

Introduction

In order to fully utilize pharmacogenomics (PGx) for precision medicine research, PGx assays must be:

- Comprehensive
- High-throughput and scalable
- Robustly cover difficult-to-sequence and difficult-to-map regions (present in many clinically actionable PGx loci)

Legacy low-cost technologies can be biased towards known variants and/or populations and may result in data that are incomplete or difficult to phase, potentially affecting phenotype prediction and subsequent clinical utility. With long-read PacBio HiFi sequencing and Twist Bioscience hybrid capture technology, we describe a pre-designed PGx panel that is comprehensive and cost-efficient, allowing for scalable application to precision medicine research programs.

Panel design

PGx research panel:

- 49 gene targets, including all 20 current genes with CPIC guidelines, as well as FDA PGx genes and genes of PGx research interest
- Probes optimized using proprietary algorithm to enable balanced capture of complex regions
- Available as a ready-made Twist Alliance Long-Read PGx Panel (www.twistbioscience.com/products/ngs/Long-Read-Sequencing-Panels)

CYP genes	HLA	Others	
CYP1A2*	HLA-A	ABCB1	HTR2C
CYP2B6*	HLA-B	ABCG2	IFNL3
CYP2C19	HLA-DQA1	ADD1	MT-RNR1**
CYP2C8	HLA-DRB1	ADRA2A	MTHFR
CYP2C9		ANKK1	NAGS
CYP2D6		APOL1	NAT2
CYP3A4		BCHE	NUDT15
CYP3A5		CACNA1S	OPRD1
CYP4F2		CFTR	OPRK1
		COMT	OPRM1
		CTBP2P2	POLG
		DPYD	RYR1
		DRD2	SLC6A4
		F2	SLCO1B1
		F5	TPMT
		G6PD	UGT1A1
		GBA	UGT2B15
		GRIK4	VKORC1
			YEATS4

Table 1. 49 gene targets included in the Twist Alliance Long-Read PGx Panel. *Bold denotes full-gene coverage. *Underline denotes inclusion in a CPIC Level A guideline. **full length mtDNA coverage is available for spike-in separately through Twist.

Sample preparation, capture, and sequencing

- HG002 and 23 Coriell PGx GeT-RM reference samples were sequenced on a PacBio Sequel IIe system
- 10 samples were selected for public data release and are described in this poster (www.pacb.com/connect/datasets/#targeted-datasets)
- Workflow:

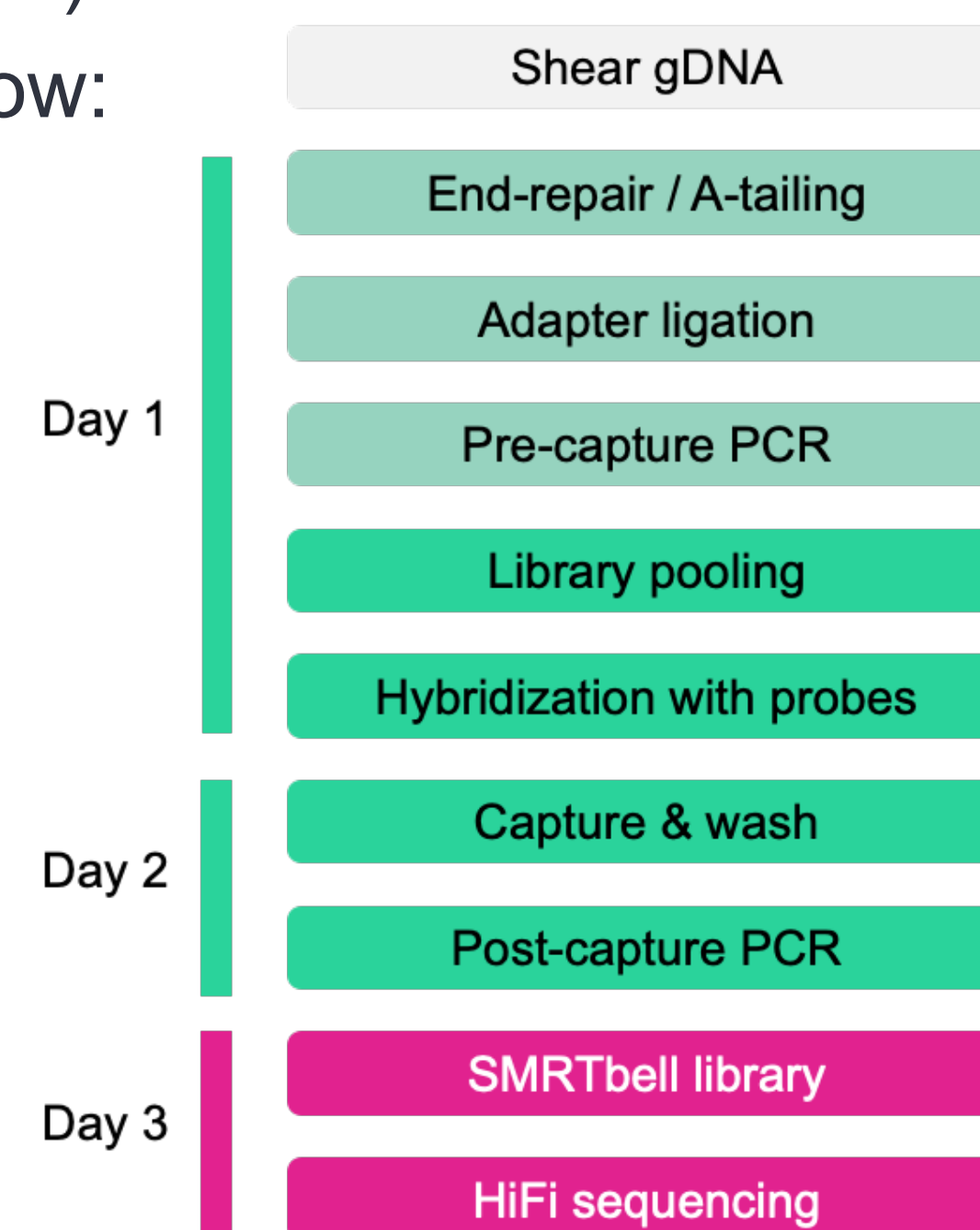


Figure 1. Workflow for sample preparation. PacBio steps in pink, Twist in green, and third party in grey. 24 samples were sequenced on a single SMRT Cell 8M.

Data analysis and results

SMRT Link v11.0 (HiFi reads, PCR duplicate marking and demultiplexing). Variants were called using a PacBio targeted sequencing pipeline, including DeepVariant, phasing with WhatsHap, and targeted metric calculation with Picard. Github: [PacificBiosciences/HiFiTargetEnrichment](https://github.com/PacificBiosciences/HiFiTargetEnrichment).

Relevant PGx variants (CPIC database v1.22.2) and read coverage were assessed at each position, average read coverage for HLA variants (Fig. 2):

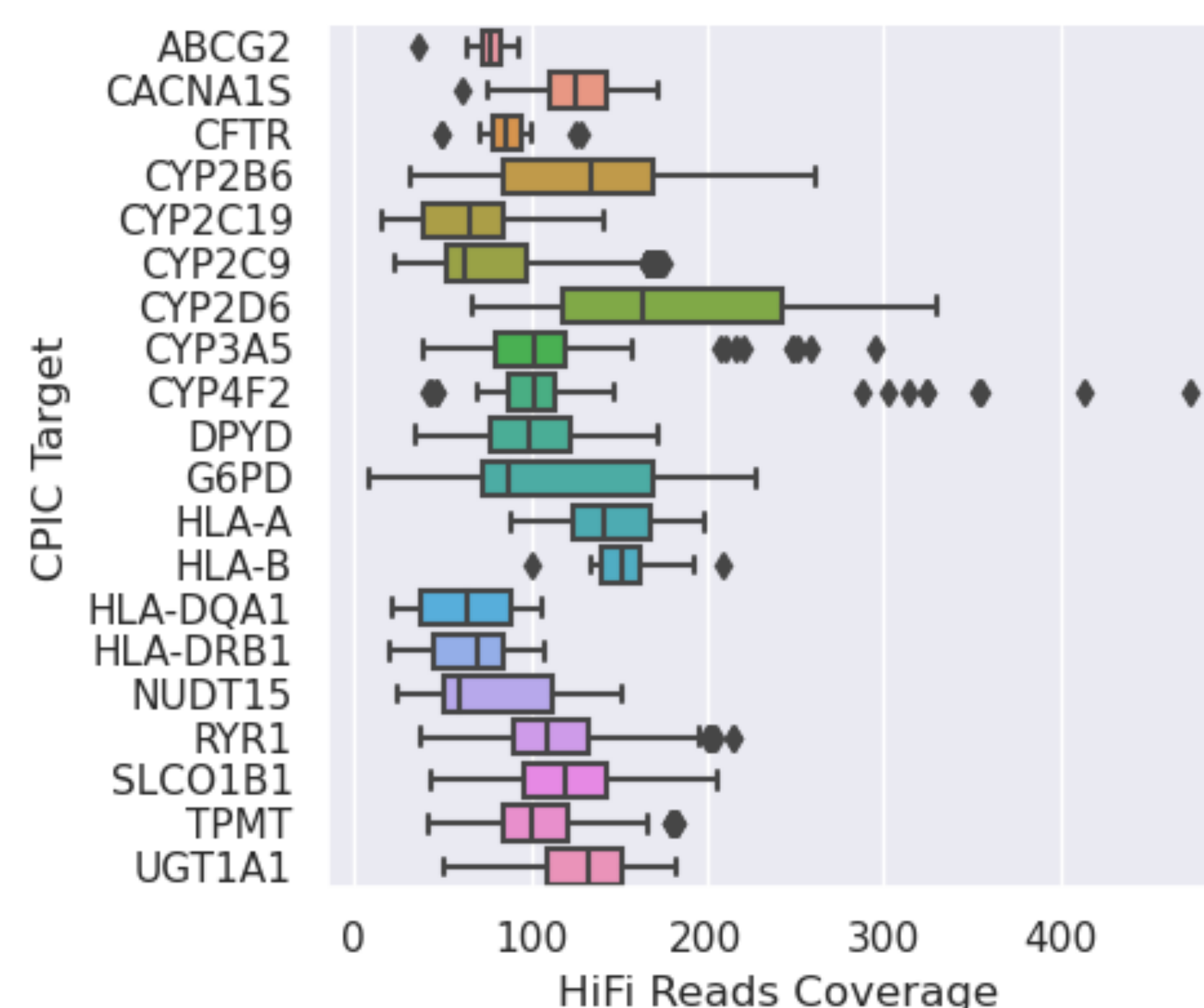


Figure 2. HiFi reads coverage of CPIC variants. Distribution of CPIC variant coverage across the 10 samples, summarized by gene.

Phased gVCFs produced as input into PharmCAT v2.1.2 for star (*) allele calling. Mapped bam files used to call CYP2D6 diplotypes using Pangu. Concordance for 9 samples with GeT-RM consensus calls¹ were compared (Fig. 3):

		HG00276	HG01190	NA07348	NA11832	NA18518	NA19109	NA19174	NA19207	NA19226
CYP2B6	GeT-RM	*2(*4)	*1(*5)/*1(*27)	*1/*1	*1/*1	*1/*6	*1/*6	*6/*18	*1/*6	*18/*20
	PharmCat	*2/*4	*1/*5	*1/*1	*1/*1	*1/*6	*1/*6	*6/*18	*1/*6	*18/*20
CYP2C9	GeT-RM	*1/*2	*1/*2	*1/*1	*1/*3 (*18)	*1/*1	*1/*1	*1/*1	*1/*1	*1/*8
	PharmCat	*1/*2	*1/*61	*1/*1	*1/*3	*1/*1	*1/*1	*1/*1	*1/*1	*1/*8
CYP2C19	GeT-RM	*1/*1	*1/*2	*2/*17	*1/*2	*2/*17	*1/*17	*1/*2	*2/*17	*1/*2
	PharmCat	*1/*1	*1/*2	*2/*17	*2/*38	*2/*17	*1/*17	*1/*2	*2/*17	*1/*2
CYP2D6	GeT-RM	*4/*5	*4/*5	*1/*6	*1/*4	*17/*29	*2XN/*29	no consensus (*4/*40)	*2/*10/*XN	*2/*2XN
	PharmCat	*4/*5	*68+*4/*5	*1/*6	*1/*68+*4	*17/*29	*2x2/*29	*4/*40	*2x2/*10	*2x2/*2
CYP3A4	GeT-RM	*1/*2	*1/*1B	*1/*1	*1/*1	*1B/*1B	*1B/*1B (*15)	*1B/*1B	*1B/*1B	*1B/*1B (*15)
	PharmCat	*1/*2	*36/*36	*1/*1	*1/*1	*36/*36	*15/*36	*36/*36	*36/*36	*15/*36
CYP3A5	GeT-RM	*3/*3	*1/*1	*3/*3	*3/*3	*1/*6	*1/*3	*1/*6	*3/*7	*1/*6
	PharmCat	*3/*3	*1/*1	*3/*3	*3/*3	*1/*6	*1/*3	*1/*6	*3/*7	*1/*6
CYP4F2	GeT-RM	*1/*1	*1/*3	*1/*1	*1/*1	*1/*2	*1/*1	*1/*1	*1/*1	*1/*2
	PharmCat	*1/*1	*1/*3	*1/*1	*1/*1	*1/*2	*1/*1	*1/*1	*1/*1	*1/*2
SLCO1B1	GeT-RM	*1/*15	*1/*1	*1/*1	*1/*1	*1A/*1B	*1/*15	*1A/*1B	*1A/*1B	*1/*1
	PharmCat	*1/*15	*1/*1	*1/*1	*14/*20	*1/*37	*15/*37	*1/*27	*37/*41	*31/*37
TPMT	GeT-RM	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1
	PharmCat	*1/*16	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1	*1/*1
UGT1A1	GeT-RM	*60/*28	(*37)/*60	*60/*60	(*28 + *60)/*60	*60/*60	*1/*60	*60 / (*28 + *60)	(*36+*60)/(*28+*60)	*1/*60
	PharmCat	*1/*80+*28	*1/*80+*37	*1/*1	*1/*80+*28	*1/*1	*1/*1	*1/*80+*28	*36/*80+*28	*1/*1
VKORC1 rs9923231	GeT-RM	GA	GG	GG	GG	GG	GG	GG	GG	GG
	PharmCat	GA	GG	GG	GG	GG	GG	GG	GG	GG

Table 3. Star (*) allele diplotype concordance or refinement for selected genes called by PharmCAT. GeT-RM rows indicate consensus calls from literature¹. PharmCAT rows indicate output diplotypes from the HiFi targeted sequencing data. Discordant diplotypes in red. Green boxes: no change in phenotype, yellow boxes: PharmCAT call predicted a different phenotype compared to original GeT-RM call; Note: PharmVar has retired CYP3A4*36 due to lack of evidence for function; *36 and *1 can be considered functionally equivalent. PharmCAT does not detect the normal function UGT1A1*60 allele due to lack of guidance in the CPIC guideline; *60 and *1 are functionally equivalent.

Discussion

- Variants included in CPIC guidelines robustly covered by the panel (at least mean 50x across CPIC genes)
- Star allele refinement likely due to allele definition updates or larger number of variants for higher resolution star allele assignment
- Refined diplotypes did not result in predicted phenotype change in most cases, however, HiFi-based calls for *SLCO1B1* predict increased or decreased function in some samples, as well as an indeterminate rather than normal metabolizer call for *TPMT* in one sample.

Conclusions

- The described PGx panel for long-read HiFi sequencing provides unbiased coverage of medically-actionable pharmacogenes.
- Results show high accuracy for detecting key loci for pharmacogenomics research and implementation.
- Refinement using HiFi sequencing may impact drug response phenotype prediction. As HiFi data enables full-gene phasing across targets, future work will assess phasing impact on star allele calls, subsequent phenotype prediction, and overall clinical utility.

References and Resources

- PharmCAT: K Sangkuhl & M Whirl-Carrillo, et al. *Pharmacogenomics Clinical Annotation Tool (PharmCAT)*. *Clinical Pharmacology & Therapeutics* (2020) 107(1):203-210.
- Pangu: Github: [PacificBiosciences/pangu](https://github.com/PacificBiosciences/pangu)
- 1. Pratt VM, Everts RE, Aggarwal P, et al. Characterization of 137 Genomic DNA Reference Materials for 28 Pharmacogenetic Genes: A GeT-RM Collaborative Project. *J Mol Diagn*. 2016;18(1):109-123.