# Network-based gene function inference method to predict optimal gene functions associated with fetal growth restriction

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Abstract. The guilt by association (GBA) principle has been widely used to predict gene functions, and a network-based approach may enhance the confidence and stability of the analysis compared with focusing on individual genes. Fetal growth restriction (FGR), is the second primary cause of perinatal mortality. Therefore, the present study aimed to predict the optimal gene functions for FGR using a network-based GBA method. The method was comprised of four parts: Identification of differentially-expressed genes (DEGs) between patients with FGR and normal controls based on gene expression data; construction of a co-expression network (CEN) dependent on DEGs, using the Spearman correlation coefficient algorithm; collection of gene ontology (GO) data on the basis of a known confirmed database and DEGs; and prediction of optimal gene functions using the GBA algorithm, for which the area under the receiver operating characteristic curve (AUC) was obtained for each GO term. A total of 115 DEGs and 109 GO terms were obtained for subsequent analysis. All DEGs were mapped to the CEN and formed 6,555 edges. The results of GBA algorithm demonstrated that 78 GO terms had a good classification performance with AUC >0.5. In particular, the AUC for 5 of the GO terms was >0.7, and these were defined as optimal gene functions, including defense response, immune system process, response to stress, cellular response to chemical stimulus and positive regulation of biological process. In conclusion, the results of the present study provided insights into the pathological mechanism underlying FGR, and provided potential biomarkers for early detection and targeted treatment of this disease. However, the interactions between the 5 GO terms remain unclear, and further studies are required.

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## Introduction

Fetal growth restriction (FGR), the second primary cause of perinatal mortality, is a clinical entity that affects 5-10% of gestations (1). FGR has multiple heterogeneous causes, including maternal, fetal and placental factors (2). Effective treatments for FGR have not been proposed, apart from the interruption of pregnancy (3). Consequently, early diagnosis and prevention is of importance for patients with FGR, which may permit the etiological identification and adequate monitoring of fetal vitality, minimizing the risks associated with prematurity and intrauterine hypoxia (1,4). Therefore, the identification of biological markers for the early diagnosis and detection of FGR is required, in order to elucidate the molecular mechanism underlying FGR.

At present, numerous diseases have been attributed to the differential expression of genes compared with normal controls [differentially expressed genes (DEGs)] (5). However, genes frequently do not function individually; rather, they interact with other genes. A network-based approach is able to extract informative and notable genes via biological molecular networks, including the co-expression network (CEN), rather than focusing on individual genes (6,7). Providing that gene connections are based on guilt-determination, predictions of their gene functions may be conducted utilizing guilt-by-association (GBA) method (8). The GBA is a basic element for predicting gene function, and typically uses the interactions between any two genes for the purpose of investigation the role of novel genes in gene function categories.

Therefore, the present study took Gene Ontology (GO) annotations and gene expression data as study objectives, and integrated the network approach with the GBA method, termed the network-based gene function inference method, for the purpose of predicting the optimal gene functions for FGR. These gene functions may be potential biomarkers for the early detection and targeted treatment of FGR.

#### Materials and methods

*Network-based gene function inference method*. The network-based gene function inference method was comprised of four steps: i) Identifying DEGs between patients with FGR and normal controls using Limma based on gene expression data; ii) constructing the CEN dependent on DEGs using the

Spearman correlation coefficient (SCC); iii) collecting GO data for FGR on the basis of a known confirmed database and DEGs; and iv) predicting gene functions using the GBA algorithm, for which the area under the receiver operating characteristic curve (AUC) was calculated for each GO term. An AUC of 0.5 represents classification at chance levels, while an AUC of 1.0 represents a perfect classification. In the gene function prediction literature, AUC >0.7 is considered to be optimal (9). Therefore, GO terms with AUC >0.7 were defined as optimal gene functions for patients with FGR in the present study.

*Identifying DEGs.* Gene expression data [GSE24129 (2)] for human FGR were downloaded from the Gene Expression Omnibus database (www.ncbi.nlm.nih.gov/geo) using the accession number. GSE24129 was deposited on an Affymetrix Human Gene 1.0 ST Array (Affymetrix; Thermo Fisher Scientific, Inc., Waltham, MA, USA), and comprised normotensive pregnancies with or without FGR. The 8 examples with FGR were attributed to the case group, whereas 8 cases without FGR were denoted as normal controls. In order to control the quality of GSE24129, standard pretreatments were performed, which included background correction, normalization, probe matching and summarization (10-12). Following conversion of pretreated data at the probe level into gene symbols and removal of duplications, 14,398 genes were obtained for FGR in total.

Subsequently, DEGs between the FGR samples and normal controls were identified using the Limma package (13). The lmFit function implemented in Limma was utilized to perform empirical Bayes statistics and false discovery rate calibration of the P-values on the data (14,15). Only genes which met the thresholds of P<0.05 and  $llog_2$ Fold Changel >2 were defined as DEGs across FGR patients and normal controls.

*Constructing CEN.* Cytoscape is an open source software project for integrating biomolecular interactions with high-throughput expression data and other molecular states into a unified conceptual network (16). Therefore, the DEGs were inputted into the Cytoscape software to visualize the CEN. In order to further evaluate the cooperated strength for each interaction in the CEN, the SCC method was utilized (17). SCC is a measure of the correlation between two variables, giving a value between -1 and +1 inclusive. If the SCC analysis returned a positive value, this indicated a positive linear correlation between two genes; otherwise, a negative correlation was indicated. For an interaction between gene i and j, the absolute SCC value was denoted as its weight value. The SCC was computed as follows:

$$SCC = \frac{1}{n-1} \sum_{k=1}^{n} \left( \frac{g(i,k) - \dot{g}(i)}{\sigma(i)} \right) \cdot \left( \frac{g(j,k) - \dot{g}(j)}{\sigma(j)} \right)$$

Where *n* was the number of samples in the gene expression data; g(i, k) or g(j, k) was the expression level of gene *i* or *j* in the sample *k* under a specific condition; and  $\overline{g}(i)$  or  $\overline{g}(j)$  represented the mean expression level of gene *i* or *j*.

*Recruiting GO annotation data*. In the present study, the GO annotations were recruited from the GO Consortium

(geneontology.org) (18). There were 19,003 terms and 18,402 genes in total for human beings. Notably, only one category (biological process) of GO was selected to be the study objective. In subsequent steps, the GO structure was diffused, and filtered for GO terms on size ranging from 20 to 1,000 genes after excluding those inferred from electronic annotation, a range that generally gives stable performance (8,9). In addition, to make ensure that the GO terms correlated closely to FGR, if a GO term had a number of DEGs <20, it was removed. Therefore, only GO terms including  $\geq$ 20 DEGs were reserved. A total of 109 GO terms involved in 115 DEGs remained to be used in the following analyses.

*Predicting gene function*. As mentioned above, the GBA method was employed to predict the important gene function in the progression of FGR. Taking the GO functional annotations, a multi-functionality score (MFS) was assigned to each gene i in the CEN (8):

$$MFS(i) = \sum_{x \lor i \in GO_x} \frac{1}{Num_{i_x} * Num_{out_x}}$$

Where Num<sub>inx</sub> was the number of genes within GO group x, whose weighting had the effect of giving contribution to a GO group; and Num<sub>outr</sub> was the number of genes outside the GO group x in the CEN, whose weighting provided a corresponding weight to genes outside the GO group. Therefore, as the only gene outside a large GO group, the score of the only gene within a GO group was added to the score of another gene. Notably, weighting referred to the impact of measuring connectivity in a group through the number of contributions of the gene to that GO group. A 3-fold cross-validation was applied to determine an MFS ranked list score for genes as to how well they fitted with the known gene set, and computed the AUC values for assessing the classification performances between FGR samples and normal controls. To the best of our knowledge, AUC has been introduced as a better measure for evaluating the predictive ability of machine learning in support vector machine (SVM) models compared with assessing the clinical classification performance (19). Consequently, the AUC values for GO terms were obtained, and terms with AUC >0.7 were identified to be optimal gene functions.

## Results

DEGs and GO terms. In the present study, a total of 14,398 genes were obtained from the gene expression data following standard preprocessing. Based on these genes, 115 DEGs between FGR patients and normal controls were identified using the Limma package under the thresholds of P<0.05 and llog<sub>2</sub>FoldChangel >2. As presented in Table I, all DEGs were ranked in ascending order of their P-values and the regulation directions were labeled; 58 were upregulated and 57 were downregulated. The most significant 5 DEGs were transmembrane protein 136 (P=4.09x10<sup>-5</sup>; downregulated), acid phosphatase, prostate (P=5.42x10<sup>-5</sup>; downregulated), protein tyrosine phosphatase, non-receptor type 3 (P=6.05x10<sup>-5</sup>; downregulated), thrombospondin 1 (P=7.68x10<sup>-5</sup>; upregulated)

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Table I. Differentially-expressed genes for fetal growth restriction.

Table I. Continued.

		Gene	Direction
Gene	Direction	FRV3 1	Down
TMEM136	Down	CTSV	Down
ACPP	Down	C10A	Un
PTPN3	Down	RHI HF40	Un
THBSI	Up	ZC2HC1A	Down
KCNK17	Down	FAM26D	Down
TCN2	Up	SH3TC2	Down
EDN1	Un	TIMP1	Un
NNAT	Un	SI C 3849	Down
7NF429	Down	IRP2	Down
TMFM168	Down	DSC3	Down
SLA	Un	TGERI	Up
<i>F</i> 5	Down		Op
TNNT3	Un		Down
P3H2	Down	CALVIII CELII2	Down
CATSPERR	Down	SELIES OD4E16	Down
	Up	OR4F10	Down
	Op	UK4F21	Down
CDED1	Down	LAPIMS	Up
	Up	MET	Down
KP SOKAO	Down	DUSPI	Up
APLN	Down	NPR3	Up
PGAPI	Down	PLA2G2A	Down
	Up	CHI3LI	Up
DHCR24	Down	CRH	Up
CIGALTI	Down	ERAP2	Down
SODI	Down	CIQB	Up
FBN2	Down	EXTL2	Down
HISTIHIT	Down	PSMB9	Up
ADGRA3	Down	CXCL9	Up
SLC41A2	Down	CLDN1	Up
LOX	Up	IFI44L	Up
CCDC125	Down	LGALS13	Down
FAM234B	Down	HLA-DQA1	Up
SLC20A1	Down	CXCL10	Up
ACSL1	Up	TAP1	Up
PLAC1	Down	BCL6	Up
CYR61	Up	GBP5	Up
GSTA3	Down	FPR3	Up
LGALS9B	Up	HLA-DQB1	Up
GABRA4	Down	WNT2	Down
DFNA5	Down	HTRA1	Up
QPCT	Up	KRTAP26-1	Up
DDX60L	Down	FSTL3	Up
MSL3P1	Down	SLAMF7	Up
ABCG2	Down	HLA-DQA2	Up
ADGRL3	Down	HTRA4	Up
ALDH7A1	Down	CGB2	Up
AGL	Down	SLC27A2	Down
CD68	Up	CCL8	Up
TFDP2	Down	HLA-DPB1	Un
LEP	Up	ANKRD22	Un
VWF	Up	CGB3	Un
	1		- 1

Table I. Continued.
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Gene	Direction
CP	Up
CGB1	Up
CGB5	Up
HLA-DMA	Up
CGB7	Up
ALAS2	Up
AOC1	Down
FCGR3A	Up
HLA-DRA	Up
LPL	Up
USP9Y	Down
LYZ	Up



In addition, 19,003 GO terms and 18,402 genes associated with the biological process category of GO were collected from the GO Consortium. By removing terms with gene sizes not in the range 20-1,000 and intersected DEGs <20, 109 GO terms including 115 DEGs were reserved. In order to illustrate the details of the GO annotations more clearly, a DEG enriched in one term was assigned a value of 1; otherwise, the value for the DEG in the GO term=0. The results are presented in Fig. 1, in which the yellow squares refer to 0 and red squares refer to 1.

CEN. For the purpose of further investigating the biological activities of DEGs, a CEN with 115 nodes and 6,555 interactions for FGR was visualized using Cytoscape (Fig. 2A), which indicated that all DEGs were mapped to the CEN. In particular, the topological degree for each node was calculated by the sum of the nodes to which it was connected directly, and the degree distribution is presented in Fig. 2B. It was observed that the degrees for a large number of DEGs (~55%) ranged between 56 and 60, and the trend was approximately normally-distributed. Specifically, ankyrin repeat domain 22 possessed the highest degree of 65. Apart from the number of connections for each node, the interaction strength is a parameter that has been used to evaluate interactions in the CEN. Consequently, a weight was attributed to each edge using SCC analysis (data not shown). The heatmap for weights in the CEN is presented in Fig. 2C. In the figure, squares represent edges in the CEN. Darker squares indicate larger weight values. Notably, a clear linear correlation was revealed among interactions, suggesting that the CEN exhibited good network scale properties.

Optimal gene functions. Prediction of gene function was performed using the GBA method, based on the integration between GO terms and the CEN. For each gene in a GO term, the MFS was computed. A high MFS indicated the possibility of a more optimal gene function. Therefore, all genes were ranked in descending order of the MFS and 3-fold cross-validation was performed to calculate the AUC for the

Figure 1. Functional annotation of DEGs in GO terms of fetal growth restriction. A total of 115 DEGs and 109 GO terms are presented. Red represents DEGs which were enriched in the GO term; yellow indicates that the DEG was not enriched in the GO term. DEG, differentially-expressed gene; GO, gene ontology.

GO terms, with the aim of classifying patients with FGR and normal controls. The AUC distribution among GO terms is illustrated in Fig. 3. The AUC for the majority of GO terms fell within the range 0.4-0.7, particularly 0.6-0.65. When AUC was used as a predictor of GO category membership, 78 GO terms of AUC >0.5 were obtained. It was noted that this single ranking of genes gave a mean AUC of 0.57 across all GO terms tested. In addition, 5 of the 78 GO terms had an AUC >0.7 and were denoted as optimal gene functions (Table II): Defense response (GO:0006952; AUC=0.861), immune system process (GO:0002376; AUC=0.789), response to stress (GO:0006950; AUC=0.759), cellular response to chemical stimulus (GO:0070887; AUC=0.724) and positive regulation of biological process (GO:0048518; AUC=0.720).

#### Discussion

Co-expression analysis dependent on networks has been used widely due to its good statistical confidence for individual connections, overlap with protein interactions, and mathematical convenience (20). In addition, the criterion in a CEN is generally divided into two types: Hard thresholding, which produces less robust results (21) and soft thresholding. Specifically, soft thresholding works well in network analysis (22) by combining greater sparsity with similarity to the original correlation matrix (23), for example in a weighted CEN. Pearson's correlation coefficient (PCC) is the most widely used measure for co-expression analysis. SCC is a nonparametric (distribution-free) rank statistical measure of a monotone association that is used when the distribution of data makes PCC undesirable or misleading (24). Therefore, in the present study, SCC was implemented to weight the CEN which was constructed dependent on DEGs for FGR,





Figure 2. Co-expression network for fetal growth restriction. (A) Diagram of the co-expression network. Nodes represent DEGs; edges represent interactions. (B) Node degree distribution of DEGs mapped to the co-expression network. (C) Weight distribution of edges in the co-expression network. The horizontal and vertical axes were DEGs mapped to the network, and the heatmap clarified the weight distribution for each edge. An apparent linear association was revealed. DEG, differentially-expression gene.



Figure 3. Gene function prediction performance using guilt by association analysis. The red line represents the threshold for optimal GO (AUC=0.7); the grey line indicates a GO performance considered to be good (AUC=0.5); the orange line represents the mean of all AUCs. AUC, area under the receiver operating characteristic curve; GO, gene ontology.

and its weight distribution suggested that the CEN had good scale network properties. There were 115 nodes and 6,555 interactions in the CEN, which was prepared for subsequent analysis.

Previously, various methods have been produced to expand the scale of the GBA to indirect connections, including weighting indirect connections by local topology, network propagation and topological overlap (23,25,26). The majority of these methods refer to improvement over GBA between direct connections, although they tend to perform comparably and only slightly better than direct GBA (27). The present study integrated the GBA method with CEN-associated analysis to further explore direct and indirect optimal gene functions for FGR, based on GO annotations and gene expression data. A network based-GBA or extended-GBA approach may facilitate the exhaustive examination of issues (due to being less subject to fine-tuning) compared with simple GBA. In the present study, an MFS was assigned to each gene enriched in the GO term. Ranking genes by AUC based on MFS was demonstrated to be a means of obtaining good performance from a gene function prediction algorithm, which validated the feasibility and confidence of the network-based GBA method. The results of the present study demonstrated that 78 GO terms had a good classification performance with an AUC >0.5; 5 of the GO terms had an AUC >0.7 and were defined as optimal gene functions, which included defense response, immune system process, response to stress, cellular response to chemical stimulus and positive regulation of biological process.

Specifically, defense response refers to reactions triggered in response to the presence of a foreign body or the occurrence of an injury, and results in restriction of damage to the organism attacked or prevention/recovery from the infection caused by the attack (28). Therefore, it is reasonable to infer that alterations of defense response caused by certain unexplained and unknown reasons in pregnancy may lead to the occurrence of FGR. In addition, immune system process includes any process involved in the development or functioning of the immune system, and is an organismal system which produces calibrated responses to potential internal or invasive threats (29). The immune system is a host defense system comprising a number of biological structures and processes within an organism that protect against disease, and disorders of the immune system

## Table II. GO terms with AUC >0.5.

Ranking	ID	GO term	AUC
1	GO:0006952	Defense response	0.861
2	GO:0002376	Immune system process	0.789
3	GO:0006950	Response to stress	0.759
4	GO:0070887	Cellular response to chemical stimulus	0.724
5	GO:0048518	Positive regulation of biological process	0.720
6	GO:0044459	Plasma membrane part	0.688
7	GO:0005615	Extracellular space	0.687
8	GO:0010033	Response to organic substance	0.685
9	GO:0048522	Positive regulation of cellular process	0.681
10	GO:0048583	Regulation of response to stimulus	0.681
11	GO:0050896	Response to stimulus	0.679
12	GO:0048584	Positive regulation of response to stimulus	0.678
13	GO:0044237	Cellular metabolic process	0.676
14	GO:0065009	Regulation of molecular function	0.675
15	GO:0007166	Cell surface receptor linked signal transduction	0.671
16	GO:0044249	Cellular biosynthetic process	0.666
17	GO:0042221	Response to chemical	0.652
18	GO:0050794	Regulation of cellular process	0.647
19	GO:0005488	Binding	0.646
20	GO:0032991	Macromolecular complex	0.644
21	GO:0043169	Cation binding	0.643
22	GO:0048523	Negative regulation of cellular process	0.640
23	GO:1901576	Organic substance biosynthetic process	0.638
24	GO:0080090	Regulation of primary metabolic process	0.633
25	GO:0044421	Extracellular region part	0.633
26	GO:0031988	Membrane-bounded vesicle	0.633
27	GO:0031224	Intrinsic component of membrane	0.632
28	GO:0065007	Biological regulation	0.632
29	GO:0044700	Single organism signaling	0.630
30	GO:0065010	Extracellular membrane-bounded organelle	0.630
31	GO:0048519	Negative regulation of biological process	0.627
32	GO:0051716	Cellular response to stimulus	0.627
33	GO:0005886	Plasma membrane	0.626
34	GO:0005576	Extracellular region	0.625
35	GO:0003824	Catalytic activity	0.623
36	GO:0048869	Cellular developmental process	0.623
37	GO:0005783	Endoplasmic reticulum	0.622
38	GO:0031982	Vesicle	0.622
39	GO:0044260	Cellular macromolecule metabolic process	0.621
40	GO:0007154	Cell communication	0.619
41	GO:1903561	Extracellular vesicle	0.614
42	GO:0023051	Regulation of signaling	0.610
43	GO:0031323	Regulation of cellular metabolic process	0.608
44	GO:0060255	Regulation of macromolecule metabolic process	0.607
45	GO:0023052	Signaling	0.606
46	GO:0009058	Biosynthetic process	0.605
47	GO:0043234	Protein complex	0.603
48	GO:0044425	Membrane part	0.603
49	GO:0071840	Cellular component organization or biogenesis	0.601
50	GO:0043230	Extracellular organelle	0.600
51	GO:0043226	Organelle	0.599
52	GO:0051171	Regulation of nitrogen compound metabolic process	0.592

Ranking	ID	GO term	AUC
53	GO:0043227	Membrane-bound organelle	0.592
54	GO:0005515	Protein binding	0.590
55	GO:0008152	Metabolic process	0.589
56	GO:0044765	Single-organism transport	0.576
57	GO:0043167	Ion binding	0.573
58	GO:0065008	Regulation of biological quality	0.573
59	GO:0043229	Intracellular organelle	0.567
60	GO:0016021	Integral component of membrane	0.558
61	GO:0006810	Transport	0.558
62	GO:0051179	Localization	0.555
63	GO:0050789	Regulation of biological process	0.550
64	GO:0009966	Regulation of signal transduction	0.548
65	GO:0008150	Biological process	0.546
66	GO:0005623	Cell	0.544
67	GO:0071944	Cell periphery	0.536
68	GO:0019222	Regulation of metabolic process	0.535
69	GO:0043170	Macromolecule metabolic process	0.534
70	GO:0051234	Establishment of localization	0.532
71	GO:0007165	Signal transduction	0.527
72	GO:1901360	Organic cyclic compound metabolic process	0.514
73	GO:0031090	Organelle membrane	0.512
74	GO:0016043	Cellular component organization	0.511
75	GO:0044710	Single-organism metabolic process	0.511
76	GO:0019538	Protein metabolic process	0.510
77	GO:0034641	Cellular nitrogen compound metabolic process	0.509
78	GO:0010646	Regulation of cell communication	0.507

GO, gene ontology; AUC, area under the receiver operating characteristic curve.

may lead to autoimmune diseases, inflammatory diseases and cancer (30). It had been demonstrated that cytokines drive the innate immune response, and they are logical candidates for the disruption of fetal brain development (31). Therefore, immune system process was observed to be correlated to the progression of FGR. Regarding cellular response to chemical stimulus, this gene function comprises any process that results in a change in state or activity of a cell (e.g. movement, secretion, enzyme production or gene expression) as a result of a chemical stimulus (32). Therefore, pregnant women are recommended to be alert to the possibility of chemical stimuli within their food and water intake.

In conclusion, the present study identified 5 optimal gene functions in the process of FGR. The present findings may provide insights into the pathological mechanism underlying FGR, and provide potential biomarkers for the early detection and targeted treatment of this disease. However, the potential interactions between the 5 GO terms remain to be elucidated in future studies.

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#### Availability of data and materials

The datasets used and/or analyzed during the current study are available from the corresponding author on reasonable request.

#### **Authors' contributions**

KY made substantial contributions to the design of the present study and drafted the paper. JD conducted literature searching for the paper. LL and MP conducted data analysis and manuscript revised the manuscript. All authors read and approved the final manuscript.

#### Ethics approval and consent to participate

Not applicable.

#### Patient consent for publication

Not applicable.

#### **Competing interests**

The authors declare that they have no competing interests.

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