Testing and controlling for horizontal pleiotropy with the probabilistic Mendelian randomization in transcriptome-wide association studies

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Abstract

Integrating association results from both genome-wide association studies (GWASs) and expression quantitative trait locus (eQTL) mapping studies has the potential to shed light on the molecular mechanism underlying disease etiology. Several statistical methods have been recently developed to integrate GWASs with eQTL studies in the form of transcriptome-wide association studies (TWASs). These existing methods can all be viewed as two sample Mendelian randomization (MR) methods, which are also widely used in various GWASs for inferring the causal relationship among complex traits. Unfortunately, most existing TWAS and MR methods make an unrealistic modeling assumption that the instrumental variables do not exhibit horizontal pleiotropic effects. However, horizontal pleiotropic effects have been recently discovered to be wide spread across complex traits, and as we will show here, are also wide spread across gene expression traits. Therefore, allowing for no horizontal pleiotropic effects can be overall restrictive, and, as we will be show here, can lead to a substantial inflation of test statistics and subsequently false discoveries in TWAS applications. Here, we present a probabilistic MR method, which we refer to as PMR-Egger, for testing and controlling of horizontal pleiotropic effects in TWAS applications. PMR-Egger relies on a new MR likelihood framework that unifies many existing TWAS and MR methods, accommodates multiple correlated instruments, tests the causal effect of gene on trait in the presence of horizontal pleiotropy, and, with a newly developed parameter expansion version of the expectation maximization algorithm, is scalable to hundreds of thousands of individuals. With extensive simulations, we show that PMR-Egger provides calibrated type I error control for causal effect testing in the presence of horizontal pleiotropic effects, is reasonably robust for various types of horizontal pleiotropic effect mis-specifications, is more powerful than existing MR approaches,

43　　and, as a by-product, can directly test for horizontal pleiotropy. We illustrate the benefits of our

44　　method in applications to 39 diseases and complex traits obtained from three GWASs including

45　　the UK Biobank and show how PMR-Egger can lead to new biological discoveries through

46　　integrative analysis.

Introduction

Genome-wide association studies (GWASs) have identified many SNPs associated with common diseases or disease related traits. Parallel expression quantitative trait loci (eQTL) mapping studies have also identified many cis-acting SNPs associated with gene expression level of nearby genes. Integrating association results from both GWASs and eQTL mapping studies has the potential to shield light on the molecular mechanism underlying disease etiology. Several methods have been recently proposed to integrate GWASs with eQTL mapping studies. For example prediXcan[1] proposes to perform a weighted SNP set test in GWAS by inferring SNP weights from eQTL studies. TWAS[2] proposes to infer the association between gene expression and disease trait by leveraging the shared common set of cis-SNPs. SMR[3] or GSMR[4] directly tests the causal association between gene expression and disease trait under a Mendelian randomization (MR) framework through selecting a single instrument or multiple independent or near independent instruments. While each of these integrative methods was originally proposed to solve a different problem, all the aforementioned methods can be viewed as a two-sample MR method but with different modeling assumptions, aiming to identify genes causally associated with complex traits or diseases in the context of transcriptome-wide association studies (TWAS).

MR analysis is a form of instrumental variable analysis that was originally developed in the field of causal inference[5]. MR aims to determine the causal relationship between an exposure variable (e.g. gene expression) and an outcome variable (e.g. complex trait) in observational studies. MR treats SNPs as instrumental variables for the exposure variable of interest and uses these SNP instruments to estimate and test the causal effect of the exposure variable on the outcome variable. MR methods have been widely applied to investigate the causal relationship among various complex traits[6-9], and, through a two-sample design, can be easily adapted to

settings where the exposure and outcome are measured on two different sets of individuals[10,11].

However, MR analysis for TWAS is not straightforward and requires the development of new

methods that can accommodate two important TWAS data features.

First, both GWASs and eQTL mapping studies collect multiple SNPs that are in high linkage

disequilibrium (LD) with each other. Traditional MR methods, such as the random effects

version or the fixed effect version of the inverse variance weighted regression[12], MR-Egger[13],

median-based regression[14], SMR[3], or GSMR[4], are only applicable to a single SNP instrument or

multiple independent/near-independent SNP instruments. Handling only independent SNPs is

restrictive, as most exposure variables/molecular traits are polygenic/omni-genic and are

influenced by multiple SNPs that are in potential LD with each other. Indeed, incorporating

multiple correlated SNPs often can help explain a greater proportion of variance in the exposure

variable than using independent SNPs, and thus can help increase power and improve estimation

accuracy of MR analysis[5,15-17]. Due to the benefits of multiple correlated instruments, both

prediXcan and TWAS, rely on either ElasticNet[18] or BSLMM[19], incorporate all cis-SNPs that are

in high LD for TWAS applications, which, as we will show below, leads to a substantial power

improvement over standard MR approaches that use independent SNPs. Unfortunately, both

prediXcan and TWAS rely on a two-stage MR inference procedure, estimating SNP effect sizes

in the exposure study and plugging in these estimates to the outcome study for causal effect

inference. Two-stage inference procedure in MR fails to account for the uncertainty in parameter

estimates in the exposure study and can often lead to biased causal effect estimates and power

loss especially in the presence of weak instruments[5,16]. Indeed, similar to what have been

observed in the MR filed, our previous study also suggest that likelihood based inference can

substantially improve power for TWAS[20]. Therefore, it is important to incorporate multiple

correlated instruments in a likelihood inference framework for MR analysis in TWAS.

Second, perhaps more importantly, SNP instruments often exhibit pervasive horizontal

pleiotropic effects[21]. Horizontal pleiotropy occurs when a genetic variant affects the outcome

variable through pathways other than or in addition to the exposure variable[22]. Horizontal

pleiotropy is in contrast with vertical pleiotropy, which characterizes instrument effects on the

outcome variable through the path of the exposure. Horizontal pleiotropy is widely distributed

across the genome, affects a wide spectrum of complex traits, and can be driven by LD and

extreme polygenicity of traits[21 23]. Despite its wide prevalence, however, only a limited number

of MR methods have been developed that can test and control for horizontal pleiotropy; even

fewer are applicable for TWAS applications. For example, some existing methods (e.g. Cohran's

Q statistic[24,25] and MR-PRESSO[21]) test for horizontal pleiotropic effects without directly

controlling for them. Some methods (e.g. CaMMEL[26]) control for horizontal pleiotropic effects

without directly testing them[27,28]. Some methods (e.g. Egger regression[13,29], GLIDE[30], GSMR[4],

MR-median method[14], profile score approach[31], MRMix[32] and Bayesian MR[33,34]) test and control

for horizontal pleiotropic effects, but can only accommodate independent or near-independent

instruments. As far as we are aware, there is only one two-sample MR method currently

developed for testing and controlling for pleiotropic effects in the presence of correlated

instruments: LDA MR-Egger[35]. Unfortunately, as we will show below, LDA MR-Egger cannot

handle realistic LD pattern among cis-SNPs for TWAS applications.

Here, we develop a generative two-sample MR method in a likelihood framework, which we

refer to as the probabilistic two-sample Mendelian randomization (PMR), to perform MR

analysis using multiple correlated instruments for TWAS applications. We illustrate how the

PMR framework can facilitate the understanding of many existing MR approaches as well as

many existing integrative analysis approaches. Within the PMR framework, we focus on a

particular horizontal pleiotropy effect modeling assumption based on the burden test assumption

commonly used for rare variant test, which, as we will show later, effectively generalizes the

Egger regression assumption commonly used for MR analysis to correlated instruments. Our

method allows us to test the causal effect in the presence of horizontal pleiotropy, and, with a

parameter expansion version of the expectation maximization algorithm (PX-EM), is scalable to

hundreds of thousands of individuals. We refer to our method as PMR-Egger. With simulations,

we show that PMR-Egger provides calibrated type I error for causal effect testing in the presence

of horizontal pleiotropic effects, is more powerful than existing MR approaches, and, as a by-

product, can directly test for horizontal pleiotropy. We apply our method to perform TWAS for

39 diseases and complex traits obtained from three GWASs with sample size ranging from 4,686

to 337,199.

Methods

PMR-Egger Overview

We consider a probabilistic Mendelian randomization framework for performing two-sample Mendelian randomization analysis with correlated SNP instruments. Two-sample Mendelian randomization analysis aims to estimate and test for the causal effect of an explanatory variable on an outcome variable in the setting where the exposure and outcome variables are measured in two separate studies with no sample overlap. In the TWAS applications we consider here, the explanatory variable is gene expression level that is measured in a gene expression study, while the outcome variable is a quantitative trait or a dichotomous disease status that is measured in a GWAS. Often times, in such TWAS setting, the gene expression study and GWAS are performed on two separate samples. While we mostly focus on TWAS applications in the present study, we note that two-sample Mendelian randomization is also commonly performed in settings where both the explanatory and outcome variables are complex traits that are measured in two separate GWASs. An illustrative diagram of MR analysis is displayed in Supplementary Fig. 1.

We denote x as an n_1-vector of exposure variable (i.e. gene expression measurements) that is measured on n_1 individuals in the gene expression study and denote $\mathbf{Z}_x$ as an n_1 by p matrix of genotypes for p selected instruments (i.e. cis-SNPs) in the same study. We denote $\mathbf{y}$ as an n_2-vector of outcome variable (i.e. trait) that is measured on n_2 individuals in the GWAS and denote $\mathbf{Z}_y$ as an n_2 by p matrix of genotypes for the same p selected instruments there. We consider three linear regressions to model the two studies separately

$$x = \mathbf{1}_{n_1}\mu_x + \mathbf{Z}_x\boldsymbol{\beta} + \boldsymbol{\varepsilon}_x \quad (1)$$

$$\tilde{x} = \mathbf{1}_{n_2}\mu_x + \mathbf{Z}_y\boldsymbol{\beta} + \boldsymbol{\varepsilon}_{\tilde{x}} \quad (2)$$

$$y = \mathbf{1}_{n_2}\mu_y + \tilde{x}\alpha + \mathbf{Z}_y\gamma + \epsilon \quad (3)$$

where the equation (1) is for the gene expression data and the equations (2)-(3) are for the

GWAS data. Here, μ_x and μ_y are the intercepts; $\tilde{x}$ is an unobserved n_2-vector of exposure

variable on the n_2 individuals in the GWAS; $\boldsymbol{\beta}$ is a p-vector of instrumental effect sizes on the

explanatory variable; α is a scalar that represents the causal effect of the exposure variable on the

outcome variable; $\boldsymbol{\gamma}$ is a p-vector of horizontal pleiotropic effect sizes of p instruments on the

outcome variable; $\boldsymbol{\varepsilon}_x$ is an n_1-vector of residual error with each element independently and

identically distributed from a normal distribution $N(0, \sigma_x^2)$; $\boldsymbol{\varepsilon}_{\tilde{x}}$ is an n_2-vector of residual error

with each element independently and identically distributed from the same normal distribution

$N(0, \sigma_x^2)$; and ϵ is an n_2-vector of residual error with each element independently and identically

distributed from a normal distribution $N(0, \sigma_y^2)$. We note that while the above three equations are

specified based on two separate studies, they are joined together with the common parameter $\boldsymbol{\beta}$

and the unobserved gene expression measurements $\tilde{x}$. Note that equations (2)-(3) can be

combined into

$$y = \mathbf{1}_{n_2}\mu_y + \mathbf{Z}_y\boldsymbol{\beta}\alpha + \mathbf{Z}_y\gamma + \boldsymbol{\varepsilon}_y \quad (4)$$

where $\boldsymbol{\varepsilon}_y = \boldsymbol{\varepsilon}_{\tilde{x}}\alpha + \epsilon$.

Our key parameter of interest in the above joint model is the causal effect α. The causal

interpretation of α requires two assumptions of MR analysis to hold: (i) instruments are

associated with the exposure; (ii) instruments are not associated with any other confounders that

may be associated with both exposure and outcome. Note that our model no longer requires the

exclusion restriction condition of traditional MR (i.e. instruments only influence the outcome by

the path of exposure), as we directly model horizontal pleiotropy effects $\boldsymbol{\gamma}$. With the above two

assumptions of MR analysis, we derive the causal interpretation and identification of α under the

framework of decision-theoretic causal inference[33,36-38] (details in Supplementary Note). Because

the causal effect interpretation of α depends on the two MR assumptions, at least one of which is

often not testable in practice, MR analysis in observational studies likely provides weaker

causality evidence than randomized clinical trials. Therefore, while we follow standard MR

analysis and use the term "causal effect" through the text, we only intend to use this term to

emphasize the fact that α estimate from an MR analysis is more trustworthy than the effect size

estimate in a standard linear regression of y on $\tilde{x}$.

Because p is often larger than n_1, we will need to make additional modeling assumptions on $\boldsymbol{\beta}$

to make the model identifiable. In addition, the two instrumental effect terms defined in equation

(4), the vertical pleiotropic effect $\mathbf{z}_y \boldsymbol{\beta} \alpha$ and the horizontal pleiotropic effect $\mathbf{z}_y \boldsymbol{\gamma}$, are also not

identifiable from each other, unless we make additional modeling assumptions on $\boldsymbol{\gamma}$. Here, we

follow standard polygenic model and assume that all elements in $\boldsymbol{\beta}$ are non-zero and that each

follows a normal distribution $N(0, \sigma_\beta^2)$. In addition, we follow the burden test assumption

commonly used for rare variant test and assume that $\boldsymbol{\gamma}_j = \gamma$ for $j = 1, \dots p$. With the burden test

assumption on $\boldsymbol{\gamma}$, in the special case where instruments are independent and treated as fixed

effects and where a two-stage estimation procedure is used for inference, our model reduces to

the commonly used MR-Egger regression model. Therefore, our model effectively generalizes

the Egger regression model to a likelihood inference framework with correlated instruments.

We are interested in estimating the causal effect α and testing the null hypothesis $H_0: \alpha = 0$ in

the presence of horizontal pleiotropy $\boldsymbol{\gamma}$. In addition, we are interested in estimating the horizontal

pleiotropic effect size γ and testing the null hypothesis $H_0: \gamma = 0$. We accomplish both tasks

through the maximum likelihood inference framework. In particular, we develop an expectation

maximization (EM) algorithm for parameter inference by maximizing the joint likelihood

defined based on equations (1) and (4) (details in the Supplementary Note). The EM algorithm

allows us to obtain the maximum likelihood of the joint model, together with maximum

likelihood estimates for both α and γ. In addition, we apply the EM algorithm to two reduced

models, one without α and the other without γ, to obtain the corresponding maximum

likelihoods. Afterwards, we perform likelihood ratio tests for either $H_0: \alpha = 0$ or $H_0: \gamma = 0$, by

contrasting the maximum likelihood obtained from the joint model to that obtained from each of

the two reduced models, respectively. We refer to the above inference procedure as probabilistic,

as we place estimation and testing into a maximum likelihood framework. Our inference

procedure is in contrast to the commonly used two-stage estimation procedure (as used in, for

example, Egger regression[13,29], PrediXcan[1] and TWAS[2]), which estimates $\widehat{\boldsymbol{\beta}}$ from equation (1)

first and then directly plug in the estimates into equation (4) for inference. The previous two-

stage estimation procedure fails to properly account for the estimation uncertainty in $\widehat{\boldsymbol{\beta}}$ and is

known to lose power compared to a formal likelihood inference procedure[5,16,20].

We refer to our model and algorithm together as the two-sample probabilistic Mendelian

randomization with Egger regression (PMR-Egger). As explained above, we use "probabilistic"

to refer to both the data generative model and the maximum likelihood inference procedure. We

use "Egger" to refer to the horizontal pleiotropic assumption on $\boldsymbol{\gamma}$ that effectively generalizes the

Egger-regression assumption to correlated instruments. We also note that the joint generative

Mendelian randomization model defined in equations (1) and (4) is a useful conceptual

framework that unifies many existing MR methods. In particular, almost all existing MR

methods are built upon on the joint model, but with different modeling assumptions on $\boldsymbol{\beta}$ and $\boldsymbol{\gamma}$,

and with different inference procedures (Table 1). Compared with these existing MR approaches,

PMR-Egger is capable of modeling multiple correlated instruments, effectively controls for

horizontal pleiotropy, and places inference into a likelihood framework.

Simulations

We performed simulations to assess the performance of PMR-Egger and compare it with existing

approaches. To do so, we first obtained 556 cis-SNPs for the gene *BACE1* on chromosome 11

from the GEUVADIS data[39] (data processing details in the next section) and simulated gene

expression values. We used the gene *BACE1* because the number of cis-SNPs in this gene

represents the median of that across all genes. With the scaled genotype data Z_x, we simulated

SNP effect sizes $\boldsymbol{\beta}$ from a normal distribution $N(0, PVE_{zx}/556)$ and summed the genetic effects

across all cis-SNPs as $Z_x\boldsymbol{\beta}$. We also simulated residual errors $\boldsymbol{\varepsilon}_x$ from a normal distribution

$N(0, 1 - PVE_{zx})$. The variances of the two normal distributions are chosen so that in expectation,

the proportion of phenotypic variance explained by genetic effects is PVE_{zx}.

Next, we obtained genotypes for the same 556 SNPs from 2,000 randomly selected control

individuals in the Kaiser Permanente/UCSF Genetic Epidemiology Research Study on Adult

Health and Aging (GERA)[40,41] and simulated a quantitative trait. Here, we directly used $\boldsymbol{\beta}$ from

the gene expression data, which, when paired with causal effect α, yielded the vertical

pleiotropic effects $\alpha\boldsymbol{\beta}$. We set $\alpha = \sqrt{PVE_{zy}/PVE_{zx}}$, and we simulated residual errors $\boldsymbol{\varepsilon}_y$ from a

normal distribution $N(0, 1 - PVE_{zy})$. These parameters were selected so that in expectation, in

the absence of horizontal pleiotropic effects, the proportion of phenotypic variance explained by

vertical pleiotropic effects is PVE_{zy}. Afterwards, we simulated horizontal pleiotropic effects $\boldsymbol{\gamma}$

for these SNPs (more details below). We summed the horizontal pleiotropic effects, vertical

pleiotropic effects and residual errors to yield the simulated trait.

In the simulations, we first examined a baseline simulation setting where we set $PVE_{zx} =$

10%, $PVE_{zy} = 0$, with all $\gamma_j = 0$. On top of the baseline setting, we varied one parameter at a

time to examine the influence of various parameters. For PVE_{zx}, we set it to be either 1%, 5% or

10%, close to the median gene expression heritability estimates across genes[42,43]. For $\boldsymbol{\beta}$, we

examined alternative SNP effect size distributions that deviate from the polygenic assumption in

the baseline setting. Specifically, we randomly selected either 1 SNP, 1%, 10% or 100% of the

SNPs to have non-zero effect, while simulated their effects from a normal distribution to explain

a fixed PVE_{zx}. For PVE_{zy}, we varied its value to be either 0% (for null simulations), 0.2%, 0.4%

or 0.6% (for power simulations). For $\boldsymbol{\gamma}$, we randomly assigned a fixed proportion of γ_j to be non-

zero (proportion equals 10%, 30%, 50%, or 100%). Afterwards, we set the absolute value of non-

zero γ_j to be the same value of γ, but randomly assign some of their signs to be positive and

some of their signs to be negative, with the ratio of positive effects to negative effects being

either 1:9, 3:7, or 5:5. Here, we set γ to be $1 \times 10^{-4}, 5 \times 10^{-4}, 1 \times 10^{-3}$ or 2×10^{-3}, which

corresponds to the 50%, 70%, 90%, 95% quantiles of horizontal pleiotropic effect estimates

across all genes and all traits in the WTCCC data (more details below), respectively.

For null simulations and type I error control examination, we performed 10,000 simulation

replicates for each simulation scenario described above. For power calculation, for each scenario,

we performed 1,000 alternative simulations together with 9,000 null simulations and calculated

power based on false discovery rate (FDR).

Real Data Applications

We applied our method to perform TWAS by integrating gene expression data with several

GWASs. Specifically, we obtained GEUVADIS data[39] as the gene expression data and examined

39 phenotypes from three GWASs. The three GWASs include the Wellcome trust case control

study (WTCCC)[44], the Kaiser Permanente/UCSF Genetic Epidemiology Research Study on

Adult Health and Aging (GERA)[40,41], and the UK Biobank[45].

The GEUVADIS data[39] contains gene expression measurements for 465 individuals collected

from five different populations that include CEPH (CEU), Finns (FIN), British (GBR), Toscani

(TSI) and Yoruba (YRI). In the expression data, we only focused on protein coding genes and

lincRNAs that are annotated in GENCODE [46,4746; 47] (release 12). Among these genes, we

removed lowly expressed genes that have zero counts in at least half of the individuals to obtain

a final set of 15,810 genes. We performed PEER normalization to remove confounding effects

and unwanted variations following previous studies[48,49]. Afterwards, following[49], to remove

remaining population stratification, we quantile normalized the gene expression measurements

across individuals in each population to a standard normal distribution, and then further quantile

normalized the gene expression measurements to a standard normal distribution across

individuals from all five populations. Besides expression data, all individuals in GEUVADIS

also have their genotypes sequenced in the 1,000 Genomes Project. We obtained genotype data

from the 1,000 Genomes Project phase 3. We filtered out SNPs that have a Hardy-Weinberg

equilibrium (HWE) p-value $< 10^{-4}$, a genotype call rate <95%, or a minor allele frequency (MAF)

<0.01. We retained a total of 7,072,917 SNPs for analysis.

The WTCCC data consists of about 14,000 cases from seven common diseases and 2,938

shared controls[44]. The diseases include type 1 diabetes (T1D; n=1,963), Crohn's disease (CD;

n=1,748), rheumatoid arthritis (RA; n=1,861), bipolar disorder (BD; n=1,868), type 2 diabetes

(T2D; n=1,924), coronary artery disease (CAD; n=1,926), and hypertension (HT; n=1,952). We

obtained quality controlled genotypes from WTCCC and initially imputed missing genotypes

using BIMBAM[50] to arrive at a total of 458,868 SNPs shared across all individuals. Afterwards,

we further imputed SNPs using the 1,000 Genomes as the reference panel with SHAPEIT and

IMPUTE2[51]. We filtered out SNPs that have an HWE p-value $< 10^{-4}$, a genotype call rate <95%,

or an MAF<0.01 to obtain a total of 2,793,818 imputed SNPs.

The GERA study consists of 61,953 individuals and 675,367genotyped SNPs. We filtered out

SNPs that had a genotype calling rate below 0.95, MAF<0.01, or HWE p value<10^{-4} to yield a

total of 487,609 SNPs. We then phased genotypes using SHAPEIT[52] and imputed SNPs based on

the Haplotype Reference Consortium (HRC version r1.1) reference panel[53] on the Michigan

Imputation Server using Minimac3[54]. Afterwards, we further filtered out SNPs that have a HWE

p-value $< 10^{-4}$, a genotype call rate <95%, an MAF<0.01, or an imputation score<0.30 to arrive

at a total of 8,385,867 SNPs shared across 61,953 individuals. We examined 22 diseases in

GERA that include Asthma (number of cases n=10,101), Allergic Rhinitis (n=15,193),

Cardiovascular Disease (CARD, n=16,431), Cancers (n=18,714), Depressive Disorder (n=7,900),

Dermatophytosis (n=8,443), Type 2 Diabetes (T2D, n=7,638), Dyslipidemia (n=33,071),

Hypertension (HT, n=31,044), Hemorrhoids (n=9,922), Abdominal Hernia (n=6,876), Insomnia

(n=4,357), Iron Deficiency (n=2,706), Irritable Bowel Syndrome (n=3,367), Macular

Degeneration (n=4,031), Osteoarthritis (n=22,062), Osteoporosis (n=5,909), Peripheral Vascular

Disease (PVD, n=4,718), Peptic Ulcer (n=1,007), Psychiatric disorders (n=9408), Stress

Disorders (n=4,706), and Varicose Veins (n=2,714).

The UK Biobank data consists of 487,409 individuals and 92,693,895 imputed SNPs[45]. We

followed   the   same   sample   QC   procedure   in   Neale   lab

(https://github.com/Nealelab/UK_Biobank_GWAS/tree/master/imputed-v2-gwas)   to   retain   a

total of 337,199 individuals of European ancestry. In addition, we filtered out SNPs with an

HWE p-value $< 10^{-7}$, a genotype call rate <95%, or an MAF<0.001 to obtain a total of

13,876,958 SNPs. We selected 10 UK Biobank quantitative traits that have a phenotyping rate >

80%, a SNP-heritability > 0.2 and a low correlation among them following a previous study[55].

The 10 traits include Height ($h^2 = 0.579$;), Platelet count ($h^2 = 0.404$), Bone mineral density

($h^2 = 0.401$), Red blood cell count ($h^2 = 0.324$), FEV1-FVC ratio ($h^2 = 0.313$), Body mass

index (BMI, $h^2 = 0.308$), RBC distribution width ($h^2 = 0.288$), Eosinophils count ($h^2 =$

0.277), Forced vital capacity ($h^2 = 0.277$), White blood cell count ($h^2 = 0.272$). For each trait

in turn, we standardized the phenotype to have a mean of zero and a standard deviation of one,

regressed the resulting standardized phenotypes on sex and top 10 genotype principal

components (PCs) to obtain the residuals, and finally used the scaled residuals to conduct TWAS

analysis.

In the GEUVADIS data, for each gene in turn, we extracted cis-SNPs that are within either

100 kb upstream of the transcription start site (TSS) or 100 kb downstream of the transcription

end site (TES). We overlapped these SNPs in GEUVADIS with the SNPs obtained from each of

the three GWASs to obtain common sets of SNPs. The median number of the overlapped cis-

SNPs between GEUVADIS and WTCCC, GERA or UK Biobank are 200, 556 or 500,

respectively. Afterwards, for each pair of gene (from GEUVADIS) and trait (from GWAS) in

turn, we examined the causal relationship between gene expression and trait of interest while

testing and controlling for potential horizontal pleiotropic effects.

Compared Methods

For testing the causal effect, we compared the performance of PMR-Egger with five existing

methods that include: (1) SMR that uses a single instrument but does not control for horizontal

pleiotropy; here, we first performed a linear regression to choose the top associated cis-SNP to

be the instrumental variable; (2) PrediXcan that uses multiple correlated instruments but does not

control for horizontal pleiotropy; we rely on the R package glmnet to obtain the coefficient

estimates of the cis-SNPs; (3) TWAS that uses multiple correlated instruments but does not

control for horizontal pleiotropy; we rely on the BSLMM[19] implemented in the GEMMA

software[56] to obtain coefficient estimates of the cis-SNPs; (4) CoMM that uses multiple

correlated instruments but does not control for horizontal pleiotropy; CoMM is implemented in

the R package CoMM; (5) LDA MR-Egger that uses multiple correlated instruments and

controls for horizontal pleiotropy; we contacted the authors to obtain the method source code.

All these methods are suitable for two-sample design and yield p values for testing the causal

effect α. Note that PrediXcan, TWAS and CoMM are not originally described as an MR method

but conceptually rely on the same joint MR model based on equations (1) and (4). These three

methods differ in their prior assumptions on $\boldsymbol{\beta}$: PrediXcan relies on Elastic Net assumption;

TWAS relies on BSLMM[19] assumption; while CoMM relies on the normal prior assumption. In

addition, PrediXcan and TWAS rely on a two-stage regression procedure while CoMM is based

on maximum likelihood. In addition, SMR is only able to use a single instrument while all other

methods are capable of using multiple correlated instruments. We did not compare with GSMR,

which requires multiple near independent instruments that are generally not feasible to obtain in

TWAS applications. Finally, we note that we are unable to compare our method directly with the

standard Egger regression, because the later requires multiple independent SNP instruments that

are not readily available for TWAS.

For testing horizontal pleiotropic effect, we compared the performance of PMR-Egger with

two existing methods that include (1) LDA MR-Egger; and (2) the global test in MR-PRESSO,

which is implemented as an R package. Both these methods are capable of producing p values to

test horizontal pleiotropic effect for one gene at a time.

Software Availability

PMR-Egger is implemented in the R package PMR, freely available on GitHub

(https://www.xzlab.org./software.html). The code to reproduce all the analyses presented in the

paper are available on GitHub (https://github.com/yuanzhongshang/PMRreproduce).

Results

Our method is described in the Methods, with technical details provided in the Supplementary Note. For TWAS applications, our method examines one gene at a time and estimates and tests its causal effect on a trait of interest. Our method models multiple correlated instruments, performs MR inference in a maximum likelihood inference framework, and is capable of testing and controlling for horizontal pleiotropic effects commonly encountered in TWAS. We refer to our method as the probabilistic Mendelian randomization with Egger regression (PMR-Egger), which is implemented in the R package PMR. Our method is computationally efficient and can analyze one gene with a few hundred thousand individuals in minutes (Table 2).

Simulations: Testing and estimating causal effect

We performed simulations to examine the effectiveness of our method and compared it with existing MR approaches. Simulation details are provided in the Methods. Briefly, we simulated gene expression values based on genotypes from 456 individuals in GEUVADIS and simulated phenotypes based on genotypes from 2,000 randomly selected individuals in GERA. In the simulations, we varied the genetic architecture underlying gene expression from sparse (one SNP or 1% of SNPs are causal) to polygenic (10% or 100% of SNPs are causal). We varied the proportion of SNPs exhibiting horizontal pleiotropic effects in a wide range (from 0%, 10%, 30%, 50% to 100%). We examined directional pleiotropy setting (the ratio of SNPs with negative vs positive horizontal pleiotropic effects is 0:10), approximately directional pleiotropy setting (1:9 or 3:7) and balanced pleiotropy settings (5:5). We varied the magnitude of horizontal pleiotropic effects γ to be either 1×10^{-4}, 5×10^{-4}, 1×10^{-3}, or 2×10^{-3}, which corresponds to the 50%, 70%, 90%, 95% percentiles of the horizontal pleiotropic effect estimate in real data. We also varied the magnitude of causal effect α to be either 0, 0.14, 0.2 or 0.245, which corresponds to a

proportion of phenotypic variance explained by vertical pleiotropic effects (PVE_{zy}) as 0, 0.2%,

0.4% and 0.6% respectively.

Our first set of simulations is focused on causal effect testing. Here, we compared PMR-Egger

with five different methods that include SMR, PrediXcan, TWAS, CoMM, and LDA MR-Egger.

We first examined type I error control of different methods under the null ($\alpha = 0$). In the

absence of horizontal pleiotropic effects, PMR-Egger, together with PrediXcan, TWAS, and

CoMM, all provides calibrated type I error (Fig. 1a). SMR produces overly-conservative/deflated

p-values, presumably because SMR requires the selected instrument being a true causal SNP

with large effect size, which is not always guaranteed in practice. LDA MR-Egger produces

inflated p-values, presumably because LDA MR-Egger makes a fixed effect assumption on $\boldsymbol{\beta}$,

which often does not work well in the TWAS setting where the number of SNPs are in the same

order as the number of samples in the gene expression study. Subsequently, the p-values from

LDA MR-Egger are sensitive to the linkage disequilibrium (LD) structure among SNPs and are

not well behaved in realistic LD settings (Supplementary Fig. 2).

In the presence of horizontal pleiotropic effects, PMR-Egger becomes the only method that

produces calibrated (or slightly conservative) p-values (Fig. 1b, c, d). In contrast, the p-values

from all other methods become inflated, and more so with increasingly large horizontal

pleiotropic effect. For example, when γ is 5×10^{-4}, the genomic control factors from PMR-Egger,

SMR, PrediXcan, TWAS, CoMM, and LDA MR-Egger are 0.93, 1.30, 1.33, 1.33, 1.49 and 2.61

respectively. When γ is increased to 1×10^{-3}, the genomic control factors from PMR-Egger, SMR,

PrediXcan, TWAS, CoMM, and LDA MR-Egger become 0.93, 2.39, 2.27, 2.46, 4.03 and 2.57

respectively. The null p-value distributions from different methods remain largely similar

regardless of the genetic architecture underlying gene expression being sparse or polygenic

(Supplementary Fig. 3). Note that, here, the p-values from SMR become less deflated when there

is a sparse set of SNPs affecting gene expression; however, such deflation is not completely

abolished even when one SNP has non-zero effect on gene expression, presumably because we

cannot always identify the true non-zero effect SNP through eQTL mapping and may supply a

tagged SNP for SMR analysis. The p-value distribution pattern for different methods under the

null does not change much with reduced the gene expression heritability value PVE_{zx}. When

PVE_{zx} is either 5% or 1%, PMR-Egger still produces well-calibrated p values (Supplementary

Fig. 4). Finally, like standard MR-Egger regression, our PMR-Egger makes a relatively strong

assumption on the horizontal pleiotropic effect and assumes that all SNPs have the same

horizontal pleiotropic effect. To examine the robustness of such assumption, besides the above

settings where either 0% or 100% SNPs have horizontal pleiotropic effects, we varied the

proportion of horizontal pleiotropic SNPs to be either 10%, 30%, 50%. We found that PMR-

Egger remain calibrated regardless of the sparsity of horizontal pleiotropic SNPs (Supplementary

Fig. 5). In addition, besides the above directional pleiotropy setting where the ratio of SNPs with

negative vs positive effects is set to be 0:10, we also examined two approximately directional

pleiotropy settings (1:9 or 3:7) and one balanced setting (5:5). We found that p-values of PMR-

Egger remains calibrated in either the approximately directional pleiotropy settings or the

balanced setting when horizontal pleiotropic effect is small or moderate ($\gamma = 1\text{x}10^{-4}$, $5\text{x}10^{-4}$, or

$1\text{x}10^{-3}$; Supplementary Fig. 6a, b, c). However, when horizontal pleiotropic effect is large

($\gamma = 2\text{x}10^{-3}$), as one would expect, the p-values from PMR-Egger becomes inflated, with

genomic control factor being 1.08, 1.31 and 1.37, for settings where the ratio is 1:9, 3:7 and 5:5,

respectively (Supplementary Fig. 6d).

Next, we examined the power of different methods to identify the causal effect for a range of

possible causal effect sizes α. Because the same p-value from different methods may correspond

to different type I errors, we computed power based on FDR of 0.1 instead of a nominal p-value

threshold to allow for fair comparison across methods. In the absence of horizontal pleiotropic

effects or in the presence of small horizontal pleiotropic effects, PMR-Egger, TWAS and CoMM

have similarly power, all outperforming the other three methods (Fig. 2a, b). The power of PMR-

Egger is slightly lower than the other two, presumably because PMR-Egger uses extra

parameters to model horizontal pleiotropy and thus lose degree of freedom and subsequently

power in the absence of horizontal pleiotropy. The power of all methods increases with α,

though their relative performance rank does not change. In the presence of horizontal pleiotropy,

the power of all methods reduces (Fig. 2c, d). However, the power reduction from PMR-Egger is

substantially smaller than all other methods. For example, when $PVE_{zy} = 0.006$ and $\gamma = 0.0005$,

PMR-Egger reaches a power of 41%; the power of SMR, PrediXcan, TWAS, CoMM, and LDA

MR-Egger are 7%, 24%, 31%, 33% and 1%, respectively. When $PVE_{zy} = 0.006$ but $\gamma = 0.001$,

the power of PMR-Egger remains similar and is 40%; the power of SMR, PrediXcan, TWAS,

CoMM, and LDAMR-Egger reduces to 3%, 13%, 16%, 16% and 0.9%, respectively. Besides

horizontal pleiotropic effects γ, we examined how power is influenced by the genetic

architecture underlying gene expression, β (Supplementary Fig. 7). We found that the power of

different methods in the setting where 10% of SNPs have non-zero effects on gene expression

are similar to the baseline setting where all SNPs have non-zero effects, both in the absence

(Supplementary Fig. 7e vs Fig. 2a) or in the presence of horizontal pleiotropic effects

(Supplementary Fig. 7F vs Fig. 2d). However, the relative performance of different methods

changes when there is only one SNP or 1% SNPs having non-zero effect on gene expression.

Specifically, in the absence of horizontal pleiotropic effects, the power of both PrediXcan and

SMR become slightly higher than PMR-Egger, TWAS and CoMM, all of which have

substantially higher power than LDA MR-Egger (Supplementary Fig. 7a, c). The higher power

of PrediXcan and SMR in the sparse setting presumably is because the ElasticNet assumption

employed in PrediXcan favors sparse eQTLs while SMR explicitly makes a single eQTL

assumption. In the presence of horizontal pleiotropic effects, however, PMR-Egger remains the

most powerful, even in the setting where only one SNP has non-zero effect on gene expression

(Supplementary Fig. 7b, d). Finally, we found that PMR-Egger produces accurate estimate of the

causal effect α, both under the null and under various alternatives, in the presence or absence of

horizontal pleiotropic effects (Supplementary Fig. 8).

Simulations: Testing and estimating horizontal pleiotropic effect

Our second set of simulations is focused on horizontal pleiotropic effect testing. Here, we

compared PMR-Egger with two different methods: LDA MR-Egger and MR-PRESSO. All three

methods examine one gene at a time and test whether cis-SNPs within the gene exhibit non-zero

horizontal pleiotropic effects. Note that, unlike PMR-Egger and LDA MR-Egger, MR-PRESSO

requires independent instruments and uses permutation to obtain the empirical p-values. Due to

the heavy computational burden resulting from permutations, we are unable to apply MR-

PRESSO to all simulation scenarios and also have to restrict the number of permutations to

10,000 for each explored simulation scenario. Subsequently, the lowest possible p value from

MR-PRESSO is 10^{-4}. We first examined type I error control of different methods under the null,

where there is no horizontal pleiotropic effect. We found that the p-values from PMR-Egger

provide calibrated type I error control under a range of causal effect sizes α (Fig. 3). However, p-

values from both LDA MR-Egger and MR-PRESSO are inflated, and more so with increasingly

large causal effect α. For example, when $PVE_{zy} = 0$, the genomic control factor from PMR-

Egger and LDA MR-Egger are 0.96 and 2.31, respectively. When PVE_{zy} is increased to 0.6%,

the genomic control factor from PMR-Egger remains 0.96, while the genomic control factors

from LDA MR-Egger become 3.04. The overly inflated p-values from LDA MR-Egger is

presumably due to its fixed effect modeling assumption on $\boldsymbol{\beta}$ and the subsequent failure to

control for realistic LD pattern. The inflation of MR-PRESSO p values is presumably because

MR-PRESSO can only handle independent instruments and thus does not fare well in TWAS

settings. Inflation of p-value on testing horizontal pleiotropy would incorrectly identify genes

with no pleiotropic effects, thus likely reducing the power to detect true causal effect α.

Importantly, the p-values from PMR-Egger remain calibrated regardless of the genetic

architecture underlying gene expression (Supplementary Fig. 9).

Next, we examined the power of different methods in detecting non-zero horizontal

pleiotropic effect. Again, we computed power based on a FDR of 0.1 instead of the nominal p-

value to allow for fair comparison across methods. We dropped MR-PRESSO for comparison

here due to its heavy computational burden. We found that PMR-Egger outperforms LDA MR-

Egger in a range of possible horizontal pleiotropic effect sizes, and that the power of both

methods increases with increasing horizontal pleiotropy (Supplementary Fig. 2e, f). For example,

when $PVE_{zy} = 0.6\%$ and $\gamma = 0.0005$, PMR-Egger achieves a power of 1.6% while LDA MR-

Egger achieves a power of 1% (note that both power are relatively small due to the small sample

size used in the simulations). When $PVE_{zy} = 0.6\%$ but $\gamma = 0.001$, the power of PMR-Egger

increases to 58.9% while the power of LDA MR-Egger increases to 32%. In addition, the power

to detect horizontal pleiotropic effects is not influenced by the sparsity level of the genetic

architecture underlying gene expression (Supplementary Fig. 10). The power to detect horizontal

pleiotropic effects does, however, depend on the sparsity level of $\boldsymbol{\gamma}$ (Supplementary Fig. 11a).

Specifically, power of both PMR-Egger and LDA MR-Egger reduces with increasing sparsity of

$\boldsymbol{\gamma}$, though the power of PMR-Egger remains higher than LDA MR-Egger across a range of

sparsity values. Similar trend can be found under various directional horizontal pleiotropic effect

assumptions (Supplementary Fig. 11b). Finally, we note that, in the presence of directional

pleiotropic effect, PMR-Egger can also estimate the horizontal pleiotropic effect size accurately

(Supplementary Fig. 12).

Real data applications

We performed TWAS to detect genes causally associated with any of the 39 phenotypes

collected from three GWASs (details in Methods). The examined gene expression data is

obtained from the GEUVADIS study and contains 15,810 genes. The examined phenotypes

include 7 common diseases from WTCCC, 22 diseases from GERA, and 10 quantitative traits

from UK Biobank. The GWAS sample size ranges from 4,686 (for Crohn's disease in WTCCC)

to 337,199 (for UK Biobank). We applied PMR-Egger together with five other approaches (SMR,

PrediXcan, TWAS, CoMM, and LDA MR-Egger) to examine pairs of gene and phenotype one at

a time. The p-values for testing the causal effect of each gene on the phenotype are shown for

WTCCC traits (Fig. 4a, b and Supplementary Fig. 13), GERA traits (Fig. 5a, b and

Supplementary Fig. 14), and UK Biobank traits (Fig. 6a, b and Supplementary Fig. 15); with

genomic control factors listed in Supplementary Table 1 and visualized in Fig. 4c, Fig. 5c and

Fig. 6c. We also display qq-plots for two selected traits in each data, one with a relatively low

number of gene associations and the other with a relatively high number gene associations, in Fig.

4a, b, Fig. 5a, b and Fig. 6a, b, respectively. Among the selected six traits, the one with zero

number of associated genes (BD in WTCCC; Fig. 4a) and the one with one associated gene

(Irritable Bowel Syndrome in GERA; Fig. 5a), represent approximately null traits with no

apparently associated genes. For the six selected traits, consistent with the simulations, we found

that the p-values from PMR-Egger are well calibrated, at least more so than the other methods. In

contrast, the p-values from CoMM, TWAS, PrediXcan and LDA MR-Egger are inflated and

deviated upward from the diagonal line, while the p-values from SMR are overly conservative

and lie below the diagonal line. The results observed in these exemplary traits generalize to all

other examined traits. For example, the genomic control factor from PMR-Egger is the lowest

among all methods in 25 out of the 39 traits, and ranges from 0.92 to 1.04 in WTCCC (Fig. 4c),

from 0.92 to 1.18 in GERA (Fig. 5c), and from 1.12 to 1.34 in UK Biobank (Fig. 6c). Note that

the high genomic control factor in the large UK Biobank is expected under polygenic

architecture[57]. In contrast, the genomic control factors from CoMM, TWAS, PrediXcan are often

higher than that from PMR-Egger for most traits examined. For example, the genomic control

factor from CoMM is often the highest among all other methods (except for LDA MR-Egger) in

22 out of the 39 traits, and ranges from 1.12 to 1.26 in WTCCC, 0.96 to 1.92 in GERA, and 1.45

to 1.90 in UK Biobank. The genomic control factor from TWAS is the highest among all other

methods (except for LDA MR-Egger) in 14 out of the 39 traits, ranges from 1.17 to 1.33 in

WTCCC, 1.01 to 1.45 in GERA, and 1.30 to 2.17 in UK Biobank. The genomic control factor

from PrediXcan is the highest among all other methods (except for LDA MR-Egger) in 5 out of

the 39 traits, and ranges from 1.21 to 1.32 in WTCCC, 1.02 to 1.38 in GERA, and 1.09 to 1.46 in

UK Biobank. In addition, consistent with simulations, we observed a substantial inflation of

LDA MR-Egger p-values: its genomic control factor ranges from 7.10 to 10.48 in WTCCC,

32.15 to 35.24 in GERA, and 10.48 to 16.65 in UK Biobank. Also consistent with simulations,

the p-values from SMR often lies underneath the expected null, even though its genomic control

factors are often well behaved (Fig. 4a, b, Fig. 5a, b, Fig. 6a, b and Supplementary Figs. 13-15).

We examined the number of associated genes detected by different methods based on a

Bonferroni corrected genome-wide threshold (Fig. 4d, Fig. 5d and Fig. 6d; Supplementary Table

2). For this analysis, we excluded LDA MR-Egger for comparison, as its p-values are overly

inflated. Comparing across the remaining methods, we found that SMR can barely detect any

genes significantly associated with traits across all three data sets, much less than that detected

by the other four methods. The much lower number of genes detected by SMR than the other

four methods are consistent with the relatively low power of SMR observed in simulations. For

the other four methods, we found that the number of gene-trait pairs detected by CoMM and

PMR-Egger is higher than that detected by TWAS and PrediXcan in all three GWASs (Fig. 4d,

Fig. 5d and Fig. 6d; Supplementary Table 2). The higher number of discoveries by both CoMM

and PMR-Egger in the three GWASs is consistent with our simulations as well as previous

observations that likelihood-based inference often achieves higher power than two-stage

inference for MR analysis. However, we do notice that PMR-Egger detects slightly lower

number of gene-trait pairs than CoMM based on the same genome-wide p-value threshold,

consistent with the inflated genomic inflation factors observed for CoMM. Indeed, we found that

the estimated $|\frac{\alpha}{\gamma}|$ for the common set of genes detected by both CoMM and PMR-Egger is

higher than the set of genes only detected by CoMM across traits (Supplementary Fig. 16a, b).

Therefore, the genes detected by CoMM but not PMR-Egger tend to have large $|\gamma|$ and small $|\alpha|$,

likely reflecting false associations due to horizontal pleiotropic confounding.

Overall, by controlling for horizontal pleiotropic effects, PMR-Egger detected many likely

causal genes that the other methods failed to detect. As the first example, the *C2* gene

(31,765,562-32,013,449 on chr 6) is only identified by PMR-Egger to be associated with T1D

($p = 3.65 \times 10^{-176}$), but not by the other methods (CoMM p=0.97; TWAS $p = 8.74 \times 10^{-4}$;

PrediXcan $p = 6.95 \times 10^{-3}$; SMR p=0.082). *C2* gene belongs to the classical pathway of the

complement immune system, is located within the class III MHC region, and has been confirmed

by several studies to be associated with autoimmune diseases[58,59]. As the second example, the

HLA-F gene (29,590,552-29,806,305 on chr 6), which is a HLA class I heavy chain paralogue, is

only identified by PMR-Egger to be associated with RA ($p = 2.57 \times 10^{-6}$), but not by the other

methods (CoMM $p = 4.34 \times 10^{-5}$; TWAS p=0.03; PrediXcan p=0.02; SMR p=0.08). As the

third example, the *HERPUD1* gene (56,865,960-57,077,798 on chr 16), which is a well-known

lipid-related gene[60,61], is only detected by PMR-Egger to be associated with dyslipidemia

($p = 2.48 \times 10^{-6}$), but not by the other methods (CoMM $p = 2.32 \times 10^{-5}$; TWAS $p = 6.92 \times$

10^{-3}; PrediXcan $p = 5.96 \times 10^{-3}$; SMR p=0.10). As the fourth example, the *ADAM15* gene

(154,923,042-155,135,252 on chr 1), which has been confirmed to be associated with height in

the UK Biobank Pheweb, is only detected by PMR-Egger to be associated with height ($p =$

3.60×10^{-8}), but not by the other methods (CoMM $p = 1.52 \times 10^{-5}$; TWAS p=0.17;

PrediXcan p=0.44; SMR p=0.14). Finally, the *DNAJC27-AS1* gene (25,094,259-25,362,563 on

chr 2) is only identified by PMR-Egger to be associated with height ($p = 3.16 \times 10^{-24}$), but not

by the other methods (CoMM p=0.99; TWAS $p = 1.10 \times 10^{-4}$; PrediXcan p=0.02; SMR

p=0.05). *DNAJC27-AS1* is a *DNAJC27* antisense RNA gene and can inhibit the expression of

DNAJC27, which has been confirmed to be associated with height in the UK Biobank Pheweb

and other large association studies[62].

Next, we shift our focus to testing horizontal pleiotropic effects. The p-values for testing the

causal effect of gene on phenotype are shown for WTCCC traits (Fig. 4e, f and Supplementary

Fig. 13), GERA traits (Fig. 5e, f and Supplementary Fig. 17), and UK Biobank traits (Fig. 6e, f

and Supplementary Fig. 18); with genomic control factors visualized in Fig. 4g, Fig. 5g and Fig.

6g. We also display qq-plots for the previously selected exemplary traits in Fig. 4e, f, Fig. 5e, f,

and Fig. 6e, F. Overall, consistent with simulations, the p-values from PMR-Egger are well

behaved while the p-value from LDA MR-Egger display substantial inflation. For example, the

genomic control factor from PMR-Egger ranges from 0.94 to 1.03 in WTCCC (Fig. 4g), from

0.92 to 1.26 in GERA (Fig. 5g), and from 1.13 to 1.71 in UK Biobank (Fig. 6g). In contrast, the

genomic control factor from LDA MR-Egger ranges from 10.16 to 15.64 in WTCCC, from 70.43

to 72.19 in GERA and from 17.75 to 29.85 in UK Biobank (Supplementary Table 1). With the

same Bonferroni adjusted genome-wide p-value threshold, PMR-Egger detected 33 gene-trait

pairs in WTCCC in which the cis-SNPs exhibit significant horizontal pleiotropy, 37 gene-trait

pairs in GERA, and 626 gene-trait pairs in the UK Biobank.

Horizontal pleiotropic effect tests can help us explain some of the discrepancy in terms of the

causal associations detected by PMR-Egger and the other methods. For example, for T1D in

WTCCC, the *ZKSCAN4* gene on chromosome 6 shows a significant pleiotropy effect ($p =$

2.93×10^{-8}) but displays no significant causal effect (p=0.99) by PMR-Egger. In contrast,

ZKSCAN4 is detected to be significantly associated with T1D by PrediXcan ($p = 2.80 \times 10^{-6}$),

and, to a lesser extent, by TWAS ($p = 4.12 \times 10^{-5}$). However, *ZKSCAN4* has not been reported

to be associated with T1D by previous GWASs. A careful examination of the *ZKSCAN4* locus

(28,112,401-28,327,011) revealed a neighboring MHC region (28,477,797-33,448,354), a region

previously well recognized to affect T1D and other autoimmune diseases. Indeed, by controlling

for the predicted expression level of the *APOM* gene (31,520,193-31,725,987) in the MHC

region in the PrediXcan framework, the association between the predicted *ZKSCAN4* expression

level and T1D is no longer significant ($p = 0.38$). Therefore, the causal association between

ZKSCAN4 and T1D detected by PrediXcan and TWAS likely reflect the horizontal pleiotropic

effect of *ZKSCAN4* cis-SNPs on T1D through genes in the MHC region. As another example, for

the trait of red blood cell count in UK Biobank, the *MAPT* gene on chromosome 17 shows a

significant pleiotropy effect ($p = 2.35 \times 10^{-9}$) but displays no significant causal effect (p=0.98)

by PMR-Egger. In contrast, *MAPT* is detected to be significantly associated with red blood cell

count by PrediXcan ($p = 8.11 \times 10^{-10}$), and, to a lesser extent, by TWAS ($p = 1.72 \times 10^{-3}$).

However, no previous evidence suggests that *MAPT* is associated with red blood cell count.

Indeed, we found that the genomic location of *MAPT* (43,871,748-44,205,700) is close to and

partially overlapped with *KANSL1* (44,007,282-44,402,733), which has been previously

identified to be associated with red blood cell traits[61,63]. Such association between *KANSL1* and

red blood cell count is also detected by PMR-Egger ($p = 1.02 \times 10^{-7}$), by CoMM ($p = 2.72 \times$

10^{-8}), and, to a lesser extent, by TWAS ($p = 1.66 \times 10^{-3}$) in the present study. By controlling

for the predicted expression level of the *KANSL1* gene in the PrediXcan framework, the

association between the predicted *MAPT* expression level and red blood cell count is no longer

significant ($p = 0.10$). Therefore, the causal association between *MAPT* and red blood cell count

detected by PrediXcan likely reflects the horizontal pleiotropic effect of *MAPT* cis-SNPs on red

blood cell count through *KANSL1*. As a final example, for height in the UK Biobank, the

pseudogene *RP11-9E13.2* (70,137,755-70,340,521) on chromosome 10 has a significant

pleiotropy effect ($p = 1.08 \times 10^{-13}$) but displays no significant causal effect (p=0.93) by PMR-

Egger. In contrast, *RP11-9E13.2* is detected to be significantly associated with height by

PrediXcan ($p = 4.34 \times 10^{-10}$), and, to a lesser extent, by TWAS ($p = 9.05 \times 10^{-6}$). The

pseudogene *RP11-9E13.2* is in the neighborhood of *MYPN* (69,765,912-70,071,774), which has

been previously identified to be associated with height[64]. The association between *MYPN* and

height is also detected by PMR-Egger ($p = 1.82 \times 10^{-7}$), CoMM ($p = 2.13 \times 10^{-14}$), and to a

lesser extent, PrediXcan ($p = 3.94 \times 10^{-4}$) and TWAS ($p = 1.55 \times 10^{-3}$), in the present study.

By controlling for the predicted expression level of *MYPN* gene in the PrediXcan framework, the

association between the predicted *RP11-9E13.2* expression level and height is no longer

significant at the genome-wide threshold ($p = 3.37 \times 10^{-4}$). Therefore, the causal association

between the pseudogene *RP11-9E13.2* and height as detected by PrediXcan and TWAS likely

reflects the horizontal pleiotropic effect of *RP11-9E13.2* cis-SNPs on height at least partially

through *MYPN*. The results suggest the practical importance of testing and controlling for

pleiotropic effects in TWAS applications.

Finally, we note that an important feature of PMR-Egger is its ability to test both causal effect

and horizontal pleiotropy effect simultaneously. We contrast the p-values obtained from these

two different tests across genes for those traits in which at least one gene is detected as

significant from either of the two tests (Supplementary Figs. 19-21). We found that different

traits exhibit different gene association patterns. For example, some traits may only contain

genes with a significant causal effect but without a significant horizontal pleiotropic effect (e.g.

CD and CAD in WTCCC; Allergic Rhinitis, Irritable Bowel Syndrome and Psychiatric disorders

in GERA). Some traits may only contain genes with a significant horizontal pleiotropic effect but

without a significant causal effect (e.g. Dermatophytosis in GERA). Some traits may contain

genes with a significant causal effect as well as genes with a significant horizontal pleiotropic

effect, but with the two sets of genes being non-overlapped (e.g. Asthma, Dyslipidemia, HT,

Abdominal Hernia and Macular Degeneration in GERA; Fored Vitral Capacity in UK Biobank).

While the majority of traits contain genes with both a significant causal effect and a significant

horizontal pleiotropic effect. The top gene which is most significant for both causal effect test

and pleiotropy test is highlighted in the plots. Being capable of testing both causal effect and

horizontal pleiotropy effect facilitates our understanding of the gene association pattern with

various different complex traits.

Discussion

We have presented a data generative model and a likelihood framework for MR analysis that

unifies many existing transcriptome wide association analysis methods and many existing MR

methods. Under the framework, we have presented PMR-Egger, a new method that conducts MR

analysis using multiple correlated instruments while properly controlling for horizontal

pleiotropic effects. By properly controlling for horizontal pleiotropic effects and making

inference under a likelihood framework, PMR-Egger yields calibrated p-values across a wide

range of scenarios and improves power of MR analysis over existing approaches. We have

illustrated the benefits of PMR-Egger through extensive simulations and multiple real data

applications of TWAS.

One important modeling assumption we made in PMR-Egger is that the horizontal pleiotropic

effects of all SNPs equal to each other. The equal effect size assumption directly follows the

commonly used Egger regression modeling assumption for MR analysis and is analogous to the

burden effect size assumption commonly used for rare variant tests. Consistent with existing

literature on applications of the Egger regression and burden test, we also found that equal effect

size assumption employed in PMR-Egger works reasonably robust with respect to a range of

model mis-specifications and appears to be effective in several real data applications examined

here. However, we do acknowledge that our equal effect size assumption in PMR-Egger can be

overly restrictive in many settings. We have attempted to alleviate this restrictive modeling

assumption by imposing an alternative modeling assumption on the horizontal effect sizes based

on variance component assumption. In particular, we have attempted to assume that the

horizontal pleiotropic effect of each SNP follows a normal distribution with mean zero and a

certain variance component parameter, i.e. analogous to the SKAT test assumption[65]. Such

variance component assumption is a more flexible modeling assumption than the equal effect

size assumption, potentially alleviating much of the concern with respect to the sensitivity and

robustness of equal effect size assumption. Unfortunately, under the variance component

assumption, inference for the resulting PMR model becomes overly complicated. In particular,

due to the estimation uncertainty in the hyper-parameter estimates, the p-values from the PMR

variance component model becomes severely deflated even under simple null simulations

(Figures S22). Such deflation of p-values has been previously observed in variance component

tests for microbiome applications[66]. Only few methods exist to address such p-value in-

calibration issue resulting from hyper-parameter estimation uncertainty[67], and it is not

straightforward to adapt any of these methods to our PMR variance component model. Besides

the equal effect size modeling restriction, we also note that neither PMR-Egger nor the PMR

variance component model is capable of accounting for correlation between horizontal

pleiotropic effects γ and the SNP effects on gene expression β. Therefore, while we view PMR-

Egger as in important first step towards effective control of horizontal pleiotropic effects in

TWAS applications, we emphasize that imposing more realistic modeling assumptions on the

horizontal pleiotropic effects in the PMR framework will likely yield more fruitful results in the

future.

We have primarily focused on modeling continue traits with PMR-Egger. For case control

studies, we have followed previous approaches and directly treated binary phenotypes as

continuous outcomes[19,49,68,69], which appears to work well in both WTCCC and GERA data

applications we examined. Treating binary phenotypes as continuous outcomes can be justified

by recognizing the linear model as a first order Taylor approximation to a generalized linear

model[19]. However, it would be desirable to extend PMR-Egger to accommodate case control

data or other discrete data types in a principled way, by, for example, extending PMR-Egger into

the generalized linear model framework. In particular, we could use a probit or a logistic link to

extend PMR-Egger to directly model case control data. Extending PMR-Egger to model discrete

data types using the generalized linear model framework would likely lead to wider applications

of PMR-Egger and is thus an important avenue for future research.

We have primarily focused on modeling individual-level data with PMR-Egger. However, like

many other linear model-based methods in statistical genetics, PMR-Egger can also be easily

extended to make sure of summary statistics. The summary statistics version of PMR-Egger is

described in detail in the Supplementary Text. Briefly, the summary statistics version of PMR-

Egger requires marginal SNP effect size estimates and their standard errors, both on the gene

expression and on the trait of interest. In addition, it requires a SNP by SNP correlation matrix

that can be constructed based on a reference panel. Being able to make use of summary statistics

extends the applicability of PMR-Egger to data sets where individual-level genotype or

phenotype are not available.

Finally, in addition to what we have already mentioned in the Materials and Methods, we

emphasize here again, that, while we have followed the previous MR literature and use "causal

effect" through the text, the effect is causal only when certain MR modeling assumptions hold.

These MR assumptions are often not straightforward to prove. For example, without measuring

all potential confounders, it is not straightforward to argue that the SNP instruments are not

associated with any other confounders that may be associated with both exposure and outcome.

Therefore, we caution against the over-interpretation of causal inference in observation studies

such as TWAS applications. However, we do believe MR is an important step that allows us to

move beyond standard linear regressions and is an important analysis that can provide potentially

more trustworthy evidence with regard to causality compared to simpler approaches.

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Author contributions

XZ conceived the study. XZ and ZY developed the methods. ZY developed the software tool with assistance from JL and CY. ZY performed simulations and real data analysis with assistance from HZ, PZ, SY, and SS. XZ and ZY wrote the manuscript with input from all other authors. All authors reviewed and approved the final manuscript.

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Table 1 Summary of some existing MR methods

	Design	Instrumental variable	β effect assumption	γ effect assumption	Estimation procedure	Individual or summary data
PrediXcan[1]	Two-sample	Correlated	Elastic net	N/A	Two-stage	Both
TWAS[2]	Two-sample	Correlated	BSLMM	N/A	Two-stage	Both
SMR[3]	Two-sample	Univariate	Fixed effect	N/A	Two-stage	Summary
GSMR[4]	Two-sample	Near-independent	Fixed effect	N/A	Two-stage	Summary
MR-Egger[13]	Two-sample	Independent	Fixed effect	Equal effect size	Two-stage	Summary
CoMM[20]	Two-sample	Correlated	Normal	N/A	MLE	Individual
CaMMEL[26]	Two-sample	Correlated	Fixed effect	Normal	Variational Bayes	Summary
Kang et al.[27]	One-sample	Correlated	Fixed effect	Lasso	Two-stage	Individual
MRMix[32]	Two-sample	Independent	Normal Mixture	Normal Mixture	Estimating equation	Summary
Berzuini et al.[33]	One-sample	Correlated	Fixed effect	Horseshoe	MCMC	Individual
LDA MR-Egger[35]	Two-sample	Correlated	Fixed effect	Equal effect size	Two-stage	Summary
PMR-Egger	**Two-sample**	**Correlated**	**Normal**	**Equal effect size**	**MLE**	**Both**

Methods are categorized based on the experimental design (two-sample vs one-sample vs both), the characterizes of selected instrumental variables (univariate vs multiple independent vs multiple correlated), β effect size assumption, γ effect size assumption, estimation/inference procedure (ratio-based vs two-stage estimation vs maximum likelihood vs Bayesian), and input data type (individual-level vs summary). The categorization of inference procedure generally follows ref [5]. In the inference procedure, the two-stage estimation procedure comprises two regression stages: the first-stage regression of the exposure on the instrumental variables, and the second-stage regression of the outcome on the fitted values of the exposure from the first stage. Some inference procedures, such as the inverse variance weighted (IVW) procedure (e.g. MR-Egger[13]) or the ratio method (e.g. for SMR[3]) are categorized as two-stage procedure here, as both are asymptotically equivalent to a two stage estimation procedure in the case of independent instruments. We only list MR methods that directly take input instruments into the model; many MR methods that performs various selection procedures on the instruments (e.g. Guo et al[28]) are not included in the table. Some recently developed methods that only test for horizontal pleiotropy, such as GLIDE[30], MR-PRESSO[21] and modified second-order weighting of Cohran's Q statistic[24,25], are not included in the table.

Table 2. Mean computational time (in second) of various MR methods

Trait	#SNP in the exemplary gene	CoMM	PMR-Egger	TWAS	LDA MR-Egger	SMR	PrediXcan	MR-PRESSO
T1D from WTCCC (n=4901)	300	0.51(0.19)	0.80(0.57)	96.09(72.39)	0.08(0.02)	0.0003(0.0005)	26.74(2.81)	408.27(74.76)
	500	1.21(0.41)	1.42(0.77)	3.48(1.16)	0.14(0.03)	0.0004(0.0005)	11.77(0.64)	829.04(135.79)
	983	5.85(1.50)	9.79(1.56)	4.69(1.73)	0.60(0.09)	0.0004(0.0005)	9.96(0.78)	2023.77(260.43)
	2106	111.00(12.87)	97.33(7.63)	5.87(2.26)	4.18(0.59)	0.0005(0.0005)	22.90(2.63)	4913.22(554.47)
Asthma from GERA (n=61,953)	300	1.47(0.29)	2.06(0.22)	2.61(1.48)	0.05(0.02)	0.0002(0.0004)	33.39(3.09)	464.64(62.18)
	500	1.21(0.33)	4.21(0.81)	2.54(0.87)	0.09(0.03)	0.0002(0.0004)	11.71(0.70)	919.66(102.83)
	1000	24.37(5.13)	21.68(1.66)	3.07(2.55)	0.46(0.13)	0.0002(0.0004)	14.29(1.30)	2275.42(263.95)
	2008	59.01(4.98)	52.52(4.47)	4.51(1.48)	2.33(0.71)	0.0004(0.0005)	20.18(3.28)	5213.73(601.46)
Platelet Count from UK Biobank (n=337,199)	300	2.56(0.53)	5.57(4.54)	5.04(4.19)	0.09(0.02)	0.0008(0.0004)	10.93(1.96)	471.55(50.44)
	500	6.82(2.75)	7.61(2.30)	5.44(4.30)	0.15(0.02)	0.0007(0.0005)	12.17(1.04)	876.06(92.90)
	1052	24.92(6.28)	23.59(3.21)	5.91(4.79)	0.81(0.09)	0.0008(0.0004)	16.05(2.38)	2133.03(77.56)
	2605	186.14(28.45)	178.68(16.75)	5.37(0.73)	8.11(1.20)	0.0008(0.0004)	9.89(1.74)	6949.72(245.75)

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954 Computation is carried out on a single thread of a Xeon Gold 6138 CPU. The computation time is averaged across 20 replicates, with values inside parentheses denoting the standard deviation. #SNP denotes the number of cis-SNPs for four exemplary genes in each study. The computational time for MR-PRESSO is based on 10,000 permutations.

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Fig. 1 Quantile-quantile plot of -log10 p-values from different methods for testing the causal effect either in the absence or in the presence of horizontal pleiotropic effect under null simulations. Compared methods include CoMM (green), PMR-Egger (red), TWAS (blue), LDA MR-Egger (black), SMR (orange), and PrediXcan (purple). Null simulations are performed under different horizontal pleiotropic effect sizes: (**a**) $\gamma = 0$; (**b**) $\gamma = 0.0001$; (**c**) $\gamma = 0.0005$; (**d**) $\gamma = 0.001$. Only p-values from PMR-Egger adhere to the expected diagonal line across a range of horizontal pleiotropic effect sizes.

Fig. 2 Power of different methods under various simulation scenarios. Power (y-axis) at a false discovery rate of 0.1 to detect the causal effect (**a-d**) or the horizontal pleiotropic effect (**e-f**) is plotted against different causal effect size characterized by PVE_{zy} (x-axis). Compared methods include CoMM (green), PMR-Egger (red), TWAS (blue), LDA MR-Egger (black), SMR (orange), and PrediXcan (purple). Simulations are performed under different horizontal pleiotropic effect sizes: (**a**) $\gamma = 0$; (**b**) $\gamma = 0.0001$; (**c**, **e**) $\gamma = 0.0005$; (**d**, **f**) $\gamma = 0.001$.

Fig. 3 Quantile-quantile plot of -log10 p-values from different methods for testing the horizontal pleiotropic effect either in the absence or in the presence of causal effect under null simulations. Compared methods include PMR-Egger (red), LDA MR-Egger (black), and MR-PRESSO (dodger blue). Null simulations are performed under different causal effect sizes characterized by PVE_{zy}: (**a**) $PVE_{zy} = 0$; (**b**) $PVE_{zy} = 0.2\%$; (**c**) $PVE_{zy} = 0.4\%$; and (**d**) $PVE_{zy} = 0.6\%$. Only p-values from PMR-Egger adhere to the expected diagonal line across a range of horizontal pleiotropic effect sizes. Due to heavy computational burden, we are only able to run 10,000 permutations for MR-PRESSO. Therefore, the minimal p-value from MR-PRESSO is 10^{-4}.

Fig. 4 TWAS analysis results by different methods for traits in the WTCCC data. Compared methods include CoMM (green), PMR-Egger (red), TWAS (blue), LDA MR-Egger (black), SMR (orange), and PrediXcan (purple). (**a**) Quantile-quantile plot of -log10 p-values from different methods for testing the causal effect for an exemplary trait BD. (**b**) Quantile-quantile plot of -log10 p-values from different methods for testing the causal effect for another exemplary trait T1D. (**c**) Genomic inflation factor for testing the causal effect for each of the 7 traits by different methods. (**d**) Number of causal genes identified for each of the 7 traits by different methods. (**e**) Quantile-quantile plot of -log10 p-values from different methods for testing the horizontal pleiotropic effect for an exemplary trait BD. (**f**) Quantile-quantile plot of -log10 p-values from different methods for testing the horizontal pleiotropic effect for another exemplary trait T1D. (**g**) Genomic inflation factor for testing the horizontal pleiotropic effect for each of the 7 traits by different methods. (**h**) Number of genes identified to have significant horizontal pleiotropic effect for each of the 7 traits by different methods. For **c**, **d**, **g**, **h**, the number on the x-axis represents seven traits in order: T1D, CD, RA, BD, T2D, CAD, HT.

Fig. 5 TWAS analysis results by different methods for traits in the GERA data. Compared methods include CoMM (green), PMR-Egger (red), TWAS (blue), LDA MR-Egger (black), SMR (orange), and PrediXcan (purple). (**a**) Quantile-quantile plot of -log10 p-values from different methods for testing the causal effect for an exemplary trait Irritable Bowel Syndrome. (**b**) Quantile-quantile plot of -log10 p-values from different methods for testing the causal effect for another exemplary trait Asthma. (**c**) Genomic inflation factor for testing the causal effect for each of the 22 traits by different methods. (**d**) Number of causal genes identified for each of the 22 traits by different methods. (**e**) Quantile-quantile plot of -log10 p-values from different methods for testing the horizontal pleiotropic effect for an exemplary trait Irritable Bowel Syndrome. (**f**) Quantile-quantile plot of -log10 p-values from different methods for testing the horizontal pleiotropic effect for another exemplary trait Asthma. (**g**) Genomic inflation factor for testing the horizontal pleiotropic effect for each of the 22 traits by different methods. (**h**) Number of genes identified to have significant horizontal pleiotropic effect for each of the 22 traits by different methods. For **c**, **d**, **g**, **h**, the number on the x-axis represents 22 traits in order: Asthma, Allergic Rhinitis, CARD, Cancers, Depressive Disorder, Dermatophytosis, T2D, Dyslipidemia, HT, Hemorrhoids, Abdominal Hernia, Insomnia, Iron Deficiency, Irritable Bowel Syndrome, Macular Degeneration, Osteoarthritis, Osteoporosis, PVD, Peptic Ulcer, Psychiatric disorders, Stress Disorders, Varicose Veins.

Fig. 6 TWAS analysis results by different methods for traits in the UK Biobank data. Compared methods include CoMM (green), PMR-Egger (red), TWAS (blue), LDA MR-Egger (black), SMR (orange), and PrediXcan (purple). (**a**) Quantile-quantile plot of -log10 p-values from different methods for testing the causal effect for an exemplary trait BMI. (**b**) Quantile-quantile plot of -log10 p-values from different methods for testing the causal effect for another exemplary trait Platelet Count. (**c**) Genomic inflation factor for testing the causal effect for each of the 10 traits by different methods. (**d**) Number of causal genes identified for each of the 10 traits by different methods. (**e**) Quantile-quantile plot of -log10 p-values from different methods for testing the horizontal pleiotropic effect for an exemplary trait BMI. (**f**) Quantile-quantile plot of -log10 p-values from different methods for testing the horizontal pleiotropic effect for another exemplary trait Platelet Count. (**g**) Genomic inflation factor for testing the horizontal pleiotropic effect for each of the 10 traits by different methods. (**h**) Number of genes identified to have significant horizontal pleiotropic effect for each of the 10 traits by different methods. For **c**, **d**, **g**, **h**, the number on the x-axis represents 10 traits in order: Height, Platelet count, Bone mineral density, Red blood cell count, FEV1-FVC ratio, BMI, RDW, Eosinophils count, Forced vital capacity, White blood cell count.