

Computational Exploration of Single-Cell RNA-seq Data in Systemic Lupus Erythematosus (SLE) PBMCs

Dataset and Study Context

Single-cell RNA sequencing (scRNA-seq) data were analyzed from peripheral blood mononuclear cells (PBMCs) derived from two SLE patients and one healthy control (GEO accession: **GSE162577**). The dataset was generated using the 10x Genomics platform and investigates immune heterogeneity in lupus.

Systemic Lupus Erythematosus (SLE) is a chronic autoimmune disease characterized by immune dysregulation, interferon signaling activation, aberrant T and B cell responses, and inflammatory myeloid expansion. Single-cell approaches enable identification of pathogenic immune subsets and rare inflammatory populations.

Project Overview:

The Seurat pipeline included:

1. Quality control filtering
2. Log-normalization
3. Identification of highly variable genes
4. PCA and dimensionality reduction
5. Graph-based clustering
6. Marker gene identification
7. Differential expression (SLE vs Control)

Quality Control Thresholds and Justification

Selected thresholds:

- `nFeature_RNA` > 200
- `nFeature_RNA` < 6000
- `percent.mt` < 15%

Rationale

Lower bound (200 genes):

Cells with fewer than 200 detected genes likely represent empty droplets or low-complexity captures.

Upper bound (6000 genes):

Cells with excessively high gene counts likely represent doublets or multiplets.

Mitochondrial percentage (<15%):

Elevated mitochondrial RNA content reflects stressed or apoptotic cells. SLE PBMCs often show increased stress signatures; therefore, a moderate cutoff of 15% preserved biological signal while removing dying cells.

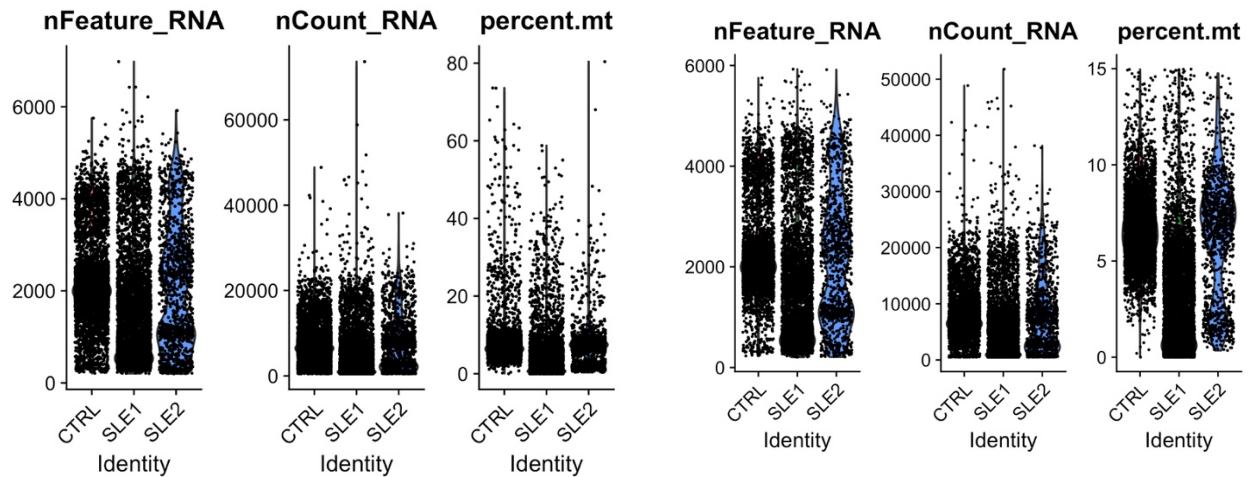


Figure 1: QC Violin Plots (Before and After Filtering)

Distribution of nFeature_RNA, nCount_RNA, and percent.mt across CTRL, SLE1, and SLE2 samples before and after filtering. Post-filtering plots demonstrate removal of high-mitochondrial and low-complexity outliers.

Filtering substantially reduced extreme mitochondrial values while preserving the majority of biologically relevant cells.

Cluster Stability and Dimensionality Selection

PCA Diagnostics: The elbow plot (Figure 3) demonstrated a clear inflection around PCs 8–10. Variance explained plateaued beyond PC 10.

Clustering was therefore performed using:

- PCs 1–12
- Resolution = 0.5

This parameter choice balanced:

- Preservation of rare populations
- Avoidance of over-fragmentation

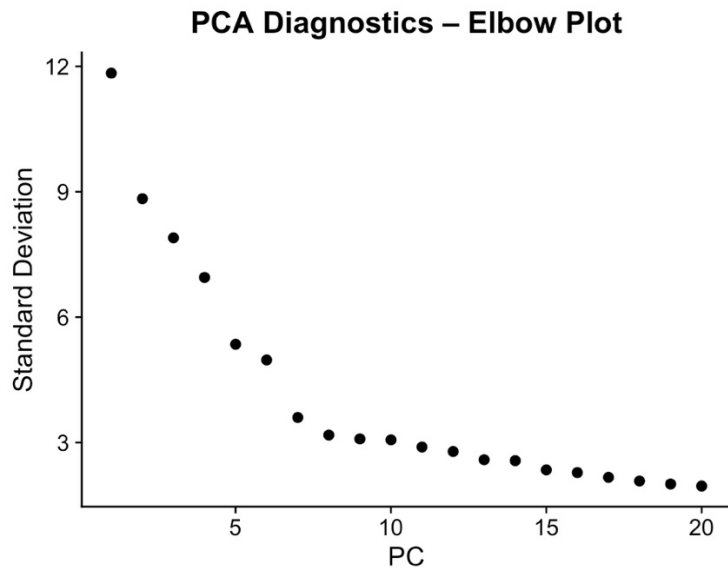


Figure 3: PCA Elbow Plot: Standard deviation of principal components. The elbow around PC 8–10 supports use of the first 12 PCs.

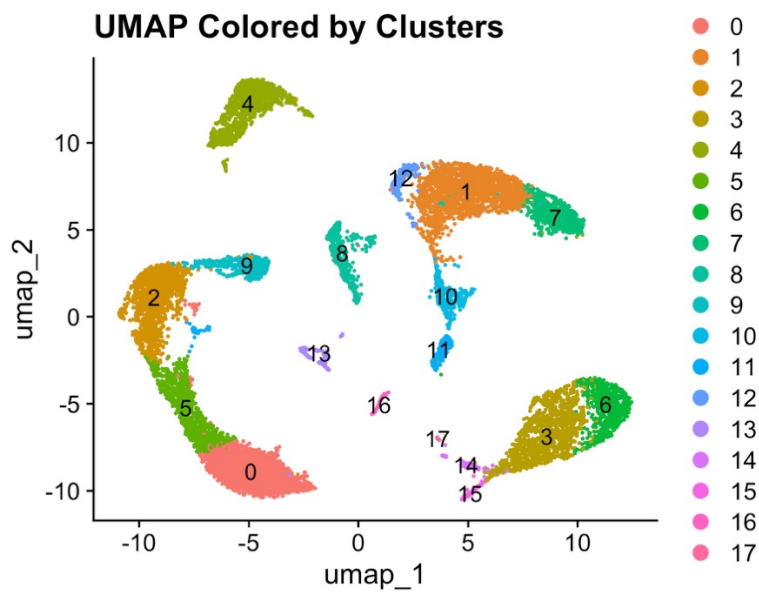


Figure 4: UMAP Visualization: UMAP embedding of PBMC cells colored by cluster identity. Eighteen transcriptionally distinct clusters were identified.

Clusters show clear separation with minimal overlap, indicating stable structure under chosen parameters.

Cell Type Annotation Using Canonical Markers

Cluster annotation was performed using top markers identified via FindAllMarkers.

Major Identified Cell Types:

Marker Genes	Assigned Cell Type
CD3D, CD3E, CD2, TRAC	T cells
NCR1, KLRD1, GZMB	NK cells
S100A8, S100A9, LST1	Classical monocytes
MS4A1, CD79A	B cells

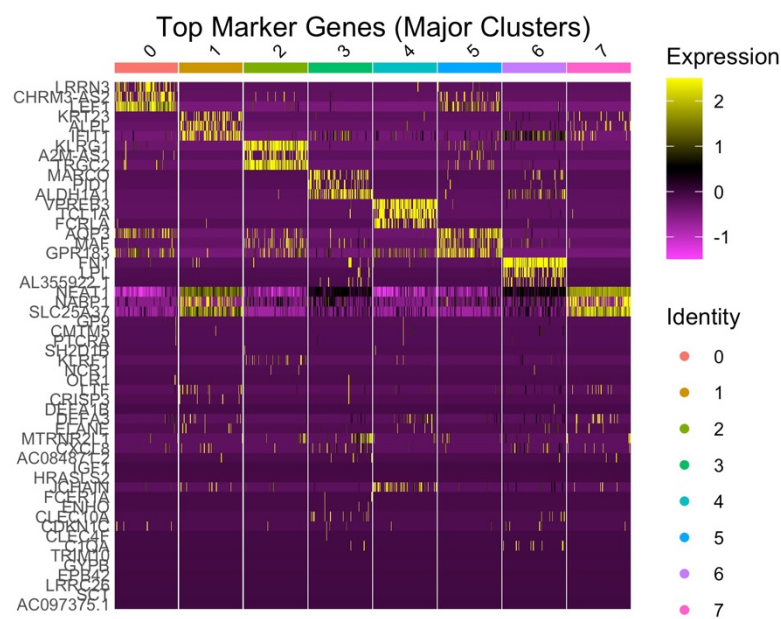


Figure 5A: Marker Heatmap- Scaled expression of top marker genes across major clusters. Distinct expression patterns confirm cluster specificity.

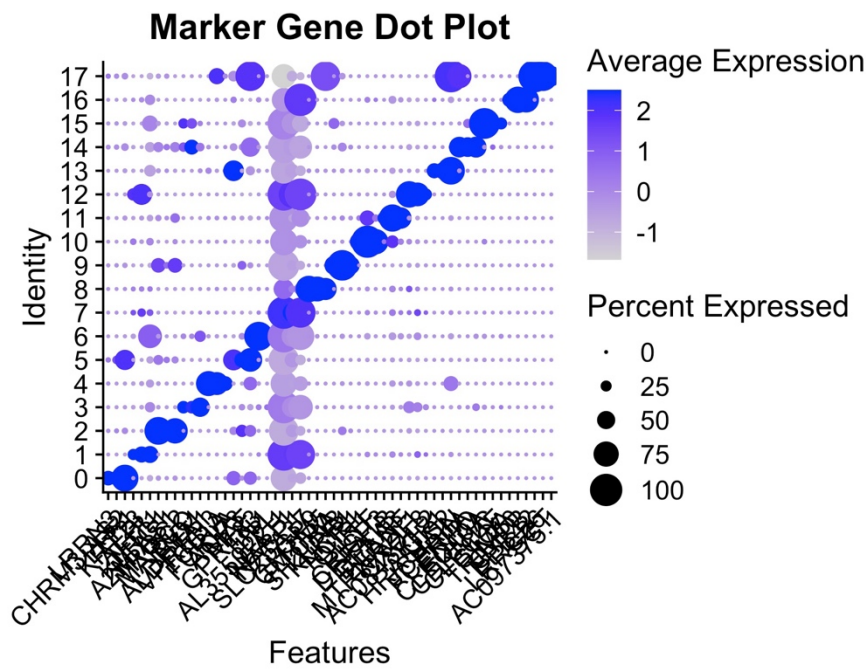


Figure 5B: Dot Plot- Dot size indicates percent expression; color indicates average expression. Canonical lineage markers show restricted distribution across clusters.

Biological Interpretation

SLE PBMCs show:

Expanded inflammatory monocyte populations (S100A8/A9 high)

Activated T cell subsets

Distinct NK populations

Small rare clusters potentially representing interferon-high states

Differential Expression: SLE vs Control

Differential expression analysis compared all SLE cells to control cells.

Parameters:

- $\log_{2}FC_{\text{threshold}} = 0.25$
- $\min.pct = 0.1$

Figure 6: Volcano Plot

Legend: Differential expression between SLE and CTRL PBMCs. Each dot represents one gene; vertical dashed lines indicate $|\log_{2}FC| = 0.5$.

Upregulated in SLE:

- **S100A8** (strong positive log2FC)
 - Marker of inflammatory monocytes
 - Associated with neutrophil-like inflammatory programs
 - Known biomarker in lupus nephritis and systemic inflammation

Downregulated in SLE:

- **CD3D, CD3E, CD2**
 - Core T cell receptor complex components
 - Suggest altered T cell signaling or exhaustion

Interpretation in Lupus Context

SLE is characterized by:

- Myeloid activation
- Chronic interferon signaling
- Adaptive immune dysregulation

Upregulation of S100A8 reflects inflammatory monocyte expansion, consistent with published lupus immunopathology. Downregulation of TCR-related genes suggests altered T cell functional states.

The widespread distribution of significant genes in the volcano plot indicates systemic immune remodeling in SLE PBMCs.

Study-Linked Insight

Rare Cluster Identification

Clusters 16 and 17 contain small cell numbers (<100 cells).

These may represent:

- Interferon-high immune subsets
- Activated transitional states
- Rare inflammatory populations

SLE pathogenesis is strongly driven by type I interferon signaling. Rare interferon-stimulated gene (ISG)-high subsets have been reported in lupus PBMC studies. These minor clusters may correspond to such populations.

Single-cell analysis uniquely enables detection of these rare but potentially pathogenic subsets.