

BIOMARKERS ARC

Proteomics Approach to Identify Biomarkers of Metabolic Disease

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**Evans Center for Interdisciplinary Biomedical Research
Affinity Research Collaboratives (ARC) Celebratory Event
Tuesday, February 16, 2010**

On the Road to Biomarker Discovery!



Mark E. McComb

Catherine E. Costello

Richard A. Cohen

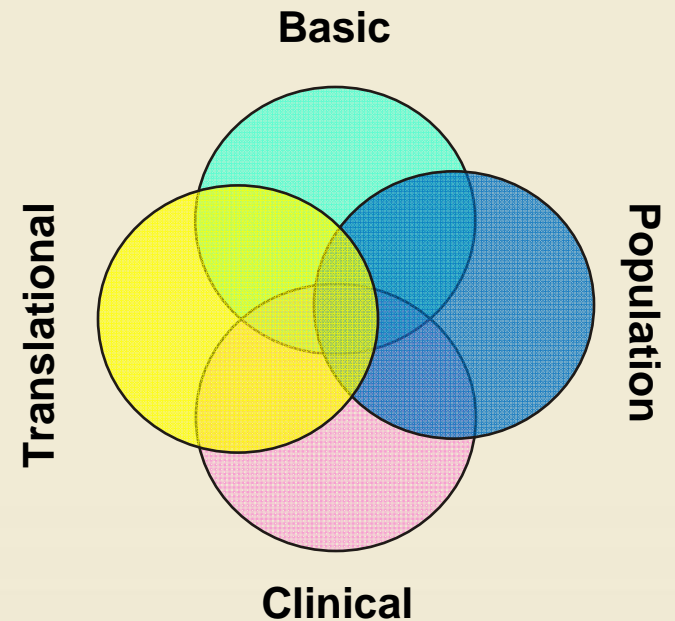
OPTMs and CVD

7+ years of successful collaboration!
Cardiovascular Proteomics Center

Biomarkers ARC: A Diverse Group of Investigators

ARC Member	Department
Mark E. McComb	Medicine
Catherine E. Costello	Biochemistry/Biophysics/ Chemistry
Richard A. Cohen	Medicine/Vascular Biology
Vasan Ramachandran	Medicine/Epidemiology
Wilson Colucci	Medicine/Cardiology
Robert Lafyatis	Medicine/Rheumatology
Joseph Vita	Medicine/Cardiology
Emelia Benjamin	Medicine/Cardiology
Daniel Levy	Medicine/Cardiology
Francis Farraye	Medicine
James Collins	Bioengineering
Susan Freed	Medicine/Diabetes-Metabolism
Jane Freedman	Medicine/Cardiology
Richard Myers	Neurology/Genome Science
M. Selim Unlu	Engineering/Nanoscience
Bennett Goldberg	Engineering/Nanoscience
Joseph Zaia	Biochemistry

Science in the Biomarkers ARC



We guarantee maximal debate on all topics of discussion!

Goals of the Biomarkers ARC

- **Foster discussion on Biomarker discovery**

- Definitions
- Models
- Approaches

Questions > Answers

- **Obtain pilot project data**

- Answer questions on a project basis
- Preliminary data for NIH funding

Biomarker Models of CVD?

- **Correlate results between different models**

- Mouse to human
- Genomics vs. proteomics

Proteomics?

- **Cross model comparisons**

- Different groups at BUSM
- Diabetes vs. PAH

Meta-Analyses?

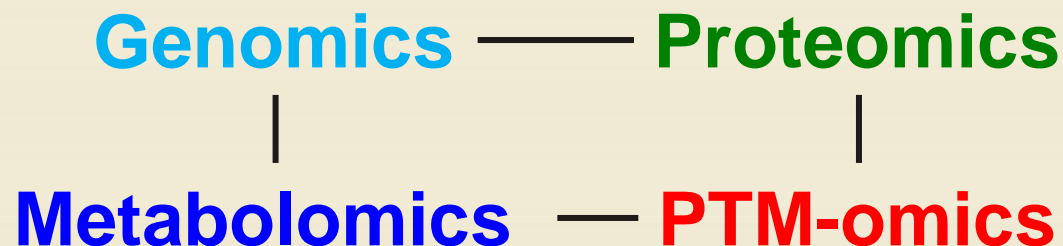
Elucidate and determine a panel of specific plasma markers for CVD

Biomarkers: Debatable Definitions

- Biomarkers constitute any multiplex of measurements that specifically detects normal or diseased physiology
- Biomarker come in 3 flavors:
 - early detection of disease
 - determine the effects of treatment
 - determine short and long term prognosis

Screening → **Diagnosis** → **Prognosis**

- Biomarkers can be defined through different means



Biomarkers: A Process of Discovery

- The road to biomarker discovery is well studied and typically involves 3 discrete steps: discovery, verification and validation.

Discovery → **Verification
Qualification** → **Validation**

Model → **Cohort** → **Population**

10s → **100s** → **1000s**

Many → **Few** → **Select**

During the discovery and validation processes incite must be gained into the understanding of the molecular mechanism of the disease

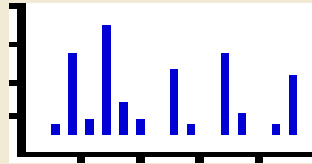
Metabolic Disease + Proteomics = Biomarker Discovery

- **Metabolic Disease**
 - Diverse area of research at BUSM
 - Weak genomic component
 - Strong environmental link
 - Correlation with oxidative stress
- **Proteomics within the Center for Biomedical Mass Spectrometry**
 - Cardiovascular Proteomics Center
 - Mass Spectrometry Resource
- **Hypothesis: metabolic changes in diseased tissue**
 - may be detected by changes in plasma protein abundances
 - are betrayed by leakage of tissue-specific proteins
 - result in specific post-translational modifications
 - correlate with abnormal tissue metabolism

*Specific and systemic protein and PTM biomarkers exist simultaneously
MS + proteomics offers a powerful means to characterize these changes simultaneously*

Cardiovascular Proteomics Center

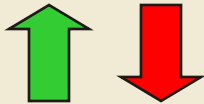
Protein ID via database searching



Protein Quantitation
MS and other methods



Measurement of
differential expression



Proteomics

Characterization of PTMs



Correlation
to genome



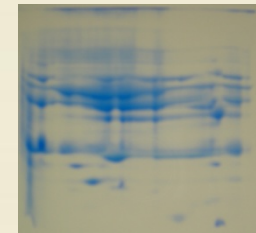
Correlation
to phenotype



Advanced
computational
analysis

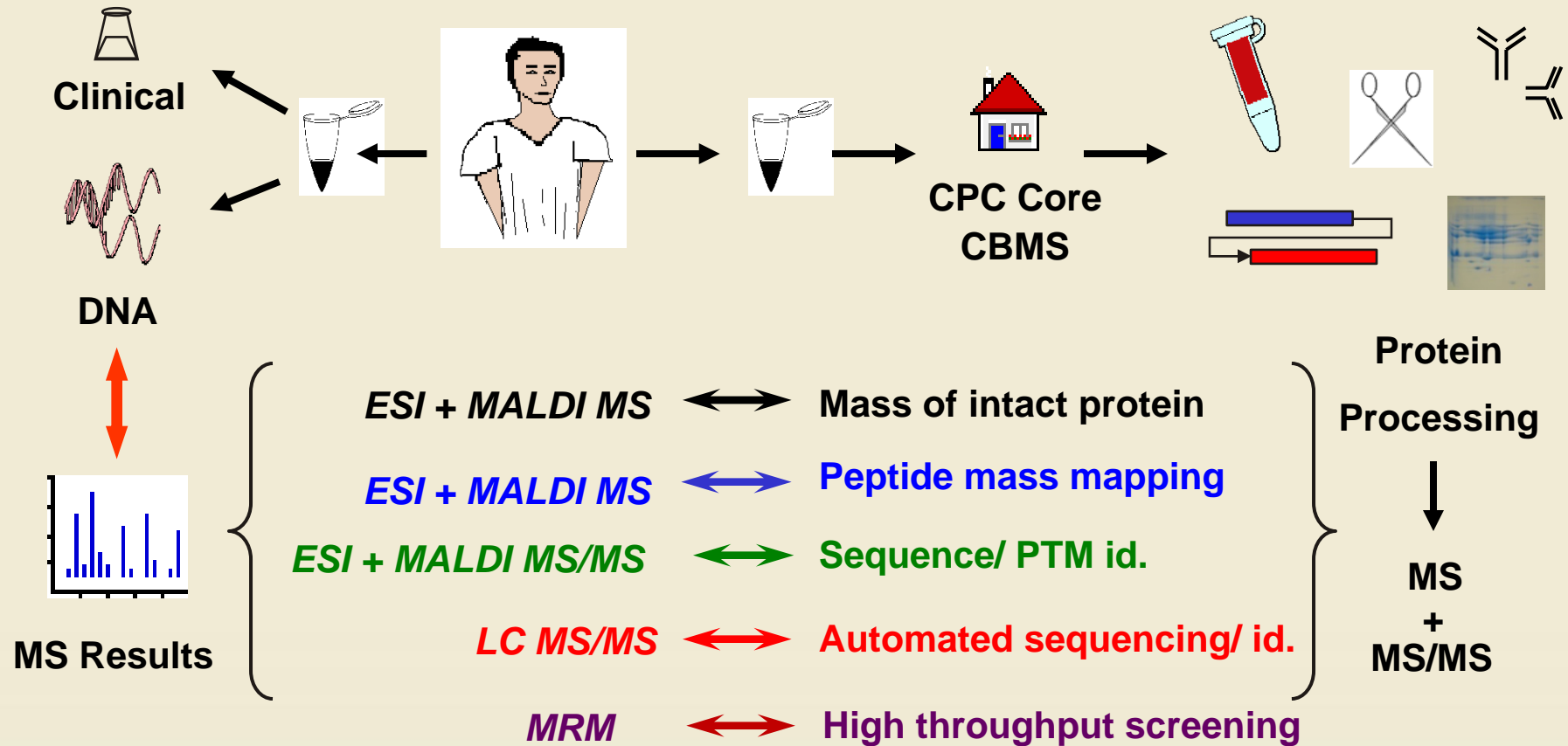


Multi-dimensional
separation/ fractionation



*Proteomics has evolved from protein identification to encompass
a large number of fields of fundamental and applied sciences*

MS Based Proteomics: A One Size Fits All Methodology



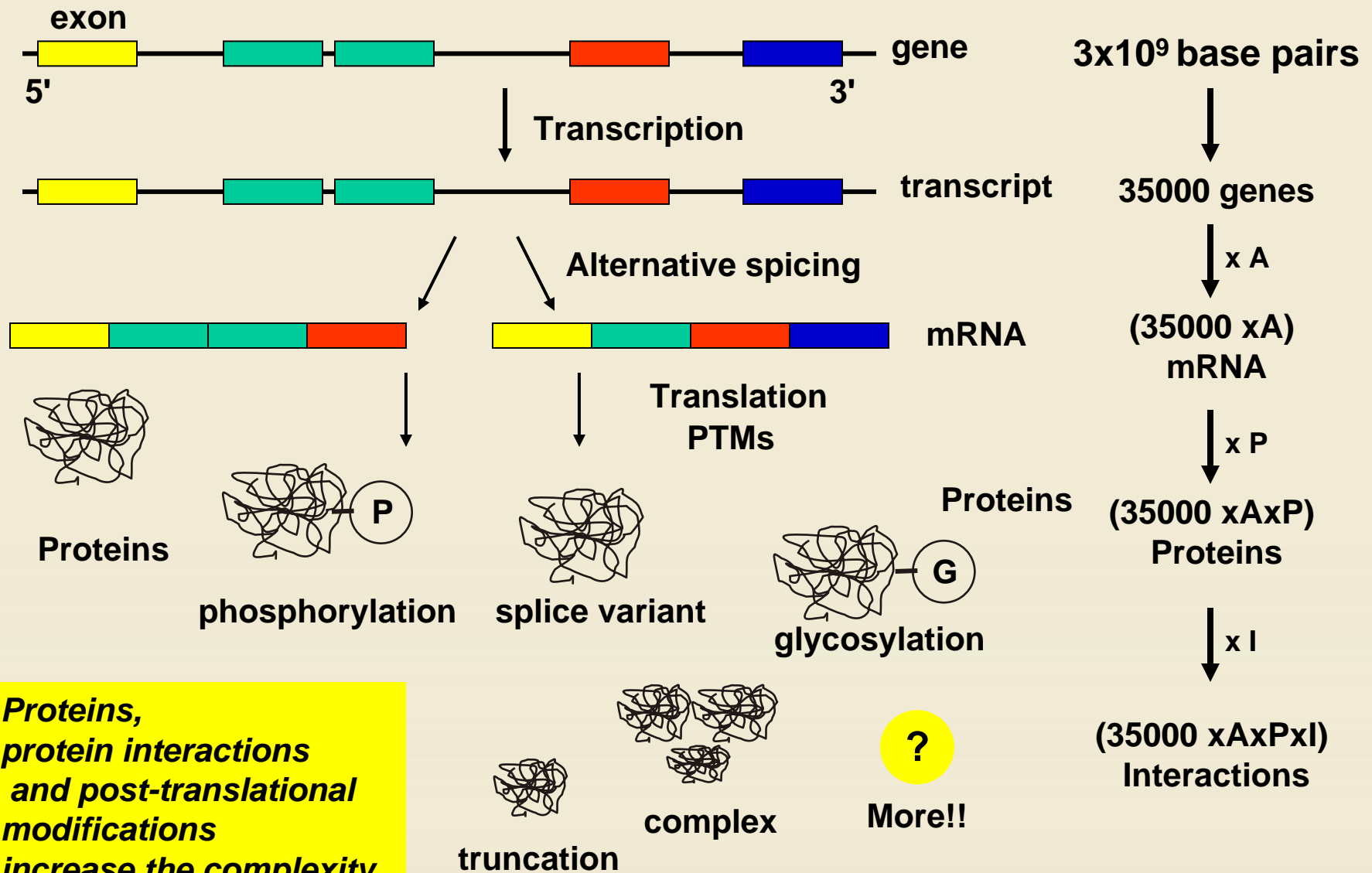
Different approaches yield increasingly accurate results

Speed + Sensitivity, direct protein characterization

Post-translational modifications and unambiguous sequence determination

Correlate MS and MS/MS data with other analysis

From Genes to Proteins



Proteins, protein interactions and post-translational modifications increase the complexity of the proteome.

J. Mass Spectrom. 36, 1083-1091, 2001
Mol. Cell Prot. 3, 311-326 (2004)

Discovery Based Plasma Proteomics: Tread Carefully

Experimental Design

Sample Collection

Storage

Abundant Protein Removal

Pre-fractionation

Secondary fractionation

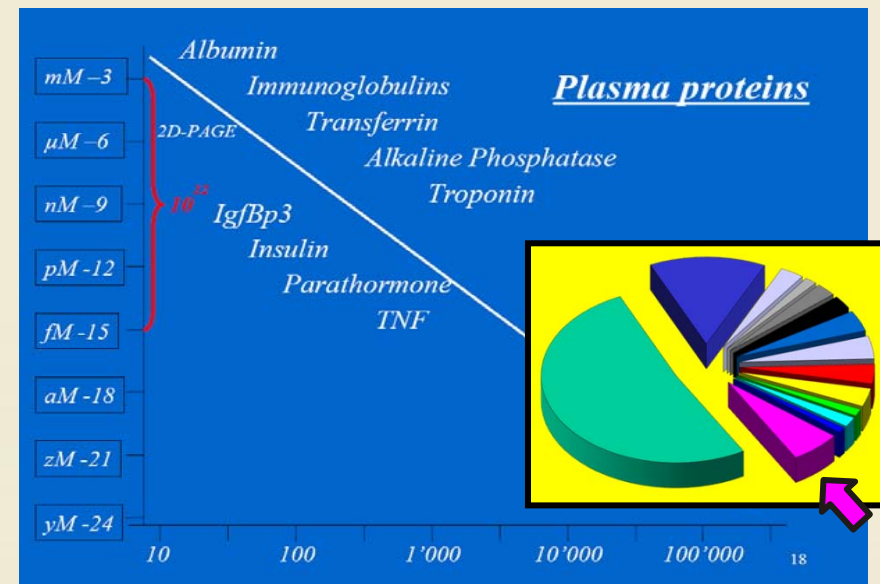
2D separation

Quantitation via Abs/FI/Ab

ID via MS

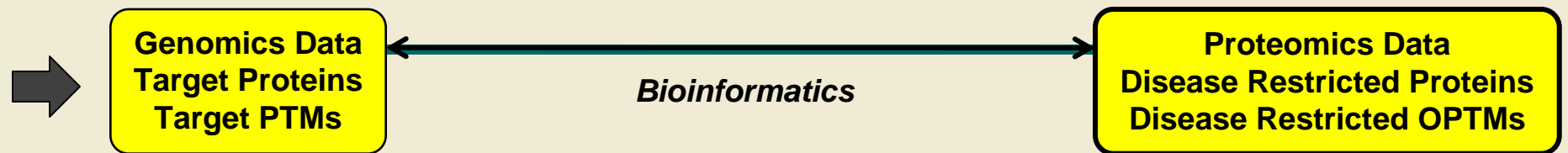


>10,000 proteins over $10^{-3}M$ to $10^{-12}M$ expression



*Plasma: an exceptional problem due to the dynamic range/diversity of proteins
Strict attention to detail must be made in all aspects of experimental design
Post discovery, other methods of confirmation and validation are mandatory*

A. Bioinformatics: Specific Proteins / Targets

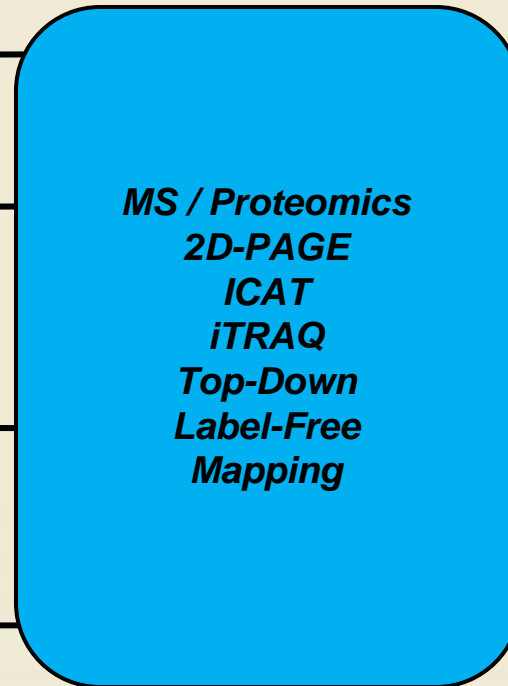


B. Discovery: Mouse Model

Tissue Extracts

Plasma Profiling

MS / Proteomics



Confirm Protein / PTM
Novel Protein / PTM

Confirm Protein / PTM
Novel Protein / PTM



C. Discovery: Human Model

Plasma Extracts

Marker Protein / PTM Panel

D. Confirmation: Human Model

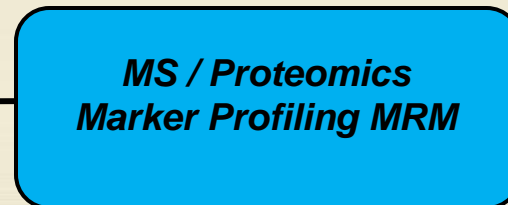
Plasma Extracts

Biomarker Characterization

Confirm

E. Validation: Human Cohort

Plasma Extracts



Functional Characterization
Biomarker Validation

Validate

Disease Specific Biomarkers

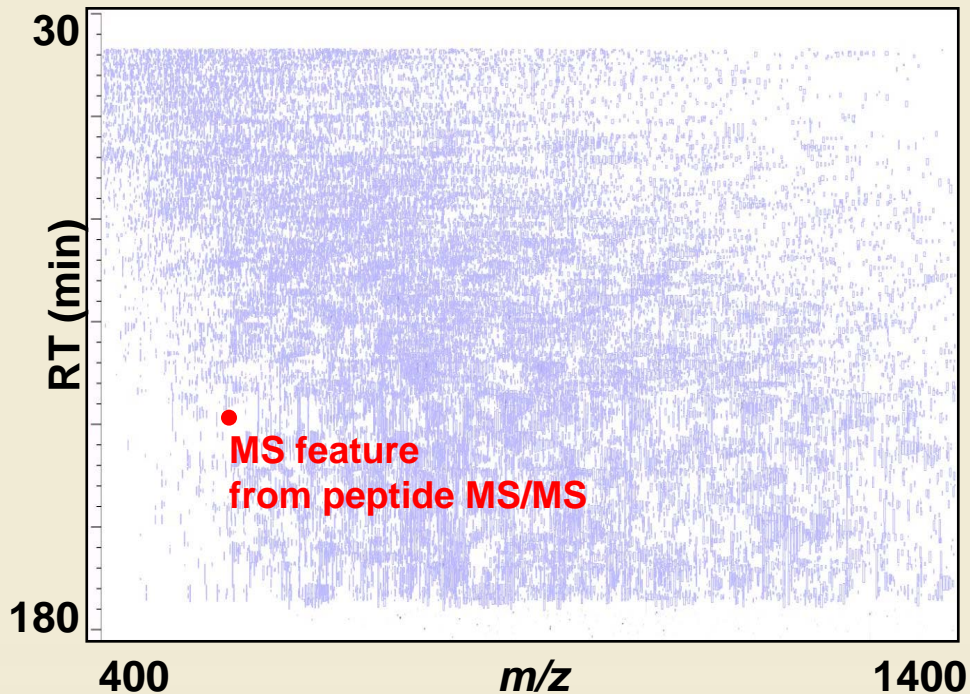
Pilot Projects: Human Models of Metabolic Disease

- **Bed rest and diet induced insulin resistance (Vita/Cohen):**
 - 40 subjects: 20 control, 20 treated with anti-inflammatory
 - +/- salsalate: inhibitor for NFkB and insulin resistance
 - Samples before and after 5 days of bed rest
- **Heart failure in mice to men (Colucci):**
 - 80+ subjects: 40 control, 40 with heart failure
 - Paired samples: de-compensation, re-compensation
 - Transgenic mouse: overexpression of growth factor driven G-protein (Gq-mouse) shows significant changes in plasma peptides
- **Scleroderma induced pulmonary hypertension (PAH) (Lafyatis):**
 - Patients with scleroderma +/- PAH and controls
 - Microarray data mRNA on blood monocytes shows upregulation of serum biomarkers including inflammatory cytokines (IL-6, TNF- α)

*Can we correlate proteomics with phenotype, genomics and other markers?
Underlying theme of metabolic disease: can we see a correlation between models?*

Pilot Project: Gq-Mouse Model of Heart Failure: n=3 across 2 groups

Label-Free LC-MS/MS Differential Analysis

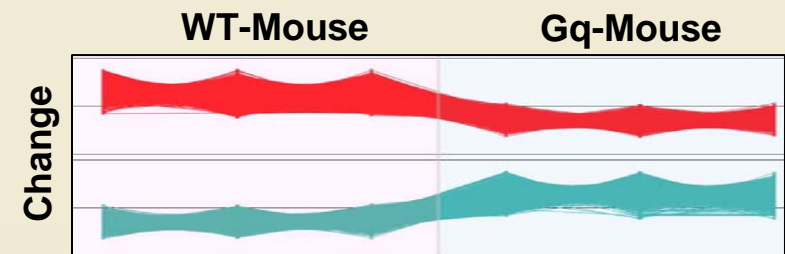
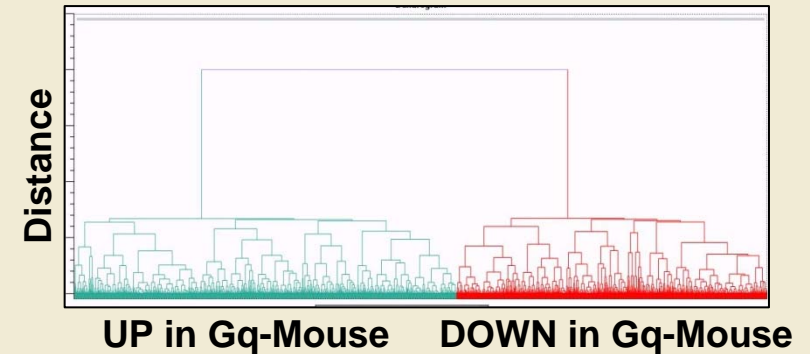


1° data analysis

30,292 Features: 2,584 Anova <0.05

10,120 MS/MS: 9,521 peptides, 1,363 proteins

Clustering and Change in Features



Peptide expression

364 (232) UP, 525 (289) DOWN

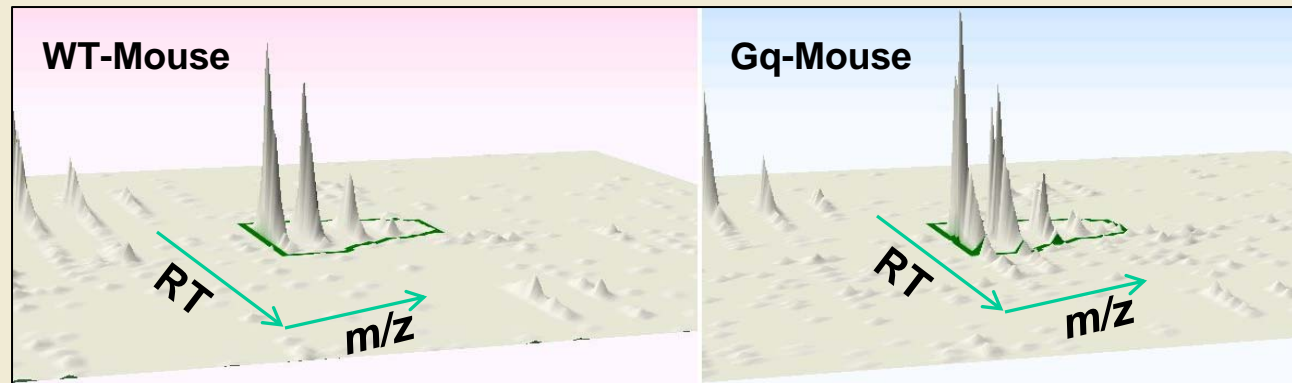
Protein expression

95 (97) UP, 119 (34) DOWN

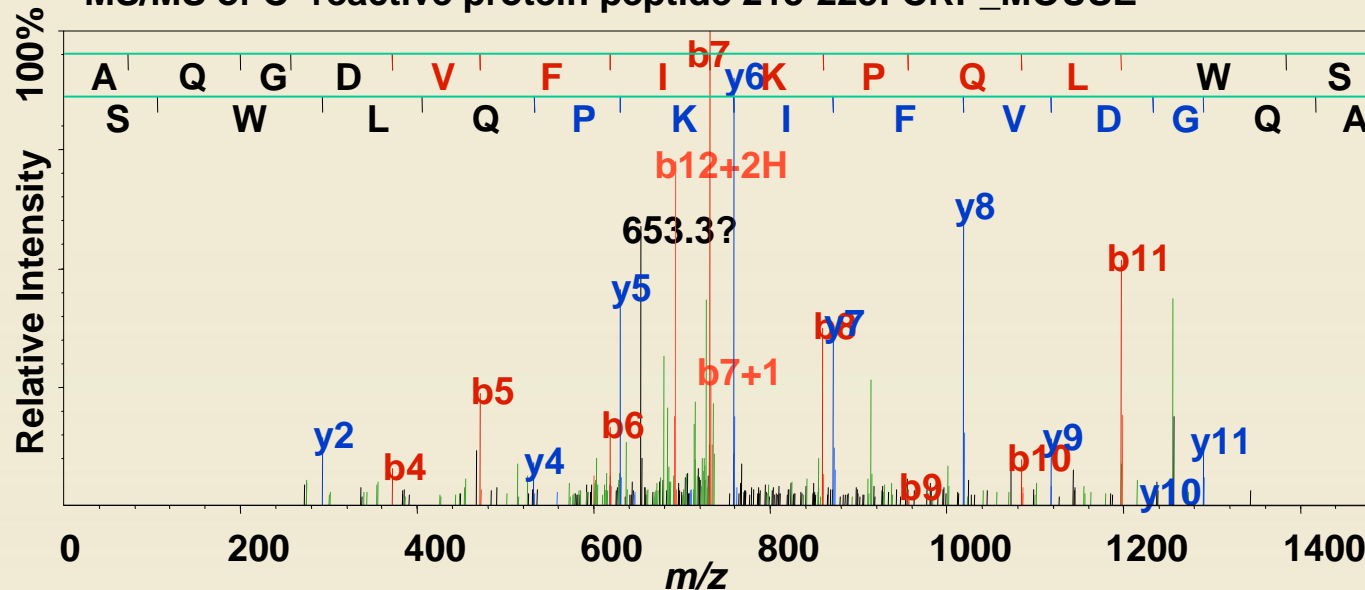
Differential peptide/protein/PTM expression all point towards potential markers

Known “Biomarker” CRP Peptide/ Protein Expression Changes

LCMS Feature: Precursor peptide ion for CRP_MOUSE



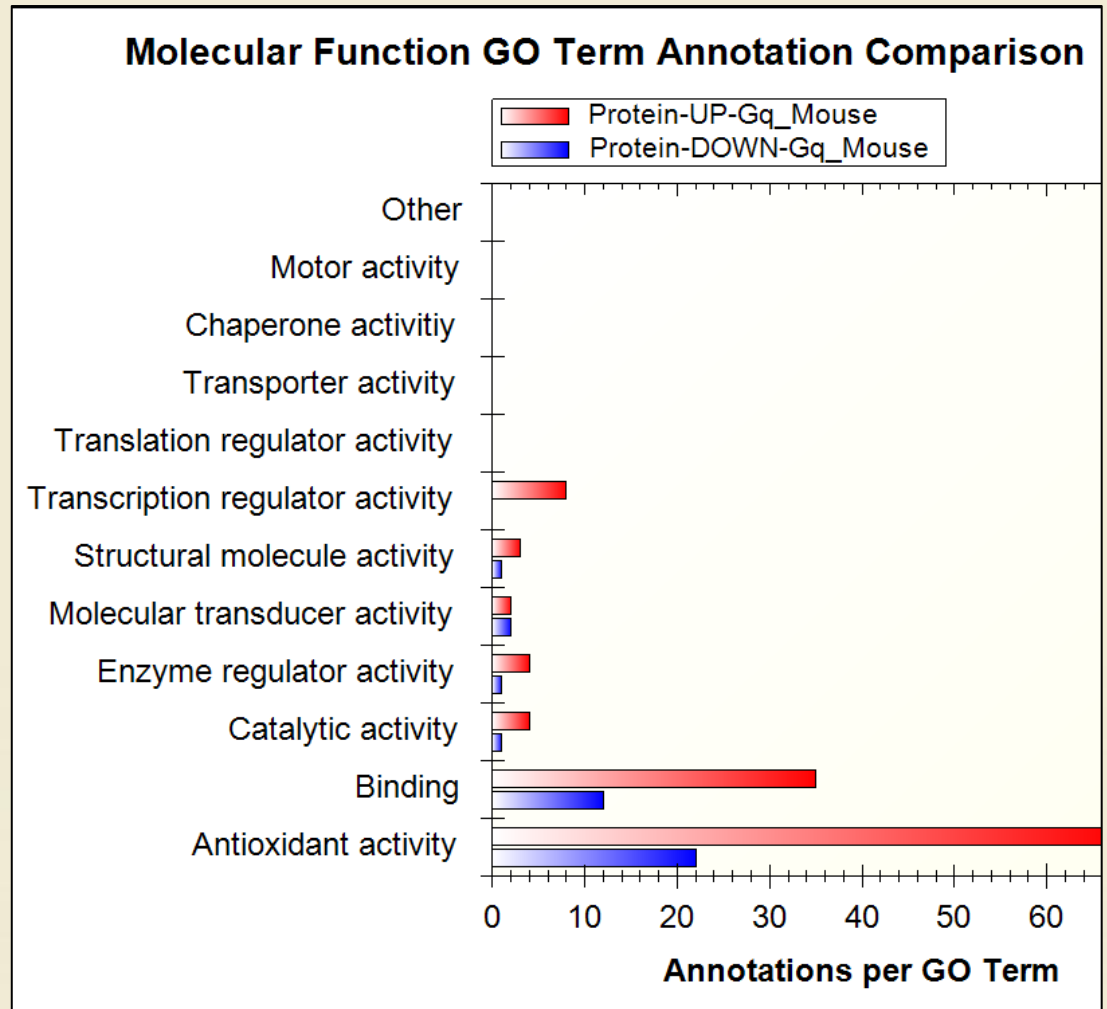
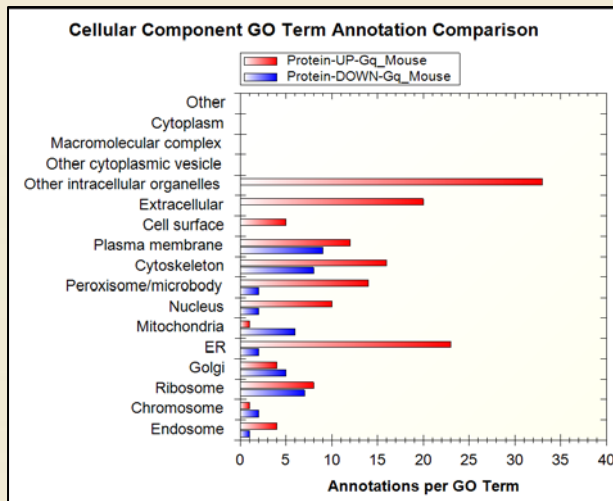
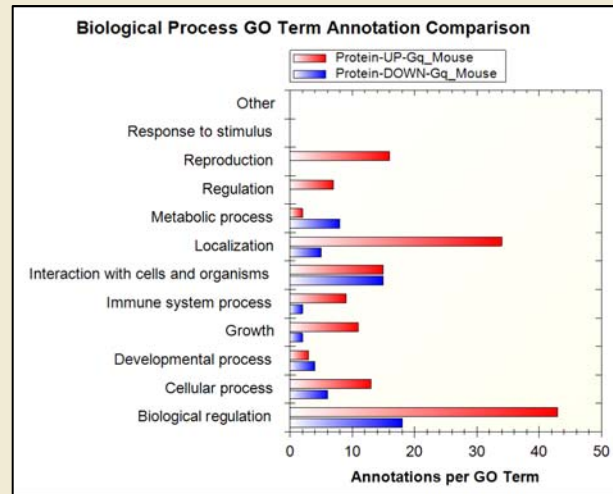
MS/MS of C- reactive protein peptide 213-225: CRP_MOUSE



*CRP: associate with increased risk of CVD, diagnostic/prognostic values limited
Known markers validate approach, multiple peptides observed, including PTMs*

Global Changes Observed in Gq-Mouse Model

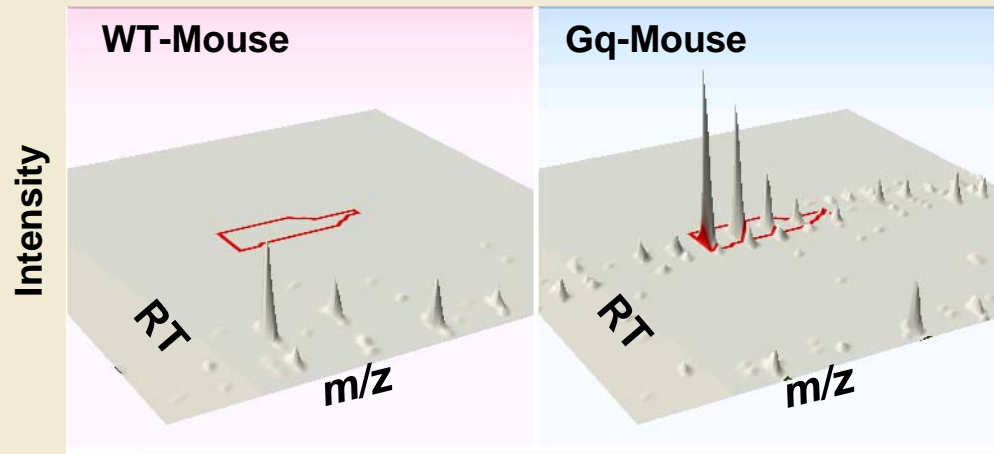
GO Term Enrichment: Biological Processes, Cellular Component and Molecular Function



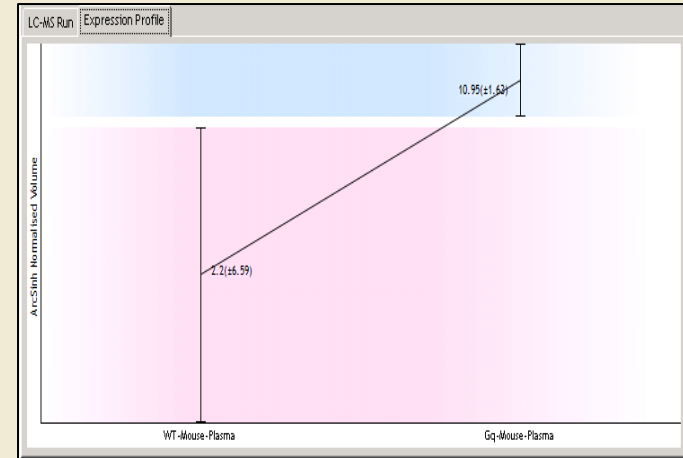
Rather than limit ourselves to one marker, we may gain incite into global changes

MHC7 Differential Expression in Gq-Mouse Model

LCMS Feature: Precursor peptide for MYH7_MOUSE



Expression Change: ANOVA <0.05

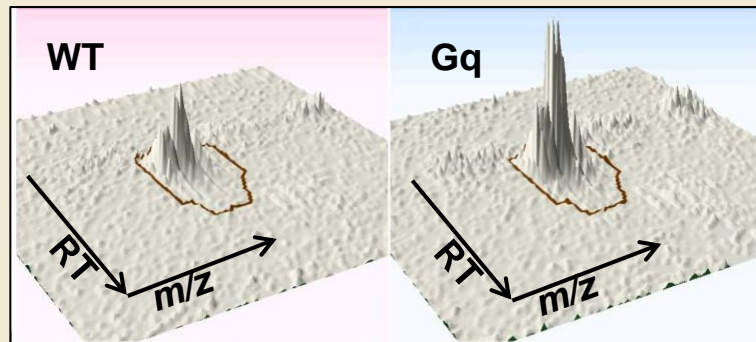


#	Max fold	Anova	Score	Protein	Sequence	PTM	UP	DN	F-2	F-10	F-Inf	Description
15256	2.09	0.028	11.81	MYH1_MOUSE	HDCDLLREQYEEQEAKAELQR	X	x		x			Myosin-1, Mus musculus (Mouse)
21441	2.61	0.003	5.6	MYH14_MOUSE	TPNVGGPGGPQVEWTAR			x	x			Myosin-14 - Mus musculus (Mouse)
13779	5.09	0.001	10.44	MYH3_MOUSE	SEFKLEIDDLSSSVESVSK			x	x			Myosin-3 - Mus musculus (Mouse)
14416	323.01	0.018	4.19	MYH7_MOUSE	MCRTLEDQMNEHR	X	x			x		Myosin-7 (Myosin heavy chain 7) (Myosin heavy chain, cardiac muscle beta isoform) (MyHC-beta) (Myosin heavy chain slow isoform) (MyHC-slow) - Mus musculus (Mouse)
54895	11.31	0.016	12.5	MYO7A_MOUSE	HEPINHSDMVDK		x			x		Myosin-VIIa - Mus musculus (Mouse)

Specific protein isoforms relative to theoretical targets are observed to change
PTMs associated with oxidative stress also show significant changes in abundance

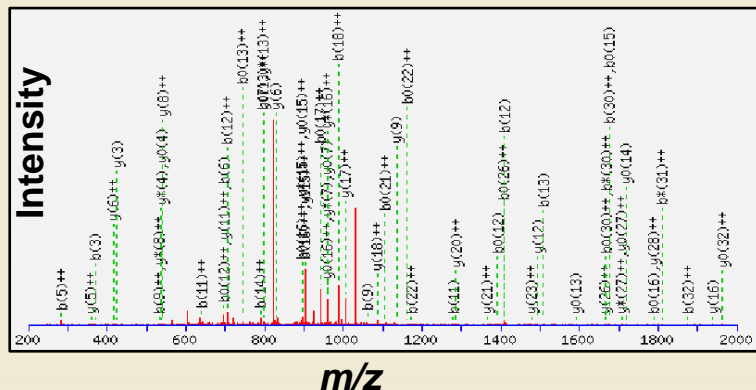
Specific PTMs Associated with Oxidative Stress

Increase in HNE Modified Albumin Peptide

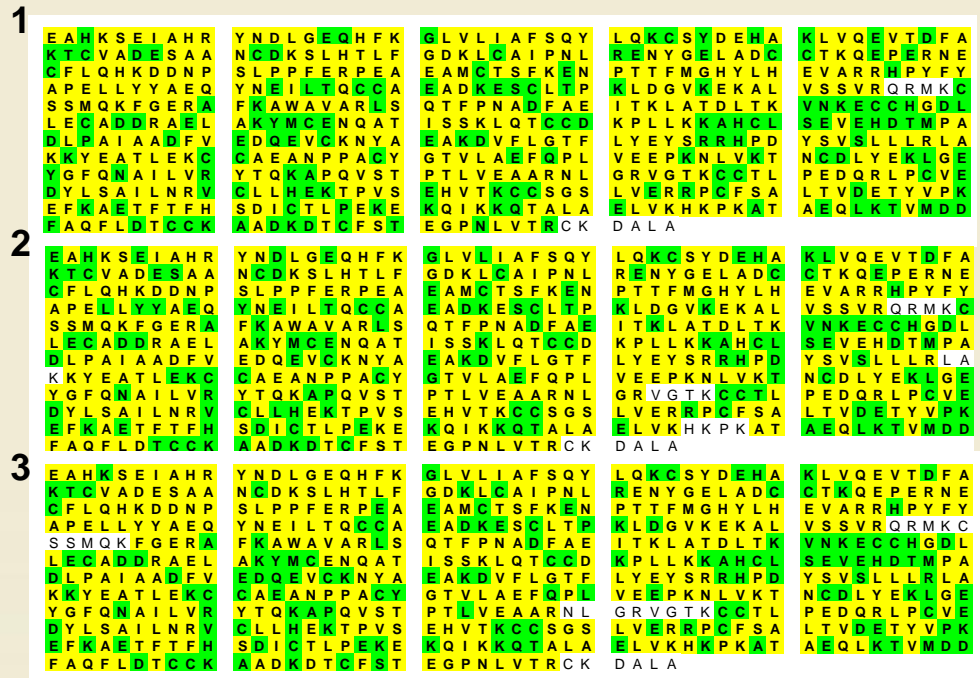


MS/MS of HNE Modified Peptide

AHcLSEVHDTMPADLPAIAADFVEDQEVckNYAEAKDVFLGTFLEYYSR



OPTM Mapping: Gq-Mouse ALBU_MOUSE Sequence



Global changes in PTMs map to specific locations on protein sequences
Select PTMs correlate well with other models of oxidative stress: GenMod SC+PAH

Going Forward

- **Continue to foster discussion in the realm of biomarkers**
 - **Rapidly changing field with endless potential for discovery**
 - **Investigate alternative approaches, methodology, models**
- **Near term evaluation of pilot projects**
 - **Identify both protein and PTM changes associated with each model**
 - **Correlate proteomics data with ancillary data**
 - **Perform cross project comparison**
 - **Meta-analysis comparison with different models of CVD**
- **Build new collaborations**
 - **All are welcome**

Develop a CVD specific protein and PTM panel of putative markers



Acknowledgments

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- **David H. Perlman, Vivek Bhatia and all past members of the CPC**
- **Robin MacDonald**
- **Katya Ravid**
- **All the enthusiastic members of the Biomarkers ARC**