NEMESIS (NEtwork MEdicine analySIS): Towards Visual Exploration of Network Medicine Data

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Abstract: The emerging Network Medicine domain is causing a shift between diagnosis based on the conventional reductionist approach, arguing that biological factors work in a simple linear way, and the analysis of perturbations within the comprehensive network map of molecular components and their interactions, i.e., the "Interactome". As a consequence, clinicians are investigating more than 140,000 interactions between more than 13,000 genes and their connections with drugs and diseases, along a sequence of "networks". Making sense of this complex structure is a challenging activity and the visual analytics application NEMESIS tries to attack such a problem allowing for interactively exploring this large body of knowledge, focusing on subsets of data and investigating their relationships with other relevant dimensions, pursuing the main goal of facilitating hypothesis formulation and validation.

1 INTRODUCTION

Until recently, the investigation of disease etiology, diagnosis and treatment, has been based on a conventional reductionist approach. This tenet argues that critical biological factors work in a simple linear mechanism to control disease pathobiology. Rather, they are nearly always the result of multiple pathobiological pathways that interact through an interconnected network: a disease is rarely a direct consequence of an abnormality in a single gene or molecular component (see, e.g., (Chan and Loscalzo, 2012; Gustafsson et al., 2014)). For example, complex diseases like cancers of different types, have extraordinary complex biological phenomena that underlie them. Today, big data, genomics, and quantitative in silico methodologies integration have the potential to push forward the frontiers of medicine in an unprecedented way.

Clinicians, diagnosticians and therapists have long strived to determine single molecular traits that lead to diseases. What they had in mind was the idea that a single golden bullet drug might provide a cure. However, this reductionist approach largely ignored the essential complexity of human diseases. Indeed, a large body of evidence that is now emerging from new genomic technologies, points out directly to the cause of disease as perturbations within the interactome, i.e., the comprehensive network map of molecular components and their interactions. Precisely, the human interactome is composed of direct physical, regulatory (transcription factors binding), binary, metabolic enzyme-coupled, protein complexes and kinase/substrate interactions. Such network is largely incomplete as well as the connections between genes and disease. Currently, more than 140,000 interactions between more than 13,000 proteins/genes are known (see, e.g., (Korcsmaros et al., 2017; Gustafsson et al., 2014)). Consequently, a paradigm shift is needed towards the development of temporal and spatial multi-level models, from molecular machineries to single cells, whole organism and individuals, including the environment, to reveal the underlying links among components. This new type of medical paradigm is called Network Medicine.

The gap between the biological and the informational mindset can be daunting and might impair from the beginning the development of shared concepts. However, the network medicine visualization setting will certainly also facilitate communications across disciplines given the immediate and intuitive understanding of the network concept and representation, a visual metaphor that can be used by molecular biologists to visualize their knowledge in a structured way ready to be translated into an algorithm on the available data, as medical or biological goals are defined.
Most of the available proposals have the goal of visualizing the structure of the relationships existing among genes, diseases, drugs, and biological process, showing them as networks (see, e.g., (Sharma et al., 2015; Gladilin, 2017)) offering, in most cases, only navigational means to traverse their complex structure. This paper tries to proceed further in this direction designing a visual analytics solution that allow for interacting with such networks in order to steer analysis patterns. Moreover, taking into account that exploring a single layer is not enough, the proposed system, NEMESIS, aims at providing an integrated vision of both information coming from a single reference network and new derived data coming from the analysis of one or more additional networks.

Summarizing, the contribution of the paper is a novel visual analytics solution encompassing the following main characteristics:

- the integrated visualization of a single network with multidimensional data derived from the analysis of the other connected networks;
- the possibility of focusing the analysis on relevant subsets of data (e.g., subsets of diseases) to steer the explorations and formulate and validate hypothesis;
- the availability of complex and long lasting pre-computed analytics that can be used either for identifying specific subsets of data (e.g., similar diseases) or presenting multidimensional aggregation of one or more networks to provide summary information.

The paper is structured as follows: Section 2 describes the Network Medicine application domain. Section 3 deals with related proposals, Section 4 describes the system implementation, and Section 5 describes the results of an informal user study, concludes the paper and outlines future activities.

2 APPLICATION DOMAIN

The human genome sequencing using high-throughput next-generation devices is being deeply affecting current visions of biomedical and clinical research. More recently, entering the era of personal whole-genome sequencing, 38 million genetic variants have been discovered, some of which are rare mutations and thus may be associated with large size effect. How to use this large amount of data to generate better understanding of disease and find appropriate drug targets? Looking at networks without a specific biomedical bias in mind and let the data speak by themselves, so to formulate new hypothesis to be further validated by experimentalist and so on, moving within a virtuous circle of shared knowledge. The unifying framework of visual explorative data analysis perfectly fits the need for integrated network-based algorithms in order to reconcile biological network representation and large-scale data integration. Networks can, in fact, be obtained from any sort of information: known genes-genes interactions, gene expression profiles, functional annotation, etc. Recently, it has been shown that the genes associated with a disease are localized in specific neighborhoods, or ‘disease modules’, within such an interaction network called the interactome (Vidal et al., 2011) (Khler et al., 2008). The overall ambition of researchers working in this field is to both developing a global understanding of how interactome perturbations result in disease traits, and to translate computational insights into concrete clinical applications, such as new drugs and therapies, diagnostic tools or prognostic/predictive markers.

According to this, the paper investigates novel mechanisms for exploring the different network layers that constitute the complex information network medicine has to deal with, i.e., the gene-gene network, drugs-genes network, diseases-genes network, etc., with the main goal of supporting explorative analysis, in order to generate and validate hypothesis. According to this goal, the NEMESIS system allows for focusing on a subset of data, showing its structure and relationships on both a reference network and on integrated analysis of the other networks, see Fig. 1. Suitable coordinated visualizations and analytics, detailed on Section 4, provide additional support to the interactive analysis.

3 RELATED WORK

Information Visualization and Visual Analytics are long recognized fields that provided benefits for medical data analysis, like stated in (Chittaro, 2001) (Shneiderman et al., 2013). In particular, the field of network medicine is becoming prominent in the last decade, with several research contributions focused on applying principles of network analysis to the medical field.

Several contributions focused on the visualization of interactome ((Chaurasia et al., 2009) (Lu et al., 2004)), disease module and gene pathways ((Cerami et al. 2010) (Mlecnik et al., 2005)), Electronic Health Records ((Wang et al., 2011)), phenotypes ((Bottomly et al., 2016)) and most of them use the well-known node-link diagram representation.
Figure 1: NEMESIS exploration of the different network layers. The user selects one reference network (e.g., the gene-gene links network) that is represented in the visualization using topological pieces of information of the reference network (e.g., distance among nodes) together with derived data computed through a generic aggregation function that uses the other networks (e.g., the number of diseases that a pair of genes have in common).

... for explaining results and analysis outcomes (Sharma et al., 2015),(Gladinin, 2017). However, typically they do not provide any control or only very basic visual interactions for dealing with the visual environment. Moreover, general purpose framework exist, in the form of environments or libraries, that allow to visualize large biological networks like Cytoscape (Smoot et al., 2011)). NetBioV (Tripathi et al., 2014) or HitWalker 2 (Bottomly et al., 2016). The work in (Merico et al., 2010) proposes a technique for gene set enrichment visualization; this technique finds functionally coherent gene-sets, such as pathways, that are statistically over-represented in a given gene list. Ideally, the number of resulting sets is smaller than the number of genes in the list, thus simplifying interpretation. Differently from our approach no interaction is provided to analyze the results of the application of the technique, limiting the analysis capabilities. For what regards visual analytics solutions, Gerassch et al. (Gerassch et al., 2014) propose a system for visually analyzing high-throughput omics data in the context of networks, in particular for the differential analysis and the analysis of time series data. Perer and Sun (Perer and Sun, 2012) and Basole et al. (Basole et al., 2015) propose visual analytics solutions that analyze clinical patients data: the former takes clinical patients data as event sequences, constructs time-evolving networks and visualizes them as a temporal flow of matrices; the latter allows for exploring data about pediatric asthma care processes. Differently from our approach they only consider patients data, effectively focusing only on one plane of analysis and do not include any multidimensional analysis and or interactome data. The work in (Huan et al., 2008) presents PRoteoLEns, a JAVA-based visual analytics tool for creating, annotating, and exploring multi-scale biological networks. Nonetheless, the tool seems very proficient in exploring subparts of a biological network while does not seems good in communicating an overview. Finally, inspired by the visual encoding proposed in (Dietzsch et al., 2009), NEMESIS relies on easy-relatable visual paradigms for medical and bioinformatics people, that are not computer scientist and could not necessarily relate to more abstract visual representations.

4 THE NEMESIS SYSTEM

This section presents NEMESIS (NEtwork MEdicine analySIS), a visual analytics solution that allows for exploring groups of similar diseases, studying the associated genes, their interactions through the interactome, and the relations that could exist among them, focusing on single dimensions of analysis or considering multidimensional properties. NEMESIS has been developed in collaboration with medical and bioinformatics personnel through an iterative development cycle that produced 3 different versions, of which the last is the one presented in this paper. A working prototype is available at: http://awareserver.dis.uniroma1.it/nemesis/. Actually the prototype uses the OMIM dataset [2] of diseases genes characteristics, composed by:

- 13.401 genes;
- 70 diseases, 20-60 genes per disease (avg: 40);
- 138.405 direct interactions between genes (path of length 1);
- 5.230.666 computed indirect interactions (derived data, computing path of length 2).

The NEMESIS environment is visible in Figure 2; it is composed of 3 main panes: the Interactions Matrix pane that shows data about the relations and pathways of interest, the Genes scatter-plot pane, that visualizes characteristics specific to genes, and the Diseases Analysis pane, that shows data about the considered diseases. Each of them is described in the following sections.

4.1 Diseases Analysis Pane

This pane allows to select the list of diseases the analysis will concentrate on. It reports the set of all diseases under analysis, i.e., cancer diseases, whose selection affects all the other linked visualizations. Each disease is selectable/deselectable through the associated check-box, with the environment reconfiguring...
Figure 2: The NEMESIS user interface. The left side contains the Interactions matrix pane, representing interactions among genes using an enriched matrix representation; the top-right contains the Genes scatter-plot, allowing for inspecting characteristics of specific genes or subsets of them; finally, the bottom-right part contains the interactive diseases list that allows the analyst to steer the analysis and activate analytics.

Accordingly, for each disease, the number of associated genes and the number of genes involved by the actual analysis workflow are reported. For obtaining rapid steering of the analysis, accelerators are present in the form of “Select All/Deselect All” buttons. In this way the analyst can choose to inspect genes coming from a starting set of diseases, refining the analysis on smaller subsets, or even inspecting the genes belonging to a single disease. An example of these three cases is visible in Figure 3.

Selecting a subset of diseases will influence the data presented in the Genes scatter-plot and Interactions Matrix panes, and so it is possible by mouse-hovering on a disease to see the corresponding genes highlighted in the Genes scatter-plot (in red), with the capability to incrementally select more diseases and explore their intersection by clicking on the name of the disease. The fixed disease are represented with a red background, as visible in Figure 4.

Additionally, while computing interactions among disease genes it is possible to compute paths of length 2 either using only diseases genes or considering all the interactome genes (by deselecting the “interactome disease only” flag).

An important feature of the NEMESIS system is the capability to drive the analysis using complex analytics, obtained computing from million to hundreds of millions of combinations. These functionalities are labeled as “Biomarkers”, and allow to compute the Top 5 intersecting diseases considering only the direct interactions (maximizing intersection at distance=1), the Top 5 intersecting diseases considering both direct and indirect interactions (maximizing intersection up to distance=2), and the Top 5 diseases that maximize the genes sensitivity. In Figure 8 is visible an example in which is computed the Top 5 of diseases that maximizes intersection considering direct interactions. The highlighting of regular patterns in the matrix and the strong reduction in cardinality of data to process make the use of biomarkers very helpful in conducting analysis.

4.2 Interactions Matrix Pane

This pane contains an enriched interactive visualization of the interactome data of interest. Differently from many contributions that focus on representing the genes interactions as a node-link diagram, we used the well-known matrix visual paradigm for representing the interactome in order to exploit its better readability properties (Ghoniem et al., 2004) and to represent paths of any length. Indeed, it represents three types of interactions between genes: genes that do not have any interactions are represented with a black square, genes that are directly interacting (connected through a single link in the interactome) are represented as a blue square and genes that are indirectly interacting (a pathway of length 2 exists in the interactome connecting them) are represented as an orange square. In this way the analyst can inspect the overview of the existing relations among genes that belongs to the inspected set of diseases, spotting areas with high number of interactions (likely deserving further investigations) or low number of interac-
Figure 3: The figure shows three different configurations of the NEMESIS system, obtained by different selections of diseases. On the left is visible the environment configured to analyze all the available diseases; in the center the analyst has selected a subset of diseases, deselecting the ones she is not interested in, with both the Interactions matrix and the Genes scatter-plot reconfiguring accordingly; on the right the analyst has chosen to analyze a single disease, effectively lowering the cardinality of genes and interactions to analyze.

Figure 4: The analyst selects the lymphoma and leukemia b-cell diseases, blocking the first and hovering the second for comparing modules. The analysis, superimposed on the previous steps (selection of high sensitivity genes), highlights that in the modules of these diseases is present only one gene with an high sensitivity, filled in green with a red border.

4.3 Genes Scatter-plot Pane

The matrix representation is very effective in presenting an overview of the interactions and similarities and, in order to complement it with information about other genes characteristics, NEMESIS includes a vi-
Figure 5: The figure shows a detail of the Interactions matrix pane. The analyst has selected to show only direct interactions, producing a visualization that shows different densities of direct interactions, higher in the top-left part. An informative tooltip shows, on demand, detailed information.

Figure 6: Having selected the multidimensional similarity check-box, the analyst is presented with the view in figure. The inferior triangular matrix represents the interactions among genes, while the superior triangular matrix represents their similarity (w.r.t., the number of diseases that are associated with both of them). The analyst can spot similarity between interactions, and check whether genes interact through the interactome and/or are similar.

Figure 7: The figure shows an example of selection of interesting part of the interactome. The analyst selects all the gens with an high sensitivity (represented in green) by clicking them, and obtain the subselection of the Interactions matrix with all the genes interacting with the selected ones. Additionally, the Diseases Analysis pane reports in green the part of the selected genes that belong to each disease.

The sensitivity of a gene is a derived characteristic and represents the weight that a gene has in a disease, in terms of all the genes associated with that disease. As an example, let assume that we are focusing on genes G1 and G2, and considering a set of only 2 diseases (d1 and d2), with their modules expressed in the form:

\[d_1 = [c_{1,1}G1, c_{2,1}G2, c_{3,1}G3, c_{4,1}G4, c_{5,1}G5]\]

\[d_2 = [c_{1,2}G1, c_{9,2}G9]\]

Assuming \(c_{i,j} = 1/|d_j|:\)

- \(\text{sensitivity}_{d1}(G1) = 1/5 = 20\%\)
- \(\text{sensitivity}_{d2}(G1) = 1/2 = 50\%\)

Mouse-hovering on a gene allows the analyst to inspect a tooltip presenting additional characteristics of the gene, like its ID and degree, the percentage of diseases in which it appears (out of all the 70 classified diseases), and the diseases to which it belongs to. Additionally, the mouse-hover will highlight in the Interactions matrix pane the row of all the genes that interact with the selected one and in the Diseases Analysis pane all the diseases it belongs to. The analyst can even lock this gene by clicking on it, effectively allowing to select a subset of genes and resulting matrix rows to be inspected. This interaction allows for selecting additional sub-areas of interest in the matrix, by leading the analyst choosing either genes with high sensitivity (and/or percentage,degree) or by selecting genes belonging to specific diseases (highlighted in the Diseases analysis pane). Figure 7 presents an example of this behavior.

4.4 Workflow

The NEMESIS system provides the analyst with several ways of conducting her analyses: choosing the starting point considering the genes interactions...
Figure 8: The figure shows the selection of the first biomarker (top 5 intersecting D1); the cardinality of interactions to consider is strongly reduced to 384, showing evident regular patterns of interaction among genes.

overview, or starting from the set of diseases to focus the analysis on, or starting from specific genes characteristics and identifying the set of diseases that have them in common. Independently from the starting point of analysis, the available interaction means and the interconnection among the 3 visual panes allow the analyst to progressively refine the analysis results, identifying specific areas of interest and projecting them in the other panes to focus on different dimensions. The result is a fast way to reduce the cardinality of elements to consider facilitating the decision on where to lead the analysis next. Finally, the capability to relate the state of the analysis with the multidimensional similarity, expand the analysis towards the parts of the interactome not directly connected to the considered diseases, allowing the analyst to conduct the analysis beyond initial hypothesis and to better understand the characteristics of the underlying models and to formulate/validate hypothesis.

4.5 Analytics

The actual version of NEMESIS encompasses several analytics that support the exploration activities.

Off line analytics. We have computed useful derived data that is available during the explorative analysis. As an example, in order to create relevant analysis entry points on diseases, we have precomputed all the top 5 diseases (more than 12 millions of combinations, two months of running time on a server with 32 cores and 96 GB of ram) in order to select those that maximize relevant objective functions, like those that maximize the number of shared genes, or those that maximize the average sensitivity of the associated genes. Moreover we have precomputed interactome paths of increasing length to quickly switch between direct and indirect interactions. We are currently computing summary information associated with such paths, information that comes from other “networks”, e.g., we have precomputed for each pair of genes connected by a path on the interactome the number of shared diseases (used to drive the actual NEMESIS multidimensional similarity analysis). Summary information coming from multiple networks can be combined to produce multidimensional information that feeds the aggregation functions depicted on Figure 6.

On line analytics. While the user is exploring the data, it is possible to derive information starting from the current selection, like gene sensitivity, or expanding the set of genes associated with a selected disease with all genes reachable through the interactome, using paths of length one and two.

5 CONCLUSION & FUTURE WORK

NEMESIS has been informally evaluated both during its development and during two meetings with medical personnel coming from the oncology department of Sapienza Medical School and specialists in the network medicine fields. The prototype has been well received and the support to exploratory analysis in particular has been found very useful for identifying areas of uncertainty in the interactome and for hypothesizing possible interactions between genes and/or between disease modules. Suggestions for integrating clinical images related to particular diseases and capability to annotate and share analysis results have been made and we are considering their implementation in the next version.

In conclusion this paper presented NEMESIS, a novel visual analytics solution aiming at fostering the interactive visual exploration of the complex network medicine data. The proposed solution provides means for interactively exploring different facets of the complex body of data, inspecting both the data associated to topological properties of a single network and summary multidimensional information coming from other relevant networks. The summary information relies on several off line analytics. The prototype has been informally evaluated with oncology doctors, getting positive feedback on the used visualizations and high interest for the explorative visual analytics approach that has been perceived as a novelty in the field. Concerning short term future work we are currently working on the usability of the system and incorporating the suggestions raised during the informal evaluation. As a more ambitious objective we are designing and experimenting more comprehensive definition of similarity with the goal of producing a more informative and useful summary overview, combining the information coming from a larger set of relevant networks. Moreover, being the actual implementation
based on several off line analytics we are studying how to modify the analytical workflow adopting the solutions coming from the emerging field of Progressive Visual Analytics (see, e.g., (Schulz et al., 2016)).

REFERENCES


