

Identifying viral integration sites using SeqMap 2.0

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ABSTRACT

Summary: Retroviral integration has been implicated in several biomedical applications, including identification of cancer-associated genes and malignant transformation in gene therapy clinical trials. We introduce an efficient and scalable method for fast identification of viral vector integration sites from long read high-throughput sequencing. Individual sequence reads are masked to remove non-genomic sequence, aligned to the host genome and assembled into contiguous fragments used to pinpoint the position of integration.

Availability and Implementation: The method is implemented in a publicly accessible web server platform, SeqMap 2.0, containing analysis tools and both private and shared lab workspaces that facilitate collaboration among researchers. Available at <http://seqmap.compbio.iupui.edu/>.

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Retroviruses were first characterized by their ability to cause malignancy. Subsequently, retroviruses were identified that lacked oncogenes but mediated malignancy through a process termed insertional mutagenesis (IM). The molecular mechanisms of IM are varied but most commonly involve upregulation of cellular oncogenes in close proximity to the site of viral integration via *cis*- and *trans*-effects of promoter and enhancer sequences within the viral long terminal repeats (LTRs).

Because of IM effects, the mapping of retroviral integration sites (RISs) has become a powerful tool for identifying cellular oncogenes. Copeland and Jenkins (Buchberg *et al.*, 1990; Copeland and Jenkins, 1990) used retroviruses to identify potential oncogenes by determining the site of viral integration in tumor tissues. This work led to the development of a database of cancer-associated genes (Akagi *et al.*, 2004).

IM has also been associated with malignancy in the setting of human gene therapy applications. While most gene therapy trials have not been associated with the development of cancer, a notable exception was the treatment of X-linked Severe Combined Immuno-Deficiency (SCID-X1), where several patients developed

a T-cell leukemia associated with vector integration near the proto-oncogenes *LMO2*, *BMI1* and *CCND2* (Hacein-Bey-Abina *et al.*, 2003, 2008). The US Food and Drug Administration (FDA) now requires assessment of RISs for any human gene therapy trials utilizing integrating vector systems (USDHHS, 2006).

In animal models and human clinical trials, retroviral transduction targets millions of cells. As integration can occur throughout most of the genome, the resulting cell populations can contain extremely large, but unknown, numbers of RISs. Initial methods to identify the RISs utilized PCR-based capture and amplification assays that were inefficient and highly labor intensive. High-throughput next-generation sequencing technologies have facilitated much more efficient identification of RISs, which presents a new bioinformatics challenge.

We (Peters *et al.*, 2008) and others (Appelt *et al.*, 2009; Giordano *et al.*, 2007) had previously developed web-based bioinformatics tools that can facilitate identification of RISs by mapping sequence data obtained from Sanger sequencing technology, but the tools are not sufficient to quickly map and characterize RISs in high-throughput methods. Here we introduce and explain our new methodology for quickly mapping RISs to a reference genome from extremely large datasets.

Depending on the frequency of insertion sites within the cell population, and the number of samples run in parallel, there can be anywhere from 50 to 5000-fold coverage of an individual RIS within the reads generated from a single sequencing run. SeqMap 2.0 provides a scalable method for sequence matching, clustering and alignment, and also addresses challenges specific to 454 pyrosequencing data output, namely base stutter and redundant coverage of each RIS.

The SeqMap 2.0 workflow has three stages: (i) sequence processing, including identification and masking of vector features and distribution of sequence reads into multiplex identifier (MID)/barcode-specific groups; (ii) sequence clustering and alignment; and (iii) data visualization and storage for further analysis (Supplementary Fig. 1B).

SeqMap 2.0 is able to analyze data from the major PCR techniques used in RIS analysis: ligase-mediated PCR (LM-PCR) (Smith, 1992), linear-amplification-mediated PCR (LAM-PCR) (Schmidt *et al.*, 2003, 2007) and non-restrictive LAM-PCR (nrLAM-PCR) (Gabriel *et al.*, 2009); see Supplementary Material. Each individual sequence read input to SeqMap 2.0 originates from an amplicon with common features. From 5' to 3' is a sequencing adaptor, a nucleotide bar code, viral LTR, RIS-flanking genomic sequence,

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each read and (iv) identify the appropriate reference genomes to which RISs should be mapped. The rest of the process is completely automated and data are returned to the user through secure login to a saved workspace or by email. Investigators are also able to use SeqMap 2.0 as a collaborative research tool by creating lab workspaces accessible to multiple users. SeqMap 2.0 is available at <http://seqmap.compbio.iupui.edu/>.

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