HelmholtzZentrum münchen
German Research Center for Environmental Health

Lecture 3

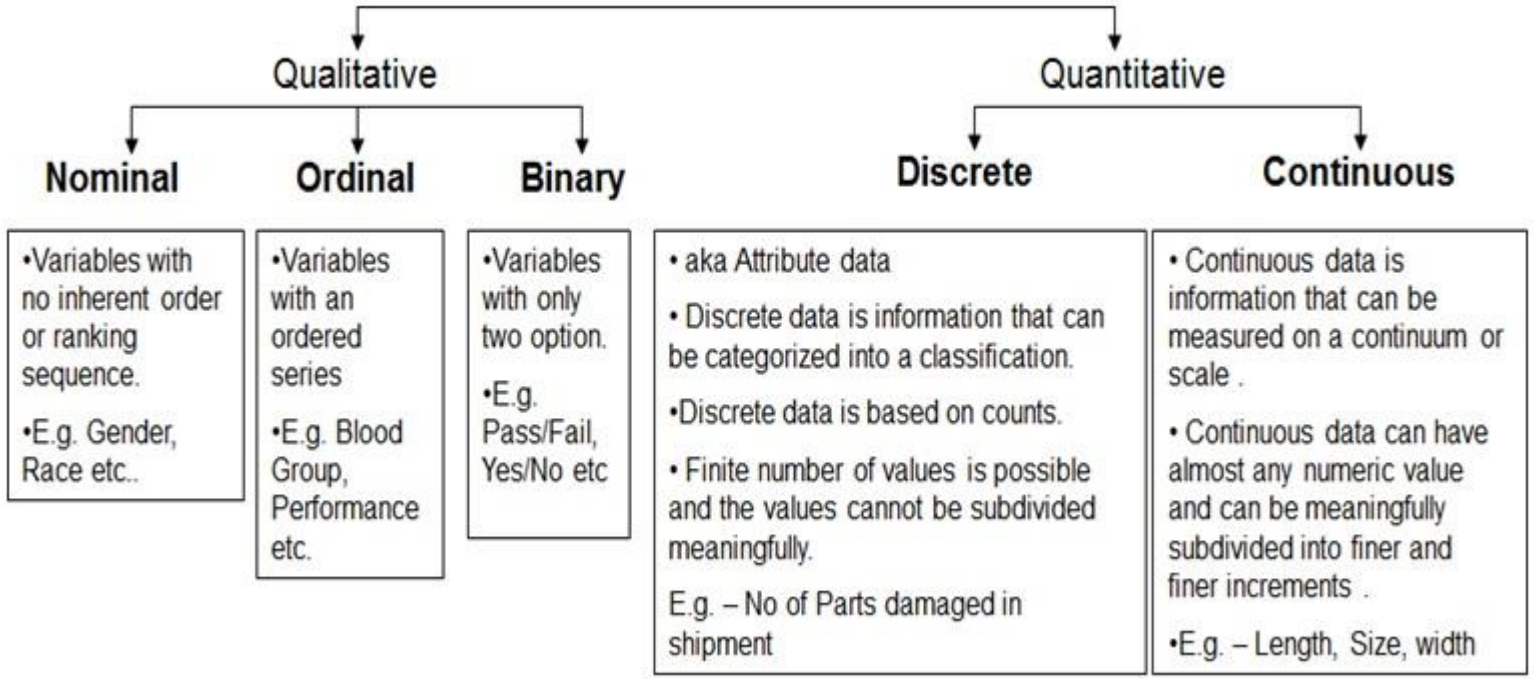
Statistics for Human Genetics

What can we do with statistics?

- Estimation
- Hypothesis testing
- Modelling
- Predicting

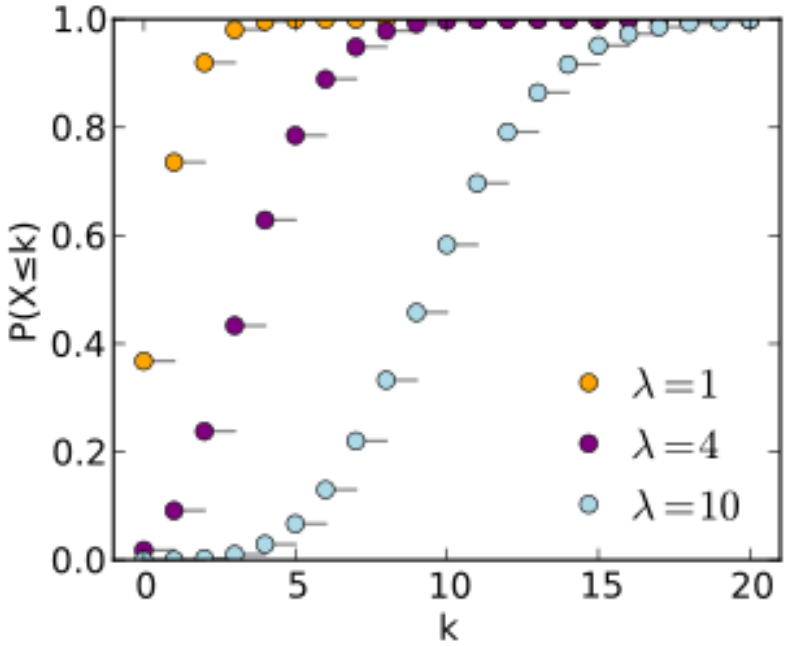
Random Variables

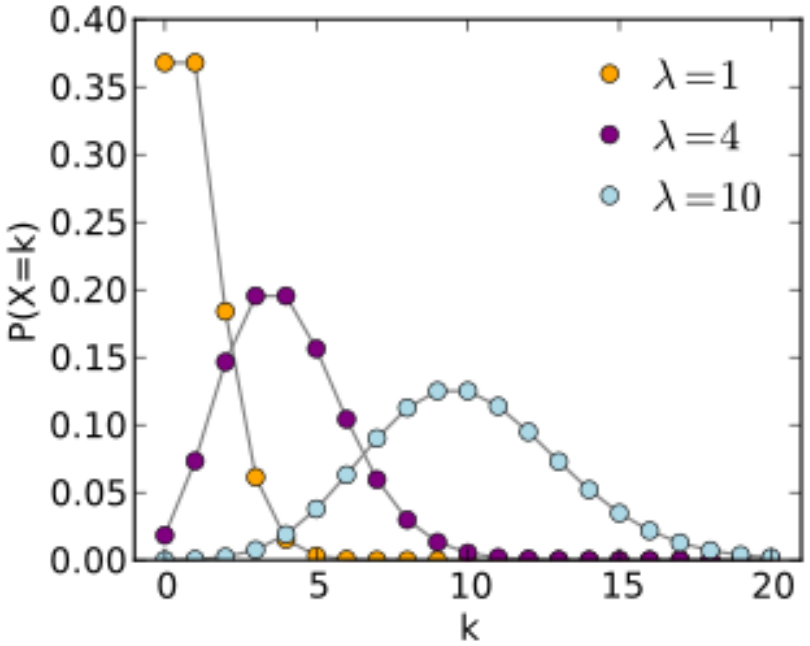
- In statistics, we measure realizations of random variables
- Often, random variables follow a distribution
- They can be qualitative or quantitative, continuous or discrete



Distributions

- Two ways to represent them :





Cumulative distribution function (CDF)

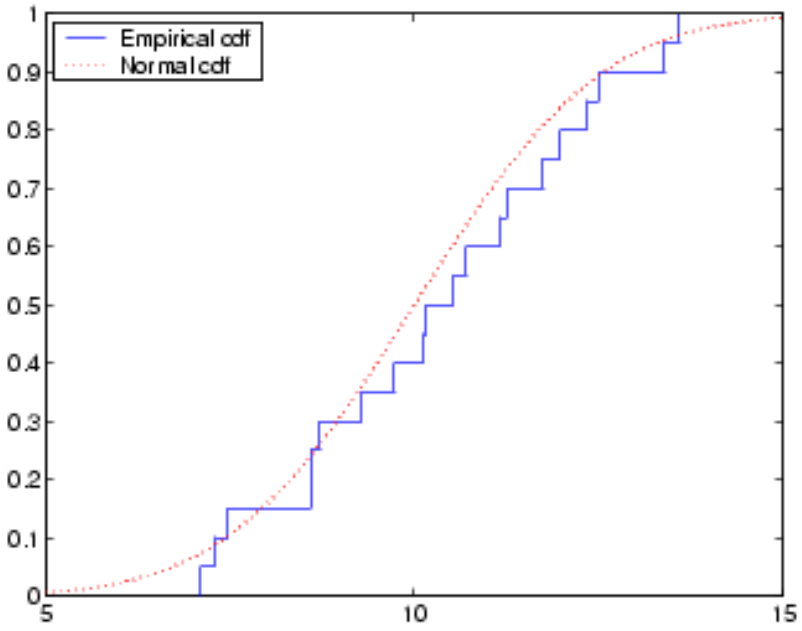
- $y = p(X \leq x)$
- Always growing
- Ideal way to represent, but hard to read
- All distributions look the same

Probability density function (PDF)

- $y = p(X = x)$ for discrete
- Shows how values are distributed
- Nice visually, but mathematically hard to deal with

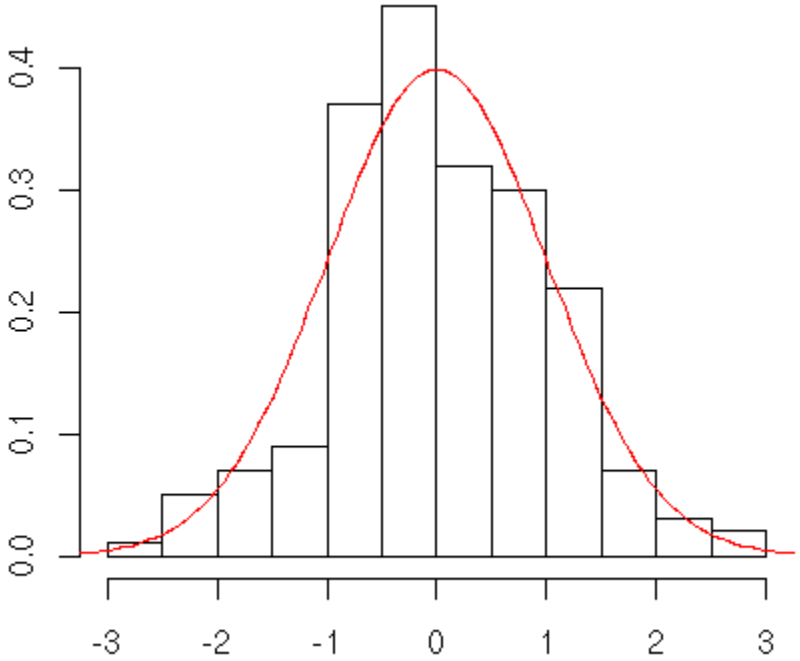
Distributions

- How to estimate them:



Empirical CDF

- Rarely used
- Except when you want to compute empirical quantile functions



Barplot (discrete)

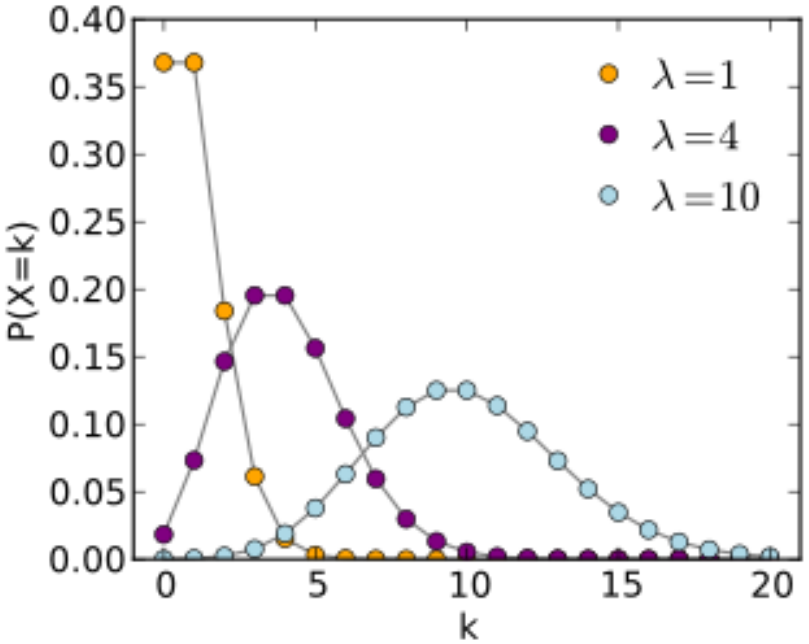
- For every value, count occurrences

Histogram (continuous)

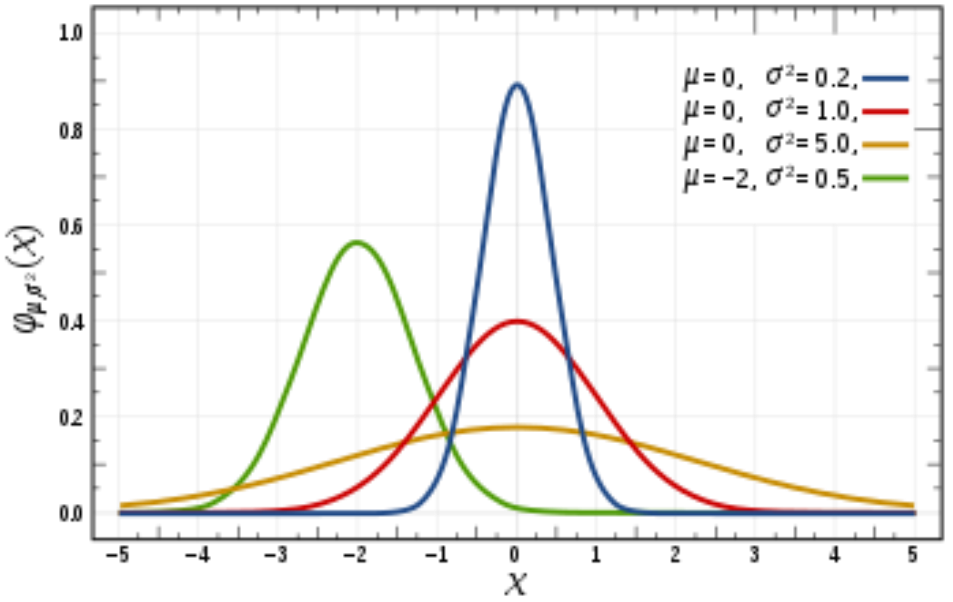
- Cut the interval into bins, count observations within bin

Distributions

- Two broad types:
  - those followed by random variables (real world data)



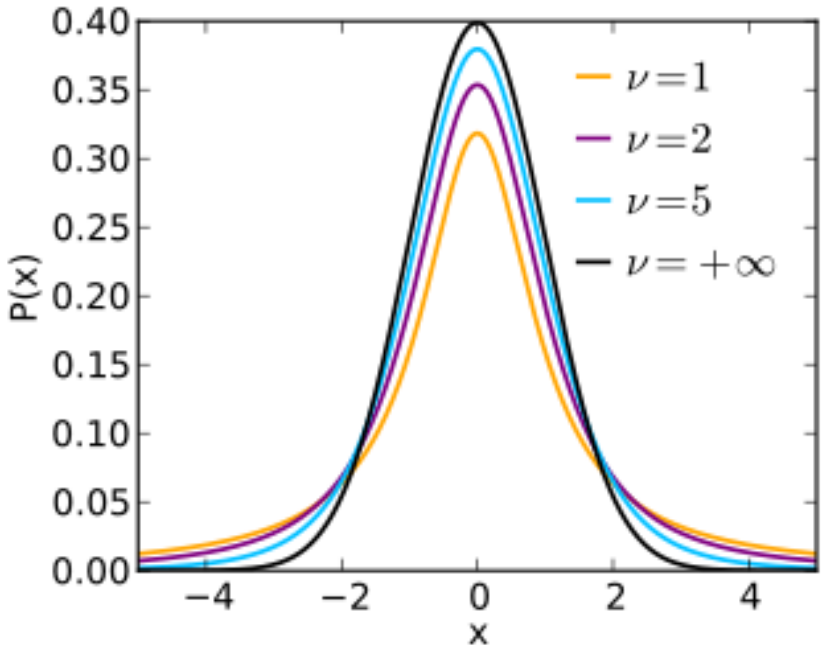
$X \sim Poisson(\lambda)$



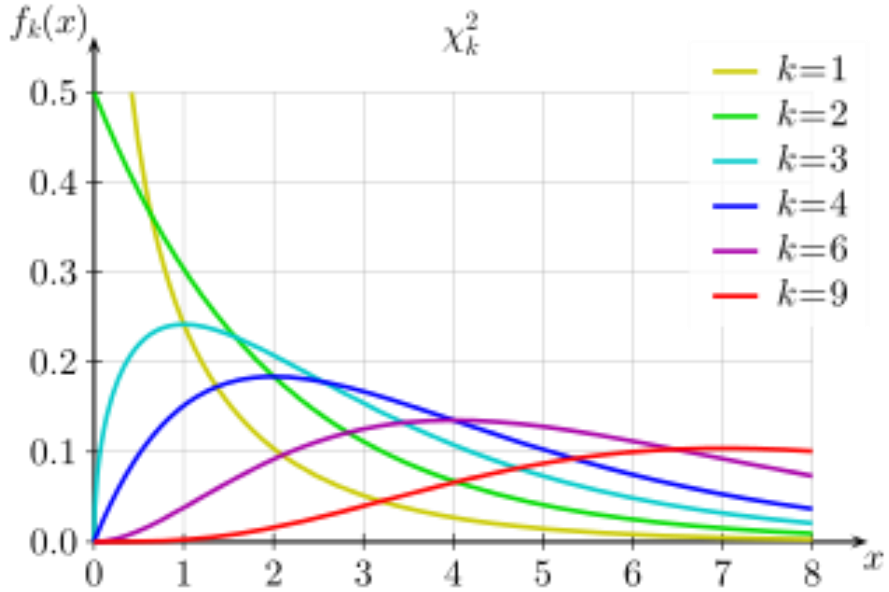
$X \sim \mathcal{N}(\mu, \sigma^2)$

Distributions

- Two broad types:
  - those followed by test statistics



$X \sim T(\nu)$



$X \sim \chi^2(k)$

λ, μ, σ, ν and k are ideal parameters. How to estimate them?

Statistics

- A statistic is a meaningful quantity derived from the data
- Often, estimators are realization of distribution parameters
- Examples? Mean, proportion
- For simple distributions/parameters, there is a formula
- For more complex ones, we have to use other techniques (Monte-Carlo, Permutations…)

$$(\hat{\mu} =)\ \bar{x} = \frac{1}{n}\sum_{k=0}^{n} x_k$$

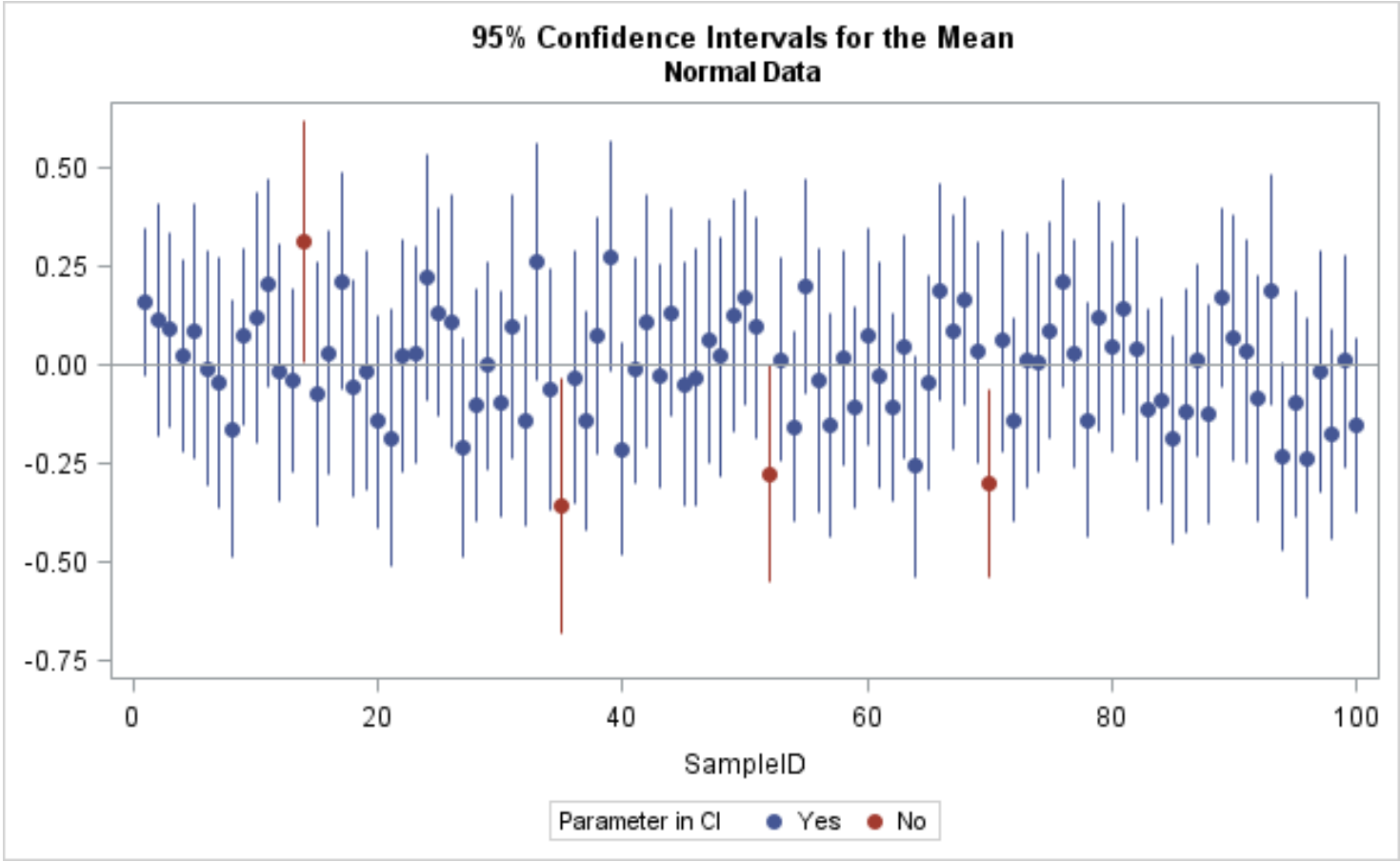
$$\hat{p} = \frac{x}{n}$$

$$w = \frac{\left(\hat{\theta} - \theta_0\right)^2}{se(\hat{\theta})} \sim \mathcal{N}(0,1)$$

$$\left(\widehat{\sigma^2} =\right)\ s^2 = \frac{1}{N-1}$$

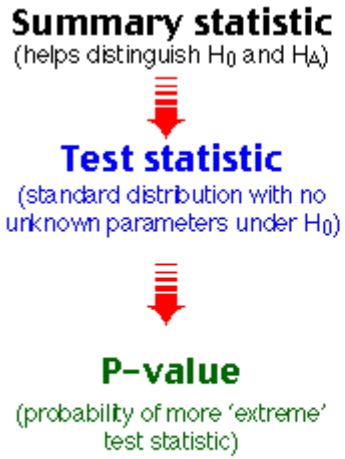
One particular statistic: Confidence intervals

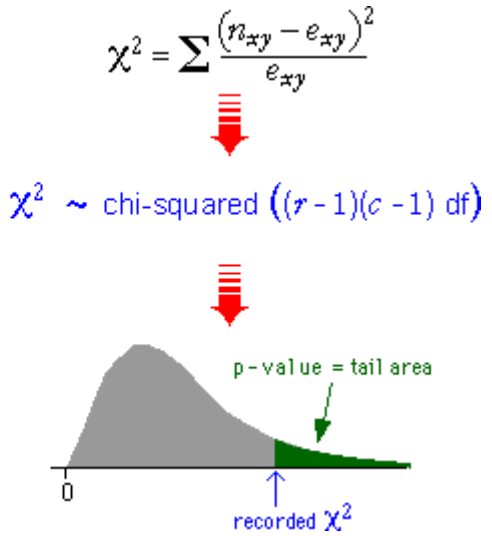
- x% confidence interval (x%C.I.) : x% of the time when this interval is calculated, it will contain the true value of the parameter



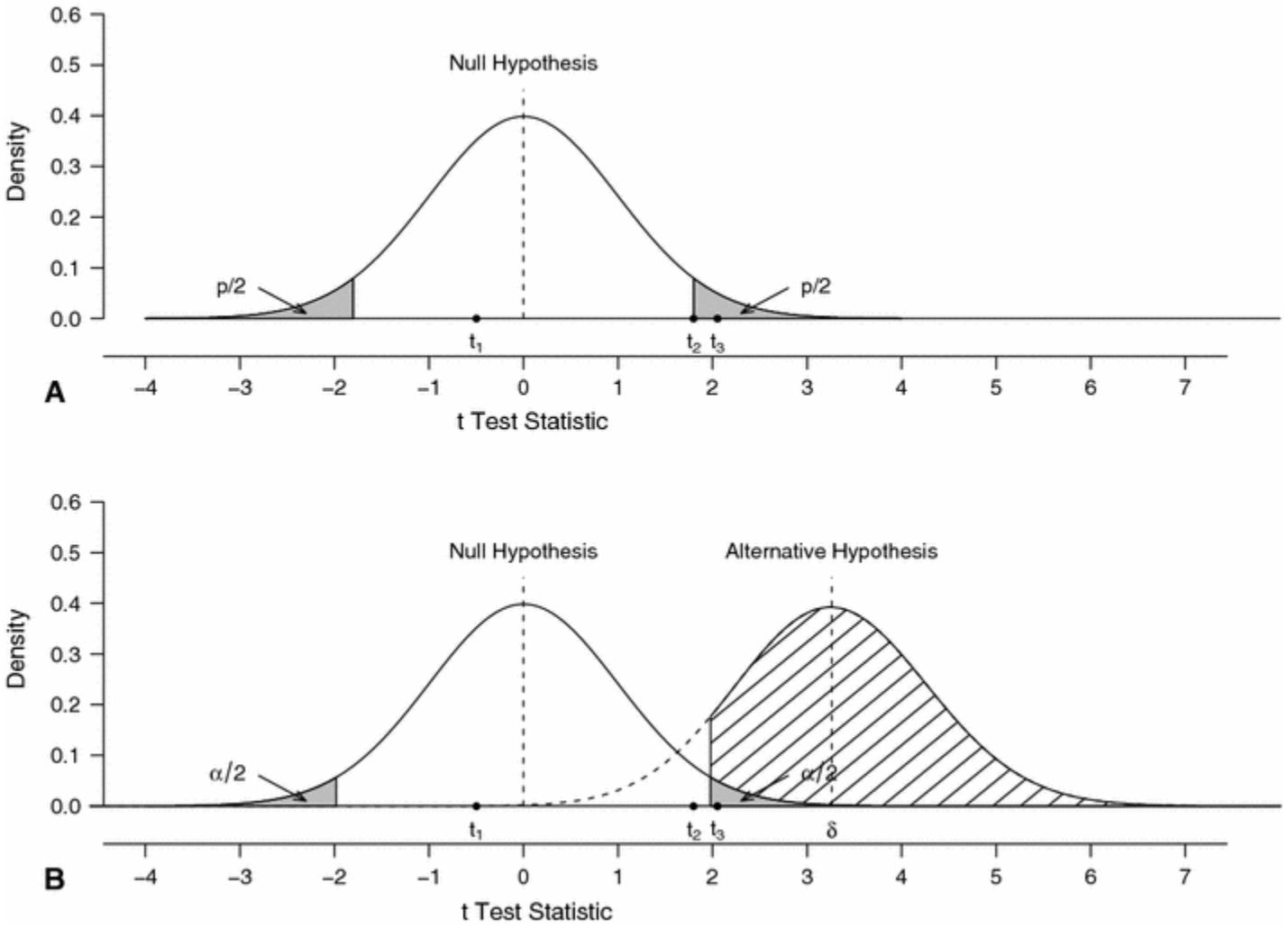
Hypothesis testing

- We want to measure whether the data gives sufficient evidence to reject a hypothesis
- Null/Alternative hypothesis ($\mathcal{H}_0/\mathcal{H}_A$)
- We prove that we can produce a statistic that follows a certain distribution if the null hypothesis is true = name of the test
- We calculate the statistic based on our data
- Because we know the distribution, we can calculate the CDF $p(X \leq x)$
- = how unlikely it is that our measurement comes from the null : p-value
- Example: proportion test, t-test, chi-squared test…

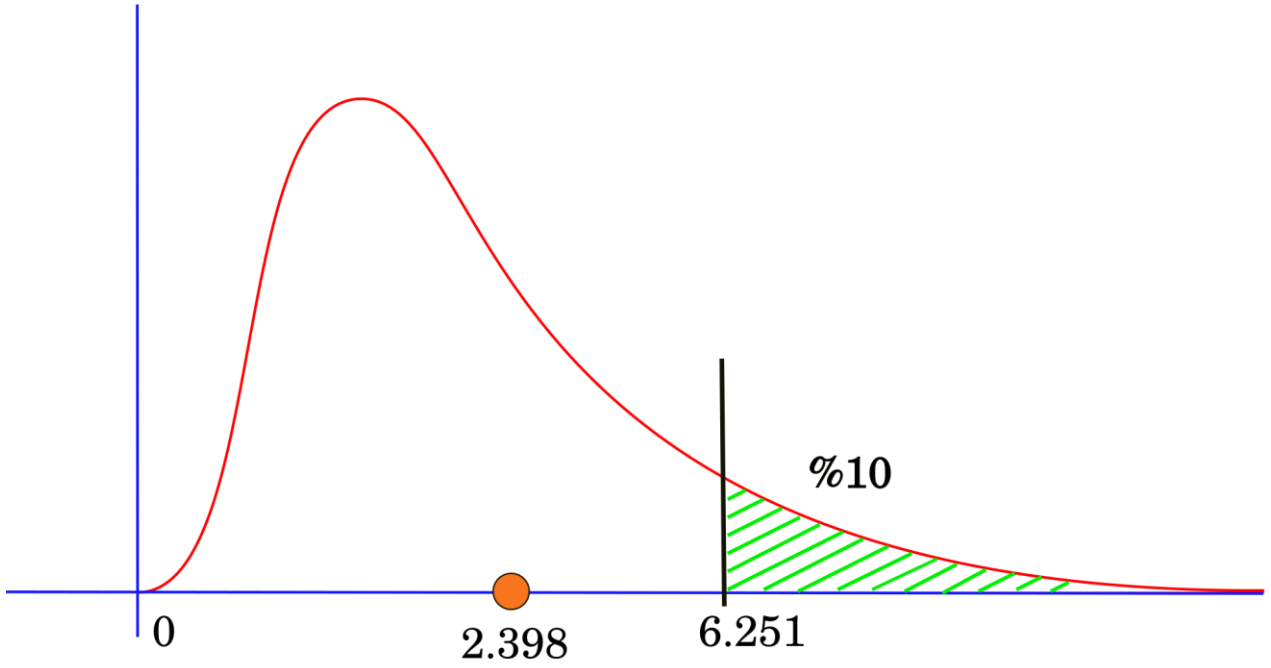




Hypothesis testing



Two tails or one



Exercise I : Proportion test

- In a population, we observe 41,009 potentially damaging variants among 14,281,180 variants
- What is the proportion? In a very large reference population, we observe a proportion of 1.52×10^{-3}. Is it significantly different? (prop.test, binom.test)

Multiple testing

Family-wise (FWER)

- Bonferroni correction
- Simple to implement, harder to interpret

$$p_{critical} = \frac{0.05}{m}$$

- *"If all tests are under the null, probability that **one or more** of them is a false positive."*

False-discovery based (FDR)

- Benjamini-Hochberg procedure
- Harder to implement, easy to understand

$$p_{critical} = argmax(p < \frac{i}{m} Q)$$

- i=rank, Q=FDR.
- *"Proportion of significant tests that are false positives."*

Multiple testing

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- *"Proportion of significant tests that are false positives."*

When to use which depends on

- **1) best practices**
- **2) relative cost of a false negative/positive**

Checking results

- Statistical significance:
  - One test: $p<0.05$
  - Genome-wide: one test per variant and per phenotype
  - But all variants are not independent, in reality, we account for LD
  - $5x10^{-8}$ for GWAS, 10^{-9} for sequencing-based

Exercise II

- If the adjusted genome-wide significance threshold is $5x10^{-8}$ for GWAS, how many “effective” variants are there in a genotyped human genome?

- You are writing an article about a GWAS for 16 different traits. What will be your threshold for declaring significance?

Modelling and predicting

- If we estimate the effect of one variable on another variable, we do modelling
- When we apply this effect to new observations of the variable, we do prediction
- Process is called machine learning, predictive modelling or predictive analysis
- In human genetics, main task is to model effect of genotypes on phenotypes

$$\boldsymbol{phenotype} \sim \boldsymbol{\beta} \times \boldsymbol{genotype} + \boldsymbol{\epsilon}$$

$$\begin{bmatrix} pheno_0 \\ \vdots \\ pheno_n \end{bmatrix} \qquad \begin{bmatrix} A/T \\ \vdots \\ T/T \end{bmatrix}$$

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$= \{0,1\}$ (case-control)
$\in \mathbb{R}$ (quantitative) $\sim \mathcal{N}(0,1)$

$$\begin{bmatrix} A/T \\ \vdots \\ T/T \end{bmatrix}$$

$= \{0,1,2\}$ (genotype, directly typed)
$\in [0,2]$ (dosage, imputed)

$$\begin{bmatrix} 1 \\ \vdots \\ 2 \end{bmatrix}$$

$$\begin{bmatrix} 0.965 \\ \vdots \\ 1.816 \end{bmatrix}$$

Modelling and predicting

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Usually, we do not predict (except PRS)

$$\boldsymbol{phenotype} \sim \boldsymbol{\beta} \times \boldsymbol{genotype} + \boldsymbol{\epsilon}$$

$$\begin{bmatrix} pheno_0 \\ \vdots \\ pheno_n \end{bmatrix}$$

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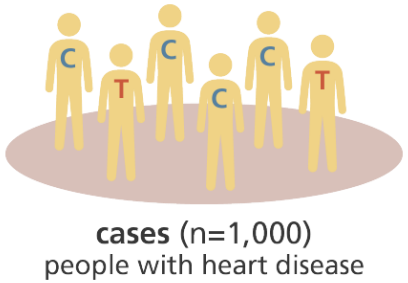
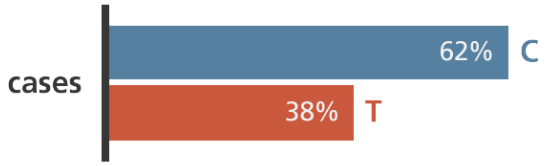
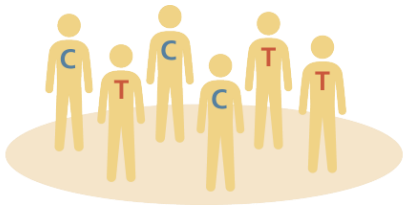
Case/control

- Estimated effect: odds ratio (OR)
  "how much more likely are you to be a case if you carry the risk allele?"
  per genotype, calculate the odds $O = \frac{p}{1-p}$



cases (n=1,000)
people with heart disease

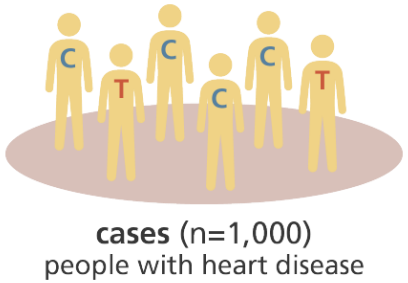




controls (n=1,000)
people without heart disease

Case/control

- Estimated effect: odds ratio (OR)
  "how much more likely are you to be a case if you carry the risk allele?"
  per genotype g and for a disease Y, calculate the odds $O = \frac{p_{Y=1|g}}{1-p_{Y=1|g}}$



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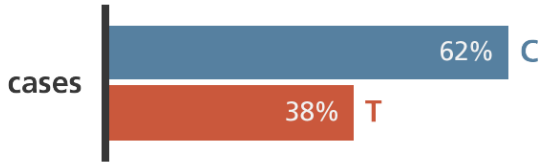
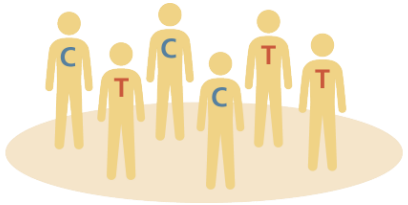




controls (n=1,000)
people without heart disease

	cases	controls
T	380	490
C	620	510

$$O_T = \frac{380/n_T}{490/n_T} \qquad O_C = \frac{620/n_C}{510/n_C}$$

$$OR_{C/T} = \frac{620 \times 490}{510 \times 380} = 1.56$$

Case/control

Dominant

Marker allele	Affected	Unaffected
DD+Dd	$n_{2A} + n_{1A}$	$n_{2U} + n_{1U}$
dd	n_{0A}	n_{0U}

Recessive

Marker allele	Affected	Unaffected
DD	n_{2A}	n_{2U}
Dd+dd	$n_{1A} + n_{0A}$	$n_{1U} + n_{0U}$

$$OR = \frac{n_{affected\ carriers} \times n_{healthy\ non-carriers}}{n_{healthy\ carriers} \times n_{affected\ non-carriers}}$$

Additive

Marker genotype	Affected	Unaffected
DD	n_{2A}	n_{2U}
Dd	n_{1A}	n_{1U}
dd	n_{0A}	n_{0U}

$$\mathrm{OR} = \frac{(2 \times n_{2A} + n_{1A}) \times (2 \times n_{0U} + n_{1U})}{(2 \times n_{0A} + n_{1A}) \times (2 \times n_{2U} + n_{1U})}$$

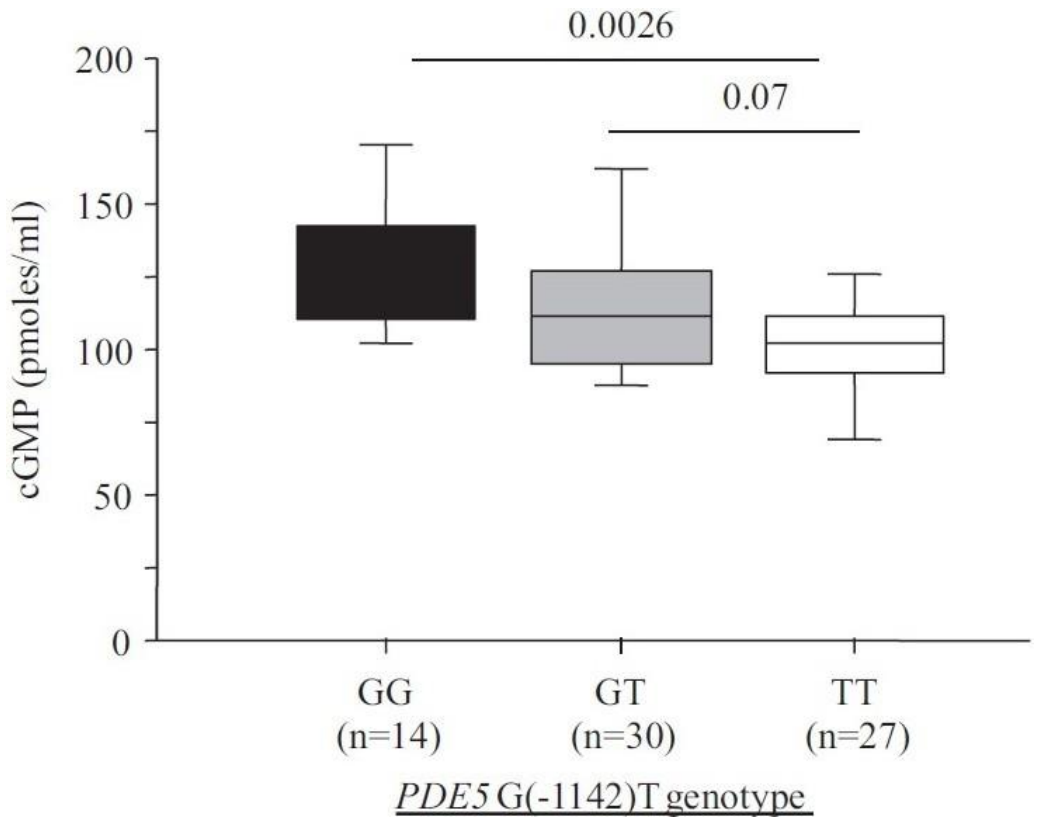
Allelic odds-ratio

Case/control

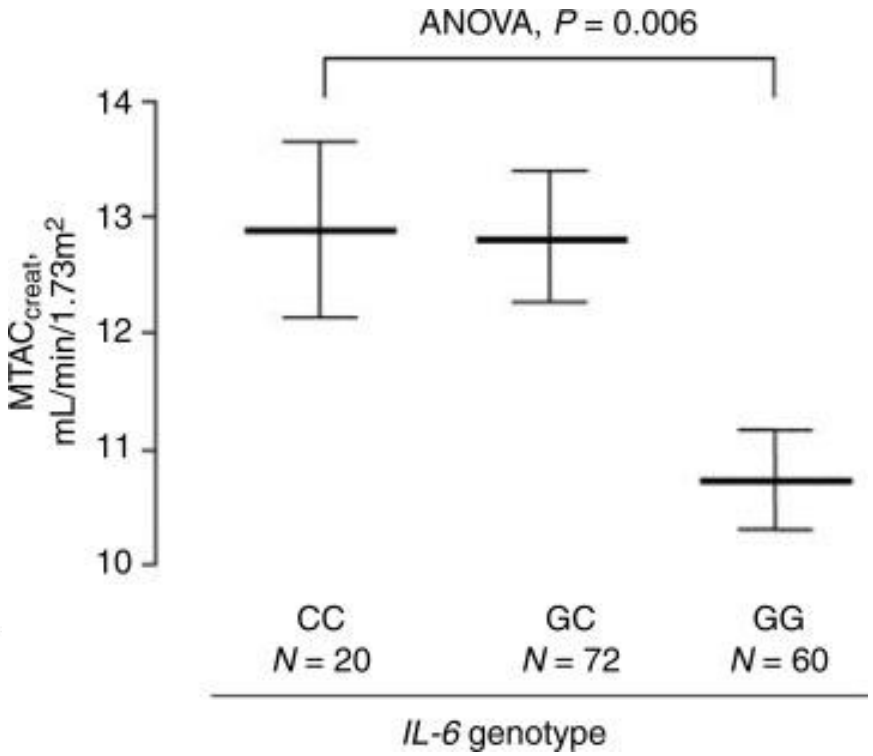
- Output: OR and 95% confidence interval of the OR
- Test: is it significantly different from 1?
- Tests: Fisher's exact test or Chi-squared
- In case of dosages or covariates: logistic regression

Continuous trait

- For directly typed (0,1,2): ANOVA



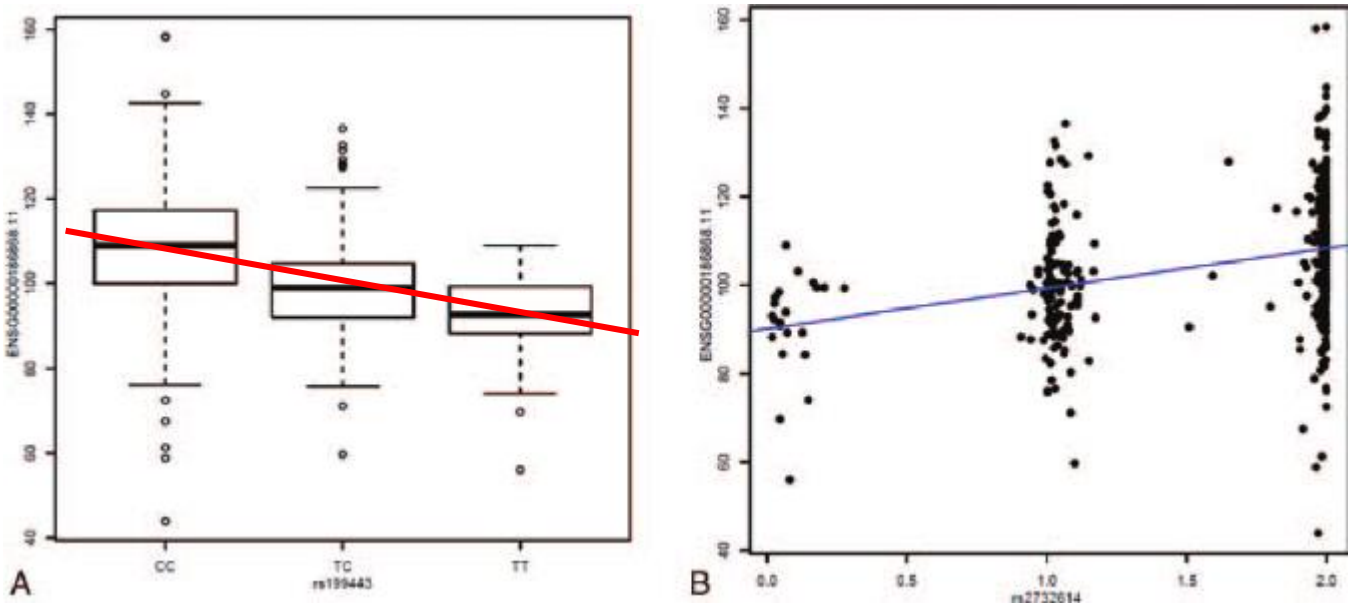
additive



recessive

Continuous trait

- For dosages (imputed quantity of minor allele $d \in [0,1]$) : linear regression
- In general: generalized linear model



Continuous trait

A linear regression model is defined as

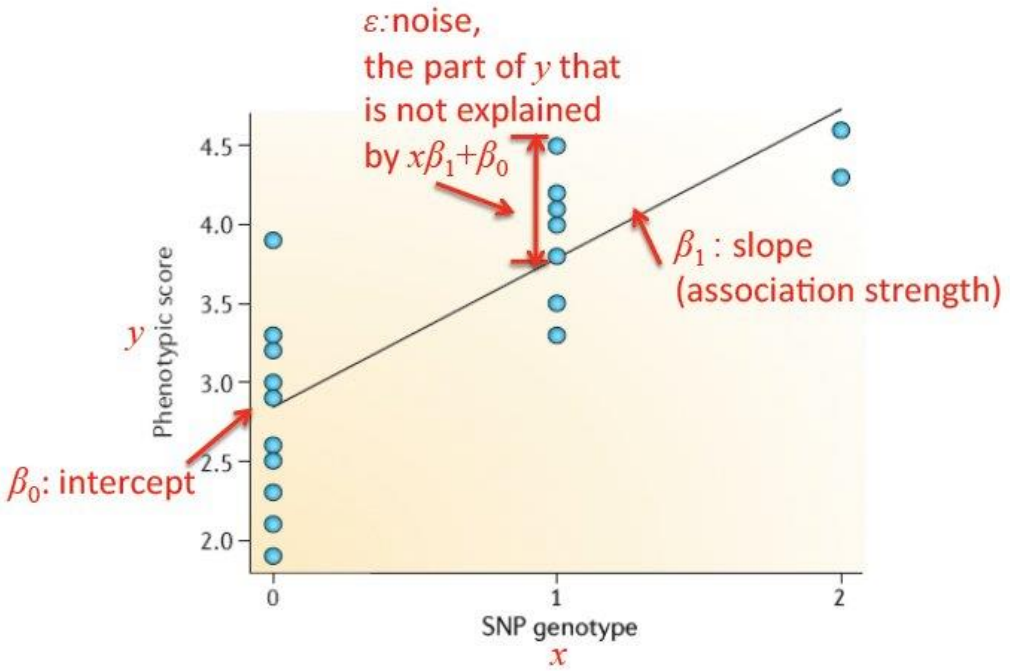
$$y = x\beta_1 + \beta_0 + \varepsilon$$

Data:

- y: a continuous trait
- x: SNP genotype at a given locus

Parameters:

- β_1: regression coefficient, represents the strength of association between x and y
- β_0: intercept term (is 0 or ignored)
- ε: noise or the part of y that is not explained by x (e.g., environmental effect)

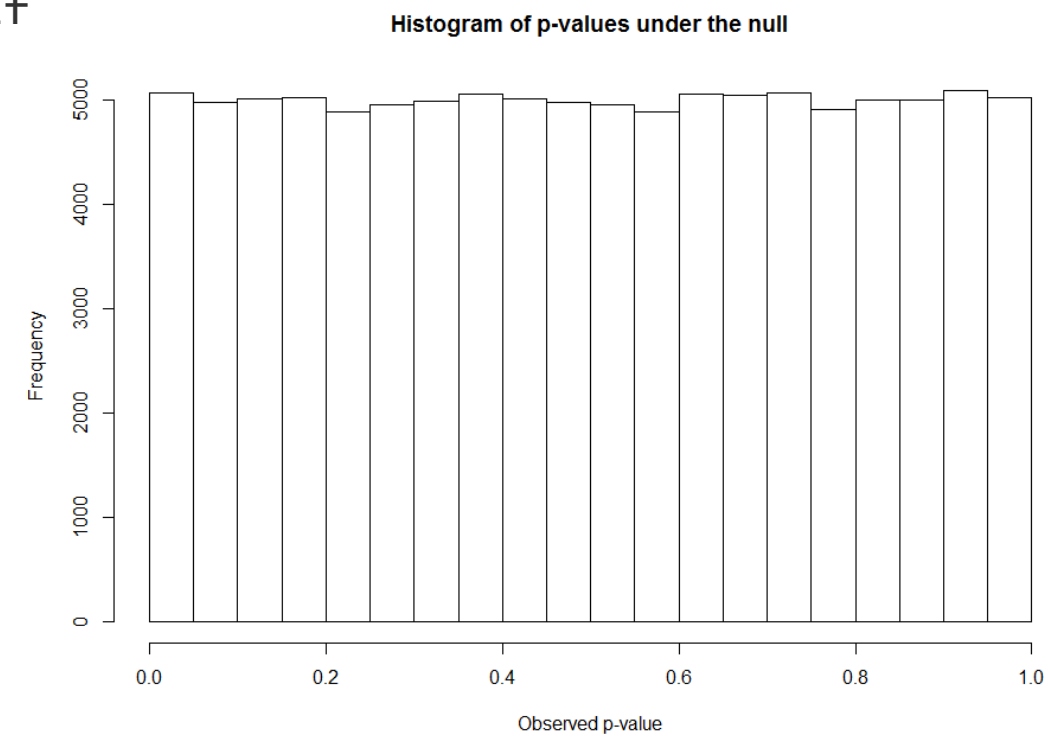


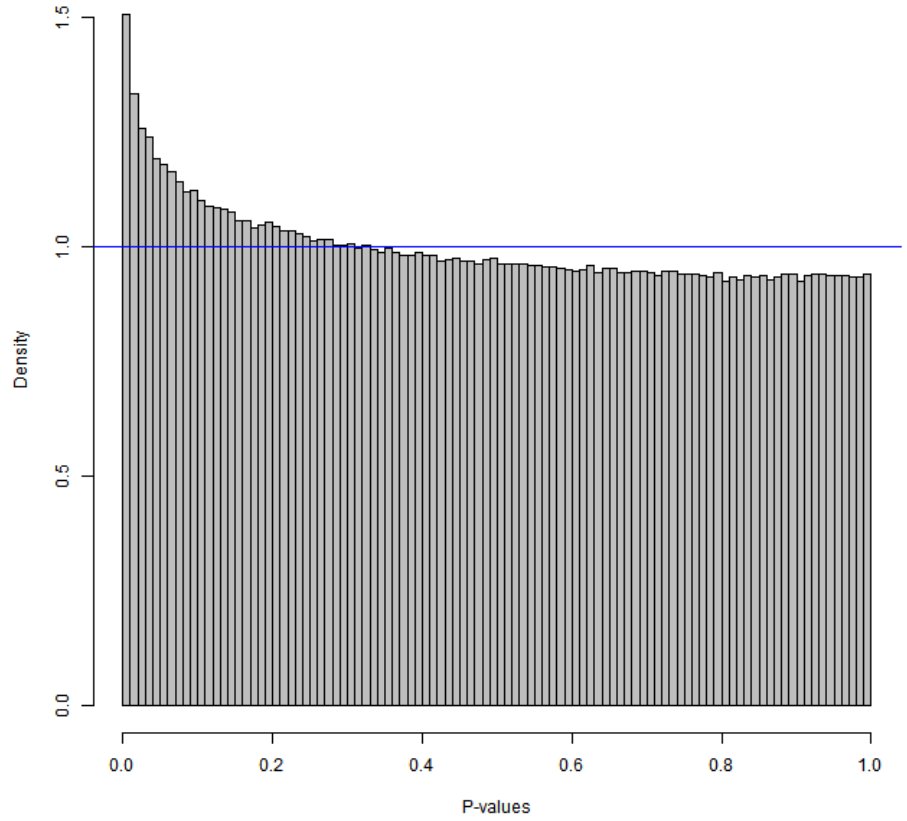
Assumptions:

- The individuals in the study are not related
- The phenotype y has a normal distribution

Checking results

- QQ-plot
  - Distribution of p-values is uniform [0,1] under the null
  - If we have much signal, more around 0
  - Compare quantiles with expected ones : QQ-plot
  - In R: `qqunif`





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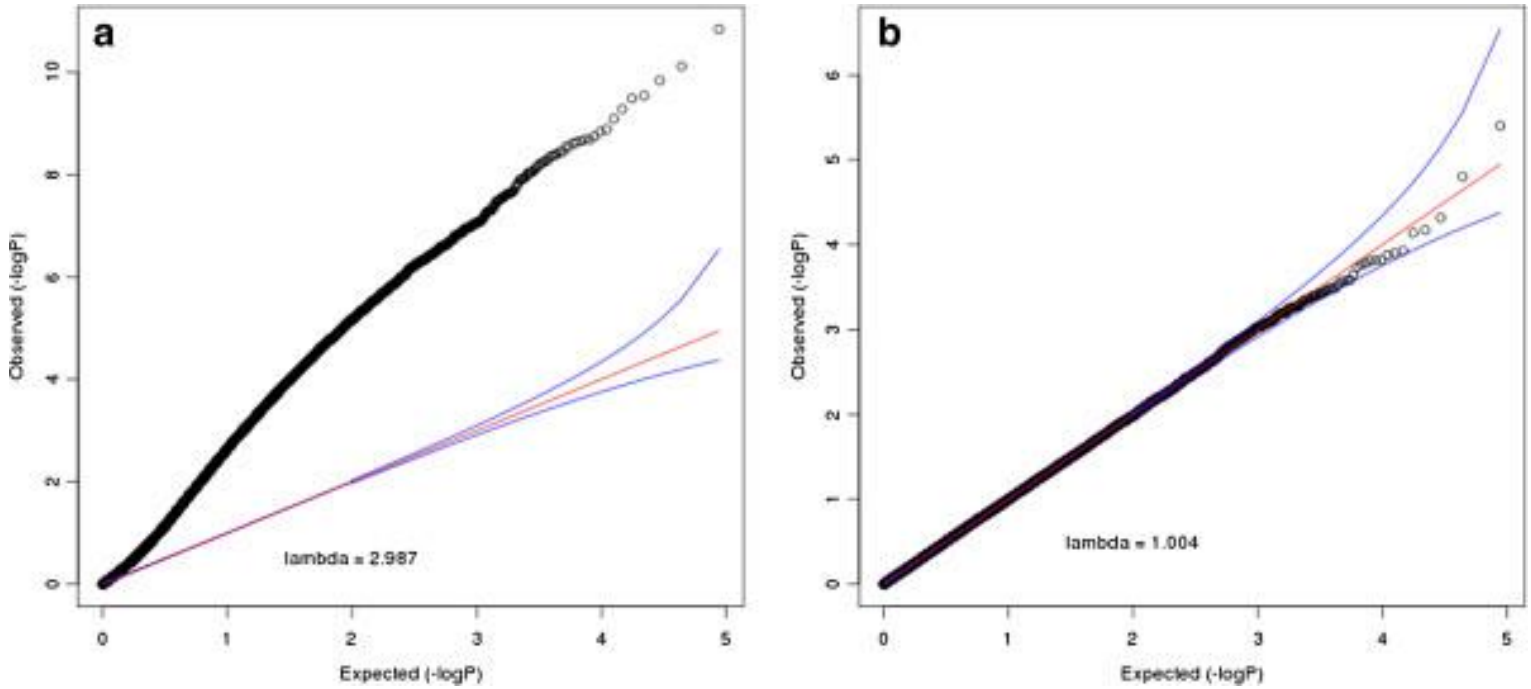

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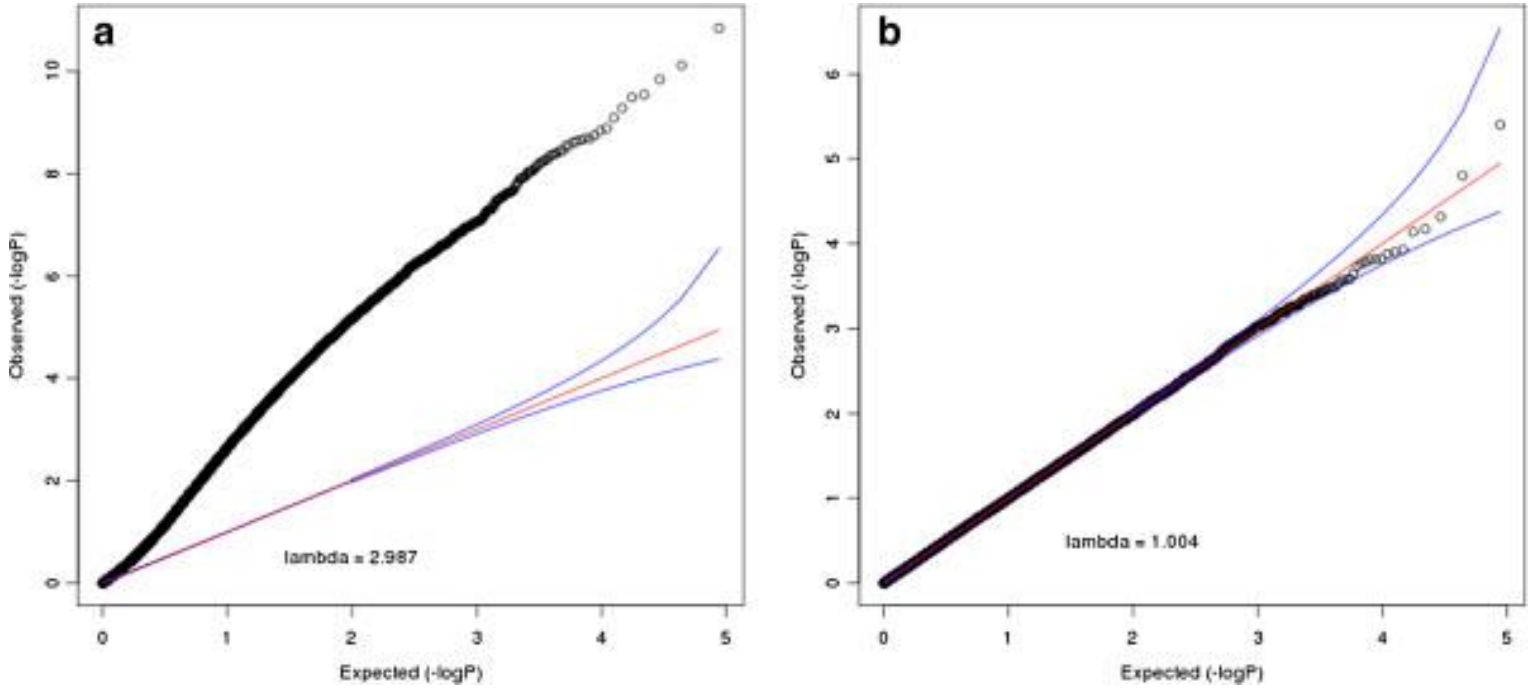
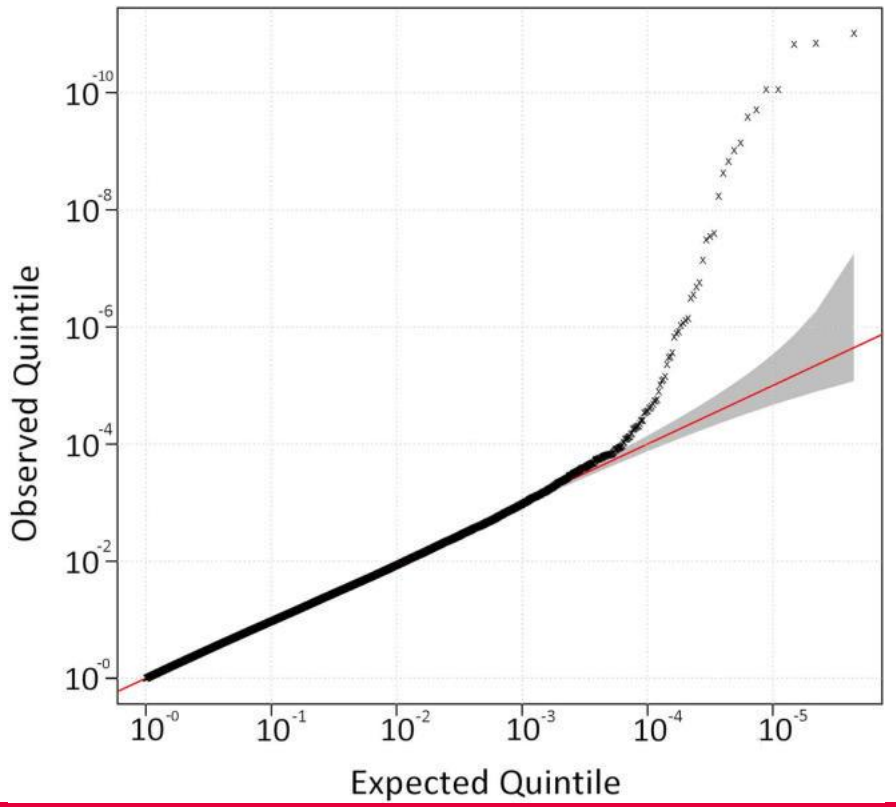


- Inflation: too much signal
- Measured visually, but also lambda

Checking results



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  - Distribution of p-values is uniform [0,1] under the null
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  - Compare quantiles with expected ones : QQ-plot
  - In R: `qqunif`

Appearances can be deceiving:

- A QQ-plot can look inflated when it isn't (just a lot of signal)
- And conversely
- We calculate the genomic inflation factor

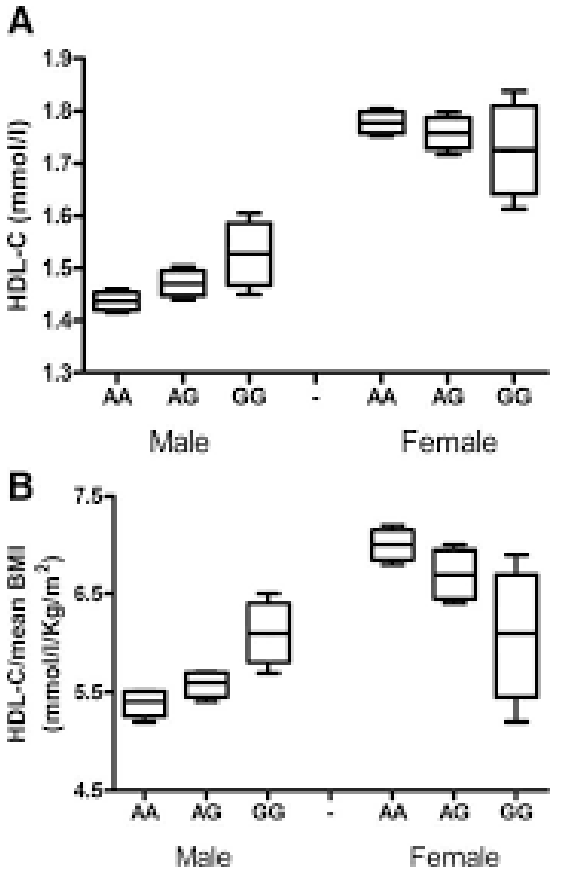
$$\lambda = \frac{median(Q_{\chi^2}(p))}{0.45}$$

(median of χ^2 test statistics divided by median of χ^2_1)

- Ideally, want to correct in the model
- Can also adjust: GC correction (divide by lambda)

Problems

- Covariates: sex, batch effects, chip effects



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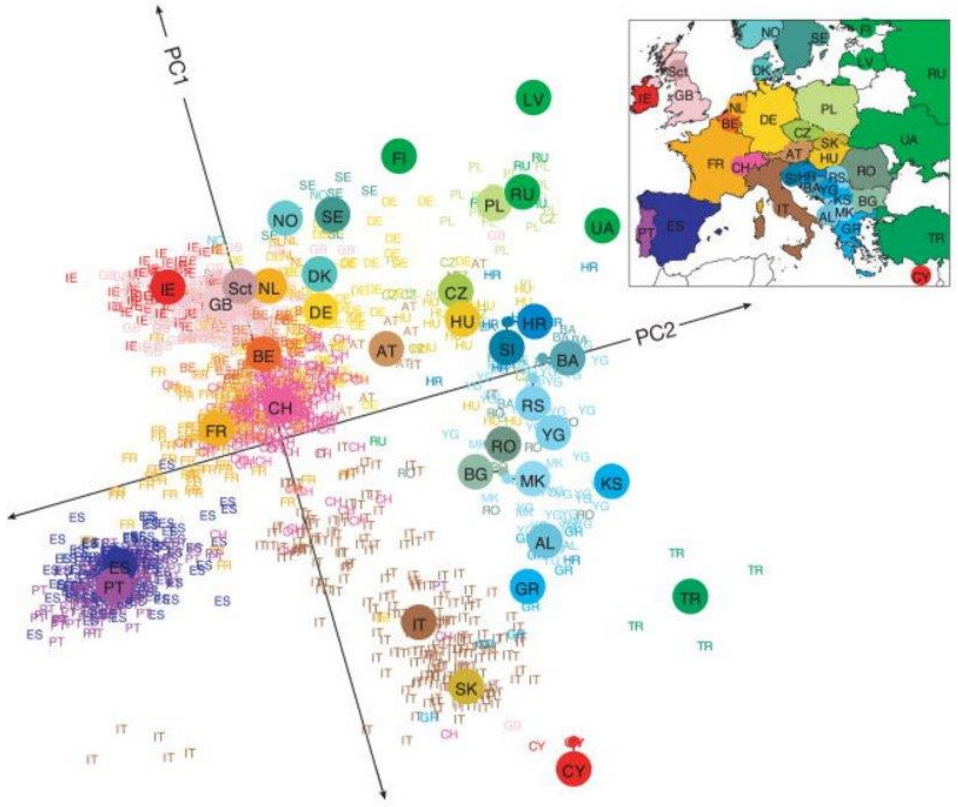
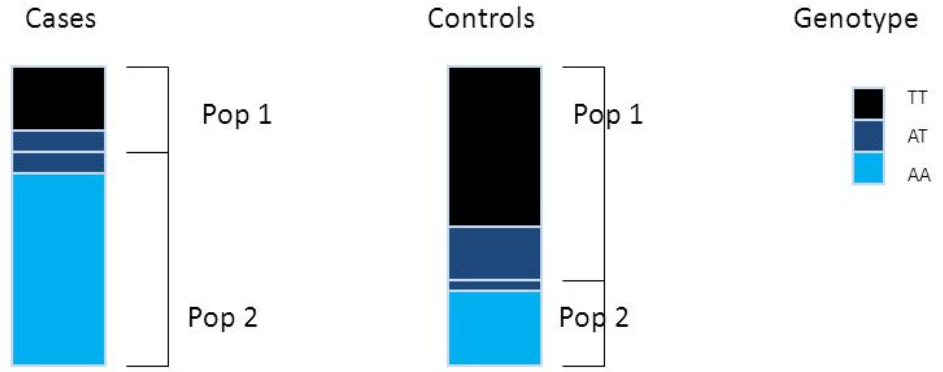


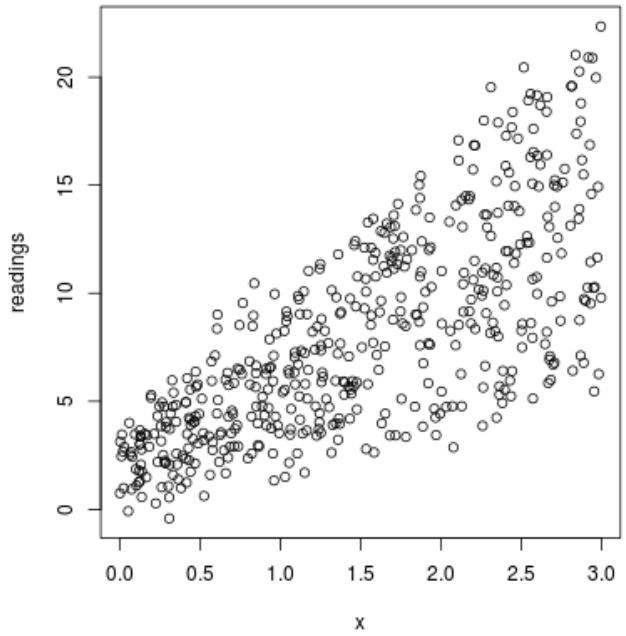


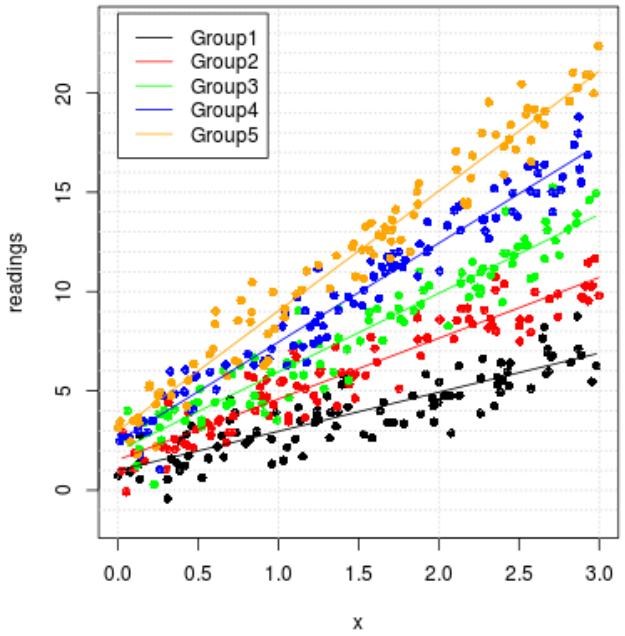
- Covariates: sex, batch effects, chip effects
- Structure: villages or subpopulations: linear mixed models can model the intra-group effect

Problems

- Covariates: sex, batch effects, chip effects
- Structure: villages or subpopulations: linear mixed models can model the intra-group effect

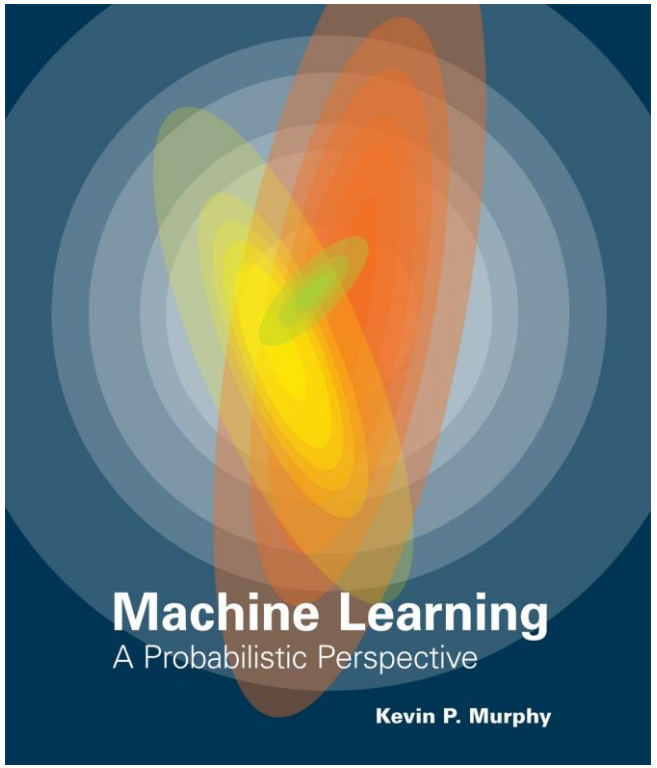
$$\boldsymbol{phenotype} \sim \boldsymbol{\beta} \times \boldsymbol{genotype} + \boldsymbol{\beta_1} \times \boldsymbol{covariates} + \boldsymbol{\beta_2} \times \boldsymbol{structure} + \boldsymbol{\epsilon}$$





References

These references are for probability and statistical theory only
They are not specific to statistical genetics



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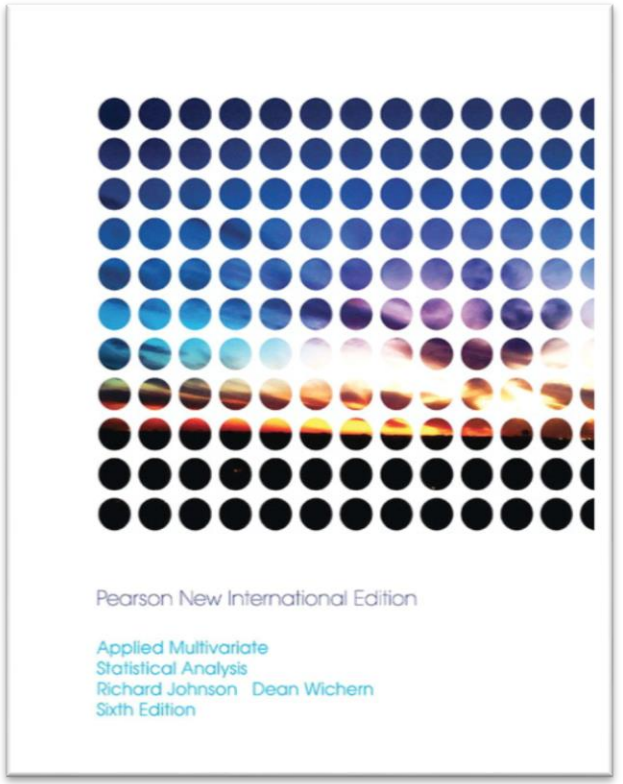

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