The Epistasis Project: a multi-cohort study of the effects of *BDNF*, *DBH* and *SORT1* epistasis on Alzheimer's disease risk

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#### **Abstract**

Pre-synaptic secretion of brain-derived neurotrophic factor (BDNF) from noradrenergic neurons may protect the Alzheimer's disease (AD) brain from amyloid pathology. While the BDNF polymorphism (rs6265) is associated with faster cognitive decline and increased hippocampal atrophy, a replicable genetic association of BDNF with AD risk has yet to be demonstrated. This could be due to masking by underlying epistatic interactions between BDNF and other loci that encode proteins involved in moderating BDNF secretion (DBH and Sortilin). We performed a multi-cohort case-control association study of the BDNF, DBH and SORT1 loci comprising 5,682 controls and 2,454 AD patients from Northern Europe (87% of samples) and Spain (13%). The BDNF locus was associated with increased AD risk (odds ratios; OR=1.1-1.2, p=0.005-0.3), an effect size that was consistent in the Northern European (OR=1.1-1.2, p=0.002-0.8) but not the smaller Spanish (OR=0.8-1.6, p=0.4-1.0) subset. A synergistic interaction between BDNF and sex (synergy factor; SF=1.3-1.5 p=0.002-0.02) translated to a greater risk of AD associated with BDNF in women (OR=1.2-1.3, p=0.007-0.00008) than men (OR=0.9-1.0, p=0.3-0.6). While the *DBH* polymorphism (rs1611115) was also associated with increased AD risk (OR=1.1, p=0.04) the synergistic interaction (SF=2.2, p=0.007) between BDNF (rs6265) and DBH (rs1611115) contributed greater AD risk than either gene alone, an effect that was greater in women (SF=2.4, p=0.04) than men (SF=2.0, p=0.2). These data support a complex genetic interaction at loci encoding proteins implicated in the DBH-BDNF inflammatory pathway that modifies AD risk, particularly in women.

### **Keywords**

"Epistasis, Genetic", "Neurotrophins", "Alzheimer disease", "Brain-Derived Neurotrophic Factor", "Dopamine beta-Hydroxylase", "Sortilin"

### Introduction

Understanding the genetic factors that modify risk and/or progression of Alzheimer's disease (AD) is fundamental for the identification and monitoring of at-risk individuals and could lead to novel therapeutic targets and biomarkers. Brain-derived neurotrophic factor (BDNF) is the most abundant neurotrophin in the brain and is a wellcharacterised protective factor against AD pathology. Specifically, it has been reported that pre-synaptic secretion of BDNF from noradrenergic neurons modulates neural circuitry, synaptic plasticity, neuronal survival and differentiation and protects neurons from various types of insult (reviewed in [1]). In accordance with these findings, reduced levels of BDNF (mRNA and protein) have been observed in peripheral blood of AD patients [2] and in cortical and subcortical brain regions of individuals with AD at autopsy [3, 4]. In the aged population and in subjects with mild cognitive impairment and AD patients, reduced brain BDNF levels correlate with lower cognitive scores and faster cognitive decline [5-7]. Moreover, there is some evidence that genetic variation at the BDNF locus may moderate downstream effects of the pathological protein, βamyloid, in autosomal dominant AD. For example, asymptomatic adults with signs of brain amyloidosis who carry the methionine allele at rs6265 show faster decline in episodic memory, lower hippocampal volume and increased tau markers in cerebrospinal fluid compared to valine homozygotes [8-12]. This could be attributed to the association of this allele with altered intracellular trafficking and reduced secretion of BDNF [13-15]. Additionally, there is evidence that the protective effect of lifetime

exposure to cognitively stimulating activities on cognitive performance may be weaker in carriers of the methionine allele [16]. Thus, the methionine allele may be a prognostic biomarker for predicting cognitive decline due to AD. That being said, extensive study in over 30 populations (Caucasian, Asian, African and mixed) has failed to demonstrate a replicable association of *BDNF* genetic variants with altered AD risk (www.Alzgene.org [17]).

Studies using rodent models have shown that a reduction in BDNF levels may precede the appearance of amyloid plaque pathology [18]. Reduced BDNF levels have been associated with altered synaptic plasticity [19-21], increased cortical amyloid plaque numbers, and reduced noradrenergic innervation of the hippocampus, frontal cortex, and cerebellum [22] of animal models, effects that can be reversed with BDNF treatment [23-27].

Taken together, data from animal and human studies strongly support an important neuroprotective effect of BDNF and that an imbalance in BDNF signalling may be an early event in AD pathogenesis. It follows that modulation of BDNF secretion could be critical to this process. In this regard, previous studies using rodent models have reported a feed forward loop between BDNF and the noradrenergic system, whereby noradrenaline (norepinephrine) induces astrocytic and neuronal BDNF secretion, which in turn stimulates noradrenergic signalling as part of an anti-inflammatory mechanism [28-32]. In support of this, reduced noradrenaline levels have also been reported in aged and AD brains and it has been hypothesised that increasing noradrenergic signalling in the brain could halt the progression of neurodegeneration and cognitive decline (reviewed in [33]). Noradrenaline is synthesised from dopamine, a reaction catalysed by dopamine beta-hydroxylase (DBH) and is an anti-inflammatory agent that can attenuate

the cortical inflammatory response to the  $A\beta_{42}$  peptide [34]. Thus deregulation of DBH-mediated synthesis of noradrenaline could have downstream effects on BDNF secretion. An additional factor in BDNF secretion is the intracellular sorting of BDNF to the secretory pathway, which is regulated by binding of the BDNF pro-domain to the luminal domain of Sortilin [35]. This interaction prevents BDNF degradation, targets BDNF to the secretory pathway [36] and facilitates the release of mature BDNF [37].

The aims of this first study of Stage 2 of the Epistasis Project (the results of Stage 1 [38-44] are summarised in **Table 1**), were to further evaluate the contribution of genetic variation at the *BDNF* locus to AD risk in a large case-control dataset (n=8,136) and determine whether the association could be masked by genetic epistasis between *BDNF* variants and sex, age, *APOE* £4 status and variants at loci encoding proteins that control BDNF secretion (DBH and Sortilin).

## **Materials and Methods**

### **Study population**

DNA samples were collected from individuals of Caucasian European descent by seven research centres within two geographical regions namely, Northern Europe (Bristol, Nottingham, OPTIMA and Rotterdam) and Spain (Madrid, Oviedo and Santander). All AD cases were diagnosed "definite" or "probable" by CERAD or NINCDS-ADRDA criteria. AD cases were sporadic, i.e. possible autosomal dominant cases were excluded, based on family history. The cohorts in Stage 1 of the Epistasis Project were described in [38]. In this Stage 2, the Bonn cohort was replaced by that from Madrid, giving a better overall balance between Northern Europe and Spain. The Madrid cohort fulfilled our criteria of an all-Caucasian population drawn from a narrow geographical region. The demographics of each sample collection are shown in **Table 2**. Research ethics

approval was obtained by each of the participating groups. Written informed consent was given for donation of blood samples from all participants, or their legal representatives.

### **Polymorphism selection**

We downloaded Caucasian European (CEU) population data from the HaploView platform (release 27) using gene coordinates (gene +/- 10kbp flanking regions) extracted from the UCSC MySQL server (hg18) at https://genome.ucsc.edu/. Polymorphisms with a genotype rate <50%, and that were in Hardy-Weinberg equilibrium (p<0.001) and with a minor allele frequency (MAF) <5% were removed. The remaining polymorphisms were introduced into the tagger function in HaploView. A tagging threshold of  $r^2$ >0.8 and log odds (LOD) score>3.0 was used. The "Aggressive Tagging" approach was implemented, which allows a haplotype of up to three polymorphisms to be used as a proxy. We identified 34 polymorphisms (5 in BDNF, 23 in DBH and 6 in SORTI) that have a minor allele frequency >5% in Caucasian Europeans and that cover 80% of the variation in these genes (**Table 3**). Due to the considerable variation in DBH, coverage of this gene was restricted to rs1611115, which has previously been associated with increased AD risk in men aged <75 [39] and is responsible for 30-50% of the considerable variation in DBH activity [46-53]. The 12 polymorphisms were taken forward for genotyping.

## **Genotyping and imputation**

Genotyping for all centres except Rotterdam (below) was performed by LGC (Hoddesdon, Hertfordshire, UK), using the KASPar technology by KBioscience http://www.kbioscience.co.uk. Six to eight duplicate samples and one blank (H<sub>2</sub>O) sample were included on each plate. All blank samples were negative. The concordance

between duplicates was 100% with the exception of one discordant sample for BDNF rs11030104 in the Bristol dataset, which was removed from analyses. Where data were available from previous in-house TaqMan genotyping, LGC genotypes were 100% concordant (BDNF rs6265; n=483, DBH rs1611115; n=396). Genotyping in the Rotterdam cohort was done on Version 3 Illumina-Infinium-II HumanHap550 SNP array (Illumina, San Diego, USA). Genotypes for the Rotterdam cohort were imputed from whole genome data using MACH software (http://www.sph.umich. edu/csg/abecasis/MACH/) and with the 1000 genomes project (phase I version 3 reference panel, positive strand) as a reference. The reliability of imputation was estimated for each imputed SNP with the ratio of expected and observed dosage variance (O/E ratio). Only samples with high-quality extracted DNA were genotyped. In order to allow analysis alongside the genotyped cohorts, the imputed probabilities from Rotterdam were converted to genotypes such that a value of 0 was coded as homozygote for allele 2, a value of 1 was coded as heterozygote and a value of 2 was coded as homozygote for allele 1. It should be noted that a dosage of 1 could be heterozygote, but it could also mean that person has a 0.5 probability of being homozygote for allele 1 and a 0.5 probability of being homozygote for allele 2. That being said, it is commonplace in genetics to round these values to 0/1/2 with the implied corresponding genotypes. The supplementary table shows the genotype counts and allele frequencies as well as genotyping rate for all individual centres. The genotyping rate for each polymorphism ranged from 0.99 to 1.00 in the total dataset. All genotypes were confirmed to be in Hardy-Weinberg equilibrium ( $\alpha$ =0.001) in controls from all individual centres. APOE ε4 genotypes were determined according to the genotypes at rs429358 and rs7412. Tests for pair-wise intragenic linkage disequlibrium for the 5 BDNF polymorphisms and the 6 *SORT1* polymorphisms were consistent with the Haploview data (r<0.8) with the exception of rs6265 and rs11030104 in *BDNF* ( $r^2$ =0.9) and rs2228604 and rs10745354 in *SORT1* ( $r^2$ =1.0). The high degree of co-inheritance of these pairs was replicated in both the Northern European and Spanish controls. The polymorphisms rs11030104 (*BDNF*) and rs10745354 (*SORT1*) were therefore removed from the study as they provided no further information.

## Statistical analyses

All analyses were performed in R version 3.5.0 [54]. The relative risk (odds ratios and 95% confidence intervals; CI) for AD was calculated for each of the 10 polymorphisms brought forward for analysis using a general linear model for dominant and recessive inheritance models controlling for age-at-extraction, sex, APOE & allele and individual centre. The Akaike Information Criterion (AIC) was used to compare goodness-of-fit, with smaller values of AIC corresponding to preferable models. The statistical power for each sample included in the study to detect a significant ( $\alpha$ =0.05) association of a polymorphism with a minor allele frequency 0.2 (mean of polymorphisms included in the study) with AD risk (OR=1.2) under a dominant model and assuming a prevalence of AD of 10% in the population aged over 65 is as follows: Total dataset 97%, Northern Europe 92% (Bristol 14%, Nottingham 14%, OPTIMA 17%, Rotterdam 78%), Spain 31% (Madrid 18%, Oviedo 11%, Santander 13%). All tests were first performed in the total dataset and subsequently stratifying by geographical region: Northern Europe=Bristol, Nottingham, OPTIMA and Rotterdam; Spain=Madrid, Oviedo and Santander. When an association (p<0.05) was observed in the Northern European dataset, analyses were subsequently tested in the Rotterdam subset as the only collection centre with sufficient statistical power to detect an association. Interactions were assessed using the Synergy Factor (SF) described in [55]. Using this method, the SF=actual OR (joint effect of two factors) / predicted OR (product of the OR for each factor alone). The null hypothesis states that the actual OR is equal to the predicted OR. This method assesses interactions on a multiplicative scale rather than an additive scale. Throughout the study, significance was considered at the  $\alpha$ =0.05 level. However, due to the large number of tests performed (n=224 in total), the Bonferroni cut-off ( $\alpha$ =0.0002) can be considered as a more stringent cut-off for significance that minimizes the false-positive associations reported. Associations that surpass this cut-off are indicated in the text and figures.

### **Results**

### Genetic variation at the BDNF locus is associated with increased AD risk

We tested for association of the 4 *BDNF* polymorphisms with altered AD risk in the total population. The model preferred (lowest AIC) for *BDNF1* was the recessive inheritance model, whereas the preferred models for *BDNF2-4* were the dominant models. The OR and 95% CI for the preferred models of each polymorphism are plotted in **Fig1**. The *BDNF1* polymorphism, previously shown to regulate BDNF trafficking, was not associated (at the  $\alpha$ =0.05 level) with altered AD risk in the total (rs6265 MM; OR=1.2, p=0.3), Northern European (OR=1.0, p=0.8) or Spanish (OR=1.6, p=0.1) datasets (**Fig1A**). However, the OR in the total dataset was of a similar yet greater magnitude to those for *BDNF2* (**Fig1B**; rs12288512 A allele OR=1.1, p=0.04) and *BDNF3* (**Fig1C**; (rs113030102 G allele OR=1.1, p=0.005), associations which surpassed our cut-off for significance. Both *BDNF2* (OR=1.2, p=0.01) and *BDNF3* (OR=1.2, p=0.005) were associated with increased AD risk in the Northern European but not Spanish (OR<1.0, p>0.3) populations. The associations of *BDNF2-4* were even

stronger in the Rotterdam subset (*BDNF2*; OR=1.2, p=0.002, *BDNF3*; OR=1.3, p=0.0008). Another polymorphism, *BDNF4* (**Fig1D**), that was not significant in the total dataset (p=0.08) despite a similar OR (rs11030119 A+; OR=1.1), was associated with increased AD risk in the Northern European (OR=1.2, p=0.01) and Rotterdam (OR=1.2, p=0.002) but not Spanish (OR=0.8, p=0.2) population. It should be noted that none of these associations surpassed the Bonferroni cut-off (p<0.0002) for this study (best p=0.0008 for *BDNF3* in the Rotterdam dataset).

To determine whether interactions between BDNF polymorphisms could explain the contradictory findings for rs6265 (BDNFI) across multiple populations, we sequentially added pair-wise interactions between the 4 BDNF polymorphisms into the model. No interaction between BDNF polymorphisms was associated with altered AD risk (p>0.5).

# Women showed increased susceptibility to AD risk-modifying polymorphisms at the BDNF locus

We next tested whether interactions between *BDNF* polymorphisms and age-at-sampling, sex and possession of the *APOE*  $\epsilon$ 4 allele could contribute to AD risk. We found no association of the *BDNF1\**sex interaction with AD risk (SF=0.95, p=0.9). However, inclusion of *BDNF2\**sex, *BDNF3\**sex or *BDNF4\**sex interactions improved the AIC for the model and the synergy factors (SF) for these interactions are plotted in **Fig2A-C**. We observed a positive synergistic interaction between *BDNF2*, *BDNF3* and *BDNF4* and sex in the total dataset; sex\**BDNF2* (SF=1.5, p=0.002), sex\**BDNF3* (SF=1.4, p=0.002) and sex\**BDNF4* (SF=1.3, p=0.02). The interactions were observed in the Northern European dataset (SF=1.4, p=0.02; SF=1.4, p=0.007; SF=1.3, p=0.02, respectively) and Rotterdam (SF=1.4, p=0.02, SF=1.5; p=0.01, SF=1.4, p=0.04, respectively) datasets and the sex\**BDNF2* interaction was also observed in the Spanish

population (SF=1.94, p=0.03). To explore these interactions further, BDNF2-4 were tested for association with AD in women and men separately in the datasets that showed a synergistic interaction (**Fig2D-F**). While BDNF2 was associated with reduced AD risk in Spanish men (OR=0.6, p=0.03), all three polymorphisms were associated with increased risk in women from the total (BDNF2; OR=1.3, p=0.0006, BDNF3; OR=1.3, p=0.00008, BDNF4; OR=1.2, p=0.007, respectively) and Northern European (OR=1.3, p=0.0007, OR=1.4, p=0.00005, OR=1.2, p=0.001, respectively) and Rotterdam (OR=1.4, p=0.0001, OR=1.4, p=0.00003, OR=1.4, p=0.0002, respectively) datasets, associations that surpassed the Bonferroni cut-off for this study (p<0.0002) in at least one of the datasets.

We next tested for association of interactions between BDNF variants and the *APOE*  $\varepsilon 4$  allele. The *BDNF3*\* $\varepsilon 4$  interaction (SF=0.47, p=0.02) was associated with altered AD risk in the Spanish dataset and *BDNF3* was nominally associated with decreased AD risk in Spanish  $\varepsilon 4$  carriers (OR=0.58, p=0.05) but not in non-carriers (OR=1.2, p=0.2). That being said, these interactions may be of less importance since including them in the models did not improve the AIC. Interactions between other *BDNF* variants and  $\varepsilon 4$  were not associated with AD risk (p>0.06) and neither were interactions between any *BDNF* variant and age (p>0.2).

# BDNF and DBH polymorphisms act synergistically to increase AD risk in Northern European women

We have previously identified an association of the *DBH* polymorphism, rs1611115, with increased AD risk in men aged <75 [39] in a sample set that overlaps with that included in this study. Therefore, unsurprisingly, when testing for an association of *DBH* with AD risk in the total population, we found that the *DBH* polymorphism was

associated with increased risk of AD in the total dataset (rs1611115T+ OR=1.12, p=0.04), albeit that the association was not apparent in either of the regional subsets (OR=1.1, p=0.1 and OR=1.3, p=0.1). Addition of interactions between the DBH polymorphism and age-at-sampling, sex and possession of the APOE E4 allele did not improve the AIC for the model. Since DBH and BDNF have both been implicated in regulating noradrenergic neurotransmission, we sought to determine whether polymorphisms at the BDNF and DBH loci could interact to alter AD risk. The addition of interactions between DBH and all 4 BDNF polymorphisms improved the AIC for the model. The SF for the interactions are plotted in Fig3A-D. A synergistic BDNF1\*DBH interaction contributed to AD risk in the total (SF=2.2, p=0.007) and Northern European (SF=2.2, p=0.02) and Rotterdam (SF=2.2, p=0.03) datasets. While the SF (SF=1.4) was comparable in the Spanish population (p=0.3), the interaction did not reach our cut-off for significance. Since the BDNF polymorphisms have different effects in men and women, we next tested the BDNF\*DBH interactions in male and female subgroups separately. Due to testing rs6265 under a recessive inheritance model, the low number of male MM (rs6265), T+ (rs1611115; dominant model) carriers in the Spanish dataset (n=7), meant that the BDNF\*DBH1 interaction could only be tested in the Northern European dataset. In that dataset, the BDNF\*DBH1 interaction contributed more to AD risk in women (SF=2.4, p=0.04) than men (SF=2.0, p=0.2). The remaining BDNF\*DBH interactions did not contribute to the AD risk (p>0.1) and it should be noted that none of the BDNF1\*DBH interactions surpassed the Bonferroni cut-off (p<0.0002) for this study.

### SORT1 genetic variation is not associated with AD risk

Finally we tested for an association of SORTI polymorphisms with AD risk. We found no association in the total, Northern European or Spanish populations (p>0.05). We tested for an association of interactions between the SORTI polymorphisms and age-at-sampling, sex and possession of the APOE  $\epsilon 4$  allele with AD risk. We observed an antagonistic interaction between SORTIe (rs1149175 GG) and sex in the Spanish dataset (SORTIe OR=2.2, sex OR=2.1, SF=0.4, p=0.007) and SORTIe was associated with increased AD risk in Spanish men (OR=2.27, p=0.002). That being said, these interactions may be of less importance since including them in the models did not improve the AIC. None of the interactions with the BDNF variants contributed to AD risk in the total or regional subsets (p>0.05).

### **Discussion**

This multi-cohort study of 5,682 controls and 2,454 AD patients (recruited from seven research centres from Northern Europe and Spain) represents a comprehensive exploration of the contribution of epistatic interactions between genes encoding proteins implicated in BDNF secretion and noradrenergic innervation to AD risk. The main finding of this study is the synergistic interaction between *BDNF* risk-modifying variants (*BDNF2-4*) and sex (SF=1.3 to 1.5) such that the *BDNF*-associated risk was observed in women (OR=1.2 to 1.3) but not men (OR=0.9 to 1.0). We also show evidence of a synergistic interaction between the *BDNF* and *DBH* loci such that carriers of the minor allele at *DBH* (rs1611115) who are also homozygous for the minor allele at *BDNF1* (rs6265) are at increased risk of AD (SF=2.2) than carriers of either allele alone (*BDNF* OR=1.1 to 1.2, *DBH* OR=1.1), an effect that was greater in women (SF=2.4) than in men (SF=2.0).

In support of the meta-analyses performed by Alzgene, we report only a nominal association of rs6265 (BDNFI) with AD risk (OR=1.2, p=0.3). On the other hand, we report three novel risk-modifying BDNF polymorphisms that were associated with increased AD risk in the total or Northern European populations (OR=1.1, p<0.01). It should be noted that the OR for rs6265 was similar to that reported for the associations reported for the other 3 polymorphisms. We therefore cannot rule out the possibility that rs6265 has a similar frequency to the other BDNF variants in AD patients, but that the significance of this increased frequency is attenuated by other covariates in the model, namely age-at-collection, sex, APOE  $\varepsilon 4$  or collection centre Nevertheless, since none of these associations were significant when accounting for multiple testing (lowest p=0.0008, Bonferroni cut-off = 0.0002), these findings warrant replication in large independent cohorts.

The strongest finding of this study is the interaction between *BDNF* variants 2-4 (rs12288512, rs113030102, rs11030119) and sex (SF=1.3 to 1.5) such that women carriers from Northern Europe were at greater risk of AD (OR=1.3 to 1.4) than men (OR=0.9 to 1.0), associations that were significant even after accounting for multiple testing in at least one dataset. The evidence for the *BDNF2\**sex interaction reported here is particularly strong, as it was observed in both the Northern European (increased risk in women) and Spanish (decreased in men) subsets as well as the total dataset. This is not the first study to identify sex differences related to the *BDNF* locus in AD, albeit that a previous study reported an association of *BDNF1* (rs6265) with increased AD risk in women from the Han Chinese population [56], a variant that did not interact with sex in this study (p=0.9). Moreover, the gender effect may not be limited to AD; a greater neuroprotective effect against methamphetamine-induced toxicity (i.e., greater

preservation of corpus striatal dopamine levels) has been reported in male compared to female mice over-expressing Bdnf [57]. In another study, modulation of Bdnf expression in response to acute stress was impaired in female rats [58]. The mechanism underlying the gender difference observed in this and other studies has yet to be fully explored. However, a direct interaction between estrogen receptors and *BDNF* transcription has been shown to alter hippocampal physiology during development in the rat, suggesting that hormonal variation during a critical time window may contribute to sex-specific effects in BDNF transcription [59]. Whether the BDNF variants reported here also affect BDNF transcription has yet to be explored. If a functional effect is demonstrated, a hypothesis arises whereby BDNF expression may be natively lower in adult women, which, when combined with carrying a genetic variant that may also affect brain BDNF levels, could have a multiplicative effect on susceptibility to AD pathology, thereby increasing risk for AD in female carriers compared to male non-carriers. This is an intriguing avenue worth pursuing in future functional studies.

It is possible that *BDNF* variants could differentially influence a range of brain regions and networks. Therefore, functional studies to determine how these variants may influence noradrenergic innervation of the hippocampus, frontal cortex, and cerebellum could also be informative. Moreover, whether functional effects can be directly attributed to the polymorphisms included in the study, or rather to other polymorphisms within the linkage disequilibrium blocks that they capture, also warrants further investigation.

We also report a synergistic interaction (SF=2.2) between *BDNF1* (rs6265) and *DBH1* (rs1611115) that contributed more to AD risk in Northern European women (SF=2.4) than men (SF=2), an association that was not apparent for the other *BDNF* variants.

This result is particularly intriguing since the rs6265 variant alone showed the weakest association with AD risk. As the interaction did not survive adjustment for multiple testing (p=0.007, Bonferroni cut-off = 0.0002), validation in an independent study is necessary. If validated, this interaction could indicate a combinatorial functional effect between *BDNF* and *DBH* variants that is specific to the rs6265 polymorphism, thus highlighting the importance of considering epistatic interactions in genetic studies to unmask otherwise hidden associations with AD. We have previously reported a synergistic interaction between *DBH* (rs1611115) and pro-inflammatory cytokines [39, 45] that contributed to increased risk for AD. As BDNF and DBH are involved in a feed-forward anti-inflammatory mechanism, these studies could point toward a complex interaction between genes that encode proteins involved in neuroinflammatory pathways and furthermore that these interactions may differ according to sex.

A limitation of this study is the use of Alzheimer's disease diagnosis as a single end-point, which does not account for the possibility of disease-modifying effects of these variants on brain atrophy or cognitive decline, particularly if these effects are only evident at early stages. The ORs reported in this study, although modest (1.1 to 1.6), suggest a mild effect on AD risk, as would be expected from a complex genetic disorder such as AD.

Overall, these data suggest a complex interplay between *BDNF* and sex that warrants further investigation in large, independent studies.

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## **Conflict of Interest statement**

The authors have no conflict of interest to report

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# **Tables**

Study [nofononco]	Interesting gener	Construes	Synergy factors (95% CI, p-value)	Population			
Study [reference]	Interacting genes	Genotypes	All North Europ		North Spain		
Combarros O et al 2009 [38]	IL6 x IL10	rs2069837 AA x rs1800871 C+	1.6 (1.1-2.4, 0.01)	1.7 (1.05-2.6, 0.03)	2.0 (0.9-4.4, 0.09)		
Combarros O et al 2010 [39]	DBH x IL1A	rs1611115 T+ x rs1800587 TT	1.9 (1.2-3.1, 0.005)	1.7 (1.02-2.8, 0.04)	3.4 (0.9-12.3, 0.07)		
Lehmann DJ et al 2012 [40]	HFE x TF	rs1799945 CC x rs1130459 AA	1.5 (1.1-2.1, 0.02)	2.0 (1.3-3.05, 0.002)	1.3 (0.7-2.55, 0.4)		
Kölsch H et al 2012 [41]	PPARA x INS	rs1800206 CC x rs689 TT	1.7 (0.9-3.2, 0.1)	2.5 (1.2-5.4, 0.02)	0.8 (0.2-3.0, 0.7)		
Heun R et al 2012 [42]	PPARA x IL1A	rs4253766 CC x rs3783550 C+	1.6 (1.15-2.2, 0.005)	1.7 (1.2-2.5, 0.006)	1.5 (0.7-3.0, 0.3)		
Bullock JM et al 2012 [43]	GSTM3 x HHEX/IDE/KIF11	rs7483 A+ x rs1111875 GG	2.3 (1.6-3.2, < 0.00001) <sup>a</sup>	2.2 (1.5-3.3, 0.0001) <sup>a</sup>	2.8 (1.2-6.4, 0.015) <sup>a</sup>		
Medway C et al 2013 [44]	CYP19A1 x IL10	rs1062033 GG x rs1800896 A+	1.9 (1.2-3.25, 0.01) <sup>b</sup>	1.9 (1.1-3.3, 0.02) <sup>b</sup>	1.4 (0.35-5.55, 0.65) <sup>b</sup>		

Table 1. Summary of the results obtained from Stage 1 of the Epistasis Project. Synergy Factors and p-values are given for interactions between genes studied in Stage 1. All analyses controlled for age, gender, APOE & and collection centre. Results in bold type are significant at p<0.05.

<sup>&</sup>lt;sup>a</sup> in  $\geq 75$  years (the 3-way interaction with age  $\pm 75$  years gave p=0.02) <sup>b</sup> in women (the 3-way interaction with gender in North Europe gave p=0.02)

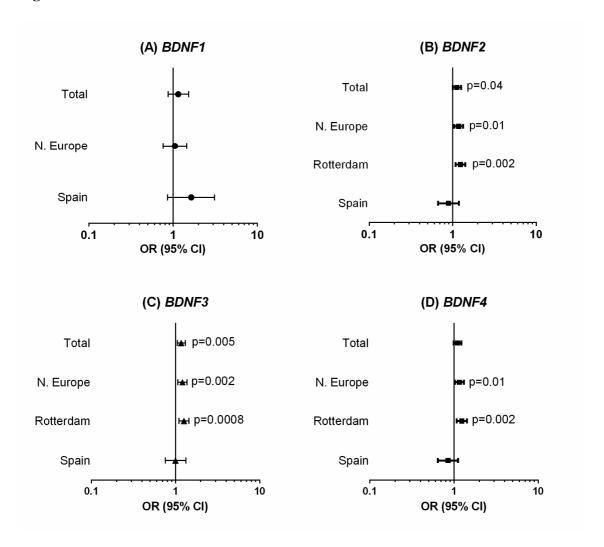
		Age-at-samp	le-collecti	on (years)	Female	e	APOE	ε4+
	n	Mean +/-SD	range	n 75+	n	%	n	%
Controls	5682	82+/-8	60-106	4762	3198	56	1303	23
Northern Europe	5239	82+/-7	60-106	4513	2925	56	1231	23
Bristol	88	81+/-8	62-96	69	39	44	12	14
Nottingham	148	78+/-10	60-104	96	65	44	32	22
OPTIMA	208	80+/-7	62-100	154	89	43	49	24
Rotterdam	4795	83+/-7	60-106	4194	2732	57	1138	24
Spain	443	<b>77</b> +/ <b>-10</b>	60-104	249	273	62	72	16
Madrid	278	76+/-11	60-104	135	168	60	42	15
Oviedo	59	74+/-5	63-87	29	36	61	12	20
Santander	106	81+/-8	62-99	85	69	65	18	17
AD	2454	81+/-8	60-109	1945	1568	64	1218	50
Northern Europe	1858	83+/-7	60-101	1589	1196	64	926	50
Bristol	210	80+/-9	60-99	160	106	50	137	65
Nottingham	253	83+/-8	61-101	211	140	55	151	60
OPTIMA	267	79+/-8	61-100	190	123	46	178	67
Rotterdam	1128	84+/-6	61-101	1028	827	73	460	41
Spain	596	76+/-8	60-109	356	372	62	292	49
Madrid	232	75+/-10	60-109	106	147	63	118	51
Oviedo	138	77+/-5	63-88	92	86	62	53	38
Santander	226	77+/-7	60-98	158	139	62	121	54

Table 2. Demographics of the sample collections used in this study. The number of samples (n) in each dataset along with mean age-at-sample collection (+/- standard deviation; SD) is given. The sample numbers (n and % of dataset) are also given for the demographic variables included in the analyses, i.e., age-at-collection (participants aged over 75; n>75 versus <75), sex (female versus male) and *APOE*  $\varepsilon$ 4 carriers ( $\varepsilon$ 4+ versus  $\varepsilon$ 4-).

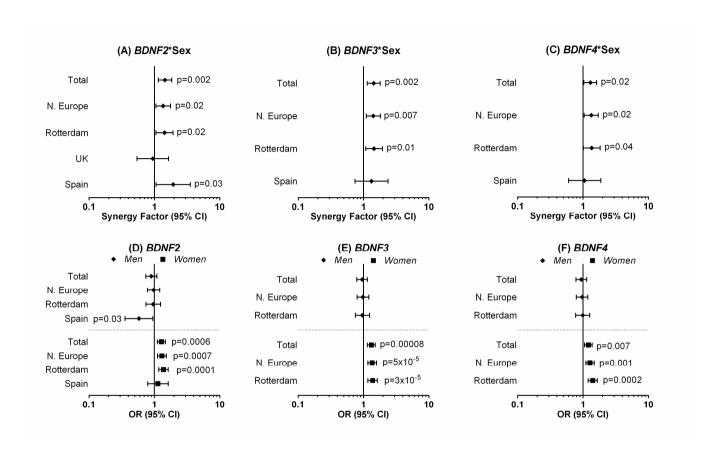
C	T CAID	Region Captured									
BDNF; Coverage = 89%  DBH; Coverage = 3%	Tag SNP	Kbp	Region	Coverage	Polymorphisms	r <sup>2</sup>					
	rs6265( <i>BDNF1</i> )	0.0	intron,ncRNA,missense	4%	rs6265	1.0					
	rs12288512 (BDNF2)	2.8	near-gene-5	7%	rs12288512, rs12273363	0.9-1.0					
	rs11030102 (BDNF3)	19.8	intron,near-gene-5	7%	rs11030102 , rs10835211	0.9-1.0					
	rs11030119 (BDNF4)	67.2	intron, untranslated-3	30%	rs11030119, rs962369, rs7127507, rs1013402, rs11030108, rs7124442, rs1519480, rs925946	0.9-10					
,	rs11030104 (BDNF5)	32.3	intron	15%	rs11030104, rs7103411, rs16917237, rs10501087	1.0					
= 89% DBH;	rs6265, rs12288512, rs11030104	69.8	intron, ncRNA,missense	4%	rs6265, rs11030104, rs12288512, rs1491850	0.9-1.0					
	rs12288512,rs11030119, rs11030104	5.8	intron	7%	rs11030119, rs11030104, rs12288512, rs7934165, rs10767665	0.9-1.0					
	rs11030102, rs11030119, rs11030104	79.5	intron, untranslated-5	15%	rs11030119, rs11030104, rs11030102, rs2203877, rs10835210, rs1519479, rs7931247	0.8-1.0					
,	rs1611115 ( <i>DBH1</i> )	0.0	near-gene-5	3%	rs1611115	1.0					
SORT1; Coverage	rs2228604 ( <i>SORTIa</i> )	94.8	intron,near-gene- 5,coding- synon,untranslated-3	61%	rs4603158, rs2228604, rs3879450, rs7518013, rs10745352, rs10858085, rs444387, rs3853501, rs3768497, rs11142, rs10745354, rs10858086, rs10858092, rs4970752, rs4970751, rs1880670, rs443345	0.9-1.0					
= 86%	rs17585355( <i>SORT1b</i> )	0.0	intron	4%	rs12037569	1.0					
	rs7536292( <i>SORT1c</i> )	29.0	intron	7%	rs7536292, rs12037569	0.8-1.0					
	rs17646665( <i>SORT1d</i> )	0.0	intron	4%	rs17585355	1.0					
	rs1149175 (SORT1e)	12.4	intron	7%	rs1149175, rs11581665	0.9-1.0					
	rs10745354, rs7536292 (SORT1f)	75.6	intron	4%	rs10745354, rs7536292, rs464218	0.9-1.0					

**Table 3. Polymorphisms included in the study.** The polymorphisms identified as representative of a linkage disequilibrium block (TagSNP) are listed for each gene. The size (kbp captured), location (region captured) and coverage of the linkage disequilibrium block captured by the TagSNP, known polymorphisms that lie within the LD block (SNPs captured) and the r<sup>2</sup> value are listed. The overall coverage of the total gene area is given in the Gene column.

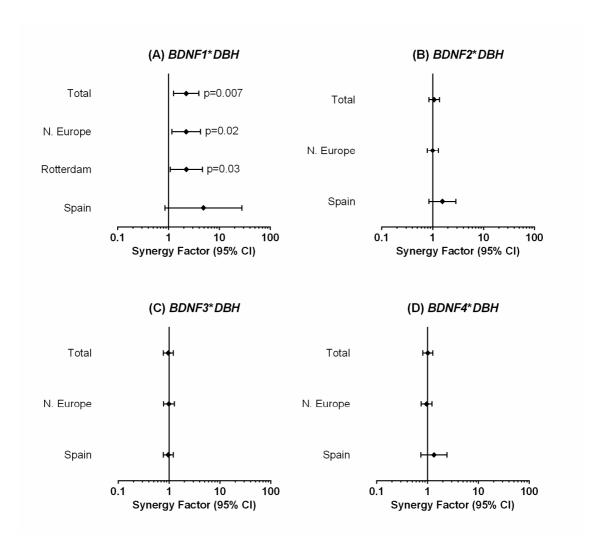
## **Figures**



**Figure 1.** *BDNF* main effects on AD risk. The odds ratios (OR) and 95% confidence intervals (CI) are plotted for the main effects of the *BDNF* polymorphisms on AD risk in **A-D**. The x-axis is plotted on log-10 scale. *P*-values <0.05 are labelled next to the corresponding OR.



**Figure 2.** *BDNF* interactions with sex. The synergy factors (SF) and 95% confidence intervals (CI) for the interactions between *BDNF* polymorphisms and sex are plotted (**A-C**). The odds ratios (OR) and 95% CI for the main effects of *BDNF2*, *BDNF3* and *BDNF4* on AD risk in men and women are plotted (**D-F**). The x-axis is plotted on a log-10 scale. *P*-values <0.05 are labelled next to the corresponding SF/OR.



**Figure 3.** *BDNF* interactions with *DBH*. The synergy factors (SF) and 95% confidence intervals (CI) for the interactions between *BDNF1* (**A**), *BDNF2* (**B**), *BDNF3* (**C**) and *BDNF4* (**D**) with *DBH1* are plotted. The x-axis is plotted on a log-10 scale. *P*-values <0.05 are labelled next to the corresponding SF.

**Supplementary Table.** The genotype counts and allele frequencies for each polymorphism included in the study. (**A**) Genotype (Gtype) and (**B**) allele frequencies are shown for each polymorphism in controls (CTRL) and AD groups for the total dataset (All), Northern Europe (N.Eur) and Spain datasets as well as individual centres.

<b>(A)</b>												
Polymorphism	Diagnosis	Gtype	All	Bristol	Nottingham	OPTIMA	Rotterdam	N.Eur	Madrid	Oviedo	Santander	Spain
BDNF1		MM	201	2	6	10	164	182	13	3	3	19
rs6265		MV	1777	26	55	63	1499	1643	90	14	30	134
	CTRL	VV	3697	57	87	134	3132	3410	172	42	73	287
		N	5675	85	148	207	4795	5235	275	59	106	440
		Gtype rate	1.00	0.97	1.00	1.00	1.00	1.00	0.99	1.00	1.00	0.99
		MM	99	10	11	6	42	69	14	6	10	30
		MV	<b>764</b>	71	85	100	335	591	61	36	76	173
	AD	VV	1576	129	150	161	751	1191	154	94	137	385
		N	2439	210	246	267	1128	1851	229	136	223	588
		Gtype rate	0.99	1.00	0.97	1.00	1.00	1.00	0.99	0.99	0.99	0.99
BDNF2		AA	257	5	5	11	212	233	16	3	5	24
rs12288512		AG	1756	21	54	58	1495	1628	71	18	39	128
	CTRL	GG	3654	54	89	138	3088	3369	187	37	61	285
		N	5667	80	148	207	4795	5230	274	58	105	437
		Gtype rate	1.00	0.91	1.00	1.00	1.00	1.00	0.99	0.98	0.99	0.99
		AA	106	6	9	16	54	85	13	1	7	21
		AG	<b>798</b>	58	88	73	401	620	69	50	59	178
	AD	GG	1535	145	149	176	673	1143	149	83	160	392
		N	2439	209	246	265	1128	1848	231	134	226	591
		Gtype rate	0.99	1.00	0.97	0.99	1.00	0.99	1.00	0.97	1.00	0.99
BDNF3	CTRL	CC	3171	47	75	123	2662	2907	169	36	59	264
rs11030102		GC	2084	24	64	68	1793	1949	78	19	38	135
		GG	399	7	6	16	340	369	17	4	9	30

		N	5654	78	145	207	4795	5225	264	59	106	429
		Gtype rate	1.00	0.89	0.98	1.00	1.00	1.00	0.95	1.00	1.00	0.97
		CC	1314	115	136	145	558	954	136	79	145	360
		GC	932	80	86	100	470	736	70	56	70	196
	AD	GG	177	8	22	20	100	150	18	1	8	27
		N	2423	203	244	265	1128	1840	224	136	223	583
		Gtype rate	0.99	0.97	0.96	0.99	1.00	0.99	0.97	0.99	0.99	0.98
BDNF4		AA	489	8	13	19	411	451	20	7	11	38
rs11030119		AG	2282	35	60	80	1935	2110	104	21	47	172
	CTRL	GG	2884	39	70	105	2449	2663	145	28	48	221
		N	5655	82	143	204	4795	5224	269	56	106	431
		Gtype rate	1.00	0.93	0.97	0.98	1.00	1.00	0.97	0.95	1.00	0.97
		AA	219	13	22	24	117	176	23	8	12	43
		AG	1011	83	103	104	497	787	80	61	83	224
	AD	GG	1194	108	119	138	514	879	123	64	128	315
		N	2424	204	244	266	1128	1842	226	133	223	582
		Gtype rate	0.99	0.97	0.96	1.00	1.00	0.99	0.97	0.96	0.99	0.98
BDNF5		AA	3555	53	83	130	3022	3288	156	40	71	267
rs11030104		GA	1879	25	58	67	1588	1738	95	16	30	141
	CTRL	GG	224	3	6	11	185	205	12	3	4	19
		N	5658	81	147	208	4795	5231	263	59	105	427
		Gtype rate	1.00	0.92	0.99	1.00	1.00	1.00	0.95	1.00	0.99	0.96
		AA	1502	124	150	153	714	1141	137	90	134	361
		GA	812	71	88	102	362	623	69	40	80	189
	AD	GG	119	12	14	9	52	87	15	7	10	32
		N	2433	207	252	264	1128	1851	221	137	224	582
		Gtype rate	0.99	0.99	1.00	0.99	1.00	1.00	0.95	0.99	0.99	0.98
DBH		CC	3585	55	97	119	3010	3281	194	40	70	304
rs1611115		TC	1828	28	45	79	1560	1712	70	17	29	116
	CTRL	TT	257	3	4	6	225	238	10	2	7	19
		N	5670	86	146	204	4795	5231	274	59	106	439
		Gtype rate	1.00	0.98	0.99	0.98	1.00	1.00	0.99	1.00	1.00	0.99

		CC	1492	127	156	160	679	1122	149	78	143	370
		TC	835	67	85	101	391	644	71	52	68	191
	AD	TT	115	11	11	6	58	86	12	4	13	29
		N	2442	205	252	267	1128	1852	232	134	224	590
		Gtype rate	1.00	0.98	1.00	1.00	1.00	1.00	1.00	0.97	0.99	0.99
SORT1		CC	472	6	15	21	399	441	17	6	8	31
rs10745354		CT	2348	36	50	91	1988	2165	108	25	50	183
	CTRL	TT	2846	40	83	93	2408	2624	148	26	48	222
		N	5666	82	148	205	4795	5230	273	57	106	436
		Gtype rate	1.00	0.93	1.00	0.99	1.00	1.00	0.98	0.97	1.00	0.98
		CC	183	14	17	25	91	147	14	5	17	36
		CT	972	87	98	102	463	<b>750</b>	80	53	89	222
	AD	TT	1279	108	128	139	574	949	133	79	118	330
		N	2434	209	243	266	1128	1846	227	137	224	588
		Gtype rate	0.99	1.00	0.96	1.00	1.00	0.99	0.98	0.99	0.99	0.99
SORT1	-	AA	110	2	6	6	89	103	4	0	3	7
rs1149175		AG	1402	20	20	56	1190	1286	69	19	28	116
	CTRL	GG	4160	65	120	142	3516	3843	202	40	75	317
		N	5672	87	146	204	4795	5232	275	59	106	440
		Gtype rate	1.00	0.99	0.99	0.98	1.00	1.00	0.99	1.00	1.00	0.99
		AA	55	2	4	7	31	44	3	1	7	11
		AG	562	61	59	63	252	435	47	24	56	127
	AD	GG	1825	147	182	194	845	1368	182	112	163	457
		N	2442	210	245	264	1128	1847	232	137	226	595
		Gtype rate	1.00	1.00	0.97	0.99	1.00	0.99	1.00	0.99	1.00	1.00
SORT1		AA	5047	76	127	182	4259	4644	252	54	97	403
rs17585355		CA	611	10	18	25	526	579	20	4	8	32
	CTRL	CC	15	0	2	1	10	13	1	1	0	2
		N	5673	86	147	208	4795	5236	273	59	105	437
		Gtype rate	1.00	0.98	0.99	1.00	1.00	1.00	0.98	1.00	0.99	0.99
	AD	AA	2200	191	213	233	1010	1647	216	129	208	553
		CA	228	18	27	32	113	190	13	9	16	38

		CC	9	0	1	1	5	7	1	0	1	2
		N	2437	209	241	266	1128	1844	230	138	225	593
		Gtype rate	0.99	1.00	0.95	1.00	1.00	0.99	0.99	1.00	1.00	0.99
SORT1		AA	4880	77	131	178	4103	4489	243	51	97	391
rs17646665a		GA	759	11	15	29	654	709	33	8	9	50
	CTRL	GG	38	0	0	0	38	38	0	0	0	0
		N	5677	88	146	207	4795	5236	276	59	106	441
		Gtype rate	1.00	1.00	0.99	1.00	1.00	1.00	0.99	1.00	1.00	1.00
		AA	2162	186	214	243	982	1625	210	127	200	537
		GA	268	23	34	21	136	214	20	9	25	54
	AD	GG	14	1	1	1	10	13	1	0	0	1
		N	2444	210	249	265	1128	1852	231	136	225	592
		Gtype rate	1.00	1.00	0.98	0.99	1.00	1.00	1.00	0.99	1.00	0.99
SORT1		AA	473	6	15	21	399	441	18	6	8	32
rs2228604a		AC	2344	35	49	91	1987	2162	107	25	50	182
	CTRL	CC	2849	40	81	96	2409	2626	148	27	48	223
		N	5666	81	145	208	4795	5229	273	58	106	437
		Gtype rate	1.00	0.92	0.98	1.00	1.00	1.00	0.98	0.98	1.00	0.99
		AA	182	14	15	25	91	145	15	5	17	37
		AC	976	88	97	102	462	749	82	54	91	227
	AD	CC	1275	107	126	140	575	948	132	78	117	327
		N	2433	209	238	267	1128	1842	229	137	225	591
		Gtype rate	0.99	1.00	0.94	1.00	1.00	0.99	0.99	0.99	1.00	0.99
SORT1		CC	162	4	5	5	130	144	11	2	5	18
rs7536292a		CT	1606	19	46	56	1353	1474	79	20	33	132
	CTRL	TT	3886	61	96	147	3312	3616	165	37	68	270
		N	5654	84	147	208	4795	5234	255	59	106	420
		Gtype rate	1.00	0.95	0.99	1.00	1.00	1.00	0.92	1.00	1.00	0.95
	AD	CC	81	9	5	12	26	52	13	6	10	29
		CT	701	64	70	66	319	519	71	42	69	182
			4 . 4 .	126	1.00	186	702	1274	142	02	1.47	272
		TT	1646	136	169	180	783	12/4	142	83	147	372

Gtype rate **0.99** 1.00 0.96 0.99 1.00 **0.99** 0.97 0.95 1.00 **0.98** 

<b>(B)</b>												
Polymorphism	Diagnosis	Allele	All	Bristol	Nottingham	OPTIMA	Rotterdam	N.Eur	Madrid	Oviedo	Santander	Spain
BDNF1		M	0.19	0.18	0.23	0.20	0.19	0.19	0.21	0.17	0.17	0.20
rs6265	CTRL											
		V	0.81	0.82	0.77	0.80	0.81	0.81	0.79	0.83	0.83	0.80
	_	M	0.20	0.22	0.22	0.21	0.19	0.20	0.19	0.18	0.22	0.20
	AD											
		V	0.80	0.78	0.78	0.79	0.81	0.80	0.81	0.82	0.78	0.80
BDNF2		A	0.20	0.19	0.22	0.19	0.20	0.20	0.19	0.21	0.23	0.20
rs12288512	CTRL											
		G	0.80	0.81	0.78	0.81	0.80	0.80	0.81	0.79	0.77	0.80
		A	0.21	0.17	0.22	0.20	0.23	0.21	0.21	0.19	0.16	0.19
	AD											
		G	0.79	0.83	0.78	0.80	0.77	0.79	0.79	0.81	0.84	0.81
BDNF3		C	0.75	0.76	0.74	0.76	0.74	0.74	0.79	0.77	0.74	0.77
rs11030102	CTRL											
		G	0.25	0.24	0.26	0.24	0.26	0.26	0.21	0.23	0.26	0.23
		C	0.73	0.76	0.73	0.74	0.70	0.72	0.76	0.79	0.81	0.79
	AD											
		G	0.27	0.24	0.27	0.26	0.30	0.28	0.24	0.21	0.19	0.21
BDNF4		A	0.29	0.31	0.30	0.29	0.29	0.29	0.27	0.31	0.33	0.29
rs11030119	CTRL											
		G	0.71	0.69	0.70	0.71	0.71	0.71	0.73	0.69	0.67	0.71
		Α	0.30	0.27	0.30	0.29	0.32	0.31	0.28	0.29	0.24	0.27
	AD											
		G	0.70	0.73	0.70	0.71	0.68	0.69	0.72	0.71	0.76	0.73
BDNF5		A	0.79	0.81	0.76	0.79	0.80	0.79	0.77	0.81	0.82	0.79
rs11030104	CTRL											
		G	0.21	0.19	0.24	0.21	0.20	0.21	0.23	0.19	0.18	0.21

		A	0.78	0.77	0.77	0.77	0.79	0.78	0.78	0.80	0.78	0.78
	AD											
		G	0.22	0.23	0.23	0.23	0.21	0.22	0.22	0.20	0.22	0.22
DBH		С	0.79	0.80	0.82	0.78	0.79	0.79	0.84	0.82	0.80	0.82
rs1611115	CTRL											
		T	0.21	0.20	0.18	0.22	0.21	0.21	0.16	0.18	0.20	0.18
		C	0.78	0.78	0.79	0.79	0.78	0.78	0.80	0.78	0.79	0.79
	AD											
		T	0.22	0.22	0.21	0.21	0.22	0.22	0.20	0.22	0.21	0.21
SORT1		С	0.29	0.29	0.27	0.32	0.29	0.29	0.26	0.32	0.31	0.28
rs10745354	CTRL											
		T	0.71	0.71	0.73	0.68	0.71	0.71	0.74	0.68	0.69	0.72
		C	0.27	0.28	0.27	0.29	0.29	0.28	0.24	0.23	0.27	0.25
	AD											
		T	0.73	0.72	0.73	0.71	0.71	0.72	0.76	0.77	0.73	0.75
SORT1	CITID I	A	0.14	0.14	0.11	0.17	0.14	0.14	0.14	0.16	0.16	0.15
rs1149175	CTRL	~		0.04	0.00	0.02	0.04	0.04	0.01	0.04	0.04	
		G	0.86	0.86	0.89	0.83	0.86	0.86	0.86	0.84	0.84	0.85
	AD	A	0.14	0.15	0.14	0.15	0.14	0.14	0.11	0.09	0.15	0.13
	AD	C	0.06	0.05	0.06	0.05	0.06	0.06	0.00	0.01	0.05	0.05
SORT1		G A	0.86	0.85	0.86	0.85	0.86	0.86	0.89	0.91	0.85	0.87
rs17585355	CTRL	Α	0.94	0.94	0.93	0.94	0.94	0.94	0.96	0.95	0.96	0.96
181/383333	CIKL	С	0.06	0.06	0.07	0.06	0.06	0.06	0.04	0.05	0.04	0.04
		A	0.06	0.96	0.07	0.00	0.95	0.00	0.04	0.03	0.04	0.96
	AD	A	0.33	0.90	0.54	0.74	0.93	0.74	0.97	0.97	0.90	0.50
	AD	С	0.05	0.04	0.06	0.06	0.05	0.06	0.03	0.03	0.04	0.04
SORT1		A	0.03	0.94	0.95	0.93	0.03	0.93	0.03	0.03	0.96	0.94
rs17646665a	CTRL	А	0.73	0.74	0.73	0.75	0.72	0.75	0.74	0.73	0.70	V.J.
15170100034	CINE	G	0.07	0.06	0.05	0.07	0.08	0.07	0.06	0.07	0.04	0.06
	AD	A	0.94	0.94	0.93	0.96	0.93	0.94	0.95	0.97	0.94	0.95
		**	J•/	J., .	0.75	0.70	0.75		0.70	0.77	0.71	

		G	0.06	0.06	0.07	0.04	0.07	0.06	0.05	0.03	0.06	0.05
SORT1		A	0.29	0.29	0.27	0.32	0.29	0.29	0.26	0.32	0.31	0.28
rs2228604a	CTRL											
		C	0.71	0.71	0.73	0.68	0.71	0.71	0.74	0.68	0.69	0.72
		A	0.28	0.28	0.27	0.28	0.29	0.28	0.24	0.23	0.28	0.25
	AD											
		C	0.72	0.72	0.73	0.72	0.71	0.72	0.76	0.77	0.72	0.75
SORT1	_	С	0.17	0.16	0.19	0.16	0.17	0.17	0.20	0.20	0.20	0.20
rs7536292a	CTRL											
		T	0.83	0.84	0.81	0.84	0.83	0.83	0.80	0.80	0.80	0.80
	_	С	0.18	0.20	0.16	0.17	0.16	0.17	0.21	0.21	0.20	0.21
	AD											
		T	0.82	0.80	0.84	0.83	0.84	0.83	0.79	0.79	0.80	0.79