# Human-lineage-specific genomic elements: relevance to neurodegenerative disease and APOE transcript usage

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## **ABSTRACT**

Knowledge of genomic features specific to the human lineage may provide insights into brain-related diseases. We leverage high-depth whole genome sequencing data to generate a combined annotation identifying regions simultaneously depleted for genetic variation (constrained regions) and poorly conserved across primates. We propose that these constrained, non-conserved regions (CNCRs) have been subject to human-specific purifying selection and are enriched for brain-specific elements. We find that CNCRs are depleted from protein-coding genes but enriched within lncRNAs. We demonstrate that per-SNP heritability of a range of brain-relevant phenotypes are enriched within CNCRs. We find that genes implicated in neurological diseases have high CNCR density, including *APOE*, highlighting an unannotated intron-3 retention event. Using human brain RNA-sequencing data, we show the intron-3-retaining transcript/s to be more abundant in Alzheimer's disease with more severe tau and amyloid pathological burden. Thus, we demonstrate the importance of human-lineage-specific sequences in brain development and neurological disease. We release our annotation through vizER (https://snca.atica.um.es/browser/app/vizER).

INTRODUCTION

Humans are perceived to be particularly vulnerable to neurodegenerative disorders relative to other primates on both a pathological and phenotypic level<sup>1-5</sup>. This is exemplified in Alzheimer's disease, in which a similar phenotype is not seen in ageing non-human primates, nor are the characteristic neurofibrillary tangles on pathological examination<sup>1,6</sup>. Likewise, Parkinson's disease does not naturally occur in non-human primates, whose motor deficits do not respond to levodopa administration and a Lewy body pathological burden is not present<sup>5,7</sup>. This has led to the hypothesis that the same evolutionary changes driving encephalisation which have steered the development of characteristic human features may predispose to disorders that affect the brain<sup>2,5,6</sup>. In the case of Alzheimer's disease, it is postulated that the accelerated evolution of intelligence, brain size and aging predispose to selective advantages, which in later life, have deleterious effects on cognition through the very same pathways<sup>8</sup>. Therefore, identifying the genomic changes unique to the human lineage may not only provide insights into the evolution of human-lineage-specific phenotypic features, but also into the pathophysiology underlying uniquely human diseases.

Previous studies attempting to identify human-lineage-specific variation and functional elements in the human genome have focused on genomic conservation as calculated by aligning and comparing genomes across species. But, conservation measures alone do not fully identify regions with evidence of human-specific purifying selection. This is because a large part of the genome is evolving neutrally and sufficient phylogenetic distance is required to detect these changes<sup>9</sup>. Furthermore, alignment methods do not reliably detect substitutions that preserve function<sup>9</sup>. Conversely, some genes such as those implicated in immune system function may be subject to rapid evolutionary turnover even among closely-related species<sup>9</sup>. For these reasons, analysing conservation alone has limited capacity to capture human-specific genomic elements<sup>9</sup>.

The increasing availability of whole genome sequencing (WGS) has opened new opportunities to address this issue. Using intra-species whole-genome comparisons<sup>10,11</sup>, we are better able to appreciate

sequence differences between individuals of the same species, and identify genomic regions in humans

containing significantly fewer genetic variants than expected by chance, designated as constrained

genomic regions. This form of analysis, which is based on the assumption that most selection is negative

or purifying (i.e., those which remove new deleterious mutations), has been crucial for classification of

exonic variation and attribution of pathogenicity<sup>12</sup>. However, many genomic regions would be expected

to be both constrained and conserved; such regions have been maintained by natural selection across

species, including humans. This means that metrics reflecting constraint alone cannot identify human-

specific elements as the same regions could also be conserved in other species.

This has led previous analyses to combine these metrics of sequence constraint and conservation to

identify genomic regions with evidence for human-specific selection<sup>13,14</sup>. Ward and Kellis successfully

applied this approach to demonstrate that a range of transcribed and regulatory non-conserved elements

showed evidence of lineage-specific purifying selection<sup>14</sup>. However, this analysis was limited by the

availability of WGS data and metrics on human genetic variation were derived from the 1000 Genomes

pilot data, which sequenced with only two to six times coverage<sup>15</sup>. Advances in sequencing technology

have increased the feasibility of deep sequencing of human populations leading to a much more detailed

understanding of genetic variation between humans<sup>10</sup>. In fact, the recent sequencing of the genomes of

10,545 human individuals at a coverage of 30 to 40 times identified 150 million single nucleotide

variants of which 54.7% had not been reported in dbSNP<sup>16</sup> or the most recent phase 3 of the 1000

Genomes Project<sup>17</sup>. The availability of this information has already enabled more accurate identification

of relatively constrained regions of the genome, which has led to the development of the context

dependent tolerance score (CDTS)11. CDTS is derived from estimating how the observed genetic

variation compares to the propensity of a nucleotide to vary depending on its surrounding context using

the high-resolution profiles determined from deep sequencing data<sup>11</sup>. Yet, this information has not been

combined directly with improved conservation data to identify regions with evidence for human-

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specific selection.

In this study, we make full use of these resources to develop a novel, granular genomic annotation which efficiently captures information on intra-species constraint and inter-species conservation simultaneously and identifies constrained, non-conserved regions (CNCRs). We use this annotation to test the hypothesis that CNCRs are not only specific to the human lineage, but given the encephalisation of humans, that CNCRs will be enriched within brain-specific functional and regulatory elements as well as risk loci for neurological disease. We show that these regions are enriched for SNP-heritability for a range of neurological and psychiatric phenotypes. Furthermore, by calculating CNCR density within the boundaries of known genes, we develop a gene-based metric of human-specific constraint. This analysis highlights *APOE* and leads to the identification of an intron-3 retaining transcript of *APOE*, the usage of which is correlated with Alzheimer's disease pathology and *APOE*-ε4 status. This approach provides direct support for the role of human-specific CNCRs in brain development and complex neurological phenotypes.

**MATERIALS & METHODS** 

GENERATION OF AN ANNOTATION FOR THE IDENTIFICATION OF CNCRS

We generated a combined annotation to capture information on intra-species constraint and interspecifies conservation simultaneously, using CDTS together with phastCons20 scores (Figure 1). The previously-validated map of sequence constraint (http://www.hli-opendata.com/noncoding) generated using 7,794 whole genome sequences<sup>11</sup> was used to assign a single CDTS score to each non-overlapping 10 base pair (bp) region throughout the genome (build GRCh38, 248,925,226 bins). The phastCons20 score, which calculates the likelihood ratio of negative selection based on the total number of substitutions during evolution of an element between species<sup>18</sup>, was used as a measure of inter-species conservation (http://hgdownload.cse.ucsc.edu/goldenPath/hg38/phastCons20way/)<sup>18</sup>. PhastCons20 was used as it compares the human genome to the genomes of less divergent species (16 other primates and three mammals). For each 10bp bin labelled with a CDTS value, we assigned the corresponding mean phastCons20 score. Bins without a conservation score due to insufficient species in the alignment were not considered (0.218% of the genome). For the remaining 248,381,744 bins, we ranked both CDTS and mean phastCons20 scores across the whole genome such that the highest ranks represented the most constrained and conserved regions respectively. We calculated the log2 ratio of the rank of constraint to the rank of conservation for each 10bp bin (termed constrained, not conserved score, CNC score). This resulted in scores with a distribution centred at 0 signifying no fold change between the ranks of the two metrics (Supplementary Figure 1). Finally, we defined CNCRs as genomic regions that were among the 12.5% most constrained, with a CNC score of ≥ 1 (i.e. a two-fold higher ranking in constraint than conservation). We use this definition for CNCRs throughout this study.

INVESTIGATING THE RELATIONSHIP BETWEEN CNCRS AND EXISTING ANNOTATION

To investigate the relationship between CNC scores for genomic regions and genomic features, we calculated the distribution of CNC scores across genomic features defined by GENCODE v.53<sup>19</sup> and Ensembl v.92<sup>20</sup>. We restricted our analysis to the 12.5% most constrained regions only (31,115,616 ten

bp bins) and segregated these regions into equally-sized deciles ranked on the basis of CNC scores such

that the highest decile (90 – 100 decile) represented a high CNC score containing the most constrained

and least conserved sequences. Each 10bp region was then assigned a single overlapping genomic

feature. To avoid conflicts arising from overlapping GENCODE and Ensembl definitions, we

preferentially assigned a single genomic feature to a given region by prioritising features as described

in Supplementary Table 1.

ENRICHMENT OF COMMON-SNP HERITABILITY IN BRAIN-RELATED PHENOTYPES

FOR CNCRS

Stratified linkage disequilibrium score regression (LDSC) was used to assess the enrichment of

common-SNP heritability for a range of complex diseases and traits within our annotation<sup>21,22</sup>. Stratified

LDSC makes use of the increased likelihood of a causal relationship in a block of SNPs in linkage

disequilibrium (LD) to correct for confounding biases that include cryptic relatedness and population

stratification in a polygenic trait<sup>22</sup>. Using established protocols (https://github.com/bulik/ldsc/wiki), we

tested whether SNPs located within our annotation contributed significantly to SNP-heritability after

controlling for a range of other annotations described within the baseline mode (v.1.2). This analysis

generates a coefficient z-score, from which we calculated a one-tailed coefficient p-value. Stratified

LDSC regression analyses were also run to incorporate background SNPs defined as all SNPs in the

genome that include a CDTS and phastCons20 annotation, to avoid over-estimation of the contribution

to SNP-heritability. We assessed the annotation for SNP-heritability enrichment in complex brain-

related disorders and phenotypes of intelligence<sup>23</sup>, Alzheimer's disease<sup>24</sup>, Parkinson's disease

(excluding 23&Me participants)<sup>25</sup>, schizophrenia<sup>26</sup> and major depressive disorder (excluding 23&Me

participants)<sup>27</sup> (**Supplementary Table 2**). We considered SNPs within CNCRs and its two constituent

groups (Figure 1) which fall either into constrained only or non-conserved only annotations as defined

respectively by: (i) CNCRs annotation: SNPs with a given CNCR density; (ii) Constrained annotation:

SNPs located within the 12.5% most constrained regions of the genome irrespective of conservation

score; (iii) Non-conserved annotation: SNPs located within relatively non-conserved genomic regions

with a conservation rank determined by the rank of the first quartile phastCons20 score at a CNC score

of 1 (rank  $\leq$  25,623,592) (irrespective of constraint score). We provide Bonferroni-corrected *p*-values,

which account for the number of annotation categories and GWASs tested (total of 15 conditions).

GENERATION OF A GENE-BASED METRIC FOR CNCRS AND GENE SET ENRICHMENT

**ANALYSIS** 

To generate a metric of human-specific constraint, which could be applied to a gene rather than a 10bp

region, we calculated the density of CNCRs within each gene, the length of which was defined by the

transcription start and stop sites for that gene (GRCh38.v97). We used g:ProfileR (R Package)<sup>28</sup> for

gene set enrichment analysis. We used the three sets of tested annotations incorporating genes that fell

into CNCRs, constrained regions and non-conserved regions in the gene set enrichment analysis as

previously described for LDSC annotation and as defined in Figure 1. The background gene list in all

analyses comprised 49,644 genes from all regions of the genome with a CDTS and phastCons20

annotation. The correction method was set to g:SCS to account for multiple testing<sup>28</sup>. We used

REViGO<sup>29</sup> to summarise the significant GO terms, and to derive the term frequency, which is a measure

of GO term specificity.

To further characterise CNCR density within genes associated with disease, we first studied phenotype

relationships of all Mendelian genes within the Online Mendelian Inheritance in Man (OMIM)

catalogue (http://api.omim.org)30. We compared the CNCR density of all neurologically-relevant

OMIM genes to all genes within CNCR annotation. Secondly, in order to investigate the CNCR density

within genes associated with complex disorders, we used the Systematic Target OPportunity assessment

by Genetic Association Predictions (STOPGAP) database, a catalogue of human genetic associations

mapped to effector gene candidates derived from 4,684 GWASs<sup>31</sup>. We selected for genes associated

with SNPs that surpassed a genome-wide significant p-value of 5×10<sup>-8</sup> and which fulfilled medical

subject heading for associated neurological/behavioural diseases. We used these sets to identify

potential genes of interest associated with brain-related disorders which carry a high CNCR density.

SEQUENCING OF APOE TRANSCRIPTS IN HUMAN BRAIN

Focussing on a human-specific event identified within APOE from the preceding analyses, we used Sanger sequencing of cDNA reverse transcribed from pooled human hippocampus poly-A-selected RNA (Takara/Clontech 636165) to support the presence of the human-specific intron-3 retention event identified within APOE (GRCh38: chr19:44907952-44908531). For the reverse transcription, we used 500 ng of input RNA, with 10 mM dNTPs (NEB N0447S), VN primers and strand-switching primers (Oxford Nanopore Technologies SQK-DCS109), 40 units of RNaseOUT inhibitor (Life Technologies 10777019) and 200 units of Maxima H Minus reverse transcriptase with 5X reverse transcription buffer (ThermoFisher EP0751). PCR amplification of the cDNA was performed using primer pairs designed to span across intron-2 to intron-3 (P1), intron-3 and exon 4 (P2-4) and intron-3 alone (P5) of APOE (ENST00000252486.9) (Supplementary Table 3). PCR was performed using Taq DNA polymerase with Q-solution (Qiagen) and enzymatic clean-up of PCR products was performed using Exonuclease I (ThermoScientific) and FastAP thermosensitive alkaline phosphatase (ThermoScientific). Sanger sequencing was performed using the BigDye terminator kit (Applied Biosystems) and sequence reactions were run on ABI PRISM 3730xl sequencing apparatus (Applied Biosystems). Electropherograms were viewed and sequences were exported using Sequencher 5.4.6 (Gene Codes). Sequences were aligned against the human genome (hg38) using BLAT and visually inspected for confirmation of validation.

ANALYSIS OF PUBLIC RNA-SEQUENCING DATA

We used publicly-available short read RNA-sequencing data from human brain post-mortem samples provided by Genotype-Tissue Expression Consortium (GTEx) v.7.1<sup>32</sup> and the Religious Orders Study and Memory and Aging Project (ROSMAP) Study<sup>33</sup> and to quantify the human-specific intron-3 retention event in *APOE* highlighted by our analysis. For GTEx data, we used pre-aligned files available from recount2 (https://jhubiostatistics.shinyapps.io/recount/)<sup>34</sup>. Both studies within ROSMAP are longitudinal clinicopathological cohort studies of aging and/or Alzheimer's disease. We downloaded

BAM files for ROSMAP bulk-RNA sequencing data from the Synapse repository

(https://www.synapse.org/#!Synapse:syn4164376) for analysis. To quantify the intron-3 retention

event, we calculated the coverage of intron-3 normalised for the coverage across the entire APOE gene,

as defined by the transcription start and end sites. To quantify splicing of intron-3, we calculated the

number of exon-3 to exon-4 junction reads (defined as reads mapping with a gapped alignment),

normalised for all APOE junction reads detected and currently within annotation. We used a ratio of the

normalised coverage to normalised junction count over intron-3 as an estimate of the proportional use

of the intron-3-retaining transcript, such that a high ratio is associated with a higher usage of intron

retention within both GTEx and ROSMAP data. Based on existing ROSMAP results<sup>35</sup> and principal

component analysis of fragments per kilobase million (FKPM) data, we incorporated covariates to

account for the effect of batch, RNA integrity number (RIN), postmortem interval (PMI), study index,

ethnicity, age at death and sex on estimates of intron-3-retaining transcript usage. Using the resulting

mixed linear model, we compared the intron-3 retention normalised coverage to junction ratio across

clinical disease states, pathological states and APOE status in 634 post-mortem brain samples.

**DATA AVAILABILITY** 

We release our annotation of CNC score as an interactive visualisable track via online platform vizER:

(https://snca.atica.um.es/browser/app/vizER) and provide a publicly-downloadable table of CNCR

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density for genes within our annotation.

**RESULTS** 

GENOMIC REGIONS WITH HIGH CONSTRAINT, BUT NOT CONSERVATION WERE

ENRICHED FOR REGULATORY, NON-CODING GENOMIC FEATURES

CNC scores, which combine information from CDTS and phastCons20, were used to capture evidence

of disparity between constraint and conservation within a genomic region (Figure 1). We investigated

the relationship between CNC scores and known genomic features within the most constrained portion

of the genome (top 12.5%). This analysis demonstrated clear patterns of enhancement and depletion for

genomic elements across CNC scores, which significantly differed from similar analyses performed

using constraint metrics alone<sup>11</sup> (**Figure 2a**). Among constrained genomic regions with the highest CNC

scores (90-100 decile, signifying high constraint, but low conservation) we saw a depletion for coding

elements of 27-fold relative to genomic regions with the lowest CNC scores. This contrasts with the

pattern using constraint metrics alone where the most constrained genomic regions are highly enriched

for coding exons<sup>11</sup>. On the other hand, promoter, promoter-flanking, and non-coding RNA features were

over-represented in the highest compared to the lowest CNC deciles by 4.7, 1.9 and 1.5-fold

respectively. Thus, genomic regions with high CNC scores are enriched for regulatory, non-coding

genomic features.

GENES WITH THE HIGHEST DENSITY OF CNCRS ARE ENRICHED FOR LONG NON-

CODING RNA

Next, we applied a CNC score cut-off of  $\geq 1$  (signifying a two-fold higher ranking in constraint than

conservation) to define a set of genomic regions which were constrained, but not conserved (termed

CNCRs). Next, we wanted to investigate whether CNCRs could be used to identify specific genes of

interest. With this in mind, we used CNCR density to identify gene sets which might be expected to

contribute most to human-specific phenotypes. Consistent with the findings above, we found that as the

CNCR density threshold was increased to define the gene sets of interest, there was a marked reduction

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in the proportion of protein-coding genes ( $\beta$ -coefficient between proportion and CNCR density = -1.061

and false discovery rate (FDR)-corrected p = 0.00162), and an increase in the proportion of long non-

coding RNA (lncRNA, β-coefficient 0.385 and FDR-corrected p = 0.0161), and microRNA-encoding

genes (miRNA,  $\beta$ -coefficient 0.394 and FDR-corrected p = 0.00116) (**Figure 2b**). Interestingly, this

relationship was not clearly observed when considering unprocessed snRNA and other RNAs (Figure

2b). In order to determine whether the relationship between CNCR density and gene biotype was driven

by sequence constraint or conservation, we also generated comparator gene lists based on constrained-

only and non-conserved regions alone. Importantly, lncRNA and protein-coding gene proportions do

not follow the same directionality with increasing density when constraint or non-conservation alone is

considered (Figure 2b). Thus, this analysis highlighted the specific importance of lncRNAs as

compared to other classes of non-coding RNAs in driving human-specific patterns of gene expression.

SIGNIFICANT ENRICHMENT OF HERITABILITY FOR NEUROLOGICALLY-RELEVANT

**PHENOTYPES** 

Given the enrichment of regulatory features within genomic regions with a high CNC score, we

postulated that such regions could also be enriched for disease risk. In order to study this, we

investigated CNCRs for evidence of enriched heritability for a range of complex neurologically-relevant

phenotypes (Supplementary Table 4). After Bonferroni correction for multiple testing, we found that

CNCRs exhibited significant enrichment in heritability for intelligence (coefficient  $p = 4.19 \times 10^{-24}$ );

Parkinson's disease (coefficient  $p = 4.65 \times 10^{-5}$ ); major depressive disorder (coefficient  $p = 2.95 \times 10^{-8}$ )

and schizophrenia (coefficient  $p = 5.26 \times 10^{-19}$ ), but not for Alzheimer's disease (**Figure 3**). While a

significant enrichment in heritability for intelligence, major depressive disorder and schizophrenia were

also observed in the constrained regions alone (and to a lesser extent, non-conserved regions), we note

that the regression coefficient for CNCRs was at least two-fold larger for the CNCR annotation

compared to the constrained annotation (Supplementary Table 4). Similarly, significant enrichment

in heritability for Parkinson's disease was only observed in CNCRs. Thus, by combining metrics for

both constraint and conservation in our annotation, we derived an independent annotation that shows a

higher level of enrichment in heritability for neurologically-related phenotypes than annotations based

on constraint or conservation alone.

THE PROPORTION OF ENRICHED GENE SETS WITH NEUROLOGICALLY-RELATED GO

TERMS INCREASES IN GENES WITH THE HIGHEST DENSITY OF CNCRS

To investigate these findings further, we defined gene sets based on their CNCR density and analysed

their GO term enrichment. We assessed gene sets defined across a range of CNCR densities (> 0.0 to  $\geq$ 

0.5 at 0.1 increments). We found that the proportion of neurologically-associated GO terms with

significant enrichments (g:SCS-corrected p < 0.05) increased among gene sets with increasing CNCR

gene densities (Supplementary Figure 2). Importantly, a similar analysis of gene sets defined by

constraint alone or non-conservation alone did not contain any neurologically-enriched GO terms

(Figure 4). We identified the gene set with the highest proportion of nervous system-related terms at a

CNCR genic density of 0.3 (Supplementary Figure 2). The only GO terms specific to a tissue process

were related to the nervous system (Figure 4, Supplementary Table 5) and spanned terms such as

neuronal development (GO:0048663, corrected  $p = 5.46 \times 10^{-7}$ ) and spinal cord differentiation

(GO:0021515, corrected p =  $3.64 \times 10^{-7}$ ). The remaining significantly enriched GO terms related to

(GO:0043565,  $p = 4.81 \times 10^{-4}$ ). Of note, analysis of gene sets defined on the basis of constraint alone

revealed no enrichment of neurologically-associated terms, but instead significant enrichment of

ubiquitous processes including protein targeting (GO:0045047, p = 9.93×10<sup>-4</sup>) and DNA binding

vascular system-related GO terms (GO:0048514 blood vessel morphogenesis, corrected  $p = 3.96 \times 10^{-37}$ 

and GO:0072358 cardiovascular system development,  $p = 8.53 \times 10^{-36}$ ). As might be expected based on

the rapid and potentially divergent evolutionary pressures, the analysis of gene sets defined on the basis

of non-conservation alone demonstrated the significant enrichment of immune and skin-related GO

terms (GO:0002250 adaptive immune response,  $p = 4.02 \times 10^{-10}$  and GO:0043588 skin development, p

= 2.33×10<sup>-4</sup>). Taken together, these results demonstrate that using CNCR density, genes important in

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nervous system development and implicated in neurological disease can be identified.

CNCR ANNOTATION HIGHLIGHTS AN INTRON-3 RETAINING TRANSCRIPT OF APOE

Next, we investigated the distribution of CNCR density across Mendelian genes associated with a neurological phenotypes (as defined within OMIM<sup>30</sup>) and genes implicated in complex brain-relevant phenotypes (as defined within STOPGAP<sup>31</sup>). We noted that the median CNCR density was significantly higher in OMIM genes with a neurological phenotype compared to all other genes (median CNCR density of neurological OMIM genes = 0.0924, IQR = 0.0567 - 0.143; median CNCR density of all other genes = 0.083, IQR = 0.043 - 0.153; Wilcoxon rank sum test p =  $1.8 \times 10^{-6}$ ). While genes associated with complex brain-relevant phenotypes did not have a significantly higher CNCR density when compared to all other genes, we still identified 31 genes with a CNCR density of greater than 0.2 and seven genes with a CNCR density of greater than 0.3 (*APOE*, *PHOX2B*, *SSTR1*, *HCFC1*, *HAPLN4*, *CENPM* and *IQCF5*). Of these genes, *APOE* had the highest CNCR density with a value of 0.552.

Given the high CNCR density of *APOE*, its importance as a disease locus for Alzheimer's disease and other neurodegenerative diseases<sup>36</sup> and the long-standing interest in the lineage specificity of *APOE*<sup>8,37</sup> (specifically the differences in the ε4 allele between humans and non-human primates<sup>1</sup>), we chose to focus on this gene. We tested whether intragenic analysis of *APOE* could identify specific exons or transcripts of interest. We compared CNCR density, constraint and conservation scores across the length of the gene showing that CNCRs provide a highly granular annotation (**Figure 5**). Using this approach, we identified a region of high CNCR density within intron-3 of *APOE*. Although no intron-3 retaining transcript is currently annotated in Refseq and Ensembl, an intron-3 retention event has previously been reported and implicated in the regulation of *APOE* expression<sup>38,39</sup>. To validate the existence of this transcript, we performed Sanger sequencing of polyA-selected RNA derived from human hippocampal tissue. This demonstrated that no recursive splicing occurred as the full-length intron-3 sequence was retained and flanked by both exon-3 and exon-4 (**Supplementary Figure 3**).

In order to obtain further insights into the biological significance of the intron-3 retaining *APOE* transcript, we leveraged publicly-available RNA-sequencing data covering 11 regions of the human

central nervous system provided by the GTEx v.7<sup>32</sup>. Using an annotation-independent approach to

identify genomic regions producing stable transcripts<sup>40,41</sup>, we identified a region of significant

expression encompassing intron-3 of APOE and the flanking coding exons in all brain tissues (Figure

6a). These data not only support the existence of an intron-3 retaining APOE transcript that is not

entirely attributable to pre-mRNA transcripts or driven by background noise in sequencing, but also

provide a means of estimating its usage across the human brain.

Thus, in order to compare usage of this transcript across different CNS regions, we calculated the ratio

of normalised intron-3 expression (a measure of intron-3 retaining transcripts) to the normalised

expression of exon-3/exon-4 spanning reads (a measure of transcripts splicing out intron-3). We see

that there is evidence of the usage of the intron-3 retaining APOE transcript in all central nervous system

regions from GTEx data (Figure 6a). However, there are also significant differences among brain

regions (Kruskal-Wallis p< 2.2e<sup>-16</sup>) with the usage of the intron-3 retaining event being highest in the

spinal cord, substantia nigra and hippocampus (Figure 6a).

In summary, we confirmed the existence of an unannotated human-specific non-coding transcript of

APOE and identified differential usage of this transcript across the human brain. In this way, we

demonstrate the utility of combining CNC scores with transcriptomic data, which we have made easier

though the addition of a CNC score track within the platform vizER

(https://snca.atica.um.es/browser/app/vizER).

Usage of the intron-3 retaining transcript of APOE correlates with

ALZHEIMER'S DISEASE PATHOLOGY AND APOE GENOTYPE

We noted that among the brain tissues with the highest usage of the intron-3 retaining transcript of

APOE are those that show selective vulnerability for neurodegeneration, namely the hippocampus in

the context of Alzheimer's disease and the substantia nigra in the context of Parkinson's disease. Given

that APOE is one of the most important genetic risk factors for Alzheimer's disease, we leveraged

publicly-available RNA-sequencing data from the ROSMAP studies to quantify the usage of the intron-3 retaining transcript of APOE in post-mortem frontal cortex brain tissue derived from individuals with Alzheimer's disease (n = 222), mild cognitive impairment (MCI) (n = 158) compared to control individuals (defined as the final clinical diagnosis blinded to pathological findings, n = 202). We found that the proportion of the intron-3-retaining transcript was higher (p  $< 2.2e^{-16}$ ) in frontal cortex tissue from individuals with clinically-diagnosed Alzheimer's disease and MCI patients versus control participants. Partitioning this further on the basis of pathology, we see an increase in intron-3 retaining transcript usage with more severe Braak and Braak pathology for neurofibrillary tangles (adjusted r<sup>2</sup> 0.678, p <  $2.2e^{-16}$ ) (**Figure 6b**). Consistent with these findings, we also found a significant increase in transcript usage with lower CERAD stage, indicating higher amyloid plaque pathology (adjusted r<sup>2</sup> 0.673, p <  $2.2e^{-16}$ ). Finally, we investigated the relationship between presence of the  $\varepsilon 4$  allele in *APOE* and usage of the intron-3 retaining transcript. We found a significant positive correlation between \$4 allele load and the proportion of intron-3 retaining transcript (adjusted  $r^2 0.673$ ,  $p < 2.2e^{-16}$ ) (**Figure 6c**). This association remained significant after partitioning APOE-ε4 status by disease and accounting for tau and amyloid burden, showing that this association is likely to be independent of disease state. Taken together, these findings suggest that usage of the intron-3 retaining transcript may be regulated by APOE-ε4 status and may be involved in mediating the effect of APOE genotype, supporting a role for the presence of this lncRNA in disease risk and progression.

**DISCUSSION** 

The core aim of this study was to test the hypothesis that capturing human lineage-specific regions of the genome could provide insights into neurological phenotypes and diseases in humans. We generate and use an annotation based on existing knowledge of sequence conservation and sequence constraint within humans, which we term CNCRs. We use this annotation to prioritise genomic regions, genes and transcripts based on a high density of human lineage-specific sequence as determined by our CNCR annotation. We demonstrate the utility of this approach by showing that: the genomic regions we identify are enriched for SNP-heritability for intelligence and brain-related disorders; the genes we identify are enriched for neurologically-relevant gene ontology terms and genes causing neurogenetic disorders; and the existence of an intron-3 retaining transcript of *APOE*, the usage of which is correlated with Alzheimer's disease pathology and *APOE*-ε4 status.

A major finding of this study is that CNCRs are enriched for regulatory, non-coding genomic regions. This is consistent with analyses performed by Ward and Kellis<sup>14</sup>, and highlights the potential functional importance of *non*-conserved and thus evolutionarily-recent non-coding regions subject to constraint. Furthermore, these findings suggest that CNCRs could provide a means of prioritising and potentially aiding the assessment of non-coding variants, an area of significant interest given that 88% of GWAS-derived disease-associated variants reside in non-coding regions of the genome<sup>42</sup>. We found evidence to support this view through heritability analyses for intelligence, Parkinson's disease, major depressive disorder and schizophrenia with SNP-heritability not only enriched within CNCRs, but to a greater extent than would be expected using either conservation or constraint annotations alone. Considering heritability for intelligence, this phenotype is already known to also be enriched within annotations of brain-specific tissue expression and among several regulatory biological gene sets<sup>23</sup>, including neurogenesis, central nervous system neuron differentiation and regulation of synapse structure or activity<sup>42</sup>. These findings support our hypothesis that CNCRs identify genomic regions of functional importance with relevance to human brain phenotypes.

Our analyses of CNCR density within genes are consistent with these findings, highlighting both non-coding genes and those implicated in neurologically-relevant processes and diseases. Interestingly, CNCR annotation specifically highlighted lncRNAs as opposed to other non-coding RNAs. In particular, we observed a proportional increase in lncRNA enrichment with higher genic CNCR density, which could not be replicated using measures of sequence constraint or conservation alone. This observation is in keeping with previous studies that have shown most lncRNAs are tissue-specific with the highest proportion being specific to brain<sup>43</sup>. Similarly, the enrichment for nervous system-related pathways within CNCRs, which is representative of recent purifying selection, is in keeping with the lowest proportion of positively-selected genes being present in brain tissues from previous studies of mammalian organ development<sup>44</sup>. We also find enrichment of spinal cord-associated genes that may relate to the uniquely human monosynaptic corticomotoneuronal pathways implicated in human-specific dexterity and digital motor control<sup>45,46</sup>, the disruption of which may lead to amyotrophic lateral sclerosis<sup>47</sup>.

We noted that *APOE* was among the genes with the highest CNCR density across the genome and carried the highest CNCR density of all genes implicated in complex brain-relevant phenotypes (defined within the STOPGAP database<sup>31</sup>). Given that genetic variation within this gene and specifically *APOE*ɛ4 status is not only the principal genetic risk factor for Alzheimer's disease<sup>48</sup> but also associated with risk for other neurodegenerative disorders, stroke and reduced lifespan<sup>36</sup>, this finding provides evidence for the value of CNCR annotation. Furthermore, within *APOE*, the CNCR annotation highlighted an intron-3 retention event not currently within annotation but which has been previously reported<sup>38,39</sup>. Using Sanger sequencing of cDNA derived from control human hippocampal tissue, we confirm the presence of an intron-3 retaining *APOE* transcript. We estimate the usage of the transcript from short read RNA-sequencing data and find variable levels across different brain tissues within GTEx<sup>32</sup> with the highest usage in the spinal cord, substantia nigra and hippocampus, reflecting the brain regions most susceptible to selective vulnerability in disease. Using human frontal cortex RNA-sequencing data, we find that the intron retention event is significantly more abundant in patients with Alzheimer's disease than controls and in those with more severe Braak and Braak pathology and amyloid burden as

characterised by CERAD pathology. Furthermore, we see a dosage-dependent increase in the intron

retention event with the APOE-ε4 allele that is independent of disease status. We propose that this novel

transcript may be a means of regulating APOE in a disease state.

Given that we use existing measures of constraint and conservation to identify CNCRs, this analysis is

fundamentally limited by the quality of these data. While the constraint metrics we used were derived

from high depth sequencing, this is still restricted given the relatively high number of private genetic

variants we each carry. In addition, analysis was limited to the high-confidence regions covering

approximately 84% of the genome, so a significant proportion remained unannotated with CDTS

metrics<sup>11</sup>. Similarly, our study of the relationship between CNCRs and known genomic features is

limited by the annotation quality in existing databases. We have endeavoured to overcome some of

these problems by creating a more detailed annotation combining both GENCODE and Ensembl data.

The SNP-heritability estimates using stratified-LDSC analysis are limited by the quality of LD

information underpinning the heritability calculations<sup>21</sup>.

Despite these limitations, we have been able to demonstrate the utility of CNCRs specifically in the

identification of functionally important non-coding regions of the genome, genes and transcripts. We

find that CNCRs across all forms of analyses highlight the significance of human lineage-specific

sequences in the central nervous system and in the context of neurological phenotypes and diseases. We

release our annotation of CNC scores via the online platform vizER

(https://snca.atica.um.es/browser/app/vizER). Thus, the CNCR annotation we generate has the potential

to provide additional disease insights beyond those explored within this study and as we anticipate the

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release of increasing quantities of WGS data in humans, will only improve in quality and value.

**DECLARATION OF INTERESTS** 

The authors declare no competing interests.

**AUTHOR CONTRIBUTIONS** 

ZC and DZ generated the annotation and conducted further analyses. ZC and RHR performed LDSC

analysis. ZC and EKG generated cDNA and completed Sanger sequencing. ZC conducted the RNA-

sequencing data analyses of APOE. DZ and SGR developed the vizER platform for visualisation of

CNC scores. KD'S, AFB and JV helped with further analyses of RNA-sequencing data. IPDGC

contributed PD GWAS data summary statistics. MR conceived and supervised the study. JB, SGAT,

HH and JH provided further guidance on technical aspects of the study. All authors contributed to the

writing and reviewing of the manuscript.

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TITLES AND LEGENDS

**FIGURES** 

Figure 1. Workflow of study and schematic demonstration of annotation groups. The workflow

depicts the processes involved in creation of the annotation with set parameters for each of the three

groups of annotations generated and the processes involved in hypothesis-testing. CNC scores =

constrained, non-conserved scores; CNCRs = constrained, non-conserved regions, CDTS = context-

dependent tolerance score. Minus CDTS score is used as a lower score of CDTS corresponds to a more

constrained region.

Figure 2. Composition of the constrained genome, partitioned by constrained, non-conserved

(CNC) scores (a) and proportion of biotypes of genes in our annotation (CNCRs) and in the

comparator annotations (constrained and non-conserved regions) (b). The description for each

genomic feature is shown in Supplementary Table 1. The barplot in Panel **a** shows the genomic features

for the 12.5% most constrained regions with CNC scores portioned by decile, such that the highest

decile (90 - 100) represents the most constrained and least conserved regions. Description of gene

biotypes in Panel  $\mathbf{b}$  are taken from Ensembl<sup>20</sup>. The heatmap demonstrates the proportion of genes of a

certain biotype within the three separate annotations within each genic CNCR density cut-off. Protein

coding is defined by a gene that contains an open reading frame. The subclassified components of long

non-coding RNA (lncRNA) found in the annotations are: Antisense – has transcripts that overlap the

genomic span (i.e. exon or introns) of a protein-coding locus on the opposite strand; lincRNA (long

interspersed ncRNA) - has transcripts that are long intergenic non-coding RNA locus with a length

>200bp; non-coding RNA is further subclassified into miRNA (microRNA); siRNA (small interfering

RNA); snRNA (small nuclear RNA) and miscellaneous RNA (includes snoRNA (small nucleolar

RNA), tRNA (transfer RNA)). Pseudogenes are similar to known proteins but contain a frameshift

and/or stop codon(s) which disrupts the open reading frame. These can be classified into processed

pseudogene – a pseudogene that lacks introns and is thought to arise from reverse transcription of

mRNA followed by reinsertion of DNA into the genome and unprocessed pseudogene – a pseudogene

that can contain introns since produced by gene duplication.

Figure 3. Stratified-LDSC analysis across five traits comparing CNCRs with its constituent

constrained and non-conserved annotations. Panel a shows the regression coefficient. Panel b shows

the regression coefficient -log(p-value) with the dotted line showing the Bonferroni-corrected p-value

of 0.00333. GWASs were as follows: Intelligence 2019 = intelligence GWAS, AD2018 = Alzheimer's

disease GWAS, PD2019.ex23&Me = Parkinson's disease GWAS without 23 and Me data, MDD2018

= Major depressive disorders GWAS and SCZ2018 = schizophrenia GWAS (Supplementary Table

**2**).

Figure 4. Summarised enriched gene sets for terms specific for neurological gene sets, other

tissues and all tissues (non-neurological) as defined by Gene Ontology (GO). Plot comparing

annotation of interest (CNCRs) and comparator annotations which only use constraint or non-conserved

metrics. Frequency, derived from REViGO<sup>29</sup>, the percentage of human proteins in UniProt which were

annotated with a GO term, i.e. a higher frequency denotes a more general term.

Figure 5. Annotation with CNCRs is highly granular and shows APOE to have a high density of

CNCRs throughout its length especially in association with an intron-3 retention event in the

human hippocampus. The first track represents the genomic location of APOE within Chromosome

19. The second track shows the known transcripts, currently within annotation in Ensembl v.92. The

mean coverage (log10 scale) in the hippocampus shown here is greater than zero (denoted by the grey

shaded area) across intron-3 highlighting a potential novel expressed region. In the last track, CNC

scores above the black dashed line and shaded in red fulfil criteria for a CNCR.

Figure 6. Quantification of intron retention usage by its normalised coverage to junction ratio

across brain tissues within GTEx (a). Normalised coverage to junction ratio of the APOE intron-

3 retention event in bulk RNA sequencing data of post-mortem frontal cortex tissue samples from

634 individuals recruited within ROSMAP studies across Braak and Braak staging (b) and APOE

ε4 allele status (c). In Panel a: red dashed horizontal line presents the median normalised intron

retention coverage to junction ratio within central nervous system tissues in GTEx. Number of samples within each of the tissue groups were as follows: amygdala – 72; anterior cingulate cortex – 84; caudate – 117, cerebellar hemisphere – 105; frontal cortex – 108; hippocampus – 94; hypothalamus – 96; nucleus accumbens – 113; putamen – 97; spinal cord – 71; substantia nigra – 63. In panels **b** and **c**, the blue line represents the linear regression fit with the grey shaded area representing +/- 95% confidence interval. Braak and Braak staging is a measure of severity of neurofibrillary tangle based on location. To improve the power of the study, we merged Braak and Braak stages I and II to "Braak mild stage", Braak and Braak stages III and IV to "Braak moderate" and Braak and Braak stages V and VI to indicate "Braak severe" stage. For number of *APOE* £4 alleles, a heterozygous state is represented by "1" and homozygous state by "2".

SUPPLEMENTAL DATA

**Supplementary Data Figure Titles and Legends** 

Supplementary Figure 1. Kernal density plots of annotation metrics. Panel a depicts density plot

of constraint (context dependent tolerance score (CDTS): a lower CDTS represents more constrained

data). Panel **b** shows the density distribution of the mean phastCons20 scores per 10bp bin. Panel **c** 

shows the distribution of log2 ratio (CNC score), of the reverse ranked CDTS (so a higher rank pertains

to higher constraint but lower CDTS) and ranked phastCons20 scores, partitioned by regions of exon,

intron and intergenic as defined by Ensembl v.92.

Supplementary Figure 2. Proportion of enriched neurologically-related GO terms in the gene set

analysis compared between the annotation of interest (CNCRs) and the comparator annotation

sets (a). Proportion of neurologically-related GO terms at CNCR density of 0.3 and above (b).

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Supplementary Figure 3. Sanger sequencing of human hippocampus cDNA using targeted

primers within APOE, aligned to hg38. Primers as listed in Supplementary Table 3.

**Supplementary Tables** 

Supplementary Table 1. Annotation priority order for genomic feature. Genomic features are based

on both Gencode and Ensembl. A priority order for annotation with a genomic feature is assigned to

avoid conflict with overlapping features. The number of 10bp bins across the genome is also shown in

the table.

Supplementary Table 2. Genome-wide association studies used in the stratified LDSC analysis.

The GWAS for Parkinson's disease and major depressive disorder do not incorporate 23&Me data.

Supplementary Table 3. Primer positions and sequences used to validate the APOE intron-3

retention event.

Supplementary Table 4. Results for heritability, enrichment, and regression coefficient from

stratified LDSC analysis. The coefficient p-values are one-sided p-values calculated from the

coefficient Z-score.

Supplementary Table 5. Significantly enriched nervous system-related GO terms for CNCRs at

density of 0.3. P-value relates to the p-value for enrichment calculated using g:Profiler and its own

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g:SCS correction method<sup>28</sup>.

### **FIGURES**

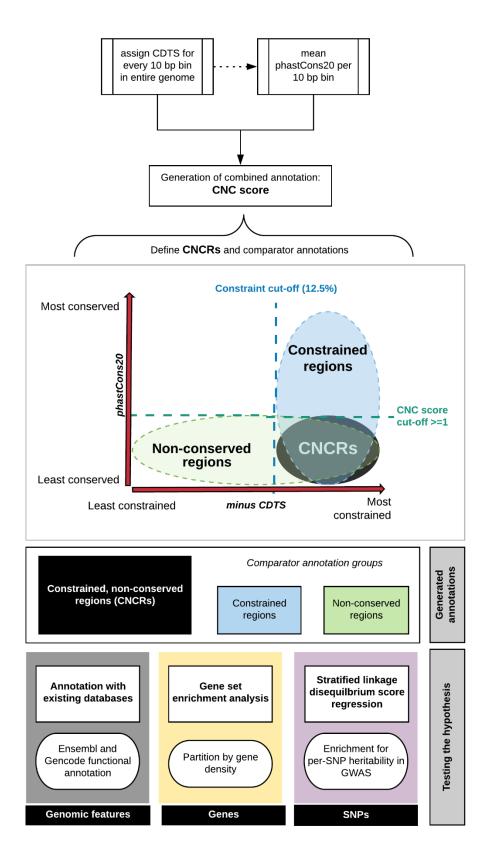


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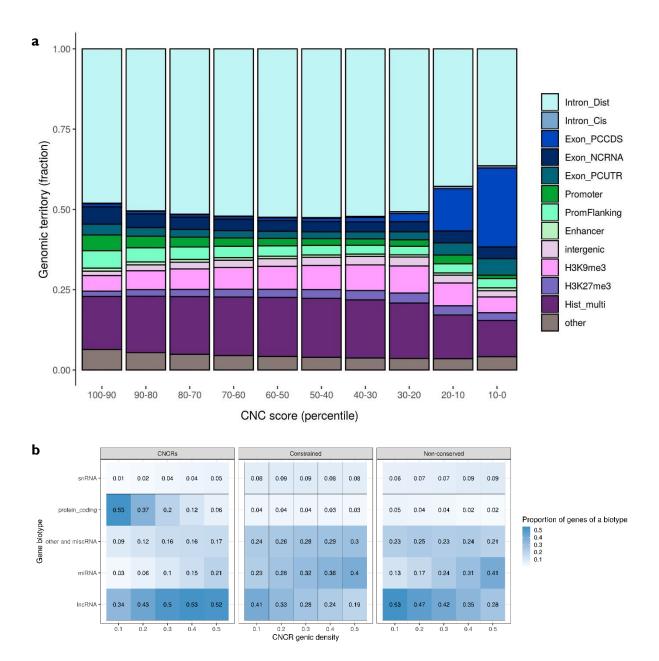


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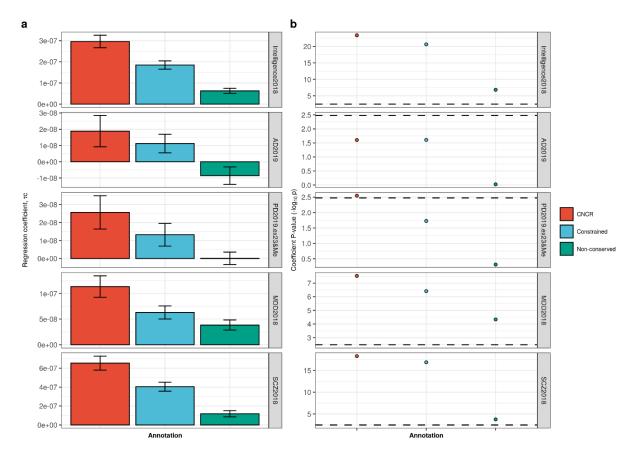


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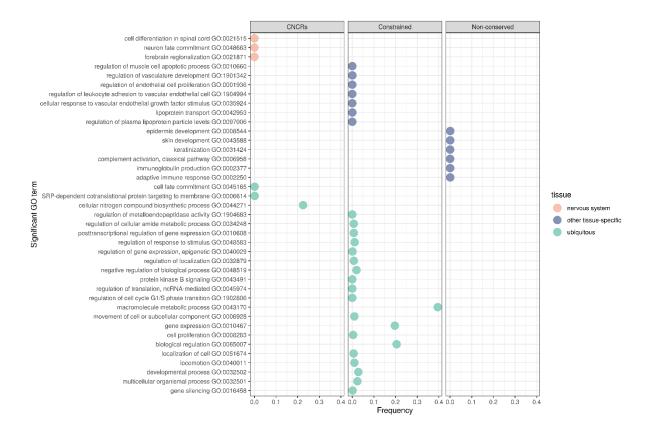


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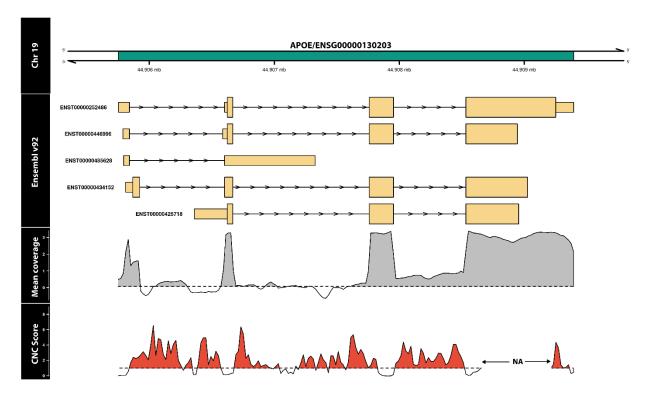


Figure 5. Annotation with CNCRs is highly granular and shows *APOE* to have a high density of CNCRs throughout its length especially in association with an intron-3 retention event in the human hippocampus.

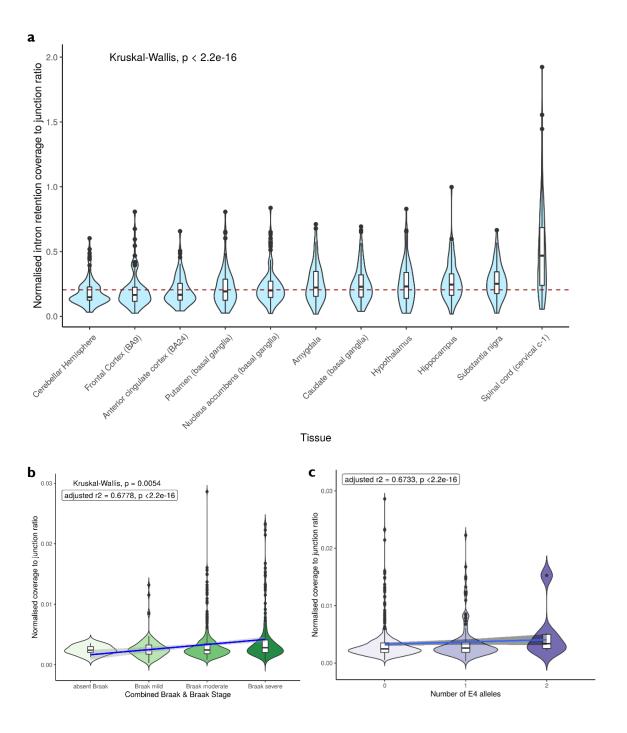


Figure 6. Quantification of intron retention usage by its normalised coverage to junction ratio across brain tissues within GTEx (a). Normalised coverage to junction ratio of the *APOE* intron-3 retention event in bulk RNA sequencing data of post-mortem frontal cortex tissue samples from 634 individuals recruited within ROSMAP studies across Braak and Braak staging (b) and *APOE*  $\epsilon$ 4 allele status (c).

#### WEB RESOURCES

| Description         | URL   |
|---------------------|---|
| CDTS metrics        | http://www.hli-opendata.com/noncoding                           |
| phastCons20 metrics | http://hgdownload.cse.ucsc.edu/goldenPath/hg38/phastCons20way/  |
| LDSC                | https://github.com/bulik/ldsc/wiki                              |
| OMIM genes          | http://api.omim.org   |
| STOPGAP database    | https://github.com/StatGenPRD/STOPGAP/blob/master/STOPGAP_data/ |
|                     | stopgap.bestld.RData  |
| Recount2            | https://jhubiostatistics.shinyapps.io/recount/                  |
| Synapse             | https://www.synapse.org/#!Synapse:syn4164376                    |
| VizER               | https://snca.atica.um.es/browser/app/vizER                      |

### INTERNATIONAL PARKINSON'S DISEASE GENOMICS CONSORTIUM (IPDGC)

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