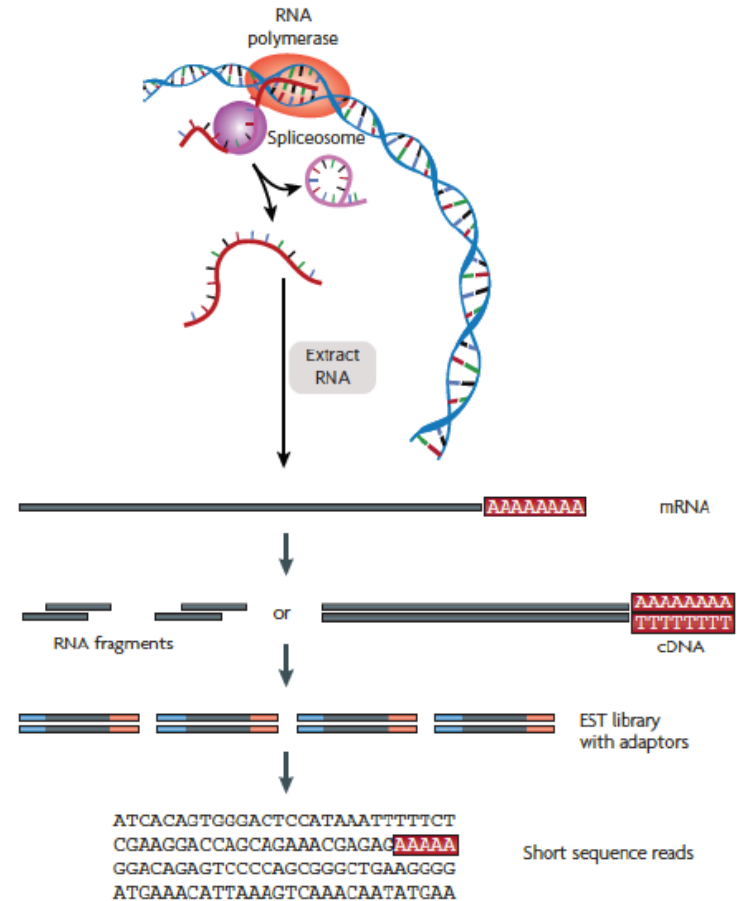
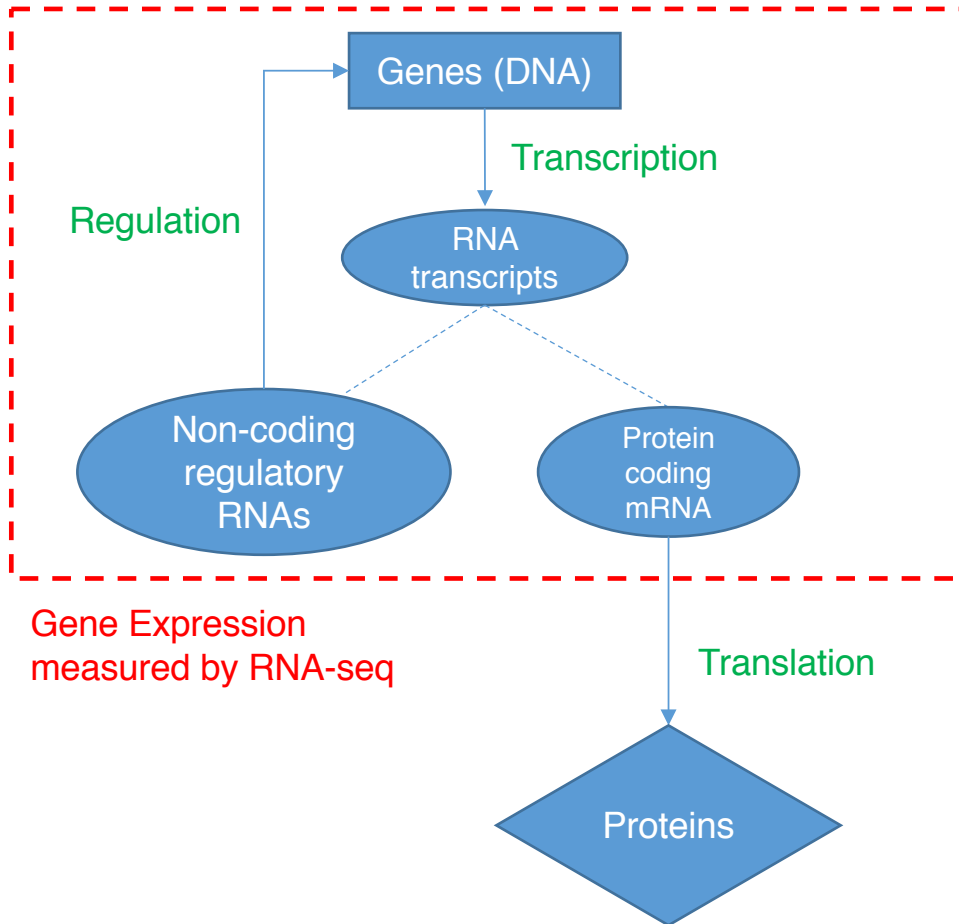


Analysis of Personal Genomes:

Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study



Transcriptome = Gene Activity of All Genes in the Genome, usually quantified by RNA-seq



Expression of genes is quantified by transcription:
RNA-Seq measures mRNA transcript amounts

RNA-Seq Overview

```
ATACAAGCAAGTATAAGTTCGTATGCCGTCTT
GGAGGCTGGAGTTGGGGACGTATGCGGCATAG
TACCGATCGAGTCGACTGTAAACGTAGGCATA
ATTCTGACTGGTGTCATGCTGATGTACTTAAA
```

Fastq sequence files
~5-10 GB

Index-building + Alignment to reference genome

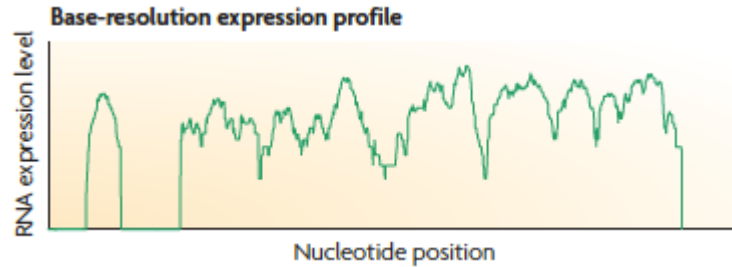
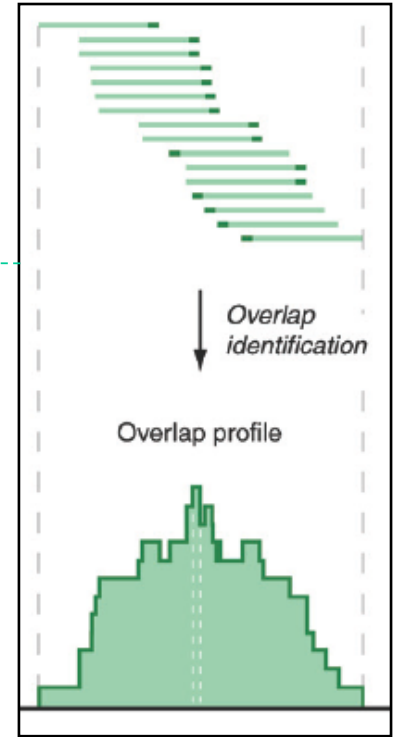
BAM files
~1-2-fold reduction

Conversion to signal track by overlapping reads

BigWig files
~25-fold reduction

Mapping to genes

Gene/Transcript expression matrix
~20-fold reduction



Quantitative information from RNA-seq signal:
average signals at exon level (RPKMs)

Reads => Signal

Successive steps of
Data Reduction

[NAT. REV. 10: 57; PLOS CB 4:e1000158; PNAS 4:107: 5254]



Activity Patterns

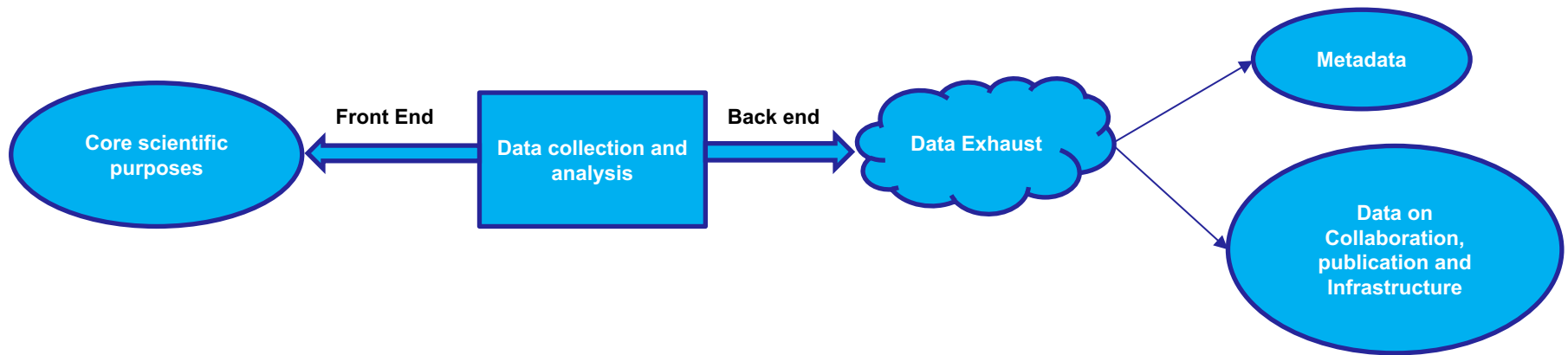
- RNA Seq. gives rise to activity patterns of genes & regions in the genome

Some Core Science Qs Addressed by RNA-seq

- Gene activity as a function of:
 - **Developmental** stage: basic patterns of co-active genes across development
 - **Cell-type** & Tissue: relationship to specialized functions
 - **Evolutionary** relationships: behavior preserved across a wide range of organisms; patterns in model organisms in relation to those in humans
 - **Individual**, across the human population
 - **Disease** phenotypes: disruption of patterns in disease
- Some overarching Qs:
 - Are there core patterns of gene activity ?**
 - How do they vary across individual ?**
 - Are they disrupted by disease?**

Studying large-scale transcriptome data
also produces

Data Exhaust



- Data Exhaust = Exploitable byproducts of big data collection and analysis
- Creative use of Data is key to Data Science !

[PHOTO: RELAXNEWS; from <http://www.lapresse.ca>]

Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

- **[Core] PsychENCODE:**
Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- **[Exhaust] Privacy & RNA-seq**
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs:** Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles:** Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

- *[Core]* **PsychENCODE**: Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- *[Exhaust]* **Privacy** & RNA-seq
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs**: Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles**: Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

Sample Sources: >2,500 brains

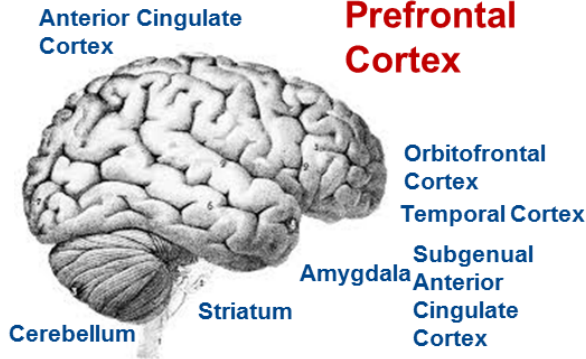
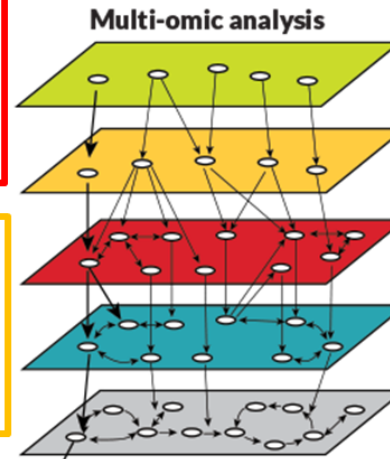
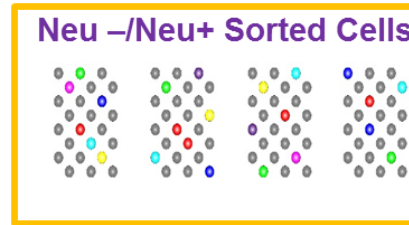
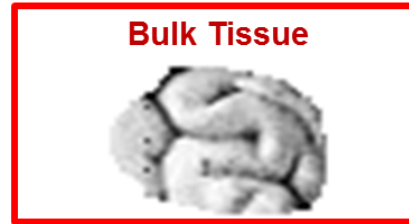
Genome:
WGS, genotype

Epigenome:
ChIP-seq, ATAC-seq, HiC, ERRBS, Array Methylation, NOMeSeq

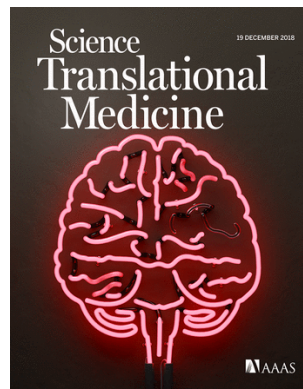
Transcriptome:
RNA-seq, IncRNAseq,

Proteome:
MWP, LC-MS/MS

Cross-disorder: ASD, SCZ, BP, Neurodevelopmental, Neurotypical



Data Coordination/Analysis Center - Uniformly processed data across disorders and developmental time periods!



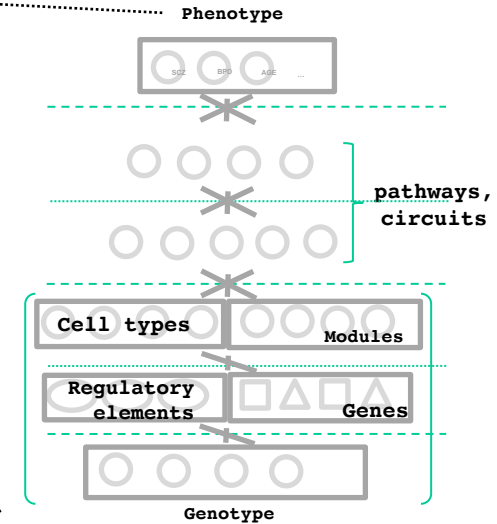
PsychENCODE '18 rollout in Science

11 papers in total.
Major material in the 3 capstones:

Wang et al. ('18), Li et al. ('18), Gandal et al. ('18)

A core issue addressed by PsychENCODE: Using functional genomics to reveal molecular mechanisms between genotype and phenotype in brain disorders

Disease	Heritability*	Molecular Mechanisms
Schizophrenia	81%	(C4A)
Bipolar disorder	70%	-
Alzheimer's disease	58 - 79%	Apolipoprotein E (APOE), Tau
Hypertension	30%	Renin–angiotensin–aldosterone
Heart disease	34-53%	Atherosclerosis, VCAM-1
Stroke	32%	Reactive oxygen species (ROS), Ischemia
Type-2 diabetes	26%	Insulin resistance
Breast Cancer	25-56%	BRCA, PTEN



Many psychiatric conditions are highly heritable

Schizophrenia: up to 80%

But we don't understand basic molecular mechanisms underpinning this association
(in contrast to many other diseases such as cancer & heart disease)

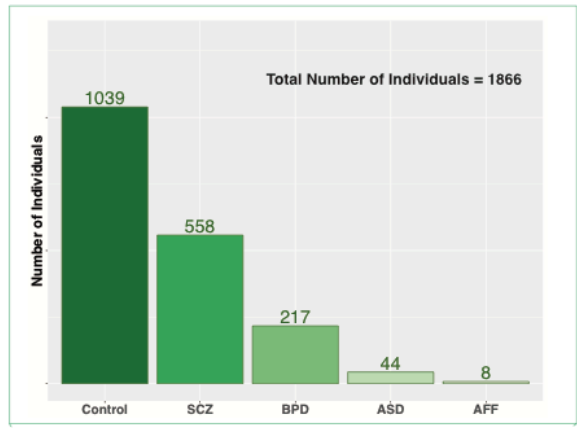
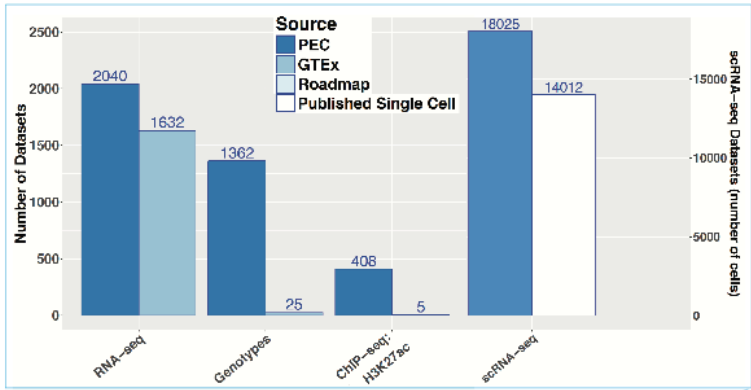
Moreover, current models substantially underestimate heritability using genetic data

Schizophrenia : ~25%

Thus, interested in developing predictive models of psychiatric traits which:

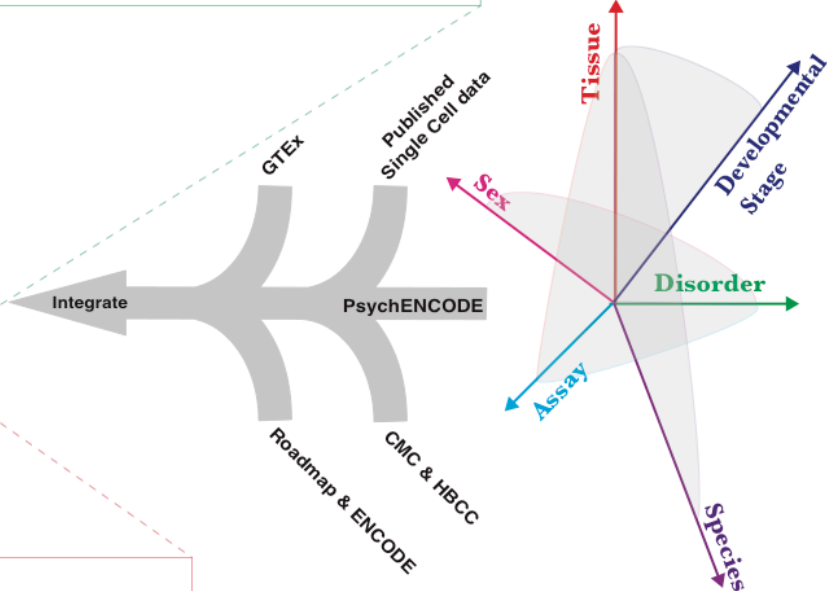
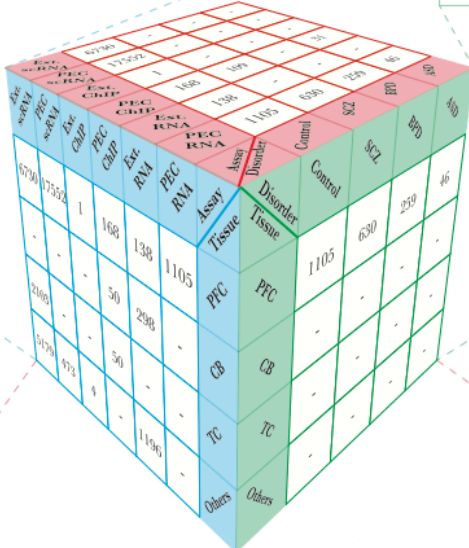
Use observations at intermediate (molecular levels) levels to inform latent structure

Use the predictive features of these “molecular endo phenotypes” to begin to suggest actors involved in mechanism



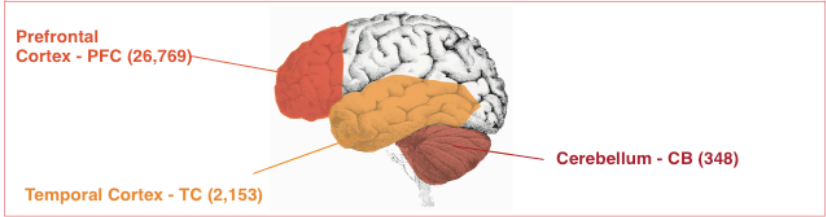
1866
 Individuals
 ~3.7K bulk RNA-seq
 ~32K single-cells

Disorder



Collecting functional genomic datasets for the adult brain

from PsychENCODE, other large consortia & single cell studies



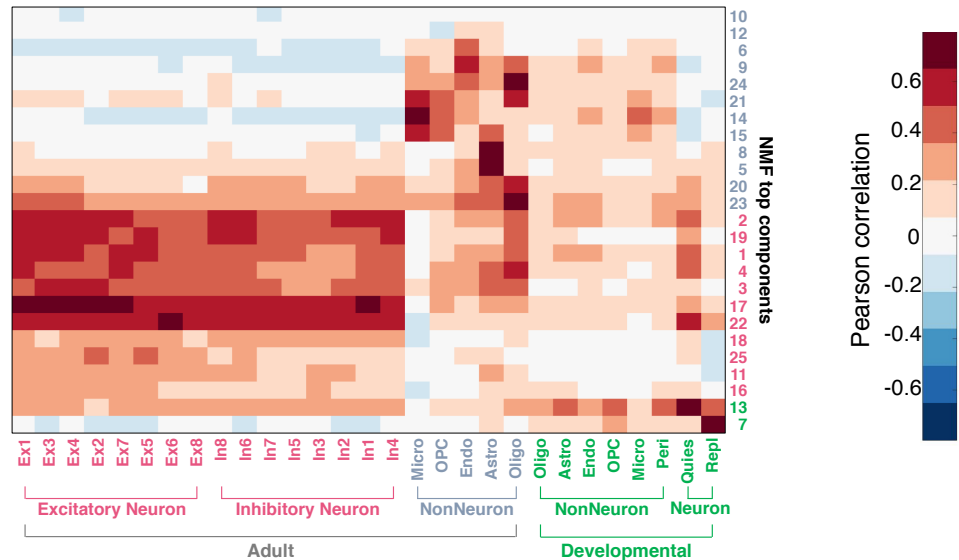
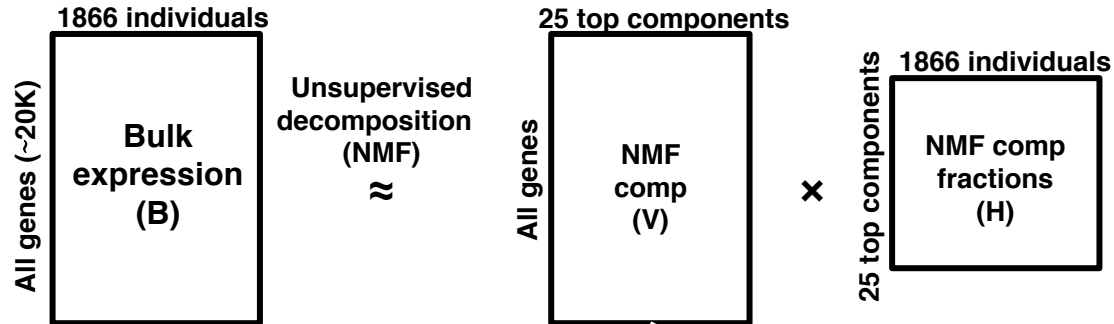
Single-cell deconvolution

Step 1:

Unsupervised learning to determine relevant cell types

Single cell signatures, from:

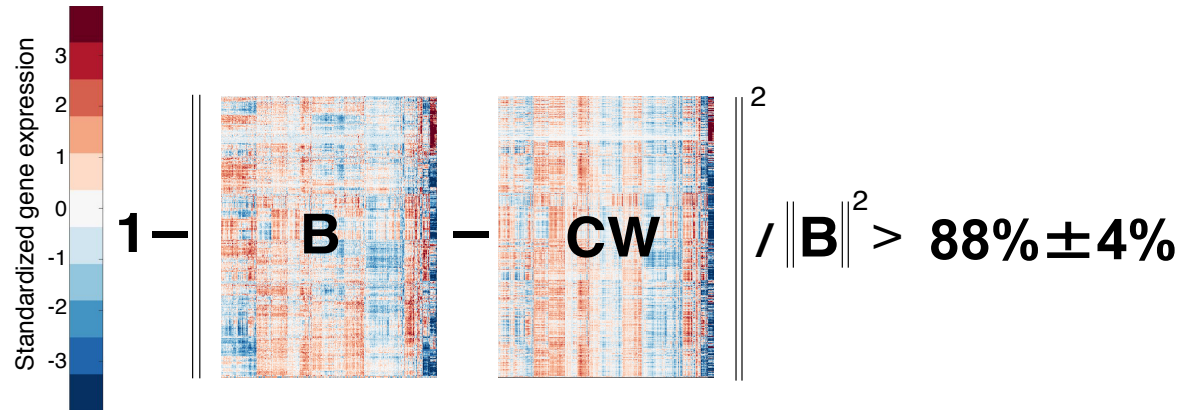
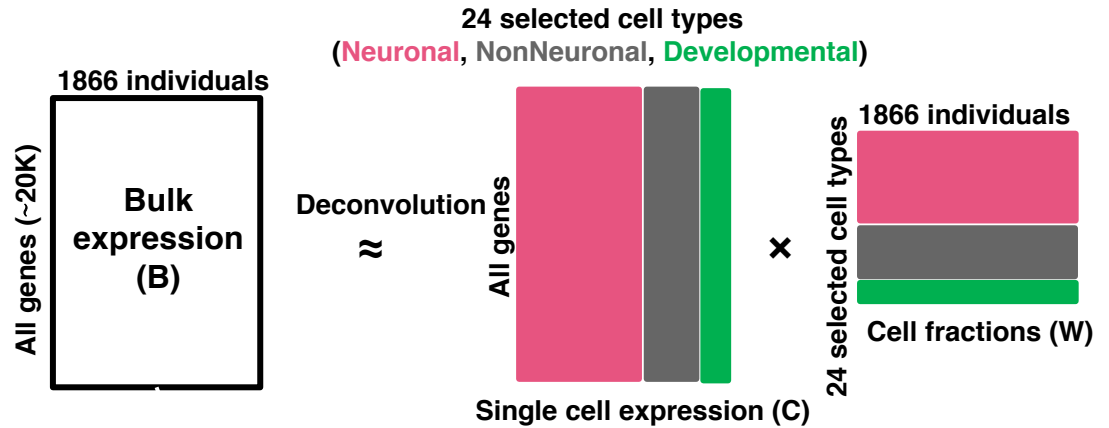
- ~14K cells (Lake et al., '16 & '18)
- ~400 cells (Darmanis et al., PNAS, '15)
- ~18K cells (PsychENCODE)



Single-cell deconvolution

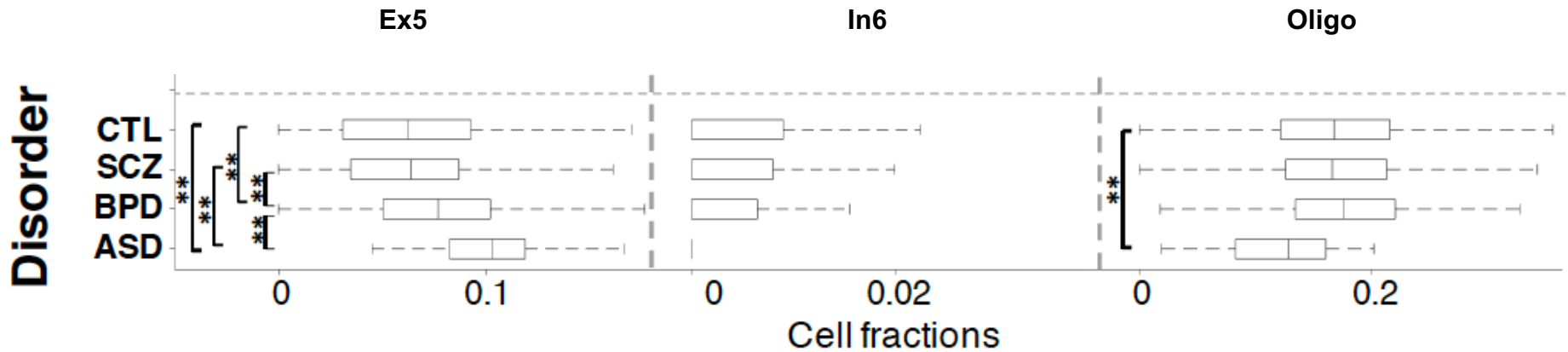
Step 2:

Supervised learning to estimate cell fractions



Individual and cross-population reconstruction accuracy via deconvolution

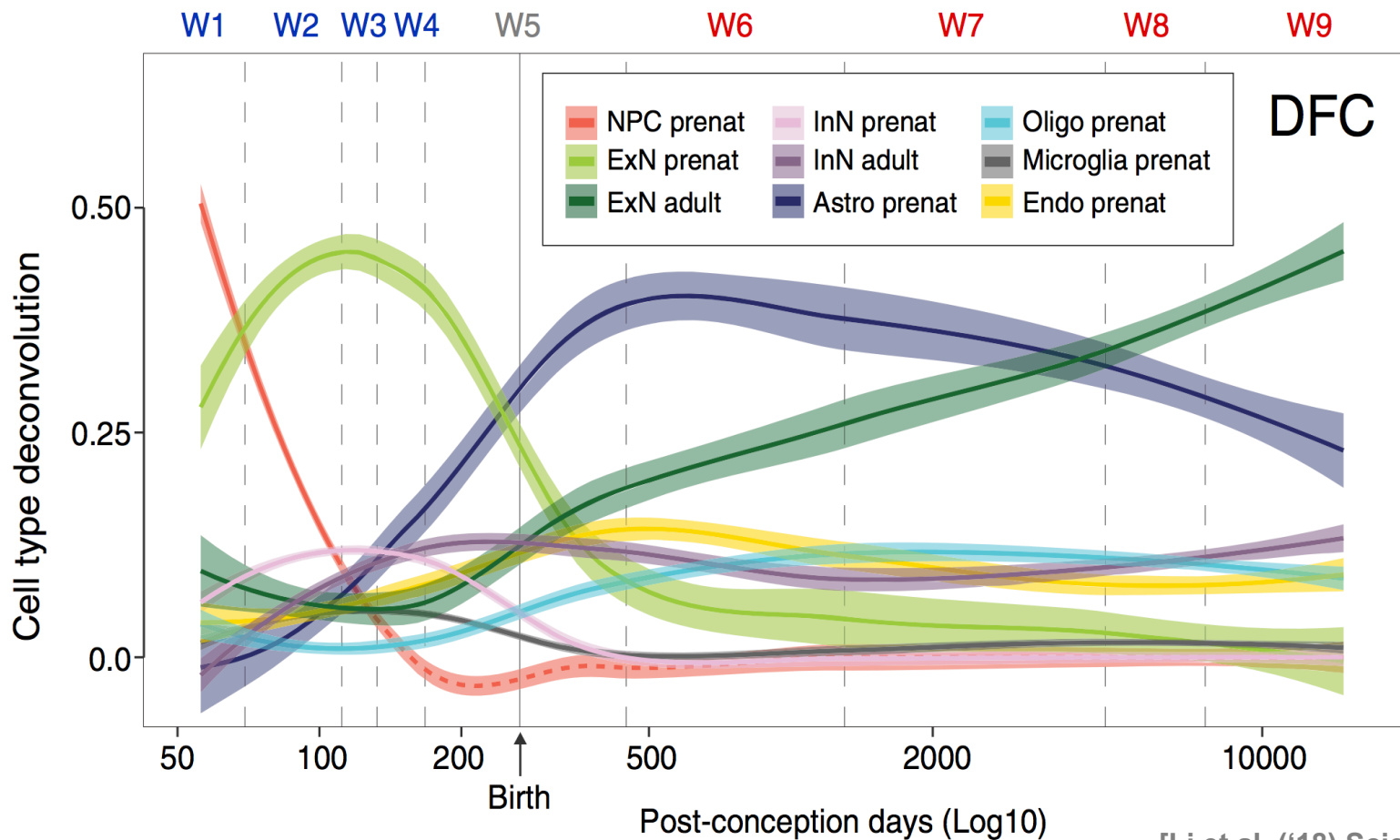
Different neuronal & glial cell fractions across disorders



Excitatory to Inhibitory imbalance at neuronal subtype level for ASD*

* Rubenstein et al., Model of autism: increased ratio of excitation/inhibition in key neural systems, Genes Brain Behav. 2003

Different neuronal & glial cell fractions across ages

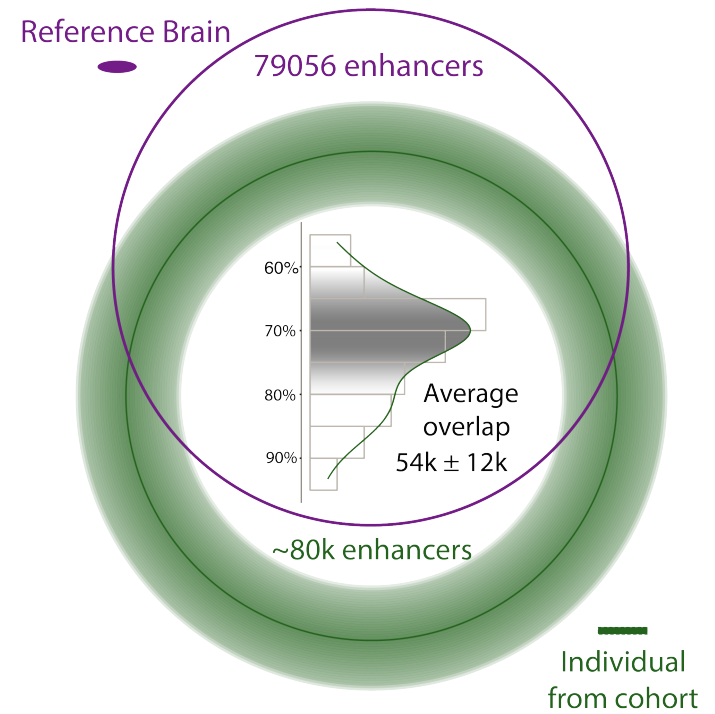
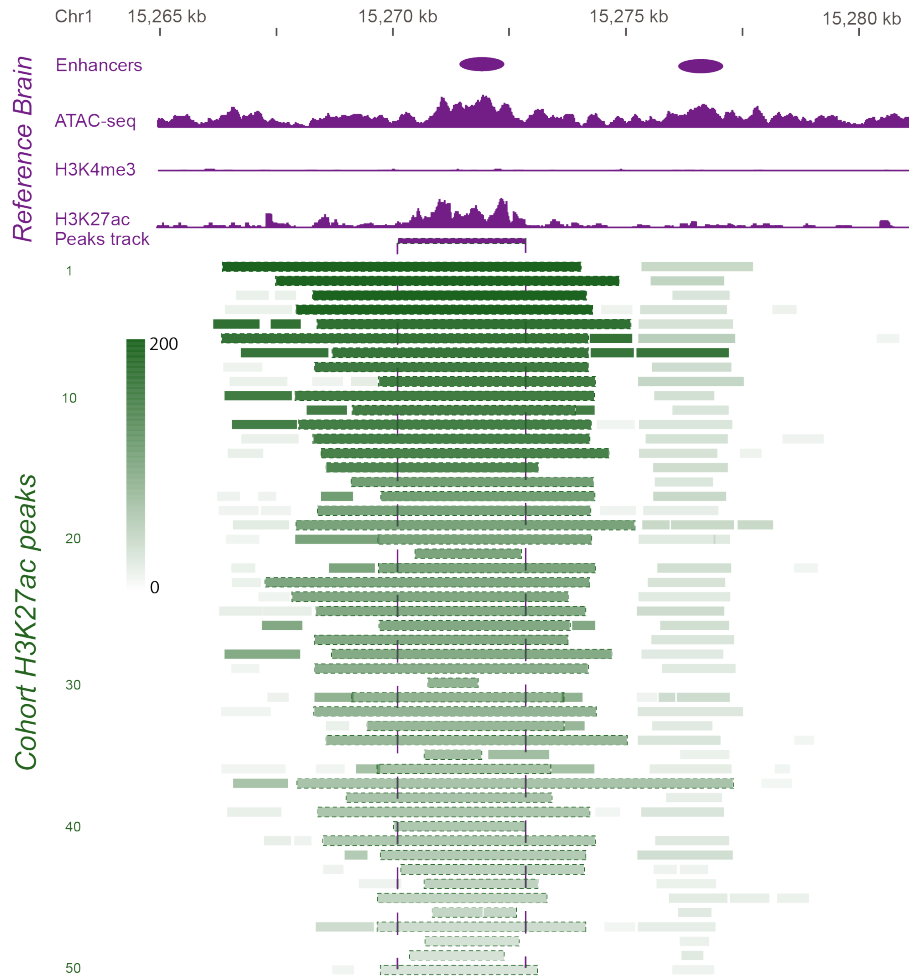


[Li et al. ('18) Science]

Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

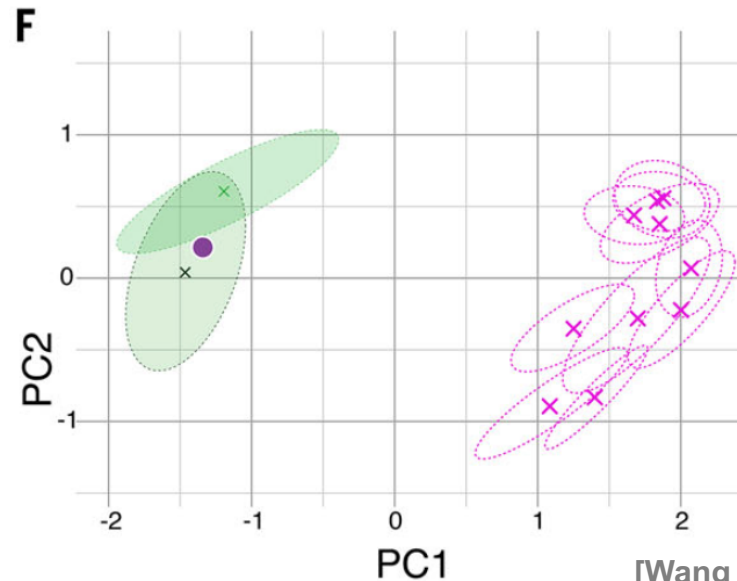
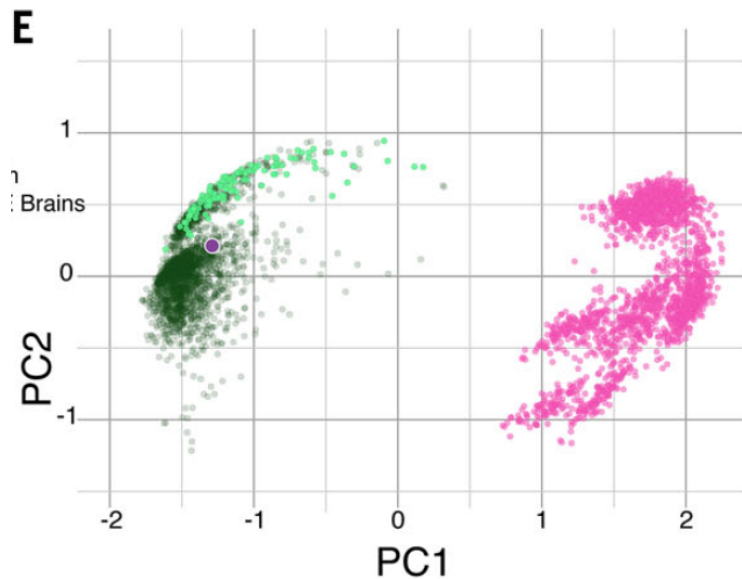
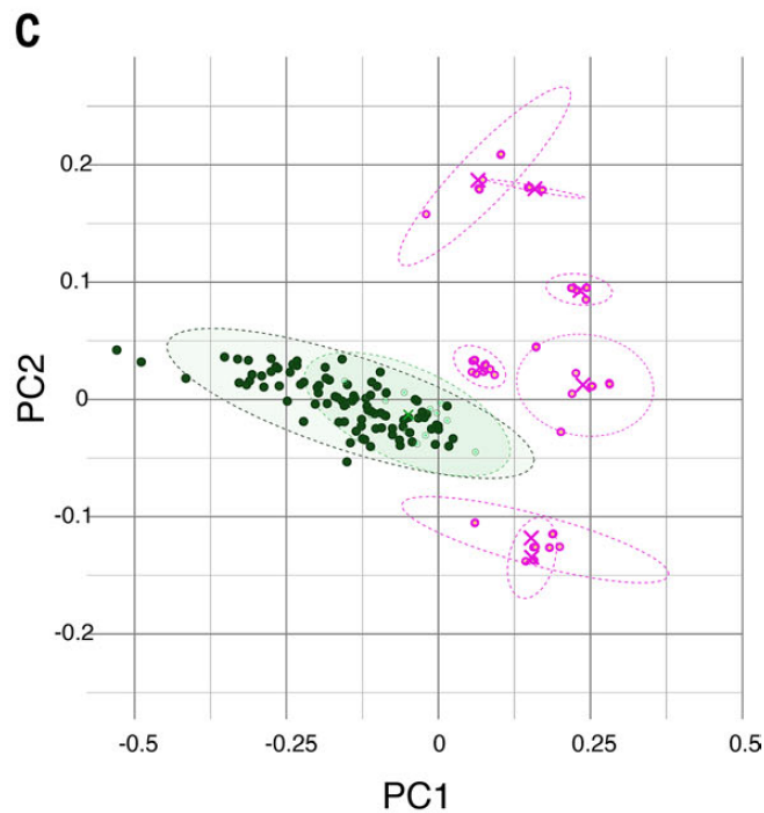
- *[Core]* **PsychENCODE:**
Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- *[Exhaust]* **Privacy** & RNA-seq
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs:** Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles:** Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

Developing a Reference Set of ~79K PFC Enhancers & Studying Their Population Variation



Consistently Comparing Variation in Chromatin & Expression

Placing the **Brain** in context of all other **Body Tissues**



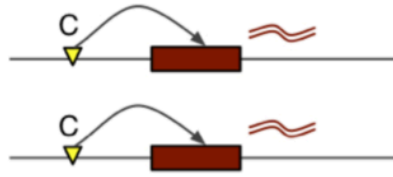
[Wang et al. ('18) Science]

Chromatin variation in the population

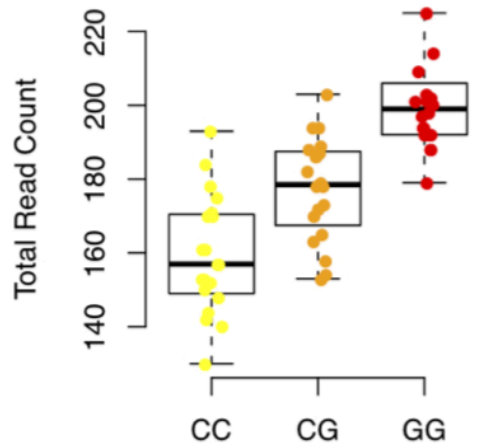
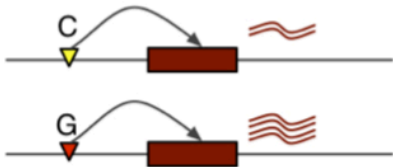
Quantitative Trait Loci (QTL) associated with variations

Gene expression (eQTL)

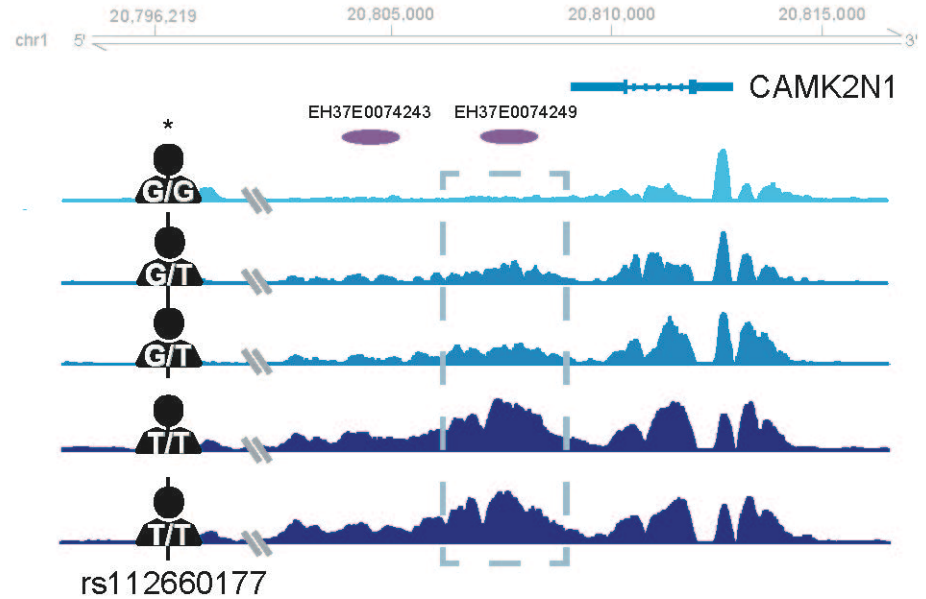
Sample 1: genotype CC



Sample 2: genotype CG

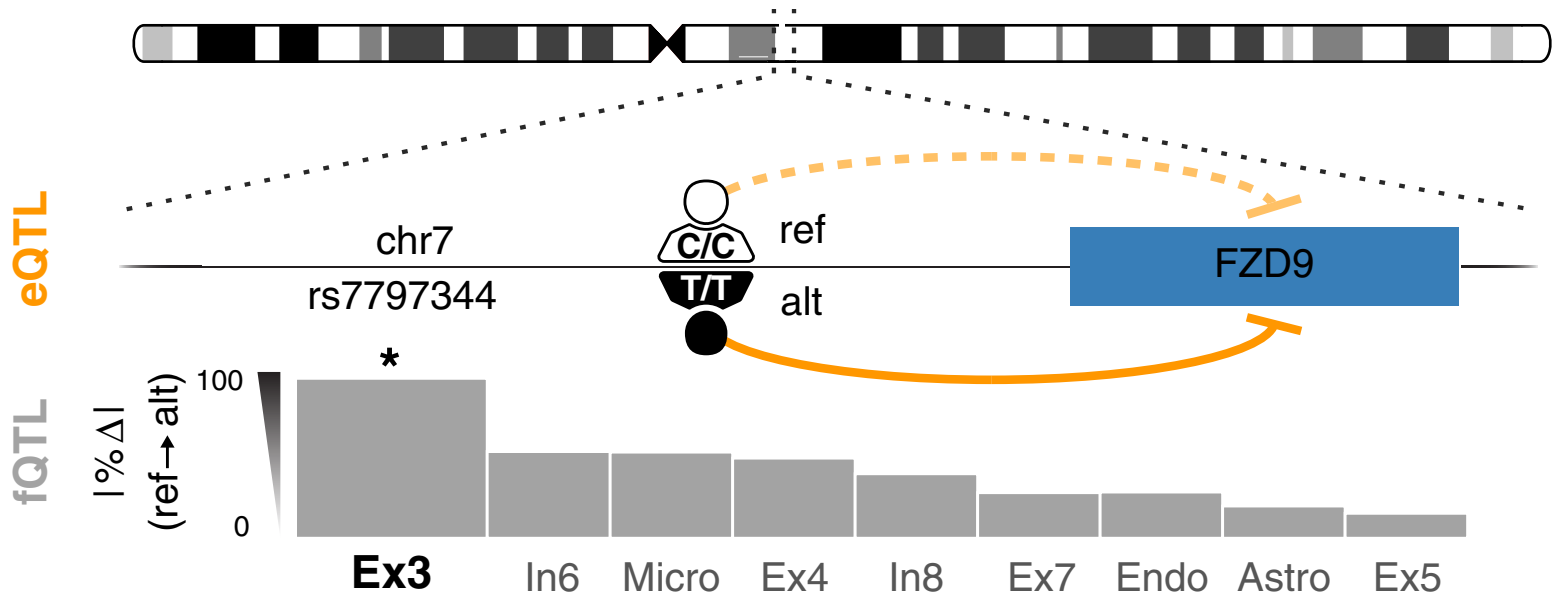
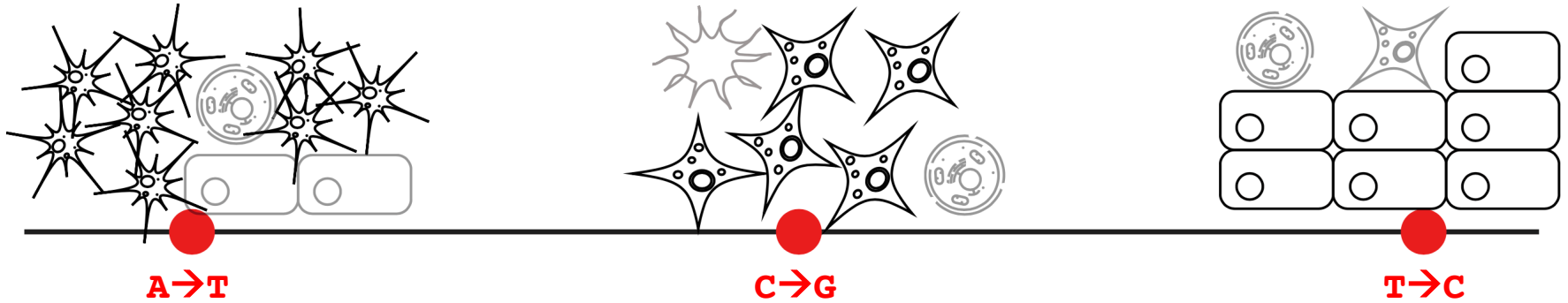


Chromatin (cQTL)

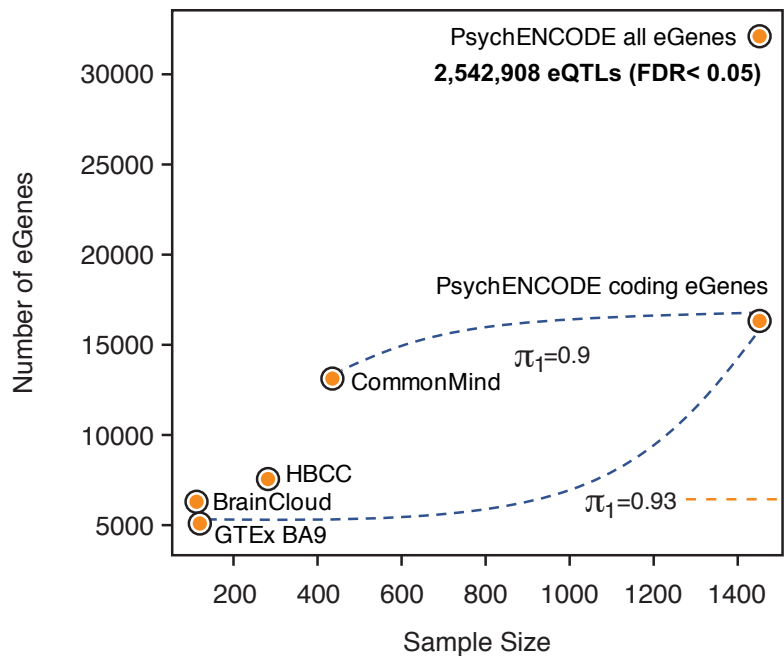


	Number of intermediate phenotype	SNPs
eQTL	32,944 eGenes	1,341,182
cQTL*	8,484 Enhancers	7,983

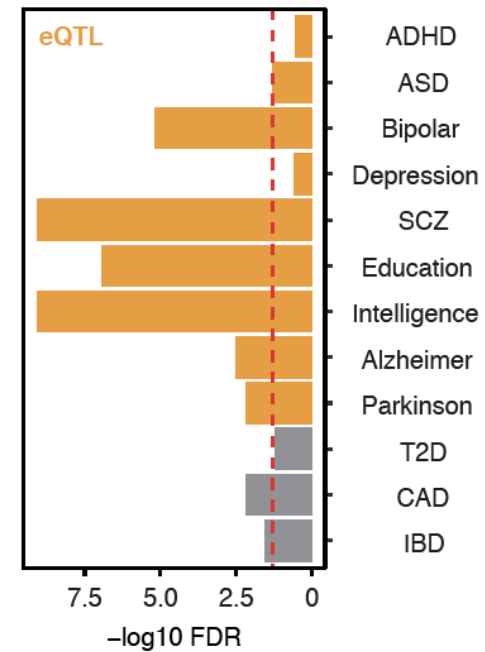
Cell fraction QTLs (fQTLs)



Larger Brain eQTL sets than previous studies

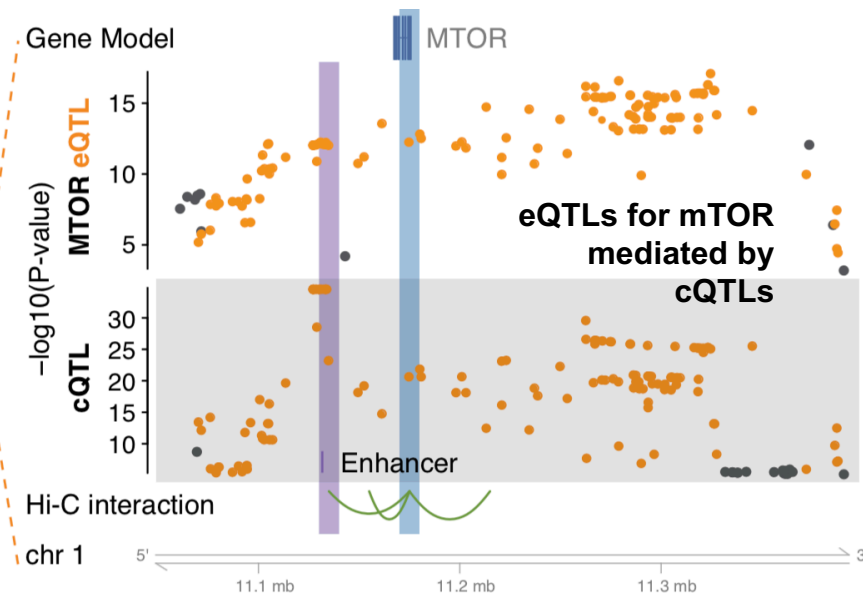
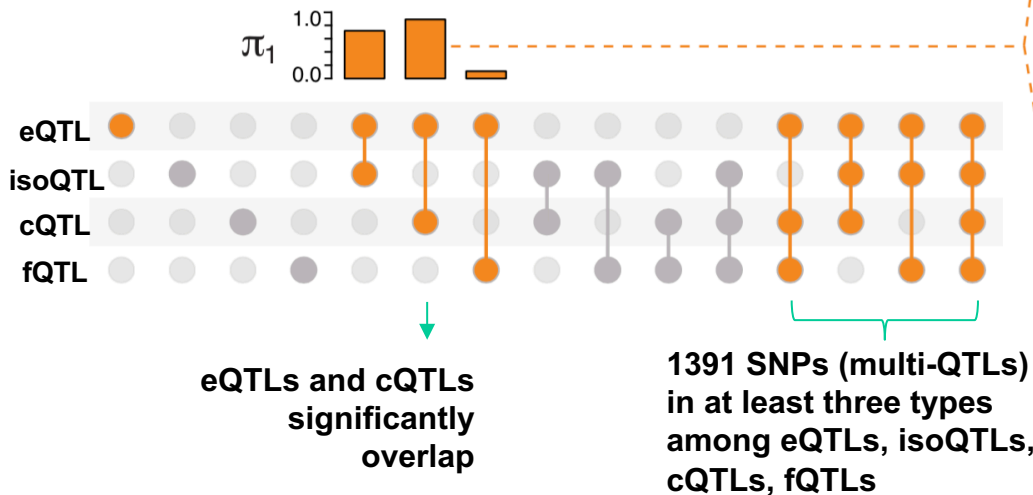


GWAS enrichment

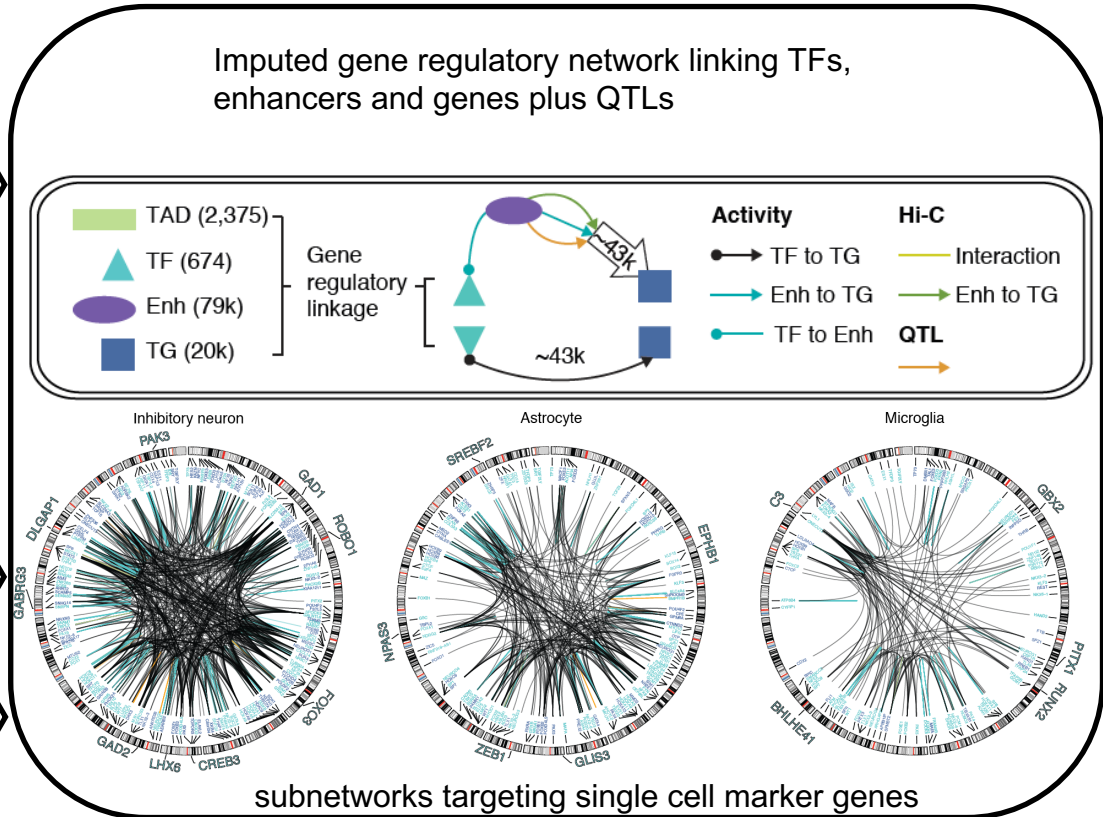
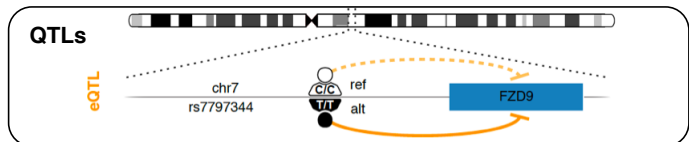
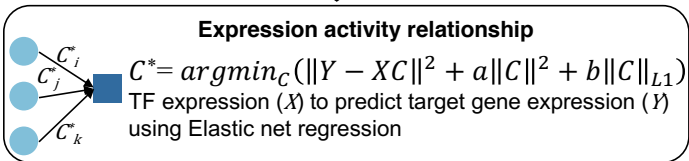
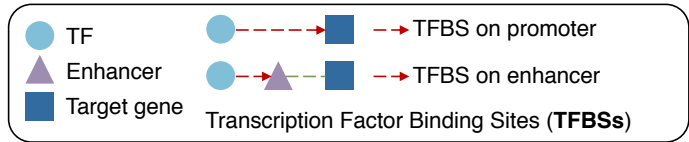
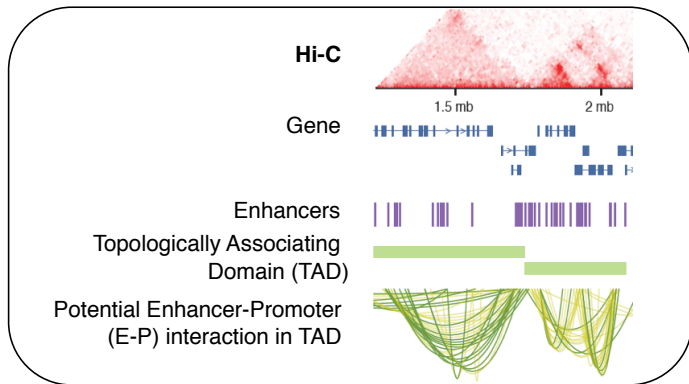


multi-QTLs from overlapping different types of QTLs: cQTL, fQTL, eQTL & isoQTL

	Numbers of QTLs	eGenes Enhancers Cell types	SNPs
eQTL	2,542,908	32,944	1,341,182
isoQTL	2,628,259	19,790	1,052,939
cQTL*	8,464	8,484	7,983
fQTL	4,199	9	1,672

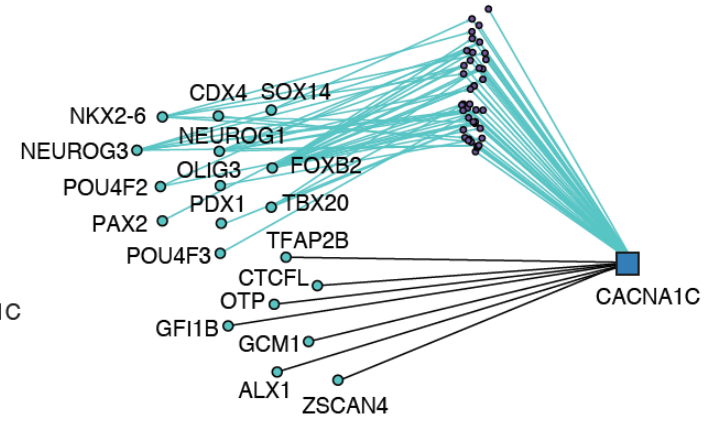
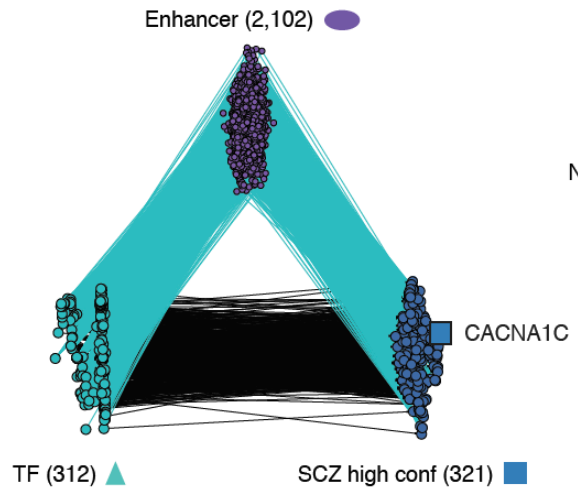
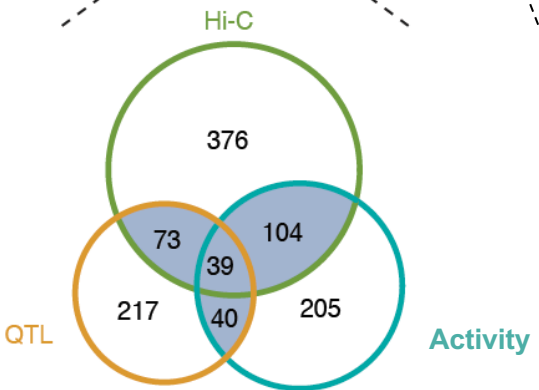
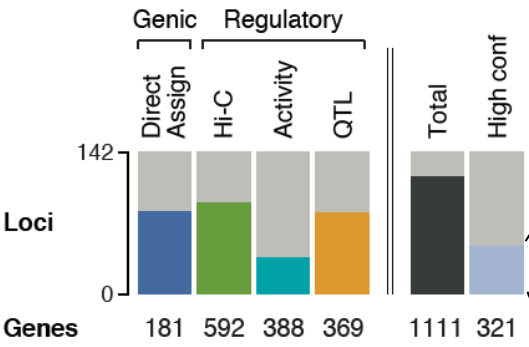
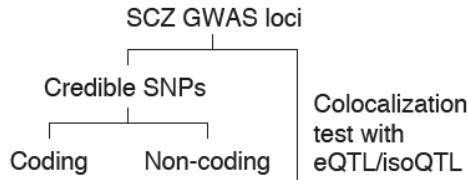


Gene regulatory network inference from Hi-C, QTLs & Activity Correlations



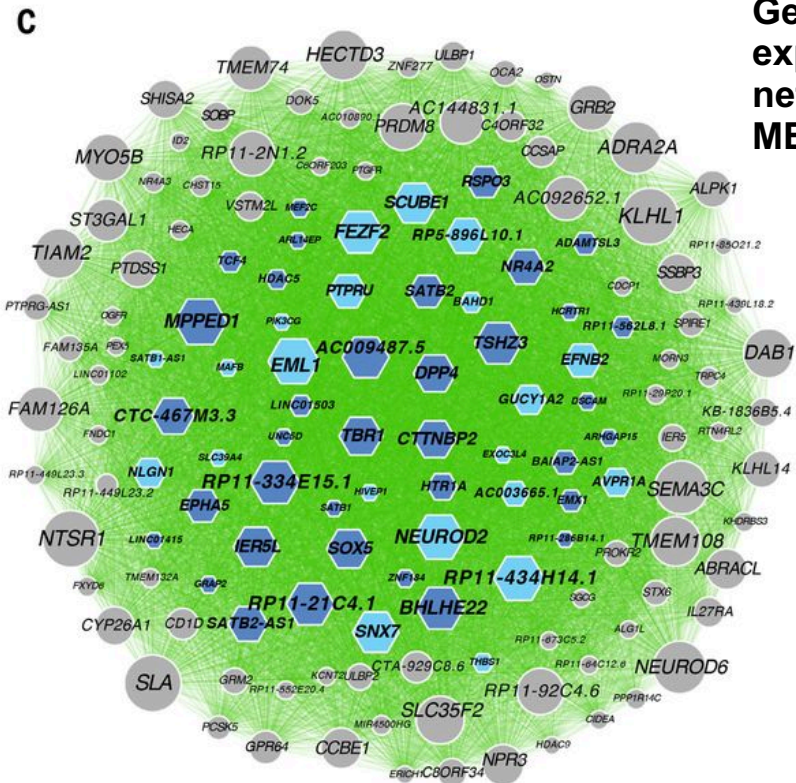
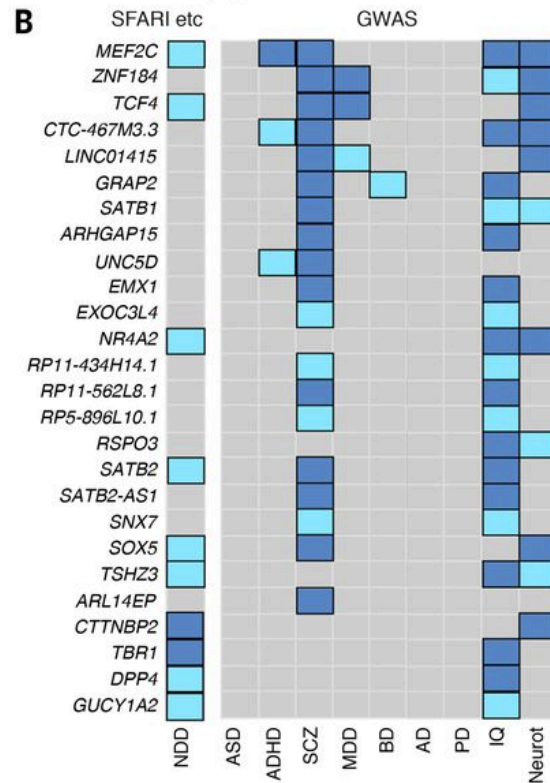
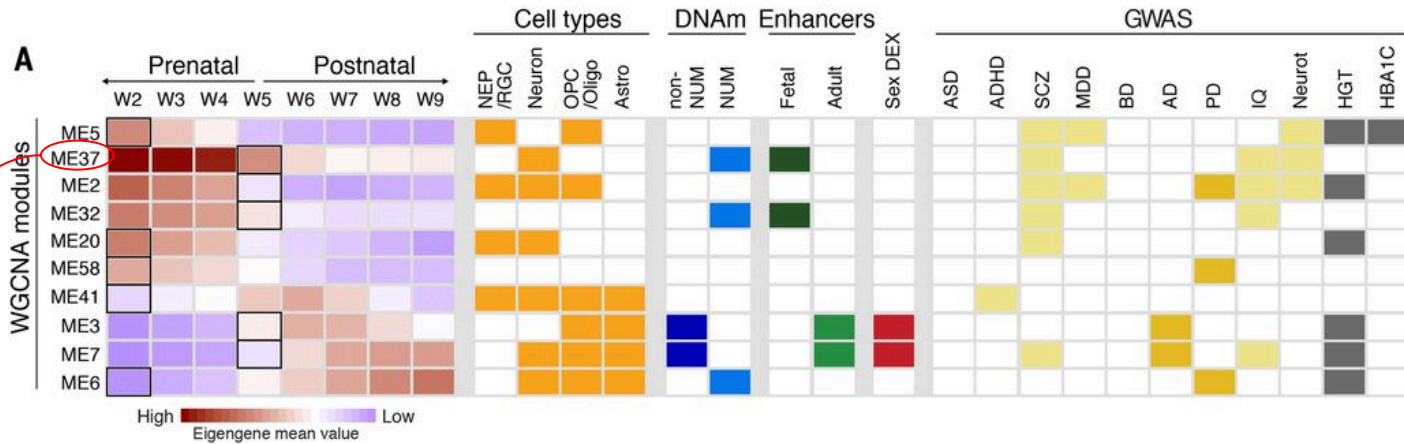
142

Linking GWAS SNPs to disease genes using the regulatory network



321
high-confident
SCZ genes

Convergence of risk for brain disorders (SCZ) on discrete co-expression modules (often prenatally expressed) and cell types.



Disorders genes (ADHD, SCZ, MDD, BD)

Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

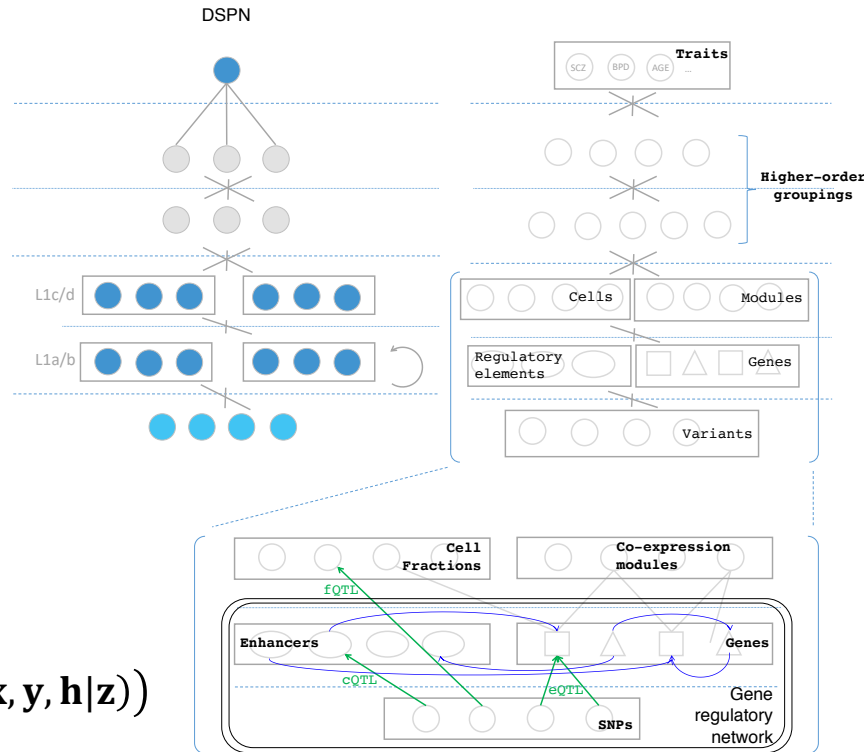
- *[Core]* **PsychENCODE:**
Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- *[Exhaust]* **Privacy** & RNA-seq
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs:** Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles:** Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

Deep Structured Phenotype Network (DSPN)

Gene regulatory network builds skeleton

Energy model:

$$p(\mathbf{x}, \mathbf{y}, \mathbf{h} | \mathbf{z}) \propto \exp(-E(\mathbf{x}, \mathbf{y}, \mathbf{h} | \mathbf{z}))$$



Boltzmann machine

y: phenotypes

h: hidden units (e.g., circuits)

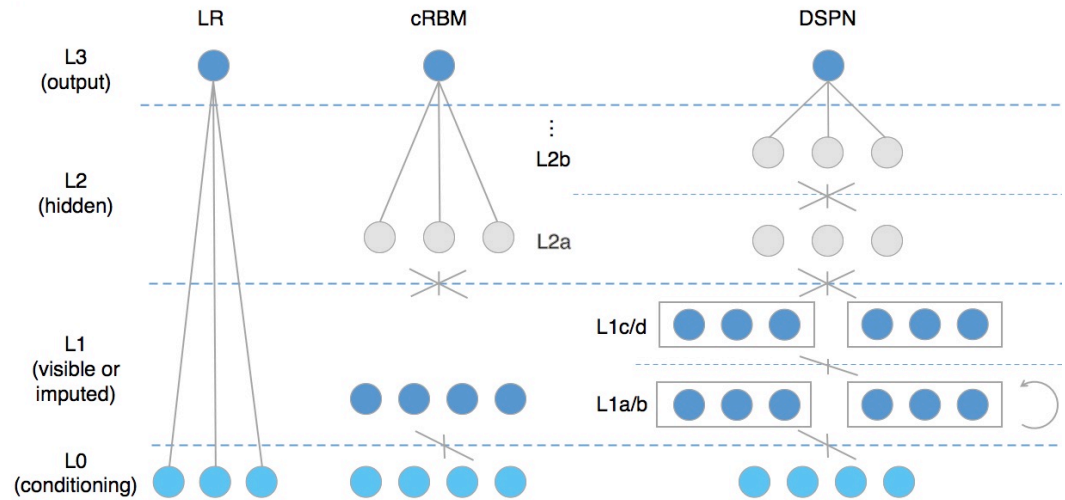
x: intermediate phenotypes (e.g., genes, enhancers)

z: genotypes (e.g., SNPs)

W: weights (e.g., regulatory network)

$$E(\mathbf{x}, \mathbf{y}, \mathbf{h} | \mathbf{z}) = -\mathbf{z}^T \mathbf{W}_1 \mathbf{x} - \mathbf{x}^T \mathbf{W}_2 \mathbf{x} - \mathbf{x}^T \mathbf{W}_3 \mathbf{h} - \mathbf{h}^T \mathbf{W}_4 \mathbf{h} - \mathbf{h}^T \mathbf{W}_5 \mathbf{y} - \text{Bias}$$

DSPN improves brain disease prediction by adding deep layers

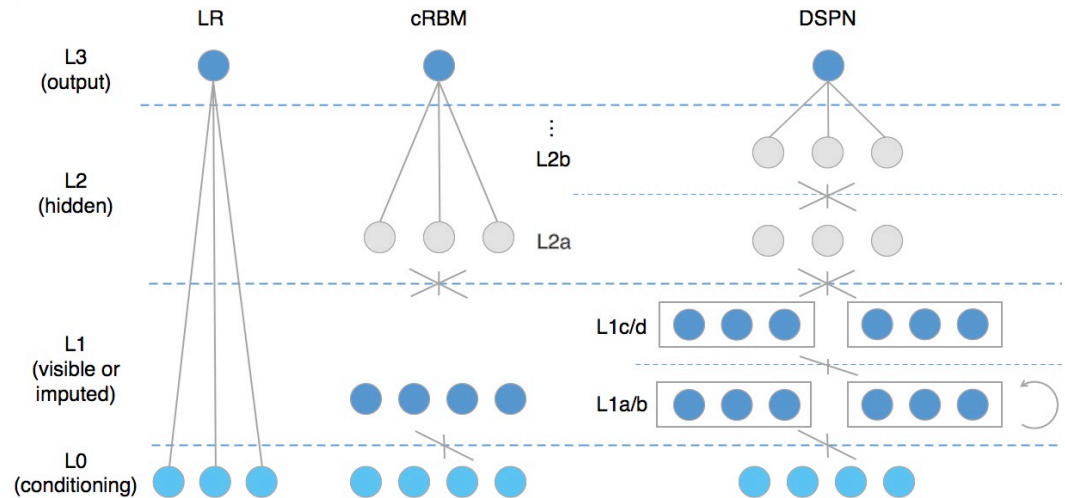


Method	LR-genotype	LR-transcriptome	cRBM	DSPN-imputation	DSPN-full
Schizophrenia	54.6%	63.0%	70.0%	59.0%	73.6%
Bipolar Disorder	56.7%	63.3%	71.1%	67.2%	76.7%
Autism Spectrum Disorder	50.0%	51.7%	67.2%	62.5%	68.3%

X 6.0

Accuracy = chance to correctly predict disease/health

DSPN improves brain disease prediction by adding deep layers

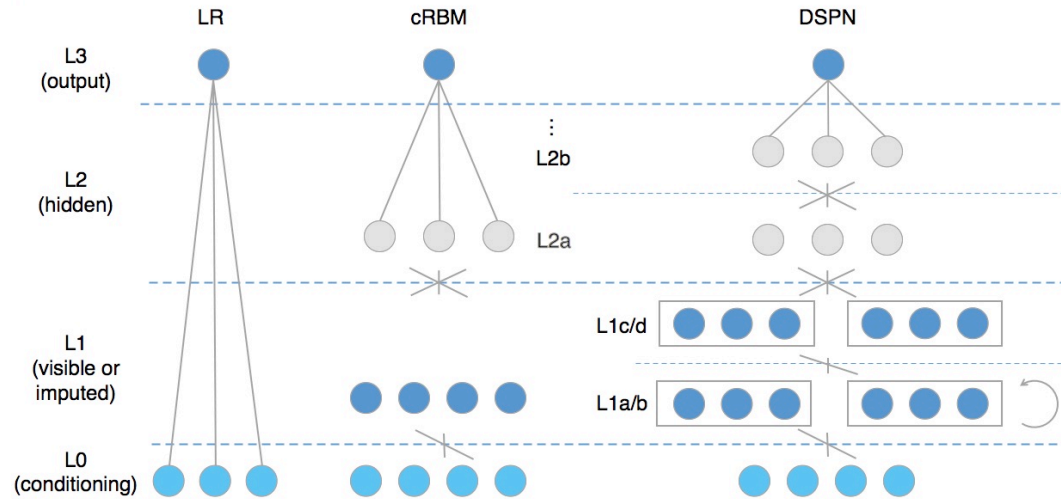


Method	LR-genotype	LR-transcriptome	cRBM	DSPN-imputation	DSPN-full
Schizophrenia	54.6%	63.0%	70.0%	59.0%	73.6%
Bipolar Disorder	56.7%	63.3%	71.1%	67.2%	76.7%
Autism Spectrum Disorder	50.0%	51.7%	67.2%	62.5%	68.3%

X 2.5

Accuracy = chance to correctly predict disease/health

DSPN improves brain disease prediction by adding deep layers

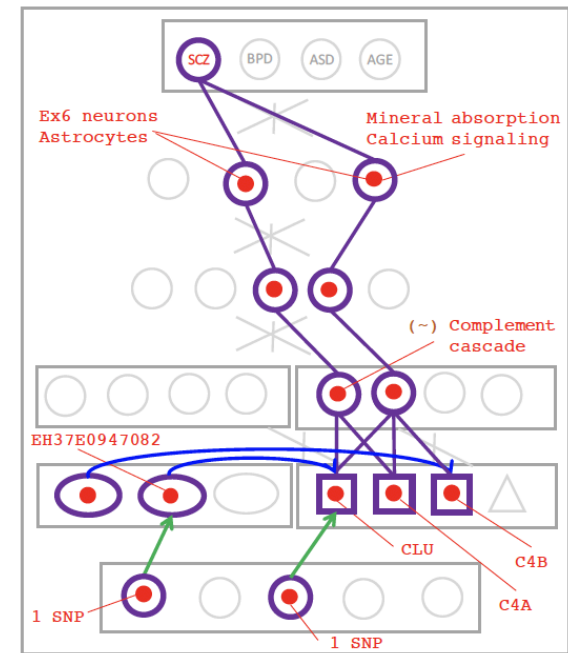
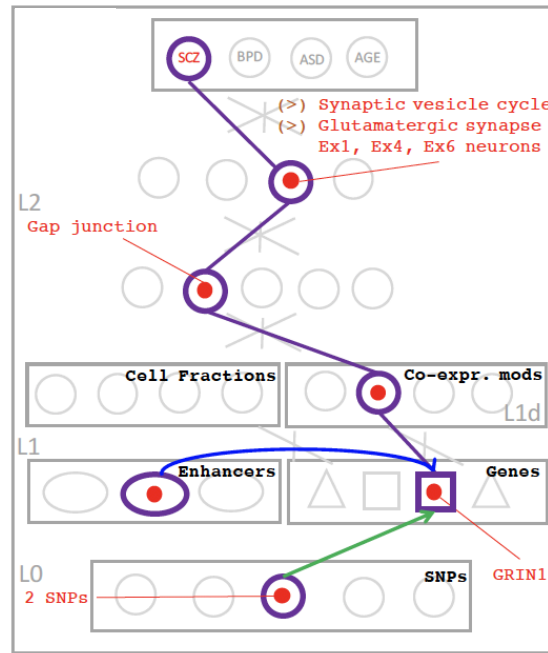
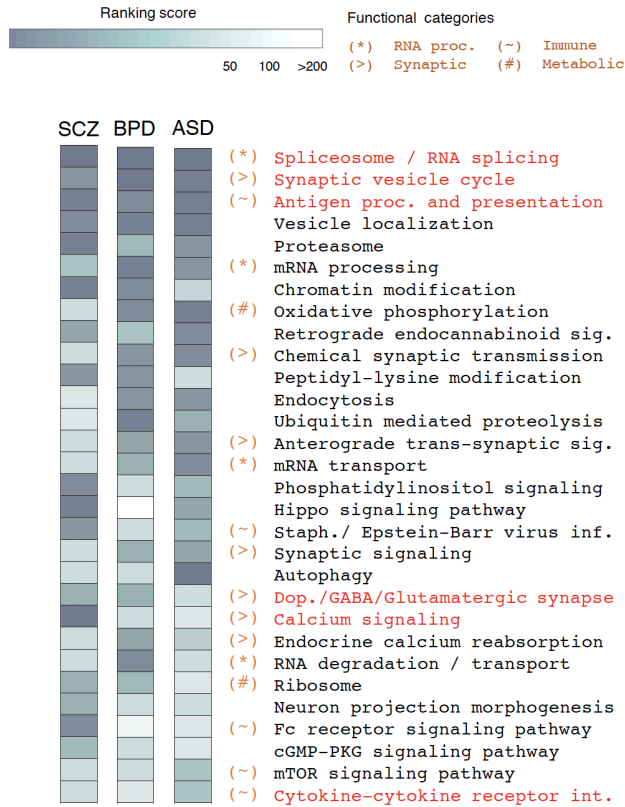


Method	LR-genotype	LR-transcriptome	cRBM	DSPN-imputation	DSPN-full
Schizophrenia	54.6%	63.0%	70.0%	59.0%	73.6%
Bipolar Disorder	56.7%	63.3%	71.1%	67.2%	76.7%
Autism Spectrum Disorder	50.0%	51.7%	67.2%	62.5%	68.3%

X 3.1

Accuracy = chance to correctly predict disease/health

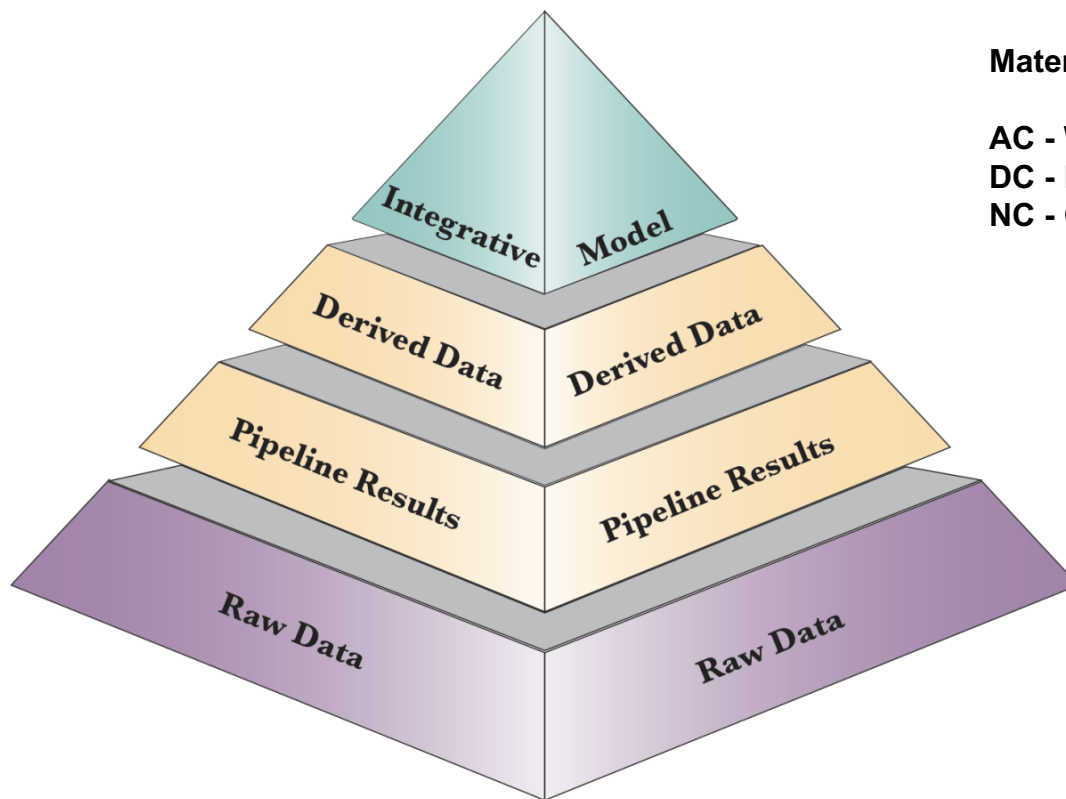
DSPN discovers molecular pathways from genotype to phenotype



Thoughts on Missing Heritability, Polygenic Risk Scores & Our Model

- Many psychiatric conditions are highly heritable
 - Schizophrenia: up to 80% (family studies)
- Psychiatric traits appear to be highly polygenic
 - PRSs typically use an additive model to predict genetic risk; space of possible epistatic models is vast and requires huge sample sizes for unique identification
- However, Common SNPs only explain ~25% heritability
- Possible explanations:
 - Significant (additive) contribution of rare SNPs
 - Important roles for epistasis and gene-environment interactions
- We circumvent this problem:
 - Use observations at intermediate levels (molecular endophenotypes) to inform latent structure
 - Use a deep-learning framework for optimization; proven capacity to learn complex predictors which generalize
- Epistatic interactions in our model are implicit: develop model interpretation methods to suggest actors involved in mechanism

Review of the Phase 1 PsychENCODE capstone resource: Layers of distributed information



Material in the 3 capstones:

AC - Wang et al. ('18)

DC - Li et al. ('18)

NC - Gandal et al. ('18)

Resource.psychencode.org
Development.psychencode.org

Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

- *[Core]* **PsychENCODE:**
Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- *[Exhaust]* **Privacy** & RNA-seq
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs:** Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles:** Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

2-sided nature of functional genomics data: Analysis can be very **General/Public** or **Individual/Private**



- **General quantifications** related to overall aspects of a condition – ie gene activity as a function of:
 - Developmental stage, Evolutionary relationships, Cell-type, Disease
- **Above are not tied to an individual's genotype. However, data is derived from individuals & tagged with their genotypes**
- (Note, a few calculations aim to use explicitly genotype to derive general relations related to sequence variation & gene expression - eg allelic activity)

Genomics has similar "Big Data" Dilemma in the Rest of Society

- Sharing & "peer-production" is central to success of many new ventures, with the same risks as in genomics
 - **EG web search**: Large-scale mining essential



- We confront privacy risks every day we access the internet

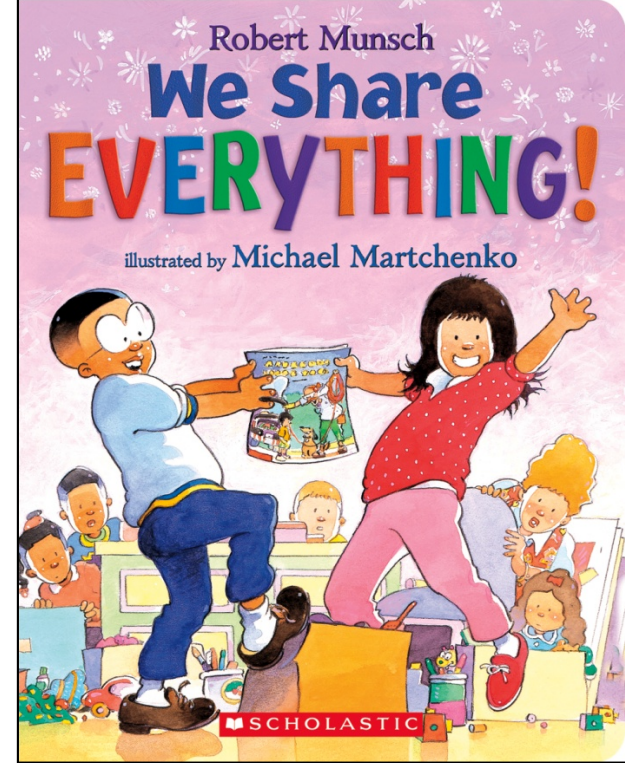
Tricky Privacy Considerations in Personal Genomics

- **Genetic Exceptionalism :**
The Genome is very fundamental data, potentially very revealing about one's identity & characteristics
- **Personal Genomic info. essentially meaningless currently but will it be in 20 yrs? 50 yrs?**
 - Genomic sequence very revealing about one's children. Is true consent possible?
 - Once put on the web it can't be taken back
- **Culture Clash:**
Genomics historically has been a proponent of “open data” but not clear personal genomics fits this.
 - Clinical Medline has a very different culture.
- **Ethically challenged** history of genetics
 - Ownership of the data & what consent means (Hela)
 - Could your genetic data give rise to a product line?



The Other Side of the Coin: Why we should share

- Sharing helps **speed research**
 - Large-scale mining of this information is important for medical research
 - Privacy is cumbersome, particularly for big data
- Sharing is important for **reproducible research**
- Sharing is useful for **education**
 - More fun to study a known person's genome
 - Eg Zimmer's Game of Genomes in STAT



[Yale Law Roundtable ('10). *Comp. in Sci. & Eng.* 12:8; D Greenbaum & M Gerstein ('09). *Am. J. Bioethics*; D Greenbaum & M Gerstein ('10). *SF Chronicle*, May 2, Page E-4; Greenbaum et al. *PLOS CB* ('11)]

CARL ZIMMER'S
GAME OF GENOMES
SEASON 1





The Dilemma

[Economist, 15 Aug '15]

- The individual (harmed?) v the collective (benefits)
 - But do sick patients care about their privacy?
- How to balance risks v rewards - Quantification
 - What is acceptable risk?
Can we quantify leakage?
 - Ex: photos of eye color
 - Cost Benefit Analysis

Current Social & Technical Solutions

• **Closed Data** Approach

- Consents
- “Protected” distribution via dbGAP
- Local computes on secure computer

• Issues with Closed Data

- Non-uniformity of consents & paperwork
 - Different international norms, leading to confusion
- Encryption & computer security creates burdensome requirements on data sharing & large scale analysis
- Many schemes get “hacked”

• **Open Data**

- Genomic “test pilots” (ala PGP)?
 - Sports stars & celebrities?
- Some public data & data donation is helpful but is this a realistic solution for an unbiased sample of ~1M

Strawman Hybrid **Social** & **Tech** Proposed Solution?

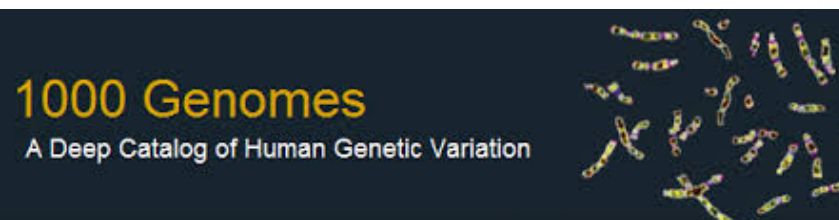
- Fundamentally, researchers have to keep genetic secrets.
 - **Need for an (international) legal framework**
 - Genetic Licensure & training for individuals (similar to medical license, drivers license)
- Technology to make things easier
 - Cloud computing & enclaves (eg solution of Genomics England)
- Technological barriers shouldn't create a social incentive for “hacking”
- **Quantifying Leakage & allowing a small amounts of it**
- **Careful separation & coupling of private & public data**
 - **Lightweight, freely accessible secondary datasets coupled to underlying variants**
 - Selection of stub & "test pilot" datasets for benchmarking
 - Develop programs on public stubs on your laptop, then move the program to the cloud for private production run

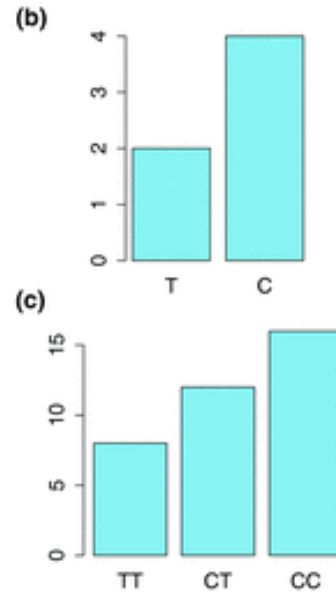
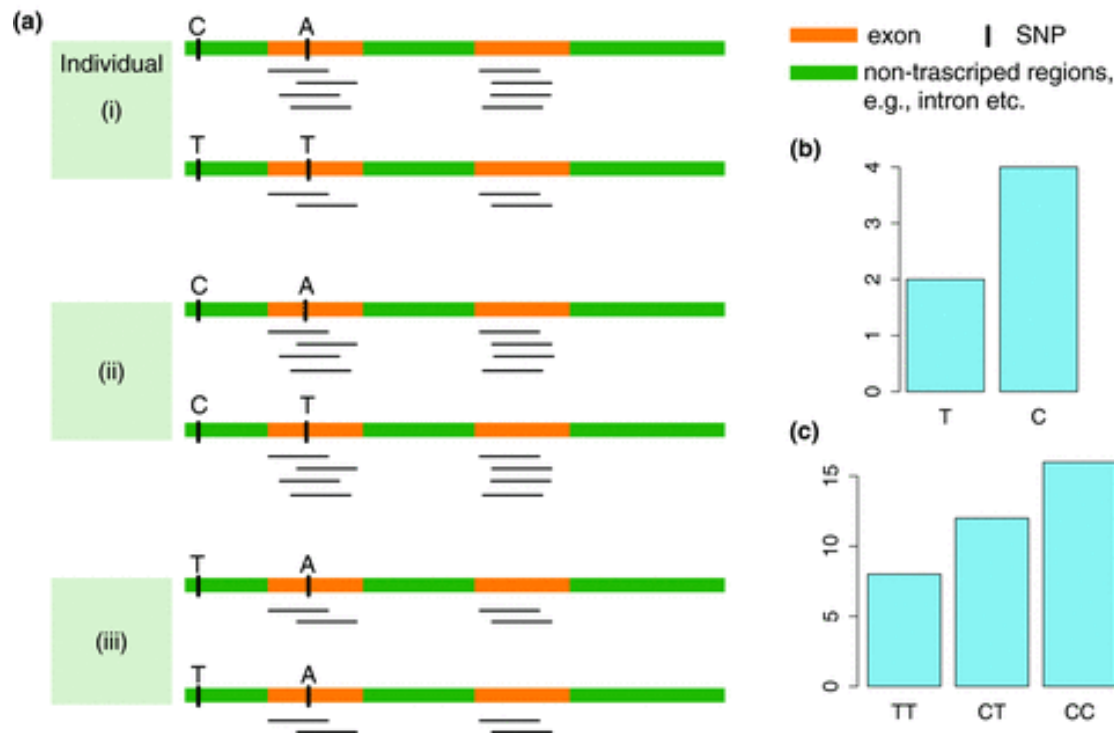
Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

- *[Core]* **PsychENCODE:**
Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- *[Exhaust]* **Privacy** & RNA-seq
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs:** Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles:** Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

Representative Functional Genomics, Genotype, eQTL Datasets

- Genotypes are available from the 1000 Genomes Project
- mRNA sequencing for 462 individuals from gEUVADIS and ENCODE
 - Publicly available quantification for protein coding genes
- Functional genomics data (ChIP-Seq, RNA-Seq, Hi-C) available from ENCODE
- Approximately 3,000 cis-eQTL (FDR<0.05)

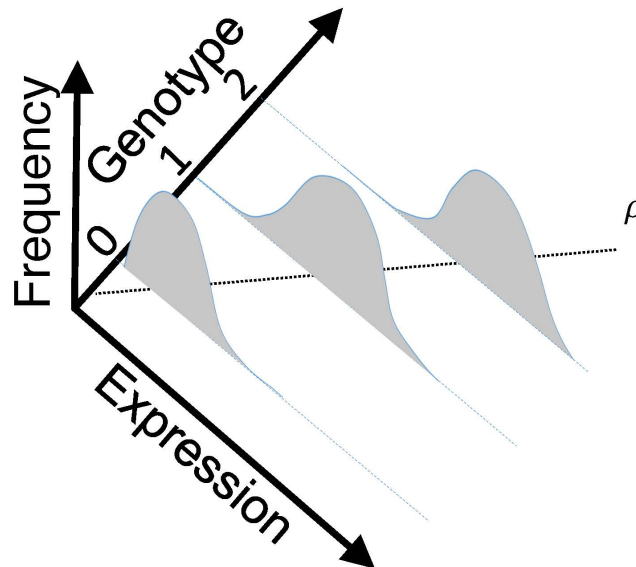




eQTL Mapping Using RNA-Seq Data

- eQTLs are genomic loci that contribute to variation in mRNA expression levels
- eQTLs provide insights on transcription regulation, and the molecular basis of phenotypic outcomes
- eQTL mapping can be done with RNA-Seq data

[*Biometrics* 68(1) 1–11]



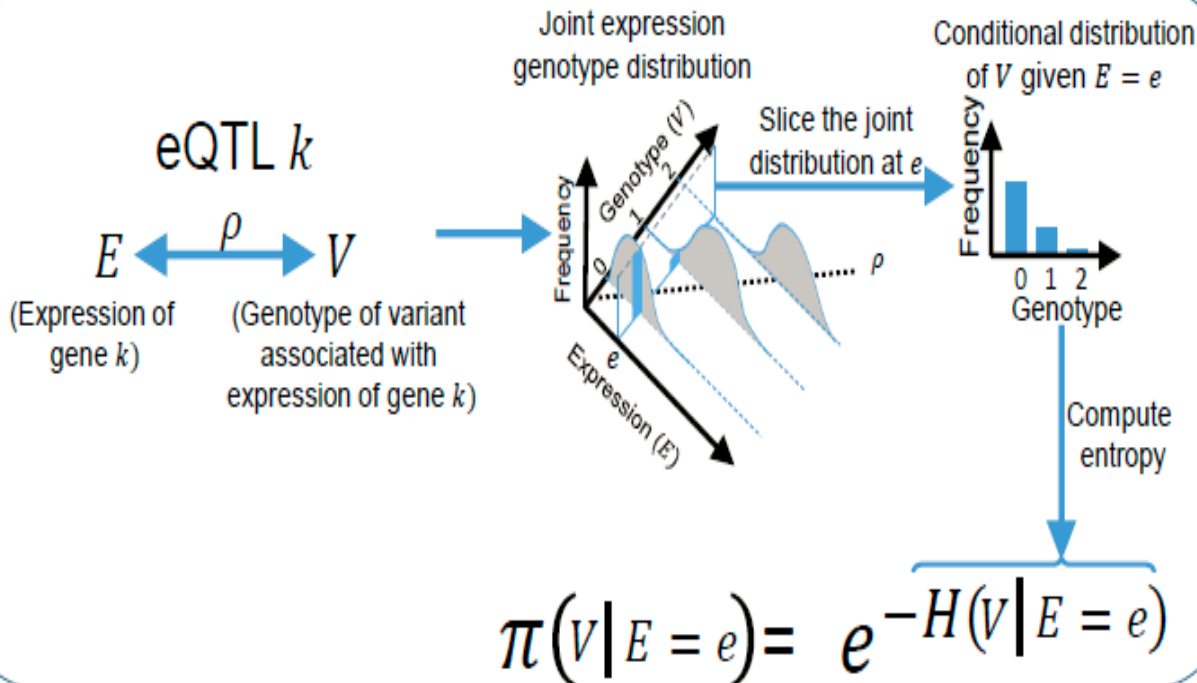
Information Content and Predictability

$$ICI \left(\begin{array}{l} \text{Individual has variant} \\ \text{genotypes } g_1, g_2, \dots, g_n \\ \text{for variants } V_1, V_2, \dots, V_n \end{array} \right) = \log \left(\frac{1}{\text{Frequency of } V_1 \text{ genotype}} \right) + \log \left(\frac{1}{\text{Frequency of } V_2 \text{ genotype}} \right) + \dots + \log \left(\frac{1}{\text{Frequency of } V_n \text{ genotype}} \right)$$

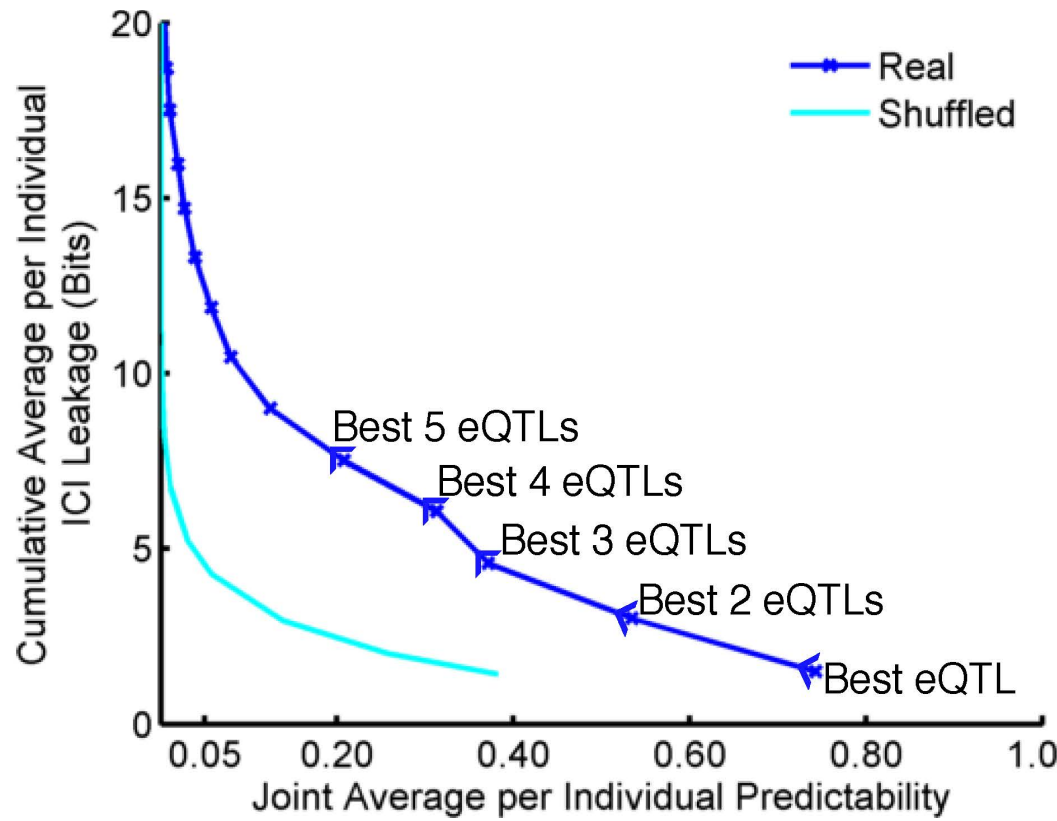
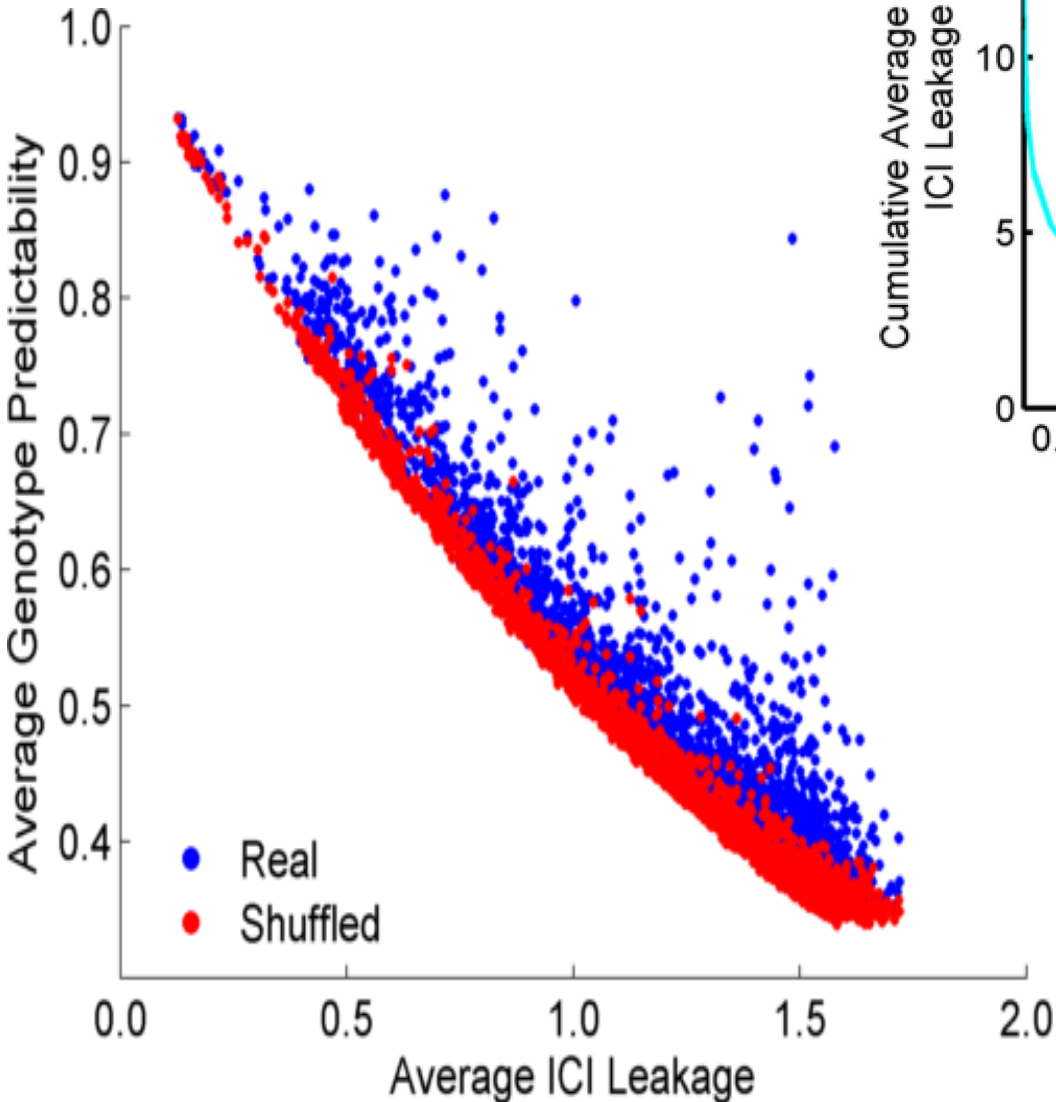
$g_1 = 2$ $g_2 = 1$ $g_n = 2$

V_1 genotype frequencies V_2 genotype frequencies V_n genotype frequencies

- Naive measure of information (no LD, distant correlations, pop. struc., &c)
- Higher frequency: Lower ICI
- Additive for multiple variants

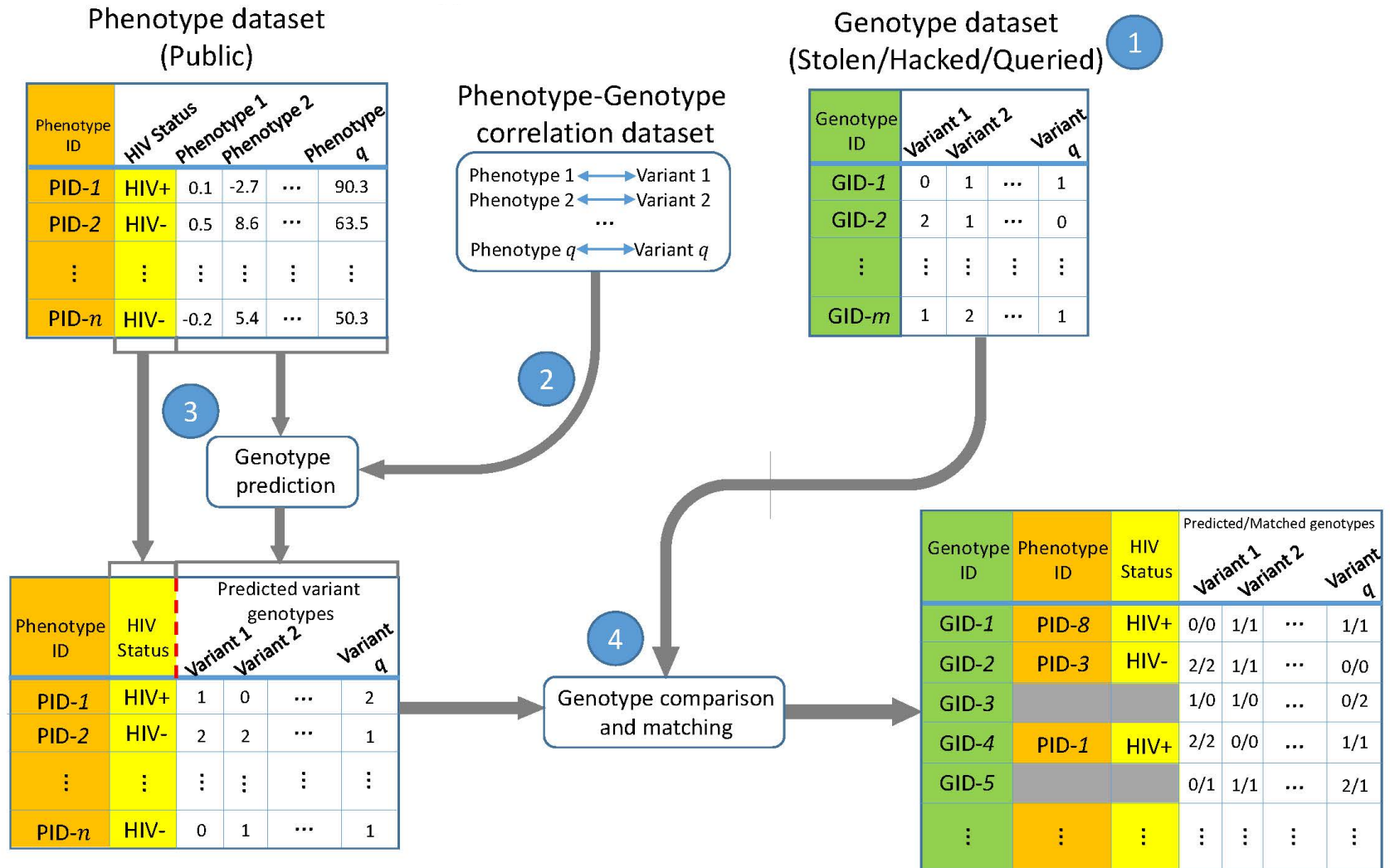


- Condition specific entropy
- Higher cond. entropy: Lower predictability
- Additive for multiple eQTLs



ICI Leakage versus Genotype Predictability

Linking Attack Scenario



Linking Attacks: Case of Netflix Prize



Names available for many users!

User (ID)	Movie (ID)	Date of Grade	Grade [1,2,3,4,5]
NTFLX-0	NTFLX-19	10/12/2008	1
NTFLX-1	NTFLX-116	4/23/2009	3
NTFLX-2	NTFLX-92	5/27/2010	2
NTFLX-1	NTFLX-666	6/6/2016	5
...
...

User (ID)	Movie (ID)	Date of Grade	Grade [0-10]
IMDB-0	IMDB-173	4/20/2009	5
IMDB-1	IMDB-18	10/18/2008	0
IMDB-2	IMDB-341	5/27/2010	-
...
...
...

- Many users are shared
- The grades of same users are correlated
- A user grades one movie around the same date in two databases

Anonymized Netflix Prize Training Dataset
made available to contestants

Linking Attacks: Case of Netflix Prize



User (ID)	Movie (ID)	Date of Grade	Grade [1,2,3,4,5]
NTFLX-0	NTFLX-19	10/12/2008	1
NTFLX-1	NTFLX-116	4/23/2009	3
NTFLX-2	NTFLX-92	5/27/2010	2
NTFLX-1	NTFLX-666	6/6/2016	5
...
...

User (ID)	Movie (ID)	Date of Grade	Grade [0-10]
IMDB-0	IMDB-173	4/20/2009	5
IMDB-1	IMDB-18	10/18/2008	0
IMDB-2	IMDB-341	5/27/2010	-
...
...
...

- Many users are shared
- The grades of same users are correlated
- A user grades one movie around the same date in two databases
- IMDB users are public
- NetFLIX and IMdB moves are public

Linking Attacks: Case of Netflix Prize

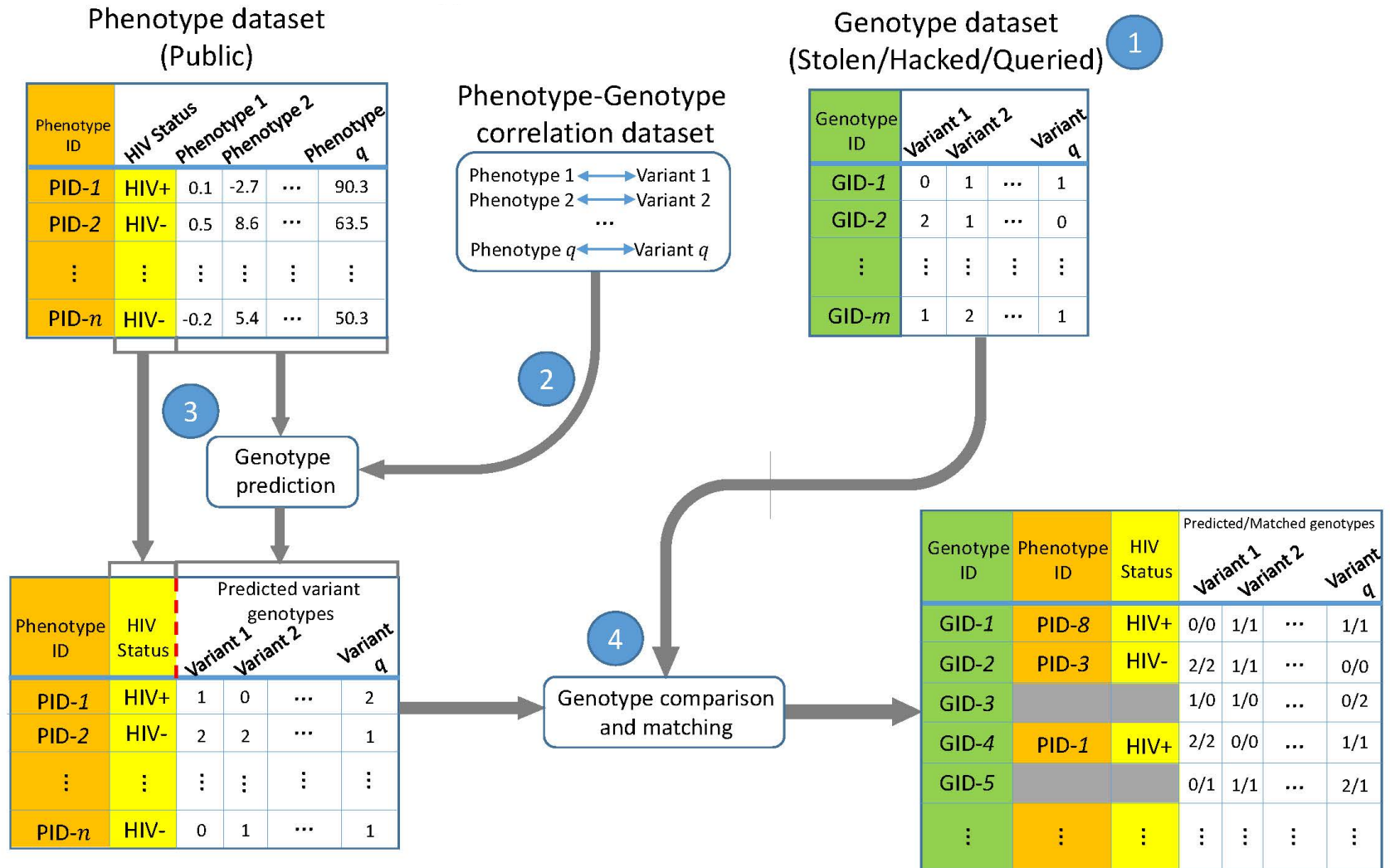


User (ID)	Movie (ID)	Date of Grade	Grade [1,2,3,4,5]
NTFLX-0	NTFLX-19	10/12/2008	1
NTFLX-1	NTFLX-116	4/23/2009	3
NTFLX-2	NTFLX-92	5/27/2010	2
NTFLX-1	NTFLX-666	6/6/2016	5
...
...

User (ID)	Movie (ID)	Date of Grade	Grade [0-10]
IMDB-0	IMDB-173	4/20/2009	5
IMDB-1	IMDB-18	10/18/2008	0
IMDB-2	IMDB-341	5/27/2010	-
...
...
...

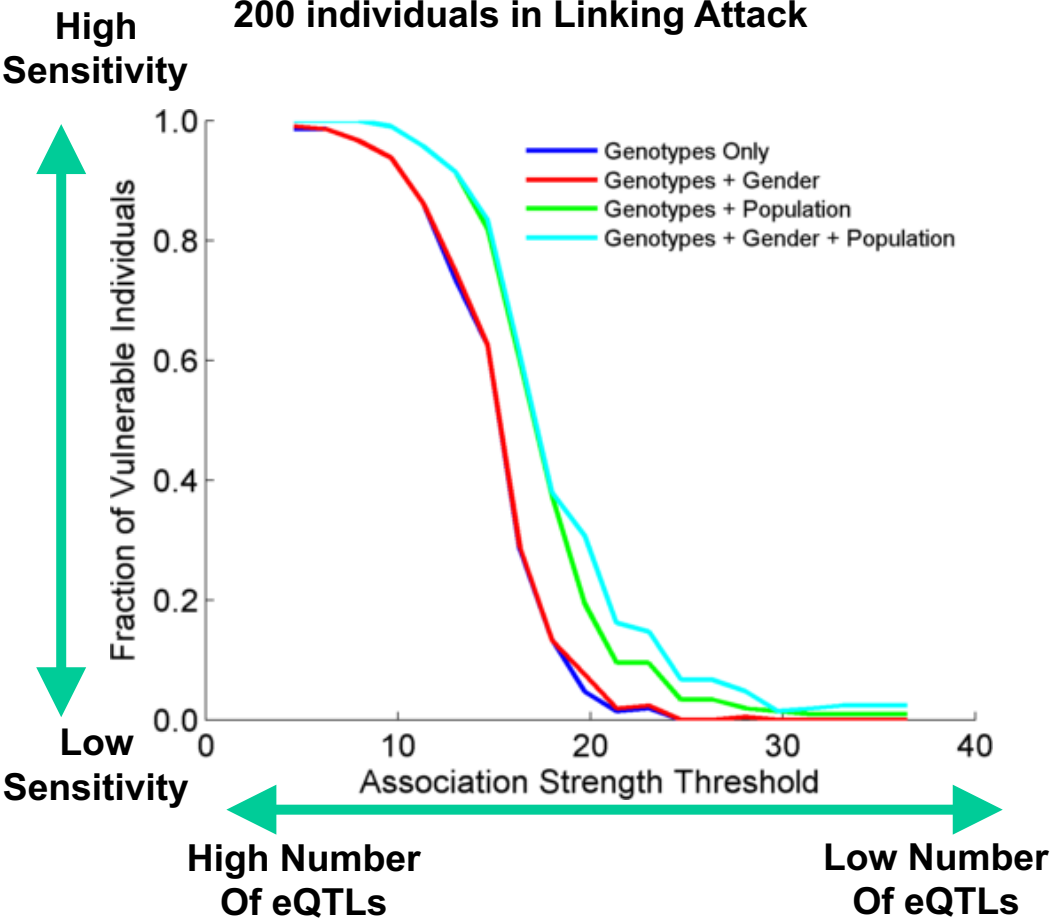
- Many users are shared
- The grades of same users are correlated
- A user grades one movie around the same date in two databases

Linking Attack Scenario



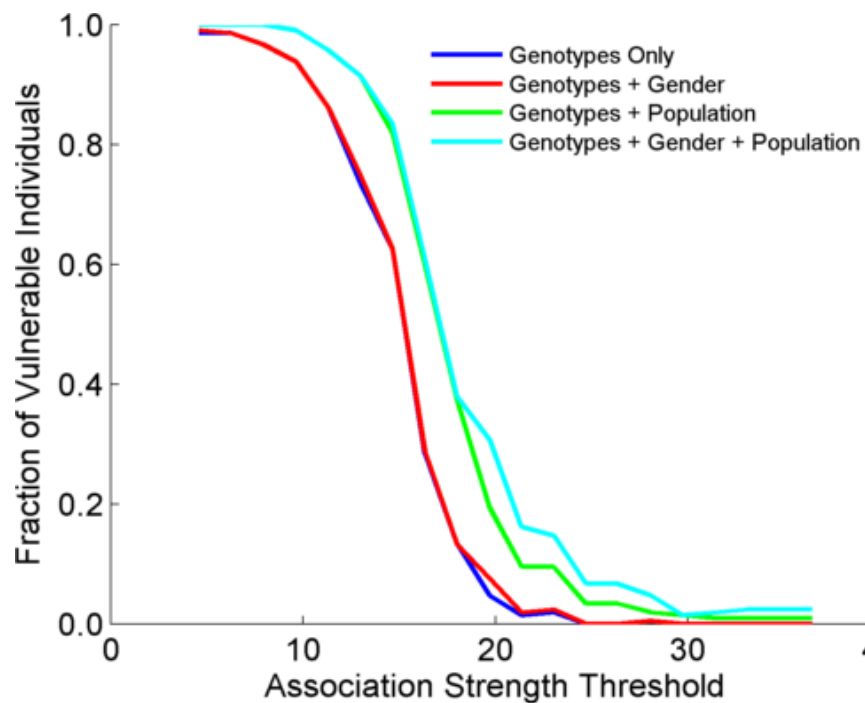
Success in Linking Attack with Extremity based Genotype Prediction

200 individuals eQTL Discovery
200 individuals in Linking Attack

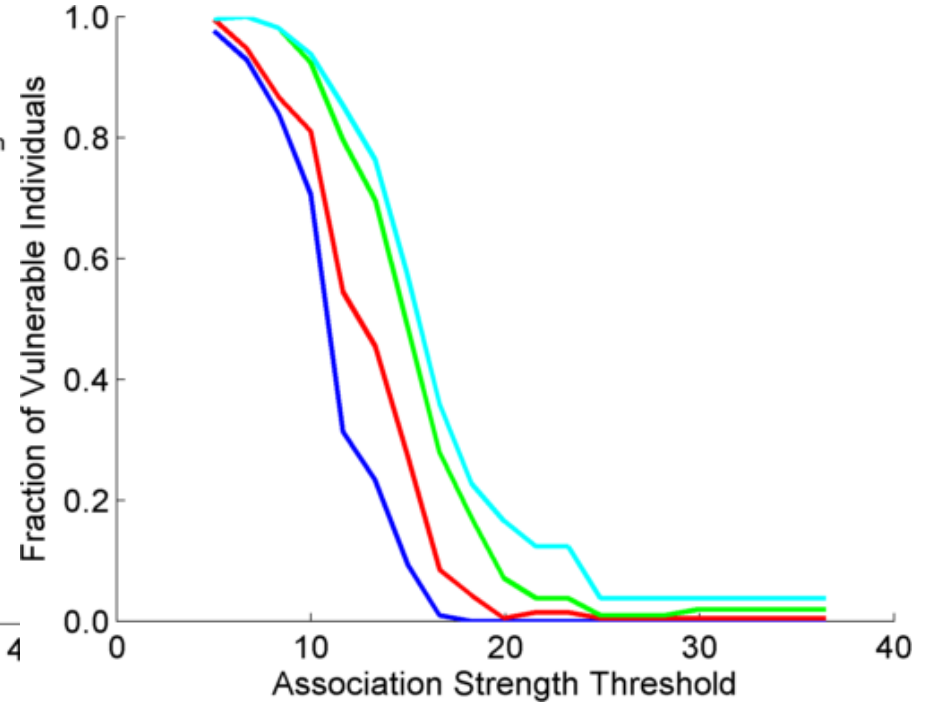


Success in Linking Attack with Extremity based Genotype Prediction

200 individuals eQTL Discovery
200 individuals in Linking Attack



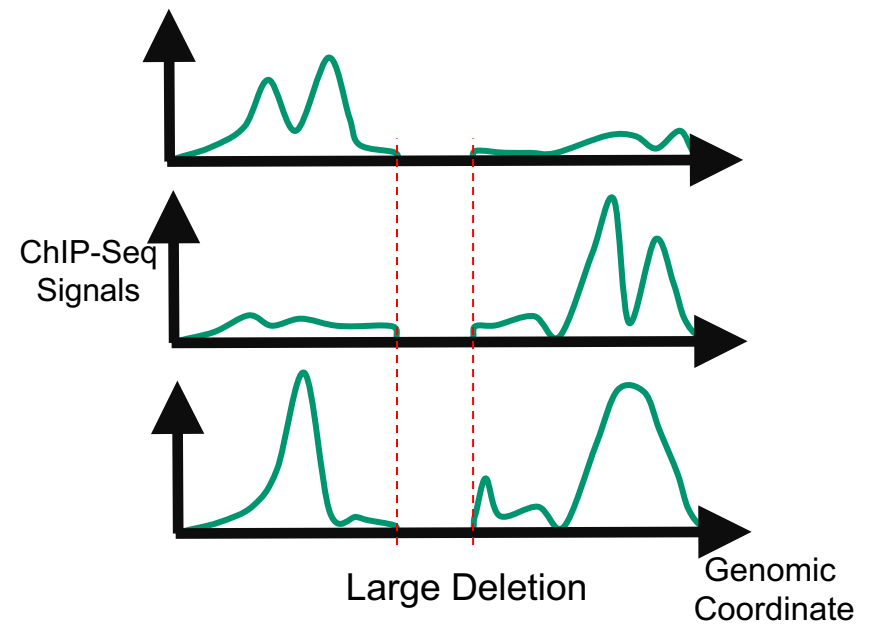
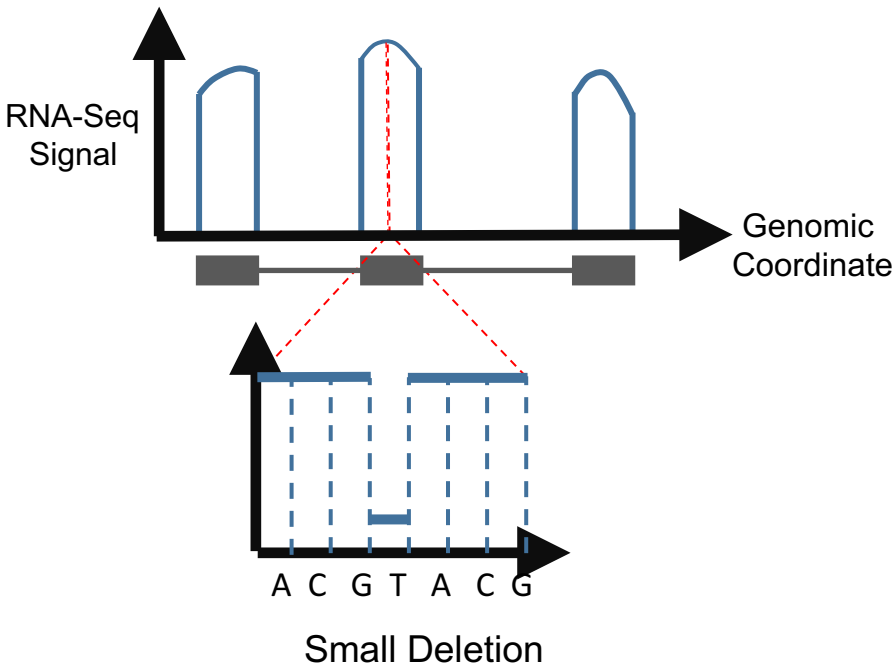
200 individuals eQTL Discovery
100,200 individuals in Linking Attack



Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

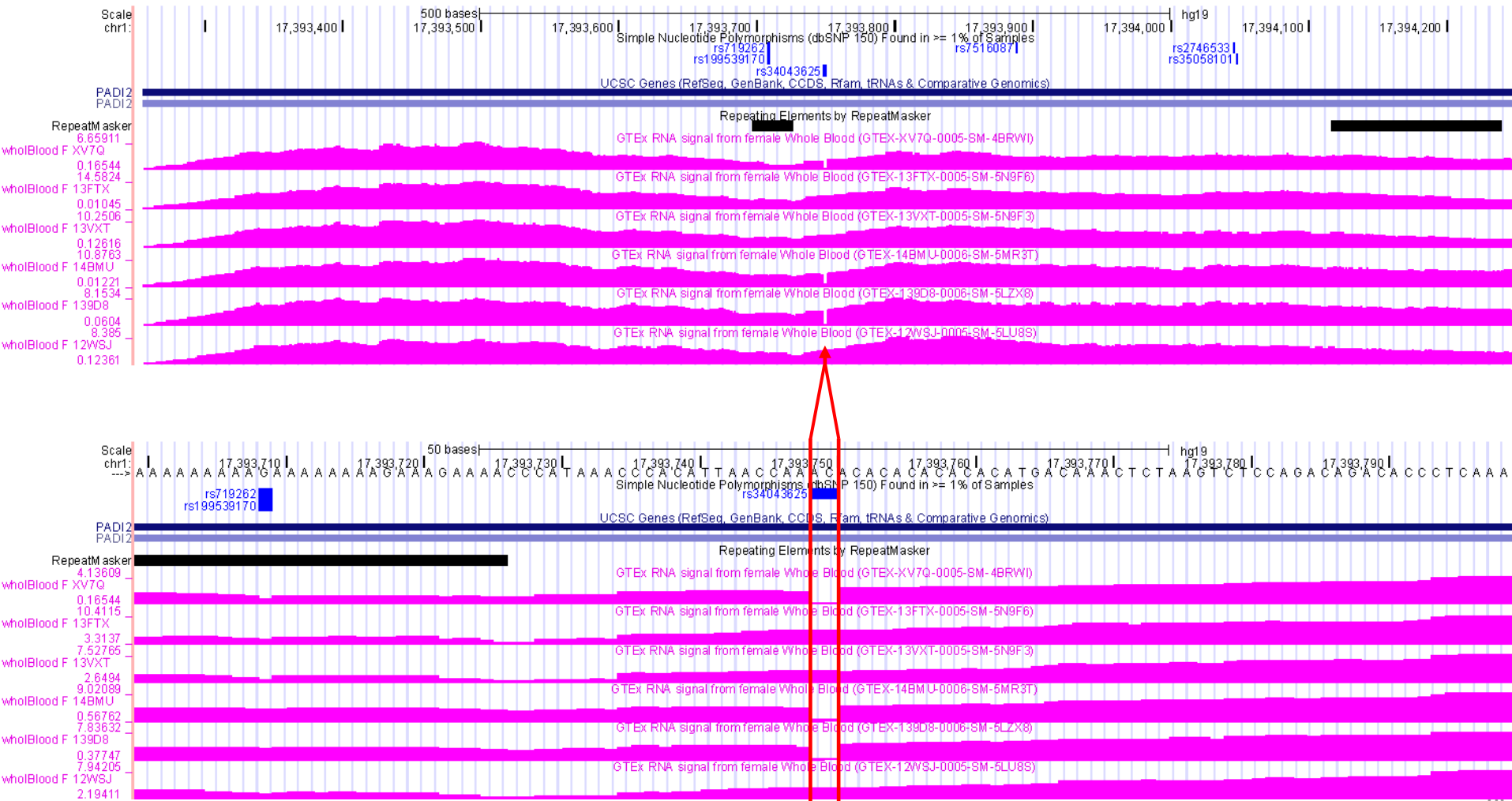
- *[Core]* **PsychENCODE:**
Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- *[Exhaust]* **Privacy** & RNA-seq
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs:** Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles:** Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

Detection & Genotyping of small & large SV deletions from signal profiles

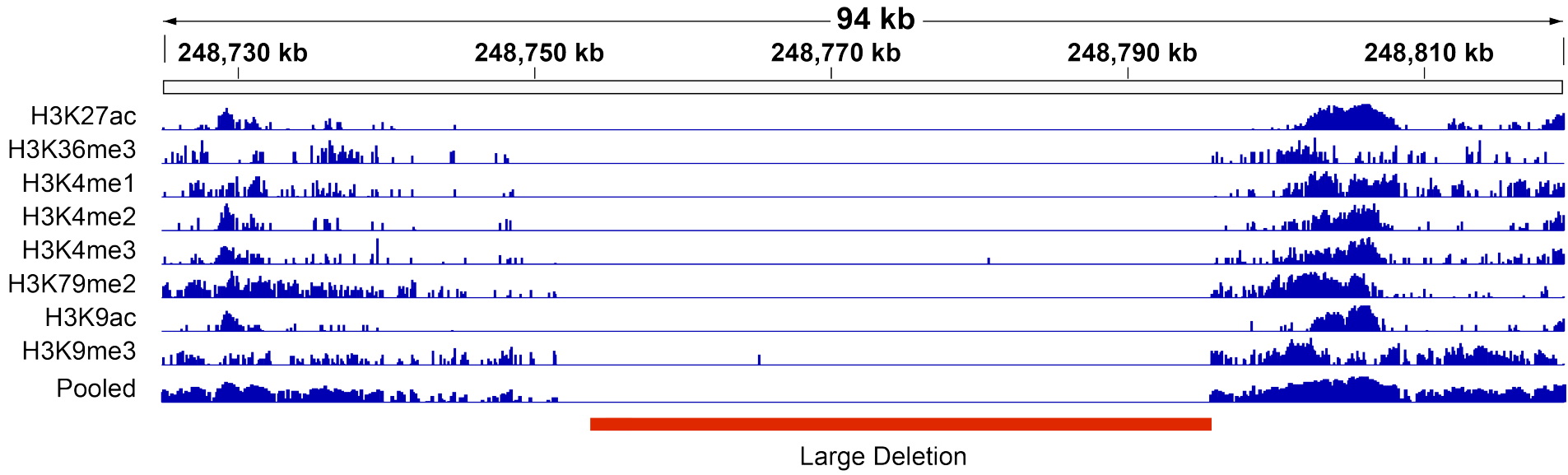


RNA-seq also shows large deletions

Example of Small Deletion Evident in Signal Profile

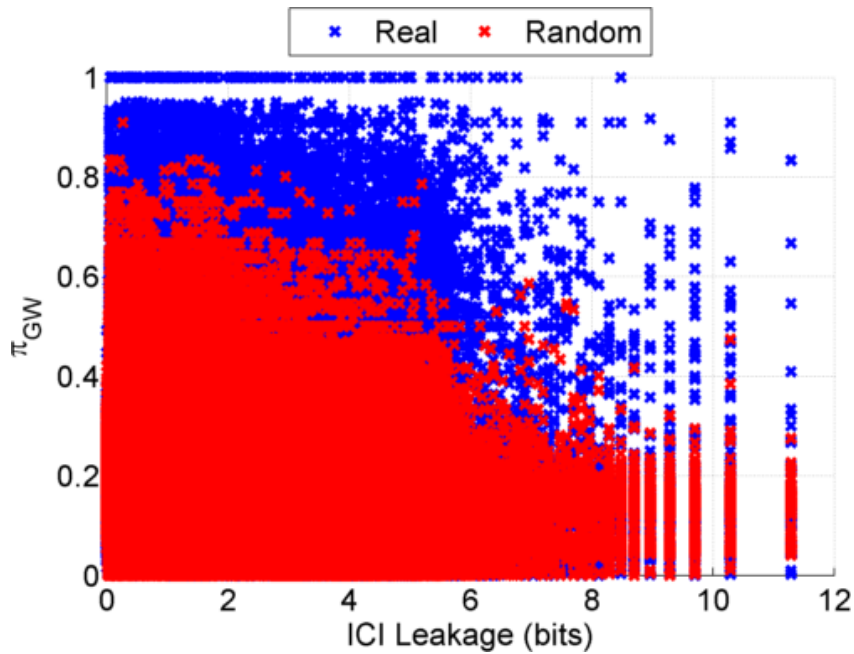


Example of Large Deletion Evident in Signal Profile

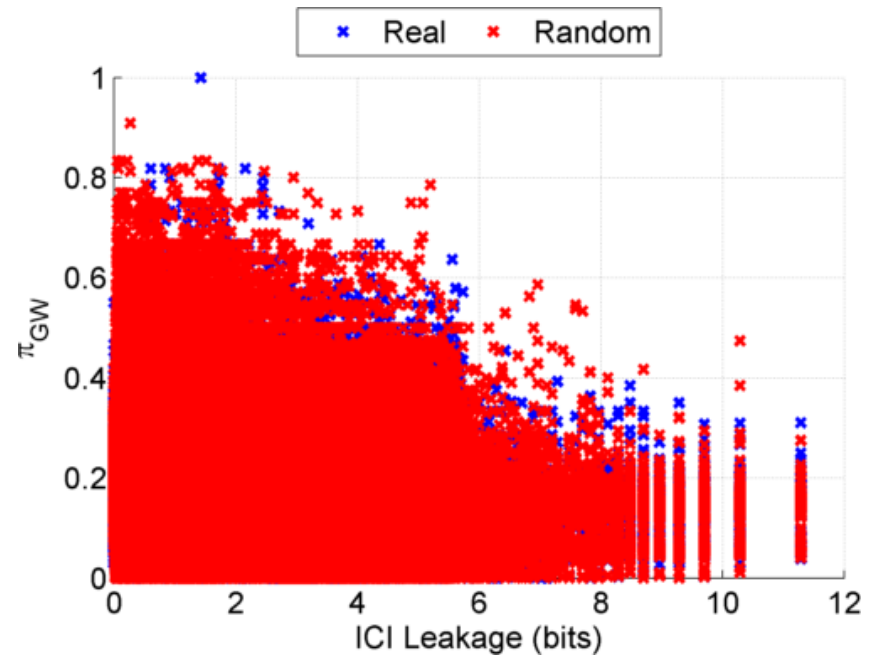


Information Leakage from SV Deletions

a) Before Anonymization

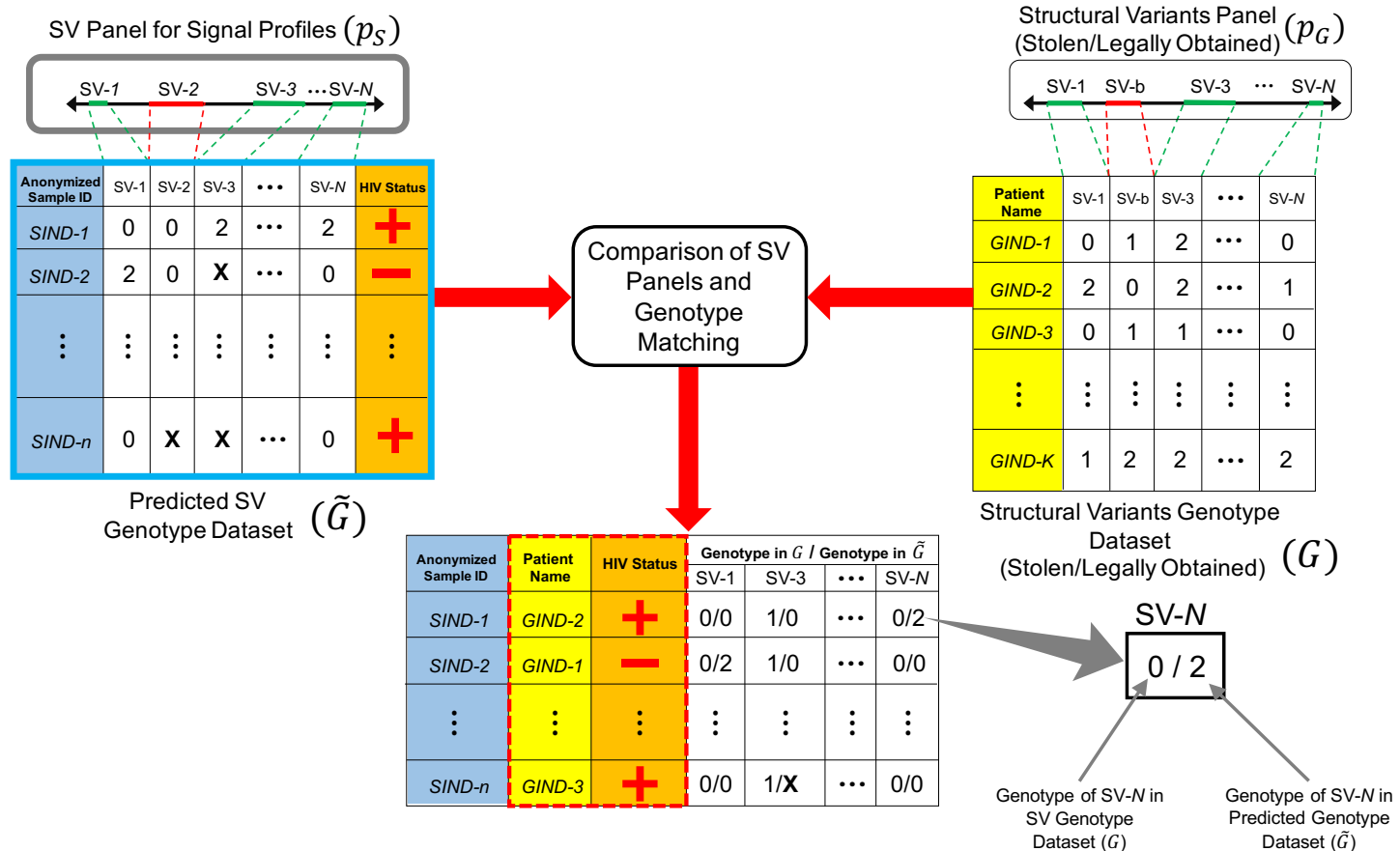


b) After Anonymization

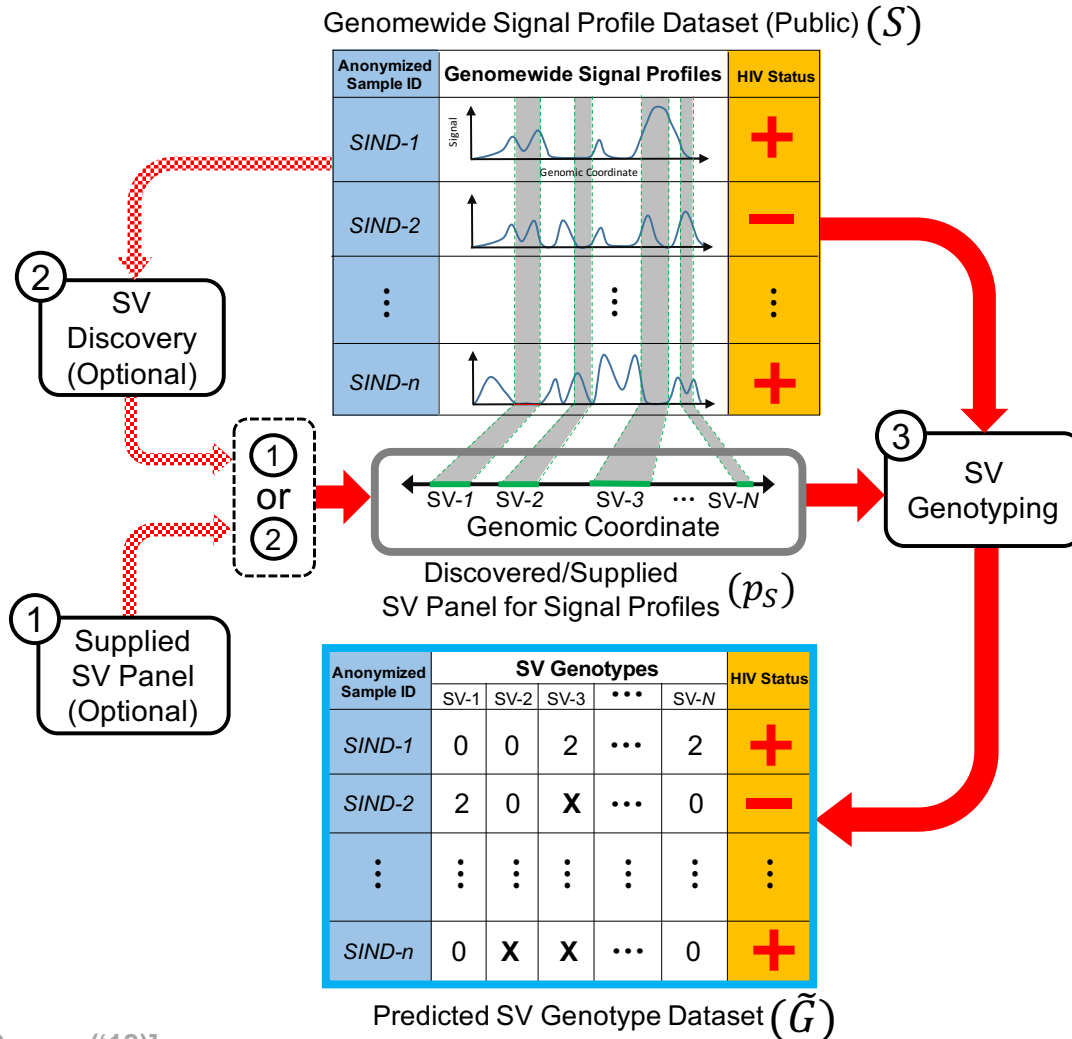


Simple anonymization procedure (filling in deletion by value at endpoints) has dramatic effect

Another type of Linking Attack: Linking based on SV Genotyping

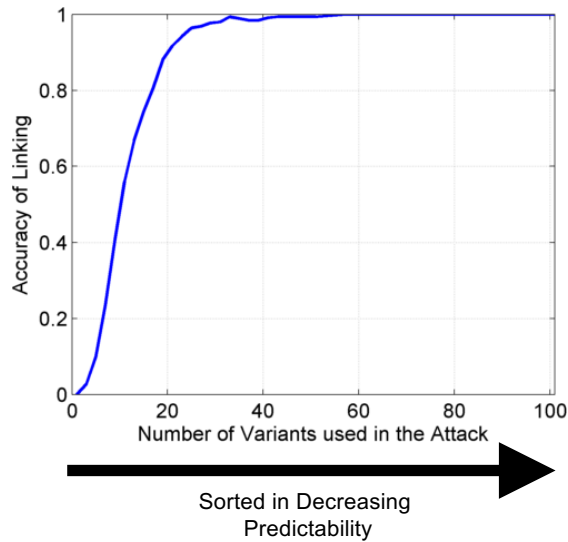


Another type of Linking Attack: First Doing SV Genotyping

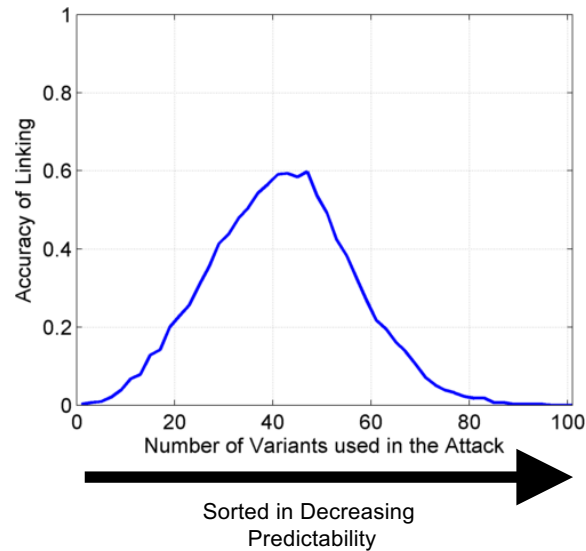


Linking Attack Based on SV Deletions in gEUVADIS Dataset

c) Genotyping
(1kG MAF>0.01)



d) Discovery + Genotyping



Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

- *[Core]* **PsychENCODE**: Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- *[Exhaust]* **Privacy** & RNA-seq
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs**: Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles**: Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

Results of the PsychENCODE consortium on using population-scale functional genomics to understand neuropsychiatric disease & privacy aspects of this type of study

- **[Core] PsychENCODE:**
Population-level analysis of functional genomics data related to mental illness
 - Consortium intro & construction of an adult brain resource w/ 1866 individuals & full developmental time-course
 - Using the changing proportions of cell types (via **single-cell deconvolution**) to account for expression variation across a population, disorders & development
 - Generation of a large **QTL resource** (~2.5M eQTLs + cQTLs & fQTLs)
 - **Brain regulatory network** construction using QTLs, Hi-C & activity relationships + defining ~79K PFC enhancers. Using this to link SCZ GWAS SNPs to genes.
 - Embedding the reg. network in a **deep-learning model** (DSPN) to predict psychiatric disease from genotype & transcriptome. Using this to prioritize particular pathways & genes.
- **[Exhaust] Privacy & RNA-seq**
 - Introduction to Genomic Privacy
 - The dilemma: The genome as fundamental, inherited info that's very private v. need for large-scale mining for med. research
 - 2-sided nature of functional genomics data presents particularly tricky privacy issues
 - **eQTLs:** Quantifying & removing further variant info from expression levels w/ ICI & predictability. Instantiating a practical linking attack w/ noisy quasi-identifiers
 - **Signal Profiles:** Manifest appreciable leakage from large & small deletions. Linking attacks possible but additional complication of SV discovery in addition to genotyping

PsychENCODE Acknowledgment



“Adult Capstone” Team – 1 of 3 capstones

Daifeng Wang, Shuang Liu, Jonathan Warrell, Hyejung Won, Xu Shi, Fabio Navarro, Declan Clarke, Mengting Gu, Prashant Emani,

Yucheng T. Yang, Min Xu, Michael Gandal, Shaoke Lou, Jing Zhang, Jonathan J. Park, Chengfei Yan, Suhn Kyong Rhie, Kasidet Manakongtreecheep, Holly Zhou, Aparna Nathan, Mette Peters, Eugenio Mattei, Dominic Fitzgerald, Tonya Brunetti, Jill Moore, Yan Jiang, Kiran Girdhar, Gabriel Hoffman, Selim Kalayci, Zeynep Hulya Gumus

PsychENCODE Consortium,

Panos Roussos, Schahram Akbarian, Andrew E. Jaffe, Kevin White, Zhiping Weng, Nenad Sestan,

Daniel H. Geschwind, James A. Knowles

Dedicated to Pamela Sklar

- Geetha Senthil
- Lora Bingaman
- David Panchision
- Alexander Arguello
- Thomas Lehner

The PsychENCODE Consortium: Allison E Ashley-Koch, Duke University; Gregory E Crawford, Duke University; Melanie E Garrett, Duke University; Lingyun Song, Duke University; Alexias Safi, Duke University; Graham D Johnson, Duke University; Gregory A Wray, Duke University; Timothy E Reddy, Duke University; Fernando S Goes, Johns Hopkins University; Peter Zandi, Johns Hopkins University; Julien Bryois, Karolinska Institutet; Andrew E Jaffe, Lieber Institute for Brain Development; Amanda J Price, Lieber Institute for Brain Development; Nikolay A Ivanov, Lieber Institute for Brain Development; Leonardo Collado-Torres, Lieber Institute for Brain Development; Thomas M Hyde, Lieber Institute for Brain Development; Emily E Burke, Lieber Institute for Brain Development; Joel E Kleiman, Lieber Institute for Brain Development; Ran Tao, Lieber Institute for Brain Development; Joo Heon Shin, Lieber Institute for Brain Development; Schahram Akbarian, Icahn School of Medicine at Mount Sinai; Kiran Girdhar, Icahn School of Medicine at Mount Sinai; Yan Jiang, Icahn School of Medicine at Mount Sinai; Marija Kundakovic, Icahn School of Medicine at Mount Sinai; Leanne Brown, Icahn School of Medicine at Mount Sinai; Bibi S Kassim, Icahn School of Medicine at Mount Sinai; Royce B Park, Icahn School of Medicine at Mount Sinai; Jennifer R Wiseman, Icahn School of Medicine at Mount Sinai; Elizabeth Zharovsky, Icahn School of Medicine at Mount Sinai; Rivka Jacobov, Icahn School of Medicine at Mount Sinai; Olivia Devillers, Icahn School of Medicine at Mount Sinai; Elie Flatow, Icahn School of Medicine at Mount Sinai; Gabriel E Hoffman, Icahn School of Medicine at Mount Sinai; Barbara K Lipska, Human Brain Collection Core, National Institutes of Health, Bethesda, MD; David A Lewis, University of Pittsburgh; Vahram Haroutunian, Icahn School of Medicine at Mount Sinai and James J Peters VA Medical Center; Chang-Gyu Hahn, University of Pennsylvania; Alexander W Charney, Mount Sinai; Stella Dracheva, Mount Sinai; Alexey Kozlenkov, Mount Sinai; Judson Belmont, Icahn School of Medicine at Mount Sinai; Diane DelValle, Icahn School of Medicine at Mount Sinai; Nancy Francoeur, Icahn School of Medicine at Mount Sinai; Evi Hadjimichael, Icahn School of Medicine at Mount Sinai; Dalila Pinto, Icahn School of Medicine at Mount Sinai; Harm van Bakel, Icahn School of Medicine at Mount Sinai; Panos Roussos, Mount Sinai; John F Fullard, Mount Sinai; Jaroslav Bendl, Mount Sinai; Mads E Hauberg, Mount Sinai; Lara M Mangravite, Sage Bionetworks; Mette A Peters, Sage Bionetworks; Yooree Chae, Sage Bionetworks; Junmin Peng, St. Jude Children's Hospital; Mingming Niu, St. Jude Children's Hospital; Xusheng Wang, St. Jude Children's Hospital; Maree J Webster, Stanley Medical Research Institute; Thomas G Beach, Banner Sun Health Research Institute; Chao Chen, Central South University; Yi Jiang, Central South University; Rujia Dai, Central South University; Annie W Shieh, SUNY Upstate Medical University; Chunyu Liu, SUNY Upstate Medical University; Kay S. Grennan, SUNY Upstate Medical University; Yan Xia, SUNY Upstate Medical University/Central South University; Ramu Vadukapuram, SUNY Upstate Medical University; Yongjun Wang, Central South University; Dominic Fitzgerald, The University of Chicago; Lijun Cheng, The University of Chicago; Miguel Brown, The University of Chicago; Mimi Brown, The University of Chicago; Tonya Brunetti, The University of Chicago; Thomas Goodman, The University of Chicago; Majd Alsayed, The University of Chicago; Michael J Gandal, University of California, Los Angeles; Daniel H Geschwind, University of California, Los Angeles; Hyejung Won, University of California, Los Angeles; Damon Poliodakakis, University of California, Los Angeles; Brie Wamsley, University of California, Los Angeles; Jiani Yin, University of California, Los Angeles; Tarik Hadzic, University of California, Los Angeles; Luis De La Torre Ubieta, UCLA; Vivek Swarup, University of California, Los Angeles; Stephan J Sanders, University of California, San Francisco; Matthew W State, University of California, San Francisco; Donna M Werling, University of California, San Francisco; Joon-Yong An, University of California, San Francisco; Brooke Sheppard, University of California, San Francisco; A Jeremy Willsey, University of California, San Francisco; Kevin P White, The University of Chicago; Mohana Ray, The University of Chicago; Gina Giase, SUNY Upstate Medical University; Amira Kefi, University of Illinois at Chicago; Eugenio Mattei, University of Massachusetts Medical School; Michael Purcaro, University of Massachusetts Medical School; Zhiping Weng, University of Massachusetts Medical School; Jill Moore, University of Massachusetts Medical School; Henry Pratt, University of Massachusetts Medical School; Jack Huey, University of Massachusetts Medical School; Tyler Borrmann, University of Massachusetts Medical School; Patrick F Sullivan, University of North Carolina - Chapel Hill; Paola Giusti-Rodriguez, University of North Carolina - Chapel Hill; Yunjung Kim, University of North Carolina - Chapel Hill; Patrick Sullivan, University of North Carolina - Chapel Hill; Jin Szatkiewicz, University of North Carolina - Chapel Hill; Suhn Kyong Rhie, University of Southern California; Christopher Armoskus, University of Southern California; Adrian Camarena, University of Southern California; Peggy J Farnham, University of Southern California; Valeria N Spitsyna, University of Southern California; Heather Witt, University of Southern California; Shannon Schreiner, University of Southern California; Oleg V Evgrafov, SUNY Downstate Medical Center; James A Knowles, SUNY Downstate Medical Center; Mark Gerstein, Yale University; Shuang Liu, Yale University; Daifeng Wang, Stony Brook University; Fabio C. P. Navarro, Yale University; Jonathan Warrell, Yale University; Declan Clarke, Yale University; Prashant S. Emani, Yale University; Mengting Gu, Yale University; Xu Shi, Yale University; Min Xu, Yale University; Yucheng T. Yang, Yale University; Robert R. Kitchen, Yale University; Gamze Guirsoy, Yale University; Jing Zhang, Yale University; Becky C Carlyle, Yale University; Angus C Nairn, Yale University; Mingfeng Li, Yale University; Sirisha Pochareddy, Yale University; Nenad Sestan, Yale University; Mario Skarica, Yale University; Zhen Li, Yale University; Andre M.M. Sousa, Yale University; Gabriel Santpere, Yale University; Jinmyung Choi, Yale University; Ying Zhu, Yale University; Tianliuyun Gao, Yale University; Daniel J Miller, Yale University; Adriana Cherskov, Yale University; Mo Yang, Yale University; Anahita Amiri, Yale University; Gianfilippo Coppola, Yale University; Jessica Mariani, Yale University; Soraya Scuderi, Yale University; Anna Szekely, Yale University; Flora M Vaccarino, Yale University; Feinan Wu, Yale University; Sherman Weissman, Yale University; Tanmoy Roychowdhury, Mayo Clinic Rochester; Alexej Abyzov, Mayo Clinic Rochester;

Developmental Capstone

- **M Li, G Santpere, Y Imamura Kawasawa, OV Evgrafov, FO Gulden, S Pochareddy, SM Sunkin, Z Li, Y Shin,**

Y Zhu, AMM Sousa, DM Werling, RR Kitchen, HJ Kang, M Pletikos, J Choi, S Muchnik, X Xu, D Wang, B Lorente-Galdos, S Liu, P Giusti-Rodriguez, H Won, CA de Leeuw, AF Pardini, BrainSpan Consortium,

PsychENCODE Consortium, PsychENCODE Developmental Subgroup,

M Hu, F Jin, Y Li, MJ Owen, MC O'Donovan, JTR Walters, D Posthuma, MA Reimers, P Levitt, DR Weinberger, TM Hyde, JE Kleinman, DH Geschwind, MJ Hawrylycz, MW State, SJ Sanders, PF Sullivan,

ES Lein, JA Knowles, N Sestan

psychencode.org



A **Harmanci**,
D Greenbaum,
G Gürsoy

papers.gersteinlab.org/subject/privacy

PrivaSig.gersteinlab.org

PrivaSeq.gersteinlab.org

Hiring Postdocs. See
JOBS.gersteinlab.org !

Info about content in this slide pack

- General PERMISSIONS
 - This Presentation is copyright Mark Gerstein, Yale University, 2019.
 - Please read permissions statement at www.gersteinlab.org/misc/permissions.html .
 - Feel free to use slides & images in the talk with PROPER acknowledgement (via citation to relevant papers or link to gersteinlab.org).
 - Paper references in the talk were mostly from Papers.GersteinLab.org.
- PHOTOS & IMAGES. For thoughts on the source and permissions of many of the photos and clipped images in this presentation see <http://streams.gerstein.info> .
 - In particular, many of the images have particular EXIF tags, such as kwpotppt , that can be easily queried from flickr, viz: <http://www.flickr.com/photos/mbgmbg/tags/kwpotppt>

Extra

