ORIGINAL ARTICLE



p53 mutation regulates PKD genes and results in co-occurrence of PKD and tumorigenesis

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ABSTRACT

Objective: Polycystic kidney disease (PKD) is the major cause of kidney failure and mortality in humans. It has always been suspected that the development of cystic kidney disease shares features with tumorigenesis, although the evidence is unclear.

Methods: We crossed p53 mutant mice (p53N236S, p53S) with Werner syndrome mice and analyzed the pathological phenotypes. The RNA-seq, ssGSEA analysis, and real-time PCR were performed to dissect the gene signatures involved in the development of disease phenotypes.

Results: We found enlarged kidneys with fluid-filled cysts in offspring mice with a genotype of G3mTerc¹⁻WRN⁻¹⁻p53^{S/S} (G3TM). Pathology analysis confirmed the occurrence of PKD, and it was highly correlated with the incidence of tumorigenesis. RNA-seq data revealed the gene signatures involved in PKD development, and demonstrated that PKD and tumorigenesis shared common pathways, including complement pathways, lipid metabolism, mitochondria energy homeostasis and others. Interestingly, this G3TM PKD and the classical PKD1/2 deficient PKD shared common pathways, possibly because the mutant p53S could regulate the expression levels of PKD1/2, Pkhd1, and Hnf1b.

Conclusions: We established a dual mouse model for PKD and tumorigenesis derived from abnormal cellular proliferation and telomere dysfunction. The innovative point of our study is to report PKD occurring in conjunction with tumorigenesis. The gene signatures revealed might shed new light on the pathogenesis of PKD, and provide new molecular biomarkers for clinical diagnosis and prognosis.

KEYWORDS

p53 mutation; telomere dysfunction; polycystic kidney disease; tumorigenesis

Introduction

Polycystic kidney disease (PKD) is a disease where enlarged kidneys develop characteristic fluid-filled cysts. Cysts in the liver or pancreas, cerebral aneurysms, abnormal cardiac development, and hypertension are also frequently found in PKD patients. Genetic studies have shown that

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approximately 80% of autosomal dominant PKD (ADPKD) is caused by mutations in the PKD1 gene (encoding polycystin-1, PC1), and about 20% of ADPKD was due to mutations in PKD2 gene (encoding polycystin-2, PC2). It has been extensively shown that PC1/2 act as the key regulators for calcium homeostasis, and the dysfunction of PC1/2 might play an essential role in calcium imbalance and cAMP signaling, resulting in the development of PKD phenotypes^{1,2}. Increasing evidence suggests that PC1/2 proteins might interact with key regulators in cell cycle regulation, especially in cell proliferation and secretion-related signaling pathways¹. PKD1 has been found to play a role in preventing immortalized proliferation of renal cells through p53 and JNK, suggesting a novel link between PKD1

and p533. It has also been found that the tumor suppressor protein p53 participates in a negative feedback loop to regulate PKD1 gene expression, thus preventing renal cysts formation4. Interestingly, another study has shown that Mekk1 acts as a co-repressor with p53 to downregulate PKD1 transcription. This PKD1 repression could be promoted by stress stimuli, suggesting that abnormally elevated stress responses might directly downregulate the PKD1 gene, possibly causing haploinsufficiency and cyst formation⁵. In an endothelial cell-culture system, elevated expression of mechanosensorv polycystins in human carotid atherosclerotic plaques is associated with p53 activation and disease severity⁶. At the animal level, Bcl2 knockout mice manifested PKD and PKD phenotypes that could not have been rescued by p53 deficiency^{7,8}. The mutant p53 protein, especially the missense point mutation, is the major form of p53 deficiency in human disease. It promotes the progress of disease by both loss and gain of function9. However, no evidence has been found to connect mutant p53 with the progress of PKD.

Werner syndrome (WS) protein is a member of the RecQ helicase family implicated in the maintenance of genome stability. WRN plays an essential role in telomere DNA replication, and WRN defects cause human pathologies linked to cancer predisposition and premature aging, such as WS¹⁰⁻¹². By masking the chromosome ends from the DNA repair machinery through repression of the ATM/ATR signaling pathways, telomere DNA has a crucial function in DNA damage response (DDR). Telomere DNA is elongated by telomerase and protected by the protein complex shelterin, which regulates telomere length and protects telomeres from activating DDR¹³.

The mouse model of WS is established by double knockout of WRN and the RNA component of telomerase. The late generation (G4-6) of WS mice with both telomerase and WRN deficiency ($mTR^{-/-}WRN^{-/-}$) exhibited the clinical features observed in WS patients¹⁴⁻¹⁶. Our previous study has shown that ALT tumorigenic cell lines derived from senescent WS MEFs gained the same point mutation in tumor suppressor gene Trp53, encoding a mutant p53 protein known as p53N236S (p53S hereafter). The p53^{S/S} mice manifested highly invasive lymphomas and metastatic sarcomas with dramatically increased double minute chromosomes¹⁷.

We introduced this p53S mutation back into WS mice to study the intrinsic role of p53S in modulating WS symptoms, by crossing mice carrying p53S mutation with WS mice. Surprisingly, we found that the offspring of p53S and WS mice (*mTR*-/-*WRN*-/-*p53*S/S) manifested both PKD and tumor phenotypes. Here we report the phenotypes of this novel

mouse model. By RNA-seq and ssGSEA analysis, we have identified the gene signatures and pathways that connect mutant p53 and telomere dysfunction with the development of PKD.

Materials and methods

Mice

Transgenic p53S mice and WS ($mTR^{-/-}WRN^{-/-}$) mice were bred to generate $mTR^{-/-}WRN^{-/-}p53^{S/S}$ mice. We crossed mice carrying p53S mutation ($p53^{S/S}$) with WS mice ($mTR^{-/-}WRN^{-/-}$) and obtained the first generation of mice with telomerase knockout, WRN knockout, and p53S mutation ($G1\,mTR^{-/-}WRN^{-/-}p53^{S/S}$), referred to as G1 triple mutation (G1TM). The mice were then bred generation-by-generation to obtain G2 and G3 TM mice. The telomerase knockout and WRN knockout mice (double mutation, DM) and wild type (WT) mice were used as control. All experiments were carried out with the approval of the Kunming University of Science and Technology and Use Committee (Approval ID: M2015-011) in accordance with the guidelines of the Association for Assessment and Accreditation of Laboratory Animal Care.

MEF cells

The MEF cells with different genotypes were harvested in 13.5 days and cultured in Dulbecco's modified Eagle's medium (DMEM) with 10% fetal bovine serum (FBS) at 37 °C with 5% $\rm CO_2$ and 3% $\rm O_2$. To maintain their original characteristics, only the early passages (\leq passage 5) of MEF cells were used for experiments.

Pathology analysis

Mouse kidney samples were fixed in 4% neutral buffered formalin for 6 hours, then alcohol-dehydrated and paraffinembedded. The paraffin-embedded tissue blocks were sectioned into 4 $\,\mu$ m slices for later experiments. For hematoxylin-eosin (HE) staining, the tissue sections were deparaffinized and rehydrated, and H&E staining was applied. The H&E stained slides were observed via microscopy and the histological changes and kidney lesions were evaluated by pathologists.

RNA-seq and gene expression signature analysis

Cell or tissue (sarcoma and cystic kidney) samples were collected and sent for commercia RNA-seq service (Novogene, China). Briefly, the total RNA was extracted and enriched by oligo-dT labeled magnetic beads, and used to construct a library for RNA-seq. The sequenced reads (raw reads) were evaluated for quality control. The adapters and low quality reads were filtered to obtain clean reads. The clean data were then aligned with the reference mouse genome by TopHat2. The RNA-seq counts were annotated and the FPKM file was generated for bioinformatic analysis.

The Bioinformatics ExperT SYstem (BETSY) was applied to automate the development of workflows¹⁸. The single sample gene set enrichment analysis (ssGSEA)¹⁹was applied to analyze the RNA-seq data. Hallmark (designed for well-defined biological states and processes), C2 (BIOCARTA, KEGG, REACTOME, etc.), and C5 (GO) gene sets from the Molecular Signatures Database²⁰were used for ssGSEA analysis. The heat maps were plotted with BETSY by centering with mean but without hierarchical clustering. The common pathways between cystic kidneys and tumors were ranked and plotted based on their ssGSEA scores.

Ingenuity pathway analysis

The essential genes involved in PKD development were selected according to the literature 1,21 . The fold change in their expression between G3TM and G3DM was calculated from RNA-seq data. After applying the cutoff (2 ×) for gene expression fold change, the remaining genes and their fold changes, and P values were imported to Ingenuity Pathway Analysis (IPA) software. The knowledge base of IPA were used to draw their expression regulation and interaction network. The network with largest numbers of genes is included, such as developmental disorders, immunological diseases, inflammatory diseases, inflammatory response, and renal and urological disease.

Quantitative real-time PCR analysis

RNA was isolated from cell or tissue samples, and cDNA was synthesized by reverse transcription. Real-time PCR was performed on an ABI Prism 7300 sequence detection system with SYBR-Green PCR master mix according to the manufacturer's instructions (Applied Biosystems, CA). The primers used are as follows:

PKD1, forward primer: 5'-CCCTCTCGGAGCAGAA TCAAT-3', reverse primer: 5'-GTGTTGAGCTAATGGGC AGG-3':

PKD2, forward primer: 5'-GGGGAACAAGACTCATG GAAG-3', reverse primer: 5'-GCCGTAGGTCAAGATGC ACAA-3';

Pkhd1, forward primer:5'-GGGAGGTCGATGGTGCA

TAAG-3', reverse primer: 5'-GATGTCCGTTCTTCCCCC AAG-3';

Hnf1b, forward primer: 5'-AGGGAGGTGGTCGATG TCA-3', reverse primer: 5'-TCTGGACTGTCTGGTTGA ACT-3';

C2, forward primer: 5'-CGGTGGTAATTTCACCCTCAG-3', reverse primer: 5'-GGTGTGATGTGAGCTAGACCT-3';

C5, forward primer: 5'-GAACAAACCTACGTCATTTCA GC-3', reverse primer 5'-GTCAACAGTGCCGCGTTTT-3';

Pgc1a, forward primer: 5'-TATGGAGTGACATAGAGTGT GCT-3', reverse primer: 5'-CCACTTCAATCCACCCAGAAA G-3';

Tfam, forward primer: 5'-ATTCCGAAGTGTTTTTC CAGCA-3', reverse primer: 5'-TCTGAAAGTTTTGCATCTG GGT-3';

Wnt1, forward primer: 5'-GGTTTCTACTACGTTGCTA CTGG-3', reverse primer: 5'-GGAATCCGTCAACAGGTT CGT-3':

Ctnnb1, forward primer: 5'-ATGGAGCCGGACAGAAA AGC-3', reverse primer: 5'-CTTGCCACTCAGGGAAG

Srebf1, forward primer: 5'-GATGTGCGAACTGGACA CAG-3', reverse primer: 5'-CATAGGGGGCGTCAAAC AG-3';

Srebf2, forward primer: 5'-GCAGCAACGGGACCAT TCT-3', reverse primer: 5'-CCCCATGACTAAGTCCTTCAA CT-3';

β-actin, forward primer: 5'-AGAGGGAAATCGTGCG TGAC-3', reverse primer: 5'-CAATAGTGATGACCTGGCC GT-3'.

Results

Generation of a mouse model manifesting PKD phenotypes

We crossed mice carrying p53S mutation with WS mice and obtained the first generation of mice with telomerase, *WRN* knockout, and p53S mutations (G1mTR^{-/-}WRN^{-/-}p53^{S/S}), referred to as G1 triple mutation (G1TM). The mice were then bred generation-by-generation to obtain G2 and G3 TM mice (Figure 1A and 1B).

As expected, we observed the incidence of sarcomas when telomere length was shortened to a certain level, which occurred in G3TM (G3mTR^{-/-}WRN^{-/-}p53^{S/S}) mice (**Figure 1C**). The affected mice were sacrificed and anatomical analysis showed that the mice also manifested unilateral or bilateral enlarged kidneys with multiple fluid-filled cysts (**Figure 1D**). Thus, surprisingly, PKD phenotypes were found in G3TM mice at around 4 months old.

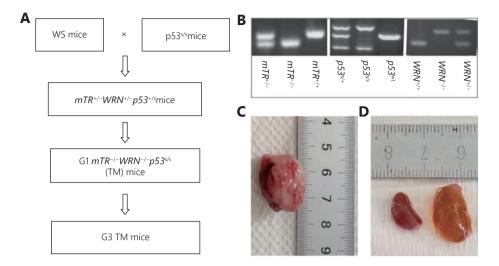


Figure 1 Generation of a mouse model manifesting PKD. (A) The breeding strategy for generating G3TM (G3*mTR*-/-*WRN*-/-*p53*5/5). Mice carrying the p53S mutation were crossed with WS mice and G1TM were obtained (G1*mTR*-/-*WRN*-/-*p53*5/5). The mice were then bred generation-by-generation to obtain G2 and G3 TM mice. (B) Genotyping of mice carrying mTR, WRN and p53S mutations. (C) Incidence of sarcoma in a G3TM mouse. (D) Bilateral enlarged kidneys with multiple fluid-filled cysts in a G3TM mouse.

The H&E of the kidney sections showed that the kidneys from wild type mice developed normal renal tubules and glomeruli (**Figure 2A**), while the kidneys from G3TM mice displayed a range of phenotypes associated with renal dysplasia and renal cyst formation. In the G3TM mouse EH85, the normal histological structure of the right kidney

was completely replaced by fluid-filled cysts of various sizes (Figure 2B). At higher magnification, we could observe that the renal tubules and glomeruli were compressed and atrophied, and the glomerulus lost its capillary loop structure completely (Figure 2C). These data show the severe fluid-filled cyst formation and total loss of renal function in this

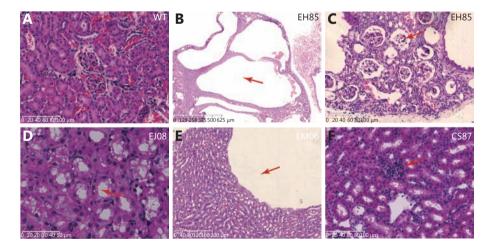


Figure 2 Hematoxylin and eosin staining of kidney sections from mice with PKD phenotype. (A) The normal morphology of a kidney from a wild type mouse. (B) An end stage cystic kidney from a G3TM (G3mTR-/-WRN-/-p53^{5/5}) mouse (ID number: EH85). The normal structure was completely replaced by various sizes of fluid-filled cysts (arrow pointed). (C) Higher magnification power view of the cystic kidney from mouse EH85 showing that the renal tubules and glomeruli were compressed and atrophied. The glomerulus was enclosed and lost its capillary loop structure (arrow pointed). (D) Swelling renal tubule epithelial cells, hydropic degeneration, and vacuolation in the cells were observed (arrow pointed) in the kidney from G3TM mouse EJ08. (E) A kidney from the G3TM mouse EM06, showing the cyst surrounding flat epithelial cells (arrow pointed) that might be caused by fluid pressure changes resulting from cyst formation. (F) An abnormal glomerulus with poorly defined capillary loop (arrow pointed) in the kidney from G3TM mouse CS87.

kidney. In the kidney from G3TM mouse EJ08, cellular swelling or hydropic degeneration and vacuolation were observed (**Figure 2D**), suggesting the dysfunction of ion and water regulation in these renal cells. In the kidneys from G3TM mouse EM06, the cyst is surrounded by flat epithelial cells, which suggests that cellular morphological changes are caused by fluid pressure from the cyst (**Figure 2E**). In the kidney from G3TM mouse CS87, we found the abnormal glomerulus with poorly defined capillary loop (**Figure 2F**). The abnormal glomerulus with semi-enclosed capillary loop was also frequently observed, indicating the loss of glomerulus function and downregulation of blood filtering function.

Together these data suggest that kidneys from $G3mTR^{-/-}WRN^{-/-}p53^{S/S}$ mice were hypoplastic and developed PKD phenotypes.

The correlation of tumorigenesis and PKD phenotypes

As described earlier, the G3TM mice should manifest phenotypes that correlate with abnormal DNA damage response and abnormal proliferation. In our case, it manifested as increased tumorigenesis and PKD formation. To further understand the relationship between abnormal DNA damage response, tumorigenesis, and PKD phenotypes, we analyzed the frequencies and co-occurrence of cystic kidney and tumorigenesis in mice groups with different genotypes.

We did not find any tumorigenesis or PKD in those mice with WRN and telomerase double knockout, including G1DM mice (n=41), G2DM mice (n=52), and G3DM (n=63). However, we observed a few PKD or tumor incidences in G1TM and G2TM mice; this number increased dramatically in G3TM mice (**Table 1**, **Figure 3A**). The incidence increased along with telomere shortening (G1-G2-G3) and the introduction of p53S (TM vs. DM). These data strongly suggest that interplay of telomere DNA damage and p53S mutation contributed to the development of PKD. Furthermore, most PKD co-occurred with tumor phenotypes (**Table 1**, **Figure 3A**), showing that the occurrence of PKD

phenotype was highly correlated with increased tumorigenesis.

Gene signatures of PKD caused by telomere dysfunction and p53S mutation

Since the genetic defect in this PKD model is very different from classical PKD models with polycystins defects, we were interested in investigating the gene signatures in MEFs (G3TM), cystic kidneys, and tumors from G3TM. We compared the gene expression profiles in MEFs from G1DM to G3TM mice using RNA-seq and ssGSEA analysis, as well as the tumors and cystic kidneys from G3TM mice.

First, we analyzed the gene signatures that were upregulated or downregulated in cystic kidneys using the Hallmark dataset. We found that the metabolism-related pathways, particularly lipid metabolism, were strikingly upregulated in cystic kidneys. These included bile acid metabolism, fatty acid metabolism and others (Figure 3B). Cell cycle-related pathways were clearly downregulated, such as mitotic spindle, G2M checkpoint, and E2F targets. (Figure 3B). These data suggest that abnormal metabolic regulation contributed greatly to PKD progress in G3TM mice.

Interestingly, the pathways such as oxidative phosphorylation, complement, and interferon alpha gamma were upregulated in both cystic kidneys and tumors (Figure 3B). These common regulated pathways suggest that the development of cystic kidney shares common mechanisms with tumorigenesis.

We then expanded the ssGSEA analysis by combining the Hallmark, C2, and C5 datasets²⁰, and mapping the gene signatures that were gradually upregulated or downregulated in G3TM cells, tumors, and cystic kidneys (**Supplementary Figure S1** and **S2**). The data revealed that most strikingly upregulated pathways shared by tumors and cystic kidneys included complement pathways, the immune response, lipid metabolism, and mitochondrial energy homeostasis. Interestingly, we observed that kidney function-related pathways, such as microvillus organization and water homeostasis, were upregulated in both tumors and kidneys. The data also show that organic cation transport and

Table 1 The occurrence of cystic kidney and/or tumor in mice with different genotypes

Number of mice	G1DM	G1 TM	G2 DM	G2 TM	G3 DM	G3 TM
Cystic kidney	0	1	0	2	0	4
Tumor	0	5	0	9	0	23
Cystic kidney+ tumor	0	5	0	9	0	23
Total	41	21	52	39	63	43

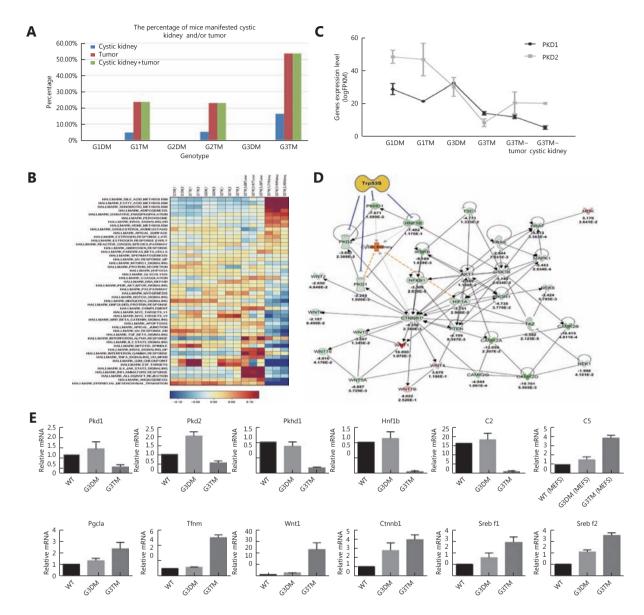


Figure 3 Co-occurrence of tumorigenesis with PKD and gene signature analysis. (A) The percentage of tumor/cystic kidney incidence in mice with genotypes from G1DM (G1mTR-/-WRN-/-) to G3TM (G3mTR-/-WRN-/-p53^{S/S}) indicated the co-occurrence of tumorigenesis with PKD, and the incidence increased with telomere shortening (G1-G2-G3), and the introduction of p53S (TM vs. DM). (B) The heatmap of gene expression profiles (ssGSEA analysis results of the RNA-seq data using Hallmark dataset) in MEFs from G1DM, G2DM, G3DM, G1TM, G2TM, and G3TM mice, as well as the tumors and cystic kidneys from G3TM mice. The pathways were ranked by scores showing up- (red) or downregulation (blue) in cystic kidney, as well as in tumor and in G3TM MEFs. (C) The expression levels of PKD1 and PKD2 decreased significantly from G1DM to G3TM, along with the introduction of p53S mutation and telomere shortening. (D) The interaction network of genes essential for classical PKD development generated by Ingenuity Pathway Analysis (IPA). The expression fold change and *P*-values are shown under the gene name. Genes downregulated by Trp53S are connected by blue inhibition lines. As per IPA knowledge base, orange lines indicate gene expression level is consistent with activation of cystic kidney, whereas grey lines are inconsistent with activation of cystic kidney. (E) The validation of key gene expression levels by quantitative real-time PCR. The expression levels of genes involved in PKD pathway (PKD1, PKD2, Pkhd1, Hnf1b), complement pathway (C2 and C5), mitochondria pathway (Pgc1a and Tfam), Wnt signaling pathway (Wnt1 and Ctnnb1), and lipid metabolism pathway (Srebf1 and Srebf2) were evaluated by real-time PCR in G3TM MEFs. WT MEFs and G3DM MEFs were used as controls.

glucuronidation pathways were highly upregulated in cystic kidneys (**Supplementary Figure S1**).

On the other hand, the pathways obviously downregulated in tumor and kidneys included cytoskeleton regulation, extracellular signal transduction and others (**Supplementary Figure S2**). Together, regulation of these pathways revealed that G3TM PKD shares common mechanisms with tumorigenesis. These dysfunctions of gene regulation composed the gene signatures of G3TM PKD.

Comparison of gene signatures in PKD caused by telomere dysfunction and p53S mutation with classical PKD caused by PKD1 or PKD2 deficiency

After analyzing the gene signatures in the G3TM PKD model (G3mTR^{-/-}WRN^{-/-}p53^{S/S}), we compared the gene signatures in this model with classic PKD models with PKD1 or PKD2 deficiency. We analyzed RNA-seq data of the classic PKD models with PKD1 or PKD2 deficiency²² by the same ssGSEA analysis, and compared gene signatures between the three mouse models. The data, analyzed by the Hallmark dataset, showed that the common upregulated pathways among these three PKD models included complement, coagulation, and apical surface, whereas the common downregulated pathways included angiogenesis (Supplementary Table S1).

The expanded analysis with Hallmark, C2, and C5 datasets revealed that common upregulated pathways included complement activation, bile acid metabolism, and ion homeostasis. The common downregulated pathways included cell-to-cell adhesion signaling and epithelial structural maintenance (Supplementary Table S2).

Together these data reveal that although the G3TM PKD model was derived from different genetic aberrations to classical PKD models, they share common pathways in regulating complement activation, lipid metabolism, cell-to-cell adhesion signaling etc. These pathways might play an essential role in PKD development.

Furthermore, we found that from G1DM to G3TM, along with the introduction of p53S mutation and telomere shortening, the expression levels of PKD1 and PKD2 decreased significantly (**Figure 3C**), suggesting that p53S mutation could downregulate PKD1 and PKD2 expression. In the end-stage tumor and cystic kidney tissues, the PKD2 level was slightly upregulated, but was still lower than the level in G3DM (**Figure 3C**).

Since G3TM is the genotype with most incidences of tumor and cystic kidney disease, but not G3DM, comparison of gene regulation in G3TM with G3DM might provide the mechanisms for PKD attributed to p53S. We evaluated the genes essential for classical PKD development^{1,21}, and mapped their interaction networks with IPA (**Figure 3D**). Based on expression fold-changes of genes in this interaction network, the molecule activity predictor showed that cystic kidney module was significantly activated (*P*-value: 3.31E-11). Other than PKD1 and PKD2, the ARPKD protein Pkhd1 (polyductin) and its transcriptional factor Hnf1b (hepatocyte nuclear factor 1 homeobox B)²³ were also downregulated. These data suggest that p53S plays a role in transcriptional regulation of PKD-related genes.

To validate the key genes in altered pathways as revealed by RNA-seq data, we further analyzed the regulation of genes involved in the PKD pathway, complement pathway, mitochondria pathway, Wnt signaling pathway, and lipid metabolism pathway by quantitative real-time PCR. Compared with WT and G3DM MEFs, the expression of PKD genes PKD1, PKD2, Pkhd1, and Hnf1b was suppressed in G3TM MEFs. However, complement pathway genes C2 and C5; mitochondria pathway genes Pgc1a and Tfam; Wnt signaling pathway genes Wnt1 and Ctnnb1; and lipid metabolism pathway genes Srebf1 and Srebf2 were upregulated in G3TM MEFs (Figure 3E). These data further confirmed the RNA-seq data, and suggest that p53S regulates genes involved in the aforementioned pathways attributed to the development of cystic kidney.

Discussion

It has always been suspected that the development of cystic kidney disease shares features with tumorigenesis, although the evidence is unclear^{24,25}. Recent understanding of aberrant downstream pathways in ADPKD demonstrates that transcriptional functions that regulate cell cycle progression, energy metabolism, and secretion-related signaling are abnormal in PKD¹, and p53 is the essential node in all these transcriptional regulations²⁶.

It has always been documented that wild type p53 could bind to the PKD1 promoter, and the kidneys of p53 null mice expressed higher PKD1 mRNA levels than wild-type littermates, suggesting that wild type p53 suppressed the expression of PKD1⁴. It has also been shown that depletion of PKD1 led to increased cell proliferation and caused a premature G1/S transition, and the elevated expression of mechanosensory polycystins in human carotid atherosclerotic plaques was associated with p53 activation^{6,27}. Thus, it is conceivable that mutant p53, which loses the wild type function of p53 and gains oncogenic function, plays an important role in the development of PKD.

Here we revealed a novel PKD and tumor combined mouse model (PKD derived from G3mTR^{-/-}WRN^{-/-}p53^{S/S} mice) (**Figure 1** and **2**). The co-occurrence of cystic kidneys and tumors suggests common genetic mechanisms, which in this case could be DNA damage caused by telomere dysfunction and the abnormal DNA damage response, cellular proliferation, or metabolic dysregulation caused by p53N236S mutation. This model provides direct evidence to connect mutant p53 DNA damage response with PKD development. The fact that the incidences of cystic kidneys increased along with telomere shortening suggests that DNA damage triggered the development of PKD.

To dissect the common genetic causes of PKD and tumorigenesis, we identified the upregulated pathways in tumors and cystic kidneys. Among the common pathways in cystic kidneys and tumors, the pathways of activation of complement, inflammatory response, and mitochondrial function were most significantly upregulated (Figure 3B and 3E, Supplementary Figure S1). It has been documented that activation of the alternative complement pathway and the consequent inflammatory response plays an essential role in the progress of kidney diseases, such as atypical hemolytic uremic syndrome, C3 glomerulopathies, and atypical post

infectious GN, as well as ADPKD^{28,29}. These data suggest the importance of complement cascade in the regulation of inflammatory response of both cystic kidney disease and tumors.

Mitochondrial function is essential in energy metabolism, oxygen consumption, ROS regulation, and ATP synthesis. Aside from kidney disease, mitochondrial dysfunction is also related to the processes of aging and tumor development ^{30,31}. By ssGSEA analysis, we found that the pathways involved in mitochondrial function and related fatty acid metabolisms are highly activated in tumors and cystic kidneys from G3TM mice; however, they are not significantly up-regulated in PKD1- or PKD2-deficient PKD²²(**Supplementary Table S1**, **S2**).

It is very promising that we found that PKD1, PKD2, Pkhd1, and Hnf1b were all downregulated by the introduction of p53S (**Figure 3D**). It has been documented that Hnf1b is the transcription factor for both Pkhd1 and PKD2. Mutation of Hnf1b results in kidney phenotypes that include renal agenesis, dysplasia, and cysts³². These phenotypes are consistent with our pathological analysis (**Figure 2**).

Putting these data together, we report a novel PKD and

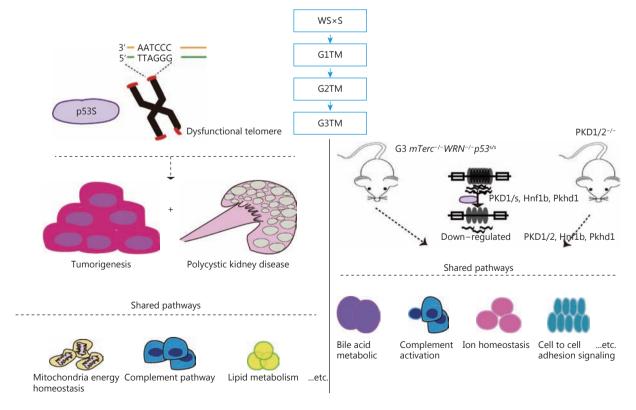


Figure 4 A schematic of the establishment of G3TM PKD model, and the gene signatures shared between development of PKD and tumorigenesis, and with PKD1/2 PKD model.

tumor combined mouse model, and reveal the gene signatures involved in the development of PKD. The G3TM PKD model shared common pathways with classical PKD. These common pathways might be essential in PKD progress, and thus could be common targets for PKD prevention, drug screening, and patient care strategies. In depth analyses of these pathways could provide new biomarkers for the clinical diagnosis and prognosis of PKD (**Figure 4**).

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Conflict of interest statement

No potential conflicts of interest are disclosed.

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Supplementary materials

Table S1 The common pathways shared by G3TM PKD and Pkd1/2-deficient PKD revealed by ssGSEA analysis results of the RNA-seq data using the Hallmark dataset

Up-regula	ated in G3TM PKD	Down-regulated in G3TM PKD	
Up-regulated in Pkd1 deficient PKD	Up-regulated in Pkd2 deficient PKD	Down-regulated in Pkd1 deficient PKD	Down-reulated in Pkd2 deficient PKD
HALLMARK_APICAL_SURFACE	HALLMARK_ANDROGEN_RESPONSE	HALLMARK_ANGIOGENESIS	HALLMARK_ANGIOGENESIS
HALLMARK_COAGULATION	HALLMARK_APICAL_SURFACE	HALLMARK_GLYCOLYSIS	HALLMARK_ SPERMATOGENESIS
HALLMARK_COMPLEMENT	HALLMARK_ CHOLESTEROL_HOMEOSTASIS	HALLMARK_MITOTIC_SPINDLE	
HALLMARK_ ESTROGEN_RESPONSE_LATE	HALLMARK_COAGULATION	HALLMARK_MYOGENESIS	
HALLMARK_ KRAS_SIGNALING_DN	HALLMARK_COMPLEMENT	HALLMARK_PI3K_AKT_ MTOR_SIGNALING	
	HALLMARK_ ESTROGEN_RESPONSE_EARLY	HALLMARK_UV_RESPONSE_DN	
	HALLMARK_ ESTROGEN_RESPONSE_LATE		
	HALLMARK_ INTERFERON_ALPHA_RESPONSE		
HALLMARK_ INTERFERON_GAMMA_RESPONS	HALLMARK_ INTERFERON_GAMMA_RESPONSE		
	HALLMARK_ PANCREAS_BETA_CELLS		
	HALLMARK_ PROTEIN_SECRETION		

Table S2 The common pathways shared by G3TM PKD and Pkd1/2-deficient PKD revealed by ssGSEA analysis results of the RNA-seq data using Hallmark, C2, and C5 dataset

Up-regulated in G3TM PKD		Down-regulated in G3TM PKD		
Up-regulated in Pkd1 deficient PKD	Up-regulated	Down-regulated	Down-regulated	
	in Pkd2 deficient PKD	in Pkd1 deficient PKD	in Pkd2 deficient PKD	
AIGNER_ZEB1_TARGETS	AIGNER_ZEB1_TARGETS	AMIT_SERUM_ RESPONSE_240_MCF10A	BECKER_TAMOXIFEN_ RESISTANCE_UP	
BANDRES_RESPONSE_TO_ CARMUSTIN_WITHOUT_ MGMT_24HR_UP	BIOCARTA_COMP_PATHWAY	BARIS_THYROID_CANCER_DN	BIOCARTA_ CELL2CELL_PATHWAY	
BIOCARTA_COMP_PATHWAY	BROWNE_HCMV_ INFECTION_48HR_UP	BECKER_TAMOXIFEN_ RESISTANCE_UP	BIOCARTA_GCR_PATHWAY	
DACOSTA_UV_RESPONSE_	DACOSTA_UV_RESPONSE_	BIOCARTA_	BIOCARTA_NO2IL12_PATHWAY	
VIA_ERCC3_COMMON_UP	VIA_ERCC3_COMMON_UP	ELL2CELL_PATHWAY		
DURCHDEWALD_SKIN_	DURCHDEWALD_SKIN_	BIOCARTA_IL2RB_PATHWAY	BIOCARTA_	
CARCINOGENESIS_UP	CARCINOGENESIS_UP		P53HYPOXIA_PATHWAY	
FIGUEROA_AML_METHYLATION_ CLUSTER_4_UP	ENGELMANN_CANCER_ PROGENITORS_DN	BIOCARTA_SODD_PATHWAY	BIOCARTA_TALL1_PATHWAY	
FURUKAWA_DUSP6_	FIGUEROA_AML_	BOWIE_RESPONSE_	BROWNE_INTERFERON_	
TARGETS_PCI35_UP	METHYLATION_CLUSTER_4_UP	TO_EXTRACELLULAR_MATRIX	RESPONSIVE_GENES	
go_de_novo_ posttranslational_ protein_folding	FURUKAWA_DUSP6_ TARGETS_PCI35_UP	BROWNE_INTERFERON_ RESPONSIVE_GENES	CHAN_INTERFERON_ PRODUCING_DENDRITIC_CELL	
GODE_NOVO_ PROTEIN_FOLDING	GO_DE_NOVO_P OSTTRANSLATIONAL_ PROTEIN_FOLDING	BURTON_ADIPOGENESIS_12	CHEMELLO_SOLEUS_VS_ EDL_MYOFIBERS_DN	
GO_2_IRON_2_SULFUR_	GO_DE_NOVO_	CHAN_INTERFERON_	CHIANG_LIVER_CANCER_	
CLUSTER_BINDING	PROTEIN_FOLDING	PRODUCING_DENDRITIC_CELL	SUBCLASS_INTERFERON_UP	
GO_AMMONIUM_ION_BINDING	GO_ACTIN_NUCLEATION	CHEMELLO_SOLEUS_VS_ EDL_MYOFIBERS_DN	CLIMENT_BREAST_ CANCER_COPY_NUMBER_UP	
GO_APOPTOTIC_	GO_APOPTOTIC_	CLIMENT_BREAST_CANCER_	DAUER_STAT3_TARGETS_DN	
MITOCHONDRIAL_CHANGES	MITOCHONDRIAL_CHANGES	COPY_NUMBER_UP		
GO_BILE_ACID_	GO_BILE_ACID_	CROONQUIST_STROMAL_	DOANE_BREAST_CANCER_	
METABOLIC_PROCESS	METABOLIC_PROCESS	STIMULATION_DN	CLASSES_DN	
go_brain_morphogenesis	GO_BROWN_FAT_ CELL_DIFFERENTIATION	DAUER_STAT3_TARGETS_DN	DUTTA_APOPTOSIS_VIA_NFKB	
GO_BROWN_FAT_	GO_CELL_MATURATION	DORN_ADENOVIRUS_	EINAV_INTERFERON_	
CELL_DIFFERENTIATION		INFECTION_32HR_UP	SIGNATURE_IN_CANCER	
GO_CALCIUM_INDEPENDENT_ CELL_CELL_ADHESION_VIA_ PLASMA_MEMBRANE_CELL_ ADHESION_MOLECULES	GO_CELLULAR_IRON_ ION_HOMEOSTASIS	DORN_ADENOVIRUS_ INFECTION_48HR_UP	FARMER_BREAST_ CANCER_CLUSTER_1	
GO_CATECHOLAMINE_BINDING	GO_CHAPERONE_MEDIATED_ PROTEIN_COMPLEX_ASSEMBLY	DUTTA_APOPTOSIS_VIA_NFKB	FERRANDO_LYL1_NEIGHBORS	
go_cellular_iron_	GO_COMPLEMENT_ACTIVATION	EINAV_INTERFERON_	GAUSSMANN_MLL_AF4_	
ion_homeostasis		SIGNATURE_IN_CANCER	FUSION_TARGETS_F_DN	
GO_CHAPERONE_MEDIATED_	GO_COMPLEMENT_ACTIVATION_	FIGUEROA_AML_	GO_ACETYLGALACTOSAMINYLT	
PROTEIN_COMPLEX_ASSEMBLY	ALTERNATIVE_PATHWAY	METHYLATION_CLUSTER_5_DN	RANSFERASE_ACTIVITY	
GO_CHYLOMICRON	GO_CYTOSOLIC_SMALL_	FINETTI_BREAST_	GO_ACTIN_FILAMENT_	
	RIBOSOMAL_SUBUNIT	CANCER_KINOME_GREEN	POLYMERIZATION	

			Continued
Up-regulated	in G3TM PKD	Down-regulated	l in G3TM PKD
GO_COMPLEMENT_ACTIVATION	GO_DETECTION_OF_CHEMICAL_ STIMULUS_INVOLVED_IN_SENSO RY_PERCEPTION_OF_TASTE	FUNG_IL2_SIGNALING_2	GO_ACTIVATION_OF_CYSTEINE_ TYPE_ENDOPEPTIDASE_ACTIVITY_ INVOLVED_IN_APOPTOTIC_ SIGNALING_PATHWAY
GO_COMPLEMENT_ACTIVATION _ALTERNATIVE_PATHWAY	GO_DYNEIN_BINDING	GAUSSMANN_MLL_AF4_ FUSION_TARGETS_F_DN	GO_ADENYLATE_CYCLASE_ACTIV ATING_DOPAMINE_RECEPTOR_ SIGNALING_PATHWAY
GO_CYTOSOLIC_SMALL_RIBOSO MAL_SUBUNIT	GO_ERBB2_SIGNALING_ PATHWAY	GAVIN_FOXP3_TARGETS_ CLUSTER_T7	GO_ADENYLATE_CYCLASE_ACTIV ATING_G_PROTEIN_COUPLED_ RECEPTOR_SIGNALING_PATHWAY
GO_DETECTION_OF_CHEMICAL_ STIMULUS_INVOLVED_IN_SENSO RY_PERCEPTION_OF_TASTE	GO_FAT_SOLUBLE_VITAMIN_ METABOLIC_PROCESS	GENTILE_UV_RESPONSE_ CLUSTER_D1	GO_ADENYLATE_CYCLASE_MOD ULATING_G_PROTEIN_COUPLED_ RECEPTOR_SIGNALING_PATHWAY
GO_DETOXIFICATION	GO_GAS_TRANSPORT	GO_14_3_3_PROTEIN_BINDING	GO_ADRENERGIC_RECEPTOR_ SIGNALING_PATHWAY
GO_ENDOCYTIC_ VESICLE_LUMEN	GO_HUMORAL_IMMUNE_ RESPONSE_MEDIATED_BY_ CIRCULATING_IMMUNOGLOBULIN	GO_ACETYLGALACTOSAMINYLT RANSFERASE_ACTIVITY	GO_AXON_REGENERATION
GO_EPOXYGENASE_ P450_PATHWAY	GO_HYDROLASE_ACTIVITY_ ACTING_ON_CARBON_NITROGEN_ BUT_NOT_PEPTIDE_BONDS_IN_ LINEAR_AMIDINES	GO_ACROSOME_ASSEMBLY	GO_B_CELL_RECEPTOR_ SIGNALING_PATHWAY
GO_FAT_SOLUBLE_VITAMIN_ METABOLIC_PROCESS	GO_MAP_KINASE_KINASE_ KINASE_ACTIVITY	GO_ACTIN_FILAMENT_ POLYMERIZATION	GO_BASEMENT_MEMBRANE_ ORGANIZATION
GO_HIGH_DENSITY_ LIPOPROTEIN_PARTICLE	GO_MHC_CLASS_II_PROTEIN_ COMPLEX_BINDING	GO_ACTIVATION_OF_ ADENYLATE_CYCLASE_ACTIVITY	GO_BETA_1_3_GALACTOSYLTRA NSFERASE_ACTIVITY
GO_HUMORAL_IMMUNE_ RESPONSE_MEDIATED_BY_ CIRCULATING_IMMUNOGLOBULI	GO_MULTIVESICULAR_BODY_ ORGANIZATION N	GO_ACTIVATION_OF_CYSTEINE_ TYPE_ENDOPEPTIDASE_ ACTIVITY_INVOLVED_IN_ APOPTOTIC_SIGNALING_PATHWAY	GO_CELLULAR_RESPONSE_TO_ EXOGENOUS_DSRNA
GO_HYDROLASE_ACTIVITY_ ACTING_ON_CARBON_ NITROGEN_BUT_NOT_PEPTIDE_ BONDS_IN_LINEAR_AMIDINES	GO_NEGATIVE_REGULATION_ OF_ACUTE_INFLAMMATORY_ RESPONSE	GO_ADENYLATE_CYCLASE_ACTIV ATING_G_PROTEIN_COUPLED_ RECEPTOR_SIGNALING_PATHWAY	PROSTAGLANDIN_E_STIMULUS
GO_INTRINSIC_COMPONENT_ OF_MITOCHONDRIAL_OUTER_ MEMBRANE	GO_NEGATIVE_REGULATION_ OF_ANDROGEN_RECEPTOR_ SIGNALING_PATHWAY	GO_ADENYLYLTRANSFERASE_ ACTIVITY	GO_COPPER_ION_TRANSPORT
GO_MHC_CLASS_II_PROTEIN_ COMPLEX_BINDING	GO_NEGATIVE_REGULATION_ OF_CALCIUM_ION_IMPORT	GO_ANTIGEN_BINDING	GO_CYTOLYSIS
GO_MITOCHONDRIAL_ATP_ SYNTHESIS_COUPLED_PROTON_ TRANSPORT	GO_NEGATIVE_REGULATION_ OF_CARBOHYDRATE_ METABOLIC_PROCESS	GO_B_CELL_ACTIVATION	GO_CYTOPLASMIC_SEQUESTERI NG_OF_TRANSCRIPTION_ FACTOR
GO_MULTIVESICULAR_BODY_ ORGANIZATION	GO_NEGATIVE_REGULATION_ OF_HORMONE_SECRETION	GO_B_CELL_RECEPTOR_ SIGNALING_PATHWAY	GO_DISRUPTION_OF_CELLS_ OF_OTHER_ORGANISM
GO_NEGATIVE_REGULATION_ OF_ACUTE_INFLAMMATORY_ RESPONSE	GO_NEGATIVE_REGULATION_ OF_PEPTIDE_SECRETION	GO_BETA_1_3_GALACTOSYLTRA NSFERASE_ACTIVITY	GO_DISRUPTION_OF_CELLS_OF_ OTHER_ORGANISM_INVOLVED_ IN_SYMBIOTIC_INTERACTION
GO_NEGATIVE_REGULATION_ OF_ANDROGEN_RECEPTOR_ LING_PATHWAY	GO_NEGATIVE_REGULATION_ OF_PROTEIN_OLIGOMERIZATION	GO_CELLULAR_COMPONENT_ DISASSEMBLY_INVOLVED_IN_ EXECUTION_PHASE_OF_APOPTOSIS	GO_DNA_TEMPLATED_TRANSCR IPTIONAL_PREINITIATION_ COMPLEX_ASSEMBLY

			Continued
Up-regulated i	n G3TM PKD	Down-regulated	l in G3TM PKD
GO_NEGATIVE_REGULATION_ OF_CALCIUM_ION_IMPORT	GO_NEGATIVE_REGULATION_ OF_RELEASE_OF_CYTOCHROME_ C_FROM_MITOCHONDRIA	GO_CELLULAR_RESPONSE_TO_ ACID_CHEMICAL	GO_DOPAMINE_RECEPTOR_ BINDING
GO_NEGATIVE_REGULATION_ OF_HORMONE_SECRETION	GO_NUCLEOBASE_METABOLIC_ PROCESS	GO_CELLULAR_RESPONSE_TO_ EXOGENOUS_DSRNA	GO_DOPAMINE_RECEPTOR_ SIGNALING_PATHWAY
GO_NEGATIVE_REGULATION_ OF_LIPID_CATABOLIC_PROCESS	GO_NUCLEOSIDE_PHOSPHATE_ ATABOLIC_PROCESS	GO_CELLULAR_RESPONSE_TO_ GLUCOSE_STARVATION	GO_DRUG_BINDING
GO_NEGATIVE_REGULATION_ OF_PEPTIDE_SECRETION	GO_ORGANIC_CYCLIC_COMPOUND_ CATABOLIC_PROCESS	GO_CELLULAR_RESPONSE_TO_ PROSTAGLANDIN_E_STIMULUS	GO_ENDOPLASMIC_RETICULUM_ CHAPERONE_COMPLEX
GO_NEGATIVE_REGULATION_ OF_RELEASE_OF_CYTOCHROME _C_FROM_MITOCHONDRIA	GO_OXYGEN_TRANSPORT	GO_CELLULAR_RESPONSE_TO_ PROSTAGLANDIN_STIMULUS	GO_EPITHELIAL_STRUCTURE_ MAINTENANCE
GO_NEGATIVE_REGULATION_ OF_RESPONSE_TO_OXIDATIVE_ STRESS	GO_PEPTIDE_ANTIGEN_BINDING	GO_COPPER_ION_TRANSPORT	GO_ERYTHROCYTE_ DEVELOPMENT
GO_ORGAN_OR_TISSUE_ SPECIFIC_IMMUNE_RESPONSE	GO_POSITIVE_REGULATION_ OF_CARDIAC_MUSCLE_ CONTRACTION	GO_CYCLIN_DEPENDENT_ PROTEIN_SERINE_THREONINE_ KINASE_INHIBITOR_ACTIVITY	GO_EXECUTION_PHASE_ OF_APOPTOSIS
GO_OXIDOREDUCTASE_ACTIVITY_ ACTING_ON_PAIRED_DONORS_ WITH_INCORPORATION_OR_ REDUCTION_OF_MOLECULAR_ OXYGEN_REDUCED_FLAVIN_ OR_FLAVOPROTEIN_AS_ONE_ DONOR_AND_INCORPORATION_ OF_ONE_ATOM_OF_OXYGEN	GO_POSITIVE_REGULATION_OF_ CATECHOLAMINE_SECRETION	GO_CYTOPLASMIC_SEQUESTERING_ OF_TRANSCRIPTION_ FACTOR	GO_GRANULOCYTE_ DIFFERENTIATION
GO_OXYGEN_BINDING	GO_POSITIVE_REGULATION_OF_ TRANSCRIPTION_INITIATION_ FROM_RNA_POLYMERASE_ II_PROMOTER	GO_DEAMINASE_ACTIVITY	GO_INTERACTION_WITH_ SYMBIONT
GO_OXYGEN_TRANSPORT	GO_PROTEIN_BINDING_ INVOLVED_IN_PROTEIN_FOLDING	GO_DEFENSE_RESPONSE_ TO_VIRUS	GO_ISOPRENOID_BINDING
GO_POSITIVE_REGULATION_ OF_CARDIAC_MUSCLE_ CONTRACTION	GO_REGULATION_OF_APPETITE	GO_DOPAMINE_RECEPTOR_ BINDING	GO_LYMPHOID_PROGENITOR_ CELL_DIFFERENTIATION
GO_POSITIVE_REGULATION_ OF_FATTY_ACID_METABOLIC_ PROCESS	GO_REGULATION_OF_CELL_ PROJECTION_SIZE	GO_ENDOLYSOSOME	GO_MACROPHAGE_ DIFFERENTIATION
GO_POSITIVE_REGULATION_ OF_FATTY_ACID_OXIDATION	GO_REGULATION_OF_CELLULAR_ AMINO_ACID_METABOLIC_ PROCESS	GO_ENDOPLASMIC_RETICULUM_ CHAPERONE_COMPLEX	GO_MAINTENANCE_OF_CELL_ POLARITY
GO_POSITIVE_REGULATION_ OF_LIPID_STORAGE	GO_REGULATION_OF_MICROTU BULE_BASED_MOVEMENT	GO_EPITHELIAL_STRUCTURE_ MAINTENANCE	GO_MAINTENANCE_OF_GASTRO INTESTINAL_EPITHELIUM
GO_POSITIVE_REGULATION_ OF_RELEASE_OF_CYTOCHROME_ C_FROM_MITOCHONDRIA	GO_REGULATION_OF_ URINE_VOLUME	GO_EXTRINSIC_APOPTOTIC_ SIGNALING_PATHWAY_VIA_ DEATH_DOMAIN_RECEPTORS	GO_MAP_KINASE_ACTIVITY
GO_POSITIVE_REGULATION_ OF_RESPONSE_TO_OXIDATIVE_ STRESS	GO_RENAL_SYSTEM_PROCESS_ INVOLVED_IN_REGULATION_ OF_BLOOD_VOLUME	GO_FEMALE_GAMETE_ GENERATION	GO_MULTICELLULAR_ ORGANISMAL_MOVEMENT

			Continued
Up-regulated	in G3TM PKD	Down-regulated	l in G3TM PKD
GO_POSITIVE_REGULATION_OF_ TRANSCRIPTION_INITIATION_ FROM_RNA_POLYMERASE_II_ PROMOTER	GO_RESPONSE_TO_ACTIVITY	GO_G_PROTEIN_BETA_GAMMA_ SUBUNIT_COMPLEX_BINDING	GO_NATURAL_KILLER_CELL_ DIFFERENTIATION
GO_PROTEIN_BINDING_ INVOLVED_IN_PROTEIN_FOLDING	GO_RESPONSE_TO_CAMP	GO_G_PROTEIN_COUPLED_RECE PTOR_SIGNALING_PATHWAY_ COUPLED_TO_CYCLIC_NUCLEOTIDE SECOND_MESSENGER	
GO_PROTEIN_REFOLDING	GO_RESPONSE_TO_COLD	GO_GALACTOSYLTRANSFERASE_ ACTIVITY	GO_NEGATIVE_REGULATION_OF_ CALCIUM_ION_TRANSMEMBRANE_ TRANSPORT
GO_PROTON_TRANSPORTING_ ATP_SYNTHASE_COMPLEX	GO_RESPONSE_TO_DIETARY_ EXCESS	GO_GLYCOPROTEIN_CATABOLIC_ PROCESS	GO_NEGATIVE_REGULATION_OF_ GLYCOPROTEIN_BIOSYNTHETIC_ PROCESS
GO_QUATERNARY_AMMONIUM_ GROUP_BINDING	GO_RESPONSE_TO_MISFOLDED_ PROTEIN	GO_GRANULOCYTE_ DIFFERENTIATION	GO_NEGATIVE_REGULATION_OF_ HOMEOSTATIC_PROCESS
GO_REACTIVE_OXYGEN_SPECIES_ BIOSYNTHETIC_PROCESS	GO_RESPONSE_TO_SALT_STRESS	GO_GTPASE_ACTIVATING_ PROTEIN_BINDING	GO_NEGATIVE_REGULATION_OF_ INTERLEUKIN_1_PRODUCTION
GO_REACTIVE_OXYGEN_SPECIES_ METABOLIC_PROCESS	GO_RETINA_HOMEOSTASIS	GO_I_KAPPAB_KINASE_NF_ KAPPAB_SIGNALING	GO_NEGATIVE_REGULATION_OF_ INTERLEUKIN_10_PRODUCTION
GO_REGULATION_OF_APPETITE	GO_RETINOL_DEHYDROGENASE_ ACTIVITY	GO_ISOPRENOID_BINDING	GO_NEGATIVE_REGULATION_ OF_INTRINSIC_APOPTOTIC_ SIGNALING_PATHWAY
GO_REGULATION_OF_CELLULAR_ AMINO_ACID_METABOLIC_ PROCESS	GO_SENSORY_PERCEPTION_ OF_TASTE	GO_JNK_CASCADE	GO_NEGATIVE_REGULATION_ OF_INTRINSIC_APOPTOTIC_ SIGNALING_PATHWAY_IN_ RESPONSE_TO_DNA_DAMAGE
GO_REGULATION_OF_ENERGY_ HOMEOSTASIS	GO_SEQUESTERING_OF_ METAL_ION	GO_KINASE_INHIBITOR_ ACTIVITY	GO_NEGATIVE_REGULATION_ OF_LEUKOCYTE_APOPTOTIC_ PROCESS
GO_REGULATION_OF_MICROTU BULE_BASED_MOVEMENT	GO_TETRAPYRROLE_BINDING	GO_KINASE_REGULATOR_ ACTIVITY	GO_NEGATIVE_REGULATION_ OF_LYASE_ACTIVITY
GO_REGULATION_OF_ OXIDATIVE_STRESS_INDUCED_ CELL_DEATH	GO_U1_SNRNP	GO_LYMPH_NODE_ DEVELOPMENT	GO_NEGATIVE_REGULATION_ OF_LYMPHOCYTE_APOPTOTIC_ PROCESS
GO_REGULATION_OF_RELEASE_ OF_CYTOCHROME_C_FROM_ MITOCHONDRIA	GO_UBIQUITIN_LIKE_PROTEIN_ CONJUGATING_ENZYME_ BINDING	GO_LYMPHOCYTE_ HOMEOSTASIS	GO_NEGATIVE_REGULATION_ OF_MYELOID_CELL_APOPTOTIC_ PROCESS
GO_REGULATION_OF_ SEQUESTERING_OF_TRIGLYCERIDE	GO_VIRION_ASSEMBLY	GO_MAINTENANCE_OF_ GASTROINTESTINAL_EPITHELIUM	GO_NEGATIVE_REGULATION_ OF_OSTEOCLAST_ DIFFERENTIATION
GO_REGULATION_OF_URINE_ VOLUME	GOERING_BLOOD_HDL_ CHOLESTEROL_QTL_CIS	GO_MEMBRANE_TUBULATION	GO_NEGATIVE_REGULATION_ OF_RESPONSE_TO_BIOTIC_ STIMULUS
GO_RENAL_SYSTEM_PROCESS_ INVOLVED_IN_REGULATION_ OF_BLOOD_VOLUME	HALLMARK_PANCREAS_BETA_ CELLS	GO_MITOGEN_ACTIVATED_ PROTEIN_KINASE_KINASE_BINDING	GO_NEGATIVE_REGULATION_ OF_RESPONSE_TO_DNA_DAMAGE_ STIMULUS
GO_RESPONSE_TO_CAMP	HALMOS_CEBPA_TARGETS_DN	GO_MITOTIC_SISTER_ CHROMATID_COHESION	GO_NEGATIVE_REGULATION_ OF_SIGNAL_TRANSDUCTION_ BY_P53_CLASS_MEDIATOR

			Continued
Up-regulated	in G3TM PKD	Down-regulated	l in G3TM PKD
GO_RESPONSE_TO_COLD	HOUSTIS_ROS	GO_MODULATION_BY_HOST_ OF_VIRAL_PROCESS	GO_NEGATIVE_REGULATION_ OF_STAT_CASCADE
GO_RESPONSE_TO_DIETARY_ EXCESS	HUI_MAPK14_TARGETS_UP	GO_MRNA_TRANSCRIPTION	GO_NEGATIVE_REGULATION_ OF_TRANSMEMBRANE_ TRANSPORT
GO_RESPONSE_TO_MISFOLDED_ PROTEIN	HWANG_PROSTATE_CANCER_ MARKERS	GO_MRNA_TRANSCRIPTION_ FROM_RNA_POLYMERASE_II_ PROMOTER	GO_NEGATIVE_T_CELL_ SELECTION
GO_RESPONSE_TO_OXYGEN_ RADICAL	KANG_GLIS3_TARGETS	GO_NATURAL_KILLER_CELL_ ACTIVATION	GO_NEURON_PROJECTION_ REGENERATION
GO_RESPONSE_TO_ PHENYLPROPANOID	KEGG_ADIPOCYTOKINE_ SIGNALING_PATHWAY	GO_NATURAL_KILLER_CELL_ DIFFERENTIATION	GO_NUCLEAR_INCLUSION_BODY
GO_RETINA_HOMEOSTASIS	KEGG_RETINOL_METABOLISM	GO_NECROTIC_CELL_DEATH	GO_NUCLEOTIDASE_ACTIVITY
GO_RETINOL_DEHYDROGENASE_ ACTIVITY	KIM_BIPOLAR_DISORDER_ OLIGODENDROCYTE_DENSITY_ CORR_DN	GO_NEGATIVE_REGULATION_ OF_HOMEOSTATIC_PROCESS	GO_PHOSPHOLIPASE_C_ACTIVA TING_G_PROTEIN_COUPLED_ RECEPTOR_SIGNALING_PATHWAY
GO_SENSORY_PERCEPTION_ OF_TASTE	KIM_RESPONSE_TO_TSA_AND_ DECITABINE_UP	GO_NEGATIVE_REGULATION_ OF_LEUKOCYTE_APOPTOTIC_ PROCESS	GO_PHOSPHOLIPASE_ C_ACTIVITY
GO_SPERM_MOTILITY	LEE_LIVER_CANCER_ACOX1_UP	GO_NEGATIVE_REGULATION_OF_ LIPID_BIOSYNTHETIC_PROCESS	GO_PHOSPHOTRANSFERASE_ ACTIVITY_NITROGENOUS_ GROUP_AS_ACCEPTOR
GO_TETRAPYRROLE_BINDING	MATZUK_SPERMATID_ DIFFERENTIATION	GO_NEGATIVE_REGULATION_ OF_LYMPHOCYTE_APOPTOTIC_ PROCESS	GO_POLY_A_MRNA_EXPORT_ FROM_NUCLEUS
GO_U1_SNRNP	MEISSNER_ES_ICP_WITH_ H3K4ME3_AND_H3K27ME3	GO_NEGATIVE_REGULATION_ OF_LYMPHOCYTE_MEDIATED_ IMMUNITY	GO_POSITIVE_REGULATION_ OF_B_CELL_PROLIFERATION
GO_UBIQUITIN_LIKE_PROTEIN_ CONJUGATING_ENZYME_ BINDING	MIKKELSEN_IPS_LCP_WITH_ H3K27ME3	GO_NEGATIVE_REGULATION_ OF_MYELOID_CELL_APOPTOTIC_ PROCESS	GO_POSITIVE_REGULATION_OF_ CAMP_MEDIATED_SIGNALING
GO_VIRION_ASSEMBLY	MIKKELSEN_MEF_HCP_WITH_H3_ UNMETHYLATED	GO_NEGATIVE_REGULATION_ OF_OSTEOCLAST_ DIFFERENTIATION	GO_POSITIVE_REGULATION_OF_ ERYTHROCYTE_ DIFFERENTIATION
HALMOS_CEBPA_TARGETS_DN	NGUYEN_NOTCH1_TARGETS_UP	GO_NEGATIVE_REGULATION_ OF_RESPONSE_TO_BIOTIC_ STIMULUS	GO_POSITIVE_REGULATION_OF_ INTRINSIC_APOPTOTIC_ SIGNALING_PATHWAY
HEDVAT_ELF4_TARGETS_UP	NIKOLSKY_BREAST_CANCER_ 8Q23_Q24_AMPLICON	GO_NEGATIVE_REGULATION_OF_ RESPONSE_TO_DNA_DAMAGE_ STIMULUS	GO_POSITIVE_REGULATION_OF_ LYASE_ACTIVITY
HOUSTIS_ROS	PEDERSEN_METASTASIS_BY_ ERBB2_ISOFORM_6	GO_NEGATIVE_REGULATION_OF_ STAT_CASCADE	GO_POSITIVE_REGULATION_OF_ LYMPHOCYTE_MIGRATION
HOWLIN_CITED1_TARGETS_2_UP	REACTOME_APOPTOTIC_ CLEAVAGE_OF_CELL_ ADHESION_PROTEINS	GO_NEGATIVE_REGULATION_OF_ TRANSMEMBRANE_TRANSPORT	
HUI_MAPK14_TARGETS_UP	REACTOME_COMPLEMENT_ CASCADE	GO_NEGATIVE_REGULATION_OF_ TYPE_I_INTERFERON_ PRODUCTION	GO_POSITIVE_REGULATION_OF_ NUCLEOTIDE_METABOLIC_ PROCESS

			Continued
Up-regulated i	n G3TM PKD	Down-regulated	l in G3TM PKD
HWANG_PROSTATE_CANCER_ MARKERS	REACTOME_INITIAL_ TRIGGERING_OF_COMPLEMENT	GO_NUCLEOTIDASE_ACTIVITY	GO_POSITIVE_REGULATION_OF_ OXIDATIVE_STRESS_INDUCED_ CELL_DEATH
KANG_GLIS3_TARGETS	REACTOME_REGULATION_OF_ RHEB_GTPASE_ACTIVITY_BY_ AMPK	GO_OLIGOSACCHARIDE_ BIOSYNTHETIC_PROCESS	GO_POSITIVE_REGULATION_OF_ PROTEIN_DEACETYLATION
KEGG_PARKINSONS_DISEASE	REACTOME_TANDEM_PORE_ DOMAIN_POTASSIUM_CHANNELS	GO_OOCYTE_MATURATION	GO_POSITIVE_REGULATION_OF_ THYMOCYTE_AGGREGATION
KEGG_TASTE_TRANSDUCTION	SHANK_TAL1_TARGETS_DN	GO_PARTURITION	GO_PROSTANOID_METABOLIC_ PROCESS
KIM_BIPOLAR_DISORDER_ OLIGODENDROCYTE_DENSITY_ CORR_DN	SUBTIL_PROGESTIN_TARGETS	GO_PHOSPHATE_ION_BINDING	GO_PROTEIN_DESTABILIZATION
KIM_RESPONSE_TO_TSA_AND_ DECITABINE_UP	VALK_AML_CLUSTER_10	GO_PHOSPHATIDIC_ACID_ BINDING	GO_PROTEIN_ HOMOTRIMERIZATION
LEE_LIVER_CANCER_ACOX1_UP	VALK_AML_CLUSTER_15	GO_PHOSPHATIDYLINOSITOL_4_ PHOSPHATE_BINDING	GO_PYRIMIDINE_CONTAINING_ COMPOUND_SALVAGE
MATZUK_SPERMATID_ DIFFERENTIATION	VALK_AML_WITH_EVI1	GO_PHOSPHOLIPASE_C_ACTIVA TING_G_PROTEIN_COUPLED_ RECEPTOR_SIGNALING_PATHWAY	GO_REGULATION_OF_ ADENYLATE_CYCLASE_ACTIVITY
MEISSNER_ES_ICP_WITH_ H3K4ME3_AND_H3K27ME3	WANG_BARRETTS_ESOPHAGUS_ AND_ESOPHAGUS_CANCER_UP	GO_PHOSPHOLIPASE_C_ ACTIVITY	GO_REGULATION_OF_ALPHA_ AMINO_3_HYDROXY_5_METHYL_ 4_ISOXAZOLE_PROPIONATE_ SELECTIVE_GLUTAMATE_ RECEPTOR_ACTIVITY
MIKKELSEN_MEF_HCP_WITH_H3_ UNMETHYLATED	WANG_PROSTATE_CANCER_ ANDROGEN_INDEPENDENT	GO_PHOSPHOTRANSFERASE_ ACTIVITY_NITROGENOUS_ GROUP_AS_ACCEPTOR	GO_REGULATION_OF_B_CELL_ RECEPTOR_SIGNALING_PATHWAY
NGUYEN_NOTCH1_TARGETS_UP	WANG_RESPONSE_TO_ ANDROGEN_UP	GO_POSITIVE_REGULATION_OF_ ALCOHOL_BIOSYNTHETIC_ PROCESS	GO_REGULATION_OF_BONE_ DEVELOPMENT
NIKOLSKY_BREAST_CANCER_ 8Q23_Q24_AMPLICON	WEBER_METHYLATED_HCP_IN_ SPERM_DN	GO_POSITIVE_REGULATION_OF_ B_CELL_DIFFERENTIATION	GO_REGULATION_OF_BONE_ RESORPTION
PEDERSEN_METASTASIS_BY_ ERBB2_ISOFORM_6	YAO_TEMPORAL_RESPONSE_TO_ PROGESTERONE_CLUSTER_10	GO_POSITIVE_REGULATION_OF_ B_CELL_PROLIFERATION	GO_REGULATION_OF_DEFENSE_ RESPONSE_TO_VIRUS_BY_HOST
REACTOME_COMPLEMENT_ CASCADE	YAO_TEMPORAL_RESPONSE_TO_ PROGESTERONE_CLUSTER_5	GO_POSITIVE_REGULATION_OF_ CELLULAR_EXTRAVASATION	GO_REGULATION_OF_ ERYTHROCYTE_DIFFERENTIATION
REACTOME_FORMATION_OF_ ATP_BY_CHEMIOSMOTIC_ COUPLING	YAO_TEMPORAL_RESPONSE_TO_ PROGESTERONE_CLUSTER_9	GO_POSITIVE_REGULATION_OF_ ERYTHROCYTE_ DIFFERENTIATION	GO_REGULATION_OF_FEVER_ GENERATION
REACTOME_INITIAL_ TRIGGERING_OF_COMPLEMENT	ZHOU_PANCREATIC_EXOCRINE_ PROGENITOR	GO_POSITIVE_REGULATION_OF_ INTERFERON_ALPHA_PRODUCTI ON	GO_REGULATION_OF_INTRINSIC _APOPTOTIC_SIGNALING_ PATHWAY
REACTOME_OXYGEN_DEPENDENT_ PROLINE_HYDROXYLATION_ OF_HYPOXIA_INDUCIBLE_ FACTOR_ALPHA	-	GO_POSITIVE_REGULATION_OF_ INTERFERON_BETA_ PRODUCTION	GO_REGULATION_OF_INTRINSIC_ APOPTOTIC_SIGNALING_PATHWAY_ BY_P53_CLASS_MEDIATOR
REACTOME_REGULATION_OF_ RHEB_GTPASE_ACTIVITY_BY_ AMPK		GO_POSITIVE_REGULATION_OF_ LAMELLIPODIUM_ASSEMBLY	GO_REGULATION_OF_INTRINSIC_ APOPTOTIC_SIGNALING_ PATHWAY_IN_RESPONSE_ TO_DNA_DAMAGE

		Continued
Up-regulated in G3TM PKD	Down-regulated	in G3TM PKD
REACTOME_RESPIRATORY_ ELECTRON_TRANSPORT	GO_POSITIVE_REGULATION_OF_ LYASE_ACTIVITY	GO_REGULATION_OF_INTRINSIC_ APOPTOTIC_SIGNALING_ PATHWAY_IN_RESPONSE_TO_ DNA_DAMAGE_BY_P53_CLASS_ MEDIATOR
REACTOME_RESPIRATORY_ELECT RON_TRANSPORT_ATP_SYNTHE SIS_BY_CHEMIOSMOTIC_COUPLI NG_AND_HEAT_PRODUCTION_B Y_UNCOUPLING_PROTEINS_	GO_POSITIVE_REGULATION_OF_ LYMPHOCYTE_MIGRATION	GO_REGULATION_OF_LYASE_ ACTIVITY
REACTOME_TANDEM_PORE_ DOMAIN_POTASSIUM_CHANNELS	GO_POSITIVE_REGULATION_OF_ MEMBRANE_INVAGINATION	GO_REGULATION_OF_ MEMBRANE_INVAGINATION
REACTOME_TIGHT_JUNCTION_ INTERACTIONS	GO_POSITIVE_REGULATION_OF_ NATURAL_KILLER_CELL_ MEDIATED_IMMUNITY	GO_REGULATION_OF_PROTEIN_ TYROSINE_KINASE_ACTIVITY
REACTOME_XENOBIOTICS	GO_POSITIVE_REGULATION_OF_ NUCLEOTIDE_METABOLIC_ PROCESS	GO_REGULATION_OF_ RECEPTOR_BINDING
SHANK_TAL1_TARGETS_DN	GO_POSITIVE_REGULATION_OF_ PROTEIN_ AUTOPHOSPHORYLATION	GO_REGULATION_OF_T_CELL_ APOPTOTIC_PROCESS
SUBTIL_PROGESTIN_TARGETS	GO_POSITIVE_REGULATION_OF_ RESPONSE_TO_CYTOKINE_ STIMULUS	GO_REGULATION_OF_ THYMOCYTE_AGGREGATION
VALK_AML_CLUSTER_10	GO_POSITIVE_REGULATION_OF_ T_CELL_MEDIATED_IMMUNITY	GO_REGULATION_OF_THYMOCYTE_ APOPTOTIC_PROCESS
VALK_AML_WITH_EVI1	GO_POSITIVE_REGULATION_OF_ THYMOCYTE_AGGREGATION	GO_RESPONSE_TO_SALT
VANLOO_SP3_TARGETS_DN	GO_PROSTANOID_ BIOSYNTHETIC_PROCESS	GO_RETINAL_BINDING
WAMUNYOKOLI_OVARIAN_ CANCER_LMP_UP	GO_PROSTANOID_METABOLIC_ PROCESS	GO_SKELETAL_MUSCLE_ CONTRACTION
WANG_BARRETTS_ESOPHAGUS_ AND_ESOPHAGUS_CANCER_UP	GO_PROTEIN_C_TERMINUS_ BINDING	GO_SULFATION
WEBER_METHYLATED_HCP_IN_ SPERM_DN	GO_PROTEIN_DESTABILIZATION	GO_SUMO_TRANSFERASE_ ACTIVITY
YAO_TEMPORAL_RESPONSE_TO_ PROGESTERONE_CLUSTER_10	GO_PYRIMIDINE_CONTAINING_ COMPOUND_SALVAGE	GO_SUPEROXIDE_METABOLIC_ PROCESS
YAO_TEMPORAL_RESPONSE_TO_ PROGESTERONE_CLUSTER_5	GO_REGULATION_OF_ACTIVATED_ T_CELL_PROLIFERATION	GO_THYMIC_T_CELL_SELECTION
YAO_TEMPORAL_RESPONSE_TO_ PROGESTERONE_CLUSTER_9	GO_REGULATION_OF_ANTIGEN_ PROCESSING_AND_ PRESENTATION	GO_THYMOCYTE_ AGGREGATION
	GO_REGULATION_OF_B_CELL_ PROLIFERATION	GO_TRANSCRIPTIONAL_REPRESSOR_ ACTIVITY_RNA_POLYMERASE_II_ CORE_PROMOTER_PROXIMAL_ REGION_SEQUENCE_SPECIFIC_ BINDING
	GO_REGULATION_OF_B_CELL_ RECEPTOR_SIGNALING_PATHWAY	GO_XENOPHAGY

		Continued	
Up-regulated in G3TM PKD	Down-regulated in G3TM PKD		
	GO_REGULATION_OF_BONE_ DEVELOPMENT	HANSON_HRAS_SIGNALING_ VIA_NFKB	
	GO_REGULATION_OF_BONE_ REMODELING	HERNANDEZ_MITOTIC_ARREST_ BY_DOCETAXEL_2_UP	
	GO_REGULATION_OF_BONE_ RESORPTION	HOFMANN_MYELODYSPLASTIC_ SYNDROM_HIGH_RISK_DN	
	GO_REGULATION_OF_ERYTHRO CYTE_DIFFERENTIATION	HOFMANN_MYELODYSPLASTIC_ SYNDROM_RISK_DN	
	GO_REGULATION_OF_FEVER_ GENERATION	HOLLEMAN_DAUNORUBICIN_B_ ALL_DN	
	GO_REGULATION_OF_INTERFERON_ ALPHA_PRODUCTION	HOLLEMAN_VINCRISTINE_ RESISTANCE_ALL_DN	
	GO_REGULATION_OF_INTERFERON_ BETA_PRODUCTION	HUMMERICH_BENIGN_SKIN_ TUMOR_DN	
	GO_REGULATION_OF_LYASE_ ACTIVITY	HUMMERICH_MALIGNANT_ SKIN_TUMOR_DN	
	GO_REGULATION_OF_ LYMPHOCYTE_CHEMOTAXIS	IYENGAR_RESPONSE_TO_ ADIPOCYTE_FACTORS	
	GO_REGULATION_OF_ MEMBRANE_INVAGINATION	KAYO_CALORIE_RESTRICTION_ MUSCLE_UP	
	GO_REGULATION_OF_MRNA_ CATABOLIC_PROCESS	KEGG_AMYOTROPHIC_LATERAL_ SCLEROSIS_ALS	
	GO_REGULATION_OF_NITRIC_ OXIDE_SYNTHASE_ BIOSYNTHETIC_PROCESS	KORKOLA_ CHORIOCARCINOMA_DN	
	GO_REGULATION_OF_PROTEIN_ TYROSINE_KINASE_ACTIVITY	KRIEG_KDM3A_TARGETS_NOT_ HYPOXIA	
	GO_REGULATION_OF_T_CELL_ APOPTOTIC_PROCESS	KUROKAWA_LIVER_CANCER_ CHEMOTHERAPY_UP	
	GO_REGULATION_OF_T_CELL_ CHEMOTAXIS	LU_TUMOR_ENDOTHELIAL_ MARKERS_UP	
	GO_REGULATION_OF_T_CELL_ MEDIATED_IMMUNITY	LU_TUMOR_VASCULATURE_UP	
	GO_REGULATION_OF_T_CELL_ MIGRATION	MA_MYELOID_ DIFFERENTIATION_UP	
	GO_REGULATION_OF_TOLL_ LIKE_RECEPTOR_SIGNALING_ PATHWAY	MATZUK_MALE_ REPRODUCTION_SERTOLI	
	GO_REGULATION_OF_TRANSCRI PTION_INITIATION_FROM_RNA_ POLYMERASE_II_PROMOTER	MATZUK_OVULATION	
	GO_REGULATION_OF_TYPE_I_ INTERFERON_MEDIATED_N SIGNALIG_PATHWAY	MEISSNER_NPC_ICP_WITH_ H3K4ME3	
	GO_REGULATION_OF_TYPE_I_ INTERFERON_PRODUCTION	MMS_MOUSE_LYMPH_HIGH_ 4HRS_UP	
	GO_RESPONSE_TO_ACIDIC_PH	MOSERLE_IFNA_RESPONSE	

		Continued
Up-regulated in G3TM PKD	Down-regula	ted in G3TM PKD
	GO_RESPONSE_TO_ EXOGENOUS_DSRNA	NAKAMURA_LUNG_CANCER_ DIFFERENTIATION_MARKERS
	GO_RESPONSE_TO_MURAMYL_ DIPEPTIDE	NIKOLSKY_BREAST_CANCER_ 1Q21_AMPLICON
	GO_RESPONSE_TO_PLATELET_ DERIVED_GROWTH_FACTOR	PID_LPA4_PATHWAY
	GO_RESPONSE_TO_VIRUS	PID_PI3KCI_PATHWAY
	GO_RETINAL_BINDING	RADAEVA_RESPONSE_TO_ IFNA1_UP
	GO_RETINOL_BINDING	REACTOME_ADENYLATE_ CYCLASE_ACTIVATING_PATHWAY
	GO_RNA_DESTABILIZATION	REACTOME_ADENYLATE_ CYCLASE_INHIBITORY_PATHWAY
	GO_SUMO_TRANSFERASE_ ACTIVITY	REACTOME_DSCAM_ INTERACTIONS
	GO_THYMOCYTE_ AGGREGATION	REACTOME_G_ALPHA_Z_ SIGNALLING_EVENTS
	GO_THYROID_HORMONE_ RECEPTOR_BINDING	REACTOME_INTRINSIC_ PATHWAY_FOR_APOPTOSIS
	GO_TOLL_LIKE_RECEPTOR_4_ SIGNALING_PATHWAY	REACTOME_PLATELET_ADHESION_ TO_EXPOSED_COLLAGEN
	GO_TRANSCRIPTION_FACTOR_ ACTIVITY_RNA_POLYMERASE_II_ CORE_PROMOTER_SEQUENCE_ SPECIFIC	REACTOME_PROSTACYCLIN_ SIGNALLING_THROUGH_ PROSTACYCLIN_RECEPTOR
	GO_TUMOR_NECROSIS_ FACTOR_RECEPTOR_BINDING	REACTOME_REGULATION_OF_ KIT_SIGNALING
	GO_TUMOR_NECROSIS_FACTOR_ RECEPTOR_SUPERFAMILY_ BINDING	REACTOME_RIP_MEDIATED_ NFKB_ACTIVATION_VIA_DAI
	GRANDVAUX_IFN_RESPONSE_ NOT_VIA_IRF3	REACTOME_TAK1_ACTIVATES_ NFKB_BY_PHOSPHORYLATION_ AND_ACTIVATION_OF_IKKS_ COMPLEX
	HALLMARK_INTERFERON_ALPHA_ RESPONSE	REACTOME_TRAF6_MEDIATED_ NFKB_ACTIVATION
	HALLMARK_INTERFERON_ GAMMA_RESPONSE	RICKMAN_HEAD_AND_NECK_ CANCER_C
	HANSON_HRAS_SIGNALING_ VIA_NFKB	RODRIGUES_THYROID_ CARCINOMA_UP
	HOFMANN_MYELODYSPLASTIC_ SYNDROM_HIGH_RISK_DN	SCHEIDEREIT_IKK_TARGETS
	HOFMANN_MYELODYSPLASTIC_ SYNDROM_RISK_DN	SCHLESINGER_METHYLATED_ IN_COLON_CANCER
	HOLLEMAN_ASPARAGINASE_ RESISTANCE_B_ALL_DN	SHIN_B_CELL_LYMPHOMA_ CLUSTER_2
	IYENGAR_RESPONSE_TO_ ADIPOCYTE_FACTORS	SIG_CD40PATHWAYMAP

		Continued
Up-regulated in G3TM PKD	Down-	regulated in G3TM PKD
	KEGG_GLYCOSAMINOGLYCAN_ BIOSYNTHESIS_CHONDROITIN_ SULFATE	SPIELMAN_LYMPHOBLAST_ EUROPEAN_VS_ASIAN_2FC_DN
	KORKOLA_ CHORIOCARCINOMA_DN	ST_B_CELL_ANTIGEN_RECEPTOR
	KRIEG_KDM3A_TARGETS_NOT_ HYPOXIA	ST_T_CELL_SIGNAL_ TRANSDUCTION
	KUROKAWA_LIVER_CANCER_ CHEMOTHERAPY_UP	XU_CREBBP_TARGETS_DN
	KYNG_WERNER_SYNDROM_UP	ZEMBUTSU_SENSITIVITY_TO_ MITOMYCIN
	LEE_CALORIE_RESTRICTION_ MUSCLE_DN	ZHAN_LATE_DIFFERENTIATION_ GENES_DN
	LU_TUMOR_ENDOTHELIAL_ MARKERS_UP	ZHOU_INFLAMMATORY_ RESPONSE_FIMA_DN
	LU_TUMOR_VASCULATURE_UP	
	MA_MYELOID_ DIFFERENTIATION_UP	
	MAHADEVAN_RESPONSE_TO_ MP470_UP	
	MARIADASON_RESPONSE_TO_ CURCUMIN_SULINDAC_7	
	MATZUK_MALE_ REPRODUCTION_SERTOLI	
	MATZUK_OVULATION	
	MOSERLE_IFNA_RESPONSE	
	MULLIGHAN_MLL_ SIGNATURE_2_UP	
	NAKAMURA_ADIPOGENESIS_ EARLY_UP	
	OUELLET_OVARIAN_CANCER_ INVASIVE_VS_LMP_DN	
	PARK_TRETINOIN_RESPONSE	
	PID_EPO_PATHWAY	
	PID_LPA4_PATHWAY	
	PID_PI3KCI_PATHWAY	
	PID_S1P_S1P3_PATHWAY	
	PID_WNT_NONCANONICAL_ PATHWAY	
	RADAEVA_RESPONSE_TO_ IFNA1_UP	
	RASHI_RESPONSE_TO_ IONIZING_RADIATION_4	
	RAY_TUMORIGENESIS_BY_ ERBB2_CDC25A_UP	

	Continued	
Up-regulated in G3TM PKD	Down-regulated in G3TM PKD	
	REACTOME_ACTIVATION_OF_ IRF3_IRF7_MEDIATED_BY_TBK1_ IKK_EPSILON	
	REACTOME_ADENYLATE_ CYCLASE_ACTIVATING_PATHWAY	
	REACTOME_ADENYLATE_ CYCLASE_INHIBITORY_PATHWAY	
	REACTOME_APOPTOSIS	
	REACTOME_APOPTOTIC_ EXECUTION_PHASE	
	REACTOME_DSCAM_ INTERACTIONS	
	REACTOME_EARLY_PHASE_OF_ HIV_LIFE_CYCLE	
	REACTOME_IL_2_SIGNALING	
	REACTOME_IL_3_5_AND_GM_ CSF_SIGNALING	
	REACTOME_IL_RECEPTOR_SHC_ SIGNALING	
	REACTOME_PD1_SIGNALING	
	REACTOME_PHOSPHORYLATION_ OF_CD3_AND_TCR_ZETA_ CHAINS	
	REACTOME_REGULATION_OF_ KIT_SIGNALING	
	REACTOME_RIP_MEDIATED_ NFKB_ACTIVATION_VIA_DAI	
	REACTOME_TAK1_ACTIVATES_ NFKB_BY_PHOSPHORYLATION_ AND_ACTIVATION_OF_IKKS_ COMPLEX	
	REACTOME_TRAF6_MEDIATED_ INDUCTION_OF_TAK1_COMPLEX	
	REACTOME_TRAF6_MEDIATED_ NFKB_ACTIVATION	
	REACTOME_TRAFFICKING_ AND_PROCESSING_OF_ ENDOSOMAL_TLR	
	RODRIGUES_THYROID_ CARCINOMA_UP	
	ROSS_AML_WITH_CBFB_ MYH11_FUSION	
	SANA_RESPONSE_TO_IFNG_UP	
	SCHEIDEREIT_IKK_TARGETS	
	SIG_PIP3_SIGNALING_IN_ CARDIAC_MYOCTES	

	Continued
Up-regulated in G3TM PKD	Down-regulated in G3TM PKD
	ST_B_CELL_ANTIGEN_RECEPTOR
	ST_T_CELL_SIGNAL_ TRANSDUCTION
	ST_TUMOR_NECROSIS_FACTOR_ PATHWAY
	TONKS_TARGETS_OF_RUNX1_ RUNX1T1_FUSION_ ERYTHROCYTE_DN
	TURASHVILI_BREAST_NORMAL_ DUCTAL_VS_LOBULAR_UP
	WU_HBX_TARGETS_3_UP
	WUNDER_INFLAMMATORY_RES PONSE_AND_CHOLESTEROL_UP
	XU_AKT1_TARGETS_6HR
	XU_CREBBP_TARGETS_DN
	YANG_BCL3_TARGETS_UP
	ZEMBUTSU_SENSITIVITY_TO_ NIMUSTINE
	ZHAN_LATE_DIFFERENTIATION_ GENES_DN
	ZHAN_MULTIPLE_MYELOMA_ HP_UP
	ZHONG_SECRETOME_OF_LUNG_ CANCER_AND_MACROPHAGE
	ZHOU_INFLAMMATORY_ RESPONSE_FIMA_DN

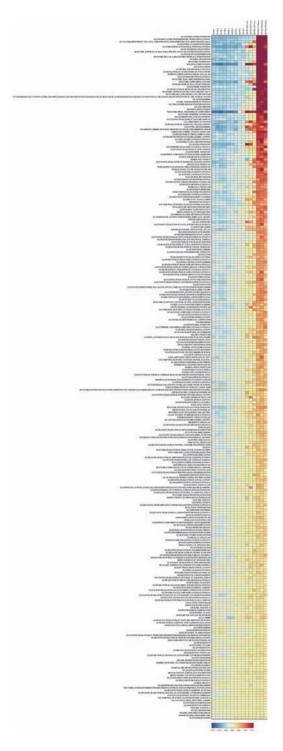


Figure S1 A heatmap of gene expression profiles (ssGSEA analysis results of the RNA-seq data using Hallmark, C2, and C5 datasets) in MEFs from G1DM, G2DM, G3DM, G1TM, G2TM, and G3TM mice, as well as the tumors and cystic kidneys from G3TM mice. The pathways were ranked by scores, showing upregulation in cystic kidney, as well as in the tumor and G3TM MEFs.

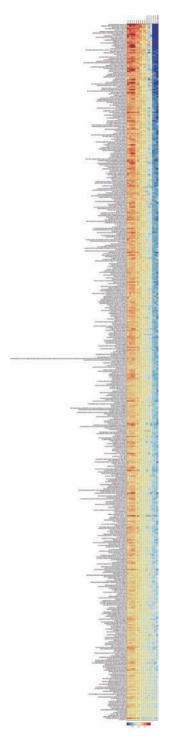


Figure S2 A heatmap of gene expression profiles (ssGSEA analysis results of the RNA-seq data using Hallmark, C2, and C5 datasets) in MEFs from G1DM, G2DM, G3DM, G1TM, G2TM, and G3TM mice, as well as tumors and cystic kidneys from G3TM mice. The pathways were ranked by scores showing the downregulation in the cystic kidney, as well as in tumor and in G3TM MEFs.