

# Long-term transcriptomic changes in patients with suicidal ideation

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## BACKGROUND AND AIMS

- ➤ Suicide is a complex multifactorial event resulting from an interaction between biological and psychosocial factors.
- Identifying the molecular basis of **suicidal ideation (SI)** and its improvement may provide targets for the development of novel treatment strategies and help better identify individuals at risk of suicide.

**AIMS:** To longitudinally characterize the transcriptomic and methylomic dynamics of peripheral blood mononuclear cells (PBMCs) from hospitalized individuals with mood disorders admitted due to acute SI.

**HYPOTHESIS:** Improvement of SI is associated with significant changes in blood gene expression, DNA methylation levels, and cell composition that can inform the development of biomarkers and novel treatments for SI.

### METHODS

#### Sample



N = 42 hospitalized individuals with mood disorders (BD or MDD)

Beck Scale for Suicide Ideation (BSS) ≥ 4

Harris County Psychiatric Center (HCPC), Houston, TX

#### Clinical assessments

#### Admission (T1)

- Demographic data
- BSS
- Columbia-Suicide Severity Rating Scale (C-SSRS), Recent version
- NIDA Quick Screen V1.0 and NIDA-Modified ASSIST V2.0
- Montgomery-Asberg Depression Rating Scale (MADRS)
- Young Mania Rating Scale (YMRS)
- Barratt Impulsiveness Scale (BIS)

- BSS
- MADRS
- YMRS
- C-SSRS, Recent version
- Hollingshead Socieconomic Rating Scale
- Childhood Trauma Questionnaire (CTQ)

Discharge (T2)\*

\*SI improvement → ≥ 50% reduction in BSS scores from T1



RNA-sequencing (bulk), n=15 with improved SI (T1 and T2): Illumina, 2x 150bp, single index, ~20M raw paired-end reads/sample, covariates: age, sex; FDR < 0.10.

Single-cell (sc) RNA sequencing, n=3 with improved SI (T1 and T2): 10X Genomics® Chromium<sup>TM</sup> 3' gene expression; target # cells/sample: 3,000; # reads/cell: 50,000.

<u>Genome-wide DNA methylation</u>, n=16 with improved SI (T1 and T2): Infinium EPICMethylation BeadChip v1 (Illumina).

### RESULTS

## Table 1. Sample Demographics and Suicidal Ideation Improvement Improved SI Unimproved SI (n = 26) (n = 16)

	(n = 26)	(n = 16)	freedom)	p 10.10.0
Age, median (IQR)	40.5 (20)	47 (19.75)	W = 254.5	0.2331 <sup>a</sup>
Sex				
Female (%)	26.9%	12.5%	n/a	0.4424 <sup>b</sup>
Male (%)	73.1%	87.5%		
Race (%)				
Black or African American	42.3%	31.3%	χ2 (1) = 0.1517	0.6969 <sup>c</sup>
White or Caucasian	57.7%	68.8%		
Ethnicity (%)				
Hispanic	26.9%	31.3%	$\chi^2$ (1) = 0.00	1.0000°
Non-Hispanic	73.1%	68.8%	χ2 (1) – 0.00	
Sexual Orientation (%)				
Heterosexual	73.1%	93.75%	n /o	0.1231 <sup>b</sup>
Non-Heterosexual	26.9%	6.25%	n/a	
Currently Employed (%)	23.1%	18.8%	n/a	1.0000 <sup>b</sup>
Years of Education, Mean (SD)	12.8 (2.91)	11.2 (2.68)	t (33.9) = -1.84	0.0746 <sup>d</sup>

BSS - Beck Scale for Suicidal Ideation; IQR - Interquartile Range; SD - Standard Deviation; SI - suicidal ideation. aWilcoxon Ranked Sum; bFisher's Exact test; cChi-square test; dIndependent Student's t-test. SI omprovement was defined as ≥ 50% reduction in BSS scores between admission and discharge.

#### **Table 2.** Clinical Variables and Suicide History

	Improved SI (n = 26)	Unimproved SI (n = 16)	Test Statistic (degrees of freedom)	<i>p</i> -value
BSS Baseline, mean (SD)	17.8 (8.31)	21.3 (6.36)	t = 1.52 (37.94)	0.1364 <sup>c</sup>
BSS Discharge, median (IQR)	1 (4.75)	16 (7.75)	W = 404	< 0.0001 <sup>a</sup>
Duration of Hospitalization (Days), median (IQR)	5 (2.00)	5 (3.25)	W = 209.5	0.8061 <sup>a</sup>
Diagnoses (%) Bipolar Disorder Major Depressive Disorder Unspecified Mood Disorder	25% 31.3% 43.7%	20.8% 41.7% 37.5%	n/a	0.8431 <sup>b</sup>
Inpatient medications (%) Antidepressants Antipsychotics Anxiolytics Mood Stabilizers	76.0% 80.0% 60.0% 32.0%	93.3% 86.7% 86.7% 20.0%	n/a n/a n/a n/a	0.2237 <sup>b</sup> 0.6913 <sup>b</sup> 0.1523 <sup>b</sup> 0.4861 <sup>b</sup>
MADRS Baseline, mean (SD)	32.3 (7.09)	34.7 (8.68)	t = 0.923 (27.12)	0.3643 <sup>c</sup>
MADRS Discharge, median (IQR)	8 (10.75)	25 (12.00)	W = 382.0	< 0.0001 <sup>a</sup>
YMRS Baseline, median (IQR)	2 (3.75)	2 (6.00)	W = 201.0	0.8647 <sup>a</sup>
YMRS Discharge, median (IQR)	1 (4.5)	3.5 (6)	W = 266.5	0.1217 <sup>a</sup>
Previous Suicide Attempt (%)	87.5%	80.8%	n/a	0.6829 <sup>b</sup>
Number of Previous Suicide Attempts, median (IQR)	2 (2.75)	2 (3.25)	W = 241	0.3860 <sup>a</sup>
Lethality of Most Recent Attempt (%) No Physical Damage Minor Physical Damage Moderate Physical Damage Moderately Severe Physical Damage Severe Physical Damage	56.3% 18.8% 6.3% 18.8% 0.0%	34.6% 30.8% 19.2% 15.4% 0.0%	n/a	0.4551 <sup>b</sup>
Lethality of Highest Attempt (%) No Physical Damage Minor Physical Damage Moderate Physical Damage Moderately Severe Physical Damage Severe Physical Damage	23.1% 19.2% 30.1% 19.2% 7.7%	25.0% 6.3% 18.8% 31.3% 18.8%	n/a	0.5342 <sup>b</sup>
Number of Previous Inpatient Admissions, median (IQR)	1.5 (7.75)	2.5 (3.50)	W = 210	0.9684 <sup>a</sup>
Readmission 30 days after Discharge (%)				
Yes No	11.5% 88.5%	25.0% 75.0%	n/a	0.3971 <sup>b</sup>

BSS - Beck Scale for Suicidal Ideation; IQR - Interquartile Range; MADRS - Montgomery-Asberg Depression Rating Scale; SD - Standard Deviation; SI - suicidal ideation; YMRS — Young Mania Rating Scale. <sup>a</sup>Wilcoxon Ranked Sum; <sup>b</sup>Fisher's Exact test; <sup>c</sup>Independent Student's t-test.

## CONCLUSIONS

- > SI improvement was associated with significant blood transcriptomic and methylomic changes;
- ➤ SI improvement was associated with major blood cell changes, including monocyte subpopulations;
- Next steps: assessments in unimproved SI individuals, full sample size (n=200), replication.

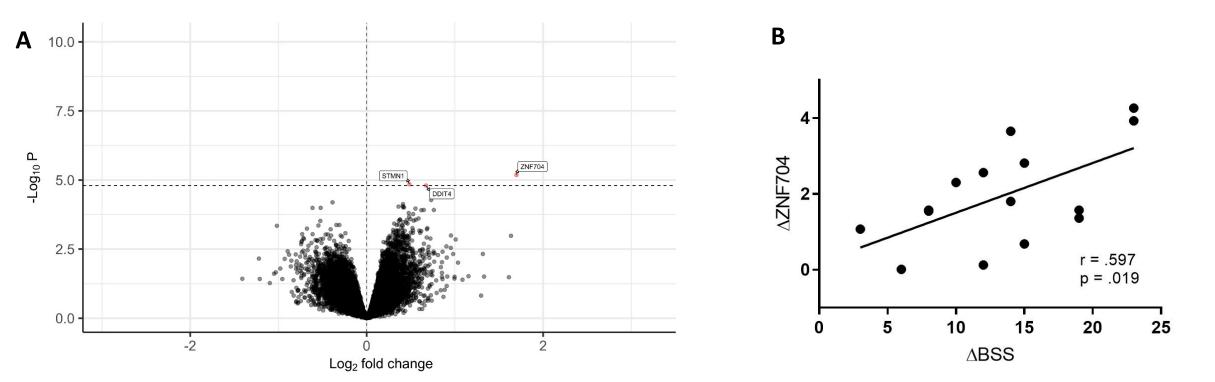


Figure 1. Bulk RNA-sequencing results comparing T1 and T2 among n=15 individuals that showed SI improvement (>= 50% reduction in BSS scores). A) Volcano plot depicting the three significant genes at FDR=0.10: ZNF704 (logFC=1.70), STMN1 (logFC=0.49), and DDIT4 (logFC=0.67) B) Correlation between change in SI symptoms (BSS) and change in the expression levels of the top-ranked gene ZNF704.

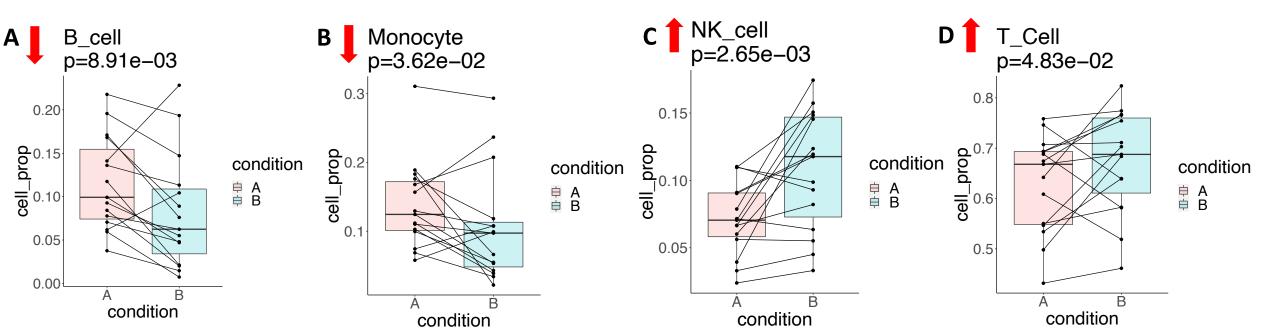


Figure 2. Cell deconvolution analysis of PBMCs between T1 (condition A) and T2 (condition B) in n=15 individuals that showed SI improvement (>= 50% reduction in BSS) from bulk RNA-sequencing data. A) B-lymphocytes; B) monocytes; C) Natural Killer (NK) cells; D) T-lymphocytes.

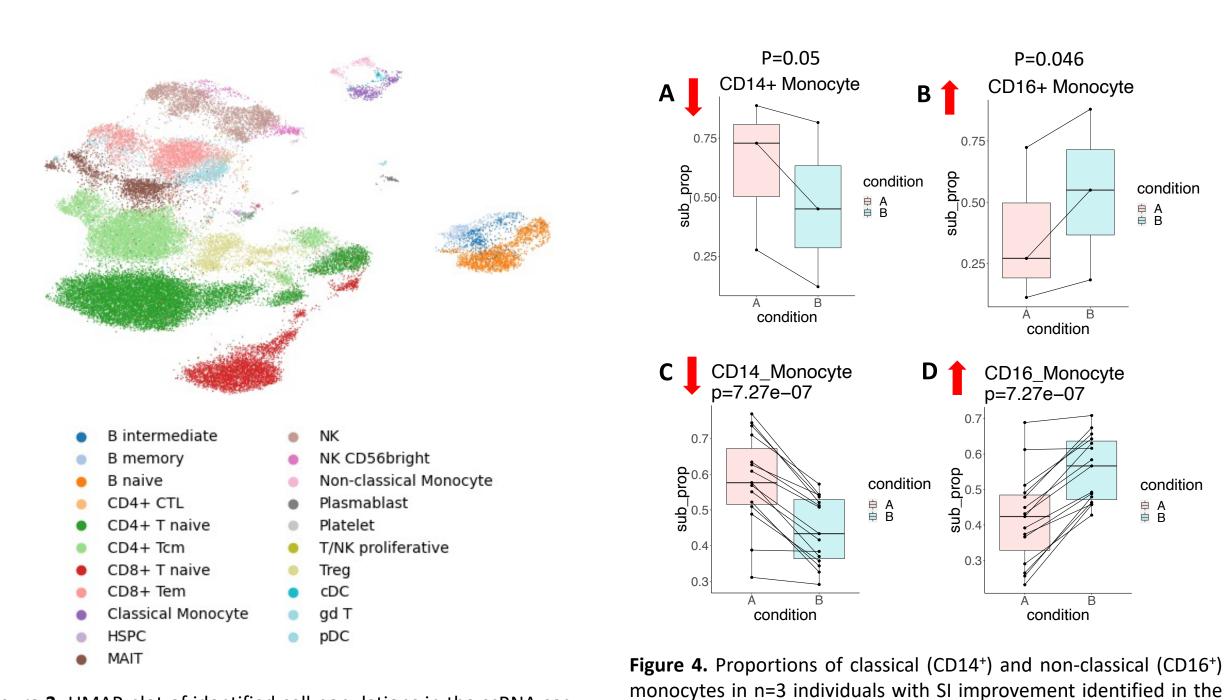
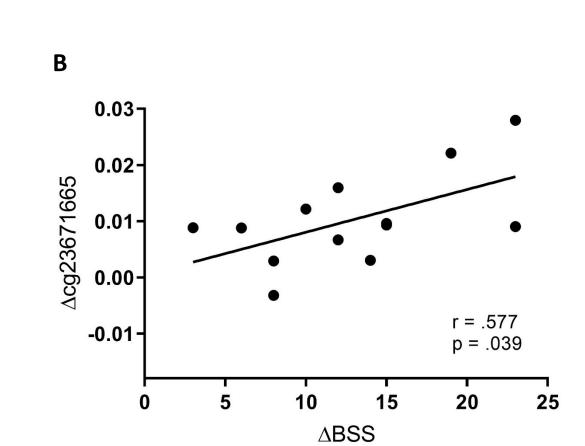


Figure 3. UMAP plot of identified cell populations in the scRNA-seq analyses of PBMCs (n=3 individuals with SI improvement).

scRNA-seq (A and B) and replicated by cell deconvolution analysis in n=15 individuals using bulk RNA-seq (C and D).



**Figure 5. A)** Manhattan plot showing epigenome-wide differences in DNA methylation between T1 and T2 in n=16 individuals who significantly improved SI symptoms (no FDR corrected probes identified). **B)** Correlation between change in SI symptoms (BSS) and change in methylation (beta levels) of the top-ranked probe cg23671665 (annotated to *LUC7L2* gene, log2FC=-0.69, p=4.69x10<sup>-5</sup>).

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