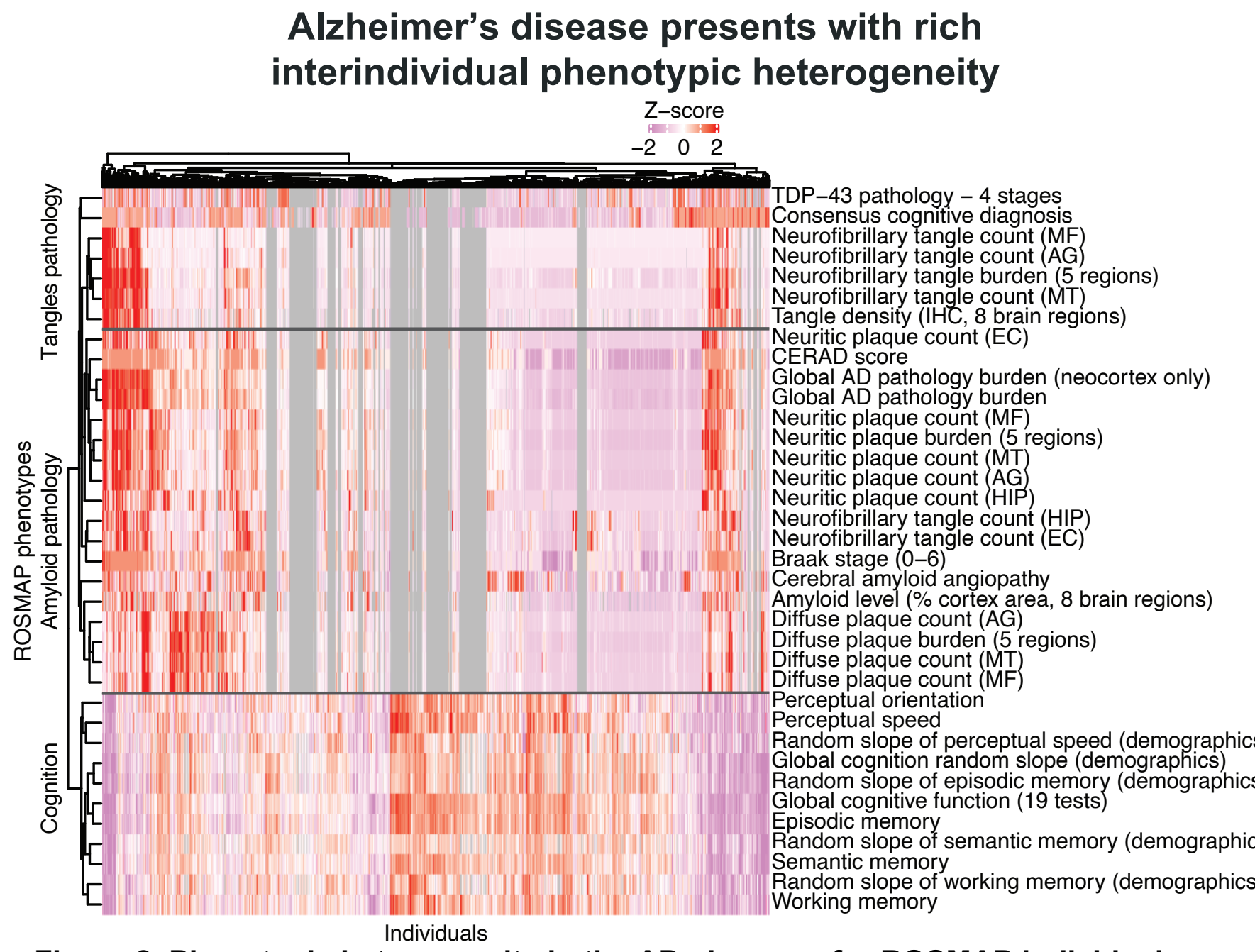
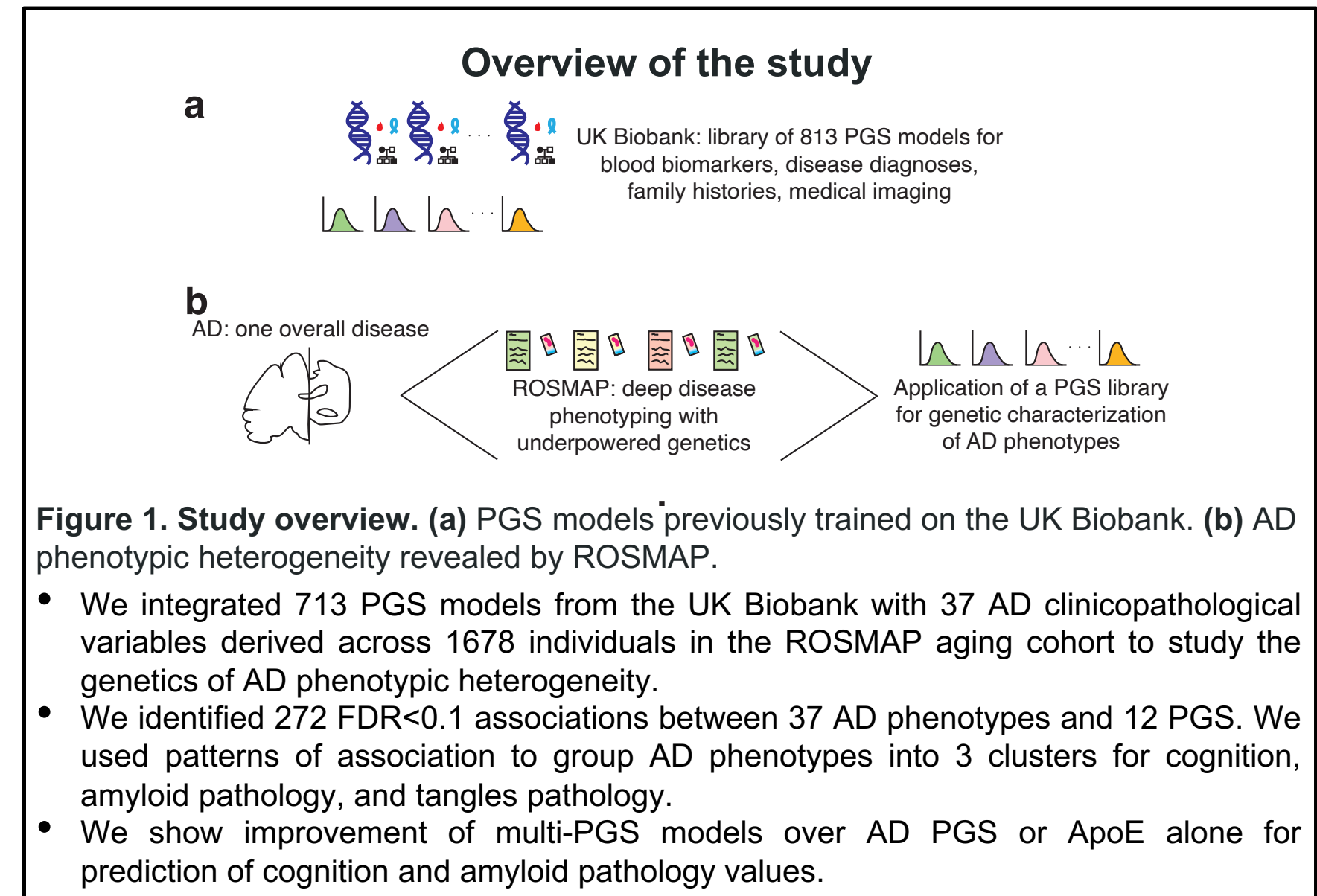


William F. Li<sup>1,2,3,†</sup>, David A. Bennett<sup>4,5</sup>, Manolis Kellis<sup>1,2,\*</sup>, Yosuke Tanigawa<sup>1,2,6,\*</sup>

<sup>1</sup>Computer Science and Artificial Intelligence Laboratory, MIT; <sup>2</sup>Broad Institute of MIT and Harvard; <sup>3</sup>Harvard/MIT MD-PhD Program, Harvard Medical School;

<sup>4</sup>Rush Alzheimer's Disease Center, Rush University Medical Center; <sup>5</sup>Department of Neurological Sciences, Rush University Medical Center; <sup>6</sup>Department of Bioengineering, UCLA;

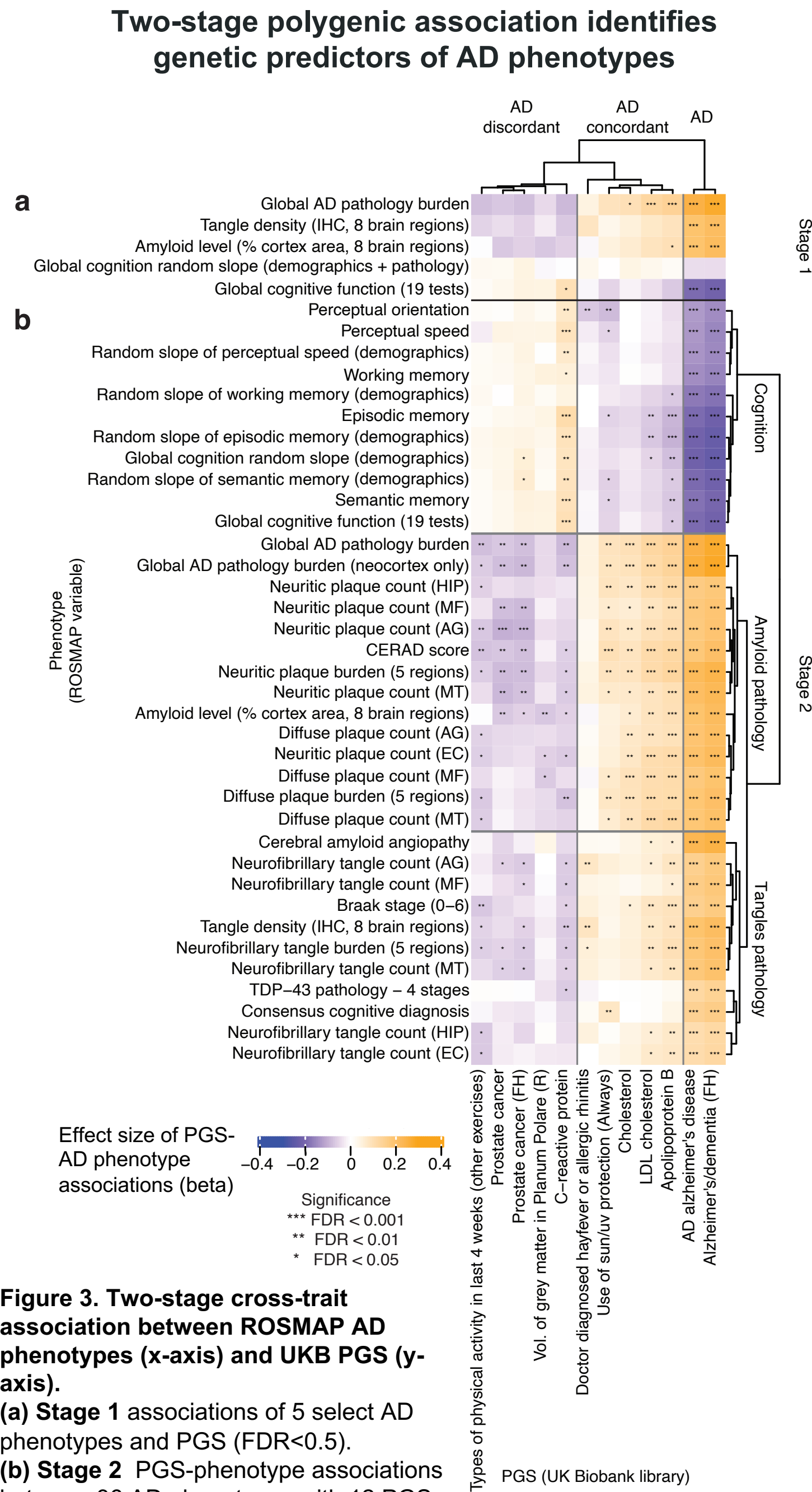
<sup>†</sup>william\_li@hms.harvard.edu; <sup>\*</sup>manoli@mit.edu, tanigawa@ucla.edu



**Figure 2. Phenotypic heterogeneity in the AD phenome for ROSMAP individuals.**

1678 individuals, 36 AD-related clinical and pathological phenotypes, with three overarching phenotype clusters.

TDP-43, transactive response DNA binding protein 43; MF, midfrontal cortex; AG, inferior parietal cortex; MT, midtemporal cortex; IHC, immunohistochemistry; EC, entorhinal cortex; CERAD, Consortium to Establish a Registry for Alzheimer's Disease<sup>12</sup>; HIP, hippocampus; “(demographics)”, variable is controlled for demographics.



**Figure 3. Two-stage cross-trait association between ROSMAP AD phenotypes (x-axis) and UKB PGS (y-axis).**

(a) Stage 1 associations of 5 select AD phenotypes and PGS (FDR<0.5).

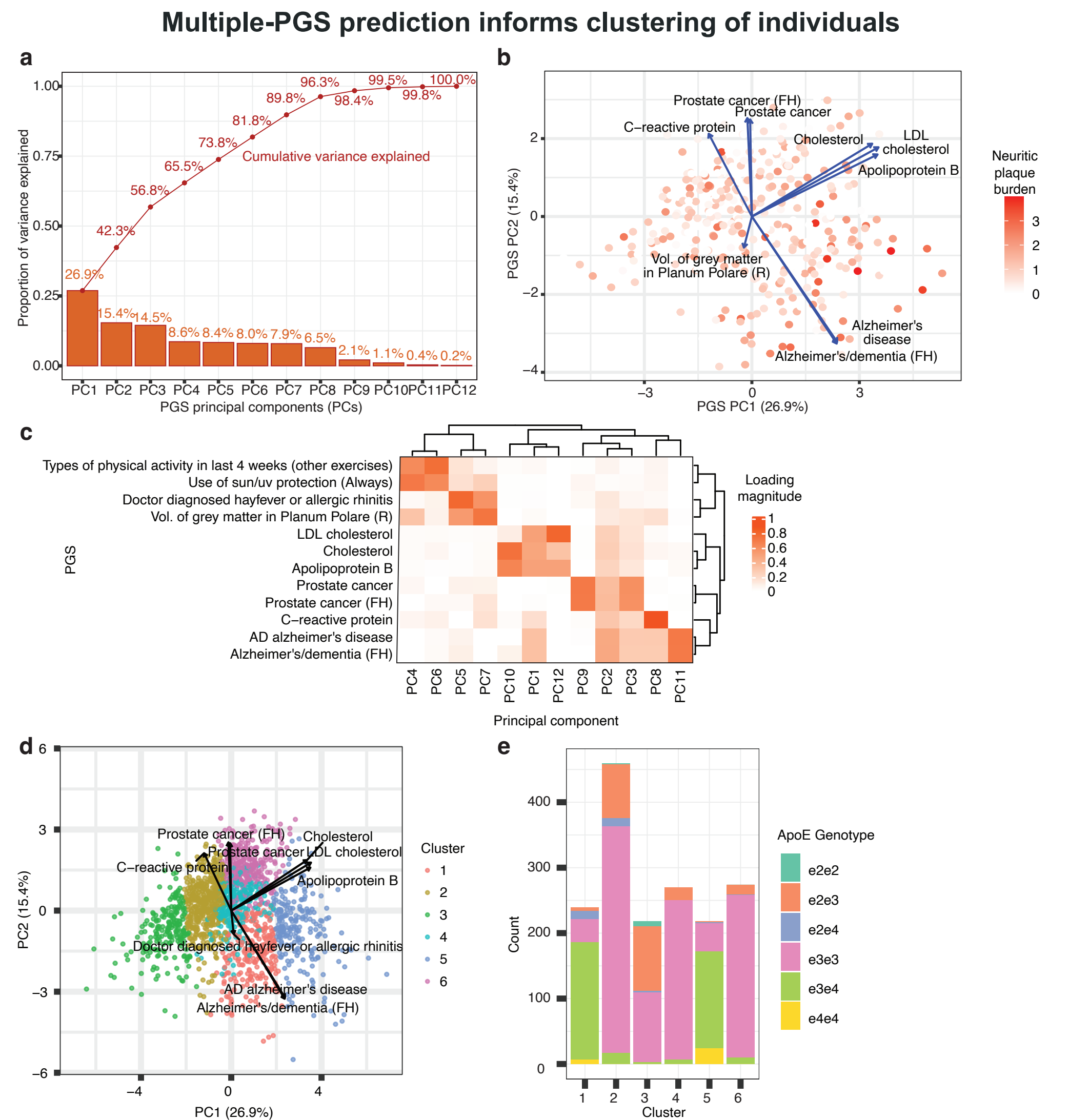
(b) Stage 2 PGS-phenotype associations between 36 AD phenotypes with 12 PGS. We show hierarchical clustering as dendrograms.

## Multiple-PGS model enhances phenotype predictions

|  | Covariates only (no ApoE) | ApoE + covariates | AD PGS | All PGS      | PGS PCs      |
|--|---------------------------|-------------------|--------|--------------|--------------|
| Global cognitive function (19 tests)           | 0.059                     | 0.138             | 0.106  | <b>0.190</b> | 0.184        |
| Global AD pathology burden                     | 0.117                     | 0.242             | 0.205  | <b>0.260</b> | 0.224        |
| Neuritic plaque burden (5 regions)             | 0.078                     | 0.241             | 0.211  | 0.257        | <b>0.291</b> |
| Amyloid level (% cortex area, 8 brain regions) | 0.235                     | 0.275             | 0.219  | 0.265        | <b>0.305</b> |
| Diffuse plaque burden (5 regions)              | 0.069                     | 0.149             | 0.168  | 0.149        | <b>0.194</b> |
| Tangle density (IHC, 8 brain regions)          | 0.061                     | <b>0.159</b>      | 0.063  | 0.027        | 0.109        |

**Table 1. Predictive performance of five gradient-boosted prediction models:**

- Prediction with only covariates for age, sex, population genetic principal components, and genotyping site.
- Prediction with covariates and quantified apolipoprotein E genotype.
- Prediction with covariates and the PGS for AD family history.
- Prediction with covariates and all 12 select AD PGS from stage 1 of the cross-trait association.
- Prediction with covariates and the top 8 principal components (PCs) of the AD PGS.



**Figure 4. Individual-level clustering using principal components (PCs) derived from identified PGS.**

- (a) Variance explained by each PC in the principal component analysis of PGS values for ROSMAP individuals (training set).
- (b) Biplot of PCs 1 and 2 on the testing set of the predictive performance analysis, colored by neuritic plaque values.
- (c) The magnitudes of the PCA loadings (color) for each pair of PC (x-axis) and PGS (y-axis).
- (d) We cluster individuals by PGS PCs. We show a biplot of PCs 1 and 2 for all ROSMAP individuals, colored by cluster assignments.
- (e) We show the prevalence of each ApoE genotype within each cluster.

## References and Acknowledgements

- Tanigawa, Y. et al. Significant sparse polygenic risk scores across 813 traits in UK Biobank. *PLoS Genetics*. 18, e1010105 (2022).
  - Bellenguez, C. et al. New insights into the genetic etiology of Alzheimer's disease and related dementias. *Nature Genetics*. 54, 412–436 (2022).
- Thank you to the NIH for sponsoring this work.