Mapping the genetic and environmental aetiology of autistic traits in Sweden and the UK

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Abstract

Autistic traits are influenced by both genetic and environmental factors, and are known to vary geographically in prevalence. But to what extent does their aetiology also vary from place to place? We applied a novel spatial approach to data from two large twin studies, the Child and Adolescent Twin Study in Sweden (CATSS) and the Twins Early Development Study (TEDS) in the UK, to explore how the influence of nature and nurture on autistic traits varies from place to place. We present maps of gene- and environment- by geography interactions that suggest, for example, higher heritability and lower non-shared environmental influence in more densely populated areas. We hope this systematic approach to aetiological interactions will inspire research to identify previously unknown environmental influences on the aetiology of autistic traits.

Background

Autism spectrum disorder (ASD) is a neurodevelopmental condition that manifests in childhood. ASD is generally characterised by persistent difficulties with social communication and repetitive behaviours. Reported prevalence of ASD varies, but in developed countries the prevalence is estimated to be between 1-1.5% [1–4] and this recorded prevalence has increased over the past few decades [1,3,4]. Factors such as diagnostic criteria, age, time of study and location of study may all contribute to this heterogeneity in prevalence estimates. ASD has a significant impact on child development, often including language difficulties and other co-occurring conditions which may persist into adulthood [5].

The aetiology of ASD reflects both genetic and environmental influences. Twin studies suggest that genetic differences between people explain around 80% of the population variance for ASD [6]. Most studies suggest that the remaining variance is explained by variation in the non-shared environment. That is, environmental influences that do not contribute to similarity within families. Similarly, a recent study of over 3.5 million twin and sibling pairs in Sweden found that 83% of the variance is explained by genetic differences and 17% by non-shared environmental influences [7]. Another study across 5 different countries (Sweden, Finland, Denmark, Western Australia and Israel) estimated heritability for ASD to be around 80%, using data from whole populations, although there was variation between countries [8].

ASD is known to vary in prevalence across geographical regions. For example, spatial analyses of ASD have revealed areas of increased prevalence in Salt Lake

60 County in Utah [9], in northern Taiwan [10] and in areas of California [11,12]. ASD also
61 appears more common in those born in New England compared to those born in
62 the south east of the United States (US) [13]. Similarly, a study of Greater Glasgow
63 in Scotland identified variation in prevalence across the city [14]. Several studies
64 have also suggested differences in prevalence between urban and rural areas,
65 where living in or growing up in an urban environment is associated with
66 greater risk of ASD compared to rural environments [10,15–18]. Possible reasons for
67 geographical variation in prevalence of ASD across these areas include regional
68 diagnostic bias, differences in the access to health services or diagnostic
69 resources, different levels of parental awareness, air pollution exposure during
70 pregnancy, green space in an area and local trends in socioeconomic status
71 (SES).

72 If prevalence of autistic traits varies from place to place, is the same true of the
73 aetiology? For example, does variation in the environment explain variation in
74 autistic traits in some areas more than others? Similarly, does the environment
75 in some areas draw out genetic differences between children in their propensity
76 for developing autistic traits? We previously developed a spatial approach to
77 twin model-fitting called spACE that showed genetic and environmental
78 influences vary spatially within a country in response to geographically-
79 distributed environments [19]. This approach has the potential to highlight gene-
80 environment (G×E) and environment-environment (E×E) interactions for
81 outcomes such as ASD traits. G×E and E×E represent variation in the aetiological
82 genetic influences on a trait depending on environmental exposure. For example,
83 genetic risk of a mental health disorder may be drawn out by a stressful

environment, genetic risk of asthma may be apparent only in polluted environments, or genetic risk of hay fever may only reveal itself in pollen-rich areas. The spACE approach allows us to investigate this, mapping geographical patterns of nature and nurture without requiring the measurement of specific genetic variants or specific environmental characteristics. This systematic geographical approach may facilitate the discovery of novel specific genetic and environmental influences.

Here we apply the spACE approach to data on autistic traits in Sweden and the UK. Autistic traits and diagnostic categories of ASD show substantial aetiological overlap [20,21], with genetic correlations from bivariate twin models of 0.52-0.89 and SNP based genetic correlations of 0.27-0.30. The heritability of ASD traits does not change as a function of severity [22–24], and genetic links have been identified between extreme and sub-threshold variation in ASD [22,24], so to maximise power we have focussed on trait measures rather than diagnoses.

It seems likely that environments previously identified as important for the development of autistic traits will also influence aetiology. For example, given previous research on the social stress of urban compared to rural upbringing [25], we hypothesise that urban-rural differences will be apparent in the aetiology of autistic traits. However, more importantly, we hope that by systematically mapping geographical differences in aetiology we will facilitate identification of new environments and shed light on the mechanisms by which they act.

Methods

The Swedish Twin Registry and CATSS

The Swedish twin registry, established in the 1950s, currently includes over 194,000 twins [26]. Phenotypic information on the twins comes from a variety of sources such as medical registers and questionnaires and is regularly updated. Several sub-studies of the registry have been established, including the longitudinal Child and Adolescent Twin Study in Sweden (CATSS) [27]. CATSS was launched in 2004 to investigate childhood-onset neurodevelopmental problems such as ADHD and ASD in childhood and adolescence, for all twins turning 9 or 12 years since 2004. Parents of all Swedish twins aged 9 and 12 years old were asked to participate in a telephone interview to collect information on various health-related issues. By the time data on autistic traits were obtained in 2013, 8,610 parents had responded to this request, accounting for 17,220 twins. The CATSS-9/12 study obtained ethical approval from the Karolinska Institute Ethical Review Board: Dnr 03-672 and 2010/507-31/1, CATSS-9 – clinical 2010/1099-31/3 CATSS-15 Dnr: 2009/1599-32/5, CATSS-15/DOGSS Dnr: 03-672 and 2010/1356/31/1, and CATSS-18 Dnr: 2010/1410/31/1.

For ASD traits, 16,677 participants had data available (including 8,307 complete pairs and 63 incomplete pairs of twins). Interviews were carried out when the twins were around the age of 9 or 12 years and 51% were male.

CATSS measures of autistic traits

The Autism-Tics, ADHD and other Comorbidities (A-TAC) inventory, based on the Diagnostic and Statistical Manual of Mental Disorders (DSM)-IV criteria, was used in the

telephone interview with parents to collect information on a range of neurodevelopmental problems. This inventory has previously been validated in both clinically diagnosed children and the general population [28–32]. The inventory includes 17 items that assess ASD symptoms, where respondents can answer 'yes/1', 'yes, to some extent/0.5', and 'no/0'. Following the standard approach, we created a symptom score for each individual by summing these item scores. Further details can be found in previous publications [32].

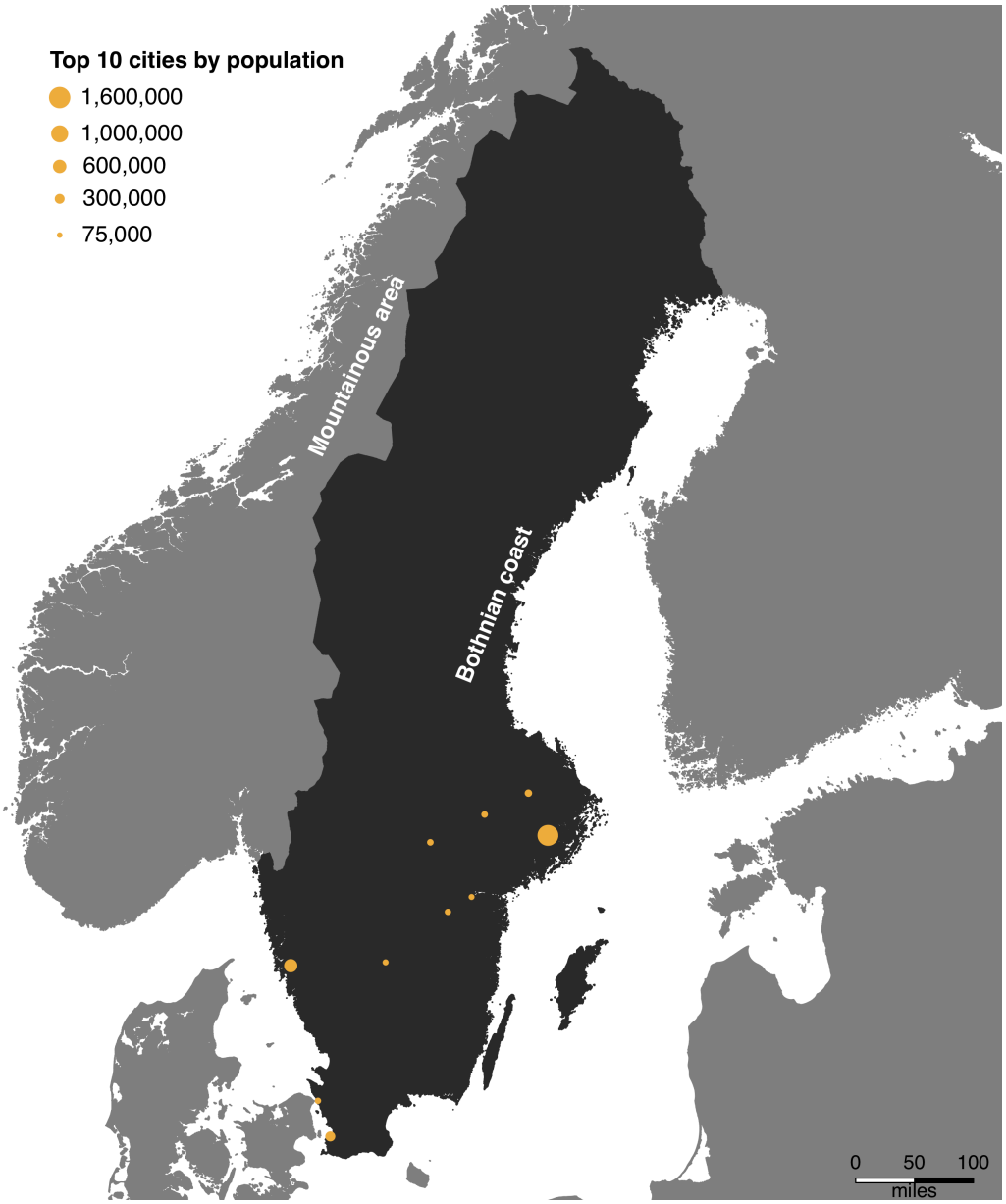
In our sample the median score was 0.00 (interquartile range [IQR]=1.00) for autistic symptoms, where, in previous validation studies a low and high cut-off of 4.5 and 8.5 for ASD have been established for broad screening and for use as a clinical proxy, respectively. This indicates that most people, in this general population sample, score well below these cut-offs. As expected, the distribution of this symptom score was zero-skewed, as shown in the histogram in **supplementary figure 1**.

CATSS location data

To conduct the spACE analysis, we assigned a geographical location to each family. In CATSS we matched each twin pair to a Small Areas for Market Statistics (SAMS) location, for the most recent location data we had available up to 2009, using data from Statistics Sweden (http://www.scb.se/en/) and assigned coordinates based on the centroid of the SAMS location. There are approximately 9,200 SAMS in Sweden, subdivisions of 290 municipalities. The average population within each SAMS is 1,000 people and therefore the area covered by each SAMS varies by population density.

To provide context for the results for Sweden, it is useful to understand a little about its geography. **Figure 1** shows a map of Sweden and some general indicators of the country's geography; the **supplementary materials** contain a detailed description. In summary, Sweden is split into a more rural north and central area, known as the lowlands and the more populated areas in a belt from Gothenburg in the west to Stockholm in the east and the very south near Malmö. Much of Sweden is covered by forest and lakes. The capital, Stockholm, is in the east with a mix of tourist-centred and residential areas and a number of islands. Gothenburg, the second largest city with a port, also has varied areas like Stockholm and an archipelago. Further inland is rural Värmland. South-west Sweden is a coastal and lowland area and is the third most populated area in Sweden. The main city in this area is industrialised and multicultural Malmö. South-east Sweden is heavily forested with some large lakes and a number of large towns. Sweden's two largest islands are also found here, Öland and Gotland, which are popular summer destinations, due to their warmer climate. They both have fairly rural landscapes with small towns and villages. The Bothnian coast is the most populated area in the north, with some large towns along the coastline. Central Sweden is a sparsely populated, rural, lowland area covered in forests, with numerous lakes and mountains along the Norwegian border. Further north is Swedish Lapland, a very remote area with a mountainous, rural landscape.

Figure 1. Map of Sweden with top 10 cities by population



Sweden is shown in dark grey with the surrounding countries in a lighter shade of grey. The top 10 most populated cities are shown on the map with orange circles, the area of which reflects the population of the city.

172 *The Twins Early Development Study*

173 The Twins Early Development Study (TEDS) contacted parents of twins born in England
174 and Wales between January 1994 and December 1996 [33]. 16,810 pairs of twins were
175 initially recruited, and currently there are over 10,000 twin pairs still enrolled in TEDS.
176 The participants are demographically representative of the UK population of a similar
177 age, with the majority identifying themselves as white British and with English as their
178 first language. TEDS has collected wide-ranging data on cognitive and behavioural
179 development, using approaches that include questionnaire booklets, telephone testing
180 and web-based tests. The twins, their parents and teachers have all participated in data
181 collection. Ethical approval for TEDS research is provided by the Institute of Psychiatry,
182 Psychology and Neuroscience Ethics Committee, King's College London.

183 Full phenotypic data for autistic traits were available for 11,594 TEDS participants
184 (including 5,796 complete pairs and 62 incomplete pairs of twins). For these twins the
185 mean age was 11.30 (SD=0.72) and 48% were male.

186 *TEDS measures of autistic traits*

187 Parents in TEDS completed the Childhood Autism Spectrum Test (CAST) when the twins
188 were age 12 years. The CAST consists of 30 items, scored 1 for yes or 0 for no [34]. For
189 participants included in our analyses, the median score for ASD symptoms was 4.0
190 (IQR=4.84). The CAST score considered indicative of ASD is 15.

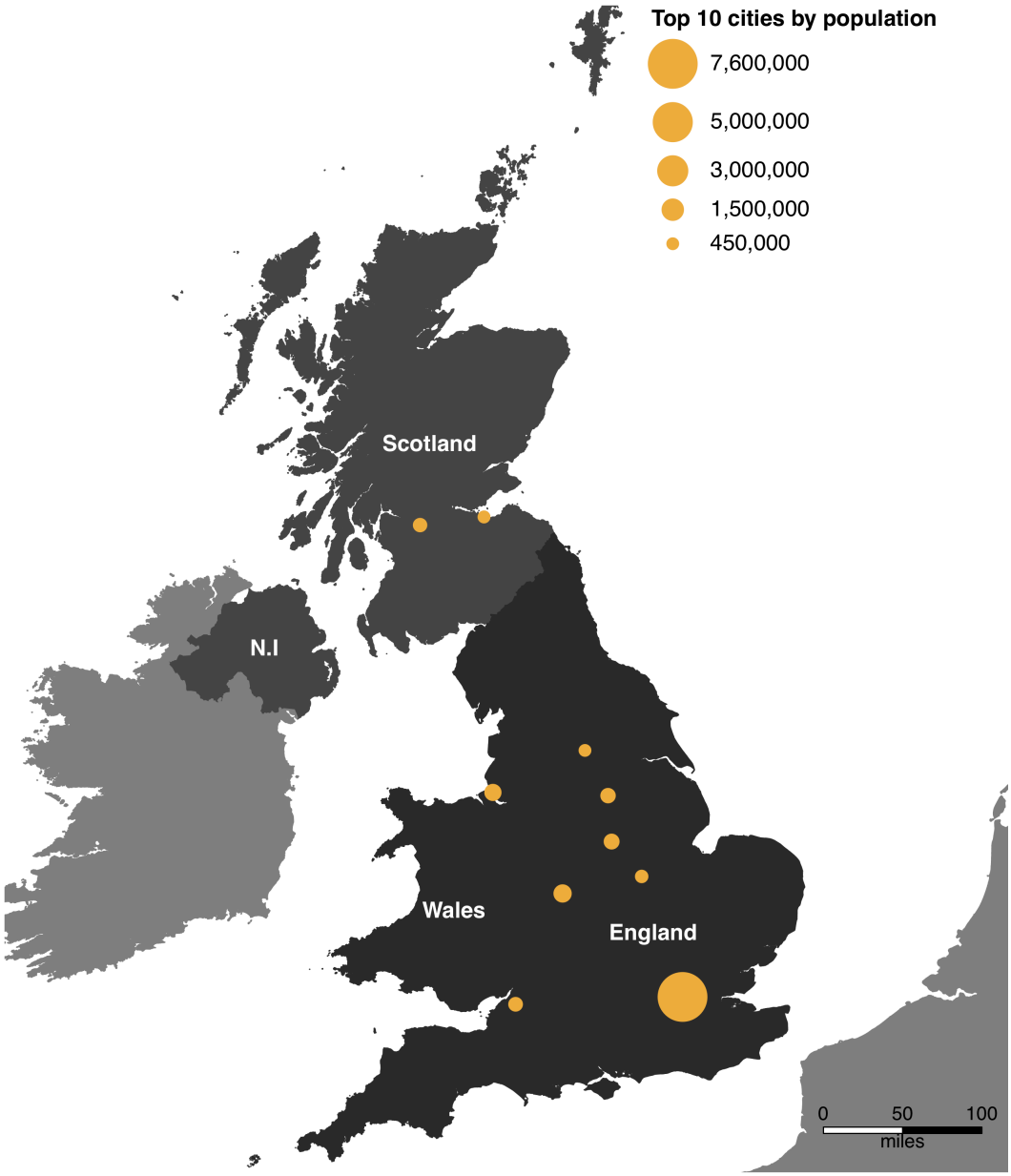
TEDS location data

We assigned each twin pair geographical coordinates based on the centroids of their postcodes at age 12. There are over 1.5 million postcode units in the UK, covering, on average, 15 properties. As with SAMS, the area covered by each postcode varies depending on population density.

To provide context for the results for the UK, **Figure 2** displays a map and some general indicators of the country's geography; the **supplementary materials** include a detailed description. The UK is split into England, Wales, Scotland and Northern Ireland (although we do not describe Northern Ireland here because it was not included in the TEDS recruitment area and few participants have moved there since recruitment). Generally, the south of the UK has a milder climate compared to the north and has more low-lying land. The UK is a mix of some very urban, previously (or still) industrial areas and more rural traditional countryside areas. London, a diverse, multicultural city in the south-east, is the capital, with its own distinct boroughs. The south-east of England has many commuter areas and is surrounded by coastline. This area is historically rich and has a mix of industrial and countryside areas and a number of seaside towns. The south of the UK is fairly rural, has many historical sites and also many coastal towns as well as the New Forest. More inland are the areas of Oxfordshire, with the city of Oxford and the picturesque, rural Cotswolds. In the west are the areas of cosmopolitan Bristol, spa-city Bath and rural Somerset, with the wooded Mendips, the Quantock and Exmoor National Park, on the Bristol channel. South-west England consists of pre-industrial Devon and Cornwall, popular Summer destinations with many seaside and fishing towns and plenty of farmland, and Dartmoor National Park. East Anglia is an area of flatland, wetlands and coastal areas.

The west Midlands are a mix of lowlands and hilly areas with the industrial city of Birmingham (England's second largest city) and the Peak district. The east midlands has a number of large urbanised cities and is an old coal mining area, but rural areas can still be found. North-west England has the large cities of Manchester and Liverpool and the seaside resort of Blackpool, but also the unspoilt, mountainous Isle of Man. The scenic Lake district is also found in the north as well as the varied area of Yorkshire, with urbanised, coastal and rural areas. Wales is split into the more populated and coastal south, hilly, rural Mid-Wales and mountainous north Wales. Scotland is split into the Highlands in the north and the Lowlands in the south. Southern Scotland is home to the main cities of cosmopolitan and medieval Edinburgh and urban Glasgow and this area has coastal towns, forests and agricultural land. Central Scotland is more varied with large lochs and forests in the west, rural and industrialised areas and fishing villages in the east and peaks in the north. Argyll in the west is a remote area, transitioning between lowland and highland and with numerous islands. North east Scotland has a number of industrial cities and port towns, although further north becomes mountainous. The Highlands are a very remote but unspoilt area, with forests, lochs, mountains and rugged coastline. Scotland has a number of island clusters, the Inner and Outer Hebrides in the west and the Orkney and Shetland islands in the north.

233 **Figure 2.** Map of the UK with top 10 cities by population



234

235 *The recruitment area (England and Wales) for the Twins Early Development Study (TEDS) is shown in dark*
236 *grey, with the rest of the UK (Scotland and Northern Ireland [N.I]) in a lighter shade of grey. Other countries*
237 *are shown in the lightest shade of grey. The top 10 most populated cities are shown on the map with orange*
238 *circles, the area of which reflects the population of the city.*

239 **Statistical analyses**

240 *ACE models and maps in CATSS and TEDS*

241 In twin analysis, within-pair similarity of monozygotic (MZ) and dizygotic (DZ) twins is
242 compared to estimate parameters for additive genetic (A), shared environmental (C)
243 and non-shared environmental (E) influences on a trait. In this context, the shared
244 environment refers to influences other than DNA similarity that make children growing
245 up in the same family more similar to each other, whilst the non-shared environment
246 refers to influences that do not contribute to similarity within families. Although
247 tempting, it is not possible to assign specific environments to one or the other
248 environmental component, because most environments themselves show both shared
249 and non-shared (and often genetic) influences. We can estimate the contribution of
250 genetic and environmental influences because of the different ways these influences are
251 shared in MZ and DZ twin pairs. For MZ twins, who share 100% of their segregating
252 alleles, A influences correlate 1, whereas for DZ twins they correlate 0.5 because DZ
253 twins share, on average, 50% of their segregating alleles. For both MZ and DZ twins
254 growing up in the same family the shared environmental correlation is 1. In contrast,
255 the non-shared environment is uncorrelated and contributes to differences between
256 twins [35]. In this study, we applied a version of the spACE analysis method [19] to explore
257 how A, C and E for ASD traits vary geographically. To do this, we fit full information
258 maximum likelihood structural equation models to twin data in R (version 3.3.1) using
259 the OpenMx package (version 2.9.4), calculating A, C and E at many different target
260 locations across an area. The contribution of each twin pair to a model is weighted by a
261 function of the inverse Euclidean distance of the twin pair from the target location. In
262 this study we built on our previous work by applying the weights within the structural

263 equation modelling framework, rather than by calculating weighted correlation
264 matrices and using those as input (although for normally distributed measures the
265 results are the same with either approach). In twin analysis it is possible to model non-
266 additive genetic effects (D) instead of shared environmental effects (C), and D influences
267 are sometimes found with ASD. However, the D component is highly correlated with the
268 A component, which means confidence intervals are wide and the tendency of variance
269 to swap between these two components makes it difficult to compare results across
270 locations. Because of this, we have fitted ACE models, although in this case, A should be
271 considered broad-sense heritability, including both additive and non-additive genetic
272 influences.

273 For target locations in Sweden we used the centroid of each unique SAMS that included
274 at least one twin pair. Because UK postcodes give more precise locations than Swedish
275 SAMS, we instead selected UK target locations representative of local population density
276 to preserve participant anonymity. All twin pairs contributed to the results at each
277 location, but contributions were weighted according to the distance of each twin pair
278 from the target location:

279 $$w_i(x) = \frac{1}{d(x, x_i)^p}$$

280 where x represents the target location, x_i represents the location of a twin pair, d is the
281 Euclidean distance between x and x_i, and p is the power parameter that controls the rate
282 of drop-off of a twin pair's influence over distance (0.5 for these analyses). We included
283 sex as a covariate in all the models (accounting for on average 2.59% of the variance),
284 and age in the TEDS data (where it accounted for on average 0.34% of the variance).

285 Further detail on the spACE approach can be found in the original article [19]. We plotted
286 maps to visualise the results (**figures 3 and 4**). In the maps each target location is
287 coloured according to the value of the estimate at that location compared to the full
288 range of values across the map. Low values appear blue and high values appear red,
289 with increasing brightness of the colour representing increasing distance from the
290 mean. To avoid outliers having a large effect on the distribution of colours in the maps,
291 we assigned the highest 4% of values to the brightest red and the lowest 4% of values to
292 the brightest blue before assigning colour values to equal ranges between the two. The
293 histograms show the distribution of results and the corresponding colours.

294 We estimated 95% confidence intervals for A, C and E at each target location and using
295 the CATSS data we performed sensitivity analyses for how A, C and E estimates vary
296 based on the historical residential location used for the twin pairs. To do this we
297 repeated analyses based on participants' locations at different ages and we combined
298 the resulting maps into a video (**supplementary video 1**). Changes across time may
299 allow identification of critical developmental periods when the geographical
300 environment is particularly influential; for example, if clear patterns are seen when
301 participant locations for the analysis are based on their location at a specific age.

302 *Sex limitation models*

303 While some previous studies have identified no aetiological sex differences for ASD,
304 others have. For example, one study using the Missouri twin study and a continuous
305 measure of autistic traits, found no sex differences [36], and neither did previous work in
306 TEDS[24], but modest sex differences were found in previous work with the Swedish Twin
307 Study[37]. To maximise power, in the main text we report results that equate the

308 aetiological influences for males and females. But for the Swedish data, where we
309 replicated quantitative sex differences in aetiology, we conducted further separate
310 analyses for males and females, and we include these in supplementary materials
311 (**supplementary figures 4 and 5**).

312 **Data availability**

313 The data used in this study are available to researchers directly from CATSS and TEDS.
314 Procedures for accessing the data are described at https://ki.se/en/meb/the-child-and-
315 adolescent-twin-study-in-sweden-catss (CATSS) and
316 https://www.teds.ac.uk/researchers/teds-data-access-policy (TEDS).

317 **Code availability**

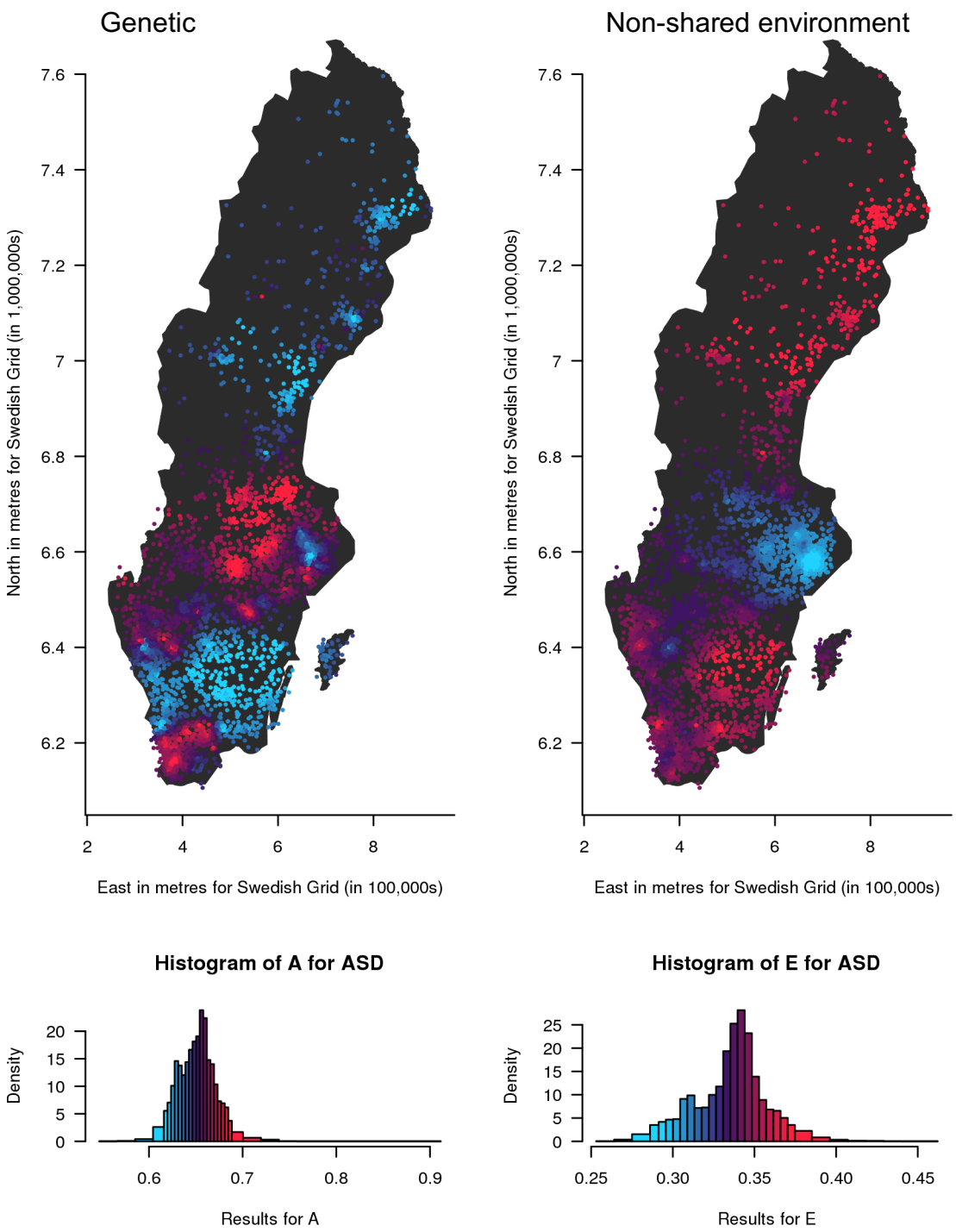
318 Code that implements the spACE model described here is available in the scripts
319 directory at https://github.com/DynamicGenetics/spACEjs/.

Results

Mapping the aetiology of autistic traits in Sweden

We plotted the results from each of the 4,199 locations on a map (**Figure 3**, an interactive version is available at https://dynamicgenetics.github.io/spACEjs/), where red points represent locations where results fall above the population mean, and blue points represent locations where they fall below. The brighter the points, the further they are from the population mean. This is shown in the histograms below the maps, where the colours of the bars match the points in the map above. Because we modelled raw variance after standardising data to mean 0 and SD 1 at the population level (i.e. we did not standardize the A, C and E estimates at each location to add up to one) genetic and environmental influences are not reciprocal at each location, so it is possible for a location to show both strong genetic and environmental influences. The consequence of this is that each map stands alone: differences in genetic influence really do imply differences in the genetic component, and not just a reflection of differences in a reciprocal environmental component. Maps with A and E constrained to add up to one in each location (i.e. proportional) are shown in **supplementary figure 2** and show similar results to those for the raw variance. For comparison, we have also plotted results of the weighted means of scaled autistic trait scores at the same locations in **supplementary figure 3** and we observe geographical variation for mean autistic trait scores, reflecting the expected variation in the prevalence of ASD.

Figure 3. Mapping genetic (A) and non-shared environmental (E) influences on autistic traits in Sweden suggests that genetic variation is more influential in more densely-populated areas



Geographical variation in genetic (A) and non-shared (E) influences on childhood ASD traits in Sweden (results are overlaid on an outline of the SAMS areas). The contributions of A and E range from low (blue) to high (red). The histograms below show the distribution of the estimates, coloured in the same way as the points on the map. The estimates are not standardised and are therefore not constrained to add up to one. Shared environment (C) estimates were approximately zero across the whole map, so they are not shown here. An interactive version of this map is available at https://dynamicgenetics.github.io/spACEjs/.

350 The results suggest that the amount of variation in autistic traits explained by genetic
351 influences (A) is generally greater in urban areas and lesser in the sparsely populated
352 north and more rural southern belt. The non-shared environment (E) frequently shows
353 the opposite pattern, with the variation explained generally less in and around the
354 capital and more in Southern and Northern rural areas. However, we also observe
355 greater contribution of E in the areas around the cities of Gothenburg and Malmö.
356 Variation in A and E can also be seen within local areas, such as around Stockholm,
357 where there are both low and high values for A, suggesting genetic influences are
358 moderated by other factors beyond urbanicity. The histograms for the raw variance
359 indicate that the variance explained by genetic influences ranges from 0.55 to 0.91, with
360 most values around the mean of 0.65 (SD=0.02). The variance explained by E ranges
361 from 0.25 to 0.46, again with most values around the mean of 0.34 (SD=0.02). Variation
362 in autistic traits explained by C was approximately zero over the whole of Sweden.
363 Confidence intervals for estimates at each location are provided in **supplementary**
364 **table 1. Supplementary video 1** shows that the overall patterns for variation in A and
365 E remained similar irrespective of the historical location used for each twin pair.

366 *Sex limitation models for ASD traits*

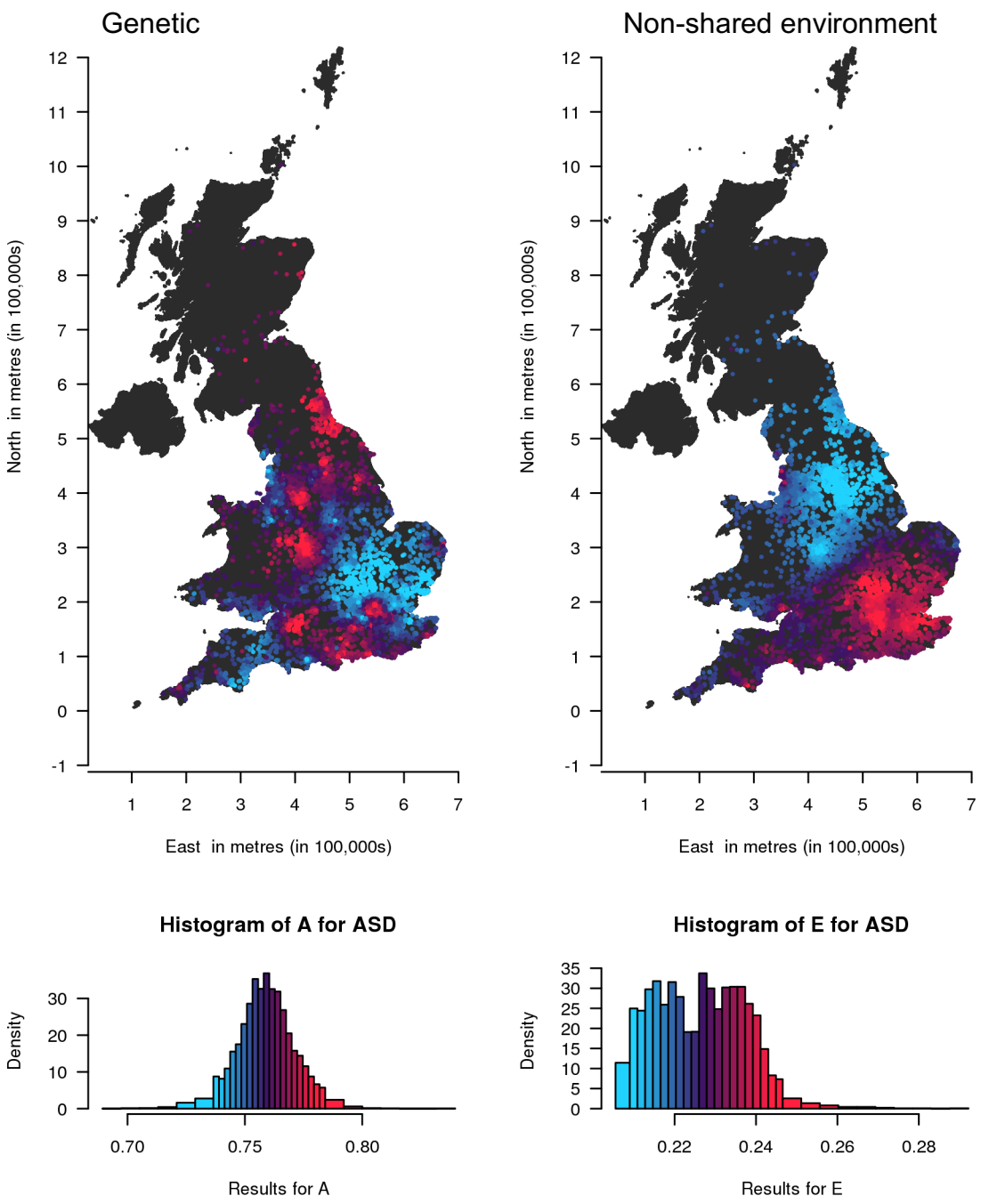
367 Population-level sex limitation model results for autistic traits are shown in
368 **supplementary table 2**. We used nested sub-models to test for sex differences in
369 aetiology. The common effects model is the most parsimonious model that adequately
370 fits the data, indicating quantitative, but not qualitative, sex differences. However,
371 because this is a large and well-powered sample, the parameter estimates for males and
372 females that are "significantly" different at an alpha of 0.05 are actually within 1% of
373 each other. To maximise power, we have presented the maps for males and females

374 combined in the main text, but maps for males and females separately are shown in
375 **supplementary figures 4 and 5**.

376 *Mapping the aetiology of autistic traits in the UK*

377 **Figure 4** maps genetic and environmental influences on autistic traits in the UK at 6,758
378 locations chosen to represent sample density across the UK (an interactive version of
379 this map is available at https://dynamicgenetics.github.io/spACEjs/). Again, this is a
380 map of the raw variance, so A, C and E are not constrained to add up to one. However,
381 maps with A, C and E constrained to add to one at each location are shown in
382 **supplementary figure 6**, with very similar results.

383 **Figure 4.** Similar to findings in Sweden, genetic influences for autistic traits in the UK
384 appear more influential in more densely populated areas, although patterns of non-
385 shared environmental influences follow a north-south divide



Geographical variation in genetic (A) and non-shared (E) influences on childhood autistic traits in the UK. The contributions of A and E range from low (blue) to high (red). The histograms below show the distribution of the estimates, coloured in the same way as the points on the map. The A and E estimates are not standardised and are therefore not constrained to add up to one at each location. An interactive version of this map is available at https://dynamicgenetics.github.io/spACEjs/.

The raw results for A are consistent with those from the CATSS sample in Sweden where we observed higher heritability in more densely populated areas. The mean of A is slightly higher in the UK than in Sweden: 0.76 (SD=0.01) compared to 0.65 (SD=0.02). For non-shared environment (E) the patterns are less similar across countries, as are the mean values 0.23 (SD=0.01) in the UK, compared to 0.34 (SD=0.02) in Sweden. London, the capital city, and the surrounding south-east of the UK show greater influence of E compared to the north and some regions in the mid-west of England and Wales. In contrast, Sweden's capital, Stockholm, and the surrounding areas show lower estimates of E. Again, C is approximately zero for autistic traits across all regions. As before, local variation in A and E is apparent within large cities such as London. As the histograms show, A is fairly normally distributed between 0.69 and 0.84 across regions. E ranges more narrowly from 0.21 to 0.29 in a bimodal distribution with a positive skew. Confidence intervals for estimates at each location are provided in **supplementary table 3.**

406 **Discussion**

407 In this study we looked at how genetic and environmental influences on symptoms of
408 ASD vary geographically in Sweden and the UK. Our results are consistent with previous
409 population-level estimates of genetic and environmental influences, and demonstrate
410 geographical variation in genetic and non-shared environmental influences on autistic
411 traits in Sweden and the UK.

412 These geographical differences in genetic and environmental influences on autistic
413 traits are indicative of gene-environment and environment-environment interactions
414 where the interacting environmental variable varies by location. Where we find areas of
415 increased genetic or environmental influences for autistic traits this means that the
416 environment in these areas draws out genetic or environmental influence, in the same
417 way that the presence of airborne pollen would reveal individual differences in genetic
418 risk for hay fever. By studying this in a systematic way, rather than relying on a specific
419 measured environment, we can use our results to develop novel hypotheses about
420 currently unknown environmental influences.

421 Our findings complement previous research that has focused on geographical
422 prevalence differences in ASD [9–14,38]. Similarly, alongside aetiological differences, we
423 observe geographical variation in mean autistic trait scores. These mean differences
424 may be linked to aetiological differences. For example, areas of greater prevalence could
425 represent regions where the environment triggers genetic predisposition to ASD traits.
426 This provides a basis for future research into specific geographically distributed
427 environments that draw out or mitigate genetic or environmental risk, which could in
428 turn be useful for population health measures seeking to reduce the impact of ASD.

429 From our results we can hypothesise about what these factors could be. For example,
430 we find that there is generally higher heritability in more densely populated areas of
431 Sweden, such as Gothenburg, Malmö, and Stockholm, and in a band running from
432 Gothenburg to Stockholm where the majority of the population live. We find lower
433 heritability in the southern highlands and northern regions, which are less populated.
434 This may suggest that urban environments draw out genetic differences in
435 predisposition to autistic traits between people of the same ancestral background.
436 These geographically distributed environments might include psychosocial factors such
437 as the stress of urban living or income inequality, or aspects of the physical
438 environment such as air pollution. This explanation fits with neuroscience literature
439 that suggests that living in an urban environment is associated with specific neural
440 correlates in response to stress, which may influence the onset of related mental health
441 disorders [25]. The literature on prevalence suggests that other potentially important
442 factors may include geographical differences in access to healthcare, diagnostic bias and
443 parental awareness, socio-economic status, neighbourhood deprivation, infrastructure
444 of the area, or access to green space. However, factors such as rater effects or access to
445 healthcare are less likely to play a role in this aetiological variation as we have used
446 data from structured interviews in population representative samples, and
447 environmental influences on prevalence are not necessarily the same as environmental
448 influences on aetiology. For non-shared environmental influences urban-rural
449 differences are confined to areas in and around Stockholm, the Swedish capital.
450 Therefore, it may be that there are environments related specifically to living in or
451 around the capital that result in decreased non-shared environmental influences
452 compared to other areas in Sweden.

We see similar patterns for genetic influences on in the UK, with higher heritability estimates in city areas such as central and south London, Birmingham, Bristol, Manchester, Newcastle. Estimates are generally lower in East Anglia, the south west, Wales and other less densely populated areas. Again, as in Sweden, non-shared environmental influence shows a more complex pattern in the UK.

Whilst we see similarities in patterns of aetiology between Sweden and the UK for autistic traits, there are also substantial differences. There are several possible reasons for this. For example, it could be due to differences in the measurement of ASD symptoms in the cohorts, or it could be due to environmental differences between the two countries, for example differences in the level of awareness of ASD and therefore possible differential reporting in ASD symptoms, or differences in the physical or social environments, which may vary between countries in the same way as they do within each country. It will be important to investigate this in other countries to explore these international similarities and differences further.

When interpreting these results there are a few important points to consider. First, in some areas the effective sample size is lower than others, for example in densely populated areas the proximity of some twin pairs relative to others can weight their influence relatively highly. However, across all areas we have taken care to maintain effective sample sizes in the thousands for both identical and fraternal twin pairs, so estimates remain reasonably precise. Second, due to how the weighting of participants' contributions to the analyses works, i.e. participants contribute more to analysis the closer they are to the target location, this results in smoothing over the estimates for A, C and E. The amount by which results over the area are smoothed depends on the tuning parameter used in the weighting. There is a trade-off when selecting the tuning

477 parameter between smoothing over noise and detecting real variation, or between
478 accurately estimating variance components and accurately localising them. Here, we
479 have chosen the tuning parameter to result in some smoothing towards the population
480 mean, but this may mean that some larger localised variation remains undetected. In
481 interpreting the maps, it is important to take into account both the pattern of results
482 shown on the map, and the range of estimates shown by the histogram, while bearing in
483 mind that the effect sizes are smoothed towards the population mean. Third, in common
484 with the previous literature, we find that an ADE model is often a slightly better fit to
485 the data, but here we have fitted ACE models and generally presented results for A and
486 E alone because the high correlation between A and D brings noise to spatial analysis
487 due to switching between the two across locations [39]. Instead, we interpret A here as a
488 broad genetic component, without the usual connotation of additivity. Fourth, as with
489 any statistical analysis, it is important to consider the assumptions of the model. For
490 twin modelling, these include random mating within the population, that MZ and DZ
491 twins share their environments to the same extent (at least where those environments
492 are not genetically influenced), and that twins are representative of the general
493 population for the traits studied [35]. These assumptions have generally been found to be
494 reasonable [40], although there is some evidence to suggest that there is assortative
495 mating for ASD, for example a study in Sweden that found phenotypic correlations of
496 0.48 for ASD [41]. This would have the effect of inflating the shared environmental
497 influences, which we find to be approximately zero across locations. For our
498 geographical analyses we do not assume that there is no gene-environment interaction
499 or correlation, because we are explicitly modelling them as our main point of interest.

Our systematic analysis shows geographical variation in genetic and non-shared environmental influences for symptoms of ASD in both Sweden and the UK. These results will inform further studies of measured geographically distributed environments, beyond those already identified as influencing prevalence in the literature. For example, by correlating the spatial distribution of these environments with the spatial distribution of the aetiological estimates or by using formal continuous moderator models. Identifying these environments and understanding how they draw out or mask genetic predisposition may lead to population health and social policy innovation to support people with ASD.

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619

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