



CHALLENGE  
*accepted!*

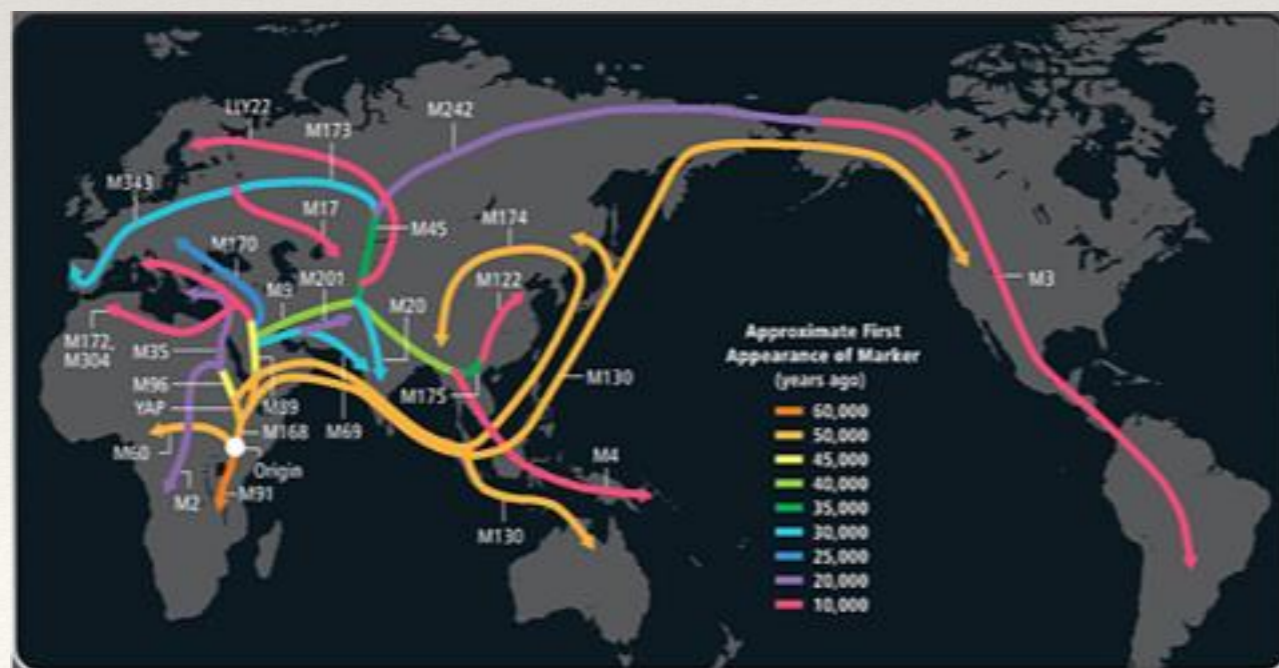
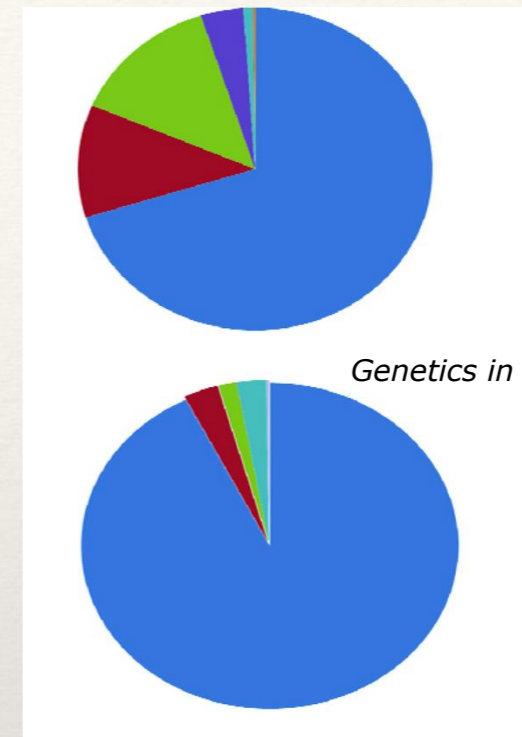
-- BARNEY STINSON

# African American Pharmacogenomics: Challenge Accepted

Minoli Perera PharmD, PhD

# Minorities in Pharmacogenomics

- ❖ More studies in European descent populations
- ❖ Most of the clinical studies in African Americans involve SNPs found in other populations
- ❖ Correct for race
- ❖ What are we missing
  - ❖ Variation unique to African Americans
  - ❖ Effect of genetic architecture on association.



- ❖ African are the oldest population – more genetic variation
- ❖ African Americans are admixed (a mix between Europeans and Africans)
- ❖ Disparities in disease (breast cancer)
- ❖ Difference in drug metabolism (CYP3A5)

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# Warfarin Pharmacogenomics

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- ◆ Previous genomic and GWAS studies were done almost exclusively in Whites and Asians.
  - ◆ Major genes: CYP2C9, VKORC1, CYP4F2
- ◆ African Americans
  - ◆ Warfarin dose variability less well explained by VKORC1 and CYP2C9.
  - ◆ Suggested other genes/SNPs may be important.
- ◆ Genetic determinants of high dose requirement.
  - ◆ Current genetic predictors help explain low dose requirements.
  - ◆ African Americans require higher doses than other populations.



# The NEW ENGLAND JOURNAL of MEDICINE

## ORIGINAL ARTICLE

### A Pharmacogenetic versus a Clinical Algorithm for Warfarin Dosing

Stephen E. Kimmel, M.D., Benjamin French, Ph.D., Scott E. Kasner, M.D., Julie A. Johnson, Pharm.D., Jeffrey L. Anderson, M.D., Brian F. Gage, M.D., Yves D. Rosenberg, M.D., Charles S. Eby, M.D., Rosemary A. Madigan, R.N., M.P.H., Robert B. McBane, M.D., Sherif Z. Abdel-Rahman, Ph.D., Scott M. Stevens, M.D., Steven Yale, M.D., Emile R. Mohler, III, M.D., Margaret C. Fang, M.D., Vinay Shah, M.D., Richard B. Horenstein, M.D., Nita A. Limdi, Pharm.D., Ph.D., James A.S. Muldowney, III, M.D., Jaspal Gujral, M.B., B.S., Patrice Delafontaine, M.D., Robert J. Desnick, M.D., Ph.D., Thomas L. Ortel, M.D., Ph.D., Henny H. Billett, M.D., Robert C. Pendleton, M.D., Nancy L. Geller, Ph.D., Jonathan L. Halperin, M.D., Samuel Z. Goldhaber, M.D., Michael D. Caldwell, M.D., Ph.D., Robert M. Califf, M.D., and Jonas H. Ellenberg, Ph.D., for the COAG Investigators\*

N Engl J Med 2013; 369:2283-2293 | [December 12, 2013](#) | DOI: 10.1056/NEJMoa1310669

COAG trial

## ORIGINAL ARTICLE

### A Randomized Trial of Genotype-Guided Dosing of Warfarin

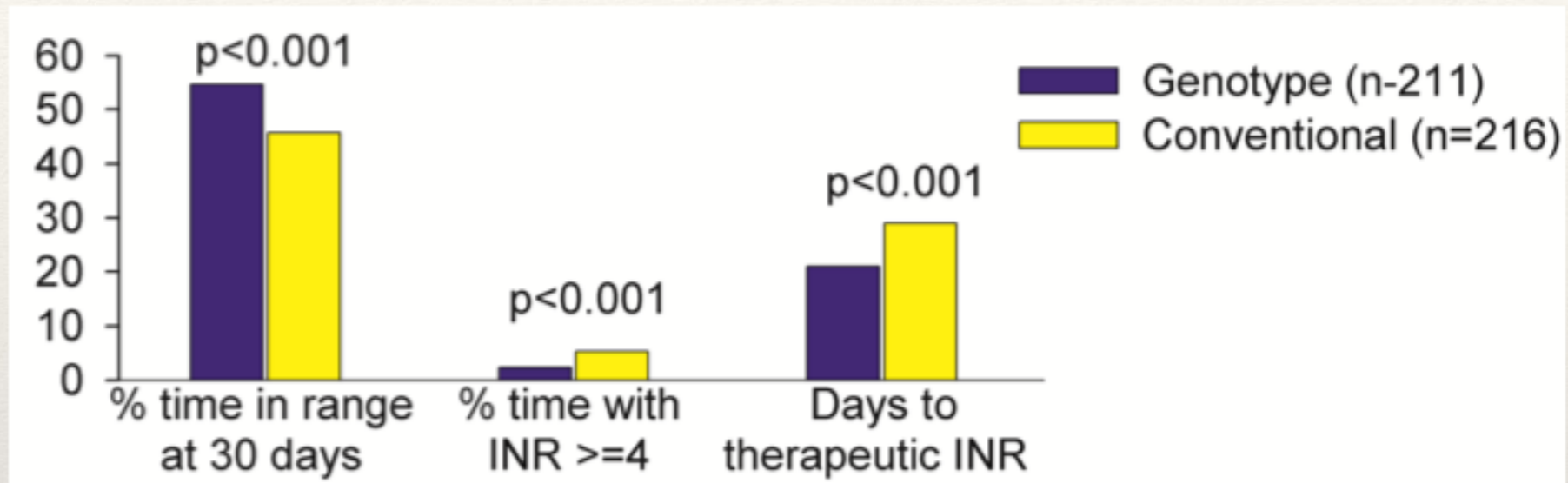
Munir Pirmohamed, Ph.D., F.R.C.P., Girvan Burnside, Ph.D., Niclas Eriksson, Ph.D., Andrea L. Jorgensen, Ph.D., Cheng Hock Toh, M.D., Toby Nicholson, F.R.C.Path., Patrick Kesteven, M.D., Christina Christersson, M.D., Ph.D., Bengt Wahlström, M.D., Christina Stafberg, M.D., J. Eunice Zhang, Ph.D., Julian B. Leathart, M.Phil., Hugo Kohnke, M.Sc., Anke H. Maitland-van der Zee, Pharm.D., Ph.D., Paula R. Williamson, Ph.D., Ann K. Daly, Ph.D., Peter Avery, Ph.D., Farhad Kamali, Ph.D., and Mia Wadelius, M.D., Ph.D., for the EU-PACT Group\*

N Engl J Med 2013; 369:2294-2303 | [December 12, 2013](#) | DOI: 10.1056/NEJMoa1311386

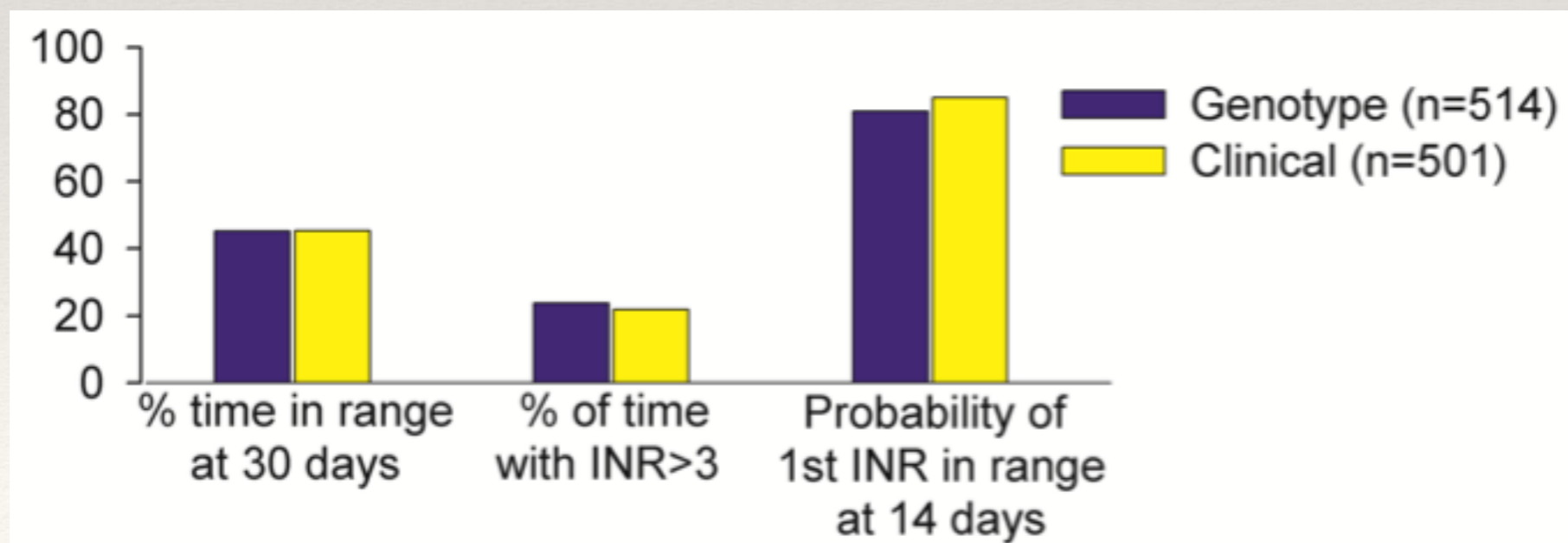
EU-PACT trial

# Results

## EU-PACT - European population

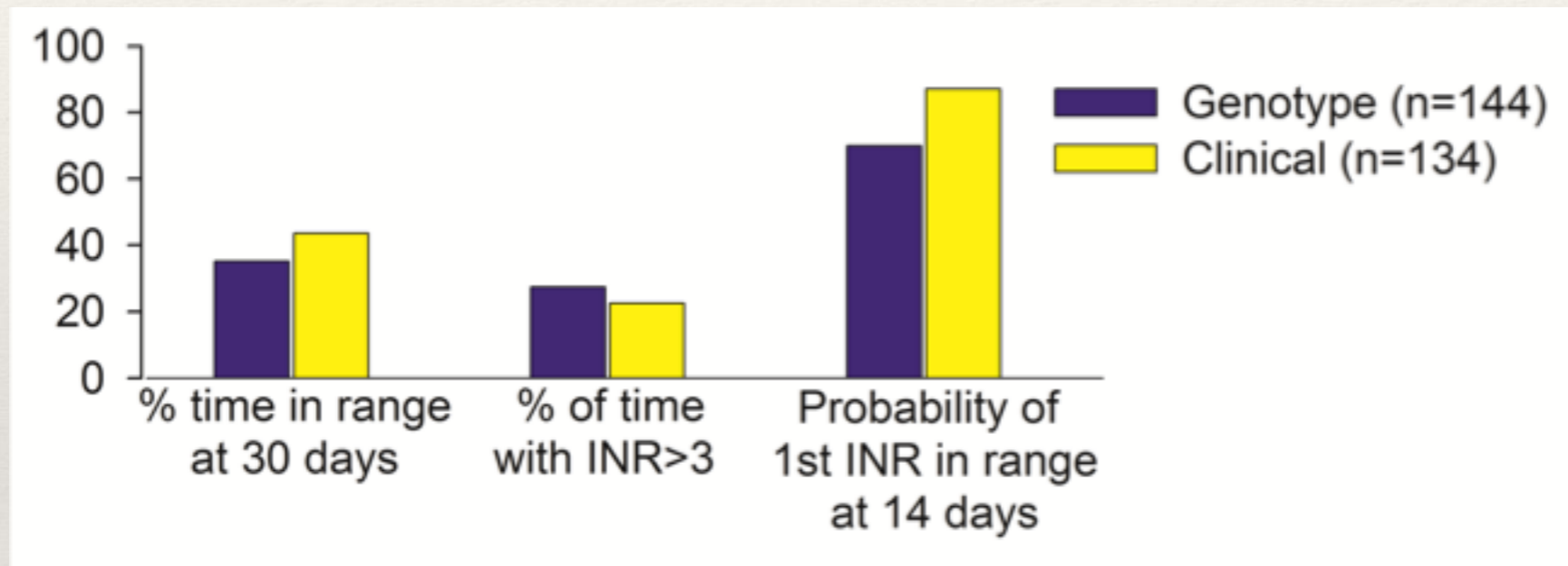


## COAG - Ethnically diverse population



# African Americans

COAG - African American subgroup



# African American GWAS

Genotyped the top 15 independent signals (found after conditioning) in replication cohort.

Only SNP to replicate is rs12777823 ( $p = 5.04E-05$ )

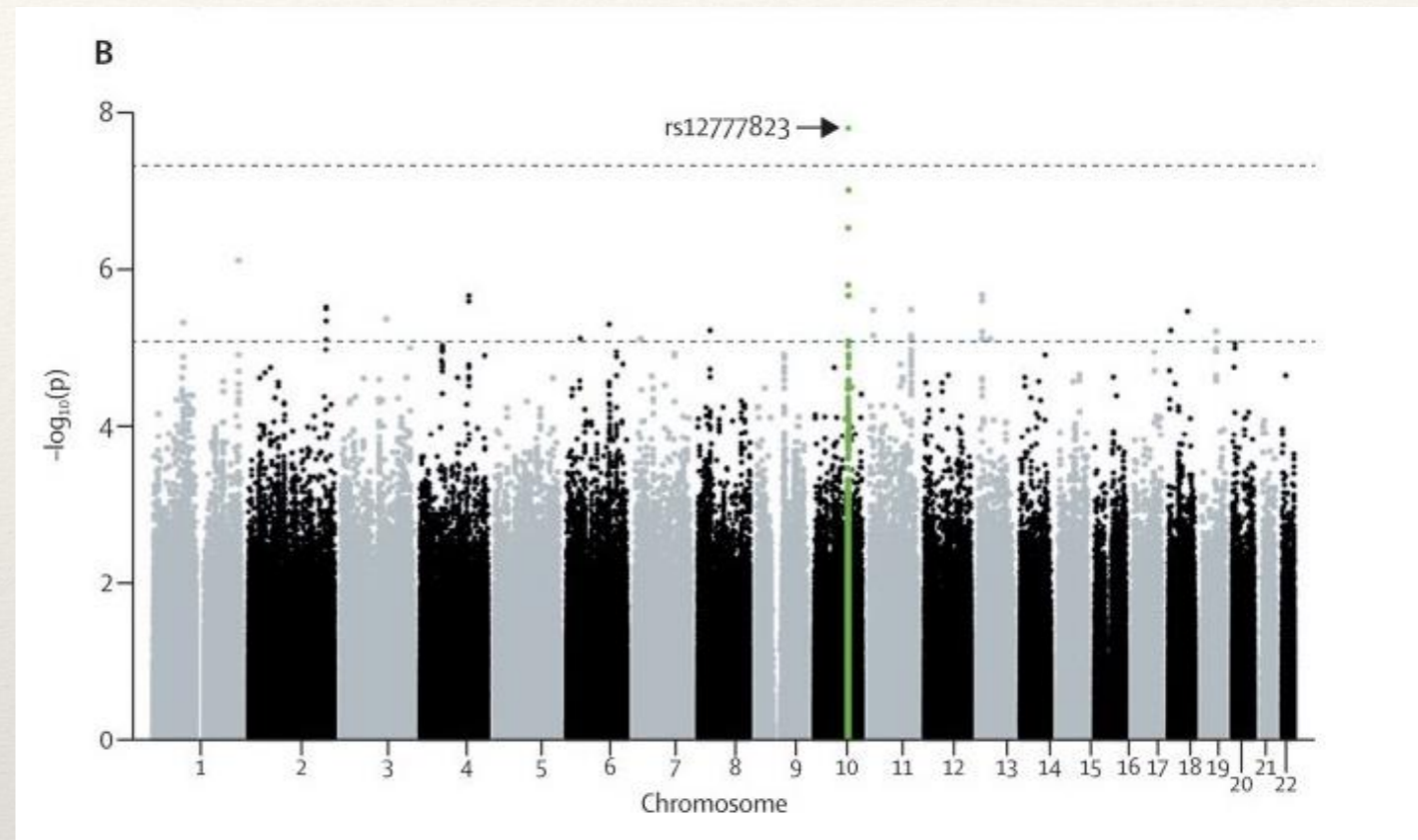
MAF = 25% - 47% carry one allele

Previously been found to be associated with Clopidogrel response in Amish

$R^2 = 0.87$  in Amish with CYP2C19\*2 (rs4244285)

JAMA. 2009 Aug 26;302(8):849-57.

$R^2 = 0.5$  in AA with CYP2C19\*2 ( $p = 0.001$  in GWAs meta-analysis)



Unable to pin point the function of this SNP using gene expression data.

Variant	Coefficient	p-value	Adjusted R-squared
IWPC Dosing Equation Predicted Dose	1	<2e-16	0.2193
rs12777823 AG	-6.9175	6.76E-06	—
rs12777823 AA	-9.3388	0.000502	—
IWPC Dosing Equation + rs1277823			0.2666

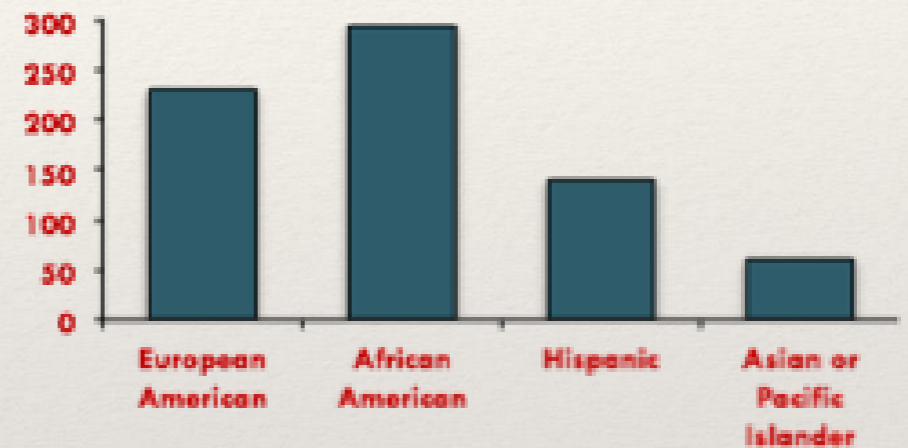




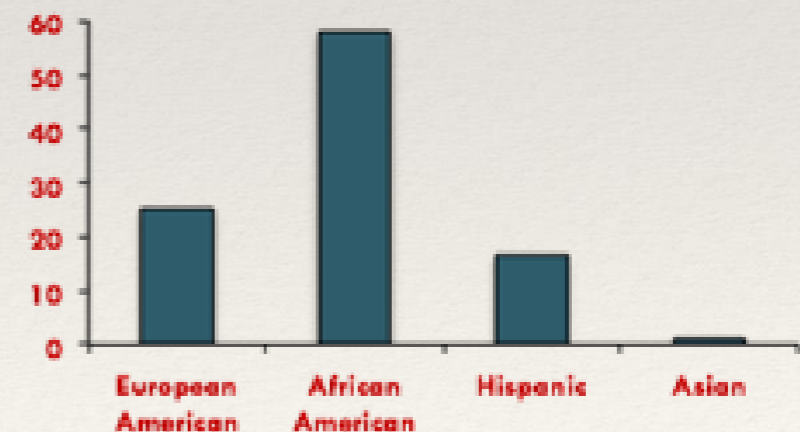
# African Americans and VTE

- ❖ African Americans are disproportionately affected by this disease.
- ❖ Secondary phenotypes from the Warfarin study
  - ❖ added additional healthy African Americans.
- ❖ Our cases were younger and there was significantly association with African ancestry

Incidence of Idiopathic DVT in the US per 1000,000

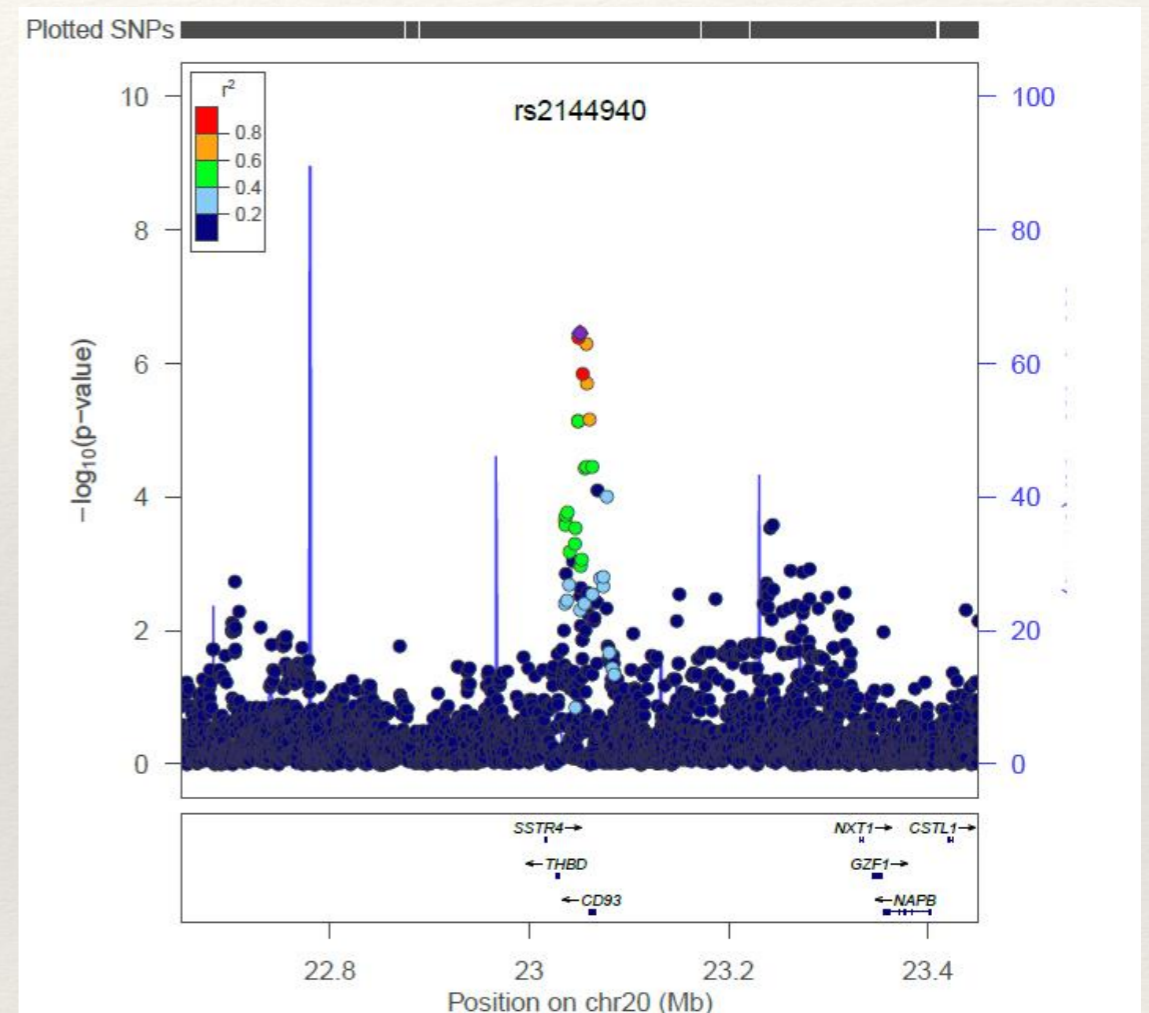


Percentage of Fatal PE



# GWAS Results

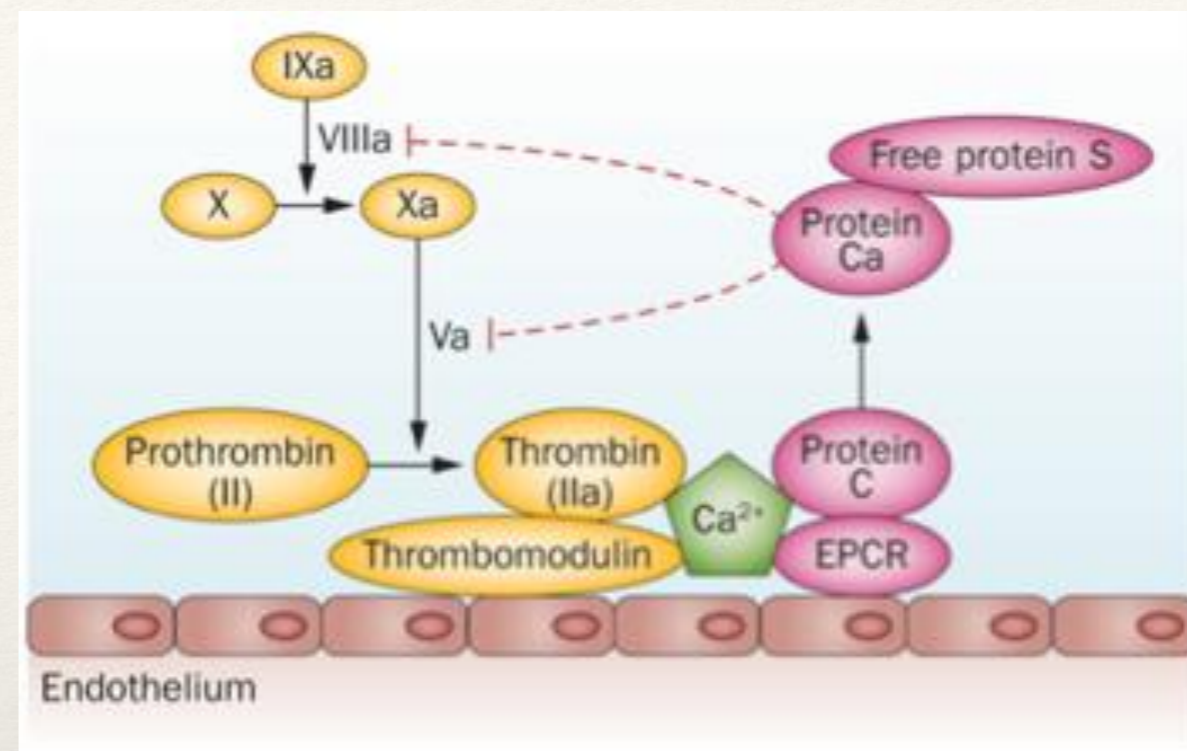
Chr.	SNP	MAF	OR	p-value
7	rs7369231 0	0.08	3.04	$1.73 \times 10^{-9}$
18	rs2849699 6	0.11	2.48	$1.73 \times 10^{-8}$
18	rs5895291 8	0.10	2.44	$1.07 \times 10^{-8}$
20	rs2144940	0.21	2.18	$3.52 \times 10^{-7}$
20	rs2567617	0.21	2.17	$4.01 \times 10^{-7}$
4	rs6232230 7	0.08	2.79	$2.25 \times 10^{-7}$
20	rs1998081	0.17	2.28	$5.17 \times 10^{-7}$



Hernandez et.al. *Blood*, in press

## GWAS Results

# Novel biomarker:



**Table 4. Comparison of previously identified VTE risk alleles between the Discovery Cohort and Caucasians**

Chr	SNP	Allele	Discovery Cohort			Previous Studies			
			AF	OR (95% CI)	P	AF	OR	P	Reference
1	rs6025 ( <i>F5</i> )	T	0.0	NA	NA	0.06*	2.56*	1.40 x 10 <sup>-12</sup>	(11)
11	rs1799963 ( <i>F2</i> )	A	0.0	NA	NA	0.02*	1.69*	3.00 x 10 <sup>-2</sup>	(11)
9	rs687621 ( <i>ABO</i> )	G	0.43	1.55 (1.2-2.0)	0.002	0.43 <sup>‡</sup>	1.84 <sup>‡</sup>	6.69 x 10 <sup>-22</sup>	(10)
9	rs505922 ( <i>ABO</i> )	C	0.36	1.52 (1.2-2.0)	0.002	0.43 <sup>‡</sup>	1.85 <sup>‡</sup>	1.84 x 10 <sup>-22</sup>	(10)
9	rs657152 ( <i>ABO</i> )	A	0.44	1.39 (1.1-1.8)	0.03	0.45 <sup>‡</sup>	1.7 <sup>‡</sup>	2.00 x 10 <sup>-17</sup>	(10)
10	rs78707713 ( <i>TSPAN15</i> )	T	0.97 <sup>†</sup>	NA	NA	0.88*	1.28*	5.74 x 10 <sup>-11</sup>	(28)
19	rs2288904 ( <i>SLC44A2</i> )	G	0.93	0.90 (0.5-1.5)	0.75	0.79*	1.19*	1.07 x 10 <sup>-9</sup>	(28)

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# Our newest study – bleeding risk

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- ❖ African American suffer from a higher rate of warfarin related bleeding than other populations.
- ❖ Many bleed at therapeutic INRs
  - ❖ A majority were  $INR < 4$
- ❖ Genetic predictors of adverse event
  - ❖ Improve anticoagulant selection

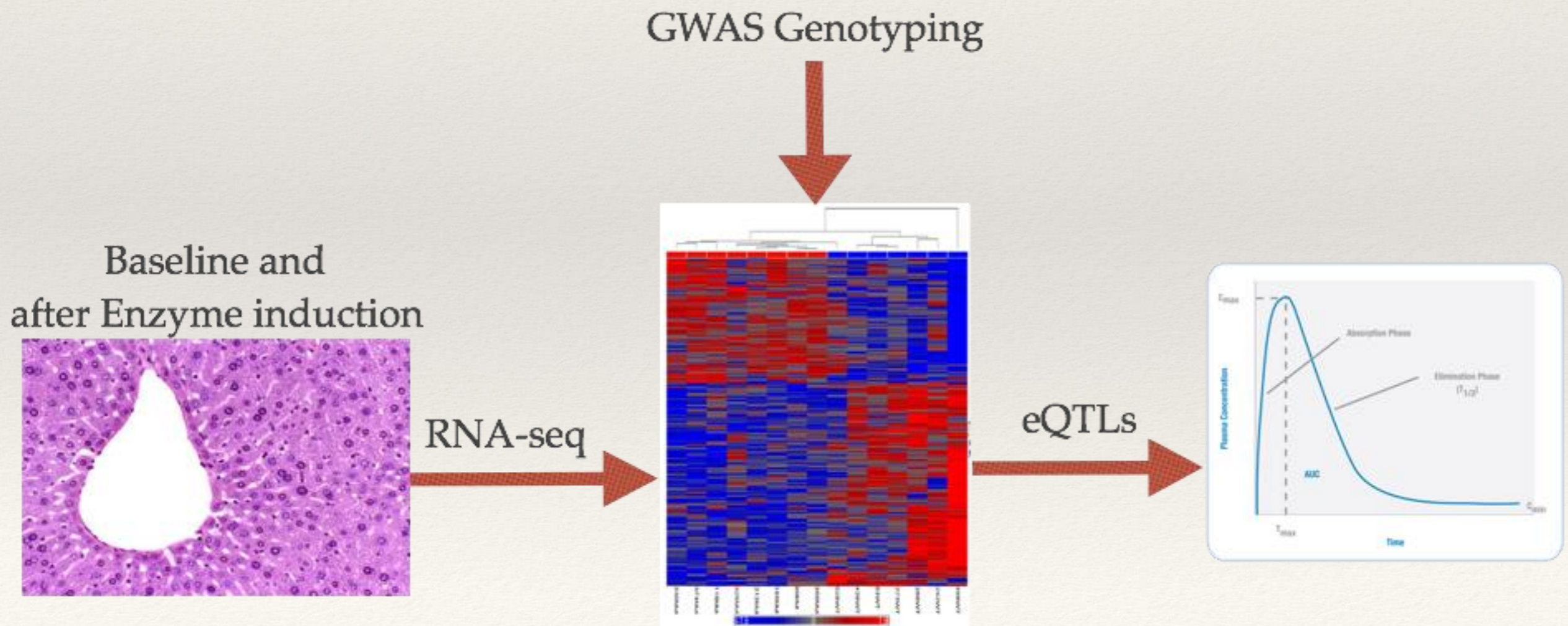


Poster PT-03, for our newest work by Dr. De

# Understanding Gene Regulations Drug Metabolizing Enzymes

## ❖ New directions

- Several phenotypes and several transcriptomes
- First in-depth evaluation African American drug metabolism



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# To those that make it possible

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- ❖ Perera Lab
- ❖ Mentors
  - ❖ Nancy Cox
  - ❖ Mark Ratain
  - ❖ Julie Johnson
  - ❖ Russ Altman
- ❖ Collaborators (too many to list)
- ❖ Funding
  - ❖ NIH
  - ❖ AHA
  - ❖ PGRN, RIKEN
- ❖ Patients



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# To my Support System.

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# QUESTIONS?

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