Project Details		
Project Code	MRCPHS24Br Stergiakouli	
Title	Using genetics to understand mental health outcomes in children from a	
	clinical birth cohort	
Research Theme	Population Health Sciences	
Summary	This project will provide in-depth training in genetic epidemiology,	
,	childhood mental health, cohort studies, cleft. The student will have the	
	opportunity to develop into one of few experts globally with	
	understanding across these areas. In this PhD you will investigate the	
	genetic and non-genetic causes of neurodevelopmental and mental	
	health outcomes in children born with one of the most common birth	
	defects, cleft of the lip and/or palate.	
Description	The UK-based Cleft Collective comprises the world's largest cohort study	
	of children affected by cleft and their families	
	(www.bristol.ac.uk/dental/cleft-collective/) with longitudinal	
	information mental health, parental, prenatal and early life factors as	
	well as genetic data. Cleft of the lip and/or palate is a common birth	
	defect and occurs at a rate of one in 650 live births in the UK. Being born	
	with cleft places a significant burden on children, their families and the	
	health system as they require surgery (multiple times depending on cleft	
	type), and other interventions to improve appearance, speech, hearing	
	and dentition. They are also at increased risk of mental health and	
	neurodevelopmental problems (Berman et al 2022). These problems	
	may reflect the psychological, developmental and social impacts of	
	clefting and its treatment. Alternatively, they may reflect genetic factors	
	either as pleiotropic outcomes of genetic susceptibility to clefting or as	
	independently inherited genetic risk. The aetiology of both cleft and of	
	mental health outcomes is complex, with common risk alleles (Cleynen	
	et al 2021, Howe et al 2018) of individually small effects as well as rare	
	genetic mutations of large effect and environmental factors playing	
	roles. One group of rare mutations of large effect are Copy Number	
	Variants (CNVs), referring to deletion or duplication of a part of the	
	genome leading to differences between individuals in the number of	
	copies of genes within the affected region. A number of CNVs are known	
	to increase risk of neurodevelopmental disorders (ND-CNVs), such as	
	ADHD and autism, as well as mental health disorders but the presence	
	and the impact of ND-CNVs have not been studied in cleft (Chawner et al	
	2019). The PhD project will provide the first detailed description of	
	neurodevelopmental and mental health outcomes in children with cleft	
	and examine the contributions of genetic and environmental factors. We	
	will use two unique genetically informative clinical cohorts of children;	
	the University of Bristol Cleft Collective and the Cardiff University longitudinal ExperiencCes of people with cOpy number variants (ECHO)	
	study. Control samples will consist of the Avon Longitudinal Study of	
	Parents and Children (ALPSAC) and the Millennium cohort which are	
	deeply-phenotyped cohorts of typically developing children. The aims	
	of the study are: - To improve understanding of risk of	
	neurodevelopmental and mental health problems in children born with	
	cleft. This will be achieved by comparing children born with cleft to	
	those at high genetic risk of neurodevelopmental and mental health	
	problems but without cleft (children with ND-CNV from the ECHO study)	
	problems but without dest (dilluser with 145-city from the Lerio Study)	

and typically developing children. - To improve understanding of the causes of neurodevelopmental and mental health problems in children born with cleft. This will be achieved by determining in children born with cleft the contribution of: a) composite genetic (polygenic) risk scores for neurodevelopmental and psychiatric disorders and b) rare genetic mutations. Causally informative designs will also be used to test the causal link between cleft and mental health problems. The student will be instrumental in determining the type of datasets and study designs that will be best suited to improve causal inference and will be encouraged to explore possible collaboration with the African Cleft Genetics consortium and/or use of publicly available data. - To improve understanding of non-genetic factors, the project will also examine contributions of early developmental problems, family socio-economic status, family relationship quality, and traumatic experiences to risk of childhood psychiatric disorders in children born with cleft. The student will be able to take part in consultations with the Cleft Collective Patient and Public Involvement (PPI) group and steer the project towards nongenetic factors that they have identified as important for families affected by cleft.

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