The Genetic Architecture of Biological Age in Nine Human Organ 1

2 **Systems**

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93 eMethod 1: The definition of genomic loci, independent significant SNP, lead SNP,

94 candidate SNP

- FUMA defined the significant independent SNPs, lead SNPs, candidate SNPs, and genomic risk
 loci as follows (<u>https://fuma.ctglab.nl/tutorial#snp2gene</u>):
- 97 Independent significant SNPs
- 98 They are defined as SNPs with $P \le 5 \times 10^{-8}$ that are independent of each other at the user-defined
- 99 r^2 (set to 0.6 in the current study). We further describe *candidate SNPs* as those in linkage
- 100 disequilibrium (LD) with independent significant SNPs. FUMA then queries each candidate SNP
- 101 in the GWAS Catalog to check whether any clinical traits have been reported to be associated with
- 102 previous GWAS studies.
- 103 Lead SNPs
- 104 Lead SNPs are defined as independent significant SNPs that are also independent of each other at
- 105 $r^2 < 0.1$. If multiple independent significant SNPs are correlated at $r^2 \ge 0.1$, then the one with the
- 106 lowest individual *P*-value becomes the lead SNP. If r^2 threshold is set to 0.1 for the independent
- significant SNPs, then they would constitute the identical set as the lead SNPs by definition.
- 108 FUMA thus advises setting r^2 to be 0.6 or higher.
- 109 Genomic risk loci
- 110 FUMA defines genomic risk loci to include all independent signals physically close or overlapping
- 111 in a single locus. First, independent significant SNPs dependent on each other at $r^2 \ge 0.1$ are
- 112 assigned to the same genomic risk locus. Then, independent significant SNPs with less than the
- 113 user-defined distance (250 kb by default) away from one another are merged into the same
- 114 genomic risk locus the distance between two LD blocks of two independent significant SNPs is
- 115 the distance between the closest points from each LD block. Each locus is represented by the SNP
- 116 within the locus with the lowest *P*-value.
- 117

eText 1: Sensitivity check analyses for the main GWAS of the nine BAGs using European ancestry

- 120 We fully considered linkage disequilibrium and only included the independent significant SNPs
- 121 in this sensitivity check analysis. We exemplified this analysis in the split-sample GWAS. We
- 122 first used the Plink *clump* command (--*clump-p1* 0.00000005 --*clump-p2* 0.05 --*clump-r2* 0.60 --
- *clump-kb 250*) to define the independent significant SNPs for the split1 and split2 GWAS. We
- 124 then included all the unique independent significant SNPs in either of the two split GWASs. We
- 125 then calculated three statistics to scrutinize the concordance of the two split GWASs:
- *r*-β: Pearson's *r* between the two sets of β coefficients from the two splits; *C*-β: concordance rate of the sign of the β coefficients from the two splits -
 - C-β: concordance rate of the sign of the β coefficients from the two splits if the same SNP exerts the same protective/risk effect between the two splits;
 - P- β : the difference between the two sets of β coefficients from the two splits if the two sets of β coefficients (mean) statistically differ.

The two metrics were calculated for sex-stratified, fastGWA, and non-Euroepan GWASsensitivity check analyses.

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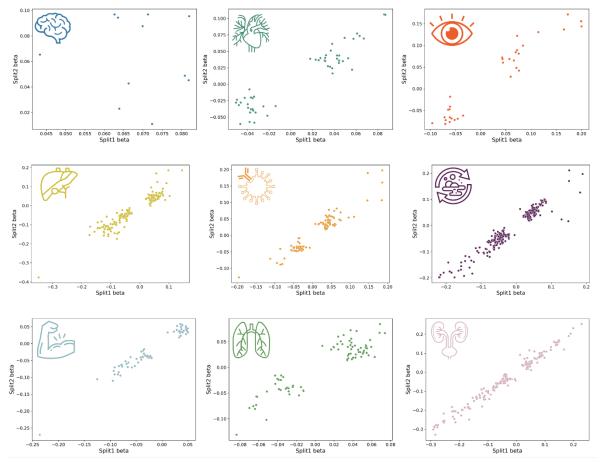
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134 Split-sample GWAS

135 **P-values:**

- 136 In the split1 GWAS, we found 6, 28, 20, 117, 62, 160, 37, 40, and 127 independent significant
- 137 SNPs for the brain, cardiovascular, eye, hepatic, immune, metabolic, musculoskeletal,
- pulmonary, and renal BAGs, and 5, 30, 21, 110, 55, 164, 45, 43, and 139 independent significant
 SNPs in split2 GWAS.
- 140 For the brain BAG, we obtained an $r-\beta$ of -0.06 (P-value=0.84; N=11), but the two sets of
- 141 coefficients did not statistically differ (P- β =0.70). All the 11 independent significant SNPs
- 142 showed the same direction of effect (*C*- β =1). The low *r*- β was likely due to small sample sizes in
- 143 the brain BAG. For all the other 8 BAGs, we obtained significantly h70h *r*- β estimates (0.90<*r*-
- 144 $\beta < 0.99$; P-value $< 1 \times 10^{-19}$). The two sets of coefficients did not statistically differ (*P*- $\beta > 0.48$). All
- 145 independent significant SNPs showed the same direction of effect ($C-\beta=1$). Detailed results of
- 146 these SNPs are presented in **Supplementary eFile 2** for split-sample GWAS. The scatter plot of
- 147 the independent SNPs' β coefficients is shown below.

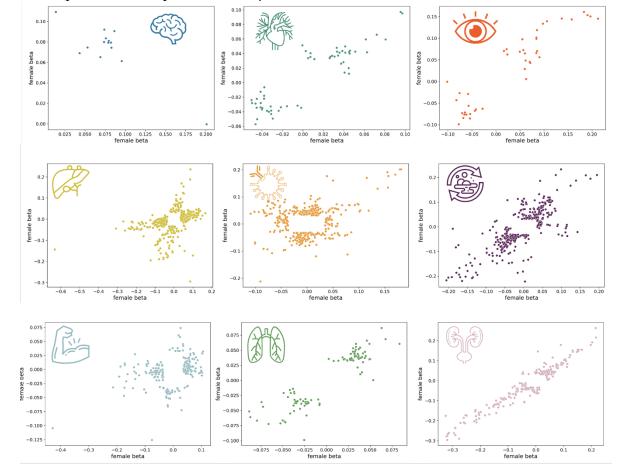


 $\frac{148}{149}$ The figures present the scatter plots for the two sets of beta coefficients estimated from different

150 splits.

151 Sex-stratified GWAS

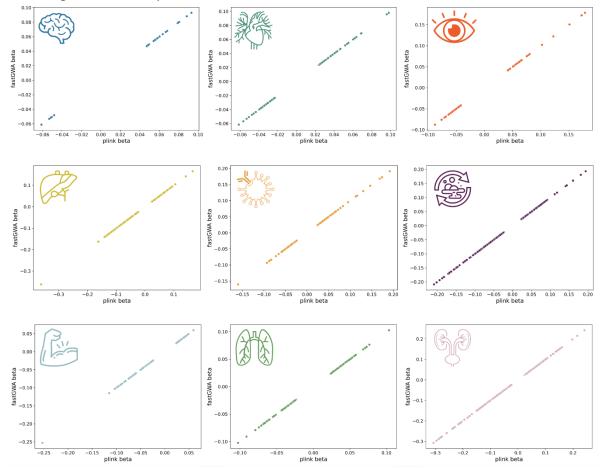
- 152 In the female GWAS, we found 7, 24, 23, 286, 116, 142, 153, 30, and 131 independent
- 153 significant SNPs for the brain, cardiovascular, eye, hepatic, immune, metabolic, musculoskeletal,
- pulmonary, and renal BAGs, and 7, 38, 22, 126, 275, 286, 42, 71, and 167 independentsignificant SNPs in the male GWAS.
- 155 significant SIVES in the male OWAS.
- 156 For the brain BAG, we obtained an $r-\beta$ of -0.869 (P-value=5.29x10⁻⁵, N=14), but the two
- 157 sets of coefficients did not statistically differ (P- β =0.66). 13 out of the 14 independent significant
- 158 SNPs showed the same direction of effect (C- β =0.93). The one independent significant SNP
- 159 (rs1634777) that had the opposite β sign in males compared to females was because the β
- 160 coefficient was close to 0 (β =-0.000417162) and was not statistically significant (P-value=0.99).
- For all the other 8 BAGs, we obtained significantly high $r-\beta$ estimates (0.30< $r-\beta<$ 0.96; Pvalue<2.57x10⁻⁷). The two sets of coefficients did not statistically differ ($P-\beta>$ 0.40), except for
- the immune BAG (P- β =0.013). Most independent significant SNPs showed the same direction of
- 164 effect ($C-\beta > 0.89$), except for the immune (0.54) and musculoskeletal BAGs (0.70). Detailed
- results of these SNPs are presented in **Supplementary eFile 3** for sex-stratified GWAS. The
- 166 scatter plot of the independent SNPs' β coefficients is shown below.



168 The figures present the scatter plots for the two sets of beta coefficients estimated from different 169 genders.

170 fastGWA vs PLINK GWAS

- 171 In the PLINK GWAS, we found 27, 124, 69, 289, 217, 422, 147, 272, and 331 independent
- 172 significant SNPs for the brain, cardiovascular, eye, hepatic, immune, metabolic, musculoskeletal,
- 173 pulmonary, and renal BAGs, and 27, 124, 69, 292, 218, 422, 148, 269, and 333 independent
- 174 significant SNPs in fastGWA GWAS.
- 175 For all the nine BAGs, we found almost perfect concordance between the PLINK and
- 176 fastGWA GWASs using the three proposed metrics ($r-\beta=1$; $C-\beta=1$; $P-\beta=1$). Detailed results of
- 177 these SNPs are presented in **Supplementary eFile 4** for method-specific GWAS. The scatter plot
- 178 of the independent SNPs' β coefficients is shown below.



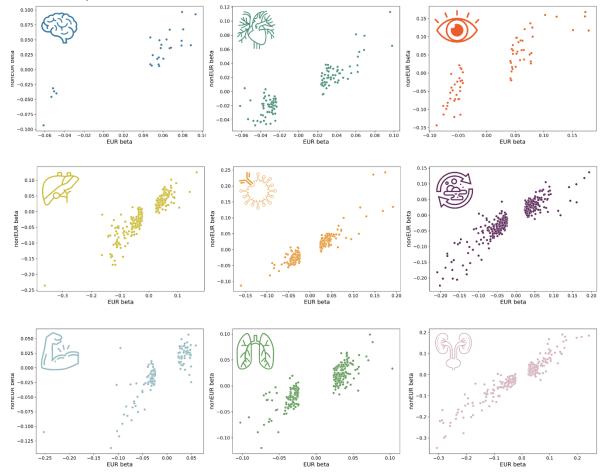


180 The figures present the scatter plots for the two sets of beta coefficients estimated from different

181 GWAS methods.

182 European vs. non-European GWAS

- 183 In the European GWAS, we found 27, 124, 69, 289, 217, 422, 147, 272, and 331 independent
- 184 significant SNPs for the brain, cardiovascular, eye, hepatic, immune, metabolic, musculoskeletal,
- pulmonary, and renal BAGs, and 0, 2, 1, 16, 2, 23, 1, 1, and 35 independent significant SNPs in
- 186 non-European GWAS (with much smaller sample sizes).
- 187 For all the nine BAGs, we found a high concordance between the European and non-
- Euroropean GWASs using the three proposed metrics ($0.85 \le r-\beta \le 0.95$; $0.89 \le C-\beta \le 1$). The two
- 189 sets of β coefficients did not significantly differ (*P*- β >0.12). Detailed results of these SNPs are
- 190 presented in Supplementary eFile 5 for ancestry-specific GWAS. The scatter plot of the
- 191 independent SNPs' β coefficients is shown below.



193 The figures present the scatter plots for the two sets of beta coefficients estimated from different

194 GWAS ancestry groups.

195 eText 2: Phenome-wide association query using the GWAS Atlas platform

196 To comprehensively encompass the genetic landscape reported in previous literature, we 197 comparatively conducted a phenome-wide association guery using the GWAS Atlas platform

198 (https://atlas.ctglab.nl/PheWAS). We applied the same P-value threshold search criteria as those

used in the EMBL-EBI GWAS Catalog (P-value $<1x10^{-5}$). These findings are presented as a

supplementary search to complement the results shown in Fig. 2a. The details of this

201 comparative search are presented in **Supplementary eFile 7**.

It's important to note that the two platforms may exhibit variations in their curated GWAS datasets, the genome build versions utilized, and the specific P-value thresholds set for their search analyses by default. We tried our best to harmonize the query criteria. Hence, this comparative search was not exhaustive, and the results may differ. Rather, we intend to offer a broad overview of the two platforms commonly employed for phenome-wide association studies (PheWAS). Given the rapid updates in GWAS summary statistics in the field, it's worth mentioning that this comparative search was originally conducted on October 23, 2023, and

revised on January 13, 2024, based on the reviewer's comments. The results from the GWAS

210 Atlas are shown in the figure below.

In the GWAS Atlas platform, we identified 8,576 significant associations between the identified loci in our GWAS and clinical traits. The genomic loci associated with the brain BAG

exhibited the highest proportion of associations (109 out of 308) with traits related to the brain.

The brain BAG loci were also largely linked to many other traits related to other organ systems,

evidencing inter-organ connections, including metabolic (N=78/308), lifestyle factor (N=13/308), neurodegenerative traits (N=5/308), and immune (N=35/308). For the eye BAG loci, most

- associations were found in the musculoskeletal (N=139/279), eye (N=14/279), and mental traits (N=19/279), among many others.
- 218 (N=19/2/9), among many others.

For the seven body organ systems, among the loci associated with the cardiovascular BAG, most associations were observed with musculoskeletal traits (N=249/611) and were intervalent traits (166/611) and

cardiovascular traits (166/611). 29 out of 1009 associations were related to hepatic traits (e.g.,
blood protein, cirrhosis, and bilirubin) for the hepatic BAG loci. Among the loci associated with

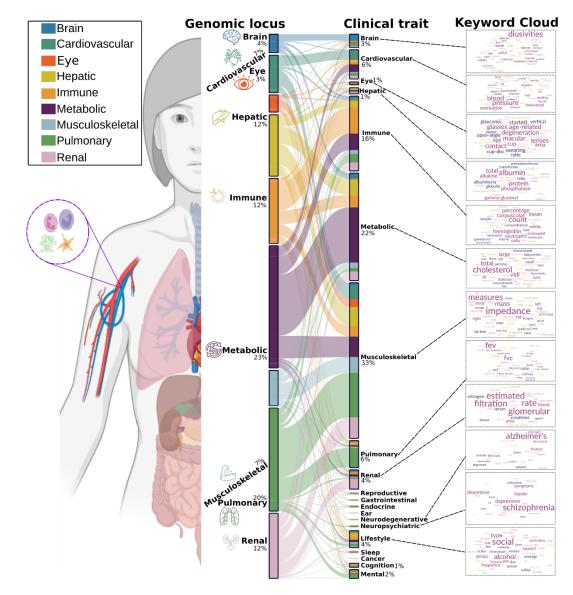
the immune BAG, abundant associations were found enriched in immune (N=467/1062) traits.

For the metabolic BAG loci, most associations were observed in metabolic traits (N=993/1990).

224 For the metabolic BAG loci, most associations were observed in metabolic trans (*N*-993/1990). 225 We found a significant intertwining of musculoskeletal systems with other organ systems in the

GWAS Atlas platform. Details of the phenome-wide associations are presented in

227 Supplementary eFile 7.



- Figure. We queried the clumped independent significant SNPs using the PheWAS functionaly
- 232 provided by the GWAS Atlas platforms.

233 eText 3: Sensitivity check analyses for the causality between the hepatic BAG and

- 234 musculoskeletal BAG
- 235

A) Sensitivity analyses on body weight for the bi-directional causality between the hepatic and musculoskeletal BAGs

We conducted a revised Mendelian randomization analysis by introducing body weight as a covariate in the split-sample GWASs for hepatic and musculoskeletal BAGs. In this approach, we employed hepatic BAG as the exposure variable in split1 GWAS and musculoskeletal BAG as the outcome variable in split2 GWAS. Likewise, we reversed the roles, using musculoskeletal BAG as the exposure variable in split1 GWAS and hepatic BAG as the outcome variable in split2 GWAS, thus assessing the inverse causal relationship. This methodology ensured the

- absence of overlapping populations while effectively controlling for the influence of body
 weight.
- Compared to the original results, this bi-directional causality persisted while adjusting the body weight as a covariate, shown in the tables below:
- 248

GWAS without and with body weight as a covariate for the causal relationship from the hepatic BAG to the musculoskeletal BAG.

Weight	Outcome (split2)	Exposure (split1)	Method	nSNP	BETA	SE	Р	OR	CI_low	CI_high
	Musculos keletal	Hepatic	MR Egger	19	0.51783 336	0.1407078 6	0.0018559 3	1.6783872 5	1.2738527 4	2.2113888 6
	Musculos keletal	Hepatic	Weighte d median	19	0.35295 633	0.0660643 7	9.16E-08	1.4232689 9	1.2504083 2	1.6200264 9
Ν	Musculos keletal	Hepatic	Inverse variance weighte d	19	0.38344 296	0.0783413 7	9.85E-07	1.4673278 5	1.2584664 4	1.7108529 5
	Musculos keletal	Hepatic	Simple mode	19	0.1573315 4	0.1070005 8	0.1587233 2	1.1703835 7	0.9489590 8	1.4434739 5
	Musculoske letal	Hepatic	Weighte d mode	19	0.4661495 3	0.0812176 2	1.93E-05	1.5938453 1	1.3592906 7	1.8688739 1
	Musculoske letal	Hepatic	MR Egger	18	0.5151701 1	0.1424506 5	0.0023171 1	1.6739232 3	1.2661323 2	2.2130538 4
	Musculoske letal	Hepatic	Weighte d median	18	0.3561385 7	0.0600239 8	2.97E-09	1.4278053 9	1.2693330 1	1.6060625 8
Y	Musculoske letal	Hepatic	Inverse variance weighte d	18	0.3892653 7	0.0792834	9.12E-07	1.4758961 5	1.2634801	1.7240235 6
	Musculoske letal	Hepatic	Simple mode	18	0.2469739 9	0.1129377 6	0.0430251 8	1.2801458 1	1.0259468 9	1.5973276 1
	Musculoske letal	Hepatic	Weighte d mode	18	0.4754274 6	0.0692544 4	2.74E-06	1.6087017 1	1.4045103 7	1.8425789 1

252 253

2) GWAS without and with body weight as a covariate for the causal relationship from the musculoskeletal BAG to the hepatic BAG.

Weight	Outcome (split2)	Exposure (split1)	Method	nSNP	BETA	SE	Р	OR	CI_low	CI_high
	Hepatic	Musculos keletal	MR Egger	9	1.82825 01	0.2429396 5	0.0001343 9	6.2229874 9	3.8654897	10.018283 9
N	Hepatic	Musculos keletal	Weighte d median	9	0.92114 305	0.1376895 4	2.23E-11	2.5121602 8	1.9179781	3.2904178
	Hepatic	Musculos keletal	Inverse variance weighte d	9	1.02402 966	0.1810336 5	1.54E-08	2.7843923 5	1.9526818	3.9703554 1

	Hepatic	Musculos keletal	Simple mode	9	1.2057731 1	0.1862016 1	0.000193	3.3393397 6	2.3182624 5	4.8101499 5
	Hepatic	Musculo skeletal	Weighte d mode	9	1.2583341 3	0.1303476 9	1.10E-05	3.5195534 7	2.7260472	4.5440360 1
	Hepatic	Musculo skeletal	MR Egger	9	1.6909235 2	0.3591685 5	0.0021882 7	5.4244880 2	2.6830471 8	10.967034 2
	Hepatic	Musculo skeletal	Weighte d median	9	0.8540800 9	0.1319770 3	9.71E-11	2.3492123 2	1.8137655 8	3.0427297 8
Y	Hepatic	Musculo skeletal	Inverse variance weighte d	9	0.9917996 2	0.1976792 3	5.24E-07	2.6960820 4	1.8300592 3	3.9719252 1
	Hepatic	Musculo skeletal	Simple mode	9	1.2366568 7	0.1585173 2	5.23E-05	3.4440801 9	2.5242977 7	4.6990052
	Hepatic	Musculo skeletal	Weighte d mode	9	1.2762879 4	0.1538585	3.36E-05	3.5833135 3	2.6504389 9	4.8445317 4

255 B) Sensitivity analysis for the hepatic BAG on musculoskeletal BAG excluding the APOE 256 gene

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We conducted a revised Mendelian randomization analysis by excluding SNPs within the APOE

- gene for the causal relationship from the hepatic BAG to the musculoskeletal BAGs; all other 258
- significant causality did not involve the two common APOE gene SNPs (rs429358 and rs7412). 259
- In this approach, we employed hepatic BAG as the exposure variable in split1 GWAS and 260
- musculoskeletal BAG as the outcome variable in split2 GWAS. 261
- 262 Compared to the original results, this causality persisted while excluding the SNP (rs429358)
- as an IV, shown in the tables below: 263

264	GWAS without and with rs429358 as an IV for the causal relationship from the hepatic
265	BAG to the musculoskeletal BAG.

rs429358	Outcom e (split2)	Exposure (split1)	Method	nSNP	BETA	SE	Р	OR	CI_low	CI_high
	Musculo skeletal	Hepatic	MR Egger	18	0.51522 659	0.1273661 6	0.0009384 4	1.6740177 8	1.3041988 1	2.1487027 1
	Musculo skeletal	Hepatic	Weighte d median	18	0.36478 773	0.0633960 8	8.71E-09	1.4402082 7	1.2719248 9	1.6307565 7
Ν	Musculo skeletal	Hepatic	Inverse variance weighte d	18	0.41660 503	0.0714601 4	5.55E-09	1.5168033	1.3185638 5	1.7448470 6
	Musculo skeletal	Hepatic	Simple mode	18	0.1592445 4	0.0971027 4	0.1193850 8	1.1726246 6	0.9694010 9	1.4184516 7
	Musculosk eletal	Hepatic	Weighte d mode	18	0.4594232 5	0.0789993 2	2.07E-05	1.5831606 3	1.3560615 5	1.8482919 1
	Musculosk eletal	Hepatic	MR Egger	19	0.5178333 6	0.1407078 6	0.0018559 3	1.6783872 5	1.2738527 4	2.211388 6
	Musculosk eletal	Hepatic	Weighte d median	19	0.3529563 3	0.0660643 7	9.16E-08	1.4232689 9	1.2504083 2	1.6200264 9
Y	Musculosk eletal	Hepatic	Inverse variance weighte d	19	0.3834429 6	0.0783413 7	9.85E-07	1.4673278 5	1.2584664 4	1.7108529 5
	Musculosk eletal	Hepatic	Simple mode	19	0.1573315 4	0.1070005 8	0.1587233 2	1.1703835 7	0.9489590 8	1.4434739 5
	Musculosk eletal	Hepatic	Weighte d mode	19	0.4661495 3	0.0812176 2	1.93E-05	1.5938453 1	1.3592906 7	1.8688739 1

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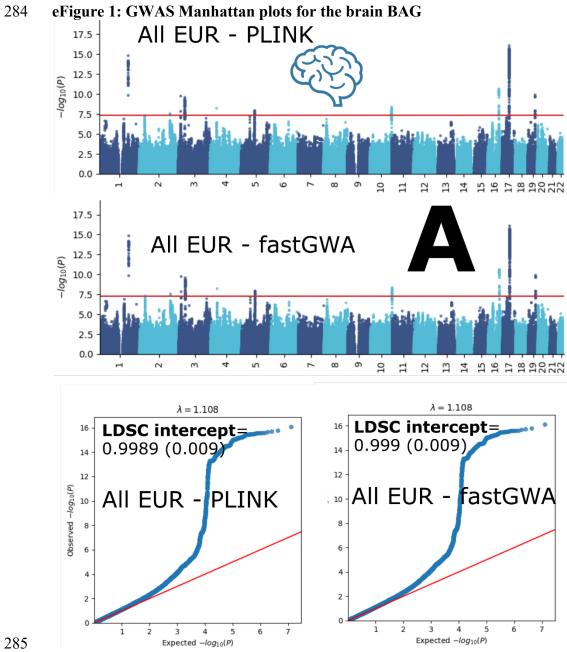
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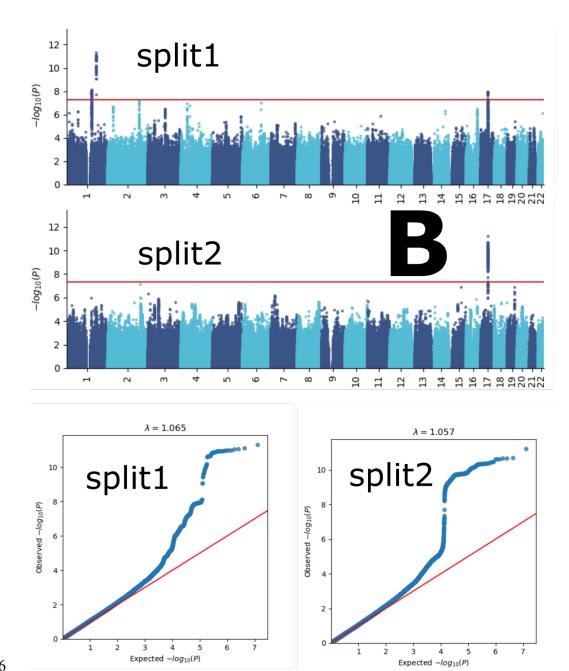
268 C) Sensitivity analyses for metabolic BAG on body weight

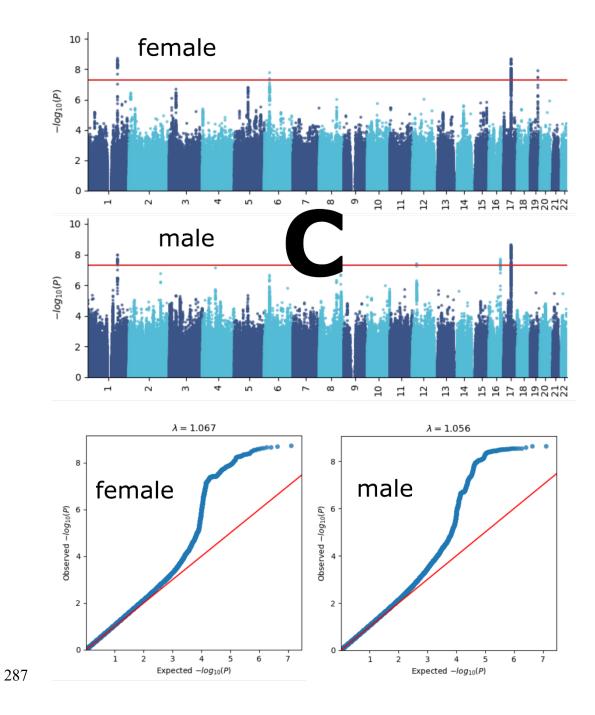
269 We showcased sensitivity analyses to investigate potential violations of the three IV assumptions

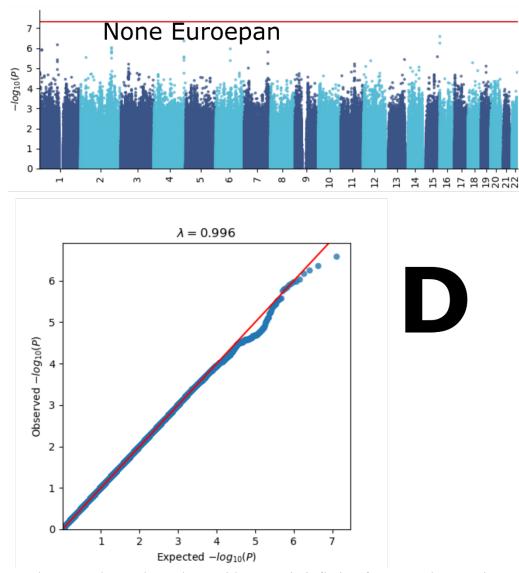
(Method 3i). To illustrate this, we showcased the sensitivity analysis results for the causal effect 270

- of the metabolic BAG on body weight (Supplementary eFigure 33). In a leave-one-out
- analysis, no single SNP overwhelmingly drove the overall effect. There was evidence for minor
- heterogeneity¹ of the causal effect amongst SNPs (Cochran's Q value=57.33, P-value $<1x10^{-5}$).
- 274 Some SNPs exerted opposite causal effects compared to the model using all SNPs. The scatter
- plot indicated two obvious SNP outliers (rs117233107 and rs33959228), and the funnel plot
- showed slight asymmetry. Finally, the MR Egger estimator allows for pleiotropic effects
- independent of the effect on the exposure of interest (i.e., the InSIDE assumption²). Our results
- 278 from the Egger estimator showed a small but not significant positive intercept (3.62×10^{-1})
- $^{4\pm1.67 \times 10^{-3}}$, P-value=0.83), which may indicate that the IVW estimate is not likely biased². We
- 280 re-analyzed the IVW MR analyses by excluding the two outliers identified in **Supplementary**
- 281 **eFigure 33** (rs117233107 and rs33959228), which led to a similar OR [0.94 (0.91, 0.97) vs. 0.95
- 282 (0.92, 0.98)] and a less significant P-value $[6.9x10^{-4} \text{ vs. } 1.2x10^{-3}]$.







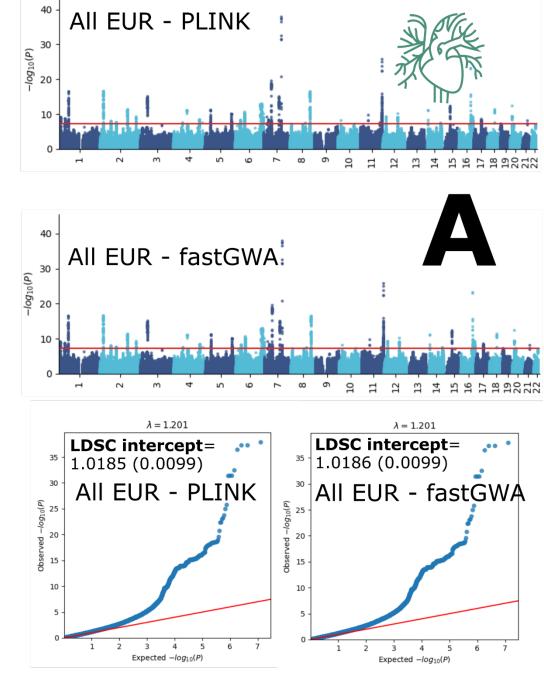


288 289 Manhattan and QQ plots, along with genomic inflation factors and LDSC intercepts, are

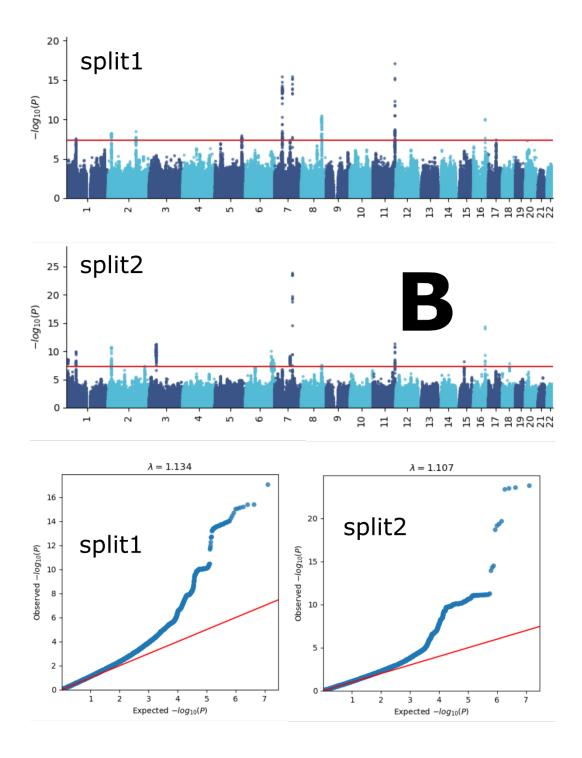
290 displayed for the primary GWAS conducted on individuals of European ancestry (*N*=30,062) 291 using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS

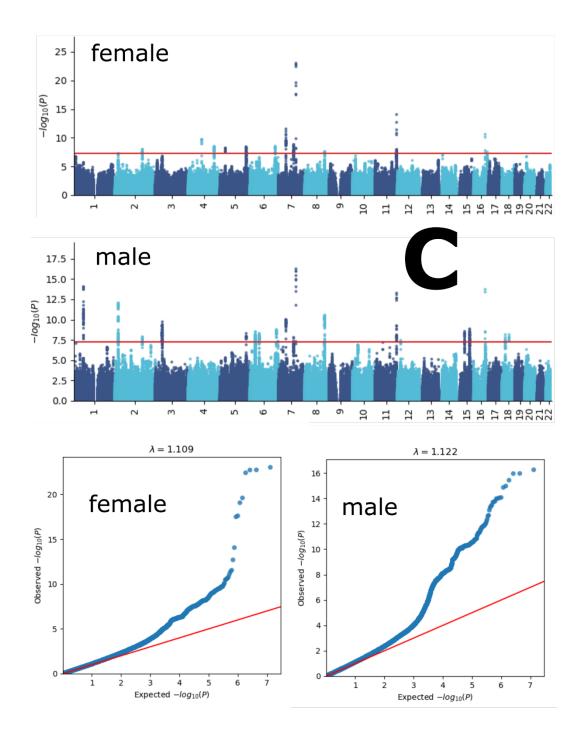
292 (split1 and split2, B), sex-stratified GWAS (female and male, C), and GWAS involving non-

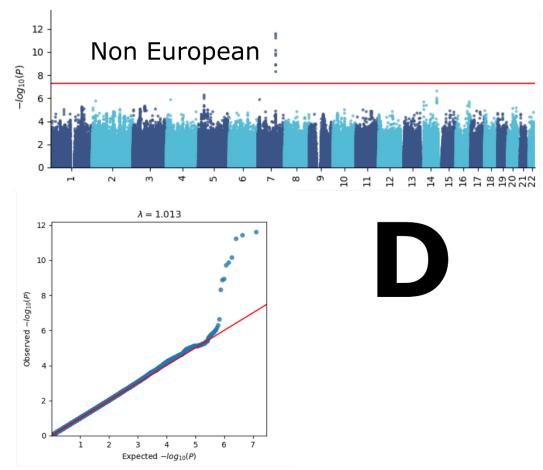
293 European ancestry populations (N=4465, **D**).













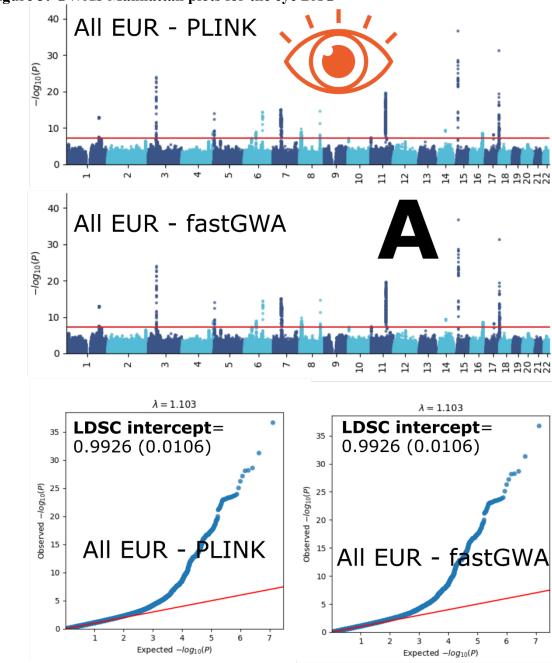
298 299 Manhattan and QQ plots, along with genomic inflation factors and LDSC intercepts, are

300 displayed for the primary GWAS conducted on individuals of European ancestry (N=111,386)

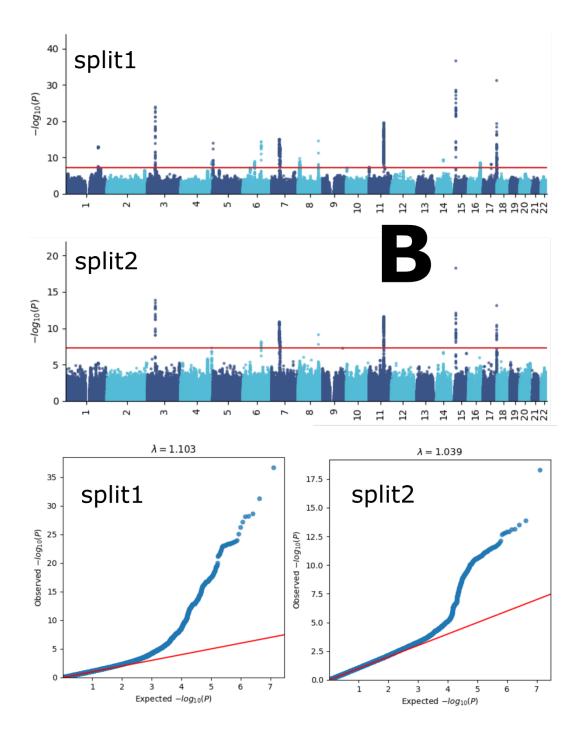
using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS 301

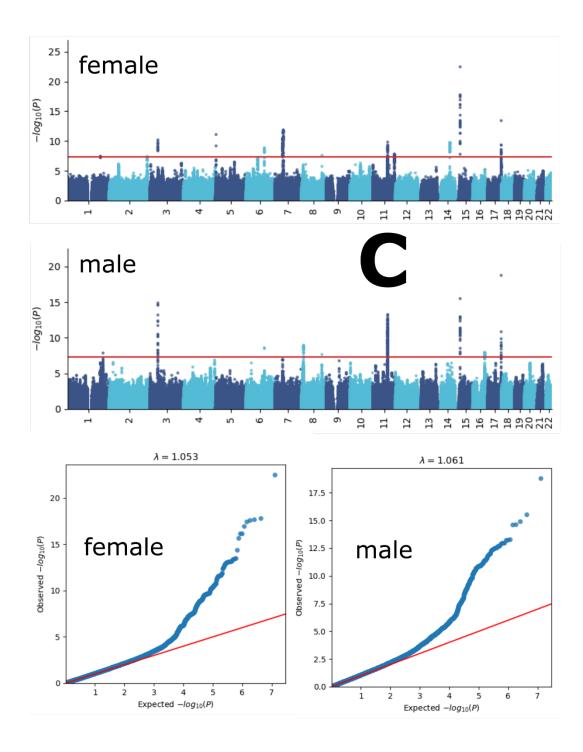
302 (split1 and split2, B), sex-stratified GWAS (female and male, C), and GWAS involving non-

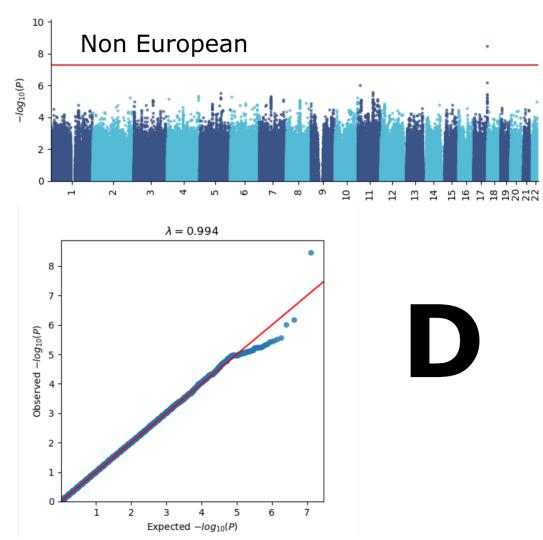
303 European ancestry populations (*N*=20,408, **D**).











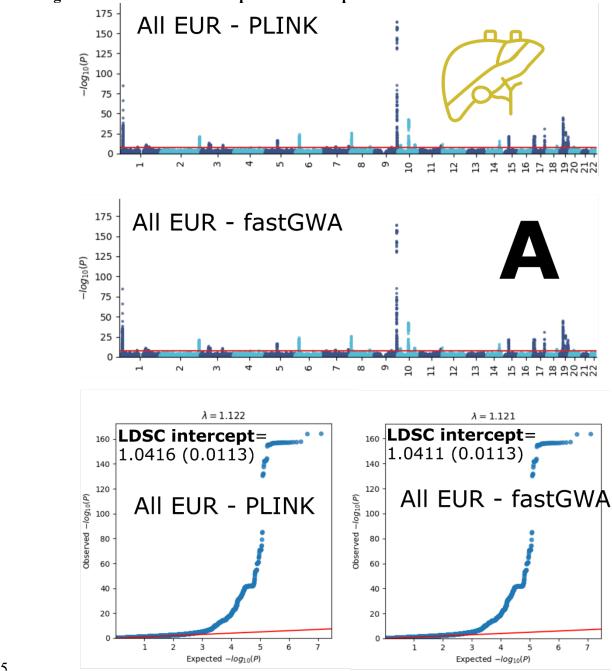
309 Manhattan and QQ plots, along with genomic inflation factors and LDSC intercepts, are

displayed for the primary GWAS conducted on individuals of European ancestry (*N*=36,004)

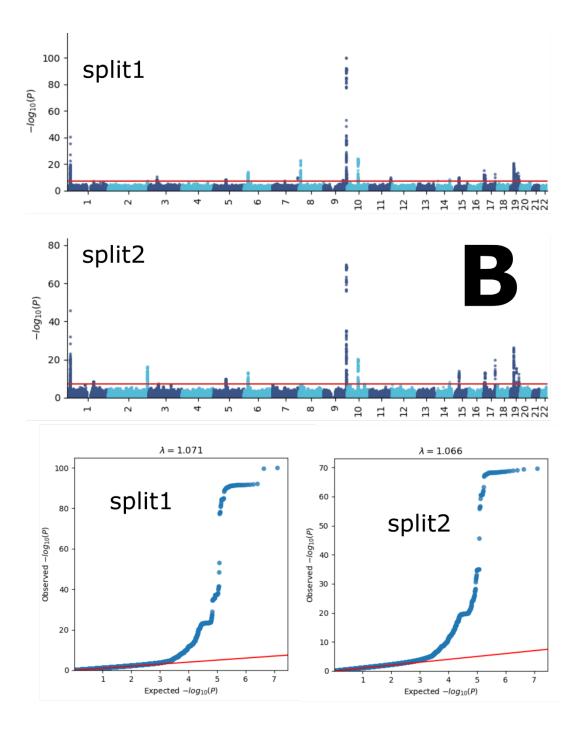
311 using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS

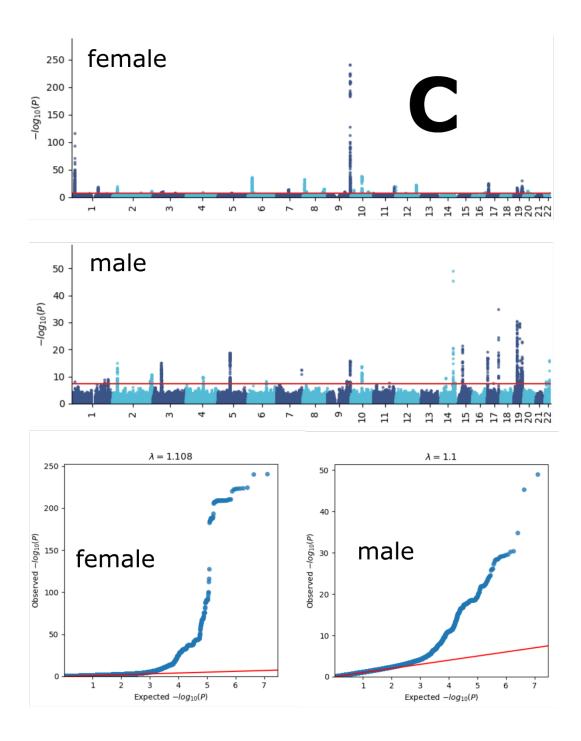
312 (split1 and split2, B), sex-stratified GWAS (female and male, C), and GWAS involving non-

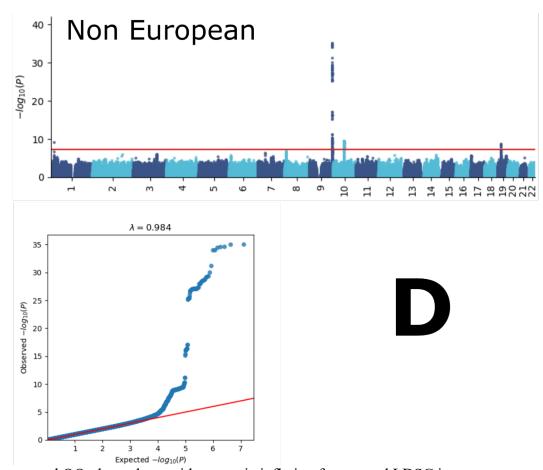
313 European ancestry populations (*N*=3407, **D**).





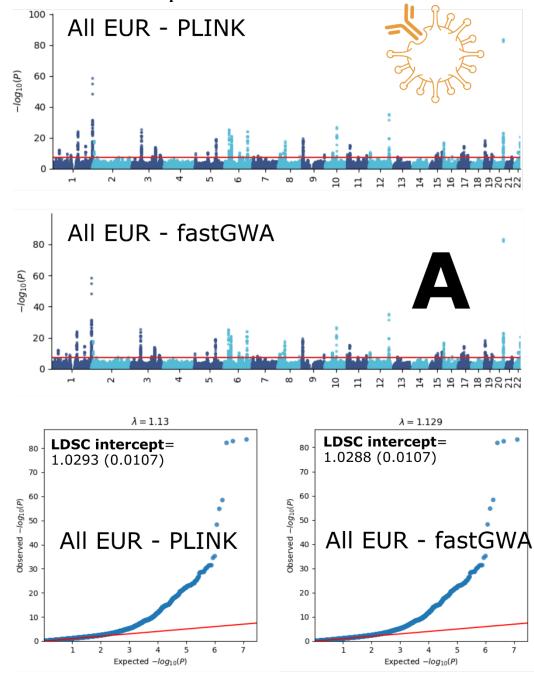




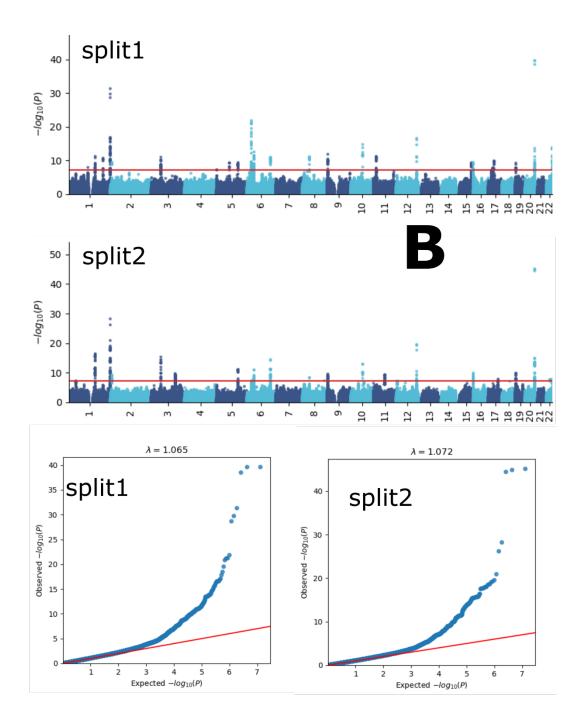


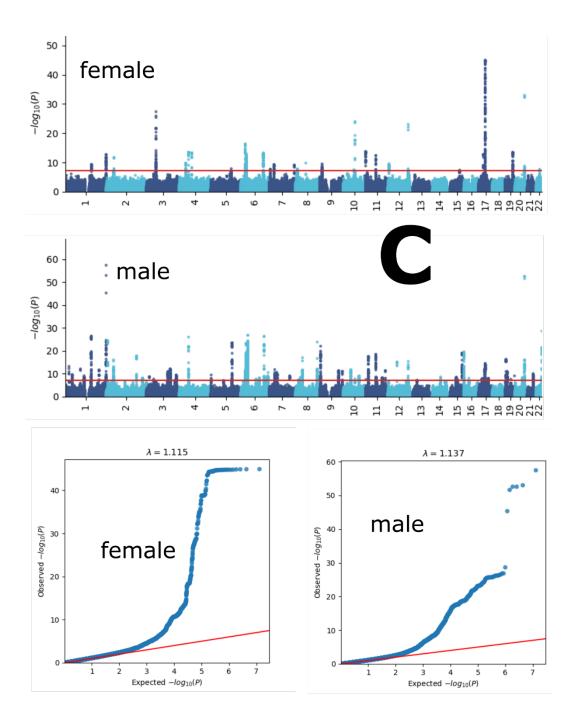
318 319 Manhattan and QQ plots, along with genomic inflation factors and LDSC intercepts, are

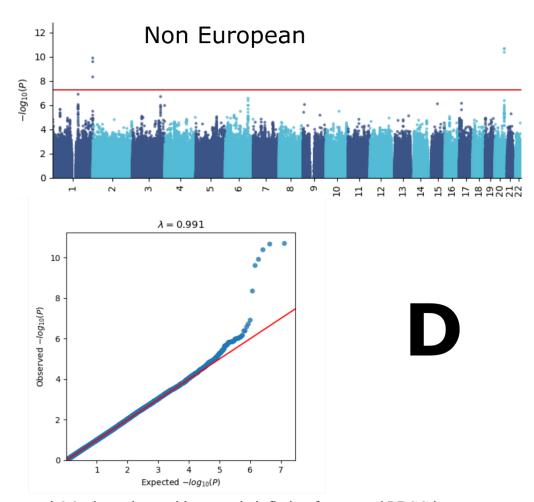
- displayed for the primary GWAS conducted on individuals of European ancestry (N=111,386) 320
- using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS 321
- (split1 and split2, B), sex-stratified GWAS (female and male, C), and GWAS involving non-322
- 323 European ancestry populations (*N*=20,408, **D**).

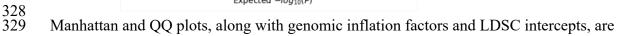




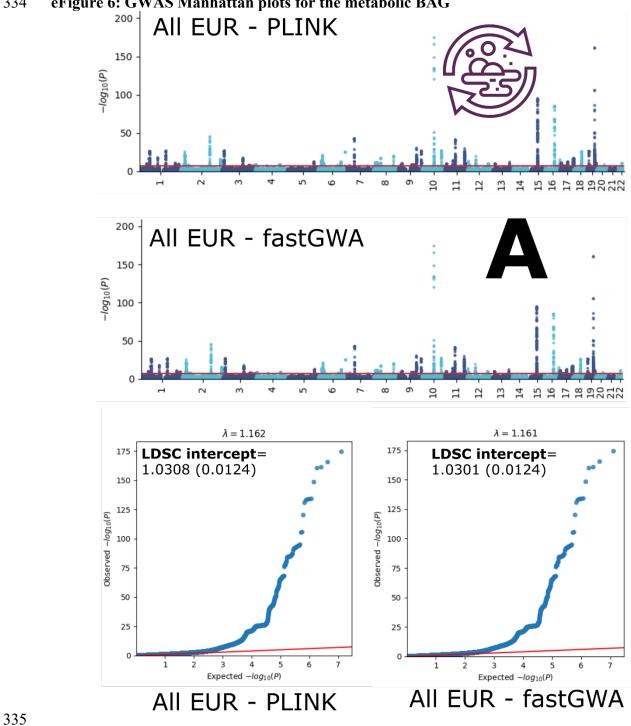




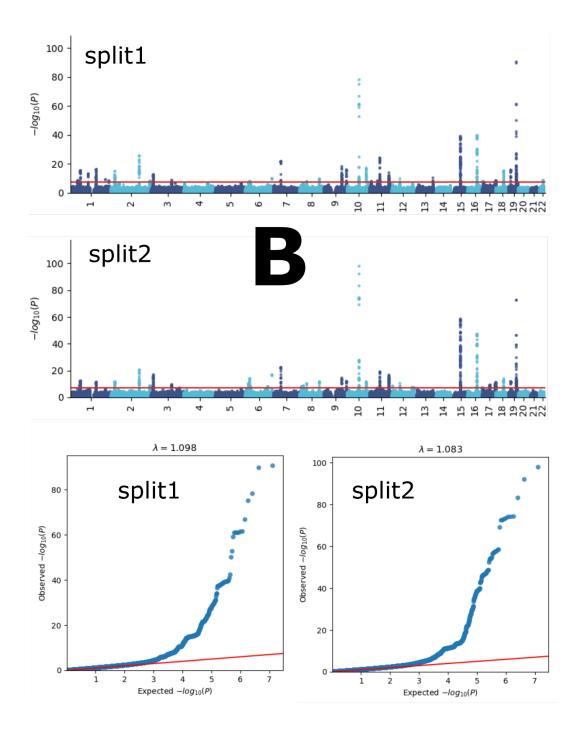


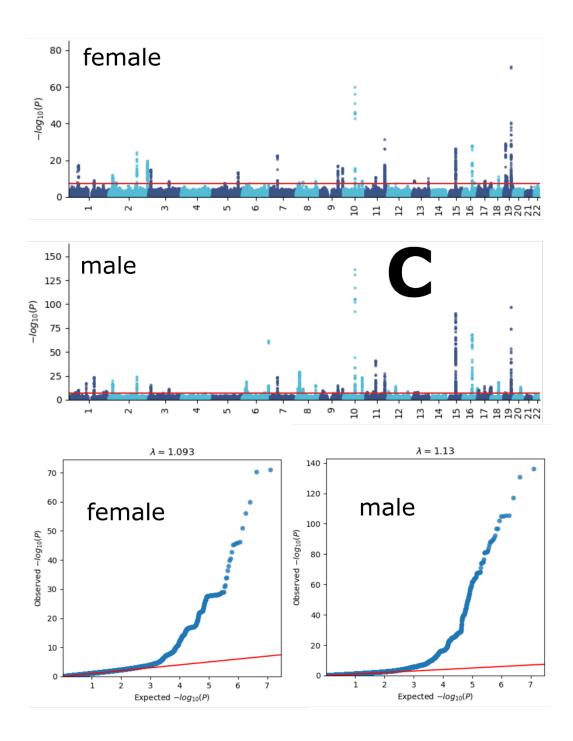


- 330 displayed for the primary GWAS conducted on individuals of European ancestry (N=111,386)
- using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS 331
- 332 (split1 and split2, B), sex-stratified GWAS (female and male, C), and GWAS involving non-
- European ancestry populations (*N*=20,408, **D**). 333

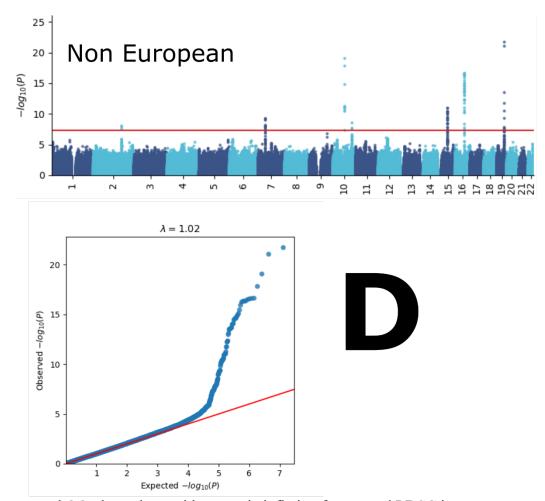


eFigure 6: GWAS Manhattan plots for the metabolic BAG











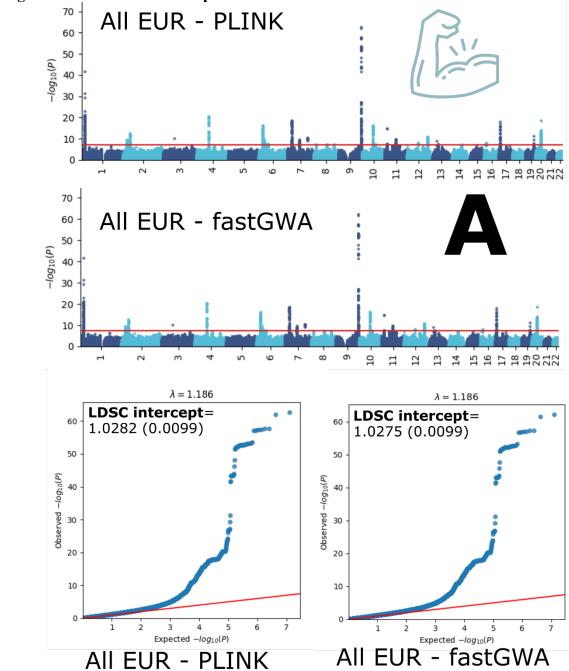
Manhattan and QQ plots, along with genomic inflation factors and LDSC intercepts, are

340 displayed for the primary GWAS conducted on individuals of European ancestry (*N*=111,386)

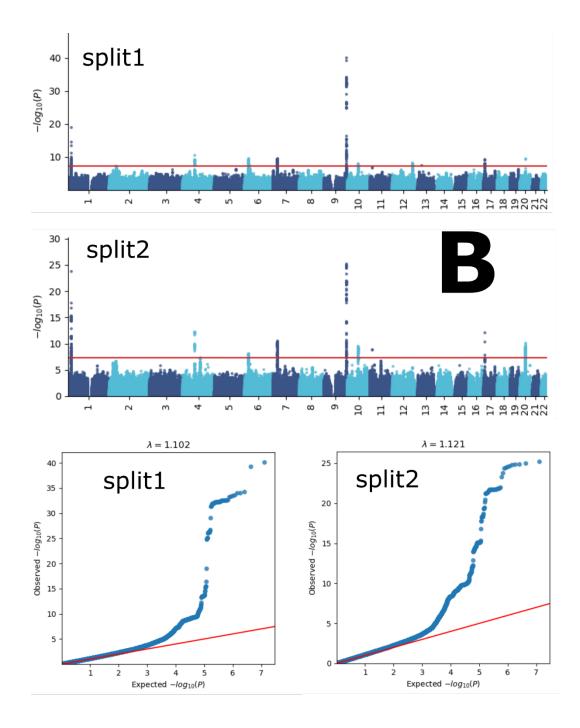
341 using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS

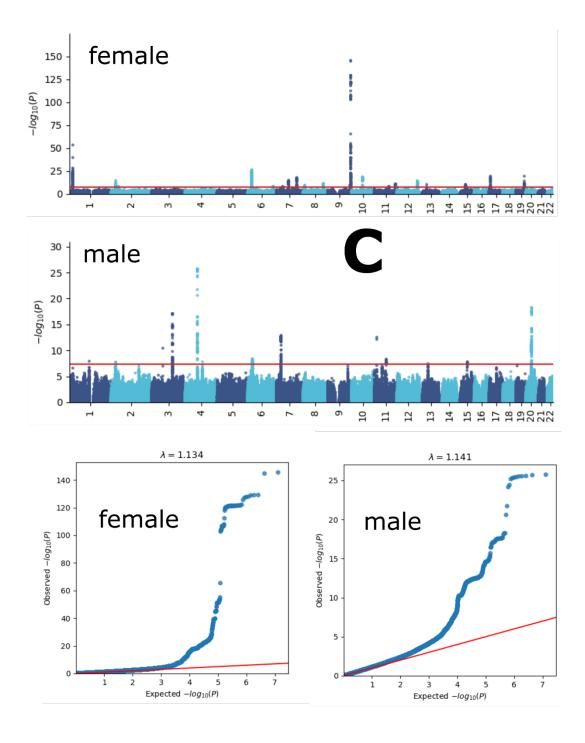
342 (split1 and split2, **B**), sex-stratified GWAS (female and male, **C**), and GWAS involving non-

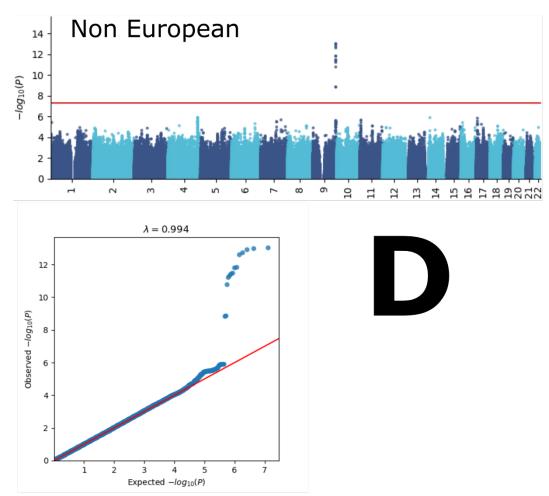
343 European ancestry populations ($N=20,408, \mathbf{D}$).



344 eFigure 7: GWAS Manhattan plots for the musculoskeletal BAG







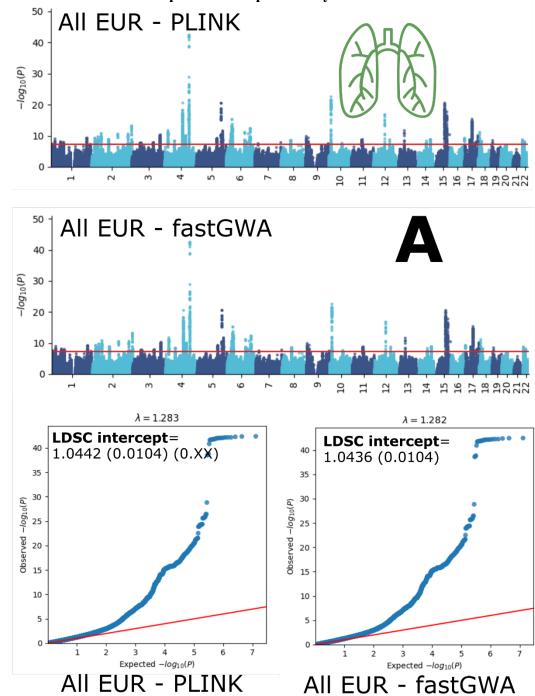
348 349 Manhattan and QQ plots, along with genomic inflation factors and LDSC intercepts, are

displayed for the primary GWAS conducted on individuals of European ancestry (N=111,386) 350

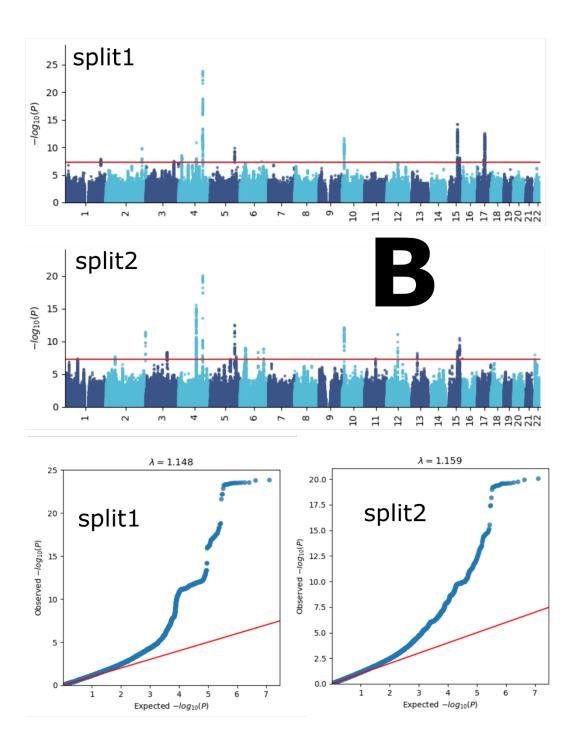
351 using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS

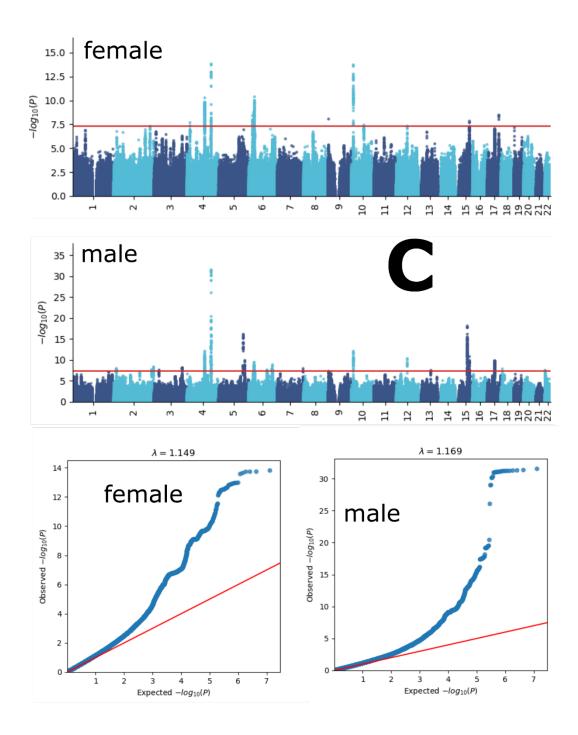
352 (split1 and split2, B), sex-stratified GWAS (female and male, C), and GWAS involving non-

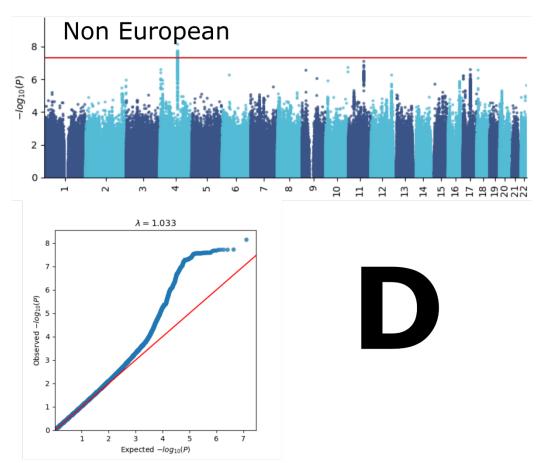
353 European ancestry populations ($N=20,408, \mathbf{D}$).













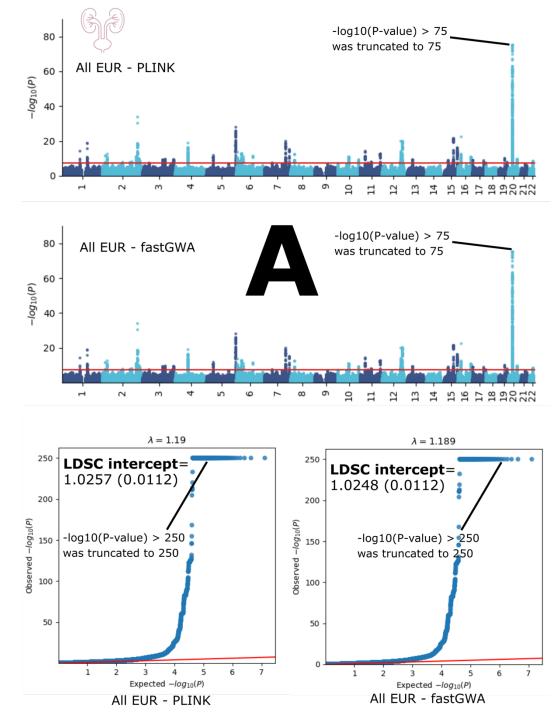
Manhattan and QQ plots, along with genomic inflation factors and LDSC intercepts, are

360 displayed for the primary GWAS conducted on individuals of European ancestry (N=111,386)

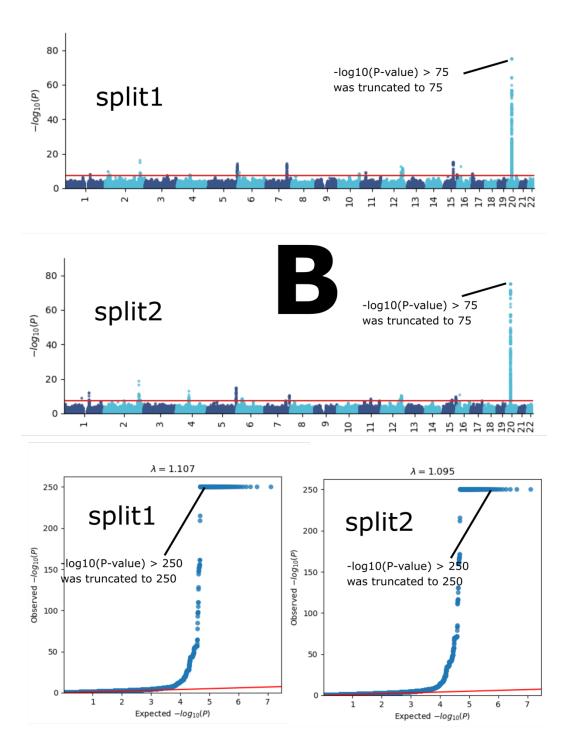
361 using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS

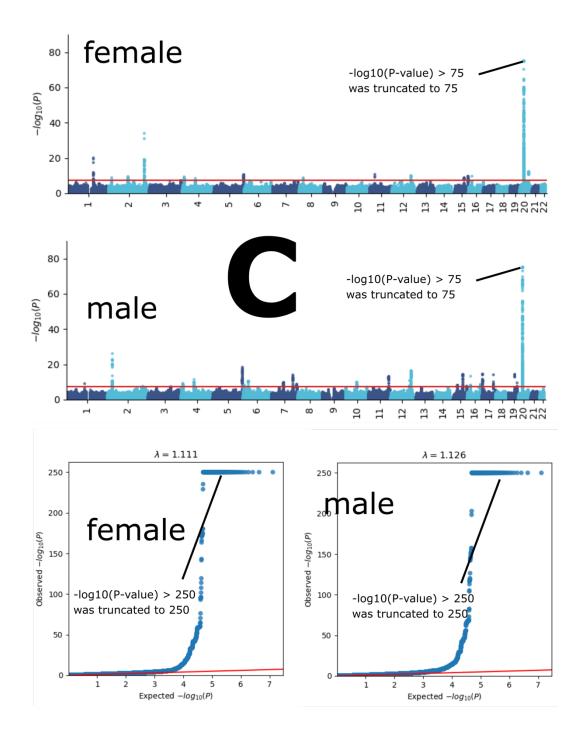
(split1 and split2, B), sex-stratified GWAS (female and male, C), and GWAS involving non-362

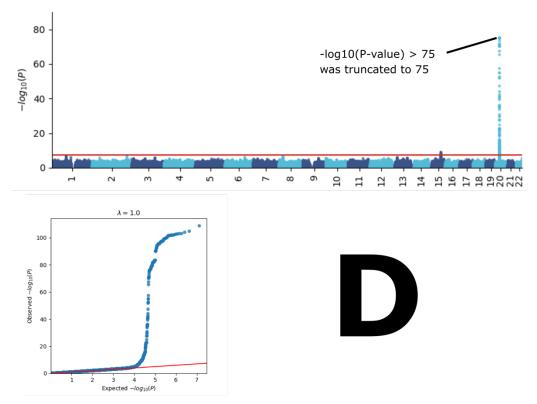
363 European ancestry populations (*N*=20,408, **D**).













369 Manhattan and QQ plots, along with genomic inflation factors and LDSC intercepts, are

displayed for the primary GWAS conducted on individuals of European ancestry (*N*=111,386)

371 using PLINK and fastGWA (A). Additionally, results are presented for split-sample GWAS

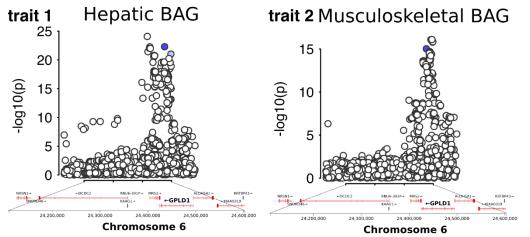
372 (split1 and split2, **B**), sex-stratified GWAS (female and male, **C**), and GWAS involving non-

373 European ancestry populations (*N*=20,408, **D**). For visualization purposes, we chose to truncate

the highly significant P-value (P-value $<1x10^{-300}$) to a lower P-value ($1x10^{-75}$ for Manhattan plots

and 1×10^{-250} for QQ plots).

- **eFigure 10: Bayesian colocalization analysis for the locus on chromosome 6 between the**
- 377 hepatic and musculoskeletal BAGs



We conducted a Bayesian colocalization analysis using Bayes factors to investigate shared causal variants in a specific locus on chromosome 6 for the hepatic and musculoskeletal BAGs. The

analysis tested five hypotheses, denoted by their posterior probabilities: H0 (no association with

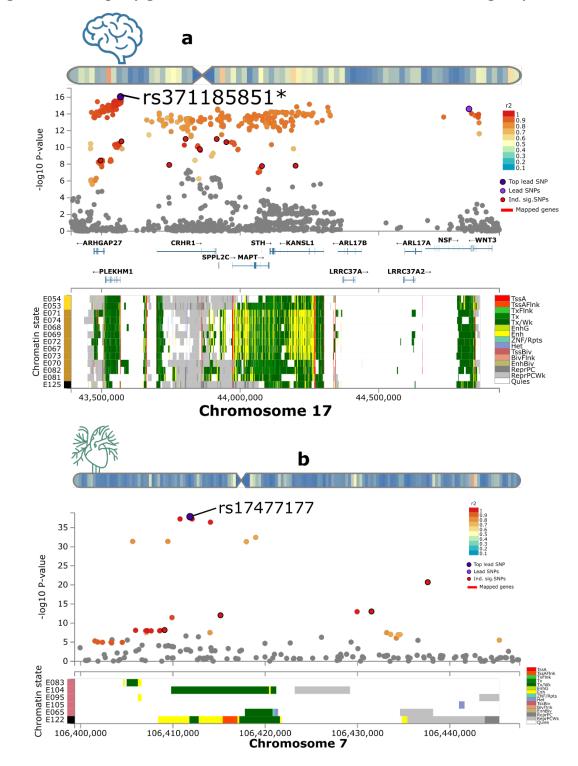
either trait), H1 (association with trait 1 but not trait 2), H2 (association with trait 2 but not trait

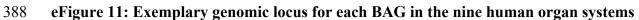
383 1), H3 (association with both traits but with separate causal variants), and H4 (association with

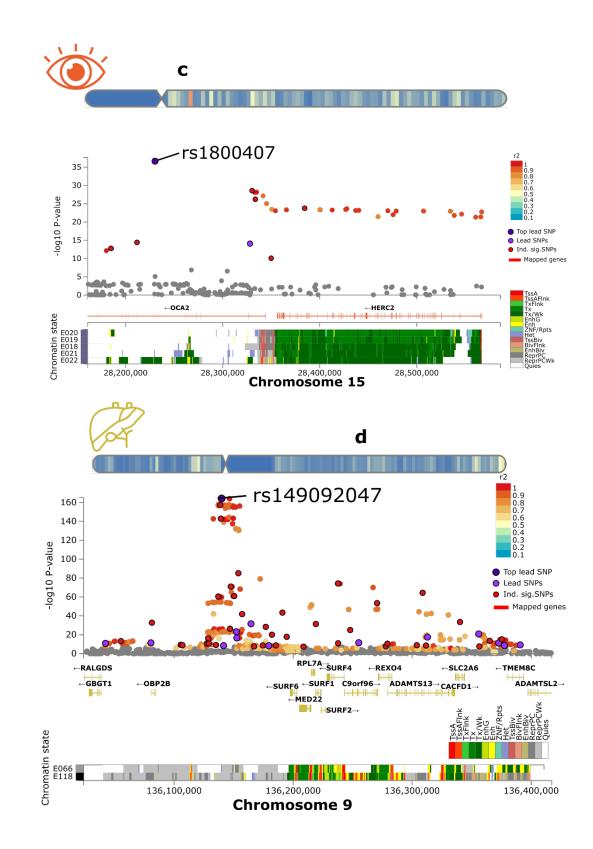
both traits with a shared causal variant). The potential causal variants for both traits are indicated

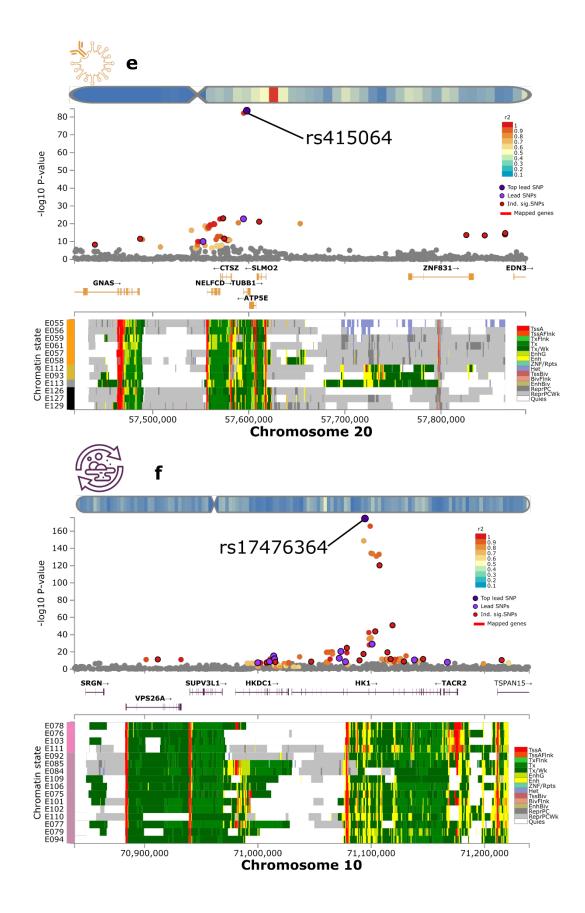
385 by blue-colored SNPs, assuming each locus contains at most one causal variant. The gene

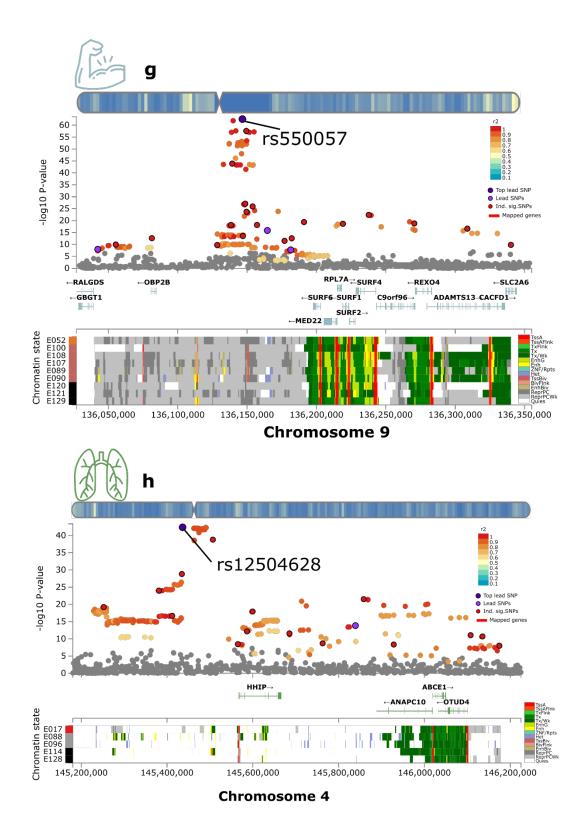
386 mapped to this locus (GPLD1) is shown in bold based on physical positions.

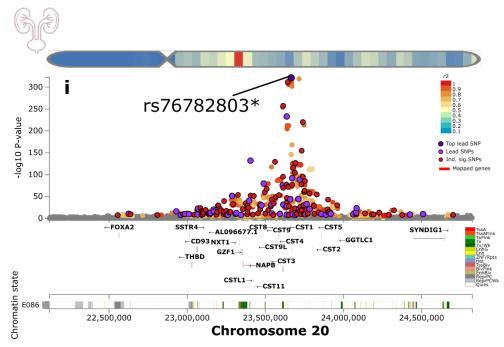














a-i) The exemplary genomic locus with the most significant signals for the brain, cardiovascular,

eye, hepatic, immune, metabolic, musculoskeletal, pulmonary, and renal BAGs. The top leadSNP, lead SNPs, and independent significant SNPs are annotated within each locus. We mapped

401 the SNPs to the genes and predicted their chromatin states in specific tissues, including the brain

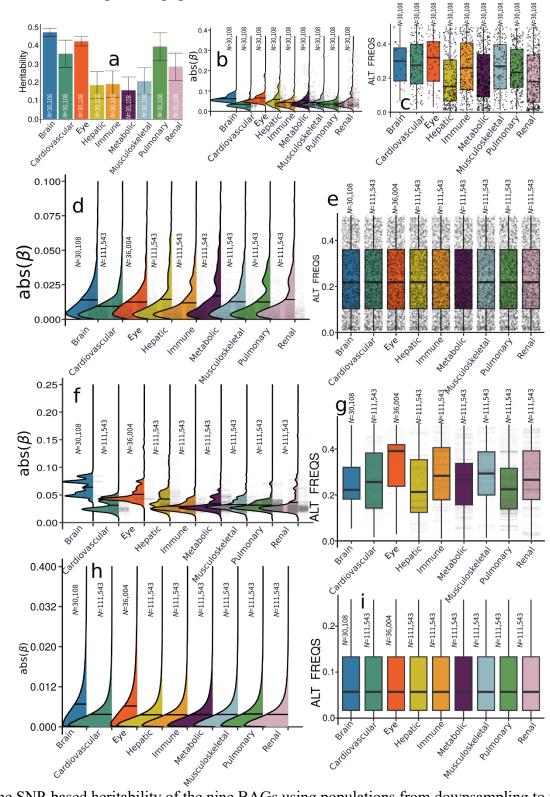
402 for the brain BAG, the heart and vascular tissues for the cardiovascular BAG, the iPSC for the

403 eye BAG, the liver for the hepatic BAG, the spleen, bone, skin, and thymus tissues for the

404 immune BAG, the gastrointestinal tissue for the metabolic BAG, the muscle and bone tissues for

405 the musculoskeletal BAG, the lung tissue for the pulmonary BAG, and the kidney for the renal

- 406 BAG, respectively.
- 407



408 eFigure 12: SNP-based heritability, beta coefficients, and alternative allele frequency using
 409 the brain-BAG comparable populations and different inclusion criteria for the SNPs

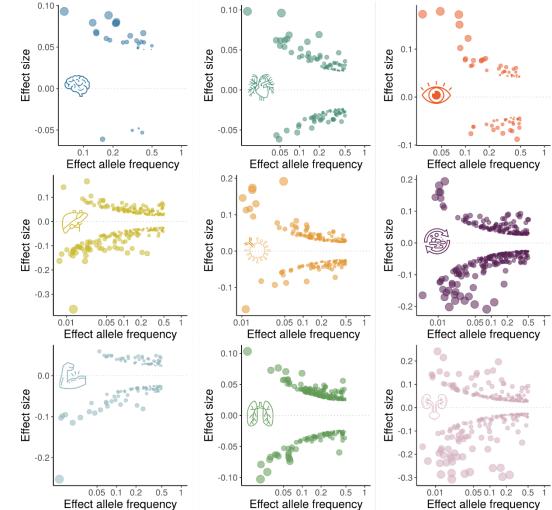




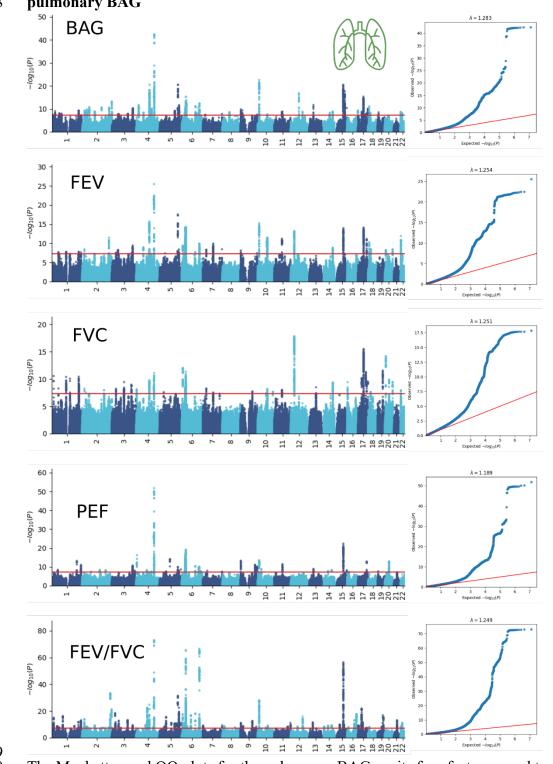
412 brain BAG population. Error bars represent the standard error of the estimated parameters. **b**)

- 413 The absolute value of the beta coefficients of the independent significant SNPs of the nine BAG
- 414 GWASs using populations from downsampling to the brain BAG population (*N*=30,108); the
- 415 independent significant SNPs are shown separately for each BAG. c) The alternative (effective)
- 416 allele frequency of the independent significant SNPs from the nine BAG GWASs using
- 417 populations from downsampling to the brain BAG population (*N*=30,108). **d**) The beta
- 418 coefficients of the independent significant SNPs using the original full samples but with all
- 419 identified independent significant SNPs across the nine BAG GWASs (with the same number of
- 420 SNPs tested), where we see no difference regarding allele frequency in Figure e). f) The absolute 421 value of the beta coefficients of the independent significant SNPs plus the candidate SNPs in LD
- value of the beta coefficients of the independent significant SNPs plus the candidate SNPs in LD
 of the nine BAG GWASs using the original full samples; the SNPs are shown separately for each
- 422 bit the line BAO O wASs using the original full samples, the SIVF's are shown separately for 423 BAG. g) The alternative allele frequency for the setting in Figure **f**). **h**) The absolute beta
- 424 coefficients of the nine BAGs using all genome-wide SNPs (the y-axis was truncated to 0.1 for
- 425 visualization purposes). i) the alternative allele frequency did not differ for Figure h) including
- 426 all genome-wide SNPs.

- 428 eFigure 13: Trumpet plots of the alternative allele frequency vs. the beta coefficient of the
- 429 nine BAG GWASs

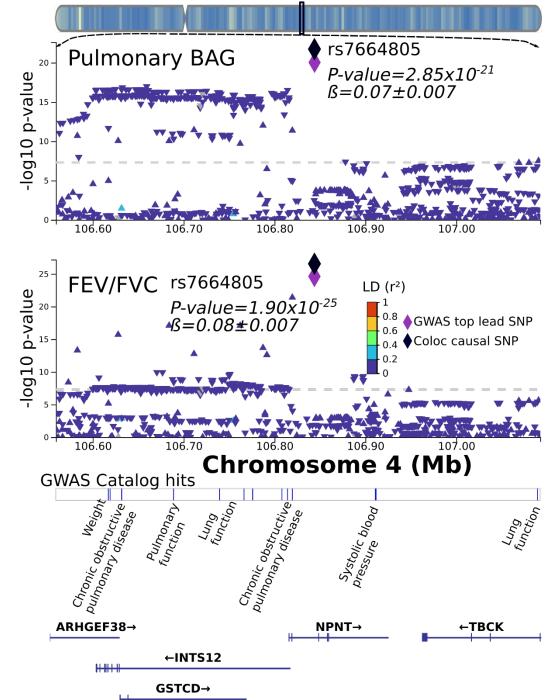


430Effect allele frequencyEffect allele frequencyEffect allele frequency431The trumpet plots display the inverse relationship between the alternative (effect) allele432frequency and the effect size (beta coefficient) for the brain, cardiovascular, eye, hepatic,433immune, metabolic, musculoskeletal, pulmonary, and renal BAGs. Only the independent434significant SNPs were considered. The dot size corresponds to the effect size, while the435transparency of the dot is proportional to its statistical significance.



437 eFigure 14: Manhattan and QQ plots for the four pulmonary features used to compute the
 438 pulmonary BAG

The Manhattan and QQ plots for the pulmonary BAG vs. its four features used to compute the
BAG: forced vital capacity (FVC), forced expiratory volume (FEV), peak expiratory flow (PEF),
and the ratio of forced expiratory volume to forced vital capacity (FEV/FVC).

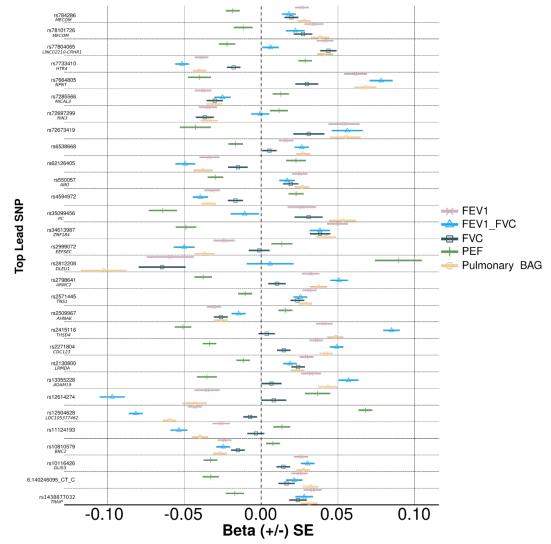


444 eFigure 15: Bayesian colocalization signal between the pulmonary BAG and FEV/FVC chr4; Cytogeneitc region: 4q24



We illustrate here the colocalization signal between the pulmonary BAG and the FEV/FCV feature at the genomic locus: 4q24 with the top lead SNP (causal SNP: rs7664805). Genetic colocalization was evidenced at one locus (4q24) between the pulmonary BAG and the FEV/FCV feature. The signed PP.H4.ABF (0.99) denotes the posterior probability (PP) of hypothesis H4, which suggests that both traits share the same causal SNP (rs7664805).

- 452 eFigure 16: Beta coefficients of the significant colocalization signal between the pulmonary
- 453 **BAG and the four pulmonary features**

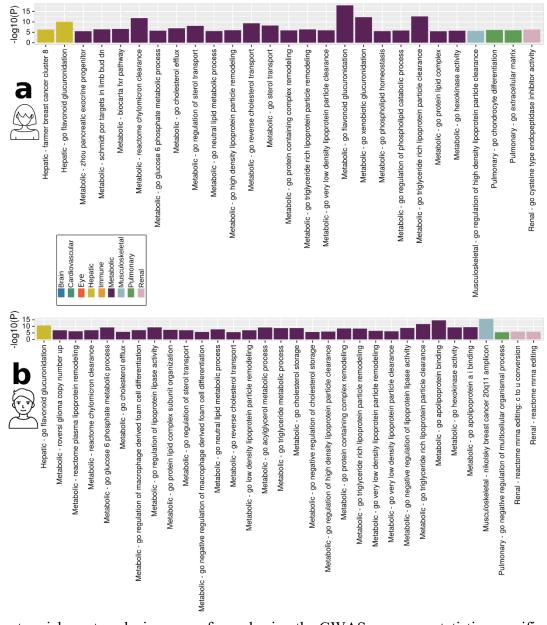


455 We show the beta coefficients of the significant colocalization signals between the pulmonary

456 BAG and its underlying four pulmonary features. We ensured that at least one of the four

457 pulmonary features achieved the genome-wide P-value threshold, totaling 48 loci (represented by

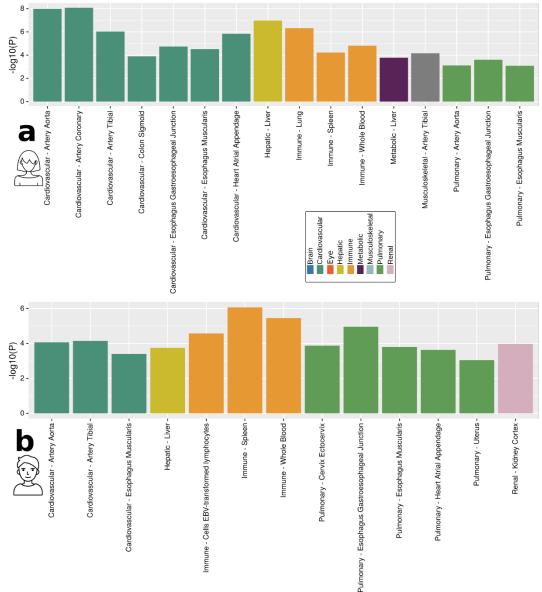
458 its top lead SNP). We also showed the mapped gene when available.



460 eFigure 17: GSEA using sex-stratified GWAS results

461 ≤
 462 Gene-set enrichment analysis was performed using the GWAS summary statistics specific to

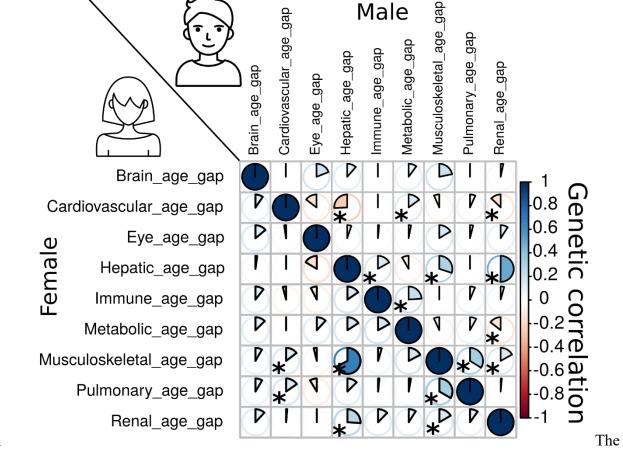
463 females (**a**) and males (**b**).



465 eFigure 18: TEA correlations using sex-stratified GWAS results

Tissue-specific enrichment analysis was performed using the GWAS summary statistics specific

468 to females (**a**) and males (**b**).



470 eFigure 19: Genetic correlations using sex-stratified GWAS results

471

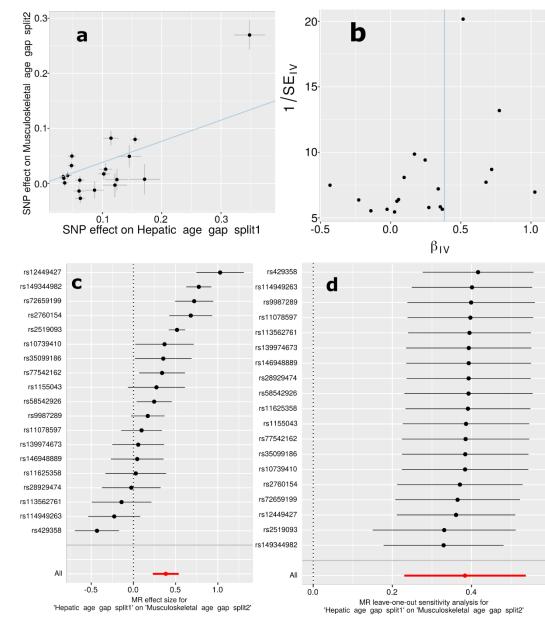
Genetic correlation between each pair of BAGs using sex-stratified GWAS summary statistics
 from our analyses. Most of the genetic correlations showed consistency between females and

474 males, albeit sex differences are evident in certain BAGs, particularly in the cardiovascular BAG

475 results. Specifically, males exhibit dominant correlations between cardiovascular BAGs and

- 476 hepatic and renal BAGs, while females demonstrate specific correlations with musculoskeletal
- 477 and pulmonary BAGs.
- 478

479 eFigure 20: Mendelian randomization sensitivity check for the hepatic BAG on the



480 musculoskeletal BAG

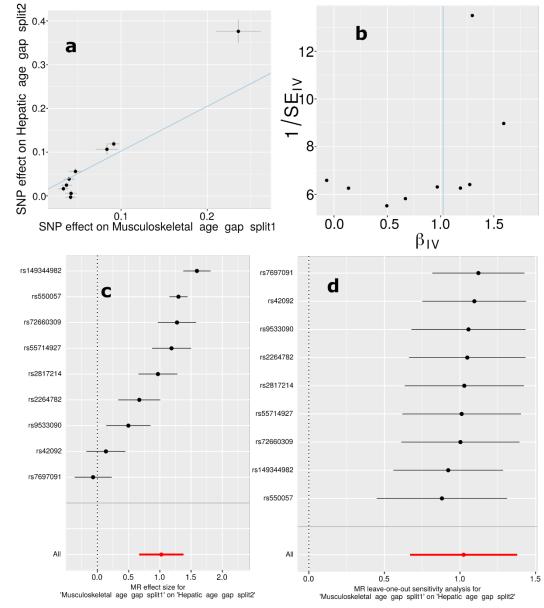


a) Scatter plot for the MR effect sizes of the exposure variable (hepatic BAG, x-axis, SD units) 482 and the outcome variable (musculoskeletal BAG, y-axis, log OR) with standard error bars. The 483 484 slopes of the regression line correspond to the causal effect sizes estimated by the IVW 485 estimator. **b**) Funnel plot for the relationship between the causal effect of the exposure variable on the outcome variable. Each dot represents MR effect sizes estimated using each SNP as a 486 487 separate instrument against the inverse of the standard error of the causal estimate. The vertical red line shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. 488 Each line represents the MR effect (log OR) for the exposure variable on the outcome variable 489 490 using only one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of the exposure variable on the outcome variable. Each row represents the MR effect 491

- (log OR) and the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs.
- 493 494

495 eFigure 21: Mendelian randomization sensitivity check for the musculoskeletal BAG on the

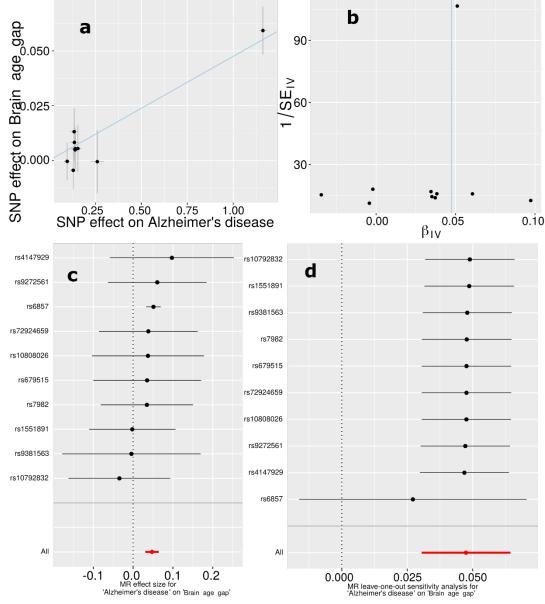
496 hepatic BAG





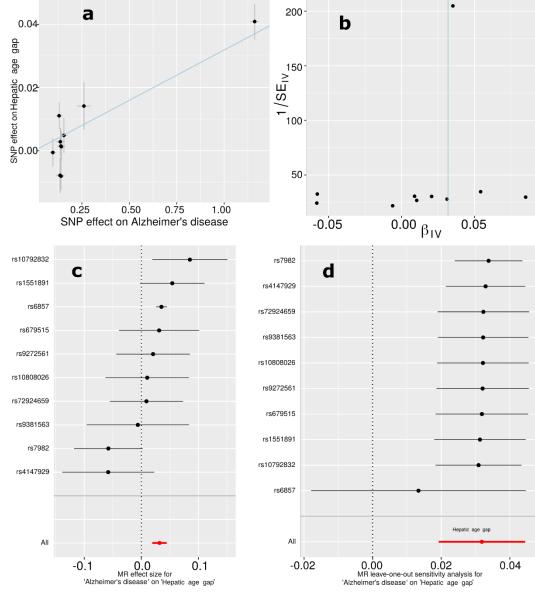
498 a) Scatter plot for the MR effect sizes of the exposure variable (musculoskeletal BAG, x-axis, 499 SD units) and the outcome variable (hepatic BAG, v-axis, log OR) with standard error bars. The 500 slopes of the regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) Funnel plot for the relationship between the causal effect of the exposure variable 501 on the outcome variable. Each dot represents MR effect sizes estimated using each SNP as a 502 503 separate instrument against the inverse of the standard error of the causal estimate. The vertical 504 red line shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents the MR effect (log OR) for the exposure variable on the outcome variable 505 506 using only one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out 507 analysis of the exposure variable on the outcome variable. Each row represents the MR effect

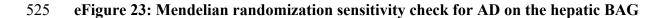
- (log OR) and the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs. 509 510



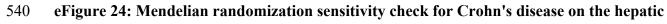
511 eFigure 22: Mendelian randomization sensitivity check for AD on the brain BAG

512 513 a) Scatter plot for the MR effect sizes of the exposure variable (AD, x-axis, SD units) and the 514 outcome variable (brain BAG, y-axis, log OR) with standard error bars. The slopes of the 515 regression line correspond to the causal effect sizes estimated by the IVW estimator. b) Funnel 516 plot for the relationship between the causal effect of the exposure variable on the outcome 517 variable. Each dot represents MR effect sizes estimated using each SNP as a separate instrument 518 against the inverse of the standard error of the causal estimate. The vertical red line shows the 519 MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents the MR effect (log OR) for the exposure variable on the outcome variable using only one SNP; 520 the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of the 521 exposure variable on the outcome variable. Each row represents the MR effect (log OR) and the 522 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using 523 524 all SNPs.

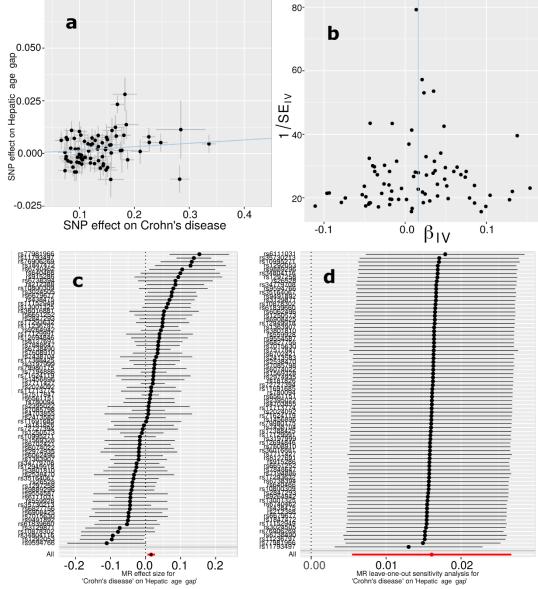


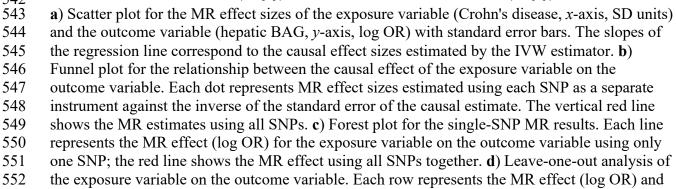


527 a) Scatter plot for the MR effect sizes of the exposure variable (AD, x-axis, SD units) and the 528 outcome variable (hepatic BAG, y-axis, log OR) with standard error bars. The slopes of the 529 regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) Funnel 530 plot for the relationship between the causal effect of the exposure variable on the outcome 531 variable. Each dot represents MR effect sizes estimated using each SNP as a separate instrument against the inverse of the standard error of the causal estimate. The vertical red line shows the 532 533 MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents 534 the MR effect (log OR) for the exposure variable on the outcome variable using only one SNP; 535 the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of the exposure variable on the outcome variable. Each row represents the MR effect (log OR) and the 536 537 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using 538 all SNPs.

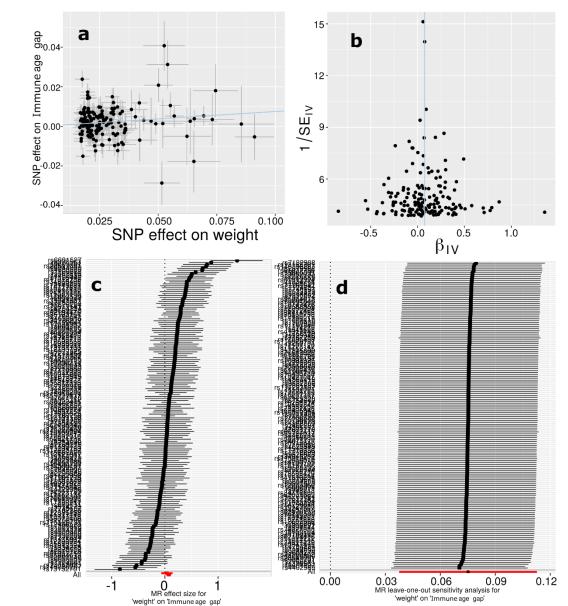


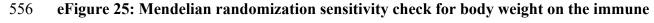
541 BAG





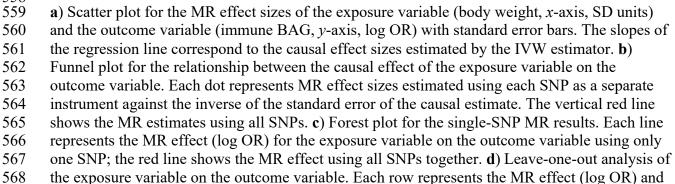
- the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs. 554 555



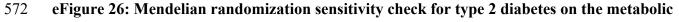


557 BAG

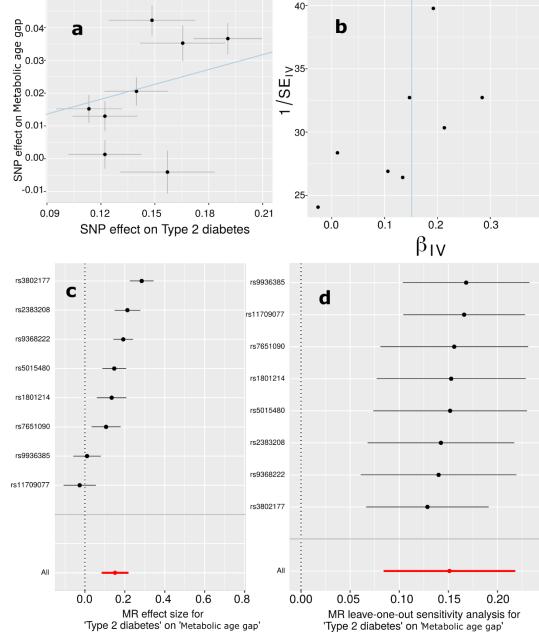


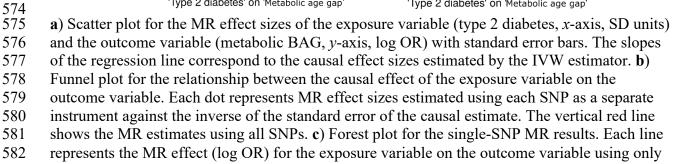


- the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs. 570 571

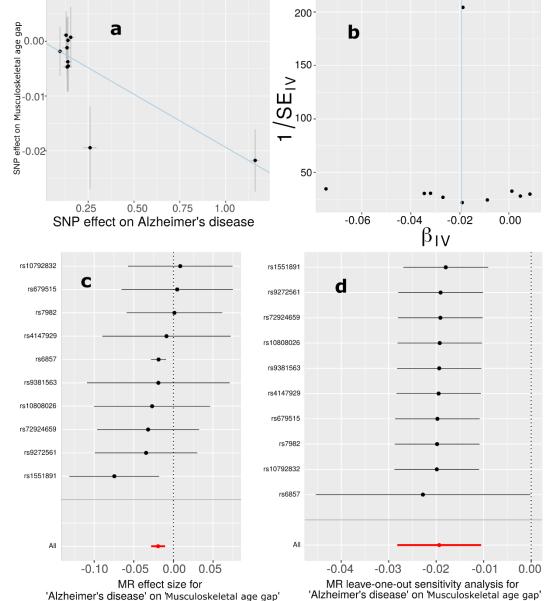


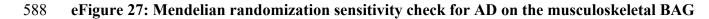
573 BAG





- 583 one SNP; the red line shows the MR effect using all SNPs together. **d**) Leave-one-out analysis of
- the exposure variable on the outcome variable. Each row represents the MR effect (log OR) and
- 585 the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator
- 586 using all SNPs.



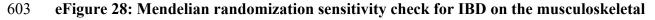




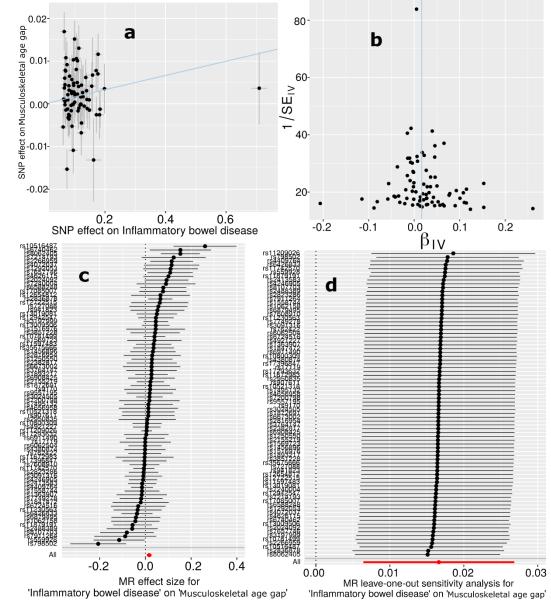
590 a) Scatter plot for the MR effect sizes of the exposure variable (AD, x-axis, SD units) and the outcome variable (musculoskeletal BAG, y-axis, log OR) with standard error bars. The slopes of 591 592 the regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) Funnel plot for the relationship between the causal effect of the exposure variable on the 593 594 outcome variable. Each dot represents MR effect sizes estimated using each SNP as a separate 595 instrument against the inverse of the standard error of the causal estimate. The vertical red line 596 shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents the MR effect (log OR) for the exposure variable on the outcome variable using only 597 one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of 598 599 the exposure variable on the outcome variable. Each row represents the MR effect (log OR) and

600 the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator

601 using all SNPs.



604 BAG



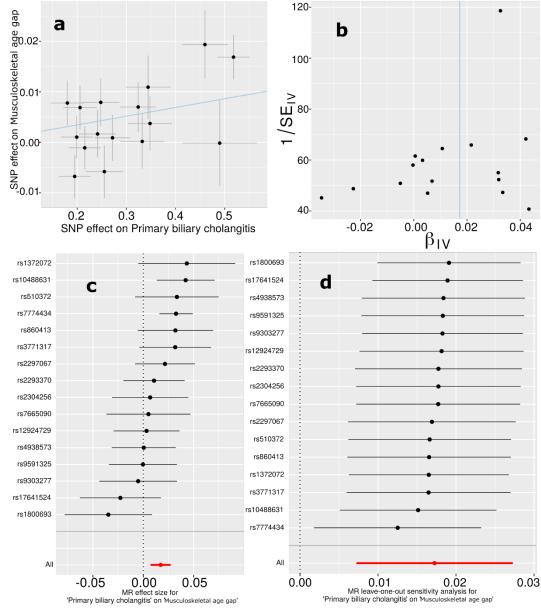


606 a) Scatter plot for the MR effect sizes of the exposure variable (IBD, x-axis, SD units) and the outcome variable (musculoskeletal BAG, y-axis, log OR) with standard error bars. The slopes of 607 608 the regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) 609 Funnel plot for the relationship between the causal effect of the exposure variable on the outcome variable. Each dot represents MR effect sizes estimated using each SNP as a separate 610 611 instrument against the inverse of the standard error of the causal estimate. The vertical red line shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line 612 613 represents the MR effect (log OR) for the exposure variable on the outcome variable using only 614 one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of 615 the exposure variable on the outcome variable. Each row represents the MR effect (log OR) and

- the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs. 617 618



620 BAG

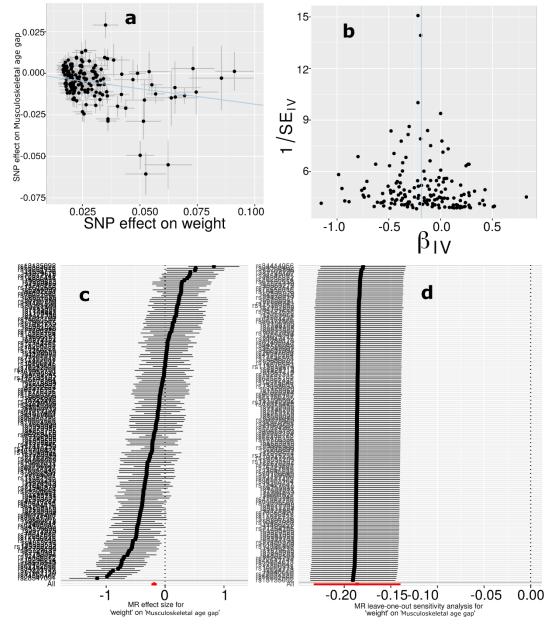




622 a) Scatter plot for the MR effect sizes of the exposure variable (PBC, x-axis, SD units) and the outcome variable (musculoskeletal BAG, y-axis, log OR) with standard error bars. The slopes of 623 the regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) 624 625 Funnel plot for the relationship between the causal effect of the exposure variable on the outcome variable. Each dot represents MR effect sizes estimated using each SNP as a separate 626 627 instrument against the inverse of the standard error of the causal estimate. The vertical red line 628 shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents the MR effect (log OR) for the exposure variable on the outcome variable using only 629 one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of 630 631 the exposure variable on the outcome variable. Each row represents the MR effect (log OR) and

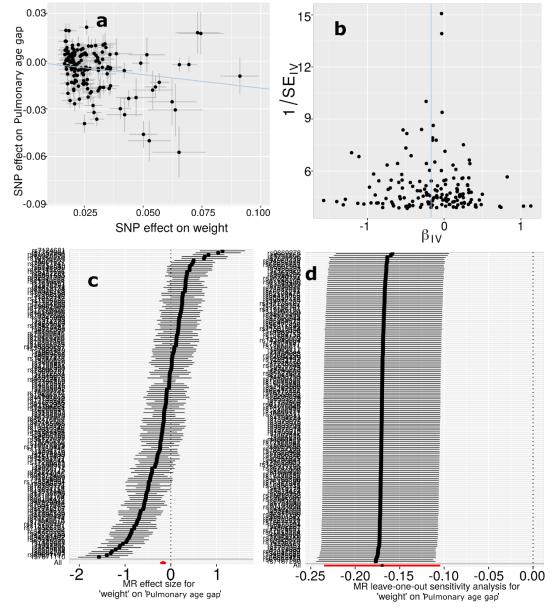
- the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs. 633 634

- 635 eFigure 30: Mendelian randomization sensitivity check for weight on the musculoskeletal
- 636 BAG



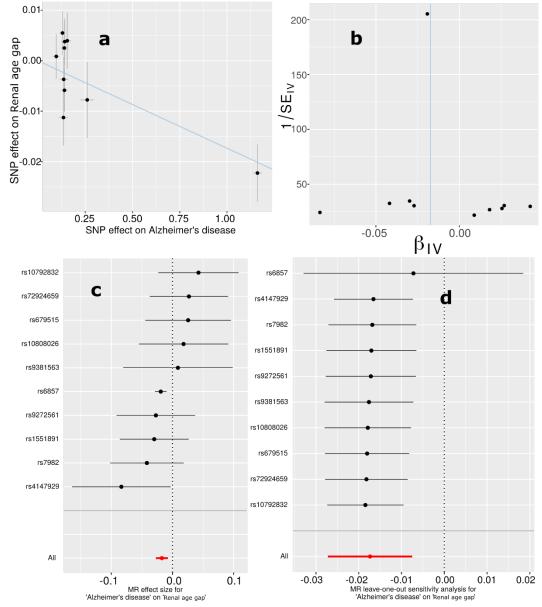
638 a) Scatter plot for the MR effect sizes of the exposure variable (body weight, x-axis, SD units) 639 and the outcome variable (musculoskeletal BAG, *v*-axis, log OR) with standard error bars. The 640 slopes of the regression line correspond to the causal effect sizes estimated by the IVW 641 estimator. **b**) Funnel plot for the relationship between the causal effect of the exposure variable 642 on the outcome variable. Each dot represents MR effect sizes estimated using each SNP as a 643 separate instrument against the inverse of the standard error of the causal estimate. The vertical 644 red line shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. 645 Each line represents the MR effect (log OR) for the exposure variable on the outcome variable using only one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out 646 647 analysis of the exposure variable on the outcome variable. Each row represents the MR effect

- (log OR) and the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs.
- 649 650



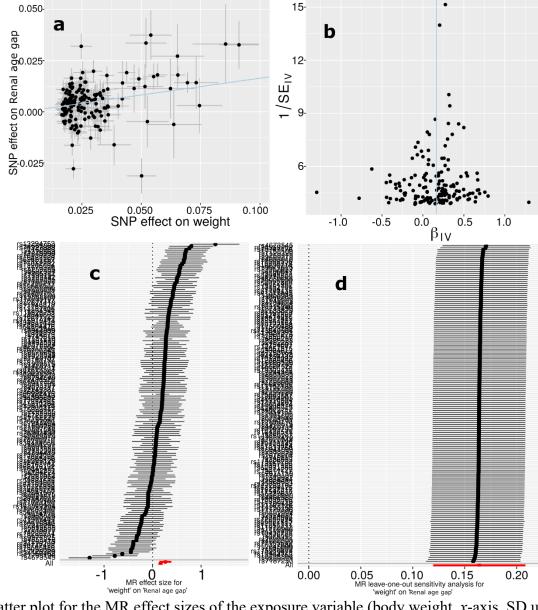
651 eFigure 31: Mendelian randomization sensitivity check for weight on the pulmonary BAG

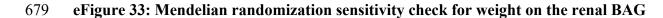
a) Scatter plot for the MR effect sizes of the exposure variable (body weight, x-axis, SD units) 654 and the outcome variable (pulmonary BAG, y-axis, log OR) with standard error bars. The slopes of the regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) 655 656 Funnel plot for the relationship between the causal effect of the exposure variable on the 657 outcome variable. Each dot represents MR effect sizes estimated using each SNP as a separate 658 instrument against the inverse of the standard error of the causal estimate. The vertical red line 659 shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents the MR effect (log OR) for the exposure variable on the outcome variable using only 660 one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of 661 the exposure variable on the outcome variable. Each row represents the MR effect (log OR) and 662 the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator 663 using all SNPs. 664



665 eFigure 32: Mendelian randomization sensitivity check for AD on the renal BAG

a) Scatter plot for the MR effect sizes of the exposure variable (AD, x-axis, SD units) and the 667 668 outcome variable (renal BAG, y-axis, log OR) with standard error bars. The slopes of the regression line correspond to the causal effect sizes estimated by the IVW estimator. b) Funnel 669 plot for the relationship between the causal effect of the exposure variable on the outcome 670 variable. Each dot represents MR effect sizes estimated using each SNP as a separate instrument 671 against the inverse of the standard error of the causal estimate. The vertical red line shows the 672 673 MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents 674 the MR effect (log OR) for the exposure variable on the outcome variable using only one SNP; 675 the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of the exposure variable on the outcome variable. Each row represents the MR effect (log OR) and the 676 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using 677 678 all SNPs.

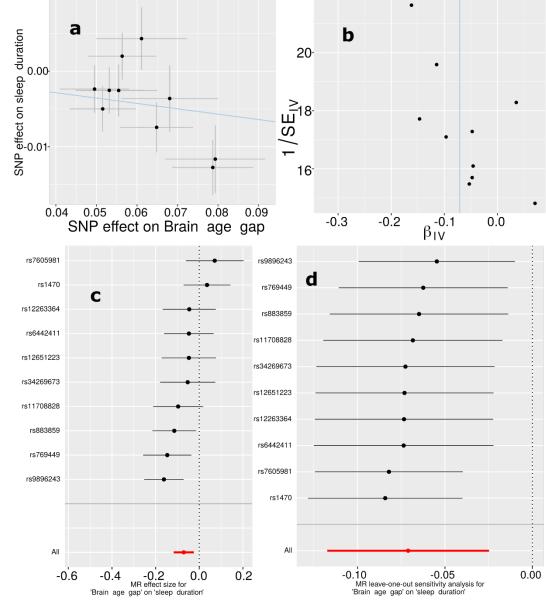




a) Scatter plot for the MR effect sizes of the exposure variable (body weight, x-axis, SD units) 681 682 and the outcome variable (renal BAG, *v*-axis, log OR) with standard error bars. The slopes of the regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) Funnel 683 plot for the relationship between the causal effect of the exposure variable on the outcome 684 variable. Each dot represents MR effect sizes estimated using each SNP as a separate instrument 685 686 against the inverse of the standard error of the causal estimate. The vertical red line shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents 687 688 the MR effect (log OR) for the exposure variable on the outcome variable using only one SNP; 689 the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of the 690 exposure variable on the outcome variable. Each row represents the MR effect (log OR) and the 691 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using 692 all SNPs.



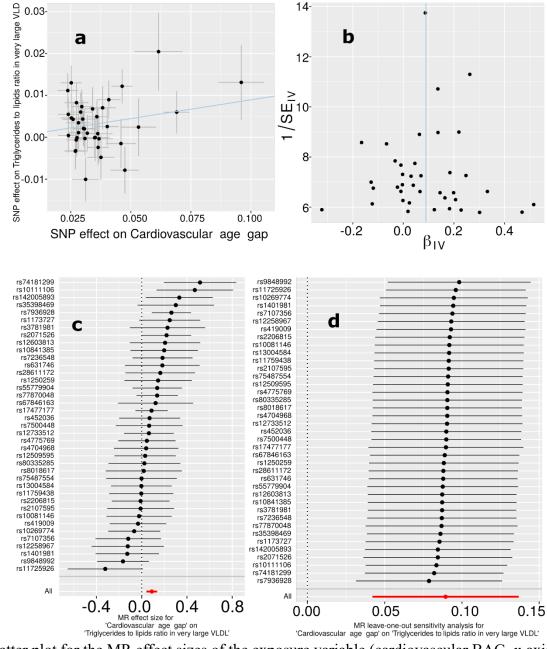
694 duration

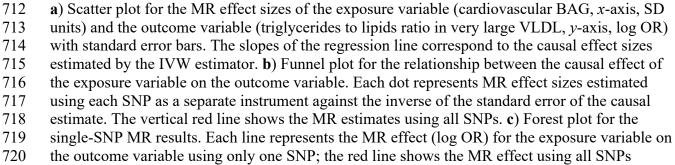


a) Scatter plot for the MR effect sizes of the exposure variable (brain BAG, x-axis, SD units) and 696 697 the outcome variable (sleep duration, y-axis, log OR) with standard error bars. The slopes of the regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) Funnel 698 699 plot for the relationship between the causal effect of the exposure variable on the outcome variable. Each dot represents MR effect sizes estimated using each SNP as a separate instrument 700 against the inverse of the standard error of the causal estimate. The vertical red line shows the 701 MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. Each line represents 702 703 the MR effect (log OR) for the exposure variable on the outcome variable using only one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out analysis of the 704 exposure variable on the outcome variable. Each row represents the MR effect (log OR) and the 705

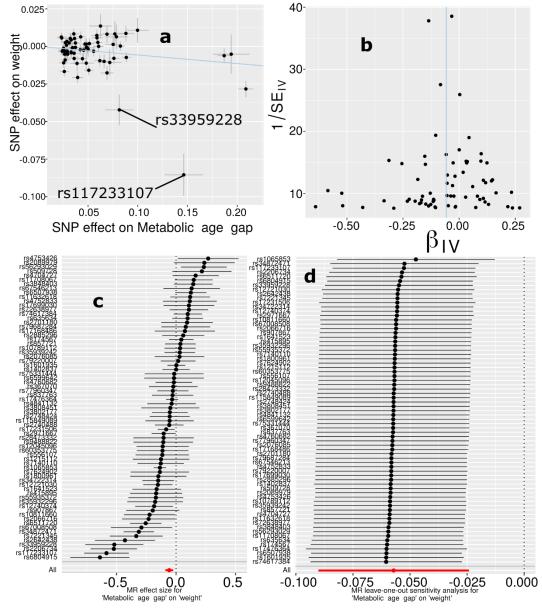
- 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs. 707 708

710 triglycerides to lipids ratio in very large VLDL



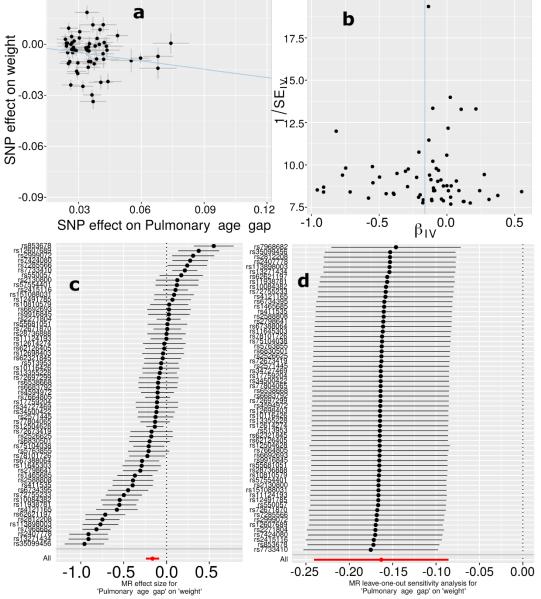


- together. **d**) Leave-one-out analysis of the exposure variable on the outcome variable. Each row represents the MR effect (log OR) and the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW estimator using all SNPs.



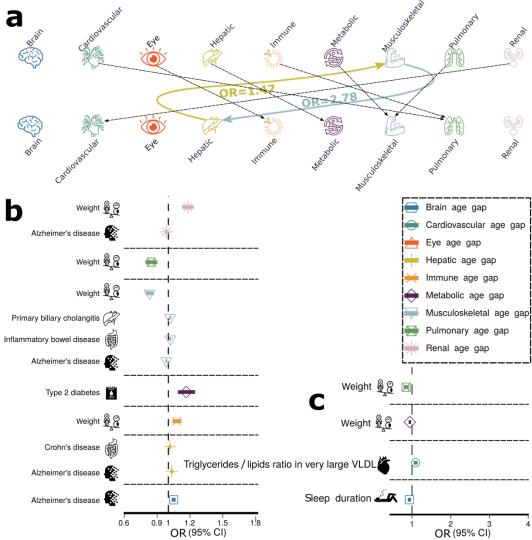


a) Scatter plot for the MR effect sizes of the exposure variable (metabolic BAG, x-axis, SD units) and the outcome variable (body weight, y-axis, log OR) with standard error bars. The 728 729 slopes of the regression line correspond to the causal effect sizes estimated by the IVW estimator. **b**) Funnel plot for the relationship between the causal effect of the exposure variable 730 731 on the outcome variable. Each dot represents MR effect sizes estimated using each SNP as a 732 separate instrument against the inverse of the standard error of the causal estimate. The vertical 733 red line shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. 734 Each line represents the MR effect (log OR) for the exposure variable on the outcome variable using only one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out 735 736 analysis of the exposure variable on the outcome variable. Each row represents the MR effect 737 (log OR) and the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW 738 estimator using all SNPs.



741 a) Scatter plot for the MR effect sizes of the exposure variable (pulmonary BAG, x-axis, SD 742 units) and the outcome variable (body weight, y-axis, log OR) with standard error bars. The 743 slopes of the regression line correspond to the causal effect sizes estimated by the IVW 744 estimator. b) Funnel plot for the relationship between the causal effect of the exposure variable 745 on the outcome variable. Each dot represents MR effect sizes estimated using each SNP as a separate instrument against the inverse of the standard error of the causal estimate. The vertical 746 747 red line shows the MR estimates using all SNPs. c) Forest plot for the single-SNP MR results. 748 Each line represents the MR effect (log OR) for the exposure variable on the outcome variable 749 using only one SNP; the red line shows the MR effect using all SNPs together. d) Leave-one-out 750 analysis of the exposure variable on the outcome variable. Each row represents the MR effect 751 (log OR) and the 95% CI by excluding that SNP from the analysis. The red line depicts the IVW 752 estimator using all SNPs.

- 753 eFigure 38: Causal multi-organ network between the nine biological age gaps and 17
- 754 clinical traits of chronic diseases, lifestyle factors, and cognition



756 a) Causal inference between each pair of BAGs using bi-directional two-sample Mendelian randomization by excluding overlapping populations. The colored lines represent causal effects 757 758 that survived the correction for multiple comparisons using the Bonferroni method; the dotted 759 lines denote the nominal significant causal effects (P-value < 0.05). b) The forward Mendelian 760 randomization investigates the causal inference of 17 unbiasedly selected exposure variables on 761 the nine outcome variables (i.e., the nine BAGs). c) The inverse Mendelian randomization 762 examines the causal inference of the 9 BAGs on the 17 clinical traits. We present the tests passing the statistical significance after adjusting for multiple comparisons using the Bonferroni 763 764 correction. The OR and the 95% confidence interval are presented. Abbreviation: VLDL: very 765 low-density lipoprotein; CI: confidence interval; OR: odds ratio. 766

767 eTable 1: Heritability estimates using the GCTA software

A) Original sample sizes. Original sample sizes were used to estimate the heritability for
 the nine organ systems.

BAG	h^2	h ² SE	P-value	N
Brain	0.47	0.02	$<1x10^{-10}$	30,108
Cardiovascular	0.27	0.006	$<1x10^{-10}$	111,543
Eye	0.38	0.02	$<1x10^{-10}$	36,004
Hepatic	0.23	0.006	$<1x10^{-10}$	111,543
Immune	0.20	0.004	$<1x10^{-10}$	111,543
Metabolic	0.29	0.006	$<1x10^{-10}$	111,543
Musculoskeletal	0.24	0.004	$<1x10^{-10}$	111,543
Pulmonary	0.36	0.006	$<1x10^{-10}$	111,543
Renal	0.30	0.006	$<1x10^{-10}$	111,543

772

B) Down-sampled sample sizes. For the eight BAGs except for the brain BAG, we randomly down-sampled the original sample sizes to that of the brain BAG.

andomly down-sam	pled the orig	ginal sample :	sizes to that of	t the brain BA
BAG	h^2	h ² SE	P-value	N
Brain	0.47	0.02	$<1x10^{-10}$	30,108
Cardiovascular	0.35	0.07	$<1x10^{-5}$	30,108
Eye	0.42	0.02	$<1x10^{-5}$	30,108
Hepatic	0.18	0.07	$<1x10^{-5}$	30,108
Immune	0.19	0.07	$<1x10^{-5}$	30,108
Metabolic	0.16	0.07	$<1x10^{-5}$	30,108
Musculoskeletal	0.21	0.07	$<1x10^{-5}$	30,108
Pulmonary	0.39	0.07	$<1x10^{-5}$	30,108
Renal	0.28	0.07	$<1x10^{-5}$	30,108

773

774 **C)** Brain imaging-derived phenotypes vs. 4 pulmonary features. For the brain imaging 775 phenotypes, we used four sets of features from our previous studies: i) 32 pattern of 776 structural coavairance (PSCs) from the data-driven MuSIC atlas using T1-weighted MRI 777 and orthogonal-projective non-negative matrix factorization³; *ii*) 101 GM ROIs using the 778 ANTs (https://stnava.github.io/ANTs/) software⁴; *iii*) the 21 WM tracts for fractional 779 anisotropy (FA) mean values⁵; and iv) 21 functional node (FN) measures from restingstate functional MRI⁶. The 4 pulmonary features included forced vital capacity, forced 780 781 expiratory volume, peak expiratory flow, and the ratio of forced expiratory volume to forced vital capacity. For comparison purposes, we also show the h^2 estimates for the 782 brain and pulmonary BAGs. The detailed results for all estimates are presented in 783 784 Supplementary eFile 22. The distribution of each phenotype group is shown in the 785 figure below.

Organ	Phenotype group	Phenotype (mean or individual)	<i>h</i> ²	h ² SE	P-value
Brain	Brain feature	MuSIC ³ GM-IDP ⁴	0.45 0.39	0.16	<1E ⁻²⁰ <1E ⁻²⁰
Drain		WM-IDP ⁵	0.53	0.16 0.08	<1E <1E ⁻²⁰

⁷⁷⁰ 771

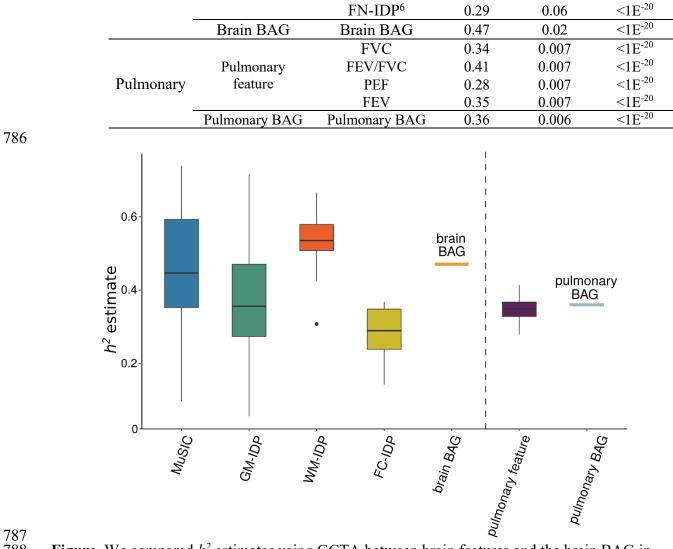


Figure. We compared h^2 estimates using GCTA between brain features and the brain BAG in 788

789 contrast to pulmonary features and the pulmonary BAG. In general, our observations indicated

790 that the brain BAG (0.47±0.02) exhibits a higher degree of heritability than the pulmonary BAG

791 (0.36±0.06), and this pattern aligns with the heritability of the underlying features employed in

792 their computation: Brain feature: $h^2=0.42$ across the four sets of brain features vs. pulmonary

- 793 feature: $h^2=0.34$ across the four pulmonary features.
- 794

795 eTable 2: The beta coefficient and its SE estimate from the full sample vs. the down-

796 sampled brain BAG comparable sample

BAG	Mean_beta_down sample	Mean_beta_full sample	SE_beta_down sample	SE_beta_fulls ample	t_beta	p_bet a	t_se	p_se	N_I SS
Cardiovasc ular	0.034802	0.035822	0.010533	0.005457	0.513 17	0.608 293	14.08 46	1.95E -33	124
Eye	0.06527	0.064561	0.009967	0.009128	0.136 138	0.891 913	1.828 485	0.069 668	69
Hepatic	0.058408	0.057479	0.014495	0.007525	0.293 471	0.769 268	13.28 265	2.59E -35	289
Immune	0.043347	0.041526	0.011454	0.005948	0.682 463	0.495 312	12.78 407	5.79E -32	217
Metabolic	0.053834	0.052587	0.013227	0.006842	0.490 113	0.624 182	15.99 737	1.7E- 50	422
Musculosk eletal	0.04263	0.041015	0.011109	0.005817	0.520 949	0.602 797	11.23 119	1.44E -24	147
Pulmonary	0.035423	0.036056	0.010959	0.005678	- 0.536 29	0.591 975	20.08 143	1.81E -67	272
Renal	0.067828	0.068927	0.014536	0.007595	0.233 5	0.815 446	12.87 744	5.18E -34	331

797 N_ISS: number of independent significant SNPs

eTable 3: Genetic correlation analyses between the pulmonary BAG and the four featuresused to derive the BAG.

BAG	Pulmonary feature	g _c mean	g_c std	Р
	forced vital capacity fvc zscore	0.6409	0.0195	6.1E- ²³⁷
Pulmonary_age_gap	fev1_fvc_ratio_zscore	0.5371	0.0316	6.47E- ⁶⁵
	peak_expiratory_flow_pef	-0.7903	0.0175	$< 1E^{-300}$
	forced_expiratory_volume_in_1second_fev1_zscore	0.8259	0.0111	<1E ⁻³⁰⁰

803 **eTable 4: Selected 41 clinical traits for genetic correlation analyses**. We selected the candidate 804 studies from the GWAS Catalog for 41 clinical traits, including chronic diseases affecting multiple 805 organ systems, education, and intelligence. To ensure the suitability of the GWAS summary 806 statistics, we first checked that the selected study's population was European ancestry; we then 807 guaranteed a moderate SNP-based heritability h^2 estimate and excluded the studies with spurious 808 low h^2 (<0.05). Abbreviations are detailed in the main text.

⁸⁰⁹

Primary organ system	Trait	PubMed ID	Sample size
5950011	AD	30820047	63,926
	Smile-GAN-AD1	NA	33,540
	SmileGAN-AD2	NA	33,540
	SmileGAN-AD3	NA	33,540
	SmileGAN-AD4	NA	33,540
	SurrealGAN-AD1	NA	33,540
	SurrealGAN-AD2	NA	33,540
	ADHD	30478444	53,293
	ALS	27455348	36052
	ASD	30804558	46,350
Brain	HYDRA-ASD1	37017948	14,786
	HYDRA-ASD2	37017948	14,786
	HYDRA-ASD3	37017948	14,786
	BIP	31043756	51,710
	MDD	22472876	18,759
	HYDRA-MDD1	NA	33,540
	HYDRA-MDD2	NA	33,540
	SCZ	23974872	11,244
	HYDRA-SCZ1	32103250	14,786
	HYDRA-SCZ2	32103250	14,786
	OCD	28761083	9,725
	WMH	31551276	11,226
Cardiovascular	AF	30061737	1030,836
	Stroke	29531354	446,696
Eye	Glaucoma	33627673	330,905
	Liver fat	34128465	32,858
Hepatic	PBC	34033851	24,510
T	SLE	26502338	14,267
Immune	HIV	34737426	208,808
Matabalia	DB	30054458	655,666
Metabolic	Hyperlipidemia	34906840	349,222
Musculoskeletal	RA	36333501	92,044
Pulmonary	Lung carcinoma	28604730	85,716
Renal	CKD	31152163	625,219
	CD	26192919	20,883
Digestive	IBD	26192919	34652
Breast	Breast cancer	29059683	139,274

Education	23722424	126,559
Reaction time	29844566	330,069
Intelligence	28530673	78,308
Computer use	32317632	408,815
	Reaction time Intelligence	Reaction time29844566Intelligence28530673

812 eTable 5: Genetic correlations analyses between the nine BAGs and longevity, household

income, and telomere length. We downloaded the GWAS summary statistics from Deelen et al.⁷,
which performed two GWASs on longevity based on the 90th survival percentile. For the household
income GWAS, we downloaded from Hill et al.⁸. For the telomere length, we used GWAS
summary statistics from Codd et al.⁹.

BAG	Trait	g _c mean	g_c std	Р	PubMed ID	Sample size
Brain_age_gap		gc_mean	gc_std	0.0931		
Cardiovascular_age_gap		-0.1588	0.0946	0.0049		
Eye_age_gap		-0.2038	0.0725	0.0719		
Hepatic_age_gap		-0.1657	0.0921	0.6182		
Immune_age_gap	Longevity	0.0495	0.0993	0.9299	31413236	36,745
Metabolic_age_gap		0.0086	0.0979	0.7605		
Musculoskeletal_age_gap		0.0328	0.1074	0.1128		
Pulmonary_age_gap		-0.1193	0.0752	0.0057		
Renal_age_gap		-0.197	0.0713	0.0323		
Brain_age_gap		-0.2089	0.0403	2.2E ⁻⁰⁷		
Cardiovascular_age_gap		-0.0679	0.0356	0.0563		
Eye_age_gap		-0.066	0.0404	0.1024		
Hepatic_age_gap	Household	-0.1026	0.0417	0.0138		
Immune_age_gap		0.0028	0.0414	0.9464	31874048	286,30
Metabolic_age_gap	income	-0.0671	0.0389	0.0841		
Musculoskeletal_age_gap		-0.2867	0.0308	$1.4E^{-20}$		
Pulmonary age gap		-0.1567	0.0286	$4.4E^{-08}$		
Renal age gap		-0.0989	0.0321	0.002		
Brain_age_gap		0.0273	0.0506	0.5897		
Cardiovascular_age_gap		-0.0005	0.0038	0.9897		
Eye age gap		-0.0124	0.0439	0.7769		
Hepatic_age_gap		-0.0042	0.0306	0.9089		
Immune_age_gap	Telomere length	-0.1338	0.0377	0.0004	34611362	472,17
Metabolic_age_gap	C	-0.0514	0.0393	0.1905		
Musculoskeletal_age_gap		0.0045	0.0333	0.8932		
Pulmonary_age_gap		-0.0993	0.0331	0.0027		
Renal_age_gap		-0.029	0.0293	0.3222		

eTable 6: Causal analysis using the LCV method. We performed causal analysis using the LCV
method for the bi-directional causality between hepatic and musculoskeletal BAGs, the 9 BAGs
and longevity, and the 9 BAGs and telomere length. GCP: genetic causality proportion.

Trait1	Trait2	GCP	GCP_se	Р	PubMed ID	Sample size
Musculoskeletal age_gap	Hepatic_age_gap	-0.75144	0.143475	9.37E-12	NA	111,543
Brain_age_gap		-0.45597	0.208644	0.047488		
Cardiovascular_age_gap		-0.21694	0.395088	0.547241		
Eye_age_gap		-0.07761	0.565366	0.639544		
Hepatic_age_gap	Longevity (99 th percentile)	-0.53253	0.321599	0.089042		
Immune_age_gap		-0.15001	0.356513	0.868225	31874048	286,301
Musculoskeletal_age_gap		-0.26633	0.440294	0.827824		
Metabolic _age_gap		-0.3153	0.391594	0.866896		
Pulmonary_age_gap		-0.18056	0.375253	0.210053		
Renal_age_gap		-0.33425	0.403767	0.573389		
Brain age gap		-0.05796	0.55584	0.713688		
Cardiovascular_age_gap		-0.32007	0.294362	0.421771		
Eye_age_gap		-0.11877	0.49709	0.926991		
Hepatic_age_gap		-0.00755	0.332263	0.792948		
Immune age gap	Telomere length	-0.3321	0.126005	0.002502	34611362	472,174
Metabolic age gap	-	-0.07943	0.45872	0.705827		
Musculoskeletal_age_gap		-0.15992	0.478106	0.821179		
Pulmonary_age_gap		-0.67193	0.198345	3.57E-16		
Renal_age_gap		-0.17496	0.500093	0.6767		

eTable 7: Selected 17 clinical traits for Mendelian randomization analyses. We unbiasedly
and systematically selected 17 clinical traits, including chronic diseases affecting multiple organ
systems, cognition, and lifestyle factors. The selection procedure is detailed in the main text
(Method 2J).

Primary organ system	Trait	PubMed ID	IEU-ID (If applicable)	Number of IVs (forward MR)
2	AD	24162737	ebi-a-GCST002245	10
Brain	BIP	31043756	ieu-a-1126	12
	Type 2 diabetes	22885922	ieu-a-26	10
Metabolic	Triglyceride-to- lipid ratio	32114887	met-d- XL VLDL TG pct	41
Eye	Glaucoma	NA	finn-b- H7_GLAUCOMA	9
Musculoskeletal	RA	23143596	ebi-a-GCST005569	11
Hepatic	PBC	26394269	ebi-a-GCST003129	16
Digastina	CD	26192919	ieu-a-12	77
Digestive	IBD	23128233	ieu-a-292	81
Breast	Breast cancer	29059683	ieu-a-1126	86
Cognition	Reaction time	NA	Local-UKBB	18
	Coffee intake	NA	Local-UKBB	11
	Fresh fruit	NA	Local-UKBB	15
	Tea intake	NA	Local-UKBB	12
Lifestyle	Sleep duration	NA	Local-UKBB	8
	Summer outdoor activity hour	NA	Local-UKBB	14
	Body weight	NA	Local-UKBB	161

832 References

- 833 1. Bowden, J. et al. A framework for the investigation of pleiotropy in two-sample summary
- data Mendelian randomization. *Stat Med* **36**, 1783–1802 (2017).
- 835 2. Burgess, S. & Thompson, S. G. Interpreting findings from Mendelian randomization using the
- 836 MR-Egger method. *Eur J Epidemiol* **32**, 377–389 (2017).
- 837 3. Wen, J. et al. Novel genomic loci and pathways influence patterns of structural covariance in
- the human brain. 2022.07.20.22277727 Preprint at
- 839 https://doi.org/10.1101/2022.07.20.22277727 (2022).
- 4. Zhao, B. et al. Genome-wide association analysis of 19,629 individuals identifies variants
- 841 influencing regional brain volumes and refines their genetic co-architecture with cognitive and
- 842 mental health traits. *Nat Genet* **51**, 1637–1644 (2019).
- 843 5. Zhao, B. *et al.* Common genetic variation influencing human white matter microstructure.
- 844 *Science* **372**, (2021).
- 845 6. Zhao, B. *et al.* Common variants contribute to intrinsic human brain functional networks. *Nat*
- 846 *Genet* **54**, 508–517 (2022).
- 847 7. Deelen, J. et al. A meta-analysis of genome-wide association studies identifies multiple
- 848 longevity genes. *Nat Commun* **10**, 3669 (2019).
- 849 8. Hill, W. D. *et al.* Genome-wide analysis identifies molecular systems and 149 genetic loci
 850 associated with income. *Nat Commun* 10, 5741 (2019).
- 851 9. Codd, V. *et al.* Polygenic basis and biomedical consequences of telomere length variation. *Nat*852 *Genet* 53, 1425–1433 (2021).
- 853