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**Statistical Analysis for Next-Generation Sequencing data in Family-based designs**

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**Statistical Analysis for Next-Generation Sequencing data in Family-based designs**

**by**

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**Abstract**

**Statistical Analysis for Next-Generation Sequencing data in Family-based designs**

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Genome-wide association studies (GWAS) typically involve examination of 100,000 to more than 1,000,000 genetic variants, such as single nucleotide polymorphisms (SNPs), in different individuals to identify SNPs associated with a disease. Since the conclusion of the Human Genome Project, this project elucidated understand human genetic variation and paved the way for the GWAS approach. GWAS have successfully identified thousands of common genetic loci associated with many phenotypes.

Despite the success of GWAS, the variants identified by these studies have often explained only a small fraction of heritability for most phenotypes, and this observation underscored the importance of studying rare or less common variants.

Contrary to the traditional GWAS approach, single variant association analysis with rare variants has difficulties with detection of causal variants. To overcome the issue with statistical power in rare variant association studies, researchers have recently developed statistical methods for testing rare variants in a population-based design. Because individuals in a family are genetically more homogenous than unrelated individuals, family-based designs can play an important role in rare-variant studies. Despite the importance of rare variant analysis for the family-based design, only a few statistical methods for family-based rare-variant association analysis are available. Furthermore, even though many genes on the X chromosome are related to human complex diseases, few significantly associated rare variants have been identified on the X chromosome for complex traits.

In this study, we propose a family-based rare-variant association test (***FARVAT***) and a family-based rare-variant association test for X-linked genes (***FARVATX***). ***FARVAT*** is based on quasi-likelihood, and is statistically and computationally efficient for the family-based design. We considered that families were ascertained with the disease status of family members, and we calculated the genetic relationship matrix for the proposed method; this matrix ensured robustness in the presence of population substructure. Depending on the choice of a working matrix, ***FARVAT*** could be a burden-type or a variance component-type method, and could be extended to the optimal-type method. In the analysis of the X chromosome, ***FARVATX*** can accommodate random X chromosome inactivation (XCI), escaped XCI (E-XCI), and skewed XCI (S-XCI). ***FARVATX*** is computationally efficient and can complete X-linked analyses within a few hours. With extensive simulation studies under various scenarios, we compared the proposed methods with the existing ones, and the results showed that the proposed methods are the more powerful in terms of simulation settings. We also applied ***FARVAT*** and ***FARVATX*** to schizophrenia data and chronic obstructive pulmonary disease (COPD) data, respectively. The proposed methods may help researchers identify additional X-linked rare variants associated with complex traits, thereby leading to a better understanding of the underlying biological processes associated with X-linked genes.

**Key words**: Genome-wide association studies (GWAS), Next-Generation Sequencing (NGS), rare-variant association test, Family-based design, X chromosome

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**Contents**

**Abstract** i

**Contents** iv

**List of Figures** vi

**List of Tables** viii

**1 Introduction** 1

1.1 The background on genetic association studies 1

1.1.1 An overview of genome-wide association studies 1

1.1.1.1 The case-control design 4

1.1.1.2 The family-based design 8

1.1.2 An overview of next-generation sequencing data analysis 10

1.1.2.1 The case-control design 11

1.1.2.2 The family-based design 12

1.2 The purpose of this study 13

1.3 Outline of the thesis 15

**2 An overview of rare-variant analysis** 16

2.1 Challenges of rare-variant analysis 16

2.2 Review of rare-variant methods 17

2.2.1 Burden-type methods 20

2.2.2 Variance component-type methods 26

2.2.3 Optimal-type methods 29

2.2.4 Other methods 31

**3 Family-based rare-variant association test** 34

3.1 Introduction 34

3.2 Methods 35

3.2.1 Notations and the disease model 35

3.2.2 Family-based rare-variant association test 37

3.2.3 Extension to the optimal type statistic 40

3.3 Simulation study 42

3.3.1 The simulation model 42

3.3.2 Evaluation with simulated data under the absence of population substructure 46

3.3.3 Evaluation with simulated data under the presence of population substructure 54

3.3.4 Analysis of GAW17 simulated data 60

3.4 Application to schizophrenia data 67

3.5 Discussion 72

**4 Family-based Rare Variant Association Test for X-linked genes**  75

4.1 Introduction 75

4.2 Methods 76

4.2.1 Notation 76

4.2.2 Variance covariance matrix 77

4.2.3 Weighted quasi-likelihood score 80

4.2.4 X-linked rare variant association tests 81

4.3 Simulation study 85

4.3.1 The simulation model 85

4.3.2 Evaluation with simulated data 89

4.3.3 Evaluation with simulated data in the presence of population substructure 110

4.3.4 Evaluation of robustness against biological expression process 115

4.4 Application to chronic obstructive pulmonary disease data 119

4.5 Discussion 125

**5 Summary and Conclusions**  128

**Bibliography** 131

**Abstract (Korean)** 138

**List of Figures**

**Figure 1.1** GWAS catalog as of 2013 6

**Figure 3.1** Extended family used in our simulation studies 43

**Figure 3.2** Empirical power estimates when the number of rare variants in a gene is 30 52

**Figure 3.3** Empirical power estimates when the number of rare variants in a gene is 100 53

**Figure 3.4** Empirical power estimates when all rare variants in a gene are considered 54

**Figure 3.5** Empirical power estimates under the presence of population substructure 59

**Figure 3.6** QQ-plot of the rare variant association analysis with GAW17 simulated data for AFFECTED trait 65

**Figure 3.7** Manhattan plot of the rare variant association analysis with GAW17 simulated data for AFFECTED trait 66

**Figure 3.8** QQ-plot of the rare variant association analysis for schizophrenia 69

**Figure 3.9** Manhattan plot of the rare variant association analysis for schizophrenia 70

**Figure 4.1** Family structures considered in our simulation studies 87

**Figure 4.2** Empirical power estimates for random XCI 106

**Figure 4.3** Empirical power estimates for S-XCI to normal allele 107

**Figure 4.4** Empirical power estimates for S-XCI to deleterious allele 108

**Figure 4.5** Empirical power estimates for E-XCI 109

**Figure 4.6** Empirical power estimates for random XCI in the presence of population substructure 114

**Figure 4.7** Empirical power estimates when the gene expression processes of X-linked variants are misspecified 118

**Figure 4.8** Pairwise plots of PC scores 120

**Figure 4.9** QQ-plots of results from rare variant association analyses of COPD 123

**Figure 4.10** QQ plots of results from rare variant association analyses of COPD 124

**List of Tables**

**Table 1.1** Contingency tables for case-control analyses by genetic model 7

**Table 2.1** Summary of statistical methods for rare variant association testing 18

**Table 3.1** Empirical type-1 error estimates for 30 rare variants 47

**Table 3.2** Empirical type-1 error estimates for 100 rare variants 48

**Table 3.3** Empirical type-1 error estimates in the 30 kb genetic region 49

**Table 3.4** Empirical type-1 error estimates in the presence of population substructure 57

**Table 3.5** Rare variant association analysis with GAW17 simulated data for AFFECTED trait 62

**Table 3.6** Rare variant results of GAW17 data for AFFECTED trait adjusting for covariates 64

**Table 3.7** Significant results from the rare variant association analysis with schizophrenia data 71

**Table 4.1** X chromosomal and autosomal kinship coefficients for two individuals in a nuclear family 78

**Table 4.2** Empirical type-1 error estimates for XCI or E-XCI 90

**Table 4.3** Empirical type-1 error estimates for S-XCI 92

**Table 4.4** Empirical type-1 error estimates for XCI or E-XCI when prevalence for males and females are different 95

**Table 4.5** Empirical type-1 error estimates for S-XCI when prevalence for males and females are different 97

**Table 4.6** Empirical type-1 error estimates for XCI or E-XCI when prevalence for males and females are different 100

**Table 4.7** Empirical type-1 error estimates for S-XCI when prevalence for males and females are different 102

**Table 4.8** Empirical type-1 error estimates for random XCI in the presence of population substructure 112

**Table 4.9** Empirical type-1 error estimates when the gene expression process of X-linked variants are misspecified 116

**Table 4.10** Most significant results from rare variant association analyses of COPD data 122

**Chapter 1**

**Introduction**

**1.1 The background on genetic association studies**

**1.1.1 An overview of genome-wide association studies**

A genome-wide association study (GWAS) represents an approach to identify causal variants that are associated with complex traits in the population [[Visscher, et al. 2012](#_ENREF_92)]. The causal variant is a single nucleotide polymorphism (SNP) that is known to be highly associated with increased or decreased individual risk of a disease. A SNP is a genetic variation when a single-nucleotide (adenine, guanine, cytosine, or thymine) variation in a segment of a DNA occurs in more than one percent of a population. Because a SNP is generally bi-allelic, we considered three possible genotypes: *A*/*A*, *A*/*a*, and *a*/*a* (minor allele *a* and major allele *A*).

The GWAS approach was first proposed by researchers [[Risch and Merikangas 1996](#_ENREF_73)] who claimed that association studies are more powerful than the linkage study design in terms of detection of common variants. Another researcher advanced the common-disease common variant (CDCV) hypothesis [[Lander 1996](#_ENREF_46)] stating that common disorders are influenced by a genetic variation that is also common in the general population. A SNP becomes common over many generations because natural selection has filtered out any disease-causing mutations. Nonetheless, some common SNPs have harmful effects depending on environmental conditions. The CDCV-GWAS strategy implies that many common SNPs have small effects on each disease, and that some could be discovered by testing enough SNPs in a large sample of people [[Psychiatric, et al. 2009](#_ENREF_72)].

The International HapMap Project (http://hapmap.ncbi.nlm.nih.gov/) has validated approximately 3.1 million SNPs in major populations [[International HapMap, et al. 2007](#_ENREF_40)]. Companies Affymetrix and Illumina have rapidly developed SNP arrays with high accuracy at a low cost [[Psychiatric, et al. 2009](#_ENREF_72)]. These efforts make it possible to capture most of the common genomic variation in a number of human populations using representative tag SNPs.

The GWAS has successfully identified more than 10,000 common genetic variants associated with many complex human traits [[Altshuler, et al. 2008](#_ENREF_4); [Manolio, et al. 2008](#_ENREF_58); [McCarthy, et al. 2008](#_ENREF_60)]. Since the first major GWAS was reported in 2007 [[Sladek, et al. 2007](#_ENREF_81)], such studies have rapidly grown in scale and complexity, and 1,751 curated publications of 11,912 SNPs have been added to the catalog of published Genome-wide Association Studies [[Welter, et al. 2014](#_ENREF_94)] (See Figure 1.1).

In a GWAS, the association analysis is mainly focused on autosomal chromosomes only, whereas those for the X chromosome is neglected. Due to the relatively large size of the X chromosome, many X-linked genes have important functions, and significant associations of several X-linked variants have been identified for diverse phenotypes, including blood pressure, hematological traits, obesity, HDL cholesterol, and Type-1 diabetes [[Ahituv, et al. 2007](#_ENREF_2); [Auer, et al. 2014](#_ENREF_7); [Blakemore, et al. 2009](#_ENREF_12); [Cohen, et al. 2004](#_ENREF_25); [Gaukrodger, et al. 2005](#_ENREF_32); [Nejentsev, et al. 2009](#_ENREF_66)]. However, most successful results from genome-wide association studies have been from autosomes, and significant results for X-linked variants are relatively few in number. There are multiple potential reasons for this, but it is at least partially attributable to the complex biological properties of X-linked variants, which make efficient genetic association analyses more challenging. For instance, while females inherit X chromosomes from both parents, males inherit a single maternal X chromosome, and there is some empirical evidence that in females genes for some X-linked variants are expressed twice as highly as in males [[Brown and Greally 2003](#_ENREF_14); [Carrel and Willard 2005](#_ENREF_17); [Shapiro, et al. 1979](#_ENREF_79)]. In contrast, dosage compensation for other X-linked variants can be achieved by the selection, and silencing of maternal or paternal genes via either random or nonrandom mechanisms [[Lyon 1961](#_ENREF_54)]. Under nonrandom X chromosome inactivation (XCI), either the maternal or paternal genes are relatively more activated [[Belmont 1996](#_ENREF_10); [Plenge, et al. 2002](#_ENREF_69)], and the amount of skewness is sometimes related to age or disease status [[Amos-Landgraf, et al. 2006](#_ENREF_5); [Busque, et al. 1996](#_ENREF_16); [Chagnon, et al. 2005](#_ENREF_19); [Knudsen, et al. 2007](#_ENREF_44); [Minks, et al. 2008](#_ENREF_63); [Sharp, et al. 2000](#_ENREF_80); [Wong, et al. 2011](#_ENREF_99)]. However in spite of this knowledge about gene expression process of X-linked variants, there are very few statistical methods applicable to the complicated biological process of X-linked genes.

**1.1.1.1 The case-control design**

In a GWAS, case-control status is generally analyzed using either contingency table methods or logistic regression. Contingency table methods test the null hypothesis of no association between rows and columns in a 23 matrix where the rows correspond to case-control status and the columns to three genotypes. Four genetic models named recessive (REC), dominant (DOM), additive (ADD), and multiplicative (MUL) models are commonly used [[Freidlin, et al. 2002](#_ENREF_31); [Sasieni 1997](#_ENREF_75)] (See Table 1.1). Researchers can use either the chi-square test (with two degrees of freedom) or Fisher’s exact test.

The Cochran-Armitage test [[Armitage 1955](#_ENREF_6)], which is more conservative than the chi-square test and does not depend on the Hardy-Weinberg equilibrium, is similar to the allele-count test. The idea is to test the hypothesis of a zero slope for a line that fits the three-genotype risk estimates best. Under the null hypothesis, the Cochran-Armitage test has an approximate the chi-square distribution with a single degree of freedom. The Cochran-Armitage test has good power in the additive model, but power is reduced by a deviation from additivity.

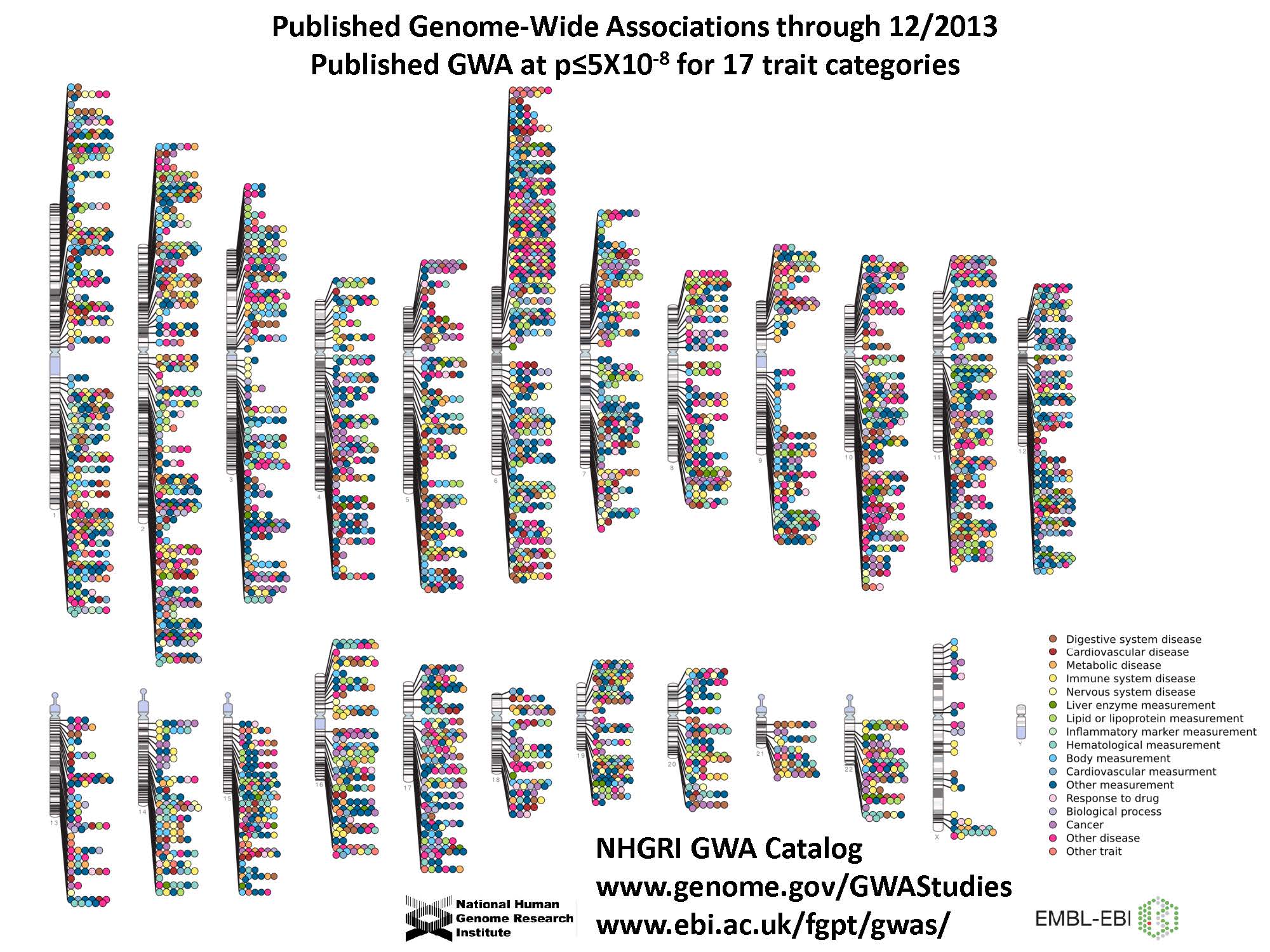
****

Figure 1.1 GWAS catalog as of 2013. This diagram shows all SNP-trait association with *p*-value ≤ 5.010-8.

**Table 1.1 Contingency tables for case-control analyses by genetic model.** *a*, *b*, *c*, *d*, *e*, *f* are genotype count observed in cases and controls.

1. **Recessive model**

|  |  |  |
| --- | --- | --- |
|  | **AA + AB** | **BB** |
| **Cases** | *a* + *b* | *c* |
| **Controls** | *d* + *e* | *f* |

1. **Dominant model**

|  |  |  |
| --- | --- | --- |
|  | **AA** | **AB+BB** |
| **Cases** | *a* | *b + c* |
| **Controls** | *d* | *e + f* |

1. **Additive model**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **AA** | **AB** | **BB** |
| **Cases** | *a* | *b* | *c* |
| **Controls** | *d* | *e* | *f* |

1. **Multiplicative model**

|  |  |  |
| --- | --- | --- |
|  | **A** | **B** |
| **Cases** | *2a* + *b* | *b + 2c* |
| **Controls** | *2d* + *e* | *e + 2f* |

Logistic regression is an extension of linear regression where the outcome of a linear model is transformed using a logistic function, , that predicts the probability of having a case status given a genotype class. Logistic regression is preferred for estimates of genetic risk factors because it allows for adjustment for covariates such as age, sex, and many others that may influence the phenotype.

Several methods have been proposed to detect statistically associated X-linked variants of phenotypes. For X-linked variants, there is heterogeneity of genetic distributions between males and females, which is often handled by extending the Cochran-Armitage test for genetic association analyses of X-linked variants [[Clayton 2008](#_ENREF_24); [Zheng, et al. 2007](#_ENREF_102)].

**1.1.1.2 The family-based design**

The family-based designs have an advantage over case-control designs because the former are robust in the presence of a population admixture and stratification. The simplest family-based design for testing of an association uses genotype data from a trio, which consists of an affected offspring and two parents. The association in this design is tested using the transmission disequilibrium test (TDT) [[Spielman, et al. 1993](#_ENREF_83)]. The TDT is focused on heterozygous parents and tests whether a specific variant has an equal frequency among the variants inherited and those not inherited by the affected offspring. Originally, the TDT was proposed as a test of linkage in the presence of an association. Because both linkage and association between the trait and the variant have to be present for the TDT to reject the null hypothesis [[Ott 1989](#_ENREF_68)], the TDT is now typically used to test for an association [[Hirschhorn and Daly 2005](#_ENREF_36)]. The TDT does not require specification of a disease model. Nevertheless, there are many cases where the original TDT cannot be applied without extension, for instance, missing parents, general pedigrees, and complex phenotypes.

A general extension of the TDT has resulted in the family-based association test (FBAT) approach [[Laird and Lange 2006](#_ENREF_45)]. The FBAT approach incorporates additional conditions such as general pedigrees, missing founders, and complex diseases. The FBAT approach has been successfully applied, for instance, to studies of asthma [[Smit, et al. 2009](#_ENREF_82)].

In order to analyze the X chromosome, some researchers [[Thornton, et al. 2012](#_ENREF_89)] proposed methods, *XM*, in case-control study with family-based samples. The *XM* method adjusts for both relationships among family members and sex-specific trait prevalence values.

**1.1.2 An overview of next-generation sequencing data analysis**

As the cost of genotyping decreases, the number of the GWAS has increased substantially, and the GWAS approach is now relatively common. Despite the success of the GWAS at identifying common SNPs that are associated with complex diseases [[Manolio, et al. 2008](#_ENREF_58); [Visscher, et al. 2012](#_ENREF_92)], heritability of complex traits is only partially explained by these significant variants from the GWAS [[Manolio, et al. 2009](#_ENREF_59)]. For example, it is estimated that the heritability of human height is ~80%, but 40 loci that have been associated with height, explain only ~5% of height variance [[Visscher 2008](#_ENREF_91)]. This is known as the problem of missing heritability [[Manolio, et al. 2009](#_ENREF_59)], and one possible solution to this problem, the analysis of rare variants, is generally not feasible for the GWAS [[Li and Leal 2008](#_ENREF_51); [Wu, et al. 2011](#_ENREF_100)].

With the rapid development of cost-effective NGS technologies such as Illumina HiSeq, ABI SOLiD, and Roche 454, rare variant association analysis using sequence data has become possible. A number of studies provide evidence that rare variants contribute to the etiology of complex traits such as high-density lipoprotein (HDL) cholesterol, low-density lipoprotein (LDL), blood pressure, and triglyceride levels [[Cohen, et al. 2004](#_ENREF_25); [Cohen, et al. 2006](#_ENREF_26); [Ji, et al. 2008](#_ENREF_42); [Romeo, et al. 2009](#_ENREF_74)]. Therefore, rare variants can play an important role in a complex disease.

**1.1.2.1 The case-control design**

Contrary to the analysis of common variants, single genetic association analysis with rare variants often yields a large percentage of false negatives unless sample sizes or effect sizes are very large. Accordingly, an association analysis with the collapsed genotype scores for a set of rare variants has been suggested [[Li and Leal 2008](#_ENREF_51)]. For instance, minor alleles for all rare variants in a gene or a region are counted, and the disease status is regressed on minor allele counts (MAC). Alternatively, the collapsed amount of variance inflation for rare variants can be compared between affected and unaffected individuals [[Neale, et al. 2011](#_ENREF_65); [Wu, et al. 2011](#_ENREF_100)]. The former is often called a burden test, while the latter a variance component test. The burden test is statistically more efficient than variance component methods such as C-alpha [[Neale, et al. 2011](#_ENREF_65)] and sequence kernel test (SKAT) [[Wu, et al. 2011](#_ENREF_100)] if most of the rare alleles have similar effects on the disease. On the other hand, if rare variants with deleterious and protective effects are combined, the collapsed genotype scores for affected and unaffected individuals are similar, and genetic association analysis with a burden test becomes inefficient, while the variance component method becomes more robust. The two methods can be combined into robust statistical strategies such as the SKAT-O approach [[Lee, et al. 2012a](#_ENREF_49)], which is statistically efficient in both situations.

A research group [[Ma, et al. 2015](#_ENREF_55)] proposed three gene-based test for the X chromosome: burden-type test, variance component-type test, and optimal-type tests.

**1.1.2.2 The family-based design**

Recently, some researchers [[He, et al. 2014](#_ENREF_35)] proposed rare variant transmission disequilibrium tests (RV-TDTs) which represent extensions of the (TDT) [[Spielman, et al. 1993](#_ENREF_83)]. The RV-TDT approach was shown to be robust and powerful for exploration of rare-variant associations in a population substructure. Even though robustness against the population substructure is ensured, these approaches do not take into account the parental phenotypes, and therefore power loss can be substantial for extended family designs. Alternatively, some investigators have proposed the family-based functional principal-component analysis (FPCA) and pedigree-based combined multivariate and collapsing (PedCMC) tests [[Zhu and Xiong 2012](#_ENREF_103)], which are extended Cochran Armitage tests for family-based samples. These tests utilize data from the whole family for a rare variant association analysis and are expected to be more efficient than the TDT-type statistic. Nevertheless, if the effects of rare variants are proportional to MAC or if the protective and deleterious variants are mixed in a gene, these approaches can be less efficient.

Some researchers [[Schaid, et al. 2013](#_ENREF_77)] proposed new methods for rare X-linked variant association analysis with family-based samples, which are modified the *MQLS* method [[Thornton and McPeek 2007](#_ENREF_87)]; the extensions are on the applicability from common X-linked variant to rare variant analysis on the X chromosome in the family-based design.

**1.2 The purpose of this study**

The main purpose of this thesis is to develop statistical methods for identification of rare causal variants using family-based sequencing data. To this end, the thesis is focused on two type of study. One is a study to develop a new method, which is based on the quasi-likelihood of whole families. To increase statistical power, the proposed method utilizes the disease prevalence information and the genetic relationship matrix. The other is intended to extend our previous study from autosomes to the X chromosome.

In the first study, we proposed a family-based rare variant association test (***FARVAT***) for NGS data. The previous approaches to detect human disease associations with rare variants in a family-based design are not powerful and cannot be considered in the presence of both deleterious and protective rare variants in a gene. To overcome the limitation of previous approaches, we developed the ***FARVAT*** method, which utilizes the prevalence of a disease and the empirical genetic relationship matrix between individuals. Furthermore, the ***FARVAT*** method can be a burden-type test, variance component-type test, or optimal-type test depending on the choice of the working matrix. We evaluated the performance of the proposed method in a simulation study and applied this method to a real NGS dataset from 36 trios with schizophrenia.

In the second study, we proposed a novel method (for a family-based rare-variant association test for X-linked genes, ***FARVATX***) for identification of rare variants on the X chromosome in a family-based design. In order to analyze the X chromosome, previous methods have been proposed, which modified the *MQLS* method. Even though the powerful approaches to detect X chromosome genetic association are ensured, these approaches cannot be considered in the presence of skewed X-chromosome inactivation patterns in female or the different proportions of males and females. To overcome these limitations, we proposed FARVATX method that is applicable in various biological models such as random X chromosome inactivation (XCI), escaped XCI (E-XCI), and skewed XCI (S-XCI). Furthermore, the proposed method used an allele frequency estimation for X chromosome marker in samples with related individuals. The proposed method shows better performance than those of existing methods, in our extensive simulations. The proposed method was applied to an association analysis of families with chronic obstructive pulmonary disease (COPD).

**1.3 Outline of the thesis**

This thesis is organized as follows. Chapter 1 is an introduction to this study with an overview of GWAS and NGS analysis for the case-control design and family-based design. Chapter 2 contains an overview of rare-variant analysis. Chapter 3 deals with the family-based rare-variant association test. Chapter 4 is about the family-based rare-variant association test for X-linked genes. Chapters 3 and 4 contain an introduction to the statistical method, simulation studies, and the application to real data. Finally, the summary and conclusions are presented in Chapter 5.

**Chapter 2**

**An overview of rare-variant analysis**

**2.1 Challenges of rare-variant analysis**

With the rapid advances in the development of NGS technologies, the cost of sequencing has decreased and provided an opportunity to study the role of rare variants in human complex traits. Nonetheless, the analysis of rare variants in NGS data poses substantial challenges.

First, it is necessary to use a very large sample size to detect causal rare variants [[Gorlov, et al. 2008](#_ENREF_34); [Li and Leal 2008](#_ENREF_51)]. For example, at the odds ratio (OR) of 1.4, the required sample sizes to achieve the power of 80% are 54,000 and 540,000 when a minor allele frequency (MAF) is assumed to be 0.01 and 0.001, respectively [[Lee, et al. 2014](#_ENREF_48)]. To solve this problem, many alternative strategies have been proposed such as target sequencing, exome sequencing, imputation for low-depth whole-genome sequencing, and the family-based design. Second, the analysis of rare variants in sequencing data suffers from an increased multiple-testing burden. One-third of all sequencing variants have MAFs below 5%, and the distribution of MAFs is substantially skewed toward an excess of rare variants [[Braverman, et al. 1995](#_ENREF_13); [Gibson 2011](#_ENREF_33)]. Therefore, the significance level may have to be more stringent because of a large number of rare variants. Finally, classical single-variant-based tests for rare variants are seriously underpowered as compared to common variants because statistical power depends on MAF. To address these issues, numerous methods for detecting associations with rare variants for complex traits have been designed.

**2.2 Review of rare-variant methods**

To detect a causal rare variant, aggregation tests evaluate cumulative effects of multiple genetic variants in a gene or region instead of testing each variant individually. Numerous methods have been proposed, and we broadly categorize these methods into four types: the burden-type tests, the variance component-type tests, the optimal-type tests, and other tests (See Table 2.1).

**Table 2.1 Summary of statistical methods for rare variant association testing**

|  |  |  |  |
| --- | --- | --- | --- |
| **Study Design** | **Type** | **Methods** | **References** |
| **Case-Control**  **Design** | **Burden type tests** | Cohort Allelic Sums Tests (CAST) | [[Morgenthaler and Thilly 2007](#_ENREF_64)] |
| Combined Multivariate Collapsing (CMC) | [[Li and Leal 2008](#_ENREF_51)] |
| Weighted Sum Statistic (WSS) | [[Madsen and Browning 2009](#_ENREF_56)] |
| Kernel Based Adaptive Cluster (KBAC) | [[Liu and Leal 2010](#_ENREF_52)] |
| Variable Threshold (VT) | [[Price, et al. 2010](#_ENREF_70)] |
| Burden test to analyze X-chromosome variants | [[Ma, et al. 2015](#_ENREF_55)] |
| **Variance component tests** | C-alpha test | [[Neale, et al. 2011](#_ENREF_65)] |
| Sequence Kernel Association Test (SKAT) | [[Wu, et al. 2011](#_ENREF_100)] |
| SKAT to analyze X-chromosome variants | [[Ma, et al. 2015](#_ENREF_55)] |
| **Optimal type tests** | SKAT-O | [[Lee, et al. 2012a](#_ENREF_49)] |
| Fisher’s hybrid statistics | [[Derkach, et al. 2013](#_ENREF_30)] |
| Mixed effects Score Test (MiST) | [[Sun, et al. 2013](#_ENREF_85)] |
| SKAT-O to analyze X-chromosome variants | [[Ma, et al. 2015](#_ENREF_55)] |
| **Other tests** | Replication Based Test (RBT) | [[Ionita-Laza, et al. 2011](#_ENREF_41)] |
| Variant Annotation, Analysis & Search Tool (VAAST) | [[Yandell, et al. 2011](#_ENREF_101)] |
| Exponential-Combination (EC) test | [[Chen, et al. 2012](#_ENREF_21)] |
| Optimal Combination of Single-variant Tests (OCST) | [[Sha and Zhang 2014](#_ENREF_78)] |
| **Family-based Design** | **Burden type tests** | Family-based functional Principal-Component Analysis (FPCA) | [[Zhu and Xiong 2012](#_ENREF_103)] |
| Pedigree-based Combined Multivariate and Collapsing (PedCMC) | [[Zhu and Xiong 2012](#_ENREF_103)] |
| Rare Variant Transmission Disequilibrium Test (RV-TDT) | [[He, et al. 2014](#_ENREF_35)] |
| PedCMC-Burden for the X chromosome | [[Schaid, et al. 2013](#_ENREF_77)] |
| **Variance component tests** | family-based SKAT (famSKAT) | [[Chen, et al. 2013](#_ENREF_20)] |
| PedCMC-Kernel for the X chromosome | [[Schaid, et al. 2013](#_ENREF_77)] |
| **Optimal type test** | Minimum *p*-value Optimized Nuisance parameter Score Test Extended to Relatives (MONSTER) | [[Jiang and McPeek 2014](#_ENREF_43)] |
| **Other test** | pedigree-VAAST (pVAAST) | [[Hu, et al. 2014](#_ENREF_38)] |

**2.2.1 Burden-type methods**

The burden-type test collapses information on multiple rare variants into a genetic burden score and tests for association between this score and a trait. Several burden type approaches such as cohort allelic sums tests (CAST) [[Morgenthaler and Thilly 2007](#_ENREF_64)], combined multivariate collapsing (CMC) [[Li and Leal 2008](#_ENREF_51)], weighted sum statistic (WSS) [[Madsen and Browning 2009](#_ENREF_56)], kernel-based adaptive cluster (KBAC) [[Liu and Leal 2010](#_ENREF_52)], and variable threshold (VT) [[Price, et al. 2010](#_ENREF_70)] have been proposed. In the family-based design, FPCA [[Zhu and Xiong 2012](#_ENREF_103)], PedCMC [[Zhu and Xiong 2012](#_ENREF_103)], and RV-TDT [[He, et al. 2014](#_ENREF_35)] have been proposed. For rare X-linked variant association analysis, extensions of Burden test [[Ma, et al. 2015](#_ENREF_55)] and PedCMC-Burden [[Schaid, et al. 2013](#_ENREF_77)] have been proposed in case-control design and family-based design, respectively.

In the CAST method [[Morgenthaler and Thilly 2007](#_ENREF_64)], the genetic burden score is given by

where *Gij* denotes the number of rare variants of subject *i* at variant *j* in a group of *k* genetic variants. *IA* is an indicator variable assuming the value of 1 when *A* is true. The association test involves chi-square test or Fisher’s exact test of a contingency table. The CAST method does not account for covariates, cannot be used with a continuous phenotype, and does not consider weighting of rare variants.

An extension of the CAST method is to consider a combination of rare variants and common variants in a CMC method [[Li and Leal 2008](#_ENREF_51)]. The CMC method collapses rare variants within MAF-based subgroups and evaluates the genetic effects of both collapsed rare variants and common variants using Hotelling’s T-test. The WSS method [[Madsen and Browning 2009](#_ENREF_56)] assumes that rarer variants have stronger effects. The genetic burden score of the WSS method is expressed as

where the weight, *wj*, is assumed to be 1/[MAF*j*(1-MAF*j*)]1/2. The sum of ranks of the genetic burden score in the case group is then used as a summary statistic to be compared with those in the control group using a permutation method.

The KBAC method [[Liu and Leal 2010](#_ENREF_52)] classifies rare variants into groups depending on the pattern of rare variants. The KBAC test statistic is

where and are the numbers of rare variants at variant *j* in cases and controls, respectively, with . The weight, *wj*, is determined by a hyper-geometric kernel:

The *p*-value of KBAC is calculated by a permutation method.

The VT method [[Price, et al. 2010](#_ENREF_70)] implies that the MAFs of causal rare variants may be different from those of non-causal rare variants. For a given threshold , the genetic burden score of the VT method is denoted by

The VT test statistic is

where *Z*(*t*) is a z-score of *Ci*, and the *p*-value is calculated by a permutation method.

In a family-based study, the FPCA [[Zhu and Xiong 2012](#_ENREF_103)] test statistic is

where and are the vector of averages of the functional principal-component scores in the case group and control group, respectively. *Dr* is defined as [*u*1, ..., *un*]T, a column vector of length *n*, where

*Dp* is the *n*×1 column vector that consists of 1s. is the kinship matrix. is defined as

where is a covariance between two functional principal-component scores *j* and *j'*. *T*FPCA follows a chi-square distribution with *k* degrees of freedom.

Other investigators [[Zhu and Xiong 2012](#_ENREF_103)] proposed the PedCMC method, which is an extension of the CMC method for unrelated samples to pedigree samples. PedCMC statistic is defined as

where and are the average of the indicator variables in the case group and control group, respectively. and are the average of the indicator variables for the genotype in case group and control group, respectively. The *k* variants are classified as *k*1 groups of rare variants and *k*2 common variant sites. is denoted by , and is defined as

*T*PedCMC follows a chi-square distribution with (*k*1 + *k*2) degrees of freedom.

The RV-TDT methods [[He, et al. 2014](#_ENREF_35)] are extensions of the TDT: they combine CMC, WSS, Burden of Rare Variants (BRV) [[Auer, et al. 2013](#_ENREF_8)], and VT method. For parent *i* with variant *j*, we define *cij* and *bij* as

For genetic region *k*, all events are expressed as and . Then, the TDT statistic is defined as

For the TDT-CMC method, *c* and *b* are given by *c* and *b* , where *n* is the number of trios. For the TDT-WSS method, *c* and *b* are expressed as *c* and *b* , where weight is the estimated standard deviation of the number of variants in the parental haplotypes. For TDT-BRV, *c* and *b* are given by *c*  and *b* . The TDT-VT can be calculated by means of either the TDT-CMC or TDT-BRV.

Some investigators [[Ma, et al. 2015](#_ENREF_55)] proposed burden test to analyze rare X-linked variant. The burden score statistic is

where is the score statistic, and is the estimated mean of *yi* under the null hypothesis. For females, let *Gij* = (0, 1, 2) be the vector of genotypes. For males, two coding schemes are considered: *Gij* = (0, 2) when assuming XCI and *Gij* = (0, 1) when assuming E-XCI.

In a family-based study, PedCMC-Burden for the X chromosome have been proposed [[Schaid, et al. 2013](#_ENREF_77)]. The statistic for the type of burden test is

The matrix *VS* has elements Cov(*Si*, *Sj*) = *αij*Ω*ijcs* where

and

Let denote the correlation of genetic scores between *k*1 and *k*2, and Ω*ij* is the X chromosome kinship coefficients for subjects *i* and *j*.

**2.2.2 Variance component-type methods**

Variance component-type approaches within a random effect model such as a C-alpha test [[Neale, et al. 2011](#_ENREF_65)] and SKAT [[Wu, et al. 2011](#_ENREF_100)] analysis for an association by evaluating the distribution of genetic effects in a group of rare variants. For the family-based design, family-based SKAT (famSKAT) has been proposed [[Chen, et al. 2013](#_ENREF_20)]. For rare X-linked variant association analysis, extensions of SKAT [[Ma, et al. 2015](#_ENREF_55)] and PedCMC-Kernel [[Schaid, et al. 2013](#_ENREF_77)] have been proposed in case-control design and family-based design, respectively.

The C-alpha [[Neale, et al. 2011](#_ENREF_65)] statistic is

where is the number of rare variants at variant *j* in cases, and *nj* is the number of rare variants at *j*-th variants; *p*0 is denoted by . The *p*-value of C-alpha is calculated using a permutation procedure. The C-alpha method is robust in the presence of deleterious and protective variants.

The C-alpha test is a special case of the SKAT method [[Wu, et al. 2011](#_ENREF_100)]. The SKAT is a weighted sum of single variant score statistics. The SKAT statistic is

where the weight, *wj*, is assumed to be a function of MAF via the beta density function Beta(MAF*j*, 1, 25). *Sj* is a single variant score statistic:

where is the estimated mean of *yi* under the null hypothesis. *QSKAT* asymptotically follows a mixture of chi-square distribution under the null hypothesis. The *p*-values can be calculated by the Davies method [[Davies 1980a](#_ENREF_27)].

Some researchers [[Chen, et al. 2013](#_ENREF_20)] proposed the FamSKAT method, which is an extension of the SKAT method for unrelated samples to pedigree samples. The famSKAT test statistic is

where Σ is denoted by *h*2+(1- *h*2)I. *h*2 is the heritability of the trait. The *p*-value of *QfamSKAT* is calculated using a moment matching method [[Liu, et al. 2009](#_ENREF_53)].

Another research group [[Ma, et al. 2015](#_ENREF_55)] proposed SKAT to analyze rare X-linked variant. The SKAT score statistic is

and follows a mixture of chi-square distributions.

In a family-based study, PedCMC-Kernel for the X chromosome have been proposed [[Schaid, et al. 2013](#_ENREF_77)]. The quadratic kernel statistic can be expressed as

The distribution of Q follows as scaled chi-square distribution, with scale and degrees of freedom estimated by the first two moment. The scale is estimated as *δ* = *Var*(Q)/[2*E*(Q)], and the degree of freedom as *d* = 2*E*(Q)2/*Var*(Q). The *p*-value of PedCMC-Kernel is computed by assuming *Qscaled* = Q/*δ* ~ .

**2.2.3 Optimal-type methods**

Optimal-type approaches such as SKAT-O [[Lee, et al. 2012a](#_ENREF_49)], Fisher’s hybrid statistics [[Derkach, et al. 2013](#_ENREF_30)], and Mixed effects Score Test (MiST) [[Sun, et al. 2013](#_ENREF_85)] have been proposed recently. For the family-based design, the minimum *p*-value optimized nuisance parameter score test extended to relatives (MONSTER) was proposed [[Jiang and McPeek 2014](#_ENREF_43)]. For rare X-linked variant association analysis, an extension of SKAT-O [[Ma, et al. 2015](#_ENREF_55)] has been proposed in case-control design.

The SKAT-O method [[Lee, et al. 2012a](#_ENREF_49)] is a linear combination of SKAT and burden test statistics. The SKAT-O test statistic takes the form

The SKAT-O test is reduced to the SKAT when = 0 and to the burden test when = 1. The *p*-value assumes the smallest *p*-value across the values of and can be obtained with the mixture of chi-square distribution with a single degree of freedom.

Another approach is to use Fisher’s method of combining *p*-values from SKAT and burden statistics [[Derkach, et al. 2013](#_ENREF_30)]. The Fisher statistic is defined as

The *p*-value of *TFisher* follows a chi-square distribution with four degrees of freedom.

Some investigators [[Sun, et al. 2013](#_ENREF_85)] proposed the MiST method, which is modified SKAT test statistic to make it independent from the burden test statistic and derived the asymptotic *p*-value of the Fisher method.

Another research group [[Jiang and McPeek 2014](#_ENREF_43)] proposed the MONSTER method, which is an extension of SKAT-O method for unrelated samples to pedigree samples. The MONSTER test statistic is a convex combination of famSKAT and famBT [[Chen, et al. 2013](#_ENREF_20)]. It can be written as

Including the parameter allows MONSTER to balance between two statistics in order to achieve robustness for a wide range of possible genetic architectures of the trait.

Another investigators [[Ma, et al. 2015](#_ENREF_55)] proposed SKAT-O to analyze rare X-linked variant. The SKAT-O statistic is a weighted average of *QBurden* and *QSKAT*. We perform a grid search to estimate the optimal *ρ*, and select *ρ* parameter such that the *Qρ* is maximized.

**2.2.4 Other methods**

Many other methods such as Replication based test (RBT) [[Ionita-Laza, et al. 2011](#_ENREF_41)], Variant Annotation, Analysis & Search Tool (VAAST) [[Yandell, et al. 2011](#_ENREF_101)], Exponential-Combination (EC) test [[Chen, et al. 2012](#_ENREF_21)], and Optimal Combination of Single-variant Test (OCST) [[Sha and Zhang 2014](#_ENREF_78)] have been proposed. For the family-based design, pedigree-VAAST (pVAAST) [[Hu, et al. 2014](#_ENREF_38)] has been proposed recently.

The RBT [[Ionita-Laza, et al. 2011](#_ENREF_41)] statistic can be written as:

where *Nr* is an upper threshold on the number of occurrences of a variant in controls, and is the size of group . The RBT method is based on a weighted-sum statistic, but that has advantage of being less sensitive to the presence of both risk and protective variants.

Some investigators [[Ionita-Laza, et al. 2011](#_ENREF_41)] proposed VAAST method to achieve robust power in the presence of both protective and harmful variants. The VAAST combines variant frequency data with Amino Acid Substitution (AAS) effect information on a feature-by-features basis using the likelihood ratio. The likelihood ratio, *λ*, is equal to:

where *hj* is the proportion of the type of amino acid change in the population background, and *aj* is the proportion of the type of amino acid change among all disease-causing mutations in OMIM.

The EC test [[Chen, et al. 2012](#_ENREF_21)] test statistic is

where is the weight on the linear scale for the individual variant statistic *Zj*, and is the weight on exponential scale. Since the null distribution of *QEC* is unknown, the *p*-value is calculated by a permutation method.

Some researchers proposed [[Sha and Zhang 2014](#_ENREF_78)] an OCST by combining information from the tests of the three classes. The OCST is defined as

where , , and denote the *p*-values of , , and , respectively. The three test classes are ‘only risk variants’, ‘both risk and protective variants’, and ‘only protective variants’.

In a family-based study, pVAAST [[Hu, et al. 2014](#_ENREF_38)] combines the existing variant prioritization and case-control association features in VAAST with a new linkage analysis method. pVAAST support a variety of simulated and real data sets involving dominant, recessive, and *de novo* inheritance models. pVAAST CLRT (CLRTp) score can be written as:

where *LODi* is the lod score for the *i*-th family and *c* = 2ⅹln(10). The statistical significance is calculated by using a combination of permutation and gene-drop simulation to account for both the family structure and the observed pattern of variation in cases and controls.

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**Chapter 3**

**Family-based rare variant association test**

**3.1 Introduction**

In this chapter, we propose a *FA*mily-based *R*are *V*ariant *A*ssociation *T*est (***FARVAT***). We provide a burden test and a variance component test for extended families, and these approaches are extended to the SKAT-O-type statistic. The proposed method assumes that families are ascertained based on the disease status of family members, and minor allele frequencies (MAFs) between affected and unaffected individuals are compared. MAFs for each rare variant are estimated with the best linear unbiased estimators [[McPeek, et al. 2004](#_ENREF_62)]. *FARVAT* is implemented with C++ and is computationally efficient for the analysis of rare variants with extended families. With extensive simulations, we compared the proposed methods with existing methods [[He, et al. 2014](#_ENREF_35); [Zhu and Xiong 2012](#_ENREF_103)], and results showed that the proposed methods were the most efficient in the considered scenarios. Application of the proposed method to schizophrenia and GAW17 illustrated its practical value in real analyses.

**3.2 Methods**

**3.2.1 Notations and the disease model**

We assumed that there are *n* families and *ni* individuals in family *i*, and the total sample size was denoted by *N* = . We assumed that genotype data for *m* rare variant loci were available. We let *yij* and *xijk* be the phenotype and genotype count of an individual *j* in a family *i* for rare variant *k*. If we denoted the disease prevalence by *q*, *yij* was coded as 1 for affected individuals, *q* for individuals with missing phenotype, and 0 for unaffected individuals. If genotype frequencies of affected and unaffected individuals are compared to detect genetic associations, the statistical efficiency can be improved by modifying the phenotype [[Lange and Laird 2002](#_ENREF_47); [Thornton and McPeek 2007](#_ENREF_87)], and we therefore introduced the so-called offset *μij* to set *tij* = *yij* – *μij*. The disease prevalence *q* has often been used as an offset, and if the disease prevalences in males and females are different, the offset should be chosen separately　[[Thornton, et al. 2012](#_ENREF_89)]. For randomly selected families, the best linear unbiased predictor (BLUP) from the linear mixed model is known to be an efficient choice for *μij* [[Won and Lange 2013](#_ENREF_96)]. With this choice of offset, the effects of covariates can properly be adjusted. Then, if we set the column vectors that comprise *xijk* and *tij* for individuals in a family *i* by ***X****ik* and ***T****i* respectively, we denoted



The variance-covariance matrix of **X***k* for extended families could be calculated based on the kinship coefficient. If we let *ij,i'j´* be the kinship coefficient between individuals *j* in a family *i* and *j'* in a family *i'*, and let *dij* be the inbreeding coefficient for an individual *j* in family *i*, **Φ*i*** was denoted by



and we let



If we denote the covariance between *xijk* and *xijk*' by *σkk'*, we have cov(**X***k,* **X***k*') = *σkk*'**Φ,** and *σkk*' is estimated with the empirical covariance.

In the presence of population substructure, **Φ** should be empirically estimated with common variants available at the genome-wide level instead of using the kinship coefficient between individuals [[Thornton and McPeek 2010](#_ENREF_88)]. We assume that there are *A* common variants and the coded genotype for common variant is denoted by *x'ija* for individual *j* in family *i* at common variant *a*. If we let *pa* be the minor allele frequency of common variant *a*, *ij,i'j´* for **Φ** [[Thornton and McPeek 2010](#_ENREF_88)] can be estimated by



**3.2.2 Family-based rare variant association test**

For ascertained samples, the disease status can be assumed to be fixed, and the genotype frequencies between affected and unaffected individuals are usually compared. We let **1***w* be the *w*×1 column vector that consisted of 1 and **I***w* be the *w*×*w* identity matrix. If we denoted an MAF of rare variant *k* in unaffected individuals by *pk*, we assumed [[Thornton and McPeek 2007](#_ENREF_87)] that for a constant *γk*,



where 0 < 2*pk* + *γk* < 1. If we let **V** be the working variance-covariance matrix, the score for the quasi-likelihood [[Thornton and McPeek 2007](#_ENREF_87)] became



Recently we showed that the approximate optimal efficiency for the analysis of common variants is achieved with **V** = **I***N* [[Won and Lange 2013](#_ENREF_96)]. For the choice of the offset in **T**, BLUP and *q* have been suggested for randomly selected samples and ascertained samples, respectively [[Thornton and McPeek 2007](#_ENREF_87); [Won and Elston 2008](#_ENREF_95)]. *E*(**X**) can be estimated with the following best linear unbiased estimator [[McPeek, et al. 2004](#_ENREF_62)]:



Therefore, our score based on the quasi-likelihood became



If we let

 and 

we have



and thus the variance-covariance matrix of the score was



Therefore, we have



For rare variant association analysis, the collapsed amount of either rare alleles or variance inflation between affected and unaffected individuals has been compared [[Li and Leal 2008](#_ENREF_51); [Neale, et al. 2011](#_ENREF_65); [Price, et al. 2010](#_ENREF_70); [Wu, et al. 2011](#_ENREF_100)]. If we let the weight for variant *k* be *wk*, the null hypothesis for the former was



and that for the latter was



For the choice of *wk*, *wk* = 1 or [*pk*(1 – *pk*)]-1/2 are often utilized. If we denoted the *m*×*m* diagonal matrix, which consists of *wk*, by **W**, the score test for the burden-type test was



and the score test for the C-alpha-type test was



Both score tests for rare variant analysis could be generalized to



and for a given constant *c*∈[0,1], *Sc* was denoted by



We denoted eigenvalues for **Σ**1/2**WWΣ**1/2 by *λk*. If we let ’s be independent chi-square distributions with a single degree of freedom, we have



and



The *p*-values for *S*1 and *S*0 were respectively denoted by ***FARVATb*** and ***FARVATc***, and in particular, ***FARVATc*** can be calculated with the Davies method [[Davies 1980b](#_ENREF_28)] or the method described by Liu et al [[Lee, et al. 2012b](#_ENREF_50); [Liu, et al. 2009](#_ENREF_53)].

**3.2.3 Extension to the optimal type statistic**

The burden test is known to be efficient if all rare variants have either deleterious or protective effects on disease; otherwise, the C-alpha test is more efficient [[Neale, et al. 2011](#_ENREF_65)]. A balanced approach for both scenarios can be achieved by the SKAT-O type statistic [[Lee, et al. 2012b](#_ENREF_50)]. For *c*0 = 0< *c*1 < …< *cL*=1, we denoted the observed value for by , and their corresponding *p*-values were denoted by . Furthermore, we denoted the (1 – *p*)*th* quantile for by . If we let



our final *p*-value was obtained by



The numerical calculation of the final *p*-value for the independent samples was derived by Lee et al [[Lee, et al. 2012a](#_ENREF_49); [Lee, et al. 2012b](#_ENREF_50)], and our final *p*-values, denoted by *FARVATo* were calculated based on their approach with some modification.

If we let **Z**=**Σ**1/2**W** and -1, the projection matrix onto a space spanned by becomes -1. If we let

,

**u**~ *MVN*(**0**, **I***m*) and becomes



As was shown by Lee et al[[Lee, et al. 2012a](#_ENREF_49); [Lee, et al. 2012b](#_ENREF_50)], if we let



we have



where , , and are mutually independent. Therefore,



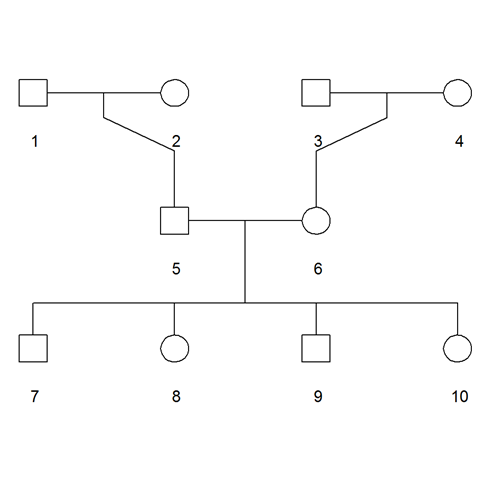
and the following conditional probability can be numerically calculated, as was suggested by Lee et al[[Lee, et al. 2012a](#_ENREF_49); [Lee, et al. 2012b](#_ENREF_50)]:

**3.3 Simulation study**

**3.3.1 The simulation model**

In our simulation studies, we considered extended families that consisted of 10 individuals, and extended over three generations (see Figure 3.1). To generate the genotypes for extended families, haplotypes were simulated with COSI software [[Schaffner, et al. 2005](#_ENREF_76)], based on the coalescent model, and obtained haplotypes were used for founders’ genotypes. In the coalescent model for COSI, we assumed that the mutation rate was 1.5×10-8, and 5,000 haplotypes with 50,000 base pairs were generated. *m* rare variants in a region or all rare variants for which MAFs were less than 0.01 were randomly selected, and pairs of haplotypes were randomly chosen with replacement to derive the founders’ genotypes. Under the assumption of no recombination, a haplotype from each founder was randomly selected to construct non-founders’ genotypes under the assumption of Mendelian transmission. The disease status for each individual was generated with the liability threshold model. The underlying liabilities were defined by summing the phenotypic mean, polygenic effect, common environmental effect, main genetic effect, and random error.

**Figure 3.1 Extended family used in our simulation studies**



The phenotypic mean *β*0 was assumed to be 0, and the polygenic effect, common environmental effect, and random errors were generated from the normal distribution with mean 0. Variances for the polygenic effect, common environmental effect, and random errors were denoted by *σg*2, *σc*2, and *σe*2, respectively, and were assumed to be 1. In this setting, the heritability was 1/3. The polygenic effect was independently generated from *N*(0, *σg*2) for founders, and the average of maternal and paternal polygenic effects was combined with values independently sampled from *N*(0, 0.5*σg*2) for the polygenic effects of offspring. Common environmental effects were assumed to be the same for all individuals in each family. We assumed there were *m* rare variants, and their main genetic effects for each individual were the product of *βk* and the number of disease alleles. If we let *ha*2 be the relative proportion of variance explained by rare variants, *βk* were sampled from *U*(1.0, *v*) and *v* was calculated by



Under the null hypothesis, *ha*2 was set to 0, and *βk* became 0. Once the underlying liabilities of main genetic effects, polygenic effects, common environmental effects, and random errors were generated, they were transformed to being affected if they were larger than the threshold; otherwise, they were considered as unaffected. The threshold was chosen to preserve the assumed prevalence, and the disease prevalence was assumed to be 0.12. Families with more than two affected grandchildren were utilized for simulation studies, and sampling was repeated until the given numbers of these families were obtained.

Furthermore, the robustness of the proposed statistic under the presence of the population substructure was evaluated with simulated data. We assumed that there were two subpopulations, and each founder was assigned to the one of the two subpopulations with 50% probability. Means of liabilities for phenotypes in both populations differed by 0.2. The allele frequencies for each marker in the two subpopulations were generated by the Balding-Nichols model [[Balding and Nichols 1995](#_ENREF_9)]. That is, for marker *k*, the allele frequency, *pk*, in an ancestral population was generated from *U*(0.0001, 0.01), and the marker allele frequencies for the two subpopulations were independently sampled from the beta distributions (*pk*(1 – *FST*)/*FST*, (1– *pk*)(1 – *FST*)/*FST*). A survey reported *FST* estimates with a median of 0.008 and a 90th percentile of 0.028 among Europeans; the corresponding values were 0.027 and 0.14, respectively, among Africans, and 0.043 and 0.12, respectively, among Asian [[Cavalli-Sforza and Piazza 1993](#_ENREF_18)]. The values for Wright’s *FST* were assumed to be 0.005, 0.01, and 0.05.

**3.3.2 Evaluation with simulated data under the absence of population substructure**

The statistical validity of *FARVATb*, *FARVATc*, and *FARVATo* was evaluated under the absence of population substructure, and the results were compared with PedCMC, FPCA [[Zhu and Xiong 2012](#_ENREF_103)], and RV-TDT methods [[He, et al. 2014](#_ENREF_35)]. RV-TDT methods consist of BRV.T01, BRV.Hapo.T01, CMC.T01, CMC.Hapo.T01, VT.BRV.Hapo, VT.CMC.Hapo and WSS.Hapo. We generated 50 and 100 extended families in each replicate, and empirical type-1 error estimates at the 0.05 and 0.01 significance levels were calculated with 50,000 replicates. For the proposed methods, 1 and [*pk*(1 – *pk*)]-1/2 were considered for *wk*, and the kinship coefficients were used to build the correlation matrix **Ф**. Rare variants for which MAFs were less than 0.01 were considered for all statistics. Tables 3.1 and 3.2, 30 and 100 rare variants were randomly selected, and in Table 3.3, all rare variants in the 30 kb genetic region were considered. These results showed that the empirical type-1 error estimates for *FARVATb*, *FARVATc*, and *FARVATo* preserved the nominal significance levels. However, CMC.T01, BRV.Hapo.T01, CMC.Hapo.T01, VT.BRV.Hapo, VT.CMC.Hapo, WSS.Hapo, and FPCA were usually conservative, and BRV.T01 and PedCMC seemed to be liberal. For PedCMC, genotype scores of individuals with more than or equal to a single rare allele were considered as 1; otherwise they were 0.

**Table 3.1 Empirical type-1 error estimates for 30 rare variants.** The empirical type-1 error estimates were calculated with 50,000 replicates at the 0.05 and 0.01 significance levels. MAFs for all variants are assumed to be less than 0.01, and 30 rare variants are randomly selected. The numbers of families are denoted by *n*.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***n*** | **statistics** | **weight** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| 50 | BRV.T01 | 1 | 0.050 ± 0.002 | 0.011 ± 0.001 |
| CMC.T01 | 1 | 0.038 ± 0.002 | 0.006 ± 0.001 |
| BRV.Hapo.T01 | 1 | 0.033 ± 0.002 | 0.005 ± 0.001 |
| CMC.Hapo.T01 | 1 | 0.033 ± 0.002 | 0.005 ± 0.001 |
| VT.BRV.Hapo | 1 | 0.036 ± 0.002 | 0.006 ± 0.001 |
| VT.CMC.Hapo | 1 | 0.034 ± 0.002 | 0.006 ± 0.001 |
| WSS.Hapo | 1 | 0.022 ± 0.001 | 0.004 ± 0.001 |
| PedCMC | 1 | 0.051 ± 0.002 | 0.009 ± 0.001 |
| FPCA | 1 | 0.033 ± 0.002 | 0.006 ± 0.001 |
| *FARVATb* | 1 | 0.055 ± 0.002 | 0.011 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.055 ± 0.002 | 0.010 ± 0.001 |
| *FARVATc* | 1 | 0.037 ± 0.002 | 0.005 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.041 ± 0.002 | 0.006 ± 0.001 |
| *FARVATo* | 1 | 0.043 ± 0.002 | 0.007 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.043 ± 0.002 | 0.008 ± 0.001 |
| 100 | BRV.T01 | 1 | 0.049 ± 0.002 | 0.011 ± 0.001 |
| CMC.T01 | 1 | 0.037 ± 0.002 | 0.006 ± 0.001 |
| BRV.Hapo.T01 | 1 | 0.030 ± 0.001 | 0.005 ± 0.001 |
| CMC.Hapo.T01 | 1 | 0.030 ± 0.001 | 0.005 ± 0.001 |
| VT.BRV.Hapo | 1 | 0.034 ± 0.002 | 0.006 ± 0.001 |
| VT.CMC.Hapo | 1 | 0.033 ± 0.002 | 0.005 ± 0.001 |
| WSS.Hapo | 1 | 0.017 ± 0.001 | 0.003 ± 0.000 |
| PedCMC | 1 | 0.050 ± 0.002 | 0.010 ± 0.001 |
| FPCA | 1 | 0.030 ± 0.001 | 0.006 ± 0.001 |
| *FARVATb* | 1 | 0.051 ± 0.002 | 0.010 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.051 ± 0.002 | 0.010 ± 0.001 |
| *FARVATc* | 1 | 0.039 ± 0.002 | 0.006 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.044 ± 0.002 | 0.007 ± 0.001 |
| *FARVATo* | 1 | 0.043 ± 0.002 | 0.008 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.044 ± 0.002 | 0.008 ± 0.001 |

**Table 3.2 Empirical type-1 error estimates for 100 rare variants.** The empirical type-1 error estimates were calculated with 50,000 replicates at the 0.05 and 0.01 significance levels. MAFs for all variants are assumed to be less than 0.01, and 100 rare variants are randomly selected. The numbers of families are denoted by *n*.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***n*** | **statistics** | **weight** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| 50 | BRV.T01 | 1 | 0.060 ± 0.002 | 0.017 ± 0.0011 |
| CMC.T01 | 1 | 0.020 ± 0.001 | 0.003 ± 0.0005 |
| BRV.Hapo.T01 | 1 | 0.014 ± 0.001 | 0.002 ± 0.0004 |
| CMC.Hapo.T01 | 1 | 0.010 ± 0.001 | 0.001 ± 0.0003 |
| VT.BRV.Hapo | 1 | 0.019 ± 0.001 | 0.003 ± 0.0005 |
| VT.CMC.Hapo | 1 | 0.012 ± 0.001 | 0.002 ± 0.0004 |
| WSS.Hapo | 1 | 0.007 ± 0.001 | 0.001 ± 0.0003 |
| PedCMC | 1 | 0.052 ± 0.002 | 0.010 ± 0.001 |
| FPCA | 1 | 0.028 ± 0.001 | 0.005 ± 0.001 |
| *FARVATb* | 1 | 0.053 ± 0.002 | 0.011 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.054 ± 0.002 | 0.011 ± 0.001 |
| *FARVATc* | 1 | 0.032 ± 0.002 | 0.004 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.037 ± 0.002 | 0.006 ± 0.001 |
| *FARVATo* | 1 | 0.042 ± 0.002 | 0.007 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.040 ± 0.002 | 0.008 ± 0.001 |
| 100 | BRV.T01 | 1 | 0.051 ± 0.002 | 0.015 ± 0.0011 |
| CMC.T01 | 1 | 0.016 ± 0.001 | 0.002 ± 0.0004 |
| BRV.Hapo.T01 | 1 | 0.007 ± 0.001 | 0.001 ± 0.0003 |
| CMC.Hapo.T01 | 1 | 0.005 ± 0.001 | 0.001 ± 0.0002 |
| VT.BRV.Hapo | 1 | 0.014 ± 0.001 | 0.002 ± 0.0004 |
| VT.CMC.Hapo | 1 | 0.009 ± 0.001 | 0.002 ± 0.0003 |
| WSS.Hapo | 1 | 0.003 ± 0.000 | 0.000 ± 0.0002 |
| PedCMC | 1 | 0.049 ± 0.002 | 0.010 ± 0.001 |
| FPCA | 1 | 0.027 ± 0.001 | 0.005 ± 0.001 |
| *FARVATb* | 1 | 0.053 ± 0.002 | 0.011 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.051 ± 0.002 | 0.011 ± 0.001 |
| *FARVATc* | 1 | 0.036 ± 0.002 | 0.005 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.043 ± 0.002 | 0.007 ± 0.001 |
| *FARVATo* | 1 | 0.044 ± 0.002 | 0.008 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.043 ± 0.002 | 0.009 ± 0.001 |

**Table 3.3 Empirical type-1 error estimates in the 30 kb genetic region.** The empirical type-1 error estimates were calculated with 50,000 replicates at the 0.05 and 0.01 significance levels. All rare variants of which MAFs are less than 0.01 are used to calculate each statistic. The numbers of families are denoted by *n*.

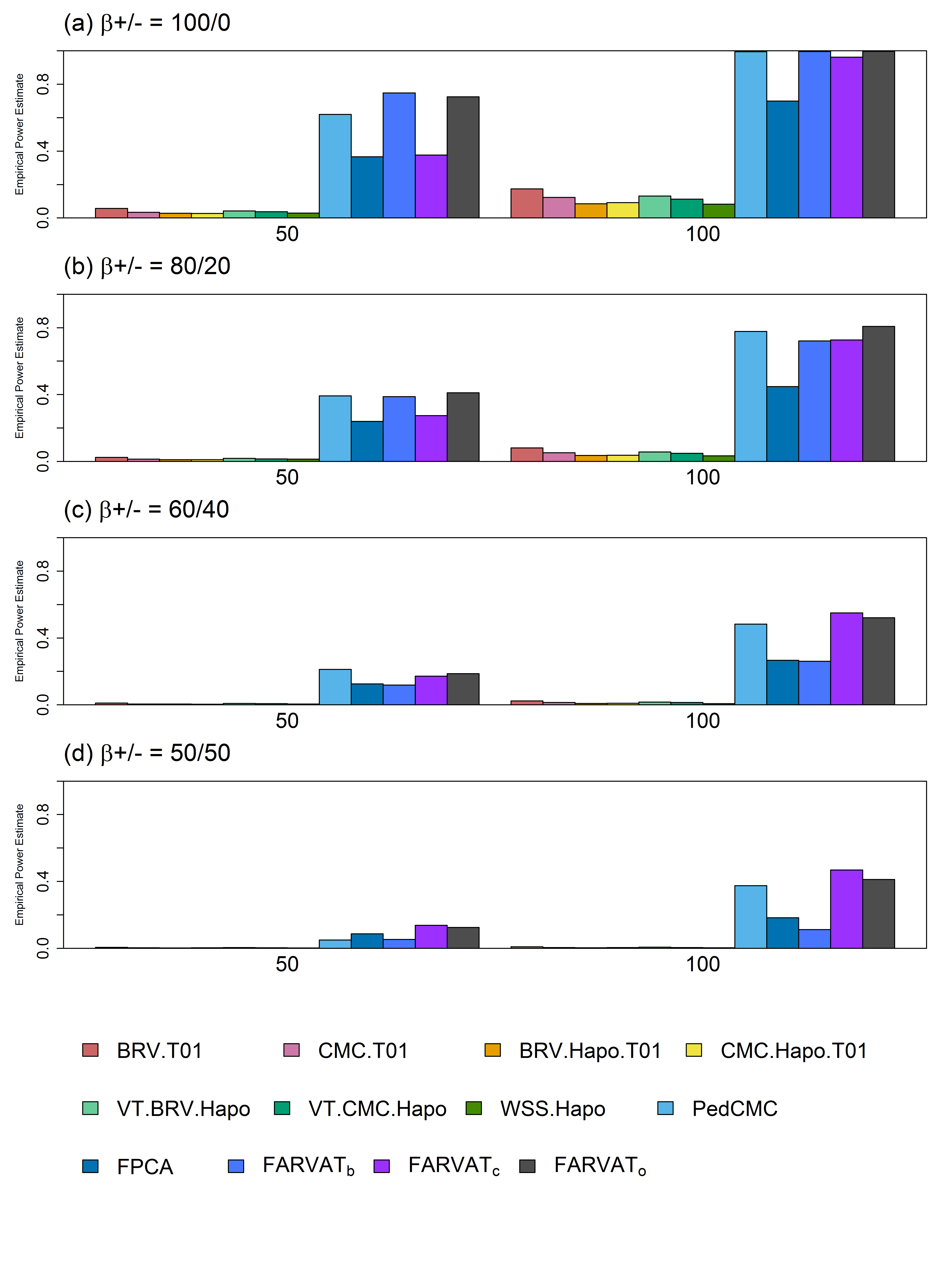
|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***n*** | **statistics** | **weight** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| 50 | BRV.T01 | 1 | 0.102 ± 0.003 | 0.031±0.002 |
| CMC.T01 | 1 | 0.071 ± 0.002 | 0.014 ± 0.001 |
| BRV.Hapo.T01 | 1 | 0.045 ± 0.002 | 0.009 ± 0.001 |
| CMC.Hapo.T01 | 1 | 0.043 ± 0.002 | 0.008 ± 0.001 |
| VT.BRV.Hapo | 1 | 0.048 ± 0.002 | 0.009 ± 0.001 |
| VT.CMC.Hapo | 1 | 0.045 ± 0.002 | 0.009 ± 0.001 |
| WSS.Hapo | 1 | 0.025 ± 0.001 | 0.004 ± 0.001 |
| PedCMC | 1 | 0.088 ± 0.002 | 0.021 ± 0.001 |
| FPCA | 1 | 0.055 ± 0.002 | 0.012 ± 0.001 |
| *FARVATb* | 1 | 0.052 ± 0.002 | 0.011 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.052 ± 0.002 | 0.010 ± 0.001 |
| *FARVATc* | 1 | 0.046 ± 0.002 | 0.009 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.049 ± 0.002 | 0.011 ± 0.001 |
| *FARVATo* | 1 | 0.056 ± 0.002 | 0.012 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.050 ± 0.002 | 0.011 ± 0.001 |
| 100 | BRV.T01 | 1 | 0.090 ± 0.003 | 0.027 ± 0.0014 |
| CMC.T01 | 1 | 0.063 ± 0.002 | 0.013 ± 0.0010 |
| BRV.Hapo.T01 | 1 | 0.039 ± 0.002 | 0.007 ± 0.0008 |
| CMC.Hapo.T01 | 1 | 0.037 ± 0.002 | 0.007 ± 0.0007 |
| VT.BRV.Hapo | 1 | 0.043 ± 0.002 | 0.008 ± 0.0008 |
| VT.CMC.Hapo | 1 | 0.040 ± 0.002 | 0.007 ± 0.0007 |
| WSS.Hapo | 1 | 0.021 ± 0.001 | 0.003 ± 0.0005 |
| PedCMC | 1 | 0.064 ± 0.002 | 0.014 ± 0.001 |
| FPCA | 1 | 0.052 ± 0.002 | 0.012 ± 0.001 |
| *FARVATb* | 1 | 0.049 ± 0.02 | 0.009 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.052 ± 0.02 | 0.010 ± 0.001 |
| *FARVATc* | 1 | 0.049 ± 0.02 | 0.009 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.050 ± 0.02 | 0.010 ± 0.001 |
| *FARVATo* | 1 | 0.054 ± 0.02 | 0.011 ± 0.001 |
| [*pk*(1 – *pk*)]-1/2 | 0.052 ± 0.02 | 0.011 ± 0.001 |

If the large number of rare variants is collapsed, its convergence to the chi-square distribution requires very large sample sizes, and genotype scores for all individuals can be 1 in extreme scenarios. Therefore, we could conclude that PedCMC may not be a good choice when the number of rare variants in a gene is very large.

The statistical efficiency of *FARVATb*, *FARVATc*, and *FARVATo* was evaluated with the simulated data, and results were compared with results from PedCMC, FPCA, and RV-TDT methods [[He, et al. 2014](#_ENREF_35); [Zhu and Xiong 2012](#_ENREF_103)]. We assumed that the relative proportion of variances explained by rare variants *ha*2 was 0.05. In each replicate, we assumed that all rare variants had either deleterious or protective effects on disease, and the proportions of rare variants with deleterious effects were assumed to be 1, 0.8, 0.6, and 0.5. The numbers of extended families were assumed to be 50 and 100. MAFs for all rare variants were assumed to be less than 0.01. Thirty rare variants in Figure 3.2 and 100 rare variants in Figure 3.3 were selected, and in Figure 3.4, all rare variants within 30 kbp from the generated 1 Mbp chromosomes were selected. For the proposed methods, each rare variant was weighed by [*pk*(1 – *pk*)]-1/2 for **W**. The results in Figures 3.2 – 3.4 showed that *FARVATb* was the most efficient if all rare variants had deleterious effects, but the gap between *FARVATb* and the second efficient method *FARVATo* was small. However, the power loss of *FARVATb* was substantial when rare variants with deleterious and protective variants were present in a gene.

If the proportion of rare variants with deleterious effects was 0.5, *FARVATc* was the most efficient, followed by *FARVATo*. PedCMC and FPCA were usually more efficient than RV-TDT methods, but these approaches were not efficient compared to *FARVATo* in the considered scenarios. Therefore, even though the most powerful statistic depended on the disease model, we concluded that *FARVATo* was generally efficient choice under the various disease models.

**Figure 3.2** **Empirical power estimates when the number of rare variants in a gene is 30.** *ha*2 was assumed to be 0.05 and the empirical power estimates were calculated with 5,000 replicates at the 0.001 significance levels. MAFs for all variants were assumed to be less than 0.01, and 30 rare variants were randomly selected. Each rare variant had either deleterious or protective effect on disease, and proportions of rare variants with deleterious effect were 1, 0.8, 0.6 and 0.5. The numbers of families were assumed to be 50 and 100.



**Figure 3.3 Empirical power estimates when the number of rare variants in a gene is 100.** *ha*2 was assumed to be 0.05 and the empirical power estimates were calculated with 5,000 replicates at the 0.001 significance levels. MAFs for all variants were assumed to be less than 0.01, and 100 rare variants were randomly selected. Each rare variant had either deleterious or protective effect on disease, and proportions of rare variants with deleterious effect were 1, 0.8, 0.6 and 0.5. The numbers of families were assumed to be 50 and 100.

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**Figure 3.4 Empirical power estimates when all rare variants in a gene are considered.** *ha*2 was assumed to be 0.05 and the empirical power estimates were calculated with 5,000 replicates at the 0.001 significance levels. All rare variants of which MAFs are less than 0.01 are used to calculate each statistic. Each rare variant had either deleterious or protective effect on disease, and proportions of rare variants with deleterious effect were 1, 0.8, 0.6 and 0.5. The numbers of families were assumed to be 50 and 100.

****

**3.3.3 Evaluation with simulated data under the presence of population substructure**

We assumed that there were two subpopulations, and founders in each family were randomly selected from two different population substructures. Two subpopulations were simulated with the Balding-Nichols model [[Balding and Nichols 1995](#_ENREF_9)], and *FST* values were assumed to be 0.005, 0.01, and 0.05. To provide robustness against the population substructure, **Φ** was estimated by 20,000 common variants for which MAFs were larger than 0.05 [[Thornton and McPeek 2010](#_ENREF_88)], and this was incorporated to the proposed methods. It should be noted that the proposed method was an extension of the *MQLS* statistic [[Thornton and McPeek 2007](#_ENREF_87)] to rare variant association analysis, and that *MQLS* becomes robust under the presence of population substructure if **Φ** was estimated with large-scale genomic data [[Thornton and McPeek 2010](#_ENREF_88)].

In Table 3.4, we calculated empirical type-1 error estimates from 50,000 replicates at the 0.05 and 0.01 significance levels. Our results showed that the empirical type-1 error estimates for *FARVATb* and *FARVATo* preserved the nominal significance levels for the considered *FST* values. However, FPCA, PedCMC, and RV-TDT were usually conservative, and the level of conservativeness was proportional to the amount of *FST*. *FARVATc* was also conservative, but was less sensitive than FPCA, PedCMC, and RV-TDT. Furthermore, we evaluated the statistical efficiency under the presence of population substructure with the simulated data. We assumed that *ha*2 was 0.05 and the empirical power estimates were calculated with 5,000 replicates at the 0.001 significance level. As shown in Figure 3.5, the most efficient approach differed depending on the disease model. For instance, *FARVATb* was the most efficient when all rare variants had deleterious effects, and *FARVATc* was the most efficient when half of the rare variants had deleterious effects. *FARVATo* was usually the second most efficient; however, the power gap between *FARVATo* and the most efficient method was always small. As a result, we concluded that *FARVATo* was generally a robust and efficient choice for various disease models under the presence of population substructure.

**Table 3.4 Empirical type-1 error estimates under the presence of population substructure.** The empirical type-1 error estimates were calculated with 50,000 replicates at the 0.05 and 0.01 significance levels under the presence of population substructure. *FST* was assumed to be 0.005, 0.01 and 0.05. MAFs for all variants are assumed to be less than 0.01, and 100 rare variants are randomly selected. The number of families in each replicate is assumed to be 100.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***FST*** | **statistics** | **weight** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| 0.005 | BRV.T01 | 1 | 0.036 ± 0.002 | 0.006 ± 0.0007 |
| CMC.T01 | 1 | 0.035 ± 0.002 | 0.005 ± 0.0006 |
| BRV.Hapo.T01 | 1 | 0.018 ± 0.001 | 0.003 ± 0.0004 |
| CMC.Hapo.T01 | 1 | 0.021 ± 0.001 | 0.003 ± 0.0005 |
| VT.BRV.Hapo | 1 | 0.023 ± 0.001 | 0.004 ± 0.0005 |
| VT.CMC.Hapo | 1 | 0.024 ± 0.001 | 0.004 ± 0.0006 |
| WSS.Hapo | 1 | 0.008 ± 0.001 | 0.001 ± 0.0003 |
| PedCMC | 1 | 0.024 ± 0.001 | 0.005 ± 0.001 |
| FPCA | 1 | 0.021 ± 0.001 | 0.004 ± 0.001 |
| *FARVATb* | [*pk*(1 – *pk*)]-1/2 | 0.052 ± 0.002 | 0.011 ± 0.001 |
| *FARVATc* | [*pk*(1 – *pk*)]-1/2 | 0.039 ± 0.002 | 0.006 ± 0.001 |
| *FARVATo* | [*pk*(1 – *pk*)]-1/2 | 0.044 ± 0.002 | 0.008 ± 0.001 |
| 0.01 | BRV.T01 | 1 | 0.036 ± 0.002 | 0.0063 ± 0.0007 |
| CMC.T01 | 1 | 0.035 ± 0.002 | 0.0059 ± 0.0007 |
| BRV.Hapo.T01 | 1 | 0.021 ± 0.001 | 0.0030 ± 0.0005 |
| CMC.Hapo.T01 | 1 | 0.024 ± 0.001 | 0.0037 ± 0.0005 |
| VT.BRV.Hapo | 1 | 0.025 ± 0.001 | 0.0040 ± 0.0006 |
| VT.CMC.Hapo | 1 | 0.028 ± 0.001 | 0.0046 ± 0.0006 |
| WSS.Hapo | 1 | 0.010 ± 0.001 | 0.0015 ± 0.0003 |
| PedCMC | 1 | 0.021 ± 0.001 | 0.004 ± 0.001 |
| FPCA | 1 | 0.021 ± 0.001 | 0.004 ± 0.001 |
| *FARVATb* | [*pk*(1 – *pk*)]-1/2 | 0.051 ± 0.002 | 0.010 ± 0.001 |
| *FARVATc* | [*pk*(1 – *pk*)]-1/2 | 0.038 ± 0.002 | 0.005 ± 0.001 |
| *FARVATo* | [*pk*(1 – *pk*)]-1/2 | 0.044 ± 0.002 | 0.007 ± 0.001 |
| 0.05 | BRV.T01 | 1 | 0.042 ± 0.002 | 0.0075 ± 0.0008 |
| CMC.T01 | 1 | 0.041 ± 0.002 | 0.0071 ± 0.0007 |
| BRV.Hapo.T01 | 1 | 0.031 ± 0.002 | 0.0052 ± 0.0006 |
| CMC.Hapo.T01 | 1 | 0.033 ± 0.002 | 0.0058 ± 0.0007 |
| VT.BRV.Hapo | 1 | 0.033 ± 0.002 | 0.0060 ± 0.0007 |
| VT.CMC.Hapo | 1 | 0.034 ± 0.002 | 0.0061 ± 0.0007 |
| WSS.Hapo | 1 | 0.018 ± 0.001 | 0.0028 ± 0.0005 |
| PedCMC | 1 | 0.017 ± 0.001 | 0.003 ± 0.000 |
| FPCA | 1 | 0.026 ± 0.001 | 0.005 ± 0.001 |
| *FARVATb* | [*pk*(1 – *pk*)]-1/2 | 0.055 ± 0.002 | 0.012 ± 0.001 |
| *FARVATc* | [*pk*(1 – *pk*)]-1/2 | 0.042 ± 0.002 | 0.006 ± 0.001 |
| *FARVATo* | [*pk*(1 – *pk*)]-1/2 | 0.046 ± 0.002 | 0.009 ± 0.001 |

**Figure 3.5 Empirical power estimates under the presence of population substructure.** *ha*2 was assumed to be 0.05 and the empirical power estimates were calculated with 5,000 replicates at the 0.001 significance levels under the presence of population substructure. *FST* was assumed to be 0.005, 0.01 and 0.05. MAFs for all variants are assumed to be less than 0.01, and 30 rare variants are randomly selected. Each rare variant had either deleterious or protective effect on disease, and proportions of rare variants with deleterious effect were 1, 0.8, 0.6 and 0.5. The numbers of families were assumed to be 100.

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**3.3.4 Analysis of GAW17 simulated data**

The statistical efficiency of the proposed methods was evaluated with the binary trait in GAW17 simulated data [[Almasy, et al. 2011](#_ENREF_3)]. There were 200 replicates in GAW17 simulated data, and each replicate consisted of 209 affected and 488 unaffected individuals distributed in eight extended pedigrees. In 1,714 genes, there were 13,784 variants, and MAFs for 10,710 variants were less than 0.05. In each gene, rare variants for which MAFs were less than 0.05 were considered for analysis with the proposed methods, and genes in which the number of rare variants was less than or equal to 2 were excluded from the analysis. To provide the robustness of the proposed methods under the presence of population substructure, the empirical genetic relationship matrix between individuals was estimated with the common variants. The disease status was decided by the underlying liability, and the top 30% of the underlying liability distribution was declared as being affected. In particular, some covariates were related to the underlying liability, and the disease prevalence [[Thornton and McPeek 2010](#_ENREF_88)] and BLUP from the linear mixed model [[Won and Lange 2013](#_ENREF_96)] were utilized as offsets. For the linear mixed model, we included sex, age, smoking status, and 10 principal component scores calculated from the estimated **Φ** [[Thornton and McPeek 2010](#_ENREF_88)]. Among 36 genes related to binary traits, 20 genes consisted of more than one rare variant, and their empirical powers were determined by counting the number of replicates for which *p*-values of causal genes were smaller than 0.05 and 0.01. As shown in Tables 3.5 and 3.6, most causal genes were not detectable with the proposed methods; however, *KDR*, *VEGFA*, *SIRT1,* and *VLDLR* had relatively high rates of detection. By using RV-TDT methods, we could not find any causal genes. In Figures 3.6 and 3.7, we provided the qq-plots and Manhattan plots of RV-TDT, PedCMC, *FARVATb*, *FARVATc*, and *FARVATo* with the first replicate of GAW17 simulated data. While PedCMC was not conservative, results from the other methods seemed to be valid. As shown in Figure 3.7, we found that *VEGFA* was the most significant for *FARVATo*.

**Table 3.5 Rare variant association analysis with GAW17 simulated data for AFFECTED trait**. The numbers of replicates among 200 replicates where *p*-values for each method were less than 0.05 and 0.01 are counted. The correlation matrix was used empirical matrix between individuals was estimated with the common variants. The number of rare variants and true casual variants are denoted by *m* and *c*.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | PedCMC | | *FARVATb* | | *FARVATc* | | *FARVATo* | |
| **GENE** | ***m*** | ***c*** | **<.05** | **<.01** | **<.05** | **<.01** | **<.05** | **<.01** | **<.05** | **<.01** |
| **ARNT** | 4 | 2 | 0 | 0 | 8 | 0 | 4 | 0 | 4 | 0 |
| **BCHE** | 9 | 4 | 0 | 0 | 6 | 0 | 11 | 1 | 4 | 1 |
| **BCL2L11** | 4 | 1 | 0 | 0 | 3 | 0 | 6 | 0 | 3 | 0 |
| **ELAVL4** | 5 | 1 | 5 | 0 | 16 | 6 | 5 | 0 | 13 | 5 |
| **FLT1** | 8 | 5 | 1 | 0 | 5 | 1 | 3 | 0 | 4 | 0 |
| **HIF3A** | 6 | 1 | 0 | 0 | 1 | 0 | 1 | 1 | 1 | 1 |
| **HSP90AA1** | 5 | 1 | 1 | 0 | 2 | 1 | 10 | 2 | 6 | 1 |
| **KDR** | 3 | 4 | 18 | 7 | 38 | 12 | 16 | 4 | 20 | 9 |
| **LPL** | 11 | 2 | 0 | 0 | 5 | 0 | 0 | 0 | 1 | 0 |
| **PDGFD** | 6 | 1 | 1 | 0 | 6 | 1 | 5 | 0 | 6 | 1 |
| **PIK3C2B** | 23 | 4 | 1 | 0 | 9 | 2 | 11 | 3 | 10 | 2 |
| **PLAT** | 10 | 2 | 5 | 0 | 3 | 0 | 14 | 2 | 8 | 1 |
| **RRAS** | 3 | 1 | 0 | 0 | 8 | 0 | 2 | 2 | 4 | 1 |
| **SIRT1** | 11 | 4 | 3 | 2 | 49 | 14 | 100 | 56 | 81 | 52 |
| **SREBF1** | 7 | 5 | 0 | 0 | 6 | 0 | 8 | 1 | 5 | 0 |
| **VEGFA** | 3 | 1 | 88 | 40 | 123 | 68 | 135 | 83 | 127 | 89 |
| **VLDLR** | 10 | 2 | 10 | 3 | 52 | 19 | 29 | 6 | 51 | 11 |
| **VNN1** | 3 | 1 | 2 | 0 | 5 | 0 | 5 | 0 | 4 | 0 |
| **VNN3** | 4 | 3 | 1 | 0 | 3 | 0 | 2 | 0 | 1 | 0 |
| **VWE** | 6 | 2 | 2 | 0 | 0 | 0 | 1 | 0 | 1 | 0 |

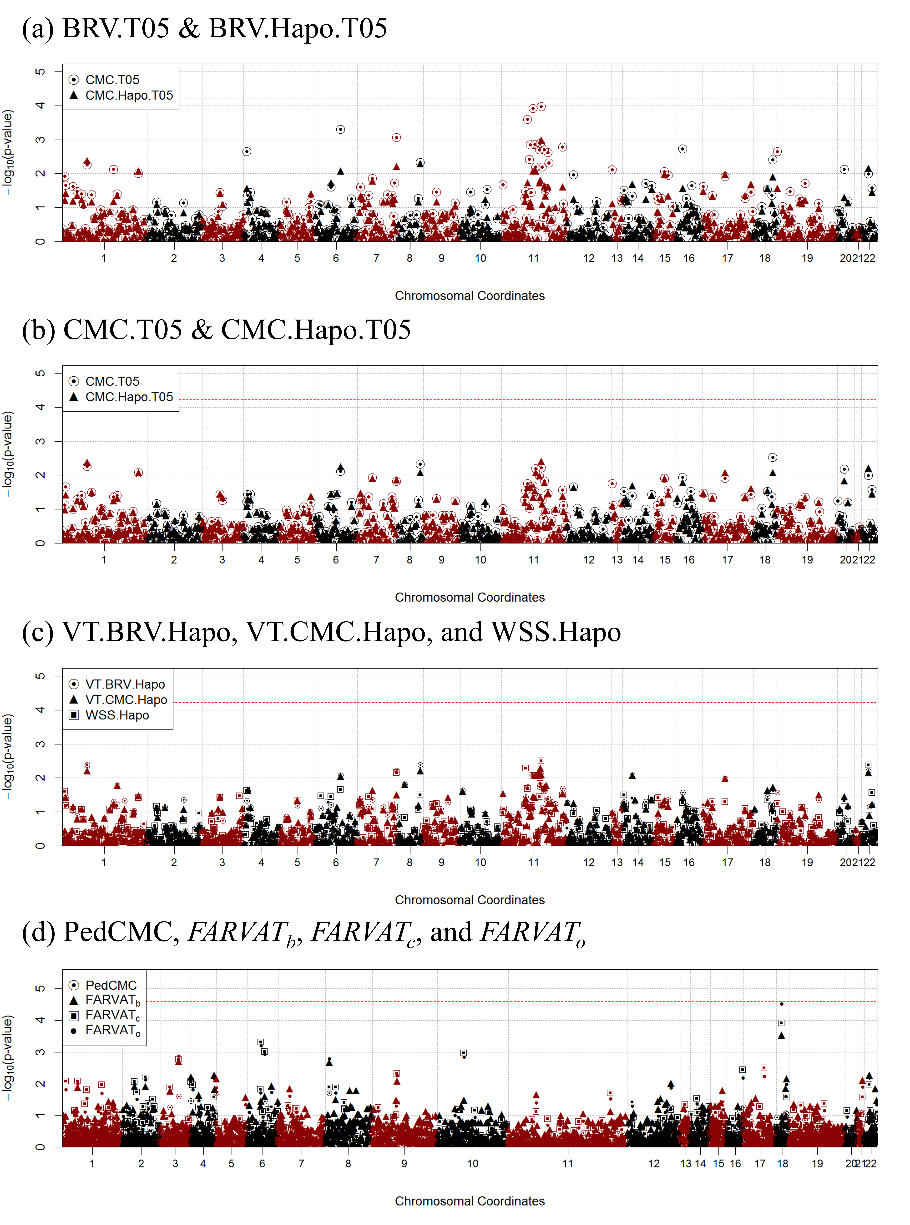
**Table 3.6 Rare variant results of GAW17 data for AFFECTED trait adjusting for covariates.** In 200 replicates, we counted the number of times that *p*-values of proposed method were less than 0.05, 0.01 and 0.001.The correlation matrix was used empirical matrix between individuals was estimated with the common variants. The number of rare variants and casual variants are denoted by *m* and *c*. Covariates included age, sex, smoking status and principal components.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | *FARVATb* | | *FARVATc* | | *FARVATo* | |
| **GENE** | ***m*** | ***c*** | **<0.05** | **<0.01** | **<0.05** | **<0.01** | **<0.05** | **<0.01** |
| **ARNT** | 4 | 2 | 17 | 7 | 21 | 4 | 21 | 7 |
| **BCHE** | 9 | 4 | 18 | 0 | 21 | 6 | 18 | 6 |
| **BCL2L11** | 4 | 1 | 16 | 6 | 19 | 1 | 17 | 2 |
| **ELAVL4** | 5 | 1 | 24 | 7 | 23 | 4 | 28 | 9 |
| **FLT1** | 8 | 5 | 53 | 23 | 48 | 14 | 47 | 21 |
| **HIF3A** | 6 | 1 | 5 | 1 | 7 | 1 | 5 | 1 |
| **HSP90AA1** | 5 | 1 | 16 | 3 | 0 | 0 | 0 | 0 |
| **KDR** | 3 | 4 | 20 | 5 | 12 | 1 | 19 | 4 |
| **LPL** | 11 | 2 | 12 | 6 | 16 | 4 | 16 | 5 |
| **PDGFD** | 6 | 1 | 13 | 2 | 14 | 2 | 13 | 2 |
| **PIK3C2B** | 23 | 4 | 15 | 2 | 17 | 5 | 18 | 4 |
| **PLAT** | 10 | 2 | 10 | 4 | 8 | 0 | 8 | 4 |
| **RRAS** | 3 | 1 | 25 | 3 | 0 | 0 | 0 | 0 |
| **SIRT1** | 11 | 4 | 21 | 9 | 19 | 6 | 19 | 10 |
| **SREBF1** | 7 | 5 | 33 | 13 | 28 | 7 | 31 | 15 |
| **VEGFA** | 3 | 1 | 65 | 29 | 69 | 29 | 78 | 40 |
| **VLDLR** | 10 | 2 | 16 | 2 | 5 | 2 | 10 | 2 |
| **VNN1** | 3 | 1 | 30 | 16 | 26 | 11 | 27 | 16 |
| **VNN3** | 4 | 3 | 18 | 5 | 17 | 2 | 16 | 3 |
| **VWF** | 6 | 2 | 0 | 0 | 1 | 0 | 1 | 0 |

**Figure 3.6 QQ-plot of the rare variant association analysis with GAW17 simulated data for AFFECTED trait.** The qq-plots are provided for BRV.T05, BRV.Hapo.T05, CMC.T05, CMC.Hapo.T05, VT.BRV.Hapo, VT.CMC.Hapo, WSS.Hapo, PedCMC, *FARVATb*, *FARVATc* and *FARVATo*. The 95% confidence interval is provided.

|  |  |
| --- | --- |
| (a) BRV.T05 & BRV.Hapo.T05 | (b) CMC.T05 & CMC.Hapo.T05 |
| fig_s5_1_QQ | fig_s5_2_QQ |
| (c) VT.BRV.Hapo, VT.CMC.Hapo  and WSS.Hapo | (d) PedCMC, *FARVATb*, *FARVATc*  and *FARVATo* |
| fig_s5_3_QQ | fig_s5_4_QQ |

**Figure 3.7 Manhattan plot of the rare variant association analysis with GAW17 simulated data for AFFECTED trait.** The Manhattan plots are provided for BRV.T05, BRV.Hapo.T05, CMC.T05, CMC.Hapo.T05, VT.BRV.Hapo, VT.CMC.Hapo, WSS.Hapo, PedCMC, *FARVATb*, *FARVATc* and *FARVATo*. The *x*-axis indicates the genome in physical position and *y*-axis does -log10(*p*-value) for all genes. The horizontal line means the threshold for 0.05 genome-wide significance level by Bonferroni correction is 2.50E-05.

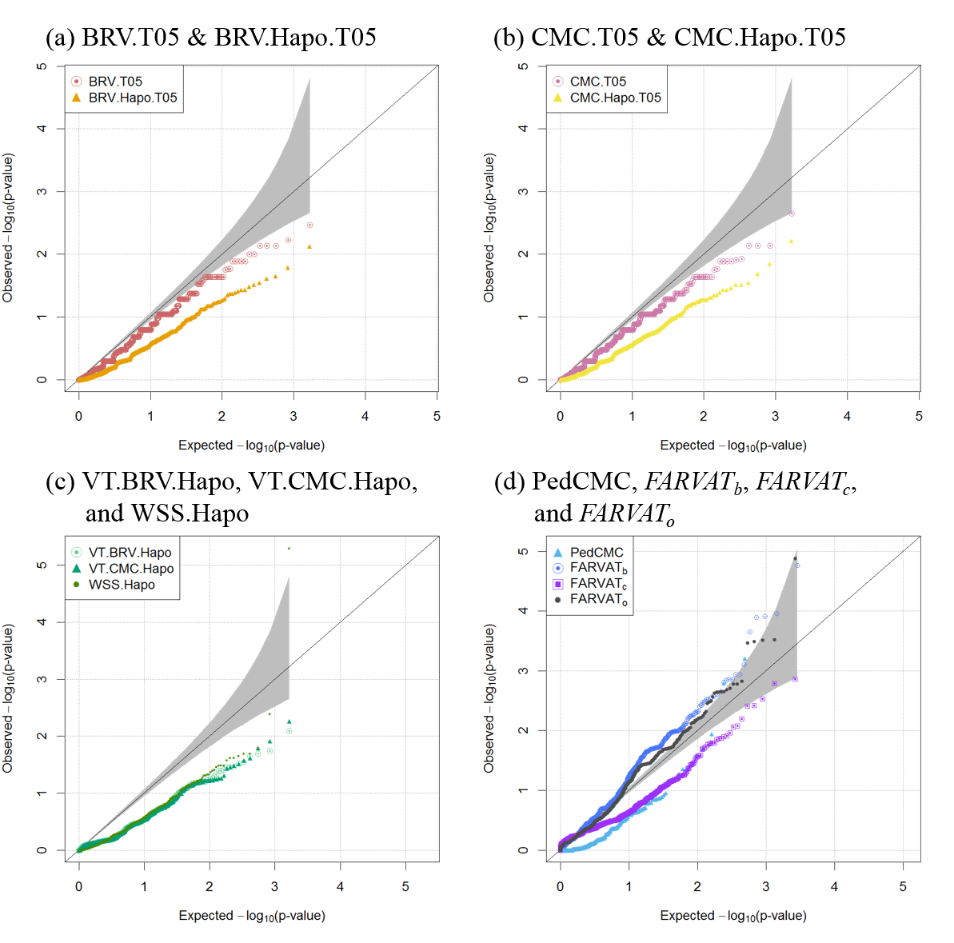


**3.4 Application to schizophrenia data**

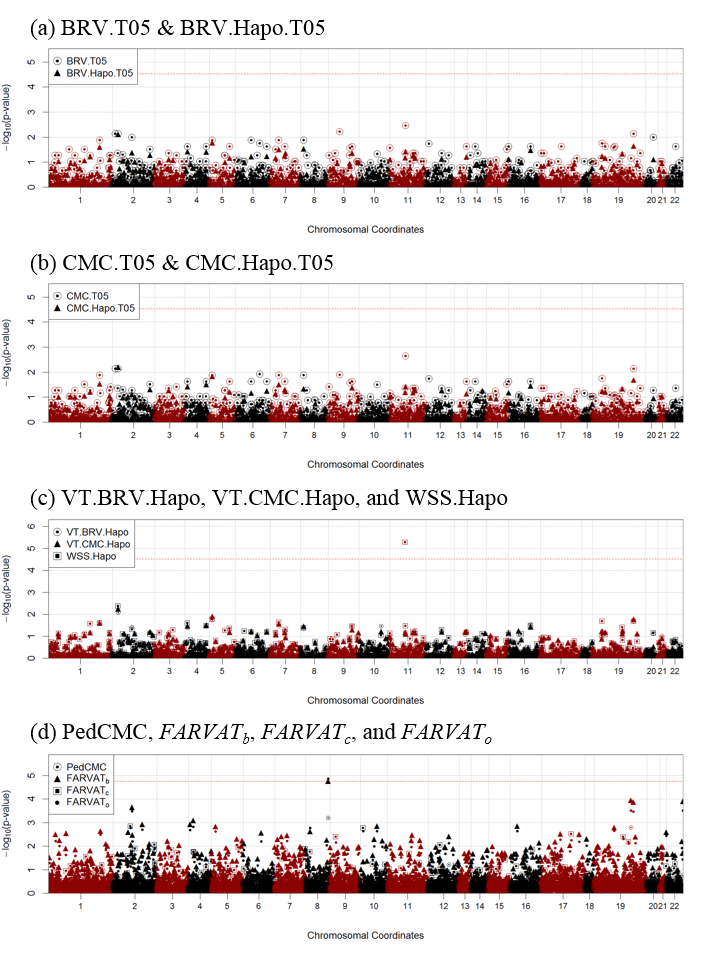
The proposed methods were applied to the genetic association analysis of rare variants in schizophrenia. Thirty-six trios were collected from Germany for which offspring were affected while parents were unaffected. The whole genomes for all individuals were sequenced. There were 10,829,265 bi-allelic variants, and MAFs of 31,860 among them were less than 0.05. Markers with high missing call rates (> 5%) or significant deviation from Hardy-Weinberg equilibrium (*P* < 1 × 10−5) were excluded, and trios were filtered out if 10% of variants had Mendelian transmission errors. As a result, 9,216,373 common variants and 31,046 rare variants for 105 trios were analyzed with the proposed methods.

Each rare variant was annotated by the SnpEff program [[Cingolani, et al. 2012](#_ENREF_23)] with the UCSC HG19 database. SnpEff 3.2a categorized each variant to four groups: HIGH, MODERATE, LOW, and MODIFIER. In our analysis, rare variants assigned to LOW and MODIFIER categories may have little or no effect on protein function, and they were not considered in our analysis. For each gene, the rare variants with HIGH and MODERATE effects were separately analyzed with the proposed methods. In addition, if MAC of all rare variants in each gene were less than or equal to 5, the asymptotic convergence of the proposed method to chi-square distribution may not be provided, and *p*-values were calculated for genes for which the MAC was larger than or equal to 5. In total, *p*-values were calculated for 13,053 genes. For the proposed methods, the prevalence of schizophrenia was assumed to be 0.0063, and each rare variant was weighted by [*pk*(1 – *pk*)]-1/2 for **W**. To provide robustness under the presence of population substructure, the genetic relationship matrix was estimated with common variants, and these data were incorporated into the proposed methods. We provided the qq-plots of RV-TDT methods, PedCMC, *FARVATb*, *FARVATc*, and *FARVATo*. As presented in Figure 3.8, while RV-TDT methods, PedCMC, and *FARVATc* methods were conservative and *FARVATb* showed some violations, *FARVATo* uniquely seems valid. Figure 3.9 shows the Manhattan plots for the all methods, and the genome-wide significant results from RV-TDT, *FARVATb*, and *FARVATo* are summarized in Table 3.7. We found a single genome-wide significant gene with WSS.Hapo, *FARVATb*, and *FARVATo*, and this genome-wide significant gene will be further investigated with replication studies.

**Figure 3.8 QQ-plot of the rare variant association analysis for schizophrenia.** The qq-plots are provided for BRV.T05, BRV.Hapo.T05, CMC.T05, CMC.Hapo.T05, VT.BRV.Hapo, VT.CMC.Hapo, WSS.Hapo, PedCMC, *FARVATb*, *FARVATc* and *FARVATo*. The 95% confidence interval is provided.



**Figure 3.9 Manhattan plot of the rare variant association analysis for schizophrenia.** The Manhattan plots are provided for BRV.T05, BRV.Hapo.T05, CMC.T05, CMC.Hapo.T05, VT.BRV.Hapo, VT.CMC.Hapo, WSS.Hapo, PedCMC, *FARVATb*, *FARVATc* and *FARVATo*. The *x*-axis indicates the genome in physical position and *y*-axis does -log10(*p*-value) for all genes. The horizontal line means the threshold for 0.05 genome-wide significance level by Bonferroni correction is 1.74E-05.



**Table 3.7 Significant results from the rare variant association analysis with schizophrenia data.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Statistics** | **Weight** | **CHR** | **GENE** | ***m*** | **MAC** | | ***p*-value** | ***q*-value** |
| **Aff** | **Unaff** |
| WSS.Hapo | 1 | 11 | Gene1 | 5 | 0 | 11 | 5.00E-06 | 0.01 |
| *FARVAT­b* | [*pk*(1-*pk*)]-1/2 | 8 | Gene2 | 25 | 4 | 27 | 1.67E-05 | 0.05 |
| *FARVAT­o* | [*pk*(1-*pk*)]-1/2 | 8 | Gene2 | 25 | 4 | 27 | 1.30E-05 | 0.04 |

*Notes*. The significant results for each method are provided. The numbers of variants for each significant region are provided, and MAC for affected and unaffected individuals is provided. The 0.05 genome-wide significant level adjusted by Bonferroni correction is 1.74E-05, and *q*-values [[Benjamini and Hochberg 1995](#_ENREF_11)] are provided.

**3.5 Discussion**

In this chapter, we proposed burden-type, C-alpha-type and SKAT-O-type statistics for the association analysis of rare variants for binary traits with extended families. The proposed methods were compared with results of PedCMC, FPCA, and RV-TDT methods [[He, et al. 2014](#_ENREF_35); [Zhu and Xiong 2012](#_ENREF_103)] and with extensive simulations, we showed that the proposed method was more efficient than existing approaches. In particular, we found that the most efficient statistic among the proposed statistics differed according to the disease model. However, they were usually followed by the SKAT-O-type statistic in such scenarios, and the power differences between the most efficient statistic and the SKAT-O-type statistic were small. Therefore, *FARVATo* seemed to be a robust choice for the analysis of rare variants in extended families.

Furthermore, the proposed method was very rapid computationally, and the *FARVAT* software for the proposed methods was implemented with C++ to enhance computational efficiency. The time complexity for the proposed method was *O*(*m*3 + *N*2*m*+ *N*3), and we found that analysis of the whole genome sequence data for 1,000 individuals in the extended family design could be conducted within a few hours. *FARVAT* can handle various input file formats, such as the ped, bed, and vcf files, and multithreaded genome-wide association analyses can be conducted. The software calculates various statistics for the analysis of extended families, and it is freely downloadable from http://healthstat.snu.ac.kr/software/farvat/.

However, despite the analytical flexibility of the proposed method, it has some limitations. First, the proposed method could be less efficient if some covariates associated with disease status or phenotypes of interest were continuous. Our recent investigation found that the power improvement of the analysis with phenotypes adjusted by BLUP could be substantial if each family was randomly selected [[Won and Lange 2013](#_ENREF_96)]. Under certain scenarios, however, power loss may be expected, and the further investigation is necessary. Second, we showed that incorporation of the estimated correlation matrix to the proposed statistics provided sufficient robustness for the proposed method against the presence of population substructure. However, if large-scale common variants were not available or the level of population substructure depended on the genomic location, the proposed adjustment with the estimated correlation matrix did not perform appropriately [[Price, et al. 2006](#_ENREF_71); [Won, et al. 2009](#_ENREF_98)], and different strategies would be necessary according to the level of population substructure. If large-scale common variants are not available, the FBAT or TDT statistics, based on so-called within-family components, is uniquely robust to population substructure, and the burden-type test for the FBAT statistic or RV-TDT can be utilized [[De, et al. 2013](#_ENREF_29); [He, et al. 2014](#_ENREF_35)]. If the genomic ancestry for each individual differs for some genomic locations, the so-called hybrid-analysis strategy [[Won, et al. 2009](#_ENREF_98)] can be suitable alternative. The proposed method can simply be extended to the statistic based on the between-family component [[Won and Lange 2013](#_ENREF_96)], and its rank-based *p*-value can be combined with the FBAT burden type test or SKAT-O-type test.

Advances in genotyping technology will lead to substantial cost reductions for genome sequencing and it is expected that whole genome sequencing may be feasible for less than a few hundred US dollars in the near future. Importantly, most of human genome consists of rare variants, and thus, we expect that the genetic background for ‘missing heritability’ can be determined by rare variant association analysis [[Manolio, et al. 2009](#_ENREF_59)]. However, rare variant association analysis is disrupted by genetic heterogeneity, and in this context, the importance of rare variant analysis with extended families has often been raised [[Ionita-Laza, et al. 2011](#_ENREF_41)]. The proposed method enables the analysis of rare variants within extended families, and its application to extended families may provide a breakthrough for the success of genetic association analysis.

This chapter was accepted in *Genetic Epidemiology*   
as a partial fulfillment of Sungkyoung Choi’s Ph.D program.

**Chapter 4**

**Family-based Rare Variant Association Test for X-linked genes**

**4.1 Introduction**

In this chapter we propose a family-based rare variant association test for X-linked genes (***FARVATX***) that is applicable to various biological models. Due to the nature of our statistic, the proposed method can also be applied to family-based designs with dichotomous phenotype, and we show with extensive simulation studies that the proposed methods perform better than the existing approaches. We applied the coding strategy that was suggested by Wang et al. [[Wang, et al. 2014](#_ENREF_93)] in population-based design. The proposed methods were applied to an association analysis of families with chronic obstructive pulmonary disease (COPD). Some promising genes were identified with the proposed methods, thereby illustrating the practical value of these methods.

**4.2 Methods**

**4.2.1 Notation**

We assume that there are *n* families and *ni* individuals in family *i*, and the total sample size is denoted by *N* = . We assume that genotypes for *M* rare variants on the X chromosome are available. We let be the coded genotype of an individual *j* in a family *i* for a variant *m*, with allowed values of 0, 1, or 2 for a female, and 0 or 1 for a male individual, depending on the number of minor alleles. We denote the disease prevalence by *q* and assume that *yij* is coded as 1 for affected individuals, *q* for individuals with missing phenotype, and 0 for unaffected individuals. In retrospective analyses, genetic association is detected by comparing genetic distributions of affected and unaffected individuals, and it has been shown that the statistical efficiency can be improved by modifying the phenotype [[Lange and Laird 2002](#_ENREF_47); [Thornton and McPeek 2007](#_ENREF_87)]. We let *μij* be the offset that is define by disease prevalence or the best linear unbiased predictor (BLUP) from the linear mixed model [[Won and Lange 2013](#_ENREF_96)], and set *tij = yij – μij*. Then, if we represent the column vectors that comprise and *tij* for all individuals in a family *i* by and **T***i* respectively, the genotype matrix and phenotype vector can be defined by

****

**4.2.2 Variance covariance matrix**

We assume that *σmm'* is a covariance between and when an individual *j* in a family *i* is a male, and the genetic variance-covariance matrix between *M* markers in males is



We assume that *hij* is an inbreeding coefficient for an individual *j* in a family *i*, and thus if an individual *j* is a male, *hij* becomes 0. *πij,i'j'* is a kinship coefficient between an individual *j* in a family *i* and an individual *j'* in a family *i'*. It should be noted that *πij,i'j'* is a function of gender, and can be deductively calculated [[Thornton, et al. 2012](#_ENREF_89)]. If *i* and *i'* are different, *πij,i'j'* becomes 0. We consider individuals *j* and *j'* in a family *i*, and if an individual *j* is a descendant of *j'*, *πij,ij'* can be derived based on Table 4.1.

**Table 4.1 X chromosomal and autosomal kinship coefficients for two individuals in a nuclear family.**

|  |  |  |
| --- | --- | --- |
| **Relationship of individuals *ij* and *ij'*** | ***πij,ij'* (X chromosome)** | ***πij,ij'* (autosome)** |
| Brother & Brother | 1/4 | 1/4 |
| Sister & Sister | 3/4 | 1/4 |
| Brother & Sister | 1/4 | 1/4 |
| Mother & Son | 1/2 | 1/4 |
| Mother & Daughter | 1/2 | 1/4 |
| Father & Son | 0 | 1/4 |
| Father & Daughter | 1/2 | 1/4 |

We consider the case where individual *j* in a family *i* is not a descendant of *j'* in a large family. If we let *m*(*j'*) and *f*(*j'*) indicate the mother and father of *j'*, respectively, *πij,ij'* can be recursively calculated as follows:

1. , if *j'* is a male.
2. , if *j'* is a female.

If we define **Φ** by



then we have var(**X***m*) = **Φ**.

If we let **l***N* be the *N×*1 column vector of which the elements are 1 for male and 2 for female, respectively, the best linear unbiased estimator for *E*(**X**) under the null hypothesis can be derived, with some modification of the methods of McPeek et al [[McPeek, et al. 2004](#_ENREF_62)], by

****,

and **Σ** can be estimated by



**4.2.3 Weighted quasi-likelihood score**

We assume that **D***d* is a *N*×*N* diagonal matrix, and its diagonal elements are 1 or *d* if the corresponding individuals are males or females, respectively. X-linked gene expression processes are considered by replacing the genotype matrix **X** by **D***d***X**. **D***d***X** will be called the weighted quasi-likelihood score in the remainder of this chapter. The efficient choice of *d* is related to the gene expression process and can be obtained by considering the relative proportion of each genotype’s expression [[Clayton 2008](#_ENREF_24)]. In particular, homozygous disease genotypes are not usually observed for rare variants; thus, an approximately efficient coding strategy can be chosen by comparing gene expression levels for heterozygous disease genotypes in females and hemizygous disease genotypes in males. Therefore under our coding strategy, XCI and escaped XCI (E-XCI) are efficiently tested with *d* = 0.5 and *d* = 1, respectively. We also have considered another simulation scenario for skewed XCI (S-XCI) owing to nonrandom XCI. S-XCI have been defined using an arbitrary threshold as inactivation of deleterious or normal allele in more than 75% cells [[Abkowitz, et al. 1998](#_ENREF_1)]. We assumed that the value of *d* was set as 0.75 or 0.25 to represent S-XCI toward to the deleterious allele or the normal allele, respectively.

**4.2.4 Rare X-linked variant association tests**

The quasi-likelihood-based score [[Won and Lange 2013](#_ENREF_96)] for **D***d***X** can be defined by

****.

Because *E*(**X**) can be estimated by , the quasi-likelihood score becomes

****

where ****.

If we let , we can simply show that

****,

and thus we have

****.

It has been empirically shown that weighting each variant can be an efficient strategy to improve statistical power for rare variant association analyses [[Madsen and Browning 2009](#_ENREF_56)]. We let the weight for variant *m* be *wm*, and the diagonal matrix for which the diagonal element *m* is *wm* be **W**. If we let *pm* be the MAF for a variant *m*, we used *Beta*(*pm*; 1, 25) as *wm*. Then scores for burden [[Li and Leal 2008](#_ENREF_51)] and variance component [[Neale, et al. 2011](#_ENREF_65); [Wu, et al. 2011](#_ENREF_100)] tests can be respectively defined by

****

and ****

These are extensions of FARVAT statistics [[Choi, et al. 2014](#_ENREF_22)]. We let and define

****

We let *p*-values for be , and denote and by ***FARVAT-XB*(*d*)** and ***FARVAT-XC*(*d*)**. It should be noted that the formal corresponds to the burden-type statistic and the latter does SKAT-type statistic. The SKAT-O-type statistic [[Lee, et al. 2012b](#_ENREF_50)] can be defined by

****

and we denote its *p*-values by ***FARVAT-XO*(*d*)**. *P*-values can be calculated by the numerical algorithms for ***FARVAT*** statistics [[Choi, et al. 2014](#_ENREF_22)].

If the biological gene expression processes of X-linked genes are not clear, the proposed statistics may be sensitive to the choice of *d*, and a robust statistic needs to be provided. We calculate ***FARVAT-XB*(*d*)** or ***FARVAT-XC*(*d*)** for various choices of *d*, and then combine them to a single *p*-value by using extended Fisher’s method for correlated *p*-values [[Brown 1975](#_ENREF_15)]. We denote its *p*-value by ***FARVAT***-***XD*** where 0, 0.05, 0.1, …, 0.95, and 1 were considered for *d*1, …, and *dL*.

If we let , the rare variant tests for burden-type and SKAT-type can be expressed as quadratic forms and their quadratic forms for a series of *d*1, …, and *dL* are denoted by

.

Based on the results in the previous section, we can simply show that

****,

and ****,

which indicates

 and

.

Therefore, under asymptotic normality, covariances between the quadratic forms become



and the variances of the quadratic forms are



Therefore the correlation between the quadratic forms can be calculated, and they will be denoted as . If we denote *p*-values for the quadratic form *Ql* by , we consider

.

Here can be calculated by the numerical algorithm developed by Davis [[Davies 1980a](#_ENREF_27)]. Under the null hypothesis, the variance of *S* can be obtained by



As was suggested by Brown [[Brown 1975](#_ENREF_15)], the covariance can be approximated by



Under the null hypothesis, *S* is approximately equal to the scaled chi-square distribution as follows:

.

Here *c* and *f* can be derived as



**4.3 Simulation study**

**4.3.1 The simulation model**

To investigate the performance of the proposed methods, we performed simulation studies for various family structures (see Figure 4.1 for detailed information). We considered trios with a son or a daughter, and large families with 10 individuals that extended over three generations and had different numbers of males and females. MAFs were generated from a uniform distribution *U*(0, 0.01), and genotype frequencies were calculated under Hardy-Weinberg Equilibrium. If we let *pm* be the MAF for a variant *m*, founders’ genotypes were generated with a binomial distribution *B*(2, *pm*), and offspring’s genotypes were obtained by simulated Mendelian transmission, assuming no recombination. Phenotypes for each individual were generated with a liability threshold model, and liabilities were determined by summing the phenotypic mean (), polygenic effect (*σg*2), common environmental effect (*σc*2), main genetic effect and random error (*σe*2). Random errors were independently generated from *N*(0, *σe*2 = 1/3). The polygenic effect for founders was independently generated from *N*(0, *σg*2 = 1/3), and for non-founders, averages of maternal and paternal polygenic effects were combined with values independently sampled from *N*(0, 0.5*σg*2). Common environmental effects were assumed to be the same for all individuals in each family and were generated from *N*(0, *σc*2 = 1/3). For main genetic effects, we assumed that there were *M* rare variants, and genetic effects for each rare variant were obtained by the product of *βm*, the number of disease alleles, and *d*. If we let be the proportion of phenotypic variance explained by the main genotype, *βm* were sampled from *U*(1.0, *v*) and *v* was calculated by

****

Under the null hypothesis, *ha*2 was set to be 0, and *βm* became 0. Liabilities for each individual were generated from the sum of the main genetic effects, polygenic effects, common environmental effects, and random errors, and they were transformed to being affected if they were larger than the threshold; otherwise, they were considered to be unaffected.

**Figure 4.1 Family structures considered in our simulation studies**

****

The threshold was set to generate the assumed prevalence *q*. Disease prevalences are sometimes different between males and females, and this was considered by setting different prevalence rates for males and females in our simulations. Randomly selected families can have very few affected individuals, which leads to the large false negative finding. Therefore, we considered some ascertainment strategies. That is, families with less than two affected grandchildren were excluded from the simulation studies, and sampling was repeated until the desired number of families was obtained.

We also evaluated the proposed methods in the presence of population substructure. We assumed two underlying sub-populations, and each founder was randomly assigned to one of two sub-populations. The polygenic effect, common environmental effect, and random errors were generated with the same model used in the absence of population substructure. However, the phenotypic means of liabilities between two sub-populations were varied by 0.5. The allele frequencies for the two subpopulations were generated with the Balding-Nichols model [[Balding and Nichols 1995](#_ENREF_9)]. We first generate *pm* for global population MAF from *U*(0, 0.05). Then, if we let *F*ST denote Wright’s *F*ST, MAFs for two sub-populations were independently sampled from *Beta*(*pm*(1 - *F*ST)/*F*ST, (1 - *pm*)(1 - *F*ST)/*F*ST). *F*ST was assumed to 0, 0.005, 0.01, and 0.05.

**4.3.2 Evaluation with simulated data**

We estimated type-1 error rates and powers of the proposed methods, and results from the proposed method were compared with PedGene-Burden and PedGene-Kernel statistics [[Schaid, et al. 2013](#_ENREF_77)]. In particular, PedGene-Burden and PedGene-Kernel cannot handle S-XCI model and they were not considered for S-XCI model. We considered five different extended family structures (A-1) – (A-5) as shown in Figure 4.1. We assumed that there were 200 extended families and 30 rare variants in each gene. Empirical type-1 errors were calculated at the 0.05 and 0.01 significance levels with 5,000 replicates for dichotomous phenotypes. Tables 4.2 and 4.3 show that type-1 error estimates of our proposed methods consistently preserved the nominal significance levels for any biological expression process, whereas the statistical validity of PedGene-Burden and PedGene-Kernel depends on family structure and type-1 error estimates of PedGene-Burden are violated for (A-1), (A-2), (A-4), and (A-5) of E-XCI. Tables 4.4 – 4.7 show the type-1 error estimates when disease prevalences for males and females are different. Disease prevalences were set to be 0.36 and 0.12 for males and females respectively in Tables 4.4 – 4.5, and 0.12 and 0.36 in Tables 4.6 – 4.7. Results show that the proposed methods always preserve the nominal significance levels. However type-1 error estimates of PedGene-Burden and PedGene-Kernel for E-XCI model setting consistently preserved the nominal significance levels.

**Table 4.2 Empirical type-1 error estimates for XCI or E-XCI.** Empirical type-1 errors were calculated for five different family structures (A-1) – (A-5). The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of family** | **Statistics** | **Biological Model** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| **(A-1)** | ***FARVAT*-*XB*** | XCI | 0.0464 ± 0.0058 | 0.0084 ± 0.0025 |
| E-XCI | 0.0558 ± 0.0064 | 0.0100 ± 0.0028 |
| ***FARVAT*-*XC*** | XCI | 0.0538 ± 0.0063 | 0.0098 ± 0.0027 |
| E-XCI | 0.0470 ± 0.0059 | 0.0104 ± 0.0028 |
| ***FARVAT*-*XO*** | XCI | 0.0500 ± 0.0060 | 0.0128 ± 0.0031 |
| E-XCI | 0.0578 ± 0.0065 | 0.0120 ± 0.0030 |
| ***FARVAT*-*XD*** | XCI | 0.0406 ± 0.0055 | 0.0072 ± 0.0023 |
| E-XCI | 0.0434 ± 0.0056 | 0.0092 ± 0.0026 |
| PedGene-Burden | XCI | 0.0424 ± 0.0056 | 0.0078 ± 0.0024 |
| E-XCI | 0.1541 ± 0.0100 | 0.0496 ± 0.0060 |
| PedGene-Kernel | XCI | 0.0426 ± 0.0056 | 0.0078 ± 0.0024 |
| E-XCI | 0.0638 ± 0.0068 | 0.0144 ± 0.0033 |
| **(A-2)** | ***FARVAT*-*XB*** | XCI | 0.0520 ± 0.0062 | 0.0114 ± 0.0029 |
| E-XCI | 0.0512 ± 0.0061 | 0.0076 ± 0.0024 |
| ***FARVAT*-*XC*** | XCI | 0.0506 ± 0.0061 | 0.0106 ± 0.0028 |
| E-XCI | 0.0502 ± 0.0061 | 0.0100 ± 0.0028 |
| ***FARVAT*-*XO*** | XCI | 0.0572 ± 0.0064 | 0.0125 ± 0.0031 |
| E-XCI | 0.0513 ± 0.0061 | 0.0064 ± 0.0022 |
| ***FARVAT*-*XD*** | XCI | 0.0432 ± 0.0056 | 0.0098 ± 0.0027 |
| E-XCI | 0.0430 ± 0.0056 | 0.0086 ± 0.0026 |
| PedGene-Burden | XCI | 0.0496 ± 0.0060 | 0.0092 ± 0.0026 |
| E-XCI | 0.0736 ± 0.0072 | 0.0138 ± 0.0032 |
| PedGene-Kernel | XCI | 0.0442 ± 0.0057 | 0.0076 ± 0.0024 |
| E-XCI | 0.0518 ± 0.0061 | 0.0086 ± 0.0026 |
| **(A-3)** | ***FARVAT*-*XB*** | XCI | 0.0500 ± 0.0060 | 0.0104 ± 0.0028 |
| E-XCI | 0.0500 ± 0.0060 | 0.0122 ± 0.0030 |
| ***FARVAT*-*XC*** | XCI | 0.0500 ± 0.0060 | 0.0090 ± 0.0026 |
| E-XCI | 0.0490 ± 0.0060 | 0.0106 ± 0.0028 |
| ***FARVAT*-*XO*** | XCI | 0.0506 ± 0.0061 | 0.0116 ± 0.0030 |
| E-XCI | 0.0465 ± 0.0058 | 0.0116 ± 0.0030 |
| ***FARVAT*-*XD*** | XCI | 0.0454 ± 0.0058 | 0.0096 ± 0.0027 |
| E-XCI | 0.0458 ± 0.0058 | 0.0082 ± 0.0025 |
| PedGene-Burden | XCI | 0.0488 ± 0.0060 | 0.0082 ± 0.0025 |
| E-XCI | 0.0488 ± 0.0060 | 0.0090 ± 0.0026 |
| PedGene-Kernel | XCI | 0.0468 ± 0.0059 | 0.0088 ± 0.0026 |
| E-XCI | 0.0422 ± 0.0056 | 0.0080 ± 0.0025 |
| **(A-4)** | ***FARVAT*-*XB*** | XCI | 0.0542 ± 0.0063 | 0.0132 ± 0.0032 |
| E-XCI | 0.0506 ± 0.0061 | 0.0110 ± 0.0029 |
| ***FARVAT*-*XC*** | XCI | 0.0444 ± 0.0057 | 0.0072 ± 0.0023 |
| E-XCI | 0.0474 ± 0.0059 | 0.0114 ± 0.0029 |
| ***FARVAT*-*XO*** | XCI | 0.0474 ± 0.0059 | 0.0100 ± 0.0028 |
| E-XCI | 0.0556 ± 0.0063 | 0.0087 ± 0.0026 |
| ***FARVAT*-*XD*** | XCI | 0.0428 ± 0.0056 | 0.0086 ± 0.0026 |
| E-XCI | 0.0490 ± 0.0060 | 0.0086 ± 0.0026 |
| PedGene-Burden | XCI | 0.0476 ± 0.0059 | 0.0118 ± 0.0030 |
| E-XCI | 0.0878 ± 0.0078 | 0.0236 ± 0.0042 |
| PedGene-Kernel | XCI | 0.0424 ± 0.0056 | 0.0084 ± 0.0025 |
| E-XCI | 0.0494 ± 0.0060 | 0.0086 ± 0.0026 |
| **(A-5)** | ***FARVAT*-*XB*** | XCI | 0.0526 ± 0.0062 | 0.0110 ± 0.0029 |
| E-XCI | 0.0466 ± 0.0058 | 0.0090 ± 0.0026 |
| ***FARVAT*-*XC*** | XCI | 0.0506 ± 0.0061 | 0.0088 ± 0.0026 |
| E-XCI | 0.0524 ± 0.0062 | 0.0110 ± 0.0029 |
| ***FARVAT*-*XO*** | XCI | 0.0502 ± 0.0061 | 0.0093 ± 0.0027 |
| E-XCI | 0.0518 ± 0.0061 | 0.0095 ± 0.0027 |
| ***FARVAT*-*XD*** | XCI | 0.0442 ± 0.0057 | 0.0088 ± 0.0026 |
| E-XCI | 0.0482 ± 0.0059 | 0.0080 ± 0.0025 |
| PedGene-Burden | XCI | 0.0484 ± 0.0059 | 0.0124 ± 0.0031 |
| E-XCI | 0.1815 ± 0.0107 | 0.0650 ± 0.0068 |
| PedGene-Kernel | XCI | 0.0456 ± 0.0058 | 0.0070 ± 0.0023 |
| E-XCI | 0.0626 ± 0.0067 | 0.0114 ± 0.0029 |

**Table 4.3 Empirical type-1 error estimates for S-XCI.** Empirical type-1 errors were calculated for five different family structures (A-1) – (A-5). The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of family** | **Statistics** | **Biological Model** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| **(A-1)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0482 ± 0.0059 | 0.0100 ± 0.0028 |
| S-XCI  to deleterious allele | 0.0530 ± 0.0062 | 0.0108 ± 0.0029 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0562 ± 0.0064 | 0.0120 ± 0.0030 |
| S-XCI  to deleterious allele | 0.0494 ± 0.0060 | 0.0110 ± 0.0029 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0579 ± 0.0065 | 0.0134 ± 0.0032 |
| S-XCI  to deleterious allele | 0.0482 ± 0.0059 | 0.0118 ± 0.0030 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0448 ± 0.0057 | 0.0084 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0444 ± 0.0057 | 0.0106 ± 0.0028 |
| **(A-2)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0524 ± 0.0062 | 0.0094 ± 0.0027 |
| S-XCI  to deleterious allele | 0.0512 ± 0.0061 | 0.0112 ± 0.0029 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0458 ± 0.0058 | 0.0076 ± 0.0024 |
| S-XCI  to deleterious allele | 0.0484 ± 0.0059 | 0.0092 ± 0.0026 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0453 ± 0.0058 | 0.0072 ± 0.0023 |
| S-XCI  to deleterious allele | 0.0543 ± 0.0063 | 0.0116 ± 0.0030 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0410 ± 0.0055 | 0.0092 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0428 ± 0.0056 | 0.0076 ± 0.0024 |
| **(A-3)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0502 ± 0.0061 | 0.0096 ± 0.0027 |
| S-XCI  to deleterious allele | 0.0514 ± 0.0061 | 0.0108 ± 0.0029 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0450 ± 0.0057 | 0.0082 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0508 ± 0.0061 | 0.0090 ± 0.0026 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0472 ± 0.0059 | 0.0089 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0534 ± 0.0062 | 0.0096 ± 0.0027 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0388 ± 0.0054 | 0.0088 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0454 ± 0.0058 | 0.0096 ± 0.0027 |
| **(A-4)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0484 ± 0.0059 | 0.0090 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0512 ± 0.0061 | 0.0088 ± 0.0026 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0432 ± 0.0056 | 0.0076 ± 0.0024 |
| S-XCI  to deleterious allele | 0.0470 ± 0.0059 | 0.0106 ± 0.0028 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0459 ± 0.0058 | 0.0119 ± 0.0030 |
| S-XCI  to deleterious allele | 0.0506 ± 0.0061 | 0.0107 ± 0.0028 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0350 ± 0.0051 | 0.0092 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0430 ± 0.0056 | 0.0088 ± 0.0026 |
| **(A-5)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0512 ± 0.0061 | 0.0088 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0512 ± 0.0061 | 0.0124 ± 0.0031 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0442 ± 0.0057 | 0.0100 ± 0.0028 |
| S-XCI  to deleterious allele | 0.0518 ± 0.0061 | 0.0094 ± 0.0027 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0443 ± 0.0057 | 0.0100 ± 0.0028 |
| S-XCI  to deleterious allele | 0.0514 ± 0.0061 | 0.0131 ± 0.0032 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0406 ± 0.0055 | 0.0088 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0452 ± 0.0058 | 0.0116 ± 0.0030 |

**Table 4.4 Empirical type-1 error estimates for XCI or E-XCI when prevalence for males and females are different.** The prevalences for male and female are assumed to be 0.36 and 0.12, respectively. Empirical type-1 errors were calculated for five different family structures (A-1) – (A-5). The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of family** | **Statistics** | **Biological Model** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| **(A-1)** | ***FARVAT*-*XB*** | XCI | 0.0486 ± 0.0060 | 0.0102 ± 0.0028 |
| E-XCI | 0.0526 ± 0.0062 | 0.0142 ± 0.0033 |
| ***FARVAT*-*XC*** | XCI | 0.0528 ± 0.0062 | 0.0132 ± 0.0032 |
| E-XCI | 0.0486 ± 0.0060 | 0.0098 ± 0.0027 |
| ***FARVAT*-*XO*** | XCI | 0.0469 ± 0.0059 | 0.0131 ± 0.0032 |
| E-XCI | 0.0552 ± 0.0063 | 0.0123 ± 0.0031 |
| ***FARVAT*-*XD*** | XCI | 0.0456 ± 0.0058 | 0.0130 ± 0.0031 |
| E-XCI | 0.0460 ± 0.0058 | 0.0128 ± 0.0031 |
| PedGene-Burden | XCI | 0.0492 ± 0.0060 | 0.0096 ± 0.0027 |
| E-XCI | 0.6941 ± 0.0128 | 0.4477 ± 0.0138 |
| PedGene-Kernel | XCI | 0.0468 ± 0.0059 | 0.0074 ± 0.0024 |
| E-XCI | 0.1750 ± 0.0105 | 0.0572 ± 0.0064 |
| **(A-2)** | ***FARVAT*-*XB*** | XCI | 0.0490 ± 0.0060 | 0.0092 ± 0.0026 |
| E-XCI | 0.0478 ± 0.0059 | 0.0082 ± 0.0025 |
| ***FARVAT*-*XC*** | XCI | 0.0510 ± 0.0061 | 0.0102 ± 0.0028 |
| E-XCI | 0.0470 ± 0.0059 | 0.0104 ± 0.0028 |
| ***FARVAT*-*XO*** | XCI | 0.0536 ± 0.0062 | 0.0097 ± 0.0027 |
| E-XCI | 0.0503 ± 0.0061 | 0.0085 ± 0.0025 |
| ***FARVAT*-*XD*** | XCI | 0.0464 ± 0.0058 | 0.0086 ± 0.0026 |
| E-XCI | 0.0398 ± 0.0054 | 0.0096 ± 0.0027 |
| PedGene-Burden | XCI | 0.0456 ± 0.0058 | 0.0082 ± 0.0025 |
| E-XCI | 0.8560 ± 0.0097 | 0.6717 ± 0.0130 |
| PedGene-Kernel | XCI | 0.0472 ± 0.0059 | 0.0084 ± 0.0025 |
| E-XCI | 0.2601 ± 0.0122 | 0.0918 ± 0.0080 |
| **(A-3)** | ***FARVAT*-*XB*** | XCI | 0.0454 ± 0.0058 | 0.0080 ± 0.0025 |
| E-XCI | 0.0546 ± 0.0063 | 0.0132 ± 0.0032 |
| ***FARVAT*-*XC*** | XCI | 0.0482 ± 0.0059 | 0.0114 ± 0.0029 |
| E-XCI | 0.0444 ± 0.0057 | 0.0068 ± 0.0023 |
| ***FARVAT*-*XO*** | XCI | 0.0514 ± 0.0061 | 0.0083 ± 0.0025 |
| E-XCI | 0.0488 ± 0.0060 | 0.0101 ± 0.0028 |
| ***FARVAT*-*XD*** | XCI | 0.0396 ± 0.0054 | 0.0072 ± 0.0023 |
| E-XCI | 0.0444 ± 0.0057 | 0.0086 ± 0.0026 |
| PedGene-Burden | XCI | 0.0442 ± 0.0057 | 0.0062 ± 0.0022 |
| E-XCI | 0.8866 ± 0.0088 | 0.7237 ± 0.0124 |
| PedGene-Kernel | XCI | 0.0468 ± 0.0059 | 0.0076 ± 0.0024 |
| E-XCI | 0.2985 ± 0.0127 | 0.1126 ± 0.0088 |
| **(A-4)** | ***FARVAT*-*XB*** | XCI | 0.0466 ± 0.0058 | 0.0084 ± 0.0025 |
| E-XCI | 0.0516 ± 0.0061 | 0.0110 ± 0.0029 |
| ***FARVAT*-*XC*** | XCI | 0.0434 ± 0.0056 | 0.0086 ± 0.0026 |
| E-XCI | 0.0480 ± 0.0059 | 0.0092 ± 0.0026 |
| ***FARVAT*-*XO*** | XCI | 0.0441 ± 0.0057 | 0.0080 ± 0.0025 |
| E-XCI | 0.0501 ± 0.0060 | 0.0122 ± 0.0030 |
| ***FARVAT*-*XD*** | XCI | 0.0392 ± 0.0054 | 0.0082 ± 0.0025 |
| E-XCI | 0.0414 ± 0.0055 | 0.0090 ± 0.0026 |
| PedGene-Burden | XCI | 0.0472 ± 0.0059 | 0.0090 ± 0.0026 |
| E-XCI | 0.7055 ± 0.0126 | 0.4719 ± 0.0138 |
| PedGene-Kernel | XCI | 0.0482 ± 0.0059 | 0.0068 ± 0.0023 |
| E-XCI | 0.1818 ± 0.0107 | 0.0552 ± 0.0063 |
| **(A-5)** | ***FARVAT*-*XB*** | XCI | 0.0534 ± 0.0062 | 0.0116 ± 0.0030 |
| E-XCI | 0.0464 ± 0.0058 | 0.0096 ± 0.0027 |
| ***FARVAT*-*XC*** | XCI | 0.0506 ± 0.0061 | 0.0092 ± 0.0026 |
| E-XCI | 0.0448 ± 0.0057 | 0.0104 ± 0.0028 |
| ***FARVAT*-*XO*** | XCI | 0.0592 ± 0.0065 | 0.0098 ± 0.0027 |
| E-XCI | 0.0429 ± 0.0056 | 0.0093 ± 0.0027 |
| ***FARVAT*-*XD*** | XCI | 0.0456 ± 0.0058 | 0.0110 ± 0.0029 |
| E-XCI | 0.0412 ± 0.0055 | 0.0078 ± 0.0024 |
| PedGene-Burden | XCI | 0.0506 ± 0.0061 | 0.0092 ± 0.0026 |
| E-XCI | 0.3485 ± 0.0132 | 0.1532 ± 0.0100 |
| PedGene-Kernel | XCI | 0.0424 ± 0.0056 | 0.0076 ± 0.0024 |
| E-XCI | 0.0810 ± 0.0076 | 0.0208 ± 0.0040 |

**Table 4.5 Empirical type-1 error estimates for S-XCI when prevalence for males and females are different.** The prevalences for male and female are assumed to be 0.36 and 0.12, respectively. Empirical type-1 errors were calculated for five different family structures (A-1) – (A-5). The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of family** | **Statistics** | **Biological Model** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| **(A-1)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0548 ± 0.0063 | 0.0102 ± 0.0028 |
| S-XCI  to deleterious allele | 0.0506 ± 0.0061 | 0.0086 ± 0.0026 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0540 ± 0.0063 | 0.0116 ± 0.0030 |
| S-XCI  to deleterious allele | 0.0532 ± 0.0062 | 0.0122 ± 0.0030 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0560 ± 0.0064 | 0.0110 ± 0.0029 |
| S-XCI  to deleterious allele | 0.0477 ± 0.0059 | 0.0099 ± 0.0027 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0452 ± 0.0058 | 0.0106 ± 0.0028 |
| S-XCI  to deleterious allele | 0.0438 ± 0.0057 | 0.0110 ± 0.0029 |
| **(A-2)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0574 ± 0.0064 | 0.0132 ± 0.0032 |
| S-XCI  to deleterious allele | 0.0508 ± 0.0061 | 0.0094 ± 0.0027 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0514 ± 0.0061 | 0.0118 ± 0.0030 |
| S-XCI  to deleterious allele | 0.0502 ± 0.0061 | 0.0092 ± 0.0026 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0615 ± 0.0067 | 0.0162 ± 0.0035 |
| S-XCI  to deleterious allele | 0.0446 ± 0.0057 | 0.0104 ± 0.0028 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0518 ± 0.0061 | 0.0132 ± 0.0032 |
| S-XCI  to deleterious allele | 0.0456 ± 0.0058 | 0.0106 ± 0.0028 |
| **(A-3)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0490 ± 0.0060 | 0.0094 ± 0.0027 |
| S-XCI  to deleterious allele | 0.0536 ± 0.0062 | 0.0094 ± 0.0027 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0484 ± 0.0059 | 0.0086 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0478 ± 0.0059 | 0.0080 ± 0.0025 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0441 ± 0.0057 | 0.0078 ± 0.0024 |
| S-XCI  to deleterious allele | 0.0511 ± 0.0061 | 0.0096 ± 0.0027 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0382 ± 0.0053 | 0.0070 ± 0.0023 |
| S-XCI  to deleterious allele | 0.0416 ± 0.0055 | 0.0098 ± 0.0027 |
| **(A-4)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0540 ± 0.0063 | 0.0104 ± 0.0028 |
| S-XCI  to deleterious allele | 0.0464 ± 0.0058 | 0.0094 ± 0.0027 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0450 ± 0.0057 | 0.0082 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0472 ± 0.0059 | 0.0078 ± 0.0024 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0502 ± 0.0061 | 0.0099 ± 0.0027 |
| S-XCI  to deleterious allele | 0.0451 ± 0.0058 | 0.0075 ± 0.0024 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0426 ± 0.0056 | 0.0080 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0382 ± 0.0053 | 0.0074 ± 0.0024 |
| **(A-5)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0520 ± 0.0062 | 0.0096 ± 0.0027 |
| S-XCI  to deleterious allele | 0.0512 ± 0.0061 | 0.0104 ± 0.0028 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0424 ± 0.0056 | 0.0074 ± 0.0024 |
| S-XCI  to deleterious allele | 0.0470 ± 0.0059 | 0.0086 ± 0.0026 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0518 ± 0.0061 | 0.0072 ± 0.0023 |
| S-XCI  to deleterious allele | 0.0518 ± 0.0061 | 0.0135 ± 0.0032 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0390 ± 0.0054 | 0.0074 ± 0.0024 |
| S-XCI  to deleterious allele | 0.0466 ± 0.0058 | 0.0098 ± 0.0027 |

**Table 4.6 Empirical type-1 error estimates for XCI or E-XCI when prevalence for males and females are different.** The prevalences for male and female are assumed to be 0.12 and 0.36, respectively. Empirical type-1 errors were calculated for five different family structures (A-1) – (A-5). The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of family** | **Statistics** | **Biological Model** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| **(A-1)** | ***FARVAT*-*XB*** | XCI | 0.0558 ± 0.0064 | 0.0094 ± 0.0027 |
| E-XCI | 0.0560 ± 0.0064 | 0.0138 ± 0.0032 |
| ***FARVAT*-*XC*** | XCI | 0.0518 ± 0.0061 | 0.0090 ± 0.0026 |
| E-XCI | 0.0486 ± 0.0060 | 0.0086 ± 0.0026 |
| ***FARVAT*-*XO*** | XCI | 0.0542 ± 0.0063 | 0.0092 ± 0.0027 |
| E-XCI | 0.0501 ± 0.0060 | 0.0159 ± 0.0035 |
| ***FARVAT*-*XD*** | XCI | 0.0426 ± 0.0056 | 0.0080 ± 0.0025 |
| E-XCI | 0.0464 ± 0.0058 | 0.0100 ± 0.0028 |
| PedGene-Burden | XCI | 0.0472 ± 0.0059 | 0.0106 ± 0.0028 |
| E-XCI | 0.3075 ± 0.0128 | 0.1290 ± 0.0093 |
| PedGene-Kernel | XCI | 0.0486 ± 0.0060 | 0.0090 ± 0.0026 |
| E-XCI | 0.0806 ± 0.0075 | 0.0138 ± 0.0032 |
| **(A-2)** | ***FARVAT*-*XB*** | XCI | 0.0540 ± 0.0063 | 0.0106 ± 0.0028 |
| E-XCI | 0.0500 ± 0.0060 | 0.0110 ± 0.0029 |
| ***FARVAT*-*XC*** | XCI | 0.0576 ± 0.0065 | 0.0134 ± 0.0032 |
| E-XCI | 0.0522 ± 0.0062 | 0.0108 ± 0.0029 |
| ***FARVAT*-*XO*** | XCI | 0.0580 ± 0.0065 | 0.0140 ± 0.0033 |
| E-XCI | 0.0517 ± 0.0061 | 0.0118 ± 0.0030 |
| ***FARVAT*-*XD*** | XCI | 0.0500 ± 0.0060 | 0.0094 ± 0.0027 |
| E-XCI | 0.0450 ± 0.0057 | 0.0090 ± 0.0026 |
| PedGene-Burden | XCI | 0.0408 ± 0.0055 | 0.0076 ± 0.0024 |
| E-XCI | 0.0646 ± 0.0068 | 0.0168 ± 0.0036 |
| PedGene-Kernel | XCI | 0.0460 ± 0.0058 | 0.0078 ± 0.0024 |
| E-XCI | 0.0458 ± 0.0058 | 0.0054 ± 0.0020 |
| **(A-3)** | ***FARVAT*-*XB*** | XCI | 0.0524 ± 0.0062 | 0.0112 ± 0.0029 |
| E-XCI | 0.0514 ± 0.0061 | 0.0114 ± 0.0029 |
| ***FARVAT*-*XC*** | XCI | 0.0474 ± 0.0059 | 0.0100 ± 0.0028 |
| E-XCI | 0.0482 ± 0.0059 | 0.0094 ± 0.0027 |
| ***FARVAT*-*XO*** | XCI | 0.0532 ± 0.0062 | 0.0146 ± 0.0033 |
| E-XCI | 0.0523 ± 0.0062 | 0.0104 ± 0.0028 |
| ***FARVAT*-*XD*** | XCI | 0.0424 ± 0.0056 | 0.0098 ± 0.0027 |
| E-XCI | 0.0470 ± 0.0059 | 0.0090 ± 0.0026 |
| PedGene-Burden | XCI | 0.0504 ± 0.0061 | 0.0102 ± 0.0028 |
| E-XCI | 0.0482 ± 0.0059 | 0.0124 ± 0.0031 |
| PedGene-Kernel | XCI | 0.0368 ± 0.0052 | 0.0062 ± 0.0022 |
| E-XCI | 0.0462 ± 0.0058 | 0.0064 ± 0.0022 |
| **(A-4)** | ***FARVAT*-*XB*** | XCI | 0.0522 ± 0.0062 | 0.0084 ± 0.0025 |
| E-XCI | 0.0508 ± 0.0061 | 0.0112 ± 0.0029 |
| ***FARVAT*-*XC*** | XCI | 0.0502 ± 0.0061 | 0.0110 ± 0.0029 |
| E-XCI | 0.0512 ± 0.0061 | 0.0108 ± 0.0029 |
| ***FARVAT*-*XO*** | XCI | 0.0463 ± 0.0058 | 0.0126 ± 0.0031 |
| E-XCI | 0.0541 ± 0.0063 | 0.0103 ± 0.0028 |
| ***FARVAT*-*XD*** | XCI | 0.0462 ± 0.0058 | 0.0084 ± 0.0025 |
| E-XCI | 0.0486 ± 0.0060 | 0.0090 ± 0.0026 |
| PedGene-Burden | XCI | 0.0462 ± 0.0058 | 0.0084 ± 0.0025 |
| E-XCI | 0.0750 ± 0.0073 | 0.0192 ± 0.0038 |
| PedGene-Kernel | XCI | 0.0440 ± 0.0057 | 0.0086 ± 0.0026 |
| E-XCI | 0.0478 ± 0.0059 | 0.0074 ± 0.0024 |
| **(A-5)** | ***FARVAT*-*XB*** | XCI | 0.0520 ± 0.0062 | 0.0114 ± 0.0029 |
| E-XCI | 0.0566 ± 0.0064 | 0.0114 ± 0.0029 |
| ***FARVAT*-*XC*** | XCI | 0.0480 ± 0.0059 | 0.0088 ± 0.0026 |
| E-XCI | 0.0454 ± 0.0058 | 0.0102 ± 0.0028 |
| ***FARVAT*-*XO*** | XCI | 0.0546 ± 0.0063 | 0.0088 ± 0.0026 |
| E-XCI | 0.0520 ± 0.0062 | 0.0116 ± 0.0030 |
| ***FARVAT*-*XD*** | XCI | 0.0424 ± 0.0056 | 0.0096 ± 0.0027 |
| E-XCI | 0.0436 ± 0.0057 | 0.0094 ± 0.0027 |
| PedGene-Burden | XCI | 0.0460 ± 0.0058 | 0.0074 ± 0.0024 |
| E-XCI | 0.1842 ± 0.0107 | 0.0670 ± 0.0069 |
| PedGene-Kernel | XCI | 0.0398 ± 0.0054 | 0.0074 ± 0.0024 |
| E-XCI | 0.0608 ± 0.0066 | 0.0118 ± 0.0030 |

**Table 4.7 Empirical type-1 error estimates for S-XCI when prevalence for males and females are different.** The prevalences for male and female are assumed to be 0.12 and 0.36, respectively. Empirical type-1 errors were calculated for five different family structures (A-1) – (A-5). The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of family** | **Statistics** | **Biological Model** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| **(A-1)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0524 ± 0.0062 | 0.0118 ± 0.0030 |
| S-XCI  to deleterious allele | 0.0476 ± 0.0059 | 0.0092 ± 0.0026 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0494 ± 0.0060 | 0.0108 ± 0.0029 |
| S-XCI  to deleterious allele | 0.0498 ± 0.0060 | 0.0098 ± 0.0027 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0492 ± 0.0060 | 0.0123 ± 0.0031 |
| S-XCI  to deleterious allele | 0.0453 ± 0.0058 | 0.0087 ± 0.0026 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0456 ± 0.0058 | 0.0094 ± 0.0027 |
| S-XCI  to deleterious allele | 0.0424 ± 0.0056 | 0.0062 ± 0.0022 |
| **(A-2)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0500 ± 0.0060 | 0.0088 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0494 ± 0.0060 | 0.0104 ± 0.0028 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0466 ± 0.0058 | 0.0094 ± 0.0027 |
| S-XCI  to deleterious allele | 0.0508 ± 0.0061 | 0.0108 ± 0.0029 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0453 ± 0.0058 | 0.0090 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0484 ± 0.0059 | 0.0142 ± 0.0033 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0428 ± 0.0056 | 0.0088 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0436 ± 0.0057 | 0.0090 ± 0.0026 |
| **(A-3)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0508 ± 0.0061 | 0.0106 ± 0.0028 |
| S-XCI  to deleterious allele | 0.0486 ± 0.0060 | 0.0098 ± 0.0027 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0476 ± 0.0059 | 0.0082 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0446 ± 0.0057 | 0.0102 ± 0.0028 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0456 ± 0.0058 | 0.0106 ± 0.0028 |
| S-XCI  to deleterious allele | 0.0447 ± 0.0057 | 0.0100 ± 0.0028 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0410 ± 0.0055 | 0.0088 ± 0.0026 |
| S-XCI  to deleterious allele | 0.0420 ± 0.0056 | 0.0082 ± 0.0025 |
| **(A-4)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0494 ± 0.0060 | 0.0070 ± 0.0023 |
| S-XCI  to deleterious allele | 0.0562 ± 0.0064 | 0.0120 ± 0.0030 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0436 ± 0.0057 | 0.0080 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0476 ± 0.0059 | 0.0094 ± 0.0027 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0507 ± 0.0061 | 0.0093 ± 0.0027 |
| S-XCI  to deleterious allele | 0.0511 ± 0.0061 | 0.0063 ± 0.0022 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0400 ± 0.0054 | 0.0066 ± 0.0022 |
| S-XCI  to deleterious allele | 0.0494 ± 0.0060 | 0.0098 ± 0.0027 |
| **(A-5)** | ***FARVAT*-*XB*** | S-XCI  to normal allele | 0.0436 ± 0.0057 | 0.0084 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0482 ± 0.0059 | 0.0092 ± 0.0026 |
| ***FARVAT*-*XC*** | S-XCI  to normal allele | 0.0412 ± 0.0055 | 0.0082 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0502 ± 0.0061 | 0.0106 ± 0.0028 |
| ***FARVAT*-*XO*** | S-XCI  to normal allele | 0.0459 ± 0.0058 | 0.0084 ± 0.0025 |
| S-XCI  to deleterious allele | 0.0569 ± 0.0064 | 0.0116 ± 0.0030 |
| ***FARVAT*-*XD*** | S-XCI  to normal allele | 0.0364 ± 0.0052 | 0.0064 ± 0.0022 |
| S-XCI  to deleterious allele | 0.0446 ± 0.0057 | 0.0092 ± 0.0026 |

In order to evaluate statistical efficiency, we considered five different extended family structures (A-1) – (A-5), and calculated the empirical power estimates for each. We assumed that there are 30 rare variants in each gene and 20 of them are causal. The number of deleterious causal rare variants was assumed to be 10, 12, 16, or 20. We assumed that *ha*2 was 0.01 and empirical power values at the 0.05 significance level were estimated with 5,000 replicates. Figure 4.2, 4.3, and 4.4 show that ***FARVAT*-*XB*** was the most powerful statistic if all risk variants are deleterious. If half of rare causal variants were deleterious and the other rare causal variants were protective, ***FARVAT*-*XC*** was the most powerful statistic. ***FARVAT*-*XO*** and ***FARVAT*-*XD*** were not always most efficient, but differences of power estimates among ***FARVAT*-*XO***, ***FARVAT*-*XD*** and the most efficient statistic were always small. It should be noted that ***FARVAT*-*XD*** is robust against the choice of mis-specified *d*. Figure 4.5 shows that PedGene-Burden is the most efficient statistic under E-XCI if all rare causal variants were deleterious, but it should be noted that empirical type-1 errors from PedGene-Burden were violated.

**Figure 4.2 Empirical power estimates for random XCI.** Empirical powers were calculated for five different extended family structures (A-1) – (A-5). *ha*2 was assumed to be 0.01 and the empirical power estimates were calculated with 5,000 replicates. We assumed that there are 30 rare variants, and among them 20 rare variants are causal. Rare causal variants can have either deleterious or protective effect on disease, and the number of causal rare variants with deleterious effect was assumed to be 10, 12, 16, or 20.

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**Figure 4.3 Empirical power estimates for S-XCI to normal allele.** Empirical powers were calculated for five different extended family structures (A-1) – (A-5). *ha*2 was assumed to be 0.01 and the empirical power estimates were calculated with 5,000 replicates. We assumed that there are 30 rare variants, and among them 20 rare variants are causal. Rare causal variants can have either deleterious or protective effect on disease, and the number of causal rare variants with deleterious effect was assumed to be 10, 12, 16, or 20.

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**Figure 4.4 Empirical power estimates for S-XCI to deleterious allele.** Empirical powers were calculated for five different extended family structures (A-1) – (A-5). *ha*2 was assumed to be 0.01 and the empirical power estimates were calculated with 5,000 replicates. We assumed that there are 30 rare variants, and among them 20 rare variants are causal. Rare causal variants can have either deleterious or protective effect on disease, and the number of causal rare variants with deleterious effect was assumed to be 10, 12, 16, or 20.

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**Figure 4.5 Empirical power estimates for E-XCI.** Empirical powers were calculated for five different extended family structures (A-1) – (A-5). *ha*2 was assumed to be 0.01 and the empirical power estimates were calculated with 5,000 replicates. We assumed that there are 30 rare variants, and among them 20 rare variants are causal. Rare causal variants can have either deleterious or protective effect on disease, and the number of causal rare variants with deleterious effect was assumed to be 10, 12, 16, or 20.



**4.3.3 Evaluation with simulated data in the presence of population substructure**

We estimated the type-1 error rate and power for the proposed methods in the presence of population substructure, and compared them to the same statistics from PedGene-Burden and PedGene-Kernel. In our proposed method, the presence of population substructure can be handled by adjusting the phenotypes with an EIGENSTRAT-based approach [[Schaid, et al. 2013](#_ENREF_77); [Won, et al. 2012](#_ENREF_97)]. Specifically, principal component (PC) scores were estimated from the genetic relation matrix [[Price, et al. 2006](#_ENREF_71)], and phenotypes were regressed on PC scores with the linear mixed model, which considers the correlation between family members. Residuals were then utilized as *tij* for the proposed methods. The type-1 error estimates for trios were calculated at the 0.05 and 0.01 significance levels with 5,000 replicates. We assumed that there were 30 rare variants available in a gene and family structure (B-1) and (B-2) in Figure 4.1. Table 4.8 shows inflation of type-1 error estimates for all methods unless phenotypes are adjusted with PC scores, and, in particular, PedGene-Kernel has the largest bias of type-1 error estimates.

The statistical efficiency was also evaluated with 5,000 replicates at the 0.05 significance level in the presence of population substructure. We assumed that *ha*2 is 0.05, and that there are 30 rare variants in a gene. Twenty rare variants were assumed to be causal, and each causal variant can have either deleterious or protective effects on phenotypes. Figure 4.6 shows that ***FARVAT*-*XB*** was the most efficient when all rare causal variants are deleterious, and PedGene-Kernel was the most powerful if 50% of rare causal variants was deleterious. ***FARVAT*-*XO*** and ***FARVAT*-*XD*** are not always the most efficient, but their power loss when compared to the most efficient statistic is always small.

**Table 4.8 Empirical type-1 error estimates for random XCI in the presence of population substructure.** Empirical type-1 errors were calculated for two different trios structures (B-1) and (B-2). The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***F*ST** | **Statistics** | **No adjustment with PC scores** | | **Adjustment with PC scores** | |
| **α=.05(95%CI)** | **α=.01(95%CI)** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| 0 | ***FARVAT-XB*** | 0.0470 ± 0.0059 | 0.0100 ± 0.0028 | 0.0516 ± 0.0061 | 0.0086 ± 0.0026 |
| ***FARVAT-XC*** | 0.0416 ± 0.0055 | 0.0072 ± 0.0023 | 0.0324 ± 0.0049 | 0.0044 ± 0.0018 |
| ***FARVAT-XO*** | 0.0479 ± 0.0059 | 0.0111 ± 0.0029 | 0.0479 ± 0.0059 | 0.0087 ± 0.0026 |
| ***FARVAT*-*XD*** | 0.0388 ± 0.0054 | 0.0070 ± 0.0023 | 0.348 ± 0.0051 | 0.0050 ± 0.0020 |
| PedGene-Burden | 0.0380 ± 0.0053 | 0.0066 ± 0.0022 | 0.0386 ± 0.0053 | 0.0062 ± 0.0022 |
| PedGene-Kernel | 0.0484 ± 0.0059 | 0.0070 ± 0.0023 | 0.0482 ± 0.0059 | 0.0068 ± 0.0023 |
| 0.005 | ***FARVAT-XB*** | 0.0458 ± 0.0058 | 0.0092 ± 0.0026 | 0.0440 ± 0.0057 | 0.0100 ± 0.0028 |
| ***FARVAT-XC*** | 0.0436 ± 0.0057 | 0.0074 ± 0.0024 | 0.0324 ± 0.0049 | 0.0058 ± 0.0021 |
| ***FARVAT-XO*** | 0.0489 ± 0.0060 | 0.0113 ± 0.0029 | 0.0388 ± 0.0054 | 0.0069 ± 0.0023 |
| ***FARVAT*-*XD*** | 0.0344 ± 0.0051 | 0.0072 ± 0.0023 | 0.0296 ± 0.0047 | 0.0058 ± 0.0021 |
| PedGene-Burden | 0.0400 ± 0.0054 | 0.0078 ± 0.0024 | 0.0366 ± 0.0052 | 0.0064 ± 0.0022 |
| PedGene-Kernel | 0.0670 ± 0.0069 | 0.0090 ± 0.0026 | 0.0450 ± 0.0057 | 0.0082 ± 0.0025 |
| 0.01 | ***FARVAT-XB*** | 0.0544 ± 0.0063 | 0.0124 ± 0.0031 | 0.0530 ± 0.0062 | 0.0086 ± 0.0026 |
| ***FARVAT-XC*** | 0.0538 ± 0.0063 | 0.0102 ± 0.0028 | 0.0308 ± 0.0048 | 0.0048 ± 0.0019 |
| ***FARVAT-XO*** | 0.0522 ± 0.0062 | 0.0110 ± 0.0029 | 0.0429 ± 0.0056 | 0.0057 ± 0.0021 |
| ***FARVAT*-*XD*** | 0.0440 ± 0.0057 | 0.0096 ± 0.0027 | 0.0346 ± 0.0051 | 0.0052 ± 0.0020 |
| PedGene-Burden | 0.0482 ± 0.0059 | 0.0098 ± 0.0027 | 0.0434 ± 0.0056 | 0.0060 ± 0.0021 |
| PedGene-Kernel | 0.0726 ± 0.0072 | 0.0150 ± 0.0034 | 0.0484 ± 0.0059 | 0.0066 ± 0.0022 |
| 0.05 | ***FARVAT-XB*** | 0.0564 ± 0.0064 | 0.0130 ± 0.0031 | 0.0424 ± 0.0056 | 0.0082 ± 0.0025 |
| ***FARVAT-XC*** | 0.0818 ± 0.0076 | 0.0166 ± 0.0035 | 0.0410 ± 0.0055 | 0.0074 ± 0.0024 |
| ***FARVAT-XO*** | 0.0646 ± 0.0068 | 0.0120 ± 0.0030 | 0.0355 ± 0.0051 | 0.0060 ± 0.0021 |
| ***FARVAT*-*XD*** | 0.0590 ± 0.0065 | 0.0128 ± 0.0031 | 0.0356 ± 0.0051 | 0.0060 ± 0.0021 |
| PedGene-Burden | 0.0544 ± 0.0063 | 0.0106 ± 0.0028 | 0.0340 ± 0.0050 | 0.0064 ± 0.0022 |
| PedGene-Kernel | 0.1444 ± 0.0097 | 0.0426 ± 0.0056 | 0.0496 ± 0.0060 | 0.0082 ± 0.0025 |

**Figure 4.6 Empirical power estimates for random XCI in the presence of population substructure.** Empirical powers were calculated for two different trio structures (B-1) and (B-2). *ha*2 was assumed to be 0.05 and the empirical power estimates were calculated with 5,000 replicates. We assumed that there are 30 rare variants, and among them 20 rare variants are causal. Rare causal variants can have either deleterious or protective effect on disease, and the number of causal rare variants with deleterious effect was assumed to be 10, 12, 16, or 20.

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**4.3.4 Evaluation of robustness against biological expression process**

The gene expression process of X-linked variants is usually unknown, and the misspecified gene expression process may affect the performance of the proposed methods. We evaluated the robustness of the proposed methods with simulated data for (A-3) family structure. The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels and Table 4.9 shows that type-1 error estimates of ***FARVAT*-*XO*** and ***FARVAT*-*XD*** consistently preserved the nominal significance levels. For evaluation of statistical powers, *ha*2 was assumed to be 0.01 and the empirical power estimates were calculated with 5,000 replicates. We assumed that there are 30 rare variants, and among them 20 rare variants are causal. Figure 4.7 shows that ***FARVAT*-*XO*** with correctly specified biological model is the most efficient, but if it is misspecified, the power loss is usually substantial. ***FARVAT-XD*** is not the most efficient but the difference of its statistical powers with those for ***FARVAT-XO*** with correctly specified biological modelis very small. Therefore, we can conclude that the performance of ***FARVAT*-*XO*** is affected by choice of *d*, and ***FARVAT*-*XD*** is generally a robust choice for various biological processes.

**Table 4.9 Empirical type-1 error estimates when the gene expression process of X-linked variants are misspecified.** Empirical type-1 errors were calculated for (A-3) family structure. The empirical type-1 error estimates were calculated with 5,000 replicates at the 0.05 and 0.01 significance levels.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Biological Model** | **Statistics** | **Assumed Biological Model** | **α=.05(95%CI)** | **α=.01(95%CI)** |
| XCI | ***FARVAT-XO*** | XCI | 0.0506 ± 0.0061 | 0.0116 ± 0.0030 |
| E-XCI | 0.0535 ± 0.0062 | 0.0100 ± 0.0028 |
| S-XCI to normal allele | 0.0506 ± 0.0061 | 0.0104 ± 0.0028 |
| S-XCI to deleterious allele | 0.0531 ± 0.0062 | 0.0100 ± 0.0028 |
| ***FARVAT-XD*** | - | 0.0454 ± 0.0058 | 0.0096 ± 0.0027 |
| E-XCI | ***FARVAT-XO*** | XCI | 0.0477 ± 0.0059 | 0.0078 ± 0.0024 |
| E-XCI | 0.0465 ± 0.0058 | 0.0116 ± 0.0030 |
| S-XCI to normal allele | 0.0531 ± 0.0062 | 0.0081 ± 0.0025 |
| S-XCI to deleterious allele | 0.0446 ± 0.0057 | 0.0097 ± 0.0027 |
| ***FARVAT-XD*** | - | 0.0458 ± 0.0058 | 0.0082 ± 0.0025 |
| S-XCI  to normal allele | ***FARVAT-XO*** | XCI | 0.0484 ± 0.0060 | 0.0093 ± 0.0027 |
| E-XCI | 0.0521 ± 0.0062 | 0.0109 ± 0.0029 |
| S-XCI to normal allele | 0.0464 ± 0.0058 | 0.0081 ± 0.0025 |
| S-XCI to deleterious allele | 0.0464 ± 0.0058 | 0.0101 ± 0.0028 |
| ***FARVAT-XD*** | - | 0.0388 ± 0.0054 | 0.0088 ± 0.0026 |
| S-XCI  to deleterious allele | ***FARVAT-XO*** | XCI | 0.0509 ± 0.0061 | 0.0108 ± 0.0029 |
| E-XCI | 0.0542 ± 0.0063 | 0.0092 ± 0.0026 |
| S-XCI to normal allele | 0.0530 ± 0.0062 | 0.0113 ± 0.0029 |
| S-XCI to deleterious allele | 0.0521 ± 0.0062 | 0.0092 ± 0.0026 |
| ***FARVAT-XD*** | - | 0.0454 ± 0.0058 | 0.0096 ± 0.0027 |

**Figure 4.7 Empirical power estimates when the gene expression processes of X-linked variants are misspecified.** Empirical powers were calculated for (A-3) family structure. *ha*2 was assumed to be 0.01 and the empirical power estimates were calculated with 5,000 replicates. We assumed that there are 30 rare variants, and among them 20 rare variants are causal. Rare causal variants can have either deleterious or protective effect on disease, and the number of causal rare variants with deleterious effect was assumed to be 10, 12, 16, or 20.

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**4.4 Application to chronic obstructive pulmonary disease data**

The proposed methods were applied to rare variant association analyses of COPD using families from the Boston Early-Onset COPD Study with whole exome sequencing. Using moderate COPD or greater (FEV1 < 80% predicted with FEV1/FVC < 0.7) to define affection status, there were 64 unaffected males, 83 unaffected females, 55 affected males, and 100 affected females. There were 49 families and each family had at least two affected individuals. The whole exome of all individuals was sequenced with a Nimblegen V2 capture and Illumina platform. Sequencing data were preprocessed with the Genome Analysis ToolKit [[McKenna, et al. 2010](#_ENREF_61)]. SNVs with Mendelian transmission errors, missing call rates (>1%), significant deviation from Hardy–Weinberg equilibrium (P<10-8), read depth less than the average (12), and minor allele count of all variants in each gene (<5) were excluded. Seven genes in pseudo-autosomal regions and 186 genes with a single rare variant were excluded from our analyses. In total, we analyzed 629 rare variants in 183 genes on the X chromosome. There were 35,326 common autosomal variants with a MAF larger than 0.05, and they were utilized to calculate the genetic relationship matrix. Figure 4.8 shows the genetic relationships of the dataset on the first five PC scores.

**Figure 4.8 Pairwise plots of PC scores.**

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Phenotypes were regressed with age, pack years, height, and 5 PC scores from the EIGENSTRAT method [[Price, et al. 2006](#_ENREF_71)], and residuals were utilized as response variables to provide robustness of the proposed methods against population substructure. Figures 4.9 and 4.10 show quantile-quantile (QQ) plots of PedGene-Burden, PedGene-Kernel, and the proposed methods. QQ plots for PedGene-Burden and PedGene-Kernel show some evidence about inflation under random XCI and E-XCI, whereas the proposed methods are consistently valid. The most significant results were summarized in Table 4.10 The 0.05 exome-wide significant level adjusted by Bonferroni correction is 2.7E-04, and *q*-values [[Storey 2002](#_ENREF_84)] were also provided in Table 4.10. Table 4.10 showed one exome-wide significant gene, *CXorf59* gene, with PedGene-Kernel for random XCI. However some inflation of results from PedGene-Kernel was confirmed with QQ plots and is not clear whether this significant association is valid. Some other promising results are also summarized in Table 4.10 and the second most significant results were obtained for the synovial sarcoma on X chromosome 5 (*SSX5*) gene using the proposed method. The significant association of *SYT-SSX* fusion gene with primary synovial sarcoma of the lung was reported [[Hisaoka, et al. 1999](#_ENREF_37)], and the expression of SSX family genes (*SSX1*, *SSX2*, *SSX4*, and *SSX5*) were known to be related with lung cancer [[Tureci, et al. 1998](#_ENREF_90)]. Furthermore, the *COL4A6* isoform have been shown to be more highly expressed in lung [[Hudson, et al. 1993](#_ENREF_39)] and these significant results will be investigated as further studies.

**Table 4.10 Most significant results from rare variant association analyses of COPD data.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Models | GENE | *M* | MAC | | ***FARVAT*-*XB*** | | ***FARVAT*-*XC*** | | ***FARVAT*-*XO*** | | ***FARVAT*-*XD*** | | PedGene-Burden | | PedGene-Kernel | |
| Aff | Un. | *p* | *q* | *p* | *q* | *p* | *q* | *p* | *q* | *p* | *q* | *p* | *q* |
| XCI | *CXorf59* | 2 | 2 | 7 | 0.165 | 0.798 | 0.016 | 0.590 | 0.026 | 0.425 | 0.039 | 0.552 | 0.001 | 0.205 | 1.6E-06 | 2.9E-04 |
| *MTMR8* | 6 | 5 | 1 | 0.005 | 0.442 | 0.063 | 0.607 | 0.007 | 0.420 | 0.013 | 0.552 | 0.180 | 0.841 | 0.191 | 0.734 |
| *SSX5* | 2 | 5 | 2 | 0.512 | 0.895 | 0.002 | 0.419 | 0.003 | 0.420 | 0.035 | 0.552 | 0.026 | 0.547 | 0.093 | 0.698 |
| E-XCI | *CXorf59* | 2 | 2 | 7 | 0.372 | 0.891 | 0.120 | 0.662 | 0.174 | 0.670 | 0.003 | 0.624 | 0.015 | 0.484 | 3.6E-05 | 0.006 |
| *ELF4* | 4 | 13 | 5 | 0.919 | 0.957 | 0.934 | 0.955 | 0.964 | 0.969 | 0.784 | 0.903 | 0.003 | 0.484 | 0.034 | 0.330 |
| *MTMR8* | 6 | 5 | 1 | 0.006 | 0.423 | 0.051 | 0.632 | 0.009 | 0.493 | 0.377 | 0.865 | 0.077 | 0.715 | 0.030 | 0.330 |
| *SSX5* | 2 | 5 | 2 | 0.761 | 0.957 | 0.003 | 0.397 | 0.003 | 0.493 | 0.026 | 0.637 | 0.025 | 0.484 | 0.059 | 0.387 |
| S-XCI  to  normal allele | *COL4A6* | 7 | 18 | 21 | 0.002 | 0.316 | 0.022 | 0.677 | 0.003 | 0.459 | 0.007 | 0.552 |  | | | |
| *CXorf59* | 2 | 2 | 7 | 0.094 | 0.783 | 0.005 | 0.524 | 0.008 | 0.459 | 0.039 | 0.552 |
| S-XCI  to  deleterious allele | *MTMR8* | 6 | 5 | 1 | 0.005 | 0.482 | 0.050 | 0.579 | 0.007 | 0.424 | 0.013 | 0.552 |
| *SSX5* | 2 | 5 | 2 | 0.650 | 0.917 | 0.002 | 0.378 | 0.002 | 0.407 | 0.035 | 0.552 |

*Notes*. The significant results for ***FARVAT***-***XB***, ***FARVAT***-***XC***, ***FARVAT***-***XO***, ***FARVAT***-***XD***, PedGene-Burden, and PedGene-Kernel are provided. The 0.05 exome-wide significant level adjusted by Bonferroni correction is 2.7E-04, and *q*-values [[Storey 2002](#_ENREF_84)] are provided. *M* indicates the number of rare variant in a gene, and MAC indicates the minor allele counts.

**Figure 4.9 QQ-plots of results from rare variant association analyses of COPD.** QQ-plots are provided for PedGene-Burden, and PedGene-Kernel, and their 95% confidence interval is provided. Age, Pack-years of smoking, height, and 5 PCs were included as covariates for the linear mixed model and BLUP was utilized as offset.



**Figure 4.10 QQ plots of results from rare variant association analyses of COPD.** QQ plots are provided for ***FARVAT***-***XB***, ***FARVAT***-***XC,*** ***FARVAT***-***XO***, and ***FARVAT-XD***, and their 95% confidence interval is provided. Age, Pack-years of smoking, height, and 5 PCs were included as covariates for the linear mixed model, and BLUP was utilized as offset.



**4.5 Discussion**

X-linked genes contribute to various biological mechanisms, including sexual dimorphism [[Carrel and Willard 2005](#_ENREF_17); [Ober, et al. 2008](#_ENREF_67); [Tarpey, et al. 2009](#_ENREF_86)]. However, the complex biological processes associated with the expression of X-linked genes, such as random XCI, E-XCI, and S-XCI, complicate genetic association analyses with X-linked genes. Several methods for rare X-linked variants association analyses have been developed, but most cannot account for biologically plausible models. The limited discovery of significantly associated X-linked variants may be partially attributable to the absence of statistically efficient methods for detecting X-linked variants, and efficient analytical strategies for X-linked variants have been proposed as a potential mechanism to alleviate so-called “missing heritability” problems [[Maher 2008](#_ENREF_57); [Manolio, et al. 2009](#_ENREF_59)].

In this chapter, we proposed a novel method for family-based association test of X-linked genes (***FARVATX***), which can accommodate random XCI, E-XCI, and S-XCI. The performance of ***FARVATX*** was evaluated with simulated data. We assumed that the magnitude of X-linked gene expression differed by gender and that the proportion of males and females in each family was different. The results from the simulation studies showed that PedGene-Burden and PedGene-Kernel statistics suffer from inflation of the type 1 error rate if the proportions of males and females are different or population substructure is present. However, ***FARVATX*** preserves the nominal significance level in both the absence and presence of population substructure.

Furthermore, ***FARVATX*** is computationally less intensive than other available methods. Its application to sequencing data for COPD was completed within an hour. ***FARVATX*** software supports various input file formats, including plink and variant call format files, and multi-threaded analyses can be automatically conducted. The software for the proposed methods is written in C++ and can be downloaded from http://healthstat.snu.ac.kr/software/farvatx/.

Despite the analytical flexibility of the proposed methods, there are still some limitations. First, we found that the proposed methods are slightly conservative unless the sample size is sufficiently large, and it has been shown that small sample size adjustments by using resampling method leads to additional power improvement [[Lee, et al. 2012a](#_ENREF_49)]. Second, the statistical power depends on the definition of rare variants, but it is still unclear. A variable threshold approach [[Price, et al. 2010](#_ENREF_70)] that exhaustively searches the optimal MAF threshold may be a useful option for addressing this issue, and further extensions for the proposed methods are necessary. Third, the proposed methods assume that MAFs are same for males and females under the null hypothesis, and effects of each genetic variant for males and females are similar under the alternative hypothesis. If these are not satisfied, the false negative finding rates for the former and false positive findings rates for the latter cannot be controlled, and males and females should be separately analyzed. These problems will be investigated in future studies.

The recent rapid improvement of sequencing technology provides the opportunity to identify rare X-linked variants associated with complex human diseases. However, our understanding of sex-specific genetic architecture and the biological processes associated with the expression of X-linked genes is still limited, and statistical methodology development to uncover them is necessary. The proposed methods may help us identify additional rare X-linked variants associated with complex traits, thereby leading to about a better understanding of the underlying biological processes associated with X-linked genes.

**Chapter 5**

**Summary & Conclusions**

Traditional genome-wide association studies (GWAS) have successfully identified more than 10,000 common variants associated with human complex traits in the last decade. Owing to the recent developments in next-generation sequencing (NGS) technologies, the NGS data will enable association studies on rare variants. Recently, many statistical methods have been proposed to detect novel rare variants related to human diseases. These methods, however, have been limited to the population-based design, and there are few statistical methods for analysis family data. In this thesis, we focused on family-based association test statistics for rare variants.

In chapter 3, we proposed a family-based rare-variant association test (***FARVAT***). The ***FARVAT*** method may be extended to various kinds of statistical methods such as the burden-type, variance component-type, or optimal-type methods depending on the choice of the working matrix in the family-based design. The performance of ***FARVAT*** method was evaluated with simulated data in the presence or absence of the population substructure. The results of the simulation studies showed that ***FARVATO*** was generally an efficient choice for various disease models. The ***FARVAT*** method was applied to schizophrenia data of 36 trios from Germany. We found a genome-wide significant gene with ***FARVATO***. Furthermore, the ***FARVAT*** software was designed to be computationally efficient to analyze large NGS datasets.

In chapter 4, we focused on identifying rare variants on the X chromosome associated with complex traits. We proposed a family-based rare-variant association test for X-linked genes (***FARVATX***), which can accommodate random XCI, E-XCI, and S-XCI. The ***FARVATX*** method is an extension of ***FARVAT*** from autosomes to the X chromosome. The results of simulation studies revealed that the ***FARVATX*** method ensures global robustness in the presence of biased gender ratios in family structures, and ***FARVAT-XO*** and ***FARVAT-XD*** were generally an efficient choice for various types of biological models. In the analysis of chronic obstructive pulmonary disease (COPD), we found the synovial sarcoma on X chromosome 5 (SSX5) gene by mean of ***FARVATX***; this gene is known to be associated with lung function. Furthermore, the ***FARVATX*** software was found to be computationally more optimal than existing software. For instance, the real data analysis of the COPD dataset was completed within an hour using the FARVATX software.

In summary, the rare variant analysis with family members can lead to identification of rare variants that are more causal. This is because family members are genetically more homogeneous than unrelated samples. Therefore, family-based rare-variant association analysis seems to be both an efficient and cost-effective strategy, and the development of statistical methods for family-based sequencing data is necessary. We developed family-based rare-variant tests for autosomal and X chromosome genes and demonstrated good performance of the proposed methods in simulation studies and real data analyses.

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**초 록**

전장유전체연구(GWAS)는 100,000 - 1,000,000 개의 단일 염기변이(SNP)를 역학자료 혹은 임상자료와 연계시켜 특정 질환과 연관성이 있는 유전자나 원인-유전자 위치를 규명하는 통계 유전체 분석기법을 의미한다. 인간유전체사업(Human Genome Project)의 성공으로 밝혀진 SNP에 대한 정보를 토대로 전장유전체 연구가 활발히 진행되었다. 그 결과 전장 유전체 연구를 통하여 복합질환 (complex disease)과 관련된 후보 유전자들이 성공적으로 발굴 되었다.

전장유전체연구가 성공적으로 진행되었지만, 현재까지 보고된 유전변이들이 질환의 유전율(heritability)을 설명하는 비율이 높지 않다는 문제가 제기되었다. 이러한 문제를 해결하기 위한 대안 중 하나로 희귀변이(rare variant) 연구의 중요성이 대두되었다.

희귀변이는 공통변이(common variant)와 달리, 소수의 사람들 에게서만 발견된다는 점에서 개별인자 단위의 통계적 유의성을 얻기가 쉽지 않으므로 기존의 전장유전체 연관성 분석 방법을 적용하는데 어려움이 있다. 이러한 희귀변이를 유전자 단위로 병합하여 검정하는 방법들이 활발히 연구되고 있으며, 제안된 통계량들은 각기 장단점을 가지고 있고 여러 가지 가정 하에 일관된 검정력을 가지는 방법은 거의 없다. 또한 가족 데이터 기반의 희귀변이 연구를 위한 통계 분석 모형이 활발히 연구되지 않은 상황이다. 그 외에, 남녀에 따라 유전자 발현이 달라지는 X 염색체 상의 유전자에 대한 연관성 분석 방법론 개발이 미비한 실정이다.

이에 본 연구에서는 가족 데이터 기반의 희귀변이 연관분석을 위한 새로운 분석방법(***FARVAT***)과 이를 X chromosome 연구에 확장한 통계모형(***FARVATX***)을 제안하였다. ***FARVAT*** 분석모형은 quasi-likelihood 기반의 가족 데이터를 효율적으로 분석하는 방법으로, 가족 구성원들 간의 유전적 유사성은 kinship coefficient 정보를 활용하였다. ***FARVAT*** 모형은 burden type, variance component type, optimal type 통계량으로 확장이 가능하다. X 염색체 연구에서는, X 염색체불활성화(X chromosome inactivation, XCI)에 대한 다양한 생물학적 모델(XCI, escape-XCI, skewness-XCI)을 고려한 가족기반 rare variant X 염색체 분석모형(***FARVATX***)을 제안하였다. 새롭게 제안한 방법들은 다양한 시뮬레이션 연구를 수행하였고, 실제 데이터에 적용하여 특정질환과 관련된 후보 유전자들을 발굴하였다. 본 논문에서 제시된 방법들이 복합질환에 영향을 미치는 후보 유전자들을 효과적으로 발굴하고 질병의 발생 기작(mechanism)을 연구하는데 활용될 수 있을 것으로 기대된다.

**주요어:** 전장유전체연관성분석, 차세대시퀀싱자료분석, 희귀변이 연관성테스트, 가족 기반 디자인, X 염색체

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