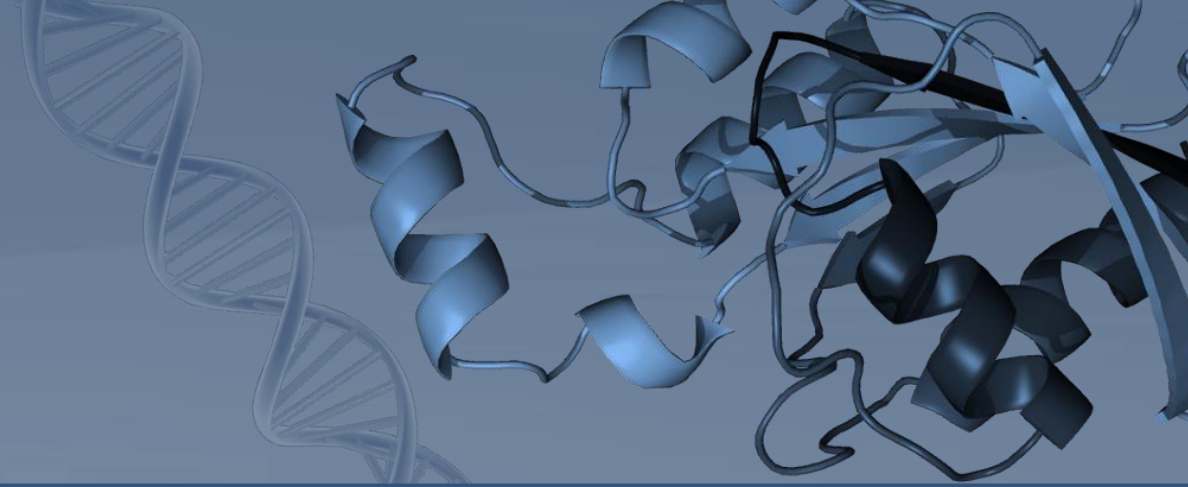




OFFICE OF CANCER CLINICAL
PROTEOMICS RESEARCH



Proteogenomic analysis of Glioblastoma

Liang-Bo Wang

Ding Lab

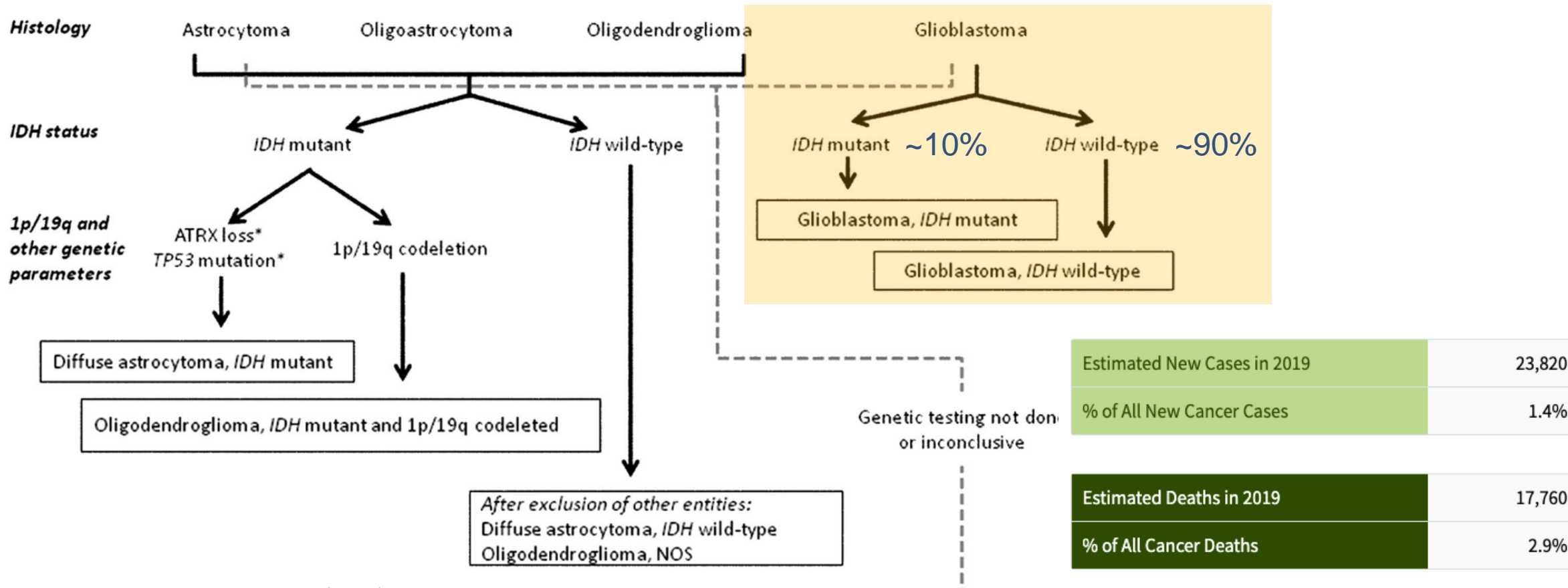
Washington University in St. Louis

Runyu Hong

Fenyo Lab

NYU School of Medicine

Glioblastoma is a rare disease with no personalized treatment



Louis, D.N. et al. Acta Neuropathol (2016)

<https://www.cancer.gov/types/brain>

- Poor prognosis: median overall survival: 14–17 month; 5-year survival rate ~10%
- Existing subtypes within IDH WT tumors has yet benefited the GBM treatment

Goals of GBM proteogenomic characterization

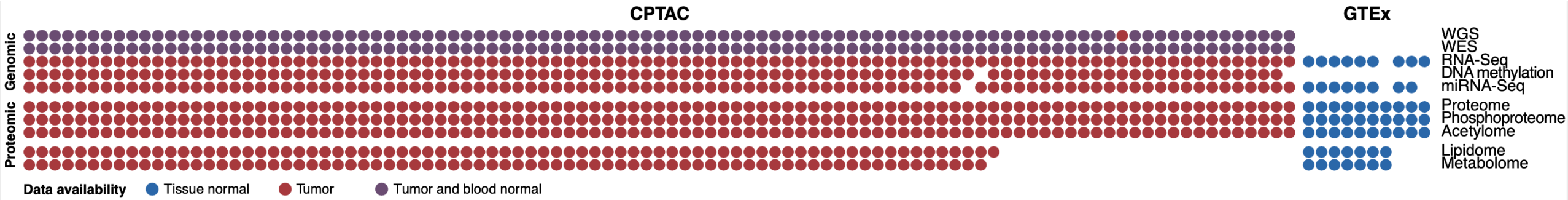
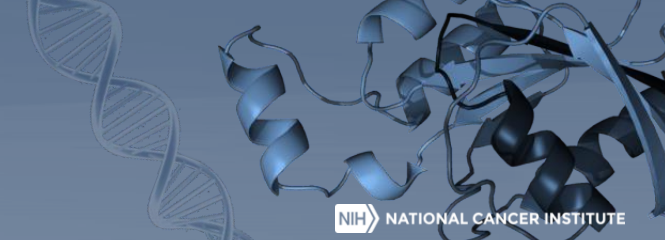


Comprehensive characterization of GBM tumors

Discover clinically beneficial patient stratifications

Identify novel markers to be potential therapeutic targets

Data overview of 99 GBM tumors



(manuscript in revision)

Prospective collection of treatment naïve GBM tumors (n = 99)

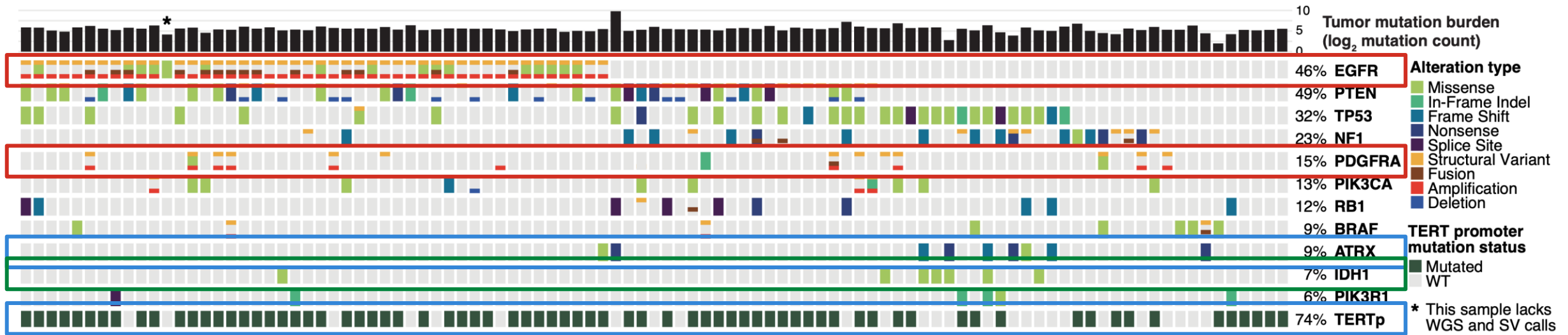
Normal frontal cortex samples from GTEx project (n = 10)

10 different data types on the same cryopulverized segment:

- Available in TCGA: WGS, WXS, RNA-Seq, DNA methylation array, and miRNA-Seq
- 5 novel mass spectrometry assays: proteome, phosphoproteome, acetylome, lipidome, and metabolome

Data type	# features
Proteome	11,141
Phosphoproteome	101,266 (86,554 unique sites)
Acetylome	18,767
Metabolome	134
Lipidome	581

Mutational landscape



Top 12 significantly mutated genes: mutations, structural variants (SV), fusions, and CNV

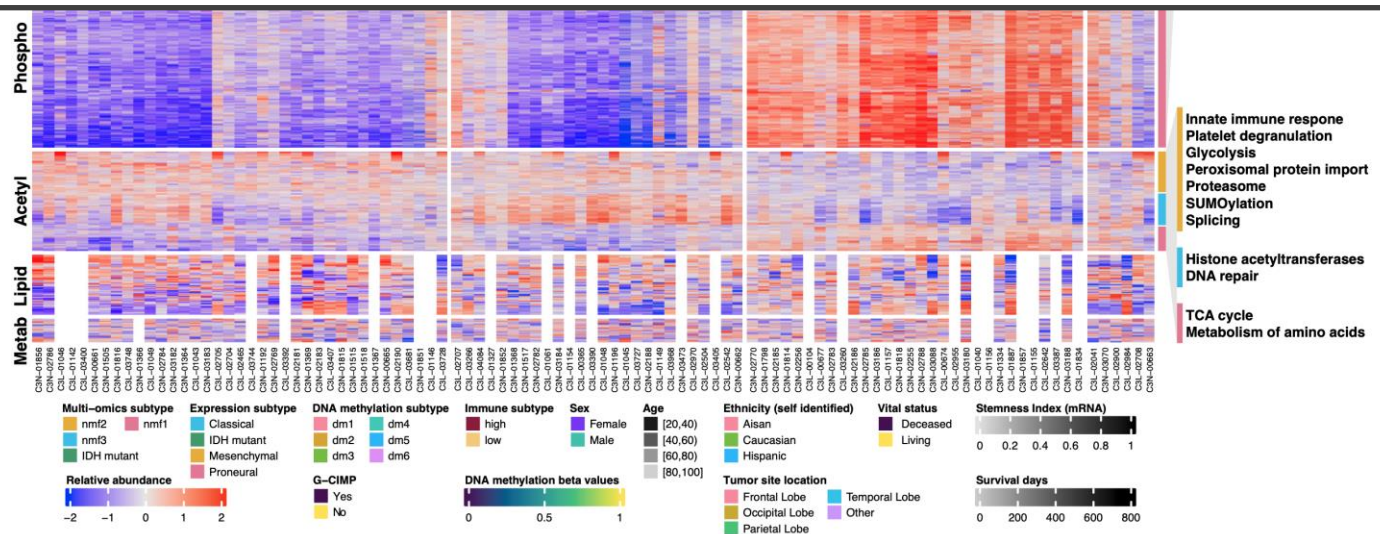
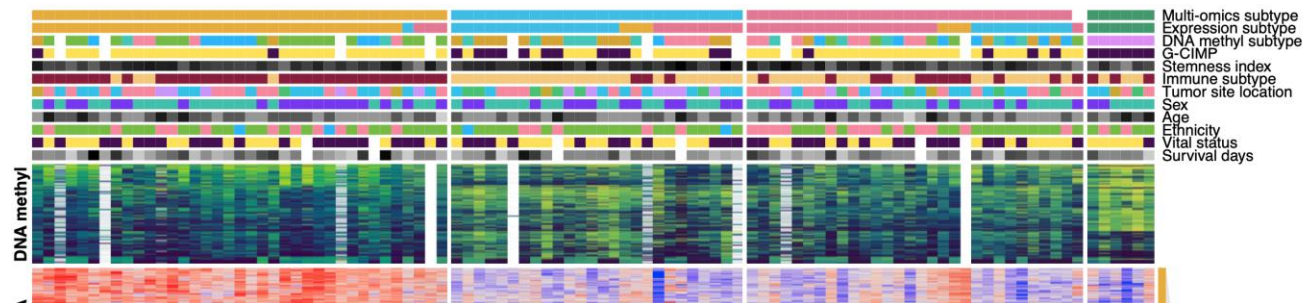
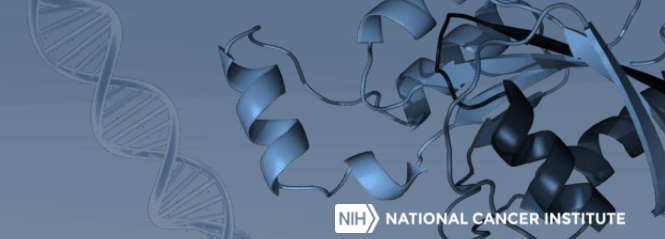
Two receptor tyrosine kinases (RTKs) are highly altered: EGFR and PDGFRA

- Co-occurrence of structural variants and amplification

Two genes related to telomerase activity are highly altered:

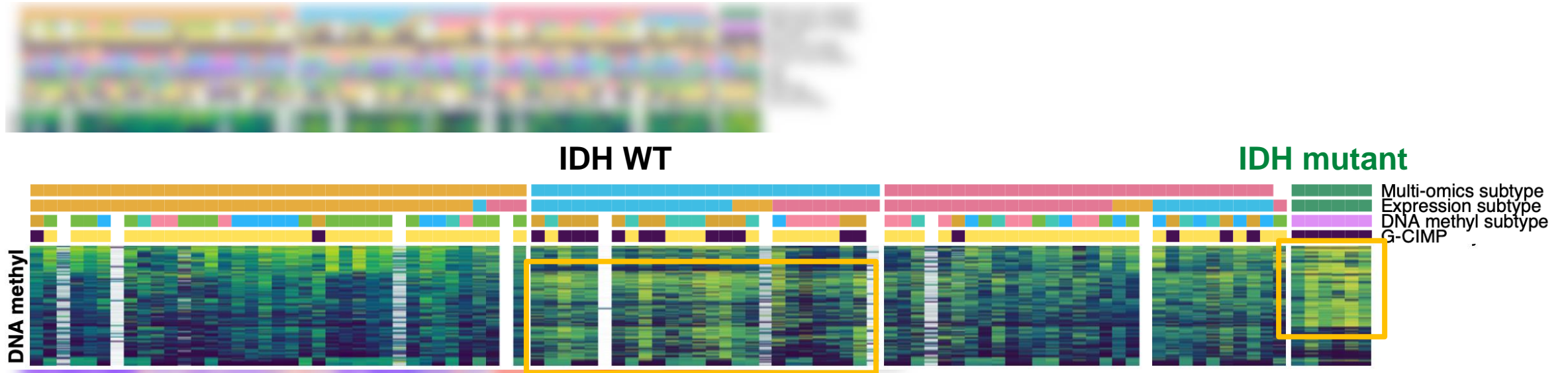
- ATRX: associated with alternative lengthening of telomeres (ALT) phenotype
- TERT: promoter mutations using WGS

Overview of all tumor data



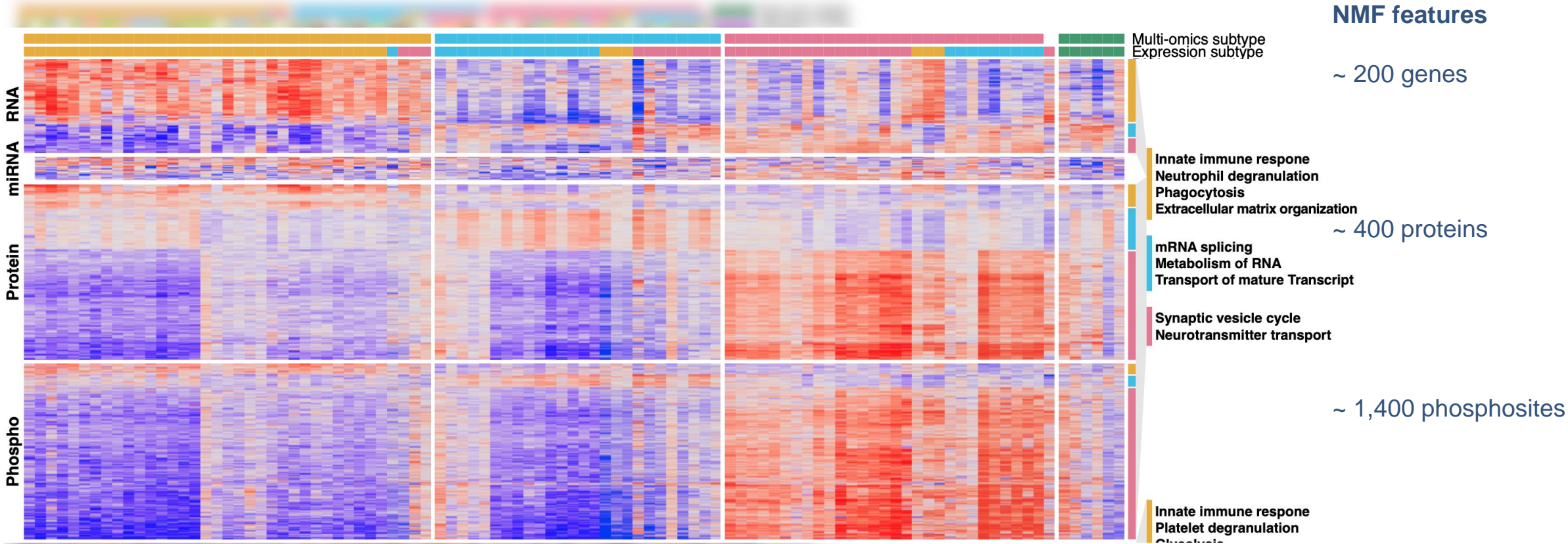
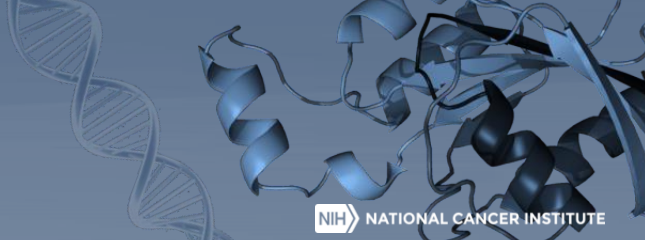
(manuscript in revision)

IDH mutant and G-CIMP phenotype



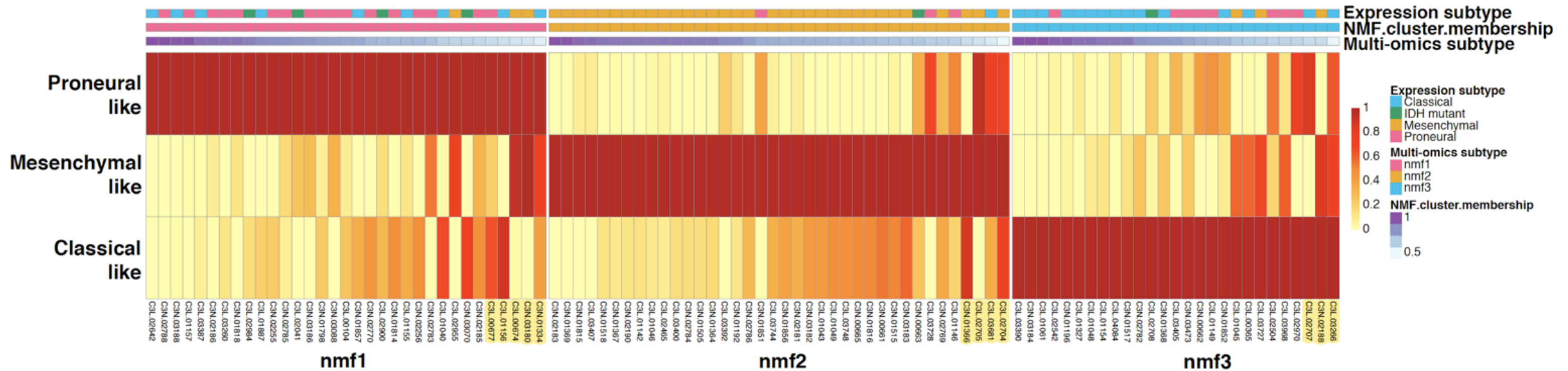
- G-CIMP = Glioma CpG island methylator phenotype
- DNA methylation clustering yielded 2 G-CIMP clusters

Multi-omics subtypes on IDH WT tumors



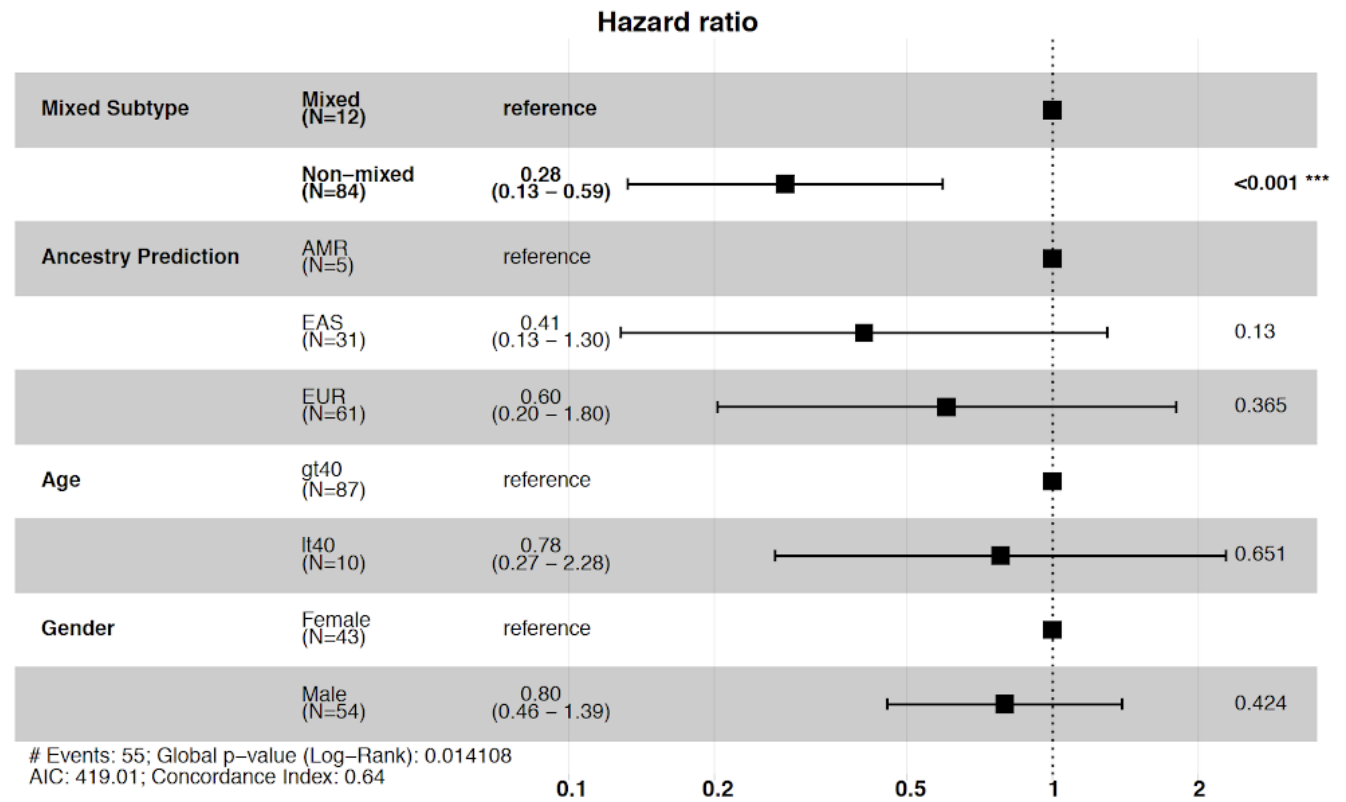
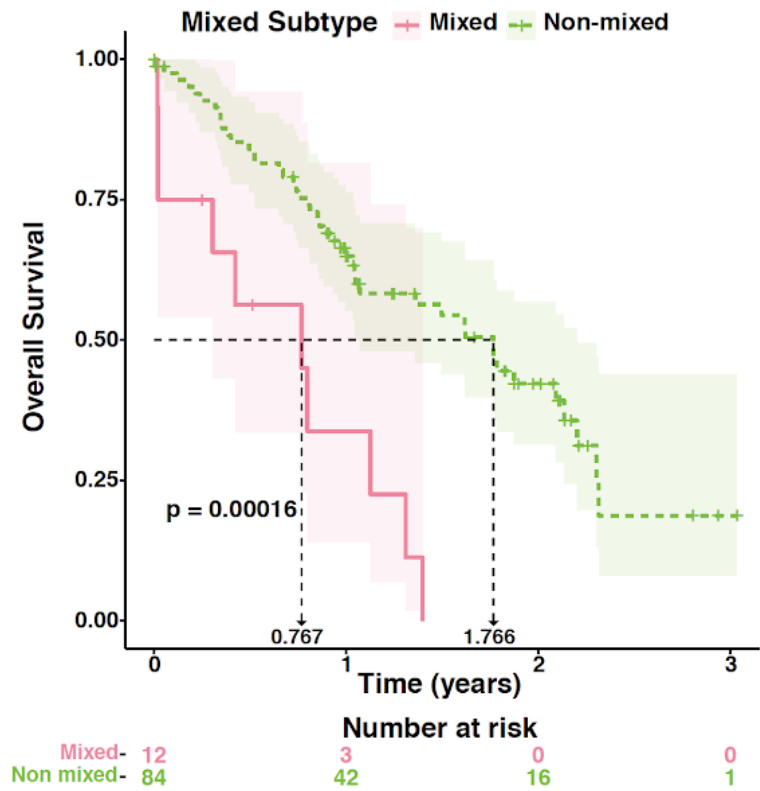
- Non-negative matrix factorization (NMF) using RNA, protein, and phospho
- Our multi-omics subtypes were based mostly on proteomic features

Mixed multi-omics subtype



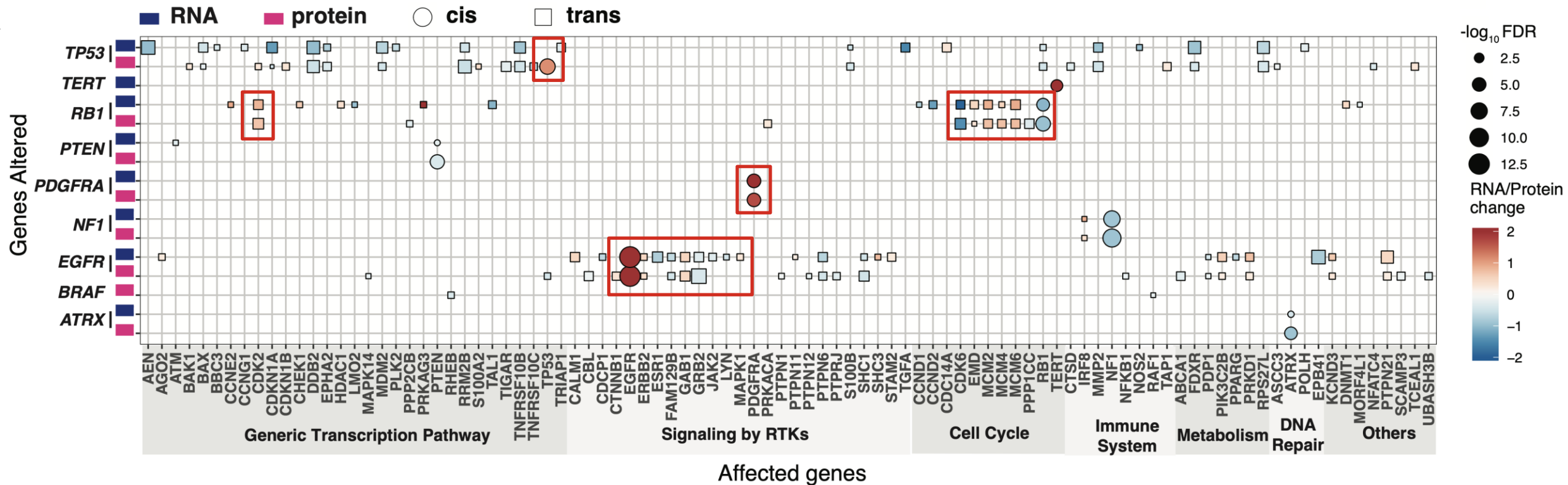
- Mixed multi-omics subtype: tumors with signatures of more than 1 subtype (nmf membership < 0.55)
- Non-mixed multi-omics subtype: tumors with signature with mainly in 1 subtype (nmf membership ≥ 0.55)
- 12 tumors classified as mix subtype showing poor survival

Mixed subtype tumors are associated with poor survival



Cox regression model of overall survival outcome between 12 mixed and 84 non-mixed tumor

Genetic alteration impact on RNA and protein

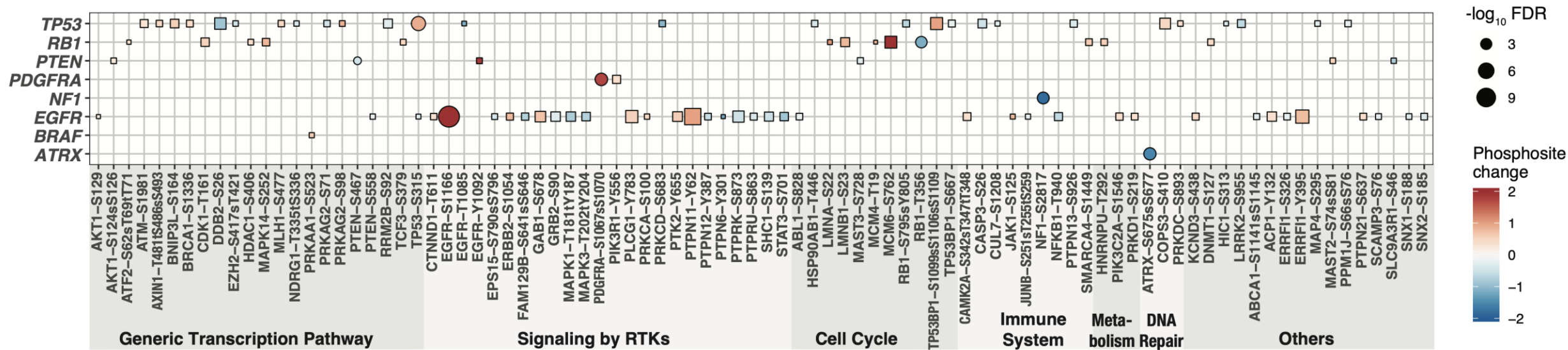


(manuscript in revision)

Song Cao
Alla Karpova

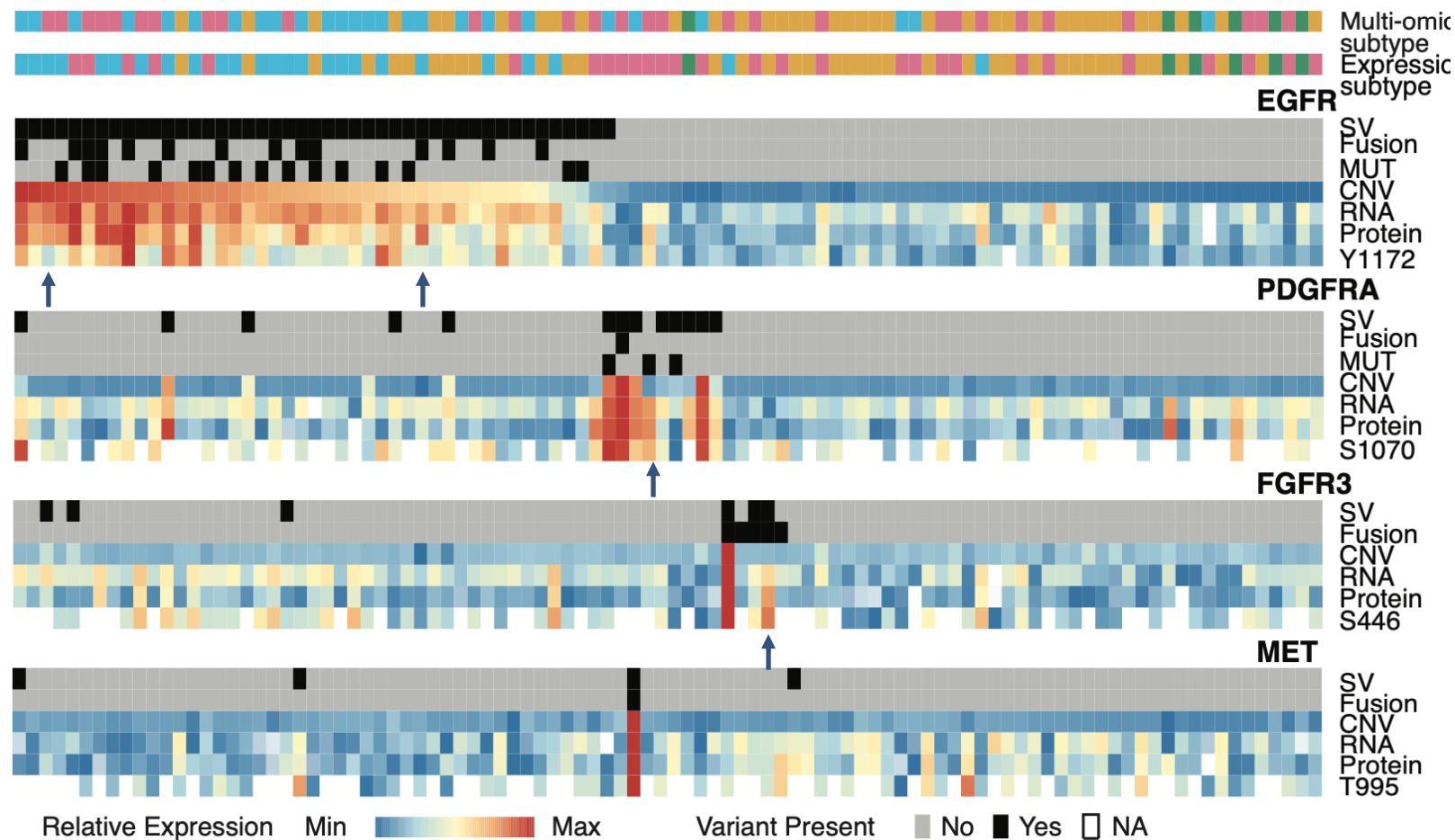
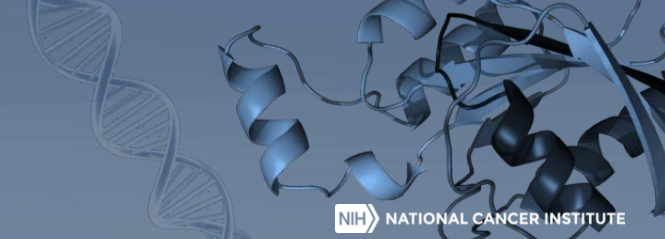
Genetic alteration impact on phosphoprotein

Genes Altered



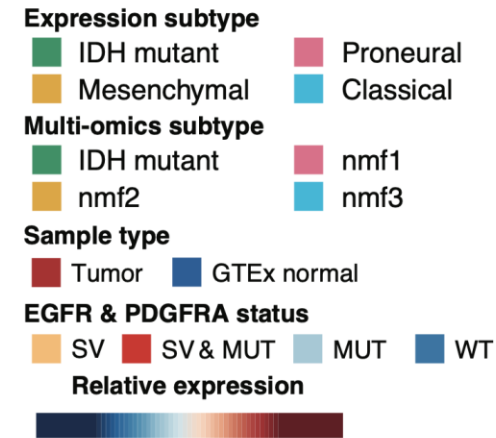
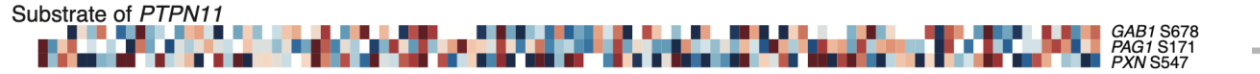
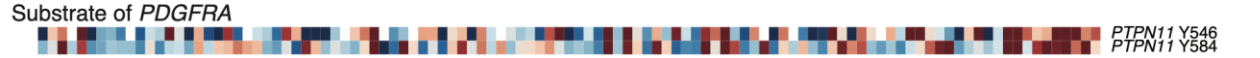
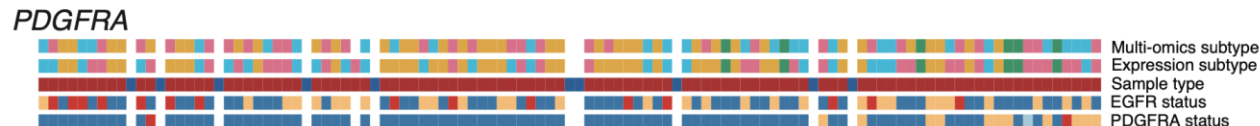
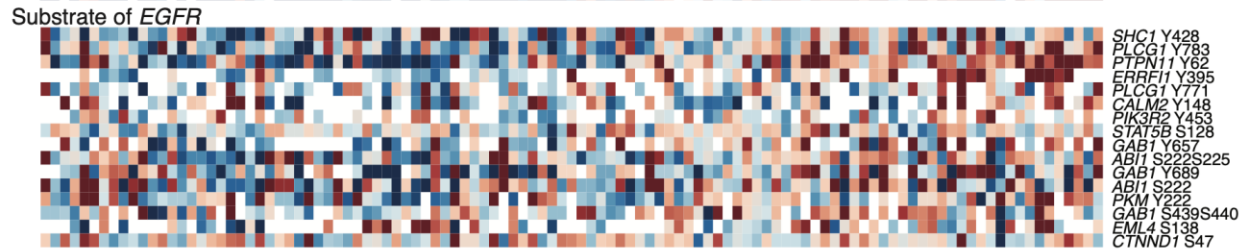
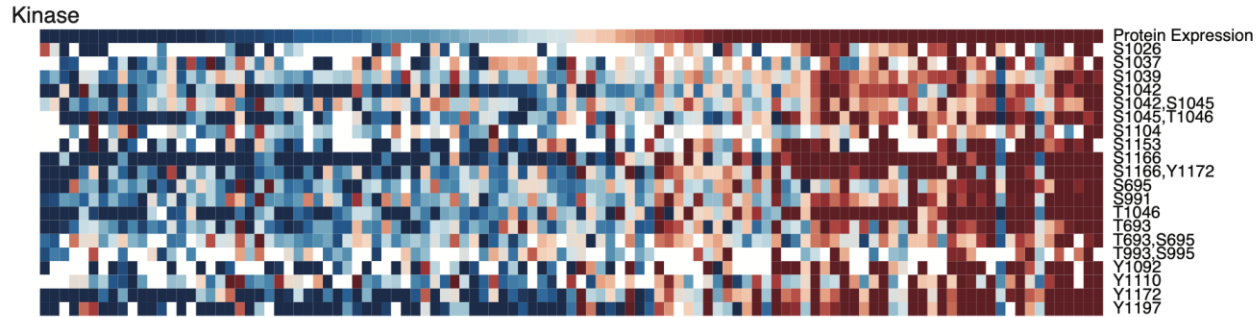
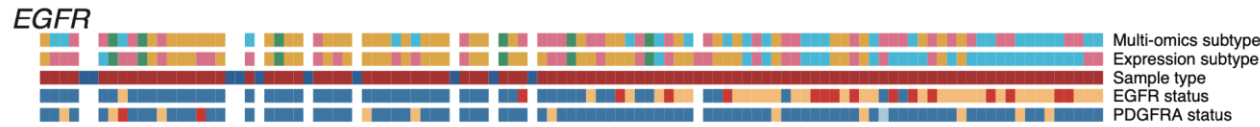
(manuscript in revision)

Proteomic and phosphoproteomic RTK activities can better stratify patients

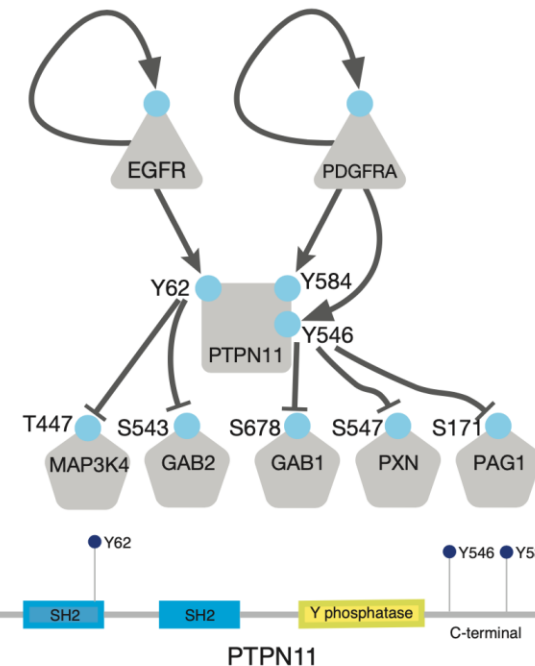


- RTK alterations are mutually exclusive, suggesting one hit is enough for GBM
- Altered but not active RTKs may not benefit from inhibition
- Potential new therapeutic target in the signal transducing cascade

Signal cascade of EGFR and PDGFRA identified shared downstream hub PTPN11

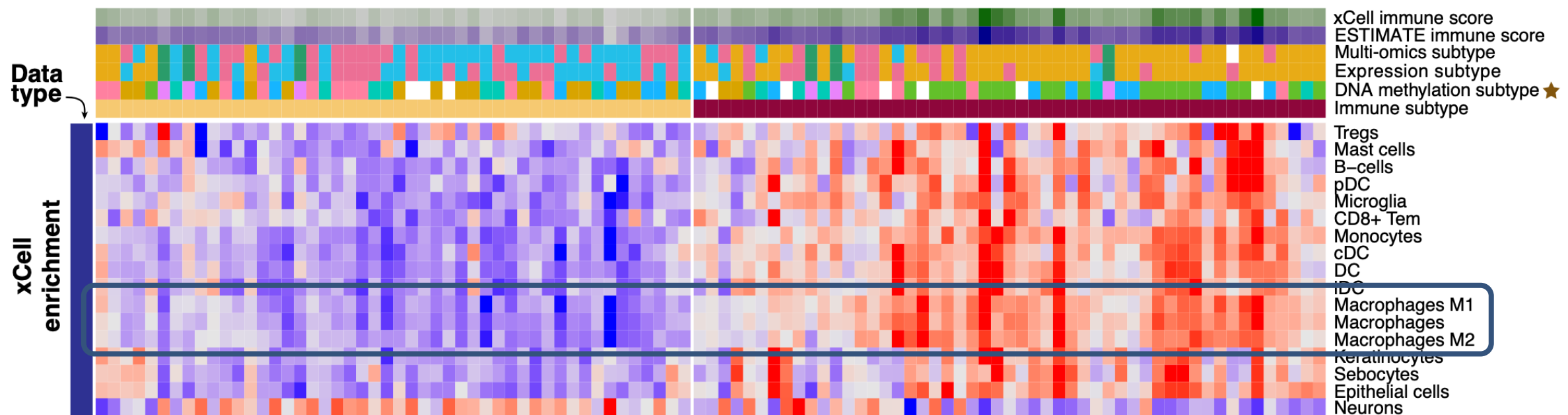


(manuscript in revision)



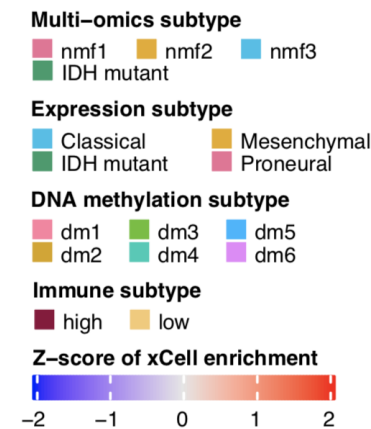
Song Cao
Alla Karpova

Enrichment for macrophages stratifies patients into immune high and low groups

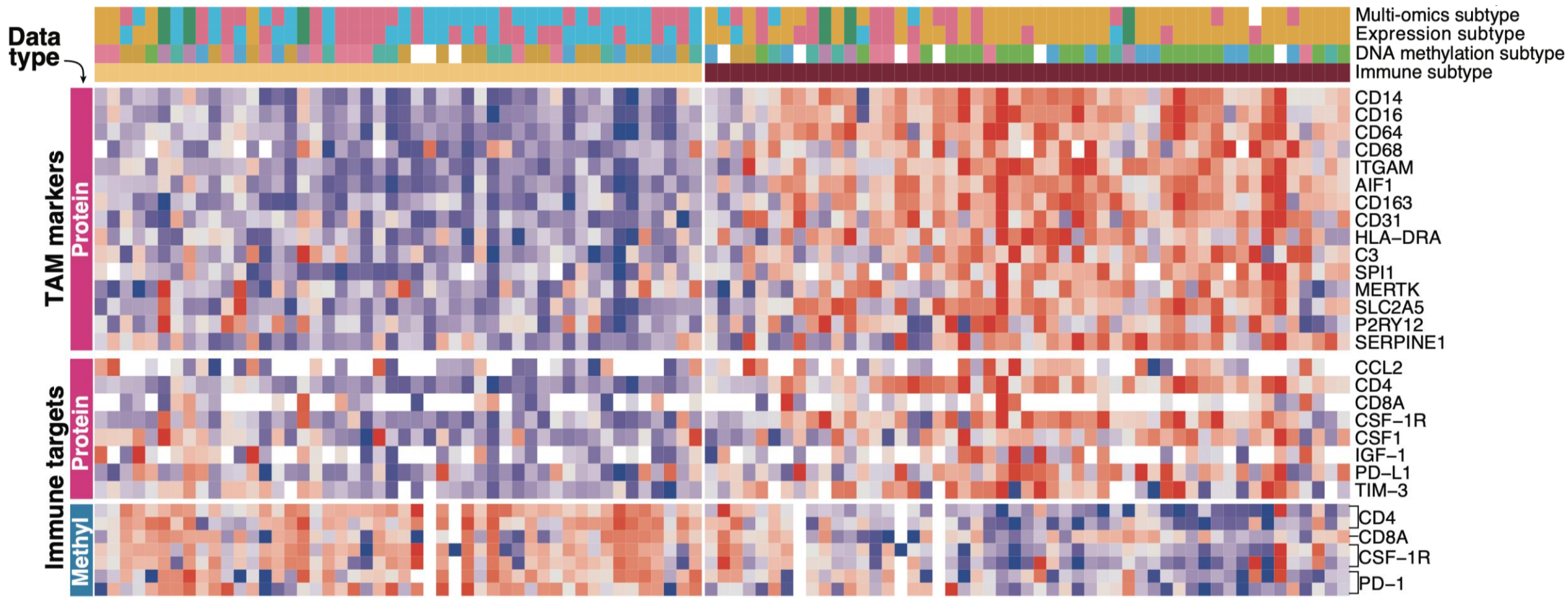
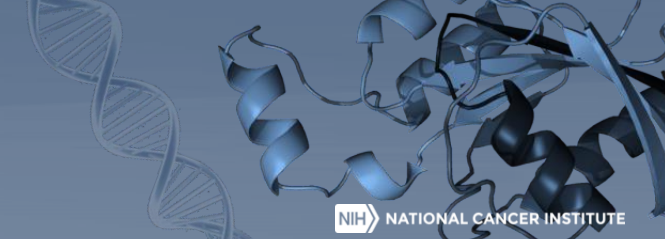


- Cell type enrichment by xCell based on bulk gene expression deconvolution
- T-cell oriented immunotherapy clinical trials have failed
- We identified two macrophage-based immune subtypes of GBM

Yize Li
Joseph Rothstein
Francesca Petralia



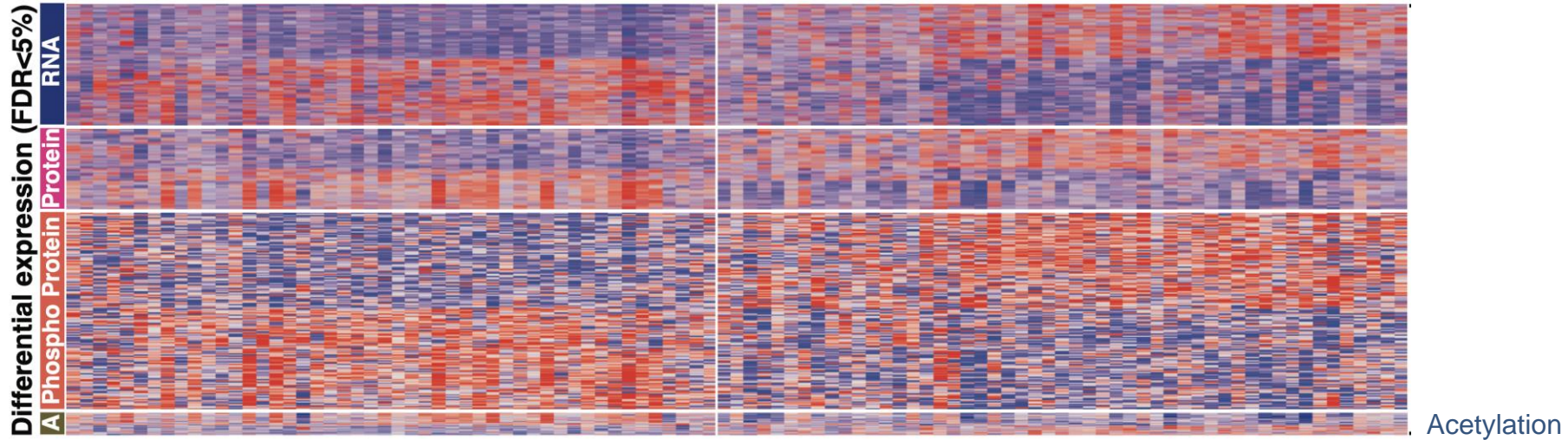
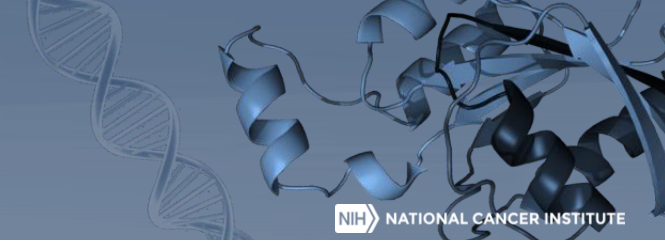
Distinctive protein and DNA methylation patterns between two immune subtypes



TAM = Tumor associated macrophages

Yize Li
Wen-Wei Liang

Consistent pathway enrichment from different data types between immune subtypes



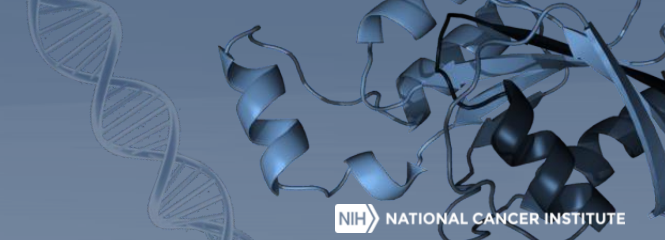
Pathways enriched in immune low

- Cell cycle
- Chromatin modifying enzymes
- Chromatin organization
- DNA double-strand break repair
- G2M checkpoint
- Regulation of TP53 activity
- Spliceosome
- SUMOylation
- Telomere maintenance
- Regulation of PTEN transcription

Pathways enriched in immune high

- Apoptosis
- Exosome
- Hemostasis
- Immune system
- Innate immune system
- MAP2K and MAPK activation
- Neutrophil degranulation
- Platelet activation, signaling and aggregation
- Regulation of actin cytoskeleton
- Signaling by interleukins

Major takeaways



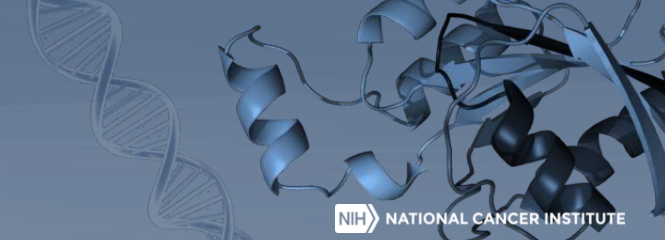
The most comprehensive proteogenomic characterization of GBM to date

Treatment naïve tumors to discover new therapeutic options and inform future clinical trial design

New biological insights and clinical implications captured at the protein level

- Three multi-omics subtypes with unique characteristics at the protein, phosphoprotein and acetylation levels
- Mixed subtype tumors are associated with worse prognosis
- Common regulatory hub PTPN11 by RTK
- Immune subtypes in relation to macrophage content

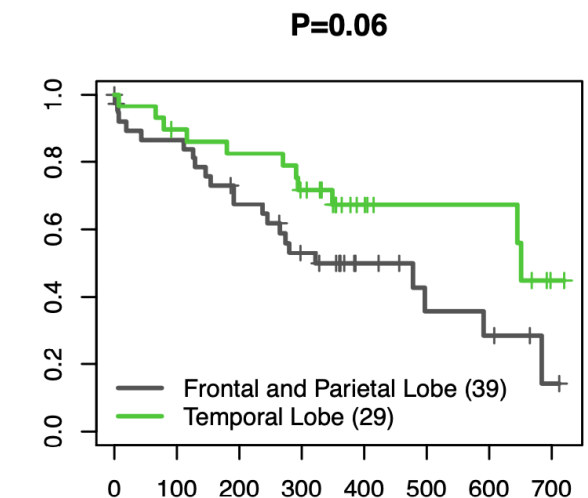
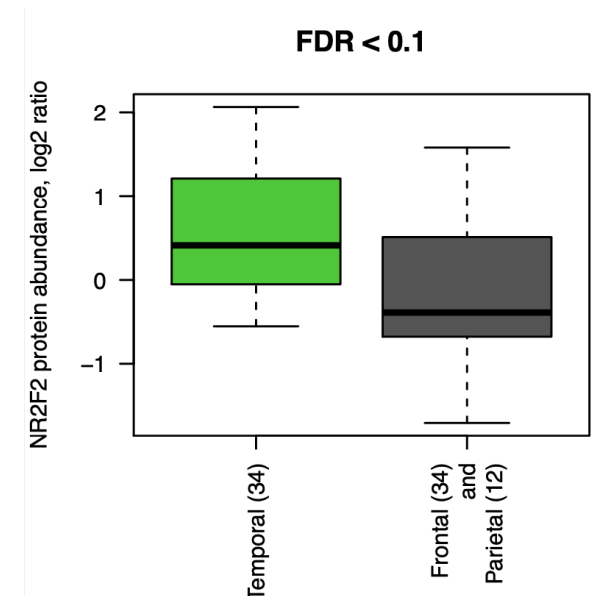
How TCIA images have helped the analysis



Curate the tumor laterality and location using MRI and CT imaging
(Dmitry Rykunov, Alexis Demopoulos)

- NR2F2 showed significantly higher protein abundance in temporal tumors than in frontal and parietal tumors
- Potential temporal-specific tumor associated stem cell marker

Apply deep learning to identify histopathology image signatures between different molecular subgroups (Runyu Hong)



Identifying and visualizing molecular features on histopathology images

H&E imaging data from TCIA

- Image resolution: 20X, 10X, 5X
- Cutting each slide into 299x299 pixel tiles

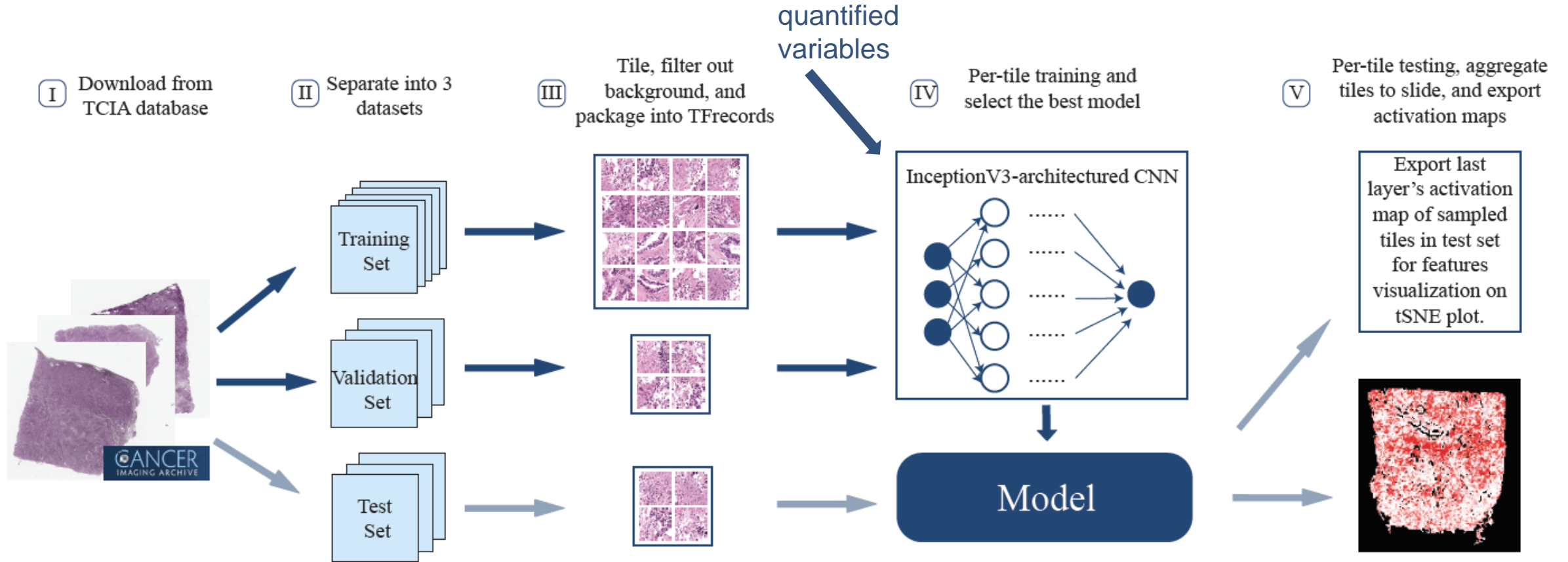
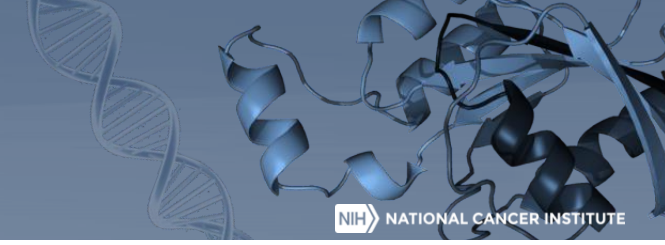
Modeling strategy

- 70% for training; 15% for validation; 15% for testing (patient-level separation)

Image stratifications

- G-CIMP: 113 slides, 86 patients
- Immune response: 129 slides, 99 patients
- Telomere length: 128 slides, 98 patients

H&E imaging analysis method overview



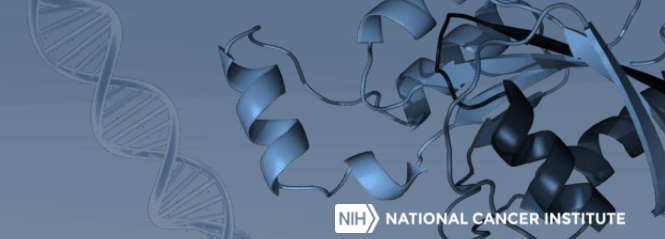
* CPTAC-LUAD Manuscript

Deep Learning architectures used:

Inception V1-V4; InceptionResnet V1&V2; Self-designed architecture (S1, F1, FS1)

F1 and FS1 takes quantified variables (cellularity, necrosis, tumor nuclei, age, tumor weight) in addition to the images.

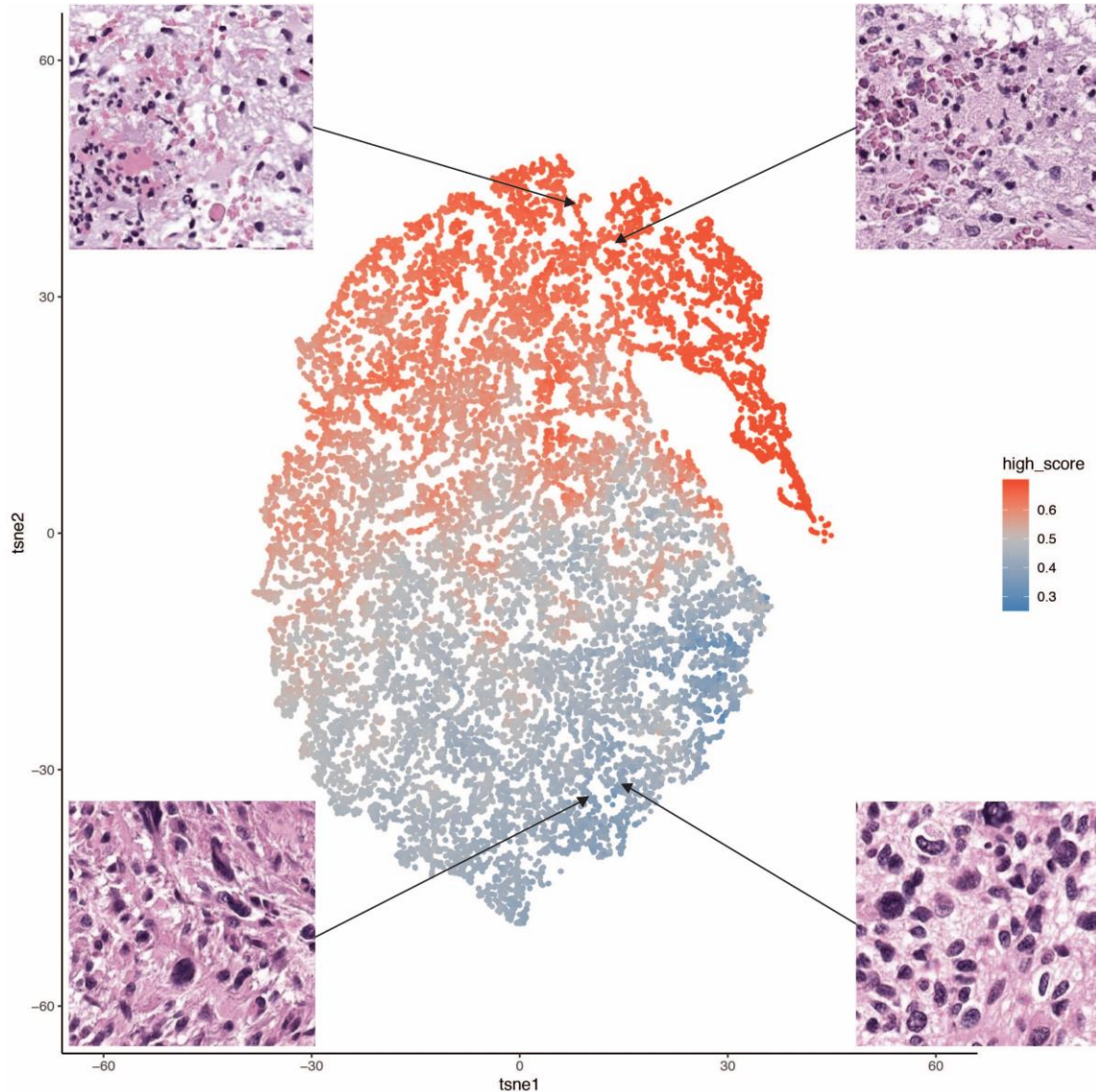
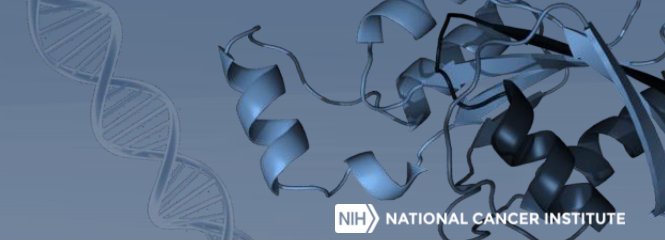
Promising results



Feature	Tile Resolution	Architecture	Patient AUROC	Tile AUROC
G-CIMP	10X	S1	1	0.89107
G-CIMP	20X	F1	0.81818	0.86861
G-CIMP	20X	S1	0.72727	0.68754
Immune	20X	F1	0.82143	0.65902
Immune	20X	FS1	0.71429	0.74064
Immune	10X	F1	0.75	0.65249

Feature	Tile Resolution	Architecture	Normal Patient AUROC	Short Patient AUROC	Long Patient AUROC	Normal Tile AUROC	Short Tile AUROC	Long Tile AUROC
Telomere	20X	F1	0.5	0.84615	0.84615	0.60721	0.6879	0.84768
Telomere	5X	FS1	0.77273	0.80769	0.53846	0.52926	0.62666	0.52052

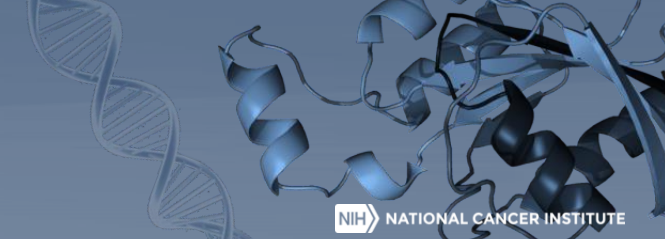
Visualization of FS1 Immune 20X



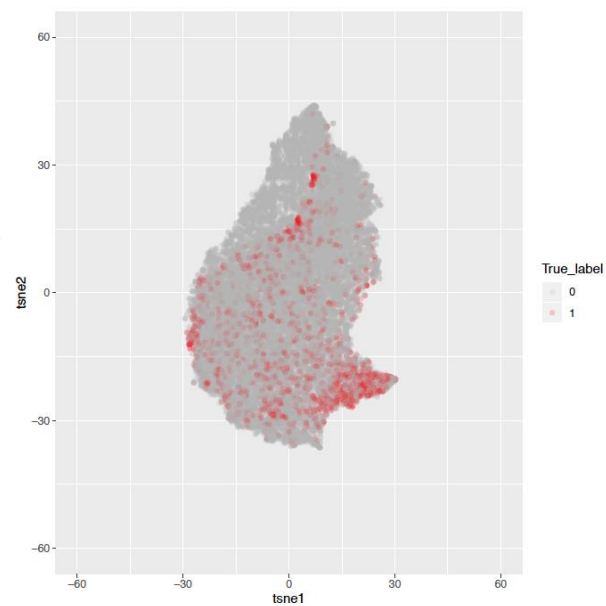
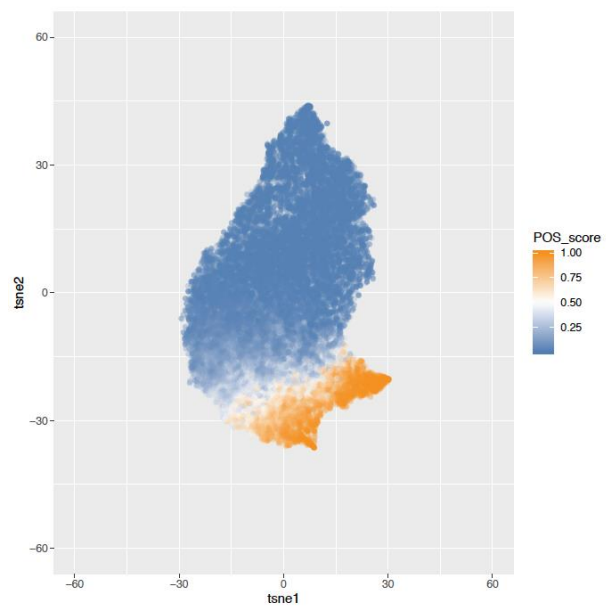
- 20,000 randomly sampled tiles from test set
- Activation maps (1,250-long vectors)
-> 2D space
- 2 experienced pathologists examined the clusters
- Giant cells in immune low
- Inflammatory cells: 20% in high, 5% in low
- microcystic change and a few vascular structures in high

(manuscript in revision)

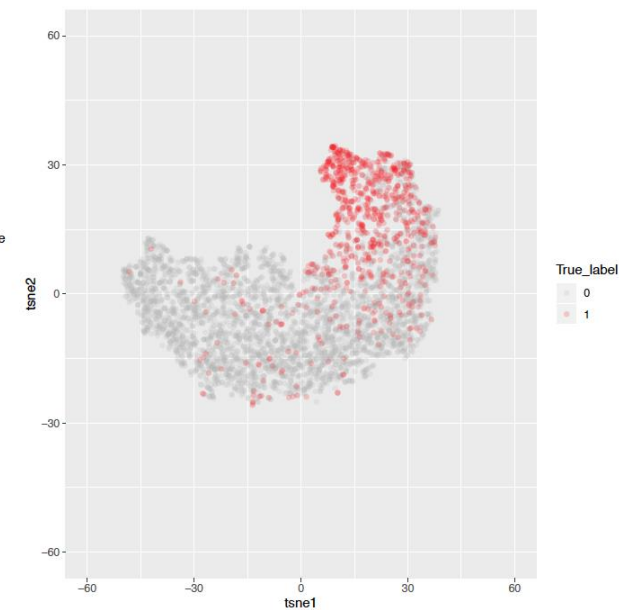
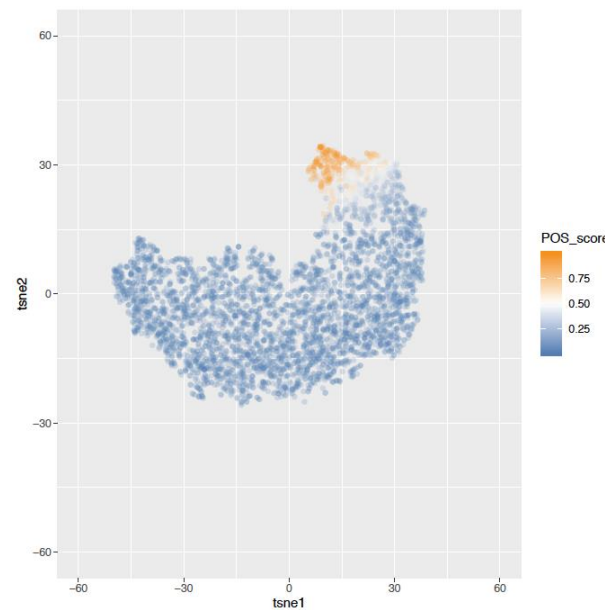
Visualization of G-CIMP



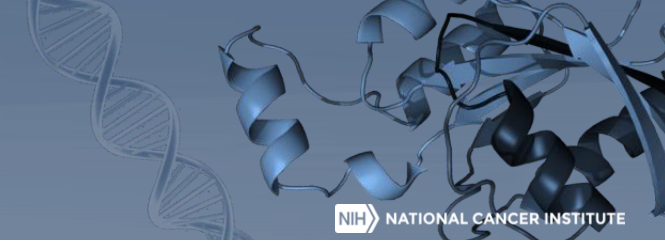
S1 G-CIMP 20X



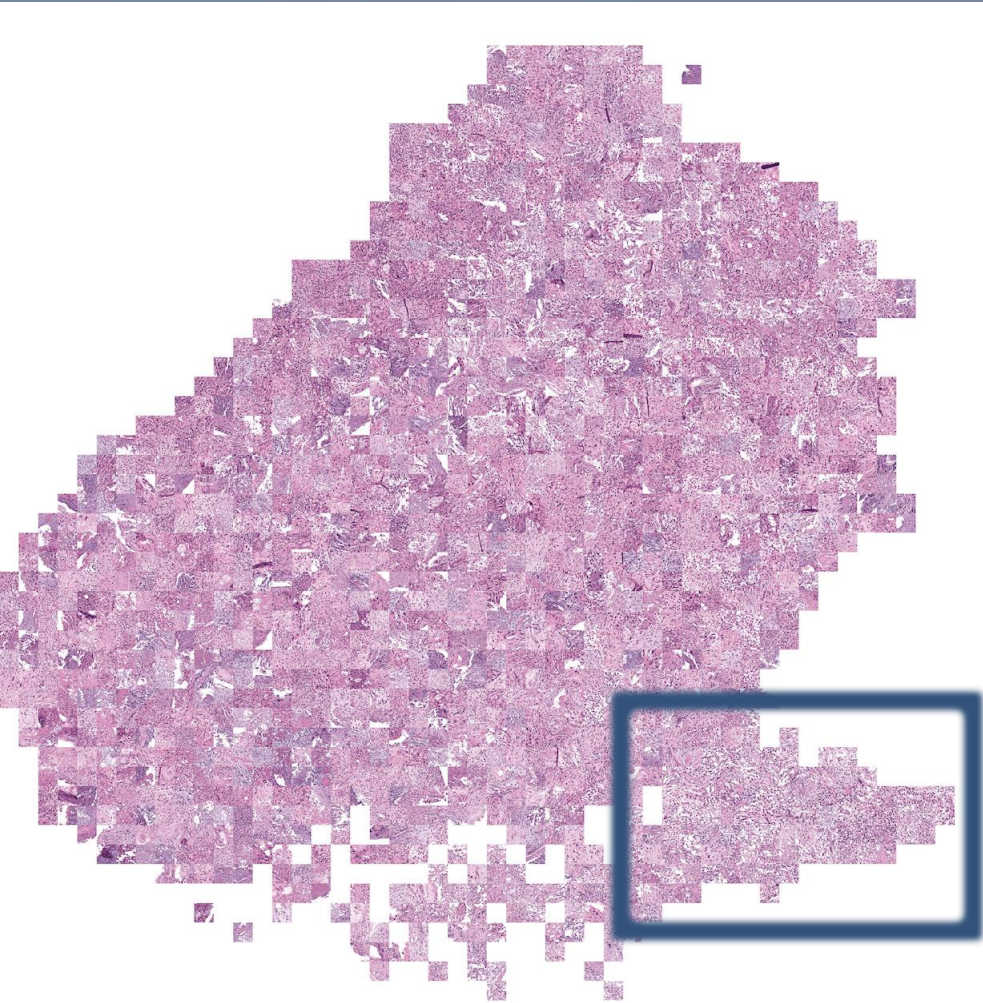
S1 G-CIMP 10X



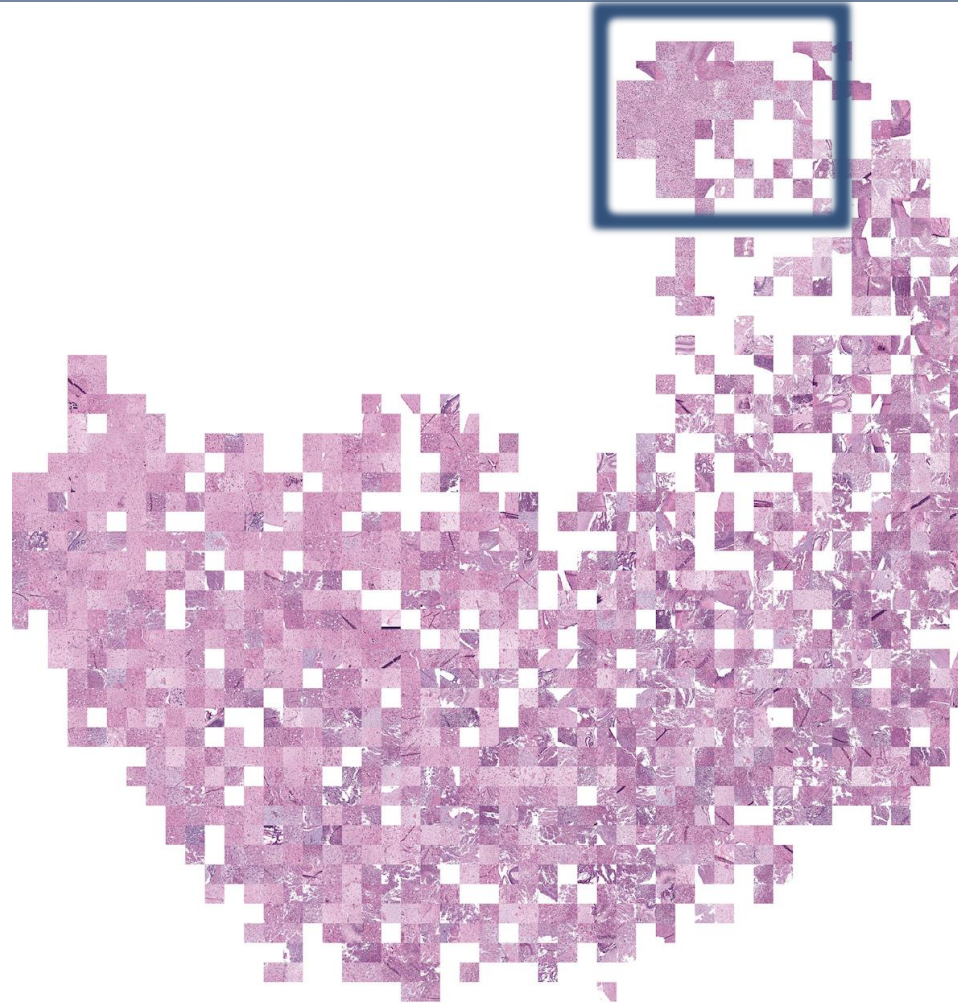
Visualization of G-CIMP (continued)



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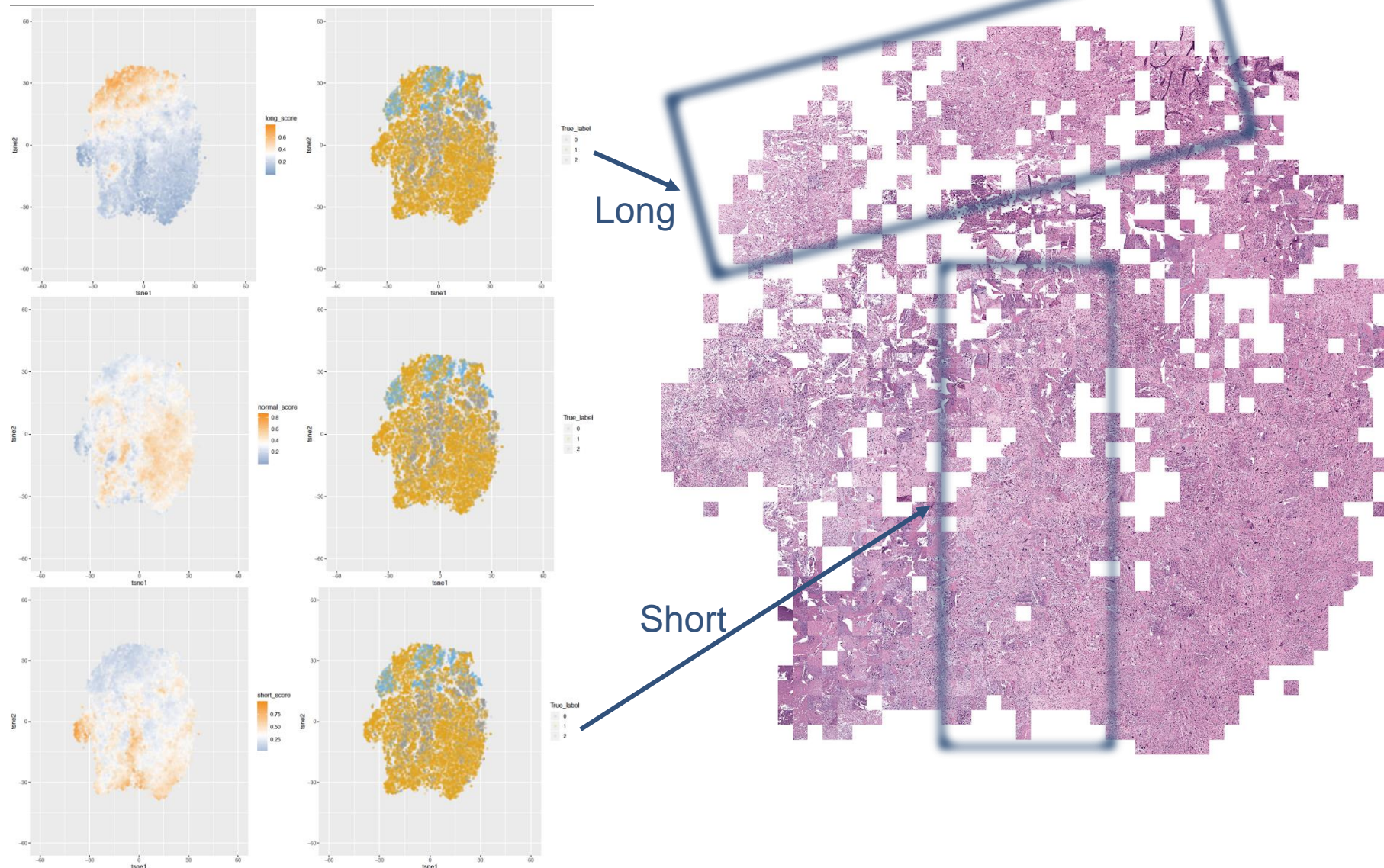
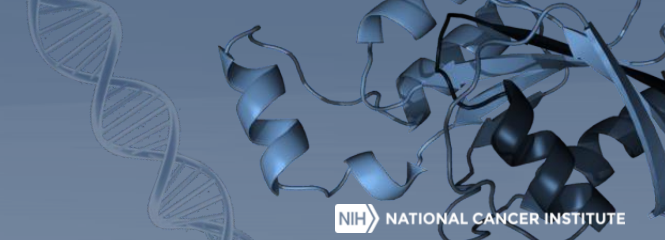
20X



10X

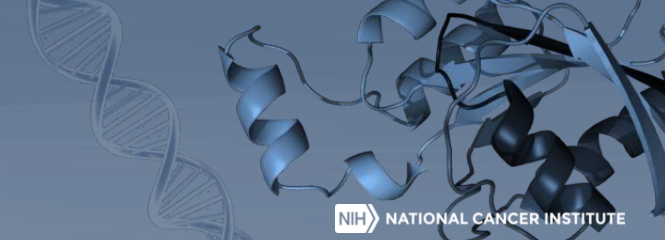
- Focal vascular proliferation (glomeruloid vascular proliferation)
- High cellularity
- No microcystic changes

Visualization of F1 Telomere 20X



- Abundant vascular structures in long (likely glomeruloid vascular proliferation)
- focally larger cells and gemistocytes

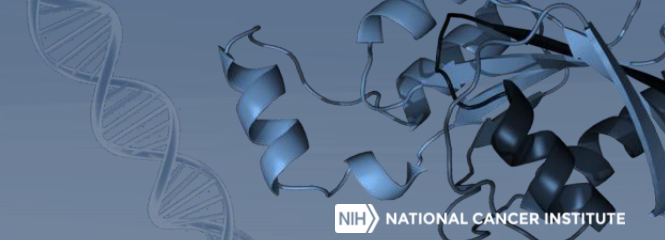
Summary of the histopathology imaging model



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- Found typical histopathology features in GBM corresponding to different subgroups
- Discovered novel histopathology features linking to biological and molecular responses
- Integrated deep learning models work better than image only models

Future/Ongoing directions



Validation using independent cohorts

Validation using orthogonal technologies

- Targeted MRM
- IHC
- Single nuclei RNA sequencing

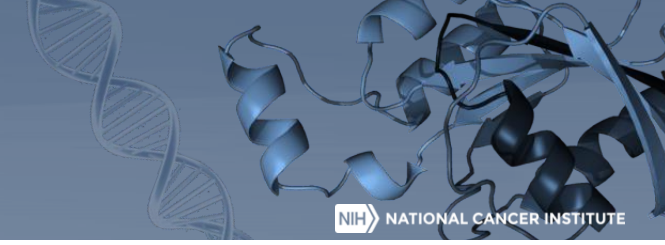
New therapeutic targets based on the proteomic signatures

- *In silico* prediction using LINCS, CCLE, CTRP and PRISM datasets (Vasileios Stathias)

Imaging analysis

- Differentiation between additional molecular features (e.g. genetic alterations and subtypes)
- Molecular and imaging signatures in different tumor locations

Where to access the data



Genomic data:

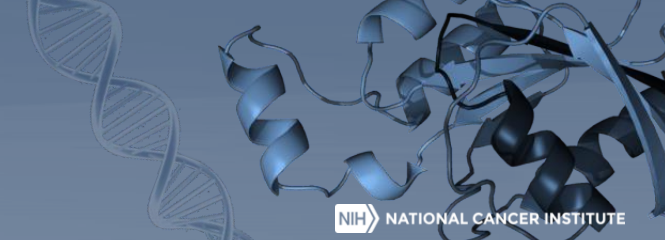
- Genomic Data Commons (GDC):
<https://portal.gdc.cancer.gov/>

Proteomic data:

- CPTAC Glioblastoma (GBM) Discovery Study:
<https://cptac-data-portal.georgetown.edu/cptac/s/S048>
- Proteomic Data Commons (PDC):
<https://pdc.cancer.gov/pdc/>

	Radiology Imaging Statistics	Pathology Imaging Statistics
Modalities	CR, CT, MR, SC	Pathology
Number of Patients	66	189
Number of Studies	164	N/A
Number of Series	1,771	N/A
Number of Images	156,493	510
Images Size (GB)	39.8	112

GBM proteogenomic characterization team



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- Simina M. Boca