Identification of a secretory protein c19orf10 activated in hepatocellular carcinoma

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Title: Identification of a Secretory Protein c19orf10 Activated in Hepatocellular Carcinoma

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Abstract
The identification of genes involved in tumor growth is crucial for the development of inventive anti-cancer treatments. Here, we have cloned a 17-kDa secretory protein encoded by c19orf10 from hepatocellular carcinoma (HCC) serial analysis of gene expression libraries. Gene expression analysis indicated that c19orf10 was overexpressed in approximately two-thirds of HCC tissues compared with the adjacent non-cancerous liver tissues, and its expression was significantly positively correlated with that of alpha-fetoprotein (AFP). Overexpression of c19orf10 enhanced cell proliferation of AFP-negative HLE cells, whereas knockdown of c19orf10 inhibited cell proliferation of AFP-positive Hep3B and HuH7 cells along with G1 cell cycle arrest. Supplementation of recombinant c19orf10 protein in culture media enhanced cell proliferation in HLE cells, and this effect was abolished by the addition of antibodies developed against c19orf10. Intriguingly, c19orf10 could regulate cell proliferation through the activation of Akt/mitogen-activated protein kinase pathways. Taken together, these data suggest that c19orf10 might be one of the growth factors and potential molecular targets activated in HCC.
Introduction

Hepatocellular carcinoma (HCC) is one of the most common cancers with an estimated worldwide incidence of 1,000,000 cases per year. Most HCCs develop as a consequence of chronic liver disease such as chronic viral hepatitis due to hepatitis C virus (HCV) or hepatitis B virus (HBV) infection. Liver cirrhosis patients with any etiology are considered to be at an extremely high risk for HCC. Indeed, approximately 7% of liver cirrhosis patients with HCV infection develop HCC annually, and the advancement of reliable HCC screening methods for high-risk patients is crucial for the improvement of their overall survival.

Currently, imaging diagnostic techniques such as ultrasonography, computed tomography, magnetic resonance image, and angiography are the gold standards for the early detection of HCC. In addition, tumor markers such as alpha-fetoprotein (AFP) and des-gamma carboxyl prothrombin (DCP) have been used for the screening of HCC, although their sensitivity and specificity are not sufficiently high. Recently, a gene expression profiling approach shed new light on Glypican 3, a heparin-sulfate proteoglycan anchored to the plasma membrane, as a potential HCC marker, and its clinical usefulness as a molecular target as well as a tumor marker is presently under investigation.

There are several options available for the treatment of HCC, including surgical resection, liver transplantation, radio-frequency ablation, transcatheter arterial chemoembolization, and chemotherapy, while taking the HCC stage and liver function into consideration. Recently, molecular therapy targeting the Raf kinase/vascular endothelial growth factor receptor (VEGFR) kinase inhibitor sorafenib improved the survival of patients with advanced HCC, emphasizing the importance of deciphering the molecular pathogenesis of HCC for the development of effective treatment options.

Here we investigated the gene expression profiles of HCC by serial analysis of gene expression (SAGE) to discover a novel gene activated in HCC. We identified a gene, c19orf10, overexpressed in HCC, and determined that the encoded 17-kDa protein (c19orf10) is a secretory protein. Murine c19orf10 was originally discovered to encode a cytokine interleukin (IL)-25/stroma-derived growth factor (SF20) in 2001. The gene c19orf10 was mapped in the H2 complex region of mouse chromosome 17 between C3 and Ir-5, and the hypothetical protein was predicted as globular protein. However, the subsequent study failed to reproduce its proliferative effect on lymphoid cells and the paper was retracted by the authors in 2003. Nevertheless, independent studies revealed that c19orf10 was indeed produced by synoviocytes, macrophages, and adipocytes, although the function of c19orf10 remained elusive. In this study, we identified...
that c19orf10 was overexpressed in AFP-positive HCC samples. Our data imply that c19orf10 could activate the mitogen-activated protein kinase (MAPK)/Akt pathway and enhance cell proliferation in HCC cell lines, suggesting that c19orf10 may be a growth factor produced by tumor epithelial cells and/or stromal cells, and, therefore, would be a good target for the treatment of HCC.
Material and Methods

SAGE and HCC samples

HCC and normal liver SAGE libraries that we had constructed were re-analyzed using SAGE 2000 software. The size of each SAGE library was normalized to 300,000 transcripts per library. Monte Carlo simulation was used to select genes whose expression levels were significantly different between the two libraries. Each SAGE tag was annotated using the gene-mapping website SAGE Genie database (http://cgap.nci.nih.gov/SAGE/) and the SOURCE database (http://smd.stanford.edu/cgi-bin/source/sourceSearch) as previously described 30. An additional 15 SAGE libraries of normal and cancerous tissues from various organs were retrieved using the National Center for Biotechnology Information (NCBI) SAGEmap (http://www.ncbi.nlm.nih.gov/SAGE/).

Fifteen HCC tissues (4 HBV-related and 11 HCV-related) and the corresponding non-cancerous liver tissues were obtained from HCC patients who received hepatectomy. Four normal liver tissues were obtained from patients undergoing surgical resection of the liver for the treatment of metastatic colon cancer. Additionally, 36 HCC tissues (17 HBV-related and 19 HCV-related) were obtained from HCC patients undergoing hepatectomy. These samples were snap-frozen in liquid nitrogen immediately after resection and used for quantitative real-time detection PCR (RTD-PCR). Total RNA was extracted using a ToTALLY RNA™ kit (Ambion, Austin, TX).

The study protocol conformed to the ethical guidelines of the Declaration of Helsinki (1975) and was approved by the institutional ethical review board committee. All patients provided written informed consent for the analysis of the specimens.

Laser Capture Microdissection (LCM) and RNA isolation

LCM was performed as previously described 31. Briefly, 20 HCV-related surgically resected HCC tissues were frozen in OCT compound (Sakura Finetech, Torrance, CA) 32. Inflammatory cells and cancerous cells in HCC tissues were separately excised by LCM using a Laser Scissors CRI-337 (Cell Robotics, Inc. Albuquerque, NM) under a microscope. Total RNA was isolated from these cells using a microRNA isolation kit (Stratagene, La Jolla, CA) in accordance with the supplied protocol, with slight modifications 31.

Construction of C19orf10 Expression Plasmid and Recombinant Adenovirus Vector

PCR was performed on a Marathon cDNA library from Huh7 cells using the following primers:
sense primers; 5′-GACCCTAGTCCACATGGCCGC-3′ (the first PCR), 5′-ATGGCGGCGCCAGCGGAGGTGAACCGC-3′ (the nested 2nd PCR), and anti-sense primers; 5′-CACCAGATGAGAAGGTTGCACCCGGC-3′ (the first PCR), 5′-CAGGGCTGCTGGTCACAGCTCAGCGC-3′ (the nested 2nd PCR). The 5′ and 3′ ends of the cDNA were isolated using a SMART RACE cDNA Amplification kit (Clontech, Mountain View, CA) according to the manufacturer’s recommendations. The PCR products were cloned into a TA vector (Invitrogen, Carlsbad, CA) to generate the pcDNA3.1- c19orf10 expression plasmid. Using this plasmid, a C-terminally FLAG-tagged construct of c19orf10 was generated and inserted in a pSI mammalian expression vector (Promega, Madison, WI), which was driven by the SV40 promoter (pSI- c19orf10).

The replication-incompetent recombinant adenovirus vector expressing FLAG-tagged c19orf10 (Ad. c19orf10-FLAG) was generated by homologous recombination using the AdMax system (Microbix, Toronto, Canada) as previously described 33. The generated recombinant adenovirus was purified by limiting dilution and the titer of viral aliquots was determined by the 50% tissue culture infectious dose (TCID) method as previously described 34.

**RTD-PCR**

RTD-PCR was performed as previously described 31. Briefly, template cDNA was synthesized from 1 μg of total RNA using SuperScript™ II RT (Invitrogen). RTD-PCR of c19orf10 (Hs. 00384077_m1), AFP (Hs00173490_m1), GPC3 (Hs01018938_m1), KRT19 (Hs00761767_s1), and the ACTB internal control (Hs99999903_m1) was performed using a TaqMan® Gene Expression Assay kit (Applied Biosystems, Foster City, CA). The expression of selected genes was measured in triplicate by ΔΔCT method using the 7900 Sequence Detection System (Applied Biosystems).

**Cell Lines and Transfection of Plasmids**

Human liver cancer cell lines HuH1, Huh7, Hep3B, HLE, and HLF, as well as HEK293 and NIH3T3 were cultured in Dulbecco’s modified eagle medium (Invitrogen) supplemented with 10% heat-inactivated fetal bovine serum (Invitrogen) in 5% CO₂ at 37°C. Transfection of plasmids was performed using FuGENE™ 6 (Roche Diagnostics, Indianapolis, IN) according to the manufacturer’s instruction. Briefly, 5 × 10⁵ cells were seeded in a six-well plate 12 hours before transfection, and 3 μg of plasmid DNA was used for each transfection. All experiments were repeated at least twice.
Purification of c19orf10-FLAG Fused Protein and Production of Anti-c19orf10 Antibody
Approximately 500 ml of culture supernatant obtained from HEK293 cells infected with Ad.C19ORF10-FLAG at a multiplicity of infection of 20 was applied to an anti-FLAG affinity gel column (Sigma-Aldrich, St. Louis, MO). The column was subjected to elution by competition with FLAG peptide (5 μg/ml), and each 1 ml fraction of the eluted aliquot was collected to obtain the most concentrated c19orf10-FLAG protein in accordance with the manufacturer’s protocol. The anti-c19orf10 antibodies were developed by immunizing rabbits with repeated intradermal injections of oligo-peptides of c19orf10 (155-VAKAARSEL-163). Protein concentration was measured by the Bradford method.

Silencing Gene Expression by Short Interfering RNA (siRNA)
The selected siRNA targeting C19ORF10 (Si-C19ORF10; Silencer Select siRNAs s31855) and the irrelevant control sequence (Si-Control; Silencer Select siRNAs 4390843) were obtained from Applied Biosystems. Transfection of these siRNAs was performed using FuGENE™ 6 (Roche Diagnostics) as previously described. Briefly, 2 × 10^5 cells were seeded in a six-well plate 12 hours before transfection. A total of 100 pmol/L of siRNA duplex was used for each transfection. The experiments were performed at least twice.

Cell Proliferation Assay
Cell proliferation was evaluated in quadruplicate using a Cell Titer 96 MTS Assay kit (Promega). After incubation with MTS/PMS solution at 37°C for 2 h, the absorbance at 450 nm was measured. The experiments were performed at least twice.

Cell Cycle Analysis
Cells were fixed using 80% ice-cold ethanol and incubated with propidium iodide (PI) for 10 min. DNA content was analyzed using a FACS Caliber flow cytometer (BD Biosciences, San Jose, CA) counting 10,000 stained cells. The distribution of cells in each cell-cycle phase was determined using FlowJo software (Tree Star Inc., Ashland, OR).

Western Blotting
Cells were lysed in radioimmunoprecipitation assay (RIPA) buffer, and the extracts were subsequently electrophoresed on sodium dodecyl sulfate (SDS)-10% polyacrylamide gels and transferred onto protean nitrocellulose membranes. The blots were then incubated for 1 h with an
appropriate primary monoclonal antibody: phospho-PI3K (#4228), phospho-Akt (#4060), phospho-GSK-3β (#9323), phospho-c-Raf (#9427), phospho-MEK1/2 (#9154), phospho-p44/42 MAPK (Erk1/2) (#4370), Cdk4 (CDK4 (#2906), Cdk6 (#3136), cyclinD1 (#2926), cyclinD3 (#2936), phospho-Rb (#9308), phospho-P53 (#9286), phospho-cdc2 (#9111), and β-actin (#4970) (Cell Signaling Technology, Allschwil, Switzerland) and anti-FLAG antibodies (Sigma-Aldrich, St. Louis, MO). The blots were washed and exposed to peroxidase-conjugated secondary antibodies, such as anti-mouse or rabbit IgG antibodies, and visualized using the ECL™ kit (Amersham Biosciences Corp., Piscataway, NJ). All experiments were performed at least twice.

Statistical Analyses
Unpaired t-tests and Kruskal-Wallis tests were performed on the RTD-PCR and cell proliferation data using GraphPad Prism software (www.graphpad.com).
Results

**Identification of C19ORF10 overexpression in HCC by SAGE**

To comprehensively explore the candidate novel genes activated in HCC, we re-analyzed two SAGE libraries derived from HCC tissues and normal liver tissues. After normalization of each SAGE library size to 300,000 tags, we compared the HCC and normal liver libraries to obtain the list of genes overexpressed in HCC. We identified 79 genes significantly overexpressed in the HCC library by more than 10-fold when compared with the normal liver library (Supplemental Table 1). Among them, we explored expressed sequence tags (ESTs) as candidates for novel HCC-related genes to identify 8 unique tags corresponding to 7 ESTs (Table 1). We especially focused on the EST chromosome 19 open reading frame 10 (c19orf10) because the sequence presumably encoded a secretory protein with a signal peptide sequence (Fig. 1A).

When we examined the expression profiles of c19orf10 using retrieved SAGE data from various cancers and their normal counterparts, we identified that c19orf10 was abundantly expressed in human HCC (Fig. 1B). We further examined the publicly available EST profiles of c19orf10 (http://www.ncbi.nlm.nih.gov/unigene), and confirmed its tendency to be overexpressed in HCC compared with the normal liver (data not shown). We validated the overexpression of c19orf10 in 15 independent HCC tissues and adjacent non-cancerous liver tissues by RTD-PCR. Gene expression of c19orf10 was significantly higher in the HCC tissues than in the normal liver tissues and adjacent non-cancerous liver tissues ($P = 0.014$ and 0.048, respectively; Fig. 1C). C19orf10 expression was elevated in HCC tissues compared with the adjacent non-cancerous liver tissues in 10 of 15 patients (66.7%; Fig. 1D).

**Overexpression of C19ORF10 in AFP-positive HCC**

As HCC is a heterogeneous mixture of cancer epithelial cells and stromal cells, and a previous report indicated that c19orf10 is expressed in fibroblast-like synoviocytes. We therefore evaluated the expression of c19orf10 in tumor epithelial cells and stromal cells separately using LCM and RTD-PCR in 20 HCC tissues (Fig. 2A). Although tumor stromal cells expressed c19orf10 at some level, the expression levels were significantly higher in tumor epithelial cells than in stromal cells ($P = 0.006$) (Fig. 2B).

To explore the relationship of c19orf10 with other established HCC markers, we investigated the gene expression of c19orf10, AFP (alpha-fetoprotein), KRT19 (cytokeratin 19), and GPC3 (glypican 3). Because only one of 15 HCC tissues analyzed above (Fig. 1D) was AFP-positive (data not shown), we further investigated the expression of c19orf10 in an additional
36 HCC tissues using RTD-PCR. Interestingly, \textit{c19orf10} expression was significantly positively correlated with \textit{AFP} (r = 0.44, \(P = 0.008\)), but not with \textit{KRT19} (r = 0.08, \(P = 0.66\)) nor \textit{GPC3} (r = 0.11, \(P = 0.54\)) (Figs. 2C–E). Furthermore, when we examined the expression of \textit{c19orf10} in AFP-positive (HuH1, HuH7, and Hep3B) and –negative (HLE and HLF) HCC cell lines, we identified the overexpression of \textit{c19orf10} in AFP-positive HCC cell lines (Fig. 2F). These data suggested that \textit{c19orf10} is overexpressed and may play some role in AFP-positive HCCs.

\textit{C19orf10 regulates MAPK/Akt pathways and activates cell proliferation}

To explore the functional role of \textit{c19orf10} in HCC, we performed \textit{c19orf10} overexpression and knockdown studies using \textit{c19orf10}-low HLE cells, and \textit{c19orf10}-high Hep3B and HuH7 cells, respectively. When we transfected HLE cells with pcDNA3.1 or pcDNA3.1-\textit{c19orf10} plasmids, we identified an approximately 6-fold overexpression of \textit{c19orf10} when compared with the control 48 hours after transfection (\(P < 0.0001\)) (Fig. 3A). Interestingly, cell proliferation was modestly, but significantly, enhanced compared with the control 72 hours after transfection (\(P = 0.0015\)) (Fig. 3B).

We also transfected siRNAs targeting an irrelevant sequence (Si-\textit{Control}) or \textit{c19orf10} (Si-\textit{c19orf10}) in Hep3B and HuH7 cells. We observed an approximately 50% decrease in \textit{c19orf10} expression in Hep3B cells transfected with Si-\textit{c19orf10} compared with the control 48 hours after transfection with statistical significance (\(P < 0.0001\)). In this condition, cell proliferation was suppressed to 50% compared with the control 72 hours after transfection (\(P < 0.0001\)) (Figs. 3C, D). When we performed cell cycle analysis of HuH7 cells transfected with Si-\textit{Control} or Si-\textit{c19orf10}, we identified an increase of G1-phase cells and a decrease of S- and G2-phase cells by \textit{c19orf10} knockdown, suggesting the G1 cycle arrest was caused by the knockdown of \textit{c19orf10} (Fig. 3E).

We examined the representative MAPK/Akt pathway-associated proteins and cell cycle regulators using Western blotting 72 hours after siRNAs transfection (Fig. 3F). Interestingly, phosphorylation of c-Raf, MEK, MAPK, PI3K, and pAkt was inhibited by knockdown of \textit{c19orf10}, suggesting the involvement of \textit{c19orf10} in the MAPK/Akt pathways. Furthermore, phosphorylation of Rb, CDK4, and CDK6 was also inhibited by knockdown of \textit{c19orf10}, consistent with the observation of G1 cell cycle arrest by \textit{C19ORF10} knockdown. PTEN, p53, and phosphorylated CDC2 protein expression was not affected by knockdown of \textit{c19orf10}.

\textit{C19orf10 encodes the secretory protein and stimulates cell proliferation}

As the sequence of \textit{c19orf10} suggested that it encodes a secretory protein, we transfected pSI-
c19orf10-FLAG in NIH3T3 cells and examined the culture supernatant. Immunoprecipitation of the collected culture supernatant 48 h after transfection using anti-FLAG antibodies indicated the existence of a 17-kDa protein (c19orf10), compatible with the molecular weight of the 142 amino acids protein encoded by c19orf10 (Fig. 4A). We purified c19orf10-FLAG protein from the supernatant of HEK293 cells infected with Ad. c19orf10-FLAG using an anti-FLAG column. Supplementation of purified c19orf10-FLAG into the culture media for 72 h enhanced the proliferation of HLE cells in a dose dependent manner with statistical significance, whereas control FLAG peptides and BSA had no effects on cell proliferation (Fig. 4B). Western blot analysis of HLE cells cultured with purified c19orf10-FLAG (40 ng/ml) or BSA control (40 ng/ml) indicated the immediate strong phosphorylation of Akt peaked 5 minutes after supplementation (Fig. 4C). The modest phosphorylation of GSK3β (Ser9) and p44/42 MAPK also followed and peaked 60 minutes after c19orf10 supplementation. These data suggest that Akt pathway might be directly involved in the c19orf10-mediated cell proliferation signaling with the subsequent activation of MAPK pathway. Furthermore, addition of antibodies against c19orf10 peptides to the culture media abolished the cell proliferation induced by c19orf10, whereas control IgG had no effects (Fig. 4D). Taken together, these data suggest that c19orf10 may be a growth factor overexpressed in AFP-positive HCCs and activates the Akt/MAPK pathways, potentially through the activation of an unidentified c19orf10 receptor.
Discussion

SAGE facilitates the measurement of transcripts from normal and malignant tissues in a non-biased and highly accurate, quantitative manner. Indeed, SAGE produces a comprehensive gene expression profile without a priori gene sequence information, leading to the identification of novel transcripts potentially involved in the pathogenesis of human cancer \(^{19}\). In this study, we identified seven SAGE tags potentially corresponding to novel genes activated in HCC. Among them, we identified the secretory protein c19orf10 activated in a subset of HCCs.

Several serum markers including AFP, DCP, and Glypican 3 are currently used for the detection and/or the evaluation of the treatment for HCCs in the clinic \(^{15-18, 35}\). These markers are known as oncofetal proteins, that is, expressed in the fetus, transcriptionally suppressed in the adult organ, and reactivated in the tumor. We identified that the expression of c19orf10 positively correlated with AFP expression, but did not correlate with the expression of GPC3 or the biliary marker KRT19. As c19orf10 was rarely detected in the normal liver, it is possible that c19orf10 is also an oncofetal protein activated in HCC. We are currently developing a system to detect serum c19orf10 in HCC patients, and the significance of the serum c19orf10 value as an HCC marker should be clarified.

Recent advancement in molecular biology has revealed the considerable diversity of transcription initiation and/or termination of genes altered in the process of carcinogenesis. Indeed, using 5' SAGE approach, we recently discovered the novel intronic transcripts activated in HCC \(^{36}\). Interestingly, when we investigated the transcription initiation of c19orf10 using the 5' SAGE database, we identified a potential 5' splice variant initiated from the second exon of c19orf10 (data not shown). Although we have not yet validated the presence of 5' splice variants in c19orf10 by PCR, examination of 5' EST database also suggested the presence of the similar splice variants (GenBank Accession Number CR980295, BQ680744, BQ648461, etc). Alteration of transcription initiation/termination in c19orf10 might affect the abundance or function of c19orf10 protein, and the details of 5' splice variants in c19orf10 should be clarified in future studies.

Molecular targeting therapy has rapidly emerged for solid tumors as well as for leukemia \(^{37-39}\). Sorafenib is a multi-kinase inhibitor targeting Raf kinase in the MAPK pathway as well as VEGFR and the platelet-derived growth factor-receptor \(^{40, 41}\). In this study, we identified that c19orf10 activates the MAPK and Akt/PI3K pathways, and contributes to the proliferation of HCC cell lines, although we still could not discover the potential receptor of c19orf10. Development of a neutralizing c19orf10 antibody may provide novel therapeutic options for HCC patients to inhibit these signaling pathways, and its efficacy should be evaluated in the future.
Recently, c19orf10 was found to be expressed in fibroblast-like synoviocytes in the synovium using a proteomics approach. In addition, a recent paper indicated that c19orf10 was expressed in pre-adipocyte cells and involved in adipogenesis using two-dimensional electrophoresis mass spectrometry analysis. Thus, c19orf10 may have pleiotropic effects on various lineages of normal organs in various developmental stages, and the clarification of its distribution and biological properties in the whole body may provide more detailed information about the function of c19orf10.

In conclusion, we have identified the protein c19orf10 that regulates the Akt/MAPK pathways and cell cycle through an unidentified mechanism in HCC. Although further studies should be conducted to detect the potential c19orf10 receptor or signaling molecules binding to c19orf10, the current study suggests that c19orf10 may be a novel growth factor, a potential tumor marker, and also a potential target molecule for HCC treatment.

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Figure legends

Fig. 1
A. Structure of a c19orf10 gene and a c19orf10 protein. The DNA sequence of c19orf10 and amino acid alignment of the encoded c19orf10 protein are shown. C19orf10 is predicted to have a molecular weight of 17 kDa and contain a signal peptide cleavage site (indicated as a black arrow).
B. C19orf10 gene expression profiles in various tissues by SAGE. Y axis indicates the number of tags corresponding to c19orf10 in each tissue. C & D. RTD-PCR analysis of c19orf10. RNA was isolated from 34 tissue samples: 15 HCC, 15 corresponding non-cancerous liver samples, and 4 normal liver samples. Differential expression of each gene among normal liver tissues, non-cancerous liver tissues, and HCC tissues was examined using the Kruskal-Wallis test and unpaired t-test. The mean value of gene expression data in each group is indicated (C). C19orf10 was overexpressed in 10 of 15 examined HCC tissues compared with the non-cancerous liver tissues (D).

Fig. 2
A. Representative photomicrographs of an HCC tissue used for LCM (toluidine blue staining). Inflammatory mononuclear cells and stromal cells were separately captured (Left: Pre-LCM, right: Post-LCM). B. RTD-PCR analysis of c19orf10 expression in inflammatory mononuclear cells and tumor epithelial cells in 20 HCV-related HCC tissues. Tumor-inflammatory mononuclear cells and stromal cells were isolated using LCM. RNAs were isolated from these cells as well as parenchymal tissues from the same liver, followed by RTD-PCR for c19orf10 gene expression. Expression of the c19orf10 gene was higher than that observed in HCC-infiltrating inflammatory mononuclear cells. *P < 0.05. C–E. Scatter plot analysis of c19orf10, AFP, KRT19, and GPC3 expression in HCC. RNA was isolated from 17 HBV-related HCC and 19 HCV-related HCC. F. RTD-PCR analysis of c19orf10 in AFP-negative (HLE and HLF) and -positive (HuH1, HuH7, and Hep3B) liver cancer cell lines.

Fig. 3
A. RTD-PCR analysis of c19orf10 expression in HLE cells transfected with pcDNA3.1 or pcDNA3.1-c19orf10 plasmids. B. Cell proliferation assay of HLE cells transfected with pcDNA3.1 or pcDNA3.1-c19orf10 plasmids. Cell proliferation was evaluated 72 h after each plasmid transfection. C. RTD-PCR analysis of c19orf10 expression in Hep3B cells transfected with Si-Control or Si-c19orf10. Gene expression was measured in triplicates 48 h after transfection. D.
Cell proliferation assay of Hep3B cells transfected with Si-Control or Si-c19orf10. Cell proliferation was evaluated 72 h after siRNA transfection. E. Cell cycle analysis of HuH7 cells transfected with Si-Control or Si-c19orf10. Cell cycle was evaluated 72 h after siRNA transfection. A black arrow indicates the G2 phase peak. F. Western blotting analysis of HuH7 cells transfected with Si-Control or Si-c19orf10. Cells were lysed by RIPA buffer 72 h after siRNA transfection.

**Fig. 4.**

A. Coomassie blue staining and Western blotting of culture supernatant of NIH3T3 cells transfected with pSI-c19orf10-FLAG. A black arrow indicates the 17-kDa c19orf10 protein. B. Cell proliferation assay of HLE cells supplemented with recombinant c19orf10-FLAG. Cell proliferation was measured in quadruplicates 72 h after supplementation. C. Western blotting of HLE cells supplemented with c19orf10-FLAG (40 ng/ml). Cells were lysed at indicated time after c19orf10 supplementation. D. Cell proliferation assay of HLE cells supplemented with control BSA (40 ng/ml) (white bar), c19orf10-FLAG (40 ng/ml) (light grey bar), c19orf10-FLAG (40 ng/ml) + anti-c19orf10 antibodies (gray bar), and c19orf10-FLAG (40 ng/ml) + control mouse IgG (black bar).
| Tag Sequence       | P-value    | HCC | normal liver T/N ratio | Name                                                                 | UniGene ID |
|-------------------|------------|-----|------------------------|----------------------------------------------------------------------|------------|
| TGGGCAGGTG         | <0.00001   | 33  | 0                      | >33 Chromosome 5 open reading frame 13                               | Hs.483067  |
| GCAAAATATC         | <0.00001   | 31  | 2                      | 15.5 Liver cancer associated non coding mRNA, partial sequen          | Hs.214343  |
| AGCCTGCAGA         | 0.0002     | 12  | 1                      | 12 Chromosome 19 open reading frame 10                               | Hs.465645  |
| TTGTGCACGT         | 0.000228   | 12  | 1                      | 12 CDNA FLJ45284 fis, clone BRHIP3001964                            | Hs.514273  |
| ACATTCTTGT         | 0.000042   | 12  | 0                      | >12 Transcribed locus, strongly similar to XP_496055.1               | Hs.76704   |
| ACAAGTACCC         | 0.001161   | 10  | 1                      | >10 Chromosome 5 open reading frame 13                               | Hs.483067  |
| GAGGTGAAGG         | 0.000174   | 10  | 0                      | >10 KIAA1914                                                         | Hs.501106  |
| GCTGGAGGAG         | 0.000114   | 10  | 0                      | >10 Transcribed locus                                                | Hs.520115  |
Figure 1

A

Breast cancer
Normal breast epithelium
Lung cancer adenocarcinoma
Normal lung
Prostate cancer
Normal prostate epithelium
Gastric cancer
Gastric cancer scirrhous
Normal gastric epithelium
Normal ovarian epithelium
Ovarian cancer serous
Normal pancreatic epithelium
Pancreas cancer cell line
Normal colon epithelium
Colon cancer
Normal liver
HCC

Gene Expression
0 2 4 6 8 10 12 14 16
Case Number

P = 0.014
P = 0.048

B

Tag counts

Tumor
Non-tumor

C

Gene Expression
0 0.6 1.4 2.1
Normal liver Non-cancerous HCC

D

Gene Expression
0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15
Case Number

HCC Non-cancerous
Figure 2

A

B

C

D

E

F

C19ORF10 vs. AFP

C19ORF10 vs. KRT19

C19ORF10 vs. GPC3

Stromal cells vs. Epithelial cells

HLE HLF HuH1 HuH7 Hep3B

AFP-positive AFP-negative

Stromal cells

Epithelial cells

HLE HLF HuH1 HuH7 Hep3B

AFP-negative

AFP-positive

r = 0.44

P = 0.008

r = 0.08

P = 0.66

r = 0.11

P = 0.54

P = 0.006
Figure 3

A

\[
\begin{align*}
C19orf10 (\%) & \quad P < 0.0001 \\
\text{pcDNA3.1} & \quad \text{pcDNA3.1-C19orf10}
\end{align*}
\]

B

\[
\begin{align*}
\text{Cell proliferation} (\%) & \quad P = 0.0015 \\
\text{pcDNA3.1} & \quad \text{pcDNA3.1-C19orf10}
\end{align*}
\]

C

\[
\begin{align*}
C19orf10 (\%) & \quad P < 0.0001 \\
\text{Si-Control} & \quad \text{Si-C19orf10}
\end{align*}
\]

D

\[
\begin{align*}
\text{Cell proliferation} (\%) & \quad P < 0.0001 \\
\text{Si-Control} & \quad \text{Si-C19orf10}
\end{align*}
\]

E

- Si-Control
  - G1: 53.8%
  - S: 26.9%
  - G2: 19.3%
- Si-C19orf10
  - G1: 65.9%
  - S: 20.8%
  - G2: 13.3%

F

- Si-Control
- Si-C19orf10

- pC-Raf
- pMEK
- pMAPK
- PTEN
- PI3K
- pAkt
- Cyclin D1
- pRb (807)
- Cyclin D3
- p53
- CDK4
- Cdc-2 (tyr15)
- CDK6
- beta actin
Figure 4

A

kDa
150
100
75
56
35
25
20
15
coomassie
FLAG
mAb

B

Cell proliferation (%)

Concentration (ng/ml)
P = 0.0002
P = 0.0016
P = 0.69

C

Time (min) 0 5 10 15 30 60
pGSK3β (Ser9)
p44/42 MAPK
p-c-Raf
p-Akt
β-actin

D

Cell proliferation (%)

Control c19orf10 + anti-c19orf10 Ab c19orf10 c19orf10 + control IgG

*P < 0.001
**P = 0.0012

*P < 0.0001
**P = 0.0012

*P < 0.001
Sep 30, 2010

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Dear Professor Lichter,

Thank you for your email message dated on July 20, 2010 regarding your decision on our manuscript (Ms. No. IJC-10-0593), entitled “Identification of a Secretory Protein c19orf10 Activated in Hepatocellular Carcinoma”. We greatly appreciate your consideration in giving us another opportunity to submit a revised manuscript on this topic. Accordingly, we have made a concerted effort to extensively revise the manuscript in response to the criticisms. We have outlined our specific responses to the reviewer’s comments and corresponding changes below.

Reviewer: 2
Comments to Author
The authors have addressed many of the concerns raised in the original review. The observation of C19orf10 in HCC and cancerous hepatic tissues expands our knowledge of this protein. However, the biological effects are marginal and as discussed below I feel that it is essential to rule out possible methodological artifacts.

Response: We would like to thank the reviewer’s positive constructive comments to our study.

I have several specific comments.

1) I still find it rather strange that there is no background discussion of C19orf10 in the introduction. Not only distribution info but also structural organization of the protein and the unique structure. This information would only serve to enhance the interest in the molecule.

Response: We appreciate the reviewer’s thoughtful comment. Accordingly, we revised the manuscript and explained the background of c19orf10 in the introduction section (Page 3 line 27 – Page 4 line 1).
2) On a related note discussion of how the reported observed distribution of C19orf10 (c19orf10 message is broadly expressed) might be impact on the suggestion of this as a potential target for HCC?

Response: We appreciate the reviewer’s comment. As the reviewer suggested, the previous reports of c19orf10 expression in macrophages, adipocytes, and synovial fibroblasts imply that c19orf10 might be more likely expressed in tumor stromal cells rather than tumor epithelial cells. We believe our RT-PCR data of c19orf10 expression in AFP+ HCC cell lines clearly suggested that c19orf10 is at least expressed in AFP+ tumor epithelial cells. Furthermore, our laser capture microdissection data indicated that c19orf10 was overexpressed in tumor epithelial cells rather than stromal cells. However, we could not rule out the possibility that c19orf10 produced by stroma might also enhance cell proliferation of tumor epithelial cells in a paracrine manner, as the reviewer suggested. Regardless of c19orf10 action to enhance tumor growth in an autocrine or a paracrine manner, we believe c19orf10 would be a good candidate for eradication of HCC as suggested by the cell proliferation assay using anti-c19orf10 antibodies, although further studies are clearly required in future. We revised the manuscript accordingly (Page 4 line 3 – 4).

3) The comparison between HCC and stromal cells is confusing and potentially misleading as the latter two terms are used interchangeably. The data as presented does not rule out comparable expression of c19orf10 by stromal tissue. Also inflammation could change local expression levels. Do the authours have any info on normal liver expression of c19orf10?

Response: We agree with the reviewer’s comment and revised the manuscript (Page 9 line 27 – 29) and Figure 2B. We also indicated the qRT-PCR data of normal liver tissues in Figure 1C (Page 9 line 18 – 19) and confirmed that the expression level of c19orf10 was quite low but detectable.

Also the statistical differences between the non cancerous and HCC regions really appear to arise from a few outliers. It is not clear at what level of confidence the ratios can be considered to be significantly different (i.e. <2).

Response: We agree with the reviewer’s comment. We calculated the difference of gene expression between two groups by unpaired t tests with p-value < 0.05, and the mean value of each group suggested that c19orf10 was overexpressed about 3.5- and 1.5-fold in HCC compared with normal liver and non-cancerous liver, respectively. We added the mean value of c19orf10 expression data in normal liver, non-cancerous liver, and HCC tissues, respectively (revised Figure 1C, Page 18 line 11).
4) The biological effects of c19orf10 are very modest but apparently real. Given that this molecule was previously reported to have biological activity and this was subsequently retracted it is important that the present results are of the highest confidence. What was the control for the proliferation assays? An irrelevant construct isolted in the same way would be appropriate given the possibilities of microbial product carryover. The figures should contain the results of both experiments. Were these done with different batches of recombinant protein or the same one?

Response: We agree with the reviewer’s comment. We therefore prepared recombinant proteins FLAG-c19orf10, FLAG peptides, and BSA for cell proliferation assay. We reconfirmed the results of cell proliferation assay using recombinant c19orf10, bovine serum albumin, and recombinant FLAG-peptide as control (revised Figure 4B). We used the same batch of recombinant FLAG-c19orf10 and FLAG peptides. We revised the manuscript accordingly (Page 11 line 7 – 8).

5) I also wonder if the authors have tried their antibody on tissues? Given that it seems to neutralises biological activity it must see native protein and as such could be used for immunohistolgy or western blot. Such data would provide more compelling evidence for the presence of the protein in the tissues.

Response: We would like to thank the reviewer’s comment. We firstly performed IHC analysis but couldn’t detect any positive staining (data not shown). We therefore performed Western blotting on representative HCCs and non-cancerous liver tissues using antibodies against c19orf10. Interestingly, we identified the clear overexpression of c19-ORF10 in 2 of 4 HCC samples examined as indicated below (review purpose only). We agree that we should test the expression of c19orf10 in more samples including normal liver tissues using the antibodies, and we would like to examine the expression as the future study.
We appreciate the reviewers’ constructive comments to make our manuscript much more scientifically sound. We believe that we have addressed all of the concerns raised by the reviewer. We hope you and the reviewer will find our revised manuscript acceptable and that the paper meets the editorial requirements for publication in International Journal of Cancer. We look forward to your expert advice.

Sincerely yours,

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Email :mhonda@m-kanazawa.jp
| Tag Sequence | P-value HCC | normal liver | T/N ratio Name | UniGene ID |
|--------------|-------------|--------------|----------------|------------|
| CCAAGACTTC   | <0.00001    | 449          | 149.6667 no reliable match |            |
| CTAAGGTAGT   | <0.00001    | 61           | >61 no reliable match |            |
| TGGGCAGGTG   | <0.00001    | 33           | >33 Chromosome 5 open reading frame 13 | Hs.483067 |
| CTGACTTGTG   | <0.00001    | 24           | >24 Major histocompatibility complex, class I, B | Hs.77961 |
| CTGCCCTCCC   | <0.00001    | 24           | 24 Iduronidase, alpha-L- | Hs.89560 |
| TACAGTATGT   | <0.00001    | 207          | 24 Major histocompatibility complex, class I, B | Hs.483067 |
| GCAAAGAAA    | <0.00001    | 19           | >19 glypican 3 | Hs.435036 |
| GATTTCTTTTG  | <0.00001    | 21           | >21 Cytochrome P450, family 3, subfamily A, polypeptide 4 | Hs.442527 |
| TGATATAAAT    | <0.00001    | 21           | >21 no reliable match |            |
| TCCCCGCTAC   | <0.00001    | 21           | >21 no reliable match |            |
| TAAAAAAGGT    | <0.00001    | 19           | >19 multiple match |            |
| GCAAATATC    | <0.00001    | 31           | 15.5 Liver cancer associated non coding mRNA, partial sequence | Hs.214343 |
| GATCAGCTG    | <0.00001    | 30           | 15 multiple match |            |
| CTTCAGAGA    | <0.00001    | 15           | 15 Oxoglutarate dehydrogenase-like | Hs.17860 |
| GGTTTTATAT    | <0.00001    | 15           | 15 multiple match |            |
| GCTTATGTTA   | <0.00001    | 15           | >15 multiple match |            |
| CTATACTTGT   | <0.00001    | 14           | 14 Aldehyde dehydrogenase 5 family, member A1 | Hs.371723 |
| TGCTACTGGT   | <0.00001    | 14           | 14 Surfeit 1 | Hs.512464 |
| GGCCAGGAGC   | <0.00001    | 14           | >14 multiple match |            |
| GCTGCCTGCC   | <0.00001    | 14           | 14 multiple match |            |
| GATCTCCGTC   | <0.00001    | 14           | 14 multiple match |            |
| ATGCTCCTGG   | <0.00001    | 14           | >14 multiple match |            |
| TTACTTACAC   | <0.00001    | 14           | >14 multiple match |            |
| TCTTCAACAA   | <0.00001    | 14           | >14 multiple match |            |
| CCAGGGGAGA   | <0.00001    | 38           | 3 12.66667 interferon, alpha inducible protein 27 | Hs.532634 |
| TCACTTTCTA   | <0.00001    | 12           | 12 Dehydrogenase E1 and transketolase domain containing 1 | Hs.104980 |
| AGAGCCGACAG  | <0.00001    | 12           | 12 crystallin, alpha A | Hs.184085 |
| CCCGGCTCTT    | <0.00001    | 12           | >12 Platelet-activating factor acetylhydrolase, isoform Ib, beta subunit 30kDa | Hs.188501 |
| AAGCTAAGTC    | <0.00001    | 12           | 12 transmembrane protein 7 | Hs.196584 |
| GTGATGAGCT    | <0.00001    | 12           | 12 carboxylesterase 2 (intestine, liver) | Hs.282975 |
| GTGCACCTGT    | <0.00001    | 12           | >12 Testis enhanced gene transcript (BAX inhibitor 1) | Hs.35052 |
| AGCCTGCAGA    | <0.00001    | 12           | 12 Chromosome 19 open reading frame 10 | Hs.465645 |
| GAGCTCCACA    | <0.00001    | 12           | 12 Protein kinase (cAMP-dependent, catalytic) inhibitor gamma | Hs.472831 |
| CTGTTATAGG   | <0.00001    | 12           | >12 YME1 like 1 (S. cerevisiae) | Hs.499145 |
| Tag          | Count | Match | Score | Description                                                                 | IDs     |
|--------------|-------|-------|-------|-----------------------------------------------------------------------------|---------|
| TTGTGCACGT   | 12    | 1     | 12    | CDNA FLJ45284 fis, clone BRHIP3001964                                     | Hs.514273 |
| CAGCTCCGCT   | 12    | 0     | >12   | DUTP pyrophosphatase                                                        | Hs.527980 |
| TTTTTAATGT   | 12    | 1     | 12    | H3 histone, family 3A                                                       | Hs.533624 |
| GCGTCCGGGA   | 12    | 1     | 12    | interferon (alpha, beta and omega) receptor 2                               | Hs.549042 |
| ACATTCTTGT   | 12    | 1     | 12    | Transcribed locus, strongly similar to XP_496055.1 similar to                | Hs.76704 |
| CTGCCTGAAT   | 12    | 0     | >12   | multiple match                                                              |         |
| TTATAAAAAA   | 12    | 1     | 12    | multiple match                                                              |         |
| TATCACTCTG   | 12    | 0     | >12   | multiple match                                                              |         |
| GTAGGTTGTC   | 12    | 1     | 12    | multiple match                                                              |         |
| TGGTGGTTGTC  | 12    | 1     | 12    | multiple match                                                              |         |
| CCAGCTGCCA   | 12    | 1     | 12    | multiple match                                                              |         |
| TAAATAAGT    | 12    | 0     | >12   | multiple match                                                              |         |
| TGGTGTCAAGT  | 12    | 1     | 12    | multiple match                                                              |         |
| TGATGGCCGCA  | 12    | 0     | >12   | no reliable match                                                            |         |
| ACACCTATAT   | 12    | 1     | 12    | no reliable match                                                            |         |
| CCACTATAT    | 12    | 0     | >12   | no reliable match                                                            |         |
| CTAAGTCTCG   | 12    | 0     | >12   | no reliable match                                                            |         |
| TGGTGTATGC   | 35    | 3     | 11.66667 | Tag matches mitochondrial sequence                                          |         |
| TCCTCGTGT    | 23    | 2     | 11.5  | Solute carrier family 38, member 3                                          | Hs.76460 |
| TTAACCCCT    | 0.0016 | 10   | 0     | >10  H3 histone, family 3B (H3.3B)                                          | Hs.180877 |
| ATGACTTAGG   | 0.00113 | 10 | 1     | 10  UDP glycosyltransferase 2 family, polypeptide B10                       | Hs.201634 |
| TGACTACTGA   | 0.00109 | 10 | 1     | 10  apolipoprotein L, 6                                                     | Hs.257352 |
| TTAGGCTCTC   | 0.00111 | 10 | 1     | 10  Erythrocyte membrane protein band 4.1 like 4B                           | Hs.269180 |
| TTATTATAC    | 0.00112 | 10 | 1     | 10  factor H related protein 5                                              | Hs.282594 |
| CCTGTCCAGC   | 0.00105 | 10 | 1     | 10  BCL2 like 1                                                             | Hs.305890 |
| AGAACTTCC    | 0.00102 | 10 | 1     | 10  defensin, beta 1                                                        | Hs.32949 |
| GCCAAGTTTT   | 0.00017 | 10 | 0     | >10  proteasome (prosome, macropain) 26S subunit, non ATPase, 1             | Hs.3887 |
| TAATTACCT    | 0.00016 | 10 | 0     | >10  13kDa differentiation associated protein                               | Hs.44163 |
| ATTCTTGCC    | 0.00013 | 10 | 1     | 10  Mitochondrial ribosomal protein L38                                     | Hs.442609 |
| ACACAGTTTT   | 0.00014 | 10 | 0     | >10  FAT tumor suppressor homolog 1 (Drosophila)                            | Hs.481371 |
| ACAAGTACC    | 0.000108 | 10 | 1     | 10  Chromosome 5 open reading frame 13                                      | Hs.483067 |
| TGGAGAGCAA   | 0.000107 | 10 | 1     | 10  S-adenosylhomocysteine hydrolase-like 1                                  | Hs.485365 |
| GAGGTGAAAGG  | 0.00015 | 10 | 0     | >10  KIAA1914                                                               | Hs.501106 |
| GCTGGAGGAG   | 0.00016 | 10 | 0     | >10  Transcribed locus                                                       | Hs.520115 |
| ACCAGCAAAT   | 0.00017 | 10 | 0     | >10  phosphoinositide 3 kinase, regulatory subunit, polypeptide 1 (p85 alpha) | Hs.6241 |
| CTGCCGCCCT   | 0.00014 | 10 | 0     | >10  multiple match                                                         |         |
| Sequence            | Score | Position | Identity (%) | Length | Match Type  |
|---------------------|-------|----------|--------------|--------|-------------|
| GCTTGAATAA          | 0.00015 | 10       | 0            | >10    | multiple match |
| GTAAGATTTG          | 0.0011  | 10       | 1            | 10     | multiple match |
| CCCGCCCCCG          | 0.00106 | 10       | 1            | 10     | multiple match |
| CAAGGATCTA          | 0.00014 | 10       | 0            | >10    | multiple match |
| GAAACTGAAG          | 0.00014 | 10       | 0            | >10    | multiple match |
| CAGACTATGT          | 0.00115  | 10       | 1            | 10     | multiple match |
| ATTACACCAC          | 0.00015 | 10       | 0            | >10    | multiple match |
| AACAGAAGCA          | 0.0011  | 10       | 1            | 10     | multiple match |
| GAAATCCAAA          | 0.00013  | 10       | 0            | >10    | multiple match |