

Multi-Tissue Transcriptome-Wide Association Study Identifies Genetic Mechanisms Underlying Endometrial Cancer Susceptibility

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1. Background

- Endometrial cancer is the most commonly diagnosed gynaecological cancer in developed countries.
- Although genome-wide association studies (GWAS) have identified genetic risk variants associated with endometrial cancer, our understanding about mechanisms underlying endometrial cancer susceptibility remains largely unknown.
- The goal of this study is to integrate endometrial cancer GWAS with expression quantitative trait loci (eQTL) datasets by transcriptome-wide association study (TWAS) to elucidate candidate genes for endometrial cancer.

2. Data and Methods

- Endometrial Cancer GWAS meta-analysis of 12,906 endometrial cancer cases and 108,979 controls of European descent [1].
- eQTL datasets for 48 tissues from the Genotype-Tissue Expression Project (GTEx v7).
- GWAS and eQTL datasets were integrated by TWAS analysis and subsequent colocalization. Prioritised genes were assessed for drug-gene similarities and pleiotropy associations.

3. Results: MultiXcan Analysis

- TWAS analysis by MultiXcan [2] prioritised 20 candidate genes for endometrial cancer at FDR<0.05 (Figure 1).

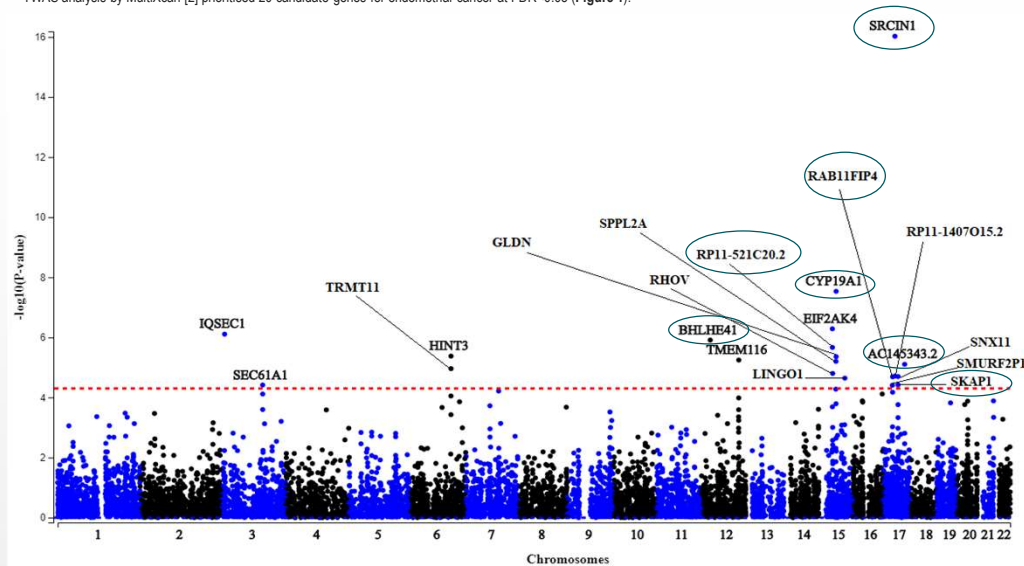


Figure 1: Manhattan plots of MultiXcan analysis, using eQTL data for 48 tissues. Red dotted line represents FDR < 0.05 significance threshold, which is equivalent to $\sim P$ value $\times 10^5$. Genes in circle were supported by colocalization analysis of GWAS signals and eQTL signals

4. Results: Colocalization Analysis

- 7 out of 20 TWAS candidate genes showed colocalization within the same region (e.g. Figure 2).

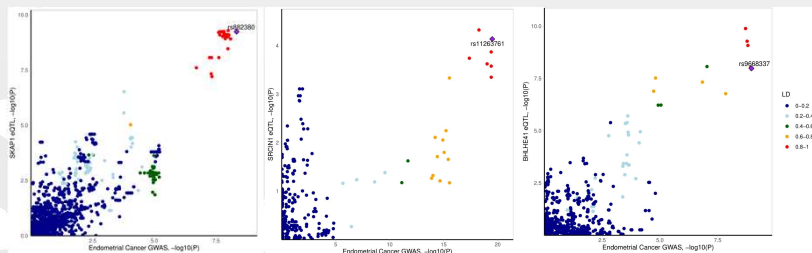


Figure 2: Examples of colocalization plots between GWAS signals and eQTL signals

5. Results: Drug-Gene Expression Similarity Analysis

- Drug-gene expression similarity was assessed for the 49 TWAS-identified genes (FDR<15%) using the Connectivity Map database [3].
- 14 candidate drug compounds were identified with opposing connectivity scores, including tubulin inhibitors, a drug class already in use for treatment of advanced endometrial cancer (Table 1).
- Nine candidate drug compounds were Na⁺ K⁺-ATPase inhibitors; Na⁺ K⁺-ATPase inhibitors have demonstrated anti-cancer activity in experimental models but have shown limited efficacy in clinical studies
- Ca²⁺-ATPase inhibitor thapsigargin has demonstrated strong anti-proliferative effects in endometrial cancer cell lines but not selective for cancer cells
- Calcium channel activator cinacalcet has been approved for treating hypercalcemia and secondary hyperparathyroidism, could potentially be repurposed for endometrial cancer treatment

Table 1: Candidate drug targets identified from Connectivity Map

| Connectivity score | Drug | Drug class | Clinically tested (phase) or approved for |
|--------------------|----------------|---|---|
| -95.60 | nocodazole | Tubulin inhibitor | No |
| -95.34 | vincristine | Tubulin inhibitor | Acute lymphocytic leukemia, acute myeloid leukemia, Hodgkin and non-Hodgkin lymphoma (approved) |
| -94.75 | strophanthidin | Na ⁺ /K ⁺ -ATPase inhibitor | No |
| -94.45 | cinacalcet | Calcium channel activator | Hypercalcemia and secondary hyperparathyroidism (approved) |
| -94.40 | digitoxigenin | Na ⁺ /K ⁺ -ATPase inhibitor | No |
| -93.97 | periplocymin | Na ⁺ /K ⁺ -ATPase inhibitor | No |
| -93.34 | proscillaridin | Na ⁺ /K ⁺ -ATPase inhibitor | No |
| -93.06 | thapsigargin | Ca ²⁺ -ATPase inhibitor | No |
| -92.92 | cinobufagin | Na ⁺ /K ⁺ -ATPase inhibitor | Liver cancer and gastrointestinal neoplasm (Phase IV) |
| -92.46 | digitoxin | Na ⁺ /K ⁺ -ATPase inhibitor | Cystic fibrosis and sarcoma (Phase II) |
| -92.35 | digoxin | Na ⁺ /K ⁺ -ATPase inhibitor | Heart failure and atrial fibrillation (approved) |
| -92.33 | ouabain | Na ⁺ /K ⁺ -ATPase inhibitor | No |
| -92.21 | bufalin | Na ⁺ /K ⁺ -ATPase inhibitor | Pancreatic cancer (Phase II) |
| -90.84 | BNTX | Opioid receptor antagonist | No |

*Candidate drug targets defined as chemical compounds with a Connectivity Score < -90.

6. Results: Phenome-wide lookup using CTG-VIEW

- Phenome-wide lookup using CTG-VIEW [4] highlighted 3 TWAS-identified candidate genes (CYP19A1, AC145343.2 and RAB11FIP4) with potential pleiotropic effects on traits related to endometrial cancer risk factors, such as cardiovascular phenotypes, diabetes and hormone levels
- 3 TWAS-identified candidate genes also associate with traits related to bone health, haematopoiesis and liver function, providing avenues for future study

6. Discussion

- TWAS analysis identified 7 candidate endometrial cancer susceptibility genes, and provided evidence to support previously identified candidate genes.
- 3 out of 7 genes exhibit pleiotropy for several endometrial cancer risk factors, which may aid in understanding the biological mechanisms of endometrial cancer
- By comparing genetically predicted endometrial cancer gene expression with drug-induced gene expression profiles from Connectivity Map database, 14 drug repurposing candidates including tubulin inhibitors, a drug class already in use for treatment of advanced endometrial cancer
- TWAS-identified genes will be prioritised for assessment of their effect in cellular studies.

7. Acknowledgement and References

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References: [1] O'Mara et al 2019 *Nat Commun*; [2] Barbeira et al 2019 *PLoS Genet*; [3] Subramanian et al 2017 *Cell*; [4] Cuellar-Partida et al 2019 *bioRxiv*.