

Differential DNA methylation between HEU and HUU infants from South Africa

Presented by Hannah-Ruth Engelbrecht | CAHR 2021

Engelbrecht, HR.^{1,3,4}, Merrill, S.^{2,3,4}, Huels, A.⁵, Gladish, N.^{2,3,4}, Maclsaac, JL.^{2,3,4}, Lin DTS.^{2,3,4}, Ramadori, KE.^{2,3,4}, Zar, HJ.^{6,7}, Stein, DJ.^{8,9,10}, and Kobor, MS.^{2,3,4}

¹Genome Science and Technology, University of British Columbia, Vancouver, British Columbia, Canada; ²Department of Medical Genetics, University of British Columbia, Vancouver, BC, Canada; ³BC Children's Hospital Research Institute, Vancouver, BC, Canada; ⁴Centre for Molecular Medicine and Therapeutics, Vancouver, BC, Canada; ⁵Department of Epidemiology and Gangarosa Department of Environmental Health, Rollins School of Public Health, Emory University, Atlanta, Georgia, USA; ⁶Department of Paediatrics and Child Health, Red Cross War Memorial Children's Hospital, University of Cape Town, SA; ⁷South African Medical Research Council (SAMRC) Unit on Child and Adolescent Health, University of Cape Town, Cape Town, SA; ⁸Neuroscience Institute, University of Cape Town, Cape Town, SA; ⁹Department of Psychiatry and Mental Health, University of Cape Town, Cape Town, SA; ¹⁰South African Medical Research Council (SAMRC) Unit on Risk and Resilience in Mental Disorders, University of Cape Town, Cape Town, SA

SOUTH AFRICA, HIV, AND THE BURGEONING HEU POPULATION

- › Prevention of mother to child transmission has been successful, but growing evidence suggests **HIV-exposed uninfected (HEU)** infants are not completely free of adverse health effects when compared to **HIV-unexposed uninfected (HUU)** infants
 - › Immune response to vaccines altered
 - › Growth delay
 - › Neurodevelopmental delay
- › ~22% of South African infants are born HEU
 - › ~25% HIV prevalence amongst women between 15 and 49 years
- › HEU populations are growing worldwide
- › DNA methylation (DNAm) is an epigenetic modification which can change in response to environmental stimuli
 - › It represents a useful marker for identifying the effects of maternal environment on the developing foetus

Study Participants & Biological Sampling

- › Drakenstein Child Health Study
- › Mothers recruited, infants enrolled at birth
 - › All women diagnosed as HIV-positive prior to or during pregnancy were on antiretroviral therapy
- › Umbilical cord blood collected at birth
 - › DNA methylation alterations from foetal tissue (umbilical cord blood) may represent infant **responses to the altered maternal environment**
 - › Methylation and genotyping data collected
 - › Infinium Human Methylation EPIC BeadChip
 - › Infinium Human Methylation 450K BeadChip
 - › Infinium PsychArray BeadChip
 - › Infinium Global Screening Array BeadChip

DNA Methylation Analysis

- › Pre-processing to remove “bad” probes, “bad” samples
 - › Probe detection p-value $> 1 \times 10^{-16}$; cross-hybridising probes; mismatching predicted and reported sex
- › Cell type prediction, epigenetic gestational age prediction
 - › Epigenetic gestational age acceleration
- › All models included sex, principal components of cell type, and principal components of genetic ancestry to account for factors known to affect DNA methylation
- › ANCOVA models used to assess:
 - › DNA methylation differences between HEU and HUU infants
 - › DNA methylation differences between HEU infants exposed to different ARV regimen types

DNA METHYLATION IS ALTERED AT 14 DISTINCT LOCI BETWEEN HEU AND HUU INFANTS

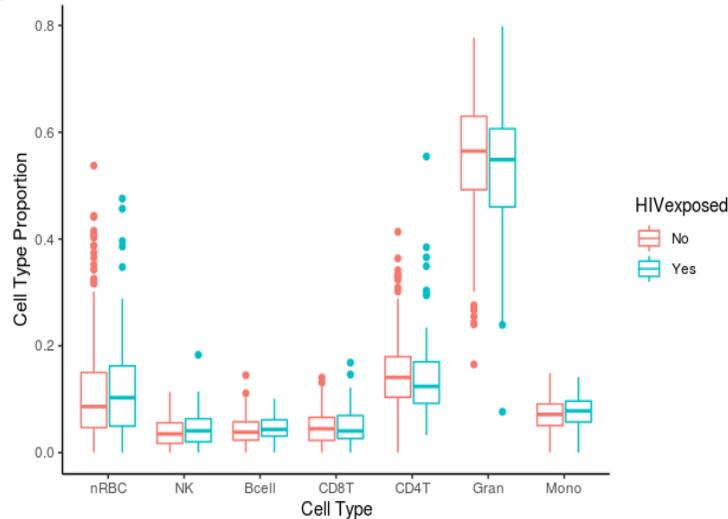


Figure A: No difference in predicted cell type proportion between HEU and HUU infants

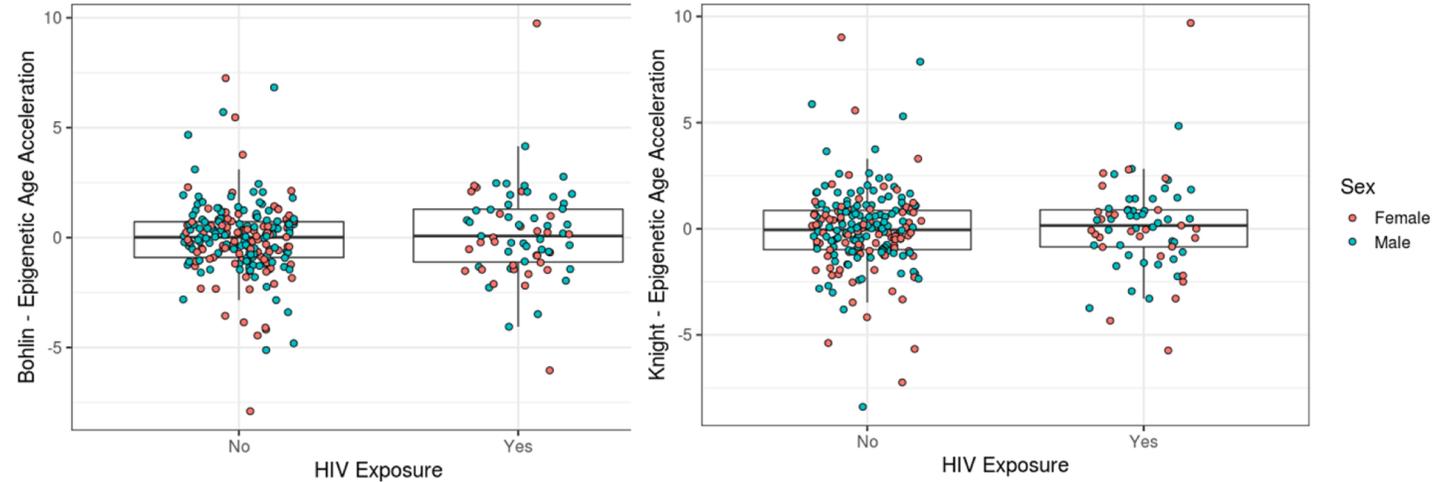


Figure B: Epigenetic gestational age predictions do not differ between HEU and HUU infants according to both the Knight and Bohlin predictors ^{7,8}

Table 1: Infant demographics do not indicate any significant differences between HEU and HUU infants at birth

	HEU	HUU
N	66	202
Female (%)	29 (44%)	90 (44%)
Birth weight (kilograms)	3.13	3.08
Gestational age (weeks)	38.76	38.82
Ethnicity	59 Black 7 Mixed Race	90 Black 112 Mixed Race
Any maternal tobacco use during pregnancy	10 (15%)	66 (33%)

Table 2: Chromosomal context of EWAS CpG loci (delta beta > 5%, false discovery rate < 5%)

CpG	Chr	Gene	Genomic Context	Epigenomic Context	Delta Beta	p-value	FDR
cg04750100	2	<i>LCT</i>	TSS1500		0.054	8.8E-06	0.019
cg19075225	2	<i>SNED1</i>	Body		0.061	1.8E-05	0.023
cg10288030	3	<i>UTS2D</i>	3'UTR		0.056	1.0E-04	0.049
cg21811021	4			Island	0.053	1.0E-04	0.048
cg22123784	8				0.057	9.2E-07	0.006
cg18419977	11	<i>SLC22A18</i>	TSS1500	North Shelf	0.052	4.4E-05	0.035
cg21970626	13			Island	0.068	1.9E-05	0.024
cg04193835	16			Island	0.054	1.4E-07	0.003
cg03238702	17				0.085	1.5E-08	0.001
cg08587775	19			Island	0.064	6.9E-05	0.041
cg17434634	19			Island	0.051	2.5E-05	0.027
cg17759252	19	<i>CRTC1</i>	Body	Island	0.065	8.1E-05	0.044
cg14586373	22	<i>KCTD17</i>	TSS1500	North Shore	0.057	9.6E-05	0.048
cg21401457	22			Island	0.051	5.5E-06	0.015
cg11747499*	12	<i>SSH1</i>	TSS1500	South Shore	0.009 (type 2 v type 1 regimens)	6.1E-07	0.036

Type 1: NRTI + NRTI + NNRTI (n = 51)
Type 2: NRTI (n = 12)
Type 3: NRTI + NRTI + PI (n = 3)

*indicates the sole EWAS hit from investigating DNAm differences between HEU infants exposed to different types of ARV regimen

- › At birth, cell type proportions and epigenetic gestational age do not differ between HEU and HUU groups (Table 1, Figure A, Figure B)
 - › There is no obvious immunological challenge at birth, nor are there differences in clinical gestational age in this cohort
- › **HIV exposure *in utero*** (and concurrent ARV exposure) **is associated with 14 differentially methylated CpG loci** (Table 2)
 - › These loci do not overlap with those identified in HEU infants from the east coast of South Africa
 - › The loci are situated in genes which may have roles in metabolism
 - › The implications of ARV exposure should be monitored more closely as HEU children age
- › One CpG locus, distinct from those related to HIV exposure, is differentially methylated when comparing 2x NRTI + NNRTI and NRTI-based antiretroviral therapy exposure