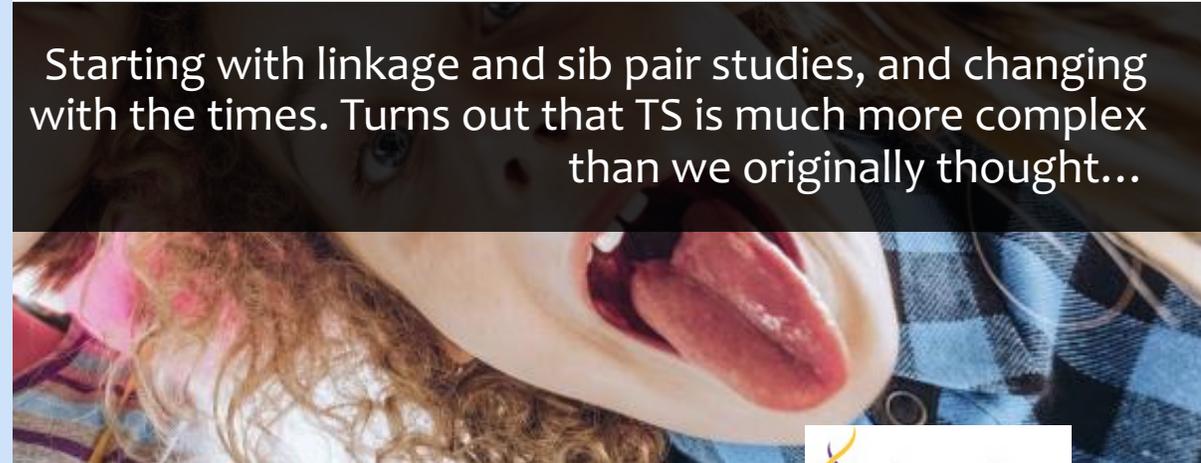


# Genetics of Tourette Syndrome



Starting with linkage and sib pair studies, and changing with the times. Turns out that TS is much more complex than we originally thought...





## TS is highly heritable

- 1<sup>st</sup> degree relatives of TS patients have increased risk:
  - TS: 10-20%
  - Chronic Tics (CT): additional 10-20%
  - OCD: 10-20%
- Small twin studies suggest high heritability ( $h^2 \sim 0.6-0.8$ )
- Recent population-based estimates:
  - TS/CT Sib recurrence risk: 18.6 (15.3-22.6)
  - TS/CT Child recurrence risk: 61.0 (44.4-83.8)
  - TS/CT Heritability: 0.77 (0.70-0.85)
- TS is heritable, but also complex—



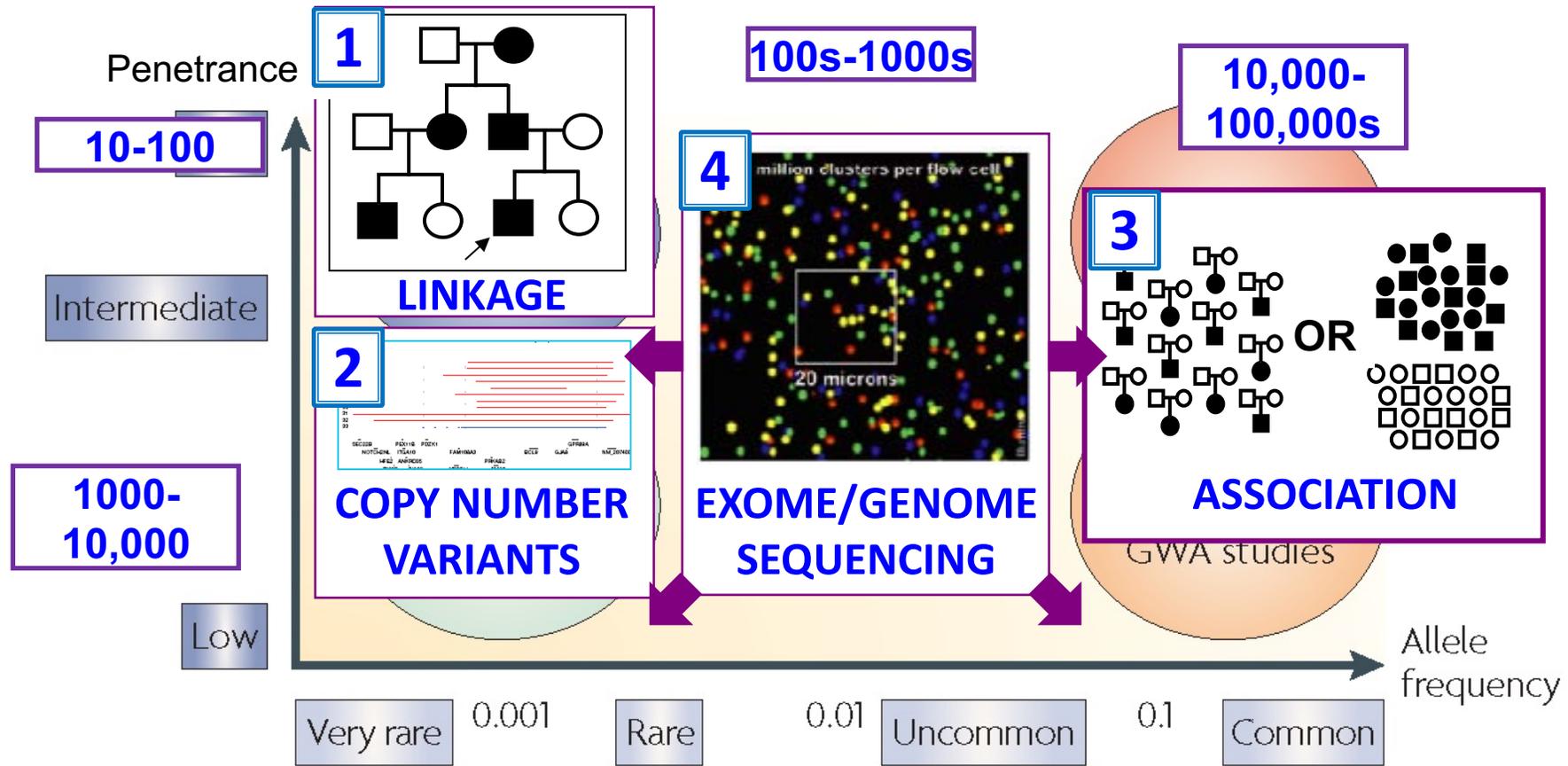
# Familial relative risk (RR) for various neuropsychiatric disorders

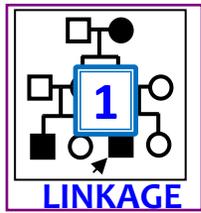
Disease		Population prevalence per 100,000		Morbid risk in first-degree relatives (%)		Relative risk
Narcolepsy		10–100		30–50	“Deterministic” →	5,000
Huntington’s disease		19	<b>Mendelian (monogenic)</b>	50		2,630
Wilson’s disease		10		25		2,500
Parkinson’s disease	SNCA Parkin Etc	133		8.3	62.4	
Autism		50–100		2–4		45–90
Bipolar disorder		500–1,500	<b>Complex Inheritance genetic + non-genetic (“environmental”)</b>	8	“Probabilistic” →	16
Schizophrenia		900		12.8		14.2
Panic disorder		2,700		31		10
Obsessive-compulsive disorder		1,000–2,000		10		4.5
Alzheimer’s disease	APP PS1 PS2	7,700		14.4		1.9
Prion diseases		<0.1	?	?		
Tourette Syndrome		600		10-20%		19-61

*Textbook of Neuropsychiatry and Behavioral Neurosciences, 5th Edition. Eds, Yudofsky SC, Hales RE. © 2008*

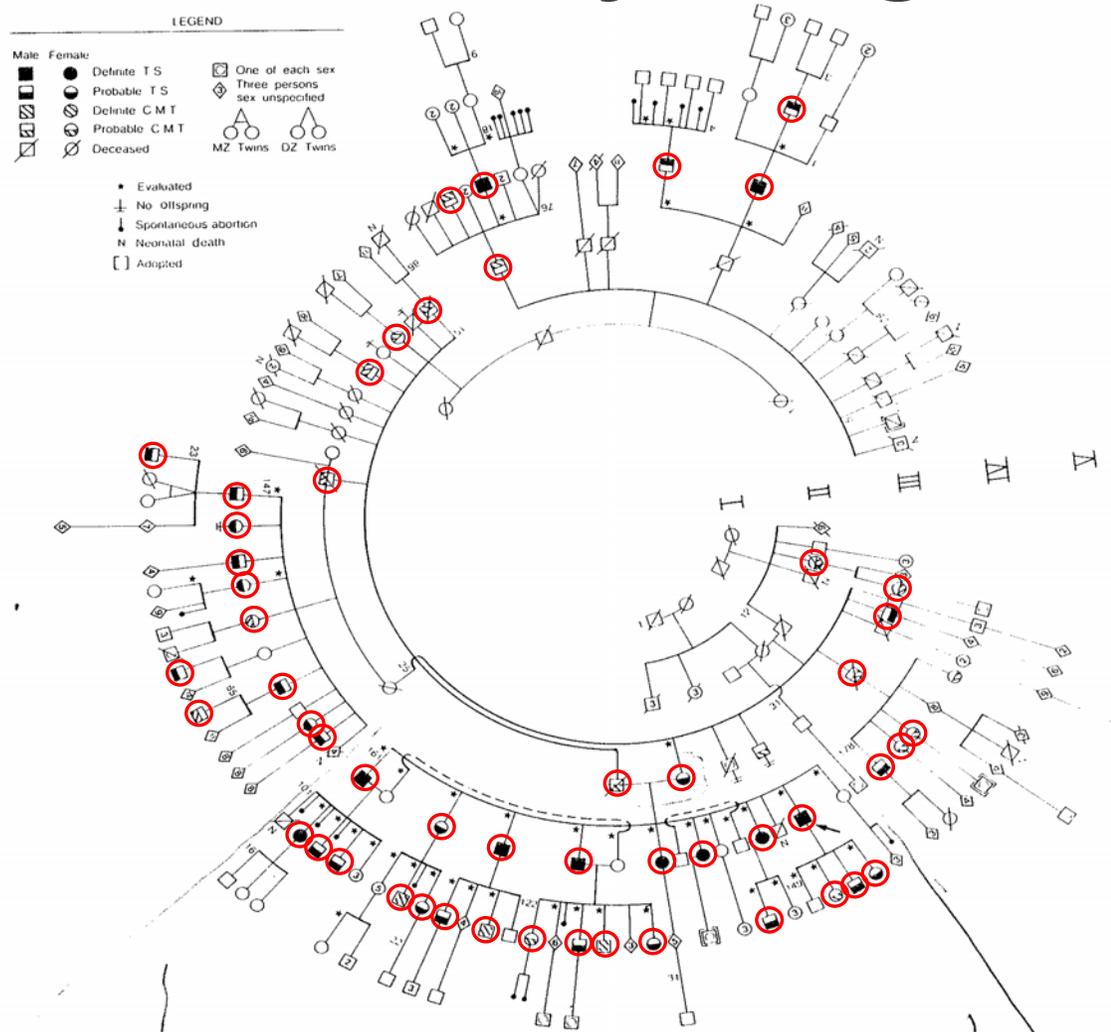


# For complex disorders, multiple approaches are needed





# Large, multigenerational families were traditionally how genes are identified



- 503 members + spouses
- 94 affected with TS/CT in 4 generations
- May be enriched for highly penetrant TS variants
- Exome and chr 2 targeted sequencing non-informative



Giovanni Coppola

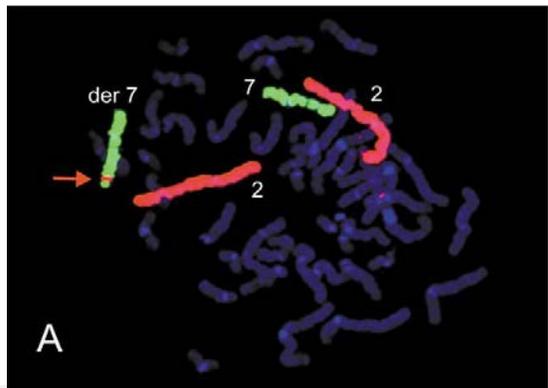
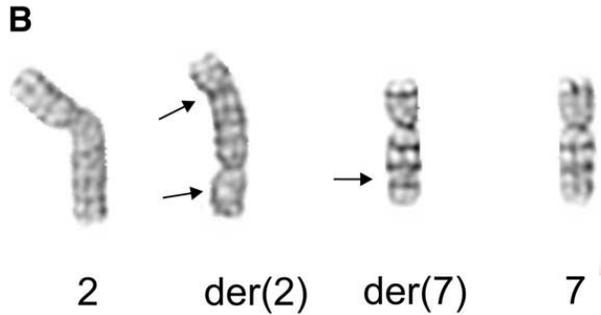
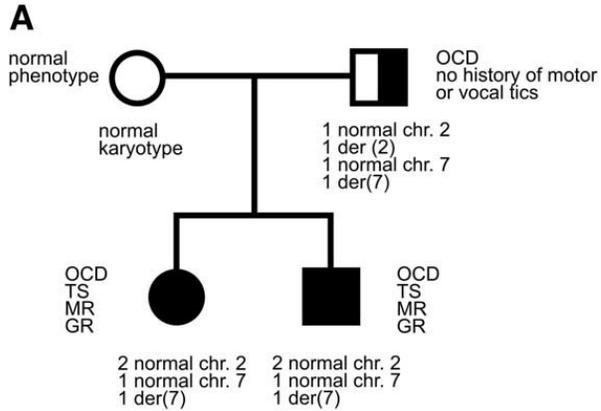


Jae-Hoon Sul



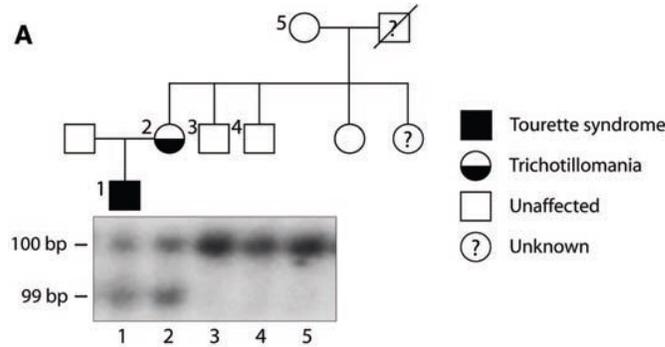
Dongmei Yu

# Family studies and chromosomal rearrangements

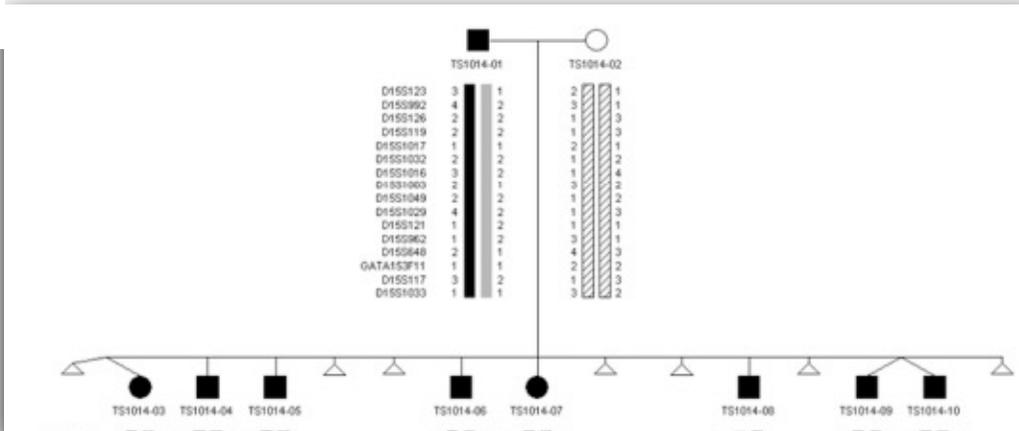


Abelson Science I 2005

SLITRK-1



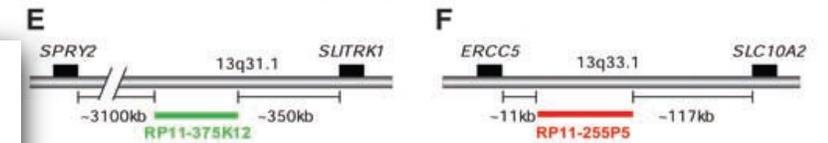
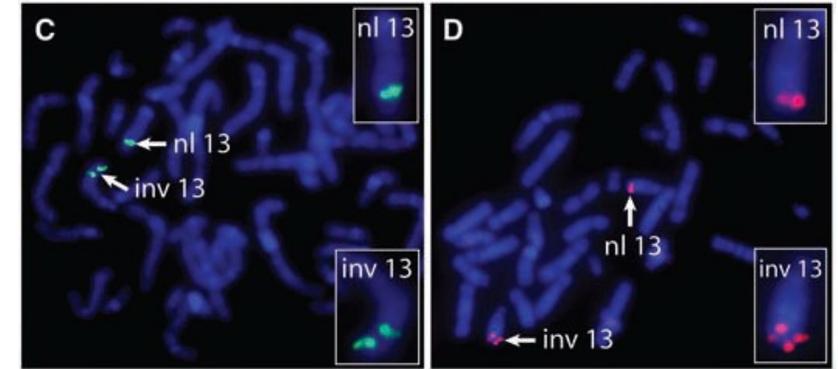
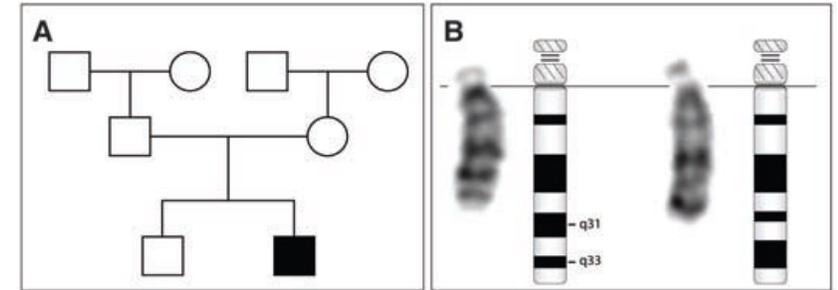
CNTNAP2



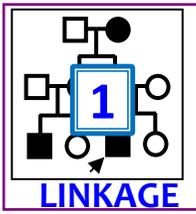
Verkerk Genomics 2003

Ercan-Sencicek et al.,  
NEJM 2010

Castellan Baldan et al.,  
Neuron 2014



HDC

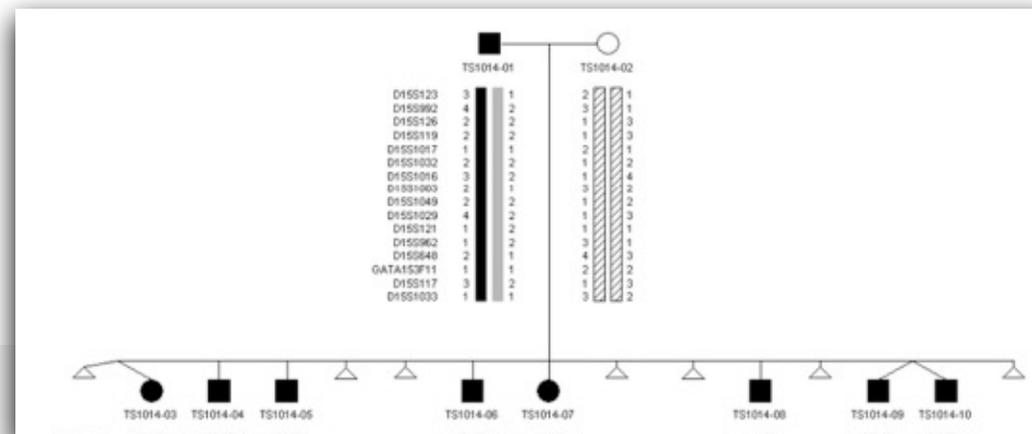


# L-Histidine Decarboxylase (HDC) & TS

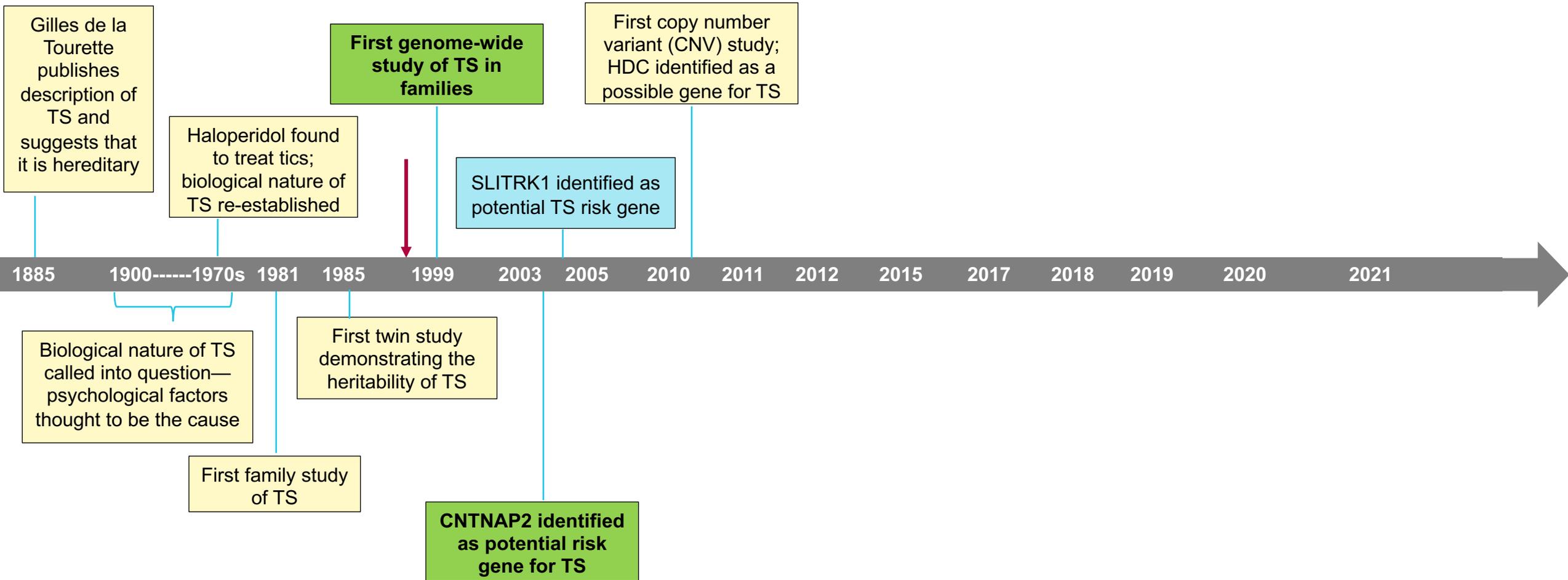
- Single family, 8 affected offspring; 8 previous miscarriages
- Parametric linkage to an 8Mb chr 15 region (LOD 2.05)
- Sequenced 51 genes under peak
- Nonsense mutation (W318X) in HDC in all affecteds
  - W318X not found in 1500 matched controls
  - No additional nonsense mutations in 720 TS cases & 360 controls
- In-vitro enzymatic assay demonstrated mutant protein could not convert histidine to histamine
- Known interaction in basal ganglia between H3R and D2R

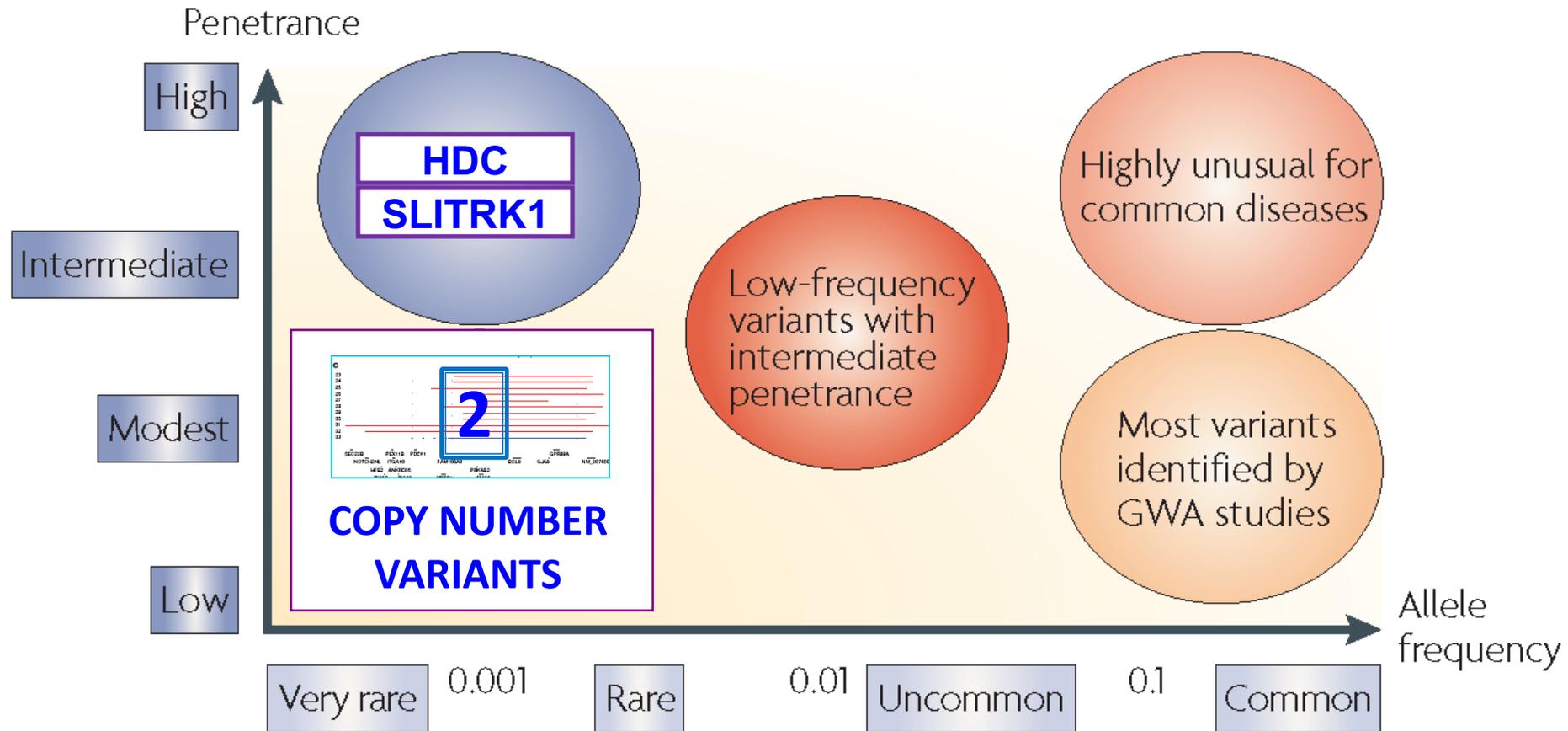
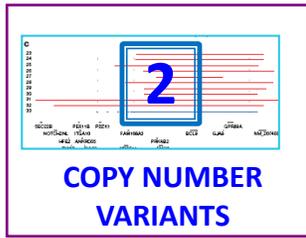
Ercan-Sencicek et al.,  
NEJM 2010

Castellan Baldan et al.,  
Neuron 2014



# Progress in understanding the causes of TS



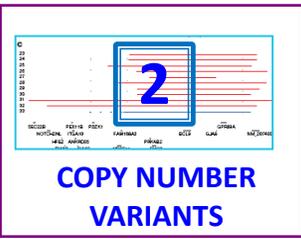


# Large, rare, recurrent CNVs are found across neurodevelopmental disorders

TABLE 1 Representative Recurrent Copy Number Variants (CNV)

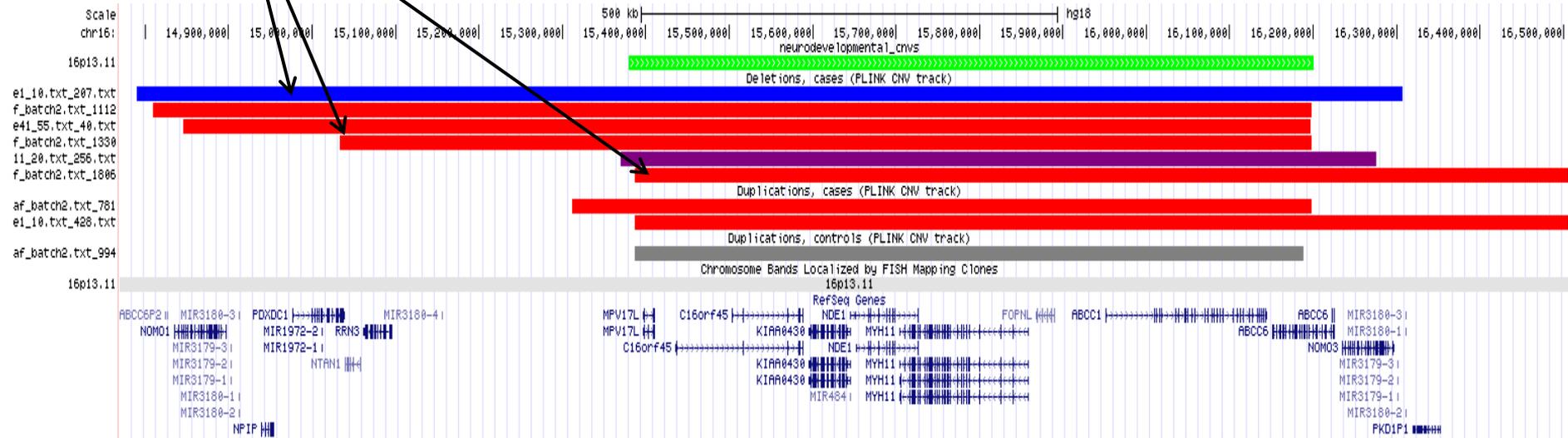
CNV Locus	Size (kb)	Del/Dup	Classic Genomic Disorder?	ID	Autism Symptoms	Schizophrenia	Epilepsy
1q21.1	1,350	del		Mild to moderate	Yes	Yes	Yes
	1,350	dup		Mild to moderate	Yes	ND	ND
3q29	1,500	del		Mild to moderate	ND	Yes	ND
	453-1,760	dup		Mild to moderate	Yes	ND	ND
7q11.23	2,284	del	Williams-Beuren syndrome	Mild to severe	No	ND	ND
	2,284	dup		Mild to severe	Yes	ND	Yes
15q11-q13	4,770-8,147	del-maternal	Prader-Willi syndrome	Mild to severe	No	ND	Yes
		del-paternal	Angelman syndrome	Mild to severe	Yes	ND	Yes
		dup		Mild to severe	Yes	ND	Yes
15q13.3	1,930	del		Mild to severe	Yes	Yes	Yes
	1,930	dup		Mild to moderate	Yes	Yes	No
16p11.2	700	del		Mild to moderate	Yes	ND	Yes
	700	dup		Mild to moderate	Yes	Yes	ND
17p11.2	3,775	del	Smith-Magenis syndrome	Moderate to severe	No	No	Yes
	3,775	dup	Potocki-Lupski syndrome	Mild to moderate	Yes	ND	ND
22q11.2	1,500-3,000	del	Velocardiofacial syndrome	Mild to severe	Yes	Yes	Yes
	1,500-3,000	dup		None to mild	Yes	ND	ND

Currently in clinical practice for Intellectual Disability & Autism  
(chromosomal micro-array)



# Recurrent Genomic Deletions in TS & OCD

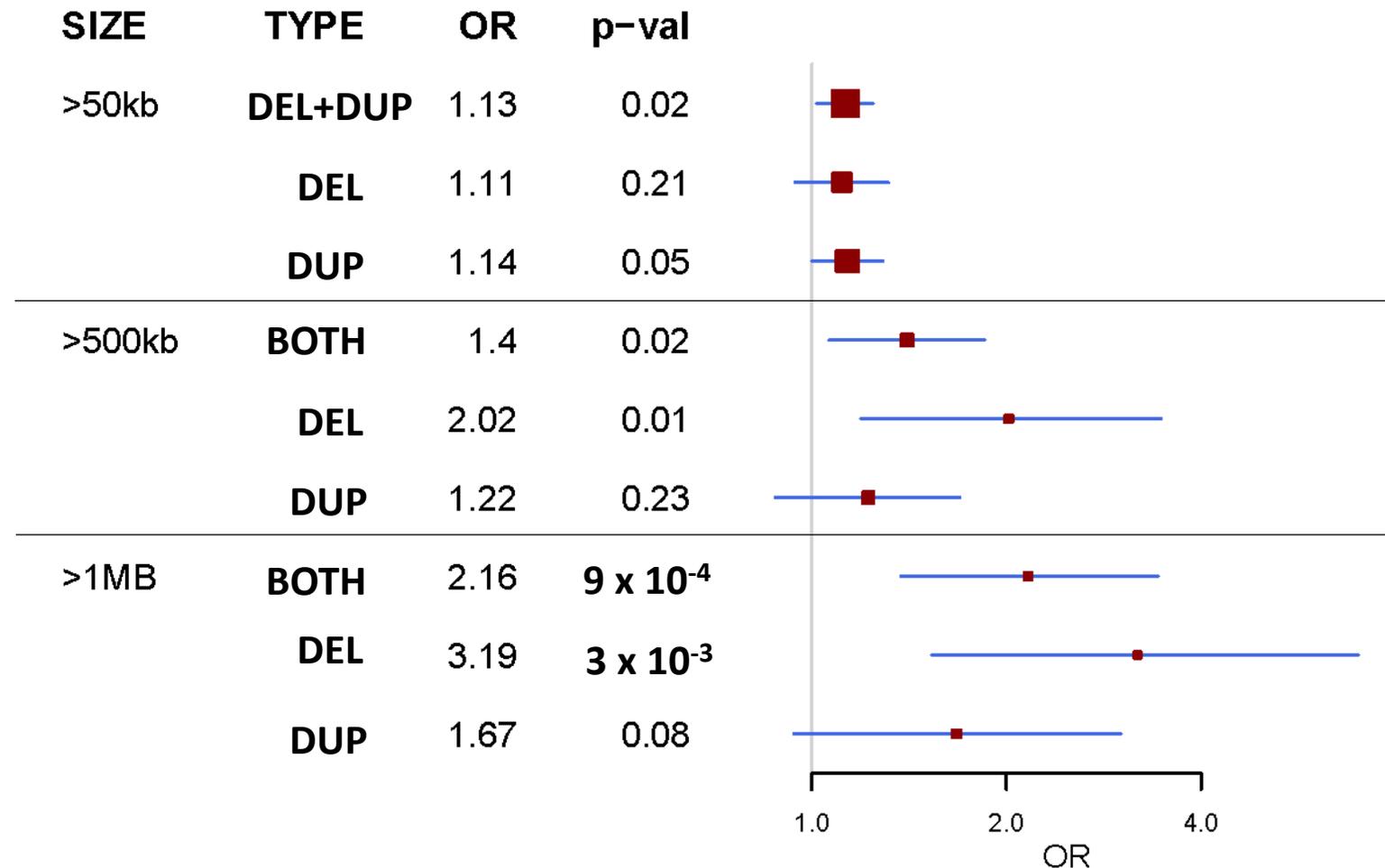
Also de novo  
(n=3)



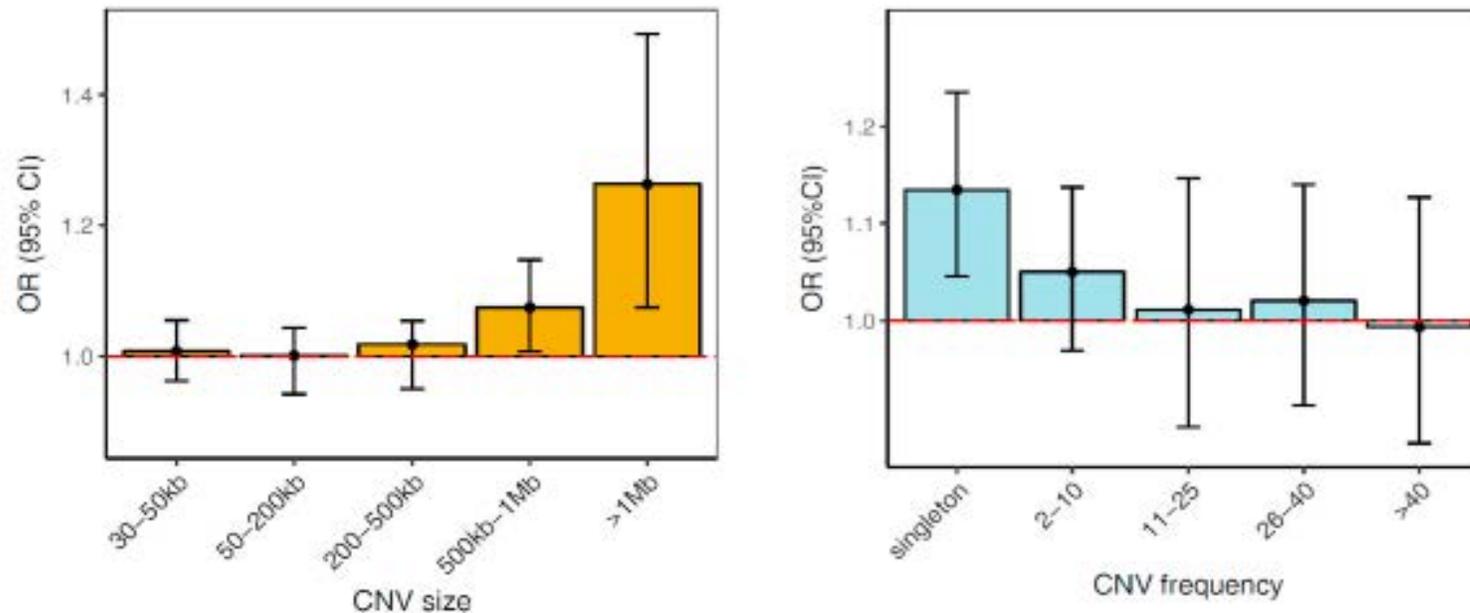
## 16p13.11

**2724 total cases  
(1086 TS, 1286 OCD)  
1789 controls**

# Increased burden of large, rare genic CNVs in 2435 TS cases vs 4100 controls



# Additional TS case enrichment for large (> 1Mb), ultra-rare (singleton) CNVs



**~1% of TS cases carry a large (> 1 Mb) rare CNV**

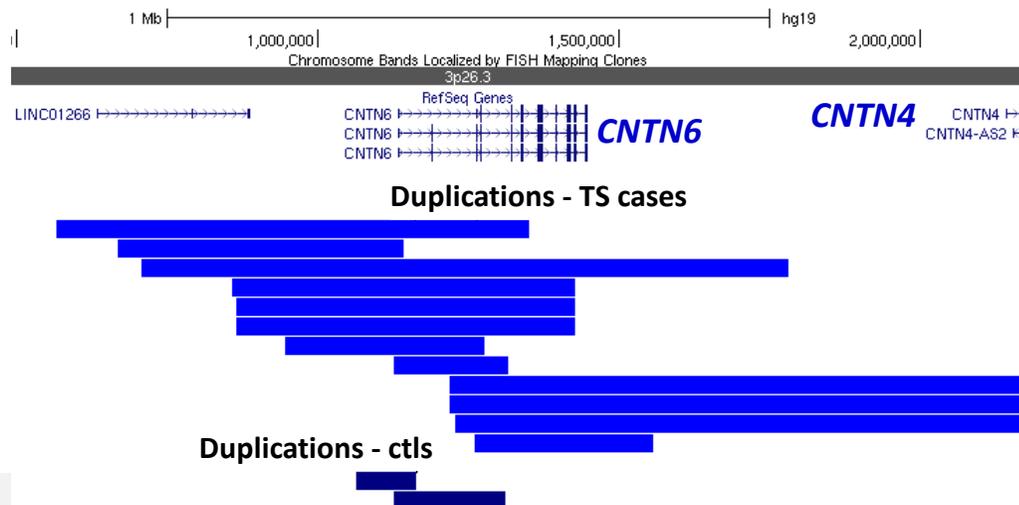
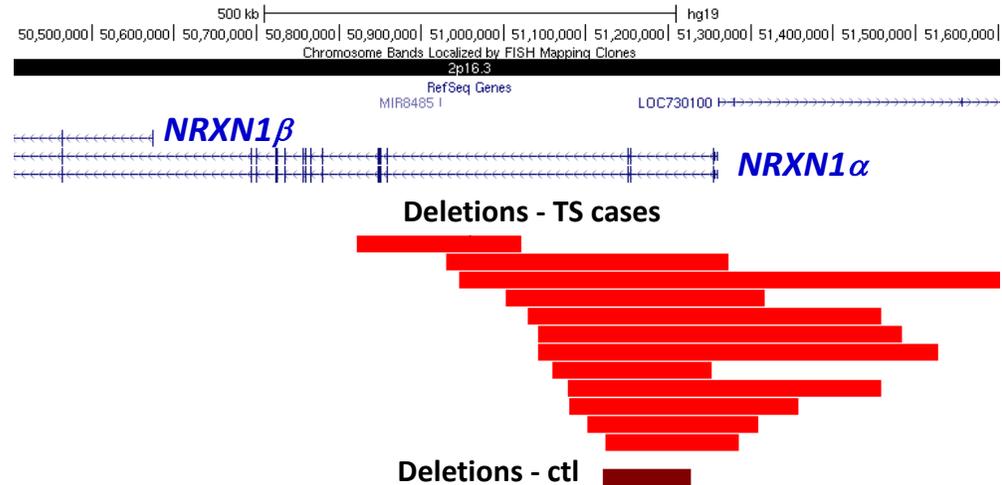
# 1% of TS cases also carry one of these 2 CNVs

## NRXN1 Deletions:

0.49% of TS cases  
OR=20.3 (2.6-156.2)

$$p_{\text{locus}} = 6 \times 10^{-6}$$

$$p_{\text{corr}} = 9 \times 10^{-4}$$



## CNTN6 Duplications:

0.49% of TS cases  
OR=10.1 (2.3-45.4)

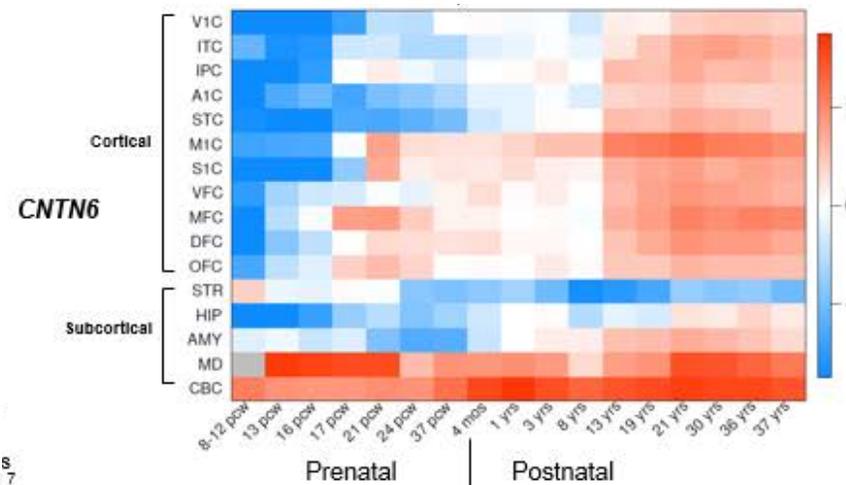
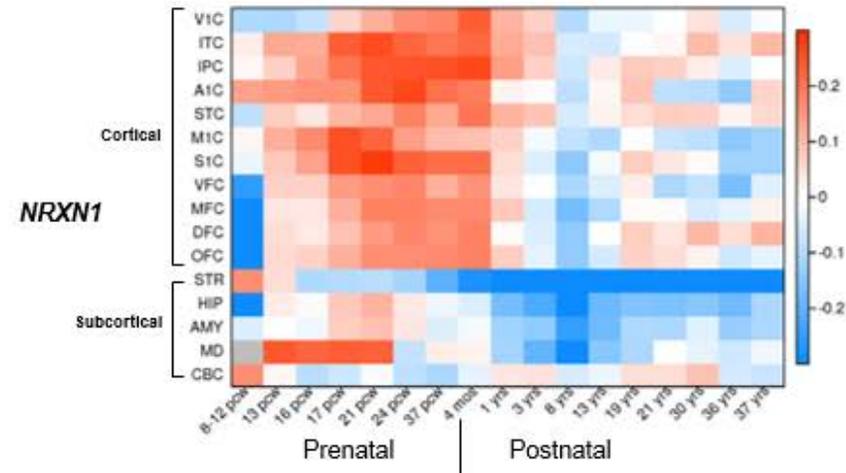
$$p_{\text{locus}} = 4 \times 10^{-5}$$

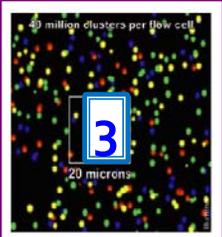
$$p_{\text{corr}} = 7 \times 10^{-3}$$

# Phenotypes of *NRXN1*/*CNTN6* carriers

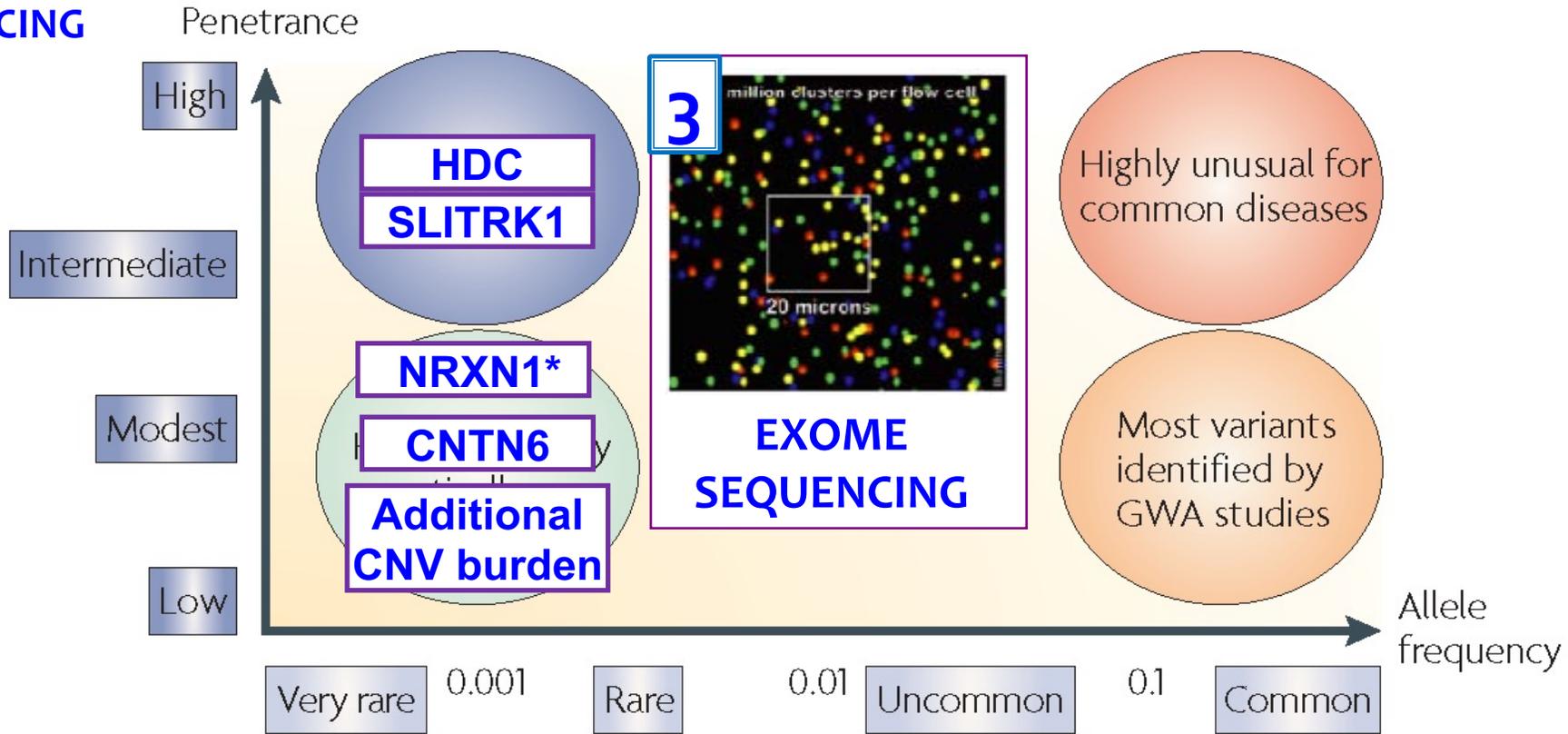
INDIV ID	TYPE	GENE	TS	OCD	ADHD	ATYPICAL FEATURES
TS1_0776	DEL	<i>NRXN1</i>	Y	N	Y	Sibling w/ ASD
TS1_0180	DEL	<i>NRXN1</i>	Y	N	N	ASD
TS1_0630	DEL	<i>NRXN1</i>	Y	N	N	Developmental Delay unspecified
TS1_0446	DEL	<i>NRXN1</i>	Y	Y	Y	None
TS1_0105	DEL	<i>NRXN1</i>	Y	N	Y	None
TS2_1256	DEL	<i>NRXN1</i>	Y	N	Y	Other dev. speech/language disorder
TS2_0924	DEL	<i>NRXN1</i>	Y	N	Y	None
TS2_0750	DEL	<i>NRXN1</i>	Y	Y	Y	ASD
TS2_1238	DEL	<i>NRXN1</i>	Y	Y	N	Paranoid personality disorder
TS1_0573	DEL	<i>NRXN1</i>	Y	NA	NA	NA
TS1_0698	DEL	<i>NRXN1</i>	Y	Y	Y	None
TS2_0026	DEL	<i>NRXN1</i>	Y	N	N	None
TS2_1805	DUP	<i>CNTN6</i>	Y	Y	NA	None
TS2_1405	DUP	<i>CNTN6</i>	Y	Y	Y	None
TS2_1624	DUP	<i>CNTN6</i>	Y	N	N	None
TS2_1525	DUP	<i>CNTN6</i>	Y	Y	Y	None
TS2_1545	DUP	<i>CNTN6</i>	Y	N	Y	None
TS2_1568	DUP	<i>CNTN6</i>	Y	Y	Y	None
TS1_0568	DUP	<i>CNTN6</i>	Y	N	Y	None
TS2_1320	DUP	<i>CNTN6</i>	Y	Y	N	None
TS1_0618	DUP	<i>CNTN6</i>	Y	N	N	None
TS2_1156	DUP	<i>CNTN6</i>	Y	N	Y	None
TS2_0452	DUP	<i>CNTN6</i>	Y	N	N	None
TS2_0827	DUP	<i>CNTN6</i>	Y	N	N	None

# Expression of *NRXN1* and *CNTN6* across human neurodevelopment

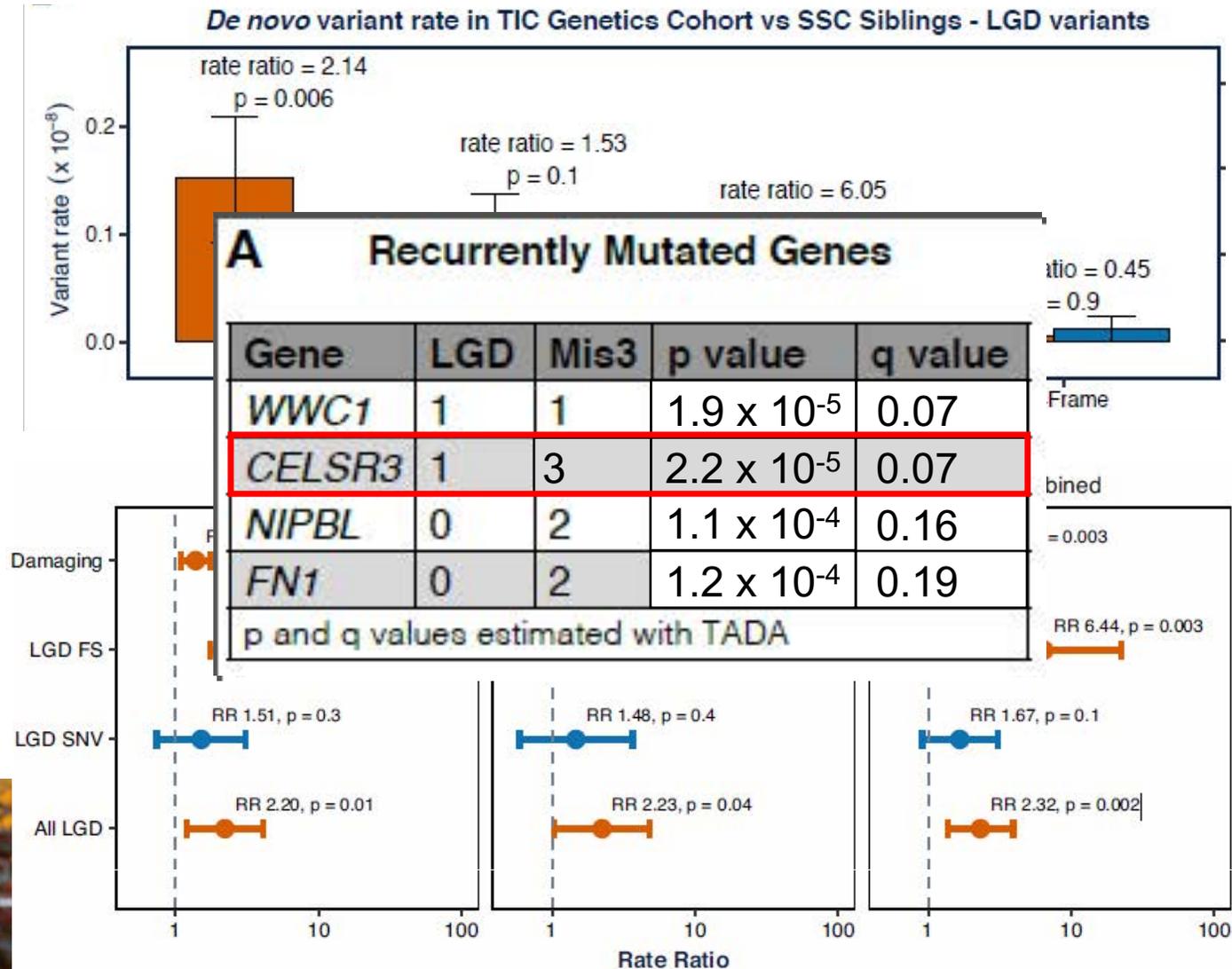




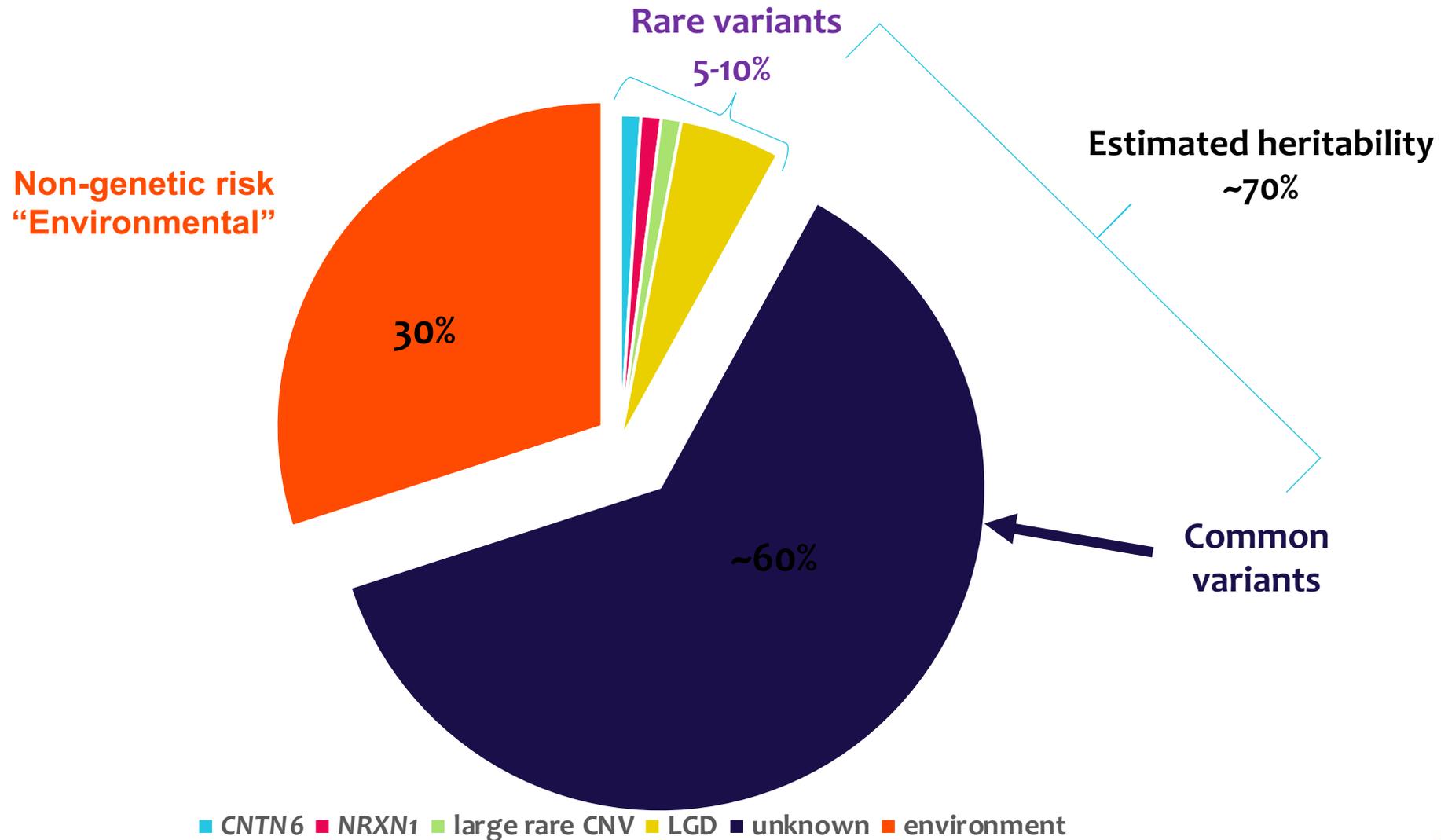
**NEXT-  
GEN  
SEQUEN  
CING**

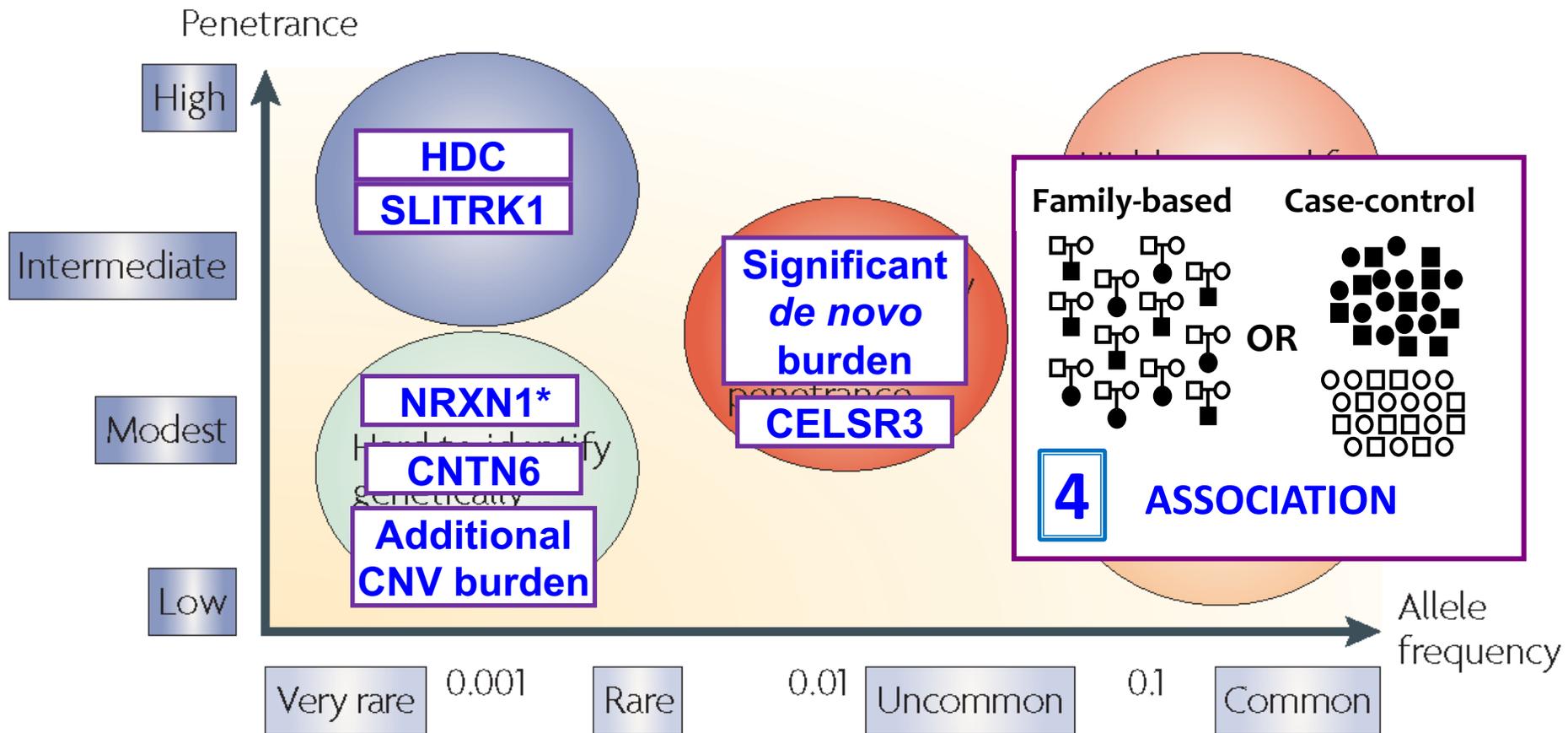


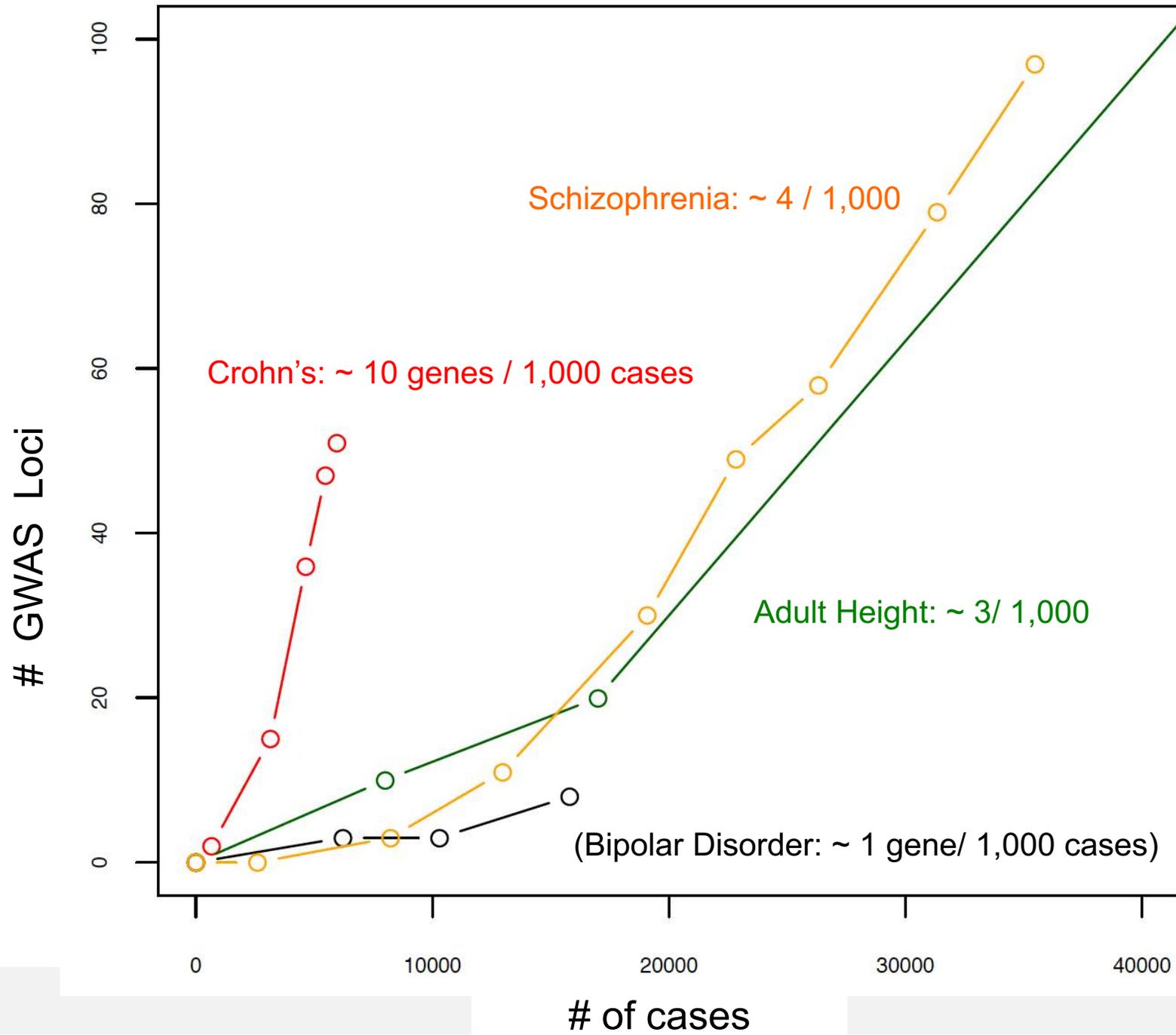
# TS cases are enriched for *de novo* “likely gene damaging” (LGD) variants



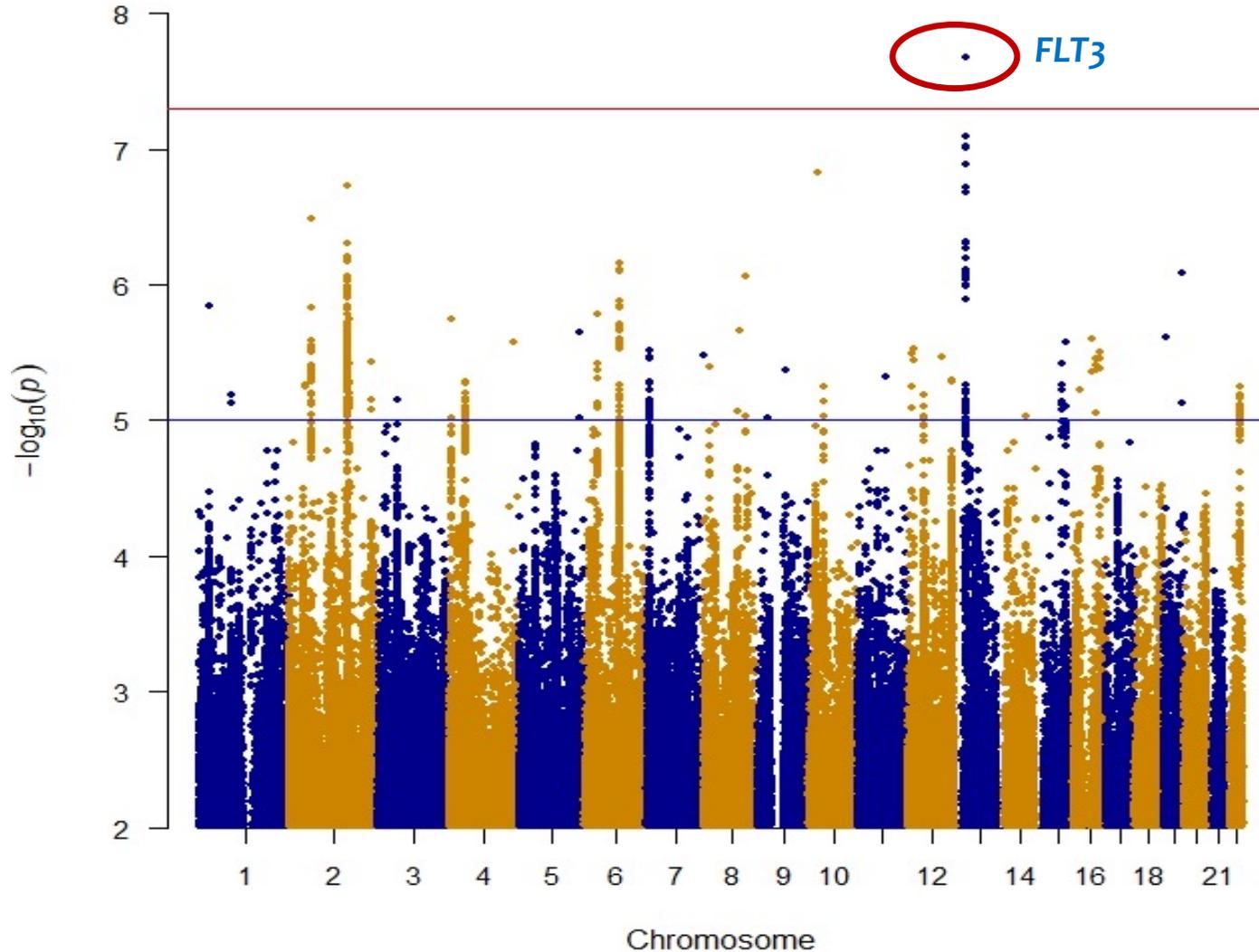
# Progress in understanding TS genetic risk







# PGC TS GWAS2 meta-analysis - 2019



4819 cases  
9488 controls  
 $\lambda_{1000} = 1.010$

Replication  
DeCODE  
706 cases  
9784 controls





# TS GWAS<sub>3</sub> meta-analysis

2022-2023, and beyond...

# PGC TS GWAS<sub>3</sub> meta-analysis- 2022

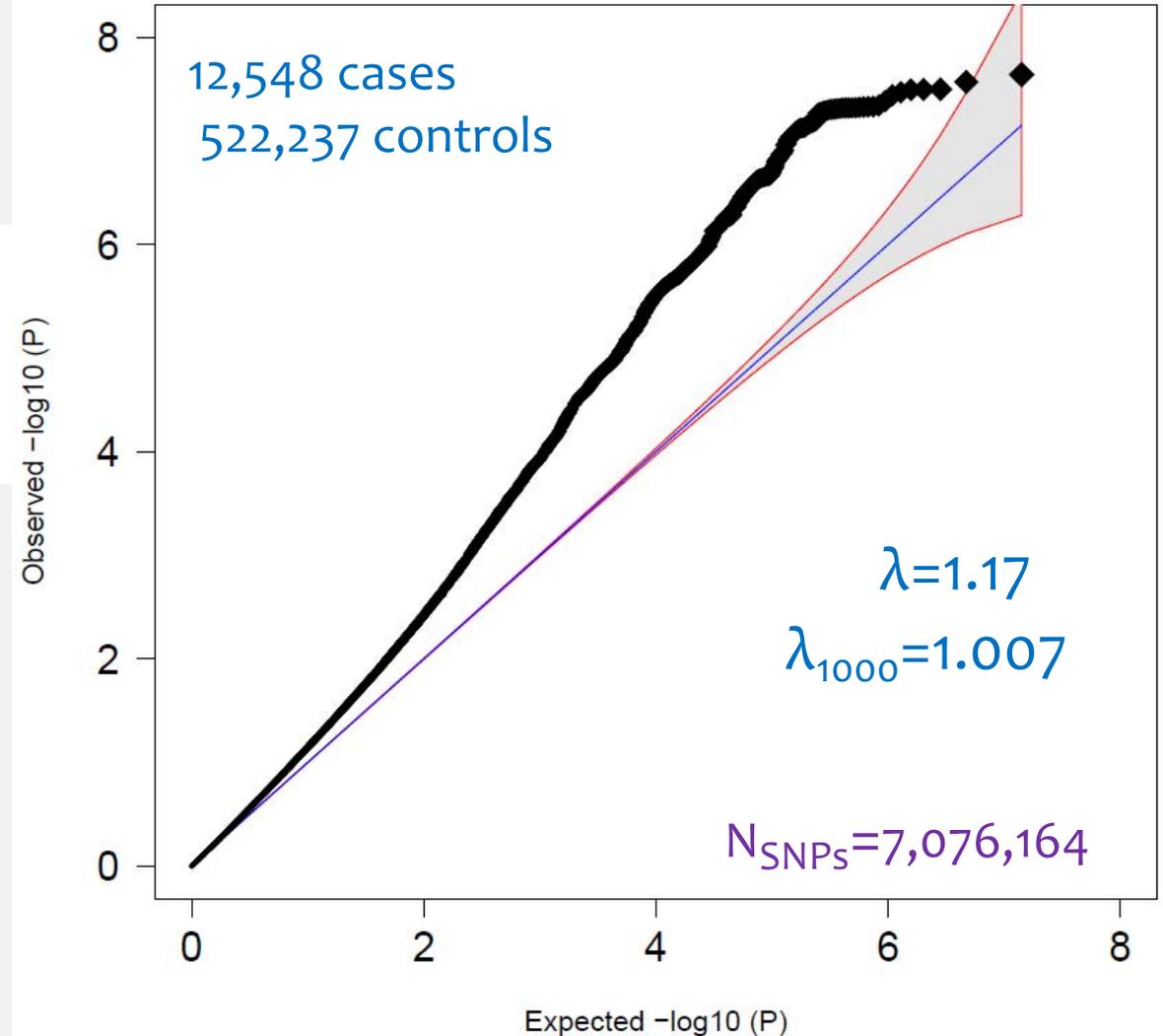
Data Set	# Cases	# Controls
iPSYCH	3,041	29,808
TS GWAS2	2,748	3,137
deCODE (TS+CT)	1,998	134,508
EMTICS	1,225	3,341
TAAICG_GWAS1	857	2,256
TAAICG_Fam	818	1,762
TIC Genetics	532	1,448
BioVU	319	1,585
FinnGen	293	342,206
Sweden	284	1,136
PGC TS_GSA	209	458
NORDiC_SWE	188	414
PGC PsychChip	36	178
<b>Meta-analysis</b>	<b>12,548</b>	<b>522,237</b>
23andMe replication	1,571	941,405
<b>Total</b>	<b>14,119</b>	<b>1,463,642</b>



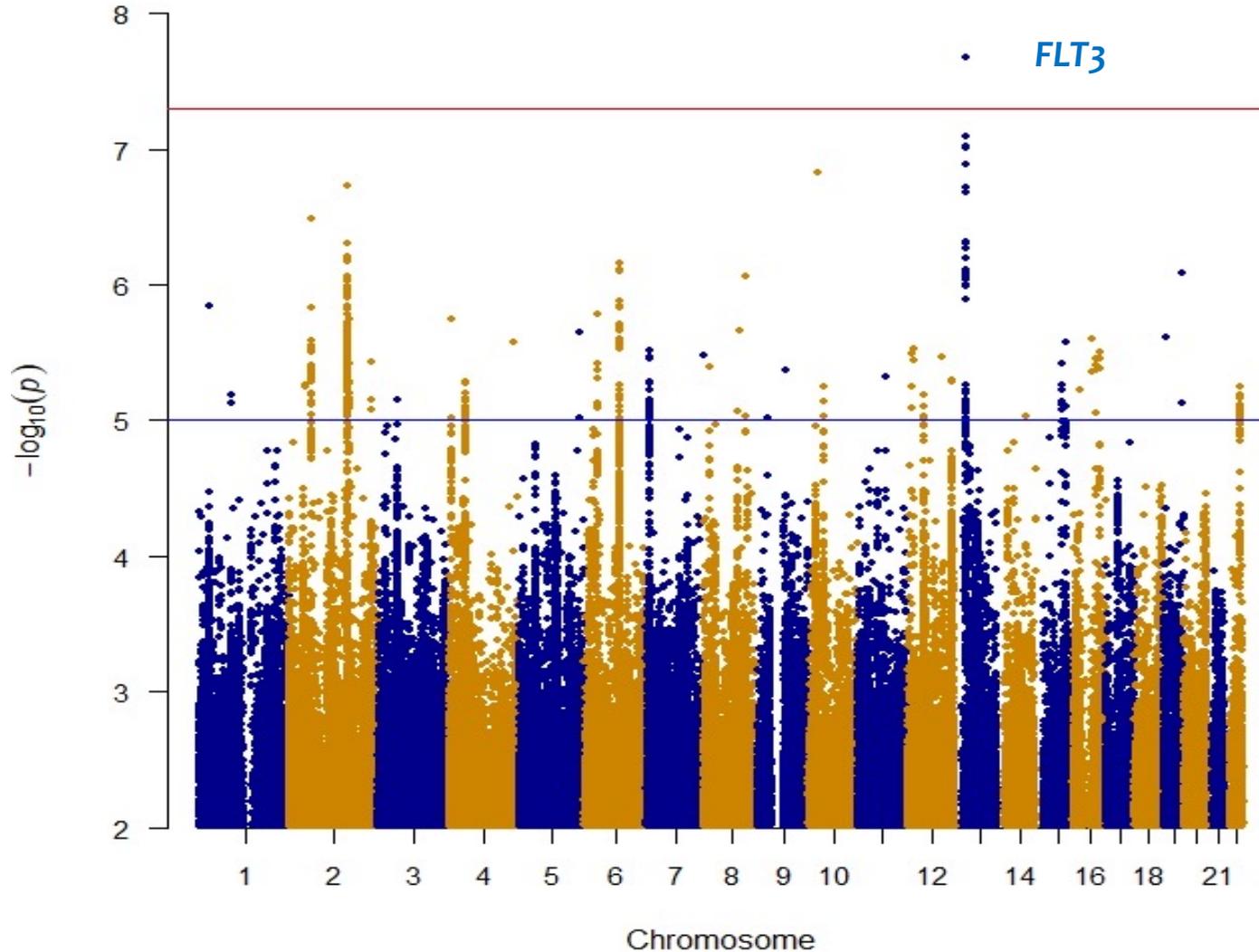
# PGC TS GWAS<sub>3</sub> meta-analysis - 2022

- 13 independent datasets
  - Individual level data: 7 datasets
  - Summary statistics: 6 datasets
- Non-isolate data were imputed with HRC reference panel
- Association tests
  - Logistic regression for unrelated samples with balanced case/control ratios
  - LMM for datasets with related samples (deCODE, FinnGen, TAAICG\_Fam)
- Meta-analysis
  - SE-weighted, fixed-effect model in METAL
  - SNPs retained w/ INFO>0.8 & MAF>1%

## Q-Q plot - Association tests



# PGC TS GWAS2 meta-analysis - 2019



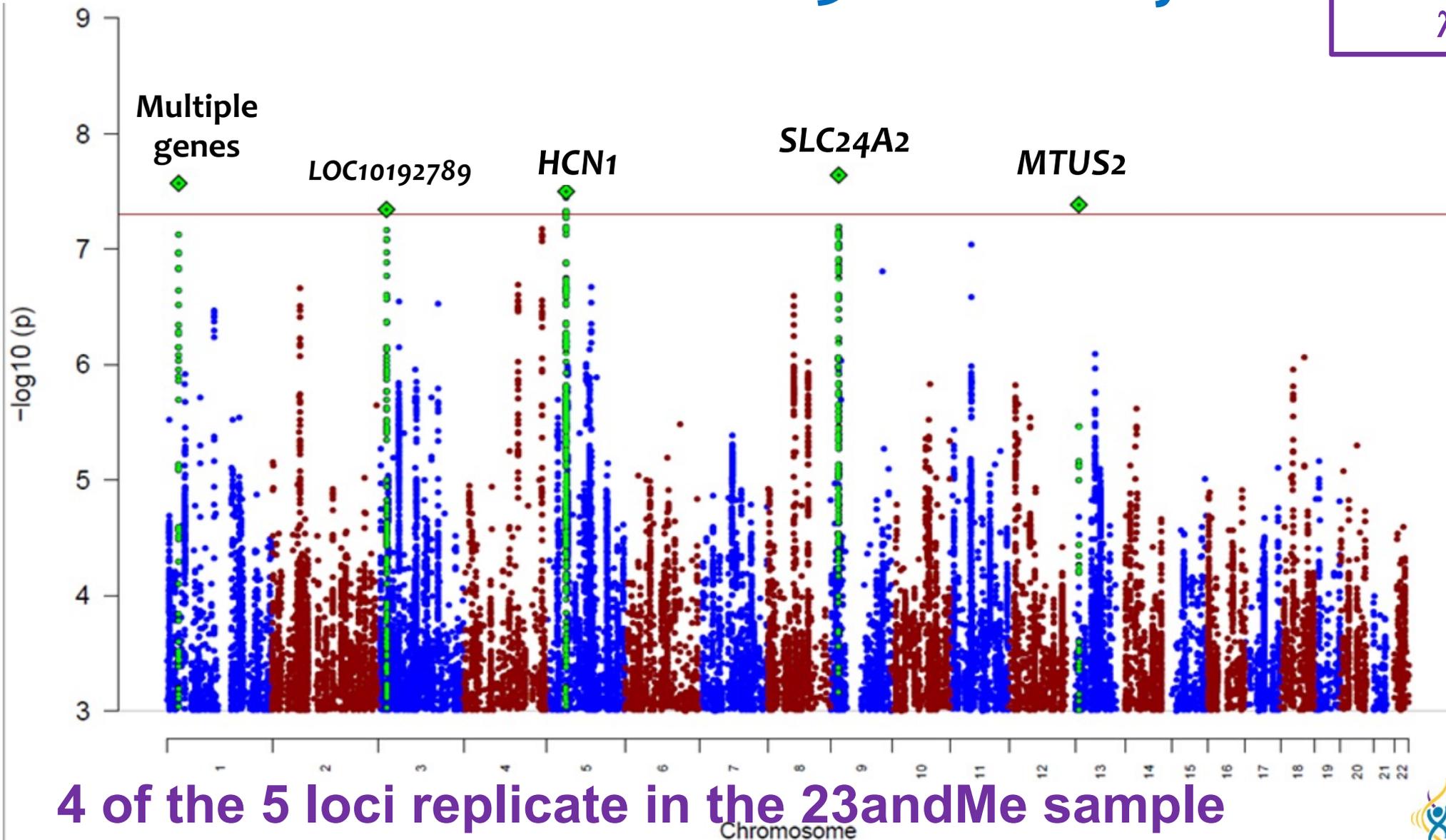
4819 cases  
9488 controls  
 $\lambda_{1000} = 1.010$

Replication  
DeCODE  
706 cases  
9784 controls



# PGC TS GWAS<sub>3</sub> meta-analysis

12,548 cases  
522,237 controls  
 $\lambda_{1000} = 1.010$



4 of the 5 loci replicate in the 23andMe sample



Matt Halvorsen



Nora Strom



Dongmei Yu

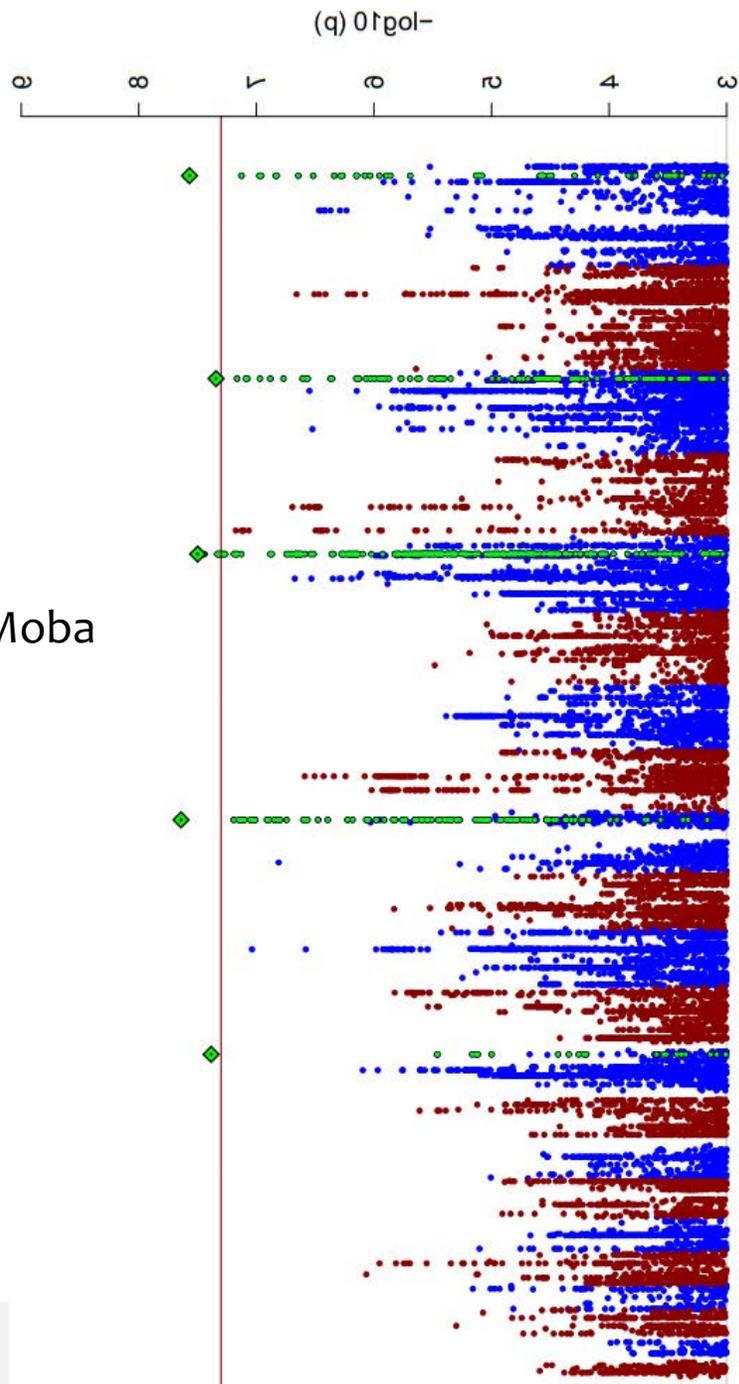


Apostolia Topalaudi

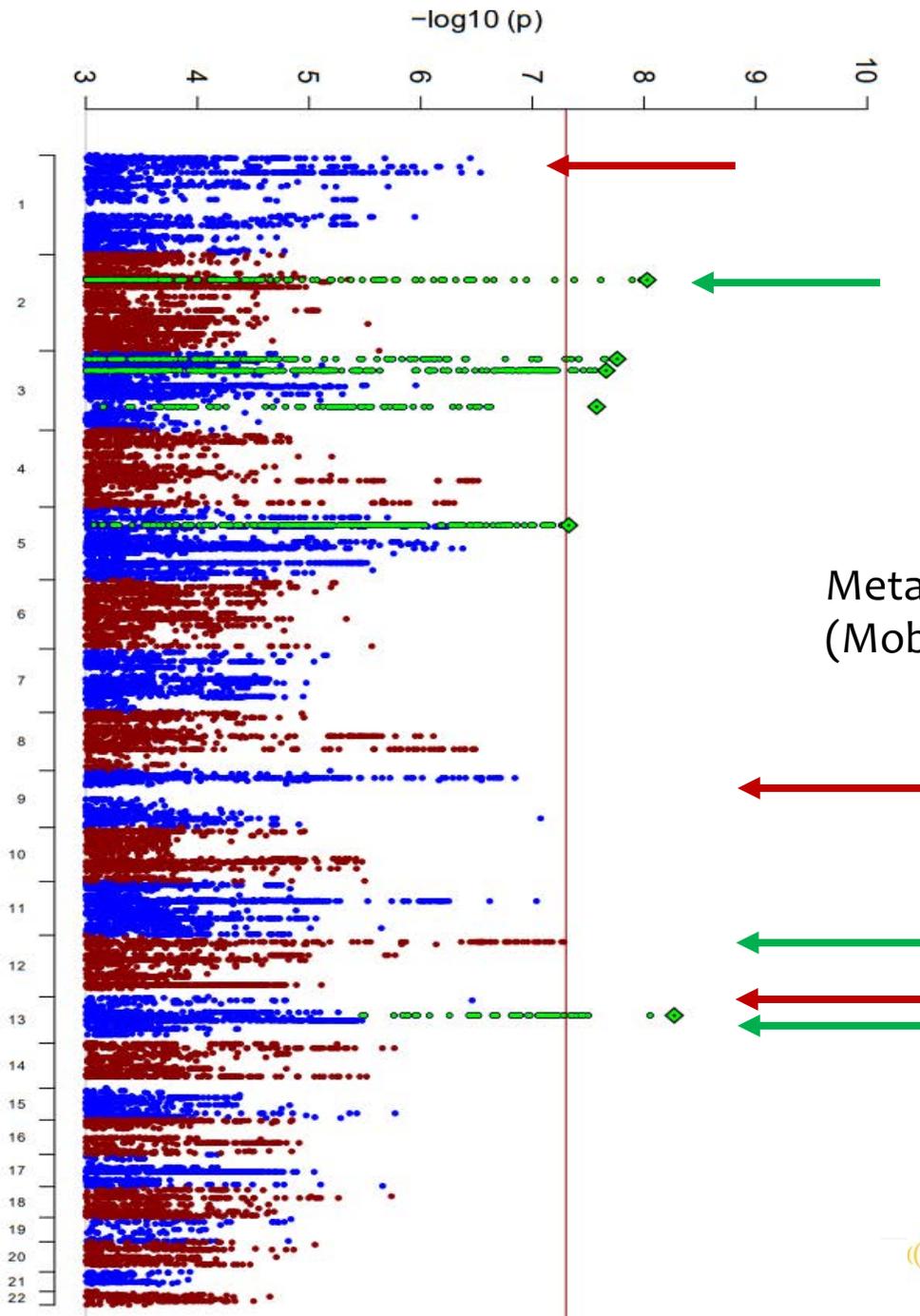
# TS GWAS<sub>3</sub> meta-analysis 2023

Data Set	N_cases	N_controls	N_eff	N
iPSYCH	3,041	29,808	11,038	32,849
GWAS <sub>2</sub>	2,748	3,137	5,859	5,885
deCODE (TS+CT)	1,998	134,508	7,875	136,506
EMTICS	1,225	3,341	3,585	4,566
TAAICG_GWAS <sub>1</sub>	857	2,256	2,484	3,113
TAAICG_fam	818	1,762	1,790	2,580
TICGen	532	1,448	1,556	1,980
BioVU	319	1,585	1,062	1,904
FinnGen	293	342,206	1,171	342,499
Sweden	284	1,136	909	1,420
TS_GSA	209	458	574	667
NORDiC_SWE	188	414	517	602
PsychChip	36	178	120	214
<b>Meta_202112</b>	<b>12,548</b>	<b>522,237</b>	<b>38,541</b>	<b>534,785</b>
Moba (Norway)	699	13,980	2,663	14,679
<b>Meta_2023</b>	<b>13,247</b>	<b>536,217</b>	<b>41,204</b>	<b>549,464</b>

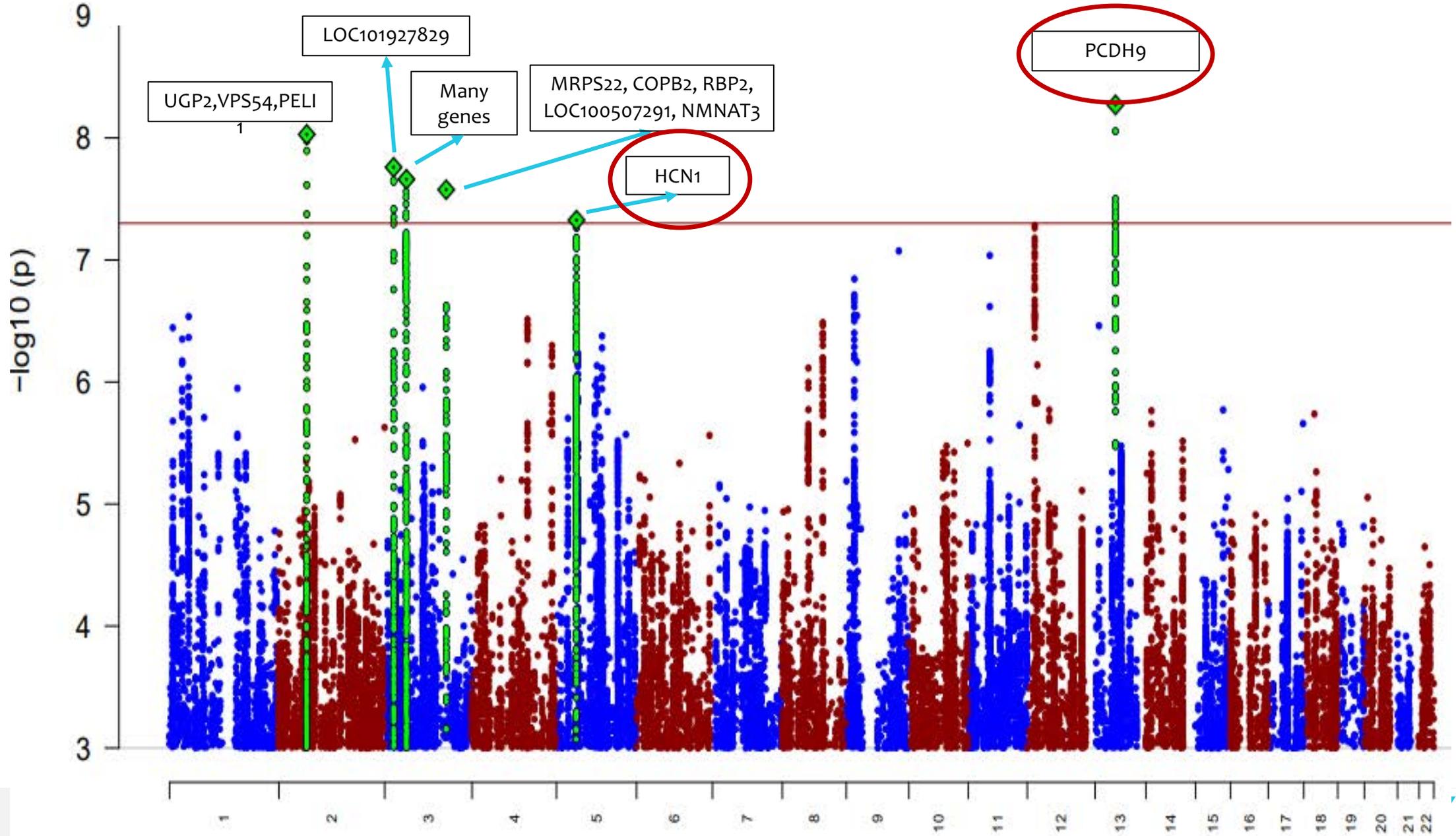
Meta\_202112 (Moba NOT included)



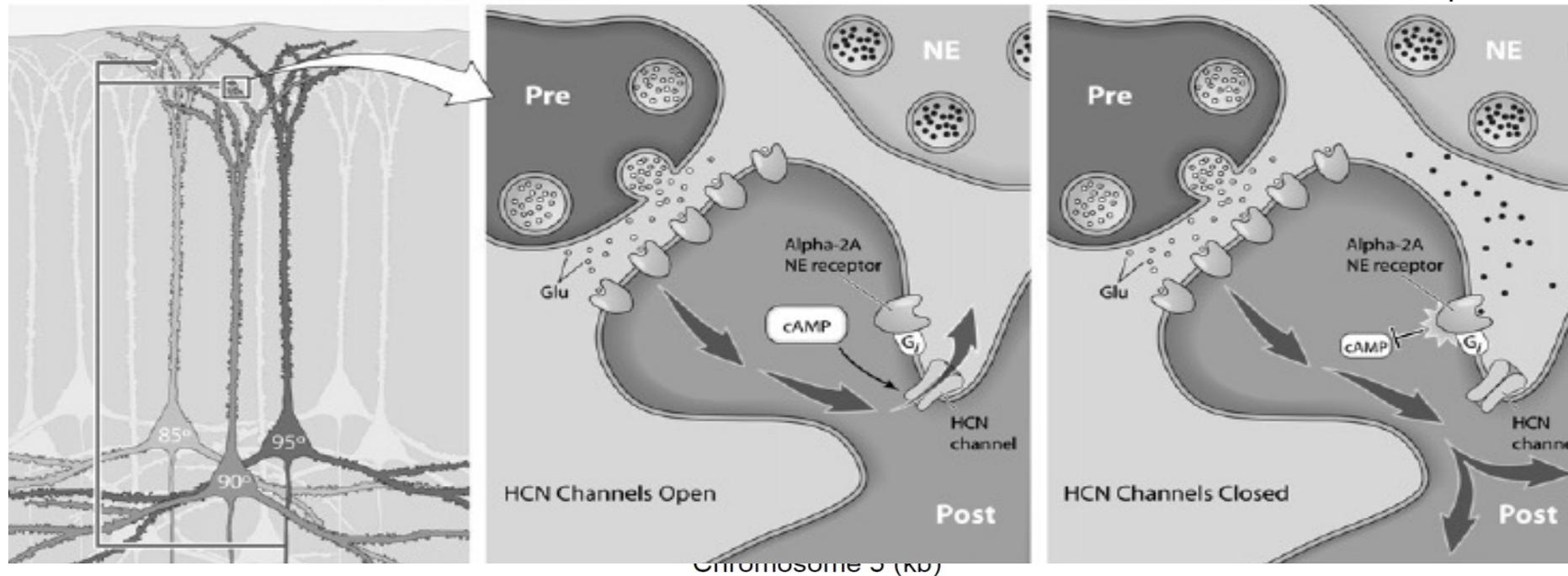
Meta\_2023 (Moba included)



# Manhattan Plot



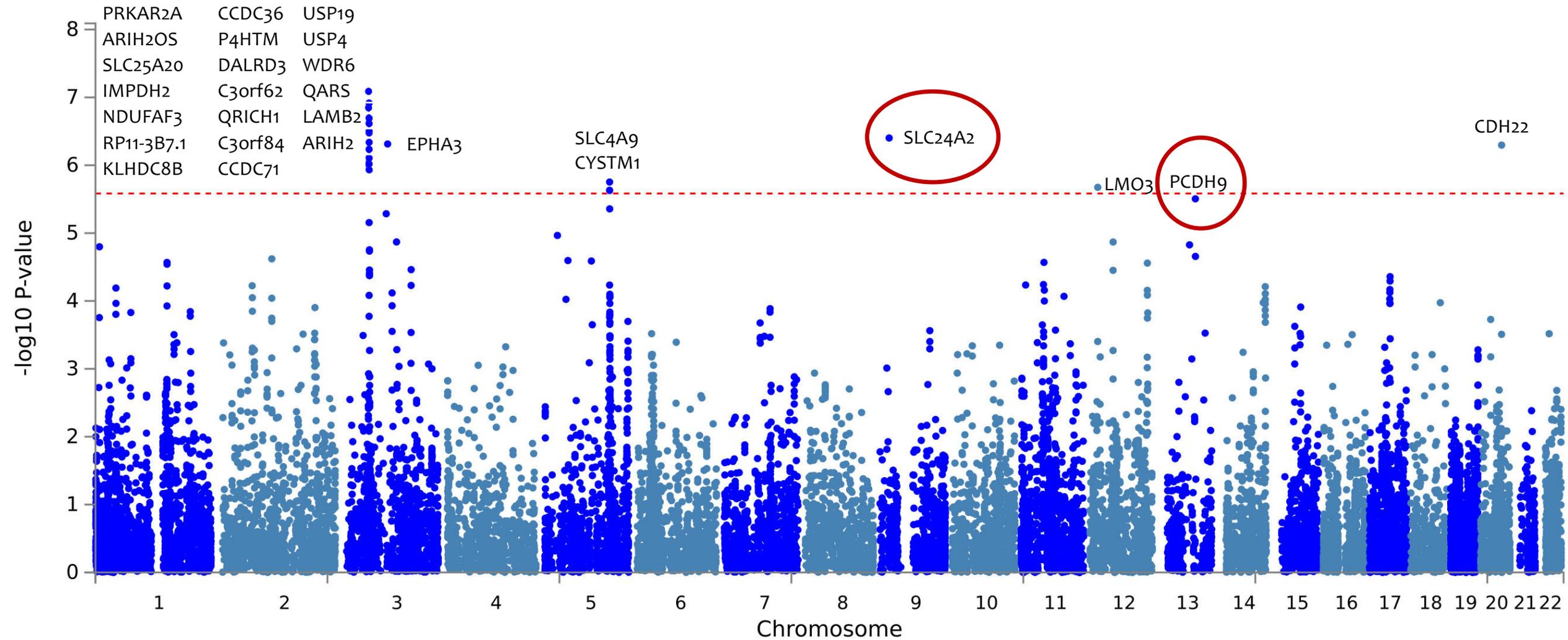
# HCN1 locus



**HCN1** forms a cAMP-dependent ion channel that regulates post-synaptic cell excitability

In frontal cortex, the HCN channel is regulated by the alpha-2A NE receptor which is the drug target of the alpha-2 agonists clonidine & guanfacine

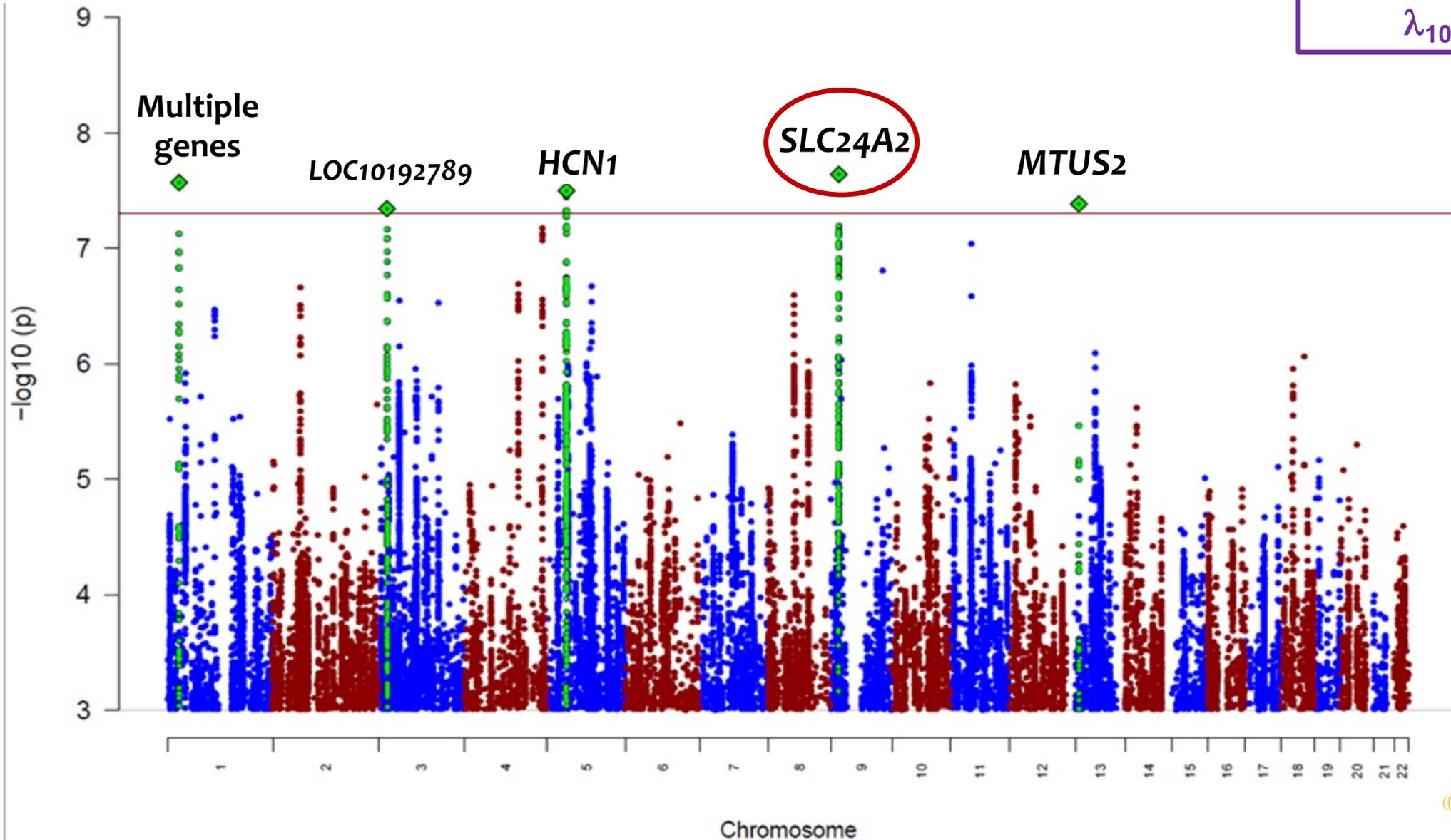
# Gene-based GWAS in MAGMA



Manhattan plot of gene-based analysis. The genome-wide significance (red dashed line) is  $P < 2.2 \times 10^{-8}$  for Bonferroni correction of 19,172 genes.

# PGC TS GWAS<sub>3</sub> meta-analysis

12,548 cases  
522,237 controls  
 $\lambda_{1000} = 1.010$



Matt Halvorsen



Nora Strom

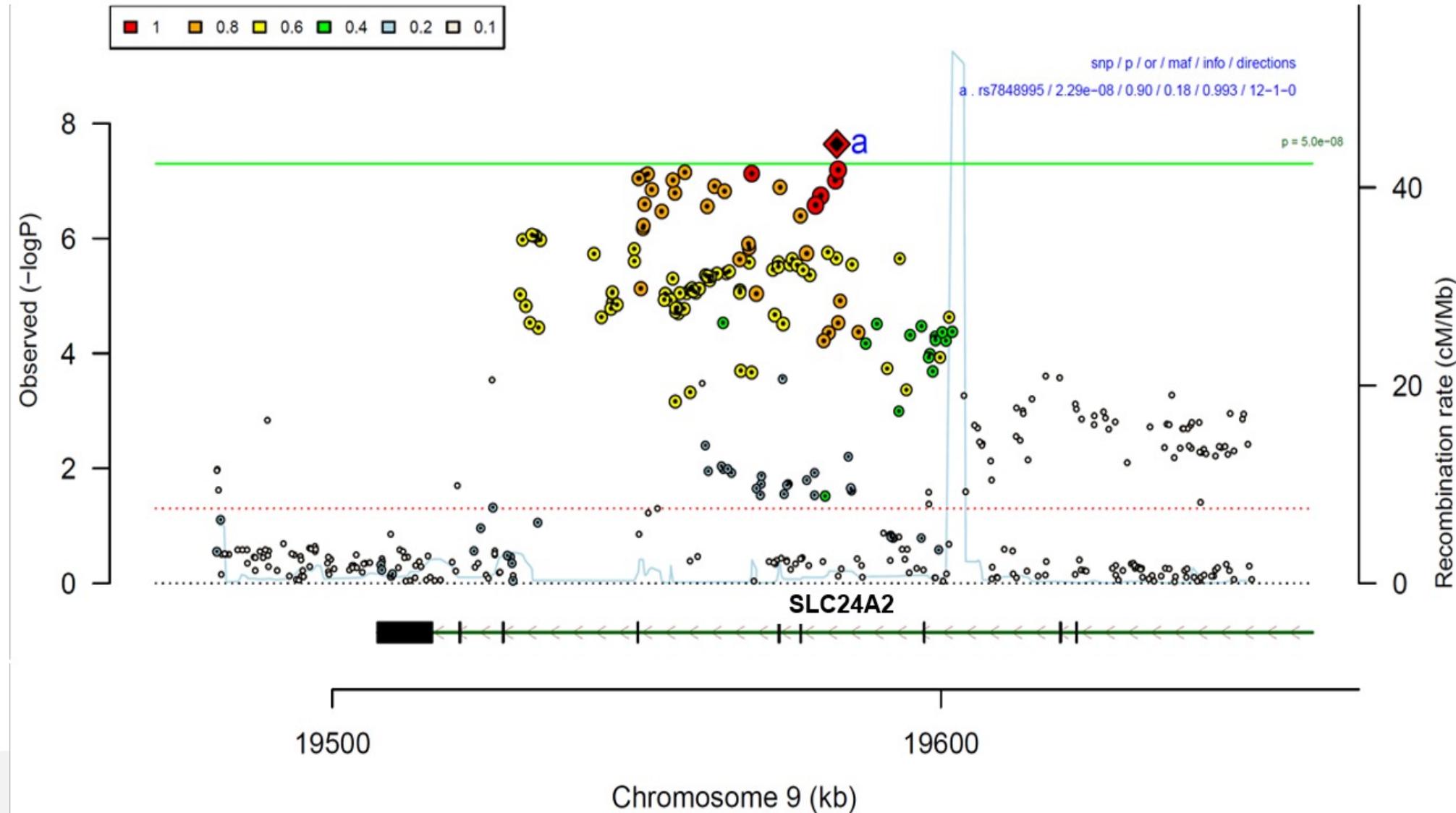


Dongmei Yu



Apostolia Topaloudi

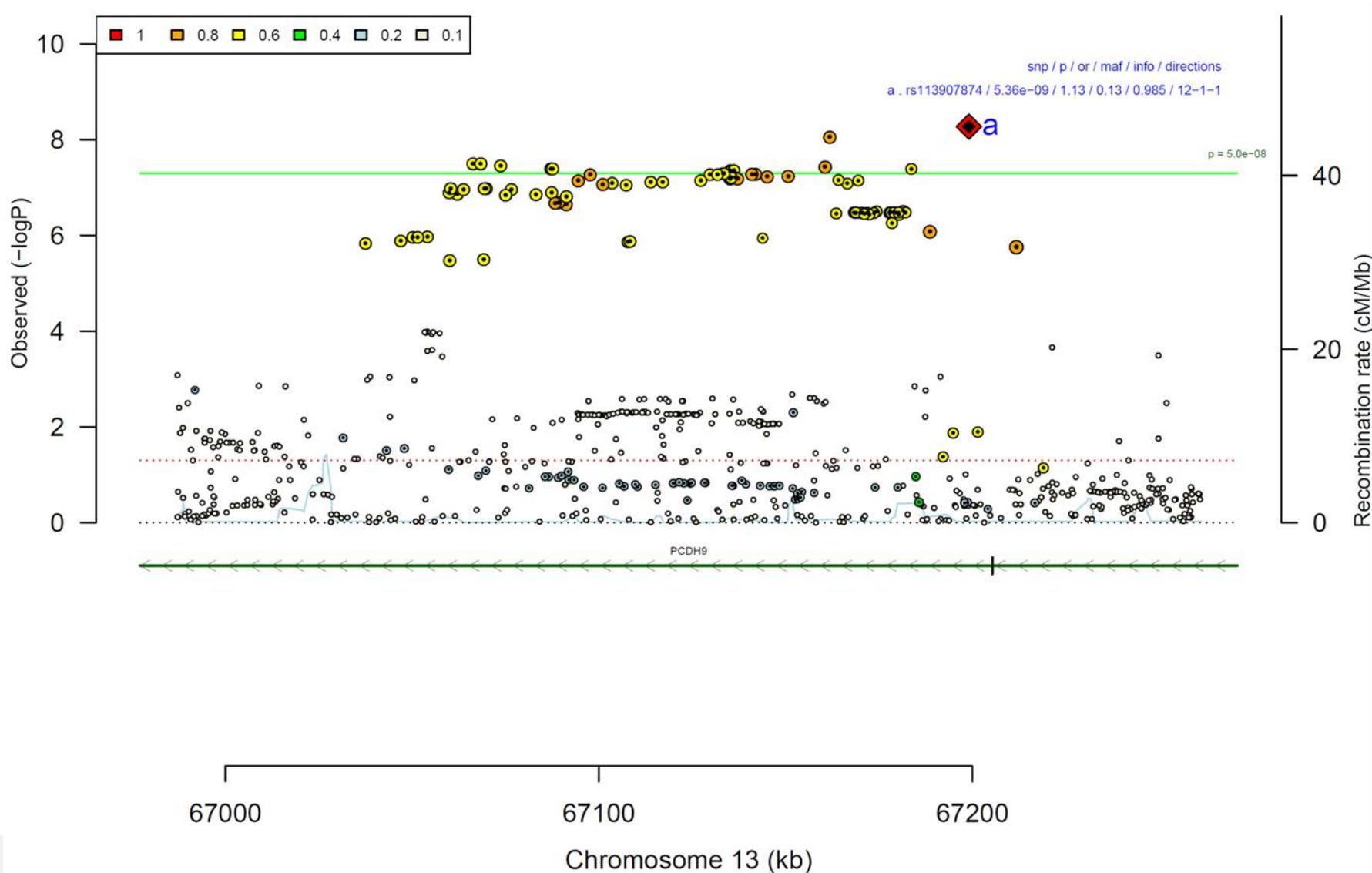
# SLC24A2 locus



**SLC24A2:**  
Calcium/cation  
antiporter  
super-family  
member;

strongly expressed  
in brain

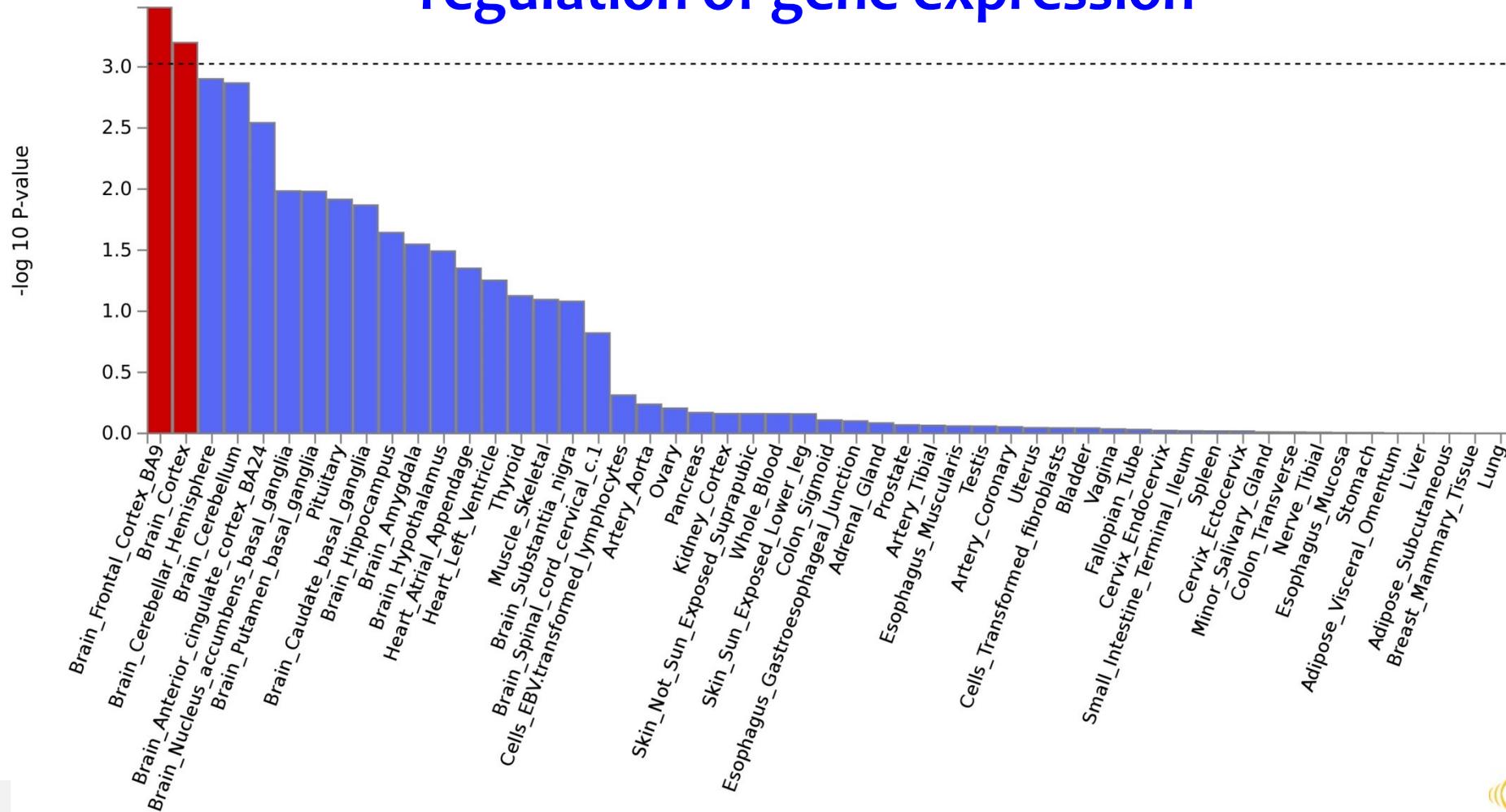
# PCDH9 locus



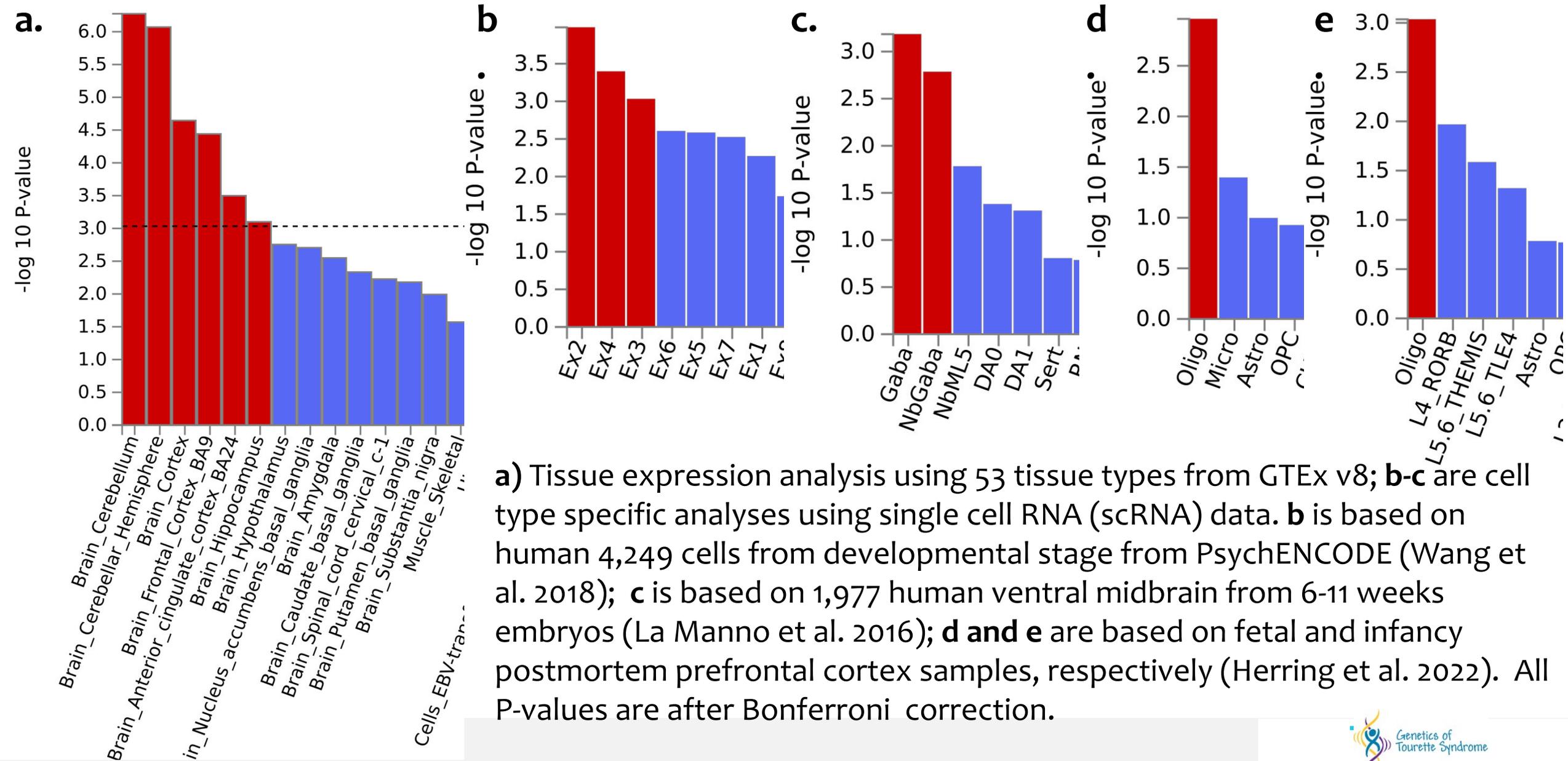
**PCDH9:**  
protocadherin 9;  
strongly expressed  
in brain

Mediates cell  
adhesion in neural  
tissues in the  
presence of  
calcium

# Polygenic risk scores can be used to calculate a genome-wide “fingerprint” of disease-specific regulation of gene expression

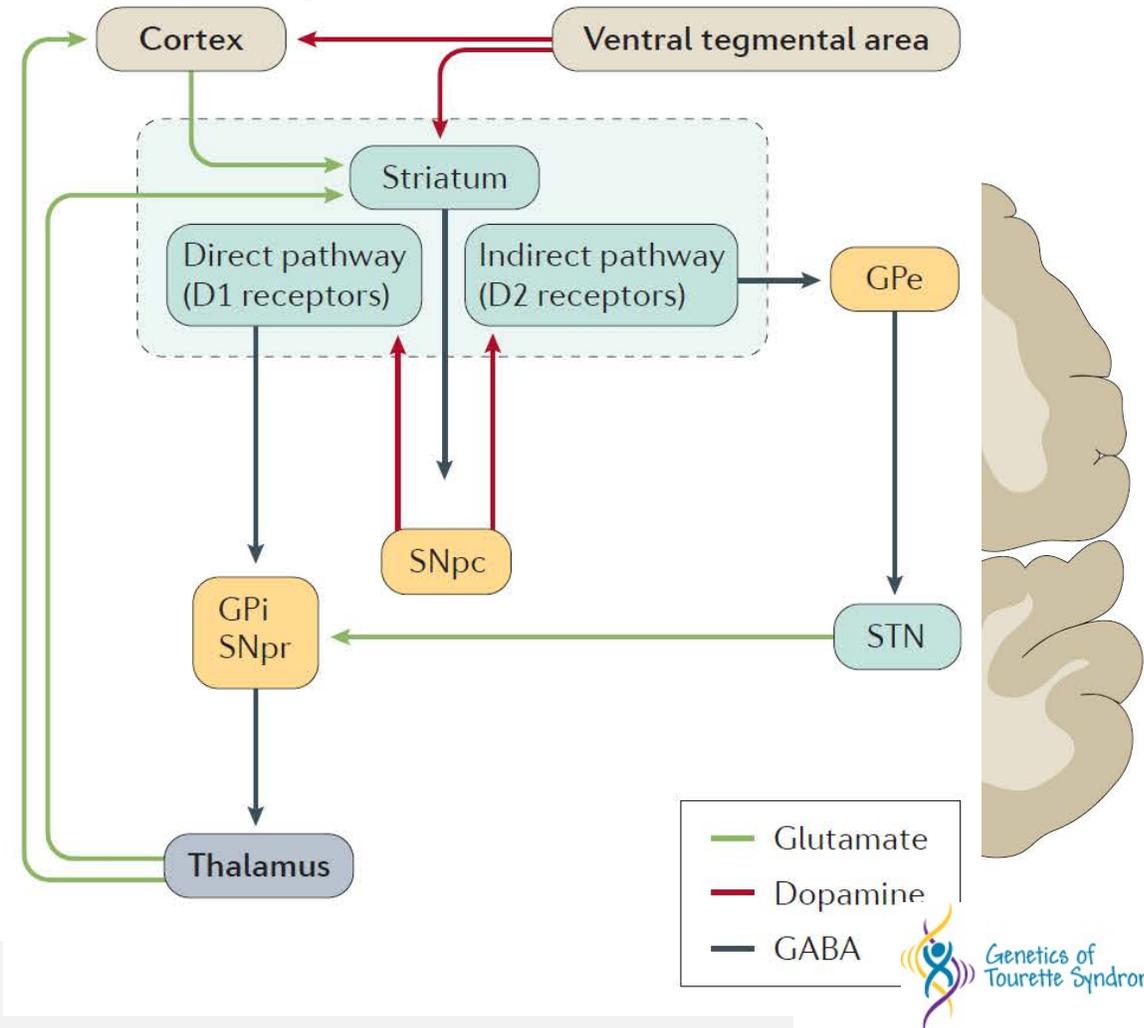
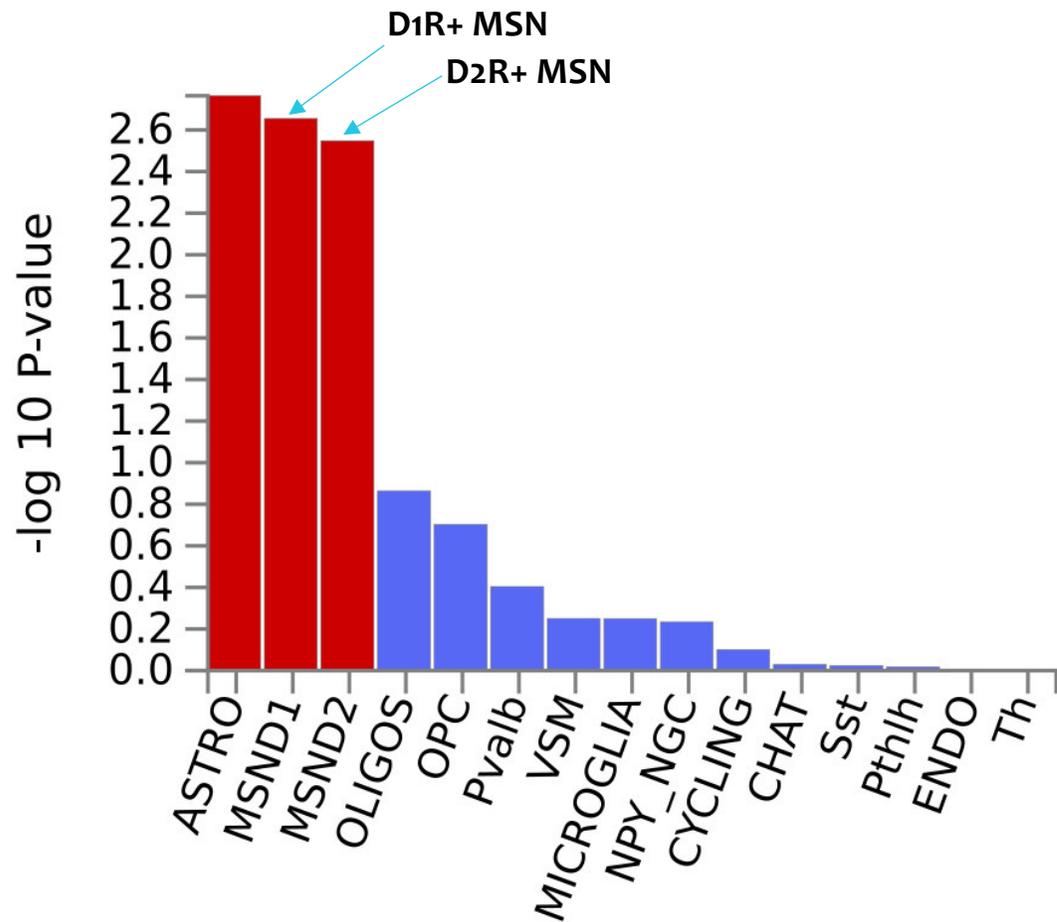


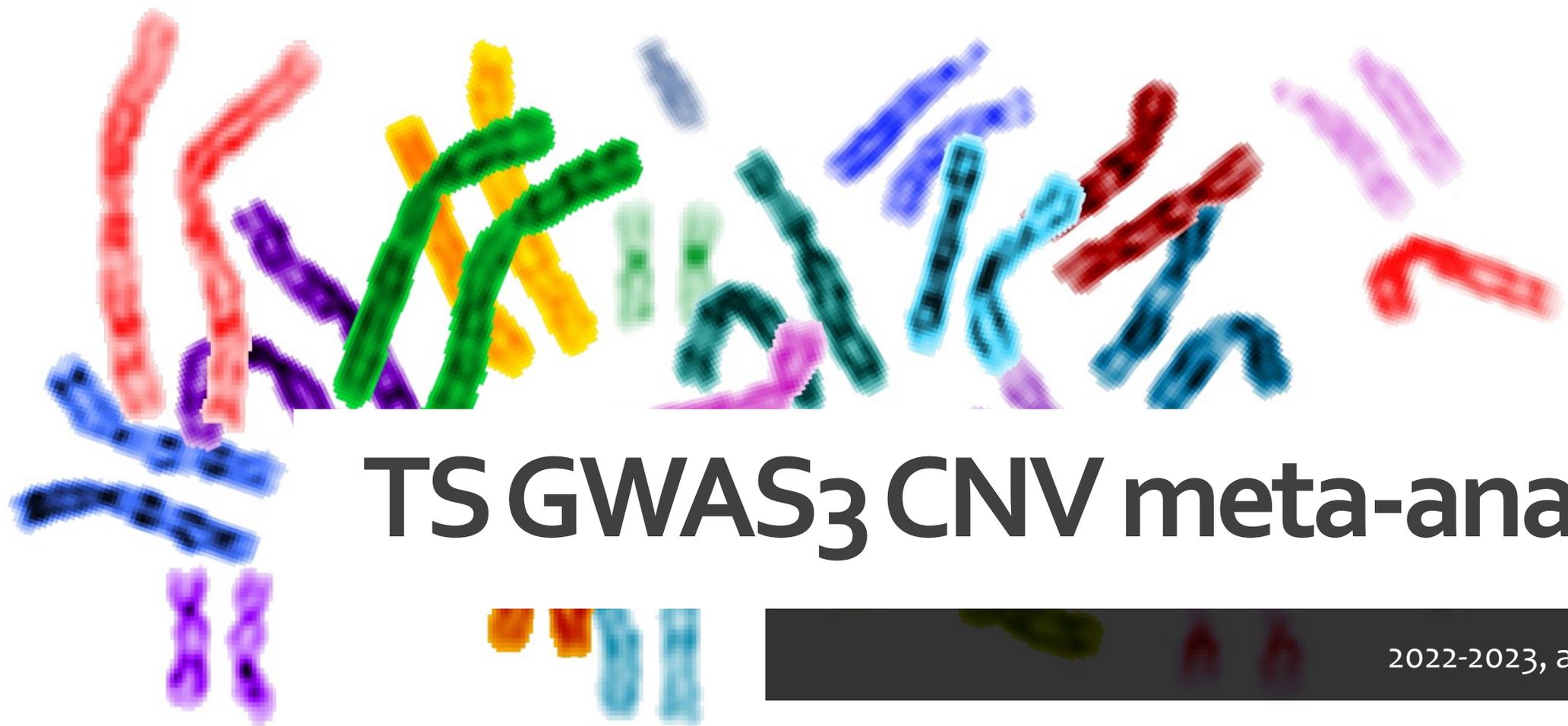
# Tissue/Cell Type Specific Analyses



**a)** Tissue expression analysis using 53 tissue types from GTEx v8; **b-c** are cell type specific analyses using single cell RNA (scRNA) data. **b** is based on human 4,249 cells from developmental stage from PsychENCODE (Wang et al. 2018); **c** is based on 1,977 human ventral midbrain from 6-11 weeks embryos (La Manno et al. 2016); **d and e** are based on fetal and infancy postmortem prefrontal cortex samples, respectively (Herring et al. 2022). All P-values are after Bonferroni correction.

# TS GWAS<sub>3</sub> Genes Are Preferentially Expressed in Dopamine D<sub>1</sub>R+ & D<sub>2</sub>R+ Medium Spiny Neurons



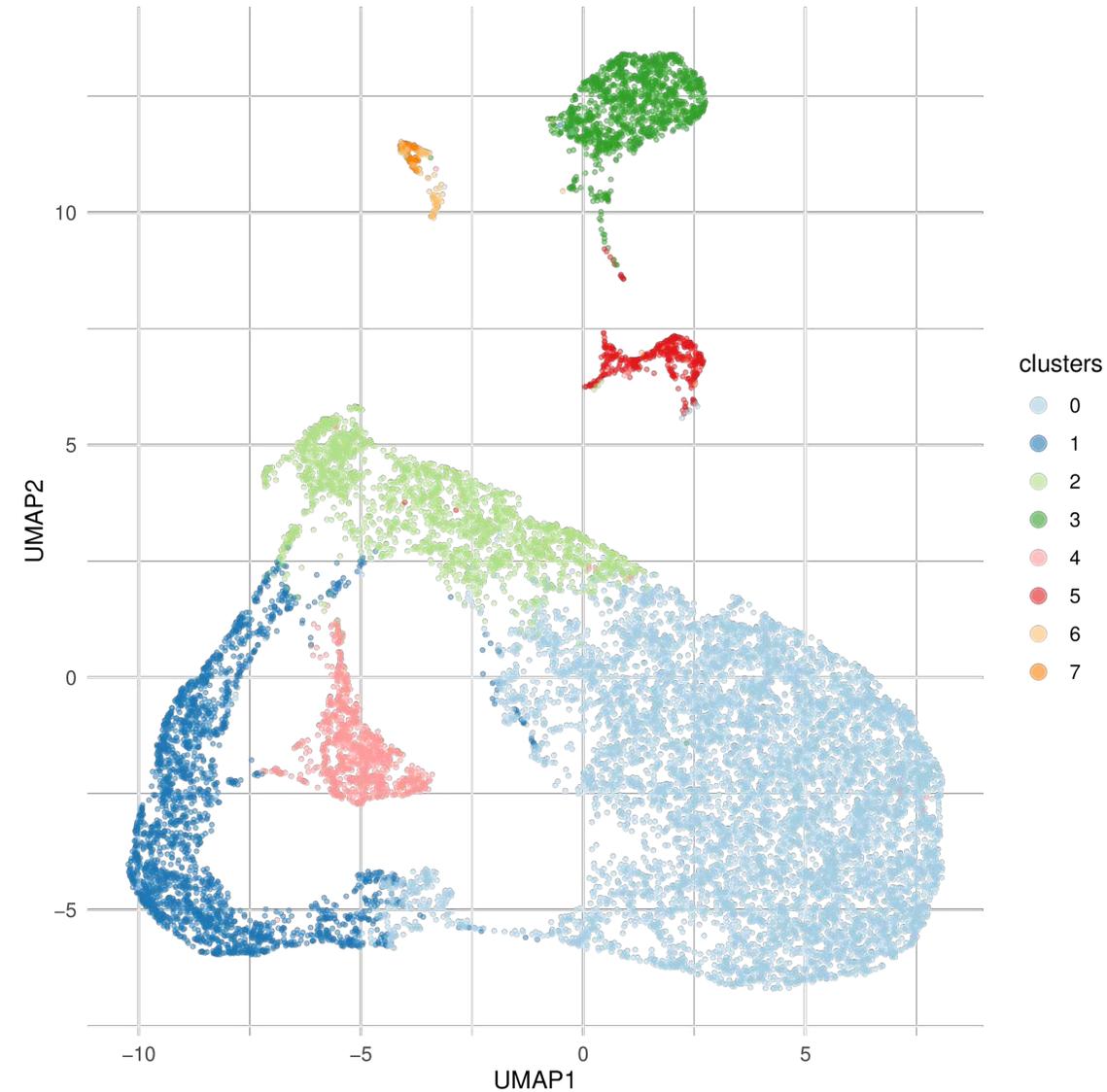


# TS GWAS<sub>3</sub> CNV meta-analysis

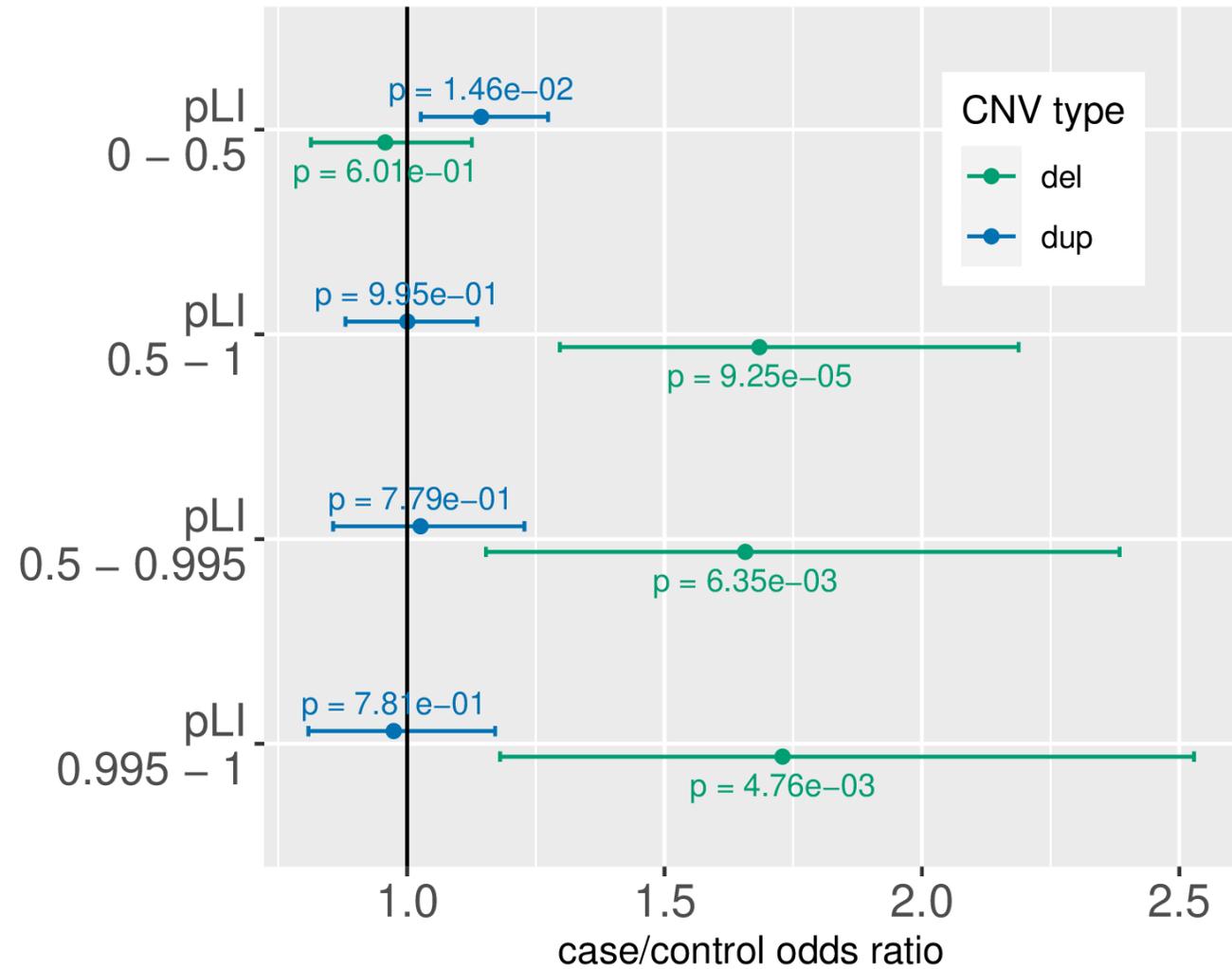
2022-2023, and beyond...

# Case/control groups

- ~12,000 TS cases and 530,000 controls in the TS GWAS<sub>3</sub>
- Not all of these are available for individual CNV analyses
- Defined by unique combination of array group (3 total), ancestry cluster (8 total) and biological sex (2 total) = 48 combinations
- Require that group has at least 5 cases, 5 controls, and case/control ratio between 10%-90%
  - Total of 31 groups
- 5202 TS cases, 8667 controls
  - Double the sample size of Huang et al (N=2435 & 4100)

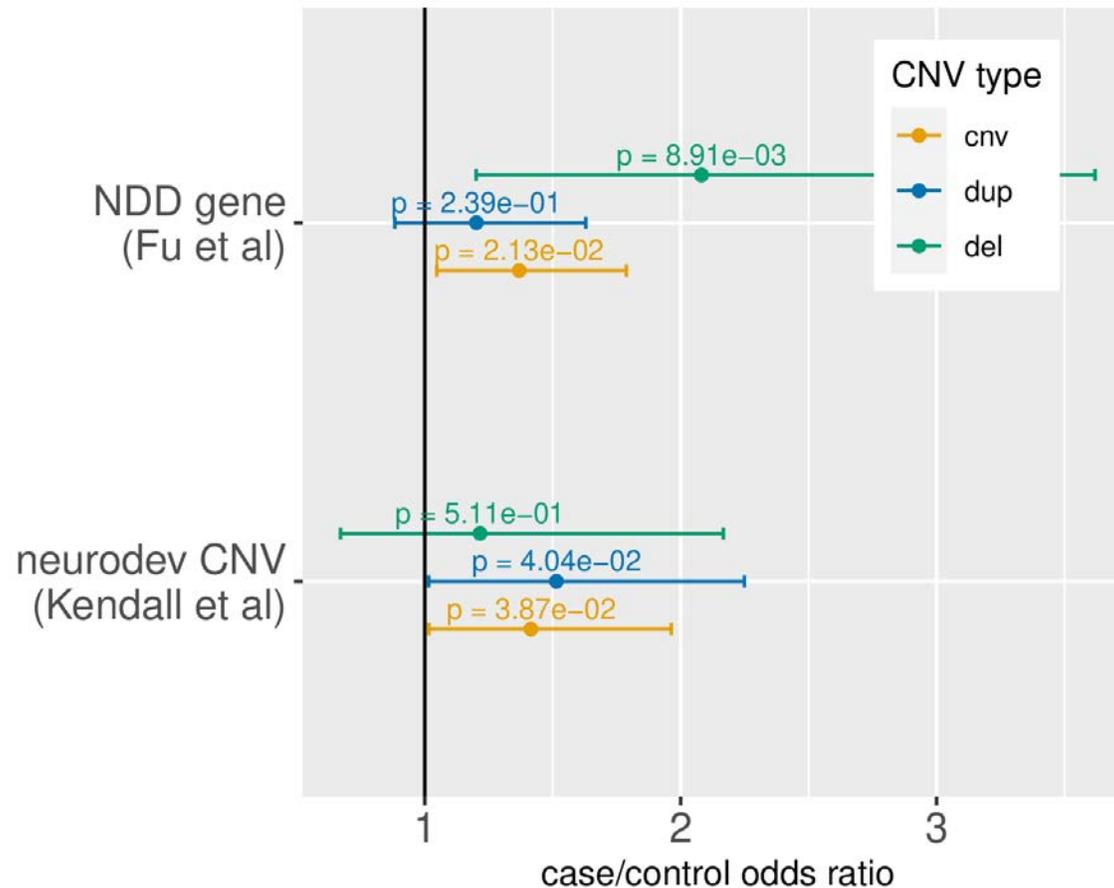


# Increased CNV burden (deletions) in TS in constrained protein-coding genes



Matt Halvorsen

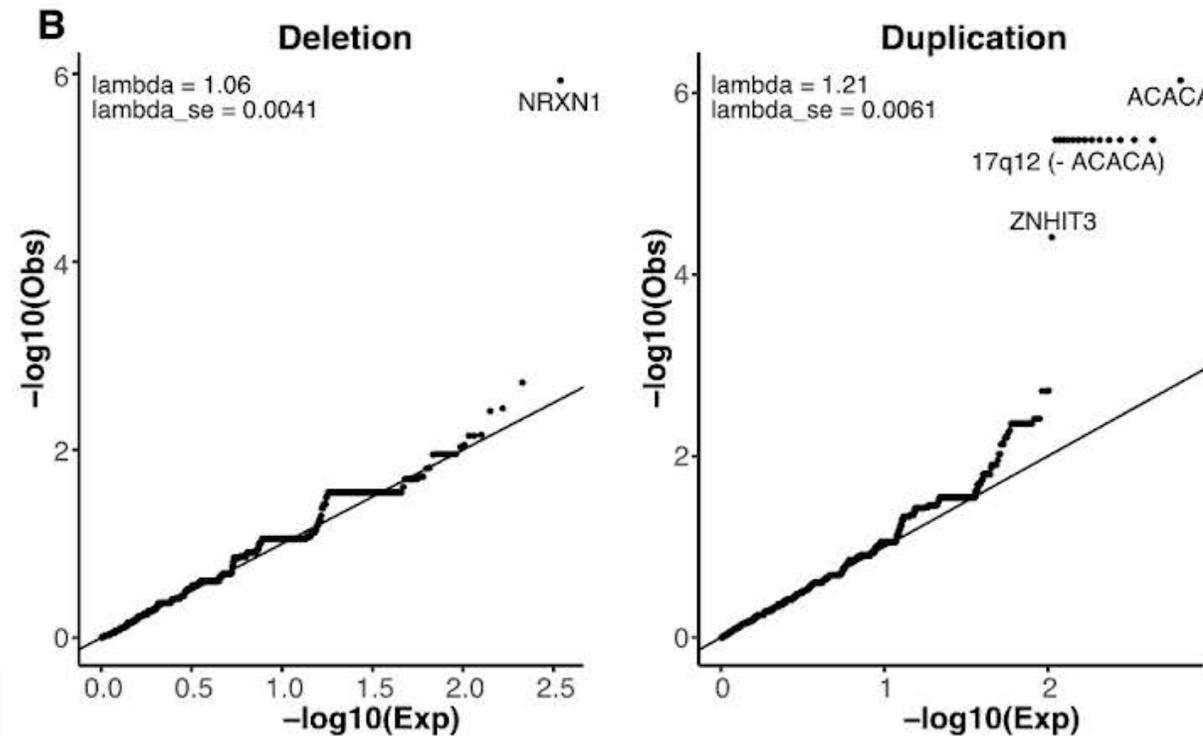
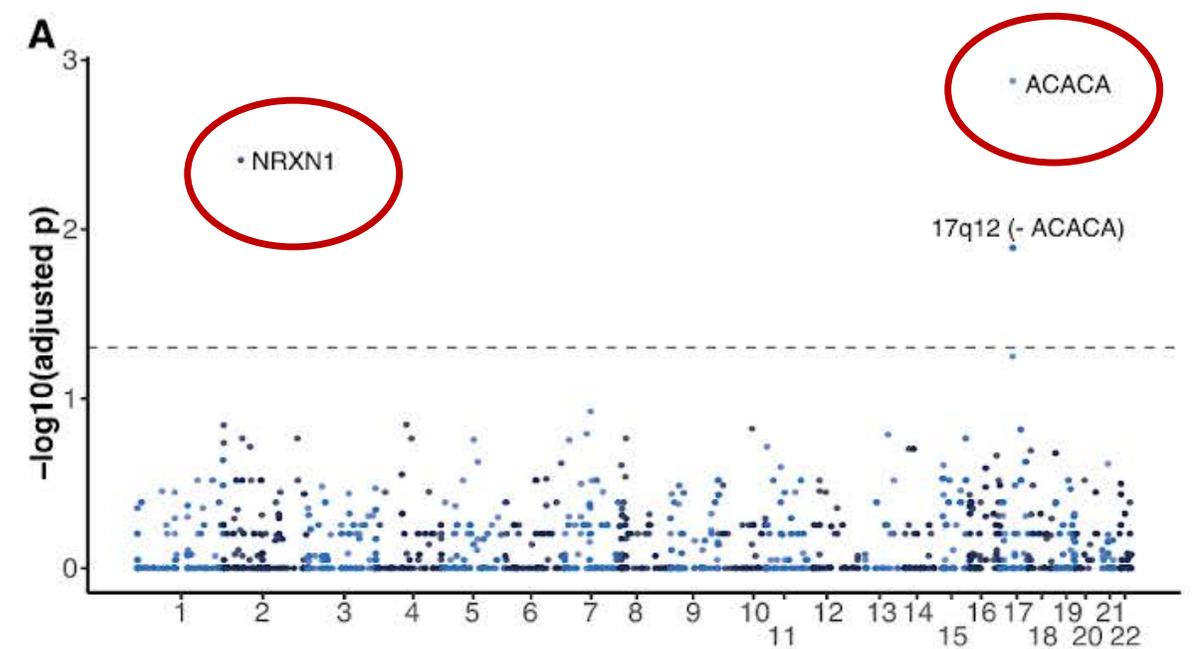
# Increased CNV burden in TS in previously identified neurodevelopmental genes



- Fu et al. : 664 neurodevelopmental genes implicated at  $Q < 0.1$  in a large exome seq study
- Kendall et al. : manually curated list of 53 CNVs associated with neurodev phenotype

# Association test results

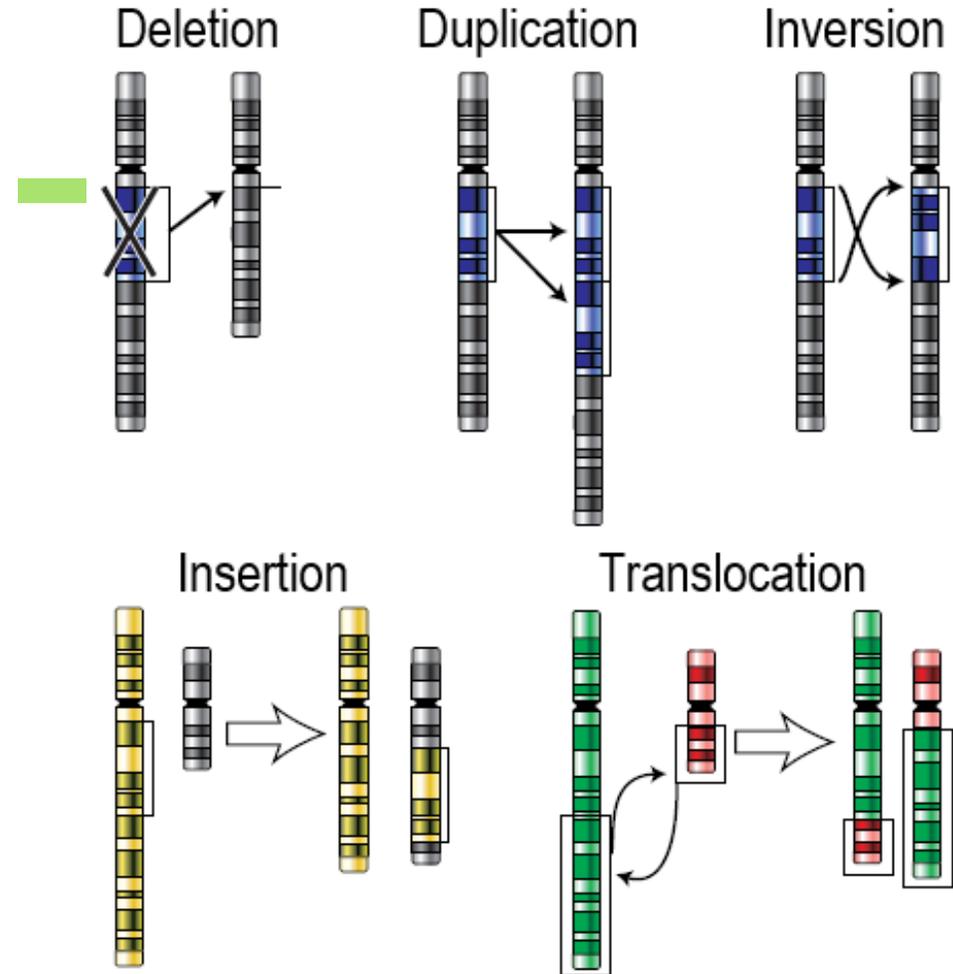
- Bring in count-based data from datasets for which we don't have access to individual data
- 524 cases, 2315 controls
  - NORDiC
  - EGOS
  - BioVU
- New sample size: 5726 cases and 10,982 controls
- Genome-wide significant:
  - NRXN1 deletions
    - Replication of Huang et al. 2017 result
  - 17q12 duplications
    - Novel result



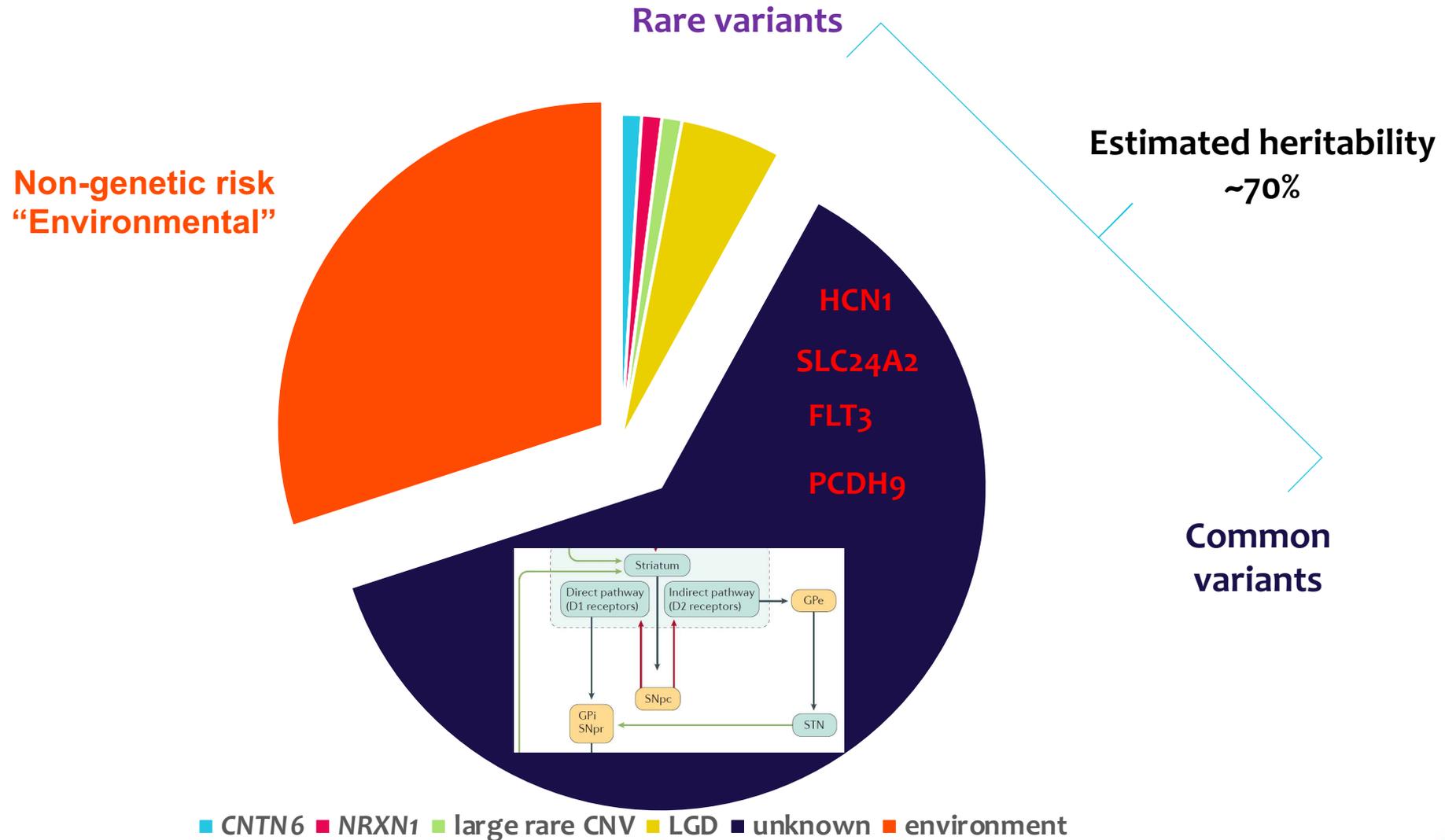
# ACACA gene

## Chromosome 17q12

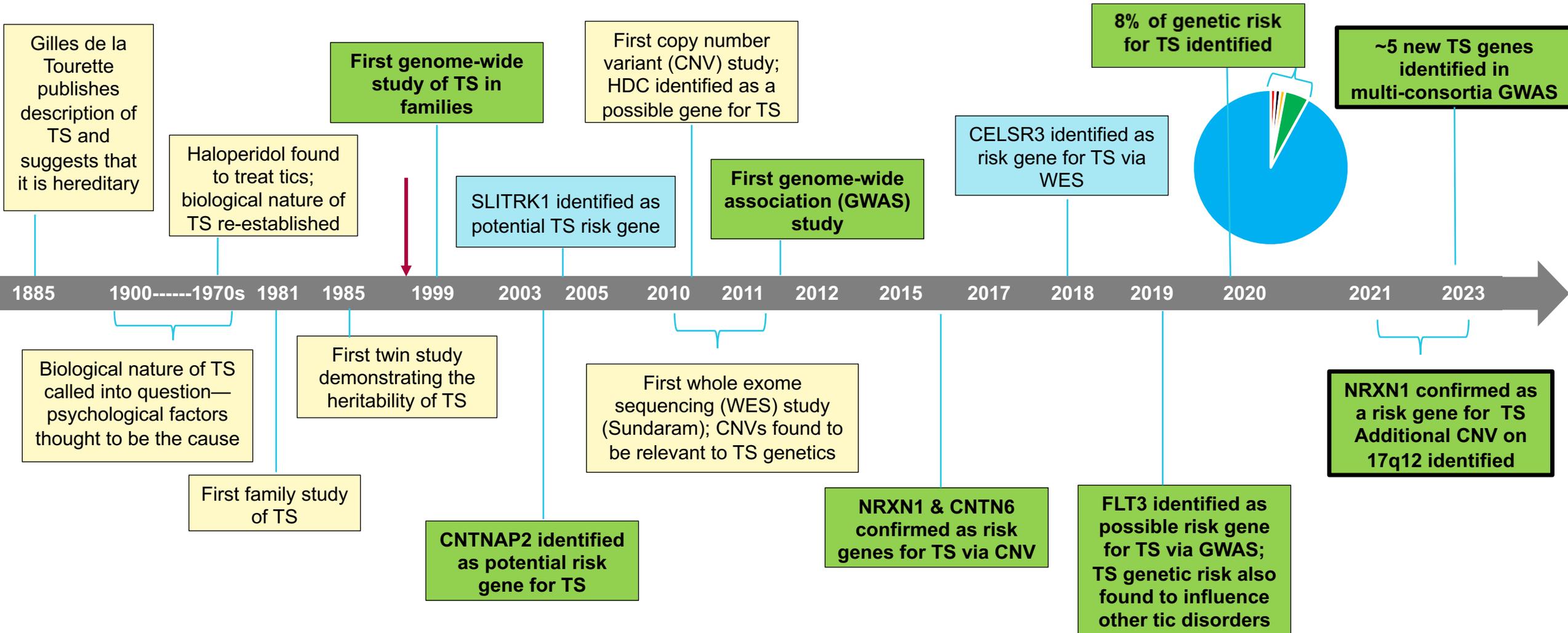
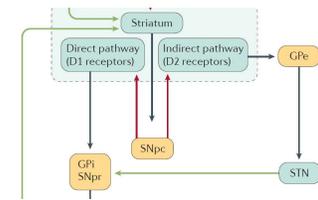
- acetyl-Co-A carboxylase alpha
- expressed in brain
- Involved in fatty acid synthesis
- Implicated in multiple studies of BMI
- Has been implicated in one study of NDD



# TS Genetic architecture is becoming known



# Progress in understanding the causes of TS



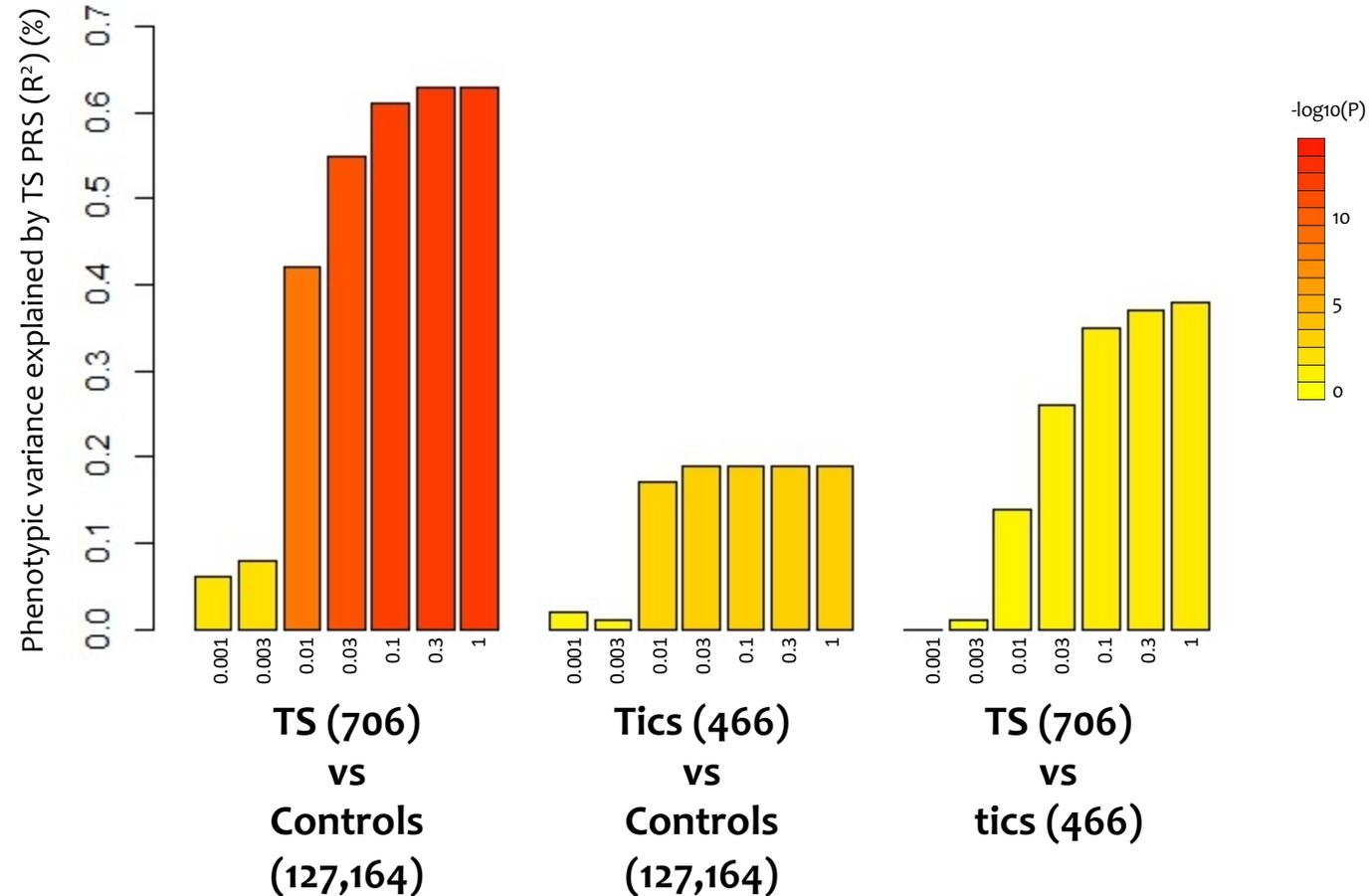


# Spectrum of Developmental Tic Disorders

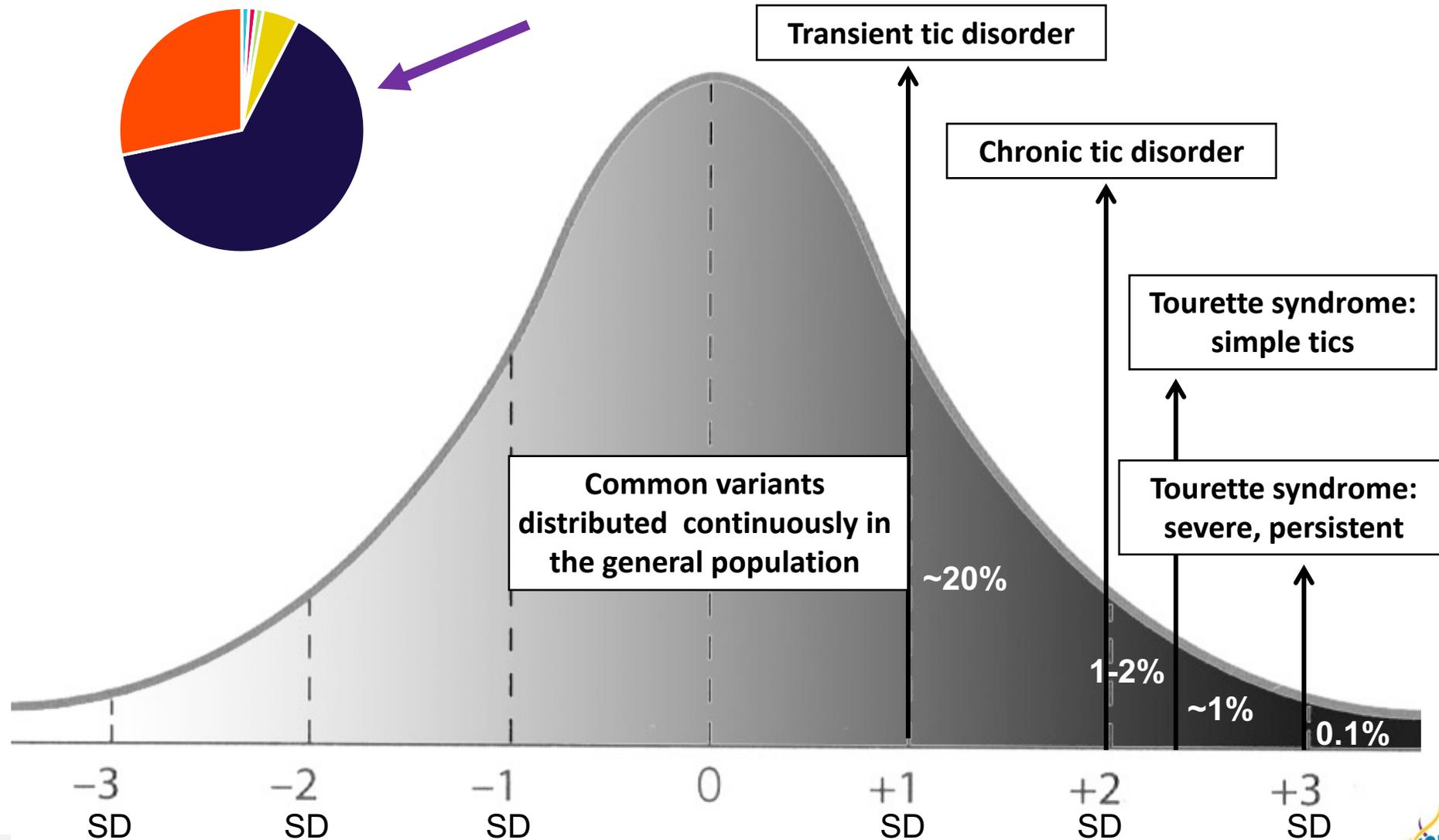
- Transient Tic Disorder (TTD)
    - Single or multiple tics lasting > 4 weeks, < 1 year
    - Now “Provisional Tic Disorder” in DSM-5
- 
- Chronic (Persistent) Tic Disorder (CTD/PTD)
    - Multiple motor OR vocal tics lasting > 1 year
  - Gilles de la Tourette Syndrome (GTS/TS)
    - Multiple motor AND one vocal tic lasting > 1 year
    - Onset before age 18
    - DSM-5 removed “no 3 month period w/o tics”

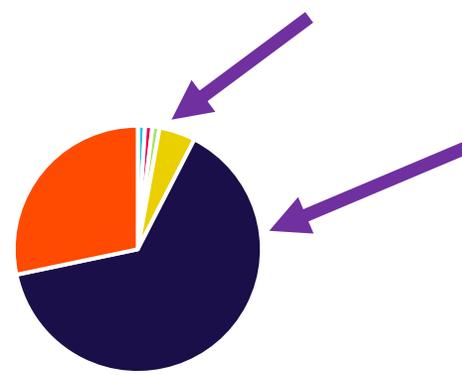
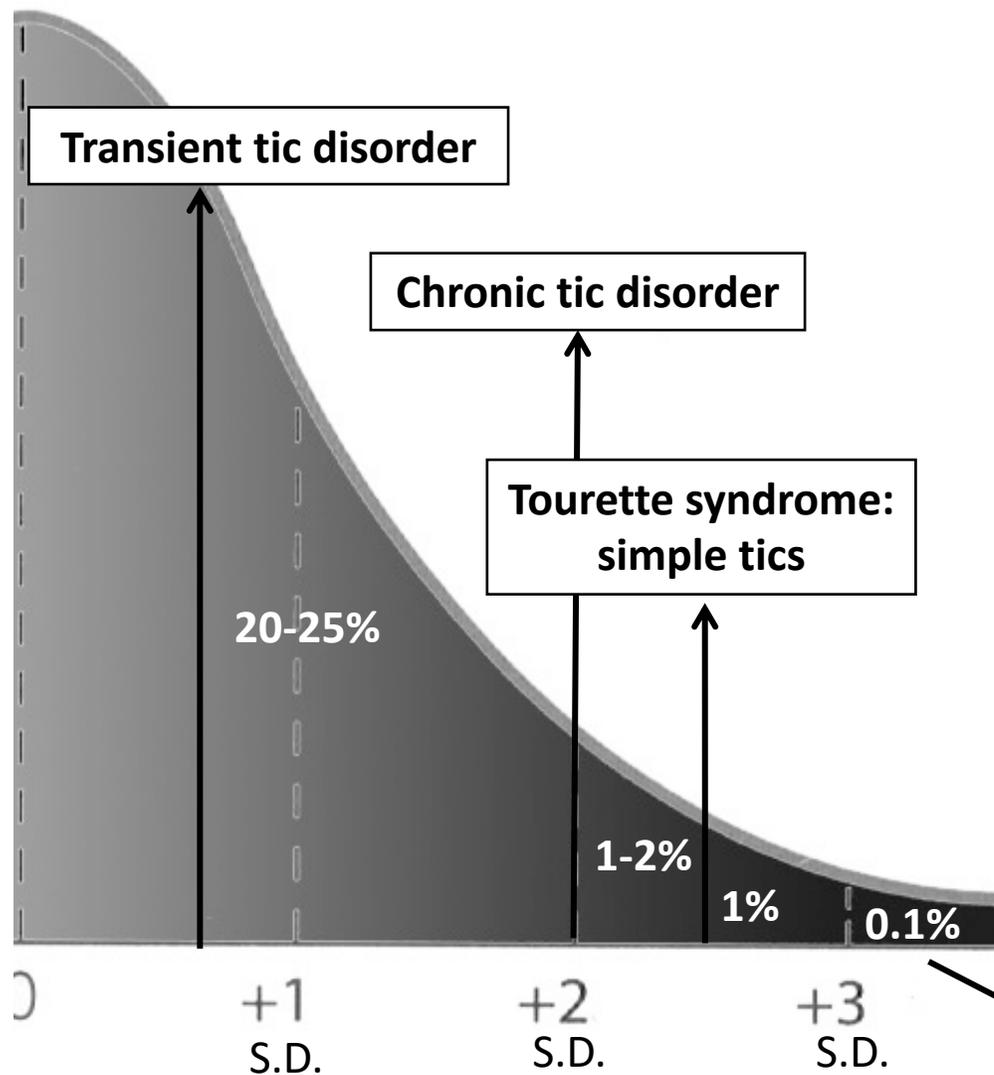
Continuous biological spectrum

# TS genetic risk score analysis confirms shared genetic susceptibility between TS and tic spectrum disorders



# Genetic model for heritability of developmental tic disorders





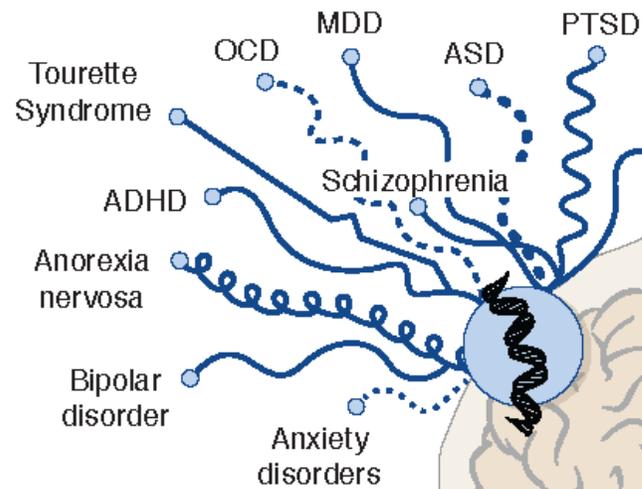
### Severe TS:

- High TS polygenic burden >99.9%ile
- Moderate polygenic burden plus large, rare CNV (e.g., *CNTN6*)
- Lower polygenic burden plus non-genetic risk factor(s)
- Combination of all 3 above

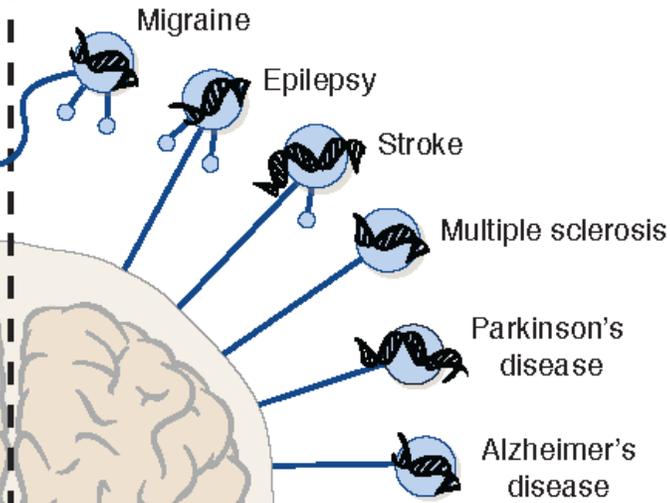
Tourette syndrome:  
severe, persistent



## Psychiatric Disorders



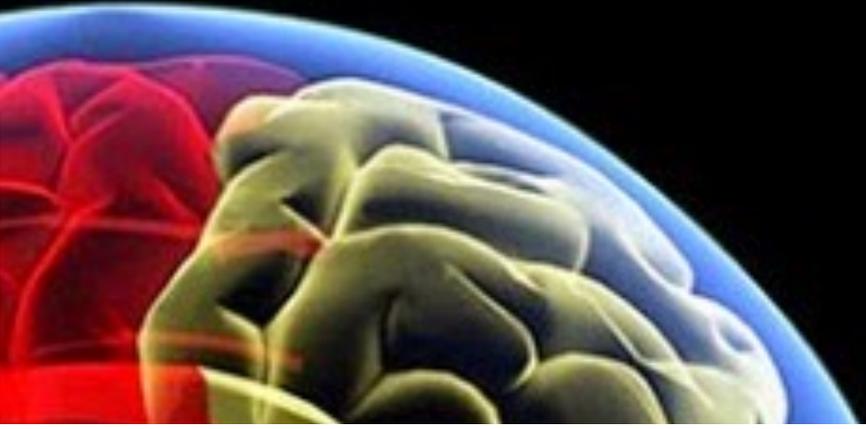
## Neurological Disorders



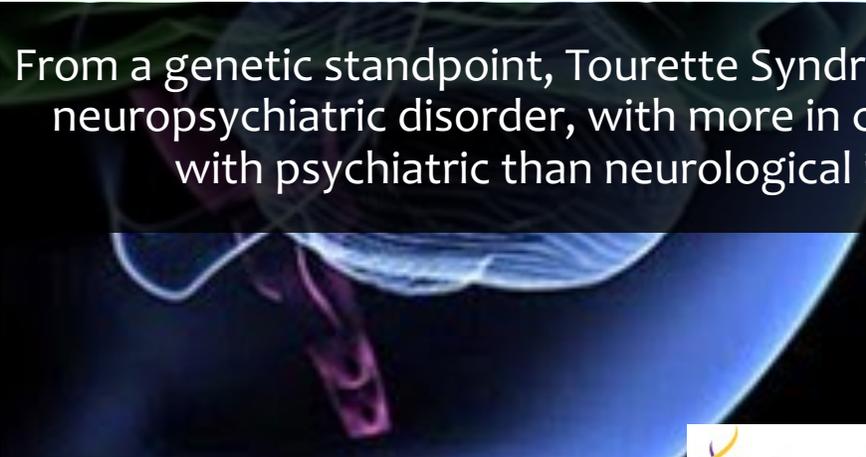
Substantial sharing of common variant risk

Negligible sharing of common variant risk

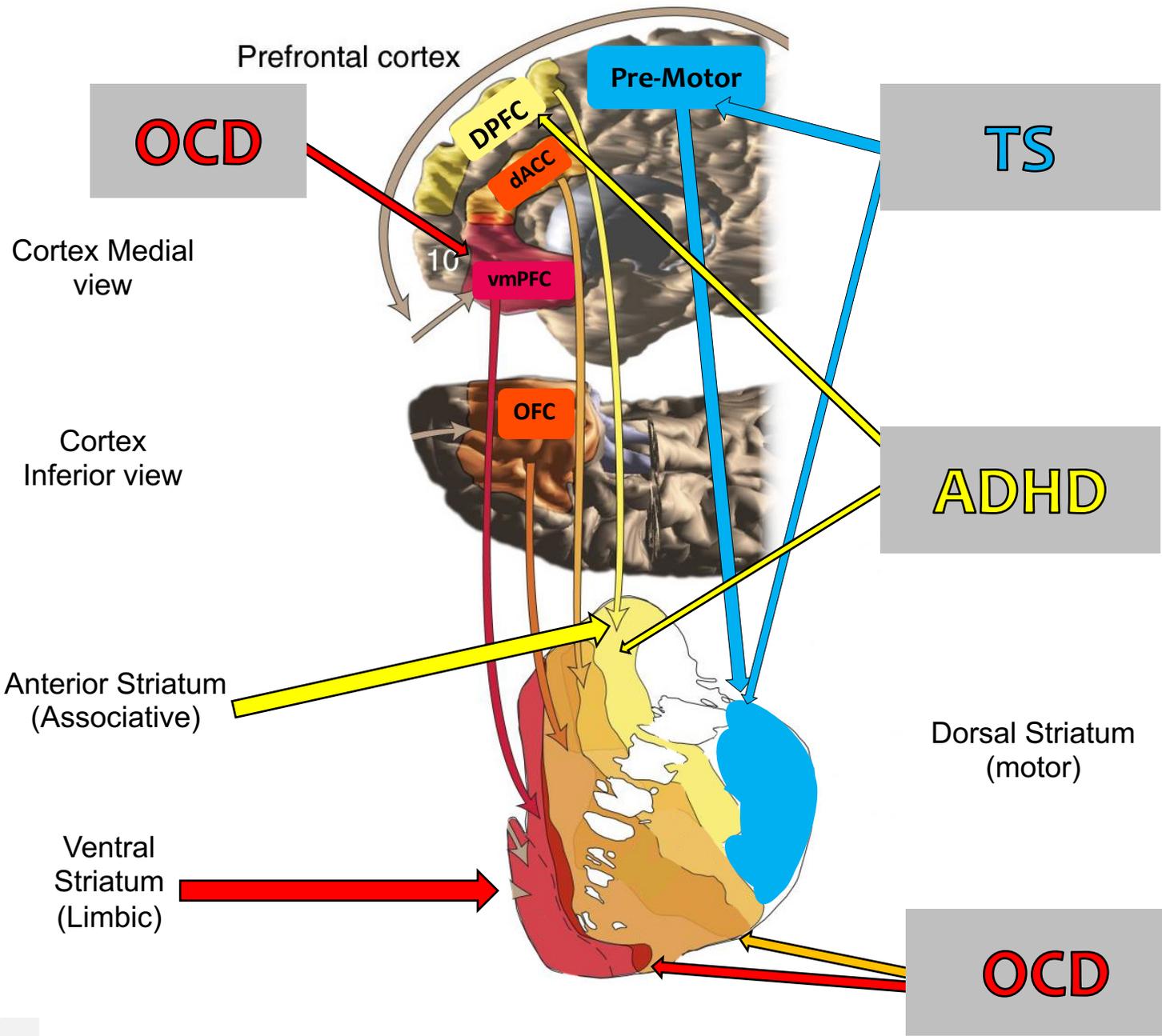
*Anttila V. et al. Analysis of Shared Heritability in Common Disorders of the Brain. Science.*



# Genetics helps shape how we think about TS biologically and phenotypically

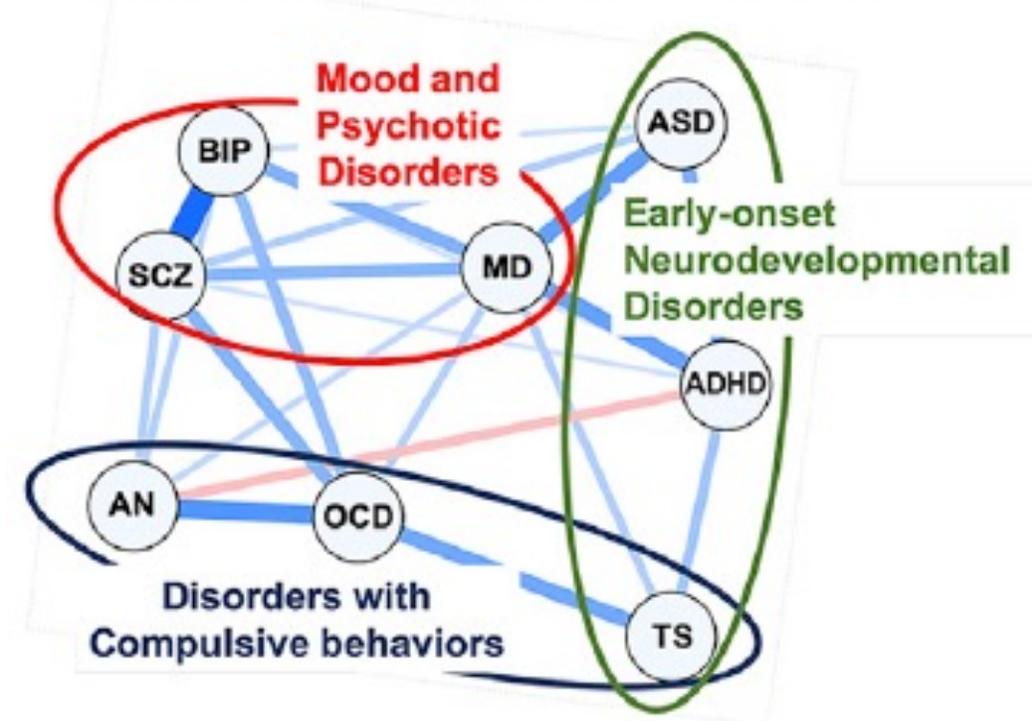


From a genetic standpoint, Tourette Syndrome is a neuropsychiatric disorder, with more in common with psychiatric than neurological illnesses



Modified from Haber & Knutson, Neuropsychopharmacology, 2010

### I. Substantial Genetic Correlation and Clustering



Lee, et al, & Cross Disorders Group of the PGC, Cell, 2019

# Neurocircuitry and genetics tell the same story

- Psychiatric illnesses are disorders of circuitry rather than brain regions, and there is substantial overlap between them



# Acknowledgments



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  - NIH: R01 NS105746
  - Tourette Association of America
- **Thanks to all the TS patients and families for their participation in TS research**

