



Fig. 4. Association analysis of GIA and SNPs across the three domains of *PfAMA1*. The analysis, using only anti-3D7 GIA data, is based on single-marker association using the χ^2 test. SNPs (total of 59 in our analysis) located in the *PfAMA1* gene are depicted as different symbols for the different domains: domain 1 circles, domain 2 triangles, and domain 3 diamonds. The arrows indicate the sites with the most significant *P* values.

America, and 11 from Papua New Guinea) has been described (15, 22). A multicopy microsatellite marker (*PfRRM*) was used to genotype the parasites to ensure that the same clone was used in the *PfAMA1* sequencing step and the GIA experiment (16). Field samples were collected from participants of a study conducted in Donéguébougou, Mali, a rural village of $\approx 1,300$ inhabitants located 30 km northeast of the Malian capital, Bamako. Individuals between the ages of 6 months and 45 years were randomly selected from the village census and invited to participate in the study. Two hundred nine participants were enrolled in July 2002, at the beginning of the malaria transmission season, and were sampled at three visits: in July 2002, October 2002, and January 2003, corresponding to the start, the midpoint, and 1 month after the end of the malaria transmission season, respectively. Capillary blood was obtained by finger prick using sterile lancets and was collected onto blood-collection paper (Schleicher & Schuell) and microscope slides for thick-film microscopy. Blood collection papers were air-dried and stored at room temperature in individually sealed plastic bags containing desiccant packs until DNA extraction was performed. A random sample of 210 filter papers, drawn equally from the three different sampling time points, was analyzed as part of the study. Of these 210 samples, 181 amplified the target sequence, and of these, only 61 contained a single genotype and were included in the analysis (Dataset 1).

Community permission for the study in Mali was obtained from village elders, along with approval from the ethical review committees of the Faculty of Medicine, Pharmacy, and Dentistry at the University of Bamako (Mali) and the National Institutes of Allergy and Infectious Diseases (Bethesda). Individual written informed consent was obtained from all participants or their guardians, and human experimentation guidelines of the U.S. Department of Health and Human Services and those of the participating institutions were followed in conducting this research.

Amplification and Sequencing of the *PfAMA1* Coding Region. DNA from laboratory-adapted *P. falciparum* clones and blood-collection papers was extracted according to the protocols and reagents of the QIAamp DNA mini kit (Qiagen), as recommended by the manufacturer. PCR primer pair (F2, 5'-GTAAGTGTATAAATTGTACA-3'; R8, 5'-TTTAGCATAAAAGAGAAGC-3'); and nested PCR primer pair (N1, 5'-ATGAGAAAATTACTGCGT-3'; N2, 5'-TGATTATATCAGACGTTGAA-3') were used to amplify the entire coding region sequence of the *PfAMA1* gene. PCR conditions and set-up were the same as described (23). Negative and positive controls were included in each PCR. After treatment with ExoSAP-it (U.S. Biochemical), PCR products were used directly in sequence reactions and analyzed on an ABI 3730XL

automatic sequencer as recommended by the manufacturer (Applied Biosystems).

GIA. Fourteen parasite clones (3D7, D10, S35, PC26, KMWII, FAB9, C2A, GB4, FVO, 102/1, M5, M24, L32, and 425) from different populations were selected for testing in the *in vitro* GIA (Fig. 4 and Table 1). The GIA method used was the same as described in ref. 11. IgGs were purified from the sera (11) of two rabbits that had been vaccinated with recombinant *PfAMA1* that corresponded to the sequence of the 3D7 *P. falciparum* clone. Additionally, anti-*PfAMA1* IgGs were purified from a pool of sera obtained from rabbits vaccinated with the *PfAMA1*-FVO recombinant protein. Purified anti-*PfAMA1* IgGs (0.75 or 1.5 mg/ml for anti-*PfAMA1*-3D7 or FVO, respectively) were incubated with cultured *P. falciparum*-parasitized erythrocytes, and the parasite growth after 40 h of culture was determined by a biochemical assay specific for parasite lactate dehydrogenase. The results of the GIA experiments were expressed as percentage inhibition, which was calculated as follows: $100 - [(\text{OD}_{650} \text{ of infected RBCs with tested IgG} - \text{OD}_{650} \text{ of normal RBCs only}) / (\text{OD}_{650} \text{ of infected RBCs without any IgG} - \text{OD}_{650} \text{ of normal RBCs only})] \times 100$.

Data Analysis. SNP identification and verification. DNA sequences were aligned by using SEQUENCHER 4.5 (Gene Codes). The quality of the DNA sequences and all SNPs was assessed by visual inspection.

Haplotype construction and genetic diversity analysis. Each unique *PfAMA1* sequence was treated as a separate haplotype, and the haplotype files were created by using DNASP 4.1 (24). LD across the *PfAMA1* gene was analyzed by using the same software. ARLEQUIN was used to perform the AMOVA test to evaluate the genetic variance present both between and among *PfAMA1* sequences from different geographic regions.

Cluster (population) analysis. To determine whether our samples could be grouped into genetic clusters and to infer the number of clusters that best fit the data, we used the Bayesian clustering method implemented in the STRUCTURE program (13, 14). The log-probability of the data, given a certain value of K [$\ln P(D|K)$] was calculated and compared across a range of K values to determine which one provided the best fit to the data. Markov Chain Monte Carlo searches consisted of 50,000 "burn-in" steps, followed by 100,000 iterations. We performed 10 replicate runs at each K from 1 to 12 under the admixture model with correlated allele frequencies.

Statistical analysis. The association between SNPs and GIA activity was assessed by using the χ^2 test including a permutation test of 1,000 iterations as described (15).

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