

## Supplementary Material

### Investigating the associations Between Polygenic Risk Scores, Environmental Exposure, and Type II Diabetes in Parkinson's Disease

**Supplementary Table 1:** Logistic Regression Models of PD Against 4 Different PRS Calculated Using PD -Specific Variants (Nalls et al., 2019) in the MPBC Cohort

*PRS polygenic score; AGE = AAI; PC principal component; glm generalized linear model.*

*\*: Significant p-value*

*glm<sup>1</sup> (formula = PD ~ PRS + SEX + AGE + PC1 + PC2 + PC3 + PC4 + PC5 + PC6 + PC7 + PC8 + PC9 + PC10, family = binomial, data = data)*

*glm<sup>2</sup> (formula = AAD ~ PRS + SEX + PC1 + PC2 + PC3 + PC4 + PC5 + PC6 + PC7 + PC8 + PC9 + PC10, family = binomial, data = data)*

*PRS are normalized z-Scores.*

	Estimate	Standard Error	P Value
<b>90 Significant SNPs using PLINK<sup>1</sup></b>			
Intercept	1.07461	0.45323	0.01774*
PRS	0.61482	0.05162	$< 2 \times 10^{-16}$ *
SEX	-0.03091	0.10240	0.76277
AGE	-0.01711	0.00595	0.00404*
PC1	-2.98263	2.20179	0.17553
PC2	3.91841	2.17333	0.07140
PC3	-5.87932	2.14219	0.00606*
PC4	3.24137	2.11891	0.12608
PC5	-2.42583	2.12000	0.25252
<b>1,805 SNPs using PLINK<sup>1</sup></b>			
Intercept	1.01609	0.45014	0.02399*

PRS	0.56303	0.05076	$< 2 \times 10^{-16*}$
SEX	-0.02698	0.10168	0.79077
AGE	-0.01598	0.00590	0.00678*
PC1	-2.45671	2.18908	0.26175
PC2	3.56576	2.15169	0.09748
PC3	-5.12995	2.11861	0.01546*
PC4	4.77251	2.10194	0.02318*
PC5	-1.52038	2.10612	0.47036
<b>7,862,087 SNPs using PRSice with LD-clumping (<math>r^2 \leq 0.1</math>, 250kb window, and <math>p \leq 1</math>)<sup>1</sup></b>			
Intercept	1.19006	0.43658	0.00641*
PRS	0.30294	0.04894	$5.99 \times 10^{-10*}$
SEX	-0.01445	0.09904	0.88403
AGE	-0.01707	0.00573	0.00290*
PC1	-3.50557	2.13481	0.10057
PC2	3.40332	2.10089	0.10524
PC3	-3.05910	2.05382	0.13636
PC4	5.12566	2.04263	0.01210*
PC5	-3.20231	2.04564	0.11748
<b>7,862,087 SNPs using PRSice without LD-clumping<sup>1</sup></b>			
Intercept	1.23863	0.43970	0.00485*
PRS	0.40830	0.04917	$< 2 \times 10^{-16*}$
SEX	-0.02828	0.09994	0.77721

AGE	-0.01799	0.00578	0.00184*
PC1	-2.45784	2.14874	0.25269
PC2	3.89408	2.11876	0.06608
PC3	-3.42548	2.07315	0.09847
PC4	4.52895	2.06400	0.02822*
PC5	-3.53600	2.06287	0.08651
<b>PRS-AAD Model<sup>2</sup></b>			
Intercept	65.1632	1.0752	< 2e-16*
zSCORE	-0.9976	0.3630	0.00613*
SEX	0.1805	0.7423	0.80799
PC1	-38.9462	18.6077	0.03667*
PC2	-11.7065	16.6587	0.48244
PC3	-7.0433	15.9747	0.65940
PC4	-12.4637	15.4129	0.41896
PC5	-11.8135	14.9366	0.42924

**Supplementary Table 2:** Confusion Matrices Showing Model Predictive Performance for PD cases and Controls for all 4 PRS Logistic Regressions.

<b>Metric</b>	<b>90 Significant SNPs</b>	<b>1,805 SNPs</b>	<b>LD-Clumped SNPs</b>	<b>Non-LD-Clumped SNPs</b>
Sensitivity	0.5737	0.5791	0.5942	0.5511
Specificity	0.6920	0.6492	0.5807	0.6578

Positive Predictive Value (PPV)	0.6492	0.6212	0.5847	0.6154
Negative Predictive Value (NPV)	0.6203	0.6082	0.5902	0.5959
Prevalence	0.4894	0.4984	0.4984	0.4984
Detection Rate	0.2859	0.2886	0.2961	0.2747
Detection Prevalence	0.4405	0.4646	0.5064	0.4464
<i>Balanced Accuracy</i>	0.6329	0.6142	0.5875	0.6044
95% Confidence Interval	(0.6107, 0.655)	(0.5917, 0.6364)	(0.5647, 0.6099)	(0.582, 0.6269)

**Supplementary Table 3:** T2D Logistic Regression Models of PRS Calculations from 4 Different GWAS (Ge et al., 2022; Khera et al., 2018; Lin et al., 2023; Mars et al., 2020) in the MPBC Cohort.

*PRS polygenic score; AGE = AAI; PC principal component; glm generalized linear model.*

*\*: Significant p-value*

*glm (formula = T2D ~ T2D PRS + SEX + AGE + PC1 + PC2 + PC3 + PC4 + PC5, family = binomial, data = data)*

*PRS are normalized z-Scores and values varies based on the GWAS summary statistics used.*

	Estimate	Standard Error	P Value
<b>Ge et al, 2022</b>			
Intercept	-2.96200	0.95680	0.00196*
PRS	0.74551	0.10097	$1.54 \times 10^{-13}$ *
SEX	-0.78082	0.23637	0.00096*
AGE	0.01339	0.01253	0.28532
PC1	4.25079	3.09973	0.17027
PC2	4.45538	5.20255	0.39179

PC3	-5.17284	4.62050	0.26291
PC4	-7.68378	4.29430	0.07357
PC5	1.31320	4.42274	0.76653
<b>Khera et al, 2018</b>			
Intercept	-2.85747	0.94510	0.00250*
PRS	0.57779	0.10060	$9.28 \times 10^{-9*}$
SEX	-0.73895	0.23454	0.00163*
AGE	0.01271	0.01237	0.30408
PC1	1.17085	3.25050	0.71869
PC2	6.16150	5.07918	0.22510
PC3	-6.72567	4.64248	0.14742
PC4	-5.74890	4.24925	0.17608
PC5	1.06388	4.35581	0.80704
<b>Lin et al, 2023</b>			
Intercept	-3.10641	0.95826	0.00119*
PRS	0.64482	0.10255	$3.21 \times 10^{-10*}$
SEX	-0.75594	0.23452	0.00127*
AGE	0.01609	0.01247	0.19686
PC1	5.95945	3.09605	0.05425
PC2	9.20425	5.06268	0.06905
PC3	-7.15387	4.61151	0.12083
PC4	-6.66797	4.28654	0.11981
PC5	1.81897	4.37053	0.67727
<b>Mars et al, 2020</b>			
Intercept	-2.78790	0.93281	0.00280*
PRS	0.50939	0.09675	$1.40 \times 10^{-7*}$
SEX	-0.77410	0.23396	0.00094*
AGE	0.01282	0.01222	0.29398
PC1	6.35329	3.05722	0.03770*

PC2	4.34839	5.16739	0.40007
PC3	-4.52878	4.56272	0.32092
PC4	-6.49283	4.28559	0.12976
PC5	2.61149	4.36647	0.54979

**Supplementary Table 4:** Comparison of Model Fitness (T2D Logistic Regression Models of PRS Calculations from 4 Different GWAS in the MPBC Cohort)

Model	AIC	BIC	McFadden $R^2$	AUC	Odds Ratio	P Value
Ge	809.3293	859.1037	0.0892	0.7300	2.1075	1.5412e-13
Khera	833.0398	882.8141	0.0619	0.6874	1.7821	9.2781e-09
Mars	825.8700	875.6443	0.0702	0.7015	1.9056	3.2146e-10
Lin	839.1382	888.9126	0.0549	0.6752	1.6643	1.4007e-07

**Supplementary Table 5:** Confusion Matrices and Classification Metrics for Predicting T2D Status Using 4 Different PRS Calculations

Metric	Ge	Khera	Mars	Lin
Sensitivity	0.62931	0.66379	0.55172	0.58621
Specificity	0.72883	0.62071	0.74027	0.65789
Positive Predictive Value (PPV)	0.13346	0.10405	0.12355	0.10210
Negative Predictive Value (NPV)	0.96735	0.96530	0.96137	0.95993
Prevalence	0.06223	0.06223	0.06223	0.06223
Detection Rate	0.03916	0.04131	0.03433	0.03648

Detection	0.29345	0.39700	0.27790	0.35730
Prevalence				
<i>Balanced</i>	0.67907	0.64225	0.64600	0.62205
<i>Accuracy</i>				
95% Confidence Interval	(0.7017, 0.7429)	(0.6009, 0.6454)	(0.7077, 0.7486)	(0.6534, 0.675)

**Supplementary Table 6:** Logistic Regression Modelling PD as an Outcome of T2D PRS, PD PRS, age, sex, and PCs.

*PRS polygenic score; AGE = AAI; PC principal component; glm generalized linear model.*

*\*: Significant p-value*

*glm (formula = PD ~ T2D PRS + PD PRS + SEX + AGE + PC1 + PC2 + PC3 + PC4 + PC5, family = binomial, data = data)*

*PRS are normalized z-Scores.*

Term	Estimate	Standard Error	P Value
Intercept	1.0657	0.4521	0.0184*
T2D PRS	0.0112	0.0487	0.8187
PD PRS	0.6115	0.0513	$< 2 \times 10^{-16}$ *
AGE	-0.0171	0.0059	0.0040*
SEX	-0.0251	0.1022	0.8063
PC1	-3.0417	2.2065	0.1680
PC2	3.9118	2.1606	0.0702
PC3	-5.8704	2.1409	0.0061*
PC4	3.1784	2.1411	0.1377
PC5	-2.4190	2.1193	0.2537

**Supplementary Table 7:** Combined Logistic Regression Results for T2D PRS and Lifestyle Factors Associated with T2D Risk.

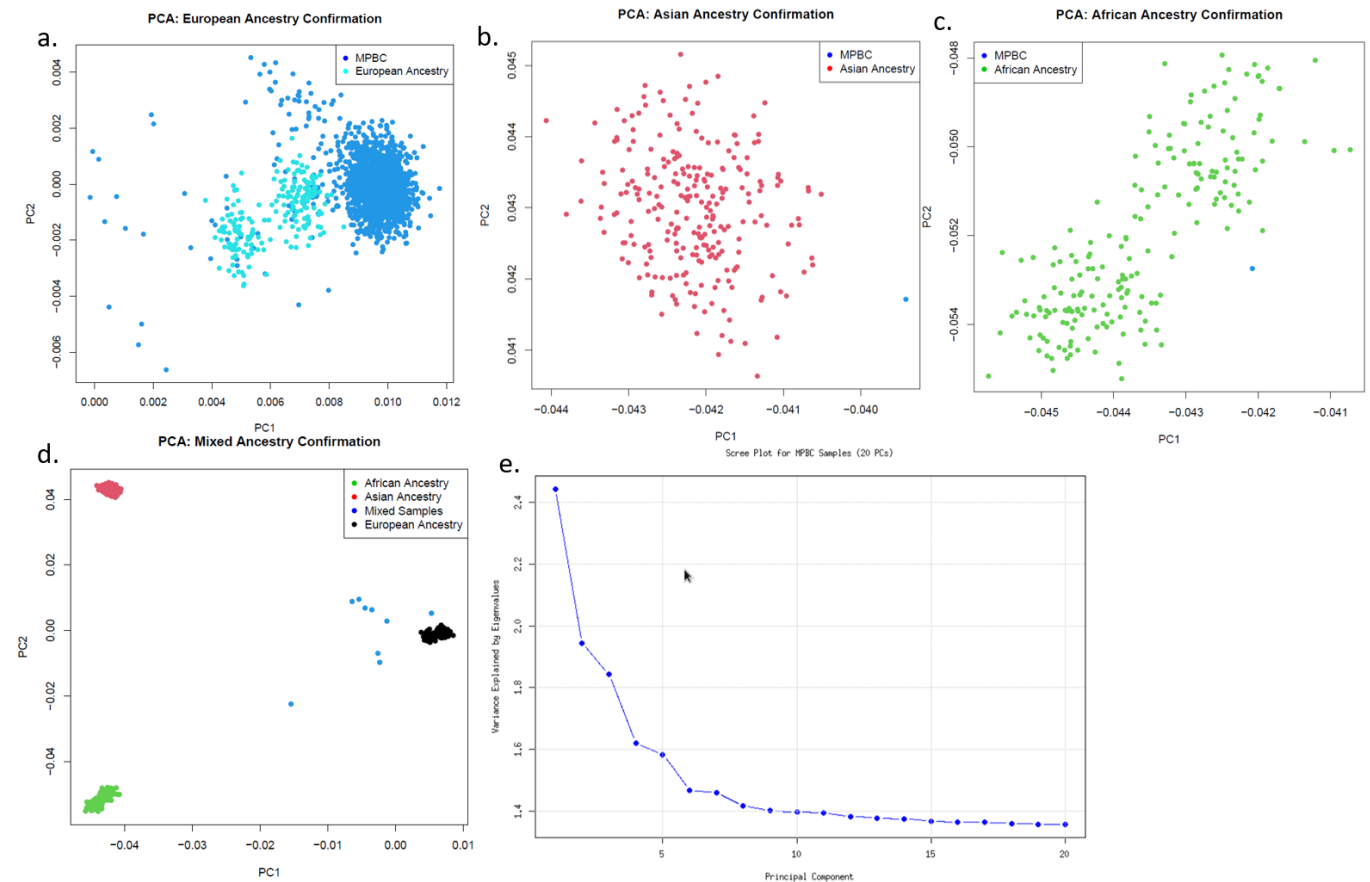
*PRS polygenic score; Age = AAI; PC principal component; glm generalized linear model.*

<sup>1</sup>*glm (formula = T2D ~ T2D PRS + Smoking/Snus/Pesticides/Caffeine + SEX + AGE + PC1 + PC2 + PC3 + PC4 + PC5, family = binomial, data = data)*

<sup>2</sup>*glm (formula = T2D ~ T2D PRS \* Smoking/Snus/Pesticides/Caffeine + SEX + AGE + PC1 + PC2 + PC3 + PC4 + PC5, family = binomial, data = data)*

PRS are normalized z-Scores.

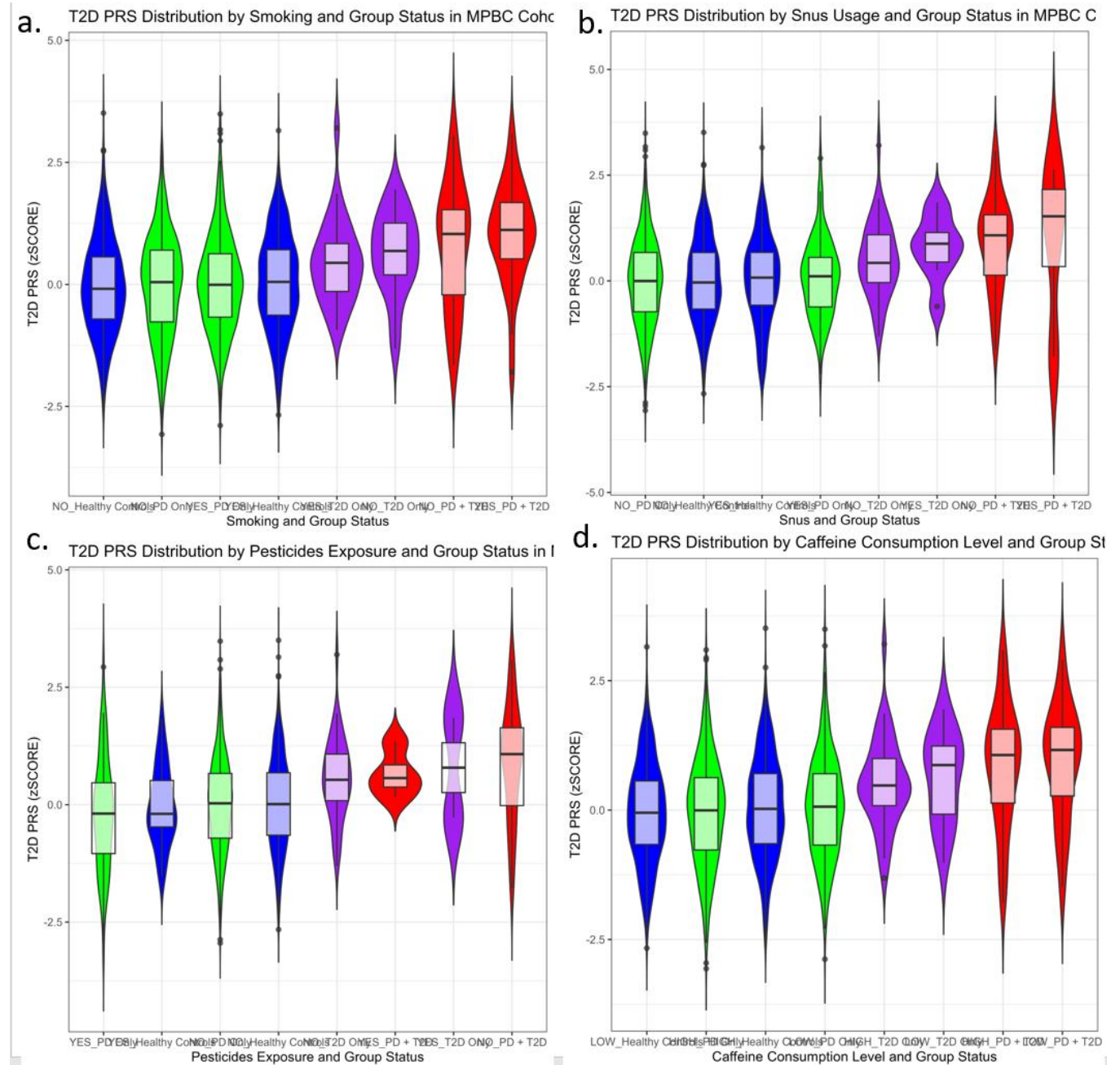
Variable	Smoking (Add) <sup>1</sup>	Smoking (Int) <sup>2</sup>	Snus (Add) <sup>1</sup>	Snus (Int) <sup>2</sup>	Pesticides (Add) <sup>1</sup>	Pesticides (Int) <sup>2</sup>	Caffeine (Add) <sup>1</sup>	Caffeine (Int) <sup>2</sup>	Caffeine Levels (Add) <sup>1</sup>	Caffeine Levels (Int) <sup>2</sup>
<b>Intercept</b>	-2.859 (p=0.003)	-2.862 (p=0.003)	-2.709 (p=0.006)	-2.702 (p=0.006)	-3.139 (p=0.002)	-3.138 (p=0.002)	-3.145 (p=0.007)	-4.160 (p=0.027)	-3.225 (p=0.001)	-3.251 (p=0.001)
<b>T2D PRS</b>	0.745 (p<1×10 <sup>-1</sup> 3)	0.753 (p<1×10 <sup>-7</sup> )	0.749 (p<1×10 <sup>-13</sup> )	0.741 (p<1×10 <sup>-12</sup> )	0.736 (p<1×10 <sup>-11</sup> )	0.738 (p<1×10 <sup>-12</sup> )	3.012 (p<1×10 <sup>-1</sup> 3)	7.773 (p=0.146)	0.736 (p<1×10 <sup>-1</sup> 3)	0.778 (p=2×10 <sup>-5</sup> )
<b>Estimate</b>	-0.209 (p=0.291)	-0.200 (p=0.397)	-0.434 (p=0.187)	-0.488 (p=0.237)	-0.076 (p=0.866)	-0.059 (p=0.911)	0.242 (p=0.749)	1.254 (p=0.447)	0.268 (p=0.221)	0.308 (p=0.242)
<b>Interaction Term</b>	N/A	-0.015 (p=0.941)	N/A	0.074 (p=0.822)	N/A	-0.028 (p=0.949)	N/A	-4.803 (p=0.370)	-0.060 (p=0.780)	-0.060 (p=0.780)
<b>Sex</b>	-0.799 (p=0.001)	-0.800 (p=0.001)	-0.837 (p=0.001)	-0.836 (p=0.001)	-0.726 (p=0.004)	-0.726 (p=0.004)	-0.761 (p=0.001)	-0.763 (p=0.001)	-0.759 (p=0.001)	-0.759 (p=0.001)
<b>Age</b>	0.014 (p=0.265)	0.014 (p=0.265)	0.012 (p=0.353)	0.012 (p=0.356)	0.015 (p=0.263)	0.015 (p=0.263)	0.012 (p=0.331)	0.012 (p=0.326)	0.014 (p=0.263)	0.014 (p=0.265)
<b>PC1</b>	4.103 (p=0.186)	4.084 (p=0.189)	4.084 (p=0.190)	4.101 (p=0.188)	4.802 (p=0.123)	4.810 (p=0.123)	4.602 (p=0.136)	4.366 (p=0.160)	4.710 (p=0.127)	4.647 (p=0.133)
<b>PC2</b>	4.419 (p=0.395)	4.430 (p=0.394)	4.304 (p=0.411)	4.309 (p=0.410)	4.806 (p=0.373)	4.803 (p=0.373)	5.284 (p=0.326)	5.344 (p=0.322)	3.838 (p=0.454)	3.880 (p=0.449)
<b>PC3</b>	5.084 (p=0.270)	5.075 (p=0.271)	4.879 (p=0.291)	4.858 (p=0.293)	2.994 (p=0.537)	3.010 (p=0.535)	5.057 (p=0.277)	5.183 (p=0.266)	5.061 (p=0.274)	5.004 (p=0.279)





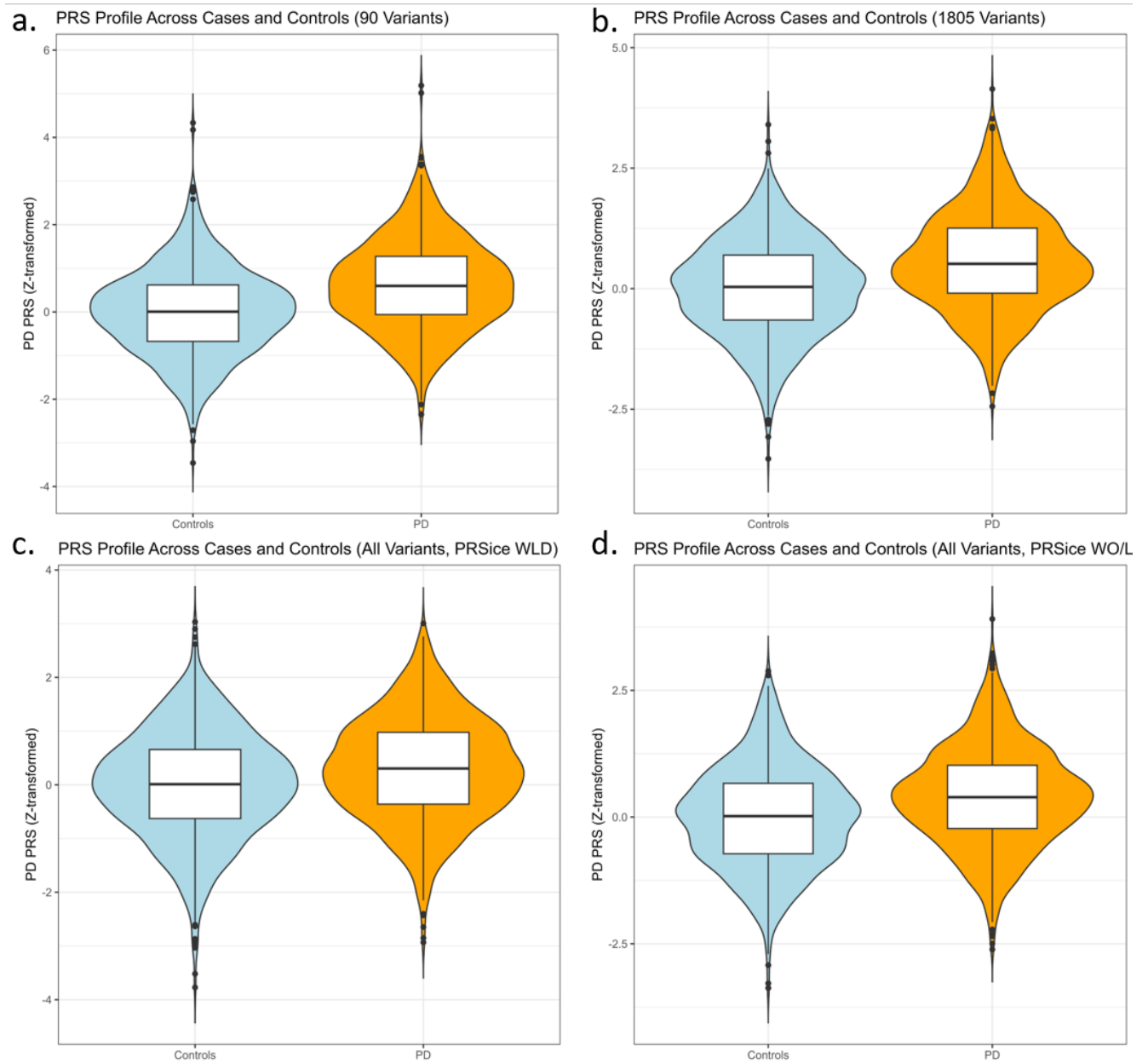
**Supplementary Figure 1: Clustering of MPBC samples with different populations A.**

Identification of Individuals with European Ancestry Based on PCA Clustering B. Identification of Individuals with Asian Ancestry Based on PCA Clustering C. Identification of Individuals with African Ancestry Based on PCA Clustering D. Identification of Genetically Admixed Individuals (Mixed Ancestry) Based on PCA E. Scree plot of Principal Components in the MPBC Cohort.

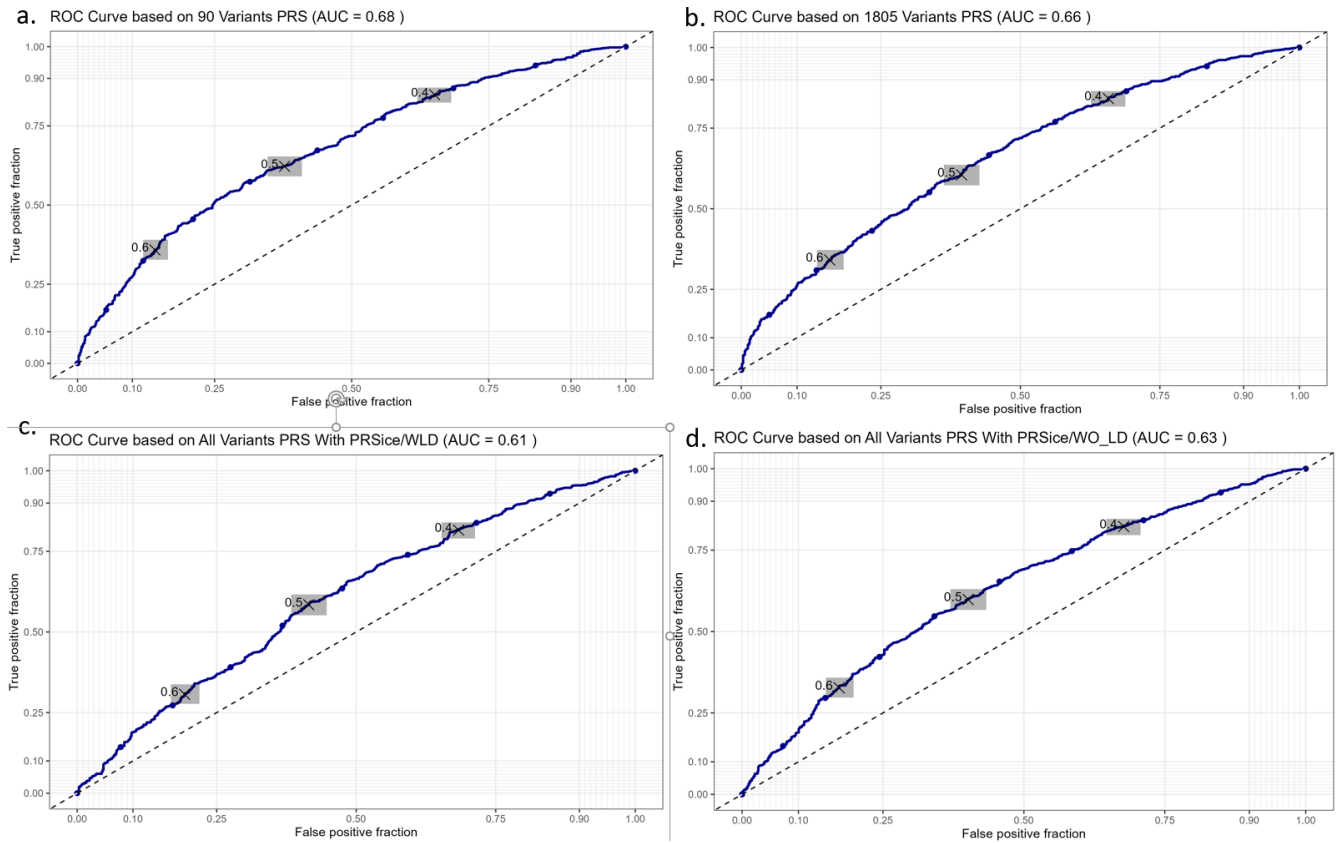


**Supplementary Figure 2: T2D PRS profiles stratified by each factor across the four disease groups (Controls, PD Only, T2D Only, and PD + T2D). A. Stratification by Smoking Status B.**

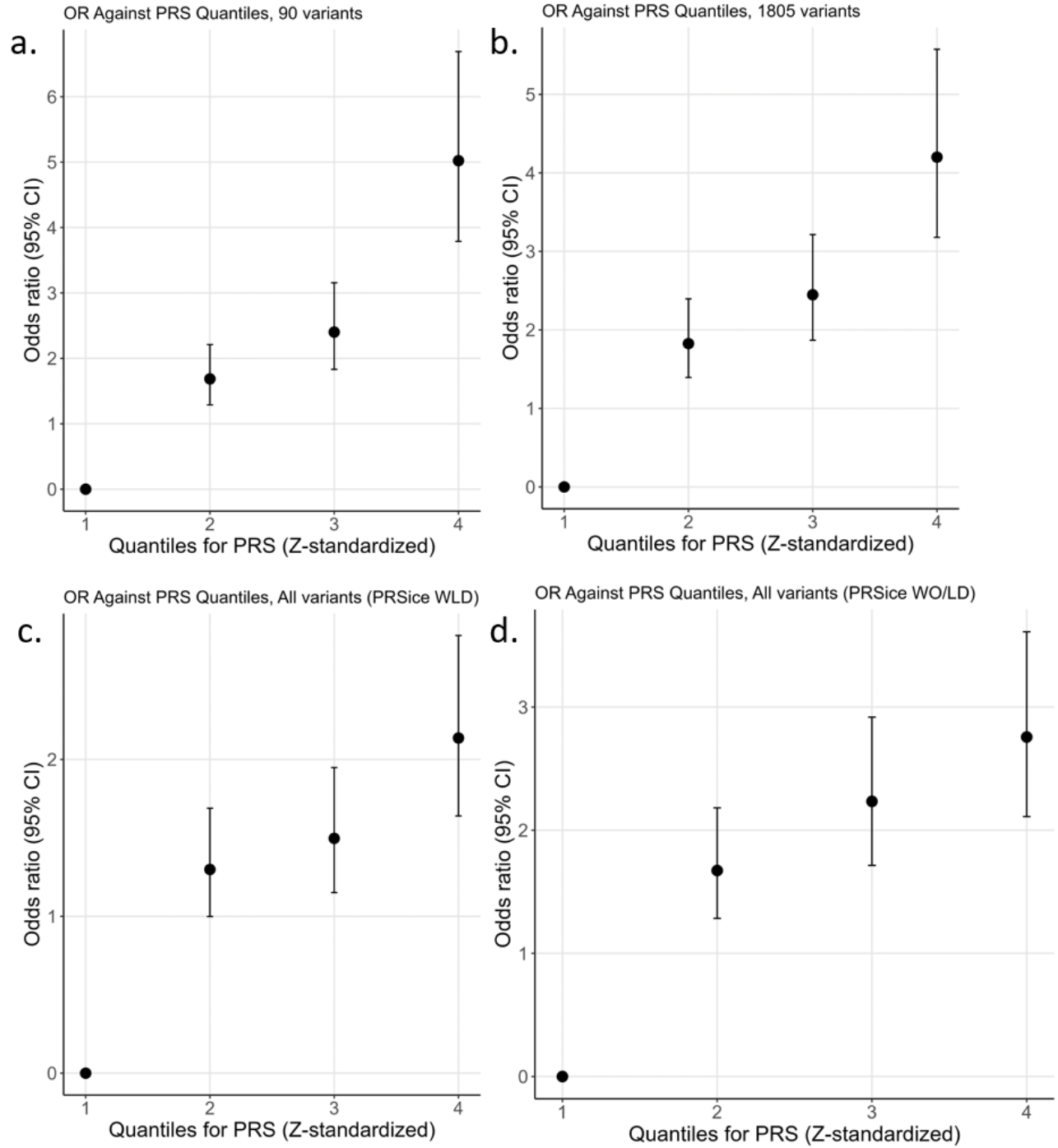
Stratification by Snus Usage c. Stratification by Pesticides Exposure D. Stratification by Caffeine Consumption Level.



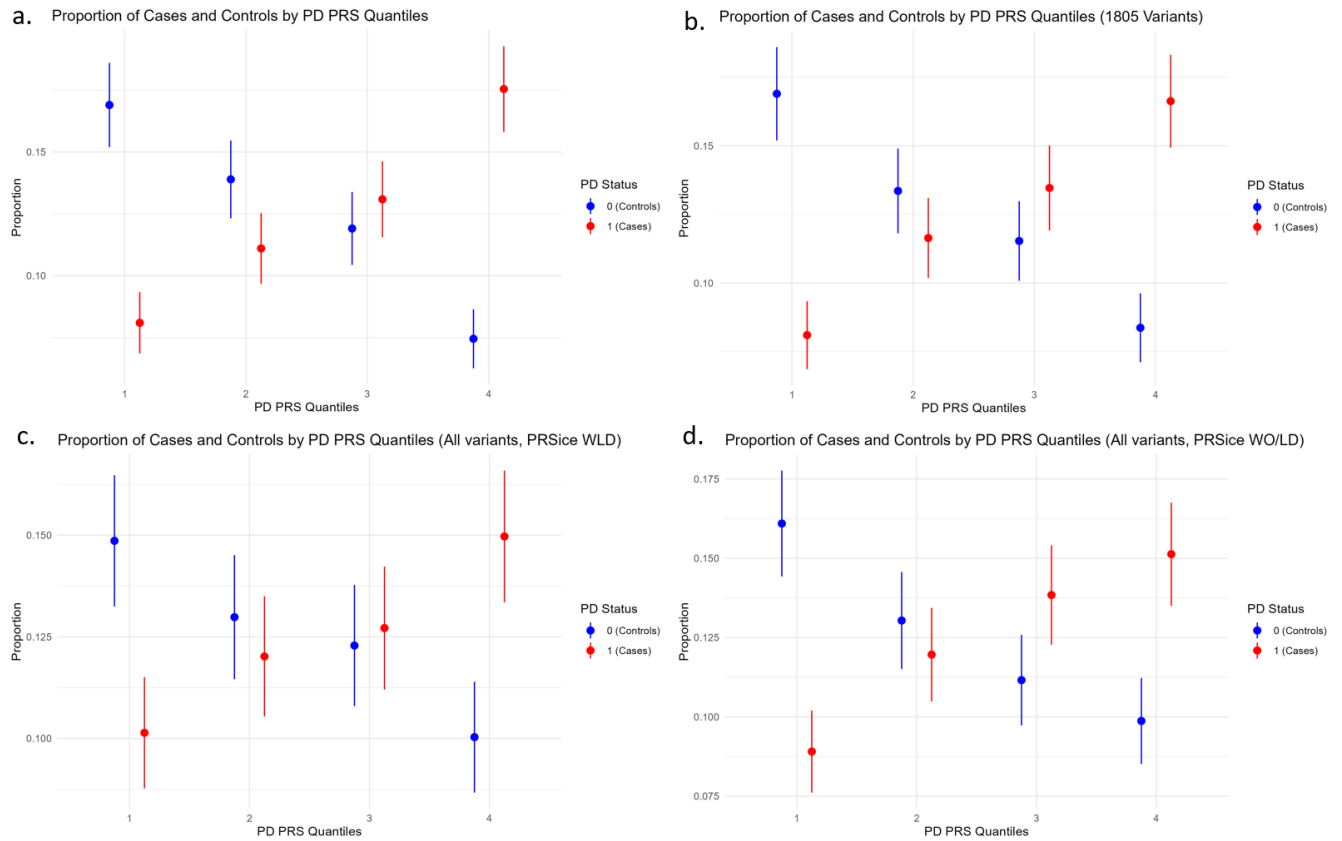
**Supplementary Figure 3:** Violin plots of PD PRS profiles for all 4 PRS construction methods using variants studied by Nalls et al. (2019). A. 90 significant SNPs B. 1805 SNPs. C. All SNPs with LD clumping D. All SNPs without LD clumping.



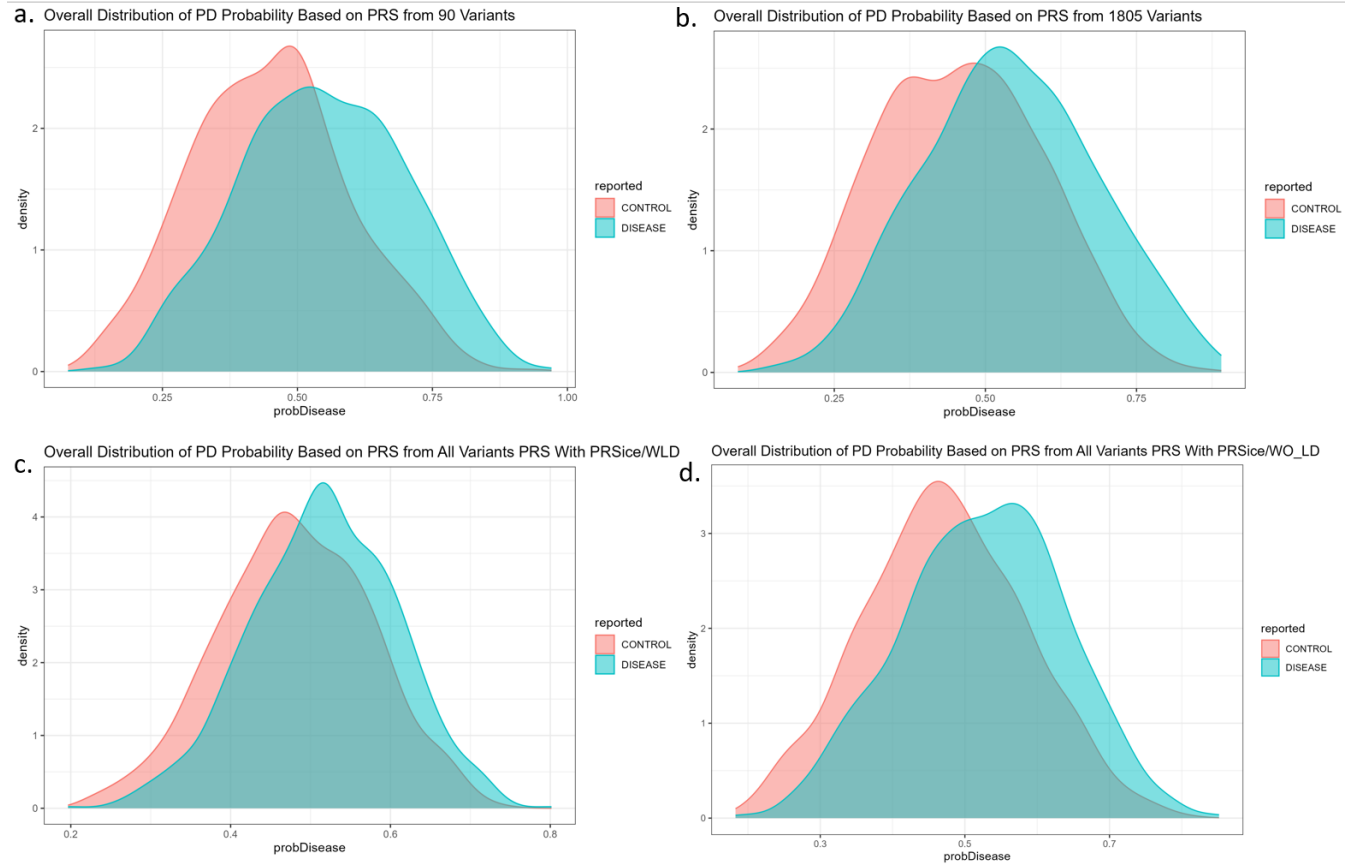
**Supplementary Figure 4:** RcOC curve plots showing logistic model predictive accuracy for all PD PRS construction methods using variants studied by Nalls et al. (2019). A. 90 significant SNPs B. 1805 SNPS. C. All SNPs with LD clumping D. All SNPs without LD clumping.



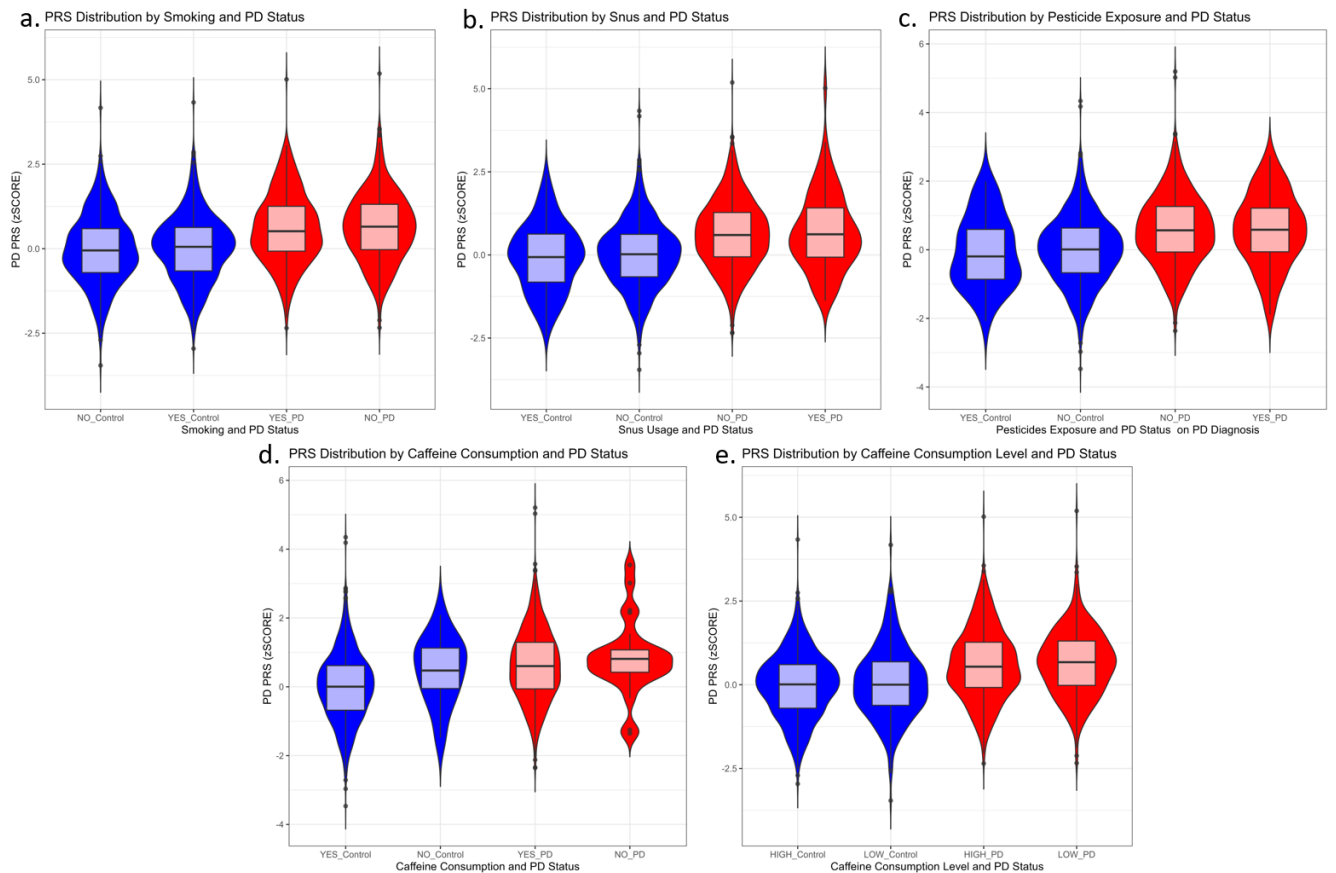
**Supplementary Figure 5:** Quantile plots of odds ratio against normalized PRS (zSCORE) for all PRS construction methods using variants studied by Nalls et al. (2019). A. 90 significant SNPs B. 1805 SNPs. C. All SNPs with LD clumping D. All SNPs without LD clumping.



**Supplementary Figure 6:** Quantile plots showing proportion of cases and controls by PD PRS quantiles for all PRS construction methods using variants studied by Nalls et al. (2019). A. 90 significant SNPs B. 1805 SNPs. C. All SNPs with LD clumping D. All SNPs without LD clumping.

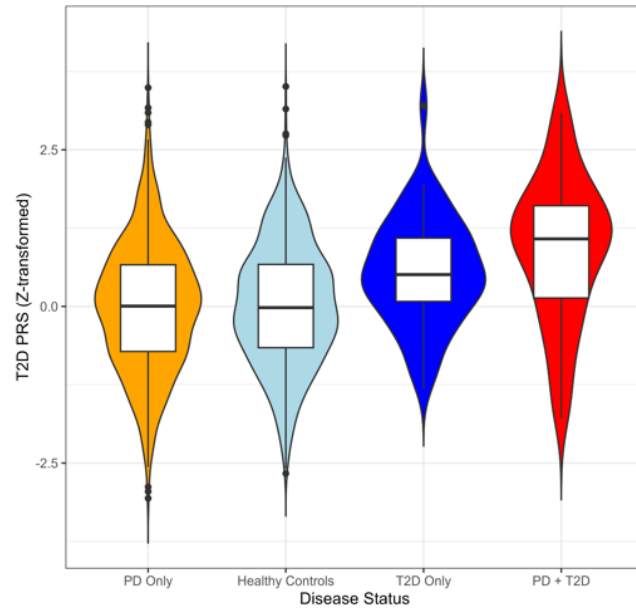


**Supplementary Figure 7:** Density plots of PRS distribution in PD cases and controls against disease probability for all PRS construction methods using variants studied by Nalls et al. (2019). A. 90 significant SNPs B. 1805 SNPs. C. All SNPs with LD clumping D. All SNPs without LD clumping.

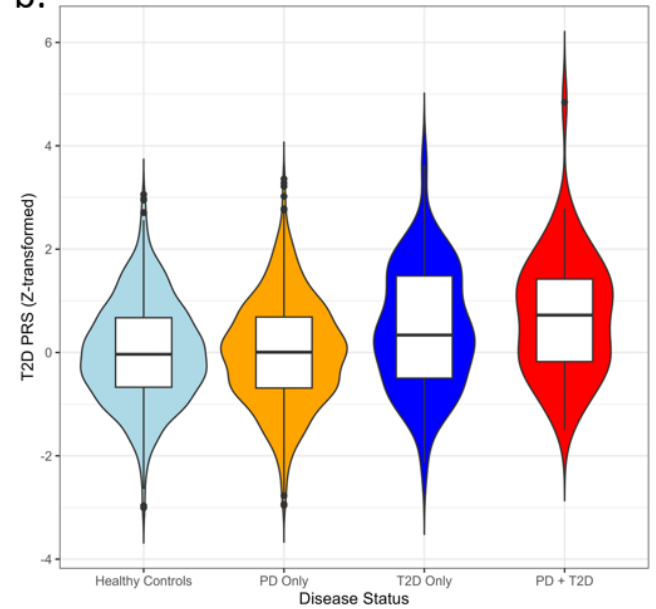


**Supplementary Figure 8:** Stratification of PD PRS distribution by environmental factors and PD status. A. Smoking B. Snus Usage C. Pesticide Exposure D. Caffeine Consumption (Ever/Never) E. Caffeine Consumption Level (High/Low).

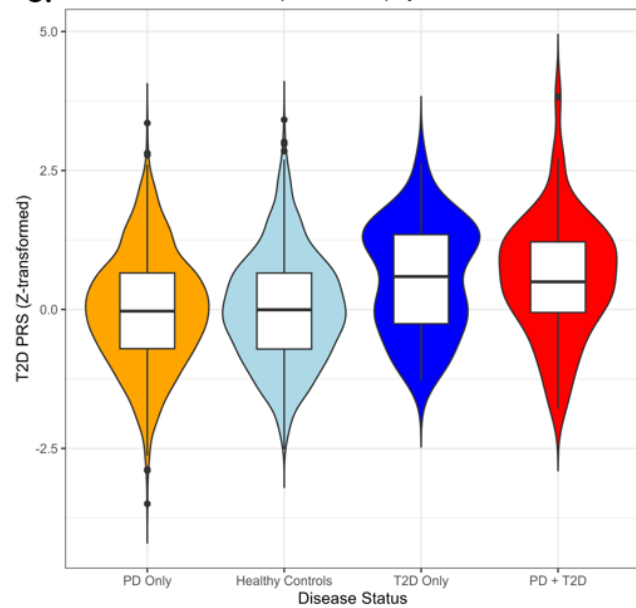
a. Distribution of T2D PRS (Ge Score) by Disease Status



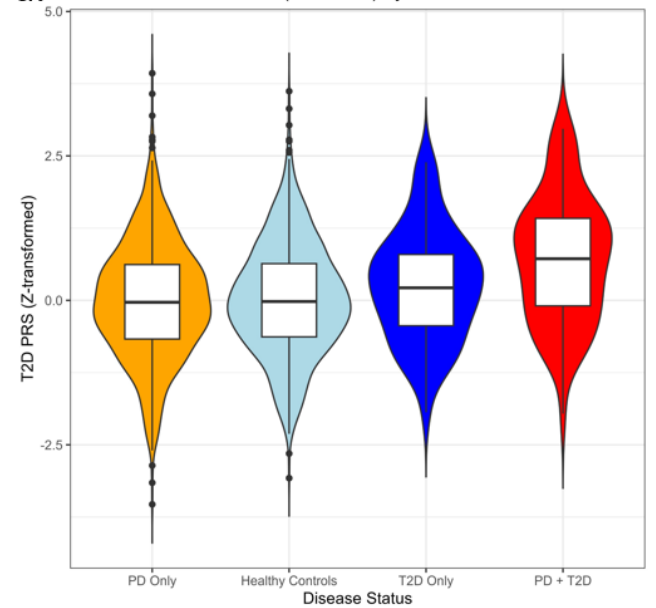
b. Distribution of T2D PRS (Khera Score) by Disease Status



c. Distribution of T2D PRS (Mars Score) by Disease Status

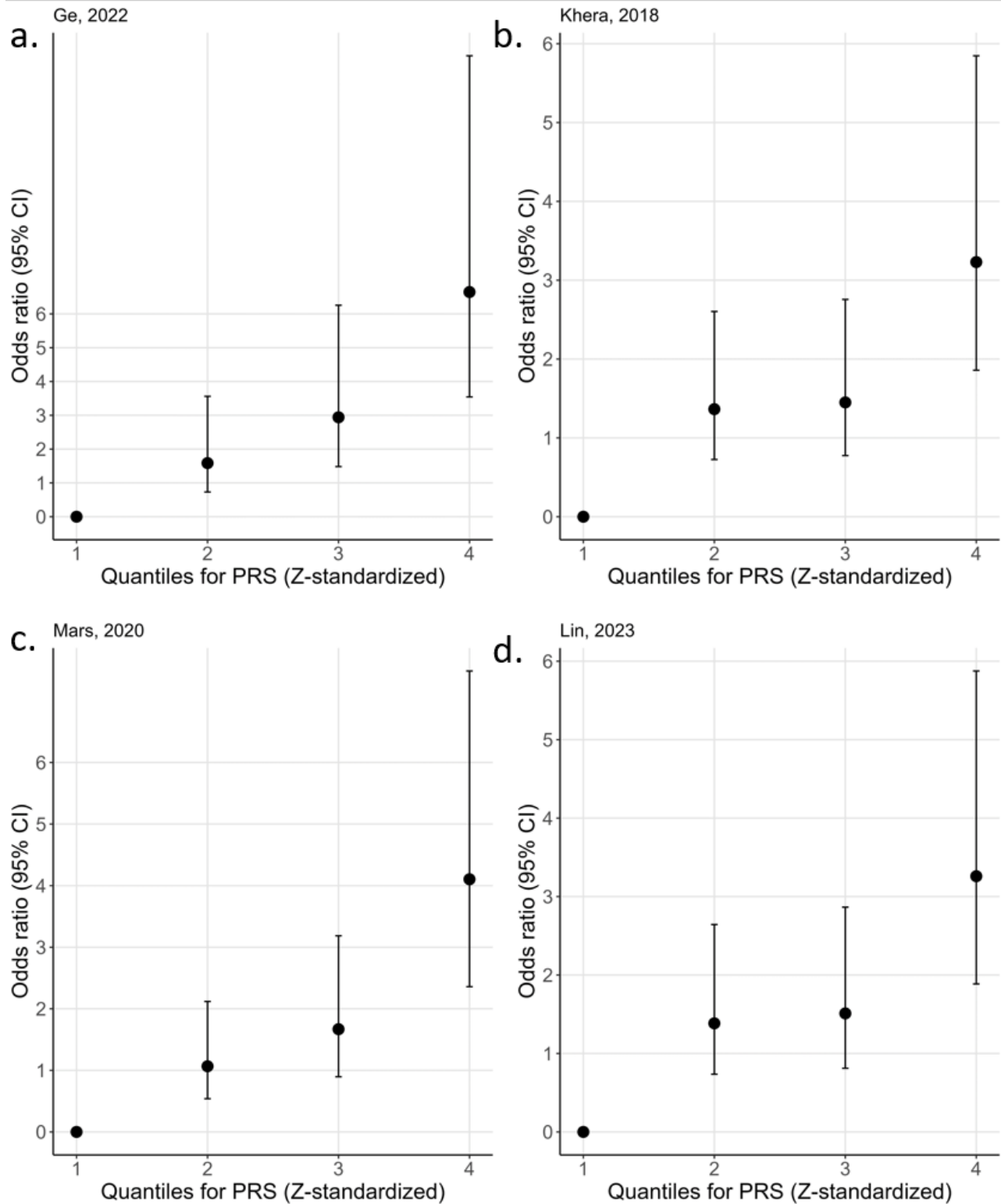


d. Distribution of T2D PRS (Lin Score) by Disease Status

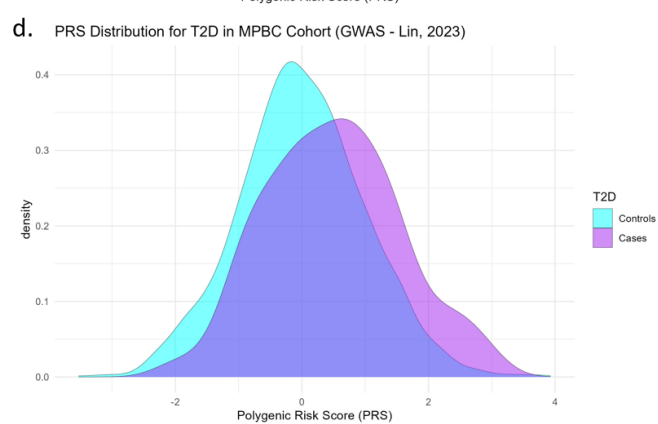
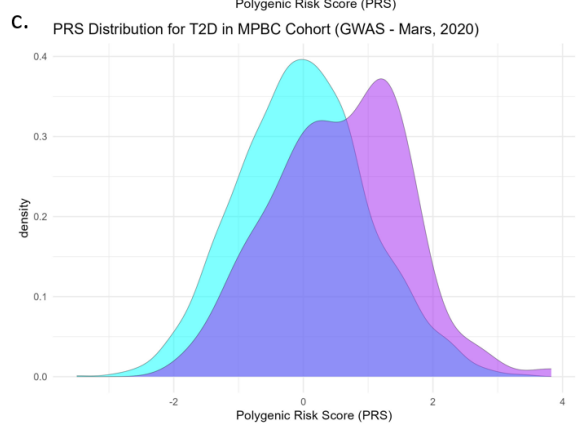
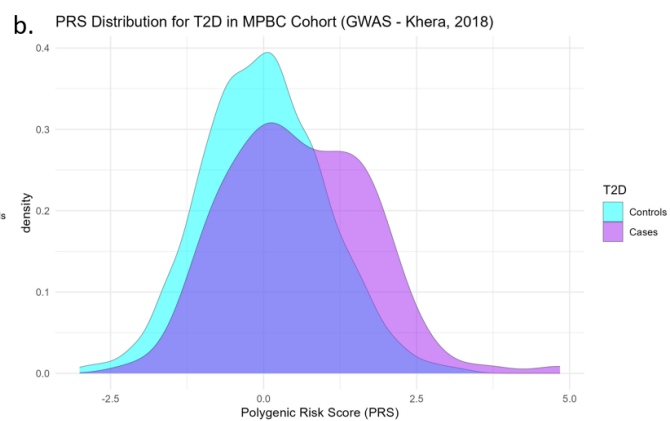
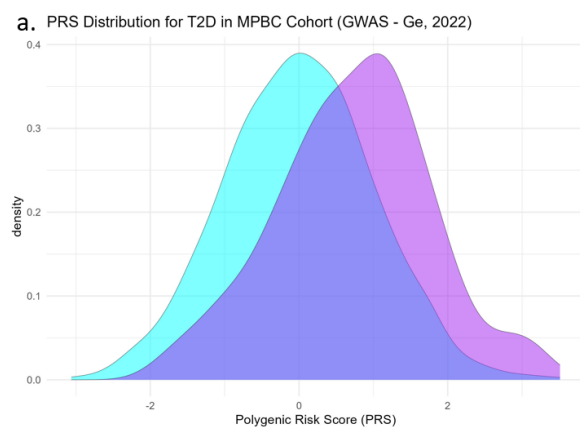


**Supplementary Figure 9:** Violin and Box Plots of T2D PRS Distributions by Disease Status Using 4 GWAS Summary Statistics. A. Ge et al. (2022) B. Khera et al. (2018) C. Mars et al. (2020) D. Lin et al. (2023).



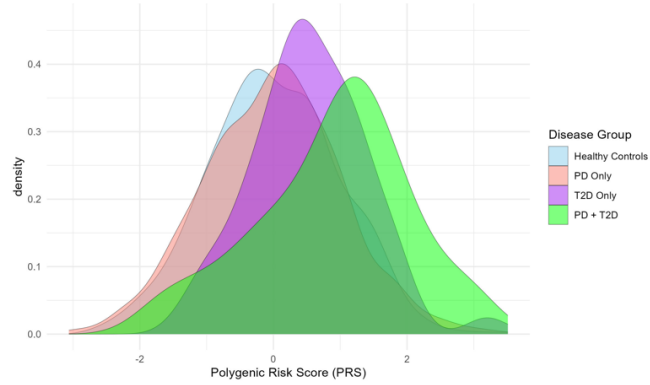


**Supplementary Figure 10:** Quantile Plots Showing Odds Ratio Estimates Across PRS Quantiles for T2D Risk Using 4 GWAS Summary Statistics. A. Ge et al. (2022) B. Khera et al. (2018) C. Mars et al. (2020) D. Lin et al. (2023).

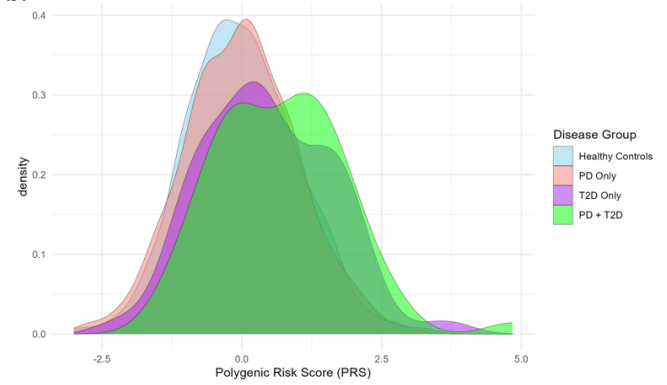


**Supplementary Figure 11:** Density Plots of T2D PRS Distribution for Cases and Controls in the MPBC Cohort Using 4 GWAS Summary Statistics. A. Ge et al. (2022) B. Khera et al. (2018) C. Mars et al. (2020) D. Lin et al. (2023).

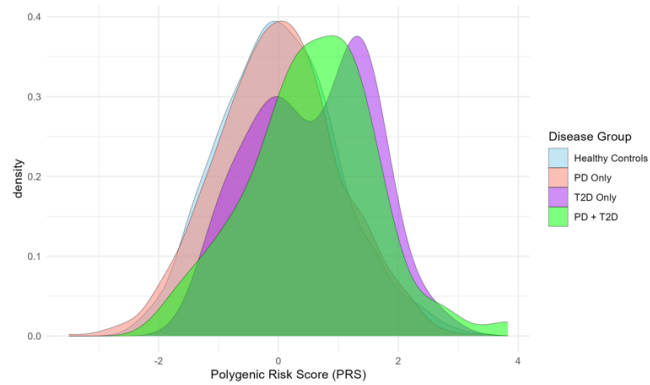
a. PRS Distribution Across Disease Groups (Ge, 2022)



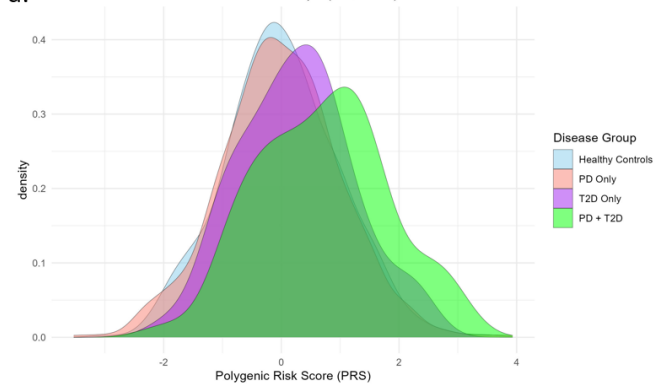
b. PRS Distribution Across Disease Groups (Khera, 2018)



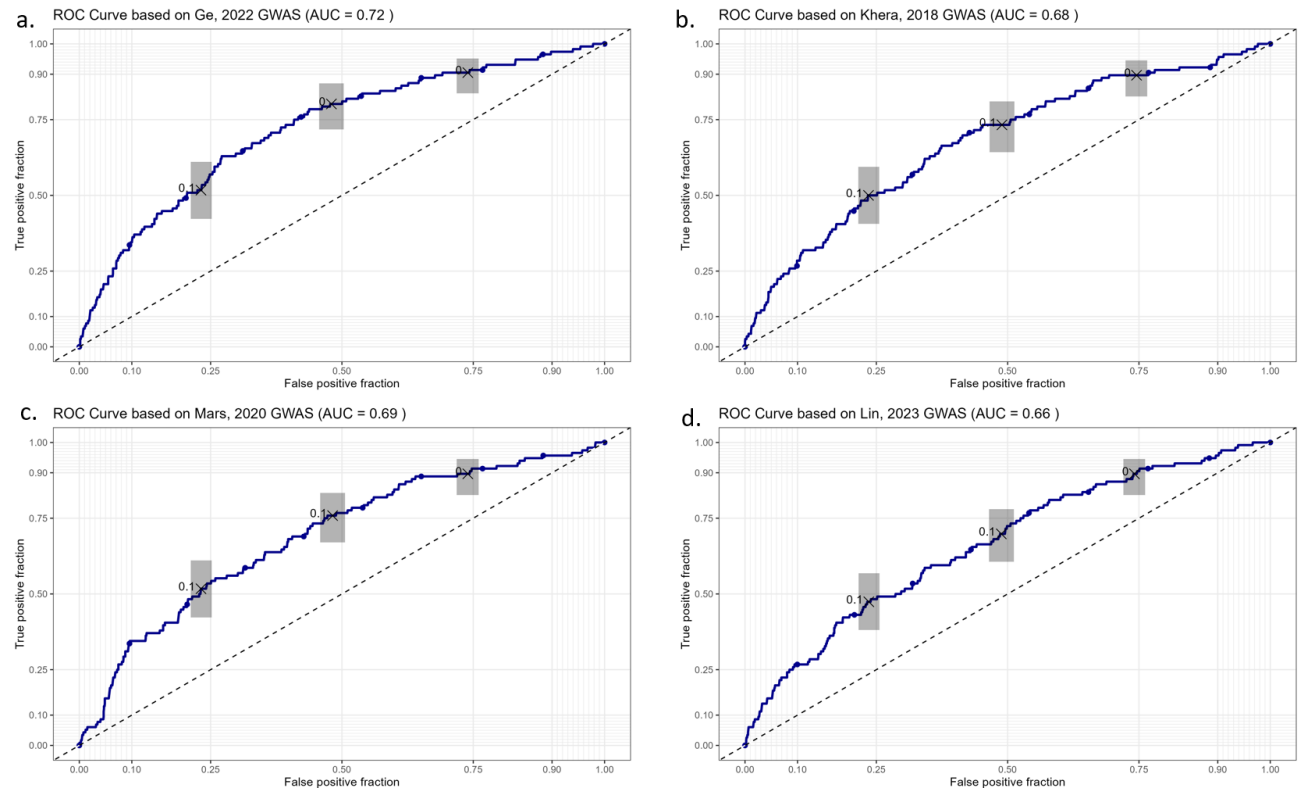
c. PRS Distribution Across Disease Groups (Mars, 2020)



d. PRS Distribution Across Disease Groups (Lin, 2023)



**Supplementary Figure 12:** Density Plots of T2D PRS Distribution Across Disease Groups in the MPBC Cohort Using 4 GWAS Summary Statistics. A. Ge et al. (2022) B. Khera et al. (2018) C. Mars et al. (2020) D. Lin et al. (2023).



**Supplementary Figure 13:** ROC Curves for T2D Prediction Using PRS from 4 GWAS Summary Statistics. A. Ge et al. (2022) B. Khera et al. (2018) C. Mars et al. (2020) D. Lin et al. (2023).

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