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# Background

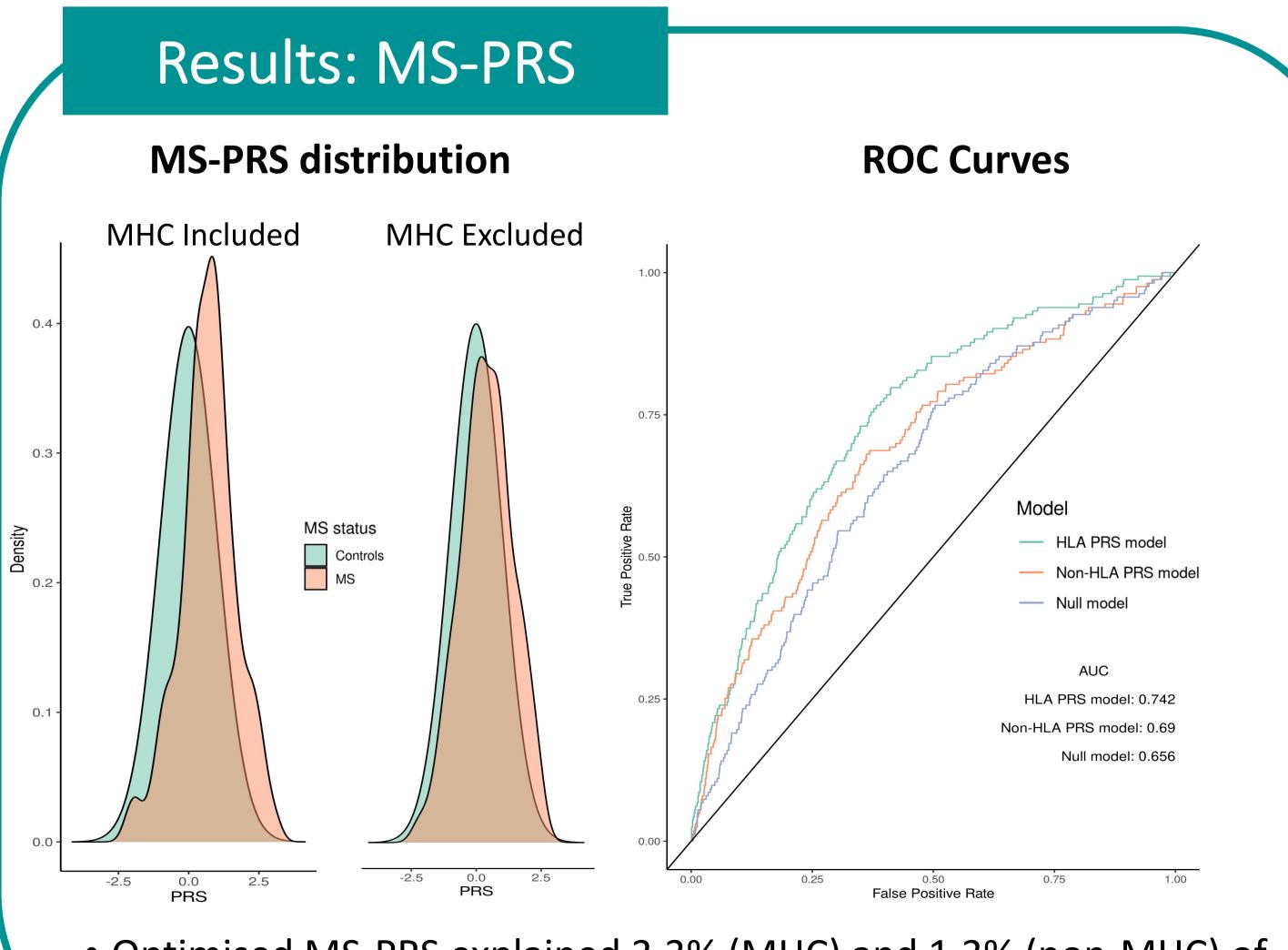
- Multiple Sclerosis (MS) is a chronic autoimmune disorder with a range of genetic and environmental risk factors.
- Recent studies<sup>1,2</sup> have reported associations between genetic risk of MS and Magnetic Resonance Imaging (MRI) metrics of white matter tract integrity in healthy children.
- We sought to replicate these findings, assessing whether MS polygenic risk (MS-PRS) is associated with white matter integrity in a large cohort of healthy UK Biobank (UKB) participants.
- Is MS polygenic risk associated with white matter integrity in healthy participants of the UK Biobank?

#### Methods Whole UKB cohort Genetic exclusions N = 485,809 (MS = 2405)N = 109,222 (MS = 303)Non-imaging group + PRS Training Sample Cohort meeting genetic criteria N = 340,537 (MS = 1939)N = 376,587 (MS = 2102)**Optimum PRS selection** (+/- *MHC*) Brain MRI cohort Stroke or neurodegenerative disease (T1-weighted MR) N = 36,050 (MS = 163)Brain MRI cohort Exclusion of remaining MS (T1-weighted MR) N = 163

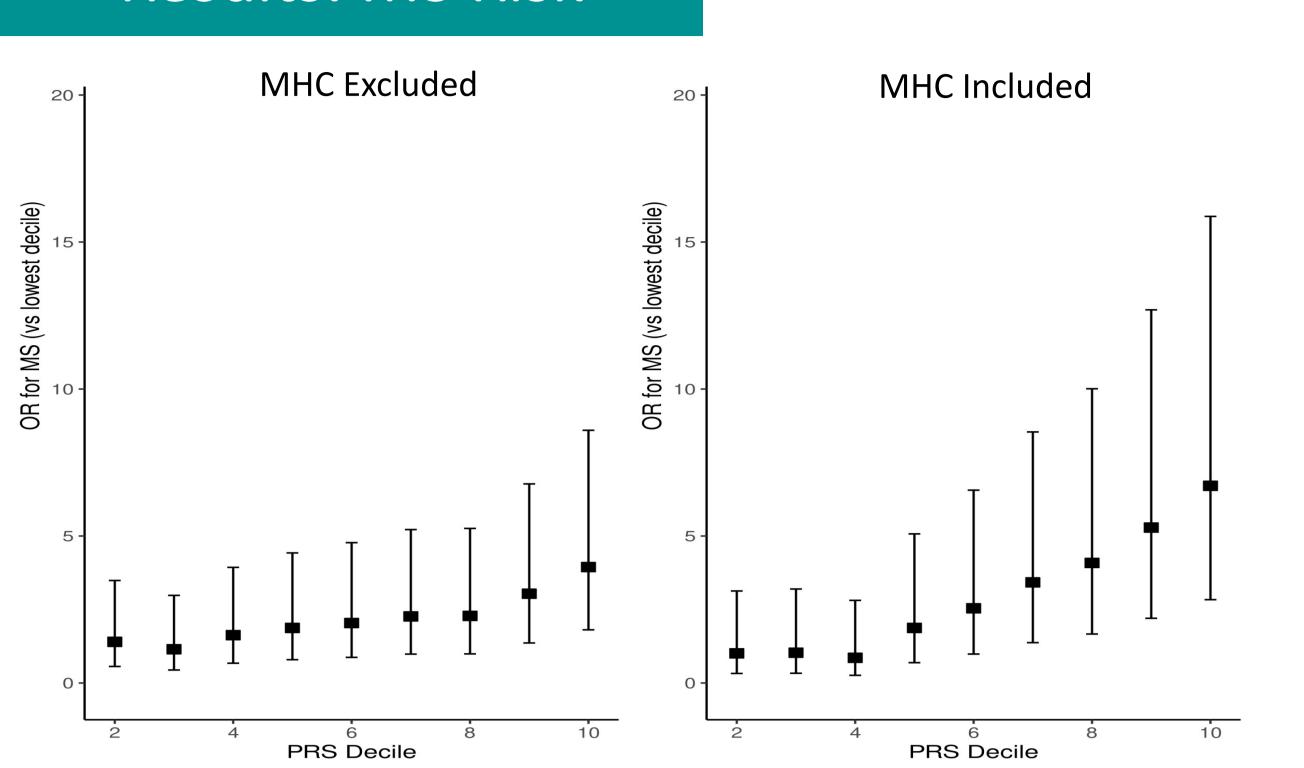
• MS-PRS were derived from IMSGC GWAS<sup>3</sup> summary statistics and imputed genotype data in 485,809 UKB participants.

N = 32,289 (MS = 0)

- Scores were created to include and exclude the Major Histocompatibility Complex (MHC), before optimisation using clumping and thresholding.
- Using linear regression (age, sex and PCs 1-4 adjusted) UKB imaging-derived phenotypes<sup>4</sup> of white matter were used to:
- 1. Examine the neuroanatomical differences between participants with MS (N=163) and controls (N=36,050).
- 2. Examine the association between MS-PRS in healthy adults post genetic exclusions (N=32,289) and both white matter hyperintensity volume and regional fractional anisotropy (FA).



 Optimised MS-PRS explained 3.3% (MHC) and 1.3% (non-MHC) of MS susceptibility (Nagelkerke's Pseudo-R<sup>2</sup>). Results: MS Risk



- MS-PRS was strongly associated with MS susceptibility after logistic regression (age, sex PCs 1-4 adjusted):
  - MHC p=9.98x10<sup>-19</sup>, OR 6.71, 95% CI 2.8-15.9
  - non-MHC: p=2.5x10<sup>-7</sup>, OR 3.94, 95% CI 1.8-8.6

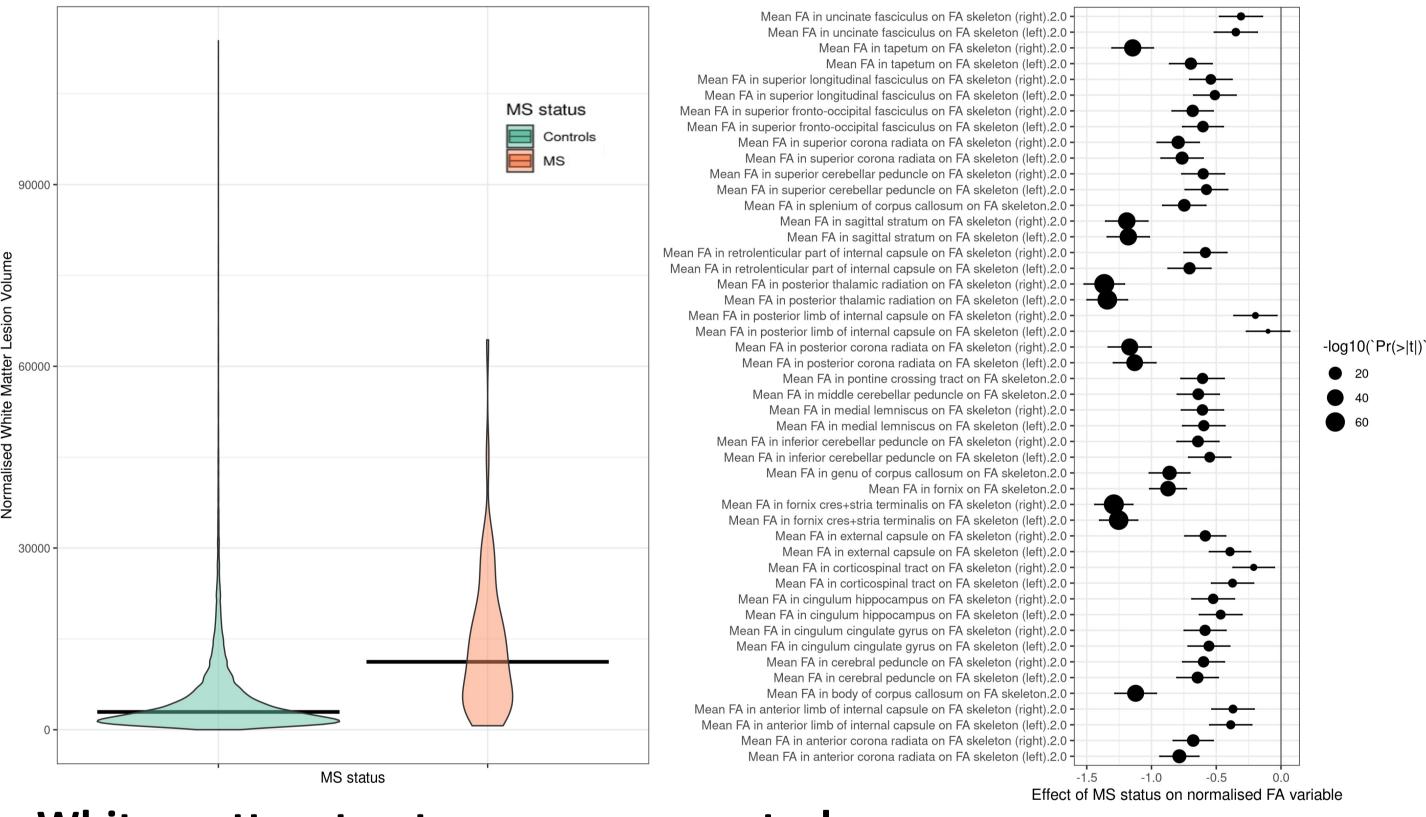
Neuroimaging analyses were thresholded at p<sub>FWE</sub><0.05 over whole brain Covariates: age, sex, scanner & total intracranial volume

# Results: Neuroimaging

#### White matter structure: cases vs controls

White matter hyperintensity burden

Fractional Anisotropy



### White matter structure: cases vs controls

• Individuals with MS had higher total T2 hyperintensity volume and near global reduction in regional FA compared to controls.

### White matter structure: MS-PRS

- Neither the MHC-PRS (p=0.23) nor the non-MHC-PRS (p=0.33) were associated with T2 hyperintensity volume in the healthy controls after linear regression (n=32,289).
- No association exceeded the multiple testing threshold (Bonferroni, alpha=0.05, number of tests=48) between either MHC-PRS or non-MHC PRS and regional FA.

### Conclusions



MS polygenic risk does not correlate with white matter hyperintensity volume or regional fractional anisotropy in healthy adults.



Given our large sample size, our results argue against the concept of healthy adults with high MS genetic risk showing subclinical MRI evidence of disease.

### References:

de Mol et al. White matter microstructural differences in children and genetic risk for multiple sclerosis: A population-based study. Mult. Scler. (2021).
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