



Institutionen för husdjursgenetik

# Genetic association of Canine Lymphocytic Thyroiditis (CLT) with DLA class II in Giant Schnauzer and Hovawart dogs

by

*Maria Wilbe*

Handledare:

*Göran Andersson*

*Katarina Stenshamn*

*Katarina Ferm*

**Examensarbete 297**

**2007**

---

Examensarbete ingår som en obligatorisk del i utbildningen och syftar till att under handledning ge de studerande träning i att självständigt och på ett vetenskapligt sätt lösa en uppgift. Föreliggande uppsats är således ett elevarbete och dess innehåll, resultat och slutsatser bör bedömas mot denna bakgrund. Examensarbete på D-nivå i ämnet husdjursgenetik, 20 p (30 ECTS).





**Institutionen för husdjursgenetik**

# **Genetic association of Canine Lymphocytic Thyroiditis (CLT) with DLA class II in Giant Schnauzer and Hovawart dogs**

**by**

***Maria Wilbe***

**Agrovoc:** Canine lymphocytic thyroiditis, Cytotoxic T lymphocyte-associated 4, Dog leukocyte antigen, Major Histocompatibility Complex, Autoimmunity

Handledare:

*Göran Andersson*

*Katarina Stenshamn*

*Katarina Ferm*

**Examensarbete 297  
2007**

---

Examensarbete ingår som en obligatorisk del i utbildningen och syftar till att under handledning ge de studerande träning i att självständigt och på ett vetenskapligt sätt lösa en uppgift. Föreliggande uppsats är således ett elevarbete och dess innehåll, resultat och slutsatser bör bedömas mot denna bakgrund. Examensarbete på D-nivå i ämnet husdjursgenetik, 20 p (30 ECTS).



# **Genetic association of Canine Lymphocytic Thyroiditis (CLT) with DLA class II in Giant Schnauzer and Hovawart dogs**

**Maria Wilbe**

## **Abstract**

Canine Lymphocytic Thyroiditis (CLT) resembles naturally occurring lymphocytic thyroiditis in White Leghorn chickens and Hashimoto's thyroiditis in man. It is a common autoimmune endocrine disease in dogs which is a result of destruction of the thyroid glands. Many autoimmune diseases show associations with the major histocompatibility complex (MHC) class II alleles.

Within the canine Major Histocompatibility Complex (*DLA*) some of the class II genes are highly polymorphic. In this study an evaluation of the association between *DLA* class II haplotype and the risk for developing CLT has been performed by sequencing the polymorphic exon 2 from the genes *DLA-DRB1*, *DLA-DQA1* and *DQB1*.

Two high-risk breeds for developing CLT, Giant Schnauzer and Hovawart, have been analysed from a total of 198 dogs. Included in the study were 35 healthy controls, 3 borderline cases and 87 CLT-positive dogs.

Results show that Giant Schnauzers carrying the haplotype *DRB1\*01201DQA1\*00101DQB1\*0020* have an increased risk to develop CLT, cases 22.5% versus controls 4.5%.

This with an odds ratio = 6.0667 and with a p value = 0.015401 which shows that the increased risk to develop CLT is statistically significant.

In Hovawart dogs the risk haplotype *01201\*00401\*013017* was present in 45 % (cases 43% versus controls 50%) of the total dogs analyzed. In this breed there was no evidence for an increased risk to develop CLT for dogs with this haplotype.



# Index

<b>1. Abbreviations</b> .....	<b>2</b>
<b>2. Introduction</b> .....	<b>3</b>
<b>2.1. Autoimmunity</b> .....	<b>3</b>
<b>2.2 Canine Lymphocytic Thyroiditis</b> .....	<b>4</b>
2.2.1. Hypothyroidism.....	4
2.2.2. Symptoms.....	5
2.2.3. Clinical diagnosis.....	5
<b>2.3 MHC class II</b> .....	<b>5</b>
<b>2.4. Giant Schnauzer and Hovawart as model breeds</b> .....	<b>6</b>
<b>3. Material and methods</b> .....	<b>7</b>
<b>3.1. Study material</b> .....	<b>7</b>
<b>3.2. Clinical diagnosis</b> .....	<b>7</b>
<b>3.3. Extraction of genomic DNA</b> .....	<b>7</b>
<b>3.4. PCR amplification</b> .....	<b>7</b>
<b>3.5. Sequencing</b> .....	<b>8</b>
<b>3.6. Data analysis</b> .....	<b>8</b>
<b>3.7. Statistical analysis</b> .....	<b>8</b>
<b>4. Results</b> .....	<b>9</b>
<b>4.1. Clinical diagnosis</b> .....	<b>9</b>
<b>4.2. Data analysis</b> .....	<b>9</b>
<b>4.3. Statistical analysis</b> .....	<b>10</b>
<b>5. Discussion</b> .....	<b>11</b>
<b>6. Acknowledgement</b> .....	<b>13</b>
<b>7. References</b> .....	<b>14</b>
<b>8. Supplementary tables</b> .....	<b>16</b>
<b>8.1. Table S1. Clinical and diagnostic information for all dogs</b> .....	<b>16</b>
<b>8.2. Table S2A. Giant Schnauzer 2x2 Contingency tables</b> .....	<b>21</b>
<b>8.3. Table S2B. Hovawart 2x2 Contingency tables</b> .....	<b>23</b>

## 1. Abbreviations

CLT	Canine lymphocytic thyroiditis
CTLA4	Cytotoxic T lymphocyte-associated 4
DLA	Dog leukocyte antigen
GS	Giant Schnauzer
GWA	Genome-wide Association
HLA	Human leukocyte antigen
HW	Hovawart
LYP	Lymphoid tyrosine phosphatase
MHC	Major Histocompatibility Complex
T3	Thyronin
T4	Thyroxin
TgAA	Thyroglobulin autoantibody
TSH	Thyroid stimulating hormone



## 2. Introduction

The major histocompatibility complex (*MHC*) class II genes are strong genetic risk factors for many autoimmune diseases including Lymphocytic Thyroiditis in canines. Two dog breeds, Giant Schnauzer (GS) and Hovawart (HW), which shows an increased risk for developing the disease, were included in the study.

A genetic association between canine lymphocytic thyroiditis (CLT) and the *DLA-DRB1\*01201* allele has already showed to be an increased risk factor.<sup>1</sup>

The aims of this study is to extend the *DLA-DRB1* study by also determine the nucleotide sequence of the polymorphic exon 2 for *DLA-DQAI* and *-DQBI* genes and then evaluate whether there is an association between DLA class II haplotype and the risk for developing CLT.

### 2.1 Autoimmunity

The immune system's task is to protect the body against foreign organisms and material. Therefore it is essential to know what is self (autoantigen) and what is foreign (non-self) to the body. Autoimmunity is the failure of an organism to completely recognize what is self and what is foreign to the body. This results in an immune response against its own cells and /or tissue.<sup>2</sup>

Most immunodeficiency diseases results from a defective gene which results in an elimination or mutation in one or more components in the immune system. This can effect T- or B-lymphocyte development, phagocyte function and components of the complement system.

Self tolerance is normally controlling and preventing autoimmune diseases.<sup>3</sup> During development, self and non-self antigens are presented by MHC class I and II molecules to T-lymphocytes. Those T-cells that interact get a protective signal that prevents apoptosis. Those that have not reacted with MHC go through cell death. This process is known as positive selection. During negative selection, the surviving thymocytes are tested for affinity for MHC molecules on antigen presenting cells. Only those with a low to moderate affinity are able to mature.<sup>4</sup>

Despite this process, some self-reacting lymphocytes do mature and can be activated and cause autoimmune diseases, also not all self antigens are expressed during development.<sup>3</sup>

Autoimmune diseases can be classified into two types, organ-specific or systemic. In organ-specific autoimmune diseases the autoimmunity is only expressed in a certain organ compared to systemic, where many tissues in the body are affected. Table 1a and b shows organ-specific and systemic autoimmune diseases in humans and which autoantigen that is recognized.<sup>2</sup>

*Table 1a. Organ-specific autoimmune diseases in humans.*<sup>2</sup>

Autoantigen	Disease	Target organ
TSH receptors (hGT)	Grave's disease	Thyroid glands
Thyroid peroxidase	Hashimoto's thyroiditis	Thyroid glands
Myelin sheath	Multiple Sclerosis	Central nervous system
Beta cells (IA-2, GAD, GM2-1)	Type 1 diabetes mellitus	Pancreas

Table 1b. Systemic autoimmune diseases in humans.<sup>2</sup>

Autoantigen	Disease
Joints, skin, blood vessels, heart, lungs and muscles	Rheumatoid arthritis
Cells in skin, kidney and brain	Systemic lupus erythematosus
Skin and intestine	Scleroderma
Salivary glands, tear glands and joints	Sjögren's syndrome

Autoimmune diseases are a result of multiple factors, both genetic and environmental.

Most of the genes that are predisposing factors affect autoantigen availability, apoptosis, signalling pathways, cytokine expression and expression of co-stimulatory molecules.<sup>3</sup>

## 2.2. Canine Lymphocytic Thyroiditis

Canine hypothyroidism is a common endocrine disease of dogs and approximately half of all cases are caused by lymphocytic thyroiditis, which is similar to Hashimoto's thyroiditis in man and lymphocytic thyroiditis in White Leghorn chickens. The disease is characterized by an increase of infiltration of autoreactive T cells and other activated lymphocytes in the thyroid gland, autoantibodies against proteins from the thyroid gland and high concentrations of thyroid stimulating hormones (TSH).<sup>5</sup>

### 2.2.1. Hypothyroidism

Hypothyroidism is a result of destruction of the thyroid gland. The thyroid gland is located in the neck, above the larynx and its main function is to produce thyroxin (T4) that regulates the metabolism. If the T4 levels in the blood are too low the pituitary glands is stimulated to produce TSH by hypothalamus that produces TRH.<sup>6</sup> Secretion of TSH stimulates secretion of T4 and triiodothyronine (T3). When the T4 and T3 levels increase the TSH secretion is inhibited by negative feedback.<sup>7</sup> See Figure 1.

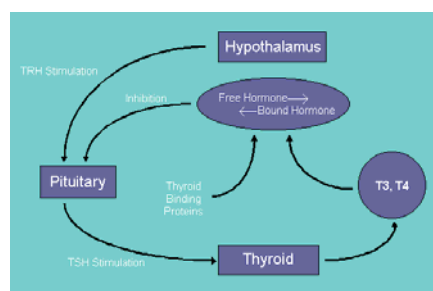


Figure 1. Regulation of thyroid hormones through a negative feedback mechanism<sup>8</sup> (Cargill, J. et al. 2005. *Hypothyroidism article*).

The physiology of thyroid glands is the basics for all tests for hypothyroidism. The cause of hypothyroidism can be classified as primary, secondary or tertiary. At the primary causes, the levels of T4 and T3 are low but the TSH secretion is increased which is associated with the thyroid glands. Secondary causes are associated with a deficiency of TSH and pituitary glands and tertiary causes with a TRH deficiency from hypothalamus. CLT is an autoimmune disease that is associated with the primary

causes where the thyroid glands are infiltrated with lymphocytes that destroy the thyroid cells that produce T4. Therefore a large amount of free T4 is circulating in the bloodstream and also an increase of TSH can be shown.<sup>6</sup>

### 2.2.2. Symptoms

The thyroid gland regulates the cell metabolism. The hormones produced by the thyroid glands are necessary for embryonic development, stimulate protein and enzyme synthesis and also protein and fat metabolism. Therefore, a dysfunction in the thyroid glands produces a wide range of different symptoms. More than 75 % of the thyroid glands need to be destroyed to develop symptoms. Since the cellular metabolism is decreasing with an absence of thyroid hormones the first symptoms can be tiredness and inactivity. Also reproduction and the central nervous system can be affected. A weight gain, depression, weakness and freezing are other clinical sign of a decrease in metabolism. Dermatological changes can also be observed. The fur becomes dry or fat and oily.<sup>9</sup>

### 2.2.3. Clinical diagnosis

Diagnosis requires laboratory testing where the T4 and TSH assays provide the most accurate information. Both increases in the T4 levels and TSH provide good evidence for CLT. Amount of T3 is not by itself a good indicator because the secretion does not decrease significant. Thyroglobulin autoantibodies (TgAA) occur frequently in dogs diseased with CLT. Therefore analysis for the presence of these autoantibodies is also performed during clinical diagnosis.<sup>7</sup>

## **2.3. MHC class II**

In humans, three gene regions have shown to be particularly involved in autoimmune diseases: The human leukocyte antigen (*HLA*) class II region, the gene encoding cytotoxic T lymphocyte-associated 4 (*CTLA4*) and the gene encoding lymphoid tyrosine phosphatase (*LYP*).<sup>10</sup> Among these, most autoimmune diseases show associations with MHC class II alleles. This is not surprising since autoimmune responses involve the ability for T cells to recognise a particular antigen and this is dependent on the MHC genotype.<sup>3</sup>

The *HLA* class II region is a part of the *MHC* and is located on chromosome 6p21. Alleles and haplotypes of *DQB1*, *DQAI* and *DRB1* have shown to either predispose or protect for many autoimmune diseases.<sup>10</sup>

Hashimoto's thyroiditis shows an association with the *HLA-DR5* haplotype with a relative risk of 3.2.<sup>3</sup> Because of that it is interesting to also study this gene in dogs diseased with CLT.

The canine Major Histocompatibility Complex (*DLA*) is located on chromosome 12 and can as in other mammalian species be divided into class 1, 2 and 3 regions. The structures of *DLA* class II genes are similar to humans. The *DLA* region contains one functional gene at each locus i.e. *DQAI*, *DQB1* and *DRB1* (which are orthologs to human). The *DQB1*, *DQAI* and *DRB1* loci are in high linkage disequilibrium and haplotypes can therefore be used as genetic risk factors. *DQAI* and *DQB1* are located very close to each other and in complete LD and recombination between them has never been observed.

Within the *DLA* class II complexes, the genes are highly polymorphic. The latest report documents 61 *DLA-DRB1* alleles, 18 *DLA-DQAI* alleles and 47 *DLA-DQB1* existing alleles.<sup>12</sup>

#### **2.4. Giant Schnauzer and Hovawart as model breeds**

The domestic dog, *Canis familiaris*, is an excellent model species having over 400 recognized breeds in which to study complex inherited diseases. These breeds are phenotypically diverse and each represents a closed breeding population. Several autoimmune diseases exist in dogs and can be compared to humans in both symptoms and inheritance. This is due to the genetic bottleneck caused by breed creation.<sup>13</sup>

A higher incidence for hypothyroid diseases have been reported for Dobermans, Great Danes, Irish Setter, Miniature Schnauzer, Boxers, Golden Retrievers, Dachshunds, Shetlands Sheepdogs, Pomeranians, Cocker Spaniel and Airedale Terriers<sup>14</sup>. Giant Schnauzer and Hovawart are two dog breeds that previously not have been reported as being high risk breeds. The overall prevalence in the Swedish GS and HW population was shown to be 14.0 % versus 13.7 % for CLT.<sup>14</sup>

### 3. Material and methods

#### 3.1. Study material

Blood samples from two high-risk breeds Giant Schnauzer and Hovawart are available from the registry at the Swedish Kennel Club. Two birth cohorts (1992 and 1995) at 7-8 and 4-5 years of age, respectively, were collected and analysed. Clinical and diagnostic information is available for 198 dogs and is summarized in supplementary Table S1. A total of 35 controls (GS=22; HW=13), 3 borderline cases (GS=3; HW=0) and 87 CLT-positive cases (GS=58; HW=29) were included in the study.

#### 3.2. Clinical diagnosis

Each dog in the study was classified by strict inclusion and exclusion criteria. TSH levels above 29mgU/l and TgAA concentration at  $\geq 150\%$  compared to a negative control serum were used as inclusion criteria. Exclusion criteria were TSH levels below 20mgU/l and TgAA concentration below 100% compared to a negative control serum. Borderline cases were dogs with TSH levels between 20-29mgU/l and TgAA concentration between 100-150% compared to a negative control serum.

#### 3.3. Extraction of genomic DNA

Genomic DNA was extracted from 200  $\mu$ l blood using a salt extraction method. The concentration and quality of the DNA were measured by NanoDrop ND-1000 spectrophotometer 3.1.0.

#### 3.4. PCR amplification

PCR was performed according to protocol developed by Lorna Kennedy, Manchester University. PCR reactions was performed using 20ng DNA in a 20 $\mu$ l reaction containing 1x PCR buffer as supplied by Qiagen (with no extra  $Mg^{2+}$ ), Q solution (Qiagen), final concentrations of 0.1 $\mu$ M for each primer, 200 $\mu$ M each dNTP, with 2 units of Taq polymerase, (Qiagen HotStarTaq). For primers used to amplify *DLA-DRB1*, *DQA1* and *DQB1* respectively, see table 2. All primers are intronic and locus specific. Both M13 and T7 tailed primers were used for labelling the PCR products. Better results were generated for *DQA1* with tailed M13 primers and for *DRB1* and *DQB1* with T7.

Table 2. Primers used to sequence *DLA-DRB1*, *DQA1* and *DQB1*. (10)

Primer	Primer sequence 5'-3'	Product size
DRB1 R	(T7)TGT GTC ACA CAC CTC AGC ACC A	303 bp
DQA1 R	GGA CAG ATT CAG TGA AGA GA	345 bp
DQB1 F	(T7)CTC ACT GGC CCG GCT GTC TC	300 bp
T7	TAA TAC GAC TCA CTA TAG GG	
M13	TGT AAA ACG ACG GCC AGT <sup>15</sup>	

A standard Touchdown PCR protocol was used for all amplifications, which consisted of an initial 15 minutes at 95°C, 14 touch down cycles of 95°C for 30 seconds, followed by 1 minute annealing, starting at 62°C (*DRBI*), 54°C (*DQAI*) 73°C (*DQBI*) and reducing by 0.5°C each cycle, and 72°C for 1 minute. Then 20 cycles of 95°C for 30 seconds, 55°C (*DRBI*), 47°C (*DQAI*) 66°C (*DQBI*) for 1 minute, 72°C for 1 minute plus a final extension at 72°C for 10 minutes.

### 3.5. Nucleotide sequence analysis

Sequencing was performed by Lark Technologies DNA sequencing services (LARK, Texas and England). Sequencing was only made in one direction, reverse for *DRBI* and *DQAI* and forward for *DQBI*.

### 3.6. Data analysis

The sequence data were analyzed by using the Macintosh software, MatchTools and MatchToolsNavigator (AppliedBiosystems, CA, USA), also used for assigning the alleles. The sequences were firstly read in the program MatchToolsNavigator and compared to an already prepared consensus sequence.<sup>12</sup> Each polymorphic site was viewed and manually examined. When the sequence had been corrected, the sequence was put in the program MatchTools. A reference sequence library was already created<sup>6</sup> and used to compare obtained sequence data with. MatchTools then provides a report of the closest matching allele.

### 3.7. Statistical analysis

Statistical analyses were performed using VassarStats<sup>16</sup> using a 2x2 Contingency Table to investigate if the results were statistically significant. Cases and controls were divided into presence or absence of the allele and the total number of individuals in each group was calculated. Then a comparison was made to the total number of alleles in each group. Odds Ratios (OR), Relative Risk (RR) and p-values were calculated for each haplotype in both Giant Schnauzer and Hovawart. Both the odds ratio and the relative risk compare the likelihood of an event between two groups. The estimation of the RR can be calculated using the formula:

$$RR = (a/c)*k / (b/d)*k = (a/c)/(b/d) = ad/bc$$

A RR close to 1 implies no risk for those who are carrying the allele to develop the disease. RR values above 1 show an increased risk and below 1 a lower risk for developing the disease. A stronger association is seen the further away from 1 the number is calculated. To determine if the association is significant p-values are calculated. A p-value < 0.05 shows statistical significance.

For the  $\chi^2$  test Yates continuity correction values were used.  $\chi^2$  tests are performed to imply that the observed data did not arise by chance.<sup>19</sup>

## 4. Results

### 4.1. Clinical diagnosis

Diagnostic criteria of all available samples are found in Table 3 and supplementary Table S1.

Table 3. Diagnostic criteria and status of presented samples in Hovawart and Giant Schnauzer<sup>1</sup>.

Diagnosis code	Diagnostic criteria	Presented samples	Status
1	TgAA $\geq$ 199 and TSH $\geq$ 39	14	Case
2	TgAA $\geq$ 199	19	Case
3	TSH $\geq$ 39	23	Case
4	CLT diagnosed and under treatment	9	Case
5	200>TgAA>149 and 40>TSH> 29	0	Case
6	200>TgAA> 149	14	Case
7	40>TSH> 29	8	Case
8	TSH<20, TgAA<100, T4 5-25, age >8years when analysed	28	Control
9	TSH<20, TgAA<100, T4 5-25, exact age not available	7	Control
10	150>TgAA> 100 and 29>TSH> 20	3	Borderline case
?	Can not be classified	73	-
Blank	Values are missing	6	-

### 4.2. Data analysis

Supplementary Table S1 shows all haplotypes generated. Table 4A shows the haplotype frequency for cases and controls in Giant Schnauzer and table 4B in Hovawart. The 01201\*00101\*00201 haplotype shows an increased risk (cases 22.5% versus controls 4.5%) for Giant Schnauzer to develop CLT.

Table 4A. Haplotype frequency within cases and controls for Giant Schnauzer.<sup>1</sup>

Haplotype (DRB1*DQA1*DQB1)	Haplotype frequency (%) Cases and Controls (160)	Haplotype frequency (%) Cases (116)	Haplotype frequency (%) Controls (44)
00101*00101*00201	28	26	32
00601*00401*01303	11.5	8.5	18
00901*00101*008011	1.5	0	4.5
01201*00101*00201	17.5	22.5	4.5
01301*00101*00201	8	9.5	4.5
01301*00301*00501	22.5	24	18
02301*00301*00501	9.5	7	16
09401*00401*01303	0	0	0
09501*00101*00201	0	0	0
01501*00601*00301	2	1.5	2

Table 4B. Haplotype frequency within cases and controls for Hovawart.<sup>1</sup>

Haplotype ( <i>DRB1*DQA1*DQB1</i> )	Haplotype frequency (%) Cases and Controls (84)	Haplotype frequency (%) Cases (58)	Haplotype frequency (%) Controls (26)
00201*00901*00101	19	24	7.5
01101*00201*01302	6	3.5	11.5
01201*00401*013017	45	43	50
01301*00101*00201	13	15.5	7.5
01301*00101*00802	1	0	4
01501*00601*00301	6	5	7.5
01501*00601*04901	1	0	4
01501*00601*049v	3.5	1.5	7.5
01501*00601*02301	1	1.5	0
03001*00601*00301	3.5	5	0

<sup>1</sup> Representing cases (diagnosis code 1-6) versus controls (diagnosis code 8 and 9).

### 4.3. Statistical analyses

Odds Ratios and p-values were calculated for each allele in both Giant Schnauzer and Hovawart, see supplementary table S2A and S2B. The 2x2 Contingency table for *DLA-DRB1\*01201DQA1\*00101DQB1\*00201* in Giant Schnauzer shows an increased risk with an odds ratio = 6.0667 and p = 0.015401 for developing CLT. See table 4.

Table 5. 2x2 Contingency table for *DLA-DRB1\*01201DQA1\*00101DQB1\*00201* in Giant Schnauzer.<sup>1</sup>

Antigen	01201*00101*00201 +	01201*00101*00201 -	Total
Case	26	90	116
Control	2	42	44
Total	28	132	160

<sup>1</sup> Representing cases (diagnose code 1-6) versus controls (diagnose code 8 and 9).

Risk ratio: 4.931

Odds ratio: 6.0667

X<sup>2</sup>: 5.87

p = 0.015401



## 5. Discussion

The aims of this study were to determine the nucleotide sequence of the polymorphic exon 2 from three *DLA* loci i.e. *DLA-DRB1*, *DQA1* and *DQB1* and then evaluate the association between *DLA* class II haplotype and the risk for developing CLT. In GS the *01201\*00101\*00201* haplotype shows an increased risk (cases 22.5% versus controls 4.5%) with an odds ratio = 6.0667 and  $p = 0.015401$  for developing CLT.

In HW the risk haplotype *01201\*00401\*013017* was present in 45 % (cases 43% versus controls 50%) of the total dogs analyzed.

The haplotype *01301\*00101\*00201* also shows an increased risk (cases 15.5% versus controls 7.5%) for developing CLT. This indicates that *DRB1* is not the genetic risk factor. Instead *DQA1* and *DQB1* could be the genetic factors in the *MHC* that leads to an increased risk for developing the disease. Nucleotide sequence alignment of the *DQA1\*00401* with *DQA1\*00101* sequences revealed that there is only three amino acids differences between the two alleles (Fig. 2). The consensus sequence shows where differences are located. The observed amino acid substitutions are non-conservative. At position X, there is an asparagine to tyrosine change. Asparagine is hydrophilic and tyrosine is hydrophobic. At position X, arginine which has basic side-chains is changed for a threonine with hydrophilic side-chains. Finally, at position X, methionine is changed for a leucine. Both have hydrophobic side-chains. Since this is rather large changes within the hypervariable regions, the antigen binding site is likely to be influenced by these amino acid replacements. If the haplotype *01201\*00401\*013017* is a risk haplotype, the *DQA1* region may not be involved in the risk for developing CLT. Instead *DRB1* would be the risk factor. But if *01301\*00101\*00201* is a risk haplotype *DQA1* and *DQB1* would be the risk factor.

/Library/WebServer/Documents/emboss/output/888478/sequences



Figure 2. Alignment between *DQA1\*00401* and *DQA1\*00101* (EMBOSS, PrettyPlot).

In GS, the haplotype *00601\*00401\*01303* may be protective (cases 8.5% versus controls 18%). However, too few samples carrying this haplotype were found and the protective association is only suggestive.

Inbreeding predisposes for autoimmune diseases. Variation in *MHC* is important and is not maintained in inbred dogs. Therefore, CLT is so common in both Giant Schnauzer and Hovawart.

A gender difference in Hashimoto's thyroiditis can be shown in humans where women have a four to five times higher risk than men to develop the disease. This can imply that sex hormones are involved in the development of the human disease. In contrast, our results corroborate the lack of gender effect for CLT risk.<sup>16</sup>

Recombination has never been observed between DQA1 and DQB1. Therefore one can assume the haplotype if the allele at the *DRB1* locus and either of *DQA1* or *DQB1* is known. Sequencing is therefore not necessary for all three loci.

A genome-wide association mapping (GWA) can be performed in future studies to identify additional genes contributing to the disease. The dog genome sequence of a boxer covering 97% of the genome and approximately 19.300 genes were determined.<sup>18</sup> Sequence comparison between additional dog breeds resulted in identification of ~2.5 million SNPs. From this a 27,000 SNP array has been developed for a GWA mapping. To perform this analysis more CLT cases and healthy controls are required. Power calculations have indicated that at least samples from 100 individuals in each category are needed for a disease with 5-fold increased risk i.e. similar to that of CLT. At present time, a total of 87 cases and 35 controls have been collected.<sup>18</sup>

Obtained information about the disease-causing genes can then be used in selective breeding practice in an effort to reduce the frequency of CLT. E.g. a particular MHC in combination with other genes can be a disease-causing combination. By not breed on these dogs, healthier dogs can be created.

These results also give us a better knowledge about MHC, antigen presentation and why a particular MHC gives an increased risk for developing CLT.

## **6. Acknowledgement**

First I would like to thank my supervisor Göran Andersson for guidance, inspiration and the overall support with my project.

I would also like to thank Lorna Kennedy for the help with the PCR, teaching me the software MatchTool and MatchTool Navigator and helping me analyse the sequences.

Special thanks to Erik Bongcam-Rudloff for the help with installing MatchTool and MatchTool Navigator and Katarina Stensham for overall help with my project.

Finally I would like to thank the whole department of Animal Breeding and Genetics at SLU for giving me the opportunity to perform my bachelor thesis there.

## 7. References

- [1] Björnerfeld, S. et al. Manuscript in prep.
- [2] Goldsby, R. et al. 2002. *Immunology 5: th edition*. Amherst Collage.
- [3] Janeway, C. 2005. *Immunobiology 6:th edition*. Yale University School of Medicine.
- [4] Cargill, J. et al. 2005. *Hypothyroidism article*.  
[www.miragesamoyeds.com/thyroid3.htm](http://www.miragesamoyeds.com/thyroid3.htm)
- [5] Lee, J-Y. et al. 2004. *Tryptic peptides of canine Thyroglobulin reactive with sera of patients with canine hypothyroidism caused by autoimmune thyroiditis*. Veterinary Immunology and Immunopathology. Vol 101. Issue 3-4: 271-276.
- [6] Weitkamp, R. et al. *Is hypothyroidism really the leading canine genetic disease?*. The advocate. Vol 1: 1-6.
- [7] Rosberg, A. et al. 1999. *Hypothyroidism hos hund, en litteraturstudie, del 1*. Svensk Vetrinärtidning. Vol 12: 579-583.
- [8] Kennedy, L. et al. 2006. *Association of hypothyroid disease in Doberman pincher dogs with a rare major histocompatibility complex DLA class II haplotype*. Tissue antigens. Vol 67: 53-56.
- [9] Rosberg, A. et al. 1999. *Hypothyroidism hos hund, en litteraturstudie, del 2*. Svensk Vetrinärtidning. Vol 12: 558-590.
- [10] Brand, O. et al. 2005. *HLA, CTLA4 and PTPN22: the shared genetic master-key to autoimmunity?*. Molecular medicine. Vol 7. Issue 23:1-15.
- [11] Angles, JM. et al. 2005. *Frequency and distribution of alleles of canine MHC-II DLA-DQA1 and DLA-DRB1 in 25 representative American Kennel Club breeds*. Tissue antigens. Vol 66: 173-184.
- [12] Kennedy, L. et al. 2002. *Evidence for extensive DLA polymorphism in different dog populations*. Tissue antigen. Vol 60: 43-52.
- [13] Debenham, S. 2004. *Genomic sequence of the class II region of the canine MHC: comparison with the MHC of other mammalian species*. Genomics. Vol 5: 48-59.
- [14] Ferm, K. et al. Manuscript in prep.
- [15] Schuelke, M. 2000. *An economic method for the fluorescent labelling of PCR fragments*. Nature Biotechnology. Vol 18: 233 – 234.

[16] <http://faculty.vassar.edu/lowry/VassarStats.html>

[18] Lindblad-Toh, K. et al. *Genome sequence, comparative analysis and haplotype structure of the domestic dog*. 2005. *Nature*. Vol 438: 803-819.

[17] Lechler. R. et al. 2000. *HLA in health and disease. Appendix: Statistical considerations in analyzing HLA and disease associations*. Imperial College of Medicine.

[19] <http://www.biologyreference.com/Ar-Bi/Autoimmune-Disease.html> 2007-02-15

## 8. Supplementary tables

8.1. Table S1. Clinical and diagnostic information for all dogs.

Sample Number	Disease code	Breed	DRB1	DQA1	DQB1	DRB2	DQA2	DQB2	TgAA (%)	T4 (mgU/l)	TSH (mgU/l)
2.29.001	8	Hovawart	00201	00901	00101	01201	00401	013017	82	23	12
2.29.002	8	Hovawart	01201	00401	013017	01301	00101	00802	70	22	10
2.29.003	?	Hovawart	01201	00401	013017	01501	00601	?	34	31	13
2.29.004	8	Hovawart	01201	00401	013017	01201	00401	013017	66	25	10
2.29.005	?	Hovawart	01301	00101	00201	01501	00601	00301	87	27	15
2.29.006	6	Hovawart	01201	00401	013017	01501	00601	00301	165	20	11
2.29.008	8	Hovawart	01501	00601	00301	01501	00601	049v	99	16	15
2.29.013	?	Hovawart	00201	00901	00101	01201	00401	013017	83	34	11
2.29.017	?	Hovawart	01201	00401	013017	01201	00401	013017	75	28	15
2.29.018	8	Hovawart	01201	00401	013017	01201	00401	013017	64	13	8
2.29.019	3	Hovawart	01201	00401	013017	01301	00101	00201	159	102	243
2.29.020	4	Hovawart	01201	00401	013017	01301	00101	00201	122	21	9
2.29.021	?	Hovawart	01201	00401	013017	01201	00401	013017	96	27	19
2.29.022	8	Hovawart	01301	00101	00201	01501	00601	00301	86	16	17
2.29.025	8	Hovawart	01201	00401	013017	01201	00401	013017	88	25	11
2.29.026	8	Hovawart	00201	00901	00101	01201	00401	013017	68	16	15
2.29.027	4	Hovawart	01201	00401	013017	01301	00101	00201	129	22	14
2.29.028	?	Hovawart	01201	00401	013017	01201	00401	013017	90	27	14
2.29.029	8	Hovawart	01201	00401	013017	01201	00401	013017	97	20	12
2.29.031	3	Hovawart	01201	00401	013017	01501	00601	049v	105	16	47
2.29.032	?	Hovawart	01201	00401	013017	01201	00401	013017	75	32	17
2.29.035	8	Hovawart	01101	00201	01302	01201	00401	013017	90	25	16
2.29.036	?	Hovawart	00201	00901	00101	01201	00401	013017	66	30	7
2.29.037	3	Hovawart	01201	00401	013017	01201	00401	013017	87	6	175
2.29.038	8	Hovawart	01101	00201	01302	01201	00401	013017	72	22	13
2.29.041	?	Hovawart	01501	00601	00301	01501	00601	049v	97	30	13
2.29.044	8	Hovawart	01101	00201	01302	01501	00601	049v	84	23	16
2.29.045	8	Hovawart	01301	00101	00201	01501	00601	04901	94	19	11
2.29.059	3	Hovawart	00201	00901	00101	01201	00401	013017	163	25	87
2.29.081	3	Hovawart	01201	00401	013017	01501	00601	00301	84	19	49
2.29.082	3	Hovawart	00201	00901	00101	01201	00401	013017	100	0	127
2.29.087	1	Hovawart	01101	00201	01302	01201	00401	013017	297	0	60
2.29.089	1	Hovawart	00201	00901	00101	01201	00401	013017	225	39	55
2.29.105	2	Hovawart	00201	00901	00101	03001	00601	00301	>200	11,2	14
2.29.106	1	Hovawart	00201	00901	00101	01201	00401	013017	POS	19,7	>200
2.29.107	1	Hovawart	00201	00901	00101	03001	00601	00301	POS	11,5	780
2.29.108	3	Hovawart	00201	00901	00101	01501	00601	00301	NEG	11,3	>200
2.29.109	1	Hovawart	01301	00101	00201	01301	00101	00201	POS	9,9	>200
2.29.110	3	Hovawart	00201	00901	00101	00201	00901	00101	NEG	7,5	125
2.29.111	3	Hovawart	01201	00401	013017	01201	00401	013017	NEG	7,3	93
2.29.112	7	Hovawart	01201	00401	013017	03001	00601	00301	NEG	5,7	35
2.29.113	3	Hovawart	01301	00101	00201	01301	00101	00201	NEG	21,9	355

2.29.114	3	Hovawart	00201	00901	00101	01201	00401	013017	NEG	10,9	>200
2.29.115	7	Hovawart	00201	00901	00101	01201	00401	013017	NEG	8	31
2.29.116	6	Hovawart	00201	00901	00101	01201	00401	013017	GRÄ	8,6	29
2.29.117	3	Hovawart	01201	00401	013017	01301	00101	00201	NEG	8,2	55
2.29.118	1	Hovawart	00201	00901	00101	01201	00401	013017	225	5,8	55
2.29.119	7	Hovawart	01201	00401	013017	01301	00101	00201	NEG	7	33
2.29.120	2	Hovawart	00201	00901	00101	01201	00401	013017	POS	11,5	38
2.29.121	3	Hovawart	01201	00401	013017	01501	00601	02301	NEG	7,2	40
2.29.122		Hovawart	01201	00401	013017	01501	00601	049v			
2.45.225	2	Hovawart	01101	00201	01302	01201	00401	013017	254	26	22
2.45.007	?	Riesen	00601	00401	01303	00601	00401	01303	125	27	17
2.45.008	4	Riesen	00101	00101	00201	02301	00301	00501	135	19	12
2.45.009	?	Riesen	02301	00301	00501	02301	00301	00501	117	22	16
2.45.010	?	Riesen	00101	00101	00201	00601	00401	01303	112	26	15
2.45.011	6	Riesen	00101	00101	00201	00101	00101	00201	167	25	33
2.45.013	?	Riesen	00601	00401	01303	01201	00101	00201	103	18	14
2.45.014	6	Riesen	00101	00101	00201	00601	00401	01303	171	26	17
2.45.015	8	Riesen	00601	00401	01303	00901	00101	008011	88		15
2.45.017	?	Riesen	00601	00401	01303	01301	00301	00501	85	34	13
2.45.018	?	Riesen	00101	00101	00201	00601	00401	01303	129	23	16
2.45.019	2	Riesen	00101	00101	00201	01501	00601	00301	258	4	14
2.45.021	?	Riesen	00101	00101	00201	00101	00101	00201	139	19	15
2.45.022	?	Riesen	01201	00101	00201	01301	00101	00201	143	28	0
2.45.023	?	Riesen	00101	00101	00201	01201	00101	00201	144	27	15
2.45.025	?	Riesen	00601	00401	01303	00901	00101	008011	127	22	16
2.45.026	6	Riesen	00601	00401	01303	01301	00301	00501	171	14	13
2.45.027	?	Riesen	00601	00401	01303	01201	00101	00201	106	24	0
2.45.028	?	Riesen	00101	00101	00201	02301	00301	00501	125	29	12
2.45.030	?	Riesen	00101	00101	00201	02301	00301	00501	100	20	23
2.45.032	2	Riesen	00101	00101	00201	00101	00101	00201	382	14	8
2.45.033	?	Riesen	00601	00401	01303	01301	00301	00501	110	15	10
2.45.034		Riesen	00601	00401	01303	00901	00101	008011			
2.45.035	?	Riesen	01201	00101	00201	01301	00101	00201	96	14	24
2.45.038	2	Riesen	00601	00401	01303	01301	00301	00501	220	27	21
2.45.039	4	Riesen	00101	00101	00201	01301	00301	00501	110	29	15
2.45.040	?	Riesen	00101	00101	00201	00601	00401	01303	65	19	26
2.45.041	?	Riesen	00101	00101	00201	01301	00301	00501	75	18	24
2.45.042	8	Riesen	00101	00101	00201	02301	00301	00501	58	20	17
2.45.043	?	Riesen	00601	00401	01303	00601	00401	01303	130	16	12
2.45.045	8	Riesen	00601	00401	01303	00601	00401	01303	90	19	15
2.45.046	8	Riesen	00101	00101	00201	02301	00301	00501	83	14	16
2.45.047	6	Riesen	01301	00101	00201	01301	00101	00201	173	26	0
2.45.049	7	Riesen	00101	00101	00201	01201	00101	00201	81	25	36
2.45.050	?	Riesen	00601	00401	01303	01301	00301	00501	113	21	9
2.45.052	8	Riesen	00601	00401	01303	00601	00401	01303	63	14	10
2.45.054		Riesen	02301	00301	00501	02301	00301	00501			
2.45.055	8	Riesen	00101	00101	00201	01301	00301	00501	76		13
2.45.057	?	Riesen	00601	00401	01303	00601	00401	01303	121	18	20

2.45.058	8	Riesen	00601	00401	01303	01301	00301	00501	83	17	0
2.45.059	4	Riesen	00101	00101	00201	02301	00301	00501	99	21	0
2.45.062	?	Riesen	00101	00101	00201	01201	00101	00201	57	26	22
2.45.063	8	Riesen	01301	00101	00201	01301	00301	00501	57	24	12
2.45.065	4	Riesen	01201	00101	00201	01301	00101	00201	97	6	13
2.45.068	?	Riesen	00601	00401	01303	01301	00301	00501	119	16	10
2.45.071	8	Riesen	01301	00101	00201	02301	00301	00501	89	19	11
2.45.074	8	Riesen	00101	00101	00201	01201	00101	00201	76	11	16
2.45.075	8	Riesen	00101	00101	00201	00101	00101	00201	70	18	21
2.45.078	6	Riesen	01201	00101	00201	01301	00301	00501	160	10	14
2.45.079	?	Riesen	00101	00101	00201	01201	00101	00201	110	18	7
2.45.080	1	Riesen	00601	00401	01303	01301	00301	00501	255	14	84
2.45.081	?	Riesen	01301	00301	00501	09401	00401	01303	148	10	10
2.45.082	8	Riesen	00601	00401	01303	01301	00301	00501	98	13	16
2.45.084	6	Riesen	01201	00101	00201	01201	00101	00201	165	2	23
2.45.085	?	Riesen	00101	00101	00201	01201	00101	00201	101	18	20
2.45.095	?	Riesen	00601	00401	01303	01301	00301	00501	102	14	20
2.45.097	8	Riesen	01301	00301	00501	02301	00301	00501	57	17	19
2.45.099	2	Riesen	00601	00401	01303	01301	00101	00201	216	6	21
2.45.103	?	Riesen	00101	00101	00201	00601	00401	01303	121	20	12
2.45.104	?	Riesen	00101	00101	00201	00101	00101	00201	101	21	11
2.45.106	10	Riesen	00101	00101	00201	00601	00401	01303	101	14	26
2.45.109	4	Riesen	00101	00101	00201	01201	00101	00201	144	5	12
2.45.110	4	Riesen	00101	00101	00201	00601	00401	01303			
2.45.132		Riesen	01201	00101	00201	01301	00301	00501			
2.45.133	2	Riesen	00101	00101	00201	02301	00301	00501	329	6	14
2.45.135	3	Riesen	01301	00301	00501	01301	00301	00501	NEG	5,5	88
2.45.136	?	Riesen	01201	00101	00201	01201	00101	00201	107	21	0
2.45.137	?	Riesen	01201	00101	00201	01201	00101	00201	110	20	11
2.45.138	?	Riesen	01201	00101	00201	02301	00301	00501	90	44	13
2.45.139	3	Riesen	00101	00101	00201	02301	00301	00501	109	10	46
2.45.140	?	Riesen	01201	00101	00201	01201	00101	00201	106	6	21
2.45.144	?	Riesen	00601	00401	01303	00601	00401	01303	99	32	12
2.45.150	2	Riesen	00101	00101	00201	01301	00301	00501	381	22	32
2.45.153	?	Riesen	00101	00101	00201	01301	00301	00501	72	29	0
2.45.161	?	Riesen	01301	00301	00501	01501	00601	00301	64	26	11
2.45.164	2	Riesen	00101	00101	00201	01201	00101	00201	389	16	30
2.45.167	?	Riesen	00101	00101	00201	00101	00101	00201	120	17	12
2.45.169	4	Riesen	00101	00101	00201	01201	00101	00201	112	20	9
2.45.171	1	Riesen	01301	00301	00501	01301	00301	00501	POS	4,7	123
2.45.173	?	Riesen	01301	00301	00501	01501	00601	00301	93	26	9
2.45.175	?	Riesen	00601	00401	01303	02301	00301	00501	116	19	15
2.45.179	?	Riesen	00601	00401	01303	01201	00101	00201	88	40	10
2.45.180	?	Riesen	00601	00401	01303	01301	00301	00501	86	18	26
2.45.183	?	Riesen	00101	00101	00201	01301	00101	00201	145	13	17
2.45.186	10	Riesen	00101	00101	00201	01301	00101	00201	101	10	26
2.45.189	6	Riesen	01201	00101	00201	02301	00301	00501	167	15	11
2.45.196	6	Riesen	01201	00101	00201	01201	00101	00201	151	21	0



2.45.197	?	Riesen	01301	00101	00201	01301	00301	00501	100	13	20
2.45.206	2	Riesen	01201	00101	00201	01201	00101	00201	1377	34	17
2.45.207	?	Riesen	00101	00101	00201	00601	00401	01303	64	46	14
2.45.214	?	Riesen	00101	00101	00201	01301	00301	00501	101	28	10
2.45.215	?	Riesen	01301	00301	00501	01501	00601	00301	105	34	9
2.45.217	1	Riesen	00101	00101	00201	01301	00301	00501	302	5	56
2.45.218	2	Riesen	01201	00101	00201	01201	00101	00201	449	15	31
2.45.221	?	Riesen	01301	00301	00501	01301	00301	00501	122	22	19
2.45.222	3	Riesen	00601	00401	01303	01301	00301	00501	81	10	41
2.45.223	7	Riesen	00101	00101	00201	01301	00301	00501	52	30	36
2.45.224	?	Riesen	00101	00101	00201	00601	00401	01303	130	17	10
2.45.227	1	Riesen	01201	00101	00201	01301	00301	00501	1436	5	54
2.45.228	?	Riesen	00101	00101	00201	01301	00301	00501	121	25	21
2.45.229	2	Riesen	00101	00101	00201	01301	00301	00501	NEG	2,4	49
2.45.235	10	Riesen	00101	00101	00201	01501	00601	00301	131	16	22
2.45.239	6	Riesen	01301	00301	00501	01501	00601	00301	152	20	0
2.45.241	2	Riesen	01201	00101	00201	01201	00101	00201	200	16	0
2.45.244	2	Riesen	00101	00101	00201	00101	00101	00201	592	19	0
2.45.246	?	Riesen	00101	00101	00201	01301	00101	00201	73	28	18
2.45.247	?	Riesen	00101	00101	00201	00101	00101	00201	130	13	16
2.45.248		Riesen	00101	00101	00201	00601	00401	01303			
2.45.249	?	Riesen	00101	00101	00201	00101	00101	00201	107	30	8
2.45.250	1	Riesen	00101	00101	00201	00601	00401	01303	1106	2	58
2.45.251	?	Riesen	00101	00101	00201	00601	00401	01303	108	20	12
2.45.252	?	Riesen	00101	00101	00201	00601	00401	01303	101	18	8
2.45.253	9	Riesen	00101	00101	00201	00101	00101	00201	81	24	11
2.45.254	9	Riesen	00101	00101	00201	00101	00101	00201	54	20	12
2.45.256	9	Riesen	01301	00301	00501	01501	00601	00301	91	4	15
2.45.265	9	Riesen	00601	00401	01303	00901	00101	008011	97	23	17
2.45.267	7	Riesen	00101	00101	00201	00101	00101	00201	89	28	38
2.45.271	9	Riesen	00101	00101	00201	00101	00101	00201	92	23	13
2.45.272	?	Riesen	00101	00101	00201	00601	00401	01303	82	26	13
2.45.288	6	Riesen	01201	00101	00201	02301	00301	00501	GRÄ	7	26
2.45.289	2	Riesen	00101	00101	00201	01301	00101	00201	POS	2,7	<14
2.45.290	7	Riesen	01301	00301	00501	01301	00301	00501	NEG	8	32
2.45.291	2	Riesen	00101	00101	00201	02301	00301	00501	POS	5	22
2.45.292	8	Riesen	01201	00101	00201	02301	00301	00501	NEG	11,6	<14
2.45.293	?	Riesen	00601	00401	01303	00601	00401	01303	NEG	7,3	<14
2.45.294	1	Riesen	01301	00101	00201	01301	00301	00501	POS	14	163
2.45.295	?	Riesen	00601	00401	01303	01201	00101	00201	NEG	5,1	<14
2.45.296	?	Riesen	00101	00101	00201	01301	00301	00501	NEG	5,9	24
2.45.297	3	Riesen	01201	00101	00201	02301	00301	00501	GRÄ	4,6	49
2.45.298	1	Riesen	00101	00101	00201	01201	00101	00201	POS	1,4	45
2.45.299	?	Riesen	00101	00101	00201	01301	00101	00201	NEG	20,7	<14
2.45.300	8	Riesen	01301	00301	00501	02301	00301	00501	NEG	8	<14
2.45.301	9	Riesen	00101	00101	00201	02301	00301	00501	NEG	16,5	<14
2.45.302	3	Riesen	00101	00101	00201	01301	00301	00501	NEG	2,4	49
2.45.303	?	Riesen	00601	00401	01303	01301	?	?	NEG	2,8	19

2.45.304	9	Riesen	00101	00101	00201	01301	00301	00501	NEG	12,5	17
2.45.305	6	Riesen	01201	00101	00201	01301	00101	00201	GRÄ	6,4	27
2.45.306	2	Riesen	01301	00101	00201	01301	00301	00501	POS	6,3	19
2.45.307	?	Riesen	00101	00101	00201	01201	00101	00201	NEG	4,9	19
2.45.308	?	Riesen	01301	00101	00201	01301	00301	00501	NEG	4	23
2.45.309	?	Riesen	00101	00101	00201	01201	00101	00201	NEG	7,7	26
2.45.310	2	Riesen	01301	00101	00201	01301	00301	00501	POS	5,5	29
2.45.311	?	Riesen	01201	00101	00201	01301	00301	00501	NEG	6,3	20
2.45.312	6	Riesen	01201	00101	00201	01301	00301	00501	GRÄ	8,5	23
2.45.313	?	Riesen	01201	00101	00201	01301	00301	00501	NEG	5,4	20
2.45.314	3	Riesen	01301	00301	00501	01301	00301	00501	NEG	5,5	88
2.45.315	7	Riesen	01201	00101	00201	01301	00101	00201	NEG	3,7	38
2.45.316	3	Riesen	01201	00101	00201	01301	00301	00501	NEG	4,6	83
2.45.317	3	Riesen	00101	00101	00201	01201	00101	00201	NEG	4,7	40
2.45.318	1	Riesen	01301	00301	00501	01301	00301	00501	POS	4,7	123
2.45.319	3	Riesen	00101	00101	00201	00601	00401	01303		10,2	54
2.45.320	3	Riesen	00601	00401	01303	01301	00101	00201		24,9	>200
2.45.321		Riesen	00101	00101	00201	00601	00401	01303			

## 8.2. Table S2A. Giant Schnauzer 2x2 Contingency tables

Antigen	<i>00101*00101*00201</i>	<i>00101*00101*00201</i>	Total
	+	-	
Case	31	85	116
Control	14	30	44
Total	45	115	160

Risk ratio: 0.8399

Odds ratio: 0.7815

X<sup>2</sup>: 0.2

p = 0.654721

Antigen	<i>00601*00401*01303</i>	<i>00601*00401*01303</i>	Total
	+	-	
Case	10	106	116
Control	8	36	44
Total	18	142	160

Risk ratio: 0.4741

Odds ratio: 0.4245

X<sup>2</sup>: -

p = -

Antigen	<i>00901*00101*008011</i>	<i>00901*00101*008011</i>	Total
	+	-	
Case	0	116	116
Control	2	42	44
Total	2	158	160

Risk ratio: 0

Odds ratio: 0

X<sup>2</sup>: -

p = -

Antigen	<i>01201*00101*00201</i>	<i>01201*00101*00201</i>	Total
	+	-	
Case	26	90	116
Control	2	42	44
Total	28	132	160

Risk ratio: 4.931

Odds ratio: 6.0667

X<sup>2</sup>: 5.87

p = 0.015401

Antigen	01301*00101*00201	01301*00101*00201	Total
	+	-	
Case	11	105	116
Control	2	42	44
Total	13	147	160

*Risk ratio: 2.0862*

Odds ratio: 2.2

X<sup>2</sup>: -

p = -

Antigen	01301*00301*00501	01301*00301*00501	Total
	+	-	
Case	28	88	116
Control	8	36	44
Total	36	124	160

*Risk ratio: 1.3276*

Odds ratio: 1.4318

X<sup>2</sup>: 0.35

p = 0.554113

Antigen	02301*00301*00501	02301*00301*00501	Total
	+	-	
Case	8	108	116
Control	7	37	44
Total	15	145	160

*Risk ratio: 0.4335*

Odds ratio: 0.3915

X<sup>2</sup>: -

p = -

Antigen	09401*00401*01303	09401*00401*01303	Total
	+	-	
Case	0	116	116
Control	0	44	44
Total	0	160	160

*Risk ratio: 0*

Odds ratio: 0

X<sup>2</sup>: -

p = -

Antigen	09501*00101*00201	09501*00101*00201	Total
	+	-	
Case	0	116	116
Control	0	44	44
Total	0	160	160

*Risk ratio: 0*

Odds ratio: 0

X<sup>2</sup>: -

p = -

Antigen	01501*00601*00301	01501*00601*00301	Total
	+	-	
Case	2	114	116
Control	1	43	44
Total	3	157	160

*Risk ratio: 0.7586*

Odds ratio: 0.7544

X<sup>2</sup>: -

p = -

### 8.3. Table S2B. Hovawart 2x2 Contingency tables

Antigen	00201*00901*00101	00201*00901*00101	Total
	+	-	
Case	14	44	58
Control	2	24	26
Total	16	68	84

*Risk ratio: 3.1379*

Odds ratio: 3.8182

X<sup>2</sup>: -

p = -

Antigen	01101*00201*01302	01101*00201*01302	Total
	+	-	
Case	2	56	58
Control	3	23	26
Total	5	79	84

*Risk ratio: 0.2989*

Odds ratio: 0.2738

X<sup>2</sup>: -

p = -

Antigen	01201*00401*013017	01201*00401*013017	Total
	+	-	
Case	25	33	58
Control	13	13	26
Total	38	46	84

*Risk ratio: 0.8621*

Odds ratio: 0.7576

X<sup>2</sup>: 0.12

p = 0.729034

Antigen	01301*00101*00201	01301*00101*00201	Total
	+	-	
Case	9	49	58
Control	2	24	26
Total	11	73	84

*Risk ratio: 2.0172*

Odds ratio: 2.2041

X<sup>2</sup>: -

p = -

Antigen	01301*00101*00802	01301*00101*00802	Total
	+	-	
Case	0	58	58
Control	1	25	26
Total	1	83	84

*Risk ratio: 0*

Odds ratio: 0

X<sup>2</sup>: -

p = -

Antigen	01501*00601*00301	01501*00601*00301	Total
	+	-	
Case	3	55	58
Control	2	24	26
Total	5	79	84

*Risk ratio: 0.6724*

Odds ratio: 0.6545

X<sup>2</sup>: -

p = -

Antigen	01501*00601*04901	01501*00601*04901	Total
	+	-	
Case	0	58	58
Control	1	25	26
Total	1	83	84

Risk ratio: 0  
Odds ratio: 0  
 $X^2$ : -  
p = -

Antigen	01501*00601*049v	01501*00601*049v	Total
	+	-	
Case	1	57	58
Control	2	24	26
Total	3	81	84

Risk ratio: 0.2241  
Odds ratio: 0.2105  
 $X^2$ : 0  
p = 0

Antigen	01501*00601*02301	01501*00601*02301	Total
	+	-	
Case	1	57	58
Control	0	26	26
Total	1	83	84

Risk ratio:  $\infty$   
Odds ratio:  $\infty$   
 $X^2$ : -  
p = -

Antigen	03001*00601*00301	03001*00601*00301	Total
	+	-	
Case	3	55	58
Control	0	26	26
Total	3	81	84

Risk ratio:  $\infty$   
Odds ratio:  $\infty$   
 $X^2$ : -  
p = -