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Axelle Durand, Cheryl A. Winkler, Nicolas Vince, Venceslas Douillard, Estelle Geffard, Derek K. Ng, Pierre-Antoine Gourraud, Bradley Warady, Susan L. Furth, Jeffrey B. Kopp, et al.

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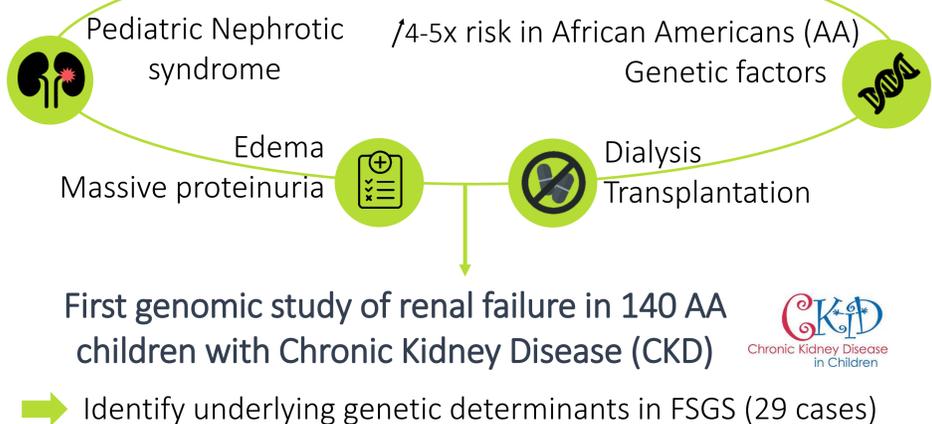
# Statistical inference of immunogenetic parameters reveals *HLA-DRB1\*11:01* allele associated with pediatric FSGS

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## FOCAL SEGMENTAL GLOMERULOSCLEROSIS

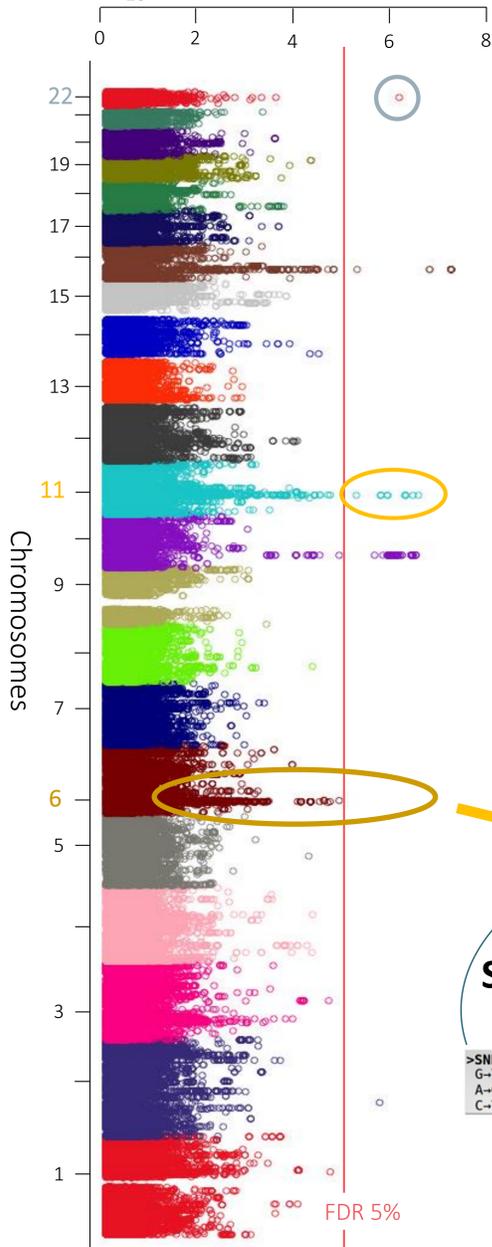
### FSGS



## METHODS

- ✓ **Genotyping arrays:** 254,000 SNPs on illumina<sup>®</sup> Exome Chips
- ✓ **Quality Control and HRC imputation:** 934,000 common SNPs with Minor Allele Frequency  $\geq 0.3\%$  for statistical analysis
- ✓ **Association analysis with FSGS phenotype** using regression model
- ✓ **Gene-set enrichment analysis (GSEA)** using GSA-SNP2
- ✓ **Investigation of HLA:**
  - Imputation of 108 HLA alleles using HIBAG<sup>1</sup>
  - Inference of immunogenetic parameters (e.g. HLA 5-gene haplotypes, amino-acids) using Easy-HLA<sup>2</sup>

$-\log_{10}$  (FSGS associated p-value)

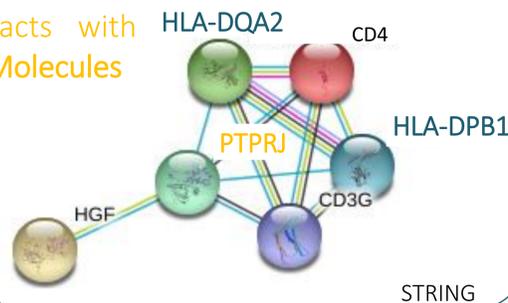


### APOL1 - G1

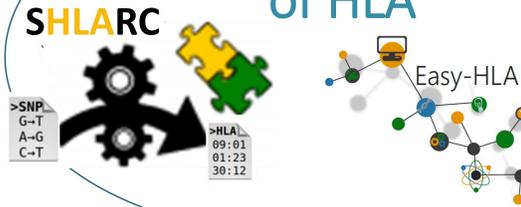
- ✓ Confirmation of previously major described signal in adult FSGS and CKD
- ✓ Validation of our analysis and cohort

### PTPRJ

- 5 significant SNPs
- PTPRJ interacts with class II HLA Molecules

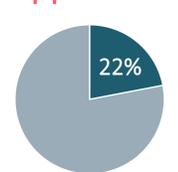
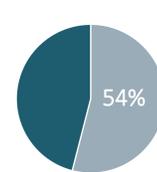
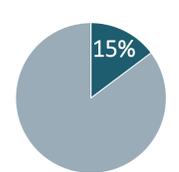
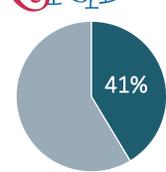


### Further investigation of HLA



rs73885319

Kopp2011<sup>3</sup>



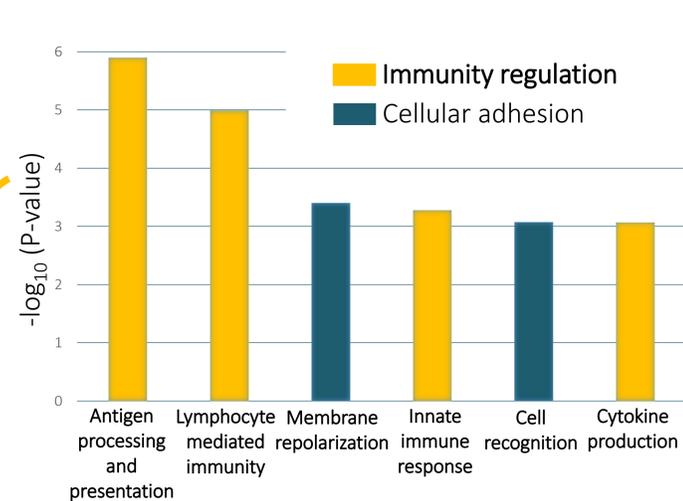
P = 10<sup>-7</sup>

OR = 25.4

P = 10<sup>-8</sup>

OR = 17.4

### GSEA with Gene Ontology



Importance of antigen processing and presentation pathways in pediatric FSGS

### HLA ASSOCIATION WITH FSGS

- 108 HLA alleles (=80 Class I alleles + 28 Class II alleles)
- 714 HLA amino acids and 17 HLA 5-gene haplotypes

	P-value	OR
<i>HLA-DRB1*11:01</i> N = 13/29 FSGS kids	5.6x10 <sup>-3</sup>	10.5
67F & 58E <i>HLA-DRB1</i> N = 9/29 FSGS kids	5.0x10 <sup>-3</sup>	4.5

### CONCLUSION

- ✓ Identification of 5 statistically significant and biologically-relevant loci with pediatric FSGS
- ✓ First demonstration of a role for class II HLA in FSGS
- ✓ Further genetic and functional analyses focusing on these loci will enhance our understanding of molecular pathogenicity mechanisms underlying pediatric FSGS.

<sup>1</sup> SHLARC, JOBIM 2019, Poster session Wednesday July 3<sup>rd</sup>, Poster n°41, Douillard et al.

<sup>2</sup> EasyMatch-R, JOBIM 2019, Demo session Wednesday July 3<sup>rd</sup>, Demo n°1, Geffard et al.

<sup>3</sup> Kopp. JB et al, APOL1 genetics variant in FSGS and HIV-associated Nephropathy. JASN (2011) 22, 2129-37.

