

Epigenetic aging as a mediator of racial and ethnic inequalities in mortality: results from the National Health and Nutrition Examination Survey, 1999-2002 mortality follow up study

Social Epigenetics

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The process by which life experiences influence the ways our genes are expressed. Persistent and mitotically heritable alterations in genomic information that do NOT involve changes in DNA sequence.



Racial and ethnic inequalities and disease risk



Chronic

Stress

Social

Disadvantage



Dysregulated

Immune Function



Epigenetic clocks as a mediator between racial/ethnic inequalities and disease



Epigenetic clocks: First generation



Jones, Goodman, and Kobor, 2015

Epigenetic clocks: Second and third generation



3rd Gen. Clock Trained using Aging Phenotype and measurements, produces a instantaneous rate of aging



You want your rate of aging to be below one, this means you would have a slowed pace of aging. An average pace of aging would be a rate of 1 biological year for every chronological year aged.

DunedinPoAm is associated with chronic disease morbidity and mortality. Those with a faster pace of aging are at a 56% increased risk of death and a 54% increased risk for diagnosis of a chronic disease.

Mortality

Those with faster DunedinPoAm levels, which indicates faster aging, at baseline were at increased risk of death having a hazard ratio of 1.29. Hazard ratio represents an instantaneous risk, it is the relationship between the instantaneous hazards between accelerated DunedinPoAm and mortality.

Morbidity

Those with a faster DunedinPoAm baseline were at an increased risk for a new chronic disease, putting them at a hazard ratio of 1.19. Individuals with faster DunedinPoAm experienced higher levels of chronic disease morbidity, which was measured as the count of diagnosed diseases (hypertension, type-2 diabetes, cardiovascular disease, chronic obstructive pulmonary disease, chronic kidney disease, and cancer).

Accelerated Aging Influences

Pace of aging typically increases across much of the adult lifespan. A faster DunedinPoAm is the result of a lifetime of accumulated stress to the methylome. Childhood exposure to poverty and victimization is associated with faster DunedinPoAm. Adolescents who grew up in families of lower socioeconomic-status and adolescents with exposure to multiple types of victimization exhibited faster DunedinPoAm.

Bergesma and Rogaeva, 2020

NHANES background

National Health and Nutrition Examination Survey



- This study started in the early 1960s and is led by the National Center for Health Statistics as part of the CDC to assess the health and nutritional status of adults and children in the United States.
- The ~5,000-person sample is drawn from the entire US population allowing results to be more generalizable than previously investigated.
- NHANES has detailed measures related to potential underlying causes of racial/ethnic disparities:
 - Health behaviors
 - Environmental toxicant exposures
 - Social and economic disadvantage
 - 20 years mortality follow-up

Study Design

- Sample size: 2,535
 - 42% non-Hispanic White, 22% non-Hispanic Black, 35% Hispanic
 - Age 50-85
 - From NHANES 1999-2002
- DNA methylation measured using the Illumina Infinium MethylationEPIC BeadChip
- 13 DNAm clocks and biomarkers will be generated
- A Health Disparities Epigenetic Mapping Project website will be developed to allow researchers easy access to findings.
- All DNAm generated will be made public through the CDC Research Data Center



Health and Retirement Study comparisons with NHANES

Variable	NHANES	HRS
Unique DNAm Biomarkers	Telomere, DunedinPACE	Garagnani, Bocklandt
Sample Size	2,535	4,018
Age	50-85 years (Median 67 y)	(Median 69 y)
Race/Ethnicity	42% non-Hispanic White, 22% non- Hispanic Black, 35% Hispanic	66% non-Hispanic White, 16% non- Hispanic Black, 14% Hispanic
Tissue Type Measured	Venous blood	Venous blood
Sex	49% Female	56% Female
Education	<high (22%),<br="" (47%),="" high="" school="">Some College (18%), College + (14%)</high>	<high (17%),="" (52%),<br="" high="" school="">Some College (6%), College + (24%)</high>

Health and Retirement Study comparisons with NHANES

Similarities	Differences				
Nationally representative	NHANES cross-sectional; HRS longitudinal				
Multidisciplinary content	NHANES more CV, lifestyle screens, and family history				
Rapid public data release	NHANES reports on medications and mental health				
National research data resource	HRS performs cancer screens				
Relies on self-reporting	HRS reports on vaccinations				
Oversample for minorities	HRS provides more economic details				
Similar sampling sizes (6,000-10,000)	NHANES utilizes Medicare/Medicaid claims; HRS Veterans' Affairs				
Perform physical examinations	HRS has birthdates				

NHANES project to date

Clock	Group/Publication	Platform	Probe Number	Units	Train n	Test n	Age Range	Race	Tissue	Normalization	Error	Purpose
Horvath	Horvath	27K & 450K	353	Years	3,900	3,200	0-100	Unknown - 26%, White = 93%, Black = 3%, Asian = 1%, Hispanic = 3%	Pan Tissue (51 types)	Horvath's BMIQ	MAD = 3.6 years	Predict chronological age across tissues and a large age range
Hannum	Hannum/Zhang	450K	71	Years	482	174	19-101	White = 65%, Hispanic = 35%	Blood	Horvath's BMIQ	4.9 years	Predict chronological age.
PhenoAge	Liu/Levine	450K	513	Years	9,926	6,209	20-100	non-Hispanic African American & White	Blood	Horvath's BMIQ (multiple to test)	-	Predict phenotypic age which is a combination of chronological age and 9 mutli-system clinical chemistry biomarkers. Mortality risk.
BloodSkin	Horvath/Raj	450K & EPIC	391	Years	896	1,326	0-94	White, Indigenous, African American, Hispanic	Fibroblasts, keratinocytes, BECs, endothelial, lymphoblastoid, blood, saliva	Horvath's BMIQ	3.4 years	Predict chronological age in fibroblasts and cell types used in ex vivo studies.
Lin	Lin/Wagner	27K	99	Years	575	2,100	19-101	White	Blood	Background Subtracted	5 years	Predicts mortality risk.
Weidner	Weidner/Wagner	450K	3	Years	446		79	White	Blood	Background Subtracted	9-11 years	Predict chronological age.
Vidal-Bralo	Vidal-Bralo/Gonzalez	27K & 450K	8	Years	390	335, 92 & 557	20-89	White	Whole Blood	None?	MAD = 6.07 years	Predicts chronological age. Limited to sites that can be measured on MS- SNuPE
Yang	Teschendorff/Yang	450K	385	Beta level	650	300	70	White = 65%, Hispanic = 35%	Fetal tissue, 12 tissue types, assessed in blood	BMIQ	-	Mitotic-like clock trained in normal and cancer tissues predicting stem cell division by restricting to promoter CpGs in Polycomb group target genes.
Zhang	Visscher/Zhang	450K & EPIC	514	Years	13,661	-	2-104	White	Blood and Saliva (n = 260)	z-score	-	Building a more predictive epigenetic clock
GrimAge	Lu/Horvath	450K	-	Years	1,731	625	mean age 66	White	Blood	Horvath's BMIQ (but also mixed)		A composite biomarker based on 7 DNAm surrogates and smoking packing years to predict lifespan
ounedinPoAm	Belsky/Moffitt	450K & EPIC	173 & 46	Rate of Aging	810	-	26-38	White	Blood	Any normalization method	NA	Predicts the rate of change of 18 organ-system integrity indicators from ages 26, 32,38 years.
DunedinPACE	Belsky/Moffitt	EPIC	173	Rate of Aging	818	-	26-45	White	Blood	Any normalization method	NA	Predicts the rate of change of 19 blood biomarkers from ages 26, 32,38 and 45 years.
Telomere	Horvath/Lu	450K & EPIC	140	Kilobases	2,256	9,345	22-93	40% European, 60% African.	Blood	Mixed; GS, noob, BMIQ, watermelon.	-	To predict telomere length, trained on LTL (leukocyte telomere length) measured by southern blot terminal restriction fragments (TRFs).

- Epigenetic clocks and biomarkers have been produced accessing the data for analysis in the secured CDC facilities is the final hurdle.
- Basic pre-processing, cell proportions and sex predictions completed.
- Data to be released soon.

Adjusting for age in the model

- They state that some variables are associated with age and so age should be adjusted for in the model.
- They calculate EAA in the same way:
 - Epigenetic Age Acceleration (EAA) = residuals(DNAmAge ~ Age)
- They recommend one of two models:
 - EAA ~ Variable + Age
 - DNAmAge ~ Variable + Age

Practice of Epidemiology

Use of Correct and Incorrect Methods of Accounting for Age in Studies of Epigenetic Accelerated Aging: Implications and Recommendations for Best Practices

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Accounting for non-linear effects of age

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RESEARCH PAPER



Age-related epigenetic alterations Aged epigenetic landscape ↓ oxphos, NAD+, Sirt activity increased ↑ acetyl-CoA histone acetylation altered DNA methylation ↓ pyruvate dehydrogenase decreased ↓ acetyl-CoA synthase histone acetylation 1 double-strand breaks interrupted maintenance of epigenetic landscape locus-specific global ↓ stability of PRCs de novo methylation by DNMT3A and DNMT3B ↓ DNMTs decreased methylation maintenance altered histone modifications decrease of repressive histone marks Youthful epigenetic landscape

hypermethylation hypomethylation

increase of activating histone marks (e.g. H3K4me3, H3K36me3, H4K16ac, H4K12ac)

(e.g. H3K9me3, H3K27me3, H4K20me2, H3K56ac)



global reduction in heterochromatin

Human epigenetic ageing is logarithmic with time across the entire lifespan

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> Calculating epigenetic age acceleration to account for non-linearity:

 $EAA2 = residuals(DNAmAge ~ Age + Age^2)$

Two model suggestions:

- 1. EAA2 ~ Variable + Age + Age²
- 2. $DNAmAge \sim Variable + Age + Age^2$

Including cell type proportions (CTPs)

Horvath calculator acknowledges cell types with following measures:

- EEAA = residuals(DNAmAge ~ Age)
- IEAA = residuals(DNAmAge ~ Age + CTPs)

Three model suggestions (all produce same results):

- 1. IEAA ~ Variable + Age + Age² + CTPs
- 2. EEAA ~ Variable + Age + Age² + CTPs
- 3. DNAmAge ~ Variable + Age + Age² + CTPs

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DNA methylation-based measures of biological age: meta-analysis predicting time to death

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Modelling cell type proportions

Assumptions for linear regression:

- Linear relationship Likely met
- Multivariate Normality Likely met
- Homoscedasticity Likely met
- No or little multicollinearity Problematic





Modelling cell type proportions

Proposed solutions so far:

- 1. Raw solves neither issue
- 2. Regress out cell type prior to running model removes variation instead of accounting for it
- 3. Remove cell types until correlated below threshold some variation left unadjusted, how to pick
- 4. PCs-1 from PCA of CTPs solves correlation only as returns compositional data almost unchanged
- 5. PCs-1 from PCA on isometric log ratio transformed CTPs solves both issues but not as interpretable
- 6. Constrained (log-contrast) linear regression with no intercept with raw CTPs solves both issues but not as interpretable

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