# M2 Bio-Informatic Internship

10/06/2025 Presentation

#### **Iordan Dutel**

Université Claude Bernard Lyon 1 Centre de Recherche en Cancérologie de Lyon (CRCL)

Team: Dr Pierre Saintigny Tutor : Dr Pierre Martinez

May 28, 2025







1 / 35

- Introduction
- 2 Results
   Phenotypic markers analysis
   Copy Number Alterations (CNA) analysi
- 3 Conclusions
- 4 Future Work

Introduction

#### B C TDLU Best prognosis Luminal A (~40%) HR+ (ER+ and/or PR+), HER2-TDLU Hyperplasia Normal-like (~2-8%) Duct HR+ (ER+ and/or PR+), HER2-Luminal B (~20%) HR+ (FR+ and/or PR+) HFR2+/-Carcinoma in situ HER2-enriched (~10-15%) HR (FR. PR.) HER2+ Stroma Triple Negative (~15-20%) Luminal cell HR (ER, PR.), HER2-Adipose Myopithelial cell Worst prognosis Basement membrane Invasive carcinoma

TNBC: Triple-Negative Breast Cancer TDLU: Terminal Duct Lobular Units

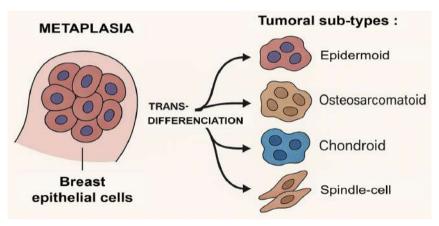
Source: Chang-Yun Li biomedcentral.com (CC BY 4.0)

# MpBC (Metaplastic Breast Carcinomas) are rare forms of TNBC, lacking molecular diagnostic markers and specific therapies

#### Trans-differenciation

Introduction

00000000

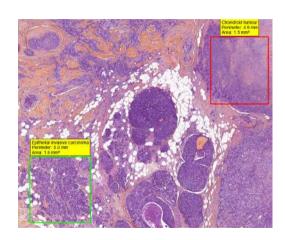


MpBC can transdifferentiate into various aggressive tumor subtypes

#### Trans-differentiation

Introduction

- MpBC exhibits a remarkable plasticity
- Transdifferenciation into multiple aggressive tumor subtypes
- Mixed MpBC
  - Each sample contains at least 2 tumoral compartments



May 28, 2025

# Research questions

Introduction

00000000

# Unresolved questions

- Understanding the **evolutionary trajectories** in MpBC.
  - Internal determinants (genetic and epigenetic)
  - External determinants (tumor microenvironment)
- Identify molecular biomarkers to improve diagnostic precision.
- Oiscover genetic and epigenetic features that may serve as potential therapeutic targets.

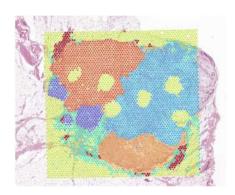
# **Internship Aims**

- Determine **expression markers** specific to different tumor sub-types.
- Analyze **genomic divergence** between tumoral compartments.

7 / 35

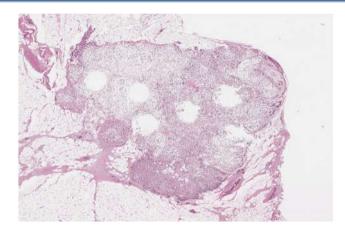
May 28, 2025

- Spatial transcriptomic counts (Visium, 10X Genomics)
- 16 mixed MpBC samples
- Different tumor transdifferentiation states captured



# MpBC sample

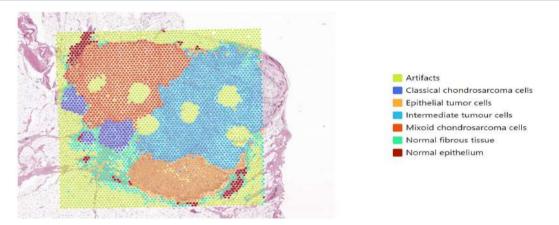
Introduction 0000000



# **Expert annotations**

Introduction

0000000



**Mixed MpBC** with several tumor cell types covered by **Visium spots**, grouped by k-means clustering and annotated by a pathologist.

- Introduction
- 2 Results

Phenotypic markers analysis Copy Number Alterations (CNA) analysis

- 3 Conclusions
- 4 Future Work

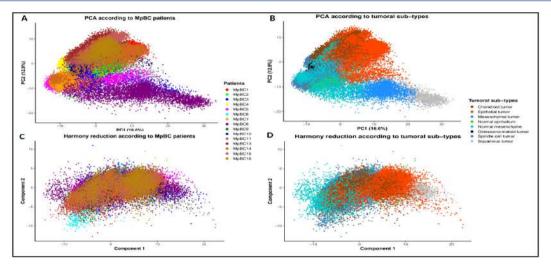
- 1 Introduction
- 2 Results

# Phenotypic markers analysis

Copy Number Alterations (CNA) analysis

- 3 Conclusions
- 4 Future Work

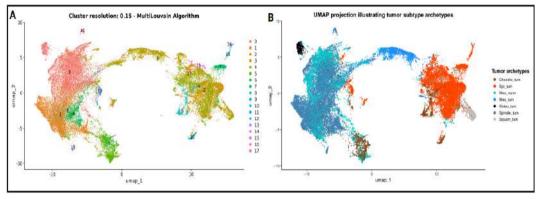
# Batch effect correction: Harmony



Improve integration with fewer isolated patients

Jordan Dutel M2 Bio-Informatic Internship May 28, 2025

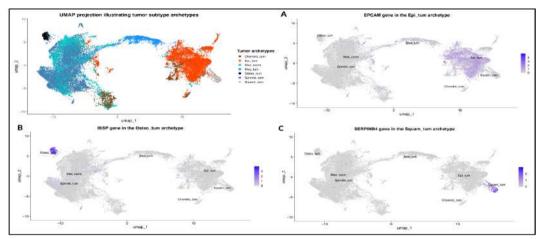
# **UMAP Projection**



Clear epithelial-mesenchymal axis (umap1), with few ambiguous spots

13 / 35

# **Expression markers**

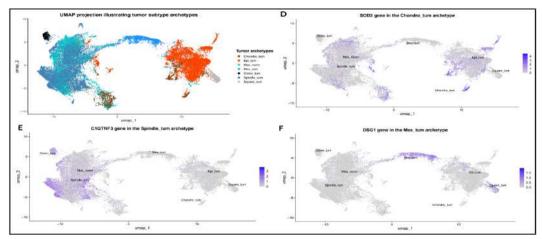


Analysis with **MAST** (Model-based Analysis of Single-cell Transcriptomics) **Some phenotypic markers identified are specific to clusters...** 

Jordan Dutel M2 Bio-Informatic Internship May 28, 2025

14 / 35

# **Expression markers**



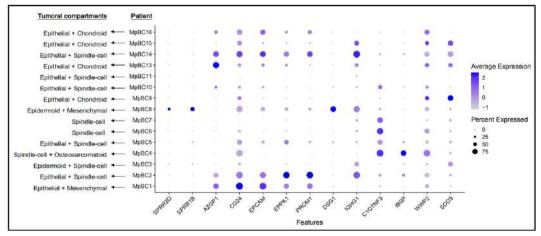
Few phenotypic markers aren't specific enough (Visium limitations) Different spot purity depending on the subtypes

 Results
 Conclusions
 Future Work

 ○○○○○○○○○○○○
 ○○○○○○○○○

16 / 35

# Markers specificities



Some cluster-specific markers are also patient-specific markers

Jordan Dutel M2 Bio-Informatic Internship May 28, 2025

# **Analysis conclusions**

- Analysis reveals archetype-specific markers
  - **Epidermoid**
  - Epithelial
  - Osteosarcomatoid
- Some markers remain non-specific or not representative of the archetypes
  - Spindle-cell
  - Chondroid
  - Mesenchymal
- Spatial transcriptomics combined with pathologist annotations is promising, but still limited by the cellular purity of Visium spots.

- 1 Introduction
- 2 Results

Phenotypic markers analysis

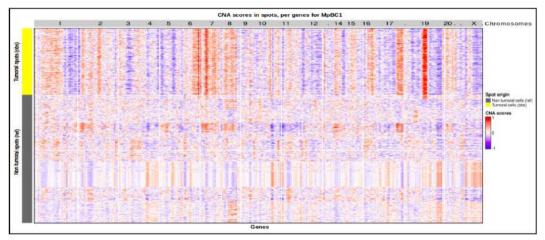
Copy Number Alterations (CNA) analysis

- 3 Conclusions
- 4 Future Work

#### CNA in cancer

- Frequent in cancer: CNA are a hallmark of cancer cells.
- Types of alterations:
  - Can be **focal** (targeting specific genes or regions)
  - Or broad, affecting entire cytobands or chromosome arms
- Functional impact:
  - CNA can lead to oncogene amplification or tumor suppressor loss
- Clonal evolution insight:
  - CNA profiles help reconstruct evolutionary trajectories
  - Reveal selection of clones and subclones in tumor

# Raw InferCNVPlus results

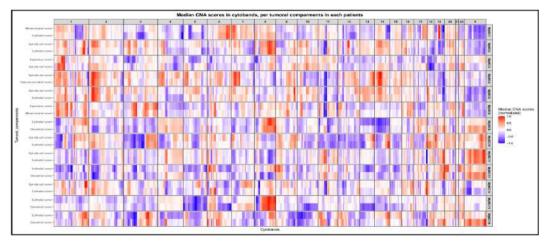


Raw CNA scores in tumoral (obs) or non tumoral (ref) spots for each gene expressed

Jordan Dutel M2 Bio-Informatic Internship May 28, 2025

20 / 35

# Heatmap

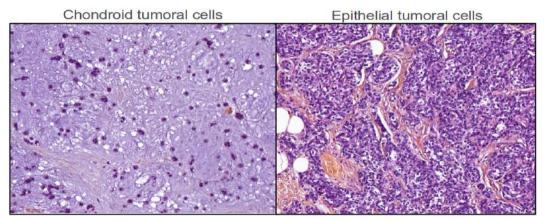


CNA scores in each tumoral compartments for each cytoband

Jordan Dutel M2 Bio-Informatic Internship May 28, 2025

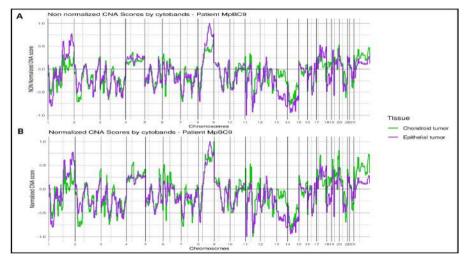
21 / 35

# RNA sequencing depth per spot



Normalization to correct for differences in RNA sequencing depth across spots

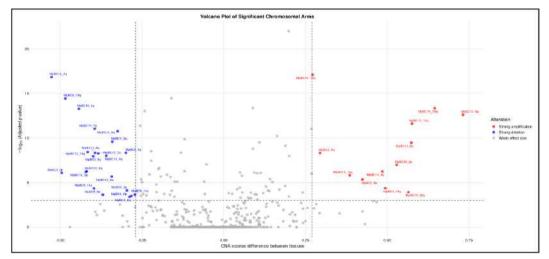
# Genomic CNA profil



Some genomic regions are highy altered even after the normalisation

Jordan Dutel M2 Bio-Informatic Internship May 28, 2025 Results 000000000000000000

### VolcanoPlot

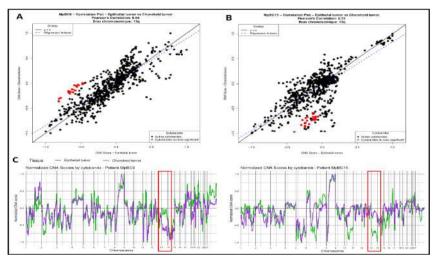


### Some chromosomic arms significatively altered for few patients

Jordan Dutel M2 Bio-Informatic Internship May 28, 2025

25 / 35

### **Correlation Plot**



Significant cytobands deviate from other cytoband distributions

# **Analysis Conclusions**

- Limited divergence in CNA profiles between paired tumor compartments
  - Suggests a **shared clonal origin** for tumor subtypes
- Rare cases of chromosomal arm-level divergence between compartments
  - May reflect **subclonal evolution**, where one compartment originates from the other

- Introduction
- 2 Results
   Phenotypic markers analysis
   Copy Number Alterations (CNA) analysis
- 3 Conclusions
- 4 Future Work

#### Conclusion

### Main results

- Identified **phenotypic markers** specific to subtypes, but there is still limits (Visium resolutions).
  - Emphasizes the need for single-cell resolution.
- Limited genomic divergence suggests a common clonal origin and transdifferentiation in MpBC.

- Introduction
- 2 Results
   Phenotypic markers analysis
   Copy Number Alterations (CNA) analysis
- 3 Conclusions
- 4 Future Work

# 1. Perform snRNA-seg on MpBC

- Characterize MpBC subtypes using more specific molecular markers.
- Build a **MpBC-specific transcriptomic atlas** for each tumor subtype.

### 2. Visium Spot Deconvolution

- Apply **spot deconvolution algorithms** (e.g., RCTD) to estimate cell type composition per spot.
- Improve the assignment of transcriptomic profiles to specific tumor subtypes.

#### **Future Work**

# 3. Microdissection of Tumoral Compartments

- Perform exome sequencing to explore intrinsic molecular determinants.
- Detect point mutations, driver alterations, and validate CNA findings.
- Conduct epigenetic profiling, including methylome analysis.

# 4. Long-term Objectives: Clinical Applications

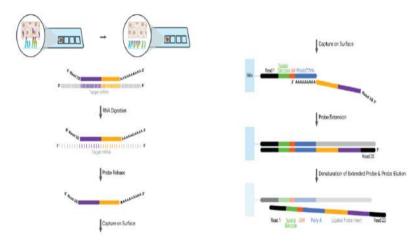
- Discover subtype-specific molecular markers.
- Identify targetable pathways relevant to MpBC.

# Thank you for listening!

**Tutor: Dr Pierre Martinez** 

jordan.dutel@lyon.unicancer.fr

### FFPE-Visium workflow

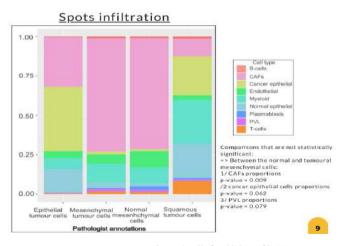


Source: 10x Genomics

Probe hybridization and ligation to capture RNA in each spots

Jordan Dutel M2 Bio-Informatic Internship May 28, 2025 33 / 35

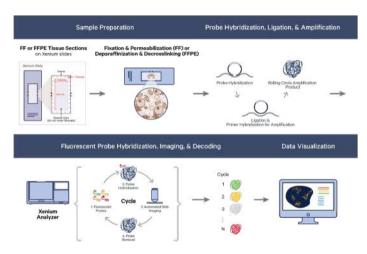
### RCTD deconvolution



Source: Ines Kardous M2 Internship 2024

34 / 35

### Xenium



Source: 10x Genomics