FULL TITLE

Tissue-specific expression of young small-scale duplications in human central nervous system

regions

SHORT TITLE

Duplicate gene expression in human brain regions

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ABSTRACT

Gene duplication has generated new biological functions during evolution that have contributed to the

increase in tissue complexity. Several comparative genomics and large-scale transcriptional studies

performed across different organs have observed that paralogs and particularly small-scale

duplications (SSDs) tend to be more tissue-specifically expressed than other gene categories. However,

the major involvement of whole-genome duplications (WGDs) was also suggested in the emergence of

tissue-specific expression features in the brain. Our work complements these previous studies by

exploring intra-organ expression properties of paralogs through multiple territories of the human

central nervous system (CNS) using transcriptome data generated by the Genotype-Tissue Expression

(GTEx) consortium. Interestingly, we found that paralogs, and especially those originating from SSDs

younger than WGDs (ySSDs), are significantly implicated in tissue-specific expression between CNS

territories. We then explored genes co-expressed across CNS regions and noticed the enrichment of co-

expressed families in ySSD genes. More precisely we found that ySSDs were more often specific to the

same tissue than other paralogs. Moreover, we observed the distinct effect of the young duplication

age, in addition to the SSD type effect, on the tissue-specific expression of ySSDs within the CNS.

Overall, our study suggests the major involvement of ySSDs in the differentiation of human CNS

territories and shows the relevance of exploring tissue-specific expression at the intra-organ level in

addition to the analyses performed between different organs.

AUTHOR SUMMARY

The duplication of genes is one of the main genetic mechanisms that have led to the gain in complexity

of biological tissue. Although the implication of duplicated genes in brain evolution has been

extensively studied through comparisons between different organs, the role of these genes in the

specialization of different regions of the adult brain has not yet been well described. We explored in our

study the intra-organ expression properties of duplicates through multiple territories of the human

central nervous system (CNS) using transcriptome data generated by the Genotype-Tissue Expression

consortium. Although previous work comparing the expression of duplicates between different organs

has identified the involvement of whole-genome duplications (WGDs) in tissue-specific expression in

the brain, we completed this landscape by revealing that between the CNS tissues it was rather the

small-scale duplications younger than WGDs (ySSDs) which were associated with regional patterns of

expression. We also analysed the gene co-expression across CNS territories and found the enrichment

of co-expressed families in ySSDs specifically expressed to the same tissue. Thus, we highlight with our

study the relevance and complementarity of tissue-specific and co-expression analyses at the intra-

organ level with the ones performed between different organs.

INTRODUCTION

Comparative genomics and large-scale transcriptional studies have highlighted the major contribution

of gene duplication to tissue differentiation and phenotypic diversity (1,2). The fact that some paralogs

are retained in genomes through evolution seems to be initially favored by dosage balance (3) and their

long-term preservation is then made possible by the following two processes: the neo-

functionalization, which consists of the gain of a new function by one duplicate potentially associated

with a different spatial expression (4–7), or the sub-functionalization which consists in the partition of

the ancestral function or spatial expression between duplicates (8,9). The divergence of spatial

expression between paralogs can be approached by the study of gene tissue-specificity, which indicates

whether a gene has a broad or narrow expression pattern across a collection of tissues (3,10,11). The

comparison of transcriptomes between different mouse organs has shown that the brain was among

the ones expressing the highest proportion of tissue-specific paralogs in relation to the total number of

genes expressed in the brain, while it does not express the highest proportion of tissue-specific

singletons (10). The brain is therefore a model perfectly suited to the detailed exploration of the

transcriptional properties of the duplicated genes.

Among the 60% of human genes considered as paralogs (2), some come from whole-genome

duplications (WGD) in early vertebrate lineage approximately 500 million years ago (12,13), the others

come from small scale duplications (SSD) that have occurred throughout the evolution (14). A

comparison in mammals, notably in human, of the brain transcriptome with those of other organs has

shown that WGDs tend to be enriched in brain-specific genes compared to SSDs (15,16). This supports

the theory that genome duplications have allowed vertebrates to develop more complex cellular

organizations, such as the different brain tissues (17,18).

In complement of the role of the WGDs in the tissue complexity, some theories support the idea that

young duplicated genes tend to be preferentially expressed in evolutionarily young tissues (19).

Moreover, a higher proportion of primate-specific paralogs were found to be up-regulated in the

developing human brain compared to the adult brain (20), whereas this expression pattern was not

found for older duplications (21). Regarding recent duplications, that emerged in the human lineage,

studies have suggested their contribution to human-specific adaptive traits, such as the gain of brain

complexity (22–24).

While the expression properties of paralogs between different organs, including the brain, have been

well studied, we have little knowledge of the expression characteristics of duplicated genes between

different regions of the same organ. Large-scale transcriptional profiling of neuroanatomic regions (25)

allows us now to further investigate paralog expression between the different territories of the human

central nervous system (CNS) according to their evolutionary properties.

This present study explores in detail the expression patterns of paralogs between the different

territories of the human CNS, using the GTEx resource, according to their evolutionary characteristics

and gene families. We started assessing whether duplicated genes were associated with differences in

expression between CNS tissues and we investigated their tissue-specificity. Secondly, we studied the

evolutionary characteristics of tissue-specific paralogs such as their age and the type of duplication

event. We then analyzed the organization of paralogs in families using co-expression to define co-

expressed gene families and studied their tissue-specificity and evolutionary characteristics.

A better comprehension of the biology of paralogs could also support our understanding of diseases

(26), since disease-associated genes have been found to be over-represented in paralogs compared to

singletons (27–29) and particularly in WGDs and old SSDs (30,31). Thus, we finally explored the

association of paralogs with human brain diseases.

RESULTS

1/ Association of paralog expression with CNS differentiation

We considered in our study all human protein coding genes and the information collected on

duplication events in order to split the gene population into paralogs and singletons (2) (Methods). In a

recent landmark contribution, the GTEx (Genotype-Tissue Expression) consortium used RNA sequencing technology to establish the landscape of human gene expression across a large collection of postmortem biopsies (25). Gene expression data for hundreds of individuals from 13 normal brain-related tissues (Methods) were obtained from the GTEx consortium. After filtering out low information content genes, abundance values of 16,427 protein-coding genes, including 10,335 paralogs and 6,092 singletons were retained. Previous work by GTEx established the relevance of using gene expression data to cluster samples obtained from the same tissues, even though assigning samples to the correct CNS region was more difficult than for other organs (25). We extended this analysis by focusing specifically on CNS tissues and assessing whether paralog expression could better classify samples into tissues than singletons or all protein-coding genes. Our unsupervised hierarchical classification of human CNS samples, based on their pair-wise similarity in terms of correlation across gene expression values, was able to group together most samples belonging to the same tissue (Methods; Fig 1).

The relevance of our experimental classification was evaluated according to the expected belonging of samples to the 13 brain-related tissues using the adjusted rand index (ARI) (32). We observed that globally, the sample classification based on paralog expression (ARI = 0.197) was slightly better than the classification obtained using all protein-coding genes (ARI = 0.175) or singletons (ARI= 0.182). It should be noted that the quality of a clustering is likely to be influenced by the number of genes used in the analysis. Therefore, the better ARI score obtained with the paralogs compared to singletons could be partly due to the higher number of paralogs in relation to singletons. However, we also obtained a greater ARI with the paralogs in comparison to the ARI calculated from all protein-coding genes, thus suggesting a particular biological relationship between paralogs expression and CNS tissue differentiation.

Fig 1. Unsupervised hierarchical clustering of genes expressed in human central nervous system regions. Hierarchical clustering of genes expressed in the CNS regions was performed based on gene pairwise distance in terms of correlation across gene expression values. The three gene groups considered are: protein-coding genes, singletons and paralogous genes. Each CNS region is represented by a different color. The tissues belonging to the same anatomically defined CNS region are represented in the same color: blue for the cerebellum region (cerebellum and cerebellar hemisphere tissues), green for the cortex region (cortex, frontal cortex and anterior cingulate cortex tissues), purple for the basal ganglia region (putamen, nucleus accumbens and caudate tissues), and red for the amygdala-hippocampus region (amygdala and hippocampus tissues). The remaining tissues are considered as independent CNS regions: pink for the hypothalamus region, yellow for the spinal cord region and black for the substantia nigra.

In addition to this clustering analysis, we carried out another assessment by performing differential expression analysis of gene count data between all pairs of CNS tissues (Methods). We obtained a list of significantly differentially expressed genes (DEGs) for each pair of tissues (S3 Table). By comparing the relative proportion of DEGs in paralogs and singletons, we observed that DEGs were significantly enriched in paralogs for 75 out of the 78 tissue-pairs tested (Chi-squared test, and threshold p-value = 6.41E-04 with Bonferroni correction to account for the number of tissue pairs). Furthermore, in order

to assess the potential bias of expression level in these results, we calculated the overall expression of

paralogs averaged over brain-related tissues and found it to be significantly lower than that of

singletons (12 versus 37 RPKM respectively, t-test, p-value=5E-16). This observation, which implies

less power in the DE tests for the former group, makes the enrichment of the DEGs in paralogs even

more reliable.

Overall, these complementary analyses on tissue clustering and differential expression illustrate the

strong biological contribution of paralogous genes to expression differences between CNS territories.

In Fig 1, the choice of color gradients for tissues that anatomically overlap confirmed the ability of gene

expression profiles to classify these tissues into neurologically relevant groups. Therefore, from the

next result sections on tissue-specificity analyses, we pool together some of the 13 initial tissues that

showed similar expression profiles in order to define a shorter list of 7 CNS regions (Methods).

2/ Tissue-specific expression of paralogs in CNS regions

We further investigated these expression differences of paralogs between CNS territories by looking at

their tissue-specificity. The detection of tissue-specific genes was performed using expression profiles

quantified across the 7 CNS regions previously defined. From the collection of methods developed to

measure tissue specificity, we selected the method based on Tau score because of its high sensitivity to

detect tissue-specific genes (33,34). The Tau score ranges from 0 for broadly expressed genes, to 1 for

highly tissue-specific genes (Methods). Contrary to Tau score distributions reported in a previous study

on different organs (34), the distribution of Tau scores across the CNS regions in the present study was

not bi-modal and had a unique mode centered on low values (Fig 2A). Consequently, the Tau threshold

for declaring a gene tissue-specific could not be visually defined. We thus developed an approach based

on permutations to adapt this threshold choice to the case of similar tissues within a single organ

system. We calculated an empirical p-value for each gene, based on permutations of the tissue labels,

and then performed a False Discovery Rate (FDR) correction on the p-values for the multiple genes

tested (Benjamini-Hochberg corrected p-value < 0.01) (Fig 2A). This approach led to a Tau threshold of

0.525. We found that 17% (2,829) of protein-coding genes expressed in the CNS regions were tissue-

specific (S1 Fig). Moreover, we established that paralogs were significantly enriched in tissue-specific

genes compared to singletons (19.2% of paralogs were tissue-specific, versus 13.9% of singletons, p-

value = 2.045E-18, using a Chi-squared test) (Table 1). We confirmed this association between paralogs

and tissue-specificity in addition to their expression level, by using a multivariate linear model,

inspired from the analyses of Guschanski et al. 2017, that predicts the Tau score of a gene from its

maximal expression over the CNS regions and its duplication status (S1 Result and S16A Table).

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Fig 2. Tissue-specific expression of protein coding genes across human CNS regions. **(A)** Density plot of

original Tau scores (blue line) calculated from the expression values of 16227 protein coding genes,

and permutated Tau scores (purple line) calculated from 1000 x 16427 permutations. The tissue-

specificity threshold of 0.525 (red dotted line) is defined, from permutated scores using the Benjamini-

Hochberg corrected P-value of 0.01. **(B)** Unsupervised hierarchical clustering of tissue-specific genes

expressed across CNS regions. The heatmap illustrates the mean gene expression calculated over

sample cohort for each CNS region.

Table 1. Enrichments in tissue-specific genes for the tested and reference gene groups

Reference group[a]	Tested group for tissue-specificity[a]	Percentage of tissue-specific genes in the tested group (%)	Chi-squared test P-value[b]	Odds ratio[c]
Protein coding genes	Paralogous genes	19.2	2.045E-18*	1.48
Paralogous genes[d]	WGD genes	15.7	1.061E-18*	0.64
	SSD genes	22.6	9.022E-11*	1.39
	ySSD genes	28.6	6.341E-18*	1.82
SSD genes	ySSD genes	28.6	3.483E-09*	1.62
	oSSD genes	15.6	2.729E-13*	0.52
WGD + wSSD genes	WGD genes	15.7	5.185E-12*	0.59

[a] Abbreviations for gene duplication categories : WGD (Whole-Genome Duplication), SSD (Small-Scale Duplication), ySSD (younger SSD occuring after WGD events), oSSD (older SSD occuring before WGD events) and wSSD (WGD-old SSD occuring around WGD events).

[b] Application of Chi-squared tests (or of Fisher's exact test when the Chi-squared test could not be applied) with a corrected p-value threshold = 7.14E-03 (Bonferroni correction for 7 statistical tests).

[c] The odds ratio (>1 or <1) indicates the group (tested or non-tested respectively) in which there is an enrichment.

[d] The paralog reference group includes the genes belonging to WGD, SSD and WGD-SSD categories and the paralogs without annotation.

Although this method based on the Tau score can identify tissue-specific genes, it does not indicate which CNS region is targeted by this specificity (33). In order to study the regional distribution of tissue-specific genes, we mapped each tissue specific gene to one CNS region (S4 Table). Therefore, for each tissue-specific gene, we considered the anatomical region associated with the highest expression value to be the specific region (Fig 2B). We discovered that the distribution of tissue-specific genes across CNS regions was very heterogeneous (S6 Table) compared to an almost constant proportion of expressed genes across these regions (S5 Table). The highest proportions of tissue-specific genes were found in the cerebellum (40.2%), spinal cord (20.9%) and hypothalamus (16.4%). The remaining tissue-specific genes (22.5%) were scattered over the last four brain-related regions. The distribution of tissue-specific paralogs across CNS territories was also highly heterogeneous and similar to the distribution obtained for all tissue-specific protein-coding genes (S6 Table).

In summary, we found that paralogs were more tissue-specific than other genes and that tissue-specific paralogs were concentrated in a limited number of CNS regions similarly to the other tissue-specific genes. Precisely, we observed that the paralogous status contributed to the tissue-specific property in addition of the expression value.

3/ Evolutionary and genomic properties of tissue-specific paralogs

The date of an SSD can be estimated in relation to the WGD events and attributed to one of the three duplication age categories: younger SSD (after WGD events - ySSD), older SSD (before WGD events-oSSD) and WGD-old SSD (around WGD events – wSSD) (see Methods) (30). Using our collection of paralogs with tissue-specific expression between CNS regions, we performed statistical tests to determine if they were enriched in particular duplication events (WGD or SSD) or dates of SSDs (oSSD, wSSD and ySSD categories). Genes can undergo both WGD and SSD duplication and can sometimes be retained after each duplication. Unless otherwise stated, when we refer to a duplication type from this point on in the paper, we are referring to genes that have been retained after this duplication type only (WGD or SSD), in order to make a clear distinction between the effects of the two duplication types. Of the 10,335 paralogs considered in our study, 5,114 are from WGD, 3,719 from SSD (1,192 from ySSD, 1,260 from wSSD and 1,267 from oSSD) and 1,502 unclassified (966 both WGD-SSD and 536 without annotation).

We first observed that, among paralogs, SSD genes were significantly enriched in tissue-specific genes (22.6% of SSDs were tissue-specific versus 17.3% of the other paralogs, p-value = 9.022E-11), while on the opposite WGDs were depleted in tissue-specific genes (Table 1). However, we noticed that WGDs seemed slightly enriched in tissue-specific genes, compared to singletons (15.7% of WGDs were tissue-specific versus 14.4% of the singletons, p-value = 4.1E-02). Furthermore, when we performed the same analysis only on the paralogs duplicated around the WGD events (WGDs and wSSDs), the WGD genes were still significantly depleted in tissue-specific genes (15.7% of WGDs were tissue-specific versus 24% of wSSDs, p-value = 5.185E-12) (Table 1). These tests allowed us to conclude that SSD paralogs were enriched in tissue-specific genes, independently of the potential effect of the duplication date on

tissue-specificity.

In addition to assessing the effect of duplication type, we also tested the association between
duplication age categories and tissue-specificity, and found that ySSD were also enriched in tissue-
specific paralogs (28.6% of ySSDs versus 18.0% of the remaining paralogs, p-value = 6.341E-18).
Moreover, ySSDs were still enriched in tissue-specific paralogs when we performed the analysis on SSD
paralogs only (28.6% of ySSDs versus 19.8% of the remaining SSDs, p-value = 3.483E-09). On the other
hand, oSSDs were depleted in tissue-specific genes compared to other SSD paralogs (15.6% of oSSDs
versus 26.2% of the remaining SSDs, p-value = 2.729E-13) (Table 1). We confirmed the contribution of
both duplication age and duplication type to the tissue-specificity of paralogs, independently of the
effect of their maximal expression level, using multivariate linear models (S1 Result and S16C-D
Tables). In summary, we could conclude that ySSD genes were more tissue-specific than other paralogs,
probably due to both their SSD origin and their duplication age.

To obtain a complementary view of this tissue-specificity loss for very recent duplications, we
examined the distribution of the Tau scores of paralogs according to their phyletic age (S4 Fig). We
found that the maximum Tau scores were obtained for genes with phyletic ages around 0.12 which
corresponds in most cases to ySSD duplication events that occurred around the separation of the
Simians clade (Ensembl Compara GRCh37 p.13). This result seems to indicate that tissue-specific
expression is not a property particularly associated with very recent duplications, even though it seems
to increase for slightly older ySSDs and to decrease afterwards (Fig 4). In summary, we found that SSD
genes and in particular ySSD genes were more often tissue-specific than other paralogs due to their
duplication origin and to the age of ySSD genes.

Fig 4. Association between the phyletic age of the duplication and the tissue-specificity. Boxplots show
the distribution of Tau scores for paralogs grouped according to their phyletic age obtained from Chen
et al., 2013. The range of phyletic ages corresponding to WGDs is indicated by a blue horizontal bar. The
red horizontal line represents the threshold of tissue-specificity (Tau score = 0.525).

4/ Tissue-specificity analysis of co-expressed gene families

We previously found that paralogs, and especially SSDs and ySSDs, were involved in territorial
expression between the different CNS regions, notably through tissue-specificity. In this section, we
tried to determine if the paralogs within gene families tended to share the same tissue-specificity
across CNS regions.

We first studied the potential expression similarity between paralogs across CNS regions by using a co-
expression analysis without using *a priori* knowledge on their tissue-specificity.

The study of co-expression allowed us to explore the higher level of organization of the paralogs into
groups of genes with coordinated expression across CNS tissues and compare these modules of co-

expressed paralogs across tissues against annotated gene families. The Weighted Gene Correlation Network Analysis (WGCNA) methodology (35) was used to infer the correlation-based co-expression network. Contrary to previous studies that inferred a network per tissue and then compared modules between networks (36,37), in this study we carried out co-expression network inference by simultaneously using all the 13 CNS tissue samples profiled by the GTEx consortium in order to explore gene associations with tissue differentiation. We optimized the WGCNA to generate highly correlated co-expression modules of small size in order to compare them with the annotated gene families (see Methods and S2 Fig). Indeed, out of our 3,487 gene families, 1,644 (47%) were constituted of only two genes. Our WGCNA analysis extracted 932 modules of co-expressed paralogous genes. Only 104 genes were not included in a co-expression module. The module size ranged from 2 to 911 genes with 84% of small size modules (modules with less than 10 genes) (S7 Table). A high proportion of modules were enriched in molecular function and biological process GO terms indicating that our network inference approach captured shared biological functions among co-expressed paralogs (S4 Result).

This co-expression network analysis allowed us to classify the gene families into two categories, homogeneous and heterogeneous gene families, based on their patterns of expression across CNS tissues (see Methods). A homogeneous gene family was defined by the property that the majority of its member genes were included in the same co-expression module. Out of the 3,487 gene families considered in this co-expression study, we identified 111 homogeneous families (with 257 co-expressed paralogs out of a total of 300 expressed paralogs in these families, the remaining 43 not co-expressed paralogs being removed from all tests on homogeneous family genes in the rest of the article) and thus 3,376 heterogeneous families (10,035 paralogs) (S13-S14 Tables). We showed by a permutation approach that this number of homogeneous families was significantly large, with an empirical p-value inferior to 10^{-3} (see Methods), suggesting that paralogs were more co-expressed across CNS tissues when they came from the same family. A biological pathway enrichment analysis of the homogeneous family genes revealed that they were notably enriched in transcription factors and signaling proteins involved in neural development (S6 Result and S10 Table).

We then investigated the link between shared tissue-specificity and homogeneous gene families by

categorizing families according to their tissue-specificity following the classification defined by Guschanski et al. 2017 (S7 Result). Families composed of a majority of genes tissue-specific to the same regions were classified as tissue-specific families. We identified 58 tissue-specific families and we found a significant enrichment of tissue-specific families in homogeneous families (45% of tissue-specific families versus 2.5% of other families, p-value = 1.691E-69) (Table 2).

Table 2. Enrichments in genes from homogeneously expressed families for the tested and reference gene groups

Reference group[a]	Tested group for homogeneous family expression[a]	Percentage of homogeneous family genes in the tested group (%)	Chi-squared test P-value[b]	Odds ratio[c]
Paralogous genes[d]	SSD genes	3.3	2.777E-04*	1.59
	ySSD genes	5.2	5.758E-10*	2.49
Paralogous genes[d]	Tissue-specific families[e]	45	1.691E-69*	42.94

[a] Abbreviations for gene duplication categories : WGD (Whole-Genome Duplication), SSD (Small-Scale Duplication) and ySSD (younger SSD occuring after WGD events).

[b] Application of Chi-squared tests (or of Fisher's exact test when the Chi-squared test could not be applied) with a corrected p-value threshold = 1E-02 (Bonferroni correction for 5 statistical tests).

[c] The odds ratio (>1 or <1) indicates the group (tested or non-tested respectively) in which there is an enrichment.

[d] The paralog reference group includes the genes belonging to WGD, SSD and WGD-SSD categories and the paralogs without annotation.

[e] Genes included into tissue-specific families. Only genes specific to the major tissue are considered.

Finally, we studied whether homogeneous families were associated with a type of duplication event or with a duplication age. We found that SSD genes and ySSD genes in particular were enriched in genes coming from homogeneous families (3.3% of SSD versus 2.1% of the other paralogs, p-value= 2.777E-04; 5.2% of ySSD versus 2.1% of the other paralogs, p-value = 5.758E-10) (Table 2). Similarly, SSD and

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ySSD genes were significantly enriched in genes coming from tissue-specific families (S17 Table). Lastly, we also investigated the shared tissue-specificity at the paralog pair level. We observed, among tissue-specific pairs, a high proportion of SSD (50%) and ySSD (59%) pairs specific to the same tissue than WGD pairs (31%), even though the very low number of these tissue-specific pairs did not allow us to get significant results (S2 Result).

It order to interpret these results, one may expect that co-expression between two duplicates in a paralog pair will be associated with their proximity on the genome, as epigenetic co-regulation of gene expression partly depends on the proximity between genes on the genome (38–40). We thus investigated whether the genomic distance between paralog pairs (S5 Result) could be used to differentiate homogeneous from heterogeneous families. For homogeneous families, we considered only pairs in which both paralogs belonged to the main co-expression module (37 pairs), and removed the other pairs from the test. We found that homogeneous families were depleted in inter-chromosomal pairs (70.3% of homogeneous families versus 90.2% of heterogeneous families were spread across different chromosomes, p-value= 7.73E-04) and were enriched in tandem duplicated pairs (27% of homogeneous families and 6.7% of heterogeneous families were separated by less than 1 Mb, p-value = 1.743E-04) (S20 Table); this supports the idea that paralog co-expression is favored by proximity along the genome. Moreover, we confirmed that the genomic proximity of duplicates was associated with recent SSDs and that the younger the SSD pair, the more the duplicate were found in tandem in the genome (S5 Result). The tandem duplication explains why SSDs, and especially ySSDs, tend to be more co-expressed and to share more often the same tissue-specificity within their family than other paralogs.

In summary, the gene co-expression network analysis performed on the CNS tissues allowed us to find that within gene families, the shared tissue-specificity of paralogs was associated with their co-expression across tissues and we classified gene families into two categories according to co-expression status. Homogeneous families were enriched in paralog pairs which were closely located on the genome in tandem duplication, probably due to the specific trend of SSD pairs to be duplicated in tandem. Indeed, these homogeneous families were enriched in SSDs, especially in ySSDs, and were

365   associated with a shared tissue-specificity.

5/ Exploration of brain disorder-associated genes

In addition to paralog implication in tissue-specific gene expression, another factor contributing to the importance of a gene is its potential association with disease. Indeed, disease-associated mutations preferentially accumulate in paralogous genes rather than singletons (28). In the case of duplication categories, it has been reported that the proportion of both Mendelian (monogenic) and complex (polygenic) disease genes are enriched in WGD genes in comparison to non-disease genes (29). We decided to refine theses analyses by considering only the genes that are associated with brain diseases. We therefore used the ClinVar database to collect a list of genes that harbored a Single Nucleotide Variant (SNV) or were located within a Copy Number Variant (CNV) and related to a brain disorder (41) (see Methods and S19 Table). We found that paralogs were enriched in brain disease genes (50.2% of paralogous genes, versus 46% of other genes, p-value = 3.740E-07) (S18 Table). We further focused on paralog categories and observed that, among paralogs, neither WGDs or SSDs were enriched in brain disease genes (p-value = 0.555) but we noticed that ySSDs genes tended to be very slightly enriched in brain disease genes (53.1% of ySSD genes, versus 49.8% of other paralogs, p-value = 3.535E-02). Given the known under-coverage of young duplicates in functional studies (42), a weakness in the annotation of these genes is thus expected in clinical databases like ClinVar, which complicates the identification of enrichments involving these populations of genes. Lastly, we found that brain disease genes tended to be slightly depleted in tissue-specific genes and were neither enriched in genes coming from homogeneous families (S18 Table). In summary, brain disease genes are enriched in paralogs but not in WGDs in particular and the paralogs associated with brain diseases do not seem to be the same ones that we found in the previous result sections associated with tissue-specificity and co-expressed gene families.

DISCUSSION

As far as we are aware, this study is the first to focus specifically on the spatial expression of paralogs

and gene families between the different human CNS territories based on post-mortem human tissues analyzed by the GTEx consortium. Previous studies based on gene expression analysis between organs have already established the important association between paralogs and tissue differentiation (10,43). We showed that paralog expression could separate CNS tissues better than singletons, despite their low expression compared to singletons. Therefore, the relationship between paralogs and tissue differentiation is also true for comparisons of the different anatomical regions of the CNS.

Paralogs are known to be more tissue-specific than other genes (10,44–46). Among paralogs, SSDs (15) and in particular ySSDs (43) seem to be more often tissue-specific than other paralogs when comparing tissues from different organs. However, when considering the brain as a whole and comparing it with other organs, it has been found that WGDs tend to be enriched in brain-specific genes compared to SSDs (15,16,46). In our study between the tissues that composed the human CNS, we observed that paralogs, especially ySSDs were more tissue-specific than other genes. In addition, we found that even wSSDs were enriched in tissue-specific genes compared to other paralogs of the same age (WGDs), thus suggesting that the tissue-specificity between brain regions is not only associated with the young age of duplication but also with the type of duplication (i.e. with SSD duplications). Our results, although apparently contradictory, do not question the known involvement of WGDs in brain-specific expression. Indeed, the fact that an SSD gene tends to be more often specific to only one or just a few CNS anatomical regions than a WGD gene, implies that the average expression of SSD genes over the whole brain would be lower than the average expression of WGDs. Thus, this broad expression of WGDs within brain regions facilitates the detection of their brain-specific expression when comparing several organs, while the analysis of gene expression between organs may not promote the detection of some ySSDs specific to human brain.

A previous study performed using gene expression profiles across mammalian organs established that most of tissue-specificity variance was explained by the expression level, in addition to the duplication status, with no significant contribution of the evolutionary time (46). Using multivariate linear models, we confirmed the major contribution of expression level and that of duplication status to tissue-specificity in CNS territories. The association with duplication status was more significant when we

considered the maximal expression, which gives a better interpretation of gene abundance when studying the tissue-specificity than the average expression. Moreover, among paralogs, we found that the SSD duplication type explained also part of the tissue-specificity variance. Regarding the evolutionary time, low phyletic ages were also significantly associated with high tissue-specificity; a property potentially restricted to CNS tissues. Despite this global effect of the duplication age, we observed that tissue-specific expression did not seem to be associated with very recent duplications, but rather with slightly older ySSDs.

We then studied the gene family level of organization using gene co-expression network analysis of paralogs across CNS tissues. We showed that modules of co-expressed genes were able to identify clusters of paralogs with the same tissue-specificity. The characterization of gene families according to the level of co-expression of their member genes has led to the identification of two categories of families: homogeneous families, which are composed of a majority of co-expressed genes, and heterogeneous families. We observed that homogeneous families were enriched in ySSD genes and tandem duplicate pairs, in agreement with a previous study showing that pairs of ySSD paralogous genes tend to be duplicated in tandem and co-expressed just after the duplication event (11). A previous study established that when the two paralogs of an ySSD pair are tissue-specific, they tend to be specific to the same tissue more often than for other paralog pairs (43). We observed that it was also true for the CNS territories by showing the high co-expression of ySSD pairs and the enrichment of co-expressed families in tissue-specific families, where the majority of genes were tissue-specific to the same tissue.

From the analysis of gene expression across human and mouse organs, Lan and Pritchard 2016 proposed a model for the retention of SSD duplicates appearing in mammals. In this model, pairs of young paralogs are often highly co-expressed probably because tandem duplicates are co-regulated by shared regulatory regions. In addition, this model is consistent with the dosage-sharing hypothesis in which down regulation of the duplicates, to match expression of the ancestral gene, is the first step enabling the initial survival of young duplicates (11). Our analyses of ySSDs expression features between CNS territories seem to be concordant with this model, indeed ySSDs tend to be organized

within small families of co-expressed genes and also weakly expressed in concordance with the sharing of the gene ancestral expression. Furthermore, our results in the CNS tissues seem to confirm that, after the initially high co-expression of SSD paralogs just after their duplication, they become more tissue-specific and less co-expressed in part through chromosomal rearrangement, suggesting a long term survival by sub-/neofunctionalization (11). In the case of ySSDs tissue-specific in the same tissue, one of these duplicates might not preserve its coding potential in the long term and would lead to a pseudogene. This does not systematically imply its inactivation, indeed some transcribed pseudogenes associated with low abundance and high tissue-specificity may carry a regulatory function on their parental genes (47,48).

With regard to the relationship between paralogs and human diseases, if we consider all the genes involved in Mendelian or complex genetic diseases, it is known that mutations accumulate preferentially in paralogs compared to singletons (28–30). Moreover, old paralogs (WGDs and oSSDs) tend to be more frequently associated with diseases (27,30,31,49) potentially linked to their essentiality (16,31,50). Finally, in the case of SSD paralogs, disease genes are known to be enriched in oSSDs and depleted in ySSDs when compared to non-disease genes (49). Our study confirmed that paralogs were enriched in brain disease-associated genes. However, using our list of brain disease genes, we observed no enrichment in WGD or SSD duplications types.

In conclusion, our intra-organ exploration of paralogs suggests the major implication of young SSDs in tissue-specific expression between the different human CNS territories. The profiling of the human cortex and cerebral organoids by single-cell RNA-seq having been recently published (51,52), the exploration of the cell population diversity of the different CNS tissues will soon be possible. This will offer us the capability to interrogate the specificity of expression of young duplicates across the different cell types making up these tissues. It will be also relevant to explore the expression patterns of these young SSDs between anatomic regions of other complex organs to determine whether or not they are solely associated with the nervous system.

METHODS

Human genes, duplication events and families

A list of 21,731 human genes, with both their HGNC gene symbol and their Ensembl IDs (GRCh37, release 59), was collected based on the work of Chen and co-workers (29). Among these genes, 14,084 paralogs made up of 3,692 gene families, identified by TreeFam methodology (53), were obtained from Chen and co-workers (29). These authors downloaded all gene families from the TreeFam v.8.0 database, which identifies duplicates based on gene family evolution. Moreover, for each paralog, they represented the phyletic age of its last duplication event by the total branch length from the node indicating where the duplication event had happened on the species tree to the human leaf node, and they assigned the associated duplicate (29,54). A second list of 20,415 genes was extracted from Singh *et al.* 2014. This gene ID list was converted to HGNC gene symbols and intersected with the first list in order to annotate it (17,805 protein-coding genes in common). Thus, in the present study, we collected the duplication category for each paralog (30). Singh et al. obtained WGD annotations from (55) and obtained their SSD annotations by running an all-against-all BLASTp using human proteins (56). Singh and co-workers defined genes as singletons if they were not classified as WGDs or SSDs and they obtained the duplication age for SSD genes from the Ensembl compara (57). They classified paralogs into the following categories: WGD, SSD, ySSD (i.e. SSD with duplication date younger than WGD), oSSD (i.e. SSD with duplication date older than WGD) and wSSD (i.e. SSD with duplication date around the WGD events). There were 5,390 annotated paralogs originating from the WGD and 4,889 from SSD (2,104 from ySSD, 1,354 from oSSD and 1,431 from wSSD). Moreover, there were 2,607 paralogs without annotations and 1,198 paralogs annotated as both WGD and SSD (WGD-SSD). The WGD-SSD paralogs were not included into the WGD or the SSD duplication categories. However, the unannotated and WGD-SSD paralogs were both considered into the paralog group. We verified that these paralog duplication categories were consistent with the phyletic ages (duplication dates) collected from Chen and co-workers (29,54) (S3 Fig). The list of our paralogous gene pairs and gene families is given in the S1 Table. The evolutionary annotation of paralogous genes is indicated in the S2 Table. The list of singleton genes is given in the S12 Table. Furthermore for the analysis of the duplicate pairs, we considered only the 3,050 pairs which appeared twice in our paralog list (i.e. where the first paralog is associated with the second paralog and vice versa and where the duplication category annotation is the

same for both paralogs); genomic distances between duplicate pairs were obtained from Ensembl (GRCh37/90).

Gene expression profiles in CNS tissues

We obtained gene counts and RPKM (Reads Per Kilobase Million) values for 63 to 125 individuals (1259 post-mortem samples – RNA integrity > 6) distributed over 13 CNS tissues (cerebellum, cerebellar hemisphere, cortex, frontal cortex, anterior cingulate cortex, hypothalamus, hippocampus, spinal cord, amygdala, putamen, caudate, nucleus accumbens and substantia nigra) from the GTEx consortium data release 6 (GRCh37) (25). The CNS tissue associated with each GTEx patient sample used in our study is indicated in the S11 Table. These gene expression data, calculated by GTEx took into account only uniquely mapped reads (https://gtexportal.org). After filtering out low-information content genes (genes with a null variance across samples and weakly expressed genes, with mean expression per tissue lower than 0.1 RPKM for all tissues), we kept for analyses a total 16,427 genes distributed across 10,335 paralogs (5,114 WGD, 3,719 SSD, 1,192 ySSD, 1,260 wSSD and 1,267 oSSD, 966 WGD-SSD and 536 without annotations) grouped in 3,487 families and 6,092 singletons. It should be noted that all analyses of the articles were performed on this list of expressed genes only, except for the analysis on brain disease genes. Gene RPKM values were log-transformed (log2 (RPKM + 1)) and adjusted by linear regression for batch effects and various biological effects (sequencing platform, age, gender and the first 3 principal components of genetic data illustrating the population structure given by the GTEx Consortium; the intercept of the regression was not removed from the residuals in order to keep the mean differences between genes (https://www.cnrgh.fr/genodata/BRAIN_paralog)). These filtered, log-transformed and adjusted RPKM values were used as input for unsupervised classification of brain tissues, as well as for gene co-expression network inference and for tissue-specificity analysis. Moreover, gene expression data for tissues considered to anatomically overlap were merged by calculating the average expression value across related tissues prior to the tissue-specificity analysis. Therefore, from an initial list of 13 tissues, we defined a shorter list of 7 CNS regions: cerebellum (cerebellum and cerebellar hemisphere), cortex (cortex, frontal cortex and anterior cingulate cortex),

basal ganglia (putamen, nucleus accumbens and caudate), amygdala-hippocampus, hypothalamus,

spinal cord and substantia nigra.

Unsupervised clustering of gene expression profiles

Gene expression profiles (filtered and adjusted RPKM values) generated by the GTEx Consortium for

the 1,259 samples distributed across the 13 CNS tissues, were clustered by unsupervised hierarchical

clustering using the pheatmap package of R version 3.4 (similarity measure: Pearson correlation,

clustering method: average linkage). We estimated the relevance of the clustering according to the

expected groups of CNS tissues. We evaluated, independently, the clusterings generated from protein-

coding genes, paralogs and singletons, using adjusted rand index (32) after cutting trees (so that we

obtained 30 clusters for each gene category).

Differential gene expression analysis

Genes with low-information content were removed before differential gene expression (DGE) analysis.

DGE analysis was performed by DESeq2 (58) on count data for each pair of CNS tissues, with the

"median ratio" between-sample normalization and using batch and biological effects as covariates. For

each tissue pair, we then corrected gene p-values for the number of tested genes using FDR (59) and

obtained a list of significantly differentially expressed genes (DEGs) (FDR<0.05). Finally, we considered

only the DEGs with a log2 fold-change greater than 0.5.

Inference of gene co-expression networks

The gene network inference was carried out using the Weighted Gene Correlation Network Analysis

(WGCNA) methodology (35), which generates co-expression networks and identifies modules (groups)

of co-expressed genes. We applied the WGCNA tool only to paralogous gene expression data (RPKM)

across the GTEx samples of the 13 CNS tissues. Genes were grouped into modules according to their

expression profile similarity. The module named "grey", which grouped genes that were not considered

as co-expressed by WGCNA, was composed of genes with very low variability across all samples. Since

we had removed the genes with no variance across tissue samples and those which were weakly

expressed before performing the WGCNA analysis, the grey module was small in size (104 genes).

Furthermore, if this filtering had not been performed, some of the genes with an overall weak

expression might have been integrated into co-expression modules, thus creating a bias. One of our

goals was to compare gene families to co-expression modules. Given that 47% of gene families have a

size equal to 2, we optimized WGCNA parameters to obtain small highly co-expressed modules (S3

Result).

Homogeneous and heterogeneous families

Definition. A gene family was defined as homogeneous if the majority, more than 60%, of its member

genes were included in the same co-expression module. It should be noted that the total size of gene

families was used to compute this percentage, even if some member genes were not in the list of

expressed paralogs. Gene families which did not respect this homogeneity rule, i.e. those with member

genes scattered over different co-expression modules, were defined as heterogeneous.

Assessment of the significance of the number of homogeneous families. Starting from the paralog modules

obtained with WGCNA, we used a permutation procedure (by permuting 1,000 times the module labels

of paralogs and counting the number of falsely homogeneous families for each permutation) and were

able to conclude that the number of homogeneous families was significantly large, since for each

permutation the number of falsely homogeneous families was lower than the number that we obtained,

leading to an empirical p-value inferior to 10^{-3}.

Tissue-specificity calculation

Tau score calculation. To select tissue-specific genes, we used the τ score (33) to estimate the degree of

tissue-specificity of each gene in our set of CNS tissues:

(1) $$\tau = \frac{\sum_{i=1}^{n}\left(1-\widehat{X}_i\right)}{n-1} \; ; \; \widehat{X}_i = \frac{x_i}{\max\limits_{1 \leq i \leq n}\left(x_i\right)}$$

In this equation, x_i is the mean expression of a given gene in tissue i and n is the number of different

tissues. τ varies from 0 to 1 where 0 indicates that the gene is broadly expressed and 1 that the gene is

tissue-specific. For τ computation, genes must have a positive mean of expression in every CNS region.

Although we log-normalized expression data with log2(RPKM+1) leading to positive expression values,

the correction for batch and some biological effects induced some negative values in gene mean

expression. We replaced the negative values by zeros to keep all protein coding genes (16,427 genes)

for the τ score computation. We pooled expression data generated by GTEx for the 13 tissues into 7

CNS regions so that the τ score would not decrease artificially for genes specific to several close tissues.

Tau score threshold defined by permutations. The τ score was computed for each gene and for the 7 CNS

regions. We then plotted the τ score distribution obtained from all protein coding genes (Fig 2A).

However, there is no general τ score threshold at which a gene is considered to be tissue-specific. To

define a tissue-specificity threshold, we implemented a statistical method based on permutations. We

applied 1000 permutations on the region labels assigned to the samples to shuffle the correspondence

between samples and regions. For each permutation, τ scores were recomputed for each gene. The

distribution of the 1000 X 16427 τ scores obtained from the permutations is given in the Fig 2. For

each gene and its original τ score, a p-value was then calculated as the proportion of permutation-

based τ scores higher than the original τ score. The Benjamini-Hochberg correction for the number of

genes tested was applied to all p-values. Genes with a corrected p-value lower than 0.01 were declared

tissue-specific, which corresponded to a τ score threshold of 0.525 (Fig 2A). Visualization of gene

profiles across brain regions at different windows of the τ score showed tissue-specificity beyond the τ

score threshold of 0.525 (S1 Fig). However even for τ scores in the range [0.5-0.75] some genes were

still expressed in two regions. Therefore for each tissue-specific gene, we considered that the CNS

region with the highest expression value to be the specific region.

Brain disease genes

The ClinVar database was used to collect genes linked to brain diseases (41). We considered brain

disease-associated genes containing a pathogenic alteration (SNV) or located within a CNV

(duplication, amplification or deletion). We selected genes associated by ClinVar to the following

"Disease/Phenotypes" : "Parkinson", "Alzheimer", "brain", "Autism", "Epilepsy", "Aicardi", "Angelman", "Aphasia", "Apraxia", "Asperger", "Behcet", "spinal", "Canavan", "Charcot", "Chorea", "Dementia", "Dyslexia", "Fabry", "Gaucher", "Gerstmann", "Huntington", "Refsum", "Joubert", "Kennedy", "Klippel", "Krabbe", "learning", "mental", "Leigh", "Leukodystrophy", "migraine", "Niemann", "Rett", "Sandhoff", "syncope", "Tay-sachs", "Tourette", "nervous", "Schizophrenia", "Narcolepsy", "neuro", "cephal", "cortico", "crani", "mening", "psych". We then removed genes associated with tumors or cancers. We obtained a total of 10,375 genes linked to brain diseases including 7,989 genes expressed in CNS tissues. Among them, 5,184 were expressed paralogous genes.

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DISCLOSURE DECLARATION

The authors declare that they have no competing interests.

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