

CELL INDEX DATABASE (CELLX): A WEB TOOL FOR CANCER PRECISION MEDICINE*

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The Cell Index Database, (CELLX) (<http://cellx.sourceforge.net>) provides a computational framework for integrating expression, copy number variation, mutation, compound activity, and meta data from cancer cells. CELLX provides the computational biologist a quick way to perform routine analyses as well as the means to rapidly integrate data for offline analysis. Data is accessible through a web interface which utilizes R to generate plots and perform clustering, correlations, and statistical tests for associations within and between data types for ~20,000 samples from TCGA, CCLE, Sanger, GSK, GEO, GTEx, and other public sources. We show how CELLX supports precision oncology through indications discovery, biomarker evaluation, and cell line screening analysis.

1. Introduction

To support precision medicine patient selection strategies, genomics data is used to identify oncogenic drivers or dysregulated pathways in cancer cells susceptible to therapeutic intervention. Notably, efforts by The Cancer Genome Atlas (TCGA, <http://cancergenome.nih.gov>), the Cancer Cell Line Encyclopedia (CCLE)[1], and Sanger Wellcome Trust Genomics of Drug Sensitivity in Cancer (GDSC)[2] have generated a plethora of data and datatypes that can be used for generating patient selection hypotheses. However, multiple genomics data types such as expression, copy number variation (CNV), and mutation are large and unwieldy to manage. For the computational biologist, much time and effort can be spent to assemble an up to date table of features which can be computed on because new data are often generated frequently and incrementally. Thus, there is a need for an infrastructure to perform simple, quick, and routine analyses on multi-dimensional genomics data as well as the automated assembly of data tables for offline computation using more sophisticated algorithms.

Currently, there exist several cancer genomics databases to access expression, CNV, mutation, and integrated data as reviewed in [3]. For example, BioGPS[4] provides expression data, Tumorscape[5] contains CNV measurements, the Sanger Catalog of Somatic Mutations in Cancer (COSMIC)[6] lists mutations, and the cBio Portal[7] integrates multiple TCGA data types. Additionally, databases with compound activity data include GDSC and CCLE. Here we present a publicly available web-based informatics tool to integrate data, perform analysis, and visualize results from public as well as private internal sources to support precision medicine activities.

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2. Architecture

The underlying MySQL database consists of 22 tables for expression, CNV, mutation, compound, sample, meta data, RNAi, RPPA, and gene annotation data. The Perl CELLX application runs on an Apache web server. R-serve (<http://www.rforge.net/Rserve/>) instances generate plots and perform statistical analyses. An Apache Tomcat application server runs a custom Java servlet which bridges Perl and R by funneling Perl http requests to the R-serves and sends results back to the web server. A demo site, instructions, source code, database dumps, and data parsing / loading scripts are available at <http://cellx.sourceforge.net>.

3. Gene Based Search

A common starting point for indications discovery is asking where the target of interest is altered. CELLX can plot the relative expression or CNV of a gene within a dataset or across multiple compatible datasets. For instance, RNA-Seq data processed by RSEM[8] can be compared across tumors profiled not only by TCGA, but CCLE as well. CDK4 expression can be seen to have high outliers in Glioblastoma Multiforme (GBM), melanoma (SKCM), breast (BRCA), Lower Grade Glioma (LGG), and sarcomas (SARC) (Figure 1). A similar plot can be generated of CNV to identify datasets with amplifications or deletions. CELLX can chart the relationship between expression and CNV across datasets using scatter plots of expression versus CNV. A hallmark of amplification, CDK4 expression levels scale with CNV level in several datasets (Figure 2a,b).

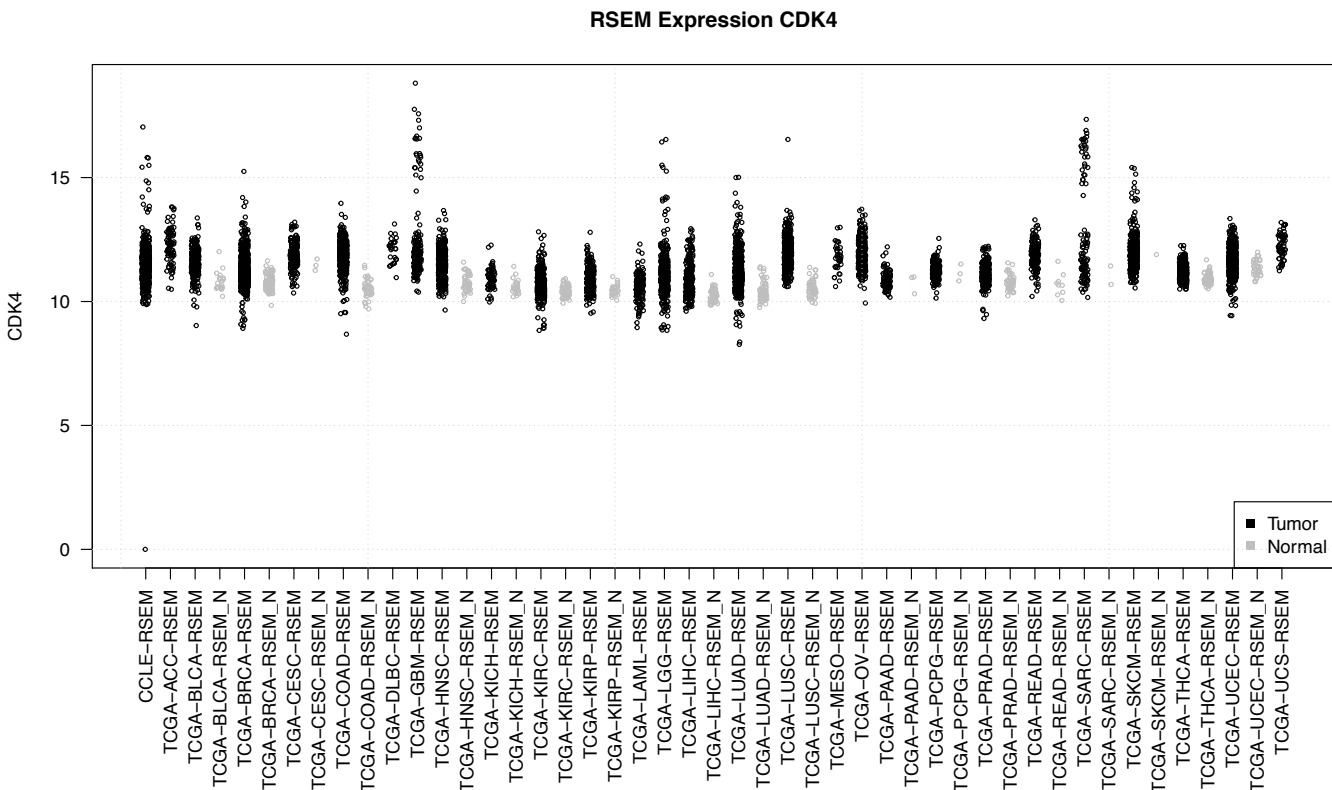


Figure 1. RNA-Seq RSEM gene expression of CDK4 (y-axis, log₂) across datasets shows higher expression in tumor vs. adjacent normal tissue. Particular groups of outliers can be seen in GBM (glioblastoma multiforme), SARC (sarcoma), SKCM (skin cutaneous melanoma), LGG (brain lower grade glioma), and cell lines (CCLE).

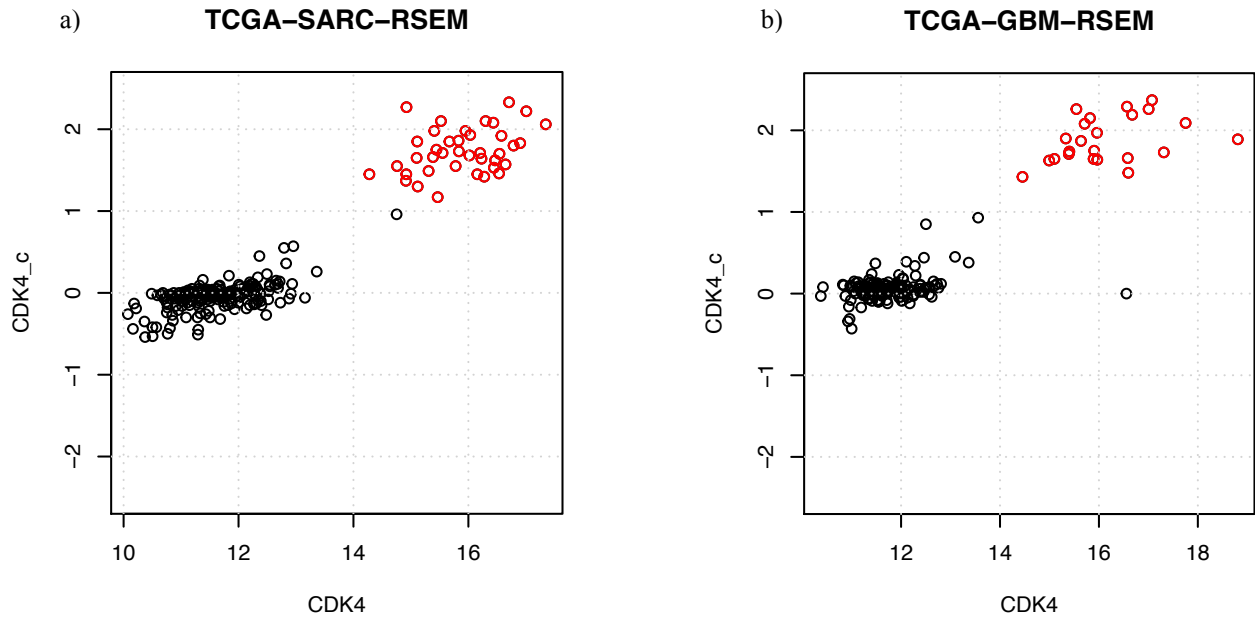


Figure 2. Correlation of expression and CNV. CNV (y-axis in log2 diploid genome) vs. RSEM expression levels (log2) for CDK4 show that a) SARC and b) GBM datasets have a sizable population of cells overexpressing CDK4 due to amplification of the locus. Additionally, expression levels scale with CNV levels. Clear outliers from the main distribution of CNV values can help determine appropriate CNV cut offs for amplification status. In this example, samples colored red have ≥ 1 log2 diploid genomes (i.e. ≥ 4 copies).

4. Integrated Visualization

Mixed data types can be visualized in 2D scatter plots to look at the relationship between two datatypes on the same or different genes. For instance, expression of gene A on the x-axis can be plotted versus the CNV of gene B on the y-axis. Other plottable datatypes are protein levels for Reverse Phase Protein Arrays (RPPA), the mutation count per sample, the general amount of CNV per sample, IC50 values for compounds, and meta data. Multiple layers of data can be added to the plot to increase dimensionality. As a simple example, one can plot the expression of ERBB2 expression vs. ERBB2 CNV overlaid with ERBB2 mutations (Figure 3a) or breast cancer subtype meta data. (Figure 3b). The underlying data used to generate each plot is linked as a tab separated tsv file for downloading.

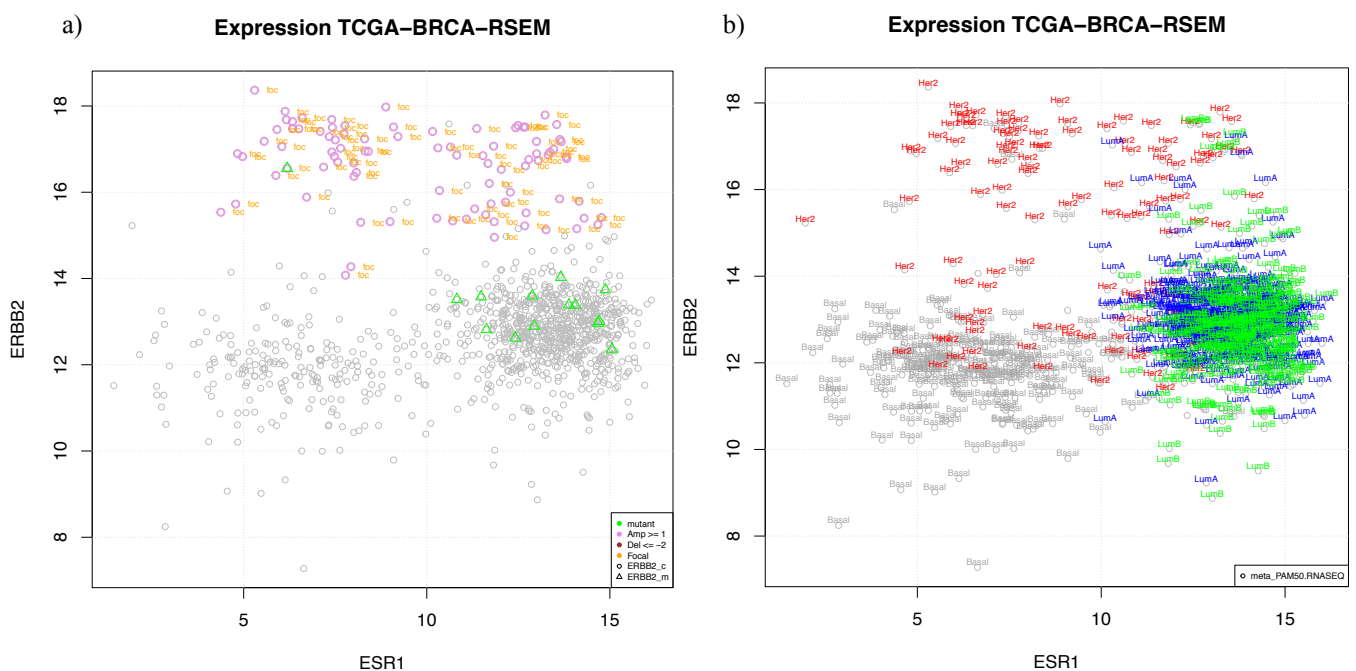


Figure 3. 2D scatter plots. a) Gene expression of ESR1 (x-axis, log2) vs. ERBB2 (y-axis, log2) gene expression. ERBB2 CNV over the selected threshold of 1 (log2 diploid genome) is colored pink. Focal amplifications (≤ 10 MB) are denoted with 'foc'. Mutations in ERBB2 are colored green. c) Meta data for PAM50 subtype classification are colored and overlaid on the ESR1 vs. ERBB2 gene expression plot.

5. Biomarker Frequency Reports

Tables of the frequency of alterations across datasets can help to prioritize indications for therapies with known biomarkers. For instance, the venn report of the frequency of CDK4 biomarker alterations within datasets shows significant frequencies of CDK4 amplification in sarcoma, gliomas, and melanoma TCGA datasets (Table 1). Cutoffs can be defined by expression level, CNV level, and/or mutation status. The co-occurrence or exclusion of 2-4 biomarkers within the same sample can also be quantified.

Table 1. Frequency report for CDK4 alterations in TCGA. CDK4_c is the number of samples in which the CNV exceeds the set threshold, in this case ~4 copies. CDK4_m is the number of samples with a CDK4 mutation. The cells_c/_m columns are the number of samples for which CNV or mutation data are available, respectively. Percentages are calculated as altered / total for each individual alteration type.

sourcename	CDK4_c	cells_c	CDK4_m	cells_m	cell_type	tumor_type	CNV%	MUT%
TCGA-SARC	35	171	0	0	soft_tissue	Sarcoma	20.47	NA
TCGA-GBM	73	607	0	150	neuronal	Glioblastoma multiforme	12.03	0
TCGA-LGG	14	471	1	612	neuronal	Brain Lower Grade Glioma	2.97	0.16
TCGA-ACC	2	90	0	91	adrenal_gland	Adrenocortical carcinoma	2.22	0
TCGA-SKCM	7	387	8	372	skin	Skin Cutaneous Melanoma	1.81	2.15
TCGA-LUAD	5	510	3	491	lung	Lung adenocarcinoma	0.98	0.61
TCGA-STAD	2	403	1	373	stomach	Stomach adenocarcinoma	0.5	0.27
TCGA-BRCA	5	1074	1	777	breast	Breast invasive carcinoma	0.47	0.13
TCGA-BLCA	1	255	2	242	urinary_tract	Bladder Urothelial Carcinoma	0.39	0.83
TCGA-OV	2	569	0	476	ovary	Ovarian serous cystadenocarcinoma	0.35	0
TCGA-LUSC	1	487	0	233	lung	Lung squamous cell carcinoma	0.21	0
TCGA-COAD	0	446	2	219	large_intestine	Colon adenocarcinoma	0	0.91
TCGA-PRAD	0	381	0	300	prostate	Prostate adenocarcinoma	0	0
TCGA-THCA	0	508	0	428	thyroid	Thyroid carcinoma	0	0
TCGA-PAAD	0	92	1	91	pancreas	Pancreatic adenocarcinoma	0	1.1
TCGA-PCPG	0	175	0	0	adrenal_gland	Pheochromocytoma and Paraganglioma	0	NA
TCGA-MESO	0	37	0	0	pleura	Mesothelioma	0	NA
TCGA-READ	0	164	0	1	rectum	Rectum adenocarcinoma	0	0
TCGA-UCEC	0	533	5	248	endometrium	Uterine Corpus Endometrial Carcinoma	0	2.02
TCGA-KIRC	0	521	6	328	kidney	Kidney renal clear cell carcinoma	0	1.83
TCGA-ESCA	0	126	0	0	oesophagus	Esophageal carcinoma	0	NA
TCGA-DLBC	0	28	0	79	haematopoietic_	Lymphoid Neoplasm Diffuse Large B-cell	0	0
TCGA-KICH	0	66	0	66	kidney	Kidney Chromophobe	0	0
TCGA-UCS	0	57	0	57	uterus	Uterine Carcinosarcoma	0	0
TCGA-KIRP	0	212	0	169	kidney	Kidney renal papillary cell carcinoma	0	0
TCGA-LAML	0	194	0	118	haematopoietic_	Acute Myeloid Leukemia	0	0
TCGA-LIHC	0	213	5	202	liver	Liver hepatocellular carcinoma	0	2.48
TCGA-HNSC	0	516	5	513	upper_aerodiges	Head and Neck squamous cell carcinoma	0	0.97
TCGA-CESC	0	206	0	41	cervix	Cervical squamous cell carcinoma and	0	0

6. Analysis

CELLX can identify genes whose expression correlates with a gene of interest and return a table of significant genes that can be visualized via a heat map with labelled metadata. For example, a search for genes correlated with CDK4 expression in the TCGA sarcoma dataset yields ACVRL1 which is expressed by vascular endothelium and a potential anti-angiogenesis target. (Figure 4a)

test for significant gene expression associated with meta data features by performing a t-test of a gene's expression grouped by a sample's meta data. As an example, a search for meta data with significantly different CDK4 expression in the TCGA sarcoma dataset reveals that the histologic diagnosis type has large differences in CDK4 expression levels (lowest p-val = $2.54e^{-19}$) as calculated by a pairwise t-test between all groups (Figure 4c). A box plot of the groups from histologic diagnosis shows that the CDK4 values from DDPLS are higher than other sarcomas (Figure 4d). Additional types of analyses include the identification of differentially expressed genes using t-tests of gene expression between groups defined by a gene's expression, a gene's mutation status, or a meta value label. For example, one could ask what genes are differentially expressed between samples with high CDK4 vs. low CDK4, samples with mutated EGFR vs. wild type EGFR, or samples annotated as male vs. female. Conversely, one can search for mutated genes which differentially express the query gene. e.g. which gene(s) mutations have higher or lower expression of EGFR than wild-type.

7. Precision Medicine

To support precision medicine, CELLX can be used to generate responder / non-responder hypotheses from cell line screening data. As a retrospective example, one can analyze the cell line sensitivity profile of Palbociclib, a CDK4/6 inhibitor under development for ER+ breast cancer. Published breast cell line IC50 values for Palbociclib[11] show a range of responses. (Figure 5a) CELLX can associate IC50 values with cell line expression, CNV, and mutation data from data sources such as CCLE. Samples divided into two groups by user defined cutoffs, in this case $<1\mu\text{M}$ for responder cell lines (LOW IC50) and $\geq 1\mu\text{M}$ for non-responder cell lines (HIGH IC50) can be used to identify genes whose expression is significantly different between responder and non-responder cells by calculating t-tests on the expression of $\sim 20,000$ genes and displaying a p-value ranked table (Figure 5b). Hierarchical clustering on the top 100 most significant genes, ordering the samples from low to high IC50, and coloring the samples by intrinsic breast subtype as defined by PAM50[12] shows that luminal B and Her2 subtypes tend to be sensitive to Palbociclib whereas cells of the basal subtype tend to be resistant (Figure 5c). Luminal A cell line subtypes were not represented in the screening set. Additionally, CELLX can dynamically generate a combination CNV / mutation table for genes which meet user defined amplification / deletion thresholds or have annotated mutations. A ranked table of p-values from Fisher's exact test for all genes with either a CNV or mutation alteration (Table 2) highlights genes potentially associated with compound activity. While individually, the appearance of any one gene is not necessarily significant, together the combined results from the expression, CNV, and mutation associations highlight RB1, CCNE1, and to a lesser extent CDKN2A. Specifically, the expression of RB1 was low in resistant cells whereas CDKN2A and CCNE1 were high in resistant cells. Interestingly, unlike other targeted therapies where the small molecule target is often the biomarker of sensitivity (e.g. EGFR, MET, BRAF) the significant Palbociclib biomarkers represent markers of resistance. RB1 deficiency (CNV deletion, STOP mutations, and low expression) and concomitant high CDKN2A expression[13] are characteristics of the basal or triple negative breast subtype status (Figure 5c). Thus, if most of the RB1 deficient samples

belong to the triple negative subtype, the remaining luminal A/B (ER+/ERBB2+/-) and ERBB2+ segments would be enriched for possible CDK4i responders. In support of this notion, luminal B and Her2 breast subtype cell lines are mostly sensitive to CDK4i (Figure 5c).

CELLX can also confirm if the low RB1 expression found in triple negative breast cell lines also occurs in primary tissues by using the TCGA-BRCA breast invasive carcinoma dataset. CELLX can identify the genes that are most differentially expressed between RB1 high (≥ 9.5) vs. RB1 low (< 9.5) expressing cells using t-tests. Several of the top 100 ranking genes by p-value are related to cell cycle (RB1, CDKN2A, CCNE1) or DNA replication/repair (RFC2, RFC4, MCM5, MCM7, CDT1, NASP, POLK, POLD1, MUTYH, FANCE). Hierarchical clustering and labeling with the intrinsic subtype via PAM50[12] shows that similar to cell lines, we find that tumors with low RB1 and high CCNE1/CDKN2A expression are often of the basal subtype (Figure 6).

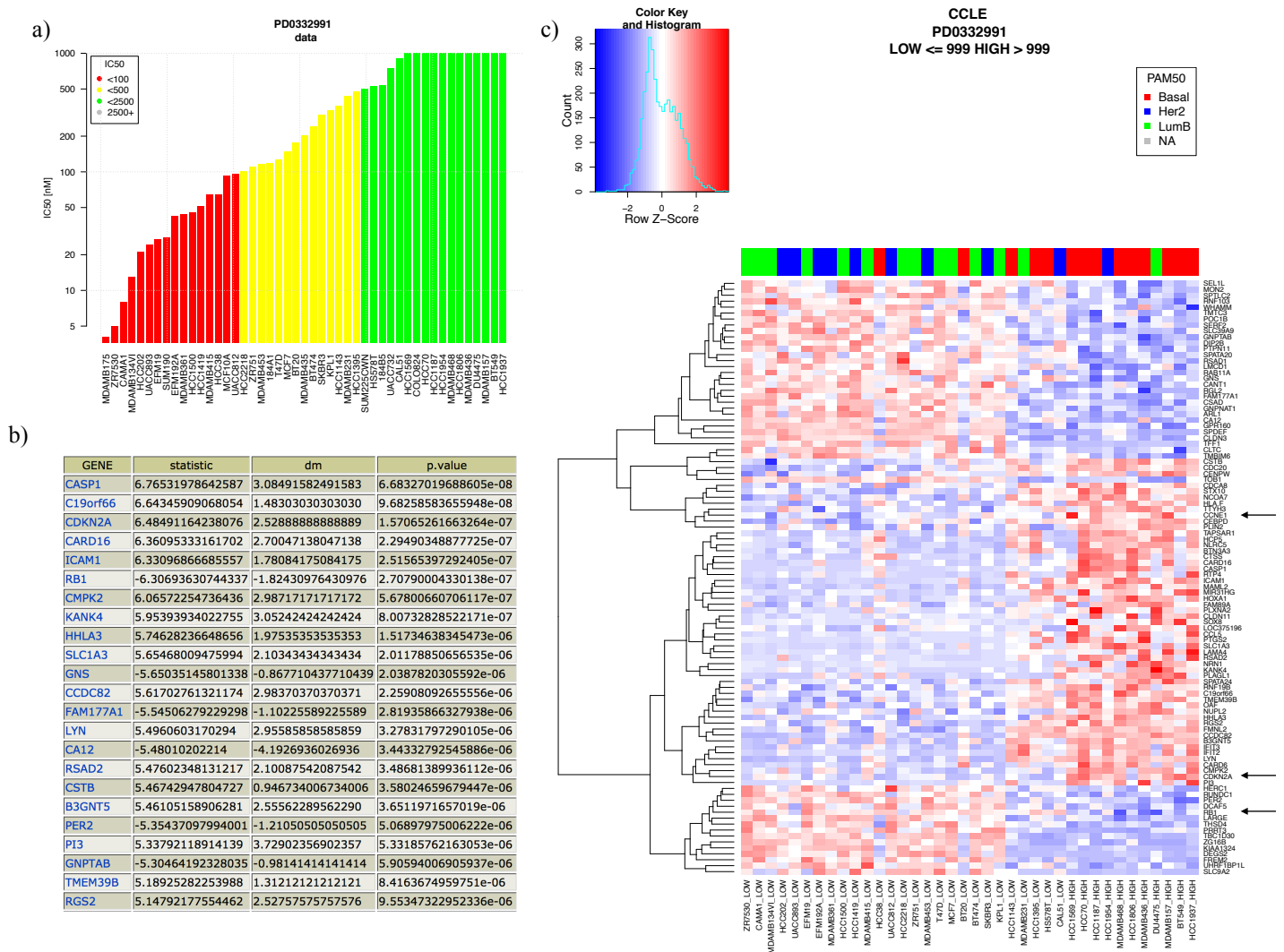


Figure 5. a) Waterfall plot of breast cell line responses to Palbociclib (PD0332991) colored by IC50 range. b) Example output listing the p-value of genes. dm = difference in group means, statistic = t-statistic (LOW-HIGH), p.value = uncorrected p-value of two-sided, two-class t-test with equal variances. Not shown: FDR and Hochberg adjusted p-values. c) Heatmap of gene expression of top 100 genes by t-test between sensitive (IC50 ≤ 999 nM, LOW) and resistant cell lines (IC50 > 999 nM, HIGH). The positions of RB1, CDKN2A, and CCNE1 are denoted with arrows. Cell lines are ordered by IC50 and colored by intrinsic breast subtype via PAM50.

Table 2. Association of mutations / CNV with response to Palbociclib (PD0332991). a) Ranking of genes by p-value for Fisher's Exact test. b) Breast cell line table of selected alterations. Breast cell lines are labeled LOW (sensitive) or HIGH (resistant) and marked altered or non-altered for mutation or CNV change in each gene. Cell lines are ordered by Palbociclib IC50 value. Genes with CNV values $\geq \text{abs}(1)$ or mutations from CCLE are marked as altered. CNV units are in log2 diploid genomes. (i.e. 1 \approx 4 copies) CCLE mutation nomenclature: del = deletion, p.0 = whole gene deletion, ? = unknown change, fs = frameshift, * = STOP codon

a)				b)							
GENE	pval	GENE	pval	cell_name	PD0332991	RESPONSE	RB1	PIK3C2G	CCNE1	CDKN2A	
RB1	0.0004	ATP9B	0.0611	pvalue			0.0004	0.0048	0.0136	0.1362	
PIK3C2G	0.0048	CAPRIN1	0.0611	MDAMB175	4	LOW					
C19orf12	0.0136	CTIF	0.0611	ZR7530	5	LOW		p.P129del			
CCNE1	0.0136	DNM2	0.0611	CAMA1	8	LOW					
LOC284395	0.0136	EHF	0.0611	MDAMB134VI	13	LOW		p.P129del			
PLEKHF1	0.0136	ELP2	0.0611	HCC202	21	LOW					
POP4	0.0136	EPG5	0.0611	UACC893	24	LOW					
URI1	0.0136	FANCI	0.0611	EFM19	27	LOW				p.0?/-2.16	
VSTM2B	0.0136	HDLBP	0.0611	SUM190	28	LOW					
DOCK3	0.0136	LRP6	0.0611	EFM192A	42	LOW					
NCOA4	0.0136	MAPK4	0.0611	MDAMB361	44	LOW		p.P129del		p.M52I	
ADRA1A	0.0136	MCPH1	0.0611	HCC1500	45	LOW		1.27		-2.24	
CTNNA1	0.0136	NKX6.3	0.0611	HCC1419	51	LOW		p.P129del			
TCF12	0.0136	PDCD6	0.0611	HCC38	64	LOW		p.P129del		p.0?/-2.75	
CDH1	0.0459	PEBP4	0.0611	MDAMB415	64	LOW		p.P129del			
ANKS1B	0.0459	PTK2B	0.0611	MCF10A	92	LOW					
DIP2C	0.0459	RP1L1	0.0611	UACC812	96	LOW	1.26	p.P129del			
GSTT1	0.0595	SGK223	0.0611	HCC2218	100	LOW		p.P129del			
GSTTP2	0.0595	SMAD4	0.0611	ZR751	110	LOW		p.P129del			
LOC391322	0.0595	ZFYVE26	0.0611	MDAMB453	115	LOW		p.P129del			
D2HGDH	0.0611	MTAP	0.0932	184A1	118	LOW					
DHRS4L1	0.0611	USP32	0.0932	T47D	127	LOW		p.P129del			
DHRS4L2	0.0611	BCAS1	0.0932	MCF7	148	LOW				p.0?/-2.19	
ELAC1	0.0611	TRIM37	0.0932	BT20	177	LOW	p.I388S	p.P129del		p.0?/-2.11	
GAL3ST2	0.0611	PIK3CA	0.0952	MDAMB435	201	LOW				p.?	
LINC00906	0.0611	TP53	0.0952	BT474	240	LOW				-1.07	
LINC01029	0.0611	AUTS2	0.0971	SKBR3	300	LOW					
LOC100420587	0.0611	LOC649352	0.0971	KPL1	327	LOW				-1.97	
LOC100505835	0.0611	MIR4650.1	0.0971	HCC1143	359	LOW					
LOC102724958	0.0611	MIR4650.2	0.0971	MDAMB231	432	LOW		p.P129del		p.0?/-2.53	
LOC439994	0.0611	SIGLEC14	0.0971	HCC1395	472	LOW				p.0?/-2.03	
MIR6511B1	0.0611	FHIT	0.0971	SUM225CWN	503	LOW					
NAALADL2	0.0611	PIK3C2B	0.0971	HS578T	524	LOW				p.0?	
NUTM2A.AS1	0.0611	PTEN	0.1176	184B5	538	LOW					
RBFOX1	0.0611	CDKN2A	0.1362	UACC732	744	LOW					
SALL3	0.0611	LOC284344	0.1560	CAL51	905	LOW		p.P129del			
UGT2B28	0.0611	LPAR6	0.1560	MDAMB468	1000	HIGH	p.?-1.89				
UQCRFS1	0.0611	NRG1	0.1560	MDAMB436	1000	HIGH	p.G203fs*9				
APC	0.0611	PDE4D	0.1560	HCC1954	1000	HIGH					
BTK	0.0611	EEF2K	0.1560	HCC1937	1000	HIGH	p.T738_R775del38				
ELN	0.0611	EPHB3	0.1560	DU4475	1000	HIGH	p.0?/-1.92				
EPHB6	0.0611	ITPR1	0.1560	HCC1569	1000	HIGH			2.02		
GCNT2	0.0611	KIAA1549	0.1560	HCC1187	1000	HIGH					
HIPK2	0.0611	MAP3K19	0.1560	BT549	1000	HIGH	p.?-2.22				
KLK15	0.0611	MELK	0.1560	MDAMB157	1000	HIGH			1.01		
NOS2	0.0611	MLKL	0.1560	COLO824	1000	HIGH	p.?				
OMG	0.0611	MMP8	0.1560	HCC70	1000	HIGH	p.N480del				
TBX22	0.0611	MYLK	0.1560	HCC1806	1000	HIGH			1.25	p.0?/-2.25	
ZNF142	0.0611	PLCB2	0.1560								
AGPAT5	0.0611	SPTA1	0.1560								

8. Summary

CELLX is an informatics infrastructure to manage multi-dimensional genomics datasets containing expression, copy number variation, mutation, and compound sensitivity information. A browser based web page enables an accessible way to visualize, analyze, and download the database data in a pre-formatted table suitable for offline computation. CELLX is presently

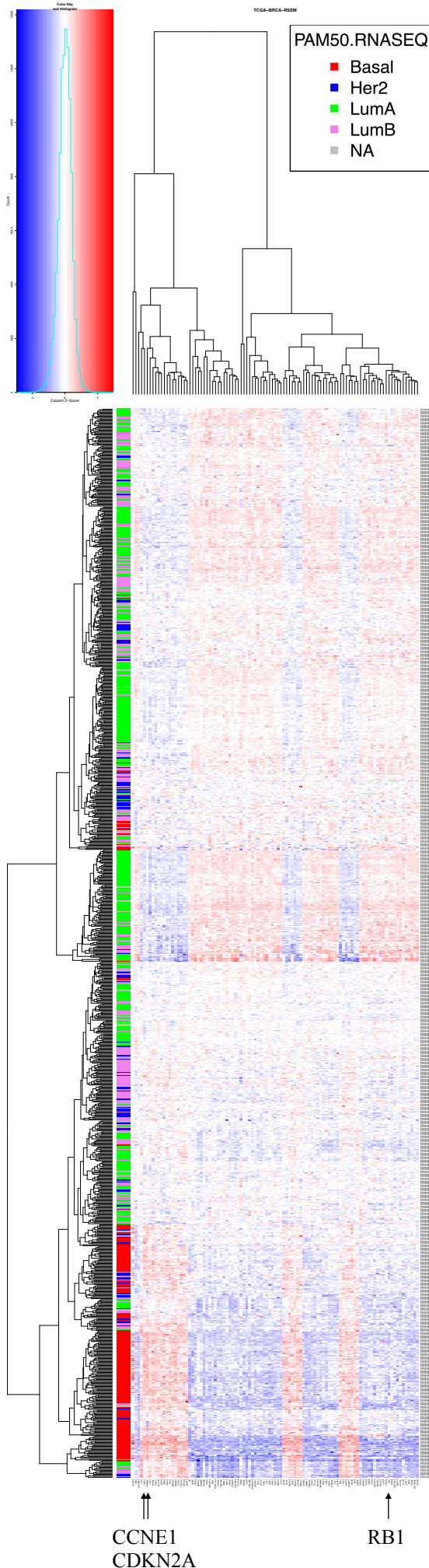


Figure 6. TCGA Breast differential gene expression between RB1 high and RB1 low expressing tumors. Hierarchical clustering of the top 100 genes in a heat map colored by breast subtype as determined by PAM50. Positions of CDKN2A, CCNE1, and RB1 are denoted by arrows.

focused on supporting oncology precision medicine through the evaluation of preconceived hypotheses as well as unbiased, data driven hypothesis generation. Though usable by the general user, CELLX is aimed at the computational biologist who desires more control over the data or wants to integrate custom data not available in public databases.

9. Data Processing

When available, summarized data from the source was used for TCGA, CCLE, and Tumorscape except for CNV calls. If Affymetrix SNP files were available, they were processed relative to the hg18 assembly using the `aroma.affymetrix` R package according to the methods of H. Bengtsson et al.[14] using the average baseline of 128 female HapMap samples[15] as the reference to maintain consistency and comparability across datasets. Microarray expression data from GEO, Sanger, and CCLE were GC Robust Multiarray Average normalized using R and the `gcrma`[16] library. Comparable to the TCGA RNA-Seq RSEM pipeline, CCLE RNA-Seq[17] data was processed using RSEM[8] on RefSeq sequences, quartile normalized to 1000, and log2 transformed. The R library `genefu`[18] predicted PAM50 subtypes and `genefilter`[19] enabled fast t-tests, F-tests, and correlations. Plots were made using CELLX and edited using Preview and Pages.

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