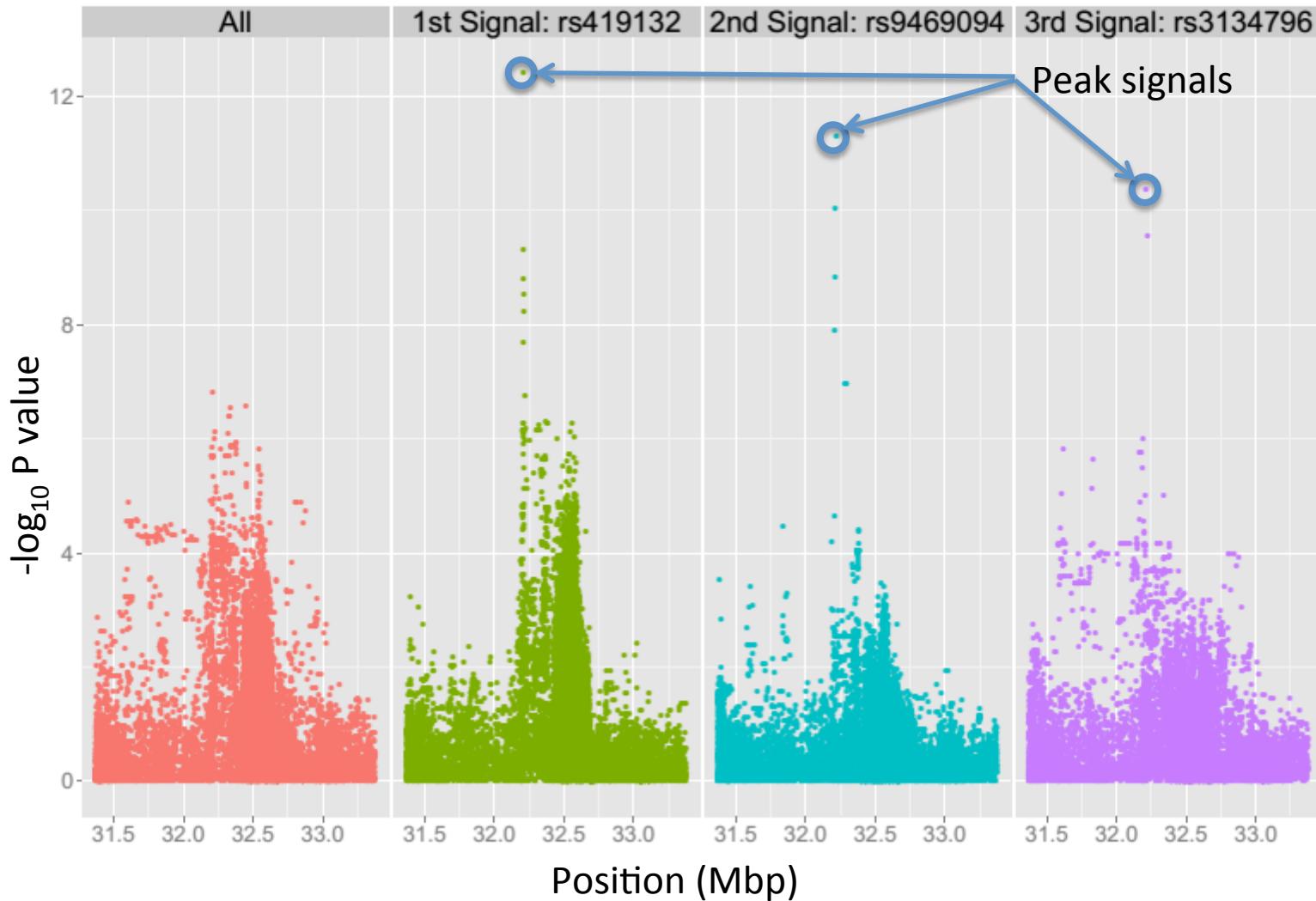
Forward Stage

Backward stage

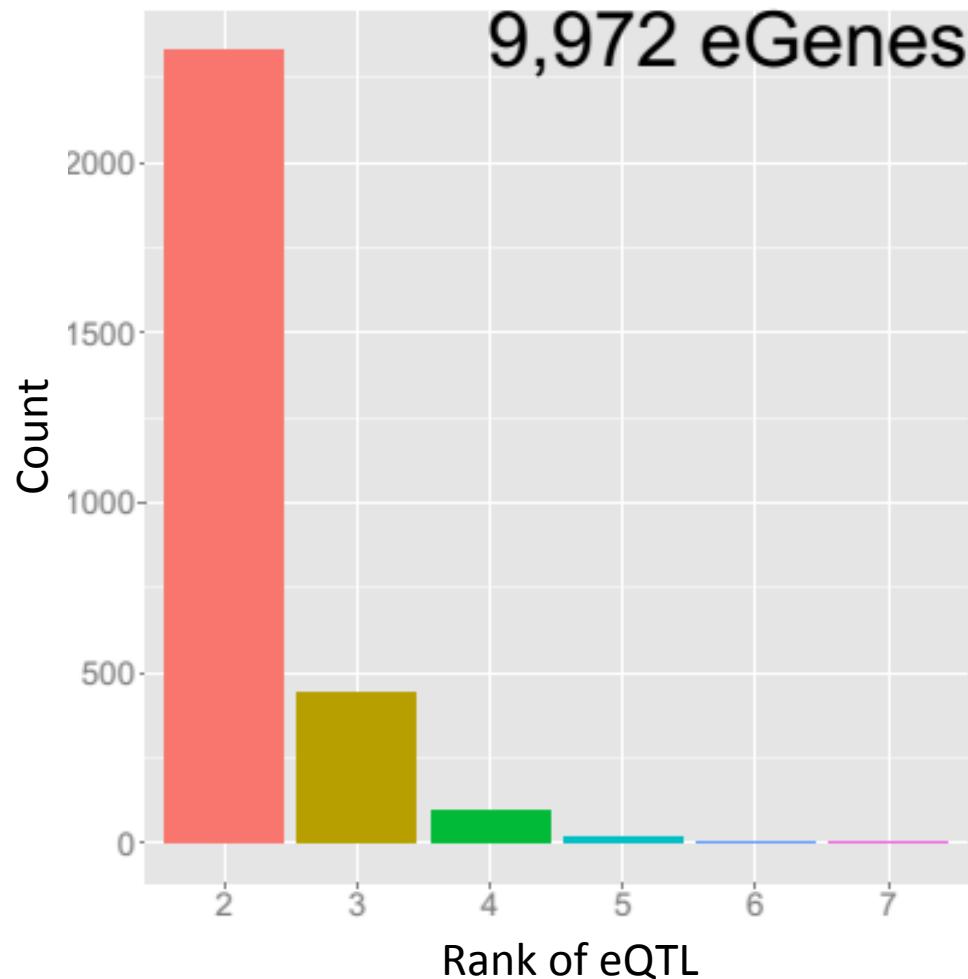


Example

We discovered 3 independent eQTLs for *BTNL2*, in the MHC region

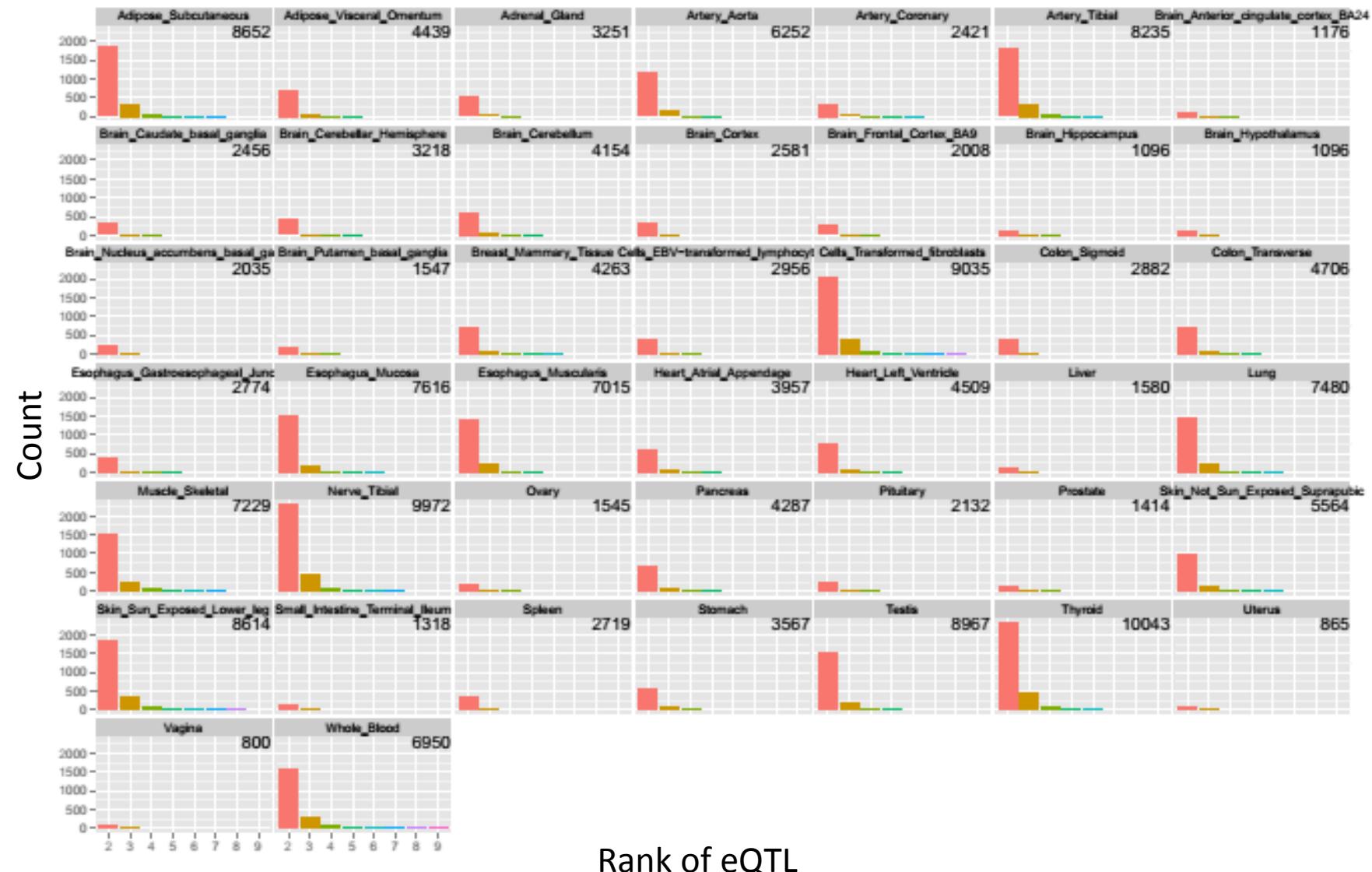


Number of additional eQTLs discovered in Nerve Tibial tissue



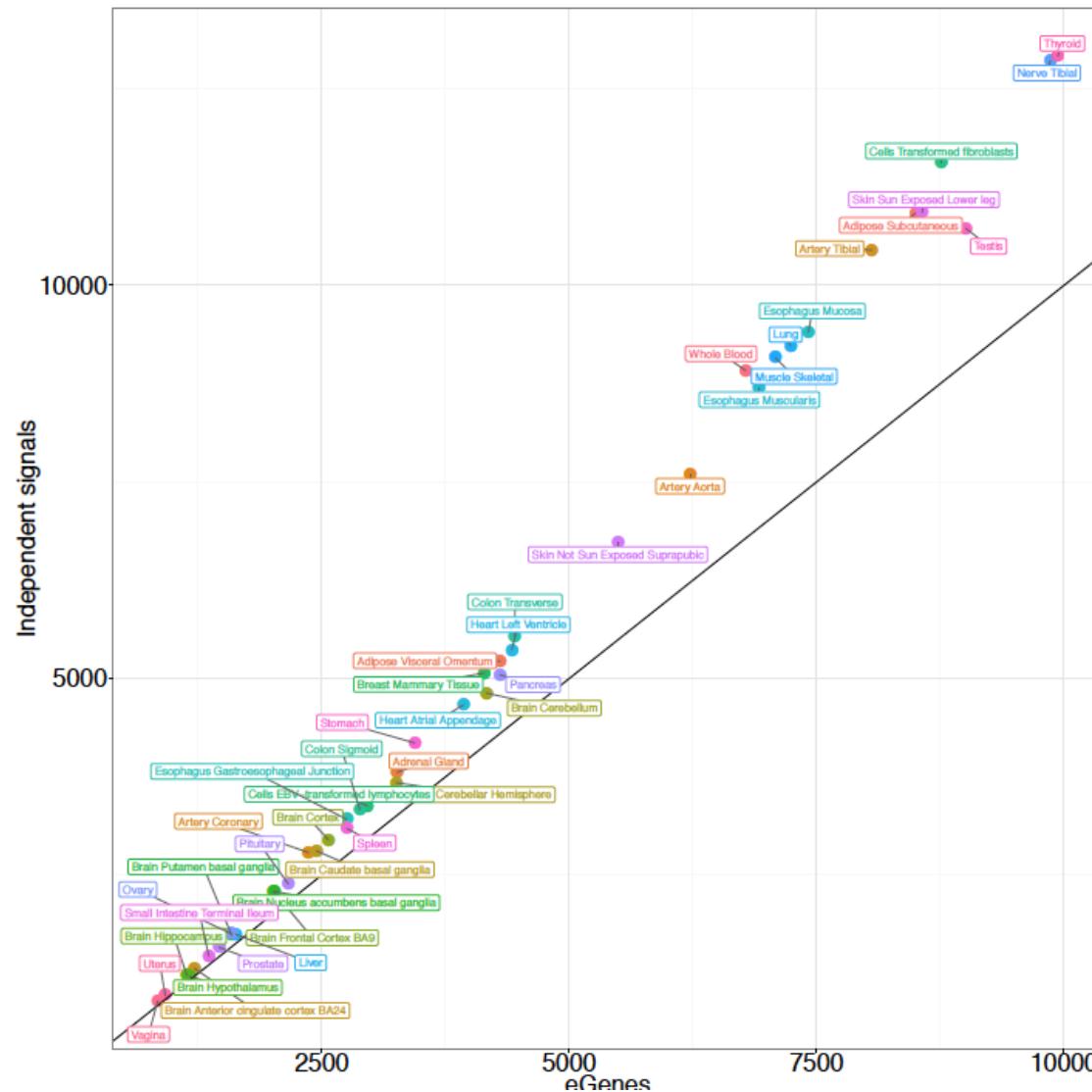
2284 Secondary signals
in total

Number of additional eQTLs discovered in all tissues

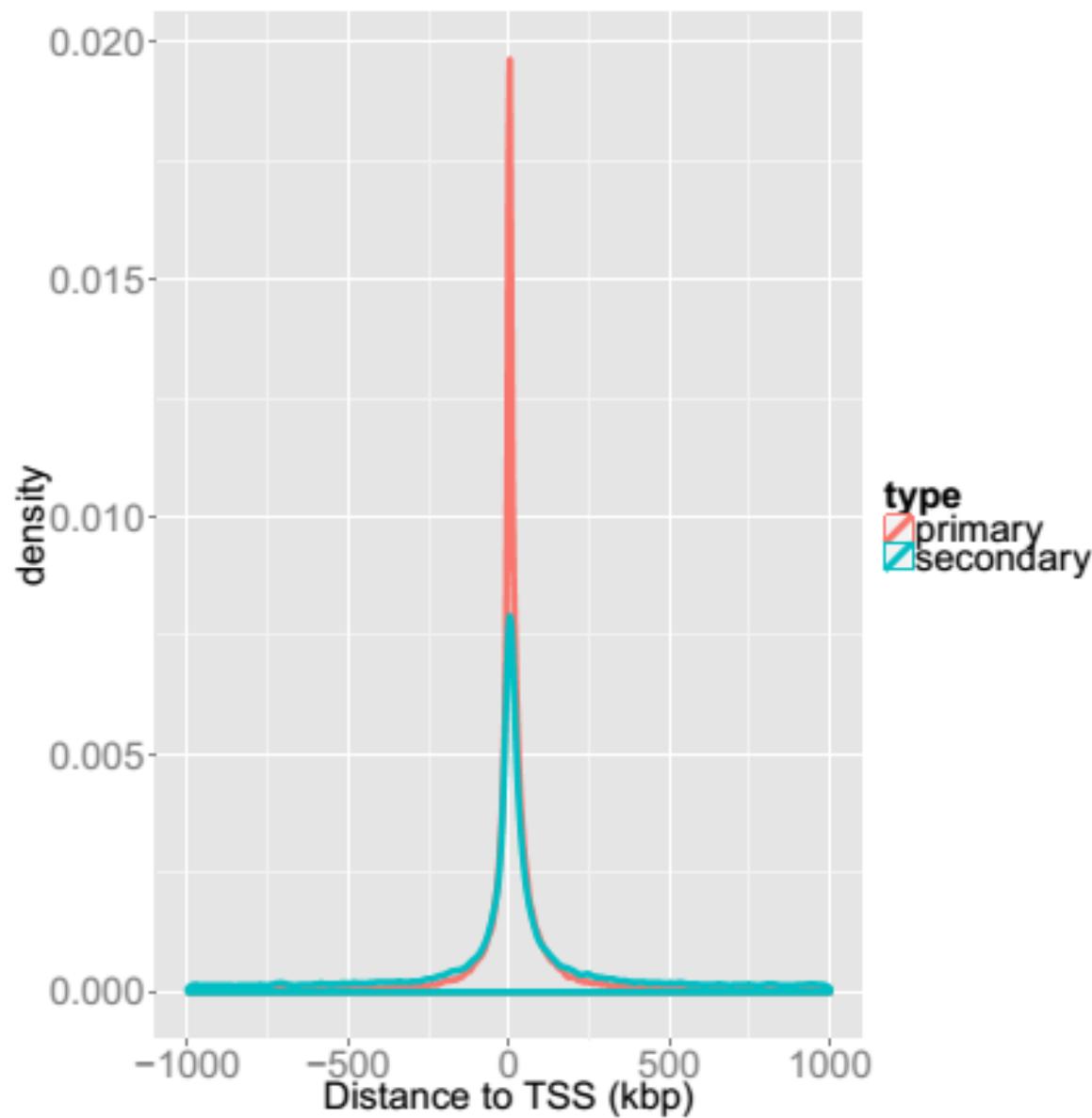


Rank of eQTL

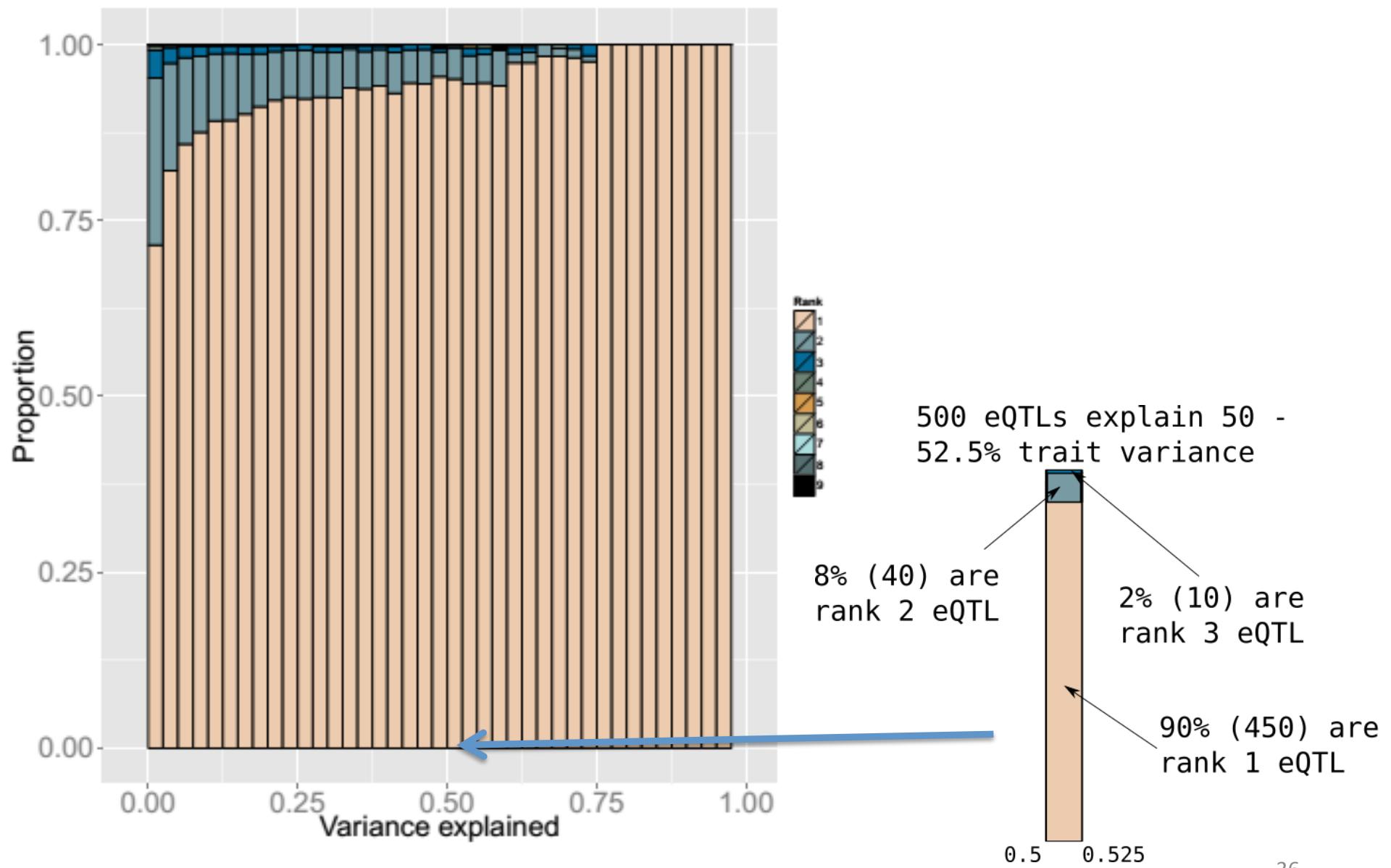
Additional signals discovered is a simple function of power



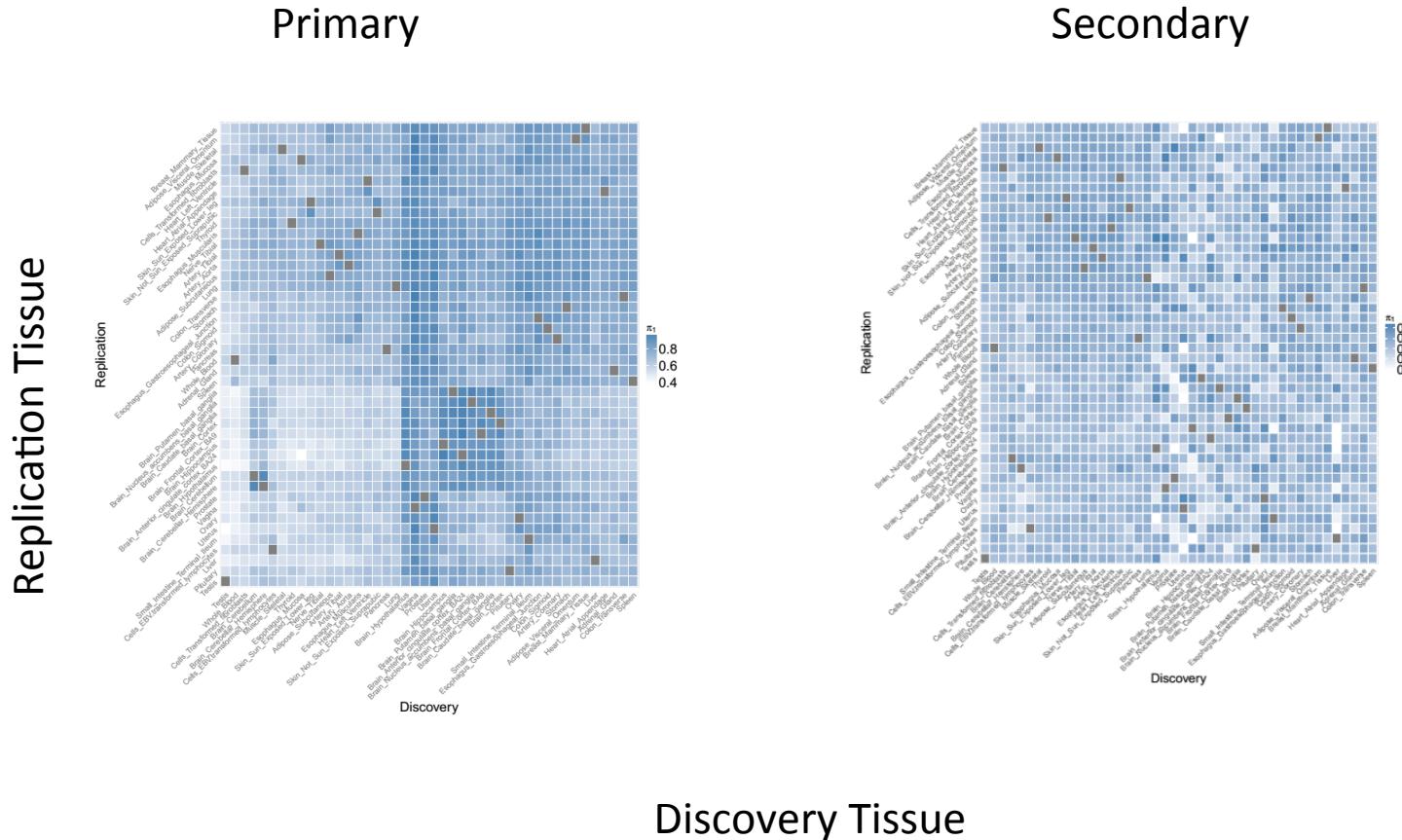
Secondary eQTL are less enriched around TSS



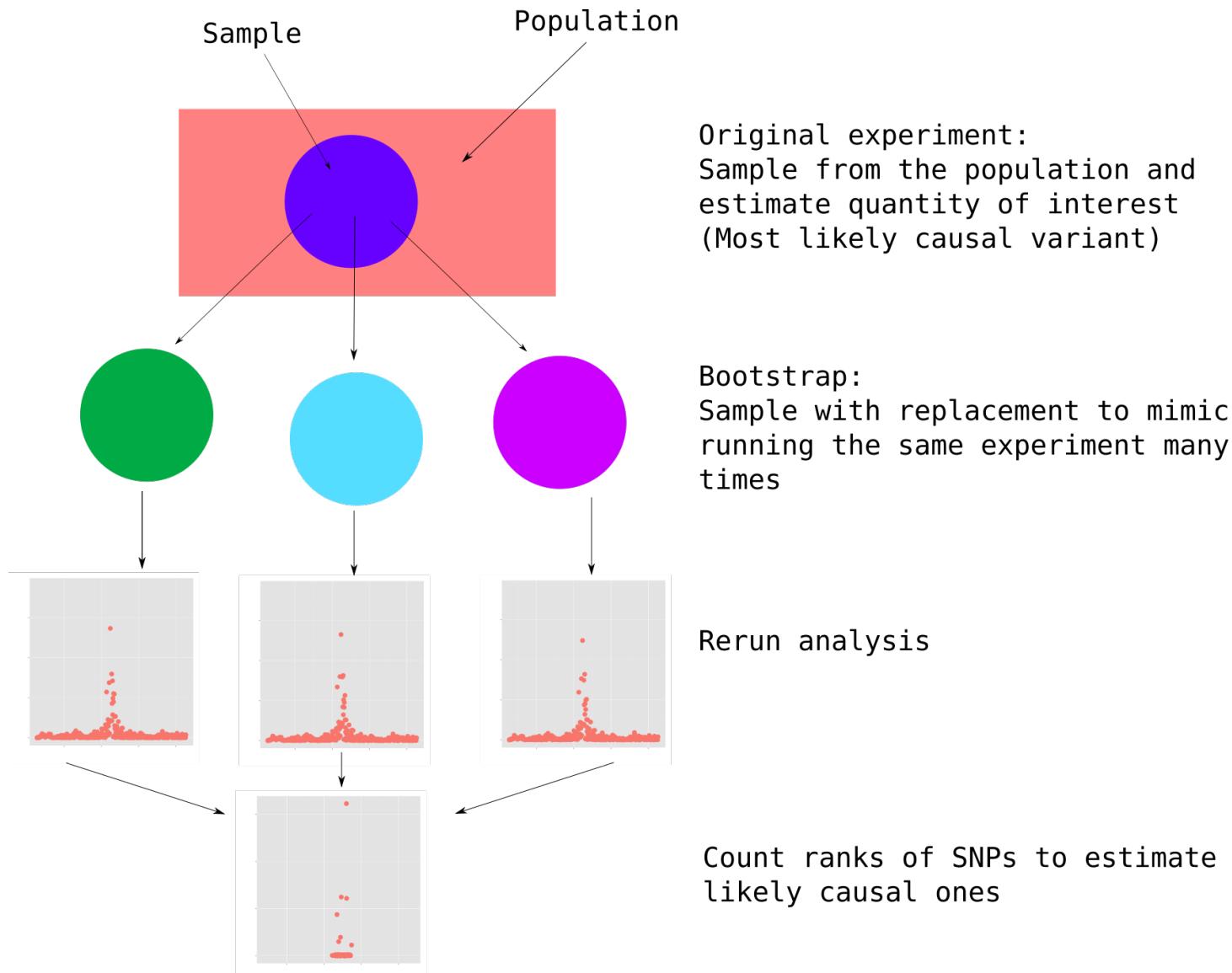
Variance explained by rank of eQTL



Replication in other tissues



Mapping causal variants using resampling



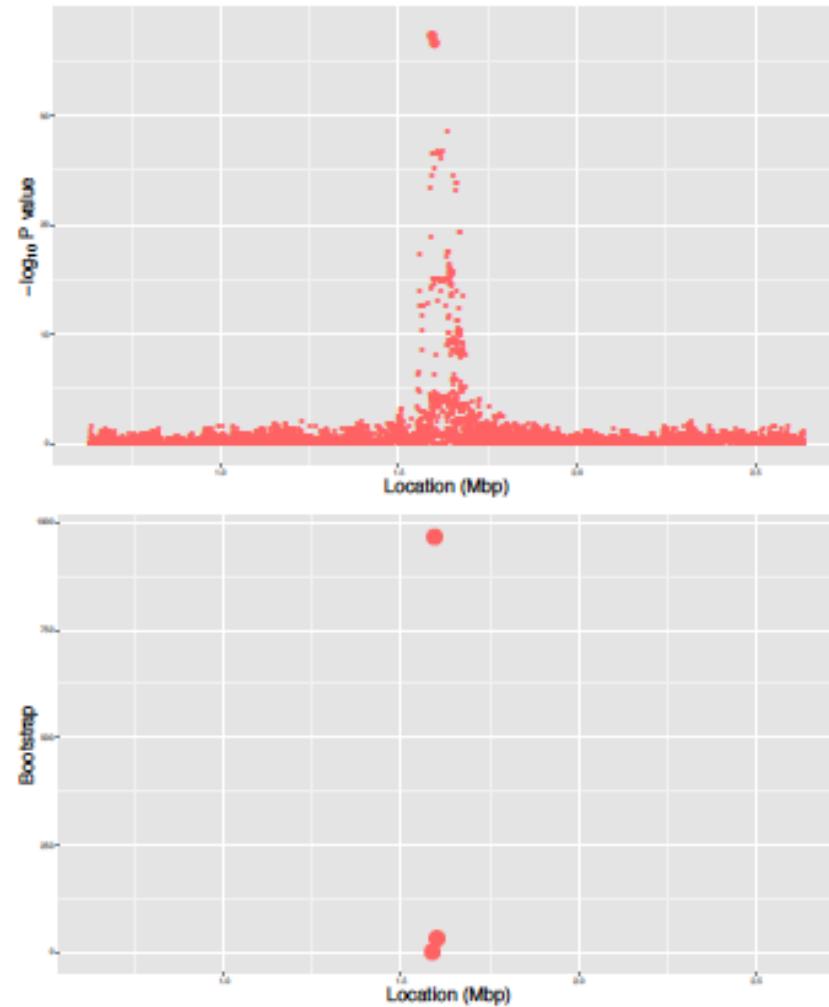
Applied to GTEx Data

- Bootstrap likelihoods are estimated as:

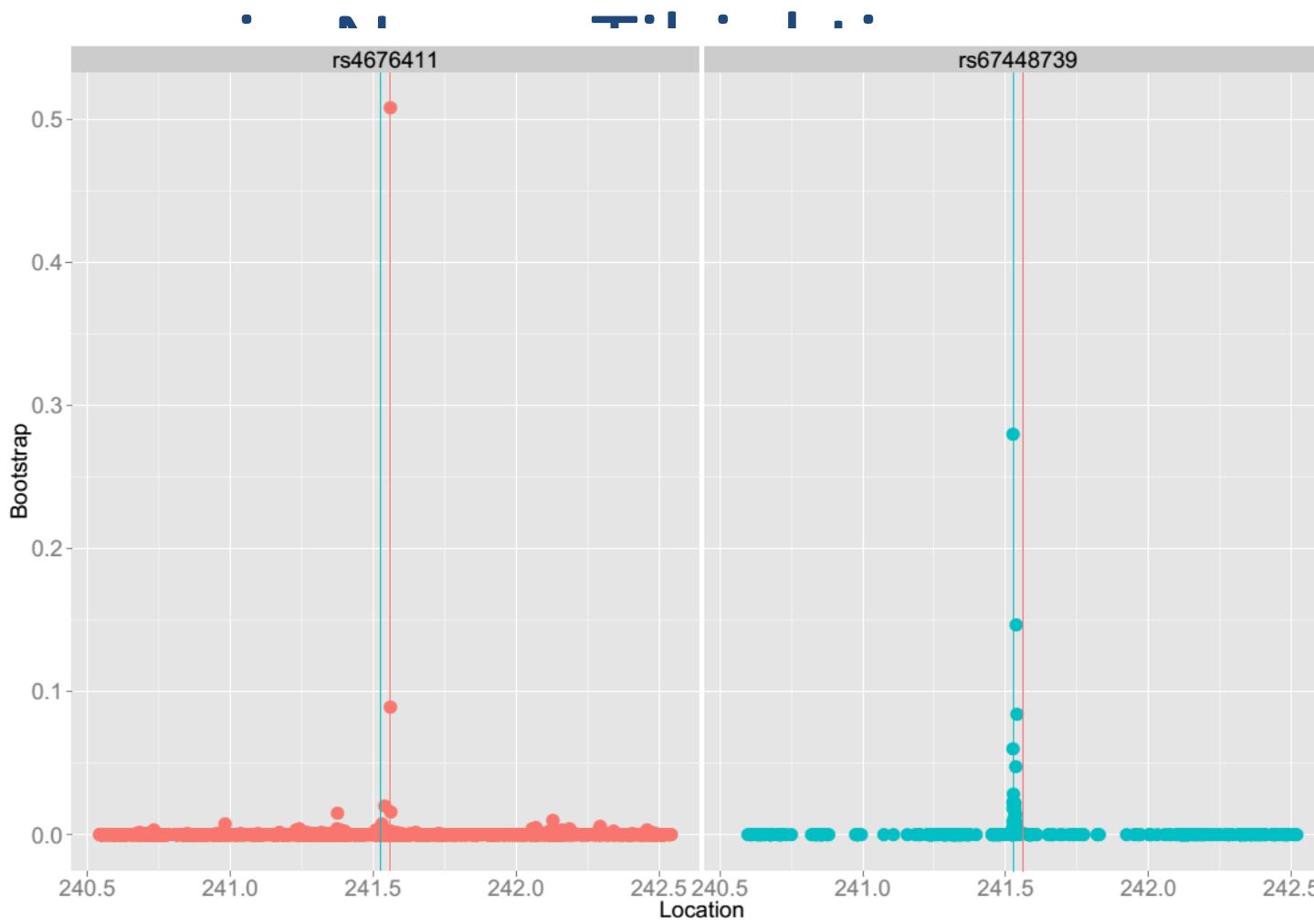
$$P(\text{SNP } x \text{ is causal}) = \sum_{\text{ranks and bootstraps}} P(\text{SNP } x \text{ in rank } i)P(\text{rank } i \text{ is causal})$$

- Applied to 6 GTEx tissues: Brain caudate, Brain cortex, Lung, Muscle skeletal, Nerve Tibial and Testis.
- We use “single signal” phenotypes produced by conditional analysis.
- Also applied “pairwise bootstrap” to Nerve tibial and Muscle skeletal and to Brain caudate and Brain cortex together.

Resolving causal eQTL variants



Example applied to *GPR35* expression

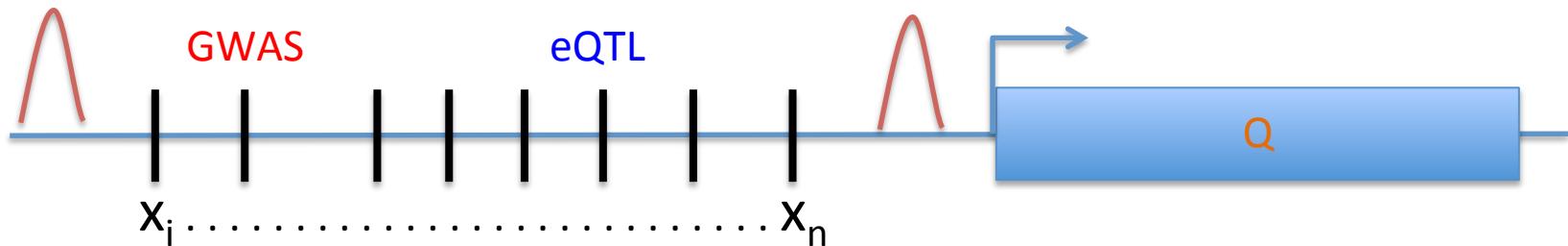


Applying bootstrap to conditional phenotypes we can map causal variants separately

Regulatory Trait Concordance (RTC) Score

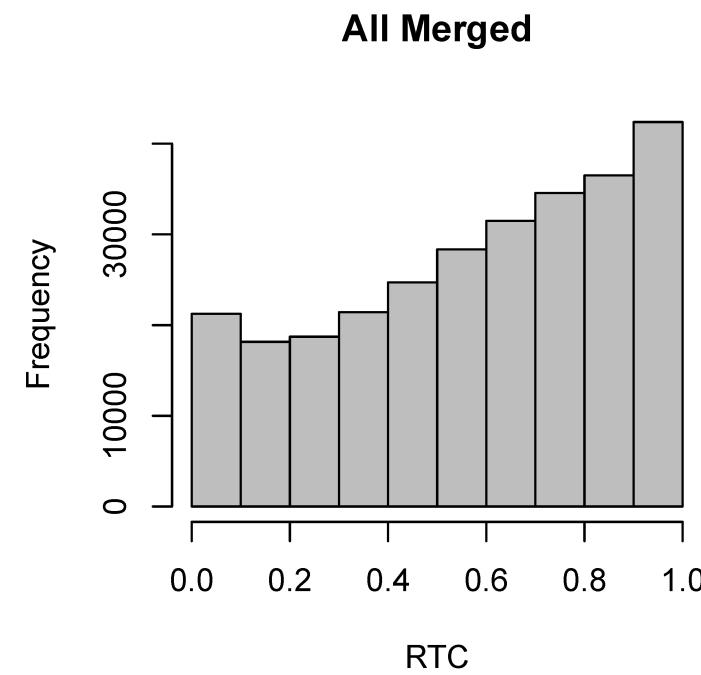
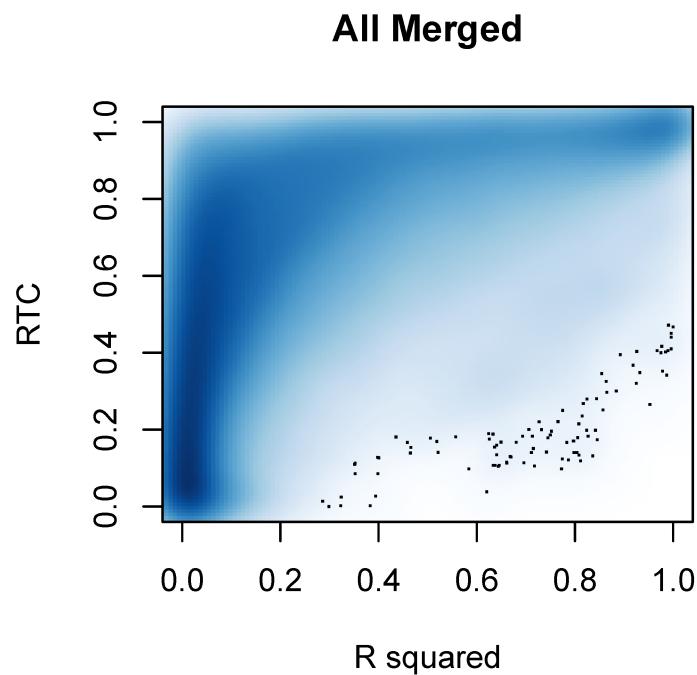
- For a GWAS variant falling into the same recombination coldspot interval with an eQTL, with N number of variants in a given coldspot:
 1. Correct the phenotype for each of the variants in the region separately by linear regression, resulting in N number of pseudo-phenotypes (residuals).
 2. Redo the eQTL variant association with all of these pseudo-phenotypes.
 3. Sort (descending) the resulting p-values and find the rank of the eQTL to GWAS_{SNP} -pseudo-phenotype among all eQTL to pseudo-phenotype associations.
 4. $\text{RTC} = \text{Rank}_{\text{GWAS}_{\text{SNP}}} / N$
- RTC scores ≥ 0.9 signify the eQTL and GWAS_{SNP} are the same causal variant (determined empirically).

Regulatory Trait Concordance (RTC) Score



1. For $x_i \dots x_n$:
 - Correct Q for X_i (linear regression) -> pseudo-phenotype $X_i Q$ (residuals)
2. For $x_i \dots x_n$:
 - Calculate p-value for $eQTL-X_i Q$ association
3. Sort (ascending) p-values $eQTL-X_i \dots n Q$ and find the rank of $eQTL-x_{GWAS} Q$
4. $RTC = \text{Rank}_{GWAS} / n$

RTC score in the new 44 GTEx tissues

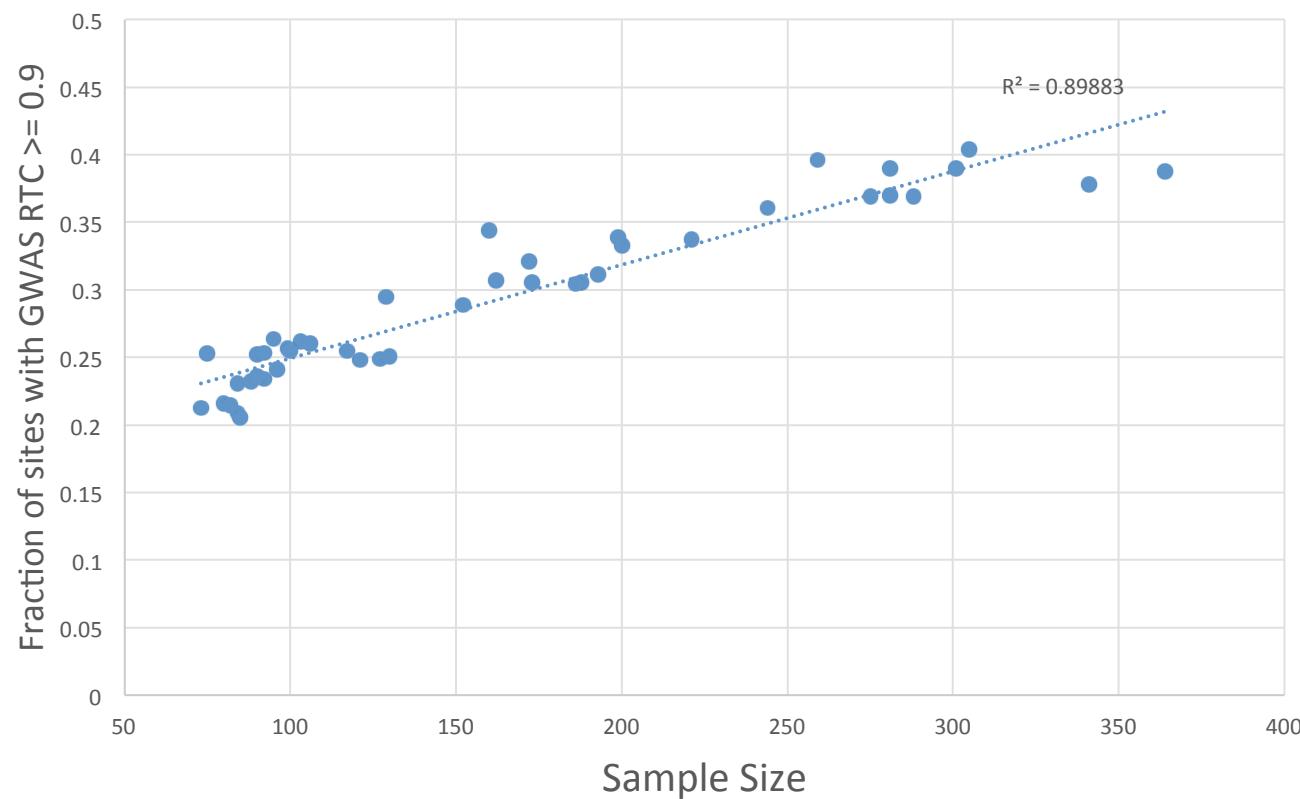


Halit Ongen

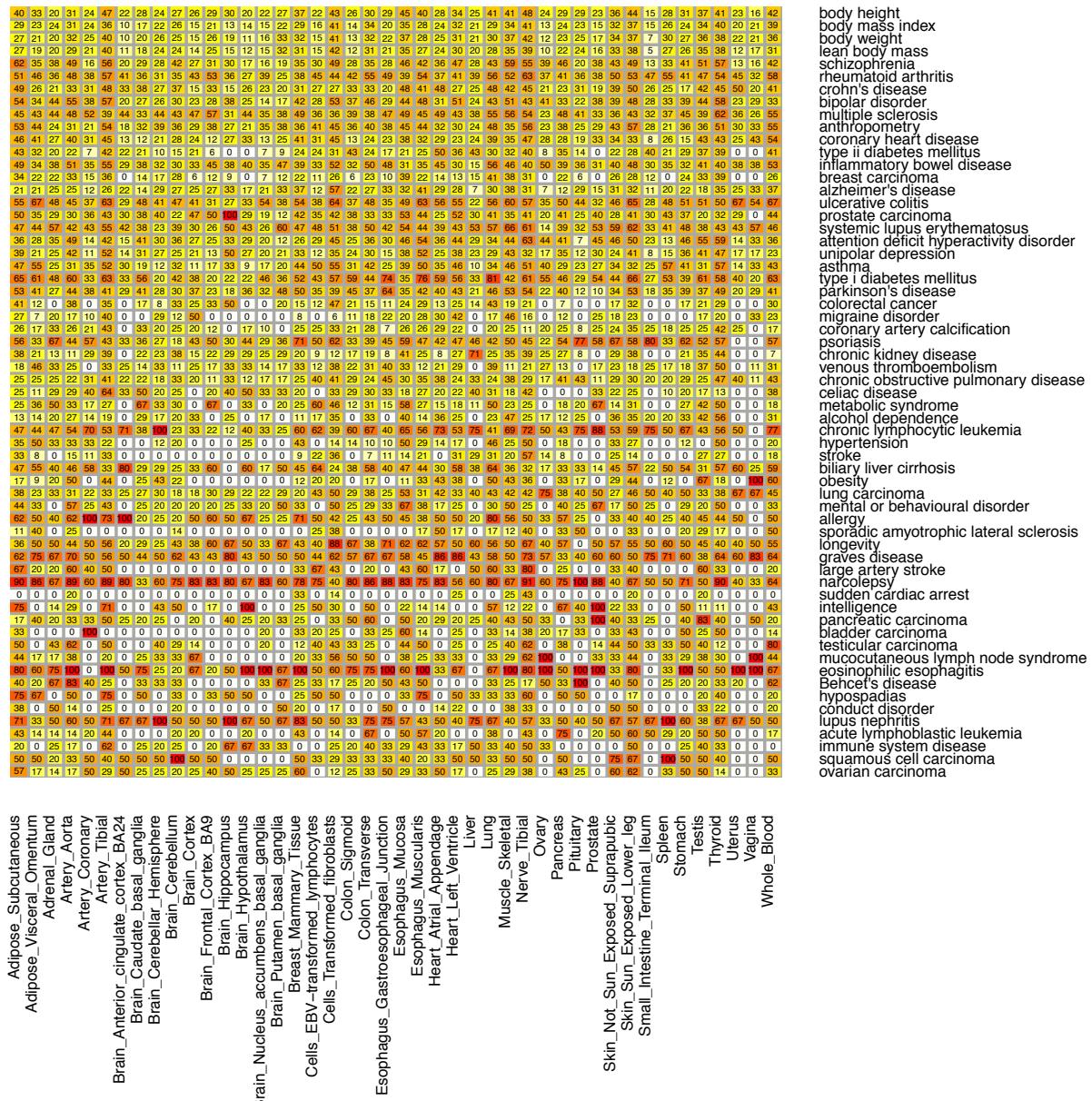
44

GWAS variants with RTC >= 0.9 by tissue

Relationship of sample size to ratio of GWAS RTC >= 0.9 to the total number of overlap between eQTL and GWAS

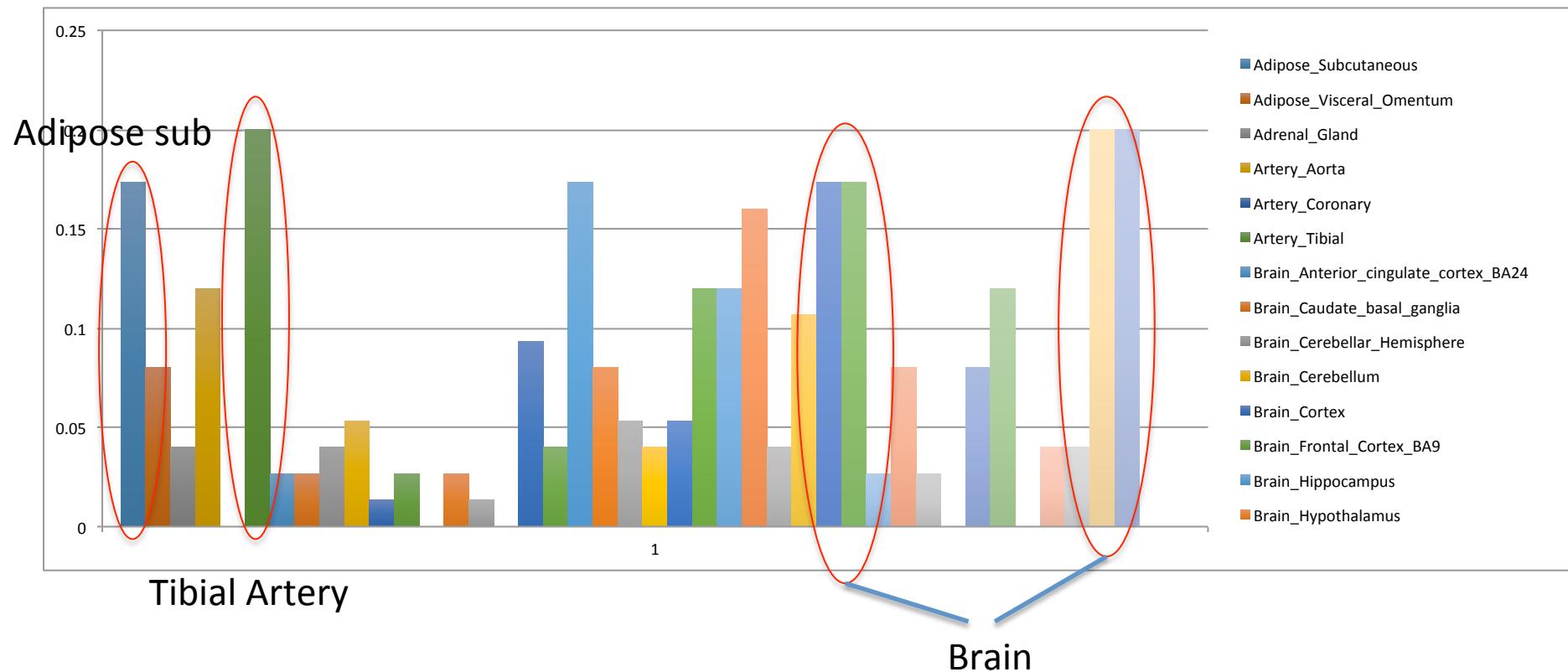


Tissue activity of GWAS in multiple tissues

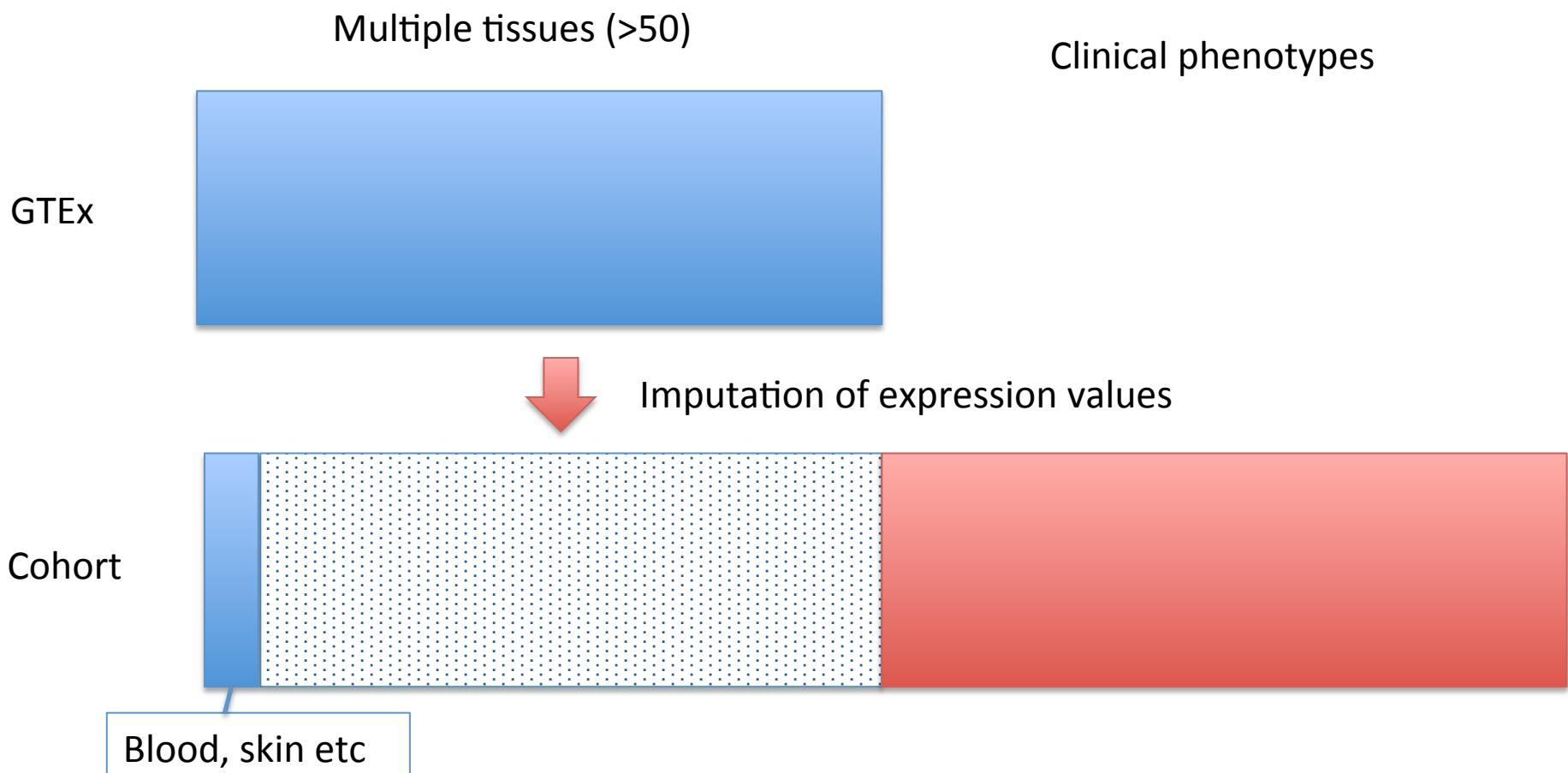


body height
 body mass index
 body weight
 lean body mass
 schizophrenia
 rheumatoid arthritis
 crohn's disease
 bipolar disorder
 multiple sclerosis
 anthropometry
 coronary heart disease
 type ii diabetes mellitus
 inflammatory bowel disease
 breast carcinoma
 alzheimer's disease
 ulcerative colitis
 prostate carcinoma
 systemic lupus erythematosus
 attention deficit hyperactivity disorder
 unipolar depression
 asthma
 type i diabetes mellitus
 parkinson's disease
 colorectal cancer
 migraine disorder
 coronary artery calcification
 psoriasis
 chronic kidney disease
 venous thromboembolism
 chronic obstructive pulmonary disease
 celiac disease
 metabolic syndrome
 alcohol dependence
 chronic lymphocytic leukemia
 hypertension
 stroke
 biliary liver cirrhosis
 obesity
 lung carcinoma
 mental or behavioural disorder
 allergy
 sporadic amyotrophic lateral sclerosis
 longevity
 graves disease
 large artery stroke
 narcolepsy
 sudden cardiac arrest
 intelligence
 pancreatic carcinoma
 bladder carcinoma
 testicular carcinoma
 mucocutaneous lymph node syndrome
 eosinophilic esophagitis
 Behcet's disease
 hypospadias
 conduct disorder
 lupus nephritis
 acute lymphoblastic leukemia
 immune system disease
 squamous cell carcinoma
 ovarian carcinoma

Type II Diabetes tissue activity



Use of GTEx as reference



Summary

- Unprecedented catalogue of eQTLs in multiple tissues
- eQTL tissue specificity estimates
- First glimpse into effect of genetic variation in diverse tissues/organs of the human body
- GWAS and other disease variant interpretation and causal effects

Acknowledgments

The GTEx Consortium

Analysis Working Group:

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U Chicago - Nancy J. Cox³¹, Dan L. Nicolae³¹, Eric R. Gamazon³¹, Anuar Konkashbaev³¹.
U Chicago - Jonathan K. Pritchard^{26,27,28}, Matthew Stephens^{26,35}, Timothée Flutre²⁶, Xiaoquan Wen³⁰.
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caHUB Biospecimen Source Sites:

NDRI - Amanda Brown³⁶, Bernadette Mestichelli³⁶, Denee Tidwell³⁶, Edmund Lo³⁶, John T. Lonsdale³⁶, Jeffrey A. Thomas³⁶, Mike Salvatore³⁶, Saboor Shad³⁶.
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Gift of Life Donor Program - Rick Hasz³⁹.
LifeNet Health - Gary D. Walters⁴⁰.
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caHUB ELSI Study:

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