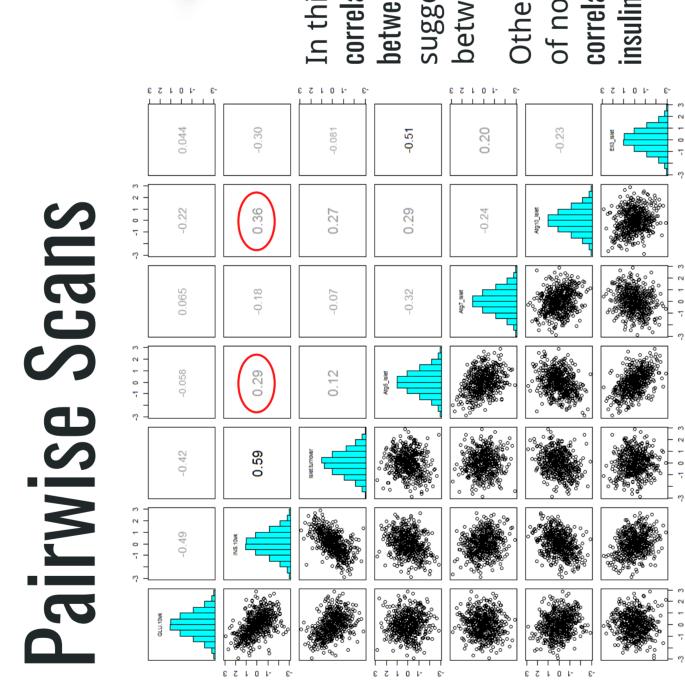


Significance roduction

Type 2 diabetes is a metabolic disorder that hinders the body's ability to process insulin and disrupts metabolic homeostasis. It affected over 382 million people in 2013 (1), and has no known cure. Obesity, a cause of Type 2 diabetes, leads to metabolic stress that activates autophagy (5). Autophagy, a catabolic process that regulates energy homeostasis, correlates with fluctuations in both insulin related (Atg) genes and the phenotypes exhibited in Type 2 diabetes, and found that Atg5, Atg7, and Atg10 expression in the islet tissue and Insulin levels all are linked to chromosome 2. Using conditional scans and mediation analysis, we discovered that Ell3 is a likely mediator of Atg5 and Atg10 expression in the islet tissue and insulin levels, and, when downregulated, causes an increase in both autophagy and insulin levels. causal relationship between this regulates energy homeostasis, correlates with fluctuations in both in resistance and obesity (2), but the causal relationship between the process and metabolic disorders is not clear. Using genetic mapping, we have scrutinized the relationships between autophagy



In this example, the correlation value of 0.29 between Atg5 and insulin levels suggests there is a relation between these two traits.

Wisconsin-Madison recorded this data set. The BTBR set results from a C57BL/6 and BTBR T+ tf strains of mice with Lepob BTBR x B6 F2 cross. Alan D. Attie's Lab at the University of The data used for this research came from mice from a



- > 516 mice > 144 quantitative phenotypes > 16,677 genes > 2057 genomic markers

Methods

During this research, our team utilized **QTL analysis**. A QTL is a quantitative trait locus, which is a location on a chromosome that may be linked to a specific phenotype. QTL analysis is used to identify QTLs for phenotypes of interest.

score is the preferred were: Bayesian Information Criterion is a statistical method for model selection and the lowest BIC score is the preferred model. In our analysis, the models were:

| | Com | |
|---|-------------|--|
| | Causal | Genotype ↓ Expression of Gene of Interest ↓ Clinical Phenotype |
| | Reactive | Genotype Clinical Phenotype Expression of Gene of Interest |
| 5) - - - -) 5) | Independant | Expression of Gene of Interest Genotype Clinical Phenotype |

| | | | II 33 | b S | 9 | | ≝. 5 |
|-----------|-----------|----------|---------------|---------|-----------|---------------|--------|
| | -3 -10123 | | -3 -1 0 1 5 3 | | -3 -10153 | | -10153 |
| | 0.044 | -0.30 | -0.081 | -0.51 | 0.20 | -0.23 | Na. |
| -3 -10123 | -0.22 | 0.36 | 0.27 | 0.29 | -0.24 | Agrio, little | |
| | 0.065 | -0.18 | -0.07 | -0.32 | AND_INE | | |
| -3 -10123 | -0.058 | 0.29 | 0.12 | Ag5_see | | | |
| | -0.42 | 0.59 | leict turnoer | | | | |
| -3 -10123 | -0.49 | INS.104K | | | | | |
| | GLU. 100k | | | | | | |

Other correlation values of note include a 0.36 correlation between Atg10 and insulin levels.

A pairwise scan plots each element of a cross object's correlation with every other element.

Mediation Analysis

2

The **anova** function allows one to determine causality to some extent.

The **QplotS** below help us visualize correlation between genotype classes.

nse: Atg5_islet
Df Sum Sq Mean Sq F value Pr(>F)
1 1.03 1.0313 1.1258 0.2892
2 33.21 16.6057 18.1275 2.55e-08 ***
Lals 487 446.12 0.9161 se: Ell3_islet
Df Sum Sq Mean Sq F value Pr(>F)
1 0.06 0.062 0.0737 0.7861
2 70.98 35.490 42.2251 <2e-16 **als 487 409.32 0.840

***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1 et ~ Sex + Ell3_islet + Q2, data = f2g\$phenc e Table

Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ''

> anova(lm(Ell3_islet ~ Sex + Atg5_islet + Q2, data = f2g\$ph
Analysis of variance Table

Response: Ell3_islet

Response: Ell3_islet

Df Sum Sq Mean Sq F value Pr(>F)

Sex 1 0.06 0.062 0.0937 0.7596

Atg5_islet 1 126.80 126.805 191.7372 < 2.2e-16 ***

Q2 2 32.08 16.039 24.2515 9.136e-11 ***

Residuals 486 321.41 0.661 e: Atg5_islet

Df Sum Sq Mean Sq F value Pr(>F)

1 1.03 1.031 1.4307 0.2322

let 1 126.55 126.549 175.5664 <2e-16 **

2 2.47 1.234 1.7119 0.1816

ls 486 350.31 0.721

The above anova function output shows that Atg5 and Ell3 influence each other, and that Ell3 influences Atg5, not the other way around.

The lowest BIC score is the likely model. If it does not differ by at least 5 from every other score, the test is inconclusive. Baysian Informaiton Criterion

hith(f2g\$pheno, triple.fit(Ell3_islet, INS.10wk, Q2))
hidependent reactive causal complex 2721.423 2747.453 2685.362 2695.148
hith(f2g\$pheno, triple.fit(Ell3_islet, Atg5_islet, Q2))
hidependent reactive causal complex 2701.133 2623.136 2580.950 2589.633
Ell3 is casual for both Atg5 and insulin, suggesting that it is a strong mediator of the two traits. > with(f2g\$pheno, triple.fit(Ell3_islet, Atg10_islet, Q2)) independent reactive causal complex 2725.791 2769.810 (2702.966) 2713.164 Ell3 is also causal for Atg10.

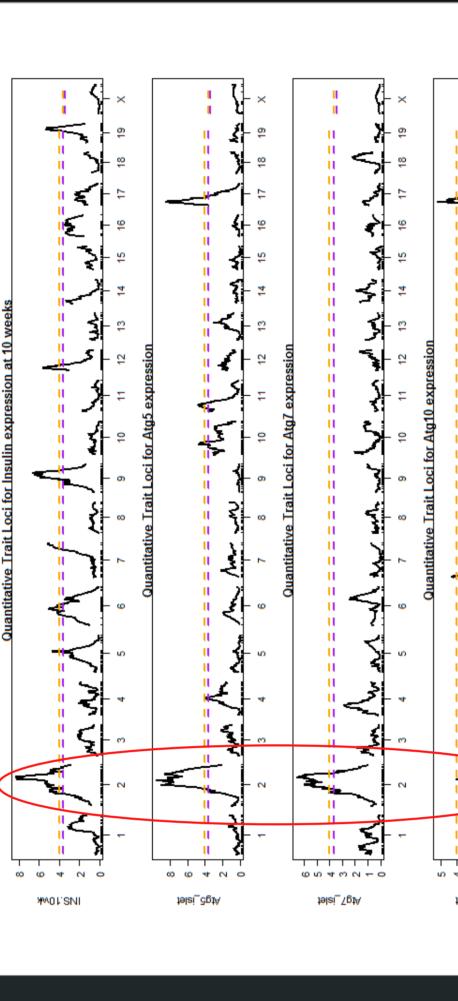
> with(f2g\$pheno, triple.fit(Atg5_islet, INS.10wk, Q2)) independent reactive causal complex 2753.522 2750.169 2722.139 2728.715 It's relationship with Atg7 is inconclusive.

with(f2g\$pheno,
 triple.fit(Ell3_islet, Atg7_islet, Q2))
idependent reactive causal complex
 2717.094 2763.245 2717.764 2715.314
 with(f2g\$pheno,
 trin1, fit(

Scans Genome

A LOD (logarithm of odds) Score is an estimate of the linkage between two genes. For a complex process like genetic trait analysis, 4 is an acceptable threshold.

Genome scans like the one below display the LOD Scores for a trait at each point along the genome.



We wanted to discover which Atg proteins shared peaks with either insulin, glucose, or islet turnover, all of which are phenotypes associated with type 2 diabetes. Three different Atg 2 (seen proteins share a peak with insulin on chromosome 2 above), which suggests that there are gene(s) on that

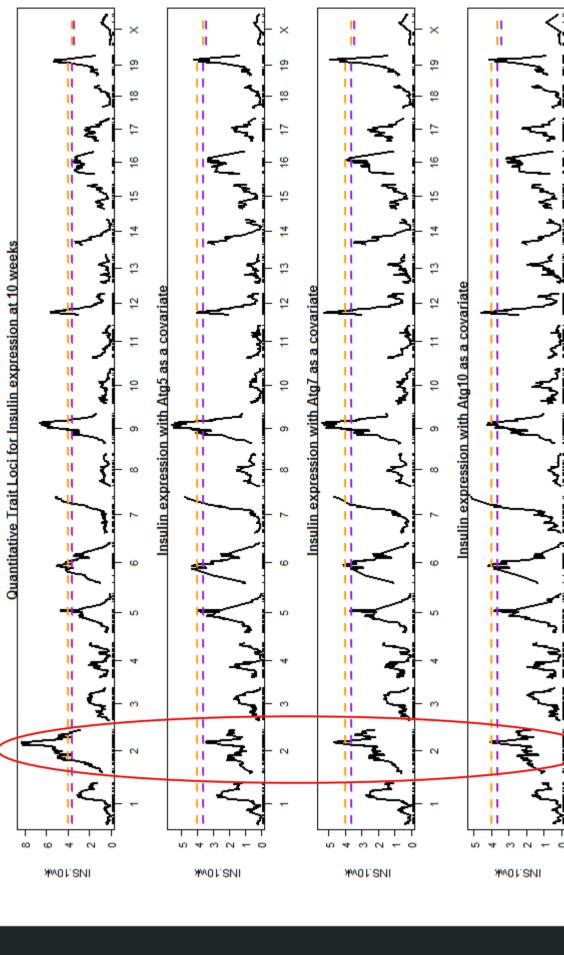
\$

chromosome that mediate both autophagy and insulin levels

Scans Conditional

4

A conditional scan is a genome scan where a certain trait or gene is ruas a covariate. This results in a LOD peak drop in magnitude proportional to the covariate's influence on the gene's expression.



In this example, Insulin's peak on chromosome 2 is dropped below the significance threshold when run with covariates Atg5, Atg7, or Atg10, meaning that there is a gene on chromosome 2 that links Atg5, Atg7, Atg10 and insulin levels.



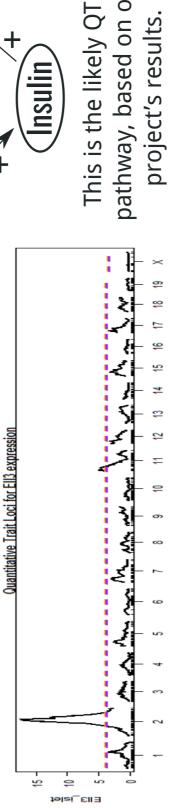
Concl

Chromosome 2

EII3

After using mediation analysis to determine which genes are causal, it is likely that Ell3 is a strong mediator for Atg5, Atg10, and insulin in islet tissue.

Atg10

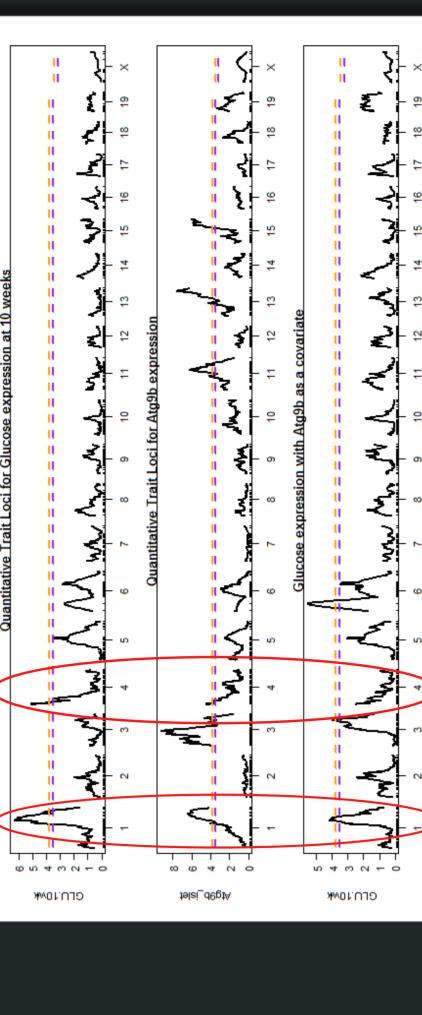


our

Ell3 is a protein coding gene that is thought to bind enhancers in stem cells, but also behaves like Ell (eleven-nineteen lysine-rich leukemia gene), which acts as a negative regulator of p53 and regulates cell proliferation and survival (3). Ell3's relation to autophagy also explains the result of a certain study, which showed that autophagy increases cell life and combats cancer formation (4). The latter provides evidence for the underlying idea behind our original hypothesis; that autophagy could help to maintain islet function in the face of Type 2 diabetes by increasing islet cell function and lifespan.

Research Future

Most research surrounding type 2 diabetes focuses on insulin levels and islet turnov but glucose is another phenotype that is associated with diabetes. Shown by this genome scan, Atg9b causes glucoses' LOD peaks on chromosomes 1 and 4 to drop, implying a correlation between Atg9b and glucose. Finding a mediator for both of th would further reveal the relatiomship between type 2 diabetes and autophagy.



Additionally, Ell3 was not proven a mediator for Atg5 or Atg10 in the kidney or the liver. This is unsurprising based on the research that backed our original hypothesis. However, it is definitely worth examining activity in other tissues

Cited iterature

e 2 Diabetes Statistics and Facts." Healthline. N.p., n.d. Web. 16 Nov. 2015.

Jerry. "Altered Autophagy in Human Adipose Tissues in Obesity."National Center for Biotechnolog ation. U.S. National Library of Medicine, 3 Nov. 2010. Web. 16 Nov. 2015.

Jerry. "Altered Autophagy in Human Adipose Tissues in Obesity."National Center for Biotechnolog ation. U.S. National Library of Medicine, 3 Nov. 2010. Web. 16 Nov. 2016.

Jerry. "Altered Biothysical Research cells via a MEK/ERK-dependent signaling pathway (Abstract)." Biochemical and Biophysical Research unications (2013). 557-564. Web. 14 March 2016.

Jerry. "Biochemical and Biophysical Research cells and Insulin Resistance." Sprir ational Publishing, 2015. Web. 16 Nov. 2015.

ry Fibrosis." PLOS ONE. Plos One, 18 July 2012. Web. 16 Nc

eretic, Vojo, et al. "Autophagy in Immunity Against Mycobacterium Tuberc mmunological Roles of Autophagy." Current Topics in Microbiology and Im .d. Web. 16 Nov. 2015. Congcong, et al. "Exercise-induced BCL2-regulated Autophagy Is National Library of Medicine, 18 Jan. 2012. Web. 16 Nov. 2015. e, Beth, Noboru Mizushima, and Herbert W. Virginal Library of Medicine, n.d. Web. 16 Nov. 2015.

Mandal, Dr. Ananya. What is autophagy? News Medical. Web. 1.Dec.2015Falconer, Douglas S., MacKay, Trudy F.C. Introduction to Quantitative Genetics. Benjamin Cummins, 1996.Haim, et al. "Elevated autophagy gene expression adipose tissue of obese humans: A potential non-cell-cycle-dependent function of E2F1." Autophagy. 11.11 (2015): 2074-2088. Web. 16 Nov. 2015.Images:Jax.org. The Jackson Laboratory, 2016. Web. 13 March 2016. Kosvan, Jerry. "Altered Autophagy in Human Adipose Tissues in Obesity."Natic U.S. National Library of Medicine, 3 Nov. 2010. Web. 16 Nov. 2015.