## https://pubpeer.com/publications/D780DD5C4D665BBC415F45C707D0C4

Because the journal doesn't have a comment system, I wanted to add a comment in this system.

First, here a comment on the earlier preprint:

## https://www.biorxiv.org/content/10.1101/2020.04.29.068452v2#disqus\_thread

So, I will try not to over-emphasize the question of *directly measured* genotypes versus Minimac4 imputed genotypes, since I asked that before.

In fact, I think that is acknowledged in the introduction: "a genotyping array will probe a number of variants which is one to two orders of magnitude fewer [than 0.5x lcWGS], albeit with higher average accuracy (The 1000 Genomes Project Consortium 2015)." This was also in the 1st version of the preprint, so I apologize for not acknowledging that in my earlier comment.

I also have a comment on another recent paper (other authors describing lcWGS versus genotyping arrays):

## https://www.cell.com/ajhg/fulltext/S0002-9297(21)00096-3#comments-heading

The questions posted in that comment are a little different (although some overlap the preprint version of this paper). If anybody cannot access the AJHG comment, I also have a draft posted here.

The <u>Martin et al. 2021</u> paper mentions Gencove worked relatively better at lower coverage, and BEAGLE worked better at the 4-6x WGS (with that being the highest imputed accuracy reported in Table S4 or Table S5).

So, I think that is consistent with that I see in this paper (as I understand it), while also being consistent with what I have countered in my own experiences.

In fact, I believe Supplemental Figure 12 is new, relative to the preprints (even though I think some of the imputation methods are a bit hard to tell apart in that figure).

However, I believe these would be the questions that may have not been asked before:

a) Since the preprint post, I have added at least 1 extra example of a IcWGS imputation having noticeable problems at 0.1x-0.5x (indirectly mentioned in the AJHG comment).
So, I believe that I have experiences that may not completely match what is described in this paper.

While it may be hard to say, I think knowing why <u>some</u> results / applications with lcWGS were unacceptable might be helpful in justifying the <u>other</u> situations where it may be OK. So, if that is possible to do, then I think that would help.

For example, I don't have the raw IcWGS data, but I would estimate I had <0.3x IcWGS for my cat samples (based upon the higher coverage WGS that I do have). The coverage for >95% or 99% samples will be lower than the average coverage. Do any of the Sample A samples have ~0.2x coverage (such as the far-left point in Figure 1)?

If so, would you say that you could expect additional problems with such a sample?

b) My impression from the Martin et al. 2021 paper was that my ~0.5 lcWGS results (for myself and for my cat) might have been improved with higher coverage lcWGS might have worked better.

Do you think that is a fair assessment?

c) In the Martin et al. 2021 paper, the GSA had the lowest performance among all of the arrays. For example, in that paper, I would expect the Omni 2.5 array to outperform 0.5x to 2x lcWGS (with either Gencove or BEAGLE).

You do specifically mention the GSA array in the abstract, but I do not believe the title is universally true (even if you look at SNP chip genotypes that I believe include imputations). Is there anything that I might have misunderstood?

For example, the Gencove 0.5x imputation concordance in the Martin et al. paper (**0.876** in Table S4) is **lower** than reported for Sample A in Table 2 (a mean of 0.900 or 0.923). Is there anything that might show cause performance to be lower in new samples not used in this paper?

For <u>my own sample</u>, the level of concordance varied depending upon the variant caller (as well as whether the zygosity of the variant had to match). The F-statistic from precisionFDA is lower than the concordance measure that I defined. However, **either way**, I would say <u>some results were OK</u>, but others were not acceptable (such as for medical applications).

Thank you for communication of your research!

Best Wishes,

Charles