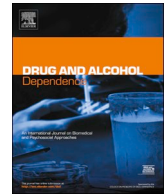




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## Post-GWAS analysis of six substance use traits improves the identification and functional interpretation of genetic risk loci

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## ABSTRACT

**Background:** Little is known about the functional mechanisms through which genetic loci associated with substance use traits ascertain their effect. This study aims to identify and functionally annotate loci associated with substance use traits based on their role in genetic regulation of gene expression.

**Methods:** We evaluated expression Quantitative Trait Loci (eQTLs) from 13 brain regions and whole blood of the Genotype-Tissue Expression (GTEx) database, and from whole blood of the Depression Genes and Networks (DGN) database. The role of single eQTLs was examined for six substance use traits: alcohol consumption (N = 537,349), cigarettes per day (CPD; N = 263,954), former vs. current smoker (N = 312,821), age of smoking initiation (N = 262,990), ever smoker (N = 632,802), and cocaine dependence (N = 4,769). Subsequently, we conducted a gene level analysis of gene expression on these substance use traits using S-PrediXcan.

**Results:** Using an FDR-adjusted p-value < 0.05 we found 2,976 novel candidate genetic loci for substance use traits, and identified genes and tissues through which these loci potentially exert their effects. Using S-PrediXcan, we identified significantly associated genes for all substance traits.

**Discussion:** Annotating genes based on transcriptomic regulation improves the identification and functional characterization of candidate loci and genes for substance use traits.

## 1. Introduction

In recent years, large-scale genome-wide association studies (GWAS) of substance use traits (i.e., substance use disorders and quantitative measures of substance use) have been conducted (Gelernter et al., 2014; Liu et al., 2019). These GWAS revealed multiple

genome-wide significant loci ( $p < 5.0 \cdot 10^{-8}$ ). However, the GWAS approach faces two major challenges. First, the effects of individual single nucleotide polymorphisms (SNPs) are generally small, and a typical GWAS in which single-variant tests of association are performed is generally underpowered to detect trait-associated SNPs with small effect sizes. One possible solution to this problem is to increase sample

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sizes by combining samples in GWAS meta-analyses (Evangelou and Ioannidis, 2013), but even in these studies, the identified loci explain a modest proportion of the trait variance in substance use traits (Liu et al., 2019; Pasmán et al., 2018). A second limitation of the GWAS approach is that the functional relevance of identified SNPs remains unclear. The majority (~93 %) of trait-associated SNPs are located in non-coding regions of the genome (Maurano et al., 2012) suggesting that these SNPs act through the regulation of gene expression rather than by altering the protein product. Furthermore, due to extensive linkage disequilibrium (LD) in the genome, GWAS alone are unable to distinguish causal variants from correlated non-functional variants within an LD block. Constrained by these challenges, GWAS alone have been largely unsuccessful in elucidating the biological mechanisms involved in most substance use traits.

To facilitate the identification of biological mechanisms underlying substance use traits, it is essential to study the genetic regulation of gene expression in relevant tissues, i.e., human brain tissue from specific brain regions. The relevance of the brain for understanding the etiology of substance use (and disorders) is supported by numerous gene expression studies, which aimed to explore the role of epigenetic regulation and the transcriptional machinery in the addicted brain. In their review of these studies, Zhou et al. (Zhou et al., 2014) summarized the findings of post-mortem human studies, including those that report differences in gene expression in various brain regions between cases with substance use disorder vs. non-addicted controls. Overall, the reviewed studies suggest a prominent role for mechanisms involved in transcriptomic regulation (Albertson et al., 2004, 2006; Celentano et al., 2009; Zhou et al., 2011).

However, in general differential expression analysis between cases and controls does not reveal the direction of causality, i.e., it does not answer the question whether altered gene expression in a brain region represents susceptibility to substance dependence or whether excessive substance use is responsible for the altered gene expression. Because a large proportion of disease-associated variants exert their effects by regulating gene expression (Maurano et al., 2012), we applied an integrative approach that combines transcriptome data with summary statistics from recent GWAS to explore the role of regulatory genetic variants in substance use traits. Genetic variants that are associated with messenger RNA (mRNA) expression levels of one or more genes, in one or more tissues, are known as “expression quantitative trait loci” (eQTLs). The genes that are under the influence of at least one eQTL, in one or more tissues are called eGenes. Two types of eQTLs have been identified: cis-eQTLs, influencing expression levels of genes on the same locus (located at  $\pm 1$ MB from the gene), and trans-eQTLs that have their effect on genes at a different locus (e.g., those on a different chromosome). Because the statistical power to detect trans-eQTLs is low at current sample sizes, we focused only on cis-eQTLs. We determined the eQTL status of 13 human brain tissues and whole blood using the Genotype-Tissue Expression (GTEx) project, the most comprehensive eQTL database available to date, in terms of the diversity of tissues included (Consortium, 2018). GTEx (V7) provides samples from 53 different tissues, including 13 from the brain, obtained from post-mortem adult subjects. In addition, we performed the same procedure for whole blood eQTLs from the Depression Genes and Networks (DGN) database (Battle et al., 2014).

In the current study, we investigated associations between cis-eQTLs and substance use traits, by filtering GWAS variants on eQTL status for specific brain regions and whole blood. This approach has several benefits. First, it reduces the multiple-testing burden by focusing specifically on variants that are involved in genetic regulation, thereby facilitating the identification of novel candidate variants which might be especially beneficial for relatively small GWAS studies. Second, functional interpretation of eQTLs is relatively straightforward because an eQTL variant tags a causal regulatory variant of an eGene. Therefore, the eGene targeted by the eQTL is a sensible target for future follow-up studies. Third, by investigating whether eQTLs in particular tissues

(e.g., the brain or specific regions within the brain) are significant, we obtain information on which (brain) tissues are involved in substance use traits at a genetic level. Fourth, this method provides causal associations between gene-expression and substance use, because eQTL-gene expression associations have been evaluated in healthy individuals, and are thus not influenced by substance abuse. In addition to this single variant approach, we conducted an integrative analysis to investigate expression on a gene level using S-Predixcan (Barbeira et al., 2018), which can provide further mechanistic insights into the substance use traits under investigation.

We analyzed eQTLs in 13 brain regions (i.e., amygdala, anterior cingulate cortex, caudate, cerebellar hemisphere, cerebellum, cortex, frontal cortex, hippocampus, hypothalamus, putamen, nucleus accumbens, substantia nigra, and cervical spine) and in whole blood as a comparison tissue. The role of eQTLs was examined for six substance use traits. We used summary statistics of the discovery samples obtained from major GWAS for these traits (Gelernter et al., 2014; Liu et al., 2019). The substance use traits examined in the current study were included if sufficiently large GWAS (i.e., > 4,000 subjects) are available. The aims of this study were: i) to identify novel genetic loci associated with these substance use traits; ii) to improve the functional characterization of novel and known genetic loci; and iii) to obtain information about the mediating effects of gene expression levels on substance use traits by using a gene-level association approach.

## 2. Materials and methods

### 2.1. GWAS summary statistics

We obtained summary statistics from previously conducted GWAS meta-analyses, all of which were based on large samples; alcohol consumption (N = 537,349), CPD (N = 263,954), former vs. current smoker (N = 312,821), age of smoking initiation (N = 262,990), ever smoker (N = 632,802), and cocaine dependence (N = 4,769). Information on subjects, sample preparation, and analytic methods can be found in the original articles of the corresponding GWAS (Gelernter et al., 2014; Liu et al., 2019). For some samples, genome-wide data was only provided for the discovery samples, explaining the difference in the number of subjects between the current study and the samples described in the original papers. Detailed information about the samples is provided in Supplementary Table 1.

### 2.2. eQTL data

Details concerning the GTEx data used for this study are described elsewhere (Aguet et al., 2016; Ardlie et al., 2015). To filter and annotate SNPs of the GWAS summary statistics with eQTL information, we downloaded significant SNP-gene associations (FDR-adjusted p-value < 0.05; i.e., eQTL-eGene associations) for 13 brain tissues: amygdala, anterior cingulate cortex, caudate, cerebellar hemisphere, cerebellum, cortex, frontal cortex, hippocampus, hypothalamus, nucleus accumbens, putamen, spine (cervical), substantia nigra, and whole blood from the GTEx Portal V7 ([http://www.gtexportal.org/home/GTEx\\_Analysis\\_v7\\_eQTL.tar](http://www.gtexportal.org/home/GTEx_Analysis_v7_eQTL.tar)). The sample sizes varied across the 13 brain tissues (N ranges from 80 to 154); for whole blood the SNP-gene associations were obtained from 369 individuals (Aguet et al., 2016). Detailed information about the GTEx sample size per tissue and the number of significant eQTLs and eGenes per tissue can be found in Supplementary Table 2. DGN (N = 922)(Battle et al., 2014) data consists of a single tissue: whole blood. This data was used as an independent sample to conduct additional eQTL informed analyses. For the DGN database we used the same method as for GTEx database described above.

### 2.3. Statistical analyses

For the single variant analyses we extracted those SNPs that are eQTLs from the summary statistics of all GWAS. This extraction was performed for each tissue. We applied the Benjamini-Hochberg False Discovery Rate (FDR) approach (Benjamini and Hochberg, 1995), which controls the expected proportion of false positives among all signals with a FDR value below a fixed threshold, to determine significance. Using the GTEx database, we applied FDR on all 14 tissues combined for each of the six substance use traits, which provided us with six sets of eQTLs with an FDR value. The single tissue DGN data set was analysed separately, also using FDR. Subsequently, we determined significant trait associations within those eQTL-sets using a FDR threshold of  $q = 0.05$ .

Significant eGenes were identified by applying the FDR 0.05 threshold on the eQTLs, and linking the eQTLs with significant trait associations to the targeted eGenes. Since a single genetic locus can include multiple eQTLs that are in high LD, we clumped eQTLs with significant trait associations per tissue using PLINK2 (Chang et al., 2015). As clumping cut-offs, we used an  $R^2$  of  $> 0.1$  and a physical distance of 1000 kb, which generated a list of “index” eQTLs (i.e., independent eQTLs), which we considered as distinct loci. Due to the limited power all identified index eQTL, eGenes, and tissues should be considered as candidate findings. Statistical analyses for the single variants were performed using the open-source programming language R (<https://www.r-project.org/>). For visualization, we used the R-library “ggplot2”. To generate a heatmap, a matrix was generated based on the R squared of the number of index eQTLs that met the trait-association threshold of an FDR-adjusted p-value  $< 0.05$ . To investigate gene expression levels we used S-PrediXcan (Barbeira et al., 2018), which integrated eQTL information from summary statistics of the substance use GWAS in an aggregated manner. S-PrediXcan estimates gene expression weights by training a linear prediction model in samples with both gene expression and SNP genotype data. Subsequently these weights are used to predict gene expression from GWAS summary statistics, while incorporating the variance and co-variance of SNPs from an LD reference panel. The current study used expression weights for the 14 tissues central in this study from the GTEx Project (V7) and whole blood from the DGN cohort (Battle et al., 2014; Gamazon et al., 2018), and LD information from the 1000 Genome Project Phase 3 (Delaneau et al., 2014). These data were processed with beta values and standard errors from substance use summary statistics to estimate the expression-GWAS association statistic. A Bonferroni correction was used to determine the transcriptome-wide significant threshold (adjusting for all tissues and genes per trait).

### 3. Results

The GWAS data sets of the six substance use traits used in this study showed different levels of genetic signal when plotting all SNPs (Supplementary Fig. 1). Alcohol consumption, CPD, ever smoker, age of smoking initiation, and former vs. current smoker showed significant trait associations (FDR-adjusted p-value  $< 0.05$ ). In contrast, cocaine dependence did not reveal any trait associated SNPs in the full GWAS. These results are largely in line with the original GWAS reports, and serve to compare the full (i.e., ‘uninformed’) GWAS against the eQTL informed GWAS analyses central in the current study.

After extracting GTEx eQTLs from the full GWAS summary statistics, which reduced the multiple testing burden and focused on SNPs with strong prior functional support, significant trait associations (FDR-adjusted p-value  $< 0.05$ ) were observed. Specifically, this was observed in all tissues, for the following substance use traits: alcohol consumption, CPD, ever smoker, age of smoking initiation, and former vs. current smoker (Fig. 1, Table 1, and Supplementary Table 3), but no significant trait associations were found for any tissue for cocaine dependence. Using this methodology, we identified 2,976 (GTEx) and 811 (DGN)

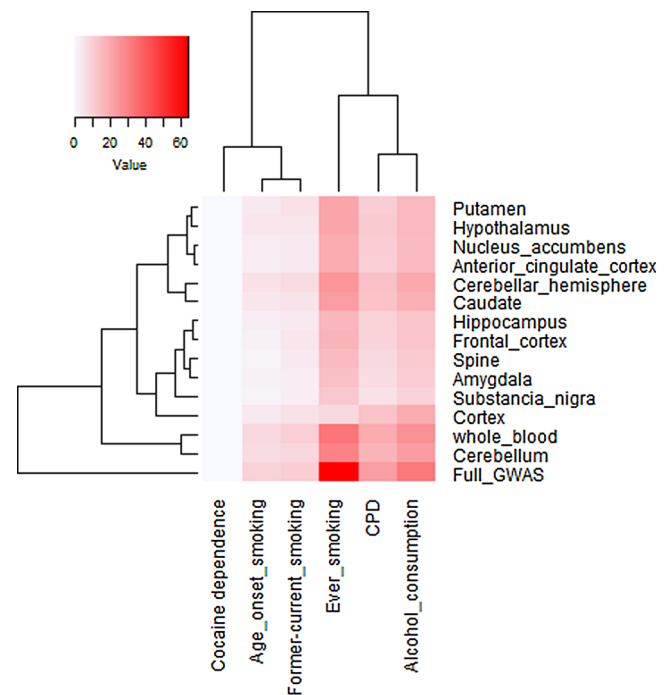


Fig. 1. Heatmap of number of GTEx (sqrt transformed) index eQTLs with significant trait association (FDR-adjusted  $p < 0.05$ ) per tissue and per trait.

novel loci (i.e., loci not identified in the uninformed GWAS of the six substance use traits; FDR-adjusted p-value  $< 0.05$ ; Table 2). Moreover, these eQTLs show evidence of exerting their effects in the various tissues through numerous eGenes (Table 1, Supplementary Tables 3 and 4). Consistent over all substance use traits, we observed that eGenes targeted by index eQTLs were generally different from the nearest gene (Table 1 and Supplementary Table 3). In fact, in 66.3 % of the cases the nearest gene was not the eGene in the GTEx informed analyses (i.e., analyses of GWAS summary statistics focusing only on GTEx eQTLs). This suggests that proximity is a limited measure in determining the functional relevance of a gene.

For alcohol consumption, we found eQTLs with significant trait associations in all 14 GTEx tissues (Fig. 1), and identified considerably more significant eGenes than for the other substance use traits (Supplementary Table 5). In total, we identified 949 novel index eQTLs for alcohol consumption, i.e. these SNPs were not significant in the uninformed GWAS.

For CPD, we found significant trait associations in all 14 GTEx tissues. We identified 509 index eQTLs which were not identified in the uninformed GWAS for CPD (Table 2). Many of the strongest associations were found in brain, and were located within the gene cluster: *IREB2-CHRNA3-CHRNA5-CHRNA4-HYKK-PSMA4* (Table 1, Supplementary Table 3). For the other smoking traits (i.e., former vs. current smoker, age of smoking initiation, ever vs. never smoker) we identified 117, 66, and 1,335 novel loci, respectively (Table 2). For these traits the *IREB2-CHRNA3-CHRNA5-CHRNA4-HYKK-PSMA4* gene cluster showed considerably weaker associations (Table 1, Supplementary Table 3). Furthermore, the GTEx eQTL informed GWAS for cocaine dependence did not reveal any significant trait associations, similar to the uninformed GWAS.

The single variant eQTL analyses informed by the DGN data, showed 224 significant index eQTLs for alcohol consumption, 136 for CPD, 401 for ever smoker, 25 for age of smoking initiation, and 35 for former vs. current smoker, which were not found by the uninformed GWAS (Table 2 and Supplementary Table 5). While the genes most proximal to significant index eQTL based on DGN were occasionally similar as found in the GTEx analyses, they often targeted different

**Table 1**

Overview of the five strongest eQTL-eGene relations per substance use trait, identified by the current study.

Alcohol consumption								
Tissue	Index eQTL	PVALUE	FDR	GWAS effect	GTEX slope	Proximal gene	eGene	Distance to TSS (kb)*
Cerebellar Hemisphere	rs28712821	1.10E-46	3.59E-40	-2.84E-02	-3.58E-01	ENSG00000134962	ENSG00000035928	46
Whole Blood	rs35538052	3.23E-44	1.42E-38	2.80E-02	1.75E-01	ENSG00000134962	ENSG00000109814	-111
Cerebellum	rs1260326	3.33E-33	4.18E-28	-2.33E-02	5.54E-01	ENSG00000084734	ENSG00000234072	152
Cerebellar Hemisphere	rs1260326	3.33E-33	4.18E-28	-2.33E-02	5.00E-01	ENSG00000084734	ENSG00000234072	152
Whole blood	rs1260326	3.33E-33	4.18E-28	-2.33E-02	-1.39E-01	ENSG00000084734	ENSG00000115216	80
CPD								
Caudate	rs8034191	4.80E-211	1.95E-205	-9.06E-02	-5.68E-01	ENSG00000188266	ENSG00000261762	-78
Caudate	rs8034191	4.80E-211	1.95E-205	-9.06E-02	-5.90E-01	ENSG00000188266	ENSG00000169684	-52
Cortex	rs8034191	4.80E-211	1.95E-205	-9.06E-02	-6.68E-01	ENSG00000188266	ENSG00000169684	-52
Frontal Cortex	rs8034191	4.80E-211	1.95E-205	-9.06E-02	-6.44E-01	ENSG00000188266	ENSG00000169684	-52
Nucleus accumbens	rs8034191	4.80E-211	1.95E-205	-9.06E-02	-6.11E-01	ENSG00000188266	ENSG00000169684	-52
Ever smoker								
Brain Cerebellum	rs1565735	3.42E-17	5.01E-12	1.76E-02	6.80E-01	ENSG00000234770	ENSG00000120903	89
Caudate	rs1004787	5.27E-17	5.01E-12	-1.24E-02	-4.16E-01	ENSG00000259439	ENSG00000236502	-10
Anterior Cingulate Cortex	rs240957	5.36E-17	5.01E-12	1.75E-02	-5.60E-01	ENSG00000271789	ENSG00000255389	-303
Cerebellum	rs240957	5.36E-17	5.01E-12	1.75E-02	-4.12E-01	ENSG00000271789	ENSG00000009413	-187
Cortex	rs6937734	5.56E-17	5.01E-12	1.59E-02	-4.35E-01	ENSG00000009413	ENSG00000009413	-68
Age of initiation								
Whole Blood	rs62177761	1.85E-10	4.55E-06	-1.91E-02	1.84E-01	ENSG00000143951	ENSG00000143951	-629
Nucleus accumbens	rs1607204	2.02E-10	4.55E-06	1.89E-02	-3.15E-01	ENSG00000143951	ENSG00000143951	-554
Cerebellum	rs4513466	2.39E-10	4.55E-06	-2.03E-02	4.24E-01	ENSG00000175161	ENSG00000239519	-382
Cerebellar Hemisphere	rs4513466	2.39E-10	4.55E-06	-2.03E-02	5.28E-01	ENSG00000175161	ENSG00000239519	-382
Nucleus accumbens	rs4513466	2.39E-10	4.55E-06	-2.03E-02	5.25E-01	ENSG00000175161	ENSG00000239519	-382
Former vs. current smoker								
Whole Blood	rs56113850	2.52E-26	7.40E-20	2.06E-02	9.08E-02	ENSG00000255974	ENSG00000269858	48
Brain Cerebellum	rs12459249	3.89E-16	1.63E-10	1.67E-02	-4.61E-01	ENSG00000269843	ENSG00000130612	-57
Brain Cerebellum	rs11697662	9.82E-15	3.60E-09	2.18E-02	5.54E-01	ENSG00000203900	ENSG00000101204	-18
Whole Blood	rs7937	5.29E-11	1.55E-05	1.38E-02	-2.55E-01	ENSG00000171570	ENSG00000233622	-15
Whole Blood	rs7937	5.29E-11	1.55E-05	1.38E-02	-2.16E-01	ENSG00000171570	ENSG00000188493	45

\* Distance of index eQTL to transcription start site (TTS) of target gene (eGene).

**Table 2**

Overview of novel significant index eQTLs which were not identified by the uninformed GWAS (FDR adj. p-value &lt; 0.05).

Trait	N unique novel loci GTEX informed	N unique novel loci DGN informed
CPD	509	214
Alcohol consumption	949	136
Ever smoker	1335	401
Age of initiation	66	25
Former vs. current smoker	117	35
Cocaine dependence	0	0
Total	2976	811

Note: the number of unique novel loci identified by GTEX informed analyses is based on 14 tissues, for DGN it is based on a single tissue (Whole blood).

eGenes. Comparing DGN to GTEX whole blood, different eGenes were targeted by the same eQTL in 65.6 % of the cases.

The S-PrediXcan analyses, informed by the GTEX eQTLs, revealed large numbers of significantly associated genes (corrected for the number of genes and tissues) for alcohol consumption, CPD, age of smoking initiation, ever smoker, and former vs. current smoker (Tables 3, 4 and Supplementary Table 6). For alcohol consumption, CPD, and ever smoker, we found differentially expressed genes in all tissues under investigation (Table 3). The identified genes of the S-PrediXcan analyses showed evidence of tissue specificity, as many of our findings were either unique to brain or to whole blood (Table 4). Moreover, comparing the S-PrediXcan results informed by GTEX and DGN, we

observed many findings to be unique to a specific reference panel (Supplementary Table 7).

#### 4. Discussion

The overarching aim of this study was to explore whether functionally annotating SNPs using information on their role in the regulation of gene expression facilitates the identification and functional interpretation of candidate loci involved in substance use traits. Furthermore, we aimed to identify genes with differentially genetically regulated levels of gene expression associated with substance use traits. Using the GTEX database we explored the role of regulatory genetic variants in 14 different tissues and tested association with six substance use traits. In addition, we conducted independent eQTL analyses using the DGN database.

We identified index eQTLs with significant trait associations (FDR-adjusted p-value < 0.05) for five of the six traits examined: alcohol consumption, CPD ever smoker, age of onset of smoking, former vs. current smoker. For cocaine dependence, no GTEX eQTLs with significant trait associations were found. Compared to the full (i.e., eQTL-uninformed) GWAS results, functional annotation of eQTLs improved the power to detect significant trait associations. Overall, informed by GTEX, this method allowed us to identify 2,976 novel index eQTLs, we interpret these index eQTLs as candidate loci for substance use traits. These candidate loci were not previously detected by the uninformed GWAS of the six substance use traits.

We will discuss a few highlights of our findings. For alcohol

**Table 3**

Overview of the five strongest GTEx informed S-PrediXcan gene associations per substance use trait, genes printed in bold indicate significance.

Alcohol consumption					
Gene	Gene name	Zscore	Effect size	Pvalue	Tissue
ENSG00000035928.10	<i>RFC1</i>	-8.96	-3.37E-02	3.21E-19	Cerebellar Hemisphere
ENSG00000238083.3	<i>LRRC37A2</i>	-8.61	-2.79E-02	7.47E-18	Cerebellum
ENSG00000262539.1	<i>RP11-259G18.3</i>	-8.56	-1.87E-02	1.08E-17	Cerebellar Hemisphere
ENSG00000214425.2	<i>LRRC37A4P</i>	8.54	1.89E-02	1.36E-17	Cerebellar Hemisphere
ENSG00000263503.1	<i>RP11-707O23.5</i>	-8.51	-2.35E-02	1.75E-17	Cerebellar Hemisphere
CPD					
ENSG00000041357.11	<i>PSMA4</i>	30.86	3.39E-01	4.04E-209	Whole Blood
ENSG00000041357.11	<i>PSMA4</i>	19.65	2.10E-01	6.10E-86	Substantia nigra
ENSG00000041357.11	<i>PSMA4</i>	13.88	1.09E-01	7.86E-44	Putamen
ENSG00000169684.9	<i>CHRNA5</i>	-13.46	-4.46E-02	2.55E-41	Substantia nigra
ENSG00000169684.9	<i>CHRNA5</i>	-11.22	-3.46E-02	3.31E-29	Spine
Ever smoker					
ENSG00000076685.14	<i>NT5C2</i>	-7.99	-3.50E-02	1.35E-15	Cerebellar Hemisphere
ENSG00000166275.11	<i>C10orf32</i>	-7.90	-1.81E-02	2.90E-15	Cerebellum
ENSG00000166275.11	<i>C10orf32</i>	-7.75	-3.02E-02	9.42E-15	Whole Blood
ENSG00000235266.1	<i>RP11-753C18.8</i>	-7.73	-1.97E-02	1.09E-14	Cerebellar Hemisphere
ENSG00000117385.11	<i>LEPRE1</i>	7.68	4.13E-02	1.63E-14	Frontal Cortex
Age of initiation					
ENSG00000120903.6	<i>CHRNA2</i>	5.71	1.61E-02	1.10E-08	Cerebellum
ENSG00000120903.6	<i>CHRNA2</i>	5.44	5.12E-02	5.42E-08	Caudate
ENSG00000271643.1	<i>RP11-10C24.3</i>	-4.89	-6.77E-02	1.01E-06	Substantia nigra
ENSG00000197386.6	<i>HTT</i>	-4.88	-8.73E-02	1.08E-06	Whole Blood
ENSG00000120903.6	<i>CHRNA2</i>	4.84	1.57E-02	1.28E-06	Cerebellum
Former vs. current smoker					
ENSG00000041357.11	<i>PSMA4</i>	6.16	5.10E-02	7.29E-10	Whole Blood
ENSG00000233622.1	<i>CYP2T2P</i>	5.35	3.97E-02	8.98E-08	Whole Blood
ENSG00000232630.1	<i>PRPS1P2</i>	-5.10	-3.44E-02	3.46E-07	Cerebellum
ENSG00000269858.1	<i>EGLN2</i>	-5.02	-1.51E-02	4.96E-07	Whole Blood
ENSG00000126215.9	<i>XRCC3</i>	5.03	2.31E-02	5.10E-07	Whole Blood
Cocaine dependence					
ENSG00000257941.1	<i>RP11-290L1.4</i>	3.77	1.73	1.65E-04	Frontal Cortex
ENSG00000152056.12	<i>AP1S3</i>	3.63	2.44	2.81E-04	Whole Blood
ENSG00000271179.1	<i>RP11-629P16.1</i>	-3.62	-1.29	2.95E-04	Nucleus accumbens
ENSG00000164344.11	<i>KLKB1</i>	-3.60	-4.0E01	3.14E-04	Cerebellum
ENSG00000169291.5	<i>SHE</i>	-3.57	-1.46	3.62E-04	Whole Blood

The Bonferroni corrected threshold for transcriptome-wide significance (adjusted for all tissues and genes per trait) is  $9.7e-7$  for the GTEx analyses. Genquant gene name (Gene); Gene name (Gene name); S-PrediXcan association result for the gene (Z-score); S-PrediXcan association effect size for the gene (Effect size); p-value for the association statistic (P-value); number of SNPs from GWAS that were used (Number of SNPs); tissue in which the S-PrediXcan association result was found (Tissue).

consumption, significant index eQTLs were observed in all brain regions and in whole blood. Most of these brain regions have previously been demonstrated to play a role in the susceptibility to alcohol use disorders (Acheson et al., 2009; Cheetham et al., 2014; Hanson et al., 2010; Herting et al., 2011, 2010; Sjoerds et al., 2013). Interesting findings were index eQTLs in the putamen, caudate and cervical spine targeting alcohol dehydrogenase 1C (*ADH1C*) to be significantly associated with alcohol consumption. *ADH1C* was previously reported to be associated with alcohol dependence and consumption (Clarke et al., 2017; Frank et al., 2012; Park et al., 2013; Treutlein et al., 2009). Moreover, we identified multiple index eQTLs targeting many different eGenes in various tissues on chromosome 17q21.31 for alcohol consumption. Chromosome 17q21.31 has been described as one of the genome's most structurally complex and evolutionary dynamic regions, and genes in this region have – among other traits – been implicated in alcohol use (Liu et al., 2019; Nelson et al., 2010; Pennisi, 2008). This underscores the complexity of this region and of the potential importance of gene regulatory mechanisms (Louro et al., 2009). Our

results, in combination with the emerging literature, suggest that this region includes multiple functional genetic variants that contribute to individual differences in alcohol consumption. It should be noted, however, that previous research indicates that these regulation hotspots should be interpreted with caution due to the complex correlation structure of gene expression, which could lead to false positive associations (de Koning and Haley, 2005; Peng et al., 2007).

The associations found for CPD on chromosome 15q25.1 were magnitudes stronger than the ones found for the other substance use traits examined in the current study (i.e.,  $10^{-40}$  vs  $10^{-211}$ ). The index eQTLs with the strongest associations, all located within the *IREB2-CHRNA3-CHRNA5-CHRNA4-HYKK-PSMA4* gene cluster, predominantly targeted *CHRNA5*. This gene cluster has been associated many times in the literature with smoking severity (Barrie et al., 2016; Furberg et al., 2010). Our findings extend the previously observed genetic association by showing that the CPD-associated eQTLs regulate gene expression of *CHRNA3* and *CHRNA5* in striatal brain areas. A study by Barrie et al., in which GTEx tissue-specific eQTLs from the gene cluster *CHRNA5/*

**Table 4**  
Number of gene discoveries from S-PrediXcan analyses and an overview of the number of significant associations in brain tissues, and whole blood.

	Alcohol consumption	CPD	Ever vs. never smoker	Age of smoking onset	Former vs. current smoker	Cocaine dependence
Tissue	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>
Amygdala	18	4	6	0	0	0
Anterior cingulate cortex	21	6	11	0	0	0
Caudate	25	8	11	1	0	0
Cerebellar hemisphere	29	7	18	0	0	0
Cerebellum	34	8	27	1	1	0
Cortex	39	6	29	0	0	0
Frontal cortex	18	3	17	0	0	0
Hippocampus	15	7	10	0	0	0
Hypothalamus	17	4	10	0	0	0
Nucleus accumbens	21	7	4	0	0	0
Putamen	17	6	10	0	0	0
Spine	12	4	7	0	0	0
Substantia nigra	9	6	5	0	0	0
Whole blood	27	14	21	0	5	0
<i>n</i> unique genes 'total'	71	35	78	1	6	0
<i>n</i> unique genes brain 'total'	61	27	67	1	1	0
<i>n</i> unique genes whole blood 'only'	10	8	11	0	5	0
<i>n</i> unique genes brain 'only'	44	21	57	1	1	0

*n* unique genes 'total' = the number of unique genes that are significant in one or more tissues; *n* unique genes; *n* genes 'brain' = the number of genes that are significant in one or more brain tissues; *n* genes 'brain only' = the number of genes that are significant in one or more brain tissues and not significant in whole blood; *n* unique genes 'whole blood' only, the number of genes that are significant in whole blood, but not significant in any of the brain tissues.

*CHRNA3/CHRNA4* were explored to investigate their role in nicotine dependence, found significant striatal eQTLs targeting the same eGenes (*CHRNA3*, *CHRNA5*, *RP11-650L12.2*) as we found here for CPD (Barrie et al., 2016). The striatal eQTLs identified in the current study and the findings of Barrie et al. highlight the importance of genetic regulation in the striatum for smoking behaviors. For the other smoking related traits no associations, comparable to the strength of those for CPD, were found for the *IREB2-CHRNA3-CHRNA5-CHRNA4-HYKK-PSMA4* gene cluster. This suggests that vulnerability for these traits, in part, goes through other biological pathways. This observation is in line with the literature which shows genetic correlations between CPD and other smoking related traits to be below 0.5 (Liu et al., 2019).

For cocaine dependence, we found no index eQTLs with significant trait associations in the GTEx analyses. The absence of significant results is most likely due to the limited sample size of this GWAS. However, the DGN informed analyses identified one index eQTL, which targets the eGene C11orf9. Previously this gene has been shown to be the target of miRNA's which are increased in patients with alcohol use (Miguel-Hidalgo, 2018).

We observed modest overlap between proximal genes and eGenes: 66.3 % of GTEx's significant index eQTLs targeted eGenes other than their proximal gene. This implies that the search for functionally relevant genes using GWAS results should not merely focus on physical proximity but should instead take genetic regulation into account as an important biological mechanism. The DGN informed single variant analyses revealed significant eQTLs in the same traits as the GTEx whole blood sample and also in cocaine dependence. While significant index eQTLs were found in many of the same loci in both databases for alcohol consumption, CPD, age of smoking initiation, ever smoker, and former vs. current smoker, different eGenes were targeted by these eQTLs. In fact, in 65.6 percent another eGene was targeted. This is probably due to the fact that both GTEx and DGN are underpowered, and thus providing incomplete, not overlapping, eQTL information.

The S-PrediXcan analyses partly confirmed the results of the single variant eQTL analyses. For example, similar to the single variant analysis for CPD, the GTEx informed S-PrediXcan analysis identified the genes *CHRNA5*, *CHRNA3* and *PSMA4* to be associated with CPD for various tissues. Furthermore, for alcohol consumption, the strongest association was found for the gene *RFC1* in both the single variant and S-PrediXcan analyses. Previous research also shown a role for *RFC1* in alcohol consumption and alcohol use disorder (Liu et al., 2019;

Sanchez-Roige et al., 2019). Noteworthy, 64.9 percent of our finding were detected only in brain-tissues, highlighting the importance of transcriptomic annotation, to assess the role of difficult-to-acquire tissues in substance use traits. Previous research made similar observations for psychiatric disorders (Gamazon et al., 2019).

Our results suggest that whole blood may be an interesting biomarker for substance use traits since whole blood consistently, both in the single variant and the S-PrediXcan analyses, showed significant results also found other tissues. In fact, whole blood showed more significant results than other tissues. However, this may be explained by the larger sample size of whole blood. The significant associations in whole blood may be due to whole blood-brain tissue eQTL overlap as a reflection of causative brain tissue specific eQTLs, which are detectable in whole blood, rather than pointing to a causative role for whole blood in substance use traits (McKenzie et al., 2014; Wainberg et al., 2019).

The findings and conclusions of this study should be interpreted in view of some key limitations. Despite the comparatively large sample sizes of the GWAS, our study may still be underpowered to detect small genetic effects, which is especially true for the cocaine dependence sample. In addition, although GTEx and DGN belong to the most comprehensive genetic expression databases, the statistical power for eQTL discovery is still modest for some tissues (Ardlie et al., 2015). The GTEx brain sample sizes are smaller than those for whole blood, which is reflected in fewer identified index eQTLs in the separate brain tissues. It is therefore likely that we tested only a subset of the total number of true eQTLs for the various tissues. Our analyses focus on the role of eQTLs in a wide range of tissues, however, recently it has been shown that eQTL effects may differ between cell types within a specific tissue (van der Wijst et al., 2018). Therefore, to better understand the role of gene expression in substance use traits future studies should focus on cell type specific analyses (van der Wijst et al., 2018). Furthermore, the genes identified with the single variant and S-PrediXcan analyses should be seen as 'candidates' as correlated levels of gene expression may be observed in high LD genomic regions which makes it challenging to identify the true causal genes (Wainberg et al., 2019). Moreover, the GTEx data was composed of subjects of European ancestry, while the GWAS results used in the current study for and cocaine dependence are based on European and African American subjects. Since eQTLs may not completely overlap across ethnic populations, this may have reduced our ability to detect novel loci. However, with sample size always being a limiting factor in complex trait GWAS, we included the

combined sample of European and African American subjects for cocaine dependence to improve statistical power. By no means we claim to present the full set of eQTLs, eGenes, and tissues involved in the substance use traits under investigation. Therefore, the index eQTLs, eGenes, and tissues identified by this study to be involved in substance use traits, should be seen as ‘candidates’. Moreover, independent replication of these novel candidate loci is necessary before strong conclusions can be drawn regarding the role of these loci in substance use traits.

## 5. Conclusions

Our findings suggest that there is great value in utilizing brain and whole blood eQTL annotations for enhancing the discovery of novel genetic susceptibility loci for substance use traits. The tissue- focused GTEx eQTL analyses revealed 2,976 index eQTLs which were not identified in the discovery samples using the same threshold (FDR adjusted  $p < 0.05$ ), implying that these candidate loci might be interesting for further research. In addition, the functional annotation of GWAS data revealed that most of the identified candidate eGenes targeted by the trait-associated index eQTLs are not the nearest genes, underscoring the importance of studying genetic regulation of gene expression for functional annotation of genetic loci. Finally, the S-PrediXcan results validated some of the candidate findings of the single variant analyses. Both the single variant and gene-level analyses confirm the conclusions of Gamazon et al. regarding the importance of multiple tissue eQTL investigation (Gamazon et al., 2018), as our analyses identified many interesting (novel) candidate eGenes and tissues for substance use traits. In conclusion, annotating genes based on transcriptomic regulation in brain and non-brain tissues improves both the identification of novel candidate genes and the functional characterization of genetic risk factors for substance use traits.

## Author disclosures

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## Author contributions

ATM performed the analyses, prepared the first draft of the manuscript, and completed the final version of this manuscript. ERG designed the methodology, provided scripts, and contributed to the writing process. ZG conducted the S-PrediXcan analyses, and contributed to the writing process. FV, DJAS, WvDB, and KJHV contributed in interpreting the results and to the writing process. JF performed a pilot study and performed part of the analyses. JG, RS, LF, and HRK participated in the data collection, and contributed to the writing process. EMD designed the methodology, contributed in the writing process, and supervised the project.

Dr. Kranzler has been a consultant, advisory board member or CME speaker for Indivior and Lundbeck. He is also a member of the American Society of Clinical Psychopharmacology’s Alcohol Clinical

Trials Initiative (ACTIVE), which was supported in the last three years by AbbVie, Alkermes, Ethypharm, Indivior, Lilly, Lundbeck, Otsuka, Pfizer, and Xenoport.

## Declaration of Competing Interest

Dr. Gamazon receives an honorarium from the journal Circulation Research of the American Heart Association, as a member of the Editorial Board. He also performs consulting on pharmacogenetic analysis with the City of Hope / Beckman Research Institute.

Dr. Kranzler has been a consultant, advisory board member or CME speaker for Indivior and Lundbeck. He is also a member of the American Society of Clinical Psychopharmacology’s Alcohol Clinical Trials Initiative (ACTIVE), which was supported in the last three years by AbbVie, Alkermes, Ethypharm, Indivior, Lilly, Lundbeck, Otsuka, Pfizer, and Xenoport.

Dr. van den Brink received speaker’s fees from Lundbeck, Indivior, Eli Lilly, and Pfizer and is a consultant to Indivior, Mundipharma, Novartis, Bioproject, D&A Pharmaceuticals, and Opiant Pharmaceuticals. No funding was received related to the present article.

The other authors declare no competing interests with regard to this study.

## Appendix A

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## Appendix B. Supplementary data

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