

Screening for 392 polymorphisms in 141 pharmacogenes

JASON YONGHA KIM^{1*}, HYUN SUB CHEONG^{2*}, TAE-JOON PARK¹, HEE JUNG SHIN³,
DOO WON SEO³, HAN SUNG NA³, MYEON WOO CHUNG³ and HYOUNG DOO SHIN^{1,2}

¹Department of Life Science, Sogang University; ²Department of Genetic Epidemiology, SNP Genetics, Inc., Seoul 121-742; ³Division of Clinical Research, Department of Toxicological Evaluation and Research, National Institute of Food and Drug Safety Evaluation, Osong Health Technology Administration Complex, Osong, Chungcheongbuk 363-700, Republic of Korea

Received February 17, 2014; Accepted March 28, 2014

DOI: 10.3892/br.2014.272

Abstract. Pharmacogenomics is the study of the association between inter-individual genetic differences and drug responses. Researches in pharmacogenomics have been performed in compliance with the use of several genotyping technologies. In this study, a total of 392 single-nucleotide polymorphisms (SNPs) located in 141 pharmacogenes, including 21 phase I, 13 phase II, 18 transporter and 5 modifier genes, were selected and genotyped in 150 subjects using the GoldenGate assay or the SNaPshot technique. These variants were in Hardy-Weinberg equilibrium (HWE) ($P > 0.05$), except for 22 SNPs. Genotyping of the 392 SNPs revealed that the minor allele frequencies of 47 SNPs were < 0.05 , 105 SNPs were monomorphic and 22 variants were not in HWE. Also, based on previous studies, we predicted the association between the polymorphisms of certain pharmacogenes, such as cytochrome P450 2D6, cytochrome P450 2C9, vitamin K epoxide reductase complex, subunit 1, cytochrome P450 2C19, human leukocyte antigen, class I, B and thiopurine S-methyltransferase, and drug efficacy. In conclusion, our study demonstrated the allele distribution of SNPs in 141 pharmacogenes as determined by high-throughput screening. Our results may be helpful in developing personalized medicines by using pharmacogene polymorphisms.

Introduction

Inter-individual variation in drug response among patients is a major obstacle in medicine application, due to the different response of each patient to the same medication (1). Several cases of adverse drug reactions occurring in certain patients,

such as renal/hepatic disorders, congestive heart failure and anemia, were previously reported (1,2). The variations in drug responses may result from disease determinants, genetics, environmental factors and idiosyncratic response, which collectively affect drug metabolism (3). The knowledge of variations in efficacy and toxicity caused by the same doses of medications may enhance the effectiveness of drug therapy (3).

The initial human genome sequencing identified ~1.42 million single-nucleotide polymorphisms (SNPs), including >60,000 SNPs in the exonic region of genes (4). Some of these SNPs have been suggested to be associated with considerable changes in drug disposition and metabolism or the effects of medication (5-7), whereas others are used for the diagnosis of clinical response (8). The interaction of several gene products is known to affect the pharmacokinetics and pharmacodynamics of medications. For example, inherited variations in drug targets, drug disposition and polygenic factors of drug effects are determinants of the majority of drug effects and have become increasingly important in pharmacogenomics (9).

Pharmacogenomics is the study of how genetic differences among individuals affect the variability in their response to medications (6,10). Pharmacogenomic research includes clinical and basic science regarding genetic variation and drug response. The field of pharmacogenomics has attracted significant attention along with the completion of the Human Genome Project (11). Consequently, there has been an increase in the number of pharmacogenomic studies published (11). Furthermore, the continuous development of genotyping technologies may allow pharmacogenomic applications to move into the mainstream of medicine and pharmacy practice (12,13).

Over the last few years, the available technologies for genomic analyses have increased significantly (14). For example, the TaqMan and the SNPlex assays from Applied Biosystems (Foster City, CA, USA), the GeneChip assay from Affymetrix (Santa Clara, CA, USA) and the Infinium and GoldenGate assays developed by Illumina (San Diego, CA, USA) are the most frequently used techniques in genome research (15). In addition, the SNaPshot technique has been tested on a small scale of multiplex for analysis of gene polymorphisms (16). In this study, we used the GoldenGate assay and the SNaPshot technique for genotyping to investigate the

Correspondence to: Professor Hyoung Doo Shin, Department of Life Science, Sogang University, 1 Shinsu-dong, Mapo-gu, Seoul 121-742, Republic of Korea
E-mail: hdshin@sogang.ac.kr

*Contributed equally

Key words: gene screening, pharmacogene, single-nucleotide polymorphism

allele distribution of 392 SNPs from 141 pharmacogenes in 150 Korean subjects.

Materials and methods

Study subjects. DNA samples from a total of 150 Korean subjects was used for this study. The 150 unrelated Korean samples were provided by the Center for Genome Science, Korea Centers for Disease Control and Prevention. The protocol and consent forms of this study were reviewed and approved by the Institutional Review Board of Sogang University (no. 2010_690).

SNP selection and genotyping. We selected a total of 378 SNPs of 141 well-known pharmacogenes, based on the score assigned by the Illumina GoldenGate assay design tool (ADT; Illumina). The SNPs were genotyped using the GoldenGate assay with the VeraCode microbead (Illumina) (17,18), followed by a scan using the BeadExpress[®] system (Illumina). Normalized bead intensity data obtained for each sample were loaded into the GenomeStudio[®] software (Illumina), which converted fluorescent intensities into SNP genotypes. SNP clusters for genotype calling were examined for all SNPs using the GenomeStudio[®] software. The cluster plots were then visually assessed and SNPs with poor cluster quality were removed. The overall call rate for all SNPs was 99.99%. For quality control, SNPs that met the following criteria were retained: call rate $\geq 0.98\%$ and no triplicate error after three repetition tests. Fourteen additional SNPs which did not pass ADT scoring were genotyped using the SNaPshot technique (Invitrogen Life Technologies, Carlsbad, CA, USA). The SNaPshot technique is single-extension-based method, which enables the simultaneous analysis of multiple SNPs (19). The information of SNaPshot primers used for the 14 SNPs are shown in Table I. The GoldenGate and SNaPshot assays were conducted three times in order to increase the accuracy of the test.

Statistical analysis. The Chi-square test was used to determine whether individual variants were in Hardy-Weinberg equilibrium (HWE) at each locus in a Korean population. Haplotypes of SNPs representing the star-alleles of each pharmacogene investigated in this study were defined using PHASE software (Stephen Laboratory, University of Chicago, Chicago, IL, USA).

Results and Discussion

A total of 392 SNPs located in 141 pharmacogenes (including 21 phase I, 13 phase II, 18 transporter and 5 modifier genes) were successfully genotyped in 150 Korean subjects and their minor allele frequencies (MAFs) were calculated (Table II). These variants were in HWE ($P > 0.05$), except for 22 SNPs. Among the SNPs, 47 variants exhibited a $MAF < 0.05$, while 105 variants exhibited a monomorphic allele distribution in the Korean population (Table III). In addition, there were 22 SNPs with $HWE < 0.05$, 9 of which exhibited significantly lower HWE compared to others [*rs2230037*, *rs2472393*, *rs743544* [all in the glucose-6-phosphate dehydrogenase (*G6PD*) gene], *rs2227291* [copper-transporting ATPase 1 (*ATP7A*) gene], *rs1414334*, *rs518147*, *rs3813928*, *rs6318* and *rs3813929* [all in the 5-hydroxytryptamine receptor 2C (*HTR2C*) gene]. The

3 genes were all located in the X chromosome, although located far away from each other (*G6PD* at Xq28, *ATP7A* at Xq21.1 and *HTR2C* at Xq24). The classifications and SNP numbers of each pharmacogene investigated in this study are listed in Table IV. Among these, cytochrome P450 2D6 (*CYP2D6*), cytochrome P450 2C19 (*CYP2C19*), thiopurine S-methyltransferase (*TPMT*), cytochrome P450 2C9 (*CYP2C9*), vitamin K epoxide reductase complex, subunit 1 (*VKORC1*) and human leukocyte antigen, class I, B (*HLA-B*) are of great significance, due to their association with well-known drugs. Therefore, we investigated the respective genes and their effects on enzyme activity or associated drugs below.

First, 14 *CYP2D6* SNPs (*rs1065852*, *rs16947*, *rs1135822*, *rs35742686*, *rs3892097*, *rs5030655*, *rs79738337*, *rs1058164*, *rs1135840*, *rs28371525*, *CYP2D6_2*, *rs5030867*, *rs5030865* and *rs5030656*) were used for the investigation of 17 star-alleles (*1, *2, *3, *4, *5, *6, *7, *8, *9, *10, *14A, *14B, *34, *36, *41, *49 and *60). *CYP2D6* is one of the most important pharmacogenes involved in the metabolism of foreign substances in the body. Overall, the genotypes associated with decreased activity or a non-functional enzyme were $\sim 20\%$ of all the investigated genotypes (Table V). Specifically, screening of polymorphisms such as *rs3892097*, *rs1065852*, *rs16947* and *rs1135840* may be useful for detecting the enzyme activity level of *CYP2D6*. *CYP2C19* is clinically important for the metabolism of drugs including clopidogrel (20), which is an inhibitor of adenosine diphosphate-induced platelet aggregation (21-23). To investigate the association between *CYP2C19* and clopidogrel response, 15 *CYP2C19* SNPs were used for the investigation of seven alleles (*1, *2, *3, *4, *5A, *8 and *17) (Table V). In general, over half of the subjects were found to have genotypes that reduced the efficacy of clopidogrel, while 11.5% of the subjects carried genotypes which enhanced the efficacy of clopidogrel. This information may be used to adjust the dose of clopidogrel depending on the patient genotypes of the investigated polymorphisms.

TPMT encodes an enzyme involved in the detoxification of azathioprine, mercaptopurine and thioguanine, which are immunosuppressive drugs used in organ transplantation (24-27). Five SNPs (*rs75543815*, *rs1142345*, *rs1800460*, *rs1800462* and *rs1800584*) were used to investigate the frequency of five alleles (*2, *3B, *3C, *4 and *6) in this study (Table V). The results suggested that the majority of Korean subjects have *TPMT* genotypes, which render them more prone to the toxicity of the aforementioned drugs. The dihydropyrimidine dehydrogenase gene (*DPYD*) encodes an enzyme catabolizing 5-fluorouracil (5-FU), which is commonly used for the treatment of solid carcinomas (28,29). A decrease in enzyme activity involved in 5-FU catabolism due to the mutational variants in *DPYD* may lead to an increase in the half-life of 5-FU and an increased risk of dose-dependent toxicity (28,30,31). In our study, all the Korean subjects were found to carry the *DPYD* genotypes associated with normal enzyme activity (*1/*5, *5/*5, *1/*9A, or c.496A>G; Table V). A polymorphism of interleukin 28B (*IL28B*), *rs8099917* has been reported to be associated with the virologic response to peginterferon- α (PEG-IFN α) and ribavirin (RBV) combination therapy in hepatitis C virus-infected patients (32-34), whereas the GT and GG genotypes of *rs8099917* have been suggested to be less responsive to treatment compared to

Table I. SNaPshot primer sequences for 14 single-nucleotide polymorphisms (SNPs).

Gene	SNP	Primer	Sequence
<i>CYP2D6</i>	<i>rs1065852</i> ^a <i>rs16947</i> ^a <i>rs1135822</i> ^a <i>rs35742686</i> ^a <i>rs3892097</i> ^a <i>rs5030655</i> ^a <i>rs79738337</i> ^a <i>rs1058164</i> ^a	Forward	GTTATCCCAGAAGGCTTTGCAGGCTTCA
		Reverse	GCCGACTGAGCCCTGGGAGGTAGGTA
		SNaPshot	AACGCTGGGCTGCACGCTAC
		SNaPshot	TCAGAGAACAGGTACCACCACTATGC
		SNaPshot	T(11)CGGGCCCATAGCGCGCCAGGA
		SNaPshot	T(10)CCAGCTGGATGAGCTGCTAACTGAGCAC
		SNaPshot	T(20)CCTTACCCGCATCTCCACCCCCA
		SNaPshot	T(24)GCCTGGGCAAGAAGTCGCTGGAGCAG
<i>DPYD</i>	<i>rs72981743</i>	SNaPshot	T(31)GGCAAGGAGAGAGGGTGGAGGCTGG
		SNaPshot	T(41)CGAGCAGAGGCGCTTCTCCGT
		Forward	CGAAAACAGGCAGACTAGGG
<i>CYP2A6</i>	<i>rs56256500</i>	Reverse	AGAGCGGGTGCTCTACTCC
		SNaPshot	TCTGCTTGCAGGCTGGGGCGC
		Forward	AGTTGGCAGGTTGTGGTAGG
<i>NR1I2</i>	<i>rs1464603</i>	Reverse	CTCCAATGTCATCAGCTCCA
		SNaPshot	GAACTGGAAGATTCCTAGCATCATGC
		Forward	CACCAGCCCACACTCTGAAC
<i>CYP2A6</i>	<i>rs1809810</i>	Reverse	CAAATCTGCCGTGTATGTGG
		SNaPshot	CTGGGGGACAGGTCAAGCTGAGGCCCTGAGA
		Forward	TCCAGCCCCTGTGTACTTTC
<i>ABCB1</i>	<i>rs2032582</i>	Reverse	AAACTGCCCCCTTCTCATTCA
		SNaPshot	T(7)CAACTTCCTCCTCCCTACCAGGGCACCGAAGTGT
		Forward	TTGAAATGAAAATGTTGTCTGGA
<i>CYP2C19</i>	<i>rs3758580</i>	Reverse	AAAAGATTGCTTTGAGGAATGG
		SNaPshot	T(13)CAAGCACTGAAAGATAAGAAAGAACTAGAAGGT
		Forward	TTCATGTACCCCTGAATTGCT
		Reverse	CATCTGTGTAGGGCATGTGG
		SNaPshot	T(24)GCATGCAGGGGCTCCGGTTTCTGCCAAC

^aThe *CYP2D6* SNPs share the same forward and reverse primers.

TT (32). In this study, subjects carrying the TT genotype were the most common (86.7%), whereas the GT and GG genotypes were significantly less frequent (12.7 and 0.7%, respectively) in the Korean population (Table V). These results may be used to identify patients with reduced responsiveness to PEG-IFN α /RBV combined therapy and adjust the amount accordingly.

Warfarin is an anticoagulant used for the prevention of thromboembolic events and stroke (35). *CYP2C9**2 variants, *3 variants (36-40) and *VKORC1* polymorphism *rs8050894* (41) were reported to be significantly associated with warfarin dose in European or African populations. In this study, we evaluated the variability of warfarin dose according to the *CYP2C9* and *VKORC1* genotypes using *CYP2C9**2, *3 and *rs8050894*, based on previous reports (Table VI). Combinations of the CG or CC genotype of *rs8050894* and *CYP2C9* wild-type (*1/*1) yielded the highest warfarin dose requirement (5-7 mg/day), whereas a combination of the GG genotype of *rs8050894* and *CYP2C9**1/*1, demanding 3-4 mg/day of warfarin, was the most frequent (76.0%) in the Korean population. Furthermore, the

warfarin dose requirement in *CYP2C9* wild-type (*1/*1) was higher compared to that in *2 or *3 variant allele-containing genotypes (*1/*2, *1/*3, *2/*2, *2/*3 and *3/*3), which was also observed in European and African-American populations (42). As regards *rs8050894* in *VKORC1*, an overall higher warfarin dose requirement in CG (heterozygote) or CC (minor homozygote) compared to that in GG (major homozygote) was observed. However, in European and African-American populations, GG exhibited a higher warfarin dose requirement compared to the CG or CC genotype (42). Further investigations may be required to verify the different genetic effect on warfarin response in various ethnic groups.

HLA-B encodes for a protein which is an important part of the human immune system and its polymorphisms have been associated with various drug reactions (43-45). Carbamazepine, which is often used for treatment of chronic pain, bipolar disorder, seizure disorder and trigeminal neuralgia, is one of the most common causes of drug hypersensitivity reactions (46). The star-allele *HLA-B**1502 is associated with various toxic events resulting from carbamazepine, such as cutaneous

Table II. Minor allele frequency of 287 polymorphic single-nucleotide polymorphisms (SNPs) from 141 pharmacogenes in a Korean population (n=150).

Gene	SNP	Alternative name	Alleles	MAF	HWE	Gene	SNP	Alternative name	Alleles	MAF	HWE
CYP2D6	rs1065852	*10, *36, *49, 100C>T	C>T	0.163	0.551	G6PD	rs2230037	1311C>T	C>T	0.080	4.69x10 ⁻¹⁹
	rs16947	*2, 2850C>T	C>T	0.140	0.472		rs2472393	IVS1+2955A/G	C>T	0.130	8.31x10 ⁻¹²
	rs3892097	*4, 1846G>A	G>A	0.073	0.152		rs743544	IVS1-773C/T	C>T	0.407	7.44x10 ⁻¹⁰
	rs79738337	*60, 2303C>T	C>T	0.007	0.934		rs3909184	HLA-B*1502	C>G	0.053	0.354
	rs1058164	*2, *4, *8, *10, 1661G>C	G>C	0.217	0.645		rs2844682	HLA-B*1502	C>T	0.157	0.674
CYP2C9	rs1135840	*2A, 4180G>C	C>G	0.400	0.496	NAT1	rs4986988	*11, c-344C>T	C>T	0.007	0.934
	rs28371525	*41, 2988G>A	G>A	0.003	0.967		rs4986989	*11, c-40A>T	A>T	0.007	0.934
	rs5030865	*8, 1758G>T	G>T	0.003	0.967		rs4986783	*11, c.640T>G, p.S214A	T>G	0.007	0.934
	rs1057910	*3, 42614A>C	A>C	0.043	0.579		rs1799929	*11, *5B	C>T	0.033	0.673
	rs9332092	-	T>C	0.043	0.579		rs1041983	*13, *5G, *6A	C>T	0.313	0.011
VKORC1	rs9332096	-	C>T	0.073	0.816	NAT2	rs1799930	*5E, *6A	G>A	0.173	0.153
	rs9332098	-	G>A	0.043	0.579		rs1799931	*7, G286E, *6I	G>A	0.140	0.524
	rs4918758	*1C, C1188T	T>C	0.443	0.624		rs4646241	-	T>C	0.173	0.779
	rs9934438	C6484T, 1173C>T	A>G	0.087	0.368		rs4646242	-	A>G	0.167	0.203
	rs8050894	*2, 1542G>C, 6853G>C	G>C	0.083	0.964		rs4646243	-	T>C	0.360	0.008
CYP2C19	rs2359612	*2, 2255C>T, 7566C>T	A>G	0.083	0.964	TPMT	rs4646246	-	A>G	0.280	0.923
	rs7294	3730G>A	G>A	0.080	0.965		rs1800460	*3B	G>A	0.003	0.967
	rs17708472	*4, 6009C>T, 698C>T	G>A	0.003	0.967		rs1142345	*3C, C240Y, 18485A>G	A>G	0.013	0.869
	rs12248560	*17, -806C>T	C>T	0.067	0.662		rs75543815	*6, 15327A>T	A>T	0.023	0.770
	rs4244285	*2, G681A	G>A	0.313	0.011		rs12201199	-	A>T	0.013	0.869
CYP2C19	rs4986893	*3, G636A	G>A	0.077	0.891	UGT1A1	rs4124874	*60, -3263T>G	A>C	0.300	0.560
	rs28399504	*4, A1G	A>G	0.003	0.967		rs887829	*28	G>A	0.127	0.764
	rs17885098	*2, *4, 99C>T	C>T	0.037	0.641		rs4148323	*6, Gly71Arg	G>A	0.173	0.153
	rs3758580	*2, 80160C>T	C>T	0.240	0.872		rs34993780	*7	T>G	0.007	0.934
	rs11568732	-888T/G	T>G	0.133	0.814		rs10929302	*93, -3156G>A	G>A	0.127	0.764
DPYD	rs4986894	-97T/C	T>C	0.313	0.011	CYP2E1	rs3755319	-	A>C	0.137	0.579
	rs17886522	G417G	A>C	0.077	0.891		rs2003569	-	G>A	0.127	0.764
	rs17878649	IVS1-47G/A	G>A	0.077	0.891		rs2031920	*5, -1053C>T	C>T	0.127	0.299
	rs4417205	IVS5-51C/G	C>G	0.313	0.011		rs6413432	*6, 7632T>A	T>A	0.070	0.357
	rs4917623	IVS7-106T/C	C>T	0.460	0.567		rs3813867	*5A, *5B	G>C	0.207	0.484
DPYD	rs1188072	*17, -3402C>T	C>T	0.013	0.869	CYP3A4	rs2070673	*7, -333T>A	T>A	0.420	0.410
	rs1801159	*5, I543V, A1627G	A>G	0.277	0.311		rs2070875	-	G>T	0.290	0.879
	rs1801265	*9A, C29R, T85C	T>C	0.053	0.490		rs2515641	-	C>T	0.173	0.779
	rs2297595	496A>G, Met166Val	T>C	0.010	0.902		rs28371759	*18, L293P (T>C)	T>C	0.030	0.015
	rs72981743	-243G/A	G>A	0.017	0.836		rs776746	*3, 6986A>G	G>A	0.223	0.475
DPYD	rs1042482	3651G/A	G>A	0.090	0.434	CYP3A5	rs55965422	*5, 12952T>C	A>G	0.007	0.934
	rs291593	3858T/C	T>C	0.353	0.417		rs4646487	Arg173Trp	C>T	0.143	0.472
	rs56279424	-	G>T	0.173	0.779		rs2108622	V433M	C>T	0.323	0.387

Table II. Continued.

Gene	SNP	Alternative name	Alleles	MAF	HWE	Gene	SNP	Alternative name	Alleles	MAF	HWE
CYP19A1	rs4646	-	C>A	0.320	0.893	ABCC1	rs4148356	Arg723Gln	G>A	0.067	0.382
	rs6493497	-	G>A	0.180	0.938		rs119774	-	G>A	0.003	0.967
CYP1A2	rs762551	*1F, -163C>A	A>C	0.363	0.259		rs717620	-24C>T	G>A	0.243	0.696
	rs2069526	*K, *1E, -739T>G	T>G	0.027	0.737		rs3740066	3972C>T	G>A	0.273	0.620
	rs2470890	*1B, 5347T>C	C>T	0.153	0.740		rs2273697	V417I	G>A	0.087	0.896
	rs2069522	-	T>C	0.027	0.737		rs12762549	-	G>C	0.360	0.876
	rs3743484	-	G>C	0.147	0.614		rs1751034	3463 A>G	T>C	0.177	0.132
	rs2472304	-	G>A	0.153	0.740		rs9561778	c.3366+1243G>T	G>T	0.243	0.068
CYP1B1	rs4646427	-	T>C	0.023	0.770		rs2238472	Arg1268Gln	G>A	0.173	0.779
	rs2069521	-	G>A	0.057	0.462		rs13120400	-	T>C	0.007	0.934
	rs1056836	*3, 4326C>G, L432V	C>G	0.123	0.832		rs17731538	-	G>A	0.057	0.020
	rs28399433	*13, *15, -48T>G	T>G	0.173	0.391		rs2622604	-	C>T	0.143	0.957
CYP2A6	rs1042389	-	T>C	0.270	0.041	ABO	rs2231142	Q141K	C>A	0.257	0.632
CYP2B6	rs8192709	*2, 64C>T	C>T	0.020	0.803		rs8176746	-	C>A	0.160	0.481
CYP2C8	rs11572177	-	A>G	0.053	0.490		rs495828	-	G>T	0.310	0.589
	rs1113129	-	G>C	0.453	0.547		rs4341	-	C>G	0.410	0.201
CYP2C18	rs1341164	-	T>C	0.047	0.549	ACE	rs11042725	-1923C>A	C>A	0.273	0.187
	rs12777823	-	G>A	0.313	0.011		rs1042713	Arg16Gly	A>G	0.437	0.259
	rs1045642	3435C>T	C>T	0.360	0.610	ADRB2	rs4994	Trp64Arg	T>C	0.157	0.299
	rs1128503	Gly412Gly	T>C	0.407	0.342		rs5182	573C>T	T>C	0.210	0.198
	rs10280101	-	A>C	0.037	0.641	AKT1	rs2494732	-	C>T	0.313	0.388
	rs7787082	-	G>A	0.447	0.094		rs1800497	-	C>T	0.380	0.565
	rs4148739	-	A>G	0.037	0.641	APOB	rs1367117	711C>T	G>A	0.107	0.144
	rs11983225	-	T>C	0.037	0.641		rs5128	3238C>G	G>C	0.307	0.967
	rs12720067	-	G>A	0.037	0.641	APOC3	rs2854117	-482C>T	G>A	0.437	0.595
	rs3213619	-129T>C	T>C	0.067	0.382		rs2781659	-	A>G	0.320	0.376
ABCC1	rs2235015	287-25G>T	G>T	0.037	0.641	ATM	rs4585	-	G>T	0.450	0.266
	rs10276036	IVS9-44a>G	C>T	0.407	0.342		rs2227291	Val767Leu	G>C	0.210	2.10x10 ⁻⁸
	rs28364274	V1251I	G>A	0.003	0.967	ATXN1	rs179997	A-241G	A>G	0.133	0.814
	rs2032582	-	G>T	0.153	0.112		rs750332	-	A>G	0.113	0.383
	rs3789243	-	C>T	0.373	0.703	BDKRB1	rs12050217	-	A>G	0.400	0.089
	rs3784862	-	G>A	0.320	0.102		rs1799722	C-58T	T>C	0.433	0.542
	rs246240	-	A>G	0.377	0.428	C6orf10	rs3129900	-	T>G	0.020	0.803
	rs2238476	-	C>T	0.033	0.673		rs2284017	-	C>T	0.467	0.229
	rs35592	16081823T>C	T>C	0.480	0.610	CACNG2	rs2284018	-	C>T	0.300	0.174
	rs35605	1684C>T	C>T	0.240	0.463		rs5750285	-	C>G	0.477	0.496
	rs2230671	4002G>A	G>A	0.163	0.551	CAT	rs10836235	c.66+78C>T	C>T	0.210	0.096
	rs212090	5462T>A	T>A	0.227	0.891		rs9024	1096G>A	G>A	0.220	0.549

Table II. Continued.

Gene	SNP	Alternative name	Alleles	MAF	HWE	Gene	SNP	Alternative name	Alleles	MAF	HWE
<i>KCNH2</i>	rs3807375	-	A>G	0.193	0.172		rs2661319	-	A>G	0.473	0.006
<i>KCNJ11</i>	rs5219	Lys23Glu, E23K	C>T	0.350	0.346		rs2842030	-	T>G	0.450	0.127
<i>KNKI</i>	rs4686799	-	C>T	0.397	0.892	<i>SCN5A</i>	rs12053903	-	C>T	0.457	0.453
	rs5030062	-	A>C	0.283	0.431		rs1805124	H558R	A>G	0.100	0.174
	rs698078	-	T>C	0.287	0.286	<i>SLC10A1</i>	rs2296651	800C>T	G>A	0.023	0.770
<i>LDLR</i>	rs688	16730C>T	C>T	0.140	0.968	<i>SLC10A2</i>	rs2301159	c.*755C>T	C>T	0.293	0.667
<i>LEMD2</i>	rs2395402	-	T>C	0.177	0.858	<i>SLC19A1</i>	rs1051266	Arg27His, c.*746C>T	A>G	0.497	0.022
<i>LRP2</i>	rs2075252	-	A>G	0.480	0.402	<i>SLC1A1</i>	rs2228622	-	G>A	0.240	0.775
<i>LTC4S</i>	rs730012	-444C	A>C	0.167	0.096		rs3780413	-	C>G	0.263	0.152
<i>METTL21A</i>	rs7569963	-	G>A	0.083	0.964		rs3780412	-	A>G	0.243	0.404
	rs4675690	-	T>C	0.343	0.543	<i>SLC22A16</i>	rs714368	146A>G, His49Arg	A>G	0.443	0.405
<i>MICA</i>	rs2848716	-	C>G	0.293	0.223	<i>SLC22A2</i>	rs316019	*4, A270S	G>T	0.113	0.451
<i>MLHI</i>	rs1800734	-93	A>G	0.433	0.782	<i>SLC28A2</i>	rs2413775	16334845T>A	A>T	0.153	0.354
<i>MTHFR</i>	rs1801131	1298A>C	A>C	0.163	0.232	<i>SLCO1B1</i>	rs2306283	*1B, N130D	C>T	0.237	0.470
	rs1801133	Ala222Val	C>T	0.423	0.768		rs4149056	*5, c.521T>C	T>C	0.160	0.264
<i>NEFM</i>	rs1379357	-	G>C	0.333	0.391		rs4149081	Intronic A/G	G>A	0.453	0.296
<i>NOS1AP</i>	rs10918594	-	G>C	0.487	0.877		rs11045879	Intronic C/T	T>C	0.453	0.296
	rs10494366	-	G>T	0.317	0.251	<i>SLCO1B3</i>	rs11045585	-	A>G	0.170	0.440
<i>NOS3</i>	rs2070744	-786T>C	T>C	0.130	0.699	<i>SLCO2B1</i>	rs12422149	Arg312Gln	G>A	0.390	0.334
<i>NPPA</i>	rs5065	T2238C	A>G	0.010	0.902	<i>SULT1C4</i>	rs1402467	p.Asp5Glu	C>G	0.080	0.965
<i>NQO1</i>	rs1800566	*2, c.558C>T	C>T	0.437	0.426	<i>TCF7L2</i>	rs12255372	-	G>T	0.007	0.934
<i>NR1I2</i>	rs1464603	g.252A>G	T>C	0.440	0.181	<i>TNF</i>	rs1800629	-308G>A	G>A	0.053	0.354
<i>NTRK1</i>	rs2768759	-	A>C	0.083	0.964	<i>TP53</i>	rs1042522	Arg72Pro	G>C	0.363	0.138
<i>OPRM1</i>	rs1799971	A118G	A>G	0.383	0.719	<i>UGT1A7</i>	rs7586110	-57T>G	T>G	0.220	0.282
<i>P2RY1</i>	rs701265	-	A>G	0.363	0.672	<i>UGT1A8</i>	rs1042597	*2, c.518C>G, Ala173Gly	G>C	0.447	0.723
	rs1065776	893C>T	C>T	0.097	0.576	<i>UGT2B15</i>	rs1902023	*2, Y85D	T>G	0.487	0.630
<i>P2RY12</i>	rs2046934	T744C	T>C	0.233	0.027	<i>UGT2B17</i>	rs6552182	*2, CNV	C/T	0.163	0.999
<i>PTGS1</i>	rs3842787	P17L	C>T	0.090	0.226	<i>ULK3</i>	rs2290573	-	C>T	0.150	0.689
<i>PTGS2</i>	rs20417	-765G>C	G>C	0.027	0.005	<i>VDR</i>	rs1544410	BsmI	G>A	0.040	0.106
<i>RGS4</i>	rs951439	-	C>T	0.413	0.256						

MAF, minor allele frequency; HWE, Hardy-Weinberg equilibrium.

Table II. Continued.

Gene	SNP	Alternative name	Alleles	MAF	HWE	Gene	SNP	Alternative name	Alleles	MAF	HWE
<i>CBR1</i>	rs20572	627C>T, A209A	C>T	0.220	0.549	<i>GGH</i>	rs11545078	452C>T	C>T	0.077	0.309
<i>CBR3</i>	rs1056892	Val244Met	G>A	0.380	0.642		rs3780126	c.109+1307G>C	C>T	0.313	0.783
<i>CCND1</i>	rs17852153	870G>A	A>G	0.460	0.567		rs11545077	Ala31Thr	G>A	0.177	0.345
<i>CDA</i>	rs2072671	Lys27Gln, K27Q	A>C	0.180	0.303	<i>GNB3</i>	rs5443	Ser275Ser	C>T	0.457	0.082
	rs60369023	c.208G>A, Ala70Thr	G>A	0.007	0.934	<i>GRK4</i>	rs1954787	-	C>T	0.123	0.333
	rs532545	-451C>T	G>A	0.173	0.153	<i>GSK3B</i>	rs334558	-50T>C	G>A	0.350	0.622
<i>CETP</i>	rs708272	TaqIB	C>T	0.340	0.224		rs13321783	IVS7+9227A>G	G>A	0.420	0.246
<i>CHST3</i>	rs4148943	c.*1278C>T	C>T	0.103	0.596		rs2319398	IVS7+11660G>T	T>G	0.430	0.362
	rs4148945	c.*1361C>T	C>T	0.073	0.816		rs6808874	IVS11+4251T>A	A>T	0.493	0.252
	rs4148950	c.*3477G>A	G>A	0.073	0.816	<i>GSTP1</i>	rs1138272	C341T, A114V	C>T	0.080	0.965
	rs1871450	c.*3785G>A	G>A	0.073	0.816		rs1695	*B, Ile105Val	A>G	0.193	0.400
	rs730720	c.*4533C>T	G>A	0.103	0.596	<i>HLA-E</i>	rs1059510	Asn98Asn	G>A	0.293	0.252
<i>CNTF</i>	rs12418	c.*4785G>A	G>A	0.073	0.816	<i>HMGCR</i>	rs12654264	-	T>A	0.450	0.902
	rs1800169	FS63TER	G>A	0.143	0.957		rs3846662	-	C>T	0.450	0.902
<i>COMT</i>	rs737865	-	T>C	0.277	0.844	<i>HSPA1L</i>	rs2227956	-	T>C	0.067	0.662
	rs165599	-	A>G	0.443	0.864		rs2075800	E602K	G>A	0.367	0.682
	rs4680	Val158Met	G>A	0.313	0.214	<i>HTR1A</i>	rs6295	-	C>G	0.267	0.781
<i>CRHR2</i>	rs2267715	-	G>A	0.383	0.719		rs10042486	-	T>C	0.213	0.568
	rs2284220	-	A>G	0.440	0.499		rs1364043	-	G>T	0.370	0.608
	rs7793837	-	A>T	0.183	0.107	<i>HTR2A</i>	rs9316233	-	C>G	0.323	0.623
<i>CYTSA</i>	rs5760410	g.4205975G>A	A>G	0.353	0.060		rs7997012	Intron 5, 2 variant	G>A	0.203	0.919
<i>DRD2</i>	rs4436578	A-241G	T>C	0.487	0.863		rs6311	-1438G>A	C>T	0.470	0.541
	rs1799978	C957T	A>G	0.183	0.982		rs6313	102C>T	C>T	0.467	0.662
	rs6277	-	C>T	0.050	0.519	<i>HTR2C</i>	rs1414334	-	G>C	0.013	1.53x10 ⁻⁹
<i>DRD3</i>	rs1076560	-	C>A	0.403	0.135		rs518147	-697G/C	C>G	0.140	6.36x10 ⁻¹⁴
	rs167771	-	A>G	0.147	0.882		rs3813928	c.-995G>A	G>A	0.123	5.77x10 ⁻¹⁶
	rs6280	Ser9Gly	T>C	0.300	0.560		rs6318	Cys23Ser	G>C	0.013	1.53x10 ⁻⁹
<i>EGFR</i>	rs2227983	R497K	G>A	0.233	0.704		rs3813929	-759C>T	C>T	0.123	5.77x10 ⁻¹⁶
<i>EPHX1</i>	rs1051740	Y113H, 337T>C	T>C	0.447	0.760	<i>HTR3B</i>	rs2276307	-	A>G	0.223	0.486
	rs2234922	H139R, 416A>G	A>G	0.143	0.957	<i>HTR7</i>	rs1935349	-	G>A	0.277	0.067
<i>ERBB2</i>	rs1136201	Ile655Val	A>G	0.133	0.099	<i>IL1B</i>	rs16944	-511C/T	G>A	0.463	0.793
<i>ERCC1</i>	rs3212986	8092C>A	G>T	0.277	0.833	<i>IL28B</i>	rs8099917	-	T>G	0.070	0.740
	rs11615	19007T>C, Asn118Asn	C>T	0.230	0.341		rs12980275	-	A>G	0.077	0.891
<i>ERCC2</i>	rs13181	2251A>C, Lys751Gln	T>G	0.043	0.579		rs8105790	-	T>C	0.070	0.740
<i>FDPS</i>	rs2297480	-	C>A	0.187	0.677		rs11881222	-	A>G	0.070	0.740
<i>FKBP5</i>	rs1360780	-	C>T	0.250	0.057		rs7248668	-	G>A	0.067	0.662
	rs3800373	-	T>G	0.223	0.101	<i>ITPA</i>	rs1127354	P32T	C>A	0.147	0.882
<i>GGCX</i>	rs699664	8016G>A	G>A	0.367	0.682	<i>KCNH2</i>	rs3815459	-	A>G	0.187	0.903

Table III. List of 105 monomorphic single-nucleotide polymorphisms (SNPs).

Gene	SNP	Alternative name	Alleles	Gene	SNP	Alternative name	Alleles
CYP2D6	rs11135822	*49, 1611T>A	T>A	G6PD	rs1050828	202G>A	C>T
	rs35742686	*3, 2549delA	Ins>del		rs1050829	376A>G	A>G
	rs5030655	*6, 1707delT	Ins>del		rs34193178	H350D	G>C
	CYP2D6_2	*60, 1887insTA	Del>ins		rs3130690	HLA-B*1502	C>A
	rs5030867	*7, 2935A>C	A>C		rs2395029	HLA-B*5701	T>G
CYP2C9	rs5030656	*9, 2615_2617delAAG	Ins>del	NAT1	rs4986990	*11, c.459G>A, p.T153T	G>A
	rs28371685	*11, R335W	C>T		rs5030839	*15, c.559C>T, p.R187X	C>T
	rs9332239	*12, 50338C>T	C>T	HLA-B*1502	rs56379106	*17, c.190C>T, p.R64W	C>T
	rs72558187	*13, 3276T>C	T>C		rs56318881	*19, c.97C>T, p.R33X	C>T
	rs72558190	*15, 9100C>A	C>A		rs56172717	*22, c.752A>T, p.D251V	A>T
	rs72558193	*18, 47391A>C	A>C		rs55793712	*5, c.884A>G	A>G
	rs1799853	*2, Arg144Cys	C>T		rs72554612	*5, c.976delA	A>G
	rs72558188	*25, 353_362delAGAAATGGAA	Ins>del	NAT2	rs1805158	*19, 190C>T, R64W	C>T
	rs9332131	*6, 818delA	Ins>del		rs4986996	*12D	G>A
VKORC1	rs7200749	*3F, 3462C>T, 8773C>T	G>A	TPMT	rs1800462	*2, 238G>C, A80P	G>C
CYP2C19	rs41291556	*8, 12711T>C, W120R	T>C		rs1800584	*4	G>A
	rs56337013	*5A, 1297C>T, R433W	C>T	UGT1A1	rs28934877	*38	A>G
DPYD	rs3918290	*2A, IVS14+1G>A	G>A		rs55750087	*29, R367G	C>G
	rs1801268	*10, 2983G>T, V995F	G>T	CYP3A4	rs4987161	*17, F189S, 670T>C	T>C
	rs72549309	*7, 295delTTCAT	A>T		rs2740574	*1B, -392A>G	A>G
	rs1801266	*8, R235W	C>T	CYP3A5	rs10264272	*6, 14690G>A	C>T
	rs1801267	*9B, 2657G>A, R886H	G>A		rs41303343	*7, 27131_27132insT	A>T
	DPYD_2	-268C/A	C>A	CYP1A2	rs28383479	*9, 19386G>A	G>A
	DPYD_1	N151D	A>G		rs41279854	*10, 29753T>C	A>G
	DPYD_3	S811S	C>T	CYP1A2	rs72547513	*11, F186L, 558C>A	C>A
	DPYD_4	T735A	A>G		rs72547511	*15, P42R, 125C>G	C>G

Table III. Continued.

Gene	SNP	Alternative name	Alleles	Gene	SNP	Alternative name	Alleles
CYP1A2	rs72547515	*16, R377Q, 2473G>A	C>T	BCHE	rs1799807	Asp70Gly	A>G
	rs55889066	*5, C406Y, 3497G>A	G>A		rs28933390	Gly390Val	G>T
	rs28399424	*6, R431W, 5090C>T	C>T		rs28933389	Thr243Met	C>T
	rs72547517	*8, R456H, 5166G>A	G>A		rs2835285	Val93Ile	G>A
	rs28399468	*10, 6600G>T	G>T		rs9332377	-	C>T
CYP2A6	rs1809810	*18, 5668A>T	A>T	EGFR	rs121434568	L858R	T>G
	rs56256500	*23, R203C, 607C>T	C>T		rs1799963	-	G>A
	rs28399444	*20, 2141_2142delAA	A>C		rs2518224	-	A>C
	rs12721655	*8, 415A>G, K192E	A>G		rs1799735	Intron 6, 3-bp deletion	G>T
	rs34223104	*22, -82C>T	T>C		rs6314	C1354T	C>T
	rs36079186	*27, 593T>C, M198T	T>C	ITGB3	rs5918	Leu33Pro	T>C
	rs34097093	*28, 1132C>T, R378X	C>T		rs12720441	R784W	C>T
	rs3211371	*1C, *5, *7, 1459C>T, Arg487Cys	T>C		rs7626962	S1103Y	G>T
	rs28399499	*18, 983T>C, I328T	T>C		rs34059508	1393G>A, G465R	G>A
	rs58425034	c.646-159G>C	G>C		rs12208357	148C>T, R61C	C>T
CYP2C8	rs12721646	c.646-17C>T	C>T	SLC22A2	rs8177517	K432Q	A>C
	rs11572103	*2, I269F, A805T	A>T		rs8177507	M165I	C>T
	rs10509681	*5, 2189delA	Ins>del		rs8177516	*7, R400C	C>T
	rs35810889	M89T	T>C		rs11568388	1099G>A	G>A
	rs35023033	R669C	C>T	SLCO1B1	rs56199088	*10, D655G	A>G
ABCB1	rs35730308	W1108R	T>C		rs56101265	*2, F73L	T>C
	rs35529209	Ala989Thr	G>A		rs72559745	*3, E156G	A>G
	rs45511401	Gly671Val	G>T		rs56061388	*3, V82A	T>C
	rs8187710	Cys1515Tyr	G>A		rs59502379	*9, G488A	G>C
ABCC2	rs17222723	Val1188Glu	T>A	ST6GAL1	rs10937275	-	G>A
ADRB2	rs1800888	Thr164Ile	C>T		rs7657958	Asp67Tyr tagging	G>A
AOX1	rs55754655	Asn1135Ser	A>G				

Table IV. Summary of 141 pharmacogenes investigated in a Korean population (n=150).

Class	Gene (no. of SNPs)	Class	Gene (no. of SNPs)	Class	Gene (no. of SNPs)	Class	Gene (no. of SNPs)
Phase I	CYP2D6 (14)		ABCC2 (6)		ATM (1)		HTR7 (1)
	CYP2C9 (13)		ABCC4 (2)		ATXN1 (1)		IL1B (1)
	CYP2C19 (15)		ABCC6 (1)		BAT3 (1)		IL28B (5)
	DPYD (16)		ABCG2 (4)		BCHE (3)		ITGB3 (1)
	CYP2E1 (6)		SLC10A1 (1)		BDKRBI (1)		ITPA (1)
	CYP3A4 (3)		SLC10A2 (1)		BDKRB2 (1)		KCNH2 (3)
	CYP3A5 (6)		SLC19A1 (1)		C6orf10 (1)		KNG1 (3)
	CYP4B1 (1)		SLC1A1 (3)		CACNG2 (3)		LDLR (1)
	CYP4F2 (1)		SLC22A1 (2)		CCND1 (1)		LEMD2 (1)
	CYP19A1 (2)		SLC22A16 (1)		CETP (1)		LRP2 (1)
	CYP1A2 (14)		SLC22A2 (4)		CNTF (1)		LTC4S (1)
	CYP1B1 (1)		SLC28A2 (1)		COMT (4)		METTL21A (2)
	CYP2A6 (5)		SLC28A3 (1)		CRHR2 (3)		MICA (1)
	CYP2B6 (10)		SLCO1B1 (9)		CYTA (1)		MLH1 (1)
	CYP2C8 (5)		SLCO1B3 (1)		DRD2 (4)		MTHFR (2)
	CYP2C18 (1)		SLCO2B1 (1)		DRD3 (2)		NEFM (1)
	AOX1 (1)		ATP7A (1)		EGFR (2)		NOS1AP (2)
	CBR1 (2)		CAT (1)		ERBB2 (1)		NPPA (1)
	CBR3 (2)	Modifier	CDA (3)		ERCC1 (2)		NQO1 (1)
	EPHX1 (2)		KCNJ11 (1)		ERCC2 (1)		NTRK1 (1)
	NOS3 (1)		NR1H2 (1)		F2 (1)		OPRM1 (1)
	NAT1 (10)		VKORC1 (6)		FDP5 (1)		P2RY1 (2)
	NAT2 (10)		G6PD (6)		FKBP5 (2)		P2RY12 (1)
Phase II	TPMT (6)		HLA-B*1502 (3)		GGCX (1)		PTGS1 (1)
	UGT1A1 (9)		HLA-B*5701 (1)		GGH (3)		PTGS2 (1)
	CHST3 (6)		ABO (2)		GNB3 (1)		RGS4 (3)
	GSTM3 (1)		ACE (1)		GRIK2 (1)		SCN5A (3)
	GSTP1 (2)		ADM (1)		GRIK4 (1)		ST6GALI (1)
	SULT1C4 (1)		ADRB2 (2)		GSK3B (4)		TCF7L2 (1)
	UGT1A7 (1)		ADRB3 (1)		HLA-E (1)	Others	TNF (1)
	UGT1A8 (1)		AGTRI (1)		HMGCR (2)		TP53 (1)
	UGT2B10 (1)		AKT1 (1)	Others	HSPA1L (2)		ULK3 (1)
	UGT2B15 (1)		ANKK1 (1)		HTR1A (3)		VDR (1)
	UGT2B17 (1)		APOB (1)		HTR2A (5)		
	ABCB1 (16)	Others	APOC3 (2)		HTR2C (5)		
	ABCC1 (11)		ARG1 (1)		HTR3B (1)		
Transporter							

Table V. Frequencies and effects of *CYP2D6*, *CYP2C19*, *TPMT*, *DPYD* and *IL28B* genotypes on enzyme activity and drug toxicity.

Gene	Star-allele genotype	Star-allele-defining SNPs (genotype of each SNP)	No.	Freq. (%)	Enzyme activity ^a	Clopidogrel efficacy ^b	Adverse reactions of azathioprine, mercaptopurine and thioguanine ^c	5-FU toxicity ^d	Treatment outcome for hepatitis C ^e
<i>CYP2D6</i>	*1/*1	Wild-type	95	63.3	Normal	N/A	N/A	N/A	N/A
	*1/*2	<i>rs16947</i> (CT), <i>rs1135840</i> (GG)	6	4	Normal	N/A	N/A	N/A	N/A
	*2/*2	<i>rs16947</i> (TT), <i>rs1135840</i> (GG)	2	1.3	Normal	N/A	N/A	N/A	N/A
	*1/*4	<i>rs3892097</i> (AG)	18	12	Decreased	N/A	N/A	N/A	N/A
	*4/*4	<i>rs3892097</i> (AA)	2	1.3	None	N/A	N/A	N/A	N/A
	*1/*10	<i>rs1065852</i> (CT or TT), <i>rs1135840</i> (GG or CG)	7	4.7	Normal	N/A	N/A	N/A	N/A
	*1/*14A	<i>rs1065852</i> (CT or TT), <i>rs16947</i> (CT or TT), <i>rs1135840</i> (GG or CG)	12	8	Decreased	N/A	N/A	N/A	N/A
	*1/*34	<i>rs16947</i> (CT)	34	22.7	Normal	N/A	N/A	N/A	N/A
	*34/*34	<i>rs16947</i> (TT)	4	2.7	Normal	N/A	N/A	N/A	N/A
	*1/*36	<i>rs1065852</i> (CT or TT), <i>rs1135840</i> (GG or CG)	7	4.7	Normal	N/A	N/A	N/A	N/A
<i>CYP2C19</i>	*1/*60	<i>CYP2D6</i> _2 ^f (ins/del or del/del), <i>rs79738337</i> (TT or CT)	2	1.3	Normal	N/A	N/A	N/A	N/A
	*1/*1	Wild-type	45	25.9	Normal	Typical	N/A	N/A	N/A
	*1/*2	<i>rs4244285</i> (AG)	78	44.8	Decreased	Reduced	N/A	N/A	N/A
	*2/*2	<i>rs4244285</i> (AA)	8	4.6	Decreased	Greatly reduced	N/A	N/A	N/A
	*1/*3	<i>rs4986893</i> (AG)	21	12.1	Decreased	Reduced	N/A	N/A	N/A
	*3/*3	<i>rs4986893</i> (AA)	1	0.6	Decreased	Greatly reduced	N/A	N/A	N/A
	*1/*4	<i>rs28399504</i> (AG)	1	0.6	Decreased	Reduced	N/A	N/A	N/A
	*1/*17	<i>rs1188072</i> (CC or CT), <i>rs12248560</i> (CC or CT)	20	11.5	Increased	Enhanced	N/A	N/A	N/A
	*1/*3B	<i>rs1800460</i> (AG)	1	0.7	Decreased	N/A	Increased drug toxicity	N/A	N/A
	*1/*3C	<i>rs1142345</i> (AG)	4	2.7	Decreased	N/A	Increased drug toxicity	N/A	N/A
<i>TPMT</i>	*1/*6	<i>rs75543815</i> (AA)	139	92.7	Decreased	N/A	Increased drug toxicity	N/A	N/A
	*6/*6	<i>rs75543815</i> (AT)	7	4.7	Decreased	N/A	Increased drug toxicity	N/A	N/A
	*1/*1	<i>rs3918290</i> (GG)	150	100	-	N/A	N/A	Low risk	N/A
	*1/*5	<i>rs1801159</i> (AG)	65	43.3	Normal	N/A	N/A	-	N/A
<i>DPYD</i>	*5/*5	<i>rs1801159</i> (GG)	9	6	Normal	N/A	N/A	-	N/A
	*1/*9A	<i>rs1801265</i> (CT)	16	10.7	Normal	N/A	N/A	-	N/A
	<i>c.496A>G</i>	<i>rs2297595</i> (AG)	3	2	Normal	N/A	N/A	-	N/A
	-	<i>rs8099917</i> (TT)	130	86.7	N/A	N/A	N/A	N/A	Normal
<i>IL28B</i>	-	<i>rs8099917</i> (GT)	19	12.7	N/A	N/A	N/A	N/A	1.64 times less likely to respond
	-	<i>rs8099917</i> (GG)	1	0.7	N/A	N/A	N/A	N/A	2.39 times less likely to respond
	-								
	-								

^aEnzyme activity based on previous studies [*CYP2D6* (21,76-80), *CYP2C19* (81), *TPMT* (82,83), *DPYD* (84)]. ^bThe efficacy of clopidogrel was estimated based on a previous study (81). ^cThe adverse reactions to azathioprine, mercaptopurine and thioguanine were estimated based on previous studies (8). ^d5-Fluorouracil (5-FU) toxicity estimation was based on a previous study (84). ^eOdds of responding to peginterferon- α and ribavirin (PEG-IFN α /RBV) treatment for hepatitis C. The outcome estimation was based on previous studies (74,85). ^fTA insertion at position 1887. N/A, not applicable.

Table VI. Frequencies and effect of combined *CYP2C9* and *VKORC1* genotypes on the response to warfarin.

<i>CYP2C9</i>			<i>VKORC1</i> (<i>rs8050894</i>)								
			CC			CG			GG		
Star-allele genotype	Star-allele-defining SNPs	Genotype in each SNP	n	Freq. (%)	Warfarin dose (mg/day) ^a	n	Freq. (%)	Warfarin dose (mg/day) ^a	n	Freq. (%)	Warfarin dose (mg/day) ^a
*1/*1	<i>rs1799853</i>	CC	1	0.7	5-7	22	14.7	5-7	114	76.0	3-4
	<i>rs1057910</i>	AA									
*1/*2	<i>rs1799853</i>	CT	0	0	5-7	0	0	3-4	0	0	3-4
	<i>rs1057910</i>	AA									
*1/*3	<i>rs1799853</i>	CC	0	0	3-4	1	0.7	3-4	12	8.0	0.5-2
	<i>rs1057910</i>	AC									
*2/*2	<i>rs1799853</i>	TT	0	0	3-4	0	0	3-4	0	0	0.5-2
	<i>rs1057910</i>	AA									
*2/*3	<i>rs1799853</i>	CT or TT	0	0	3-4	0	0	0.5-2	0	0	0.5-2
	<i>rs1057910</i>	AC or CC									
*3/*3	<i>rs1799853</i>	CC	0	0	0.5-2	0	0	0.5-2	0	0	0.5-2
	<i>rs1057910</i>	CC									

^aWarfarin dose estimation was based on previous studies (52,86,87).

Table VII. Frequencies and combined effects of *rs2844682* and *rs3909184* (tagging *HLA-B*1502*) on adverse reactions to carbamazepine.

SNP/Genotype		n	Freq. (%)	<i>HLA-B*1502</i> type	Adverse reactions to carbamazepine ^a
<i>rs2844682</i>	<i>rs3909184</i>				
CC	CC	95	63.3	None	Low risk
CC	CG	10	6.7	None	Low risk
CC	GG	1	0.7	None	Low risk
CT	CC	37	24.7	None	Low risk
CT	CG	4	2.7	Unable to be determined	-
CT	GG	0	0		*1502 (one copy)
TT	CC	3	2.0	None	Low risk
TT	CG	0	0	*1502 (one copy)	High risk
TT	GG	0	0	*1502 (two copies)	High risk

^aReaction estimation based on a previous study (88).

Table VIII. Frequency and effects of *HCP5/HLA-B*5701* and *TPMT/COMT* polymorphisms on adverse drug reaction.

SNP ID/Genotype					Abacavir hypersensitivity ^a
<i>rs2395029</i> (<i>HCP5</i>)	<i>HLA-B*5701</i>	n	Freq. (%)		
TT	None	150	100		Low risk
TG	*5701 (one copy)	0	0		High risk
GG	*5701 (two copies)	0	0		High risk
<i>rs1142345</i> (<i>TPMT</i>)	<i>rs9332377</i> (<i>COMT</i>)	n	Freq. (%)	Adverse reactions to cisplatin ^b	
AA	CC	146	93.7		Low risk
AG	CC	4	2.7		High risk
GG	CC	0	0		High risk

^aEstimated based on a previous study (89). ^bRisk estimation of adverse reactions to cisplatin was based on a previous study (39).

adverse drug reactions or Stevens-Johnson syndrome in Asian populations (47-51). In this study, two tagging SNPs of *HLA-B*1502*, *rs3909184* and *rs2844682*, were used for the evaluation of the *HLA-B*1502* frequency in the Korean population (Table VII). No subject was identified as carrying one or two copies of *HLA-B*1502*, which is associated with increased risk of adverse reactions to carbamazepine. Thus, the Korean population may have a relatively low risk of adverse reactions to carbamazepine.

*HLA-B*5701*, which is in linkage disequilibrium with *rs2395029* in *HCP5*, was reported to be a predictive marker of abacavir hypersensitivity (52). Abacavir is an inhibitor of nucleoside reverse-transcriptase and is used as an anti-retroviral agent for human immunodeficiency virus treatment (53). All 150 Korean subjects were found to carry the combination of the TT genotype of *rs2395029* and *HLA-B*5701*-negative type, which is associated with a low risk of hypersensitivity to abacavir (Table VIII). The genotype frequencies of *TPMT* and catechol O-methyltransferase (*COMT*) polymorphisms, which are associated with the risk of hearing loss due to cisplatin toxicity (54), were also estimated in the Korean population (Table VIII) and the combination of the AA genotype of *rs1142345* (*TPMT*) and the CC genotype of *rs9332377* (*COMT*), which are associated with a lower risk of cisplatin ototoxicity (54), exhibited the highest frequency (93.7%) in the Korean population.

In conclusion, we conducted extensive analyses of the distribution of various pharmacogene polymorphisms in 150 Korean subjects and identified the genotype frequencies of important pharmacogene polymorphisms, such as *CYP2D6*, *CYP2C9*, *VKORC1*, *CYP2C19*, *HLA-B* and *TPMT* among others, which may affect the efficacy and side effects of various drugs, including warfarin, clopidogrel, carbamazepine, azathioprine and others. To the best of our knowledge, our study was the first to simultaneously investigate a large number of pharmacogene polymorphisms in multiple samples in a Korean population. The findings from the present study may be helpful in developing personalized medicines for Korean patients. Moreover, the methods used in the present study may also be applied in other populations in order to study their unique pharmacogenomics.

Acknowledgements

This study was supported by a grant from the Ministry of Food and Drug Safety, Republic of Korea, in 2011 (no. 10182MFDSS72).

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