

## Supplementary Tables

**Supplementary Table 1. Second-stage replication with the UKPDS and meta-analysis.** Two multiple linear regression models of HbA1c reduction with (shaded) or without (non-shaded) adjustment for baseline HbA1c were used to evaluate the replication. Only rs8192675 showed nominally significant replication in the model without baseline adjustment.

SNP	Gene	Allele	GWAS Screening and First-Stage Replication					Second-Stage Replication					Meta-analysis up to the Second Stage					Rep	
			Adjusted		Non-Adjusted		Adjusted		Non-Adjusted		Adjusted		Non-Adjusted		Adjusted				
			N	BETA	P	BETA	P	N	BETA	P	BETA	P	N	BETA	P	BETA	P		
rs3013105	LRRC38	C	2294	0.105	0.000272	0.114	0.006599	1156	-0.002	0.9671	-0.058	0.386	3450	0.083	0.00123	0.066	0.064009	-+	
rs41404544	KCNA2	C	2704	-0.218	8.81E-05	-0.188	0.02003	1177	-0.166	0.1465	-0.096	0.481	3881	-0.208	3.12E-05	-0.164	0.018231	--	
rs34053484	ALCAM	C	2701	-0.144	7.37E-08	-0.187	1.49E-06	1166	0.057	0.3196	0.105	0.127	3867	-0.108	7.35E-06	-0.117	5.55E-04	+-	
rs1828652	PLSCR4	T	2298	0.082	0.004901	0.082	0.05232	1125	-0.024	0.6746	-0.059	0.3773	3423	0.060	0.021366	0.042	0.245015	-+	
<b>rs8192675</b>	<b>SLC2A2</b>	<b>C</b>	<b>2296</b>	<b>0.131</b>	<b>4.68E-05</b>	<b>0.224</b>	<b>1.42E-06</b>	<b>1160</b>	<b>0.112</b>	<b>0.06138</b>	<b>0.167</b>	<b>0.02022</b>	<b>3456</b>	<b>0.127</b>	<b>7.58E-06</b>	<b>0.207</b>	<b>1.04E-07</b>	<b>++</b>	
rs1011691	LOC401134	G	2635	0.107	0.000296	0.110	0.01005	1190	0.037	0.5619	0.047	0.5366	3825	0.094	4.09E-04	0.095	0.010775	++	
rs6867983	C5orf67	T	2296	0.135	0.000842	0.226	0.000102	1170	0.074	0.3429	0.071	0.4423	3466	0.122	6.66E-04	0.182	2.13E-04	++	
rs3843467	C5orf67	T	2301	0.116	0.000945	0.191	0.000158	1183	0.039	0.5647	0.065	0.4196	3484	0.100	0.001356	0.156	2.77E-04	++	
rs9497852	SAMD5	G	2298	-0.118	0.007368	-0.037	0.5569	1163	0.118	0.1562	0.102	0.3058	3461	-0.066	0.087231	0.003	0.954565	+-	
rs11231159	EML3/MTA2	T	2299	-0.139	0.001986	-0.192	0.003022	1205	0.018	0.8321	0.016	0.8729	3504	-0.104	0.008516	-0.131	0.016024	+-	
rs1957572	RAD51B	C	2684	0.140	0.003691	0.117	0.09534	1205	0.031	0.7606	0.054	0.6546	3889	0.120	0.005879	0.101	0.095527	++	
rs4787778	HS3ST4	G	2709	-0.113	3.83E-05	-0.115	0.003801	1006	0.072	0.1872	0.110	0.08865	3715	-0.075	0.002022	-0.053	0.117235	+-	

**Supplementary Table 2. MetGen cohorts**

Cohort	Ethnicity	Citation (PUBMED)	Number Subjects	Genotyping				Clinical Covariates			Description of Cohort
				Platform	C-frequency	Call Rate	HWE-p	Adherence	EGFR/Creatin ine Clearance	Treatment Group	
ACCORD	European American	18539917	172	Array	25%	100%	NA	N	Y	Y	Randomised trial of intensive (target A1c 6%) vs conventional (A1c 7-8%)
DCS	European	22453232	748	TaqMan	29%	100%	0.92	N	Y	Y	Population, observational, EMR-linked
GoDARTS	European	21186350	3103	Array & Taqman	27%	100%	0.08	Y	Y	Y	Population, observational, EMR-linked
RIGA	European	22735389	74	Taqman	20%	99%	0.72	N	Y	N	Retrospective pharmacogenetic study
Rotterdam	European	19228809	325	Array	30%	100%	NA	Y	Y	Y	Population, observational, EMR-linked
Kosice	European	22882994	148	Taqman	28%	100%	0.88	Y	Y	N	Retrospective pharmacogenetic study
UKPDS	European	9742977	1223	Taqman	30%	82%	0.12	N	Y	Y	RCT, metformin and sulfonylureas
Sarajevo	European	NA	88	Taqman	35%	100%	0.48	N	Y	N	Population, observational, prospective
PMT1-EU	European American	24853734, 21956618, 23267855	292	Array	30%	100%	NA	N	Y	Y	Population, observational, EMR-linked
PMT2-EU <sup>2</sup>	European American	21565264, 26092716, 26092718	4384	Array	29%	100%	NA	Y	Y	Y	Population, observational, EMR-linked
PMT1-AF <sup>1</sup>	African American	NA	732	Array	68%	100%	NA	N	Y	Y	Population, observational, EMR-linked
PMT2-AF <sup>2</sup>	African American	21903159	369	Array	70%	100%	NA	Y	Y	Y	Population, observational, EMR-linked
PMT2-AS <sup>2</sup>	Asian American	21903159	627	Array	31%	100%	NA	Y	Y	Y	Population, observational, EMR-linked

**Supplementary Table 2. MetGen cohorts (Continued)**

PMT2-LA <sup>2</sup>	Latino	21903159	743	Array	24%	100%	NA	Y	Y	Y	Population, observational, EMR-linked
SAPPHIRE <sup>3</sup>	African American	24937318	95	Array	75%	100%	0.40	Y	Y	N	Population, observational, EMR-linked
DPP	European American	20682687	1502	Array	30%	100%	0.31	Y	Y	Y	IGT randomised to metformin or intensive exercise and followed up to incident diabetes
HOME	European	19307526	163	Taqman	29%	100%	0.17	Y	Y	N	RCT, metformin and insulin

Note<sup>1</sup>: Participants from PMT1-AF cohort were collected from Kaiser Permanente at Northern California and South East Georgia. This is a funded project to the Pharmacogenomics of Membrane Transporters (PMT) by the National Institute of Health (NIH) Pharmacogenomics Research Network (PGRN). The goal of the study was to identify genetic determinants of response to metformin in African Americans. This is a cohort study where the participants are African American adult with Type 2 diabetes on metformin with baseline HbA1c and treatment HbA1c and was identified through EMR. The identified participants were called back for blood samples for genotyping using Illumina OmniExpressExome Chip. For this replication study in multi-ethnic cohort, we imputed rs8192675 using IMPUTE2 and 1000 Genome Phase I.

Note<sup>2</sup>: As described in the Method section, participants from the PMT2 cohort were selected from the Genetic Epidemiology Research on Adult Health and Aging (GERA) cohort, a subsample of the Kaiser Permanente Research Program on Genes, Environment, and Health (RPEGH). The criteria for selecting the participants from GERA cohort have been described previously (24853734, 21956618, 23267855). A detailed description of the cohort and study design can also be found in dbGAP (dbGaP Study Accession: phs000674.v1.p1). Genotyping of the different ethnic groups in PMT2 were performed using the methods described in the publication provided in the table. We imputed rs8192675 using IMPUTE2 and 1000 Genome Phase I.

Note<sup>3</sup>: This cohort was established as an asthma pharmacogenomics study. However, by virtue of detailed medical record data on this cohort, metformin treatment and response could also be assessed. The methods for determining metformin exposure and response in this patient population have been described elsewhere (24921653).

URL: PGRN, <http://dbts.ucsf.edu/pgrn-cgm/projects.php?page=endocrinology>

**Supplementary Table 3. Association between rs8192675 and alternative measures of metformin efficacy in MetGen.** In HOME study of patients using metformin as add on treatment to insulin, the outcome of the change in daily dose of insulin (unit) was modelled in linear regression. In the DPP study of metformin prevention in pre-diabetes patients, the outcome of diabetes incidence was modelled with proportional hazard Cox regression.

Study	Allele	N	Effect Size	95% CI	P
HOME	C	163	0.08	[-0.02,0.18]	0.286
DPP	C	511	0.97	[0.72,1.31]	0.832

**Supplementary Table 4. Pharmacogenetic impact of rs8192675 on glycaemic response to metformin in participants of non-European ancestries.** The frequency and the effect size estimates were all reported for the C-allele. HbA1c was measured in percentage.

Ethnic groups	n	Frequency	Baseline Adjusted			Baseline Non-Adjusted		
			Beta	SE	p	Beta	SE	p
PMT2-AS (Asian American)	627	31%	0.12	0.049	0.014	0.124	0.093	0.186
PMT2-LA (Latino)	743	24%	0.114	0.06	0.059	0.14	0.102	0.168
PMT2-AF (African American)	369	68%	0.037	0.093	0.694	0.238	0.165	0.15
PMT1-AF (African American)	732	70%	0.031	0.047	0.499	0.183	0.11	0.096
SAPPHIRE (African American)	95	75%	-0.027	0.190	0.887	0.024	0.251	0.924
Combined	2566	--	0.077	0.028	0.006	0.150	0.054	0.005

**Supplementary Table 5. Association between rs8192675 and response to sulfonylureas in patients with type 2 diabetes.** The upper table shows the additive allelic effect (standard error) of the C-allele on HbA1c level or HbA1c reduction in each of the three cohorts. HbA1c was measured in percentage. The lower table shows the fixed-effect inverse-variance-weighted meta-analysis.

	n	Baseline HbA1c	On-treatment HbA1c	HbA1c Reduction	Baseline Adjusted HbA1c Reduction
GoDARTS	1859	0.10 (0.05)	0.02 (0.04)	0.08 (0.05)	0 (0.04)
UKPDS	387	0.15 (0.09)	0.43 (0.11)	-0.27 (0.12)	-0.39 (0.10)
DCS	408	0.36 (0.11)	0.21 (0.08)	0.15 (0.13)	-0.16 (0.08)
Combined Effect	2654	0.15 (0.04)	0.09 (0.03)	0.04 (0.05)	-0.06 (0.03)
Combined P-value	--	3.1E-04	0.006	0.44	0.04
Meta-Phet	--	0.12	6.2E-4	0.02	6.1E-4

**Supplementary Table 6. Pharmacogenetic impact of rs8192675 after adjusting for BMI.**

The percentage of obese patients is 54.8% in MetGen cohorts where BMI data are available. BMI adjusted analyses from the Rotterdam and PMT1-EU studies are not available. BMI data are only partially available for the PMT2-EU samples.

Study	#Obese	#Total	Baseline adjusted		Baseline non-adjusted	
			Beta	SE	Beta	SE
ACCORD	116	172	-0.034	0.114	-0.037	0.064
DCS	357	748	0.040	0.039	0.207	0.075
GoDARTS	1727	3103	0.112	0.027	0.200	0.040
Kosice	85	148	0.107	0.097	0.161	0.135
PMT2-EU	1367	2353	0.072	0.025	0.179	0.045
RIGA	73	74	-0.363	0.140	-0.267	0.370
Sarajevo	50	88	0.051	0.111	-0.164	0.188
UKPDS	557	1223	0.138	0.060	0.200	0.071
<b>Meta-analysis</b>	<b>4332</b>	<b>7909</b>	<b>0.078</b>	<b>0.015</b>	<b>0.155</b>	<b>0.024</b>

**Supplementary Table 7. Association between rs8192675 and SLC2A2 expression in other tissues.** Following the evidence that rs8192675 is a genomewide cis-eQTL for SLC2A2, we examined whether the variant (or its proxies) are associated with SLC2A2 expression in other tissues. A significance threshold of  $p < 0.05$  was used to draw supportive evidence. The GTEx data were based on data release V6. The direction of effect refers to the C-allele at rs8192675 or its linked alleles at the proxy SNPs (NS: not significant).

Tissue	P	Direction of Effect	n	Source
Cells - Transformed fibroblasts	0.0006	LOW	271	GTEx
Liver	0.13	NS	97	GTEx
Pancreas	0.74	NS	149	GTEx
Pituitary	0.92	NS	87	GTEx
Small Intestine - Terminal Ileum	0.9	NS	77	GTEx
Testis	0.98	NS	157	GTEx
Whole Blood	0.23	NS	338	GTEx
Islet	0.003	LOW	118	PMID: 26624892
Intestine	0.007	LOW	173	PMID: 23474282
Kidney	0.03	LOW	44	MetGen data

**Supplementary Table 8. Association between rs8192675 and SLC2A2 expression in the liver.** Within four liver eQTL data sets, linear regression was used to model SLC2A2 expression levels with adjustment of relevant covariates. Results from the four liver datasets were combined by meta-analysis. SLC2A2 expression level was determined using microarray and only include patients of European ancestry. The data was coded such that a negative beta means that as the number of minor C-allele increases there is decrease in SLC2A2 expression.

Dataset	n	Expression	Genotyping	P-value	Corrected P-value	Beta	PMID
Set 1	149	Illumina Human Whole Genome-6 v2.0 Expression BeadChip (NCBI GEO accession: GSE39036)	HumanHap300-Duo v2.0 Genotyping BeadChip (NCBI GEO accession: GSE32504)	0.013	0.211	-0.23	22006096
Set 2	168	Agilent-014850 Whole Human Genome 4x44K gene expression (NCBI GEO accession: GSE25935)	Illumina Human610-Quad v1.0 BeadChip (NCBI GEO accession: GSE26105)	1.6x10-4	0.014	-0.19	21637794
Set 3	326	Agilent Technologies (NCBI GEO accession: GSE9588)	Affymetrix GeneChip Human Mapping 500k genotyping microarray	0.175	0.627	-0.05	18462017
Set 4	583	Agilent Technologies (unpublished data)	HumanHap 650Y	3.2E-10	1.3E-8	-0.19	Unpublished
Meta	1226			1.1E-13	4.2E-12		

**Supplementary Table 9.** Primers used to clone the genomic region (chr3:170724251-170727543) encompass the *SLC2A2* variant, rs8192675 (chr3:170724883).

Primer	Note
Forward (+ strand): <u>GCTCGCTAGCCTCGAGGCAACCA</u> CCAGATAGAATAATAC	The genomic region cloned into Xhol and BgIII digested pGL4.23 using the Infusion HD cloning system (Clontech). The underlined region is the digestion site for Xhol and BgIII.
Reverse (+ strand): <u>CGCCGAGGCCAGATCTGGTTCTCGTCC</u> CATGGCAATG	

# Supplementary Notes

## Study Acknowledgements

**GoDARTS:** This study was partially funded by the Diabetes UK grant (10/0004063). We are grateful to all the participants in this study, the general practitioners, the Scottish School of Primary Care for their help in recruiting the participants, and to the whole team, which includes interviewers, computer and laboratory technicians, clerical workers, research scientists, volunteers, managers, receptionists, and nurses. The study complies with the Declaration of Helsinki. We acknowledge the support of the Health Informatics Centre, University of Dundee for managing and supplying the anonymised data and NHS Tayside, the original data owner. This study was partially funded by the Diabetes UK grant (10/0004063). The Wellcome Trust United Kingdom Type 2 Diabetes Case Control Collection (GoDARTS) was funded by The Wellcome Trust (084727/Z/08/Z, 085475/Z/08/Z, 085475/B/08/Z) and as part of the EU IMI-SUMMIT program. ERP holds a Wellcome Trust New Investigator Award (102820/Z/13/Z).

**UKPDS:** The work involved in this study was supported by the Wellcome Trust 090532, 098381; IMI DIRECT; NIDDK DK085545; Diabetes UK: 10/0004063; M.McC is a Wellcome Trust Senior Investigator, and an NIHR Senior Investigator. RRH is an NIHR Senior Investigator.

**ACCORD:** Research reported in this publication was supported by the National Heart, Lung, And Blood Institute of the National Institutes of Health under Award Number R01HL110380. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health. The authors would like to acknowledge the contribution of the ACCORD investigators.

**DPP:** The NIDDK of the National Institutes of Health provided funding to the clinical centers and the Coordinating Center for the design and conduct of the study; collection, management, analysis, and interpretation of the data. The Southwestern American Indian Centers were supported directly by the NIDDK and the Indian Health Service. The General Clinical Research Center Program, National Center for Research Resources supported data collection at many of the clinical centers. Funding for data collection and participant support was also provided by the Office of Research on Minority Health, the National Institute of Child Health and Human Development, the National Institute on Aging, the Centers for Disease Control and Prevention, Office of Research on Women's Health, the Department of Veterans Affairs, and the American Diabetes Association. Bristol-Myers Squibb and Parke-Davis provided medication. This research was also supported, in part, by the intramural research program of the NIDDK. LifeScan Inc., Health O Meter, Hoechst Marion Roussel, Inc., Merck-Medco Managed Care, Inc., Merck and Co., Nike Sports Marketing, Slim Fast Foods Co., and Quaker Oats Co. donated materials, equipment, or medicines for concomitant conditions. McKesson BioServices Corp., Matthews Media Group, Inc., and the Henry M. Jackson Foundation provided support services under subcontract with the Coordinating Center. The opinions expressed are those of the investigators and do not necessarily reflect the views of the Indian Health Service or other funding agencies. A complete list of Centers, investigators, and staff can be found in the online Appendix. The investigators gratefully acknowledge the commitment and dedication of all participants in the DPP, without whom this work would not have been possible. This work was funded by R01 DK072041 to JCF and KAJ.

**DCS:** This project is supported by the Diabetes Care System West-Friesland, the Netherlands. The DCS cohort was partially funded by the Netherlands Organisation for Health Research and Development (Priority Medicines Elderly Programme 113102006) and IMI-DIRECT.

**RIGA:** The OPTIMED study which provided the data for this analysis was supported by State Research Programme "Development of advanced prevention strategies, treatment, diagnostic tools and methods, biomedical technologies for improving public health" and the National Research Programme "Biomedicine for Public Health" (BIOMEDICINE) and European Social Fund within the project "Support for Doctoral Studies at University of Latvia". DNA samples were provided by Genome Database of Latvian Population.

**Kosice:** IT was supported by research grant APVV-0134-11 and VEGA 1/0389/14 from the Ministry of Education, Slovakia. MJ was supported by research grants VEGA 1/0389/14 from the Ministry of Education, Slovakia.

**SAPPHIRE:** Funding for the SAPPHIRE cohort was provided by the American Asthma Foundation, the Fund for Henry Ford Hospital, and the following institutes of the U.S. National Institutes of Health - National Heart Lung and Blood Institute (R01HL118267), the National Institute of Allergy and Infectious Diseases (R01AI079139), and the National Institute of Diabetes and Digestive and Kidney Diseases (R01DK064695).

**Sarajevo:** The study was supported by grants received from the Council of Ministers/ Ministry of Civil Affairs of Bosnia and Herzegovina and the Federal Ministry for Education and Science of Bosnia and Herzegovina awarded to S.S., and by a European Foundation for the Study of Diabetes Albert Renold Travel Fellowship to T.D.

**PMT1&PMT2:** The study was supported in part by grants from the NIH (U19GM061390 and R01GM117163). Genotyping of the PMT1 cohort was supported by a collaboration between the NIH Pharmacogenomics Research Network (PGRN) and the RIKEN Center for Integrative Medical Sciences, PGRN-RIKEN Global Alliance. The genotyping of the PMT2 cohort (also known as GERA cohort) was supported by grant RC2 AG036607 from the National Institutes of Health; development of the GERA cohort was supported by grants from the Robert Wood Johnson Foundation, the Ellison Medical Foundation, the Wayne and Gladys Valley Foundation, and Kaiser Permanente. We also thank the Kaiser Permanente RPGEH for providing the phenotype and genotype data and the computational time. We would like to acknowledge all the clinical staff involved in recruitment and collection of data for PMT1 and PMT2 cohort.

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