

Effects of hypoxia on the urothelium transcriptome

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Abstract

This report investigates the transcriptomic alterations induced by hypoxic conditions in human bladder epithelium cells, performing a full transcriptomic pipeline from raw reads and alignments before DEA and GSEA. Starting with RNAseq data from four pairs of normoxic-hypoxic cultured urothelium samples, DEA identified 717 DEGs, including 367 upregulated and 350 downregulated genes. The analysis unveiled a surprising downregulation of HIF1A, a key regulator in hypoxia, and upregulation of six genes from a proposed 24-gene hypoxia signature. GSEA gave further insight into the higher-level transcriptional impacts, revealing 11 significantly enriched GO terms. Led by hypoxia, other GO terms were found relating to glycolysis, UV response and DNA repair. Consistencies and also inconsistencies present in our results show the conserved yet variable nature of the complex hypoxia response, emphasizing the potential of additional transcriptomic profiling approaches in further capturing response dynamics in urothelial cells.

1 Introduction

Oxygen, the critical substrate in aerobic respiration, is fundamental to life on Earth. A myriad of biological processes in our own cells depend on the availability of oxygen. Hypoxia is the condition where oxygen availability is insufficient for cells and tissues to perform effectively. The family of transcription factors called hypoxia-inducible factors (HIFs) play a central role in regulating the cellular response to hypoxic conditions. Consisting of HIF- α and HIF- β subunits, HIF is not stabilised at normal oxygen due to the degradation of HIF- α . HIFs regulate a panel of genes involved in various processes involved in reduced oxygen consumption, metabolic switch to glycolysis, cell death (Greijer and Wall 2004), and blood vessel formation (Hirota and Semenza 2006). However, the exact response is a complex system and dependent on factors such as the scale, intensity, duration of hypoxia, and the type of cell (Höckel and Vaupel 2001; Faller 1999).

Experimental and clinical work has consistently shown that hypoxic conditions are favoured by solid tumours, and this unfortunately comes with poorer prognosis and therapeutic resistance (Shannon et al. 2003). While helpful in combating low oxygen,

the processes regulated by HIFs simultaneously promote tumour growth, survival, and malignancy progression (Brahimi-Horn, Chiche, and Pouyssegur 2007). Specifically, it is hypothesised that metabolic reprogramming in tumours, the Warburg effect, is a combination of HIF overexpression, tumour suppressor loss of function, and oncogene activation along with other factors (Vaupel and Multhoff 2021). The role of HIFs in cancer is a topic that is ever-growing with many new interesting developments such as implications for the use of HIF inhibitors as cancer therapeutics (Toustrup et al. 2011), highlighting the importance of research into hypoxia.

Transcriptome profiling of cells under normoxic and hypoxic conditions has previously been done using DNA microarrays (Chi et al. 2006; Faller 1999; Gracey, Troll, and Somero 2001). Recent improvements in genomic tools, notably the development of RNA sequencing (RNAseq), now illustrate the massive potential of transcriptomics techniques along with systems biology approaches. Many new analyses use RNAseq which offers further insight into the transcriptome by uncovering additional differentially expressed genes (DEGs), identifying genetic variants (Zhao et al. 2014) and also non-coding RNA (Rao et al. 2019). This immense amount of bioinformatic research into the effects of hypoxia has been key in describing gene expression programmes and identifying gene expression signatures, with experiments performed on different cell types (Chi et al. 2006; Faller 1999) and even fish (Gracey, Troll, and Somero 2001). Their conclusions have shown that the response is both conserved between organisms and yet displays a high degree of specificity between cell types (Chi et al. 2006). Efforts have also been made to develop a hypoxia gene expression classifiers, which can accurately predict hypoxia presence in tumour samples and also prognose (Toustrup et al. 2011; Puente-Santamaría et al. 2022; Ong, Prêle, and Dilley 2023). These classifiers were modelled with other cell types in the head and neck tissue, and are variable in their set of genes for classification. Since we are solely focusing on the effects of hypoxia in cells of the human bladder epithelium, these classifiers may not predict effectively.

The specialised epithelium, i.e. urothelium, lines the bladder and functions as a barrier that prevents toxic substances and pathogens from entering the blood. Literature on hypoxia in the epithelium is sparse considering that, in the UK alone, over 10,000 cases of bladder cancer are diagnosed each year with a shocking 46% chance of survival and an expensive treatment (*Bladder cancer statistics* 2015). Furthermore, seemingly all the analysis is performed on samples from cancer cells. We found no references dealing with samples from healthy cells. Nonetheless, the results conform to the narrative in the literature, emphasising the predictive and prognostic value of hypoxia regulators in bladder cancer (Blick et al. 2015; Theodoropoulos et al. 2005; Yang et al. 2017). Though a classifier model is yet to be made, a 24-gene expression signature was identified which describes what a core set of DEGs should look like (Yang et al. 2017).

In the report, we have completed the full RNAseq analysis workflow. Starting with our 4x4 read data, we first check read quality before aligning reads to the human transcriptome. We then carry out differential expression analysis (DEA) to identify the DEGs on a gene-by-gene basis which we compare with the forementioned 24-gene derived hypoxia signature (Yang et al.). Finally, we use a relatively novel approach called gene set enrichment analysis (GSEA) to find system-level expression patterns

and related Gene Ontology (GO) terms using a predefined collection of gene sets (Subramanian et al. 2005).

2 Brief Methods

We used RNAseq data collected by the Mason lab, which included 4 pairs of normoxia-hypoxia urothelium samples. These samples originated from urothelium cells taken from 4 different individuals and then cultured. The cells underwent re-differentiation to create a biomimetic tissue, which was then divided. One half was maintained under standard normoxic conditions (20% O₂), while the other half was cultivated under hypoxic conditions (1% O₂). Each sample had 2 reads and, before any analysis, quality control was performed on each read with FastQC. We then used kallisto (Bray et al. 2016) to align the raw reads to the human transcriptome annotation by the Gencode v44 FASTA of protein-coding genes (Frankish et al. 2019). By mapping the transcripts to their genes, we constructed a matrix of gene expression values (TPM) from each kallisto output.

We then performed differential expression analysis (DEA) using sleuth (Pimentel et al. 2017) to obtain the significantly DEGs between the hypoxia and normoxia samples. Additionally, the log₂ fold change (log₂FC) was calculated to estimate the effect size, i.e. change in expression between hypoxia and normoxia. Prior transformation (+1 to TPM) was done to reduce high fold changes between low expression values. Gene set enrichment analysis (GSEA) was then performed in R using the 'fgsea' package along with MSigDB's hallmark gene set collection, and used pi, the product of log₂FC with significance, as the metric for ranking (Sergushichev 2016; Liberzon et al. 2015).

3 Results

FastQC reports showed that all reads were of good quality and passed most criteria. However, all reads failed for 'Sequence Duplication Levels', and some reads failed for 'Per Base Sequence Content'; informing that reads had a small number of unique sequences that were overly represented in the sequencing data, and base composition was imbalanced. After some research, we found that these errors are not uncommon and may be due to techniques in library preparation or PCR.

DEA revealed 717 DEGs out of around 20,000 protein coding genes (Figure 1), which were selected if: significance $q < 0.05$ and $\log_2\text{FC} > 1$ or < -1 . These included 367 upregulated ($\log_2\text{FC} > 1$) and 350 downregulated ($\log_2\text{FC} < -1$) genes, displaying the magnitude of the hypoxia response on the transcriptome. HIF1A, the gene that encodes subunit HIF1 α , was found to be significantly downregulated (-1.06 log₂FC). When compared with the 24-gene hypoxia signature (Figure 2) selected only 6 DEGs, all upregulated, from the signature that passed our criteria above. One of these, SYD2, was ranked third in pi, inferring the biological significance of this gene within the signature. Finally, GSEA revealed 11 significantly enriched GO terms (Figure 3), including 9 upregulated and 2 downregulated gene sets. As expected, the top hit from the leading edge was the 'hallmark hypoxia' gene set. The following GO terms covered other hypoxia-related processes, notably glycolysis, but also DNA repair and UV response.

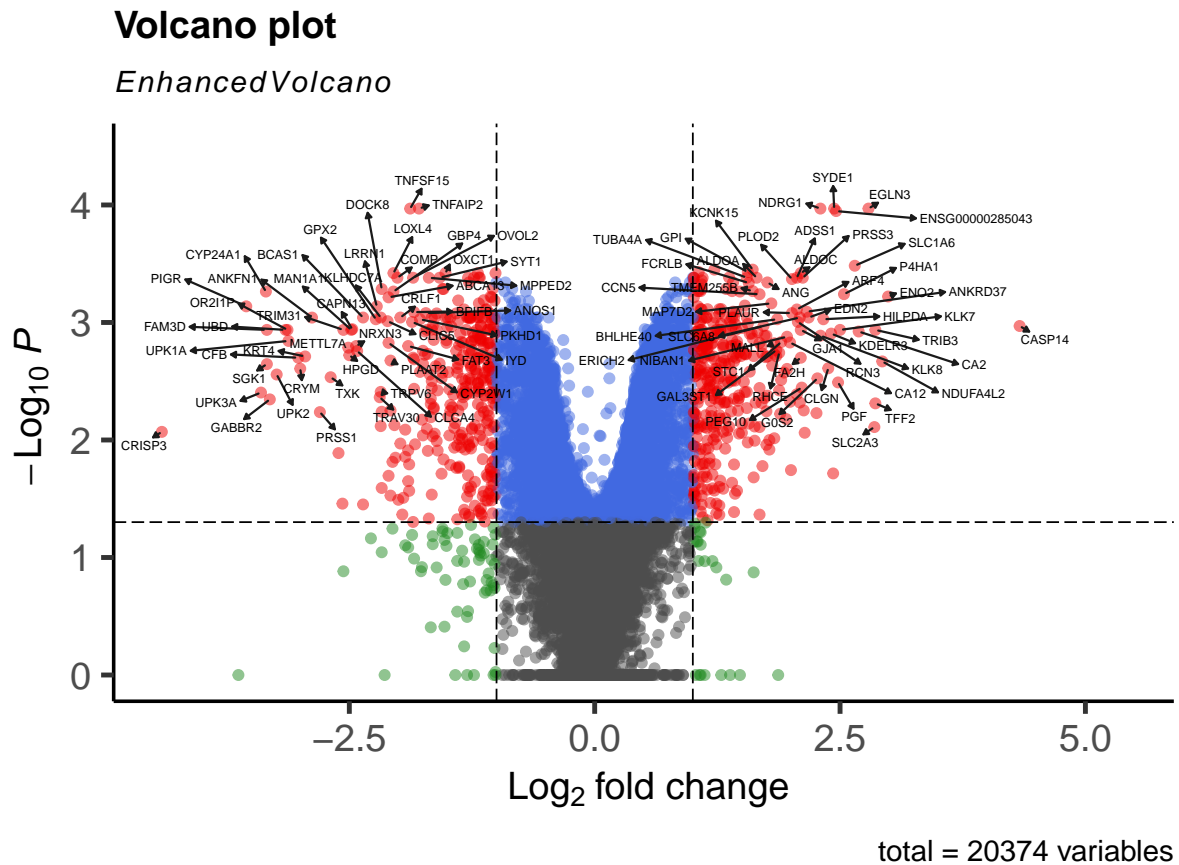


Figure 1: Volcano plot showing results of DEA. Labels indicate top 100 in pi metric.

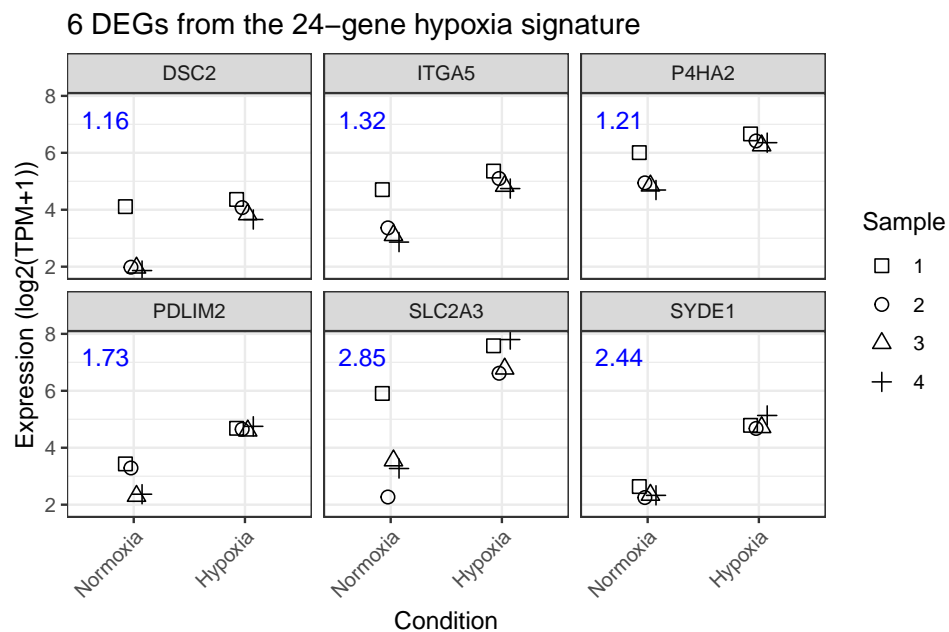


Figure 2: Plot showing the expression of 6 genes from the 24-gene hypoxia signature that were found to be differentially expressed from our data. log2FC values are located on the top-left in blue

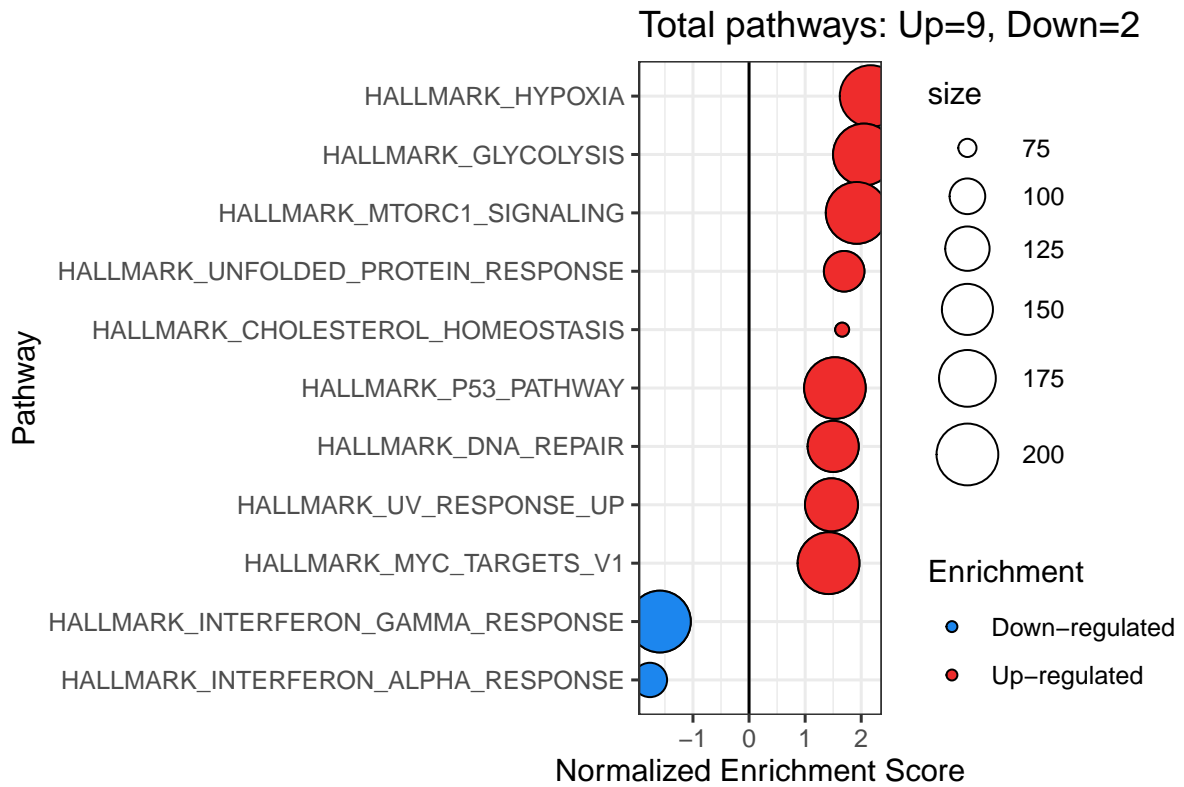


Figure 3: Plot of GO terms and their normalised enrichment score (NES) along with the size of the gene set (*How to do Gene Set Enrichment Analysis (GSEA) in R 2024*).

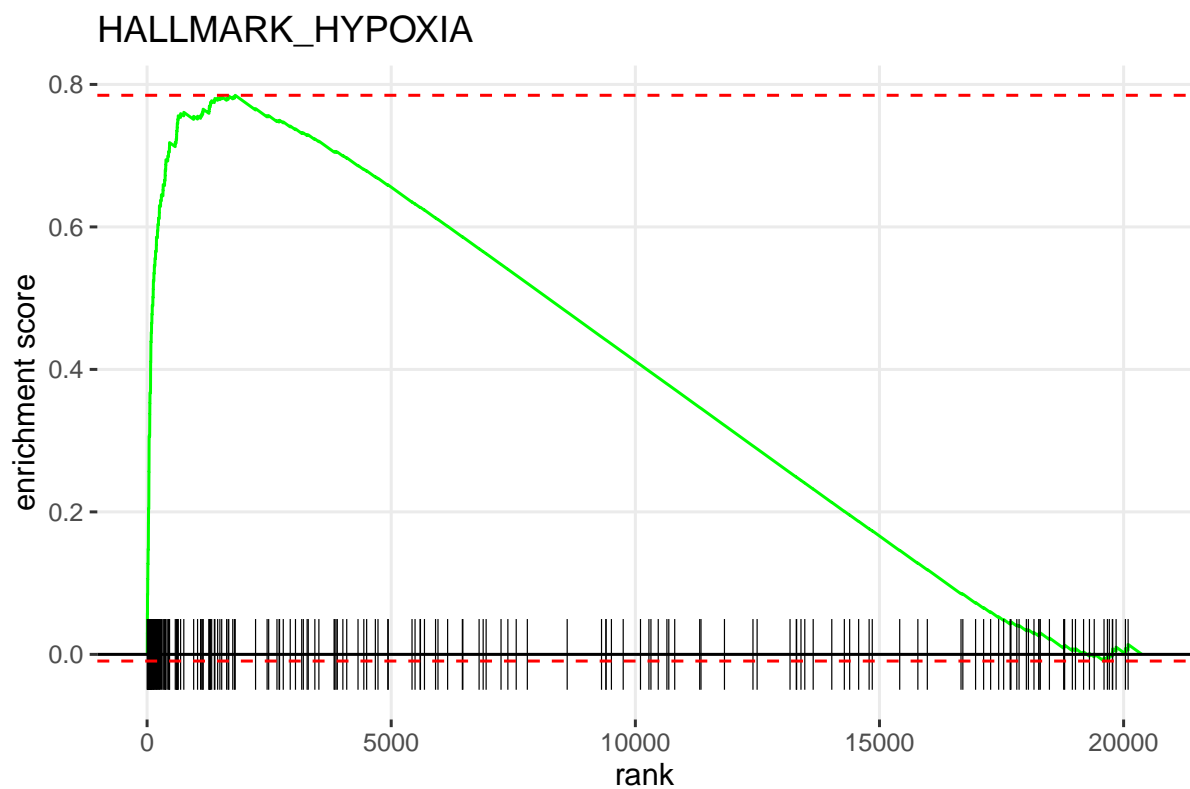


Figure 4: Enrichment plot of the hallmark hypoxia gene set.

4 Discussion

We found the downregulation of HIF1A a big surprise. The product, HIF1 α , stabilises HIF and regulates the hypoxia response causing us to initially hypothesise upregulation. Downregulated HIF1A could result from the period of exposure to hypoxic conditions, though we were not given any details about hypoxia duration from the data. We also expected the 24-gene hypoxia signature to identify more DEGs than the 6 that were found, but this is likely due to our DEG selection criteria's log2FC threshold of 1. Namely CAV1, a known major hypoxia regulator that is present in the 24-gene signature, was not significantly differentially expressed. The results from GSEA gave us a better interpretation of the hypoxia response than DEA, and correctly evaluated the leading GO terms as hypoxia and glycolysis. Though we had initially expected angiogenesis as a significantly enriched GO term, we realised in hindsight that the RNAseq data came from in vitro samples which would have likely prevented any angiogenesis response.

5 Conclusion

In summary, we have given an overview of the hypoxic response in the urothelial transcriptome, concluding that hypoxia significantly affects the expression of a huge number of genes, including only 6 from a 24-gene signature. Furthermore, we show that hypoxia affects sets of genes related to glycolysis, DNA repair, UV response and more. These findings also show the ease and power of this experiment workflow to obtain biological interpretations from RNAseq data, and highlight the importance of these bioinformatics techniques such as DEA and GSEA along with their convenient R packages.

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