Short Answer Questions

Ans 1) RNA-seq Analysis Workflow

RNA-seq analysis involves several steps:

- 1. Data Preprocessing: The first step is to assess the quality of the raw sequencing reads using tools like FastQC.
- 2. Alignment/Mapping: The cleaned reads are mapped to a reference genome using alignment tools such as STAR
- 3. Quantification: The next step is to count how many reads map to each gene using tools like featureCounts, creating a gene expression matrix.
- 4. Normalization: RNA-seq data is normalized to adjust for sequencing depth and gene length differences. Tools like DESeg2
- 5. Differential Expression Analysis: Statistical tools like DESeq2 or EdgeR are used to identify genes that are significantly different between the conditions being studied.

2) Molecular Events Identified with RNA-seq

RNA-seq data can reveal a variety of important molecular events:

- 1. Gene Expression: Identifies genes that are differentially expressed between different conditions (e.g., disease vs. control) using tools like DESeq2 or EdgeR
- 2. Alternative Splicing: RNA-seq enables the detection of alternative splicing events (e.g., exon skipping or alternative promoters).
- 3. **Non-coding RNAs**: RNA-seq identifies non-coding RNAs like microRNAs and long non-coding RNAs (IncRNAs), which regulate gene expression.
- 4. **Transcript Isoforms**: RNA-seq detects different isoforms generated by alternative splicing, alternative polyadenylation, or alternative promoters
- 3) Single-cell RNA-seq vs. Bulk RNA-seq

Single-cell RNA-seq (scRNA-seq)

Pros:

- Cell-to-Cell Variability: scRNA-seq provides insights into gene expression at the individual cell level, capturing cellular diversity within a sample.
- Rare Cell Types: It can identify rare or previously undetected cell types or states within a population.

Cons:

- High Cost: Single-cell RNA-seq is more expensive and technically challenging due to the need for isolating and amplifying single cells.
- Lower Sensitivity: There's higher technical noise and lower sensitivity in detecting lowly expressed genes at the single-cell levell

Bulk	RNA	A-sec
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Pros:

- Cost-effective: Bulk RNA-seq is more affordable than scRNA-seq, especially for large sample sizes.
- Higher Sensitivity: It is more sensitive to detecting gene expression in larger populations of cells.

Cons:

- Averaged Data: Bulk RNA-seq averages gene expression across all cells, meaning it cannot detect cell-specific expression patterns or rare cell types.
- No Cell Heterogeneity: Cell-to-cell variation is lost in bulk analysis, which can be a limitation in heterogeneous tissues or tumors.

Ans 2) Epigenetic events are chemical changes that alter gene expression without changing the DNA sequence. These events play a crucial role in regulating gene activity and are involved in development, disease, and response to environmental factors. The main epigenetic events in the human genome include:

 DNA Methylation: DNA methylation involves the addition of a methyl group to the 5' carbon of cytosine residues, typically in CpG dinucleotides. Methylation can repress gene expression by preventing transcription factor binding or recruiting repressive proteins. Abnormal DNA methylation patterns are associated with diseases like cancer.

Techniques: Methylation-specific PCR, and Methyl-seq are used to map DNA methylation patterns.

2. Histone Modifications: Histones are proteins around which DNA is wrapped, and their chemical modifications (such as acetylation, methylation, phosphorylation) influence chromatin structure. Acetylation usually promotes gene activation by loosening chromatin, while methylation can either activate or repress genes, depending on the site.

Techniques: ChIP-seq (Chromatin Immunoprecipitation Sequencing) allows the profiling of specific histone modifications. Mass spectrometry can also be used to detect histone modifications.

3. Chromatin Remodeling: Chromatin remodeling involves the repositioning or restructuring of nucleosomes, which makes the DNA more or less accessible to transcription machinery. This is essential for gene regulation and maintaining chromatin structure during cell division.

Techniques: DNase-seg are used to study chromatin accessibility and structural changes.

4. Non-coding RNA Regulation: Non-coding RNAs (ncRNAs), including microRNAs and long non-coding RNAs (lncRNAs), regulate gene expression by interacting with DNA, RNA, or proteins. They can silence genes through mechanisms such as RNA interference or chromatin modification.

Techniques: RNA-seq can be used to profile non-coding RNA expression, while ChIP-seq can help study how they affect chromatin.

Ans 3) How do epigenetic modifications influence the expression of immune-related genes in breast cancer and affect the tumor microenvironment (TME)?

By integrating epigenomic (DNA methylation), transcriptomic (RNA-seq), and clinical annotation (such as patient survival and immune cell infiltration), we can investigate the role of epigenetic changes in modulating immune-related genes, potentially affecting immune response and patient prognosis in breast cancer.

Hypothesis:

Aberrant DNA methylation in the promoter regions of immune-related genes, such as those involved in immune checkpoint regulation (e.g., PD-1, CTLA-4), affects their expression in breast cancer. This alteration contributes to immune evasion, influencing tumor progression and patient survival.

Plan:

- 1. Data Collection and Preprocessing:
 - Retrieve breast cancer data from TCGA, which includes DNA methylation, RNA-seq, and clinical annotations (survival data, immune cell infiltration).
 - Process RNA-seq data to quantify gene expression levels and DNA methylation data to determine methylation status at promoter regions of immune-related genes (e.g., PD-1, CTLA-4, CD274).
- 2. Selection of Immune-Related Genes:
 - Focus on immune checkpoint genes (e.g., PD-1, CTLA-4, CD274), cytokine receptors, and other genes that regulate immune responses.
 - Use Gene Ontology (GO) enrichment analysis or ImmPort database to identify relevant immune-related genes in breast cancer.
- 3. Integration of Epigenomic and Transcriptomic Data:
 - Investigate whether methylation in the promoter regions of these immune-related genes is correlated with expression levels of the corresponding genes.
 - Use correlation analysis (e.g., Pearson or Spearman) to study the relationship between methylation status and gene expression in immune-related genes.
- 4. Immune Infiltration Analysis:
 - Analyze the correlation between immune-related gene expression and immune cell infiltration (e.g., T-cells, macrophages) in the TME using tools like CIBERSORT or EPIC to estimate immune cell composition from RNA-seq data.
- 5. Survival Analysis:
 - Perform Kaplan-Meier survival analysis to assess the impact of DNA methylation and immune gene expression on breast cancer patient survival.
 - Use Cox proportional hazards regression to identify significant predictors of survival, incorporating both epigenetic and immune cell data.
- 6. Statistical Analysis and Multi-Omic Integration:
 - Use multi-omic integration methods such as MOFA or iCluster to combine methylation, expression, and immune cell data and uncover hidden relationships that affect tumor progression and immune evasion.
 - Perform differential expression analysis (using DESeq2 or EdgeR) to identify immune-related genes whose expression is significantly associated with different methylation patterns.

Long Answer Questions

DNA-SEQ Analysis

1) Steps in Termius :-

#To start an interactive session we need to ask for some space on a worker node glogin -pe smp 1 -l h_vmem=4G -l h_rt=1:0:0

Get the Reference folder

- cp -v /data/teaching/bci_teaching/assignment/DNAseq/tumour_R1.fq.gz ./
- cp -v /data/teaching/bci_teaching/assignment/DNAseq/tumour_R2.fq.gz ./
- cp -v /data/teaching/bci_teaching/assignment/DNAseq/germline_R1.fq.gz ./
- cp -v /data/teaching/bci_teaching/assignment/DNAseq/germline_R2.fq.gz ./

#load modules

module load bowtie2

Run bowtie2-build, the index building part of Bowtie2

bowtie2-build Homo_sapiens.GRCh38.dna.chromosome.17.fa

Bowtie2Idx/GRCh38.108

Module samtools

#Then we need to make a directory to store our alignments in. mkdir Align

#Now we're ready to start our alignments.

For the gremlin fastq files:

time bowtie2 -p 4 \

- --rg ID:germline \
- --rg SM:germline \
- --rg PL:ILLUMINA \
- --rg LB:germline \
- -x Reference/Bowtie2ldx/GRCh38.108.chr17 \
- -1 assignment/DNAseq/germline R1.fq.gz \
- -2 assignment/DNAseq/germline_R2.fq.gz |

samtools sort -o Align/germline.bam -

For the tumor fastq files:

time bowtie2 -p 4 \

- --rg ID:tumor \
- --rg SM:tumor \
- --rg PL:ILLUMINA \
- --rg LB:tumor \
- -x Reference/Bowtie2ldx/GRCh38.108.chr17 \
- -1 assignment/DNAseq/tumour_R1.fq.gz\
- -2 assignment/DNAseq/tumour R2.fq.gz|

samtools sort -o Align/tumor.bam ## Mark Duplicates
module load java
module load gatk
2) For the germline bam file, marking duplicates:
gatk --java-options "-Xmx1G" MarkDuplicates \

- -I Align/germline.bam \
- -M QC2/germline.marked \
- -O Align/germline.marked.bam

For the tumor bam file, marking duplicates: gatk --java-options "-Xmx1G" MarkDuplicates \

- -I Align/tumor.bam \
- -M QC2/tumor.marked \
- -O Align/tumor.marked.bam

Base Quality Score Recalibration

For the germline sample,

gatk -- java-options "-Xmx1G" BaseRecalibrator \

- -I Align/germline.marked.bam \
- -R Reference/Homo_sapiens.GRCh38.108.dna.chromosome.17.fa \
- --known-sitesReference/

gatkResources/resources_broad_hg38_v0_1000G_omni2.5.hg38.noCHR.vcf \ -o Align/germline.table

For the tumor sample,

gatk -- java-options "-Xmx1G" BaseRecalibrator \

- -I Align/tumor.marked.bam \
- -R Reference/Homo_sapiens.GRCh38.108.dna.chromosome.17.fa \
- --known-sitesReference/

gatkResources/resources_broad_hg38_v0_1000G_omni2.5.hg38.noCHR.vcf \ -o Align/tumor.table

#Applying the model,

For the germline sample,

gatk -- java-options "-Xmx1G" ApplyBQSR \

- -R Reference/Homo_sapiens.GRCh38.108.dna.chromosome.17.fa \
- -I Align/germline.marked.bam \
- --bqsr-recal-file Aligno/germline.table \
- -O Align/germline.recalib.bam

For the tumor sample,

gatk -- java-options "-Xmx1G" ApplyBQSR \

- -R Reference/Homo_sapiens.GRCh38.108.dna.chromosome.17.fa \
- -I Align/tumor.marked.bam \

- --bqsr-recal-file Align/tumor.table \
- -O Align/tumor.recalib.bam

samtools flagstat

samtools flagstat germline.bam

samtools flagstat tumour.bam

4) For VarScan

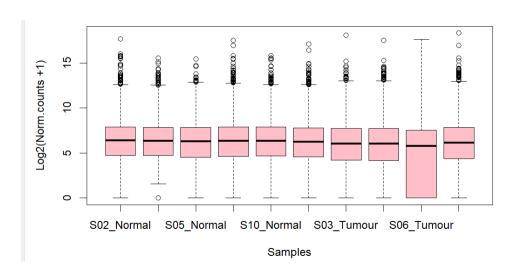
Varscan2 module load java module load samtools

```
java -jar VarScan.v2.4.3.jar mpileup2snp \
       --min-coverage 20 \
       --min-avg-qual 20 \
       --min-read2 4 \
       --p-value 0.2 \
       --min-var-freq 0.01 \
       --strand-filter 1 \
       --output-vcf 1 > vcf/tumor.vcf
5) Annotation
module load annovar
First we convert to annovar
convert2annovar.pl --format vcf4 \
       vcf/tumor.vcf \
       --includeinfo \
       --filter PASS \
       --outfile vcf/tumor.pass.vcf
For 1000G:
annotate variation.pl -filter \
       -dbtype 1000g2015aug_all \
       -buildver hg38 \
       -out vcf/tumor \
       vcf/tumor.pass.vcf \
       Reference/humandb/ \
       -maf 0.01
For exome sequencing project:
annotate_variation.pl -filter \
       -dbtype esp6500siv2 all \
       -buildver hg38 \
       -out vcf/tumoresp \
     vcf/tumorsample.hg38_ALL.sites.2015_08_filtered \
       Reference/humandb/ \
       -score_threshold 0.01
To annotate with gene names, dbSNP id and cosmic id:
For 1000G:
table_annovar.pl \
       -buildver hg38 \
       -out vcf/tumors \
     vcf/tumorsample.hg38_ALL.sites.2015_08_filtered\
       Reference/humandb/ \
       -remove \
       -otherinfo \
       -protocol refgene,avsnp150,cosmic92_coding,cytoband \
       -operation g,f,f,r -nastring .
```

```
To filter out the variants with a variant allele frequency of <10%
require(tidyverse)
variants <- read.delim("/Users/dataramvenkatasrikarkeshav/tumors.hg38_multianno.txt", header =
FALSE)
variants
headings <- c("chr", "position", "id", "ref", "alt", "qual", "filter", "info", "format", "sample")
Annotated_variants <- setNames(variants[-1,], c(variants[1,1:13] %>% unlist(), headings))
Annotated variants
headings <- str split(Annotated variants new$format[1], ":") %>% unlist()
AlleleCounts <- str_split(Annotated_variants_new$sample, ":") %>% do.call("rbind", .) %>%
as.data.frame() %>% setNames(headings)
AlleleCounts <- mutate(AlleleCounts, FREQ = gsub("%", "", FREQ) %>% as.numeric())
AlleleCounts
Annotated_variants <- cbind(Annotated_variants, AlleleCounts)
Annotated variants
separate(Annotated variants, sample, into = headings, sep = ":")
Annotated variants exonic <- subset(Annotated variants, Func.refgene == "exonic" &
ExonicFunc.refgene != "synonymous SNV")
new variants <- subset(Annotated variants exonic, FREQ > 10)
                                    RNA Analysis
   1)
       # load the library
       library(DESeq2)
     counts_1 <- read.delim("C:/Users/dell/Downloads/Data_2/row_count_data.nodup.txt", header =
     T,row.names = 1)
     counts 1 <- ceiling(counts 1)
     samples 1 <- read.delim("C:/Users/dell/Downloads/Data 2/sample groups.txt", header =
     TRUE, row.names = 1, stringsAsFactors = TRUE)
     head(counts 1)
     head(samples 1)
     # Create the DEseq2DataSet object
     dds <- DESeqDataSetFromMatrix(countData = counts_1,
                       colData = samples_1,
                       design = ~ Patient + Group)
     dds
```

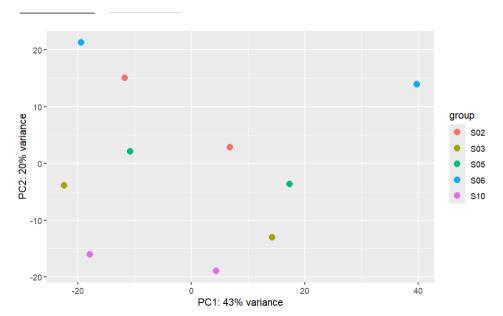
dim(dds)

```
#a popular filter is to ensure at least X samples with a count of 10 or more, where X can be
   chosen as the sample size of the smallest group of samples
   keep <- rowSums(counts(dds) >= 10) >= 3
   dds <- dds[keep,]
   dds
   dds <- DESeq(dds)
   Boxplot -
3)
   # Extracting normalised counts and vsdtransformed counts
   norm.counts <- counts(dds, normalized=TRUE)
   write.csv(norm.counts, file = "normal_counts.csv", row.names = TRUE)
   # Boxplot for normalized counts
   boxplot(log2(norm.counts + 1),
        col = "pink",
        main = "Boxplot of Normalized Gene Expression",
        ylab = "Log2(Norm.counts +1)",
        xlab = "Samples",
   )
   #vst
   vsd <- vst(dds, blind = FALSE)
   # Inspect vst data
```



head(assay(vsd),3)

#PCA Plot plotPCA(vsd, intgroup = "Patient")



3)
res <- results(dds, contrast = c("Group", "Tumour", "Normal"))
View summary of results
summary(res)
head(res)
#Exporting results to csv
write.csv(as.data.frame(res), file = "result.csv", row.names = TRUE)
Sort results by adjusted p-value
res <- res[order(res\$padj),]

Extract top 10 differentially expressed genes top10 <- as.data.frame(res)[1:10,]

Save the top 10 DE genes to a CSV file write.csv(top10, file = "Top10_genes.csv", row.names = TRUE)

View top 10 genes top10

top10_genes <- rownames(top10)

Description: df [10 x 6] log2FoldChange IfcSE baseMean stat pvalue padj SLC6A15 9.193702 3.795489e-20 5.004732e-16 514 0347 3 740371 0.4068406 PTGS2 266.1026 4.262043 0.4941830 8.624422 6.441732e-18 2.831356e-14 DAPL1 807.8465 -2.927431 0.3388200 -8.640079 5.617395e-18 2.831356e-14 SPINK6 275.6194 7.771102 0.9107945 8.532223 1.435619e-17 4.732517e-14 CLEC3B 2409.3374 -3.228985 0.3877862 -8.326716 8.311598e-17 2.191935e-13 KRT15 1043.6316 -3.309828 -8.208315 4.929663e-13 0.4032286 2.243135e-16 TNS4 5597.5364 1.911737 0.25448147.512285 5.810416e-14 1.094516e-10 -6.797063 1.289416e-13 PI16 610.1234 0.9176225 -7.407254 2.125279e-10 CST₆ -4.868265 0.6626807 -7.346321 2.037368e-13 2.984971e-10 958.3939 ITIH5 200.2914 -7.655044 1.0568594 -7.243200 4.382210e-13 4.877702e-10

1-10 of 10 rows

```
4)
```

BiocManager::install("clusterProfiler") require(clusterProfiler)

install.packages("msigdbr")
require(msigdbr)

#we also need R package dplyr for data wrangling require(dplyr)

go_gene_sets <- msigdbr(species = "human", category = "C5") #Load C5

msigdbr_t2g <- go_gene_sets %>% dplyr::distinct(gs_name,gene_symbol) %>% as.data.frame()# make a dataframe of the genesets and the corresponding Ensemble gene ids msigdbr_t2g



DE.res <- read.csv("C:/Users/dell/Downloads/result.csv", header = TRUE, row.names = 1)
DE.res.sign <- subset(DE.res, padj < 0.05 & log2FoldChange > 1)
DE.res.sign

BiocManager::install("fgsea") library(fgsea)

install.packages("data.table")
library(data.table)

BiocManager::install("qusage") library(qusage)

install.packages("ggplot2")
library(ggplot2)

library(clusterProfiler)

gmt 1 <- read.gmt("C:/Users/dell/Downloads/Data 2/c5.go.bp.v7.4.symbols.gmt")

DE.res.ranked <- DE.res[order(DE.res\$log2FoldChange, decreasing = T),]
DE.ranks <- setNames(DE_res_ranked\$log2FoldChange, DE_res_ranked\$gene.symbol)

ranked genes <- res\$log2FoldChange # Use log2FoldChange from DESeq2 results

```
names(ranked_genes) <- rownames(res) # Associate gene names with values</pre>
ranked_genes <- ranked_genes[order(ranked_genes, decreasing = TRUE)] # Sort
gsea_res <- GSEA(
 geneList = ranked_genes,
 TERM2GENE = gmt_1,
 pvalueCutoff = 1
gsea_table <- as.data.frame(gsea_res)</pre>
top_10_pathways <- gsea_table[order(gsea_table$qvalue), ][1:10, ]
print(top_10_pathways)
5)
BiocManager::install("enrichplot")
library(enrichplot)
gsea_table <- as.data.frame(gsea_res)</pre>
## Perform enrichment analysis and write results in a .csv file
upregulated <- gsea_table[gsea_table$NES > 0, ]
downregulated <- gsea_table[gsea_table$NES < 0, ]</pre>
# Extract top 2 from each category based on FDR q-values
top_upregulated <- upregulated[order(upregulated$qvalue), ][1:2, ]
top_downregulated <- downregulated[order(downregulated$qvalue), ][1:2, ]</pre>
# Enrichment plot for the first upregulated gene set
gseaplot2(gsea_res, geneSetID = top_upregulated$ID[1],
      title = top_upregulated$Description[1])
# Enrichment plot for the second upregulated gene set
gseaplot2(gsea res, geneSetID = top upregulated$ID[2],
      title = top_upregulated$Description[2])
       GOBP_HUMORAL_IMMUNE_RESPONSE_MEDIATED_BY_CIRCULATING_IMMUN
0.5 -
 Ranked List Metric
    10
     0
                                                                  10000
                                    5000
                                      Rank in Ordered Dataset
```

CHIP-SEQ Analysis

Steps:-

```
glogin -pe smp 5 -l h vmem=8G -l h rt=6:0:0
Copy two fastq files from shared resource directory
"/data/teaching/bci teaching/assignment/ChIPseq to 'cp -vR
/data/teaching/bci teaching/assignment/CHIP'
Once you are assigned a node, cd into your working directory
$ cd ~/CHIP/
mkdir CHIP
cd CHIP
cp /data/teaching/bci_teaching/ChIP_seq/CAPAN1_H3K4me1_chr12.fq ./
cp /data/teaching/bci_teaching/ChIP_seq/CAPAN1_H3K4me3_chr12.fq ./
cp /data/teaching/bci_teaching/ChIP_seq/CAPAN1_input_chr12.rmdup.bam ./
Then we use bowtie2 to align it to chr12
module load bowtie2
bowtie2 -p 4 -q --local -x /data/teaching/bci teaching/reference data/chr12 hg38 bowtie2
-U
CAPAN1_H3K4me1_chr12.fq -S CAPAN1_H3K4me1_chr12.sam
bowtie2 -p 4 -q --local -x
/data/teaching/bci teaching/reference data/chr12 hg38 bowtie2 -U
CAPAN1_H3K4me3_chr12.fq -S CAPAN1_H3K4me3_chr12.sam
head CAPAN1_H3K4me1_chr12.sam
head CAPAN1_H3K4me3_chr12.sam
module load samtools
First, convert SAM to BAM format
$ samtools view -S -b CAPAN1 H3K4me1 chr12.sam > CAPAN1 H3K4me1 chr12.bam
$ samtools view -S -b CAPAN1_H3K4me3_chr12.sam > CAPAN1_H3K4me3_chr12.bam
Next, sort these alignments with regard to their position in the reference genome
$ samtools sort CAPAN1 H3K4me1 chr12.bam -o CAPAN1 H3K4me1 chr12.sorted.bam
$ samtools sort CAPAN1_H3K4me3_chr12.bam -o CAPAN1_H3K4me3_chr12.sorted.bam
Remove PCR duplicates
$ samtools rmdup -s CAPAN1 H3K4me1 chr12.sorted.bam
CAPAN1_H3K4me1_chr12.rmdup.bam
$ samtools rmdup -s CAPAN1 H3K4me3 chr12.sorted.bam
CAPAN1_H3K4me3_chr12.rmdup.bam
```

" Macs2 Not working, Technical issues "

```
[ha24967@ddy82 ~]$ cd CHIP/
[ha24967@ddy82 CHIP]$ ls

CAPAN1_H3K4me1_chr12.bam

CAPAN1_H3K4me1_chr12.sorted.bam

CAPAN1_H3K4me3_chr12.fq

CAPAN1_H3K4me3_chr12.rmdup.bam

CAPAN1_H3K4me3_chr12.rmdup.bam

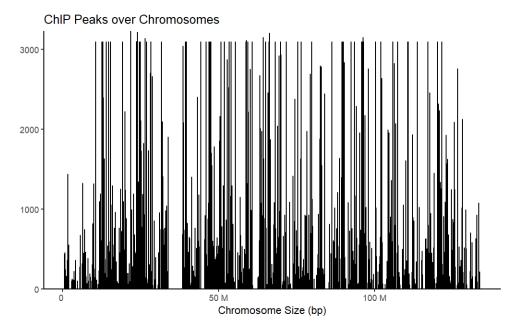
CAPAN1_H3K4me3_chr12.sam

CAPAN1_H3K4me3_chr12.sam

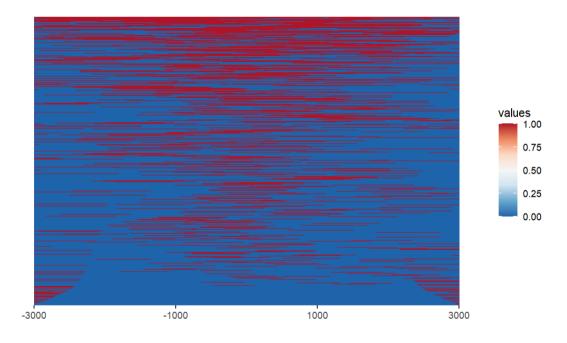
CAPAN1_H3K4me3_chr12.sam

CAPAN1_H3K4me3_chr12.sam
```

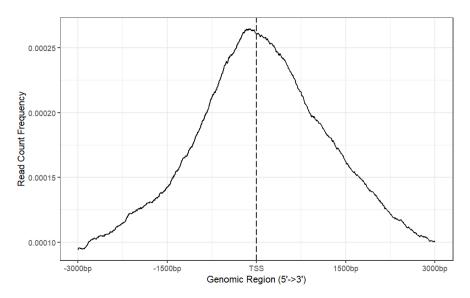
ChIPseeker



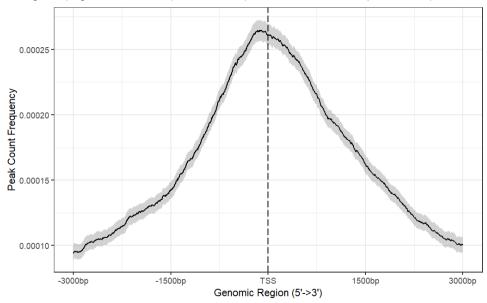
txdb19 <- TxDb.Hsapiens.UCSC.hg19.knownGene library(clusterProfiler) promoter <- getPromoters(TxDb=txdb19, upstream=3000, downstream=3000) tagMatrix <- getTagMatrix(peak, windows=promoter) tagHeatmap(tagMatrix)



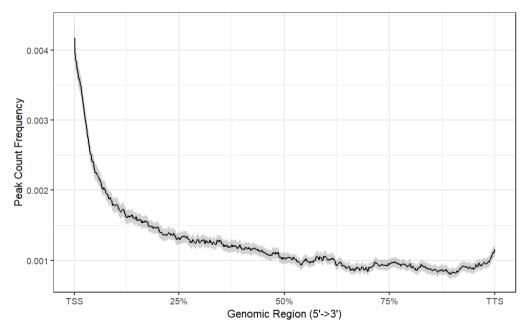
plotAvgProf(tagMatrix, xlim=c(-3000, 3000), xlab="Genomic Region (5'->3')", ylab = "Read Count Frequency")



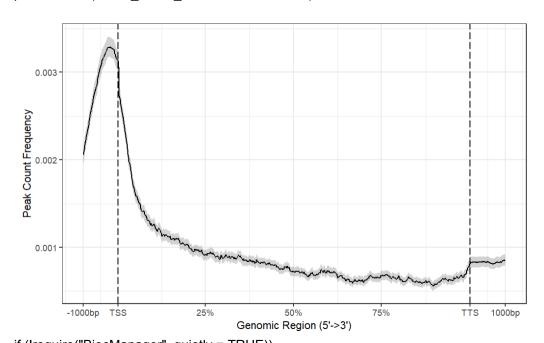
plotAvgProf(tagMatrix, xlim=c(-3000, 3000), conf = 0.95, resample = 1000)

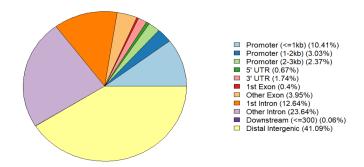


genebody <- getBioRegion(TxDb = txdb19, by = "gene", type = "body")
matrix_no_flankextension <- getTagMatrix(peak,windows = genebody, nbin = 800)
plotPeakProf(matrix_no_flankextension,conf = 0.95)

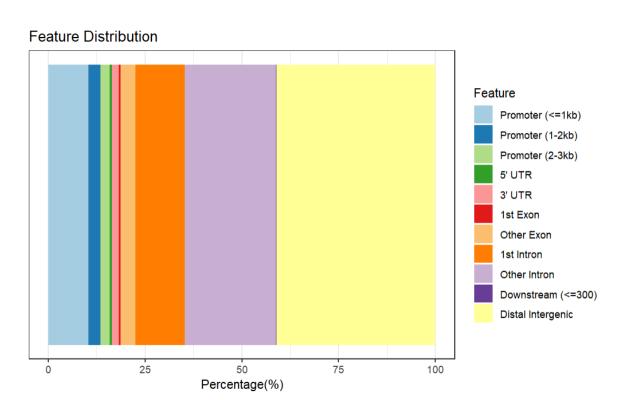


matrix_actual_extension <- getTagMatrix(peak,windows = genebody, nbin = 800, upstream = 1000,downstream = 1000) plotPeakProf(matrix_actual_extension,conf = 0.95)



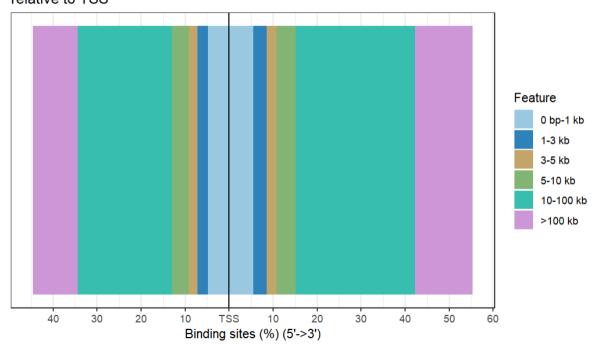


plotAnnoBar(peakAnno)



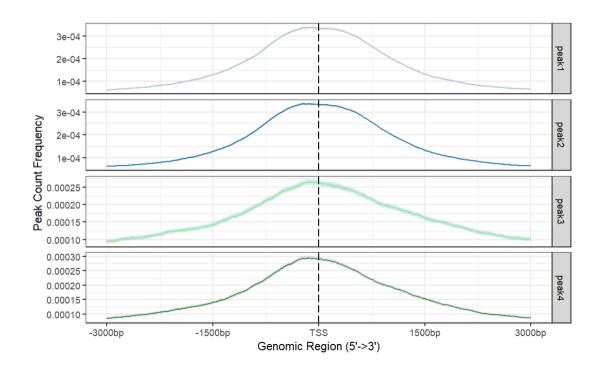
plotDistToTSS(peakAnno,title="Distribution of transcription factor-binding loci\nrelative to TSS")

Distribution of transcription factor-binding loci relative to TSS

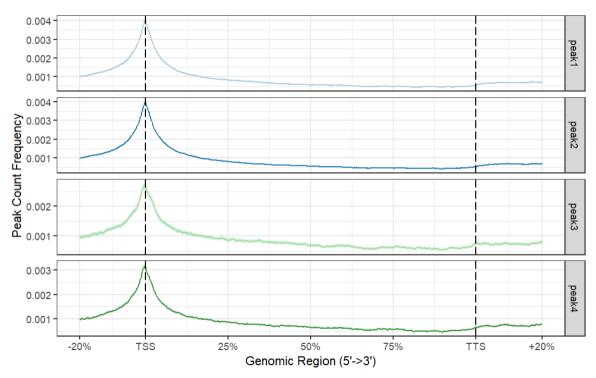


names(files) <- c("crELF3","wtELF3","crFOXA1","wtFOXA1") library(TxDb.Hsapiens.UCSC.hg19.knownGene) txdb <- TxDb.Hsapiens.UCSC.hg19.knownGene library(clusterProfiler)

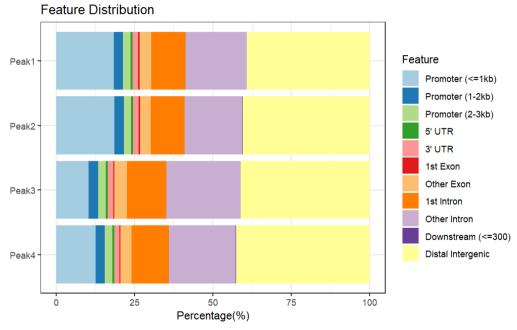
promoter <- getPromoters(TxDb=txdb, upstream=3000, downstream=3000) tagMatrixList <- lapply(Peaks,getTagMatrix, windows=promoter) plotAvgProf(tagMatrixList, xlim=c(-3000, 3000), conf=0.95,resample=500, facet="row")



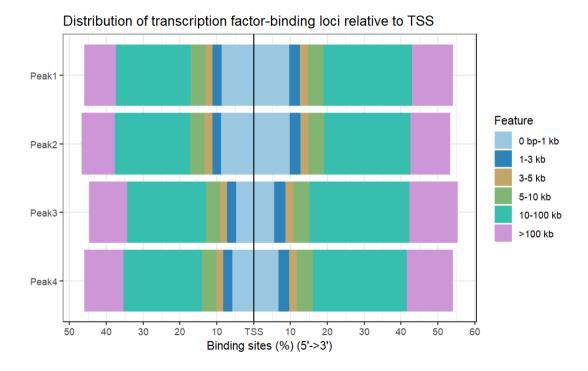
plotPeakProf2(Peaks, upstream = rel(0.2), downstream = rel(0.2),conf = 0.95, by = "gene", type = "body",TxDb = txdb, facet = "row", nbin = 800)



peakAnnoList <- lapply(Peaks, annotatePeak, TxDb=txdb, tssRegion=c(-3000, 3000), verbose=FALSE) plotAnnoBar(peakAnnoList)



plotDistToTSS(peakAnnoList)



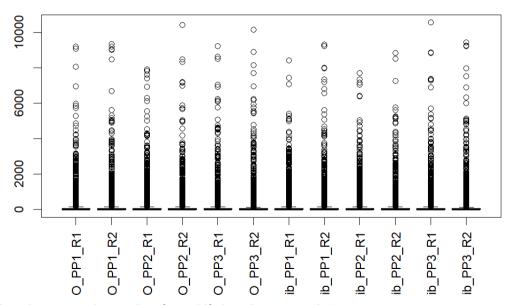
Proteomics

#LSD1i pretreated cells followwed by trametinib treatment

Data distribution before normalization

boxplot(df.phosphoprot_assign[,2:ncol(df.phosphoprot_assign)],las=3, main="Data distribution before normalization")

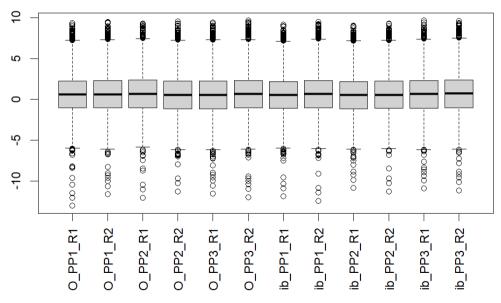
Data distribution before normalization



Data distribution after normalization

boxplot(df.norm_assign[,2:ncol(df.norm_assign)],las=3, main="Data distribution after Log transformation and normalization")

Data distribution after Log transformation and normalization



df.phosphoprot_2 <- data.frame(df.phosphoprot_2)</pre>

Log2 transform and normalize data by centering without scaling

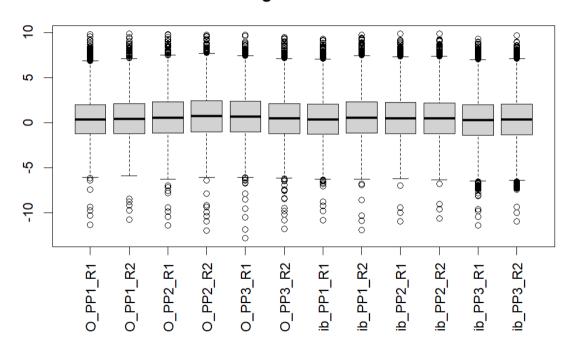
df.norm_2 <- data.frame(site=df.phosphoprot_2\$site,

scale(log2(df.phosphoprot_2[,2:ncol(df.phosphoprot_2)]), scale = F))

Data distribution after normalization

boxplot(df.norm_2[,2:ncol(df.norm_2)],las=3, main="Data distribution after Log transformation and normalization")

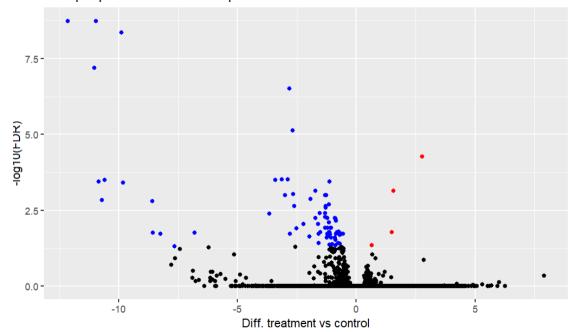
Data distribution after Log transformation and normalization

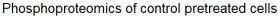


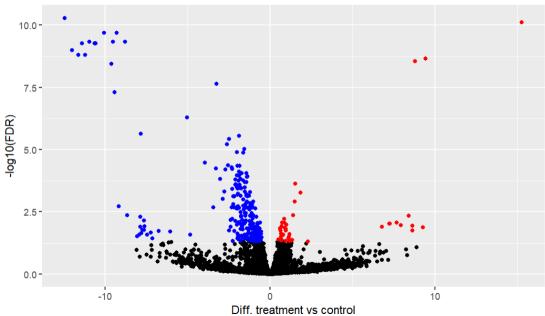
```
#LSD1i pretreated cells followwed by trametinib treatment
control_samples <- colnames(df.phosphoprot_assign[,2:7])</pre>
test samples <- colnames(df.phosphoprot assign[,8:13])
df.limma.results assign <- protools2::compare.by.limma(df.to.compare = df.norm assign,
                              control.samples = control samples,
                              test.samples = test_samples)
write.csv(df.limma.results assign, "Results of limma analysis of phopho.csv", row.names =
F)
head(df.limma.results assign[order(df.limma.results assign$difference.test.vs.control),])
df.significant_assign <- subset(df.limma.results_assign,df.limma.results_assign$FDR<0.05)
df.significant.decreased assign <-
subset(df.significant assign,df.significant assign$difference.test.vs.control<0)
df.significant.increased_assign <-
subset(df.significant assign,df.significant assign$difference.test.vs.control>0)
nrow(df.significant.decreased assign)
nrow(df.significant.increased assign)
#control pretreated cells followwed by trametinib treatment
control samples <- colnames(df.phosphoprot 2[,2:7])
test samples <- colnames(df.phosphoprot 2[,8:13])
df.limma.results 2 <- protools2::compare.by.limma(df.to.compare = df.norm 2,
                              control.samples = control samples,
                              test.samples = test_samples)
write.csv(df.limma.results 2, "Results of limma analysis of phopho.csv", row.names = F)
head(df.limma.results_2[order(df.limma.results_2$difference.test.vs.control),])
df.significant_2 <- subset(df.limma.results_2,df.limma.results_2$FDR<0.05)
df.significant.decreased 2 <-
subset(df.significant 2,df.significant 2$difference.test.vs.control<0)
df.significant.increased 2 <--
subset(df.significant 2,df.significant 2$difference.test.vs.control>0)
nrow(df.significant.decreased 2)
nrow(df.significant.increased_2)
```

Plot

Phosphoproteomics of LSD1i pretreated cells



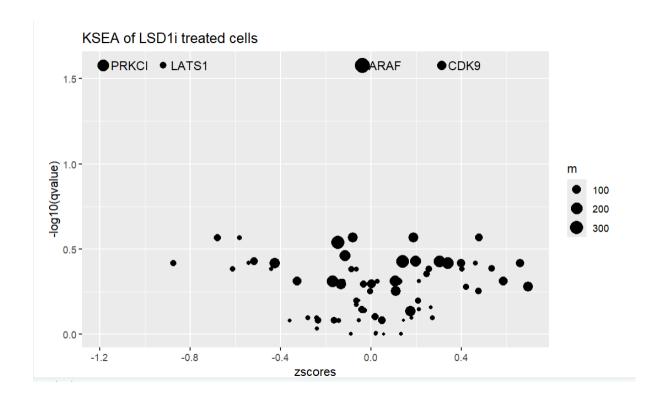




Volcano plot

```
#LSD1i pretreated cells followwed by trametinib treatment
assign_ksea <- read.csv("C:/Users/dell/Downloads/Data_2/Results of limma analysis of
phos.csv")
# Call the ksear.s function to carry out KSEA
#df.k <- ksear.s(data.frame(sites=df$site, df$differnce.test.vs.control),ks_db="pdts")
assign_ksea.k <- protools2::kinase.substrate.enrichment(dfx = assign_ksea,ks_db = "pdts")
# View the top kinases
assign_ksea.k[order(assign_ksea.k$pvalue),]
assign_ksea_t <- subset(assign_ksea.k,assign_ksea.k$pvalues<.01)

plot.ksea.volcano <- ggplot(assign_ksea.k,aes(x=zscores,y=-log10(qvalue)))+
geom_point(aes(size=m))+
geom_text(data =
assign_ksea_1,aes(x=zscores,y=-log10(qvalue),label=kinases),hjust=-0.2)+
labs(title = "KSEA of LSD1i treated cells")
plot.ksea.volcano
```

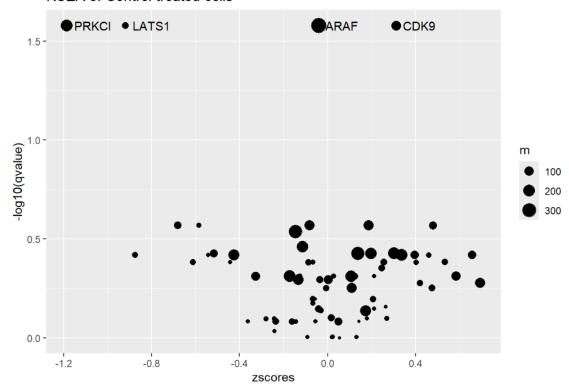


```
#Control pretreated cells followwed by trametinib treatment
assign_ksea_2 <-
read.csv("C:/Users/Downloads/OneDrive/Desktop/BCI/CAN7031_and_CAN7131_Omics_dat
a_analytics_and_practical_training/Assignment/answers/limma_result_of_LSD1i_2.csv")
# Call the ksear.s function to carry out KSEA
#df.k <- ksear.s(data.frame(sites=df$site, df$differnce.test.vs.control),ks_db="pdts")
assign_ksea.k_2 <- protools2::kinase.substrate.enrichment(dfx = assign_ksea_2,ks_db =
"pdts")
assign_ksea.k_2[order(assign_ksea.k_2$pvalue),]
assign_ksea_2 <- subset(assign_ksea.k_2,assign_ksea.k_2$pvalues<.01)

plot.ksea.volcano_2 <- ggplot(assign_ksea.k_2,aes(x=zscores,y=-log10(qvalue)))+
geom_point(aes(size=m))+
geom_text(data =
assign_ksea_2,aes(x=zscores,y=-log10(qvalue),label=kinases),hjust=-0.2)+
labs(title = "KSEA of Control treated cells")
```

plot.ksea.volcano_2

KSEA of Control treated cells



answer these questions:

- 1) Name the top 10 phosphorylation sites decreased and increased by the kinase inhibitor in each dataset
- 2) Name the top kinases increased by treatment in each dataset
- 3) Name the top kinases decreased by treatment in each dataset
- 4) What impact did the pre-treatment with the LSD1 inhibitor had in the effect of trametinib in decreasing kinase activities?

1) df.significant_assign\$protein[1:10]

[1] NCAPD2(S1330);NCAPD2(T1331)

[2]NUP153(S522

[3]ABL2(T938)

[4]MYCBP2(T3470)

[5]MAPK1(Y187)

[6] MAPK1(T185)

[7]NUP50(T219)

[8] OPTN(S528)

[9] LSP1(T184)

[10]OSTF1(S213)

2)Top Kinases increased by treatment in each dataset:

#LSD1i pretreated cells followed by trametinib treatment

- [1] IRAK1
- [2] CAMKK2
- [3] TAOK3

[4] CIT

#control pretreated cells followed by trametinib treatment [1]CDK9

- 3) Top Kinases decreased by treatment in each dataset:
- #LSD1i pretreated cells followed by trametinib treatment
- [1] MAP2K1
- [2] MAPK3
- [3] TNK2
- [4] MAPK1

#control pretreated cells followed by trametinib treatment

- [1]PRKC1
- [2] LATS1
- [3] ARAF
- 4) In comparison between LSD1i pretreated cells to control pretreated cells, there were more kinases increased by treatment in LSD1i pretreated cells. In regards to kinases decreased by treatment, kinases in control pretreated cells were decreased more in comparison to the kinases in LSD1i pretreated cells.