



University of Groningen

Pathway analysis of a genome-wide gene by air pollution interaction study in asthmatic children

Ierodiakonou, Despo; Coull, Brent A; Zanobetti, Antonella; Postma, Dirkje S; Boezen, H Marike; Vonk, Judith M; McKone, Edward F; Schildcrout, Jonathan S; Koppelman, Gerard H; Croteau-Chonka, Damien C

Published in: Journal of exposure science & environmental epidemiology

DOI: 10.1038/s41370-019-0136-3

IMPORTANT NOTE: You are advised to consult the publisher's version (publisher's PDF) if you wish to cite from it. Please check the document version below.

Document Version Publisher's PDF, also known as Version of record

Publication date: 2019

Link to publication in University of Groningen/UMCG research database

Citation for published version (APA):

lerodiakonou, D., Coull, B. A., Zanobetti, A., Postma, D. S., Boezen, H. M., Vonk, J. M., McKone, E. F., Schildcrout, J. S., Koppelman, G. H., Croteau-Chonka, D. C., Lumley, T., Koutrakis, P., Schwartz, J., Gold, D. R., & Weiss, S. T. (2019). Pathway analysis of a genome-wide gene by air pollution interaction study in asthmatic children. *Journal of exposure science & environmental epidemiology*, *29*(4), 539-547. https://doi.org/10.1038/s41370-019-0136-3

Copyright

Other than for strictly personal use, it is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), unless the work is under an open content license (like Creative Commons).

The publication may also be distributed here under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license. More information can be found on the University of Groningen website: https://www.rug.nl/library/open-access/self-archiving-pure/taverneamendment.

Take-down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

ARTICLE



Pathway analysis of a genome-wide gene by air pollution interaction study in asthmatic children

Despo lerodiakonou^{1,2} · Brent A. Coull³ · Antonella Zanobetti⁴ · Dirkje S. Postma^{2,5} · H. Marike Boezen^{1,2} · Judith M. Vonk^{1,2} · Edward F. McKone⁶ · Jonathan S. Schildcrout⁷ · Gerard H. Koppelman^{2,8} · Damien C. Croteau-Chonka⁹ · Thomas Lumley¹⁰ · Petros Koutrakis⁴ · Joel Schwartz⁴ · Diane R. Gold^{4,9} · Scott T. Weiss⁹

Received: 9 June 2018 / Revised: 23 November 2018 / Accepted: 8 March 2019 / Published online: 26 April 2019 © Springer Nature America, Inc. 2019

Abstract

Objectives We aimed to investigate the role of genetics in the respiratory response of asthmatic children to air pollution, with a genome-wide level analysis of gene by nitrogen dioxide (NO_2) and carbon monoxide (CO) interaction on lung function and to identify biological pathways involved.

Methods We used a two-step method for fast linear mixed model computations for genome-wide association studies, exploring whether variants modify the longitudinal relationship between 4-month average pollution and post-bronchodilator FEV_1 in 522 Caucasian and 88 African-American asthmatic children. Top hits were confirmed with classic linear mixed-effect models. We used the improved gene set enrichment analysis for GWAS (*i-GSEA4GWAS*) to identify plausible pathways.

Results Two SNPs near the *EPHA3* (rs13090972 and rs958144) and one in *TXNDC8* (rs7041938) showed significant interactions with NO₂ in Caucasians but we did not replicate this locus in African-Americans. SNP–CO interactions did not reach genome-wide significance. The *i*-*GSEA4GWAS* showed a pathway linked to the HO-1/CO system to be associated with CO-related FEV₁ changes. For NO₂-related FEV₁ responses, we identified pathways involved in cellular adhesion, oxidative stress, inflammation, and metabolic responses.

Conclusion The host lung function response to long-term exposure to pollution is linked to genes involved in cellular adhesion, oxidative stress, inflammatory, and metabolic pathways.

Keywords Air pollution · Asthma · Genome-wide · Gene-environment interaction · Lung function · Pathways.

Introduction

Epidemiological studies have demonstrated a strong association between exposure to ambient air pollution and adverse effects on childhood respiratory health [1-3], with asthmatic children being more susceptible to the negative effects of air pollution [4–6]. Lower lung function levels in asthmatic and non-asthmatic children have been associated with short-term exposure to air pollution [3, 7, 8], but the

Despo Ierodiakonou desierod@gmail.com

long-term effects of pollution on lung function are less well studied in asthmatic children [9–12].

Known biological mechanisms by which air pollution can impair health include autonomic dysfunction, oxidative stress, and systemic inflammatory responses [13–16]. Respiratory response to air pollution varies between individuals suggesting that genetic susceptibility likely plays a role [17]. Recent genome-wide interaction analyses of chronic air pollution exposure indicated that gene–environment interactions are important for asthma development [18] and for lung function decline in non-asthmatic adults [19].

In asthma, also genes play a role in determining the susceptibility to the harmful effects of air pollution [20] but the underlying biological mechanisms of air pollutionmediated health effects are not fully understood, warranting further examination of the genes and pathways that might be involved.

Supplementary information The online version of this article (https://doi.org/10.1038/s41370-019-0136-3) contains supplementary material, which is available to authorized users.

Extended author information available on the last page of the article

We previously investigated the longitudinal relationship between the 4-month average exposure to air pollution and post-bronchodilator (BD) forced expiratory volume in 1 second (FEV₁) and showed that among the measured air pollutants, long-term exposures to carbon monoxide (CO) and nitrogen dioxide (NO₂) are associated with reduced levels of FEV₁ in children with asthma [21]. In the current study, we use a hypothesis-free, genome-wide analysis to investigate whether genetic variants modify the long-term effects of CO and NO₂ on lung function in children with asthma, and with a pathway analysis we explore further plausible underlying biological pathways of CO and NO₂mediated effects on lung function in asthmatic children.

Materials and methods

The Childhood Asthma Management Program (CAMP; ClinicalTrials.gov Identifier: NCT00000575) study design and methods have been described elsewhere [22]. Additional details on all methods used in the present report are provided in an online data supplement. In summary, children enrolled in CAMP were 5-12 years of age and had airway hyper-responsiveness to methacholine at study entry. In total, 1041 children entered the randomization (RZ) phase and 311, 312, and 418 children received budesonide, nedocromil, and placebo, respectively. All subjects were treated and followed for 4 years with visits at 2 and 4 months after RZ and at 4-month intervals thereafter. Each parent or guardian signed a consent form and participants of 7 years of age and older signed an assent form approved by each clinical center's institutional review board.

Spirometry before and after the administration of two puffs of albuterol (bronchodilator) was conducted at RZ and at follow-up visits (n = 13) according to the American Thoracic Society Standards [23]. Twenty-four hours average concentrations of CO and NO₂ were estimated for each metropolitan area using data from the United States Environmental Protection Agency's Atmospheric Integrated Research Monitoring Network. The ZIP or postal code centroid coordinates were used to link participants to daily concentrations from the nearest monitor within 50 km that did not have missing data on that day (December 1993 through June 1999). Averaging the daily pollution concentrations for the 4-month intervals between the clinic visits for lung function measurement created the moving averages.

Genome-wide single-nucleotide polymorphisms (SNP) genotyping for CAMP subjects (their families and iControlDB controls) was performed on Illumina's Human-Hap550 Genotyping BeadChip (Illumina, Inc., San Diego, CA).

Statistical analysis

Genome-wide interaction study

In a genome-wide interaction analysis, the computational effort needed to evaluate the effects of hundreds of thousands SNPs on the longitudinally measured trait is prohibitively large with a classic linear mixed model (LMM) approach. We followed the Sikorska et al. conditional twostep approach for fast LMM computations for genome-wide association studies (GWAS) [24], a method to explore whether the longitudinal relationship between 4-month averaged pollution (CO and NO₂) and post-BD FEV₁ % predicted is modified by SNPs in the human genome. The practical application of this approach is to be used as a surrogate of classic LMM, hence we performed the genome-wide scan for hundreds of thousands SNPs in a fast manner.

In summary, in the first step we fitted a LMM with subject-specific (random) intercept and slope for pollution exposure with all SNP terms omitted (main effect and interaction with pollutant) from the model. LMM tests were performed in the R programming language (version 3.5.0 (2018-04-23)), and code availability can be requested by the corresponding author.

At the second step, simple linear regression tests of SNPs (genome-wide) with the individual's FEV₁ response to CO and NO₂ (provided as subject-specific random slopes of pollution by LMM in step 1), respectively, were performed in PLINK [25], using an additive allelic model. SNPs included in the genome-wide analysis had a minor allele frequency >5% (n = 474,792).

For estimating the exact effect size of the interactions and confirm statistical significance, top signals for SNP–pollution interaction as given by two-step approach (*P*-value < 10^{-5}) were tested with the classic LMM including terms of pollution, SNP and SNP–pollution interaction, (e.g., Bonferroni corrected minimally significant *P*-value being 0.05/474,792 = 1.05E–07). Non-Hispanic white (Caucasian) CAMP subjects (*n* = 522) were used as the primary study population and African-American CAMP subjects (*n* = 88) served as the replication study population.

Pathway-level analysis for the genome-wide SNP by pollutant interaction analysis

To analyze pathway-level SNP–pollutant interactions, we used the improved gene set enrichment analysis for GWAS (*i-GSEA4GWAS*; http://gsea4gwas.psych.ac.cn/inputPage. jsp) [26], GSEA evaluates whether the distribution of genes sharing a biochemical or cellular function is different from the distribution of a ranked genome-wide gene list

[26, 27]. Details on the *i*-GSEA4GWAS method are given in the Supplementary material.

Input data to perform the pathway-level analysis of the SNP-pollution interaction analysis were P-values of the two-step genome-wide SNP-pollution interaction analysis in Caucasian CAMP subjects. We changed the default settings and selected specific parameters for the gene set enrichment analysis: to avoid overrepresentation of SNPs in more than one gene we restricted mapping SNPs to ±20 kb around a gene. We selected additional filtering for gene set size, set to at least five genes, so any narrow functional categories would not be missed. Next, the default canonical pathway method of gene sets was used for further analysis. These canonical pathways were extracted and curated from Molecular Signatures Database from a variety of online resources (MSigDB v2.5; http://www.broadinstitute.org/ gsea/msigdb/). The genome-wide P-values were transformed to -log (P-values), represented genes were mapped based on SNPs P-values, and the enrichment score was calculated.

Significant genes in a pathway are defined as the genes mapped with at least one of the top 5% *P*-values of all SNPs $(0.05 \times 474,792 = 23,740$ SNPs). Each significant gene was represented by the SNP in that gene with the lowest genome-wide SNP–pollutant interaction *P*-value (top SNP per significant gene). We selected the top SNPs of all given pathways and with classic LMM, we estimated the interaction effect size for the gene sets most significant SNP–pollutant interactions in Caucasians.

Results

All subjects in CAMP considered in this analysis were randomized and followed up during the trial period. A total of 1003 of the 1041 randomized children (96.3%) had pollution data available of which 610 were studied in the genetic analysis. At study entry, the mean (SD) age was 9 (2.1) and geometric mean (min-max) PC₂₀ 1.1 (0.02-2.5) mg/ml. Table 1 shows the main characteristics of the participants. In all, 82.5% of the children attended all visits during the 4-year trial (median number of completed visits = 14 (range: 1-14)). Each participant had a median of 10 (range: 1-10) post-BD lung function measurements. Repeated FEV1 measurements increase the power of our statistical analysis to detect significant differences between means (8200 and 8600 observations for NO₂ and CO analysis, respectively). Tables S1 and S2 summarize the 4-month moving averages pollutant concentrations during December 1993-June 1999, with number of observations, percentiles, and interquartile range (IQR). CO and NO₂ were weakly correlated (spearman rho = 0.30).

N = 1003	
City, <i>n</i> (%)	
Albuquerque	121 (12.1)
Baltimore	126 (12.6)
Boston	123 (12.3)
Denver	141 (14.1)
San Diego	122 (12.2)
Seattle	136 (13.6)
Saint Louis	133 (13.3)
Toronto	101 (10.1)
Sex, <i>n</i> (%)	
Males	602 (60)
Females	401 (40)
Treatment group; n (%)	
Placebo	407 (40.6)
Budesonide	298 (29.7)
Nedocromil	298 (29.7)
Ethnicity, <i>n</i> (%)	
Caucasians	677 (67.5)
African-Americans	137 (13.7)
Hispanics	97 (9.7)
Other	92 (9.2)
Annual income \geq 30K USD, <i>n</i> (%)	
Yes	728 (76)
No	235 (24)
In utero smoking exposure, n (%)	
Yes	114 (14)
No	854 (86)
Pre-bronchodilator lung function at randomization,	mean (SD)
FEV ₁ %predicted	93.8 (14.3)
FVC %predicted	104.0 (13.1)
FEV ₁ /FVC%	79.7 (8.3)
Post-bronchodilator lung function at randomization,	, mean (SD)
FEV ₁ %predicted	103.0 (12.8)
FVC %predicted	106.5 (12.8)
FEV ₁ /FVC%	85.5 (6.5)

 FEV_1 forced expiratory volume in 1 s, FVC_2 forced vital capacity, SD standard deviation, $\geq 30K$ USD equal or more than 30,000 United State Dollars

Two-step genome-wide SNP by pollutant interaction analysis

Figure 1 presents an overview of our study design and results of the genome wide interestion study (GWIS). After minor allele frequency (MAF) pruning, 474,792 SNPs were included in the primary analysis, and the smallest *P*-values for SNP–NO₂ and SNP–CO interactions with the two-step approach were 1.37E-06 and 2.04E-06, respectively, showing only suggestive evidence for genome-wide



Fig. 1 The flowchart with the analytic steps and summary of results of the genome-wide gene by pollutant(s) interaction study. Top hit SNPs $(P < 10^{-5})$ interacting with pollutants in Caucasians were selected and with LMM we assessed the interaction effect size and *P*-values. Genome-wide significant interactions $(P < 10^{-7})$ were tested for

SNP-pollutant interactions (Table 2 and Supplementary Tables S3A and S4). The quantile–quantile (QQ) plots of the two-step GWIS are presented in Supplementary Figs. S1 and S2, showing that the distribution of association *P*-values was similar to that expected for a null distribution, and that no *P*-values met the conventional genome-wide statistically significant levels (e.g., Bonferroni corrected minimally significant *P*-value being 0.05/474,792 = 1.05E-07; see Supplementary Figs. S1 and S2).

Confirmation by classic LMM testing

We selected the six top (*P*-value $< 10^{-5}$) SNP–NO₂ interactions given by the two-step approach and with the classic LMM model we assessed the effect size of these interactions and compared their P-value as given by the two approaches. In Caucasians, change in post-BD FEV1 % predicted per IQR increase in NO₂ level ranged from -1.3to 1.1 for the six $SNP-NO_2$ interactions. With the classic LMM models, the P-values decreased for five out of six SNP-NO₂ interactions with values ranging from 1.3E-08 to 8.5E–06 (Supplementary Table S3A). Three SNP–NO₂ interactions reached genome-wide significance with the classic LMM: rs13090972 (80 kb 5' of EPHA3) and rs958144 (162 kb 5' of EPHA3) near EPHA3 (lingake disequilibrium (LD) between two SNPs $r^2 = 0.55$) and rs7041938 in TXNDC8—the latter in high LD ($r^2 = 0.8$) with rs12684188 in SVEP1 (Table 2). Similarly, in African-

replication in African-Americans. CO carbon monoxide, NO₂ nitrogen dioxide, LMM linear mixed model, SNP single-nucleotide polymorphism, MAF minor allele frequency, GWAS genome-wide interaction study, iGSEA4GWAS improved gene set enrichment analyses for GWAS, FEV₁ forces expiratory volume in 1 s

Americans the *P*-values of associations were lower with LMM, but none reached genome-wide statistical significance (all *P*-values > 0.05; see table S3B). Supplementary Table S4 shows that the seven top signals (*P*-value < 10^{-5}) SNP–CO interactions as given by the two-step approach did not reach genome-wide statistical significance with LMM. The change in post-BD FEV₁ % predicted per IQR increase in CO level ranged from -0.98 to 0.83 and *P*-values range from 9.69E–07 to 1.26E–05.

Pathway-level analysis for the two-step genomewide SNP by pollutant interaction analysis on FEV₁ %predicted

For the *i-GSEA4GWAS* in Caucasian CAMP subjects, -log (*P*-values) of 474,792 gene variants were imported and 265,485 variants were mapped on genes ± 20 kb (total number of genes: 16,854). We identified one pathway interacting with CO (*P*-value = 0.001) and 23 pathways interacting with NO₂ (*P*-values: 0.0001–0.01). Table S5 presents the *i-GSEA4GWAS* suggested pathways for the two pollutants. Details for each individual pathway (SNPs, mapped genes, gene sets, FDR, *P*-value, description) of NO₂ and CO-mediated effects can be found http:// gsea4gwas.psych.ac.cn/getResult.do?result=13F3A9728 87892430E6A5C369D76FEAD_1372284527739 and http://gsea4gwas.psych.ac.cn/getResult.do?result=13F3A

Table 2 Top genome-wide	e gene by nitrogen dio	vide interaction loc	i and suggested fi	unctions		
Top genome-wide interaction locus	SNP	Two-step approach P-values	Classic LMM <i>P</i> -value	LMM change per IQR for SNPs of EPHA3	Function(s) related to genes ^a	Identified pathways ^b linked to those gene functions
Near EPHA3; chr3:88994672 and 39076896	rs13090972 (T>G) rs958144 (C>T)	1.37E–06 4.81E–06	1.33E–08* 2.94E–08*	-1.33 -1.28	Receptor tyrosine kinase of Eph family: cell adhesion; immune surveillance; tissue remodeling	Cell adhesion molecules; calcium regulation; glycosphingolipids metabolism, glycosaminoglycan (chondroitin) biosynthesis
TXNDC8; chr9:113091523	rs7041938 (T>G)	7.35E-06	1.04E-07*	1.14	Thioredoxin reductase family: cell redox homeostasis	HSP27, iNOS, IL10, heme biosynthesis-heme oxyganase-1/CO, calcium regulation
In LD=0.8 with SEVP1; chr9:113133588	rs12684188 (C>T)	>1E-05	3.88E–07	1.20	Cell adhesion; immune surveillance	Cell adhesion molecules, glycosphingolipids metabolism, calcium regulation
SNP single-nucleotide poly *Genome-wide significanc	ymormpism, LMM line e ($P < 1.05E-07$)	ear mixed model, I	<i>QR</i> interquartile <i>r</i>	ange of 4-month ave	rage nitrogen dioxide concentration	(4 parts per billion).
^a Based on coding protein's	s function(s). Details for	or each gene are gi	ven in the text			

'Based on pathway analysis

respectively. All the pathways we present in our findings had false discovery rate (FDR) < 0.25. In summary, the *i-GSEA4GWAS* showed a pathway (PAC1R; receptor of pituitary adenylate cyclase-activating polypeptide (PACAP)) to be associated with CO-related FEV₁ changes. For NO₂-related FEV₁ responses, we identified several pathways involved in inflammation, oxidative stress, the HO-1/CO system, calcium homeostasis, cellular adhesion and metabolic responses.

Within each gene set/pathway there were significant genes (genes mapped with at least one of the top 5% of all SNPs–pollutant interactions in the two-step genome-wide analysis). Each significant gene is represented by the SNP in that gene with the lowest genome-wide *P*-value of SNP by pollutant interaction (the top SNP per significant gene). Effect sizes of interaction of those SNPs with pollutants as given by LMM are shown in the Supplementary material (see Supplementary Tables S6 and S7).

Discussion

Most gene-air pollution studies have focused on a few candidate genetic variations and investigated short-term exposures to pollution [17]. Although these small hypothesis-driven studies can contribute to our understanding of specific gene-pollution effects, they often fail to uncover novel disease-causing mechanisms and in some cases have not been replicated by subsequent studies [28, 29]. To the best of our knowledge, this is the first longitudinal GWIS on lung function response to ambient air pollution in asthmatic children. We used the two-step approach as a screening tool to identify genes that may interact with air pollution while gaining computational time, and we confirmed the top hits of the two-step approach with the classic LMM; we used the genome-wide output for a iGSEA4GWAS. Below we discuss the putative genes involved in air pollution effects on lung function in childhood asthma and the identified pathways.

At SNP level, two loci, the EPHA3 (receptor tyrosine kinase of Eph family; location 3p11.2) and TXNDC8 (thioredoxin domain containing 8 (spermatozoa) or Spermatocyte/Spermatid-Specific Thioredoxin-3; location 9q31.3) genes showed genome-wide statistical evidence for interaction with NO₂ (with the classic LMM). The bestdocumented function of the Eph-receptor/ephrin-A signaling is the regulation of cell adhesion and migration processes critical for a wide variety of normal and pathological processes, including tissue remodeling and immune surveillance [30, 31]. Recent findings suggest that Eph signaling is involved in pathological conditions such as lung cancer, yet its role in asthma is unknown [32, 33]. The fact that receptor tyrosine kinase pathways contribute to aspects of airway inflammation, airway hyper-responsiveness and remodeling of asthma [34], suggests that we may have identified a novel receptor tyrosine kinases (EPHA3) important for the pathogenesis of asthma in response to NO_2 in Caucasian children.

The second top signal locus, TXNDC8, belongs to the thioredoxin reductase enzymes, a well-characterized subfamily of selenoproteins that perform an essential redox role in immune cells [35]. Recent studies indicated that thioredoxin system may contribute to the pathogenesis of COPD, asthma and lung injury and suggest that this pathway may be used in future therapeutic applications [36]. The genome-wide top hit SNP (rs7041938) in TXNDC8 found to modify the NO₂ effects on FEV₁ in Caucasian subjects is in high linkage disequilibrium $(r^2 > 0.8)$ with rs12684188 in SVEP1 (sushi, von Willebrand factor type A, EGF and pentraxin domain containing 1; location 9q32). In a recent GWAS, a locus containing the SVEP1 gene showed signals of association with FEV₁ decline in non-asthmatic adults [37]. In our asthmatic children, the interaction Pvalue of the SVEP1 variant did not reach significance. SVEP1 codes for a protein called polydom, which is recognized as a cell adhesion molecule with a biological role in cellular adhesion and/or in the immune system [38, 39]; but its role in asthma has not been investigated so far. We were unable to replicate these loci in African-Americans and it would be important to replicate our finding in other populations in the future.

The pathway analysis helps to clarify biological plausible connections for our GWIS hits with one another. Some of the pathways identified from our *iGSEA4GWAS* analysis have been previously found to play a role in asthma and be related to cellular adhesion and immune response, as do so our GWIS top loci. The first genome-wide gene by air pollution interaction study on asthma development identified genes involved in glycosphingolipids biosynthesis, Gprotein coupled receptor signaling and adhesion [18]. Similarly, our iGSEA4GWAS identified sphingolipid (glycosphingolipid metabolism pathway), G-coupled receptor (gs-pathway, agpcr-pathway, plce-pathway), and epithelial adhesion (HSA04514 cell adhesion molecules pathway) pathways in lung function response to NO₂, pointing to the same direction. Sphingolipids and altered sphingolipid metabolism have emerged as potential key contributors to the pathogenesis of asthma [40]. Orosomucoid-like 3 gene (ORMDL3) and the asthma susceptibility locus 17q21 have been strongly and reproducibly linked to childhood asthma [41].

The role of airway epithelial barrier function (HSA04514 cell adhesion molecules pathway) in the susceptibility to develop allergic asthma has been extensively studied and polymorphisms in adhesion molecules genes have been associated with asthma and asthma severity [42–44]. It is

plausible that exposure to NO_2 induces oxidative stress with cellular barrier damage and inflammatory responses. In the Supplementary material, we describe in more detail how pathways involved in inflammation and oxidative stress (NOS1, HSP27, IL10, heme biosynthase) may be linked to NO_2 exposure and how they are inter-related.

Metabolic pathways (feeder of glycolysis and obesity pathways) are activated to compensate the cellular demands to stress and the HO-1/CO system may protect against oxidative stress and inflammation. In line with our findings, a GWIS study of non-asthmatic adults, identified a mechanistic link between adiponectin (a metabolic biomarker with modulating action on inflammatory processes systemically and locally in the lung) and cadherin 13 as a biologically plausible pathway for modifying the air pollution exposure effect on lung decline [19].

Oxidative stress has been associated with calcium influx regulation, two responses observed in our pathway analysis as well [45, 46]. Interestingly, a proteomic-based study has shown that allergen-induced early asthma response in rats is associated with glycolysis, calcium binding, and mito-chondrial activity [47], supporting our identified underlying molecular mechanisms for response to environmental toxicants in asthma.

The *iGSEA4GWAS* of CO interactions suggested the neuropeptide pituitary adenylate cyclase-activating peptide receptor (PAC1R) pathway in CO-related response. The ligand of PAC1R (PACAP) can induce bronchodilation and endogenous regulation of airway tone by means of a CO-dependent mechanism with local HO-1/CO release in the airway smooth muscle, and it also has pro-inflammatory functions that require calcium regulation [48–50]. Furthermore, PACAP, acting through type 1 PACAP receptor, exerts a potent protective effect against oxidative stress-induced apoptosis [51].

Our childhood asthma study had the advantage of having a long follow-up period with high attendance of the subjects and repeated lung function measurements, air pollution levels during that period and genomic data. The two-step approached used for longitudinal data [24] provided shorter processing time and we confirmed its accuracy, i.e., at a second stage the genome-wide top signals found by the two-step approach were confirmed by LMM testing.

We could not find a second study of asthmatic children with similar design, repeated lung function measurements, population characteristics, genome-wide genotyping, and air pollution data. Although population stratification is less likely to bias estimates of gene–environment interaction effects [52], we used as our primary study only Caucasian CAMP subjects and found no evidence of stratification in our Q/Q plots. For replication studies, definition and measurement of the exposure and/or outcome is critical to the success of gene–environment investigations, therefore we decided to use the second largest ethnic subgroup of the CAMP as our replication population (although of relative small size), to ensure that the genotyping, outcome, and exposure were measured reliably and consistently. This reduced power and potential different LD patterns in the replication population represent limitations of this study.

After testing for pollution effect modification at the SNP level, we performed the pathway approach to assess the overall evidence of interaction of pollution with a group of functionally related genes, thus incorporating prior biological knowledge. Our pathway-level analysis of SNP–pollution interactions identified biological plausible mechanisms for pollution-mediated asthma progression in children that are generally consistent with the SNP-level analysis.

Our findings highlight the promise of pursuing genomewide gene-environment interaction studies in smaller populations with high-quality longitudinal exposure information by showing that they can identify biologically relevant effects of these exposures. We conclude that genetic susceptibility to traffic-related air pollutants such as CO and NO₂ are linked to oxidative stress and inflammation pathways, while metabolic pathways, calcium homeostasis and the HO-1/CO pathway may play а cytoprotective role against oxidative stress and inflammation. Our findings may represent the first step for functional research and pharmacological developments for protection against the detrimental effects of air pollution on asthma severity and progression.

Acknowledgements We would like to thank Steve Melly for his contribution on the air pollution database preparation and our colleagues Paul V. Williams, Teal S. Hallstrand, and Anne N. Fuhlbrigge for the Childhood Management Asthma (CAMP) Program Group. We dedicate this manuscript to the memory of our friend and colleague Dr. Gail G. Shapiro who passed away unexpectedly during this study. Dr. Shapiro dedicated her life to understanding the causes of childhood asthma and determining the best treatments for asthma. She is deeply missed by her colleagues, patients, and the asthma community. A special thank you to all participants of the CAMP study and their families.

Author contributions Each author participated sufficiently in the current work. All authors were involved in the conception, hypotheses delineation, and design of the present article. DI wrote the article and all authors had a substantial involvement in its revision prior to submission. Management of the data and the analysis was performed by DI in consultation with BAC, AZ, DRG, and STW. DRG, PK, and JS provided comprehensive input on air pollution exposure assessment and modeling. STW, DSP, JV, HMB, and GHK supported the genome-wide and pathway analyses. DC C-C provided input on bioinformatic tools. EFMcK, JSS, TL, and STW represent the CAMP research group who designed, conducted, and completed the study.

Funding The Childhood Asthma Management Program trial and CAMP Continuation Study were supported by contracts NO1-HR-16044, 16045, 16046, 16047, 16048, 16049, 16050, 16051, and 16052 with the National Heart, Lung, and Blood Institute and General Clinical Research Center grants M01RR00051, M01RR0099718-24, M01RR02719-14,

and RR00036 from the National Center for Research Resources. The CAMP Continuation Study/Phases 2 and 3 were supported by grants U01HL075232, U01HL075407, U01HL075408, U01HL075409, U01HL075415, U01HL075416, U01HL075417, U01HL075419 and U01HL075420 from the National Heart, Lung, and Blood Institute. The National Jewish Health site was also supported in part by Colorado CTSA grant UL1RR025780 from NCRR/NIH and UL1TR000154. In addition, all work on data collected from the CAMP Genetic Ancillary Study was conducted at the Channing Laboratory of the Brigham and Women's Hospital under appropriate CAMP policies and human subject's protections. The CAMP Genetics Ancillary Study is supported by U01 HL075419, U01 HL65899, P01 HL083069, R01 HL086601, and RC2 HL101543 from the National Heart, Lung and Blood Institute, National Institutes of Health. This study was also funded by: the National Institutes of Health (NHLBI P01 HL083069, U01 HL075419, U01 HL65899, R01 HL086601; NIEHS P01 ES09825, R21 ES020194, P30 ES000002); the U.S. Environmental Protection Agency (RD 83241601, RD 83479801), and the International Initiative for Environment and Public Health Cyprus Program of HSPH. The contents of this publication are solely the responsibility of the grantee and do not necessarily represent the official views of the US EPA. Further, US EPA does not endorse the purchase of any commercial products or services mentioned in the publication.

Compliance with ethical standards

Conflict of interest The authors declare that they have no conflict of interest.

Publisher's note: Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

References

- 1. Searing DA, Rabinovitch N. Environmental pollution and lung effects in children. Curr Opin Pediatr. 2011;23:314–8.
- Schwela D. Air pollution and health in urban areas. Rev Environ Health. 2000;15:13–42.
- World Health Organization. Effects of air pollution on children's health and development. A review of the evidence. Bonn. http://www.euro.who.int/__data/assets/pdf_file/0010/74728/ E86575.pdf.2005. Date last accessed: April 2013.
- Schildcrout JS, Sheppard L, Lumley T, Slaughter JC, Koenig JQ, Shapiro GG. Ambient air pollution and asthma exacerbations in children: an eight-city analysis. Am J Epidemiol. 2006;164:505–17.
- Sunyer J, Spix C, Quenel P, Ponce-de-Leon A, Ponka A, Barumandzadeh T, et al. Urban air pollution and emergency admissions for asthma in four European cities: the APHEA project. Thorax. 1997;52:760–5.
- Romieu I, Meneses F, Ruiz S, Sienra JJ, Huerta J, White MC, et al. Effects of air pollution on the respiratory health of asthmatic children living in Mexico city. Am J Respir Crit Care Med. 1996;154:300–7.
- HEI panel on the Health Effects of Traffic-Related Air Pollution. Traffic-related air pollution: a critical review of the literature on emissions, exposure, and health effects. Boston, MA: 2010. Report No.: HEI Special Report 17.
- Li S, Williams G, Jalaludin B, Baker P. Panel studies of air pollution on children's lung function and respiratory symptoms: a literature review. J Asthma. 2012;49:895–910.
- Gao Y, Chan EY, Li LP, He QQ, Wong TW. Chronic effects of ambient air pollution on lung function among Chinese children. Arch Dis Child. 2013;98:128–35.

- Rosenlund M, Forastiere F, Porta D, De Sario M, Badaloni C, Perucci CA. Traffic-related air pollution in relation to respiratory symptoms, allergic sensitisation and lung function in schoolchildren. Thorax. 2009;64:573–80.
- Gauderman WJ, Vora H, McConnell R, Berhane K, Gilliland F, Thomas D, et al. Effect of exposure to traffic on lung development from 10 to 18 years of age: a cohort study. Lancet. 2007;369: 571–7.
- Schwartz J. Lung function and chronic exposure to air pollution: a cross-sectional analysis of NHANES II. Environ Res. 1989;50:309–21.
- 13. Kelly FJ. Oxidative stress: its role in air pollution and adverse health effects. Occup Environ Med. 2003;60:612–6.
- Patel MM, Chillrud SN, Deepti KC, Ross JM, Kinney PL. Trafficrelated air pollutants and exhaled markers of airway inflammation and oxidative stress in new york city adolescents. Environ Res. 2013;121:71–8.
- Emmerechts J, Hoylaerts MF. The effect of air pollution on haemostasis. Hamostaseologie. 2012;32:5–13.
- Auerbach A, Hernandez ML. The effect of environmental oxidative stress on airway inflammation. Curr Opin Allergy Clin Immunol. 2012;12:133–9.
- Yang IA, Fong KM, Zimmerman PV, Holgate ST, Holloway JW. Genetic susceptibility to the respiratory effects of air pollution. Postgrad Med J. 2009;85:428–36.
- Gref A, Kebede Merid S, Gruzieva O, Ballereau S, Becker A, Bellander T, et al. Genome-wide interaction analysis of air pollution exposure and childhood asthma with functional follow-up. Am J Respir Crit Care Med. 2016;195:1373–83.
- Imboden M, Kumar A, Curjuric I, Adam M, Thun GA, Haun M, et al. Modification of the association between PM10 and lung function decline by cadherin 13 polymorphisms in the SAPAL-DIA cohort: a genome-wide interaction analysis. Environ Health Perspect. 2015;123:72–9.
- Moreno-Macias H, Dockery DW, Schwartz J, Gold DR, Laird NM, Sienra-Monge JJ, et al. Ozone exposure, vitamin C intake, and genetic susceptibility of asthmatic children in Mexico city: a cohort study. Respir Res. 2013;14:14.
- Ierodiakonou D, Zanobetti A, Coull BA, Melly S, Postma DS, Boezen HM, et al. Ambient air pollution, lung function, and airway responsiveness in asthmatic children. J Allergy Clin Immunol. 2016;137:390–9.
- 22. The Childhood Asthma Management Program Research Group. The childhood asthma management program (CAMP): design, rationale, and methods. childhood asthma management program research group. Control Clin Trials. 1999;20:91–120.
- American Thoracic Society. Standardization of spirometry, 1994 update. Am J Respir Crit Care Med. 1995;152:1107–36.
- Sikorska K, Rivadeneira F, Groenen PJ, Hofman A, Uitterlinden AG, Eilers PH, et al. Fast linear mixed model computations for genome-wide association studies with longitudinal data. Stat Med. 2013;32:165–80.
- Purcell S, Neale B, Todd-Brown K, Thomas L, Ferreira MA, Bender D, et al. PLINK: a tool set for whole-genome association and population-based linkage analyses. Am J Hum Genet. 2007;81:559–75.
- 26. Zhang K, Cui S, Chang S, Zhang L, Wang J. i-GSEA4GWAS: a web server for identification of pathways/gene sets associated with traits by applying an improved gene set enrichment analysis to genome-wide association study. Nucleic Acids Res. 2010;38: W90–5. (Web Server issue).
- Subramanian A, Tamayo P, Mootha VK, Mukherjee S, Ebert BL, Gillette MA, et al. Gene set enrichment analysis: a knowledgebased approach for interpreting genome-wide expression profiles. Proc Natl Acad Sci USA. 2005;102:15545–50.

- Romieu I, Moreno-Macias H, London SJ. Gene by environment interaction and ambient air pollution. Proc Am Thorac Soc. 2010;7:116–22.
- Bowatte G, Lodge CJ, Perret JL, Matheson MC, Dharmage SC. Interactions of GST polymorphisms in air pollution exposure and respiratory diseases and allergies. Curr Allergy Asthma Rep. 2016;16:85.
- Miao H, Wang B. EphA receptor signaling--complexity and emerging themes. Semin Cell Dev Biol. 2012;23:16–25.
- Arvanitis D, Davy A. Eph/ephrin signaling: networks. Genes Dev. 2008;22:416–29.
- 32. Pasquale EB. Eph-ephrin bidirectional signaling in physiology and disease. Cell. 2008;133:38–52.
- Zhuang G, Song W, Amato K, Hwang Y, Lee K, Boothby M, et al. Effects of cancer-associated EPHA3 mutations on lung cancer. J Natl Cancer Inst. 2012;104:1182–97.
- Guntur VP, Reinero CR. The potential use of tyrosine kinase inhibitors in severe asthma. Curr Opin Allergy Clin Immunol. 2012;12:68–75.
- Huang Z, Rose AH, Hoffmann PR. The role of selenium in inflammation and immunity: from molecular mechanisms to therapeutic opportunities. Antioxid Redox Signal. 2012;16:705–43.
- Xu J, Li T, Wu H, Xu T. Role of thioredoxin in lung disease. Pulm Pharmacol Ther. 2012;25:154–62.
- Imboden M, Bouzigon E, Curjuric I, Ramasamy A, Kumar A, Hancock DB, et al. Genome-wide association study of lung function decline in adults with and without asthma. J Allergy Clin Immunol. 2012;129:1218–28.
- Schwanzer-Pfeiffer D, Rossmanith E, Schildberger A, Falkenhagen D. Characterization of SVEP1, KIAA, and SRPX2 in an in vitro cell culture model of endotoxemia. Cell Immunol. 2010;263:65–70.
- 39. Gilges D, Vinit MA, Callebaut I, Coulombel L, Cacheux V, Romeo PH, et al. Polydom: a secreted protein with pentraxin, complement control protein, epidermal growth factor and von willebrand factor A domains. Biochem J. 2000;352:49–59. Pt 1
- Ono JG, Worgall TS, Worgall S. Airway reactivity and sphingolipids-implications for childhood asthma. Mol Cell Pediatr. 2015;2:13.
- Zhao CN, Fan Y, Huang JJ, Zhang HX, Gao T, Wang C, et al. The association of GSDMB and ORMDL3 gene polymorphisms with asthma: a meta-analysis. Allergy Asthma Immunol Res. 2015;7:175–85.
- Heijink IH, Nawijn MC, Hackett TL. Airway epithelial barrier function regulates the pathogenesis of allergic asthma. Clin Exp Allergy. 2014;44:620–30.
- 43. Faura Tellez G, Willemse BW, Brouwer U, Nijboer-Brinksma S, Vandepoele K, Noordhoek JA, et al. Protocadherin-1 localization and cell-adhesion function in airway epithelial cells in asthma. PLoS ONE. 2016;11:e0163967.
- Ierodiakonou D, Postma DS, Koppelman GH, Boezen HM, Gerritsen J, Ten Hacken N, et al. E-cadherin gene polymorphisms in asthma patients using inhaled corticosteroids. Eur Respir J. 2011;38:1044–52.
- Jiang LH, Yang W, Zou J, Beech DJ. TRPM2 channel properties, functions and therapeutic potentials. Expert Opin Ther Targets. 2010;14:973–88.
- 46. Xu R, Li Q, Zhou XD, Perelman JM, Kolosov VP. Oxidative stress mediates the disruption of airway epithelial tight junctions through a TRPM2-PLCgamma1-PKCalpha signaling pathway. Int J Mol Sci. 2013;14:9475–86.
- 47. Xu YD, Cui JM, Wang Y, Yin LM, Gao CK, Liu YY, et al. The early asthmatic response is associated with glycolysis, calcium binding and mitochondria activity as revealed by proteomic analysis in rats. Respir Res. 2010;11:9921–11–107.

- Kinhult J, Andersson JA, Uddman R, Stjarne P, Cardell LO. Pituitary adenylate cyclase-activating peptide 38 a potent endogenously produced dilator of human airways. Eur Respir J. 2000;15:243–7.
- Kinhult J, Uddman R, Cardell LO. The induction of carbon monoxide-mediated airway relaxation by PACAP 38 in isolated guinea pig airways. Lung. 2001;179:1–8.
- Linden A, Cardell LO, Yoshihara S, Nadel JA. Bronchodilation by pituitary adenylate cyclase-activating peptide and related peptides. Eur Respir J. 1999;14:443–51.

Affiliations

- 51. Douiri S, Bahdoudi S, Hamdi Y, Cubi R, Basille M, Fournier A, et al. Involvement of endogenous antioxidant systems in the protective activity of pituitary adenylate cyclase-activating polypeptide against hydrogen peroxide-induced oxidative damages in cultured rat astrocytes. J Neurochem. 2016;137: 913–30.
- Thomas D. Gene--environment-wide association studies: emerging approaches. Nat Rev Genet. 2010;11:259–72.

Despo lerodiakonou^{1,2} · Brent A. Coull³ · Antonella Zanobetti⁴ · Dirkje S. Postma^{2,5} · H. Marike Boezen^{1,2} · Judith M. Vonk^{1,2} · Edward F. McKone⁶ · Jonathan S. Schildcrout⁷ · Gerard H. Koppelman^{2,8} · Damien C. Croteau-Chonka⁹ · Thomas Lumley¹⁰ · Petros Koutrakis⁴ · Joel Schwartz⁴ · Diane R. Gold^{4,9} · Scott T. Weiss⁹

- ¹ Department of Epidemiology, University of Groningen, University Medical Center Groningen, Groningen, The Netherlands
- ² Groningen Research Institute for Asthma and COPD, University of Groningen, University Medical Center Groningen, Groningen, The Netherlands
- ³ Department of Biostatistics, Harvard T.H. Chan School of Public Health, Boston, MA, United States
- ⁴ Environmental Epidemiology and Risk Program, Harvard T.H. Chan School of Public Health, Boston, MA, United States
- ⁵ Department of Pulmonology, University of Groningen, University Medical Center Groningen, Groningen, The Netherlands
- ⁶ Department of Respiratory Medicine, St. Vincent University

Hospital, Dublin, Ireland

- ⁷ Department of Environmental and Occupational Health Sciences, School of Public Health, University of Washington, Seattle, WA, United States
- ⁸ Department of Pediatric Pulmonology and Pediatric Allergology-Beatrix Children Hospital, University of Groningen, University Medical Center, Groningen, The Netherlands
- ⁹ Channing Division of Network Medicine, Brigham and Women's Hospital, Department of Medicine, Harvard Medical School, Boston, MA, United States
- ¹⁰ Department of Biostatistics, University of Auckland, Auckland, New Zealand