

## New Blood Pressure–Associated Loci Identified in Meta-Analyses of 475 000 Individuals

Aldi T. Kraja, DSc, PhD; James P. Cook, PhD; Helen R. Warren, PhD; Praveen Surendran, PhD; Chunyu Liu, PhD; Evangelos Evangelou, PhD; Alisa K. Manning, PhD; Niels Gararup, MD, PhD; Fotios Drenos, PhD; Xueling Sim, PhD; Albert Vernon Smith, PhD; Najaf Amin, DSc, PhD; Alexandra I.F. Blakemore, PhD; Jette Bork-Jensen, PhD; Ivan Brandslund, MD; Alikei-Eleni Farmaki, PhD; Cristiano Fava, MD, PhD; Teresa Ferreira, PhD; Karl-Heinz Herzig, MD, PhD; Ayush Giri, PhD; Franco Giulianini, PhD; Megan L. Grove, MSc; Xiuqing Guo, PhD; Sarah E. Harris, PhD; Christian T. Have, PhD; Aki S. Havulinna, DSc; He Zhang, PhD; Marit E. Jørgensen, MD, PhD; AnneMari Käräjämäki, MD; Charles Kooperberg, PhD; Allan Linneberg, MD, PhD; Louis Little; Yongmei Liu, MD, PhD; Lori L. Bonnycastle, PhD; Yingchang Lu, MD, PhD; Reedik Mägi, PhD; Anubha Mahajan, PhD; Giovanni Malerba, PhD; Riccardo E. Marioni, PhD; Hao Mei, PhD; Cristina Menni, PhD; Alanna C. Morrison, PhD; Sandosh Padmanabhan, MD, PhD; Walter Palmas, MD; Alaitz Poveda, PhD; Rainer Rauramaa, MD, PhD; Nigel William Rayner, PhD; Muhammad Riaz, PhD; Ken Rice, PhD; Melissa A. Richard, PhD; Jennifer A. Smith, PhD; Lorraine Southam, MSc; Alena Stančáková, MD, PhD; Kathleen E. Stirrups, PhD; Vinicius Tragante, PhD; Tiinamaija Tuomi, MD, PhD; Ioanna Tzoulaki, PhD; Tibor V. Varga, PhD; Stefan Weiss, PhD; Andrianos M. Yiorkas, MSc; Robin Young, PhD; Weihua Zhang, PhD; Michael R. Barnes, PhD; Claudia P. Cabrera, PhD; He Gao, PhD; Michael Boehnke, PhD; Eric Boerwinkle, PhD; John C. Chambers, MD, PhD; John M. Connell, MD; Cramer K. Christensen, MD, DMSc; Rudolf A. de Boer, MD, PhD; Ian J. Deary, PhD; George Dedoussis, PhD; Panos Deloukas, PhD; Anna F. Dominiczak, MD, FRCP; Marcus Dörr, MD; Roby Joehanes, PhD; Todd L. Edwards, PhD; Tõnu Esko, PhD; Myriam Fornage, PhD; Nora Franceschini, MD; Paul W. Franks, PhD; Giovanni Gambaro, MD, PhD; Leif Groop, MD, PhD; Göran Hallmans, MD, PhD; Torben Hansen, MD, PhD; Caroline Hayward, PhD; Oksa Heikki, MD, PhD; Erik Ingelsson, MD, PhD; Jaakko Tuomilehto, MD, PhD; Marjo-Riitta Jarvelin, MD, PhD; Sharon L.R. Kardia, PhD; Fredrik Karpe, MD, PhD; Jaspal S. Kooner, MD; Timo A. Lakka, MD, PhD; Claudia Langenberg, MD, PhD; Lars Lind, MD, PhD; Ruth J.F. Loos, PhD; Markku Laakso, MD, PhD; Mark I. McCarthy, MD; Olle Melander, MD, PhD; Karen L. Mohlke, PhD; Andrew P. Morris, PhD; Colin N.A. Palmer, PhD; Oluf Pedersen, MD, DMSc; Ozren Polasek, MD, MPH, PhD; Neil R. Poulter, FMedSci; Michael A. Province, PhD; Bruce M. Psaty, MD, PhD; Paul M. Ridker, MD; Jerome I. Rotter, MD; Igor Rudan, PhD; Veikko Salomaa, MD, PhD; Nilesh J. Samani, MD; Peter J. Sever, MD; Tea Skaaby, MD, PhD; Jeanette M. Stafford, MSc; John M. Starr, PhD; Pim van der Harst, MD, PhD; Peter van der Meer, MD, PhD; The Understanding Society Scientific Group, Cornelia M. van Duijn, PhD; Anne-Claire Vergnaud, PhD; Vilmundur Gudnason, MD, PhD; Nicholas J. Wareham, MD, PhD; James G. Wilson, MD; Cristen J. Willer, PhD; Daniel R. Witte, PhD; Eleftheria Zeggini, PhD; Danish Saleheen, PhD; Adam S. Butterworth, PhD; John Danesh, PhD; Folkert W. Asselbergs, MD, PhD; Louise V. Wain, PhD; Georg B. Ehret, MD; Daniel I. Chasman, PhD; Mark J. Caulfield, MD; Paul Elliott, PhD; Cecilia M. Lindgren, PhD; Daniel Levy, MD; Christopher Newton-Cheh, MD\*; Patricia B. Munroe, PhD\*; Joanna M.M. Howson, PhD\*; on behalf of the CHARGE EXOME BP, CHD Exome+, Exome BP, GoT2D:T2DGenes Consortia, The UK Biobank Cardio-Metabolic Traits Consortium Blood Pressure Working Group†

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†A list of all study participants is given in the [Data Supplement](#).

\*Drs Newton-Cheh, Munroe, and Howson coauthors jointly supervised this project.

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**Background**—Genome-wide association studies have recently identified >400 loci that harbor DNA sequence variants that influence blood pressure (BP). Our earlier studies identified and validated 56 single nucleotide variants (SNVs) associated with BP from meta-analyses of exome chip genotype data. An additional 100 variants yielded suggestive evidence of association.

**Methods and Results**—Here, we augment the sample with 140 886 European individuals from the UK Biobank, in whom 77 of the 100 suggestive SNVs were available for association analysis with systolic BP or diastolic BP or pulse pressure. We performed 2 meta-analyses, one in individuals of European, South Asian, African, and Hispanic descent (pan-ancestry,  $\approx 475\,000$ ), and the other in the subset of individuals of European descent ( $\approx 423\,000$ ). Twenty-one SNVs were genome-wide significant ( $P < 5 \times 10^{-8}$ ) for BP, of which 4 are new BP loci: rs9678851 (missense, *SLC4A1AP*), rs7437940 (*AFAP1*), rs13303 (missense, *STAB1*), and rs1055144 (*7p15.2*). In addition, we identified a potentially independent novel BP-associated SNV, rs3416322 (missense, *SYNPO2L*) at a known locus, uncorrelated with the previously reported SNVs. Two SNVs are associated with expression levels of nearby genes, and SNVs at 3 loci are associated with other traits. One SNV with a minor allele frequency  $< 0.01$ , (rs3025380 at *DBH*) was genome-wide significant.

**Conclusions**—We report 4 novel loci associated with BP regulation, and 1 independent variant at an established BP locus. This analysis highlights several candidate genes with variation that alter protein function or gene expression for potential follow-up. (*Circ Cardiovasc Genet.* 2017;10:e. DOI: 10.1161/CIRCGENETICS.117.001778.)

**Key Words:** blood pressure ■ exome ■ genetics ■ genotype ■ sample size

High blood pressure (BP) is a major risk factor for coronary artery disease, heart failure, stroke, renal failure, and premature mortality.<sup>1</sup> High BP has been estimated to cause 10.7 million deaths worldwide in 2015.<sup>2,3</sup> Pharmacological interventional trials of BP-lowering therapies in patients with hypertension have demonstrated reductions in cardiovascular complications, including mortality.<sup>4</sup> Although several antihypertensive drug classes exist, variability in treatment response by individual patients and ethnic/racial groups, and residual risks, suggests that identification of previously unrecognized BP regulatory pathways could identify novel targets and pave the way for new treatments for cardiovascular disease prevention.

### See Editorial by Morris See Clinical Perspective

Genetic association studies have identified >400 loci at  $P < 5 \times 10^{-8}$  that influence BP.<sup>5–11</sup> Two recent reports independently performed discovery analyses, in sample sizes of up to  $\approx 146\,000$  (CHARGE Exome BP consortium [The Cohorts for Heart and Aging Research in Genomic Epidemiology Consortium]) and  $\approx 192\,000$  individuals (the European-led Exome consortia [contributory consortia, CHD Exome+, ExomeBP, and GoT2D:T2DGenes]).<sup>8,9</sup> All samples were genotyped on the Illumina Exome array that was designed to interrogate rare and low frequency nonsynonymous and other putative functional variants and noncoding variants for association with biomedical traits. They each identified  $\approx 80$  promising single nucleotide variant (SNV) associations with systolic blood pressure (SBP), diastolic blood pressure (DBP), pulse pressure (PP), or hypertension and took them forward for replication in the reciprocal consortium<sup>8,9</sup> resulting in the identification of 56 novel BP-associated loci across the 2 reports, including associations with coding and

rare SNVs. A total of 100 SNVs remained of interest, but did not achieve genome-wide significance. Increasing the sample size is likely to identify additional BP-associated SNVs among these variants.

In the current report, we augmented the sample size of these studies with up to 140 886 European individuals from the UK Biobank and analyzed 77 SNVs available in the UK Biobank for association with SBP, DBP, and PP, in a total sample size of up to  $\approx 475\,000$  individuals (up to  $\approx 423\,000$  European [EUR]).

## Materials and Methods

### Samples

These analyses consisted of a meta-analysis of results from 3 independent publications, the CHARGE Exome BP consortium,<sup>8</sup> European-led Exome consortia (contributory consortia, CHD Exome+, ExomeBP, and GoT2D:T2DGenes),<sup>9</sup> and the BP analyses from the UK Biobank Cardiometabolic consortium.<sup>11</sup>

The CHARGE Exome BP consortium included 120 473 individuals of EUR descent from 15 cohorts, 21 503 individuals of African descent from 10 cohorts, and 4586 individuals of Hispanic ancestry from 2 cohorts as described previously.<sup>8</sup> The European-led consortia included 165 276 individuals of EUR descent from 51 cohorts and 27 487 individuals of South Asian descent from 2 cohorts.<sup>9</sup> The UK Biobank data included 140 886 unrelated individuals of EUR descent.<sup>11</sup>

All samples from the CHARGE and European-led Exome consortia were genotyped on Exome arrays that includes  $\approx 242\,000$  markers >90% of which are nonsynonymous or splice variants, with enrichment for variants with minor allele frequency (MAF)  $< 0.05$ . The UK Biobank used the Affymetrix UK Biobank Axiom Array (approximately 100 000) or the Affymetrix UK BiLEVE Axiom Array (approximately 50 000) to genotype  $\approx 800\,000$  SNVs with subsequent imputation based on UK10K sequencing and 1000 Genomes reference panels. SNVs with an imputation threshold INFO score of  $< 0.10$  were filtered by the Warren et al<sup>11</sup> UK Biobank Nature Genetics 2017 article, from which the SNV association statistics for UK Biobank were provided.<sup>11</sup> Imputation

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Correspondence to Aldi T. Kraja, DSc, PhD, Division of Statistical Genomics, Department of Genetics, Center for Genome Sciences and Systems Biology, Washington University in St. Louis School of Medicine, 4444 Forest Park Ave, 6th Floor, Room 6314, Campus Box 8506, St. Louis, MO 63108. E-mail [aldi@wustl.edu](mailto:aldi@wustl.edu)

scores in the UK Biobank samples for the variants presented in the Table had INFO>0.6. SNVs that produced significant results are highlighted in green in Tables I and II in the [Data Supplement](#), with a median INFO of 1. The studies by Surendran et al,<sup>9</sup> Liu et al,<sup>8</sup> and Warren et al<sup>11</sup> examined genomic inflation factors in the contributing studies and the combined meta-analyses for each of the traits analyzed. Genomic inflation ranged between 1.04 and 1.11 in these contributing studies and therefore did not suggest that there were significant issues with population stratification. In the current analyses, 77 nonvalidated BP-associated SNVs were available for analysis across all 3 data sets.

Institutional review board approval was obtained from each participating cohort, and informed consent was obtained from all subjects.<sup>8,9</sup> The UK Biobank study has approval from the North West Multi-Centre Research Ethics Committee and has Research Tissue Bank approval.

### Phenotypes

Three BP traits were examined: SBP, DBP, and PP, where PP was calculated as the difference between SBP and DBP. For individuals taking antihypertensive therapies, 15 mmHg and 10 mmHg were added to the observed SBP and DBP, respectively, to estimate the BP that would be observed off antihypertensive therapy.<sup>12,13</sup> The traits were approximately normally distributed, and no transformations of the traits were performed.

### Statistical Analyses

In the CHARGE Exome BP consortium, in cohorts of unrelated individuals, single SNV association tests were implemented via linear regression in R/PLINK/SNPTEST. For family-based cohorts linear mixed-effects models in R was used to estimate kinship via R KINSHIP2 package and using the LMEKIN function, to account for familial correlations (<https://cran.r-project.org/web/packages/coxme/vignettes/lmekin.pdf>; Supplemental Table 21 of Liu et al<sup>8</sup>). The component studies of the European-led consortia (CHD Exome+, ExomeBP, and GoT2D:T2D genes) used linear regression as implemented in PLINK<sup>14</sup> or linear mixed models as implemented in Genome-Wide Efficient Mixed Model Association<sup>15</sup> or EPACTS (the Efficient Mixed-Model Association eXpedited,<sup>16</sup> to test variants for association with BP traits. The UK Biobank study used linear regression models as implemented in SNPTEST.<sup>17</sup> All studies assumed an additive allelic effects model.

All studies adjusted for age, age<sup>2</sup>, sex, body mass index, and additional cohort-specific covariates including (where appropriate) principal components of genetic ancestry, field centers, genotyping array, or case/control status for samples ascertained on case/control status for a non-BP trait. Both study-level QC and central QC were performed before the meta-analyses being performed. Full details are given in the reports from the component consortia.<sup>8,9,11</sup>

At the consortium level, meta-analyses of cohort-level association results were performed independently within CHARGE-Exome and the European-led Exome consortia using inverse variance-weighted fixed effects meta-analysis. These meta-analyses results were combined with the UK Biobank association results using fixed-effects inverse variance-weighted meta-analysis as implemented in METAL.<sup>18</sup> Two meta-analyses were performed, one pan-ancestry (PA; AA, European ancestry [EUR], Hispanic, South Asian) and the other of EUR ancestry. Statistical significance was set at genome-wide significance,  $P < 5 \times 10^{-8}$ .

### Functional Annotation

Associated variants were annotated using Human Genome Build 38 dbSNP and Entrez Gene (The National Center for Biotechnology Information). We interrogated publically available gene expression regulatory features from the Encyclopedia of DNA Elements consortium and ROADMAP Epigenome projects using HaploReg<sup>19</sup> and RegulomeDB.<sup>20</sup> Expression quantitative trait loci (eQTLs) were assessed using data from Genotype-Tissue Expression consortium,<sup>21</sup> GRASP,<sup>22</sup> Westra et al,<sup>23</sup> Lappalainen et al,<sup>24</sup> and STARNET.<sup>25</sup> In

addition, we used the FHS eQTL results from microarray-based gene and exon expression levels in whole blood from 5257 individuals.<sup>26</sup> We queried whether any of the 5 BP-associated SNVs were eQTLs for genes in the 5 BP-associated regions or whether they were in LD ( $r^2 > 0.8$ ) with any of the eQTLs for genes in these regions. Where putative eQTLs were identified, we verified the BP-associated SNVs were in LD ( $r^2 > 0.8$ ) with the top eQTL for that gene.

We interrogated publicly available GWAS databases through PhenoScanner,<sup>27</sup> a curated database holding publicly available results from large-scale genome-wide association studies facilitating phenotype scans. We report results for SNVs with  $P$  value  $\leq 5 \times 10^{-8}$ .

Capture HiC interactions were accessed from the Capture HiC Plotter ([www.CHiC.org](http://www.CHiC.org)). Javierre et al<sup>28</sup> used an interaction confidence score derived using CHiCAGO software.<sup>29</sup> The interactions with a CHiCAGO score  $\geq 5$  in at least 1 cell type were considered as high-confidence interactions.

### Results

Association results for the 77 SNVs with the 3 BP traits are shown in Table I in the [Data Supplement](#) for the PA (European, South Asian, African, and Hispanic descent) meta-analysis and in Table II in the [Data Supplement](#) for the EUR meta-analysis. Twenty-one of the 77 SNVs were associated with at least 1 BP trait with genome-wide significance,  $P < 5 \times 10^{-8}$  and concordant directions of effects across the results from all contributing data sets (Table). Sixteen SNVs (*PKN2*, *ARHGEF3*, *AFAP1*, *ANKDD1B*, *LOC105375508*, *ZFAT*, *RABGAP1*, *DBH*, *SYNPO2L*, *BDNF-AS*, *AGBL2*, *NOX4*, *CEP164*, *HOXC4*, *CFDP1*, and *COMT*) were genome-wide significant in both PA and EUR samples. Two SNVs at *SLC4A1AP* and 7p15.2, respectively, were significant only in the PA sample, and 3 SNVs at *STAB1/NT5DC2*, *KDM5A*, and *LACTB* only in the EUR sample. All the significant SNVs were common (MAFs  $\geq 0.19$ ), except the SNV at the *DBH* locus (PA, MAF=0.0043). While this report was in preparation, 17 of these loci were published elsewhere.<sup>7,10,11</sup> Four loci remain novel: rs9678851 (*SLC4A1AP*, missense), rs7437940 (*AFAP1*, intron), rs13303 (*STAB1*, missense), and rs1055144 (7p15.2, noncoding transcript; Figure IA through ID in the [Data Supplement](#)). The *SLC4A1AP* (rs9678851) was associated with SBP, and *AFAP1* (rs7437940) and 7p15.2 (rs1055144) were associated with PP. We also observed a potentially new independent BP association ( $r^2=0.001$  in 1000G EUR and PA samples) at a recently published locus rs34163229 (*SYNPO2L*, missense; Table; Figure IE in the [Data Supplement](#)). We used a conservative  $r^2 < 0.1$  threshold to minimize the possibility of an association because of correlation with a strongly associated established BP variant. Furthermore, conditional analyses within the  $\approx 140000$  UK Biobank participants with comprehensive genomic coverage suggested that the association with SBP of rs34163229 was independent of the established SNV, rs4746172. Regional association plots in UK Biobank are provided in Figure IIA through IIE in the [Data Supplement](#). Conditional analyses within the full data set was not possible given the targeted nature of the Exome array that makes claims of independence provisional. Twenty-two of the 77 SNVs had MAF  $\leq 0.01$ , and 1 rs3025380, a missense variant in *DBH*, was confirmed as a BP-associated locus.

Three of the five newly discovered BP-associated SNVs are missense variants, mapping to *SLC4A1AP*, *STAB1*, and *SYNPO2L* (Table and Table III in the [Data Supplement](#)). At



*SLC4A1AP*, rs9678851 (C>A, Pro139Thr) has MAF=0.46 and the C allele is associated with an increase of 0.23 mm Hg in SBP. This variant is correlated with 2 other missense variants in *C2orf16* (rs1919126 and rs1919125,  $r^2=0.81$  [EUR] based on 1000G,<sup>30</sup> for both). At *STAB1*, the C allele of rs13303 (T>C, Met2506Thr, with MAF=0.44) is associated with an increase of 0.15 mmHg in PP per minor allele in EUR. This residue is located in a conserved region of the protein<sup>31</sup> (Table IV in the [Data Supplement](#)). The T allele of rs34163229, the new association at the *SYNPO2L* locus (G>T, Ser833Tyr, with MAF=0.15), is associated with an increase of 0.36 mmHg in SBP per allele. This variant is in LD with another missense variant in *SYNPO2L* (rs3812629  $r^2=1$ , 1000G EUR).<sup>30</sup> Using Polyphen2 (<http://genetics.bwh.harvard.edu/pph2/index.shtml>), the SNVs rs9678851 in *SLC4A1AP* and rs13303 in *STAB1* were predicted to be benign, whereas rs34163229 in *SYNPO2L* was predicted to have a possible damaging impact on the corresponding human proteins' structure and function.

We interrogated publicly available eQTL data sets through Genotype-Tissue Expression consortium, the Encyclopedia of DNA Elements consortium, RoadMap projects, PhenoScanner,<sup>27</sup> STARNET,<sup>25</sup> and Framingham Heart Study<sup>26</sup> to further highlight potential causal genes and mechanisms at each of the newly identified BP loci (Table III in the [Data Supplement](#)). The PP-associated SNV, rs13303, at *STAB1* is correlated ( $r^2>0.8$  1000G EUR) with the top eQTLs for *NT5DC2* in atherosclerotic lesion-free internal mammary artery, atherosclerotic aortic root, subcutaneous adipose, visceral abdominal fat, and liver tissues (all  $P<1\times 10^{-11}$ ).<sup>25</sup> The rs13303 was also associated with expression levels of *NT5DC2* in EBV-transformed lymphocytes, transformed fibroblasts,<sup>25</sup> and thyroid cells (Table III in the [Data Supplement](#)).<sup>21</sup> The SBP-associated SNV at *SYNPO2L* (rs34163229) is correlated ( $r^2=0.86$  in 1000G EUR) with the top eQTL (rs2177843) for *MYOZ1* in heart atrial appendage tissue (Table III in the [Data Supplement](#)).<sup>21</sup> The 5 new BP associated SNVs were not in LD with the top eQTLs for these gene regions in whole blood in the Framingham Heart Study eQTL data. We also took the opportunity to assess whether the additional 15 recently established genome-wide significant BP-associated SNVs were eQTLs in the Framingham sample. Among the genome-wide significant BP SNVs, 3, rs4680 at *COMT*, rs12680655 at *ZFAT*, and rs10760260 at *RABGAP1*, were the top eQTL for the corresponding genes in whole blood (Table V in the [Data Supplement](#)). We also examined the 5 BP-associated SNVs in endothelial precursor cell Hi-C data ([www.chicp.org](http://www.chicp.org))<sup>28,32</sup> to explore long-range chromatin interactions. rs13303 was found to contact *NISCH* (score 17.34) and rs34163229 contacts *USP54* (score 33.89)

Finally, we assessed the association of the new BP-associated variants and their close proxies ( $r^2>0.8$ ) with cardiovascular disease risk factors, molecular metabolic traits, and clinical phenotypes using PhenoScanner, the NHGRI-EBI GWAS catalog and GRASP.<sup>27</sup> We observed 5 of the newly discovered BP-associated SNVs to have genome-wide significant associations with other traits, including height (7p15.2),<sup>33</sup> waist-to-hip ratio (*STAB1* and 7p15.2),<sup>34,35</sup> triglycerides (*SLC4A1AP*), adiponectin levels (*STAB1*),<sup>36</sup> and atrial

fibrillation (rs7915134 which has  $r^2=0.92$  in the EUR 1000G samples with rs34163229 in *SYNPO2L*<sup>37</sup>; Table III in the [Data Supplement](#)).

Of the 77 analyzed SNVs, from the original Exome array analyses, 56 SNVs were not genome-wide significant in the current analysis. With  $\approx 300$  BP loci reported since the time of our analysis, we investigated whether any of the 56 SNVs that were not genome-wide significant in our meta-analysis have been reported as new BP-associated loci in any of the 3 recent publications.<sup>7,10,11</sup> Twelve SNVs in our data set were located within 1 Mb of a recently reported BP locus: *CACNA1S*, *TSC22D2*, *RPL26LI*, *EDN1*, *GPRC6A*, *ACHE*, *CAV1*, *NOX5*, *PGLYRP2*, *NAPB*, *EDEM2*, and *KCNB1* (Tables I and II in the [Data Supplement](#)) although none of the SNVs were in LD ( $r^2>0.1$  in all 1000G populations) with the published variants at these loci.

## Discussion

We identified genome-wide significant associations with BP for 21 additional SNVs from our original Exome array analyses<sup>8,9</sup> by including UK Biobank participants to augment our sample size to  $\approx 475\,000$  individuals. Four of the 21 BP-related loci we identified were novel, of which 2 were missense variants and 1 was a putative new independent signal at an established locus and was a missense variant.

A missense SNV in *SLC4A1AP* (rs9678851) marks the PP-associated locus on chromosome 2. *SLC4A1AP*, encodes a solute carrier also known as kidney anion exchanger adapter protein although it is widely expressed in most Genotype-Tissue Expression consortium tissues.

At the new locus on chromosome 3 (rs13303), 3 potential candidate genes are highlighted: *STAB1*, *NT5DC2*, and *NISCH*. *STAB1* encodes stabilin1, a protein known to endocytose low-density lipoprotein cholesterol, Gram-positive bacteria and Gram-negative bacteria, and advanced glycosylation end products.<sup>38,39</sup> The gene product is also referred to as CLEVER-1, a common lymphatic endothelial and vascular endothelial receptor-1,<sup>40</sup> which is expressed in macrophages.<sup>41</sup> *SNX17* interacts with *STAB1* and is a trafficking adaptor of *STAB1* in endothelial cells.<sup>38,42</sup> The rs13303 is located 500-bp downstream of *NT5DC2*. This additional gene is highlighted through the association of rs13303 with expression of *NT5DC2* in multiple tissues (Table III in the [Data Supplement](#)). *NT5DC2* encodes the 5'-nucleotidase domain containing 2 protein. The gene is widely expressed, with higher levels observed in the heart and coronary artery, although its function is unknown. Finally, exploration of long-range chromatin interaction identified contact of the SNV region with the genetic sequence including the gene *NISCH*, which encodes the nonadrenergic imidazoline-1 receptor protein localized to the cytosol and anchored to the inner layer of the plasma membrane. This protein binds to the adapter insulin receptor substrate 4 (*IRS4*) to mediate translocation of  $\alpha 5$  integrin from the cell membrane to endosomes. In human cardiac tissue, this protein has been found to affect cell growth and death.<sup>43</sup>

The PP-associated variant, rs7437940, on chromosome 4 is intronic to *AFAP1* and is located in promoter histone marks

**Table. Variants Associated With Systolic Blood Pressure, Diastolic Blood Pressure, or Pulse Pressure in the Pan-Ancestry or European-Ancestry Meta-Analyses in up to ≈475 000 Individuals**

rsID	Gene	Annotation	chr-pos	Trait	Meta	a/2	Freq1	β (SE)	P Value	Dir	HetP	N	UK-BioBank INFO
New loci													
<b>rs9678851</b>	<i>SLC4A1AP</i>	Missense	2-27664167	S	PA	a/c	0.54	-0.23 (0.04)	1.07E-09	---	0.09	474 569	1.0000
<b>rs13303*</b>	<i>STAB1</i>	Missense	3-52523992	P	EUR	t/c	0.44	-0.15 (0.03)	3.72E-08	---	0.11	418 405	1.0000
<b>rs7437940</b>	<i>AFAP1</i>	Intronic	4-7885773	P	EUR, PA	t/c	0.47	-0.15 (0.03)	2.88E-08	---	0.007	420 616	0.9974
<b>rs1055144</b>	7p15.2	Nc-transcript	7-25831489	P	PA	a/g	0.19	0.19 (0.03)	3.47E-08	+++	0.18	453 880	1.0000
Recently reported loci													
rs786906	<i>PKN2</i>	Synonymous	1-88805891	S, P	EUR, PA	t/c	0.44	0.19 (0.03)	1.29E-12	+++	0.08	422 556	1.0000
rs3772219	<i>ARHGFE3</i>	Missense	3-56737223	S, D	EUR, PA	a/c	0.68	0.25 (0.04)	2.00E-10	+++	0.25	474 558	1.0000
rs40060	<i>ANKDD1B</i>	3'UTR	5-75671561	D	EUR, PA	t/c	0.65	-0.17 (0.02)	3.47E-12	---	0.46	422 598	0.9938
rs972283	<i>LOC105375508</i>	Intronic	7-130782095	S, D	EUR, PA	a/g	0.47	-0.23 (0.04)	9.12E-10	---	0.1	474 569	1.0000
rs12680655	<i>ZFAT</i>	Intronic	8-134625094	S, D	EUR, PA	c/g	0.6	-0.29 (0.04)	1.62E-12	---	0.18	402 962	1.0000
rs10760260	<i>RABGAP1</i>	Intronic	9-122951247	P	EUR, PA	t/g	0.14	-0.25 (0.04)	2.88E-10	---	0.12	421 223	0.9975
rs3025380	<i>DBH</i>	Missense	9-133636634	S, D	EUR, PA	c/g	0.004	-1.14 (0.19)	1.23E-09	---	0.05	400 891	0.8763
<b>rs34163229*</b>	<i>SYNPO2L</i>	Missense	10-73647154	S, P	EUR, PA	t/g	0.15	0.36 (0.05)	1.15E-11	+++	0.32	448 759	1.0000
rs925946	<i>BDNF-AS</i>	Intronic	11-27645655	D	EUR, PA	t/g	0.31	-0.16 (0.02)	7.08E-12	---	0.25	474 564	1.0000
rs12286721	<i>AGBL2</i>	Missense	11-47679976	S, D	EUR, PA	a/c	0.56	-0.17 (0.02)	3.39E-13	---	0.05	422 593	1.0000
rs10765211	<i>NOX4</i>	Intronic	11-89495257	P	EUR, PA	a/g	0.38	-0.19 (0.03)	6.46E-12	---	0.05	474 550	0.9964
rs8258	<i>CEP164</i>	3'UTR	11-117412960	P	EUR, PA	a/g	0.37	0.22 (0.03)	1.95E-15	+++	0.003	422 546	1.0000
rs11062385	<i>KDM5A</i>	Missense	12-318409	P	EUR	a/g	0.73	-0.17 (0.03)	2.69E-08	---	0.84	422 563	1.0000
rs7136889†	<i>HOXC4</i>	Intronic	12-54043968	S, P	EUR, PA	t/g	0.69	0.36 (0.05)	1.58E-13	+++	0.33	419 905	0.6070
rs2729835*	<i>LACTB</i>	Missense	15-63141567	S	EUR	a/g	0.68	-0.24 (0.04)	1.29E-08	---	0.25	394 656	1.0000
rs2865531	<i>CFDP1</i>	Intronic	16-75356418	S, P	EUR, PA	a/t	0.6	0.42 (0.06)	2.14E-13	+++	0.51	217 419	0.9998
rs4680	<i>COMT</i>	Missense	22-19963748	P	EUR, PA	a/g	0.51	0.16 (0.03)	2.24E-09	+++	0.005	418 385	1.0000

rsID, SNV name; gene, name of the closest gene or cytogenetic band based on Gene Entrez of NCBI; annotation, SNV annotation based on dbSNP of NCBI; chr-pos, chromosome-bp position in Human Genome build 38; trait, the blood pressure trait (diastolic blood pressure, systolic blood pressure, or pulse pressure) the variant is associated with; meta, the meta-analysis the variant is associated in, Pan-Ancestry or EUROpean; A/2, allele 1/allele 2; freq1, allele frequency for allele 1; β (SE), effect estimate, β and its SE for allele 1 from the corresponding meta-analysis; P value, P from meta-analysis; dir, direction of effect in each of the contributing consortia in the following order: EUROPEAN led Exome Consortia, UK-BIOBANK, and CHARGE-BP Consortium; HetP, P value of heterogeneity across the 3 contributing consortia; N, sample size for the trait and meta-analysis with the lowest P value; UK-BIOBANK INFO, a quality of imputation score in UK BIOBANK. For more details, see Tables I and II in the [Data Supplement](#). D indicates diastolic blood pressure; P, pulse pressure; S, systolic blood pressure; and SNV indicates single nucleotide variant.

\*Potential new signal at a recently reported locus (LD,  $r^2 < 0.1$  with a published BP SNV).

†First report of this variant as genome-wide significant.

in right atrial tissue, based on regulatory chromatin states from DNase and histone ChIP-Seq in Roadmap Epigenomics Consortium (identified with HaploReg, Table IV in the [Data Supplement](#)).<sup>44</sup> *AFAPI* encodes actin filament–associated protein 1. This protein is thought to have a role in the regulation of actin filament integrity, and formation and maintenance of the actin network.<sup>45</sup>

At the locus on chromosome 10 (rs34163229), 2 candidate genes were highlighted (*SYNPO2L* and *MYOZ1*). *SYNPO2L* encodes synaptopodin like 2, which is not well characterized, but may play a role in modulating actin-based shape. The lead SNV is also associated with expression levels of *MYOZ1* in heart appendage tissues. *MYOZ1* encodes myozenin 1, an  $\alpha$ -actinin and gamma filamin binding Z line protein predominantly expressed in skeletal muscle.<sup>46</sup>

At 2 loci (*SLC4A1AP* and *SYNPO2L*), we observed >1 missense variant in high LD ( $r^2 > 0.8$ ). Functional follow-up of these variants are needed to disentangle the causal variants. At the *SLC4A1AP* locus, there are 3 missense variants, none of which are predicted to be damaging. Two of these are in *C2orf16* that is predicted to encode an uncharacterized protein. Current evidence is at the transcriptional level. Cellular assays comparing the function of *SLC4A1AP* with the missense variant may be developed or an animal model could be created and BP can be measured. In the first instance, a knockout model may be required, because of the predicted weak effects of the BP variants. At the *SYNPO2L* locus, the 2 missense variants are both in *SYNPO2L*, of which 1 is predicted damaging, cellular experiments testing functional effects of this variant alone or part of a haplotype maybe a good starting point.

In conclusion, we identified 4 new loci and 1 potential new SNV in a known locus, which influence BP variation and highlight specific genes and pathways that could potentially facilitate an improved understanding of BP regulation, and identify novel therapeutic targets to reduce the burden of cardiovascular disease.

## Appendix

From the Division of Statistical Genomics, Department of Genetics and Center for Genome Sciences and Systems Biology, Washington University School of Medicine, St. Louis, MO (A.T.K., M.A.P.); Department of Biostatistics, University of Liverpool, United Kingdom (J.P.C., A.P.M.); Department of Clinical Pharmacology, William Harvey Research Institute, Barts and The London School of Medicine and Dentistry, Queen Mary University of London, United Kingdom (H.R.W., L.L., K.E.S., C.P.C., M.R.B., P.D., M.J.C., P.B.M.); National Institute for Health Research Barts Cardiovascular Biomedical Research Unit, Queen Mary University of London, United Kingdom (H.R.W., M.R.B., C.P.C., P.D., M.J.C., P.B.M.); MRC/BHF Cardiovascular Epidemiology Centre, Department of Public Health and Primary Care (P.S., R.Y., A.S.B., J.D., J.M.M.H.), Department of Haematology (K.E.S.), Department of Public Health and Primary Care (D.S.), NIHR Blood and Transplant Research Unit in Donor Health and Genomics (J.D.) and British Heart Foundation, Cambridge Centre for Excellence, Department of Medicine (A.S.B., J.D.), University of Cambridge, United Kingdom; The Framingham Heart

Study, MA (C.L., R.J., D.L.); The Population Sciences Branch, Division of Intramural Research, National Heart, Lung, and Blood Institute (C.L., D.L.), Mathematical and Statistical Computing Laboratory, Center for Information Technology (R.J.), National Institutes of Health, Bethesda, MD; Department of Epidemiology and Biostatistics, School of Public Health (E.E., I.T., W.Z., H.G., J.C.C., M.-R.J., A.-C.V., P.E.), Section of Investigative Medicine, Department of Medicine (A.I.F.B., A.M.Y.), MRC-PHE Centre for Environment and Health (I.T., H.G., M.-R.J., P.E.), International Centre for Circulatory Health (N.R.P., P.J.S.), National Institute for Health Research Imperial College Healthcare NHS Trust Biomedical Research Unit (P.E.), Imperial College London, United Kingdom; Department of Hygiene and Epidemiology, University of Ioannina Medical School, Greece (E.E., I.T.); Center for Genomic Medicine (A.K.M., C.N.-C.), Cardiovascular Research Center, Massachusetts General Hospital (C.N.-C.); Department of Medicine (A.K.M., P.M.R., D.I.C.), Institute for Aging Research, Hebrew SeniorLife (R.J.), Harvard Medical School (P.M.R., D.I.C.), Boston, MA; The Novo Nordisk Foundation Center for Basic Metabolic Research, Faculty of Health and Medical Sciences, University of Copenhagen, Denmark (N.G., J.B.-J., C.T.H., T.H., O.P.); Medical Research Council Integrative Epidemiology Unit, School of Social and Community Medicine, University of Bristol, United Kingdom (F.D.); Centre for Cardiovascular Genetics, Institute of Cardiovascular Science (F.D.) and Faculty of Population Health Sciences (F.W.A.), University College London, United Kingdom; Department of Biostatistics and Center for Statistical Genetics (X.S., M.B.), Department of Internal Medicine, Division of Cardiovascular Medicine (H.Z., C.J.W.), Department of Epidemiology, School of Public Health (J.A.S., S.L.R.K.), Department of Computational Medicine and Bioinformatics (C.J.W.) and Department of Human Genetics (C.J.W.), University of Michigan, Ann Arbor; Saw Swee Hock School of Public Health, National University of Singapore (X.S.); Icelandic Heart Association, Kopavogur (A.V.S., V.G.); Faculty of Medicine, University of Iceland, Reykjavik (A.V.S., V.G.); Genetic Epidemiology Unit, Department of Epidemiology, Erasmus Medical Center, Rotterdam, The Netherlands (N.A., C.M.v.D.); Department of Life Sciences, Brunel University London, United Kingdom (A.I.F.B., A.M.Y.); Department of Clinical Biochemistry (I.B.), Medical Department (C.K.C.), Lillebaelt Hospital, Vejle, Denmark; Institute of Regional Health Research, University of Southern Denmark, Odense (I.B.); Department of Nutrition and Dietetics, School of Health Science and Education, Harokopio University, Athens, Greece (A.-E.F., G.D.); Department of Clinical Sciences, University of Lund, Malmö, Sweden (C.F., O.M.); Department of Medicine (C.F.) and Department of Neuroscience, Biomedicine and Movement, Section of Biology and Genetics (G.M.), University of Verona, Italy; Wellcome Trust Centre for Human Genetics (T.F., A.M., N.W.R., L.S., M.I.M., C.M.L.), Oxford Centre for Diabetes, Endocrinology and Metabolism, Radcliffe Department of Medicine (N.W.R., F.K., M.I.M.), and Big Data Institute at the Li Ka Shing Centre for Health Information and Discovery, University of Oxford, United Kingdom (C.M.L.); Research Unit of Biomedicine and Biocenter of Oulu, University of



Oulu, Finland (K.-H.H.); Medical Research Center (MRC) & Oulu University Hospital, Finland (K.-H.H.); Department of Gastroenterology and Metabolism, Poznan University of Medical Sciences, Poland (K.-H.H.); Vanderbilt Epidemiology Center, Institute for Medicine and Public Health, Vanderbilt University Medical Center, Nashville, TN (A.G., T.L.E.); Division of Preventive Medicine, Brigham and Women's Hospital, Boston, MA (F.G., P.M.R., D.I.C.); Human Genetics Center, School of Public Health (M.L.G., A.C.M., M.A.R., E.B.) and Brown Foundation Institute of Molecular Medicine, McGovern Medical School (M.A.R., M.F.), The University of Texas Health Science Center at Houston (M.L.G., A.C.M., E.B.); Institute for Translational Genomics and Population Sciences and Department of Pediatrics, Harbor-UCLA Medical Center, Torrance, CA (X.G., J.I.R.); Centre for Cognitive Ageing and Cognitive Epidemiology (S.E.H., R.E.M., I.J.D., J.M.S.), Centre for Genomic and Experimental Medicine (S.E.H., R.E.M.), Psychology (I.J.D.), Medical Research Council Human Genetics Unit, Institute of Genetics and Molecular Medicine (C.H.), Usher Institute of Population Health Sciences and Informatics (I.R.), and Alzheimer Scotland Research Centre (J.M.S.), University of Edinburgh, United Kingdom; Department of Health (A.S.H., V.S.), Chronic Disease Prevention Unit, National Institute for Health and Welfare (J.T.), and Institute of Molecular Medicine Finland (A.S.H.), Helsinki, Finland; Dasman Diabetes Institute, Kuwait (J.T.); Diabetes Research Group, King Abdulaziz University, Jeddah, Saudi Arabia (J.T.); Department of Neurosciences and Preventive Medicine, Danube University Krems, Austria (J.T.); Steno Diabetes Center, Copenhagen, Gentofte, Denmark (M.E.J.); Department of Primary Health Care, Vaasa Central Hospital, Finland (A.K.); Diabetes Center, Vaasa Health Care Center, Finland (A.K.); Division of Public Health Sciences, Fred Hutchinson Cancer Research Center, Seattle, WA (C.K.); Research Centre for Prevention and Health, The Capital Region of Denmark, Copenhagen (A.L., T.S.); Department of Clinical Experimental Research, Rigshospitalet, Glostrup, Denmark (A.L.); Epidemiology & Prevention Center for Genomics and Personalized Medicine Research, Wake Forest Baptist Medical Center, Medical Center Boulevard, Winston-Salem, NC (Y.Liu); Medical Genomics and Metabolic Genetics Branch, National Human Genome Research Institute, NIH, Bethesda, MD (L.L.B.); Charles Bronfman Institute for Personalized Medicine, Icahn School of Medicine at Mount Sinai, NY (Y.Lu, R.J.F.L.); Division of Epidemiology, Department of Medicine, Vanderbilt-Ingram Cancer Center, Vanderbilt Epidemiology Center, Vanderbilt University School of Medicine, Nashville, TN (Y.Lu); Estonian Genome Center, University of Tartu, Estonia (R.M., T.E.); Department of Data Science (H.M.) and Department of Physiology and Biophysics (J.G.W.), University of Mississippi Medical Center, Jackson; Department of Twin Research & Genetic Epidemiology, King's College London (C.M.); British Heart Foundation Glasgow Cardiovascular Research Centre, Institute of Cardiovascular and Medical Sciences, College of Medical, Veterinary and Life Sciences, University of Glasgow, United Kingdom (S.P., A.F.D.); Department of Medicine, Columbia University Medical Center, New York, NY (W.P.); Department of Clinical Sciences, Genetic and Molecular

Epidemiology Unit, Lund University, Malmö, Sweden (A.P., P.W.F.); Kuopio Research Institute of Exercise Medicine (R.R., T.V.V., T.A.L.), Department of Clinical Physiology and Nuclear Medicine (R.R., T.A.L.), University of Eastern Finland (A.S.), and Department of Medicine, University of Eastern Finland & Kuopio University Hospital (M.L.); Wellcome Trust Sanger Institute, Hinxton, United Kingdom (N.W.R., L.S., E.Z., J.D.); Department of Cardiovascular Sciences (M.R., N.J.S.) and Department of Health Sciences (L.V.W.), University of Leicester, United Kingdom; NIHR Leicester Biomedical Research Centre, Glenfield Hospital, United Kingdom (M.R., N.J.S.); Department of Biostatistics (K.R.), Cardiovascular Health Research Unit, Departments of Medicine, Epidemiology and Health Services, University of Washington, Seattle (B.M.P.); Department of Cardiology, University Medical Center Utrecht, The Netherlands (V.T., F.W.A.); Folkhälsan Research Centre (T.T.) and Department of Endocrinology (T.T.), Helsinki University Central Hospital, Finland; Interfaculty Institute for Genetics and Functional Genomics, University Medicine and Ernst-Moritz-Arndt-University Greifswald, Germany (S.W., M.D.); DZHK (German Centre for Cardiovascular Research), Partner Site Greifswald, Germany (S.W.); Department of Cardiology, Ealing Hospital, London North West Healthcare NHS Trust, United Kingdom (W.Z., J.C.C., J.S.K.); Human Genome Sequencing Center, Baylor College of Medicine, Houston, TX (E.B.); Imperial College Healthcare NHS Trust, London, United Kingdom (J.C.C., J.S.K.); University of Dundee, Ninewells Hospital & Medical School, United Kingdom (J.M.C.); Department of Cardiology (R.A.d.B., P.v.d.H., P.v.d.M.) and Department of Genetics (P.v.d.H.), University of Groningen, University Medical Center Groningen, The Netherlands; Department of Internal Medicine B-Cardiology, Pneumology, Infectious Diseases, Intensive Care Medicine, University Medicine Greifswald, Germany (M.D.); Department of Epidemiology (N.F.) and Department of Genetics (K.L.M.), University of North Carolina, Chapel Hill; Department of Nutrition, Harvard T.H. Chan School of Public Health, Boston, MA (P.W.F.); Department of Public Health & Clinical Medicine (P.W.F.) and Department of Biobank Research (T.T., G.H.), Umeå University, Sweden; Department of Nephrology and Dialysis, Università Cattolica del Sacro Cuore, Roma, Italy (G.G.); Department of Clinical Sciences, Diabetes and Endocrinology, Lund University Diabetes Centre, Malmö, Sweden (L.G.); Finnish Institute for Molecular Medicine (FIMM) (T.T., L.G.), Helsinki University, Finland; Tampere University Hospital, Finland (O.H.); Department of Medicine, Division of Cardiovascular Medicine, Stanford University School of Medicine, CA (E.I.); Department of Medical Sciences, Molecular Epidemiology and Science for Life Laboratory, Uppsala University, Sweden (E.I., L.L.); Center for Life Course Health Research, Faculty of Medicine, University of Oulu, Finland (M.-R.J.); Oxford NIHR Biomedical Research Centre, Oxford University Hospitals Trust, United Kingdom (F.K., M.I.M.); National Heart and Lung Institute, Imperial College London, Hammersmith Hospital Campus, United Kingdom (J.S.K.); Institute of Biomedicine/Physiology, University of Eastern Finland, Kuopio (T.A.L.); MRC Epidemiology Unit, University of Cambridge School of Clinical Medicine, Institute of Metabolic Science,

Cambridge Biomedical Campus, United Kingdom (C.L., N.J.W.); Medical Research Institute, University of Dundee, Ninewells Hospital and Medical School, Scotland, United Kingdom (C.N.A.P.); Faculty of Medicine, University of Split, Croatia (O.P.); Kaiser Permanente Washington Health Research Institute, Seattle, (B.M.P.); Division of Public Health Sciences, Department of Biostatistical Sciences, Wake Forest School of Medicine, Winston-Salem, NC (J.M.S.); Department of Public Health, Aarhus University, Denmark (D.R.W.); Danish Diabetes Academy, Odense, Denmark (D.R.W.); Department of Biostatistics and Epidemiology, Perelman School of Medicine, University of Pennsylvania, Philadelphia (D.S.); Centre for Non-Communicable Diseases, Karachi, Pakistan (D.S.); Center for Complex Disease Genomics, McKusick-Nathans Institute of Genetic Medicine, Johns Hopkins University School of Medicine, Baltimore, MD (G.B.E.); Cardiology, Department of Medicine, Geneva University Hospital, Switzerland (G.B.E.); and Program in Medical and Population Genetics, Broad Institute of Harvard and MIT, Cambridge (C.M.L., C.N.-C.).

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### CLINICAL PERSPECTIVE

We analyzed 77 single nucleotide variants that remained of interest, but did not achieve genome-wide significance with blood pressure (BP) traits from a prior analysis of Exome chip genotypes. A meta-analysis of results from the CHARGE Exome BP and European led consortia in combination with association results from UK Biobank samples (pan-ancestry sample of ≈475 000 and European only sample of ≈423 000) indicated 21 genome-wide significant loci. Four of these are novel BP loci: rs9678851 (missense, *SLC4A1AP*), rs7437940 (*AFAP1*), rs13303 (missense, *STAB1*), and rs1055144 (7p15.2). We also identified a potentially independent novel BP-associated single nucleotide variant, rs3416322 (missense, *SYNPO2L*) at a known locus. Two of the BP-associated single nucleotide variants influence expression levels of nearby genes. These new findings add to the growing number of BP loci and could potentially facilitate an improved understanding of BP regulation, and identify novel therapeutic targets to reduce the burden of cardiovascular disease.