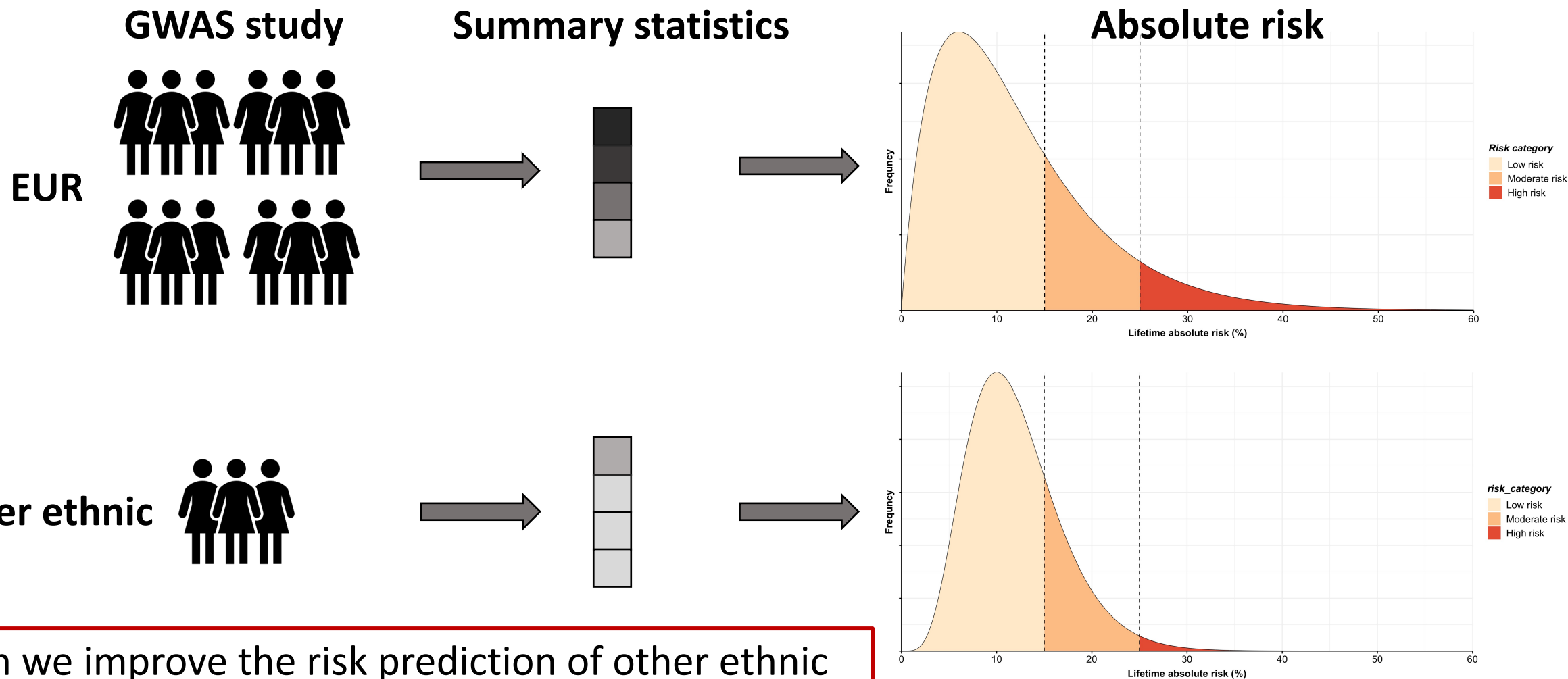


Different GWAS sample sizes led to disparities of stratified disease prevention across ethnic groups



Can we improve the risk prediction of other ethnic groups with less sample sizes compared to EUR?