



Expression Quantitative Trait Loci for *ALMS1* and Their Influence on the Symptoms of Alström Syndrome

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ABSTRACT Genome-wide expression quantitative trait loci (eQTL) were identified for *ALMS1*, which is known as a causal gene for Alström syndrome. Genetic associations of nucleotide variants were examined with expression of the gene encoding *ALMS1* in lymphoblastoid cell lines derived from 373 Europeans. The analyses revealed six cis-regulatory eQTLs for *ALMS1* ($P < 5 \times 10^{-8}$), showing a strong signal ($P < 10^{-20}$) upstream of the gene. Transcriptome-wide association analysis with these eQTLs revealed that 16 genes shared eQTLs with *ALMS1* ($P < 1.02 \times 10^{-4}$). These genes included MOCS3, CDH3, C1orf100, CXCL14, CDK4, and PCBD1, which are involved in the symptoms of Alström syndrome. This study suggested six novel eQTLs for *ALMS1* and their associations with 16 additional genes. The candidate genes whose expressions were associated with eQTL for *ALMS1* might directly or indirectly cause symptoms of Alström syndrome. Further studies are required to understand their underlying regulatory mechanisms of the eQTLs to improve our understanding of the function of *ALMS1* and other causal genes for Alström syndrome.

INTRODUCTION

Alström syndrome is known as a rare monogenic recessive ciliopathy caused by mutations in *ALMS1* on chromosome 2 (2p13.1), which is accompanied by a variety of symptoms: retinal dystrophy, hearing loss, childhood obesity and diabetes, cardiomyopathy, renal dysfunction and multiple organ failure (Hearn et al. 2002; Álvarez-Satta et al. 2015; Marshall et al. 2015). *ALMS1* localizes to centrosomes and basal bodies of primary cilia and plays a critical role in intracellular transport and cell cycle control (Hearn et al. 2005; Zulato et al. 2011; Collin et al. 2012).

Genetic association studies have been conducted to identify mutant variants of the *ALMS1* that causes Alström syndrome, especially focusing on its exons. Most variants triggering the syndrome were observed within its exons 1, 5, 8, 10, 11, 12, 16, 18, and 20 (Marshall et al. 2007; Ichihara et al. 2013; Taşdemir et al. 2013; Casey et al. 2014). In particular, exons 8, 10, and 16 reported with more than 200 mutations have been

considered as hotspots (Marshall et al. 2015). The variants were associated with specific symptoms of the syndrome. For example, patients with variants in exon 16 had retinal degeneration, urologic dysfunction, or diabetes mellitus (Marshall et al. 2007). Glutamic acid repeat polymorphism in exon 1 caused early-onset myocardial infarction (Ichihara et al. 2013).

Many symptoms of Alström syndrome have been observed with relevant endocrine and metabolic characteristics (Han et al. 2018). It is, however, difficult to understand the relationship between *ALMS1* and Alström syndrome. Specifically, it is questionable whether a variety of symptoms is caused by only one gene. Some genes other than *ALMS1* might also be involved in symptoms of the syndrome, possibly by influence of or interaction with *ALMS1*. Moreover, it is difficult to understand that each variant within the same gene may produce its specific symptoms. These are critical obstacles to understand underlying molecular mechanisms of Alström syndrome.

Objectives

Regulatory nucleotide sequence variants for expressions of *ALMS1* might provide some evidence to understand the symptoms of Alström syndrome. This study aimed to identify eQTLs for *ALMS1* and to examine associations between the eQTLs and expressions of other genes.

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MATERIAL AND METHODS

Subjects and Data

Transcriptional expression data produced by the GEUVADIS consortium were used to identify eQTLs for genes, including *ALMS1*. They were expressions of messenger RNAs in lymphoblastoid cell lines of 373 Europeans from CEPH (Utah residents with Northern and Western European ancestry from the CEPH collection), Finns, British, and Toscani in the 1000 Genomes Project (Lappalainen et al. 2013). The gene expression was quantified by summing all reads per kilobase of transcript per million (RPKM) for each gene. The corresponding genotypic data of the 373 individuals was retrieved from the 1000 Genomes Project Phase 1. They included 5,941,815 SNPs filtered by minor allele frequency <0.05.

Statistical Association Analysis

The researchers conducted a genome-wide association analysis to discover eQTLs for the *ALMS1* gene. A mixed model was employed for testing genetic association of each nucleotide variant with expression of *ALMS1* to avoid spurious association produced by population stratification (Shin and Lee 2015; Lee 2018). The analytical model was constructed under the additive model as follows:

$$y = \mu + x\beta + g + \epsilon$$

Where y is the vector of *ALMS1* expression, β is the fixed minor allele effect of the candidate nucleotide variant, and x is the vector for β , including elements of 0, 1, and 2 for homozygous genotype of the major allele, heterozygous genotype, and homozygous genotype of the minor allele. g is the vector of random polygenic effects with $g \sim N(0, G\sigma_g^2)$ where G is the genomic similarity matrix with elements of pairwise genomic similarity coefficients based on genotypes of nucleotide variants, and σ_g^2 is the polygenic variance component. The genomic similarity coefficient between individuals j and k was estimated as $g_{jk} = \frac{1}{n_v} \sum_i \frac{(\omega_{ij} - 2p_i)(\omega_{ik} - 2p_i)}{2f_i(1-p_i)}$ where n_v is the number of nucleotide variants that contribute to the genomic similarity, ω_{ij} and ω_{ik} represent the number of minor alleles for the nucleotide variant i , and p_i is the frequency of the minor allele. ϵ is

the vector of random residuals with $\epsilon \sim N(0, I\sigma_\epsilon^2)$ where I is the identity matrix, and σ_ϵ^2 is the residual variance component. The variance components for polygenic effects and residuals was estimated using average information restricted maximum likelihood, and then the fixed minor allele effect was tested using the mixed model equations with the estimates of variance components. The eQTL association analysis was conducted using Genome-wide Complex Trait Analysis (GCTA) version 1.26 (Yang et al. 2011). Multiple testing was applied with a significance threshold of $P = 5 \times 10^{-8}$. Linkage disequilibrium (LD) blocks was estimated using Haploview to determine independent association signals. Further association analysis was conducted transcriptome-wide to identify other genes which expressions were associated with the identified eQTLs. Genetic associations in the transcriptome-wide analysis were tested with a significance threshold of $P = 1.02 \times 10^{-4}$.

Functional Analysis

Functions of the SNPs associated with expression of *ALMS1* were investigated using freely available databases and software. RegulomeDB provided a score for each SNP based on how likely to affect binding and to link to expression of a gene target (<http://www.regulomedb.org>). HaploReg showed their regulatory functions as promoters and enhancers by regulatory chromatin states resulted from ChIP-Seq studies with H3K4me1 and H3K4me3 histone modifications (v4.1; <http://compbio.mit.edu/HaploReg>).

RESULTS

Genome-wide association analysis for expression of *ALMS1* revealed 489 SNPs in and around the gene on chromosome 2 ($P < 5 \times 10^{-8}$), and the association signals are presented in Figure 1. In particular, strong associations ($P < 10^{-20}$) were found with SNPs upstream of the gene. Six linkage disequilibrium blocks at the association signals were constructed in Figure 1D, indicating six eQTLs. Their representative SNPs are summarized in Table 1. The RegulomeDB showed that 27 nucleotide variants at the signals were likely to affect binding and linked to expression of a gene target in Table 2. In Table 3, the HaploReg showed

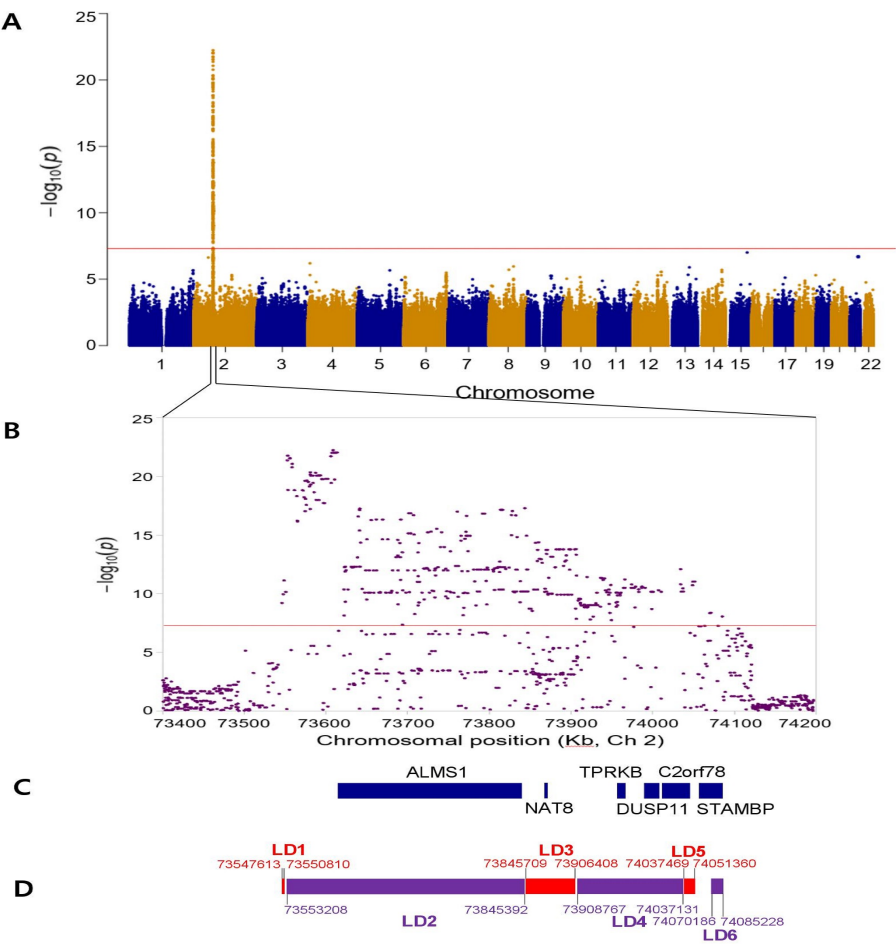


Fig. 1. Genome-wide expression quantitative trait loci (eQTLs) for *ALMS1*. **A:** Manhattan plot. The red horizontal line indicates the genome-wide significance threshold of $P = 5 \times 10^{-8}$. **B:** Regional plot for eQTLs. **C:** Genes located around eQTLs. **D:** Linkage disequilibrium blocks for eQTLs

Table 1: Expression quantitative trait loci (eQTLs) identified for *ALMS1* by genome-wide association analysis

eQTLs	SNP ^f	Position (Ch2, bp)	Allele ^g	MAF	Beta	P
1	rs6706562	73548787	G/C	0.24	0.248	7.47×10^{-12}
2	rs11693531	73608614	G/C	0.29	0.313	5.83×10^{-23}
3	rs13009035	73845709	T/C	0.36	0.239	1.14×10^{-15}
4	rs79814134	74034185	G/T	0.27	0.231	8.26×10^{-13}
5	rs732778	74049341	A/G	0.32	0.205	9.55×10^{-12}
6	rs1036113	74071151	T/C	0.25	0.199	4.31×10^{-9}

MAF: Minor allele frequency; SNP: Single nucleotide polymorphism

^frepresentative SNPs

^gminor allele/major allele

Table 3: Contd...

<i>eQTL</i>	<i>SNP</i>	<i>Promoter histone mark</i>	<i>Enhancer histone mark</i>	<i>DNase</i>	<i>Proteins bound</i>	<i>Motifs changed</i>
3	rs4852939		BLD			
	rs12472502				FOXA1,FOXA2	5 altered motifs
	rs6546862		OVRY			RXRA
	rs4852950		LIV, GI	GI		
	rs4852951	LIV, ADRL	10 tissues	LIV		GR,NRSF
	rs4852952	BLD, LIV, ADRL		11 tissues	LIV,VAS	SP1,TR4 RFX5, SRF
	rs4852953	BLD, LIV, ADRL		11 tissues	LIV,VAS	SP1,TR4
						NF-I, RFX5,SRF
	rs4852954	BLD, LIV, ADRL		10 tissues	7 tissues	14 bound proteins
						6 altered motifs
	rs12991161		8 tissues			5 altered motifs
	rs13017182		ESRD			Bbx,Hbp1,Pax-8
	rs13027816		LIV			4 altered motifs
4	rs7570683		BLD			CTCF,RXRA
	rs4341964		BLD			4 altered motifs
	rs2421582		BLD	BRN		5 altered motifs
	rs12620018		BLD			
	rs17350125		BLD, GI			10 altered motifs
	rs4852976		BLD, GI			MIF-1
	rs11126415		BLD			Pou2f2, Pou6f1, TATA
						Foxa,Pax-4,STAT
	rs6748233			LNG		Pax-4,Pbx-1, RFX5
	rs4852978		BLD, ADRL			
	rs11891140	10 tissues	6 tissues	8 tissues	HEY1,CFOS,NFYA	
	rs7591112	5 tissues	8 tissues	23 tissues	6 bound proteins	9 altered motifs
	rs12713789		PANC			LRH1,Pax-5
	rs12713790		PANC			Pax-5
	rs12713791		PANC			
	rs6749841		PANC, LIV			5 altered motifs
	rs6750494		PANC, LIV			Zfp281
	rs6750515		PANC, LIV	PANC		11 altered motifs
	rs6750877		GI, LIV			HEY1,TBX5
	rs12615807		GI			11 altered motifs
	rs2421675				CTCF,POL2	6 altered motifs
	rs2421674			MUS	CTCF	5 altered motifs
	rs12713793		ESRD			AP-2,AhR::
						Arnt,AhR
	rs11894953	24 tissues		53 tissues	34 bound proteins	
	rs17350188	24 tissues	ESRD, BLD	31 tissues	4 bound proteins	Hsf
	rs11126416	VAS	BLD, ADRL	6 tissues	GATA2	ERalpha-a,Myc
	rs11126417		BLD, ADRL, VAS	VAS		
	rs12713798		12 tissues	LNG,HRT,VAS		7 altered motifs
	rs12624267		14 tissues	4 tissues		Myc
	rs2421559	HRT	BLD, BRN			GR,HNF1
	rs2272051	24 tissues		42 tissues	17 bound proteins	
	rs3813228	24 tissues	GI	53 tissues	32 bound proteins	4 altered motifs
	rs13006598	ESC, LNG, LIV	4 tissues	LIV	USF1	10 altered motifs
	rs13383097		BLD			4 altered motifs
	rs7597302		BLD			6 altered motifs
5	rs2462127	BLD		BLD		
	rs732778	BLD		BLD		Cart1,Pdx1
	rs10203740			32 tissues	4 bound proteins	6 altered motifs
6	rs7594485		GI, LIV			BAF155

VAS: Vascular; HRT: Heart; ESC: ES-13 cells; iPSC: Induced pluripotent stem cells; SPLN: Spleen; LNG: Lung; LIV: Liver; BLD: Blood; PANC: Pancreas; End-stage renal disease; FAT: Fat; GI: Gastrointestinal tract; MUS: Muscle; BONE: Bone; BRN: Brain; OVRY: Ovary; ADRL: Adrenal gland

Table 2: RegulomeDB functional score for nucleotide variants located within the expression quantitative trait loci (eQTLs) identified for *ALMS1*

eQTL	SNP	Score ^a
2	rs12478346	1f
	rs6706409	1f
	rs7576824	1f
	rs10496191	1f
	rs1083922	1f
	rs7598660	1f
	rs1052161	1f
3	rs4346412	1f
	rs4852939	1f
	rs12472502	1d
	rs4852954	1b
	rs13017182	1f
	rs2421586	1f
	rs7606947	1f
4	rs12052539	1f
	rs11891140	1f
	rs7591112	1f
	rs2421674	1f
	rs17009372	1f
	rs12713793	1d
	rs11894953	1f
	rs17350188	1f
	rs35791379	1f
	rs12713798	1f
	rs12624267	1f
	rs2272051	1f
	rs3813228	1f

^aThe smaller the number and the nearer the letter a, the stronger the function

1b: eQTL + TF binding + any motif + DNase Footprint + DNase peak

1d: eQTL + TF binding + any motif + DNase peak

1f: eQTL + TF binding /DNase peak

that 99 nucleotide variants might be a promoter, an enhancer, or a protein binding site in a variety of tissues.

Transcriptome-wide association analysis with the identified eQTLs showed that the eQTLs also have associations ($P < 1.02 \times 10^{-4}$) with expressions of 16 additional genes in Table 4. They were all located in chromosomes other than chromosome 2 except for TPRKB gene. The rs6706562 was associated with expressions of nine additional genes, whereas no extra gene was found for the signal with rs732778. The expressions of TPRKB, MOCS3, CDH3, and TYW1 were associated with multiple eQTLs.

DISCUSSION

The current study identified six eQTLs for regulating expression of *ALMS1* known as the caus-

Table 4: Transcriptome-wide associations with the expression quantitative trait loci (eQTLs) identified for *ALMS1*^a

eQTL	Gene	Chromosome	Beta	P
1	LRRC8D	1	0.563	1.00×10^{-04}
	ALMS1	2	0.248	7.47×10^{-12}
	TPRKB	2	-0.65	9.57×10^{-06}
	FEM1C	5	-0.249	8.52×10^{-05}
	CXCL14	5	0.137	9.11×10^{-05}
	TYW1	7	1.257	9.43×10^{-05}
	DSCC1	8	-0.353	3.93×10^{-05}
2	CDK4	12	-4.498	1.02×10^{-04}
	WWP2	16	-1.714	9.83×10^{-05}
	SNPH	20	0.038	2.39×10^{-05}
	ALMS1	2	0.313	5.83×10^{-23}
	TPRKB	2	-0.539	5.40×10^{-05}
	TYW1	7	1.287	9.67×10^{-06}
	C8orf55	8	-0.383	6.70×10^{-05}
3	CDH3	16	-0.049	7.23×10^{-05}
	MOCS3	20	-0.123	4.53×10^{-05}
	ALMS1	2	0.239	1.14×10^{-15}
	TPRKB	2	-0.583	1.84×10^{-06}
	CDH3	16	-0.046	4.21×10^{-05}
	MOCS3	20	-0.109	8.13×10^{-05}
	C1orf100	1	-0.02	3.10×10^{-05}
4	ALMS1	2	0.231	8.26×10^{-13}
	TPRKB	2	-0.542	3.95×10^{-05}
	ADPRHL1	13	0.076	4.92×10^{-05}
5	ALMS1	2	0.205	9.55×10^{-12}
6	ALMS1	2	0.199	4.31×10^{-09}
	SERPINI1	3	0.192	1.25×10^{-05}
	PCBD1	10	-1.778	8.14×10^{-05}

^aAssociations with significance threshold of $P = 1.02 \times 10^{-4}$ are presented

al gene for Alström syndrome. They were all located near or within the gene on chromosome 2. They are suspected as cis-regulatory variants for expression of *ALMS1*.

The potential regulatory signals might influence the syndrome or its symptoms. rs10206899 in eQTL3 ($P = 5.0 \times 10^{-5}$) was associated with serum creatinine, a marker of kidney function, and it was also associated with chronic kidney disease, a symptom of the syndrome (Chambers et al. 2010). The metabolite X-11787 influencing chronic kidney disease and diabetes (another symptom) was associated with rs6546857 in eQTL2 ($P = 9.58 \times 10^{-24}$) and rs13538 in eQTL3 ($P = 1.71 \times 10^{-23}$) (Yu et al. 2013).

The current study showed that the six eQTLs associated with *ALMS1* expression were further associated with the expression of other genes with the same or quite similar functions as the

following symptoms of Alström syndrome. Both eQTL2 and eQTL3 were associated with the expression of *MOCS3* in the current study, and its missense variant (rs7269297, $P = 3.08 \times 10^{-6}$) was identified for association with susceptibility to chronic obstructive pulmonary disease (Jackson et al. 2016). *CDH3* identified for association of its expression with eQTL2 and eQTL3 was upregulated in idiopathic pulmonary fibrosis (Selman et al. 2006). The expression of *C1orf100* associated with eQTL4 was associated with decreased lung function ($P < 10^{-4}$) (Forno et al. 2012). *CXCL14* associated with eQTL1 enhanced insulin-dependent glucose uptake in adipocytes as a growth hormone-induced gene, and its expression caused high-fat diet-induced obesity (Takahashi et al. 2007). The *CDK4* associated with eQTL1 inactivated growth-suppressive function of the retinoblastoma gene product (pRb) by phosphorylation (Kato et al. 1993). Mutation of *PCBD1* associated with eQTL6 may cause early-onset diabetes in patients with mild neonatal hyperphenylalaninemia (Simaite et al. 2014). Further studies are required to understand relationship between these candidate genes and Alström syndrome. Differential expression of the genes between controls and patients with Alström syndrome can be preferentially examined.

To identify eQTLs for *ALMS1*, the current study employed an analytical model with random effects to explain polygenic effects on gene expression. As a result, the method can reduce false positive eQTLs. Bayesian inference based on the mixed model was not applied to the current analysis because of expensive computing cost. Intensive computing is required for the Bayesian method to numerically marginalize joint posterior distribution using a Markov chain Monte Carlo. Nevertheless, the Bayesian method may have a benefit in reflecting uncertainty in unknown parameters (Lee 2019).

Researchers in investigating many symptoms with the candidate genes who shared eQTLs with *ALMS1* should pay a careful attention. First, although it is hard to cause all the symptoms of Alström syndrome by only one gene, various symptoms might be explained partially by different proteins produced from *ALMS1* with tissue specific functions. Efforts on profiling of eQTLs for *ALMS1* by tissues would be useful to verify

the possibility. Secondly, the current study identified eQTLs based on differential expression of *ALMS1* while many studies for Alström syndrome have dealt with the patients with lacked or non-functional (for example, truncated) proteins of *ALMS1*. Thus, the researchers cannot exclude a possibility that such a difference produces false positives by such an extrapolation. Thirdly, there was a limitation of the current study where eQTLs were identified for expressions of *ALMS1* in only lymphoblastoid cells. Studies with symptom-specific cells of Alström syndrome would help understand the detailed mechanisms of the syndrome.

CONCLUSION

Alström syndrome is famous for its causal gene, *ALMS1*. However, the single gene can hardly explain its various symptoms. The researchers cannot exclude a possibility that the candidate genes whose expressions were associated with eQTL for *ALMS1* might produce the symptoms of Alström syndrome, such as pulmonary dysfunction, retinal dystrophy, obesity, and diabetes. Since association with expression of *ALMS1* was more significant than that with any other genes, *ALMS1* might be involved in regulating expressions of these genes.

RECOMMENDATIONS

Further studies are needed to reveal underlying regulatory mechanisms of the eQTLs shared by *ALMS1* and the candidate genes, and this would be a key to understand the molecular mechanisms of the syndrome.

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