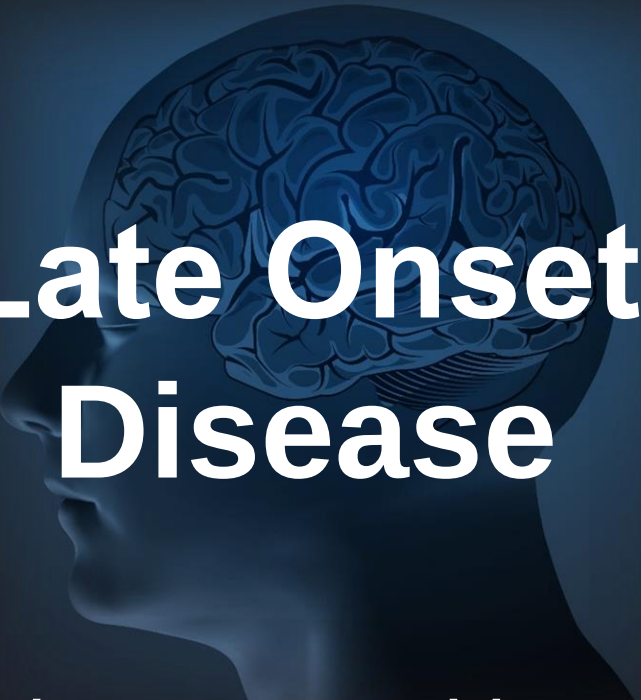




Genetics of Late Onset Alzheimer's Disease

Andrew J. Saykin, PsyD

*IU Center for Neuroimaging and the Indiana ADC
Indiana University School of Medicine*

DISCLOSURES



Disclosures

- Eli Lilly (Collaborative Grant), Arkley BioTek (SBIR), Avid Radiopharmaceuticals, Bayer
- Editor-in-Chief, *Brain Imaging and Behavior*, a Springer Nature journal

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 - ADNI: U01 AG024904 & RC2 AG036535; Indiana: R01 AG19771
 - U01 AG032984, U24 AG21886, P30 AG010129, K01 AG030514
- National Institute of Biomedical Imaging and Bioengineering
- National Library of Medicine: R01 LM011360 and K99/R00 LM011384
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- Alzheimer's Association & Brin Wojcicki Foundation – Whole Genome Sequencing
- IUSM Strategic Research Initiative (SRI), Indiana Spinal Cord & Brain Injury Research Fund, CTSI

Genetics is One Piece of the AD Puzzle



Subjective Cognitive Decline

Informant Perception

Cognitive Performance

Social Networks

Lifestyle & environment

- Cognitive stimulation, diet, exercise, sleep

Biomarkers

- CSF, blood, others
- Multi-omics

Genomics

- DNA, mRNA, miRNA
- Epigenetics



Amyloid PET/CSF

Tau PET/CSF

Structure (MRI)

Function (MRI)

Connectome

Vascular function & disease (MRI)

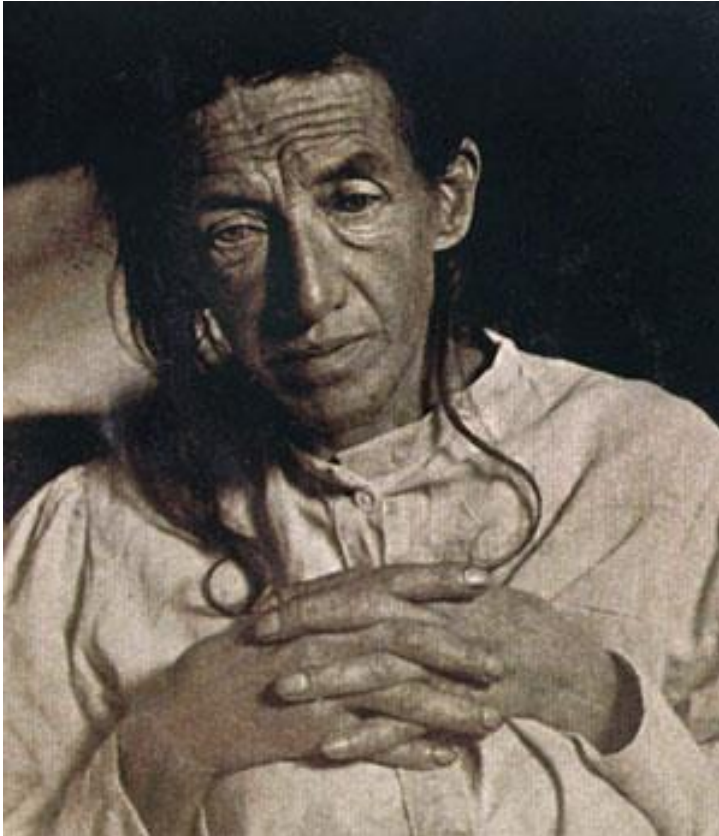
Immune System, Inflammation & Oxidative Stress

Model Systems

Metabolism & Mitochondria

Complex Landscape of Alzheimer's Disease

The first patient diagnosed had early onset AD



Auguste Deter - taken in 1906, shortly before her death at age 55, during her stay at Frankfurt's City Mental Institution



Alois Alzheimer (1864-1915)
Published case report on Auguste D in 1907 describing plaques and tangles

Major Alzheimer Candidate Genes - 1990's



Early Onset AD Genes

PSEN2

(<5% of EOAD)



PS2
Alzheimer disease

Chromosome 1

PSEN1

(~70% of EOAD)



PS1 (AD3)
Alzheimer disease

Chromosome 14

APP

21q21.3

(<10% of EOAD)



Chromosome 21

Late Onset AD Genes

Accounts for ~60-80% of risk

APOE accounts for up to 50%

Up to ~30% remains to be found

APOE

APOE
Atherosclerosis



Chromosome 19

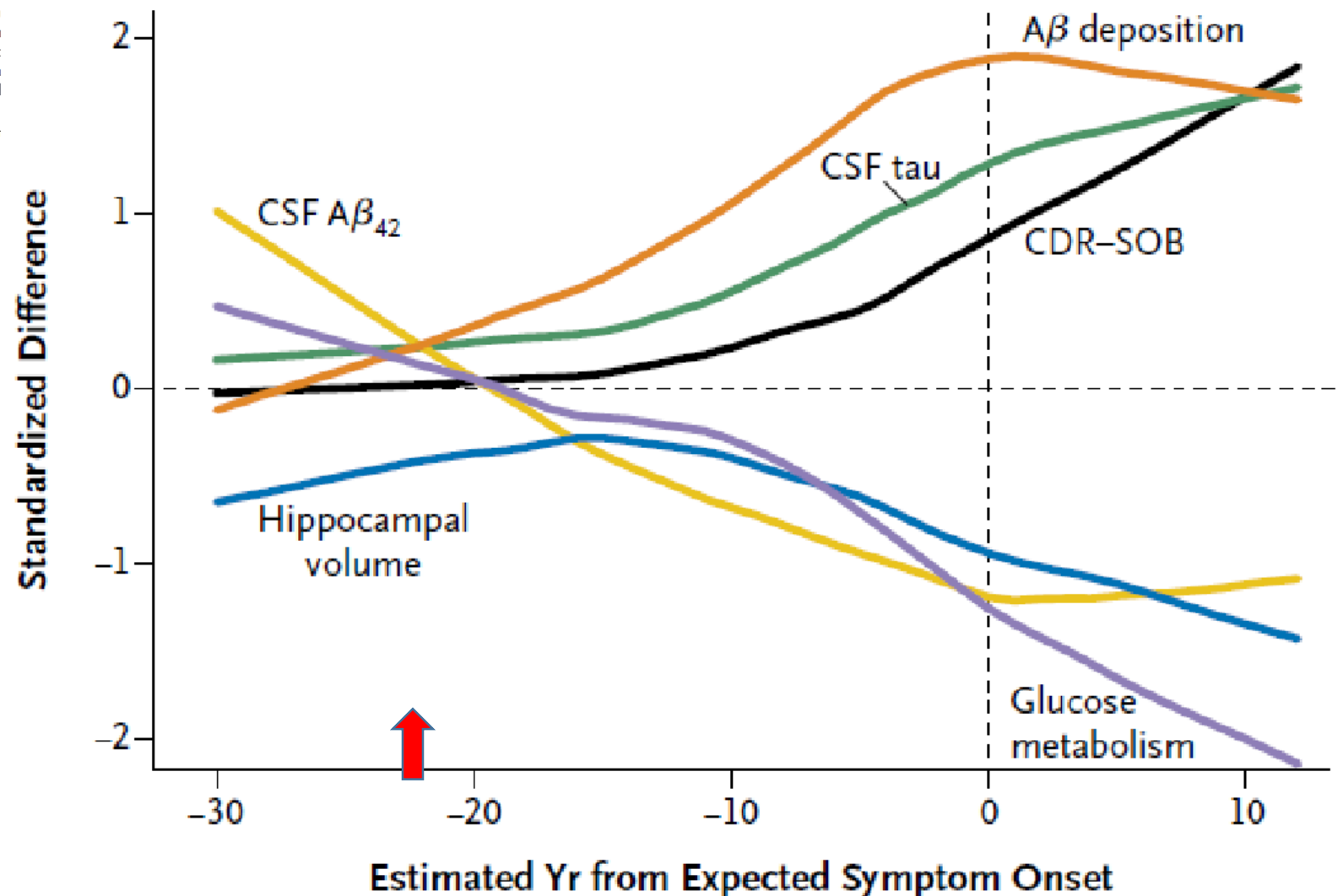
Clinical and Biomarker Changes in Dominantly Inherited
Alzheimer's Disease

Randall J. Bateman, M.D., Chengjie Xiong, Ph.D., Tammie L.S. Benzinger, M.D., Ph.D., Anne M. Alison Goate, Ph.D., Nick C. Fox, M.D., Daniel S. Marcus, Ph.D., Nigel J. Cairns, Ph.D., Xiany Tyler M. Blazey, B.S., David M. Holtzman, M.D., Anna Santacruz, B.S., Virginia Buckles, Ph.D., An Krista Moulder, Ph.D., Paul S. Aisen, M.D., Bernardino Ghetti, M.D., William E. Klunk, M.D., Eric Ralph N. Martins, Ph.D., Colin L. Masters, M.D., Richard Mayeux, M.D., John M. Ringma Martin N. Rossor, M.D., Peter R. Schofield, Ph.D., D.Sc., Reisa A. Sperling, M.D., Stephen Sal and John C. Morris, M.D., for the Dominantly Inherited Alzheimer Network

**Biomarker
evidence that
AD begins ~20
years prior to
diagnosis**

Insights from Autosomal Dominant AD: The DIAN Consortium

Bateman et al, NEJM (2012)



Sporadic Early Onset AD: LEADS

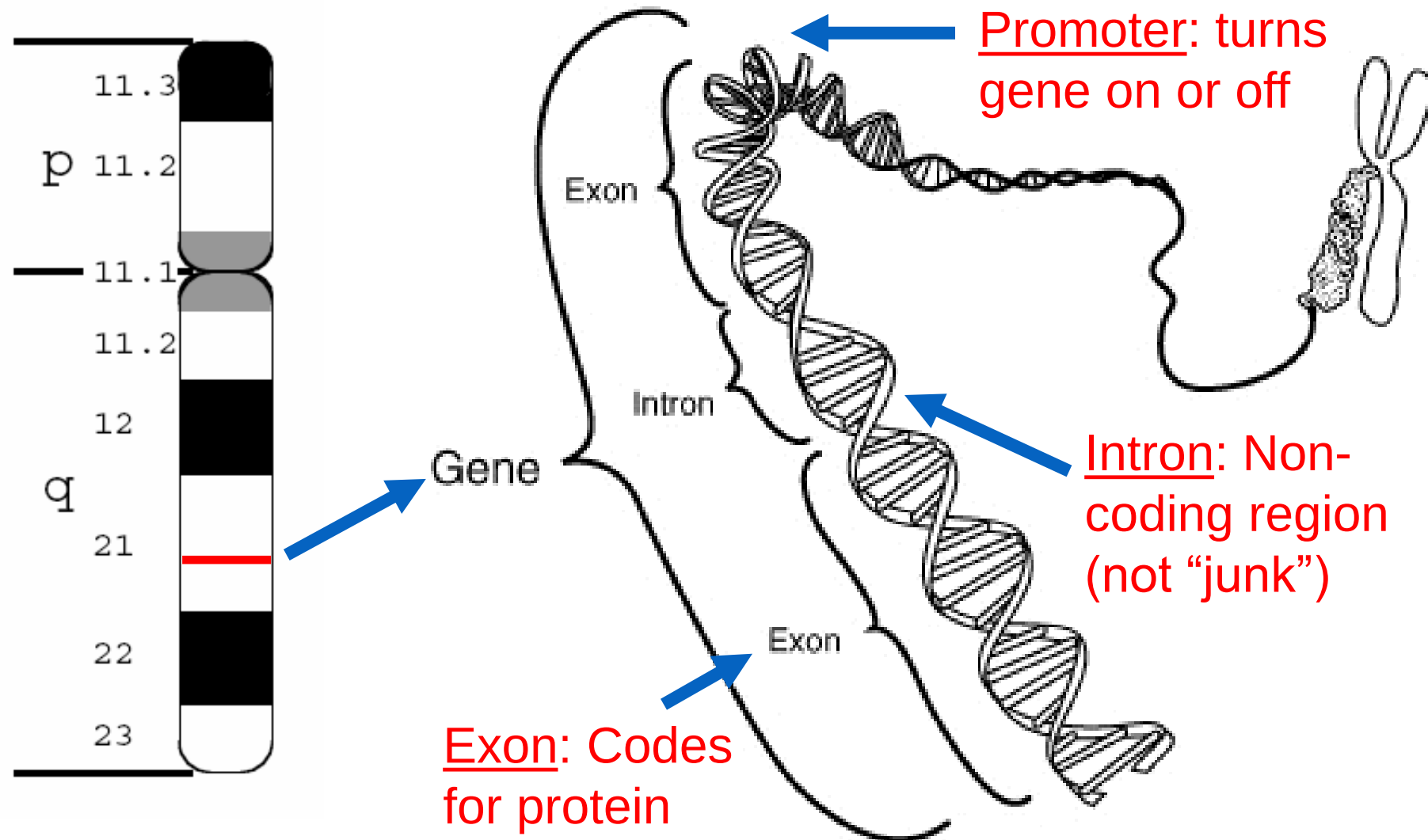


- About 5% of AD has early onset defined as before age 65
- Less than 10% of these patients have mutations in known AD genes
- Longitudinal Early-onset Alzheimer's Disease Study (LEADS) is a new NIA sponsored consortium of 16 institutions that will begin investigating non-familial EOAD in 2018 using cognitive testing, biomarkers, neuroimaging and gene sequencing
- Investigators
 - Liana Apostolova MD, Indiana University
 - Maria Carrillo PhD, Alzheimer's Association
 - Brad Dickerson MD, Harvard University
 - Gil Rabinovici MD, UCSF

<http://news.medicine.iu.edu/releases/2017/10/early-onset-alzheimers.shtml>

“Genetics 101”

Chromosome (DNA) → Gene → Regions → Bases



Single Nucleotide Polymorphism (SNP)

Base pairs



Codon

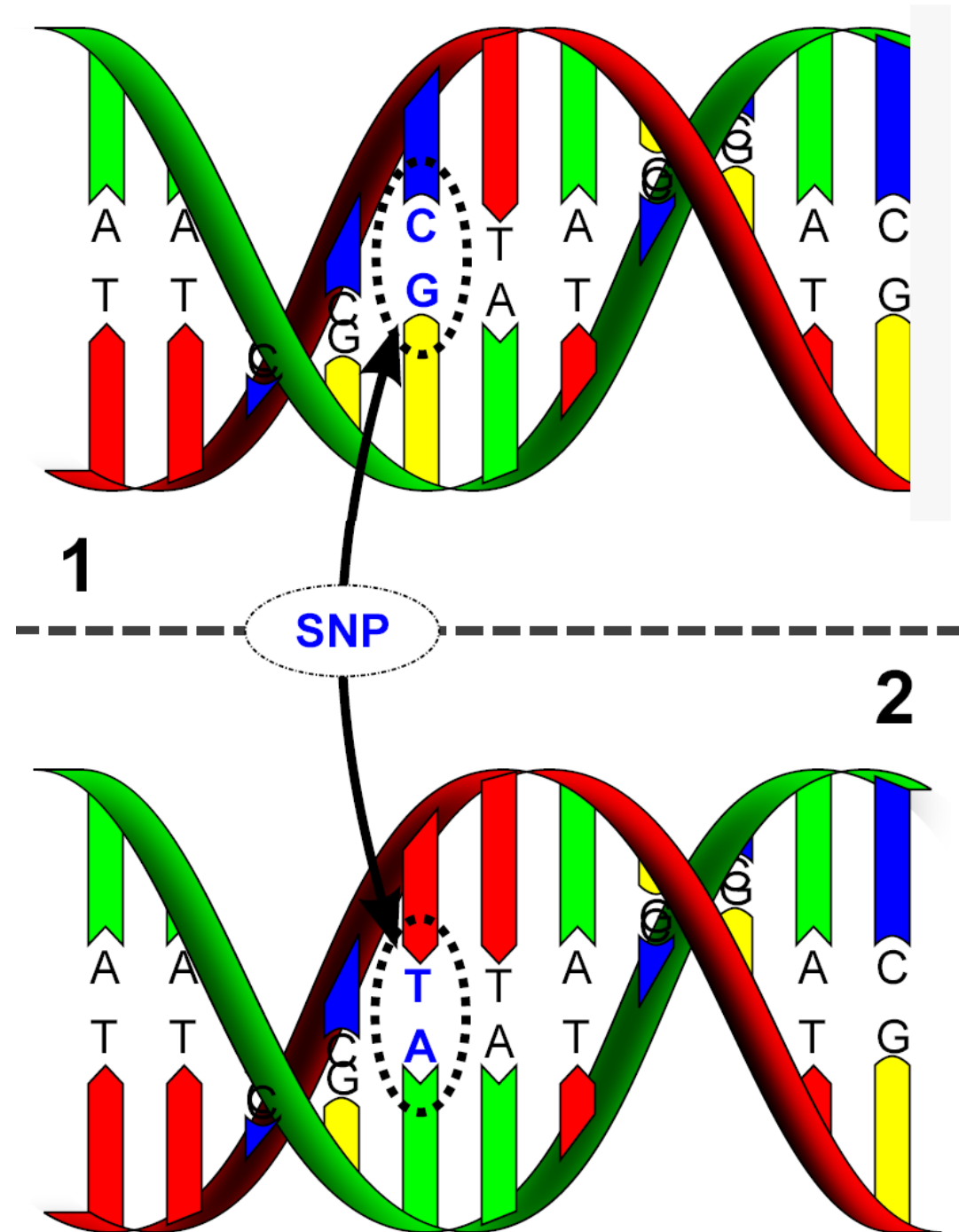


Amino acid

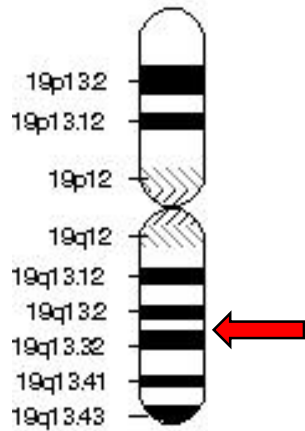


Protein

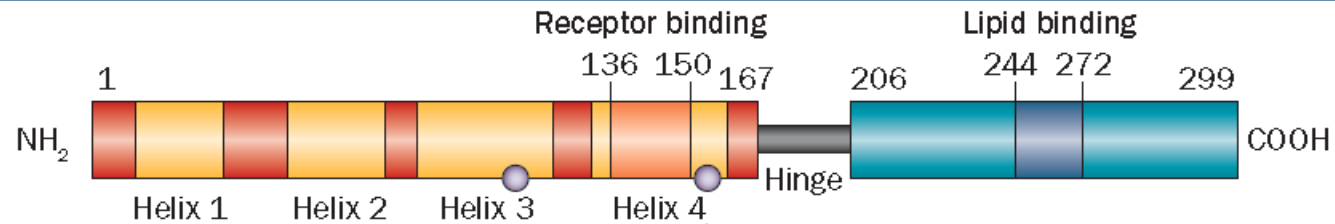
Source: Wikimedia.org



APOE Genotype & Sporadic AD Risk

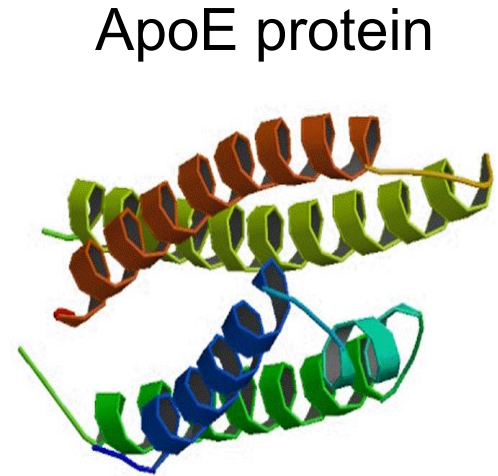


Chr. 19q13.2



	Isoform-specific amino acid difference		Allele frequency (%)	
	112	158	General	AD
Apo-E2	Cys	Cys	8.4	3.9
Apo-E3	Cys	Arg	77.9	59.4
Apo-E4	Arg	Arg	13.7	36.7

SNP: rs429358 rs7412



ApoE protein

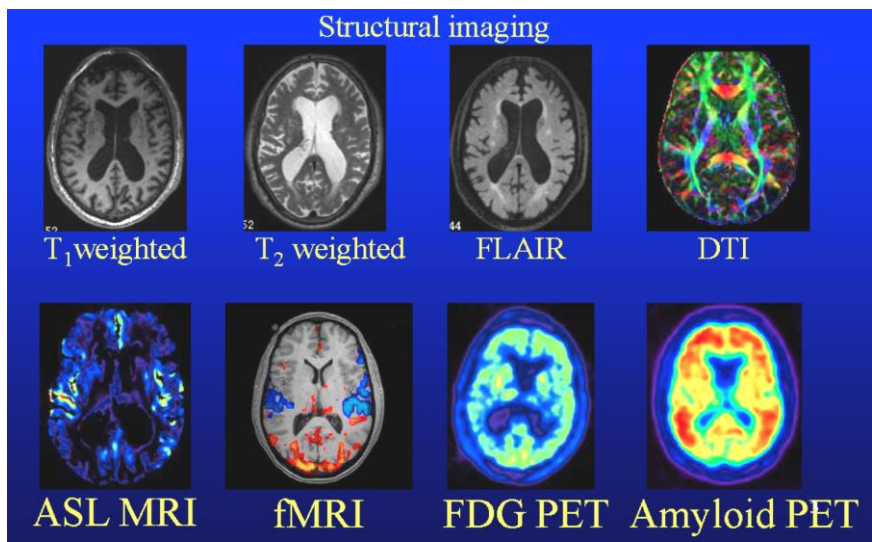
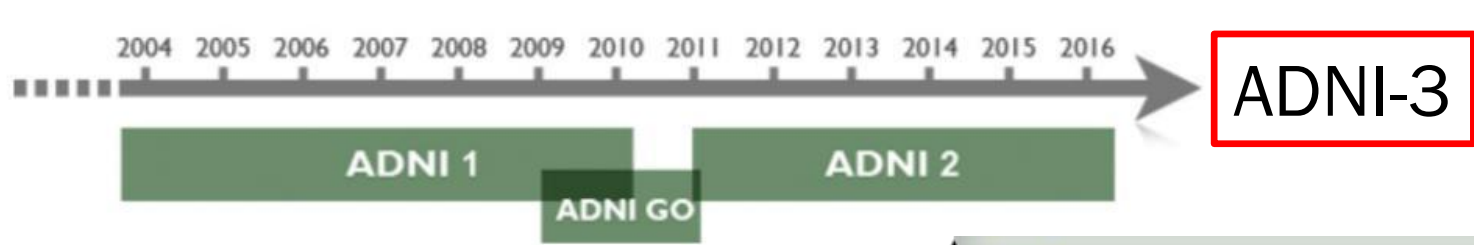
Table 1 | The effect of APOE ϵ 4 on AD frequency and age at onset⁷

Characteristic	APOE ϵ 4 noncarrier	APOE ϵ 4 heterozygous	APOE ϵ 4 homozygous
AD frequency (%)	20	47	91
Mean age of clinical onset (years)	84	76	68

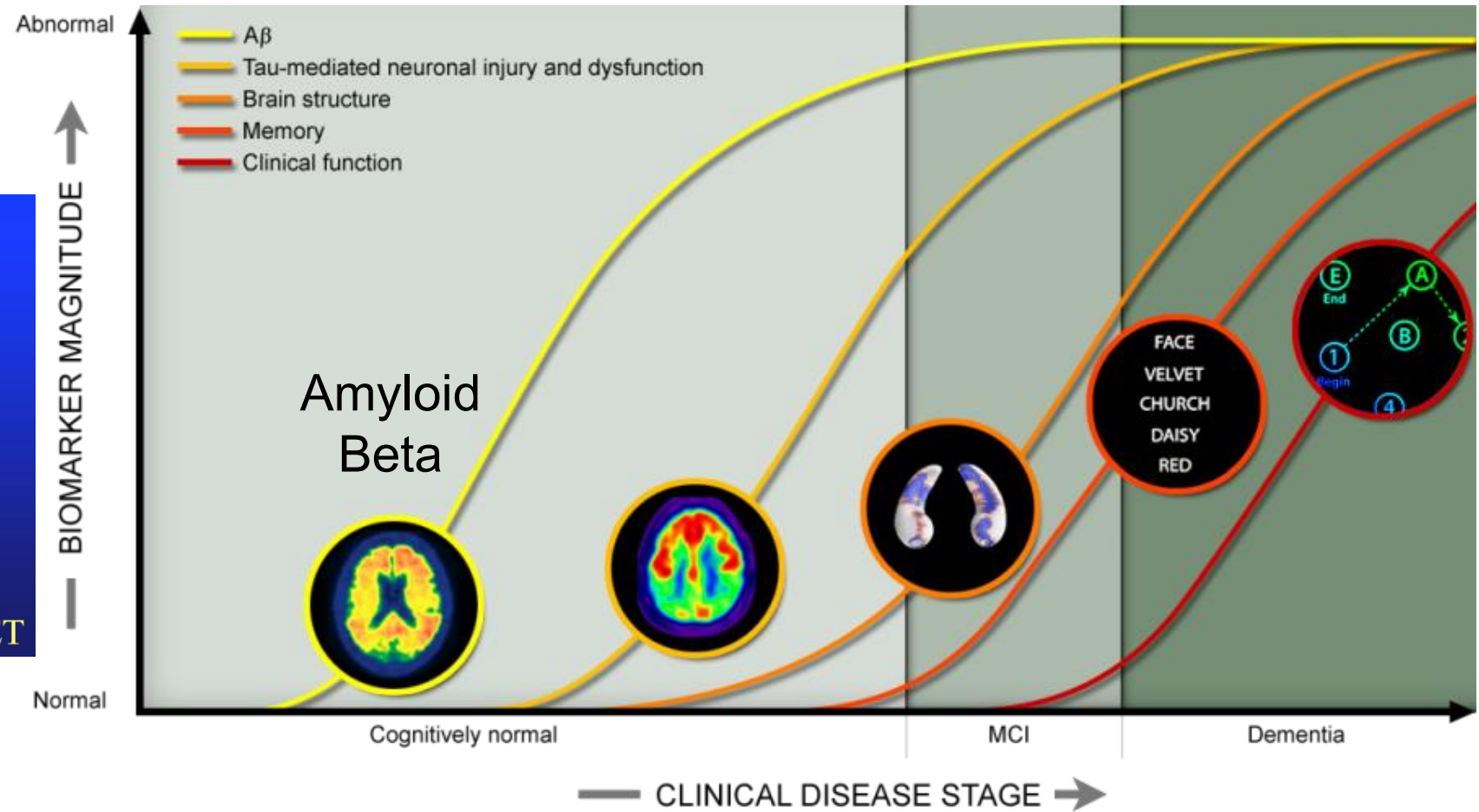
Abbreviations: AD, Alzheimer disease; APOE ϵ 4, ϵ 4 allele of the apolipoprotein E gene.

Alzheimer's Disease Neuroimaging Initiative (ADNI)

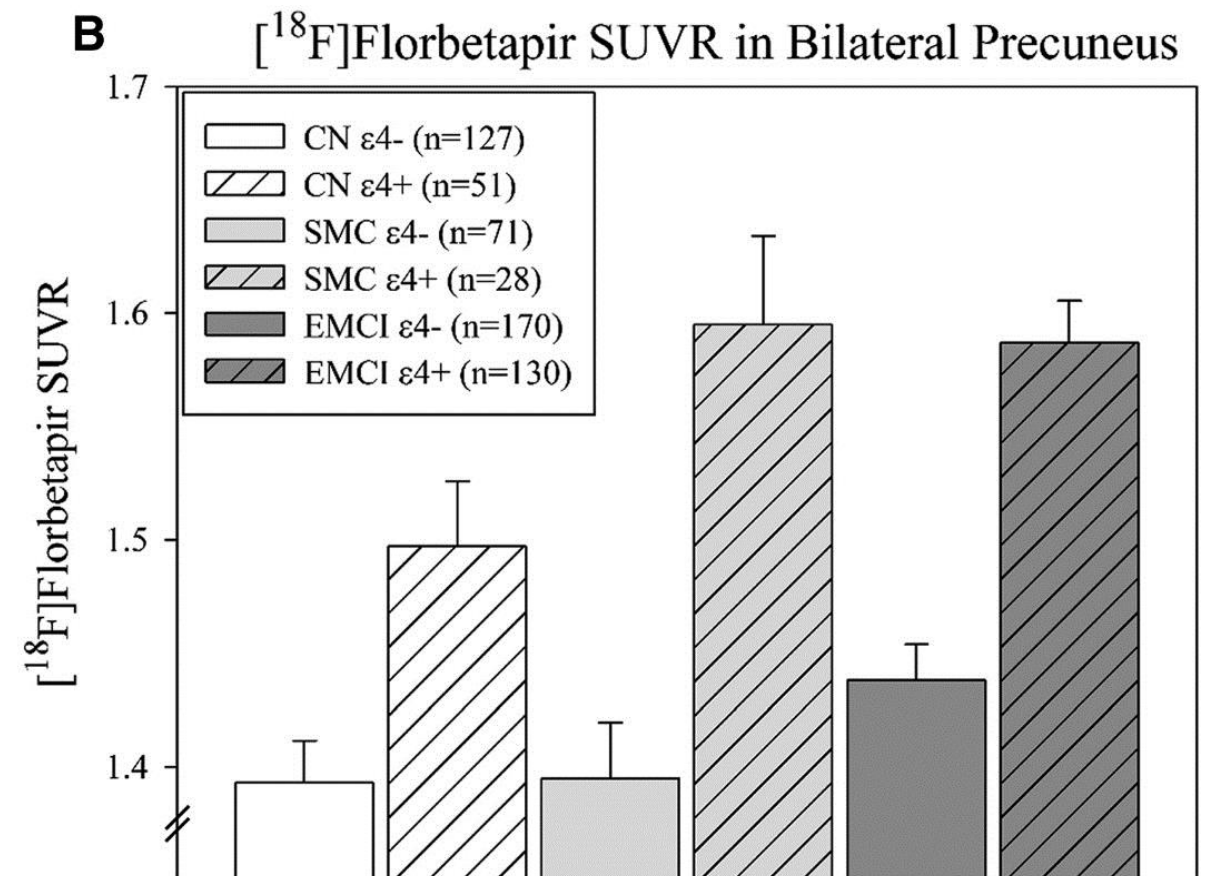
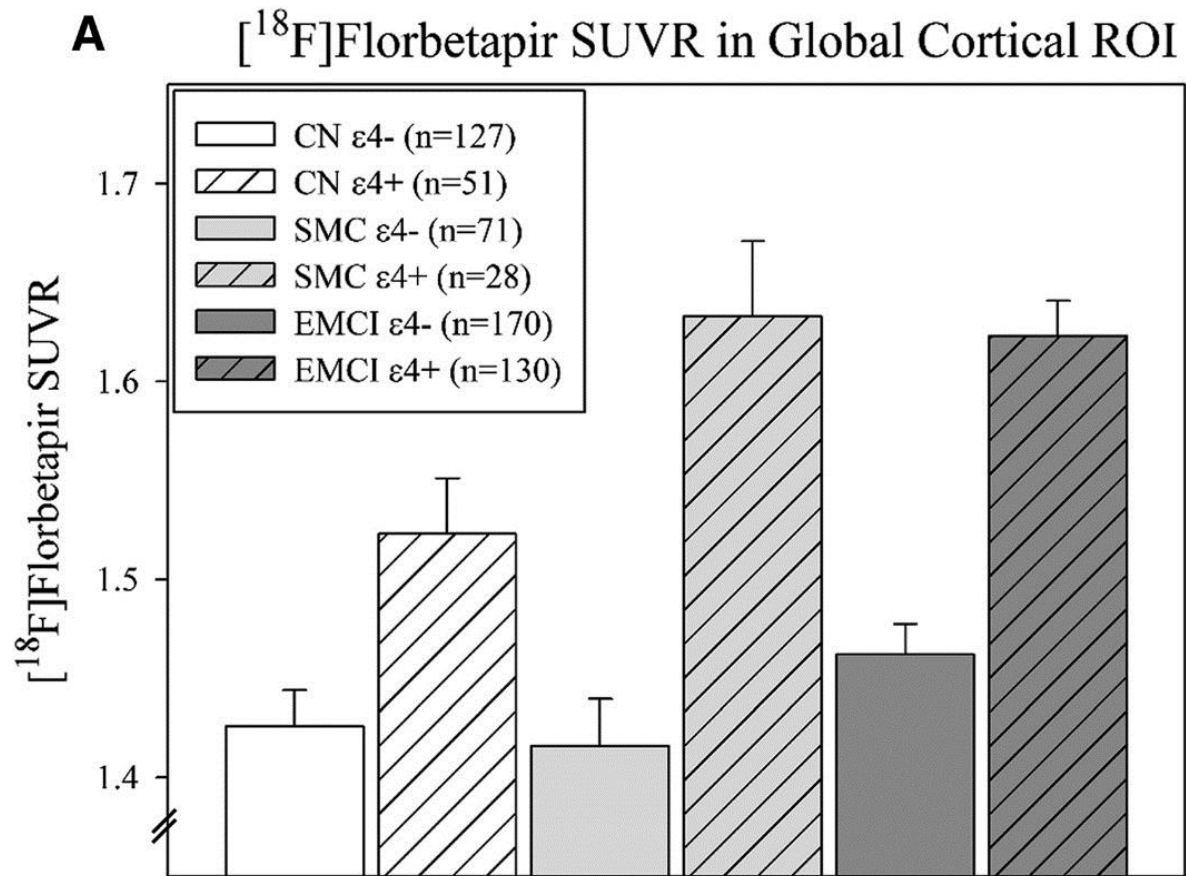
LOAD Biomarkers: Temporal ordering and time-dependent roles



Imaging Modalities

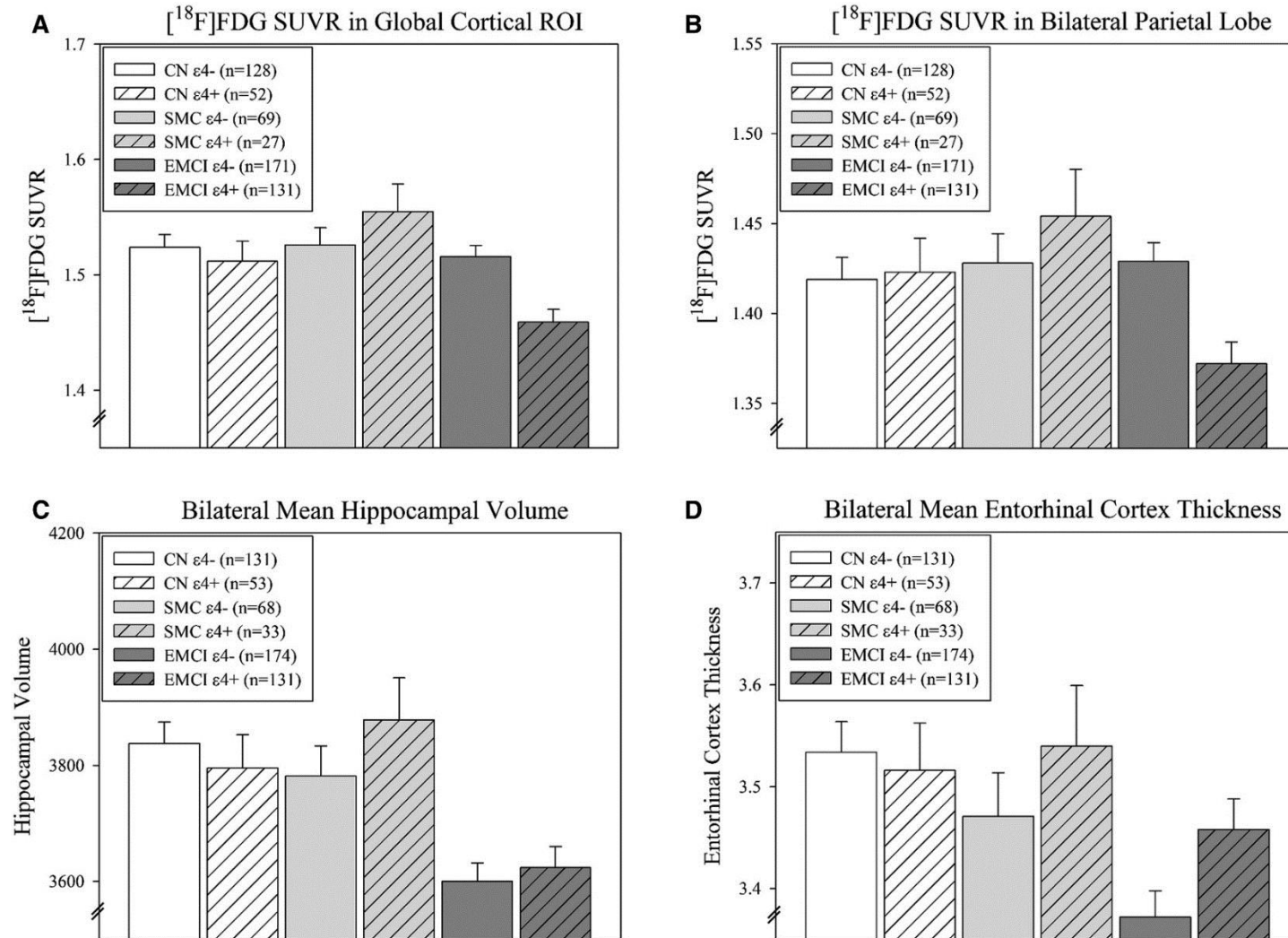


APOE $\epsilon 4$ Status and Early Stage Amyloid Deposition on PET



Risacher et al. *Alzheimer's & Dementia* (2015): DOI: (10.1016/j.jalz.2015.03.003)

APOE ϵ 4 Status: Early Stage Atrophy and Glucose Metabolism



Risacher et al. *Alzheimer's & Dementia* (2015): DOI: (10.1016/j.jalz.2015.03.003)



IGAP Meta-Analysis: Now a “Top 20+” LOAD Genes (2013)

Lambert et al [Nature Genetics](#) (2013)*

LETTERS

nature
genetics

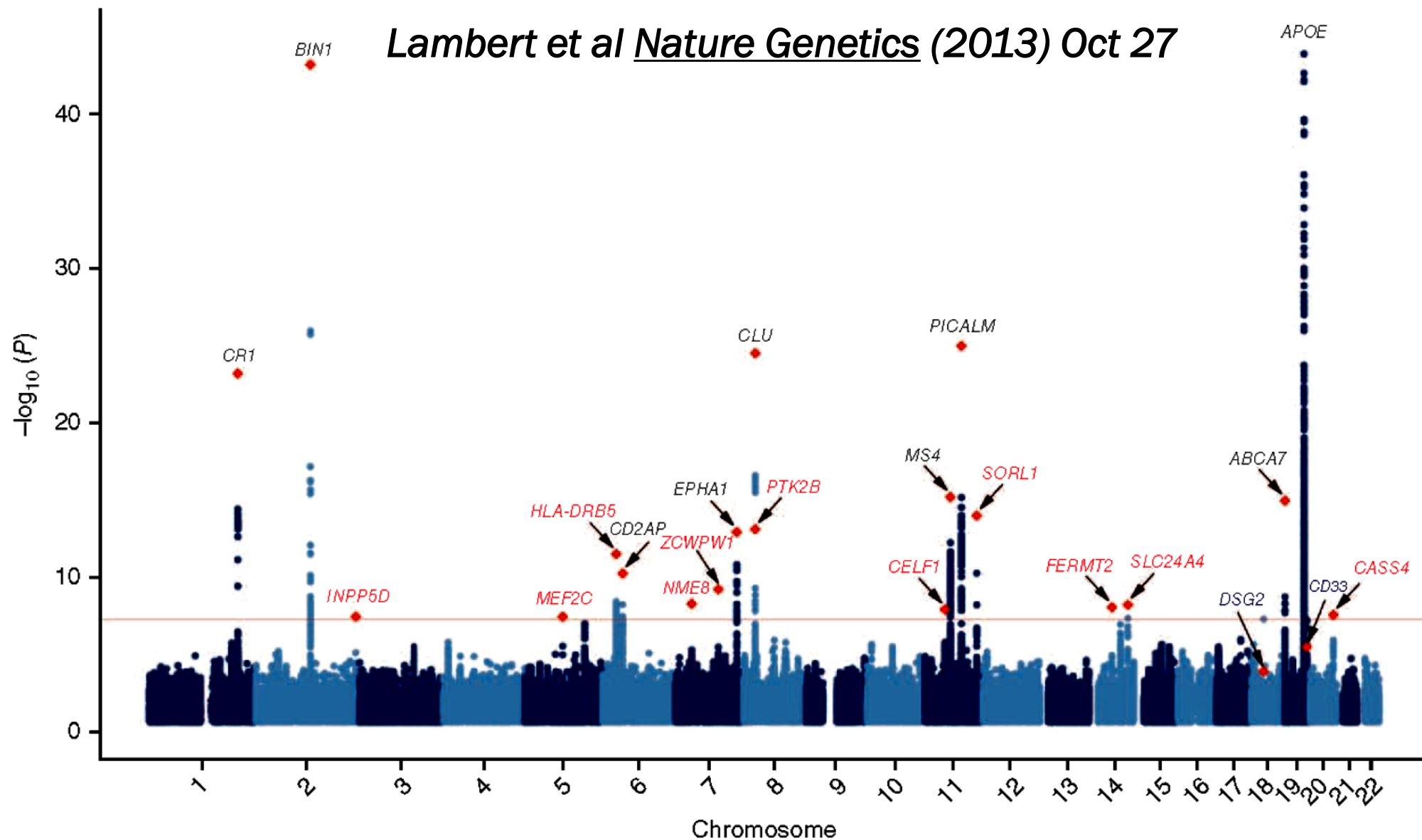
Largest AD GWAS

Meta-analysis of 74,046 individuals identifies 11 new susceptibility loci for Alzheimer’s disease

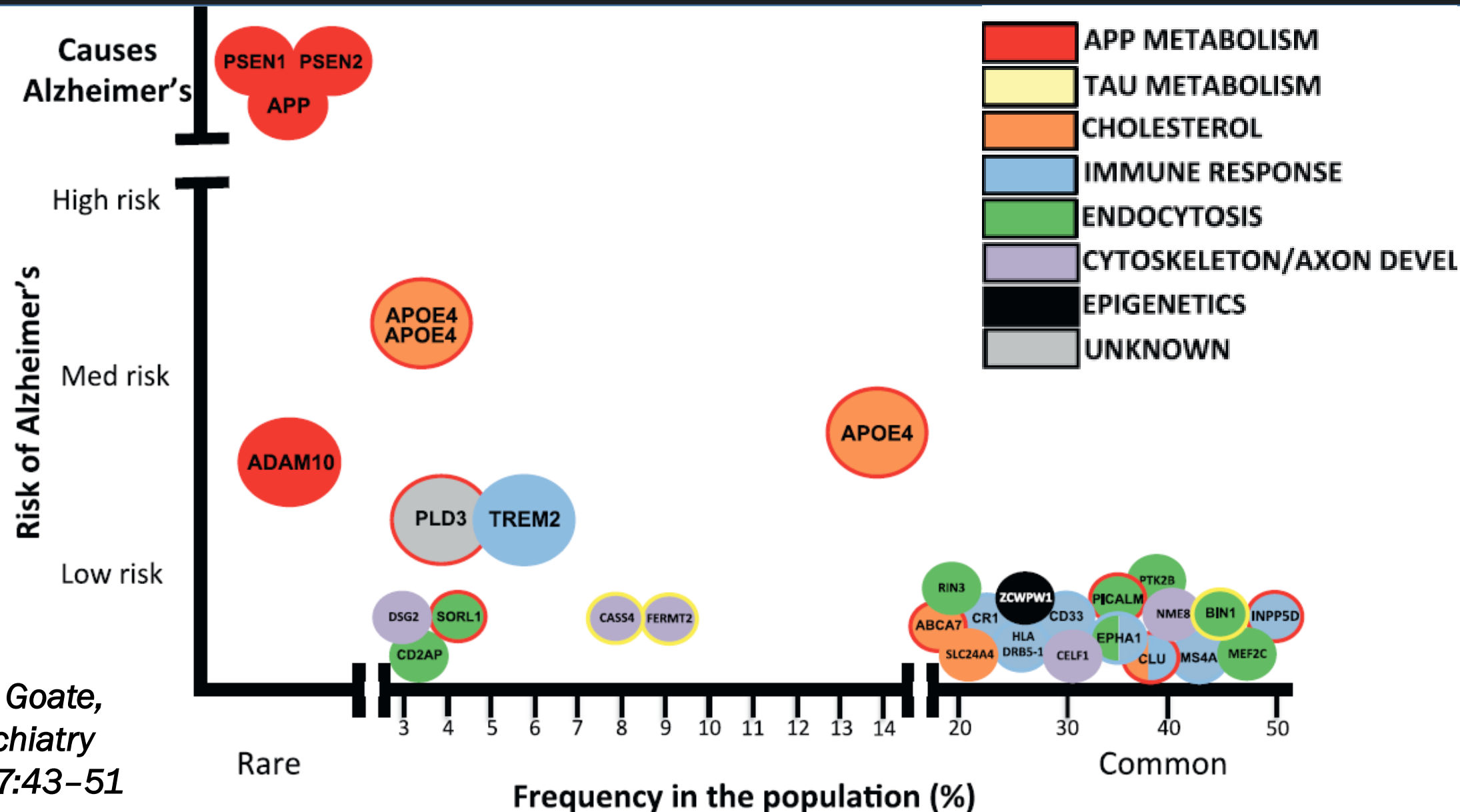
Eleven susceptibility loci for late-onset Alzheimer’s disease (LOAD) were identified by previous studies; however, a large portion of the genetic risk for this disease remains unexplained. We conducted a large, two-stage meta-analysis of genome-wide association studies (GWAS) in individuals of European ancestry. In stage 1, we used genotyped and imputed data (7,055,881 SNPs) to perform meta-analysis on 4 previously published GWAS data sets consisting of 17,008 Alzheimer’s disease cases and 37,154 controls. In stage 2, 11,632 SNPs were genotyped and tested for association in an independent set of 8,572 Alzheimer’s disease cases and 11,312 controls. In addition to the *APOE* locus (encoding apolipoprotein E), 19 loci reached genome-wide significance ($P < 5 \times 10^{-8}$) in the combined stage 1 and stage 2 analysis, of which 11 are newly associated with Alzheimer’s disease.

“In addition to the *APOE* locus, 14 genomic regions had associations that reached genome-wide significance. 9 had been previously identified by GWAS as genetic susceptibility factors, and 5 (HLA-DRB5–HLA-DRB1, PTK2B, SORL1, SLC24A4-RIN3 and DSG2) represent newly associated loci.”

IGAP Meta-Analysis: Top 20 AD Genes



Genetic Risk for AD: Pathogenic Mechanisms



Karch & Goate,
Biol Psychiatry
2015; 77:43–51

Next Generation Sequencing Enables search for novel rare variants



Human Genome: 3 Billion Bases



- Illumina HiSeq Platform
 - Whole Exome Sequencing (WES)
 - Whole Genome Sequencing (WGS)
 - RNA Sequencing (RNA-seq / miRNA-seq)

THE NEW ENGLAND JOURNAL of MEDICINE

CORRESPONDENCE



TREM2 and Neurodegenerative Disease

LETTER

doi:10.1038/nature12825

Rare coding variants in the phospholipase D3 gene confer risk for Alzheimer's disease

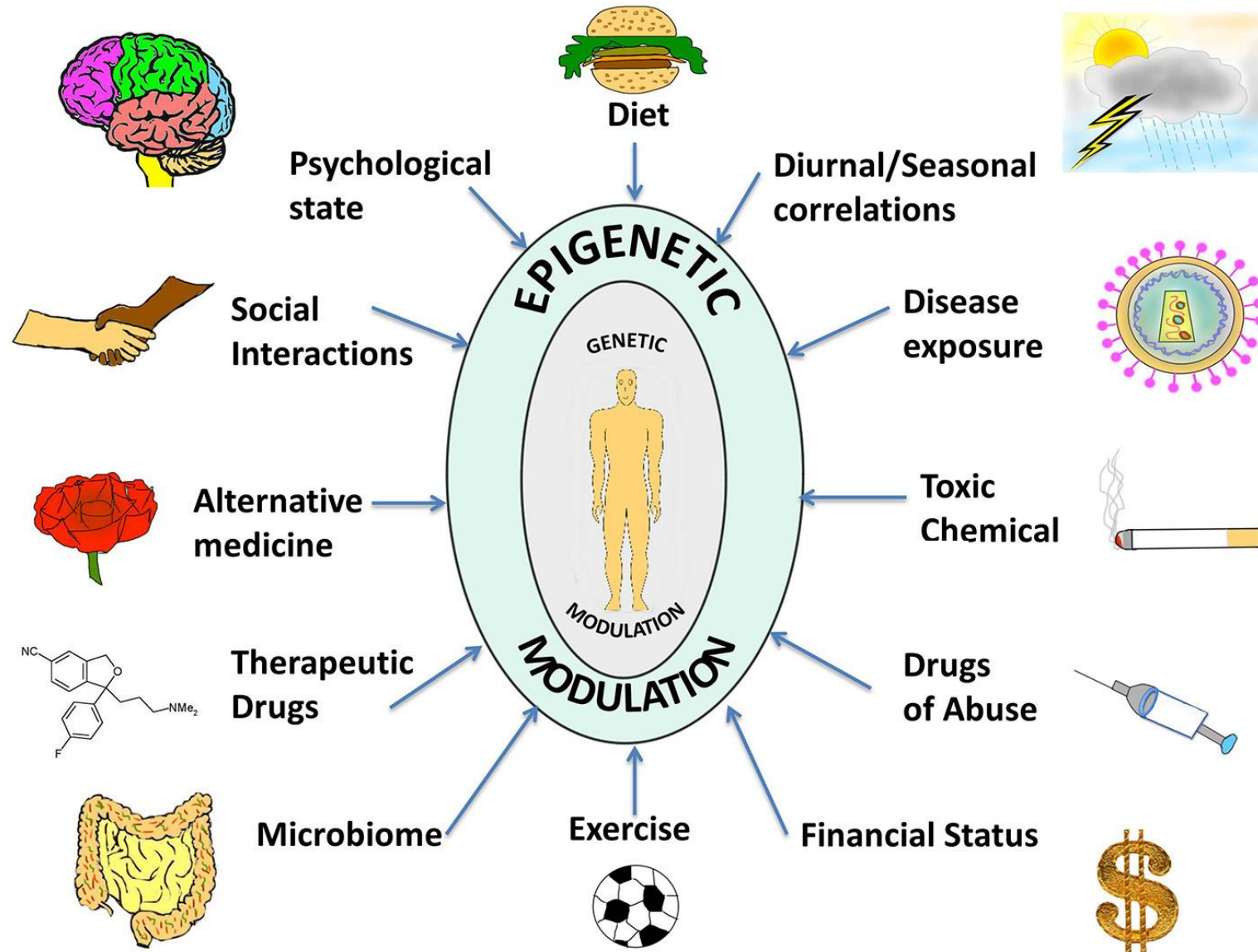
Carlos Cruchaga^{1,2}, Celeste M. Karch^{1,2*}, Sheng Chih Jin^{1*}, Bruno A. Benitez¹, Yefei Cai¹, Rita Guerreiro^{3,4}, Oscar Harari¹, Joanne Norton¹, John Budde¹, Sarah Bertelsen¹, Amanda T. Jeng¹, Breanna Cooper¹, Tara Skorupa¹, David Carrell¹, Denise Levitch¹, Simon Hsu¹, Jiyoung Choi¹, Mina Ryten³, UK Brain Expression Consortium (UKBEC)[†], Celeste Sassi^{3,4}, Jose Bras³, J. Raphael Gibbs^{3,4}, Dena G. Hernandez^{3,4}, Michelle K. Lupton^{5,6}, John Powell⁵, Paola Forabosco⁷, Perry G. Ridge⁸, Christopher D. Corcoran^{9,10}, JoAnn T. Tschanz^{10,11}, Maria C. Norton^{10,11,12}, Ronald G. Munger^{12,13}, Cameron Schmutz⁸, Maegan Leary⁸, F. Yesim Demirci¹⁴, Mikhail N. Bamne¹⁴, Xingbin Wang¹⁴, Oscar L. Lopez^{15,16}, Mary Ganguli¹⁷, Christopher Medway¹⁸, James Turton¹⁸, Jenny Lord¹⁸, Anne Braae¹⁸, Imelda Barber¹⁸, Kristelle Brown¹⁸, The Alzheimer's Research UK (ARUK) Consortium[†], Pau Pastor^{19,20,21}, Oswaldo Lorenzo-Betancor¹⁹, Zoran Brkanac²², Erick Scott²³, Eric Topol²³, Kevin Morgan¹⁸, Ekaterina Rogaeva²⁴, Andrew B. Singleton⁴, John Hardy³, M. Ilyas Kambh^{14,15,16}, Peter St George-Hyslop^{24,25}, Nigel Cairns^{2,26}, John C. Morris^{26,27,28}, John S. K. Kauwe⁸ & Alison M. Goate^{1,2,27,28,29}

Polygenic Scores: Combined Effects of Genes

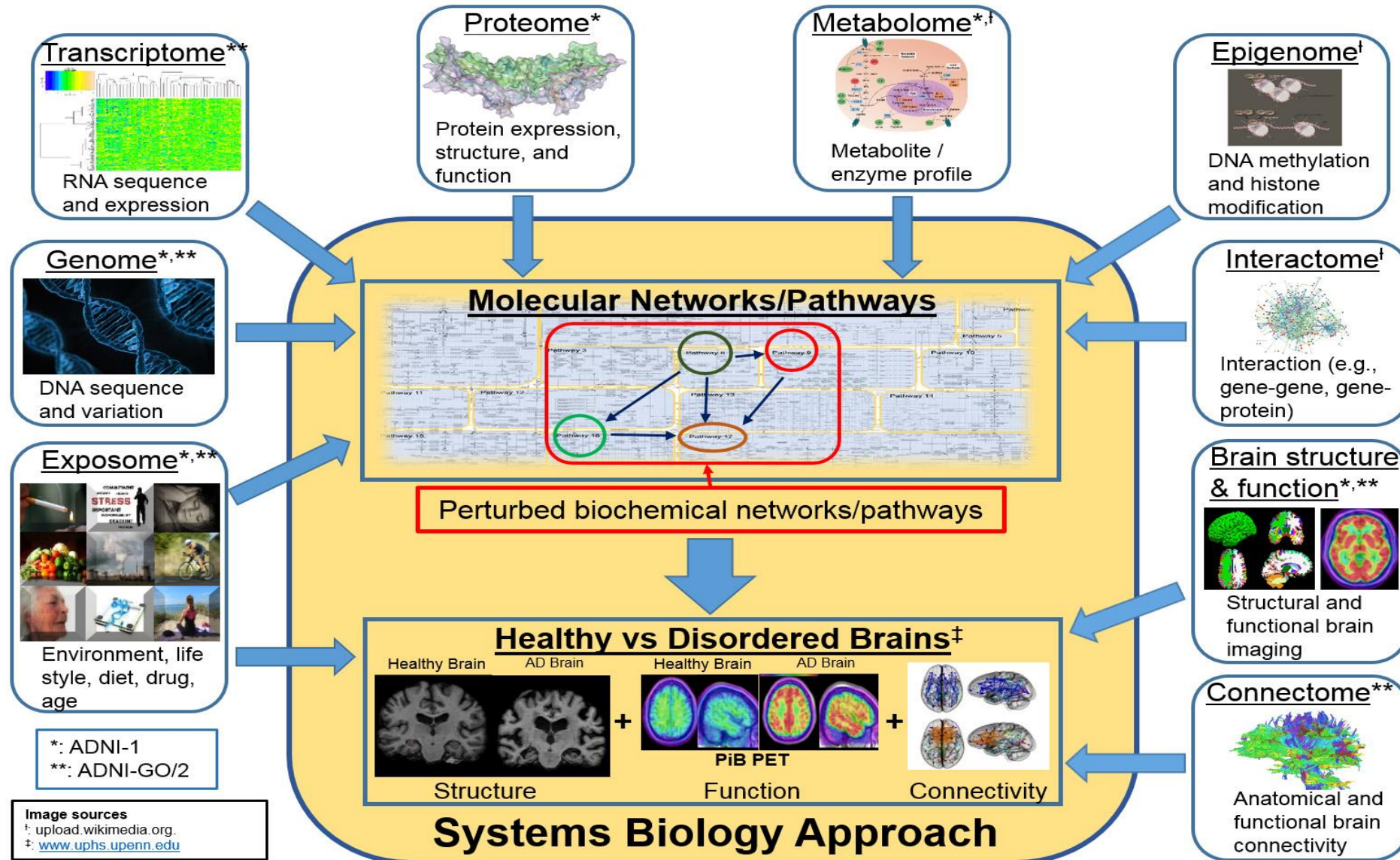


- Mormino, E.C., et al., *Polygenic risk of Alzheimer disease is associated with early- and late-life processes*. Neurology, 2016. **87**(5): p. 481-8.
- Hohman, T.J., et al., *Discovery of gene-gene interactions across multiple independent data sets of late onset Alzheimer disease from the Alzheimer Disease Genetics Consortium*. Neurobiol Aging, 2016. **38**: p. 141-50.
- Gaiteri, C., et al., *Genetic variants in Alzheimer disease - molecular and brain network approaches*. Nat Rev Neurol, 2016. **12**(7): p. 413-27.
- Yokoyama, J.S., et al., *Decision tree analysis of genetic risk for clinically heterogeneous Alzheimer's disease*. BMC Neurol, 2015. **15**: p. 47.
- Martiskainen, H., et al., *Effects of Alzheimer's disease-associated risk loci on cerebrospinal fluid biomarkers and disease progression: a polygenic risk score approach*. J Alzheimers Dis, 2015. **43**(2): p. 565-73.
- Escott-Price, V., et al., *Common polygenic variation enhances risk prediction for Alzheimer's disease*. Brain, 2015. **138**(Pt 12): p. 3673-84.
- Desikan, R.S., et al., *Genetic assessment of age-associated Alzheimer disease risk: Development and validation of a polygenic hazard score*. PLoS Med, 2017. **14**(3): p. e1002258.
- Tan C.H., et al. *Polygenic hazard scores in preclinical Alzheimer disease*. Ann Neurol. 2017, 82(3):484-488.

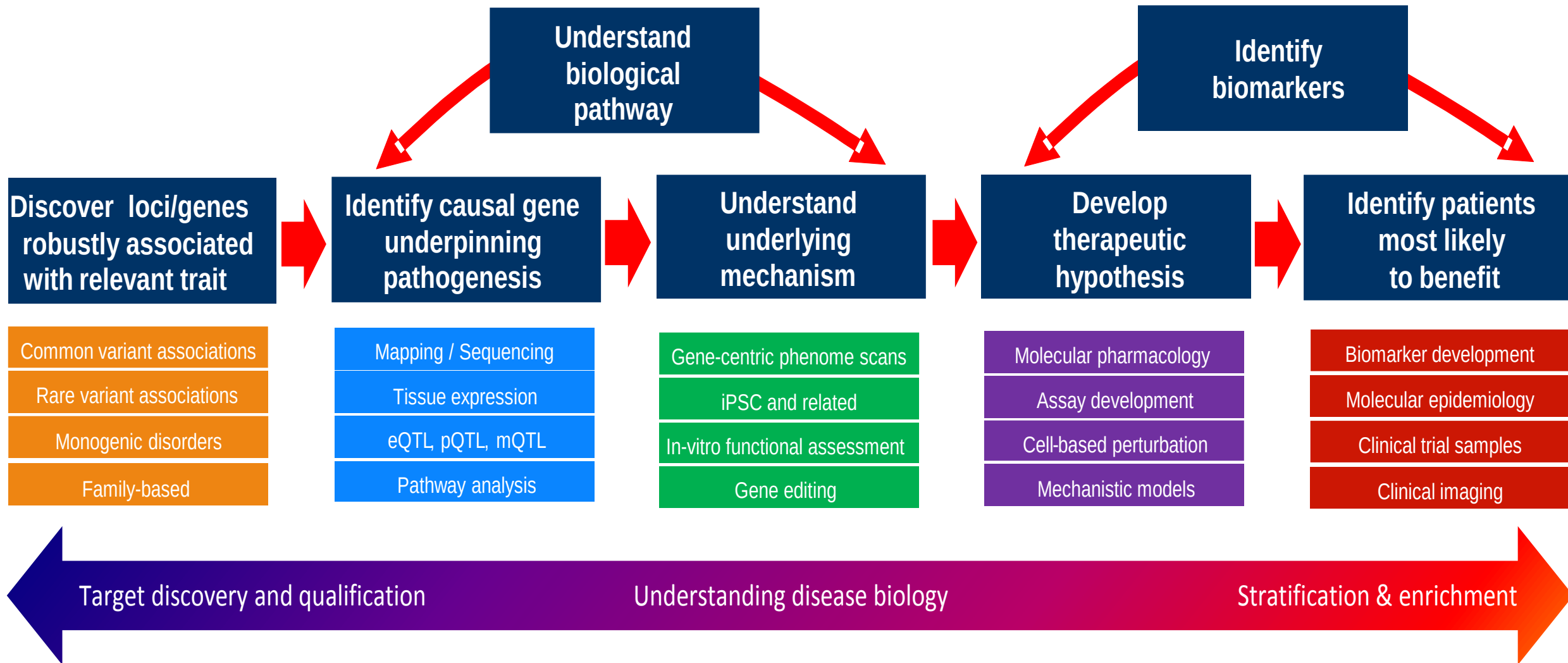
Gene x Environment Interaction: Epigenetics



Working Toward a Systems Biology of AD



Path from genetic signal to targeted therapeutics



Toward a Precision Medicine of AD



THE PRECISION MEDICINE INITIATIVE



WHAT IS IT?

Precision medicine is an emerging approach for disease prevention and treatment that takes into account people's individual variations in genes, environment, and lifestyle. The Precision Medicine Initiative will generate the scientific evidence needed to move the concept of precision medicine into clinical practice.

WHY NOW?

The time is right because of:

- Sequencing of the human genome
- Improved technologies for biomedical analysis
- New tools for using large datasets



NEAR TERM GOALS

Intensify efforts to apply precision medicine to cancer:

- Innovative clinical trials of targeted drugs for adult, pediatric cancers
- Use of combination therapies
- Knowledge to overcome drug resistance



LONGER TERM GOALS

Create a research cohort of > 1 million American volunteers who will share genetic data, biological samples, and lifestyle information, all linked to their electronic health records if they choose.



Flower a new model for doing science that emphasizes engaged participants, responsible data sharing, and privacy protection.

Research based upon the cohort data will:

- Advance pharmacogenomics, the right drug for the right patient at the right dose
- Identify new targets for treatment and prevention
- Test whether mobile devices can encourage healthy behaviors
- Lay scientific foundation for precision medicine for many diseases



Follow the Initiative's progress and consider volunteering for this landmark effort.

www.nih.gov/precisionmedicine

Molecular Validation & Therapeutics: New Models



Model Organism Development and Evaluation for Late-onset Alzheimer's Disease (MODEL-AD)

Contact PI: Bruce Lamb

ADNI contributes target nominations & characterization
MODEL-AD is creating organisms based on ADNI reports



Website: <https://Model-AD.org>

Contact: ModelAD@iupui.edu

Data: <https://www.synapse.org/#!/Synapse:syn2580853/wiki/409840>

Indiana ADC, IU Neuroscience, ADNI & AMP-AD



Neuroscience Center



Indiana Alzheimer Disease Center



Conclusions



- The genetic architecture of AD differs for familial early onset AD and LOAD
- For LOAD we have gone from only *APOE* to over 25 promising candidate genes
- Next generation sequencing is identifying novel rare variants associated with AD
- Major pathways implicated by genome-wide findings include brain lipids and cholesterol processing and the innate immune system
- Genetic variation can be studied in case/control or biomarker phenotype designs
- Polygenic scores combining gene effects are promising for risk prediction
- The systems biology of AD is a work in progress but will be important for understanding and treating this complex disease
- Longitudinal studies of epigenetic changes such as methylation are needed
- An important goal is to understand heterogeneity by integrating genetics, -omics and imaging/biomarker profiles → precision medicine of AD & related disorders
- Target discovery and validation, informing model system development and assessment of therapeutic strategies are all important directions