

# Hypothesis

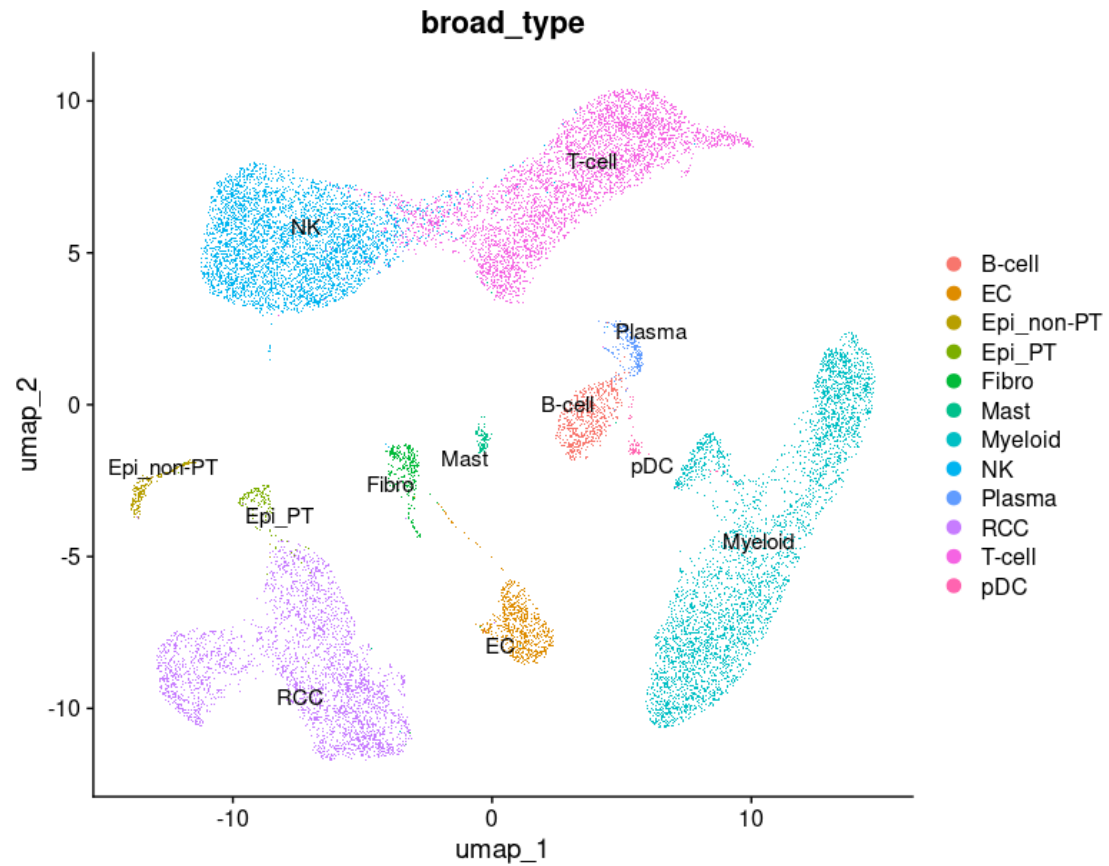
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# Clinicopathological info of kidney patients

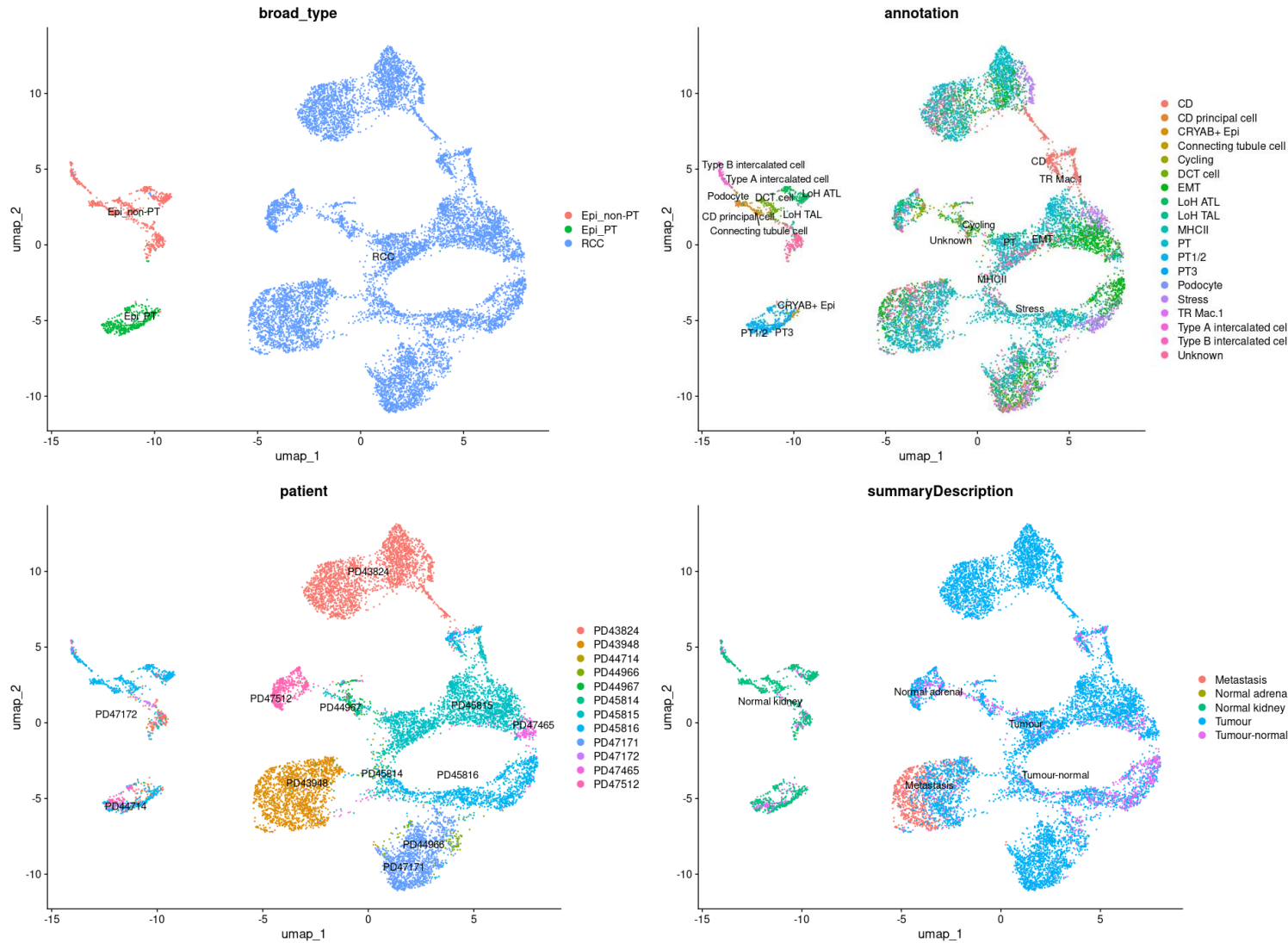
Patient_ID	sex	age	stage	metastases	grade	necrosis	sarcomatoid changes	lymphovascular invasion	Leibovich	Histology	VHL	PBRM1	BAP1	SETD2	TSC2	KDM5C
PD43824	male	41-50	1b	0	2	no	no	no	2	ccRCC	ns-sub					
PD43948	female	71-80	3a	1	4	yes	yes	yes	8	ccRCC					bifs	
PD44714	male	51-60	NA	0	NA				NA	Benign						
PD44966	male	51-60	1a	0	3	no	no	no	1	ccRCC	fs		fs			
PD44967	male	71-80	NA	1	4	no	no	no	8	ccRCC	-	-	-	-	-	-
PD45814	male	61-70	3a	0	4	yes	yes	yes	8	ccRCC	fs	fs				
PD45815	male	51-60	3a	0	2	no	no	no	4	ccRCC	fs					
PD45816	female	71-80	3a	0	4	yes	yes	yes	9	ccRCC			ns-sub			
PD47171	female	51-60	3a	0	4	yes	yes	yes	7	ccRCC	ns-sub	fs	ns-sub			
PD47172	male	51-60	NA	0	NA				NA	oncocytoma						
PD47465	female	61-70	3a	0	3	no	no	yes	5	ccRCC	ns-sub	fs		fs		ns-sub
PD47512	male	51-60	3a	0	4	yes	yes	yes	8	ccRCC	fs	ns-sub		ns-sub		

Malfunction of **VHL**, a crucial driver of ccRCC, leads to accumulation HIF-2α  
**TSC2** frameshift mutation leads to loss of mTOR pathway suppression

# Identification of human ccRCC cell populations



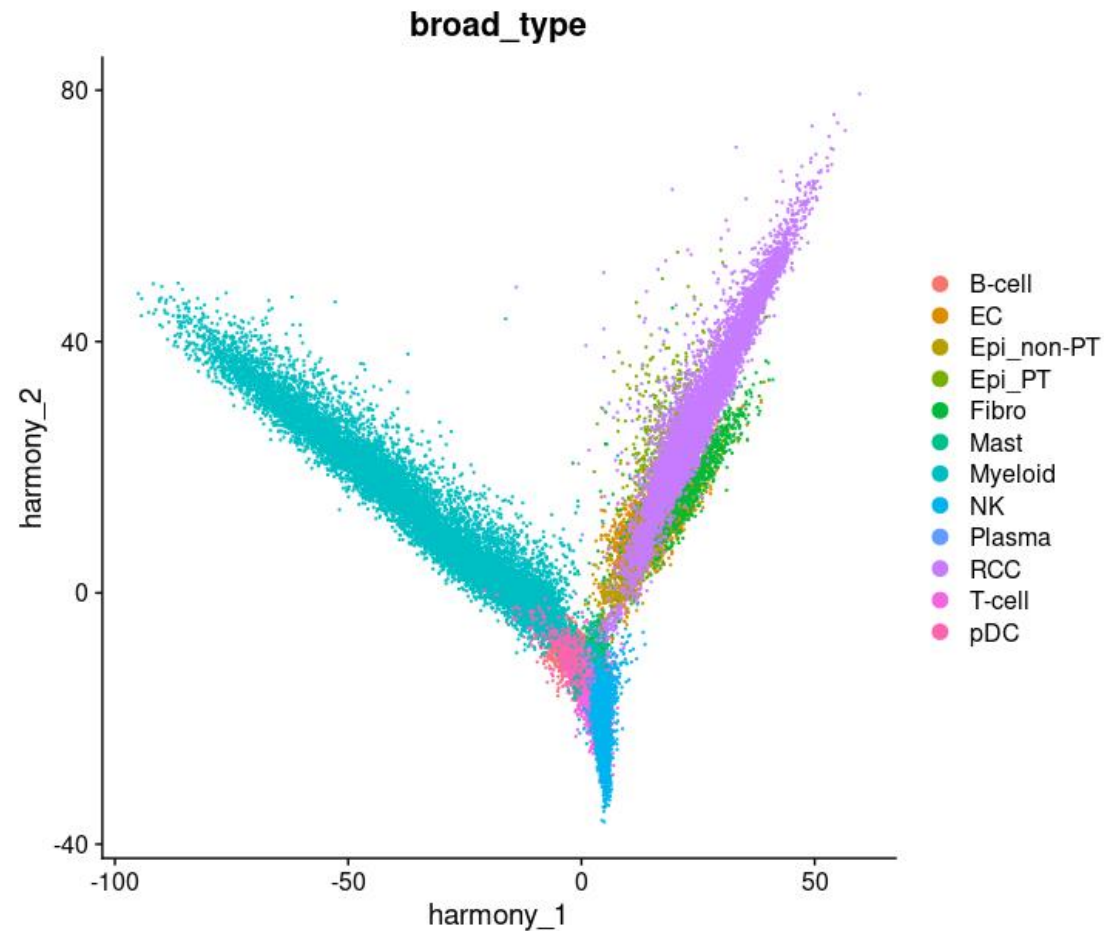
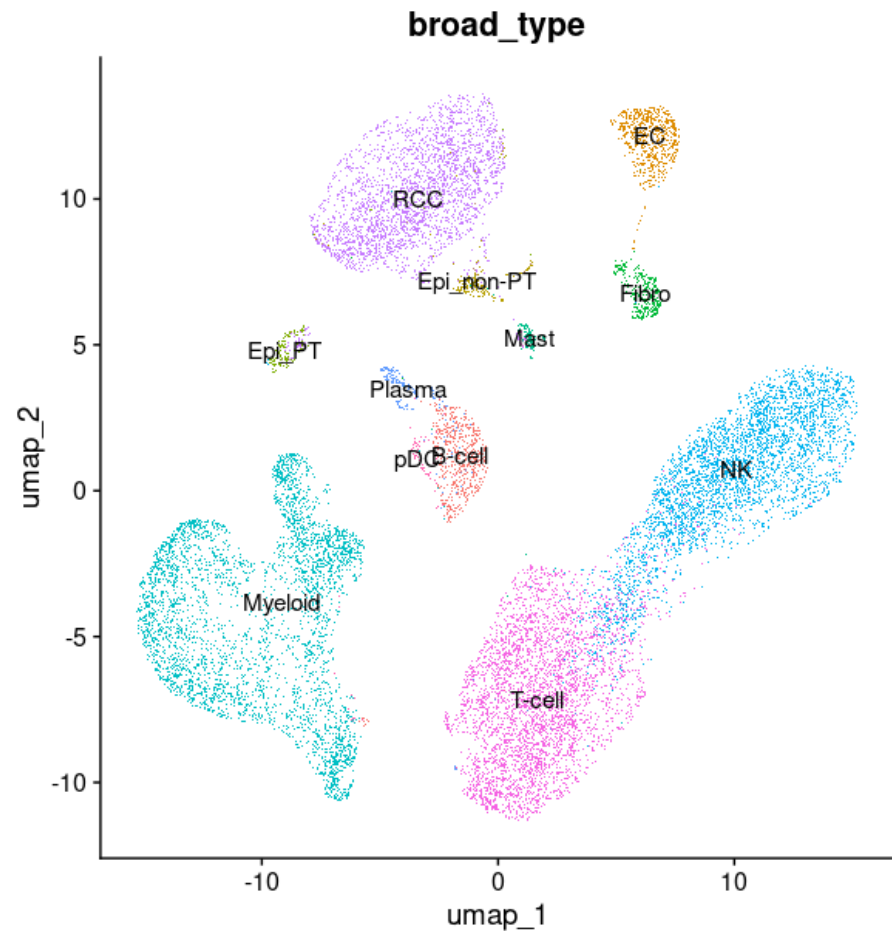
# Epithelial cells of RCC



✓ Clusters unique to a donor through heterogeneity can bias the pseudo-time trajectory

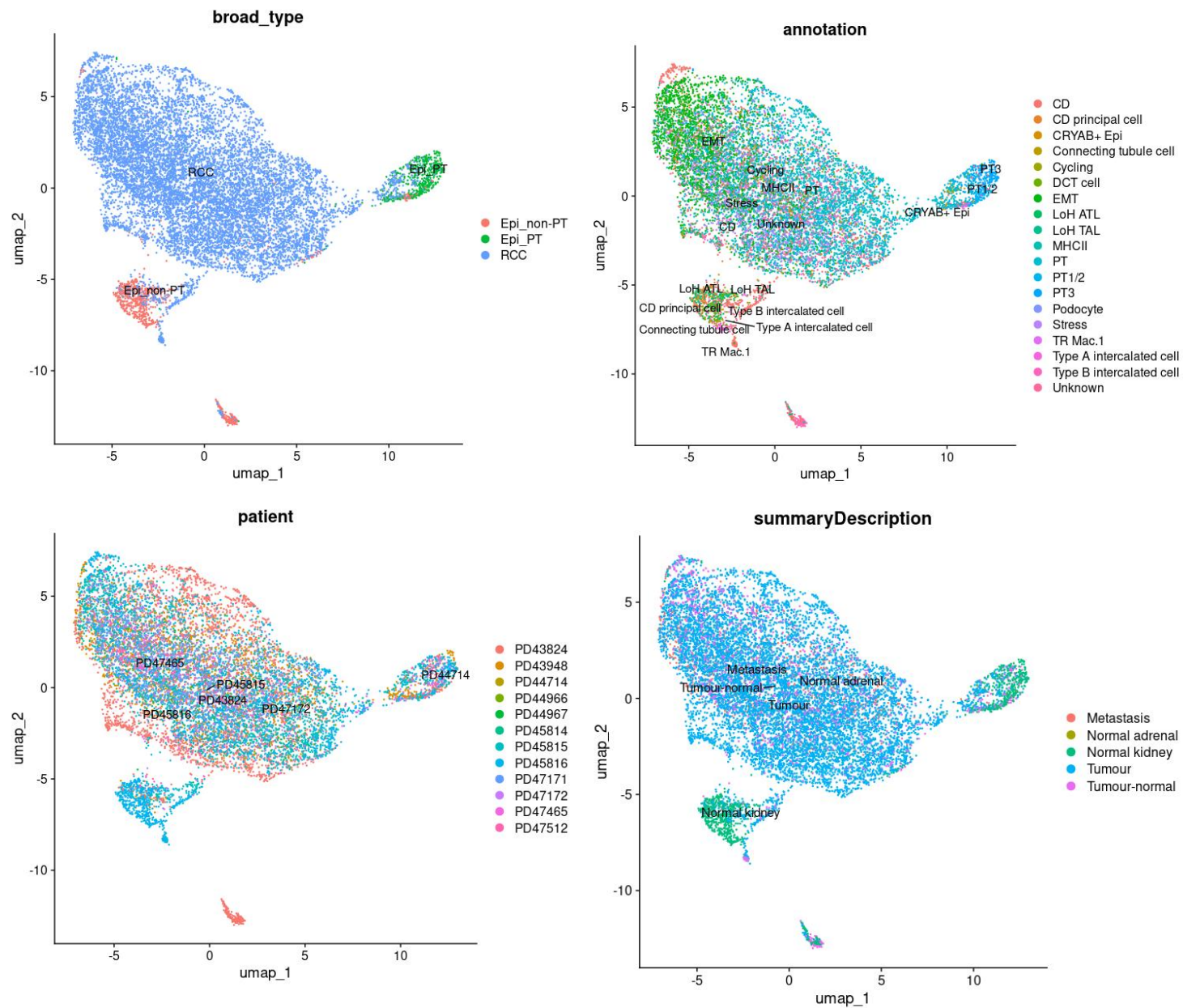
→ Harmonization is needed

# After harmonization



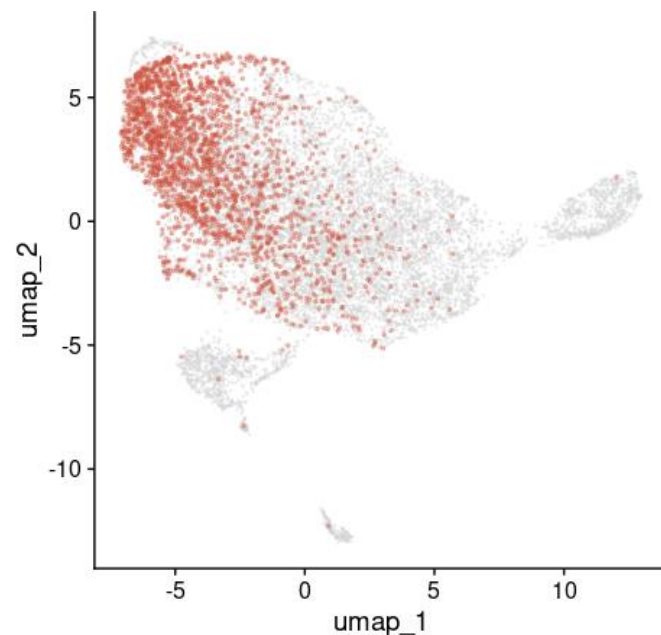
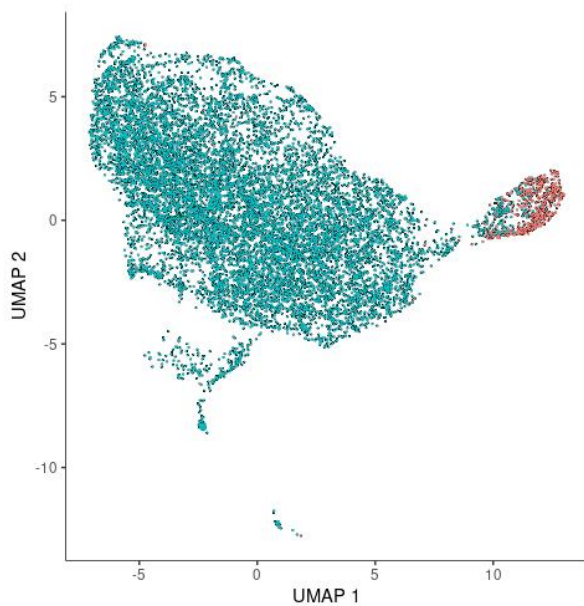
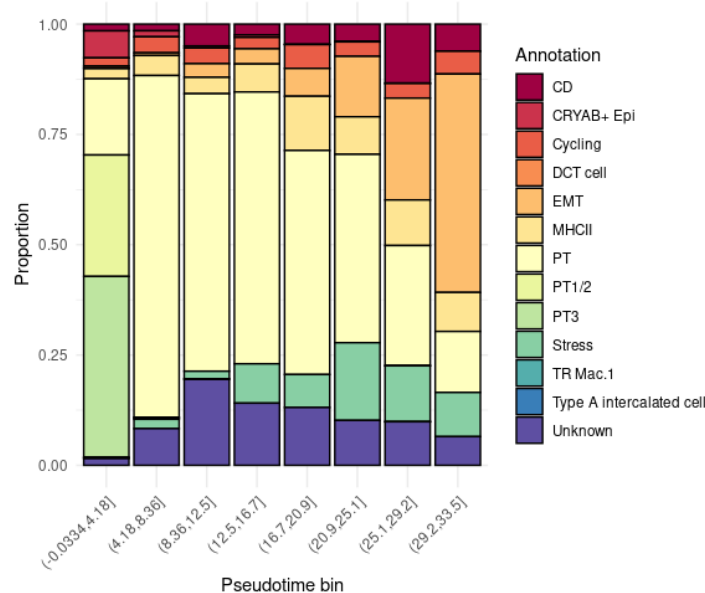
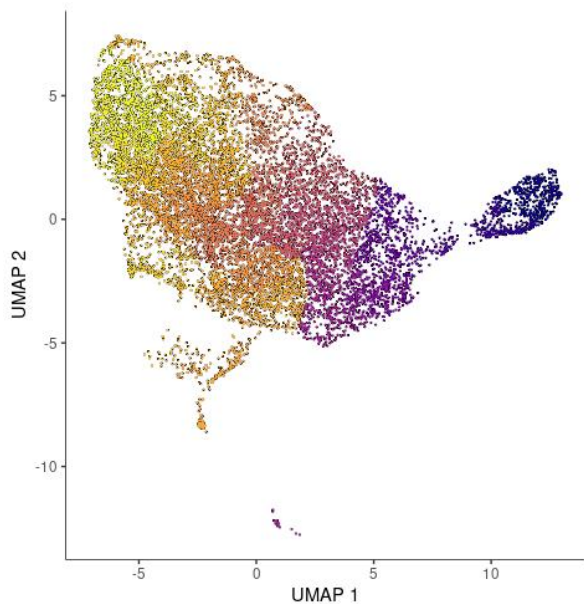
Cancer-Epithelial cells (RCC, Epi\_PT, Epi\_non-PT, Fibro, EC) & Immune cells (Myeloid, NK, T-cell) are separated clearly

# After harmonization

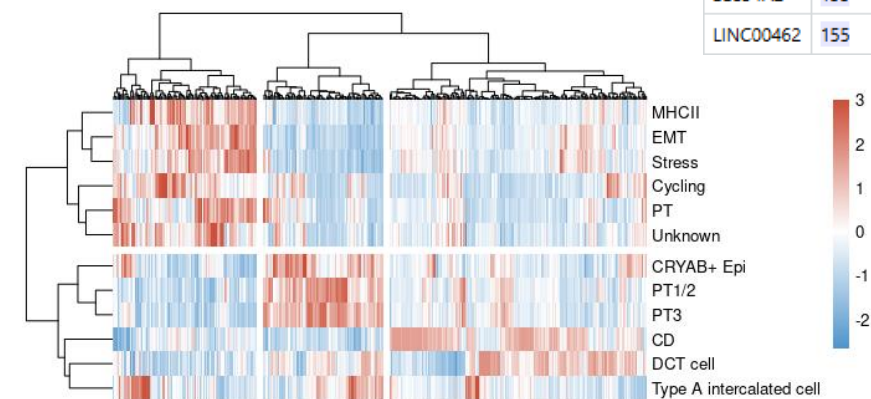




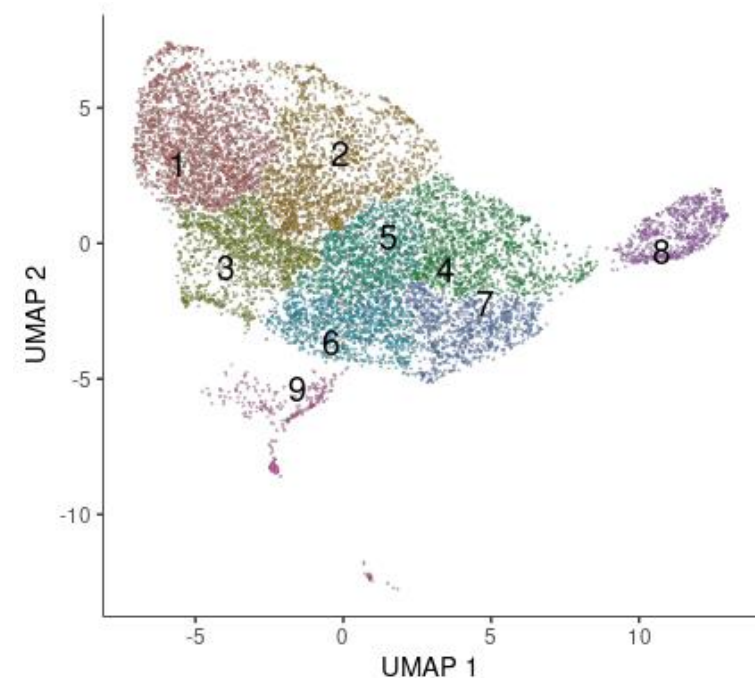
# Pseudo-time trajectory: EMT increased & PT decreased



id	module	id	module	id	module	KDEL2	155
All	306	All	130	All	155	NNMT	155
EFEMP1	306	FHL3	130	QPCT	155	ACTA2	155
IL1R2	306	F3	130	TFPI	155	ZFP36L1	155
IL1R1	306	CD34	130	IGFBP2	155	SERPINA1	155
GPC1	306	STEAP3	130	IGFBP5	155	CCDC64B	155
CPE	306	CCL20	130	IMPDH2	155	MT2A	155
HTRA1	306	MAP1B	130	F2R	155	MT1E	155
SCG5	306	F13A1	130	LOX	155	MT1X	155
MMP2	306	TREM1	130	TGFB1	155	PMP22	155
MT1M	306	SERPINE1	130	SPOCK1	155	TMEM100	155
MT1A	306	SLC38A5	130	C5orf46	155	WFDC2	155
MRC2	306	LOXL2	130	BET1	155	PLTP	155
SLPI	306	MMP28	130	HILPDA	155	ZFAS1	155
CEBPB	306	COL1A1	130	BGN	155	FSTL3	155
SPINK1	306	CAPN12	130	DEFB1	155	GADD45B	155
BAALC	306	BCAM	130	SBSPON	155	DMKN	155
BTBD16	306	CHST3	130	IARS	155	C19orf48	155
SERPINA3	306	COL11A1	130	CRACR2B	155	LINC01426	155
MGAT3	306	PODNL1	130	ADM	155	CADM3	155
						SLC34A2	155
						LINC00462	155



# Clustering



gene_id	gene_short_name	cell_group
MT2A	MT2A	1
MT1E	MT1E	1
MT1X	MT1X	1
RARRES2	RARRES2	2
LDHA	LDHA	2
P4HB	P4HB	2
TMSB10	TMSB10	3
CAV1	CAV1	3
VIM	VIM	3
GSTA2	GSTA2	4
GSTA1	GSTA1	4
CD24	CD24	4
RARRES2	RARRES2	5
VIM	VIM	5
NDUFA4L2	NDUFA4L2	5
LDHA	LDHA	6
CRYAB	CRYAB	6
VIM	VIM	6
TMSB10	TMSB10	7
GNB2L1	GNB2L1	7
GAPDH	GAPDH	7
ALDOB	ALDOB	8
ASS1	ASS1	8
GATM	GATM	8

Normal renal cell (cluster 8)



EMT activation, metabolic reprogramming, hypoxia response (cluster 2~7)

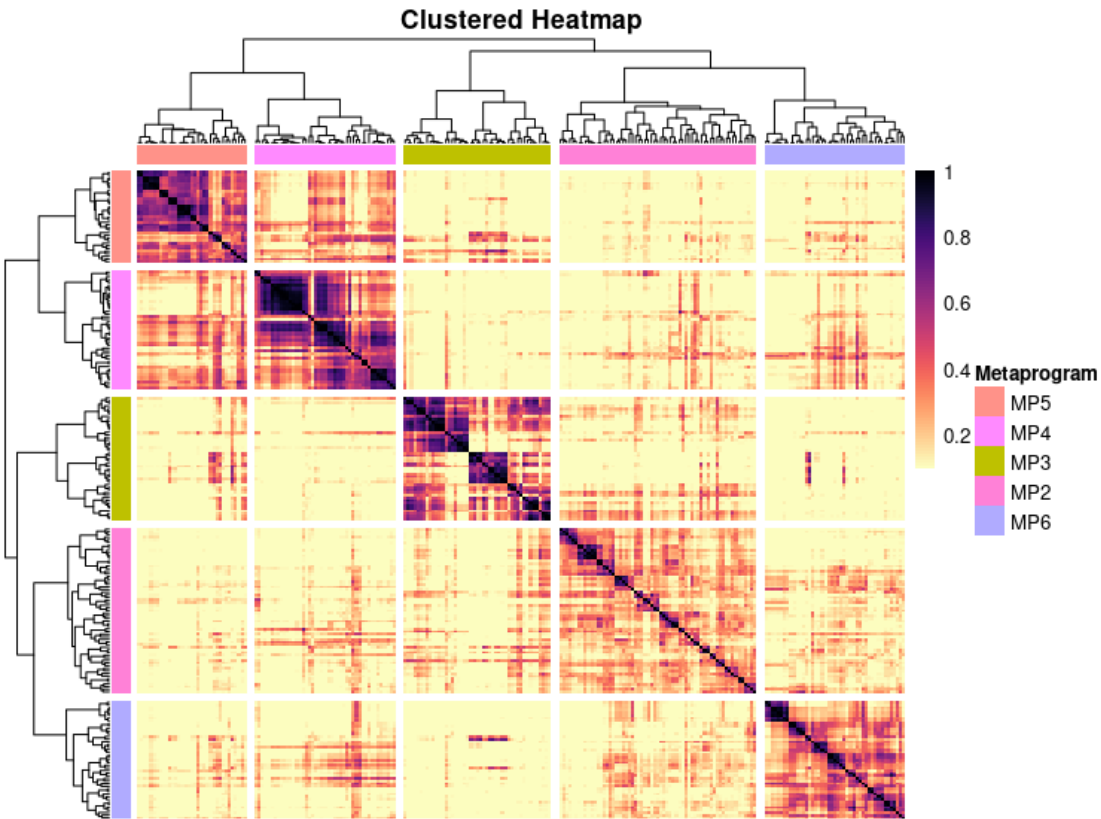


Anti-oxidant defense, Stress-adaptive, adaptive-survival, drug-resistance (cluster 1)

RARRES2: lipid metabolism contributing to tumor growth  
 LDHA: tumor metastasis facilitated by EMT and Warburg effect  
 P4HB: cancer progression facilitated by EMT  
 TMSB10: cancer progression marker regulated by JUN  
 CAV1: metastasis promotion in RCC



# NMF for



MP5: IER2, FOS, JUNB, EGR1, FOSB, ZFP36  
MP4: NEAT1, MALAT1, DDX17, FOSB, VEGFA, EGR1  
MP3: SRGN, HLA-E, CCL5, SH3BGRL3, ZFP36L2, NKG7  
MP2: MT1X, MT1G, MT1E, MT1F, MT2A, FOS  
MP6: APOE, MT1G, DCXR, ACAA1, PEPD, SUCLG1



# Preprocessing for SCENIC analysis

A minimal amount of filtering is needed before running a SCENIC analysis. On a cell level, we examine the number of expressed genes and remove cells that fell into the distribution extremes. In the peripheral blood mononuclear cell (PBMC) study case (Table 1), we discard cells with  $<200$ , and more than  $\sim 5,000$ , expressed genes; however, these thresholds must be determined empirically. We further filter out cells that have a large fraction of mitochondrial gene transcripts; these cells are thought to be of lower quality as this is indicative of cell membrane breach<sup>9</sup>. We again use the empirical distribution to select an upper threshold on mitochondrial genes expressed, and this is highly dependent on cell type but typically 5–15%. Finally, on the gene level, genes with low overall expression are removed; with our default settings, we remove genes expressed in fewer than three cells in the data set.

Raw UMI count data **without**  $\ln(x+1)$  transformation



Delete ribosomal gene and exclude cell with percent.mt over 10

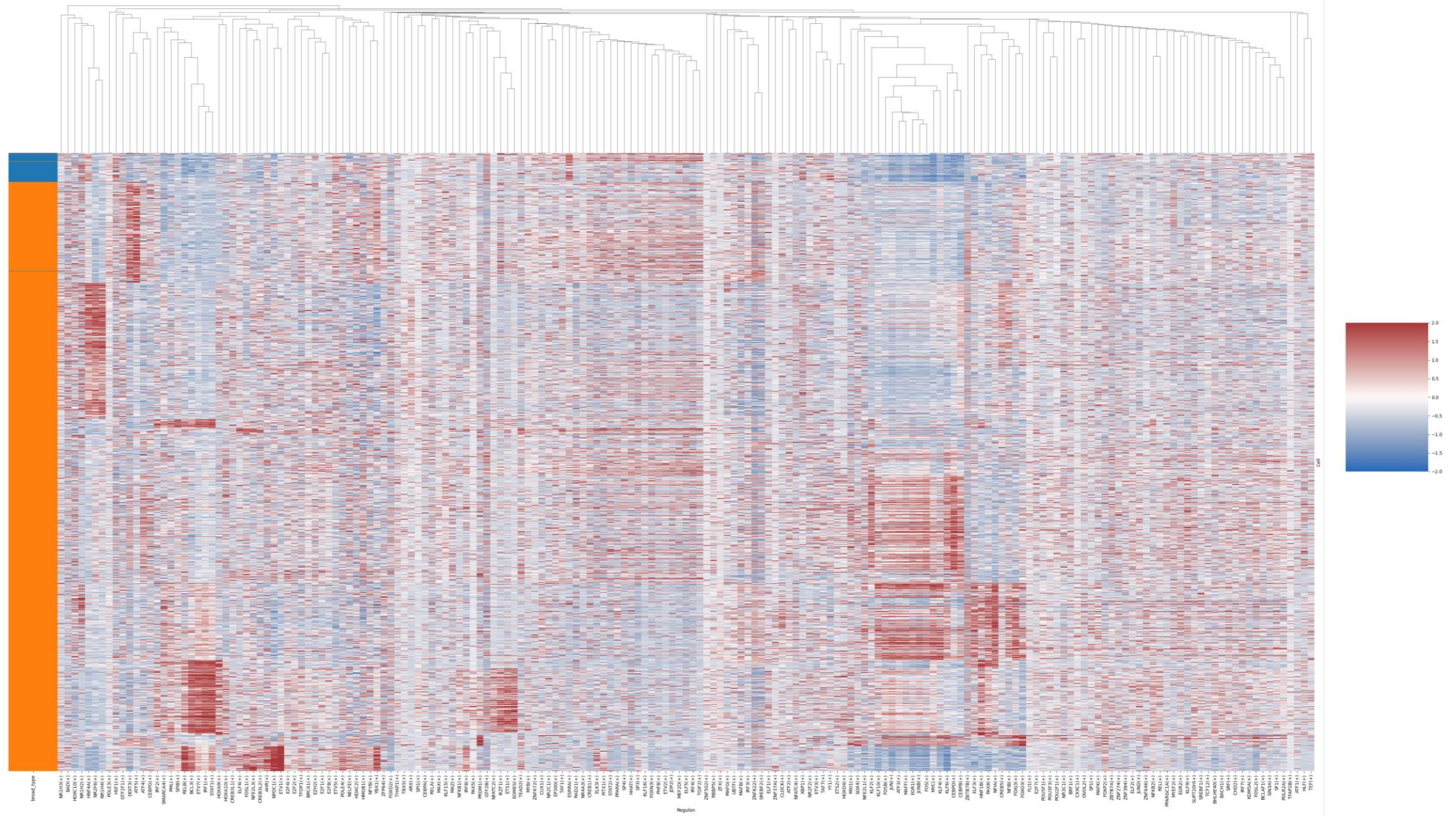


Auxiliary data info :

```
[FeatherRankingDatabase(name="hg38__refseq-r80__10kb_up_and_down_tss.mc9nr.genes_vs_motifs.rankings")]
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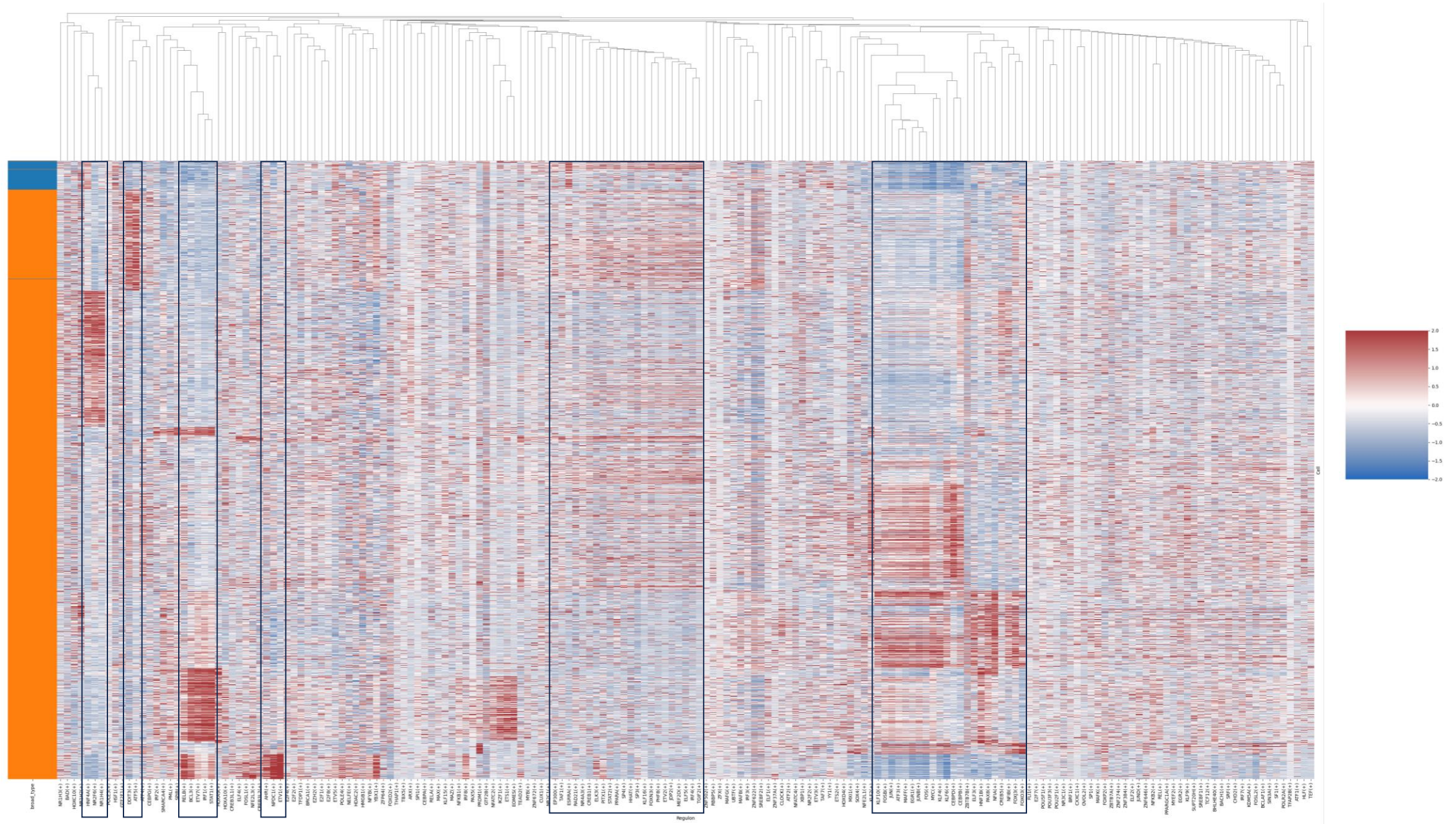


## AUCCell : 3 clusters





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# Differential TFs (Normal → EMT → Stress-adaptive)

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ESRRA, RAD21, NR4A3, CREB1, ELK3, PITX1, STAT2, PPARA, SP4, HHAT, SP3, KLF16, FOXN3, PHF8, ETV2, JDP2, MEF2D, ELF5, IRF4, TGIF2

HNF4A, NR2F6, NR1H4, ATF5, ATF4,

KLF10, FOSB, JUN, ATF3, MAFF, EGR1, JUNB, FOS, MYC, KLF4, KLF6, CEBPD, CEBPB, ZBTB7B, ELF3, HNF1B, PAX8, NFIB, FOXJ3, FOXO3

RELB, BCL3, ETV7, IRF1, STAT1, AHR, NPDC1, ETV1

# Preprocessing for CellOracle analysis

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Raw UMI count data



Delete ribosomal gene and exclude cell with percent.mt over 10





# Preprocessing for scVI analysis

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Raw UMI count data



Delete ribosomal gene and exclude cell with percent.mt over 10



# Preprocessing for scVI analysis

