

# Structural models of genome-wide covariance explain variation in autism spectrum disorder symptoms

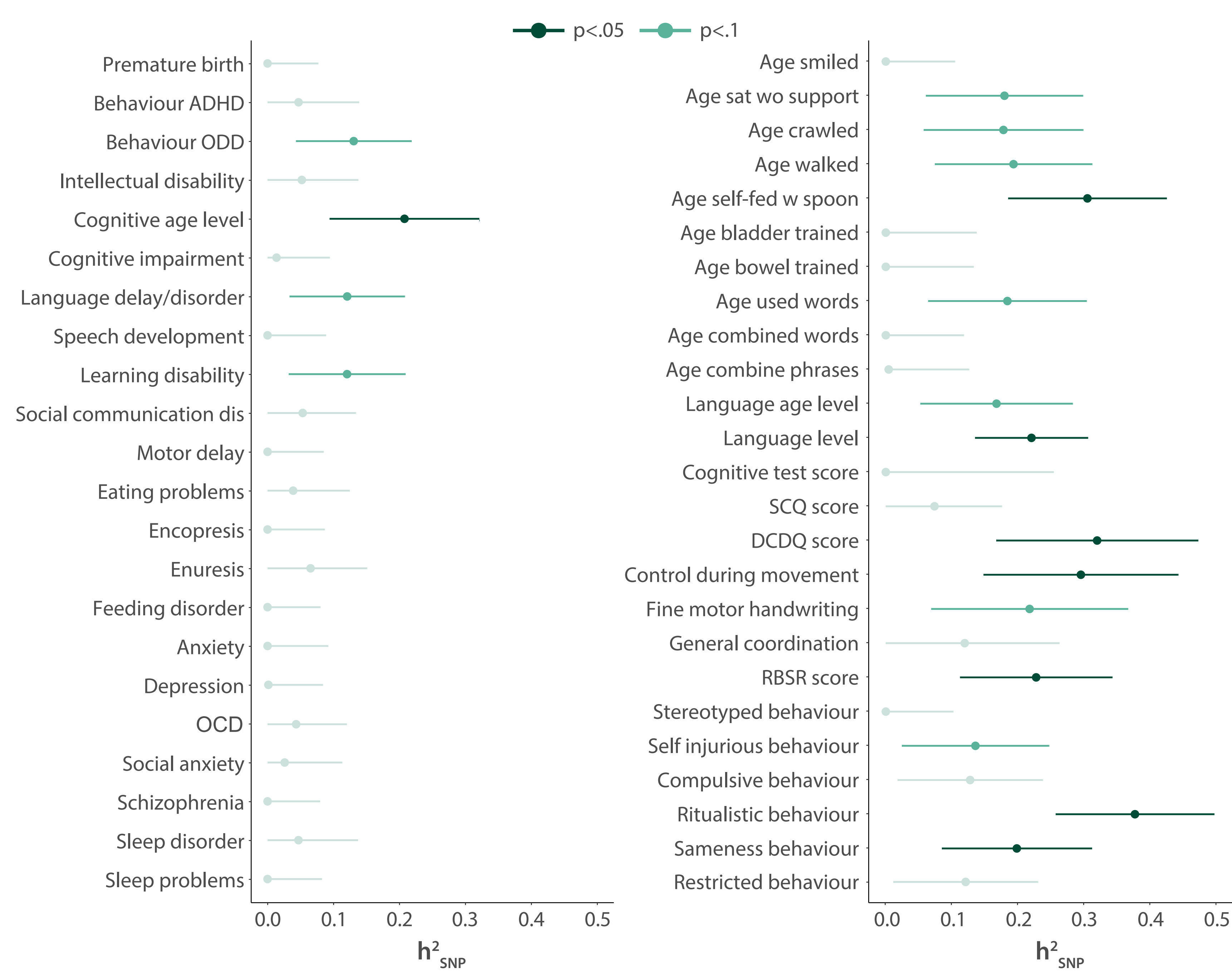
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## Why study heterogeneity in ASD symptoms with common genetic variation?

- 50% of ASD genetic variance due to **common variants**<sup>1</sup>
- Clinical ASD subcategories are **genetically heterogeneous**<sup>2</sup>
- Little characterization of genetic variance structures in ASD

## 1 Which ASD symptoms show genetic heterogeneity?

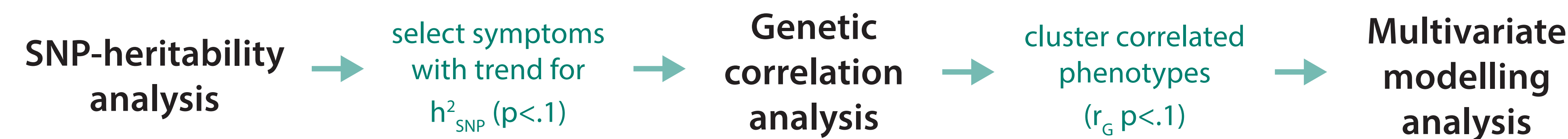
- Strongest symptom heterogeneity in ASD: **ritualistic behaviour** ( $h^2_{SNP}=0.38$  (SE=0.12),  $p=0.00093$ ).
- Symptom heterogeneity was observed across the repetitive RBSR symptom spectrum and for multiple cognitive and developmental symptoms.



GCTA<sup>4</sup> SNP-heritability ( $h^2_{SNP}$ ) captures polygenic heterogeneity in ASD.

21 categorical (prevalence > 5%) and 26 continuous phenotypes were examined (experiment-wide  $p < .0015$ ). For categorical symptoms, deviance residuals were used and rank-transformed residuals for continuous symptoms.

## Study design



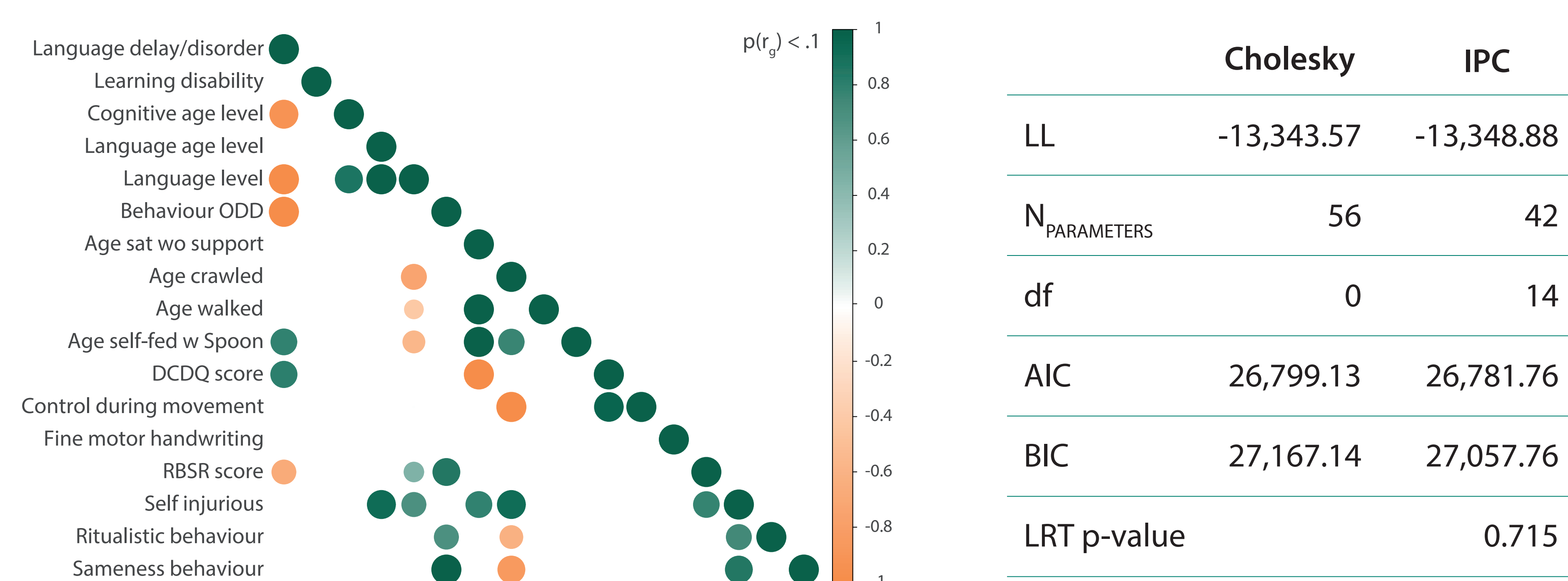
## Sample

**5,331 unrelated ASD probands** (IBD < .05, Illumina  $N_{SNPs}=458,573$ ) of European descent from the **SPARK**<sup>3</sup> cohort were included in the analysis. Individuals with non-genetic cognitive impairments were excluded.

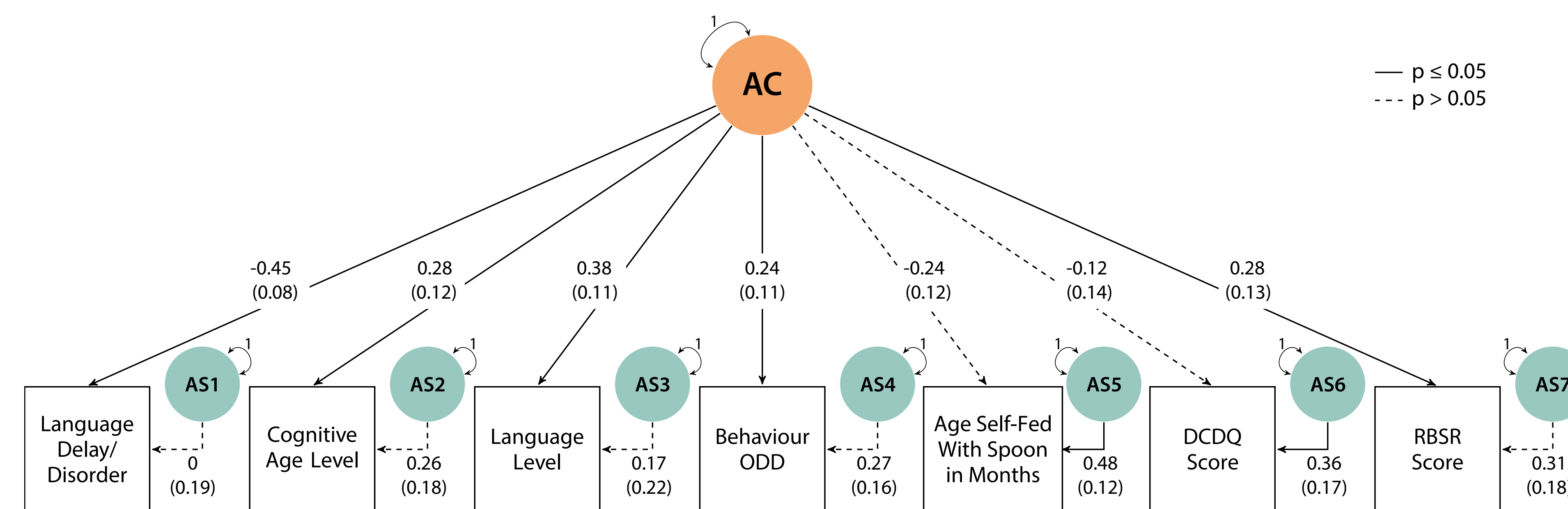
**47 co-occurring developmental, cognitive and motor symptoms** were selected from available SPARK symptoms ( $n=123$ ). Among those, 17 phenotypes with a trend for  $h^2_{SNP}$  were subjected to GCTA- $r_g$  and GRM-SEM analysis.

## 2 Are there distinct overarching genetic factors in ASD?

- A shared genetic factor in ASD links language delay/disorder symptoms inversely to higher cognitive age and language level as well as more oppositional behaviour and repetitive symptoms.



	Cholesky	IPC
LL	-13,343.57	-13,348.88
$N_{PARAMETERS}$	56	42
df	0	14
AIC	26,799.13	26,781.76
BIC	27,167.14	27,057.76
LRT p-value		0.715



GCTA<sup>4</sup> genetic correlations ( $r_g$ ) capture symptom correlations in ASD.

Multivariate genetic analyses of heritable and genetically interrelated symptoms (by trend,  $p < .1$ ) were conducted with genetic-relationship-matrix structural equation modelling (grmsem<sup>5</sup>), using hybrid IPC (Independent Pathway: genetic part; Cholesky: residual part) models to identify shared genetic influences across symptoms.

(1) Gaugler et al. (2014) Nat Genet 46:881–885; (2) Lai et al. (2014) The Lancet 383:896–910; (3) <https://sparkforautism.org/>; (4) Yang et al. (2011) Am J Hum Genet 88:76–82; (5) St Pourcain et al. (2018), Biol Psychiatry 83 (7): 598–606

