A machine-learning approach for accurate detection of copy-number variants from exome sequencing

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Keywords: Copy-number variants, Exome sequencing, Machine learning.

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ABSTRACT

Copy-number variants (CNVs) are a major cause of several genetic disorders, making their detection an essential component of genetic analysis pipelines. Current methods for detecting CNVs from exome sequencing data are limited by high false positive rates and low concordance due to the inherent biases of individual algorithms. To overcome these issues, calls generated by two or more algorithms are often intersected using Venn-diagram approaches to identify "high-confidence" CNVs. However, this approach is inadequate, as it misses potentially true calls that do not have consensus from multiple callers. Here, we present CN-Learn, a machine-learning framework (https://github.com/girirajanlab/CN_Learn) that integrates calls from multiple CNV detection algorithms and learns to accurately identify true CNVs using caller-specific and genomic features from a small subset of validated CNVs. Using CNVs predicted by four exome-based CNV callers (CANOES, CODEX, XHMM and CLAMMS) from 503 samples, we demonstrate that CN-Learn identifies true CNVs at higher precision (~90%) and recall (~85%) rates while maintaining robust performance even when trained with minimal data (~30 samples). CN-Learn recovers twice as many CNVs compared to individual callers or Venn diagram-based approaches, with features such as exome capture probe count, caller concordance and GC content providing the most discriminatory power. In fact, about 58% of all true CNVs recovered by CN-Learn were either singletons or calls that lacked support from at least one caller. Our study underscores the limitations of current approaches for CNV identification and provides an effective method that yields high-quality CNVs for application in clinical diagnostics.

INTRODUCTION

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Copy-number variants (CNVs) are a major source for genomic variation, evolution, and disease

(Sebat et al. 2004; Redon et al. 2006; Perry et al. 2008; Girirajan et al. 2011). About 15% of

affected individuals referred for clinical genetic testing carry a disease-associated CNV (Miller et

al. 2010), making CNV detection an essential aspect of genetic analysis pipelines

(Sathirapongsasuti et al. 2011; Krumm et al. 2012). Although the clinical utility of microarrays

has not diminished (Coughlin et al. 2012), exome sequencing is becoming a prevalent

technology for genetic testing (Yang et al. 2013; Stark et al. 2016; Tan et al. 2017; Retterer et al.

2016; de Ligt et al. 2013). Several algorithms are available to call CNVs from exome sequencing

data in both clinical (Retterer et al. 2016) and disease-specific cohorts, including autism (Krumm

et al. 2012), schizophrenia (Fromer et al. 2012), epilepsy (Epilepsy Phenome/Genome Project &

Epi4K Consortium 2015), and cancer (Koboldt et al. 2012). A common strategy employed by

these CNV callers is to apply various statistical distributions to model the aggregate read depth

of the exons and use read depth fluctuations between adjacent exons to identify duplication or

deletion events (Backenroth et al. 2014; Jiang et al. 2015; Packer et al. 2015; Krumm et al. 2012;

Fromer et al. 2012).

Several themes have emerged due to variations in the approaches employed by different

CNV callers to model read-depth distributions. *First*, the distributions and algorithms chosen to

model read depth depend on the expertise of the researchers and their subjective assumptions

about the underlying data. For example, callers such as XHMM (Fromer et al. 2012) assume the

read-depth distribution to be Gaussian, while CANOES (Backenroth et al. 2014) assumes a

negative binomial distribution, CODEX (Jiang et al. 2015) assumes a Poisson distribution, and

CoNIFER (Krumm et al. 2012) makes no assumptions about the read-depth distribution. *Second*,

while every method normalizes data to eliminate noise and outliers resulting from GC and repeat

content biases, the number of samples required for normalization and the definition of outliers

are inconsistent among the callers. For example, a principal component analysis (PCA) based

method such as XHMM requires at least 50 unrelated samples for effective normalization, while

CANOES only requires as low as 15 samples (Backenroth et al. 2014). Similarly, the annotations

for "extreme" GC content differ among XHMM (<0.1 or >0.9), CODEX (<0.2 or >0.8), and

CLAMMS (<0.3 or >0.7) (Packer et al. 2015). Further, XHMM only considers exome-capture

targets between the size range of 10 bp and 10 kbp and with average coverage >10X across all

samples, while CODEX uses targets that are >20 bp long and with median coverage >20X.

CODEX eliminates targets with mappability scores <0.9, while CLAMMS eliminates regions

with scores <0.75 along with a custom list of "blacklisted" regions (Packer et al. 2015). *Fourth*,

the validation methods and the subsets of CNV calls used to estimate sensitivity and specificity

measures vary widely among the callers. For example, large CNVs (>100 kbp) validated with

microarrays and analyzed with PennCNV (Wang et al. 2007) were used to estimate the

performance of CANOES (Backenroth et al. 2014), while only a subset of CLAMMS calls with

minor allele frequency <0.1 were validated using PCR. Also, not all callers report confidence

scores for the CNVs they identify. Even when they do, their confidence scales are not directly

comparable. These issues influence the number and type of CNVs detected by each caller in a

given sample, resulting in pronounced differences in accuracy, false positive rates, and

concordance among the callers (Hong et al. 2016; Yao et al. 2017). *Finally*, studies using exome-

sequencing data to detect CNVs either utilize predictions made by a single caller (Krumm et al.

2013; Poultney et al. 2013) or use a Venn-diagram approach to identify calls with concordance

among multiple callers as "high-confidence" CNVs (Kataoka et al. 2016; Priest et al. 2016;

Bademci et al. 2016; Krumm et al. 2015). While using data from multiple callers minimizes false

positive rates, this approach discards a large subset of non-concordant CNVs, thereby reducing

the overall CNV yield (Hong et al. 2016). In addition to a low CNV yield, the reported

breakpoints of the concordant calls do not necessarily agree between callers. These limitations

associated with individual CNV callers as well as the methods used to integrate predictions from

different CNV callers necessitate a better approach to identify and prioritize clinically relevant

CNVs.

Here, we propose a machine-learning method called CN-Learn that overcomes the

limitations of high false positive and low concordance rates among calls generated by different

CNV algorithms to identify high-confidence CNVs. Our method leverages several attributes

intrinsic to each CNV call, such as GC content, mappability of the genomic region, and CNV

size, in addition to concordance among the callers. CN-Learn learns the associations between

these attributes and the presence or absence of CNVs using a small subset of validated CNVs in

the cohort (known truth), and then segregates true CNVs from false positives in the test samples

with high precision. Using exome-sequencing data and validations from 503 samples, we

demonstrate CN-Learn's ability to recover more than twice as many potentially true variants

compared to a Venn-diagram approach. Our study reiterates the limitations of existing CNV

detection and integration methods, and offers a better alternative that yields a set of high-quality

CNVs for application in clinical diagnostics.

RESULTS

We developed CN-Learn as a binary Random Forest classifier that can be trained to differentiate

true CNV predictions from false positives using a small subset of validated CNVs (**Figure 1**).

We identified twelve features that represented the extent of support from individual algorithms

and the genomic context for each CNV (see Methods). We detected statistically significant

correlations for several pairs of the quantitative features (**Figure 2; Supplemental Table 1**).

Based on a collection of decision trees built using the twelve features extracted from CNVs in

the training samples, CN-Learn estimates the probability of each CNV in the test sample to be

true (**Figure 2**). In addition to a Random Forest classifier, CN-Learn can also be built as a

Logistic Regression (LR) or Support Vector Machine (SVM) based classifier (**Supplemental**

file).

CN-Learn detects high-confidence CNVs with high precision and recall rates

To build the CN-Learn classifier, we first identified 41,791 CNV predictions from 503 samples

using four exome-based CNV callers (CANOES, Codex, CLAMMS, and XHMM). Using a read-

depth based method (**Supplemental Fig. S1)** to resolve breakpoint conflicts of overlapping CNV

predictions obtained from different callers, we identified 29,101 unique CNV events among the

503 samples (**Supplemental file**). An alternate approach to resolve breakpoint conflicts

(**Supplemental Fig. S2)** also provided the same number of unique CNV events. We selected

2,506 of these CNVs from 291 samples with microarray validations that were between 50 kbp

and 5 Mbp and spanned regions covered by microarray probes (**Supplemental Fig. S3)**. After

determining the proportion of CNVs that overlapped with microarray validations at different

thresholds (**Supplemental Table 2**), we labeled each of the selected CNVs as either "true" or

"false" based on a 10% reciprocal overlap threshold. We next used CNVs from 70% of the 291

samples to train CN-Learn as a Random Forest classifier and the remaining 30% of samples to

test its performance. Given the uneven distribution of the labels between the two CNV classes

(11% true vs. 89% false), we chose precision and recall as the measures of classifier performance

CN-Learn - Conceptual workflow

Figure 1: Overview of the CN-Learn pipeline. The CN-Learn pipeline consists of pre-processing steps (Step 1 and 2), followed by

building the classifier using training data and discriminatory features, and finally running the classifier on the test data. The complete

pipeline is outlined as follows. ***Step 1:*** CNV predictions were made using four exome-based CNV callers. While CANOES, CODEX,

CLAMMS and XHMM were used in this study, a generic pipeline can be constructed with a different set or number of callers.

Breakpoints of overlapping calls from multiple callers were then resolved. ***Step 2:*** Breakpoint-resolved CNVs were labeled as "true"

or "false" based on the overlap with "gold standard" calls and subsequently used to train CN-Learn. ***Step 3:*** Caller-specific and

genomic features were extracted for the labeled CNVs in the training and testing set. ***Step 4:*** CN-Learn was trained as a Random

Forest classifier using the extracted features of the CNVs in the training set to make predictions on the CNVs from the testing set.

A

CN-Learn - Random Forest Model

Step 1: Build decision trees/rules (Training)

B

Correlation among the predictors of CN-Learn

Step 2: Test each CNV through the decision trees (Testing)

C

Distribution of predicted probability scores (excludes zero)

Figure 2: Illustration of the Random Forest model used to build CN-Learn. (A) The inner workings of the random forest model

used for training CN-Learn is shown. Twelve features were used to grow 100 trees with different subsamples of predictors and

training data to classify each CNV in the test set as either "True" or "False". If the predicted probability score was greater than 0.5, the

CNV call was classified as "True". Calls with predicted probability score <0.5 were labeled as "False". **(B)** A Spearman rank

correlation between pairs of quantitative predictors used by the CN-Learn classifier is shown. The color of the circles indicates the

direction of the correlation, while the size of the circles indicates the strength of the correlation. The correlation scores are provided in

the supplemental file (**Supplemental Table 1**). **(C)** The frequency of microarray validated and invalidated CNVs, distributed across

20 bins of increasing predicted probability scores, is shown. For the probability bins less than 0.5, the proportion of CNVs that were

validated was higher than the proportion of CNVs that was not validated. This indicated that classification score of 0.5 is an

appropriate threshold for distinguishing "true" and "false" CNVs.

(**Supplemental Table 2**). We captured the aggregate performance of CN-Learn using ten

random draws of training data (10-fold cross validation), stratified by sample. CN-Learn used the

twelve predictors supplied with each CNV in the test set (see Methods) and classified the calls as

either "true" or "false" at 91% precision and 86% recall rates. The overall diagnostic ability of

the binary classifier, measured as the area under the Receiver Operating Characteristic (ROC)

curve, was 95% (**Figure 3A**). Despite sampling different sets of training data for each iteration

during cross-validation, the performance of CN-Learn was consistent across all ten iterations for

both precision (91±5%) and recall rates (86±5%) (**Figure 3B**).

We also assessed the relative importance of each feature towards making accurate CNV

predictions by calculating the Gini index (defined as the total decrease in improvements to the

node purity for all splits on each feature averaged over all trees in the forest) (Breiman 2001).

We found that features such as the number of exome capture probes spanning a given call, the

extent to which CANOES agreed with a CNV prediction, concordance among the callers, and

GC content provided the most discriminatory power to the classifier (**Figure 3C**). Post-

classification analysis of the concordance profile indicated that only 34% of all CNVs classified

as "true" had support from all the four callers, while the remaining 66% lacked support from at

least one caller (**Supplemental Fig. S4**). Overall, these results highlight the ability of CN-Learn

to look beyond the single measure of concordance typically used in a Venn-diagram based

approach, and to utilize the discriminatory power of additional variables to identify high-

confidence CNVs in a systematic manner.

Performance of CN-Learn is robust across varying CNV sizes and training sets

We independently trained CN-Learn using varying proportions of training data (between 10%

and 70% in increments of 10%) and observed steady performance gains with increase in the

number of training samples (**Figure 3A**). Interestingly, even when the classifier was built using

just 10% of the total samples (n=29 samples), we obtained 90% precision and a recall rate of

75%, indicating the robustness of the classifier when learning from minimal training data. We

further trained CN-Learn independently at four size ranges of CNVs and observed a modest

increase in precision with increase in CNV size (90% for 50-100 kbp CNV to 97% for 0.5-5 Mbp

CNV) (**Figure 3D**). In fact, the precision achieved by CN-Learn at each size interval was

Figure 3: Characteristics of the CN-Learn binary Random Forest classifier. (A) Receiver operating characteristic (ROC) curves

indicating the trade-off between the precision and recall rates when CN-Learn was trained as a Random Forest classifier are shown.

Each curve represents the performance achieved when using different proportions of samples to train CN-Learn, starting from 10% up

to 70% in increments of 10%. The results shown were from experiments aggregated across 10-fold cross validation. **(B)** Variability

observed in the precision and recall measures during the 10-fold cross validation at various proportions of training data is shown. Both

measures varied within $\pm5\%$ of their corresponding averages. **(C)** Precision rates for CNVs when CN-Learn was trained at four

different size ranges compared to the precision rates of CNVs from individual callers are shown. Precision rates for CN-Learn were

estimated as its classification accuracy (True positives/ [True positives + False positives]), while the precision rates for the individual

callers were calculated as the proportion of CNVs at each size range that were validated by the microarray calls. **(D)** The relative

importance of each genomic and caller-specific feature supplemented to CN-Learn is shown. Data shown here are the averages of the

values obtained across 10-fold cross-validation after using 70% of the samples for training.

substantially higher than the precision achieved by the individual CNV callers. We also observed

comparable precision and recall rates when CN-Learn was run on breakpoint-resolved CNVs

obtained by merging overlapping predictions (**Supplemental Fig. S5**). While the performance of

the Random Forest classifier was robust, Logistic Regression & SVM classifiers failed to match

its performance (**See Supplemental file**; **Supplemental Figs. S6 & S7**).

We next assessed the performance of CN-Learn by considering calls made by CLAMMS

as the truth set and classified CNVs obtained from predictions made by the other three callers

(CANOES, CODEX and XHMM). We categorized 25,019 breakpoint-resolved CNVs

(**Supplemental Fig. S3**) from all 503 samples as either "true" or "false" based on their

intersection (10% reciprocal overlap) with CNVs predicted by CLAMMS. Given the higher

resolution of CNVs detected from exome data relative to SNP microarrays, we used a total of

16,497 CNVs between 5 kbp and 5 Mbp in size to build CN-Learn (**Supplemental Fig. S3**). CN-

Learn achieved an aggregate precision rate of 94% with an overall recall rate of 85% during the

10-fold cross validation, and achieved comparable performance when independently trained with

CNVs at different training sample proportions (**Supplemental Fig. S8A**). Performance

variability observed both during cross-validation and across the size ranges were comparable to

the variability observed when microarray was used as the truth set (**Supplemental Figs. S8B &**

S8C). Among the features used by CN-Learn to classify the CNVs, the relative importance of the

mappability score was the highest, with GC content being the next important feature

(**Supplemental Fig. S8C**). While caller-specific features contributed to the discriminatory power

of CNV classification when microarray was used for validation, genomic features played a more

prominent role when a sequence-based method was used for validation (**Supplemental Fig. S9**).

These results show that the performance of CN-Learn is robust with minimal training data, at

different size ranges and even when orthogonal validations are not available.

CN-Learn recovers true CNVs that lack complete concordance among callers

To assess the ability of CN-Learn to correctly identify true CNVs that lack support from multiple

callers, we analyzed the concordance profile of all CNVs classified by CN-Learn as "true", based

on microarray validations, before and after CN-Learn classification. Using a single random draw

of 29 samples (10%) to train CN-Learn and 262 samples as the test set, we obtained predictions

for 2,245 CNVs with microarray validations (**Figure 4A)**. Among these predictions, only

122/2,245 CNVs (5.4%) were supported by all four CNV callers prior to classification by CN-

Learn. The strong concordance of the four methods for these CNV predictions was corroborated

by a high microarray validation rate (116/122, 95%) (**Figure 4A**). In contrast, CNVs that lacked

support from one or more callers were less likely to intersect with microarray data. For example,

only 41% (11/27) of the CNVs with support from XHMM, CODEX and CLAMMS intersected

with microarray data. After classification by CN-Learn, 84% (266/315) of all CNVs labeled as

"true" intersected with microarray calls, indicating the high classification accuracy achieved by

the classifier (**Figure 4A**). All CNVs classified as "true" from this analysis are provided in

Supplemental Table 3. Of the 266 CNVs validated by microarrays and correctly identified as

"true" by the classifier, only 42% (112/266) were supported by all four CNV callers. The

remaining 58% (154/266) were either singletons or calls that lacked support from at least one

caller, and would have been excluded if complete concordance was used as the only determinant

for selecting high confidence CNVs. For example, 13% of all true CNVs (35/266) recovered by

CN-Learn were missed by CLAMMS but were identified by one or more of the other callers,

reiterating the limitations of using a single exome-based CNV caller for variant predictions.

Further, CN-Learn managed to recover 97% (112/116) of the true CNVs validated by

microarrays that were supported by all of the four callers. Although these 112 CNVs could have

been identified by a simple caller intersection approach, CN-Learn was uniquely able to recover

CNVs that lacked support from at least one other caller. For example, CN-Learn classified 66

CNVs supported by CANOES, CODEX and XHMM as "true", of which 51% (34/66) were also

validated by microarrays. This result is notable because, without using CN-Learn for

classification, only 31% (46/148) of CNVs supported by CANOES, CODEX and XHMM would

intersect with the microarray calls, indicating the inherently high false positive rate associated

with simply intersecting calls from individual callers using a Venn diagram. Our results indicate

that in addition to correctly identifying almost every "true" CNV reported by the four callers,

CN-Learn overcame the limitations of the Venn-diagram based approach and recovered 154

additional high-confidence CNVs with sub-optimal concordance, thereby improving the CNV

yield by 2.37-fold (266/112). Further, the true positive calls recovered by CN-Learn spanned the

entire spectrum of CNV size range (**Figure 4B**). We also obtained comparable improvements in

CNV yield when CNVs predicted by CLAMMS were used as the truth set (**Supplemental file**;

Supplemental Figs. S10 & S11, Supplemental Table 3).

Figure 4: Concordance profile of CNVs before and after classification by CN-Learn using microarray calls as the "gold standard" validation set. (A) Venn diagrams are shown for CNVs (≥50 kbp) identified from a random draw of 262 samples out of the total 291 samples before (**Top panels**) and after (**Bottom panels**) classification by CN-Learn. The Venn diagrams show the overlap of calls among the four callers (**Top left**) versus those that were validated by microarrays (**Top right**). Venn diagrams depicting the overlap of all "true" calls among the four callers after classification by CN-Learn (**Bottom left**) and "true" calls that were also validated by microarrays are shown (**Bottom right**). **(B)** The distribution of all calls within the 262 samples based on the

269 probability scores (Y-axis) predicted by CN-Learn across four size ranges (X-axis) is shown. The number of overlaps of each CNV

270 with exome-based CNV callers is represented by different colors. CNVs that validated with microarrays are indicated by filled circles,

271 while CNVs that did not validate with microarrays are represented by hollow circles.

DISCUSSION

Exome sequencing is a cost-effective assay to accurately identify single base pair mutations and small insertions or deletions within protein-coding genes, which are more likely to cause disease than mutations in other regions of the genome (Bamshad et al. 2011). Even with the emergence of whole genome sequencing (WGS) techniques, exome sequencing has continued to flourish, resulting in an increase in the availability of datasets for analysis. This widespread data availability has allowed for repurposing data generated for single nucleotide variant detection to identify CNVs as well (Koboldt et al. 2013). Given the high false positive rates among calls reported by individual exome-based callers (Tan et al. 2014), existing CNV identification pipelines that leverage more than one calling algorithm have depended on naïve Venn diagram-based integration approaches to identify high-confidence CNVs. One reason for the overwhelming trust in such approaches could be the fact that the self-reported performance measures of each individual algorithm are typically high. Therefore, there is little reason to doubt that performance variations among the callers could affect the precision of Venn diagram-based integration approaches. While we found that the likelihood of a CNV prediction to be true increased with an increase in the number of callers supporting it (**Supplemental Fig. S12**), there are two key limitations of this approach. *First*, even among completely concordant predictions, the observed false positive rates were not zero. Inflated false positives pose a large hurdle for researchers interested in identifying clinically relevant CNVs, as it is time consuming to validate a large number of false positive CNVs using orthogonal methods. *Second*, the Venn diagram approach failed to identify a large subset of non-concordant or singleton CNVs supported by microarray validations. In fact, approximately one true CNV (>50 kbp) per individual in our cohort would have been discarded under a Venn-diagram based approach. This evidence reiterates that Venn diagram-based approaches do not have the required precision for usage in both clinical and research settings.

The utility of alternate methods for CNV detection hence rests on the ability to both eliminate false positives among completely concordant predictions and recover true CNVs that lack adequate support from multiple callers. Therefore, instead of addressing the shortcomings of existing methods by developing yet another CNV detection tool, our study focused on offering a reliable integrative approach. In this study, we demonstrate a machine-learning approach that leverages caller-specific and genomic contexts from a subset of validated calls to identify high-confidence CNVs more thoroughly than individual callers on their own or Venn diagram-based

approaches. CN-Learn achieved precision as high as 94% while doubling the CNV yield, showing

its ability to capture singletons that would have been missed by other approaches. Importantly, the

precision of CN-Learn is robust to variation in CNV size, ratio of training to testing samples, and

validation method/type, indicating the utility of CN-Learn in a variety of clinical or research

contexts. The use of multiple variables that capture the genomic context of each CNV in addition to

caller concordance is a major reason for the high recovery and precision rates achieved by CN-

Learn. In fact, GC content and mappability scores were some of the most useful features in

predicting true CNVs.

One of the limitations of CN-Learn is its dependency on a small set of biologically validated

CNVs. Our study leverages microarray validations to evaluate the predictions of each caller and to

label the breakpoint-resolved CNV predictions as either "true" or "false". While microarrays may

not be considered as a "gold standard" for CNV detection, we were able to use microarray calls as

an orthogonal validation to demonstrate the utility of CN-Learn. Our study also serves as a proof-of-

principle for future studies that could utilize CN-Learn with "gold-standard" CNVs curated from

multiple genomic technologies, such as PacBio SMRT sequencing (John et al. 2009), Illumina long-

read sequencing (Voskoboynik et al. 2013), 10X linked-read sequencing (Zheng et al. 2016),

BioNano Genomics genome mapping (Lam et al. 2012; Mak et al. 2016) or PCR. Another limitation

of our study is the time and computational capacity required to run four different CNV callers. Each

CNV calling algorithm extracts read-depth information for each sample using tools such as

Samtools (Li et al. 2009), Bedtools (Quinlan and Hall 2010) or Genome Analysis Toolkit (GATK)

(McKenna et al. 2010), which are often the rate-limiting steps for each pipeline. Future studies

could simplify this data extraction layer by using a single read-depth tool without adversely

impacting the results of the individual callers. Finally, we also acknowledge the complexity

associated with resolving breakpoint conflicts from multiple callers that arise during data

integration. While we presented two strategies to resolve breakpoints of concordant CNVs (see

Methods), future studies could explore more effective strategies before using CN-Learn. As

population-scale projects continue to generate large exome-sequencing datasets, the need and

importance of robust CNV integration approaches such as CN-Learn is apparent.

Overall, CN-Learn integrates predictions from multiple CNV callers and overcomes the

limitations of existing integration approaches, even when the availability of samples with biological

validations is limited. Although we chose a set of four CNV calling algorithms with microarray

validations, CN-Learn framework can be extended to use different sets of CNV callers or validation

types to identify high-confidence CNVs, making our framework easy to adopt and customize. This

can allow clinicians and researchers to use their preferred callers and validation methods to detect

CNVs from exomes. Our results suggest that a small set of high-quality validated CNVs and an

objective machine learning method can help alleviate several shortcomings of existing integration

approaches to generate an informed set of clinically relevant CNVs.

METHODS

Samples

We obtained exome sequencing data from 503 individuals in the Simons Variation in Individual
Project (SVIP), which were generated using the Agilent Sure-Select Human All Exon v2.0 capture
kit containing 182,430 autosomal probes (Spiro and Chung 2012). Overall, 187 individuals within
this cohort carry the 16p11.2 deletion, and 143 individuals carry the reciprocal duplication. Single
nucleotide polymorphism (SNP) based microarray data were available for 291 samples, and CNVs
>100 kbp were confirmed experimentally using array CGH (Duyzend et al. 2016).

Exome CNV callers

We chose four exome CNV callers to obtain the initial sets of CNV calls: CANOES, CLAMMS
(v1.1), CODEX (v0.2.2), and XHMM (Backenroth et al. 2014; Packer et al. 2015; Jiang et al. 2015;
Fromer et al. 2012). As the SVIP samples were sequenced in two sets (312 and 191 samples), each
set of samples was treated as individual batches for running the CNV-calling pipelines. CANOES
and CODEX were run using the default parameters. CLAMMS models were built with the
assumption that the samples were independent without accounting for batch effects, and XHMM
was run with a "PVE_mean_factor" parameter value of 0.7. Running the four CNV callers yielded
41,791 calls of varying sizes (**Supplemental Fig. S13**). These original CNV calls (deletions and
duplications) were then characterized based on their level of concordance among the four callers
(**Supplemental file**).

Resolving breakpoint conflicts for overlapping predictions

Multiple CNV callers can make predictions that overlap with each other in a given genomic region.
Treating such overlapping predictions with different breakpoints as separate CNVs would result in
double-counting the calls for the same CNV event. Therefore, it is important to merge concordant
predictions and represent them as a single event for downstream analyses. We developed a five-step
procedure that uses fluctuations in local read depth to resolve breakpoint conflicts among
overlapping predictions by identifying the most likely start and end coordinates of the underlying
event**.** A detailed explanation of this strategy is presented in the **Supplemental file (Supplemental
Figs. S1 & S14)**. As an alternate strategy, we resolved breakpoint conflicts by simply selecting the
smallest and largest coordinates among the overlapping predictions as the start and end coordinates

of the underlying CNV event. This strategy is also described in the **Supplemental file**

(Supplemental Fig. S2). Applying both methods to the 41,791 CNVs detected in the SVIP samples

yielded 8,382 unique breakpoint-resolved CNV events, in addition to the 20,719 singleton calls

(Supplemental Fig. S3).

Microarray validations

SNP microarray data were generated by the SVIP consortium (Duyzend et al. 2016) using Illumina

OmniExpress-12 microarrays for 272 samples and OmniExpress-14 for 19 samples. PennCNV

(v.1.0.3) was used to identify CNVs from microarray data for all 291 individuals using standard

parameters (Wang et al. 2007). Individual and family-based (trios and quads) CNV calls were

combined for autosomal chromosomes, while CNVs on chromosome X were called only at the

individual level. CNV calls with ≥ 1 bp overlap or gaps $<20\%$ of the total CNV length and <50 kbp

were merged. CNVs ≥ 50 kbp in length and containing ≥ 5 SNP target probes were subsequently

considered for further analyses.

Feature selection for CN-Learn classifier

We identified twelve features that represent the extent of support provided by the four individual

callers and genomic context as predictors of true CNVs to the CN-Learn Random Forest classifier.

Since we used four callers in our study, the extent of overlap calculated during the breakpoint-

resolution process (**Supplemental file** & **Supplemental Fig. S1**) served as individual predictors.

Concordance count and read-depth ratio (RD_{ratio}) for both breakpoint-resolved concordant calls and

singletons were also supplied as features. As individual algorithms use different GC and repeat

content (mappability) thresholds to classify CNV predictions as outliers, CNVs with extreme GC

content or low mappability could be predicted by one caller but discarded as an outlier by the other

callers. To take this into account, we extracted GC content data using the "nuc" option in bedtools

(Quinlan and Hall 2010) and mappability scores (Derrien et al. 2012) using the

"bigWigAverageOverBed" option in kentUtils (Kent et al. 2010) for use as predictors. Similarly, the

efficacy of CNV detection can vary across chromosomes, size ranges, and CNV type

(duplication/deletion). To take these variations into account, we used chromosome number, CNV

size, CNV type and the number of exome capture probes as the final set of CN-Learn features.

Probability estimation and classification using CN-Learn

CN-Learn leverages the features extracted for the CNVs in the training samples to build a Random Forest (Breiman 2001) classifier with hundreds of decision trees and estimates the probability of each CNV in the test samples to be true (**Figure 2A**). Decision trees have been shown to perform well when the distribution of observations is unbalanced between the classes of interest (Cieslak and Chawla 2008). Given the high false positive rates of CNV callers, an uneven split between the number of true and false predictions is likely to occur in clinical samples. In the samples we analyzed, 10% of the CNVs overlapped with the truth sets derived from microarray calls at a 10% reciprocal overlap threshold (**Supplemental Table 2**). To address the imbalance between the number of true and false CNVs, we stratified the training data by sample to accurately reflect the clinical setting as follows: CNVs in p% of the samples were used for training, and the remaining (1-p)% were used as the testing set. For a random forest built with "N" trees, "M" predictors and "C" classes, the probability of an observation "o" belonging to the class "c" ("true" or "false") can be expressed as $p_{o,c} = \Pr(Y = c \mid X = x_i)$, where x_i is a vector that captures the values for each of the 12 predictors and Y is the outcome variable. The probability $p_{o,true}$ of the CNV "o" being "true" in the test set was then measured as the proportion of trees in the forest that assigned it to the "true" class. Specifically, the probability of a CNV prediction can be represented as:

$$P_{o,true} = \Pr(Y = \text{True} \mid X = x_i)$$
$$= \frac{\text{Number of trees that identify the CNV as True}}{\text{Number of trees in the forest}}$$

where X represents the values of the following features for the observation "o":

x_1 = Overlap proportion with CANOES

x_2 = Overlap proportion with CODEX

x_3 = Overlap proportion with CLAMMS

x_4 = Overlap proportion with XHMM

x_5 = Concordance among callers

x_6 = Read depth ratio

x_7 = Chromosome number

x_8 = CNV type (Duplication/Deletion)

x_9 = CNV size

x_{10} = Target probe count

x_{11} = GC Ccontent

x_{12} = Mappability

CNV calls with predicted probability score >0.5 were then classified as "true". We selected this

cutoff based on the distribution of validated ("true") and invalidated ("false") CNVs across the

predicted probability scores (ranging between 0 and 1). For both duplications and deletions, the

proportion of true calls compared to false calls was higher for CNVs with probability scores >0.5

(**Figure 2C**). This indicated that at a 0.5 threshold, the classifier recovers as many true CNVs

(recall) as possible without compromising on the false positive rate (precision).

Statistical analysis

All statistical analyses, including the calculation of precision-recall rates, feature importance, and

ROC areas, were performed using the Python library scikit-learn (v 0.18.1) (Pedregosa et al. 2012).

Plots were generated using the R package ggplot2 and the Python library matplotlib.

Code availability

CN-Learn is available as an open-source software at *https://github.com/girirajanlab/CN_Learn*.

Sample input files to test the CN-Learn pipeline are provided with the software package. Both the

exome and microarray-based CNV caller pipelines and the parameters used to obtain the original

CNV calls are also available at

https://github.com/girirajanlab/CN_Learn/tree/master/scripts/callers/.

DECLARATIONS
Ethics approval and consent to participate

As these data were de-identified, all of our samples were exempt from IRB review and conformed to the Helsinki Declaration. No other approvals were needed for the study.

Consent for publication

All authors agree and consent for publication of the manuscript.

Availability of data and materials

BAM files for all samples, aligned to the hg19 reference genome, were obtained from the Simons Foundation Autism Research Initiative (SFARI) via SFARI Base following appropriate approvals (*https://www.sfari.org/resource/sfari-base/*). The scripts used to analyze data and generate the plots are available in the "research" directory of CN-Learn repository of CN-Learn (*https://github.com/girirajanlab/CN_Learn/tree/master/scripts/research/)*. Any intermediate datasets generated during this study are available from the corresponding author upon request.

Competing interests

The authors declare that no competing interests exist in relation to this work.

Funding

This work was supported by R01-MH107431, R01-GM121907, SFARI Pilot Grant 399894, and resources from the Huck Institutes of the Life Sciences (to SG). This work was funded partly by the Big Data to Knowledge (BD2K) pre-doctoral training program (T32LM012415) from the National Institutes of Health (to VK). The funding bodies had no role in data collection, analysis, and interpretation.

Authors' contributions

VK and SG conceived the project. VK performed the analyses, generated the plots/images, and wrote and revised the manuscript; MJ organized the images for publication and assisted with revision to the manuscript; GJ and NK collected data and performed parts of the analyses; SG

487 supervised the research and wrote and revised the manuscript. All authors read and approved the
488 final draft of the manuscript.
489

Acknowledgements
We thank Naomi Altman (Penn State), Dajiang Liu (Penn State), Arjun Krishnan (Michigan State),
Cooduvalli Shashikant (Penn State), Lucilla Pizzo (Penn State), and Shaun Mahony (Penn State) for
constructive comments on the manuscript.

REFERENCES

Backenroth D, Homsy J, Murillo LR, Glessner J, Lin E, Brueckner M, Lifton R, Goldmuntz E,

Chung WK, Shen Y. 2014. CANOES: Detecting rare copy number variants from whole exome

sequencing data. *Nucleic Acids Res* **42**: 1–9.

Bademci G, Mahdieh N, Bonyadi M, Duman D, Cengiz FB, Menendez I, Horta OD, Shirkavand A,

Zeinali S, Subasioglu A, et al. 2016. Comprehensive Analysis via Exome Sequencing

Uncovers Genetic Etiology in Autosomal Recessive Non-Syndromic Deafness in a Large

Multiethnic Cohort. *Genet Med* **18**: 364–371.

Bamshad MJ, Ng SB, Bigham AW, Tabor HK, Emond MJ, Nickerson DA, Shendure J. 2011.

Exome sequencing as a tool for Mendelian disease gene discovery. *Nat Rev Genet* **12**: 745–

755.

Breiman L. 2001. Random forests. *Mach Learn* **45**: 5–32.

Cieslak DA, Chawla N V. 2008. Learning Decision Trees for Unbalanced Data. *Mach Learn Knowl*

Discov Databases **5211**: 241–256.

Coughlin CR 2nd, Scharer GH, Shaikh TH. 2012. Clinical impact of copy number variation analysis

using high-resolution microarray technologies: advantages, limitations and concerns. *Genome*

Med **4**: 80.

de Ligt J, Boone PM, Pfundt R, Vissers LE, Richmond T, Geoghegan J, O'Moore K, de Leeuw N,

Shaw C, Brunner HG, et al. 2013. Detection of clinically relevant copy number variants with

whole-exome sequencing. *Hum Mutat* **34**: 1439–1448.

Derrien T, Estellé J, Sola SM, Knowles DG, Raineri E, Guigó R, Ribeca P. 2012. Fast computation

and applications of genome mappability. *PLoS One* **7**: e30337.

Duyzend MH, Nuttle X, Coe BP, Baker C, Nickerson DA, Bernier R, Eichler EE. 2016. Maternal

Modifiers and Parent-of-Origin Bias of the Autism-Associated 16p11.2 CNV. *Am J Hum Genet*

98: 45–57.

Epilepsy Phenome/Genome Project & Epi4K Consortium. 2015. Copy number variant analysis from

exome data in 349 patients with epileptic encephalopathy. *Ann Neurol* **78**: 323–328.

Fromer M, Moran JL, Chambert K, Banks E, Bergen SE, Ruderfer DM, Handsaker RE, McCarroll

SA, O'Donovan MC, Owen MJ, et al. 2012. Discovery and statistical genotyping of copy-

number variation from whole-exome sequencing depth. *Am J Hum Genet* **91**: 597–607.

Girirajan S, Campbell CD, Eichler EE. 2011. Human Copy Number Variation and Complex Genetic

Disease. *Annu Rev Genet* **45**: 203–226.

Hong CS, Singh LN, Mullikin JC, Biesecker LG. 2016. Assessing the reproducibility of exome copy

number variations predictions. *Genome Med* **8**: 1–11.

Jiang Y, Oldridge DA, Diskin SJ, Zhang NR. 2015. CODEX: A normalization and copy number

variation detection method for whole exome sequencing. *Nucleic Acids Res* **43**: e39.

John E, Adrian F, Jeremy G, Khai L, John L, Geoff O, Paul P, Rank D, Baybayan P, Bettman B, et

al. 2009. Real-Time DNA Sequencing from Single Polymerase Molecules. *Science* **323**: 133–

138.

Kataoka M, Matoba N, Sawada T, Kazuno AA, Ishiwata M, Fujii K, Matsuo K, Takata A, Kato T.

2016. Exome sequencing for bipolar disorder points to roles of de novo loss-of-function and

protein-altering mutations. *Mol Psychiatry* **21**: 885–893.

Kent WJ, Zweig AS, Barber G, Hinrichs AS, Karolchik D. 2010. BigWig and BigBed: Enabling

browsing of large distributed datasets. *Bioinformatics* **26**: 2204–2207.

Koboldt DC, Steinberg KM, Larson DE, Wilson RK, Mardis ER. 2013. The next-generation

sequencing revolution and its impact on genomics. *Cell* **155**: 27–38.

Koboldt DC, Zhang Q, Larson DE, Shen D, McLellan MD, Lin L, Miller CA, Mardis ER, Ding L,

Wilson RK. 2012. VarScan 2: Somatic mutation and copy number alteration discovery in

cancer by exome sequencing. *Genome Res* **22**: 568–576.

Krumm N, O'Roak BJ, Karakoc E, Mohajeri K, Nelson B, Vives L, Jacquemont S, Munson J,

Bernier R, Eichler EE. 2013. Transmission disequilibrium of small CNVs in simplex autism.

Am J Hum Genet **93**: 595–606.

Krumm N, Sudmant P, Ko A. 2012. Copy number variation detection and genotyping from exome

sequence data. *Genome Res* **22**: 1525–1532.

Krumm N, Turner TN, Baker C, Vives L, Mohajeri K, Witherspoon K, Raja A, Coe BP, Stessman

HA, He ZX, et al. 2015. Excess of rare, inherited truncating mutations in autism. *Nat Genet* **47**:

582–588.

Lam ET, Hastie A, Lin C, Ehrlich D, Das SK, Austin MD, Deshpande P, Cao H, Nagarajan N, Xiao

M, et al. 2012. Genome mapping on nanochannel arrays for structural variation analysis and

sequence assembly. *Nat Biotechnol* **30**: 771–776.

Li H, Handsaker B, Wysoker A, Fennell T, Ruan J, Homer N, Marth G, Abecasis G, Durbin R.

2009. The Sequence Alignment/Map format and SAMtools. *Bioinformatics* **25**: 2078–2079.

Mak ACY, Lai YYY, Lam ET, Kwok TP, Leung AKY, Poon A, Mostovoy Y, Hastie AR, Stedman

W, Anantharaman T, et al. 2016. Genome-wide structural variation detection by genome

mapping on nanochannel arrays. *Genetics* **202**: 351–362.

McKenna A, Hanna M, Banks E, Sivachenko A, Cibulskis K, Kernytsky A, Garimella K, Altshuler

D, Gabriel S, Daly M, et al. 2010. The Genome Analysis Toolkit: A MapReduce framework

for analyzing next-generation DNA sequencing data. *Genome Res* **20**: 254–260.

Miller DT, Adam MP, Aradhya S, Biesecker LG, Brothman AR, Carter NP, Church DM, Crolla JA,

Eichler EE, Epstein CJ, et al. 2010. Consensus Statement: Chromosomal Microarray Is a First-

Tier Clinical Diagnostic Test for Individuals with Developmental Disabilities or Congenital

Anomalies. *Am J Hum Genet* **86**: 749–764.

Packer JS, Maxwell EK, O'Dushlaine C, Lopez AE, Dewey FE, Chernomorsky R, Baras A, Overton

JD, Habegger L, Reid JG. 2015. CLAMMS: A scalable algorithm for calling common and rare

copy number variants from exome sequencing data. *Bioinformatics* **32**: 133–135.

Pedregosa F, Varoquaux G, Gramfort A, Michel V, Thirion B, Grisel O, Blondel M, Prettenhofer P,

Weiss R, Dubourg V, et al. 2012. Scikit-learn: Machine Learning in Python. *J Mach Learn Res*

12: 2825–2830.

Perry G, Yang F, Marques-Bonet T, Murphy C. 2008. Copy number variation and evolution in

humans and chimpanzees. *Genome Res* **18**: 1698–1710.

Poultney CS, Goldberg AP, Drapeau E, Kou Y, Harony-Nicolas H, Kajiwara Y, De Rubeis S,

Durand S, Stevens C, Rehnström K, et al. 2013. Identification of small exonic CNV from

whole-exome sequence data and application to autism spectrum disorder. *Am J Hum Genet* **93**:

607–619.

Priest JR, Osoegawa K, Mohammed N, Nanda V, Kundu R, Schultz K, Lammer EJ, Girirajan S,

Scheetz T, Waggott D, et al. 2016. De Novo and Rare Variants at Multiple Loci Support the

Oligogenic Origins of Atrioventricular Septal Heart Defects. *PLoS Genet* **12**: 1–25.

Quinlan AR, Hall IM. 2010. BEDTools: A flexible suite of utilities for comparing genomic features.

Bioinformatics **26**: 841–842.

Redon R, Ishikawa S, Fitch KR, Feuk L, Perry GH, Andrews TD, Fiegler H, Shapero MH, Carson

AR, Chen W, et al. 2006. Global variation in copy number in the human genome. *Nature* **444**:

444–454.

Retterer K, Juusola J, Cho MT, Vitazka P, Millan F, Gibellini F, Vertino-Bell A, Smaoui N, Neidich

J, Monaghan KG, et al. 2016. Clinical application of whole-exome sequencing across clinical

indications. *Genet Med* **18**: 696–704.

Sathirapongsasuti JF, Lee H, Horst BAJ, Brunner G, Cochran AJ, Binder S, Quackenbush J, Nelson

SF. 2011. Exome sequencing-based copy-number variation and loss of heterozygosity

detection: ExomeCNV. *Bioinformatics* **27**: 2648–2654.

Sebat J, Lakshmi B, Troge J, Alexander J, Young J, Lundin P, Månér S, Massa H, Walker M, Chi

M, et al. 2004. Large-scale copy number polymorphism in the human genome. *Science* **305**:

525–8.

Spiro JE, Chung WK. 2012. Simons Variation in Individuals Project (Simons VIP): A Genetics-

First Approach to Studying Autism Spectrum and Related Neurodevelopmental Disorders.

Neuron **73**: 1063–1067.

Stark Z, Tan TY, Chong B, Brett GR, Yap P, Walsh M, Yeung A, Peters H, Mordaunt D, Cowie S,

et al. 2016. A prospective evaluation of whole-exome sequencing as a first-tier molecular test

in infants with suspected monogenic disorders. *Genet Med* **18**: 1090–1096.

Tan R, Wang Y, Kleinstein SE, Liu Y, Zhu X, Guo H, Jiang Q, Allen AS, Zhu M. 2014. An

Evaluation of Copy Number Variation Detection Tools from Whole-Exome Sequencing Data.

Hum Mutat **35**: 899–907.

Tan TY, Dillon OJ, Stark Z, Schofield D, Alam K, Shrestha R, Chong B, Phelan D, Brett GR, Creed

E, et al. 2017. Diagnostic impact and cost-effectiveness of whole-exome sequencing for

ambulant children with suspected monogenic conditions. *JAMA Pediatr* **171**: 855–862.

Voskoboynik A, Neff NF, Sahoo D, Newman AM, Pushkarev D, Koh W, Passarelli B, Fan HC,

Mantalas GL, Palmeri KJ, et al. 2013. The genome sequence of the colonial chordate, Botryllus

schlosseri. *Elife* **2013**: 1–24.

Wang K, Li M, Hadley D, Liu R, Glessner J, Grant SFA, Hakonarson H, Bucan M. 2007.

PennCNV : An integrated hidden Markov model designed for high-resolution copy number

variation detection in whole-genome SNP genotyping data. *Genome Res* **17**: 1665–1674.

Yang Y, Muzny DM, Reid JG, Bainbridge MN, Willis A, Ward PA, Braxton A, Beuten J, Xia F,

Niu Z, et al. 2013. Clinical Whole-Exome Sequencing for the Diagnosis of Mendelian

Disorders. *N Engl J Med* **369**: 1502–1511.

Yao R, Zhang C, Yu T, Li N, Hu X, Wang X, Wang J, Shen Y. 2017. Evaluation of three read-depth

based CNV detection tools using whole-exome sequencing data. *Mol Cytogenet* **10**: 1–7.

Zheng GXY, Lau BT, Schnall-Levin M, Jarosz M, Bell JM, Hindson CM, Kyriazopoulou-

Panagiotopoulou S, Masquelier DA, Merrill L, Terry JM, et al. 2016. Haplotyping germline

and cancer genomes with high-throughput linked-read sequencing. *Nat Biotechnol* **34**: 303–

311.