SUPPLEMENTARY INFORMATION

A meta-analysis of genome-wide association studies identifies 17 new Parkinson's disease risk loci

SUPPLEMENTARY NOTE

Enrichment of PDGene associations in PDWBS data

Top associations in PDGene were tested for enrichment of smaller p-values in the PDWBS data. All variants (of the 9,830 top PDGene variants) within 1Mb of previously associated loci were removed, and the remaining SNPs were LD-pruned with an r² threshold of 0.01 (using 1000 Genomes data for reference LD information). After the previous filtering step, 448 SNPs remained. Enrichment of variants observed at each significance threshold in the PDWBS data was tested in the remaining SNPs using a chi-square test. Results are shown in Supplementary Table 3. We observe significant enrichment of smaller p-values in the top PDGene associations in the PDWBS data.

Power calculations for phenotyped versus population controls

The self-reported samples used as controls could result in a reduction of power in PDWBS. We investigated whether sample misdiagnosis or the presence of samples that may develop Parkinson's in the future within controls led to a reduction in power. Assuming that the misdiagnosis rate is unlikely to exceed the population prevalence of PD, we modified the method for computing power of a GWAS (CaTs)[1] by adjusting the controls disease allele frequency to account for misdiagnosis (based on prevalence) using the equation:

control_{adj}DAF = controlDAF*(1-prevalance) + caseDAF*(prevalence)

where *caseDAF* and *controlDAF* are unchanged from the original CaTs calculation.

We compared the unadjusted power calculation ("*phenotyped controls*") to the power calculation adjusted for a misdiagnosis rate equal to the population prevalence of PD (0.01) ("*population controls*"). Assuming a significance threshold alpha=5x10⁻⁸ and genotype relative risk of 1.1, we observe minimal loss in power (see plot below). For example, at a disease allele frequency of 0.3, misdiagnosis of controls decreased the power from 0.397 to 0.378. Increasing the population prevalence of PD to 0.02 did not substantially decrease power (see below). Given these power calculations, we conclude that the use of self-reported controls has a modest impact on the power to detect effects within PDWBS.



PD genetic risk score

We calculated genetic risk scores (GRS) as described in previous studies to test whether the new PD risk loci significantly improved the GRS[2-4]. The GRS for previous loci used the 28 previously replicated GWAS variants (the 24 genome-wide significant loci in Table 1 in the main text, and four secondary signals in the GBA, TMEM175, SNCA and HLA-DQB1 locus [3]) with the addition of rarer variants N370S and E326K in the GBA gene and G2019S in LRRK2[5] (Bras et al under review) (31 total variants). We compared this to a GRS calculated with an additional 16 novel loci present in the NeuroX data (see Table 2 in main text) (47 total variants). All GRS analyses were weighted using combined discovery effect estimates applied to the NeuroX allele counts, adjusting for age (onset in cases or last exam in controls), sex and eigenvectors 1-5 within a logistic regression model. Comparing areas under the curve of logistic regression models, we see a slight but significant increase in classification accuracy from the 31 variant GRS (AUC = 0.6439, 95% CI: 0.634-(0.6537) to the 47 variant GRS (AUC = 0.6518, 95% CI: 0.6419-0.6616) guantified by DeLong's test (|Z| = 5.4187, P = 6.002×10^{-8})[6]. A significant increase in accuracy was still observed if we removed the three loci that did not validate at a one-sided P < 0.05 in the NeuroX dataset (|Z| = 5.342, $P = 9.192 \times 10^{-8}$). While slightly higher AUC was detected in the 47 variant GRS than in the 44 variant GRS (AUC = 0.6515, 95%) CI: 0.6417-0.6614), the increase in AUC was not significant (P > 0.05).

Differential expression between PD and healthy controls

Total RNA was extracted from the striatum and frontal cortex of subjects with a histopathological diagnosis of Parkinson's disease and aged matched healthy controls for sequencing. 0.5 μ g of total RNA was used as an input material for library preparation using TruSeq RNA Sample Preparation Kit v2 (Illumina). Size of the libraries was confirmed using Fragment Analyzer (Advanced Analytical Technologies).

Library concentrations were determined by a qPCR-based method using a library quantification kit (KAPA). The libraries were multiplexed and then sequenced on Illumina HiSeq2500 to generate 25 million single-end 50-base reads per library. HTSeqGenie was used to perform feature counting, filtering & alignment. Only reads with unique genomic alignments were analyzed. Reads with alignments overlapping exons of the gene model were counted towards that gene. Gene models used in this step were from the IGIS gene model package on Bioconductor (TxDb.Hsapiens.BioMart.igis).

Genes with mean expression across all samples and tissues < 2 RPKM were removed. Differential expression between Parkinson's patients and healthy controls was assessed separately in the frontal cortex and in the striatum tissue. Differential expression was tested with DESeq2 [7]. Genes with an adjusted p-value < 0.05 in either tissue were considered as suggestive of differential expression. Because gene expression is derived from bulk tissue, it is equally possible that differential expression between the two disease states is due to differential cell-type composition of the tissue sample. Without expression data at cell-level resolution it is difficult to distinguish between a scenario with differential cell-type composition, differential gene expression or a mixture of the two. We therefore acknowledge that significant genes in our differential expression analysis are merely suggestive of differential gene expression between disease states.

Colocalization of eQTL and PD-associations

Colocalization is a formal way to test for overlap between the causal variant underlying a GWAS association and an eQTL association. One method typically used to carry this out on summary statistics is encoded by the R package, *coloc*[8]. Applying this method to GWAS and eQTL data requires making some key assumptions, including the assumption of a single causal variant and that the causal variant is included in the input summary statistics (see Giambortolomei *et al.* 2013 for a more detailed discussion). As the meta-analysis was carried out on a subset of SNPs provided publicly by PDGene, we did not have dense genotyping of variants in the PD-associated loci with summary statistics from the meta-analysis. Thus, we could not carry out a full colocalization analysis on all of the PD-associated loci discussed in this study. As an alternative, we carried out colocalization only on the PDWBS dataset at the previously reported PD-loci that were genome-wide significant in the PDWBS cohort alone and for which we report an eQTL (7 SNP-gene pairings, see below). Colocalization between causal variants in PD associated loci and eQTLs was carried out with the coloc.abf function in the *coloc* R package[8] with prior probabilities *p1* and *p2* parameters set to 1×10^{-5} . eQTL summary statistics as pre-computed by GTEx and summary statistics from PDWBS were used as input for *coloc*. The colocalization analysis was run on all SNPs within 250kb of the index SNP that overlapped both the GTEx and the PDWBS GWAS data for each PD-associated locus. Of the eQTLs report, we find that all have moderate to high evidence of colocalization (posterior probability > 0.5).

SNP	Gene	GTEx tissue	Posterior probability of shared causal variant
rs11060180	OGFOD2	Brain_Anterior_cingulate_cortex_BA24	0.523
rs12637471	MCCC1	Muscle_Skeletal	0.554
rs1474055	STK39	Brain Putamen basal ganglia	0.593
rs1474055	STK39	Testis	0.578
rs34311866	DGKQ	Brain Cerebellum	0.514
rs34311866	DGKQ	Lung	0.858
rs356182	SNCA	Brain Cerebellar Hemisphere	0.548
rs823118	NUCKS1	Brain Caudate basal ganglia	0.63
rs823118	NUCKS1	Skin Sun Exposed Lower leg	0.929
rs823118	SLC41A1	Brain Cerebellum	0.521
rs823118	SLC41A1	Pancreas	0.626

Gene sets used for targeted gene-set enrichment analyses

Lysosomal, autophagy and mitochondrial gene-sets mapping to the background list of genes (see Methods section in the main paper) are listed below.

Lysosomal genes

ABCA2, ABCA3, ABCB9, ABCC10, ACP2, ACP5, ACPP, AGA, AHNAK, ANKFY1, ANPEP, AP1G1, AP3B1, AP3D1, AP3M1, ARL8A, ARL8B, ARSA, ARSB, ARSG, ASAH1, ATP11A, ATP11C, ATP13A2, ATP6AP1, ATP6V0A1, ATP6V0A2, ATP6V0A4, ATP6V0C, ATP6V0D1, ATP6V1A, ATP6V1B1, ATP6V1B2, ATP6V1C1, ATP6V1C2, ATP6V1D, ATP6V1E1, ATP6V1F, ATP6V1G1, ATP6V1H, BTD, C18orf8, C1orf85, CCZ1, CD164, CD63, CD68, CECR1, CLCN5, CLCN6, CLCN7, CLN3, CLN5, CLU, COL6A1, CP, CPVL, CREG1, CST7, CTBS, CTNS, CTSA, CTSB, CTSC, CTSD, CTSF, CTSH, CTSK, CTSO, CTSS, CTSZ, DAGLB, DEPDC5, DNAJC13, DNAJC5, DNASE1, DNASE2, DPP4, DPP7, ECE1, EGF, ELANE, ENPEP, ENPP1, ENTPD4, EPDR1, FLOT1, FLOT2, FUCA1, FUCA2, GAA, GALC, GALNS, GBA, GDAP2, GGH, GLA, GLB1, GM2A, GNA11, GNAI1, GNAI2, GNAI3, GNAQ, GNB1, GNB2, GNB4, GNS, GPLD1, GPR137, GRN, GUSB, HEXA, HEXB, HGSNAT, HPSE, HYAL1, HYAL2, IDS, IDUA, IFI30, IL4I1, LAMP1, LAMP2, LAMP3, LAMTOR2, LAPTM4A, LAPTM5, LGMN, LIPA, LITAF, LMBRD1, LNPEP, LRP1, LRP2, MAN2B1, MAN2B2, MANBA, MCOLN1, MCOLN2, MCOLN3, MFSD8, MIOS, MON1B, MPO, MTOR, MYLPF, NAAA. NAGA. NAGLU. NAPA. NAPG. NCSTN. NEU1. NEU4. NPC1. NPC2. NSF. OSTM1. P2RX4, PCYOX1, PI4K2A, PLA2G15, PLBD1, PLBD2, PLD1, PLOD1, PPT1, PPT2, PRCP, PRTN3, PSAP, PSEN1, PTGDS, RAB14, RAB2A, RAB5C, RDH14, RNASE1, RNASE6, RNASET2, RNF13, RPTOR, RRAGA, RRAGB, SCARB1, SCARB2, SCPEP1, SGSH, SIAE, SIDT2, SLC11A1, SLC11A2, SLC12A4, SLC15A3, SLC17A5, SLC26A11, SLC29A3, SLC2A13, SLC2A8, SLC30A2, SLC36A1, SLC44A2, SMCR8, SMPD1, SMPD4, SMPDL3A, SPG11, SPHK2, SPNS1, SPPL2A, STARD3, STARD3NL, STX7, TCIRG1, TLR3, TM9SF1, ТМВІМ1, ТМЕМ175, ТМЕМ192, ТМЕМ55А, ТМЕМ55В, ТМЕМ63А, ТМЕМ74. TMEM8A, TMEM9, TMEM92, TPP1, UBA52, VAMP7, VASN, VPS11, VPS16, VPS18, VPS33A, VPS35, VPS39, VPS41, WDR11, WDR41, ZFYVE26

Autophagy genes

AAMP, AFF4, ALDOA, AMBRA1, APOL1, ARNT, ARSA, ARSB, ATF4, ATF6, ATG10, ATG12, ATG16L1, ATG16L2, ATG2A, ATG2B, ATG3, ATG4A, ATG4B, ATG4C, ATG4D, ATG5, ATG7, ATG9A, ATG9B, ATIC, BAG1, BAG3, BAK1, BAX, BCL2, BCL2L1, BECN1, BID, BIRC5, BIRC6, BNIP1, BNIP3, BNIP3L, C12orf44, CALCOCO2, CAMKK2, CANX, CAPN1. CAPN10, CAPN2, CAPNS1, CASP1, CASP3, CASP4, CASP8, CCL2, CCR2, CD46, CDKN1A, CDKN1B, CDKN2A, CFLAR, CHMP2B, CHMP4B, CLDN9, CLN3, CSNK1A1, CTSB, CTSD, CX3CL1, CXCR4, DAPK1, DAPK2, DDIT3, DIRAS3, DLC1, DNAJB1, DNAJB9, DRAM1, EDEM1, EEF2, EEF2K, EGFR, EIF2AK2, EIF2AK3, EIF2S1, EIF4EBP1, EIF4G1, ERBB2, ERN1, ERO1L, FADD, FAS, FKBP1A, FKBP1B, FOS, FOXO1, FOXO3, GAA, GABARAP, GABARAPL1, GABARAPL2, GAPDH, GNAI3, GNB2L1, GOPC, GRID1, GRID2, HDAC1, HDAC6, HGS, HIF1A, HSP90AB1, HSPA5, HSPA8, HSPB8, IFNG, IKBKB, IKBKE, IL24, ILF2, INTS7, IRGM, ITGA3, ITGA6, ITGB1, ITGB4, ITPR1, KAT8, KIAA0226, KIF5B, KLHL24, LAMP1, LAMP2, MAP1LC3A, MAP1LC3B, MAP1LC3C, MAP2K7, MAPK1, MAPK3, MAPK8, MAPK8IP1, MAPK9, MBTPS2, MLST8, MTMR14, MTOR, MYC, NAF1, NAMPT, NBR1, NCKAP1, NFE2L2, NFKB1, NKX2-3, NLRC4, NPC1, NRG1, NRG2, NRG3, P4HB, PARK2, PARP1, PEA15, PELP1, PEX14, PEX3, PIK3C3, PIK3R4, PINK1, PPP1R15A, PPP1R15B, PRKAB1, PRKAR1A, PRKCD, PRKCQ, PTEN, PTK6, RAB11A, RAB1A, RAB24, RAB33B, RAB5A, RAB7A, RAC1, RAF1, RB1, RB1CC1, RBX1, RELA, RGS19, RHEB, RPS6KB1, RPTOR, SAR1A, SERPINA1, SESN2, SH3GLB1, SIRT1, SIRT2, SPHK1, SPNS1, SOSTM1, ST13, STK11, TBK1, TM9SF1, TMEM74, TNFSF10, TP53,

TP53INP2, TP63, TP73, TSC1, TSC2, TUSC1, ULK1, ULK2, ULK3, USP10, UVRAG, VAMP3, VAMP7, VEGFA, WDFY3, WDR45, WIPI1, WIPI2, ZFYVE1

Mitochondrial genes

AADAT, AARS2, AASS, ABAT, ABCA13, ABCA9, ABCB10, ABCB6, ABCB7, ABCB8, ABCB9, ABCD1, ABCD2, ABCD3, ABCF2, ABHD10, ABHD11, ACAA1, ACAA2, ACACA, ACACB, ACAD10, ACAD11, ACAD8, ACAD9, ACADL, ACADM, ACADS, ACADSB, ACADVL, ACAT1, ACCS, ACLY, ACN9, ACO1, ACO2, ACOT13, ACOT2, ACOT7, ACOT9, ACOX1, ACOX3, ACP6, ACSF2, ACSF3, ACSL1, ACSL4, ACSL6, ACSM1, ACSM2A, ACSM3, ACSM5, ACSS1, ACSS3, ACYP2, ADCK1, ADCK2, ADCK3, ADCK4, ADCK5, ADHFE1, AFG3L2, AGK, AGMAT, AGPAT5, AGR2, AGXT, AGXT2, AHCYL1, AIFM1, AIFM2, AIFM3, AK2, AK3, AK4, AKAP1, AKAP10, AKR1B10, AKR7A2, ALAS1, ALAS2, ALDH18A1, ALDH1B1, ALDH1L1, ALDH1L2, ALDH2, ALDH3A2, ALDH4A1, ALDH5A1, ALDH6A1, ALDH7A1, ALDH9A1, ALKBH1, ALKBH3, ALKBH7, AMACR, AMT, ANGEL2, APEX2, APOA1BP, APOO, APOOL, APOPT1. ARF5. ARG2. ARL2. ARMC10. ARMS2. ASAH2. ATAD1. ATAD3A. ATAD3B. ATIC. ATP10D, ATP5A1, ATP5B, ATP5C1, ATP5D, ATP5E, ATP5F1, ATP5G1, ATP5G2, ATP5G3, ATP5H, ATP5I, ATP5J, ATP5J2, ATP5J2-PTCD1, ATP5L, ATP5O, ATP5S, ATP5SL, ATPAF1, ATPAF2, ATPIF1, ATXN2, AUH, AURKAIP1, BAD, BAK1, BAX, BCAT2, BCKDHA, BCKDHB, BCKDK, BCL2, BCL2L1, BCL2L13, BCL2L2, BCS1L, BDH1, BID, BLOC1S1, BNIP3, BNIP3L, BOLA1, BOLA3, BPHL, C10orf10, C10orf2, C12orf10, C12orf65, C14orf159, C14orf2, C15orf40, C15orf48, C15orf61, C16orf91, C17orf89, C19orf52, C19orf70, C10BP, C20orf24, C21orf33, C2orf47, C2orf69, C3orf33, C5orf63, C6orf136, C6orf203, C6orf57, C7orf55, C8orf82, CA5A, CA5B, CARKD, CARS2, CASP8, CAT, CBR3, CBR4, CCBL2, CCDC109B, CCDC127, CCDC51, CCDC58, CCDC90B, CCT7, CDC25C, CECR5, CEP89, CHCHD1, CHCHD10, CHCHD2, CHCHD3, CHCHD4, CHCHD5, CHCHD6, CHCHD7, CHDH, CHPT1, CISD1, CISD2, CISD3, CKMT1A, CKMT1B, CKMT2, CLIC4, CLPB, CLPP, CLPX, CLYBL, CMC1, CMC2, CMC4, CMPK2, COA1, COA3, COA4, COA5, COA6, COA7, COASY, COMT, COMTD1, COQ10A, COQ10B, COQ2, COQ3, COQ4, COQ5, COQ6, COQ7, COQ9, COX10, COX11, COX14, COX15, COX16, COX17, COX18, COX19, COX20, COX411, COX412, COX5A, COX5B, COX6A1, COX6A2, COX6B1, COX6B2, COX6C, COX7A1, COX7A2, COX7A2L, COX7B, COX7C, COX8A, COX8C, CPOX, CPS1, CPT1A, CPT1B, CPT1C, CPT2, CRAT, CRLS1, CROT, CRY1, CRYZ, CS, CYB5A, CYB5B, CYB5R2, CYB5R3, CYC1, CYCS, CYP11A1, CYP11B2, CYP24A1, CYP27A1, CYP27B1, D2HGDH, DAP3, DARS2, DBI, DBT, DCAKD, DCXR, DDAH1, DDX28, DECR1, DGUOK, DHCR24, DHODH, DHRS1, DHRS4, DHRS7B, DHRSX, DHTKD1, DHX30, DIABLO, DLAT, DLD, DLST, DMGDH, DMPK, DNA2, DNAJA3, DNAJC11, DNAJC15, DNAJC19, DNAJC28, DNAJC30, DNAJC4, DNLZ, DNM1L, DTYMK, DUS2, DUSP26, DUT, EARS2, ECH1, ECHDC1, ECHDC2, ECHDC3, ECHS1, ECI1, ECI2, ECSIT, EEFSEC, EFHD1, EHHADH, ELAC2, EMC2, ENDOG, EPHX2, ERAL1, ETFA, ETFB, ETFDH, ETHE1, EXOG, FABP1, FAHD1, FAHD2A, FAM136A, FAM162A, FAM185A, FAM195A, FAM210A, FAM210B, FAM213A, FARS2, FASN, FASTK, FASTKD1, FASTKD2, FASTKD3, FASTKD5, FBXL4, FDPS, FDX1, FDX1L, FDXR, FECH, FH, FHIT, FIS1, FKBP10, FKBP8, FLAD1, FOXRED1, FPGS, FTH1, FTMT, FTSJ2, FUNDC1, FUNDC2, FXN, GADD45GIP1, GAPDH, GARS, GATC, GATM, GBAS, GCAT, GCDH, GCSH, GDAP1, GFER, GFM1, GFM2, GHITM, GK, GLDC, GLOD4, GLRX2, GLRX5, GLS, GLS2, GLUD1, GLYAT, GLYCTK, GNG5, GOLPH3, GOT2, GPAM, GPD2, GPI, GPT2, GPX1, GPX4, GRHPR, GRPEL1, GRPEL2, GRSF1, GSR, GSTK1, GSTO1, GSTZ1, GTPBP10, GTPBP3,

GTPBP6, GUF1, GUK1, HADH, HADHA, HADHB, HAGH, HAO2, HARS2, HCCS, HDHD3, HEBP1, HEMK1, HIBADH, HIBCH, HIGD1A, HIGD2A, HINT1, HINT2, HINT3, HK1, HK2, HMBS, HMGCL, HMGCS2, HOGA1, HRSP12, HSCB, HSD17B10, HSD17B4, HSD17B8, HSDL1, HSDL2, HSPA9, HSPB7, HSPD1, HSPE1, HTATIP2, HTRA2, IARS2, IBA57, ICT1, IDE, IDH1, IDH2, IDH3A, IDH3B, IDH3G, IDI1, IFI27, IMMP1L, IMMP2L, IMMT, ISCA1, ISCA2, ISCU, ISOC2, IVD, KARS, KIAA0100, KIAA0141, KIAA0391, KIF1B, KMO, KRT5, L2HGDH, LACE1, LACTB, LACTB2, LAMC1, LAP3, LARS2, LDHAL6B, LDHB, LDHD, LETM1, LETM2, LETMD1, LIAS, LIPT1, LIPT2, LONP1, LONP2, LRPPRC, LYPLA1, LYPLAL1, LYRM1, LYRM2, LYRM4, LYRM5, LYRM7, LYRM9, MACROD1, MALSU1, MAOA, MAOB, MARC1, MARC2, MARCH5, MARS2, MAVS, MCAT, MCCC1, MCCC2, MCEE, MCU, MCUR1, MDH1, MDH2, ME1, ME2, ME3, MECR, METAP1D, METTL15, METTL17, METTL5, METTL8, MFF, MFN1, MFN2, MGARP, MGME1, MGST1, MGST3, MICU1, MICU2, MIEF1, MINOS1, MIPEP, MLH1, MLYCD, MMAB, MMACHC, MMADHC, MOCS1, MPC1, MPC2, MPST, MPV17, MPV17L, MPV17L2, MRM1, MRPL1, MRPL10, MRPL11, MRPL12, MRPL13, MRPL14, MRPL15, MRPL16, MRPL17, MRPL18, MRPL19, MRPL2, MRPL20, MRPL21, MRPL22, MRPL23, MRPL24, MRPL27, MRPL28, MRPL3, MRPL30, MRPL32, MRPL33, MRPL34, MRPL35, MRPL36, MRPL37, MRPL38, MRPL39, MRPL4, MRPL40, MRPL41, MRPL42, MRPL43, MRPL44, MRPL45, MRPL46, MRPL47, MRPL48, MRPL49, MRPL50, MRPL51, MRPL52, MRPL53, MRPL54, MRPL55, MRPL57, MRPL9, MRPS10, MRPS11, MRPS12, MRPS14, MRPS15, MRPS16, MRPS17, MRPS18A, MRPS18B, MRPS18C, MRPS2, MRPS21, MRPS22, MRPS23, MRPS24, MRPS25, MRPS26, MRPS27, MRPS28, MRPS30, MRPS31, MRPS33, MRPS34, MRPS35, MRPS36, MRPS5, MRPS6, MRPS7, MRPS9, MRRF, MRS2, MSRA, MSRB2, MSRB3, MTCH1, MTCH2, MTCP1, MTERF, MTERFD1, MTERFD2, MTERFD3, MTFMT, MTFP1, MTFR1, MTFR1L, MTG1, MTG2, MTHFD1, MTHFD1L, MTHFD2, MTHFD2L, MTHFS, MTIF2, MTIF3, MTO1, MTPAP, MTRF1, MTRF1L, MTX1, MTX2, MUL1, MUT, MUTYH, NADK2, NAGS, NARS2, NBR1, NCEH1, NCOA4, NDUFA1, NDUFA10, NDUFA11, NDUFA12, NDUFA13, NDUFA2, NDUFA3, NDUFA4, NDUFA5, NDUFA6, NDUFA7, NDUFA8, NDUFA9, NDUFAB1, NDUFAF1, NDUFAF2, NDUFAF3, NDUFAF4, NDUFAF5, NDUFAF6, NDUFAF7, NDUFB1, NDUFB10, NDUFB11, NDUFB2, NDUFB3, NDUFB4, NDUFB5, NDUFB6, NDUFB7, NDUFB8, NDUFB9, NDUFC1, NDUFC2, NDUFS1, NDUFS2, NDUFS3, NDUFS4, NDUFS5, NDUFS6, NDUFS7, NDUFS8, NDUFV1, NDUFV2, NDUFV3, NEU4, NFS1, NFU1, NGRN, NIF3L1, NIPSNAP1, NIPSNAP3A, NIPSNAP3B, NIT1, NIT2, NLN, NLRX1, NME3, NME4, NME6, NMNAT3, NNT, NOA1, NRD1, NSUN3, NSUN4, NT5C, NT5DC2, NT5DC3, NT5M, NTHL1, NUBPL, NUCB2, NUDT13, NUDT19, NUDT2, NUDT5, NUDT6, NUDT8, NUDT9, OAT, OBSCN, OCIAD1, OCIAD2, OGDH, OGDHL, OGG1, OMA1, OPA1, OPA3, OSBPL1A, OSGEPL1, OTC, OXA1L, OXCT1, OXLD1, OXNAD1, OXR1, OXSM, P4HB, PACSIN2, PAICS, PAK7, PAM16, PANK2, PARK7, PARL, PARS2, PC, PCBD2, PCCA, PCCB, PCK2, PDE12, PDF, PDHA1, PDHA2, PDHB, PDHX, PDK1, PDK2, PDK3, PDK4, PDP1, PDP2, PDPR, PDSS1, PDSS2, PET100, PET112, PET117, PEX11B, PGAM5, PGS1, PHB, PHB2, PHYH, PI4KA, PICK1, PIF1, PINK1, PISD, PITRM1, PKLR, PLGRKT, PMAIP1, PMPCA, PMPCB, PNPLA8, PNPO, PNPT1, POLDIP2, POLG, POLG2, POLRMT, PPA2, PPIF, PPM1K, PPOX, PPTC7, PPWD1, PRDX2, PRDX3, PRDX4, PRDX5, PRDX6, PRELID1, PRELID2, PREPL, PRODH, PRODH2, PROSC, PRSS35, PSMA6, PSTK, PTCD1, PTCD2, PTCD3, PTGES2, PTPMT1, PTPN4, PTRH1, PTRH2, PTS, PUS1, PUSL1, PXMP2, PXMP4, PYCR1, PYCR2, PYURF, QDPR, QRSL1, QTRT1, RAB11FIP5, RAB24, RAB32, RAB35, RARS, RARS2, RBFA,

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Non-targeted gene-set enrichment analysis of PD-associated regions

Overall, we found the PD associated regions to be enriched for genes in the lysosomal KEGG pathway (P_{adjusted}=0.02) (Supplementary Table 12). Of the 115 genes mapping to this pathway, 12 mapped to 8 of the PD associated intervals (*SCARB2, PSAPL1, ATP6V0A1, NEU1, PPT2, NAGLU, IDUA, LAMP3, GBA, GALC, ABCB9,* and *CTSB*). Our candidate gene pipeline had nominated four of these twelve genes (*ATP6V0A1, GBA, GALC* AND *CTSB*). We note that both *NAGLU* and *ATP6V0A1* were within 250kb of the index SNP rs601999, though only *ATP6V0A1* was nominated by our candidate pipeline as a candidate gene.

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SUPPLEMENTARY FIGURES



Supplementary Figure 1. QQ-plot of PDWBS p-values. Genome-wide p-values for variants in PDWBS are shown in black circles ("All", 11,933,700 SNPs). Association p-values for the 9,830 variants analyzed in this meta-analysis are shown in dark blue triangles ("PDGene overlap"). Of this subset, those within 1Mb of previously associated regions are displayed in blue squares ("PDGene overlap, w/in 1mb of previously reported"). The 4,706 variants outside of these regions are displayed in red diamonds ("PDGene overlap, not previously reported").











Supplementary Figure 2. Regional association plots for loci with P<5x10⁻⁸ in the discovery phase metaanalysis. For the 15 novel loci, regional association plots are displayed for p-values in the meta-analysis (left column), as well as in the PDWBS data alone (right column). The index SNP for each region is labeled and plotted as a purple diamond. Colors for all other variants refer to the LD (r²) with the index SNP as measured in 1000 Genomes data. Grey refers to missing LD information for this SNP. Recombination rates for the regions are displayed in blue. For each association, all variants within 250kb of the index SNP are shown, with the exception of 4 regions (rs34043159, rs2694528, rs2296887, rs6416935) where variants within 500kb of the index SNP are shown. Grey arrows in (0-R) denote associations previously reported at non-genome-wide significant thresholds (rs1296028 and rs1536076). In two regions, the PDWBS GWAS indicate an alternate top signal. For rs34043159 (C-D), rs11679611 is the top association signal in the PDWBS data and for rs2296887 (U-V), rs9665587 is the top association signal in the PDWBS data. Plots were generated with Locus Zoom [9].















Supplementary Figure 3. Regional association plots for loci with $5x10^{-8}$ (P<1 $x10^{-6}$ in the discovery phase meta-analysis.



Supplementary Figure 4. Candidate gene nomination pipeline. A description of the candidate gene nomination procedure can be found in the Methods section in the main text.



Supplementary Figure 5. Expanded candidate gene evidence plot for previously reported loci. Each locus is listed by chromosome followed by candidate genes. Loci with tied candidate genes are listed across several lines. Support for a gene with evidence from each category is indicated by a filled cell. Supporting evidence includes whether associated SNPs are cis-eQTLs; whether SNPs are in LD with protein-coding variants; whether genes have a neurological related phenotype in flies ("FlyBase"), mice ("Mouse KO") or humans ("OMIM"); whether genes were expressed in any brain-specific cell type in mouse, or in human brain samples ("GTEx"); and, finally, whether genes were differentially expressed between PD patients and healthy controls.



Supplementary Figure 6. Expanded candidate gene evidence plot for new PD associations. Similar to Supplementary Figure 5, we present here a more detailed view of support for candidate genes of newly discovered PD associations.



Supplementary Figure 7. Mouse brain cell-type expression of PD candidate genes. For PD candidate genes, expression of the mouse homolog (if available) is plotted in specific mouse brain cells, as well as the whole cortex. Colors represent the log2(RPKM+1) of the gene, while the actual RPKM values are displayed for genes with expression >30 RPKMs. No enrichment of PD candidate genes for expression in a specific cell-type is observed.

SUPPLEMENTARY TABLES

Supplementary Table 1. Enrichment statistics for PD heritability across 24 annotations. Data are provided in the corresponding file.

	Proportion			
	Proportion	h ² (std.	Enrichment	Enrichment
Cell-type	SNPs	error)	(std. error)	P-value
		0.535		
Adrenal / Pancreas	0.094	(0.117)	5.716 (1.253)	4.370x10 ⁻⁵
		0.382		
Cardiovascular	0.111	(0.140)	3.435 (1.262)	0.036
		0.559		
CNS	0.149	(0.111)	3.757 (0.746)	0.001
		0.333		
Connective Bone	0.115	(0.119)	2.897 (1.036)	0.044
		0.323		
GI	0.168	(0.140)	1.925 (0.837)	0.251
		0.457		
Immune	0.233	(0.146)	1.960 (0.624)	0.110
		0.142		
Kidney	0.043	(0.081)	3.332 (1.909)	0.198
		0.267		
Liver	0.072	(0.111)	3.704 (1.533)	0.068
		0.523		
Other	0.203	(0.150)	2.582 (0.738)	0.033
		0.271		
SkeletalMuscle	0.104	(0.126)	2.615 (1.212)	0.187

Supplementary Table 2. Enrichment statistics for PD heritability across 10 cell-type groups.

Significance	Observed	Expected #	
threshold	# SNPs	SNPs	P-value
0.1	157	45	7.05x10 ⁻¹⁹
0.05	128	22	5.68x10 ⁻²¹
0.001	17	0	8.93x10 ⁻⁵
1.00×10^{-6}	1	0	1

Supplementary Table 3. Enrichment of PDGene associations in PDWBS. Within the 9830 SNPs analyzed in the meta-analysis, the number of SNPs observed at various significance thresholds in the PDWBS GWAS is more than expected by chance alone (with the exception of the 1x10⁻⁶ threshold). After removing SNPs within regions previously associated with PD, the number of SNPs observed at each significance threshold in the PDWBS study was compared to the expected number of SNPs under the null hypothesis of no association (uniform distribution of p-values). P-values are calculated from a chi-squared test.

Supplementary Table 4. Candidate PD associations with P<1 $x10^{-6}$ in the discovery meta-analysis. Data are available in the corresponding file.

Supplementary Table 5. NeuroX and joint meta-analysis association statistics for loci with P<1x10⁻⁶ in the discovery meta-analysis. Grayed out rows represent weaker proxies that were not included in the main manuscript. No suitable proxies were available for rs62333164 and rs4657041. (*) denotes that publicly available data from PDGene for this SNP includes overlapping NeuroX data. Data are available in the corresponding file.

Supplementary Table 6. Variants with regulomeDB scores > 3 that are in LD with novel PD-associated index SNPs. Data are available in the corresponding file.

		Condition		Most significant		
CHR	ВР	SNP	Candidate gene	conditioning	Poriginal	P _{condition}
			NUCKS1,SLC41A			
1	205723572	rs823118	1	rs11557080	1.23×10^{-7}	3.99x10 ⁻⁴
			TMEM175,DGK			
4	951947	rs34311866	Q	rs34884217*	1.38x10 ⁻⁶	3.7x10 ⁻⁵
4	15737101	rs11724635	FAM200B,CD38	rs7674301	0.152	3.75x10 ⁻⁷
4	77198986	rs6812193	FAM47E	rs4859430*	3.60x10 ⁻⁴	5.31x10 ⁻⁹
4	90626111	rs356182	SNCA	rs7681154*	0.171	2.38x10 ⁻¹³
			HLA-DRB6,HLA-			
6	32666660	rs9275326	DQA1	rs532965	7.71x10 ⁻⁷	1.11x10 ⁻⁴
9	17579690	rs13294100	SH3GL2	rs4961588	3.88x10 ⁻⁵	2.27x10 ⁻⁴
12	40614434	rs76904798	LRRK2	rs28370830	1.14x10 ⁻¹⁴	4.08x10 ⁻¹⁵
12	123303586	rs11060180	OGFOD2	rs10847864	3.31x10 ⁻¹³	7.12x10 ⁻⁵
16	31121793	rs14235	ZNF646,KAT8	rs4889685	4.22x10 ⁻⁵	4.02x10 ⁻⁴

Supplementary Table 7. Loci with residual associations after conditional analysis. Loci with residual associations ($P_{condition} < 1x10^{-3}$) after conditional analysis in the PDWBS data are listed. The most significant SNP in the locus after conditioning is listed along with its original p-value and its p-value after conditioning on the "Condition SNP." (*) denotes the SNP listed is the independent variant reported in the Nalls *et al.* study.

Index	Coding variant	r²	Gene	Туре	Transcript ID	Change
rs9275326	rs9272785	0.61	HLA-DQA1	missense	ENST00000343139	p.Ala210Thr
rs8118008	rs2295547	0.66	DDRGK1	missense	ENST00000380201	p.Phe298Leu
rs35749011	rs2230288	0.89	GBA	missense	ENST00000327247	p.Glu365Lys
rs34311866	rs34311866	1.00	TMEM175	missense	ENST00000264771	p.Met393Thr
rs17649553	rs62063857	0.99	STH	missense	ENST00000537309	p.Gln7Arg
rs17649553	rs62621252	0.99	SPPL2C	missense	ENST00000329196	p.Ser224Pro
rs17649553	rs63750417	0.99	MAPT	missense	ENST00000344290	p.Pro202Leu
rs17649553	rs34579536	0.99	KANSL1	missense	ENST00000262419	p.lle1085Thr
rs17649553	rs16940681	0.99	CRHR1	missense	ENST00000339069	p.Glu280Gln
rs17649553	rs12949256	0.62	ARHGAP27	missense	ENST00000428638	p.Ala117Thr
rs14235	rs749670	0.89	ZNF646	missense	ENST00000394979	p.Glu327Gly
rs12637471	rs2270968	0.69	MCCC1	missense	ENST00000492597	p.His355Pro
				disruptive inframe		
rs4653767	rs147889095	0.85	ІТРКВ	deletion	ENST00000429204	p.Ser93_Ser95del
rs62333164	rs34755939	0.62	CLCN3	missense	ENST00000504131	p.Ala15Gly
rs61747226	rs61747226	1.00	ARRDC4	missense	ENST00000268042	p.Thr235Met
rs5910	rs5911	0.98	ITGA2B	missense	ENST00000262407	p.lle874Ser
rs4657041	rs1801274	1.00	FCGR2A	missense	ENST00000271450	p.His167Arg
rs143918452	rs5743845	1.00	TLR9	missense	ENST00000360658	p.Arg863Gln
rs143918452	rs150311081	1.00	STAB1	missense	ENST00000321725	p.Arg1019His
				splice acceptor variant & intron		
rs143918452	rs201539522	1.00	PHF7	variant	ENST00000327906	NA
rs143918452	rs61736838	1.00	NISCH	missense	ENST00000345716	p.Ala1028Val
rs143918452	rs151083454	1.00	ITIH4	missense	ENST00000266041	p.Gly893Ser
rs143918452	rs148156289	1.00	ITIH3	missense	ENST00000449956	p.Met757lle
rs143918452	rs61729450	1.00	DNAH1	missense	ENST00000420323	p.lle190Thr
rs143918452	rs146661777	1.00	BAP1	missense	ENST00000478368	p.Asp145His
rs143918452	rs35338461	1.00	ALAS1	missense	ENST00000394965	p.Arg13Gln
rs12497850	rs4955419	0.71	CCDC71	missense	ENST00000321895	p.Gln317Leu
rs11868035	rs11649804	0.94	RAI1	missense	ENST00000353383	p.Pro165Thr
rs10463554	rs34813	0.92	GIN1	missense	ENST00000399004	p.Thr239Met

Supplementary Table 8. Functional variants for PD associated loci. Functional variants are listed for PD associated loci, in addition to the r^2 between the index variant and the coding variant (measured in 1000 Genomes) the Ensembl transcript ID, as well as the corresponding amino acid change (if applicable) is noted. If the variant impacted several transcripts, only the longest transcript is listed. If the index variant is in LD with multiple coding variants for the same gene only the one with the largest r^2 is listed.

Supplementary Table 9. Cis-eQTLs for PD associated loci. For PD associated regions with significant ciseQTLs (as displayed in Figure 3), the brain and non-brain tissue with the most significant p-value is listed for each PD loci. "Risk expression" considers the direction of expression the risk allele is associated with. Data are available in the corresponding file. Supplementary Table 10. Genes within 250kb of PD associated loci with evidence of co-expression and/or protein-protein interactions. Data are available in the corresponding file.

				Candidate genes in these			
Category	P-value	Obs.	Exp.	gene sets			
Lysosome							
Previously reported	1.33x10 ⁻³	2	0.22	GBA , TMEM175			
Novel associations	3.64x10 ⁻⁵	3	0.19	CTSB, GALC, ATP6V0A1			
All	3.35x10 ⁻⁶	5	0.40				
Autophagy	Autophagy						
Previously reported	1.09x10 ⁻³	2	0.20	BAG3, KAT8			
Novel associations	NA	1	0.18	CTSB			
All	5.71x10 ⁻³	3	0.38				
Mitochondrial							
Previously reported	NA	1	1.03	MCCC1			
Novel associations	0.058	2	0.89	COQ7, ALAS1			
All	0.13	3	1.92				

Supplementary Table 11. Targeted enrichment analysis of PD associations. PD associations are enriched for genes in the lysosomal and autophagy pathways. P-values were not calculated for gene-sets with less than 2 observed genes. Expected number of genes ("Exp.") is calculated as (#genes in the gene-set)/(# genes in the background set)*(# genes associated with PD).

Supplementary Table 12. General gene-set enrichment analysis of PD associations. Data are available in the corresponding file.

Supplementary Table 13. All protein-coding genes within 250 kb of PD-associated loci used as input for STRING analysis. Data are available in the corresponding file.

Supplementary Table 14. Minimum p-values for the 42 genes in the lysosomal pathway for which SNPs tested in this meta-analysis were within 250kb. Data are available in the corresponding file.

Supplementary Table 15. Minimum p-values for 117 genes in the mitochondrial pathway for which SNPs tested in this meta-analysis were within 250kb of. Data are available in the corresponding file.

Supplementary Table 16. Minimum p-values for 25 genes in the autophagy pathway for which SNPs tested in this meta-analysis were within 250kb of. Data are available in the corresponding file.

REFERENCES

1. Skol AD, Scott LJ, Abecasis GR, Boehnke M. Joint analysis is more efficient than replication-based analysis for two-stage genome-wide association studies. Nature genetics. 2006;38(2):209-13. doi: 10.1038/ng1706. PubMed PMID: 16415888.

2. International Parkinson Disease Genomics C, Nalls MA, Plagnol V, Hernandez DG, Sharma M, Sheerin UM, et al. Imputation of sequence variants for identification of genetic risks for Parkinson's disease: a meta-analysis of genome-wide association studies. Lancet. 2011;377(9766):641-9. doi: 10.1016/S0140-6736(10)62345-8. PubMed PMID: 21292315; PubMed Central PMCID: PMCPMC3696507.

3. Nalls MA, Pankratz N, Lill CM, Do CB, Hernandez DG, Saad M, et al. Large-scale meta-analysis of genome-wide association data identifies six new risk loci for Parkinson's disease. Nature genetics. 2014;46(9):989-93. doi: 10.1038/ng.3043. PubMed PMID: 25064009; PubMed Central PMCID: PMCPMC4146673.

4. International Parkinson's Disease Genomics C, Wellcome Trust Case Control C. A two-stage meta-analysis identifies several new loci for Parkinson's disease. PLoS genetics. 2011;7(6):e1002142. doi: 10.1371/journal.pgen.1002142. PubMed PMID: 21738488; PubMed Central PMCID: PMCPMC3128098.

5. Nalls MA, McLean CY, Rick J, Eberly S, Hutten SJ, Gwinn K, et al. Diagnosis of Parkinson's disease on the basis of clinical and genetic classification: a populationbased modelling study. Lancet Neurol. 2015;14(10):1002-9. doi: 10.1016/S1474-4422(15)00178-7. PubMed PMID: 26271532; PubMed Central PMCID: PMCPMC4575273.

6. DeLong ER, DeLong DM, Clarke-Pearson DL. Comparing the areas under two or more correlated receiver operating characteristic curves: a nonparametric approach. Biometrics. 1988;44(3):837-45. PubMed PMID: 3203132.

7. Love MI, Huber W, Anders S. Moderated estimation of fold change and dispersion for RNA-seq data with DESeq2. Genome Biol. 2014;15(12):550. doi: 10.1186/s13059-014-0550-8. PubMed PMID: 25516281; PubMed Central PMCID: PMCPMC4302049.

8. Giambartolomei C, Vukcevic D, Schadt EE, Franke L, Hingorani AD, Wallace C, et al. Bayesian test for colocalisation between pairs of genetic association studies using summary statistics. PLoS genetics. 2014;10(5):e1004383. doi: 10.1371/journal.pgen.1004383. PubMed PMID: 24830394; PubMed Central PMCID: PMCPMC4022491.

9. Pruim RJ, Welch RP, Sanna S, Teslovich TM, Chines PS, Gliedt TP, et al. LocusZoom: regional visualization of genome-wide association scan results. Bioinformatics. 2010;26(18):2336-7. doi: 10.1093/bioinformatics/btq419. PubMed PMID: 20634204; PubMed Central PMCID: PMCPMC2935401.