

Mining PubMed for Biomarker-Disease Associations to Guide Discovery

Walter J. Jessen, Katherine T. Landschulz, Thomas G. Turi and Rachel Y. Reams
Covance Biomarker Center of Excellence, Discovery and Translational Services, Greenfield, Indiana

Introduction

Biomedical knowledge is growing exponentially; however, meta-knowledge around the data is often lacking. PubMed is a database comprising more than 21 million citations for biomedical literature from MEDLINE and additional life science journals dating back to the 1950s. To explore the use and frequency of biomarkers across human disease, we mined PubMed for biomarker-disease associations. We then ranked the top 100 linked diseases by relevance and mapped them to medical subject headings (MeSH) and, subsequently, to the Disease Ontology. To identify biomarkers for each disease, we queried Covance BioPathways, an online data resource that maps commercial biomarker assays to biological and disease pathways. We then integrated pathways-based information to describe both known and potential biomarkers as well as disease-associated genes/proteins for select diseases. This approach identifies therapeutic areas with candidate or validated biomarkers, and highlights those areas where a paucity of biomarkers exists.

Results

Data Extraction and Curation

In June 2011, we mined PubMed for term (“biomarker”)-disease associations and identified a total of 1,181 disease associations (Table 1). We then curated the top 100 disease associations from the list, mapping each result to both medical subject (MeSH) ID and Disease Ontology ID (DOID), and then subsequently queried the GeneGo diseases ontology for associated biomarkers (Table 2). Of 100 results, 62 map to both MeSH ID and DOID and are shown below.

Disease Name	PubMed Hits	Z Score	Relevancy Score	Synonyms
breast cancer	1025 (3,18,536,2890)	28.4	6170 (3,18,536,2890)	Breast Cancer; Cancer of the Breast; Malignant Breast Tumor; Malignant Neoplasm of the Breast; Malignant Tumor of the Breast; Malignant Neoplasm of Breast; Malignant Breast Neoplasm...
prostate cancer	754 (5,30,464,2327)	26	5647 (5,30,464,2327)	Prostate Cancer; Cancer of the Prostate; Cancer of Prostate; Prostatic Cancer; Cancer, Prostatic; Malignant Tumor of the Prostate; Cancer, Prostatic; Malignant Neoplasm of the Prostate...
Ovarian cancer	441 (5,12,308,1543)	16.7	3633 (5,12,308,1543)	Ovarian Carcinoma; Ovarian Cancers; CARCINOMA OF OVARY; Ovary Cancer; Cancer of the Ovary; Cancer of Ovary; Ovarian Cancer; Ovary Cancers...
lung cancers	573 (2,8,285,1498)	14.8	3223 (2,8,285,1498)	Malignant Tumor of the Lung; MALIGNANT LUNG NEOPLASM; Malignant tumor of lung; lung cancer; Cancer, Lung; Malignant Neoplasm of the Lung; Cancer of the Lung...
non small cell lung cancer	366 (9,14,203,1199)	13.8	3014 (9,14,203,1199)	Non Small Cell Carcinoma of Lung; Non Small Cell Lung Cancer; Non Small Cell Lung Carcinoma; non oat cell lung cancer; Non Small Cell Cancer of the Lung; Non Small Cell Lung Carcinomas; NSCLC Non small cell lung cancer; Non Small Cell Lung Carcinoma...
colorectal cancer	502 (0,4,216,1115)	10.5	2295 (0,4,216,1115)	Cancer, Colorectal; Colorectal Cancer; Colorectal Cancers
chronic obstructive pulmonary disease	156 (6,14,110,575)	8	1775 (6,14,110,575)	CHRONIC OBSTRUCTIVE PULMONARY DISEASE; COPD; Chronic airway disease; Chronic obstructive pulmonary disease; COPD Chronic obstructive pulmonary disease; Chronic airflow limitation; Chronic Obstructive Airways Disease; Chronic Obstructive Lung Disease...
gastric cancer	210 (1,5,136,727)	7.1	1582 (1,5,136,727)	gastric cancer; Stomach Cancers; Gastric cancer; Gastric Cancers; Malignant Neoplasm of the Stomach; Malignant neoplasm of stomach; Malignant Gastric Neoplasm; stomach cancer...
dementia	318 (5,10,86,558)	6.7	1488 (5,10,86,558)	Dementia
bladder cancer	193 (3,8,107,581)	6.6	1466 (3,8,107,581)	Bladder Ca; Cancers, Bladder; Malignant Neoplasm of the Bladder; Bladder Cancer; Malignant tumor of urinary bladder; Malignant Neoplasm of Bladder; urinary bladder cancer; Cancer of bladder...
atherosclerosis	368 (1,7,115,615)	6.4	1415 (1,7,115,615)	Atherosclerosis
heart failure	329 (0,4,123,644)	6.1	1359 (0,4,123,644)	Heart failure
Asthma	206 (2,5,95,647)	6.1	1347 (2,5,95,647)	Asthma
cardiovascular disease	465 (1,2,130,594)	6	1344 (1,2,130,594)	Circulatory disease; Cardiovascular system diseases; Cardiovascular disease; Circulatory Disorders; CIRCULATORY SYSTEM DISORDER; Diseases of the circulatory system; Disorder of the circulatory system; circulatory disorder...
colon cancer	308 (0,1,122,633)	5.7	1268 (0,1,122,633)	Carcinoma of Colon; Colon Carcinoma; Carcinoma Colon; CARCINOMA COLON; Carcinoma of the Colon; colorectal carcinogenesis; colon carcinogenesis; colon cancer

Table 1. A representative list of term (“biomarker”)-disease associations mined from PubMed in June 2011. The top 100 disease associations were ranked by Z Score. The Z-score indicates the number of standard deviations that the relevancy score is above the mean; larger Z-scores denote stronger associations. The top 100 data set is available under the Open Data Commons Attribution License at <http://BiomarkerCommons.org>.

Disease of anatomical entity [DOID:7]	MeSH ID	DOID	Associated genes
Cardiovascular system disease [DOID:1287]			
cardiovascular diseases	MSH:D002318	DOID:1287	238/2079
atherosclerosis	MSH:D005197	DOID:1936	11/16
coronary artery disease	MSH:D003324	DOID:3363	294/294
heart failure	MSH:D006333	DOID:6000	37/39
hypertension	MSH:D00973	DOID:10793	429/433
myocardial ischemia	MSH:D017202	DOID:3384	89/87
pre-eclampsia	MSH:D011225	DOID:10591	195/195
stroke	MSH:D020521	DOID:3455	205/243
vascular disease	MSH:D014652	DOID:178	78/1765
Gastrointestinal system disease [DOID:77]			
Barrett's esophagus	MSH:D001471	DOID:9206	5/4
liver disease	MSH:D008107	DOID:409	400/1934
liver fibrosis	MSH:D008103	DOID:5082	250/279
periodontitis	MSH:D010518	DOID:824	119/119
Immune system disease [DOID:2914]			
autoimmune diseases	MSH:D001327	DOID:417	121/2471
Integumentary system disease [DOID:16]			
psoriasis	MSH:D011565	DOID:4398	219/237
Musculoskeletal system disease [DOID:17]			
arthritis	MSH:D001168	DOID:848	448/967
osteoporosis	MSH:D010024	DOID:11476	108/141
rheumatoid arthritis	MSH:D001172	DOID:7148	504/718
systemic lupus erythematosus	MSH:D008180	DOID:9074	319/336
Nervous system disease [DOID:863]			
neurological disorders	MSH:D009422	DOID:863	0/12830
neurodegenerative diseases	MSH:D019636	DOID:1289	10/11386
Alzheimer type dementia	MSH:D000544	DOID:10652	589/591
Lewy body Parkinson's disease	MSH:D010300	DOID:14330	25/1261
dementia	MSH:D003704	DOID:1307	105/945
multiple sclerosis	MSH:D009103	DOID:2377	1546/1660
neuromyelitis optica	MSH:D009471	DOID:8669	15/15
Respiratory system disease [DOID:1579]			
lung disease	MSH:D008171	DOID:850	163/3519
acute respiratory distress syndrome	MSH:D012128	DOID:11394	44/44
asthma	MSH:D001249	DOID:2841	868/868
chronic obstructive pulmonary disease	MSH:D029424	DOID:3063	231/238
pneumonitis	MSH:D011014	DOID:552	74/78
Urinary system disease [DOID:18]			
end stage renal disease	MSH:D007676	DOID:784	136/136
Endocrine system disease [DOID:28]			
Reproductive system disease [DOID:15]			
Thoracic disease [DOID:0060118]			

Table 2. The curated list of disease associations mined from PubMed and organized by high-level Disease Ontology. Each specific disease association has a unique MeSH ID, DOID and number of associated genes as defined in the GeneGo MetaCore knowledgebase.

Materials and Methods

Text mining was performed using PolySearch, a web-based text mining system for extracting relationships between human diseases, genes, mutations, drugs and metabolites [Cheng et al., 2008]. The MeSH Browser (2012 MeSH) was used to map disease associations to MeSH IDs. Once MeSH IDs were assigned, the Disease Ontology was used to map DOIDs [Schriml et al., 2011]. Interaction networks were constructed in GeneGo MetaCore [Ekins et al., 2007] using the Auto expand algorithm, which gradually expands sub-networks around every object from the seed object list based on interactions identified in the literature. At every step, preference is given to objects with more connectivity to the initial object, and expansion halts when the sub-networks intersect, or when the overall network size reaches a predefined limit. Genes/proteins for which validated commercial assays exist were identified using Covance BioPathways at <http://www.Covance.com/BioPathways> and are indicated with a red dot. These genes/proteins can be considered potential biomarkers.

Disease Interaction Network and Biomarker Assay Identification

For illustrative purposes, we constructed an interaction network around disease-associated genes for two diseases—one with few associated genes (atherosclerosis) and one with many associated genes (asthma)—using a network building algorithm in GeneGo MetaCore. For each interaction network gene set, we then queried Covance BioPathways, a publicly accessible, web-based data source that integrates biological and disease pathway maps with validated Covance assays and antibody products, to identify commercially available biomarker assays.

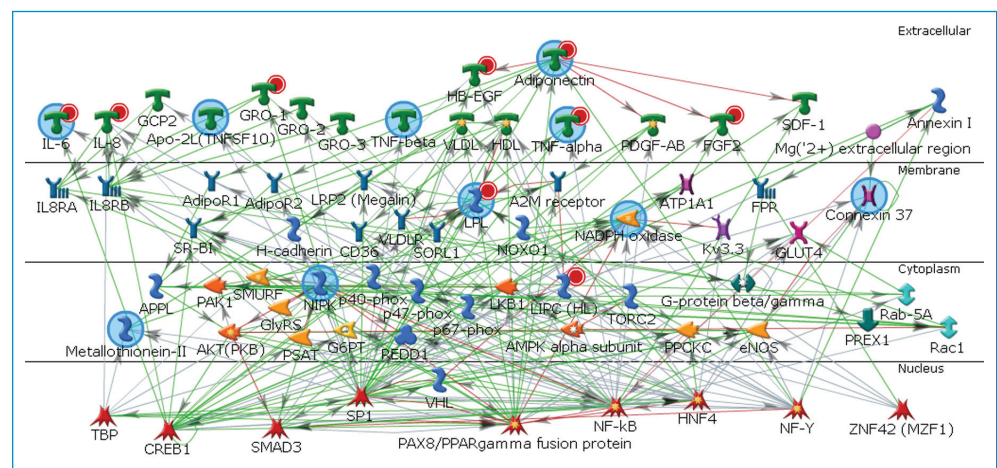


Figure 1. Atherosclerosis interaction network. Disease-associated genes are indicated with blue halos; genes without a halo were included by the network building algorithm. Biomarkers that have commercially validated assays are indicated with a red dot; they either are known or can be considered potential atherosclerosis biomarkers.

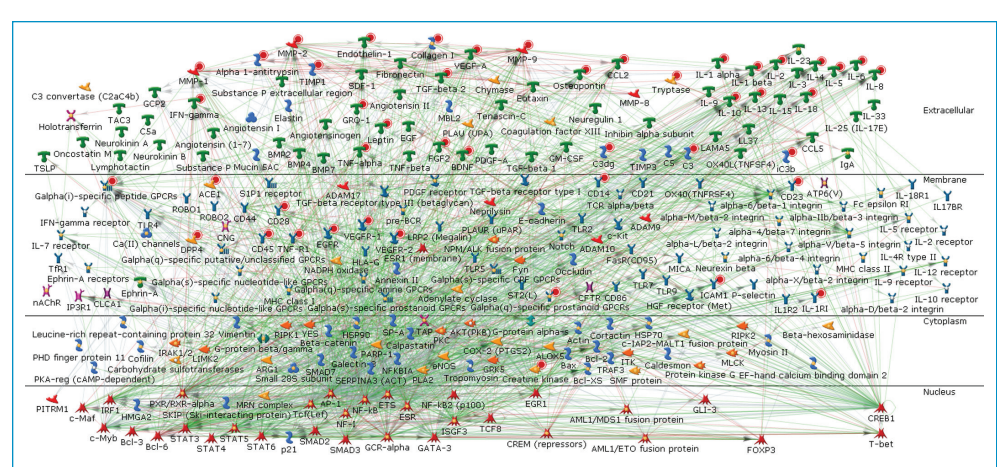
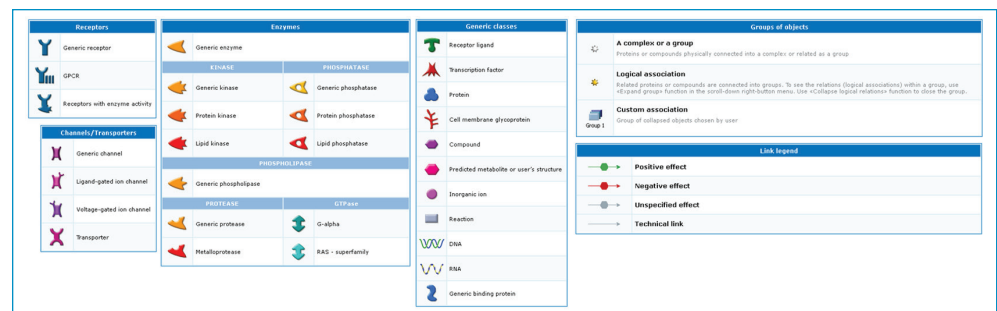


Figure 2. Asthma interaction network. All nodes shown are disease-associated genes. Biomarkers that have commercially validated assays are indicated with a red dot; they are either known or can be considered potential asthma biomarkers.

Discussion

Given the molecular interdependencies within a cell, a disease is rarely a consequence of a single gene abnormality but instead reflects the perturbation of a complex network of biological and signaling pathways. The approach described here describes the detection and ranking of human disease based on research/clinical activity surrounding biomarkers. It also enables the identification of therapeutic areas with candidate or validated biomarkers. The strategy takes an integrative approach to identify candidate disease biomarkers by combining disease-associated genes/proteins with commercially validated assays for known biomarkers. We first constructed a system-level model of disease that incorporates molecular interactions across biological and signaling pathways. We then identified each gene/protein in the model that has an existing commercially validated assay. This research offers an alternative, comprehensive view of key relationships and pathway perturbations that may identify biomarkers of disease emergence or progression.