

Review

Single nucleotide polymorphisms in the vitamin D pathway associating with circulating concentrations of vitamin D metabolites and non-skeletal health outcomes: Review of genetic association studies



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ABSTRACT

Polymorphisms in genes encoding proteins involved in vitamin D metabolism and transport are recognised to influence vitamin D status. Syntheses of genetic association studies linking these variants to non-skeletal health outcomes are lacking. We therefore conducted a literature review to identify reports of statistically significant associations between single nucleotide polymorphisms (SNP) in 11 vitamin D pathway genes (*DHCR7*, *CYP2R1*, *CYP3A4*, *CYP27A1*, *DBP*, *LRP2*, *CUB*, *CYP27B1*, *CYP24A1*, *VDR* and *RXRA*) and non-bone health outcomes and circulating levels of 25-hydroxyvitamin D (25[OH]D) and 1,25-dihydroxyvitamin D (1,25[OH]₂D). A total of 120 genetic association studies reported positive associations, of which 44 investigated determinants of circulating 25(OH)D and/or 1,25(OH)₂D concentrations, and 76 investigated determinants of non-skeletal health outcomes. Statistically significant associations were reported for a total of 55 SNP in the 11 genes investigated. There was limited overlap between genetic determinants of vitamin D status and those associated with non-skeletal health outcomes: polymorphisms in *DBP*, *CYP2R1* and *DHCR7* were the most frequent to be reported to associate with circulating concentrations of 25(OH)D, while polymorphisms in *VDR* were most commonly reported to associate with non-skeletal health outcomes, among which infectious and autoimmune diseases were the most represented.

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1. Introduction

Genetic variation in the vitamin D pathway was first reported to influence human health more than 20 years ago, when Morrison and colleagues found associations between allelic variants in the gene encoding the vitamin D receptor (VDR) and bone density [1,2].

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Since then the scope of genetic association studies in the vitamin D field has widened to investigate the effects of variation in other genes in the vitamin D pathway on both skeletal and non-skeletal health outcomes. Several systematic reviews of the literature linking *VDR* polymorphisms to various disease outcomes have been performed to date [3–7]. Reviews of studies investigating the influence of variation in other vitamin D pathway genes on bone health have also been performed [8]. However, reviews of studies that have investigated associations with non-skeletal health and variants in vitamin D pathway genes other than *VDR* are lacking. This is a significant omission, because genome-wide association studies have reported that polymorphisms in the genes encoding enzymes responsible for both synthesis and catabolism of 25-hydroxyvitamin D influence vitamin D status [9,10]. Such variants might therefore be expected to influence non-skeletal health outcomes in their own right, or to modify the effects of vitamin D supplementation on risk of extra-skeletal disease—a hypothesis that we have addressed in clinical trials [11,12].

We therefore conducted a literature review to identify genetic association studies reporting positive associations between risks of non-skeletal disease outcomes and single nucleotide polymorphisms (SNP) in the following genes encoding key players in the vitamin D pathway: *DHCR7*, *CYP2R1*, *CYP3A4*, *CYP27A1*, *DBP*, *LRP2*, *CUBN*, *CYP27B1*, *CYP24A1*, *VDR* and *RXRA*. The role for each of these genes in the vitamin D metabolic, transport and signaling pathways is illustrated in Fig. 1.

2. Methods

2.1. Search method

To identify eligible studies we searched the Pubmed database using the following terms: ‘*DHCR7*’; ‘*CYP2R1*’; ‘*CYP3A4*’;

‘*CYP27A1*’; ‘*DBP*’; ‘*LRP2*’; ‘*Megalín*’; ‘*CUBN*’; ‘*Cubilin*’; ‘*CYP27B1*’; ‘*CYP24A1*’; ‘*VDR*’; ‘*RXRA*’. Our initial search was conducted in April of 2012 and captured manuscripts published from 2000 to 2012; we then conducted the same search in June of 2015 to capture manuscripts published from 2012 to 2015. Abstracts and titles were reviewed to select studies on the basis of inclusion / exclusion criteria below. All articles were assessed for eligibility by one author (DAJ); those selected for inclusion were re-assessed by a second (ARM).

2.2. Inclusion/exclusion criteria

2.2.1. Inclusion criteria

Candidate and genome-wide association studies in which SNP in the genes above were reported to associated with:

- Circulating concentrations of 25-hydroxyvitamin D
- Circulating concentrations of 1,25-dihydroxyvitamin D
- Susceptibility to, severity of, or prognosis of any non-skeletal health outcome.

2.2.2. Exclusion criteria

- Studies in which SNP in the above genes were reported to be associated with skeletal health outcomes
- Studies which investigated associations between a given polymorphism and a given health outcome which had been previously reviewed in a meta-analysis. In which case, we reviewed the meta-analysis instead.

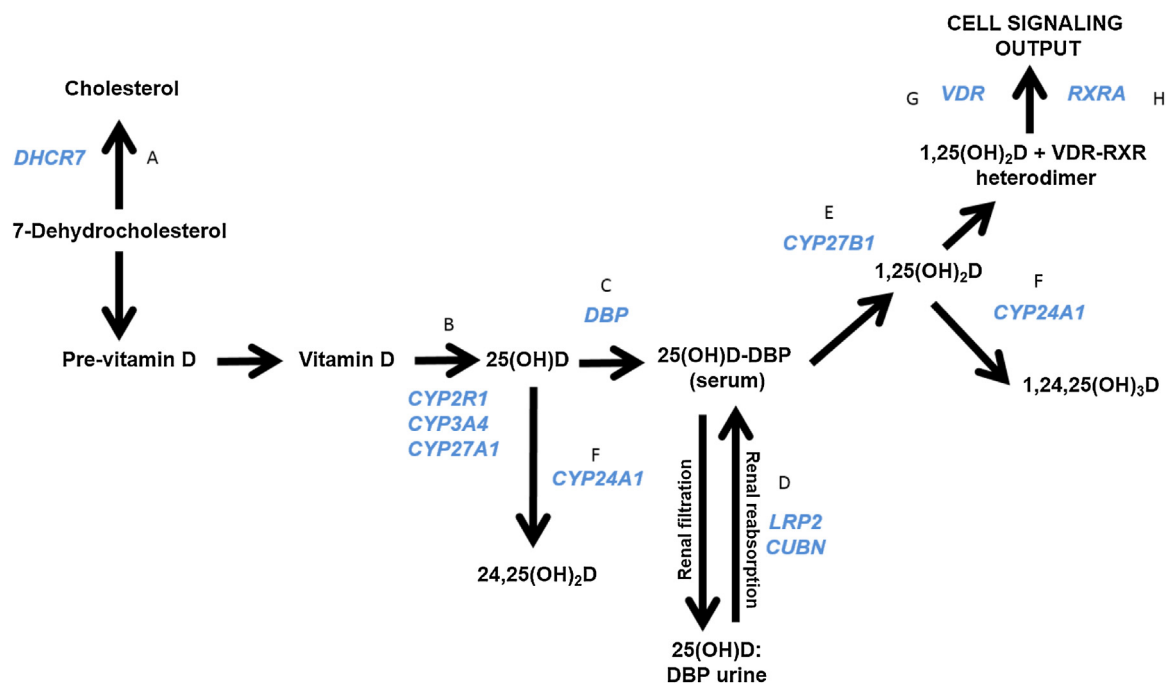


Fig. 1. A diagram depicting vitamin D metabolic and signalling pathways and genes encoding key players (in blue): *DHCR7* (A) encodes the 7-dehydrocholesterol reductase enzyme, which catalyses the conversion of 7-dehydrocholesterol to cholesterol; *CYP2R1*, *CYP3A4*, and *CYP27A1* (B) encode 25-hydroxylating cytochrome P450 enzymes; the vitamin D binding protein gene (*DBP*, [C]) encodes the principle vitamin D transport protein; *LRP2* and *CUBN* (D) encode the proteins megalin and cubilin, respectively, involved in renal re-absorption of 25(OH)D via receptor-mediated endocytosis; *CYP27B1* (E) encodes the cytochrome P450 enzyme which 1- α -hydroxylates 25(OH)D to form 1,25(OH)₂D; *CYP24A1* (F) encodes the cytochrome P450 enzyme responsible for 24-hydroxylating vitamin D metabolites including 25(OH)D and 1,25(OH)₂D; *VDR* (G) encodes the vitamin D receptor, which binds 1,25(OH)₂D and forms a heterodimer with the gene product of *RXRA* (H)—the retinoid X receptor—to mediate the biological actions of vitamin D. (For interpretation of the references to color in this figure legend, the reader is referred to the web version of this article.)

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