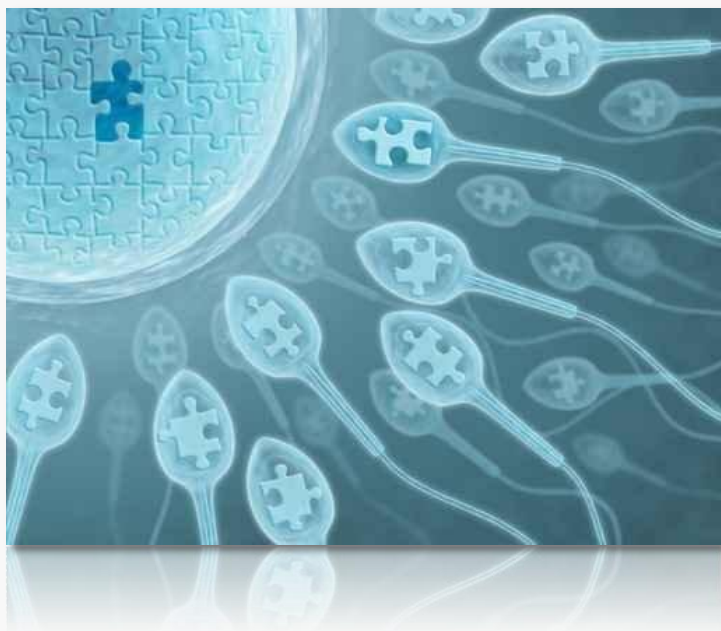




12^{èmes} journées sur l'Assistance Médicale à la Procréation de
l'Hôpital Américain de Paris - 24-25 novembre 2011



La protéomique de l'éjaculat

Projet Fertichip™

charles.pineau@rennes.inserm.fr

La Protéomique

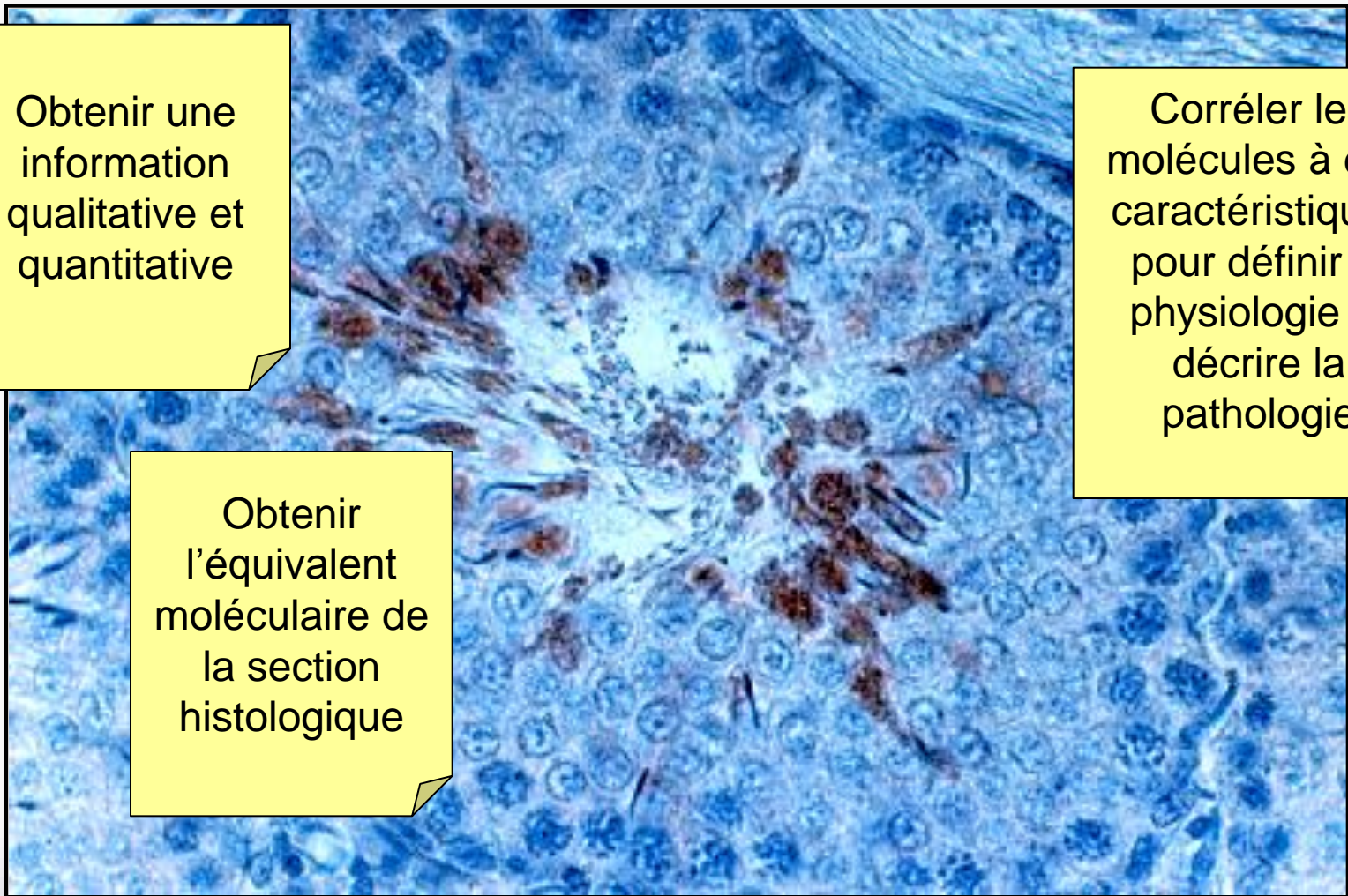
Etude des protéines à grande échelle par des méthodes de biochimie et de biologie structurale, en relation avec les données du génome

Trois domaines:

- **Cartographie et identification des protéines**
- **Analyse des interactions / recherche de partenaires**
- **Structure / Fonctions**



Pourquoi la protéomique ?

A microscopic image of tissue, likely stained with hematoxylin and eosin (H&E), showing a dense population of cells with blue nuclei and pink cytoplasm/extracellular matrix. Three yellow callout boxes with black borders are overlaid on the image, each containing text. The boxes are positioned in the top-left, bottom-left, and top-right areas of the image.

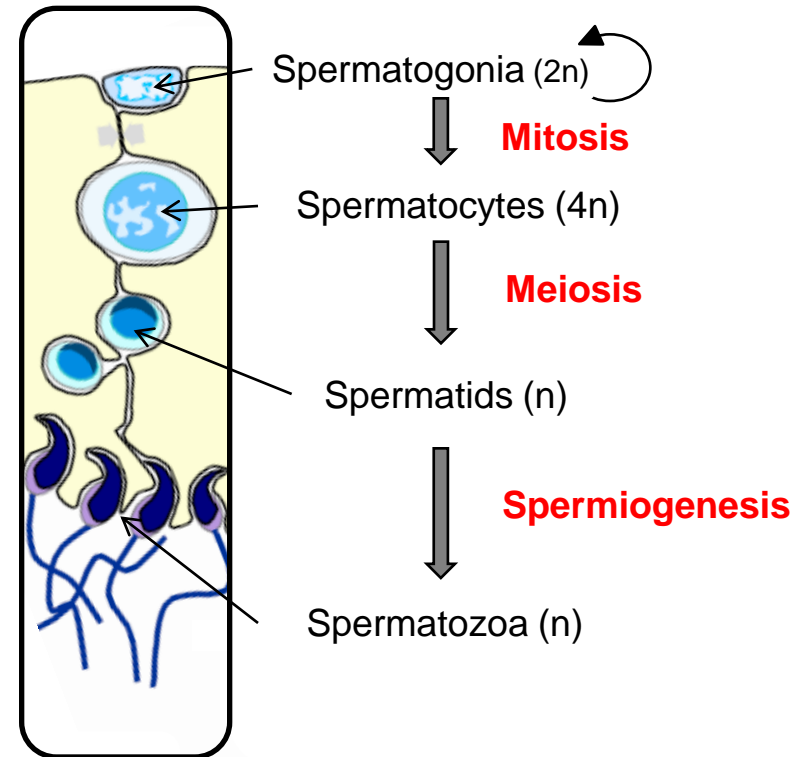
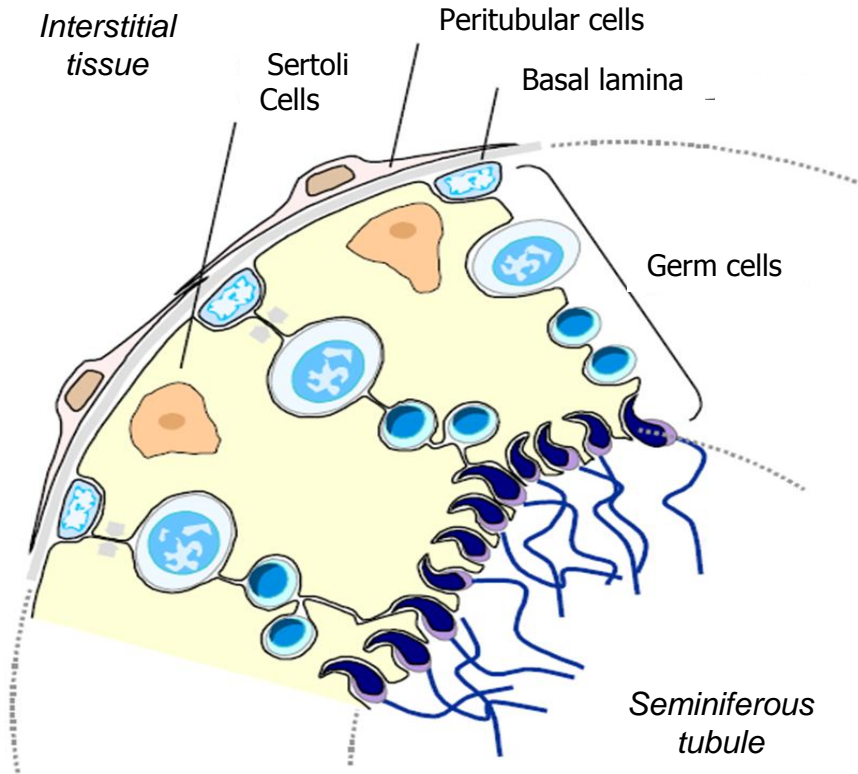
Obtenir une
information
qualitative et
quantitative

Obtenir
l'équivalent
moléculaire de
la section
histologique

Corréler les
molécules à des
caractéristiques
pour définir la
physiologie et
décrire la
pathologie

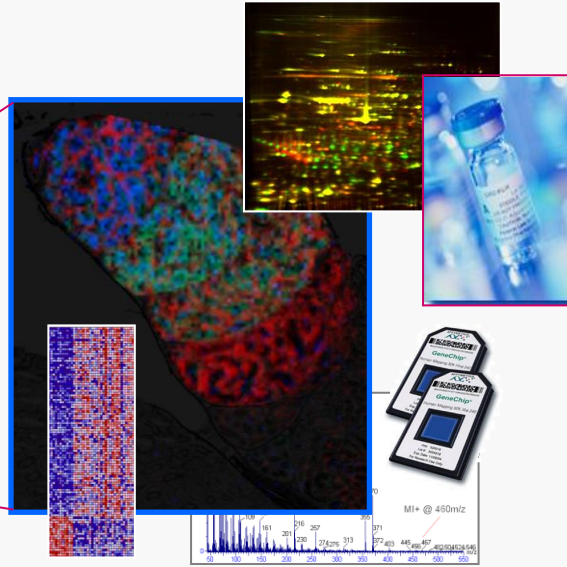
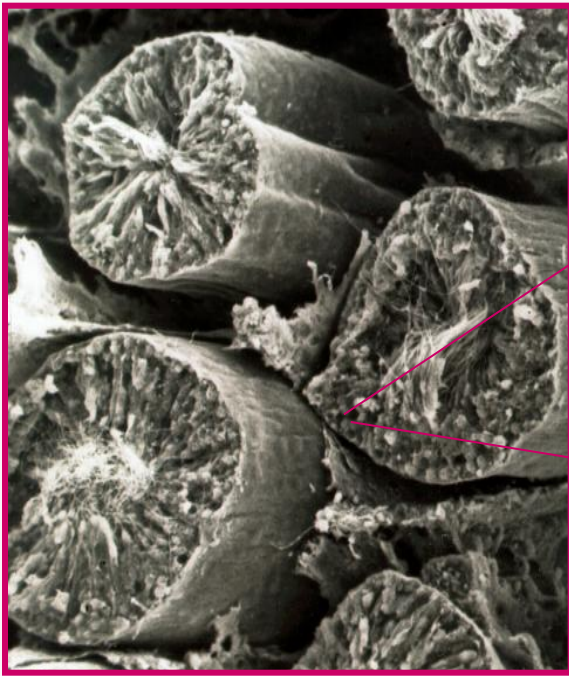
**Approche permettant l'évaluation holistique de
l'expression des gènes dans une cellule ou un tissu**

Spermatogenesis in mammals



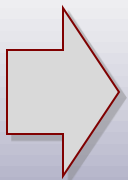
Our objective:

Decipher the intercellular crosstalks that drive germ cell maturation



The Testis Proteome Project

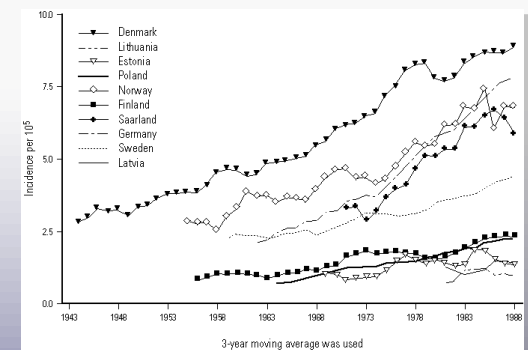
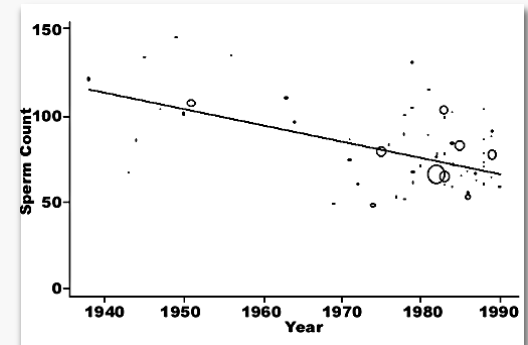
- **Establish the repertoire of testicular proteins**
- **Identify key proteins in spermatogenesis**
- **Explore testicular pathologies** (*e.g., sterilities, CIS*)



Protein markers for clinical applications

Status of male fertility

- 15% of couples have fertility problems in developed countries
 - In a couple, fertility problems are shared equally
 - Unknown etiology for 1/3 of cases
 - No cure for most of hypofertilities
-
- Sperm decline in developed countries
 - Increasing numbers of testicular cancers



Clinical care of male infertility

- **Male infertility:**

- **Obstructive Azoospermia = secretion cause**
- **Non Obstructive Azoospermia = excretion causes**

- **Obstructive azoospermia rather easy to diagnose**

- **In vitro fertilization program - NOA within couple**

- 1. Sperm extraction from testicular biopsies (TESE)**
- 2. In vitro fertilization with intracytoplasmic sperm injection (ICSI)**

Or: Third party reproduction

Or: Alternative family building

How to predict a positive biopsy outcome?



The diagnosis of Non Obstructive Azoospermia

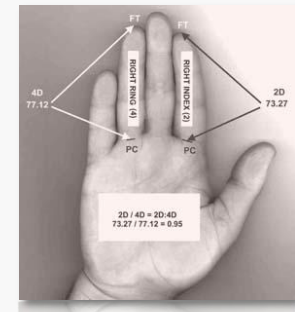
Is there a chance to retrieve live sperm cells from testicular biopsies?

○ Spermogram; sperm biochemistry; plasma FSH, LH, prolactin...

○ Physical examination parameters:



Testis size



2D:4D finger length ratio

○ Assays:



Inhibin A and B, AMH



Indirect tests with very poor predictive power



The market of Assisted Reproductive Technologies

- ✓ 12 millions IVF cycles performed per year worldwide
- ✓ >10% involve male infertile patients

Source: World Health Organization

Number of biopsies performed per year:

France	Italy	Spain	U.K.	Benelux	Brasil	USA
6 000	4 500	8 000	5500	6 000	8500	35 000

~ 60% of testicular biopsies are negative

No consensus test available to predict positive biopsy outcomes
Testicular biopsy is mandatory



The human seminal plasma: a source for potential biomarkers

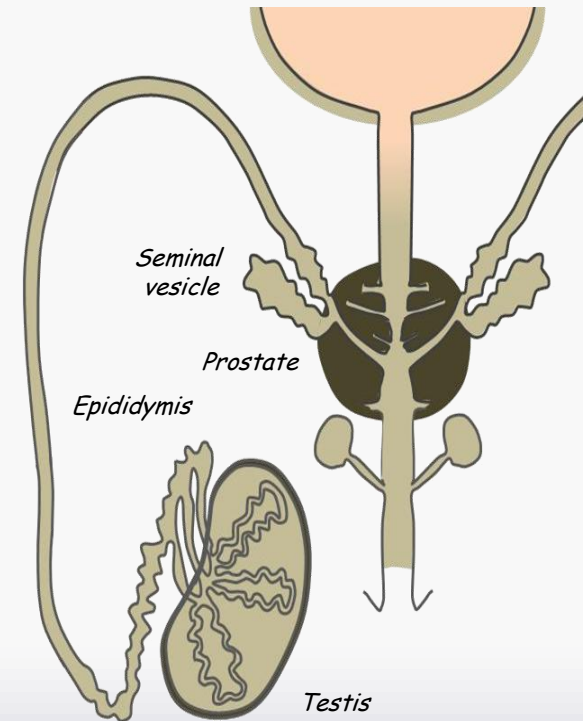
Produced by 4 major organs:

**Production of spermatozoa
and testicular fluid**

Transit and maturation of gametes

- **Energy supplying** (Proteins, Fructose...)
- **Alkaline buffering**

- **Fluidization of ejaculate** (Proteases...)
- **Motility and final maturation of spermatozoa**



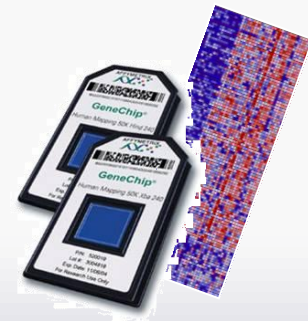
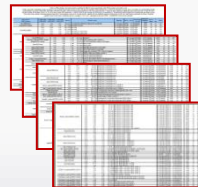
Experimental strategy

Differential analysis



iTRAQ, Label-free, DIGE...

An alternative approach



AMEN: The Annotation, Mapping, Expression and Network suite of tools Chalmel & Primig, BMC Bioinformatics, 2008

The Human seminal Plasma proteome



- > 2000 proteins identified to date
- Relatively poor mining information for male reproduction specialists
- Major effect of coagulation/liquefaction on proteome
- Several known seminal plasma proteins no yet found



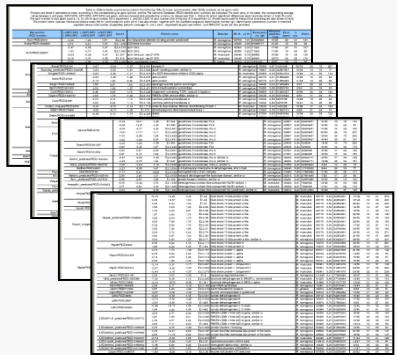
**Search for new discrete proteins
Identify organ/function markers**

Comparison of human seminal plasma proteomic studies

Studies to be integrated:

- *Utleg et al., 2003* ==> **136** proteins
- *Fung et al., 2004* ==> **46** proteins
- *Pilch & Mann, 2006* ==> **916** proteins
- *Thimon et al., 2008* ==> **148** proteins
- *Drake et al., 2009* ==> **34** proteins
- *Poliakov et al., 2009* ==> **440** proteins
- *Wang et al., 2009* ==> **626** proteins
- *Batruch et al., 2011* ==> **2022** proteins

Identification lists

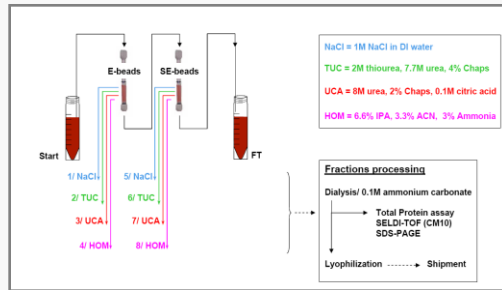


The image shows four overlapping spreadsheets, each representing a protein identification list from a different study. The spreadsheets are arranged in a descending staircase pattern from top-left to bottom-right. Each spreadsheet contains multiple columns of data, including protein names, accession numbers, and other identifiers. The text 'Identification lists' is written in red above the top spreadsheet.

Experimental strategy

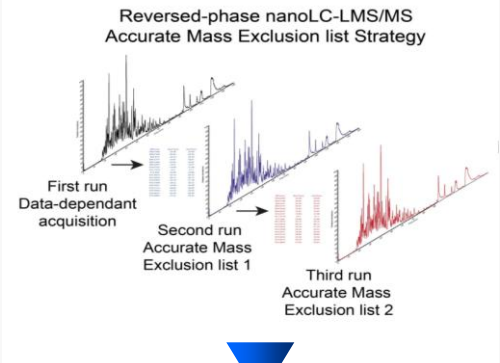


Human seminal plasma

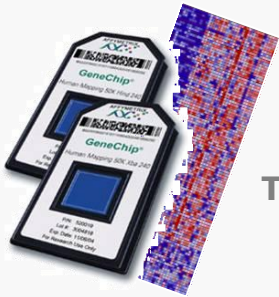


Proteominer™ fractionation

8 Fractions
+ Start
+ Flow Through

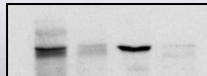
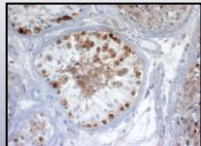


Mining with Transcriptome datasets



Candidate marker selection

Candidate marker validation



on normal and pathological seminal plasma

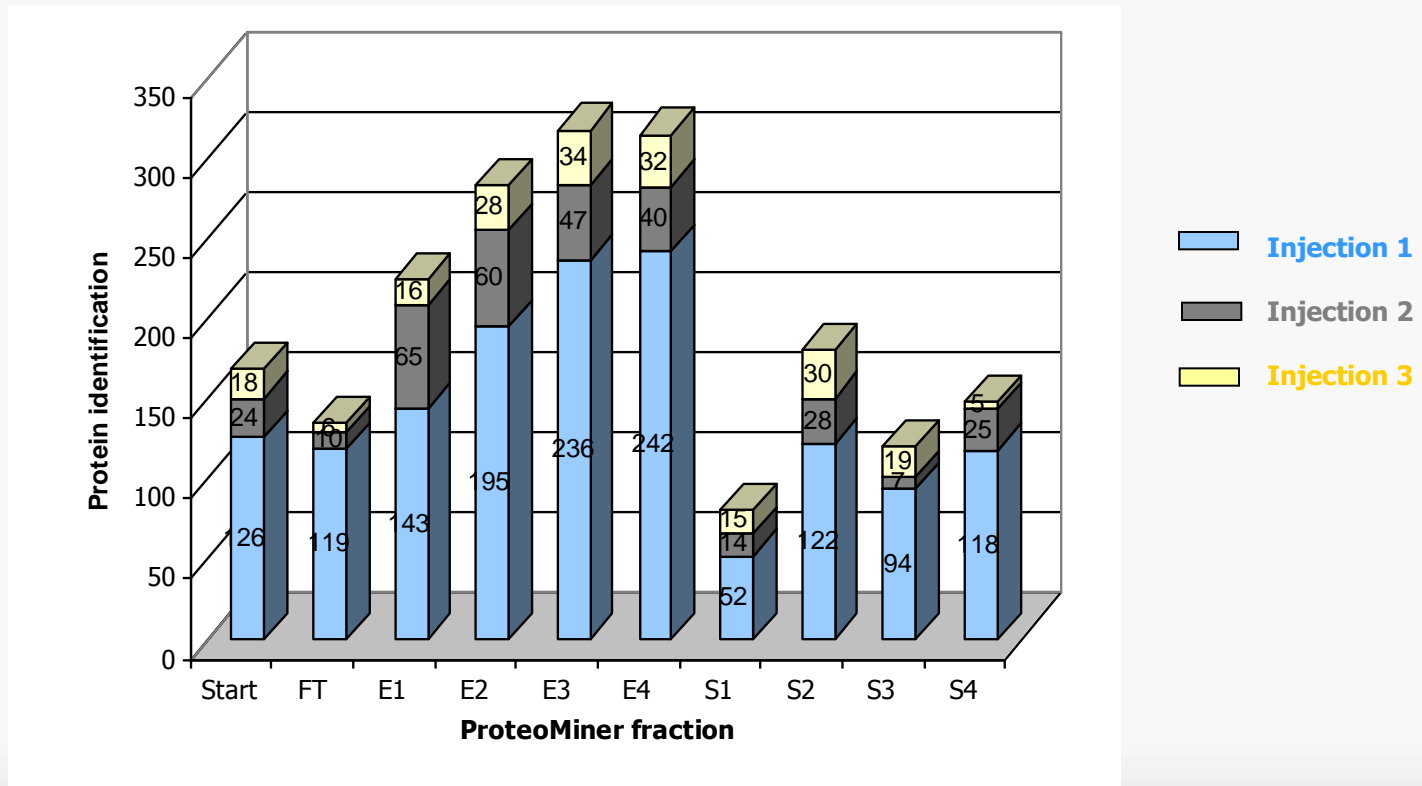


Combined Dataset



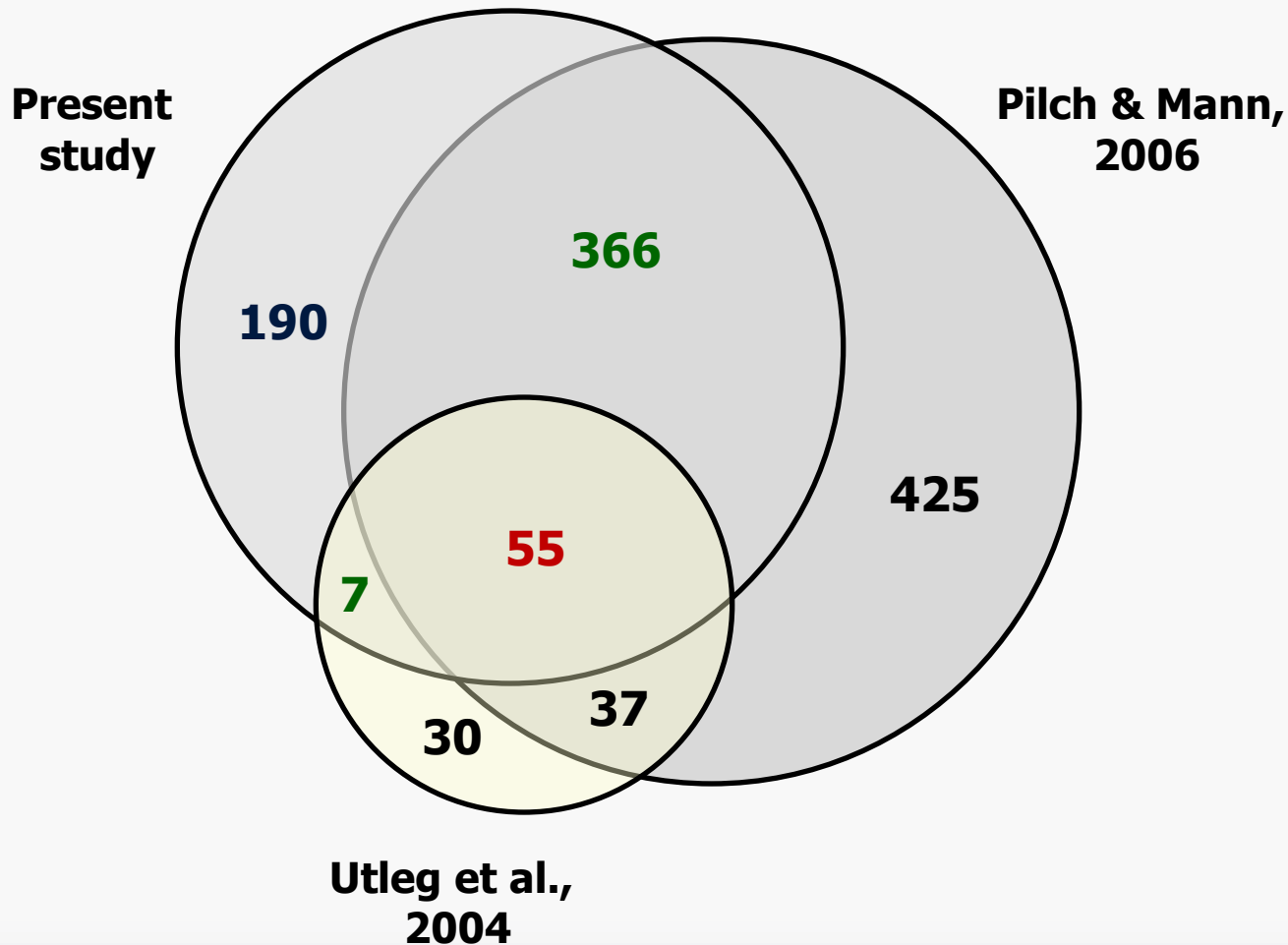
Bibliomics

Number of identified proteins from multiple injections of each fraction and dynamic exclusion of previously identified peptides



~20% more proteins in each fraction

Comparison of 3 proteomic studies on the human seminal plasma

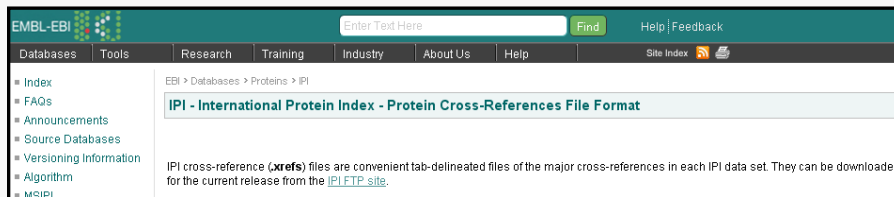
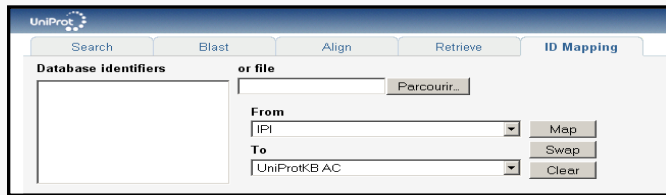
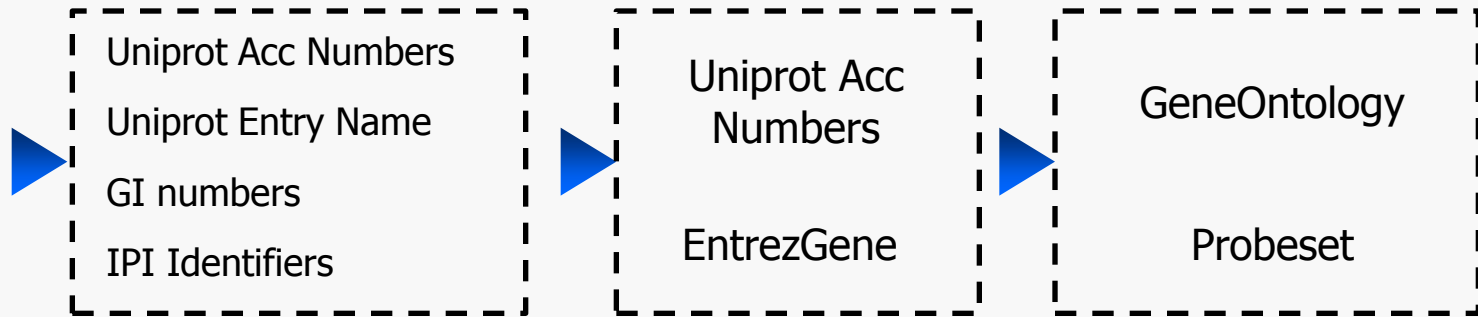
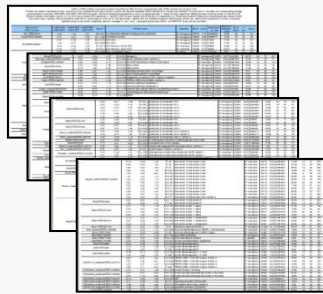


Incomplete covering of the three datasets
Relevant approach in completing the repertoire of proteins

Comparison of human seminal plasma proteomic studies

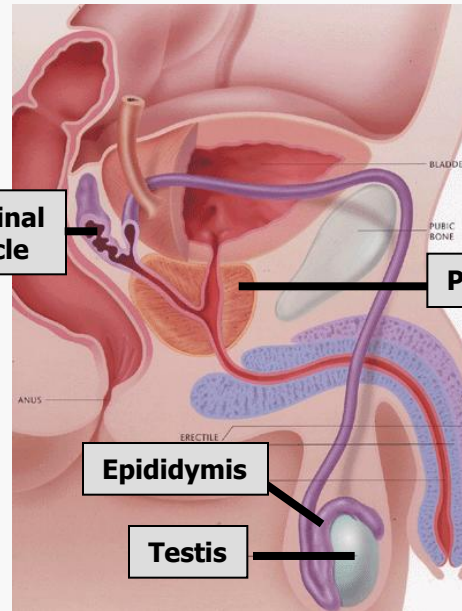
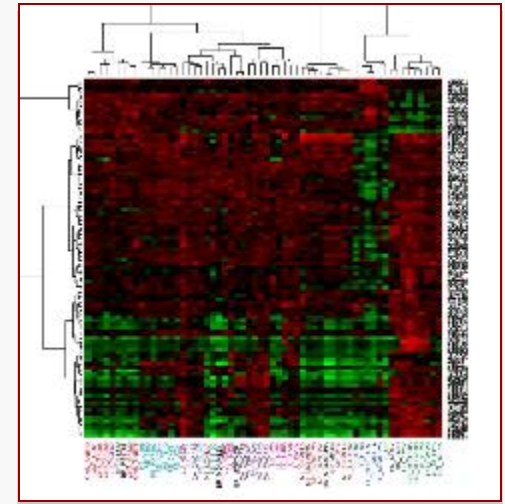
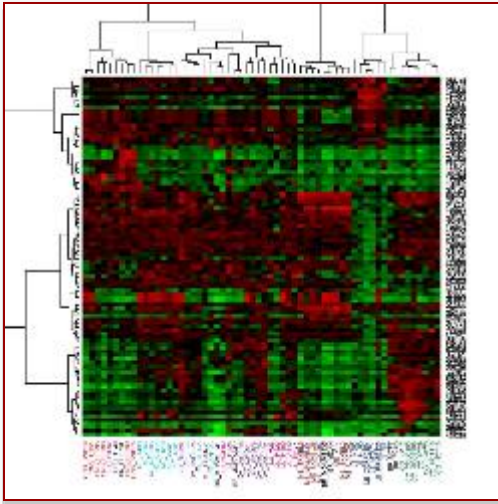
Mapping of protein identifiers

Identification lists



	Original IDs	Uniprot IDs	Entrez Gene IDs	Probe sets
Present study	668	668	676	1462
Pilch & Mann (2006)	916	875	881	1998
Utleg et al. (2003)	136	121	132	347
Fung et al. (2004)	46	48	45	99
Wang et al. (2009)	626	511	450	1024
Drake et al. (2009)	34	35	36	96
Poliakov et al. (2009)	440	443	446	949
Thimon et al. (2008)	148	146	127	298
Batruch et al. (2011)	2022	1970	2083	4771
Overall	-	2567	2331	5341

Mining protein identification list with transcriptomics datasets



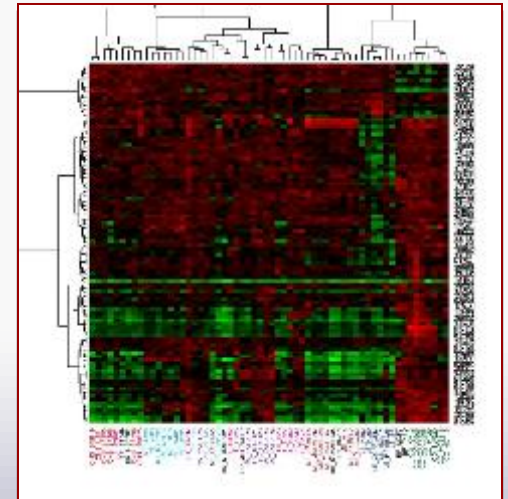
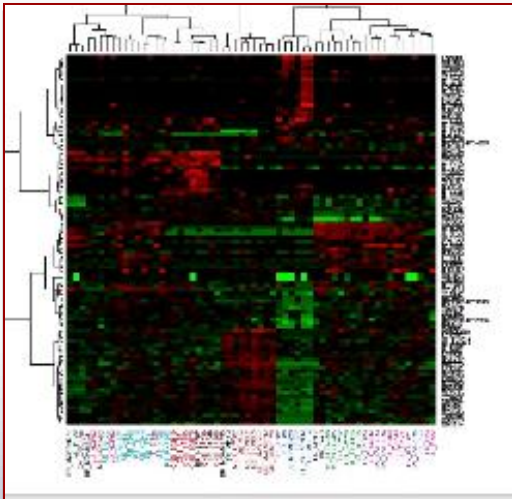
Seminal vesicle

Prostate

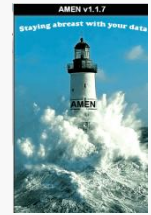
Epididymis

Testis

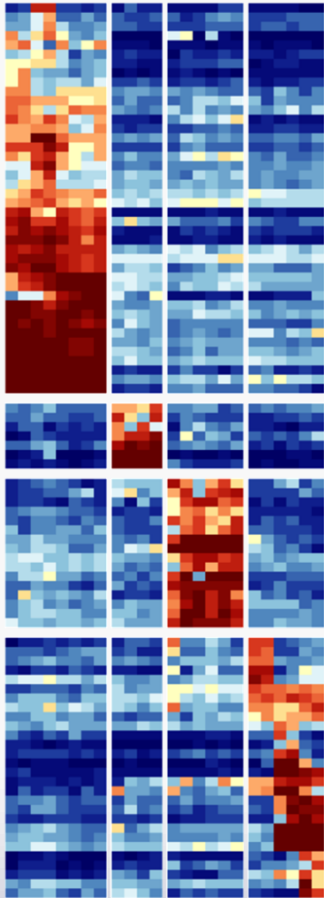
Organs involved in seminal plasma production



Mining protein identification list with transcriptomics datasets



*Chalmel & Primig,
BMC Bioinformatics 2008*

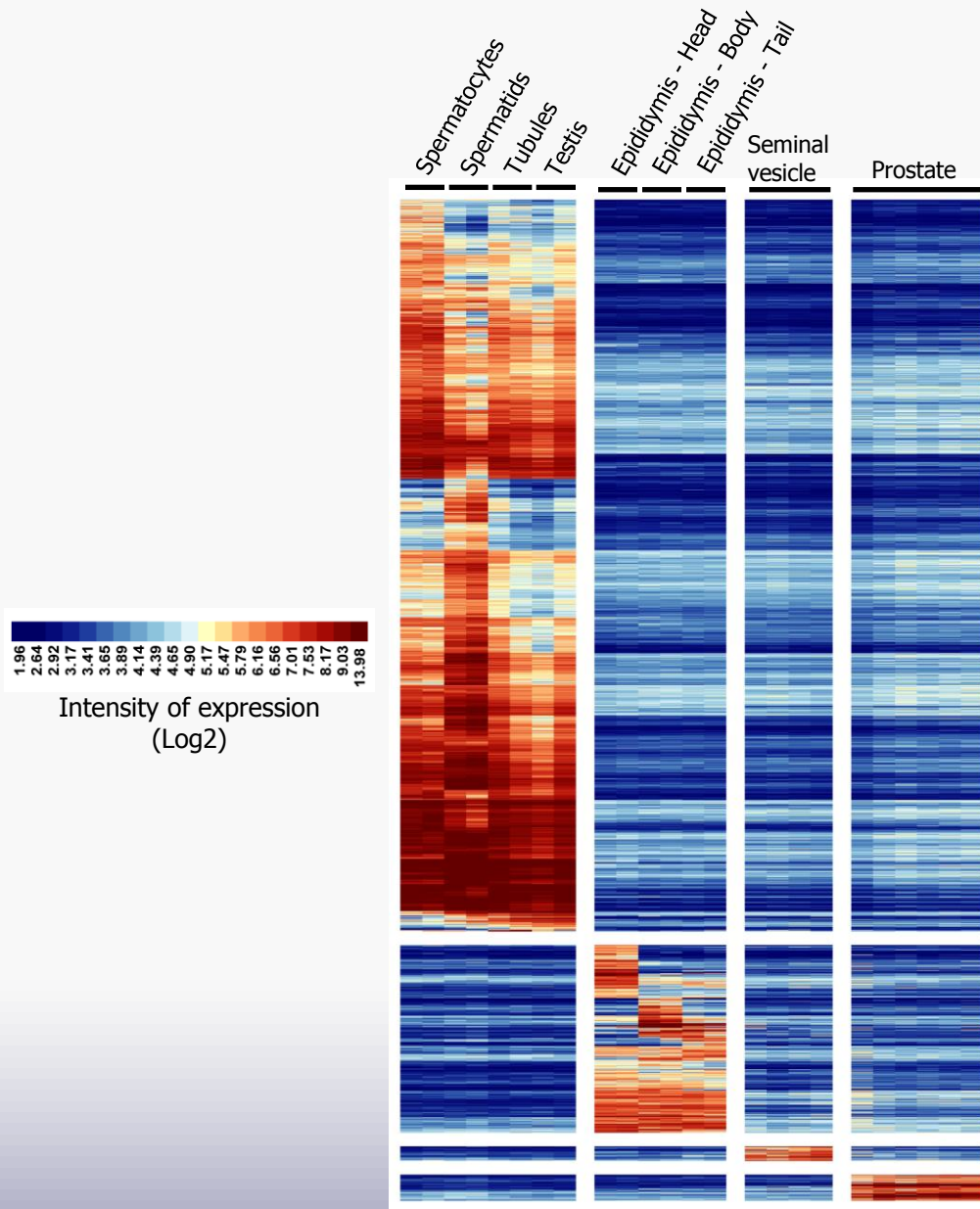


How to identify organ functional markers in the seminal plasma ?

Selection strategy

- 1. Identify overexpressed genes in organ datasets**
- 2. Verify organ-specificity of candidate genes**
- 3. Search for corresponding proteins into the protein list**

Organ-specific gene expression along the human male reproductive tract



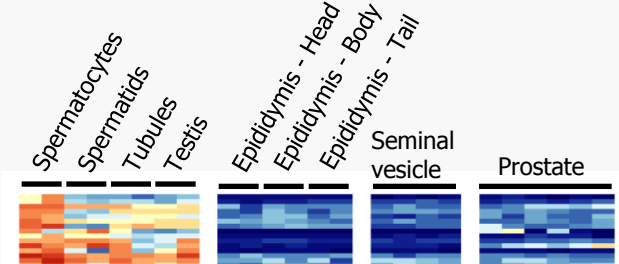
- **Detection Threshold = Mediane**
- **FC > 2**
- **Limma FDR < 1%**

1942 genes
(2669 probes)

391 genes
(684 probes)

35 genes (53 probes)
53 genes (95 probes)

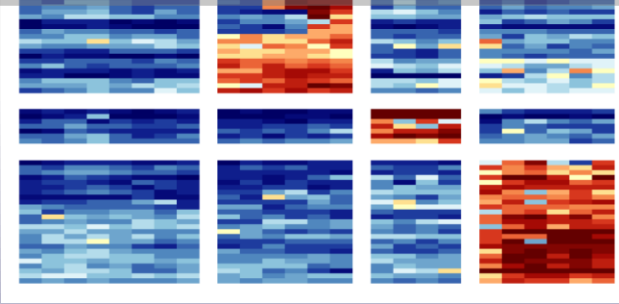
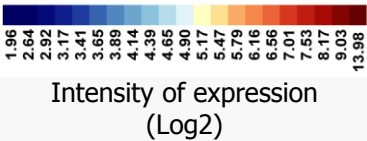
Tissue-specific protein expression along the human male reproductive tract



Potential protein markers

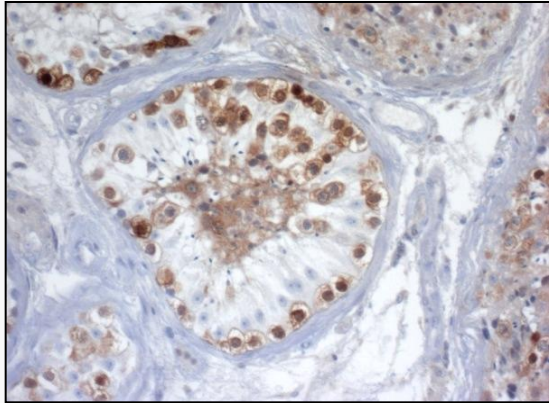
Verify the germ cell origin of the proposed candidates

?



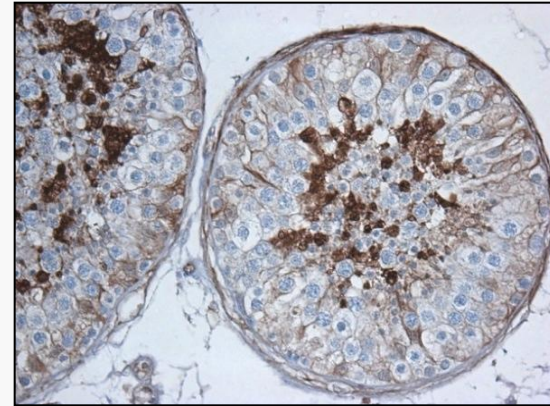
7
19

Validation of predicted markers of the urogenital tract



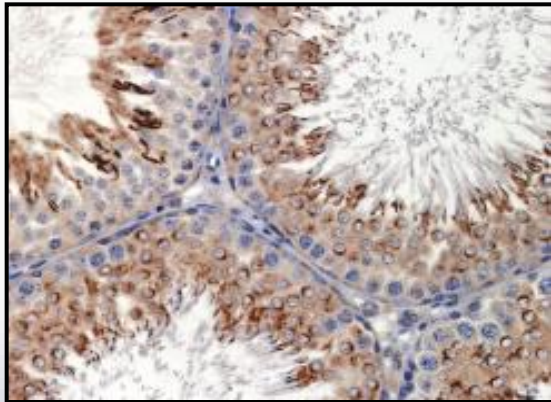
TKTL1

Secreted by spermatids



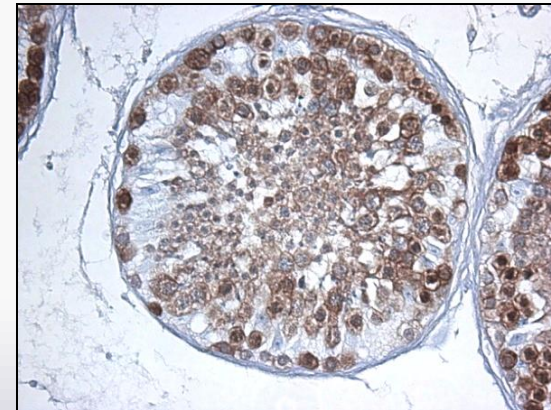
PGK2

Meiotic and post-meiotic



PGAMB

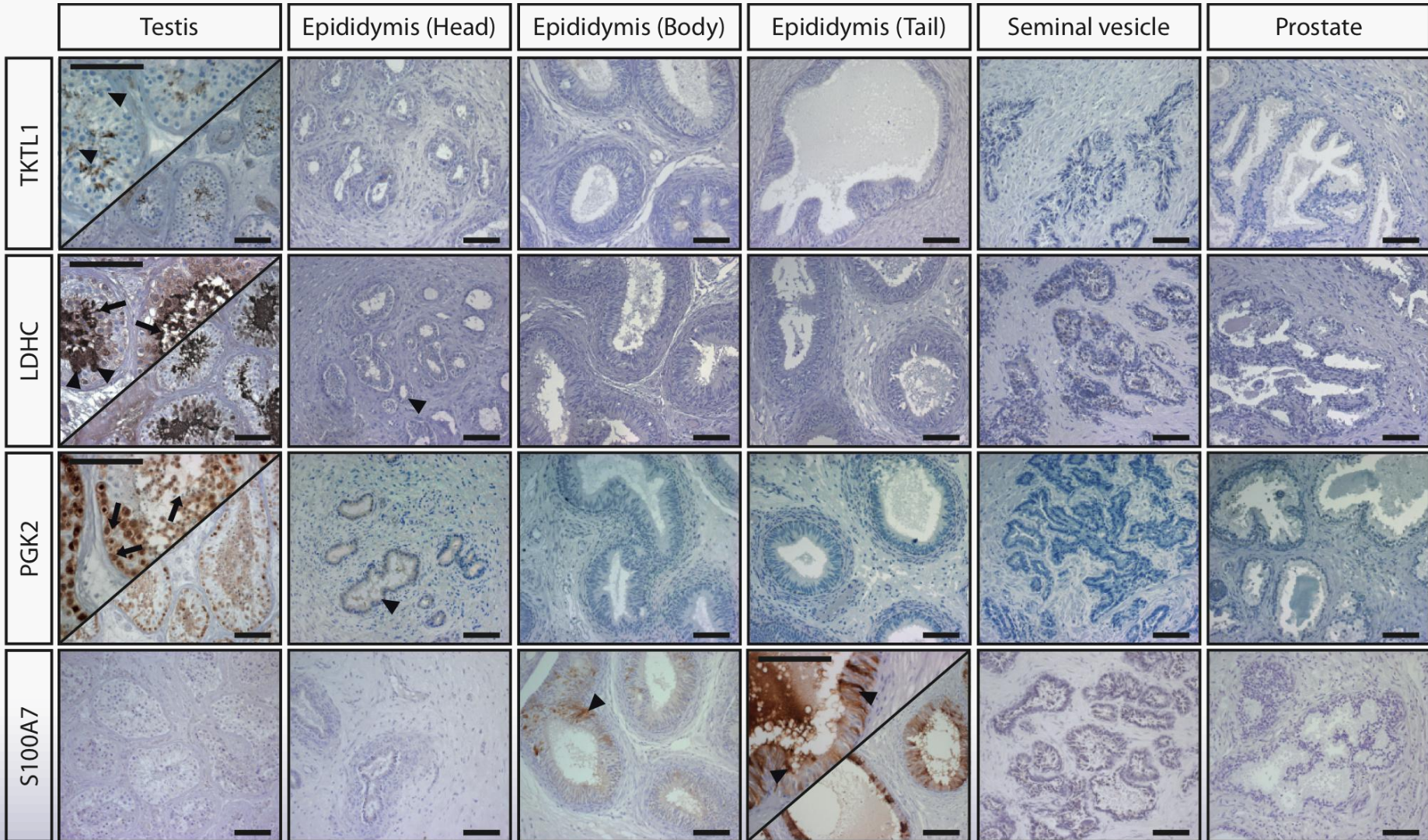
Meiotic and post-meiotic



LDHC

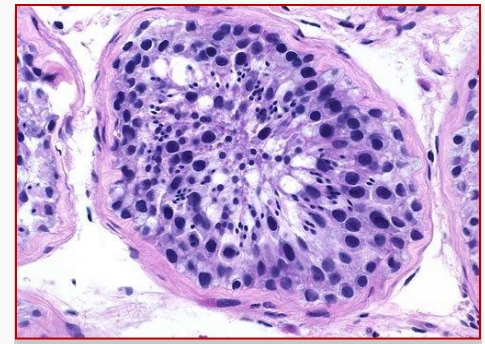
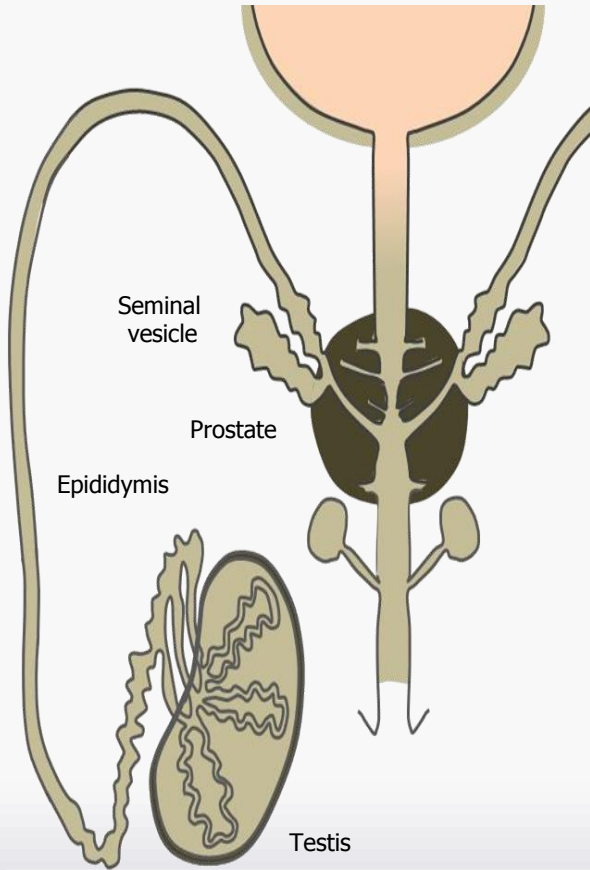
Meiotic and post-meiotic

Validation of germ cell line biomarkers

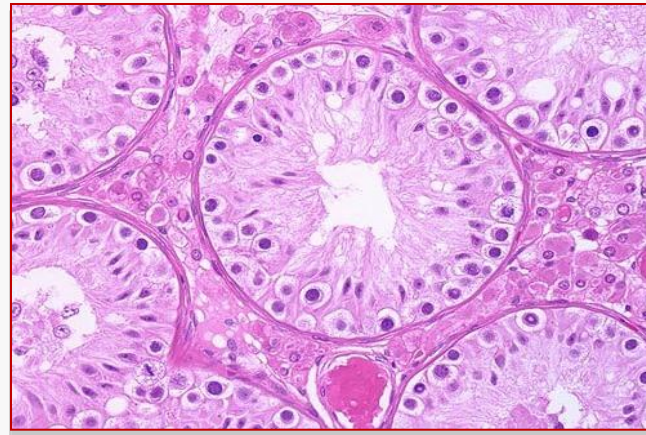


Most frequent Pathological situations

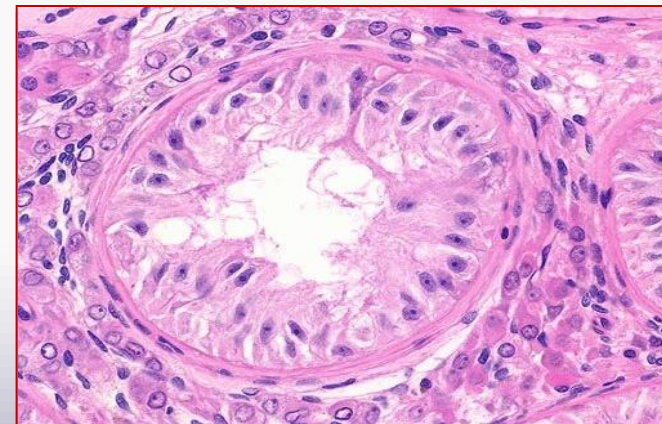
Non Obstructive Azoospermia



Normal spermatogenesis



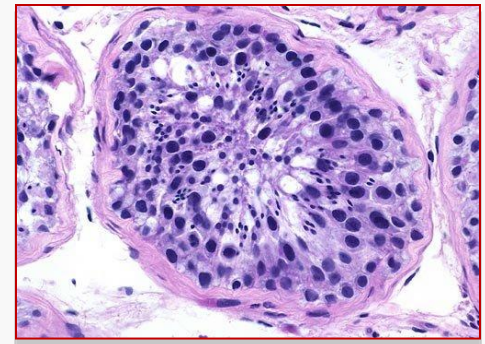
Maturation arrest



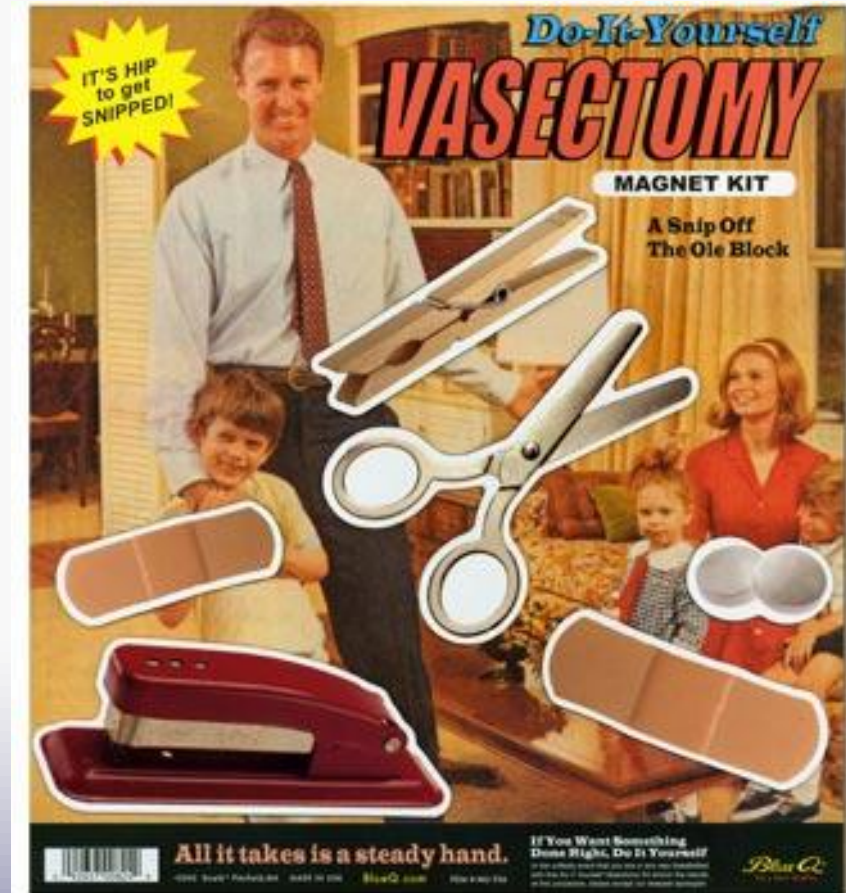
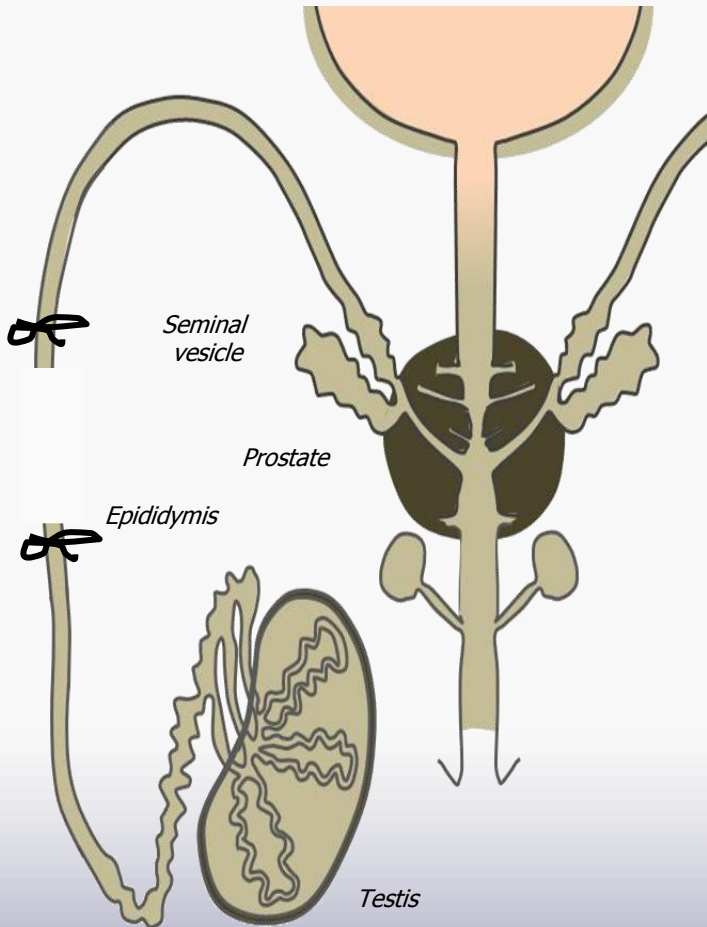
Sertoli-cell-only syndrome
(germ cell aplasia)

Most frequent Pathological situations

Obstructive Azoospermia



Normal spermatogenesis



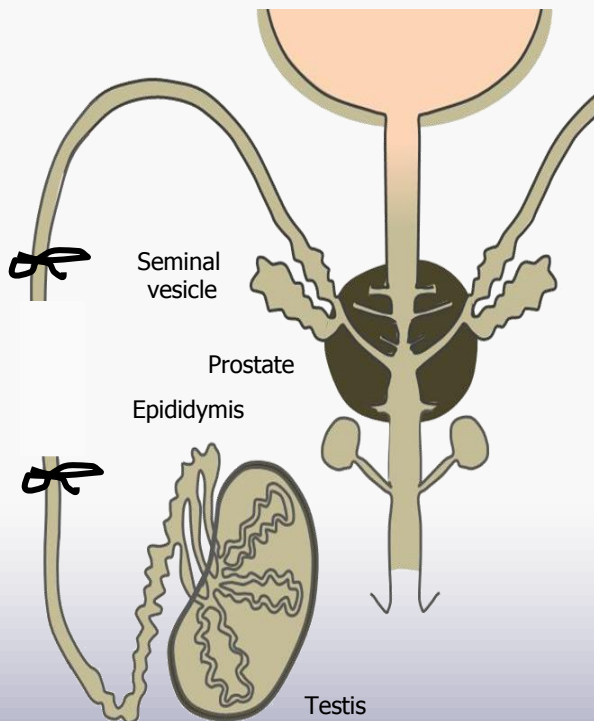
Validation of germ cell line biomarkers

Is it possible to discriminate each type of seminal plasma by assessing the presence or absence of several germ cell-specific biomarkers using ELISA assays?

Example 1:

Germ cell-specific TKTL1

protein secreted by spermatids



1- 4: normal
5: unilateral obstruction
6 -7: "CBAVD" ($\Delta f508$)
8-9: maturation arrest



10 -13: Normal (set #2)
14-16: Post-vasectomized
17-18: Sertoli-cell-only syndrome

Validation of germ cell line biomarkers

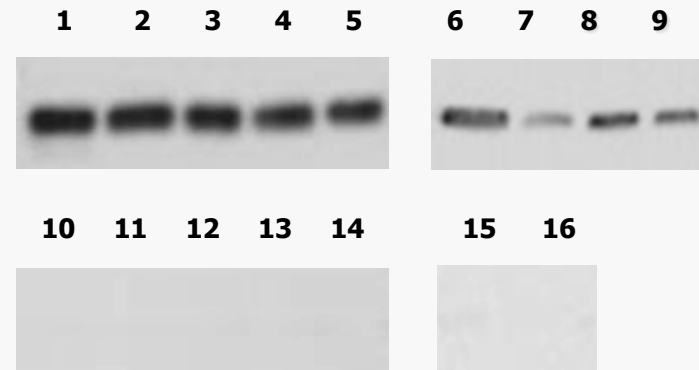
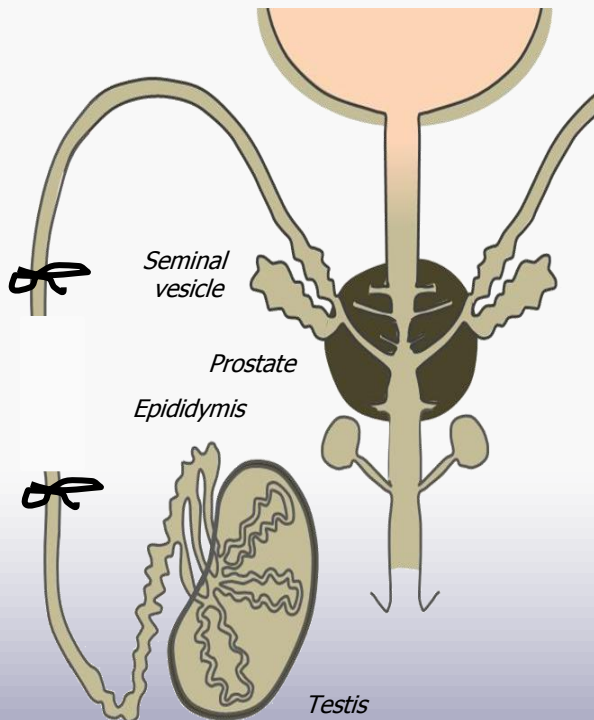
A blind retrospective study

Is it possible to predict the outcome of testicular biopsies?

Example 2:

Germ cell-specific PGK2

Meiotic & post-meiotic



1-9: NOA with positive biopsies

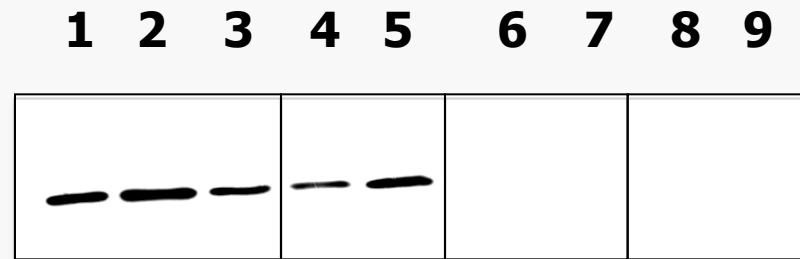
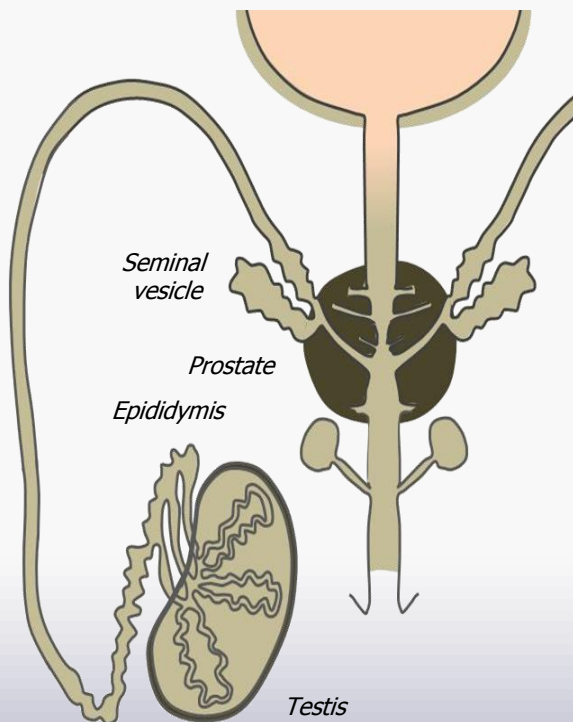
10-14: NOA with negative biopsies

15,16: Post-vasectomy (used as control)

Additional validation of testis biomarkers

Example 3:

PAEP
Sertoli cell-specific

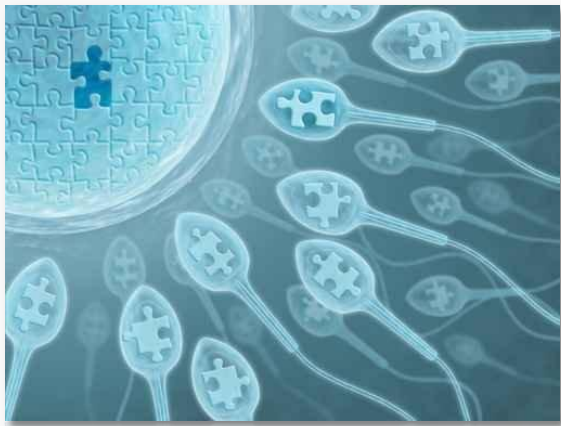


1- 3: normal

4-5: Sertoli cell-only syndrome

6-7: "CBAVD" ($\Delta f508$)

8-10: Post-vasectomy



The Fertichip™ concept

Patent application Inserm Transfert

Objective:

Assess the presence of mature germ cells in the testes of azoospermic patients

Method:

Detect the presence of germ cell-specific proteins in the seminal plasma using specific assays

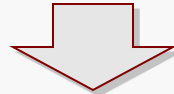
Output:

Provide a probability score that a testicular biopsy will be positive

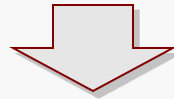
The Fertichip™ project



Selection, cloning of 91 germ cell specific genes and expression of recombinant proteins



Production and validation of monoclonal antibodies against each candidate protein



Development of sensitive ELISAs

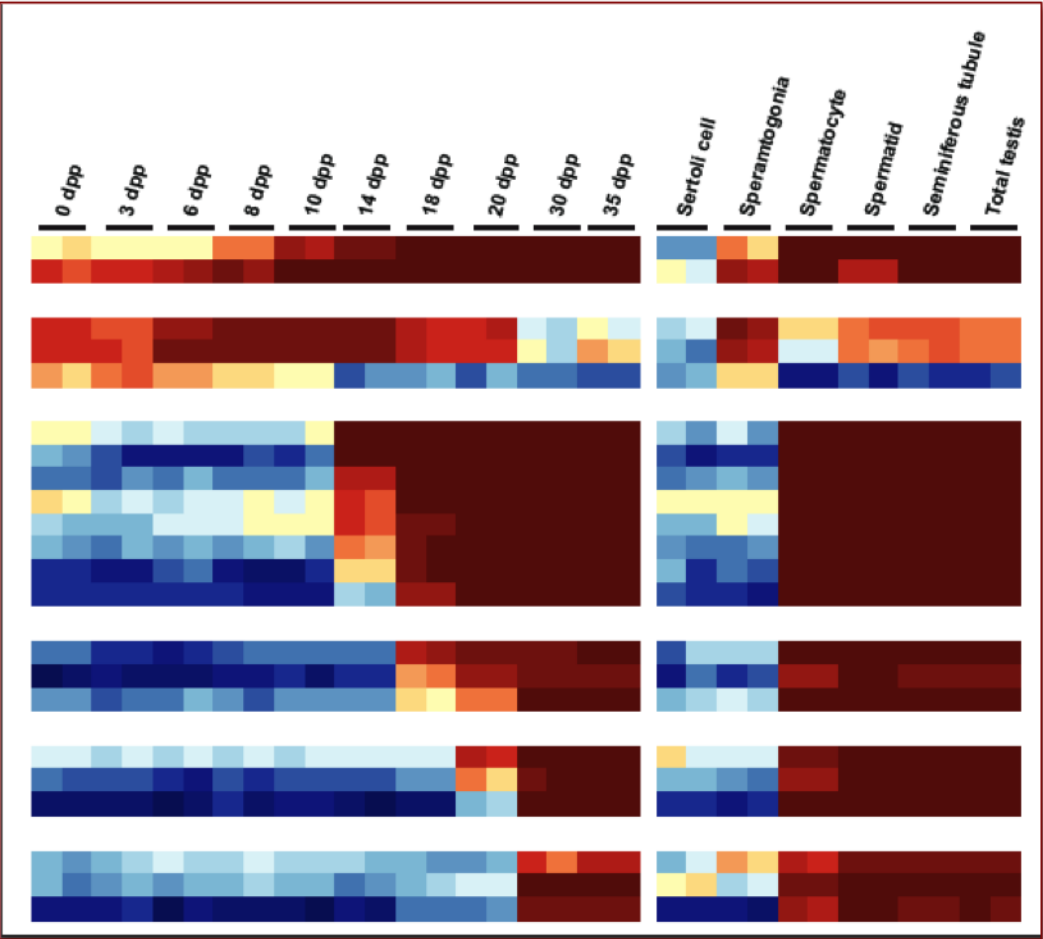


Development of a multiplex suspension bead assay (Luminex™)



Germ-cell specific markers in seminal plasma

Example of 22 top-priority candidates:



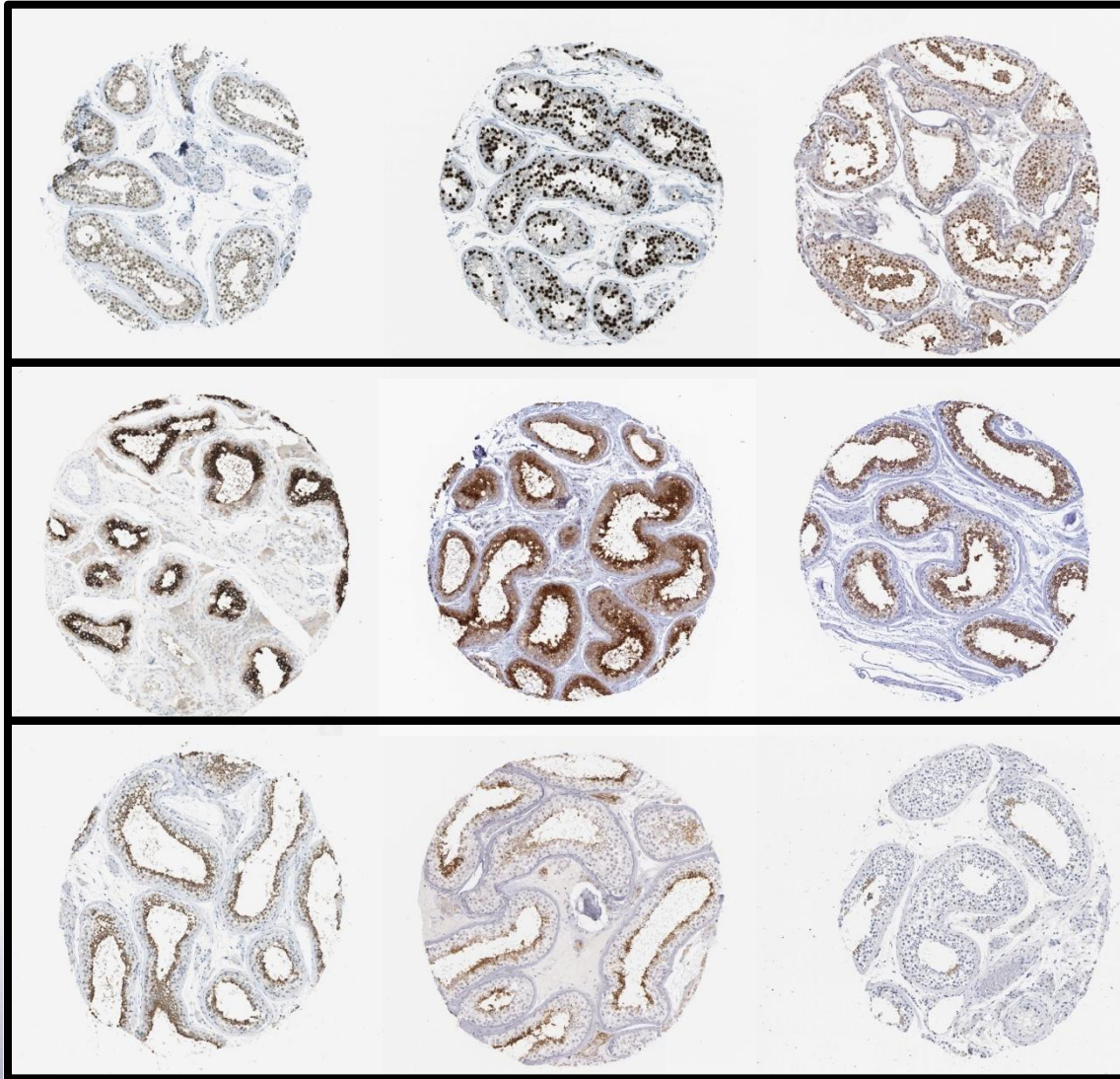
Total GC line

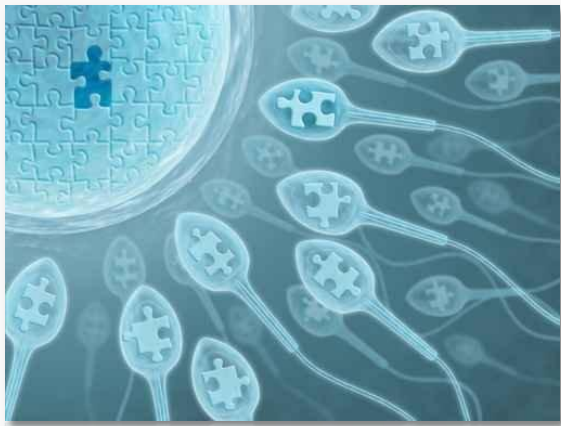
Spermatogonia

Spermatocytes/spermatids
(meiosis)

Spermatids

Ongoing: validation of germ-cell specific antibodies





The Fertichip™ assay

Validation step 1

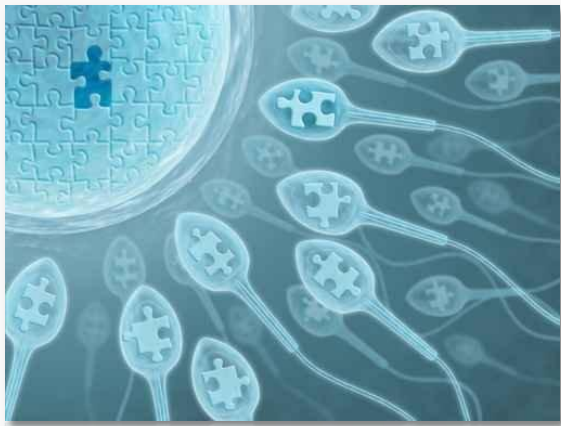
Is it possible to discriminate each type of seminal plasma by assessing the presence or absence of several germ cell-specific biomarkers using ELISA assays?

Cohorts: 400-1200 normal + pathological samples

Validation step 2

Is it possible to predict the outcome of testicular biopsies?

Cohorts: > 600 samples



The Fertichip™ assay

Validation steps

A complement to physical examination by the clinician to:

- ❑ ***Avoid unnecessary biopsies***
- ❑ **Improve patient counselling**
- ❑ **Diminish psychological costs**
- ❑ **Reduce the financial cost of ART medicine**

Thanks



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**Jacques Auger
Thomas Freour**

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SCIENTIFIC

Claire Dauly

BIO-RAD

Luc Guerrier

Luminex.

Cédric Plachot

PADAM

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Josy-Anne Froger
Yannick Danger
Patrice Chiron**

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Participation au projet Fertichip™

Thomas Fréour
Paul Barrière
Nantes

Jacques Auger
Paris Cochin

Patrice Clément
Blanc Mesnil

François Vialard
Florence Boitrelle
Poissy

Catherine Rongières
Catherine Celebi
Strasbourg

Daniel Colleu
Rennes

Louis Bujan
Roger Mieusset
Toulouse

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