

Evaluation of the shared genetic component between giant cell arteritis and biomarkers of biological aging

Introduction

Giant cell arteritis (GCA)

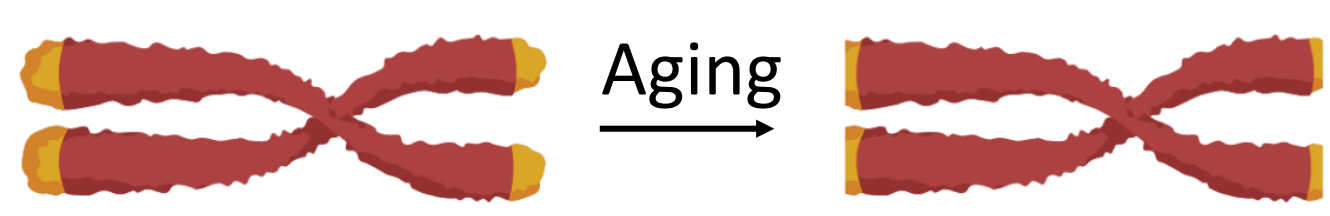
- Immune-mediated inflammatory disease which affects blood vessels
- **Complex etiology:** interplay between genetic and environmental factors

Aging is the strongest risk factor for GCA

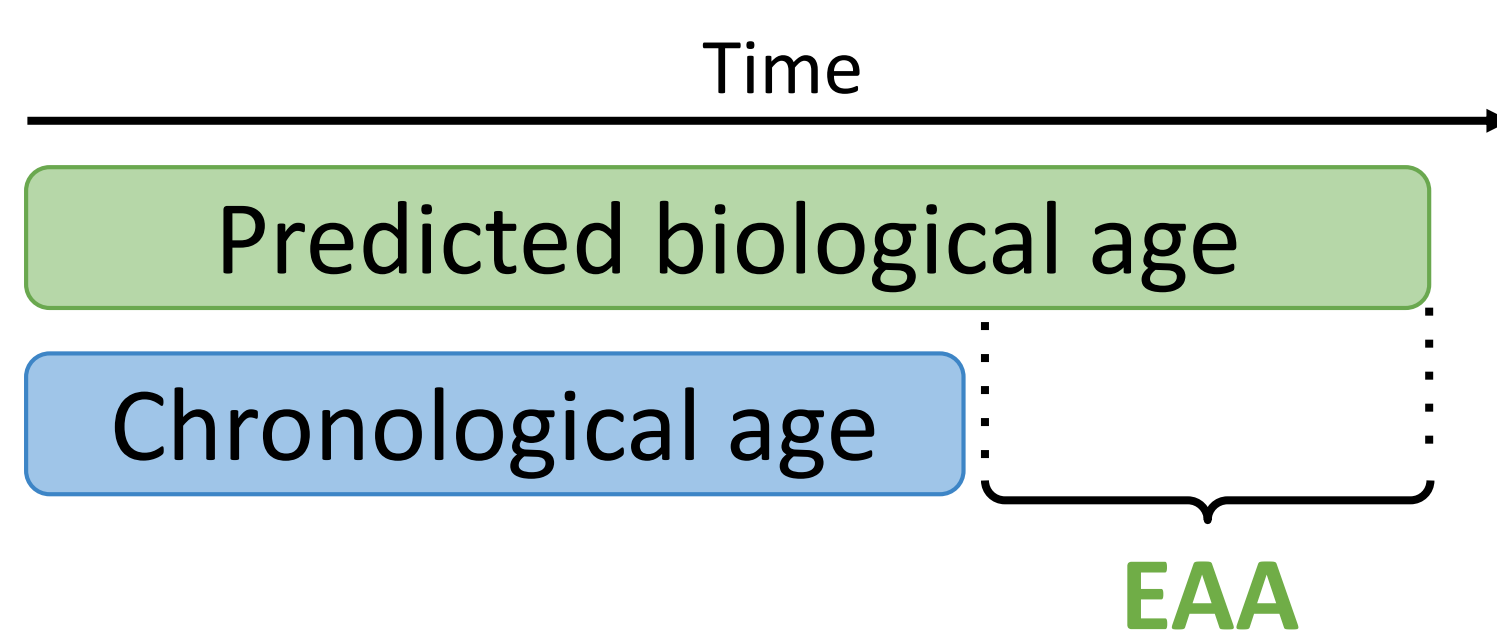
Biomarkers of biological aging

Leukocyte telomere length (LTL) and epigenetic age acceleration (EAA) are two markers of biological aging with a **complex etiology**

LTL



EAA



Biological age can be predicted by epigenetic clocks, based on DNA methylation alterations

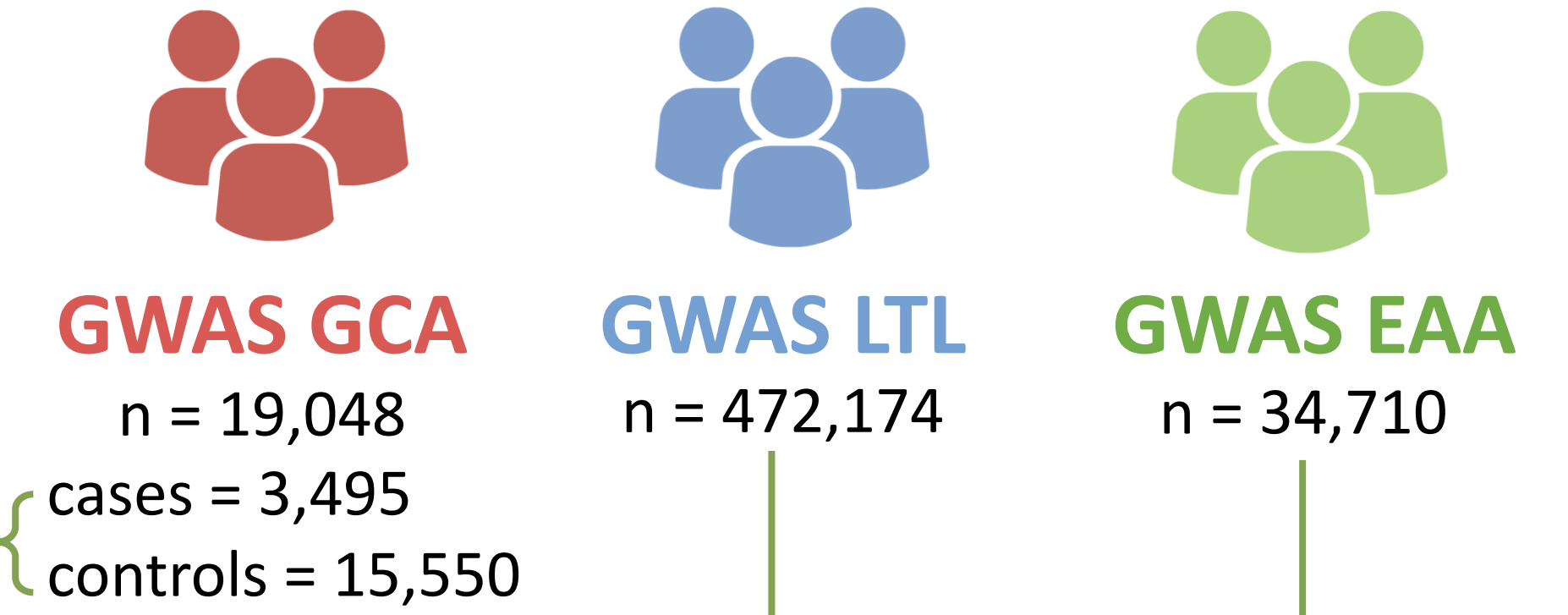
Hypothesis

Considering that advanced age represents a key factor for the development of GCA, we hypothesize that genetic factors influencing aging could also play a role in the development of this vasculitis

Objective

Explore the role of aging in GCA by analysing the shared genetic component between GCA and both markers of biological aging through a **cross-trait meta-analysis**

Materials & methods



Cross-trait meta-analysis using ASSET (R package)

6.641.839 genetic variants analyzed

Selection of significant SNPs

- Overall association: $p < 5 \cdot 10^{-8}$
- Each subset association: $p < 0.05$
- Associated in GCA GWAS: $p < 0.01$

Selection of independent SNPs

$r^2 < 0.1$ & $D' < 0.5$

Gene prioritization by Open Targets

Schematic overview of the experimental design of the study

Results & discussion

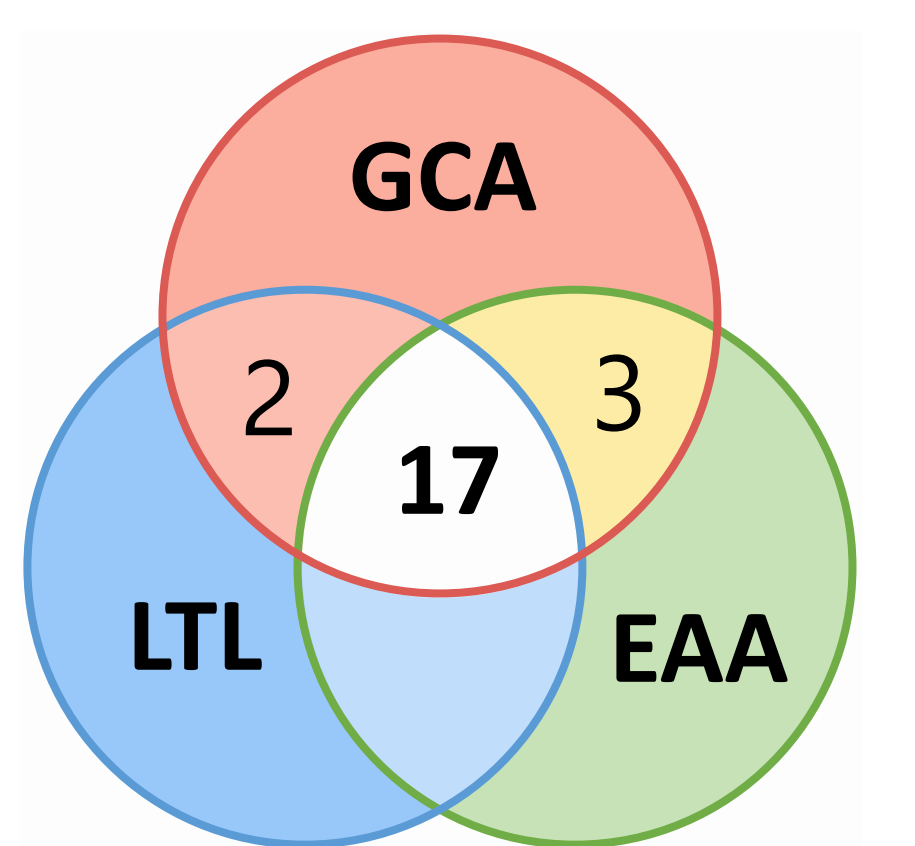
1

22 independent genetic variants were shared by GCA and at least one marker of aging, with 17 variants common to all three, indicating a **significant genetic overlap between GCA and the aging process**

Table 1. Results of the cross-trait meta-analysis and gene prioritization

Region	Best subset meta	Best p-value meta	Prioritized gene	Open Targets
1p13.2	GCA TEL EAA	3,97E-14	<i>PTPN22</i> <i>DCLRE1B</i>	
2p14	TEL EAA GCA	1,29E-08	<i>SPRED2</i>	
3q25.33	EAA GCA TEL	4,23E-16	<i>SMC4</i> <i>POLN</i>	
4p16.3	GCA TEL EAA	1,78E-14	<i>C4orf48</i> <i>NFKB1</i>	
4q24	GCA EAA	7,03E-10	<i>MANBA</i> <i>CLPTM1L</i>	
5p15.33	TEL EAA GCA	1,81E-30	<i>TERT</i>	
5q31.1	EAA GCA TEL	5,39E-09	<i>JADE2</i>	
5q31.1	GCA EAA TEL	2,47E-09	<i>MACROH2A1</i> <i>TIFAB</i>	
6q21	GCA TEL EAA	1,26E-10	<i>CD164</i>	
6q26	GCA EAA	2,43E-08	<i>PLG</i>	
7q32.1	TEL EAA GCA	1,16E-09	<i>IRF5</i>	
8q12.1	TEL EAA GCA	4,41E-09	<i>CHCHD7</i>	
11q12.1	GCA EAA	1,20E-08	<i>SLC43A3</i> <i>PRG2</i> <i>GPR84</i> <i>NFE2</i>	
12q13.13	GCA EAA TEL	1,08E-08	<i>SH2B3</i>	
12q24.12	GCA TEL EAA	3,92E-17	<i>SH2B3</i>	
16p13.3	GCA EAA TEL	9,98E-09	<i>TRAP1</i>	
16q12.1	TEL GCA EAA	2,68E-11	<i>HEATR3</i>	
16q23.1	GCA TEL	2,82E-14	<i>GLG1</i>	
17p13.3	GCA TEL EAA	4,03E-09	<i>SRR</i>	
18p11.32	GCA TEL EAA	4,61E-10	<i>ENOSF1</i>	
18q12.3	GCA TEL EAA	3,41E-17	<i>SETBP1</i>	
18q21.2	GCA TEL	2,71E-17	<i>POLI</i>	

"|" separating traits in opposite directions



Venn diagram illustrating the number of shared signals between GCA, LTL and/or EAA

2

Genetic variants were prioritized to genes involved in **relevant pathways**

Immune response

PTPN22
NFKB1
IRF5

Clonal hematopoiesis

SETBP1
SH2B3
SPRED2

Telomere maintenance

DCLRE1B
TERT

Angiogenesis

PLG

3

Most of these variants act as eQTLs, **regulating gene expression levels**

Table 2. Functional annotation of shared genetic variants

	Blood eQTL	Immune cell eQTL	Vascular eQTL	Other tissue eQTL	pQTL	sQTL	CI
1p13.2_PTPN22							
1p13.2_DCLRE1B							
2p14_SPRED2							
3q25.33_SMC4							
4p16.3_POLN							
4p16.3_C4orf48							
4q24_NFKB1							
4q24_MANBA							
5p15.33_CLPTM1L							
5p15.33_TERT							
5q31.1_JADE2							
5q31.1_MACROH2A1							
5q31.1_TIFAB							
6q21_CD164							
6q26_PLG							
7q32.1_IRF5							
8q12.1_CHCHD7							
11q12.1_SLC43A3							
11q12.1_PRG2							
12q13.13_GPR84							
12q13.13_NFE2							
12q24.12_SH2B3							
16p13.3_TRAP1							
16q12.1_HEATR3							
16q23.1_GLG1							
17p13.3_SRR							
18p11.32_ENOSF1							
18q12.3_SETBP1							
18q21.2_POLI							

Funcional annotation data obtained from OpenTargets. eQTL, expression quantitative trait loci; pQTL, protein quantitative trait loci; sQTLs, splicing quantitative trait loci; CI, chromatin interactions.

Conclusions

This is the first study identifying a common genetic component between GCA and markers of biological aging. Our finding represents a breakthrough in the understanding of the role of aging in the pathogenesis of this vasculitis.

Funding

References

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