

Towards an Ontological Representation of Resistance: The Case of MRSA

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Aims

- This work is funded by the National Institutes of Health through Grant R01 AI 77706-01
 - Immune System Biological Networks: A Case Study in Improved Data Integration & Analysis
- **Aim 1: Create an ontology-based representation of host-pathogen interactions, focusing on Staphylococcus aureus bacteremia.**
- Aim 2: Empirically test the ability of the ontology-based representation created in Aim 1 to improve the analysis and interpretation of clinical data.
- Aim 3. Empirically test the impact of the ontology-based representation created in Aim 1 on understanding Staphylococcus aureus pathogenesis, on identifying novel therapeutic targets, and on improving patient management.

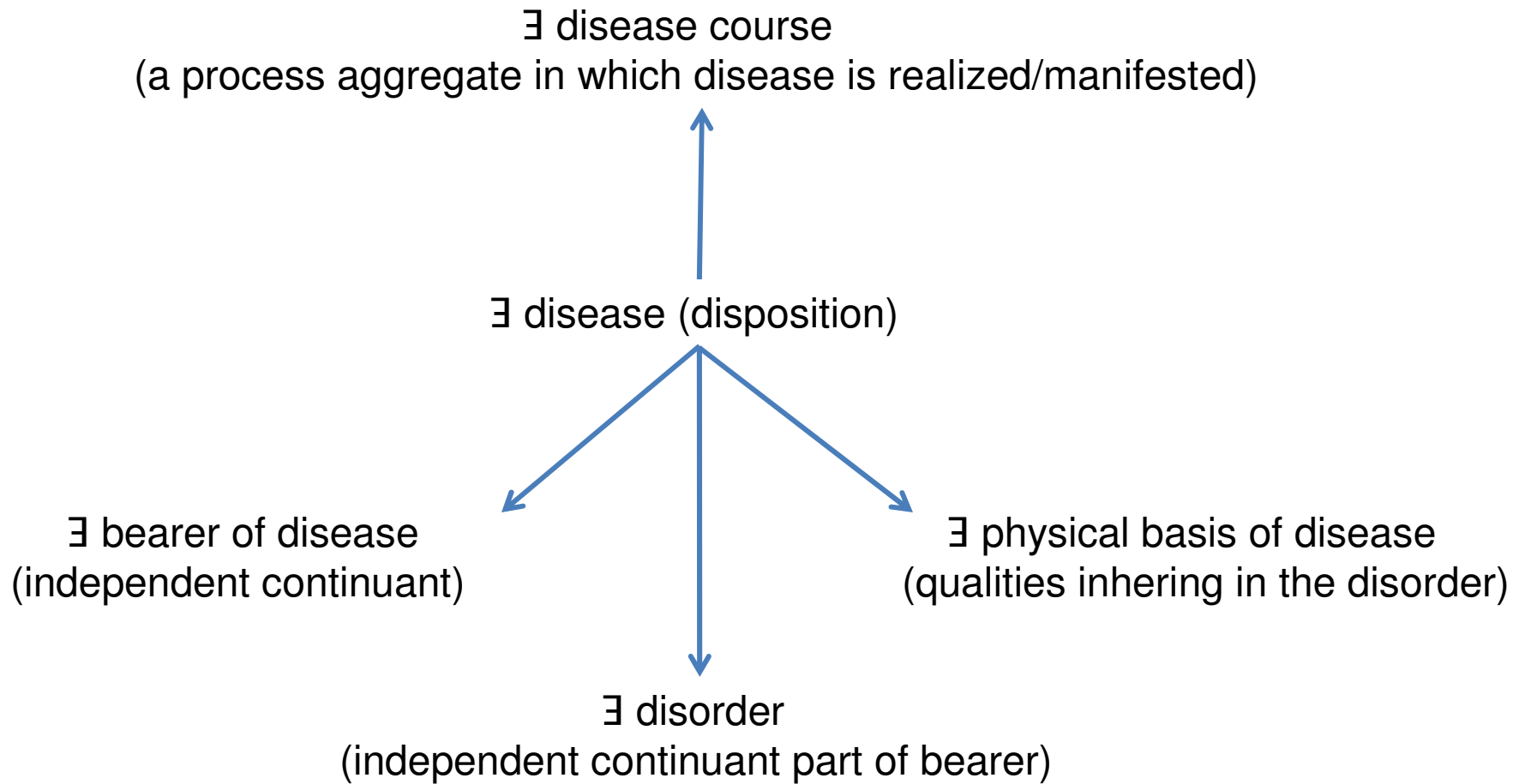
Outline

- I. Introduction to IDO
- II. Resistance phenomena and their ontological representation
- III. Case Study: The antibiotic resistance of MRSA
- IV. Formalization into triples
- V. A definition for protective resistance
- VI. Conclusion

Infectious Disease Ontology (IDO)

- An domain ontology extending BFO
- An interoperable part of the OBO foundry.
- Top-level IDO: A core upper ontology for the entire infectious disease domain
 - At different biological scales
 - From different disciplinary perspectives
 - ~200 terms
- IDO-extensions: A family of reference ontologies for specific diseases and pathogens (e.g., Staph aureus, Malaria, Influenza...)
- See <http://www.infectiousdiseaseontology.org> and IDO consortium invitation

Dispositional view of disease



Resistance Phenomena

- Examples:
 - Resistance of an individual to a disease
 - Resistance of a tumor to a treatment
 - Resistance of a pathogen to a drug
 - Herd immunity of an organism population to a
 - Immunity of an individual to an infectious organism
 - Resistance of certain bacteria to UV!
<http://edition.cnn.com/2009/TECH/science/03/17/india.bacteria/>
- Resistance as a disposition
 - Different types of bearers at different biological scales
- Several ontologies/terminologies include resistance terms.

Resistance in existing terminologies

- *[NCI Thesaurus: C19391] **Resistance**: Natural or acquired mechanisms, functions, activities, or processes exhibited by an organism to maintain immunity to, or to resist the effects of, an antagonistic agent, e.g., pathogenic microorganism, toxin, drug.*
- Issues:
 - Circular definition: uses 'resist' in definition for resistance!
 - What is the type: mechanism? function? activity? process?
 - Restricted to organism bearer
 - Too many disjunctions to be useful

Desiderata for IDO Representation

- BFO-compatible
- Positive/active principle
 - Don't characterize resistance by what is not happening
 - Use **lacks** wherever necessary
- Non-proliferation of relations principle
 - don't propose a trivial relation **resistant_to**
 - work with OBO RO and RO-proposed relations
- Correct granularity
 - General enough to cover examples
 - Specific enough to be useful
- Pragmatic Concerns: IDO/IDO-extension terms should mirror scientific interest in resistance types.
 - Example: water-resistant walls are probably also lemonade-resistant, but we don't put 'lemonade resistance' in our ontology.

Resistance the quality vs Resistance the disposition

- Resistance disposition
 - possessed in virtue of internal physical arrangement of bearer
 - not always manifested when borne
 - realized in active processes at some physical scale
- Resistance quality
 - a sufficiently low susceptibility



Dispositions in BFO 2.0

- BFO Disposition
 - BFO Capability: a disposition that enables its bearer to participate in certain processes.
 - BFO Function: a capability which evolved in its bearer or whose bearer was designed to have the disposition.
- Categorical Base/Ground is a BFO Quality
 - A disposition at a macroscale is usually conferred on its bearer by qualities of parts at a microscale
 - This is the utility of dispositions in reasoning
 - A chain of dispositions-in-wholes and qualities-in-parts all the way down

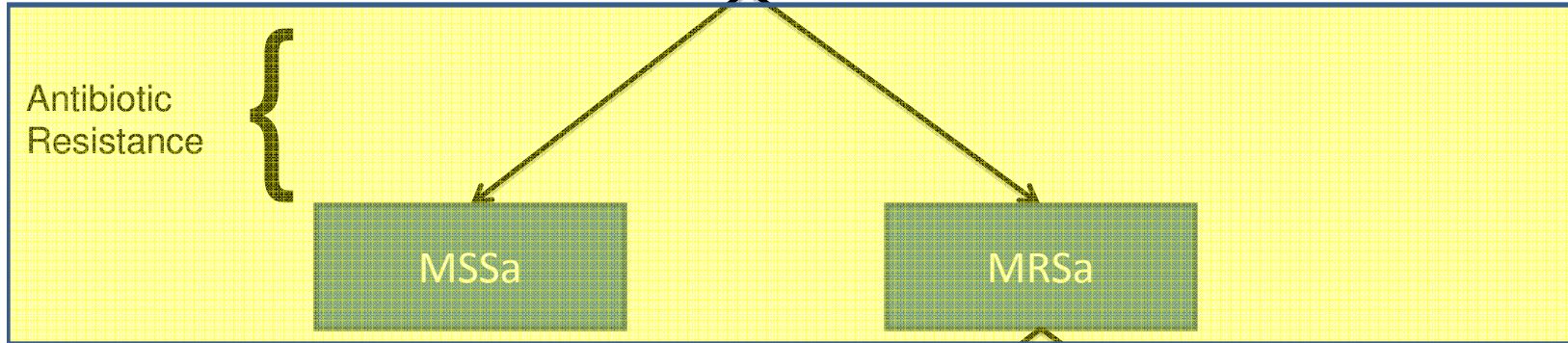
The Rise and Antibiotic Resistance in Sa

Year	Antibiotic Effectiveness
1943	Penicillin available
1947	First resistant strains reported
1960s	Switch to methicillin
1961	Methicillin-resistant strain found in Cairo
1980s	Methicillin resistance rising, vancomycin used as a last resort
1992	15% methicillin-resistant
1996	35% methicillin-resistant
2000	50% methicillin-resistant
2002	Vancomycin resistance reported

(from Knobler et al, 2003)

Differentiated
by:

Staphylococcus aureus (*Sa*)



Pathogenesis
Location
Type

HA-MRSa

CA-MRSa

Geographic
Region

UK CA-MRSa

Australian
CA-MRSa

Various
Differentia

Specific Strains

Formalizing MRSA Resistance

Domain

1. bacteria **is_a** organism
2. MRSA **is_a** bacterium
3. synthesis_of_peptidoglycan **is_a** process and **has_participant** Penicillin_Binding_Protein (PBP)
4. PBP **has_function_realized_as_process** synthesis_of_peptidoglycan
5. Bacterial_cell_wall **is_location_of** PBP
6. synthesis_of_peptidoglycan **results_in_development_of** PBP2a

Inferences

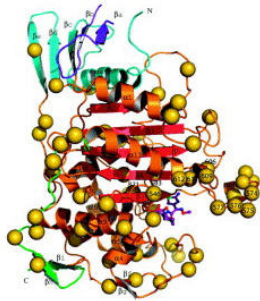
- (IR1) $x \text{ is_a } y \ \& \ y \text{ is_a } z \rightarrow x \text{ is_a } z$
- (IR2) $x \text{ has_part } y \ \& \ y \text{ has_part } z \rightarrow x \text{ has_part } z$
- (D1) MRSA **is_a** organism
- (IR3) $o \text{ is_a } \text{organism} \ \& \ g \text{ is_a } \text{gene} \ \& \ o \text{ has_part } g \ \& \ g \text{ generically_specifies } \text{proc} \ \& \ \text{proc results_in_formation_of } \text{prod} \ \& \ o \text{ has_part } \text{locp} \ \& \ \text{locp is_location_of } \text{prod} \rightarrow o \text{ has_part } \text{prod located_in } \text{locp}$

16 triples + 6 inference rules + 5 derived triples
but let's look at this in pictures...

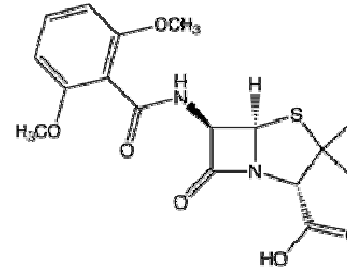
10. affinity_to_methicillin **disposition_of** some PBP to undergo a methicillin_PBP_binding_process that is **realized** in the presence of a methicillin.
11. methicillin_PBP_binding_process **negatively_regulates** synthesis_of_peptidoglycan.
12. PBP2a **lacks** affinity_to_methicillin
13. *mecA* **is_a** gene
14. MRSA **has_part** *mecA*
15. *mecA* **generically_specifies** PBP2a_production
16. PBP2a_production **results_in_formation_of** PBP2a

- (D3) In the presence of methicillin, PBP2a **participates_in** synthesis_of_peptidoglycan.
- (IR5) In situation s , $p1$ **participates_in** $proc$ & $p1$ **located_in** $p2$ & o has_part $p2 \rightarrow proc$ **unfolds_in** o in situation s .
- (D4) synthesis_of_peptidoglycan **unfolds_in** MRSA in the presence of methicillin.
- (IR6) In situation s , $proc$ **unfolds_in** o & $proc$ **results_in_development_of** $p \rightarrow p$ **part_of** o in situation s
- (D5) Canonical bacterial_cell_wall **part_of** MRSA in the presence of methicillin.

Why MSSa is Susceptible



PBP



Methicillin

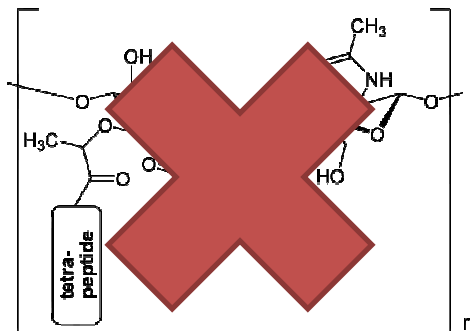
Methicillin_PBP_Binding_Process

has_participants

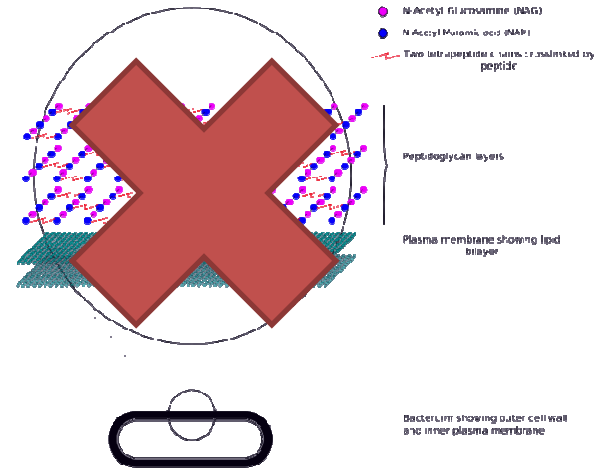
Bacterial_Cell_Wall

negatively_regulates

Synthesis of Peptidoglycan

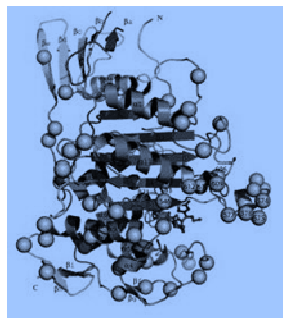


Peptidoglycan
part_of



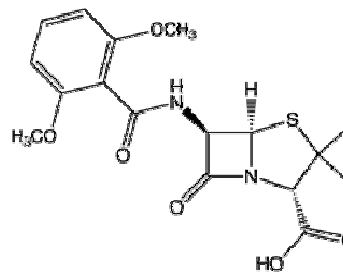
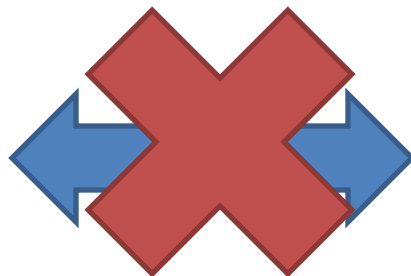
Simplified schematic of cell wall in a gram-positive bacterium (showing plasma membrane; teichoic acids not shown)

Why MRSA is Resistant



PBP2a

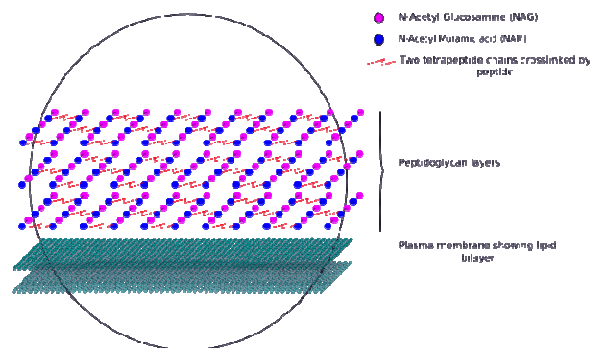
lacks
affinity_to_methicillin



Methicillin

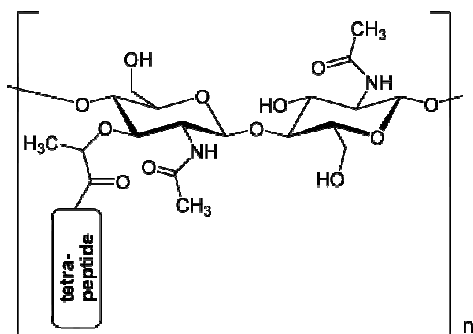
No Methicillin_PBP_Binding_Process

Bacterial_Cell_Wall



Simplified schematic of cell wall in a gram-positive bacterium
(showing plasma membrane; teichoic acids not shown)

Synthesis of Peptidoglycan



Peptidoglycan
part_of



IDO's Protective Resistance

- IDO: *Protective resistance is a **disposition** that inheres in an **material entity x** by virtue of the fact that the entity **has** a part (e.g., a gene product), which **allows** for both organisms and tumors to **ensure** a physiologic response of a certain degree to a **potentially damaging** process, or to **prevent the completion** of an **action** caused by **it**, with the **capability** to **mitigate** or **mitigati**on.*

Allows for both organisms and tumors

position

Usually a function, but may be just a capability

with the capability to damage

e.g., CCR5 mutation prevents the completion of HIV invasion of host T cell

Conclusions

- Resistance is a very ***important*** biological phenomenon...
 - Guiding treatment decisions
 - Public health policy
- and a very ***general*** phenomenon...
 - Multi-scale (gene, cell, organ, organism, population)
 - Multi-discipline (clinical, biological, epidemiological)
- Whose representation in an ontology is ***non-trivial***
 - Even a particular instance of resistance requires many triples for description and inference.
 - Needs further analysis of lacking a disposition (e.g., lacking the affinity to methicillin).

Thanks!