# Genetic and Epigenetic Signature Identifies Individuals with Elevated Response to Vitamin B12 Supplementation

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### Abstract

Vitamin B<sub>12</sub> is essential for many aspects of human health. Deficiencies are largely caused by inadequate intake or reduced absorption, and are associated with increased incidence of neurological, cognitive and cardiovascular decline [1]. Using a previously published dataset of B<sub>12</sub>/ folic acid supplementation in elderly individuals (GSE74548), we investigated the effect of a variant in the methylenetetrahydrofolate reductase gene (MTHFR; rs1801133) on serum B<sub>12</sub> and folate levels at baseline and after 2 years of supplementation. As well as, the association between baseline genome-wide DNA methylation (Infinium 450K DNA methylation chip) in peripheral blood mononuclear cells (PBMCs) and supplementation induced changes in circulating B vitamin levels. Among post-supplementation individuals, we observed that those with the rs1801133 CC genotype had elevated circulating B<sub>12</sub> but not folic acid levels, relative to the rs1801133 TT genotype (P = 0.0073 and P = 0.47, respectively). Moreover, individuals with the CC genotype clustered into two distinct  $B_{12}$  response groups (P = 2.8 x10<sup>-6</sup>), termed high and low responders. Additionally, we observed an enrichment of low p-values among baseline DNA methylation patterns and change in circulating B<sub>12</sub> levels after supplementation in CC individuals only (empirical P < 1x10<sup>-5</sup>). This epigenetic signature is not near genetic variants or genes known to influence vitamin B<sub>12</sub> uptake. Overall, we present evidence that epigenetic signatures at baseline may predict an individual's response to B<sub>12</sub> supplementation and may highlight novel pathways of regulation. Elucidation and further understanding of pathways associated with elevated response to B<sub>12</sub> supplementation, may aid in the treatment of chronically deficient individuals.

### Methods

- B -Vitamins for the PRevention of Osteoporotic Factures
- Randomized, placebo-controlled trial (GSE74548) [2]
- Two year daily supplementation with 400ug folic acid/500ug vitamin B12 (N=44) or placebo (N=43)
- DNA for genome-wide DNA methylation (Infinium 450K Bead Chip) and serum for folic acid/ vitamin B12 collected at baseline and 2 year follow-up from buffy coats
- Correlations between quantile transformed serum folic acid/ vitamin B12 levels and DNA methylation at baseline (N=8,036 CpG sites) were determined using standard linear regression in R v3.3.1

## Figure 1. Serum vitamin B<sub>12</sub>, but not folate levels vary by rs | 80 | 133 genotype after supplementation

Stratification of serum  $B_{12}$  levels by *methylene tetrahydrofolate* reductase (*MTHFR*) rs1801133 genotype and supplementation status for serum  $B_{12}$  levels (**A**) and folate (**B**). After supplementation, serum  $B_{12}$ , not folate, levels are significantly different by genotype (P = 0.047 and 0.0073, respectively). MTHFR CC individuals cluster into 2 distinct groups, that may represent high and low responders to supplementation (P =  $2.8 \times 10^{-6}$ ). High responders (light blue dots) are significantly different from the rs1801133 TT individuals (black dots; P =  $6.9 \times 10^{-7}$ ), as opposed to low responders (dark blue dots; P=1). P-values were generated using Wilcoxon Rank sum test and vitamin  $B_{12}$ /folate serum values.

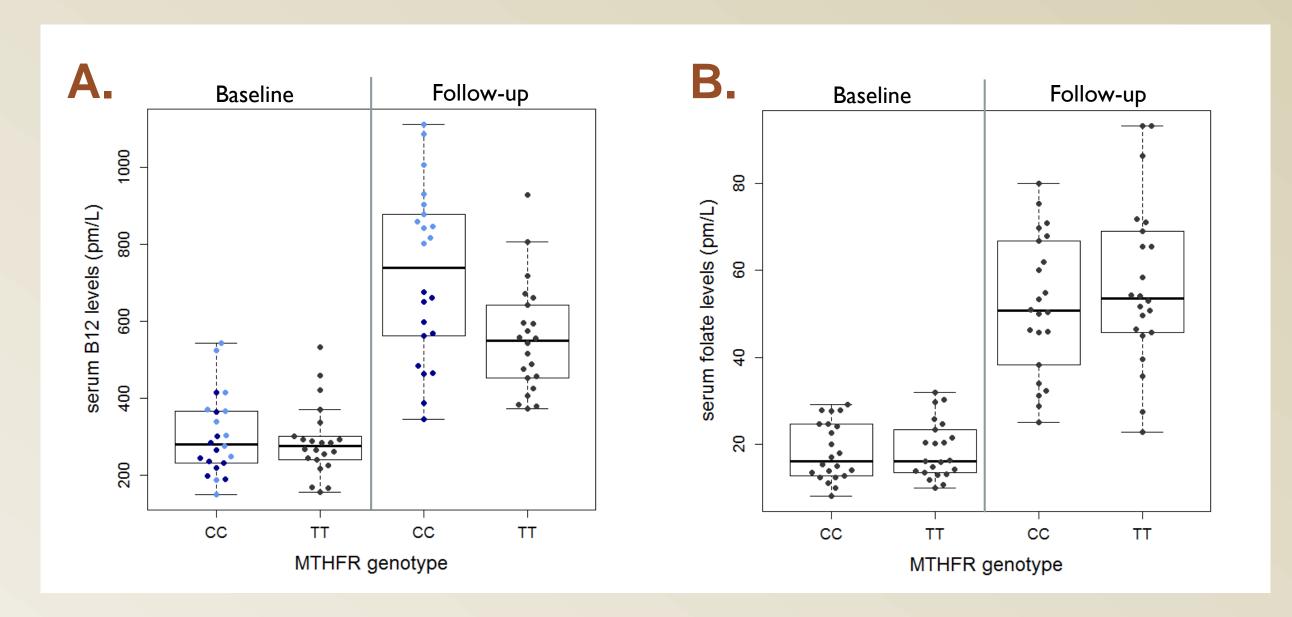
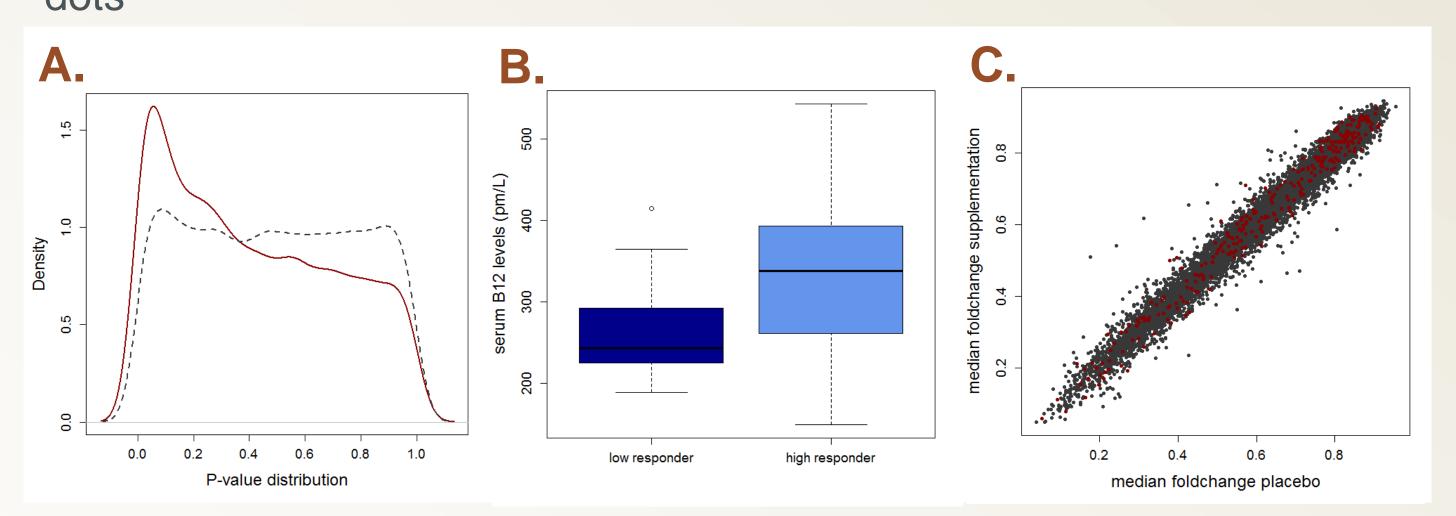


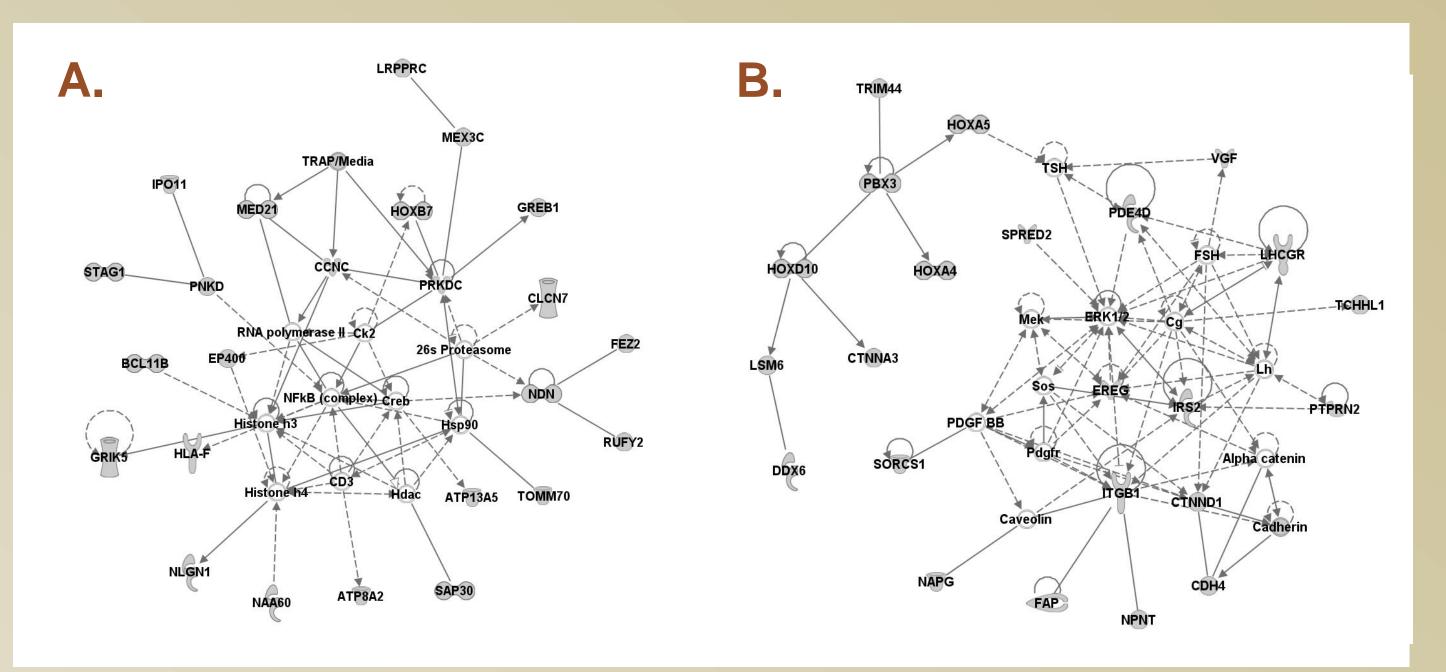
Figure 2. Baseline DNA methylation levels are correlated with supplementation induced changes in serum vitamin B<sub>12</sub>

**A.** Density plot of Spearman correlation p-value distributions for rs1801133 CC (blue line) and TT individuals (dashed line). rs1801133 CC individuals are enriched for low p-values (P < 0.01) (empirical P < 1 x10  $^{-5}$ ). rs1801133 TT individuals are modestly enriched for low p-values (empirical P=0.044). **B.** Among rs1801133 CC individuals, baseline serum vitamin B<sub>12</sub> levels are modestly elevated in high responders relative to low responders (P=0.13). **C.** Scatterplot of median DNA methylation foldchange (baseline - follow-up) for rs1801133 CC individuals receiving placebo (y-axis) or supplementation (x-axis). Red dots



## Figure 3. Genes near correlated CpG sites (p < 0.01) are enriched in inflammatory and immunomodulatory pathways

Genes near correlated CpG sites are significantly enriched in two Ingenuity Pathway Analysis protein-protein interaction networks. **A.** The first network (score = 46) is centered around the major inflammatory transcription factor, *NFkB*. **B.** The second network (score = 43) is centered around many interacting immunomodulatory molecules. *ITGB1 CD29*), for example, has been linked to enhanced immune cell ability to respond to recall antigens and home to sites of infection [3]. Molecules shaded in grey represent genes that are near a CpG site in which baseline DNA methylation levels are correlated with supplementation induced changes in serum  $B_{12}$  (P < 0.01).



### Conclusions

- Genetic and baseline epigenetic signatures detectable in blood are correlated with and may be able to predict response to vitamin B<sub>12</sub> supplementation
- This baseline epigenetic signature may alter the ability of immune cells to respond to inflammatory or immunomodulatory stimuli

#### References

- 1. Porter, K., et al., Causes, Consequences and Public Health Implications of Low B-Vitamin Status in Ageing. Nutrients, 2016. 8(11).
- 2. Kok, D.E., et al., *The effects of long-term daily folic acid and vitamin B12 supplementation on genome-wide DNA methylation in elderly subjects.* Clin Epigenetics, 2015. **7**: p. 121.
- 3. Morimoto, C., et al., *The isolation and characterization of the human suppressor inducer T cell subset.* J Immunol, 1985. **134**(3): p. 1508-15.