

Non-invasive prostate cancer subtyping using 5hmC-sequencing of cell-free DNA

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Background: Epigenetic and genetic characterization of cell-free DNA (cfDNA) has the potential to non-invasively classify tumor subtypes to help guide precision oncology. In this study, we aimed to study whether 5-hydroxymethylcytosine sequencing (5hmC-seq) of cfDNA predicts gene expression and can distinguish tumor subtypes defined in matched tissue from men with metastatic castration-resistant prostate cancer (mCRPC).

Methods: We performed 5hmC-seq and low-pass whole-genome sequencing (lpWGS) of plasma-derived cfDNA from 86 mCRPC patients with matched tumor tissue that were profiled with 5hmC-seq (N=49) and RNA-sequencing (N=86). We developed a 5hmC-seq based Random Forest-based hierarchical classifier to distinguish androgen receptor (AR)- positive prostate cancer (ARPC), neuroendocrine prostate cancer (NEPC) and double-negative prostate cancer (DNPC). The previously published Griffin and ctdPheno tools were used to classify samples based on lpWGS. The locked classifiers were evaluated in a separate cfDNA cohort from men with mCRPC (N = 64).

Results: Samples with less than 10% circulating tumor DNA fraction (ct-fraction) were categorized as a good prognosis group, while the rest of the samples were used for classifier training and testing (ARPC (N = 23), NEPC (N = 6), and DNPC (N = 11)). The 5hmC-based Random Forest subtype classifier reached an AUC of 0.90 [95% CI 0.78-1.0] and 0.88 [95% CI 0.77-1.0] for NEPC and DNPC prediction in cross-validation, respectively. The 5hmC-based predicted subtype in the separate validation cohort was strongly prognostic for overall survival; NEPC compared to ARPC HR = 13.9 [95% CI: 1.6 - 121.8], p = 0.017, and DNPC compared to ARPC HR = 26.5 [95% CI: 4.0 - 178.2], p = 7.4 x 10⁻⁴, also after adjusting for ct-fraction. Furthermore, high 5hmC-seq NE score in cfDNA predicted shorter overall survival (HR = 13.7 [95% CI: 3.5 – 54.2], p = 2 x 10⁻⁴), whereas high 5hmC-seq AR score predicted longer overall survival (HR = 0.15 [95% CI: 0.05 – 0.41], p = 2.1 x 10⁻⁴). Concurrently sequenced lpWGS demonstrated that the ratio of short (< 150 bp) vs. long (150 ~

180 bp) fragments was higher in NEPC compared to other subtypes at the similar ct-fraction (ANOVA test $P = 0.0028$). ARPC showed low central coverage at AR binding sites, while NEPC exhibited low central coverage at ASCL1 binding sites. DNPC displayed no signal at either binding site. The predicted subtypes based on nucleosome positioning patterns from lpWGS were concordant with that predicted by 5hmC-seq in the separate cohort.

Conclusions: The developed multi-class subtype classifiers using cfDNA showed promise in accurately predicting subtypes defined in matched tissue and were strongly prognostic. Thus, 5hmC-seq of cfDNA may non-invasively reveal tumor phenotypes, classify tumor subtypes in concordance with matched tissue, and potentially monitor tumor progression through tumor-specific signaling. Limitations include capturing sufficient fraction of tumor derived cfDNA.

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Conflicts of Interest Disclosure Statement

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