

Submitter Name: Alexander S. Hatoum (on behalf of the PGC substance use disorders working group)

Submitted email: ashatoum@wustl.edu

PI Name (if different): Arpana Agrawal

PI email (if different): arpana@wustl.edu

Genome-wide Association Study of multiple substance use disorders identifies novel loci related to mental and physical health

Alexander S. Hatoum¹, Emma C. Johnson¹, Ryan Bogdan², Joel Gelernter^{3,4,5,6}, Howard Edenberg^{7,8} & Arpana Agrawal¹

¹Washington University School of Medicine, Department of Psychiatry, Saint Louis, USA

²Department of Psychological & Brain Sciences, Washington University in St. Louis

³Department of Psychiatry, Division of Human Genetics, Yale School of Medicine, New Haven, CT, USA

⁴Veterans Affairs Connecticut Healthcare System, West Haven, CT, USA

⁵Department of Genetics, Yale School of Medicine, New Haven, CT, USA

⁶Department of Neuroscience, Yale School of Medicine, New Haven, CT, USA

⁷Department of Medical and Molecular Genetics, Indiana University School of Medicine, Indianapolis, IN, USA

⁸Department of Biochemistry and Molecular Biology, Indiana University School of Medicine, Indianapolis, IN, USA

Individual substance use disorders (SUDs) have been categorized diagnostically as discrete clinical entities despite widespread comorbidity within SUDs. Genome-wide association study (GWAS) data have been leveraged to reveal a moderately-largely shared genetic liability across disorders. We have previously shown that a common genetic factor, *a(g)*, accounts for significant genetic covariance across SUDs, above and beyond common substance use behaviors. Here, in subjects of European (N = 82,707-435,563, total N = 1,019,521) and African (N= 9,925- 48,015) ancestries, we identify common allelic effects influencing opioid use disorder, problematic tobacco use, problematic alcohol use, and cannabis use disorder. We find 10 lead pleiotropic SNPs broadly influencing addiction, including significant signals at *PDE4B* and *DRD2* that can be related to brain gene expression, both of which are targets of dopaminergic regulating medications. Phenome-wide latent causal variable analyses and genetic correlations in the UK biobank revealed that disability, pain, and socioeconomic status are plausibly causal risk factors for increasing general predisposition towards SUDs and that earlier sexual initiation and earlier maternal age of first birth share the largest proportion of genetic variance with the GWAS of the *a(g)* factor. Preliminary drug purposing using an imputed transcriptomic profile implicated drugs inhibiting tyrosine kinase and interleukin-related (IL) inflammatory pathways. Combined, these results highlight the role of common genetic variants on multiple SUDs in pathways of both mental health/behavior as well as physical well-being and provide preliminary insights into the role of stress and inflammatory response as mechanisms undergirding SUD.