

Bronchoalveolar Lavage Proteomics in Patients with Suspected Lung Cancer

Carvalho et. al. 2017

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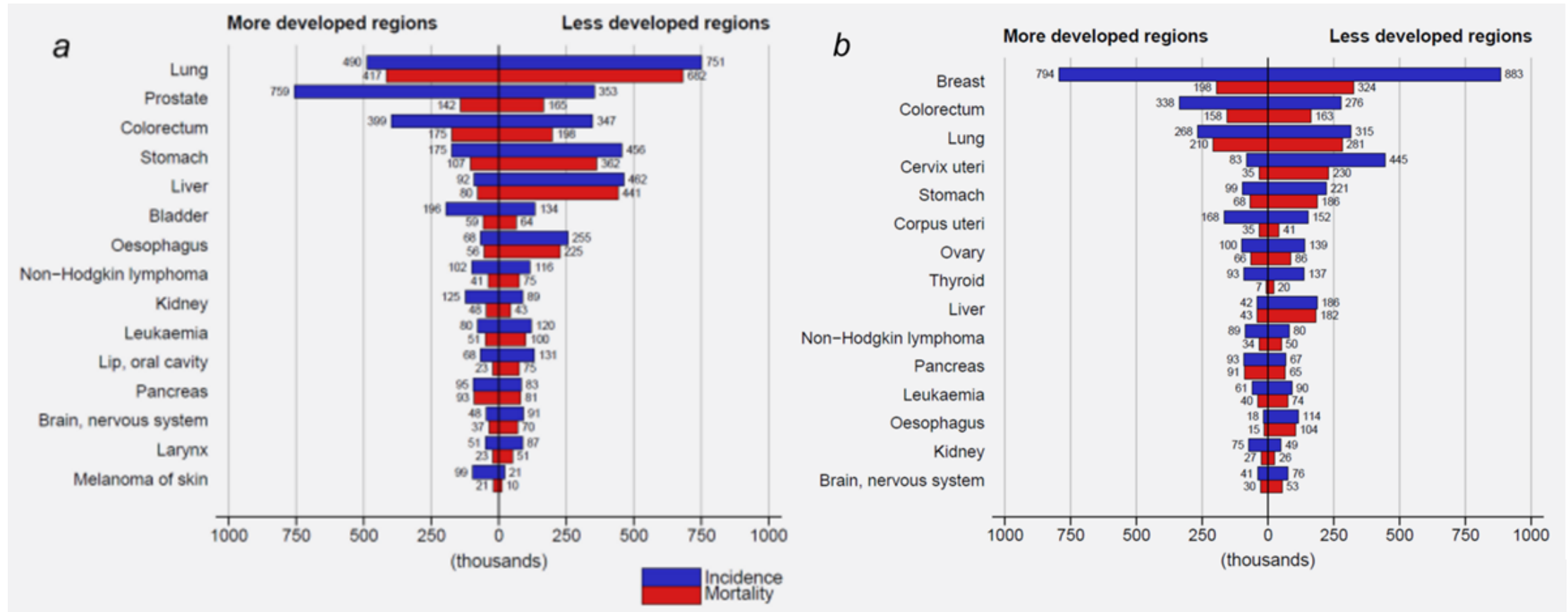
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Outline

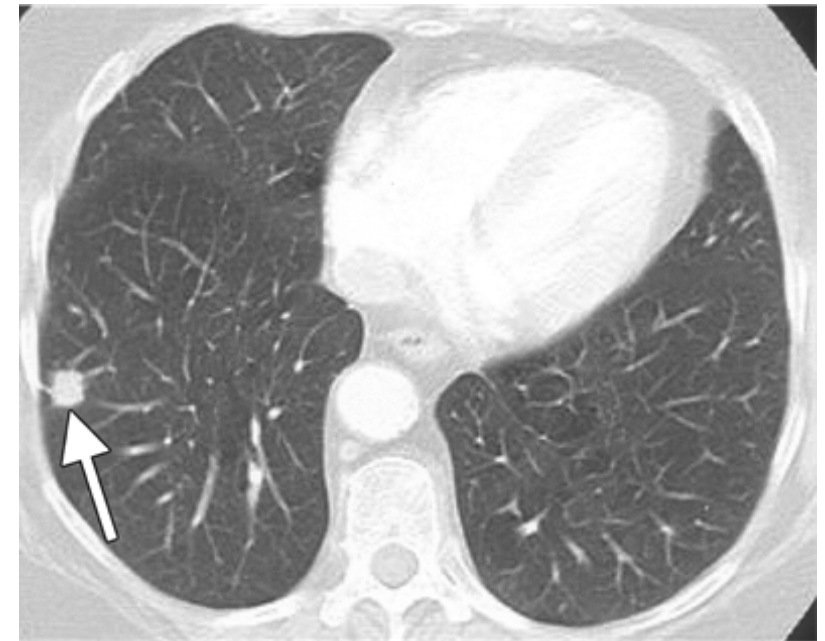
- Lung cancer and recent developments in non-invasive diagnosis
- Use of omics to identify cancerous from non-cancerous lesions
- Present study: attempt to extend methods to prospective study
- Findings and discussion about future directions
- Potential impact and caveats

Some lung cancer stats



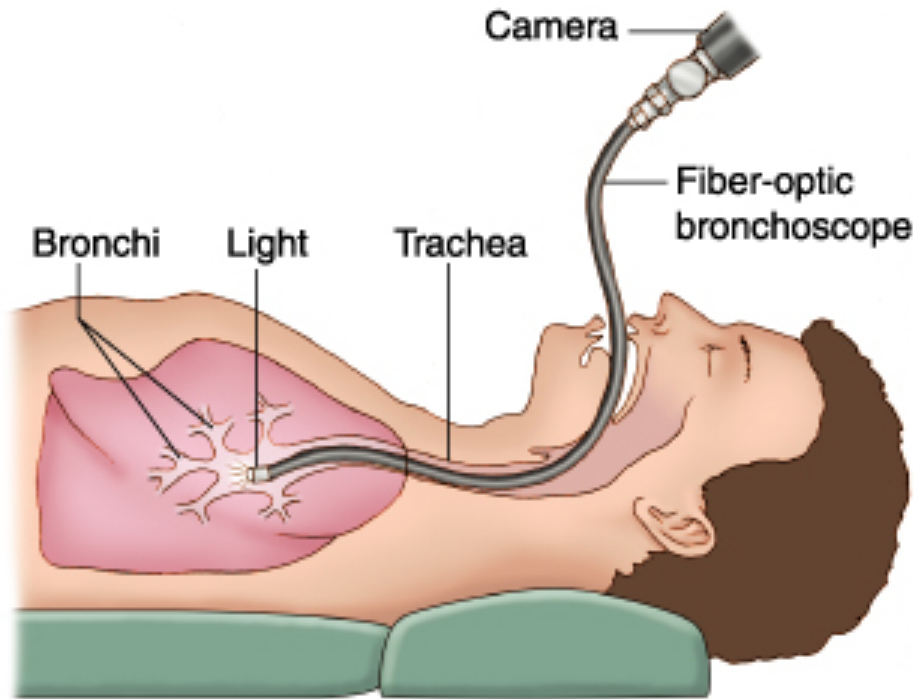
Diagnosis of lung cancer

- Advances in non-surgical diagnosis: transbronchial lung biopsy (TBLB), computed tomography (CT)
- Advances in earlier diagnosis
 - Chest radiography or low-dose CT scan
- Limitations
 - TBLB takes several samples, could be less representative
 - TBLB may miss lesions in peripheral areas of the lung
- Combining these traditional bronchoscopic diagnostics with BAL increases diagnostic rate



<http://rizwan-nurani.com/lung-cancer-diagnosis-.html>

What is bronchoalveolar lavage (BAL)?



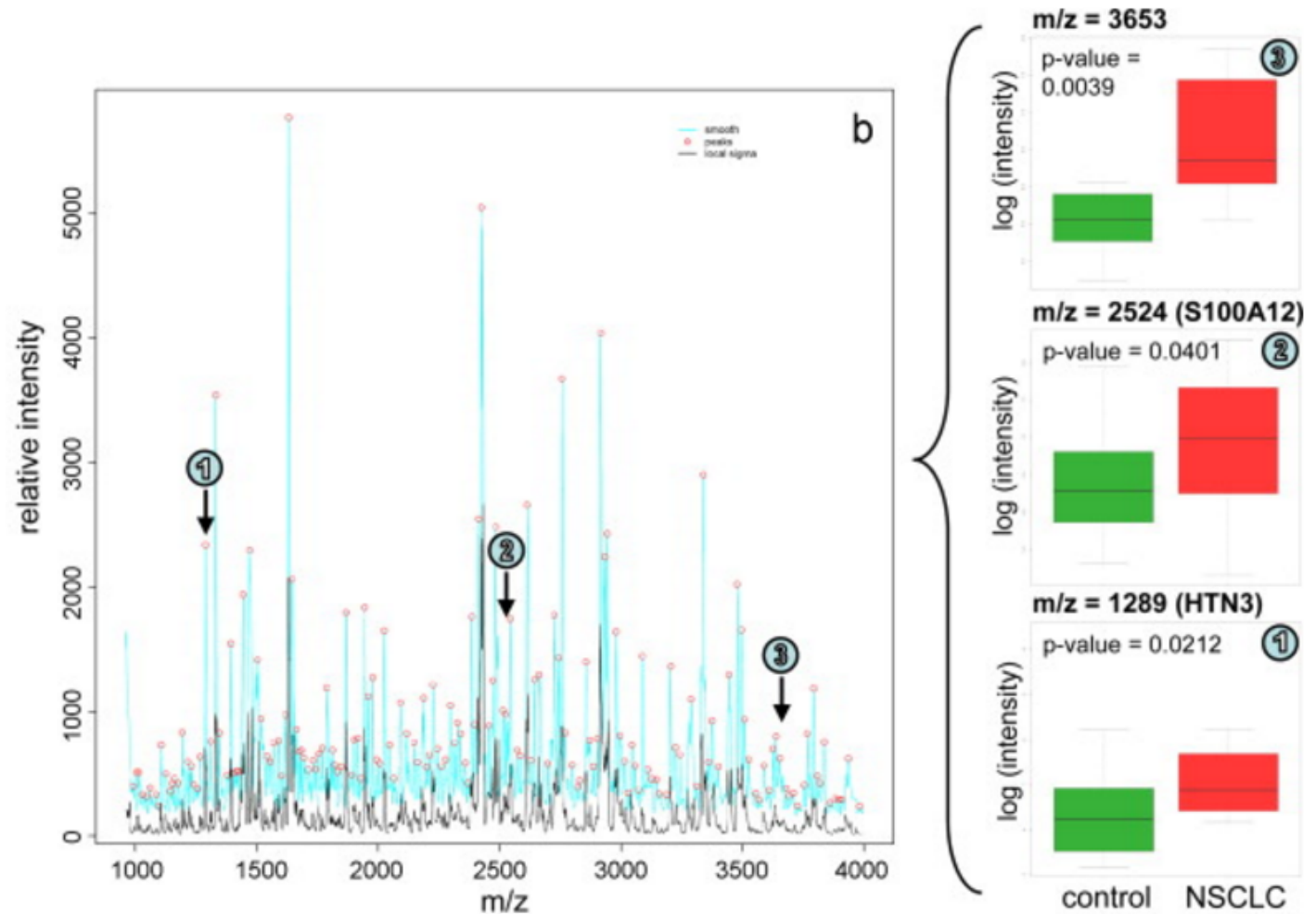
<http://www.mdguidelines.com/bronchoscopy>



<https://www.olympus-europa.com/>

Why BAL?

- Less invasive than surgery
- Can get a large amount of information from the samples
- Genomic and proteomic analysis have been established
- Highly specific although less highly sensitive



Oumeraci et. al. 2011

Objectives of this study

- Use BAL to analyze potential cases of lung cancer *prospectively*
- Identify further areas to explore for increased diagnosis rate

Study participants

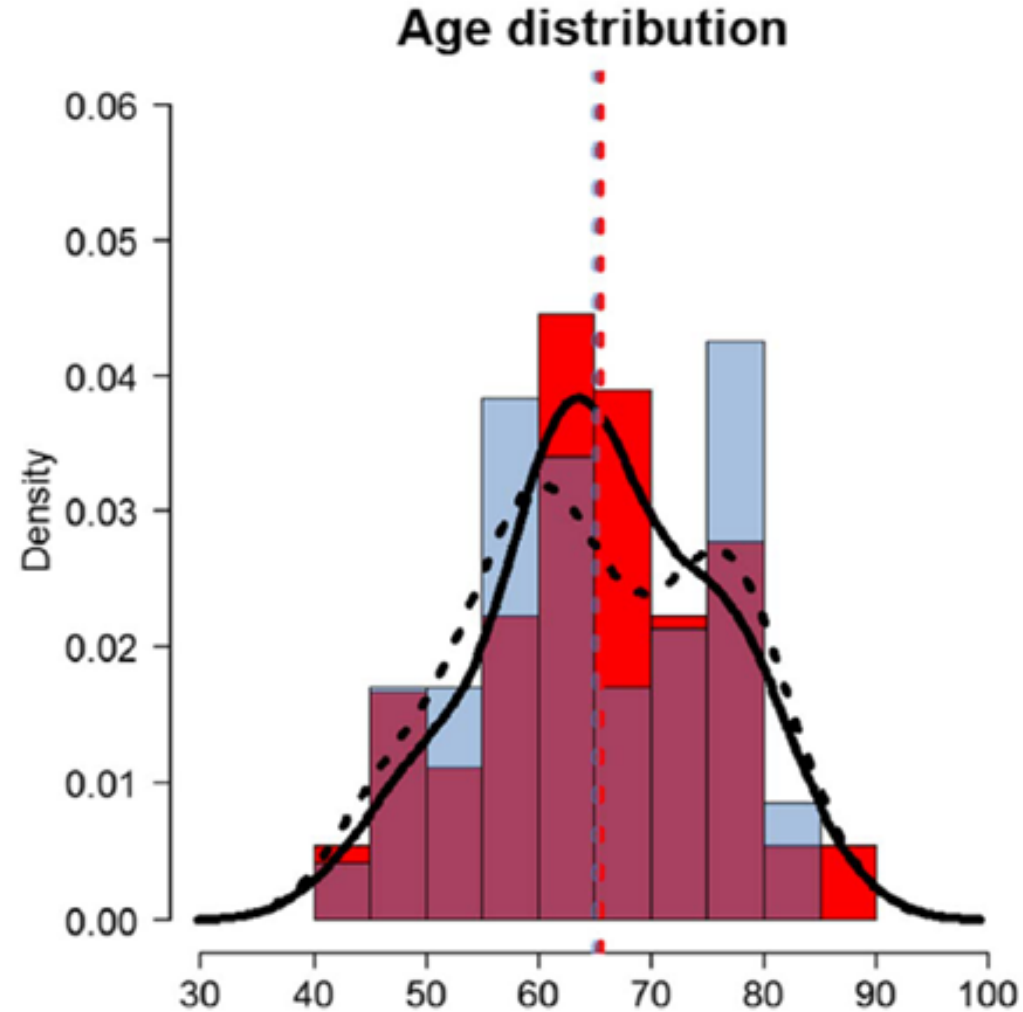


Figure 1

Study participants

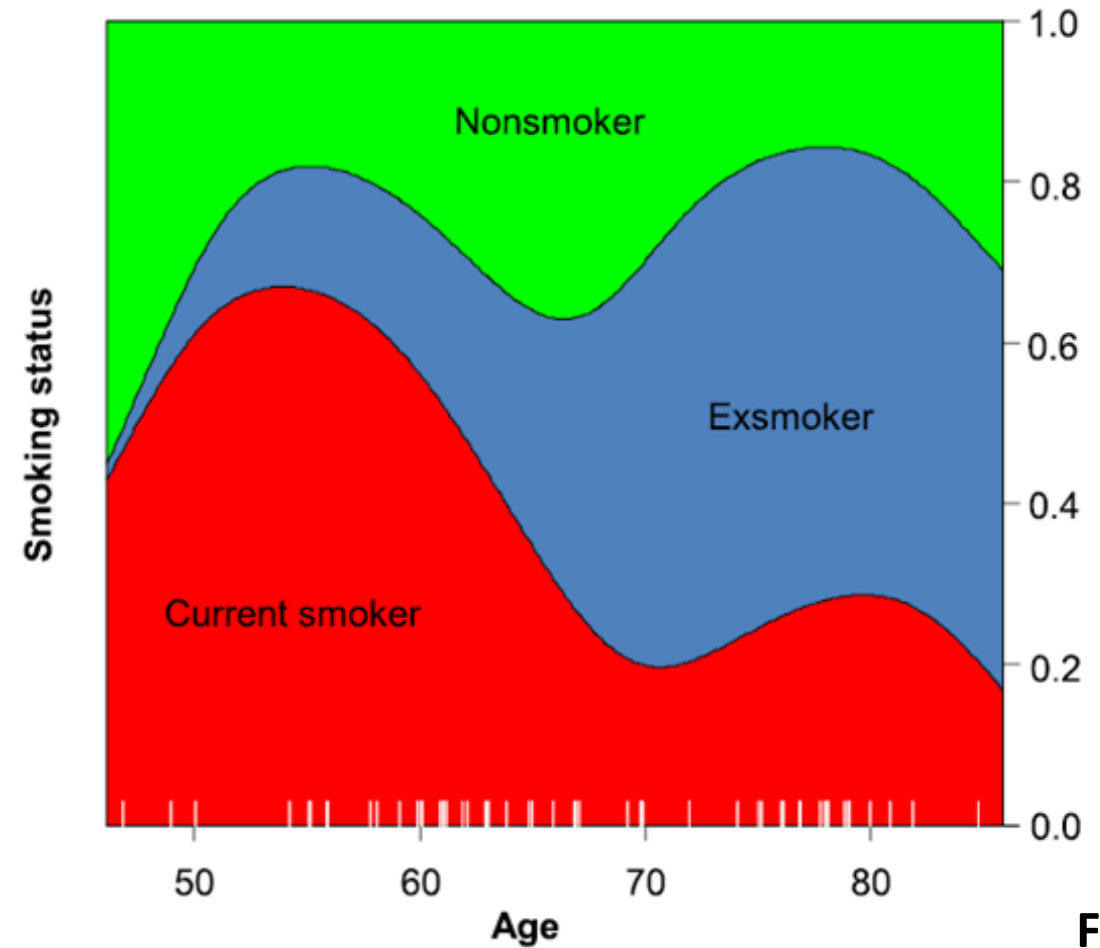
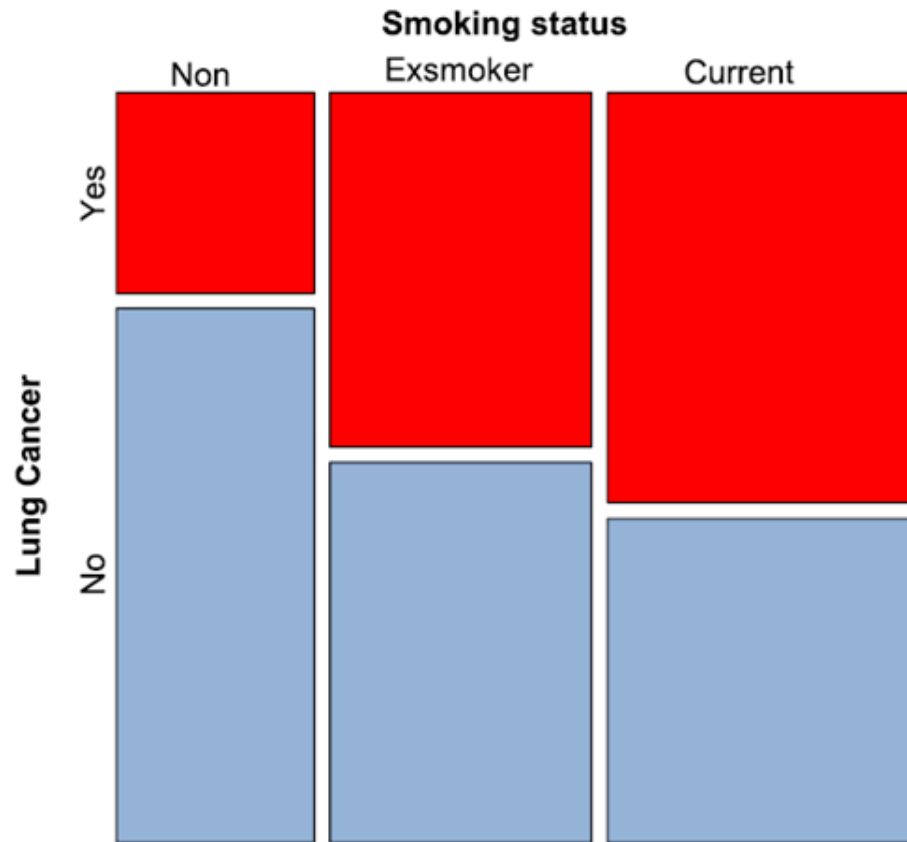


Figure 1

Study participants

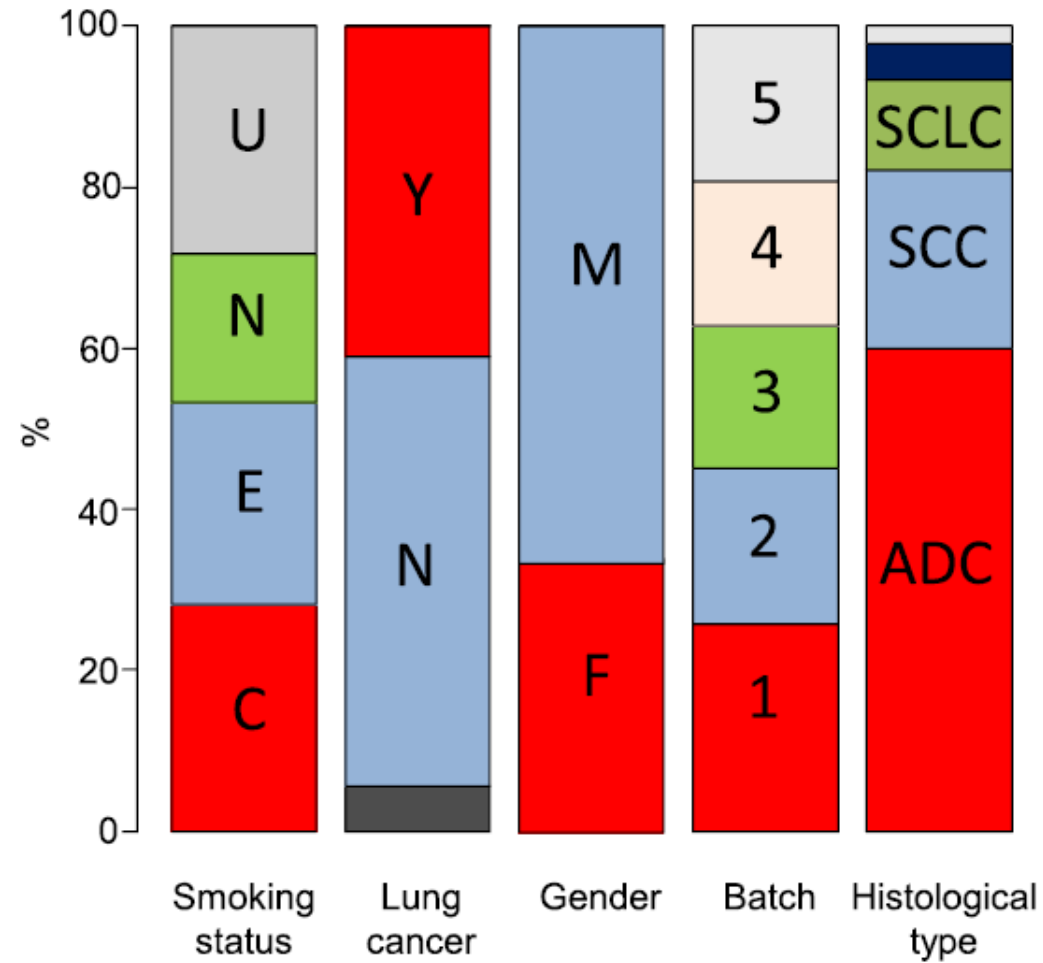
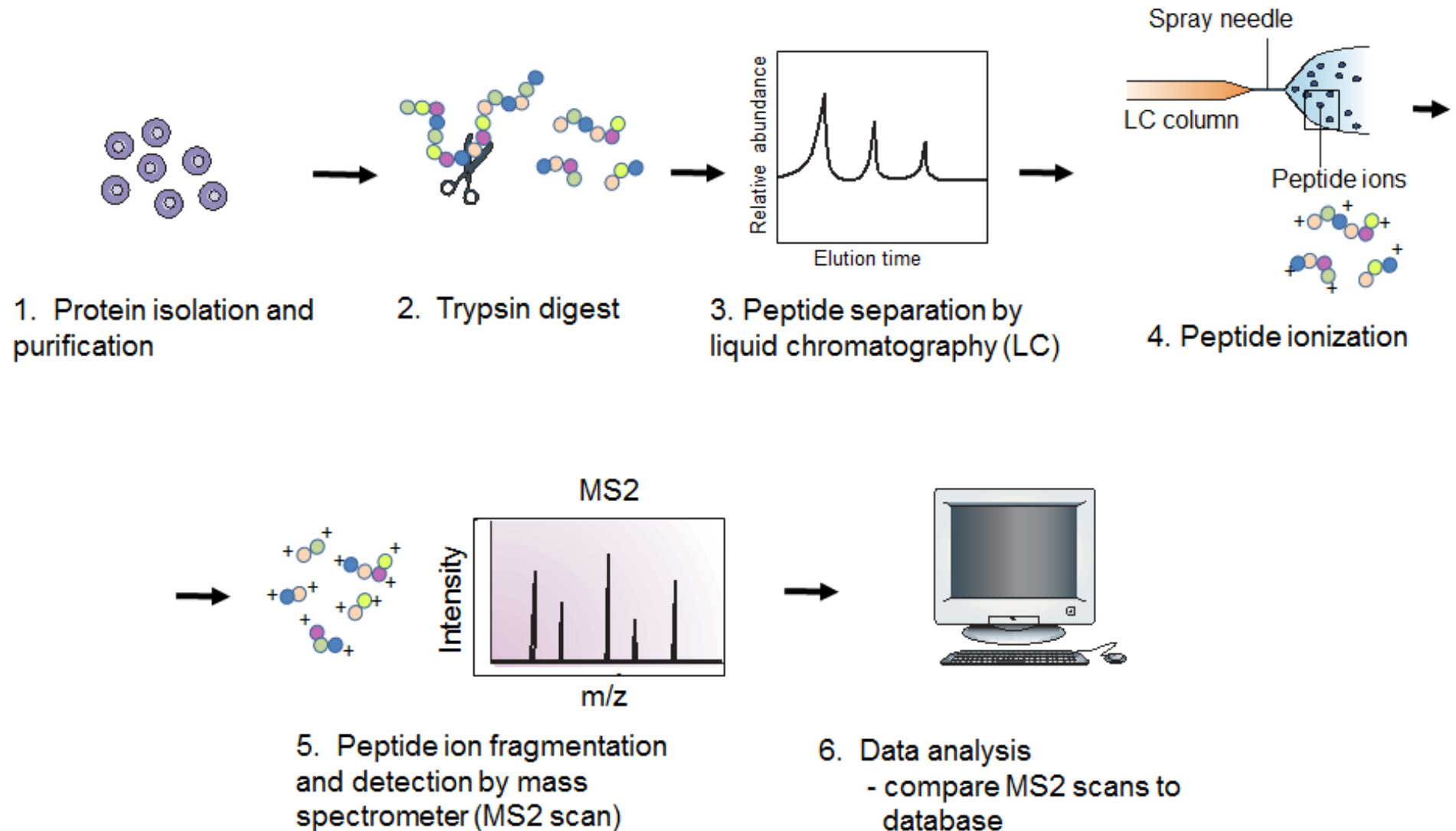


Figure 1

Liquid Chromatography Tandem Mass Spectrometry



Liquid Chromatography Tandem Mass Spectrometry

- Protein isolated from bronchoalveolar lavage fluid
- UPLC Column separation
- Tandem MS
 - Data dependent acquisition
 - Top 6 hits per scan ionized
 - 60 second dynamic exclusion
- Database matching – MaxQuant and VEMS
- Peptide/protein quantification
 - Spectral counts
 - Integration-based intensity values

Figure 2: PCA Analysis

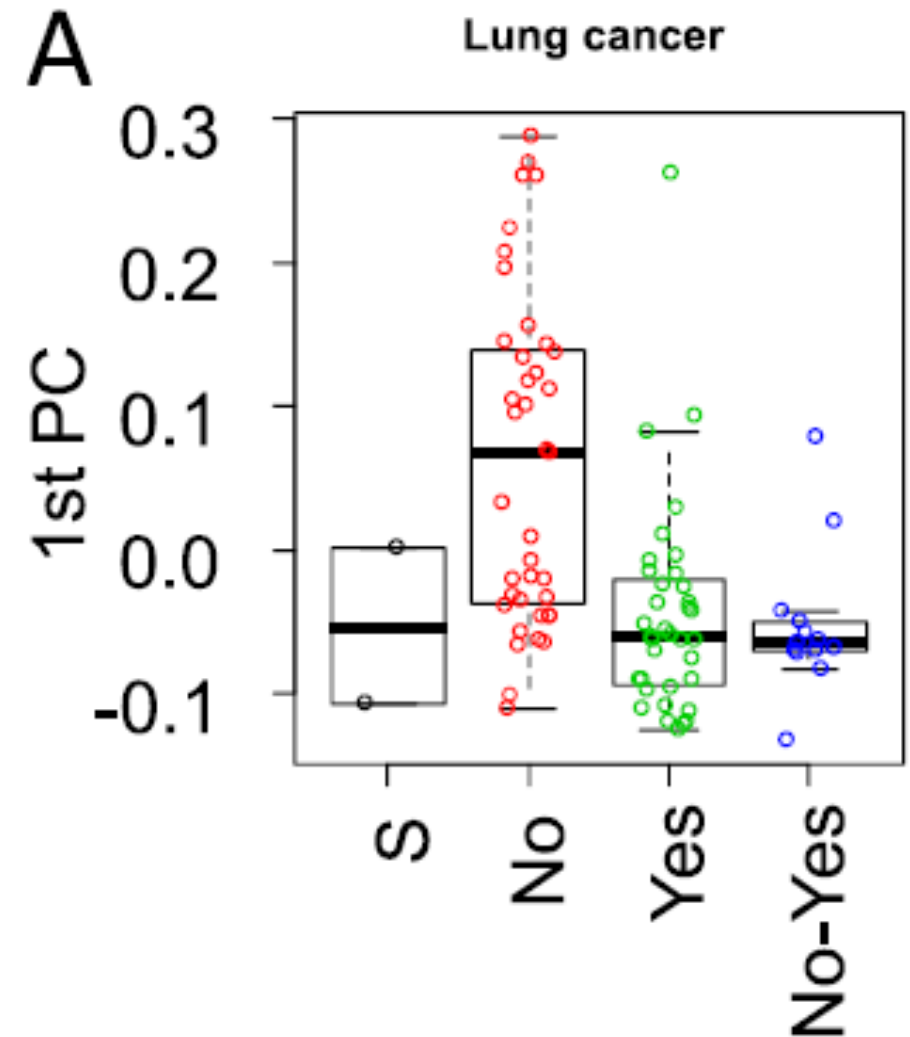
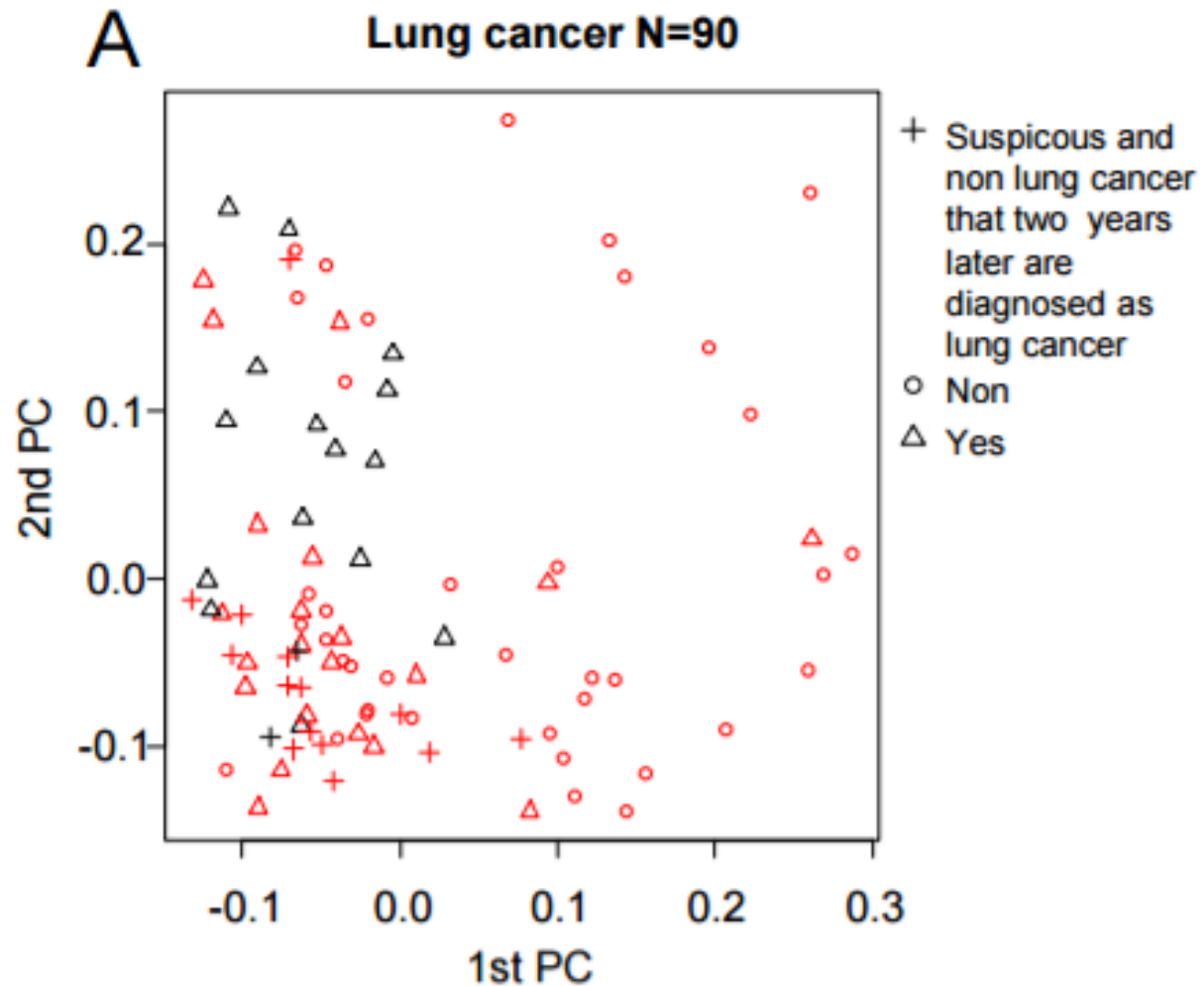


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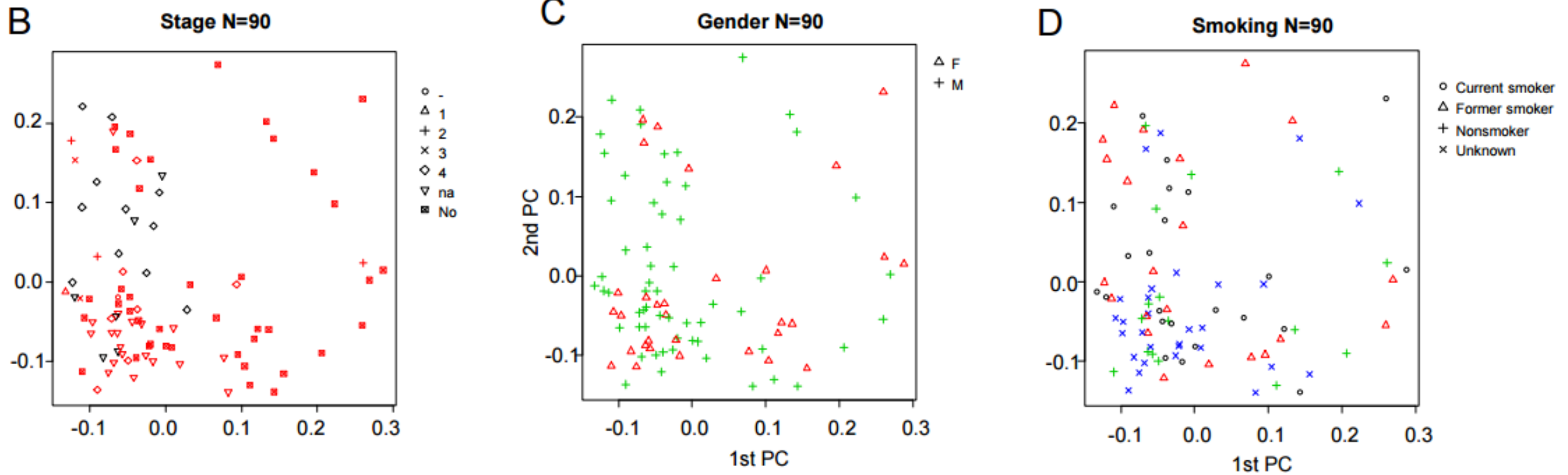


Figure 2: PCA Analysis

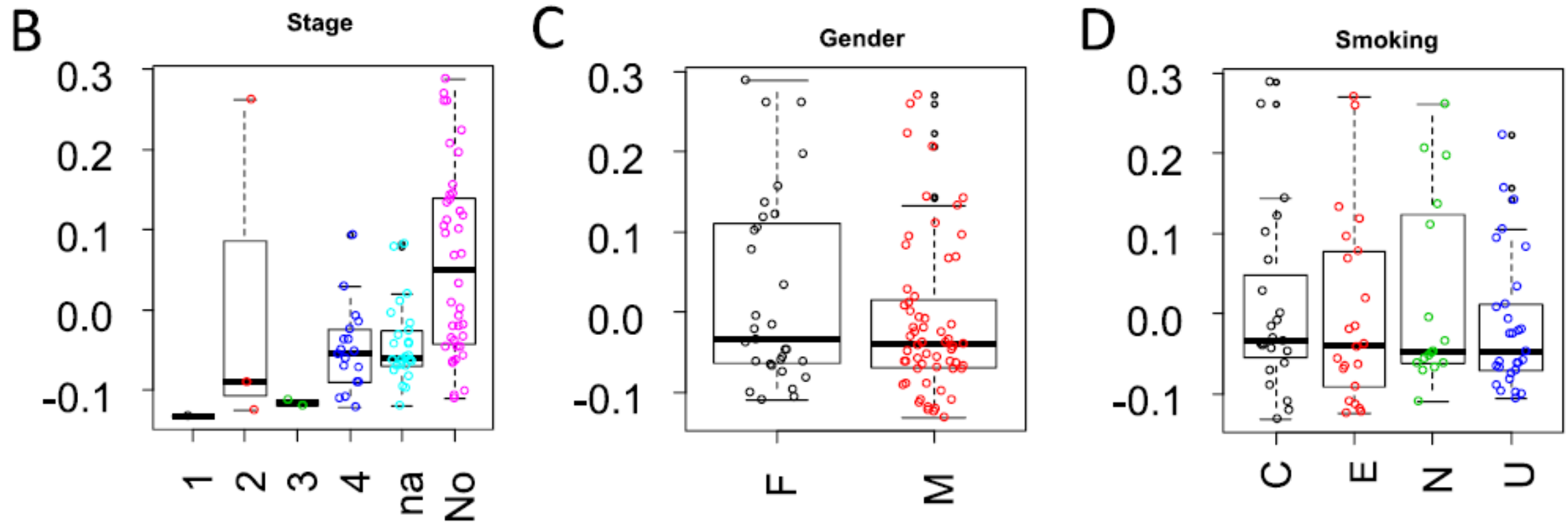


Figure S7: Hierarchical Clustering

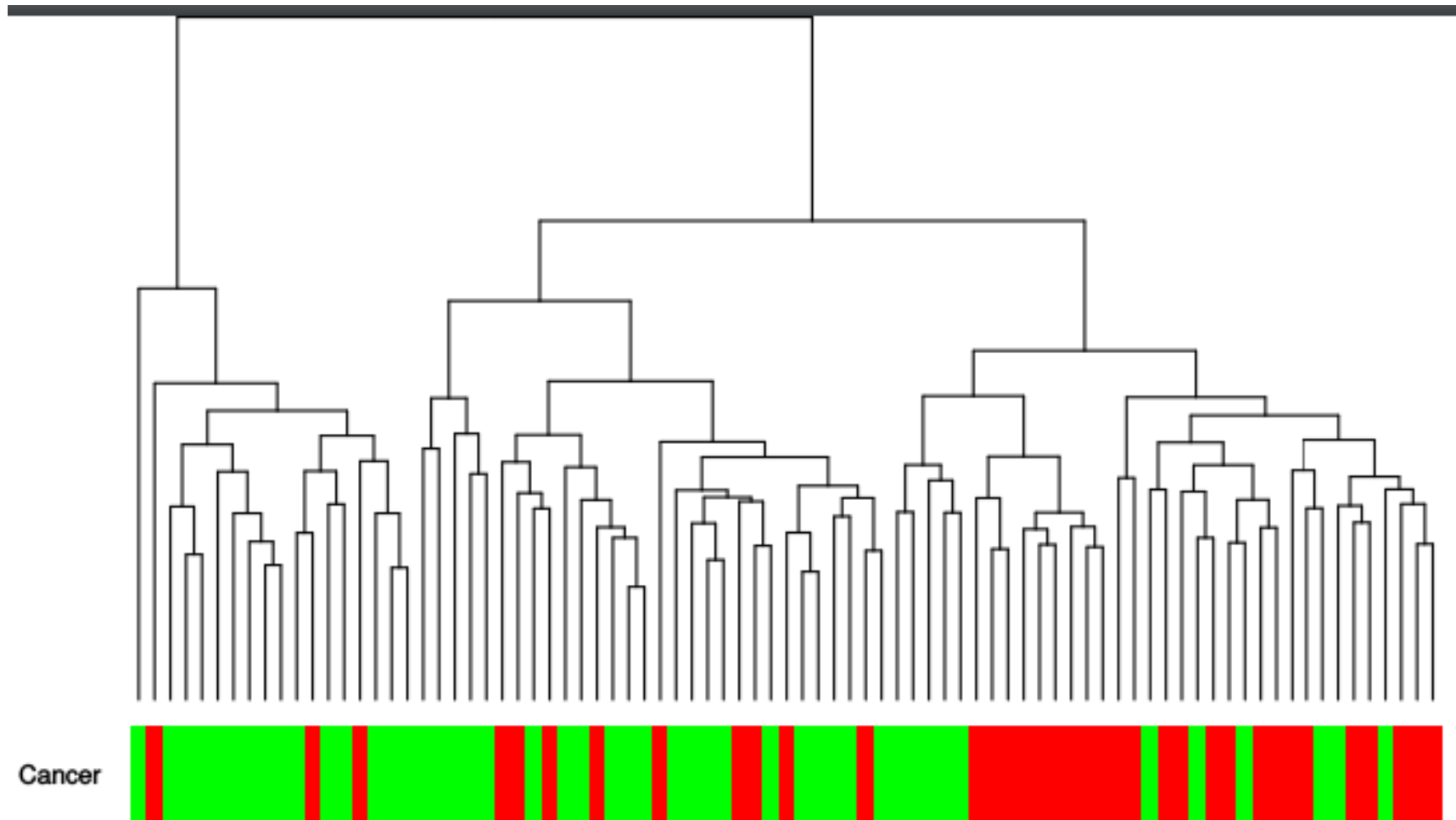


Figure 3: Boxplot of iBAQ expression values for the nine most significant regulated proteins

Method: LC-MS, Label-free quantification (iBAQ)

- Two search engines: MaxQuant and VEMS
- Filtering of proteins
 1. Benjamini & Hochberg method to decrease false positives ($p < 0.05$)
 2. > two-fold regulation
 3. Same direction of regulation in both MaxQuant and VEMS

Takeaways:

- 133 significantly regulated proteins identified
- Top 9 shown here (all are upregulated in lung cancer)
- Potential markers for lung cancer

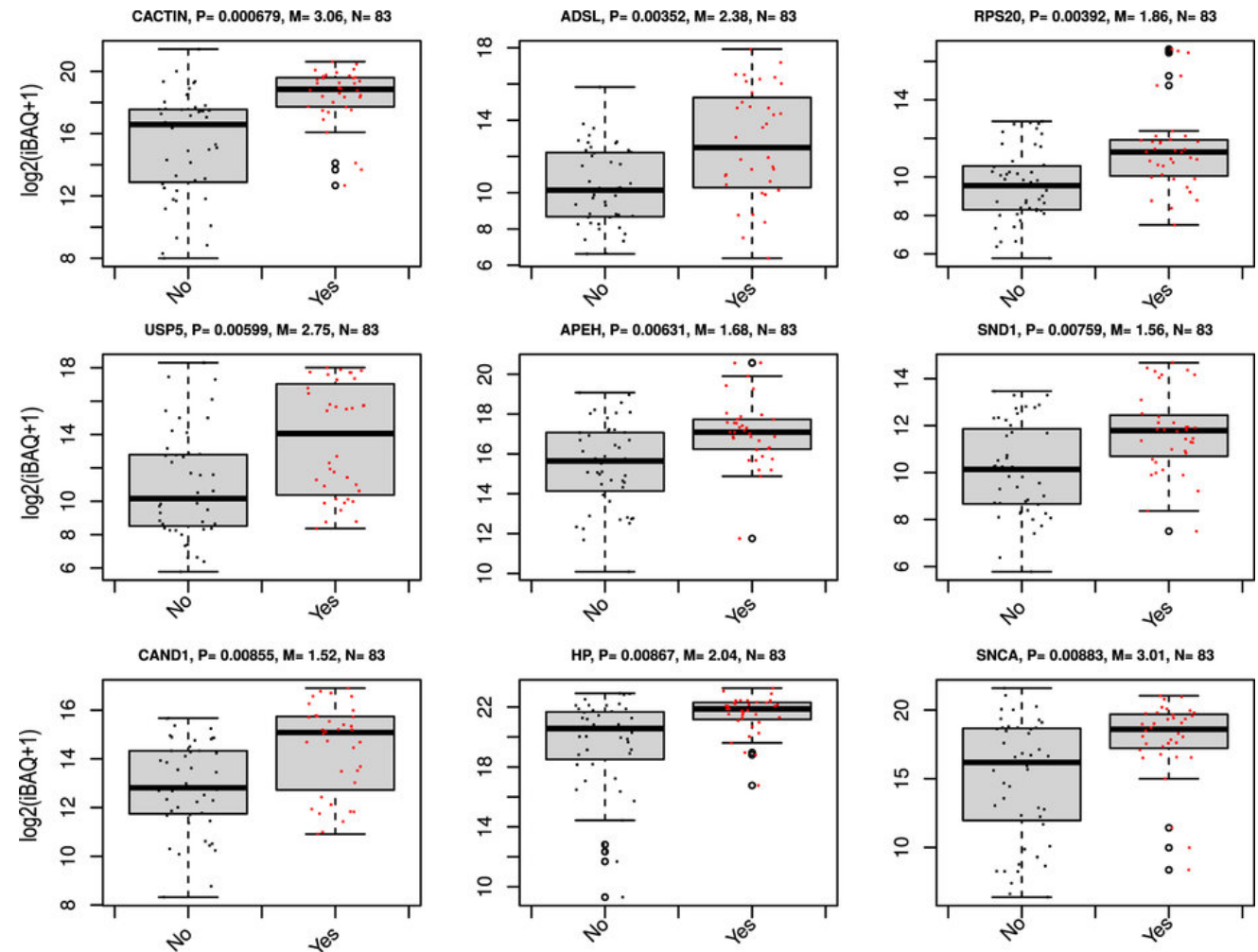
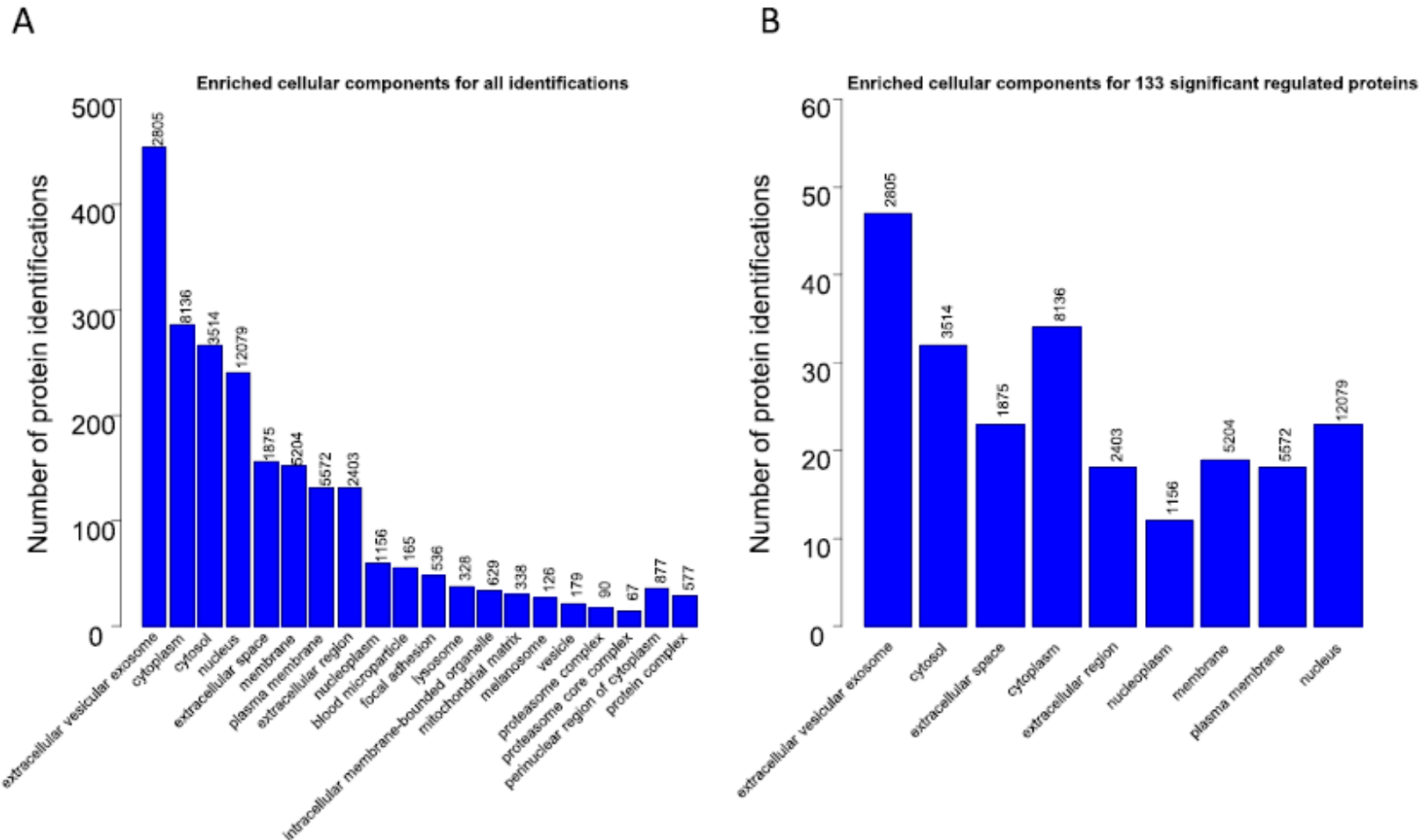


Figure 4: GO enrichment analysis of all identified proteins



Method: Gene Ontology analysis and binning of the significantly regulated proteins in their respective cellular components

Takeaway: Most of the proteins were from the extracellular vesicular exosome, and this enrichment was compared to the relative enrichment estimates, p values and number of identified proteins.

Figure S19

- Further characterization of the GO proteins

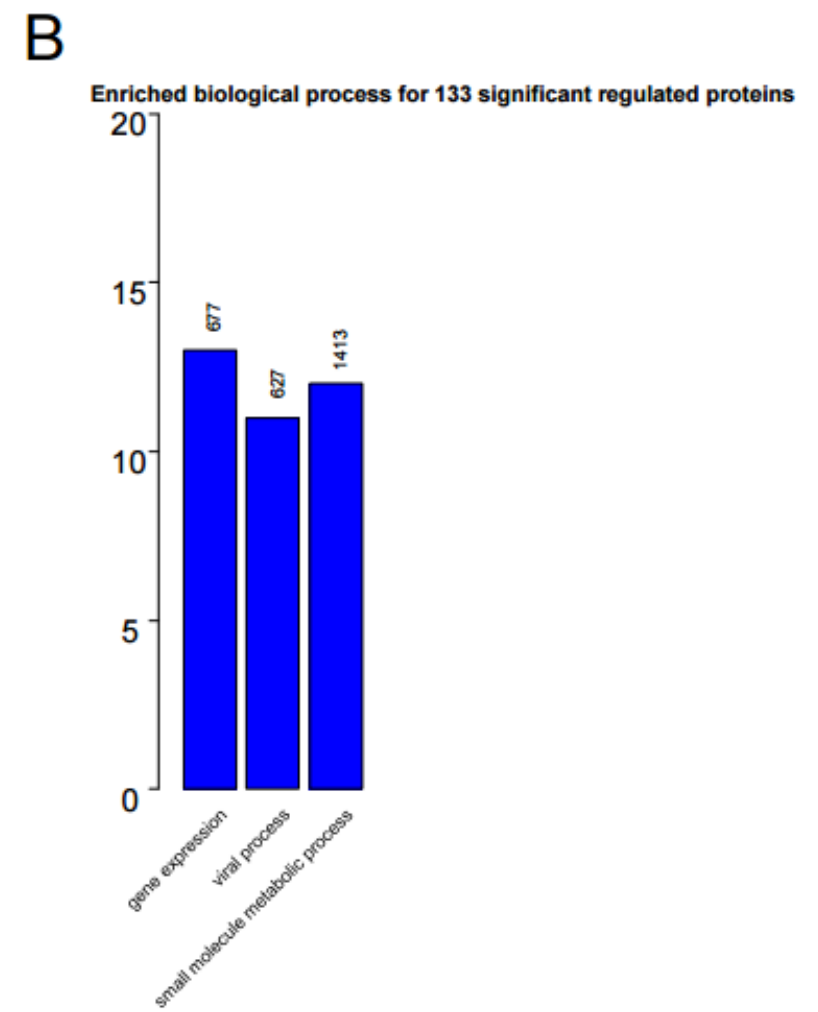
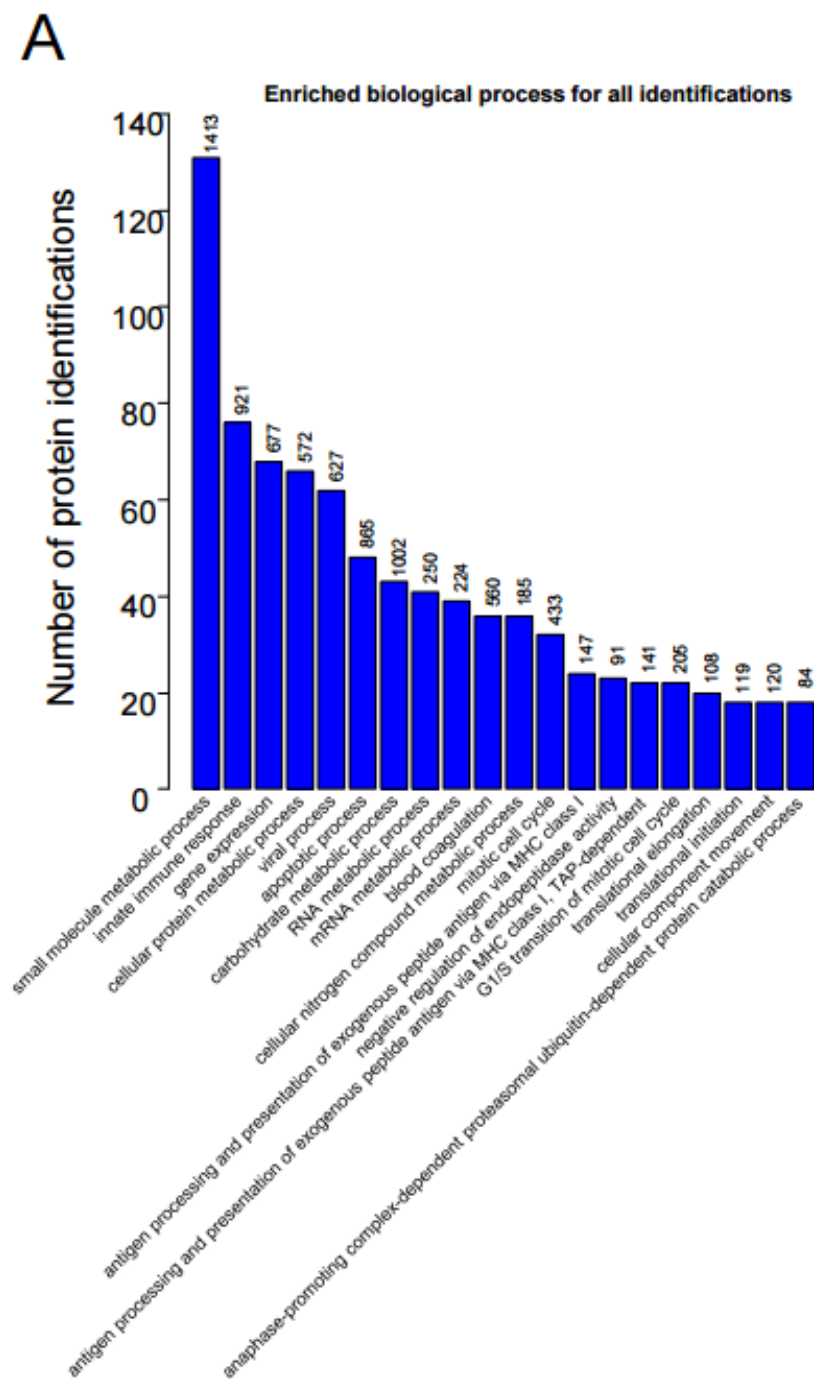


Figure 5: Overview of potential lung cancer biomarkers up- or down- regulated

Method: Heat map that compared biomarkers identified in this study to those in literature

Takeaways:

- Lack of consistency between tissue, BAL, BAL cells, and plasma
- Metabolic pathways most significant among differentially regulated genes
 - Possibility of fluorescently tagging metabolic enzyme inhibitors and using them for diagnostic purposes
- Other important KEGG pathways: spliceosome, focal adhesion, Epstein-Barr Virus infection

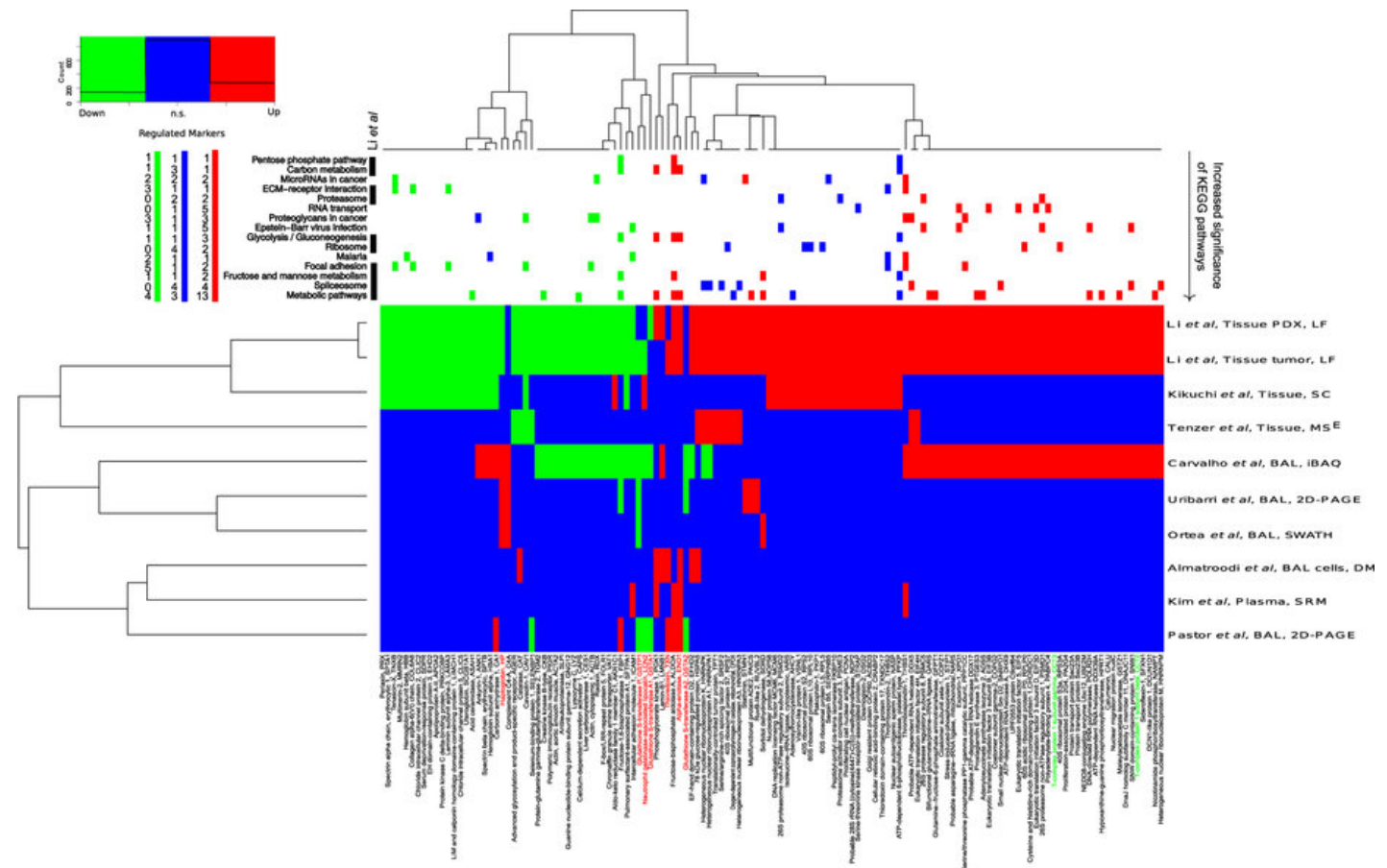
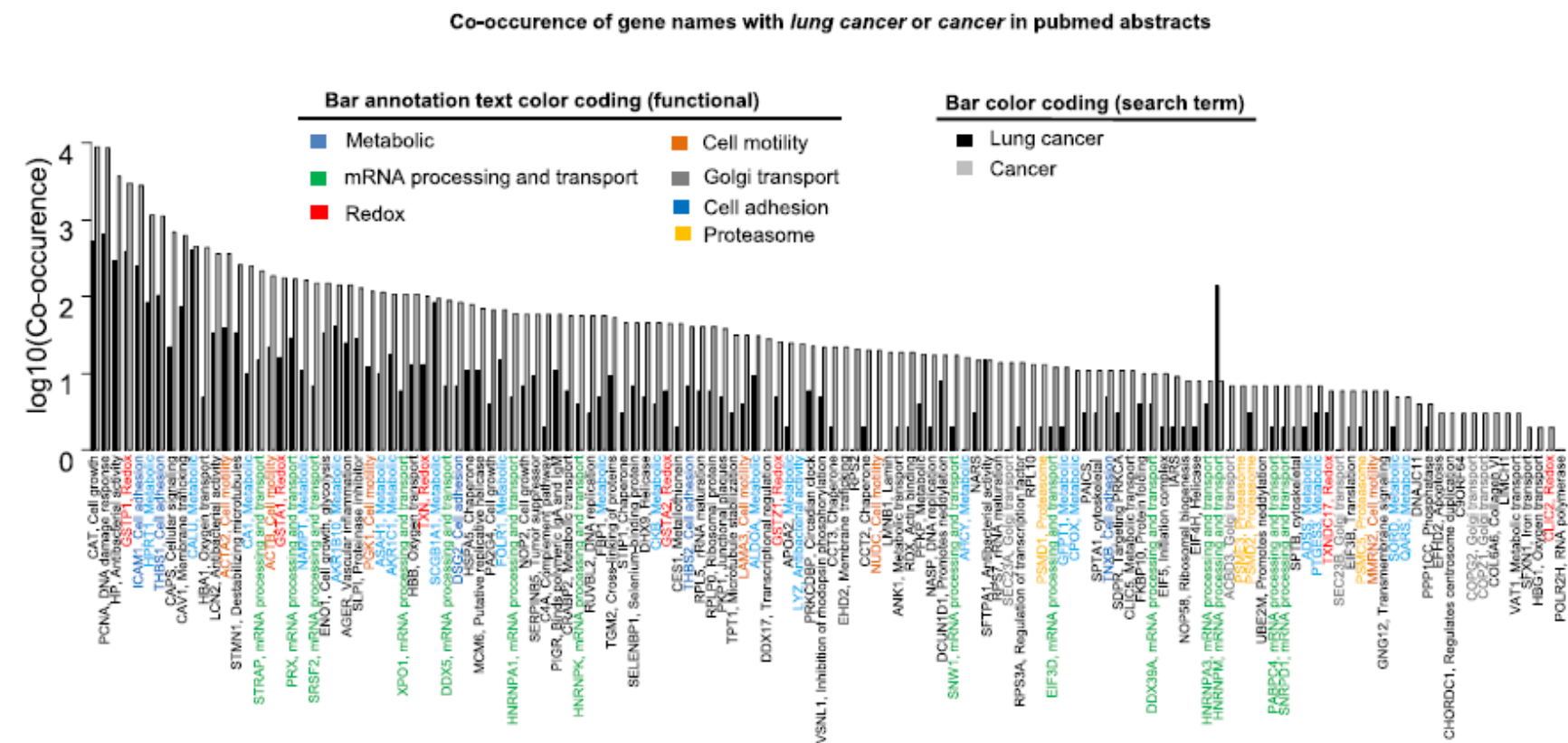


Figure 6



Takeaways: Cancer and Lung cancer have certain proteomes and certain significantly regulated proteins identified from lung cancer tissue from this study have been shown to be novel.

Strengths/Weaknesses

- Strengths:
- Heterogenous clinical population
- Moderate discriminatory ability for cases vs controls
- Potential to augment current diagnostic tools
- Weaknesses:
- Validating against difficult clinical diagnosis
- No classification models used
- Not diagnostic alone

Conclusions

- Demonstrate potential for biomarker diagnosis of lung cancer
 - Although they fall short of true diagnostic
- Some overlap is seen between their results and past studies
 - Mostly in upregulated protein
- Identification of specific cell compartments with differences between tumor and normal point to ways to refine the diagnosis rate

References

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