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Genome-wide DNA methylation analysis of pulmonary function in middle and old-aged Chinese monozygotic twins

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Abstract

Background: Previous studies have determined the epigenetic association between DNA methylation and pulmonary function among various ethnics, whereas this association is largely unknown in Chinese adults. Thus, we aimed to explore epigenetic relationships between genome-wide DNA methylation levels and pulmonary function among middle-aged Chinese monozygotic twins.

Methods: The monozygotic twin sample was drawn from the Qingdao Twin Registry. Pulmonary function was measured by three parameters including forced expiratory volume the first second (FEV1), forced vital capacity (FVC), and FEV1/FVC ratio. Linear mixed effect model was used to regress the methylation level of CpG sites on pulmonary function. After that, we applied Genomic Regions Enrichment of Annotations Tool (GREAT) to predict the genomic regions enrichment, and used comb-p python library to detect differentially methylated regions (DMRs). Gene expression analysis was conducted to validate the results of differentially methylated analyses.

Results: We identified 112 CpG sites with the level of $P < 1 \times 10^{-4}$ which were annotated to 40 genes. We identified 12 common enriched pathways of three pulmonary function parameters. We detected 39 DMRs located at 23 genes, of which *PRDM1* was related to decreased pulmonary function, and *MPL*, *LTB4R2*, and *EPHB3* were related to increased pulmonary function. The gene expression analyses validated *DIP2C*, *ASB2*, *SLC6A5*, and *GAS6* related to decreased pulmonary function.

Conclusion: Our DNA methylation sequencing analysis on identical twins provides new references for the epigenetic regulation on pulmonary function. Several CpG sites, genes, biological pathways and DMRs are considered as possible crucial to pulmonary function.

Keywords: DNA methylation, Epigenetics, Monozygotic twins, Pulmonary function

Introduction

Pulmonary function is determined as an important predictor of cardiovascular health [1] and mortality [2], which declines with increasing age after the third decade

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of lifetime [3]. Accelerated decline in pulmonary function has immense impact on individual and social economy [4]. Pulmonary function can be influenced by a variety of factors. Traditional epidemiologic studies have widely investigated the relationship of environmental factors, such as cigarette smoking [5] and air pollution [6] with pulmonary function. Besides, family-based study [7] and genome-wide association study (GWAS) [8] have estimated the heritability of pulmonary function ranging



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from 0.42 to 0.71, indicating genetic contribution to the variation of pulmonary function.

Currently, an increasing number of GWASs have smoothed the way for discovering human genetic variants linked to pulmonary function which are quantified by forced expiratory volume in one second (FEV1), forced vital capacity (FVC), and FEV1/FVC ratio [9]. Yet the reported nucleotide-level polymorphisms could explain a limited proportion of pulmonary function variation [10] (5.0% for FEV1, 3.4% for FVC, and 9.2% for FEV1/FVC) compared with the estimated heritability, suggesting that other gene-regulatory mechanisms such as epigenetics might also be at play. Epigenetics is the study of heritable phenotype alterations that do not involve changes in the DNA sequence [11], and the epigenetic changes include DNA methylation, histone modification and noncoding RNA. Previous epigenome-wide association studies (EWASs) have investigated the association between DNA methylation and pulmonary function among various ethnic population but only a limited amount of significant genomic sites have been revealed [4, 12-14]. Besides, expect one study based on monozygotic (MZ) twin design, most of previous studies were conducted based on general population, which could not control the genetic effect and early life milieu including intrauterine environment on epigenetic changes [15].

As the genetic makeup is perfectly matched within pair, the monozygotic twins serve as optimal and valuable samples for EWAS on complex diseases and phenotypes [16]. The genetic influences on epigenetic changes are cancelled out in the discordant MZ twins design, thus the differential DNA methylation triggered by environmental factors could be identified [17]. The Chinese population is different from the other ethnics of the world in terms of genetic background, environmental exposure and lifestyle. However, there is no EWAS of pulmonary function in the Chinese twins published present. Thereby, we performed an EWAS to identify the association between DNA methylation variants and pulmonary function among Chinese monozygotic twin pairs.

Materials and methods

Samples and study procedures

The discordant identical twin pairs are sub-sample of twins derived from Qingdao Twin Registry [18] conducted by Qingdao Centers for Disease Control and Prevention. The details of sample recruitment have been described elsewhere [19]. A total of 68 twin pairs which were conducted DNA methylation sequencing using the reduced representation bisulfite sequencing (RRBS) were included in the sample. After excluded twin pairs with incomplete measurement of pulmonary function (n=1) and participants with minimal absolute values of intra-pair difference in pulmonary function score (Δ FEV1 < 0.1, n=7; Δ FVC < 0.1, n=8, and Δ FEV1/FVC < 0.05, n=23), complete monozygotic twin pairs who met the criteria were included in the study, including 60 twin pairs for FEV1(34 male and 26 female pairs), 59 twin pairs for FEV1(34 male and 25 female pairs), and 44 twin pairs for FEV1/FVC (21 male and 23 female pairs). Informed written consents were obtained from all participants. Regional Ethics Committee of the Qingdao Centers for Disease Control and Prevention Institutional Review Boards has approved this study.

Pulmonary function including FEV1 and FVC (liters) was assessed by the electronic hand-held spirometer (Micro 0102). Trained investigators calibrated the spirometer before measurement every morning. Based on the standard procedure of spirometry, each participant performed two maneuvers in standing state twice, and best trial data were applied to further analysis. The ratio FEV1/FVC was calculated according to the above measurements.

DNA methylation analysis

The Cetyltrimethyl Ammonium Bromide was used to extract genomic DNA from whole blood. DNA methylation library was constructed using RRBS by Biomarker Technologies Corporation, Beijing, China (http://www. biomarker.com.cn/). Firstly, genomic DNA was digested with Mspl restriction enzyme. After digesting, the 5' CG overhangs were repaired, and A-tails were added. Then the DNA was loaded on an agarose gel, and 230–380 bp long (including 100 bp adaptor) fragments were sort out for next bisulfite conversion using NEXTflex Bisulfite-Seq Kit (Bioo Scientific, Austin, TX, USA). After all, the bisulfite converted DNA was amplified with PCR. The reduced representation bisulfite sequencing was conducted using Illumina HiSeq X Ten (Illumina Inc., San Diego, CA, USA).

Data preprocessing

Our previous study has detailed the data preprocessing [20, 21]. In brief, the raw data were first trimmed and mapped to Genome Reference Consortium Human Build 37 (hg19) by Bismark [22]. The mapping output from Bismark was then imported to BiSeq (R package) [23] to detect the methylation level. To reduce bias, the coverage was restricted to 90% quantile, and CpG sites with beyond ten missing observations or average methylation beta value < 0.01 were removed. We used logit transformation to transform the beta value to M-value for conducting further differential methylation analyses.

Cell-type composition

Because the DAN sample extracted from the whole blood including distinct cell types which might result in false discoveries. We applied ReFACTor [24] method to control the cellular heterogeneity impact on DNA methylation. ReFACTor is based on principal component analysis and calculates the linear transformations of cell-type composition as principal component analysis components. We selected the top five components as covariates to control cell-type heterogeneity for the subsequent analyses.

Statistical analysis

Epigenome-wide association analyses

For single CpG analysis, linear mixed effect models were applied to regress methylation level on pulmonary function adjusting for cell-type composition and other confounding factors (FEV1: diastolic pressure; FVC: none; FEV1/FVC: diastolic and systolic pressure) as fixed effects and twin pairing variable as a random effect, based on the co-twin design as proposed by Tan et al. [16]. The smoking status of in-pair twins were almost consistent in sample. The number of smoking twins was 22 for FEV1 and FVC and 15 for FEV1/FVC, the number of non-smoking twins was 32 for FEV1, 31 for FVC, and 25 for FEV1/FVC, and the number of inconsistent smoking status twins was 6 for FEV1 and FVC, 4 for FEV1/ FVC. We added the smoking status as fixed effects to control it. False discovery rate (FDR) [25] was calculated to solve multiplicity problem. We defined the significance of genome-wide as FDR < 0.05, and conducted these analyses by R software (version 4.1.0).

Genomic regions enrichment analysis

Genomic regions enrichment analysis was performed using Genomic Regions Enrichment of Annotations Tool (GREAT) to examine the enrichment of identified methylation sites (P<0.05) in the functional significance of cis-regulatory regions [26]. GREAT is able to properly incorporate distal binding sites and control for false positives using a binomial test over the input genomic regions. Annotation of GREAT is based on Genome Reference Consortium Human Build 37 (hg19).

Detecting differentially methylated regions (DMRs)

Based on bisulfite-sequencing data with *P*-values from EWAS result, the significant differentially methylated regions (DMRs) for pulmonary function were identified using *comb-p* python library proposed by Petersen et al. [27]. This method first combined adjacent *P*-values as weighted according to the calculated auto-correlation, then performed Benjamini–Hochberg false discovery

adjustment to find regions of significant enrichment. The documentation and implementation of *comb-p* python library are available at website [28] https://github.com/brentp/combined-pvalues. The analyses of DMRs were conducted by Python software (version 3.8.8).

Gene expression analyses

Weighted analyses gene co-expression network (WGCNA) We used R software (version 4.1.0) to perform weighted correlation network analysis such as coexpression network analysis of gene expression data through WGCNA package [29-31]. In brief, we firstly constructed a gene co-expression network, and then used dynamic tree cut to identify modules. Next, we related modules to pulmonary function indices. Finally, we used DAVID [32, 33] tool to conduct the enrichment analysis of genes clustered in specific modules. The significant enriched terms were defined as a modified fisher exact *P*-value < 0.05.

Correlational analysis We applied Spearman's rank correlation analyses by R software (version 4.1.0) to evaluate the correlation between the gene expression levels of genes where the top CpG sites and DMRs annotated and pulmonary function indices. Statistically significant was defied as *P*-value < 0.05.

Results

Descriptive statistics of basic characteristics are shown in Additional file 1: Table S1. The number of monozygotic twin pairs involved in our study was 60 for FEV1(34 male pairs), 59 for FVC (34 male pairs), and 44 for FEV1/FVC ratio (21 male pairs). The median age of participants was above 50 years old. The mean (standard deviation, SD) of pulmonary function was 1.98 (0.72) for FEV1, 2.33(0.83) for FVC, and 0.86(0.14) for FEV1/FVC. Most clinical indicators had considerably significant correlation, indicating that our discordant MZ twin design could benefit. And the insignificant intra-pair confounders would be added as covariates in our subsequent association analyses. We drew scatter plots with regression line to illustrate the relationship between intra-differences of pulmonary function (Δ FEV1, Δ FVC, Δ FEV1/FVC) and intra-differences of methylated values of top significant CpG sites (P value < 10^{-4} , Δ methylated values of CpG sites at corresponding location) in MZ twin pairs (Additional file 2: Table S2, Additional file 3: Fig. S1, Additional file 4: Fig. S2, and Additional file 5: Fig. S3). The Δ methylation value of four CpG sites (f, h, i, j) were positively correlated with Δ FEV1, and the Δ methylation value of seven CpG sites (a, b, c, d, e, g, k) were negatively correlated with Δ FEV1. The Δ methylation value of eleven CpG sites (a, b, c, g, h, i, j, k, m, o, q) were positively correlated

with Δ FVC, and the Δ methylation value of six CpG sites (d,e,f,l,n,p) were negatively correlated with Δ FVC. The Δ methylation value of two CpG sites (c,i) were positively correlated with Δ FEV1/FVC ratio, and the Δ methylation value of ten CpG sites (a,b,d,e,f,g,h,j,k,l) were negatively correlated with Δ FEV1/FVC ratio.

Epigenome-wide association analysis

The results of EWAS for pulmonary function are shown in Table 1. In analysis of pulmonary function, 25 CpG sites with *P* value $< 10^{-4}$ were identified for FEV1, and the top 25 CpG sites were located at 8 genes, among which 4 (50%) genes WDR90, DIP2C, PANX2, NUBP2 were associated with pulmonary function. For intra-pair difference in FVC, 56 CpG sites with a *P* value $< 10^{-4}$ were found with 4 sites reaching a P value $< 10^{-5}$. And the top CpG sites were located at 21 genes, among which 8 (38%) genes AP5B1, CYP26B1, GAS6, IL11, IRS1, IRS2, MAD1L1, NUAK1 were associated with pulmonary function. Intra-pair methylation difference of FEV1/FVC ratio identified 31 CpG sites with P value $< 10^{-4}$. The CpG sites located at 11 genes and the most significant site was located at FENDRR and ENSG00000268388 (chr16: 86,528,639 bp, cor = -1.93, $P = 2.27 \times 10^{-6}$). The Manhattan plots of pulmonary function for the P-values of each CpG site against its chromosomal location are illustrated in Fig. 1.

A total of 280 common CpG sites (P < 0.05) were found for FEV1, FVC, and FEV1/FVC. 794 common genes (P < 0.05) were found for FEV1, FVC, and FEV1/FVC, among which two genes reached the level of $P < 1 \times 10^{-3}$, including *CHRNA4* and *MAD1L1*.

Biological pathway analysis

The number of genomic cis-regulatory regions related to one or more genes was 13,821, 14,901, and 17,929 for FEV1, FVC, and FEV1/FVC, respectively (Additional file 6: Fig. S4). The absolute distance of genomic regions to transcription start site was displayed in Additional file 7: Fig. S5 and Additional file 8: Fig. S6.

The analysis found 12 common functional clusters of biological process with very high statistical significance (binomial p-value < 1.07E-13) (Table 2), including negative regulation of phospholipid biosynthetic process, platelet-derived growth factor binding, potassium:chloride symporter activity, epithelial-mesenchymal cell signaling, decreased serum estradiol, low voltage-gated calcium channel activity, cAMP response element binding protein binding, activation of Cdc42 GTPase activity, ceramide signaling pathway, transcription regulation by bZIP transcription factor, mitogenactivated protein kinase p38 binding, and notch signaling pathway.

The MSiDB and PANTHER pathway, Human Phenotype, and Go enriched terms of FEV1, FVC, and FEV1/ FVC are shown in Additional file 9: Table S3, Additional file 10: Table S4, and Additional file 11: Table S5, respectively.

Region-based analysis

By using *comb-p*, region-based analyses identified 13, 14, and 12 DMRs (FDR < 0.05) associated with FEV1, FVC, and FEV1/FVC ratio, respectively (Table 3). Interestingly, 4 significant FEV1 associated DMRs (from 41,207,271 to 41,207,436 bp and from 43,394,513 to 43,394,685 bp on chromosome 6; from 50,616,620 to 50,617,148 bp on chromosome 22; from 40,996,995 to 40,997,142 bp on chromosome 17), 2 significant FVC associated DMRs (from 179,554,269 to 179,554,550 bp on chromosome 5; from 39,719,381 to 39,719,533 bp on chromosome 4), and 1 significant FEV1/FVC ratio associated DMR (from 130,491,143 to 130,491,278 bp on chromosome 11) cover the corresponding top significant CpG sites in Table 1.

Of all DMRs, three DMRs (located at PRDM1, MPL, EPHB3) were related to more than one trait. Of the significant DMRs associated with pulmonary function, nine DMRs for FEV1 were annotated to PRDM1 on chromosome 6, MPL and ZNF496 on chromosome 1, CIDEB and LTB4R2 on chromosome 14, SLC6A5 on chromosome 11, EPHB3 on chromosome 3, HEMK1 on chromosome 22, CDKL4 on chromosome 2, and AOC2 on chromosome 17. Nine DMRs for FVC were annotated to RASGEF1C on chromosome 5, UBE2K on chromosome 4, RNA5SP207, PRDM1, and ATG5 on chromosome 6, FEM1A on chromosome 19, MPL on chromosome 1, EPHB3 on chromosome 3 and DRD5P2 on chromosome 2. And seven DMRs for FEV1/FVC ratio were annotated to RASGEF1C on chromosome 5, UBE2K on chromosome 4, RNA5SP207, PRDM1, and ATG5 on chromosome 6, FEM1A on chromosome 19, MPL on chromosome 1, EPHB3 on chromosome 3 and DRD5P2 on chromosome 2. In addition, four DMRs for FEV1, six DMRs for FVC, and five DMRs for FEV1/ FVC ratio were located in the intergenic regions.

Figures 2, 3 and 4 display the methylation patterns for the significant DMRs for pulmonary function in Table 3, of which six DMRs (A, C, E, F, I, K) were positively and four DMRs (B, D, H, M) negatively associated with FEV1, and seven DMRs (A, C, F, G, H, J, L) were positively and five DMRs (B, E, K, M, N) negatively associated with FVC. One DMRs (K) was positively and seven DMRs (B, C, D, E, F, G, H) negatively associated with FEV1/FVC ratio.

Chromosome	Position(bp)	Coefficient	P-value	Ensemble gene ID	HGNC symbol
FEV1					
chr3	138,639,540	- 1.93791	1.81E-05		
chr3	138,639,552	- 1.94154	1.87E-05		
chr3	138,639,544	- 1.9364	1.9E-05		
chr3	138,639,520	- 1.92289	2.26E-05		
chr6	43,394,632	- 1.49082	2.87E-05		
chr6	43,394,620	- 1.48934	2.9E-05		
chr16	706,133	0.287479	3.29E-05	ENSG00000161996	WDR90
chr14	104,008,425	- 1.59238	4.23E-05		
chr6	43,394,652	- 1.47384	4.29E-05		
chr6	43,394,599	- 1.56562	4.39E-05		
chr17	40,997,066	- 0.79359	4.44E-05	ENSG00000131480	AOC2
chr14	104,008,420	- 1.19154	4.65E-05		
chr10	527,775	- 1.12976	4.89E-05	ENSG00000151240	DIP2C
chr19 [*]	45,721,153	- 0.40397	5.27E-05	ENSG00000130201	EXOC3L2
				ENSG0000007047	MARK4
chr19	48,945,113	- 1.67386	5.63E-05	ENSG00000105464	GRIN2D
chr19 [*]	45,721,139	- 0.36067	6.24E-05	ENSG00000130201	EXOC3L2
				ENSG0000007047	MARK4
chr22	50,616,743	2.576796	6.52E-05	ENSG0000073150	PANX2
chr12	132,922,443	- 0.85158	6.6E-05		
chr13	114,322,962	- 1.33518	6.9E-05	ENSG00000185974	GRK1
chr22	50,616,740	2.562951	6.92E-05	ENSG0000073150	PANX2
chr19	48,945,126	- 1.64199	7.32E-05	ENSG0000105464	GRIN2D
chr22	50,616,733	2.538738	7.84E-05	ENSG0000073150	PANX2
chr19	48,945,131	- 1.63696	8.05E-05	ENSG0000105464	GRIN2D
chr16 [*]	1,835,849	- 1.47921	8.48E-05	ENSG0000095906	NUBP2
				ENSG00000162032	SPSB3
chr6	41,207,271	0.322382	9.19E-05	ENSG00000212176	RNA5SP207
FVC					
chr2	227,662,476	2.083124	4.88E-06	ENSG00000169047	IRS1
chr2	227,662,482	2.066378	5.49E-06	ENSG0000169047	IRS1
chr2	227,662,501	2.013397	6.8E-06	ENSG00000169047	IRS1
chr1	3,329,105	0.283266	9.86E-06	ENSG00000142611	PRDM16
chr2	242,955,278	- 3.46707	1.22E-05	ENSG0000233806	LINC01237
chr7	56,243,280	- 0.31459	1.51E-05		
chr1	40,388,312	0.248359	1.64E-05		
chr1	34,090,712	0.342628	1.72E-05	ENSG00000121904	CSMD2
chr2	227,662,462	1.963614	1.82E-05	ENSG00000169047	IRS1
chr9	34,809,867	-0.32198	1.94E-05		
chr1	212,456,833	- 1.22998	2E-05	ENSG0000226251	LINC02608
chr2	227,662,459	1.962235	2.04E-05	ENSG00000169047	IRS1
chr1	34,090,722	0.360194	2.13E-05	ENSG00000121904	CSMD2
chr1	40,388,299	0.247353	2.44E-05		
chr4	39,719,509	-0.33384	2.57E-05	ENSG0000078140	UBE2K
chr4	39,719,504	-0.33124	2.65E-05	ENSG0000078140	UBE2K
chr1	45,203,996	0.682629	2.67E-05		
chr11	65,547,072	- 0.2697	2.84E-05	ENSG0000254470	AP5B1
chr2	227,662,443	1.966677	3.2E-05	ENSG00000169047	IRS1

Table 1 The results of epigenome-wide association study in pulmonary function (*P*-value $< 1 \times 10^{-4}$)

Table 1 (continued)

Chromosome	Position(bp)	Coefficient	P-value	Ensemble gene ID	HGNC symbol
chr19	55,881,590	1.590547	3.51E-05	ENSG0000095752	IL11
chr2	227,662,433	1.985295	3.55E-05	ENSG00000169047	IRS1
chr2	227,662,426	2.006028	3.6E-05	ENSG00000185950	IRS2
chr14	94,405,044	- 0.85692	3.86E-05	ENSG00000100628	ASB2
chr17	79,067,393	2.782969	3.97E-05	ENSG00000175866	BAIAP2
chr19	55,881,582	1.540431	4.08E-05	ENSG0000095752	IL11
chr7	56,243,259	-0.2817	4.14E-05		
chr9	34,809,843	- 0.27944	4.38E-05		
chr17	75,613,156	0.367264	4.43E-05		
chr16	2,301,960	- 1.99883	4.49E-05	ENSG00000167969	ECI1
chr5	179,554,467	0.172032	5.14E-05	ENSG00000146090	RASGEF1C
chr9	34,809,878	-0.33026	5.28E-05		
chr17	75,613,186	0.259034	5.33E—05		
chr12	106,461,103	- 1.84659	5.55E—05	ENSG0000074590	NUAK1
chr16	2,301,969	- 1.97289	5.66E-05	ENSG00000167969	ECI1
chr7	56,243,241	- 0.27378	5.66E-05		
chr2	227,662,390	2.353652	5.79E—05	ENSG00000169047	IRS1
chr5	179,554,462	0.167814	5.91E-05	ENSG00000146090	RASGEF1C
chr7	56.243.233	- 0.2686	5.96E-05		
chr13*	114,525,556	- 2.57251	6.25E-05	ENSG00000183087	GAS6
				ENSG0000233695	GAS6 — AS1
chr5	179,554,486	0.182607	6.36E-05	ENSG00000146090	RASGEF1C
chr2	72.359.706	0.217285	6.44E-05	ENSG0000003137	CYP26B1
chr19	22,883,687	2.353067	7E-05		
chr1	40,388,332	0.260153	7.03E-05		
chr20	62.188.249	0.178865	7.56E-05		
chr19	22,883,684	2.335013	7.71E-05		
chr19	36,757,583	0.700594	7.8E-05		
chr20	62,188,262	0.179876	8.09E-05		
chr22	50,758,097	0.338362	8.16E-05	ENSG0000205593	DENND6B
chr12	123,750,717	- 0.26888	8.23E-05	ENSG00000111328	CDK2AP1
chr7	2,106,405	- 3.75532	8.27E-05	ENSG0000002822	MAD1L1
chr7	56,243,224	- 0.25655	8.39E-05		
chr4	39,719,480	- 0.31037	8.63E-05	ENSG0000078140	UBE2K
chr1	181,382,667	0.338413	8.9E-05	mRNA	AF387615
chr4	39,719,523	- 0.34507	9.3E-05	ENSG0000078140	UBE2K
chr10	88,702,832	- 1.01265	9.46E-05	ENSG00000173269	MMRN2
chr2	72,359,687	0.201322	9.56E—05	ENSG0000003137	CYP26B1
chr16	86,528,639	- 1.92693605	2.2733E-06	ENSG0000268388	FENDRR
chr11	89,900,493	- 8.57710522	1.042E-05	ENSG0000077616	NAALAD2
chr6	168,708,413	2.6198784	1.0891E-05	ENSG00000164488	DACT2
chr11	89,900,518	- 8.40993874	1.2848E-05	ENSG0000077616	NAALAD2
chr16	86,528,603	- 2.37934592	1.4343E-05	ENSG0000268388	FENDRR
chr16	86,528,620	- 2.56207502	1.4967E-05	ENSG0000268388	FENDRR
chr2	233,791.733	2.516547	1.601E-05	ENSG0000066248	NGEF
chr16	86,528,600	- 2.29834345	1.6392E-05	ENSG0000268388	FENDRR
chr6	168,708,422	2.86106788	1.7273E-05	ENSG0000164488	DACT2
chr11	130,491,262	- 3.95462385	2.2669E-05		
chr6	168,708,401	2.15447478	2.3564E-05	ENSG0000164488	DACT2

Chromosome	Position(bp)	Coefficient	P-value	Ensemble gene ID	HGNC symbol
chr2	233,791,742	2.27761208	3.1105E-05	ENSG0000066248	NGEF
chr16	86,528,611	- 2.78067202	3.1934E-05	ENSG00000268388	FENDRR
chr11	130,491,234	- 3.50377946	3.2327E-05		
chr11	130,491,229	- 3.49295666	3.2607E-05		
chr11	130,491,225	- 3.49165833	3.3003E05		
chr11	130,491,218	- 3.4800439	3.9356E-05		
chr11	130,491,274	- 5.32113664	4.9746E-05		
chr20	61,992,129	8.76860666	5.2202E-05	ENSG00000101204	CHRNA4
chr11	1,103,266	- 1.68641265	5.3477E-05	ENSG00000198788	MUC2
chr4	10,508,681	- 3.48381736	5.411E-05	ENSG00000109684	CLNK
chr11	130,491,277	- 5.2862281	5.6835E-05		
chr8	6,671,626	- 2.57808863	5.7509E-05	ENSG00000275591	XKR5
chr1	7,022,170	8.69574765	5.8044E-05	ENSG00000171735	CAMTA1
chr11	1,103,270	- 1.68935565	5.9685E-05	ENSG00000198788	MUC2
chr4	190,537,048	- 3.24980484	7.2585E-05		
chr14	104,642,230	- 4.53713759	7.4715E-05	ENSG0000066735	KIF26A
chr4	190,537,044	- 3.22472764	7.9082E-05		
chr5	28,928,500	- 8.72472679	8.3633E-05		
chr16	86,528,570	- 1.82984517	8.7526E-05	ENSG00000268388	FENDRR
chr22	29,075,315	11.8597904	9.15E-05	ENSG00000100154	TTC28

Table 1 (continued)

* The CpG sites were annotated to more than one gene

Gene expression analysis

In the gene expression analyses, we included 12 twin pairs (7 male pairs) with median age of 53 years (ranging from 43 to 65), a median FEV1 of 2.05 (ranging from 1.04 to 3.81), a median FVC of 2.17 (ranging from 1.32 to 4.10), and a median FEV1/FVC of 0.97(ranging from 0.57 to 1.01).

Weighted gene co-expression network analysis (WGCNA)

As shown in Additional file 12: Fig. S7, the genes clustered in lightsteelblue1 module (including 492 genes) were both positively correlated with FEV1 (r=0.58, P=0.003) and FVC (r=0.51, P=0.01). The genes clustered in this module were significantly enriched in positive regulation of protein secretion, positive regulation of cell division, growth factor activity, calcium ion binding, motile cilium, platelet degranulation, and phospholipase A2 activity. (Additional file 13: Table S6).

Moreover, the genes clustered in darkorange2 module (including 62 genes) were also both positively correlated with FEV1(r=0.45, P=0.03) and FVC (r=0.53, P=0.007). The genes clustered in this module were significantly enriched in extracellular region, negative regulation of exocytosis, and cell adhesion (Additional file 14: Table S7). Additionally, the genes clustered in ivory module (including 76 genes) were negatively correlated with FEV1/FVC (r = -0.63, P = 0.001). The genes clustered in this module were significantly enriched in cytokine activity, extracellular region, intermediate filament, and so on (Additional file 15: Table S8).

The common genes and enrichment terms between methylation analysis and WGCNA

We detected the common genes and enrichment terms between the methylation analyses and WGCNA. We found *DIP2C* gene which included in lightsteelblue1 modules linked to FEV1, and *ASB2* which included in darkorange2 modules associated with FVC. The common enrichment terms "platelet alpha granule lumen" was identified.

Correlation analysis

Significant correlations between gene expression levels and pulmonary function indices were identified, including SLC6A5 related to FEV1 (r=0.454, P=0.026), and GAS6 related to FVC (r=0.533, P=0.007).



Discussion

In this study, we detected the epigenetic variants of pulmonary function using EWAS based on monozygotic twin design. The number of CpG sites which was identified to reached the level of $P < 1 \times 10^{-4}$ was 25 for FEV1, 56 for FVC, and 31 for FEV1/FVC. And 12 significant pathways of interest for pulmonary function were highlighted by GREAT ontology enrichment analyses. Finally, we identified several DMRs related to pulmonary function, and of all DMRs, three (*PRDM1*, *MPL*, and *EPHB3*) were related to more than one trait. Two genes (*DI92C* and *ASB2*) and one enrichment terms (platelet alpha granule lumen) were overlapped between methylation analysis and WGCNA. Finally, two genes were found to be correlated to pulmonary function.

The genes DIP2C, WDR90, PANX2, NUBP2, AP5B1, CYP26B1, GAS6, IL11, IRS1, IRS2, MAD1L1, CAMTA1,

Table 2 Significant common functional of	lusters biological process related	l to pulmonary function b	y GREAT using binomial test
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Term name	Binom raw <i>P</i> -value	Binom FDR Q-value	Binom fold enrichment	Binom expected region hits	Binom observed region hits
FEV1					
Negative regulation of phospholipid biosynthetic process	2.30E-112	2.40E-108	22.67703	5.159407	117
Platelet-derived growth factor binding	1.75E-66	6.45E-63	6.609811	21.48322	142
Potassium:chloride symporter activity	2.13E-59	2.62E-56	27.73878	2.018834	56
Epithelial-mesenchymal cell signaling	3.35E-57	3.18E-54	6.273671	20.24333	127
Decreased serum estradiol	2.18E-47	2.23E-44	21.93261	2.234116	49
Low voltage-gated calcium channel activity	1.91E-44	1.41E-41	18.17954	2.750345	50
cAMP response element binding protein binding	1.41E-38	5.76E-36	9.067368	7.058278	64
Activation of Cdc42 GTPase activity	3.30E-36	5.30E-34	12.54469	3.906035	49
Ceramide signaling pathway	3.85E-33	1.69E-30	2.874993	61.21754	176
Transcription regulation by bZIP transcription factor	2.38E-29	3.61E-27	3.509946	33.04894	116
Mitogen-activated protein kinase p38 binding	9.76E-16	5.81E-14	6.090298	5.418454	33
Notch signaling pathway	3.93E-13	9.97E-12	2.123615	54.15295	115
FVC					
Activation of Cdc42 GTPase activity	5.16E-82	5.39E-78	20.93006	4.204478	88
Potassium:chloride symporter activity	1.08E-73	1.99E-70	30.83174	2.173085	67
Negative regulation of phospholipid biosynthetic process	1.82E-54	5.77E-52	13.14459	5.553615	73
Epithelial-mesenchymal cell signaling	1.61E-45	3.29E-43	5.323534	21.79004	116
Decreased serum estradiol	2.81E-43	1.92E-40	19.54412	2.404816	47
Platelet-derived growth factor binding	3.14E-36	1.05E-33	4.583852	23.12466	106
Low voltage-gated calcium channel activity	1.08E-35	3.33E-33	14.86242	2.960487	44
Transcription regulation by bZIP transcription factor	1.57E-31	2.39E-29	3.513795	35.57407	125
Notch signaling pathway	4.40E-29	1.16E-26	2.856257	54.26683	155
cAMP response element binding protein binding	1.22E-19	1.05E-17	5.791325	7.597571	44
Mitogen-activated protein kinase p38 binding	3.38E-17	2.04E-15	6.172357	5.832456	36
Ceramide signaling pathway	1.07E-13	4.56E-12	2.033541	65.89492	134
FEV1/FVC					
Negative regulation of phospholipid biosynthetic process	7.31E-162	7.63E-158	24.44504	6.708927	164
Platelet-derived growth factor binding	3.83E-103	1.41E-99	7.338399	27.93525	205
Epithelial-mesenchymal cell signaling	2.93E-64	1.18E-61	5.812409	26.32299	153
Activation of Cdc42 GTPase activity	3.00E-58	8.25E-56	14.56942	5.079131	74
Low voltage-gated calcium channel activity	9.99E-55	6.14E-52	17.61571	3.576354	63
Ceramide signaling pathway	5.35E-44	3.53E-41	2.914465	79.60295	232
Potassium:chloride symporter activity	7.68E-43	1.89E-40	18.28468	2.625149	48
Decreased serum estradiol	5.03E-36	1.55E-33	15.14585	2.905086	44
cAMP response element binding protein binding	9.55E-35	1.76E-32	7.299999	9.178084	67
Notch signaling pathway	4.98E-31	9.39E-29	2.730495	65.55589	179
Transcription regulation by bZIP transcription factor	2.74E-27	4.16E-25	3.04832	42.9745	131
Mitogen-activated protein kinase p38 binding	1.19E-21	7.41E-20	6.386807	7.045774	45

CHRNA4, FENDRR, MUC2 associated with top CpG sites (Table 1) played important roles in pulmonary function. Most interestingly, *DIP2C* gene was not only identified to link to pulmonary function in our EWAS

results, but further validated in the WGCNA. Moreover, *DIP2C* has been detected to related to pulmonary function in blood DNA in Koreans adults [34]. Mutations in *DIP2C* have been identified in lung cancer samples

Chromosome	Start	End	Length	Stouffer-liptak-kechris(slk) corrected <i>P-</i> value	Ensembl ID	Gene symbol
FEV1						
chr6	41,207,271	41,207,436	10	0.001728		
chr6	106,553,539	106,553,708	11	0.001782	ENSG0000057657	PRDM1
chr18	46,502,900	46,503,123	14	0.004627		
chr6	43,394,513	43,394,685	12	0.006354		
chr1	43.814.661	43.814.895	21	0.008471	ENSG00000117400	MPL
chr14	24,780,505	24,780,906	12	0.009266	ENSG00000136305	CIDEB
	, ,	,,			ENSG0000213906	LTB4R2
chr11	20,626,786	20,627,432	26	0.01328	ENSG00000165970	SLC6A5
chr2	175,205,113	175.205.752	29	0.01328		
chr3	184,294,568	184,294,844	12	0.01516	ENSG00000182580	FPHB3
chr22	50.616.620	50.617.148	29	0.01753	ENSG00000114735	HEMK1
chr2	39.470.838	39.471.149	34	0.03594	ENSG0000205111	CDKI 4
chr1	247 463 964	247 464 319	21	0,03833	ENSG0000162714	ZNF496
chr17	40 996 995	40 997 142	11	0.0463	ENSG00000131480	AOC2
FVC	10/220/222	10,557,112			2113 200000151 100	1002
chr5	179 554 269	179 554 550	22	0.003109	ENSG00000146090	RASGEE1C
chr4	39 719 381	39719533	10	0.004208	ENSG0000078140	LIBE2K
chr6	41 207 271	41 207 436	10	0.007586	ENSG000002121761	RNA5SP207
chr19	4 792 661	4 793 200	24	0.009082	ENSG00000212170.1	FEM14
chr6	106 553 530	106 553 708	11	0.009722	ENSG00000141505	PRDM1
CIIIO	100,555,557	100,555,700		0.009722	ENSC0000057663	ATG5
chr1	12 014 661	12 014 005	21	0.01655	ENSC00000117400	AIGS
chr6	43,014,001	43,014,093	21	0.01749	LIN300000117400	IVIFL
chr2	194 204 569	194 204 944	12	0.01/48		EDUDO
chi S	176 021 544	176 021 002	12	0.02198	LIN3G00000182380	LFTIDS
CHIZ abr2	170,951,544	20 471 140	10	0.02289		
Chr2	39,470,838	39,471,149	34	0.02483		
chrið abur	14,998,779	15,000,083	01	0.04006		
CNr5	134,/44,53/	134,/44,/42	14	0.04018		
chrl	148,902,200	148,902,378	15	0.04418		000500
Chr2	91,874,335	91,874,482	12	0.04763	ENSG000001/5658	DRD5P2
FEVI/FVC	<i></i>			0 00005 /	5166666666667770	<i>скор</i>
chr15	68,115,/31	68,116,609	24	0.002354	ENSG0000188779	SKORT
chr11	130,491,143	130,491,278	10	0.00646		
chr9	128,985,373	128,985,521	11	0.007998		
chr20	25,990,367	25,990,728	18	0.008941		LOC100134868
chr16	895,385	895,537	11	0.01412		
chr9	124,308,098	124,308,286	11	0.01419		
chr3	22,458,309	22,458,548	13	0.01914		
chr15	68,549,191	68,549,322	9	0.01938	ENSG00000128973	CLN6
chr7	329,073	330,975	103	0.02247		LOC100288524
chr17	80,840,674	80,841,003	18	0.02549	ENSG00000141556	TBCD
chr17	75,525,368	75,525,475	4	0.03143	ENSG00000267665	LOC400622
chr19	1,229,184	1,230,113	60	0.04449	ENSG0000099625	CBARP

Table 3 The results of annotation to the significant DMRs (slk corrected *P*-value < 0.05)

[35]. This demonstrated that *DIP2C* gene indeed plays an important role at the pulmonary disease. *WDR90* was identified as required gene for ciliogenesis [36]. The

lung ciliary-related proteins keeping the airways clear of mucus and dirt play a role in human pulmonary function. *PANX2* was expressed in human airway epithelial



cells and alveolar macrophages, which might have an impact on pulmonary function [37]. NUBP2 was found to express in distal lung epithelium, which might function in lung development of mice [38]. AP5B1 was identified as susceptibility loci for the combined eczema plus asthma phenotype, which might affect pulmonary function [39]. Cyp26b1 was an essential regulator of distal airway epithelial differentiation during lung development [40]. GAS6 promoted Axl-mediated survival in pulmonary endothelial cells [41]. IL-11 was suggested that could cause lung inflammation and airway obstruction [42]. IRS1 and IRS2 were found to mediate IL-4-induced migration of human airway epithelial cells, which influence pulmonary function [43]. MAD1L1 was identified as a genome-wide significant signals with idiopathic pulmonary fibrosis by GWAS [44]. CAMTA1 was a regulator of nuclear factor of activated T cells signaling, which was linked to pulmonary arterial hypertension [45]. FENDRR was long noncoding RNA exhibiting antifibrotic activity in pulmonary fibrosis [46]. Decreased expression of *MUC2* has been observed in patients with COPD [47].

Pathway enrichment analyses showed lots of common significant pathways of pulmonary function using GREAT. The significant enrichment pathway include negative regulation of phospholipid biosynthetic process [48], platelet-derived growth factor binding [49], potassium:chloride symporter activity [50], epithelialmesenchymal cell signaling [51], decreased serum estradiol [52], low voltage-gated calcium channel activity [53], cAMP response element binding protein binding [54], activation of Cdc42 GTPase activity [55], ceramide signaling pathway [56], transcription regulation by bZIP transcription factor [57], mitogen-activated protein kinase p38 binding [58], and notch signaling pathway [59].

The genomic region-based analyses found 39 DMRs locating at 23 genes (Table 3), of which *PRDM1*, *MPL*, *LTB4R2*, *EPHB3* and *SLC6A5* had certain biological function potentially linked to pulmonary function. Previous study found that NF- κ B(p65) promotion of miR-99b could aggravate acute lung injury by *PRDM1* down-regulation, and over-expressed *PRDM1* inhibits acute lung injury in mice [60]. *MPL* was defined as an important gene in a novel VEGF–miR-1–Mpl–P-selectin effector pathway in lung Th2 inflammation and found as potential therapeutic targets for asthma [61]. *LTB4R2*, as one of pivotal leukotriene B4 receptors, was





proposed as potential therapeutic targets in asthma [62]. *EphB3* was expressed at human lung fibroblasts, which induce dephrin-B2 forward signal involved in

several fibroblast functions [63]. *SLC6A5*, also named *GLYT-2*, encoded a sodium- and chloride-dependent glycine neurotransmitter transporter. The glycinergic

inhibitory synaptic inputs played an important role in respiratory motoneurons, which could affect pulmonary function [64].

As additional validation, we integrated the methylation data with gene expression data. Genes clustered in light-steelblue1 and darkorange2 modules were positively correlated with FEV1 and FVC in WGCNA, and some genes were in common with EWAS findings, including *DIP2C* discussed above and *ASB2* involved in pulmonary function remained to be studied further. Additionally, *SLC6A5* and *GAS6* discussed above were positively correlated to pulmonary function. Moreover, the common enrichment terms between methylation analysis and WGCNA was platelet alpha granule lumen, which involved in pulmonary function remained to be studied further.

There were several strengths in the present study. The identical twin design used in our study to detect the epigenetic variation of pulmonary function could perfectly control over the genetic background to provide credible results. Moreover, this was one of the few pulmonary function EWA studies in Asian and the first in Chinese. As the genetic background and environmental exposures differ from ethnic populations, our study elucidated the underlying physiological mechanism of pulmonary function changes in Chinese adults. However, our studies also have some limitations. First, compared with other general case-control design, the sample size of our study was relatively small due to the difficulty of recruiting and identifying qualified MZ twin pairs. However, previous study has determined that the sample sizes of monozygotic twins just require roughly 1/4 of sample sizes in the ordinary case-only design to provide the sufficient power [65]. Second, the DNA sample was extracted from blood rather than the lung tissue. Although we know methylation is the characteristic of tissue-specificity, it was difficult to obtain the lung tissue of sample. Moreover, the mounting evidences have supported disease-associated methylation loci could be identified from peripheral samples [66]. Third, the non-shared environment for the individual siblings of MZ twins, such as occupational environment [67], residential environment [68], and mode of transport [69], could expose themselves to different levels of environmental pollutants, including particulate matter, nitrogen dioxide; volatile organic compounds, polycyclic aromatic hydrocarbons, and so on, which might directly affect pulmonary function [70-73], and cause different levels of DNA methylation [74-78] thereby indirectly influencing pulmonary function. However, due to the complicated causes of DNA methylation and the difficulty of monitoring for the external environmental exposure, we have not further analyzed the causes of DNA methylation. We will seek practical method to solve it in the future research.

Although these results could not immediately be applied as clinical predictors of disease in individuals, they are important from an aetiological perspective. Epigenetic studies complement genetic association studies to identify pulmonary function related genes. The EWAS and gene expression analysis identified candidate genes and pathways related to pulmonary function, which could help understand underlying mechanisms of pulmonary function and explore new molecular biological pathway of pulmonary functional decline in clinical.

Conclusion

In conclusion, our DNA methylation sequencing analysis on identical twins provides new references for the epigenetic regulation on pulmonary function. Several CpG sites, genes, biological pathways and DMRs were considered as possible crucial to pulmonary function. All findings point important clues to further explore of pulmonary function.

Supplementary Information

The online version contains supplementary material available at https://doi. org/10.1186/s12931-021-01896-5.

Additional file 1: Table S1. Descriptive statistics of basic characteristics of the sample.

Additional file 2: TableS2. Descriptive statistics of intra-pair difference of FEV1, FVC, FEV1/FVCratio and some significant methylated value of CpG sites.

Additional file 3: Figure S1. Scatter plots with regression lineshowing the association of Δ methylated value of CpG sites and Δ FEV1. The Δ methylation value of four CpG sites (f, h, i, j) were positively correlatedwith Δ FEV1, and the Δ methylation value of seven CpG sites (a,b,c,d,e,g,k) werenegatively correlated with Δ FEV1.

Additional file 4: Figure S2. Scatter plot with regression line showing the association of Δ methylatedvalue of CpG sites and Δ FVC. The Δ methylation value of eleven CpG sites(a,b,c,g,h,i,j,k,m,o,q) were positively correlated with Δ FVC, and the Δ methylation value of six CpG sites (d,e,f,l,n,p) were negatively correlated with Δ FVC.

Additional file 5: Figure S3. Scatter plots with regression line showing the association of Δ methylatedvalue of CpG sites and Δ FEV1/FVC. The Δ methylation value of two CpG sites(c,i) were positively correlated with Δ FEV1/FVC ratio, and the Δ methylation value of ten CpG sites (a,b,d,e,f,g,h,j,k,l) were negatively correlated with Δ FEV1/FVC ratio.

Additional file 6: Figure S4. Number of associated genes per region for FEV1 (a), FVC (b), and FEV1/FVC (c). The number of genomiccis-regulatory regions related with one or more genes was 13,821 for FEV1,14,901 for FVC, and 17,929 for FEV1/FVC.

Additional file 7: Figure S5. Binned by orientation and distance to transcription start site FEV1 (a),FVC (b), and FEV1/FVC (c). Thenumber of FEV1 genomic regions whose distance to the TSS was <-500, -500 to -50, -50 to -5, -5 to 0, 0 to 5, 5 to 50, 50 to 500, >500 kb was 478, 3691,3732, 1666, 2440, 5817, 6066, and 632, respectively. The number of FVC genomicregions whose distance to the TSS was <-500, -500 to -50, -50 to -50, 50 to 500, 0 to 5, 5 to 50, 50 to 500, >500 to -50, -50 to 500, >500 kb was 549, 4046, 4054, 1816, 2666,6306, 6425, and 673, respectively. The number of FEV1/FVC genomic regions whose distance to the TSS was <-500, -500 to -50, -50 to -5, -5 to 0, 0 to 5, 5

to50, 50 to 500, >500 kb was 610, 4826, 4673, 2537, 3125, 7458, 7530, and 840, respectively.

Additional file 8: Figure S6. Binned by absolute distance to transcription start site for FEV1 (a), FVC(b), and FEV1/FVC (c). Thenumber of FEV1 genomic regions whose absolute distance to the TSS was 0 to 5, 5to 50, 50 to 500, >500 kb was 4106, 9549, 9757, 1110, respectively. Thenumber of FVC genomic regions whose absolute distance to the TSS was 0 to 5, 5to 50, 50 to 500, >500 kb was 4482, 10360, 10471, 1222, respectively. Thenumber of FEV1/FVC genomic regions whose absolute distance to the TSS was 0 to 5, 5to 50, 50 to 500, >500 kb was 5662, 12131, 12356, 1450, respectively.

Additional file 9: Table S3. Significant functional clusters biological process related to FEV1 by GREAT using binomialtest.

Additional file 10: Table S4. Significantfunctional clusters biological process related to FVC by GREAT using binomialtest

Additional file 11: Table S5. Significantfunctional clusters biological process related to FEV1/FVC by GREAT usingbinomial test.

Additional file 12: Figure S7. Relationships of consensus module eigengenes and external traits. Each row inthe table corresponds to a consensus module, and each column to a sample ortrait. Numbers in the table report the correlations of the corresponding moduleeigengenes and traits, with the *P*-valuesprinted below the correlations in parentheses. The table is color coded bycorrelation according to the color legend. The genes clustered inlightstellblue1 module and darkorange2 module are the positively correlatedwith FEV1 and FVC, and the genes clustered in ivory module is negativelycorrelated with FEV1/FVC.

Additional file 13: Table S6. The results of enrichment analysis for genes clustered in lightsteelblue1 module by DAVID tool.

Additional file 14: Table S7. The results of enrichment analysis for genes clustered in darkorange2 module by DAVID tool

Additional file 15: Table S8. The results of enrichment analysis for genes clustered in ivory module by DAVID tool.

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None.

Authors' contributions

TW: Conceptualization, Formal analysis, Methodology, Writing—original draft. WW and WL: Methodology, Software, Formal analysis. HD, CX and XT: Validation, Investigation, Resources. DZ: Methodology, Formal analysis, Writing review & editing. All authors reviewed the draft for intellectual content, and approved submission of the manuscript.

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Availability of data and materials

The datasets and/or analyzed during the current study are available from the corresponding authors on reasonable request.

Declarations

Ethics approval and consent to participate

Informed written consents were obtained from all participants. Regional Ethics Committee of the Qingdao Centers for Disease Control and Prevention Institutional Review Boards has approved this study.

Consent for publication

Not applicable.

Competing interests

The authors have declared no conflicts of competing interests.

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