bloodeqtlbrowser [ http://www.genenetwork.nl/bloodeqtlbrowser ]

- "a browser available for all significant trans eQTLs and cis eQTLs"
- the browser is down
  - + tried to access it using multiple browsers
  - + Paper came out 4 years ago
  - + email them for full datasets?

+ strange statement: "This browser also provides all trans eQTLs that we detected at a somewhat less stringent FDR of 0.5 to enable more in-depth post hoc analyses."

Supplementary Table 3

Significant cis-eQTLs effects (top effect per probe), having an FDR < 0.5.

Please Note: This list ONLY contains the top-associated cis-eQTL SNP per probe at probe-level FDR < 0.5. For a full list of associated SNPs, please refer to: http://www.genenetwork.nl/bloodeqtlbrowser

Supplementary Table 4 Significant trans - eQTL SNP - probe combinations, having an FDR < 0.5.

Supplementary Table 7

Summary of replication results, listing p - values and Z - scores for trans - eQTL SNP - probe combinations that are significant in the meta - analysis (FDR < 0.05)

5,311 individuals with replication in 2,775 individuals

+ Gene expression data are available for download at the Gene Expression Omnibus (GEO) (GSE36382, GSE20142, GSE20332, GSE33828, GSE33321, GSE47729; EGCUT and InCHIANTI) and ArrayExpress (E-TABM-1036, E-MTAB-945 and E-MTAB-1708).

# Systematic identification of *trans* eQTLs as putative drivers of known disease associations

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Identifying the downstream effects of disease-associated SNPs is challenging. To help overcome this problem, we performed expression quantitative trait locus (eQTL) meta-analysis in non-transformed peripheral blood samples from 5,311 individuals with replication in 2,775 individuals. We identified and replicated trans eQTLs for 233 SNPs (reflecting 103 independent loci) that were previously associated with complex traits at genome-wide significance. Some of these SNPs affect multiple genes in trans that are known to be altered in individuals with disease: rs4917014, previously associated with systemic lupus erythematosus (SLE)<sup>1</sup>, altered gene expression of C1QB and five type I interferon response genes, both hallmarks of SLE<sup>2-4</sup>. DeepSAGE RNA sequencing showed that rs4917014 strongly alters the 3' UTR levels of IKZF1 in cis, and chromatin immunoprecipitation and sequencing analysis of the trans-regulated genes implicated IKZF1 as the causal gene. Variants associated with cholesterol metabolism and type 1 diabetes showed similar phenomena, indicating that large-scale eQTL mapping provides insight into the downstream effects of many trait-associated variants.

Genome-wide association studies (GWAS) have identified thousands of variants that are associated with complex traits and diseases. However, because most variants are noncoding, it is difficult to identify causal genes. Several eQTL-mapping studies<sup>5–8</sup> have shown that disease-predisposing variants often affect the gene expression levels of nearby genes (*cis* eQTLs). A few recent studies have also identified *trans* eQTLs<sup>5,9–13</sup>, showing the downstream consequences of some variants. However, the total number of reported *trans* eQTLs is low, mainly owing to the multiple-testing burden. To improve statistical power, we performed an eQTL meta-analysis in 5,311 peripheral blood samples from 7 studies (EGCUT<sup>14</sup>, InCHIANTI<sup>15</sup>, Rotterdam Study<sup>16</sup>, Fehrmann<sup>5</sup>, HVH<sup>17–19</sup>, SHIP-TREND<sup>20</sup> and DILGOM<sup>21</sup>) and replication analysis in another 2,775 samples. We aimed to ascertain to what extent SNPs affect genes in *cis* and in *trans* and to determine whether eQTL mapping in peripheral blood could identify downstream pathways that might be drivers of disease processes.

Our genome-wide analysis identified *cis* eQTLs for 44% of all tested genes (6,418 genes at probe-level false discovery rate (FDR) <0.05 and 4,690 genes with a more stringent Bonferroni multiple-testing correction; **Table 1, Supplementary Figs. 1–3** and **Supplementary Tables 1–3**). Our *trans*-eQTL analysis focused on 4,542 SNPs that have been implicated in complex disease or traits (derived from the Catalog of Published GWAS; see URLs). In the discovery data set, we detected *trans* eQTLs for 1,513 significant *trans* eQTLs that included 346 unique SNPs (FDR <0.05; 8% of all tested SNPs; **Table 1, Supplementary Fig. 4** and **Supplementary Table 4**) affecting the expression of 430 different genes (643 *trans* eQTLs, including 200 unique SNPs and 223 different genes with a more stringent Bonferroni correction).

We used stringent procedures for *trans*-eQTL detection (**Supplementary Note**) and various benchmarks to ensure reliability: for 26 *trans*-eQTL genes, the eQTL SNP affected multiple probes within these genes (**Supplementary Table 5**), always with consistent allelic directions, suggesting that our probe-filtering procedure was effective in preventing false-positive *trans* eQTLs. *Trans* eQTLs showed similar effect sizes across the various cohorts (**Supplementary Fig. 5**).

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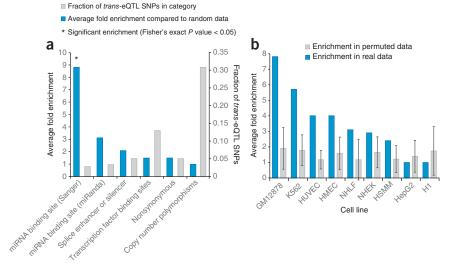
A full list of authors affiliation appears at the end of the paper.

### Table 1 Results of cis- and trans-eQTL mapping analyses

		at a mappe		<b>1</b>
	Cis-eQTL analysis		Trans-eQTL analysis	
	FDR <0.05 significance	Bonferroni significance	FDR <0.05 significance	Bonferroni significance
Number of significant unique SNP-probe pairs	664,097	395,543	1,513	643
Number of significant unique eQTL SNPs	397,310	266,036	346	200
Number of significant unique eQTL probes	8,228	5,738	494	240
Number of significant unique eQTL-regulated genes	6,418	4,690	430	223
Number of significant unique eQTL probes not mapping to genes	636	326	35	13

We did not find evidence that *trans* eQTLs were driven by differences in age or blood cell counts between individuals (**Supplementary Fig. 6**, **Supplementary Table 6** and **Supplementary Note**). However, we cannot exclude this possibility entirely because FACS analyses on individual cell types had not been conducted. We also detected previously reported blood *trans* eQTLs<sup>5</sup> in this study (**Supplementary Fig. 7**, **Supplementary Table 7** and **Supplementary Note**).

To ensure reproducibility of the detected trans eQTLs, we replicated trans eQTLs from our discovery meta-analysis in 2 independent studies of peripheral blood gene expression: 52% in KORA F4 (n = 740samples)<sup>22</sup> and 79% in BSGS (n = 862 samples)<sup>23</sup> (FDR < 0.05; Supplementary Fig. 8). Irrespective of significance, 91% and 93% of all 1,513 significant trans-eQTL SNP-probe combinations showed consistent allelic direction in these replication cohorts compared with in the discovery analysis. A meta-analysis of the two replication studies improved replication rates: 89% of the 1,513 trans eQTLs were significantly replicated (FDR <0.05), with 99.7% showing a consistent allelic direction. Irrespective of significance, 97% of the trans eQTLs showed a consistent allelic direction in this replication meta-analysis (Supplementary Fig. 8). We found that some trans eQTLs could be detected in three cell type-specific data sets (283 monocyte samples<sup>9</sup>, 282 B cell samples9 and 608 HapMap lymphoblastoid cell line (LCL) samples<sup>24</sup>; Supplementary Figs. 9 and 10). Despite the different tissues analyzed in these three studies, we were able to significantly replicate 7%, 4% and 2% of the trans eQTLs (FDR <0.05), respectively. As 95% of the trans-eQTL SNPs explained less than 3% of the total



expression variance (**Supplementary Fig. 11** and **Supplementary Table 6**), we lack statistical power to replicate most *trans* eQTLs in these smaller replication cohorts.

We subsequently confined further analyses to 2,082 different SNPs that have been found to be associated with complex traits at genomewide significance (trait-associated SNPs; reported  $P < 5 \times 10^{-8}$ ; out of 4,542 unique SNPs that we tested). These 2,082 SNPs showed a significantly higher number of trans-eQTL effects compared with the 2,460 tested SNPs with reported disease associations at lower significance levels ( $P = 8 \times 10^{-22}$ ; Supplementary Fig. 12 and Supplementary Note): 254 of these 2,082 SNPs showed a transeQTL effect in the discovery analysis (reflecting 1,340 SNP-probe combinations; 1,201 of these were significantly replicated in blood, reflecting 233 different SNPs and 103 independent loci). For 671 of these 1,340 trans eQTLs (50%), the trait-associated SNP (or a SNP in strong linkage disequilibrium, LD) was the strongest trans-eQTL SNP within the locus or was unlinked to the strongest trans-eQTL SNP (Supplementary Table 8 and Supplementary Note). The 2,082 trait-associated SNPs were 6 times more likely to cause trans-eQTL effects than were randomly selected SNPs (matched for distance to the gene and allele frequency;  $P = 5.6 \times 10^{-49}$ ; Supplementary Fig. 13 and Supplementary Note). SNPs associated with (auto)immune or hematological traits were twice as likely to underlie trans eQTLs compared with other trait-associated SNPs ( $P = 5 \times 10^{-25}$ ; Supplementary Note). Trait-associated SNPs that also caused trans eQTLs affected the expression levels of nearby transcription factors in cis more frequently than trait-associated SNPs that did not affect genes in trans (Fisher's exact *P* = 0.032; **Supplementary Note**), suggesting that some trans eQTLs arise owing to altered cis gene expression levels of nearby transcription factors.

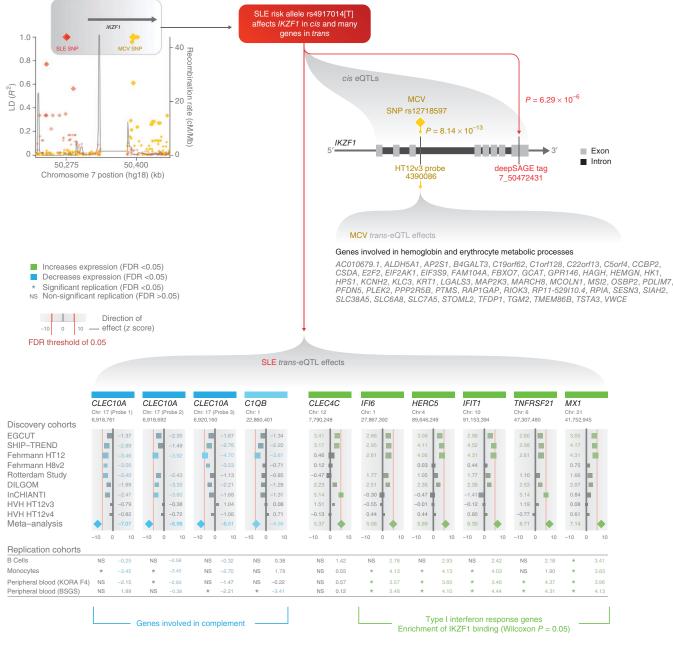
We examined the genomic properties of the *trans*-eQTL SNPs (and their perfect proxies identified using data from the 1000 Genomes Project<sup>25,26</sup>): these SNPs were significantly enriched for mapping within microRNA (miRNA) binding sites (Fisher's exact P < 0.05; **Fig. 1a**). They mapped to regions in K562 (myeloid) and GM12878 (lymphoid) cell lines showing enrichment of histone enhancer signals (fold change >2.5; **Fig. 1b**) compared to the signals observed in six non-blood cell lines. Enhancer enrichment in myeloid and lymphoid cells supports the validity of our blood-derived *trans* eQTLs. These results suggest that *trans*-eQTL effects are tissue specific, a notion that is supported by our inability to replicate a *trans* eQTL that was previously identified in adipose tissue<sup>13</sup> for SNP rs4731702, associated with

both type 2 diabetes (T2D) and lipid levels.

These *trans* eQTLs can provide insight into the pathogenesis of disease. Although RNA microarray studies have identified dysregulated pathways for many complex diseases, it is often unclear whether associated SNPs first cause defects in the pathways whose

Figure 1 Trans-eQTL SNPs are enriched for functional elements. We investigated whether trans-eQTL SNPs are enriched for certain functional elements using the online tools SNPInfo, SNPNexus and HaploReg that rely on data from, among others, the ENCODE Project. (a) Trans-eQTL SNPs are enriched for mapping within miRNA binding sites. (b) Trans-eQTL SNPs show strong enrichment (as annotated using HaploReg) for enhancer regions that are present in K562 (myeloid) and GM12878 (lymphoid) cell lines (error bars, 1 s.d.).

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**Figure 2** Independent *trans*-eQTL effects emanating from the *IKZF1* locus. SNP rs4917014, associated with SLE, and unlinked SNP rs4917014, associated with MCV, both affect the expression of *IKZF1* in *cis.* rs12718597 affects 50 genes in *trans* (mostly involved in hemoglobin metabolism), and rs4917014 affects 8 different genes in *trans*: the rs4917014[T] risk allele is associated with increased expression of genes involved in the type I interferon response. At a somewhat lower significance threshold (FDR = 0.28), rs4917014[T] is associated with decreased complement *C1QB* expression. Both processes are hallmark features of SLE.

dysregulation ultimately leads to disease or vice-versa. One example of this type of complex disease is SLE, which is an autoimmune disease causing inflammation and tissue damage. Individuals with SLE have increased type I interferon (IFN- $\alpha$ ) levels, increased expression of IFN- $\alpha$  response genes<sup>4,27,28</sup> and decreased expression of the *C1Q* complement genes. We observed that four common SLE-associated variants affected IFN- $\alpha$  response genes in *cis* (*IRF5*, *IRF7*, *TAP2* and *PSMB9*; **Supplementary Table 3**). As most SLE-associated SNPs do not map near complement or IFN- $\alpha$  response genes, we assessed whether SLE-associated SNPs affect these genes in *trans*. This was the case for rs4917014, for which the SLE risk allele (rs4917014[T]; showing genome-wide significance in Asian populations and nominal significance in European populations<sup>1,24</sup>) not only increased expression of five different IFN-α response genes (*HERC5*, *IFI6*, *IFIT1*, *MX1* and *TNFRSF21*; **Fig. 2**) but also decreased expression of three different probes in *CLEC10A*. We also observed a nominally significant association of rs4917014[T] with decreased expression of *C1QB* ( $P = 5.2 \times 10^{-6}$ ; FDR = 0.28), encoding a subunit of the C1q complement complex, which has a protective role in lupus: complete deletion of the genes encoding the C1q subunits practically ensures the development of SLE<sup>29,30</sup>. *CLEC10A* and *CLEC4C* belong to the C-type lectin family, which includes mannose-binding lectins (MBLs).

Although, to our knowledge, CLEC10A and CLEC4C have not been studied in the context of SLE, the role of MBLs is similar to that of the C1q complex, and MBLs are a risk factor for the development of autoimmunity in humans and mice<sup>3</sup>. The rs4917014 trans eQTLs replicated well in the peripheral blood and monocyte replication data sets and reinforce the role of altered expression of the IFN-α pathway, C-type lectin and C1Q genes in SLE. Individuals without SLE but who carry the rs497014[T] risk allele show these pathway alterations, indicating that these affected pathways are not solely a consequence of SLE but could precede SLE onset.

We investigated the underlying mechanisms of the effects exerted by rs4917014. IKZF1 is the only gene overlapping the rs4917014 locus. As this gene encodes a transcription factor (Ikaros-family zinc finger 1), cis-regulatory effects of rs4917014 on IKZF1 and consequent altered IKZF1 protein levels could constitute a mechanism for the detected trans-eQTL effects. However, because our metaanalysis did not initially detect a cis eQTL on the Illumina probe for IKZF1 located near the 5' UTR of the gene, we investigated the 3' UTR using Deep Serial Analysis of Gene Expression (DeepSAGE) next-generation RNA sequencing data from 94 peripheral blood samples<sup>31</sup>. The variant rs4917014[T] allele increased expression levels of the 3' UTR of IKZF1 (Spearman's correlation = 0.45;  $P = 6.29 \times 10^{-6}$ ). Using Encyclopedia of DNA Elements (ENCODE) Project<sup>32</sup> chromatin immunoprecipitation and sequencing (ChIPseq) data, we observed significantly increased IKZF1 protein binding within genomic locations corresponding with trans eQTLupregulated genes compared with all other genic DNA (Wilcoxon P value = 0.046) and with SLE cis eQTL-upregulated genes outside of the *IKZF1* locus (Wilcoxon *P* value =  $4.3 \times 10^{-4}$ ), thereby confirming the importance of IKZF1 in SLE. IKZF1 is also important for other phenotypes: rs12718597, an unlinked intronic variant within IKZF1, is associated with mean corpuscular volume (MCV)<sup>33</sup> and affects the expression of Illumina probe 4390086 near the 5' end of *IKZF1* in *cis. Ikzf1* knockout mice show abnormal erythropoiesis<sup>34</sup>, suggesting a causal role for human IKZF1 in MCV as well. However, although rs12718597[A] was associated in trans with the upregulation of 31 genes and with the downregulation of 19 genes, none of the SLE trans-regulated genes overlapped with the MCV trans-regulated genes. The latter were mainly involved in hemoglobin metabolism and did not show increased IKZF1 binding (Wilcoxon P value = 0.35). In summary, these results indicate that IKZF1 has multiple functions and that different SNPs near IKZF1 elicit function-specific effects.

We identified other trans eQTLs showing similar phenomena. For example, rs174546 (located in the 3' UTR of FADS1 and associated with metabolic syndrome35 and with low-density lipoprotein (LDL) and total cholesterol levels<sup>36,37</sup>) affected the expression of TMEM258, FADS1 and FADS2 in cis and the expression of LDLR in trans (Supplementary Fig. 14). LDLR encodes the LDL receptor and contains common variants that are also associated with lipid levels<sup>37</sup>. LDLR gene expression levels correlated negatively  $(P < 3.0 \times 10^{-4})$  with total, high-density lipoprotein (HDL) and LDL cholesterol levels in the tested cohorts (Rotterdam Study and EGCUT; Supplementary Table 9), indicating that peripheral blood is a useful tissue for gaining insight into the downstream effects of lipidregulating SNPs.

For 21 different complex traits, at least 2 unlinked variants that have been associated with these diseases affected exactly the same gene in *trans* (compared with 1 complex trait similarly affected by variants from equally sized but permuted lists of trans eQTLs; Table 2, Supplementary Fig. 15 and Supplementary Table 10). Although most of these traits are hematological (for example, mean platelet volume or

### Table 2 Complex traits where multiple unlinked SNPs affect the same downstream genes

Trait type	Complex trait	Genes affected by at least two unlinked trait-associated SNPs
Immune-related traits	T1D	GBP4, STAT1
	T1D autoantibodies	GBP4, STAT1
	Celiac disease	CXCR6, FYCO1
	Multiple sclerosis	CD5
Blood pressure traits	Diastolic blood pressure	LOC338758
	Systolic blood pressure	LOC338758
Hematological traits	Hemoglobin	ALAS2
	Hematological parameters	FBX07
	F cell distribution	ESPN, PHOSPHO1, GNAS, TSPAN13, VWCE,
	Hematocrit	ALAS2
	Serum markers of iron status	ALAS2
	Red blood cell traits	ALAS2
	Serum iron levels	ALAS2
	Glycated hemoglobin levels	ALAS2
	Hematology traits	ALAS2
	Serum hepcidin	ALAS2
	$\beta$ -thalassemia	PHOSPHO1, VWCE, TSPAN13, ESPN
	Hematological and biochemical traits	AL109955.37-3, RBM38, TRIM58
	Mean corpuscular hemoglobin	ALAS2, C18orf10, DNAJB2, ESPN HBM, KEL, PDZK1IP1, PIM1, PRDX5, RAP1GAP, UBXN6, VWCE, XK
	Mean corpuscular volume	ALAS2, B4GALT3, C18orf10, C1orf128, C22orf13, C5orf4, CCBP2, CSDA, DNAJB2, EIF2AK1, ESPN, FBX07, HAGH, HBM, HPS1, KEL, KLC3, KRT1, LGALS3, MARCH8, MCOLN1, OSBP2, PDZK1IP1, PHOSPH01 PIM1, PLEK2, PPP2R5B, PRDX5, PTMS, RAP1GAP, RIOK3, TGM2, TSTA3, UBXN6, VWCE, XK
	Mean platelet volume	ABCC3, AL353716.18, AQP10, C19orf33, C6orf152, CABP5, CTDSPL, CTTN, CXCL5, ESAM, F13A1, GNB5, GNG11, GP9, GUCY1A3, ITGA2B, ITGB5, LIMS1, LY6G6F, MMRN1, MPL, NRGN, PARVB, PRDX6, PTCRA, RAB27B, RBPMS2, SAMD14, SH3BGRL2, TSPAN9, VCL

serum iron levels), we also observed this convergence for blood pressure, celiac disease, multiple sclerosis and type 1 diabetes (T1D).

rs3184504 (located in an exon of SH2B3) and its proxy rs653178 (located in an intronic region of ATXN2 on chromosome 12) have been associated with several autoimmune diseases, including T1D<sup>38,39</sup> and the production of autoantibodies therein<sup>38,39</sup>, celiac disease<sup>8,40</sup>, hyperthyroidism<sup>41</sup>, vitiligo<sup>42</sup> and rheumatoid arthritis<sup>40</sup>, as well as with other complex traits such as blood pressure<sup>43,44</sup>, chronic kidney disease<sup>45</sup> and eosinophil counts<sup>46</sup>. We observed a *cis*-eQTL effect for this SNP on SH2B3 (FDR < 0.05) and trans-eQTL effects on 14 genes (FDR < 0.05; Fig. 3), all of which are highly expressed in neutrophils. Because the trans-eQTLs effects could be explained by known effect of rs3184504 on differences in cell count proportions<sup>46</sup>, we correlated

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**Figure 3** Two unlinked T1D risk alleles are associated with increased *STAT1* and *GBP4* expression. rs3184504[T], a risk allele for T1D (chromosome 12), affects the expression of *SH2B3* in *cis* but also affects the expression of 14 unique genes in *trans*, including 2 interferon- $\gamma$  response genes, *GBP4* and *STAT1*. Another, unlinked T1D risk allele (rs4788084[C] on chromosome 16) also increases expression of these two interferon- $\gamma$  response genes, suggesting that an elevated interferon- $\gamma$  response is important in T1D.

the expression levels of *trans*-regulated genes with cell counts in two cohorts (Rotterdam Study and EGCUT) but did not observe significant correlations (**Supplementary Table 9**). The identified *trans* eQTLs describe different biological functions: the T1D risk allele rs3184504[T] was associated with decreased expression of nine genes, most of which are involved in Toll-like receptor signaling<sup>47</sup> (*C12orf75, FOS, IDS, IL8, LOC338758, NALP12, PPP1R15A, S100A10* and *TAGAP*) and with increased expression of five genes involved in the interferon- $\gamma$  response (*GBP2, GBP4, STAT1, UBE2L6* and *UPP1*). We observed that another T1D risk allele, rs4788084[C]<sup>38,39</sup> on chromosome 16, was also associated with increased expression of *GBP4* and *STAT1*, showing how different T1D risk alleles converge, with both alleles causing an increase in the expression of interferon- $\gamma$ response genes.

In summary, our eQTL meta-analysis identified and replicated downstream effects for 233 trait-associated SNPs. Our analyses show that *trans*-eQTL mapping in blood for lipid-regulatory and immune-mediated disease variants yields insights into downstream pathways that are biologically meaningful. Future, larger-scale *trans*-eQTL analyses in blood will likely uncover many more of these regulatory relationships.

URLs. Catalog of Published GWAS (16 July 2011), http://www.genome.gov/gwastudies/.

## METHODS

Methods and any associated references are available in the online version of the paper.

Accession codes. We have made a browser available for all significant *trans* eQTLs and *cis* eQTLs at http://www.genenetwork.nl/bloodeqtlbrowser. This browser also provides all *trans* eQTLs that we

detected at a somewhat less stringent FDR of 0.5 to enable more in-depth *post hoc* analyses. Gene expression data are available for download at the Gene Expression Omnibus (GEO) (GSE36382, GSE20142, GSE20332, GSE33828, GSE33321, GSE47729; GSE48348 and GSE48152) and ArrayExpress (E-TABM-1036, E-MTAB-945 and E-MTAB-1708).

Note: Any Supplementary Information and Source Data files are available in the online version of the paper.

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Acknowledgments for each participating cohort can be found in the **Supplementary Note**.

#### AUTHOR CONTRIBUTIONS

Experiment design and method development: H.-J.W., M.J.P., T.E., H.Y., C.S., J. Kettunen, M.W.C., B.P.F., K. Schramm, J. Karjalainen, T.L., Y.L., R.C.J., B.M.P., S.R., A.T., T.M.F., A.M., J.B.J.M. and L. Franke. Reviewing and editing of the manuscript: H.-J.W., M.J.P., T.E., H.Y., C.S., J. Kettunen, M.W.C., B.P.F., A.Z., A.G.U., A.H., F.R., V.S., J.B., T.L., Y.L., R.C.J., P.M.V., J.C.K., B.M.P., S.R., A.T., T.M.F., A.M., J.B.J.M. and L. Franke. Data collection: D.V.Z., J.H.V., J. Karjalainen, S.W., F.R., P.A.C.t.H., E.R., K.F., M. Nelis, L.M., D.M., L. Ferrucci, A.B.S., D.G.H., M.A.N., G.H., M. Nauck, D.R., U.V., M.P., A.S.-D., S.A.G., D.A.E., G.W.M., S.M., H.P., C.H., M.R., H.G., T.M., K. Strauch and L.H.V.d.B. Replication of *trans*-eQTL results: B.P.F., K. Schramm, J.E.P., P.M.V. and J.C.K.

#### COMPETING FINANCIAL INTERESTS

The authors declare no competing financial interests.

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## **ONLINE METHODS**

Study populations. We performed a whole-genome eQTL meta-analysis of 5,311 samples from peripheral blood divided over a total of 9 data sets from 7 cohorts, including EGCUT<sup>14</sup> (n = 891), InCHIANTI<sup>15</sup> (n = 611), Rotterdam Study<sup>16</sup> (n = 762), Fehrmann<sup>5</sup> (n = 1,240 on the Illumina HT12v3 platform and 229 on the Illumina H8v2 platform),  $HVH^{17-19}$  (*n* = 43 on the Illumina HT12v3 platform and 63 on the Illumina HT12v4 platform), SHIP-TREND<sup>20</sup> (n = 963) and DILGOM<sup>21</sup> (n = 509). Gene expression data for each data set were obtained by isolating RNA using either PAXGene (Becton Dickinson) or Tempus (Life Technologies) tubes and then hybridizing RNA to Illumina whole-genome Expression BeadChips (HT12v3, HT12v4 or H8v2 arrays). Gene expression platforms were harmonized by matching probe sequences across the different platforms. Mappings for these sequences were obtained by mapping the sequences against Build 36 of the human genome (Ensembl Build 54, hg18) using the BLAT, BWA and SOAPv2 sequence alignment programs. Highly stringent alignment criteria were used to ensure that probes mapped unequivocally to a single genomic position. Genotype data were acquired using different genotyping platforms and were harmonized by imputation, using the HapMap 2 CEU population as a reference<sup>48</sup>. Each data set was individually checked for sample mix-ups using MixupMapper<sup>49</sup>. For a full descriptions of the individual data sets, the results of the sample mix-up analysis, specifics on the gene expression platforms used and probe mapping and filtering procedures, see the Supplementary Note.

Gene expression normalization. Gene expression data were quantile normalized to the median distribution and were subsequently log<sub>2</sub> transformed. Probe and sample means were centered to zero. Gene expression data were then corrected for possible population structure through the removal of four multidimensional scaling components using linear regression. We reasoned earlier that normalized gene expression data still contain large amounts of nongenetic variation<sup>5</sup>. Therefore, after correction for population stratification, we performed principal-component analysis (PCA) on the sample correlation matrix. We performed a separate QTL analysis for each principal component to ascertain whether genetic variants could be detected that affected each principal component. If we found an effect on the principal component, we did not correct the expression data for this component to ensure that we would not unintentionally remove genetic effects from the expression data. We established the significance of these associations by controlling the FDR, testing each association against a null distribution created by repeating the analysis 100 times (permuting the sample labels for each iteration<sup>50</sup>). Principal components that did not show significance at the FDR threshold of 0.0 were removed from the gene expression data by linear regression. In all but 2 very small data sets, the first 40 principal components were removed (excluding those components for each cohort that showed a QTL effect). We observed that the removal of these 40 components resulted in the identification of the highest number of eQTLs in each data set. Although principal-component correction might remove some eQTL effects, we observed that the majority of trans-eQTL effects (95% when removing 35 principal components and 90% when removing 45 principal components) were independent of the number of principal components removed (Supplementary Fig. 16).

**eQTL mapping.** After normalization of the data, we performed both *cis*and *trans*-eQTL mapping. eQTLs were deemed *cis* eQTLs when the distance between the SNP chromosomal position and the probe midpoint was less than 250 kb, whereas eQTLs with a distance greater than 5 Mb were defined as *trans* eQTLs. Only SNPs with a minor allele frequency (MAF) of >0.05 and a Hardy-Weinberg equilibrium *P* value of >0.001 were included in the analyses. Because most cohorts had generated gene expression data using the HT12v3 platform, we chose to only include probes that were present on this platform. We only tested SNP-probe pairs when the SNP passed quality control in at least three cohorts. Furthermore, to address issues with respect to computational time and multiple testing, we confined our *trans*-eQTL analysis to those SNPs present in the Catalog of Published GWAS (see URLs; accessed 16 July 2011). We reasoned that, for genes with strong *cis*-eQTL effects, a *cis*-eQTL effect might obscure the detectability of *trans* eQTLs. Therefore, we used linear regression to remove *cis*-eQTL effects before *trans*-eQTL mapping and observed a 12% increase in the number of detected trans eQTLs (Supplementary Fig. 17). For each cohort, eQTLs were mapped using a Spearman's rank correlation on imputed genotype dosages. We used a weighted z-score method for subsequent meta-analysis<sup>51</sup>. To generate a realistic null distribution, we permuted the sample identifiers of the expression data and repeated this analysis ten times (Supplementary Fig. 18). In each permutation, the sample labels were permuted. We then corrected for multiple testing by setting the FDR at 0.05, testing each P value in the real data against a null distribution created from the permuted data sets<sup>50</sup> (Supplementary Note). It has been suggested that false-positive eQTL effects can arise owing to polymorphisms in the probe sequences<sup>52,53</sup>. Therefore, we tested whether a significant *cis*-eQTL SNP was in LD ( $r^2 > 0.2$ ) with any SNP in the *cis* probe sequence, using the Western European subpopulations of the 1000 Genomes Project<sup>25</sup> (2011-05-21 release; 286 individuals, excluding Finnish individuals) as a reference. If we observed this to be the case, the respective cis eQTLs were removed. Furthermore, for each trans eQTL, we investigated whether portions of the probe sequence could be mapped to the vicinity of the trans-eQTL SNP (which would imply a cis-eQTL rather than a trans-eQTL effect). For this analysis, we tried to map the trans-eQTL probe sequences, using very permissive settings, within a 5-Mb window centered on the trans-eQTL SNP. SNP-probe combinations where at least 15 bp of the probe mapped within this 5-Mb window were deemed false positives and were removed from further analysis. After this filtering, we recalculated the FDR for both the cis- and trans-eQTL results.

**Trans-eQTL replication.** Replication of the *trans-eQTL* results was carried out in 5 independent data sets from 4 cohorts, including data obtained from LCLs (HapMap 3, n = 608)<sup>24</sup>, B cells and monocytes (Oxford, n = 282 and 283, respectively)<sup>9</sup> and whole peripheral blood (KORA F4, n = 740 and BSGS, n = 862)<sup>22,23</sup>. All cohorts applied the same methodology as used in the discovery phase to normalize gene expression data, check for sample mix-ups and perform *trans-eQTL* mapping, including ten permutations to establish the FDR threshold at 0.05. Finally, we performed a sample size–weighted *z*-score meta-analysis on the two peripheral blood replication cohorts (KORA F4 and BSGS). Further details on these data sets can be found in the **Supplementary Note**.

Enhancer enrichment and functional annotation. To determine whether the significant trans-eQTL SNPs were enriched for functional regions on the genome, we annotated the trans-eQTL SNPs using SNPInfo54, SNPNexus55,56 and HaploReg<sup>57</sup>, which integrate multiple data sources (such as the ENCODE Project<sup>32</sup>, Ensembl<sup>58</sup> and several miRNA databases). We limited these analyses to those trans-eQTL SNPs that were previously shown to be associated with complex traits at genome-wide significance (trait-associated SNPs; reported  $P < 5 \times 10^{-8}$ ). These SNPs were subsequently pruned (using the –clump command in PLINK with  $r^2 < 0.2$ ). We used permuted *trans*-eQTL data to generate realistic null distributions for each of these tools: we selected equally sized sets of unlinked SNPs ( $r^2 < 0.2$  in the Western European subpopulations of the 1000 Genomes Project<sup>25</sup>, 2011-05-21 release; 286 individuals, excluding Finnish individuals) that showed the highest significance in the permuted data, ensuring that only trait-associated SNPs were included in the null distribution, as it is known that trait-associated SNPs in general already have different functional properties than randomly selected SNPs<sup>59</sup> (for example, trait-associated SNPs typically map in closer proximity to genes than randomly selected SNPs). We also ensured that none of the SNPs in the null distribution were affecting genes in *trans* or were linked to those SNPs ( $r^2 < 0.2$  in 1000 Genomes Project data). We then identified perfect proxies ( $r^2 = 1.0$  in 1000 Genomes Project data). For SNPInfo and SNPNexus, we calculated the enrichment for each functional category using a Fisher's exact test. We examined enhancer enrichment in nine different cell types using HaploReg, averaging enhancer enrichment over the ten permutations.

**Convergence analysis.** We determined which unlinked trait-associated SNPs showed eQTL effects on exactly the same gene: for each trait, we analyzed the SNPs that are known to be associated with the trait and assessed whether any unlinked SNP pair ( $r^2 < 0.2$ ; distance between SNPs of >5 Mb) showed a *cis*-and/or *trans*-eQTL effect on exactly the same gene, as previously described<sup>5</sup>. To determine whether the number of traits for which we observed this

phenomenon was higher than expected by chance, we repeated this analysis 20 times, each time using a different set of permuted trans eQTLs, equal in size to the non-permuted set of trans eQTLs.

SLE IKZF1 ENCODE ChIP-seq analysis. We used IKZF1 ChIP-seq signal data obtained from the ENCODE Project<sup>32</sup> (IKZF1 ChIP-seq data acquired and processed by UCSC, ENCODE; March 2012 Freeze). For every human gene, we determined the average signal (corrected for gene size and bias in GC content) and performed a Wilcoxon Mann-Whitney test to determine whether the upregulated genes (MX1, TNFRSF21, IFIT1-LIPA, HERC5, CLEC4C and IFI6) showed a higher ChIP-seq signal than the average signal for all other human genes.

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