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## **GWAS of Neuroimaging Derived Subtypes of Alcohol Use Disorder**

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**Background:** Alcohol use disorder (AUD) presents with substantial heterogeneity.

**Rational:** Attempts to distinguish SUDs such as AUD by clinical features alone have had limited translational success.

**Hypothesis:** Objective biomarkers, like those derived from neuroimaging, will help parse AUD heterogeneity based on biology.

**Methods.** We developed neuroimaging derived cortical thickness biotypes of AUD in the European subset of the UK biobank (N=22,321) and conducted GWAS of biotype membership vs. controls (i.e., AUD biotype 1 vs. controls from biotype 2 and non-affected individuals). We also conducted GWAS contrasting biotypes in all individuals with neuroimaging data (N = 32,287). **Results:** Differences in regional cortical thickness within the salience network (e.g., regions) differentiated two AUD biotypes from controls. AUD biotype 1 was characterized by greater cortical thickness and biotype 2 had less cortical thickness, within the salience network. GWAS of biotype 1 (vs controls) identified one suggestive hit (rs60657889,  $p = 5.93e-08$ ). GWAS contrasting the two biotypes revealed two significant hits including lead variant rs12355217 on FAM107B, ( $P=1.77e-09$ ), a gene known to influence neurological pathways.

**Discussion.** Using a data-forward approach, we can parse heterogeneity in AUD and discover potential genetic pathways contributing to heterogeneity. Future analyses will examine loci from a joint analysis of biotypes with the largest GWAS of problematic alcohol use using a multivariate GWAS (N=1,079,947) and conduct multi-ancestry fine-mapping to determine likely causal variants. Finally, genetic correlations and drug repurposing analyses will determine the clinical and pharmacotherapeutic separability of brain-imaging derived biotypes.