

Data analytics approaches to enable EWAS

Chirag J Patel and Nam Pho Emory Exposome Workshop 06/16/16



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Extensible & open-source analytics software library (XWAS R package)

Freely available exposome data for your research (NHANES: 40,000 individuals and 1,000 variables)

Computer "environment" to conduct EWASs (Docker container in RStudio)

Materials for teaching and demonstration



http://bit.ly/exposome-analytics-course

Please let us know if you are using the resources (or provide feedback)!











Real quick: What is the *exposome*? What is the *phenome*?

exposome

<u>internal</u> lead (serum) nutrients (serum) infection (urine) *metabolome* <u>external</u> geography air pollution income

phenome

<u>function</u> expression telomeres *metabolome* diseases diabetes cancer heart disease

Exposome associated with the **phenome**?and vice versa?



Analytic **tools** and big data **infrastructure** required to associate *exposome* with *phenome!*

We can learn a thing or two from *genomics* investigation...



e.g., GWAS

Big data approaches fueled discovery of genetic variants in disease (example: genome-wide association [**GWAS**])



GWAS in Type 2 Diabetes Voight et al, Nature Genetics 2012 N=8K T2D, 39K Controls

A search engine for robust, reproducible genotypephenotype associations...

There are *non-trivial* data analytic challenges in searching for exposome-phenome associations!

JAMA 2014 Pac Symp Biocomp 2015 Dense correlational web!

what causes what?

confounding bias?

JAMA 2014 Pac Symp Biocomp 2015





http://bit.ly/globebrowse

Pac Symp Biocomput. 2015 JECH. 2015 *Multiplicity*: how to determine signal from noise? *type 1 error* (spurious findings)

Suppose you are testing 1000 exposures in case-control study (disease vs. healthy)...

... and there were no difference between the cases and controls...

...how many findings would be "significant" at a p-value threshold of 0.05 (due to chance)?

Regime of multiple tests and "signal to noise": Histogram of p-values in 2 scenarios: no difference and 5% different





(5% true associations)

Estimating the deviation from null: **QQplot:** -log10(pvalues) in the null and EWAS distributions



The tension between type 1 and type 2 errors: *Power* and *replication* for robust associations!



Discovery sample sizes must be large to overcome multiple testing and mitigate winner's curse

Replication sample size must be large to detect association

What will the *exposome* data structure look like?:

a *high-dimensioned 3D* matrix of (1) *exposure* measurements on (2) *individuals* as a function of (3) *time*



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A schematic of a data-driven search for *exposome-phenome* associations...



Time for you to give it a try!

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Fully merged dataset: National Health and Nutrition Examination Survey



since the 1960s now biannual: 1999 onwards 10,000 participants per survey

>250 exposures (serum + urine)

>85 quantitative clinical traits (e.g., serum glucose, lipids, body mass index)

Death index linkage (cause of death)



Ready to analyze! N=41K with >1000 variables (let us know; we can give you a DOI)

13 **EWAS**-related manuscripts

preterm birth type 2 diabetes type 2 diabetes genetics lipids blood pressure income mortality **telomere length** methodology (5)

http://bit.ly/ewas_nhanes

Associations in *Telomere Length*: Can you identify the associations in this graph?



median N=3000; N range: 300-7000

Associations in *Telomere Length*: Can you identify the associations in this graph?

Nam will show you how!

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