Gene expression network analysis of gender differences in Alzheimer's Disease

Herve Rhinn, PhD
Assistant Professor, Dept. of Pathology
Columbia University

Objectives:

- -identify male/female differences in the pathogenesis of Alzheimer's disease (AD)
- -generate novel hypotheses addressing their causes and consequences

Approach Rationale:

Unbiased → Genome-wide

AD-relevant → Human Brain

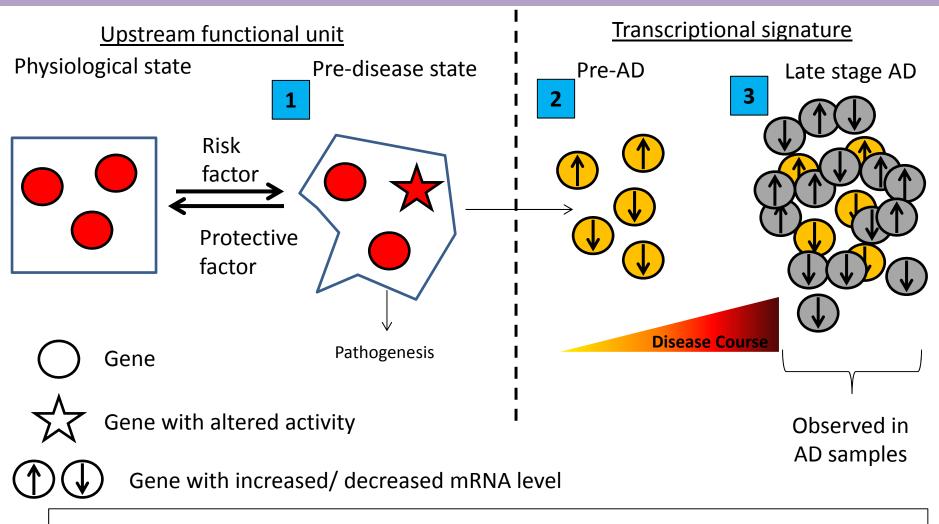
Functional → Gene expression

Causal → Co-expression Network

→ Differential Co-expression Analysis (DCA) of gender-related AD processes in human brain

Conceptual framework

Underlying mechanisms altered by AD risk factors: Bottom-up approach



→ Objective of the bioinformatic analysis: "Rewind" in silico the chain of events, from

the signature observed in

3 to the gene whose function is altered in

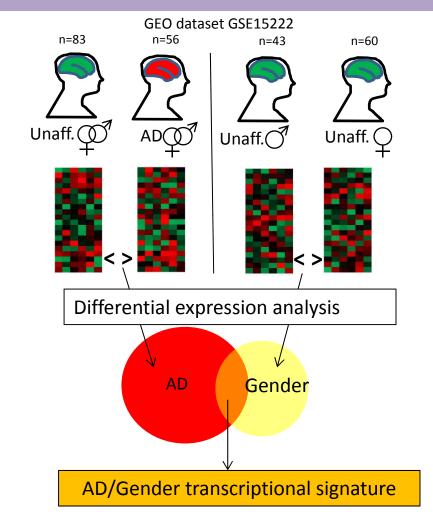
from 3 to 2

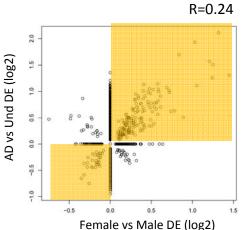
AD signature

Overlap

Implementation – Step 1

Identifying pre-AD transcriptional signature

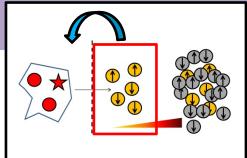




→ Significant similarity between female transcriptomic signature in the elderly brain and AD brain

Gender signature

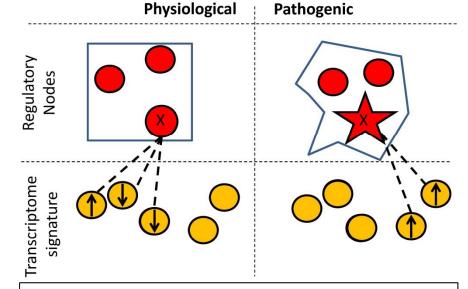
Intersecting AD and gender transcriptomic signature to extract a pre-AD gender signature from 2 to 1



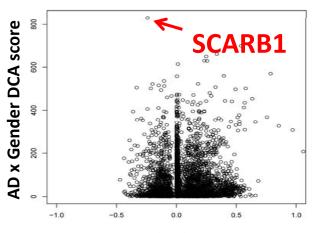
Implementation – Step 2 Identifying causal effector candidates

Genes identified by Differential Co-expression Analysis: Key effectors = genes cumulatively most differentially wired to the most differentially expressed genes

- → Identify genes whose activity is the most altered without requirement for a change in their mRNA levels.
- → Identify the genes from the upstream functional unit whose activity is altered by gender and by AD.



Identifying altered activity by differential co-expression



AD x Gender log2 DE

Differences between DCA scoring (Y axis) and differential expression (X axis) results

Result:

SCARB1 as an effector of gender-dependent AD risk

SCARB1 / SR-BI:

Cell surface receptor, central player of cholesterol metabolism

Receptor for high density lipoprotein cholesterol (HDL), mediates cholesterol transfer to and from HDL.

Genetic variants associated to HDL-cholesterol levels and atherosclerosis

→ Similar to APOE!!!

Gender-specificity:

- -SCARB1 affects lipid metabolism and cholesterol efflux in a gender-specific fashion
- -effects on myocardial infarct and atherosclerosis of genetic variants at the SCARB1 locus appear also **gender-dependent**

Confirmation:

-re-analysis of AD GWAS datasets → interaction between a SCARB1 genetic variant and gender in modulating AD age of onset

(NIAGADS NG00022, NG00023 and NG00024 with n=1360, 180 and 857 AD patients)

Druggability:

SCARB1 inhibitors: ML278, ML279 and ML312 (NIH), BLT-1 and ITX-5061 (Clinical Phase II)

Further Implementation of the Solution

Overall approach:

Complexity of the problem & modest size effect

- → large-scale human whole organism studies rather than animal or cell culture
- → Further human genomics approaches
 - 1) Validation of SCARB1 variant genetic effect
 - 2) Identification of AD-related biomarkers associated to gender and SCARB1
 - 3) Exploration of SCARB1-related pathways by human genetics
 - 4) Molecular dissection of the effect of gender and genetic variant on SCARB1 gene
 - 5) Drugs reverting the AD-causing gender effects?

Further Implementation of the Solution

1) Confirmation of SCARB1 variants genetic effect in function of gender:

- -AD GWAS cohorts for AD risk and age at onset.
- -on MCI, cognitive reserve, cognitive decline.
- -ADNI whole-genome sequencing data for rarer coding variants

<u>Data sources:</u> NIAGADS NG00017, NG00022-24, NG00026, NG00028-30, ADNI cohort, NIA-LOAD, Tgen, GenADA (More than 7000 AD patients)

→ Milestone to confirm the role of SCARB1

2)Identification of AD-related biomarkers associated to gender and SCARB1

- Biochemical: CSF Aβ, pTau or their ratio

-Imaging: Florbetapir or Pitt-stop PET imaging, cortical atrophy, frontal horn enlargement

Data sources: ADNI, PPMI

→ For proximal clinical read-out in a SCARB1 targeting clinical trial

1.8

3) Exploration of SCARB1-related pathway

- -Gender-specific effects of genetic variants in other cholesterol metabolism genes (CETP, APOA1, APOE)
- -3-way interaction between APOE4 genotype, gender and SCARB1

Data sources: NIAGADS datasets, ADNI cohort

→ Better stratification might reveal SCARB1 effect. And identify interacting partners/pathways.

Further Implementation of the Solution

4) Molecular dissection of the effect of gender and genetic variant on SCARB1 gene

-effect of SCARB1 genetic variants on SCARB1 mRNA levels, SCARB1 splicing.

<u>Data sources</u>: GEO, GSE15222, GSE15745, GSE46706, GSE44772 dbGap phs000424.v3.p1, NIAGADS NG00025, Allen Brain Atlas

→ Understand the function of the SNP on SCARB1 function

5)Re-positioning drugs that could reverse the effect of gender on AD:

Based on SCARB1 biological knowledge

-Effect of statin or other cholesterol-modifying drug treatment on AD risk in function of gender and SCARB1 genotype

<u>Data sources:</u> Framingham cohort (<u>phs000007.v20.p8</u>), Baltimore Longitudinal Study of Aging, WHI
(<u>phs000200.v8.p2</u>).

→ Better stratification might reveal an AD-protective effect of statins in specific segments of the population (such as women with a given SCARB1 genotype).