

IS HLA THE CAUSE OF THE HIGH INCIDENCE OF TYPE 1 DIABETES IN THE CANARY ISLANDS? RESULTS FROM THE TYPE 1 DIABETES GENETICS CONSORTIUM (T1DGC)

A.M. Wagner^{1,2}, N. Medina-Rodríguez³, M. Hernández-García⁴, J. Novoa^{1,2}, A. Santana del Pino⁵, Spanish Type 1 Diabetes Genetics Network*, Type 1 Diabetes Genetics Consortium

1. Endocrinology Dept, Complejo Hospitalario Universitario Insular Materno-Infantil, Las Palmas de Gran Canaria, Spain
2. Instituto Universitario de Investigaciones Biomédicas y Sanitarias, Las Palmas de Gran Canaria, Spain
3. Instituto Universitario de Microelectrónica Aplicada, ULPGC, Las Palmas de Gran Canaria, Spain
4. Endocrinology Dept, Hospital Universitari Arnau de Vilanova, Lleida, Spain
5. Mathematics and Statistics Dept, Universidad de Las Palmas de Gran Canaria (ULPGC), Las Palmas de Gran Canaria, Spain.



Background and aims

The incidence of childhood-onset type 1 diabetes in the Canary Islands is the highest described so far in Spain (Carrillo et al 2000, Belinchón et al 2008, Nóvoa et al 2016), and one of the highest worldwide.

Our aim was to assess high-risk and protective *HLA DRB1-DQA1-DQB1* haplotype distribution in the Canarian families included in the T1DGC, compared with the rest of Spain

Materials and methods

The T1DGC is an international effort to study the genetics and pathogenesis of type 1 diabetes. It included more than 3300 families with type 1 diabetes worldwide. Spain provided 149 of these families, of whom 42 were from the Canary Islands Tenerife and Gran Canaria.



HLA was genotyped centrally in Malmö, Sweden (J Carlson et al), using a PCR-based, sequence-specific oligonucleotide probe system and read with specific software (SCORE)

A deterministic algorithm (alleHap) was developed in the environment R, to impute HLA haplotypes

(Medina-Rodríguez N et al. <https://cran.r-project.org/web/packages/alleHap/index.html>). Based on previous T1DGC results in Caucasian population, risk and protective haplotypes were identified. The distribution of protective, high-risk and other haplotypes were compared in the (first two) affected siblings and unaffected parents in the Canarian and non-Canarian Spanish families (chi-squared).

Risk HLA haplotypes	Protective HLA haplotypes
DRB1*0301-DQA1*0501-DQB1*0201 (DR3)	DRB1*0403-DQA1*0301-DQB1*0302
DRB1*0401-DQA1*0301-DQB1*0302 (DR4)	DRB1*0701-DQA1*0201-DQB1*0303 (DR7)
DRB1*0402-DQA1*0301-DQB1*0302 (DR4)	DRB1*1101-DQA1*0501-DQB1*0301 (DR11)
DRB1*0404-DQA1*0301-DQB1*0302 (DR4)	DRB1*1104-DQA1*0501-DQB1*0301 (DR11)
DRB1*0405-DQA1*0301-DQB1*0302 (DR4)	DRB1*1301-DQA1*0103-DQB1*0603
	DRB1*1303-DQA1*0501-DQB1*0301
	DRB1*1401-DQA1*0101-DQB1*0503 (DR6)
	DRB1*1501-DQA1*0102-DQB1*0602 (DR2)

Erlich et al. Diabetes 2008; 57:1084-92

This research uses resources provided by the Type 1 Diabetes Genetics Consortium (T1DGC), the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK, U01 DK62418), the National Institute of Allergy and Infectious Diseases (NIH-NIAID), the National Institute of Child Health and Human Development (NICHD), the Juvenile Diabetes Research Foundation International (JDRF), the European Foundation for the Study of Diabetes and the Instituto de Salud Carlos III.

Results

Complete unambiguous haplotypes were obtained and compared in Canarian (74 siblings with type 1 diabetes and 70 non-diabetic parents) and non-Canarian subjects (162 siblings with type 1 diabetes and 139 non-diabetic parents).

HLA haplotype distribution

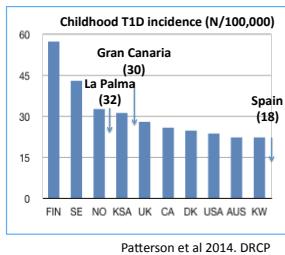
Siblings with diabetes	Canary Islands	Rest of Spain
Risk haplotypes (%)	72.3	72.5
Protective haplotypes (%)	2.7	1.2
Other haplotypes (%)	25.0	26.2

p = 0.55

Parents without diabetes	Canary Islands	Rest of Spain
Risk haplotypes (%)	47.9	51.4
Protective haplotypes (%)	9.2	13.7
Other haplotypes (%)	42.9	34.9

p = 0.19

Parents without diabetes	Canary Islands	Rest of Spain
DRB1*0301-DQA1*0501-DQB1*0201 (%)	20.1	30.0
DRB1*0401-DQA1*0301-DQB1*0302 (%)	7.5	2.9
DRB1*0402-DQA1*0301-DQB1*0302 (%)	8.2	8.3
DRB1*0404-DQA1*0301-DQB1*0302 (%)	3.0	5.1
DRB1*0405-DQA1*0301-DQB1*0302 (%)	8.2	5.4
DRB1*0403-DQA1*0301-DQB1*0302 (%)	0.7	1.8
DRB1*0701-DQA1*0201-DQB1*0303 (%)	0	0
DRB1*1101-DQA1*0501-DQB1*0301 (%)	0	1.1
DRB1*1104-DQA1*0501-DQB1*0301 (%)	0	0.7
DRB1*1301-DQA1*0103-DQB1*0603 (%)	5.9	3.6
DRB1*1303-DQA1*0501-DQB1*0301 (%)	0.7	1.1
DRB1*1401-DQA1*0101-DQB1*0503 (%)	0.7	0.4
DRB1*1501-DQA1*0102-DQB1*0602 (%)	0.7	0



Spain: 149 Families



*SPANISH TYPE 1 DIABETES GENETICS NETWORK
Francisco Argandoña, Hospital Universitario de València.
María Argandoña, Hospital Nuestra Señora de la Merced.
Luis Castaño, Hospital de Cruces, Baracaldo.
Raquel Corripio, Consorcio Hospitalario Parc Taulí, Sabadell.
Merce Fernández, Hospital Trinitat, Girona.
Basilio González, Hospital Universitario de Oviedo, Leganés.
Concepción García Lascall, Hospital Severo Ochoa, Leganés.
Pilar Gutiérrez, Hospital Universitario de Getafe.
Marta Hernández, Hospital Arnau de Vilanova, Lleida and Hospital Universitario de Bellvitge, Bellvitge.
Alberto de Leiva, Hospital de la Santa Creu i Sant Pau, Barcelona.
Didac Mauricio, Hospital Arnau de Vilanova, Lleida and Hospital de la Santa Creu i Sant Pau, Barcelona.
Francisco Javier Novoa, Hospital Universitario Insular de Gran Canaria, Las Palmas de Gran Canaria.
Teresa Pedro, Hospital Clínico de Valencia.
Manuel Roig, Hospital Arnau de Vilanova, Lleida.
Maria-José Ruiz, Hospital Universitario Insular de Gran Canaria, Las Palmas de Gran Canaria.
Mercedes Rodríguez, Hospital Miguel Servet, Zaragoza.
Óscar Rubio, Hospital Nuestra Señora de los Remedios, Madrid.
Federico Vázquez, Hospital de Cruces, Baracaldo.
Ana María Wagner, Hospital Universitario Insular de Gran Canaria and Steno Diabetes Center, Denmark.

Conclusion

According to this family-based study, the high incidence of childhood-onset type 1 diabetes in the Canarian population does not seem to be explained by higher-risk class II HLA haplotypes.

Other genetic and/or environmental factors may account for the high incidence of type 1 diabetes in the Islands

This family-based sample, however, is not necessarily representative of sporadic type 1 diabetes