iScience, Volume 24

Supplemental Information

Transcriptional response modules

characterize IL-1 β and IL-6

activity in COVID-19

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Figure S1

Figure S2

Figure S3

Transcriptomic dataset assessed are designated adjacent to each figure panel.

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Supplemental tables

Table S1. Transcriptional datasets used in this manuscript, related to all Figures.

Table S2. Cytokine response transcriptional modules and constituent genes, related to all Figures.

Transparent methods

Datasets

All datasets used are provided in table S1. Data matrices were obtained from processed data series downloaded from the NCBI Gene Expression Omnibus (GEO) [\(https://www.ncbi.nlm.nih.gov/geo/](https://www.ncbi.nlm.nih.gov/geo/)) or Array Express repository [\(https://www.ebi.ac.uk/arrayexpress/](https://www.ebi.ac.uk/arrayexpress/)). Probe identifiers were converted to gene symbols using platform annotations provided with each dataset. In circumstances where downloaded datasets were not log₂ transformed, this was performed on the entire processed data matrix. Duplicate genes were removed after the first one identified using Microsoft Excel duplicate remover function.

IL-1β and IL-6 module derivation

We previously derived an IL-1β transcriptional module from the transcriptome of fibroblasts stimulated with IL-1β or TNF_a (Pollara et al., 2019). We derived a novel IL-6 transcriptional response module from a publicly available dataset (table S1) reporting experiments of human monocyte-derived macrophages (MDM) stimulated with IL-1β (15 ng/ml) or IL-6 (25 ng/ml) for 4 hours (Jura et al., 2008). In this study the transcriptional programme of cytokine-stimulated MDM was assessed by microarrays and hierarchical clustering was performed using Euclidean distance and average linkage method. This approach identified several unique clusters of genes differentially expressed following stimulation with each cytokine. Genes in clusters D & E showed elevated expression following stimulation by IL-6, but not by IL-1β. We combined the list of genes within these two clusters, removed duplicate or non-annotated genes, and termed this the IL-6 response module.

We applied the above IL-1β and IL-6 response modules to two studies where transcriptional profiling was performed using the Nanostring nCounter Human Immunology_v2 panel, which assesses the expression of a subset of the whole genome (579 genes) (Hadjadj et al., 2020; Ong et al., 2020). Consequently, only a subset of the modules' constituent genes was present in these datasets (table S2). To verify the validity of applying our method to these datasets, we generated new cytokine response submodules using only genes from this subset, and showed them to provide the same discrimination of IL-1β and IL-6 responses as the parent modules (fig S2).

Module expression assessment

The expression of transcriptional modules was derived by calculating the geometric mean expression of all constituent genes, as previously described (Pollara et al., 2017). The scripts used allowed the absence of a constituent gene in the analysed dataset, a scenario that did not affect geometric mean calculation. Gene set enrichment analysis was also used for modular expression assessment in nasopharyngeal samples, as previously described (Ramlall et al., 2020; Subramanian et al., 2005).

Statistical analysis

All module score calculations were calculated in R v3.6.1 and RStudio v1.2.1335, using scripts generated and deposited in our previous publication [\(https://github.com/MJMurray1/MDIScoring](https://github.com/MJMurray1/MDIScoring)) (Pollara et al., 2017). Mann-Whitney tests, Spearman rank correlations and Kruskal-Wallis tests were calculated in GraphPad Prism v8.4. Kruskal-Wallis testing was chosen to determine the presence of variability in the expression of cytokine response modules or cytokine gene over time since hospital admission (fig 5A) or between different categories of COVID-19 disease severity (fig 5B). This non-parametric test was chosen as we could not assume the expression of these variables was Normally distributed. In fig 5A patient samples were aligned according to days from hospital admission, and then binned into day interval categories (4-6, 7-9, 10-12 and 12+ days following admission), yielding 4, 7, 8 and 3 samples in each group. Kruskal-Wallis testing was performed on these binned categories to identify variation in the expression of modules or genes between these categories, with the Bonferroni method used for multiple testing correction.

Role of funders

The funding sources played no role in conceiving the study, performing data analyses, preparing the manuscript or deciding to submit it for publication.

Ethics statement

The manuscript makes use of publicly available datasets, the use of which required no further ethical approval.

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