kTWAS: integrating kernel-machine with transcriptome-wide association studies improves statistical power and reveals novel genes

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Abstract

The power of genotype-phenotype association mapping studies increases significantly when the contributions of multiple variants in a focal genetic region are aggregated effectively. Currently, two categories of frequently used methods are used to aggregate variants. Transcriptome-wide association studies (TWAS) represent a category of emerging methods that utilize gene expressions to select genetic variants, before using a pretrained linear combination of selected variants for downstream association mapping. In contrast, kernel methods such as SKAT measure the genetic similarity in a focal region as modelled by various types of kernels to associate genotypic and phenotypic variance, allowing such methods to model nonlinear effects. Thus far, no thorough comparison has been made between these categories, and there are also no methods that integrate these two approaches. In this work we have developed a novel method called kTWAS that leverages TWAS-like feature selection followed by a SKAT-like kernel-based score test, to combine advantages from both approaches. We demonstrate the improved power of kTWAS against TWAS and multiple SKAT-based protocols through extensive simulations, and identify novel disease associated genes in WTCCC genotyping array data and MSSNG (Autism) sequence data. The source code for kTWAS and our simulations are available in our GitHub repository (https://github.com/theLongLab/kTWAS).

Keywords
Transcriptome-wide association studies (TWAS), Kernel methods, Power analysis, Nonlinear genetic effects.

Introduction

Transcriptome-wide association studies (TWAS) have emerged as an important technique for associating genetic variants and phenotypic changes[1-5]. Pioneered by Gamazon et al.[6],
TWAS is typically conducted in two steps: First, a model is trained to predict gene expression from genotypes, using a reference dataset which contains both expression and genotype information for each sampled individual. Techniques including ElasticNet[6], Bayesian sparse linear mixed mode (BSLMM)[7-9], deep auto-encoder mode[10] and deep learning regression model[11] are used to fit this genotype-expression model. The pretrained genotype-expression model is then used to predict expression activity from the main dataset for genotype-phenotype association mapping (referred to as GWAS dataset hereafter), which contains genotype and phenotype information, but not expression data, for each case or control in the GWAS cohort. Initiated by Gusev et al.[8], methods using summary statistics in the GWAS dataset (i.e., meta-analysis) to conduct TWAS were also developed[12]. The key insight of TWAS is that transcriptomic data can be used to select for genetic variants critical to gene expression (i.e., eQTLs), which improve the quality of downstream GWAS. TWAS effectively aggregates sensible genetic variants as linear combinations by modelling genetic contributions to expression. This approach is generally effective regardless of the performance of the genotype-expression model. As a result, despite the low predictive power of the genotype-expression models used in TWAS (with an average $R^2$ around 1%), TWAS has led to significant successes in real data[3, 4, 13-17]. Indeed, as demonstrated in our simulations[18], the use of predicted expressions from a genotype-phenotype model in TWAS can result in better power than the use of experimentally measured expressions. This may be because predicted gene expressions capture the genetic contributions more precisely than actual expression levels, which are subject to noise from environmental factors.

The popularity of TWAS has overshadowed another well-established branch of kernel-machine based models for analyzing genetic association, such as the sequence association kernel test[19, 20](Table 1). The key insight of kernel methods is that the similarity of a genetic region between different subjects can be used to associate the variance of the genotypes and phenotypes in that region without knowing which specific genetic variants are causal in the focal region. As a result, kernel-machine based methods can model the aggregated effects of multiple genetic variants and capture genetic interactions within a local region while being robust to noise. At first glance, TWAS and kernel-based models appear quite different, as TWAS utilizes expression whereas kernel methods are purely DNA-based. Intuitively, TWAS appears to be more powerful as it integrates more information in the form of expression data. However, in our opinion, TWAS and kernel methods are quite comparable because they are both gene-set analyses which test an aggregated set of genetic variants for associations with phenotype. Essentially, TWAS selects and weights genetic variants for aggregation using a linear model, whereas kernel methods rank the relative importance of pre-selected genetic variants using various kernel machines. From the perspective of machine learning, these two methods cover two complementary aspects of feature engineering: how to select and how to organize features in high-dimensional data analysis. Kernel methods organize genetic variants in a flexible way to cope with unknown genetic architecture, but do not provide a quantitative way to pre-select sensible variants, while TWAS models select sensible variants by utilizing gene expressions but assume that variants must be linearly associated to phenotype.
Figure 1. The protocol of kTWAS. (a) Taking advantage of the pretrained genotype-expression model ElasticNet based on PrediXcan. (b) the kernel $K_W$ from SKAT, where $K_W$ is based on the weight of each variant $W = (\beta_1, \ldots, \beta_m)$ in the pretrained genotype-expression model in a. (c) Q score test from SKAT using the TWAS-informed kernel $K$ from above, where $Q$ follows a mixture of chi-squared distributions under the null hypothesis which is shown in c.

Surprisingly, a thorough comparison has yet to be made between TWAS and kernel methods. In their pioneering work on PrediXcan, Gamazon et al.[6] applied SKAT and PrediXcan to Wellcome Trust Case Control Consortium (WTCCC) data[21], reporting that PrediXcan produced an elevated proportion of significant variants across all P values. However, it is unclear whether PrediXcan's ability to detect more significant variants can translate directly to prediction of real phenotypic outcomes, as the authors did not conduct simulations (under which the ground truth is known) to quantify the power of competing methods. Further developments in TWAS have incorporated multiple tissues[22], better models for predicting expression[9] combating artifacts caused by co-expressed genes[23] and extending TWAS to other middle-omes such as proteins[24, 25] and images[26]. These later developments include comparisons to the seminal TWAS tools[6, 8], but have not been compared directly against kernel methods such as the flagship tool SKAT. Not only has this lack of comparisons unfairly discouraged the use of kernel methods but has also missed a golden opportunity to integrate the advantages of both approaches to better model the genetic basis of complex traits.
In this work, we propose a novel model called kTWAS (kernel-based transcriptome-wide association study), which integrates TWAS and kernel methods. We expect that kTWAS will take advantage of TWAS-based feature selection, which is directed by expression data, as well as a kernel-based association test, which is robust to the underlying genetic architecture of the focal phenotype. As a result, the power of kTWAS should be equivalent to TWAS, due to its ability to select genetic variants regulating gene expressions; and also as robust as SKAT to noise and interactions between associated genetic variants.

Using simulated data, we have conducted thorough power comparisons between six protocols: PrediXcan, kTWAS, and four different applications of SKAT under various assumed distributions of genetic effects. (A detailed description and justification of the chosen assumptions is presented in Materials & Methods). Although our main focus is on cases for which subject-level genotypes are available, we have also tested six corresponding protocols in which genotypes are unavailable, and as such the association mapping is conducted using summary statistics (i.e., meta-analysis). We simulate phenotypes based on four representative genetic architectures: an additive model, heterogeneity model, and two interaction models. Multiple effect sizes and heritabilities are tested. While each protocol has unique strengths, in most cases our kTWAS method outperforms alternatives with significant margins. As expected, the relative power of each method is similar when the corresponding meta-analysis method is applied. Moreover, we have conducted extensive real data analysis using kTWAS, which identified a larger number of significant genes with literature support than standard TWAS. Evidence from annotations and literature search support the significance of the novel variants discovered by kTWAS.

In the following section Materials & Methods, we present the design of kTWAS and details of the simulations and power analysis. The outcome of simulations and discoveries from real data are presented in Results. Finally, we conclude the main messages and discuss additional literatures and future work.

| Year | SKAT[19] | SKAT[20] | PrediXcan[6] | PrediXcan[8] |
|------|----------|----------|--------------|--------------|
| 2010 | 1        | 4        | 0            | 0            |
| 2011 | 14       | 32       | 0            | 0            |
| 2012 | 70       | 55       | 0            | 0            |
| 2013 | 161      | 53       | 0            | 0            |
| 2014 | 242      | 61       | 0            | 0            |
| 2015 | 201      | 73       | 21           | 3            |
| 2016 | 272      | 62       | 55           | 28           |
| 2017 | 263      | 66       | 119          | 96           |
| 2018 | 223      | 65       | 154          | 116          |
| 2019 | 239      | 46       | 188          | 188          |

Table 1. Number of citations for SKAT and PrediXcan of the last ten years according to Google Scholar.
Materials & Methods

Mathematical details of SKAT, PrediXcan, and kTWAS

The popular sequence kernel association test (SKAT) tool was selected to represent kernel-based methods. SKAT utilizes a score test that aggregates contributions of multiple genetic variants using a kernel machine[20]. In particular, SKAT employs the following test statistic:

\[ Q = Y'KY \]

Where \( Y \) is the phenotype, and \( K \) is a kernel calculated from the centralized genotype matrix \( G \) in the focal region, consisting of \( G_i \) samples from \( i \) individuals with \( j \) variants per individual. A simple example of a linear kernel is given by \( K = G'(I)G/n \) (where \( n \) is the number of variants).

While Wu et al.[20], originally subtracted cofactors such as sex and age from the phenotype vector \( Y \) before conducting the score test, to simplify comparisons this work will not include any cofactors to evaluate each model. Furthermore, while additional extensions to SKAT have been developed to handle rare variants[19, 27] and the combined effect of rare and common variants[28], this paper will focus only on common variants, and apply the original SKAT method under four different variant selection methods.

As the earliest TWAS method, PrediXcan was selected to represent TWAS in this paper. PrediXcan is composed of two steps: First, a linear model is trained to predict genetically regulated gene expression (called GReX[6]) using a reference panel in which both genotype and expression data are available:

\[ Z \sim \sum \beta_i G_i + \varepsilon \]

Where \( \beta_i \) are the regression parameters to be trained; and \( G = (G_1, G_2, ..., G_m) \) is the genotype matrix in the focal region. Various methods can be used to train this predictive model[8, 29]. In particular, PrediXcan uses ElasticNet[30] to conduct this training. We use the pre-trained PrediXcan genotype-expression model which are available for download on the authors’ website[31].

Using the above model, GReX expressions are then estimated from the genotype information of the main GWAS dataset, which provides both genotype and phenotype information:

\[ \hat{Z} \sim \sum \beta_i G_i \]

The estimated GReX \( \hat{Z} \) is then associated to the phenotype:

\[ Y \sim \hat{Z} + \varepsilon \]
Various extensions to PrediXcan have since been developed, covering many cases in association mapping[8, 22, 23, 32, 33]. In particular, Gusev et al. pioneered the first tool utilizing summary statistics[8] to conduct TWAS. To ensure theoretical and technical consistency, in this paper we chose S-PrediXcan, the meta-analysis version of PrediXcan[12], to represent meta-analysis tools in our model comparisons.

To test our hypothesis that SKAT and TWAS have different advantages which can be integrated, we developed the novel method kTWAS, or kernel-based transcriptome-wide association study. The protocol of kTWAS is illustrated in Fig. 1. Mathematically,

We first take advantage of the pretrained genotype-expression model ElasticNet based on PrediXcan (Fig. 1a):

\[ Z \sim \sum \beta_i G_i + \epsilon \]

We then prepare the kernel \( K_w \) from SKAT, where \( K_w \) is based on the weight of each variant \( W = (\beta_1, ..., \beta_m) \) in the pretrained genotype-expression model above(Fig. 1b):

\[ K_w = G'WG \]

Finally, we conduct the Q score test from SKAT using the TWAS-informed kernel K from above, where Q follows a mixture of chi-squared distributions under the null hypothesis:

\[ Q = Y'KwY \]

As outlined in the introduction, kTWAS is expected to enjoy the advantage of both kernel methods and TWAS so that both feature selections and feature organizations are considered.

**Protocols compared**

We selected a total of six genotype-based protocols for power comparisons, including kTWAS: (1) SKAT-naive applies the default setting of SKAT, which gives equal weight to all genetic variants in a region. In practice, researchers may use this “naive” version of SKAT if they have no prior knowledge selecting which variants in the focal region. (2) SKAT-S-LM pre-selects genetic variants based on their marginal associations to phenotype, which is assessed by associating each individual variant in the region independently to the phenotype. A linear model, such as the model implemented in PLINK[34], is used to pre-select an arbitrary number of variants. As different genes have wildly varying numbers of causal genotypes contributing to the phenotype, we chose the pragmatic approach of matching the number of markers selected by SKAT-S-LM to the number of variants selected by the ElasticNet model in PrediXcan. (3) SKAT-S-LMM is similar to SKAT-S-LM, but uses a linear mixed model (LMM) to perform variant selection, as implemented by EMMAX[35]. Since LM and LMM are both representative models
for conducting single-variant GWAS, we chose to test both to cover a wider spectrum of variant selection methods. (4) SKAT-eQTL pre-selects genetic variants based on published eQTLs[36], instead of by screening for marginal effects in the current GWAS data. Since this method uses independent eQTLs, the variants selected are not jointly modeled linearly in the pre-selection, whereas associating markers directly to phenotype in the GWAS data under study may cause overfitting. As such, we expect SKAT-eQTL covers a different perspective to SKAT-S-LM and SKAT-S-LMM, depending on the marginal effects of individual variants. (5) PrediXcan, as discussed previously, is the first and most representative TWAS tool (6) kTWAS is our novel tool integrating TWAS and SKAT.

Additionally, we conducted an equivalent power analysis of the above six models under meta-analysis, based on the protocols MetaSKAT[27] and S-PrediXcan[12]. In all of the above protocols, the default linear kernel is used in SKAT (https://cran.r-project.org/web/packages/SKAT/SKAT.pdf).

Data simulation procedure and power analysis

Genotype data and selected gene region. We used genotype data from (http://hgdownload.cse.ucsc.edu/gbdb/hg38/1000Genomes/) of the 1000 Genomes Project[37], with a sample size is N = 2548. We used the pretrained genotype-expression models for PrediXcan[6, 12], available at http://predictdb.org/, which are trained for all tissue types available in GTEx (v8). As the sample size and data quality varies between different GTEx tissues, the number of genes for which PrediXcan is applicable also varies. Whole-blood tissue is the largest and most frequently used gene set, with 7252 available genes (together with 1Mb flanking genetic regions) on which PrediXcan can be applied. We therefore simulated 7252 datasets based on the whole-blood tissue gene set.

Genetic architecture and parameterizations. For each gene, we simulated phenotypes based on four different genetic architectures. Their definitions and parameterizations are described below.

(1) “Additive” model. This model associates phenotype with the sum of genetic effects. For each gene, we select a genetic region that includes the gene body and 1Mb of flanking sequences. From this region, 4 single nucleotide polymorphisms (SNPs) with minor allele frequency (MAF) higher than 1% were randomly selected, where 2 SNPs are chosen from variants preselected by the genotype-expression model used in TWAS, and the remaining 2 SNPs are selected from known eQTLs excluding those identified by the genotype-expression model. The first category of SNPs (those identified by the genotype-expression model) favor the performance of PrediXcan, while the second category of SNPs (from eQTLs not identified by the genotype-expression model) favor SKAT related models, as kernels better capture the effects of unsampled variants. To simplify simulations, we fix the number of SNPs from each category to 2, and we further rescale the phenotypic variance components contributed by ElasticNet SNPs versus other eQTL SNPs by a simulation parameter which is set at six different scale factors: 0.0, 0.2, 0.4, 0.6, 0.8, and 1.0.
(2) “Heterogeneity” model. In this model, we randomly select two SNPs in the focal region. Subjects carrying an alternate allele at either or both SNPs will have an associated phenotypic change, while subjects carrying both alternate alleles will not have more changes than the ones have only a single alternate allele. As in the additive model, the use of TWAS-favored SNPs (those selected by ElasticNet) versus kernel-favored SNPs (those selected from random eQTLs) is adjustable. We introduce a parameter to set the number of SNPs selected by ElasticNet as 0, 1, and 2. This parameter is analogous to the scale factor applied to variance contributed by ElasticNet SNPs in the additive model.

(3) & (4) “Both” and “Compensatory” interaction models. We randomly select two SNPs in the focal region in the same way as the heterogeneity model. We also include the same parameter which selects for 0, 1, and 2 ElasticNet SNPs. The effects of the SNPs are differently modeled though. For the interaction model called “Both”, a phenotypic change is made when both alternate alleles are present. For the “Compensatory” interaction model, the phenotypic change is made only when there is exactly one alternate allele in the two SNPs. Subjects carrying both alternate alleles will have the same genetic component (contributing to phenotype) as subjects carrying neither alternate allele. This model reflects the phenomena where a given mutation’s effects are compensated by the presence of another mutation, which is frequently observed in many organisms[38-41].

\textbf{Heritability.} Using one of the four models above, we generated a phenotype whose variance component or heritability equals a preselected value $h^2$. That is, given the variance of the phenotype’s genetic component as $\sigma_g^2$, we calculate $\sigma_e^2$ so that $\frac{\sigma_g^2}{\sigma_g^2 + \sigma_e^2} = h^2$, and then randomly sample the normal distribution $\mathcal{N}(0, \sigma_e^2)$ to determine the contribution of non-genetic components such as noise or environmental effects. Finally, the sum of the genetic and non-genetic components is stored as the simulated phenotype for use in association mappings and power calculations.

\textbf{Power calculations & Adjustment of type-I errors.} For each of the above models and their associated parameters, we simulated 7252 datasets (each containing 2548 subjects) for which the causal variants are randomly selected from the variants a focal region (centralized by a gene and flanked by 1Mb genetic regions). We then test each protocol’s ability to successfully identify the causal gene in each dataset, where we define success as when the association test produces a Bonferroni-corrected[42] p-value lower than a predetermined critical point. We aimed to fix the type-I error across all protocols to $\alpha = 0.05$. However, due to various reasons including the uneven distribution of genetic variants among the 7252 genes and inherent biases between the protocols (e.g., overfitting caused by SKAT-S-LM and SKAT-S-LMM models), we discovered the type-I errors varied widely when different protocols were tested with a fixed critical value of 0.05. To equalize the type-I error across all protocols, we conducted simulations using random phenotypes with no genetic component whatsoever to empirically determine the null distribution for each protocol. We then analyzed data from all 7252 genetic regions with each protocol and determined the critical point where the smallest (most significant) 5% of all p-
values are located. This ensures that all protocols have a fair comparison at a type-I error of 0.05.

The statistical power of each protocol is given by the number of successes divided by the total number of datasets (7252). For the six protocols that utilize genotype data, we conduct association mapping using the simulated genotypes. For the six protocols utilizing summary statistics, we first calculate summary statistics from the simulated genotypes according to the S-PrediXcan and MetaSKAT instruction manuals, before running the protocols.

Real data analysis

We compared the performance of kTWAS and PrediXcan on the WTCCC and MSSNG datasets. WTCCC contains genotype data for 7 complex diseases, with 2,000 cases per disease and approximately 3,000 shared controls of primarily European ancestry. The diseases surveyed by WTCCC are bipolar disease (BD), coronary artery disease (CAD), Crohn's disease (CD), rheumatoid arthritis (RA), type 1 diabetes (T1D), type 2 diabetes (T2D), and hypertension (HT). Genotype data was collected from individuals using Affymetrix GeneChip 500K arrays. MSSNG is the largest available whole genome sequencing dataset for Autism Spectrum Disorder (ASD), containing 7065 sequences from ASD patients and controls[43].

Results

Simulations

Type-I errors. The type-I errors estimated by sampling the simulated distribution of the null hypothesis are generally close to the targeted rate $\alpha = 0.05$, except in the case of SKAT-S-LM and SKAT-S-LMM (Table 2). This is consistent with the intuition that the pre-selection process of SKAT-S-LM and SKAT-S-LMM aggregates random false effects which inflates type I errors for these protocols. We apply a more stringent cutoff (determined from the simulations described above), to ensure fairness in the power comparisons below.

| Model        | Type I Error | Model        | Type I Error |
|--------------|--------------|--------------|--------------|
| SKAT-naive   | 5.50E-02     | MetaSKAT-naive | 5.36E-02     |
| SKAT-eQTL    | 5.22E-02     | MetaSKAT-eQTL    | 5.42E-02     |
| kTWAS-S-LM   | 1.12E-14     | MetaSKAT -S-LM  | 1.04E-14     |
| kTWAS-S-LMM  | 1.27E-14     | MetaSKAT -S-LMM | 1.22E-14     |
| PrediXcan    | 5.04E-02     | S-PrediXcan    | 5.79E-02     |
| kTWAS        | 5.29E-02     | MetakTWAS     | 4.97E-02     |

Table 2. Type I error for different models used in our comparison.
Figure 2. Statistical power (y-axis) of protocols on “Additive” model simulated genotypes, at varying levels of trait heritability (x-axis) and different proportions of ElasticNet-selected SNPs. The compared protocols are SKAT-naive, SKAT-eQTL, SKAT-S-LM, SKAT-S-LMM, PrediXcan, and kTWAS. The proportions of ElasticNet-selected SNPs are 0.0, 0.2, 0.4 for the top row of plots (left to right), and 0.6, 0.8, 1.0 for the bottom row (left to right).

Additive architecture. Fig. 2 and Fig. 3 plot the power of the genotype and summary statistic-based protocols under the additive model. kTWAS clearly outperforms PrediXcan at all levels of contribution from ElasticNet-selected SNPs, showing that kernel methods integrated with TWAS-based feature selection can always outperform the linear model utilized by TWAS, even when the underlying genetic architecture is linear.
Figure 3. Statistical power (y-axis) of protocols on “Additive” model simulated meta-analysis summary statistics, at varying levels of trait heritability (x-axis) and different proportions of ElasticNet-selected SNPs. The compared protocols are MetaSKAT-naive, MetaSKAT-eQTL, MetaSKAT-S-LM, MetaSKAT-S-LMM, S-PrediXcan, and Meta-kTWAS. The proportions of ElasticNet-selected SNPs are 0.0, 0.2, 0.4 for the top row of plots (left to right), and 0.6, 0.8, 1.0 for the bottom row (left to right).

The comparison between the four SKAT methods show that SKAT-eQTL is the best performing kernel method when the proportion of ElasticNet selected SNPs is low. This is expected, since the non-ElasticNet SNPs favor kernel methods. When the proportion of ElasticNet-selected SNPs is high, which is expected to favor the PrediXcan model, SKAT-eQTL has worse performance than both kTWAS and PrediXcan. SKAT-S-LM and SKAT-S-LMM, which select SNPs based on marginal effects, are generally less powerful than SKAT-eQTL and kTWAS, indicating that their pre-selection process may be overfitting and therefore reducing power (after adjusting for equivalent type I error rates). When regional heritability is low, the power of SKAT-S-LM and SKAT-S-LMM are both extremely low, likely because noise caused by random artifacts. Overall, SKAT-naive, which conducts no pre-selections, has the lowest power when heritability is greater than 0.05, but outperforms SKAT-S-LM and SKAT-S-LMM when heritability is less than 0.05. In particular, at very high heritability where $h^2 = 0.1$, SKAT-S-LM and its meta-analysis equivalent have very high power approaching that of SKAT-eQTL and kTWAS. This may be because SNPs have strong marginal associations when overall genetic effects are high, leading to reduced noise in the linear pre-selection process employed by SKAT-S-LM and SKAT-S-LMM. We do not have a clear interpretation on why SKAT-S-LM consistently outperforms SKAT-S-LMM.

The meta-analysis protocols utilizing summary statistics have similar trends compared to the genotype-based protocols, although the power of the meta-analysis protocols is slightly lower than the genotype-based protocols.
Figure 4. Statistical power (y-axis) of protocols on “Heterogeneity” model simulated genotypes (top row) and summary statistics (bottom row), at varying levels of trait heritability (x-axis) and different numbers of GTEx whole-blood ElasticNet predictors. The number of GTEx whole-blood Elastic Net predictors for both rows is 0, 1, 2, and the corresponding number of eQTL-selected SNPs is 2, 1, 0 (left to right).

Non-linear architectures. Figs. 4, 5, and 6 plot the power of genotype and summary statistic-based protocols under the Heterogeneity, Both Interactions, and Compensatory Interactions models. Although the genetic architectures are fundamentally different, there are several trends which are consistent across all architectures: 1) kTWAS always outperforms PrediXcan; 2) SKAT-eQTL outperforms kTWAS when both causal SNPs are non-ElasticNet selected SNPs; 3) SKAT-S-LM has high power only when heritability is high. Notably, kTWAS and SKAT-eQTL outperform PrediXcan with larger margins under the non-linear architectures than in the additive model. This is consistent with our expectation that kernel methods are more robust and flexible when genetic interactions are present, even when using a linear kernel.
Figure 5. Statistical power (y-axis) of protocols on “Both inheritance” model simulated genotypes (top row) and summary statistics (bottom row), at varying levels of trait heritability (x-axis) and different numbers of GTEx whole-blood ElasticNet predictors. The number of GTEx whole-blood Elastic Net predictors for both rows is 0, 1, 2, and the corresponding number of eQTL-selected SNPs is 2, 1, 0 (left to right).
Figure 6. Statistical power (y-axis) of protocols on “Compensatory inheritance” model simulated genotypes (top row) and summary statistics (bottom row), at varying levels of trait heritability (x-axis) and different numbers of GTEx whole-blood ElasticNet predictors. The number of GTEx whole-blood ElasticNet predictors for both rows is 0, 1, 2, and the corresponding number of eQTL-selected SNPs is 2, 1, 0 (left to right).

Applying kTWAS to real data

ASD whole genome data provided by MSSNG. Fig. 7a shows the Manhattan plot for the output of kTWAS and PrediXcan. Based on a Bonferroni-corrected p-value < 0.05, we observed 6 peaks corresponding to RP11-575H3.1 (nominal P=1.73×10^{-6}), NDUFV1 (P=2.06×10^{-6}), PPP1R32 (P=2.59×10^{-6}), NBPF15 (P=3.11×10^{-6}), NBPF9 (P=5.82×10^{-6}), and SRGAP2B (P=6.44×10^{-6}). Fig. 7b shows the corresponding Manhattan plot for PrediXcan. Two genes (RP11-575H3.1 and NBPF15) identified by kTWAS were also discovered by PrediXcan, but at lower significance levels (nominal P-values of 2.74×10^{-6} and 7.17×10^{-6}, respectively). The remaining four genes are not identified as significant with PrediXcan (nominal P-values 0.66 for NDUFV1, 4.67×10^{-4} for PPP1R32, 1.31×10^{-3} for NBPF9, and 0.23 for SRGAP2B).

Three of the four genes detected by kTWAS alone have literature support as candidate genes for association with ASD. The inhibition of SRGAP2 function by its human-specific paralogs has contributed to the evolution of the human neocortex and plays an important role during human brain development[44, 45]. NBPF9 is a member of the neuroblastoma breakpoint family (NBPF) which consists of dozens of recently duplicated genes primarily located in segmental duplications on human chromosome 1. Members of this gene family are characterized by tandemly repeated copies of DUF1220 protein domains. Gene copy number variations in the
human chromosomal region 1q21.1, where most DUF1220 domains are located, have been implicated in a number of developmental and neurogenetic diseases such as autism[46]. In particular, rare variants located in NBPF9 are reported to be associated with ASD[47]. Additionally, evidence shows that NDUFV1 is a ‘developmental/neuropsychiatric’ susceptibility gene when a rare duplication CNV occurs at 11p13.3[47]. The only gene not supported by literature is PPP1R32, which may be a novel gene for ASD research. The genes jointly identified by kTWAS and PrediXcan are both supported by literature[48, 49].

![GWAS Manhattan plots](image)

**Figure 7.** GWAS Manhattan plots of negative log P-values (y-axis) for autism-associated SNPs at genome coordinates (x-axis) of MSSNG consortium whole genome data. Plots show associations generated by kTWAS (a, top) and PrediXcan (b, bottom), with gene expressions predicted using the GTEx whole-blood ElasticNet model. The Bonferroni-corrected significance threshold (green dash line) is $0.05/6794=7.37\times10^{-6}$.

**WTCCC genotyping data.** We applied kTWAS to type 1 diabetes (T1D) data, identifying 52 genes significantly associated with the risk of T1D (Bonferroni-corrected p-value < 0.05). In contrast, PrediXcan identified 32 genes, of which 31 are also detected by kTWAS (Table 3). Among the 21 genes identified by kTWAS alone, 19 are within the MHC region, which has been shown to influence susceptibility to complex, autoimmune, and infectious diseases, including
T1D in particular[50]. Most of these genes have been reported to have association with T1D[51-63].

The PMIDs of these supporting literatures were annotated in the Table 3. The remaining two genes are BTN3A2 and ALDH2. BTN3A2 is reported to play important roles in regulating the immune response, and is a potential novel susceptibility gene for T1D[51]. ALDH2 is known to offer myocardial protection against stress conditions such as diabetes mellitus[64], although the underlying mechanism is unclear.

| Gene      | Chr | Start   | End      | PrediXcan p-value | kTWAS p-value | PMID     |
|-----------|-----|---------|----------|-------------------|---------------|----------|
| C1orf216  | chr1| 35713875| 35719472 | 3.22E-06          | 8.41E-07      |          |
| HIST1H3E  | chr6| 26224199| 26227473 | 8.10E-08          | 8.40E-08      |          |
| BTN3A2    | chr6| 26365159| 26378320 | 0.014022          | 1.35E-08      | 19295542 |
| HIST1H2B  | chr6| 27815044| 27815424 | 5.08E-08          | 2.73E-07      |          |
| ZSCAN9    | chr6| 28224886| 28233482 | 6.58E-11          | 1.86E-06      |          |
| ZFP57     | chr6| 29672392| 29681110 | 2.06E-05          | 3.44E-07      | 27075368 |
| PPP1R11   | chr6| 30066709| 30070265 | 0.001064          | 3.93E-14      | 25422764 |
| TRIM10    | chr6| 30151945| 30160934 | 1.83E-28          | 4.71E-28      |          |
| TRIM15    | chr6| 30163206| 30172696 | 2.34E-10          | 2.45E-16      |          |
| PPP1R18   | chr6| 30676389| 30687895 | 2.37E-07          | 2.44E-07      |          |
| NRM       | chr6| 30688047| 30691420 | 1.82E-24          | 3.09E-24      |          |
| FLOT1     | chr6| 30727709| 30742733 | 3.48E-17          | 4.07E-18      |          |
| IER3      | chr6| 30743199| 30744554 | 1.20E-21          | 7.77E-20      |          |
| LINC00243 | chr6| 30798654| 30830659 | 0.000443          | 3.32E-14      |          |
| DDR1      | chr6| 30876421| 30900156 | 7.35E-05          | 1.84E-11      |          |
| CCHCR1    | chr6| 31142439| 31158238 | 1.36E-06          | 0.000535      |          |
| HLA-B     | chr6| 31269491| 31356442 | 1.82E-24          | 3.09E-24      |          |
| MICB      | chr6| 31494881| 31511124 | 5.76E-27          | 3.38E-29      |          |
| ATP6V1G2  | chr6| 31544462| 31546848 | 7.35E-64          | 6.92E-48      |          |
| NFKBIL1   | chr6| 31546870| 31558829 | 8.26E-13          | 2.08E-14      |          |
| NCR3      | chr6| 31589910| 31592985 | 4.18E-40          | 1.00E-22      |          |
| AIF1      | chr6| 31615184| 31617021 | 9.87E-13          | 4.62E-11      |          |
| LY6G5B    | chr6| 31670167| 31673776 | 3.54E-06          | 2.40E-13      |          |
| LY6G5C    | chr6| 31676684| 31684040 | 1.29E-13          | 1.48E-13      |          |
| ABHD16A   | chr6| 31686949| 31703444 | 3.40E-16          | 8.55E-23      |          |
| DDAH2     | chr6| 31727038| 31730580 | 9.68E-58          | 3.23E-64      |          |
| CLIC1     | chr6| 31730618| 31739763 | 1.47E-30          | 1.31E-34      |          |
| VWA7      | chr6| 31765590| 31777294 | 0.032341          | 1.86E-07      | 31932636 |
| C6orf48   | chr6| 31834608| 31839766 | 1.46E-05          | 1.26E-11      | 20221424 |
| C2        | chr6| 31897785| 31945649 | 0.027457          | 8.99E-08      | 1684365  |
| Gene     | Chromosome | Start Position | End Position | PrediXcan p-value | kTWAS p-value |
|----------|------------|----------------|--------------|------------------|---------------|
| SKIV2L   | chr6       | 31959111       | 31969755     | 4.28E-27         | 1.72E-24      |
| DXO      | chr6       | 31969810       | 31972292     | 0.009281         | 3.17E-39      |
| C4A      | chr6       | 31982024       | 32002681     | 3.00E-159        | 2.80E-131     |
| C4B      | chr6       | 32014762       | 32035418     | 1.81E-69         | 4.23E-77      |
| CYP21A2  | chr6       | 32038265       | 32041670     | 0.44389          | 1.17E-30      |
| AGER     | chr6       | 32180968       | 32184324     | 1.99E-08         | 2.08E-08      |
| NOTCH4   | chr6       | 32194843       | 32224067     | 0.000112         | 4.38E-07      |
| HLA-DRB5 | chr6       | 32517343       | 32530287     | 5.29E-81         | 1.03E-121     |
| HLA-DRB1 | chr6       | 32578769       | 32589848     | 4.31E-05         | 2.64E-54      |
| HLA-DQB1 | chr6       | 32659467       | 32668383     | 5.09E-58         | 1.70E-61      |
| HLA-DQA2 | chr6       | 32741342       | 32747215     | 0.004502         | 2.64E-35      |
| HLA-DQB2 | chr6       | 32756098       | 32763534     | 0.975179         | 1.29E-15      |
| HLA-DOB  | chr6       | 32812763       | 32817048     | 1.19E-14         | 2.17E-20      |
| TAP2     | chr6       | 32821833       | 32838780     | 4.83E-130        | 7.04E-228     |
| PSMB8    | chr6       | 32840717       | 32844047     | 0.025            | 3.37E-06      |
| TAP1     | chr6       | 32845209       | 32853978     | 0.454086         | 1.04E-06      |
| HLA-DOA  | chr6       | 33004178       | 33009612     | 0.007979         | 8.12E-10      |
| RPS18    | chr6       | 33272048       | 33276510     | 0.007684         | 8.13E-10      |
| RPS26    | chr12      | 56041853       | 56044675     | 1.66E-11         | 1.44E-11      |
| CNPY2    | chr12      | 56309842       | 56316222     | 2.25E-10         | 3.09E-10      |
| ALDH2    | chr12      | 111766887      | 111817529    | 0.001816         | 1.63E-07      |

Table 3. PrediXcan and kTWAS results for Bonferroni-corrected significant gene associations with type 1 diabetes in WTCCC consortium. To account for multiple testing, we used a significance threshold of 6.89x10^-6 (0.05/7252) for all diseases. The significant genes are in bold. Chromosome and gene start positions are based on GENCODE version 26.

The other diseases in WTCCC have limited numbers of significant genes, except for rheumatoid arthritis (RA). kTWAS identified 24 genes associated with RA, while PrediXcan detected 19 significant genes, of which 18 are also detected by kTWAS (Table 4). All six genes detected by kTWAS alone (VARS2, NCR3, NOTCH4, TAP2, HLA-DQB2, LY6G5B) are in the MHC region and have substantial literature support. In particular, a nonsynonymous change in the VARS2 locus (rs4678) is strongly associated with RA[65]. One SNP in NCR3 could regulate the expression of two genes in RA cases and increased NCR3 expression is significantly associated with reduced RA susceptibility[66]. NOTCH4 is also reported to be RA-susceptible by different researchers[67, 68]. Yu et al. provided genetic evidence that TAP2 gene codon 565 polymorphism could play a role in RA[69]. A study on Italian patients found a mutation in HLA-DQA2 (rs9275595) could contribute to RA pathogenesis. Although there is no direct evidence to show LY6G5B is associated with RA, strong associations have been found between RA and a 126-kb region in the MHC class III region between BAT2 and CLIC1 which contains the five Ly-6 members including LY6G5B[70], indicating that LY6G5B might be a novel RA risk gene.
| Disease | Gene            | Chr | Start     | End         | PrediXcan p-value | kTWAS p-value |
|---------|-----------------|-----|-----------|-------------|------------------|--------------|
| BD      | CTD-2589        | chr11 | 4623832   | 46239267    | 5.43E-07         | 0.196195     |
| BD      | SLC48A1         | chr12 | 47753916   | 47782721    | 7.24E-07         | 1.12E-06     |
| BD      | RP11-382        | chr15 | 83112738   | 83208018    | 5.82E-06         | 9.46E-06     |
| BD      | ERVK3-1         | chr19 | 53805319   | 58315663    | 1.85E-06         | 6.78E-08     |
| CAD     | C12orf43        | chr12 | 121000486  | 121016502   | 0.000590514      | 5.23E-07     |
| CAD     | RP11-3471I19.8  | chr12 | 121797511  | 121797872   | 1.09E-06         | 0.410928711  |
| CD      | APEH            | chr3  | 49674002   | 49683946    | 2.08E-06         | 2.13E-06     |
| RA      | NT5DC2          | chr3  | 52524496   | 52535054    | 4.53E-08         | 0.000142     |
| RA      | TRIM7           | chr5  | 181193924  | 181205293   | 6.50E-06         | 6.65E-06     |
| RA      | TRIM26          | chr6  | 30184455   | 30213427    | 3.15E-11         | 3.46E-11     |
| RA      | FLOT1           | chr6  | 30727709   | 30742733    | 1.34E-06         | 3.61E-07     |
| RA      | IER3            | chr6  | 30743199   | 30744554    | 1.48E-09         | 1.91E-07     |
| RA      | VARS2           | chr6  | 30914205   | 30926459    | 0.004841         | 5.19E-07     |
| RA      | ATP6V1G2        | chr6  | 31544462   | 31546848    | 1.57E-06         | 3.85E-07     |
| RA      | NCR3            | chr6  | 31588910   | 31592985    | 0.000505         | 1.28E-14     |
| RA      | PPRC2A          | chr6  | 31620720   | 31637771    | 4.75E-18         | 6.26E-18     |
| RA      | BAG6            | chr6  | 31639028   | 31652709    | 4.03E-12         | 2.24E-09     |
| RA      | LY6G5B          | chr6  | 31670167   | 31673776    | 0.7220351        | 6.37E-09     |
| RA      | DDAH2           | chr6  | 31727038   | 31730580    | 4.47E-07         | 3.92E-07     |
| RA      | MSH5            | chr6  | 31739948   | 31762798    | 1.78E-11         | 5.92E-18     |
| RA      | C6orf48         | chr6  | 31834608   | 31839766    | 7.55E-22         | 1.44E-23     |
| RA      | SKIV2L          | chr6  | 31959111   | 31969755    | 4.72E-21         | 2.10E-12     |
| RA      | STK19           | chr6  | 31971166   | 31981451    | 1.03E-17         | 1.34E-17     |
| RA      | CYP21A2         | chr6  | 32038265   | 32041670    | 2.89E-07         | 5.72E-08     |
| RA      | NOTCH4          | chr6  | 32194843   | 32224067    | 0.003209         | 1.43E-10     |
| RA      | HLA-DRB5        | chr6  | 32517343   | 32530287    | 8.82E-09         | 4.66E-17     |
| RA      | HLA-DRB1        | chr6  | 32578769   | 32589848    | 3.29E-33         | 1.21E-14     |
| RA      | HLA-DQA1        | chr6  | 32628179   | 32643652    | 2.03E-10         | 1.76E-10     |
| RA      | HLA-DQA2        | chr6  | 32741342   | 32747215    | 4.11E-07         | 3.94E-15     |
| RA      | HLA-DQB2        | chr6  | 32756098   | 32765354    | 0.229988         | 1.24E-10     |
| RA      | TAP2            | chr6  | 32821833   | 32838780    | 0.189783         | 1.86E-07     |
| RA      | C12orf43        | chr12 | 121000486  | 121016502   | 2.24E-06         | 1.82E-15     |
| T2D     | C1orf216        | chr1  | 35713875   | 35719472    | 1.37E-07         | 2.20E-08     |
| T2D     | CTD-2589M5.5    | chr11 | 46238382   | 46239267    | 4.68E-06         | 0.102426     |
| T2D     | KCNMB4          | chr12 | 70366276   | 70434292    | 2.22E-06         | 2.27E-06     |

Table 4. PrediXcan and kTWAS results for Bonferroni-corrected significant gene associations with five diseases in WTCCC consortium. To account for multiple testing, we used a significance threshold of
6.89×10⁻⁶ (0.05/7252) for all diseases. bipolar disease (BD), coronary artery disease (CAD), Crohn's disease (CD), rheumatoid arthritis (RA), type 2 diabetes (T2D). The significant genes are in bold. Chromosome and gene start positions are based on GENCODE version 26.

Taken together, the analysis of MSSNG sequence data and T1D and RA genotyping array data from WTCCC illustrates that kTWAS is able to identify a larger number of significant and sensible genes versus PrediXcan. These results confirm that the inclusion of kernel methods in TWAS increases statistical power in real data, compared to standard TWAS which only uses linear combinations of selected SNPs and is therefore not robust to non-linear effects.

**Conclusion**

In this work, we have thoroughly highlighted the essential advantages and differences between TWAS and kernel methods in terms of their ability to select and organize genetic features. From this perspective we designed a novel protocol kTWAS to integrate advantages of both methods, leading to a tool that takes advantage of expression data and is robust to non-linear effects. We demonstrate that kTWAS results in increased power by conducting extensive simulations and real data analyses. This work will help researchers understand the conditions under which TWAS and kernel methods perform best, and how to integrate both to capture non-linear effects. This work also reveals that the application of a linear kernel is more powerful than simple linear regression for detecting nonlinear effects.

Other researchers have also investigated the link between SKAT and TWAS. Xu et al. have designed a power testing framework with both TWAS and SKAT as special cases of their power test[29]. Although, their framework does not directly compare the power of the two protocols, or suggest a means for integrating them.

As shown in Figs. 2-6, it is evident that SKAT-eQTL also has high power, despite not taking advantage of the TWAS-style feature pre-selection which is achieved by ElasticNet or the multiple-regression based methods found in SKAT-S-LM and SKAT-S-LMM. In essence, SKAT-eQTL only selects for genetic variants with good marginal effects without considering linear combinations of such variants. The effectiveness of SKAT-eQTL invites more thorough testing via theoretical and real data analyses, and this will be an immediate area of study in our future work.

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