

# Genetic susceptibility to Type 1 Diabetes in children: analysis of polymorphisms rs1990760 - IFIH1, rs20541 - IL13 , rs231775 - CTLA 4

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## OBJECTIVES

To estimate the association of polymorphisms of IFIH1 (The interferon induced helicase domain 1), IL13 (The interleukin 13), CTLA 4 (Cytotoxic T-lymphocyte antigen 4) genes with the predisposition to T1DM in children.

## METHODS

The study was performed in 194 patients with T1DM and 190 healthy volunteers. The three single nucleotide polymorphisms (SNPs): rs1990760 - IFIH1, rs20541- IL13 , rs231775- CTLA 4 were genotyped TaqMan SNP genotyping assay with platform QuanStudio 12K Flex - OpenArray plates using the real-time PCR.

## RESULTS

### Distribution of genotypes and alleles: rs1990760 – IFIH1 in T1DM and controls

Group	Genotype/Allele	All	
T1DM	T/T	83 (44%)	$p=0.001$ OR=5
	T/C	97 (51%)	
	C/C	9 (5%)	
	T	263 (70%)	$p=0.001$ OR=2
	C	115 (30%)	
Controls	T/T	54 (33%)	
	T/C	74 (47%)	
	C/C	31 (20%)	
	T	182 (57%)	
	C	136 (43%)	

Rs1990760 T alleles were more frequent in patients with T1DM in comparison to healthy subjects ( $p=0.001$  with OR=5), 70% vs 57%

OR=2 means that risk for development of T1DM is 2 times higher for a T allele in comparison to a C allele.

### Distribution of genotypes and alleles: rs20541 – IL13 in T1DM and controls

Group	Genotype/Allele	All	
T1DM	A/A	19 (11%)	
	A/G	69 (36%)	
	G/G	101 (53%)	
	A	107 (28%)	$p=0.004$ OR=2
	G	271 (71%)	
Controls	A/A	7 (5%)	
	A/G	51 (32%)	
	G/G	100 (63%)	
	A	65 (20%)	
	G	251 (80%)	

Rs20541 A alleles were more frequent in T1DM patients in comparison to healthy subjects ( $p=0.04$  with OR=2)

OR=2 means that risk for development of T1DM is 2 times higher for a A allele in comparison to a G allele.

### Distribution of genotypes and alleles: rs231775 – CTLA4 in T1DM and controls

Group	Genotype/Allele	All	
T1DM	G/G	47 (25%)	
	G/A	99 (52%)	
	A/A	43 (23%)	
	G	193 (51%)	$p=0.01$ OR=2
	A	185 (49%)	
Controls	G/G	27 (17%)	
	G/A	82 (51%)	
	A/A	51 (32%)	
	G	68 (42%)	
	A	94 (58%)	

Rs231775 G alleles were more frequent in T1DM patients in comparison to healthy subjects ( $p=0.01$ , OR=2)

OR=2 means that risk for development of T1DM is 2 times higher for a G allele in comparison to a G allele.

## CONCLUSIONS

- Rs1990760 T/C - IFIH1, rs20541 A/G - IL13 , rs231775 G/A – CTLA 4 polymorphisms could contribute to development of T1DM in children.
- The main risk factor for rs1990760 is T allele, for rs20541 A allele and for rs231775 G allele.

