Association of candidate gene polymorphisms with metabolic syndrome and inflammation

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Background and objectives:

Metabolic syndrome is a clustering of phenotypes (central adiposity, glucose intolerance, hypertension, and dyslipidemia) thought to be induced by insulin resistance. According to the Third National Health and Nutrition Examination Survey (NHANES III) and various other studies, the prevalence of metabolic syndrome varies by ethnicity but ranges between 16-25%. This prevalence is steadily increasing worldwide. The public health impact of the syndrome is considerable, since associated morbidities include obesity, type 2 diabetes, atherosclerotic cardiovascular disease, and diseases of the liver and gallbladder. Inflammation is associated with metabolic syndrome, as indicated by an increase in circulating levels of proinflammatory cytokines.

Our objectives were: 1) to identify candidate gene polymorphisms associated with both metabolic syndrome and inflammation, and 2) to analyze these polymorphisms in the NHANES III cohort for significant associations with metabolic syndrome.

Methods:

The study population consisted of participants from NHANES III, a cross-sectional, nationally-representative sample of the U.S. population. Twenty-three polymorphisms within the *IL10*, *TNF*, *CRP*, *TGF\beta1*, *SERPINE1*, *CCR2*, *IL1\beta*, *TLR4*, and *VDR* genes were analyzed based on their proposed biological involvement in metabolic syndrome physiology. The Adult Treatment Panel III (ATP III) criteria were used to identify metabolic syndrome cases from ~ 7000 NHANES III individuals collected from 1991-1994. We analyzed data using logistic regression stratified by race/ethnicity, and included three models with analyses run for both dominant and additive modes of inheritance.



Table 1: Dominant Model Odds Ratios

		Model 1*		Model 2 [†]		Model 3 [‡]						
Predictor	Level	OR (CI)	p-value	OR (CI)	p-value	OR (CI)	p-value					
Non-Hispanic Whites												
rs1800896 (<i>IL10</i>)	GG/GA vs. AA	1.38 (1.03-1.87)	0.025	1.31 (0.96-1.78)	0.070	1.32 (0.97-1.80)	0.064					
rs361525 (<i>TNF</i>)	AA/AG vs. GG	0.46 (0.27-0.81)	0.005	0.43 (0.23-0.78)	0.004	0.33 (0.19-0.58)	0.0001					
rs1417938 (CRP)	TT/TA vs. AA	1.03 (0.64-1.65)	0.906	0.97 (0.55-1.69)	0.896	0.95 (0.49-1.84)	0.866					
rs1800468 (<i>TGFβ1</i>)	AA/AG vs. GG	1.43 (0.86-2.39)	0.146	1.53 (0.86-2.71)	0.125	1.21 (0.74-2.00)	0.421					
rs1799762 (SERPINE1)	4G4G/4G5G vs. 5G5G	0.98 (0.66-1.47)	0.927	0.95 (0.60-1.50)	0.816	0.85 (0.50-1.43)	0.518					
Non-Hispanic Blacks												
rs1800896 (<i>IL10</i>)	GG/GA vs. AA	1.29 (0.84-1.98)	0.215	1.36 (0.90-2.04)	0.120	1.23 (0.80-1.89)	0.311					
rs361525 (<i>TNF</i>)	AA/AG vs. GG	1.16 (0.70-1.93)	0.543	1.42 (0.76-2.64)	0.250	1.65 (0.76-3.55)	0.181					
rs1417938 (<i>CRP</i>)	TT/TA vs. AA	0.64 (0.40-1.02)	0.047	0.54 (0.32-0.91)	0.015	0.60 (0.37-0.96)	0.026					
rs1800468 (<i>TGFβ1</i>)	AA/AG vs. GG	0.46 (0.28-0.76)	0.002	0.46 (0.26-0.81)	0.005	0.47 (0.28-0.81)	0.004					
rs1799762 (SERPINE1)	4G4G/4G5G vs. 5G5G	0.67 (0.44-1.03)	0.053	0.66 (0.42-1.03)	0.055	0.70 (0.43-1.13)	0.123					
Mexican Americans												
rs1800896 (<i>IL10</i>)	GG/GA vs. AA	0.66 (0.40-1.09)	0.086	0.72 (0.41-1.25)	0.2175	0.64 (0.36-1.16)	0.1211					
rs361525 (<i>TNF</i>)	AA/AG vs. GG	1.01 (0.62-1.67)	0.951	1.06 (0.59-1.91)	0.8237	0.89 (0.41-1.93)	0.7463					
rs1417938 (<i>CRP</i>)	TT/TA vs. AA	1.01 (0.67-1.51)	0.977	1.06 (0.66-1.69)	0.8110	0.99 (0.64-1.51)	0.9456					
rs1800468 (<i>TGFβ1</i>)	AA/AG vs. GG	0.94 (0.44-1.99)	0.860	0.88 (0.40-1.95)	0.7461	1.07 (0.50-2.27)	0.8549					
rs1799762 (SERPINE1)	AA/AG vs. GG	1.32 (0.96-1.81)	0.072	1.14 (0.72-1.80)	0.5581	1.09 (0.65-1.81)	0.7374					

^{*}Crude odds ratio

Results:

- The significance of the associations between the polymorphisms and metabolic syndrome differed markedly between the three race/ethnic subpopulations (Tables 1 & 2).
- *IL10* (rs180896) was significantly associated with increased prevalence in crude analysis in non-Hispanic whites (dominant) and with a borderline decreased association in Mexican Americans (additive).
- *TNF* (rs361525) was significantly associated with decreased prevalence of metabolic syndrome in non-Hispanic whites for all three models for both modes of inheritance.
- *CRP* (rs1417938) was significantly associated with decreased prevalence in non-Hispanic blacks in both adjusted models for both inheritance modes, and in the crude model under the dominant mode of inheritance.
- *TGFβ1* (rs1800468) was significantly associated with decreased prevalence of metabolic syndrome in non-Hispanic blacks for all models and both inheritance modes.
- SERPINE1 (rs1799762) was significant for an increased prevalence in Mexican-Americans for the crude additive model.

Discussion/Conclusion:

- Our results indicate an association between polymorphisms in *TNF*, *CRP*, *TGF\beta1*, *IL10* and *SERPINE1* and metabolic syndrome in at least one race/ethnicity subgroup in a representative sample of the U.S. population.
- Racial/ethnic groups differ from each other by genotype frequencies, as well as by environmental, social and behavioral factors. Differences in associations by race/ethnicity may reflect unmeasured gene-environment interactions.
- Understanding how these interactions affect the inflammatory pathway in different subpopulations may enhance development and implementation of public health interventions for those with increased disease susceptibility.

Table 2: Additive Model Odds Ratios

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	Model 1 [*]		Model 2 [†]		Model 3 [‡]							
Predictor	OR (CI)	p-value	OR (CI)	p-value	OR (CI)	p-value						
Non-Hispanic Whites												
rs1800896 (<i>IL10</i>)	1.14 (0.89-1.45)	0.281	1.12 (0.88-1.44)	0.328	1.11 (0.89-1.39)	0.312						
rs361525 (<i>TNF</i>)	0.55 (0.30-1.01)	0.043	0.52 (0.27-1.03)	0.049	0.36 (0.20-0.65)	0.0003						
rs1417938 (CRP)	1.12 (0.78-1.60)	0.525	1.07 (0.70-1.64)	0.747	1.06 (0.63-1.77)	0.819						
rs1800468 (<i>TGFβ1</i>)	1.37 (0.83-2.27)	0.195	1.46 (0.84-2.55)	0.154	1.18 (0.73-1.92)	0.477						
rs1799762 (SERPINE1)	0.91 (0.74-1.13)	0.386	0.88 (0.69-1.11)	0.252	0.81 (0.63-1.04)	0.078						
Non-Hispanic Blacks												
rs1800896 (<i>IL10</i>)	1.16 (0.85-1.58)	0.328	1.17 (0.86-1.58)	0.297	1.08 (0.79-1.49)	0.599						
rs361525 (<i>TNF</i>)	1.12 (0.68-1.84)	0.630	1.34 (0.72-2.47)	0.328	1.52 (0.74-3.14)	0.230						
rs1417938 (<i>CRP</i>)	0.67 (0.43-1.05)	0.068	0.57 (0.35-0.93)	0.017	0.59 (0.39-0.90)	0.011						
rs1800468 (<i>TGFβ1</i>)	0.46 (0.29-0.75)	0.001	0.46 (0.26-0.80)	0.004	0.47 (0.28-0.80)	0.003						
rs1799762 (SERPINE1)	0.73 (0.49-1.08)	0.099	0.71 (0.48-1.05)	0.069	0.73 (0.48-1.10)	0.109						
Mexican Americans												
rs1800896 (<i>IL10</i>)	0.69 (0.47-1.01)	0.044	0.72 (0.47-1.10)	0.108	0.67 (0.44-1.03)	0.054						
rs361525 (<i>TNF</i>)	1.08 (0.69-1.68)	0.731	1.11 (0.67-1.84)	0.673	0.93 (0.47-1.83)	0.830						
rs1417938 (<i>CRP</i>)	1.01 (0.74-1.36)	0.966	1.01 (0.72-1.42)	0.949	0.97 (0.71-1.32)	0.821						
rs1800468 (<i>TGFβ1</i>)	0.92 (0.45-1.91)	0.821	0.87 (0.40-1.88)	0.715	1.05 (0.51-2.19)	0.880						
rs1799762 (SERPINE1)	1.30 (1.08-1.56)	0.003	1.17 (0.94-1.46)	0.137	1.14 (0.89-1.48)	0.275						
*Crude odds ratio												

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[‡]Adjusted for age, sex, serum CRP levels, alcohol consumption, smoking, caloric intake, and carbohydrate intake





[†]Adjusted for age and sex

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