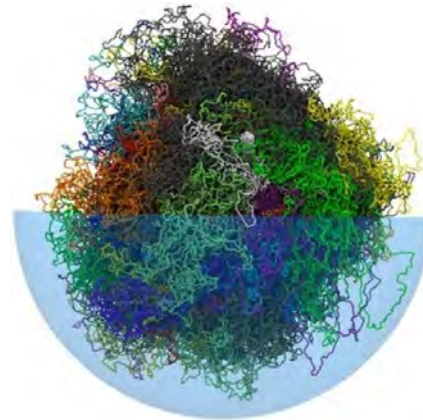




## 4<sup>ο</sup> ΔΙΑΠΑΝΕΠΙΣΤΗΜΙΑΚΟ ΠΡΟΓΡΑΜΜΑ ΕΚΠΑΙΔΕΥΣΗΣ ΣΤΗ ΡΕΥΜΑΤΟΛΟΓΙΑ 2022-24



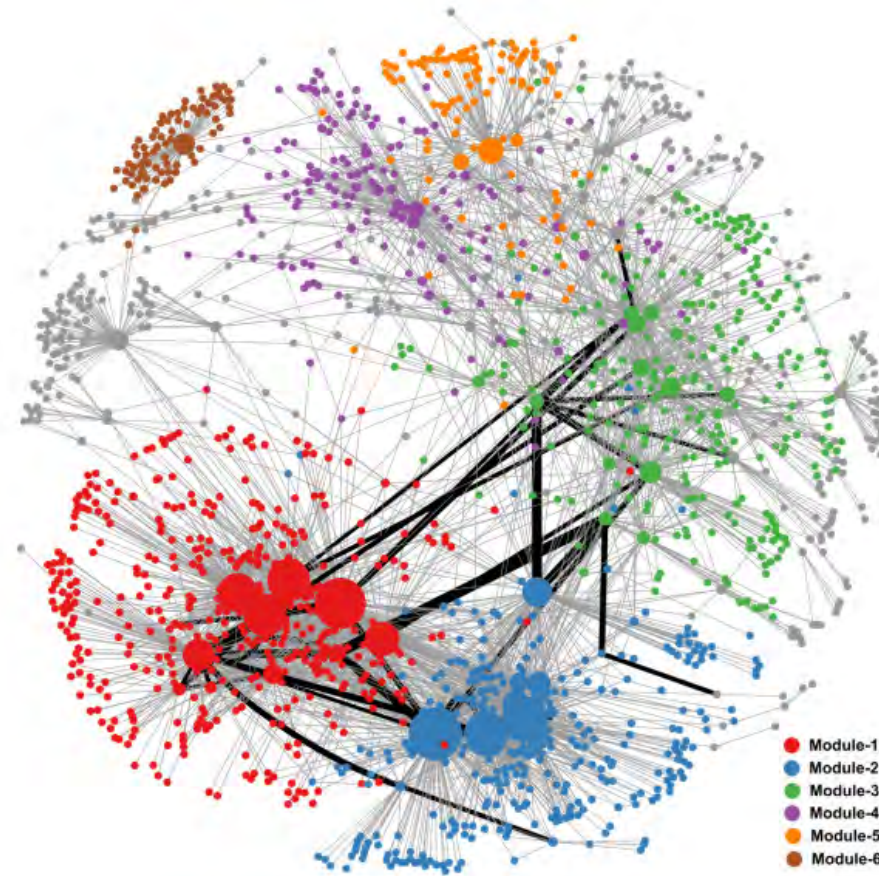
### Βιολογία συστημάτων (Systems Biology) στα ρευματικά νοσήματα

25.06.2022

Άγγελος Μπανός – Μεταδιδακτορικός ερευνητής (Εργαστήριο Αυτοανοσίας και Φλεγμονής, ΙΙΒΕΑΑ)

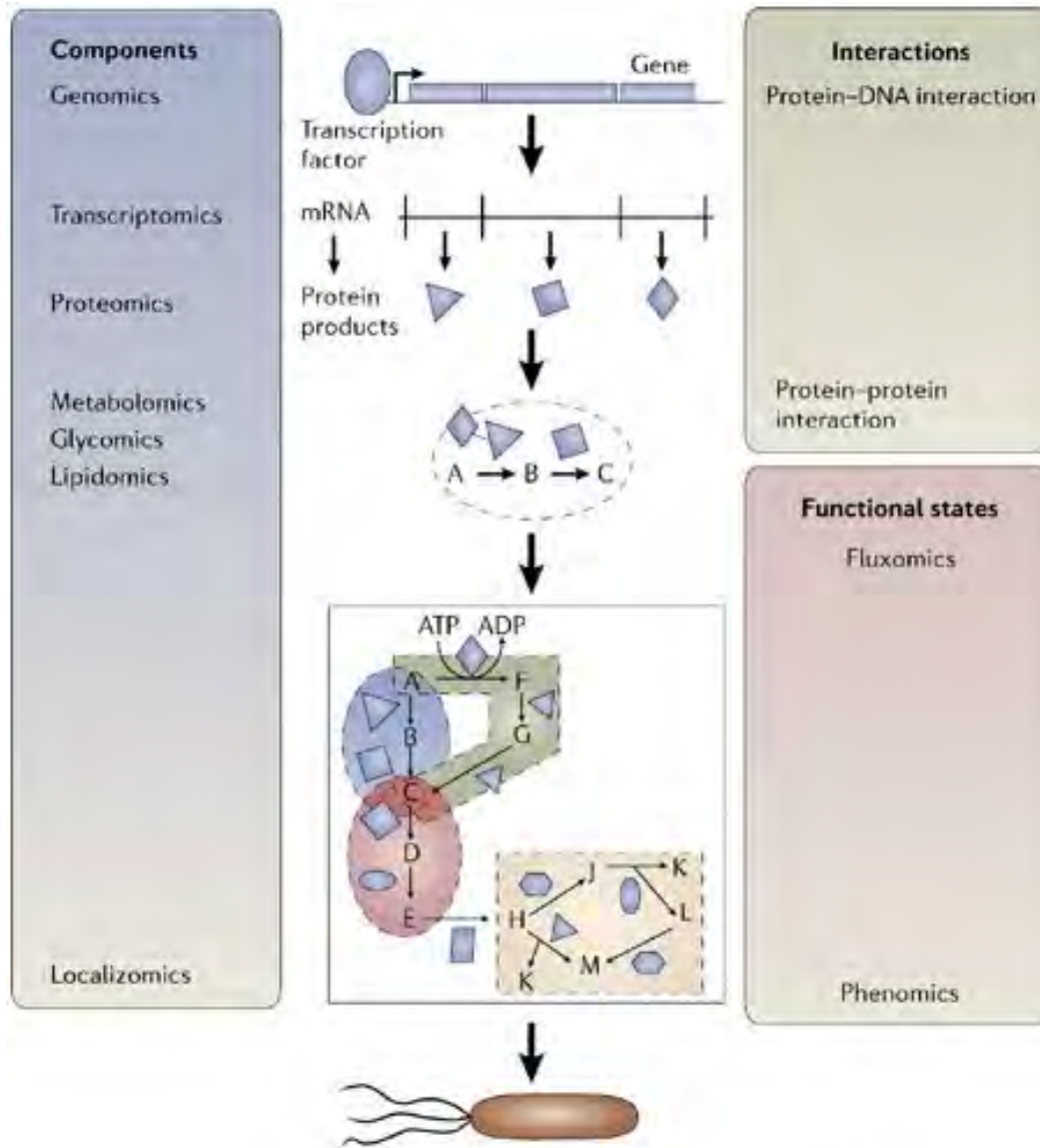
# Omics

## Big data/Next Generation Techniques



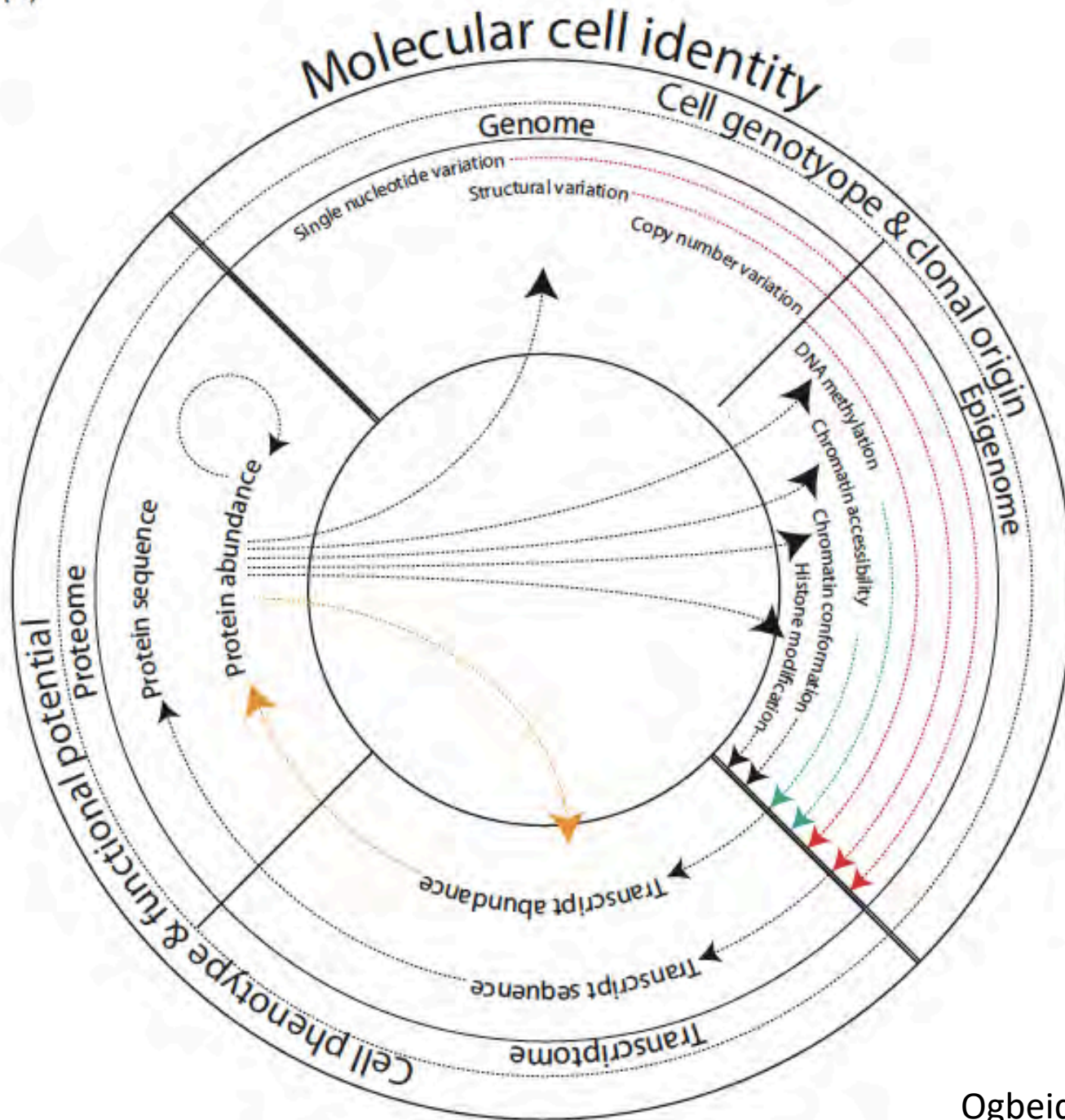
Gene regulatory networks in  
Hepatocellular Carcinoma

**-Omics:** Large scale dataset in specific species of biomolecules or biological entities (wholistic approach)



- Serial layers of -omics
- Elucidation of mechanisms
- Pathophysiological maps
- Casuality
- Therapeutical targets
- Personalized medicine

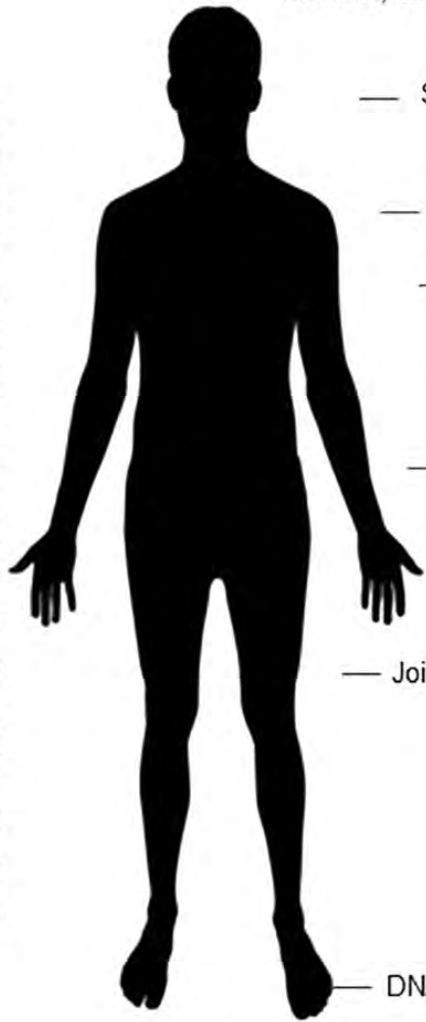
(A)



SYSTEMS MEDICINE ACCESS LAYERS

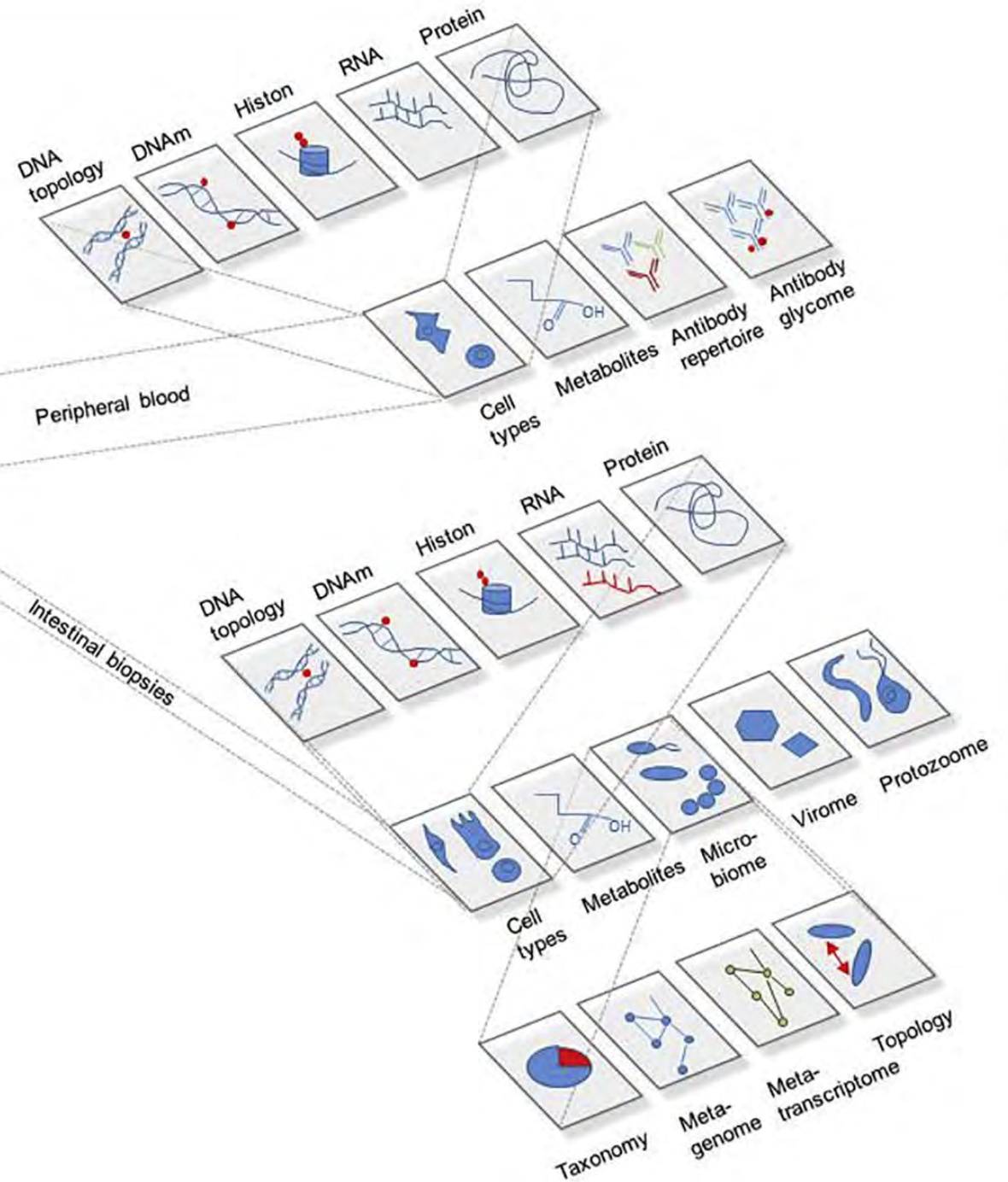
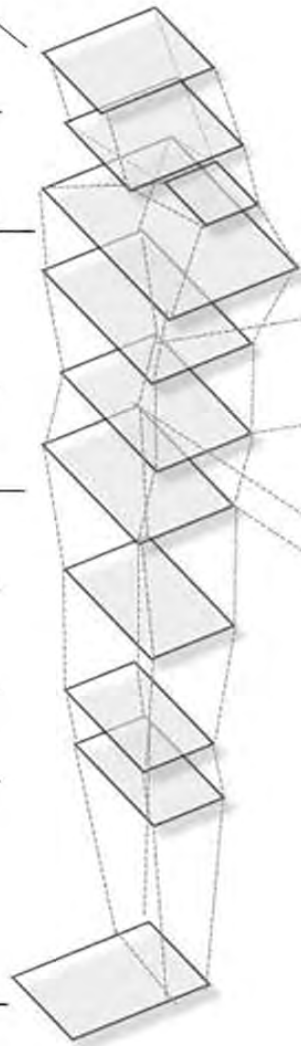
# ENVIRONMENT

Behaviour, socioeconomic factors, nutrition, clinical data, life history



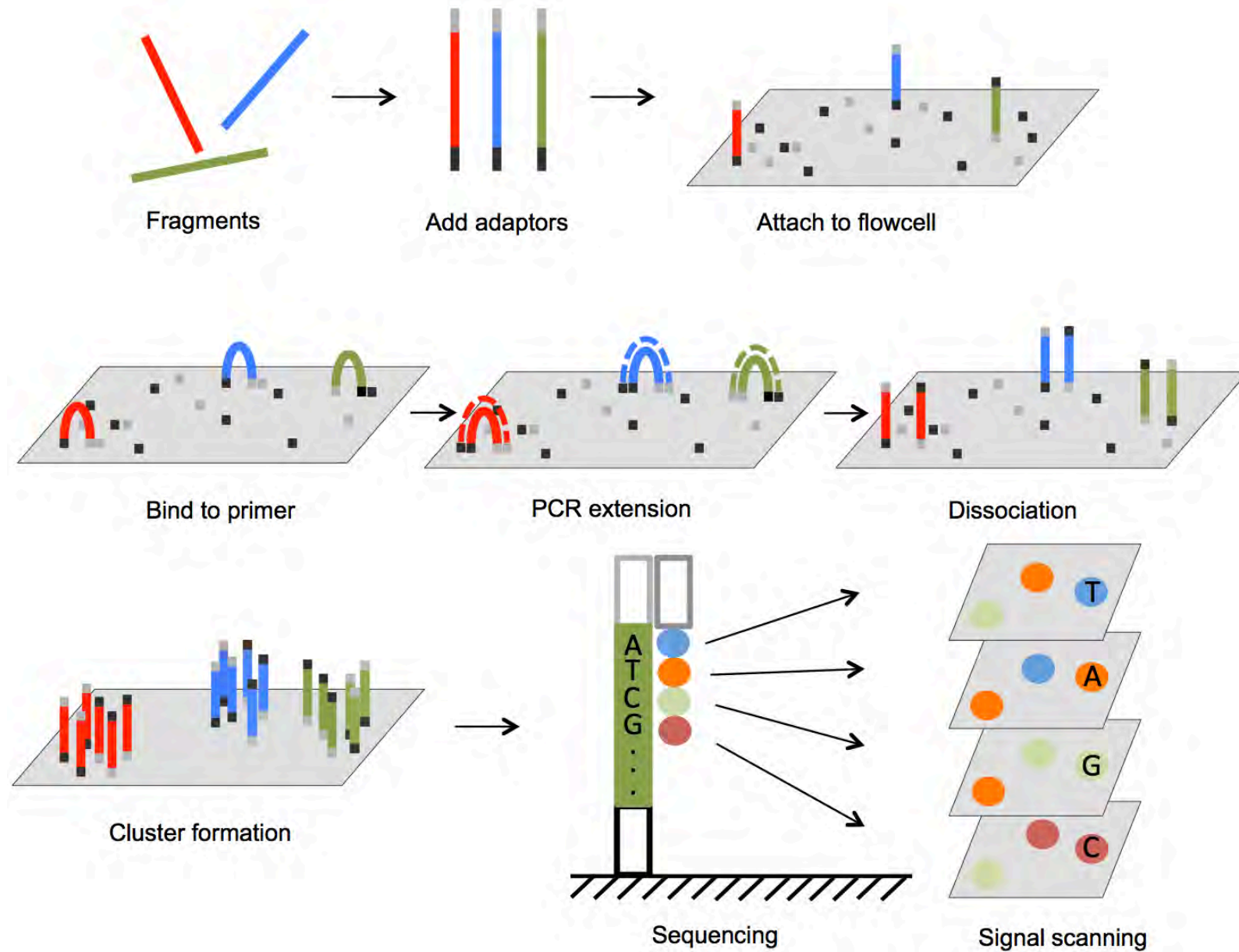
- Saliva, oral mucosa —
- CSF —
- Skin (swabs, biopsies) —
- Sputum, BAL —
- Blood, Serum —
- Stool, Gut biopsies —
- UGT (Urine) —
- Joint (biopsy, aspirate) —
- Bone marrow —
- DNA Individual Genome —

# GENETICS



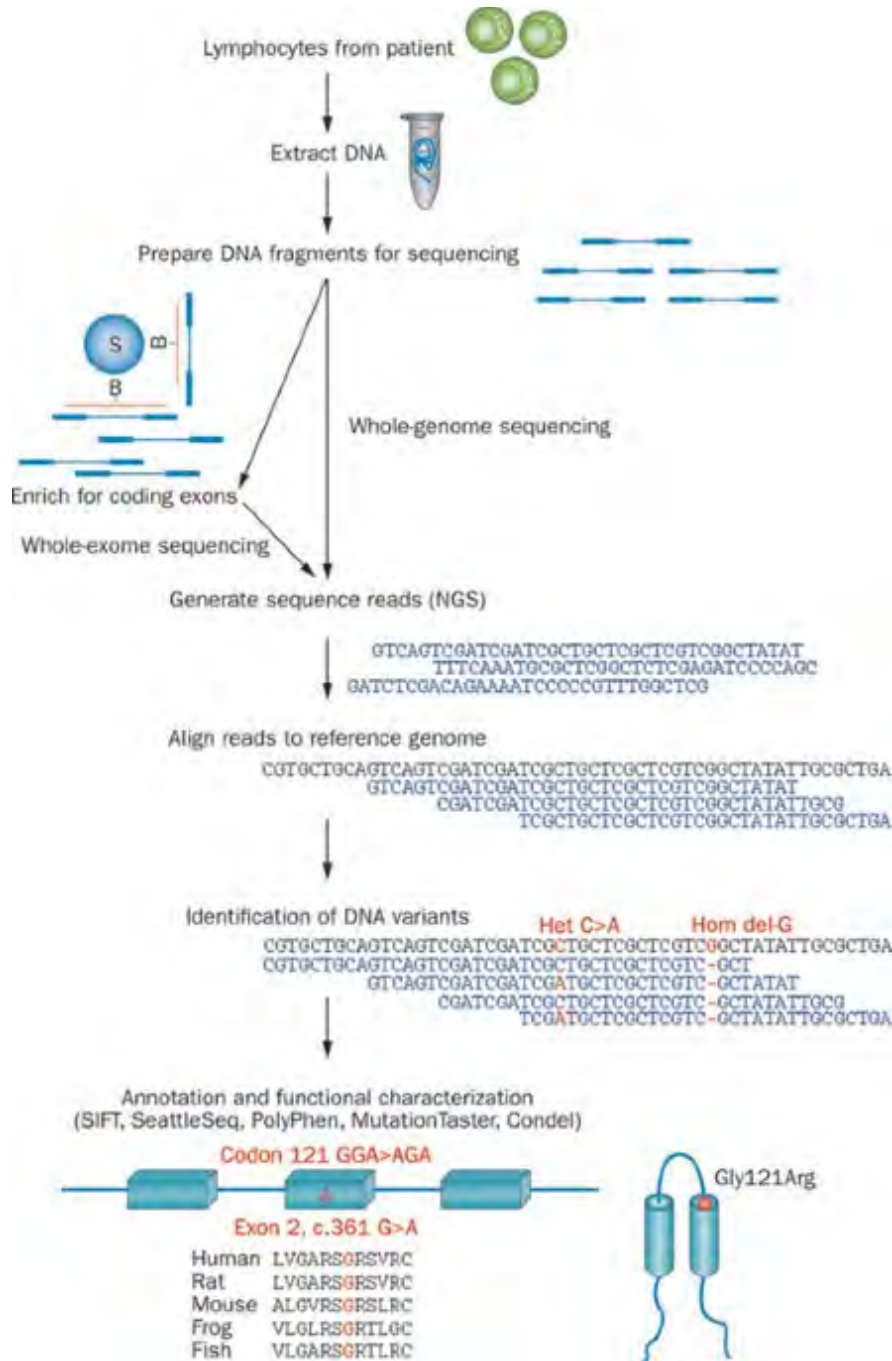
SYSTEMS MEDICINE ANALYSIS LAYERS

# NGS technology



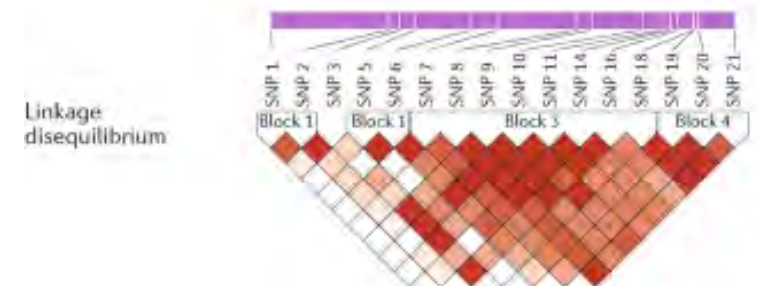
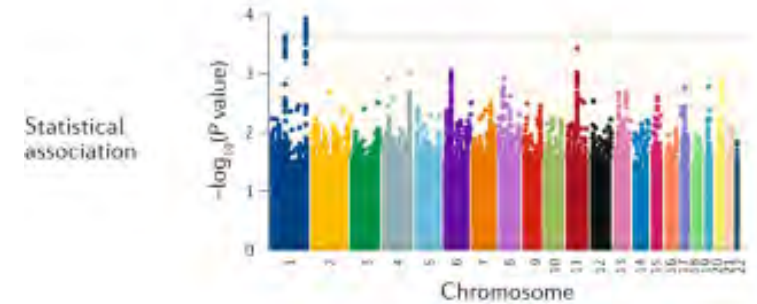
# Genetic load of rheumatic diseases

## GWAS Studies



## Whole Genome/Exome Sequencing

### a Genome-wide association



# Genetic predisposition in EGPA

ARTICLE

<https://doi.org/10.1038/s41467-019-12515-9>

OPEN

Genome-wide association study of eosinophilic granulomatosis with polyangiitis reveals genomic loci stratified by ANCA status

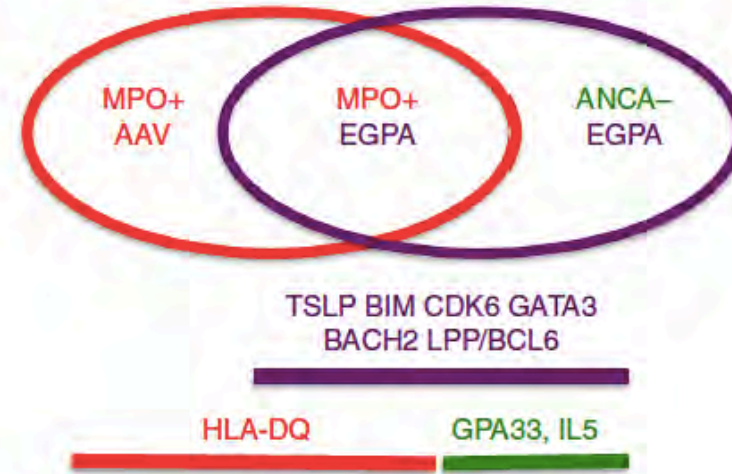
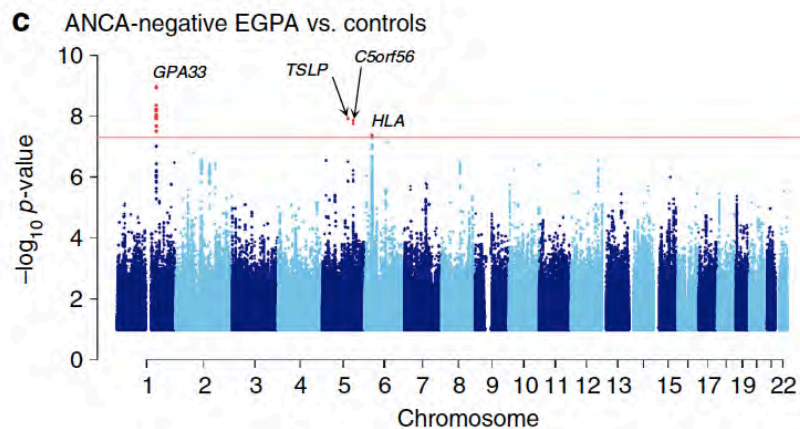
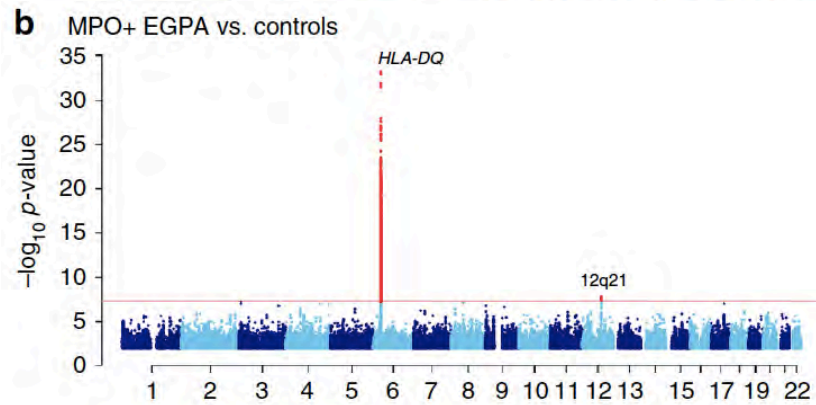
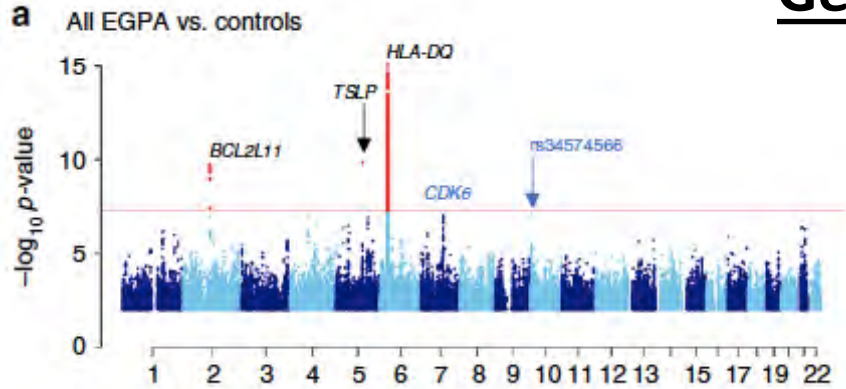
Paul A Lyons et al.<sup>#</sup>

**Table 2 Genetic associations with EGPA**

Chr	Variant rsid	Gene/ Region	Cont maf	Case maf	OR	Total EGPA N = 534			MPO+ EGPA N = 159		ANCA -ve EGPA N = 352	
						LMM P	Meta OR	Meta P	MPO OR	MPO P	OR	P
2	rs72946301	<i>BCL2L11</i>	0.1	0.17	1.66	<b>1.9 × 10<sup>-10</sup></b>	1.81	<b>9.0 × 10<sup>-11</sup></b>	1.89	7.7 × 10 <sup>-5</sup>	1.76	3.6 × 10 <sup>-7</sup>
5	rs1837253	<i>TSLP</i>	0.26	0.17	1.42	<b>1.5 × 10<sup>-10</sup></b>	1.52	<b>5.2 × 10<sup>-11</sup></b>	1.46	0.0008	1.53	<b>1.2 × 10<sup>-8</sup></b>
6	rs9274704	<i>HLA-DQ</i>	0.17	0.27	1.98	<b>8.2 × 10<sup>-16</sup></b>	2.01	<b>1.2 × 10<sup>-20</sup></b>	5.68	<b>1.1 × 10<sup>-28</sup></b>	1.32	0.004
10	rs34574566	<i>10p14</i>	0.31	0.24	0.73	8.0 × 10 <sup>-8</sup>	0.7	<b>2.9 × 10<sup>-8</sup></b>	0.66	0.0004	0.7	9.9 × 10 <sup>-6</sup>
7	rs42041	<i>CDK6</i>	0.24	0.31	1.32	1.9 × 10 <sup>-6</sup>			1.34	0.014	1.36	9.7 × 10 <sup>-5</sup>
5	rs11745587 <sup>†</sup>	<i>IRF1/IL5</i>	0.35	0.4	1.31	2.1 × 10 <sup>-7</sup>			1.16	0.17	1.47	<b>1.8 × 10<sup>-8</sup></b>
6	rs6454802	<i>BACH2</i>	0.4	0.31	0.8	2.2 × 10 <sup>-6</sup>			0.81	0.024	0.74	3.8 × 10 <sup>-6</sup>
3	rs9290877	<i>LPP</i>	0.3	0.38	1.27	4.7 × 10 <sup>-6</sup>			1.48	0.0007	1.24	0.0006
1	rs72689399	<i>GPA33</i>	0.01	0.03	2.7	6.7 × 10 <sup>-7</sup>			0.89	0.96	5.34	<b>1.1 × 10<sup>-9</sup></b>
6	rs6931740	<i>HLA</i>	0.39	0.25	0.62	<b>1.7 × 10<sup>-10</sup></b>			0.55	1.6 × 10 <sup>-5</sup>	0.61	<b>4.2 × 10<sup>-8</sup></b>
12	rs78478398	<i>12q21</i>	0.03	0.05	0.59	0.0017			0.17	<b>1.7 × 10<sup>-8</sup></b>	0.81	0.37

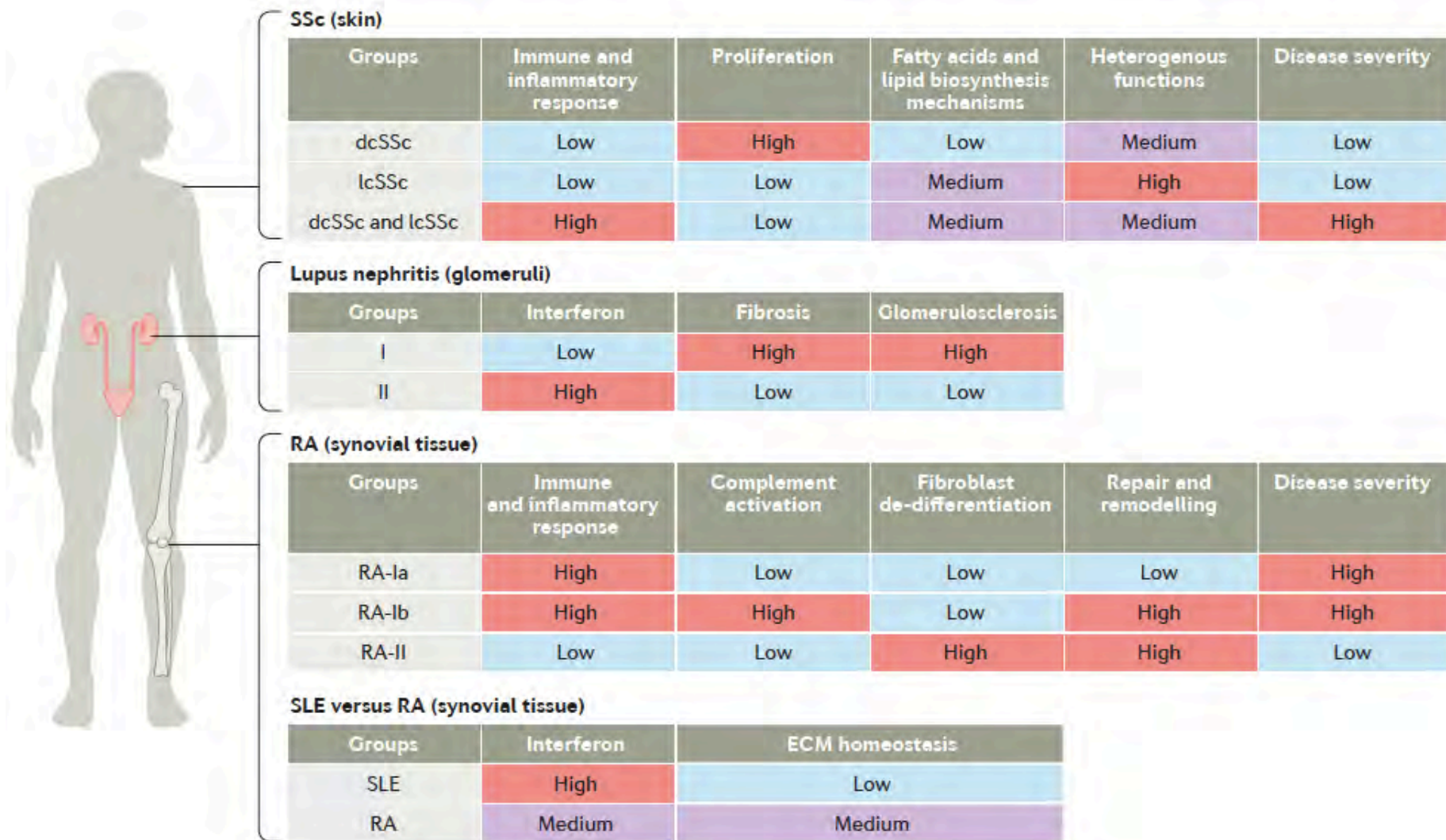


# Genetic predisposition in EGPA



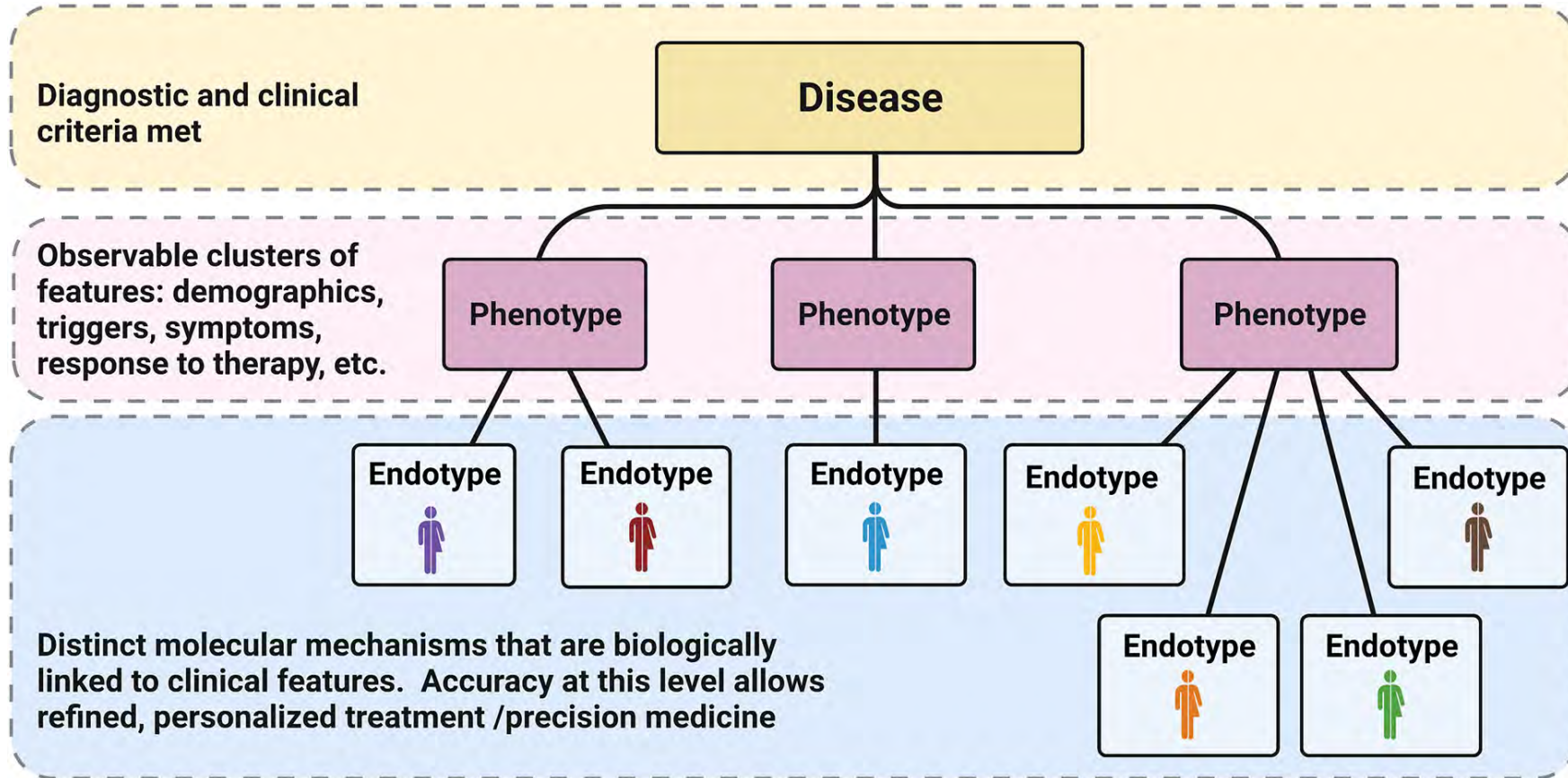
Clinical feature	% of patients with feature		
	MPO+ AAV (non EGPA)	MPO+ EGPA	ANCA- EGPA
Glomerulonephritis	85	29*	9
Neuropathy	20	79*	57
Asthma	n.d.	100	100
Eosinophilia	4.5	100	100
Pulmonary hemorrhage	17	4	4
Ear nose or throat	32	81	88
Pulmonary infiltrates	20	45	61*
Cardiac involvement	3	15	30*
Rituximab response	98	80	38

# Molecular Taxonomy in Rheumatic Diseases



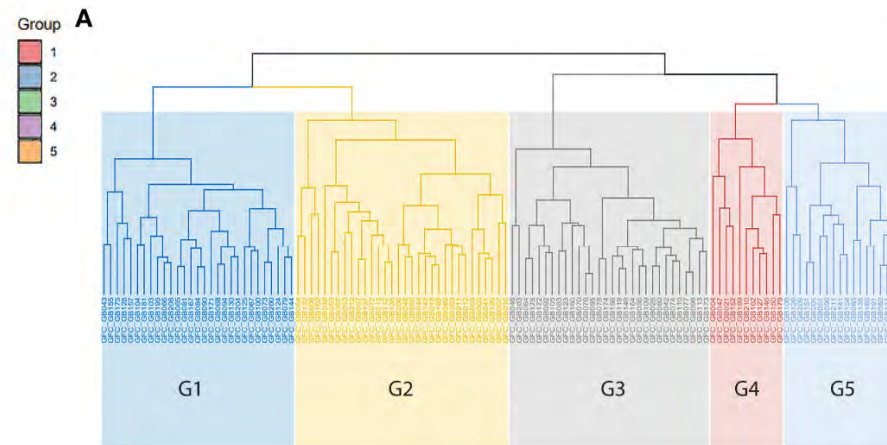
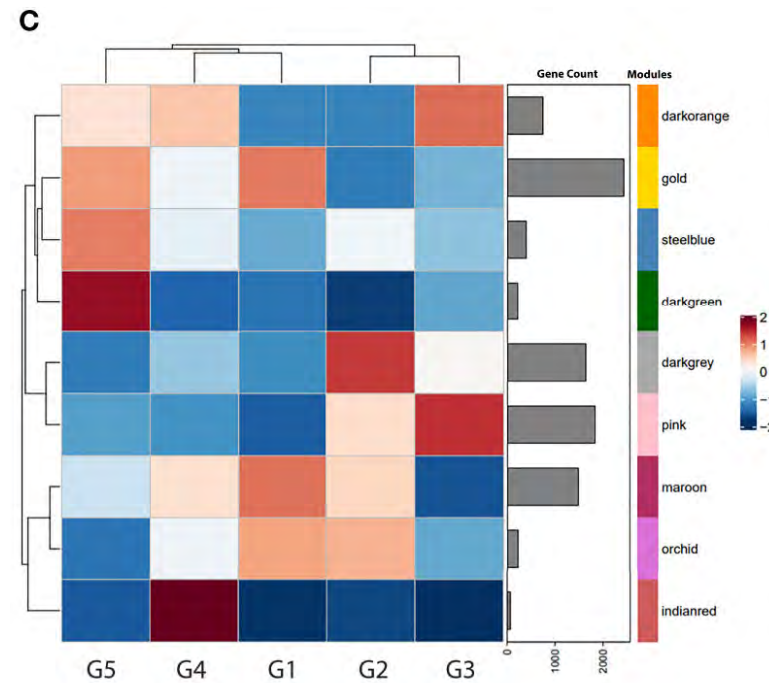
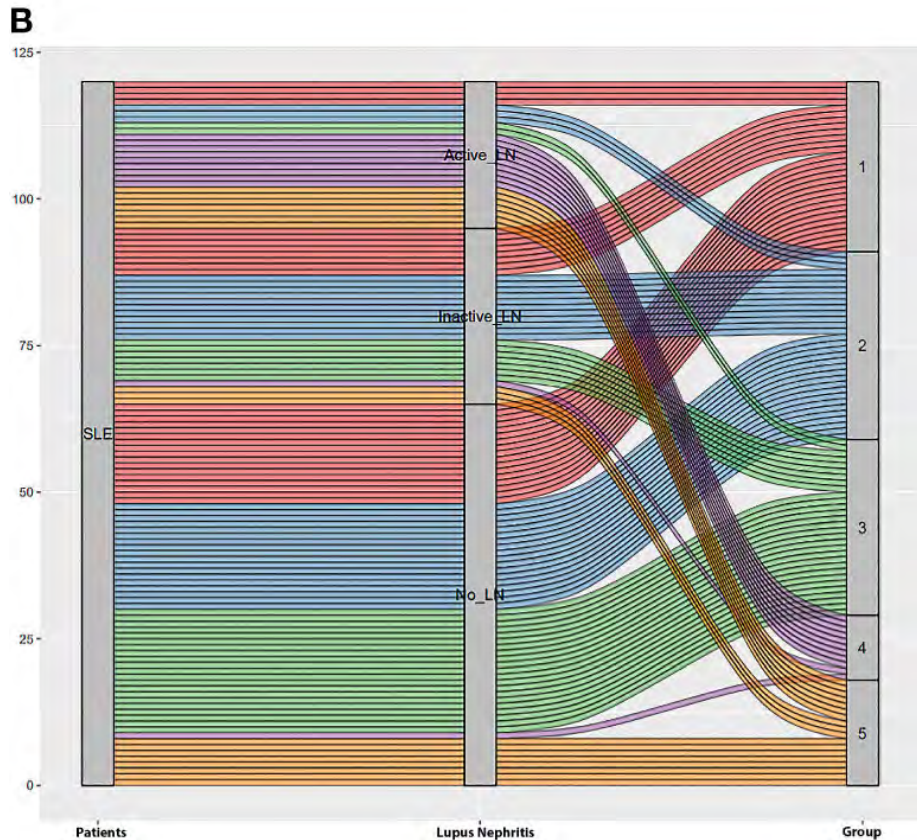
Molecular taxonomy based on transcriptome analysis

# Molecular Disease Endotypes



# Molecular Taxonomy of Systemic Lupus Erythematosus Through Data-Driven Patient Stratification: Molecular Endotypes and Cluster-Tailored Drugs

frontiers | Frontiers in Immunology



- 5 SLE endotypes characterized by a unique gene module enrichment pattern.
- Neutrophilic signature consisted primarily of patients with active LN
- B-cell group included patients with constitutional features.
- Patients with moderate severity and serologic activity exhibited a signature enriched for metabolic processes.
- Mild disease was distributed in 2 groups, exhibiting enhanced basic cellular functions, myelopoiesis, and autophagy

# Biopsy-based disease endotyping before and after therapy in RA reveals diverse clinical and treatment–response phenotypes

ARTICLES

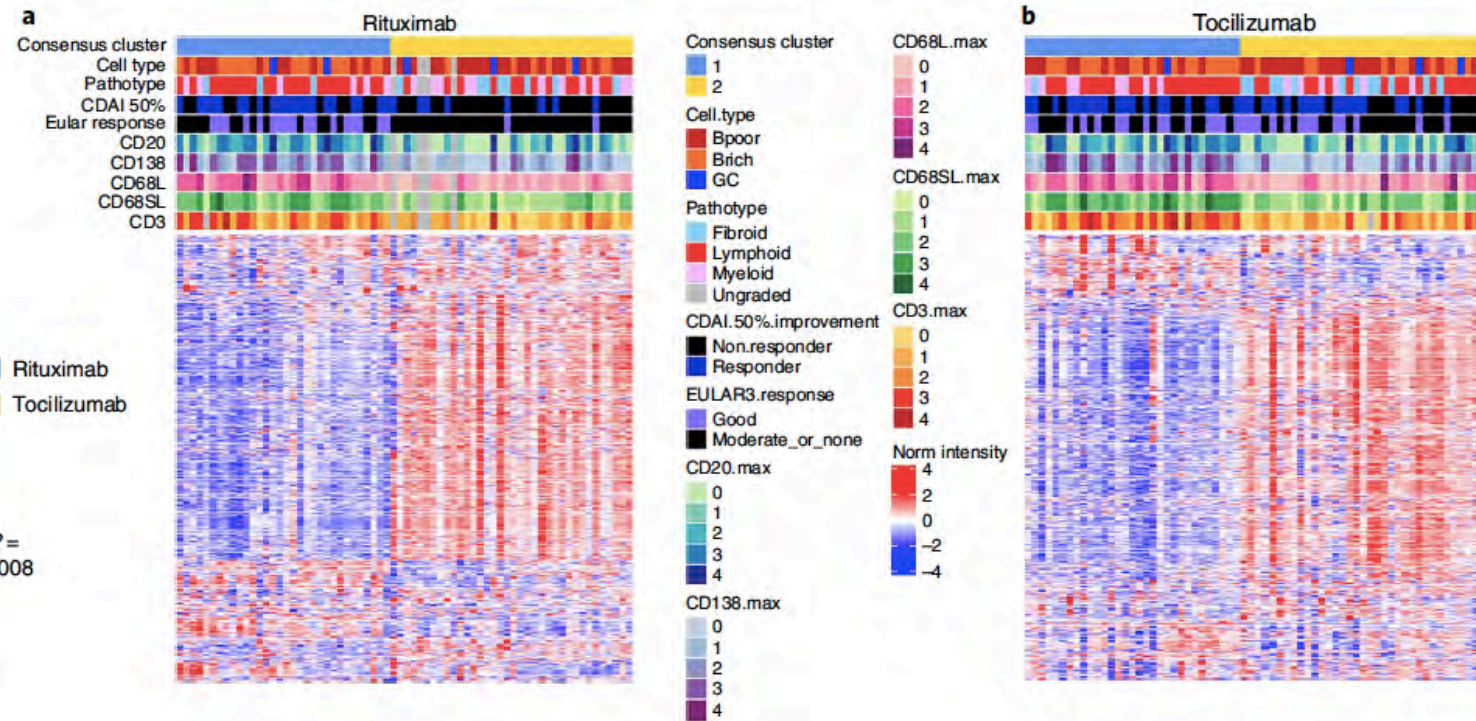
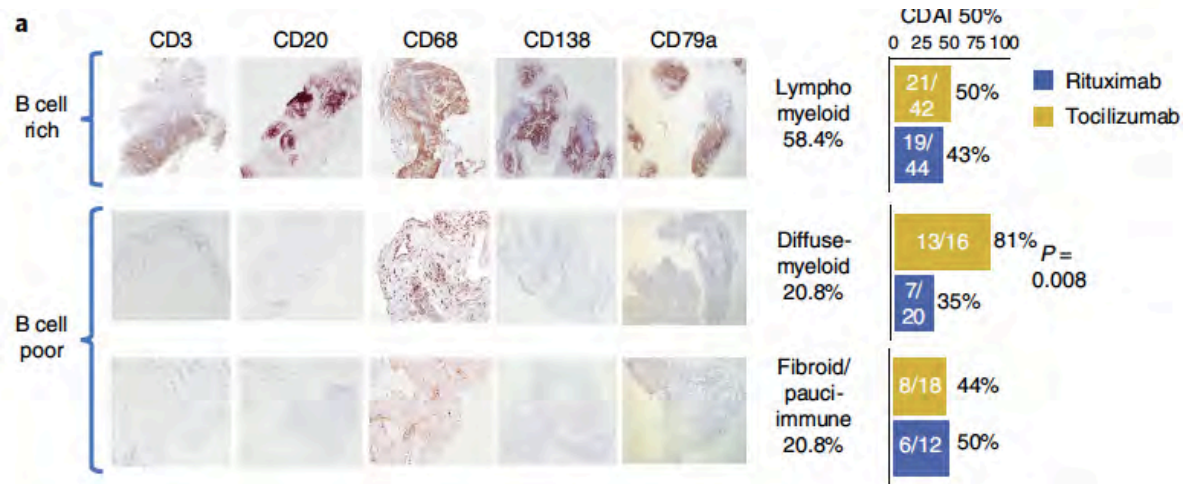
<https://doi.org/10.1038/s41591-022-01789-0>

nature  
medicine

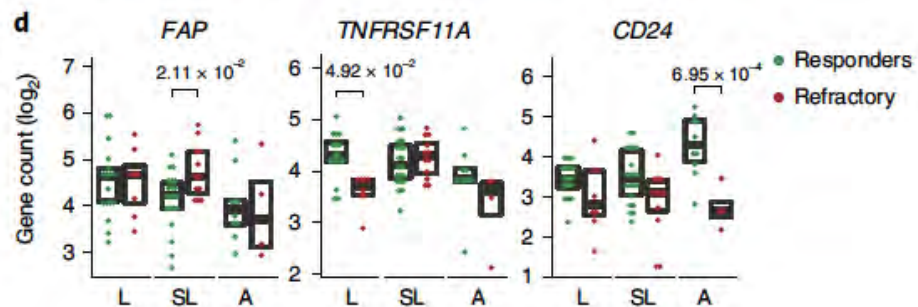
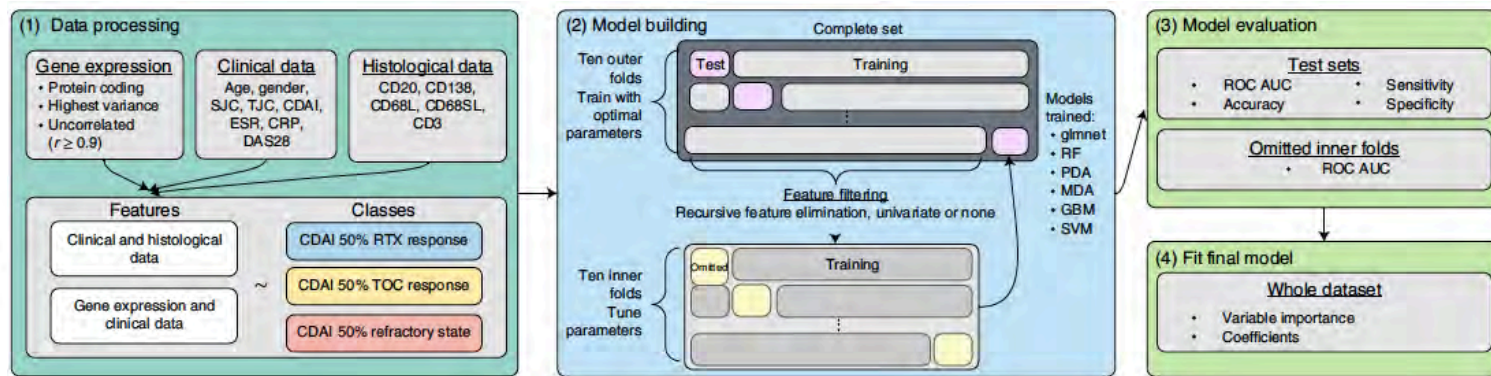
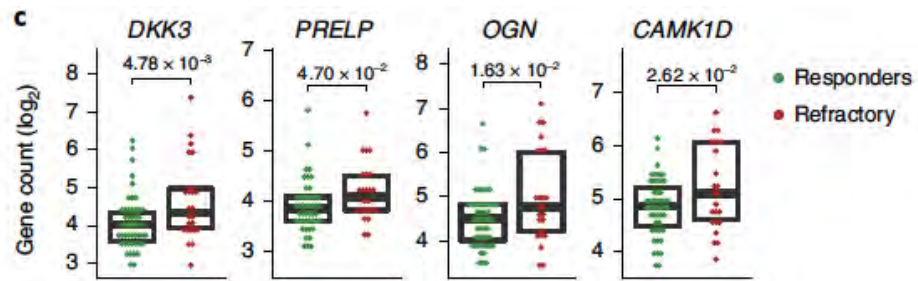
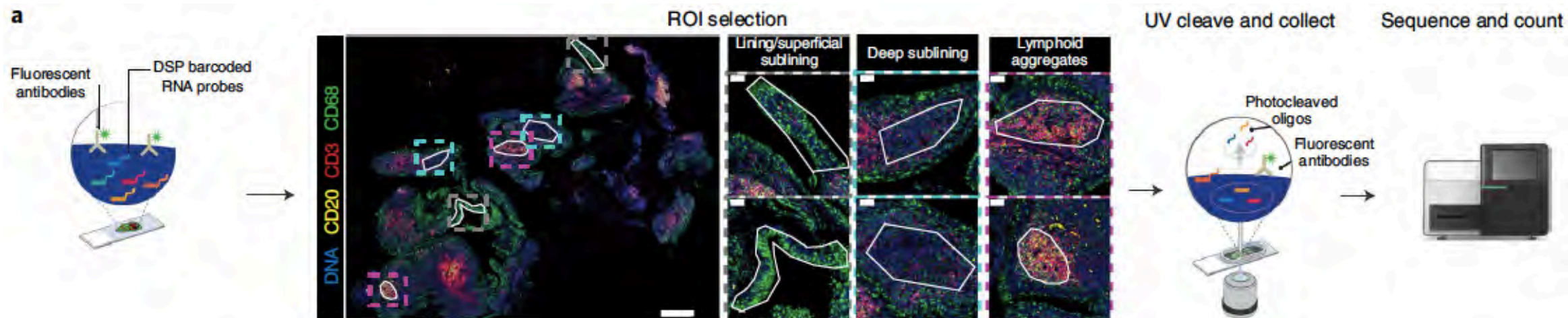
Check for updates

OPEN

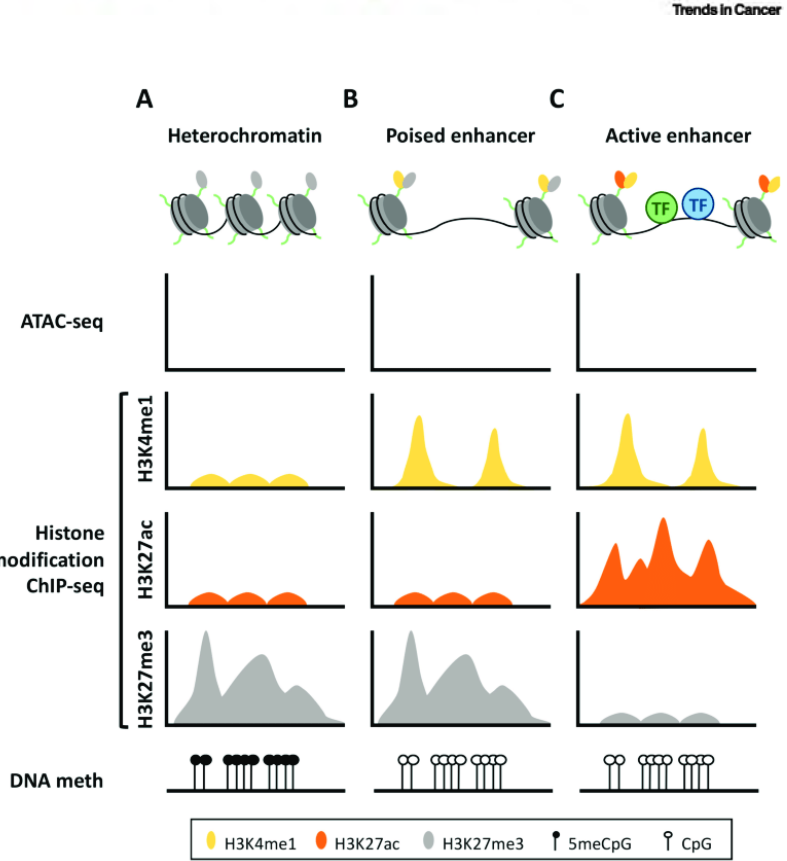
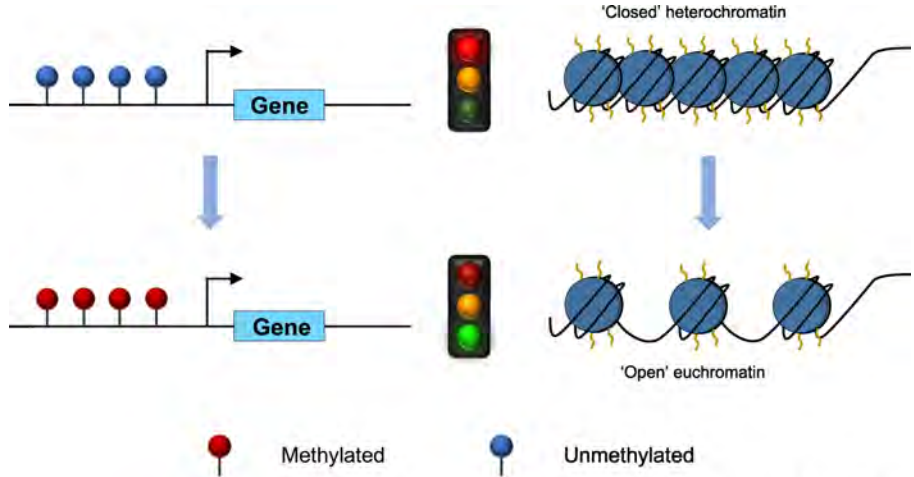
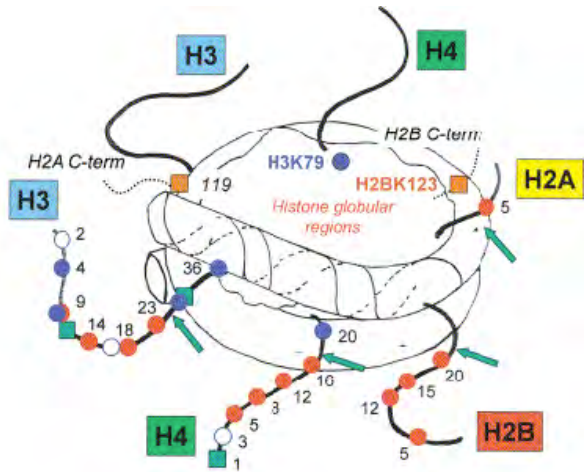
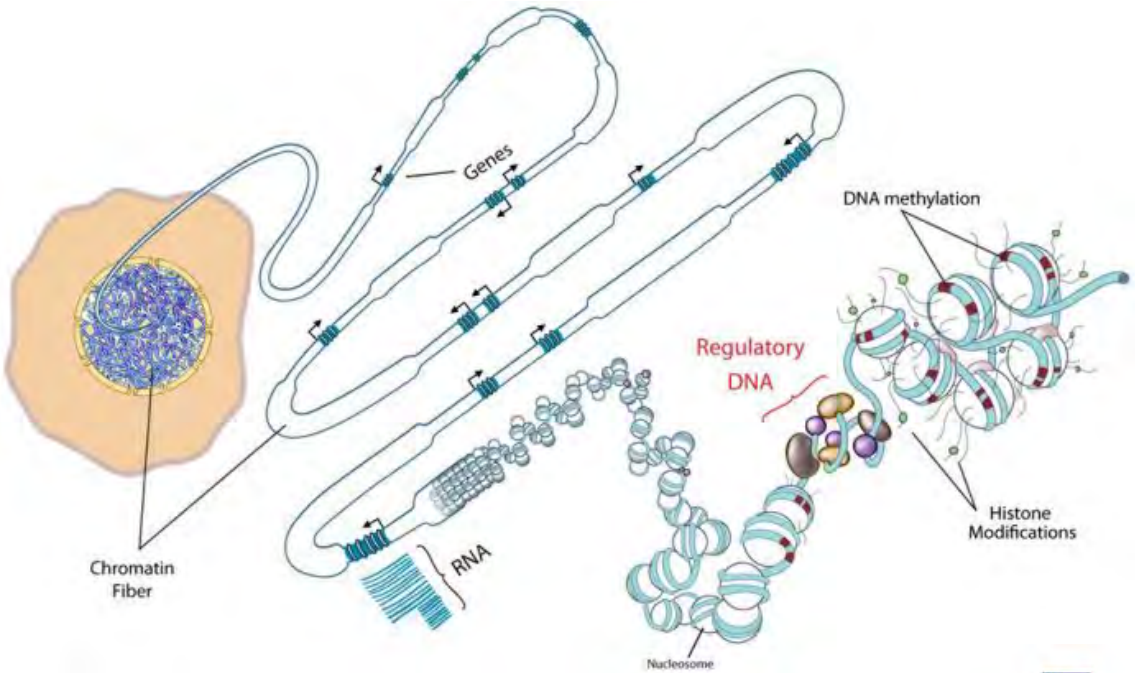
Rituximab versus tocilizumab in rheumatoid arthritis: synovial biopsy-based biomarker analysis of the phase 4 R4RA randomized trial



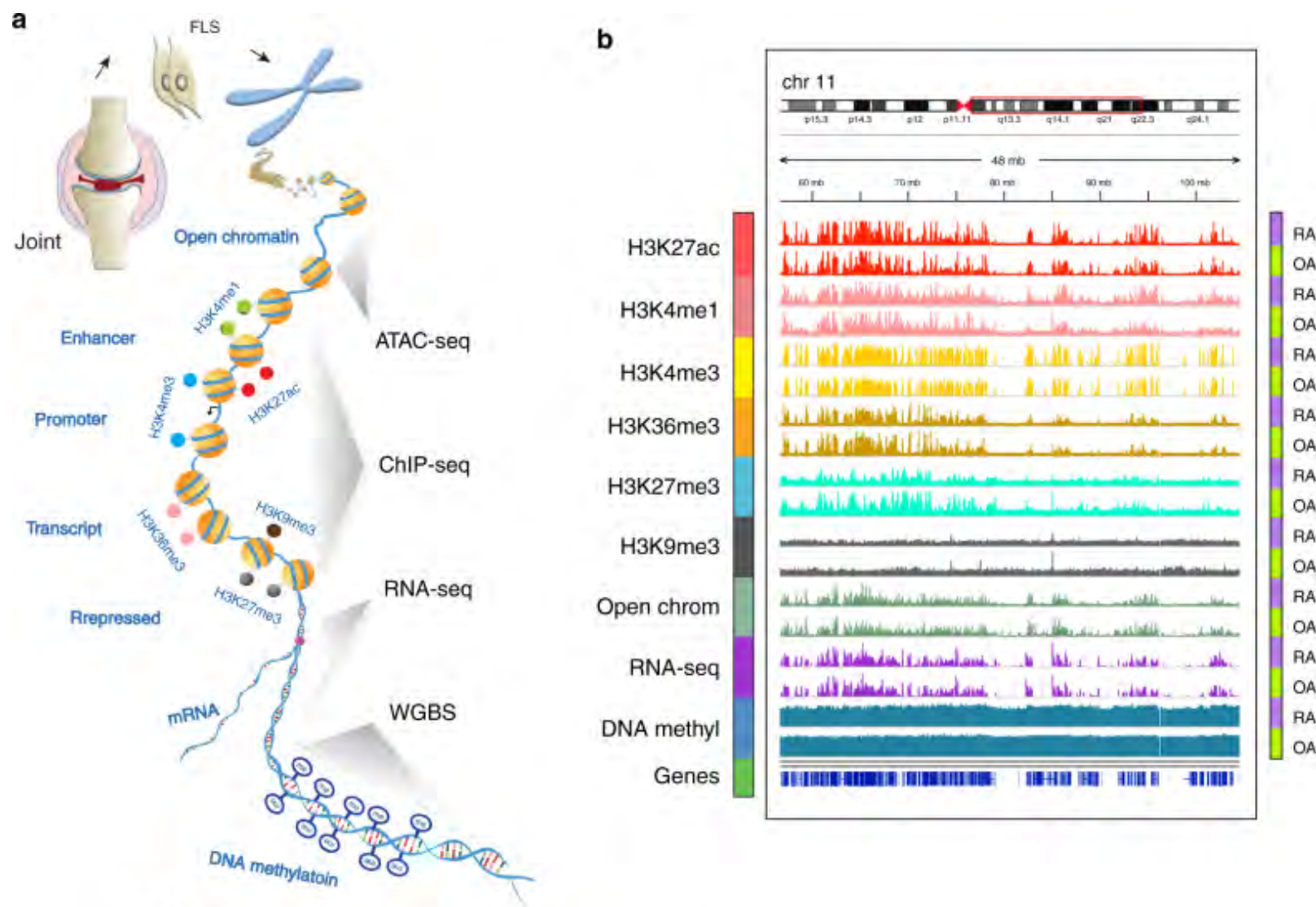
# The future of Transcriptomics and Personalized Medicine – Spatial Transcriptomics



# Epigenetics – Past and Response of the cell

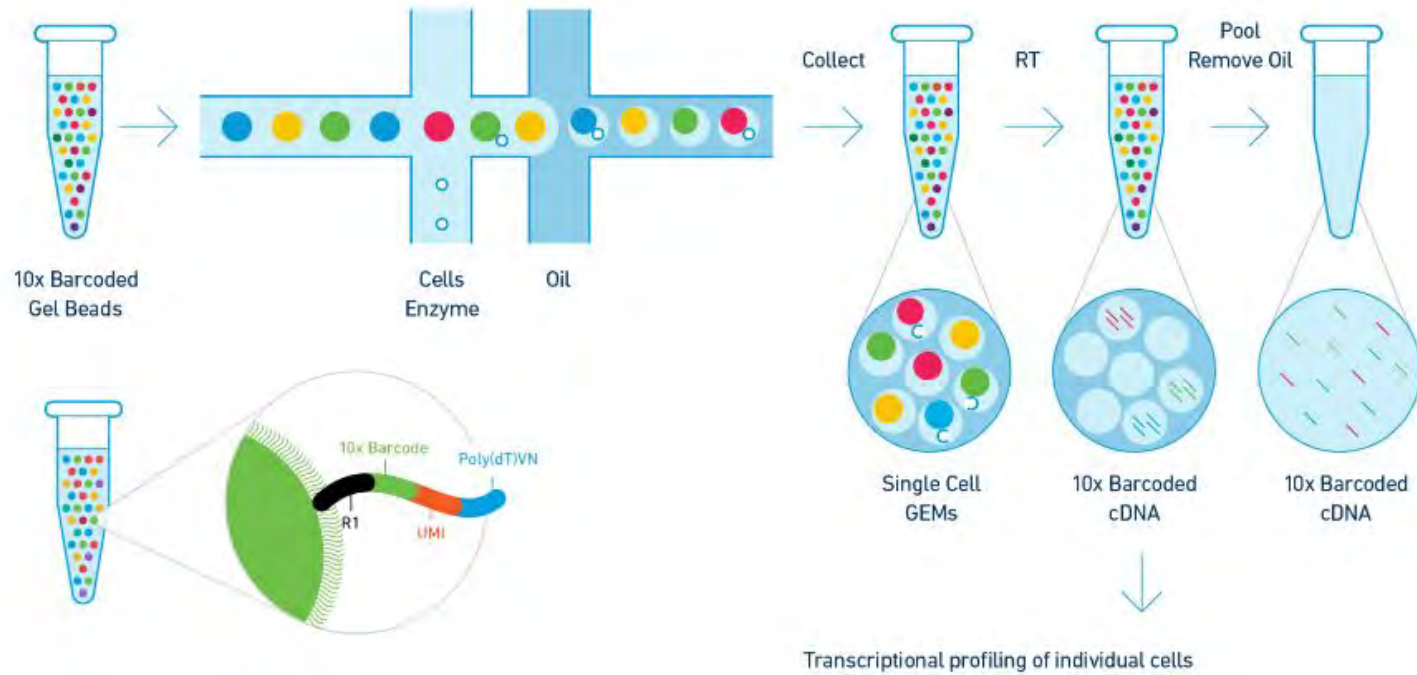


# Comprehensive epigenetic landscape of rheumatoid arthritis fibroblast-like synoviocytes



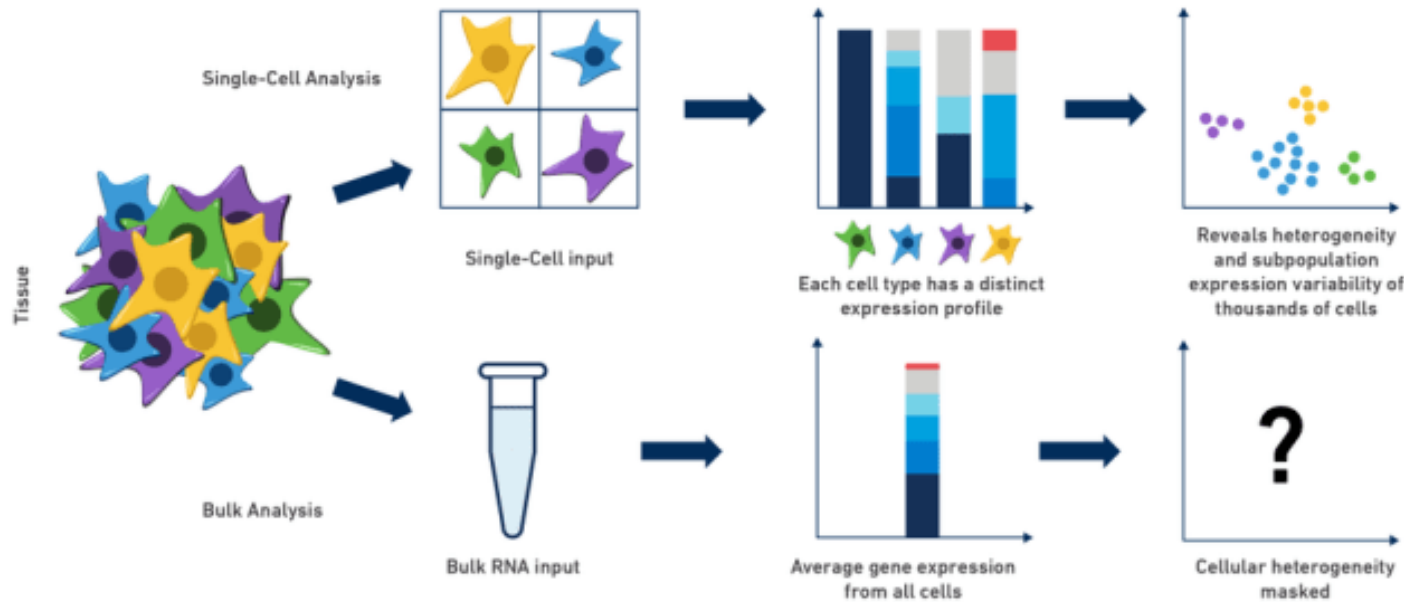
- Characterization of DMERs
- Differentially modified epigenetic regions
- Integration of different omics
- Epigenetic landscape sets new light on the genetic load and its pathophysiological mechanisms



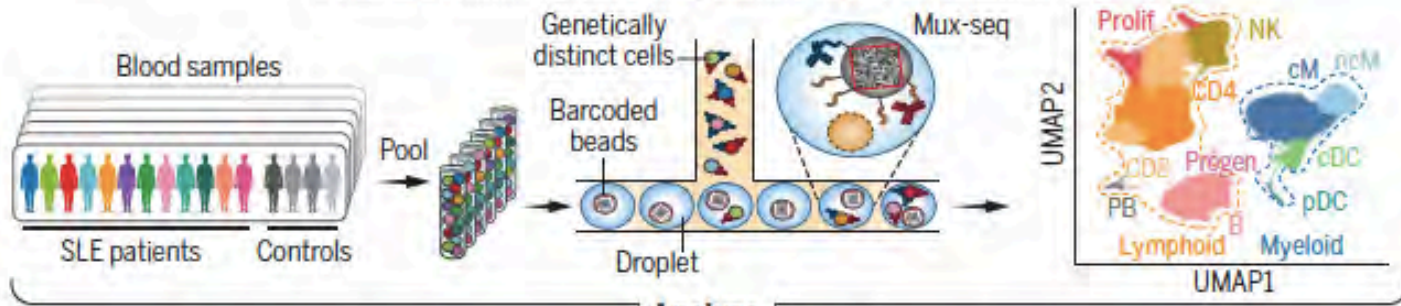


## Single Cell Technology

- Through almost all –omics layers
- Fighting heterogeneity with a previously proposed “uniform” population
- Characterization of effector and driver/“causal” cells

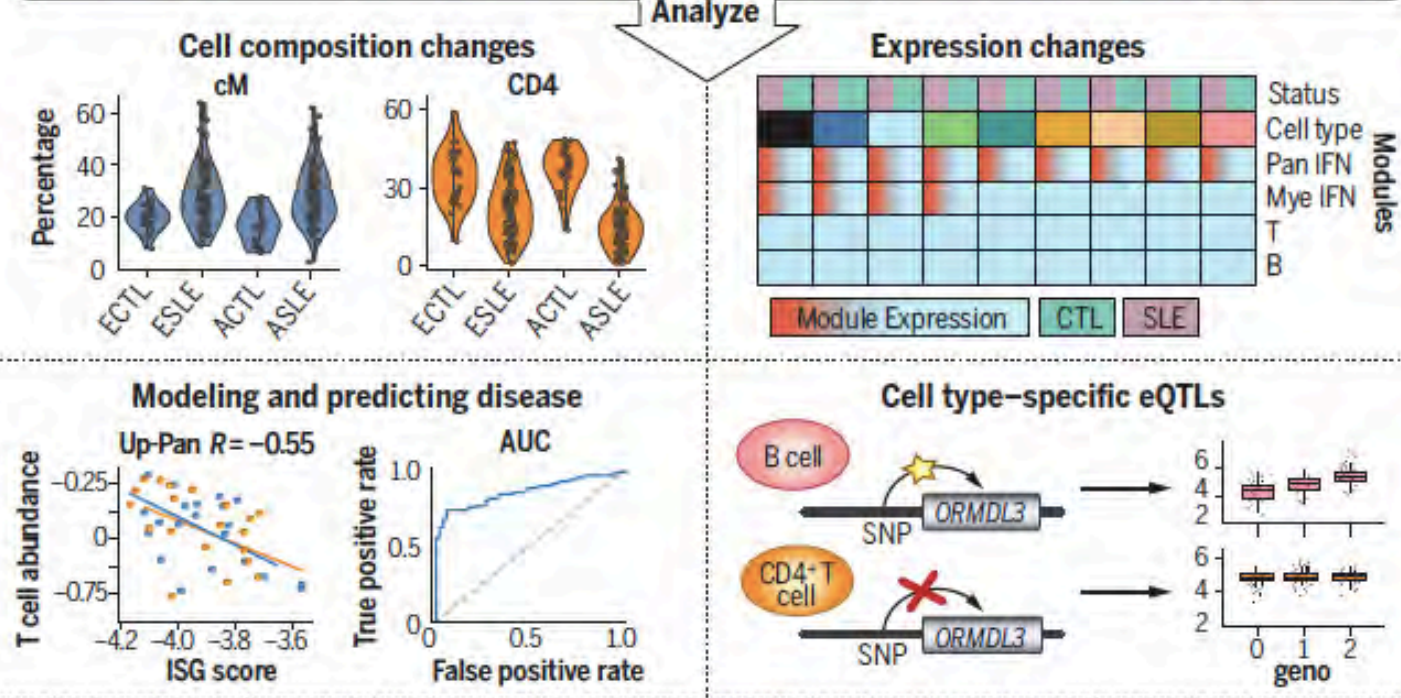


## Census of immune cells in systemic lupus erythematosus

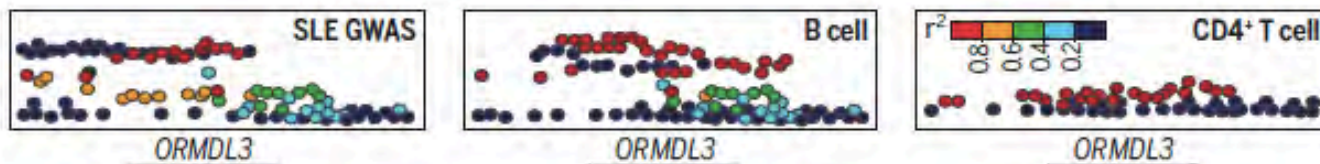


### IMMUNOGENOMICS

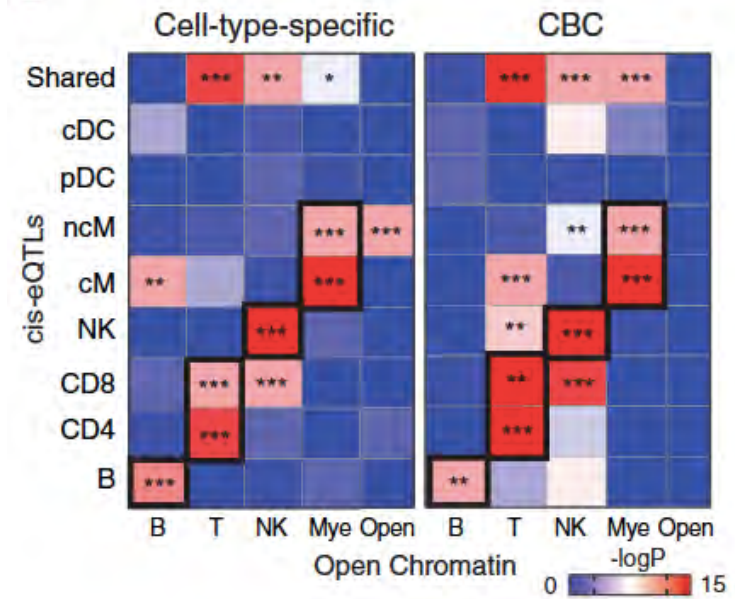
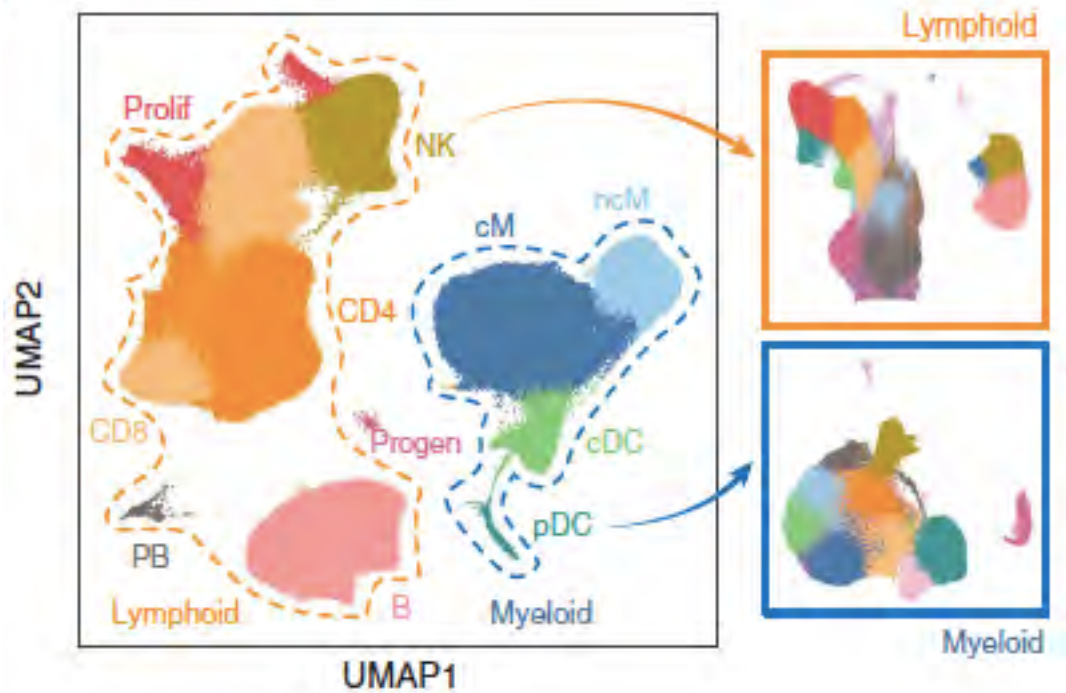
## Single-cell RNA-seq reveals cell type-specific molecular and genetic associations to lupus



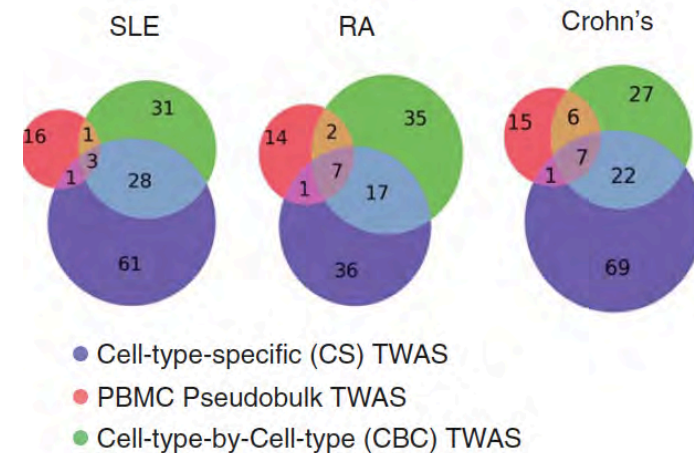
### Annotation of GWAS with cell type-specific eQTLs



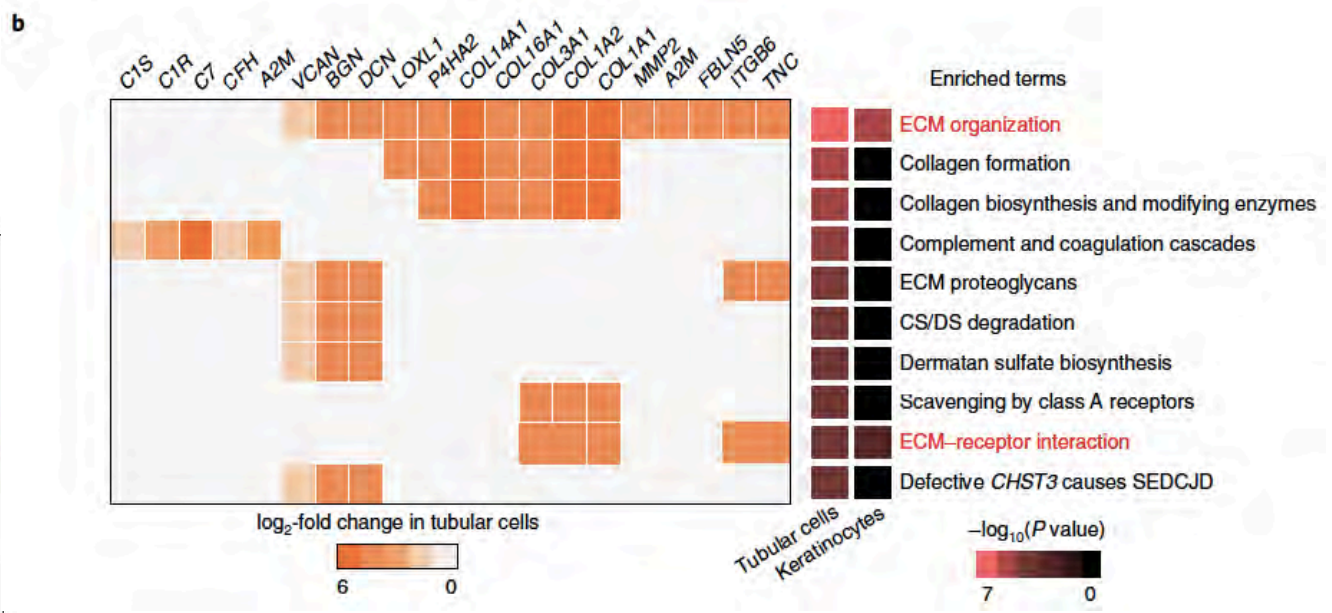
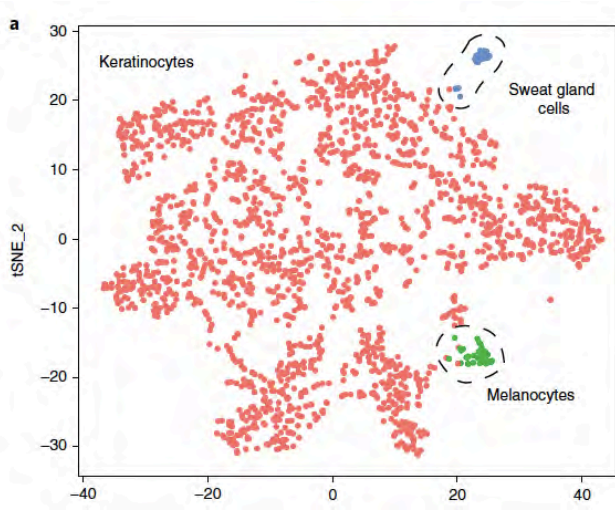
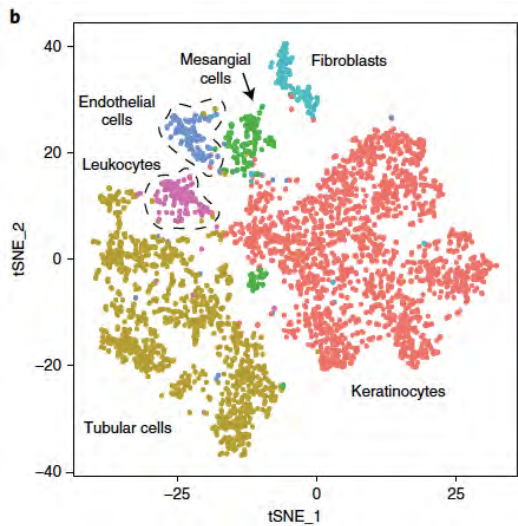
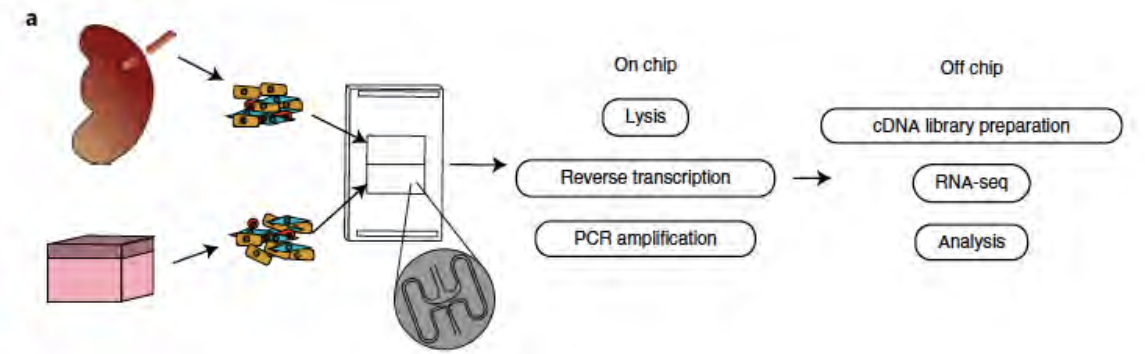
- Unique maps of cell heterogeneity within hundreds of patients
- Integration with genetic and epigenetic layer
- Cell-type specific effects
- Gene modules for disease prediction



- Single cell analysis of 1.2 million cells derived of SLE PMBCs reveals gene modules driving into molecular subtypes of the disease
- Omics integration leads to better understanding of genome wide disease-specific reprogramming

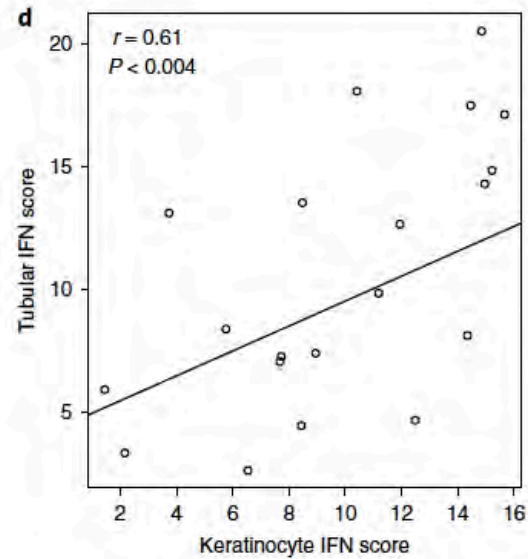
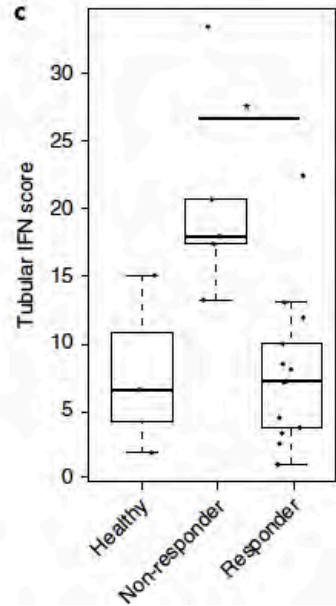


# Personalized medicine through accessible tissue single cell approach

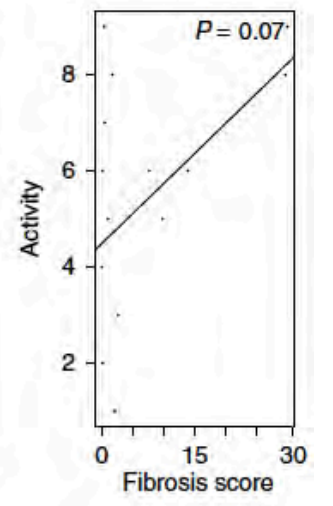
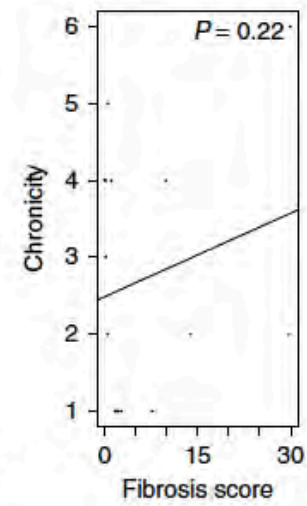
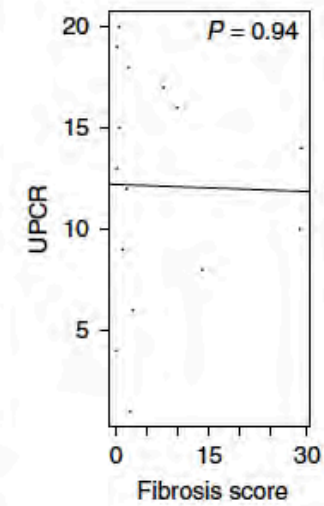
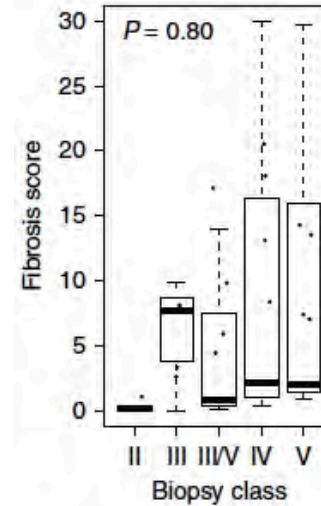


# Personalized medicine through accesible tissue single cell approach

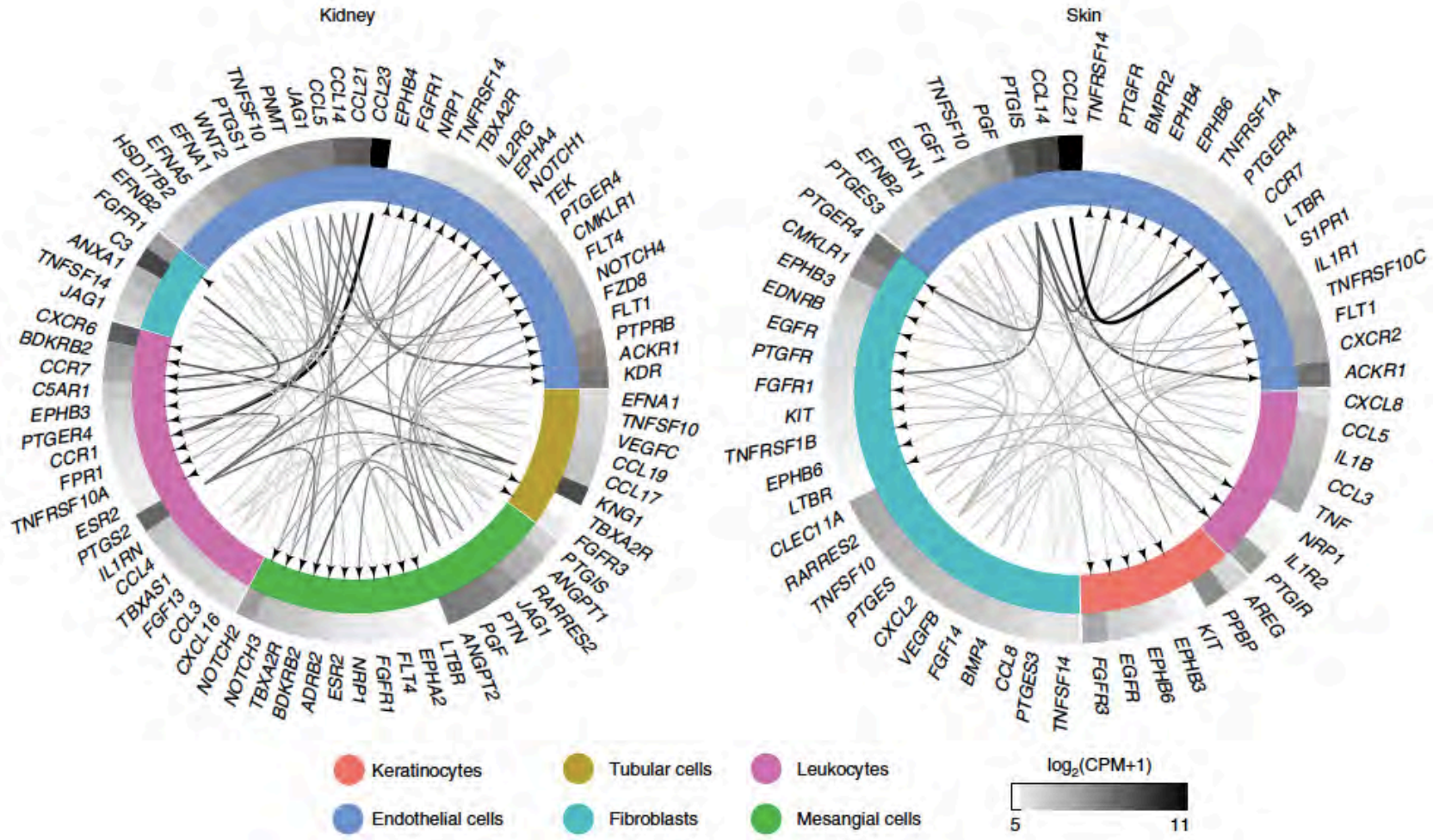
## Type-I IFN score



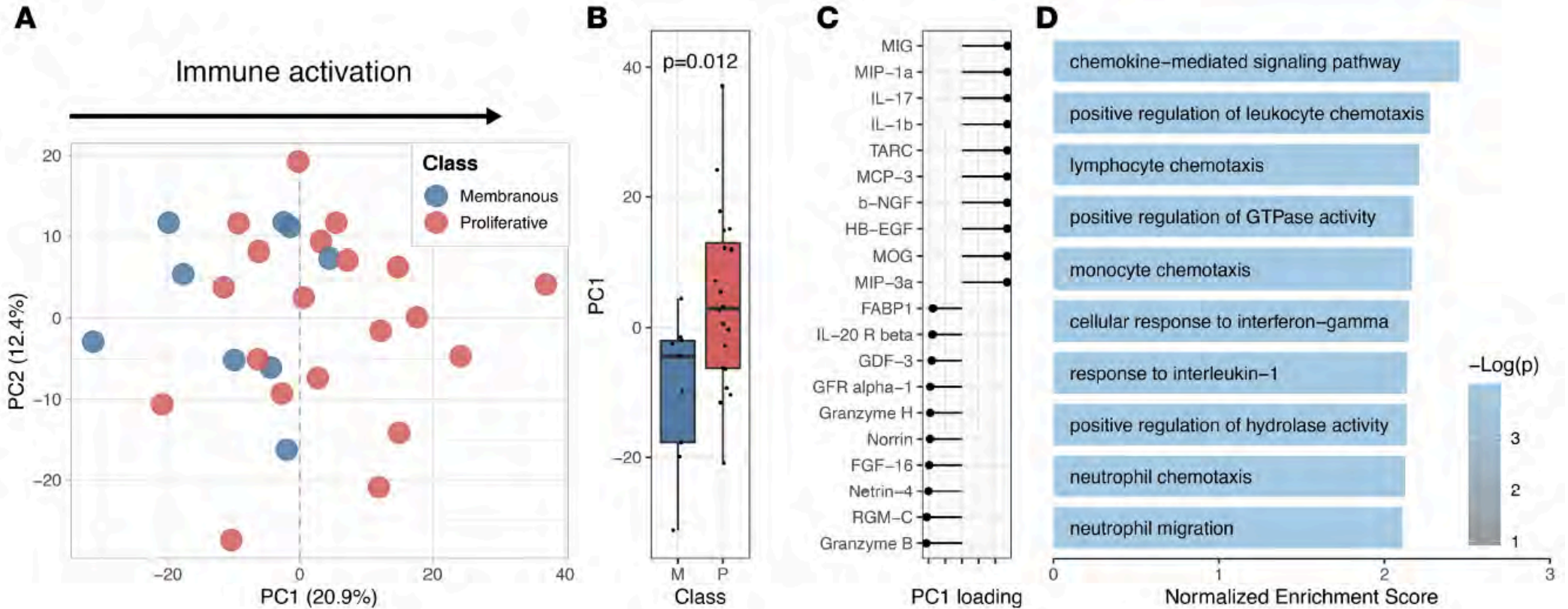
## Fibrotic score



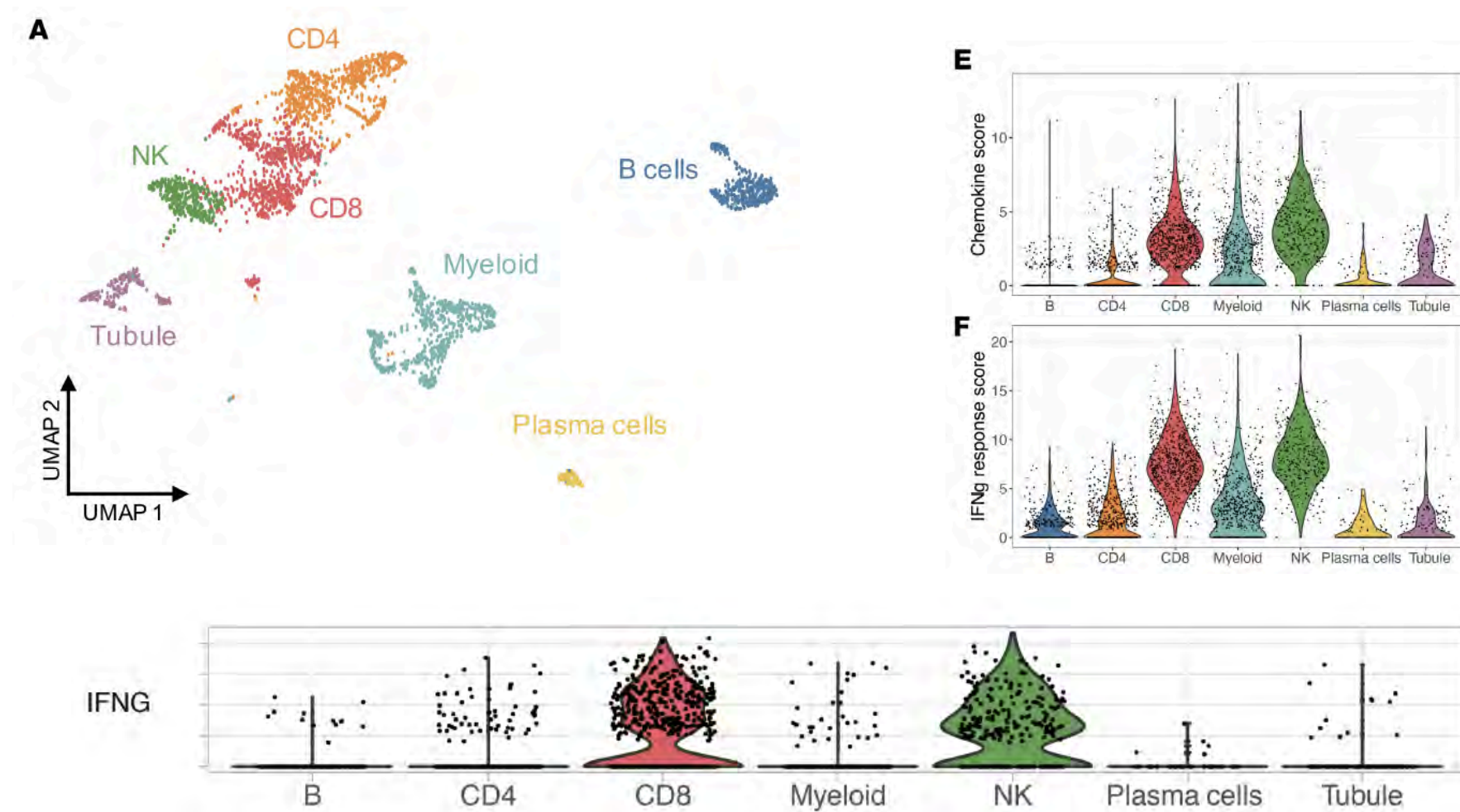
# Personalized medicine through accessible tissue single cell approach



# Proteomics analysis in urine leads to stratification of SLE patients according to kidney damage

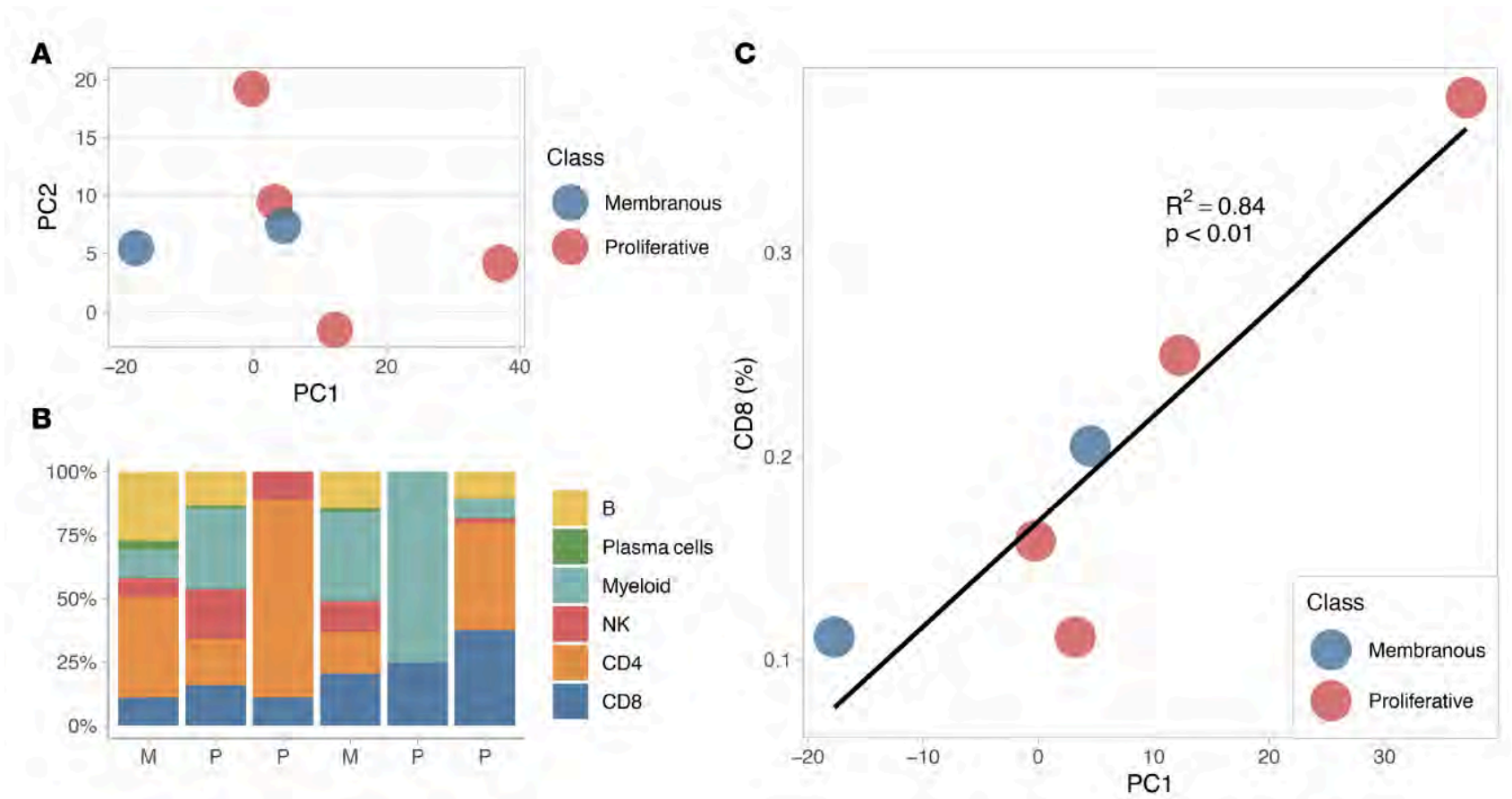


# Proteomics analysis in urine leads to stratification of SLE patients according to kidney damage





# Proteomics analysis in urine leads to stratification of SLE patients according to kidney damage



## Take-home messages

- Systems Medicine initiates a new era in Rheumatology, providing novel tools in clinical practice
- Pathophysiological mechanisms, previously unknown are elucidated through -omics
- Genetic basis of each disease is seen through a new lens
- Single cell studies are conquering almost all rheumatic diseases from various aspects
- Personalized medicine is based solely on systems approach
- Future studies will analyze spatial cell characteristics of causal and inflamed tissues

THANK YOU