

Development of a five-gene signature as a novel prognostic marker in ovarian cancer

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The prognosis of ovarian cancer (OC) remains poor. Thus, the present study aims to identify independent prognostic factor in OC patients. OC gene expression studies GSE26712 and TCGA-OV were included in this study. Prognosis-associated differentially expressed genes (DEGs) between normal ovarian tissue and OC were identified. LASSO Cox proportional hazards regression model was conducted and a prognostic signature was constructed based on these DEGs. The predictive ability of the signature was analyzed in the training set and test set. The prognosis performance of the signature was compared with CA-125 and HE4. Gene set enrichment analysis (GSEA) was conducted to identify relevant mechanism. 332 DEGs were identified, out of which 64 DEGs were significantly correlated with the overall survival (OS) of OC patients, and 5 DEGs (IGF2, PEG3, DCN, LYPD1 and RARRES1) were applied to build a 5-gene signature. Patients in the 5-gene signature low-risk group had significantly better OS compared to those in the 5-gene high-risk group ($p=0.0004$) in the training set. Similar results were found in the test set, and the signature was also an independent prognostic factor. The prognosis performance of the 5-gene signature was significantly better than that of CA-125 and HE4. GSEA suggested that OC samples in the 5-gene high-risk group were significantly enriched in WNT/ β -catenin signaling and epithelial-mesenchymal transition. We developed and validated a 5-gene signature that might be used as an independent prognostic factor in patients with OS.

Key words: ovarian cancer; prognostic signature; overall survival

Ovarian cancer (OC) represents the most lethal type of gynecological malignance and is a clinically heterogeneous disease as demonstrated through associations with family history of cancer, genetic risk and histopathology of this disease [1, 2]. Epithelial cancer accounts for about 95% of the OC [2]. Owing to the fact that nearly 70% of OC patients are diagnosed at stages III and IV according to the International Federation of Gynecology and Obstetrics (FIGO) and that more than 30% of OC patients will develop acquired chemoresistance and eventually relapse, the 5-year overall survival remains poor [3, 4]. Thus, developing novel prognostic tools to stratify seemingly identical patients and redirect them to more precise therapies is of great importance. There have been many recent improvements in the sequencing technology. Subsequently, a variety of OC gene expression studies have been published [5, 6]. Therefore, in this study

we developed and validated a five-gene based prognostic signature for patients with OC. It has been reported that these five genes (IGF2[7], PEG3[8], DCN[9], LYPD1[10] and RARRES1[11]) were associated with survival and cell growth of multiple human cancers.

Materials and methods

OC gene expression studies. OC gene expression study GSE26712 [5] and TCGA-OV [12] were included in this study. GSE26712, which included 195 ovary tissue samples (10 normal, 185 malignant) was used as a training set. TCGA-OV, which included 564 patients whose survival time was fully documented, was used as a test set.

Data processing and analysis. Raw data of GSE26712 was downloaded from gene expression omnibus (GEO)

database and preprocessed and normalized using R “affy” package [13], and then the DEGs between normal ovarian tissue and OC were calculated using R package “limma” [14]. Genes at $|\log_2FC| > 2$ and adjusted $p < 0.05$ were treated as DEGs. Log-rank based survival analyses were conducted to identify DEGs that were significantly correlated with the overall survival (OS) of patients with OC. LASSO Cox regression model was applied to select prognostic DEGs to predict the OS by 10-fold cross-validation and the risk scores for each patient were calculated using R package “glmnet” [15]. Time-dependent receiver operating characteristic

curve (ROC) analysis was conducted to find the optimal cut-off and stratify OC patients into low-risk group and high-risk group in the training set and test set [16]. Thus, we constructed a prognostic signature on the basis of LASSO Cox regression model. Logistic regression model and Cox proportional hazards regression model were performed to analyze the relation between the clinical features of OC patients and the 5-gene signature and to identify prognostic factors in OC. Odds ratios (ORs) or hazards ratios (HRs) and associated confidence intervals (CIs) were calculated using maximum likelihood estimates, along with Wald test

Table 1. Characteristics of OC patients in the test set.

Variable	total number	Group		Logistic regression analysis			
		Low-risk	High-risk	OR	LCI	UCI	p-value
Age (year)							
<60	295	112	183	1.002	0.987	1.017	0.783
≥60	269	107	162				
Stage							
Early stage	46	26	20	0.872	0.778	0.974	0.016
Late stage	518	193	325				
Grade							
Grade 1	9	7	2	0.719	0.481	1.068	0.103
Grade 2	69	28	41				
Grade 3	476	178	298				
NA	10	6	4				

Abbreviations: OR, odds ratio; LCI, lower limit of confidence interval; UCI, upper limit of confidence.

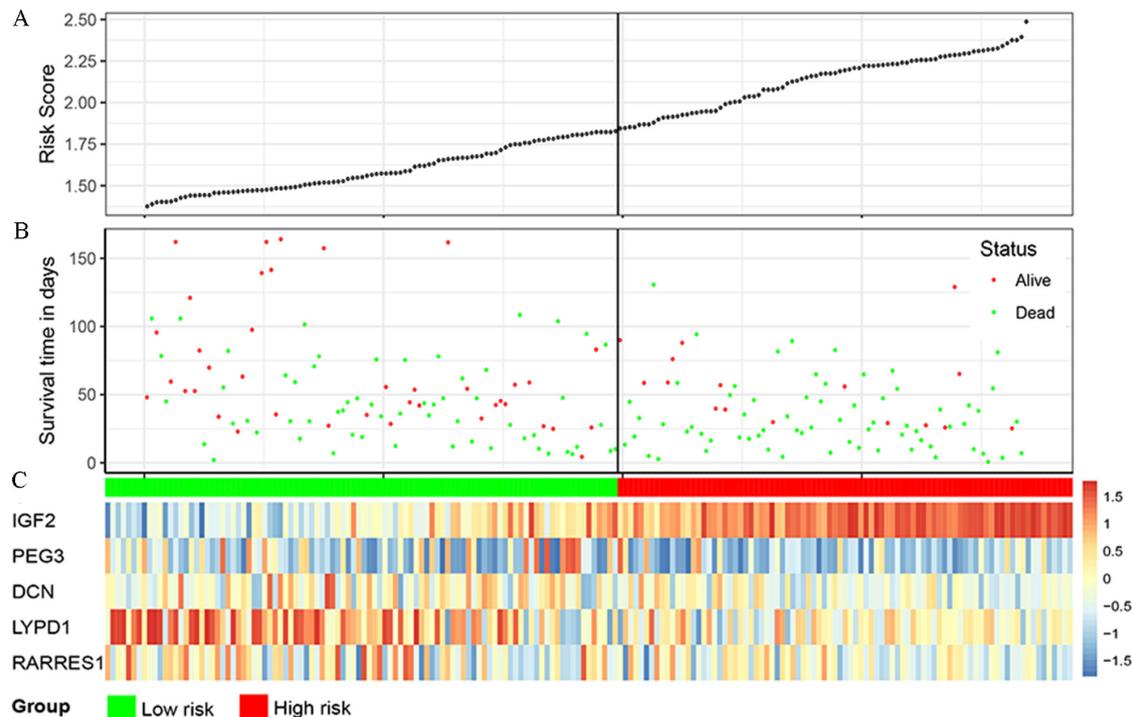


Figure 1. Characteristics of the 5-gene prognostic signature. A) the risk of each OC patients. B) the overall survival and survival status of each OC patients. C) heat-map of the 5 genes in the signature.

p-values. Thus, the prognostic role of the signature was investigated in the training set and test set. C-index, also known as concordance index, provides a global assessment of a fitted survival model. To evaluate the performance of the 5-gene signature, we compared the C-index of the 5-gene signature with other prognostic biomarkers (CA-125 and HE4) [17] using R package “survcomp [18]”. Finally, to identify potentially relevant mechanisms that were associated with the OC patient survival, gene set enrichments analysis (GSEA) was conducted, and gene set at nominal $p < 0.05$ and false discovery rate (FDR) $< 25\%$ were treated as significantly enriched [19, 20].

Results

Characteristics of OC patients. A total of 185 high grade, advanced stage OC patients were included in the training set and the age of OC patients was not available. Meanwhile, a total of 564 OC patients were included in the TCGA-OV data set (the test set), of which 295 (52.3%) OC patients were younger than 60 years old and the remaining 269 OC patients were not younger than 60 years. Regarding the stage, 46 (8.2%) patients were early stage OC and 518 (91.8%) OC patients were advanced stage OC in the test set. As for the grade, 9 (1.6%) patients were grade 1 OC, 69 (12.2%) patients were grade 2 OC and 474 (84.4%) patients were grade 3 OC in the test set (Table 1).

Prognostic signature construction. As shown in Table S1, a total of 332 DEGs were identified between normal ovarian tissue and OC in the training set (Table S1). Then, 64 genes were significantly correlated with the OS of the OC patients using univariate Cox proportional hazards regression analysis (Table S2). We then constructed a 5-gene based prognostic signature using L1-penalized Cox proportional hazards regression on the training set (Figure 1, Table S3).

The prognostic role of the 5-gene signature in OC. We divided the OC patients into the 5-gene signature low-risk group and high-risk group on the basis of the cutoff (1.575) calculated using the time-dependent ROC analysis (Figure 2A). As shown in Figure 2B, patients in the 5-gene signature low-risk group had significantly better OS compared to those in the 5-gene high-risk group (HR=0.5391, 95% CI: 0.3801–0.7646, $p=0.0004$).

Validation of the prognostic role of the 5-gene signature in the test set. To validate the predictive role of the 5-gene signature, we first performed logistic regression analysis. As shown in Table 1, the 5-gene signature was significantly correlated with the stage of OC patients (OR=0.872, 95% CI: 0.778–0.974, $p=0.016$, Table 1). The results of KM survival analysis suggest that the OS favors patients in 5-gene signature low-risk group over those in high-risk group (HR=0.6186, 95% CI: 0.4849–0.7891, $p=0.0001$, Figure 3A) in the test set. Furthermore, although the 5-gene signature did not play a prognostic role in patients with early stage OC (HR=

0.4689, 95% CI: 0.1196–1.839, $p=0.3$, Figure 3B), a lower risk of signature was related with significantly better prognosis of patients with advanced stage OC (HR=0.6274, 95% CI: 0.4892–0.8047, $p=0.0002$, Figure 3C) in the set. Univariate and multivariable hazards regression analysis suggest that the 5-gene signature is an independent prognostic factor for OC (Table 2). Meanwhile, the results of Kaplan-Meier survival analysis suggest that lower expression of IGF2, DCN, LYPD1 and RARRES1 is associated with better OS in the training set and test set (Figure S1 and Figure S2).

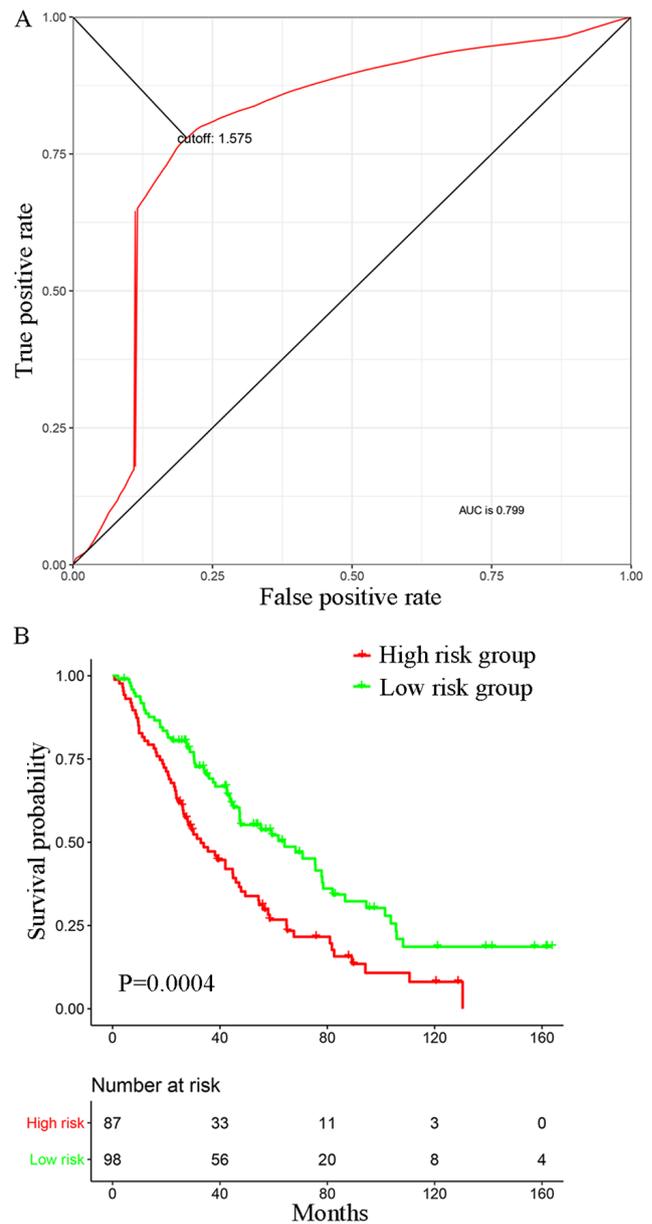
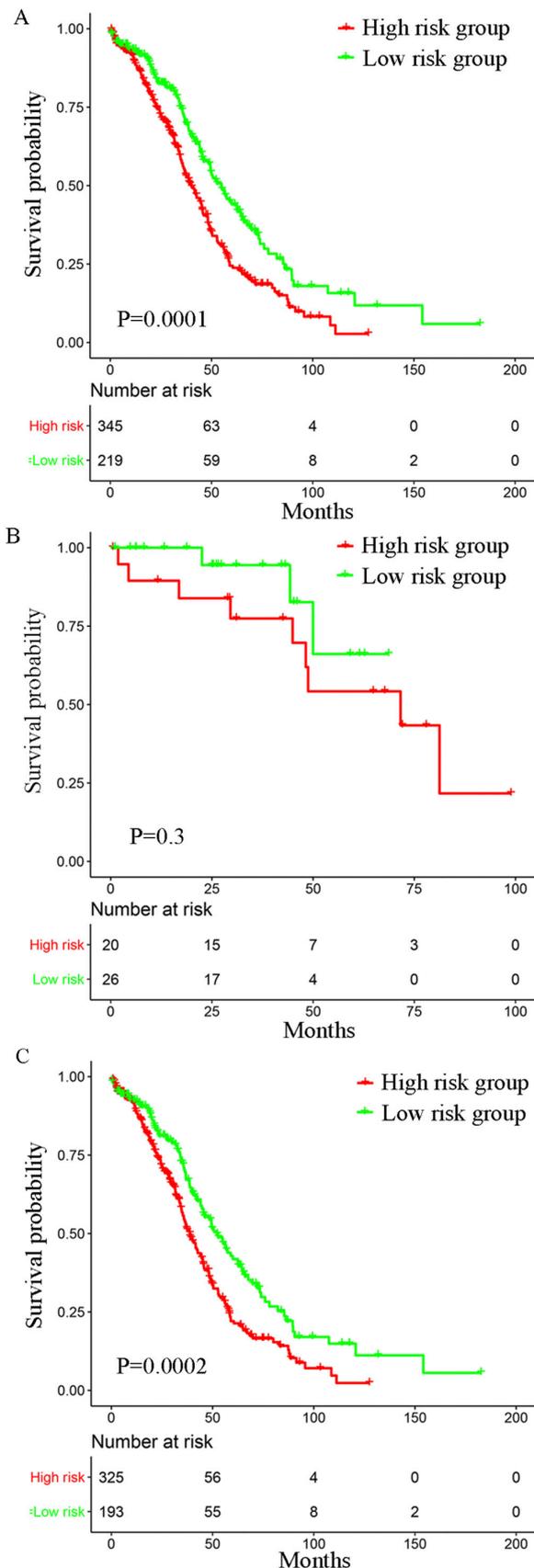


Figure 2. The prognostic role of the 5-gene signature in the training set. A) time-dependent survival ROC analysis. B) the overall survival of patients in low-risk group and high-risk group.



Comparison of the prognostic performance between the 5-gene signature and CA-125 and HE4. CA 125, also known as mucin 16 (MUC16), is a large membrane glycoprotein belonging to the wide mucin family and widely used as a tumor marker of OC [21]. Human epididymis protein 4 (HE4) is the FDC2 (HE4) gene product that has been treated as a new biomarker in OC[22]. Thus, we compared the prognosis performance of the 5-gene signature with CA-125 and HE4 in the TCGA ovarian cancer cohort (n=564). As shown in Figure 4, the C-index for the 5-gene signature is significantly higher compared to that for CA-125 (0.686 vs 0.539, $p < 0.001$) and HE4 (0.686 vs 0.576, $p < 0.001$) (Figure 4). **GSEA of OC samples.** Finally, we conducted GSEA to find associated mechanisms confirming that the 5-gene signature affected the prognosis of patients with OC. As shown in Figure 5, OC samples in the 5-gene high-risk group were significantly enriched in WNT/ β -catenin signaling (enrichment score: 0.514782, P : 0.024, FDR: 18.83%) and epithelial-mesenchymal transition (EMT) (enrichment score: 0.706814, p =0.0397, FDR: 5.07%).

Discussion

In this study, we identified DEGs between normal ovarian tissue and OC cells, identified prognostic DEGs correlated with the OS of OC patients, and a 5-gene signature was constructed after these prognostic DEGs were included into a Cox proportional hazards regression model combined with the least absolute shrinkage and selection operator. The prognostic role of the 5-gene signature was analyzed and validated in the training set and test set. Finally, GSEA was conducted to investigate potentially relevant mechanism.

Five genes in the prognostic signature were IGF2, PEG3, DCN, LYPD1 and RARRES1. In fact, there were several studies that have reported the 5 genes in the cancer pathogenesis and progression. Xu et al. suggested that the expression levels of IGF2 and CD133 were positively correlated with each other in primary ESCC [23] and that concurrent upregulation of IGF2 and CD133 expression was significantly related with poor patient prognosis. They were also found to be involved in colorectal cancer, liver cancer, adrenocortical carcinomas, etc. [7, 24, 25]. Meanwhile, Jiang et al. demonstrated that down-regulation of PEG3 stimulated beta-catenin pathway and promoted glioma cell growth, which was similar to the results of our GSEA showing that OC patients in the 5-gene high-risk group were significantly enriched in WNT/beta-catenin signaling pathway [26]. Li et al. demonstrated that DCN, accompanied by HSPD1, could be considered as a biomarker for colon cancer [27]. Xu Y et al. demonstrated that decreased expression of DCN promoted proliferation

Figure 3. Validation of the prognostic role in the test set. A) the overall survival of patients in the whole population. B) the overall survival of patients with early stage OC. C) the overall survival of patients with advanced stage OC.

Table 2. Univariate and multivariable Cox proportional hazards regression analysis on the overall survival of OC patients.

Variable	Univariate Cox proportional hazards regression analysis				Multivariable Cox proportional hazards regression analysis			
	HR	LCI	UCI	p-value	HR	LCI	UCI	p-value
Age	1.021	1.01	1.032	<0.001	1.021	1.011	1.032	<0.001
Stage	1.173	1.054	1.305	0.003	1.155	1.037	1.288	0.009
Grade	1.337	0.999	1.787	0.05	1.275	0.951	1.711	0.104
5-gene signature	3.484	1.187	10.23	0.023	3.842	1.289	11.459	0.016

Abbreviations: HR, hazards ratio; LCI, lower limit of confidence interval; UCI, upper limit of confidence interval.

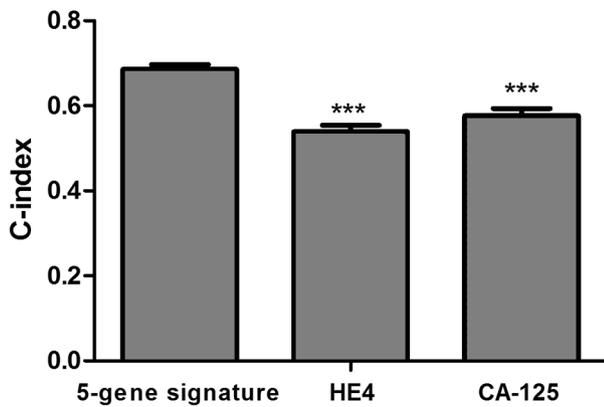


Figure 4. The C-index for the 5-gene signature, CA-125, and HE4. ***p<0.001

and metastasis of renal cell carcinoma cells [9]. Burnett et al. demonstrated that LYPD1 was up-regulated in breast cancer cells and was associated with the metastasis of the disease [28]. Oldridge et al. demonstrated that retinoic acid inhibited proliferation and invasion through inducing RARRES1 and LXN [29]. Wu et al. demonstrated that the expression of RARRES1 was significantly associated with tumor differentiation and staging in colorectal adenocarcinoma [11]. The above studies show that our signature might play an important role in the pathogenesis and progression of OC.

The result of GSEA suggest that the 5-gene signature might affect progression of the OC through WNT/ β -catenin signaling and epithelial-mesenchymal transition. Wnt signaling was activated in epithelial OC and niclosamide inhibited the OC growth through suppressing WNT signaling. The Wnt signaling pathway plays a critical role in embryogenesis and oncogenesis. In the canonical Wnt signaling pathway, dysregulation of the Wnt/ β -catenin signaling pathway has been identified in OC [30]. Mutations in the β -catenin (CTNNB1) gene leading to alteration of the Wnt/ β -catenin signaling pathway have been found in the endometrioid subtype of OC [31, 32]. Aberrant accumulation of β -catenin is associated with increasing OC grade and poor survival [33, 34]. In contrast to canonical Wnt signaling, non-canonical Wnt signaling pathways may have transcriptional and non-transcriptional effects [34]. In the non-canonical Wnt/Ca²⁺ signaling pathway, Wnt ligands

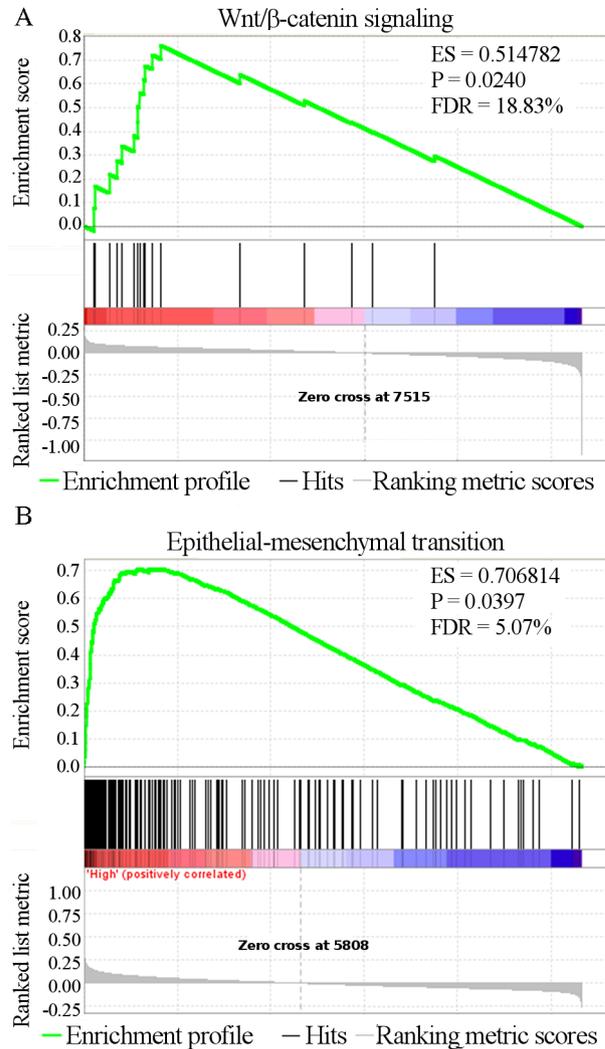


Figure 5. Gene set enrichment analysis of OC samples in the 5-gene signature low-risk group and high-risk group.

binding to Fzd receptors initiate activation of the phospholipase C via G protein-couple receptor signaling, causing an increase in intracellular Ca²⁺ and resulting in activation of Ca²⁺/calmodulin-dependent kinase II (CaMKII) and protein kinase C [35]. Meanwhile, previous studies have identified that deregulation of the Wnt/Ca²⁺ signaling pathway mediates cytoskeleton rearrangements, cellular

proliferation, cellular motility and epithelial-mesenchymal transition in cancer development and progression [36, 37].

Meanwhile, EMT has been found in multiple human cancers, especially in the metastasis process, where epithelial cells acquire increased motility and invasive properties to become mesenchymal like cells [38]. In OC, EMT promoted migration and invasion ability of the OC cells, contributed to chemoresistance and thus participated in the progression of the disease [39]. This could also explain the clinical role of the 5-gene signature in patients with OC to some extent.

Survival analysis on the 5-gene suggest that it could classify OC patients into high-risk group and low-risk group. Patients in low-risk group were associated with better clinical outcome compared with those in high-risk group. Although the conclusion was validated in an independent cohort, for the sake of caution we propose to conduct multicenter, large-scale clinical studies to validate our conclusions in the future.

In conclusion, we developed a 5-gene signature that might be used as an independent prognostic factor in patients with OC.

Supplementary information is available in the online version of the paper.

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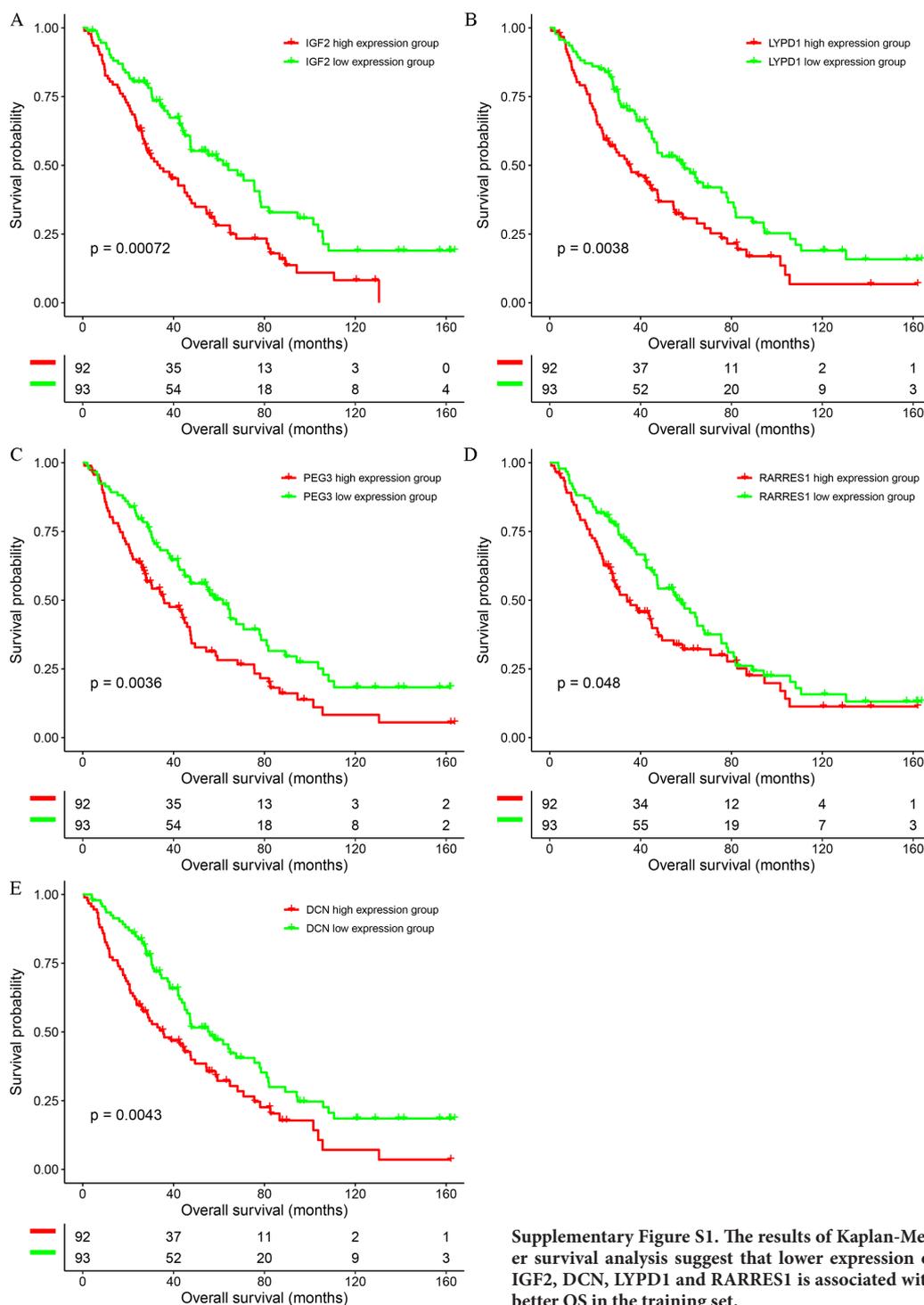
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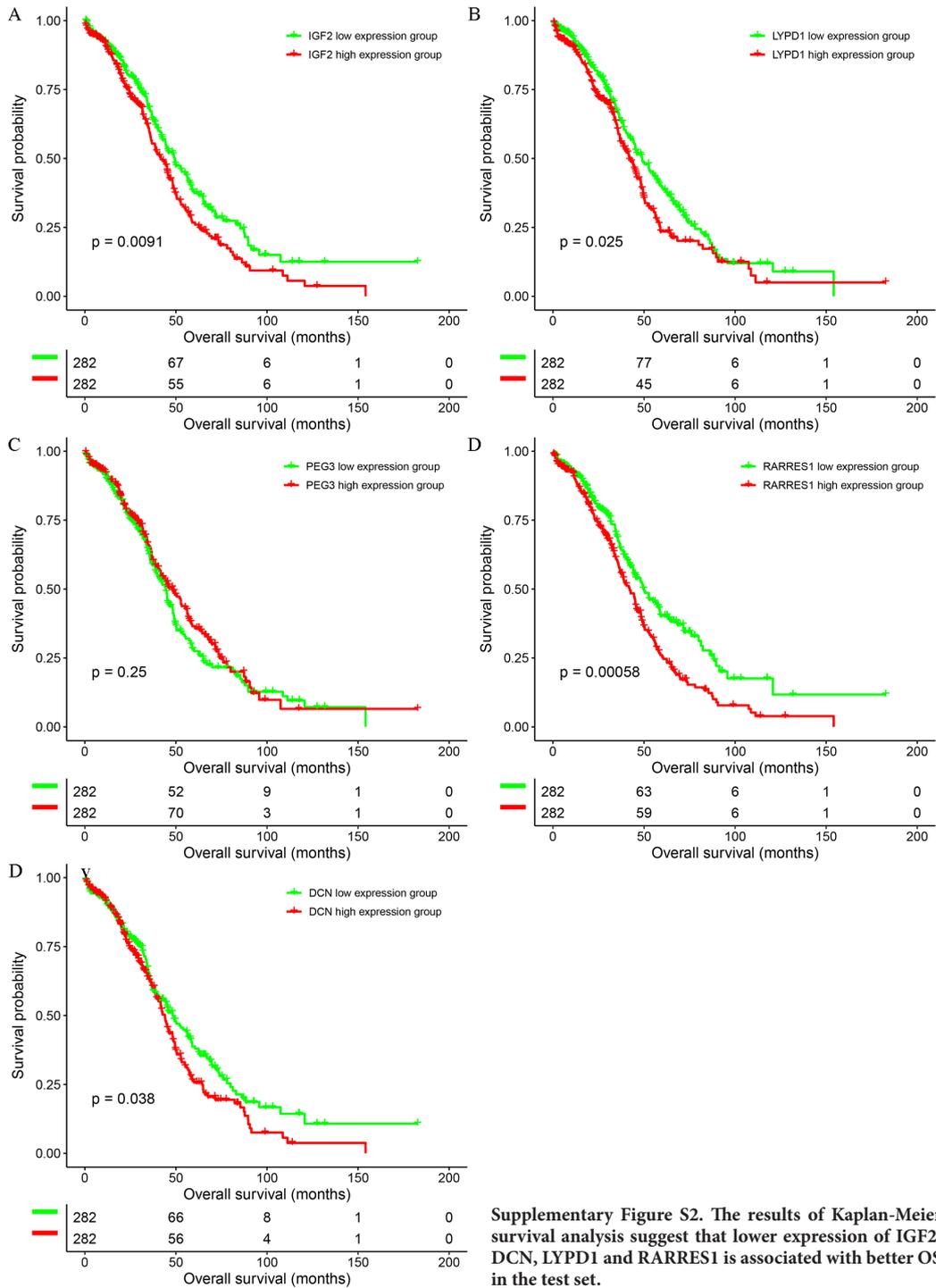
Development of a five-gene signature as a novel prognostic marker in ovarian cancer

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Supplemental material



Supplementary Figure S1. The results of Kaplan-Meier survival analysis suggest that lower expression of IGF2, DCN, LYPD1 and RARRES1 is associated with better OS in the training set.



Supplementary Figure S2. The results of Kaplan-Meier survival analysis suggest that lower expression of IGF2, DCN, LYPD1 and RARRES1 is associated with better OS in the test set.

Supplementary Table 1. 332 differentially expressed gene between normal ovary tissue and OC.

Probe ID	Adjusted p-value	logFC	Gene symbol	Probe ID	Adjusted p-value	logFC	Gene symbol
204719_at	2.22E-19	-4.16776	ABCA8	200810_s_at	1.48E-11	-2.16049	CIRBP
201963_at	2.52E-10	-2.25638	ACSL1	204170_s_at	4.29E-07	2.362744	CKS2
X00351_5_at	8.42E-07	2.660791	ACTB	219640_at	1.21E-46	-2.25056	CLDN15
202381_at	1.46E-12	-2.26269	ADAM9	203953_s_at	2.38E-12	3.892081	CLDN3
214913_at	4.12E-20	-2.13792	ADAMTS3	201428_at	4.48E-12	2.101791	CLDN4
212070_at	5.27E-09	2.229783	ADGRG1	207995_s_at	5.18E-45	-2.51265	CLEC4M
213094_at	2.96E-14	-2.04628	ADGRG6	213317_at	6.69E-08	-2.60302	CLIC5
209613_s_at	2.09E-11	-3.66243	ADH1B	214683_s_at	3.62E-20	-2.18401	CLK1
208848_at	7.89E-11	-2.06097	ADH5	202310_s_at	2.05E-07	3.226624	COL1A1
212224_at	2.09E-12	-2.77912	ALDH1A1	209156_s_at	5.35E-04	2.131939	COL6A2
222108_at	2.01E-14	-2.79646	AMIGO2	202110_at	2.24E-09	2.04221	COX7B
206385_s_at	2.08E-11	-2.0723	ANK3	204846_at	7.34E-08	2.329078	CP
205206_at	6.39E-14	-2.19893	ANOS1	201116_s_at	1.30E-12	-2.04869	CPE
209369_at	1.83E-13	-2.80928	ANXA3	208146_s_at	1.81E-13	-2.4312	CPVL
203074_at	1.10E-42	-3.40031	ANXA8L1	202575_at	9.49E-14	3.312046	CRABP2
205083_at	5.21E-34	-4.22561	AOX1	201989_s_at	8.59E-33	-2.42911	CREBL2
205568_at	1.04E-29	-2.72917	AQP9	219049_at	8.42E-17	-2.31946	CSGALNACT1
213618_at	1.25E-26	-2.207	ARAP2	215121_x_at	1.51E-03	2.203539	CYAT1
205414_s_at	3.48E-35	-2.23218	ARHGAP44	203139_at	1.62E-21	-2.24884	DAPK1
206167_s_at	3.13E-20	-2.24395	ARHGAP6	209335_at	3.32E-05	-2.15118	DCN
218694_at	8.93E-30	-3.45138	ARMCX1	212855_at	4.17E-36	-2.02338	DCUN1D4
222103_at	1.04E-13	-2.04397	ATF1	213998_s_at	2.24E-18	-2.88849	DDX17
201855_s_at	2.78E-22	-2.09125	ATMIN	210397_at	1.53E-04	2.541294	DEFB1
213238_at	3.75E-38	-2.27162	ATP10D	203695_s_at	3.11E-43	-3.34069	DFNA5
209186_at	8.59E-10	2.002041	ATP2A2	215506_s_at	7.70E-16	-2.77867	DIRAS3
210149_s_at	2.87E-14	2.303593	ATP5H	201681_s_at	4.79E-12	-2.02762	DLG5
213106_at	1.13E-34	-2.32718	ATP8A1	203881_s_at	2.03E-17	-2.62651	DMD
203232_s_at	1.74E-18	-2.34824	ATXN1	205003_at	2.94E-12	-2.36394	DOCK4
203304_at	3.14E-11	-2.0492	BAMBI	204646_at	4.17E-27	-3.72056	DPYD
203009_at	7.69E-10	2.000145	BCAM	200762_at	4.68E-12	-2.54164	DPYSL2
205433_at	3.32E-32	-4.43005	BCHE	206032_at	2.22E-38	-2.26127	DSC3
201545_s_at	1.19E-17	2.187724	PABPN1	218854_at	1.09E-21	-3.07949	DSE
213429_at	1.44E-18	-2.1286	BICC1	206101_at	7.51E-18	-2.56347	ECM2
206581_at	3.33E-79	-3.72993	BNC1	201843_s_at	6.58E-24	-3.89742	EFEMP1
209430_at	7.98E-31	-2.74434	BTAF1	219833_s_at	7.12E-18	-2.08989	EFHC1
219010_at	1.52E-11	2.059427	C1orf106	210827_s_at	3.69E-13	2.621677	ELF3
220543_at	9.76E-40	-2.11256	C21orf62	217294_s_at	3.83E-04	2.044274	ENO1
204480_s_at	6.63E-25	2.809954	C9orf16	217886_at	9.18E-25	-2.03626	EPS15
205428_s_at	9.23E-39	-3.89844	CALB2	217234_s_at	4.96E-17	-2.01056	EZR
200935_at	2.71E-13	2.3752	CALR	218518_at	3.42E-24	-2.76031	FAM13B
212586_at	9.33E-15	-2.48788	CAST	215000_s_at	4.12E-20	-2.38943	FEZ2
212097_at	3.15E-11	-2.86996	CAV1	205110_s_at	4.69E-37	-2.75939	FGF13
203324_s_at	1.07E-11	-2.07008	CAV2	206404_at	6.00E-13	-2.4197	FGF9
216379_x_at	3.06E-20	4.345562	CD24	219250_s_at	3.70E-13	-2.26279	FLRT3
202870_s_at	9.16E-08	2.068895	CDC20	204437_s_at	1.83E-11	3.4742	FOLR1
202156_s_at	1.76E-23	-2.1972	CELF2	213056_at	1.17E-25	-2.72701	FRMD4B
213800_at	4.63E-10	-2.26546	CFH	204072_s_at	6.93E-34	-3.10251	FRY
215388_s_at	9.63E-11	-2.35194	CFHR1	202489_s_at	2.68E-07	2.127299	FXD3
203854_at	3.66E-14	-2.58878	CFI	203706_s_at	1.38E-10	-2.23584	FZD7
204260_at	7.66E-25	-2.07391	CHGB	211458_s_at	4.47E-10	-2.26778	GABARAPL3
202536_at	4.04E-12	-2.0542	CHMP2B	204417_at	1.68E-20	-2.33445	GALC
218085_at	8.37E-11	-2.0057	CHMP5	218885_s_at	9.83E-24	-2.1412	GALNT12
209763_at	9.74E-23	-3.61456	CHRD1	204457_s_at	6.78E-11	-2.7071	GAS1

Supplementary Table 1. *Continued*

Probe ID	Adjusted p-value	logFC	Gene symbol	Probe ID	Adjusted p-value	logFC	Gene symbol
210002_at	4.53E-10	-2.86424	GATA6	201505_at	3.82E-09	-2.23483	LAMB1
203765_at	3.77E-19	-2.33892	GCA	212531_at	4.83E-06	2.597947	LCN2
212244_at	3.76E-32	-2.32237	GCOM1	208450_at	1.10E-22	-2.19929	LGALS2
205100_at	2.23E-23	-2.24551	GFPT2	208933_s_at	4.13E-36	-3.35962	LGALS8
205498_at	7.36E-18	-2.52147	GHR	206140_at	1.32E-40	-3.75029	LHX2
201667_at	1.22E-04	-2.04991	GJA1	201847_at	1.47E-08	-2.0862	LIPA
203159_at	6.62E-28	-2.09898	GLS	200772_x_at	7.63E-16	2.162312	PTMA
204115_at	3.97E-10	-2.14425	GNG11	204359_at	5.87E-22	-4.00834	FLRT2
209469_at	2.01E-62	-3.85864	GPM6A	201278_at	5.57E-28	-2.89922	DAB2
204137_at	7.44E-20	-2.15283	GPR137B	207016_s_at	1.02E-32	-4.36511	ALDH1A2
204793_at	1.56E-14	-2.31537	GPRASP1	222281_s_at	1.99E-12	3.880707	C1orf186
205862_at	2.10E-15	-2.69417	GREB1	202551_s_at	7.80E-12	-2.11329	CRIM1
212090_at	2.01E-16	2.174916	GRINA	214945_at	1.16E-54	-4.66198	LOC101930363
222150_s_at	1.77E-26	-2.40013	GSAP	202736_s_at	3.45E-08	2.220243	LSM4
200824_at	3.94E-20	2.442904	GSTP1	208835_s_at	6.66E-10	-2.23185	LUC7L3
205436_s_at	5.25E-15	2.294294	H2AFX	218729_at	2.14E-11	-2.48403	LXN
208579_x_at	1.40E-09	2.404874	H2BFS	212909_at	2.41E-05	2.098813	LYPD1
207316_at	3.81E-15	-2.02722	HAS1	209348_s_at	2.63E-30	-3.18447	MAF
214414_x_at	1.50E-07	-3.57167	HBA2	205027_s_at	1.02E-32	-2.15682	MAP3K8
209116_x_at	4.03E-08	-4.09804	HBB	205819_at	5.91E-22	-2.70494	MARCO
213515_x_at	8.43E-20	-2.45235	HBG2	209035_at	3.04E-06	2.026546	MDK
213069_at	7.70E-22	-3.1479	HEG1	204059_s_at	5.74E-31	-2.27797	ME1
209398_at	3.51E-06	2.025838	HIST1H1C	221884_at	7.17E-14	2.87032	MECOM
214290_s_at	9.29E-17	3.813299	HIST2H2AA4	209200_at	2.34E-15	-2.01228	MEF2C
206074_s_at	1.15E-13	2.469522	HMGAI	207480_s_at	2.50E-22	-3.05219	MEIS2
221480_at	2.23E-57	-2.14345	HNRNPD	203510_at	6.90E-22	-3.20603	MET
206858_s_at	5.97E-19	-2.64051	HOXC6	207761_s_at	1.21E-12	-2.55681	METTL7A
206697_s_at	1.24E-06	-2.75649	HP	217756_x_at	1.04E-17	2.010399	SERF2
208470_s_at	5.52E-05	-2.18991	HPR	214696_at	1.07E-15	-2.36434	MIR22HG
217989_at	3.76E-11	-2.02168	HSD17B11	203189_s_at	2.81E-12	2.195696	NDUFS8
201655_s_at	1.79E-12	2.096271	HSPG2	211430_s_at	1.29E-02	2.369659	IGHG1
209292_at	1.74E-10	-2.82513	ID4	203878_s_at	2.79E-06	2.216431	MMP11
210046_s_at	8.51E-10	2.058312	IDH2	204259_at	3.57E-04	2.159356	MMP7
202411_at	1.39E-04	2.038914	IFI27	204959_at	5.44E-55	-4.43974	MNDA
204415_at	8.26E-06	2.053799	IFI6	204331_s_at	4.64E-06	2.088749	MRPS12
202718_at	3.15E-15	3.881271	IGFBP2	212096_s_at	5.40E-19	-2.46268	MTUS1
203851_at	2.67E-11	-2.28862	IGFBP6	213693_s_at	8.79E-10	2.910366	MUC1
217022_s_at	3.87E-03	2.3252	IGHA2	221899_at	5.72E-17	-2.8265	N4BP2L2
214677_x_at	5.70E-03	2.574819	IGLC1	204749_at	1.43E-30	-3.28136	NAP1L3
215379_x_at	3.50E-03	2.064311	IGLV1-44	33767_at	3.74E-11	-2.06774	NEFH
212195_at	1.03E-09	-2.74261	IL6ST	203413_at	6.56E-61	-3.68444	NELL2
202409_at	3.42E-03	2.47873	IGF2	209706_at	5.86E-48	-2.57723	NKX3-1
205483_s_at	9.44E-07	2.450106	ISG15	203238_s_at	7.72E-20	2.764711	NOTCH3
218170_at	3.77E-15	-2.15637	ISOC1	205440_s_at	6.13E-54	-3.67194	NPY1R
205786_s_at	2.57E-23	-2.26522	ITGAM	209505_at	2.25E-13	-2.69013	NR2F1
201473_at	6.57E-08	2.126389	JUNB	209120_at	1.31E-06	-2.05081	NR2F2
203845_at	6.05E-20	-2.11657	KAT2B	209570_s_at	9.15E-14	-2.55553	NSG1
200922_at	1.46E-12	2.028977	KDELRL1	222203_s_at	8.05E-25	-2.16961	RDH14
203934_at	1.16E-72	-3.11676	KDR	218051_s_at	5.54E-10	2.135175	NT5DC2
221841_s_at	7.46E-06	-2.22342	KLF4	218730_s_at	1.46E-15	-2.36917	OGN
204733_at	2.69E-08	2.560931	KLK6	217525_at	2.94E-22	-2.44233	OLFML1
206125_s_at	1.41E-09	2.031964	KLK8	209552_at	2.55E-11	2.121913	PAX8
202202_s_at	4.57E-17	-2.71428	LAMA4	218515_at	9.15E-25	-2.0084	PAXBP1

Supplementary Table 1. *Continued*

Probe ID	Adjusted p-value	logFC	Gene symbol	Probe ID	Adjusted p-value	logFC	Gene symbol
219737_s_at	4.26E-35	-2.20263	PCDH9	200660_at	1.99E-11	2.556766	S100A11
219295_s_at	1.16E-22	-2.22582	PCOLCE2	202598_at	9.60E-17	2.6354	S100A13
213228_at	1.14E-36	-2.39896	PDE8B	204268_at	2.21E-06	2.405757	S100A2
218718_at	9.41E-12	-2.39503	PDGFC	217728_at	5.21E-11	2.222818	S100A6
219304_s_at	2.64E-20	-2.99789	PDGFD	218370_s_at	4.87E-44	-2.25463	S100PBP
221898_at	5.78E-22	-2.14319	PDPN	200847_s_at	1.83E-13	-2.38721	SARAF
209493_at	1.16E-12	-2.04241	PDZD2	203889_at	2.03E-11	-2.75873	SCG5
200787_s_at	8.52E-15	2.252569	PEA15	205979_at	1.76E-06	3.591818	SCGB2A1
209242_at	1.54E-06	-3.1553	PEG3	201339_s_at	1.72E-07	-2.01388	SCP2
200634_at	9.36E-20	3.398226	PFN1	212314_at	2.82E-16	-2.15107	SEL1L3
213227_at	1.32E-21	-2.26637	PGRMC2	203789_s_at	2.41E-09	-2.5231	SEMA3C
204049_s_at	6.51E-27	-2.42175	PHACTR2	213169_at	2.26E-25	-2.26337	SEMA5A
203688_at	1.14E-15	-2.20414	PKD2	209723_at	1.05E-16	-2.13449	SERPINB9
201251_at	1.99E-19	3.262371	PKM	215780_s_at	4.75E-09	2.208081	SET
213222_at	4.75E-10	-2.05202	PLCB1	202037_s_at	4.56E-16	-3.1809	SFRP1
205111_s_at	4.88E-39	-2.22766	PLCE1	202234_s_at	4.57E-24	-2.55208	SLC16A1
209122_at	3.42E-09	-2.01881	PLIN2	219215_s_at	1.65E-09	2.042175	SLC39A4
210946_at	2.25E-24	-2.90344	PLPP1	209267_s_at	2.39E-23	-3.62037	SLC39A8
218901_at	6.27E-26	-3.39253	PLSCR4	214719_at	9.64E-42	-2.44201	SLC46A3
212179_at	2.09E-20	-2.42237	PNISR	203908_at	1.26E-54	-3.67051	SLC4A4
217779_s_at	1.24E-18	-2.03972	PNRC2	222155_s_at	7.00E-12	2.592536	SLC52A2
201578_at	9.28E-11	-2.18479	PODXL	206874_s_at	4.76E-18	-2.3195	SLK
218010_x_at	2.74E-24	2.918798	PPDPF	217707_x_at	1.12E-12	-2.39091	SMARCA2
212215_at	2.59E-21	-2.16514	PREPL	219511_s_at	8.38E-28	-2.69503	SNCAIP
206007_at	9.61E-47	-2.95447	PRG4	200869_at	3.98E-28	4.120789	RPL18A
200603_at	1.50E-12	-2.24346	PRKAR1A	213704_at	1.26E-20	-2.18703	RABGGTB
203680_at	1.92E-11	-2.13829	PRKAR2B	205573_s_at	2.33E-14	-2.15827	SNX7
200707_at	3.24E-11	2.19688	PRKCSH	218974_at	5.47E-12	-2.26683	SOBP
206445_s_at	1.00E-16	2.226572	PRMT1	219993_at	1.06E-15	3.07392	SOX17
201300_s_at	8.02E-08	-2.0224	PRNP	202936_s_at	5.41E-12	2.21883	SOX9
203650_at	5.92E-41	-3.47704	PROCR	202363_at	4.65E-37	-3.20397	SPOCK1
207808_s_at	4.22E-22	-3.3456	PROS1	218499_at	1.05E-39	-3.97485	STK26
202525_at	1.07E-09	2.003049	PRSS8	212353_at	1.58E-07	-2.52873	SULF1
203355_s_at	1.95E-52	-3.31581	PSD3	200911_s_at	2.89E-14	-2.55058	TACC1
213933_at	7.43E-20	-2.30298	PTGER3	205547_s_at	1.27E-05	2.423051	TAGLN
204897_at	3.90E-15	-2.68542	PTGER4	211276_at	4.89E-22	-4.06643	TCEAL2
208131_s_at	6.30E-09	-2.60326	PTGIS	204931_at	1.59E-13	-2.3008	TCF21
212588_at	1.55E-10	-2.16582	PTPRC	209277_at	4.74E-41	-3.06902	TFPI2
204020_at	5.67E-14	-2.09451	PURA	202085_at	1.98E-11	-2.06054	TJP2
212636_at	1.35E-16	-2.5737	QKI	204872_at	5.30E-16	-2.38261	TLE4
218668_s_at	1.48E-20	-2.29864	RAP2C	204427_s_at	4.47E-06	2.005576	TMED2
221872_at	3.42E-06	-2.62375	RARRES1	219895_at	5.40E-56	-3.32769	TMEM255A
212027_at	9.36E-14	-2.29353	RBM25	201581_at	2.06E-17	-2.7922	TMX4
205407_at	1.08E-22	-2.3872	RECK	202704_at	7.51E-09	-2.14785	TOB1
204364_s_at	2.61E-53	-3.94761	REEP1	203786_s_at	3.05E-19	-2.39369	TPD52L1
204337_at	1.56E-16	-2.86813	RGS4	205803_s_at	1.24E-28	-2.47603	TRPC1
212099_at	1.88E-09	2.6548	RHOB	217979_at	2.13E-12	-2.34475	TSPAN13
218323_at	3.42E-25	-2.08571	RHOT1	203824_at	1.10E-07	-2.26876	TSPAN8
213397_x_at	5.32E-16	-2.92585	RNASE4	221493_at	2.73E-12	-2.1582	TSPYL1
214041_x_at	1.19E-21	3.167255	RPL37A	202954_at	3.27E-13	2.116956	UBE2C
200082_s_at	4.05E-18	3.064104	RPS7	208998_at	4.92E-07	2.01738	UCP2
209006_s_at	8.53E-27	-2.77715	RSRP1	218449_at	3.47E-24	-2.37212	UFSP2
203485_at	1.85E-30	-2.94876	RTN1	206658_at	5.85E-06	-2.15834	UPK3B

Supplementary Table 1. *Continued*

Probe ID	Adjusted p-value	logFC	Gene symbol
201568_at	2.24E-10	2.09715	UQCRQ
218396_at	4.06E-15	-2.05476	VPS13C
203892_at	7.53E-16	3.604279	WFDC2
206458_s_at	7.11E-42	-2.66765	WNT2B
213425_at	2.59E-32	-2.78657	WNT5A
201294_s_at	2.93E-28	-2.29403	WSB1
206067_s_at	1.66E-09	-2.10521	WT1
210996_s_at	1.47E-13	2.28527	YWHAE
213156_at	2.99E-15	-2.27837	ZBTB20
212982_at	1.24E-23	-2.2579	ZDHC17
219778_at	4.63E-09	-2.75905	ZFPM2
209814_at	5.51E-27	-2.677	ZNF330
222028_at	5.81E-39	-2.07903	ZNF45
204175_at	7.25E-13	2.08818	ZNF593

Supplementary Table 2. DEGs that were significantly correlated with the overall survival of OC patients.

Gene Symbol	HR	LCI	UCI	p-value	Gene Symbol	HR	LCI	UCI	p-value
IGF2	1.155904	1.077828	1.239634	4.90E-05	CAV1	1.2066	1.046258	1.391516	0.009836
RECK	1.692166	1.308165	2.188887	6.19E-05	FZD7	1.266187	1.058346	1.514845	0.009885
PTGER3	1.687189	1.293083	2.201411	1.16E-04	ARHGAP6	1.40526	1.083322	1.822872	0.010382
PHACTR2	1.648691	1.255291	2.16538	3.25E-04	NR2F2	1.211887	1.046241	1.40376	0.010384
PSD3	1.853413	1.305842	2.630593	5.53E-04	OLFML1	1.322555	1.064904	1.642543	0.011446
GPRASP1	1.374989	1.145661	1.65022	6.25E-04	IFI27	0.86593	0.773997	0.968784	0.011945
PDGFD	1.335095	1.122146	1.588455	0.001115	D4S234E	0.789259	0.656001	0.949586	0.012135
ABCA8	1.244154	1.09064	1.419277	0.001149	FLRT2	1.210822	1.040809	1.408606	0.013208
PDE8B	1.850172	1.275062	2.684682	0.001198	ADH1B	1.156958	1.030396	1.299065	0.013643
DCN	1.216478	1.080111	1.37006	0.001236	MTUS1	1.309358	1.056877	1.622154	0.013659
ECM2	1.367841	1.128223	1.658349	0.001434	GALC	1.370127	1.06575	1.761433	0.014019
GFPT2	1.60216	1.196773	2.144866	0.001541	PPAP2A	1.361571	1.063615	1.742995	0.014309
KDR	2.496187	1.38058	4.513284	0.002468	NR2F1	1.222508	1.039093	1.438298	0.015421
EFEMP1	1.259244	1.081612	1.46605	0.002967	RHOB	1.18208	1.028311	1.358843	0.018643
CHGN	1.328542	1.095567	1.611061	0.00388	H2BFS	0.830951	0.710199	0.972233	0.020808
HOXC6	1.346405	1.09994	1.648096	0.003934	SLC39A4	0.818461	0.690484	0.970158	0.020933
ALDH1A2	1.275981	1.079367	1.508409	0.00431	GALNT12	0.685402	0.496802	0.9456	0.021413
C6ORF111	1.426383	1.116916	1.821593	0.004426	RNASE4	1.212845	1.028974	1.429573	0.021422
ALDH1A1	1.227977	1.064256	1.416885	0.004909	SEMA3C	1.180876	1.024728	1.360817	0.021589
CAV2	1.337283	1.091337	1.638657	0.005065	LAMA4	1.278289	1.03396	1.580354	0.023297
PDPN	1.512641	1.126845	2.030523	0.005871	LOC283537	1.60001	1.064437	2.405058	0.023805
MEF2C	1.422748	1.105835	1.830484	0.006099	CIRBP	1.263725	1.028987	1.552012	0.025581
LOC653754	1.658216	1.154323	2.38207	0.00621	DOCK4	1.212601	1.022502	1.438043	0.026709
RHOT1	1.568865	1.135197	2.168202	0.00637	ADH5	1.245144	1.023108	1.515367	0.028674
LYPD1	0.836817	0.735941	0.951521	0.006564	LAMB1	1.212653	1.019134	1.442919	0.029733
RARRES1	1.157035	1.04117	1.285793	0.006741	MAF	1.301021	1.022468	1.655462	0.032297
NAPIL3	1.311493	1.074959	1.600075	0.007534	ACSL1	1.220492	1.01449	1.468325	0.034645
FLJ10159	1.295373	1.069451	1.569022	0.00813	IGFBP6	1.214964	1.01361	1.456317	0.035188
SNCAIP	1.421542	1.092331	1.849971	0.00887	PURA	1.299578	1.016925	1.660796	0.036252
ADH1B	1.176641	1.041035	1.329911	0.009223	FGF13	1.436342	1.019623	2.023374	0.038348
PEG3	1.124622	1.028839	1.229323	0.009711	TCF21	1.217575	1.009436	1.468631	0.039576
BAMBI	1.275562	1.060642	1.534031	0.009728	RARRES1	1.129291	1.002043	1.272699	0.046215

Supplementary Table 3. Characteristics of the 5 genes in the signature.

Gene symbol	Gene title	Coefficient
LYPD1	LY6/PLAUR domain containing 1	-0.02463
DCN	decorin	0.021033
RARRES1	retinoic acid receptor responder 1	0.033396
PEG3	paternally expressed 3	0.047122
IGF2	insulin like growth factor 2	0.105386