Urinary Biomarkers for Predicting Pancreatic Cancer

Urinary Biomarkers for Pancreatic Cancer

Preface

Abstract

List of Abbreviations

• PDAC: Pancreatic ductal adenocarcinoma

SN: sensitivitySP: specificity

Contents

P	reface	ĺ
A	bstract	ii
Li	ist of Abbreviations	iii
1	Introduction	1
2	Methods	2
3	Results 3.1 Demographics	
4	Conclusion	5
5	Discussion	5
6	References	6

1 Introduction

https://www.gov.uk/government/statistics/cancer-survival-in-england-for-patients-diagnosed-between-2014-and-2018-and-followed-up-until-2019/cancer-survival-in-england-for-patients-diagnosed-between-2014-and-2018-and-followed-up-to-2019

2 Methods

3 Results

3.1 Demographics

The patients were divided by diagnosis and the PDAC patients are further separated by the stage of the disease. The number of samples per diagnosis and stage are shown in Table 1.

Table 1: Demographics of the samples

Sample type	Control		Benign		PDAC		
Sample type	Sample	Sex	Sample	Sex	Sample	Sex	Cancer stage
Urine (n=590)	183	F = 115	208	F = 101	209	F = 83	I-IIA = 27 II-IIB = 75
Orme ($n=390$)		M = 68		M = 107		M = 116	III = 76 IV = 21
Plagma (n=250)	92	F = 58	108	F = 57	150	F = 86	I-IIA = 20 II-IIB = 60
Plasma (n=350)		M = 34		M = 51		M = 64	III = 65 IV = 5

3.2 REG1B outperforms REG1A in detecting early stage PDAC

Though the performance of REG1A and REG1B are very similar, REG1B outperformed REG1A when control and benign samples were compared to stage I-IIA PDAC samples (Kruskal-Wallis test; p < 0.001 & p < 0.0002). [Table 2] Therefor, all experiments following were performed using REG1B as part of the biomarker panel.

Table 2: Adjusted p-values of Kruskal-Wallis test, Dunn's multiple comparisons; ns - not significant. The header shows the groups that were compared.

	Control - I-II	Control - I-IIA	Control - III-IV
REG1A	1.928479e-05	ns	4.837915e-07
REG1B	3.864924e-15	0.0002123534	5.789369e-17

	Benign - I-II	Benign - I-IIA	Benign - III-IV
REG1A	0.000768779	ns	4.494778e-05
REG1B	1.200471e-12	0.001777207	3.927231e-14

3.3 Correlation in urine biomarkers for different diagnosis groups

The biomarker panel was tested in a total of 590 urine samples (183 control, 208 benign, and 199 PDAC). According to the PCA, the LYVE1 and REG1B biomarkers are close related to each other. Aside from that, the different diagnosis groups create clusters, meaning there is significant difference between the samples.

PCA of complete dataset Diagnosis PCI (50.8% explained var.)

Figure 1: PCA plot showing the correlations between the biomarkers. Data is log transformed.

4 Conclusion

- REG1A shows no significant difference when control samples are compared to PDAC stage I-IIA samples, though REG1B does show significance: REG1B outperforms REG1A in detecting PDAC in early stages.
- LYVE1 and REG1B are closely related biomarkers. A good focus for the prediction following.

5 Discussion

6 References