Genoeconomics

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INTRODUCTION

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Since Taubman (1976), twin studies have identified a significant degree of
heritability for income, education, and many other economic phenotypes (e.g., Behrman
et al., 1980, Behrman and Taubman, 1989). These studies estimate heritability by
contrasting the correlation of economic phenotypes in monozygotic (identical) twin pairs
and dizygotic (fraternal) twin pairs. Recent improvements in the technology of studying
the human genome will enable social scientists to expand the study of heritability, by
incorporating molecular information about variation in individual genes. This essay
describes our hopes and concerns about the new research frontier of economic genomics,
or genoeconomics.
The core theme of health economics is that individual behavior and social
institutions influence health outcomes (Fuchs, 1974). The primary contribution of
genoeconomics will likely be to identify the many ways in which individual behavior and
social institutions moderate or amplify genetic differences.
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Within genoeconomics, there will be at least three major types of conceptual contributions. First, economics can contribute a theoretical and empirical framework for understanding how market forces and behavioral responses mediate the influence of genetic factors. Second, incorporating genetics into economic analysis can help economists identify and measure important causal pathways (which may or may not be genetic). Finally, economics can aid in analyzing the policy issues raised by genetic information.

23	Smoking provides one example of economic analysis that can improve the study
24	of how genetic variation influences phenotypic variation. Traditional heritability studies
25	suggest at least some genetic component to lung cancer (Lichtenstein et al., 2000);
26	molecular genetics identifies a locus of lung cancer susceptibility on chromosome 6q23-
27	25 (Bailey-Wilson et al., 2004). The genetic susceptibility to lung cancer is undoubtedly
28	amplified by cigarette smoking, an economic decision affected by advertising, social
29	norms, cigarette prices, consumer income, and tax rates on cigarettes (Cutler and Glaeser,
30	2005). Economics can explain how social institutions – like the market for cigarettes
31	interact with genes to jointly generate important health phenotypes like lung cancer.
32	More generally, economic institutions may either reduce or amplify the inequalities
33	produced by genetic variation. In some situations, social transfers partially offset genetic
34	factors - for instance, when individuals with illness receive extra insurance-based
35	resources to treat or manage their illness. On the other hand, social institutions
36	sometimes heighten inequalities associated with genetic factors - for instance, when
37	individuals with advantageous cognitive abilities receive extra "merit-based" resources in
38	the form of academic scholarships and admission to college or post-graduate degree
39	programs.
40	The second subfield uses genetic information to identify causal mechanisms. This
41	subfield will recognize a central fact of empirical economics: the ubiquity of mutual
42	causation - for instance, health influences wealth, and vice versa (Case, Lubotsky, and
43	Paxson, 2002). Genetic measures can help to separate the causal effect in a particular
44	direction. For example, a robust literature argues that height, even in adolescence,
45	increases earnings (Persico et al., 2004). However, this literature is plagued by difficulty

in controlling for the fact that height also reflects better health and nutrition in wealthier families. If height-linked alleles were identified, then they could, in principle, be used to measure the causal impact of exogenous variation in height. More formally, such research would analyze allele variation across siblings to identify the causal effect of genetic predispositions for height (controlling for household background characteristics). To take another example, Ding et al. (2004) address the causal effect of health on educational outcomes, using genetic predictors of health to ameliorate confounding by third factors potentially correlated with both health and educational outcomes. More generally, cognition-linked alleles will contribute to our understanding of the cognitive factors that influence income, or the extent to which cognitive factors influence decisionmaking about savings and wealth. Genetic research will also identify biological mechanisms that interact with environmental factors to jointly influence behavior. We anticipate that crude concepts like "risk aversion" (unwillingness to take risks) and "patience" (willingness to delay gratification) that are central to economic analyses will be decomposed into much more useful subcomponents associated with particular neural mechanisms and their environmental and genetic antecedents (Plomin, Corley, Caspi, Fulker, and DeFries, 1998). Finally, ongoing research will eventually enable researchers to employ new genetic control variables, thereby improving the power of statistical procedures. Much of the promise of genoeconomics is based in part on economists' long tradition of policy analysis. The economic approach is one in which governments are not seen as infallible custodians of the public good, but rather as separate actors that often

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important role in the analysis of policy questions. Economists have identified competitive forces that cause individuals to reveal information that is privately beneficial but potentially socially harmful. Economists understand how the public release of certain genetic information can theoretically undermine insurance institutions and thereby inefficiently increase social inequality. Genoeconomics will also identify specific geneenvironment interactions with policy implications. For example, imagine that particular genes turn out to be risk factors for poor educational outcomes, poor performance in the labor market, and consequently low levels of income. Imagine too that particular educational interventions are found that mitigate these disadvantages. Then gene-based policies could target disadvantaged groups with focused interventions. Such interventions will remain purely speculative until the necessary precursor research is implemented and ethical questions are resolved, but focused interventions nevertheless hold out considerable long-run potential.

Despite the promise of genoeconomics, there are clearly enormous pitfalls. Even under the best of circumstances—when a particular genetic pathway has been clearly established—there are concerns about informing individuals of their own risks, especially when there are few interventions to alleviate those risks or when the risks are very small. Providing information to parents about the genome of a fetus or child creates a different set of dilemmas, including the risk of selective abortion. This has been well-discussed with reference to a genetic endowment as straightforward as gender, where in many societies economic investment in a daughter is seen as less beneficial than economic investment in a son (e.g., Garg and Morduch, 1998). If the same issues arose in relation to more complex economic traits, this would generate a host of ethical and policy

questions. Documenting the power of the genome to society at large also creates risks as identifiable social and ethnic groups may face discrimination (or become beneficiaries of positive discrimination) on the basis of their presumed genetic endowments.

These problems are multiplied when genetic research is done carelessly.

Historically, there have been many cases of false positives where early genetic claims have evaporated under subsequent attempts at replication. These false positives can create tremendous mischief. A failure to highlight the full extent of the interaction between genes and environment is likewise dangerous because the public may come to believe falsely in genetic determinism. The responsible path requires statistical care, attention to how genes and environment jointly determine outcomes, and extreme sensitivity to the ethical issues surrounding genetic knowledge.

Despite these dangers, we believe that there is potential for productive collaboration between economists, cognitive scientists, epidemiologists and genetic researchers. In the rest of this essay, we sketch one vision for this field. In Section II, we discuss methodological challenges that confront research in genoeconomics. In Section III, we outline a study that is currently underway, which uses a SNP panel to analyze associations between candidate cognitive genes and economic phenotypes. Section IV concludes.

II. METHODOLOGICAL CHALLENGES AND PITFALLS

Successful implementation of the research program described above will require careful attention to many methodological issues, some of which we outline in this

section. A critical issue is the choice of economic phenotypes to study. Proximal behavioral phenotypes, such as impatience or risk-aversion, are probably more directly related to genetic propensities than more distal economic phenotypes, such as wealth accumulation or labor force participation.

Proximal phenotypes have typically been measured with personality tests. Some personality systems are purely conceptually based (e.g., the five factor model) while others are rooted in neurobiology (e.g., Cloninger's three dimensions tied to the dopamine, serotonin, and norepinephrine systems; Cloninger, 1987; Cloninger et al., 1993). Recently some personality attributes have been studied with neuroimaging (e.g., Hariri 2006).

Distal phenotypes -- for instance wealth accumulated over a lifetime – may also strongly reflect genetic influences because they represent the cumulative effect of many specific decisions, and may reflect the expression of genes over a long period of time. Given the current state of knowledge (especially the relative lack of definitive findings relating traditional personality traits to specific genetic polymorphisms; see Ebstein, 2006; Munafo et al., 2003), the wisest course is probably to measure both proximal and distal phenotypes, and to investigate how the proximal phenotypes mediate the relationship between genes and more distal phenotypes.

In the rest of this section, we focus on gene-environment interaction studies in the context of quantitative genetic designs and modern association analysis. In that setting we consider issues under three general headings: the non-independence of genes and environments; the measurement of genetic variation; and problems searching for small, complex effects.

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Correlated Genes and Environments

Genes and environments are, for various reasons, often not independent factors.

This has implications for statistical designs attempting to uncover genetic influences, environmental influences, and interactions of genes and environments.

Gene-environment interaction (GxE) can be conceptualized as the genetic control of *sensitivity* to different environments. In contrast, a correlation between genes and environment (GE correlation, rGE) can represent genetic control of *exposure* to different environments (Kendler, 1986; Plomin and Bergeman, 1991). For example, Jang et al. (2000) show that genetic influences on alcohol and drug misuse are correlated with various aspects of the family and school environment.

We might expect correlations between genes and environments to arise for a number of reasons. For example, individuals do, to some extent, implicitly select their own environments on the basis of innate, genetically-influenced characteristics.

One important form of gene-environment correlation arises due to population stratification. A stratified sample is one which contains individuals from two or more subpopulations which may differ in allele frequencies at many sites across the genome. This will induce a correlation in the sample between all allelic variants that differ in frequency between the subpopulations and any environmental factors, diseases, or other measures that also happen to differ (possibly for entirely non-genetic reasons) between the subpopulations. As such, population stratification is an important source of potential confounding in population-based genetic studies. For example, if cases and controls are

not matched for ethnic background, population stratification effects can lead to spurious association, or false-positive errors. To address concerns over possible hidden stratification effects, a series of family-based tests of association have been developed. Because related family members necessarily belong to the same population stratum, using relatives as controls automatically ensures protection against the effects of stratification (Spielman et al., 1993). Recently, a different approach—called genomic control, or structured association—has emerged, directly using DNA markers from across the genome to directly infer ancestry for individuals in the sample or to look for signs of stratification (Devlin & Roeder, 1999; Pritchard et al., 2000).

An association between an environment and an outcome may arise due to a third variable, namely common genetic inheritance (e.g., DiLalla and Gottesman 1991). For example, if a gene X is inherited, it might cause phenotypes Y and Z respectively in a parent and in a child. Researchers will observe a correlation between the parental phenotype Y and the child's phenotype Z. Researchers may mistakenly infer a causal relationship between Y and Z if they do not control for the real (unobserved) causal mechanism: gene X.

Measuring Genetic Variation

The typical "gene by environment" association study should really be called an "allele by environment" study because, very often, only a single variant within a gene is studied. In the context of standard candidate gene association studies, many researchers are realizing that failure to comprehensively measure all common variation in a gene or

region can lead to inconsistent results and makes the interpretation of negative results particularly troublesome. (If you have not adequately measured "G," then it is hard to evaluate its relationship to the phenotype.) With emerging genomic technologies, it will soon be easy to measure myriad single nucleotide polymorphisms or microsatellite markers, even if only one SNP is known to be functional.

The same issue applies to GxE analysis. The question will be how to adapt GxE methods to this new "gene-based" paradigm, in which the gene rather than the specific allele, genotype or haplotype becomes the central unit of analysis. In addition, if a researcher measures multiple genes (for example, all genes in a pathway, each with multiple markers), then new analytic approaches will be needed to simultaneously model the joint action of the pathway, as well as how the individual genes influence the phenotype or interact with the environment.

Naturally, more comprehensively measuring all common variation in a gene costs more both financially (more genotyping) and statistically (more tests are performed). How to best combine information from multiple markers in a given region is an ongoing issue in statistical genetics. One option is to simply test each variant individually and then adjust the significance levels to account for this multiple testing. Standard procedures such as the Bonferroni are typically too conservative because they assume the tests are independent. Instead, it is often better to use permutation procedures to control the family-wise error rate or to control the false discovery rate (FDR). A second option is to combine the single variants together, either in a multilocus test (such as Hotelling's T^2 or a set-based test using sum-statistics), or in a haplotype-based test. As mentioned above, this is currently a very active area of research (e.g., Brookes et al., 2006).

Unfortunately, all these approaches rely on the variation being common. Even for large samples, this means that variants with a population frequency of less than 1% are unlikely to be detected. If a gene is important for a given outcome but contains multiple, different rare variants, then many current approaches will fail.

Searching for Small Effects and Interactions

Increasingly, researchers are appreciating the central importance of large sample sizes in genetics to afford sufficient statistical power to detect small effects. For complex, multifactorial traits, many researchers expect the effects of individual variants to be as low as <1% of the total phenotypic variance for quantitative outcomes. For case/control designs, allelic odds ratios of 1.2 and lower are often considered. Such small effects require very large samples—typically thousands of individuals, if more than one variant is to be tested and proper controls for multiple testing are in place. The consequences of chronic low statistical power are sobering. If power is on average only marginally greater than the Type I error rate, then a large number of published studies may well be Type I errors. Average power around the 50% level yields a pattern of inconsistent replication. Unfortunately, a great deal of time and money has been spent on poorly designed experiments that, at best, stand little chance of doing what they are supposed to, and, at worst, are advancing Type I errors in the literature.

Although the individual effects of any one variant may be very small, it is of course a possibility that this is because they represent the marginal effect of an interaction, for example with some environmental factor. In other words, by looking only

at a single variant and essentially averaging over all other interacting environmental factors, one would only see an attenuated signal and perhaps miss the link between the gene, environment and outcome. This is one reason for explicitly considering GxE when searching for genetic variants.

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In humans, G×E has been found in monogenic diseases; in plant and animal genetics, there is strong evidence for G×E in complex phenotypes. For example, phenylketonuria is a Mendelian human disorder, but the gene only acts to produce the severe symptoms of mental retardation in the presence of dietary phenylalanine. Research in Drosophila melanogaster has found evidence for G×E in quantitative traits including bristle number, longevity and wing shape (Mackay, 2001; Clare and Luckinbill, 1985). The detection of G×E in model organisms suggests that it will play an equally important role in complex human phenotypes. Indeed, promising results are emerging (e.g., Caspi et al., 2002, 2003; Mucci et al., 2001; MacDonald et al., 2002; Dick et al., 2006). However, human studies suffer from a crucial methodological difference: the inability to inexpensively experimentally manipulate genes and environments. Epidemiological designs will therefore tend to be less powerful, as well as prone to confounding. Despite these greater challenges, consideration of G×E in human molecular genetic studies potentially offers a number of rewards, including increased power to map genes, to identify high-risk individuals, and to elucidate biological pathways.

Many commentators have noted the general difficulties faced in uncovering interactions of any kind (e.g., Clayton and McKeigue, 2001; Cooper, 2003). Indeed, general epidemiology has struggled for decades to adequately define and test interaction.

The central problem, as stated by Fisher and Mackenzie in 1923 when first describing the
factorial design and analysis of variance (ANOVA), is that, in statistical terms,
"interaction" is simply whatever is left over after the main effects are removed. It
follows that the presence or absence of interaction can depend on how the main effects
are defined. For dichotomous phenotypes, the presence of a measured interaction effect
will depend on the modeling assumption that is used in the empirical analysis (see
Campbell et al., 2005, for another example). For example, if the risk genotype G+ has
(likelihood ratio) effect g and the risk environment E+ has (likelihood ratio) effect e , the
question is how to specify the joint effect in the absence of an interaction. Assuming an
additive model implies that the joint effect (without an interaction effect) is $g+e-1$
whereas a multiplicative model implies that the joint effect (without an interaction effect)
is ge. Hence, the absence of an interaction effect in the additive model generically implies
the existence of an interaction effect in the multiplicative model (and vice versa).
Mathematically, as long as neither g nor e is equal to one, then, $g + e - 1 \neq ge$.
Analogously, for quantitative phenotypes, transformation of scale can induce or
remove interaction effects. To see this, imagine a G×E study of amygdala morphology
(i.e., measures of the anatomical size of the amygdala based on magnetic resonance
images). For illustrative purposes, assume that the amygdala is a sphere with radius
given by an additive sum of a gene effect 1mm and an environment effect also
1mm. Assume too that the radius exhibits no gene-environment interaction.
[INSERT FIGURE 1 HERE.]

FIGURE 1 Measurement of $G \times E$ depends on the modality of measurement

277	Radius (mm)		Е-	E+
278		G-	1	2
279		G+	2	3
280				
281	Area/ π (mm ²)		E-	E+
282		G-	1	4
283		G+	4	9
284				
285				
286	Volume $\cdot 3/(4\pi)$ (mm ³)		E-	E+
287		~	- 1	0
40/		G-	1	8
288		G- G+	8	8 27
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If the measured phenotype were cross-sectional area (a function of radius squared), however, gene and environment are no longer additive in their effects. There is now G×E, as G+ increases area by 3 units under E- and 5 units under E+. If the phenotype were based on volume, the apparent measurement of G×E is stronger. However, these interaction effects are purely "statistical" and not "biological": that is, G and E do not interact on any causal level. The interactions are effectively a consequence of misspecifying the main effects model (see Figure 1).

Consider now that a "downstream" phenotype is measured, such as some aspect of the serotonergic system that is influenced by the amygdala. There can be no guarantee that the effects of G and E should necessarily display an additive relationship at this level, considering the various neurochemical cascades and reciprocal feedback loops that are presumably involved in a system as complex as the human brain. Or the measured phenotype may be even further downstream—a clinical diagnosis based on behavioral symptoms, or a 25-item self-report questionnaire measure, log-transformed to

approximate normality. Finding G×E at these levels may well be strikingly irrelevant with respect to the presence of interaction at the causal level.

The point of this example is not to claim that the only appropriate causal level is the neurological one. Rather, for complex phenotypes, the level at which genes and environment operate (which need not be the same level) might often be quite distal compared to the level of measured phenotype. Consequently, the distinction between statistical and biological interaction always should be borne in mind. Purely statistical interactions are still useful if one's only goal is prediction, e.g., early diagnosis or identification of high risk individuals. But to help understand mechanisms and pathways, an interaction detected by statistical methods must have some causal, biological or behavioral counterpart to be of significant interest.

False negatives are also a major concern in the study of $G \times E$. Tests of interaction generally suffer from relatively low power (Wahlsten, 1990). In this case, it is not clear that efforts to detect genes will benefit from more complex models that allow for potential $G \times E$ effects, even if $G \times E$ effects are large.

Nature is undoubtedly complex. How complex our statistical models need to be is less clear. Combining the definitional problems of interaction with the low power to detect G×E with the new avenues for multiple-testing abuses brought about by extra E variables, attempting to incorporate G×E could make an already difficult endeavor near impossible (Cooper, 2003). However, we see these obstacles as important but not insurmountable: with proper experimental design and better-developed statistical tools, GxE will be able to be robustly detected, with relevance to biology, public health, and eventually economics.

Although larger datasets—more individuals, more phenotypic measures, more genetic variants assayed—are desirable for many reasons (some of which have already been mentioned), they also pose a further methodological challenge for detecting GxE. A new wave of whole genome scale studies has already begun, in which as many as half a million single nucleotide polymorphisms (SNPs) are assayed. Issues of multiple testing and statistical power are already paramount in such studies. Efforts to detect G×E magnify these concerns.

III. THE AGES-REYKJAVIK STUDY COLLABORATION

Currently, the main obstacle to bringing genetic research into economics is the fact that few datasets combine economic measures with biosamples that can be genotyped. An exception is the Age, Gene/Environment Susceptibility-Reykjavik Study. In this section, we describe a project where we have begun using these data to explore associations between genes that are candidates for involvement in decision-making and economic phenotypes, and how these relationships are mediated by the environment. We believe our project illustrates one possible direction for research in economic genomics, as well as some of the benefits of multidisciplinary collaboration—including team members with training in economics, cognitive science, epidemiology, medicine, genetics, and statistics.

Administered by the Icelandic Heart Association, the original Reykjavik Study (RS) surveyed 30,795 men and women born between 1907 and 1935 who lived in Reykjavik as of 1967. While the majority of participants were surveyed once between

1967 and 1991, about 5,700 were surveyed twice and about 6,000 were surveyed six times over this period. The Older Persons Exam, which contained many components of the RS questionnaire as well as additional health measures, was administered between 1991 and 1997 to all living participants aged 70 and older as of 1991. The Laboratory of Epidemiology, Demography, and Biometry initiated the Age, Gene/Environment Susceptibility (AGES) Study in 2002 in collaboration with the Icelandic Heart Association to collect genotypic as well as additional phenotypic data from 5764 of the 11,549 surviving participants. Currently, 2,300 participants have been genotyped. Hereafter, we refer to the combined dataset as the "Icelandic data." For more detailed information about the Icelandic data, see Harris et al. (2007).

Although primarily used to study health, the Icelandic data already contain a number of measures of economic interest, summarized in Table 1. Distal economic phenotypes we plan to study include labor supply and wealth accumulation. For example, Figure 1 shows the percentage of respondents who have a second job. Figure 2 shows the distribution of working hours in the sample. Notice that there is a substantial amount of variation in these phenotypes. The RS questionnaire asks about attributes of participants' house or apartment, from which it is possible to construct a proxy measure of housing wealth. We are currently investigating the feasibility of collecting more extensive measures of wealth and income.

In addition to these distal phenotypes, we plan to study proximal phenotypes—such as impulsiveness, risk-aversion, and cognitive ability—that may be more closely related to underlying genetic propensities. A measure of general cognitive ability can be constructed from existing data on long-term memory, speed of processing, and working

memory. Various questionnaires ask about health-related decisions, such as smoking, drinking, eating habits, and conscientious health behaviors (e.g., getting regular checkups). Each of these decisions reflects a tradeoff between the present and the future, and economic theory postulates that some individuals are more impulsive, or "impatient" in economics jargon. From these decisions, we will construct an index of impulsive behaviors.

We also plan to add standard experimental measures of impulsive and risk-averse preferences to the next wave of the AGES-Reykjavik study. These protocols ask participants to choose between immediate vs delayed monetary rewards or to choose between certain vs risky monetary rewards. These choices are played out with real monetary stakes. Such measures correlate with real-world impulsive and risky decisions across a range of contexts (e.g., for discounting: Fuchs, 1982; Bickel, Odum, and Madden, 1999; Petry and Casarella, 1999; Kirby, Petry, and Bickel, 1999; Kirby and Petry, 2004; Ashraf, Karlan, and Yin, 2004; Shapiro, 2005; for risk-aversion: Barsky et al., 1997; Dohmen et al., 2005; Kimball, Sahm, and Shapiro, 2006). These experimental measures yield similar distributions of responses whether they are administered to neurologically-healthy older adults or to college-age subjects (Kovalchik et al., 2003).

Existing research in economics implies that distal phenotypes, such as labor supply and wealth accumulation, will be related to proximal phenotypes that matter for decision-making such as impulsiveness, risk aversion, and cognitive ability (Barsky et al., 1997; Dohmen et al., 2005; Benjamin et al., 2006). These proximal phenotypes are more likely to be directly associated with underlying genetic propensities and to mediate the relationship between genetic polymorphisms and the distal phenotypes.

Three key empirical findings have motivated our choice of candidate genes for decision-making:

1. Research in the new field of neuroeconomics (Glimcher and Rustichini, 2004; Glimcher et al., 2005) has begun to explore the neuroscientific foundations of economic behavior. McClure et al (2004) find that impulsive behavior, when measured with laboratory tasks, appears to be governed by the interaction between the brain's impatient "limbic system" (more accurately, mesolimbic dopaminergic reward-related regions) and a patient "cortical system" that includes elements of the prefrontal cortex and the parietal cortex. McClure et al. (2004) show that the limbic system is only active when individuals are confronted with choices between immediate and future rewards. By contrast, the cortical system is active for all decisions (whether or not immediate rewards are among the choices), and its activity increases on trials when subjects choose more delayed rewards.

2. Individual differences in the tendency to make impulsive, present-oriented decisions are associated with cognitive ability: high-ability individuals are less impulsive and more risk-neutral across a variety of decision-making domains, in both laboratory situations and real-world measures (Benjamin et al., 2006; see also Frederick, 2005), including financial choices, health behaviors, capital

² There is also a related, older literature that explores the relationship between personality and neuropharmacological interventions – for instance see Nelson and Cloninger (1997).

accumulation, and the like. Critically, this holds true even when controls for income are included.

3. Differences in cognitive ability, in turn, are mediated predominantly by structural and functional differences in prefrontal and parietal brain regions — the same network of cortical regions that functions to counter the impulsive tendencies of the limbic/reward system (Gray, Chabris, and Braver, 2003; Chabris, in press). General intelligence is also positively related to total brain volume (for a meta-analysis, see McDaniel, 2005).

These results lead us to the working hypothesis that prefrontal/parietal and limbic networks are the neural substrates of the psychological constructs of impulsiveness and cognitive ability (that are in turn related to economic decision-making). We therefore hypothesize that genes implicated in these traits and brain systems may be associated with economic behavior and outcomes in the Icelandic data. We have developed a list of these genes and their known or likely functional SNPs. Table 2 lists these genes. A SNP panel will be created for use with Illumina technology to rapidly genotype all 2300 subjects who have provided DNA in the Icelandic data. These SNPs will include both functional alleles and SNPs to tag haplotypes of the genes, based on the HapMap.

To select genes for this SNP panel, we focused on specific phenotypes and biological pathways of relevance to the model sketched above. First, we selected genes in two critical neurotransmission pathways, the serotonin and dopamine systems, because both of these pathways have been associated with impulsive behavior. (It is true that

these systems are not <i>exclusively</i> involved in impulsiveness, or decision-making in
general — all genetic or neurobiological systems, including the putative "language gene"
FOXP2, are involved in multiple cognitive and behavioral domains — but these provide a
useful starting points given the current state of knowledge about the neurobiology of
decision-making.) Serotonin function has been associated with several aspects of
impulsivity, including reward sensitivity and inhibitory cognitive control (e.g., Cools et
al., 2005; Walderhaug et al., 2002), as well as prefrontal cortex activity (Rubia et al.,
2005), while several dopamine-related genes have been associated with attention-deficit
hyperactivity disorder (ADHD; see Faraone et al., 2005 for a meta-analysis of association
studies) and with limbic/reward system functioning. Second, we selected genes that have
been associated or implicated in phenotypes related to cognitive ability: general
intelligence (i.e., IQ; Plomin, 1999; Plomin et al., in press); memory (e.g., de Quervain
and Papassotiropoulos, 2006); schizophrenia, which involves neurocognitive dysfunction
(Hallmayer et al., 2005); Alzheimer's Disease; and brain size, which is positively related
to general cognitive ability (for a meta-analysis, see McDaniel, 2005; for candidate
genes, see Gilbert et al., 2005; Woods et al., 2005). Finally, we added several genes
associated with specific cognitive abilities such as memory and attention, or that are
linked to cognition via other mechanisms (Goldberg & Weinberger, 2004). Naturally,
there is overlap among these categories; for example, COMT (catechol-O-
methyltransferase) is part of the dopamine pathway, and it also has a common SNP that is
associated with measures of executive function and frontal lobe activation (Egan et al.,
2001); HTR2A (serotonin receptor 2A) is a serotonin receptor gene that has been
associated with long-term memory ability (de Quervain et al., 2003); and while HTT

(serotonin transporter) is a part of the serotonin system, it has also been associated with ADHD and cognitive ability. Table 2 is therefore not meant to be an exhaustive or final list of possible candidate genes for economic behavior, but rather our estimate of the best starting points for study, given the literature published through the end of 2006.

In addition to the considerable behavioral and medical phenotypes, the Icelandic data includes several measures of cognitive ability: speed of processing, working memory, and long-term memory, as well as educational achievement, the mini-mental state exam, and a clinical dementia evaluation. An index of general cognitive ability (*g*) can be inferred from a principal components analysis of the individual cognitive tests; indeed, working memory and processing speed are prominent components of *g* (Chabris, 2007). Each subject in the AGES follow-up also received structural magnetic resonance imaging (MRI) of the brain with evaluations of atrophy, infarcts, white matter lesions, and high-resolution T1-weighted images for voxel-based morphometric analysis.

We plan to examine direct associations between the genes in our SNP panel and the distal economic outcomes measured in the Icelandic data – for instance, labor force participation and housing wealth. We will also investigate whether these associations are mediated by proximal variables like cognitive ability, brain morphology, and impatience.

To implement these analyses, we will construct composite phenotypic measures. Such composites will reduce measurement error, increase power, and reduce the number of statistical tests. Moreover, rather than simply testing each SNP genotype individually, we will construct composite "SNP sets" that index the "load" of sets of SNPs that individually may have small effects but collectively explain more variance in an outcome measure (for examples of this methodology, see Harlaar et al., 2005, for general cognitive

ability; de Quervain and Papassotiropoulos, 2006, for memory; and Comings et al., 2002, for pathological gambling behavior).

IV. CONCLUSIONS

This essay reviews our hopes and concerns about the joint study of genetic variation and variation in economic phenotypes. The new field of genoeconomics will study the ways in which genetic variation interacts with social institutions and individual behavior to jointly influence economic outcomes.

Genetic research and economic research will have three major points of contact.

First, economics can contribute a theoretical and empirical framework for understanding how individual behavior and economic markets mediate the influence of genetic factors.

Second, incorporating (exogenous) genetic variation into empirical analysis can help economists identify and measure causal pathways and mechanisms that produce individual differences. Finally, economics can aid in analyzing the policy issues raised by the existence of genetic knowledge and its potential societal diffusion.

Despite the promise of genoeconomics, there are numerous pitfalls. Ethical issues crop up at every juncture, both during the research process and once the research results are disseminated. The problems are even greater when genetic research is done carelessly or reported misleadingly. Historically, there have been many cases of false positives in which preliminary genetic claims have subsequently collapsed as a result of unsuccessful replications. Communication about research results must also highlight the fact that genes alone do not determine outcomes. A highly complex set of gene effects,

environment effects, and gene-environment interactions jointly cause phenotypic variation.

The way forward requires statistical care, attention to how the environment mediates genes, and sensitivity to the ethical issues surrounding genetic knowledge. We believe that there is potential for productive collaboration between economists, cognitive scientists, epidemiologists, and genetic researchers. Indeed, we end the paper by summarizing a study that is currently underway, which uses a SNP panel to analyze associations between candidate cognitive genes and economic phenotypes.

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977 Figure Captions

- 978 FIGURE 1: Percentage of respondents in the Icelandic data who have a second job, by
- 979 gender and age. Source: Author's calculations.
- 980 FIGURE 2: Distribution of working hours in the Icelandic data, by gender and age.
- 981 Source: Author's calculations.

Measured phenotypes	Reykjavik Study 1967–1991	Older Persons Exam 1991–1996	AGES- Reykjavik 2002–2006
Distal economic phenotypes			
Number of jobs and hours worked (labor supply)	X	X	
Attributes of house/apartment (housing wealth)	X	X	
Occupational history (human capital accumulation)	X	X	X
Years of education (human capital accumulation)	X	X	X
Social networks (social capital accumulation)		X	X
Proximal decision-making phenotypes			
Smoking frequency (impulsivity)	X	X	X
Drinking frequency (impulsivity)		X	X
Exercise frequency (impulsivity)	X	X	X
Eating habits (impulsivity)		X	X
Health conscientiousness (impulsivity)	X	X	
Long-term memory (general cognitive ability)			X
Speed of processing (general cognitive ability)		X	X
Working memory (general cognitive ability)			X
MRI of the brain (general cognitive ability)			X

NOTES: This table displays phenotypic data already collected. For the next wave of the AGES-Reykjavik study, we plan to add additional distal phenotypes (wealth and income) and proximal phenotypes (experimental measures of impulsivity and risk-aversion). The cognitive SNP panel will be administered to participants in the AGES-Reykjavik study. In addition to the AGES-Reykjavik questionnaire, participants in the AGES-Reykjavik study have answered the Reykjavik study questionnaire once, twice, or six times during 1967–1991. The Older Persons Exam was administered to those aged 70 and older as of 1991.

TABLE 2. Genes that are candidates for inclusion in a panel of SNPs for association studies with cognitive, neural, and economic phenotypes, with notes on possible mechanisms mediating genetic influences on these phenotypes (or other reasons for including the gene). Both known or suspected functional SNPs in these genes, as well as tagging SNPs from the HapMap, would be used. Names and genomic positions are taken from OMIM or the UCSC Genome Browser. Genes marked with an asterisk (*) have known or probable functional alleles that are *not* SNPs. Citations given for each gene are meant to be representative of the suggestive evidence in the literature (through 2006), not exhaustive lists of relevant publications on the gene.

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1001 1002

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1042

1043 1044 DAT1*

COMT

MAOA*

MAOB

5p15.3

22q11.2

Xp11.23

Xp11.23

1003	Gene	Position	Description and references		
1004					
1005	Dopamine (DA) System				
1006					
1007	TH	11p15.5	Tyrosine hydroxylase		
1008					
1009	DDC	7p12.2	Dopa decarboxylase		
1010		_			
1011	VMAT1	8p21.3	Vesicular monoamine transporter 1		
1012		•	1		
1013	VMAT2	10q25.3	Vesicular monoamine transporter 2		
1014		•	1		
1015	DRD1	5q35.1	Dopamine receptor 1		
1016		1	ADHD (Bobb et al., 2005)		
1017					
1018	DRD2	11q23	Dopamine receptor 2		
1019		1	Neural activation during working memory (Jacobsen et al., 2006)		
1020			DRD2 binding in striatum (Hirvonen et al., 2004)		
1021			· · · · · · · · · · · · · · · · · · ·		
1022	DRD3	3q13.3	Dopamine receptor 3		
1023		1	·r····································		
1024	DRD4*	11p15.5	Dopamine receptor 4		
1025		r	ADHD (Faraone et al., 2005)		
1026			(,,)		
1027	DRD5	4p16.1	Dopamine receptor 5		
1028	Diago	.р.т	ADHD (Faraone et al., 2005)		
1029			(
1030	CALCYON	10q26.3	Calcyon (DRD1 interacting protein)		
1031	211201011	4	ADHD (Laurin et al., 2005)		
1031					

Dopamine transporter

Monoamine oxidase A

Monoamine oxidase B

2006)

ADHD (Faraone et al., 2005)

Catechol-o-methyltransferase

interaction (Caspi et al., 2002)

Frontal lobe, executive function (Egan et al., 2001; Meyer-Lindberg et al.,

NEO personality traits (Rosenberg et al., 2006); aggression GxE

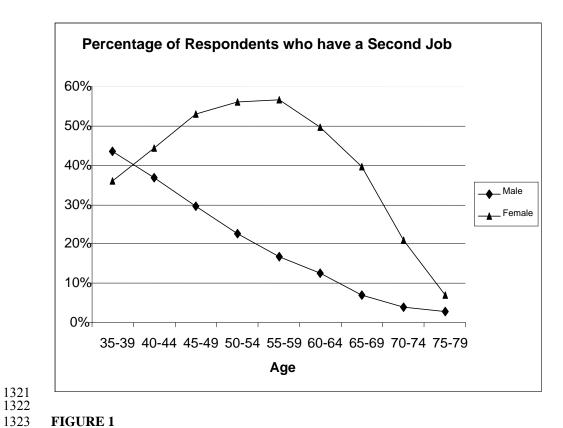
1045	DDII	0-242	Denomina hata badanandan
1046	DBH	9q34.2	Dopamine beta hydroxylase
1047			ADHD (Faraone et al., 2005)
1048			
1049	~	Term of	
1050	Serotonin (5-H	II) System	
1051			
1052	TPH1	11p15.3	Tryptophan hydroxylase 1
1053			
1054	TPH2	12q21.1	Tryptophan hydroxylase 2
1055			
1056	HTR1A		Serotonin receptor 1A
1057			
1058	HTR1B	6q14.1	Serotonin receptor 1B
1059			ADHD (Faraone et al., 2005)
1060			
1061	HTR2A	13q14.2	Serotonin receptor 2A
1062		1	Explicit memory (de Quervain et al., 2003; Papassotiropoulos et al.,
1063			2005; Reynolds et al., 2006)
1064			,,,
1065	HTR3A	11q23.1	Serotonin receptor 3A
1066	1111071	11923.1	Amygdala & frontal lobe function (Iidaka et al., 2005)
1067			Amygdala & Holital look function (Hdaka et al., 2003)
1068	HTT*	17q11.1	Serotonin transporter
1069	1111	1/411.1	
1070			Amygdala function (Hariri et al., 2003)
			ADHD (Faraone et al., 2005)
1071			Cognitive aging (Payton et al., 2005)
1072			Under selection in CEU and ASN populations (Voight et al., 2006)
1073			
1074			
1075			d with General Cognitive Ability
1076	(reviewed by l	Payton, 2006; Plor	min et al., in press)
1077			
1078	CBS	21q22.3	Cystathionine beta-synthase
1079			IQ (Barbaux et al., 2000)
1080			
1081	CCKAR	4p15.2	Cholecystokinin A receptor
1082			IQ (Shimokata et al., 2005)
1083			
1084	CHRM2	7q33	Muscarinic cholinergic receptor 2
1085		•	IQ (Comings et al., 2003; Gosso et al., 2006)
1086			Performance IQ (Dick, Aliev, Kramer et al., 2006)
1087			
1088	CTSD	11p15.5	Cathepsin D
1089	CIBB	11915.5	Mental retardation & microcephaly caused by mutation (Siintola et al.,
1090			2006)
1091			IQ (Payton et al., 2003, 2006)
			IQ (Payton et al., 2005, 2006)
1092	ICEAD	6.25.2	
1093	IGF2R	6q25.3	Insulin-like growth factor 2 receptor
1094			IQ (Chorney et al., 1998; Jirtle, 2005)
1095			
1096	KLOTHO	13q13.1	Klotho
1097			IQ (Deary et al., 2005b)
1098			
1099	MSX1	4p16.2	Muscle segment homeobox, drosophila, homolog of, 1
1100		-	IQ (Fisher et al., 1999)

1101			
1101 1102 1103 1104	NCSTN	1q23.2	Nicastrin IQ (Deary et al., 2005a) AD (Bertram et al., 2007)
1105 1106 1107	PLXNB3	Xq28	Plexin B3 Vocabulary, white matter (Rujescu et al., 2006)
1108 1109 1110 1111 1112 1113	PRNP	20p13	Prion protein IQ (Rujescu et al., 2003; Kachiwala et al., 2005) Brain structure (Rujescu et al., 2002) Long-term memory (Papassotiropoulos et al., 2005b) AD (Bertram et al., 2007)
1114 1115 1116 1117	RECQL2	8p12	RECQ protein-like 2 Cognitive composite in LSADT (Bendixen et al., 2004)
1118 1119 1120 1121 1122	SSADH	6p22.2	Succinate semi-aldehyde dehydrogenase IQ (Plomin et al., 2004) IQ linkage peak on chr6 is near this gene (Posthuma et al., 2005) Recent positive selection (Blasi et al., 2006)
1123 1124 1125 1126			Peaks in Studies of IQ et al., 2006; Hallmayer et al., 2005; Dick, Aliev, Beirut et al., 2006)
1127 1128	NR4A2	2q24.1	Nuclear receptor subfamily 4, group A, member 2
1129 1130	SLC25A12	2q31.1	Solute carrier family 25, member 12
1130 1131 1132	SCN1A	2q24.3	Sodium channel, neuronal type 1, alpha subunit
1133	SCN2A	2q24.3	Sodium channel, neuronal type 2, alpha subunit
1134 1135	TBR1	2q24.2	T-box, brain, 1
1136 1137	SCN3A	2q24.3	Sodium channel, neuronal type 3, alpha subunit
1138 1139	KCNH7	2q24.2	Potassium channel, voltage-gated, subfamily H, member 7
1140 1141	GAD1	2q31.1	Gluatamate decarboxylase 1
1142 1143	HOXD1	2q31.1	Homeobox D1
1144 1145	CHN1	2q31.1	Chimerin 1
1146 1147	RAPGEF4	2q31.1	RAP guanine nucleotide exchange factor
1148 1149	NOSTRIN	2q24.3	Nitric oxide synthase trafficker
1150 1151	BBS5	2q31.1	BBS5 gene
1152 1153	DLX1	2q31.1	Distal-less homeobox 1
1154 1155 1156	DLX2	2q31.1	Distal-less homeobox 2

1157 1158	KIF13A	6p22.3	Kinesin family member 13A
1159 1160	NQO2	6p25.2	NAD(P)H dehydrogenase, quinone 2
1161	RANBP9	6p23	RAN-binding protein 9
1162 1163	PNR	6q23.2	Trace amine-associated receptor 5 ("putative neurotransmitter receptor")
1164 1165	NRN1	6p25.1	Neuritin 1
1166 1167 1168	S100B	21q22.3	S100 calcium-binding protein, beta
1169 1170 1171	Genes Associ	ated with Memory	Ability
1172 1173	de Quervain &	& Papassotiropoul	os, 2006
1174 1175	ADCY8	8q24.2	Adenylate cyclase 8
1176 1177	CAMK2G	10q22	Calcium/calmodulin-dependent protein kinase 2 gamma
1178	GRIN2A	16p13	Ionotropic glutamate receptor, NMDA subunit 2A
1179 1180	GRIN2B	12p12	Ionotropic glutamate receptor, NMDA subunit 2B
1181 1182 1183	GRM3	7q21.1	Metabotropic glutamate receptor 3 Frontal & hippocampal function (Egan et al., 2004)
1184 1185	PRKCA	17q22-23.2	Protein kinase C, alpha
1186 1187	PRKACG	9q13	Protein kinase, cAMP-dependent, catalytic, gamma
1188 1189 1190	Papassotiropo	oulos et al., 2006	
1191	KIBRA	5q35.1	Kidney and brain expressed protein
1192 1193 1194	CLSTN2	3q23	Calsyntenin 2
1194 1195 1196	Kravitz et al.,	2006	
1197 1198	ESR1	6q25.1	Estrogen receptor 1 AD (Bertram et al., 2007)
1199 1200 1201	HSD17B1	17q21.31	Hydroxysteroid (17-beta) dehydrogenase 1
1202 1203	Canas Assasi	ntod suith Cohi-on	lenguis (C7)
1204	Genes Associated with Schizophrenia (SZ) (reviewed by Norton et al., 2006; Owen et al., 2005)		
1205 1206	AKT1	14q32.3	V-AKT murine thymoma viral oncogene homolog 1
1207 1208	DAOA	13q34	D-amino acid oxidase activator
1209 1210 1211 1212	DISC1	1q42.1	Disrupted in schizophrenia 1 Hippocampal structure and function (Callicott et al., 2005) Cognitive aging in women (Thomson et al., 2005)

1213 1214 1215			Cognitive performance in SZ (Burdick et al., 2005; reviewed by Porteous et al., 2006)	
1216 1217 1218 1219 1220 1221	DTNBP1	6p22.3	Dystrobrevin-binding protein 1 g in SZ & controls (Burdick et al., 2006) IQ (Posthuma et al., 2005): linkage peak on chr6 contains this gene PFC function (Fallgatter et al., 2006) Under selection in Europeans (Voight et al., 2006)	
1222 1223 1224	NRG1	8p22	Neuregulin 1 Premorbid IQ in high-risk SZ subjects (Hall et al., 2006)	
1225 1226 1227	RGS4	1q23.3	Regulator of G-protein signaling 4 Talkowski et al. (2006)	
1228	~ .			
1229 1230 1231		ated with Alzheim Bertram et al., 200	er's Disease (AD) 7; Bertram & Tanzi, 2004)	
1232	ACE	17q23	Angiotensin I-converting enzyme	
1233 1234 1235 1236	APOE	19q13.2	Apolipoprotein E Risk factor for AD, general cognitive function (Small et al., 2004)	
1236 1237 1238 1239 1240	BACE1	11q23.3	Beta-site amyloid beta A4 precursor protein-cleaving enzyme 1 Interacts w/ APOE (Bertram & Tanzi, 2004) Modulates myelination in mice (Hu et al., 2006)	
1240 1241 1242	CHRNB2	1q21	Cholinergic receptor, neural nicotinic, beta polypeptide 2	
1242 1243 1244	CST3	20p11.2	Cystatin 3	
1245 1246	GAPDHS	19q13.1	Clyceraldehyde-3 phosphate dehydrogenase, spermatogenic	
1247 1248 1249	IDE	10q23.33	Insulin-degrading enzyme 2 Interacts w/ APOE (Bertram & Tanzi, 2004)	
1250 1251	MTHFR	1p36.3	Methylenetetrahydrofolate reductase	
1251 1252 1253	PSEN1	14q24.3	Presenilin 1	
1254 1255	TF	3q21	Transferrin	
1255 1256 1257	TFAM	10q21	Transcription factor A, mitochondrial	
1258 1259	TNF	6p21.3	Tumor necrosis factor	
1260 1261 1262 1263	Genes Associated with Brain/Head Size (except for VDR, all have mutations causing microcephaly)			
1264 1265 1266 1267 1268	ASPM	1q31.3	Abnormal spindle-like, microcephaly-associated Under selection in humans (Mekel-Bobrov et al., 2005) Small effect on IQ subtests (Luciano et al., 2006) No significant effect on normal-range brain size (Woods et al., 2006)	

1269 1270 1271 1272 1273 1274 1275 1276 1277 1278 1279 1280 1281 1282 1283 1284	CDK5RAP2	9q33.2	CDK5 regulatory subunit associated protein 2 Brain size (Woods et al., 2005; Evans et al., 2006) Reverse association w/ verbal IQ (Luciano et al., 2006)			
	CENPJ	13q12.12	Centromeric protein J Brain size; under selection in CEU sample (Voight et al., 2006; cf. Evans et al., 2006)			
	МСРН1	8p23.1	Microcephalin Under selection in humans (Evans et al., 2005) No significant effects on IQ subtests (Luciano et al., 2006), normal-range brain size (Woods et al., 2006)			
	VDR	12q13.11	Vitaimin D receptor Head size (Handoko et al., 2006), not associated with schizophrenia			
1285 1286	Genes Associa	Genes Associated with Miscellaneous Brain and Cognitive Functions				
1287 1288 1289 1290 1291 1292	BDNF	11p14.1	Brain-derived neurotrophic factor Memory, hippocampus (Egan et al., 2003; Dempster et al., 2005) Age-related cognitive decline (Harris et al., 2006) Not associated with working memory performance (Hansell et al., 2006)			
1293 1294 1295	CHRNA4	20q13.2	Neuronal nicotinic cholinergic receptor alpha polypeptide 4 Attentional function (Greenwood et al., 2005; Parasuraman et al., 2005)			
1296 1297 1298	CHRNA7	15q13.3	Neuronal nicotinic cholinergic receptor alpha polypeptide 7 Schizophrenia and auditory processing (Leonard et al., 2002)			
1299 1300 1301 1302 1303 1304 1305 1306 1307 1308 1309 1310 1311 1312 1313 1314 1315 1316	NET1	16q12.2	Norepinephrine transporter ADHD (Bobb et al., 2005)			
	OXTR	3p26.2	Oxytocin receptor Trust; autism (Wu et al., 2005; Ylisaukko-Oja et al., 2005)			
	PAX6	11p13	Paired box gene 6 Development of executive function networks (Ellison-Wright et al., 2004)			
	SNAP25	20p12.2	Synaptosomal-associated protein, 25-KD ADHD (Faraone et al., 2005) Performance IQ (Gosso et al., 2006)			
	FADS2	11q12-q13	Fatty-acid desaturase 2 ADHD (Brookes et al., 2006)			
	NOS1	12q24	Neuronal nitric oxide synthase PFC function, schizophrenia (Reif et al., 2006)			
1317 1318 1319 1320	СЕТР	16q21	Cholesterol ester transfer protein Better MMSE performance in centenarians (Barzilai et al., 2006)			



1321 1322

FIGURE 1

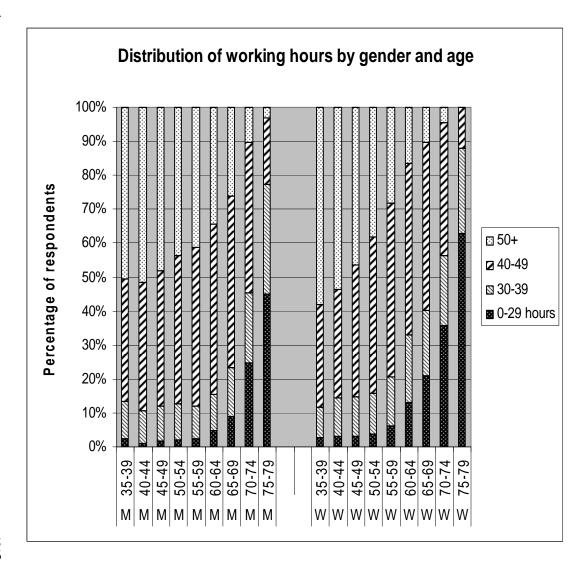


FIGURE 2