

# History of the Omics Cascade

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**In order to understand the  
presents and the future,  
we have to understand the past.**

The goals of this lecture:

**To give a perspective of Omics  
research in relation to**

- Molecular Biology**
- Systems Biology**

# The OMICS Cascade

What CAN happen

**GENOMICS**

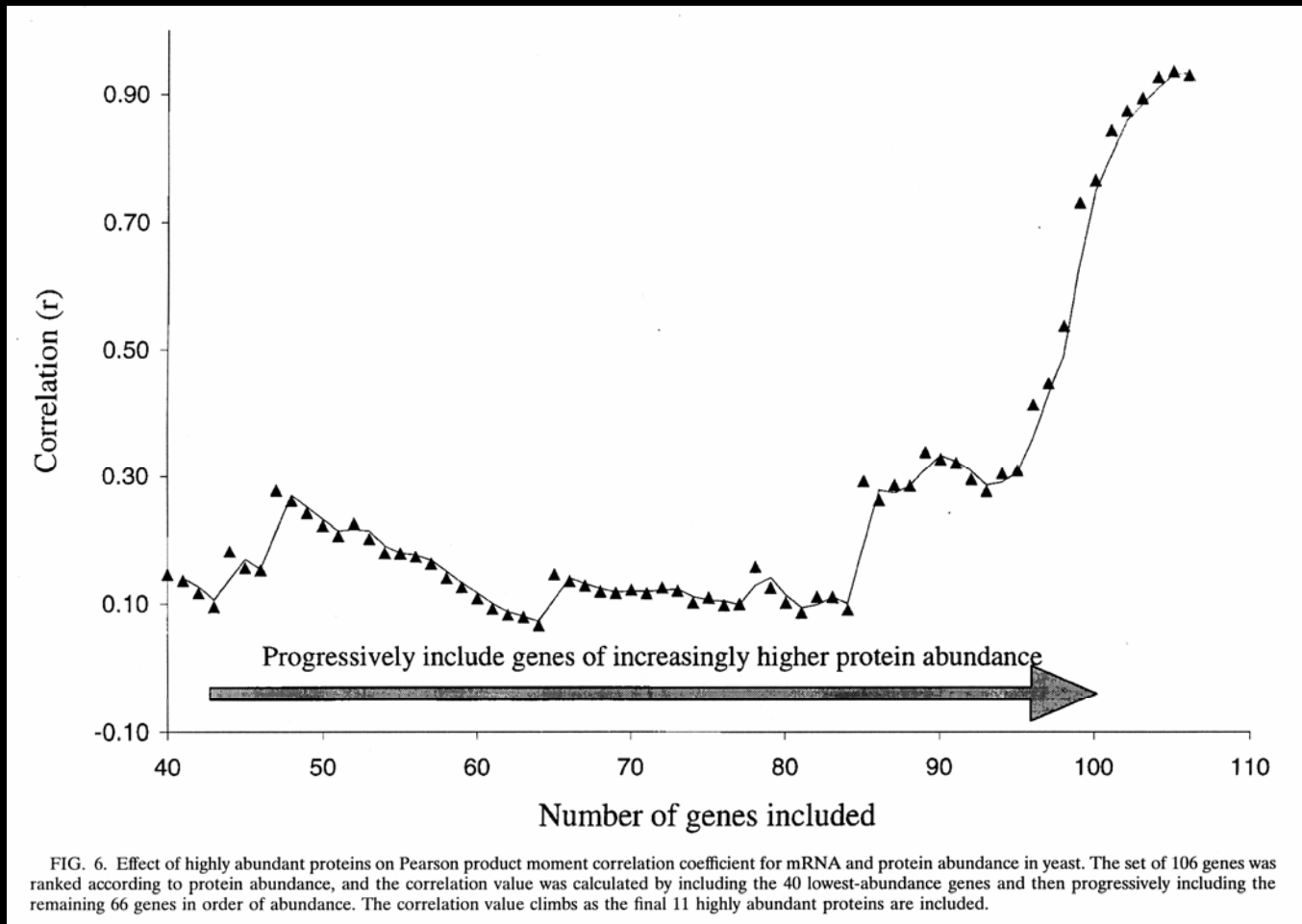


What APPEARS  
to happen

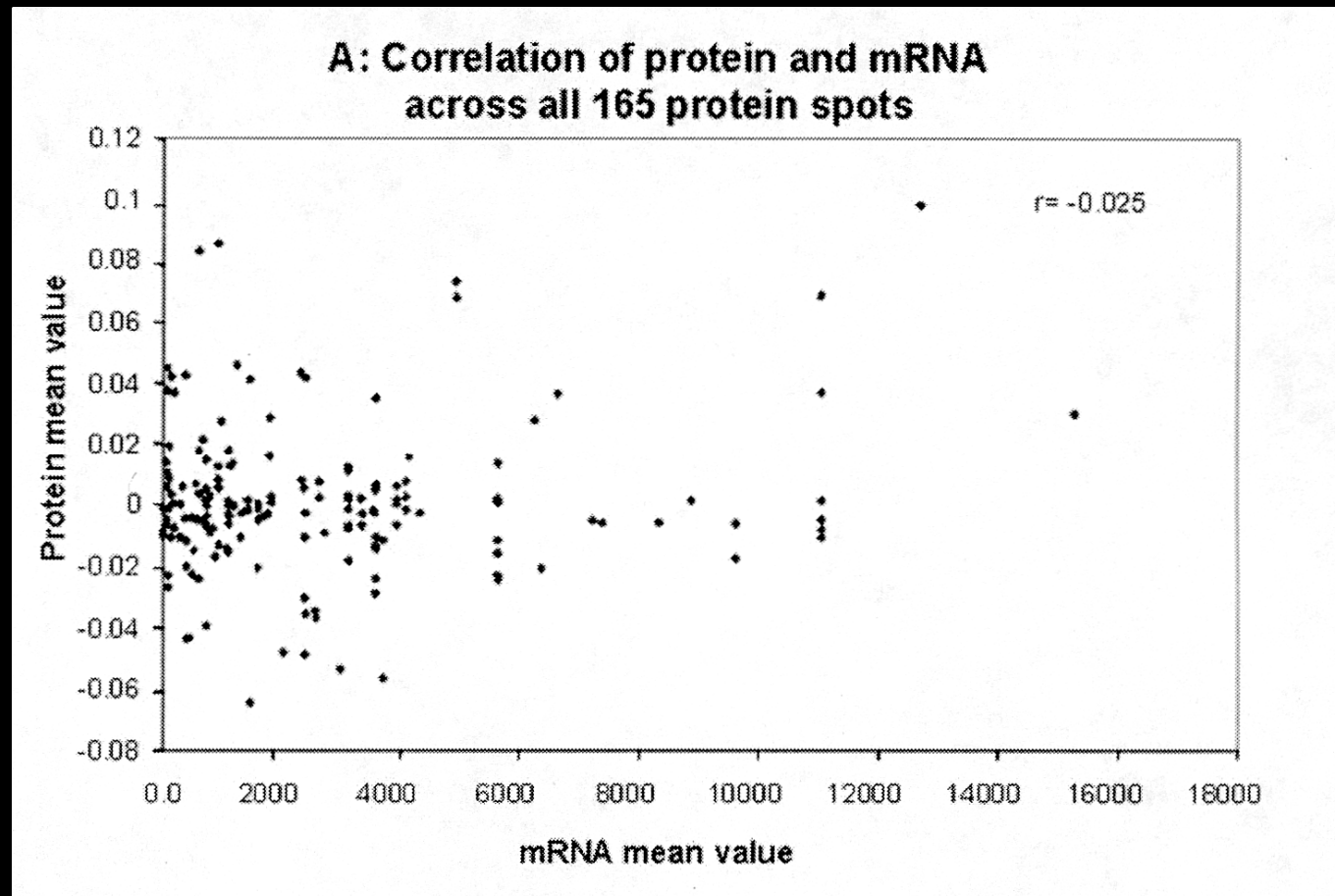
**TRANSCRIPTOMICS**

- 1953: DNA structure discovered by James Watson, Francis Crick and Rosalind Franklin
- 1975: DNA sequencing by Sanger
- 1983: PCR developed by Kary Mullis (Nobel prize 1993)
- 1995: First microarray pub. by Mark Shena et al.

# Poor correlations between mRNA and protein abundance



# Correlation in 85 samples of human lung adenocarcinoma



Chen et al., MCP, 2002

# The OMICS Cascade

What CAN happen

**GENOMICS**

What APPEARS  
to happen

**TRANSCRIPTOMICS**

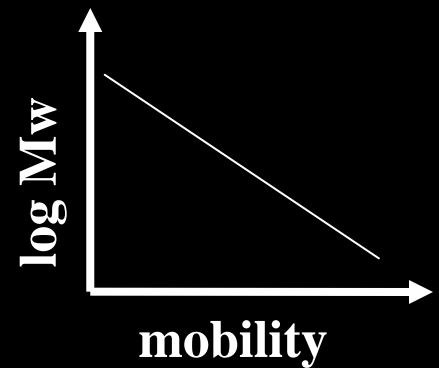
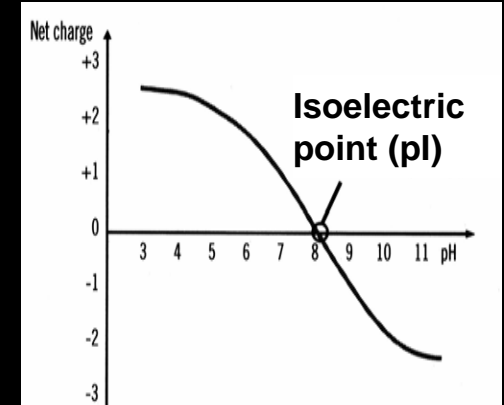
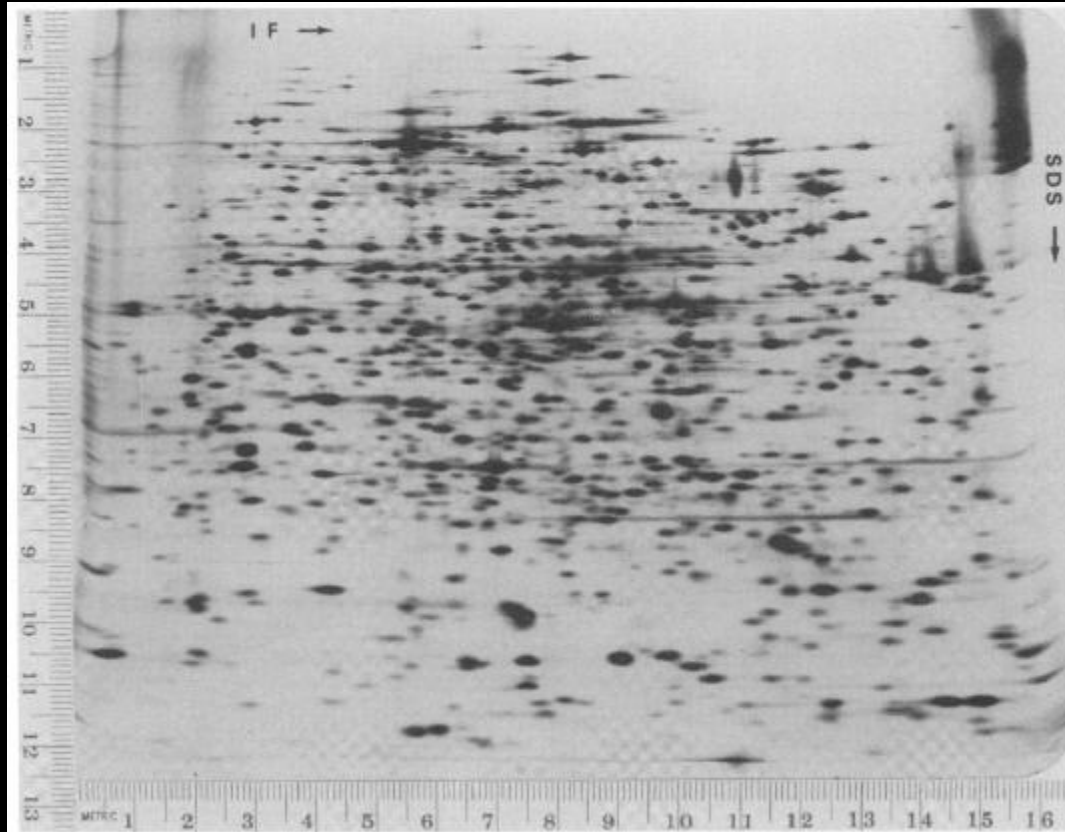
What MAKES  
it happen

**PROTEOME**

- 1994: Marc Wilkins coins word "proteome"
  - PROTEin complement of the genOME
- 1997: Yeast genome sequenced



# Patrik O'Farrell (1975) "High Resolution Two-Dimensional Electrophoresis of Proteins"



- *Klose, J. 1975. Humangenetic 26, 231-43*



# From Protein Chemistry to Proteomics

Protein separation:

2-dimensional electrophoresis

Bioinformatics:

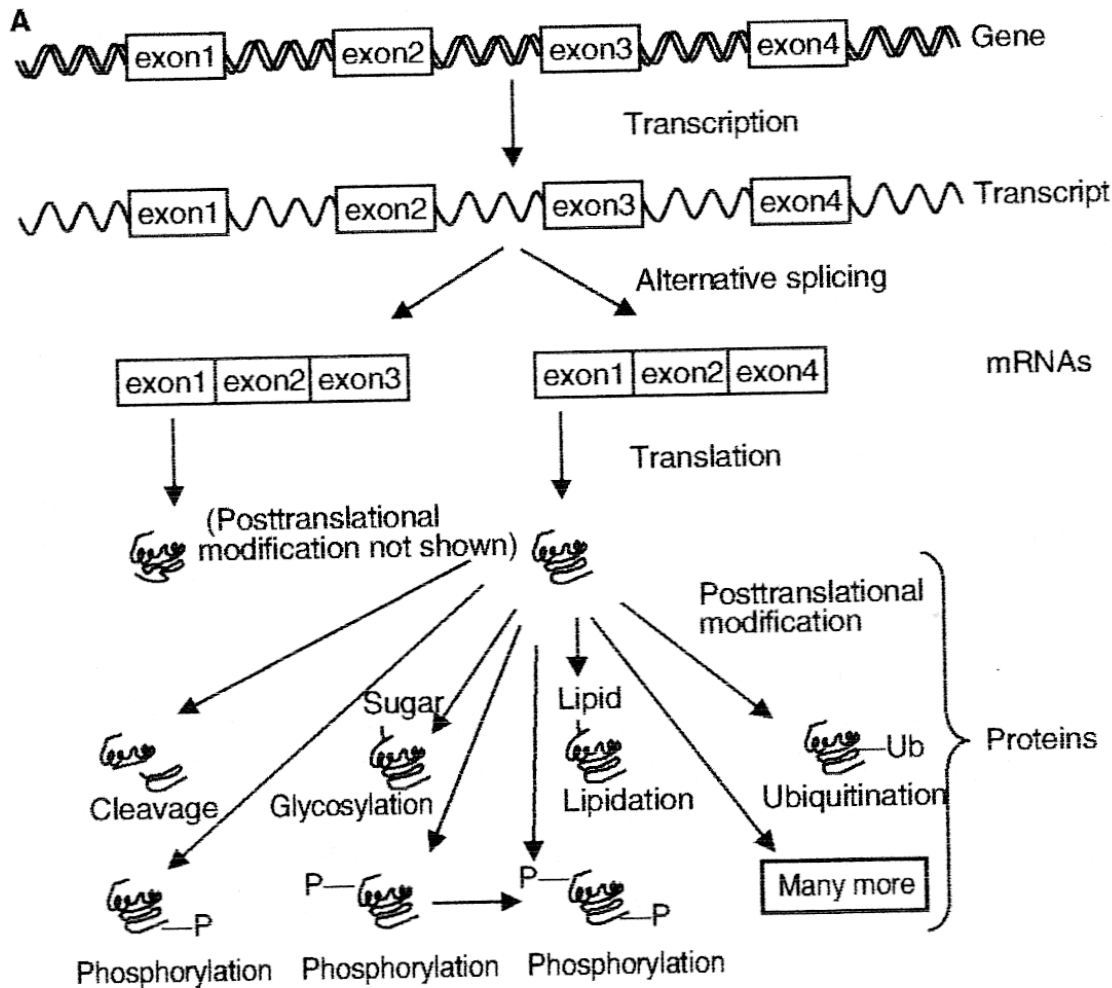
First generation of 2DE analysis software

Protein identification:

Edman sequencing

Mass spectrometry

# Complexity of the proteome



30,000 genes  
per cell coding

Alt.splicing =>  
2-3 x 30,000 =  
90,000 proteins

post-translational  
Modifications =>  
10 x 90,000 =  
900,000 proteins

Peng and Gygi,  
JMS: 36:1083, 2001

# The OMICS Cascade

What CAN happen

**GENOMICS**

What APPEARS  
to happen

**TRANSCRIPTOMICS**

What MAKES  
it happen

**PROTEOME**

What HAS  
happened

**METABOLOME**

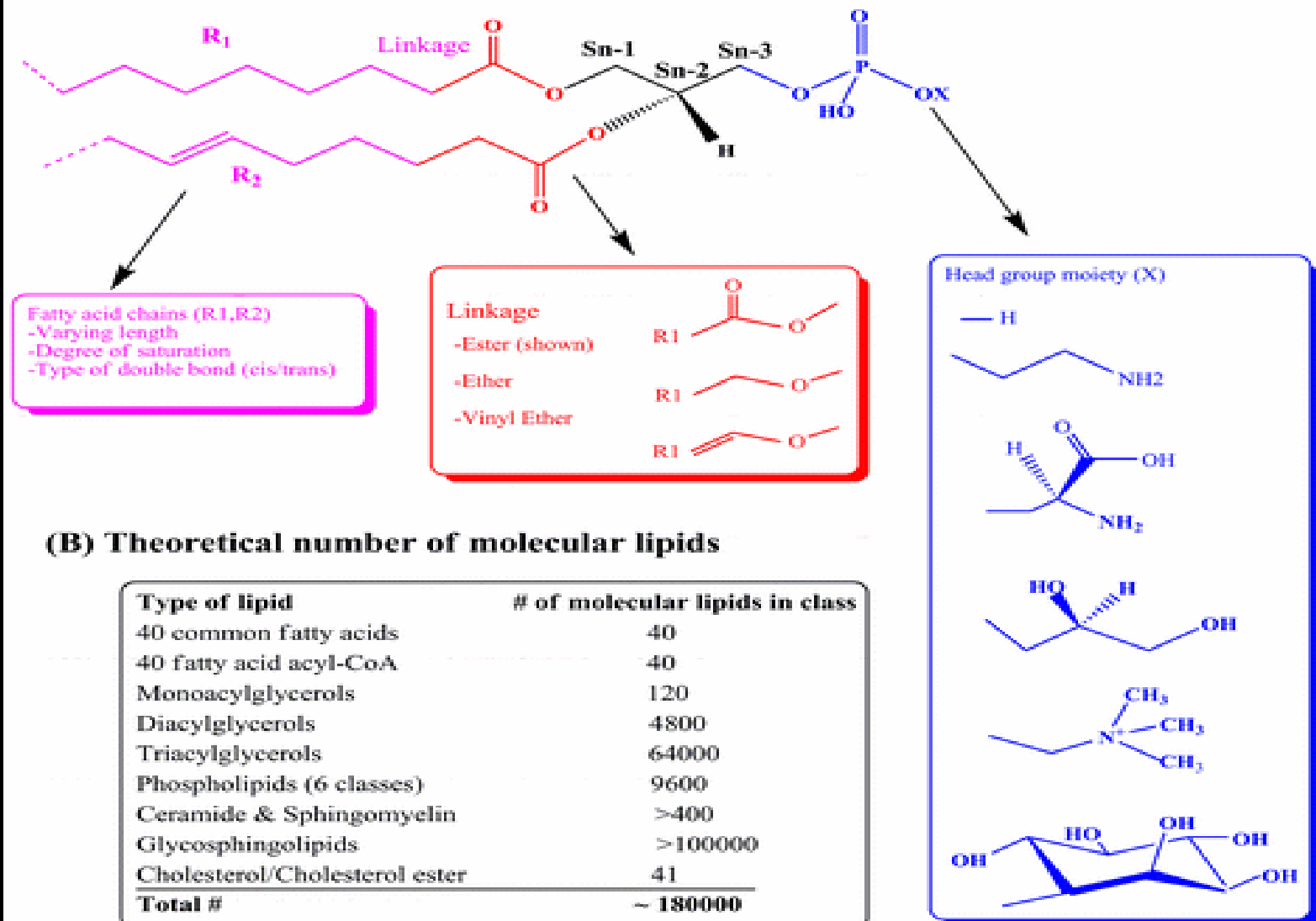
1940s: Chromatography invented by Archer John Porter Martin (Noble Prize 1952)

1970: Robinson & Pauling: chromatographic patterns of urine of vitamin B6-exposure

1946: NMR by Felix Bloch & Edward Mills Purcell (Nobel Prize in 1952)

# Complexity of Metabolomics

## (A) Glycerophospholipid Structure



## (B) Theoretical number of molecular lipids

Type of lipid	# of molecular lipids in class
40 common fatty acids	40
40 fatty acid acyl-CoA	40
Monoacylglycerols	120
Diacylglycerols	4800
Triacylglycerols	64000
Phospholipids (6 classes)	9600
Ceramide & Sphingomyelin	>400
Glycosphingolipids	>100000
Cholesterol/Cholesterol ester	41
<b>Total #</b>	<b>~ 180000</b>

# Powerful tools made Systems Biology possible

What CAN happen

**GENOMICS**

What APPEARS  
to happen

**TRANSCRIPTOMICS**

What MAKES  
it happen

**PROTEOME**

What HAS  
happened

**METABOLOME**

Omic methods are  
not  
defined by HIGH THROUGH-PUT...

...but by  
HIGH OUT-PUT!

# Challenge in Omics Research

**Expensive studies =>**

- **Small number of replicates (n)**
  - (microarrays, subjects...)
- **Large number of variables**
  - (genes, proteins, etc)

**Results in:**

- **Sensitive to type I error**
- **Poor statistical Power**

# Statistics revisited

## Significant

**The null hypothesis can be rejected**

**The observed difference** is unlikely to have occurred by chance. "A statistically significant difference" simply means there is statistical evidence that **there is a difference**.

## Significance level

**“p-value”**: The smaller the p-value, the more certain we are that there is a difference. The probability that the null hypothesis will be rejected in error when it is true (Type I error, or "false positive").



# Statistics revisited

## Type I error ( $\alpha$ )

**“false positive”**: The error of rejecting a null hypothesis when it is actually true, i.e this is the error of accepting an alternative hypothesis (the real hypothesis of interest) when the results can be attributed to chance.

## Type II error ( $\beta$ )

**"false negative"**: the error of accepting a null hypothesis when the alternative hypothesis is actually true, i.e the error of failing to observe a difference when in truth there is one.

# Statistics revisited

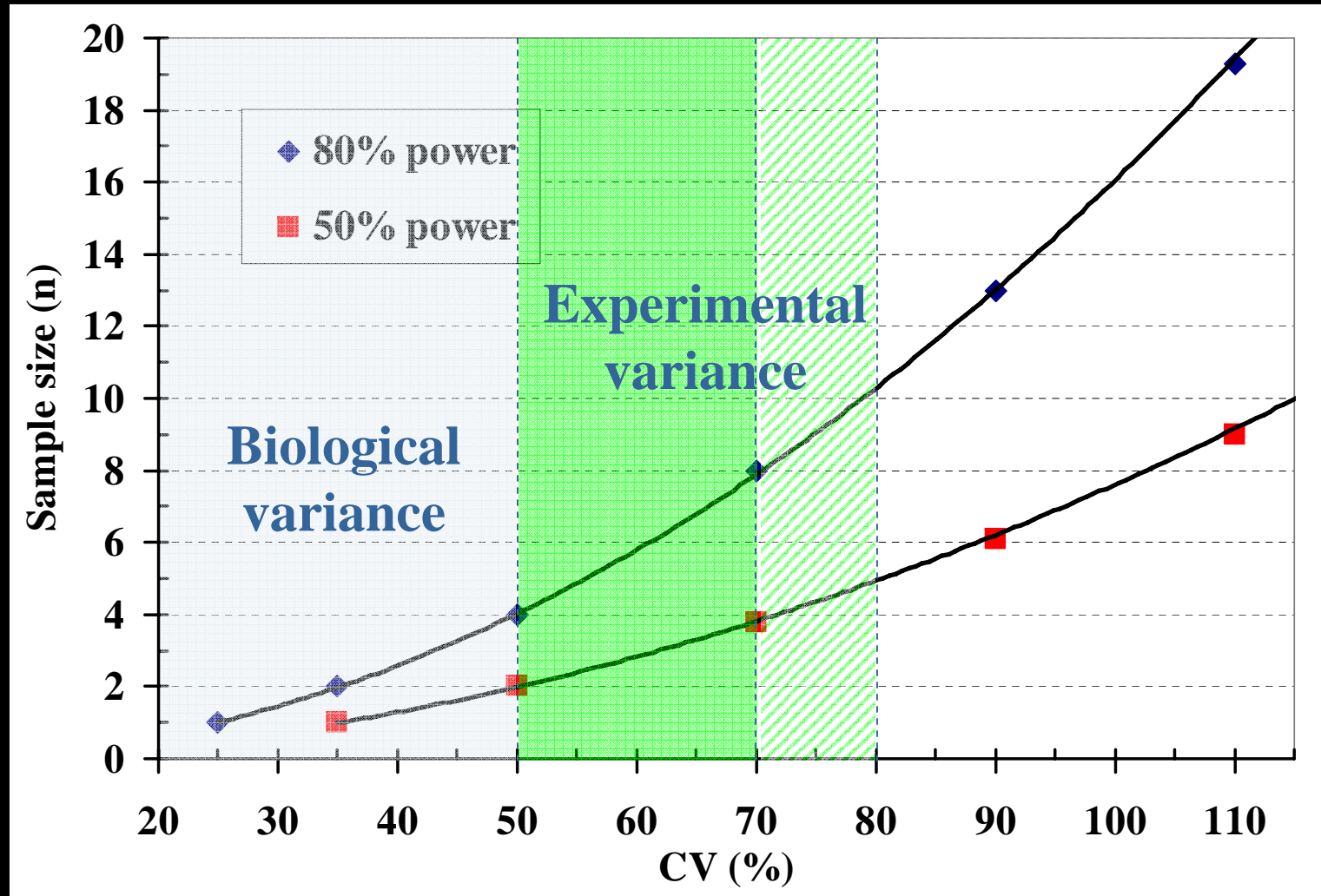
## Statistical power

Power =  $1 - \beta$ , i.e. not make a Type II error.

The probability that the test will reject a false null hypothesis, i.e. the power to detect true positives.

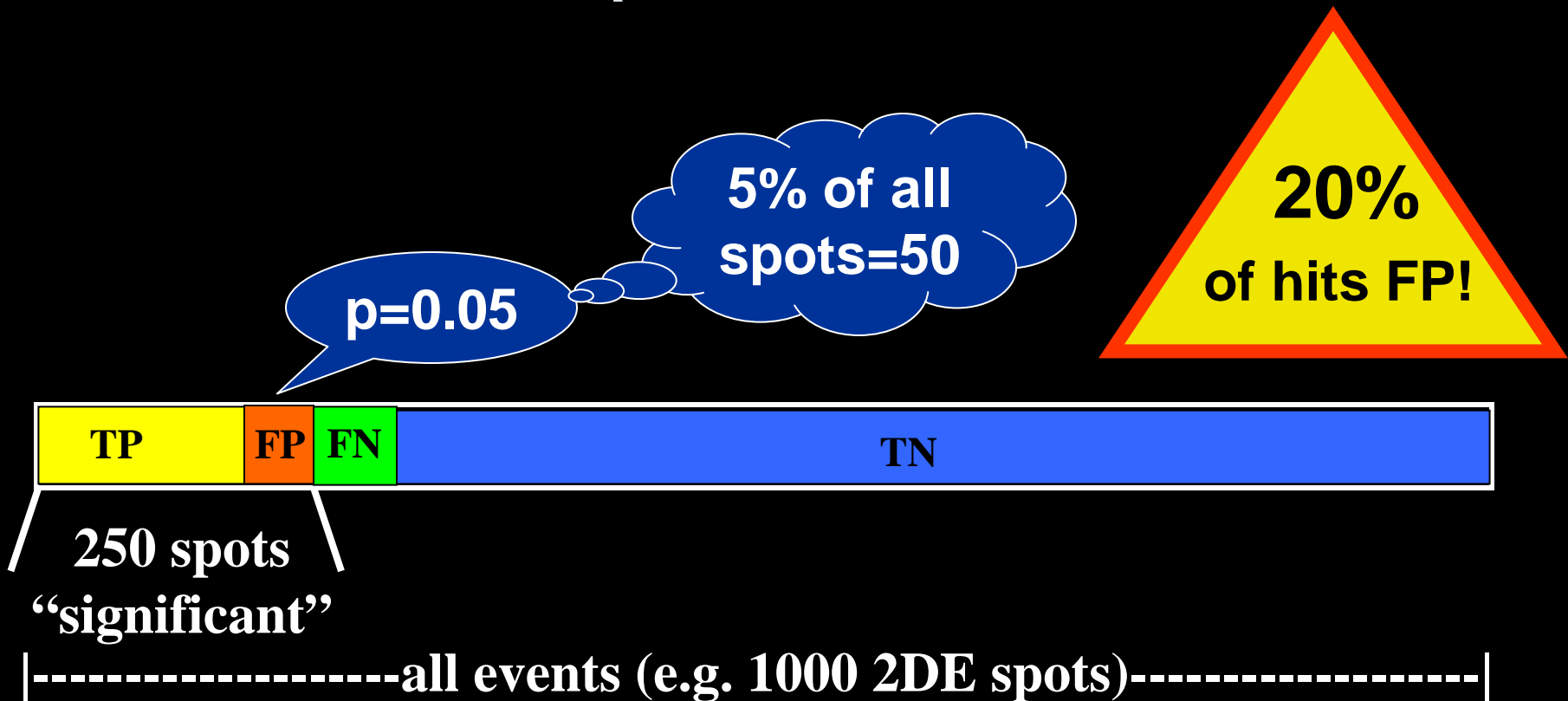
There are no formal standards for power, but a power of 0.50- 0.80 is common.

# Statistical Power versus Sample size



*Modified from Molloy et al., Proteomics (2003) 3, 1912-19* 19

# False positive rate

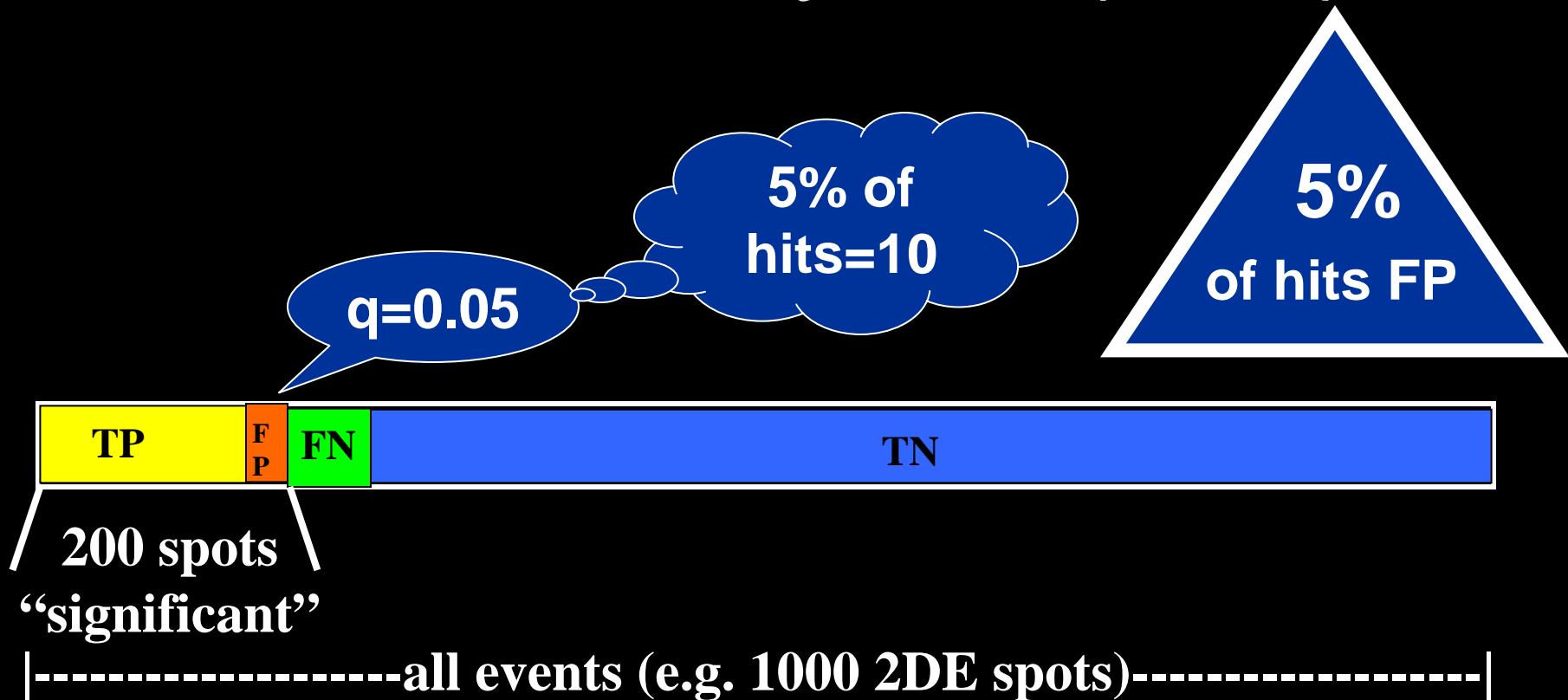


The false positive rate is the amount of false positives (FP - red) as a proportion of all the spots in an experiment, both altered (positives) and unaltered (negatives).

# Pros & cons of omics research

- + Can survey all proteins/genes in cell
- + Global analysis => many hits
- Many hits => many false positives

# False discovery rate (FDR)



**FDR : “Expected proportion of FP among rejected hypotheses”.** Instead of deciding the number of rejected hypothesis based on all events, an assigned FDR is used to determine cutoff for significance. The resulting cutoff value is calculated from all  $p$ -values, and is called the  $q$ -value.

FDR decreases the number of FP

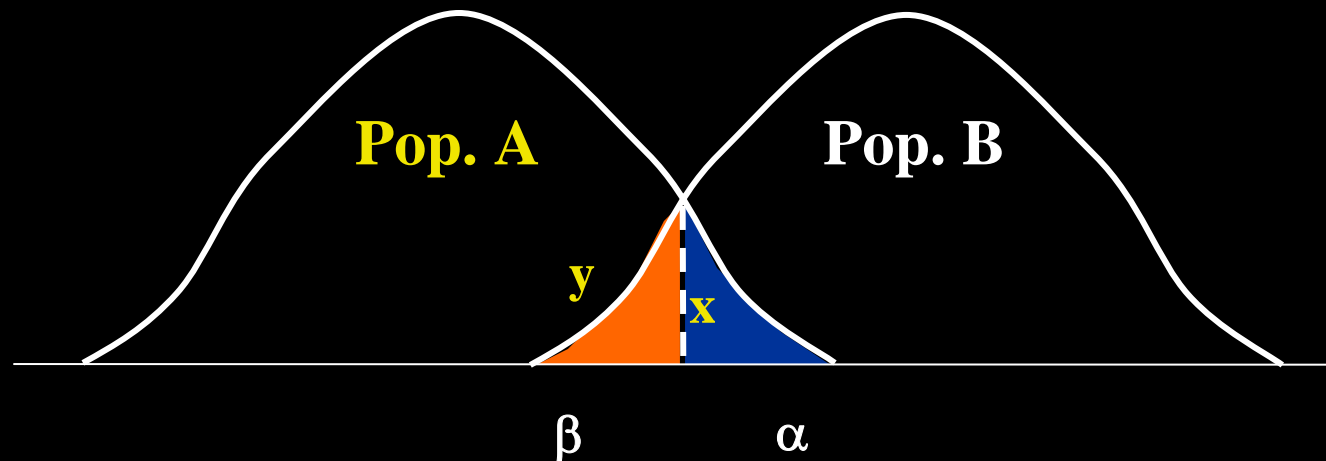
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What happens to the **POWER**  
when we switch to FDR?

Type I error ( $\alpha$ ): false positive  
Type II error ( $\beta$ ): false negative

$H_0$ : Sample  $x$  and  $y$  belong to the same population.

$H_1$ : Sample  $x$  and  $y$  belong to different populations



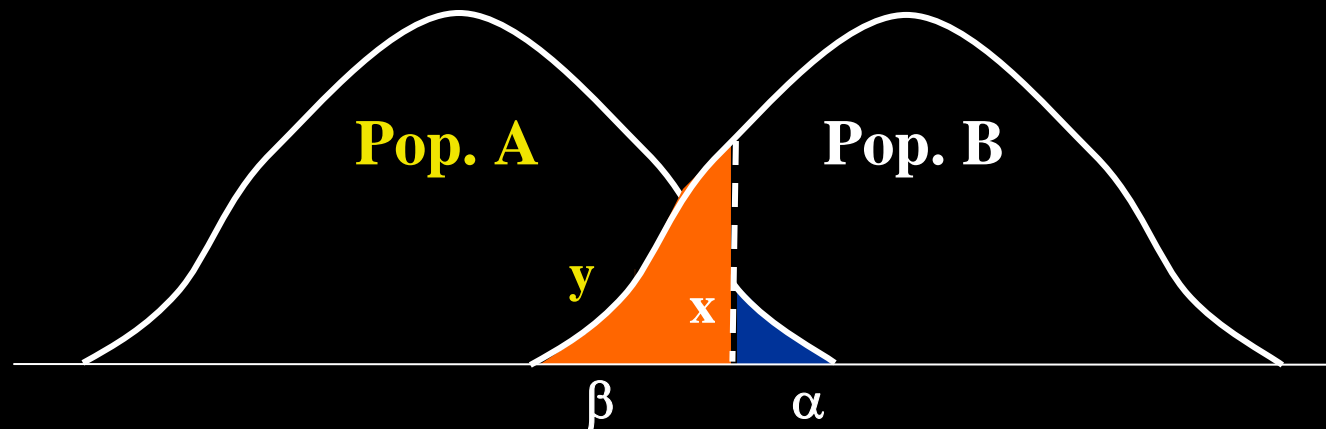
Using a p-value as indicated by the dotted line, we reject the null-hypotheses:  $x$  belongs to pop. B, and  $y$  belongs to pop. A.

If  $x$  truly belongs to pop. A, we perform a ...  
type I error;  $x$  is a false positive.



Type I error ( $\alpha$ ): false positive  
Type II error ( $\beta$ ): false negative

$H_0$ : Sample  $x$  and  $y$  belong to the same population.  
 $H_1$ : Sample  $x$  and  $y$  belong to different populations



If sample  $x$  truly belongs to population B, we have performed a... type II error –  $x$  is a **false negative**. Increased risk of type II error is a drawback when utilizing p-value corrections.

Increased risk of type II error is a drawback  
when utilizing p-value corrections (FDR)

↑ type II error ( $\beta$ )  $\Rightarrow$  ↓ power ( $1 - \beta$ )

PITFALL IN OMICS RESEARCH:

Decrease false positive rates may result in  
low statistical power to detect true positives



# What is Omics good for?

**Discovery Science**

**Hypothesis-generating**

**”Fishing trip”**

# Tools to find the needle in the hay stack



You were right: There's a needle in this haystack...

## Biomarkers of

- Disease
- Exposure
- Response

- Proteins
- Metabolites

## ID Drug targets

# What is Omics good for?

WHAT?                      Biomarker / Drug target

Is Specific, Single Biomarker  
discovery possible?

# Protein number:

What seems acceptable today? (evidence based)

- 23'000 genes (23'713)
  - Sequencing, cloning, etc...
- 18,000 transcripts
- Proteins in a cell? 10,000 identified.
  - Conservative: 18,000...

# Number of cell types...

- List of distinct cell types in the adult human body from Wikipedia, the free encyclopedia.

→ 320

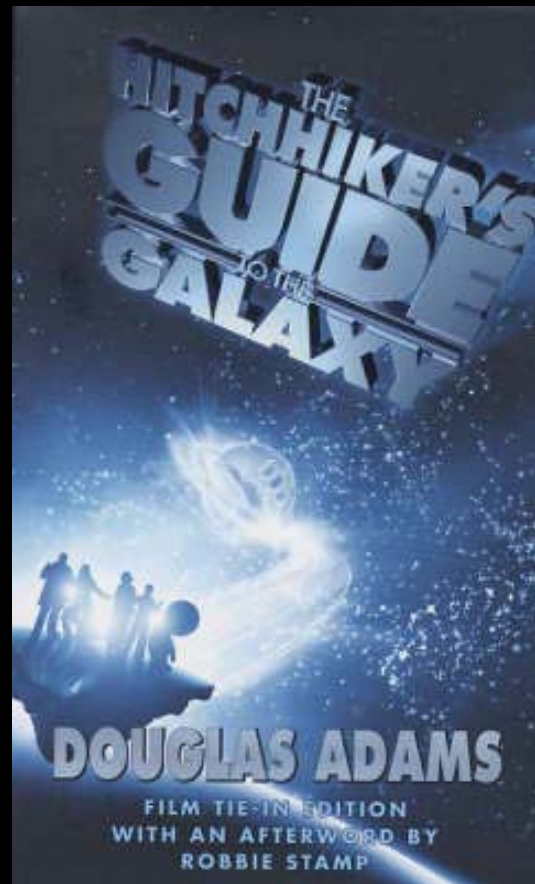


# Protein number:

- 2500 proteins common to all cells:  
 $18,000 - 2,500 \text{ common in cells} = 15,500$
- 2000 proteins (max) are secreted:  
 $15,500 - 2,000 \text{ secreted} = 13,500$
- 320 cells types:  
 $13,500 / 320 \text{ cell types} = 42$

*Denis Hochstrasser,  
personal communication*

...scooped by Douglas Adams, 1979



# What is Omics good for?

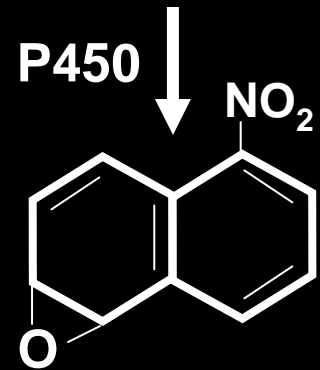
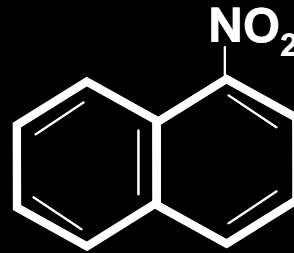
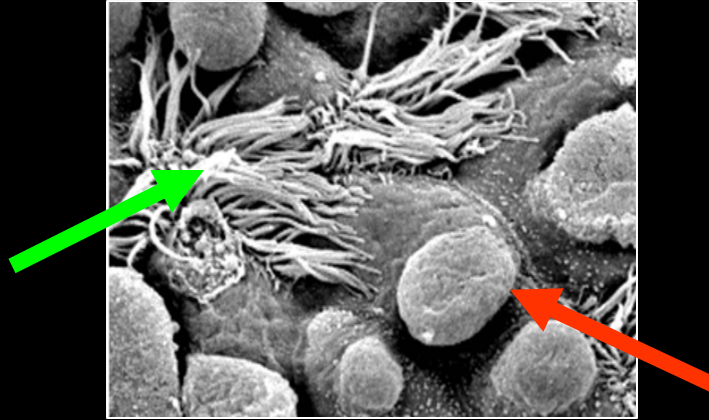
WHAT?                      Biomarker / Drug target

WHERE?                    Cellular location

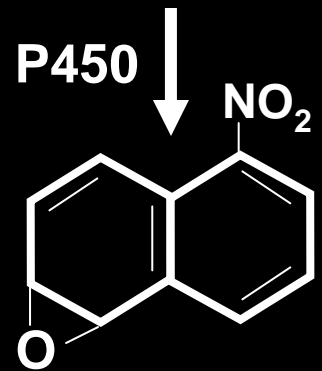
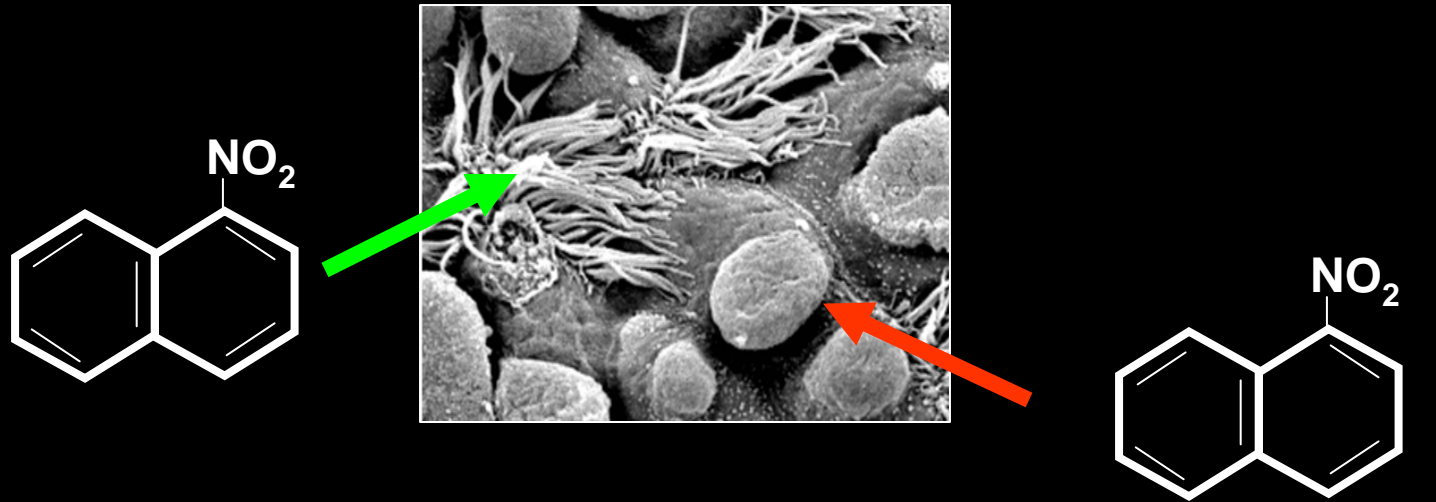
WHEN?                    Timing of events

HOW?                      Complexity

# WHERE? Cellular diversity in lung



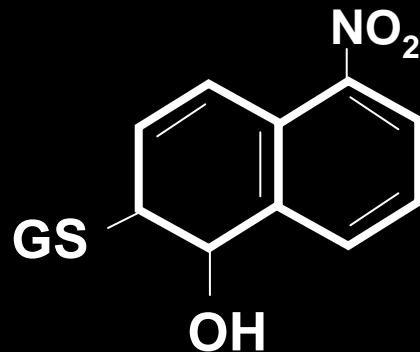
# WHEN? Diurnal fluctuations of GSH



## GSH fluctuations:

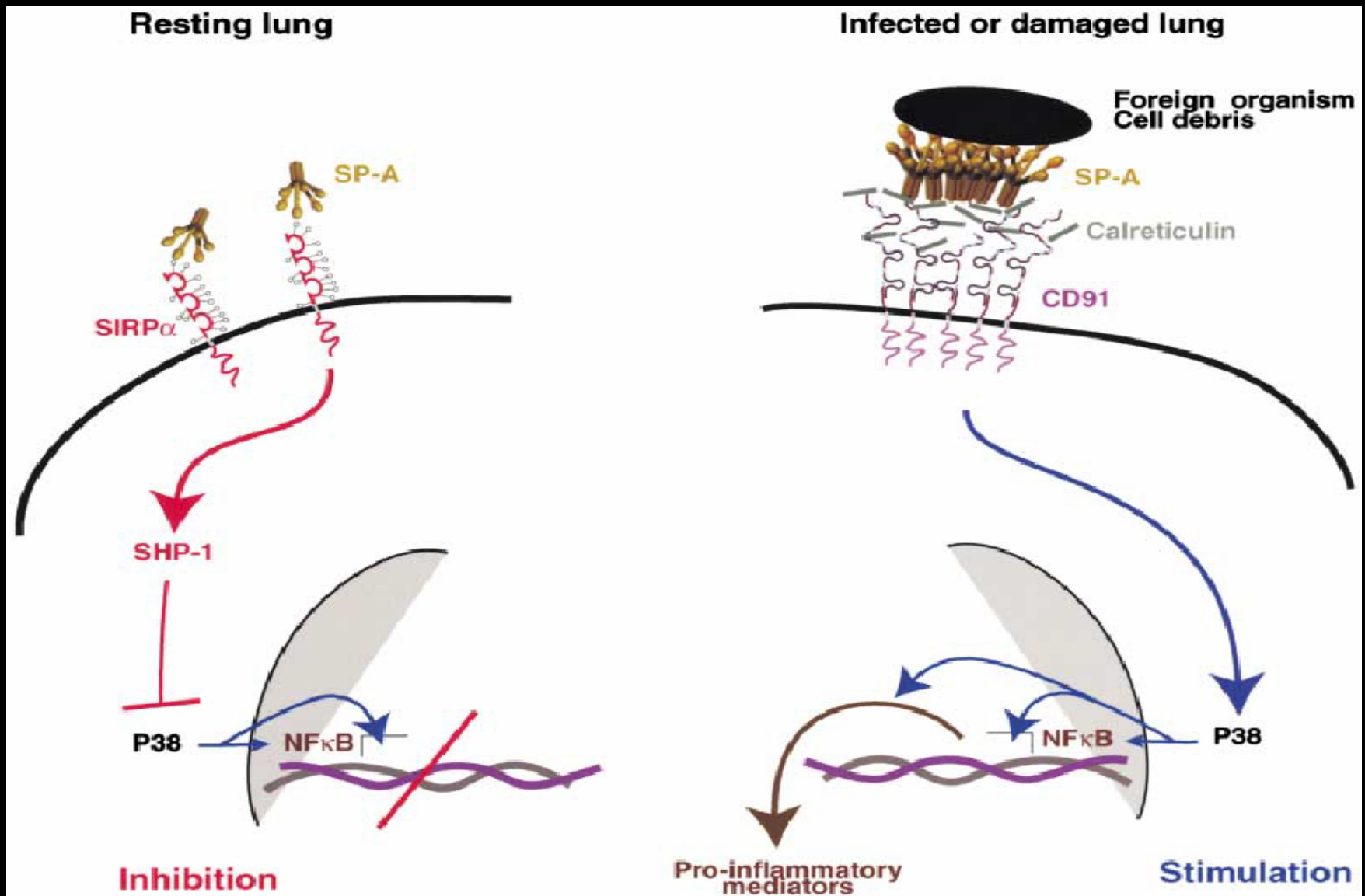
AM: ↑ [GSH]

PM: ↓ [GSH]



GSH  
GST

# HOW? SP-A and inflammation



# Shift in Philosophy of Medicine...

Tr. Chinese Medicine

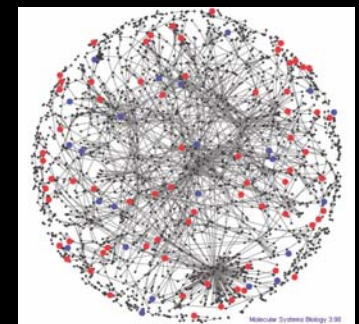


1800s: Observe  
Effect on whole organism

1900s: Manipulate, dissect  
Molecular medicine



2000s: Integrate, whole  
Systems biology



Personalized Medicine?

# The Omics Cascade ≠ Systems Biology

What CAN happen

GENOMICS

BIOINFORMATICS

What APPEARS  
to happen

TRANSCRIPTOMICS

What MAKES  
it happen

PROTEOME

What HAS  
happened

METABOLOME

PHENOTYPE



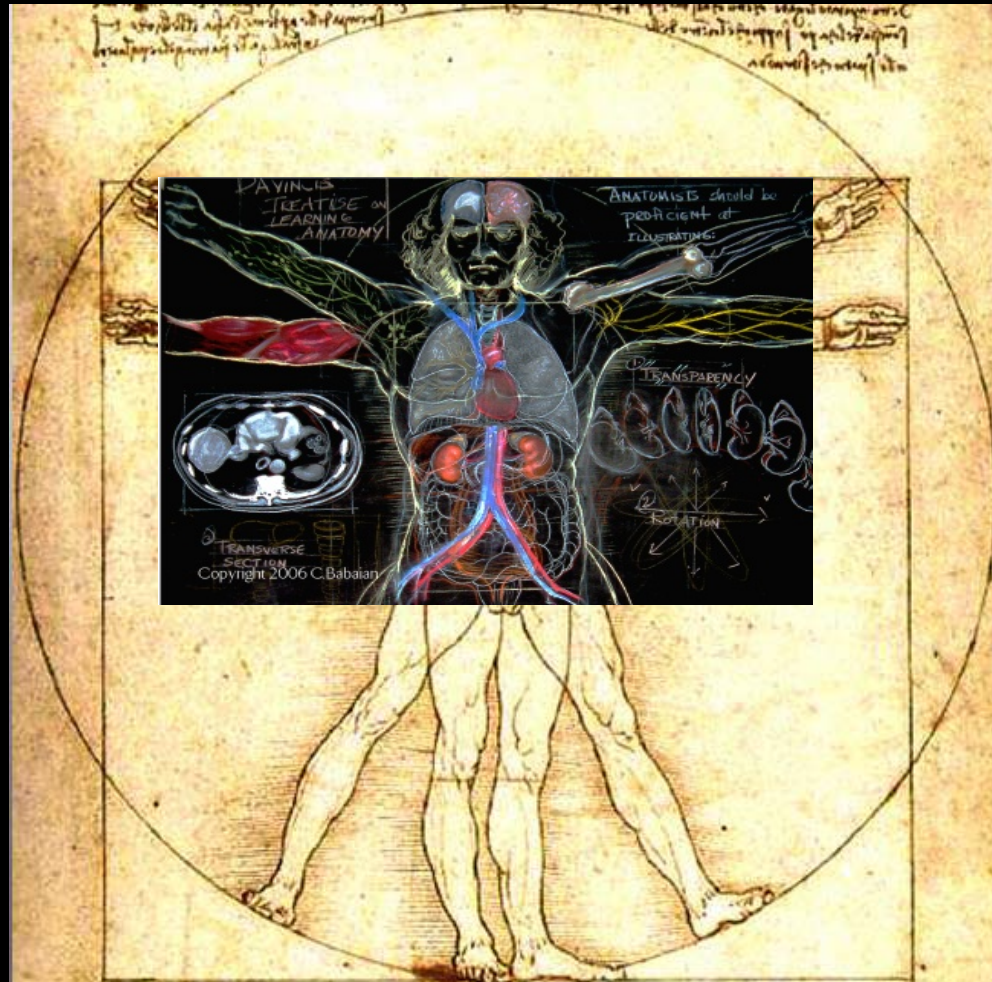


# KEGG – Kyoto Encyclopedia of Genes and Genomes



**240 organisms**  
**20,000 organism-specific pathways**  
**782,135 genes**

# Tools to see the big picture



**Systems Biology is about putting together rather than taking apart, integration rather than reduction**