

# A Highly Scaled Proteomic Discovery Study for Prostate Cancer Diagnostic Signatures Using Proteograph™ Workflow with Trapped Ion Mobility Mass Spectrometry

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### Prostate Cancer Diagnostic Goal

- PROBLEM:** Current standard-of-care prostate cancer diagnosis using PSA blood testing exhibits low specificity for cancer and leads to unwarranted prostate biopsy
- GOAL:** Our study seeks to discover new proteomic PSA reflex markers in blood with increased specificity for total and high-grade prostate cancer
- APPROACH:** We leverage a novel multi nanoparticle-based, deep and scalable proteomics platform to investigate ~900 patient serum samples and controls

### The Technology

**seer**  
**Proteograph™ Product Suite**  
Automated multi nanoparticle (NPs)-based protein enrichment and processing to purified, quantitated, reconstituted peptides

Protein corona formation upon incubation of nanoparticles with fluid biopsy input

**BRUKER**  
**timsTOF Pro**

**Proteograph™ Workflow**

- 250 ul serum input and 5 NPs panel
- Proteograph SP100 automation system
- Multiple Proteograph workflow controls
- 16 samples/8 hours/instrument

**Mass Spectrometry**

- dia-PASEF, primary acquisition method
- DDA PASEF, for spectral library generation

### Ideal Cohort and Rigorous Design

Total of >900 Clinical Patient Serum Specimens

~70% for Training Set

- Recruitment:** Elevated PSA and/or abnormal digital rectal exam
- Sourcing:** SABOR Repository and prior study cohort
- Clinical Course:** All men biopsied with deep clinical data; classes:
  - No Cancer Detected
  - Lower-Grade Cancer Detected
  - Higher-Grade Cancer Detected
- Specimen Collection:** All specimens collected pre-biopsy and before any treatment, unified and consistent EDNR protocol

~30% for Test Set

#### The PRoBE Biomarker Discovery Study Framework

Prospective-Specimen-Collection, Retrospective-Blinded-Evaluation

- Sufficient, ideal specimen set**
- Specimen set division into training and test subsets**
- Blinding, randomization**
- Systematic evaluation of marker performance**

**References:**

- Prostate cancer diagnostics: Litwin and Tan, 2017, *JAMA* 317:2532.
- PRoBE framework: Pepe and Feng, 2011, *Clin. Chem.* 57:1093
- Seer Proteograph: Blume *et al.*, 2020, *Nat. Comm.* 11:3662.
- Bruker timsTOF, dia-PASEF: Meier *et al.*, 2020, *Nat. Meth.* 17:1229.
- DIA-NN: Demichev *et al.* 2020, *Nat. Meth.* 17:41.
- MSFragger: Kong *et al.* 2017, *Nat. Meth.* 14:513.

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### Analytics Overview

**Database Searching**

- Employ Proteograph™ Analysis Suite (PAS), DIA-NN module
- Data inspection including spectral library strategy assessment

**Candidate Discovery**

- Cross-validate potential tools including classifier
- Probe for markers with increased disease specificity at high sensitivity

**Signature Evaluation**

- Leverage reserved/untouched data from test set
- Implement chosen analytic approach to validate signature performances

### Spectral Library Assessment

**Description of Various Approaches**

**“In-Silico Library Filtered by Peptide or Protein”**

Spectra culled from DIA-NN library-free search of entire Training Set

**“Offline Fractionation”**

Subset Training Set serum samples chosen systematically (n=75) → Offline HpH-RP peptide fractionation by NP → 240 LC-MS DDA PASEF mode injections

**“Long Gradient DDA”**

Subset Training Set serum samples chosen systematically (n=75) → Supplemental Proteograph Workflow → 25 long-gradient LC-MS DDA PASEF mode injections

Spectral Library	Protein Groups	Peptides	Fragment Ions
Fractionation	6258	69079	1867008
Long DDA	2365	21251	728942
All Combined	6354	74158	2082962

**Training Set Proteomic Depth Across Database Search Strategies**

**Fractional detection of proteins in training set using different search strategies.** All dia-PASEF (DIA) database searching done using DIA-NN in Seer PAS. DDA PASEF database searching for spectral library generation from deep fraction analysis done using MSFragger. *In-silico* spectral libraries culled from DIA-NN training set library-free database searches.

- *In-silico* spectral library using spectra filtered according to peptides identified in this study
- *In-silico* spectral library using spectra filtered according to proteins identified in this study
- Traditional spectral library generated using DDA PASEF analysis of fractionated sample subset
- Library-free analysis for comparison (not using any spectral library)

### ML Assessment for Signature Detection

INPUT: ☒ NP-protein (or peptide) features + intensities ☒ Specimen metadata ☒ Time allotment

Imputation → Rescaling → Features → ML Classifier → Cost

**Automated assessment of tools for multiple data analytic steps including machine learning classifier selection.** Optimal paths exhibit smaller “cost” value and bias toward yellow end of color spectrum.

### Training Set Data

**Protein-Level Coverage Across Study Arms and Nanoparticles**

Nanoparticle	Case	Control
NP1	983	983
NP2	2083	2070
NP3	1170	1171
NP4	1267	1297
NP5	1440	1465

**Peptide-Level Coverage Across Study Arms and Nanoparticles**

Nanoparticle	Case	Control
NP1	3360	3314
NP2	6167	6211
NP3	3957	3971
NP4	4192	4229
NP5	4661	4663

**Percent Protein Detection Across Training Set**

Aggregate count of detected protein groups in fraction of samples across entire set. All dia-PASEF (DIA) database searching done in Library-free mode using DIA-NN in Seer PAS.

**Measurement Consistency and Variance Sources**

**Coefficient of Variation for Protein Measurements**

Nanoparticle	Case	Control
NP1	63.2	62.2
NP2	61.4	60.3
NP3	59.9	59.0
NP4	64.2	62.0
NP5	63.3	61.1

**Process Control Variance**

Nanoparticle	CoV (%)
NP1	35.3
NP2	33.9
NP3	32.6
NP4	35.6
NP5	33.6

**Variance Decomposition: NP2**

Category	Variance Explained (%)
Plate No.	0.072
Sample No.	0.005
Residuals	0.918

**Work in Progress:** Analytics with spectral library(ies) implemented for database searching, peptide-level feature analysis, contextualization with rich available clinical metadata including PSA assay measurements. Validation to be performed thereafter.