Discovery and Validation of Key Biomarkers based on Machine Learning and Immune Infiltrates in Ovarian Cancer

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Ovarian cancer (OC) is the deadliest gynecological malignancy which survival rate mainly depends on early Abstract: detection. Our purpose was to search for potential OC diagnostic markers and to examine the role of immune cell infiltration in its disease process. OC expression profiles were extracted from Gene Expression Omnibus (GEO) and differentially expressed genes (DEGs) were identified with the limma R package and subjected to functional correlation analysis. We used Hilbert-Schmidt Independence Criterion Least Absolute Shrinkage and Selection Operator (HSIC-Lasso), Support Vector Machine-Recursive Feature Elimination (SVM-RFE) algorithms and Minimum Redundancy Maximum Relevance (mRMR) to select gene features and chose the random forest (RF) algorithm as the classifier to validate the results of gene selection. Finally, we utilized CIBERSORT to bulk gene ex-pression profiles of OC for quantifying 22 subsets of immune cells. Subsequently, we analysed the correlation between diagnostic markers and infiltrating immune cells. ABCA8, IGFBP2 and REEP1 were identified as diagnostic markers for OC in this study (AUC=0.96), and a total of 380 DEGs were identified. Immune cell infiltration analysis showed that plasma cells, CD8 T cells and activated memory CD4 T cells may be involved in the occurrence and development of OC. In addition, ABCA8 was positively correlated with neutrophils, monocytes, activated NK cells while negatively correlated with activated CD4 memory T cells, naïve B cells and macrophages M1. IGFBP2 was positively correlated with macrophages M1 while negatively correlated with monocytes and neutrophils. REEP1 was positively correlated with neutrophils, monocytes, macrophages M2, activated NK cells and plasma cells while negatively correlated with resting NK cells, activated CD4 memory T cells and CD8 T cells. In conclusion, ABCA8, IGFBP2 and REEP1 can be used as diagnostic markers of OC, and immune cell infiltration plays a crucial role in the occurrence and progression of OC.

1 INTRODUCTION

Ovarian cancer is one of the most common malignancies in women and the leading cause of death from gynecologic cancers, ranking fifth in the United States. In 2022, the United States is estimated to have about 19,880 new cases and 12,810 deaths (SIEGEL, 2022). Owing to the particularity of ovarian location, most cases of ovarian cancer are diagnosed as advanced and have metastasized in the abdomen. Ovarian cancer has poor prognosis and high mortality due to lack of effective methods for early detection (JAYSON, 2014). Biomarkers can be utilized to develop personalized therapeutic interventions, and the treatment of tumors is increasingly being influenced by biomarkers. Finding effective biomarkers and studying their roles in the occurrence and development of OC are of great significance for elucidating the pathogenesis, diagnosis, prognosis of ovarian cancer. The development of microarray-based analysis and highthroughput biological sequencing technology have made it possible to analyze DEGs in order that biomarkers related to cancer diagnosis, treatment and prognosis can be identified and potential biological mechanisms discovered (VOGELSTEIN, 2013). GEO contains high-throughput gene expression data submitted by institutions that can be uploaded or downloaded by other researchers (CLOUGH, 2016). Based on the high-throughput gene expression data provided by GEO, we can deeply insight into the biological functions and regulatory mechanisms of

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ovarian cancer, clarify the mechanisms of its occurrence and development, and explore new diagnostic and therapeutic approaches. The GEO database provides data support for our research.

In this study, 7 microarray datasets (GSE10971, GSE18520, GSE26712, GSE36668, GSE40595, GSE54388 and GSE69428) were extracted from the GEO. Firstly, the DEGs between OC and normal ovary samples were identified based on the above seven datasets, and their potential biological functions were analyzed by functional and path-way enrichment analysis. Then, we validated OC diagnostic markers using machine learning algorithms and analyzed immune cell infiltration into OC tissue using CIBERSOFT. Finally, we performed correlation analysis to explore the relationship between three diagnostic markers and immune cell infiltration.

2 MATERIALS AND METHODS

2.1 Datasets Selection and Data Processing

Seven microarray datasets (GSE10971, GSE18520, GSE26712, GSE36668, GSE40595, GSE54388 and GSE69428) were extracted from the GEO database (https://www.ncbi.nlm.nih.gov/gds/). GSE26712 was based on Affymetrix GPL96 plat-form genome (Affymetrix human U133A array), GSE10971, GSE18520, GSE36668, GSE40595, GSE54388 and GSE69428 were based on Affymetrix GPL570 platform (Affymetrix human genome U133 Plus 2.0 array). A total of 426 tissue samples, including 348 OC samples and 78 normal ovarian samples.

In this study, six microarray datasets (GSE10971, GSE26712, GSE36668, GSE40595, GSE54388 and GSE69428) were used the limma R package (RITCHIE, 2015) for filtering batch effects due to datasets combination. Before removing batch effects, we used log2 to transform the expressed values of the dataset.

2.2 Functional Correlation Analysis

In this study, we utilized clusterProfiler R package (YU, 2012) for Gene Ontology (GO), Disease Oncology (DO) and KEGG enrichment analysis. GO annotation are grouped into three categories: biological process (BP), cellular component (CC) and molecular function (MF). The enriched KEGG

254

pathway and GO annotations with P < 0.05 were selected.

For gene set enrichment analysis (GSEA), we obtained the GSEA software (version 3.0) from the GSEA website, divided the samples into two groups based on the expression levels of 3 hub genes, and downloaded the background gene set required for the study from the Molecular Signatures Database v7.4. Based on gene expression profile and phenotype grouping, we set the minimum gene to 5, the maximum gene to 5000, and one thousand resamples, P value < 0.05 and FDR < 0.25 were considered statistically significant.

2.3 Gene Selection

In this study, we utilized singular value decomposition (SVD) to process the expression matrix. Subsequently, SVM-RFE is used to filter the optimal feature subset, it gets the importance of each feature by the importance of the feature, eliminates the least important features from the current feature set, and repeats this process recursively on the set after elimination until finally reaching the number of features to be selected (SUYKENS, 1999).

teatures to be selected (SUYKENS, 1999).			
Algorithm 1: SVM-RFE			
Input : Original gene sets $F = (f_1, f_2,, f_m)$, number			
of targets: k			
Output : Target genes $F^* = (f_1^*, f_2^*, \dots, f_k^*)$			
1 Initialize $F^* = F$;			
2 Train SVM according to F^* and get the descending			
ranking of all features;			
3 Delete the last feature and update F^* ;			
4 If the number of F^* is equal to k, ends; otherwise,			
return to step 2.			

The mRMR selects features based on mutual information with the aim of finding the set of genes in the original set of genes that are most correlated with the final output result but least correlated with each other (HANCHUAN P, 2005). In gene set *S*, the maximally important and minimally redundant gene i^* is given by:

$$i^* = argmaX_i \in \frac{R_S}{Q_{S,i}} \tag{1}$$

Where R_s represents the maximum correlation condition, $Q_{s,i}$ represents the minimum redundancy condition.

HSIC Lasso is a kernel-based feature selection algorithm. It focuses on the nonlinear correlation between input features and output results, and finally finds non redundant features that are highly dependent on output results (YAMADA, 2014).

$$\min_{\alpha \in \mathbb{R}^{d}} \frac{1}{2} \left\| \overline{L} - \sum_{k=1}^{d} \alpha_{k} \overline{K}^{(k)} \right\|_{Frob}^{2} + \lambda \|\alpha\|_{1} \quad (2)$$
s. t. $\alpha_{1}, \cdots, \alpha_{d} \ge 0$,

Where $\|\cdot\|_{Frob}$ is the Frobenius norm, $\overline{K}^{(k)} = HK^{(k)}H$, $\overline{L} = HLH$, $H \in \mathbb{R}^{n \times n}$ are centered matrices, λ is the regularization parameter, $\alpha \in \mathbb{R}^d$ is a parameter to be sought with non-negative constraints.

2.4 Classification and Evaluation Metrics

4

For evaluating the result of feature selection in the previous section, we chose the random forest algorithm as the classifier.

This study used accuracy, precision, recall, specificity, and AUC values as the criteria for determining the results of the experiment. The definitions are as follows:

$$Accuracy = \frac{TP + TN}{TP + FP + TN + FN}$$
(3)

$$Precision = \frac{TP}{TP + FP}$$
(4)

$$Recall = \frac{TT}{TP + FN}$$
(5)
pecificity = (6)

$$Specificity = \frac{TR}{FP + TN} \tag{6}$$

AUC is defined as the area composed of receiver operating characteristic (ROC) curve and abscissa, which can intuitively evaluate the performance of the classifier. The higher AUC is, the better the classification ability of the model is.

2.5 Analysis of Immune Cell Infiltration

CIBERSOFT is a gene-based deconvolution algorithm that evaluates the relative proportion of 22 tumor infiltrating immune cell profiles based on expression files, covering plasma cells, B cells, T cells, and myeloid cell subsets. In this research, we utilized CIBERSORT to obtain an immune cell infiltration matrix, filtering out samples with p<0.05. Then, we used PCA to analyse the matrix data and draw a PCA cluster diagram. To visualize the correlation of the 22 infiltrating immune cells, we produced a correlation heatmap using the corrplot R package (FRIENDLY, 2002). Violin plots were drawn using the ggplot2 R package to display the differences in immune cell infiltration.

3 RESULTS

3.1 Data Processing and Differential Expression Analysis

It is necessary to remove the batch effect from the gene expression matrix and normalize after 6 datasets (GSE10971, GSE26712, GSE36668, GSE40595, GSE54388 and GSE69428) were merged. The detailed flowchart was presented in Figure 1. We obtained 380 DEGs using the limma R package after data processing, as shown in the volcano plot (Figure 2).

Dataset	Samples	Features	ОС	Normal
GSE10971	37	23520	13	24
GSE18520	63	23519	53	10
GSE26712	195	13515	185	10
GSE36668	12	23520	8	4
GSE40595	77	23520	63	14
GSE54388	22	23520	16	6
GSE69428	20	18184	10	10

Table 1: Details of GEO datasets.



Figure 2: Volcano plot of DEGs; red represents up-regulated differential genes, black represents no significant difference genes, and green represents down-regulated differential genes.

3.2 Functional Correlation Analysis

The DO results show that the DEGs were mainly involved in embryonal cancer, ovarian cancer, embryoma, germ cell cancer, female reproductive organ cancer (Figure 3). In the KEGG pathway enrichment analysis, the up-regulated DEGs mainly participated in cell cycle, DNA replication, oocyte meiosis, p53 signaling pathway (Figure 4A). The GO analysis of DEGs classified DEGs into three functional groups: BP, MF, and CC. For the BP group, the up-regulated DEGs were mainly involved in chromosome segregation, mitotic nuclear division, nuclear division (Figure 4B). For the MF group, the up-regulated DEGs mainly participated in cyclindependent protein serine/threonine kinase regulator activity, microtubule binding, tubulin binding (Figure 4C). For the CC group, the up-regulated DEGs mainly participated in spindle, chromosomal region, mitotic spindle (Figure 4D). GSEA results mainly included TGF- β signaling, hedgehog signaling and epithelial-mesenchymal transition (Figure 5).







Figure 4: Histogram of KEGG and GO analysis. The horizontal axis represents the number of DEGs under the GO and KEGG item.



Figure 5: Gene set enrichment analysis. P value < 0.05 and FDR < 0.25 were considered statistically significant. TGF_BETA_SIGNALING (FDR = 0.0983), HEDGEHOG_SIGNALING (FDR = 0.1169) and EPITHELIAL_MESENCHYMAL_TRANSITION (FDR = 0.1669).

3.3 Screening and Identification of Key Biomarkers

We downloaded seven datasets from GEO. The number of patients was 363 (295 in the OC group; 68 in the control group). To search the biomarkers of OC, we performed gene selection through SVM-RFE, HSIC Lasso and mRMR (DENG, 2020; MARVI-KHORASANI, 2019). The evaluation metrics of the three feature selection algorithms were shown in Table 2. The results of the SVM-RFE showed that 11 genes were identified as signature genes in OC. Meanwhile, we utilized the HSIC Lasso algorithm to screen out 10 characteristic genes in OC. Finally, the mRMR feature selection algorithm selected 18 key genes related to ovarian cancer (Figure 6). Known from the Venn diagram of the three algorithms, three diagnosis-related genes were obtained (Figure 6). We used GSE18520 to verify the diagnostic efficacy of ABCA8, IGFBP2 and REEP1, and the AUC results showed that the combination of the three genes can reach a very high level in the verification set (AUC = 0.96). The results showed that ABCA8, IGFBP2 and REEP1 had greater diagnostic value (Figure 7).

Table 2: Evaluation metrics for different feature selection algorithms.

Metrics SV	M-RFE HS	SIC Lasso	mRMR
Features	11	10	18
Accuracy (%)	96.00	98.13	97.87
Precision (%)	99.39	99.86	99.88
Recall (%)	97.40	98.31	98.08
Specificity (%)	89.60	96.49	96.56
AUC (%)	98.30	99.50	99.58
Features Accuracy (%) Precision (%) Recall (%) Specificity (%) AUC (%)	11 96.00 99.39 97.40 89.60 98.30	10 98.13 99.86 98.31 96.49 99.50	18 97.87 99.88 98.08 96.56 99.58



Figure 7: The ROC curve of patient category verification after the combination of three diagnostic markers.

3.4 Immune Cell Infiltration

To explore the role of immune cell infiltration in OC, in this study, we utilized PCA cluster analysis to observe differences between OC samples and normal samples, and we found significant differences in immune cell infiltration between the two groups. (Figure 8A). Derived from the correlation heat map of immune cells, activated CD4 memory T cells, resting mast cells, and activated dendritic cells had a significant positive correlation. The violin plot indicated that the fraction for plasma cells, T cells CD8 and T cells CD4 memory activated in the OC group were significantly higher than the normal group. On the contrary, the fractions of many cells were lower than the normal group, such as T cells CD4 naïve, T cells gamma delta, monocytes, and neutrophils (Figure 8B).

The correlation analysis between ABCA8, IGFBP2, REEP1 and infiltrating immune cells showed that ABCA8 was positively correlated with neutrophils, monocytes and activated NK cells while negatively correlated with activated CD4 memory T cells, naïve B cells and macrophages M1. IGFBP2 was positively correlated with macrophages M1 while negatively correlated with monocytes and neutrophils. REEP1 was positively correlated with monocytes (NK cells and plasma cells while negatively correlated with resting NK cells, activated CD4 memory T cells and CD8 T cells (Figure 9).



Figure 8: Immune cell infiltration analysis. (A) PCA cluster plot of immune cell infiltration between OC samples and normal samples. (B) Violin diagram of the proportion of 22 types of immune cells. (C) Correlation heat map of 22 types of immune cells.



Figure 9: Correlation between ABCA8, IGFBP2, REEP1 and infiltrating immune cell.

4 DISCUSSION

Ovarian cancer is the deadliest gynecological malignancies. In 2018, there were 295,414 new cases and 184,799 deaths worldwide, showing a significant upward trend. Due to the onset of ovarian cancer is very insidious, there are no obvious symptoms in the early stage of the disease, and accurate methods for early screening are lacking. As a result, more than 70% of patients are at an advanced stage at initial diagnosis. Studies have shown that the infiltration of immune cells plays a crucial role in the occurrence and development of OC (ZHANG, 2020). Therefore, it is of great significance to use machine learning to find specific markers and analyze the infiltration patterns of OC immune cells to improve the prognosis of OC patients. The CIBERSOFT tool also facilitates the analysis of disease facial cell infiltration. In this research, we utilized machine learning method to identify the diagnostic markers of OC. In addition, we also analyzed the role of immune cell infiltration in OC.

First, we assembled 7 OC gene expression datasets from GEO database, with a total of 426 samples, including 348 OC samples and 78 normal samples. We identified 380 DEGs using limma R package. KEGG results show that DEGs mainly participated in the KEGG pathway including cell cycle, DNA replication, oocyte meiosis, p53 signaling pathway. GO enrichment results show that DEGs were mainly related to chromosome segregation, mitotic nuclear division and cyclindependent protein serine/threonine kinase regulator activity. DO enrichment results show that the diseases mainly include embryonal cancer, ovarian cancer, embryoma, germ cell cancer, female reproductive organ cancer. Furthermore, GSEA results mainly involves TGF-β signaling, hedgehog signaling and epithelial-mesenchymal transition. Research by Basu et al. (BASU, 2015) found that the activation of TGF-\beta signaling can induce the invasion of OC cells. Wen et al. (WEN, 2020) showed that the self-renewal, migration and invasion of OC stem cells can be inhibited by blocking TGF-β signaling. The study of Doheny et al. (DOHENY, 2020) concluded that abnormal activation of the hedgehog signaling plays a crucial role in the occurrence and development of ovarian cancer. Nieto et al. (NIETO, 2016) showed that epithelial-mesenchymal transition is the main process for the transformation of early ovarian tumors into aggressive and metastatic malignancies. The above results show that the analytical results of our study are precise.

SVD is a widely used algorithm in machine learning, mainly applied for feature decomposition in dimension reduction algorithms. SVM-RFE is one of the commonly used feature selection methods. The so-called recursive feature removal is to take the form of a loop to get the order of features. In each recursive process, the score of each feature will be calculated according to certain rules, remove the lowest score (the least important feature), then repeat the process, until all genes have their own sequence. HSIC is a non-linear feature selection method that considers the relationship between non-linear input and output. HSIC Lasso uses HSIC to measure the dependencies between variables. The mRMR selects features based on mutual information with the aim of finding the set of genes in the original set of genes that are most correlated with the final output result but least correlated with each other. First, we utilize singular value decomposition to process the expression matrix. The genes are then filtered using three algorithms to create the optimal classification model. Finally, combining the screening results of the three algorithms, ABCA8, IGFBP2 and REEP1 were identified as diagnostic markers for OC.

The ABC transporter superfamily can mediate the ATP-dependent transport of many exogenous and endogenous substances through the lipid bilayer. The ABC transporter is responsible for the transport of various inflammatory mediators and lipids. These substances are directly related to tumor progression in ovarian cancer. Therefore, they can contribute to the clinical outcome and become a potential therapeutic target for OC. Hedditch et al. (HEDDITCH, 2014) showed that ABCA transporter correlated with poor prognosis in serous ovarian cancer, suggesting that lipid trafficking was a potentially important process in epithelial ovarian cancer. Cancer cells rely on de novo synthesis of lipids to produce fatty acids to meet the increased energy requirements of tumor growth. More and more evidences indicate that lipid metabolism is dysregulated in cancers including ovarian cancer (PYRAGIUS, 2013). Therefore, we believe that ABCA8 may be involved in the pathological process of OC. The IGFBP family plays a vital role in regulating basic biological activities outside and inside cells (BAXTER, 2014). Research by Lee et al. (LEE, 2005) found through western blotting and tissue microarray analysis that IGFBP2 was significantly overexpressed in malignant ovarian tissues, indicating that IGFBP2 enhanced the invasive ability of ovarian cancer cells. In addition, the increase in IGFBP2 expression is positively correlated with the level of serum tumor marker

CA125 (FLYVBJERG, 1997). Therefore, we conclude that IGFBP2 can be used as a potential marker for the diagnosis of OC, and given that IGFBP2 can enhance the invasion ability of cancer cells, IGFBP2 has great potential as a therapeutic target in the future. REEP1 is a member of the endoplasmic reticulum (ER)-forming protein family that localizes to the ER and the plasma membrane (RENVOISé, 2016; BJöRK, 2013). Voloshanenko et al. (VOLOSHANENKO, 2018) used independent experiments to prove that REEP1 can be used as a non-classical target gene in colon cancer cells. Zhao et al. (ZHAO, 2019) showed that REEP1 can be used as a molecular diagnostic marker and therapeutic target for breast cancer. GO annotations related to REEP1 include microtubule binding, and research showed that Paclitaxel, as a microtubule inhibitor, can be used to treat high-grade serous ovarian cancer. Due to the tumor resistance of paclitaxel as a therapeutic drug, the discovery of new microtubule inhibitors has become more and more urgent. Therefore, it is necessary to study the mechanism of the occurrence and development of REEP1 in ovarian cancer.

We used CIBERSOFT to further explore the role of immune cell infiltration in OC. The results showed that an increased infiltration of plasma cells, CD8 T cells, activated memory CD4 T cells, and a decreased infiltration of naïve CD4 T cells, gamma delta T cells, monocytes, neutrophils. Kroeger et al. (KROEGER, 2016) indicated that plasma cells are related with CD8(+) tumor-infiltrating lymphocytes response in OC. Sato et al. (SATO, 2005) used immunohistochemical analysis to confirm that intraepithelial CD8+ tumor infiltrating lymphocytes and high CD8+/regulatory T cell ratio can significantly improve the survival rate of ovarian cancer patients. In the tumor-associated lymphocytes of ascites in patients with ovarian cancer, the frequency of activated memory T-cells was significantly increased, and they may be activated by the tumor or the tumor-related microenvironment (LANDSKRON, 2015). The patient with high mast cell infiltration had a longer survival period was found in (CHAN, 2005). The relationship between macrophages and ovarian cancer was explored by Zhang et al. (ZHANG, 2020), and they had found that macrophages promote the proliferation and migration of ovarian tumors, providing a potential treatment method for patients with ovarian cancer. A new mechanism of action for paclitaxel was discovered by Wanderley et al. (WANDERLEY, 2018) through the formation of several tumor models, they showed that paclitaxel switched tumor associated macrophages to

an M1 like antitumor phenotype by reactivating anticancer immune responses, which provided a rationale for a new treatment regimen combining paclitaxel with immunotherapy. Regarding monocytes, Prat et al. (PRAT, 2020) verified that they can be used as a biomarker of ascites immune status and ovarian cancer progression. The prerequisite step before the metastasis of ovarian cancer in situ is that neutrophils flow into the omentum, and the extracellular traps of neutrophils combine with ovarian cancer cells to promote metastasis (LEE, 2019). The above analysis shows that plasma cells, CD8 T cells, activated memory CD4 T cells, monocytes, neutrophils play crucial roles in the pathogenesis of OC and should be the focus of further research.

We combined SVD with three feature selection algorithms to validate diagnostic markers for OC and analysed immune cell infiltration in OC tissues using CIBERSOFT. Our study has certain limitations due to the limited genetic data available for analysis.

5 CONCLUSIONS

In this paper, we found that ABCA8, IGFBP2 and REEP1 are diagnostic markers of OC. Also, this study found that plasma cells, CD8 T cells, and activated memory CD4 T cells may be involved in the occurrence and development of OC. Besides, ABCA8 was positively correlated with neutrophils, monocytes, activated NK cells and negatively correlated with activated CD4 memory T cells, naïve B cells, macrophages M1. IGFBP2 was positively correlated with macrophages M1 and negatively correlated with monocytes, neutrophils. REEP1 was positively correlated with neutrophils, monocytes, macrophages M2, activated NK cells, plasma cells and negatively correlated with resting NK cells, activated CD4 memory T cells, CD8 T cells. In the future, the role of these immune cells in ovarian cancer requires further research to identify the targets of OC immunotherapy, which can help to improve the level of immunomodulatory therapy for OC patients.

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