

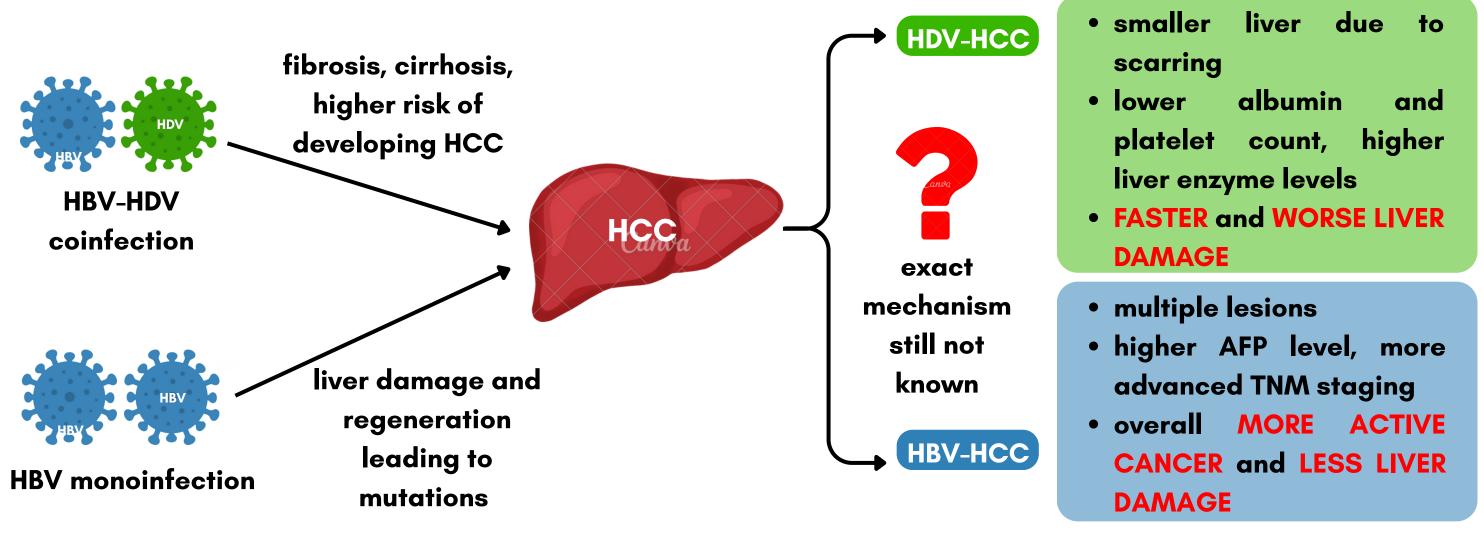
Integrated Bioinformatics Analysis of DEGs Reveals Specific Molecular Pathways Driving Poorer Prognosis in HDV-HCC Compared to HBV-HCC



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Introduction

Hepatocellular carcinoma (HCC) is the 5th most common cancer worldwide and is the 2nd leading cause of death in men. HDV is a defective RNA virus which requires HBV surface antigens (HBsAg) for viral assembly, and therefore presents as HBV-HDV coinfection. HBV-HDV coinfection is considered to be the most aggressive form of chronic viral hepatitis, having 4 times higher risk of developing into HCC. HBV associated HCC often presents with more lesions and more aggressive tumor behavior, while HDV associated HCC has been shown to have poorer prognosis results in worse liver damage. However, the exact mechanisms behind this difference is still unknown.



Objective

This study aims to identify key genes and molecular pathways contributing to poorer HDV-HCC prognosis as compared to HBV-HCC, and to assess their potential as therapeutic drug targets.

Method



1. Gene Expression Omnibus was used to find datasets regarding HBV associated HCC (GSE55092) and HDV associated HCC (GSE98383).



2. The GEO2R tool was then used to identify DEGs between healthy samples and HBV-HCC and HDV-HCC samples.



3. Microsoft Excel was used to identify significant results using p adj < 0,05, and logFC > 1 and < -1 to identify upregulated and downregulated genes in both datasets



4. Interactivenn was used to compare upregulated and downregulated genes between HBV-HCC and HDV-HCC, in order to identify differences in **gene expression.**



5. **KEGG** and **Gene Ontology** analysis was conducted on the common DEGs using **Enrichr** Software



6. Cytoscape and the CytoHubba plugin was used to construct a PPInetwork and identify top Hub Genes

Search Keywords hbv-hcc"geo2r"[filter], hdv-hcc "geo2r"[filter]

Results and Graphics

Study	Dataset	Samples (n)		Tissue	Protocol design
Diaz G et. al 2018	GSE98383	HDV-HCC	No HCC	Liver Tissue	Affymetrix Human Genome U133 Plus 2.0 Array
		5	7		
Melis M et. al 2014	GSE55092	Malignant	Non-Malignant	Liver Tissue	Affymetrix Human Genome U133 Plus 2.0 Array
		11	11		

Table 1. Characteristics of Included Studies

ation of Mitotic Cell Cycle Phase Transition (GO:1901992)

Cytoskeleton Organization Involved in Mitosis (GO:1902850)

Figure 5. Biological process of downregulated genes in HDV

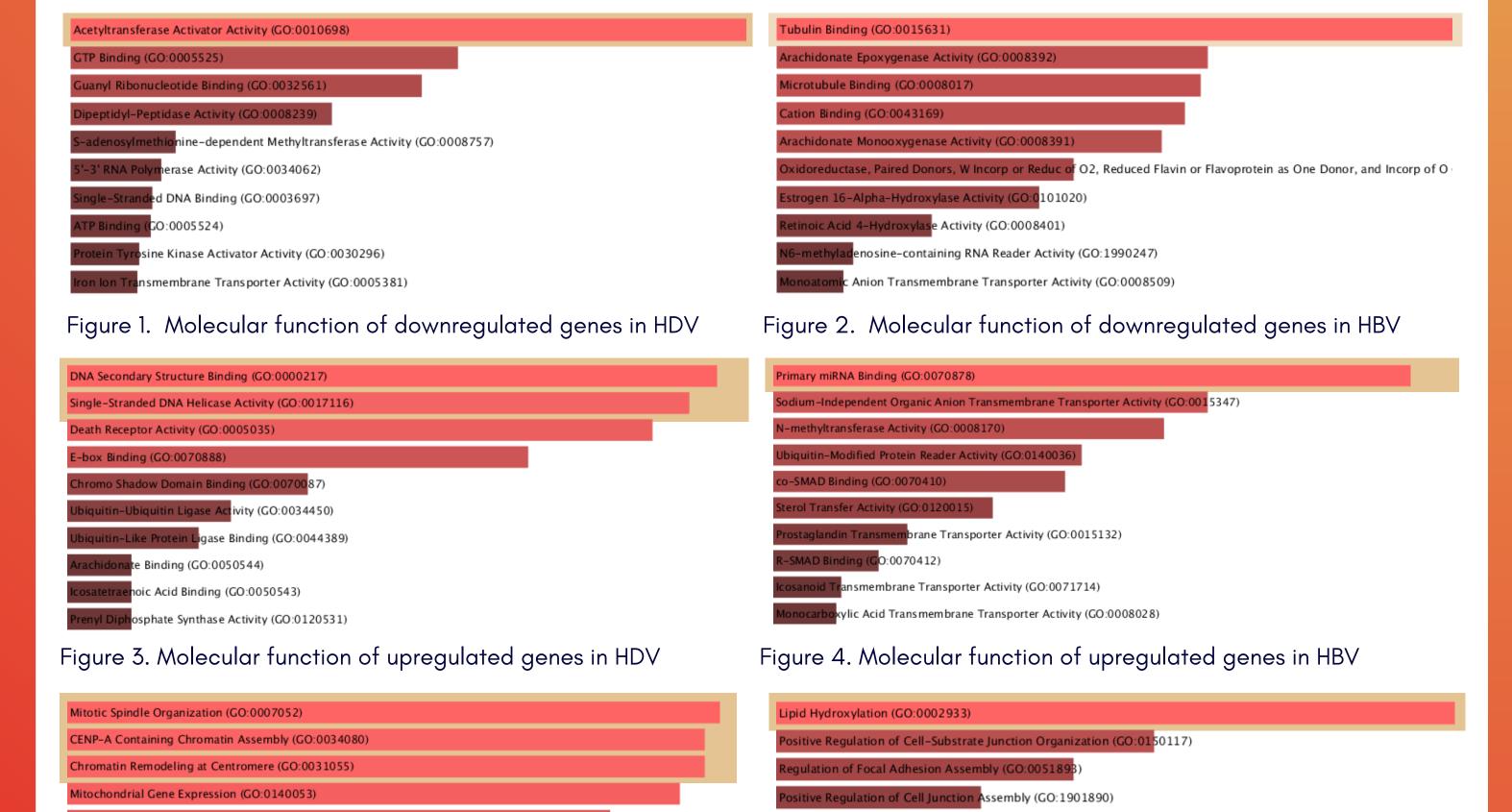
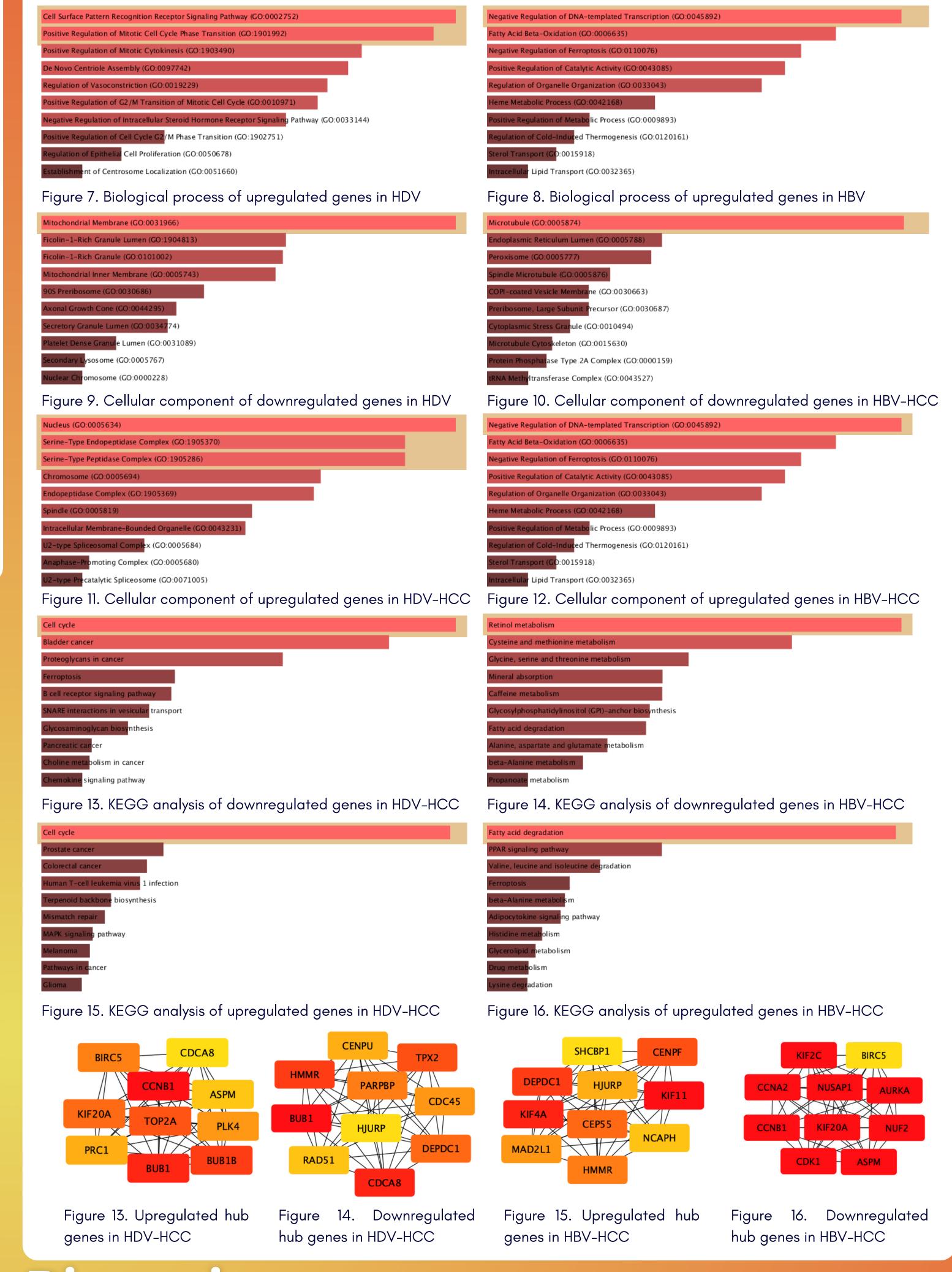


Figure 6. Biological process of downregulated genes in HBV



Discussion

HDV-HCC

<u>UPREG: Cell surface pattern recognition receptor signalling pathway</u>

- Pattern Recognition Receptors (PRRs) induces pro-inflammatory cytokine production \rightarrow inflammation, hepatocyte injury, regeneration = fibrosis
- HDV DYSREGULATES PRR signalling = oxidative stress and DNA damage
- chronic PRR activation = inflammation driven hepatocarcinogenesis

DOWNREG: Mitotic Spindle Organization

- HDV disrupts cell cycle regulation, promotes centrosome amplification, increase ROS = more **DNA damage/errors in mitosis**
- Possible biomarkers
 - AURKA → overexpression in HCC = poorer prognosis
 - PLK1 → spindle checkpoint control inhibited = increased HCC growth
 - BUB1/BUBR1 → mutated in HCC = premature completion of mitosis

HBV-HCC

<u>UPREG: Negative regulation of DNA-templated transcription</u>

- HBV interfere with transcriptional machinery → tumor supressor genes are SUPPRESSED → oncogenes are activated
- $HBx \rightarrow activate$ oncogenic pathways \rightarrow suppresses tumor supressors
- HBsAg → induces ER (endoplasmic reticulum stress) AND IL-6 signalling → repress anti-tumor immune response

DOWNREG: Lipid Hydroxylation

- Addition of OH to fatty acid → influences cell signalling
- Hydroxylation of ARACHIDONIC ACID → HCC CELL PROLIFERATION
- LOX/COX → prostaglandins = promotes tumorigenic environment
- CYP2E1 → increase of ROS through lipid peroxidation → DNA adduct formation → **TP53 mutations and GENOMIC INSTABILITY**

Conclusion

Overall, HDV-HCC pathways favor cell surface pattern recognition pathways which includes PRR activation, causing inflammation driven hepatocarcinogenesis. Meanwhile, BUB1/BUBR1 and AURKA lead to worse prognosis in HDV-HCC. Furthermore, in HBV-HCC, negative regulation of DNA-templated transcription leads to oncogenic activation, and repression of anti-tumor response, while lipid hydroxylation leads to genomic instability.