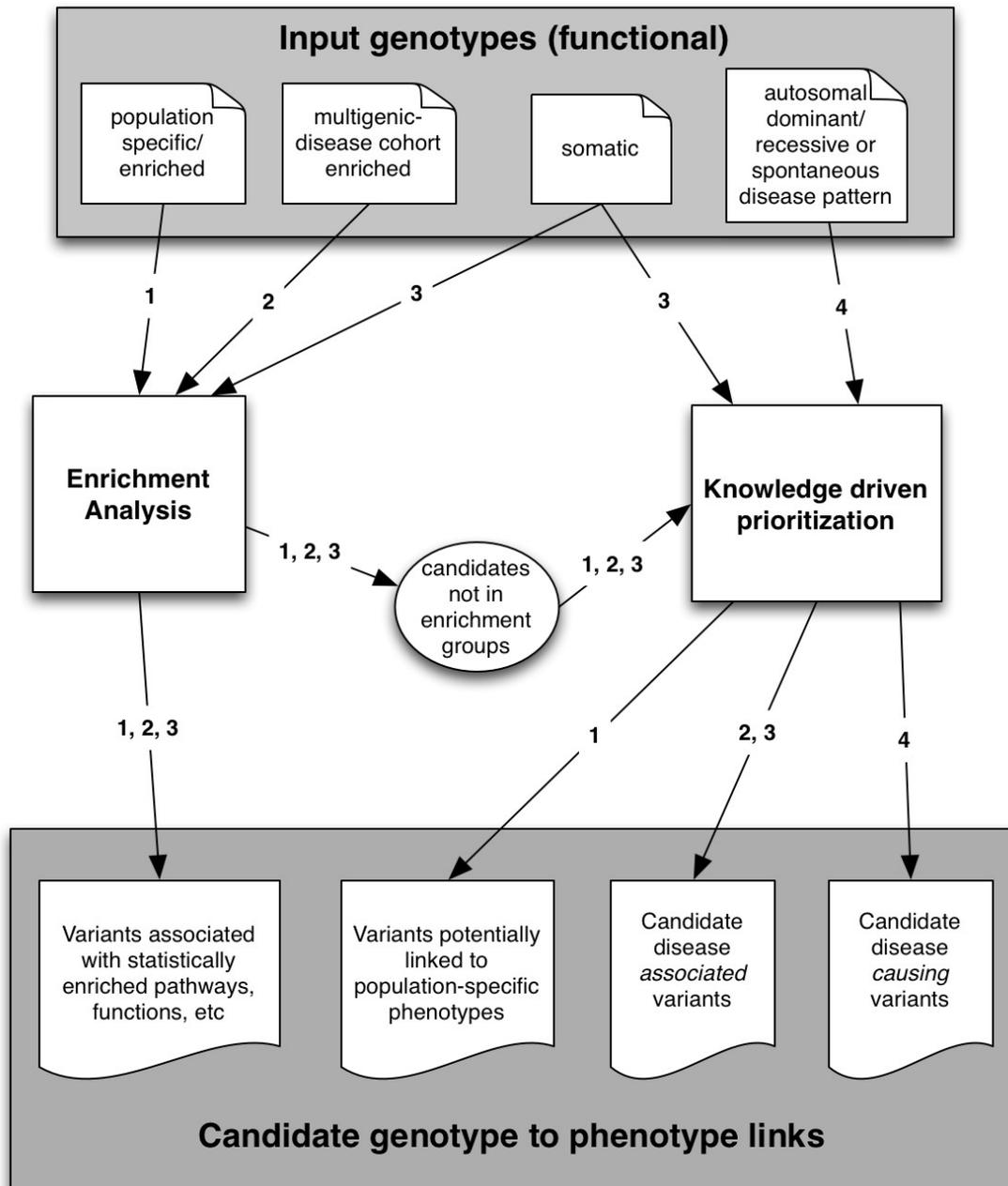


Phase 4: Variant prioritisation

Variant Prioritization



Even with sound experimental design and variant filtering protocols, whole exome sequencing studies often still produce many more candidates than can be verified experimentally. While possible to rank variants based on predicted impact on the protein, it is not always obvious to identify the strongest candidate(s) for involvement in a disease or phenotype of interest. For that reason, assessing candidate genes bearing functional

variants in the context of existing biomedical knowledge and their known biomolecular functions is an important step in producing a manageable set of variants for further validation or exploration.

Depending on the study, candidates can be evaluated individually or as a set. Typical questions that should be asked at this point (one or more):

1. Is the variant *itself* known or predicted to be involved the disease of interest?

ANNOVAR, recommended in Phase 3 (**add link**) produces ClinVar (<http://www.ncbi.nlm.nih.gov/clinvar/>) annotations and identifiers that classify variants as disease causing.

2. Is the variant in a *gene* known to be involved in the disease or in a related disease?

Online Mendelian Inheritance in Man (<http://www.ncbi.nlm.nih.gov/omim>) is an excellent resource for this information. Single genes can be searched using the HUGO gene symbol and selecting “Gene name” in the “Limits” menu. OMIM information for large gene sets can be programmatically obtained by accessing the API (see the “Tools” link at the aforementioned URL).

3. Does the gene have a function that coincides with the pathology, etc?

For example, does a candidate gene identified in an inflammatory disorder have known biological roles and functions related to regulation of the inflammatory response? Gene Ontology annotations can be downloaded from: <http://geneontology.org/page/download-annotations> or a candidate gene’s GO annotations can be searched using AMIGO: <http://amigo.geneontology.org/amigo/search/bioentity>. To determine whether a set of functional variants contribute to a functions relating to a phenotype of interest, the genes they occur in can be assessed for enrichment of GO functions. The ‘gene set enricher’ web service by the Comparative Toxicogenomics Database (Davis et al, 2015) is an intuitive tool for this purpose, which also produces user friendly outputs that can be imported directly into a spreadsheet software for further filtering or manipulation: <http://ctdbase.org/tools/analyzer.go>

4. Is the gene product in a pathway associated with the disease?

Genes can be mapped to KEGG pathways: <http://www.genome.jp/kegg/> or REACTOME pathways: <http://www.reactome.org/>. Similarly, gene-to-pathway annotations

can be derived from the Pathway Ontology (Petri et al, 2014). As in (3), it is possible to determine whether a set of variants collectively impact a pathway(s) known to be associated with a disease or trait of interest by performing an enrichment analysis using the specific functionality in the CTD 'gene set enricher' web service.

5. Does a mutation or animal knockout of the gene cause the disease or a hallmark phenotype of the disease?

The Mouse Genome Informatics database enables querying for human-mouse disease and phenotype connections using gene symbols as an input: <http://www.informatics.jax.org/humanDisease.shtml> (Figure 1) The Human Phenotype Ontology project also provides gene-to-phenotype mappings, which can be used in a similar manner: <http://human-phenotype-ontology.org> (see Figure 4). As in (3) and (4) phenotype statistical enrichment in gene sets can also be performed using the MamPhEA (Weng and Liao, 2010) webserver: <http://evol.nhri.org.tw/phenome> (Figure 2).

6. Is the gene expressed in the tissue or organ of interest?

NCBI's Gene Expression Omnibus profiles (<http://www.ncbi.nlm.nih.gov/geo/profiles>) and the EBI's Expression Atlas (<http://www.ebi.ac.uk/gxa>) are excellent resources for this purpose.

7. Does the gene product physically interact with a protein that is encoded by a known disease gene?

Much like genes that encode proteins that occur in the same pathway as a known disease gene product may cause the disease if mutated, so too may proteins that physically interact with known disease gene products. The STRING database and associated search tools (Szklarczyk et al, 2015 - <http://string-db.org>) are powerful resources for identifying interacting partners of a candidate gene's product, or to identify interactions between the products of a set of genes that bear functional variants.

The relevance of this prioritization method is illustrated in Figure 3, which shows how several of the direct interaction partners of the product of the DMD muscular dystrophy gene are themselves known to cause the disease.

Summary

Extant knowledge about the molecular and cellular mechanisms involved in a disease or phenotype of interest can be extremely useful to prioritise likely candidates from a list of genes that all bear functional variants. That said, and as mentioned before in the Phase 3 SOP, rarity/novelty along

with predicted deleteriousness and expected segregation with affected/cases and unaffected/control individuals in the study are the primary criteria for producing a candidate list. Therefore, variants should not be discarded as being irrelevant if the knowledge filter does not return disease, phenotype or function links. It is also important to note that all the abovementioned questions will yield useful information. However, in many cases, the insights gained from thoroughly interrogating one knowledge domain provide enough evidence to implicate a variant. For example, the ACTA1 gene in Figure 3 has not previously been implicated as a muscular dystrophy gene, but when following the abovementioned SOP, it is clear that it would be a strong candidate (Fig 4) if a deleterious variant were identified as using the Phase 3 SOP.

Human-Mouse: Disease Connection
Relating human diseases and mouse models

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Ex: [Chr12:3000000-10000000](#)
Need to convert genome build? Use this [converter tool](#).
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 Apply filters
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Search by disease or phenotype terms
Click "GO" to search by entered text without selecting a term from the list.
Ex: [105830](#), [Autism AND "social behavior"](#)
Use quotes for exact match. [Hints](#) for using AND, OR, NOT, quotes, partial word matching.
 Show Effective Phenotype Query
Effective Phenotype Query:

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Brain small vessel disease with hemorrhage and with, or without, ocular abnormalities (OMIM:607595)
Humans and mice heterozygous for missense mutations in the COL4A1 (collagen, type IV, alpha 1 chain) gene display common phenotypes with variable penetrance, depending on the specific mutation observed:

- intracranial hemorrhage [MP:0001915]
- abnormal blood vessel morphology [MP:0001614]
- abnormal retinal blood vessel pattern [MP:0010098]
- partial perinatal lethality [MP:0011090]
- cataracts [MP:0001304]

[\[Read more...\]](#)

Col4a1^{+/+} **Col4a1^{+/Deltaex40}**

Figure 1. The Jackson Lab’s gene-to-phenotype search tool

SOURCE OF GENE LISTS:

Organism:

GENE SETS TO BE ANALYZED:

Name of Gene Set 1: Name of Gene Set 2:

Rest of genome

[example 1](#) [example 2](#)

Homo sapiens uses *Ensembl* database ID
e.g. ENSG00000109819, ENSG00000161057, ENSG00000138443

ALTERNATIVE HYPOTHESIS:

Fisher's exact test:

MUTANT PHENOTYPES:

Phenotyped Organism:

Use loss-of-function phenotypes only

One-to-one orthologs only

Enrichment Analysis on MGI pre-defined Phenotypes

[MGI pre-defined Phenotypes](#) at Level to Level [?](#)

SUBMIT:

Figure 2. A gene set enrichment server based on mouse knockout phenotypes from the Jackson lab.

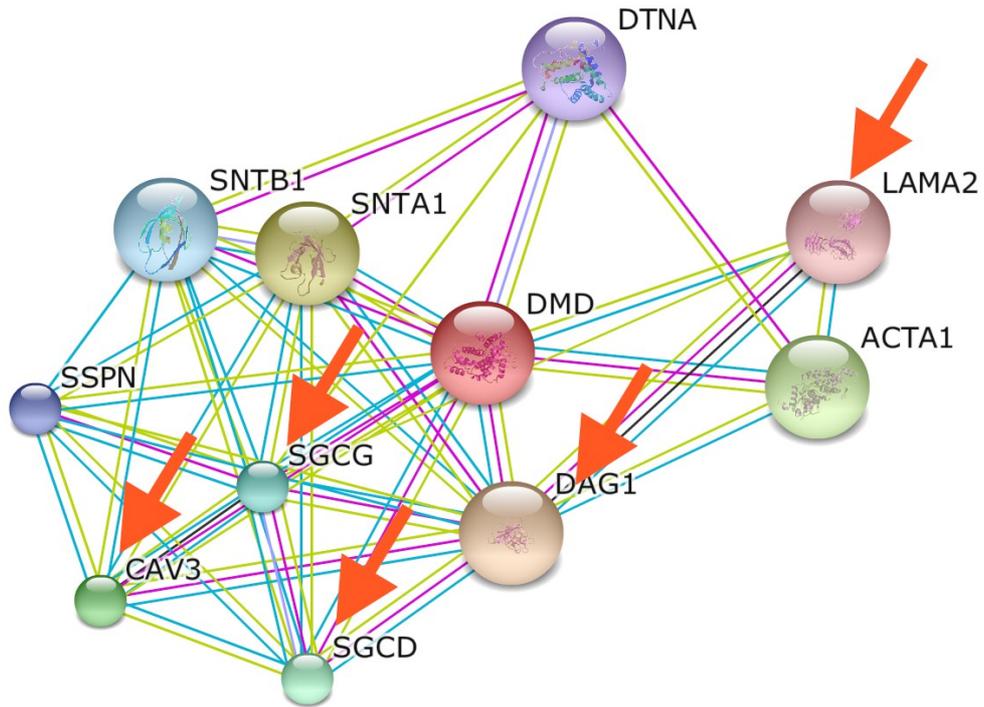


Figure 3. Interaction network of the DMD muscular dystrophy protein. Red arrows highlight other known muscular dystrophy proteins.

```

ACTA1 - actin, alpha 1, skeletal muscle
  involved_in GO:skeletal muscle fiber development (ISS)
    is_a GO:muscle fiber development
      roleplayer_in Disease:muscular dystrophy

  associated_with HumanPhenotype:Waddling gait
    feature_of Disease:muscular dystrophy

  associated_with HumanPhenotype:Hyporeflexia
    feature_of Disease:Becker muscular dystrophy (IEA)
    is_a Disease:muscular dystrophy

  associated_with HumanPhenotype:Proximal muscle weakness
    feature_of Disease:Emery-Dreifuss muscular dystrophy (IEA)
    is_a Disease:muscular dystrophy

  associated_with HumanPhenotype:EMG: myopathic abnormalities
    feature_of Disease:limb-girdle muscular dystrophy (IEA)
    is_a Disease:muscular dystrophy

  associated_with HumanPhenotype:Late-onset distal muscle weakness
    feature_of Disease:limb-girdle muscular dystrophy (IEA)
    is_a Disease:muscular dystrophy

  associated_with HumanPhenotype:Waddling gait
    feature_of Disease:Duchenne muscular dystrophy (IEA)
    is_a Disease:muscular dystrophy

  associated_with HumanPhenotype:Dilated cardiomyopathy
    feature_of Disease:Duchenne muscular dystrophy (IEA)
    is_a Disease:muscular dystrophy

  associated_with HumanPhenotype:Hyporeflexia
    feature_of Disease:Duchenne muscular dystrophy (IEA)
    is_a Disease:muscular dystrophy

  associated_with HumanPhenotype:Muscular hypotonia
    feature_of Disease:Duchenne muscular dystrophy (IEA)
    is_a Disease:muscular dystrophy

  associated_with HumanPhenotype:Muscular hypotonia
    hallmark_of Disease:congenital muscular dystrophy (TAS)
    is_a Disease:muscular dystrophy

```

Figure 4. An illustration of how a new gene bearing a functional mutation segregating with affected individuals could be indirectly linked to muscular dystrophy based on existing knowledge of its association to phenotypes relevant to the disease.

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