CGVD: a genomic variation database for Chinese populations

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ABSTRACT

Precision medicine calls upon deeper coverage of population-based sequencing and thorough gene-content and phenotype-based analysis, which lead to a population-associated genomic variation map or database. The Chinese Genomic Variation Database (CGVD; https://bigd.big.ac.cn/cgvd/) is such a database that has combined 48.30 million (M) SNVs and 5.77 M small indels, identified from 991 Chinese individuals of the Chinese Academy of Sciences Precision Medicine Initiative Project (CASPMI) and 301 Chinese individuals of the 1000 Genomes Project (1KGP). The CASPMI project includes whole-genome sequencing data (WGS, 25–30×) from ~1000 healthy individuals of the CASPMI cohort. To facilitate the usage of such variations for pharmacogenomics studies, star-allele frequencies of the drug-related genes in the CASPMI and 1KGP populations are calculated and provided in CGVD. As one of the important database resources in BIG Data Center, CGVD will continue to collect more genomic variations and to curate structural and functional annotations to support population-based healthcare projects and studies in China and worldwide.

INTRODUCTION

To unravel genetic mechanisms of disease-related and physiological traits, we need to acquire case-and-control samples that are tailored to specific populations for better frequency calculation and mapping resolution, as well as gene-/function-associated analysis. Following the initial efforts of the international HapMap project (1) and the 1000 genome project (1KGP) (2,3), several nation-wide whole-genome sequencing (WGS) projects have been successfully completed or in progress in recent years, including the Icelandic genomics project (4), the UK10K (5) and 100K projects (6), the genome of the Netherlands (GoNL) (7), the US 10 000 genomes project (8) and the 1KJPN Japanese reference panel (9). For an ancient and the world largest population, the Chinese, there have two relevant projects: one has been an investigation on genetic variations of Chinese women (CONVERGE) by using a low depth sequencing (1.7×) (10) and another is a WGS-based 90 Han Chinese individuals at a higher depth (~80×) (11). In view of nearly one fifth of the world’s population, a much larger population-based study with deeper sequencing is expected to provide adequate genetic resources for disease studies of the Chinese populations.

In order to share and to utilize the numerous genomic variations for population-based disease and healthcare studies, three comprehensive genomic variation databases have been built, which are the Single Nucleotide Polymorphism Database (dbSNP) (12), the European Variation Archive (EVA) and the Ensembl Variation database (13). These databases hold whole-genome variations for worldwide populations, mainly from 1KGP and the Genome Aggregation Database (gnomAD) (14), but only a limited number of Chinese individuals have been included.

Up to now, there have been several genomic variation databases for the Chinese populations. VCGDB (http://bigd.big.ac.cn/vcg/) (15) and GVM (http://bigd.big.ac.cn/gvm/) (16) are both built on the 1KGP genomic data, including ~300 Chinese individuals at a low sequencing depth of ~7.4× on average. CMDB (https://db.cngb.org/cmdb/) collects genomic variations from 141 431 Chinese individuals at very low depth of ≤0.1×, and this database is not open access (17). Therefore, it is necessary to develop an open database of genomic variation map for the Chinese popu-
lations based on a large sample size and deeper genome sequencing data.

Here, we present the Chinese Genomic Variation Database (CGVD), which is designed to collect genomewide and population-based variations in the Chinese population and to integrate functional annotations, such as function-associated sites, drug responses, phenotype and disease associations. As an important part of the Chinese Academy of Sciences Precision Medicine Initiative (CASPMI) project (18), which included the deep whole-genome sequencing (WGS, 25–30×) of 991 healthy Chinese individuals from the CASPMI cohort, this database combines the genomic variations identified from all CASPMI individuals and 301 Chinese individuals of 1KGP. In addition, a friendly interface is also designed for the convenience of searching, browsing and retrieving the variations and detailed information.

DATA COLLECTION AND PROCESSING

The WGS data of 991 healthy Chinese individuals were collected from the CASPMI project, and other sequencing data of 301 Chinese individuals were collected from the 1KGP FTP (ftp://ftp.1000genomes.ebi.ac.uk). Single nucleotide variations (SNVs) and insertions and deletions (indels) were identified using the standard GATK pipeline (v4.0.1.1) (19). Among the CASPMI individuals, 597 samples were analyzed in our previous study, in which the accuracy rate of SNV calling has been evaluated as 99.1%, suggesting the high quality of the variation data (18). Variation annotation is performed using ANNOVAR (v2018Apr16) (20) including the databases of RefGene (v20190224) (21), ClinVar (v20190305) (22), GWAS Catalog (v20190801) (23), COSMIC (v89) (24) etc. The pharmacogenomics annotations in CGVD are performed in three main steps. First, the pharmacogenomics information is downloaded from PharmGKB (v20190416) (25), including the clinical annotations and the haplotype definitions of the gene with star alleles (including the gene families of CYP, UGT, etc.), which are processed into a uniform format. Second, for those star alleles containing the sites with known chromosome coordinates, such as the sites 1778T>G and −1778A>G in CYP2B6, we adopt manual curation from the database PharmVar (v4.0.2) (26) and literatures to verify their chromosome locations. Third, if a site has not been reported directly for the coordinate by literatures or databases, the coordinate is then inferred manually by relative positions to the adjacent sites with known chromosome coordinates. The inferred site is considered reliable only if this site matches the nucleotide base and encoding amino acid recorded in PharmGKB or PharmVar. Otherwise, the coordinate is considered unreliable and the gene including this site are excluded from final datasets.

DATABASE IMPLEMENTATION

CGVD is constructed using Spring Boot (http://spring.io), a free and open-source Model-View-Controller (MVC) framework favors convention over configuration) as the back-end framework and MySQL (http://www.mysql.com), a free and popular relational database management system as the database engine. Web interfaces are developed using JSP (Java Server Pages; a technology facilitating rapid development of dynamic web pages based on the Java programming language), HTML5, CSS3, AJAX (Asynchronous JavaScript and XML, a set of web development techniques to create asynchronous applications without interfering with the display and behavior of the existing page), jQuery (a cross-platform and feature-rich JavaScript library), DataTables (https://datatables.net/, a plug-in for the jQuery Javascript library) as well as Bootstrap (https://getbootstrap.com, an open source toolkit for developing web projects with HTML, CSS and JS). Additionally, the JBrowse Genome Browser (http://www.jbrowse.org), a fast and scalable genome browser built completely with JavaScript and HTML5 is adopted for genome data visualization.

DATABASE CONTENT AND USAGE

CGVD is the official data repository of genomic variations for the CASPMI population, and all the data in CGVD is open access. The current version of CGVD includes a total of ∼48.30 M SNVs and ∼5.78 M small indels based on GRCh37, which are identified from 991 Chinese individuals of CASPMI and 301 Chinese individuals of 1KGP. Compared with dbSNP (version 151), CGVD has 28.49 M (46.67%) novel SNVs and 2.25 M (31.88%) novel indels, and the detailed information of these variations are publicly reported for the first time through CGVD. For the purpose of investigating the genetic diversity between the northern and southern Chinese populations, the CASPMI individuals are categorized into two groups based on geographical distribution. The statistics of genomics variations for each population are shown in Table 1. To utilize the genomic variations for disease and healthcare studies, CGVD has collected the relationships between genomic variations and 3199 diseases from ClinVar, 124 129 genotype-phenotype associations from GWAS Catalog, and 2 018 546 cancer-related mutations from COSMIC (Table S1). Particularly, the database emphasizes pharmacogenomics annotations. CGVD has collected and curated information about functional impacts of genomic variations on drug absorption, distribution, metabolism, excretion and toxicity (ADMET) from literatures and the databases of PharmGKB and PharmVar, including 1590 drug-related genes with 731 haplotypes, 785 drugs, 328 related diseases and 33 437 pharmacogenetics annotations (Table 2). Also, star alleles of ADMET genes are identified for CASPMI and 1KGP individuals, and the frequencies of star alleles and genotypes in those populations are calculated and shown in CGVD, which are absent in most genomic variation databases, such as dbSNP and EVA, but are essential for pharmacogenomics studies. Altogether, the pharmacogenomics information in CGVD is expected to provide valuable support for clinical researchers.

To support information demonstration and exploration, we have developed a user-friendly web interface for CGVD, including four main modules of searching, browsing, visualizing and downloading. CGVD provides two searching methods. Users can search interested variants by a gene name, a variation ID and a genomic region either on the
Table 1. The statistics of genomic variations for the Chinese populations in CGVD

| Project   | Population | Sample size | Number of SNVs | Number of indels |
|-----------|------------|-------------|----------------|------------------|
| 1KGP      | CHN        | 301         | 17 827 579     | 1 458 976        |
|           | CHB        | 103         | 12 520 340     | 1 284 456        |
|           | CHS        | 105         | 12 094 359     | 1 279 255        |
| CASPMI    | CASPMI     | 991         | 43 212 437     | 5 605 143        |
|           | CASPMI North | 667       | 35 007 955     | 5 029 300        |
|           | CASPMI South | 222       | 20 703 517     | 3 670 362        |
| Total     | CHN + CASPMI | 1292     | 48 302 109     | 5 775 473        |

*Note: CHN: all Chinese individuals from 1KGP; CHB: Han Chinese in Beijing; CHS: Southern Han Chinese. The sum of northern and southern samples is not equal to the total number in CASPMI, because some samples cannot be assigned definitely to northern or southern populations.*

Table 2. The statistics of pharmacogenomics annotations in CGVD

| Type                          | Genes/Number of genes | Number of alleles | Number of drugs | Number of diseases |
|-------------------------------|-----------------------|-------------------|-----------------|-------------------|
| Drug ADMET-related genes with star alleles or haplotypes | ABCB1 2 | 12 | 7 |
| ABCC10 | 1 | 1 | 0 |
| ADRB1 | 3 | 1 | 0 |
| ADRB2 | 3 | 1 | 0 |
| APOE | 3 | 13 | 3 |
| CDA | 1 | 0 | 0 |
| CFTR | 2 | 1 | 0 |
| CYP1A1 | 4 | 3 | 0 |
| CYP1A2 | 11 | 12 | 3 |
| CYP2B6 | 24 | 25 | 13 |
| CYP2C19 | 47 | 71 | 13 |
| CYP2C8 | 4 | 22 | 4 |
| CYP2C9 | 47 | 52 | 12 |
| CYP2E1 | 7 | 4 | 1 |
| CYP3A4 | 17 | 45 | 12 |
| CYP3A5 | 9 | 57 | 9 |
| CYP3A7 | 2 | 4 | 1 |
| CYP4F2 | 2 | 1 | 0 |
| DPYD | 14 | 5 | 3 |
| DPYS | 2 | 1 | 0 |
| HMGCR | 2 | 1 | 0 |
| HNF4A | 2 | 1 | 1 |
| HTR2C | 12 | 4 | 0 |
| G6PD | 14 | 46 | 9 |
| LDLR | 1 | 1 | 0 |
| NAT1 | 5 | 2 | 0 |
| NAT2 | 24 | 19 | 6 |
| NUDT15 | 6 | 1 | 1 |
| PARK2 | 4 | 1 | 0 |
| PCK1A | 2 | 1 | 0 |
| RXRA | 2 | 1 | 1 |
| RYR1 | 2 | 2 | 0 |
| SLC22A1 | 7 | 6 | 1 |
| SLC41B1 | 16 | 13 | 1 |
| SLC7A3 | 3 | 5 | 1 |
| SULT1A1 | 2 | 1 | 0 |
| SULT1A2 | 2 | 2 | 0 |
| TPMT | 43 | 12 | 8 |
| UGT1A3 | 2 | 3 | 1 |
| UGT1A4 | 3 | 3 | 0 |
| UGT1A6 | 5 | 5 | 2 |
| UGT1A7 | 1 | 3 | 1 |
| UGT1A8 | 3 | 1 | 0 |
| UGT2B15 | 2 | 4 | 0 |
| VEGFA | 5 | 1 | 0 |
| VKORC1 | 6 | 2 | 0 |
| Drug-response variations | 1576 | 653 | 248 |
| Other alleles | 34 | 361 | 241 |
| Total | 1590 | 731 | 328 |

*Note: Some alleles in PharmGKB do not have clinical annotations on related drugs and diseases.*
Figure 1. Screenshots of two search modules and the variation details in search results. (A) Search by basic information (genomic regions, variation IDs or gene names). (B) An overview table of basic information for relevant variations is listed, and user can filter the search results by variation types, MAF, functional effects and other annotations. (C) The variation details of CGVD320508 are shown in seven tables. The bi-color bar charts represent alleles and frequencies in these populations.

home page or on the search page (Figure 1A). An overview table will be shown for all relevant variations including the information of variation ID, genomic position, alleles, etc. The result table can be filtered by variant type, allele frequency, gene structures, and the functional annotations from public databases, such as ClinVar, COSMIC and GWAS Catalog (Figure 1B). Moreover, users can browse more information in the detail page for each variation, in which seven tables are shown on relevant genes and transcripts, functional effects, allele frequencies in these populations, traits or disease associations, pharmacogenomics annotations and flanking sequences (Figure 1C). The search results can be downloaded in the EXCEL format.

In particular, for pharmacogenomics studies, users can search variations by drug ADMET genes, star alleles, diseases, drugs or drug responses (Figure 2A). Besides basic information of variations, the search results also show the clinical annotation details such as related drugs and diseases, clinical annotation types and clinical phenotypes, and provide the frequencies of star alleles and genotypes in the CASPMI and 1KGP relevant populations (Figure 2B), which reveal genetic diversities on pharmacogenomics and
Figure 2. Screenshots of pharmacogenomics search and visualization by genome browser. (A) Search by drug ADMET genes, star alleles, and clinical-related information. (B) The top table shows the overview of clinical annotations related to CYP2C19. Other two tables list the frequencies of star alleles and genotypes of CYP2C19 in eight populations. (C) The genome browser shows various tracks of variations and their annotations, including genome sequences, NCBI and Ensembl genes, 1KGP and CASPMI variations, dbSNP, pharmacogenomics annotations, GWAS Catalog, etc. User can click on a variation in the browser to display the detailed information like alleles and frequencies.
provide a valuable guidance for clinical medication in different populations. For visualization of variation information, the JBrowse genome browser is used to display functional annotation tracks, such as repeat elements, Ensembl/NCBI genes, transcripts, drug-related variations, GWAS Catalog and OMIM phenotype (Figure 2C). On the download page, genomic variation files in VCF format and functional annotations files can be downloaded freely.

**DISCUSSION AND FUTURE DIRECTIONS**

There are two publicly accessible databases related to the genomic variations of Chinese populations, VCGDB and GVM. VCGDB provides dynamic genomic information of Chinese populations, which is identified from 194 Chinese individuals with 2–4× coverage from 1KGP using BWA and SAMtools (15). GVM focuses on collecting genomic variations for a wide range of 19 species, and the genomics variation map for Chinese populations in GVM is also built on ~300 Chinese individuals with ~7.4× coverage from 1KGP using GATK (16). In comparison with the two Chinese variation databases, CGVD has the advantage of hosting data from a larger population and deeper whole-genome sequencing coverage (~30×). 97.51% of the variations for Chinese populations in GVM are included in CGVD, and 36.11% variations in VCGDB are shared with CGVD. We also notice that only 36.43% of total variations in VCGDB are shared with GVM or CGVD (Supplementary Figure S1). That is caused by the limitation of data quality and analysis methods for variation identification in early years. CGVD has 36.14M (66.83%) of unique variations compared with the other two databases. Such a large number of unique genomic variations indicate the necessity to have a large sample size and deep sequencing data in population studies. Furthermore, among all the variations in CGVD, 28.09M (58.15%) SNVs and 2.78M (48.14%) indels are singletons and doubletons, of which 84.13% are unique singletons and doubletons in comparison with 1KGP (Supplementary Figure S2). By comparing with the other populations in 1KGP except Chinese individuals, 29.14M (94.41%) singletons and doubletons and 11.29M (48.65%) other variations are unique in Chinese populations in the situation of current available data (Supplementary Figure S3). Also, CGVD provides the frequency data of star alleles for drug ADMET genes in eight different populations and the searching module by ADMET genes. This facilitates the usage of this database for pharmacogenomics studies.

Up to now, CGVD has only collected SNVs and indels from 1292 Chinese individuals in both CASPMI and 1KGP, and has not included genomic structural variations (SVs). Recently, extensive studies have shown that genomic SVs are implicated in the phenotypic diversity and various human diseases (27). In the future, we plan to collect more genomic variations from CASPMI and other public resources, especially genomic SVs, and continue to improve the functional annotation for genomic variations. For pharmacogenomics annotations, we will curate more star alleles or haplotypes information for drug ADMET-related genes and keep on updating related clinical annotations from public databases and literatures. Structural variations, including large insertions, large deletions, reversions, and copy number variations, will be identified from the WGS data of the 1292 individuals. Moreover, for the convenience of user operation, several useful analytical tools and new modules will be developed and integrated into the web interface, such as BLAST tools (28), the online analysis tool for genotype imputation, and the display modules to show linkage disequilibrium (LD) and fixation index ($F_{ST}$) values in these populations and eQTL information from public resources like GTEx (29). As one of the important database resources of the Big Data Center (30), CGVD will also keep collecting more genomic variations from the Chinese populations and integrating functional annotations to support population-based and healthcare-related studies in China and worldwide.

**SUPPLEMENTARY DATA**

Supplementary Data are available at NAR Online.

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