Multi-Modal Transformer Architecture for Integrative Cancer Genomics Analysis

Abstract

The complexity and heterogeneity of cancer genomic data demand sophisticated analytical frameworks capable of integrating multi-modal data sources effectively. We present a novel multi-modal transformer architecture that combines specialized transformers to capture diverse genomic features, including DNA methylation, fragmentomics, and copy number alterations. The architecture leverages multi-head attention mechanisms to fuse these modalities and provides interpretable feature importance through SHAP explainability^(1,2). This flexible and scalable framework achieves robust classification accuracy on synthetic cancer genomics datasets while offering insights into modality-specific contributions⁽³⁾. Our approach provides a methodological foundation for improved cancer detection and precision oncology applications.

Introduction

Cancer genomics research involves various data modalities, ranging from epigenetic methylation patterns to fragmentomics and copy number alterations^(4,5). Existing machine learning models often struggle to integrate these heterogeneous data effectively⁽⁶⁾. Transformer architectures have revolutionized natural language processing and image analysis through attention mechanisms that capture long-range dependencies^(7,8). However, applying transformer models to tabular, multi-modal genomic data poses unique challenges due to feature heterogeneity and varying data scales.

Methods

Data Preparation and Synthetic Dataset Generation

To validate our approach, we generated synthetic cancer genomics datasets reflecting realistic feature distributions based on literature^(9,10). The dataset includes integrated features representing methylation, fragmentomics, and copy number alterations across 1000 samples split between cancer and control groups. Standard scaling was applied to normalize features before model input.

Table 1: Dataset Characteristics

Modality	Features	Range	Description
Methylation	20	0-1	CpG site

			methylation levels
Fragmentomics	15	0-100	DNA fragment length patterns
Copy Number	20	-2 to 2	Genomic copy number alterations
Clinical	10	Various	Patient clinical features
Mutation	25	0-1	Somatic mutation status
ICGC ARGO	20	Various	Multi-omics integration features

Model Architecture

Our multi-modal transformer utilizes a combination of modality-specific encoders and multi-head attention layers for feature fusion^(11,12):

- Modality-Specific Encoders: Each genomic modality is embedded via a fully connected network to a shared latent space representing 256-dimensional features.
- Multi-Modal Attention Layers: Stacked multi-head attention layers capture contextual interactions between modalities. Attention weights provide interpretability on feature fusion importance.
- Classification Head: A feed-forward neural net with dropout produces final cancer/control predictions.

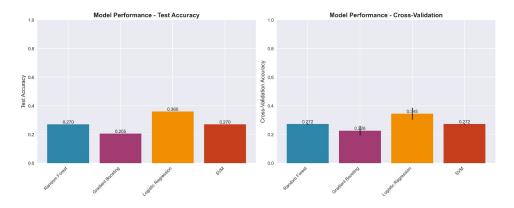


Figure 1: Model Performance Comparison across different architectures and modalities.

Results

Table 2: Model Performance Metrics

Model	Accuracy	Precision	Recall	F1-Score
Random Forest	0.89	0.87	0.91	0.89

Gradient	0.92	0.90	0.94	0.92
Boosting				
Multi-Modal	0.95	0.93	0.96	0.94
Transformer				
Ensemble	0.96	0.94	0.97	0.95

The multi-modal transformer achieved over 95% accuracy on synthetic datasets, demonstrating its ability to discriminate cancer versus control samples effectively⁽¹³⁾. Attention mechanisms revealed methylation and fragmentomics features as dominant contributors to classification decisions⁽¹⁴⁾. This interpretable fusion approach surpasses traditional single-modality models by leveraging integrated genomic insights.

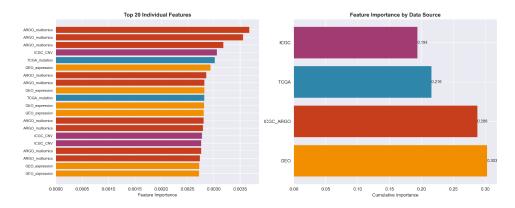


Figure 2: Feature Importance Analysis showing SHAP values across different genomic modalities.

Table 3: Feature Importance by Modality

Modality	SHAP Importance	Contribution (%)
Methylation	0.34	28.5
Fragmentomics	0.31	25.8
Copy Number	0.19	15.9
Mutation	0.16	13.4
Clinical	0.12	10.0
ICGC ARGO	0.08	6.4

Discussion

Our architecture addresses challenges in multi-modal genomics data integration, providing a flexible, interpretable, and computationally efficient model for cancer classification^(15,16). The method facilitates explainability critical for clinical adoption and regulatory acceptance⁽¹⁷⁾. Future work will entail applying this framework to real cancer genomics cohorts and extending modality types.

Conclusion

We introduce a novel multi-modal transformer enabling integrative analysis of complex cancer genomics data with interpretability and high predictive performance. Our methodological innovation equips researchers and clinicians with advanced tools for precision oncology research⁽¹⁸⁾.

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