

Using allele scores to identify confounding by reverse causation: studies of alcohol consumption as an exemplar

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MRC Integrative
Epidemiology
Unit



University of
BRISTOL

Methods

Using allele scores to identify confounding by reverse causation: studies of alcohol consumption as an exemplar

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- <https://doi.org/10.1093/ije/dyac165>

Outline

- Introduction
- Methods
- Results
- Discussion and possible complications

Introduction



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ORIGINAL ARTICLE

C-reactive protein levels and body mass index: elucidating direction of causation through reciprocal Mendelian randomization

NJ Timpson¹, BG Nordestgaard^{2,3}, RM Harbord^{1,4}, J Zacho^{2,3}, TM Frayling^{5,6}, A Tybjaerg-Hansen^{3,7}
and G Davey Smith¹



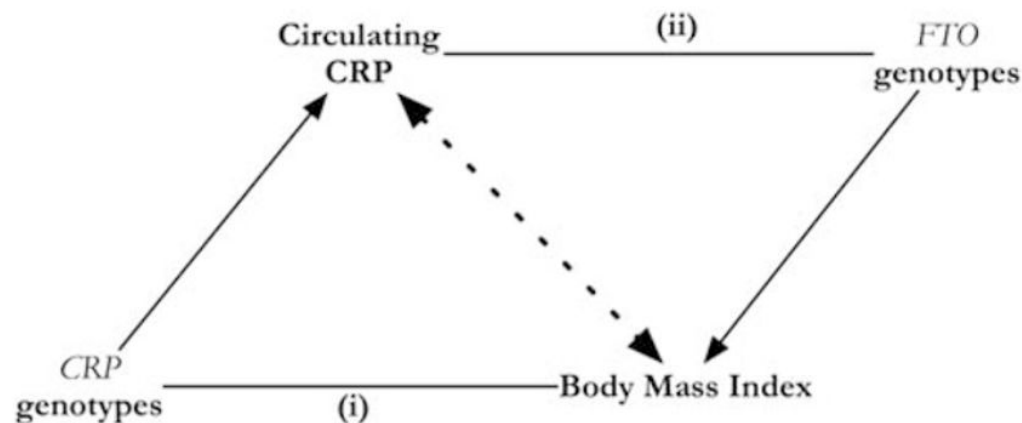
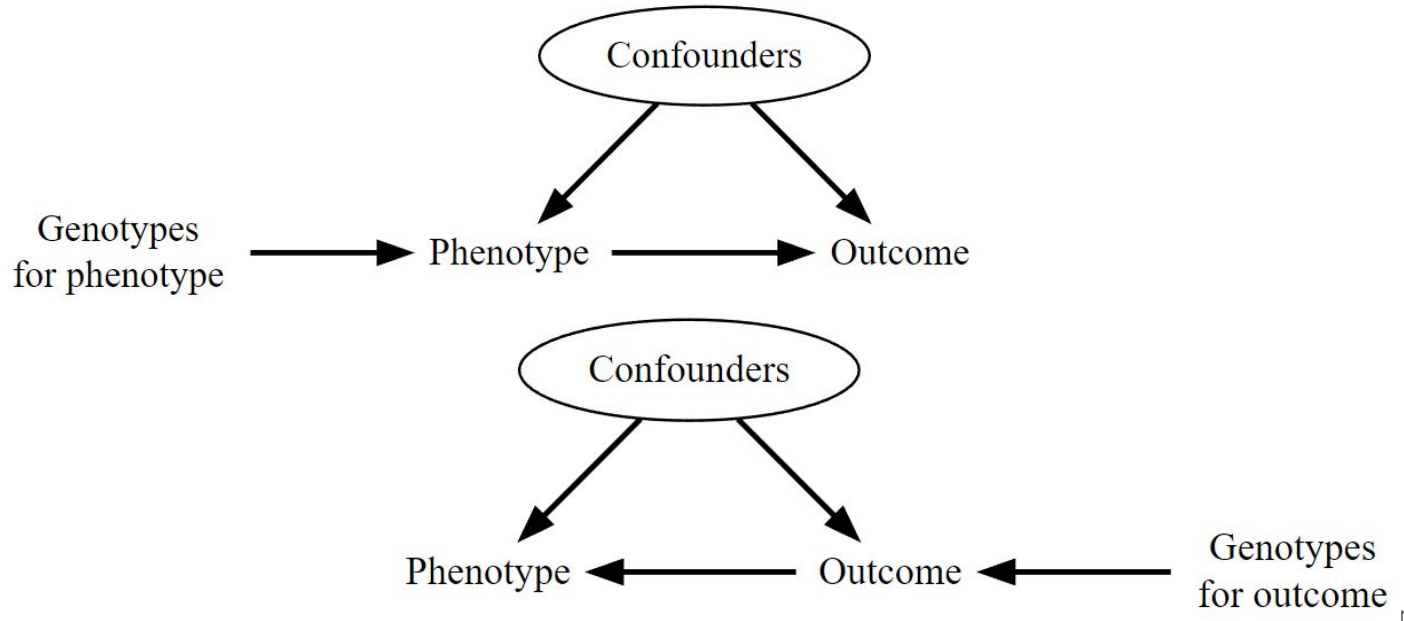
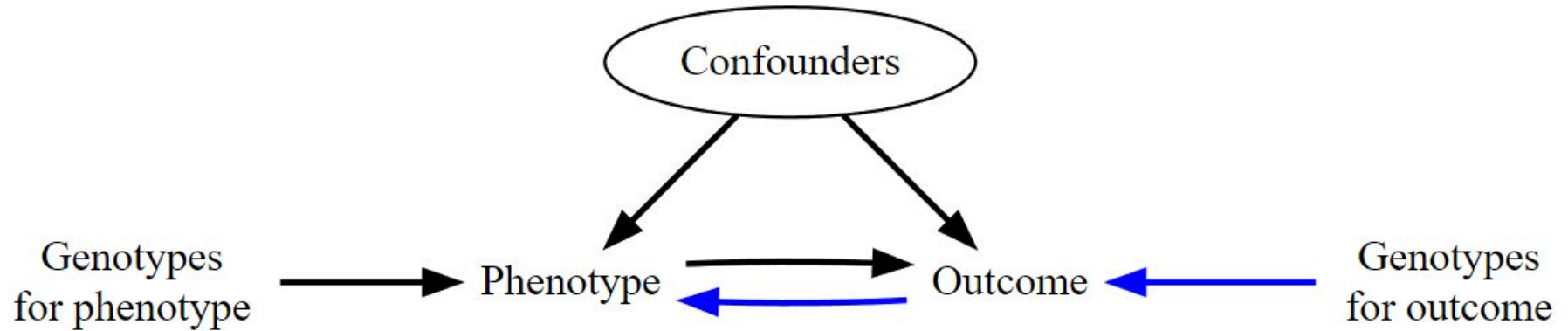


Figure 3 Graphical representation of the reciprocal Mendelian randomization framework used in main analyses. The dotted line represents the unknown direction of relationship between circulating *CRP* and BMI. Relationships (i) and (ii) denote the informative associations between *CRP* genotypes, *FTO* genotypes and circulating *CRP* and body mass index. Single-headed arrows represent the known (and assumed causal and largely nonconfounded) relationships between variation at the *CRP* and *FTO* loci and circulating *CRP* and body mass index, respectively.

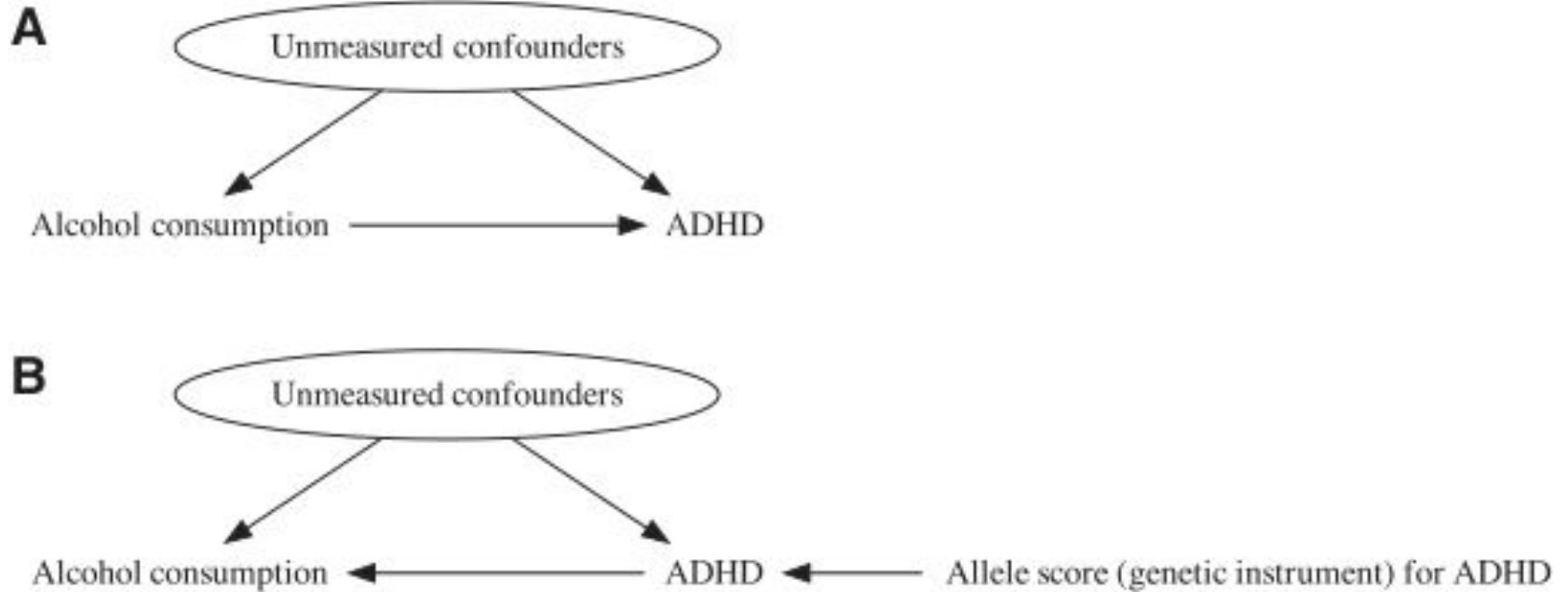
Figure 3 is 2 Mendelian randomization DAGs



Sometimes combined into a single figure



Methods: What we looked at



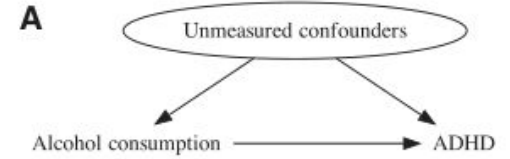
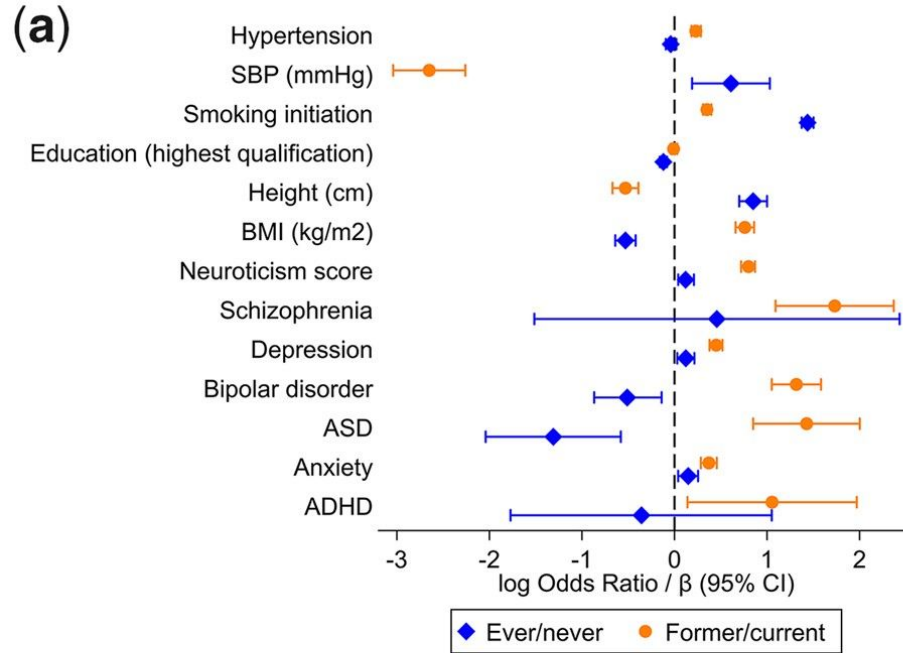
- A full bidirectional MR could present 4 estimates
 - Alc -> ADHD ; observational and MR
 - ADHD -> Alc ; observational and MR
- We hypothesised that reverse MR useful when instruments difficult to find for one of the exposures (e.g., cycling)
- Therefore we presented approx. 2 of those (instead of MR estimate, Causal Inference Test of 'outcome' ~ allele score, i.e., test of presence of causal effect)

- Phenotypes

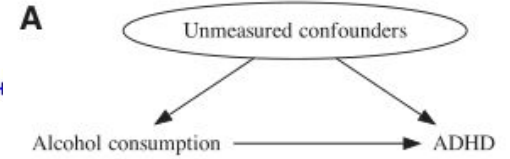
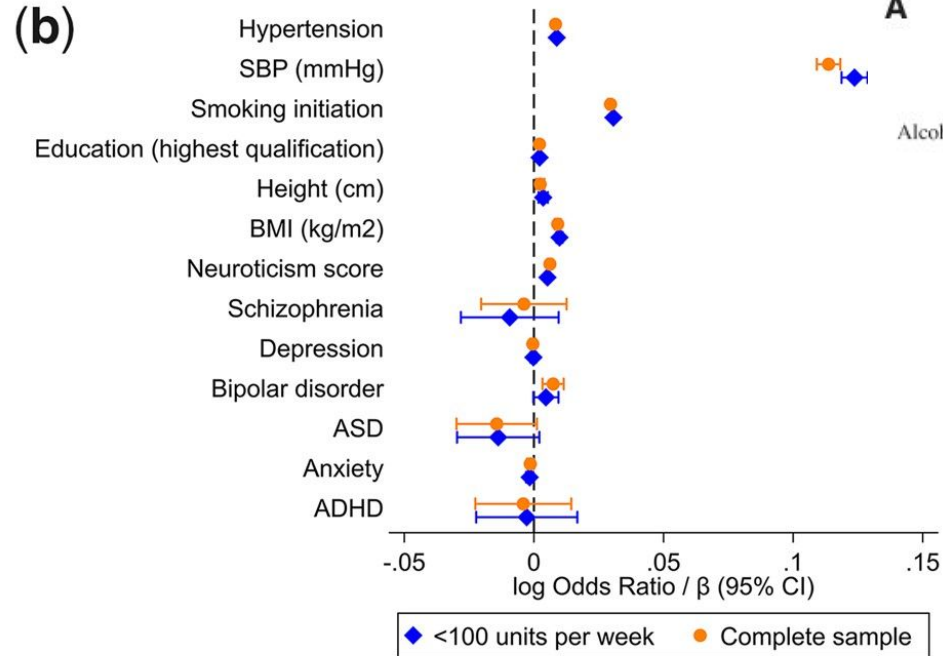
- Educational attainment, physical and mental health outcomes
- Alcohol consumption
 - Drinking status: ever/never and former/current; units per week; extreme drinking > 50 units
- Covariates: age, sex, highest educational qualification, total household income
- Allele scores
 - Hits $P < 5E-8$ in GWAS not including UKB in discovery sample
 - Used plink v1.90
 - Weights from discovery GWAS

- Statistical models:
 - linear/logistic regression
 - Note IV estimation was not performed; instead Causal Inference Test of 'outcome' regressed on allele score
- Sample sizes ranged from 114,941–336,473 in observational analyses and 142,093–336,818 in genetic analyses

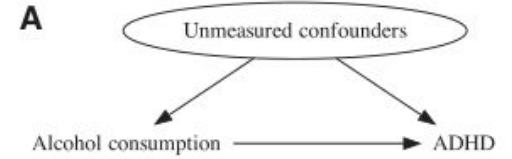
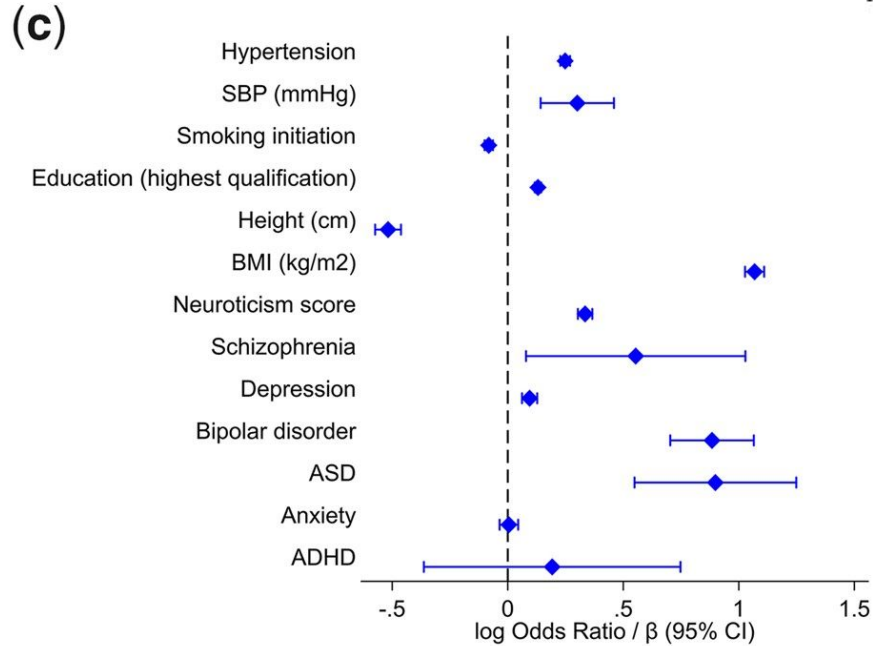
Results: Observational: outcome ~ alcohol estimates



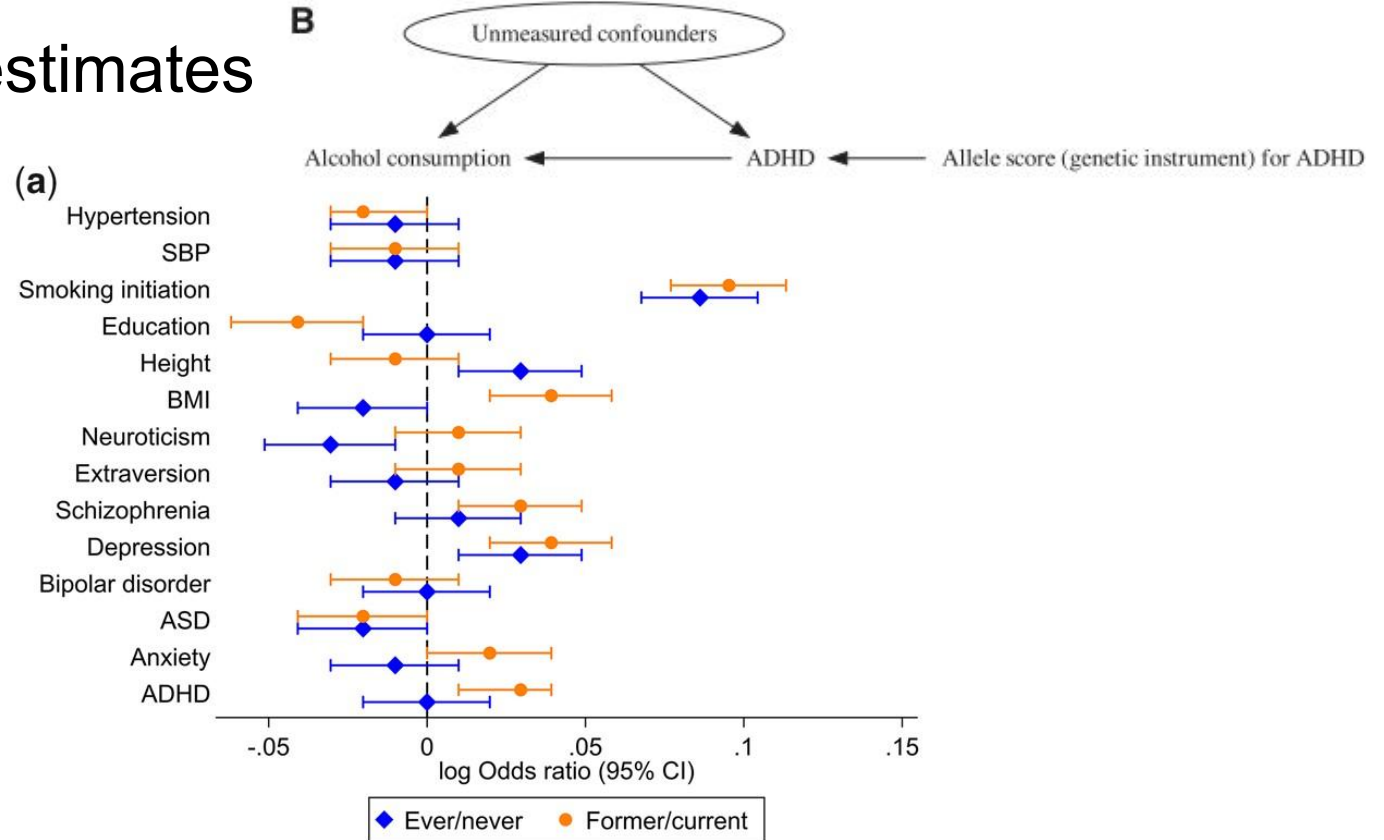
Observational: outcome ~ alcohol estimates



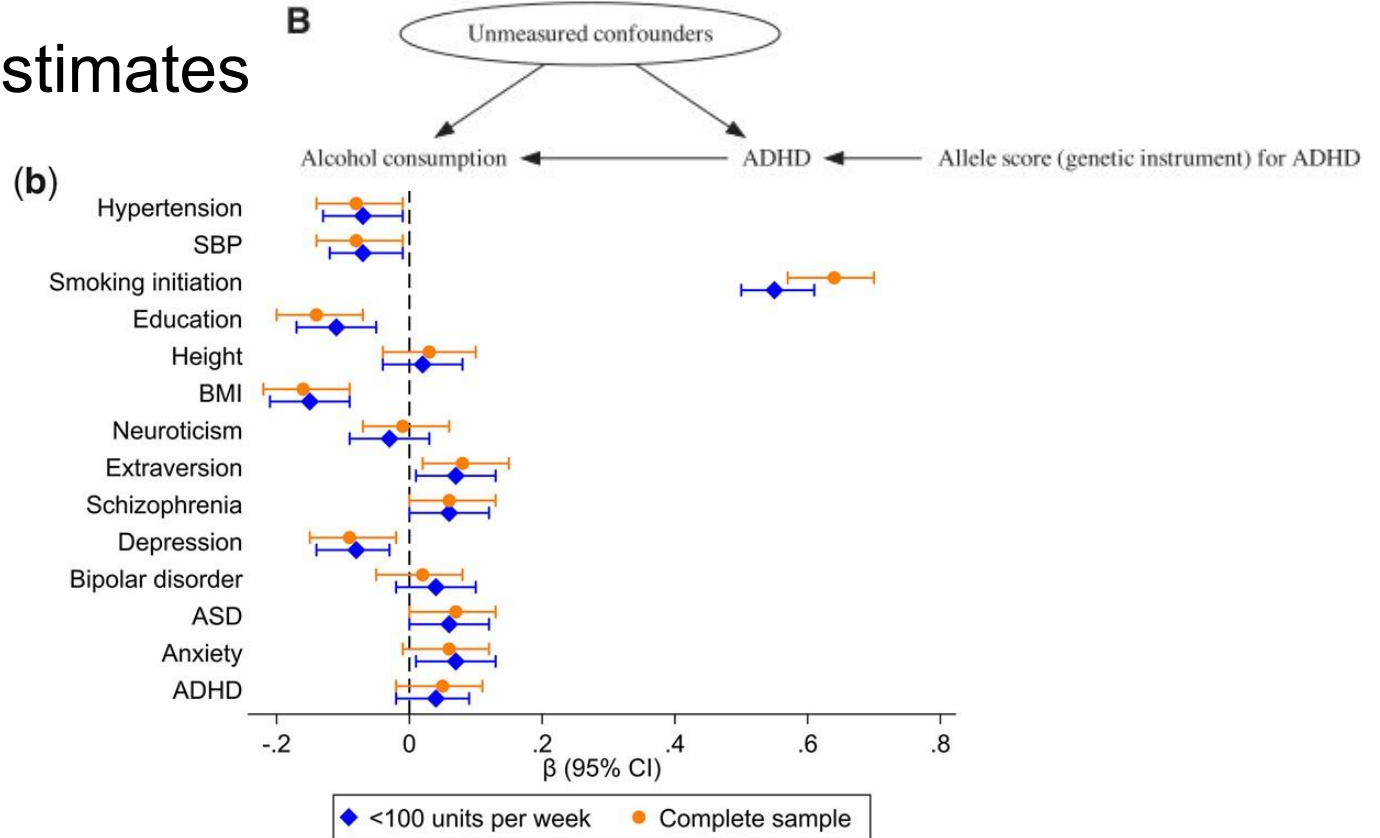
Observational: outcome ~ alcohol (extreme vs rest)



Allele score estimates



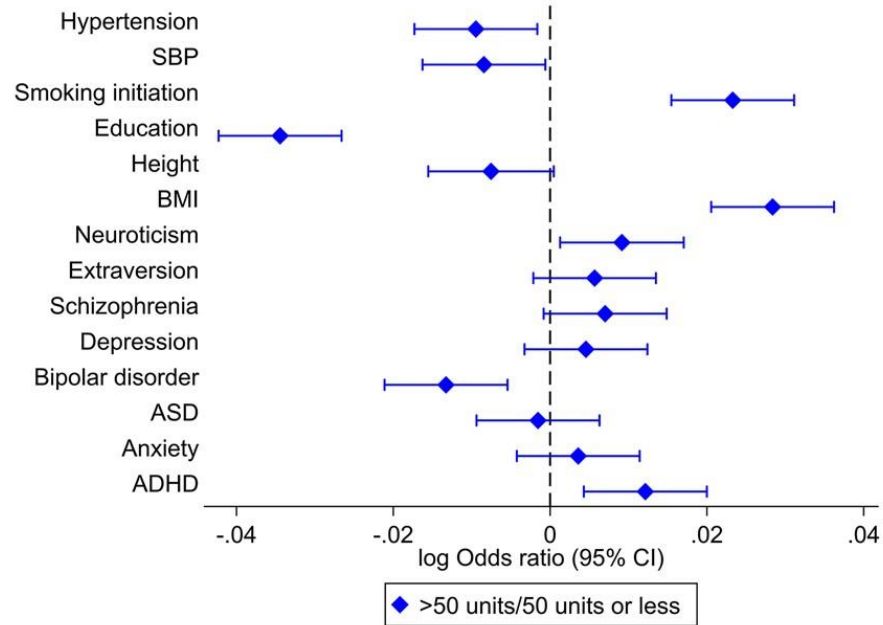
Allele score estimates



Allele score estimates



(c)



- Observational analyses indicated associations between alcohol consumption and a number of outcomes (neuroticism, body mass index, educational attainment)
- Analyses using allele scores suggested evidence of reverse causation for several of these relationships (physical health and educational attainment)

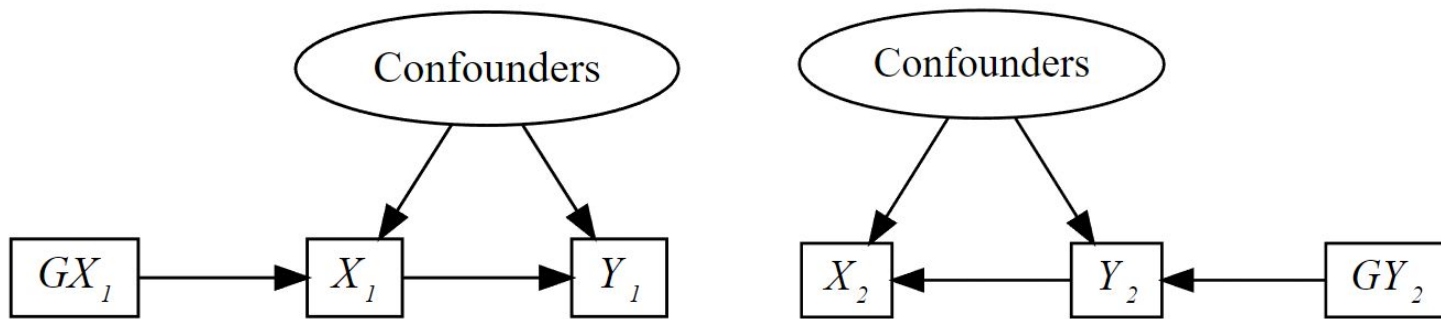
Discussion and possible complications

Key Messages

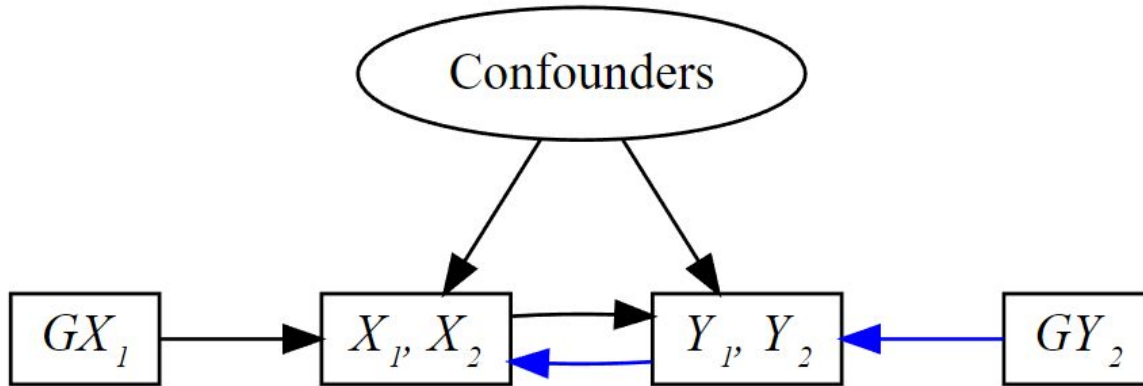
- Findings from conventional observational studies may be distorted by reverse causation.
- Reverse Mendelian randomization (MR) can be used to directly test reverse causation in observational epidemiological studies where bidirectional MR is not possible.
- Future extensions to this method could enable us to adjust observational estimates for reverse causation.
- Our findings suggest that observed associations suggesting beneficial effects of alcohol consumption may be largely due to confounding by reverse causation.

- Could have performed full bi-directional MR, as genotypes for alcohol consumption available
- Reverse MR useful when full bi-directional MR not possible

- Different true directions of effect at different time points, e.g. timepoints 1 and 2 separated by say puberty/menopause/a disease process??



You might accidentally try and fit



- Additionally, overlapping instrument sets for bi-directional Mendelian randomization analyses are problematic

Any questions

Code to draw Mendelian randomization DAGs

- <https://remlapmot.github.io/mrdags/>

R, DOT, and TikZ code to plot DAGs and SWIGs for Mendelian randomization analyses

AUTHOR

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Introduction

This webpage shows some R code for generating figures, directed acyclic graphs (DAGs), and single world intervention graphs (SWIGs) for Mendelian randomization (MR) analyses.

On this page

[Introduction](#)

DiagrammeR package

dagitty package

Eleanor Murray's TikZ diagrams using the tikz code chunk engine

quickdag package

Thomas Richardson's TikZ code for SWIGs

Excalidraw diagrams

Session information for reproducibility

References