ACMG-ClinVar Penetrance RMarkdown

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Working Directory: /Users/jamesdiao/Documents/Kohane_Lab/2017-ACMG-penetrance/ACMG_Penetrance

1 Download, Transform, and Load Data

1.1 Collect ACMG Gene Panel

http://www.ncbi.nlm.nih.gov/clinvar/docs/acmg/

Table from ACMG SF v2.0 Paper 60 x 8 (selected rows):

	Phenotype	MIM_disorder	PMID_Gene_Reviews_entry
$\overline{\mathbf{N1}}$	Hereditary breast and ovarian cancer	604370 612555	20301425
N2	Hereditary breast and ovarian cancer	604370 612555	20301425
N3	Li-Fraumeni syndrome	151623	20301488
N4	Peutz-Jeghers syndrome	175200	20301443
N5	Lynch syndrome	120435	20301390

Table continues below

	Typical_age_of_onset	Gene	MIM_gene	Inheritance	Variants_to_report
$\overline{\mathrm{N1}}$	Adult	BRCA1	113705	AD	KP&EP
N2	Adult	BRCA2	600185	AD	KP&EP
N3	Child/Adult	TP53	191170	AD	KP&EP
N4	Child/Adult	STK11	602216	AD	KP&EP
N5	Adult	MLH1	120436	AD	KP&EP

ACMG-59 Genes:

##	[1]	BRCA1	BRCA2	TP53	STK11	MLH1	MSH2	MSH6	PMS2
##	[9]	APC	MUTYH	BMPR1A	SMAD4	VHL	MEN1	RET	PTEN
##	[17]	RB1	SDHD	SDHAF2	SDHC	SDHB	TSC1	TSC2	WT1
##	[25]	NF2	COL3A1	FBN1	TGFBR1	TGFBR2	SMAD3	ACTA2	MYH11
##	[33]	MYBPC3	MYH7	TNNT2	TNNI3	TPM1	MYL3	ACTC1	PRKAG2
##	[41]	GLA	MYL2	LMNA	RYR2	PKP2	DSP	DSC2	TMEM43
##	[49]	DSG2	KCNQ1	KCNH2	SCN5A	LDLR	APOB	PCSK9	ATP7B
##	[57]	OTC	RYR1	CACNA1S					

1.2 Download ClinVar VCF

ftp://ftp.ncbi.nlm.nih.gov/pub/clinvar/vcf_GRCh37/clinvar.vcf.gz

ClinVar is the central repository for variant interpretations. Relevant information from the VCF includes:

- (a) CLNSIG = "Variant Clinical Significance, 0 Uncertain, 1 Not provided, 2 Benign, 3 Likely benign, 4 Likely pathogenic, 5 Pathogenic, 6 Drug response, 7 Histocompatibility, 255 Other"
- (b) CLNDBN = "Variant disease name"
- (c) CLNDSDBID = "Variant disease database ID"
- (d) CLNREVSTAT = "Review Status, no_assertion, no_criteria, single criterion provided single submitter, mult criteria provided multiple submitters no conflicts, conf criteria provided conflicting interpretations, exp Reviewed by expert panel, guideline Practice guideline"
- (e) INTERP = Pathogenicity (likely pathogenic or pathogenic; CLNSIG = 4 or 5)
- ## Processed ClinVar data frame 204730 x 15 (selected rows/columns):

VAR_ID	CHROM	POS	ID	REF	ALT	CLNSIG
1_957568_A_G	1	957568	rs115704555	A	G	2
1_957605_G_A	1	957605	rs756623659	G	A	5
$1_957640_C_T$	1	957640	rs6657048	\mathbf{C}	${ m T}$	255
$1_957693_A_T$	1	957693	rs879253787	A	${ m T}$	5

Table continues below

CLNDBN	CLNREVSTAT	CLNDSDBID	INTERP
not_specified	single	CN169374	FALSE
Congenital_myasthenic_syndrome	no_criteria	C0751882:ORPHA590	TRUE
$not_specified$	conf	CN169374	FALSE
Congenital_myasthenic_syndrome	no_criteria	C0751882:ORPHA590	TRUE

1.3 Download 1000 Genomes VCFs

 $ftp://ftp.1000genomes.ebi.ac.uk/vol1/ftp/release/20130502/ALL.[chrom].phase3_[version].20130502.genotypes.vcf.gz \\ Downloaded 1000 Genomes VCFs are saved in: /Users/jamesdiao/Documents/Kohane_Lab/2017-ACMG-penetrance/1000G/$

Download report: region and successes: 59 x 6 (selected rows):

gene	name	chrom	start	end	downloaded
BRCA1	NM_{007294}	17	41196311	41277500	TRUE
BRCA2	NM_000059	13	32889616	32973809	TRUE
TP53	NM_000546	17	7571719	7590868	TRUE
STK11	NM_000455	19	1205797	1228434	TRUE
MLH1	NM_000249	3	37034840	37092337	TRUE

File saved as download_output.txt in Supplementary_Files

1.4 Import and Process 1000 Genomes VCFs

- (a) Unnest the data frames to 1 row per variant_ID key (CHROM_POSITION_REF_ALT).
- (b) Remove all insertions, deletions, CNV, etc, and keep only missense variants (1 REF, 1 ALT)
- (c) For 1000 Genomes: convert genomes to allele counts. For example: (0|1) becomes 1, (1|1) becomes 2. Multiple alleles are unnested into multiple counts. For example: (0|2) becomes 0 for the first allele (no 1s) and 1 for the second allele (one 2).

Processed 1000 Genomes VCFs: 141467 x 2516 (selected rows/columns):

GENE	AF_1000G	VAR_ID	CHRO	OM	POS	ID	REF	ALT
BRCA1	0.004193290	17_41196363_	C_T	17	41196363	rs8176320	С	Τ
BRCA1	0.008386580	$17_41196368_$	C_T	17	41196368	rs184237074	\mathbf{C}	${ m T}$
BRCA1	0.000998403	$17_41196372_$	T_C	17	41196372	rs189382442	Τ	\mathbf{C}
BRCA1	0.342252000	$17_41196408_$	G_A	17	41196408	rs12516	G	A
BRCA1	0.000399361	17_41196409_	G_C	17	41196409	rs548275991	G	\mathbf{C}

Table continues below

HG00096	HG00097	HG00099	HG00100	HG00101	HG00102
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
1	0	1	1	0	2
0	0	0	0	0	0

1.5 Import and Process gnomAD/ExAC VCFs

- (a) Unnest the data frames to 1 row per variant_ID key (CHROM_POSITION_REF_ALT).
- (b) Remove all insertions, deletions, CNV, etc, and keep only missense variants (1 REF, 1 ALT)
- (c) Collect superpopulation-level allele frequencies: African = AFR, Latino = AMR, European (Finnish + Non-Finnish) = EUR, East.Asian = EAS, South.Asian = SAS.

Processed gnomAD VCFs: 96742 x 48 (selected rows/columns):

	GENE	AF_GNOMAD	VAR_ID
45361	MYH11	0.00000396	16_15833936_A_G
187310	SCN5A	0.00000397	$3_38648258_G_C$
47489	MYBPC3	0.00003310	11_47359343_C_T
56734	LMNA	0.00002680	$1_156096574_C_T$
38629	FBN1	0.00000396	15_48784679_C_A

Processed ExAC VCFs: 59883 x 45 (selected rows/columns):

	GENE	AF_EXAC	VAR_ID
6311	MSH2	0.000032990	2_47690263_T_C
21144	TSC2	0.000009783	16_2142469_C_T
42320	DSC2	0.000008255	18_28667740_G_A
42584	TMEM43	0.000190700	3_14170515_A_T
346100	SCN5A	0.000016560	$3_38598752_G_A$

1.6 Collect 1000 Genomes Phase 3 Populations Map

This will allow us to assign genotypes from the 1000 Genomes VCF to ancestral groups. From: ftp://ftp.1000genomes.ebi.ac.uk/vol1/ftp/release/20130502/integrated_call_samples_v3.20130502. ALL.panel

Phase 3 Populations Map Table: 2504 x 4 (selected rows)

sample	pop	super_pop	gender
HG02860	GWD	AFR	male female female female male male
HG02643	GWD	AFR	
HG01390	CLM	AMR	
NA19755	MXL	AMR	
HG03743	STU	SAS	
HG04176	BEB	SAS	

1.7 Merge ClinVar with gnomAD, ExAC, and 1000 Genomes

Breakdown of ClinVar Variants

Subset_ClinVar	Number_of_Variants
Total ClinVar	204730
LP/P	34152
ACMG LP/P	6781
ACMG LP/P in gnomAD	1179
ACMG LP/P in ExAC	845
ACMG LP/P in 1000 Genomes	135

Breakdown of ACMG-gnomAD Variants

Subset_gnomAD	Number_of_Variants
ACMG in gnomAD ClinVar-ACMG in gnomAD LP/P-ACMG in gnomAD	96742 13897 1179

Breakdown of ACMG-ExAC Variants

$Subset_gnomAD$	$Number_of_Variants$
ACMG in ExAC	59883
ClinVar-ACMG in ExAC	10778
LP/P-ACMG in ExAC	845

Breakdown of ACMG-1000G Variants

$Subset_gnomAD$	$Number_of_Variants$
ACMG in 1000G	141466
ClinVar-ACMG in 1000G	6012
LP/P-ACMG in 1000G	135

1.8 Comparison with ClinVar Browser Query Results

clinvar_query.txt contains all results matched by the search query: "(APC[GENE] OR MYH11[GENE]... OR WT1[GENE]) AND (clinsig_pathogenic[prop] OR clinsig_likely_pathogenic[prop])" from the ClinVar website. The exact query is saved in /Supplementary_Files/query_input.txt This presents another way of collecting data from ClinVar.

Intermediate step: convert hg38 locations to hg19 using the Batch Coordinate Conversion tool (liftOver) from UCSC Genome Browser Utilities.

ClinVar Query Results Table (substitutions only): 6445 x 13 (selected rows/columns)

VAR_ID	Gene(s)	Condition(s)	Frequency
1_17350520_G_C	SDHB	Paragangliomas 4	NA
$1_45798631_T_A$	MUTYH	Hereditary cancer-predisposing syndrome	NA
$1_201334766_A_T$	TNNT2	Familial hypertrophic cardiomyopathy 2	NA
$3_38646328_G_C$	SCN5A	Atrial fibrillation, familial, 10	NA
$3_38647447_G_C$	SCN5A	Atrial fibrillation, familial, 10	NA

Table continues below

Clinical significance (Last reviewed)	Review status
Pathogenic/Likely pathogenic, not	criteria provided, single submitter
provided(Last reviewed: Feb 2, 2015) Pathogenic(Last reviewed: Sep 17, 2015)	criteria provided, single submitter
Pathogenic/Likely pathogenic(Last	criteria provided, multiple submitters, no
reviewed: Feb 27, 2016)	conflicts
Pathogenic(Last reviewed: Apr 15, 2008)	no assertion criteria provided
Pathogenic(Last reviewed: Apr 15, 2008)	no assertion criteria provided

Breakdown of ClinVar Query Results Table:

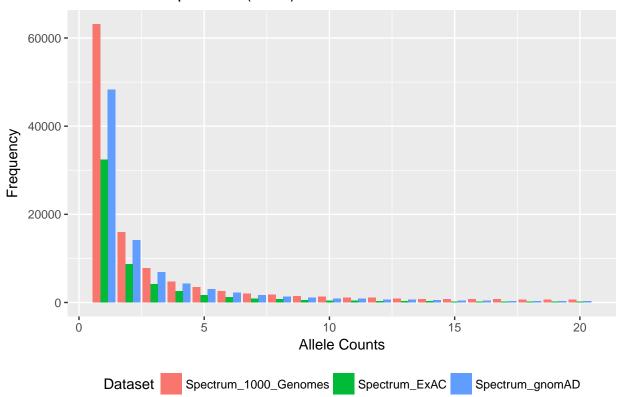
Subset	Number_of_Variants
Initial Count	14097
Filter Substitutions (N>N')	7039
Filter Coupling/Bad-Locations	6445
In ClinVar VCF	494
In LP/P-ClinVar	493
In LP/P-ACMG & gnomAD	45
In LP/P-ACMG & ExAC	33
In LP/P-ACMG & $1000G$	1

Note the large reduction after merging the online query results with the VCF.

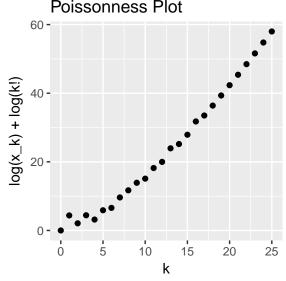
2 Plot Summary Statistics Across Populations

2.1 Distribution of Allele Frequencies

Allele Count Spectrum (1-20)



The distribution follows Binom(n,p), n = # samples and p = allele frequency, if trials are independent. Because n is large and p is small, we may be justified in using a Poisson approximation to the binomial. The fit of this approximation may be tested by the Poissonness plot (Hoaglin 1980), or $log(x_k) + log(k!)$ vs. k. If $x_k = n \Pr(X = k) = n \left(\frac{\lambda^k e^{-k}}{k!}\right)$, then $\ln x_k + \ln k! = \ln n + k \ln \lambda - \lambda = \text{linear function of k}$. Despite some upward concavity, the plot demonstrates reasonable Poissonness, with correlation = 0.99.



2.2 Overall Non-Reference Sites

2.2.0.1 For 1000 Genomes

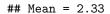
Each individual has n non-reference sites, which can be found by counting. The mean number is computed for each population.

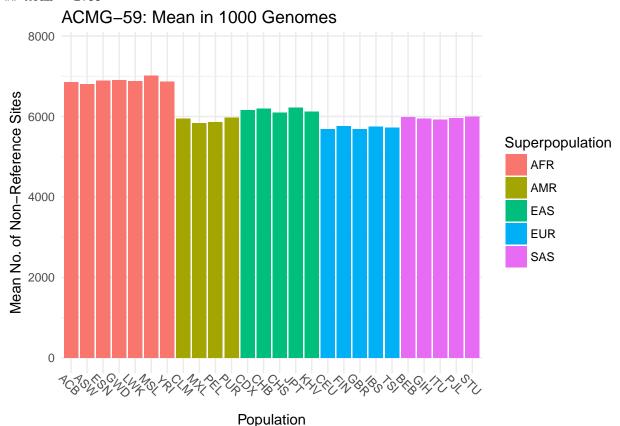
Ex: the genotype of 3 variants in 3 people looks like this:

	HG00366	HG00367	HG00368
Variant 1	2	1	1
Variant 2	2	1	1
Variant 3	1	0	0

Count the number of non-reference sites per individual:

HG00366	HG00367	HG00368
3	2	2





Note: the error bars denote standard deviation, not standard error.

2.2.0.2 For gnomAD/ExAC

The mean number of non-reference sites is E(V), where $V = \sum_{i=1}^{n} v_i$ is the number of non-reference sites at all variant positions v_1 through v_n .

At each variant site, the probability of having at least 1 non-reference allele is $P(v_i) = P(v_{i,a} \cup v_{i,b})$, where a and b indicate the 1st and 2nd allele at each site.

If the two alleles are independent, $P(v_{i,a} \cup v_{i,b}) = 1 - (1 - P(v_{i,a}))(1 - P(v_{i,b})) = 1 - (1 - AF(v_i))^2$

If all variants are independent, $E(V) = \sum_{i=1}^{n} 1 - (1 - AF(v_i))^2$ for any set of allele frequencies.

Ex: the allele frequencies of 3 variants across the 5 superpopulations looks like this:

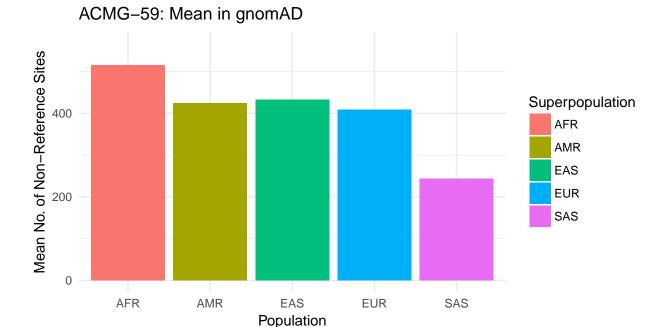
	AFR	AMR	EAS	EUR	SAS
Variant 1 Variant 2	0.1	0.2	0	0	0.3
variant 2	0.2	U	0.3	U	0.1

The probability of having at least 1 non-reference site at each variant - (0|1) (1|0) or (1|1) is given by $1 - (1 - AF)^2$. Note that this is approximately 2 * AF when AF is small:

	AFR	AMR	EAS	EUR	SAS
Variant 1	0.19	0.36	0	0	0.51
Variant 2	0.36	0	0.51	0	0.19

By linearity of expectation, the expected (mean) number of non-reference sites is $\sum E(V_i) = \sum (columns)$.

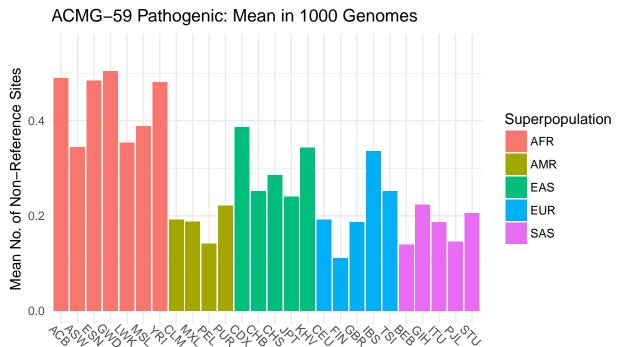
AFR	AMR	EAS	EUR	SAS
0.55	0.36	0.51	0	0.7

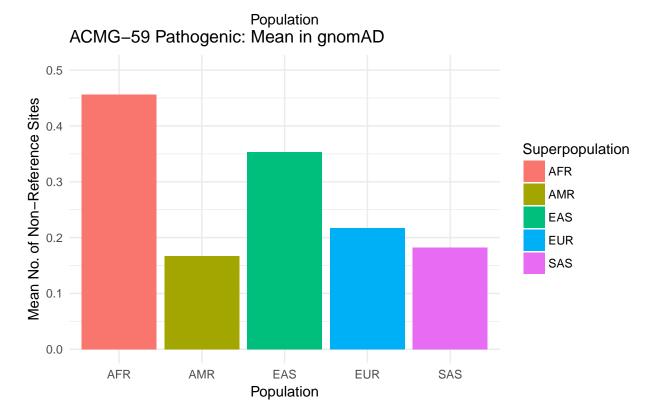


2.3 Pathogenic Non-Reference Sites

2.3.0.1 For 1000 Genomes and gnomAD/ExAC

This is the same procedure as above, but performed only on the subset of variants that are pathogenic.





2.4 Fraction of Individuals with Pathogenic Sites

2.4.0.1 For 1000 Genomes

We can count up the fraction of individuals with 1+ non-reference site(s) in each population. This is the fraction of individuals who would receive a positive genetic test result in at least 1 of the ACMG-59 genes.

Ex: the genotype of 3 variants in 3 people looks like this:

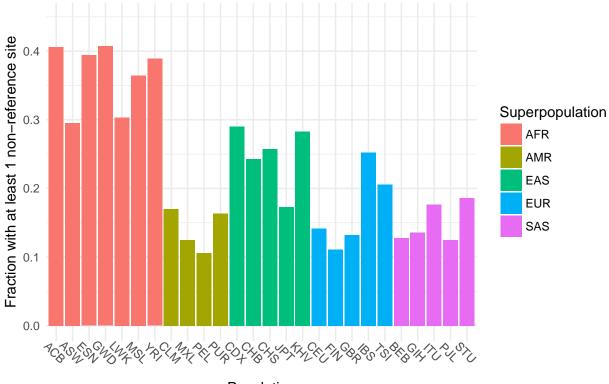
	HG00366	HG00367	HG00368
Variant 1	2	1	1
Variant 2	2	1	1
Variant 3	1	0	0

Count each individual as having a non-reference site (1) or having only reference sites (0):

HG00368	HG00367	HG00366
1	1	1







Population

2.4.0.2 For gnomAD/ExAC

The probability of having at least 1 non-reference site is P(X), where X indicates a non-reference site at any variant position v_1 through v_n .

Recall that $P(v_i) = P(v_{i,a} \cup v_{i,b}) = 1 - (1 - AF(v))^2$ when alleles are independent.

If all alleles are independent, $P(X) = P(\bigcup_{i=1}^n v_i) = 1 - \prod_{i=1}^n (1 - AF(v_i))^2$

Ex: the allele frequencies of 3 variants across the 5 superpopulations looks like this:

-	AFR	AMR	EAS	EUR	SAS
Variant 1	0.1	0.2	0	0	0.3
Variant 2	0.2	0	0.3	0	0.1

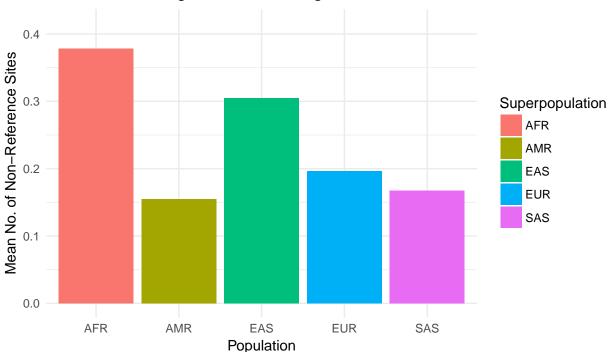
The probability of having at least 1 non-reference site at each variant - (0|1) (1|0) or (1|1) is given by $1 - (1 - AF)^2$. Note that this is approximately 2 * AF when AF is small:

	AFR	AMR	EAS	EUR	SAS
Variant 1	0.19	0.36	0	0	0.51
Variant 2	0.36	0	0.51	0	0.19

The expected (mean) number of non-reference sites is given by $1 - \prod (1 - AF)^2$.

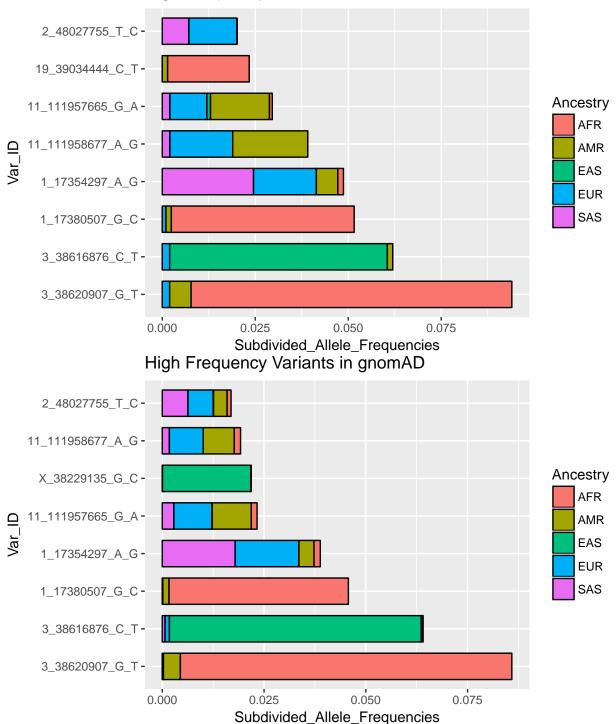
AFR	AMR	EAS	EUR	SAS
0.4816	0.36	0.51	0	0.6031

ACMG-59 Pathogenic: Fraction in gnomAD



2.5 Common Pathogenic Variants by Ancestry





3 Penetrance Estimates

3.1 Bayes' Rule as a Model for Estimating Penetrance

Let V_x be the event that an individual has 1 or more variant related to disease x, and D_x be the event that the individual is later diagnosed with disease x.

In this case, we can define the following probabilities:

- 1. Prevalence = $P(D_x)$
- 2. Population Allele Frequency (PAF) = $P(V_x)$
- 3. Case Allele Frequency (CAF) = $P(V_x|D_x)$
- 4. Penetrance = $P(D_x|V_x)$

By Bayes' Rule, the penetrance of a variant related to disease x may be defined as:

$$P(D_x|V_x) = \frac{P(D_x) * P(V_x|D_x)}{P(V_x)} = \frac{(Prevalence)(Population \ Allele \ Frequency)}{Case \ Allele \ Frequency}$$

To compute penetrance estimates for each of the diseases related to the ACMG-59 genes, we will use the prevalence data we collected into Literature_Prevalence_Estimates.csv, allele frequency data from 1000 Genomes/ExAC/gnomAD, and a broad range of values for case allele frequency.

3.2 Import Literature-Based Disease Prevalence Data

Data Collection:

- 1. Similar disease subtypes were grouped together (e.g., the 8 different types of familial hypertrophic cardiomyopathy), resulting in 30 disease categories across 59 genes.
- 2. The search query "[disease name] prevalence" was used to find articles using Google Scholar.
- 3. Prevalence estimates were recorded along with URL, journal, region, publication year, sample size, first author, population subset (if applicable), date accessed, and potential issues. Preference was given to studies with PubMed IDs, more citations, and larger sample sizes.

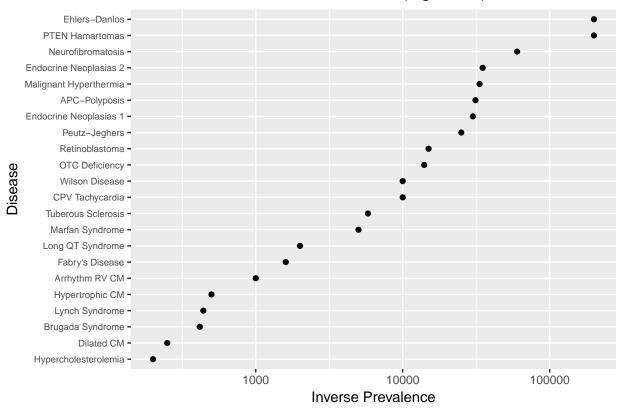
Prevalence was recorded as reported: either a point estimate or a range. Values of varying quality were collected across all diseases.

Table of Literature-Based Estimates 22 x 18 (selected rows/columns):

Gene	Phenotype	Inverse_Prevalence	Case_Allele_Frequency
STK11	Peutz-Jeghers syndrome	25000	0.96
RB1	Retinoblastoma	15000	0.97
FBN1 TGFBR	1 Marfan syndrome	5000	0.9
SCN5A	Brugada syndrome	416	0.3

3.3 Distribution of Prevalences

Distribution of Inverse Prevalences (log-scale)

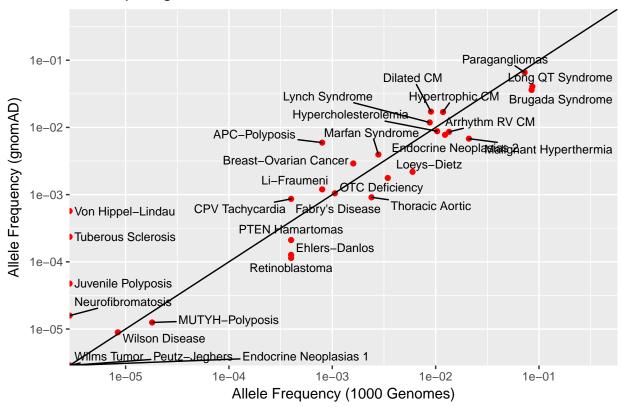


3.4 Collect and Aggregate Allele Frequencies at the Disease-Level

We define AF(disease) as the probability of having at least 1 variant associated with the disease. The frequencies across the relevant variants can be aggregated in two ways:

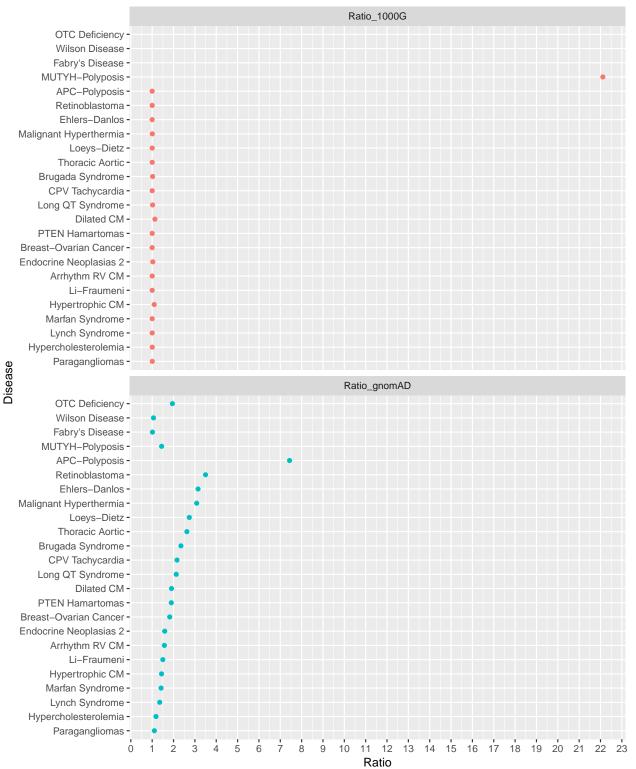
- (1) By direct counting, from genotype data in 1000 Genomes.
- (2) AF(disease) = $1 \prod_{variant} (1 AF_{variant})$, from population data in ExAC (assumes independence).

Scatterplot: gnomAD v. 1000 Genomes



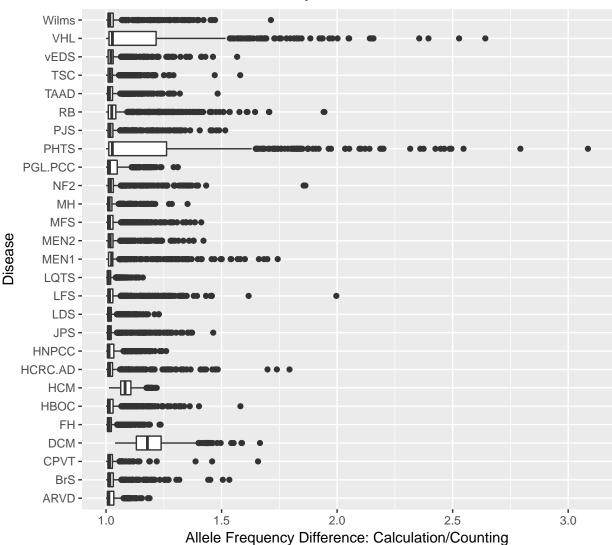
Ratio_1000G (red, top) computes AF(calculation in 1000 Genomes) / AF(counting in 1000 Genomes). Ratio_gnomAD (blue, bottom) computes AF(calculation in gnomAD) / AF(calculation in 1000 Genomes).

Ratios of Allele Frequencies from Different Methods

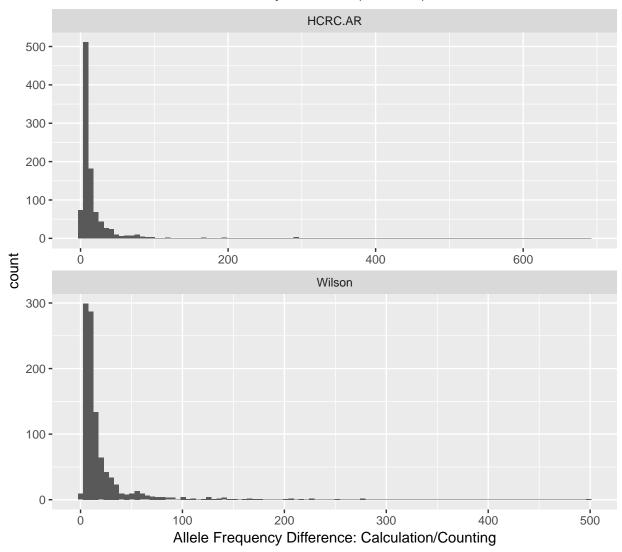


Sampling 1000 variants from all variants in 1000 Genomes to test deviations from independence assumptions. Repeat for 1000 trials and plot the distribution of disease-level allele frequencies (1000 points per disease). Only variants with allele frequency > 0.01 are evaluated. Since we look at 17 variants per disease, the maximum is approximately $1 - (1 - 0.01)^{34} \approx 0.29$

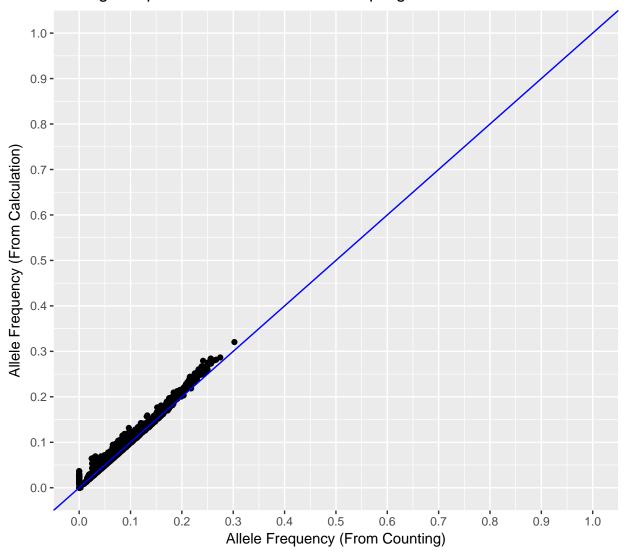
Differences in AF Methods: by Disease



Differences in AF Methods: by Disease (Outliers)



Testing Independence with Random Sampling



```
## 30 diseases x 1000 points = 30,000 points.
```

Pearson correlation: 0.995

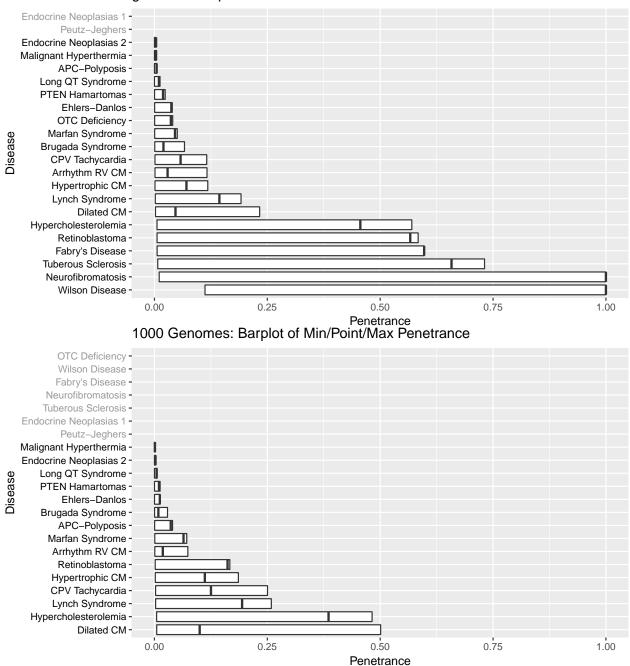
Mean ratio (Calculation/Counting): 0.971

^{##} This plot has been downsampled 10x and contains 3,000 points.

3.5 Penetrance as a Function of P(V|D)

The left end of the boxplot indicates P(V|D) = 0.01, the bold line in the middle indicates P(V|D) = point value, the right end of the boxplot indicates P(V|D) = 1.

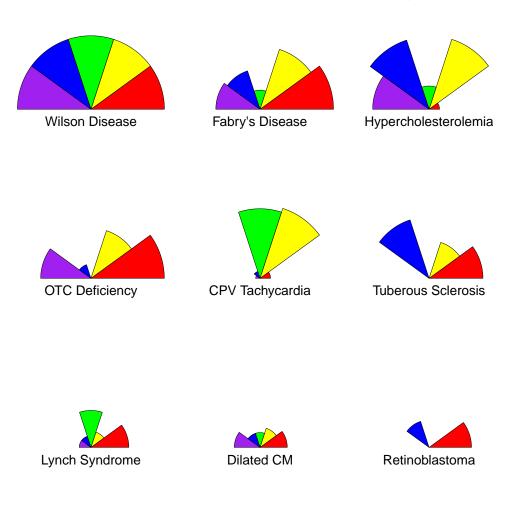
gnomAD: Barplot of Min/Point/Max Penetrance

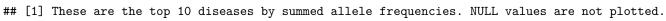


Note: Some diseases have mean theoretical penetrance = 1 because the assumed allelic heterogeneity is greater than is possible, given the observed prevalence and allele frequencies.

3.6 Penetrance Estimates by Ancestry

Radar Plot: Max Penetrance by Ancestry (gnomAD)





EAS

AMR

AFR

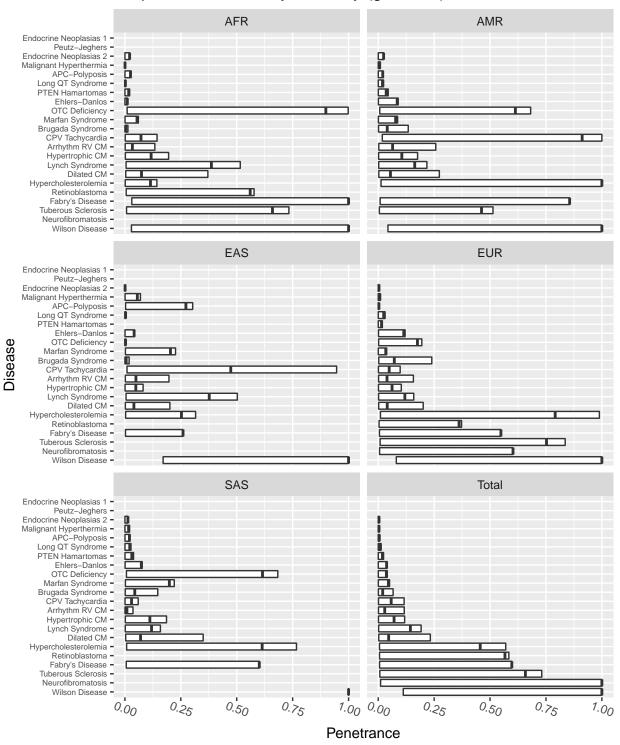
[1] Each radius is proportional to the penetrance of the disease in the given population.

EUR

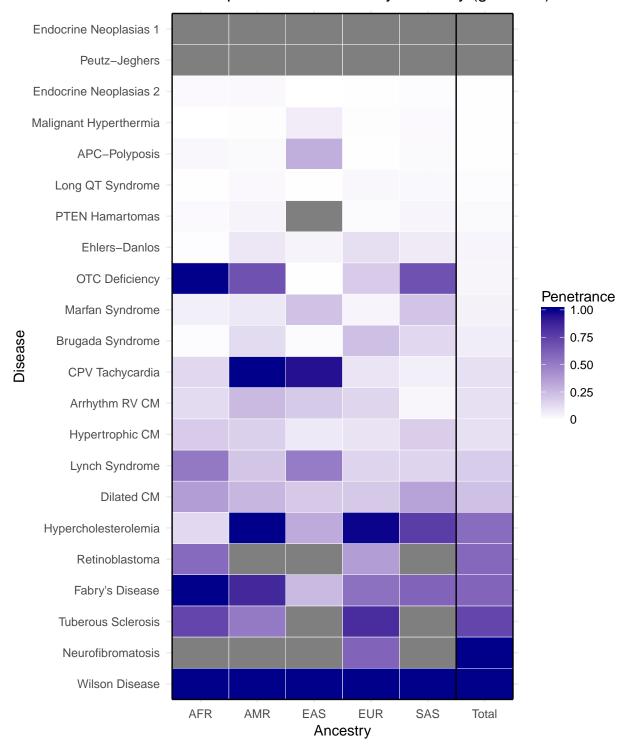
SAS

Arrhythm RV CM

Barplot: Penetrance by Ancestry (gnomAD)



Heatmap: Max Penetrance by Ancestry (gnomAD)



Dark gray boxes are NA: no associated variants discovered in that ancestral population.