

# Association study of HLA-A and HLA-B alleles with clinical manifestations of Behçet's disease in a Japanese population

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## Background and Aim

- It is well established that Behçet's disease (BD) is strongly associated with HLA-B\*51 in many different ethnic groups.
- HLA-A\*26, also is strongly associated with BD in several ethnic groups, particularly in people of northeast Asian ancestry. Additionally, some other HLA-A and -B alleles, including B\*15, B\*27, and B\*57, are reportedly associated with BD risk.
- Moreover, it has been suggested that some HLA-A and -B alleles are associated with specific clinical manifestations of BD.
- In this study, we investigated the association of HLA-A and -B alleles with clinical manifestations of BD in a Japanese patients.

## Materials and Methods

- A total of 608 Japanese patients with BD and 2,955 Japanese healthy controls were enrolled in this study.
- For the genotyping of the HLA-A and -B alleles, we performed HLA imputation using SNP2HLA with the genotypes of approximately 8,000 SNPs in the HLA region from our existing genome-wide association studies.

## Results

- HLA-B\*51 showed the most significant association with BD ( $P_c=1.2 \times 10^{-54}$ , odds ratio [OR]=3.73). Among HLA-A alleles, HLA-A\*26 showed the most significant association with BD ( $P_c=1.1 \times 10^{-10}$ , OR=1.85), and the association between A\*26 and BD was stronger in B\*51-negative cases ( $P_c=6.0 \times 10^{-15}$ , OR=2.51) (Table 1).
- B\*59, B\*39, B\*55, and A\*31 were also significantly associated with the risk of BD, and B\*56, B\*67, B\*52, B\*54, B\*44, A\*33, and A\*11 were protective alleles (Table 1).
- The allele frequency of B\*51 was significantly increased in male cases (31.8%) compared to female cases (22.4%) (OR=1.62). In contrast, no significant gender differences were found in the allele frequencies of other HLA-A and -B alleles (Table 2).
- B\*51 showed no significant association with specific clinical manifestations, whereas A\*26 was significantly associated with ocular (OR=2.96) and neurological (OR=3.13) lesions, with higher ORs in B\*51-negative cases (OR=4.42 and 4.85, respectively). (Table 3).
- In other alleles, B\*35 significantly increased the risk of ocular lesions (OR=4.44), with a greater OR in the B\*51-negative cases (OR=7.25). In addition, A\*02 was significantly associated with the risk of arthritis (OR=1.99), B\*15 with epididymitis (OR=4.58), and A\*24 with vascular lesions (OR=3.93) in the B\*51-negative cases (Table 3).

**Table 1. Significant association between BD and HLA-A/B alleles**

HLA allele	All subjects (BD:Controls=608:2955)					B*51-negative (BD:Controls=314:2444)				
	Allele Freq., %		P	P <sub>c</sub>	OR	Allele Freq., %		P	P <sub>c</sub>	OR
Cases	Ctrls	Cases				Ctrls				
<b>Risk allele</b>										
HLA-B	B*51	27.8	9.1	4.5E-56	<b>1.2E-54</b>	3.73				
	B*59	1.5	0.0	2.4E-15	<b>6.4E-14</b>	-	1.8	0.0	5.0E-12	<b>1.4E-10</b>
	B*39	4.6	1.1	2.8E-14	<b>7.6E-13</b>	4.54	7.3	1.3	3.1E-17	<b>8.3E-16</b>
	B*55	2.5	0.4	2.7E-11	<b>7.3E-10</b>	6.65	3.8	0.5	3.5E-12	<b>9.3E-11</b>
HLA-A	A*26	18.3	10.8	1.1E-11	<b>1.1E-10</b>	1.85	23.6	11.1	6.0E-16	<b>6.0E-15</b>
	A*31	11.2	8.4	0.0037	<b>0.037</b>	1.36	4.5	5.9	0.16	1
<b>Protective allele</b>										
HLA-B	B*56	0.7	5.3	1.2E-16	<b>3.2E-15</b>	0.13	1.0	6.1	1.9E-10	<b>5.2E-09</b>
	B*67	0.8	3.3	4.3E-08	<b>1.2E-06</b>	0.24	1.1	3.6	1.0E-04	<b>0.0028</b>
	B*52	7.2	11.9	5.1E-07	<b>1.4E-05</b>	0.57	8.9	13.2	0.0016	<b>0.042</b>
	B*54	3.6	7.4	9.4E-07	<b>2.5E-05</b>	0.49	5.3	8.1	0.012	0.33
	B*44	4.6	7.4	2.6E-04	<b>0.0070</b>	0.60	5.7	8.1	0.029	0.77
HLA-A	A*33	4.7	8.1	1.7E-05	<b>1.7E-04</b>	0.56	4.6	8.8	1.2E-04	<b>0.0012</b>
	A*11	6.2	9.2	8.1E-04	<b>0.0081</b>	0.67	7.8	9.3	0.23	1

**Table 2. Significant HLA-A/B allele differences between male and female BD patients**

HLA-B						HLA-A					
Allele	Allele Freq., %		P	P <sub>c</sub>	OR	Allele	Allele Freq., %		P	P <sub>c</sub>	OR
	Males (n=349)	Females (n=259)					Males (n=349)	Females (n=259)			
B*51	31.8	22.4	3.2E-04	<b>0.0087</b>	1.62	A*11	4.7	8.1	0.013	0.13	0.55
B*54	2.6	5.0	0.0083	0.22	0.43	A*26	17.2	19.9	0.24	1	0.83

## Conclusions

- This study suggests that some HLA-A and HLA-B alleles are important in the development of specific clinical manifestations of BD.
- To validate our findings, further studies with other independent cohorts are needed.

**Table 3. Significant associations between HLA-A/B alleles and clinical manifestations of BD**

Symptom	HLA allele	All patients			P <sub>c</sub>	OR	B*51-negative patients			P <sub>c</sub>	OR
		Allele Freq., %		P			Allele Freq., %				
		Carriers	Non-carriers				Carriers	Non-carriers			
<b>Ocular lesions</b>											
		n=469:117					n=232:69				
	B*35	7.5	2.1	2.8E-04	<b>0.0077</b>	4.44	13.1	2.9	2.0E-05	<b>5.4E-04</b>	7.25
	A*26	20.8	9.8	3.9E-06	<b>3.9E-05</b>	2.96	27.8	10.9	1.0E-06	<b>1.0E-05</b>	4.42
	B*54	2.5	9.0	6.6E-04	<b>0.018</b>	0.30	3.4	12.3	0.0084	0.23	0.33
	A*31	10.1	17.5	9.3E-04	<b>0.0093</b>	0.48	4.3	5.8	0.39	1	0.65
<b>Skin lesions</b>											
		n=488:98					n=241:60				
	B*61	0.2	3.6	0.0011	<b>0.029</b>	0.16	0.4	5.8	0.0020	0.055	0.17
<b>Arthritis</b>											
		n=226:360					n=107:194				
	A*02	22.3	21.1	0.46	1	1.12	29.0	18.0	0.0010	<b>0.010</b>	1.99
	A*26	15.0	20.8	0.0039	<b>0.039</b>	0.61	18.7	26.8	0.011	0.11	0.55
<b>Epididymitis</b>											
		n=35:296					n=12:137				
	B*15	14.3	10.1	0.32	1	1.45	41.7	12.8	0.0013	<b>0.036</b>	4.58
<b>Intestinal lesions</b>											
		n=97:489					n=53:248				
	A*26	12.4	19.8	0.0026	<b>0.026</b>	0.49	14.2	26.0	0.0013	<b>0.013</b>	0.36
<b>Vascular lesions</b>											
		n=26:560					n=16:285				
	A*24	50.0	35.0	0.027	0.27	1.96	62.5	33.3	5.4E-04	<b>0.0054</b>	3.93
<b>Neurological lesions</b>											
		n=38:548					n=21:280				
	A*26	34.2	17.5	1.7E-04	<b>0.0017</b>	3.13	42.9	22.5	4.5E-04	<b>0.0045</b>	4.85

- All association analyses were carried out under an additive model, including age and sex as covariates.
- The obtained P-values were corrected for multiple testing with the Bonferroni correction.

