

1 Article

2 **A novel genetic marker for the *C9orf72* repeat expansion in the Finnish population**

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31 **Running title:** A novel *C9orf72* repeat expansion-associated SNP

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42 **Abstract**

43 **Background:** *C9orf72* repeat expansion ($C9_{exp}$) is the most common genetic cause underlying
44 frontotemporal lobar degeneration (FTLD) and amyotrophic lateral sclerosis (ALS). However,
45 detection of the $C9_{exp}$ requires elaborate methods. **Objective:** Identification of $C9_{exp}$ carriers
46 from genotyped cohorts could be facilitated by using single nucleotide polymorphisms (SNPs)
47 as markers for the $C9_{exp}$. **Methods:** We elucidated the potential of the previously described
48 Finnish risk haplotype, defined by the SNP rs3849942, to identify potential $C9_{exp}$ carriers
49 among 218,792 Finns using the FinnGen database. The haplotype approach was first tested in
50 an idiopathic normal pressure hydrocephalus (iNPH) patient cohort containing $C9_{exp}$ carriers
51 by comparing intermediate (15-30) and full-length (> 60 repeats) $C9_{exp}$ carriers ($n = 41$) to $C9_{exp}$
52 negative patients (< 15 repeats, $n=801$). **Results:** In this analysis, rs3849942 was associated
53 with carriership of $C9_{exp}$ (OR 8.44, $p < 2 \times 10^{-15}$), while the strongest association was found
54 with rs139185008 (OR 39.4, $p < 5 \times 10^{-18}$). Unbiased analysis of rs139185008 in FinnGen
55 showed the strongest association with FTLD (OR 4.38, 3×10^{-15}) and motor neuron disease ALS
56 (OR 5.19, 3×10^{-21}). rs139185008 was the top SNP in all diseases (iNPH, FTLD, ALS).
57 **Conclusion:** Our findings suggest that rs139185008 is a useful marker to identify potential
58 $C9_{exp}$ carriers in the genotyped cohorts and biobanks originating from Finland.

59

60 **Keywords:** Amyotrophic lateral sclerosis; *C9orf72*; DNA Repeat Expansion; Frontotemporal
61 lobar degeneration; Motor neuron disease; Polymorphism, Single Nucleotide

62

63 **Introduction**

64 Frontotemporal lobar degeneration (FTLD) and amyotrophic lateral sclerosis (ALS) are
65 neurodegenerative disorders sharing genetic and neuropathological similarities [1]. *C9orf72*
66 hexanucleotide repeat expansion ($C9_{exp}$), the most common genetic cause of FTLD and ALS
67 [2], [3], is exceptionally prevalent in Finnish FTLD and ALS patients [4], [5]. Previous studies
68 have suggested that more than 30 units of the $C9_{exp}$ are pathogenic [3], [6]. However, even
69 shorter, so called intermediate $C9_{exp}$ (10 units of repeats) may associate with disease [7].
70 Because it is not possible to sequence the expanded region using whole genome-sequencing,
71 the presence and estimated length of the $C9_{exp}$ can only be determined using repeat-primed
72 PCR, Southern blotting or long-read sequencing [8], [9]. The discovery of specific single
73 nucleotide polymorphisms (SNPs) and groups of SNPs (haplotypes) associating with the $C9_{exp}$
74 would enable identification of potential $C9_{exp}$ carriers from large genotyped cohorts from which
75 the $C9_{exp}$ cannot be detected using current methods. Previously, a Finnish risk haplotype of 42
76 single nucleotide polymorphisms (SNP) was reported to associate with ALS in Finland [10].
77 Moreover, another risk haplotype of 20 SNPs has been shown to associate with FTLD, ALS,
78 and the $C9_{exp}$ in other European and U.S. cohorts [11]. Here, we aimed to identify a SNP that
79 could be used as a genetic marker to identify $C9_{exp}$ carriers in Finnish cohorts. Our findings
80 showed that the variant rs139185008 distinguishes $C9_{exp}$ carriers from non-carriers and
81 associates with the clinical diagnoses of FTLD and ALS in the large population-based FinnGen
82 database. This suggests that rs139185008 might be a powerful genetic marker for the
83 identification of $C9_{exp}$ carriers in other Finnish cohorts as well.

84 **Subjects and Methods**

85 *Cohorts, genotyping and imputations of EADB samples, and clinical endpoints*

86 This study includes GWAS data from the European Alzheimer's Disease DNA BioBank
87 (EADB) and the FinnGen database. EADB data were processed as previously described [12].
88 Finnish idiopathic normal pressure hydrocephalus (iNPH) patients included in the EADB
89 GWAS were diagnosed according to published guidelines and procedures [13], [14]. C9_{exp}
90 genotyping was performed using repeat-primed PCR and amplicon length analysis [3]. The
91 iNPH cohort contains 41 C9_{exp} carriers [7 full-length (> 60 repeats) and 34 intermediate C9_{exp}
92 carriers (15-30 repeats)] and 801 controls (< 15 repeats). Forty-eight percent of C9_{exp} carriers
93 and controls were male.

94 Detailed information of the FinnGen data is described at <https://www.finnngen.fi/fi>. Genome and
95 clinical data from 218,792 individuals were obtained from FinnGen study data release 5.
96 Clinical diagnoses were derived from the International Statistical Classification of Diseases and
97 Related Health Problems, version 10 (ICD-10) codes in Finnish national hospital registries and
98 cause-of-death registry as part of FinnGen project. UK Biobank data were used for validation
99 of the identified SNPs and haplotypes.

100 *Generation of risk haplotypes associating with C9_{exp}*

101 Trans-Omics for Precision Medicine (TOPMed) imputed genotype data from EADB
102 consortium was used [12]. In short, samples were genotyped by using Illumina Infinium Global
103 Screening Array. The samples and variants passing the QC were used as the input of the
104 imputation process. The imputation was performed by the Michigan Imputation Server [12] and
105 TOPMed Freeze5 reference panel [12]. Genotypes were phased with Eagle v2.4105 and
106 imputed with Minimac4 v4-1.0.2. Only SNPs having Hardy-Weinberg equilibrium $p > 10^{-5}$ and
107 imputation quality greater than 0.6 were considered. The imputation quality score for
108 rs139185008 was 0.75. The previously published 20-SNP Finnish risk haplotype [11] was used

109 to test for association with the $C9_{exp}$ (iNPH cohort) and clinical diagnoses (“motor neuron
110 disease” for ALS, “circumscribed brain atrophy” for FTLD; FinnGen). Additional upstream
111 and downstream SNPs were added to create larger haplotypes that were able to distinguish $C9_{exp}$
112 carriers from non-carriers. SNP selection was conducted based on inspection of individual $C9_{exp}$
113 carrier haplotypes of the phased and imputed most probable genotype data. Minor and major
114 alleles included in the haplotypes are presented in Supplementary Table 1.

115 *Analysis of SNP and haplotype association with $C9_{exp}$ and clinical endpoints*

116 Both LD-statistics (D') and case vs. control logistic regression analysis with covariates were
117 conducted on pre-processed imputed genotypes using PLINK software [version 1.9; [15]]. For
118 iNPH cohort, only principal component (PC) 1-2, and for FinnGen PC1-5 were used as
119 covariates. UK Biobank data were extracted through
120 <http://big.stats.ox.ac.uk/variant/9:27491942-T-C>.

121 *Data Presentation*

122 Manhattan and regional association plots were drawn using LocusZoom software (v0.12.0). For
123 LD calculation, European reference population was used. Images were modified using
124 LibreOffice Draw (version: 6.0.2.1). Bar graphs and geographical plot of minor allele
125 frequencies (MAFs) were generated, and Pearson’s Chi-square test on minor vs. major allele
126 counts among Finnish regions was performed using RStudio software (version: 1.1.463) and
127 ggplot2 [16] and geofi packages [17].

128 *Data availability*

129 Data are available on reasonable request from the corresponding authors. Due to privacy
130 policies, the data are not publicly available.

131 ***Ethics statement***

132 All experimental procedures complied with the standards of the Declaration of Helsinki. The
133 Ethics Committee of Hospital District of Northern Savo approved the iNPH study and all
134 patients provided an informed consent. Patients and controls in FinnGen provided informed
135 consent for biobank research, based on the Finnish Biobank Act (<https://www.finnngen.fi/fi>). All
136 DNA samples and data were pseudonymized (iNPH cohort and FinnGen cohort).

137 **Results**

138 *C9_{exp} associates with SNPs near MOB3B and C9orf72 genes*

139 The most common form of hydrocephalus, iNPH, can be characterized by progressive gait
140 impairment, cognitive decline, and loss of bladder control [18]. Recently, the C9_{exp} was shown
141 to be an important genetic etiology for iNPH [19]. Thus, based on genotype data obtained from
142 a global screening array, SNP association analysis was performed in a well-characterized iNPH
143 patient cohort, comprising intermediate (15-30) and full-length (> 60 repeats) C9_{exp} carriers
144 (n = 41) who were compared to non-carriers (< 15 repeats, n = 801). Previous studies have
145 suggested a pathological threshold of >30 units [3], [6] or >45 units [20] for the C9_{exp}. However,
146 intermediate repeats of <30 units may also associate with disease [4], [6], [7], [20]. In these
147 studies, the minimum lengths of the C9_{exp} among intermediate repeat expansion carriers have
148 been identified as 7 [4] and 17 [7], [20] repeats on the longer allele. Here, we chose a threshold
149 of 15 repeats to define individuals positive for the C9_{exp}. Except for two SNPs, all significantly
150 C9_{exp}-associated SNPs ($p < 5 \times 10^{-8}$) were located on chromosome 9 (Figure 1A). Several of
151 these were close or within the MOB kinase activator 3B (*MOB3B*) or *C9orf72* genes, spanning
152 an approx. 94 kb region, and showed a strong linkage disequilibrium (LD) ($r^2 \geq 0.8$) with the
153 reference SNP rs3849942 (Figure 1B), a previously reported surrogate marker for the
154 chromosome 9p risk haplotype [2], [11]. Interestingly, rs139185008 (odds ratio, OR = 39.4,
155 95% CI [17.2-90.5], $p = 4.6 \times 10^{-18}$), localizing within a recombination-poor region 81 541 bp
156 upstream of the C9_{exp}, showed the strongest single SNP association with C9_{exp} carriership. Also,
157 rs139185008 (MAF 0.016) was in complete LD ($D' = 1.00$) with the reference SNP rs3849942
158 (MAF 0.17), which showed a weaker association with C9_{exp} carriership (OR 8.44, 95% CI
159 [4.99-140.29], $p = 2.0 \times 10^{-15}$). Importantly, rs139185008 was highly abundant in C9_{exp} carriers
160 (minor allele frequency, MAF for full-length and intermediate carriers = 0.21 and 0.19,
161 respectively), but rare in non-carriers (<15 repeats, MAF = 0.008). Several C9_{exp}-associated

162 haplotypes were significantly overrepresented in C9_{exp} carriers as compared to non-carriers in
163 the iNPH cohort (Table 1). rs139185008 was part of the haplotypes 2, 5, 8 and 10 showing the
164 most prominent risk effects (OR > 42.0). Moreover, as compared to the previously reported 20-
165 SNP Finnish risk haplotype, including e.g., rs868856, rs7046653, rs2814707, rs3849942, and
166 rs774359 [11] (Figure 1B), the inclusion of rs139185008 to haplotypes (“haplo”) 2, 5, 8 and 10
167 markedly improved the specificity to identify C9_{exp} carriers from non-carriers in the iNPH
168 cohort (Table 1, Supplementary Table 1). E.g., the OR for haplotype 2 (OR = 11.33, 95% CI
169 [6.38-20.14], $p = 1.28 \times 10^{-16}$) substantially increased after the inclusion of rs139185008
170 (OR = 42.74, 95% CI [18.35-99.53], $p = 3.16 \times 10^{-18}$).

171 *rs139185008 strongly associates with FTLD and ALS in FinnGen*

172 Next, we unbiasedly examined in the FinnGen database which clinical diagnoses associate with
173 the SNPs and haplotypes identified in the iNPH cohort. The FinnGen database contains
174 comprehensive genome-wide genotype data and life-long medical history from >200,000 Finns.
175 However, FinnGen does not include genetic data on complex genomic alterations, such as
176 C9_{exp}. rs139185008 and haplotypes 2, 5, 8, and 10 containing the minor allele of rs139185008
177 strongly associated with ALS and FTLD (Table 1). In comparison, the previously reported 20-
178 SNP Finnish risk haplotype [11] showed a weaker association with ALS and FTLD (haplo 2,
179 Table 1). In FinnGen, rs139185008 was the top SNP that associated with ALS and FTLD,
180 confirming the result obtained in the iNPH GWAS (Figure 1B). Importantly, rs139185008 also
181 significantly associated with ALS in UK Biobank ($p = 9.0 \times 10^{-8}$), but it was not among the top
182 SNPs associated with ALS (beta value = -0.4; p values < 4.0×10^{-19}).

183 *rs139185008 is regionally enriched to South-Eastern Finland*

184 Finally, we used FinnGen data to calculate the MAF of the rs139185008 according to the region
185 of birth in Finland (Figure 2). Geographically, the rs139185008 minor allele showed the highest

186 prevalence in Southern Savonia (MAF = 0.025) and the lowest in Ostrobothnia (MAF = 0.008)
187 (Figure 2). Pearson's Chi-square test of the frequency of rs139185008 minor allele revealed
188 significant differences in the geographic distribution of rs139185008 in Finland ($p < 2.2 \times 10^{-16}$,
189 $X^2 = 282.43$, $df = 18$).

190 **Discussion**

191 We report that rs139185008 strongly associates with $C9_{exp}$ in a cohort of iNPH cases, suggesting
192 surrogate marker potential for identifying $C9_{exp}$ carriers in large population-based cohorts and
193 biobank databases. rs139185008 indicated stronger association with FTLD and ALS clinical
194 diagnoses in FinnGen (OR 4.4 and 5.2, respectively) as compared to the previously reported
195 $C9_{exp}$ proxy marker rs3849942 (OR 1.2 and 1.6 respectively). The top SNPs differed in FinnGen
196 and UK Biobank, which indicates that there are differences in the $C9_{exp}$ haplotype structures
197 among European populations. In Finland, the frequency of rs139185008 minor allele was
198 highest in South-Eastern Finland, and lowest in the west-coastal Ostrobothnia, which represent
199 genetically different geographical regions. The regional distribution of rs139185008 in Finland
200 is consistent with the most enriched areas of haplotypes of Finnish Heritage Diseases [21], a
201 phenomenon traceable back to the population migration history within Finland and the resulting
202 genetic isolation due to bottleneck events and founder effects. However, rs139185008 is also
203 highly prevalent in panmictic Helsinki and surrounding areas [22] and showed a link to ALS in
204 the UK Biobank, consisting of a more heterogeneous population. In this context, however, it
205 should be emphasized that the beta-value provided by UK biobank for rs139185008 was
206 negative, indicating an odds ratio below one for this SNP. Importantly, similar results (OR < 1)
207 were also observed with some other SNPs significantly associated with ALS in the UK biobank
208 in the *MOB3B/C9orf72* region. Thus, further investigations on the prevalence of rs139185008
209 and its association with $C9_{exp}$ -linked diseases in other populations and cohorts are warranted in
210 the future to evaluate its translational potential beyond Finland and the UK biobank.

211 Collectively, the present data suggest that specific haplotypes containing rs139185008 are
212 useful proxy markers to identify potential C9_{exp} carriers. Since gene-based therapies are
213 emerging in C9_{exp}-linked diseases, the present findings may be utilized in the identification of
214 potential carriers already at an early phase from biobanks and population cohorts for
215 confirmatory C9_{exp} genotyping and subsequent clinical trials in the future.

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220 **Conflict of Interest**

221 Pentti J. Tienari holds a patent on C9orf72 in diagnostics and treatment of ALS/FTLD. The
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- 239 [1] T. Van Langenhove, J. van der Zee and C. Van Broeckhoven, "The molecular basis of the
240 frontotemporal lobar degeneration-amyotrophic lateral sclerosis spectrum," *Ann. Med.*, vol.
241 44, (8), pp. 817-828, Dec, 2012.
- 242 [2] M. DeJesus-Hernandez *et al*, "Expanded GGGGCC hexanucleotide repeat in noncoding
243 region of C9ORF72 causes chromosome 9p-linked FTD and ALS," *Neuron*, vol. 72, (2), pp.
244 245-256, Oct 20, 2011.
- 245 [3] A. E. Renton *et al*, "A hexanucleotide repeat expansion in C9ORF72 is the cause of
246 chromosome 9p21-linked ALS-FTD," *Neuron*, vol. 72, (2), pp. 257-268, Oct 20, 2011.
- 247 [4] J. van der Zee *et al*, "A pan-European study of the C9orf72 repeat associated with FTLD:
248 geographic prevalence, genomic instability, and intermediate repeats," *Hum. Mutat.*, vol. 34,
249 (2), pp. 363-373, Feb, 2013.
- 250 [5] E. Majounie *et al*, "Frequency of the C9orf72 hexanucleotide repeat expansion in patients
251 with amyotrophic lateral sclerosis and frontotemporal dementia: a cross-sectional study,"
252 *Lancet Neurol.*, vol. 11, (4), pp. 323-330, Apr, 2012.
- 253 [6] S. Van Mossevelde *et al*, "Relationship between C9orf72 repeat size and clinical
254 phenotype," *Curr. Opin. Genet. Dev.*, vol. 44, pp. 117-124, Jun, 2017.
- 255 [7] C. P. Cali *et al*, "C9orf72 intermediate repeats are associated with corticobasal
256 degeneration, increased C9orf72 expression and disruption of autophagy," *Acta Neuropathol.*,
257 vol. 138, (5), pp. 795-811, Nov, 2019.
- 258 [8] J. N. Cochran *et al*, "Genome sequencing for early-onset or atypical dementia: high
259 diagnostic yield and frequent observation of multiple contributory alleles," *Cold Spring Harb*
260 *Mol. Case Stud.*, vol. 5, (6), pp. 10.1101/mcs.a003491. Print 2019 Dec, Dec 13, 2019.
- 261 [9] M. T. W. Ebbert *et al*, "Long-read sequencing across the C9orf72 'GGGGCC' repeat
262 expansion: implications for clinical use and genetic discovery efforts in human disease," *Mol.*
263 *Neurodegener.*, vol. 13, (1), pp. 46-018-0274-4, Aug 21, 2018.
- 264 [10] H. Laaksovirta *et al*, "Chromosome 9p21 in amyotrophic lateral sclerosis in Finland: a
265 genome-wide association study," *Lancet Neurol.*, vol. 9, (10), pp. 978-985, Oct, 2010.
- 266 [11] K. Mok *et al*, "Chromosome 9 ALS and FTD locus is probably derived from a single
267 founder," *Neurobiol. Aging*, vol. 33, (1), pp. 209.e3-209.e8, Jan, 2012.
- 268 [12] C. Bellenguez *et al*, "New insights on the genetic etiology of Alzheimer's and related
269 dementia," *medRxiv*, pp. 2020.10.01.20200659, 01/01, 2020.
- 270 [13] A. Junkkari *et al*, "The Kuopio idiopathic normal pressure hydrocephalus protocol: initial
271 outcome of 175 patients," *Fluids Barriers CNS*, vol. 16, (1), pp. 21-019-0142-9, Jul 25, 2019.
- 272 [14] N. Relkin *et al*, "Diagnosing idiopathic normal-pressure hydrocephalus," *Neurosurgery*,
273 vol. 57, (3 Suppl), pp. S4-16; discussion ii-v, Sep, 2005.

274 [15] C. C. Chang *et al*, "Second-generation PLINK: rising to the challenge of larger and richer
275 datasets," *Gigascience*, vol. 4, pp. 7-015-0047-8. eCollection 2015, Feb 25, 2015.

276 [16] H. Wickham *et al*, Ed., *Ggplot2: Elegant Graphics for Data Analysis*. New York:
277 Springer-Verlag, 2016.

278 [17] M. Kainu *et al*, "geofi: Access Finnish Geospatial Data," 2015-2021.

279 [18] J. M Das and M. C. Biagioni, "Normal pressure hydrocephalus," in
280 *StatPearls* Anonymous Treasure Island (FL): StatPearls Publishing LLC, 2021.

281 [19] V. E. Korhonen *et al*, "Prevalence of C9ORF72 Expansion in a Large Series of Patients
282 with Idiopathic Normal-Pressure Hydrocephalus," *Dement. Geriatr. Cogn. Disord.*, vol. 47,
283 (1-2), pp. 91-103, 2019.

284 [20] K. Kaivola *et al*, "Carriership of two copies of C9orf72 hexanucleotide repeat
285 intermediate-length alleles is a risk factor for ALS in the Finnish population," *Acta*
286 *Neuropathologica Communications*, vol. 8, (1), pp. 187, 11/09, 2020.

287 [21] A. R. Martin *et al*, "Haplotype Sharing Provides Insights into Fine-Scale Population
288 History and Disease in Finland," *Am. J. Hum. Genet.*, vol. 102, (5), pp. 760-775, May 3, 2018.

289 [22] A. de la Chapelle and F. A. Wright, "Linkage disequilibrium mapping in isolated
290 populations: the example of Finland revisited," *Proc. Natl. Acad. Sci. U. S. A.*, vol. 95, (21),
291 pp. 12416-12423, Oct 13, 1998.

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Table 1. Haplotypes and individual SNPs significantly associating with *C9orf72* repeat expansion ($C9_{exp}$) in the iNPH cohort and ALS and FTLD in the FinnGen cohort

| Haplotype/ SNP | iNPH cohort (<i>C9orf72</i> repeat expansion) | | | | Motor neuron disease ALS (FinnGen) | | | | Frontotemporal lobar degeneration (FinnGen) | | | |
|-------------------|--|------------------------|-------------------------------|-------------------|------------------------------------|------------------------|-------------------|-------------------|---|------------------------|-------------------|-------------------|
| | OR (95% CI) | p | MAF in $C9_{exp}$ carriers | MAF in control | OR (95% CI) | p | MAF in disease | MAF in control | OR (95% CI) | p | MAF in disease | MAF in control |
| haplo 1 | 10.04 (5.79-17.39) | 2.01×10^{-16} | 0.5119 | 0.1038 | 1.68 (1.34-2.12) | 8.40×10^{-06} | 0.1933 | 0.1239 | 1.39 (1.09-1.77) | 7.74×10^{-3} | 0.1653 | 0.1248 |
| haplo 2 | 11.33 (6.38-20.14) | 1.28×10^{-16} | 0.5000 | 0.0943 | 1.81 (1.43-2.28) | 7.05×10^{-07} | 0.1849 | 0.1110 | 1.49 (1.16-1.90) | 1.8×10^{-3} | 0.1570 | 0.1115 |
| haplo 2* | 42.74 (18.35-99.53) | 3.16×10^{-18} | 0.1905 | 0.0071 | 5.26 (3.72-7.42) | 4.05×10^{-21} | 0.0777 | 0.0156 | 4.41 (3.06-6.36) | 1.97×10^{-15} | 0.0641 | 0.0159 |
| haplo 3 | 7.08 (4.04-12.41) | 7.59×10^{-12} | 0.3452 | 0.0802 | 1.94 (1.51-2.49) | 2.72×10^{-07} | 0.1534 | 0.0847 | 1.59 (1.22-2.08) | 0.7×10^{-3} | 0.1281 | 0.0857 |
| haplo 4 | 7.08 (4.04-12.41) | 7.59×10^{-12} | 0.3452 | 0.0802 | 1.94 (1.51-2.5) | 2.57×10^{-07} | 0.1534 | 0.0846 | 1.59 (1.22-2.08) | 6.77×10^{-4} | 0.1281 | 0.0856 |
| haplo 5 | 8.23 (4.64-14.63) | 6.45×10^{-13} | 0.3690 | 0.0820 | 2.12 (1.66-2.71) | 1.65×10^{-09} | 0.1660 | 0.0860 | 1.62 (1.24-2.11) | 4.23×10^{-4} | 0.1302 | 0.0862 |
| haplo 5* | 46.76 (19.71-110.9) | 2.67×10^{-18} | 0.1905 | 0.0065 | 5.12 (3.61-7.26) | 5.40×10^{-20} | 0.0756 | 0.0155 | 4.57 (3.19-6.56) | 1.43×10^{-16} | 0.0661 | 0.0158 |
| haplo 6 | 8.23 (4.64-14.63) | 6.45×10^{-13} | 0.3690 | 0.0820 | 2.12 (1.66-2.71) | 1.64×10^{-09} | 0.1660 | 0.0860 | 1.62 (1.24-2.11) | 4.23×10^{-4} | 0.1302 | 0.0862 |
| haplo 6* | 46.76 (19.71-110.9) | 2.67×10^{-18} | 0.1905 | 0.0065 | 5.12 (3.61-7.26) | 5.40×10^{-20} | 0.0756 | 0.0155 | 4.57 (3.19-6.56) | 1.43×10^{-16} | 0.0661 | 0.0158 |
| haplo 7 | 7.12 (4.07-12.47) | 6.73×10^{-12} | 0.3452 | 0.0796 | 1.94 (1.51-2.5) | 2.40×10^{-07} | 0.1534 | 0.0844 | 1.57 (1.2-2.05) | 1.15×10^{-3} | 0.1260 | 0.0854 |
| haplo 8 | 9.48 (5.12-17.56) | 8.87×10^{-13} | 0.3333 | 0.0696 | 2.15 (1.66-2.79) | 8.82×10^{-09} | 0.1429 | 0.0714 | 1.74 (1.32-2.31) | 9.32×10^{-5} | 0.1178 | 0.0720 |
| haplo 8* | 46.76 (19.71-110.9) | 2.67×10^{-18} | 0.1905 | 0.0065 | 5.12 (3.61-7.27) | 5.27×10^{-20} | 0.0756 | 0.0155 | 4.42 (3.07-6.38) | 1.71×10^{-15} | 0.0641 | 0.0158 |
| haplo 9 | 9.87 (5.32-18.32) | 3.94×10^{-13} | 0.3333 | 0.0666 | 2.23 (1.72-2.89) | 1.85×10^{-09} | 0.1429 | 0.0690 | 1.81 (1.37-2.39) | 3.33×10^{-5} | 0.1178 | 0.0697 |
| haplo 10 | 7.68 (4.13-14.3) | 1.24×10^{-10} | 0.2500 | 0.0495 | 2.39 (1.83-3.13) | 2.24×10^{-10} | 0.1303 | 0.0589 | 1.86 (1.39-2.5) | 3.17×10^{-5} | 0.1054 | 0.0597 |
| haplo 10* | 46.51 (19.09-113.3) | 2.88×10^{-17} | 0.1786 | 0.0059 | 5.68 (3.98-8.1) | 1.12×10^{-21} | 0.0735 | 0.0137 | 4.84 (3.33-7.02) | 1.13×10^{-16} | 0.0620 | 0.0140 |
| rs139185008 | 39.41 (17.17-90.49) | 4.58×10^{-18} | 0.1905 | 0.007665 | 5.19 (3.69-7.3) | 2.57×10^{-21} | 0.0798 | 0.0163 | 4.38 (3.05-6.28) | 1.08×10^{-15} | 0.0661 | 0.0166 |
| rs3849942 | 8.44 (4.99-14.29) | 2.04×10^{-15} | 0.5595 | 0.1486 | 1.58 (1.28-1.95) | 1.94×10^{-05} | 0.2437 | 0.1698 | 1.22 (0.97-1.53) | 8.53×10^{-2} | 0.1983 | 0.1704 |

Notes: iNPH cohort $N_{carriers/control} = 41/801$; Motor neuron disease ALS $N_{cases/control} = 238/111,855$; Frontotemporal lobar degeneration $N_{cases/control} = 242/214,474$; * denotes that variant chr9_27491944_T_C (rs139185008) was added to haplotype analysis; chromosomal positions of SNPs constituting haplotypes are listed in Supplementary Table 1

Abbreviations: CI, confidence interval; FTLD, frontotemporal lobar degeneration; haplo, haplotype; iNPH, idiopathic normal pressure hydrocephalus; MAF, minor allele frequency; N, number of subjects; OR, odds ratio; SNP, single-nucleotide polymorphism

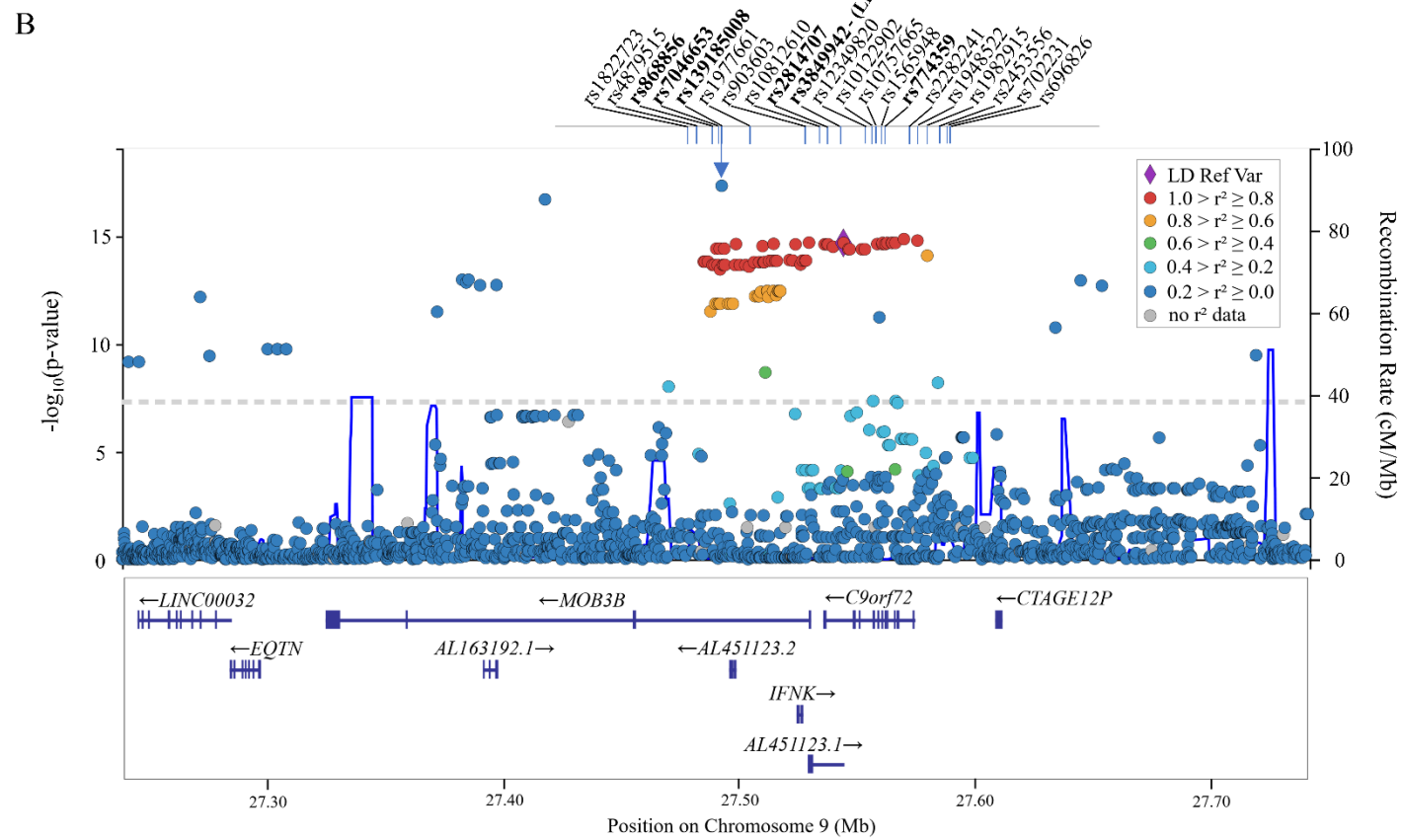
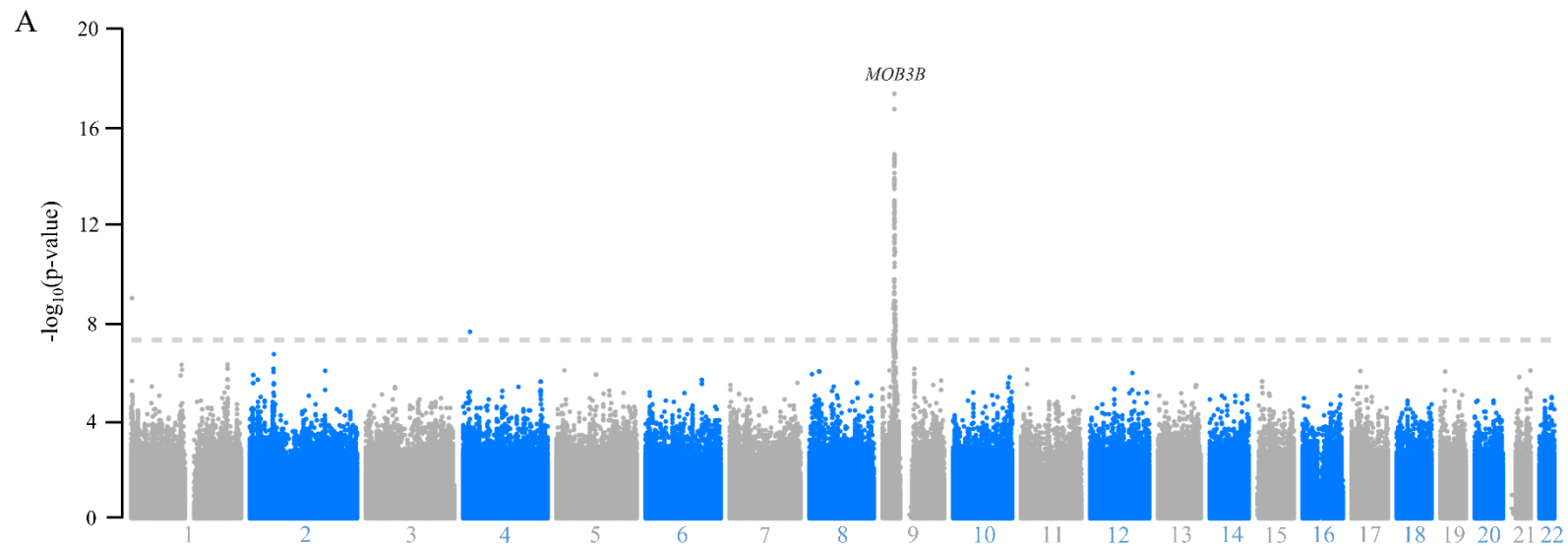


Figure 1: SNPs associating with the *C9orf72* repeat expansion in iNPH cohort locate near the *MOB3B* and *C9orf72* genes. Manhattan plot of genome-wide association (GWA) of SNPs associated with the *C9orf72* expansion in a Finnish iNPH cohort. Chromosome numbers are indicated below the x-axis (**A**). Regional association plot of chromosome 9 locus, which contained significant association from the GWA study. SNPs of the previously described Finnish risk haplotype [11] and rs139185008 (arrow) are indicated above the plot. Significantly associated SNPs are indicated in bold. Linkage disequilibrium is indicated as color-coded r^2 values. Recombination rates are depicted by continuous line. The reference variant rs3849942 is shown as a diamond. (**B**). Gray lines indicate significance level ($p < 5 \times 10^{-8}$). Abbreviations: iNPH, idiopathic normal pressure hydrocephalus; SNP, single nucleotide polymorphism

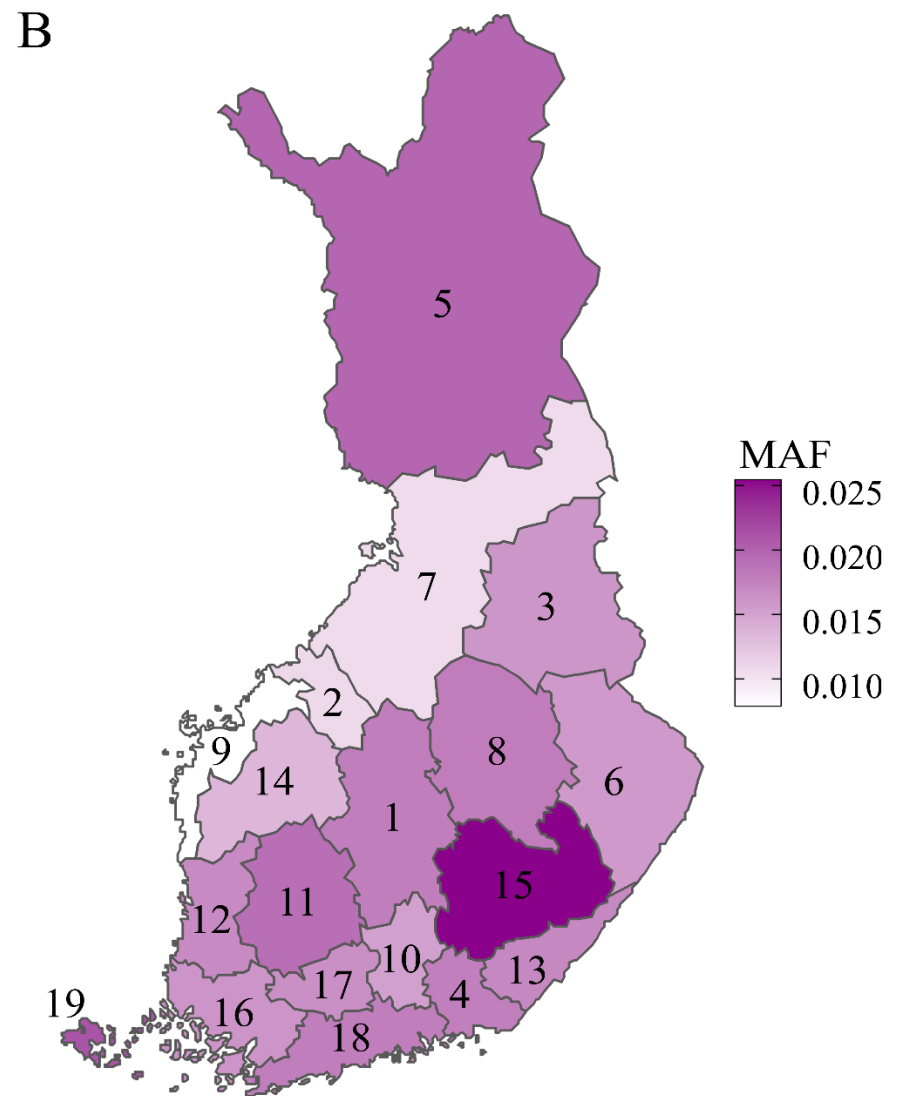
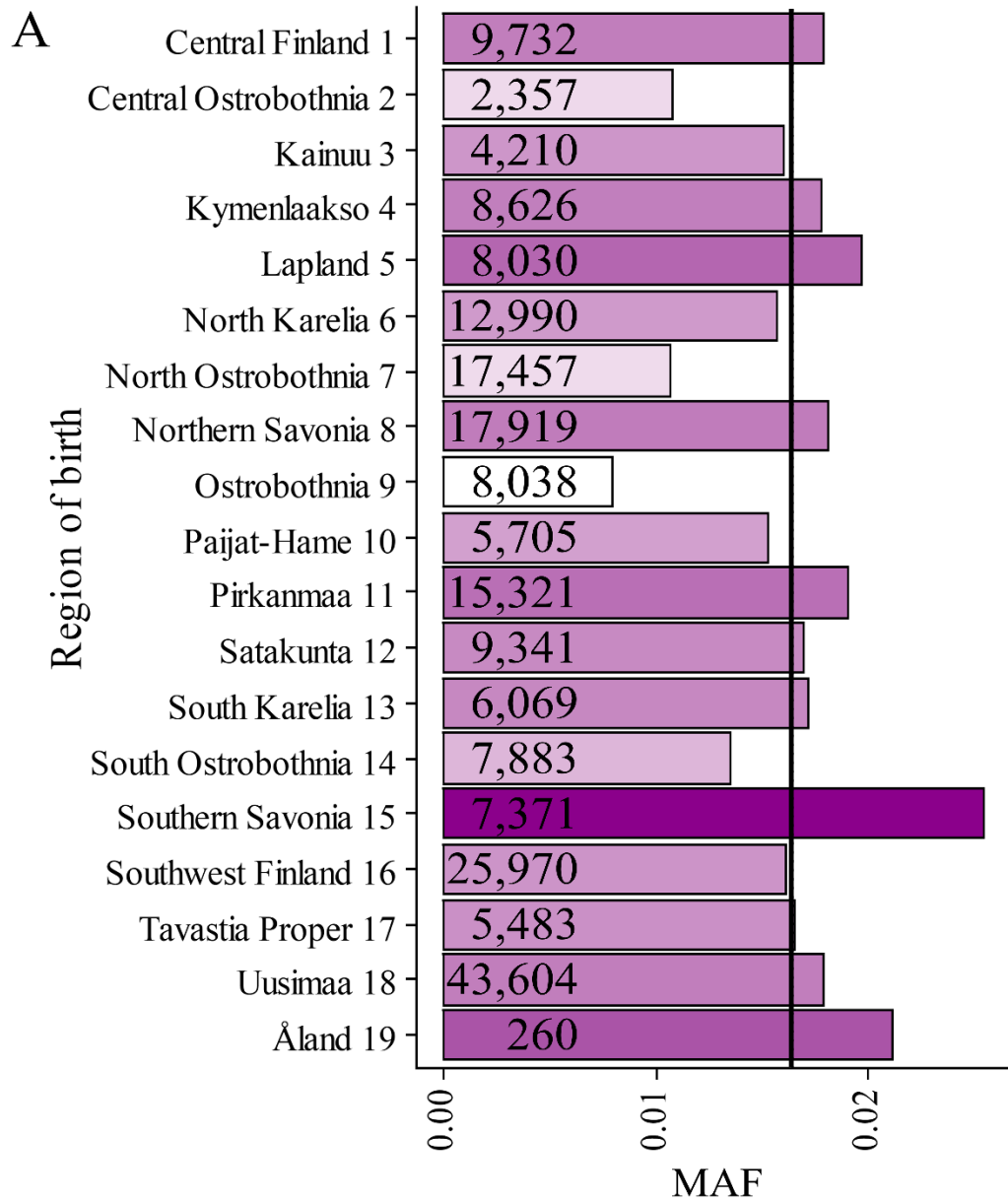


Figure 2: Geographical distribution of rs139185008 minor allele frequencies in different regions in Finland. Minor allele frequencies (MAF) of rs139185008 in Finland. Pearson's Chi-square test revealed statistically significant deviation ($p < 2.2 \times 10^{-16}$, $X^2 = 282.43$, $df = 18$) of the geographical distribution of the minor allele counts of rs139185008. Genotyped population sizes are given for each region. Mean MAF for all regions is indicated as black vertical line (**A**). MAF of rs139185008 within Finnish regions showed geographical clustering of high (dark magenta) and low (white) frequencies (**B**).

Supplementary file

Supplementary Table 1. List of SNPs included in haplotypes

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