

SESIÓN IV: Integration of Phenotypic and Functional Networks

Junio, 2013

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Unidad 741 CIBERER

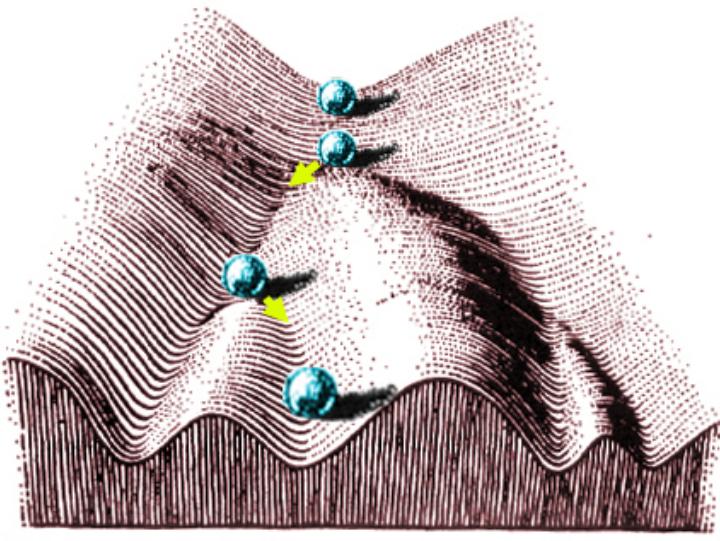
Biological robustness

“Biological systems, from macromolecules to whole organisms, are **robust** if they continue to function, survive, or reproduce when faced with mutations, environmental change, and internal noise”

Identify how biological systems lose robustness

Landscape Metaphor: Canalization in development biology

Rolling balls down-hill

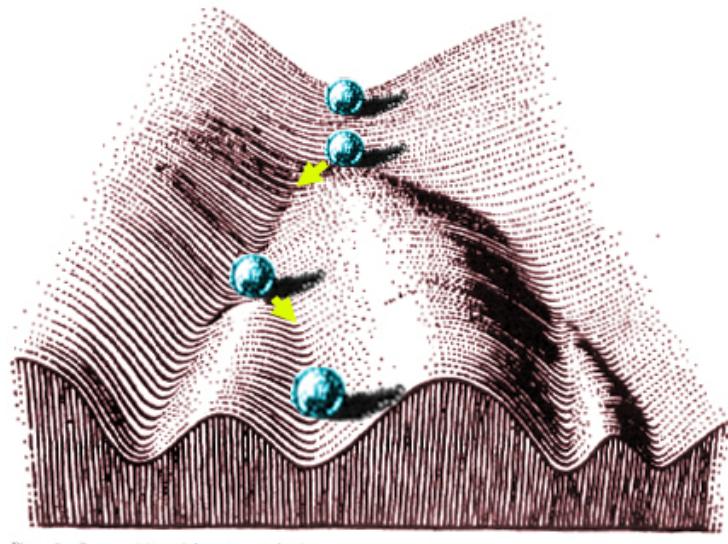


1. Genetic
2. Environmental
3. Stochastic
(noise or random events)

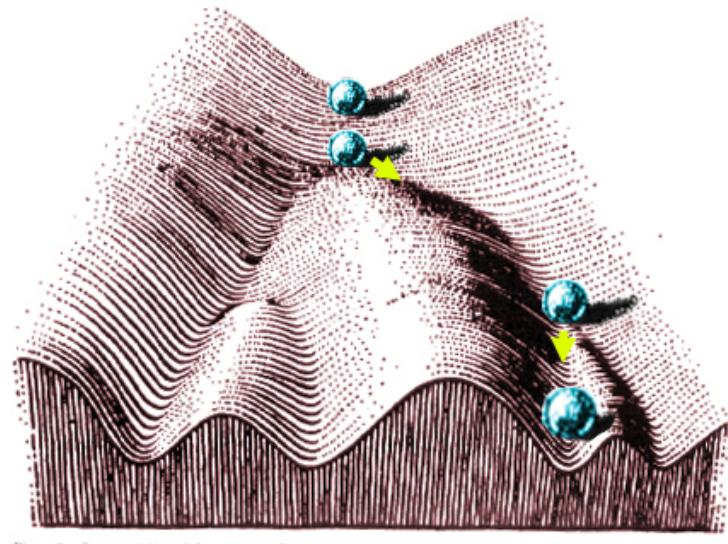
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Landscape Metaphor: Robustness for phenotypic variability

Wild type

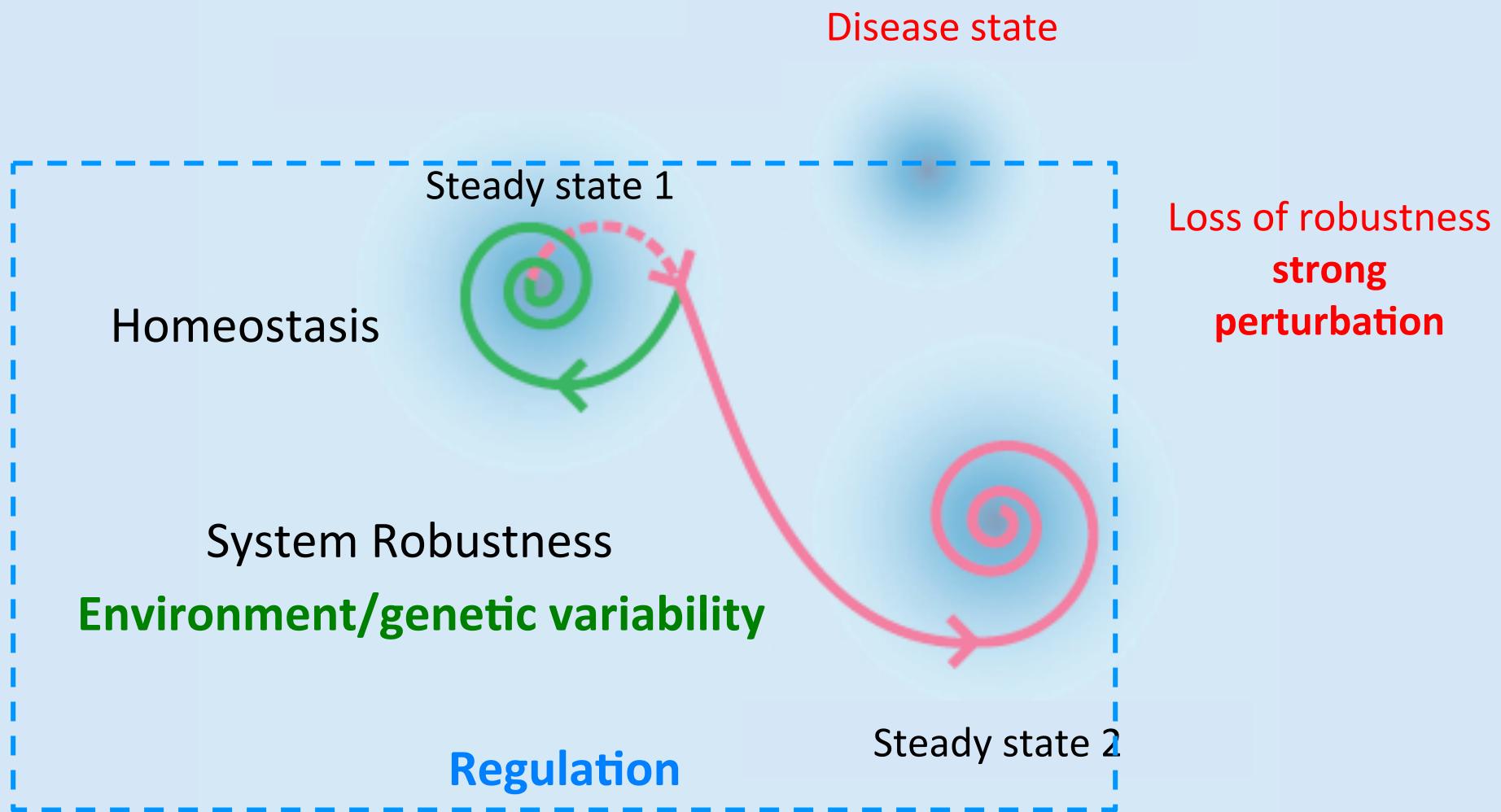


Disease state

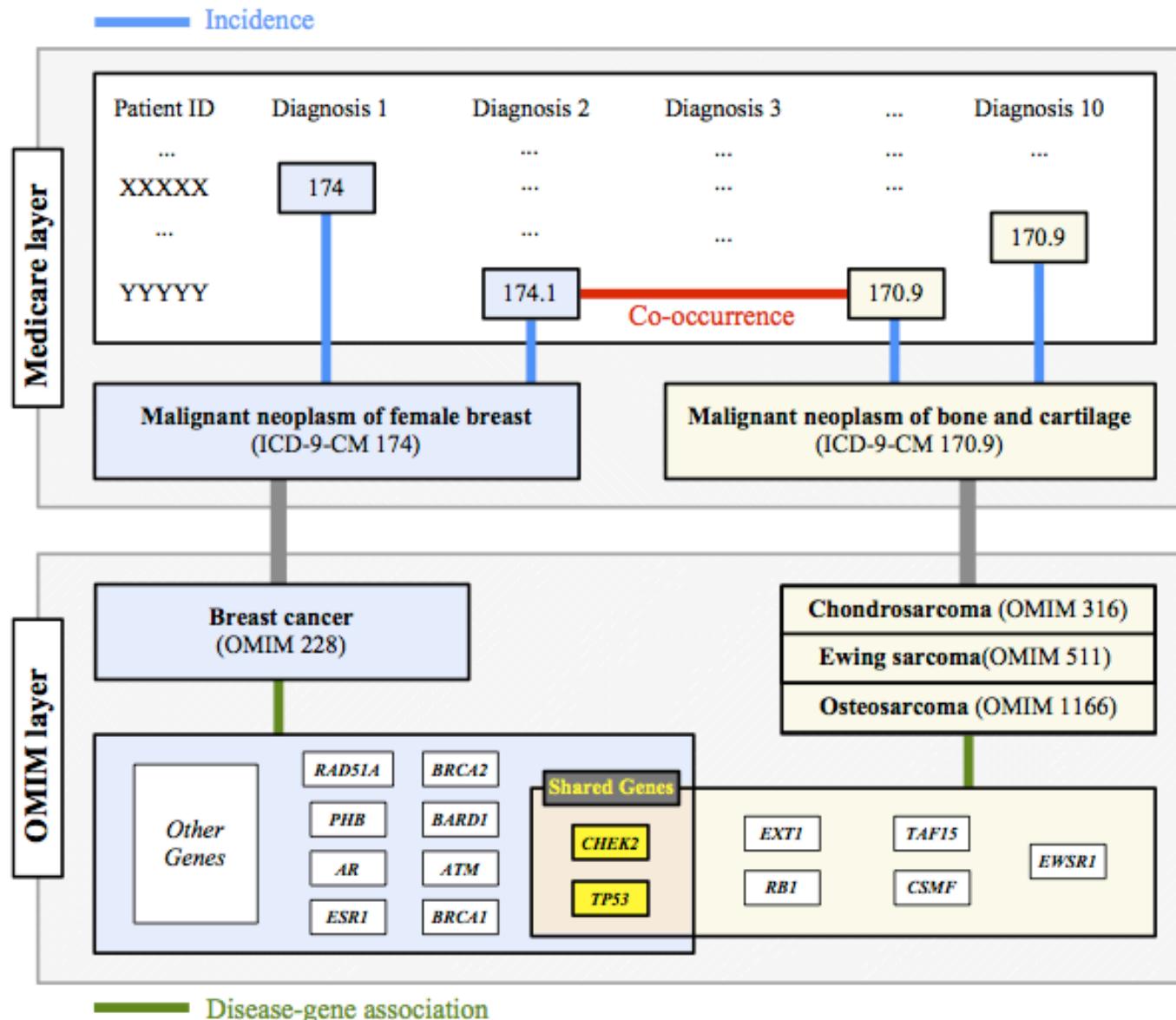


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Loss of robustness induces pathogenesis

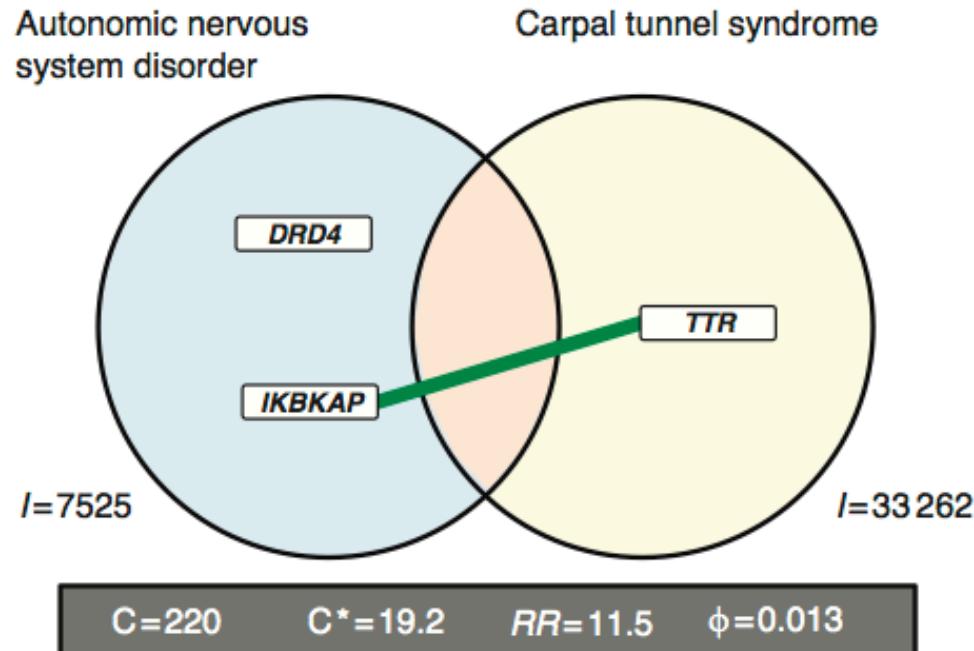
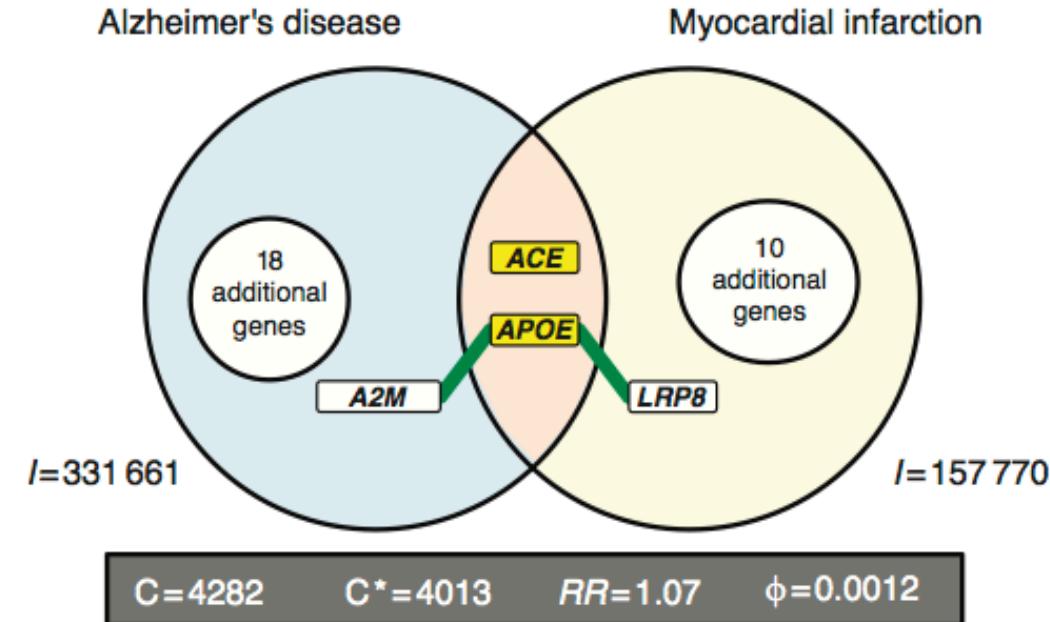


COMORBIDITY



COMORBIDITY

— PPI

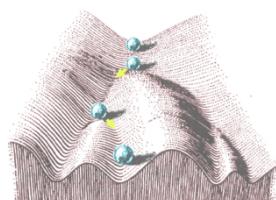


Starting point

- Most genetic influences on a trait/phenotype are usually unknown
- Phenotypic variation is not just due to genetics.



1. It is **NOT necessary detailed mechanistic models** of a biological system in order to predict phenotypic variation, **pragmatic statistical approaches may suffice (Genotype combinations studies)**.
2. **Natural (biological) networks evolved to be robust** to genetic, environmental and stochastic perturbations. GOOD level of abstraction, less precision



Sources of information

1. Genetic diseases
2. Pathological Phenotypes variability
3. Functional interactions between genes

“All of this data can be modeled in networks”

OPEN  ACCESS Freely available online



Global Analysis of the Human Pathophenotypic Similarity Gene Network Merges Disease Module Components

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Databases



www.omim.org



www.orpha.net

- Dr. Victor A. McKusick
- Repository of studies about clinical features and molecular genetics

- Focused on low prevalence diseases.
- Originally enriched by OMIM diseases
- Actively reviewed by clinical experts

Genetic disorders: **3.486**

Genetic disorders: **2.125**

Mutated genes: **2.794**

Mutated genes: **2.331**

All diseases: **7.263**

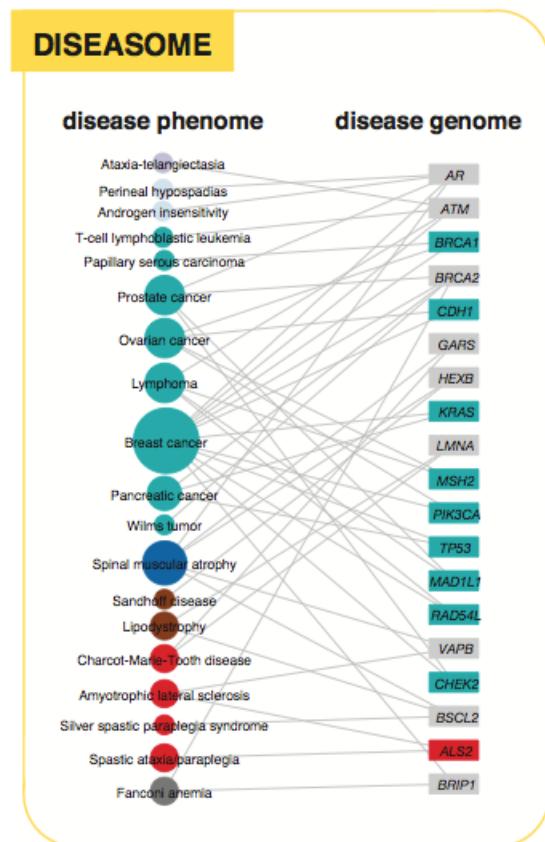
All diseases: **5.954**

Many cases we know the gene but not the molecular etiology

Databases 2 Diseasomes



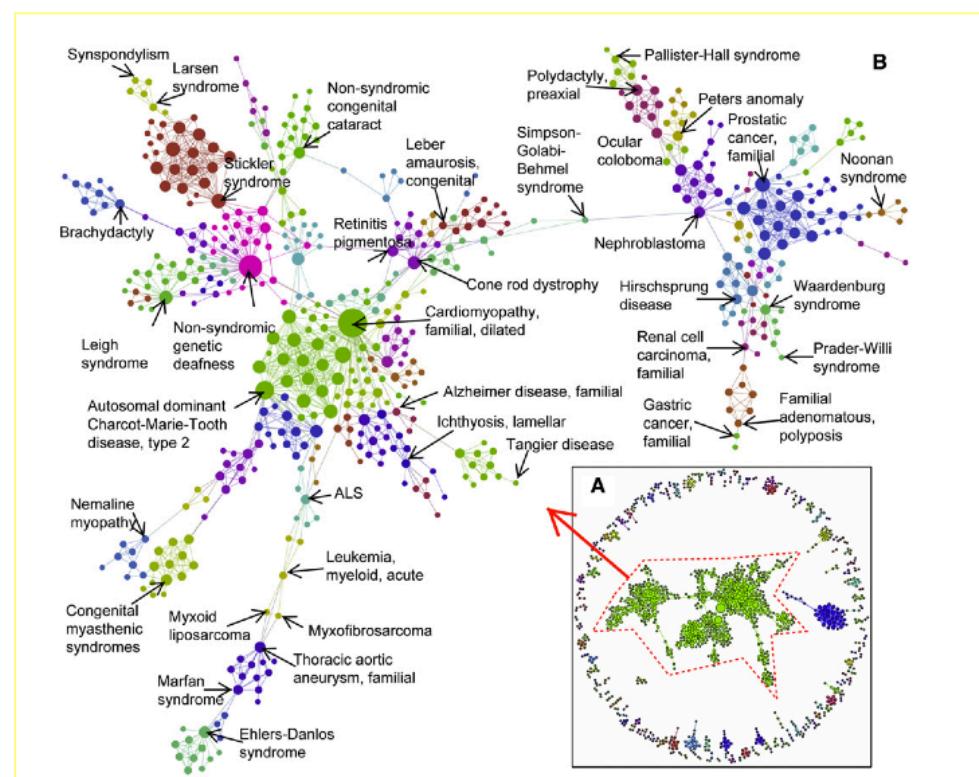
The Human Diseases Network



Goh et al. 2007

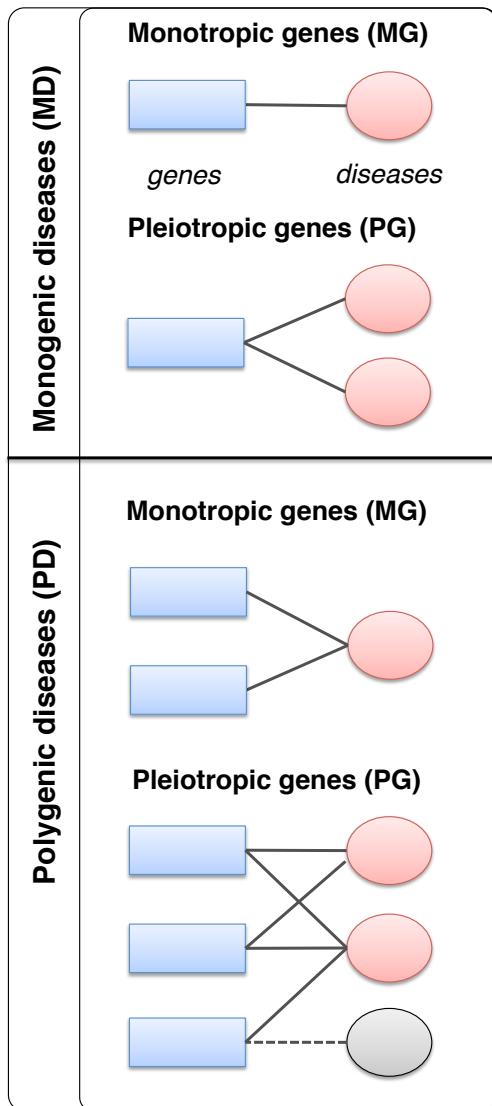


The Orphan Disease Networks



Zhang et al. 2011

Proposed classification (disease-gene)



Subset	Human Diseases Network		Orphan Disease Networks	
	Diseases per gene	Genes (%)	Diseases per gene	Genes (%)
MD-MG	1.00	1431 (56.7)	1.00	717 (30.8)
MD-PG	2.57	639 (25.3)	2.71	435 (18.7)
PD-MG	0.46	379 (15.0)	0.40	908 (39.0)
PD-PG ^a	2.13	371 (14.7)	1.68	584 (25.1)
All genes ^b	1.24	2525 (100)	0.91	2331 (100)

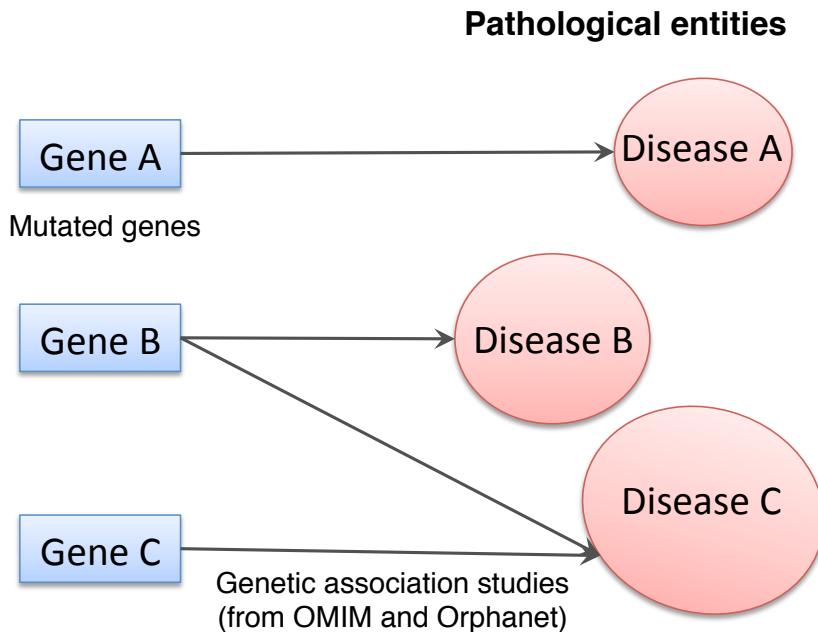
^aPleiotropic genes associated with at least one polygenic diseases.

^bAll genes in HDN and ODN respectively.

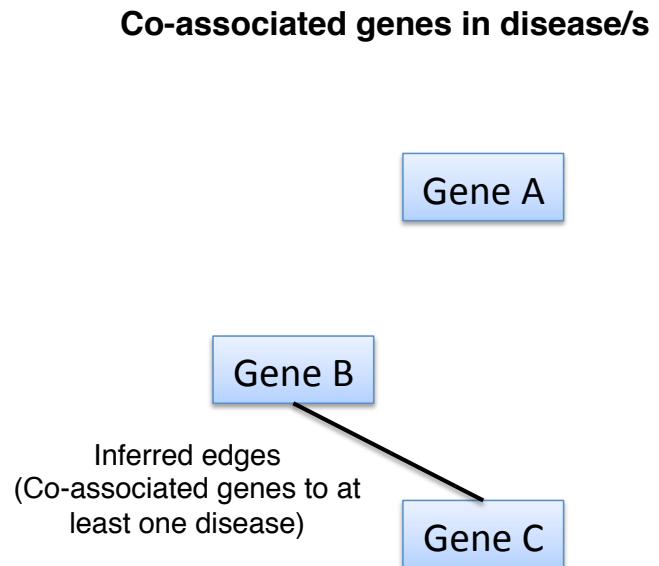
Strong differences between both inherited disease database

From KNOWN to INFERRRED relationships

BIPARTITE PROJECTION (disease-to-gene)

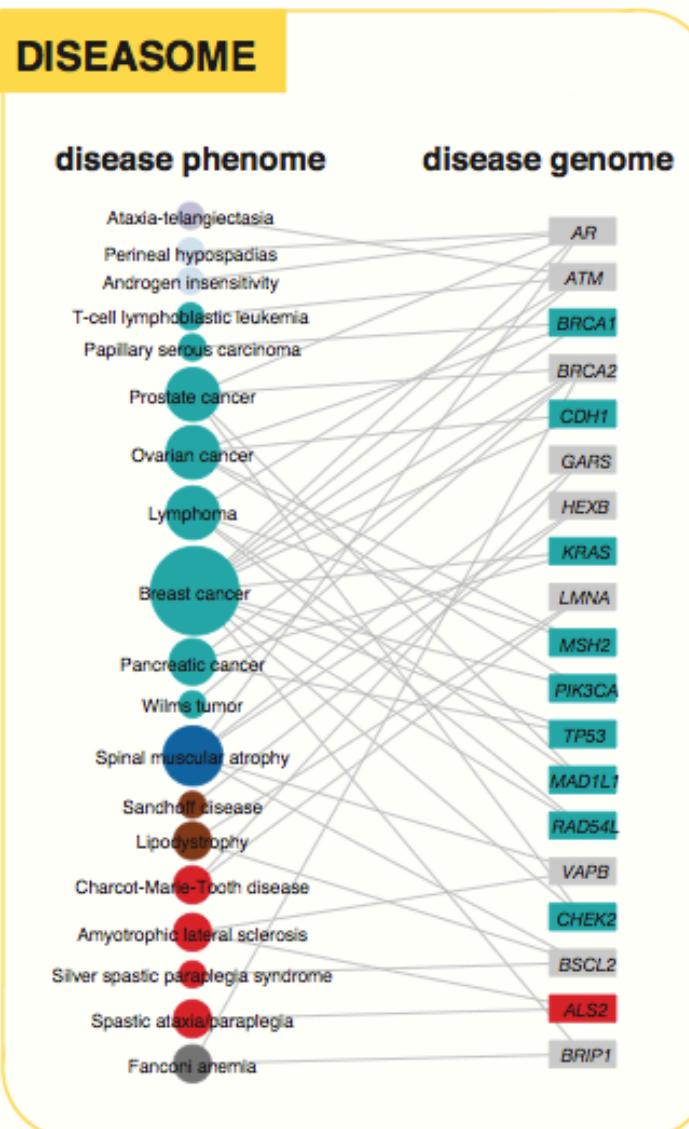
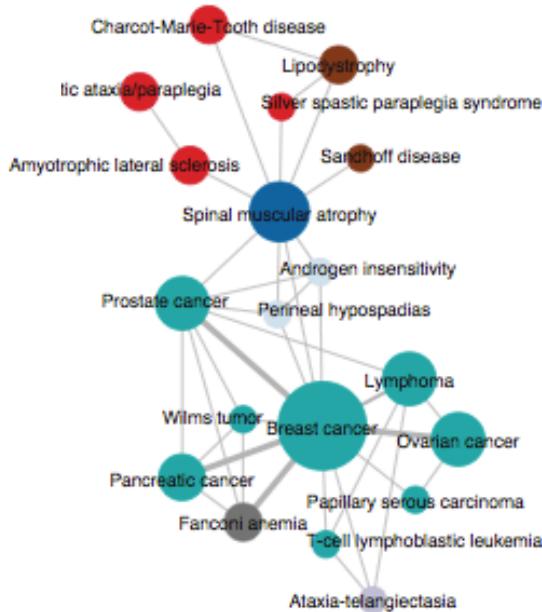


INFERRRED UNIPARTITE PROJECTION (gene-to-gene)

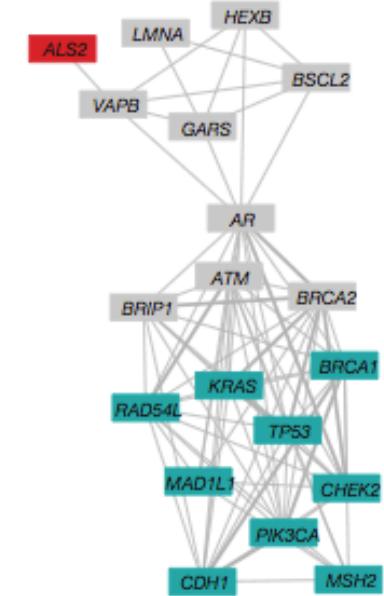


The Human Diseases Network

Human Disease Network
(HDN)



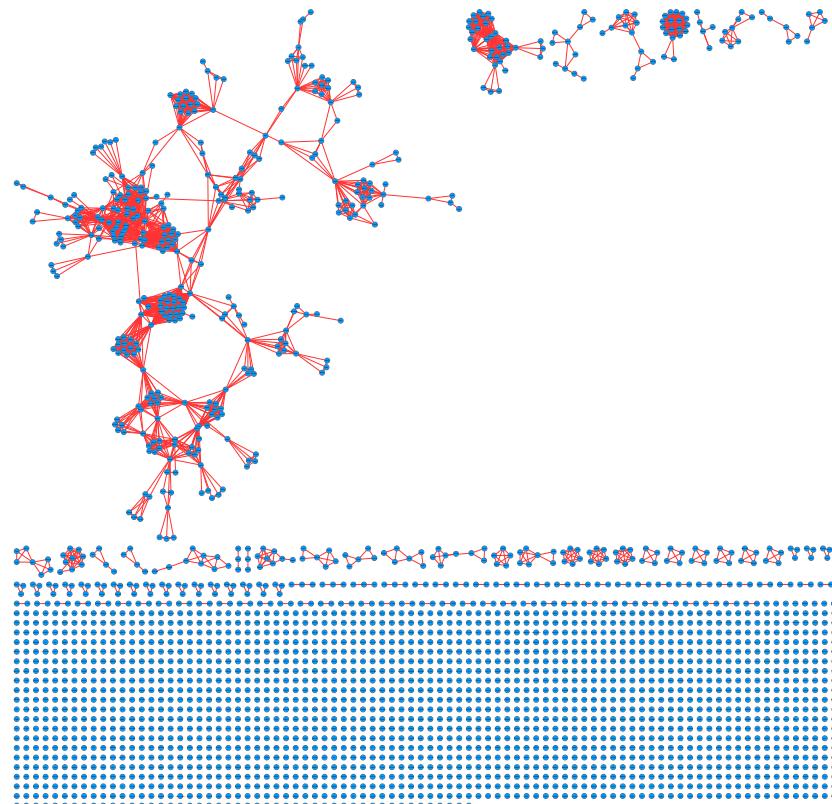
Disease Gene Network
(DGN)



Inferred gene-gene (unipartite projections)

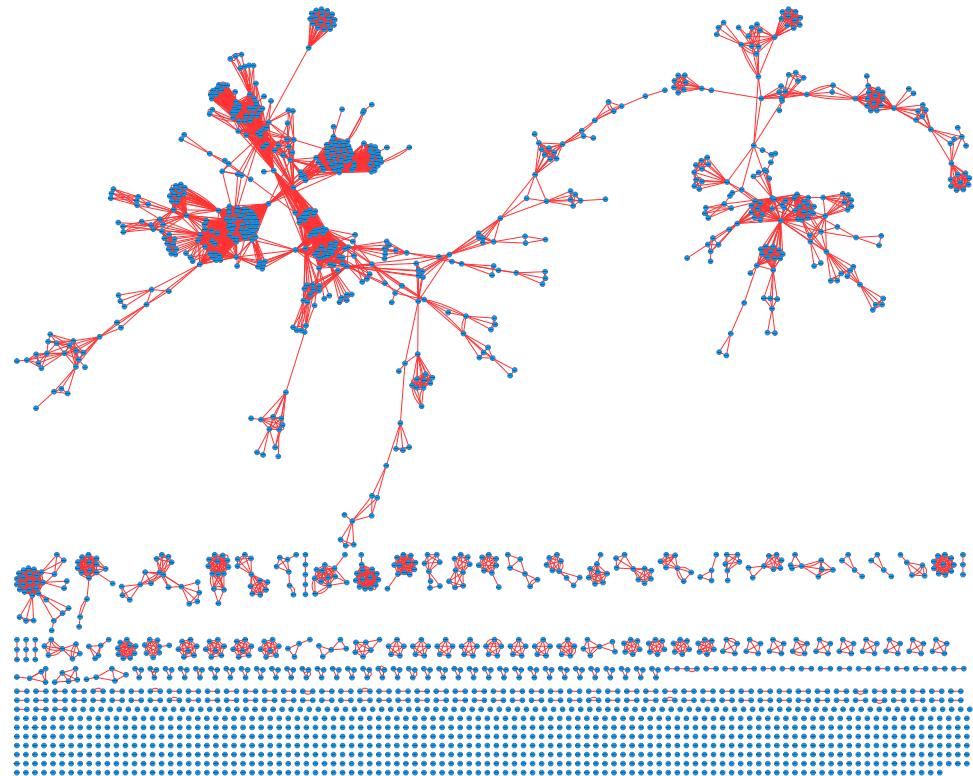
**A) Human Diseases Gene Network
(gene-to-gene unipartite)**

Connected nodes: 749
Unconnected nodes: 1776
Edges: 2654



**B) Orphan Diseases Gene Network
(gene-to-gene unipartite)**

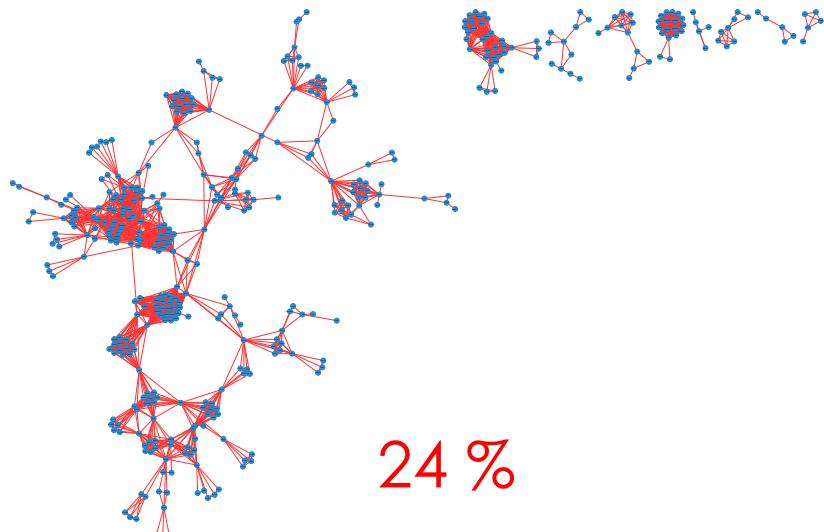
Connected nodes: 1492
Unconnected nodes: 839
Edges: 6380



Network comparison HDGN vs ODGN

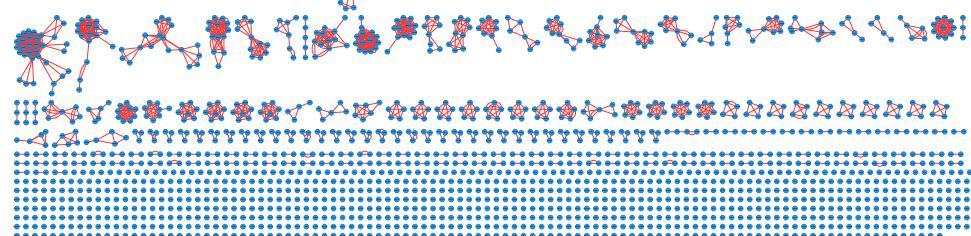
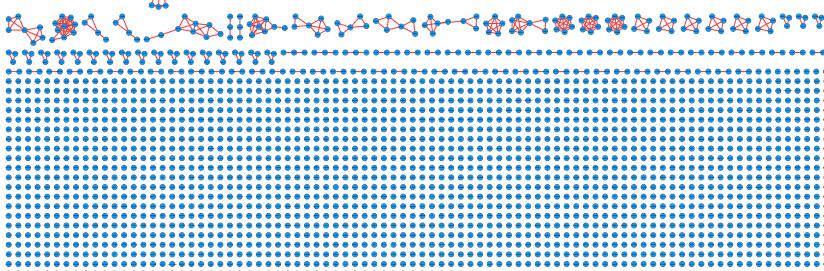
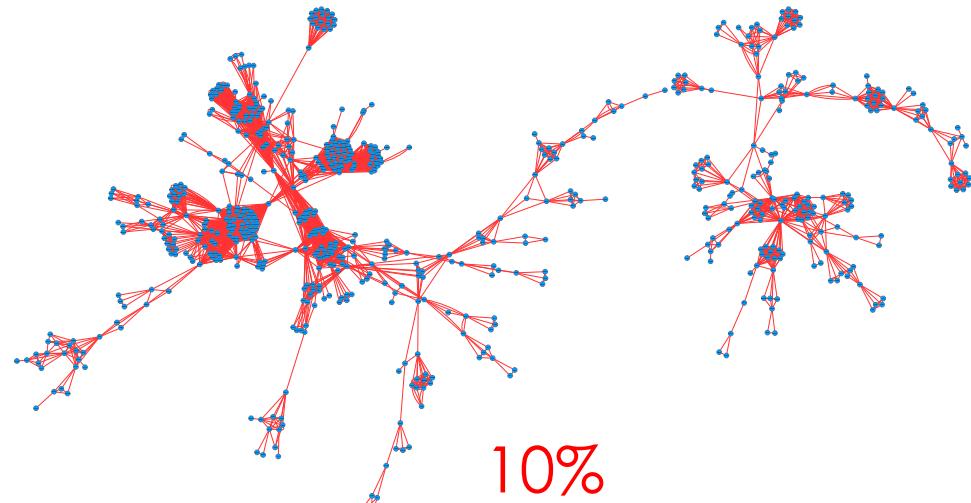
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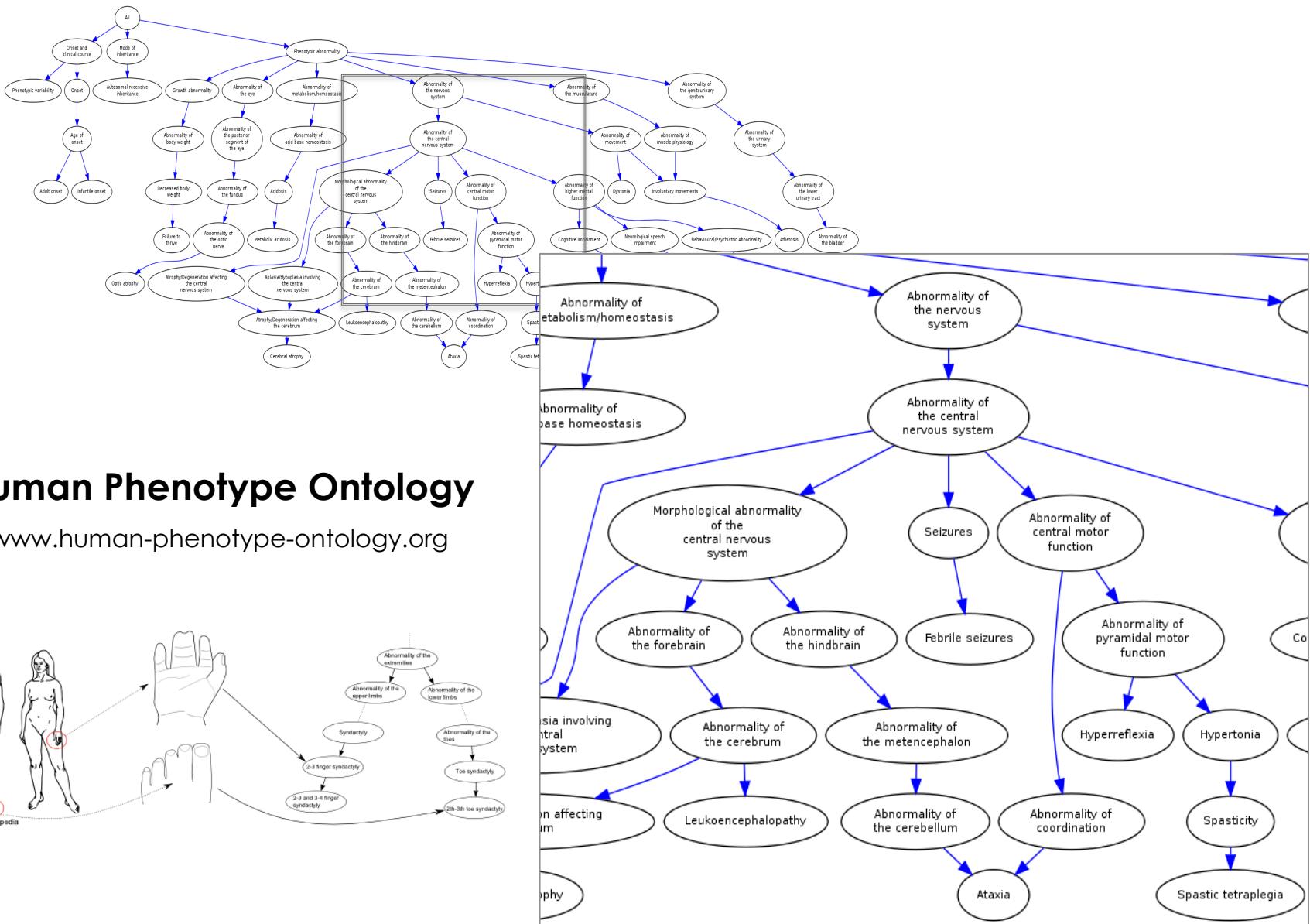


**B) Orphan Diseases Gene Network
(gene-to-gene unipartite)**

Connected nodes: 1492
Unconnected nodes: 839
Edges: 6380

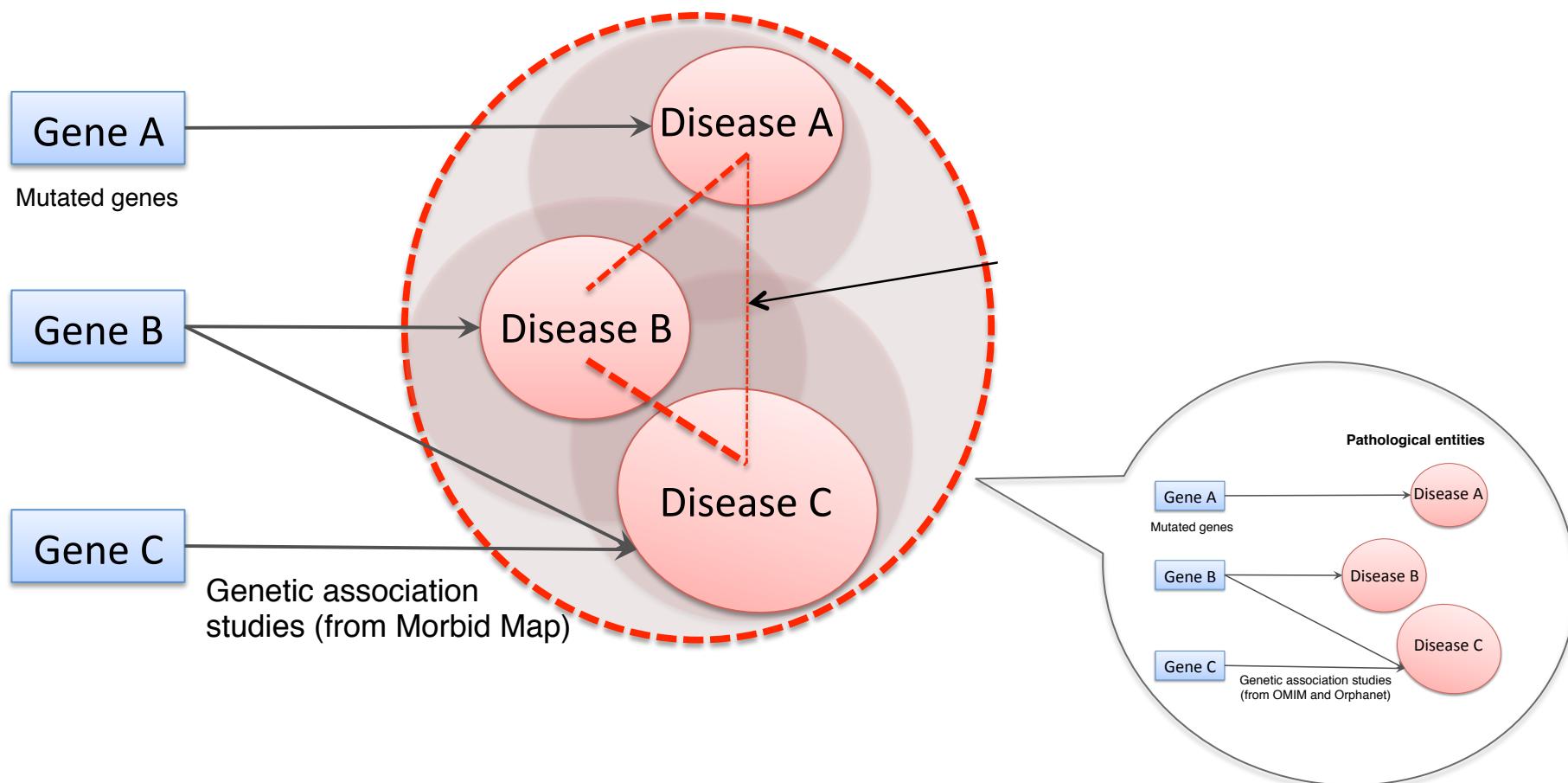


Understanding diseases as sets of phenotypes

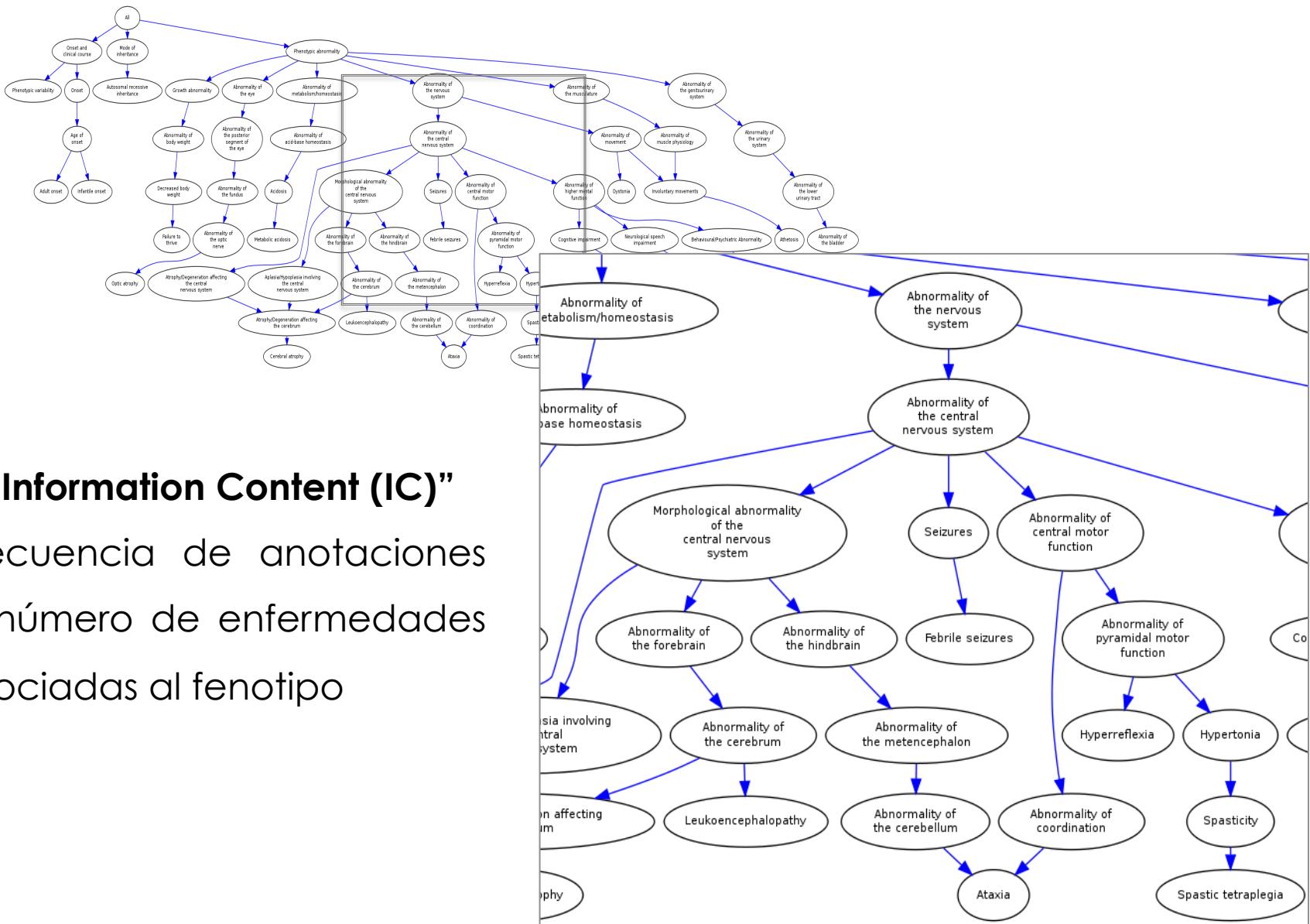


Pathophenotypic space instead of diseases

Pathophenotypic space of diseases



Understanding diseases as sets of phenotypes

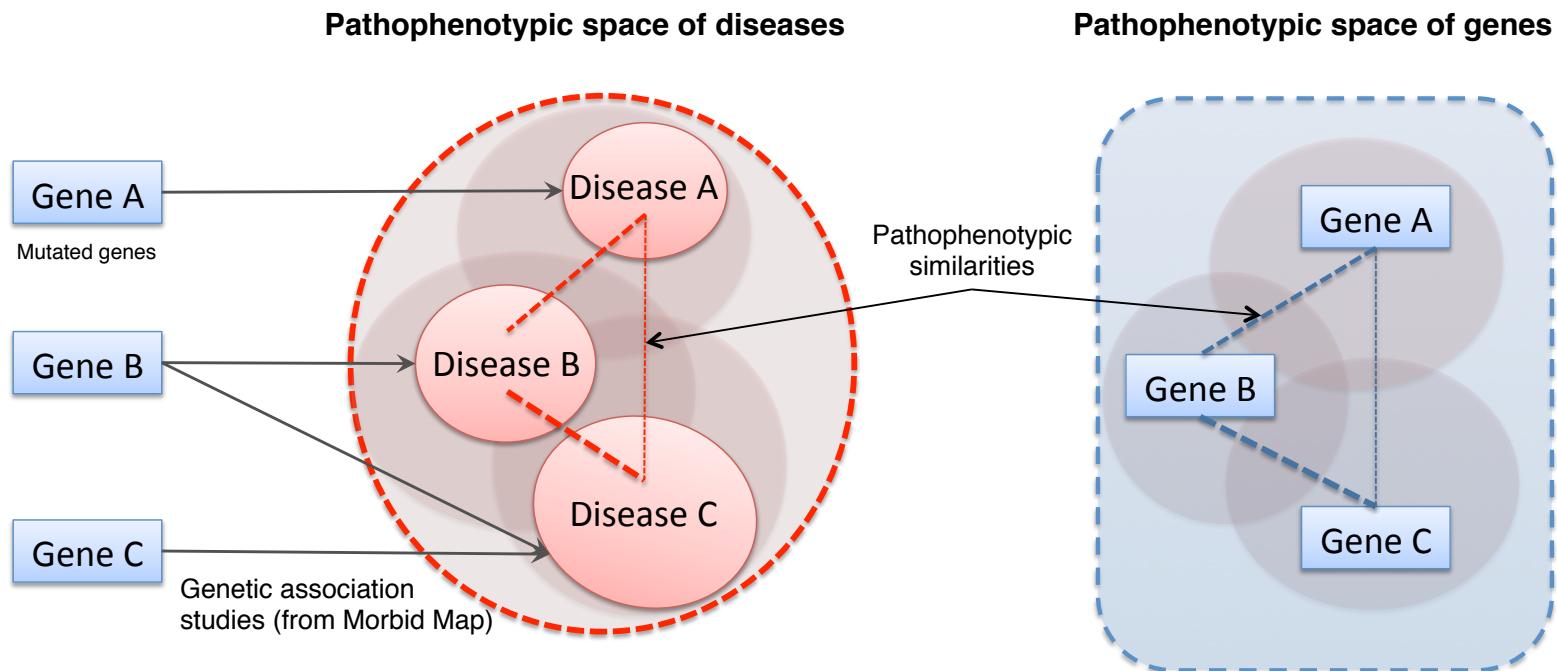


“Information Content (IC)”

Frecuencia de anotaciones
o número de enfermedades
asociadas al fenotipo

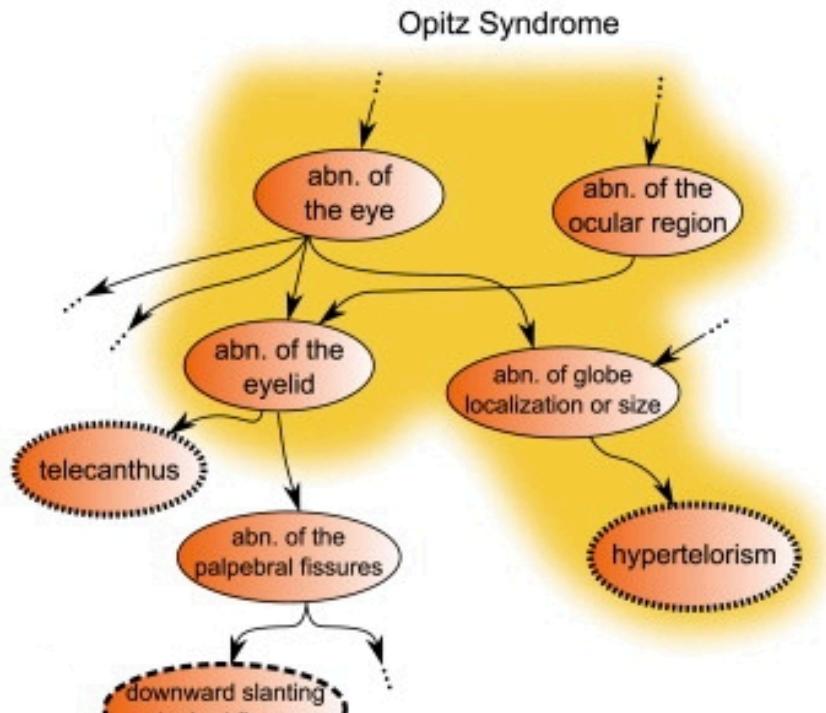
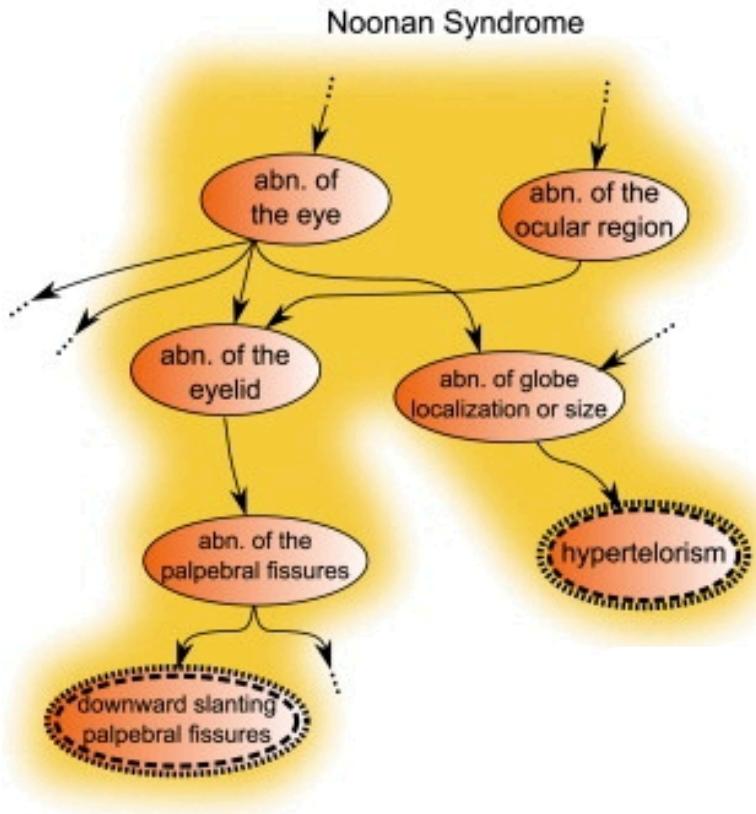
Pathophenotypic space for genes

PATHOPHENOTYPIC SPACES BASED ON HPO TERMS ANNOTATIONS



**Un fenotipo cambia su especificidad entre enfermedades y genes
“Information Content (IC)” de los fenotipos**

Phenotypic similarity



Renisk uses the most specific phenotypes

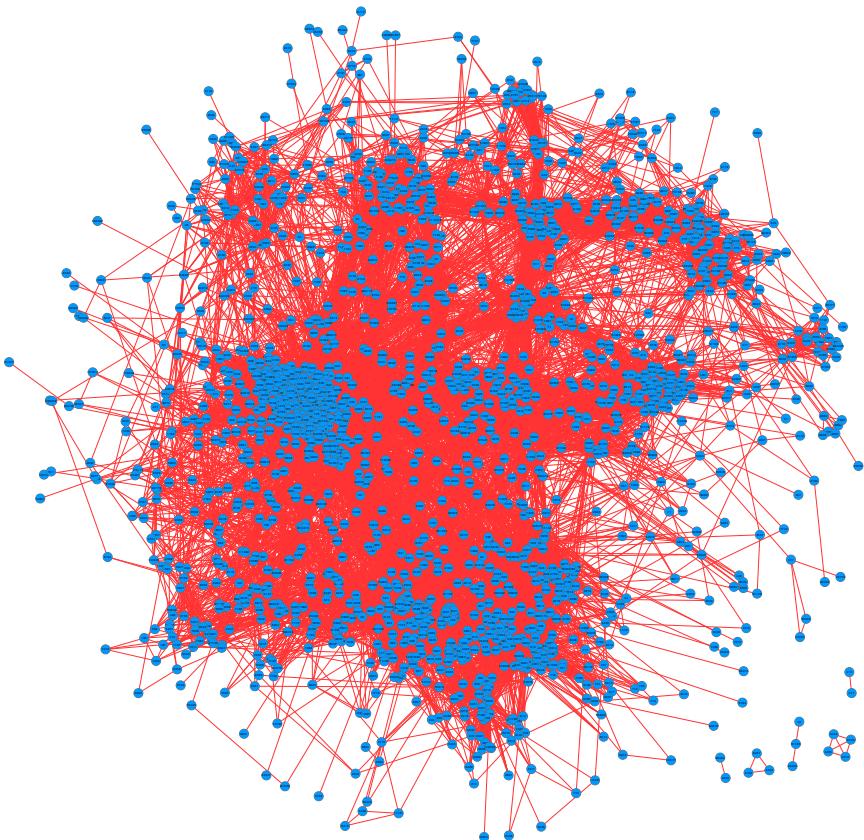
Robinson uses the media of all phenotypes

Human Pathophenotypic Similarity Gene Network (PSGN)

Connected nodes: 1705

Unconnected nodes: 0

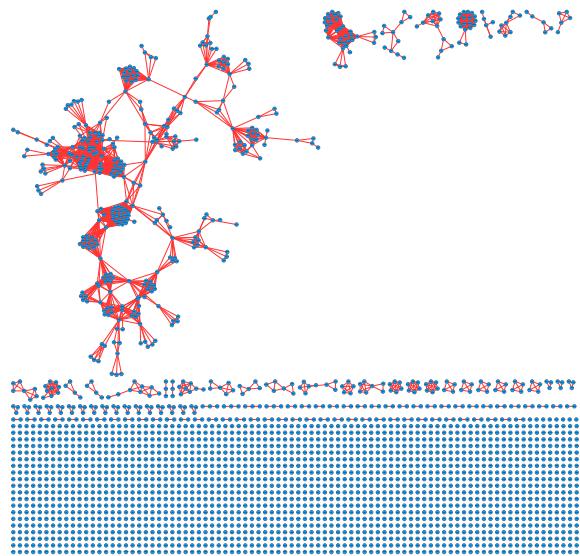
Edges: 26197



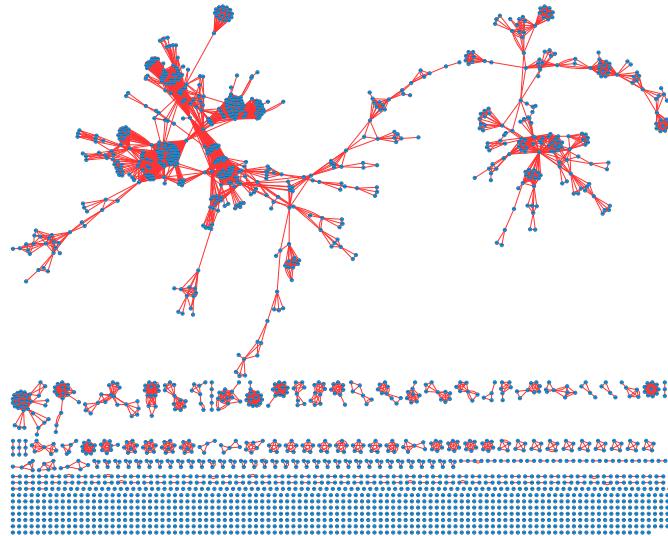
Expanding phenotypic relationships
to decrease the specificity

Network comparison HDGN, ODGN and PSGN

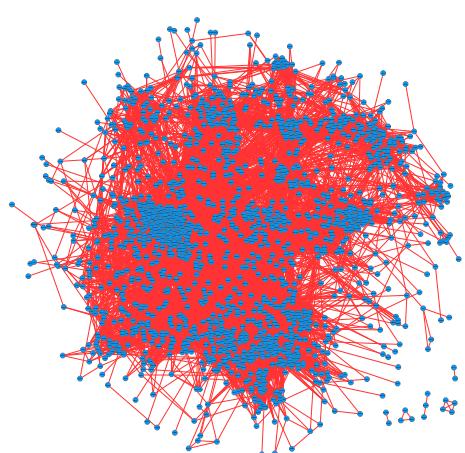
**A) Human Diseases Gene Network
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**B) Orphan Diseases Gene Network
(gene-to-gene unipartite)**
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Unconnected nodes: 839
Edges: 6380



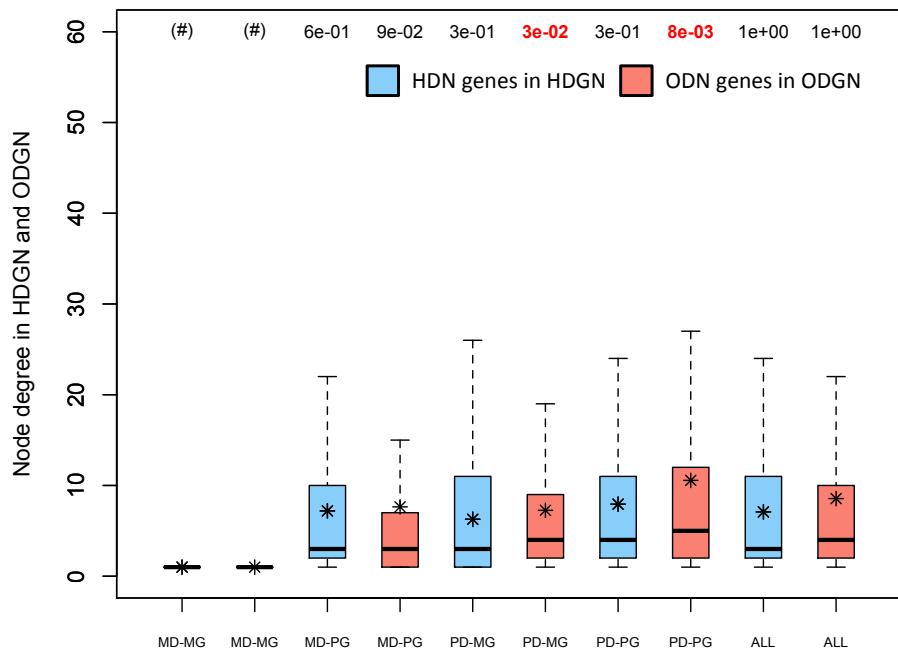
**C) Pathophenotypic Similarity Gene Network
(gene-to-gene semantic similarity)**
Connected nodes: 1705
Unconnected nodes: 0
Edges: 26197



Degree of genes in HDGN, ODGN and PSGN

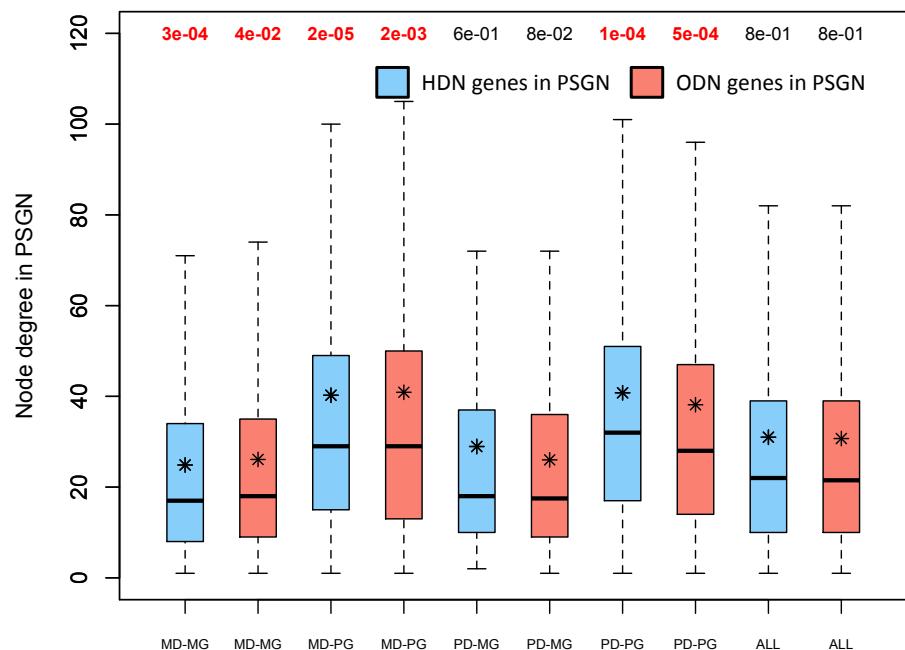
A

Degree distribution of gene subsets in HDGN or ODGN



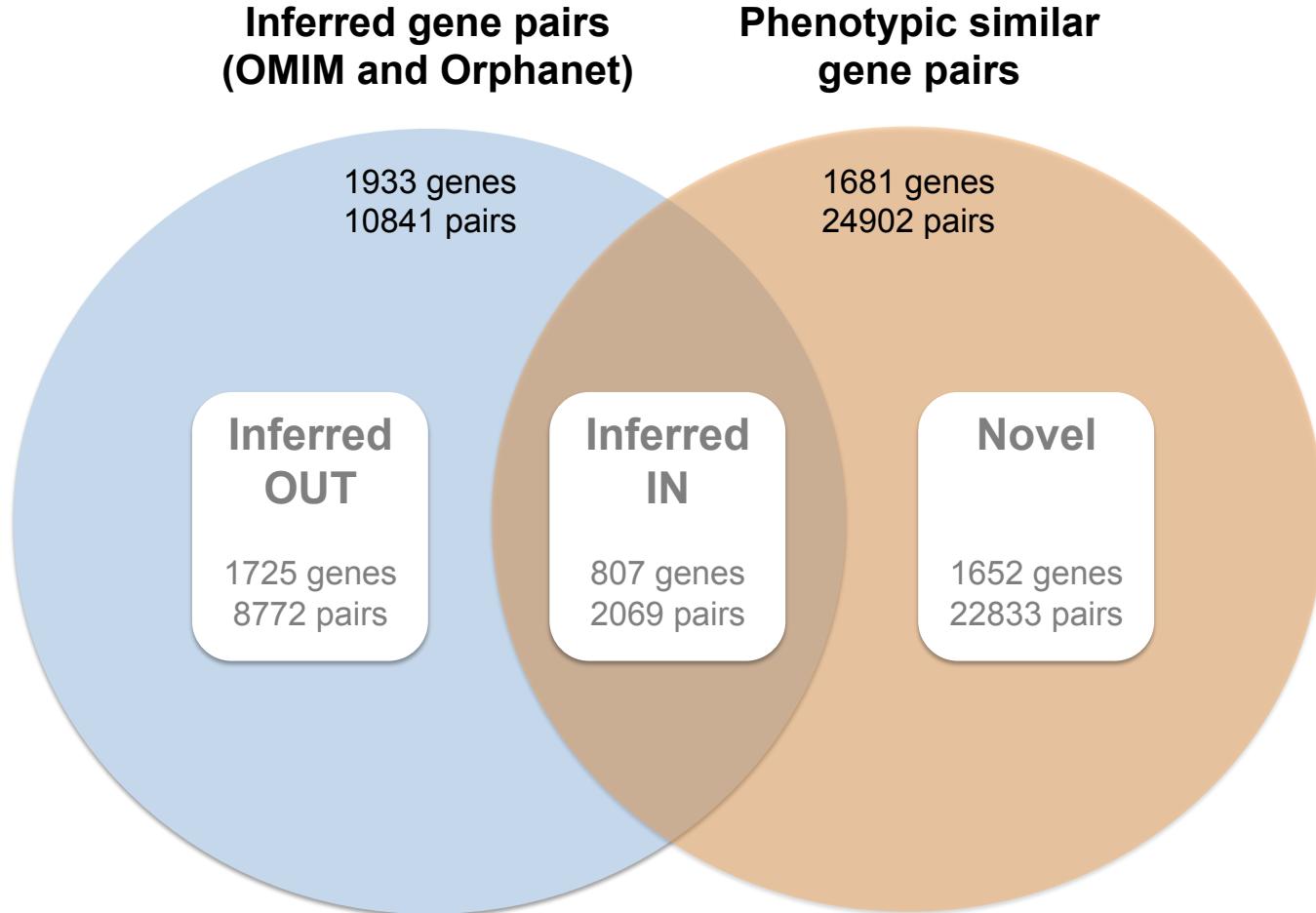
B

Degree distribution of gene subsets in PSGN



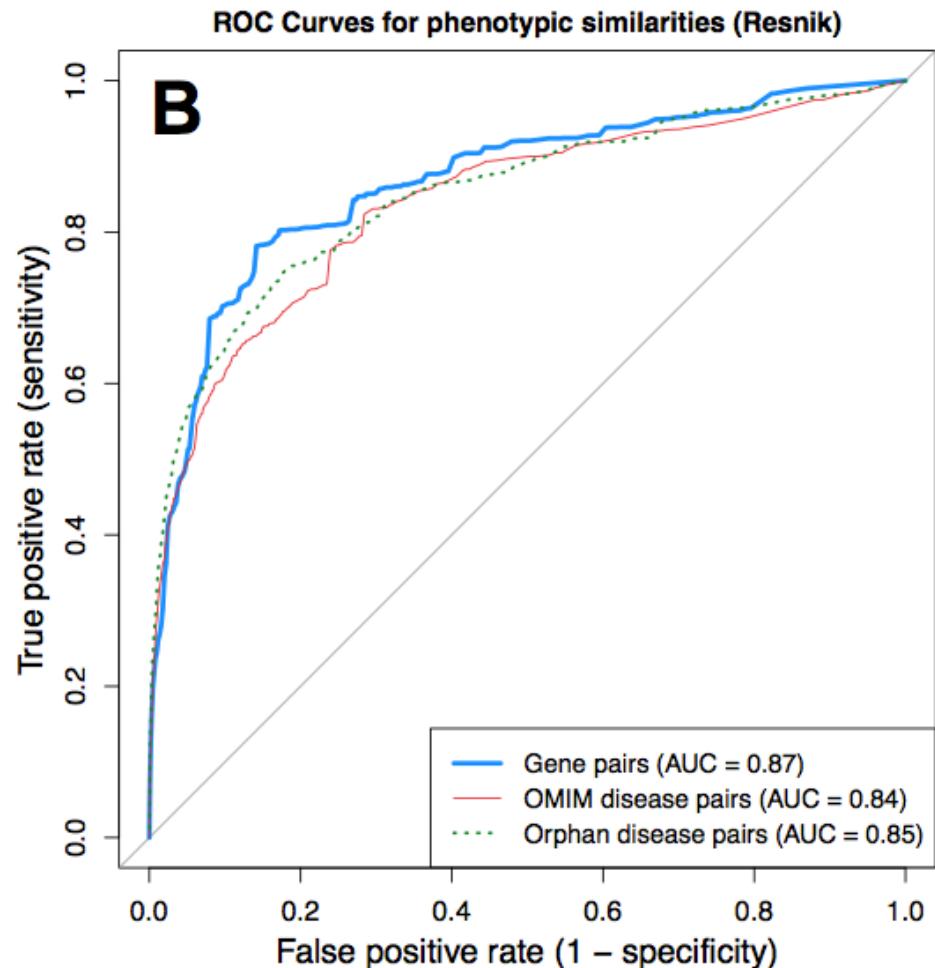
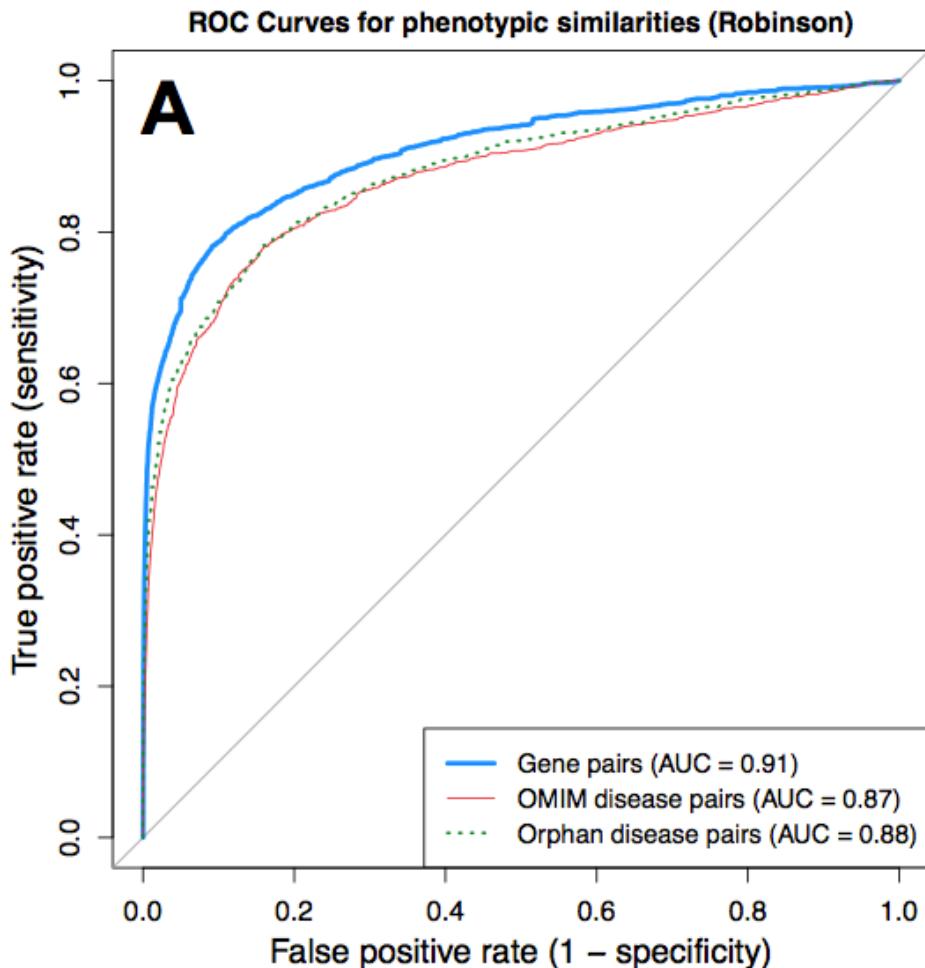
MD-MG 25 interacciones de media
Más homogeneidad que HDN y ODGN

Venn diagram $[(HDGN \cup ODGN) \cap PSGN]$



Todos los genes anotados al menos 1 nueva relación

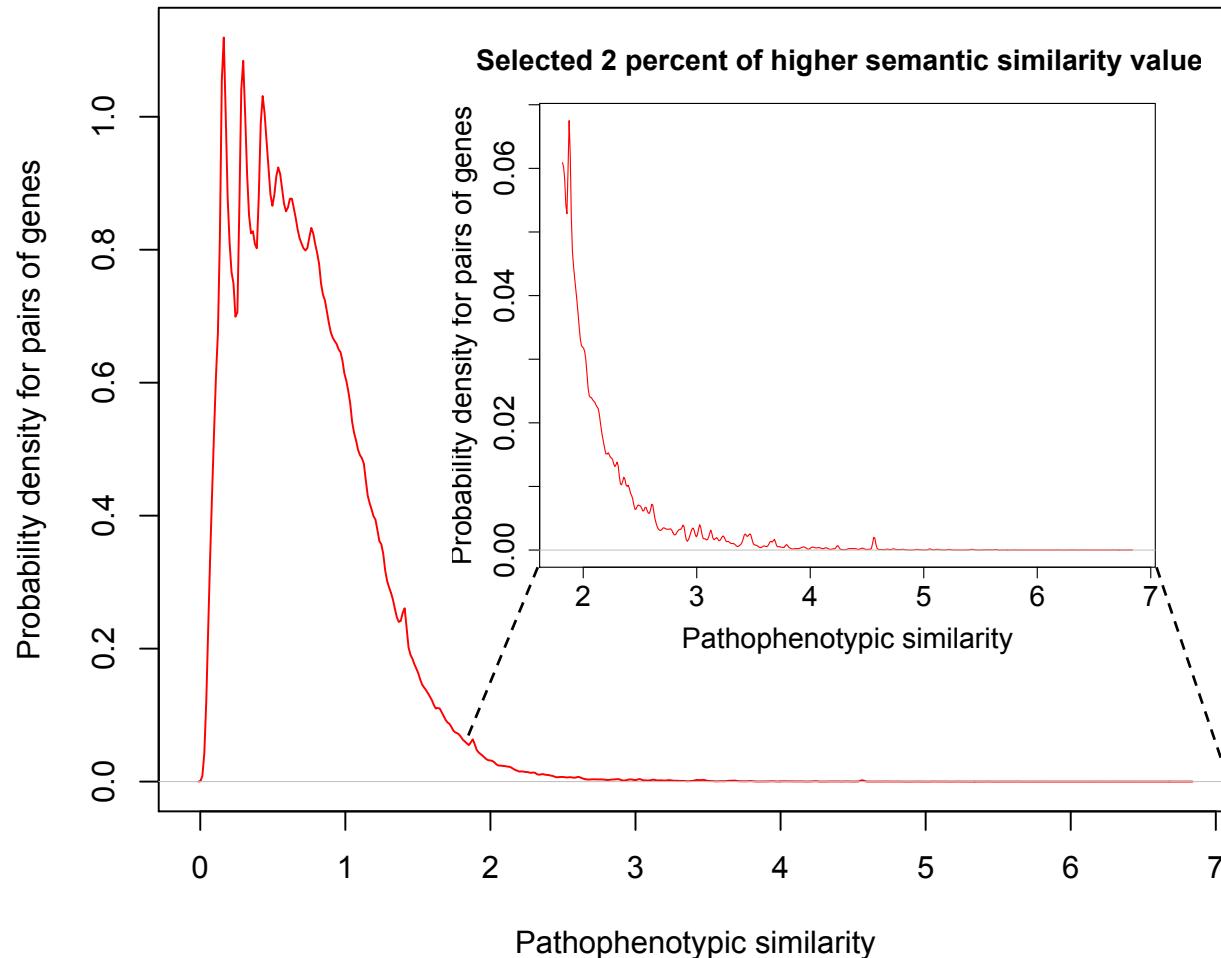
Performance validation (Phenotypic similarity vs. inference)



Robinson es una medida adecuada para la similitud fenotípica

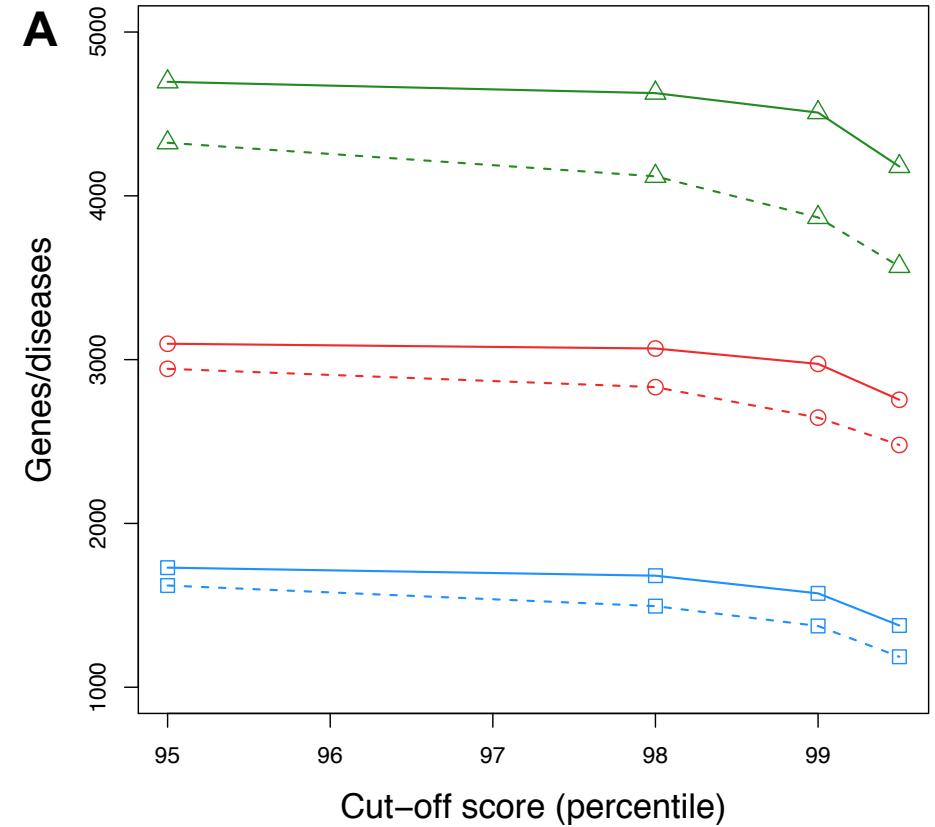
Density function probability of phenotypic similarities

All semantic similarity values calculated in HPO

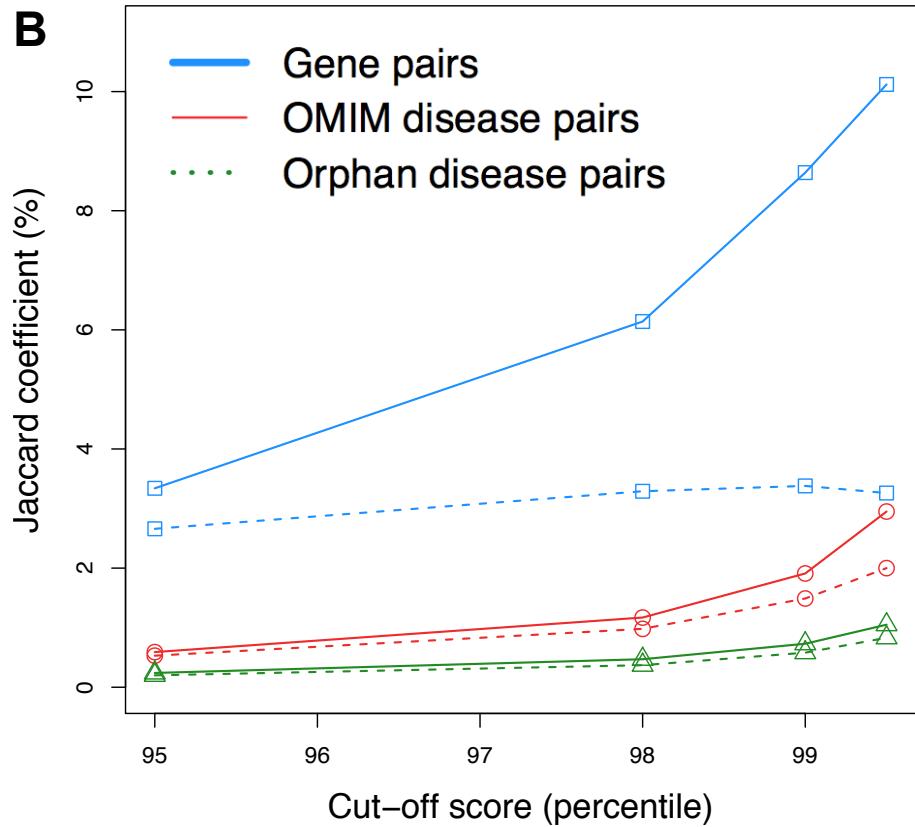


Robinson es una medida adecuada para la similitud fenotípica

Optimal Statistical Cut-Off (pragmatic)

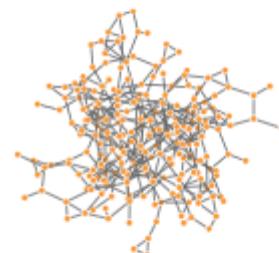
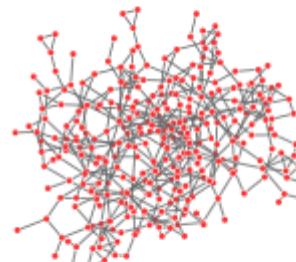
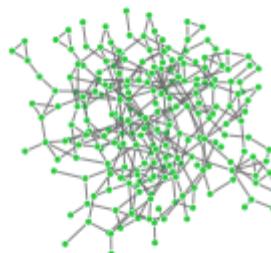
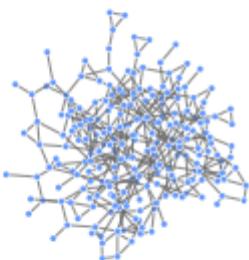
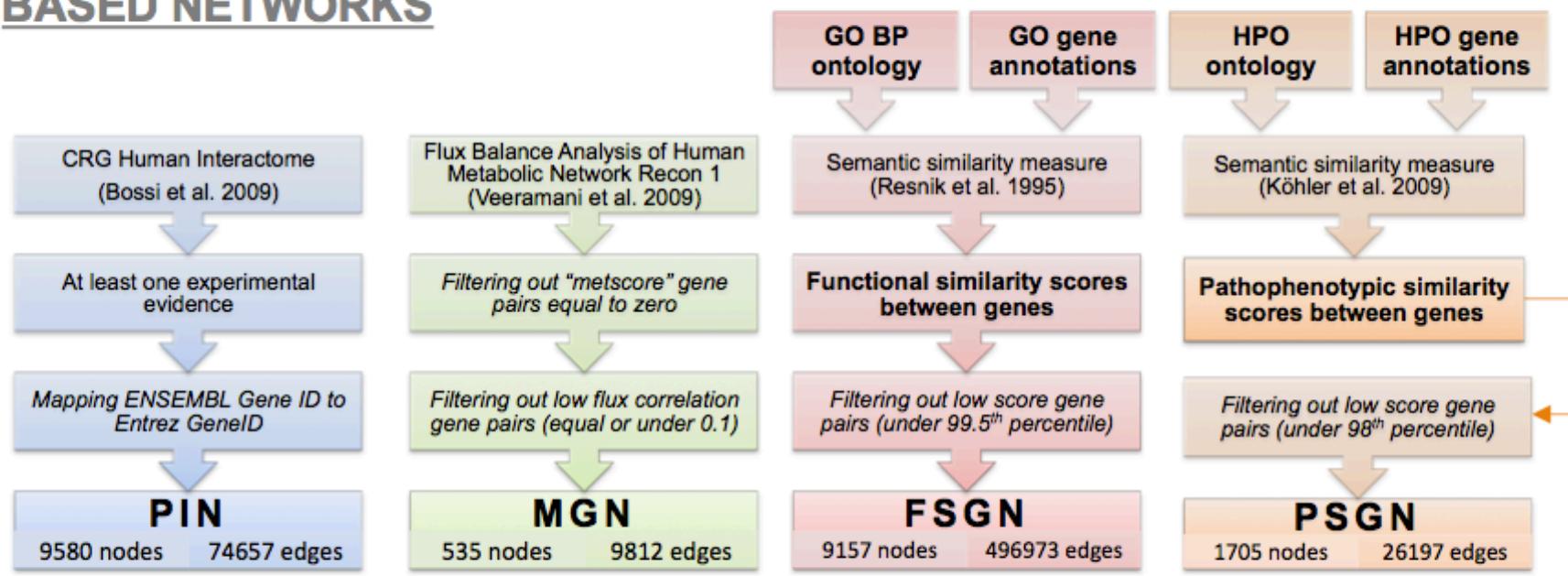


From 98th we loss information
TOMORROW



From 98th we increase similarity
with inferred

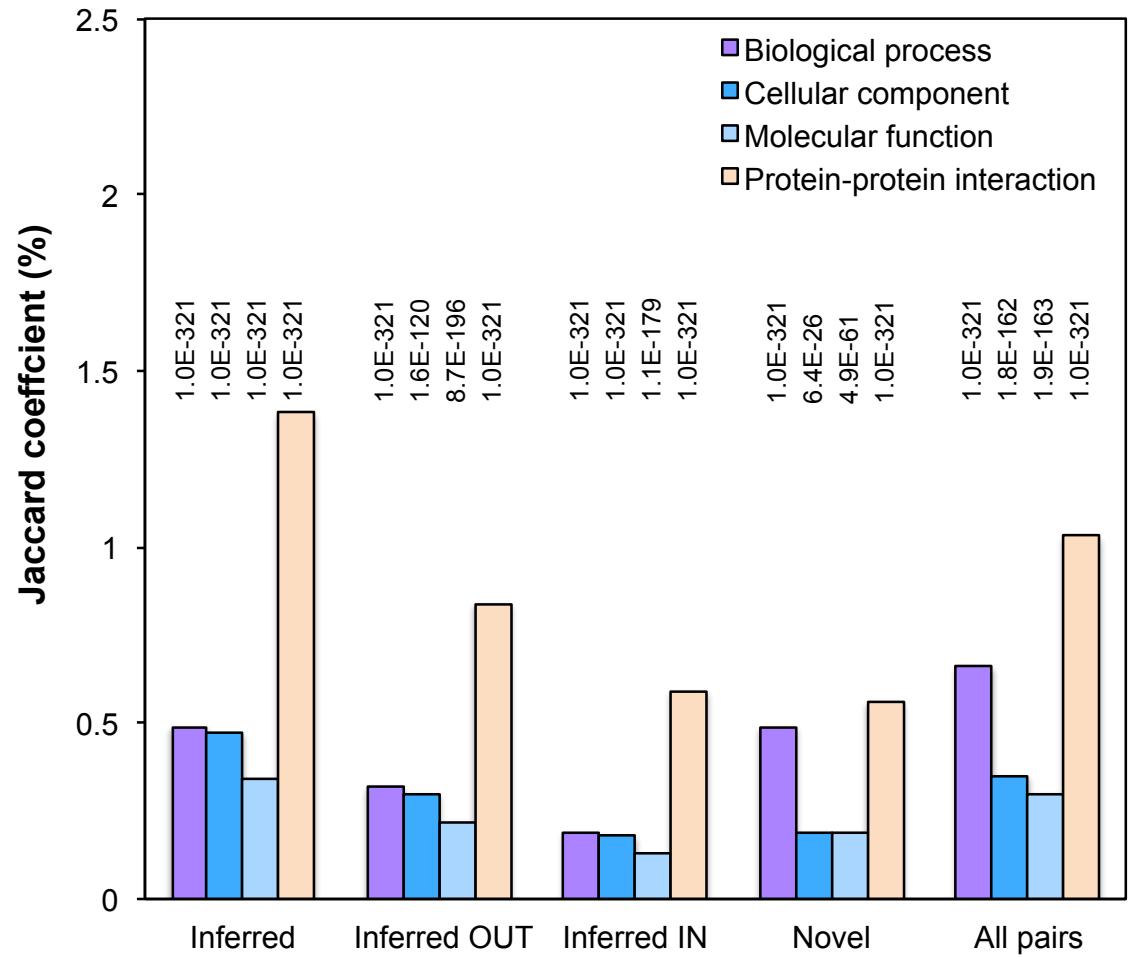
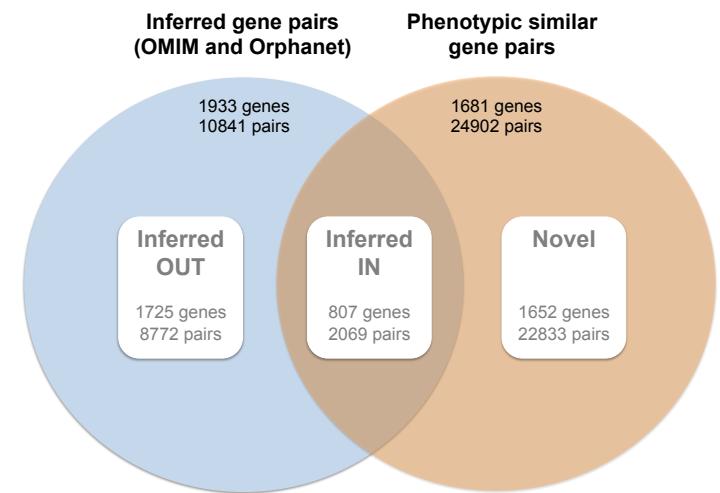
1. CONSTRUCTION OF INTERACTOMES AND SEMANTIC SIMILARITY BASED NETWORKS



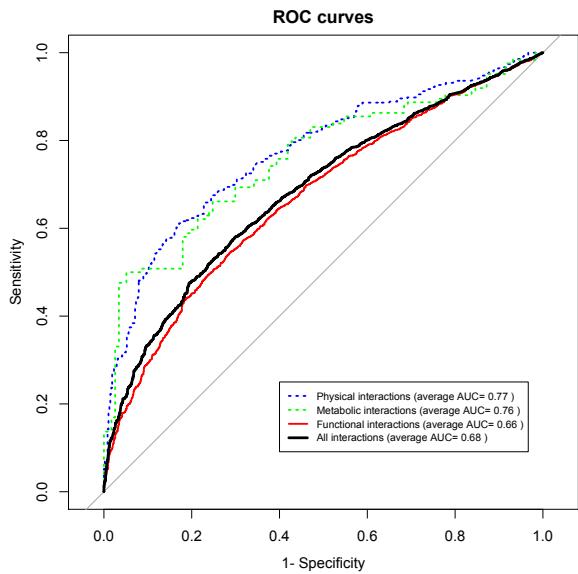
BIOMOLECULAR INTERACTOMES

PSGN

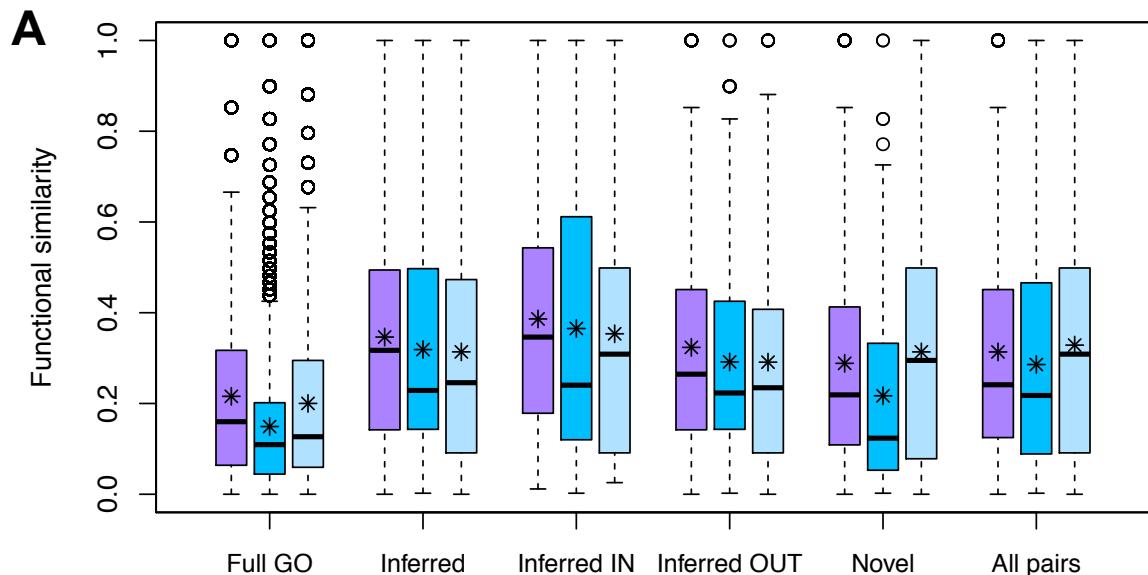
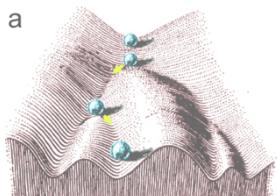
Network Comparisons Between Interactomes and PSGN Subsets



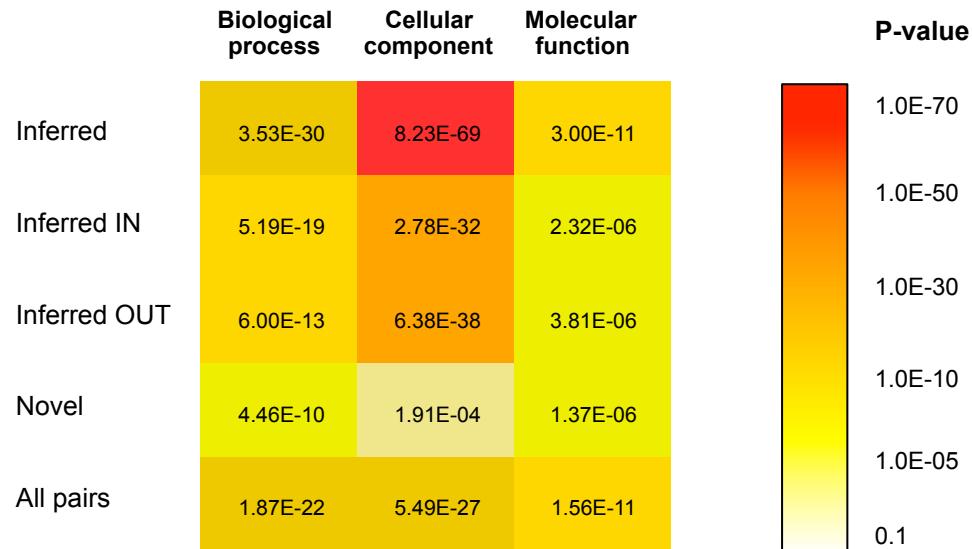
Intersection between Phenotypic and Functional interactions has higher similarity scores



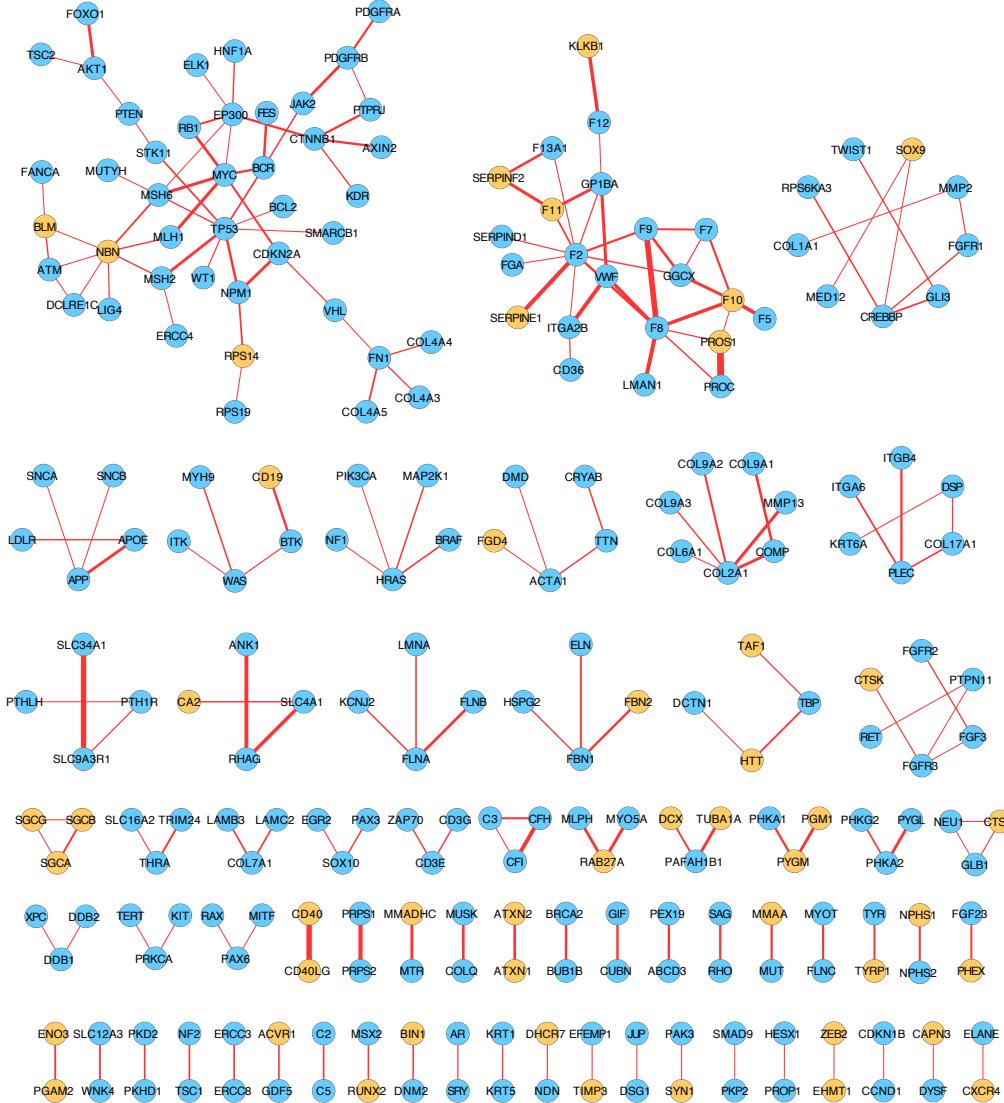
Natural (biological) networks evolved to be robust to genetic, environmental and stochastic perturbations. GOOD level of abstraction, less precision



B Heat map of Mann-Whitney P-values from the distribution comparisons



Novel phenotypic similarities ∩ protein interactions



Conclusion I

Migración de bases de datos descriptivas a gestionar esa información en red. **Network Medicine**

Advanced Search: OMIM, Clinical Synopses, OMIM Gene Map Sort by
Search History: View, Clear

#271980 ICD+
SUCCINIC SEMIALDEHYDE DEHYDROGENASE DEFICIENCY; SSADHD

Alternative titles/symbols:
SSADH DEFICIENCY
4-HYDROXYBUTYRIC ACIDURIA
GAMMA-HYDROXYBUTYRIC ACIDURIA
GAMMA-HYDROXYBUTYRIC ACIDURIA

Phenotype Gene Relationships

Location	Phenotype	Phenotype MIM number	Gene/Locus	Gene/Locus MIM number
6p22.3	Succinic semialdehyde dehydrogenase deficiency	271980	ALDHBA1	610003

Clinical Synopsis

TEXT

A number sign (#) is used with this entry because succinic semialdehyde dehydrogenase (SSADH) deficiency can be caused by hemizygous mutation in the ALDHBA1 gene (610003) on chromosome 6p22.

Description

Succinic semialdehyde dehydrogenase deficiency (SSADHD) is a rare autosomal recessive neurologic disorder in which an enzyme defect in the GABA degradation pathway causes a consecutive elevation of gamma-hydroxybutyric acid (GHB) and GABA. The clinical features include developmental delay, hypotonia, mental retardation, ataxia, seizures, hyperkinetic behavior, aggressiveness, and sleep disturbances (summary by Jakob et al., 2012).

Clinical Features

Jakob et al. (1993) reported a patient with neurologic abnormalities and urinary excretion of gamma-hydroxybutyric acid.

... 4-hydroxybutyric aciduria

Orpha number : ORPHA22	ICD-10 : E72.8
Synonym(s) : Succinic semialdehyde dehydrogenase deficiency	OMIM : 271980 [?]
Prevalence : <1 / 1 000 000	UMLS : -
Inheritance : Autosomal recessive	MeSH : -
Age of onset : Childhood	MedDRA : -
	SNOMED CT : -

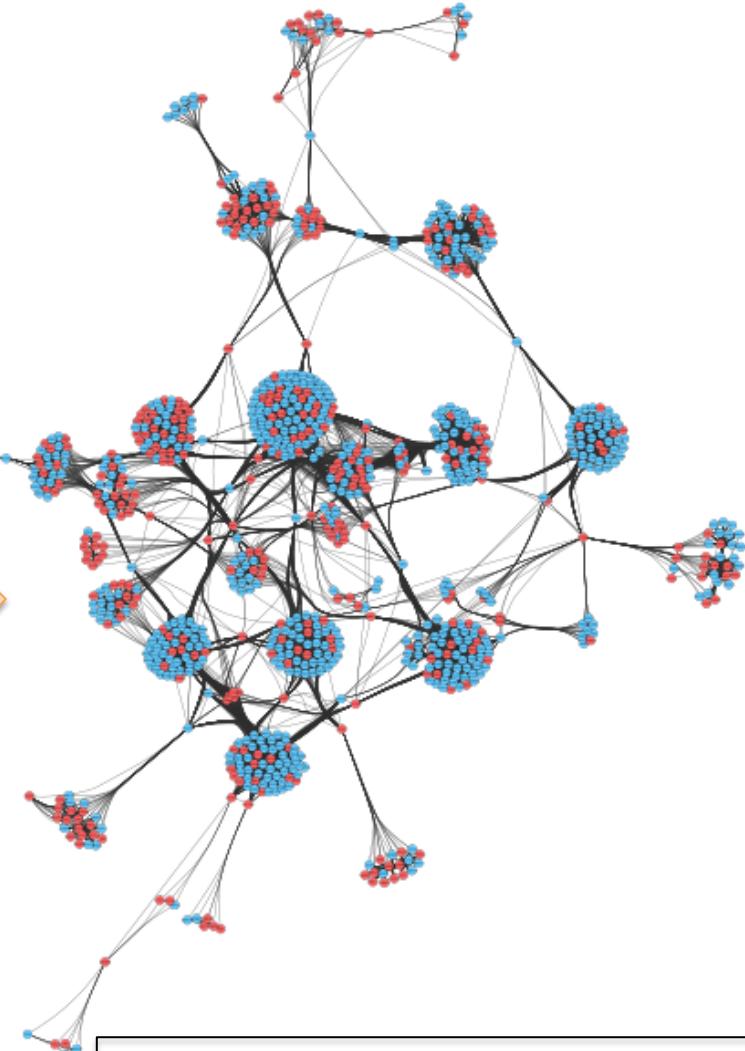
SUMMARY

The 4-hydroxybutyricaciduria deficiency is a metabolic disorder with a neurological presentation ranging from mild to severe. It is a rare disease with around 350 cases reported. The most frequent symptom is progressive retardation, often associated with speech delay, ataxia, and seizures. Treatment is autosomal recessive and mutations in the SSADH (Succinic Semialdehyde Dehydrogenase NAD(+)-Dependent) gene, located on chromosome 6p22, have been reported. The key biochemical feature is an accumulation of gamma-hydroxybutyrate in urine, plasma and cerebro-spinal fluid. There is no efficient treatment available.

Expert reviewer(s)

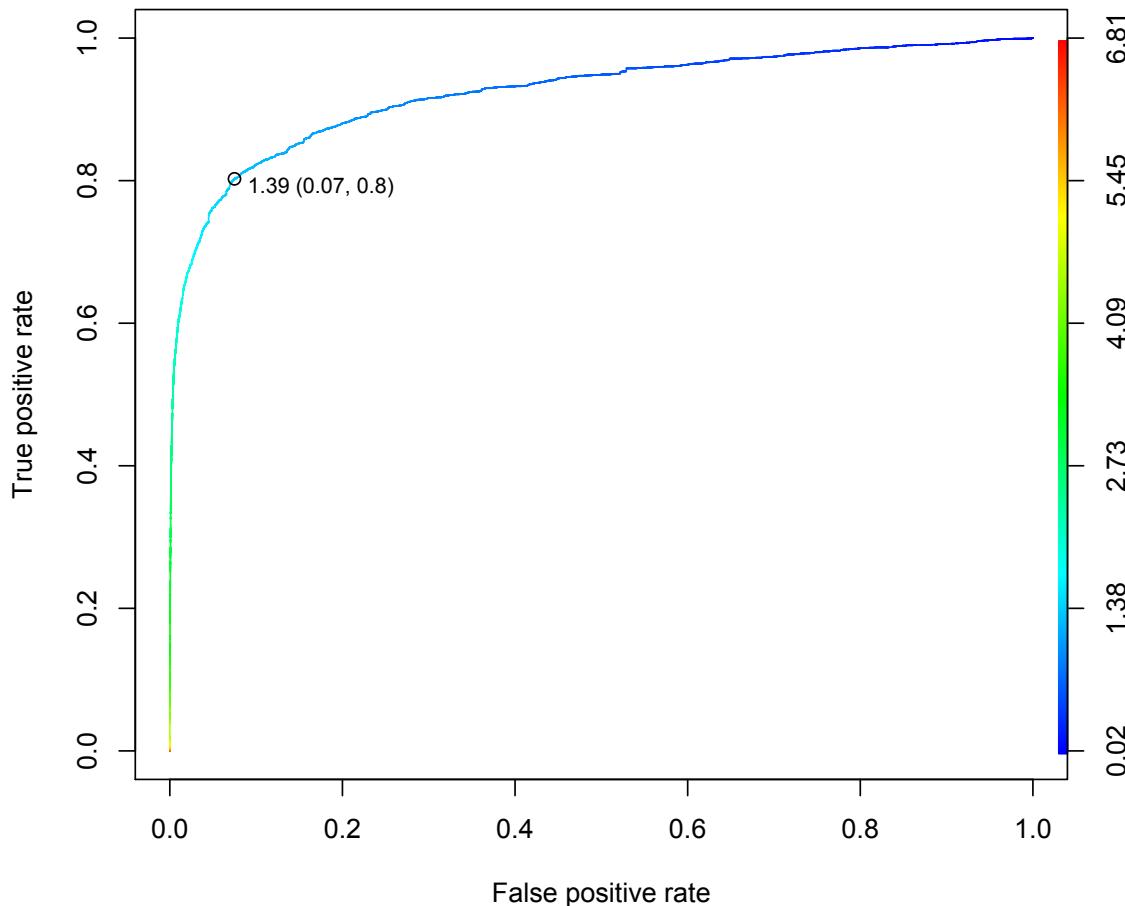
Pr Jaek JAEKEN

Last update: July 2006



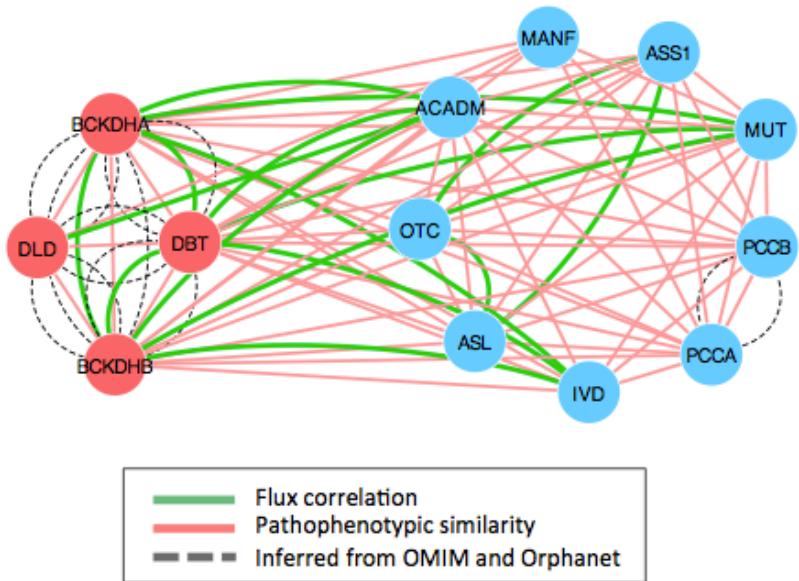
Conclusion II

ROC curve of similarity scores

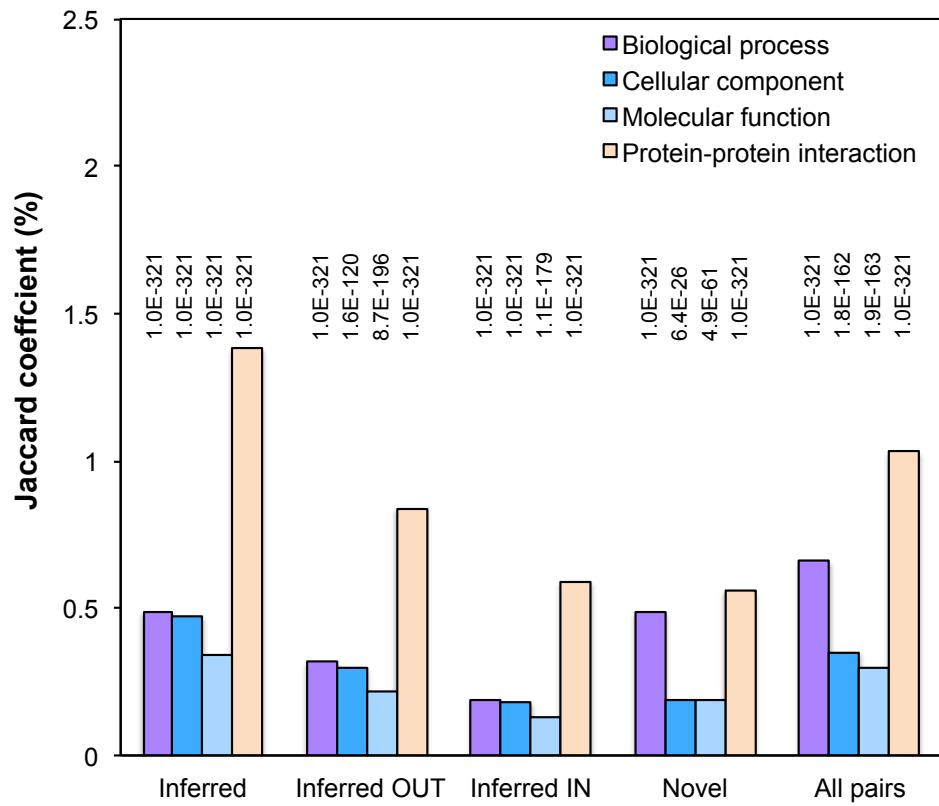


Similitud semántica es un modelo pragmático para estudiar las relaciones fenotípicas y funcionales

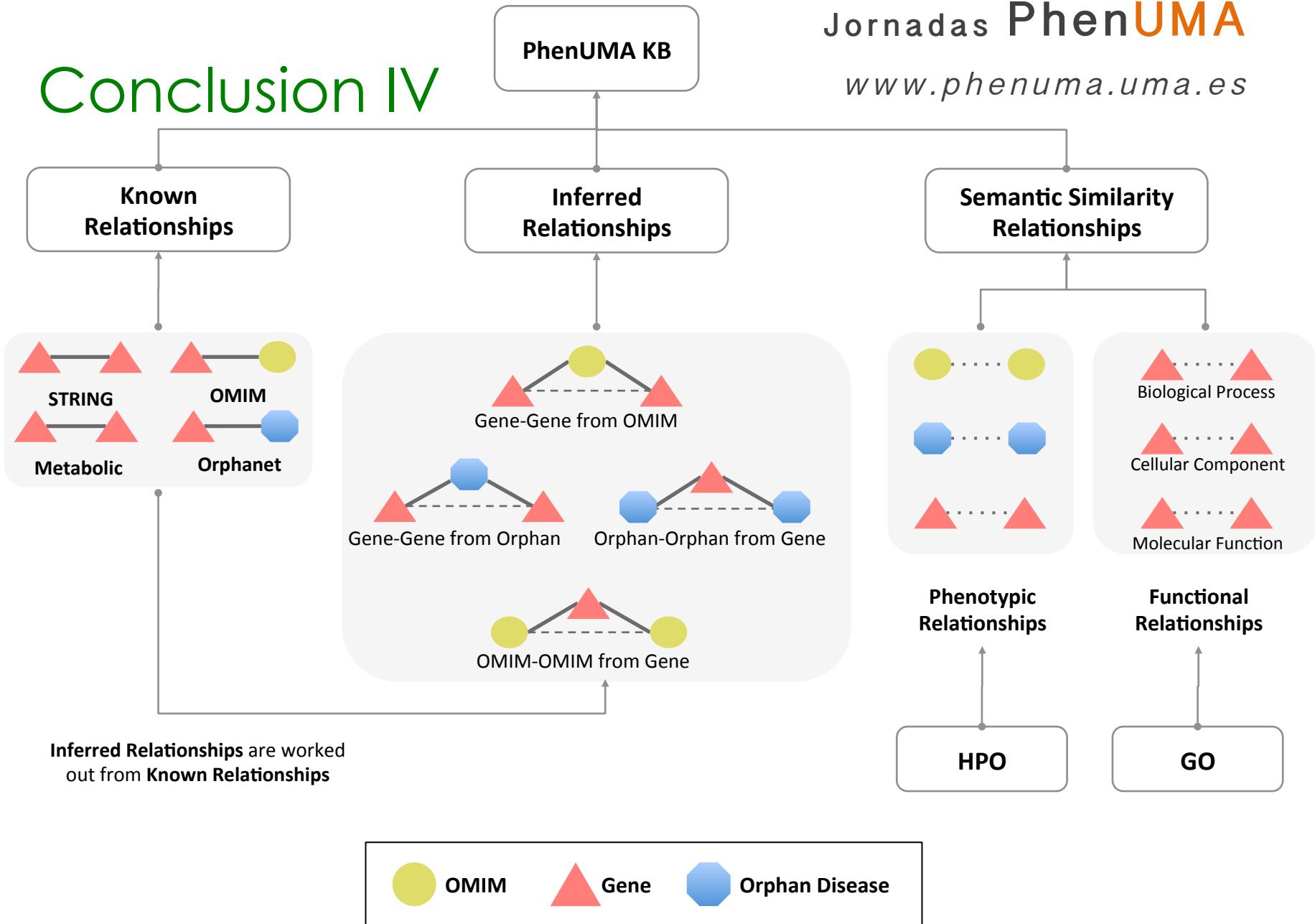
Conclusion III



COHERENCIA BIOLÓGICA



Conclusion IV



ProCel team

- METABOLIC SYSTEMS, Group leader. Dr. F. Sánchez-Jiménez.
- Thesis Director. Dr. Miguel Ángel Medina Torres.
- ProFunc: PROTEIN FUNCTION GROUP, PhD. A.A Moya and PhD. JA Ranea

¡¡Muchas Gracias y Bienvenidos!!



Kika



Miguel Angel



Rocio Rodríguez-López