



ORIGINAL ARTICLE

# Bioinformatics microarray analysis and identification of gene expression profiles associated with cirrhotic liver



Kun-Ming Chan <sup>a,b,\*</sup>, Tsung-Han Wu <sup>a,b</sup>, Ting-Jung Wu <sup>a,b</sup>,  
Hong-Shiue Chou <sup>a,b</sup>, Ming-Chin Yu <sup>a,b</sup>, Wei-Chen Lee <sup>a,b</sup>

<sup>a</sup> Department of General Surgery, Chang Gung Memorial Hospital at Linkou, Taoyuan, Taiwan

<sup>b</sup> College of Medicine, Chang Gung University, Taoyuan, Taiwan

Received 28 December 2015; accepted 25 February 2016

Available online 23 April 2016

## KEYWORDS

Bioinformatics;  
Gene profiles;  
Liver;  
Liver cirrhosis;  
Microarray analysis

**Abstract** Cirrhosis is the endpoint of liver fibrosis that is accompanied by limited regeneration capacity and complications and is the ultimate cause of death in many patients. Despite this, few studies have thoroughly looked at the gene expression profiles in the cirrhotic liver. Hence, this study aims to identify the genes that were differentially expressed in the cirrhotic liver and to explore the putative related signaling pathway and interaction networks. The gene expression profiles of cirrhotic livers and noncirrhotic livers were examined and compared using microarray gene analysis. Proteins encoded by the differentially expressed genes were analyzed for functional clustering and signaling pathway involvement using MetaCore bioinformatics analyses. The Gene Ontology analysis as well as the Kyoto encyclopedia of Genes and Genomes pathway analysis were also performed. A total of 213 significant genes were differentially expressed at more than a two-fold change in cirrhotic livers as compared to noncirrhotic livers. Of these, 105 upregulated genes and 63 downregulated genes were validated through MetaCore bioinformatics analyses. The signaling pathways and major functions of proteins encoded by these differentially expressed genes were further analyzed; results showed that the cirrhotic liver has a unique gene expression pattern related to inflammatory reaction, immune response, and cell growth, and is potentially cancer related. Our findings suggest that the microarray analysis may provide clues to the molecular mechanisms of liver cirrhosis for future experimental studies. However, further exploration of areas regarding therapeutic strategy might be possible to support metabolic activity, decrease inflammation, or enhance regeneration for liver cirrhosis. Copyright © 2016, Kaohsiung Medical University. Published by Elsevier Taiwan LLC. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

Conflicts of interest: All authors declare no conflicts of interest.

\* Corresponding author. Department of General Surgery, Chang Gung Memorial Hospital at Linkou, 5, Fu-Hsing Street, Kwei-Shan Township, Taoyuan County 33305, Taiwan.

E-mail addresses: [chankunming@adm.cgmh.org.tw](mailto:chankunming@adm.cgmh.org.tw), [chankunming@gmail.com](mailto:chankunming@gmail.com) (K.-M. Chan).

<http://dx.doi.org/10.1016/j.kjms.2016.03.008>

1607-551X/Copyright © 2016, Kaohsiung Medical University. Published by Elsevier Taiwan LLC. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

## Introduction

The liver is a quiescent organ in the adult body that has the unique capacity to regulate its growth and regenerate after injury and partial hepatectomy. This property is particularly remarkable in clinical circumstances such as toxic injury, viral hepatitis, and hepatectomy, situations in which quiescent hepatocytes proliferate and replicate to restore the mass and functional capacity of the liver [1,2]. However, the regenerative ability of a cirrhotic liver is relatively limited because of diffuse fibrosis of hepatic parenchyma, which also prohibits liver resection in patients with liver cirrhosis [3,4]. Currently, liver cirrhosis is always associated with hepatocellular carcinoma (HCC), and both are leading causes of death worldwide [5–8]. Although liver resection remains the usual course of treatment for patients with HCC, the reduced regeneration capacity would limit the benefit of liver resection for patients with hepatic malignancy [9–11].

Liver cirrhosis is an advanced stage of liver fibrosis that results when the normal wound-healing response leads to an abnormal continuation of connective tissue production and deposition [12]. The wound-healing response produces a formation of scar tissue that is composed of a complex assembly of different extracellular matrix (ECM) molecules [13]. Additionally, a growing number of changes in genetic expressions that likely affected fibrosis progression had been described [14–16]. However, the majority of candidate differentially expressed genes need to be confirmed further. Therefore, this study collected liver tissues from cirrhotic and noncirrhotic livers and compared gene expression using microarray technology to identify gene expression differences in cirrhotic livers compared to noncirrhotic livers.

## Methods

### Patients

All study procedures and protocols were approved by the Institutional Review Boards of Chang Gung Memorial Hospital, Taoyuan, Taiwan. Patients who underwent liver resection at the Department of General Surgery at the Chang Gung Memorial Hospital at Linkou, Taoyuan, Taiwan, were screened for inclusion in this study between December 2011 and December 2013. Written informed consent was obtained from all patients prior to the operation, and 40 patients were enrolled in this study. Liver tissue was obtained through wedge liver biopsies during operation. In case of hepatic malignancy, tissue samples were taken from the part of the liver that did not contain the tumor. All liver tissues were initially subjected for histological examination, and the Ishak fibrosis score was used to assess the cirrhosis status of liver parenchyma [17]. Patients who had Ishak fibrosis score  $\geq 5$  (marked portal–portal and/or portal central bridging with occasional nodules) were defined as liver cirrhosis cases.

Based on the classification, patients were categorized into two groups: cirrhotic liver ( $n = 24$ ) and noncirrhotic liver ( $n = 16$ ). The clinical characteristics of patients are listed in Table 1. The cirrhotic group consisted of 10 patients who had undergone liver resection because of HCC

with ( $n = 9$ ) or without ( $n = 1$ ) virus hepatitis, and 14 patients who had liver transplantation. The indications of liver transplantation were virus hepatitis-related cirrhosis with ( $n = 7$ ) or without HCC ( $n = 5$ ), Wilson disease ( $n = 1$ ), and unknown etiology of end-stage liver cirrhosis ( $n = 1$ ). None of these patients had alcoholic-related liver cirrhosis. The noncirrhotic group consisted of four living-related liver donors and 12 patients who had liver resection because of liver tumor including HCC ( $n = 3$ ), hemangioma ( $n = 1$ ), and colorectal cancer hepatic metastasis ( $n = 8$ ).

### Tissue preservation and RNA extraction

Liver biopsies were placed immediately in RNeasy RNA Stabilization Reagent (Qiagen Sciences, Valencia, CA, USA) and frozen at  $-20^{\circ}\text{C}$ . Total RNA was extracted from the liver biopsies and isolated using the RNeasy Mini Kit (Qiagen Sciences), according to the manufacturer's protocol. Contaminating genomic DNA was removed using gDNA Eliminator columns from the RNeasy Mini Kit (Qiagen Sciences). Then, first-strand cDNA was synthesized from 2  $\mu\text{g}$  of total RNA by using the Super-Script first-strand synthesis system (Invitrogen, Carlsbad, CA, USA).

### Microarray and data processing

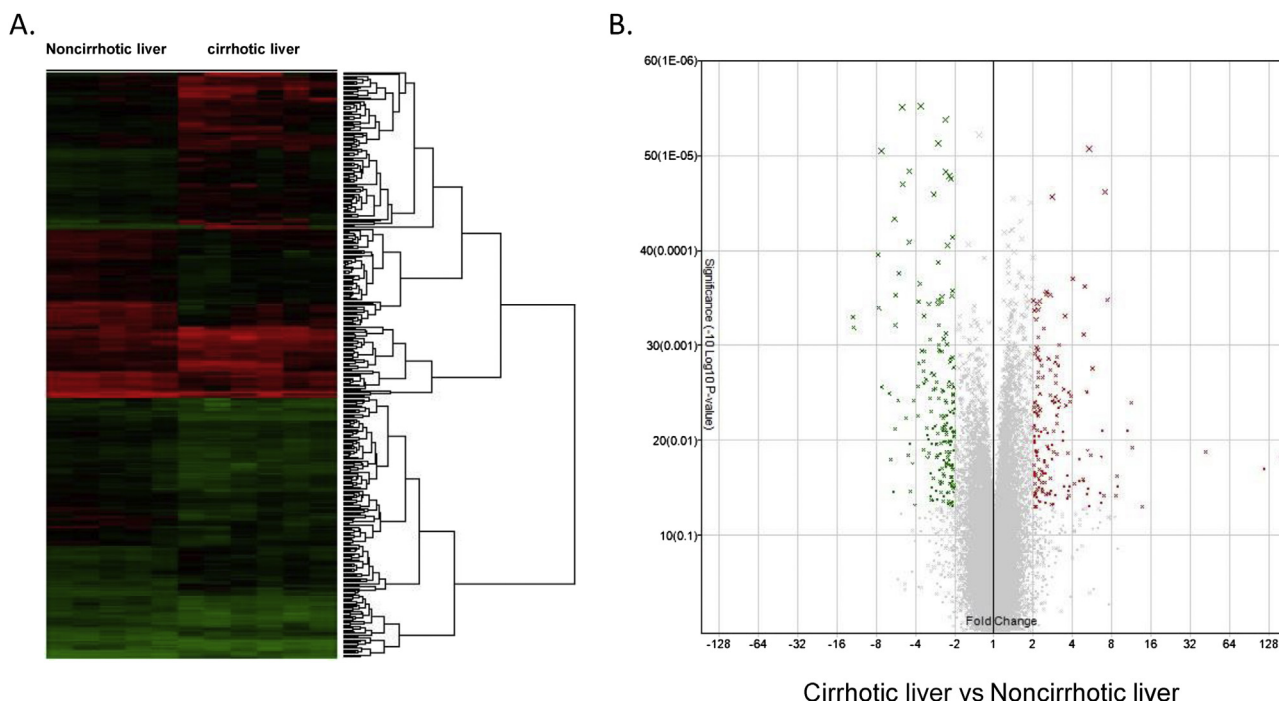
The first-strand cDNA converted from mRNA was fragmented into cRNA using T7 RNA polymerase with biotinylated nucleotides (Promega, Madison, WI, USA). Then, 15  $\mu\text{g}$  of fragmented cRNA was hybridized to each Affymetrix HuGene 2.0 Chip (Affymetrix, Santa Clara, CA, USA). Chips were hybridized, washed, and stained as per the Affymetrix standard protocol, and signal intensities corresponding to gene expression were generated through the Affymetrix GeneChip Operating Software (GCOS).

**Table 1** Clinical demographic and characteristic of patients.

Characteristics	Cirrhosis ( $n = 24$ )	Noncirrhosis ( $n = 16$ )	$p$
Age (y)	57 (33–76)	54 (31–69)	0.198
Sex			0.502
Male	15 (63)	12 (75)	
Female	9 (37)	4 (25)	
Hepatitis status			<0.0001
Hepatitis B virus	16 (67)	1 (6)	
Hepatitis C virus	4 (17)	0	
Hepatitis B & C	1 (4)	0	
None	3 (12)	15 (94)	
Liver tumor			0.888
Primary HCC	17 (71)	3 (19)	
CRC metastasis	0	8 (50)	
Hemangioma	0	1 (6)	
No	7 (29)	4 (25)	

Data are presented as  $n$  (%) or median (range).

CRC = colorectal cancer; HCC = hepatocellular carcinoma.



**Figure 1.** Microarray gene analysis. (A) Heat map of gene expression profiles. Red color indicates upregulation; green color represents downregulation. (B) Volcano plot of differentially expressed genes. Red color indicates upregulation; green color represents downregulation. Genes with a significant change of more than two-fold were selected.

Microarray gene profiles were obtained from each liver sample, and significant differences of expression gene were analyzed using group comparison. Genes that were statistically significant with a  $p$  value  $< 0.05$  as well as expressed at two-fold or greater difference between the two groups were selected for further analysis. The biological function analysis of gene-encoded protein was done using MetaCore (Life Sciences Research, Thomson Reuters, UK) analysis or the Database for Annotation, Visualization, and Integrated Discovery (DAVID; [david.ncifcrf.gov](http://david.ncifcrf.gov)) [18]. Pathway analysis and additional analysis of gene function was performed using the Gene Ontology (GO) analysis and/or Kyoto encyclopedia of Genes and Genomes (KEGG) pathway analysis.

## Results

### Differential gene expression profiles

In order to clarify differential gene expression between cirrhotic and noncirrhotic livers, gene expression levels were analyzed in the two groups. Genes with a significant change of two-fold or more were screened, yielding 127 upregulated genes and 86 downregulated genes from the microarray analysis (Figure 1). Subsequently, these genes were further analyzed and categorized by MetaCore analysis. After excluding unknown genes, 105 upregulated genes (Table 2) and 63 downregulated genes were validated (Table 3). Based on their putative functions, genes were

categorized into subgroups including transcription factors ( $n = 5$ ), receptors ( $n = 9$ ), ligands ( $n = 8$ ), kinases ( $n = 3$ ), proteases ( $n = 10$ ), phosphatases ( $n = 3$ ), generic enzymes ( $n = 47$ ), proteins and binding proteins ( $n = 64$ ), and others ( $n = 19$ ).

### Function and pathway of encoded proteins

To determine the function and pathway of the protein encoded by each gene, a MetaCore search for each gene were performed. Although numerous genes have multiple functions, this study focused on the major pathway and function of the protein encoded by the gene. For genes that play a major role in inflammation and immunologic reaction, 18 genes were upregulated, but only one gene was downregulated in the cirrhotic liver compared to the noncirrhotic liver. Table 4 shows the pathway analysis results in terms of inflammation and immunologic reaction. The upregulated inflammatory and immunologic genes included genes involved in numerous inflammation reactions such as vascular inflammation, regulation of cytokines, and activation of chemokine in the cirrhotic liver.

Additionally, there were 19 significantly upregulated genes involved in the cell cycle in tasks such as cell differentiation, cell division, growth regulation, wound healing, and apoptosis in the cirrhotic liver compared to the noncirrhotic liver, demonstrating that the cirrhotic liver was undergoing self-repair. However, the frequent cycle of parenchymal damage and repair has led to scar formation

**Table 2** Upregulated gene expression of cirrhotic liver as compared with noncirrhotic liver.

Gene symbol	Gene name	Fold change	<i>p</i>
Transcription factors			
<i>STAT1</i>	Signal transducer & activator of transcription 1	2.6	0.001
<i>ZNF215</i>	Zinc finger protein 215	2.13	0.002
<i>NCKAP1L</i>	NCK-associated protein 1-like	2.13	0.007
<i>ELF3</i>	E74-like factor 3	2.08	0.036
Receptors			
<i>OSMR</i>	Oncostatin M receptor	2.97	0.002
<i>LGALS3BP</i>	Lectin, galactoside-binding, soluble, 3 binding protein	2.53	0.002
<i>HLA-A</i>	Major histocompatibility complex, class I, A	2.25	0.043
<i>HLA-DRB3</i>	Major histocompatibility complex, class II, DR beta 3	2.16	0.005
<i>ITGA2</i>	Integrin, alpha 2	2.1	0.049
Ligands			
<i>CCL20</i>	Chemokine (C–C motif) ligand 20	5.15	0.037
<i>SPP1</i>	Secreted phosphoprotein 1	4.5	0.026
<i>CXCL6</i>	Chemokine (C–X–C motif) ligand 6	3.37	0.008
<i>GDF15</i>	Growth differentiation factor 15	2.34	0.034
<i>LAMA2</i>	Laminin, alpha 2	2.32	0.027
<i>A2M</i>	Alpha-2-macroglobulin	2.24	<0.001
<i>JAG1</i>	Jagged 1	2.19	0.024
<i>IL32</i>	Interleukin 32	2.04	0.010
Kinase			
<i>HKDC1</i>	Hexokinase domain containing 1	4.86	<0.001
<i>CHEK2</i>	Checkpoint kinase 2	2.62	0.012
Protease			
<i>MMP7</i>	Matrix metalloproteinase 7	2.69	0.025
<i>TMPRSS3</i>	Transmembrane protease, serine 3	2.26	0.001
<i>TMPRSS4</i>	Transmembrane protease, serine 4	2.26	0.001
<i>HTRA1</i>	HtrA serine peptidase 1	2.18	0.002
<i>BACE2</i>	Beta-site APP-cleaving enzyme 2	2.04	0.021
Phosphatase			
<i>SGPP1</i>	Sphingosine-1-phosphate phosphatase 1	4.5	0.026
<i>PLA2G2A</i>	Phospholipase A2, group IIA	4.11	0.028
Generic enzymes			
<i>GGTLC2</i>	Gamma-glutamyltransferase light chain 2	6.49	0.035
<i>ACSL4</i>	Acyl-CoA synthetase long-chain family member 4	5.52	0.014
<i>UPP2</i>	Uridine phosphorylase 2	5.22	0.012
<i>LIPH</i>	Lipase, member H	4.95	<0.001
<i>LIPI</i>	Lipase, member I	4.95	<0.001
<i>ENPP2</i>	Ectonucleotide pyrophosphatase/phosphodiesterase 2	4.02	<0.001
<i>NQO1</i>	NAD(P)H dehydrogenase, quinone 1	3.64	0.040
<i>CHST9</i>	Carbohydrate ( <i>N</i> -acetylgalactosamine 4- <i>O</i> ) sulfotransferase 9	3.03	0.006
<i>ENPP5</i>	Ectonucleotide pyrophosphatase/phosphodiesterase 5	3.02	0.005
<i>APOBEC3C</i>	Apolipoprotein B mRNA editing enzyme, catalytic polypeptide-like 3C	2.78	<0.001
<i>TYMS</i>	Thymidylate synthetase	2.72	0.034
<i>GPX2</i>	Glutathione peroxidase 2	2.7	0.001
<i>FAM111B</i>	Family with sequence similarity 111, member B	2.66	0.036
<i>CDS1</i>	CDP-diacylglycerol synthase 1	2.62	0.012
<i>TUSC3</i>	Tumor suppressor candidate 3	2.43	0.017
<i>NEDD4L</i>	Neural precursor cell expressed, developmentally downregulated 4-like	2.4	<0.001
<i>OAS2</i>	2'-5'-Oligoadenylate synthetase 2	2.31	0.001
<i>IFI30</i>	Interferon, gamma-inducible protein 30	2.24	0.004
<i>GLS</i>	Glutaminase	2.23	0.020
<i>GLS2</i>	Glutaminase 2	2.23	0.020
<i>UBASH3A</i>	Ubiquitin associated & SH3 domain containing A	2.18	0.002
<i>TGM2</i>	Transglutaminase 2	2.18	0.015
<i>GCNT4</i>	Glucosaminyl ( <i>N</i> -acetyl) transferase 4, core 2	2.18	0.001
<i>TMEM55A</i>	Transmembrane protein 55A	2.17	0.001
<i>ACSM1</i>	Acyl-CoA synthetase medium-chain family member 1	2.12	0.005

Table 2 (continued)

Gene symbol	Gene name	Fold change	<i>p</i>
<i>MOXD1</i>	Monoxygenase, DBH-like 1	2.1	0.034
<i>MX1</i>	Myxovirus (influenza virus) resistance 1	2.07	0.013
Protein, binding protein			
<i>TMEM45B</i>	Transmembrane protein 45B	7.07	<0.001
<i>EPCAM</i>	Epithelial cell adhesion molecule	6.72	0.007
<i>POF1B</i>	Oremature ovarian failure, 1B	5.66	0.001
<i>FAT1</i>	FAT tumor suppressor homolog 1	5.12	0.003
<i>FABP4</i>	Fatty acid binding protein 4, adipocyte	4.83	0.025
<i>CXXC1</i>	CXXC finger protein 1	4.5	0.026
<i>GPC3</i>	Glypican 3	4.49	0.015
<i>DTNA</i>	Dystrobrevin, alpha	3.81	0.003
<i>LGALS3</i>	Lectin, galactoside-binding, soluble, 3	3.72	0.003
<i>IGLV1-40</i>	Immunoglobulin lambda variable 1–40	3.43	0.030
<i>TSPAN8</i>	Tetraspanin 8	3.41	0.002
<i>SLPI</i>	Secretory leukocyte peptidase inhibitor	3.16	<0.001
<i>GOLM1</i>	Golgi membrane protein 1	3.1	0.001
<i>DCDC2</i>	Doublecortin domain containing 2	3.02	0.013
<i>IFI6</i>	Interferon, alpha-inducible protein 6	3.01	0.001
<i>LRRC1</i>	Leucine rich repeat containing 1	2.94	0.001
<i>FAM169A</i>	Family with sequence similarity 169, member A	2.92	0.003
<i>TIMP1</i>	TIMP metalloproteinase inhibitor 1	2.85	0.013
<i>LUM</i>	Lumican	2.84	0.046
<i>SEL1L3</i>	Sel-1 suppressor of lin-12-like 3	2.57	0.008
<i>IGHV4-31</i>	Immunoglobulin heavy variable 4-31	2.57	0.011
<i>GPRIN3</i>	GPRIN family member 3	2.5	<0.001
<i>ANXA2P2</i>	Annexin A2 pseudogene 2	2.47	0.022
<i>HSPA4L</i>	Heat shock 70 kDa protein 4-like	2.44	0.007
<i>CD24</i>	CD24 molecule	2.31	0.023
<i>HLA-A</i>	Major histocompatibility complex, class I, A	2.25	0.043
<i>A2M</i>	Alpha-2-macroglobulin	2.24	<0.001
<i>CDHR2</i>	Cadherin-related family member 2	2.19	0.026
<i>MMVP1</i>	Myxomatous mitral valve prolapse 1	2.19	<0.001
<i>MVP</i>	Major vault protein	2.19	<0.001
<i>CLIP4</i>	CAP-GLY domain containing linker protein family, member 4	2.18	0.002
<i>TMEM87B</i>	Transmembrane protein 87B	2.14	<0.001
<i>TTC9</i>	Tetratricopeptide repeat domain 9	2.13	0.014
<i>LXN</i>	Latexin	2.12	0.039
<i>SPTBN1</i>	Spectrin, beta, nonerythrocytic 1	2.08	0.036
<i>PTGFRN</i>	Prostaglandin F2 receptor negative regulator	2.06	0.001
<i>RASSF3</i>	Ras association (RalGDS/AF-6) domain family member 3	2.05	0.023
<i>RASSF5</i>	Ras association (RalGDS/AF-6) domain family member 5	2.05	0.023
<i>ID4</i>	Inhibitor of DNA binding 4, dominant negative helix–loop–helix protein	2.04	0.024
<i>LOXL4</i>	Lysyl oxidase-like 4	2.03	0.010
<i>EZR</i>	Ezrin	2.02	0.007
<i>CDH6</i>	Cadherin 6, type 2, K-cadherin	2.01	0.018
Others			
<i>SORT1</i>	Sortilin 1	5.33	<0.001
<i>SLC6A11</i>	Solute carrier family 6, member 11	3.86	0.003
<i>SLC38A1</i>	Solute carrier family 38, member 1	3.5	<0.001
<i>GPR64</i>	G protein-coupled receptor 64	2.77	0.011
<i>SLC35C1</i>	Solute carrier family 35, member C1	2.69	<0.001
<i>SLC22A15</i>	Solute carrier family 22, member 15	2.54	0.018
<i>CFTR</i>	Cystic fibrosis transmembrane conductance regulator	2.48	0.045
<i>F2RL1</i>	Coagulation factor II (thrombin) receptor-like 1	2.19	0.005
<i>RASD1</i>	RAS, dexamethasone-induced 1	2.07	0.038
<i>SLC12A2</i>	Solute carrier family 12 (sodium/potassium/chloride transporters), member 2	2.05	0.049

**Table 3** Downregulated gene expression of cirrhotic liver as compared with noncirrhotic liver.

Gene symbol	Gene name	Fold change	<i>p</i>
Transcription factor			
<i>PHOX2A</i>	Paired-like homeobox 2a	3.83	0.002
Receptors			
<i>ABCC9</i>	ATP-binding cassette, sub-family C, member 9	2.44	0.003
<i>IL1RAP</i>	Interleukin 1 receptor accessory protein	2.29	0.005
<i>PTPRD</i>	Protein tyrosine phosphatase, receptor type, D	2.1	0.024
<i>PTPRS</i>	Protein tyrosine phosphatase, receptor type, S	2.1	0.024
Kinase			
<i>MAP2K6</i>	Mitogen-activated protein kinase kinase 6	2.65	0.003
Protease			
<i>CNDP1</i>	Carnosine dipeptidase 1	7.24	0.002
<i>FOLH1B</i>	Folate hydrolase 1B	3.29	0.007
<i>MMP12</i>	Matrix metalloproteinase 12	3.1	0.003
<i>MME</i>	Membrane metallo-endopeptidase	3.1	0.003
<i>NAALAD2</i>	<i>N</i> -Acetylated alpha-linked acidic dipeptidase 2	2.07	0.030
Phosphatase			
<i>ENPP3</i>	Ectonucleotide pyrophosphatase/phosphodiesterase 3	3.0	0.001
Generic enzymes			
<i>SRD5A2</i>	Steroid-5-alpha-reductase, alpha polypeptide 2	6.35	0.003
<i>CYP7A1</i>	Cytochrome P450, family 7, subfamily A, polypeptide 1	4.56	0.014
<i>SULT1E1</i>	Sulfotransferase family 1E, estrogen-preferring, member 1	4.43	<0.001
<i>LGSN</i>	Lengsin, lens protein with glutamine synthetase domain	4.2	0.017
<i>ASPA</i>	Aspartoacylase	3.76	0.001
<i>CYP2C19</i>	Cytochrome P450, family 2, subfamily C, polypeptide 19	3.47	0.001
<i>BCHE</i>	Butyrylcholinesterase	3.31	0.002
<i>CYP1A1</i>	Cytochrome P450, family 1, subfamily A, polypeptide 1	3.21	0.015
<i>CYP1A2</i>	Cytochrome P450, family 1, subfamily A, polypeptide 2	3.21	0.015
<i>BBOX1</i>	Butyrobetaine, 2-oxoglutarate dioxygenase 1	2.82	0.007
<i>HSD17B14</i>	Hydroxysteroid (17-beta) dehydrogenase 14	2.67	<0.001
<i>DHRS2</i>	Dehydrogenase/reductase (SDR family) member 2	2.5	0.001
<i>OAT</i>	Ornithine aminotransferase	2.5	0.019
<i>CYP4A22</i>	Cytochrome P450, family 4, subfamily A, polypeptide 22	2.39	0.023
<i>EPHX2</i>	Epoxide hydrolase 2, cytoplasmic	2.32	0.008
<i>ACSM3</i>	Acyl-CoA synthetase medium-chain family member 3	2.24	0.013
<i>CYP4A11</i>	Cytochrome P450, family 4, subfamily A, polypeptide 11	2.24	0.012
<i>GPAM</i>	Glycerol-3-phosphate acyltransferase, mitochondrial	2.23	0.043
<i>ADCY10</i>	Adenylate cyclase 10	2.2	0.028
<i>STEAP1</i>	Six transmembrane epithelial antigen of the prostate 1	2.12	0.045
Protein, binding protein			
<i>C5orf27</i>	Chromosome 5 open reading frame 27	11.82	<0.001
<i>TRIM55</i>	Tripartite motif containing 55	7.31	<0.001
<i>RANBP3L</i>	RAN binding protein 3-like	5.73	0.007
<i>CTNNA3</i>	Catenin (cadherin-associated protein), alpha 3	4.45	<0.001
<i>NCAM2</i>	Neural cell adhesion molecule 2	3.83	0.002
<i>IDO2</i>	Indoleamine 2,3-dioxygenase 2	3.46	0.012
<i>FAM106CP</i>	Family with sequence similarity 06, member C, pseudogene	3.1	<0.001
<i>MT1G</i>	Metallothionein 1G	3.0	0.031
<i>PPP1R1A</i>	Protein phosphatase 1, regulatory subunit 1A	3.0	0.010
<i>LPA</i>	Lipoprotein, Lp(a)	2.77	0.033
<i>CCDC144A</i>	Coiled-coil domain containing 144A	2.55	0.010
<i>SLITRK3</i>	SLIT & NTRK-like family, member 3	2.52	<0.001
<i>ABCC9</i>	ATP-binding cassette, subfamily C (CFTR/MRP), member 9	2.44	0.003
<i>SLITRK6</i>	SLIT & NTRK-like family, member 6	2.4	0.005
<i>FAM151A</i>	Family with sequence similarity 151, member A	2.35	0.007
<i>CECR2</i>	Cat eye syndrome chromosome region, candidate 2	2.34	<0.001
<i>JAKMIP2</i>	Janus kinase & microtubule interacting protein 2	2.32	0.013
<i>LIPC</i>	Lipase, hepatic	2.32	0.004
<i>TULP3</i>	Tubby like protein 3	2.31	0.035

Table 3 (continued)

Gene symbol	Gene name	Fold change	<i>p</i>
<i>PCOLCE2</i>	Procollagen C-endopeptidase enhancer 2	2.16	0.001
<i>LPAL2</i>	Lipoprotein, Lp(a)-like 2, pseudogene	2.08	0.044
<i>LRRTM3</i>	Leucine rich repeat transmembrane neuronal 3	2.08	<0.001
Others			
<i>KCNN2</i>	Potassium conductance calcium-activated channel, subfamily N, member 2	7.73	<0.001
<i>NPY6R</i>	Neuropeptide Y receptor Y6	4.7	0.005
<i>CFHR3</i>	Complement factor H-related 3	4.01	0.048
<i>KCNJ3</i>	Potassium inwardly-rectifying channel, subfamily J, member 3	3.15	0.013
<i>SLC5A12</i>	Solute carrier family 5 (sodium/glucose cotransporter), member 12	3.05	0.038
<i>SLCO1B3</i>	Solute carrier organic anion transporter family, member 1B3	2.63	0.001
<i>SLC17A2</i>	Solute carrier family 17 (sodium phosphate), member 2	2.44	0.005
<i>SLC34A1</i>	Solute carrier family 34 (sodium phosphate), member 1	2.44	0.005
<i>SLC16A10</i>	Solute carrier family 16, member 10 (aromatic amino acid transporter)	2.21	0.002

as well as cirrhotic change of the hepatic parenchyma. By contrast, three genes that are involved in regulating cellular process including cell growth, cell differentiation, mitotic cycling, embryonic development, reproduction, and tissue remodeling were downregulated, indicating that the self-renewal ability of the cirrhotic liver might be relatively limited (Table 5).

In terms of genes related to cancer, seven tumor-associated genes were significantly upregulated in the cirrhotic liver compared to the noncirrhotic liver. Of these, three genes were presented in various tumors, and four genes were associated with cancer behavior related to cancer cell invasion, angiogenic properties, and therapeutic sensitivity. Although none of these genes were directly related to primary liver tumor, these results suggested that the microenvironment contained in cirrhotic liver might be affecting oncogenesis or tumorigenesis as compared to the noncirrhotic liver (Table 6).

### Significant signaling pathway and interaction network

To explore the putative signaling pathway and interaction network associated with cirrhosis liver, MetaCore and pathway analyses were further performed. Twenty-six signaling pathways were statistically significant, and a signaling pathway termed "Cell adhesion ECM remodeling" was involved by most genes of the study. Three upregulated genes (*TIMP1*, *MMP-7*, and *Ezrin*) and one downregulated gene (*MMP-12*) were identified to participate in the Cell adhesion ECM remodeling pathway (Figure 2), indicating cirrhotic liver might be associated with ECM remodeling, which involves the normal physiological processes of reproduction, proliferation, cell motility and adhesion, wound healing, angiogenesis, as well as disease processes. Meanwhile, the interaction network analysis resulted in 21 networks, and Figure 3

illustrates the most significant interaction network. The interaction network contained 137 genes, and 87 of them were from the current study. Additionally, the interaction network was composed of genes regarding regulation of cell proliferation (41.1%), positive regulation of gene expression (38.8%), positive regulation of transcription from RNA polymerase II promoter (32.6%), regulation of epithelial cell proliferation (21.7%), and organ development (51.9%).

### Discussion

The mechanisms responsible for the initiation and process of liver regeneration are widely explored in terms of their physiological, biochemical, morphological, and molecular characteristics [1,2]. A deeper understanding of liver regeneration has been pursued for several decades, and most of the new information has been uncovered using a reproducible model of partial hepatectomy from rodents. However, the regenerative ability of the cirrhotic liver is relatively limited because of diffuse fibrosis of the hepatic parenchyma, which prohibits liver resection in patients with liver cirrhosis. Hence, it is imperative to understand the differences between a cirrhotic liver and a healthy liver. This study characterized the differences in gene expression in the cirrhotic liver using microarray technology. Furthermore, the differentially expressed genes were categorized into subgroups based on the molecular basis of their major role, which could be informative for our understanding of the pathophysiology and regeneration capacity of the cirrhotic liver.

The invention of new scientific instruments and methodologies allows for new ways of exploring medical questions. Microarray technology has become one of the most sophisticated and widely used methods for identification of differentially expressed genes [19,20]. A number of previous reports have shown that several gene profiles related to



**Table 4** Differential expression genes regarding inflammation and immunologic reaction in the cirrhotic liver as compared with noncirrhotic liver.

Gene symbol	Signaling pathway category	Major function & signaling pathway of encoded protein
Upregulated genes		
<i>ELF3</i>	KEGG:04712	Involved in mediating vascular inflammation
<i>NCKAP1L</i>	KEGG:04810	Only expressed in hematopoietic cells
<i>LGALS3BP</i>	GO:0006968	Implicated in immune response associated with natural killer (NK) & lymphokine-activated killer (LAK) cell cytotoxicity
<i>ITGA2</i>	KEGG:04611	Mediates the adhesion of platelets & other cell types to the extracellular matrix
<i>OSMR</i>	KEGG:04060	Encodes a member of the type I cytokine receptor family
<i>CCL20</i>	KEGG:04060	Liver & activation-regulated chemokine
<i>CXCL6</i>	KEGG:04060	Chemokine (CXC motif) ligand 6 (granulocyte chemotactic protein 2)
<i>IL32</i>	GO:0005125	Induces the production of TNF $\alpha$ from macrophage cells
<i>JAG1</i>	KEGG:04668	Plays a role in hematopoiesis
<i>SPP1</i>	KEGG:04151	Upregulates expression of interferon-gamma & interleukin-12
<i>OAS2</i>	KEGG:05160	Involved in the innate immune response to viral infection
<i>MX1</i>	KEGG:02020	Environmental information processing & signal transduction
<i>UBASH3A</i>	GO:0050860	Facilitates growth factor withdrawal-induced apoptosis in T cells
<i>A2M</i>	KEGG:04610	Proteolytic cascade in blood plasma, mediator of innate immunity, & a nonspecific defense mechanism against pathogens
<i>CD24</i>	KEGG:04640	Expressed on mature granulocytes & in many B cells.
<i>LGALS3</i>	GO:0070663	Plays a role in numerous cellular functions including innate immunity, cell adhesion & T cell regulation
<i>HLA-A</i>	KEGG:04650	Natural killer cell mediated cytotoxicity
<i>RASSF5</i>	KEGG:04015	Regulates lymphocyte adhesion & suppresses cell growth in response to activated Rap1 or Ras
Downregulated genes		
<i>IL1RAP</i>	KEGG:04060	Initiates signaling events that result in the activation of interleukin 1-responsive genes

GO = Gene Ontology; KEGG = Kyoto Encyclopedia of Genes and Genomes.

cirrhotic liver were associated with other underlying liver disease [20–22], and many of those genes in terms of similar categories and biologic functions were noted in this study as well. Importantly, some genes related to immune response and cytokines were identified. *OSMR*, *CCL20*, *CXCL6*, *OAS2*, and *IL32* were upregulated in cirrhosis, whereas *IL1RAP* was downregulated in cirrhotic liver. Additionally, these cytokines were identified to participate in a common cytokine–cytokine receptor interaction pathway in this study. The results suggested that an increased expression of immune responsive genes and cytokines were associated with fibrosis progress. Meanwhile, specific cytokines such as *OAS2* might be also connected with viral infection, which is in agreement with previous evidence that involved the innate immune response to viral infection [23].

Numerous animal studies have examined the expression of genes related to regeneration following partial hepatectomy [24–27]. Studies also showed evidence illustrating the shift in metabolic function and energy balance in regenerating livers of rodents [28–30]. However, the majority of experiments looked at animals with healthy liver parenchyma. In the clinical setting, patients with liver disease associated with various degrees of cirrhosis are very common. This study analyzed cirrhotic livers from humans,

so the results may be more transferrable to a clinical setting. Genes related to various cellular functions in terms of cell differentiation, division, growth regulation, wound healing, and apoptosis showed different expression patterns in cirrhotic liver. Additionally, few genes related to the ECM remodeling pathway were significant in cirrhotic liver, which is consistent with previous reports that showed a connection between liver cirrhosis and process of apoptosis, cell repair, wound healing, and cell proliferation [12,13,31].

Although innate immunity has been described to be important for liver regeneration [32–34], few genes involved in liver regeneration were differentially expressed in the cirrhotic liver of this study. Meanwhile, a number of genes associated with metabolic liver functions such as bile acid metabolism and protein metabolism were markedly decreased in the cirrhotic liver compared to the healthy liver. Differential expression of genes encoding enzymes that play roles in glucose metabolism, lipid metabolism, bile secretion, and hormone metabolism was also observed.

However, this study is limited by its small sample size and heterogeneous patient characteristics, and we are not able to determine what extent and degree of liver cirrhosis would affect differential gene expression in this study.



**Table 5** Differential expression genes involved in cell differentiation, division, growth regulation, wound healing, and apoptosis in the cirrhotic liver.

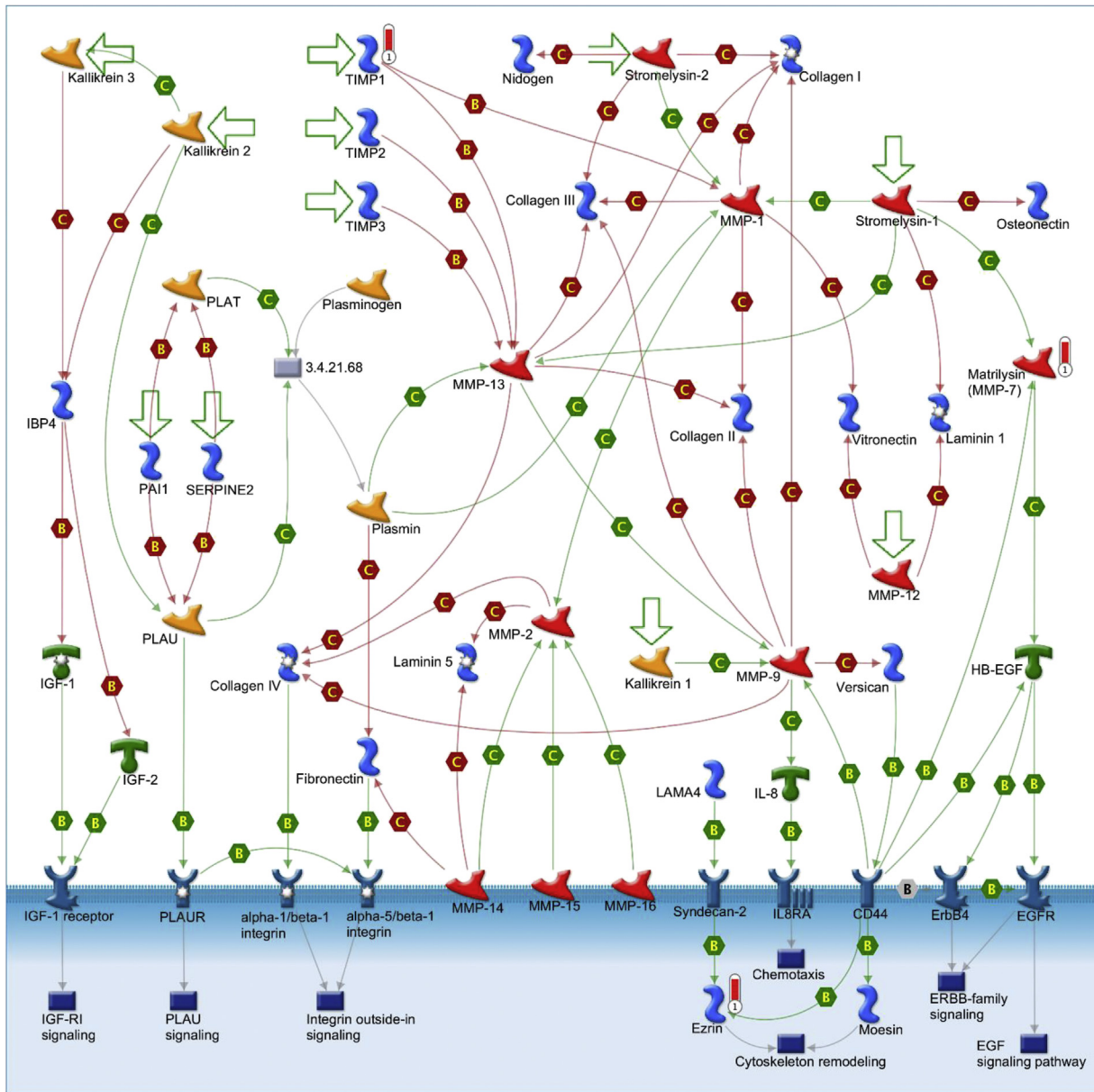
Gene symbol	Signaling pathway category	Major function & signaling pathway of encoded protein
<b>Upregulated genes</b>		
<i>GDF15</i>	GO:0048869	Regulates tissue differentiation & maintenance
<i>CHEK2</i>	KEGG:04110	A cell cycle checkpoint regulator & putative tumor suppressor
<i>HTRA1</i>	GO:0050678	Regulates the availability of insulin-like growth factors (IGFs) by cleaving IGF-binding proteins
<i>MMP7</i>	KEGG:04310	Involved in wound healing, regulates the activity of defensive in intestinal mucosa
<i>APOBEC3C</i>	GO:0040029	Has roles in growth or cell cycle control
<i>CHST9</i>	KEGG:00513	Critical for cell–cell interaction, signal transduction, & embryonic development
<i>LIPH</i>	KEGG:01100	A lipid mediator that stimulates cell proliferation & motility
<i>TGM2</i>	KEGG:04210	Appears to be involved in apoptosis
<i>EZR</i>	GO:0032989	Plays a key role in cell surface structure adhesion, migration, & organization
<i>FAT1</i>	GO:0009653	Important in developmental processes & cell communication
<i>GPC3</i>	KEGG:05205	Plays a role in the control of cell division & growth regulation
<i>IFI6</i>	GO:2001233	Plays a critical role in the regulation of apoptosis
<i>CDH6</i>	GO:0048729	Plays critical roles in cell differentiation & morphogenesis
<i>LOXL4</i>	GO:0071840	Essential to the biogenesis of connective tissue
<i>LUM</i>	GO:0061448	Regulate collagen fibril organization & circumferential growth, corneal transparency, & epithelial cell migration & tissue repair
<i>MVP</i>	GO:0031099	Plays a role in multiple cellular processes by regulating the MAP kinase, JAK/STAT, & phosphoinositide 3-kinase/Akt signaling pathways
<i>TSPAN8</i>	GO:0007166	Plays a role in the regulation of cell development, activation, growth, & motility
<i>RASD1</i>	KEGG:04713	Has a role in dexamethasone-induced alterations in cell morphology, growth, & cell–extracellular matrix interactions
<i>SORT1</i>	KEGG:04142	The encoded protein binds a number of unrelated ligands that participate in a wide range of cellular processes
<b>Downregulated genes</b>		
<i>PTPRD</i>	GO:0022603	Regulation of anatomical structure & morphogenesis
<i>PTPRS</i>	GO:0009888	Regulates a variety of cellular processes including cell growth, differentiation, mitotic cycle, & oncogenic transformation
<i>MMP12</i>	GO:0032502	Involved in embryonic development, reproduction, & tissue remodeling, as well as in disease processes

GO = Gene Ontology; KEGG = Kyoto Encyclopedia of Genes and Genomes.

**Table 6** Differential expression of tumor associated gene in the cirrhotic liver.

Gene symbol	Signaling pathway category	Major function & signaling pathway of encoded protein
<b>Upregulated genes</b>		
<i>TMPRSS3</i>	GO:0019538	A gene overexpression in ovarian cancer
<i>TMPRSS4</i>	KEGG:05164	A gene overexpressed in pancreatic carcinoma
<i>ENPP2</i>	KEGG:00565	Stimulates the motility of tumor cells & has angiogenic properties
<i>TUSC3</i>	KEGG:01100	Detected in many epithelial tumor cell lines
<i>TYMS</i>	KEGG:00240	A target for cancer chemotherapeutic agents
<i>CDHR2</i>	GO:0030308	Represents a new candidate for tumor suppression
<i>TTC9</i>	GO:0044237	May play a role in cancer cell invasion & metastasis
<b>Downregulated genes</b>		
<i>STEAP1</i>	KEGG:04978	Upregulated in multiple cancer cell lines

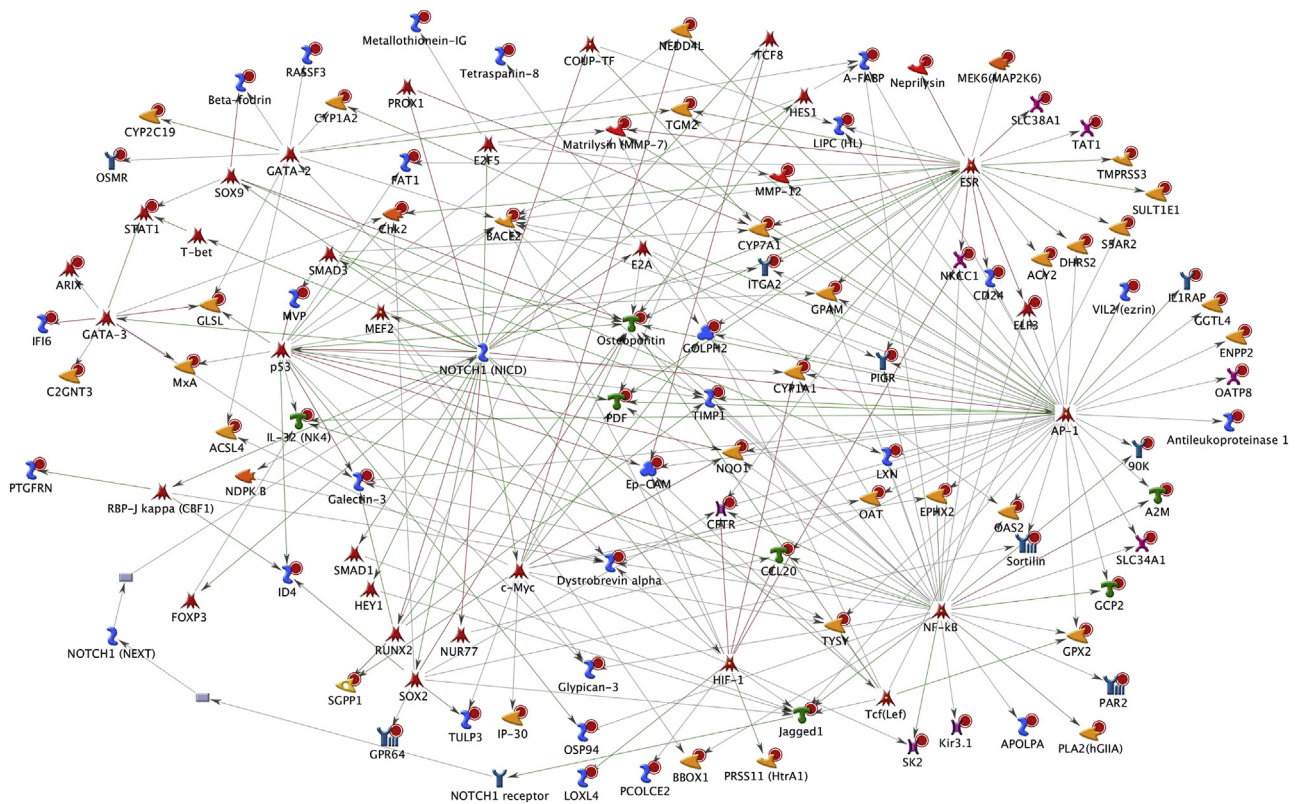
GO = Gene Ontology; KEGG = Kyoto Encyclopedia of Genes and Genomes.



**Figure 2.** Illustration of signaling pathway “Cell adhesion ECM\_remodeling.” Four genes including three upregulated genes (*TIMP1*, *MMP-7*, and *Ezrin*) and one downregulated gene (*MMP-12*) from the current study were identified to participate in the pathway.

Additionally, the transition from chronic liver disease to cirrhosis involves a lengthy process that includes inflammation, angiogenesis, and fibrogenesis. Each of the processes at different time points might express various cascades of genes, and the real situation of gene expression in cirrhosis may not be adequately reflected by a randomly selected time point as in the current study. Apart from that, most genes usually act as part of diverse signaling pathway, and multiple genes interacting through a signaling pathway on cellular function is more significant than that of a single gene. Therefore, further work with more patients and solid study might be necessary to determine the actual contribution of each element.

Taken together, our results showed that the cirrhotic liver has a unique environment compared to the noncirrhotic liver. Specifically, the cirrhotic liver has strong immune responses including inflammation and immunological reaction, which could be a consequence of liver fibrosis. Moreover, the cirrhotic liver is in an unstable state, in which hepatocyte damage, growth regulation, wound healing, and apoptosis are constantly occurring. This would lead to scar formation as well as cirrhotic change of the hepatic parenchyma. Although generalizations about the study cannot be easily made, several remarkable exploration might be helpful in future research as well as provide information that could be used to better understand liver cirrhosis.



**Figure 3.** Significant interaction network analyzed from MetaCore. The interaction network comprised 137 genes that contained 87 significant genes (red circle) of the study.

## Acknowledgments

This work was supported by grants from the Chang Gung Medical Research Program (CMRPG3A1391~3) to K.M.C.

## References

- [1] Fausto N. Liver regeneration. *J Hepatol* 2000;32:19–31.
- [2] Taub R. Liver regeneration: from myth to mechanism. *Nat Rev Mol Cell Biol* 2004;5:836–47.
- [3] Taura K, Ikai I, Hatano E, Yasuchika K, Nakajima A, Tada M, et al. Influence of coexisting cirrhosis on outcomes after partial hepatic resection for hepatocellular carcinoma fulfilling the Milan criteria: an analysis of 293 patients. *Surgery* 2007;142:685–94.
- [4] Yeh CN, Chen MF, Lee WC, Jeng LB. Prognostic factors of hepatic resection for hepatocellular carcinoma with cirrhosis: univariate and multivariate analysis. *J Surg Oncol* 2002;81:195–202.
- [5] Liaw YF, Lin DY, Chen TJ, Chu CM. Natural course after the development of cirrhosis in patients with chronic type B hepatitis: a prospective study. *Liver* 1989;9:235–41.
- [6] Montalto G, Cervello M, Giannitrapani L, Dantona F, Terranova A, Castagnetta LA. Epidemiology, risk factors, and natural history of hepatocellular carcinoma. *Ann N Y Acad Sci* 2002;963:13–20.
- [7] El-Serag HB. Hepatocellular carcinoma. *N Engl J Med* 2011;365:1118–27.
- [8] Leise MD, Kim WR, Kremers WK, Larson JJ, Benson JT, Therneau TM. A revised model for end-stage liver disease optimizes prediction of mortality among patients awaiting liver transplantation. *Gastroenterology* 2011;140:1952–60.
- [9] Chen MF, Jeng LB, Lee WC. Surgical results in patients with hepatitis virus-related hepatocellular carcinoma in Taiwan. *World J Surg* 2002;26:742–7.
- [10] Chan KM, Lee CF, Wu TJ, Chou HS, Yu MC, Lee WC, et al. Adverse outcomes in patients with postoperative ascites after liver resection for hepatocellular carcinoma. *World J Surg* 2012;36:392–400.
- [11] Huang JF, Wu SM, Wu TH, Lee CF, Wu TJ, Yu MC, et al. Liver resection for complicated hepatocellular carcinoma: challenges but opportunity for long-term survivals. *J Surg Oncol* 2012;106:959–65.
- [12] Schuppan D, Afdhal NH. Liver cirrhosis. *Lancet* 2008;371:838–51.
- [13] Schuppan D, Ruehl M, Somasundaram R, Hahn EG. Matrix as a modulator of hepatic fibrogenesis. *Semin Liver Dis* 2001;21:351–72.
- [14] Czochra P, Klopčič B, Meyer E, Herkel J, Garcia-Lazaro JF, Thieringer F, et al. Liver fibrosis induced by hepatic overexpression of PDGF-B in transgenic mice. *J Hepatol* 2006;45:419–28.
- [15] Hemmann S, Graf J, Roderfeld M, Roeb E. Expression of MMPs and TIMPs in liver fibrosis — a systematic review with special emphasis on anti-fibrotic strategies. *J Hepatol* 2007;46:955–75.
- [16] Jung Y, Witek RP, Syn WK, Choi SS, Omenetti A, Premont R, et al. Signals from dying hepatocytes trigger growth of liver progenitors. *Gut* 2010;59:655–65.
- [17] Ishak K, Baptista A, Bianchi L, Callea F, De Groote J, Gudat F, et al. Histological grading and staging of chronic hepatitis. *J Hepatol* 1995;22:696–9.
- [18] Huang da W, Sherman BT, Lempicki RA. Systematic and integrative analysis of large gene lists using DAVID bioinformatics resources. *Nat Protoc* 2009;4:44–57.
- [19] Chang TW. Binding of cells to matrices of distinct antibodies coated on solid surface. *J Immunol Methods* 1983;65:217–23.

- [20] Shangguan H, Tan SY, Zhang JR. Bioinformatics analysis of gene expression profiles in hepatocellular carcinoma. *Eur Rev Med Pharmacol Sci* 2015;19:2054–61.
- [21] Ahmad W, Ijaz B, Hassan S. Gene expression profiling of HCV genotype 3a initial liver fibrosis and cirrhosis patients using microarray. *J Transl Med* 2012;10:41.
- [22] Anders RA, Yerian LM, Tretiakova M, Davison JM, Quigg RJ, Damer PH, et al. cDNA microarray analysis of macroregenerative and dysplastic nodules in end-stage hepatitis C virus-induced cirrhosis. *Am J Pathol* 2003;162:991–1000.
- [23] Pawlotsky JM. Hepatitis C virus resistance to antiviral therapy. *Hepatology* 2000;32:889–96.
- [24] Fukuhara Y, Hirasawa A, Li XK, Kawasaki M, Fujino M, Funeshima N, et al. Gene expression profile in the regenerating rat liver after partial hepatectomy. *J Hepatol* 2003;38:784–92.
- [25] Nagano Y, Nagahori K, Yoshiro F, Hamaguchi Y, Ishikawa T, Ichikawa Y, et al. Gene expression profile analysis of regenerating liver after portal vein ligation in rats by a cDNA microarray system. *Liver Int* 2004;24:253–8.
- [26] Togo S, Makino H, Kobayashi T, Morita T, Shimizu T, Kubota T, et al. Mechanism of liver regeneration after partial hepatectomy using mouse cDNA microarray. *J Hepatol* 2004;40:464–71.
- [27] Makino H, Shimada H, Morioka D, Kunisaki C, Morita T, Matsuyama R, et al. Analysis of gene expression profiles in fatal hepatic failure after hepatectomy in mice. *J Surg Res* 2011;169:36–43.
- [28] Inoue H, Ogawa W, Ozaki M, Haga S, Matsumoto M, Furukawa K, et al. Role of STAT-3 in regulation of hepatic gluconeogenic genes and carbohydrate metabolism in vivo. *Nat Med* 2004;10:168–74.
- [29] Huang J, Rudnick DA. Elucidating the metabolic regulation of liver regeneration. *Am J Pathol* 2014;184:309–21.
- [30] Newberry EP, Kennedy SM, Xie Y, Luo J, Stanley SE, Semenkovich CF, et al. Altered hepatic triglyceride content after partial hepatectomy without impaired liver regeneration in multiple murine genetic models. *Hepatology* 2008;48:1097–105.
- [31] Tsochatzis EA, Bosch J, Burroughs AK. Liver cirrhosis. *Lancet* 2014;383:1749–61.
- [32] Fausto N. Involvement of the innate immune system in liver regeneration and injury. *J Hepatol* 2006;45:347–9.
- [33] Kang LI, Mars WM, Michalopoulos GK. Signals and cells involved in regulating liver regeneration. *Cells* 2012;1:1261–92.
- [34] Michalopoulos GK. Liver regeneration after partial hepatectomy: critical analysis of mechanistic dilemmas. *Am J Pathol* 2010;176:2–13.