Differential expression of carboxypeptidase M in cancers of the breast.

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Breast cancer affects women at relatively high frequency¹. We mined published microarray datasets^{2,3} to determine in an unbiased fashion and at the systems level genes most differentially expressed in the primary tumors of patients with breast cancer. We report here significant differential expression of the gene encoding carboxypeptidase M, CPM, when comparing primary tumors of the breast to the tissue of origin, the normal breast. CPM was also differentially expressed in lymph node metastasis in human breast cancer. CPM mRNA was present at significantly lower quantities in tumors of the breast as compared to normal breast tissue. Analysis of human survival data revealed that expression of CPM in primary tumors of the breast was correlated with overall survival in patients with HER2+ subtype cancer, demonstrating a relationship between primary tumor expression of a differentially expressed gene and patient survival outcomes influenced by PAM50 molecular subtype. CPM may be of relevance to initiation, maintenance or progression of cancers of the female breast.

Keywords: breast cancer, CPM, carboxypeptidase M, systems biology of breast cancer, targeted therapeutics in breast cancer.

Invasive breast cancer is diagnosed in over a quarter of a million women in the United States each year¹ and in 2018, breast cancer was the leading cause of cancer death in women worldwide⁴. While patients with localized breast cancer are provided a 99% 5-year survival rate, patients with regional breast cancer, cancer that has spread to lymph nodes or nearby structures, are provided an 86% 5-year survival rate^{5,6}. Patients with metastasis to distant sites, like the brain, are provided a 27% 5-year survival rate^{5,6}. Understanding how primary tumors are most transcriptionally different from the tissue from which they originate, the breast, can facilitate development of novel diagnostic and therapeutics to promote early detection and enhanced treatment, and contribute to efforts to prevent progression to metastatic stages. We mined published microarray data^{2,3} to understand at the transcriptome level and in an unbiased fashion genes most differentially expressed in primary tumors of the breast as compared to normal breast tissue. Carboxypeptidase M emerged as among the most differentially expressed genes in cancer of the female breast.

Methods

We utilized datasets GSE42568² and GSE124648³ for this global differential gene expression analysis of female breast cancer. GSE42568 was generated using Affymetrix Human Genome U133 Plus 2.0 array technology with $n=17$ normal breast tissue biopsies and $n=104$ primary breast tumor biopsies from patients with breast cancer; analysis was performed using platform GPL570; the majority of patients whose tumors were analyzed were age 50 or older. GSE124648 was generated using Affymetrix Human Genome U133A array technology with $n=10$ normal breast tissues and $n=44$ lymph node metastases from patients with breast cancer; analysis was performed using platform GPL96. The Benjamini and Hochberg method of p -value adjustment was used for ranking of differential expression but raw p -values were used to assess statistical significance of global differential expression. Log-transformation of data was auto-detected, and the NCBI generated category of platform annotation was used. A statistical test was performed to evaluate whether CPM expression was significantly different between primary breast tumors and normal breast tissue using a two-tailed t-test. For Kaplan-Meier survival analysis, we used the Kaplan-Meier plotter online tool⁷ for correlation of CPM mRNA expression levels with overall survival (OS) in $n=431$ patients with basal-like subtype cancer, $n=596$ patients with luminal A subtype cancer, $n=439$ patients with luminal B subtype cancer, $n=362$ patients with HER2+ cancer, and $n=51$ patients with normal-like subtype cancer.

Results

We performed discovery of genes associated with breast cancer in females by mining two independently published microarray datasets^{2,3}.

CPM is differentially expressed in primary tumors of the breast.

Studying the global gene expression profiles of 104 breast cancers from patients aged 31 to 89 revealed that the gene encoding carboxypeptidase M, CPM, was among the genes most differentially expressed in tumors of the breast in human breast cancer (Chart 1). When sorting each of the genes expressed in tumors of the breast based on significance of difference as compared to normal breast tissue, CPM ranked 103 out of 54675 total transcripts, equating to 99.8% differential expression (Chart 1). Differential expression of CPM in female breast cancer was statistically significant (Chart 1; $p=1.02E-30$).

Analysis of a second microarray dataset³, here studying global gene expression patterns in the lymph node metastases of 44 patients with breast cancer, again revealed significant differential expression of CPM in human breast cancer (Chart 2). When sorting each of the genes expressed in the lymph node metastases of patients with breast cancer based on significance of difference as compared to normal breast

tissue, CPM ranked 1027 out of 22283 total transcripts, equating to 95.4% differential expression (Chart 2). Differential expression of CPM in the tumors of patients with breast cancer was statistically significant (Chart 2; $p=1.18E-06$). These data suggested that differential expression of CPM was not an artifact of a single microarray dataset, nor was it strictly associated with primary tumors of the breast, rather a transcriptional feature representing a spectrum of transformation in human cancer.

CPM is expressed at significantly lower levels in breast tumors as compared to the breast.

We obtained exact mRNA expression levels for CPM from the breast and from breast tumors to understand the magnitude and direction of CPM expression change. CPM was expressed at lower levels in tumors of the breast as compared to normal breast tissue (Figure 1). Decreased expression of CPM in primary breast tumors was statistically significant (Figure 1: $p<0.0001$). CPM was expressed at 6.00 ± 1.43 arbitrary units (AU) in normal breast tissue, while it was expressed at 2.92 ± 0.59 AU in tumors of the breast. We calculated a mean fold change of 0.49 in CPM mRNA levels when comparing primary tumors of the breast to normal breast tissues.

CPM expression correlates with survival outcomes in HER2+ subtype human breast cancer.

We performed Kaplan-Meier survival analysis to study relationships between tumor CPM mRNA expression levels and survival outcomes in patients with breast cancer. We observed a correlation between CPM expression and overall survival (OS) in patients with HER2+ subtype breast cancer which was statistically significant (Figure 2; log rank p -value: 0.034 for overall survival, hazard ratio: 1.52 (1.03-2.25) (Fig. 2)). CPM mRNA levels were a negative prognostic indicator in HER2+ subtype breast cancer patients. Median OS was 59.83 months for HER2+ patients with low tumor expression of CPM while median OS was 45 months for HER2+ patients with high tumor expression of CPM (Chart 3). CPM primary tumor expression was not correlated with overall survival in basal-like breast cancer (Figure 2; log rank p -value: 0.62 for OS, hazard ratio: 0.91 (0.62-1.33) (Fig. 2)), luminal A subtype breast cancer (Figure 2; log rank p -value: 0.58 for OS, hazard ratio: 0.89 (0.58-1.36) (Fig. 2)), in luminal B breast cancer (Figure 2; log rank p -value: 0.53 for OS, hazard ratio: 1.12 (0.79-1.59) (Fig. 2)) or in patients with normal-like breast cancer (Figure 2; log rank p -value: 0.3 for OS, hazard ratio: 0.59 (0.21-1.62) (Fig. 2)).

Thus, through comparative transcriptome analysis of primary tumors of the breast and normal breast tissue, we found that differential expression and down-regulation of CPM was among the most significant transcriptional features in primary tumors from patients with breast cancer. CPM expression in primary tumors of the breast was correlated with overall survival in patients with HER2+ subtype disease, with mRNA levels of CPM a negative prognostic indicator for HER2+ breast cancer patients.

Discussion

Invasive breast cancer is a medical problem with a 27% 5-year survival rate for women whose disease has spread to distant sites^{5,6}. To facilitate understanding of the basic transcriptional differences between primary tumors of the breast and the tissues from which these tumors originate, normal breast tissues, we performed comparative transcriptome analysis using two independently published microarray datasets^{2,3}, providing evidence here that differential expression of carboxypeptidase M, encoded by CPM, is a defining transcriptional feature of human breast cancer: in patients diagnosed after age 50, and in the lymph node metastases of patients with breast cancer. CPM was expressed at significantly lower levels in primary tumors from patients with breast cancer as compared to normal breast tissue. Importantly, in patients with HER2+ subtype breast cancers, expression of CPM was correlated with overall survival. Carboxypeptidase M and the molecular processes to which it pertains to may be relevant to the initiation or progression of human breast cancer.

References

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Rank: 103
Probe ID: 241765_at
p-value: 1.02E-30
t: 1.56E+01
B: 59.3209156
Gene: CPM
Gene name: carboxypeptidase M

Chart 1: CPM is differentially expressed in the primary tumors of patients with breast cancer.

Rank of differential expression, probe ID, p-value of global differential expression, t, a moderated t-statistic, B, the log-odds of differential expression between the groups compared, gene and gene name are listed in this chart.

Rank: 1027
Probe ID: 206100_at
p-value: 1.18E-06
t: 5.453024
B: 5.020157
Gene: CPM
Gene name: carboxypeptidase M

Chart 2: CPM is differentially expressed in the lymph node metastases of patients with human breast cancer.

Rank of differential expression, probe ID, p-value of global differential expression, t, a moderated t-statistic, B, the log-odds of differential expression between the groups compared, gene and gene name are listed in this chart.

Figure 1: CPM is expressed at significantly lower levels in primary breast tumors as compared to normal breast tissue.

The mRNA expression level of CPM in normal breast tissue (left) and in primary tumors of the breast (right) is graphically depicted with the result of a statistical test evaluating significance of difference in CPM expression between normal breast tissue and primary tumors of the breast, a *p*-value, listed above.

Figure 2: CPM expression correlates with overall survival in patients with HER2+ subtype breast cancer, but not in patients with basal, luminal A, luminal B or normal-like subtype cancer.

Depicted in this Kaplan-Meier plot is the probability of overall survival (OS) for $n=431$ patients with basal-like breast cancer (upper left), $n=362$ patients with HER2+ breast cancer (upper right), $n=596$ patients with luminal A breast cancer (middle left), $n=439$ patients with luminal B breast cancer (middle right), and $n=51$ patients with normal-like breast cancer (below) stratified into two groups, based on low or high expression of CPM in

patient primary tumors. The log rank p-value denoting statistical significance of difference in overall survival when comparing the two groups, as well as hazard ratio for this comparison is listed above. Listed below is the number of patients at risk (number of patients alive) per interval, after stratification based on CPM expression; in the first interval, number at risk is number of patients alive; in each subsequent interval, number at risk is the number at risk less those who have expired or are censored.

HER2+ patients

Low CPM expression: 59.83 months

High CPM expression: 45 months

Chart 3: In HER2+ subtype breast cancer, median overall survival is superior in patients with low primary tumor expression of CPM.

The overall survival of $n=439$ HER2+ subtype breast cancer patients based on stratification into low or high tumor expression of CPM is listed in this chart.