

# Clinical Proteomics

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## Biomarker Discovery

- Disease-specific proteins
- Early detection markers
- Prognostic indicators

## Plasma Proteomics

- High dynamic range challenge
- Depletion strategies
- Abundant protein removal

## Tissue Proteomics

- FFPE sample analysis
- Spatial proteomics
- Disease pathology

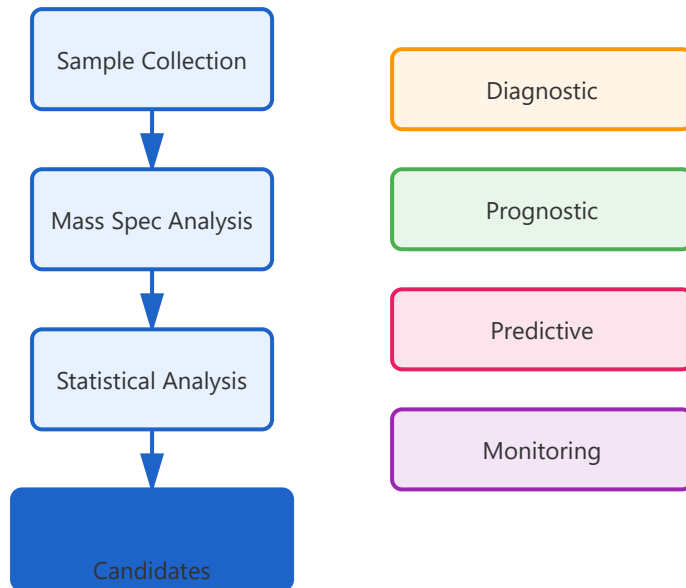
## FDA-Approved Tests

- MALDI-TOF bacterial ID
- Targeted protein panels
- Clinical validation requirements

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## Biomarker Discovery in Detail

Overview



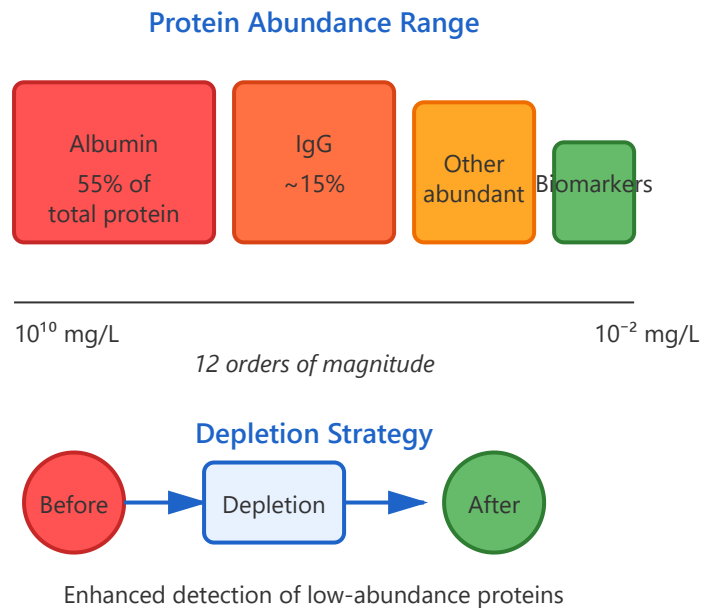
Biomarker discovery is the process of identifying measurable indicators of biological states or conditions. In clinical proteomics, this involves detecting disease-specific proteins that can serve as diagnostic, prognostic, or therapeutic markers.

### Key Applications

- **Disease-specific proteins:** Identification of proteins uniquely expressed or altered in disease states (e.g., PSA for prostate cancer, troponin for cardiac events)
- **Early detection markers:** Discovery of proteins that appear before clinical symptoms, enabling preventive intervention
- **Prognostic indicators:** Proteins that predict disease progression, patient survival, or treatment outcomes

### Workflow

- Comparative analysis between disease and control samples
- High-throughput mass spectrometry screening
- Bioinformatics analysis for candidate selection
- Validation in independent cohorts
- Clinical utility assessment



## Overview

Plasma proteomics presents unique challenges due to the extraordinary dynamic range of protein concentrations, spanning more than 10 orders of magnitude. A few highly abundant proteins (albumin, immunoglobulins) constitute over 90% of total protein mass, masking clinically relevant low-abundance biomarkers.

## Challenges

- **High dynamic range:** Albumin alone accounts for ~55% of plasma protein, while important biomarkers may exist at pg/mL concentrations
- **Sample complexity:** Over 10,000 different proteins estimated in human plasma
- **Detection sensitivity:** Most mass spectrometers cannot detect low-abundance proteins without enrichment

## Depletion Strategies

- **Immunoaffinity depletion:** Antibody-based removal of top 6-20 abundant proteins
- **Combinatorial peptide ligand libraries:** Equalizes protein concentrations
- **Fractionation techniques:** Size exclusion, ion exchange, hydrophobic interaction chromatography
- **Trade-off:** Risk of losing bound biomarkers during depletion

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## Tissue Proteomics in Detail

### Overview

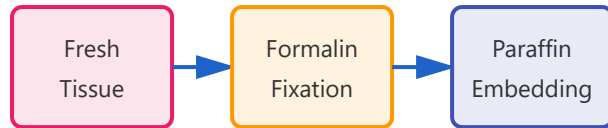
Tissue proteomics analyzes protein expression directly in tissue samples, providing crucial information about disease pathology, tumor microenvironment, and spatial protein distribution. This approach is particularly valuable for understanding disease mechanisms and identifying therapeutic targets.

### FFPE Sample Analysis

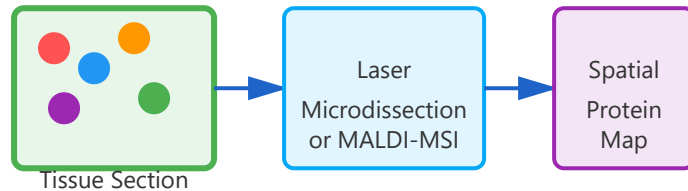
- **Clinical standard:** Formalin-Fixed Paraffin-Embedded (FFPE) tissues are routinely archived in hospitals
- **Advantages:** Long-term storage stability, extensive historical archives, linkage to clinical outcomes
- **Challenges:** Protein cross-linking by formalin requires antigen retrieval or specialized protocols
- **Modern solutions:** Heat-induced epitope retrieval (HIER), optimized digestion protocols

### Spatial Proteomics

### FFPE Sample Processing



### Spatial Proteomics Workflow



- **MALDI Mass Spectrometry Imaging (MSI):** Direct protein profiling on tissue sections with spatial resolution
- **Laser capture microdissection:** Isolate specific cell populations or regions for targeted analysis
- **Multiplex immunohistochemistry:** Simultaneous detection of multiple proteins with spatial context
- **Applications:** Tumor heterogeneity analysis, immune cell mapping, drug distribution studies

### Disease Pathology Applications

- Differentiation between disease subtypes based on protein signatures
- Identification of molecular mechanisms underlying pathology
- Discovery of therapeutic resistance mechanisms

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## FDA-Approved Tests in Detail

### Overview

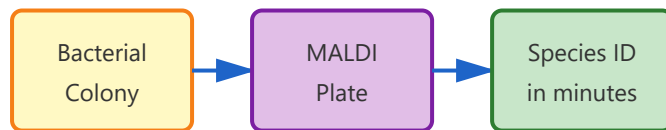
FDA-approved proteomic tests represent the translation of research discoveries into clinical practice. These tests must

meet rigorous regulatory standards for analytical performance, clinical validity, and clinical utility.

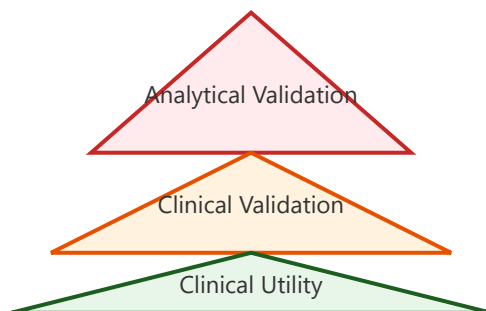
## MALDI-TOF Bacterial Identification

- **Technology:** Matrix-Assisted Laser Desorption/Ionization Time-of-Flight mass spectrometry
- **Principle:** Each bacterial species produces a unique protein/peptide mass spectrum "fingerprint"
- **Clinical impact:** Reduces identification time from days (culture-based) to minutes
- **FDA-cleared systems:** Bruker MALDI Biotyper, bioMérieux VITEK MS
- **Applications:** Routine microbiology, rapid sepsis diagnosis, antimicrobial stewardship

### MALDI-TOF Bacterial Identification



### Clinical Validation Requirements



## Targeted Protein Panels

- **Multi-marker tests:** Combine multiple proteins for enhanced diagnostic accuracy
- **Examples:** OVA1 (ovarian cancer), Oncotype DX (breast cancer prognosis)
- **Technology platforms:** Immunoassays, mass spectrometry, protein microarrays
- **Advantages:** Higher specificity and sensitivity than single markers

## Clinical Validation Requirements

- **Analytical validation:** Accuracy, precision, sensitivity, specificity, reproducibility
- **Clinical validation:** Association with clinical outcome in defined populations
- **Clinical utility:** Demonstration that test results improve patient outcomes
- **Regulatory pathway:** FDA 510(k) clearance, PMA approval, or LDT under CLIA
- **Post-market surveillance:** Ongoing monitoring of test performance

## Emerging Approved Applications

- Mass spectrometry-based newborn screening for metabolic disorders
- Proteomic classifiers for disease subtyping
- Therapeutic drug monitoring using LC-MS/MS