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Predicting breast cancer survival based on gene expression and clinical variables

Literature Review and Exploratory Analysis

Cancer is a complex disease which involves number of epigenetic and genetic irregularities. Tumors originating in the same tissue or organ may vary considerably in genomic alteration and similar patterns of genomic alteration are observed in tumors from different tissues of origin. Different set of genes are expressed at different stages, types. These gives an opportunity to analyze combination of gene expression and clinical features such as number of lymph nodes, stage types, age etc.

Cancer therapy is challenged by the diversity of molecular implementations of oncogenic process and by the resulting variations in therapeutic responses (Giovanni et al., 2013). Targetable functional events in a tumor class are suggestive of class-specific combination therapy. These may assist in the definition of clinical trials to match actionable oncogenic signatures with personalized therapies (Giovanni et al., 2013). Combining the predictive strength of multiple gene signatures improves prediction of breast cancer survival (Xi Zhao et al., 2011). Mutations in transcriptional factors/regulators show tissue specificity, whereas histone modifiers are often mutated across several cancer types. Clinical association analysis identifies genes having a significant effect on survival, and investigations of mutation with respect to clonal/sub-clonal architecture delineate their temporal orders during tumorigenesis. Taken together, these results lay the groundwork for developing new diagnostics and individualizing cancer treatment (Cyriac Kandoth et al., 2013). Different therapeutic treatment cab more effective for individual patient can be based on combination of gene expression at different cancer stages or age category. Project such as The Cancer Genome Atlas (TCGA) provide molecular tumor maps in unprecedented detail (Giovanni et al., 2013).

I have selected set of genes which are directly or indirectly associated with breast cancer disease from wide range for the analysis. Selected genes are as below.

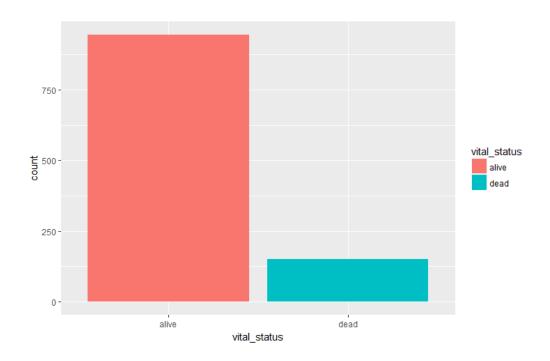
Gene	GeneCards Summary	
	TP53 (Tumor Protein P53) is a Protein Coding gene. Diseases associated with TP53	
	include Li-Fraumeni Syndrome and Choroid Plexus Papilloma. Among its related pathways	
	are Glioma and HTLV-I infection. GO annotations related to this gene include transcription	
	factor activity, sequence-specific DNA binding and protein heterodimerization activity. An	
TP53	important paralog of this gene is TP73.	
	STK11 (Serine/Threonine Kinase 11) is a Protein Coding gene. Diseases associated with	
	STK11 include Peutz-Jeghers Syndrome and Testicular Germ Cell Tumor. Among its	
	related pathways are Integrated Breast Cancer Pathway and Metabolism. GO annotations	
	related to this gene include transferase activity, transferring phosphorus-containing groups	
STK11	and protein tyrosine kinase activity. An important paralog of this gene is CAMKK2.	
	RB1 (RB Transcriptional Corepressor 1) is a Protein Coding gene. Diseases associated	
	with RB1 include Retinoblastoma and Small Cell Cancer Of The Lung, Somatic. Among its	
	related pathways are Regulation of retinoblastoma protein and Regulation of activated	
	PAK-2p34 by proteasome mediated degradation. GO annotations related to this gene	
	include transcription factor activity, sequence-specific DNA binding and enzyme binding.	
RB1	An important paralog of this gene is RBL2.	

PRKAA2 (Protein Kinase AMP-Activated Catalytic Subunit Alpha 2) is a Protein Coding gene. Diseases associated with PRKAA2 include Wolff-Parkinson-White Syndrome and Peutz-Jeghers Syndrome. Among its related pathways are Metabolism and mTOR signaling pathway (KEGG). GO annotations related to this gene include transferase activity, transferring phosphorus-containing groups and protein tyrosine kinase activity. An important paralog of this gene is PRKAA1.
AKT1 (AKT Serine/Threonine Kinase 1) is a Protein Coding gene. Diseases associated
with AKT1 include Proteus Syndrome, Somatic and Cowden Syndrome 6. Among its related pathways are VEGF Signaling Pathway and Signaling by GPCR. GO annotations related to this gene include identical protein binding and protein kinase activity. An
important paralog of this gene is AKT3.
AKT2 (AKT Serine/Threonine Kinase 2) is a Protein Coding gene. Diseases associated with AKT2 include Hypoinsulinemic Hypoglycemia With Hemihypertrophy and Diabetes Mellitus, Noninsulin-Dependent. Among its related pathways are VEGF Signaling Pathway and Signaling by GPCR. GO annotations related to this gene include transferase activity, transferring phosphorus-containing groups and protein tyrosine kinase activity. An important paralog of this gene is AKT1.
AKT3 (AKT Serine/Threonine Kinase 3) is a Protein Coding gene. Diseases associated
with AKT3 include Megalencephaly-Polymicrogyria-Polydactyly-Hydrocephalus Syndrome
2 and Mpph Syndrome. Among its related pathways are VEGF Signaling Pathway and
Signaling by GPCR. GO annotations related to this gene include transferase activity,
transferring phosphorus-containing groups and protein tyrosine kinase activity. An
important paralog of this gene is AKT1.
MYC (V-Myc Avian Myelocytomatosis Viral Oncogene Homolog) is a Protein Coding gene. Diseases associated with MYC include Burkitt Lymphoma and Leukemia, Acute Lymphoblastic 3. Among its related pathways are Regulation of nuclear SMAD2/3 signaling and HTLV-I infection. GO annotations related to this gene include transcription factor activity, sequence-specific DNA binding and RNA polymerase II core promoter proximal region sequence-specific DNA binding. An important paralog of this gene is MYCN.
MYCL (V-Myc Avian Myelocytomatosis Viral Oncogene Lung Carcinoma Derived
Homolog) is a Protein Coding gene. Diseases associated with MYCL include Apocrine Adenosis Of Breast and Lower Lip Cancer. GO annotations related to this gene include transcription factor activity, sequence-specific DNA binding and protein dimerization activity. An important paralog of this gene is MYCN.
MYCN (V-Myc Avian Myelocytomatosis Viral Oncogene Neuroblastoma Derived Homolog)
is a Protein Coding gene. Diseases associated with MYCN include Feingold Syndrome and Neuroblastoma. Among its related pathways are Transcriptional misregulation in cancer and Neuroscience. GO annotations related to this gene include transcription factor activity, sequence-specific DNA binding and protein dimerization activity. An important
paralog of this gene is MYC.

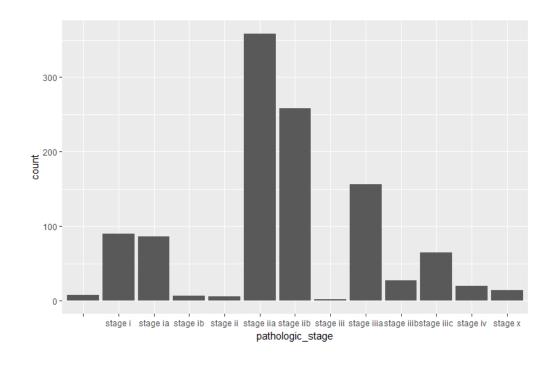
I have downloaded clinical data for breast cancer from TCGA using FireBrowse web API for R. The dataset contains 1097 records with 111 columns for different clinical features. I am going to use some of the clinical variables as below.

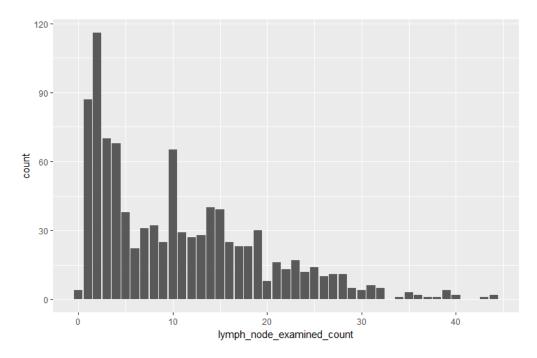
vital_status	Death or alive
pathologic_stage	Cancer stage
lymph_node_examined_count	Number of lymphnodes
gender	Gender
days_to_death	Number of days to death
days_to_last_followup	Number of days from last followup
days_to_birth	Number of days to birth
age_at_initial_pathologic_diagnosis	Age in YEAR at initial diagnosis

Distributions of these variables are as below. Maximum number of patients were alive at the time when I have downloaded the dataset. Very less records with dead as viatal_status.

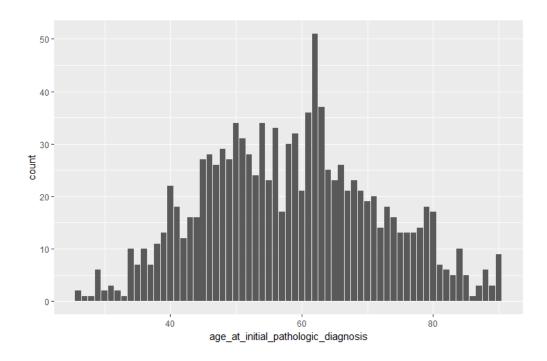


Patients with Stage iia and stage iib are highest. This variable has some of the data. 8 records don't have stage details in the dataset.

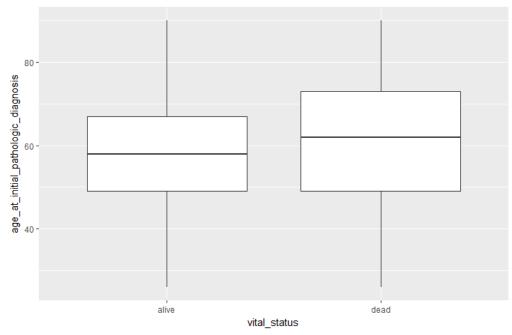




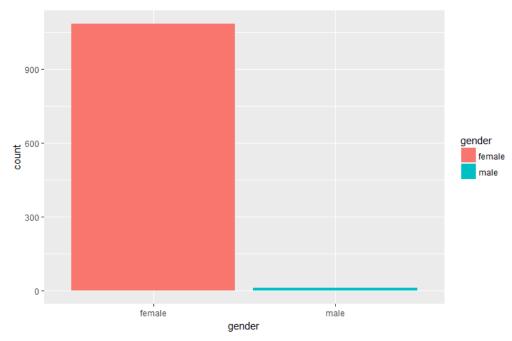
Records with 2 examined lymphnodes are highest and 126 records don't have details about this variable.



Maximum patients were at age of 62 at the time of initial pathologic diagnosis. Less cases with diagnosis at early stage of the life.

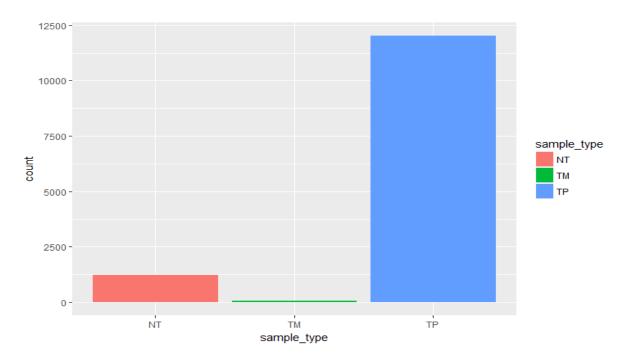


Records with dead as vital_status are more variable than alive. Median for dead is little bit higher than the median of alive.



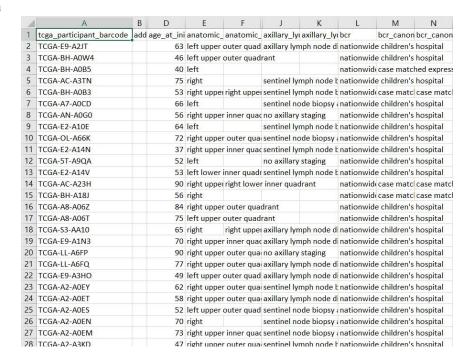
There are 12 male records with breast cancer and 1085 female records.

To download mRNA expression and Z.SCORE for my selected gene of interest, I have used Barcode present in the clinical dataset identical for each record and downloaded expression of selected genes using Firebrowse web API for R. There wasn't any record in mRNA expression for 4 barcodes and I have excluded the. Resulting mRNA expression dataset contains 13332 records for three (NT, TP and TM) sample types.

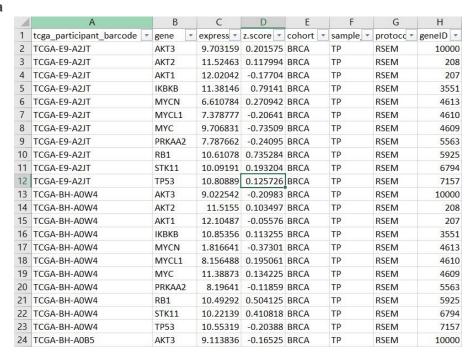


I have 1097 records in clinical dataset and 13332 records in mRNA expression dataset (multiple lines for each barcode, one for each of the gene expression and z.score). Screen shot of clinical dta and mRNA data are as below.

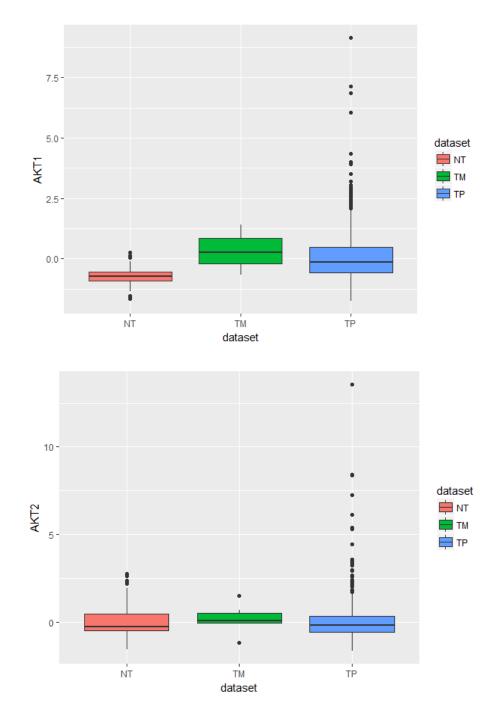
Clinical data

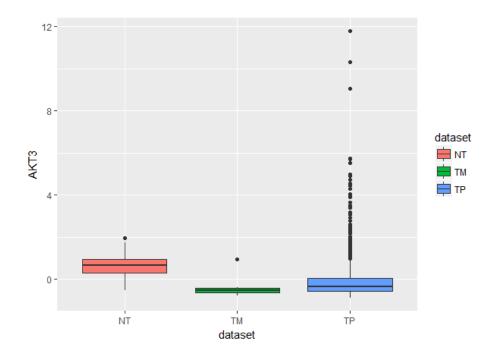


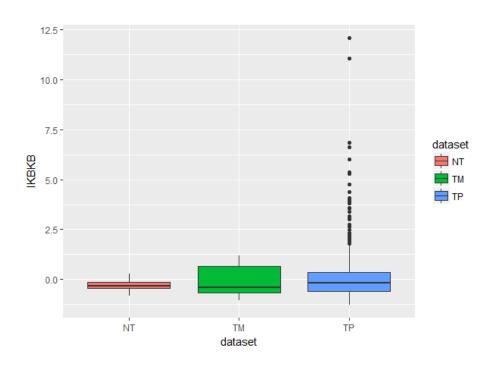
mRNA_Data

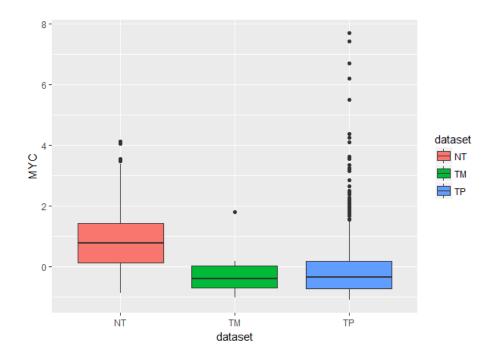


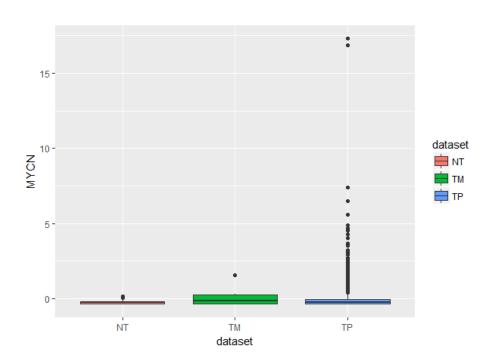
I have rearranged mRNA expression dataset and merged z_score of each of the gene to respective barcode of clinical dataset. I have plotted zscore distribution for each of the gene across three sample types using box plot and they are as below.

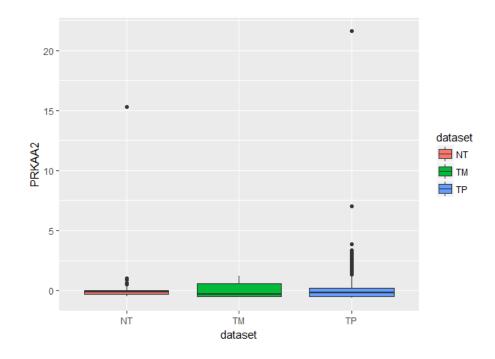


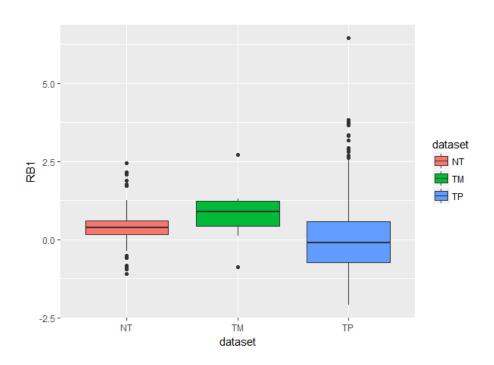


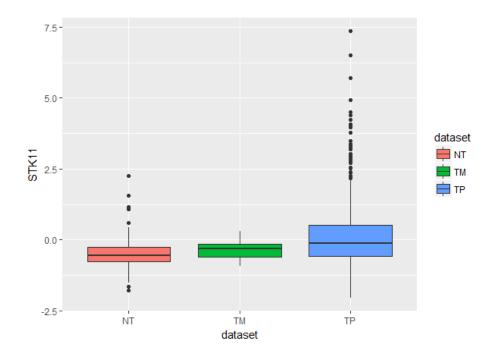


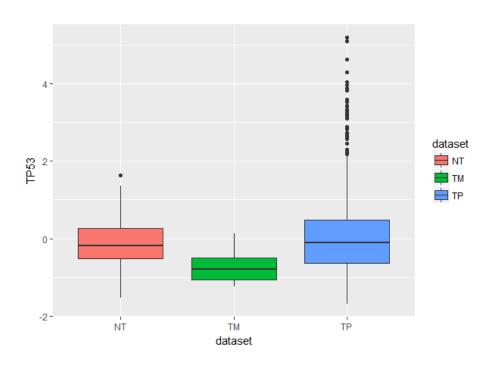




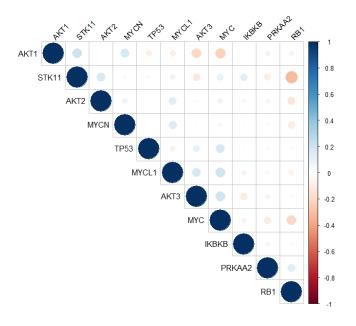








Correlation plot across gene using zscore is as below. There is correlation between TP53, MYCL1, AKT3 and MYC as per below graph.



REFERENCES

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- [2] Xi, Z. et al. Combining Gene Signatures Improves Prediction of Breast Cancer Survival
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- [5] https://cancergenome.nih.gov/
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- [7] http://www.genecards.org/