

Original Article

Interaction of breast cancer-relevant DNA repair genes and air pollution in relation to breast cancer risk in UK biobank

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Abstract: We investigated if selected polymorphisms in DNA repair genes modify the association between exposure to particulate matter ≤ 10 micron in diameter (PM_{10}) and breast cancer (BCa) risk. We included 150,929 postmenopausal women (5,969 with BCa) from UK Biobank, a population-based prospective cohort. Cancer diagnoses were ascertained through the linkage to the UK National Health Service Central Registers. Information on BCa risk factors was collected at baseline. Blood samples were collected from participants at enrollment and genotyped using the Applied Biosystems UK BiLEVE Axiom Array or the Applied Biosystems UK Biobank Axiom Array. Cox proportional hazards regression was used to examine interactions of exposure (2007 PM_{10} and cumulative average PM_{10}) with 14 SNPs, adjusting for BCa risk factors. The positive associations of 2007 PM_{10} and cumulative average PM_{10} with BCa risk were stronger in women with one or two copies of XRCC2 rs3218536 C allele vs. none (2007 PM_{10} Hazard Ratio [HR] per $10 \mu\text{g}/\text{m}^3 = 1.54$, 95% Confidence Interval [CI] 1.22, 1.95 or HR = 1.14, 95% CI 1.03, 1.30 vs. HR = 0.52, 95% CI 0.16, 1.75, p-interaction = 0.02; cumulative average PM_{10} HR per $10 \mu\text{g}/\text{m}^3 = 2.80$, 95% CI 1.99, 3.96 or HR = 1.89, 95% CI 1.64, 2.18 vs. HR = 0.45, 95% CI 0.08, 2.37, p-interaction = 0.05). We observed no interactions of PM_{10} with other SNPs. Our results suggest stronger associations of 2007 PM_{10} and cumulative average PM_{10} with postmenopausal BCa risk in carriers of XRCC2 rs3218536 C allele.

Keywords: Air pollution, breast cancer, UK Biobank, DNA repair genes, prospective cohort

Introduction

Accumulation of DNA damage and impaired DNA repair capacity are important events in breast cancer carcinogenesis [1]. Because of the extensive breast tissue remodeling that occurs repeatedly during a woman's lifetime (in utero development, puberty, monthly cycles, pregnancy, lactation and involution), breast tissue is particularly prone to DNA damage. Continuous DNA assaults on the breast tissue from a variety of endogenous and exogenous factors result in accumulation of cytogenetic alterations, such as deletions, amplifications and/or mutations in critical oncogenes and tumor suppressor genes, which can subsequently lead to malignant transformation [1]. Specific DNA repair mechanisms have evolved to repair different types of DNA damage and to maintain genomic integrity by repairing DNA

damage or inducing apoptosis and cell cycle arrest if repair is not possible [2-4]. For example, the importance of the DNA damage repair in breast cancer is further demonstrated by the studies of mutations in p53, a tumor suppressor gene which controls cellular growth and division and protects cells against genomic alterations resulting from DNA damage by suppressing proliferation or activating apoptosis [5]; p53 gene has been linked to breast cancer risk, especially for early onset breast cancer [5, 6]. The cellular response to DNA damage and ability to maintain genomic stability by DNA repair are crucial in preventing cancer initiation and progression [7]. Higher levels of DNA damage and impaired DNA repair may increase an individual's susceptibility to breast cancer [4]. Genomic instability resulting from the failure to repair DNA damage and subsequent accumula-

tion of various alterations has been linked to an increased breast cancer risk [8, 9].

Several polymorphisms have been described in DNA damage signaling and repair genes and some of the polymorphisms have been implicated in genetic susceptibility to breast cancer, including breast cancer susceptibility gene 1 (BRCA1) and breast cancer susceptibility gene 2 (BRCA2) [7, 10], X-ray repair cross complementing (XRCC) genes (specifically, XRCC1, XRCC2, and XRCC3) [7, 10-14], the excision repair cross complementing group 2 (ERCC2) [7, 10], and ataxia telangiectasia mutated (ATM) gene [7].

Air pollutants include a variety of compounds with endocrine disrupting and carcinogenic properties resulting in formation of DNA adducts, disruption of DNA damage repair, induction of carcinogen-activating enzymes, and DNA methylation of tumor suppressor genes in breast tissue [15-17]. Thus, women with different polymorphisms in DNA repair genes could potentially have different susceptibility to the effects of air pollution, but their interactions have never been examined. To our knowledge, this is the first study to investigate if selected polymorphisms in breast cancer-relevant DNA repair genes modify the association between air pollutants and breast cancer risk. For this investigation, after literature review of the existing evidence, we selected SNPs in BRCA1, BRCA2, ATM, XRCC1, XRCC2, XRCC3, and XPD (ERCC2) genes that consistently demonstrated at least moderate associations with breast cancer risk, had minor allele frequency prevalence of at least 10% in the general populations or controls, and were available in the UK Biobank. Our study specifically focused on air pollutants for which we have previously found associations with postmenopausal breast cancer in UK Biobank (2007 PM₁₀ and cumulative average PM₁₀) [18].

Material and methods

Study population

We used data from the UK Biobank, an established population-based prospective cohort. Volunteers aged 40-69 years were recruited during 2006-2010 from England, Scotland and Wales via National Health Service (NHS) patient registers [19]. The enrollment process has

been previously described [20]. Briefly, at enrollment participants provided health, lifestyle, and socio-demographic information, blood, urine and saliva samples, and agreed to participate in follow-ups. About 20% of participants were invited and completed their first repeat assessment during 2012-2013. Outcomes were assessed via linkages to the NHS Central Registers, with latest completed on February 29, 2020 for England and Wales, and on August 31, 2021 for Scotland.

Since the follow-up data did not include updates on women's menopausal or reproductive status, and premenopausal and postmenopausal breast cancers are epidemiologically distinct entities, this study included only postmenopausal women at baseline. Women were considered postmenopausal if they reported (i) having menopause, (ii) bilateral oophorectomy, or (iii) hysterectomy with one or both ovaries retained and being 54 years or older for an ever smoker or 56 years or older for a never smoker [18, 21]. Women with hysterectomy who had at least one ovary retained and were younger than 54 (for ever smokers) or younger than 56 (for never smokers) were excluded from the analysis as being premenopausal as done previously [22-26]. All included women had no history of breast cancer or any other type of cancer (except non-melanoma skin) at recruitment. A breast cancer diagnosis (invasive or in-situ) was identified based on diagnostic codes according to the 9th or the 10th revision of the International Classification of Diseases (174, 2330, C50, D05).

Out of 158,979 eligible women, we further excluded participants with missing information on all air pollution assessments, SNPs, or selected breast cancer risk factors (**Figure 1**). The final sample included 150,929 women (95% of all eligible women in UK Biobank) of which 5,969 developed breast cancer during the follow-up. UK Biobank protocol was approved by the NorthWest Multi-centre Research Ethics Committee (MREC), which covers the UK. All participants of UK Biobank provided written consent at recruitment.

Genotype data information

DNA was extracted from blood samples collected from participants at enrollment in UK Biobank (2006-2010) [27]. Genotyping was

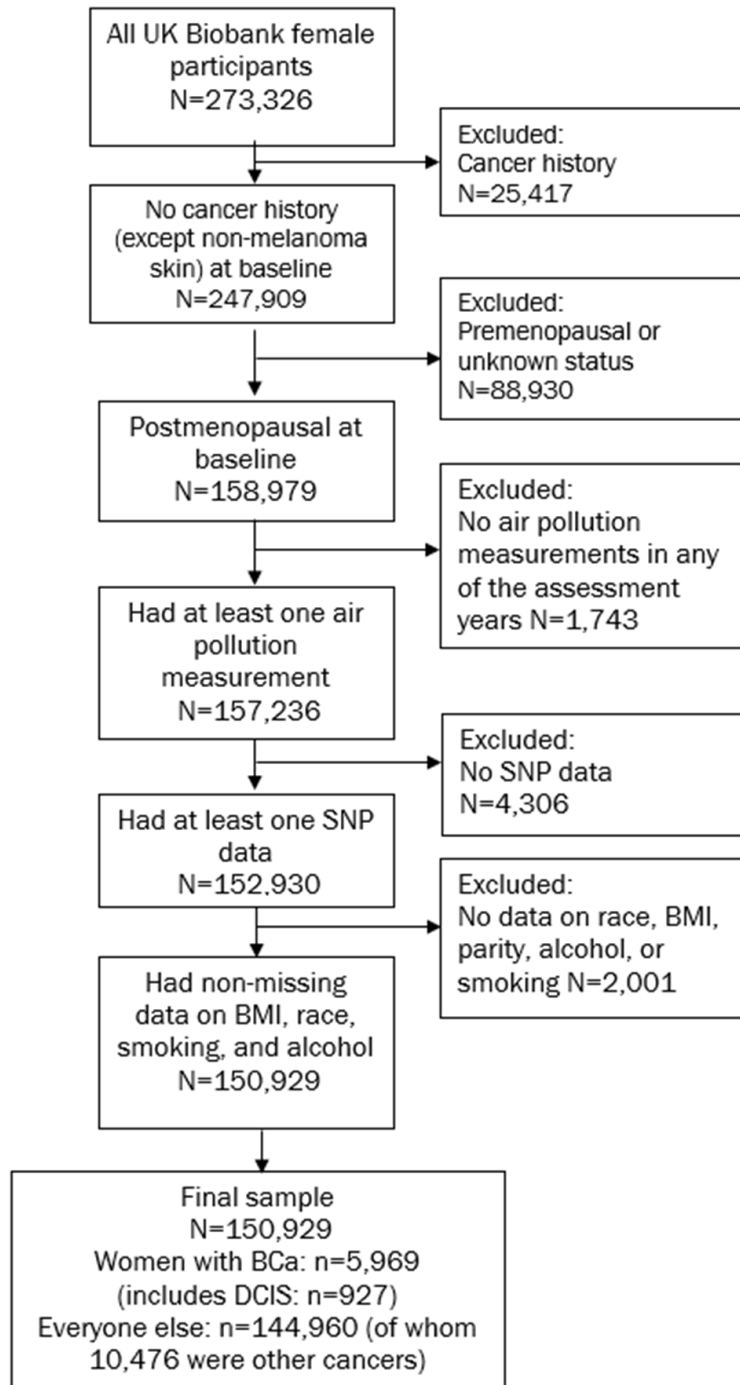


Figure 1. Study sample selection diagram

performed with two similar arrays. A subset of 49,950 participants in the UK Biobank Lung Exome Variant Evaluation (UK BiLEVE) [28] study were genotyped at 807,411 markers using the Applied Biosystems UK BiLEVE Axiom Array by Affymetrix (now part of Thermo Fisher Scientific) [29]. Next, 438,427 participants

were genotyped using the closely related Applied Biosystems UK Biobank Axiom Array (825,927 markers) that shares 95% of marker content with the UK BiLEVE Axiom Array [30]. The marker content of the UK Biobank Axiom array was chosen to capture genome-wide genetic variation (single nucleotide polymorphism [SNP] and short insertions and deletions [indels]). We initially included 23 SNPs based on existing evidence of potential associations with breast cancer risk. The final set of SNPs was then limited to those with > 1% prevalence in the study sample (Table 1).

Air pollution data

In UK Biobank, the annual averages of particulate matter PM₁₀ were available for 2007 and 2010, during the baseline assessment period. Air pollution estimates for 2007 were derived from EU-wide air pollution maps (resolution 100 m × 100 m) [31]. The x, y-coordinates of UK Biobank participants' residential locations were overlaid with these maps (projected to British National Grid) and the corresponding air pollution concentration of the 100 m × 100 m grid cell were assigned to the coordinate. EU-wide air pollution maps were modelled based on a Land Use Regression (LUR) model for Europe which also includes satellite derived air pollution estimates to improve the model performance [31].

Air pollution estimates for the year 2010 were modelled for each address using a LUR model developed as part of the European Study of Cohorts for Air Pollution Effects (ESCAPE) [32, 33]. The LUR model was based on ESCAPE monitoring done between January 26th, 2010, and January 18th, 2011, and air pollution esti-

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Table 1. SNPs included in the study

Chromosome	Gene	SNP rs ID	Affy SNP ID
14	XRCC3	rs861539	s_affy10138453
17	BRCA1	rs16942	s_affy13890975
17	BRCA1	rs4986852	s_affy13890986
19	XRCC1	rs25487	s_affy15998738
19	XRCC1	rs25489	s_affy15998758
19	XRCC1	rs1799782	s_affy15998777
19	XPD (ERCC2)	rs13181	s_affy16026426
19	XPD (ERCC2)	rs1799793	s_affy16026647
7	XRCC2	rs3218536	s_affy29998477
11	ATM	rs1800056	s_affy4166044
11	ATM	rs1800057	s_affy4166144
13	BRCA2	rs144848	s_affy9226186
13	BRCA2	rs4987117	s_affy9226375
13	BRCA2	rs11571833	s_affy9227257

Abbreviations: s_aff#, Affymetrix identifier; SNP rs, unique RefSNP ID number identifying the “reference SNP cluster” containing this SNP in dbSNP; SNP, single nucleotide polymorphisms.

mates were representative for the year 2010. The cumulative average PM₁₀ exposure was calculated as the average across all available measures in UK Biobank (2007 and 2010). Of all PM₁₀ measures in UK Biobank, we have previously reported significant positive associations for 2007 PM₁₀ and cumulative average PM₁₀ which we included in the current analysis [18].

Covariates information

Information on breast cancer risk factors, such as age at menopause, age at menarche, race/ethnicity, body mass index (BMI), postmenopausal hormone therapy, parity and age at first child’s birth, smoking status, alcohol use, and family history of breast cancer was collected at baseline and repeated follow-up assessments. A small percentage (< 0.5%) of women had missing information on race, parity, BMI, smoking, and alcohol, and were excluded from this study. However, for variables with relatively larger proportion of missingness (> 3%), women were classified as “Unknown” for the missing risk factor.

As we reported previously, modifiable risk factors from baseline and repeat assessments were highly correlated in a subset of women with first, second, or third subsequent assessments and thus all analyses included the base-

line data on these risk factors [18].

Statistical analysis

First, Cox proportional hazards regression models were used to analyze the association between each SNP and breast cancer risk while adjusting for known breast cancer risk factors: age at recruitment (years, continuous), age at menarche (years, continuous), BMI (kg/m², continuous), race (Caucasian [reference], other), parity/age at first child’s birth (nulliparous [reference], parous with age at first birth ≤ 25 years, parous with age at first birth > 25 years, parous with unknown age at first birth), family history

of breast cancer in first degree relatives (none [reference], any, unknown), age at menopause (< 46 [reference], 46 to < 50, 50 to < 55, ≥ 55 years, unknown), postmenopausal hormone use (never [reference], past, current, unknown), smoking (never [reference], past, current), and alcohol consumption (never [reference], past, current). The follow-up time for women began at study entry and ended at the time of breast cancer diagnosis for women with breast cancer, at the time of death for women who died during the follow-up, at the time of cancer diagnosis for women who developed other cancer types during the follow-up, or at the last linkage to the cancer registries. The risk estimates were presented as hazard ratios (HRs) and their corresponding 95% confidence intervals (CIs). For each SNP, the reference genotype was the homozygous reference listed in the NIH dbSNP database.

Proportional hazards assumption was tested prior to regression analyses. Because age at recruitment violated this assumption, the interaction term between age at recruitment and time was included in the models [34].

Next, Cox proportional hazards regression was used to examine interactions between each SNP and air pollutants for which we previously found associations with BCa in this cohort [18] (2007 PM₁₀ and cumulative average PM₁₀) by

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Table 2. Characteristics of the study participants at baseline, by breast cancer status

Characteristic	Breast cancer (n=5,969)	No Breast cancer (n=144,960)
<i>Mean (SD)</i>		
Age at enrollment, years ^a	60.61 (5.11)	60.07 (5.53)
Follow-up time, years ^a	5.32 (3.14)	10.72 (1.99)
Age at menarche, years ^b	12.93 (1.62)	12.96 (1.59)
Age at menopause, years ^a	50.34 (4.93)	49.72 (5.08)
BMI, kg/m ^{2a}	27.60 (5.00)	27.14 (5.06)
<i>N (%)</i>		
Race [#]		
White	5,757 (96.45)	138,712 (95.69)
Other	212 (3.55)	6,248 (4.31)
Parity/AFB, years ^b		
Nulliparous	1,013 (16.97)	23,476 (16.19)
Any children with AFB ≤ 25 years	2,266 (37.96)	58,179 (40.13)
Any children with AFB > 25 years	1,863 (31.21)	45,055 (31.08)
Any children with unknown AFB	827 (13.85)	18,250 (12.59)
Postmenopausal hormone therapy ^a		
Never used hormones	2,841 (50.07)	72,541 (52.62)
Past	2,141 (37.73)	52,475 (38.07)
Current	692 (12.20)	12,828 (9.30)
Family history ^a		
Breast cancer	664 (11.42)	10,484 (7.43)
No breast cancer	5,146 (88.57)	130,553 (92.57)
Smoking status ^b		
Never	3,388 (56.76)	84,990 (58.63)
Past	2,075 (34.76)	48,421 (33.4)
Current	506 (8.48)	11,549 (7.97)
Alcohol intake		
Non-drinker	342 (5.73)	8,848 (6.1)
Past drinker	209 (3.5)	5,456 (3.76)
Current drinker	5,418 (90.77)	130,656 (90.13)

Abbreviations: AFB, age at first birth; BMI, Body Mass Index; kg, kilogram; m, meters; N, number of participants; Q, quartiles; SD, standard deviation; ^aDifference statistically significant at 0.0001 level; ^bDifference statistically significant at 0.05 level. *P*-values calculated using the Pearson's Chi-square test for categorical data and the Wilcoxon Rank Sum test for continuous data.

including an interaction term in the models. Two different approaches were implemented to test the interaction between each SNP and PM₁₀: (i) using continuous air pollutant variables; and (ii) using the respective medians within each of the exposure categories. Finally, the associations between PM₁₀ and breast cancer risk were stratified by genotype. Each analysis included only incident breast cancer cases diagnosed in the same year when the PM₁₀ measurements were taken or those diagnosed

later. The follow-up start time and the subset of women included in each analysis were based upon the measure of PM₁₀ included in the given model. The follow-up start times were 2007 for the model examining PM₁₀ exposure from 2007, and the last available exposure assessment year 2010 for the model analyzing the cumulative average exposure to PM₁₀. The follow-up time ended at the time of breast cancer diagnosis, of death or of other cancer diagnosis during the follow-up, or at the time of the last linkage to the cancer registries, whichever occurred first.

In the stratified analyses by genotype, PM₁₀ measures were modeled as continuous variables or as quartiles based on the distribution in the study sample, specific to assessment year or cumulative average exposure for PM₁₀. The quartiles cut-offs, in µg/m³, were as follows: 20.14, 21.72, and 23.54 for 2007 PM₁₀; and 17.92, 19.04, and 20.25 for cumulative average PM₁₀. All the tests were two-sided and the significance of the effects was assessed at 5% level of significance. All analyses were performed using SAS (SAS Institute Inc. version 9.4).

Results

In this prospective study of 150,929 postmenopausal women, 5,969 developed breast cancer and 144,960 women remained breast cancer-free during the follow-up. The mean age of the study population at enrollment was 60.1 years (range 40-71 years). The average follow-up time calculated for analyses was 5.3 years (standard deviation SD = 3.1 years) for breast cancer cases and 10.7 years (SD = 2.0 years) for cancer-free women. The distribution of baseline characteristics by breast cancer status are presented in **Table 2**. As compared to women

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Table 3. Associations of SNPs with postmenopausal breast cancer risk

SNP ID	Genotype	Genotype prevalence in cases/ controls (5,969/150,929)	HR ^a	P for trend
rs861539 (s_affy10138453)	A A	768/18598	1.019 (0.939, 1.106)	0.337
	A G	2815/66838	1.044 (0.988, 1.103)	
	G G	2326/57928	1.00	
rs16942 (s_affy13890975)	C C	639/15546	0.988 (0.906, 1.077)	0.628
	C T	2595/63326	0.984 (0.933, 1.039)	
	T T	2728/65962	1.00	
rs4986852 (s_affy13890986)	T T	2/81	0.572 (0.143, 2.289)	0.398
	T C	298/3736	1.064 (0.947, 1.196)	
	C C	5663/137940	1.00	
rs25487 (s_affy15998738)	C C	2340/59616	0.967 (0.892, 1.050)	0.052
	T C	2856/66293	1.060 (0.979, 1.048)	
	T T	768/18889	1.00	
rs25489 (s_affy15998758)	T T	9/271	0.842 (0.438, 1.619)	0.280
	T C	534/12283	1.060 (0.970, 1.158)	
	C C	5357/130747	1.00	
rs1799782 (s_affy15998777)	A A	33/624	1.277 (0.906, 1.798)	0.361
	A G	684/16429	1.018 (0.940, 1.102)	
	G G	5248/127771	1.00	
rs13181 (s_affy16026426)	G G	790/19301	0.986 (0.909, 1.068)	0.711
	G T	2750/66759	0.994 (0.941, 1.049)	
	T T	2423/58641	1.00	
rs1799793 (s_affy16026647)	T T	625/15816	0.934 (0.857, 1.019)	0.078
	T C	2603/63995	0.965 (0.914, 1.018)	
	C C	2721/64735	1.00	
rs3218536 (s_affy29998477)	T T	35/1025	0.834 (0.598, 1.163)	0.263
	T C	884/21942	0.972 (0.905, 1.044)	
	C C	5040/121810	1.00	
rs1800056 (s_affy4166044)	C C	1/28	0.916 (0.129, 6.508)	0.661
	C T	160/3561	1.078 (0.922, 1.262)	
	T T	5803/141243	1.00	
rs1800057 (s_affy4166144)	G G	2/82	0.598 (0.120, 2.393)	0.679
	G C	294/7161	0.984 (0.875, 1.107)	
	C C	5669/137535	1.00	
rs144848 (s_affy9226186)	C C	468/11523	0.990 (0.898, 1.091)	0.874
	C A	2408/58380	0.999 (0.947, 1.054)	
	A A	3065/74437	1.00	

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rs4987117 (s_affy9226375)	T T	7/128	1.315 (0.627, 2.761)	0.907
	T C	378/9128	0.997 (0.899, 1.107)	
	C C	5580/135642	1.00	
rs11571833 (s_affy9227257)	T T	0/9	NE	0.033
	T A	125/2535	1.222 (1.023, 1.458)	
	A A	5836/142205	1.00	

Abbreviations: HR, hazard ratio; NE, non-estimable; s_aff#, Affymetrix identifier; rs, RefSNP ID number; SNP, single nucleotide polymorphisms; *Adjusted for age, body mass index, race, age at menopause, age at menarche, parity/age at first birth, postmenopausal hormone use, family history of breast cancer, alcohol consumption, and smoking.

without breast cancer, women with a breast cancer diagnosis were, on average, older (60.6 vs. 60.1 years, p for difference < 0.0001), had higher BMI (27.6 vs. 27.1 kg/m², p for difference < 0.001), were more likely to be current postmenopausal hormone therapy users at the time of enrollment (12.2% vs. 9.3%, p for difference < 0.001), and more likely to have a family history of breast cancer (11.4% vs. 7.4%, p for difference < 0.001, **Table 2**).

Associations of individual SNPs with breast cancer risk

In our sample, heterozygous carriers of BRCA2-rs11571833 T allele had an increased risk of breast cancer (HR = 1.22, 95% CI 1.02, 1.46, p -trend = 0.033) as compared to the homozygous carriers of the BRCA2-rs11571833 A allele (**Table 3**). We found no additional significant associations between other SNPs and breast cancer risk (**Table 3**).

Interactions of individual SNPs with PM₁₀

When PM₁₀ was modeled as continuous measure, we found a significant interaction of SNP XRCC2-rs3218536 with 2007 PM₁₀ and cumulative average PM₁₀ (**Table 4**) with stronger positive associations of these exposures with breast cancer risk in heterozygous carriers of the rs3218536 T allele (2007 PM₁₀: HR per 10 µg/m³ = 1.54, 95% CI 1.22, 1.95; cumulative average PM₁₀: HR per 10 µg/m³ = 2.80, 95% CI 1.99, 3.96) as compared to homozygous carriers of rs3218536 C allele (2007 PM₁₀: HR per 10 µg/m³ = 1.14, 95% CI 1.03, 1.30; cumulative average PM₁₀: HR per 10 µg/m³ = 1.89, 95% CI 1.64, 2.18) (**Table 4**).

When PM₁₀ was modeled as quartiles, we observed similar association patterns for XRCC2-

rs3218536 (**Tables 5** [for 2007 PM₁₀] and **6** [for cumulative PM₁₀]). Among heterozygous carriers of the XRCC2-rs3218536 T allele as well as among the homozygous carriers of rs3218536 C allele, women who were in the 4th quartile for 2007 PM₁₀ had significant higher risk of breast cancer as compared to those in the 1st quartile (HR for 4th vs. 1st quartile = 1.37, 95% CI 1.12, 1.66 and HR = 1.13, 95% CI 1.04, 1.22, respectively) (**Table 5**). Among heterozygous carriers of the XRCC2-rs3218536 T allele as well as among the homozygous carriers of rs3218536 C allele, women in the 4th quartile for cumulative average PM₁₀ had higher risk of breast cancer as compared to those in the 1st exposure quartile (HR for 4th vs. 1st quartile = 1.45, 95% CI 1.21, 1.74 and HR = 1.34, 95% CI 1.24, 1.45, respectively) (**Table 6**).

Discussion

In this large prospective cohort of postmenopausal women enrolled in the UK Biobank, we investigated the association of selected SNPs in DNA damage signaling and repair genes with postmenopausal breast cancer risk, as well as whether the association of PM₁₀ with postmenopausal breast cancer risk differed by selected SNPs genotypes. The associations of 2007 PM₁₀ and cumulative average PM₁₀ with breast cancer risk differed across genotypes in XRCC2-rs3218536, with stronger associations in heterozygous carriers XRCC2-rs3218536 T allele as well as homozygous carriers of rs3218536 C.

The findings on a positive association of SNP BRCA2-rs11571833 with breast cancer are consistent with results from a meta-analysis of 9 genome-wide association studies, including 10,052 breast cancer cases and 12,575 con-

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Table 4. Association of PM₁₀ (continuous measure) with postmenopausal breast cancer risk, by genotype

SNP/Gene Genotype	PM ₁₀ 2007	Cumulative average PM ₁₀
	HR per 10 µg/m ³ (95% CI) ^a	HR per 10 µg/m ³ (95% CI) ^a
rs861539 (s_affy10138453)/XRCC3		
A A	1.120 (0.870, 1.450)	2.030 (1.410, 2.930)
A G	1.180 (1.003, 1.350)	2.050 (1.700, 2.480)
G G	1.230 (1.060, 1.420)	1.930 (1.570, 2.390)
P for interaction	0.825	0.502
rs16942 (s_affy13890975)/BRCA1		
C C	1.200 (0.910, 1.590)	1.872 (1.252, 2.799)
C T	1.170 (1.020, 1.340)	1.994 (1.635, 2.432)
T T	1.200 (1.005, 1.370)	2.012 (1.657, 2.433)
P for interaction	0.868	0.932
rs4986852 (s_affy13890986)/BRCA1		
T T	NE	NE
T C	0.830 (0.540, 1.260)	1.590 (0.870, 2.900)
C C	1.0121 (1.010, 1.330)	2.010 (1.760, 2.300)
P for interaction	0.094	0.456
rs25487 (s_affy15998738)/XRCC1		
C C	1.120 (0.970, 1.290)	1.836 (1.490, 2.261)
T C	1.260 (1.110, 1.440)	2.176 (1.799, 2.632)
T T	1.130 (0.880, 1.460)	1.809 (1.254, 2.610)
P for interaction	0.406	0.460
rs25489 (s_affy15998758)/XRCC1		
T T	1.219 (0.927, 1.603)	NE
T C	1.260 (0.930, 1.720)	1.864 (1.195, 2.906)
CC	1.170 (1.070, 1.290)	1.968 (1.714, 2.260)
P for interaction	0.836	0.064
rs1799782 (s_affy15998777)/XRCC1		
A A	0.680 (0.190, 2.450)	0.430 (0.070, 2.740)
A G	0.980 (0.740, 1.290)	1.010 (1.360, 2.970)
G G	1.020 (1.010, 1.030)	2.000 (1.740, 2.300)
P for interaction	0.413	0.672
rs13181 (s_affy16026426)/XPD (ERCC2)		
G G	1.210 (0.940, 1.560)	1.990 (1.390, 2.860)
G T	1.130 (0.990, 1.290)	1.980 (1.630, 2.400)
T T	1.0230 (1.070, 1.410)	1.970 (1.600, 2.410)
P for interaction	0.656	0.185
rs1799793 (s_affy16026647)/XPD (ERCC2)		
T T	1.220 (0.920, 1.620)	1.850 (1.230, 2.780)
T C	1.022 (1.060, 1.390)	2.120 (1.740, 2.590)
C C	1.014 (1.000, 1.300)	1.870 (1.540, 2.280)
P for interaction	0.753	0.663
rs3218536 (s_affy29998477)/XRCC2		
T T	0.520 (0.160, 1.750)	0.450 (0.080, 2.370)
T C	1.540 (1.220, 1.950)	2.800 (1.990, 3.930)
C C	1.140 (1.030, 1.250)	1.890 (1.640, 2.180)
P for interaction	0.023	0.048

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rs1800056 (s_affy4166044)/ATM			
C C		NE	NE
C T		1.510 (0.870, 2.600)	2.090 (0.950, 4.630)
T T		1.170 (1.070, 1.290)	1.980 (1.730, 2.260)
P for interaction		0.651	0.622
rs1800057 (s_affy4166144)/ATM			
G G		NE	NE
G C		1.230 (0.810, 1.850)	1.800 (1.300, 3.260)
C C		1.180 (1.070, 1.290)	1.990 (1.740, 2.270)
P for interaction		0.361	0.591
rs144848 (s_affy9226186)/BRCA2			
C C		1.240 (0.900, 1.700)	2.205 (1.401, 3.469)
C A		1.240 (1.070, 1.430)	1.969 (1.602, 2.421)
A A		1.140 (1.000, 1.290)	1.970 (1.640, 2.368)
P for interaction		0.685	0.925
rs4987117 (s_affy9226375)/BRCA2			
T T		NE	NE
T C		1.320 (0.920, 1.900)	2.440 (1.430, 4.150)
C C		1.180 (1.070, 1.290)	1.960 (1.710, 2.240)
P for interaction		0.178	0.106
rs11571833 (s_affy9227257)/BRCA2			
T T		NE	NE
T A		1.180 (0.630, 2.210)	1.250 (0.900, 5.590)
A A		1.180 (1.080, 1.300)	1.980 (1.740, 2.260)
P for interaction		0.999	0.539

Abbreviations: CI, Confidence interval; HR, Hazard ratio; NE, Non-estimable; rs, RefSNP ID number; ^aAdjusted for age, body mass index, race, age at menopause, age at menarche, parity/age at first birth, postmenopausal hormone use, family history of breast cancer, alcohol consumption, and smoking.

Table 5. Association of quartiles of 2007 PM₁₀ with postmenopausal breast cancer risk, by genotype

SNP Genotype	PM ₁₀ 2007 2 nd quartile	PM ₁₀ 2007 3 rd quartile	PM ₁₀ 2007 4 th quartile	P for trend ^b
	HR (95% CI) ^a	HR (95% CI) ^a	HR (95% CI) ^a	
rs861539 (s_affy10138453)/XRCC3				
A A	1.065 (0.866, 1.309)	1.291 (1.060, 1.573)	1.042 (0.843, 1.289)	0.044
A G	1.158 (1.042, 1.287)	1.126 (1.012, 1.253)	1.149 (1.031, 1.281)	0.026
G G	1.254 (1.116, 1.408)	1.123 (0.996, 1.266)	1.210 (1.073, 1.363)	< 0.001
P for interaction	0.841			
rs16942 (s_affy13890975)/BRCA1				
C C	1.194 (0.954, 1.494)	1.140 (0.907, 1.433)	1.155 (0.918, 1.453)	0.450
T C	1.252 (1.121, 1.399)	1.217 (1.088, 1.361)	1.186 (1.058, 1.329)	< 0.001
T T	1.108 (0.996, 1.233)	1.066 (0.957, 1.187)	1.128 (1.011, 1.257)	0.137
P for interaction	0.753			
rs4986852 (s_affy13890986)/BRCA1				
T T	NE	NE	NE	NE
T C	1.027 (0.750, 1.407)	1.141 (0.840, 1.550)	0.842 (0.594, 1.193)	0.383
C C	1.187 (1.101, 1.279)	1.141 (1.058, 1.231)	1.172 (1.086, 1.265)	< 0.001
P for interaction	0.131			

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rs25487 (s_affy15998738)/XRCC1				
C C	1.224 (1.091, 1.374)	1.134 (1.008, 1.275)	1.116 (0.990, 1.258)	0.008
T C	1.135 (1.021, 1.261)	1.131 (1.017, 1.258)	1.189 (1.068, 1.324)	0.012
T T	1.198 (0.978, 1.468)	1.177 (0.960, 1.444)	1.140 (0.925, 1.406)	0.307
P for interaction	0.490			
rs25489 (s_affy15998758)/XRCC1				
T T	0.220 (0.017, 2.804)	1.222 (0.169, 8.858)	2.153 (0.328, 1.135)	0.351
T C	1.276 (1.003, 1.623)	1.102 (0.860, 1.413)	1.192 (0.927, 1.532)	0.228
CC	1.168 (1.082, 1.261)	1.141 (1.056, 1.233)	1.145 (1.058, 1.239)	< 0.001
P for interaction	0.879			
rs1799782 (s_affy15998777)/XRCC1				
A A	1.289 (0.493, 3.370)	0.615 (0.199, 1.901)	0.985 (0.354, 2.742)	0.641
A G	1.017 (0.822, 1.259)	1.032 (0.835, 1.276)	0.926 (0.742, 1.156)	0.780
G G	1.200 (1.110, 1.297)	1.158 (1.071, 1.253)	1.187 (1.096, 1.285)	< 0.001
P for interaction	0.285			
rs13181 (s_affy16026426)/XPD (ERCC2)				
G G	1.222 (1.000, 1.494)	1.285 (1.051, 1.572)	1.229 (0.997, 1.514)	0.079
G T	1.200 (1.079, 1.334)	1.114 (0.999, 1.241)	1.130 (1.012, 1.261)	0.009
T T	1.132 (1.009, 1.270)	1.118 (0.997, 1.255)	1.143 (1.017, 1.284)	0.088
P for interaction	0.718			
rs1799793 (s_affy16026647)/XPD (ERCC2)				
T T	1.193 (0.953, 1.494)	1.295 (1.035, 1.620)	1.181 (0.934, 1.493)	0.154
T C	1.246 (1.116, 1.391)	1.190 (1.064, 1.331)	1.201 (1.072, 1.347)	< 0.001
C C	1.118 (1.004, 1.245)	1.061 (0.952, 1.182)	1.100 (0.986, 1.227)	0.188
P for interaction	0.604			
rs3218536 (s_affy29998477)/XRCC2				
T T	1.322 (0.583, 2.996)	0.687 (0.250, 1.886)	0.532 (0.180, 1.570)	0.307
T C	1.327 (1.096, 1.607)	1.224 (1.007, 1.488)	1.366 (1.124, 1.661)	0.008
C C	1.156 (1.068, 1.251)	1.130 (1.043, 1.223)	1.126 (1.038, 1.221)	0.002
P for interaction	0.068			
rs1800056 (s_affy4166044)/ATM				
C C	NE	NE	NE	
C T	2.899 (1.753, 4.792)	2.641 (1.594, 4.377)	1.559 (0.886, 2.742)	< 0.001
T T	1.149 (1.068, 1.237)	1.113 (1.033, 1.199)	1.144 (1.061, 1.233)	< 0.001
P for interaction	0.881			
rs1800057 (s_affy4166144)/ATM				
G G	NE	NE	NE	NE
G C	1.956 (1.384, 2.764)	1.833 (1.297, 2.590)	1.345 (0.923, 1.959)	< 0.001
C C	1.148 (1.065, 1.236)	1.112 (1.031, 1.199)	1.144 (1.060, 1.235)	< 0.001
P for interaction	0.632			
rs144848 (s_affy9226186)/BRCA2				
C C	1.102 (0.847, 1.435)	1.282 (0.991, 1.658)	1.136 (0.871, 1.482)	0.299
C A	1.194 (1.064, 1.341)	1.211 (1.078, 1.360)	1.225 (1.089, 1.378)	0.002
A A	1.173 (1.061, 1.297)	1.069 (0.964, 1.184)	1.102 (0.993, 1.223)	0.178
P for interaction	0.303			
rs4987117 (s_affy9226375)/BRCA2				
T T	NE	NE	NE	NE
T C	1.173 (0.880, 1.564)	1.124 (0.839, 1.507)	1.287 (0.963, 1.721)	0.392
C C	1.177 (1.091, 1.268)	1.140 (1.056, 1.229)	1.144 (1.059, 1.235)	< 0.001
P for interaction	0.306			

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rs11571833 (s_affy9227257)/BRCA2

Genotype	NE	NE	NE	NE
T T				
T A	1.270 (0.755, 2.137)	1.543 (0.929, 2.562)	1.267 (0.741, 2.617)	0.422
A A	1.173 (1.090, 1.263)	1.132 (1.051, 1.263)	1.149 (1.066, 1.239)	< 0.001
P for interaction	0.931			

Abbreviations: CI, Confidence interval; HR, Hazard ratio; NE, Non-estimable; rs, RefSNP ID number; s_aff#, Affymetrix identifier; SNP, single nucleotide polymorphisms; ^aAdjusted for age, body mass index, race, age at menopause, age at menarche, parity/age at first birth, postmenopausal hormone use, family history of breast cancer, alcohol consumption, and smoking. ^bP for trend using median air pollutant level within each genotype; Note: Quartiles defined as: 1st: ≤ 20.14, 2nd: > 20.14- ≤ 21.72, 3rd: > 21.72- ≤ 23.54, 4th: > 23.54.

Table 6. Association of quartiles of cumulative average PM₁₀ with breast cancer risk, by SNPs alleles

SNP Genotype	Cum average PM ₁₀ 2 nd quartile	Cum average PM ₁₀ 3 rd quartile	Cum average PM ₁₀ 4 th quartile	P for trend ^b
	HR (95% CI) ^a	HR (95% CI) ^a	HR (95% CI) ^a	
rs861539 (s_affy10138453)/XRCC3				
A A	0.983 (0.799, 1.209)	1.029 (0.837, 1.264)	1.363 (1.118, 1.662)	0.002
A G	1.064 (0.955, 1.185)	1.034 (0.928, 1.153)	1.369 (1.234, 1.520)	< 0.001
G G	1.084 (0.962, 1.222)	1.092 (0.969, 1.231)	1.344 (1.196, 1.510)	< 0.001
P for interaction	0.542			
rs16942 (s_affy13890975)/BRCA1				
C C	1.078 (0.859, 1.353)	1.010 (0.801, 1.273)	1.306 (1.047, 1.630)	0.053
C T	1.113 (0.995, 1.244)	1.042 (0.930, 1.168)	1.345 (1.206, 1.501)	< 0.001
T T	0.996 (0.892, 1.113)	1.070 (0.959, 1.193)	1.369 (1.232, 1.522)	< 0.001
P for interaction	0.908			
rs4986852 (s_affy13890986)/BRCA1				
T T	NE	NE	NE	NE
T C	0.994 (0.713, 1.386)	1.365 (0.998, 1.866)	1.206 (0.864, 1.684)	0.135
C C	1.058 (0.980, 1.142)	0.035 (0.958, 1.117)	1.360 (1.264, 1.464)	< 0.001
P for interaction	0.636			
rs25487 (s_affy15998738)/XRCC1				
C C	1.046 (0.929, 1.178)	1.071 (0.951, 1.205)	1.315 (1.172, 1.476)	< 0.001
T C	1.044 (0.937, 1.162)	1.037 (0.930, 1.155)	1.393 (1.256, 1.544)	< 0.001
T T	1.131 (0.922, 1.388)	1.043 (0.846, 1.286)	1.316 (1.075, 1.609)	0.360
P for interaction	0.515			
rs25489 (s_affy15998758)/XRCC1				
T T	NE	NE	NE	NE
T C	1.124 (0.881, 1.434)	1.070 (0.835, 1.369)	1.243 (0.975, 1.586)	0.346
C C	1.047 (0.968, 1.133)	1.044 (0.965, 1.129)	1.355 (1.256, 1.462)	< 0.001
P for interaction	0.159			
rs1799782 (s_affy15998777)/XRCC1				
A A	1.017 (0.391, 2.648)	0.647 (0.210, 1.997)	0.865 (0.317, 2.358)	0.864
A G	1.021 (0.818, 1.275)	1.023 (0.821, 1.277)	1.295 (1.045, 1.605)	0.045
G G	1.061 (0.980, 1.148)	1.059 (0.978, 1.147)	1.361 (1.261, 1.470)	< 0.001
P for interaction	0.940			
rs13181 (s_affy16026426)/XPD (ERCC2)				
G G	0.996 (0.815, 1.217)	1.002 (0.818, 1.228)	1.350 (1.111, 1.639)	0.003
G T	1.074 (0.963, 1.198)	1.049 (0.940, 1.171)	1.349 (1.213, 1.500)	< 0.001
T T	1.050 (0.934, 1.181)	1.062 (0.945, 1.195)	1.345 (1.201, 1.506)	< 0.001
P for interaction	0.252			

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rs1799793 (s_affy16026647)/XPD (ERCC2)				
T T	1.056 (0.843, 1.323)	1.080 (0.862, 1.354)	1.356 (1.086, 1.693)	0.350
T C	1.072 (0.957, 1.199)	1.081 (0.965, 1.210)	1.390 (1.247, 1.550)	< 0.001
C C	1.039 (0.930, 1.160)	1.011 (0.905, 1.130)	1.310 (1.178, 1.458)	< 0.001
P for interaction	0.738			
rs3218536 (s_affy29998477)/XRCC2				
T T	1.449 (0.595, 3.529)	0.128 (0.445, 2.858)	0.607 (0.204, 1.806)	0.475
T C	0.904 (0.741, 1.103)	1.096 (0.905, 1.326)	1.448 (1.205, 1.740)	< 0.001
C C	1.083 (0.999, 1.174)	1.046 (0.964, 1.135)	1.341 (1.240, 1.450)	< 0.001
P for interaction	0.205			
rs1800056 (s_affy4166044)/ATM				
C C	NE	NE	NE	NE
C T	1.663 (1.053, 2.626)	1.573 (0.994, 2.492)	1.370 (0.838, 2.240)	0.145
T T	1.042 (0.967, 1.124)	1.039 (0.963, 1.120)	1.350 (1.255, 1.452)	< 0.001
P for interaction	0.612			
rs1800057 (s_affy4166144)/ATM				
G G	NE	NE	NE	NE
G C	1.178 (0.845, 1.643)	1.183 (0.852, 1.643)	1.278 (0.913, 1.788)	0.545
C C	1.047 (0.970, 1.130)	1.043 (0.966, 1.126)	1.352 (1.256, 1.455)	< 0.001
P for interaction	0.617			
rs144848 (s_affy9226186)/BRCA2				
C C	1.203 (0.920, 1.573)	1.231 (0.942, 1.610)	1.472 (1.135, 1.910)	< 0.001
C A	1.130 (1.005, 1.269)	1.088 (0.966, 1.225)	1.393 (1.243, 1.561)	< 0.001
A A	0.976 (0.880, 1.083)	1.001 (0.903, 1.110)	1.300 (1.177, 1.437)	< 0.001
P for interaction	0.946			
rs4987117 (s_affy9226375)/BRCA2				
T T	NE	NE	NE	NE
T C	1.055 (0.785, 1.419)	1.001 (0.744, 1.347)	1.540 (1.162, 2.040)	0.004
C C	1.055 (0.977, 1.139)	1.056 (0.978, 1.141)	1.338 (1.242, 1.442)	< 0.001
P for interaction	0.157			
rs11571833 (s_affy9227257)/BRCA2				
T T	NE	NE	NE	NE
T A	1.738 (1.000, 3.019)	1.839 (1.054, 3.207)	1.906 (1.092, 3.325)	0.050
A A	1.044 (0.968, 1.125)	1.040 (0.964, 1.121)	1.344 (1.250, 1.445)	0.261
P for interaction	0.362			

Abbreviations: CI, Confidence interval; HR, Hazard ratio; NE, Non-estimable; rs, RefSNP ID number; s_aff#, Affymetrix identifier; SNP, single nucleotide polymorphisms; ^aAdjusted for age, body mass index, race, age at menopause, age at menarche, parity/age at first birth, postmenopausal hormone use, family history of breast cancer, alcohol consumption, and smoking. ^bP for trend using median air pollutant level within each genotype; Note: Quartiles defined as: 1st: ≤ 17.92, 2nd: > 17.92-≤ 19.04, 3rd: > 19.04-≤ 20.25, 4th: > 20.25

trols of European ancestry (odds ratio [OR] = 1.39, 95% CI 1.13, 1.71). The results are also consistent with the genome-wide association study that identified a significant association between the variants and the risk of breast cancer (OR = 1.26, 95% CI 1.14, 1.39, P = 4.9 × 10⁻⁸) [35]. Similar positive association between rs11571833 and breast cancer risk were also found in other previous studies [36-38].

We reported significant interactions of PM₁₀ with XRCC2-rs3218536, a C to T polymorphism located in exon 3 of the XRCC2 gene that has been investigated for its potential impact on breast cancer susceptibility. Consistent with previous studies showing that XRCC2-rs3218536 T allele has a protective effect on breast cancer risk [39-43], or epithelial ovarian cancer risk [44], we found stronger

associations of 2007 PM₁₀ and cumulative average PM₁₀ with breast cancer risk in heterozygous carriers of the T allele and in women homozygous for rs3218536 C allele. Further studies are needed to confirm our findings which could potentially offer some new insights into breast cancer risk management in risk allele carriers living in the areas with high air pollution levels.

To our best knowledge, this is the first study to examine the interactions of PM₁₀ with SNPs in DNA repair genes with respect to postmenopausal breast cancer risk. We utilized a population-based prospective cohort with a stringent protocol, rigorous ascertainment of the health outcomes through continuous linkages to the national registries, and well-validated methods for air pollution assessment. Our study has a few notable limitations. First, even though information on covariates was used only at baseline, correlations with values from follow-up assessments were high. Therefore, evaluating participant risk factors at baseline is unlikely to introduce misclassification. Second, since air pollution exposures were estimated based on a single home address, contribution of external factors unrelated to residential locations to the exposure misclassification cannot be addressed. Nonetheless, recent studies demonstrated very small contribution of commuting to total weekly exposure with negligible underestimation of health effects as compared to the models combining home and workplace exposures [45, 46]. Finally, as this is the first study to examine interactions of SNPs in DNA repair genes with air pollution in relation to breast cancer risk, the findings require further external validation in subsequent investigations.

In conclusion, we found, for the first time, significant interactions of SNPs XRCC2-rs3218536 with PM₁₀ exposure with stronger associations among risk allele carriers. Future studies are warranted to confirm our results and to elucidate the potential biological mechanisms underlying the observed associations. Future studies would also benefit from inclusion of polymorphisms in genes involved in other potential biological pathways that could interact with air pollution given underlying mechanisms behind the specific PM₁₀ constituents, for example, endocrine disruption.

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Disclosure of conflict of interest

None.

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