

# Lung Precancer Analysis

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# Overview

1 Introduction

2 Materials

3 Methods

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# 1. Introduction

# 1. Introduction

## 1.1. Lung Cancer

# Lung Cancer?

The most common cancer

12.3 % of all cancers (Minna, Roth, & Gazdar, 2002)

The most important factor

**Tobacco**

# Cancer Survival Rate in Korea



Figure: Common cancer survival rates (S. Hong et al., 2021)

## Survival rate (More than 5 year)

- Thyroid: 68.4 %
- Lung: 35.4 %

# Type of Lung Cancer I

Types of lung cancer (Collins, Haines, Perkel, & Enck, 2007):

- ① Adenocarcinoma (LUAD) (40 %) ★
- ② Squamous cell carcinoma (LUSC) (25 %) ★
- ③ Small cell carcinoma (20 %)
- ④ Large cell carcinoma (10 %)
- ⑤ Adenosquamous carcinoma (< 5 %)
- ⑥ Carcinoid (< 5 %)
- ⑦ Bronchioalveolar (Bronchial gland carcinoma)
- ⑧ ...

# Type of Lung Cancer II

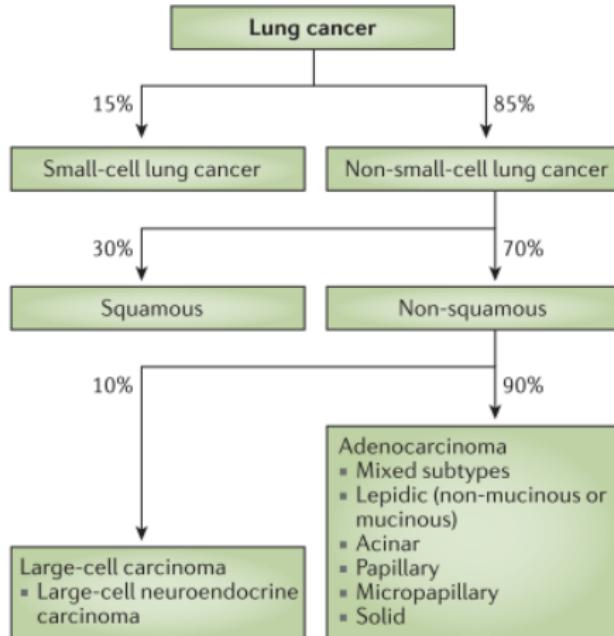


Figure: Lung cancer classification (Gridelli et al., 2015)

# 1. Introduction

## 1.2. Non-small cell lung cancer

# Non-small cell lung cancer (NSCLC)

Types of NSCLC (Goldstraw et al., 2011):

- Adenocarcinoma (ICDO 8140/3)
- Squamous cell carcinoma (ICDO 8070/3)
- Large-cell carcinoma (ICDO 8012/3)
- ...

# 1. Introduction

## 1.3. LUAD

## TCGA LUAD (Duhig et al., 2014)

- 81 % patients reported past/present tobacco smoking.
- Candidate driver genes: RTK, RAS, and RAF (38 %)
- Cancer-associated mutations: KRAS (32 %), EGFR (11 %), and BRAF (7 %)
- Enriched mutations: TP53, KEAP1, NF1, and RIT1 ( $p < 0.01$ )
- Fusions: ROS1 and RET

# 1. Introduction

## 1.4. LUSC

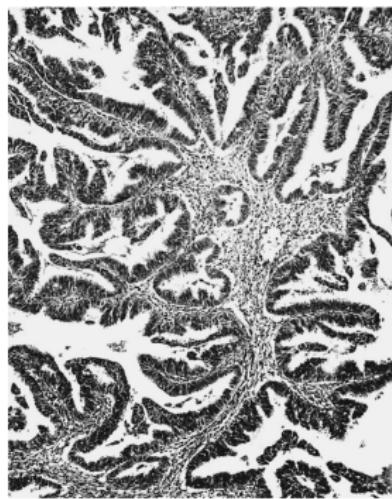
## TCGA LUSC (Dosenbach et al., 2007)

- 96 % patients reported past/present tobacco smoking.
- Not present EGFR and ALK fusions.
- Recurrent mutations: TP53, NFE2L2, KEAP1, BAI3, FBXW7, GRM8, MUC16, RUNX1T1, STK11, and ERBB4
- High rate of copy number alteration compared with other TCGA projects.
- Amplification of NFE2L2, MYC, CDK6, MDM2, BCL2L1, and EYS.
- Deletion of FOXP1, PTEN, and NF1

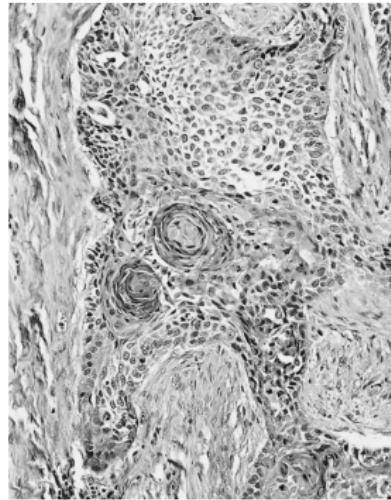
# 1. Introduction

## 1.5. LUAD vs. LUSC

# LUAD vs. LUSC I



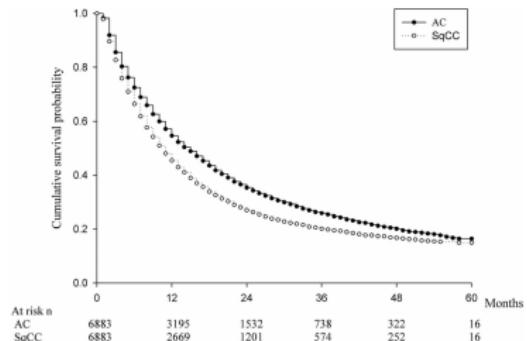
(a) LUAD



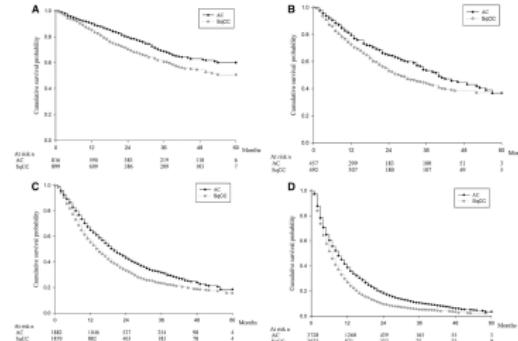
(b) LUSC

**Figure:** LUAD and LUSC histology in Lung cancer (Travis, 2002)

# LUAD vs. LUSC II



(a) All patients



(b) By cancer stages

**Figure:** Kaplan-Meier survival curves for LUAD & LUSC (B.-Y. Wang et al., 2020)

## Findings

LUSC is more dangerous than LUAD.  $\therefore p < 0.001$

# 1. Introduction

## 1.6. Study Objectives

# Study Objectives

## Find different mutations

- between WES vs. WTS
- from cancer vs. precancer

## Ultra-deep sequencing

to find an *infinitesimal* quantity of Non-Circulating Tumor DNA

- from blood
- from urine
- from bronchus

## 2. Materials

# Lung Cancer Data

- Exome (WES) (sample n=289) + Transcriptome (WTS) (sample n=166)
- Normal + {AAH, CIS + AIS, Dysplasia, MIA} + Primary
  - Adenocarcinoma *in situ*
  - Atypical adenomatous hyperplasia
  - Carcinoma *in situ*
  - Dysplasia
  - Minimally invasive adenocarcinoma
- Adenocarcinoma (LUAD) & Squamous cell carcinoma (LUSC)
  - ① Normal → AAH → AIS → MIA → LUAD (patient n=28)
  - ② Normal → Dysplasia → CIS → LUSC (patient n=80)

## 2. Materials

### 2.1. WES Data

# WES Data Composition

Table: Number of WES samples

Cancer Subtype	Stage	Number of Samples	
		Normal	77
LUSC	Dysplasia		5
	AAH		8
	CIS+AIS		73
	Primary		77
	Total		240
LUAD	Normal		18
	AAH		15
	CIS+AIS		9
	MIA		1
	Primary		18
	Total		61

# WES Data Composition with Recurrence I

Table: LUSC WES Data with Recurrence

Recurrence?	Stage	Number of Samples	
		Normal	Dysplasia
Recurrence	Normal	14	
	Dysplasia		4
	CIS+AIS	12	
	Primary	14	
	Total	44	
Non-recurrence	Normal	63	
	Dysplasia		1
	AAH	8	
	CIS+AIS	61	
	Primary	63	
	Total	196	

# WES Data Composition with Recurrence II

Table: LUAD WES Data with Recurrence

Recurrence?	Stage	Number of Samples	
		Normal	AAH
Recurrence	Normal	5	8
	AAH	2	5
	CIS+AIS	2	5
	Primary	5	20
	Total	20	
Non-recurrence	Normal	13	7
	AAH	7	1
	CIS+AIS	7	13
	MIA	1	41
	Primary	13	
	Total	41	

# WES Data Composition with Smoking I

Table: LUSC WES Data with Smoking

Smoking?	Stage	Number of Samples	
		Normal	Total
Never	Normal	3	
	CIS+AIS	3	
	Primary	3	
	Total	9	
Ex	Normal	41	
	Dysplasia	1	
	AAH	4	
	CIS+AIS	40	
	Primary	41	
	Total	127	
Current	Normal	33	
	Dysplasia	4	
	AAH	4	
	CIS+AIS	30	
	Primary	33	
	Total	104	

# WES Data Composition with Smoking II

Table: LUAD WES Data with Smoking

Smoking?	Stage	Number of Samples	
		Normal	Total
Never	Normal	1	
	CIS+AIS	1	
	Primary	1	
	Total	3	
Ex	Normal	10	
	AAH	9	
	CIS+AIS	6	
	Primary	10	
	Total	35	
Current	Normal	7	
	AAH	6	
	CIS+AIS	2	
	MIA	1	
	Primary	7	
	Total	23	

## 2. Materials

### 2.2. WTS Data

# WTS Data Composition

Table: Number of WTS samples

Cancer Subtype	Stage	Number of Samples	
		Normal	Dysplasia
LUSC	Normal	17	
	Dysplasia		2
	CIS+AIS	34	
	Primary	36	
	Total	89	
LUAD	Normal	13	
	AAH		1
	CIS+AIS	5	
	Primary	6	
	Total	25	

# WTS Data Composition with Recurrence I

Table: LUSC WTS Data with Recurrence

Recurrence?	Stage	Number of Samples	
		Normal	Dysplasia
Recurrence	Normal	1	
	Dysplasia		1
	CIS+AIS		5
	Primary		6
	Total	13	
Non-recurrence	Normal	16	
	Dysplasia		1
	CIS+AIS		29
	Primary		30
	Total	76	

# WTS Data Composition with Recurrence II

Table: LUAD WTS Data with Recurrence

Recurrence?	Stage	Number of Samples	
		Normal	Total
Recurrence	Normal	2	2
	CIS+AIS	1	1
	Primary	1	1
	Total	4	4
Non-recurrence	Normal	11	11
	AAH	1	1
	CIS+AIS	4	4
	Primary	5	5
	Total	21	21

# WTS Data Composition with Smoking I

Table: LUSC WTS Data with Smoking

Smoking?	Stage	Number of Samples	
		Normal	AIS
Never	Normal	1	
	CIS+AIS	1	
	Primary	2	
	Total	4	
Ex	Normal	8	
	Dysplasia	1	
	CIS+AIS	21	
	Primary	22	
	Total	52	
Current	Normal	8	
	Dysplasia	1	
	CIS+AIS	12	
	Primary	12	
	Total	33	

# WTS Data Composition with Smoking II

Table: LUAD WTS Data with Smoking

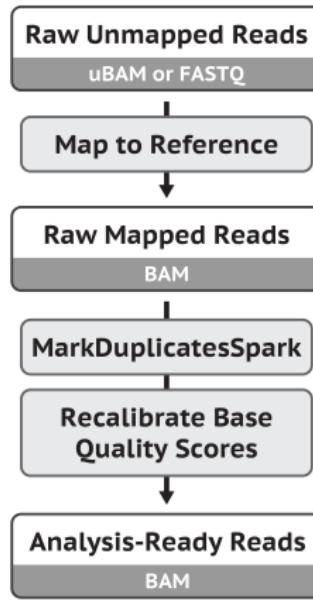
Smoking?	Stage	Number of Samples	
Never	Normal	10	
	AAH	1	
	CIS+AIS	3	
	Primary	4	
	Total	18	
Ex	Normal	3	
	CIS+AIS	1	
	Primary	1	
	Total	5	
Current	CIS+AIS	1	
	Primary	1	
	Total	2	

### 3. Methods

### 3. Methods

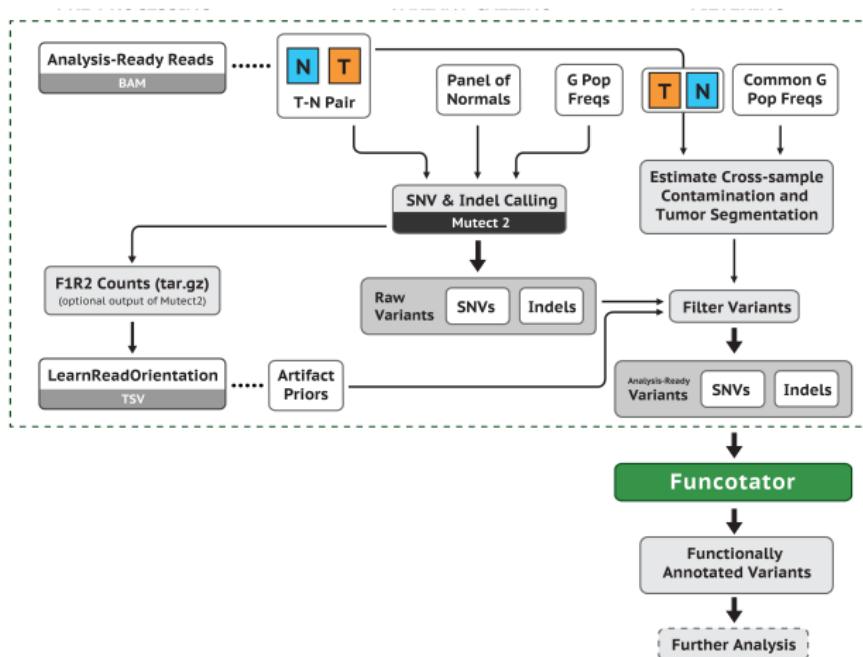
#### 3.1. Workflows

# Data pre-processing for variant discovery



**Figure:** Data pre-processing for variant discovery (Van der Auwera et al., 2013; DePristo et al., 2011)

# Somatic short variant discovery



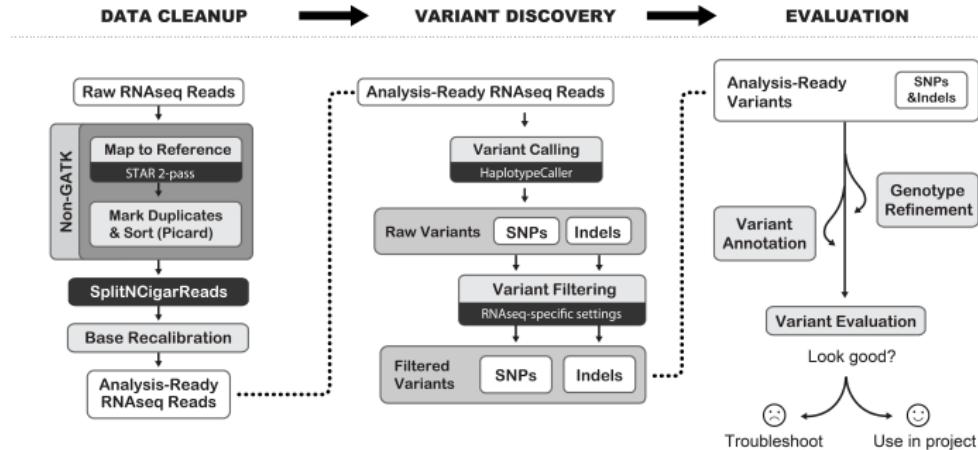
**Figure:** Somatic short variant (SNVs + Indels) discovery workflow (Van der Auwera et al., 2013; DePristo et al., 2011)

# Germline short variant discovery



**Figure:** Germline short variant (SNVs + Indels) discovery workflow (Van der Auwera et al., 2013; DePristo et al., 2011)

# RNA-seq short variant discovery



**Figure:** RNA-seq short variant (SNVs + Indels) discovery workflow (Van der Auwera et al., 2013; DePristo et al., 2011)

## 4. Results

## 4. Results

### 4.1. Quality Checks

# FastQC?

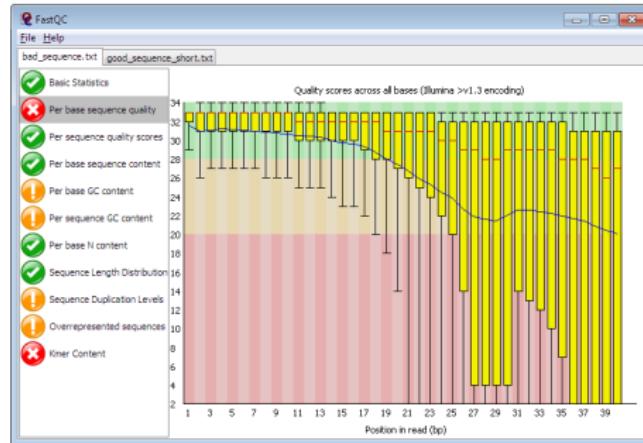


Figure: Example of FastQC Result (Andrews et al., 2012)

- A quality check tool for sequence data
- Give an overview that which test may be problems

# FastQC on WES

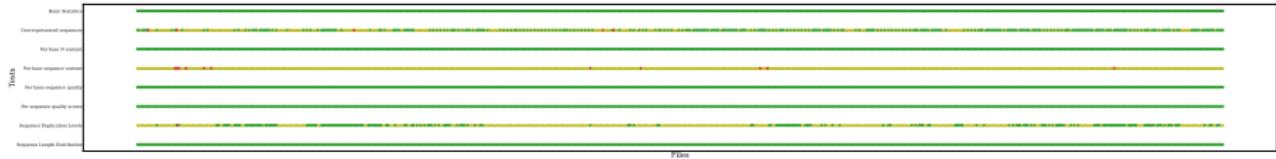
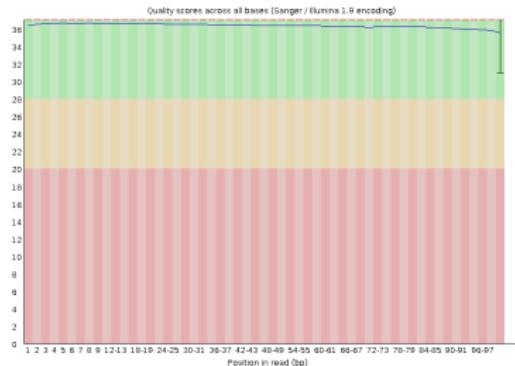


Figure: FastQC with WES data

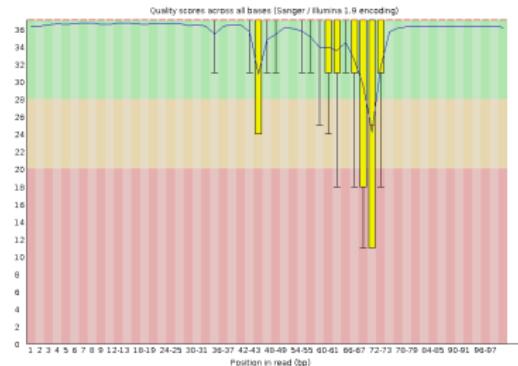
## Failure on 33P1 sample

33P1 is excluded from further analyses.

# Failure on 33P1 I



(a) 33N



(b) 33P1

Figure: Per Base Sequence Quality Results

# Failure on 33P1 II

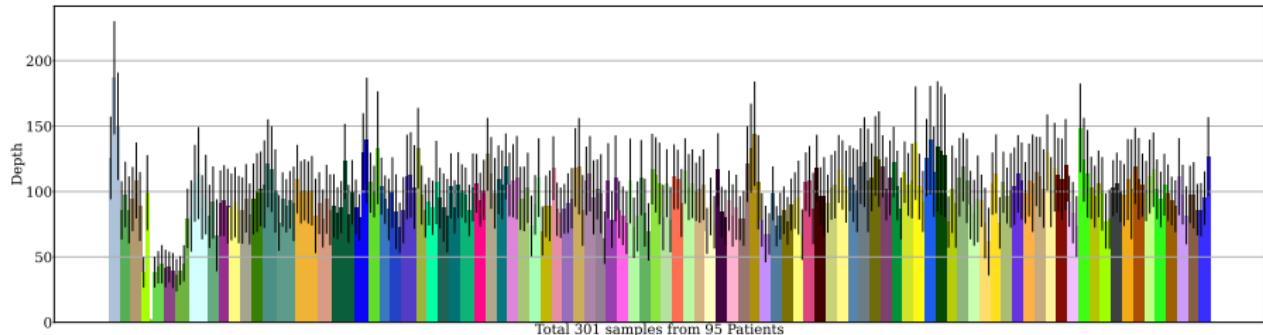


Figure: Coverage Depth Plot

- Tumor DNA:  $97.6\times$ ; Germline DNA:  $95.8\times$  in TCGA LUAD (Duhig et al., 2014)
- Mean  $121\times$ , with 83 % of target bases above  $30\times$  in TCGA LUSC (Dosenbach et al., 2007)

# FastQC on WTS

Tests

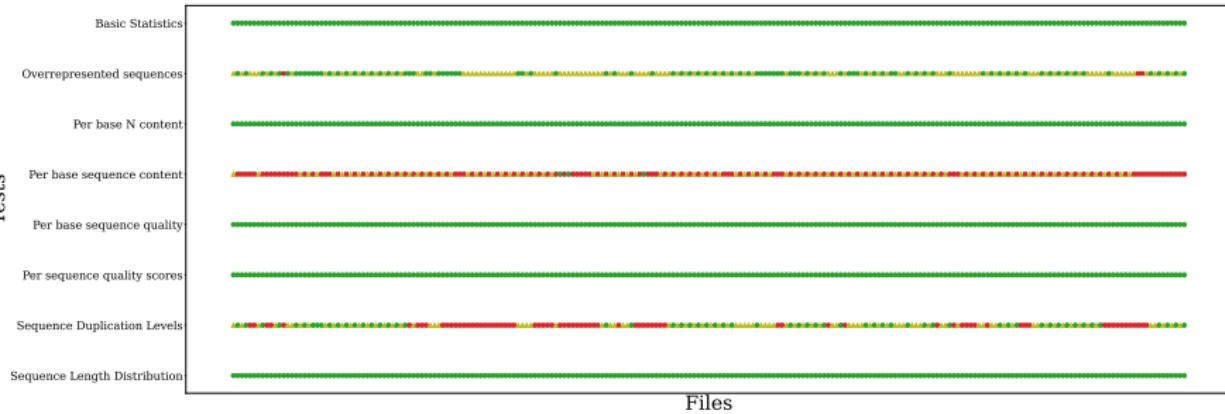


Figure: FastQC with WTS data

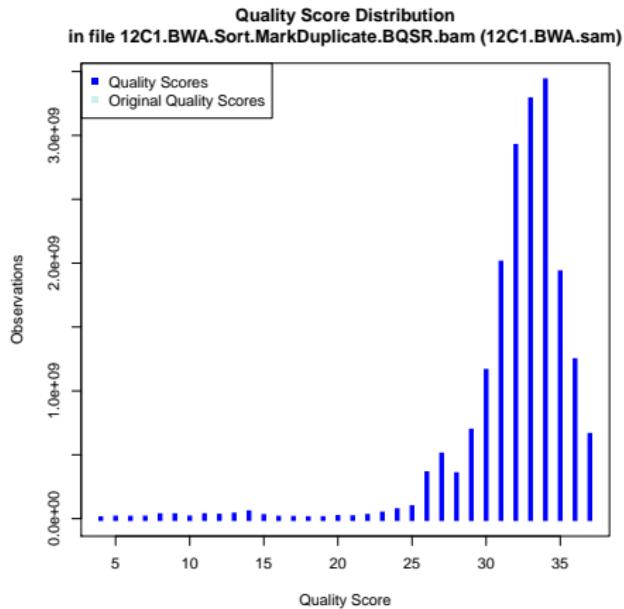
All sample are good to analysis

∴ No sample has more than 5 failures.

## 4. Results

### 4.2. Quality Checks with Picard

# Picard?



**Figure:** Quality Distribution of 12C1 sample

# Quality Distribution Plot

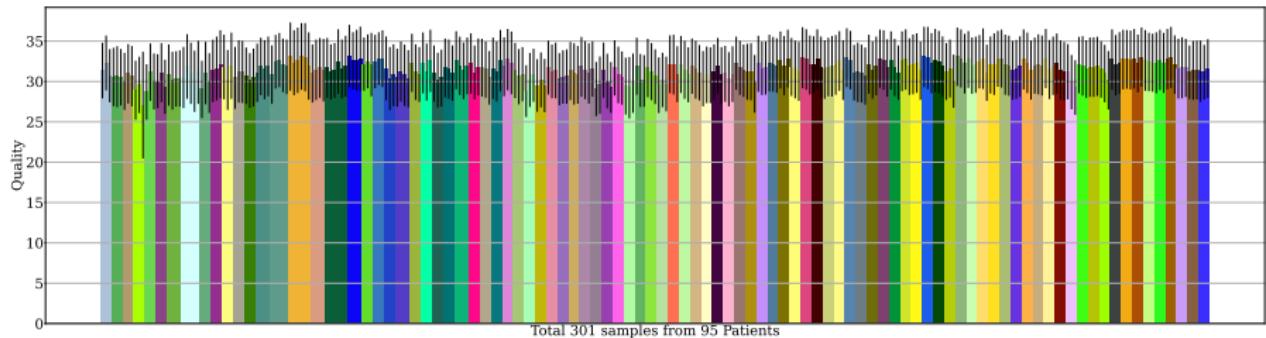


Figure: Quality Distribution by Samples

# Findings in Picard

## 4. Results

### 4.3. Copy Number Variations

# PureCN?

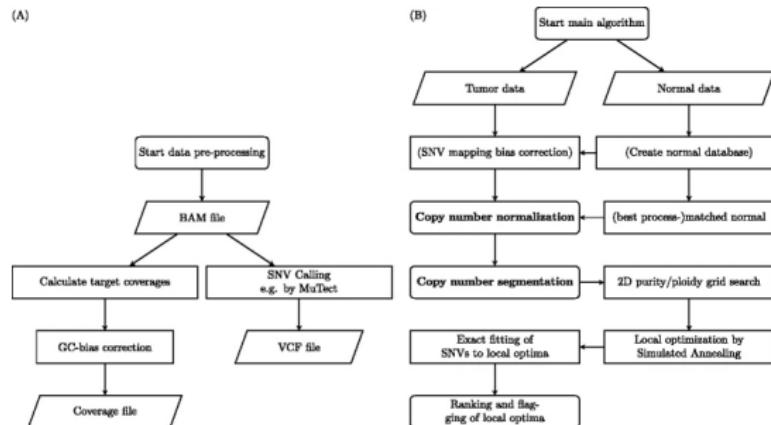
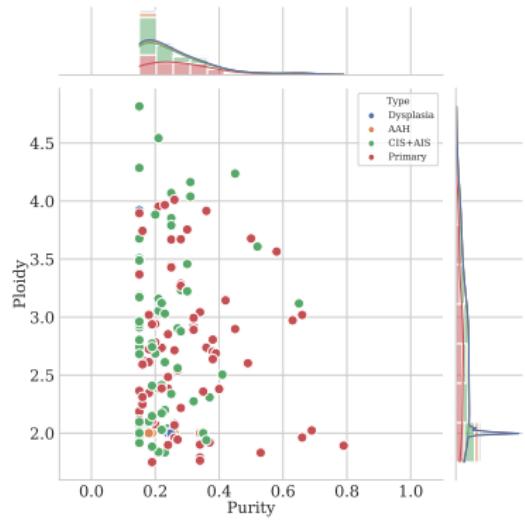
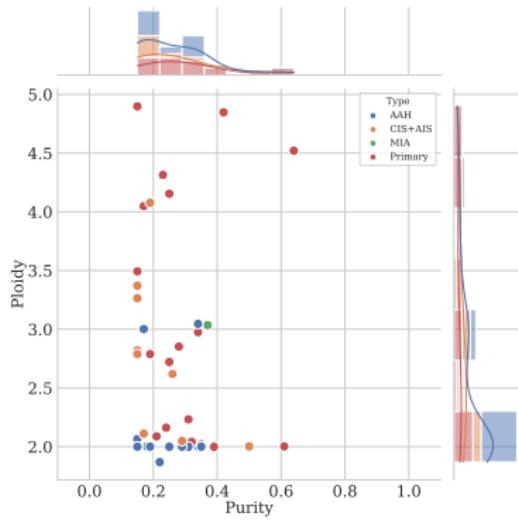


Figure: Flowchart of the PureCN data pre-processing pipeline (Riester et al., 2016)

# Purity & Ploidy on WES



(a) LUSC Samples



(b) LUAD Samples

Figure: Cellularity and Ploidy from PureCN

# LUSC in CNV Plot I

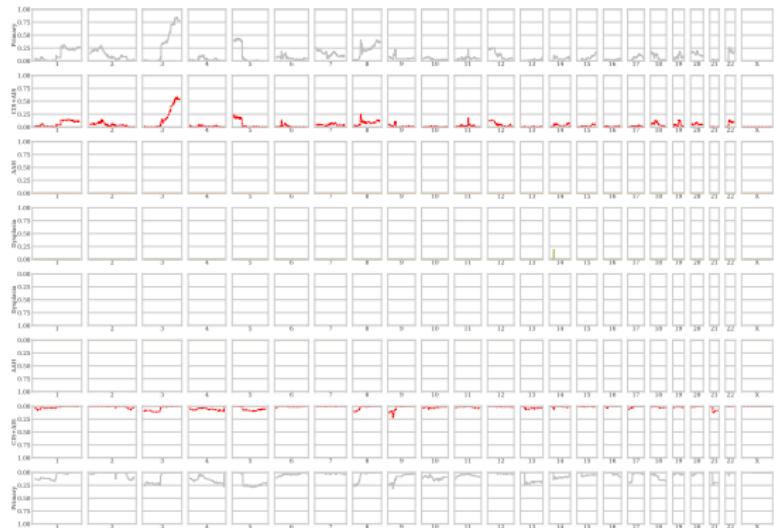


Figure: LUSC in CNV Plot

# LUSC in CNV Plot II



Figure: LUSC in Violin Plots

# LUSC with Recurrence in CNV Plot I



Figure: LUSC with Recurrence in CNV Plot

# LUSC with Recurrence in CNV Plot II

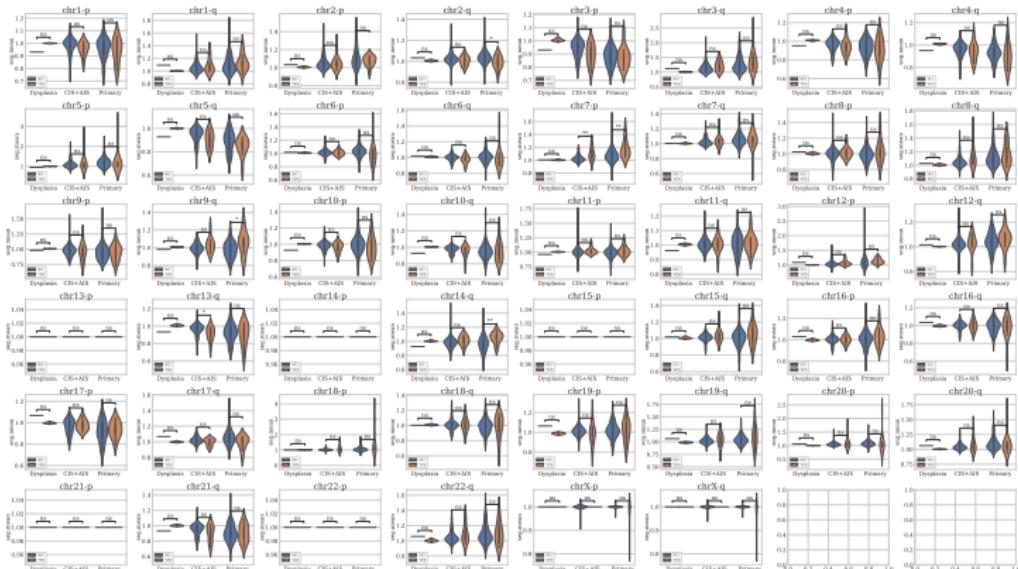


Figure: LUSC with Recurrence in Violin Plots

# LUSC with Smoking in CNV Plot

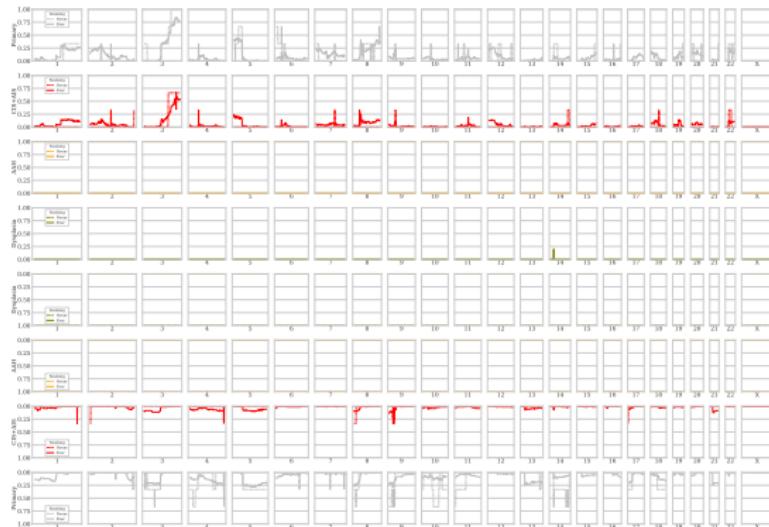


Figure: LUSC with Smoking in CNV Plot

# LUSC with Smoking in CNV Plot II

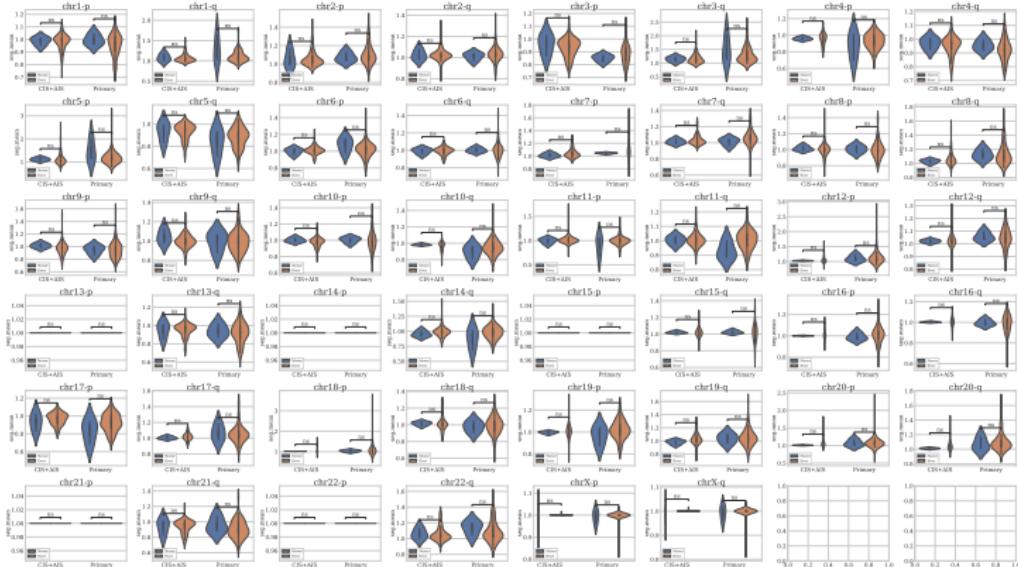


Figure: LUSC with Smoking in Violin Plots

# Findings in PureCN with LUSC I

## Chr2 p-arm gain

- ① Chr2 p-arm gain in Primary.

Table: CGC Tier1 genes in Chr2 p-arm

Gene Symbol (15)	Name
ALK	anaplastic lymphoma kinase (Ki-1)
BCL11A	B-cell CLL/lymphoma 11A
DCTN1	dynactin 1
DNMT3A	DNA (cytosine-5-)-methyltransferase 3 alpha
EML4	echinoderm microtubule associated protein like 4

## Chr2 q-arm loss

- ① Chr2 q-arm loss in Recurrence & Primary.

Table: CGC Tier1 genes in Chr2 q-arm

Gene Symbol (23)	Name
ACKR3	atypical chemokine receptor 3
ACSL3	acyl-CoA synthetase long-chain family member 3
ACVR1	activin A receptor, type I
ACVR2A	activin A receptor type 2A
AFF3	AF4/FMR2 family, member 3

# Findings in PureCN with LUSC III

## Chr3 p-arm loss

- ① Chr3 p-arm loss in Primary.

Table: CGC Tier1 genes in Chr3 p-arm

Gene Symbol (17)	Name
BAP1	BRCA1 associated protein-1 (ubiquitin carboxy-t...
CACNA1D	calcium channel, voltage-dependent, L type, alp...
CTNNB1	catenin (cadherin-associated protein), beta 1
FANCD2	Fanconi anemia, complementation group D2
FHIT	fragile histidine triad gene

# Findings in PureCN with LUSC IV

## Chr3 q-arm gain

- ① Chr3 q-arm gain in Primary.

Table: CGC Tier1 genes in Chr3 q-arm

Gene Symbol (21)	Name
ATR	ATR serine/threonine kinase
BCL6	B-cell CLL/lymphoma 6
CBLB	Cas-Br-M (murine) ecotropic retroviral transfor...
CNBP	CCHC-type zinc finger, nucleic acid binding pro...
EIF4A2	eukaryotic translation initiation factor 4A, is...

# Findings in PureCN with LUSC V

## Chr5 q-arm loss

### ① Chr5 q-arm loss in Primary.

Table: CGC Tier1 genes in Chr5 q-arm

Gene Symbol (15)	Name
AFF4	AF4/FMR2 family, member 4
APC	adenomatous polyposis of the colon gene
ARHGAP26	Rho GTPase activating protein 26
CD74	CD74 molecule, major histocompatibility complex...
EBF1	early B-cell factor 1

# Findings in PureCN with LUSC VI

## Chr7 p-arm gain

- ① Chr7 p-arm gain in Primary.
- ② Chr7 p-arm gain in Recurrence.

Table: CGC Tier1 genes in Chr7 p-arm

Gene Symbol (11)	Name
CARD11	caspase recruitment domain family, member 11
EGFR	epidermal growth factor receptor (erythroblasti...
ETV1	ets variant gene 1
HNRNPA2B1	heterogeneous nuclear ribonucleoprotein A2/B1
HOXA11	homeo box A11

# Findings in PureCN with LUSC VII

## Chr8 q-arm gain

### ① Chr8 q-arm gain in Primary.

Table: CGC Tier1 genes in Chr8 q-arm

Gene Symbol (16)	Name
CHCHD7	coiled-coil-helix-coiled-coil-helix domain cont...
EIF3E	eukaryotic translation initiation factor 3, sub...
EXT1	multiple exostoses type 1 gene
HEY1	hairy/enhancer-of-split related with YRPW motif 1
MYC	v-myc myelocytomatosis viral oncogene homolog (...)

# Findings in PureCN with LUSC VIII

## Chr9 q-arm gain

- Chr9 q-arm gain in Recurrence & Primary.

Table: CGC Tier1 genes in Chr9 q-arm

Gene Symbol (16)	Name
ABL1	v-abl Abelson murine leukemia viral oncogene homolog
BRD3	bromodomain containing 3
CNTRL	centriolin
FANCC	Fanconi anemia, complementation group C
GNAQ	guanine nucleotide binding protein (G protein), alpha Q subunit

# Findings in PureCN with LUSC IX

## Chr14 q-arm gain

- ① Chr14 q-arm gain in Recurrence & Primary.

Table: CGC Tier1 genes in Chr14 q-arm

Gene Symbol (18)	Name
AKT1	v-akt murine thymoma viral oncogene homolog 1
BCL11B	B-cell CLL/lymphoma 11B (CTIP2)
CCNB1IP1	cyclin B1 interacting protein 1, E3 ubiquitin p...
DICER1	dicer 1, ribonuclease type III
FOXA1	forkhead box A1

# Findings in PureCN with LUSC X

## Chr19 p-arm gain

- ① Chr19 p-arm gain in Recurrence & Primary.

Table: CGC Tier1 genes in Chr19 p-arm

Gene Symbol (19)	Name
BRD4	bromodomain containing 4
CALR	calreticulin
CRTC1	CREB regulated transcription coactivator 1
DNAJB1	DnaJ heat shock protein family (Hsp40) member B1
DNM2	dynamin 2

# LUAD in CNV Plot I

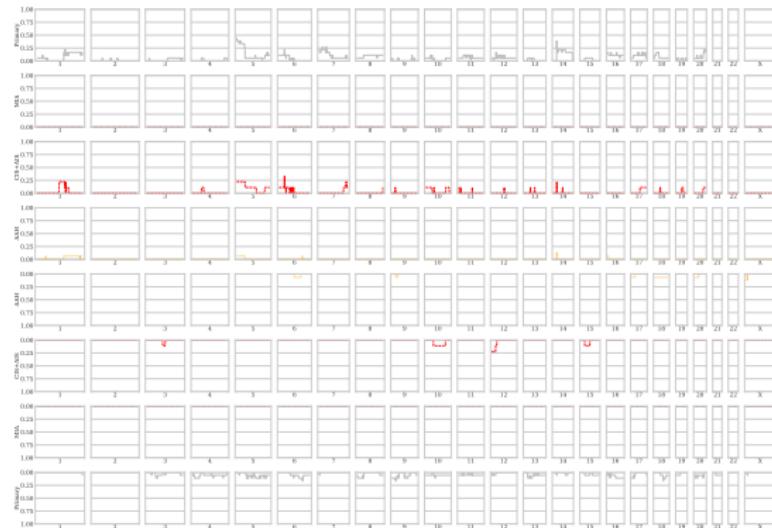


Figure: LUAD in CNV Plot

# LUAD in CNV Plot II

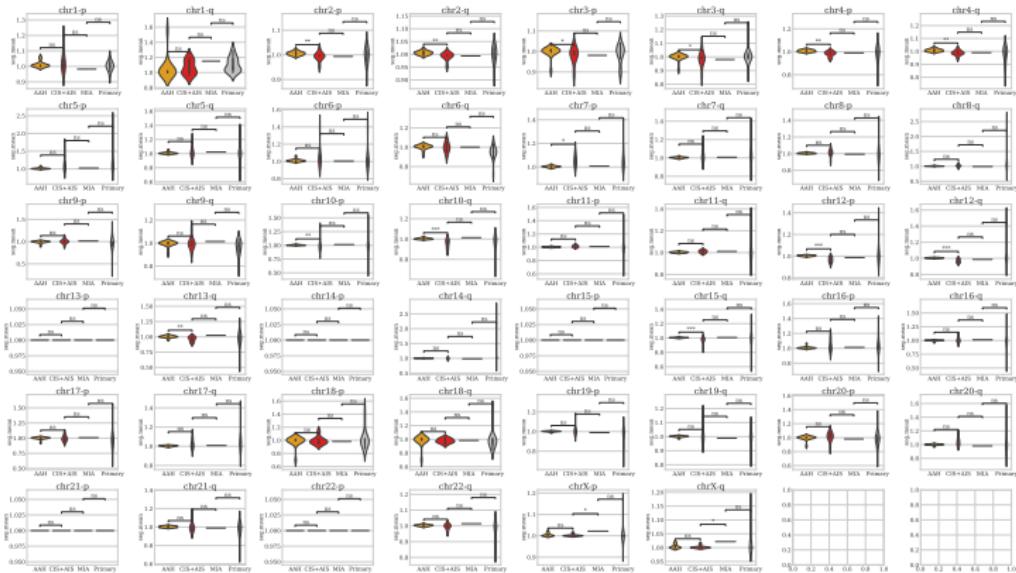


Figure: LUAD in Violin Plots

# LUAD with Recurrence in CNV Plot I

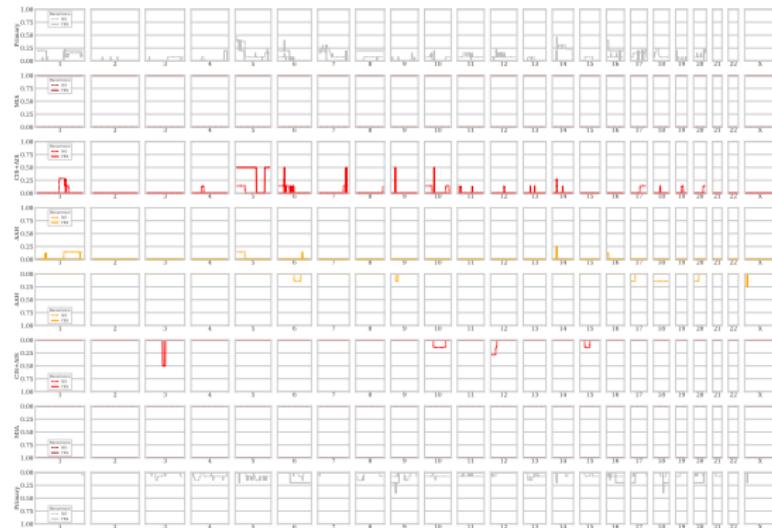


Figure: LUAD with Recurrence in CNV Plot

# LUAD with Recurrence in CNV Plot II



Figure: LUAD with Recurrence in Violin Plots

# LUAD with Smoking in CNV Plot I



Figure: LUAD with Smoking in CNV Plot

# LUAD with Smoking in CNV Plot II

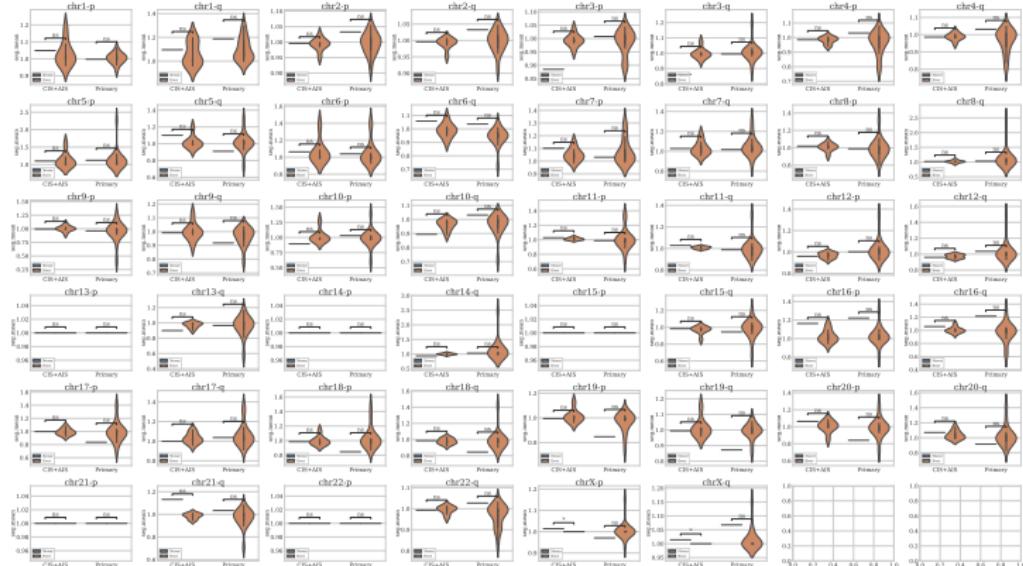


Figure: LUAD with Smoking in Violin Plots

# Findings in PureCN with LUAD I

## Chr1 q-arm gain

- ① Chr1 q-arm gain in Primary.

Table: CGC Tier1 genes in Chr1 q-arm

Gene Symbol (24)	Name
ABL2	c-abl oncogene 2, non-receptor tyrosine kinase
ARNT	aryl hydrocarbon receptor nuclear translocator
BCL9	B-cell CLL/lymphoma 9
CDC73	cell division cycle 73
DDR2	discoidin domain receptor 2

# Findings in PureCN with LUAD II

## Chr4 q-arm gain

- ① Chr4 q-arm gain in Recurrence & Primary.

Table: CGC Tier1 genes in Chr4 q-arm

Gene Symbol (13)	Name
AFF1	AF4/FMR2 family, member 1
FAT1	FAT atypical cadherin 1
FAT4	FAT atypical cadherin 4
FBXW7	F-box and WD-40 domain protein 7 (archipelago homolog)
FIP1L1	FIP1 like 1 ( <i>S. cerevisiae</i> )

# Findings in PureCN with LUAD III

## Chr5 q-arm gain

- ① Chr5 q-arm loss in Non-recurrence & Precancer.

Table: CGC Tier1 genes in Chr5 q-arm

Gene Symbol (15)	Name
AFF4	AF4/FMR2 family, member 4
APC	adenomatous polyposis of the colon gene
ARHGAP26	Rho GTPase activating protein 26
CD74	CD74 molecule, major histocompatibility complex...
EBF1	early B-cell factor 1

# Findings in PureCN with LUAD IV

## Chr6 p-arm gain

- ① Chr6 p-arm gain in Non-recurrence & Precancer.

Table: CGC Tier1 genes in Chr6 p-arm

Gene Symbol (16)	Name
CCND3	cyclin D3
DAXX	death-domain associated protein
DEK	DEK oncogene (DNA binding)
FANCE	Fanconi anemia, complementation group E
HIST1H3B	histone cluster 1, H3b

# Findings in PureCN with LUAD V

## Chr6 q-arm gain

- ① Chr6 q-arm gain in Non-recurrence & Precancer.

Table: CGC Tier1 genes in Chr6 q-arm

Gene Symbol (15)	Name
AFDN	myeloid/lymphoid or mixed-lineage leukemia (tri...)
ARID1B	AT rich interactive domain 1B
ESR1	estrogen receptor 1
EZR	ezrin
FGFR1OP	FGFR1 oncogene partner (FOP)

# Findings in PureCN with LUAD VI

## Chr6 q-arm loss

- Chr6 q-arm loss in Primary.

Table: CGC Tier1 genes in Chr6 q-arm

Gene Symbol (15)	Name
AFDN	myeloid/lymphoid or mixed-lineage leukemia (tri...)
ARID1B	AT rich interactive domain 1B
ESR1	estrogen receptor 1
EZR	ezrin
FGFR1OP	FGFR1 oncogene partner (FOP)

# Findings in PureCN with LUAD VII

## Chr7 q-arm gain

- ① Chr7 q-arm gain in Non-recurrence & Precancer.

Table: CGC Tier1 genes in Chr7 q-arm

Gene Symbol (14)	Name
BRAF	v-raf murine sarcoma viral oncogene homolog B1
CDK6	cyclin-dependent kinase 6
CREB3L2	cAMP responsive element binding protein 3-like 2
CUX1	cut-like homeobox 1
EZH2	enhancer of zeste homolog 2

# Findings in PureCN with LUAD VIII

## Chr12 p-arm gain

- ① Chr12 p-arm loss in Non-recurrence & Primary.

Table: CGC Tier1 genes in Chr12 p-arm

Gene Symbol (10)	Name
CCND2	cyclin D2
CDKN1B	cyclin-dependent kinase inhibitor 1B (p27, Kip1)
CHD4	chromodomain helicase DNA binding protein 4
ERC1	ELKS/RAB6-interacting/CAST family member 1
ETNK1	ethanolamine kinase 1

# Findings in PureCN with LUAD IX

## Chr12 q-arm gain

- ① Chr12 q-arm loss in Non-recurrence & Primary.

Table: CGC Tier1 genes in Chr12 q-arm

Gene Symbol (26)	Name
ARID2	AT rich interactive domain 2
ATF1	activating transcription factor 1
BCL7A	B-cell CLL/lymphoma 7A
BTG1	B-cell translocation gene 1, anti-proliferative
CDK4	cyclin-dependent kinase 4

# Findings in PureCN with LUAD X

## Chr22 q-arm loss

- ① Chr22 q-arm loss in Primary.

Table: CGC Tier1 genes in Chr22 q-arm

Gene Symbol (15)	Name
APOBEC3B	apolipoprotein B mRNA editing enzyme catalytic ...
BCR	breakpoint cluster region
CHEK2	CHK2 checkpoint homolog (S. pombe)
CLTCL1	clathrin, heavy polypeptide-like 1
EP300	300 kd E1A-Binding protein gene

# Findings in PureCN

# Gistic?

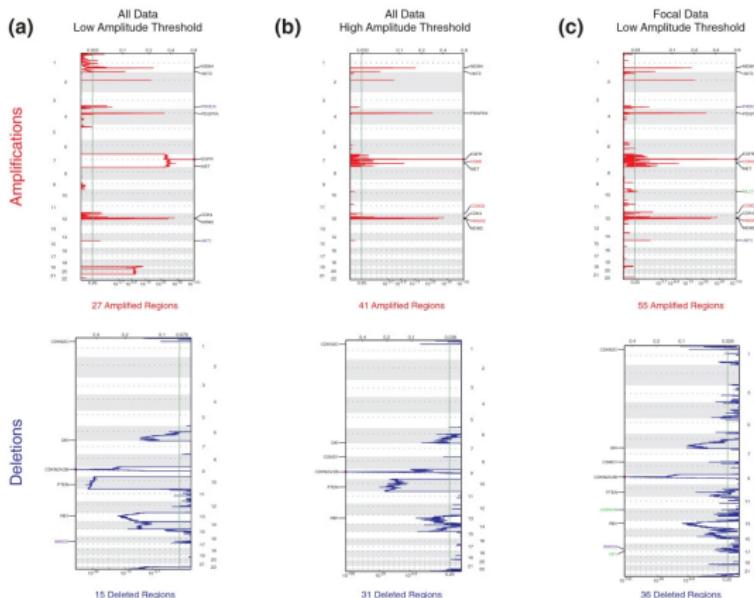


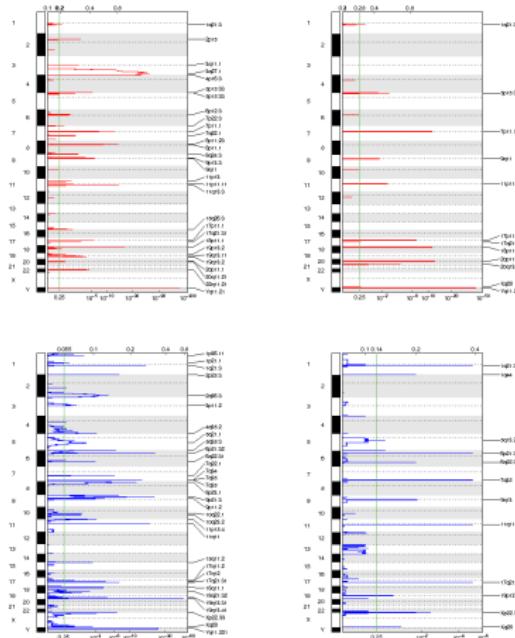
Figure: Effects of arm-level events on GISTIC results (Mermel et al., 2011)

## 4. Results

### 4.3. Copy Number Variations

#### 4.3.1. Gistic by Histology

# Gistic by Histology

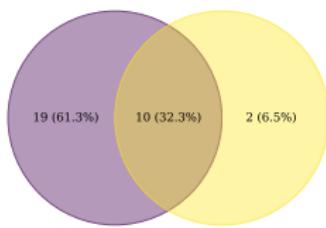


(a) LUSC

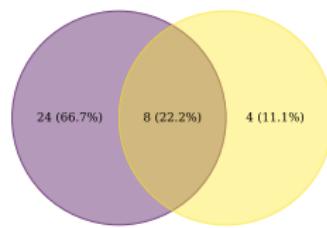
(b) LUAD

Figure: Gistic results by Histology

# Venn Diagram by Histology



(a) Amplification



(b) Deletion

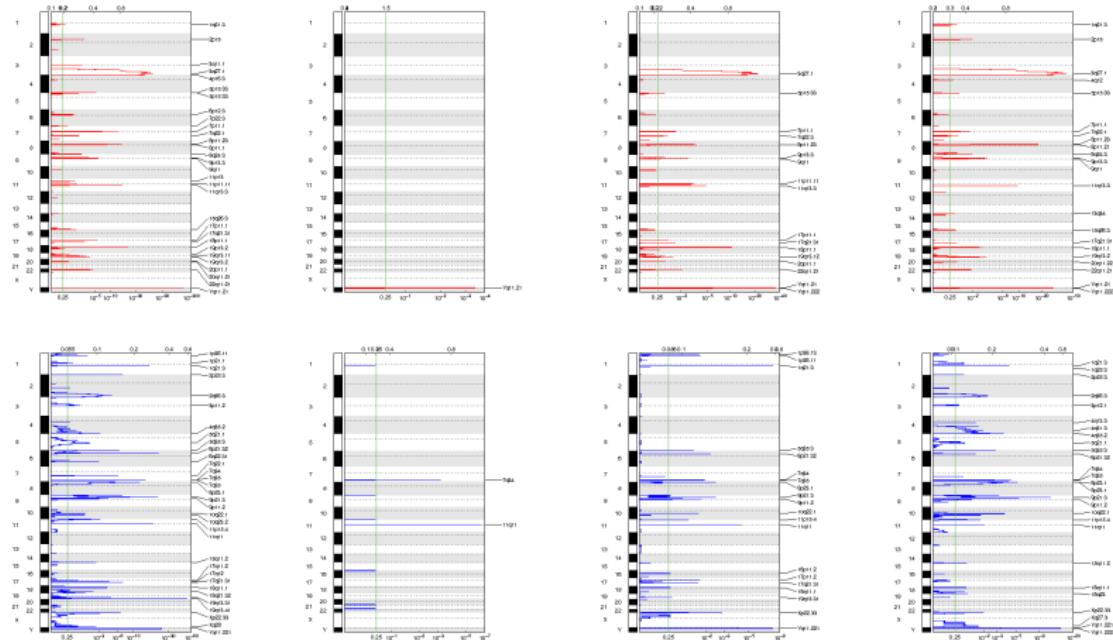
Figure: Venn Diagram among Peaks by Histology

## 4. Results

### 4.3. Copy Number Variations

#### 4.3.2. Gistic by Stage

# Gistic in LUSC



(a) All

(b) Dysplasia

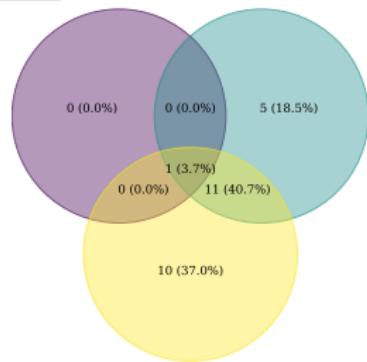
(c) CIS

(d) Primary

Figure: Gistic results in LUSC

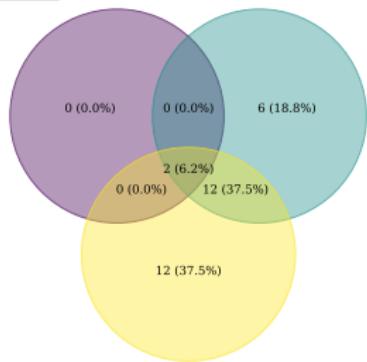
# Venn Diagram in LUSC

Dysplasia  
CIS  
Primary



(a) Amplification

Dysplasia  
CIS  
Primary



(b) Deletion

Figure: Venn Diagram among Peaks in LUSC

# Gistic in LUAD

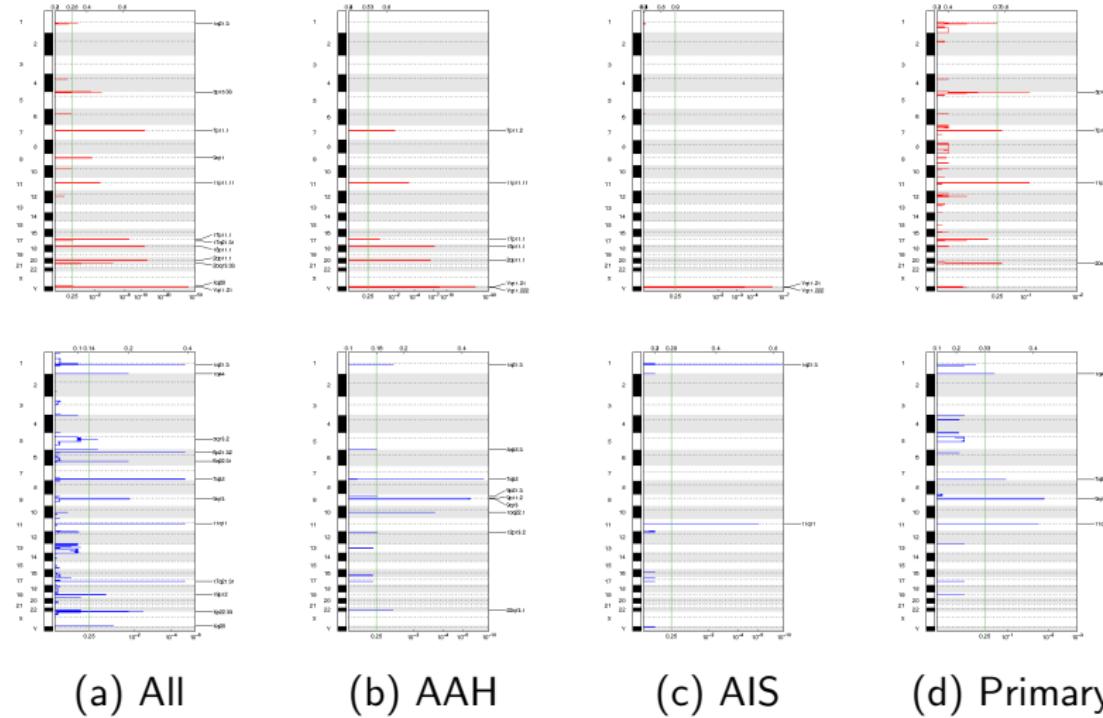
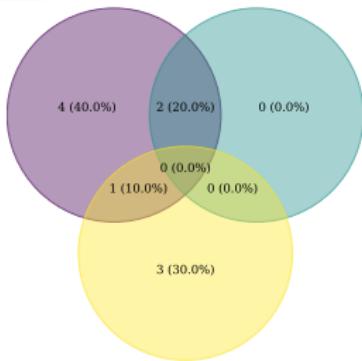
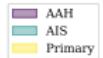
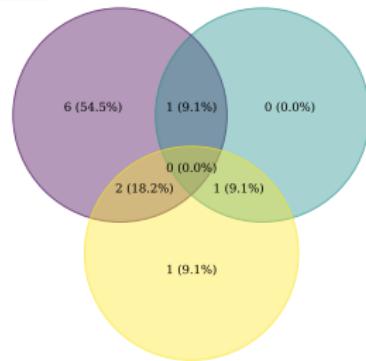


Figure: Gistic results in LUAD

# Venn Diagram in LUAD



(a) Amplification



(b) Deletion

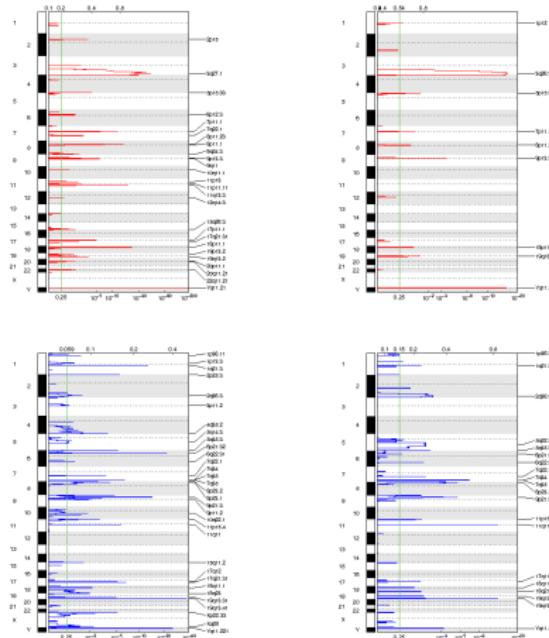
Figure: Venn Diagram among Peaks in LUAD

## 4. Results

### 4.3. Copy Number Variations

#### 4.3.3. Gistic by Recurrence & LUSC

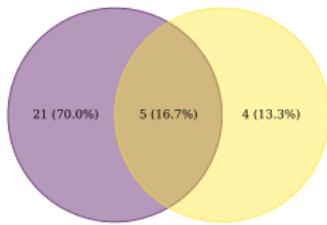
# Gistic by NR vs. R in LUSC



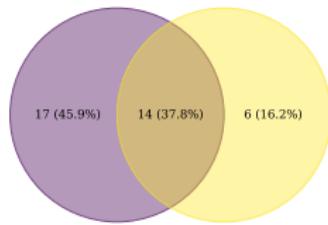
(a) Non-recurrence    (b) Recurrence

Figure: Gistic results by NR vs. R in LUSC

# Venn Diagram by NR vs. R in LUSC



(a) Amplification



(b) Deletion

Figure: Venn Diagram among Peaks by NR vs. R in LUSC

# Gistic in Non-recurrence & LUSC

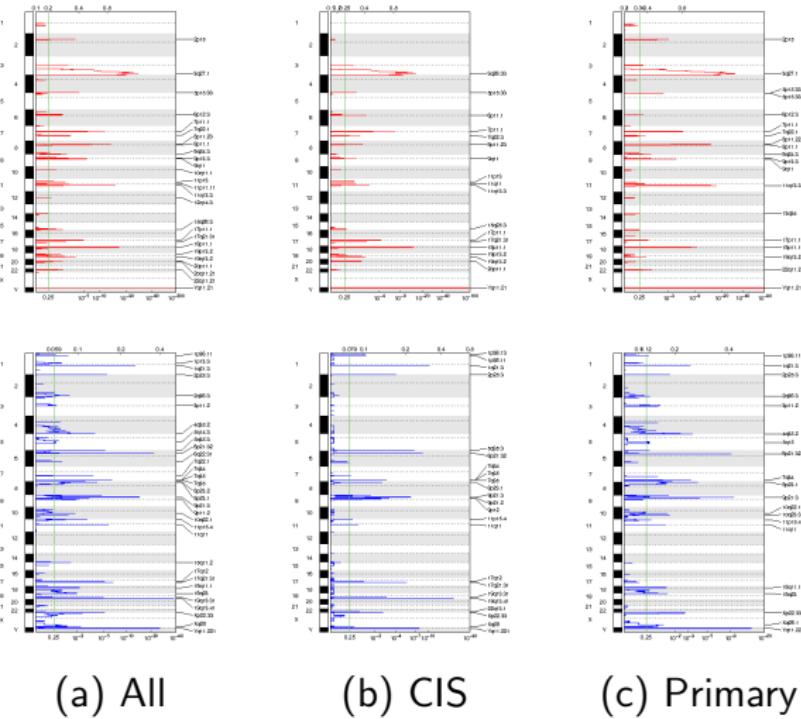
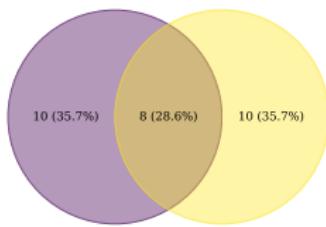
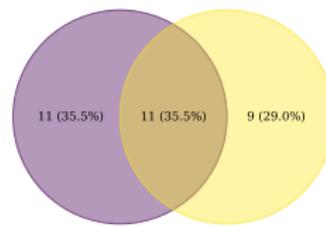


Figure: Gistic result in Non-recurrence & LUSC

# Venn Diagram in Non-recurrence & LUSC



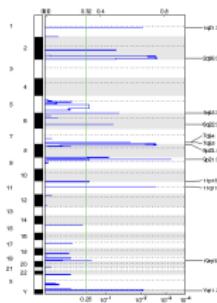
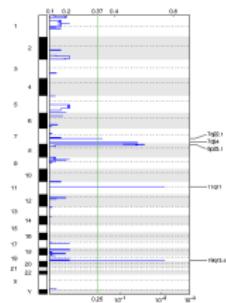
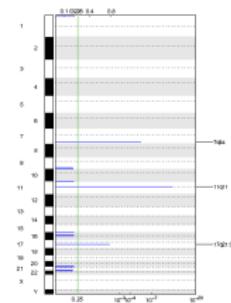
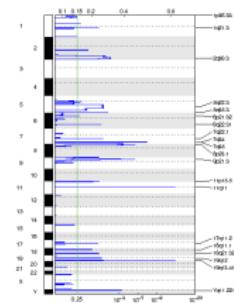
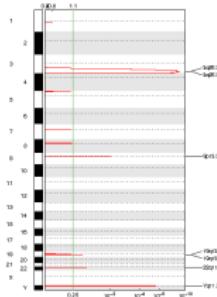
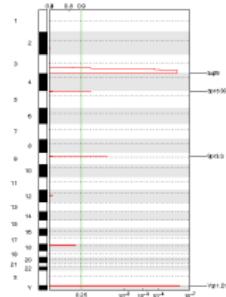
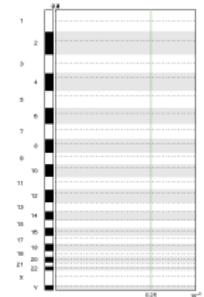
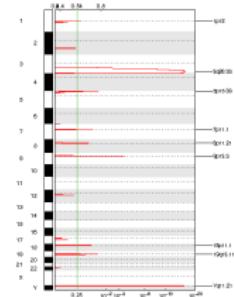
(a) Amplification



(b) Deletion

Figure: Venn Diagram among Peaks in NR & LUSC

# Gistic in Recurrence & LUSC



(a) All

(b) Dysplasia

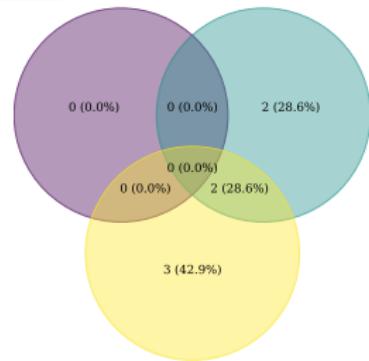
(c) CIS

(d) Primary

Figure: Gistic result in Recurrence & LUSC

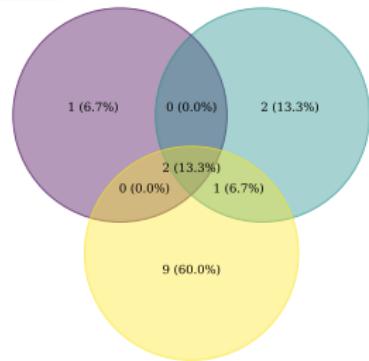
# Venn Diagram in Recurrence & LUSC

Dysplasia  
CIS  
Primary



(a) Amplification

Dysplasia  
CIS  
Primary



(b) Deletion

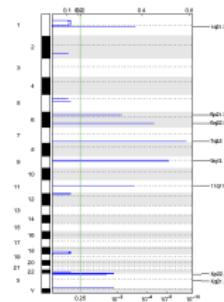
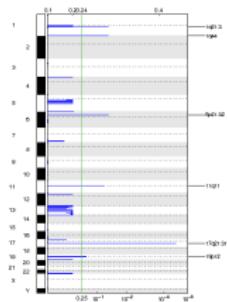
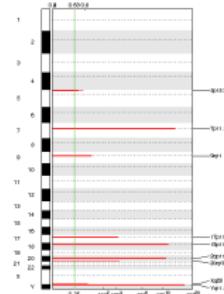
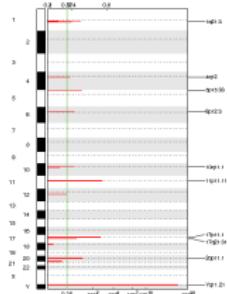
Figure: Venn Diagram among Peaks in R & LUSC

## 4. Results

### 4.3. Copy Number Variations

#### 4.3.4. Gistic by Recurrence & LUAD

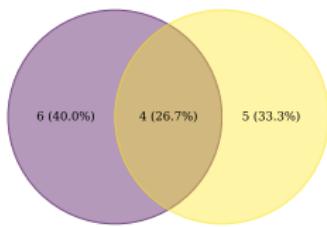
# Gistic by NR vs. R in LUAD



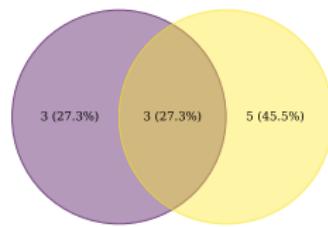
(a) Non-recurrence    (b) Recurrence

Figure: Gistic result by NR vs. R in LUAD

# Venn Diagram by NR vs. R in LUAD



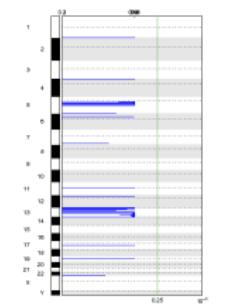
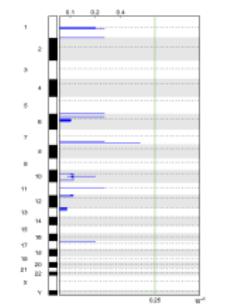
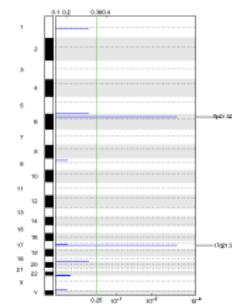
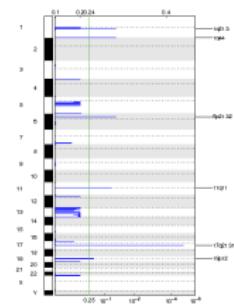
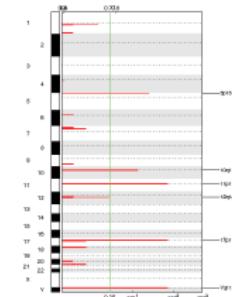
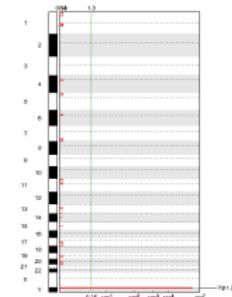
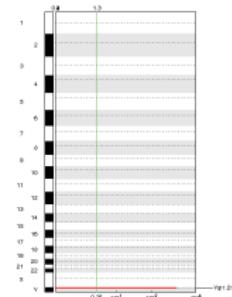
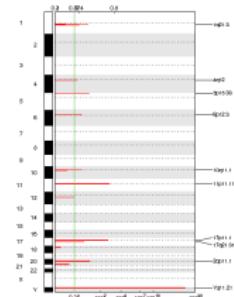
(a) Amplification



(b) Deletion

Figure: Venn Diagram among Peaks by NR vs. R in LUAD

# Gistic by Non-recurrence in LUAD



(a) All

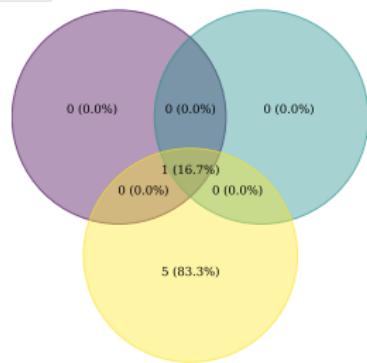
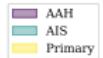
(b) AAH

(c) AIS

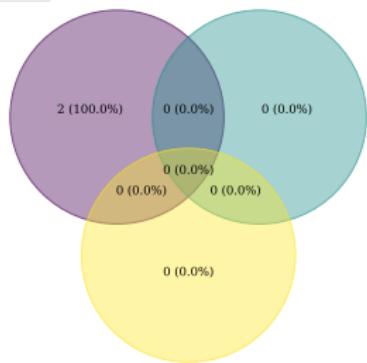
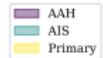
(d) Primary

Figure: Gistic result in Non-recurrence & LUAD

# Venn Diagram in Non-recurrence & LUAD



(a) Amplification



(b) Deletion

Figure: Venn Diagram among Peaks in NR & LUAD

# Gistic by Recurrence in LUAD

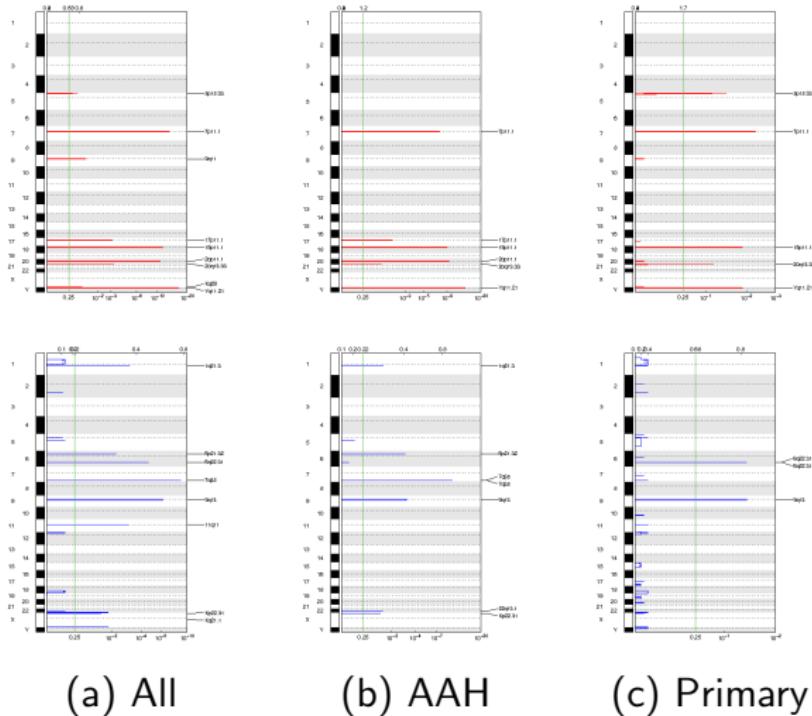
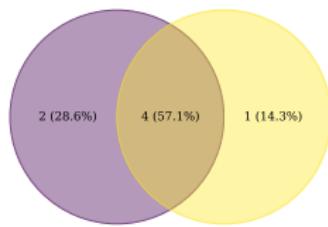
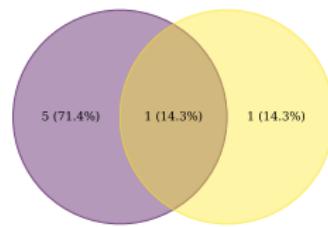


Figure: Gistic result in Recurrence & LUAD

# Venn Diagram in Recurrence & LUAD



(a) Amplification



(b) Deletion

Figure: Venn Diagram among Peaks in R & LUAD

## 4. Results

### 4.3. Copy Number Variations

#### 4.3.5. Gistic by Smoking history & LUSC

# Gistic by Smoking history in LUSC

# Gistic in Never smoker in LUSC

# Gistic in Ex-smoker in LUSC

# Gistic in Current smoker in LUSC

## 4. Results

### 4.3. Copy Number Variations

#### 4.3.6. Gistic by Smoking history & LUAD

# Gistic by Smoking history in LUAD

# Gistic in Never smoker in LUAD

# Gistic in Ex-smoker in LUAD

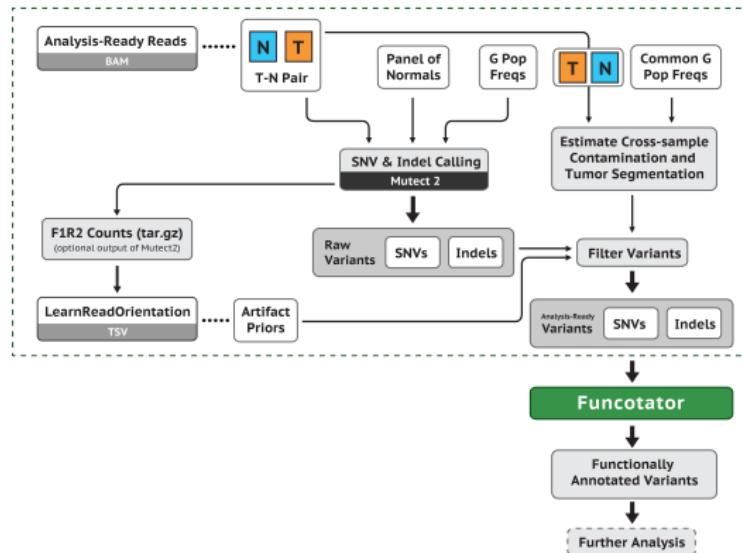
# Gistic in Current smoker in LUAD

# Findings in Gistic

## 4. Results

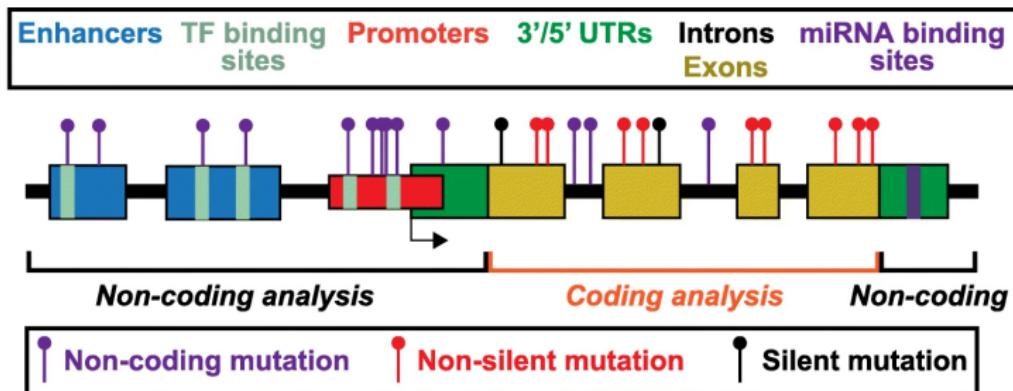
### 4.4. Single Nucleotide Variations Analysis

# Mutect2?



**Figure:** Somatic short variant discovery workflow (Van der Auwera et al., 2013; DePristo et al., 2011)

# MutEnricher?



## Analysis summary:

### Inputs:

- Somatic mutations
- Features of interest:
  - Coding genes
  - Non-coding regions
- Genomic covariates (optional)

### Analyses:

- Background calculations:
  - global, local, or covariate clustered
- Mutation enrichments:
  - coding/non-coding modules

### Outputs:

- Gene or non-coding region enrichments:
  - Overall genes/regions
  - Hotspots
  - Combined

**Figure:** Schematic representation of MunEnricher's analysis procedures (Soltis et al., 2020)

# CoMut?

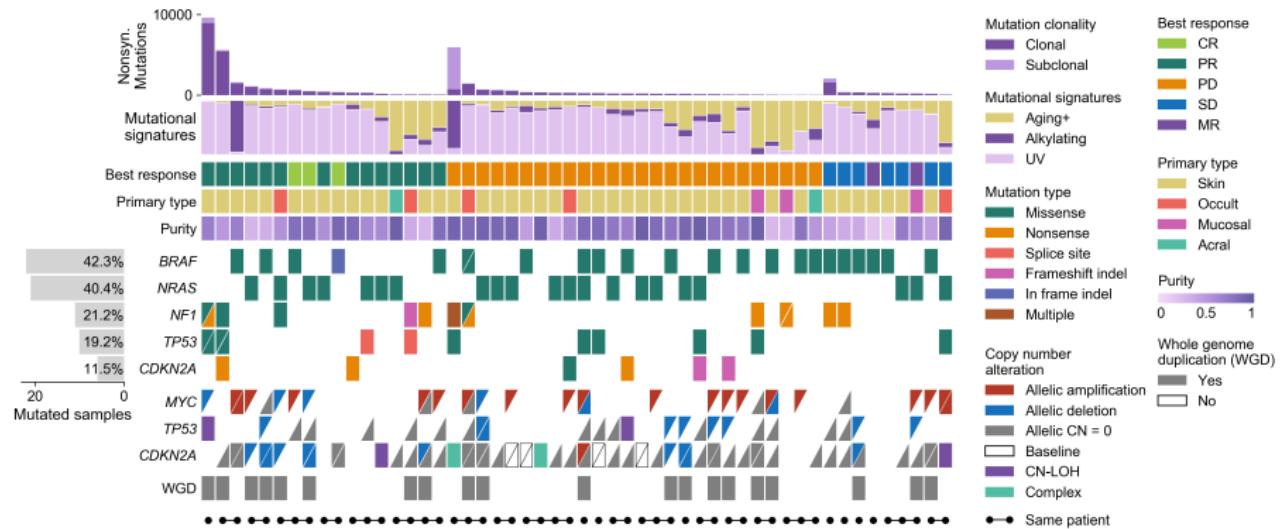


Figure: A comutation plot generated with CoMut (Crowdis et al., 2020)

# Driver Gene Selection Strategy

COSMIC Cancer Gene Census (Tate John et al., 2018)

Gene  $\in$  CGC Tier 1 set

Fisher FDR

Fisher FDR  $< 0.05$

Fisher P-value

Fisher P-value  $< 0.05$

Gene P-value

Gene P-value  $< 0.05$

# Somatic Variant in LUSC

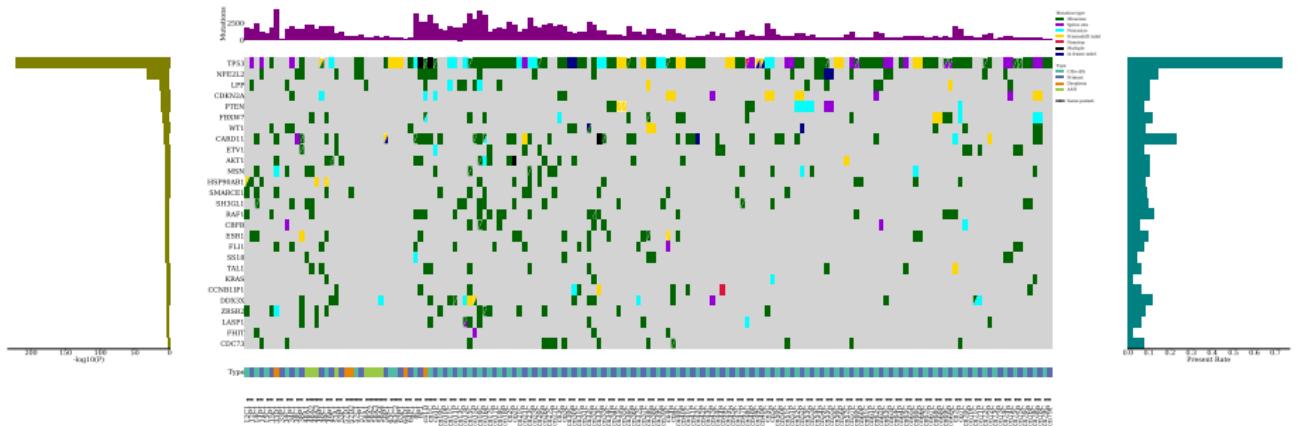


Figure: CoMut Plot with LUSC Patients

# Somatic Variant in LUSC with Recurrence

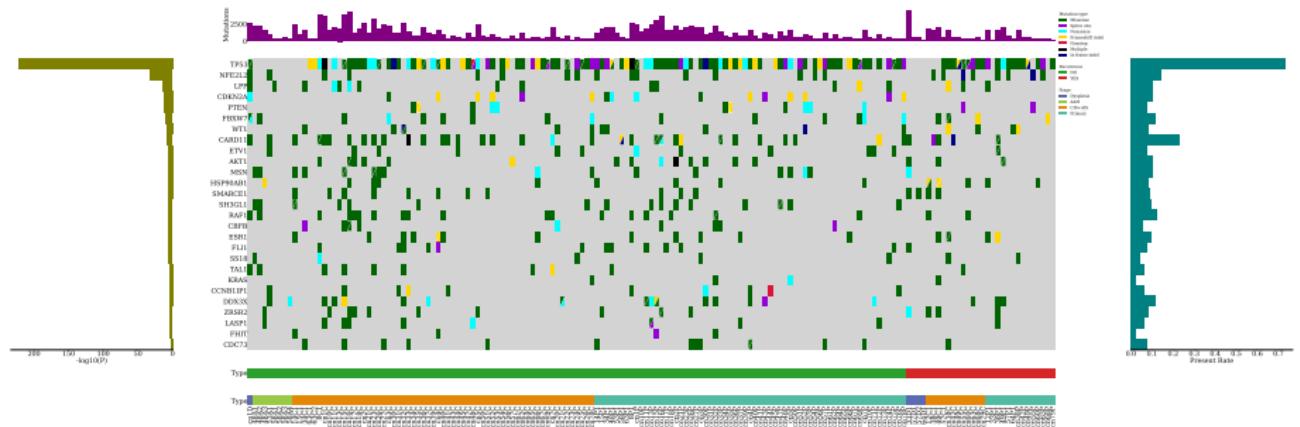


Figure: CoMut Plot in LUSC Patients with Recurrence

# Somatic Variant in LUAD

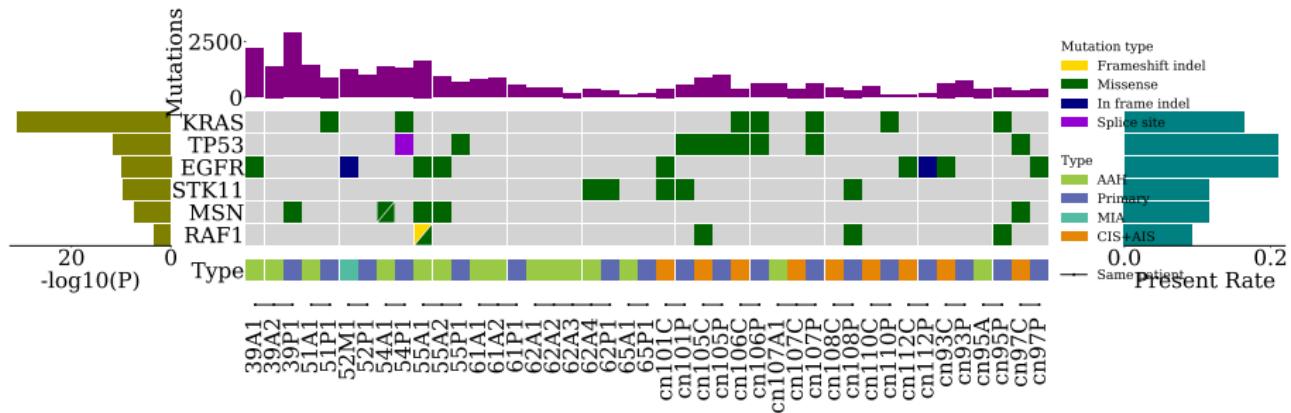


Figure: CoMut Plot with LUAD Patients

# Somatic Variant in LUAD with Recurrence

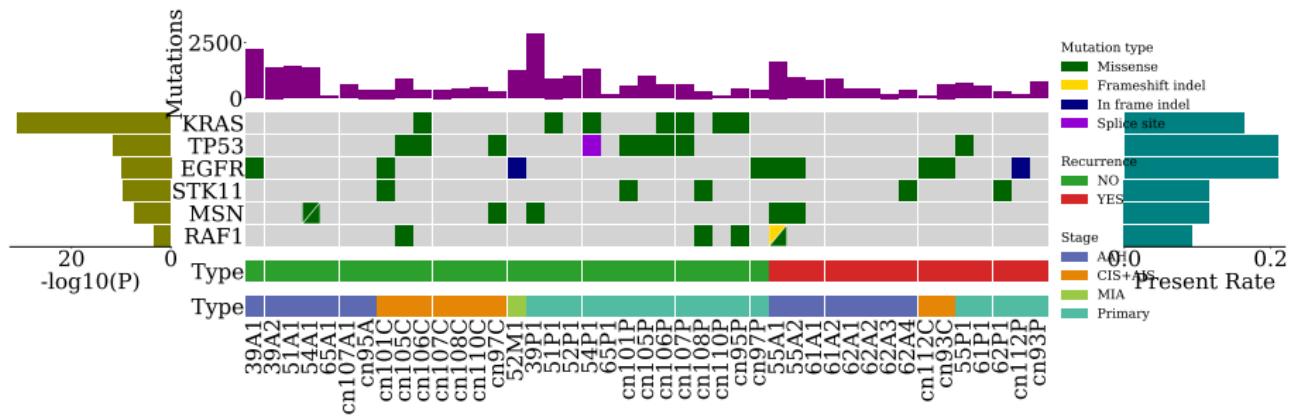


Figure: CoMut Plot in LUAD Patients with Recurrence

# Findings in SNVs Analysis

## 4. Results

### 4.5. VAF Analysis

# VAF?

- Variant allele frequency
- VAF = Alternative allele read count/Total read count
- To find tumor evolution

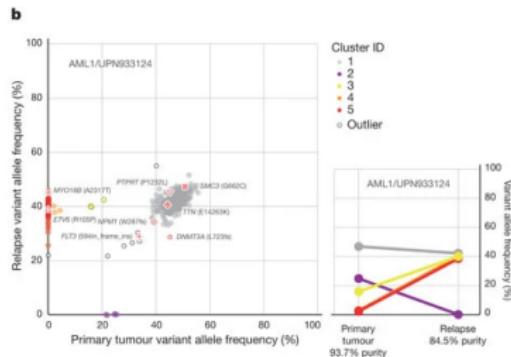
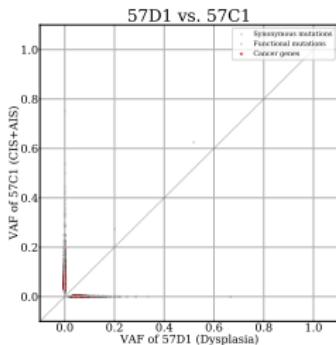
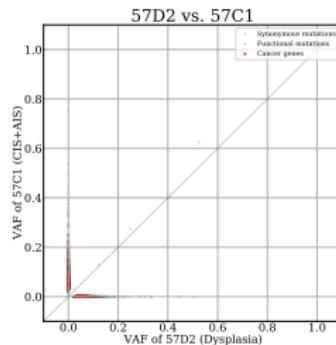


Figure: VAF distribution of validated mutations (L. Ding et al., 2012)

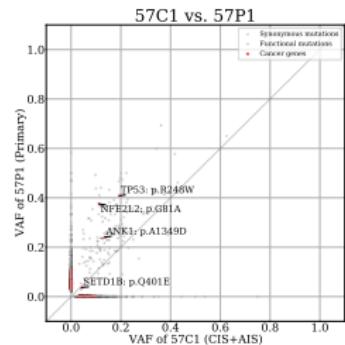
# VAF Plots



(a) Dysplasia + CIS



(b) Dysplasia + CIS



(c) CIS + Primary

Figure: VAF plots in patient #57

# PyClone?

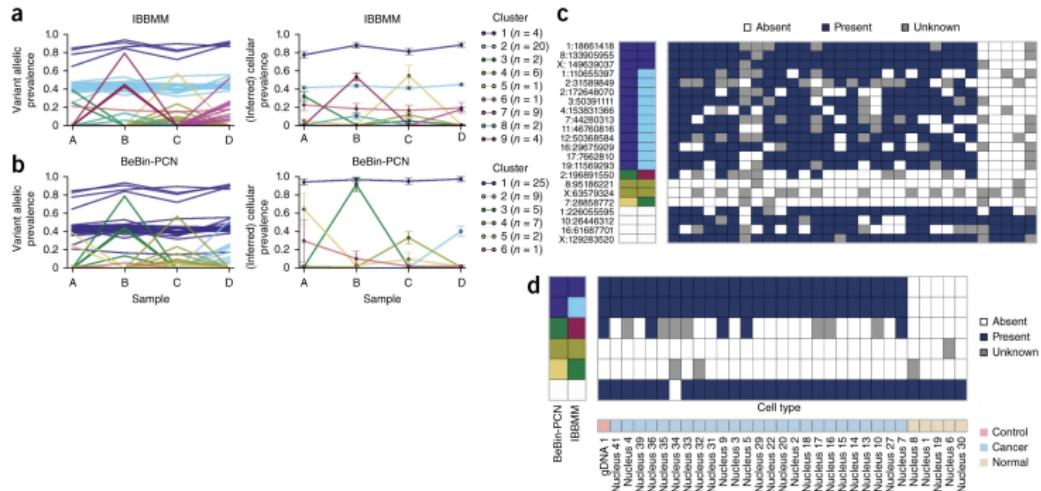
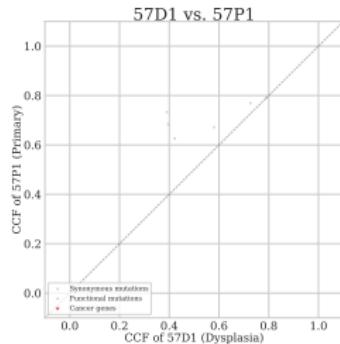
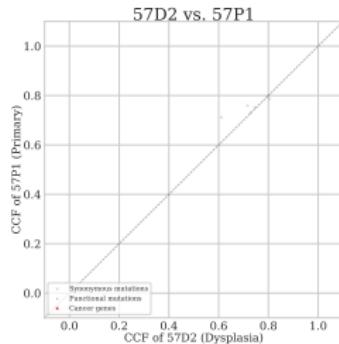


Figure: Analysis of multiple samples by PyClone (Roth et al., 2014)

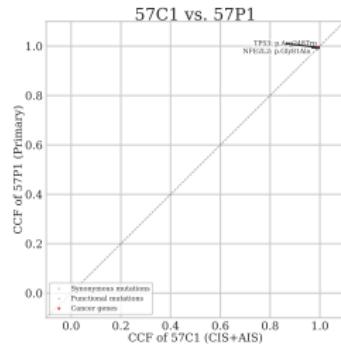
# PyClone Plots I



(a) 57D1



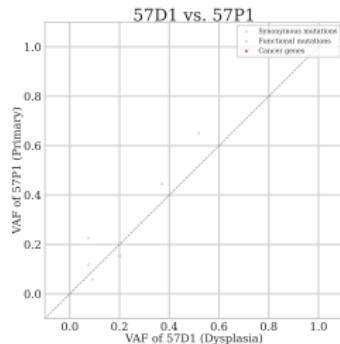
(b) 57D2



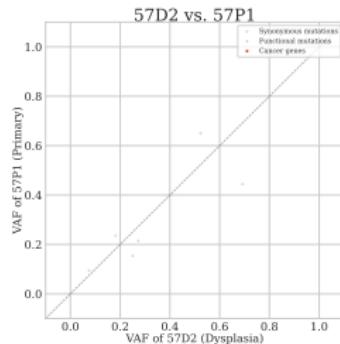
(c) 57C1

Figure: CCF plot in patient #57

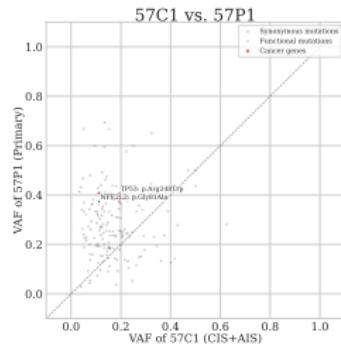
# PyClone Plots II



(a) 57D1



(b) 57D2



(c) 57C1

Figure: VAF plot in patient #57

# Findings in VAF Analysis

## 4. Results

### 4.6. Tumor Evolution Trajectories Analysis

# Mobster?

# Findings in Tumor Evolution Trajectories Analysis

## 4. Results

### 4.7. Bulk Cell Deconvolution

# BisqueRNA?

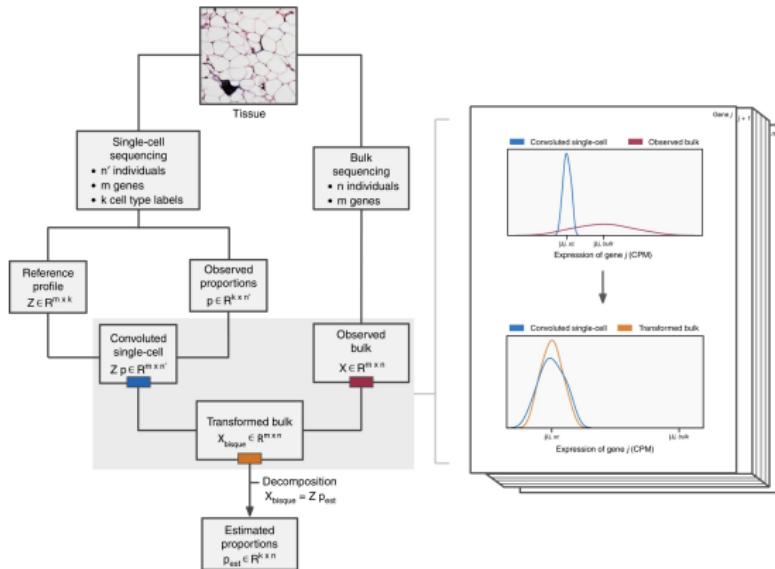


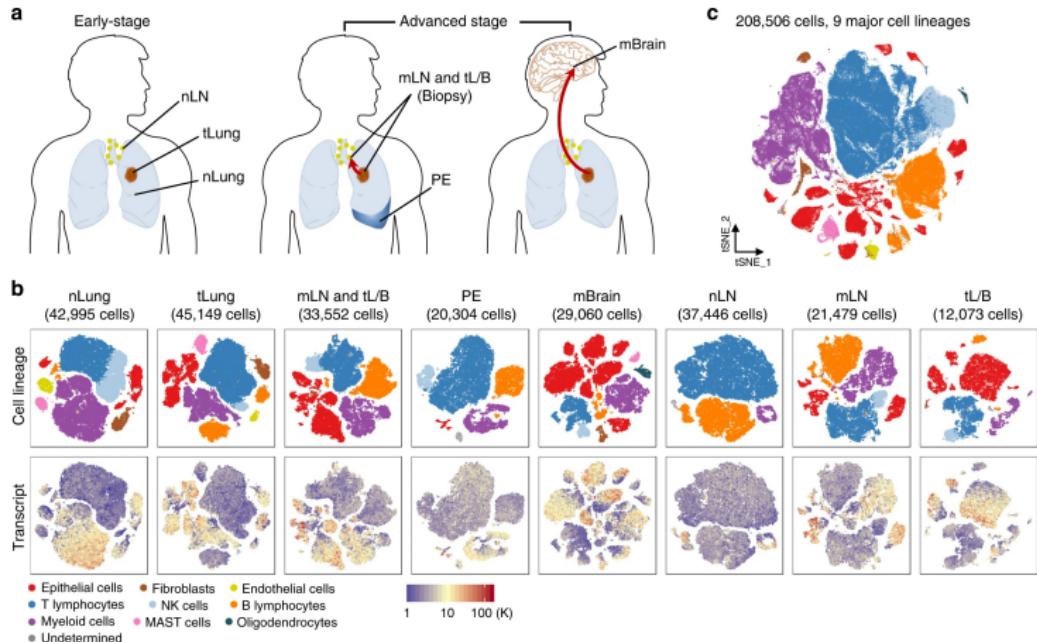
Figure: Workflow for BisqueRNA (Jew et al., 2020)

## 4. Results

### 4.7. Bulk Cell Deconvolution

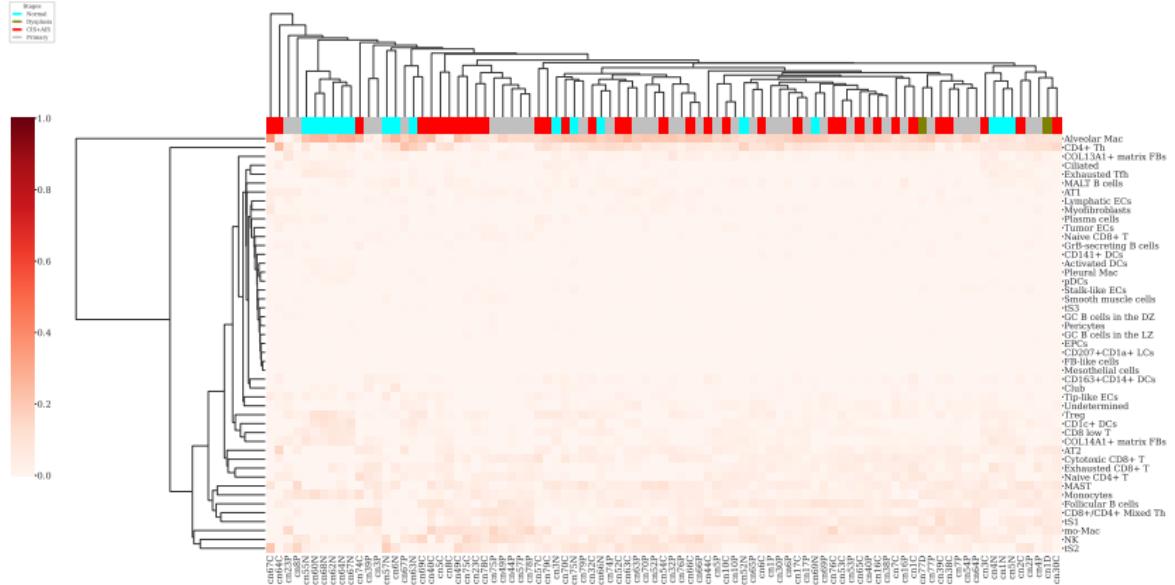
#### 4.7.1. Reference by N. Kim et al. (2020)

# Reference Single-cell Data

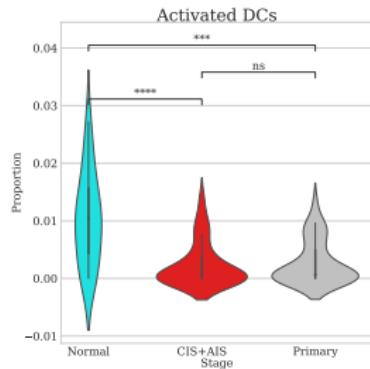


**Figure:** Comprehensive dissection and clustering of 208,506 single cells from LUAD patients (N. Kim et al., 2020)

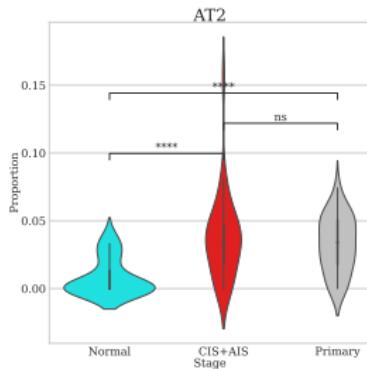
# Cluster Plot in LUSC



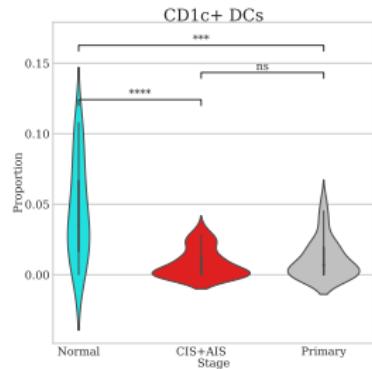
# Violin Plots in LUSC I



(a) Activated DCs



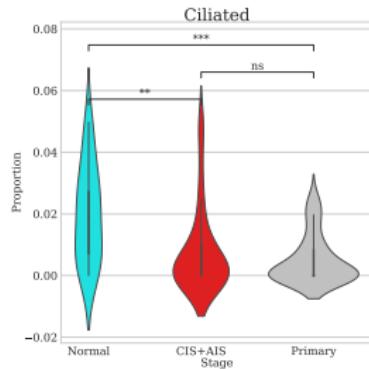
(b) Alveolar type II



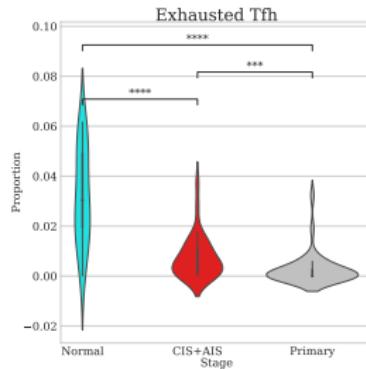
(c) Langerhans cells

Figure: Violin Plots in LUSC

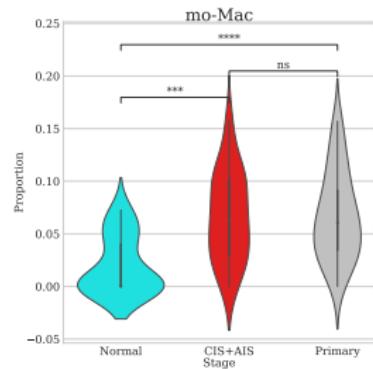
# Violin Plots in LUSC II



(d) Ciliated cells



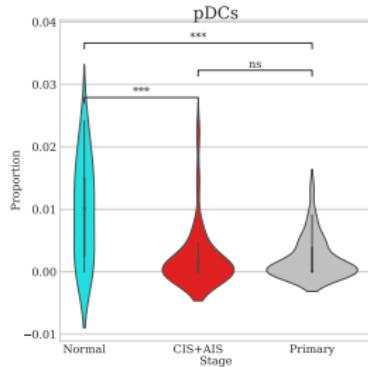
(e) Exhausted T follicular helper



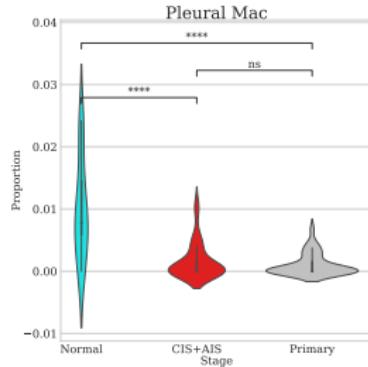
(f) Mo & Mac

Figure: Violin Plots in LUSC

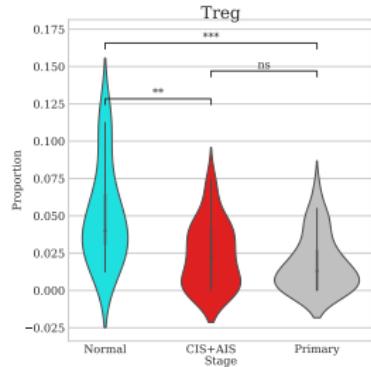
# Violin Plots in LUSC III



(g) Plasmacytoid DCs



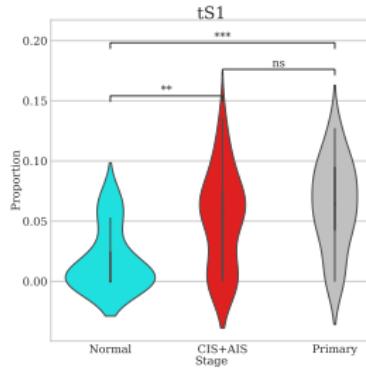
(h) Pleural Mac



(i) Regulatory T cells

Figure: Violin Plots in LUSC

# Violin Plots in LUSC IV



(j) Transcriptional states 1

Figure: Violin Plots in LUSC

## Activated DCs

- ① Activated DCs have higher proportion in Normal samples.
- ② DCs are central regulators of adaptive immune response, e.g. anti-tumoral responses .
- ③ DCs establish a rare immune cell population in tumors .

## Alveolar type II

- ① Alveolar type II have lower proportion in Normal samples.
- ② Alveolar type II proliferate to restore epithelium, and participate in innate immune response (Mason, 2006).
- ③ Capability of initiating lung cancer development (C. Lin et al., 2012).

# Findings in Bulk Cell Deconvolution with LUSC II

## CD1c+ DCs (Langerhans cells; LCs)

- ① LCs have higher proportion in Normal samples.
- ② LCs impact on pathology by inducing tolerance or mediating inflammation (Deckers, Hammad, & Hoste, 2018)
- ③ LCs facilitate DNA damage and squamous cell carcinoma (Modi et al., 2012)

## Ciliated cells

- ① Ciliated cells have higher proportion in Normal samples.
- ② A terminally differentiated population in lung epithelial cells (Rawlins & Hogan, 2008).
- ③ Generated under homeostatic condition or response to epithelial injury (Sutherland et al., 2011).

# Findings in Bulk Cell Deconvolution with LUSC III

## Exhausted T follicular helper cells (Tfh)

- ① Exhausted Tfh is gradually decreased along cancer worsen.
- ② Tfh cell response is critical for viral infection (Greczmiel et al., 2017; Poonia, Ayithan, Nandi, Masur, & Kottilil, 2018a).
- ③ Down-regulated Tfh exhaustion correlate with compromise CD8 T-cell immunity (Poonia, Ayithan, Nandi, Masur, & Kottilil, 2018b)

## Monocyte & Macrophage

- ① Monocyte & Macrophage have lower proportion in Normal samples.
- ② Monocyte is a regulator of tumor development & progression (Olingy, Dinh, & Hedrick, 2019).
- ③ Macrophage is a regulator of link between inflammation & cancer (Sica, Allavena, & Mantovani, 2008).

## Plasmacytoid DCs (pDCs)

- ① pDCs have higher proportion in Normal samples.
- ② pDCs bring capacities of innate & adaptive immunity (Vermi, Soncini, Melocchi, Sozzani, & Facchetti, 2011).
- ③ Infiltrated pDCs in neoplasms ⇒ Poor prognosis (Pinto, Rega, Crother, & Sorrentino, 2012).

## Pleural Macrophages

- ① Pleural macrophages have higher proportion in Normal samples.
- ② Neutrophil recruitment in pleural inflammation (Cailhier et al., 2006).

# Findings in Bulk Cell Deconvolution with LUSC V

## Regulatory T cells (Tregs)

- ① Tregs have higher proportion in Normal samples.
- ② Elevation of Tregs ↑ in solid tumors & hematologic malignancies (Beyer & Schultze, 2006).
- ③ Increasing Tregs ↑ along metastatic stage in NSCLC (Erfani et al., 2012) ??.

## Tumor cell states 1 (tS1)

- ① tS1 have lower proportion in Normal samples.
- ② Represent a de-regulation of normal differentiation programs (N. Kim et al., 2020).

# Cluster Plot in LUAD

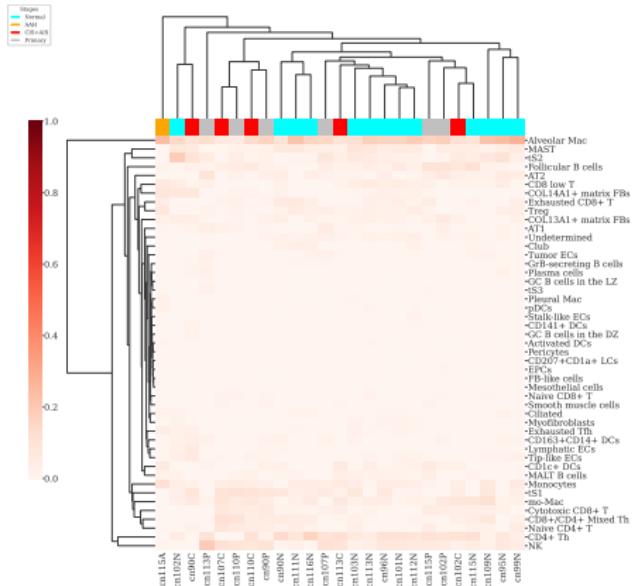
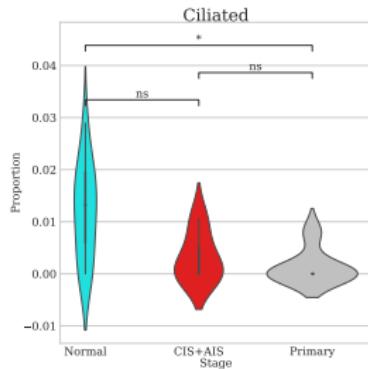
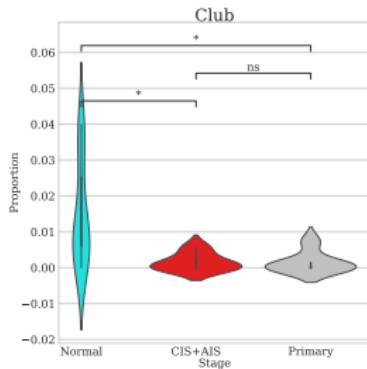


Figure: Cluster Plot in LUAD

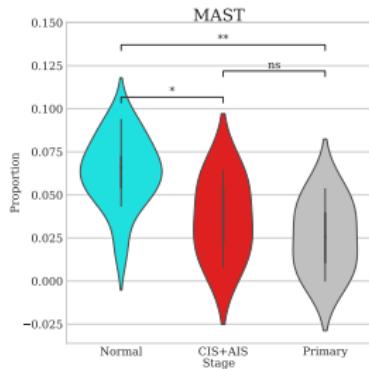
# Violin Plots in LUAD I



(a) Ciliated cells



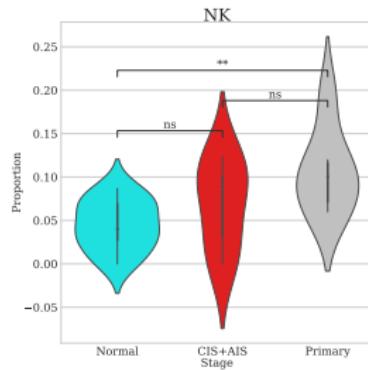
(b) Club Cell



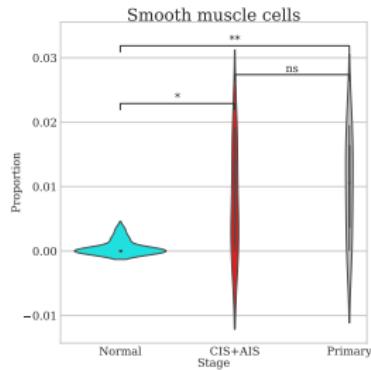
(c) Mast cell

Figure: Violin Plots in LUAD

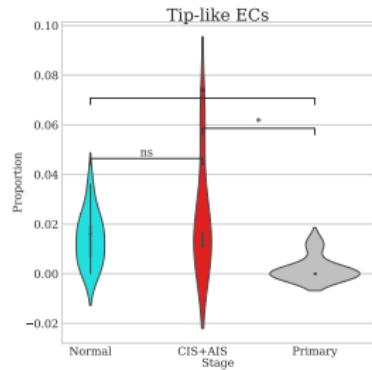
# Violin Plots in LUAD II



(d) NK cells



(e) Smooth muscle cells



(f) Tip-like ECs

Figure: Violin Plots in LUAD

## Ciliated cells

- ① Ciliated cells have higher proportion in Normal than Primary samples.
- ② A terminally differentiated population in lung epithelial cells (Rawlins & Hogan, 2008).
- ③ Generated under homeostatic condition or response to epithelial injury (Sutherland et al., 2011).

# Findings in Bulk Cell Deconvolution with LUAD II

## Club cells

- ① Club cells have higher proportion in Normal than Primary samples.
- ② Club cells form LUAD in adult mice (Spella et al., 2019).
- ③ Club cells in smoking-associated LUAD (Behrend, Giotopoulou, Spella, & Stathopoulos, 2021).
- ④ Increasing club cells ⇒ Good indicator of advanced bronchopulmonary dysplasia (Rokicki, Rokicki, Wojtacha, & Dżelijjli, 2016).

## Mast cells

- ① Mast cells have higher proportion in Normal than Primary samples.
- ② Mast cells activated by lung cancer-derived extracellular vesicles (Xiao et al., 2019).
- ③ Mast cell promote ↑ tumor metastasis (Salamon, Mekori, & Shefler, 2020).

## Natural Killer cells (NK cells)

- ① NK cells have higher proportion in Primary than Normal samples.
- ② NK cells play a major role in innate immune system (Shin et al., 2020a).
- ③ NK cells can induce immune response against tumor cells (Shin et al., 2020b).
- ④ NK cells may induce tumor regression in lung cancer (Aktaş et al., 2018) ??.

# Findings in Bulk Cell Deconvolution with LUAD IV

## Smooth muscle cells

- ① Smooth muscle cells have higher proportion in Primary than Normal samples.
- ② Hypoxia is a characteristic feature of solid tumors (Brahimi-Horn, Chiche, & Pouysségur, 2007; Vaupel & Mayer, 2007).
- ③ ∴ Smooth muscle cells pathway is up-regulated in cancer (Kyotani, Takasawa, & Yoshizumi, 2019; T.-T. Zhu et al., 2019).

## Tip-like endothelial cells (ECs)

- ① Tip-like ECs have lower proportion in Primary than Normal samples.
- ② Tip-like ECs were determined into migratory & basement-membrane remodeling phenotypes (Goveia et al., 2020).
- ③ Tip-like ECs replaced with immature ones in NSCLC (E. Y. Kim et al., 2022).

## 4. Results

### 4.7. Bulk Cell Deconvolution

#### 4.7.2. Reference by Gueguen et al. (2021)

# Reference Single-cell Data

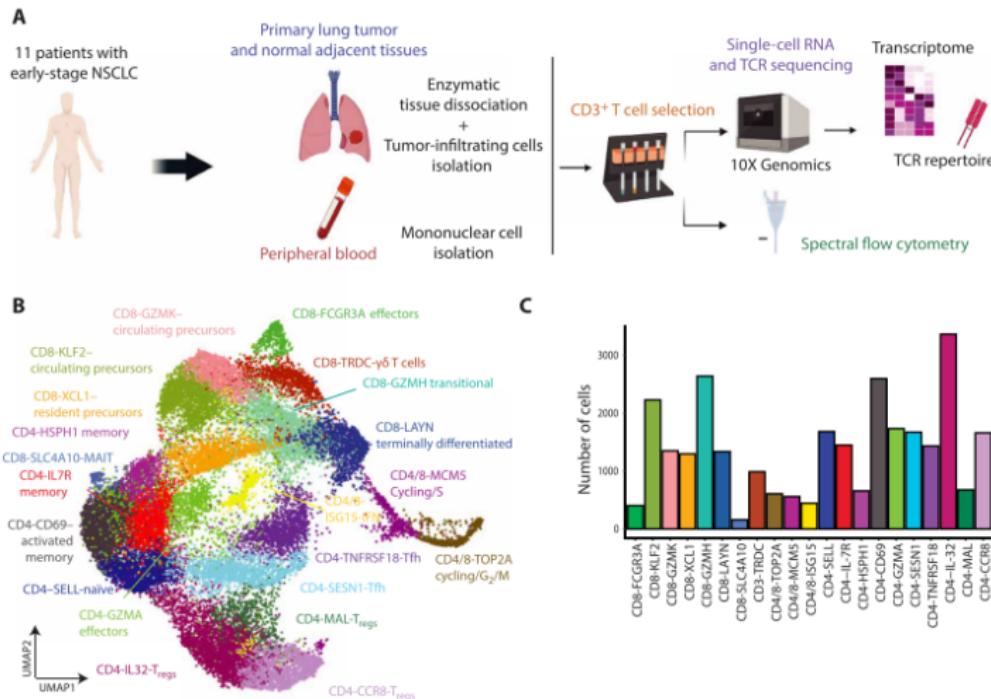


Figure: Characterization of CD3<sup>+</sup> TILs in NSCLC (Gueguen et al., 2021)

# Cluster Plots in LUSC

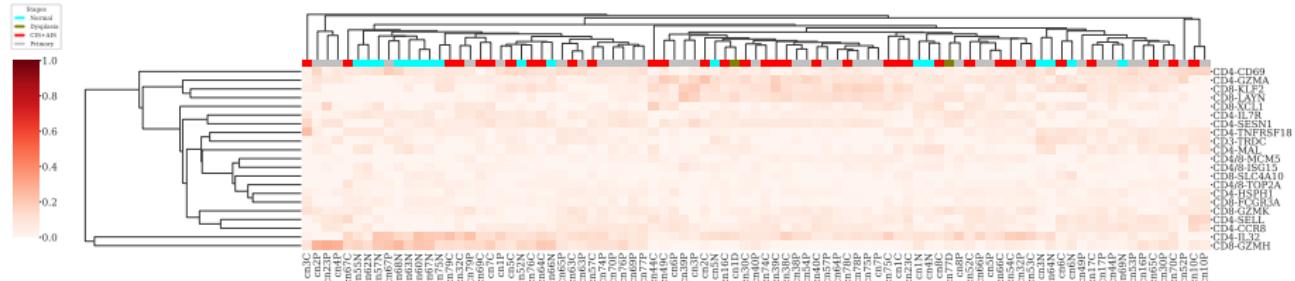


Figure: Cluster Plot in LUAD

# Violin Plots in LUSC I

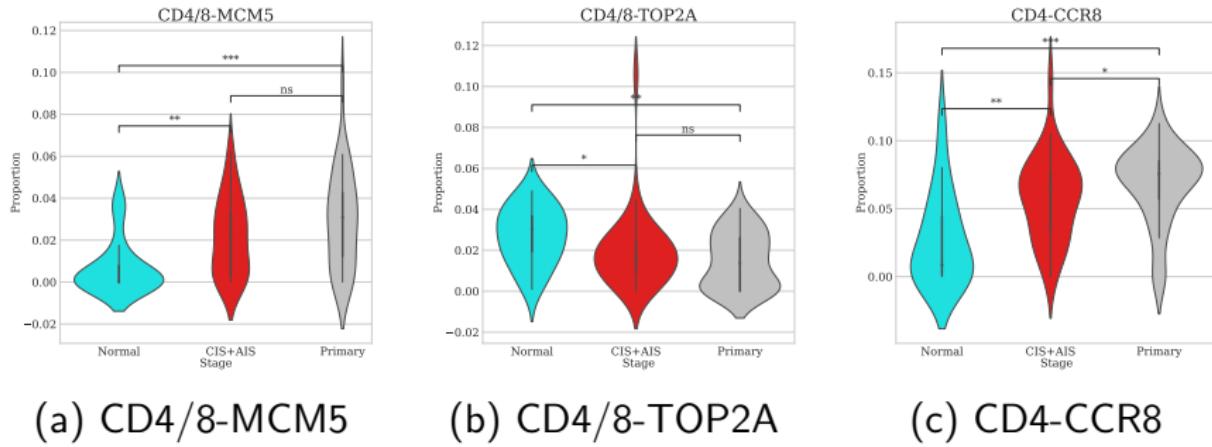
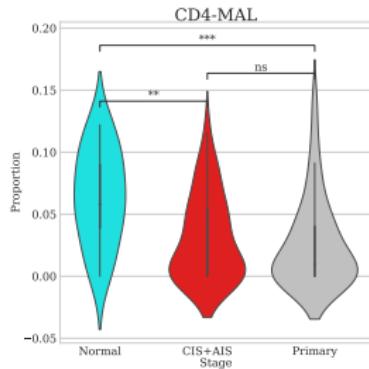
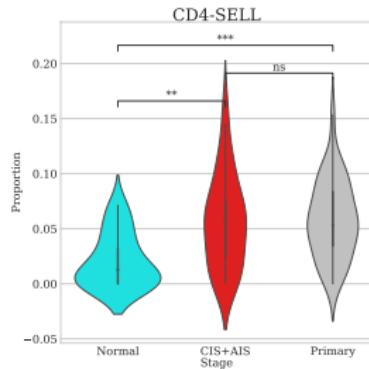


Figure: Violin Plots in LUSC

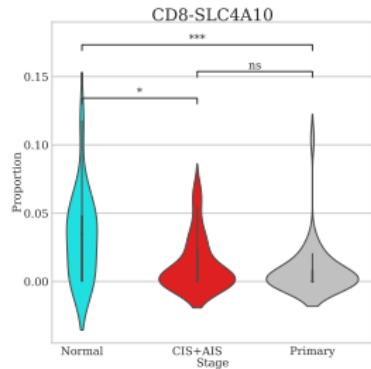
# Violin Plots in LUSC II



(d) CD4-MAL



(e) CD4-SELL



(f) CD8-SLC4A10

Figure: Violin Plots in LUSC

## CD4/8-MCM5

- ① CD4/8-MCM5 have lower proportion in Normal.
- ② MCM5, mini-chromosome maintenance protein 5, acts as component of MCM complex (Tsugi, Ficarro, & Jiang, 2006).
- ③ MCM5, thus, play a major role in replication and cell cycle progression (Paul, Hu, Musahl, Hameister, & Knippers, 1996).
- ④ MCM5 could be adverse prognostic marker for NSCLC (Grzegrzolka et al., 2021) and lung cancer (Y.-Z. Liu et al., 2017).

# Findings in Bulk Cell Deconvolution with LUSC II

## CD4/8-TOP2A

- ① CD4/8-TOP2A have higher proportion in Normal.
- ② TOP2A, topoisomerase IIA, have an essential role for modulating DNA topology & cell division (Wyles, Wu, Mirski, & Cole, 2007).
- ③ TOP2A over-expressed ↑ in bladder cancer (Zeng et al., 2019), LUAD (Kou et al., 2020) and NSCLC (W. Ma et al., 2019) ??

## CD4-CCR8

- ① CD4-CCR8 is gradually increased along tumor progression.
- ② CCR8, C-C chemokine receptor type 8, might modulate monocyte chemotaxis and tymic cell line apoptosis (Tiffany et al., 1997).
- ③ CCR8 up-regulated along tumor progression in bladder (X. Liu et al., 2019), colon (Villarreal et al., 2018), and breast cancer (Plitas et al., 2016).

## CD4-MAL

- ① CD4-MAL have lower proportion in Primary.
- ② MAL, myelin and lymphocyte protein, play a role in indirect route for egress of transcytosing cargo (de Marco et al., 2002).
- ③ Over-expression of MAL was correlated with worse prognostic factors in uterine carcinoma (D. Li et al., 2021).
- ④ MAL was highly methylated in gastric cancer (Choi et al., 2017).
- ⑤ MAL acts as a tumor suppressor or a tumor progression factor among cancer types (Lara-Lemus, 2019).

# Findings in Bulk Cell Deconvolution with LUSC IV

## CD4-SELL

- ① CD4-SELL have higher proportion in Primary.
- ② SELL, a calcium-dependent lectin, controls cell adhesion with neighboring cells (Bernimoulin et al., 2003; Wedepohl et al., 2017).
- ③ SELL over-expressed in breast cancer (Kumari et al., 2021).

## CD8-SLC4A10

- ① CD8-SLC4A10 have lower proportion in Primary.
- ② SLC4A10, sodium-driven chloride bicarbonate exchanger, have an essential role in regulating intracellular pH (C.-Z. Wang, Yano, Nagashima, & Seino, 2000).
- ③ SLC4A10 disruption leads to an extreme change in the cellular phenotype (Christensen et al., 2020).

# Cluster Plots in LUAD

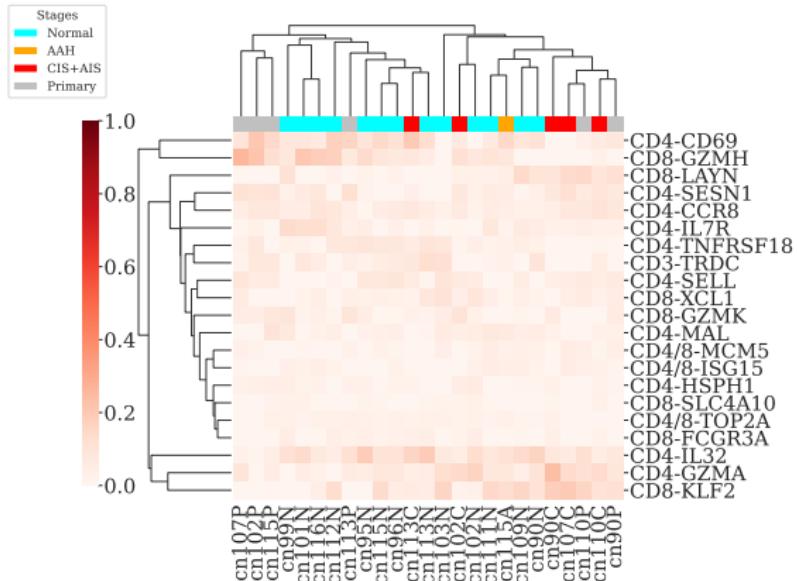
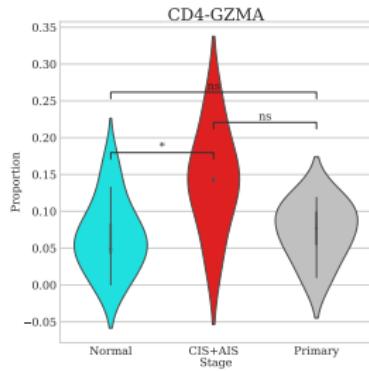
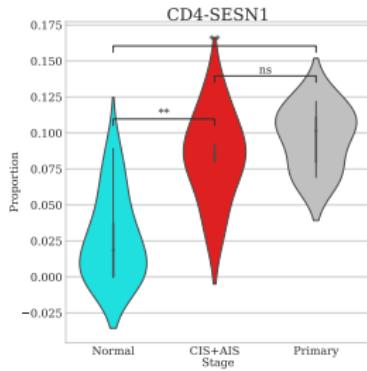


Figure: Cluster Plot in LUAD

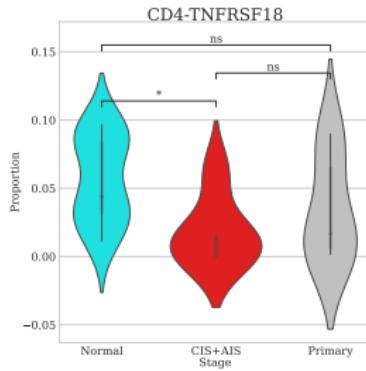
# Violin Plots in LUAD



(a) CD4-GZMA



(b) CD4-SESN1



(c) CD4-TNFRSF18

Figure: Violin Plots in LUAD

## CD4-GZMA

- ① CD4-GZMA have higher proportion in AIS than Normal.
- ② GZMA, granzyme A, activates caspase-independent pyroptosis through the immunological synapse (Gershenson, Hershberger, Shows, & Weissman, 1988; Hameed, Lowrey, Lichtenheld, & Podack, 1988; Krähenbühl et al., 1988).
- ③ GZMA promotes many cancers.
  - colorectal cancer (Santiago et al., 2020; Narayanan et al., 2018)
  - breast cancer (Fisler, Sikaria, Yavorski, Tu, & Blanck, 2018)
  - NSCLC (Jia et al., 2018)

## CD4-SESN1

- ① CD4-SESN1 have higher proportion in AIS than Normal.
- ② SESN1, sestrin-1, acts as an intracellular *leucine* sensor that controls the TORC1 signaling pathway (Chantranupong et al., 2014; Wolfson et al., 2016).
- ③ SESN1 is controlled by p53 tumor suppressor, and thus affects in cell growth regulation (Budanov & Karin, 2008).
- ④ Inhibitor of SESN1 implicates to the pro-oxidant and oncogenic effects of mutant p53 (Cordani et al., 2018)?
- ⑤ SESN1 plays opposite role in *early* and *late* stage of lung carcinogenesis (B. Ding et al., 2019).

## CD4-TNFRSF18

- ① CD4-TNFRSF18 have lower proportion in AIS than Normal.
- ② TNFRSF18, tumor necrosis factor receptor super-family member 18, is a receptor for TNFSF18.
- ③ TNFSF18 regulates T-cell responses, and promotes ↑ leukocyte adhesion to endothelial cells (Lacal et al., 2013).
- ④ TNFRSF18 was negatively correlated with survival in endometrial cancer (Zhou, Zhang, Li, Chen, & Cheng, 2020)?

# Findings in Bulk Cell Deconvolution

## 4. Results

### 4.8. Discovery of Mutational Signature

# Mutational Signature?

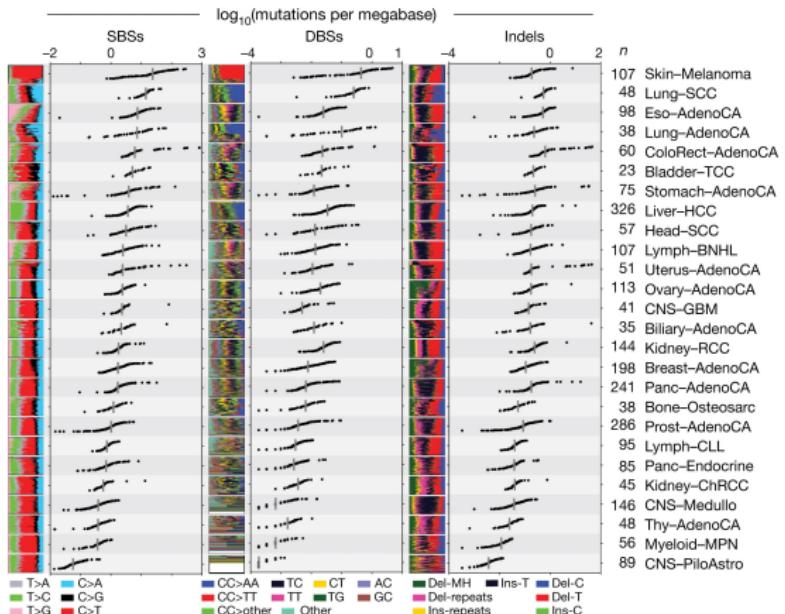
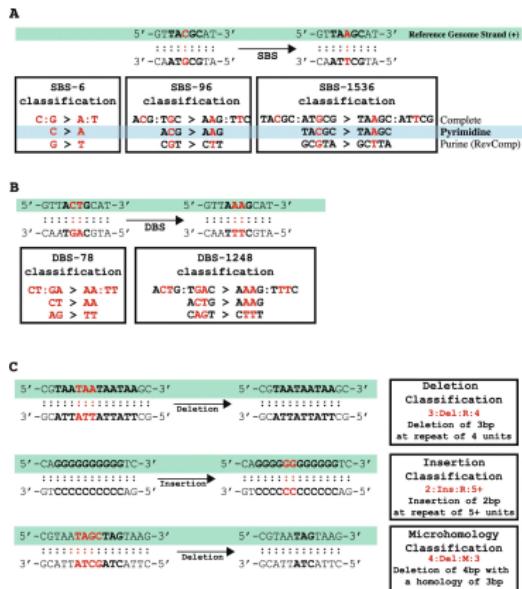


Figure: Mutation Burdens across PCAWG tumor types (Alexandrov et al., 2020)

# SigProfiler?



**Figure:** Classification of mutation signatures by SigProfiler (Bergstrom et al., 2019; Islam et al., 2021; Bergstrom et al., 2020)

## 4. Results

### 4.8. Discovery of Mutational Signature

#### 4.8.1. Single Base Substitutions (SBS)

# SBS Signatures I

## SBS1

- An endogenous mutational process (Nik-Zainal et al., 2012a)
- generates G>T mismatches in double-stranded DNA
- Failure ↓ to detect & remove these mismatches

## SBS2

- Activity of the AID/APOBEC family of cytidine deaminases (Nik-Zainal et al., 2012a)
  - ① APOBEC3A is probably responsible in human cancer
  - ② APOBEC3B may also contribute
- may be generated directly by DNA replication

# SBS Signatures II

## SBS4

- Tobacco smoking (Alexandrov et al., 2013)
- Exposed to tobacco carcinogens e.g. benzopyrene

## SBS5

- Unknown (Alexandrov et al., 2013)
- SBS5 ↑ in bladder cancer
- SBS5 ↑ in many cancer types ∵ Tobacco smoking

## SBS10b

- Polymerase ε exonuclease domain mutations (Alexandrov et al., 2020)

# SBS Signatures III

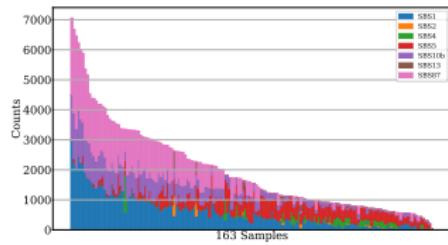
## SBS13

- Activity of the AID/APOBEC family of cytidine deaminases (Nik-Zainal et al., 2012b)
- SBS13 is usually found with SBS2

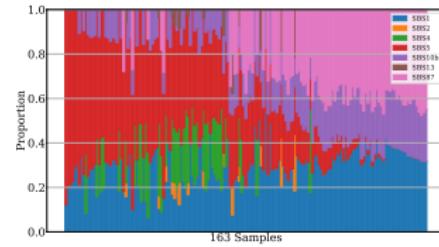
## SBS87

- Thiopurine chemotherapy treatment (B. Li et al., 2020)

# SBS in LUSC I



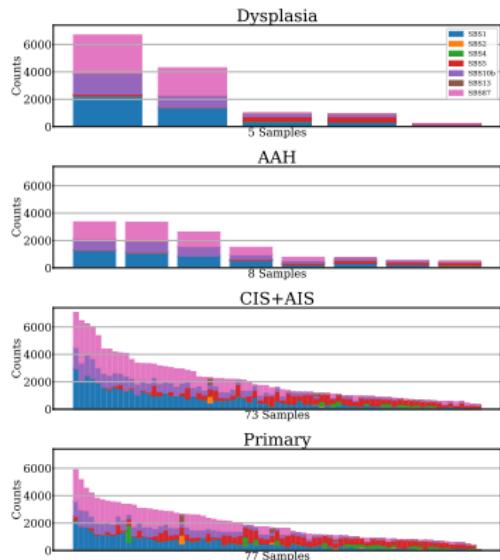
(a) Absolute



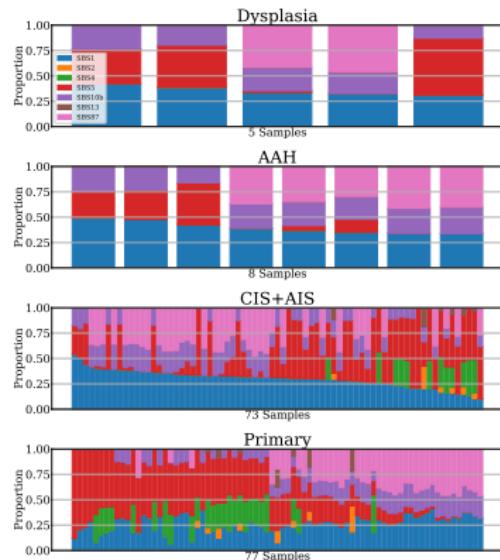
(b) Relative

Figure: SBS Bar Plot in LUSC

# SBS in LUSC II



(a) Absolute



(b) Relative

Figure: SBS Bar Plot by Cancer Subtype in LUSC

# SBS in LUSC with Smoking I

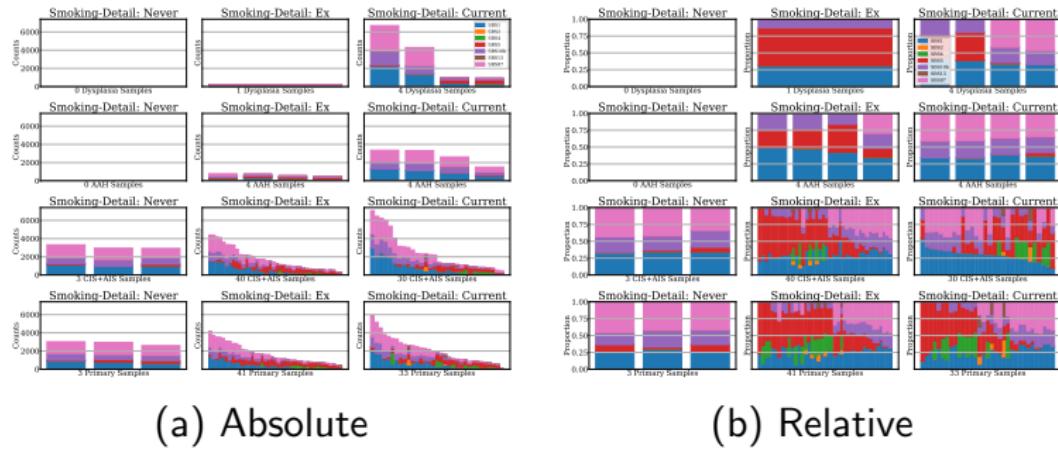
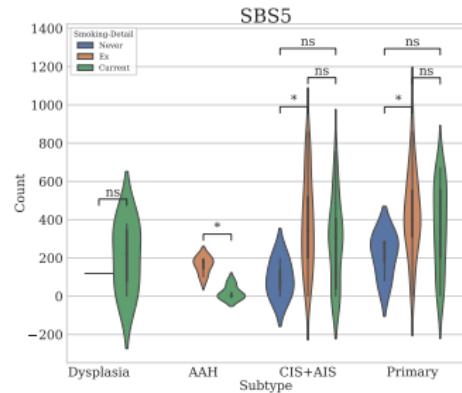
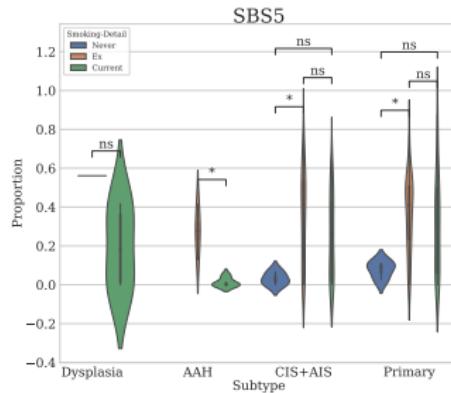


Figure: SBS Bar Plot by Cancer Subtype & Smoking in LUSC

# SBS in LUSC with Smoking II



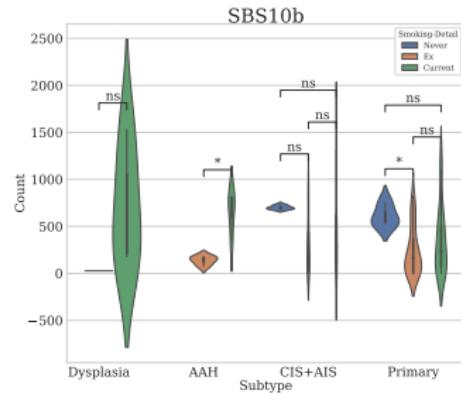
(a) Absolute



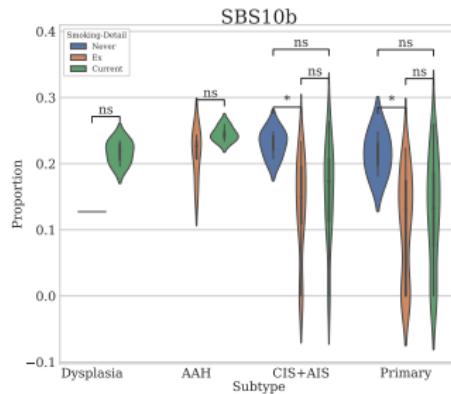
(b) Relative

**Figure:** SBS5 Signature in LUSC with Smoking

# SBS in LUSC with Smoking III



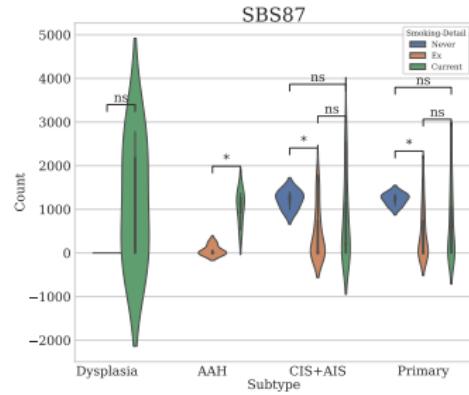
(a) Absolute



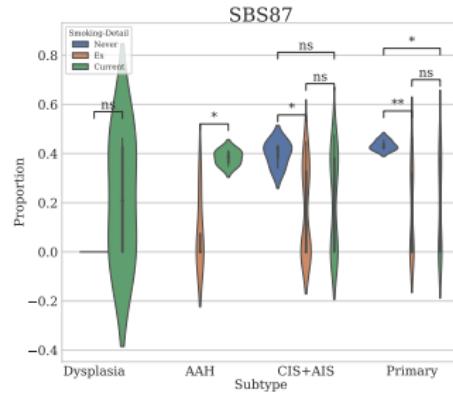
(b) Relative

Figure: SBS10b Signature in LUSC with Smoking

# SBS in LUSC with Smoking IV



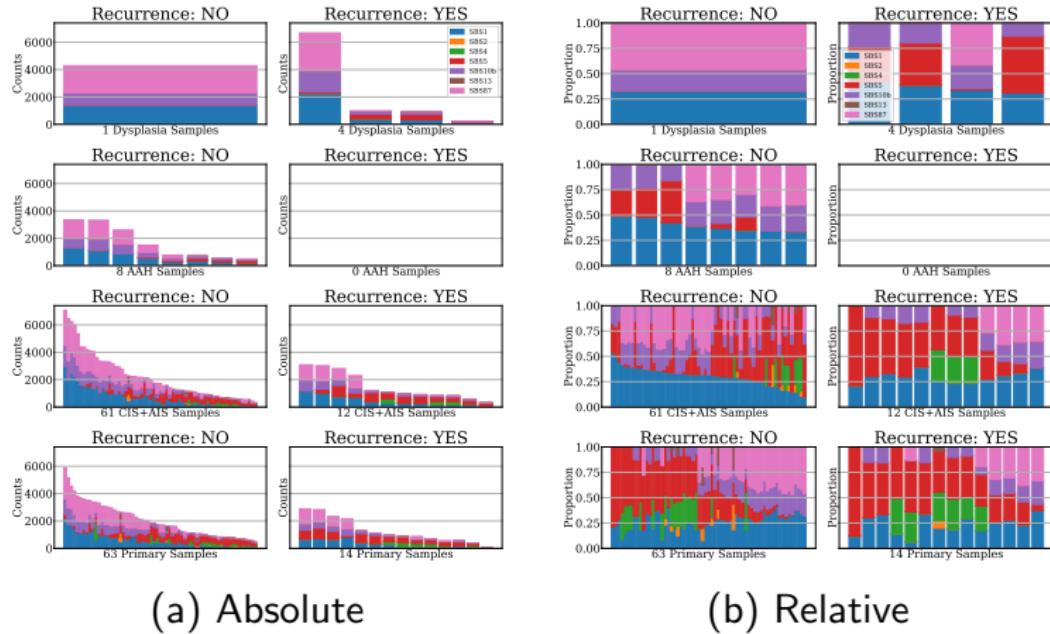
(a) Absolute



(b) Relative

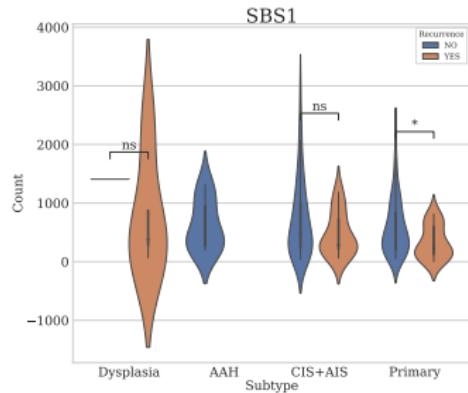
Figure: SBS87 Signature in LUSC with Smoking

# SBS in LUSC with Recurrence I

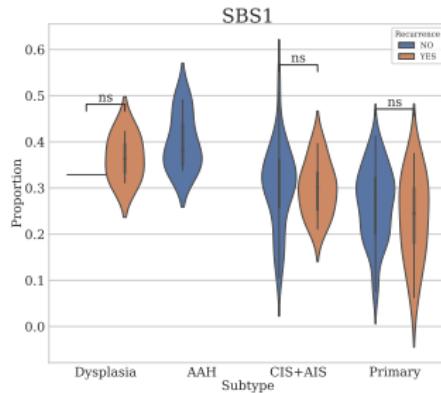


**Figure:** SBS Bar Plot by Cancer Subtype & Recurrence in LUSC

# SBS in LUSC with Recurrence II



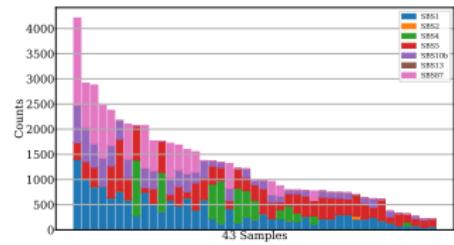
(a) Absolute



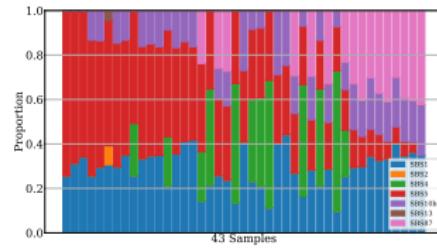
(b) Relative

**Figure:** SBS1 Signature in LUSC with Recurrence

# SBS in LUAD I



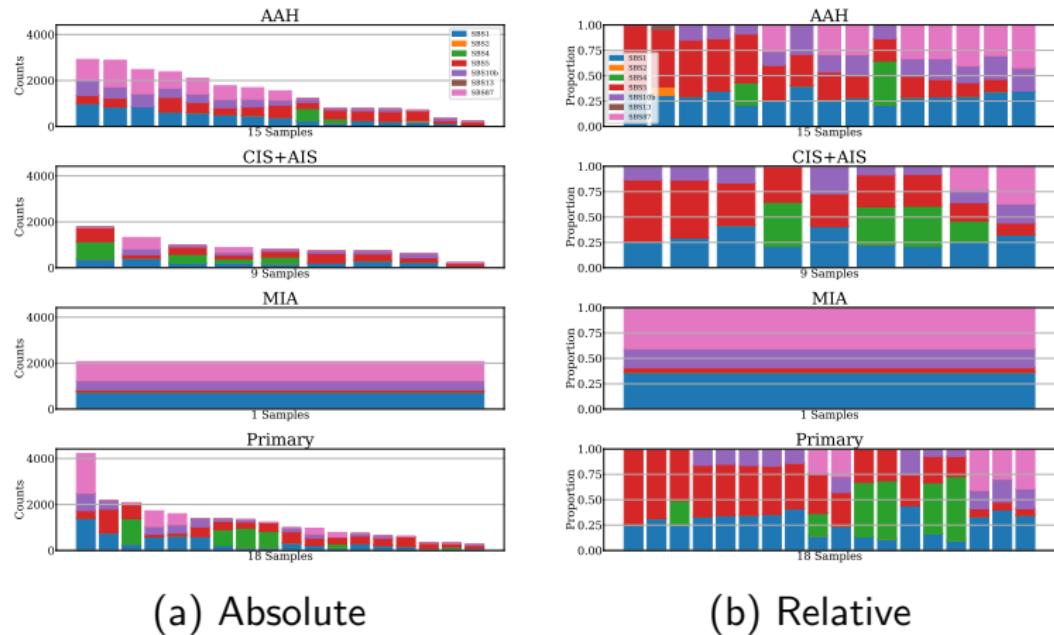
(a) Absolute



(b) Relative

Figure: SBS Bar Plot in LUSC

# SBS in LUAD II



(a) Absolute

(b) Relative

Figure: SBS Bar Plot by Cancer Subtype in LUSC

# SBS in LUAD with Smoking I

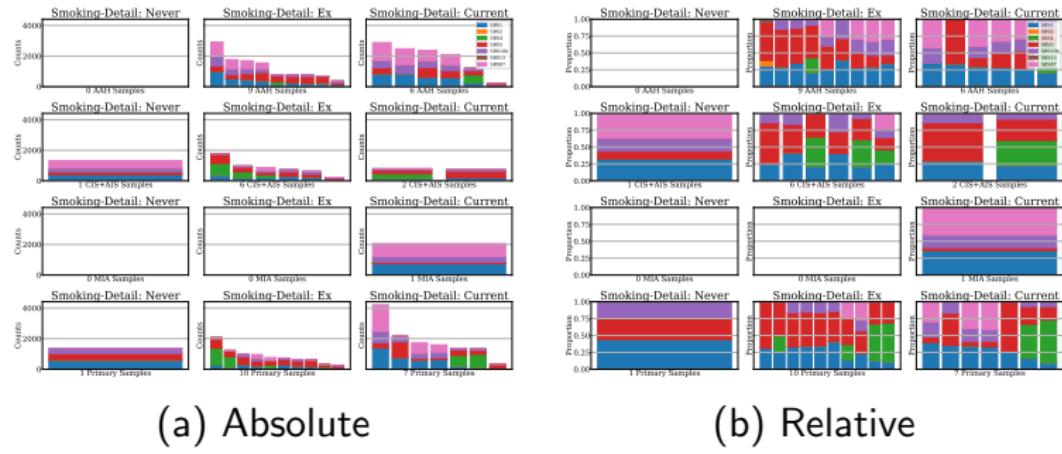
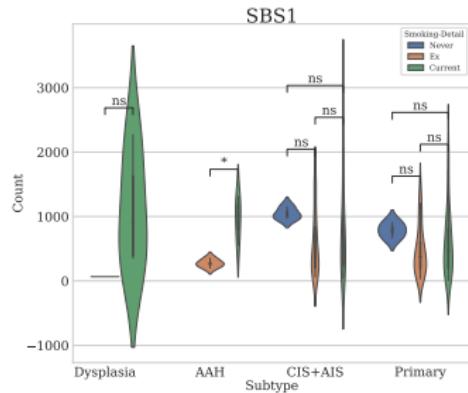
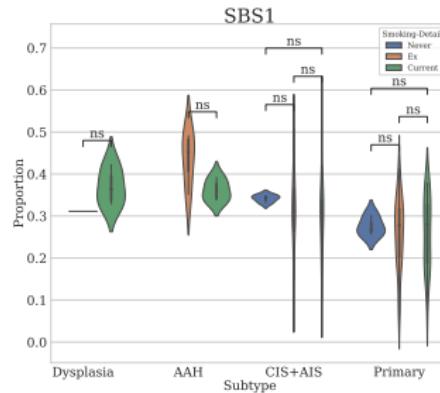


Figure: SBS Bar Plot by Cancer Subtype & Smoking in LUAD

# SBS in LUAD with Smoking II



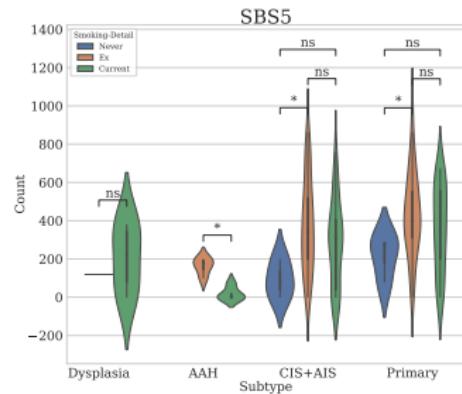
(a) Absolute



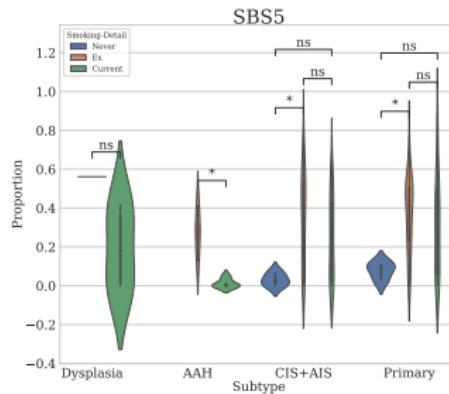
(b) Relative

**Figure:** SBS1 Signature in LUAD with Smoking

# SBS in LUAD with Smoking III



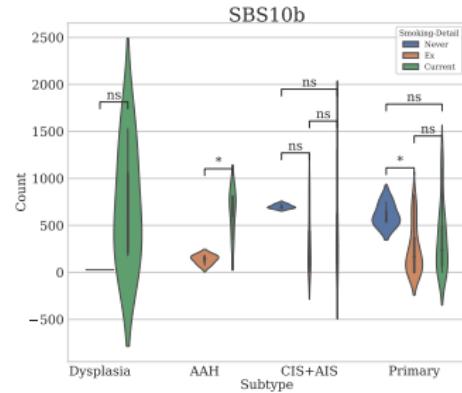
(a) Absolute



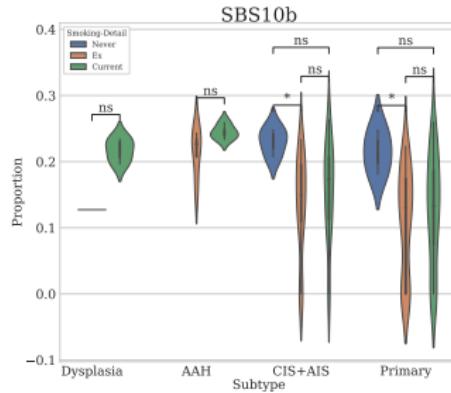
(b) Relative

**Figure:** SBS5 Signature in LUAD with Smoking

# SBS in LUAD with Smoking IV



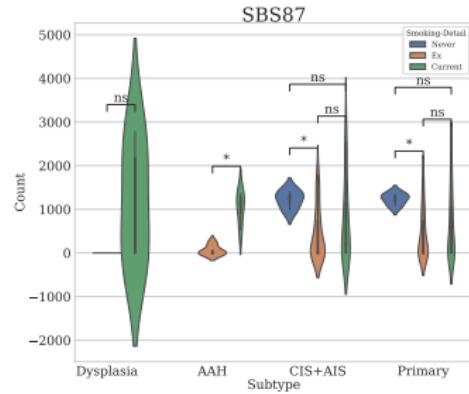
(a) Absolute



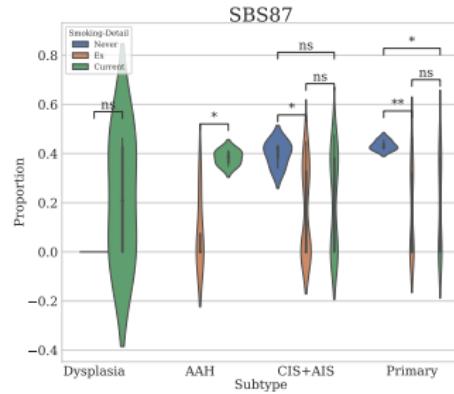
(b) Relative

Figure: SBS10b Signature in LUAD with Smoking

# SBS in LUAD with Smoking V



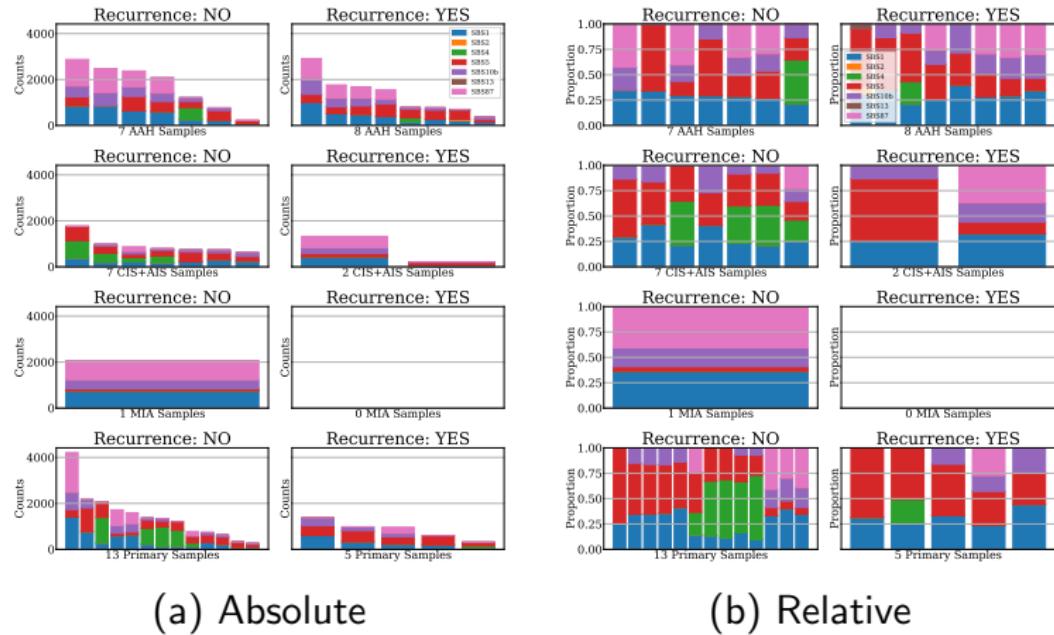
(a) Absolute



(b) Relative

Figure: SBS87 Signature in LUAD with Smoking

# SBS in LUAD with Recurrence I

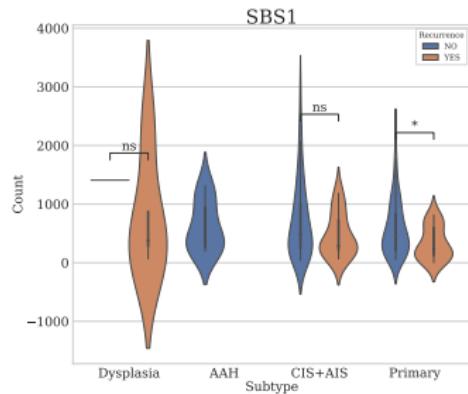


(a) Absolute

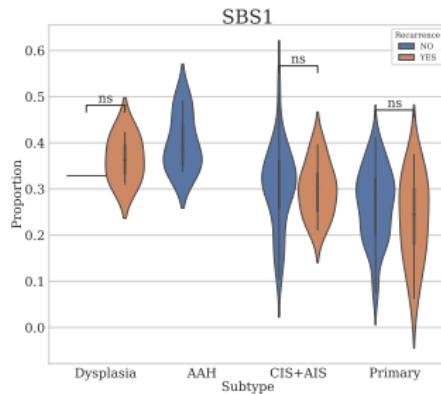
(b) Relative

Figure: SBS Bar Plot by Cancer Subtype & Recurrence in LUAD

# SBS in LUAD with Recurrence II



(a) Absolute



(b) Relative

**Figure:** SBS1 Signature in LUAD with Recurrence

## 4. Results

### 4.8. Discovery of Mutational Signature

#### 4.8.2. Double Base Substitutions (DBS)

# DBS Signatures I

## DBS2

- Tobacco smoking (J.-M. Chen, Férec, & Cooper, 2013)
- Other endogenous/exogenous mutagens e.g. acetaldehyde

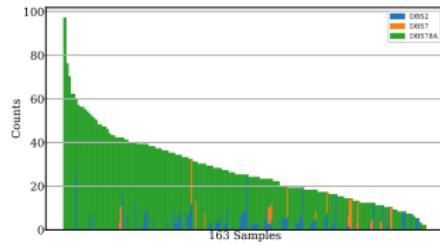
## DBS7

- Defective ↓ DNA mismatch repair (Alexandrov et al., 2020)

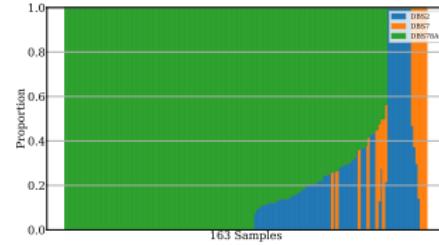
## DBS78A

content...

# DBS in LUSC I



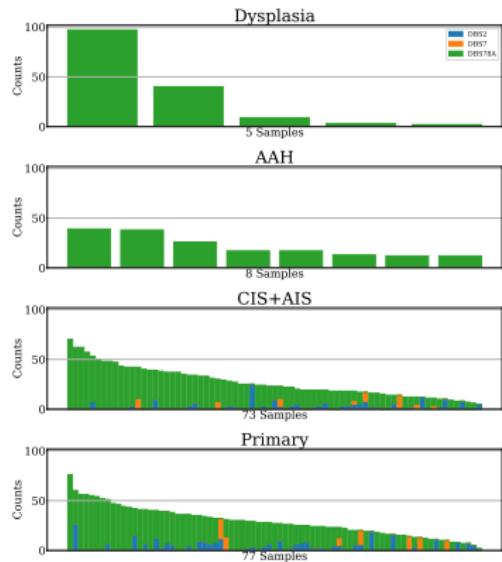
(a) Absolute



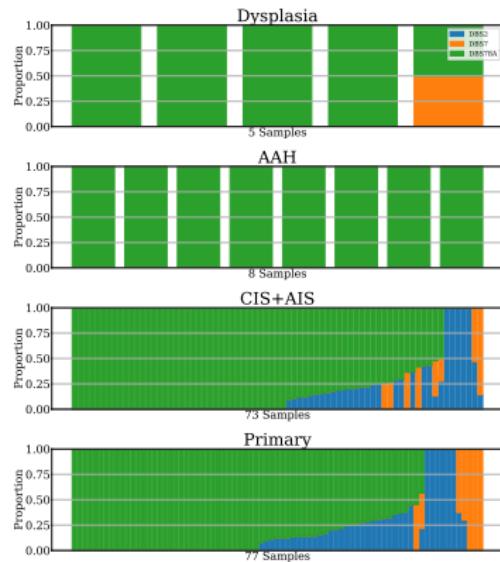
(b) Relative

Figure: DBS Bar Plot in LUSC

# DBS in LUSC II



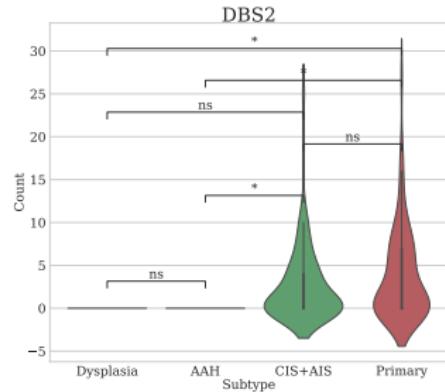
(a) Absolute



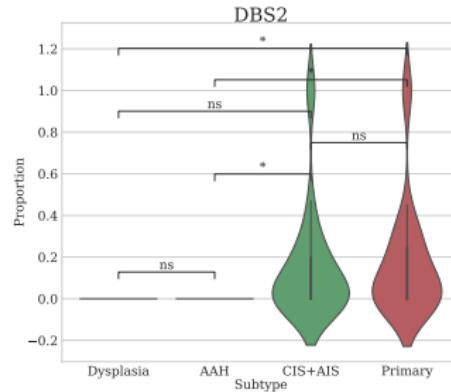
(b) Relative

Figure: DBS Bar Plot by Cancer Subtype in LUSC

# DBS in LUSC III



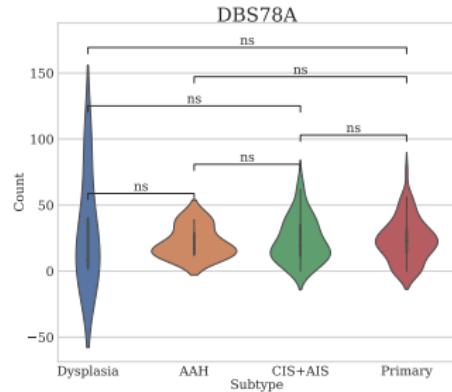
(a) Absolute



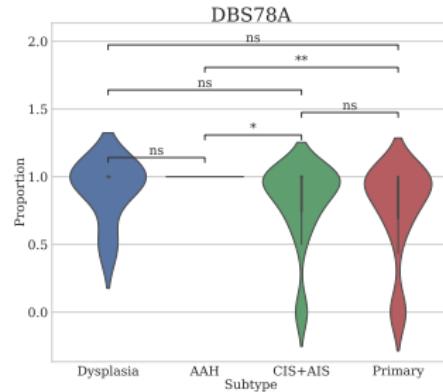
(b) Relative

Figure: DBS2 Signature in LUSC

# DBS in LUSC IV



(a) Absolute



(b) Relative

Figure: DBS78A Signature in LUSC

# DBS in LUSC with Smoking I

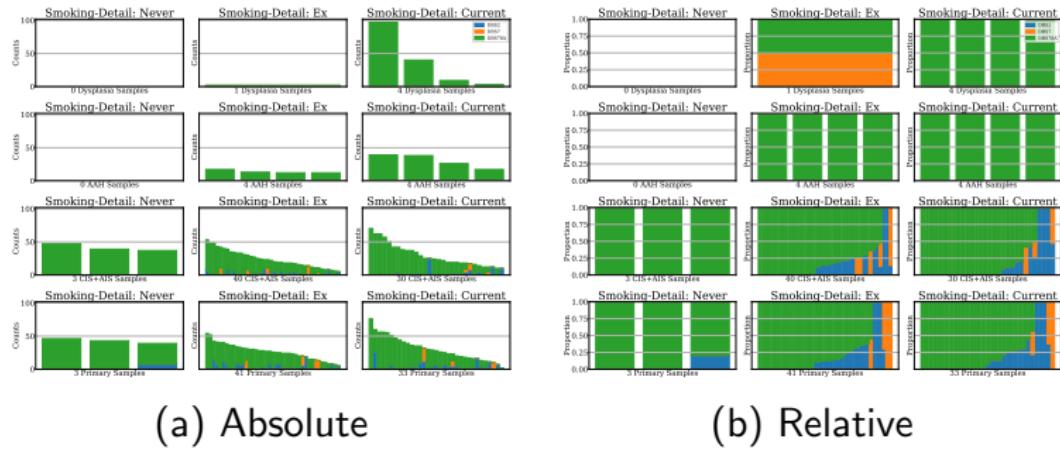
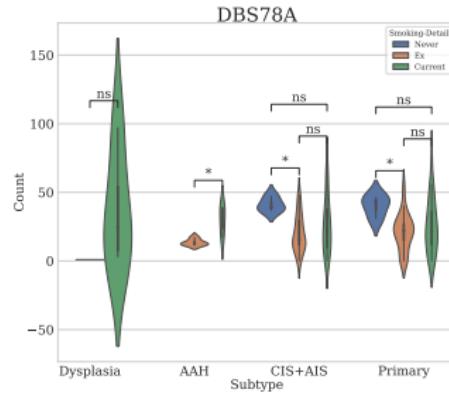
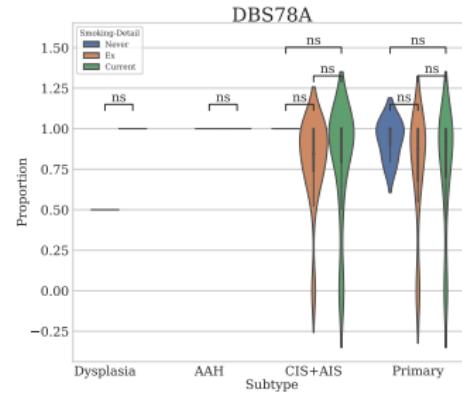


Figure: DBS Bar Plot by Cancer Subtype & Smoking in LUSC

# DBS in LUSC with Smoking II



(a) Absolute



(b) Relative

Figure: DBS78A Signature in LUSC with Smoking

# DBS in LUSC with Recurrence

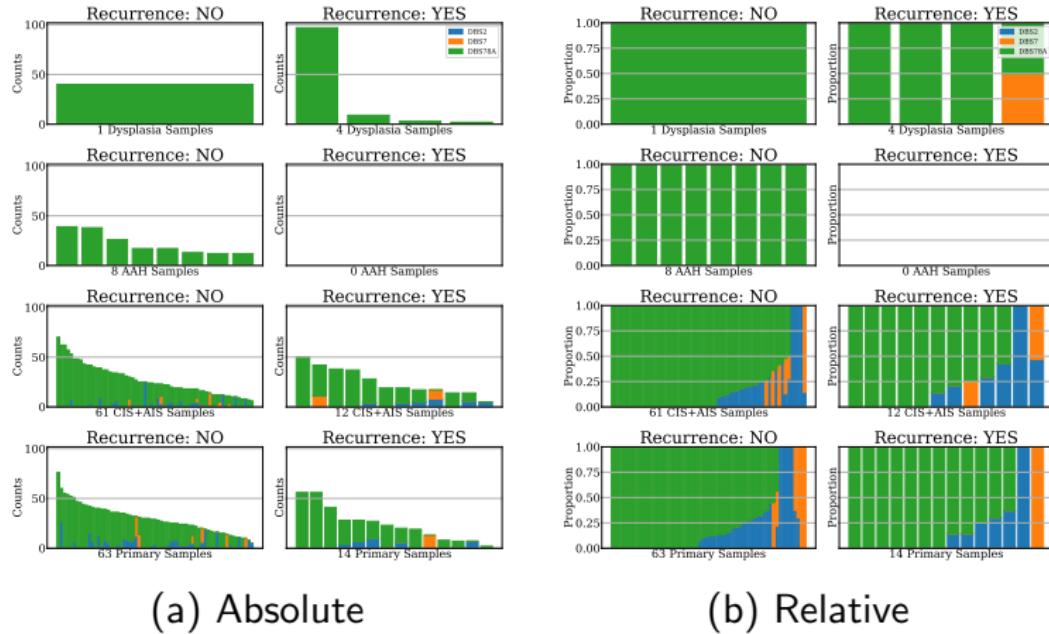
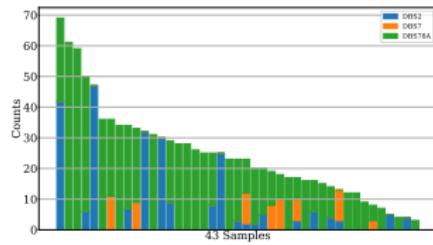
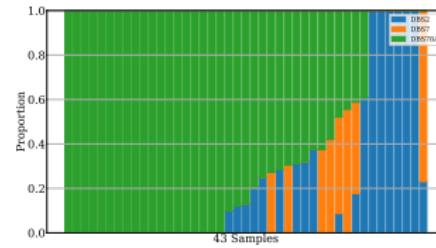


Figure: DBS Bar Plot by Cancer Subtype & Recurrence in LUSC

# DBS in LUAD I



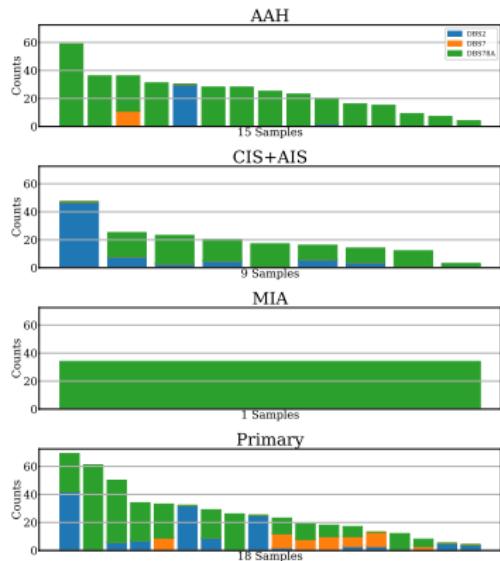
(a) Absolute



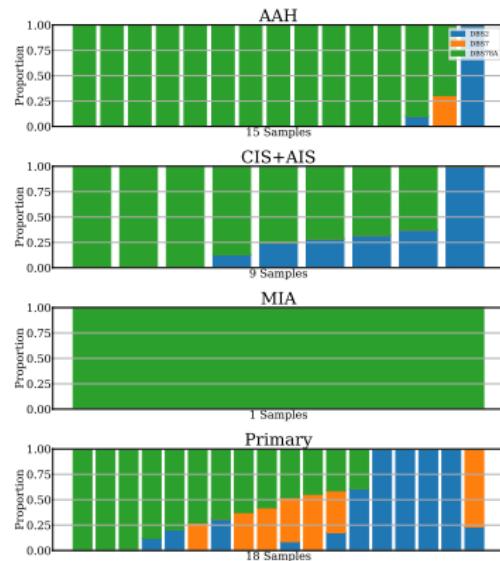
(b) Relative

Figure: DBS Bar Plot in LUAD

# DBS in LUAD II



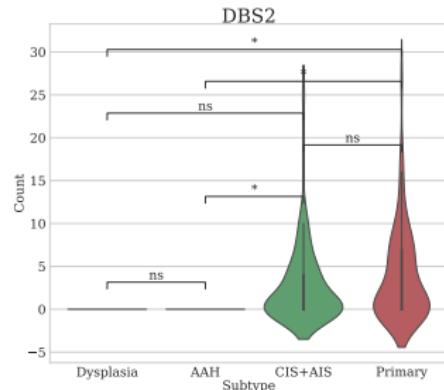
(a) Absolute



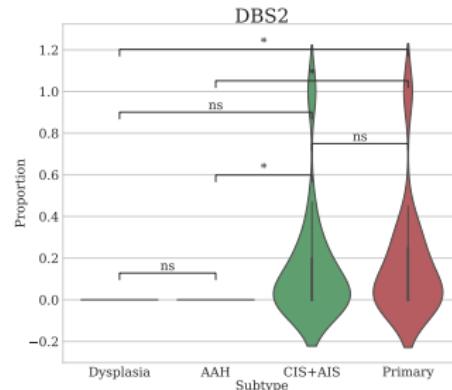
(b) Relative

Figure: DBS Bar Plot by Cancer Subtype in LUAD

# DBS in LUAD III



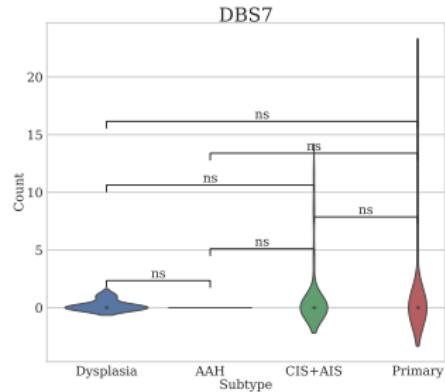
(a) Absolute



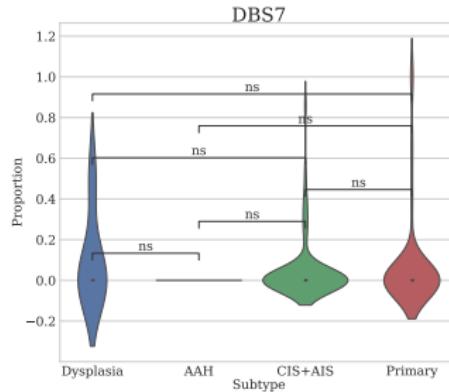
(b) Relative

Figure: DBS2 Signature in LUSC

# DBS in LUAD IV



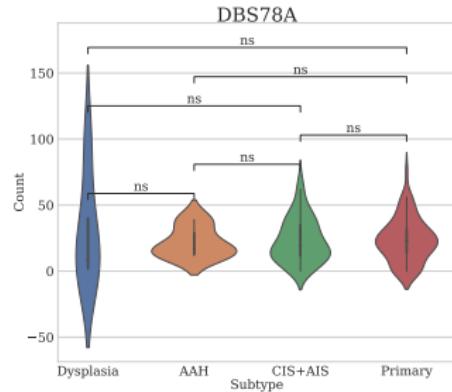
(a) Absolute



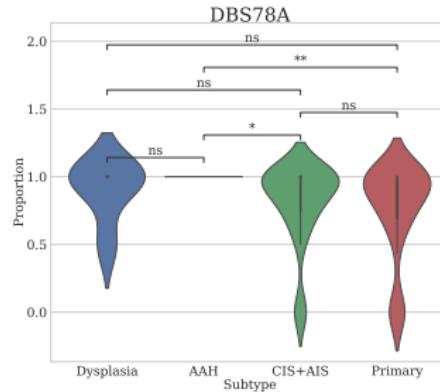
(b) Relative

Figure: DBS7 Signature in LUSC

# DBS in LUAD V



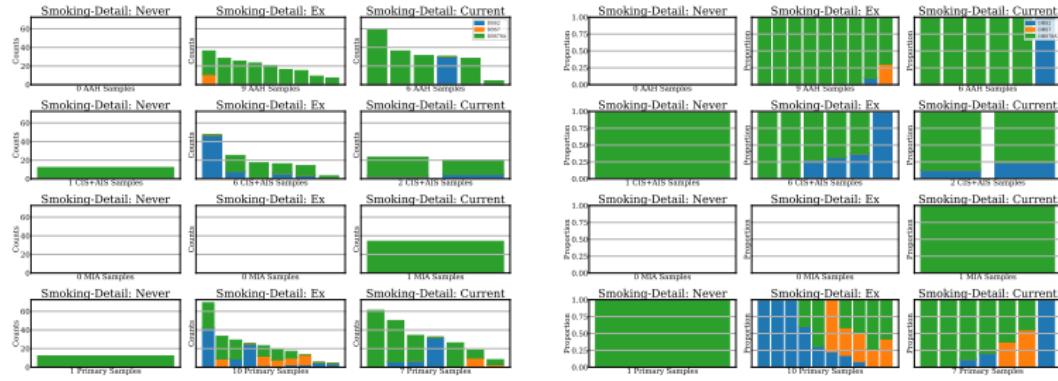
(a) Absolute



(b) Relative

Figure: DBS78A Signature in LUSC

# DBS in LUAD with Smoking I

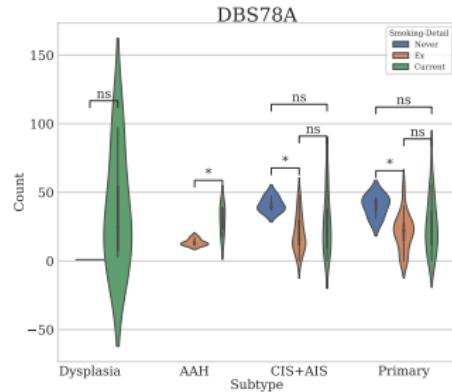


(a) Absolute

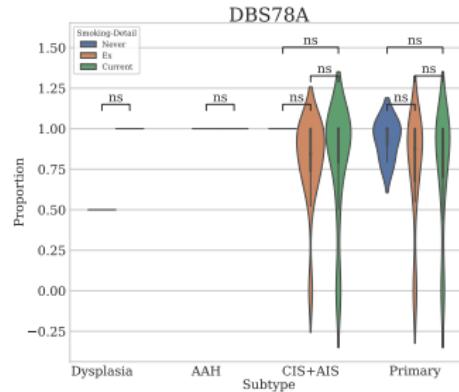
(b) Relative

Figure: DBS Bar Plot by Cancer Subtype & Smoking in LUAD

# DBS in LUAD with Smoking II



(a) Absolute



(b) Relative

Figure: DBS78A Signature in LUSC in Smoking

# DBS in LUAD with Recurrence

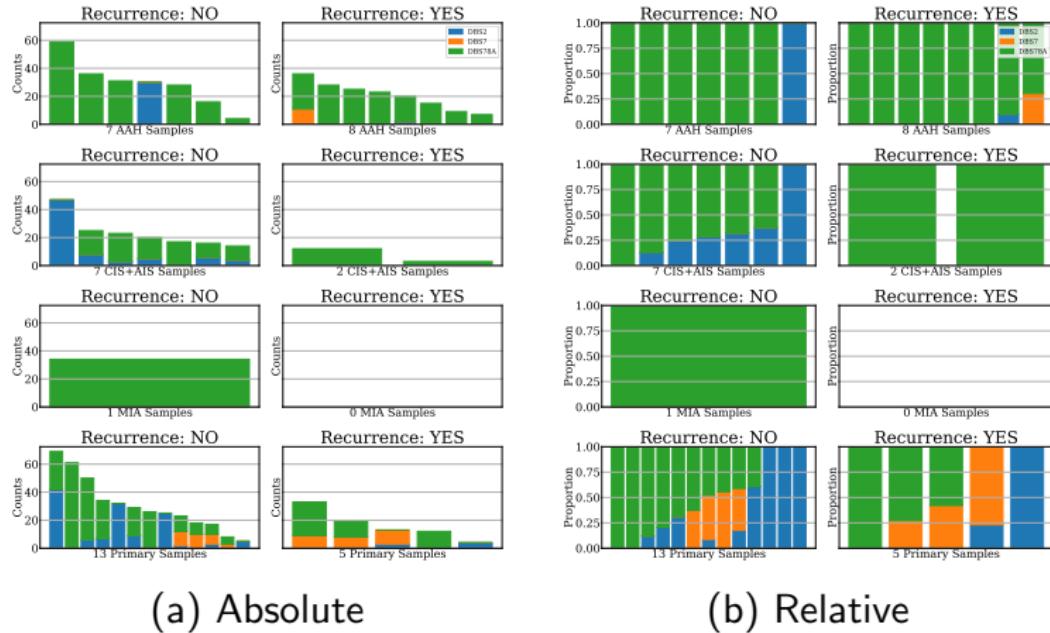


Figure: DBS Bar Plot by Cancer Subtype & Recurrence in LUAD

## 4. Results

### 4.8. Discovery of Mutational Signature

#### 4.8.3. Short insertions & Deletions (Indels)

# Indel signatures I

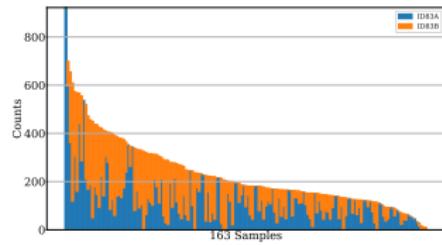
ID83A

content...

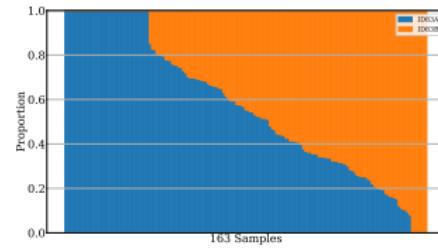
ID83B

content...

# Indels in LUSC I



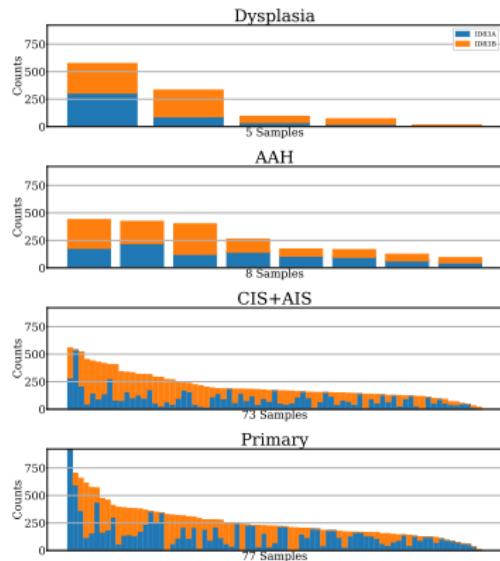
(a) Absolute



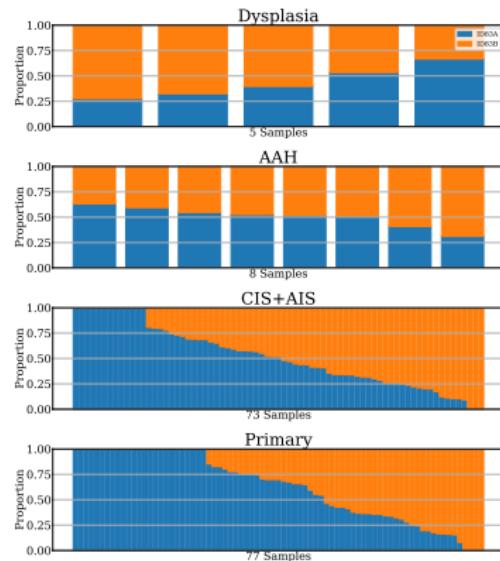
(b) Relative

Figure: Indel Bar Plot in LUSC

# Indels in LUSC II



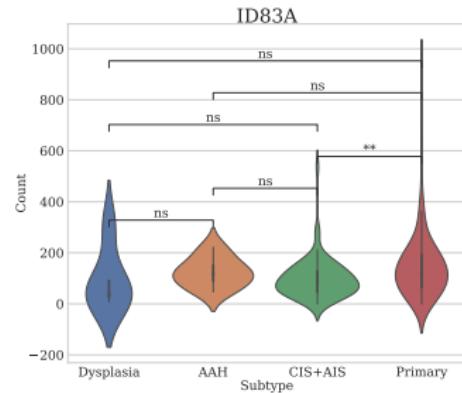
(a) Absolute



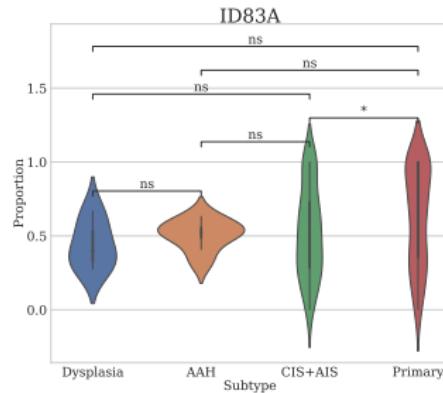
(b) Relative

Figure: Indel Bar Plot by Cancer Subtype in LUSC

# Indels in LUSC III



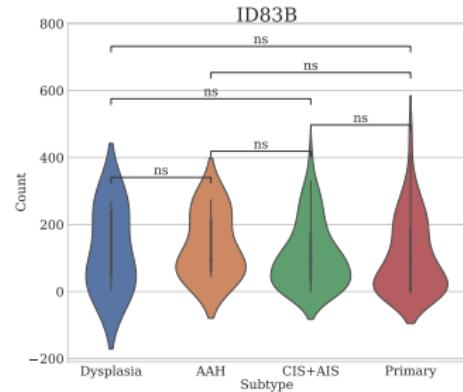
(a) Absolute



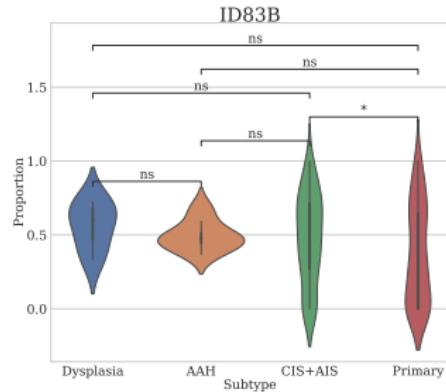
(b) Relative

Figure: Indel83A Signature in LUSC

# Indels in LUSC IV



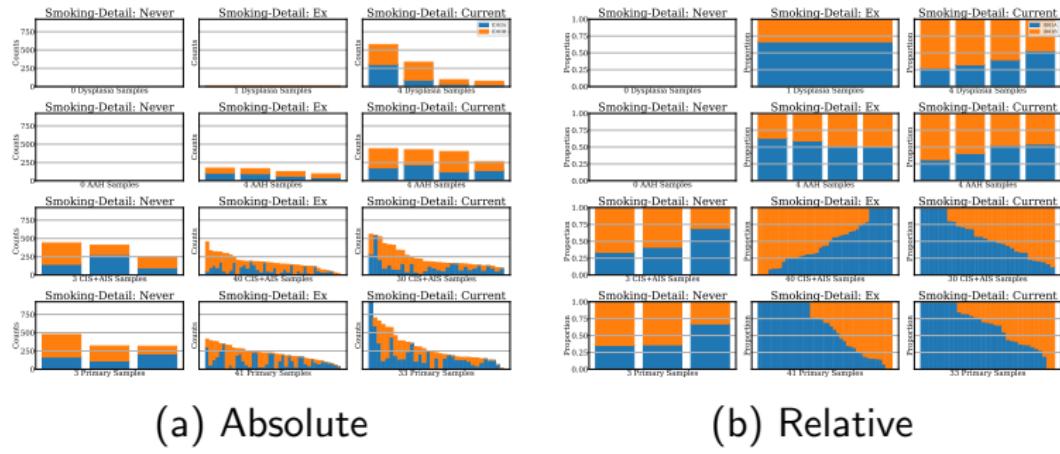
(a) Absolute



(b) Relative

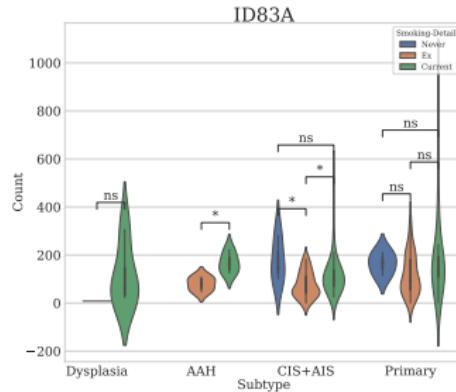
Figure: Indel83B Signature in LUSC

# Indel in LUSC with Smoking I

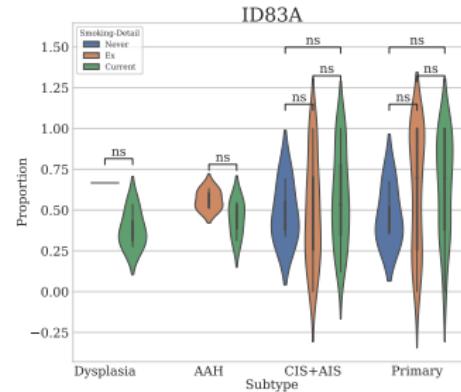


**Figure:** Indel Bar Plot by Cancer Subtype & Smoking in LUSC

# Indel in LUSC with Smoking II



(a) Absolute



(b) Relative

Figure: Indel83A Signature in LUSC with Smoking

# Indel in LUSC with Recurrence

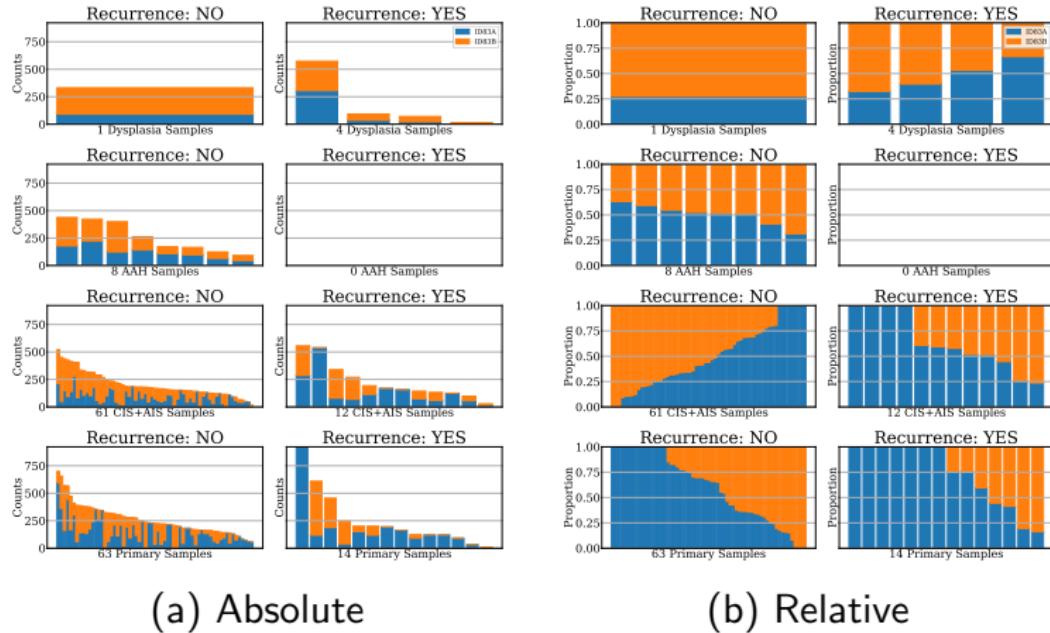
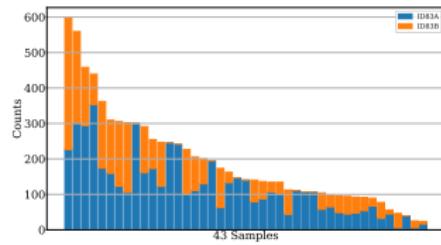
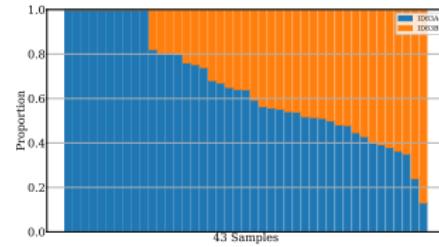


Figure: Indel Bar Plot by Cancer Subtype & Recurrence in LUSC

# Indels in LUAD I



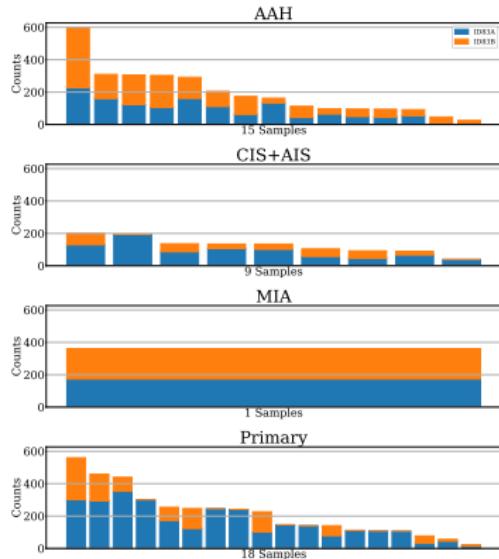
(a) Absolute



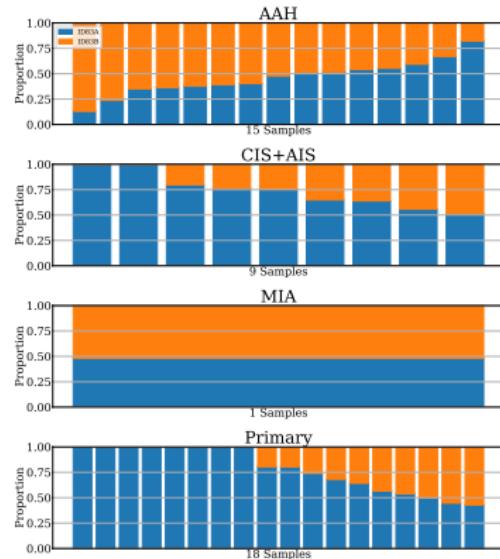
(b) Relative

Figure: Indel Bar Plot in LUAD

# Indels in LUAD II



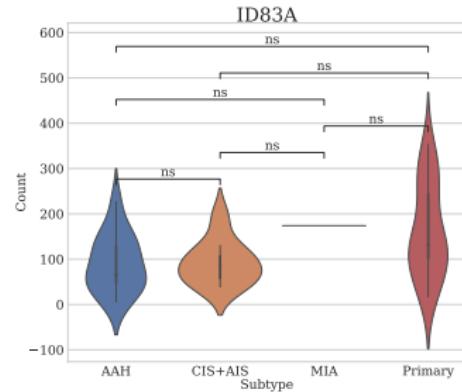
(a) Absolute



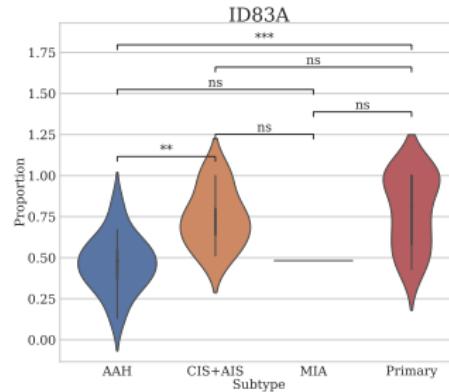
(b) Relative

Figure: Indel Bar Plot by Cancer Subtype in LUAD

# Indels in LUAD III



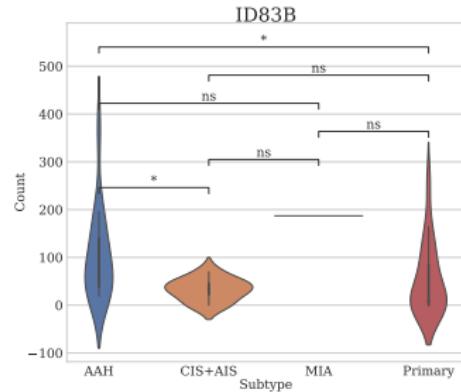
(a) Absolute



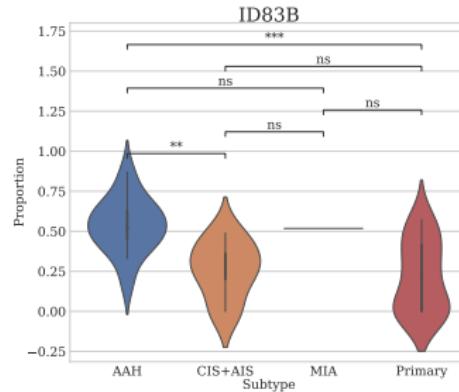
(b) Relative

Figure: Indel83A Signature in LUAD

# Indels in LUAD IV



(a) Absolute



(b) Relative

Figure: Indel83B Signature in LUAD

# Indel in LUAD with Smoking

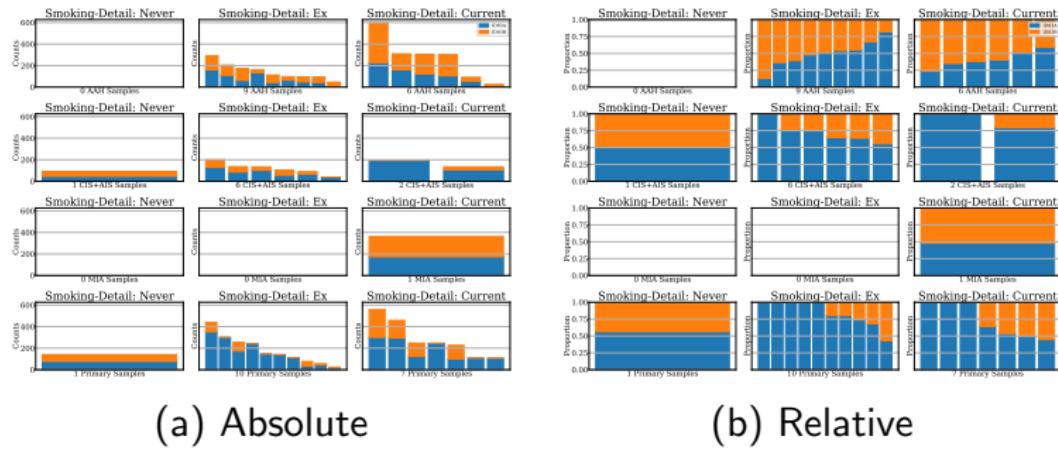
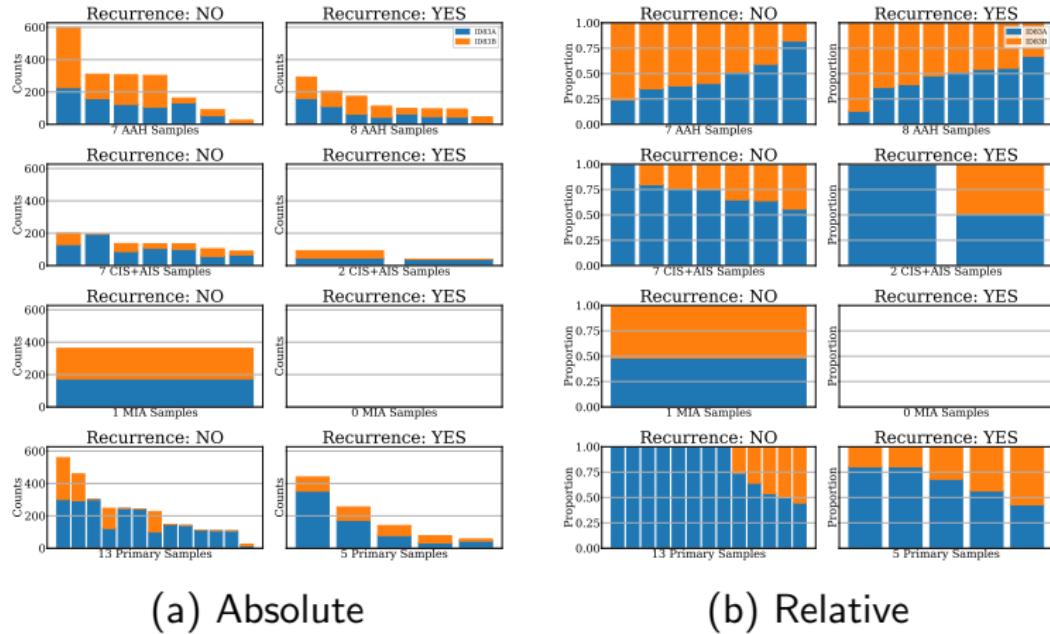


Figure: Indel Bar Plot by Cancer Subtype & Smoking in LUAD

# Indel in LUAD with Recurrence



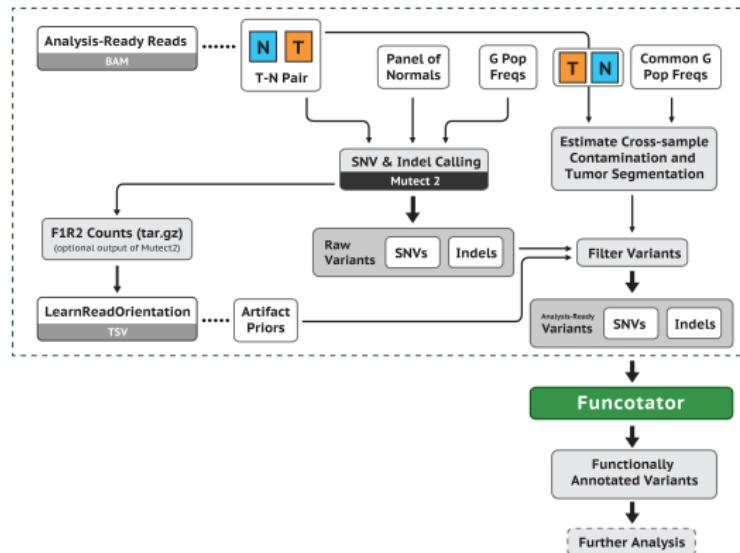
**Figure:** Indel Bar Plot by Cancer Subtype & Recurrence in LUAD

# Findings in Mutation Signature

## 4. Results

### 4.9. Clinical Data with Point Mutation

# Mutect2?



**Figure:** Somatic short variant discovery workflow (Van der Auwera et al., 2013; DePristo et al., 2011)

## 4. Results

### 4.9. Clinical Data with Point Mutation

#### 4.9.1. For Smoking

# LUSC with Smoking

Table: LUSC WES Data with Smoking

Smoking?	Stage	Number of Samples	
		Normal	Total
Never	Normal	3	
	CIS+AIS	3	
	Primary	3	
	Total	9	
Ex	Normal	41	
	Dysplasia	1	
	AAH	4	
	CIS+AIS	40	
	Primary	41	
	Total	127	
Current	Normal	33	
	Dysplasia	4	
	AAH	4	
	CIS+AIS	30	
	Primary	33	
	Total	104	

# Clinical Data about LUSC for Smoking I

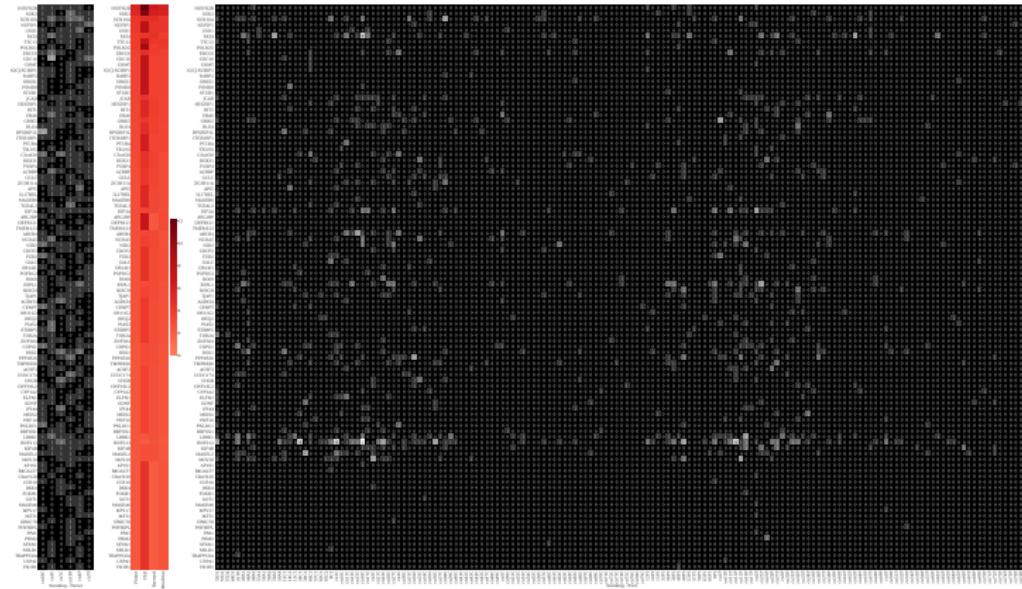


Figure: Clinical Data about LUSC for Smoking

# Clinical Data about LUSC for Smoking II

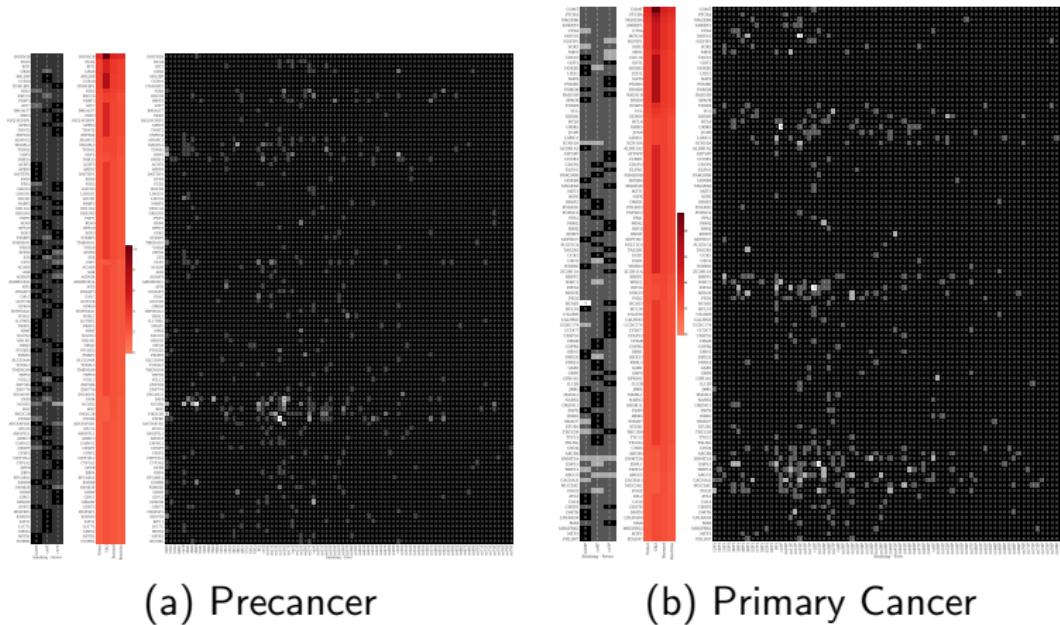


Figure: Clinical Data about LUSC for Smoking with Precancer/Primary

# Notable genes in LUSC for Smoking I

## INSYN2B

- ① INSYN2B is the best indicator for Smoking.
- ② INSYN2B is the best indicator for Smoking in Precancer.

## COMT

- ① COMT is the best indicator for Smoking in Primary.

# LUAD with Smoking

Table: LUAD WES Data with Smoking

Smoking?	Stage	Number of Samples
Never	Normal	1
	CIS+AIS	1
	Primary	1
	Total	3
Ex	Normal	10
	AAH	9
	CIS+AIS	6
	Primary	10
	Total	35
Current	Normal	7
	AAH	6
	CIS+AIS	2
	MIA	1
	Primary	7
	Total	23

# Clinical Data about LUAD for Smoking I

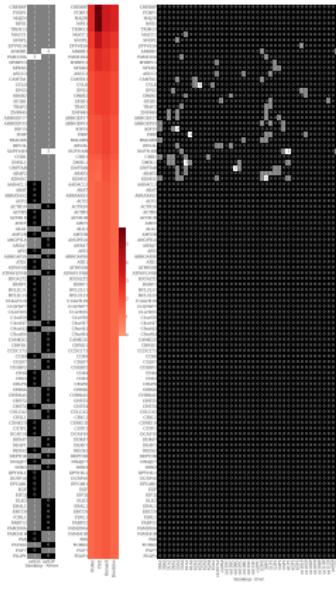
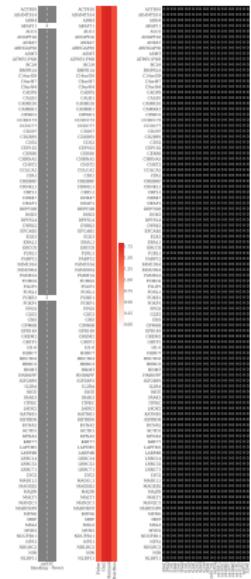
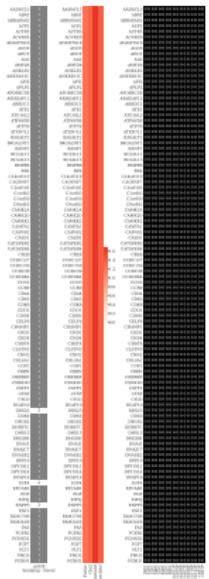


Figure: Clinical Data about LUAD for Smoking

# Clinical Data about LUAD for Smoking II



(a) Precancer



(b) Primary Cancer

Figure: Clinical Data about LUAD for Smoking with Precancer/Primary

# Notable genes in LUAD for Smoking I

## CREBRF

- ① CREBRF is the best indicator for Smoking.

## ACTR10

- ① ACTR10 is the best indicator for Smoking in Precancer.

## AADACL3

- ① AADACL3 is the best indicator for Smoking in Primary.

## 4. Results

### 4.9. Clinical Data with Point Mutation

#### 4.9.2. For Recurrence

# LUSC with Recurrence

Table: LUSC WES Data with Recurrence

Recurrence?	Stage	Number of Samples	
		Normal	Dysplasia
Recurrence	Normal	14	
	Dysplasia		4
	CIS+AIS	12	
	Primary	14	
	Total	44	
Non-recurrence	Normal	63	
	Dysplasia		1
	AAH	8	
	CIS+AIS	61	
	Primary	63	
	Total	196	

# Clinical Data about LUSC for Recurrence I

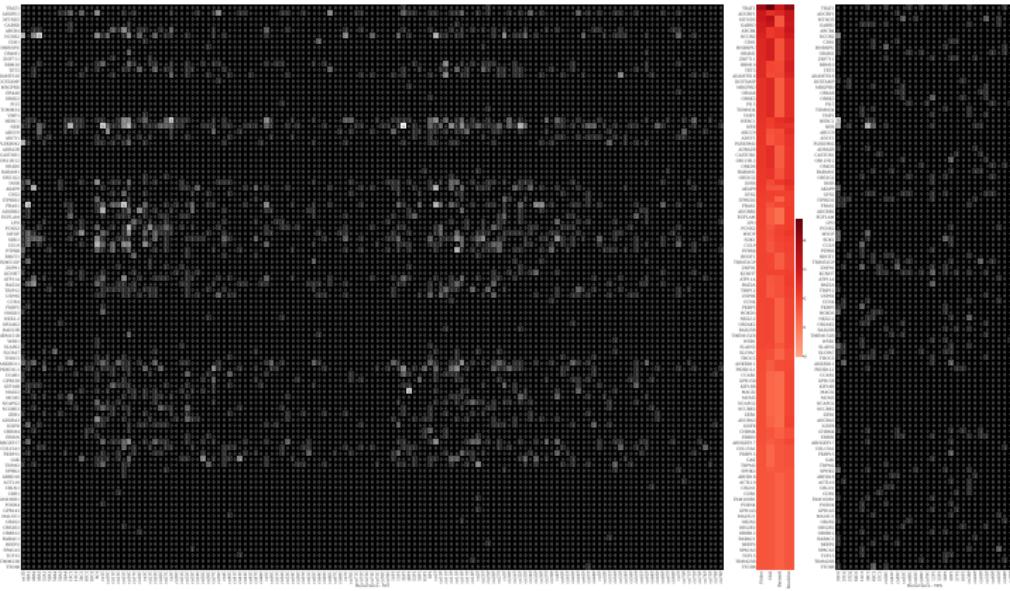


Figure: Clinical Data about LUSC for Recurrence

# Clinical Data about LUSC for Recurrence II

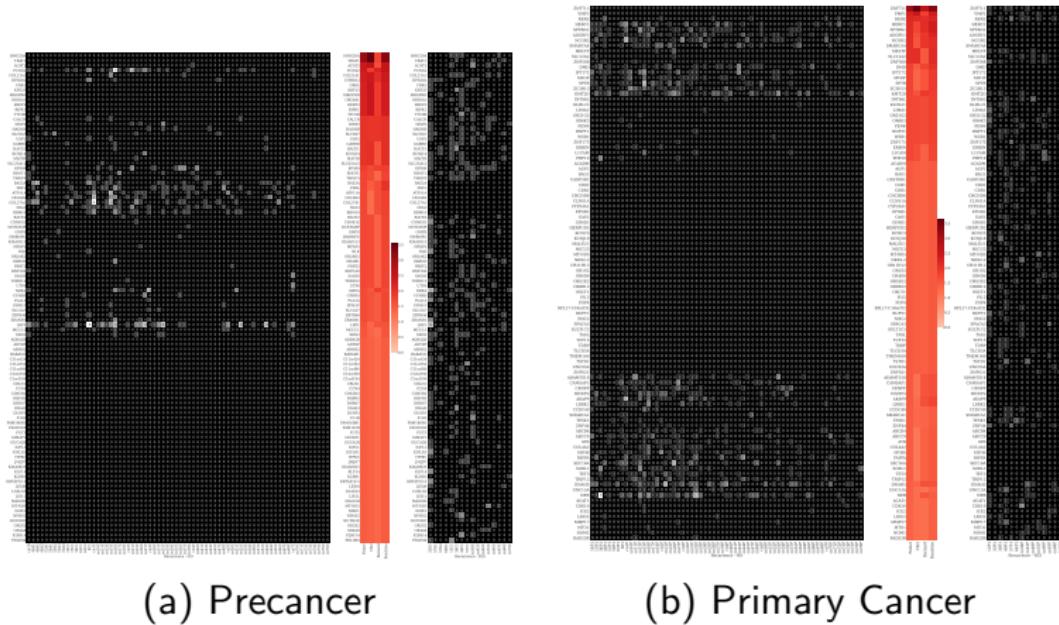


Figure: Clinical Data about LUSC for Recurrence with Precancer/Primary

# Notable genes in LUSC with Recurrence I

## TRAT1

- ① TRAT1 is the best indicator for Recurrence.

## HMG20A

- ① HMG20A is the best indicator for Recurrence in Precancer.

## ZNF711

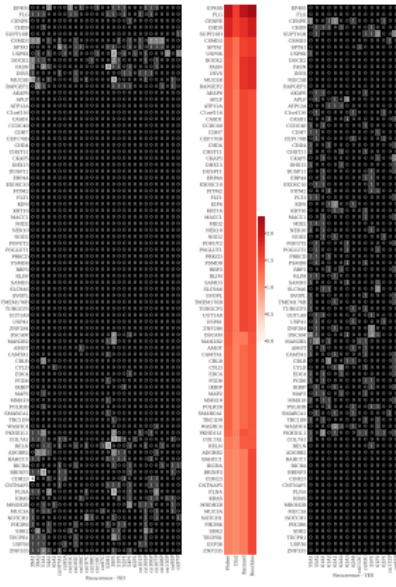
- ① ZNF711 is the best indicator for Recurrence in Primary.

# LUAD with Recurrence

Table: LUAD WES Data with Recurrence

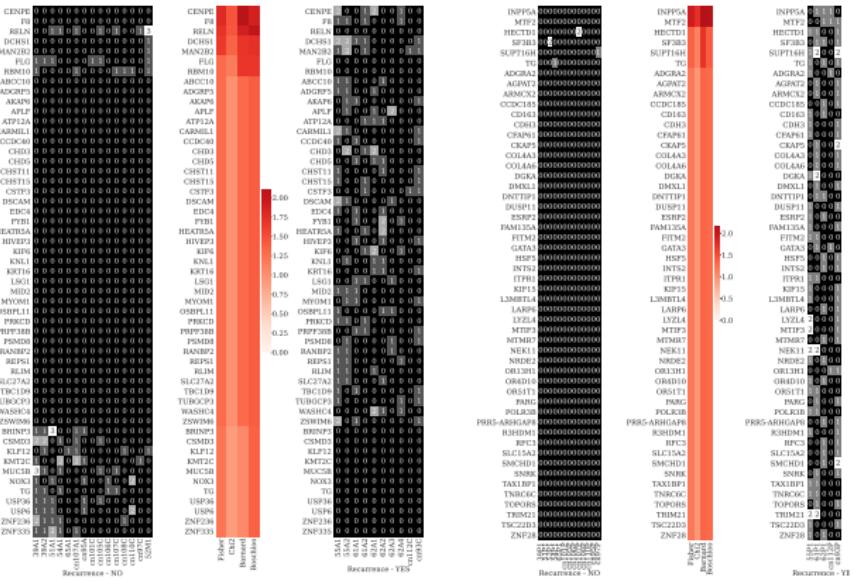
Recurrence?	Stage	Number of Samples	
		Normal	AAH
Recurrence	Normal	5	8
	AAH	2	5
	CIS+AIS	5	20
	Primary	20	
	Total		
Non-recurrence	Normal	13	7
	AAH	7	1
	CIS+AIS	13	41
	MIA		
	Primary		
	Total		

## Clinical Data about LUAD for Recurrence I



## Figure: Clinical Data about LUAD for Recurrence

## Clinical Data about LUAD for Recurrence II



(a) Precancer

(b) Primary Cancer

Figure: Clinical Data about LUAD for Recurrence with Precancer/Primary

# Notable genes in LUSC with Recurrence I

## EP400

- ① EP400 is the best indicator for Recurrence.

## CENPE

- ① CENPE is the best indicator for Recurrence in Precancer.

## INPP5A

- ① INPP5A is the best indicator for Recurrence in Primary.

# Findings in Clinical Data with Point Mutations

## 4. Results

### 4.10. Differences in Gene Expression Levels

# RSEM?

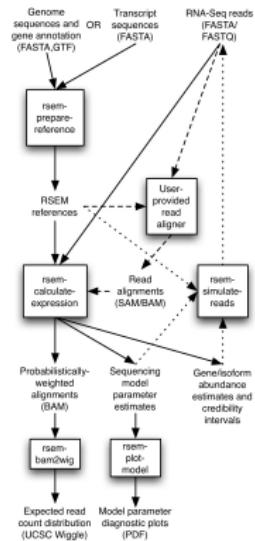


Figure: RSEM workflow (B. Li & Dewey, 2011)

# DESeq2?

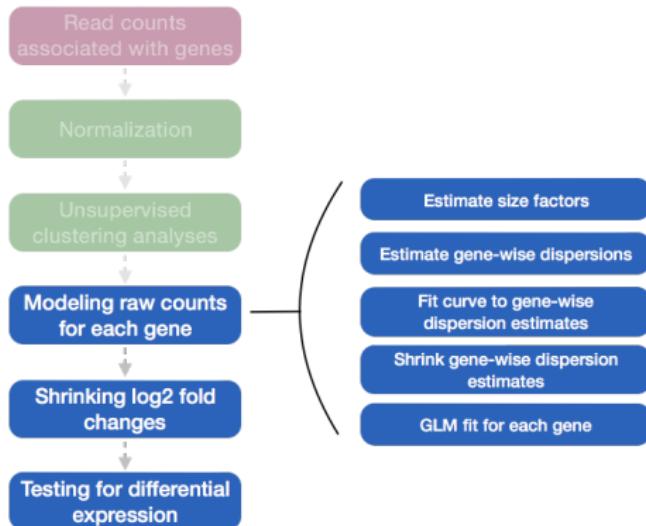


Figure: DESeq2 workflow (Love, Huber, & Anders, 2014)

# DEG Selection Strategy

DEG: differentially expressed genes

Fold Change

$$\log_2(\text{Fold Change}) > 1 \vee \log_2(\text{Fold Change}) < -1$$

P-value

$$P\text{-value} < 0.05$$

Adjusted P-value

$$P_{adj} < 0.05$$

# Enrichr?

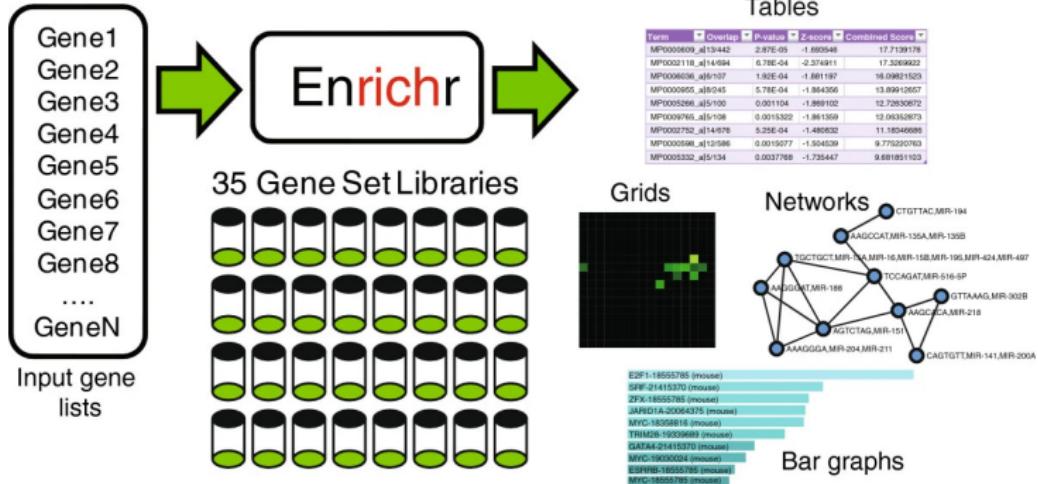


Figure: Enrichr workflow (E. Y. Chen et al., 2013; Kuleshov et al., 2016)

# Gene-set Library

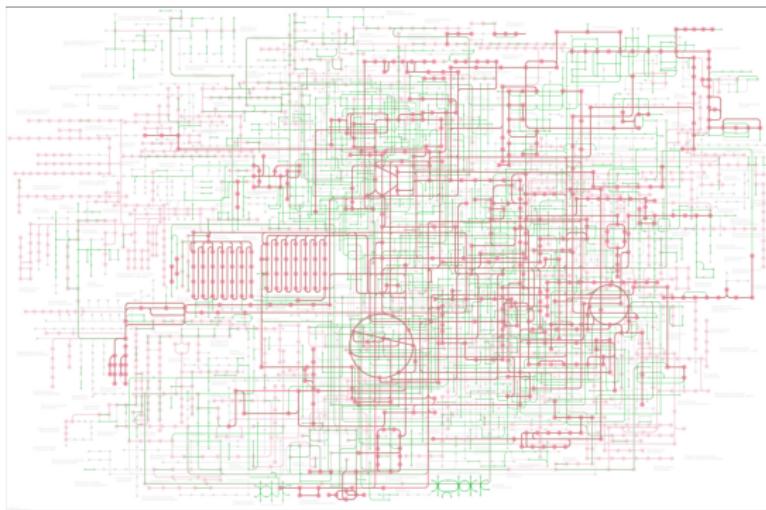


Figure: The global map of metabolic pathways by KEGG (Kanehisa et al., 2021)

KEGG

KEGG 2021 Human

# WTS Data Composition

Table: Number of WTS samples

Cancer Subtype	Stage	Number of Samples	
		Normal	17
LUSC	Dysplasia		2
	CIS+AIS		34
	Primary		36
	Total		89
LUAD	Normal		13
	AAH		1
	CIS+AIS		5
	Primary		6
	Total		25

# WTS Data Composition by Recur |

Table: Number of WTS LUSC samples

Recurrence?	Number of Samples	
	Stage	
Recurrence	Normal	1
	Dysplasia	1
	CIS+AIS	5
	Primary	6
	Total	13
Non-recurrence	Normal	16
	Dysplasia	1
	CIS+AIS	29
	Primary	30
	Total	76

# WTS Data Composition by Recur II

Table: Number of WTS LUAD samples

Recurrence?	Stage	Number of Samples	
		Normal	CIS+AIS
Recurrence	Normal	2	
	CIS+AIS		1
	Primary		1
	Total	4	
Non-recurrence	Normal	11	
	AAH		1
	CIS+AIS		4
	Primary		5
	Total	21	

# WTS Data Composition by Smoking I

Table: Number of WTS LUSC samples

Smoking?	Stage	Number of Samples	
		Normal	AIS
Never	Normal	1	
	CIS+AIS	1	
	Primary	2	
	Total	4	
Ex	Normal	8	
	Dysplasia	1	
	CIS+AIS	21	
	Primary	22	
	Total	52	
Current	Normal	8	
	Dysplasia	1	
	CIS+AIS	12	
	Primary	12	
	Total	33	

# WTS Data Composition by Smoking II

Table: Number of WTS LUAD samples

Smoking?	Stage	Number of Samples	
Never	Normal	10	
	AAH	1	
	CIS+AIS	3	
	Primary	4	
	Total	18	
Ex	Normal	3	
	CIS+AIS	1	
	Primary	1	
	Total	5	
Current	CIS+AIS	1	
	Primary	1	
	Total	2	

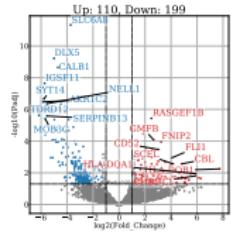
## 4. Results

### 4.10. Differences in Gene Expression Levels

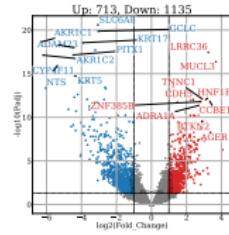
#### 4.10.1. Comparing cancer stage in LUSC

## DEG Volcano Plots in LUSC

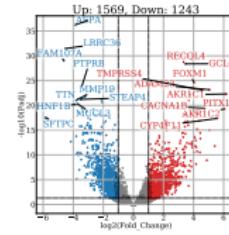
Normal → Dysplasia → CIS → Primary (LUSC)



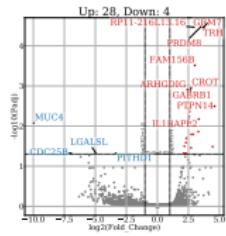
(a) Normal-Dysplasia



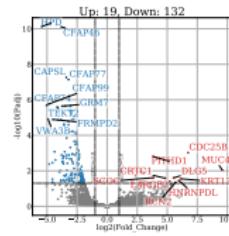
(b) Normal-CIS



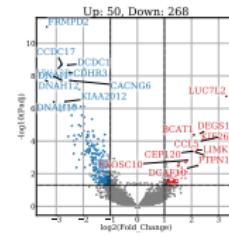
(c) Normal-Primary



(d) Dysplasia-CIS



(e) Dysplasia-Primary

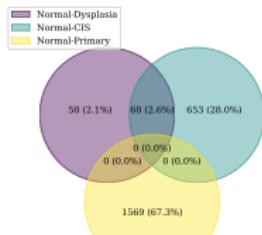


(f) CIS-Primary

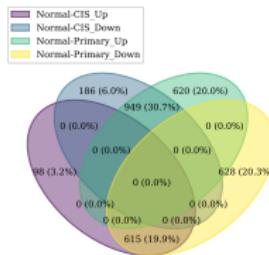
## Figure: DEG Volcano Plots in LUSC

# DEG Venn Diagram in LUSC

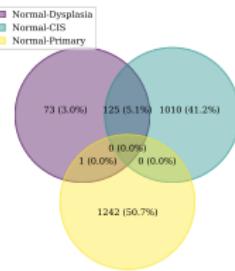
Normal → Dysplasia → CIS → Primary (LUSC)



(a) Up-regulated



(b) Both



(c) Down-regulated

Figure: DEG Venn Diagram in LUSC

# Enrichment test with Normal vs. Dysplasia in LUSC

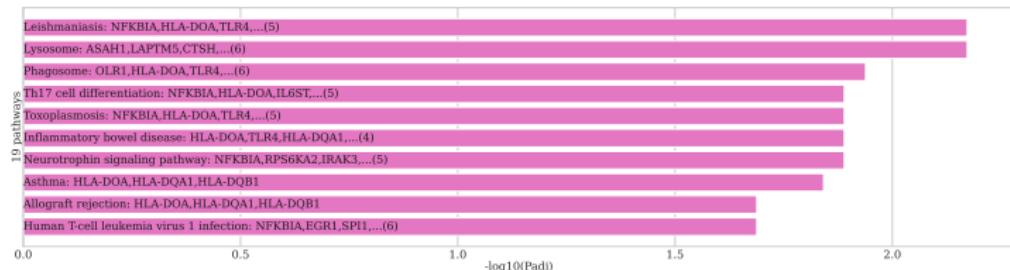


Figure: Up-regulated Pathways on Normal vs. Dysplasia



Figure: Down-regulated Pathways on Normal vs. Dysplasia

# Enrichment test with Normal vs. CIS in LUSC

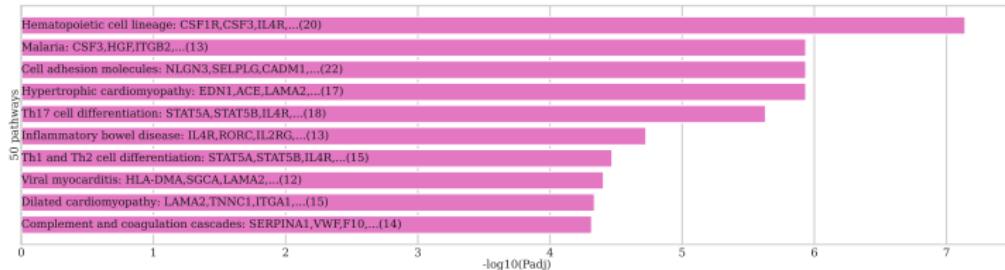


Figure: Up-regulated Pathways on Normal vs. CIS

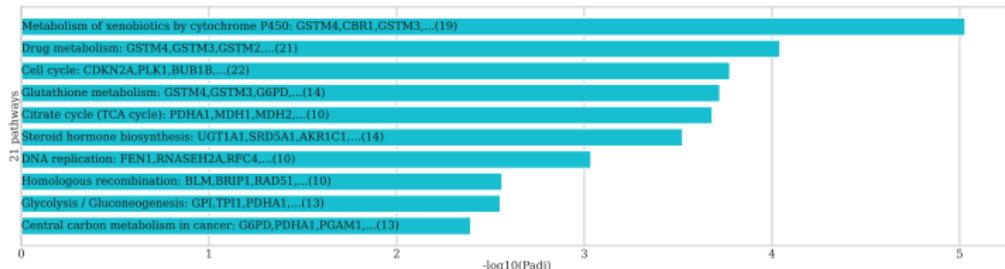


Figure: Down-regulated Pathways on Normal vs. CIS

# Enrichment test with Normal vs. Primary in LUSC

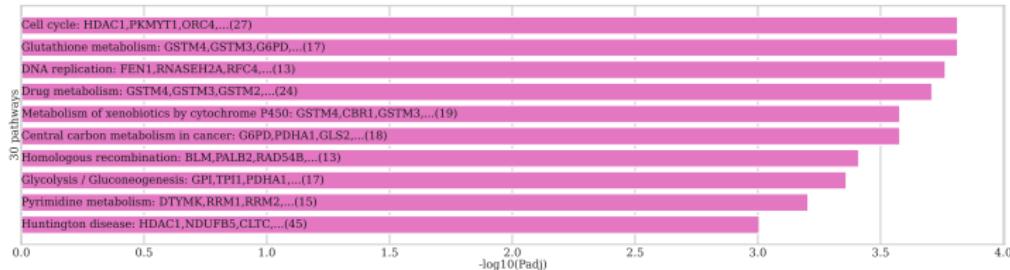


Figure: Up-regulated Pathways on Normal vs. Primary

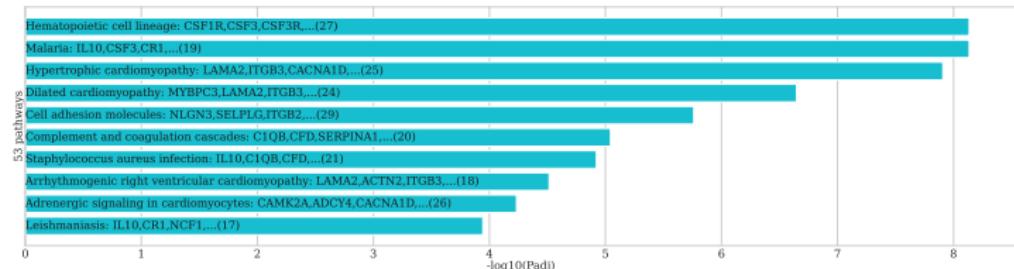


Figure: Down-regulated Pathways on Normal vs. Primary

# Findings in Comparing cancer stage in LUSC

## AKR1C1 & AKR1C2

- ① Down-regulated in CIS, but up-regulated in Primary.
- ② Regulate steroids (Jin et al., 2009) and hormones (Penning et al., 2000).
- ③ Promote the metastasis of NSCLC (Z. Hong et al., 2018).

## SFTPC

- ① Down-regulate in Primary than Normal.
- ② A pulmonary surfactant associated protein (Z. Lin et al., 2018).
- ③ SFTPC  $\downarrow \Rightarrow$  Poor survival in LUAD (B. Li et al., 2019).
- ④ Associated with lung disease in adult (Henderson et al., 2013) and baby (Brasch et al., 2004).

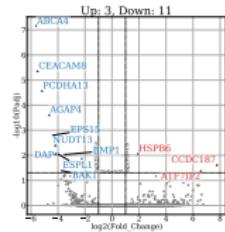
## 4. Results

### 4.10. Differences in Gene Expression Levels

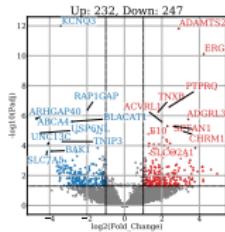
#### 4.10.2. Comparing cancer stage in LUAD

# DEG Volcano Plots in LUAD

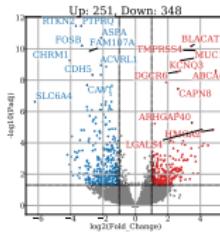
Normal → AAH → AIS → Primary (LUAD)



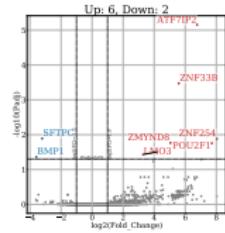
### (a) Normal-AAH



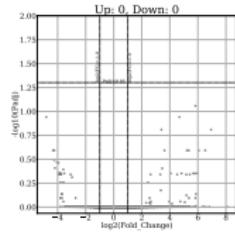
(b) Normal-AIS



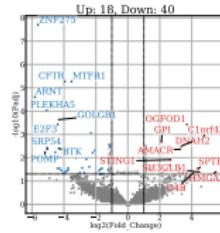
(c) Normal-Primary



(d) AAH-AIS



(e) AAH-Primary

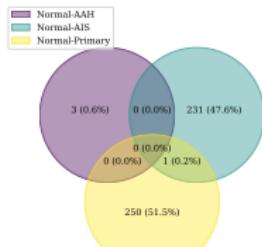


(f) AIS-Primary

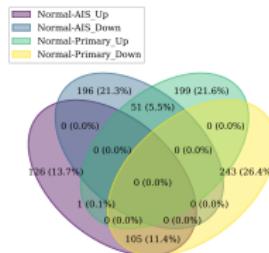
## Figure: DEG Volcano Plots in LUAD

# DEG Venn Diagram in LUAD

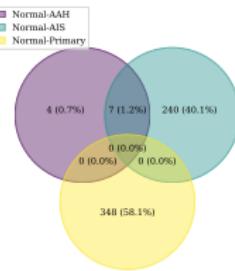
Normal → AAH → AIS → Primary (LUAD)



(a) Up-regulated



(b) Both



(c) Down-regulated

Figure: DEG Venn Diagram in LUAD

# Enrichment test with Normal vs. AAH in LUAD

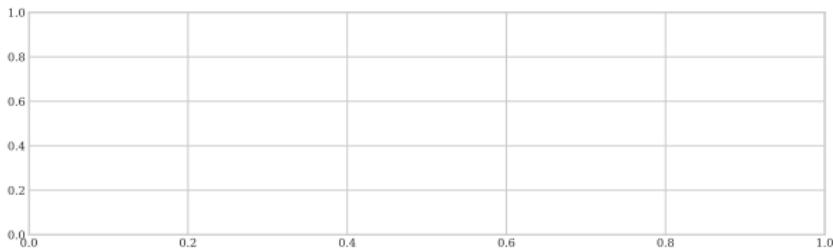


Figure: Up-regulated Pathways on Normal vs. AAH

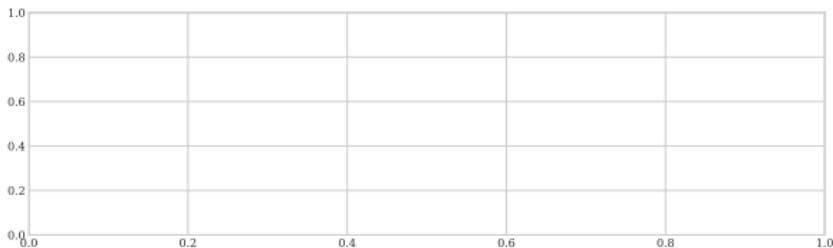


Figure: Down-regulated Pathways on Normal vs. AAH

# Enrichment test with Normal vs. AIS in LUAD

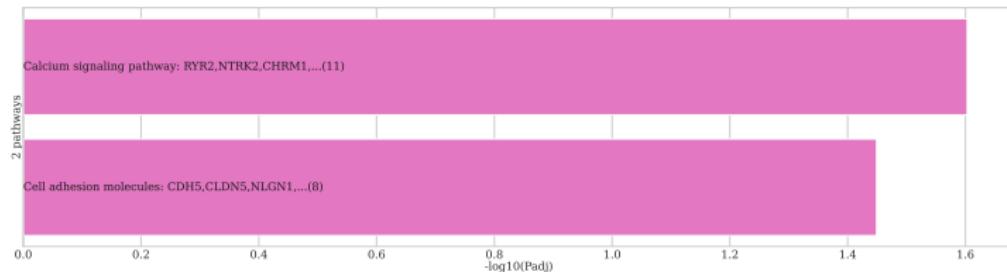


Figure: Up-regulated Pathways on Normal vs. AIS



Figure: Down-regulated Pathways on Normal vs. AIS

# Enrichment test with Normal vs. Primary in LUAD

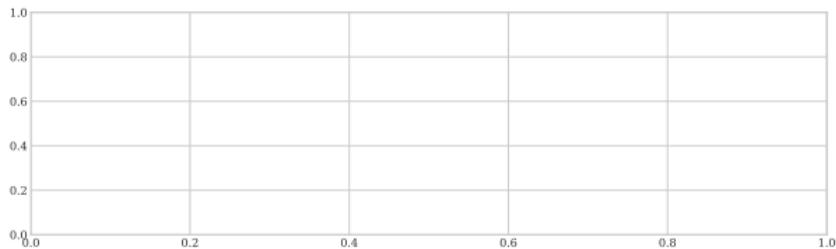


Figure: Up-regulated Pathways on Normal vs. Primary

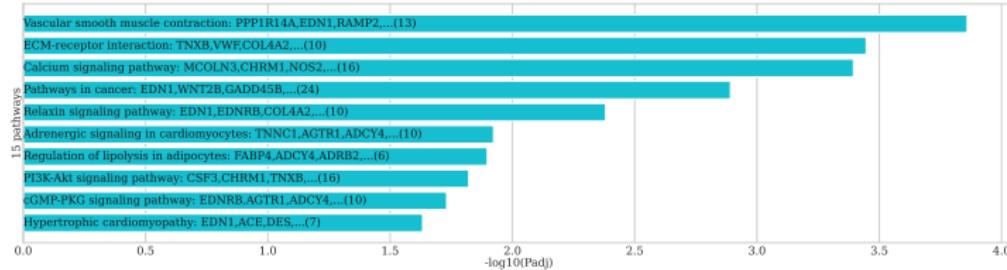


Figure: Down-regulated Pathways on Normal vs. Primary

# Finding in Comparing cancer stage in LUAD I

## ABCA4

- ① Down-regulated in AAH & AIS, but up-regulated in Primary.
- ② It is associated with ophthalmology (Maugeri et al., 2000).
- ③ It shows lung cancer susceptibility in Korean patients (Lee, Lee, Yoon, & Lee, 2013).

## KCNQ3

- ① Down-regulated in AIS, but up-regulated in Primary.
- ②  $K^+$  voltage-dependent channels  $\Rightarrow$  Various physiological functions (Schroeder, Kubisch, Stein, & Jentsch, 1998; Surti, Huang, Jan, Jan, & Cooper, 2005; Singh et al., 2003).
- ③ Up-regulated microRNAs in hypoxia-induced LUAD (Geng et al., 2016).
- ④ KCNQ gene family is associated with lung diseases (Mondejar-Parreño, Perez-Vizcaino, & Cogolludo, 2020).

# Finding in Comparing cancer stage in LUAD III

## CHRM1

- ① Up-regulated in AIS, but down-regulated in Primary.
- ② Various cellular responses ⇒ neurodevelopmental disorders (Marcé-Grau et al., 2021), schizophrenia (Dean & Scarr, 2021), and Alzheimer's disease (Counts et al., 2007).
- ③ Reported down-regulation in LUSC & LUAD (G. Ma et al., 2019).

## 4. Results

### 4.10. Differences in Gene Expression Levels

#### 4.10.3. Recur vs. Non-recur in LUSC

Table: Number of WTS LUSC samples

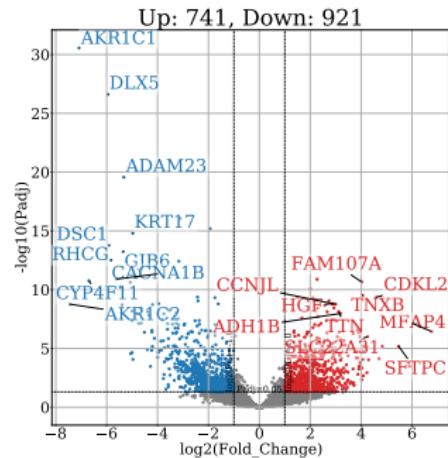
Recurrence?	Stage	Number of Samples	
		Normal	Dysplasia
Recurrence	Normal	1	
	Dysplasia		1
	CIS+AIS	5	
	Primary	6	
	Total	13	
Non-recurrence	Normal	16	
	Dysplasia		1
	CIS+AIS	29	
	Primary	30	
	Total	76	

## Pooled normal samples

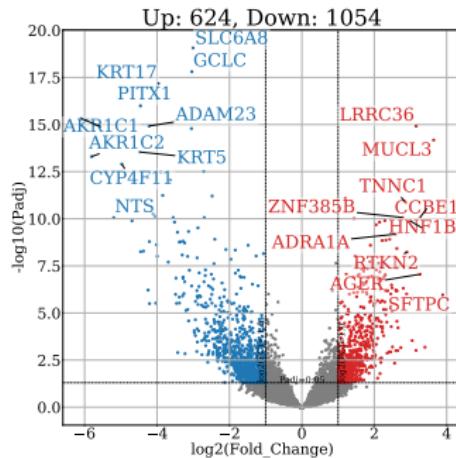
In order to compare with Normal stage, merging Normal samples.

∴ Insufficient number of Normal samples in Recur.

# DEG Volcano Plots for R vs. NR with CIS in LUSC



(a) Recur



(b) Non-recur

Figure: DEG Volcanot Plot with CIS in LUSC

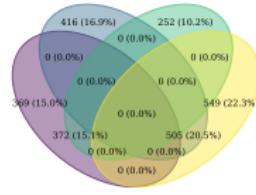
# DEG Venn Diagram for R vs. NR with CIS in LUSC

Recur  
Non-recur



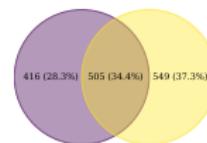
(a) Up-regulated

Recur\_Up  
Recur\_Down  
Non-recur\_Up  
Non-recur\_Down



(b) Both

Recur  
Non-recur



(c) Down-regulated

Figure: DEG Venn Diagram for R vs. NR with CIS in LUSC

# Enrichment test for Recur-specific with CIS in LUSC

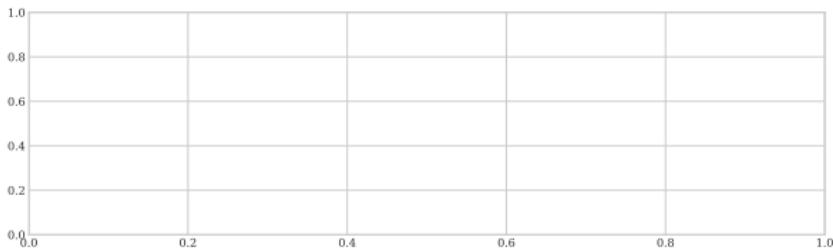


Figure: Up-regulated Pathways for Recur-specific

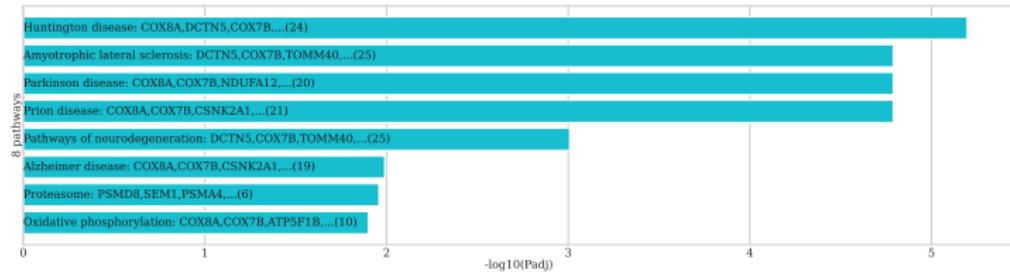


Figure: Down-regulated Pathways for Recur-specific

# Enrichment test for Non-recr-specific with CIS in LUSC

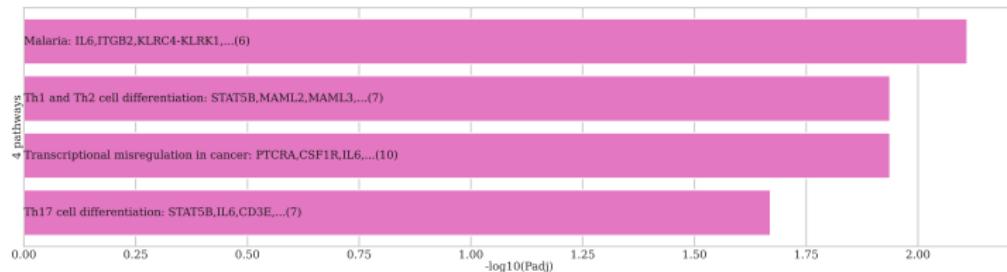


Figure: Up-regulated Pathways for Non-recr-specific



Figure: Down-regulated Pathways for Non-recr-specific

# Enrichment test for Intersected with CIS in LUSC

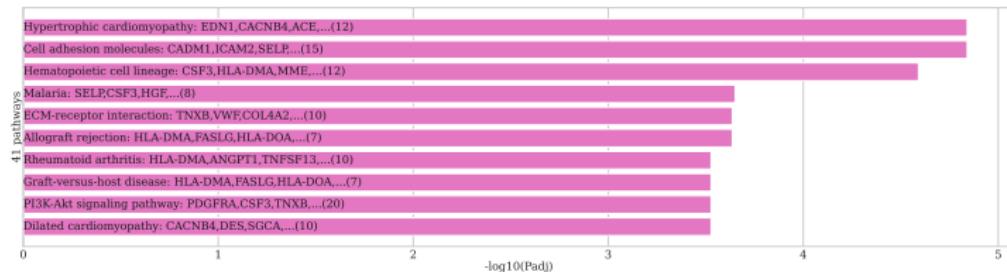


Figure: Up-regulated Pathways for Intersected

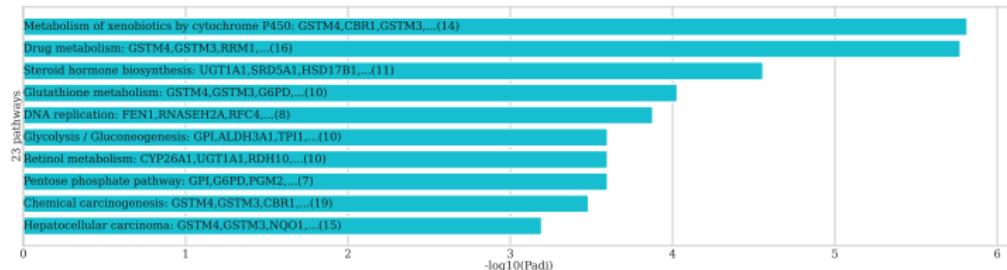
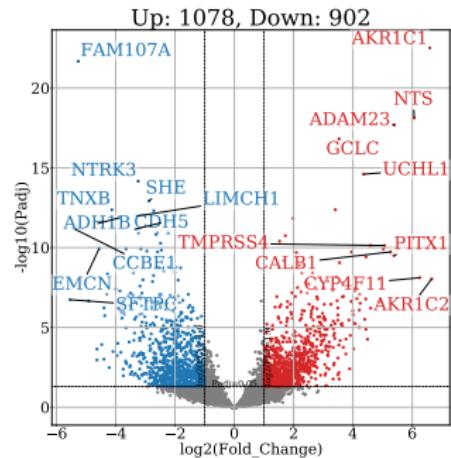
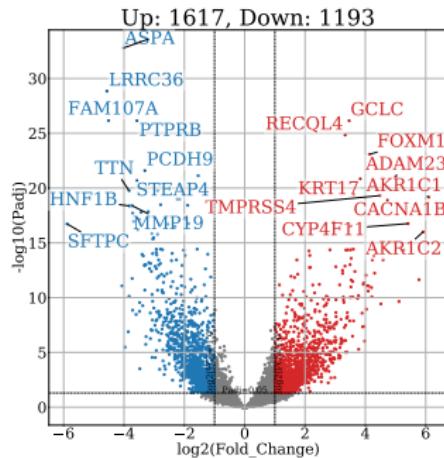


Figure: Down-regulated Pathways for Intersected

# DEG Volcano Plots for R vs. NR with Primary in LUSC



(a) Recur

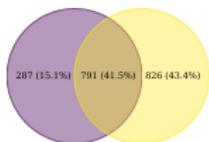


(b) Non-recur

Figure: DEG Volcanot Plot with Primary in LUSC

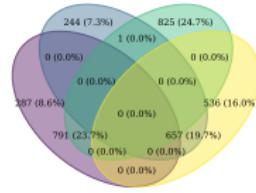
# DEG Venn Diagram for R vs. NR with Primary in LUSC

Recur  
Non-recur



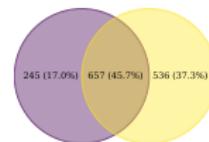
(a) Up-regulated

Recur\_Up  
Recur\_Down  
Non-recur\_Up  
Non-recur\_Down



(b) Both

Recur  
Non-recur



(c) Down-regulated

Figure: DEG Venn Diagram for R vs. NR with Primary in LUSC

# Enrichment test for Recur-specific with Primary in LUSC

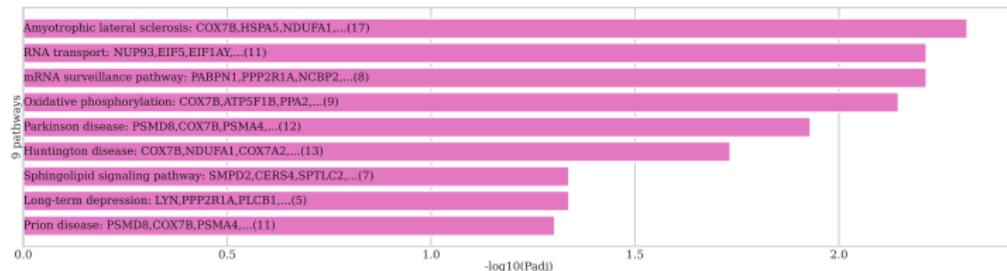


Figure: Up-regulated Pathways for Recur-specific

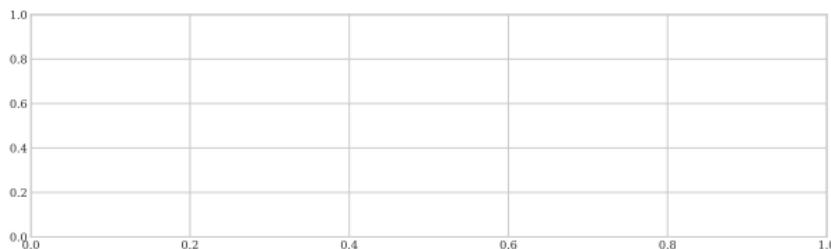


Figure: Down-regulated Pathways for Recur-specific

# Enrichment test for NR-specific with Primary in LUSC

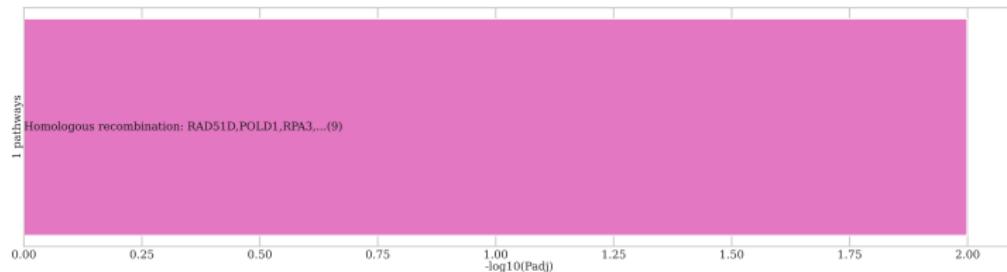


Figure: Up-regulated Pathways for Non-recur-specific

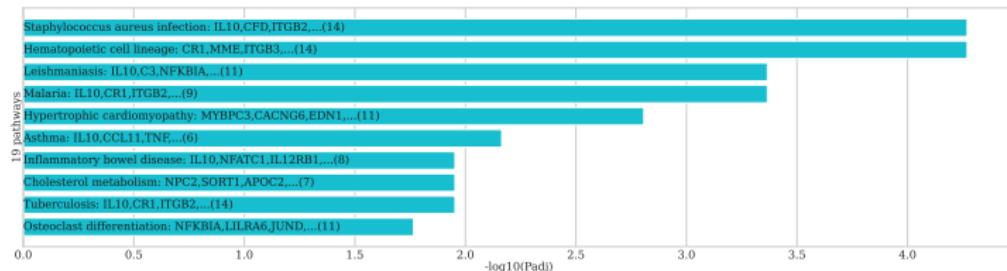


Figure: Down-regulated Pathways for Non-recur-specific

# Enrichment test for Intersected with Primary in LUSC

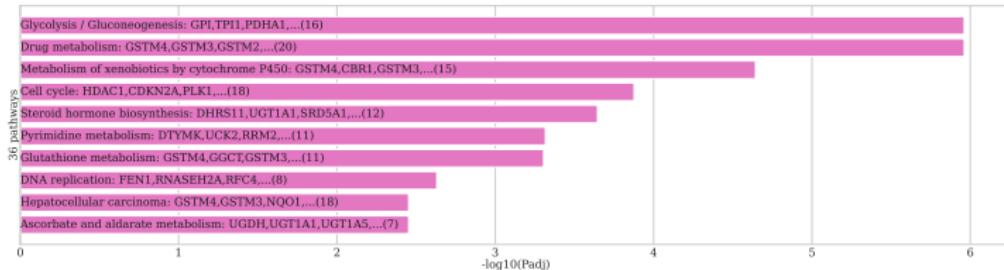


Figure: Up-regulated Pathways for Intersected

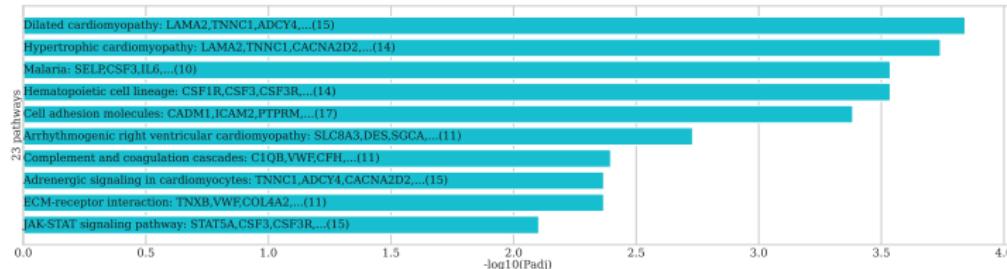


Figure: Down-regulated Pathways for Intersected

# Finding in Comparing Recur vs. Non-recur in LUSC I

## NTS

- ① Highly up-regulated in Recur patients.
- ② Neurotensin.
- ③ Association with non-gastrointestinal cancers (Nikolaou et al., 2020).
- ④ Modulate lung cancer cell plasticity and heterogeneity (Wu et al., 2019).

## NTRK3

- ① Highly down-regulated in Recur patients.
- ② Activation of NTRK3 in LUSC (Bollig-Fischer et al., 2021).
- ③ NTRK3 mutation has association with immunotherapy in LUAD (Niu et al., 2020).

# Finding in Comparing Recur vs. Non-recur in LUSC II

## RECQL4

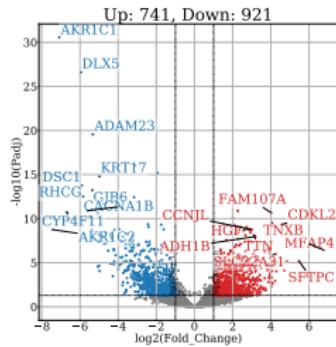
- ① Highly up-regulated in Non-recur patients.
- ② DNA-dependent ATPase (Yin, Kwon, Varshavsky, & Wang, 2004)
- ③ RECQL4 modulate chromosome segregation (Yin et al., 2004)
- ④ RECQL5 promotes metastasis & resistance in NSCLC (Xia, Zhang, Yuan, & Niu, 2021)
- ⑤ RECQL4 ↑ ⇒ Poor prognosis in breast cancer (X. Zhu et al., 2018)
  - ① Overall survival
  - ② Distant metastasis-free survival
  - ③ Relapse-free survival

## 4. Results

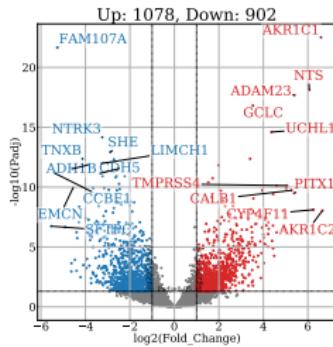
### 4.10. Differences in Gene Expression Levels

#### 4.10.4. Within Recur in LUSC

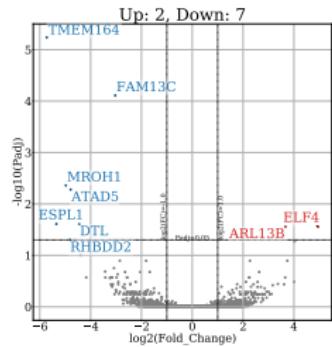
# DEG Volcano Plots with Recur in LUSC



(a) Normal-CIS



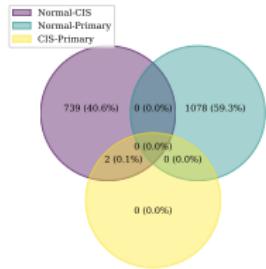
(b) Normal-Primary



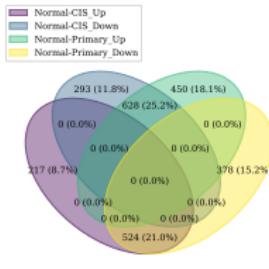
(c) CIS-Primary

Figure: DEG Volcano Plots with Recur samples in LUSC

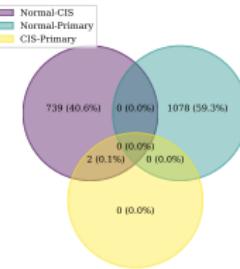
# DEG Venn Diagram with Recur in LUSC



(a) Up-regulated



(b) Both



(c) Down-regulated

Figure: DEG Venn Diagram with Recur samples in LUSC

# Enrichment test with Normal vs. CIS for Recur

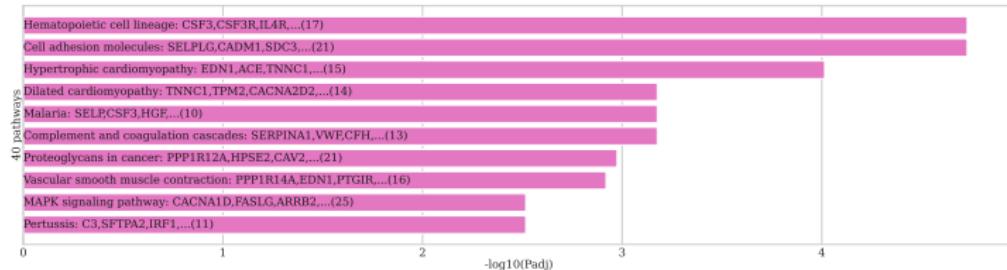


Figure: Up-regulated Pathways on Normal vs. CIS for Recur in LUSC

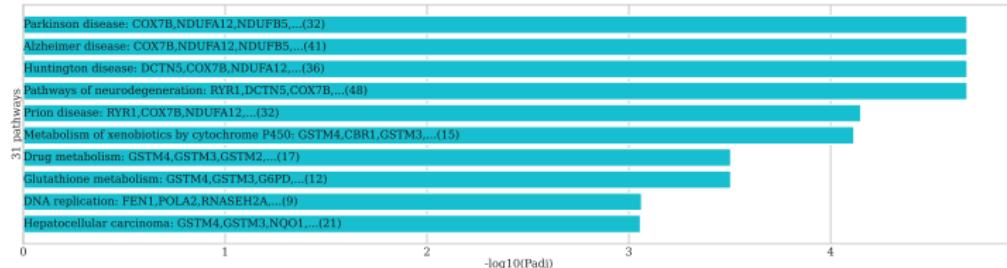


Figure: Down-regulated Pathways on Normal vs. CIS for Recur in LUSC

# Enrichment test with Normal vs. Primary for Recur

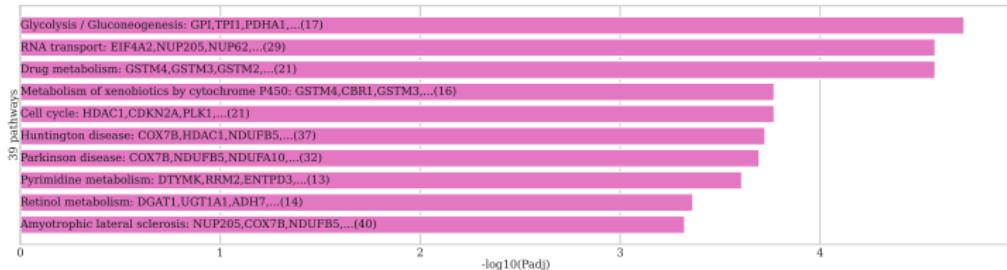


Figure: Up-regulated Pathways on Normal vs. Primary for Recur in LUSC

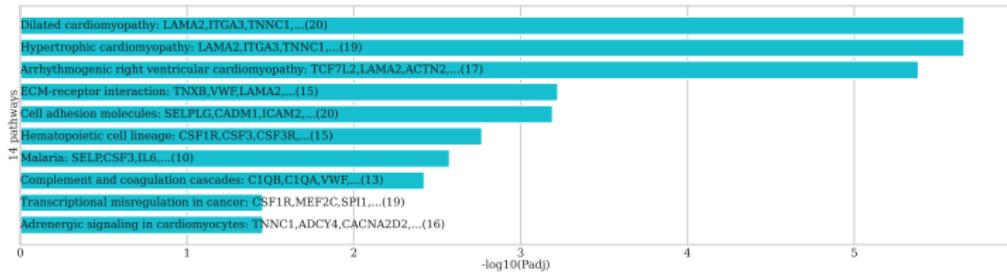


Figure: Down-regulated Pathways on Normal vs. Primary for Recur in LUSC

# Finding in Comparing within Recur in LUSC I

## AKR1C1

- ① Down-regulated in CIS, but up-regulated in Primary.
- ② Regulate steroids (Jin et al., 2009) and hormones (Penning et al., 2000).
- ③ Promote the metastasis of NSCLC (Z. Hong et al., 2018)

## ADAM23

- ① Down-regulated in CIS, but up-regulated in Primary.
- ② Play a role in cell-cell and cell-matrix interactions (Cal, Freije, López, Takada, & Lopez-Otin, 2000)
- ③ Suppresses metastasis in lung carcinoma cells (Ota et al., 2016)
- ④ ADAM protein was lower in NSCLC than in normal tissue & benign pulmonary lesions (Hu et al., 2011)

## FAM107A

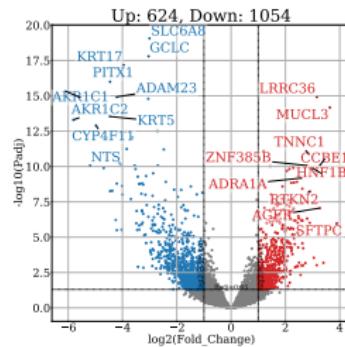
- ① Up-regulated in CIS, but down-regulated in Primary.
- ② May play a role in tumor development (L. Wang et al., 2000)
- ③ Negatively regulates focal adhesion assembly (Le et al., 2010)

## 4. Results

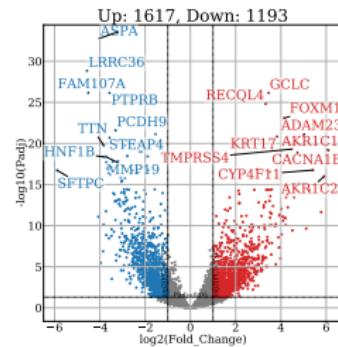
### 4.10. Differences in Gene Expression Levels

#### 4.10.5. Within Non-recur in LUSC

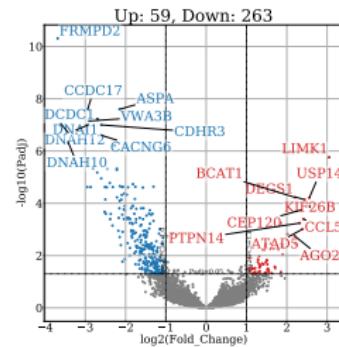
# DEG Volcano Plots with Non-recr in LUSC



(a) Normal-CIS



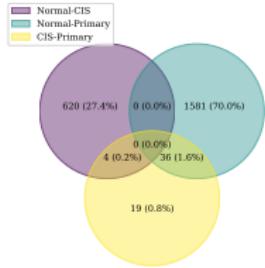
(b) Normal-Primary



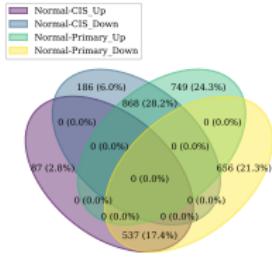
(c) CIS-Primary

Figure: DEG Volcano Plots with Non-recr samples in LUSC

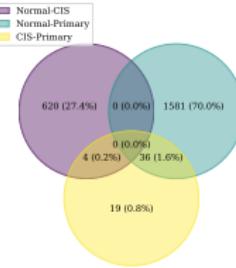
# DEG Venn Diagram with Non-recur in LUSC



(a) Up-regulated



(b) Both



(c) Down-regulated

Figure: DEG Venn Diagram with Non-recur in LUSC

# Enrichment test with Normal vs. CIS for Non-recur

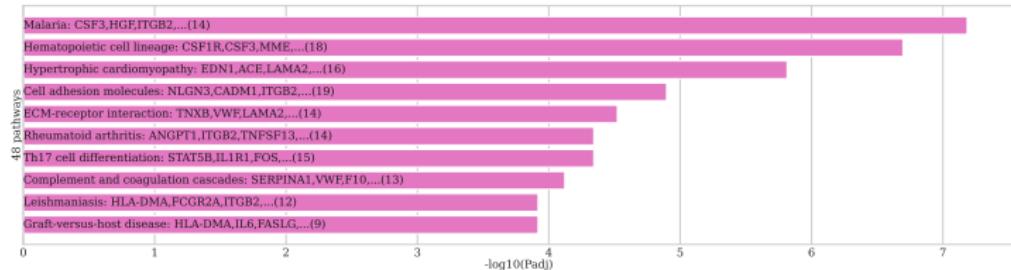


Figure: Up-regulated Pathways on Normal vs. CIS for Non-recur in LUSC

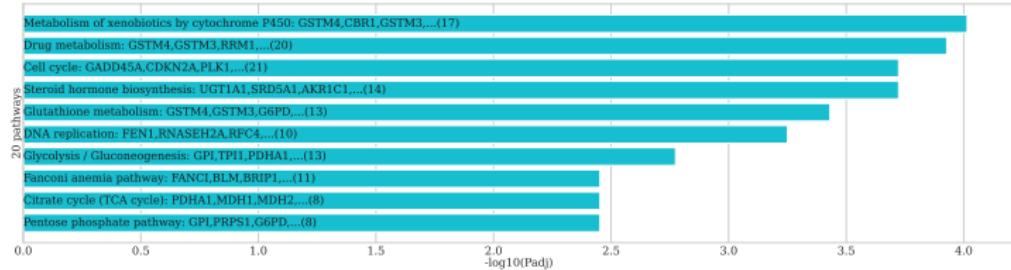


Figure: Down-regulated Pathways on Normal vs. CIS for Non-recur in LUSC

# Enrichment test with Normal vs. Primary for Non-recur

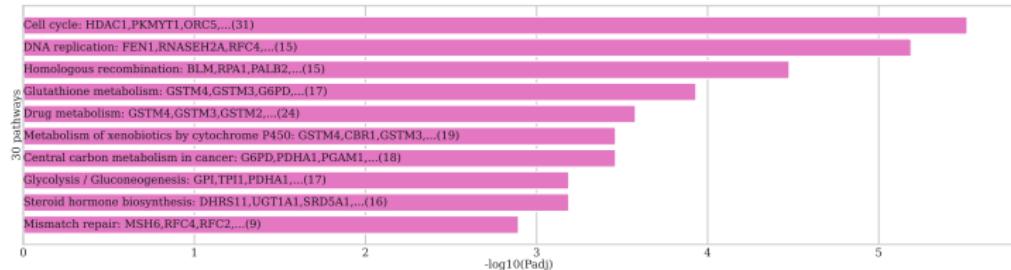


Figure: Up-regulated Pathways on Normal vs. Primary for Non-recur in LUSC

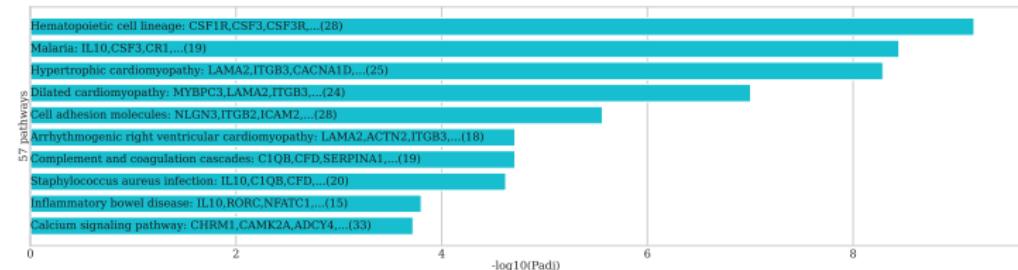


Figure: Down-regulated Pathways on Normal vs. Primary for Non-recur in LUSC

# Finding in Comparing within Non-recur in LUSC I

## AKR1C1 & AKR1C2

- ① Down-regulated in CIS, but up-regulated in Primary.
- ② Regulate steroids (Jin et al., 2009) and hormones (Penning et al., 2000)
- ③ Promote the metastasis of NSCLC (Z. Hong et al., 2018)

## CYP4F11

- ① Down-regulated in CIS, but up-regulated in Primary.
- ② Involved in the metabolism, including fatty acid and their derivatives (Edson et al., 2013; Kalsotra, Turman, Kikuta, & Strobel, 2004; Dhar, Sepkovic, Hirani, Magnusson, & Lasker, 2008)
- ③ CYP4F11 showed a strong association with survival in colorectal cancer (Alnabulsi, Swan, Cash, Alnabulsi, & Murray, 2017).

## LRRC36

- ① Up-regulated in CIS, but down-regulated in Primary.
- ② Leucine-rich repeat-containing protein 36
- ③ LRRC36 is positively correlated with survival in LUAD (Zhang et al., 2017).

## 4. Results

### 4.10. Differences in Gene Expression Levels

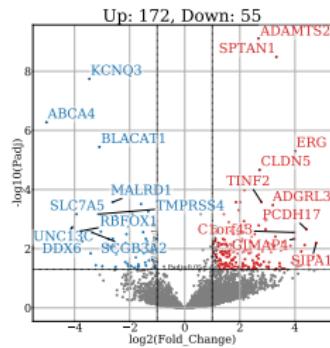
#### 4.10.6. Within Non-recur in LUAD

# LUAD Data Composition

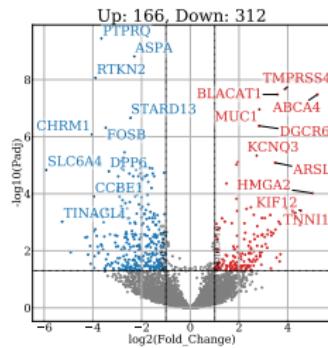
Table: Number of WTS LUAD samples

Recurrence?	Stage	Number of Samples	
Recurrence	Normal		2
	CIS+AIS		1
	Primary		1
	Total		4
Non-recurrence	Normal		11
	AAH		1
	CIS+AIS		4
	Primary		5
	Total		21

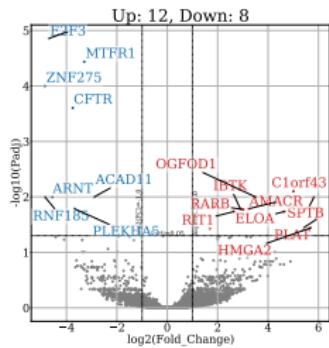
# DEG Volcano Plots with Non-recr in LUAD



(a) Normal-AIS



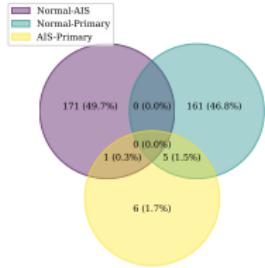
(b) Normal-Primary



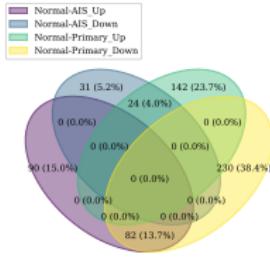
(c) AIS-Primary

Figure: DEG Volcano Plots with Non-recr samples in LUAD

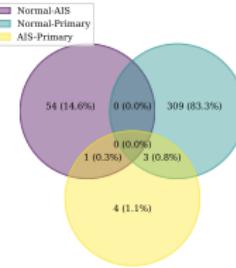
# DEG Venn Diagram with Non-recur in LUAD



(a) Up-regulated



(b) Both



(c) Down-regulated

Figure: DEG Venn Diagram with Non-recur in LUAD

# Enrichment test with Normal vs. AIS in LUAD

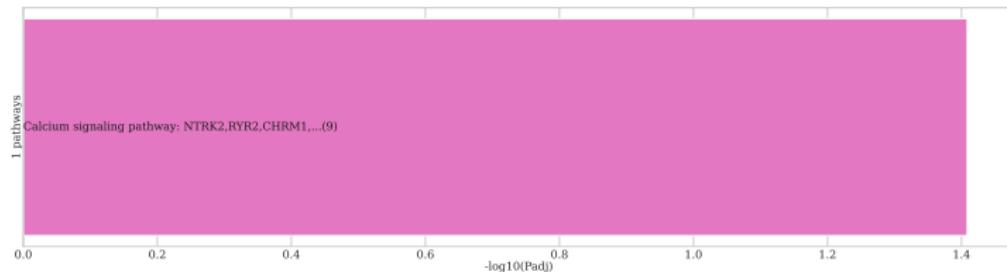


Figure: Up-regulated Pathways on Normal vs. AIS for Non-recur in LUAD

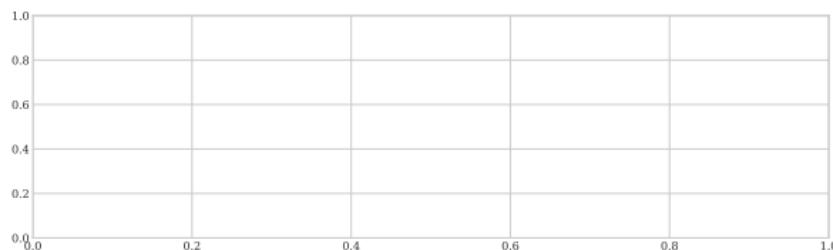


Figure: Down-regulated Pathways on Normal vs. AIS for Non-recur in LUAD

# Enrichment test with Normal vs. Primary in LUAD

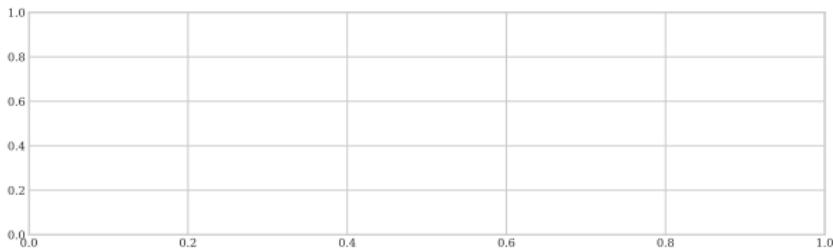


Figure: Up-regulated Pathways on Normal vs. Primary for Non-recur in LUAD

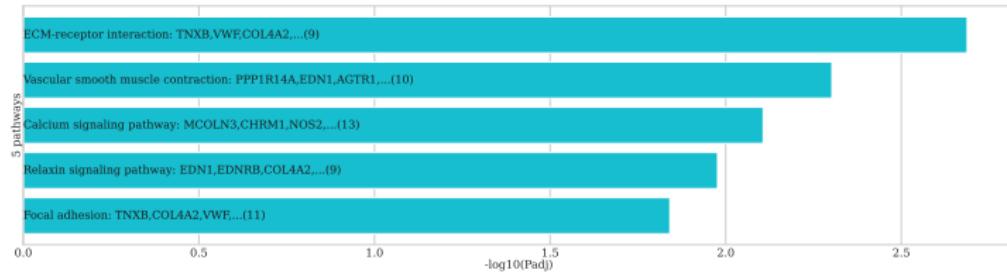


Figure: Down-regulated Pathways on Normal vs. Primary for Non-recur in LUAD

## KCNQ3

- ① Down-regulated in AIS, but up-regulated in Primary.
- ②  $K^+$  voltage-dependent channels  $\Rightarrow$  Various physiological functions (Schroeder et al., 1998; Surti et al., 2005; Singh et al., 2003)
- ③ Up-regulated microRNAs in hypoxia-induced LUAD (Geng et al., 2016)
- ④ KCNQ gene family is associated with lung diseases (Mondejar-Parreño et al., 2020)

## BLACAT1

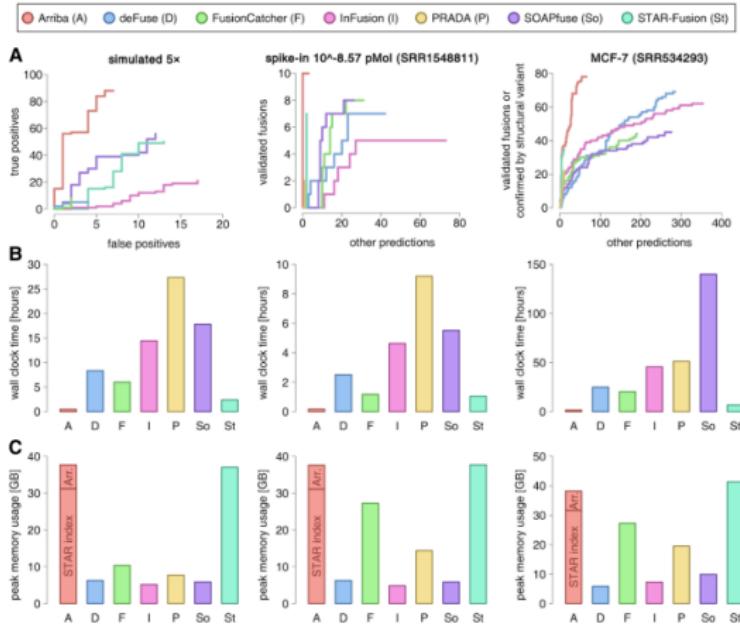
- ① Down-regulated in AIS, but up-regulated in Primary.
- ② Bladder cancer-associated transcript 1
- ③ Chemo-resistance of NSCLC (Huang et al., 2019)
- ④ Predicts poor prognosis in SCLC (W. Chen et al., 2019)
- ⑤ Up-regulated in many human cancers (Ye, Yang, Liu, Lv, & Ye, 2020)

# Findings in DEG Analysis

## 4. Results

### 4.11. Discovery of Gene Fusion

# Arriba?



**Figure:** Benchmark of Arriba versus alternative methods (Uhrig et al., 2021)

# Findings in Gene Fusion Discovery

## 5. Discussion

## 6. References

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