TCGA (Home Page)

The Cancer Genome Atlas (TCGA), founded in December of 2005, is a cancer genomics program hosted by the <u>National Cancer Institute</u> and the National Human Genome Research Institute. The publicly available data from this project includes <u>genomic</u>, epigenomic, <u>transcriptomic</u>, and proteomic data. This data was collected from 20,000 different samples that span 33 different cancer types, including breast cancer, which we will be focusing on this semester.

Program History

Describe one outcome or impact of TCGA: <u>TCGA serves as a rich source of publicly available data for</u> genomics, which is of great benefit for the research community.

Briefly skim the "Timeline & Milestones" page. When did TCGA publish their paper on breast cancer? October 2012.

Because TCGA is a public dataset, and one of the first of its kind, they faced some initial concerns regarding the ethics of releasing health data to the public. Choose one of the papers in the "Ethics & Policies" section to skim. What is one way that your paper addresses these privacy concerns? To address the issue of informed consent, TCGA gives donors of tissue specimens specific information about the program, types of data being generated, and potential risks so that they can make a more informed decision.

TCGA Cancers Selected for Study:

List three criteria used to select which cancers to study: <u>poor prognosis</u>, <u>overall public health impact</u>, <u>and availability of samples that meet standards for patient consent</u>

Open the breast ductal carcinoma page and read TCGA's provided background. List one interesting fact you found: Men can get breast cancer.

Publications by TCGA:

TCGA published (at least) one paper on each of their studied cancer types. These papers, called marker papers, include an early analysis of the data, including any molecular characterizations that were performed. Read the abstract of the 2012 breast ductal carcinoma cancer paper. List any genes you come across (these may be good starting points for your future analyses of this cancer): TP53, PIK3CA, GATA3, MAP3K1

Using TCGA:

Go to the Genomic Data Commons (GDC) Data Portal via the link on TCGA home. This portal lets you view TCGA's data in a visual way. Let's explore this website. According to the Data Portal Summary, there are <u>72</u> projects in the GDC data portal. Now click on the "Projects" tab. Notice that not all projects in this data portal are TCGA-affiliated, though TCGA does make up ~46% of the projects included.

Under the "Program" tab, select just TCGA studies. According to the graph at the top of the page, <u>TP53</u> is the most mutated gene in TCGA projects, affecting approximately <u>33%</u> of cases.

Return to the GDC Portal home page. Now click the breast image in the diagram to the right of the page. This directs you to the "Exploration" tab and automatically selects all primary sites associated with breast cancers. Now select TCGA as the program, and TCGA-BRCA as the project. This is the data we will be focusing on this semester.

The table on this page shows each patient along with their data. Feel free to explore the data files by clicking on any of the links provided.

Now explore the Cases, Genes, Mutations, and OncoGrid tabs above the pie charts. What is one takeaway from the plots provided here: <u>TP53 and PIK3CA seem to be about equally mutated in this</u> certain subgroup.

As you can see, the GDC portal provides an overwhelming amount of information. Feel free to continue to explore it on your own time!

Discussion:

1. What is the goal of TCGA?

To increase the amount of publicly available high-quality cancer data to improve research, prognostics, diagnostics, and other cancer treatments.

2. What are some ways that we use TCGA's data for our own cancer research? (Think about the types of data available and brainstorm some research questions that can be proposed given that data.)

TCGA's expansive dataset can prove useful in data-hungry fields such as machine learning and artificial intelligence, where certain clinical and demographic, genomic, transcriptomic, etc. data can be used to predict cancer outcomes such as recurrence and overall/progression-free survival.

3. What are the benefits and drawbacks of TCGA or other large publicly available datasets?

The fact that the data is publicly available is both a benefit and a drawback. Public availability may equate to better outcomes and productivity for the scientific research community. On the other hand, data privacy, misuse, and the cost associated with maintaining such large databases as TCGA are possible drawbacks.