Genetic Data in Add Health



Obesity

Blacks in America have the highest rate. Hispanic females have the highest rate of any ethnicity.

African-American have a higher likelihood of developing cardiovascular disease.

Type II Diabetes is highest in Hispanic females.









Risk Factors for Health/Behavior: New models



What is a gene?

Gene: is a sequence of DNA (string of letters) that is involved in the synthesis of functional proteins and corresponds to a unit of inheritance



What is a gene?

- ~ Roughly 23,333 genes in human genome (RefSeq) more than a chicken, less than a grape
- ~ Genes account for 1% of the 3 billion base-pairs (A,T,C,G) contained on 23 chromosomes and 2 sex-chromosomes (X,Y)
- ~ Less than 0.1% of the human genome differs between two people (we are 99.9% similar) this corresponds to 3 Million differences













Genes are located in the cell nucleus on chromosomes





The Human Genome

The Human Genome is the total of the genetic information that is held in each human cell. It is usually made up of 46 chromosomes: 22 pairs of autosomes and 1 pair of sex chromosomes, which are usually X and X for females and X and Y for males.

Types of Genetic Variation in the human genome:					
Class of variation	Designation/Description	Example	Frequency		
Single Nucleotide Polymorphism (SNP)	Single base substitution involving A,T,C, or G	A/T COMT	11,883,685 (6,262,709)		
Deletion/Insertion Polymorphisms (DIPs; In/Del)	Designated using the full sequence of the insertion as one allele, and either a fully defined string for the variant allele or a "-" character to specify the deleted allele.	T/-CCTA/G 5-HTTLPR	431,319		
Microsatellite or short tandem repeat (STR)	Alleles are designated by providing the repeat motif and the copy number for each allele.	DRD4 MAO-A	~10,000		
Copy Number Variants	Duplication, deletion of 1000 up to 1 Mb of DNA		TBD 5% of genome		
Gross Chromosomal Variation	Contiguous gene deletion syndromes (> 1 Mb) Aneuploidy	VCFS	small		



- On-going program project that began in 1994 and located at the University of North Carolina.
- Developed in response to a congressional mandate to fund a study of adolescent health.
- Funded by the National Institute of Child Health and Human Development (NICHD) with co-funding from 23 other federal agencies and foundations.
- Fourth wave of data collection funded in 2006 and collected in 2008.



- Nationally representative study that explores the causes of health and health-related behaviors of adolescents and their outcomes in adulthood.
- Multi-survey, multi-wave inter-disciplinary design.
- Direct measurement of the social contexts of adolescent life and their effects on health and health behavior.
- Unprecedented racial and ethnic diversity and genetically informed sibling samples.

Add Health Sampling Structure





Biological Data Across Waves

Adolescence	Young Adulthood -	Adulthood
Wave I-II (Ages 12-18)	Wave III (Ages 18-26)	Wave IV (Ages 24-32)
Embedded genetic sample of	3,000 pairs	
Physical development		
Height, weight	Height, weight	Height, weight, waist
	STI tests (urine)	Metabolic
	HIV test (saliva)	Immune function
	DNA (buccal cell)	Inflammation
		Cardiovascular
		DNA (buccal cell)
		Medications



- Sort out genetic from environmental effects and determine if there are sex differences in their influence.
- Explore gene-environment interactions and gene-environment correlations.
- Determine the extent that genes and environments are stable and/or change across developmental periods.
- Obtain the genetic and environmental correlations between different, but related, traits.

Add Health Sibling Pairs Sample

The National Longitudinal Study of Adolescent Health (Add Health) Twin Data

Kathleen Mullan Harris,^{1,2} Carolyn Tucker Halpern,^{1,3} Andrew Smolen,⁴ and Brett C. Haberstick⁴

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Twin Research and Human Genetics, 2006 & 2013

Add Health Sibling Pairs Sample

Relatedness	Wave I	Wave III	Both siblings at Wave III	Wave IV	Both Siblings at Wave IV
MZ Twins	307	273	239	282	233
DZ Twins	452	402	320	418	336
ND Twin type	25	19	14	22	18
Full-Siblings	1251	1152	924	1173	924
Half-Siblings	442	388	287	399	289
Nonrelated siblings	662	576	361	611	388
Total N	3139	2810	2145	2905	2188



Heritability

Heritability: the proportion of individual differences in a particular trait or disorder in a particular population that results from genetic differences between individuals.

Phenotypic variation is calculated as: $V_P = V_A + V_D + V_C + V_E$

Genetic influences include: additive (A) and non-additive (D) genetic influences Environmental influences include: shared (C) and non-shared or unique (E)

Heritability estimates range from 0 to 1 Heritability estimates are aggregate estimates – provides no insight into which genes or variants

Most traits or diseases have some degree of heritable influence

Heritability	Behavioral /Psychiatric	Other Important Familial Traits
~zero		Language, Religion
20-40%	Anxiety disorders, Depression, Bulimia, Personality Disorders	Myocardial Infarction, Normative Personality, Breast Cancer, Hip Fracture
40-60%	Substance Use Disorders, ADHD, Physical Activity, Aggressive behaviors	Blood Pressure, Asthma Plasma cholesterol, Prostate Cancer, Adult-onset diabetes
60-80%	Schizophrenia Bipolar Illness	Weight, Bone Mineral Density
80-100%	Autism	Height, Total Brain Volume



Most traits or diseases have some degree of heritable influence, though

- ~ heritability is not an absolute property of a physical or behavioral characteristic
- ~ it is a function of the *genetic and environmental variation* for a *given population in particular circumstances*, and at a *particular developmental stage*
 - ~ if environment is homogenous, influence of genotype on phenotype will increase (heritability will be higher)
- ~ as environmental variations (includes measurement error) increase, influence of genotypes on phenotypes will decrease (heritability will be lower)
 ~ estimates will typically be quite imprecise, with large standard errors or estimation
 - AND will depend on how accurate and precise the phenotypic definition is assessed
- ~ EXAMPLE: magnitude of genetic effects on nicotine dependence, DSM/ICD vs. FTND

~ heritability of nicotine dependence differs between the two measurement instruments



~ Heritable influences can remain stable and change over time, increasing and decreasing in their contribution to variation

~ age-related AND stage-related

 Factors within heterogeneous phenotypes may evidence differential heritability and/or serve as 'better' phenotypes for genetic investigations
 EXAMPLE: nicotine dependence (FTND), subjective experiences to nicotine (Haberstick et al, Addiction, 2006)

 Sex can have impact on genetic or environmental effects in two ways:
 QUANTITATIVE: are absolute magnitude differences between males and females. Genetic effects are stronger in one sex than the other
 QUALITATIVE: are different A or C influences for males or females

(Haberstick et al, Behavior Genetics, 2010)

Stable Genes and Changing Environments: Body Mass Index Across Adolescence and Young Adulthood

Brett C. Haberstick · Jeffery M. Lessem · Matthew B. McQueen · Jason D. Boardman · Christian J. Hopfer · Andrew Smolen · John K. Hewitt

Key Findings: Quantitative Sex Differences, early genetic influences on BMI are lasting where as early environmental influences are not

Table 4 Parameter estimates (95% confidence intervals) for the additive genetic and individual specific environmental influences on body mass index during adolescence and young adulthood

3	Wave 1 (16 years)		Wave 2 (17 years)		Wave 3 (22 years)	
	Males	Females	Males	Females	Males	Females
a ²	.84 (.8187))	.86 (.81–.89)	.75 (.68-80)	.85 (.8089)	.83 (.7887)
e^2	.16 (.13–.19)		.14 (.11–.19)	.25 (.20–.32)	.15 (.11–20)	.17 (.13–.22)

Note: a^2 Total genetic influence, e^2 total individual-specific environmental influence

Tabl (95%	ble 5 Genetic and individual-specific environmental correlations % confidence intervals) for body mass index				
		Wave1 → Wave 2	Wave1 → Wave3	Wave2 → Wave3	
Genetic correlation	Males Females	.96 (.94–.98) .97 (.95–.99)	.85 (.82–.89) .96 (.92–.99)	.89 (.86–.93) .97 (.93–1.0)	
Environmentalre correlation	Males Females r_{e} Additive	.51 (.38–.62) .66 (.56–.74) genetic correlation	.30 (.11–.48) .21 (.05–.36)	.29 (.10–.47) .33 (.20–.46)	

Role of Genotype in the Cycle of Violence in Maltreated Children

Avshalom Caspi,^{1,2} Joseph McClay,¹ Terrie E. Moffitt,^{1,2*} Jonathan Mill,¹ Judy Martin,³ Ian W. Craig,¹ Alan Taylor,¹ Richie Poulton³

We studied a large sample of male children from birth to adulthood to determine why some children who are maltreated grow up to develop antisocial behavior, whereas others do not. A functional polymorphism in the gene encoding the neurotransmitter-metabolizing enzyme monoamine oxidase A (MAOA) was found to moderate the effect of maltreatment. Maltreated children with a genotype conferring high levels of MAOA expression were less likely to develop antisocial problems. These findings may partly explain why not all victims of maltreatment grow up to victimize others, and they provide epidemiological evidence that genotypes can moderate children's sensitivity to environmental insults.

Caspi et al. (2002), Science 297: 851-854

Key Findings: (1) Higher rates of conduct disorder, antisocial personality disorder, and a disposition towards violence was observed among those with the low functioning MAOA genotype; (2) low MAOA functioning was a risk factor for adult antisocial behavior among those who experienced more frequent and pervasive

maltreatment before age 11.





Fig. 1. Means on the composite index of antisocial behavior as a function of MAOA activity and a childhood history of maltreatment (27). MAOA activity is the gene expression level associated with allelic variants of the functional promoter polymorphism, grouped into low and high activity; childhood maltreatment is grouped into 3 categories of increasing severity. The antisocial behavior composite is standardized (z score) to a M = 0 and SD = 1; group differences are interpretable in SD unit differences (d).

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Childhood Adversity, Monoamine Oxidase A Genotype, and Risk for Conduct Disorder

Debra L. Foley, PhD; Lindon J. Eaves, PhD, DSc; Brandon Wormley, BS; Judy L. Silberg, PhD; Hermine H. Maes, PhD; Jonathan Kuhn, PhD; Brien Riley, PhD

Monoamine Oxidase A (MAOA) and Antisocial Behaviors in the Presence of Childhood and Adolescent Maltreatment

Brett C. Haberstick, ¹^o Jeffrey M. Lessem, ¹ Christian J. Hopfer, ² Andrew Smolen, ¹ Marissa A. Ehringer, ¹ David Timberlake, ¹ and John K. Hewitt ¹

¹Institute for Behavioral Genetics, University of Colorado, Boulder, Colorado ²Department of Psychiatry, University of Colorado Health Sciences Center, Denver, Colorado

Role of Monoamine Oxidase A Genotype and Psychosocial Factors in Male Adolescent Criminal Activity

Kent W. Nilsson, Rickard L. Sjöberg, Mattias Damberg, Jerzy Leppert, John Öhrvik, Per Olof Alm, Leif Lindström, and Lars Oreland

Childhood Maltreatment, Subsequent Antisocial Behavior, and the Role of Monoamine Oxidase A Genotype

David Huizinga, Brett C. Haberstick, Andrew Smolen, Scott Menard, Susan E. Young, Robin P. Corley, Michael C. Stallings, Jennifer Grotpeter, and John K. Hewitt

MAOA and the "Cycle of Violence:" Childhood Abuse and Neglect, MAOA Genotype, and Risk for Violent and Antisocial Behavior

Cathy Spatz Widom and Linda M. Brzustowicz

MAOA, maltreatment, and gene–environment interaction predicting children's mental health: new evidence and a meta-analysis

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American Journal of Medical Genetics, 135B: 59-64

Sample: Sibling-pairs in the Add Health sample between ages of 18 and 15. Total sample size 771

Measures: Lifetime conduct disorder (longitudinal measures), violent convictions, physical and sexual abuse, neglect, visits from and removal by social services Analysis: Family-based (increased statistical power)

Demographics: 8.5% low offending, 0.3 high offending; 76.1% no maltreatment, 18.6% one experience of maltreatment.

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Simple Sequence Repeats in the National Longitudinal Study of Adolescent Health: An Ethnically Diverse Resource for Genetic Analysis of Health and Behavior

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Behavior Genetics, 2014



- Examine the degree of association between health/behavior phenotypes and genotypes.
- Explore gene-environment interactions.
- Determine the extent that genetic influences are stable and/or change across developmental periods.
- Conduct replication studies of *a priori* genetic associations findings from existing literature.
- Case-control & quantitative, not family based analyses



• DNA was collected using Oregene ® DNA Self-Collection kit using a 5-step process:



Spit until liquid saliva reaches the fill line.



Close funnel. Liquid in big cap will mix with saliva.



Unscrew funnel from tube.



Close tube with small cap.



Mix 5 times. Throw out funnel and big cap.












Add Health 'Program Project' Consent

Race/Ethnicity	Consent to saliva collection	Consent to archive
Whites	8051	6822
Blacks	3348	2523
Hispanic	2293	1883
Other	1335	997
Total N	15,140	12,234



Saliva Collection at Wave IV	Pairs who Consented	Pairs who did not consent	Total N
Monozygotic Twins	225	8	233
Dizygotic Twins	321	25	336
ND Twin type	15	3	18
Full-Siblings	880	44	924
Half-Siblings	278	11	289
Nonrelated siblings	371	17	388
Total N	2090	98	2188

Full Sample – DNA Consent

Ethnicity	Gender	Consent – with archiving (%)	Consent – no archiving (%)	Refusal (%)
Hispanic	Male	78.1	17.2	4.6
	Female	72.9	23.3	3.8
Black	Male	74.4	23.0	4.6
	Female	70.5	25.0	3.5
Asian	Male	70.6	25.0	4.4
	Female	66.3	28.2	5.4
Native American	Male	83.4	17.1	1.4
	Female	80.6	18.7	0.7
Other	Male	70.0	22.0	7.1
	Female	73.3	17.3	9.3
White	Male	81.0	15.7	3.3
	Female	83.4	14.0	2.5
Total (%)		77.0	18.5	3.6

Reasons for refusal to provide saliva sample	Total (%)
Too invasive	40.1
Doesn't give biological samples	20.3
Concerned about confidentiality	17.4
Doesn't want to give/not comfortable	11.5
Religious reasons	2.9
Illness/disability/pregnant	1.4
Incentive wasn't enough	2.3
Concerned about future use of sample	1.3
Interview in a public place	2.0
Time constraints	2.7
Other	7.9
Total N	557



 Extract DNA: used Zymo Research ZR-96 plates or Beckman-Coulter systems. Total #: 15,249 samples







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• Quantify DNA: PicoGreen® Fluorescence

DNA Yield for Oragene™ Saliva Method



DNA Yield, micrograms in one ml



• Visualize DNA: Aragrose gel with SYBR®Safe



Measured Genotypes in Add Health

Name	Symbol	Туре
Dopamine Transporter	DAT1	40 bp VNTR
Dopamine Receptor D4	DRD4	48 bp VNTR
Monoamine Oxidase A	MAOA	30 bp VNTR
Dopamine Receptor D2	DRD2	Taq IA SNP
Serotonin Tranpsorter	5HTTLPR	43 bp ins/del
Cytochrome P450 - 2A6	CYP2A6	SNP
Catechol-O-Methyl Transferase	COMT	Val/Met SNP
Dopamine D5 receptor	DRD5	Dinucleotide SSR
Monamine Oxidase A	MAOAC-1	Dinucleotide SSR

+ 93 Ancestral Informative Markers (AIMS)

VNTR: Variable number Tandem Repeat; *SNP*: Single Nucleotide polymorphism

Add Heath Measured Genotypes

Genetic Marker	Run 1 Null Result (N, %)	Run 2 Null Result (N, %)	Null Result in Common (N, %)	Discordant Genotype Call (N, %)
DRD4	64 (0.02)	85 (0.03)	45 (0.44)	27 (0.0094)
DAT1	103 (0.04)	140 (0.05)	55 (0.43)	9 (0.0031)
5HTTLPR	128 (0.04)	118 (0.04)	55 (0.41)	49 (0.0021)
MAOA-uVNTR	133 (0.05)	91 (0.03)	51 (0.57)	5 (0.0017)
DRD5	267 (0.09)	399 (0.14)	135 (0.51)	4 (0.0014)
MAOAC-1	221 (0.08)	325 (0.11)	110 (0.50)	47 (0.0164)



Take home point: polymorphisms across the entire gene were chosen for analysis

Dopaminergic System

~ Dopamine found in neurons of nigrostriatal, mesocortical and mesolimbic systems.

~ Role in motor function, reward, reinforcement, emotional expression, neuroendocrine release and behavioural homoeostasis.



Dopaminergic Receptor System

Transporters & Auto-transporters



Receptors D₁-like (D1, D5) D₂-like (D2, D3 and D4)



Missale et al., 1998: Physiology Reviews 78(1): 189-225



Adapted from Miller & Madras, 2002; Fuke et al., (2001), Vandenberg et al., 1992

Functional & behavioral effects of the 40 bp DAT1 VNTR

Transcriptional efficiency

• Michelhaugh et al., (2001)- 9 repeat enhances transcription in cells and also in dopamine neurons in neonatal rat midbrain slices.

• Miller, GM & Madras, BK. (2002). 9 repeat shows significantly higher levels of luciferase production than 10 repeats in HEK293 cells. Cloned downstream

• Fuke et al., (2001) – 10 repeat showed higher expression than the other repeats in COS-7 cells and human glioblastoma A172 cells.

• Mill et al., (2002) - **10 repeat showed higher** expression than other commonly express genes (housekeeping genes)

Behavioral associations

- Alcohol, tobacco, illicit drug use/misuse.
- gambling
- conduct problems, violence, delinquency
- attention-deficit/hyperactivity

DRD4 VNTR Polymorphism in Exon 3



Adapted from: D'Souza; van Tol et al., (1992)

DRD4 VNTR Polymorphism of Exon 3

- DRD4 is A D₂-like receptor
- Fragment lengths vary between 379 bp 811 bp
- 4R (475 bp) & 7R (619 bp) alleles are most common (64.3% and 20.6%, respectively)
- Results in variation in the 3rd cytoplasmic loop of the receptor affecting G-protein binding
- DRD4 is activated by dopmamine
- Inhibits adenylate cyclase and reduces cAMP levels
- 7R allele exhibits blunted ability to reduce cAMP levels Wang et al., (2004); DiMaio et al., (2003); Anchordoquy et al., (2003)



Wang et al., (2004), Am. J. Hum. Genet. 74: 931-944

DRD4 Exon-3 48 bp VNTR



A panel of Rule and Ins/del Genotyping on ABL3130xl



Genotyping four typical VNTR Candidate Genes



Supplemental Table 3. Allele counts and frequencies (N, %) for DRD4 polymorphism by race/ethnicity.

		F	Race/Ethnicity		
			Native		
	White	Black	American	Asian	Hispanic
Allele	(N= 8188)	(N= 3235)	(N= 116)	(N= 905)	(N= 2337)
2R	1440 (0.09)	326 (0.05)	18 (0.08)	469 (0.26)	280 (0.06)
3R	711 (0.04)	100 (0.02)	7 (0.03)	34 (0.02)	103 (0.02)
3.39R	(14 (<0.01)			1 (<0.01)
4R	10622 (0.65)	4046 (0.63)	146 (0.63)	1165 (0.64)	2945 (0.63)
5R	136 (0.01)	279 (0.04)	2 (0.01)	28 (0.02)	83 (0.02)
6R	74 (<0.01)	82 (0.01)	11 (0.05)	40 (0.02)	106 (0.02)
7R	3239 (0.20)	1401 (0.22)	44 (0.19)	71 (0.04)	1119 (0.24)
8R	138 (0.01)	209 (0.03)	4 (0.02)	2 (<0.01)	32 (0.01)
9R	11 (<0.01)	4 (<0.01)		1 (<0.01)	5 (<0.01)
10R	5 (<0.01)	9(<0.01)			



Supplemental Table 7. Allele counts and frequencies (N, %) for MAOA-uVNTR polymorphism by race/ethnicity for **Males**.

			Race/Ethnicity		
	tersolation and the		Native	11 11 11 11 11 11 11 11 11 11 11 11 11	
	White	Black	American	Asian	Hispanic
Allele	(N= 8369)	(N= 1403)	(N= 117)	(N= 468)	(N= 2360)
2R (16 (<0.01)	142 (0.05)			18 (<0.01)
3R	2662 (0.34)	1408 (0.50)	40 (0.36)	526 (0.56)	808 (0.34)
3.5R	124 (0.02)	4 (<0.01)	2 (0.02)		26 (0.02)
4R	4850 (0.62)	1238 (0.44)	70 (0.62)	408 (0.44)	1350 (0.62)
5R	116 (0.01)	14 (<0.01)		2 (<0.01)	12 (<0.01)

Note: R, repeat; N, sample size.

Serotonin Transporter, SLC6A4 17q11.1-q12 minus strand



[25,392,812

[25,685,191 🕨



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Table 5 Allele and genotype frequencies for binned 5HTTLPR genotypes

Population	Allele (N, %)		Genotype (N, %)		
	14R	16R	14R/14R	14R/16R	16R/16R
White $(n = 8215)$	7055 (0.43)	9375 (0.57)	1516 (0.18)	4023 (0.49)	2676 (0.33)
Black $(n = 3259)$	1712 (0.27)	4806 (0.74)	254 (0.08)	1204 (0.37)	1801 (0.55)
Native American $(n = 116)$	125 (0.54)	107 (0.46)	36 (0.31)	53 (0.45)	28 (0.24)
Asian $(n = 904)$	1210 (0.67)	598 (0.33)	405 (0.45)	400 (0.44)	99 (0.11)
Hispanic ($n = 2346$)	2386 (0.51)	2306 (0.49)	623 (0.27)	1140 (0.49)	583 (0.25)

HWE White, $\chi 2 = 0.0051$, df = 2, p = 0.9974; Black, $\chi 2 = 6.8780$, df = 2, p = 0.0321; Native Americans, $\chi 2 = 1.0638$, df = 2, p = 0.5874; Asians, $\chi 2 = 0.0102$, df = 2, p = 0.9949; Hispanic, $\chi 2 = 1.8016$, df = 2, p = 0.4062

N sample size, R repeat

5HTTLPR – "tri-allelic" determination of SNP rs25531





Simple Sequence Repeats in the National Longitudinal Study of Adolescent Health: An Ethnically Diverse Resource for Genetic Analysis of Health and Behavior

Table 6 Allele and genotype frequencies for binned 5HTTLPR genotypes

Brett C. Haberstick · Andrew Smolen · Gary L. Stetler · Joyce W. Tabor · Taylor Roy · H. Rick Casey · Alicia Pardo · Forest Roy · Lauren A. Ryals · Christina Hewitt · Eric A. Whitsel · Carolyn T. Halpern · Ley A. Killeya-Jones · Jeffrey M. Lessem · John K. Hewitt · Kathleen Mullan Harris

	Allele (N, %)		Genotype (N, %)		
Population	S'	Ľ	S'/S'	S'/L'	L'/L'
White $(n = 8183)$	8178 (0.50)	8188 (0.50)	2054 (0.25)	4071 (0.50)	2058 (0.25)
Black $(n = 3199)$	3036 (0.47)	3362 (0.53)	710 (0.22)	1616 (0.50)	873 (0.27)
Native American $(n = 116)$	137 (0.59)	95 (0.41)	39 (0.34)	59 (0.51)	18 (0.16)
Asian $(n = 867)$	1400 (0.81)	334 (0.19)	567 (0.04)	266 (0.33)	34 (0.63)
Hispanic $(n = 2330)$	2646 (0.57)	2014 (0.43)	767 (0.33)	1112 (0.48)	451 (0.19)

Reflects the reclassification of L-alleles based on rs25531 status. *HWE* White, $\chi 2 = 0.1955$, df = 2, p = 0.9068; Black, $\chi 2 = 0.5286$, df = 2, p = 0.7677; Native Americans, $\chi 2 = 0.2383$, df = 2, p = 0.8876; Asians, $\chi 2 = 0.1913$, df = 2, p = 0.9087; Hispanic, $\chi 2 = 1.8245$, df = 2, p = 0.4016

N sample size, R repeat

Dinucleotide Repeat Genotyping on ABI 3130xI



Supplemental Table 9. Allele counts and frequencies (N, %) for DRD5 polymorphism by race/ethnicity.

	Race/Ethnicity					
			Native			
	White	Black	American	Asian	Hispanic	
Allele	(N= 8046)	(N= 3167)	(N= 115)	(N= 879)	(N= 2293)	
124					1 (<0.01)	
126		6 (<0.01)		2 (<0.01)	1 (<0.01)	
128	4 (<0.01)	3 (<0.01)			1 (<0.01)	
130	16 (<0.01)	304 (0.05)		2 (<0.01)	33 (0.01)	
132	24 (<0.01)	35 (0.01)		2 (<0.01)	14 (<0.01)	
134	285 (0.02)	38 (0.01)		17 (0.01)	42 (0.01)	
136	364 (0.02)	115 (0.02)	4 (0.02)	62 (0.04)	95 (0.02)	
138	1347 (0.08)	161 (0.03)	26 (0.11)	139 (0.08)	499 (0.11)	
140	661 (0.04)	321 (0.05)	15 (0.07)	172 (0.10)	220 (0.05)	
142	622 (0.04)	588 (0.09)	31 (0.13)	102 (0.06)	399 (0.09)	
144	624 (0.04)	734 (0.12)	8 (0.03)	187 (0.11)	263 (0.06)	
146	1009 (0.06)	1227 (0.19)	22 (0.10)	160 (0.09)	286 (0.06)	
148	7172 (0.45)	1609 (0.25)	72 (0.31)	681 (0.39)	1475 (0.32)	
150	2063 (0.13)	325 (0.05)	35 (0.15)	133 (0.08)	762 (0.17)	
152	1315 (0.08)	503 (0.08)	10 (0.04)	82 (0.05)	342 (0.07)	
154	440 (0.03)	119 (0.02)	4 (<0.01)	7 (<0.01)	91 (0.02)	
156	116 (0.01)	37 (0.01)	1 (<0.01)	6 (<0.01)	32 (0.01)	
158	20 (<0.01)	9 (<0.01)		3 (<0.01)	5 (<0.01)	
160	7 (<0.01)	21 (<0.01)		1 (<0.01)	2 (<0.01)	
162		6 (<0.01)				
164		18 (<0.01)				
166	1 (<0.01)	39 (<0.01)	1 (<0.01)		6 (<0.01)	
168	1 (<0.01)	62 (<0.01)	1 (<0.01)		11 (<0.01)	
170		23 (<0.01)			4 (<0.01)	
172		27 (<0.01)			2 (<0.01)	
174	1 (<0.01)	4 (<0.01)				
176						

The size of the repeat itself may not matter The location and function are important

Position of polymorphism could have effects when in:

- 1. Regulatory regions : influences the amount of protein made.
- 2. Coding regions : influences the type of protein made.

Non-synonymous Missense mutations: causes premature stop signal Missense mutations: changes in protein sequence

Synonymous "silent" Mutation *does not* alter protein, could affect mRNA stability & translation

Human Catechol-*O*-Methyltransferase Haplotypes Modulate Protein Expression by Altering mRNA Secondary Structure

A. G. Nackley,¹ S. A. Shabalina,² I. E. Tchivileva,¹ K. Satterfield,¹ O. Korchynskyi,³ S. S. Makarov,⁴ W. Maixner,¹ L. Diatchenko^{1*}

Fig. 1. Common haplotypes of the human COMT gene differ with respect to mRNA secondary structure and enzymatic activity. (A) A schematic diagram illustrates COMT genomic organization and SNP composition for the three haplotypes. Percent frequency of each haplotype in a cohort of healthy Caucasian females, and percent independent SNP contribution to pain sensitivity, are indicated. (B) The local stem-loop structures associated with each of the three haplotypes are shown. Relative to the LPS and APS haplotypes, the HPS local stem-loop structure had a higher folding potential. (C and D) The LPS haplotype exhibited the highest, while the HPS haplotype exhibited the lowest enzymatic activity and protein levels in cells expressing COMT. ***P < 0.001, ≠ LPS. +++ P < 0.001, ≠ APS.



~ COMT accounts for more than 60% of DA degradation in PFC but <15% in striatum (Karoum et al 1994)

~ COMT inhibitors enhance working memory (Khromova et al 1995; Liljequist et al 1997)

~ minimal role of prefrontal dopamine transporters (Sesack et al 1998, Lewis et al 2001, Moron et al 2002, Mazei et al 2002)

The COMT Gene



Allelic Discrimination



Allele Y (COMT-C-FAM-MGB)



- Add Health sampling design allows different types of association testing.
- Simplest type is correlating phenotype with genotype.
- Other types:
 - Candidate gene: common practice in medical genetics
 - **Pharmacogenetics**: genotyping clinically relevant samples
 - Genome-wide association: exhaustive characterization of many SNPs to allow a search across the genome.

Three Types of Genetic Associations

1. Direct Association



Measure disease relevance (*) directly, ignoring correlated markers nearby 2. Indirect Association & LD



3. Spurious Association

Apparent association not related to genetic etiology

Assess trait effects on D via correlated markers (M_i) rather than susceptibility/etiologic variants.



Pubmed: February 2011. "Genetic association" gives 77,861 hits — in Mar 2006: 36,908

Question: How many are real?

Answer: < 1%

- Claims of "replicated genetic association" \rightarrow 1602 (0.02%)
- Claims of "validated genetic association" \rightarrow 780 hits (0.01%)
Reasons for line success with Association

- Small sample sizes, limited power
- Phenotypes are complex and not measured well. Candidate genes thus difficult to choose.
- Allelic/genotypic contributions are complex. Even true associations are difficult to identify.
- Population stratification is thought to be a primary reason



Race/Ethnicity	Ν	%
Mexico	1,767	8.5
Cuba	508	2.5
Central-South America	647	3.1
Puerto Rico	570	2.8
China	341	1.7
Philippines	643	3.1
Other Asia	601	2.9
Black (Africa/Afro-Caribbean)	4,601	22.2
Non-Hispanic White (Eur/Canada)	10,760	52.0
Native American (non-Hispanic)	248	1.2
Total N	20,686	100.0



- Population stratification leads to spurious associations
- Occurs when there are genetic differences in allele frequencies AND genetic differences in outcomes.
- To control for the possibility: use FAMILY-BASED CONTROLS found in the Sibling Pairs sample OR
- Use Ancestral Informative Markers (AIM) genotyped at Wave IV

Current Association Study Challenges – Which association approach is appropriate??

Candidate gene or genome-wide?

Candidate gene

- Hypothesis-driven
- Low-cost: small genotyping requirements
- Multiple-testing less important
 - Possible many misses, fewer false positives

Genome-wide screen

- Hypothesis-free
- High-cost: large genotyping requirements
- Multiple-testing issues
 - Possible many false positives, fewer misses

Current Association Study Challenges – What constitutes a replication??

Replicating association results in different laboratories is often seen as most compelling piece of evidence for 'true' finding

BUT.... in any sample, we measure

Multiple traits Multiple genes Multiple markers in genes

and we analyse all this using multiple statistical tests

Criteria of what is and is not a replication needs to be determined in advance

MAOA Genotype, Childhood Maltreatment, and Their Interaction in the Etiology of Adult Antisocial Behaviors

Brett C. Haberstick, Jeffrey M. Lessem, John K. Hewitt, Andrew Smolen, Christian J. Hopfer, Carolyn T. Halpern, Ley A. Killeya-Jones, Jason D. Boardman, Joyce Tabor, Ilene C. Siegler, Redford B. Williams, and Kathleen Mullan Harris

Biological Psychiatry, 2014

Sample: Adults between ages 24-34. Total sample size 3356 (White), 960 (Black) Measures: CD: Lifetime conduct disorder (4 waves, repeated measures), violent convictions (2 waves, repeated measures), disposition towards violence; Maltreatment: physical and sexual abuse, neglect, visits from and removal by social services (2 waves) Analysis Approach: Direct replication

Demographics: CD: 66.0% no offending, 32.7% low offending, 1.3% high offending; Maltreatment: (White sample) 81.8% no maltreatment, 10.3% 'probable' maltreatment; 7.9% 'severe' maltreatment. Similar frequencies in our Black sample. Key Findings: (1) Higher rates of conduct disorder, antisocial personality disorder, and a disposition towards violence was observed among those with more experiences of maltreatment; (2) No main effect of genotype, (3) No significant moderation of long-term relationship by low MAOA functioning.



Key Findings: (1) Higher rates of conduct disorder, antisocial personality disorder, and a disposition towards violence was observed among those with more experiences of maltreatment; (2) No main effect of genotype, (3) No significant moderation of long-term relationship by low MAOA functioning.

Power of study could detect an effect size as small as 0.001138 (White sample)





Replication Outcome: Association to same trait, different gene Explanation: Genetic heterogeneity Replication Outcome: Association to same trait, same gene, different SNPs Explanation: Allelic heterogeneity Replication Outcome: Association to different but correlated phenotype(s) Explanation: Phenotypic heterogeneity Replication Outcome: No association at all Explanation: Insufficient sample size (low statistical power)



- Add Health presents an optimal study design for examining genotype-phenotype relationship.
- Collecting DNA on a large-scale is feasible and can be done.
- Watch for population stratification and derive empirical p-values to correct for multiple testing.
- Establish a collaborative relationship with someone outside your field of expertise Social Scientist & a Geneticist.







Special Thanks to:

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QUESTIONS? COMMENTS?