



UNIVERSITY OF
CAMBRIDGE

Integrating genomics and multi-omics at population scale for disease insights

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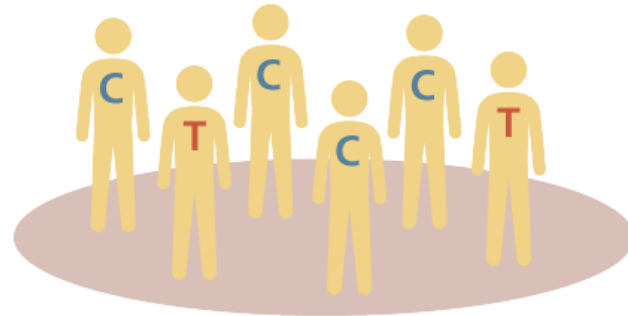
CMIH Academic Engagement Event

26th July 2022

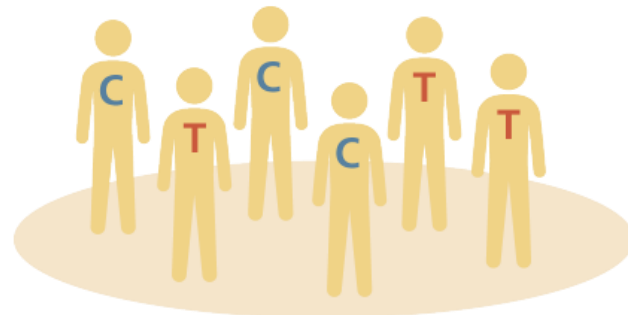
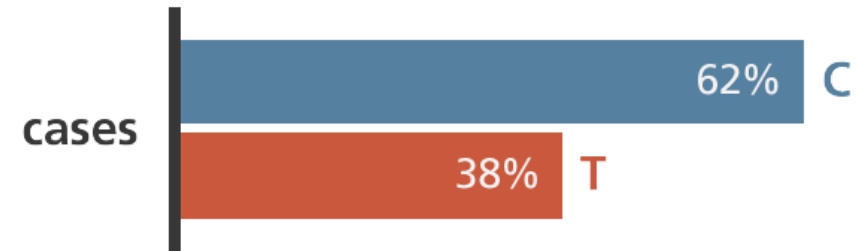
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Associating genetic variants with risk of disease



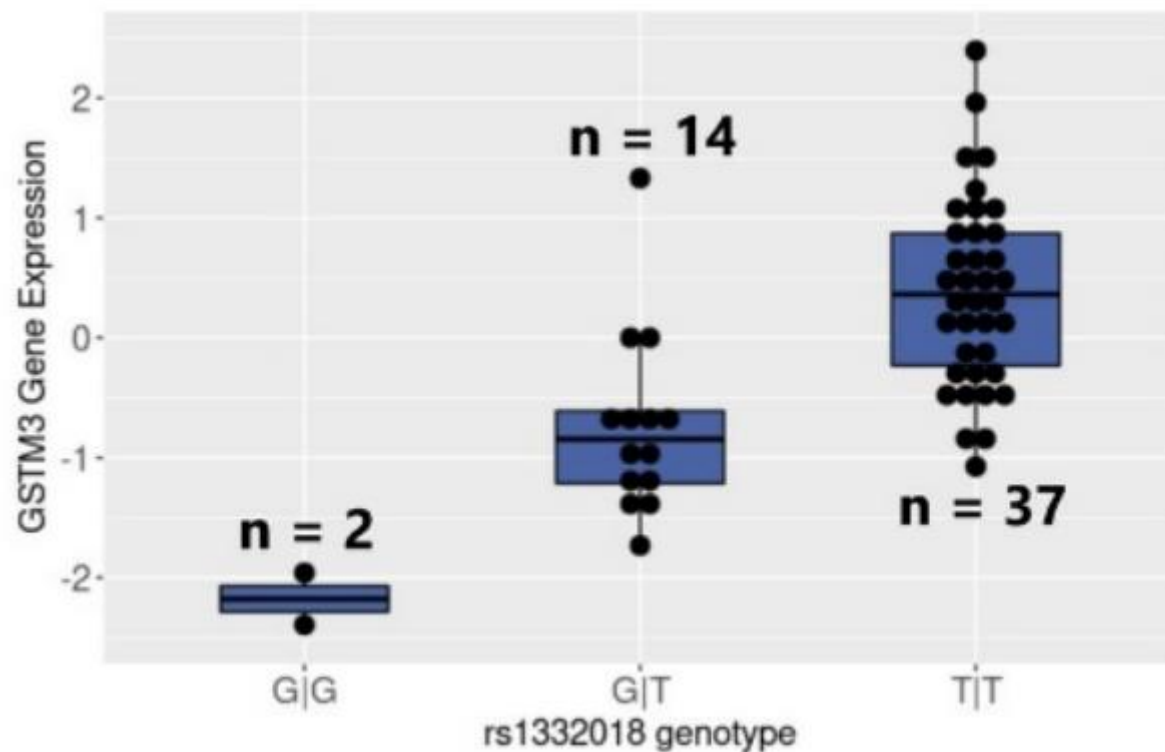
cases
people with heart disease



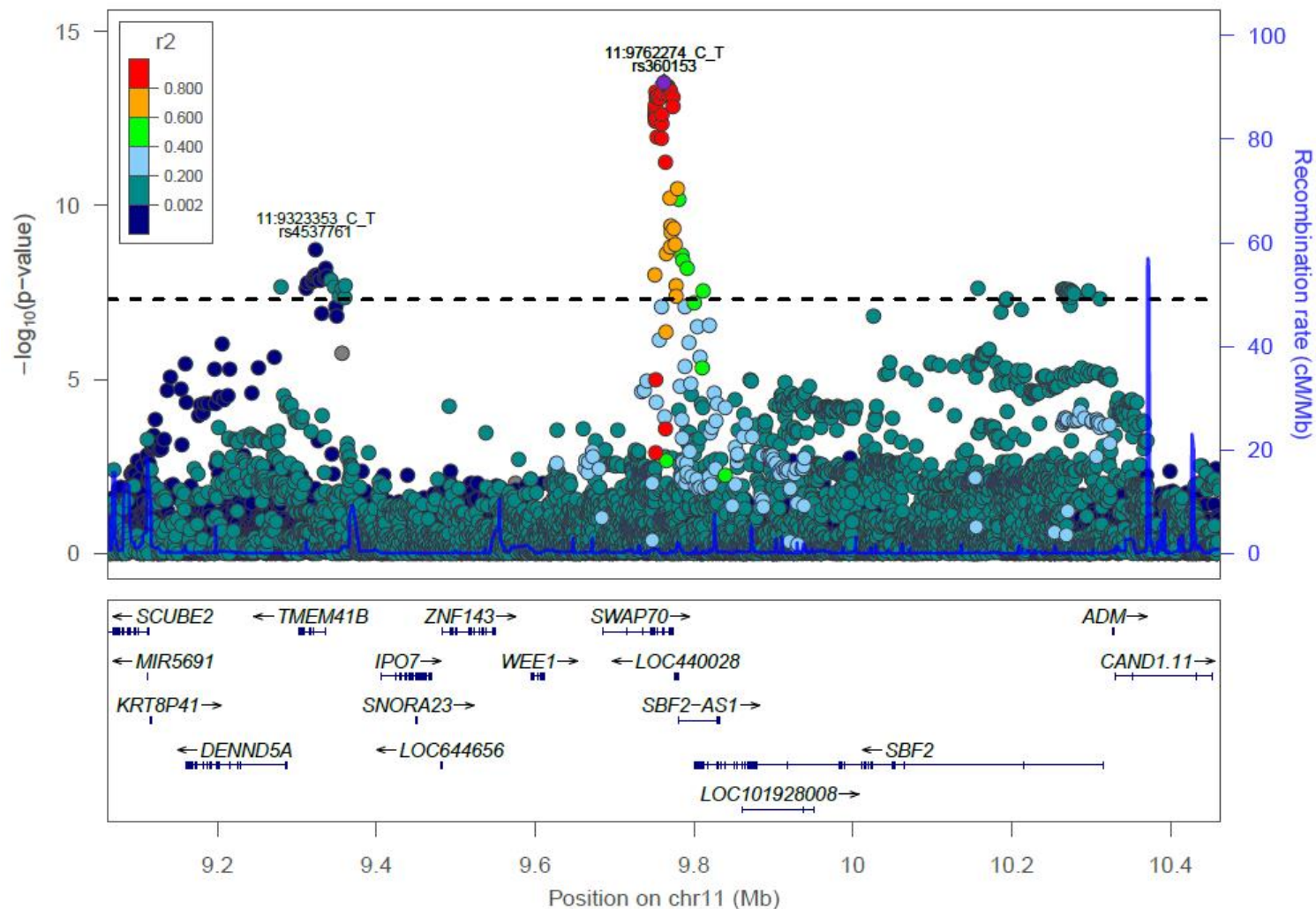
controls
people without heart disease



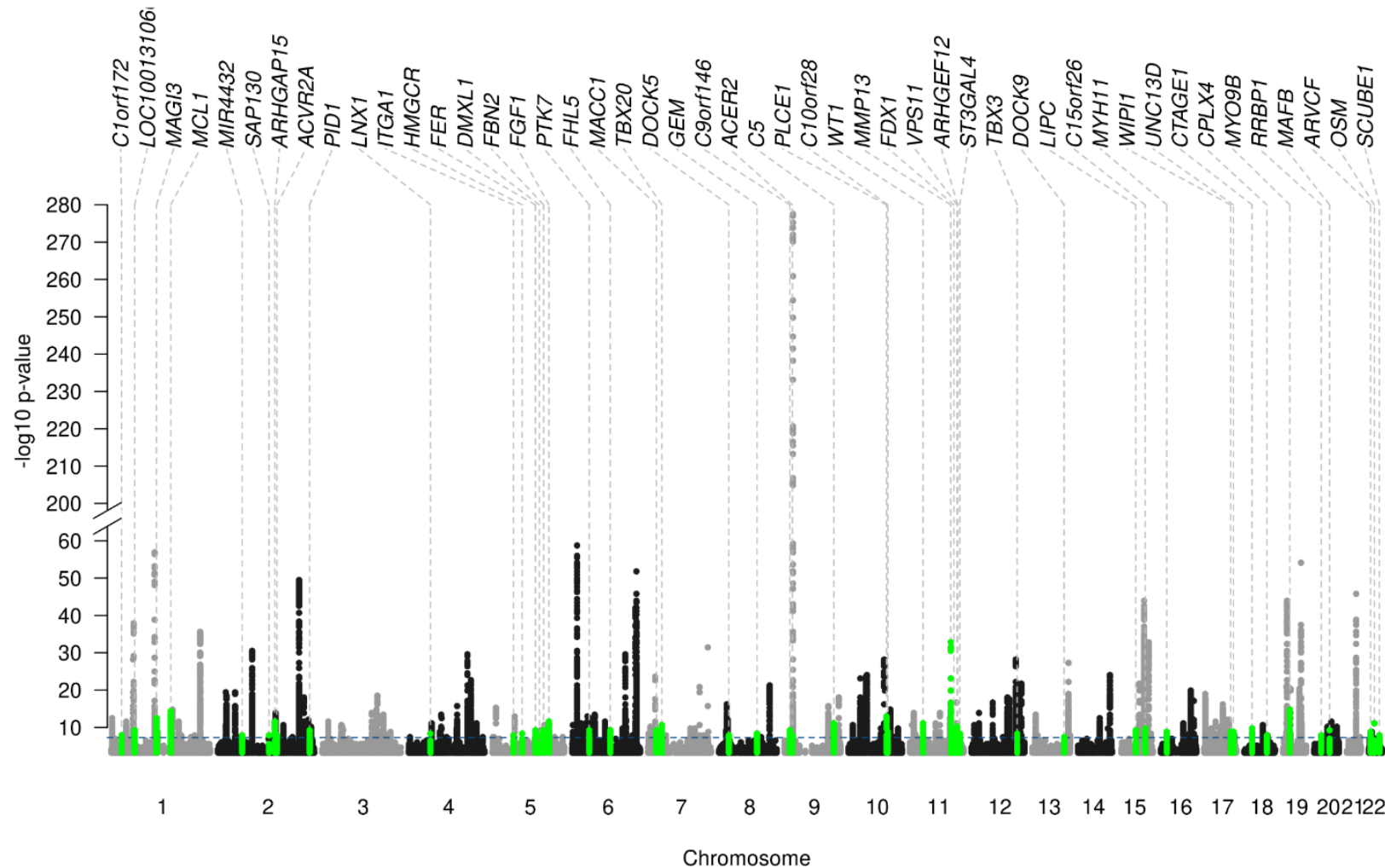
Associating genetic variants with quantitative molecular traits



Linking genomic regions with coronary artery disease

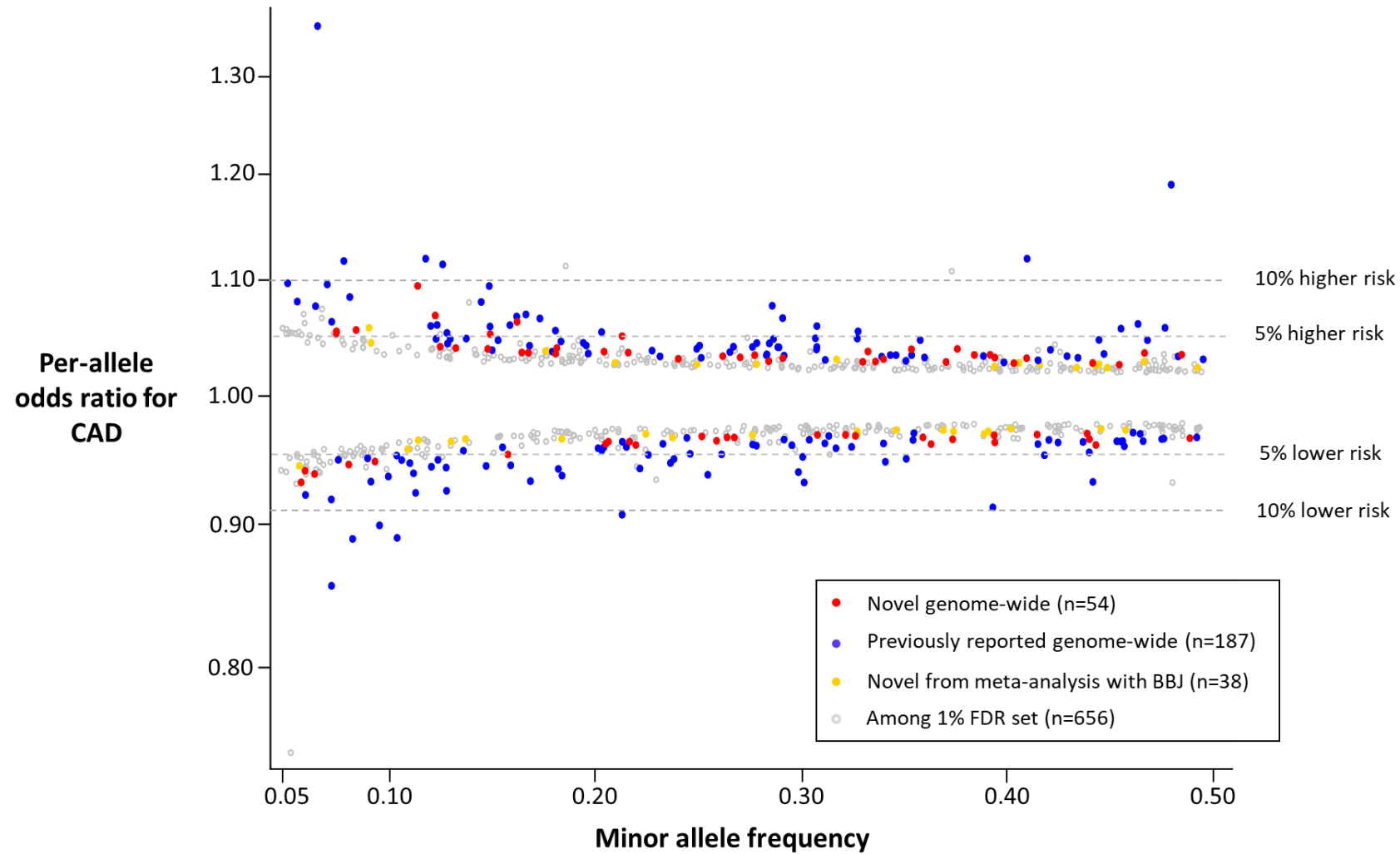


Genome-wide association study (GWAS) of coronary artery disease involving >1M participants

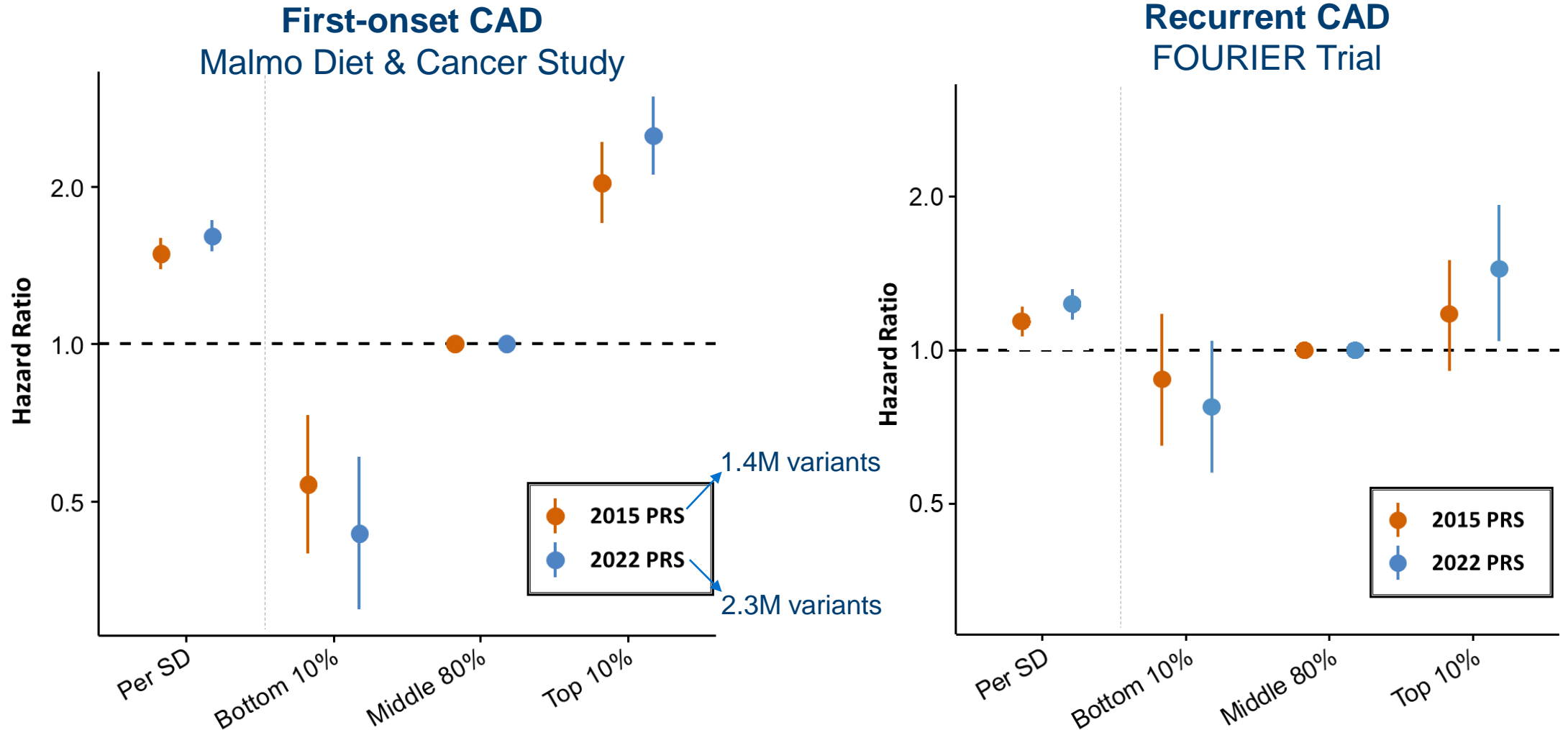


- >11 million variants tested
- 279 signals with $p < 5 \times 10^{-8}$
- 68 novel (in green)
- ~900 signals at 1% FDR

Effect sizes for most variants are very small!



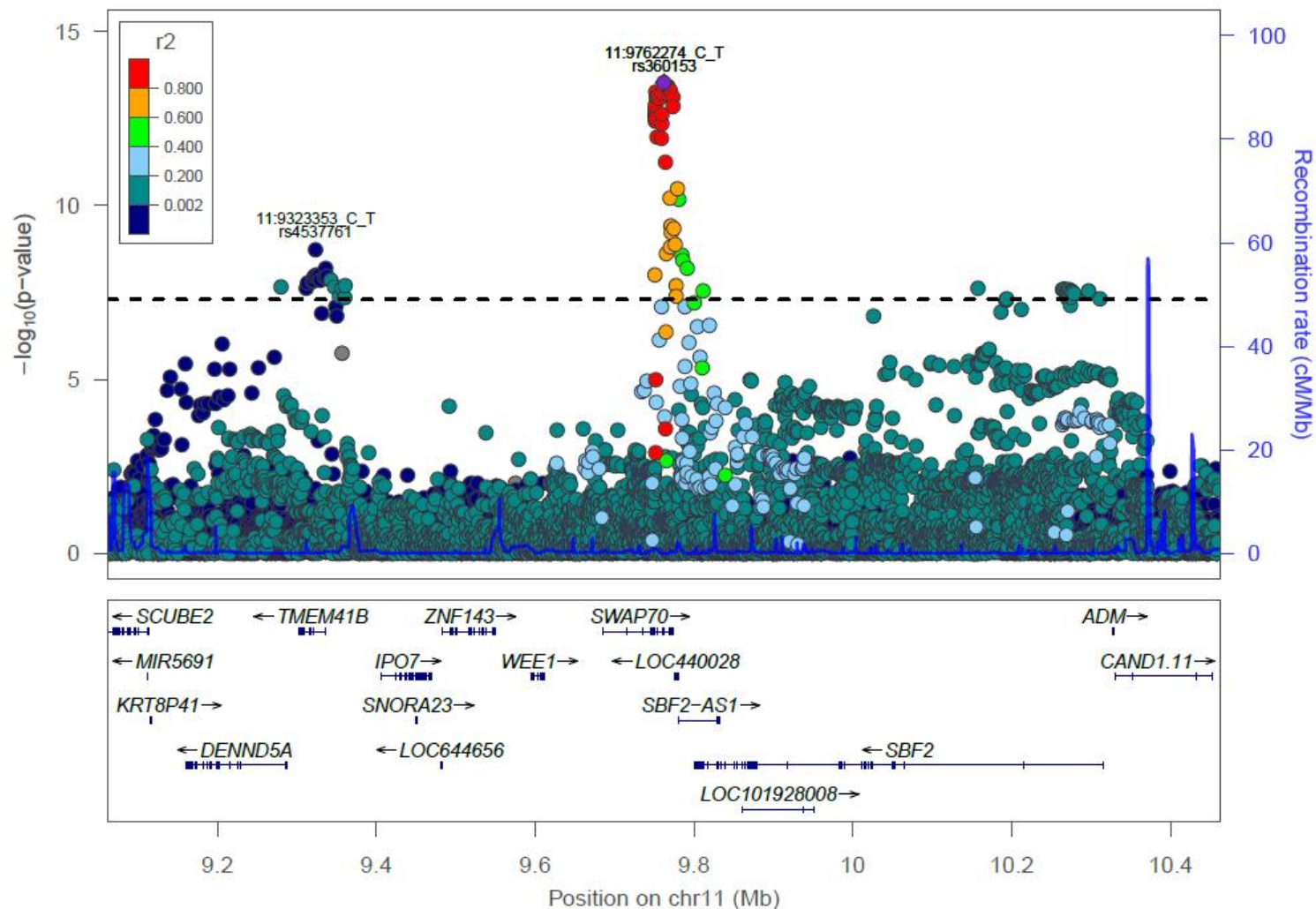
New polygenic risk score (PRS) improves prediction of first-onset and recurrent CAD risk



Challenge: enhanced methods to improve PRS?

- Combine multiple existing PRS methods?
- Allow for interaction effects?
- Combine PRS for risk factors with PRS for disease?
- **Translate PRS across ethnicities**

Linking genomic regions with coronary artery disease

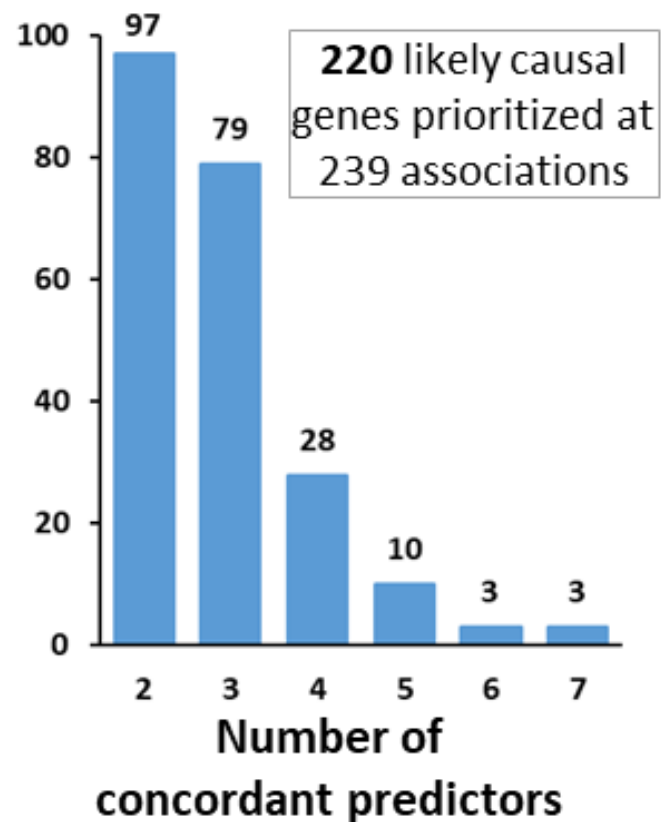


Integrating predictive features to identify ~200 potential causal effector genes

Sentinel variant	Prioritized gene(s)	Number of supporting predictors	Nearest gene	Monogenic disorder	Previous rare variant	Protein-altering variant	Drug / MR	PoPS	eQTL	Mouse knock-out
rs11591147	<i>PCSK9</i>	7	■	■	■	■	■	■	■	■
rs3918226	<i>NOS3</i>	7	■	■	■	■	■	■	■	■
rs72658867	<i>LDLR</i>	7	■	■	■	■	■	■	■	■
rs268	<i>LPL</i>	6	■	■	■	■	■	■	■	■
rs1051338	<i>LIPA</i>	6	■	■	■	■	■	■	■	■
rs116843064	<i>ANGPTL4</i>	6	■	■	■	■	■	■	■	■
rs12864131	<i>CDK8</i>	5	■	■	■	■	■	■	■	■
rs515135	<i>APOB</i>	5	■	■	■	■	■	■	■	■
rs1250247	<i>FN1</i>	5	■	■	■	■	■	■	■	■
rs2107732	<i>CCM2</i>	5	■	■	■	■	■	■	■	■
rs2244608	<i>HNF1A</i>	5	■	■	■	■	■	■	■	■
rs738408	<i>PNPLA3</i>	5	■	■	■	■	■	■	■	■
rs781663	<i>REST</i>	5	■	■	■	■	■	■	■	■
rs7485656	<i>SCARB1</i>	5	■	■	■	■	■	■	■	■
rs7412	<i>APOE</i>	5	■	■	■	■	■	■	■	■
rs76866386	<i>ABCG8</i>	5	■	■	■	■	■	■	■	■
.....								



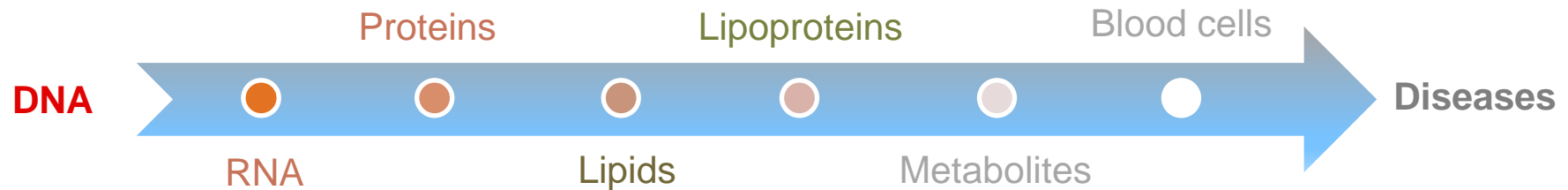
Genes



Challenge: better strategies for causal gene prediction?

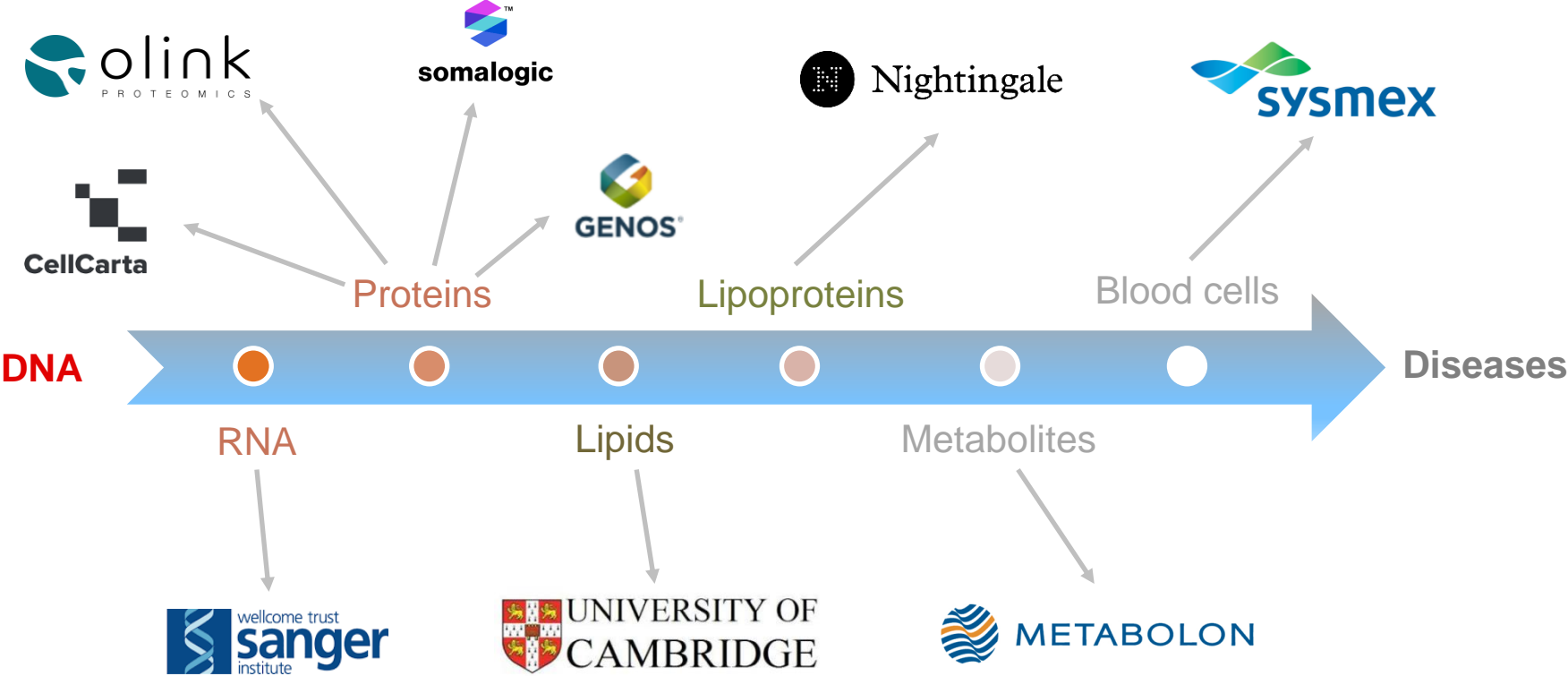
- Weighting different predictors differently?
- Incorporate predictions from CVD risk factors (e.g. blood pressure, lipids)
- Machine-learning approaches like OpenTargets?

Integrating genomics and multi-omics to understand disease aetiology



1. **Colocalisation** with disease GWAS signals
2. **Mendelian randomisation** (both specific & wide-angle)

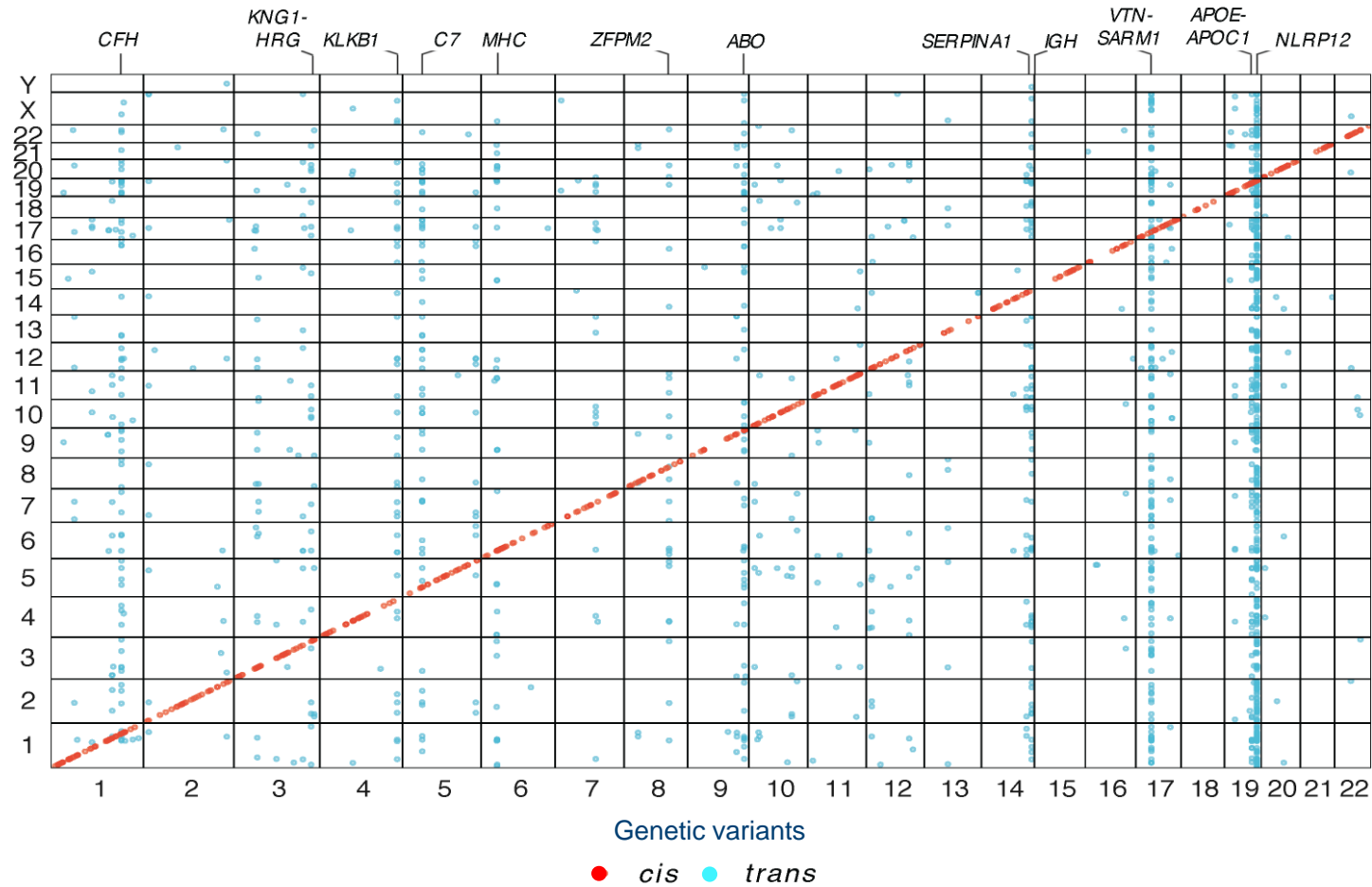
INTERVAL – a 50,000 person multi-omics cohort



GWAS of ~3500 plasma proteins

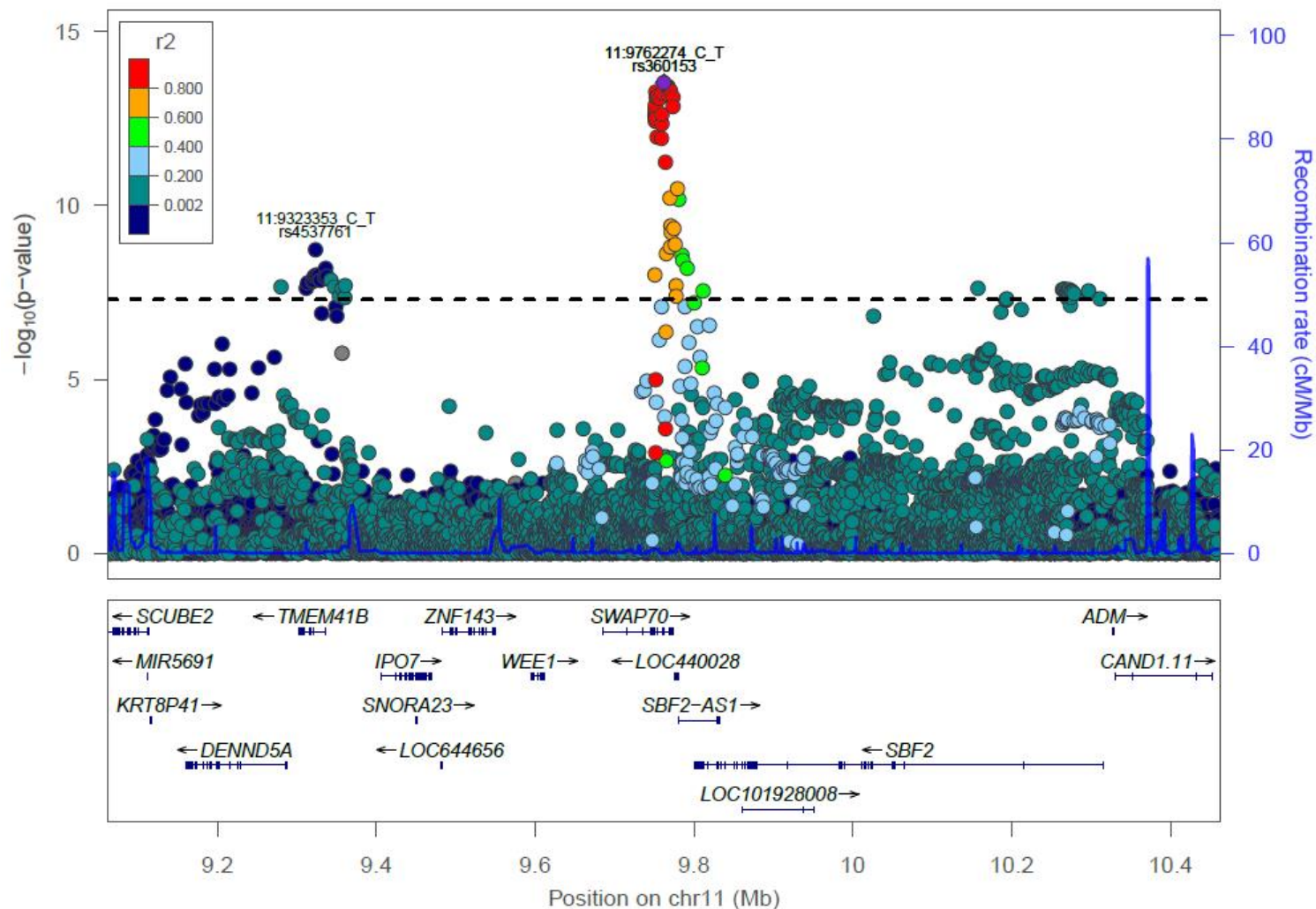


Genes
encoding
target
proteins

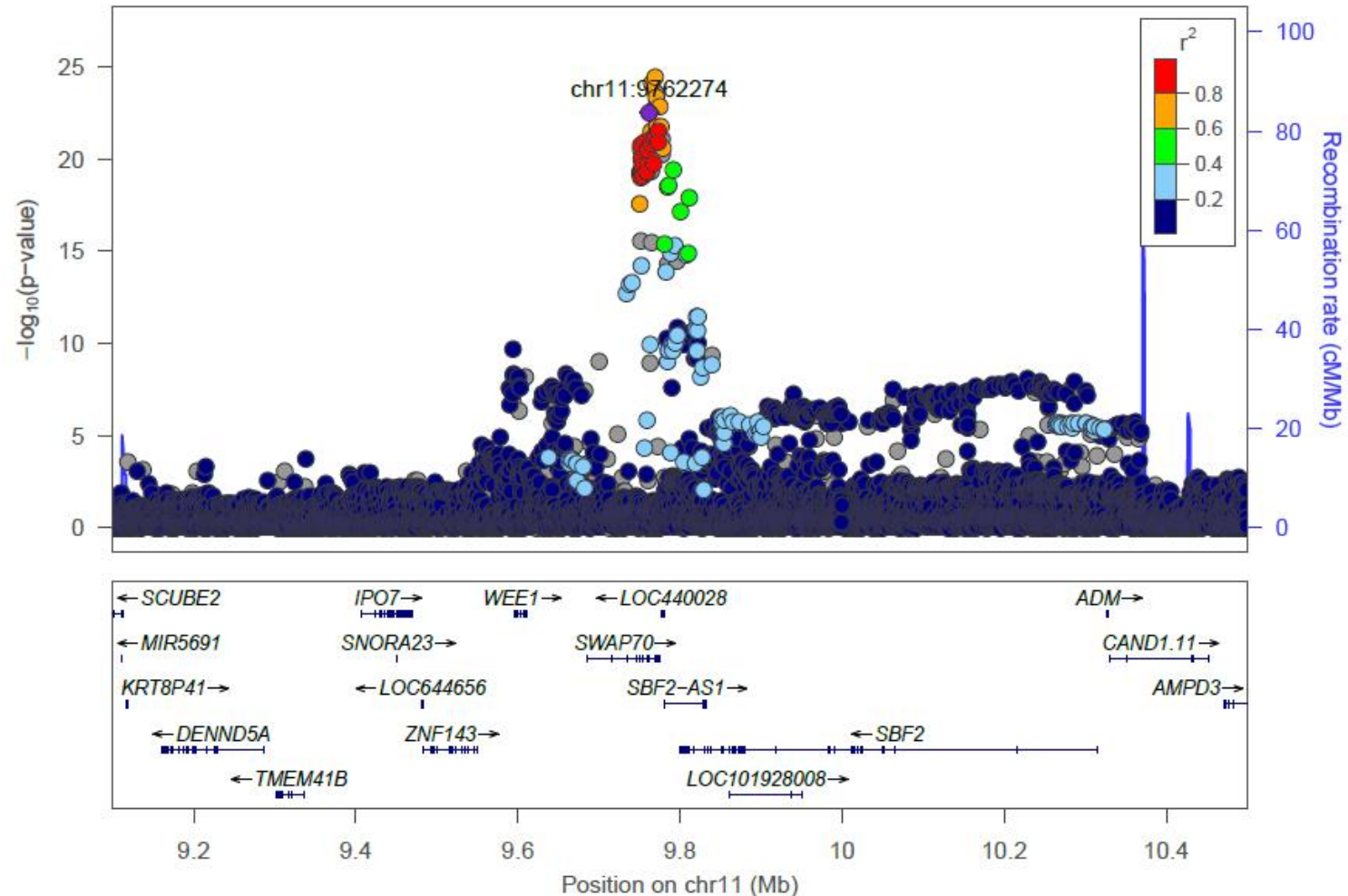


3500 proteins
+
3200 participants
=
1900 pQTLs

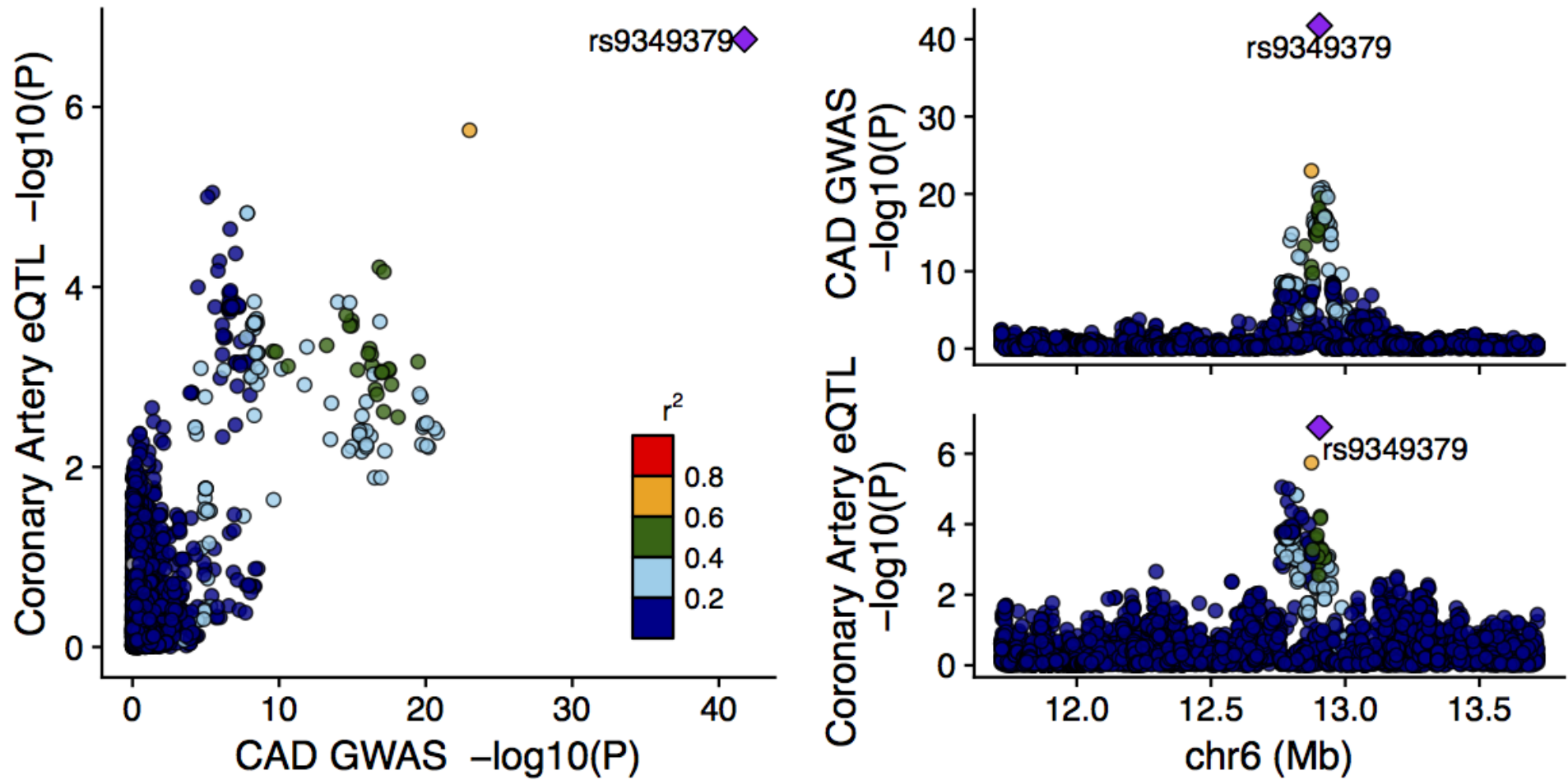
Linking genomic regions with coronary artery disease



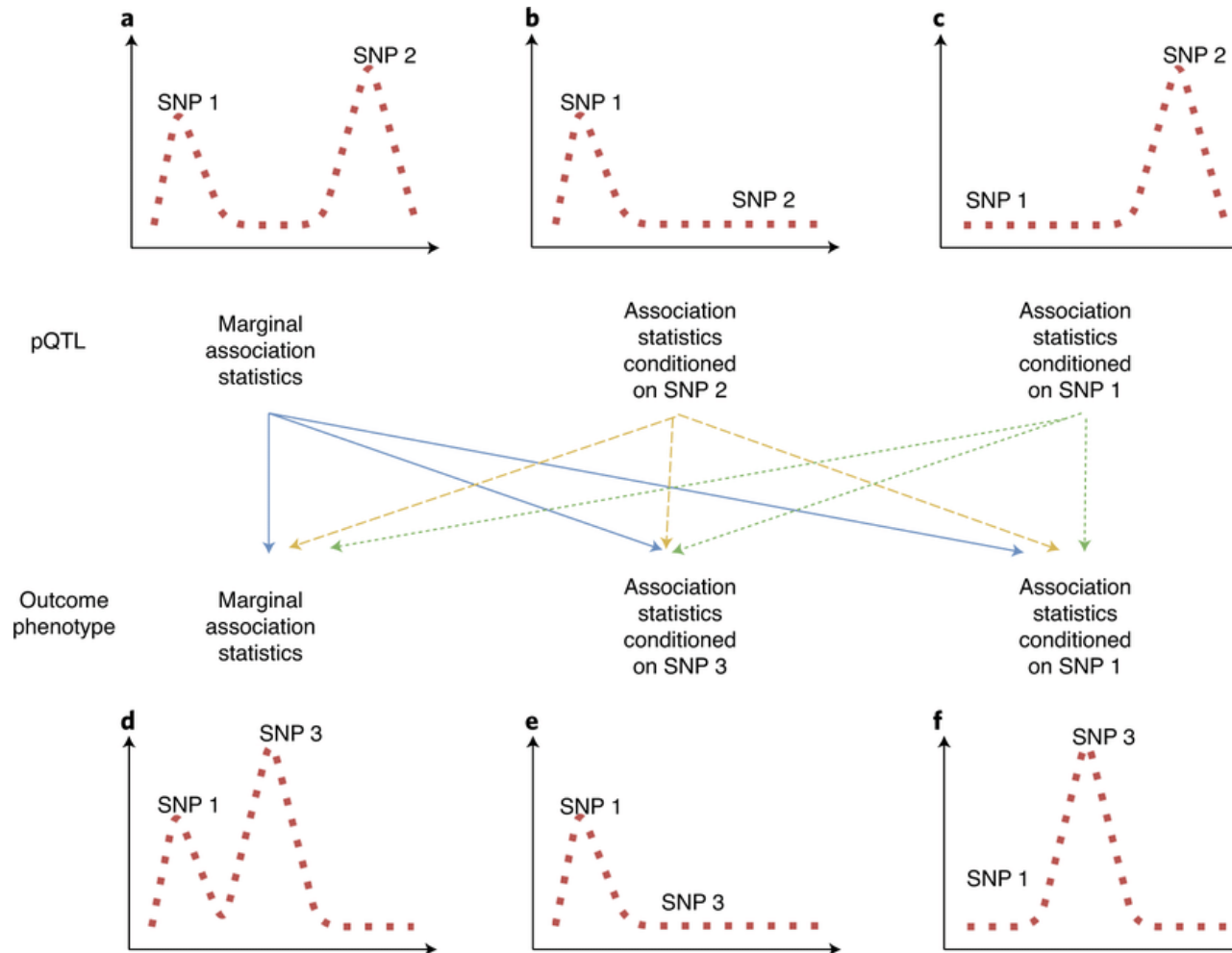
Coronary disease variants also associate with plasma SWAP70 protein levels



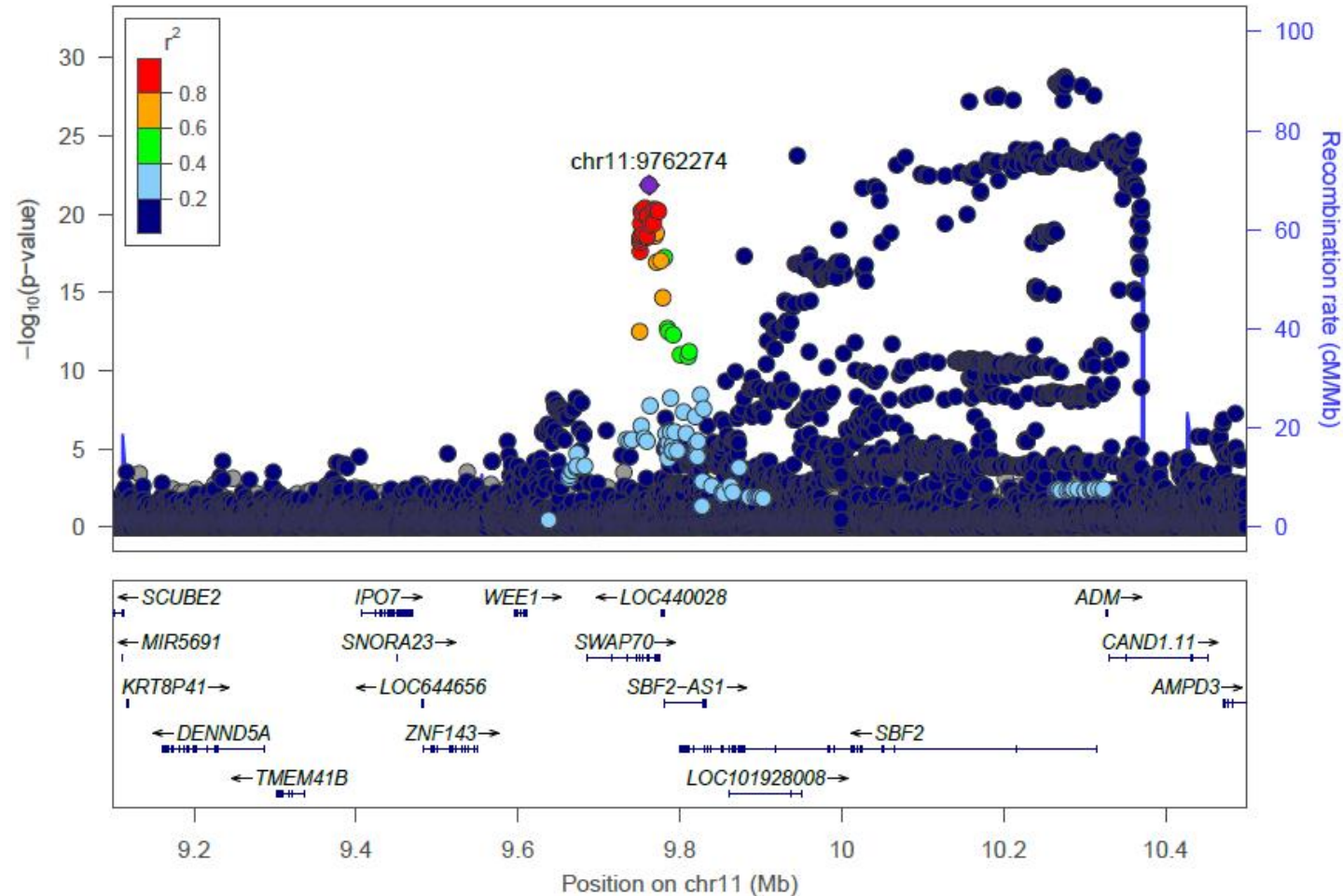
Statistical colocalisation testing



Pairwise conditional colocalisation (PwCoCo) testing



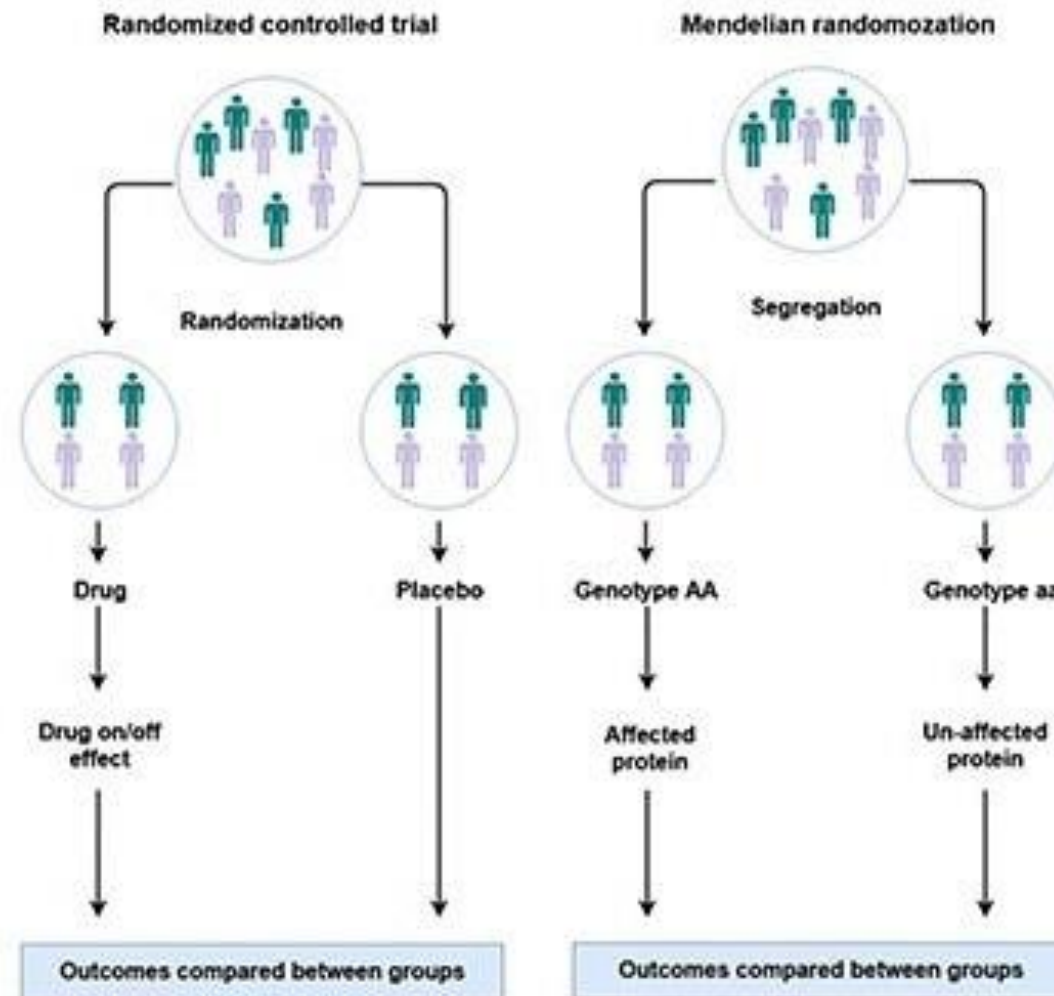
Systolic blood pressure signal at SWAP70 colocalises too..... once the independent neighbouring signal is conditioned out



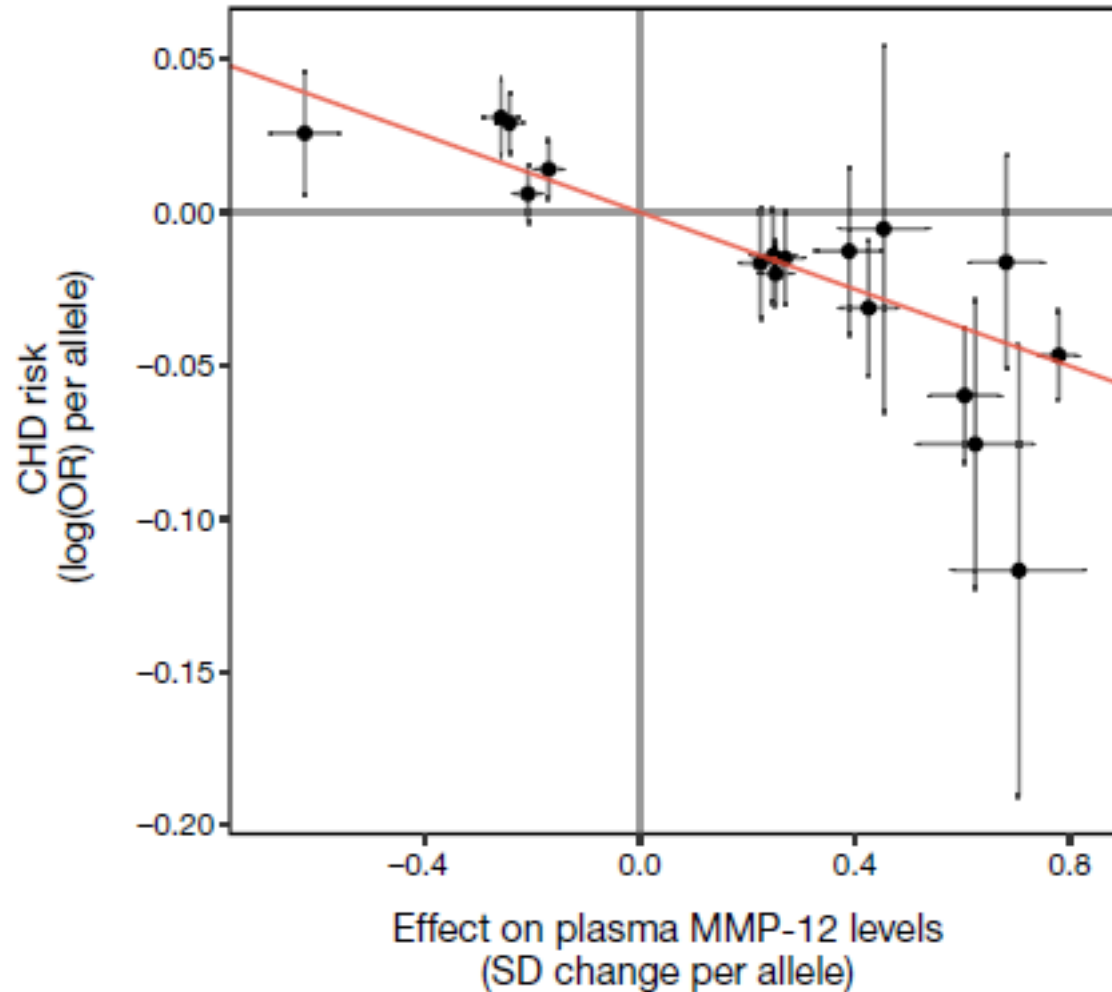
Challenge: enhancing colocalisation methods?

- Methods that account for multiple independent associations?
- Methods that appropriately handle >3 traits?
- Methods that handle different patterns of linkage disequilibrium (between-variant correlation)?

Mendelian randomisation to infer causality of molecular risk factors

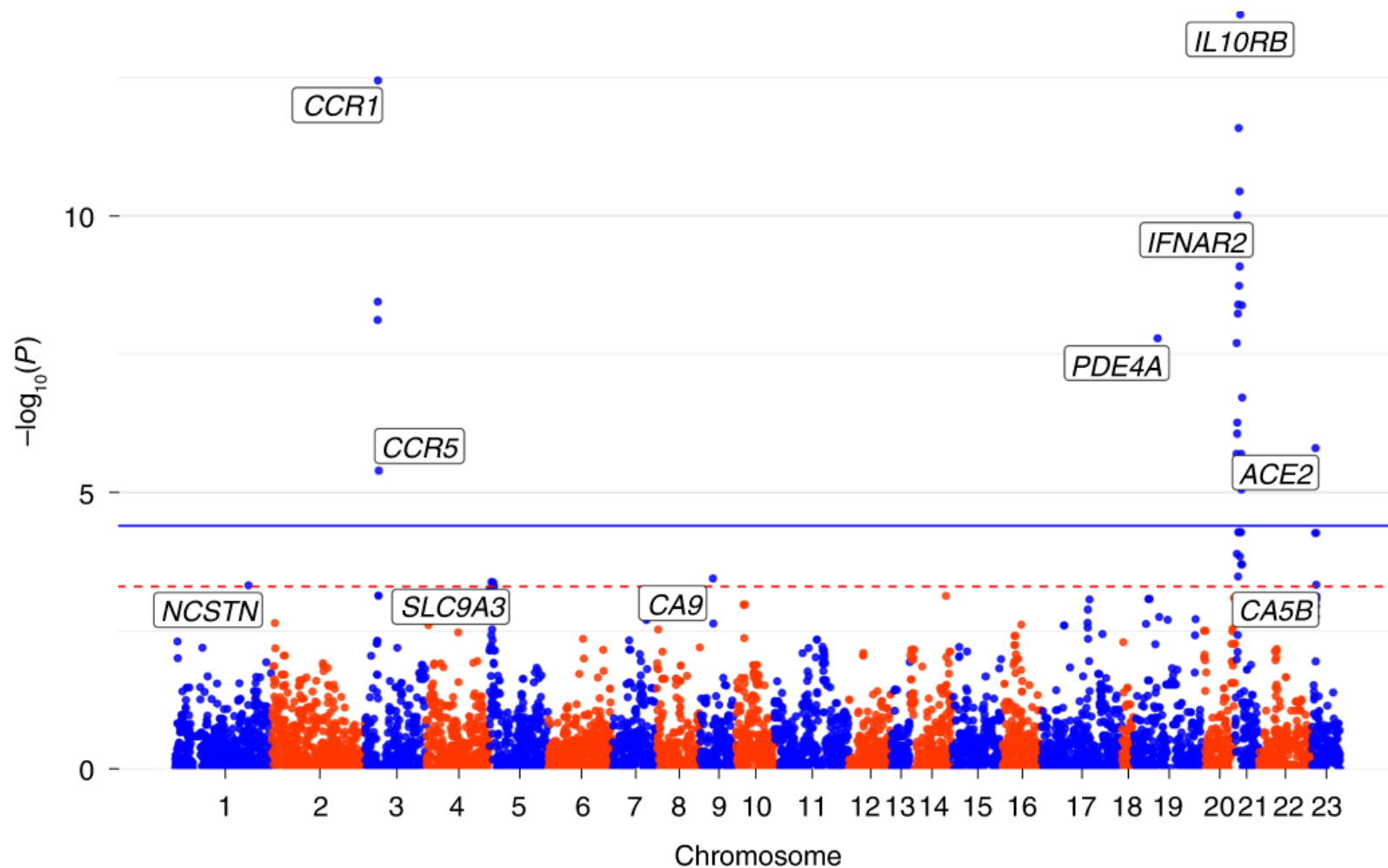


MR suggests inverse causal association of plasma matrix metalloproteinase-12 levels with CAD



- Plasma MMP-12 levels are positively associated with risk of first-onset or recurrent CAD events
- Suggests that MMP-12 is likely to be a protective biomarker, produced in response to vascular damage

Integrating genomics, transcriptomics, proteomics and COVID-19 outcomes



- *Cis*-MR for eQTLs and pQTLs
- Integrate with COVID-HGI GWAS summary statistics
- Test colocalization to avoid confounding by LD

Summary

- Large-scale genetic studies are revealing links between molecular risk factors and disease aetiology
- Despite small effect sizes of individual variants, useful predictive tools and causal pathways can be derived
- Genetic epidemiologists are still (largely) using very basic statistical models - huge scope for improvements through enhanced approaches.....

Acknowledgements

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