

### Estimation of heritability and familial correlation in myopia is not affected by past sun exposure

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Manuscripts

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3 **1 Estimation of heritability and familial correlation in myopia is not affected by past sun**  
4 **exposure**  
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33 **18 Abstract**  
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35 **19 Purpose:**  
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37 20 To consider the effect of including past sun exposure in estimating heritability and familial  
38 21 correlation of myopia-related traits.  
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42 **23 Methods:**  
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44 24 We calculate the familial correlation and heritability of anterior chamber depth (ACD), axial  
45 25 length (AL), corneal curvature (CC) and spherical equivalent (SphE), with or without past sun  
46 26 exposure as a covariate, in a large number of unrelated nuclear families from the Raine Study  
47 27 (parents: Gen1, offspring: Gen2) residing in Perth, Australia, a city with a high amount of daily  
48 28 sunlight. [Past sun exposure was objectively measured using conjunctival ultraviolet](#)  
49 29 [autofluorescence \(CUVAF\) photography.](#)  
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55 **31 Results:**  
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3 32 When sun exposure was not included in the analysis, both familial correlation (correlation $\pm$ SE;  
4 33 ACD: 0.308 $\pm$ 0.065, AL: 0.374 $\pm$ 0.061, CC: 0.436 $\pm$ 0.063, SphE: 0.281 $\pm$ 0.070) and heritability  
5 34 (ACD: 0.606 $\pm$ 0.104, AL: 0.623 $\pm$ 0.098, CC: 0.793 $\pm$ 0.079, SphE: 0.591 $\pm$ 0.106) were significant  
6 35 (all  $P < 0.001$ ) for all traits. However, there was no significant change in both familial  
7 36 correlation and heritability estimates when sun exposure was included as an additional covariate.  
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12 37  
13 38 Conclusions:

14 39 Past sun exposure does not affect the estimation of the additive genetic component in myopia-  
15 40 related traits.  
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19 41

20 42 **Running Head**

21 43 Myopia heritability not affected by sun history  
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25 44

26 45 **Keywords**

27 46 Myopia, heritability, additive genetic variance, nuclear family, sun exposure, the Raine Study  
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## 47 **Introduction:**

48 Myopia is a multifactorial disease arising from a mismatch of the ocular biometry parameters  
49 responsible for determining how light rays are focused on the retina (1). Light rays in a myopic  
50 eye converge in front of rather than on the retina, resulting in image defocus. The prevalence of  
51 myopia is increasing worldwide (2-4), notably in South East Asia where the disease has reached  
52 epidemic levels (4). However, much work is still required to understand the aetiology of myopia  
53 in order to develop effective treatment and prevention strategies.

54  
55 It is well accepted that both environmental and genetic factors interact to underpin the  
56 overall phenotype in myopia (5, 6). Studies have shown that increased education drives the  
57 increase in the prevalence of myopia (7, 8). Conversely, it has been shown that greater outdoor  
58 light exposure is inversely related to the myopia prevalence (9-11) and myopia progression (12).  
59 **However, the relationship between education and sun exposure in myopia is not**  
60 **straightforwardly antagonistic. It has been reported that an increase in education level results in a**  
61 **follow-on decrease in time spent outdoor.(7, 8, 13) Hence there may be an interactive effect**  
62 **between the two factors.** To date, the exact mechanism(s) behind the opposing effects of  
63 education and sun exposure on myopia are unclear. Animal studies suggest dopamine pathways  
64 are involved. More specifically, bright light has been shown to increase dopamine activity which  
65 in turn inhibits myopia progression in chicken (14), mouse (15) and monkey (16) myopia  
66 models. A recent genetic study also implicated light-induced signaling pathways playing a  
67 crucial role in human myopia (17). The authors performed genome-wide association meta-  
68 analysis in 160,420 participants and replication in 95,505 participants, reported over 160 risk loci  
69 and noted light-dependent retina-to-sclera signaling cascade as a major pathway for myopia  
70 development. Taken together, the above studies provide strong evidence that light exposure  
71 history is intrinsically involved in myopia development. However, it is not clear whether light  
72 exposure history interacts with the genetic variance and protects those who are susceptible to  
73 myopia.

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75 Given the complexity associated with identifying and examining the relationship between  
76 environmental and genetic contributions in myopia, one can break this down into two  
77 components. First, instead of considering myopia as a whole, one can investigate quantifiable

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3 78 ocular traits associated with the disease. The four ocular traits commonly reported in myopia are  
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5 79 spherical equivalent (SphE; extent of myopia in the eye, as calculated by the sum of spherical  
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7 80 refractive error and half cylindrical refractive error), anterior chamber depth (ACD; the distance  
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9 81 between the apex of anterior lens and the corneal endothelium), axial length (AL; distance from  
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11 82 the anterior to posterior poles of the ocular globe) and corneal curvature (CC; radius of curvature  
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13 83 of the front surface of the eye, defined as the average of horizontal and vertical meridians,  
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15 84 measured in dioptres of keratometric power) (1). Second, instead of quantifying the contribution  
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17 85 of individual molecular components, one can investigate the overall genetic contribution to each  
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19 86 of the four aforementioned traits by calculating the heritability. Heritability calculation assumes  
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21 87 that the phenotypic variance of a quantitative trait can be decomposed into genetic and  
22  
23 88 environmental components and is time- and population-specific due to variations in  
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25 89 environmental and genetic influences (18). The genetic component can be further subdivided  
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27 90 into additive (polygenic), dominance (interaction between alleles at the same locus) and epistatic  
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29 91 (interaction between alleles at different loci) variance (19-21). When estimating inter-generation  
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31 92 heritability, dominance and epistatic components are assumed to be zero; hence the ratio of the  
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33 93 additive variance to the overall phenotype variance (i.e. heritability in the narrow sense,  $h^2$ ) is  
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35 94 typically reported (18).  
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34 96 Heritability studies in myopia have been conducted using twin- (22, 23), sibling- (24, 25)  
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36 97 and population-based (26-28) cohorts. However, one common issue with twin- and sibling-based  
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38 98 studies is that they do not appropriately account for shared environments in the modelling (29).  
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40 99 Furthermore, previous heritability studies of traits associated with myopia usually accounted for  
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42 100 age, sex and education in the modelling but did not consider the effect of past sun exposure; a  
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44 101 key environmental factor which has been shown to be inversely related to myopia (10, 11).  
45  
46 102 Conjunctival ultraviolet autofluorescence (CUVAF) has been shown to be an objective marker of  
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48 103 sun exposure and will be utilized in in this study to investigate whether variation in sun exposure  
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50 104 has a confounding effect on estimating heritability of myopic traits. It has been reported that  
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52 105 CUVAF is influenced by both environment (50%) and genetics (37%) (30). Given the inverse  
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54 106 relationship between light exposure and myopia development in both animal (14-16) and human  
55  
56 107 (9, 10) studies, we set out to investigate whether light history will affect the estimated heritability  
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58 108 in myopia. In this study, we examined the heritability of myopic traits in a large number of  
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109 unrelated nuclear families residing in Perth, Australia. We asked whether the heritability of  
110 myopia-related traits is modified when sunlight exposure history is included in the modelling.

111

## 112 **Materials and Methods**

### 113 *Study participants*

114 This was a cross-sectional, multi-generational, population-based study conducted as part of the  
115 Raine Study, which has been described previously (31-33). In brief, 2900 pregnant women were  
116 recruited in Perth, Australia, between May 1989 and November 1991. Since birth, the offspring  
117 have undergone serial health and socio-economic assessments, including a condensed eye  
118 examination at 27 years of age (2016 – 2018; Gen2-27 year follow-up). The same eye  
119 examination was performed on the parents around the same time (2015 – 2017; Gen1-26 year  
120 follow-up). Individuals who had ocular diseases that could affect myopia (i.e. keratoconus,  
121 glaucoma, lenticular opacification, amblyopia) or who had laser refractive or cataract surgery  
122 were excluded. The study was conducted in accordance with the tenets of the Declaration of  
123 Helsinki and the study protocol was approved by the Human Research Ethics Committee at the  
124 University of Western Australia. Informed consent was obtained from all participants.

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### 126 *Eye Examination*

127 In both generations, ACD, AL and CC were measured with a noncontact partial coherence  
128 interferometry (IOL Master; Carl Zeiss Meditec AG, Jena, Germany). SphE was calculated from  
129 non-cycloplegic autorefraction (Nidek ARK-1, Nidek Co Ltd, Gamagori, Japan). Past sun history  
130 was objectively measured by conjunctival ultraviolet autofluorescence (CUVAF) photography  
131 which has been previously validated (11, 34, 35). This involves taking high-resolution digital  
132 images (Nikon D100 coupled with a 105 mm 147 f/2.8 Macro Nikkor lens; Nikon, Shinagawa,  
133 Tokyo, Japan) of the nasal and temporal conjunctiva in both eyes using ultraviolet flash  
134 illumination (Metz 36C-2, Metz, GmbH, Zirndorf, Germany fitted with Wratten glass filters).  
135 CUVAF areas were measured with a custom, semi-automated MATLAB program (36).  
136 Education attainment data, if available, were categorised into four levels for each individual (1:  
137 primary school, 2: secondary school, 3: vocational training, 4: university).

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### 139 *Statistical Analysis*

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3 140 Pedigrees were included in the analysis if the nuclear family requirement was met (i.e. father,  
4 141 mother, offspring). Only right eye data were incorporated into the analysis. Familial correlation  
5 142 of ACD, AL, CC and SphE were estimated using the Family Correlation (FCOR) analysis found  
6 143 in the S.A.G.E. (Statistical Analysis for Genetic Epidemiology; Statistical Solutions, Ltd., Cork,  
7 144 Ireland) package. However, as FCOR does not incorporate covariates into the analysis, R  
8 145 statistical environment (R Foundation for Statistical Computing, Vienna, Austria) was utilised to  
9 146 calculate the residual between each phenotype measurement and modelled prediction after  
10 147 adjusting for covariates (continuous covariate: age; categorical variables: sex, education  
11 148 attainment) (37). The residuals were then input into the FCOR analysis to estimate familial  
12 149 correlation for each trait. To estimate the effect of sun exposure on familial correlation, a  
13 150 separate set of FCOR analysis for the aforementioned myopic traits was also performed with  
14 151 CUVAF area inbuilt as an additional covariate in residual calculation in R.

152

153 The ASSOC procedure in S.A.G.E. (19), which utilises a maximum likelihood approach,  
154 was employed to estimate heritability. A linear regression model with sex, age and education  
155 attainment defined as covariates, was generated by the ASSOC algorithm, which partitioned the  
156 residual variance into a subject-specific and an additive polygenic component. Heritability of  
157 SphE, ACD, AL and CC were estimated by dividing the polygenic component by the total  
158 residual variance (19, 21). Age, education attainment and sex were built into the model as  
159 covariates. A separate set of ASSOC analysis was also conducted with CUVAF area built in as  
160 an additional covariate to estimate the effect of sun exposure on heritability estimates.

161

## 162 **Results**

### 163 *Study demographic*

164 A total of 992 individuals from 328 pedigrees were analysed (Table 1). The average family size  
165 was 3.02, with 13 families with 2 sibling members only, 21 families with 4 members (i.e. parents  
166 and 2 offspring) and the majority (294 families) with 3 members (i.e. parents and 1 offspring) in  
167 a nuclear family. Mean age was 57.0 years (SD 5.6 years) in the parent generation and 26.6 years  
168 (SD 0.4 years) in the offspring generation. Educational attainment was overall higher in the  
169 offspring generation (Table 2; chi-square test,  $P < 0.05$ ), as was CUVAF area (mean  $\pm$ SD,  
170 parents:  $29.26 \pm 26.79$  mm<sup>2</sup>; offspring:  $44.79 \pm 30.60$  mm<sup>2</sup>; t-test between two generations  $P <$

171 0.05). Additionally, CUVAF area was smaller in myopic (SphE  $\leq -0.50$ DS) compared to non-  
 172 myopic (SphE  $> -0.50$ DS) eyes for both the parents ( $27.71 \pm 27.79$  vs.  $29.76 \pm 26.36$  mm<sup>2</sup>) and  
 173 offspring ( $42.66 \pm 29.37$  vs.  $46.79 \pm 31.63$  mm<sup>2</sup>). SphE data were available from 582 individuals  
 174 from the parent generation (mean:  $-0.10 \pm 1.94$  D) and 309 individuals from the offspring  
 175 generation (mean:  $-0.78 \pm 1.41$  D). An unpaired t-test ( $P < 0.001$ ) revealed significantly more  
 176 negative SphE (i.e. greater degree of myopia) in the offspring compared to the parents. Similarly,  
 177 ACD was significantly greater in the offspring (parents:  $3.26 \pm 0.32$  mm; offspring:  $3.61 \pm 0.28$   
 178 mm;  $P < 0.001$ ). However, no statistical difference between the two generations was detected in  
 179 AL (parents:  $23.77 \pm 1.02$  mm; offspring:  $23.71 \pm 0.93$  mm;  $P = 0.35$ ) or CC (parents:  $43.70 \pm$   
 180  $1.50$  D; offspring:  $43.68 \pm 1.43$  D;  $P = 0.83$ ).

181

### 182 *Familial correlation and heritability*

183 Due to the small sample sizes, familial correlation between siblings was not calculated. Figure 1  
 184 (filled symbol) shows that, for SphE, there was a significant correlation between the parents and  
 185 their offspring (205 pairs, correlation  $\pm$  SE:  $0.281 \pm 0.070$ , 95% CI:  $0.14 - 0.42$ ,  $P < 0.001$ ) after  
 186 adjusting for sex, age, education attainment and CUVAF area but not between spouse pairs (249  
 187 pairs, correlation  $\pm$  SE:  $0.043 \pm 0.064$ , 95% CI:  $-0.08 - 0.17$ ,  $P = 0.50$ ). Correlations between  
 188 parent-offspring were found for AL (parent-offspring: 206 pairs, correlation  $\pm$  SE:  $0.374 \pm 0.061$ ,  
 189 95% CI:  $0.25 - 0.50$ ,  $P < 0.001$ ; spouses: 252 pairs, correlation  $\pm$  SE:  $0.034 \pm 0.063$ , 95% CI:  $-$   
 190  $0.09 - 0.16$ ,  $P = 0.59$ ) and ACD (parent-offspring: 204 pairs, correlation  $\pm$  SE:  $0.308 \pm 0.065$ ,  
 191 95% CI:  $0.18 - 0.43$ ,  $P < 0.001$ ; spouses: 261 pairs, correlation  $\pm$  SE:  $0.015 \pm 0.063$ , 95% CI:  $-$   
 192  $0.11 - 0.14$ ,  $P = 0.81$ ), but with no correlation between spouses. CC was significantly correlated  
 193 between parents and offspring as well as between spouses (parent-offspring: 206 pairs,  
 194 correlation  $\pm$  SE:  $0.436 \pm 0.063$ , 95% CI:  $0.31 - 0.56$ ,  $P < 0.001$ ; spouses: 252 pairs, correlation  
 195  $\pm$  SE:  $0.155 \pm 0.062$ , 95% CI:  $0.03 - 0.28$ ,  $P < 0.05$ ). Familial correlation values for all four traits  
 196 were similar when estimated without including CUVAF area as a covariate (unfilled symbols).

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198 Table 3 lists the heritability of SphE, AL, ACD and CC after adjusting for age, education  
 199 attainment and sex. Heritability estimates were also calculated with or without CUVAF as an  
 200 additional covariate. With CUVAF included as a covariate, heritability of SphE was moderately  
 201 high at  $0.583 \pm 0.106$  (95% CI:  $0.375 - 0.791$ ,  $P < 0.001$ ). Heritability of ACD and AL was



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3 202 similar (ACD:  $0.564 \pm 0.112$ , 95% CI 0.344 – 0.784; AL:  $0.623 \pm 0.098$ , 95% CI 0.420 – 0.804;  
4 203 both  $P < 0.001$ ). CC had the highest heritability at  $0.779 \pm 0.082$  (95% CI 0.618 – 0.940,  $P <$   
5 204 0.001). In all four traits, heritability calculations without including CUVAF area as a covariate  
6 205 returned non-significant increases.  
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## 11 207 **Discussion**

12 208 The heritability of myopic parameters has been estimated in different cohorts, by examining data  
13 209 from twins (22, 23), siblings (24, 25), or population-based pedigrees (26-28). Heritability values  
14 210 estimated from the current, pedigree-based study is, as expected, lower than that in twin or  
15 211 sibling studies. For example, in twin studies, the heritability of SphE has been estimated between  
16 212 0.61 and 0.94 (22, 23, 29, 38-40). Similarly, sibling pair studies have reported SphE heritability  
17 213 between 0.69 to 0.90 (24, 25). The reason behind the higher heritability estimates in the twin and  
18 214 sibling studies could be due to the higher shared family environment arising from the lack of  
19 215 cross-generation or cohort effects (29) and the inclusion of dominance effects in twin and sibling  
20 216 heritability calculations (41). Therefore it is more rational to compare heritability values in the  
21 217 current study to other pedigree-based studies. In a previous pedigree-based study conducted in  
22 218 Melbourne, Australia (132 pedigrees, 723 individuals, family size range 2 to 36 members), the  
23 219 heritability of SphE, ACD, AL and CC estimated with childhood shared environment was 0.50,  
24 220 0.78, 0.73 and 0.16, respectively (28). A similarly sized pedigree study in Beaver Dam,  
25 221 Wisconsin, USA (189 pedigrees, 715 individuals) had similar heritability estimates for SphE  
26 222 (0.58), ACD (0.78) and AL (0.64) but a much greater value for CC (0.95) (42). We found,  
27 223 without including CUVAF area as a covariate in order to be comparable to the previous studies,  
28 224 similar SphE heritability (0.59) but a slightly lower slightly lower heritability for ACD and AL  
29 225 (0.61 and 0.62, respectively). Interestingly, the heritability of CC in the current study (0.79) is  
30 226 closer to the US-based than the Australia-based study. The reason behind the low CC heritability  
31 227 in the previous Australia-based study is unclear, given that moderately high heritability values  
32 228 have been reported in other studies (0.64 (26), 0.57 (27)). Figure 2 compares our findings to  
33 229 previous works.  
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53 231 Familial correlation in the current study showed significant correlation between all four  
54 232 myopic traits examined between the parent-offspring pairs, which agree with the heritability  
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3 233 findings. There was no significant correlation in SphE, AL and ACD in spouse pairs, which was  
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5 234 expected. However, a significant correlation in CC in spouse pairs was noted in the current  
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7 235 study, which was also observed previously (28) and was speculated to be due to assortative  
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9 236 mating.

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12 238 One novel aspect of this study is the estimation of past sun exposure by measuring  
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14 239 CUVAF area (10), which should have increased familial correlation and heritability estimates of  
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16 240 myopia related parameters by accounting for discrepancies between family members. This was  
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18 241 not the case. One possible explanation could be that sun exposure was too uniform within  
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20 242 generations. However, CUVAF area, when separated into myopic and non-myopic individuals,  
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22 243 shows a tendency of larger CUVAF area in non-myopic eyes in both generations. This inverse  
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24 244 relationship between CUVAF area and myopia has been reported previously, in regions with  
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26 245 high (10, 11) or low (9) annual sunlight hours. Hence we reason that past sun exposure has no  
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28 246 true effect on the estimation of additive genetic portion of myopia related traits. Note that this  
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30 247 suggests past sun exposure has a minimal effect on the contribution made by additive genetic  
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32 248 variation in myopia-associated traits, not that past sun exposure has minimal influence on the  
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34 249 final expression of the traits investigated. In support of our conclusion, although the study was  
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36 250 conducted in Perth, a city with high annual sunlight hours (average 8.8 hr/day), heritability of  
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38 251 myopic traits was similar to the previous two population-based studies in two cities with fewer  
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40 252 hours of sunlight (Melbourne, Australia, 6.5 hr/day (28); Beaver Dam, Wisconsin, USA 4.3  
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42 253 hr/day (42)).

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45 255 The strength of the current study is the enrolment of a large number of nuclear families  
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47 256 with minimal ascertainment, which is a more representative approach to estimate heritability in  
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49 257 the general population than estimating heritability from twin studies. A key concern in estimating  
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51 258 heritability from twin studies is the difficulty involved in modelling shared environmental effects  
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53 259 (43), which is circumvented by analysing data from a large number of assumed unrelated nuclear  
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55 260 families in the current study. A potential limitation of the current study is that non-cycloplegic  
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57 261 autorefraction was recorded in both generations. In the parent generation, given that the youngest  
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59 262 age was 40.8 years, it is unlikely that accommodation would play a major role in determining the  
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263 overall refraction in this cohort. In the offspring generation (range 25.1 – 28.1 years), although

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3 264 non-cycloplegic autorefracton may be more myopic than cycloplegic autorefracton due to  
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5 265 accommodation, it has been shown that SphE measured from cycloplegic and non-cycloplegic  
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7 266 autorefracton were not statistically different in adults between 20 – 26 years old (44). Another  
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9 267 limitation is that sun-exposure habits change from childhood to adulthood. However even the  
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11 268 studies in adults are conflicting; one study reported a negative association between CUVAF area  
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13 269 and self-reported sunglasses wear (45) while another showed no association between the two  
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15 270 variables (46). Further research is required to tease out the effect sun-exposure habits have on  
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17 271 CUVAF area.  
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19 273 In conclusion, by examining data from a large number of nuclear families in an  
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21 274 Australian population, we have reaffirmed the previous work that showed myopia-related traits  
22  
23 275 are highly heritable. Moreover, our study suggests that sun exposure has minimal effect on  
24  
25 276 estimating both familial correlation and heritability in myopia-related traits.  
26

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32  
33 281 data collection.  
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## 35 282

## 36 283 **Competing interests**

37  
38 284 The author(s) declare no competing interests.  
39

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3 426 **Figure Legends**  
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7 428 **Figure 1: Familial correlation of myopic traits in parent-offspring and spouse pairs.** Filled  
8 symbols indicate CUVAF area was included as a covariate in the analysis. Unfilled symbols  
9 indicate CUVAF area was not included as a covariate. Error bars are  $\pm$  SE.  
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14 432 **Figure 2: Heritability estimates from the current study compared to previous findings.**  
15 Estimates from the current study compared to estimates from Chen and colleagues from  
16 Melbourne (28) and Klein and colleagues from Beaver Dam (42).  
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1 **Table 1:** Participant demographics

	<b>n</b>	<b>Mean</b>	<b>SD</b>
<b>Pedigree Size</b>	328	3.02	0.32
<b>Parent Generation</b>			
Age [y]	626	57.0	5.6
CUVAF in all eyes [mm <sup>2</sup> ]	568	29.16	26.80
in myopic eyes [mm <sup>2</sup> ] <sup>^</sup>	166	27.71	27.79
in non-myopic eyes [mm <sup>2</sup> ] <sup>^</sup>	402	29.76	26.36
Sex (Female)	626 (313)	-	-
Spherical equivalent [D]	582	-0.10	1.94
Anterior chamber depth [mm]	585	3.26	0.32
Axial length [mm]	586	23.77	1.02
Corneal curvature [D]	586	43.70	1.50
Education attainment*	597	3.1	0.8
<b>Offspring Generation</b>			
Age [y]	321	26.6	0.4
CUVAF [mm <sup>2</sup> ]	309	44.79	30.60
in myopic eyes [mm <sup>2</sup> ] <sup>^</sup>	150	42.66	29.37
in non-myopic eyes [mm <sup>2</sup> ] <sup>^</sup>	159	46.79	31.63
Sex (Female)	366 (187)	-	-
Spherical equivalent [D]	309	-0.78	1.41
Anterior chamber depth [mm]	307	3.61	0.28
Axial length [mm]	309	23.71	0.93
Corneal curvature [D]	308	43.68	1.43
Education attainment*	140	3.3	0.8

2 <sup>^</sup> Myopia defined by spherical equivalent  $\leq -0.50$  DS

3 \* Categorical: 1 - primary school, 2 - secondary school, 3 - vocational training, 4 - university



4 **Table 2:** Educational attainment in the two generations

	<b>Generation 1 (%)</b>	<b>Generation 2 (%)</b>
<b>1</b> Primary school	0.9	0.0
<b>2</b> Secondary school	25.0	18.6
<b>3</b> Vocational training	34.0	28.6
<b>4</b> University	40.1	52.8

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6 **Table 3:** Heritability of myopic traits estimated with or without CUVAF as a covariate

		<i>h</i> <sup>2</sup>	SE	<i>P</i>
<b>Spherical equivalent</b>	With CUVAF	0.583	0.106	<0.001
	Without CUVAF	0.591	0.106	<0.001
<b>Anterior chamber depth</b>	With CUVAF	0.564	0.112	<0.001
	Without CUVAF	0.606	0.104	<0.001
<b>Axial length</b>	With CUVAF	0.612	0.098	<0.001
	Without CUVAF	0.623	0.098	<0.001
<b>Corneal curvature</b>	With CUVAF	0.779	0.082	<0.001
	Without CUVAF	0.793	0.079	<0.001

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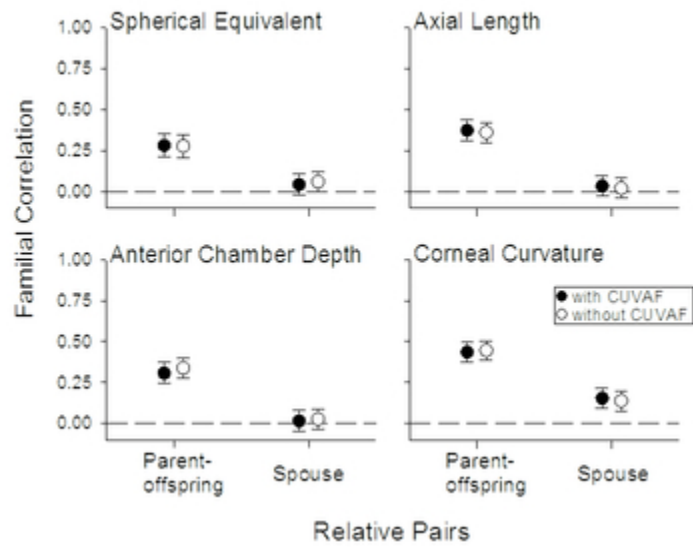


Figure 1: Familial correlation of myopic traits in parent-offspring and spouse pairs. Filled symbols indicate CUVAF area was included as a covariate in the analysis. Unfilled symbols indicate CUVAF area was not included as a covariate. Error bars are  $\pm$  SE.

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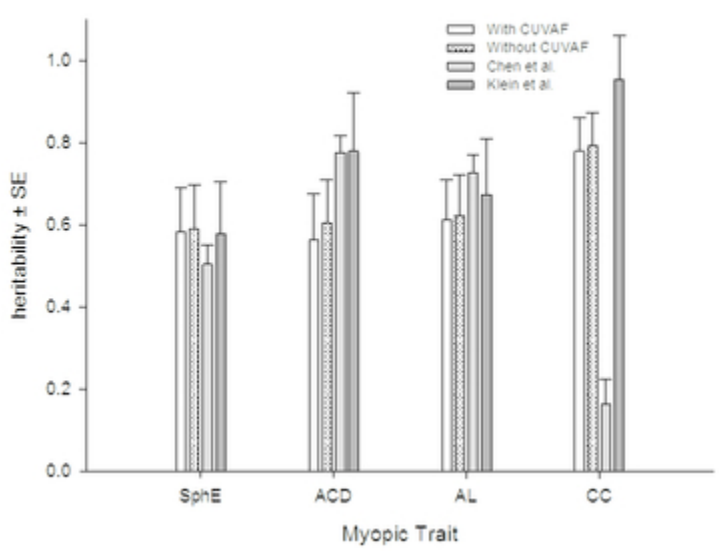


Figure 2: Heritability estimates from the current study compared to previous findings. Estimates from the current study compared to estimates from Chen and colleagues from Melbourne (27) and Klein and colleagues from Beaver Dam (41).

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