



Transcriptome Sequencing Analysis of Peripheral Blood of Type 2 Diabetes Mellitus Patients With Thirst and Fatigue

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Lv B, Bao X, Li P, Lian J, Wu Y, An T, Zhang J, Yang X, Wang T, Zhu J, Hu Y, Jiang G and Gao S (2020) Transcriptome Sequencing Analysis of Peripheral Blood of Type 2 Diabetes Mellitus Patients With Thirst and Fatigue. Front. Endocrinol. 11:558344. doi: 10.3389/fendo.2020.558344 **Purpose:** The purpose of this study is to explore the differences in transcriptome expression profiles between healthy subjects and type 2 diabetes mellitus patients with thirst and fatigue (D-T2DM) and, in addition, to investigate the possible role of noncoding ribonucleic acids (RNAs) in the pathogenesis of D-T2DM.

Methods: We constructed the expression profiles of RNAs by RNA sequencing in the peripheral blood of D-T2DM patients and healthy subjects and analyzed differentially expressed RNAs.

Results: Compared with healthy subjects, a total of 469 mRNAs, 776 long non-coding RNAs (IncRNAs), and 21 circular RNAs (circRNAs) were differentially expressed in D-T2DM patients. Furthermore, several genes associated with insulin resistance, inflammation, and mitochondrial dysfunction were identified within the differentially expressed mRNAs. Differentially expressed IncRNAs were primarily involved in biological processes associated with immune responses. In addition, differentially expressed circRNAs may target miRNAs associated with glucose metabolism and mitochondrial function.

Conclusions: Our results may bring a new perspective on differential RNA expression involved in the pathogenesis of D-T2DM and promote the development of novel treatments for this disease.

Keywords: circRNAs, IncRNAs, miRNA, T2DM, RNA sequencing

INTRODUCTION

In today's world, with the improvement of living conditions and the change of lifestyle, more and more diabetic patients are diagnosed. The number of people with diabetes is expected to reach 700 million by 2045 (1). In traditional Chinese medicine, diabetes is divided into different types according to the clinical symptoms such as fever, fatigue, sputum, and urinary frequency (2). The "dual deficiency of Qi and Yin syndrome" is a common type of diabetes, and the main symptoms of this type are dry mouth and throat and weakness with general fatigue. Similarly, a proportion of patients with T2DM are accompanied with thirst and fatigue in modern medicine (3–7). Therefore,

1

the diagnosis and treatment of this type of T2DM (D-T2DM) have become an important issue in clinical work.

Non-coding ribonucleic acids (ncRNAs) are transcripts that cannot be translated into proteins, but are generally considered to have a role in regulating protein expression (8). ncRNAs are divided into long non-coding RNAs (lncRNAs) and circular loops RNAs (circRNAs) according to their morphology (9). lncRNAs are transcripts longer than 200 nucleotides that have been implicated in diverse biological functions, such as transcriptional and posttranscriptional regulation and chromatin modification (10-12). CircRNAs are a type of circular ncRNA discovered recently and attracted wide attention (13). In our previous research, ncRNAs have been shown to play a key role in the pathogenesis of T2DM and other endocrine diseases (14, 15). However, the role of ncRNAs in D-T2DM development remains unclear. Therefore, comprehensive detection and analysis of ncRNAs in the development of D-T2DM are critical for the prevention and treatment of D-T2DM.

In this study, we used RNA sequencing technology to construct RNA expression profiles in peripheral blood of patients with D-T2DM. Differentially expressed mRNAs, lncRNAs, and circRNAs were detected, and their functions were predicted by bioinformatics analysis, in order to discover new targets and provide assistance for the treatment of D-T2DM.

MATERIALS AND METHODS

Ethics Statement and Information of Subjects

This research was approved by the Ethics Committee of Beijing University of Chinese Medicine (BUCM) (2017BZHYLL0105). All subjects, enrolled from the Affiliated Hospital of BUCM, agreed to participate in the study after fully understanding the purpose and procedure of the experiment. Full inclusion and exclusion criteria are listed in **Table 1**. The subjects were divided into two groups: D-T2DM group (ID: QYD1, QYD2, QYD3, QYD4, QYD5, and QYD6) and the healthy subjects as the control group (ID: LZC001, LZC002, LZC003, LZC004, LZC005, and LZC006). Subsequently, the fasting venous blood of all subjects were obtained and stored at -80° C until analysis.

Total RNA Extraction, Library Construction, and Illumina Sequencing

According to the previous experimental methods, we extracted the total RNA and constructed the RNA library (16). Briefly, the total RNA was extracted by TRIzol reagent (Invitrogen, Carlsbad, CA, USA) and tested for purity using the NanoPhotometer spectrophotometer (IMPLEN, CA, USA). In addition, the concentration and integrity of RNA were assessed using the Qubit 2.0 fluorometer (Life Technologies, CA, USA) and the Agilent 2100 bioanalyzer (Agilent Technologies, CA, USA), respectively. Next, Ribo-Zero rRNA Removal Kit (Epicentre, USA) was used to remove ribosomal RNA (rRNA). RNA-sequencing libraries were prepared using the rRNA-depleted RNA by NEBnext ultra RNA library prep kit following the manufacturer's instruction. After that, the quality of libraries was determined using the Agilent
 TABLE 1 | Inclusion and exclusion criteria.

	Inclusion criteria	Exclusion criteria
Subjects with D-T2DM	Diagnosed with T2DM; Diagnosed T2DM for at least 3 months; TCM diagnosed with "dual deficiency of Qi and Yin syndrome."	Diagnosed with type 1 diabetes, secondary diabetes, gestational diabetes, or unknown type of diabetes Patients with stage III hypertension or myocardial infarction Patients with severe primary diseases Patients with severe primary diseases Patients with serious complications, such as infection and diabetic ketoacidosis
Healthy subjects	FPG < 5.6 mmol/L; Healthy and no associated symptoms of "dual deficiency of Qi and Yin syndrome."	Subjects with a family history of diabetes Subjects with hypertension or other cardiovascular and cerebrovascular diseases Subjects currently taking medications.

2100 System (NanoDrop ND-1000) and accurately quantified by quantitative real-time polymerase chain reaction. Lastly, the libraries were pooled according to the requirements of effective concentration and data volume and then sequenced on Illumina Hiseq 2000 platform.

Quality Control and Mapping

Raw data were processed through in-house Perl scripts. In this step, the raw data were cleaned by removing reads containing adaptors, contaminants, and low-quality reads. All clean data have been submitted to Sequence Read Archive with accession number SRP274496. Additionally, the Q20, Q30, and GC content were calculated to estimate the quality of clean reads. Next, the clean reads were aligned to the reference genome (GRCh37/hg19) using STAR (v2.5.1b).

Quantitative Analysis of Genes and ncRNAs

The FPKM of transcripts and ncRNAs were calculated by Cuffdiff (v2.1.1) (17). FPKM refers to the number of fragments per kilobase length from a gene per million fragments mapped. It considers the effect of both sequencing depth and gene length on fragments count.

GO and KEGG Pathway Annotation

In order to understand the biological function of differentially expressed genes, we performed enrichment analysis by topGO software. Based on the newest KEGG database, the pathway analysis was performed to determine the significant pathway of the differential genes. Fisher test was used for enrichment analysis, and those with P < 0.05 were significantly enriched.

Interaction Network Analysis

Cytoscape v2.8.2 software (http://www.cytoscape.org/) was used to construct the lncRNA-mRNA and circRNA-miRNA regulatory network based on the differentially expressed gene data in the blood between D-T2DM and healthy subjects.

Characteristics	D-T2DM patients	Healthy control	P
Number	6	6	_
Male/female	3/3	0/6	_
Age (year)	53.50 ± 9.44	43.5 ± 6.02	0.054
BMI (kg/m ²)	26.08 ± 5.48	23.00 ± 1.38	0.211
FPG (mmol/L)	8.15 ± 1.68	5.02 ± 0.39	0.005
HbA _{1c} (%)	9.78 ± 3.40	_	_
TC (mmol/L)	5.33 ± 0.92	4.79 ± 0.46	0.228
TG (mmol/L)	2.72 ± 1.51	0.93 ± 0.32	0.018
LDL-C (mmol/L)	3.19 ± 0.67	2.85 ± 0.48	0.330
HDL-C (mmol/L)	1.21 ± 0.30	1.58 ± 0.37	0.112

TABLE 2 | Characteristics of study subjects.

Statistical Analysis

This study used GraphPad Prism 7 (GraphPad Software, CA) and SPSS software (version 20.0) for the statistical evaluations. The results are expressed as mean \pm SEM. Statistical differences were determined by Student independent *t*-test, and the significance was accepted at *P* < 0.05. Each experiment was repeated for three technical replicates.

RESULTS

Clinical Characteristics of the Participants

In this study, six D-T2DM patients and six healthy subjects were enrolled. All patients fulfilled the diagnostic criteria for D-T2DM. There was no significant difference in age between the D-T2DM and control groups. The characteristics of all subjects are shown in **Table 2**. Compared with the control group, the D-T2DM group exhibited significant increases in FPG and TG levels.

Quality Assessments and Mapping Results

To construct expression profiles of mRNAs and ncRNAs of D-T2DM and healthy control, transcriptome data sets were generated by RNA-seq. Subsequently, quality control and mapping analysis were performed for the sequencing output (**Supplementary Tables 1, 2**). The base percentage of Q20 was >95.29%, Q30 was >88.92%, and the average mapping rate of the 12 samples was 95.21%. These results could indicate the high quality of transcriptome sequencing data with suitable mapping.

Differentially Expressed mRNAs, IncRNAs, and circRNAs

Sequencing technique was used to detect differentially expressed ncRNAs in the peripheral blood of D-T2DM patients. In **Figure 1**, the results showed that a total of 469 differentially expressed mRNAs (341 up- and 128 down-regulated), 776 differentially expressed lncRNAs (688 up- and 88 down-regulated), and 21 differentially expressed circRNAs (5 up- and 16 down-regulated) were detected in D-T2DM patients compared with healthy control (fold change >1.5, P < 0.05). **Tables 3–5** list the top 10 up- and down-regulated mRNAs, lncRNAs, and

circRNAs, respectively. Furthermore, **Figures 1A–F** shows the volcano plot, cluster map of differentially expressed mRNAs, lncRNAs, and circRNAs, respectively. Among these genes, LRRC19, GCNT3, and CKMT2 were associated with the pathogenesis of T2DM. Furthermore, mRNAs involved in regulation of mitochondrial function and lipid metabolism were significantly expressed, such as MT-ND1, MT-ND2, and OSBL6.

IncRNA Target Gene Prediction

lncRNA may perform its function by regulating genes. Therefore, we predicted the biological function of lncRNA by its colocated and coexpressed genes. We set the threshold of the colocated genes to 100 kb upstream and downstream of lncRNA; mRNA gene with an absolute value of Pearson correlation coefficient >0.95 was defined as lncRNA coexpressed mRNAs (**Supplementary Tables 3, 4**).

GO and KEGG Enrichment Analysis of Differentially Expressed RNAs in D-T2DM

We performed functional enrichment analysis of differentially expressed RNAs in bioinformatics databases, including GO and KEGG analysis. As shown in Figure 2A, GO analysis of differentially expressed mRNAs revealed that the most significantly enriched biological process (BP) were disruption of cells of other organism and killing of cells of other organism, and the most significantly enriched cellular component (CC) were actin cytoskeleton, cytosolic ribosome, and secretory granule. The GO analysis of differentially expressed lncRNAs showed that the most significantly enriched BPs were adaptive immune response, positive regulation of lymphocyte activation, and response to virus, and the most noteworthy enriched CCs were MHC class II protein complex, cytosolic part, and MHC protein complex. The most significantly enriched molecular functions (MFs) were MHC protein binding, tumor necrosis factor receptor binding, and antigen binding (Figure 2C). GO analysis of differentially expressed circRNAs revealed that the most significantly enriched BPs were biological regulation, CC organization or biogenesis, and cellular process, and the most notable enrichment of CCs were cell, cell junction, and cell part. The most significantly enriched MFs were binding, catalytic activity, and channel regulator activity (Figure 3A).

KEGG analysis of differentially expressed mRNAs revealed that the most significantly enriched pathway in D-T2DM pathogenesis was ribosome (**Figure 2B**). The colocated mRNAs of differentially expressed lncRNAs were significantly enriched in antigen processing and presentation, osteoclast differentiation, and leishmaniasis (**Figure 2D**). Furthermore, differentially expressed circRNAs-derived genes were mostly involved in the ubiquitin-mediated proteolysis (**Figure 3B**).

Protein–Protein Interaction Network of IncRNA Colocated mRNA Corresponding Genes

We extracted the interaction relationship of differential gene sets to build a network forms the STRING Protein Interaction Database (http://string-db.org/) and then imported them into



TABLE 3 | The top 10 up-regulated and down-regulated mRNAs.

Gene ID Gene name		Gene name FPKM (D- T2DM)		Log2 fold change	P-value	P_{adj}	
Up-regulated							
ENSG00000183878	UTY	9.91899	0.0049747	10.9614	0.00045	0.0126343	
ENSG00000232149	FERP1	1.22941	0.00209386	9.19759	0.00115	0.0242534	
ENSG00000140297	GCNT3	1.89904	0.00381092	8.96092	0.00005	0.00240707	
ENSG00000187634	SAMD11	0.752482	0.00168873	8.79958	0.00005	0.00240707	
ENSG0000078795	PKD2L2	1.20053	0.00331709	8.49954	0.00005	0.00240707	
ENSG0000006016	CRLF1	458.687	1.40407	8.35175	0.00005	0.00240707	
ENSG00000170615	SLC26A5	1.27264	0.0041778	8.25087	0.001	0.0221781	
ENSG00000136918	WDR38	29.9692	0.1154	8.02069	0.0006	0.015474	
ENSG00000183562	AC131971.1	7.10184	0.0274812	8.01361	0.0002	0.00701087	
ENSG00000163915	C3orf65	8.83833	0.0362467	7.92978	0.00005	0.00240707	
Down-regulated							
ENSG00000198888	MT-ND1	74.9026	2,064.52	-4.78464	5.00E-05	0.00240707	
ENSG0000074803	SLC12A1	0.23733	5.67038	-4.57848	5.00E-05	0.00240707	
ENSG00000198763	MT-ND2	55.2564	1,249.02	-4.49852	5.00E-05	0.00240707	
ENSG00000196557	CACNA1H	0.165957	3.35284	-4.3365	5.00E-05	0.00240707	
ENSG00000212907	MT-ND4L	84.5123	1,551.15	-4.19803	5.00E-05	0.00240707	
ENSG00000241404	EGFL8	0.0832157	1.35492	-4.0252	0.00015	0.00573718	
ENSG00000198723	C19orf45	0.0868447	1.31358	-3.91892	0.00025	0.00822086	
ENSG0000079156	OSBPL6	0.112348	1.65811	-3.8835	5.00E-05	0.00240707	
ENSG0000039560	RAI14	0.0858024	1.23208	-3.84393	5.00E-05	0.00240707	
ENSG00000198727	MT-CYB	73.2737	950.04	-3.69662	5.00E-05	0.00240707	

TABLE 4 | The top 10 up-regulated and down-regulated IncRNAs.

Gene ID	ene ID Gene name		FPKM (control)	Log2 fold change	P-value	P_{adj}
Up-regulated						
ENSG00000234961	RP11-124N14.3	18.5498	4.24E-287	955.523	0.00305	0.0469409
ENSG00000235790	RP11-73M7.6	1.46004	5.28E-79	260.578	0.00005	0.00240707
ENSG00000268015	CTD-252513.3	4.55701	0.00704305	9.33767	0.0024	0.0399329
ENSG00000268931	RP11-886P16.6	10.0556	0.0156849	9.32441	0.0011	0.0235009
ENSG00000256746	RP11-17G12.3	0.978943	0.00159989	9.25711	0.0009	0.0206451
ENSG00000232342	RP11-46021.2	3.4293	0.00601889	9.1542	0.00005	0.00240707
ENSG00000140297	GCNT3	1.89904	0.00381092	8.96092	0.00005	0.00240707
ENSG00000260185	RP11-432l5.6	1.07359	0.0023429	8.83993	0.00125	0.0256726
ENSG00000187634	SAMD11	0.752482	0.00168873	8.79958	0.00005	0.00240707
ENSG00000254907	RP11-484D2.2	2.58357	0.00592938	8.76727	0.00065	0.0165741
Down-regulated						
XLOC_163941	XLOC_163941	0.250185	8.96535	-5.1633	0.00005	0.00240707
ENSG0000074803	SLC12A1	0.23733	5.67038	-4.57848	0.00005	0.00240707
ENSG00000196557	CACNA1H	0.165957	3.35284	-4.3365	0.00005	0.00240707
ENSG00000241404	EGFL8	0.0832157	1.35492	-4.0252	0.00015	0.00573718
ENSG00000198723	C19orf45	0.0868447	1.31358	-3.91892	0.00025	0.00822086
ENSG0000079156	OSBPL6	0.112348	1.65811	-3.8835	0.00005	0.00240707
ENSG0000039560	RAI14	0.0858024	1.23208	-3.84393	0.00005	0.00240707
ENSG00000224699	LAMTOR5-AS1	1.44793	9.81133	-2.76046	0.00005	0.00240707
ENSG00000115155	OTOF	0.353152	1.88766	-2.41824	0.0019	0.03413
ENSG00000236842	RP11-399K21.10	0.30283	1.55821	-2.36331	0.0006	0.015474

TABLE 5	The top 10	up-regulated a	and down-regulated	circBNAs
INDEE 0		up regulated t	and down regulated	0101114/10.

Gene ID	Readcount (D-T2DM)	Readcount (control)	Log2 fold change	P-value	P_{adj}
Up-regulated					
novel_circ_0003372	146.494916	4.61683282	3.6192	1.12E-16	3.49E-13
hsa_circ_0057753	7.18354725	0	2.4945	6.01E-07	0.00070049
hsa_circ_0002590	60.9371505	7.46905994	1.9531	4.32E-05	0.020144
hsa_circ_0003940	34.4646129	8.29183529	1.7458	1.25E-06	0.0012938
hsa_circ_0004086	48.0745617	10.1103775	1.6871	9.91E-05	0.043985
Down-regulated					
hsa_circ_0007643	0	43.8034065	-4.793	3.37E-27	3.14E-23
hsa_circ_0002909	0	30.763914	-4.1364	6.11E-19	2.85E-15
hsa_circ_0036353	3.21483052	57.3358704	-2.8884	2.87E-11	6.69E-08
novel_circ_0011589	0	10.3931505	-2.8485	8.13E-09	1.52E-05
hsa_circ_0028247	0	13.4721127	-2.7991	1.82E-08	2.82E-05
novel_circ_0003446	0	8.46521062	-2.7445	2.91E-08	3.88E-05
novel_circ_0016196	10.5555015	34.3486988	-1.5837	1.61E-06	0.0014977
hsa_circ_0036348	0	5.86871951	-2.3608	2.30E-06	0.001646
novel_circ_0016198	71.1231467	176.561073	-1.2502	1.97E-06	0.001646
novel_circ_0036259	0	13.2664491	-2.3702	2.19E-06	0.001646

Cytoscape software for visual editing (**Figure 4**). As shown in **Table 6**, we listed the top 10 BP terms enriched for the genes involved in the protein–protein interaction network. UBA52 had the highest degree of network connectivity and enriched in the BP terms such as immune system process, regulation of immune response, and regulation of immune system process.

Regulatory Network of circRNA and miRNA

Using differentially expressed circRNA as the center and miRNA as the target, we constructed the circRNA-miRNA regulatory network of up-regulated and down-regulated circRNAs, respectively (Figure 5). We found that 47, 38, 48, and 51 miRNA sites can be combined with up-regulated hsa_circ_0002590, hsa_circ_0003940, novel_circ_0003372, and hsa_circ_0004086, respectively; 70, 76, 80, 41, 22, 63, and 30 miRNA sites associated with down-regulated hsa circ 0036353, novel circ 0005686, novel circ 0002424, hsa_circ_0036351, novel_circ_0016196, hsa_circ_0007458, and novel_circ_0016198, respectively. Among the results, MiR-877-3p was associated with T2DM and mitochondrial function and combined with novel_circ_0016196, novel_circ_0016198, and novel circ 0005686. circRNA has circ 0002590 and novel_circ_000372 regulated the expression of MiR-149-5p, which could regulate the insulin secretion.

DISCUSSION

In this study, we used sequencing technology to determine the significantly differentially expressed mRNAs, lncRNAs, and circRNAs in the peripheral blood of patients with D-T2DM. Afterward, we performed GO and KEGG pathway analysis on these differentially expressed RNAs to predict their potential biological functions. In addition, we also constructed proteinprotein interaction network and circRNA-miRNA regulatory network. Our results indicated that ncRNAs may play a role in the pathogenesis of D-T2DM and provide some potential targets for the treatment of D-T2DM.

The sequencing results showed that there were 469 mRNAs, 776 lncRNAs, and 21 circRNAs significantly dysregulated in D-T2DM patients compared with healthy subjects. In upregulated mRNAs, we have found some targets related to the pathogenesis of T2DM, such as LRRC19, GCNT3, and CKMT2. Among them, LRRC19 could activate nuclear factor kB (NF- κ B) and induce expression of pro-inflammatory cytokines (18). GCNT3 was also related to inflammation (19-21). Inflammation can lead to a cluster of chronic metabolic disorders such as insulin resistance, obesity, type 2 diabetes, and cardiovascular disease (22-24). In addition, previous studies have revealed that NF-kB and its target inflammatory factor genes such as IL-1 and IL-6 played a key role in the development of insulin resistance and T2DM (25-27). CKMT2, creatine kinase, mitochondrial 2, was an effective modulator of ATP synthasecoupled respiration (28). Among down-regulated mRNAs, there were some mitochondrial genes, for instance, MT-ND1, MT-ND2, MT-ND5, and MT-ND4L. These mitochondrial genes were associated with fatty acid metabolism, mitochondrial oxidative phosphorylation, mitochondrial energy transduction, and the diabetes mellitus pathogenesis (29-31). Mitochondria are the most essential energy production organelles, supplying energy for cell metabolism in the form of ATP (32). In traditional Chinese medicine, fatigue is a major symptom of D-T2DM patients. Meanwhile, the hallmark symptom of mitochondrial dysfunction is fatigue (33). Therefore, mitochondrial dysfunction may play a role in the pathogenesis of D-T2DM. Furthermore, OSBPL6 was positively correlated with plasma levels of high-density



KEGG enrichment is assessed by enrichment of factors, Q-values, and number of genes. When the rich factor is larger, the Q-value is closer to zero, and the more the number of genes, the more significant the enrichment.

lipoprotein cholesterol (34). SLC12A1 may play a role in glucoseinduced insulin secretion (35). In general, the results indicated that the pathogenesis of D-T2DM may be related to the glucose and lipid metabolism disorders, occurrence of inflammation, and mitochondrial dysfunction.

At present, the mechanism of interaction between lncRNA and protein-coding genes is not clear. We predicted the biological function of lncRNA through its colocated and coexpressed protein-coding genes. Among the differentially expressed lncRNAs, lncRNA-SLC12A1, lncRNA-OSBPL6, and lncRNA-GCNT3 were colocated with SLC12A1, OSBPL6, and GCNT3, respectively. Therefore, these lncRNAs may play a role by regulating the genes related to glucose metabolism, lipid metabolism, and inflammation. Afterward, this study used GO and KEGG pathway analyses to analyze the biological function and pathways of lncRNAs-related genes in the peripheral blood of patients with D-T2DM. The results showed that the most enriched GO term was adaptive immune response. Previous studies have demonstrated that adaptive immune factors was recognized as important etiological components in the development of insulin resistance (36). In our future work, the specific role of lncRNAs predicted by GO and KEGG analysis in the pathogenesis D-T2DM needs to be further studied. Protein-protein interaction network represents the interaction of the protein products of the lncRNA colocated genes and was used to predict the biological function of differentially expressed lncRNAs. The results showed that the proteins were mainly enriched in BPs related to immune response. In addition, UBA52 had the highest degree of connectivity, and previous study suggested that UBA52 may be implicated in the diabetic nephropathy (37). Therefore, differentially expressed lncRNAs appear to function in the pathogenesis of D-T2DM by regulating immune response.

0.50

0.25

0.0150

0.012

0.0100 Rich factor

Statistics of Pathway Enrichment

In order to discover the molecular mechanism of circRNAs in D-T2DM, we constructed the circRNA-miRNA regulatory network based on the sequencing data. In our results, MiR-877-3p was combined with down-regulated circRNA novel_circ_0016196, novel_circ_0016198, and novel_circ_0005686. Xie et al. (38) found that MiR-877-3p was deregulated in type 2 diabetic kidney disease. Another study revealed that MiR-877-3p exerts its effects via the Blc-2-mediated mitochondrial apoptotic pathway (39). CircRNAs generally act as an miRNA sponge to

regulate gene expression. Therefore, the down-regulation of these circRNAs may improve the function of MiR-877-3p and thus mediate mitochondrial apoptosis. On the other hand, up-regulated circRNA has_circ_0002590 and novel_circ_000372 were associated with MiR-149-5p. The overexpression of MiR-149-5p could ameliorate the high glucose-induced injury in human umbilical vein endothelial cells, whereas the inhibition of MiR-149-5p could suppress cell viability, induce cell apoptosis, and inhibit insulin secretion (40, 41). In this research, the up-regulated

FIGURE 3 | GO (A) and KEGG (B) analysis of circRNAs in peripheral blood sample of D-T2DM patients.

Gene Function Classification (GO)

STX10	RPL10	KLRC1	UBL4A	CACTIN	CASP10	ZC3H3	KDM8	SEC14L2	BCL9L	CCNE2	PREX1	RABAC1	MAT28	STX4	CBY1	BRSK1	CDKSRAP2	PRRT2	AURKAIP1	LIPA	SPO11	EXOSC
NDUFAF6	DGCR8	LILRA2	LILR82	USF1	PYCR1	UBA52	OSCAR	NHLRC1	PACS1	KIFIC	SART1	FOSL1	FBXL22	RPL36A	TRMT108	PPIF	NPW	OAZ1	DENND2A	IFI#18	PSMB8	KMT2
RRP9	APOBEC3D	MAP3K11	ZNF598	ARFGEF2	STX11	GFER	RAMP3	DEK	GLA	MIF	ENO3	EPHX2	DNM2	CPSF7	OR52W1	RPS5	LST1	STRA13	KLC2	RASAL3	FIBP	SMARCE
G000001147	86 VAMP1	СМОТЗ	RB1	CENPU	CD8A	TBL3	GBA2	STAU1	CD88	LIF	HMGA1	CACN84	ASGR2	IL27RA	IFIT1	NEDD4L	DBR1	CSNK1D	SUV420H2	RPS6KB2	PLIN3	HSD38
HCLS1	CD27	SLA	LILRB3	PA1	SYT7	TEPT	YWHAH	PHF3	CD44	HMMR	CLASP2	PLB1	POLR2A	ENTPD4	PCBP4	PEN1	RPL28	UBE2S	MED18	TLNI	HSPA6	RACE
TIGDS	HERC6	EMR	PYCRL	NCAPD2	DCAF10	TUBA18	CD79A	CCNL2	TBXAZR	CPSF3L	CABP1	АРОВЕСЗА	TGS1	TEP1	SETDIA	RNF220	CCKBR	MRPL51	PTP4A1	ILES	ISG20	STAM
SF3A1	CASP8	CEPT1	FASN	IFIT 2	PLXNB3	USP3	OSMR	ACER2	HLA-DQA1	FAM13A	HERCS	CLEC10A	11.11	RCL1	NDUFA3	TNFRSF1A	GNG13	RASAL1	OTOA	IER2	EGFL7	JUN
LTB	TAS1R3	мадонв	RGS6	PYDC1	LTBR	HLA-DMB	PTGFR	ACSL1	ATPLAS	SESN2	GALNT10	MXRAS	EIF2A	CEP83	AP1G1	TMSB10	ELL	RPS6	RSL1D1	DNASE 1L1	CEACAM3	C4BP.
TNFRSF17	KAT8	ELOF1	HLA-DQB2	SENP3	RNF19A	GPS1	AGY1	BCL6B	USP21	CD72	LOXL2	IL4R	АКАРВ	RPL3L	MRPL19	KRI1	HRH2	PFDN2	EIFIAD	SSR4	JAK2	MSRB
PHACTR3	PIGY	EVA1A	DTX1	MRPL20	RPS19	TTCS	PICALM	LCP2	HNRNPC	AP5B1	NUDT3	DNAL4	HNRNPU	RAE1	SEC14L3	RANBP9	PWP2	BAG6	CTDSP1	OR\$684	NAPILS	EMD
NDE1	ВТК	SAPBOL	DOTIL	ORSB21	CLNS1A	CD68	TP5 3INP1	URC1	SESN3	WIPF1	CYP7A1	MED15	KLHL22	PPP1CA	TNFSF13	RPS14	TICAM1	KIR2DL4	TCEB2	APOBEC3G	TESK1	SHISA
CRLF1	HERC3	LRRC45	CLU	CD74	KIF2C	RPL29	A4GNT	KIR3DL1	ING4	FBXL19	FLNA	FCGR3A	CARNS1	LAG3	CREB3	FOXR1	RMNDSA	TSC2	FBXO40	ULRA1	NPHP1	HNRNF
DHH	DENND2D	IDHBG EN	SG0000024899	3 PDE2A	DNA2	USP41	TIMM8A	TOMM22	TUBALC	ATXN1	GNB3	TRAF3	FKBP8	YOD1	BANF1	TPT1	TNFSF12	HSPAZ	MUS81	TRAPPC4	TPM2	APOBE
TAZ	ATP6V1G2	LAGE3	PRPF31	KIR2DL3	C48P8	CFL1	CCR7	RPS25	MAFG	AGPAT2	MED13L	TANGO2	MSLN	CCDC115	TOMM34	DNAH6	PTAFR	SUN2	CLCF1	ARHGEF39	GTP8P1	MED
ARHGEF1	IQCF1	FBXL16	EIF4A1	LILRAG	GCFC2	ASPSCR1	UTRN	RCOR1	TAP1	DDB1	CH25H	STAT 1	COPS7A	KIF22	VWA1	SYCP2	AP3D1	PYURF	NOTUM	UTS2R	SF3A2	POP:
SSSEA1	SST	PHIP	UBAS	NDUF82	DAP3	ATAD 3B	TUBGCP4	LILR81	EYA3	CDKL1	BRD4	AIBG	C17orf49	SLC11A1	PLAGL1	TRAPPC10	DNAJC8	СНМРЗ	OAS3	MYSM1	BRMS1	CNIH
FCGR28	INTS8	HAUS6	OR52B2	CACNAIB	CATSPER1	PLIN2	PYCARD	FBXW2	TP53	IL20	KIR2DL1	OAS2	NAPRT	BRAF	CDKN2D	RPS9	TPRKB	CXCR5	POTEI	KXD1	USP15	RLN
SF3B5	IFIT3	AEN	CORO18	ALOX12	DUSP9	MRAS	RGP1	TGFBR2	HMG208	SMARCE1	TOLLIP	IMP4	CENPI	ACAP3	ATP6AP1	AIP	HLA-DQA2	HLA-DQ88N	SG000 <mark>0</mark> 0249	884MARCA5	RNF103	YWHA
DERL3	OSM	ARMC8	DDX398	NT5C3A	MUCSB	DVL1	RHEB	SLC44A2	TG	KDM1B	TKTL1	КМТ2С	LILRB4	PPP1R3D	TTC1	ASH1L	RAD9A	NSMAF	PSMB9	TRMT2A	GES	MYB1
TUBALA	EEPID	BCL6	RIN1	L2HGDH	SRRM2	FCGR2A	RPS2	KIR3DL2	TMEM216	FAM58A	STK4	NUB1	LTA	ZBTB25	CDIPT	SP1 10	PARP2	CD4	FOS	DCAF15	POLQ	ORSAL
ARHGAP30	STRADB	GTF2F2	POLD 4	PLXNA3	GADL1	NEB	TAP2	GP1BA	LYN	AP1M2	NFIL3	FEM1A	BCAP31	PDPK1	TSTAB	LILRBS	FBXL2	ARHGEF12	TP53BP1	SDCBP	DUSP7	GNB:
NANOS3	FCGR3B	TNF	ATPSS	PIGR	GOLGB1	LYPD4	ECSIT	SPAG1	AKAP8L	JOSD1	ATP182	SF3B2	NDUF83	MVP	11.19	FOSL2	CFLAR	CNTF	ITGA4	FUS	CBX7	WRAP
IL24	DYNLL1	SLC2A1	GSDMD	PRSS21	AKAP13	PIP5K1C	GSPT1	EIF2S3L	KATS	CNGA4	RAB18	SRPK3	STX18	KCMF1	SCNN1A	PABPCIL	GDI1	HLA-DMA	IGF8P4	NF1	SOS2	ITGA
CCNG1	FXR2	RTP2	RICTOR	BRSK2	ARMC1	АРОВЕСЗН	OAS1	SMARCB1	NDUF810	CACNALA	HLA-DOB	ADRA18	HNRNPH2	CALML6	BRE	ISTI	EFNB3	INSL6	OR11H4	PDE7A EN	SG00000270	800 PAK
DENND4C	FZR1	VIM	APOBEC 3F	AMPH	NSMCE1	APOBEC3C	ARAP1															

в

Viral carcinogenesia Ubiquitin mediated proteolysia ascriptional misregulation in cance hyroid hormone signaling pathway T cell receptor signaling pathway Proteoglycans in cance Occyte meiosia Neurotrochin sionalino gathwa

mRNA surveillance pathwa

Jak-STAT signaling pathway Insulin signaling pathway Huntington s disease Hippo signaling pathway na R-mediated phagocytosi ErbB signaling pathway Epstein-Barr virus intection Endocytosi Chronic myeloid leukemii Chronic myeloid leukemii

FIGURE 4 | Protein interaction network of DELncRNA colocated mRNA corresponding genes.

Α

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Term ID	Term description	Observed gene count	Background gene count	False discovery rate
GO:0002376	Immune system process	193	2,370	2.91E-06
GO:0006955	Immune response	138	1,560	6.57E-06
GO:0050776	Regulation of immune response	80	873	0.0041
GO:0002682	Regulation of immune system process	113	1,391	0.005
GO:0016032	Viral process	58	571	0.005
GO:0044403	Symbiont process	63	650	0.0051
GO:0048525	Negative regulation of viral process	18	93	0.0067
GO:0051704	Multiorganism process	162	2,222	0.0076
GO:0002250	Adaptive immune response	34	280	0.0094
GO:0002577	Regulation of antigen processing and presentation	8	17	0.0094



circRNAs competitively bound with MiR-149-5p to inhibit its function. In general, circRNAs may play a role in the pathogenesis of D-T2DM by regulating the function of MiR-877-3p and MiR-149-5p, but the specific mechanisms need further research.

In this study, we have performed a comprehensive transcriptome analysis in D-T2DM patients' peripheral blood, revealing the contribution of epigenetic changes to D-T2DM. However, the present study has several limitations. First, in order to better understand the mechanism of occurrence and development of D-T2DM, it is important to compare D-T2DM with other types of T2DM, such as a milder form of T2DM. This will be the main part of our future study. Next, the major targets of insulin actions are skeletal muscle, liver, and

adipose tissue rather than the blood. Therefore, our results can explain the pathogenesis of D-T2DM only partially. We anticipate the transcriptome profile of typical insulin-targeted tissues of D-T2DM patients will be investigated in the future. In addition, because peripheral blood also includes multiple cell populations and bioactive substances, further studies are required to characterize a more precise role of ncRNAs in peripheral blood of D-T2DM patients. Our results indicate that ncRNAs may exert their biological functions in the pathogenesis of D-T2DM by interacting with each other or related proteins genes. However, the mechanism of ncRNAs is complicated; thus, we will further study these predicted ncRNAs and their involved signaling pathways. Finally, it will help to reveal the internal mechanism and therapeutic targets of D-T2DM. In conclusion, we used sequencing analysis to study the expression profile of RNAs in the peripheral blood of D-T2DM and healthy subjects. Differentially expressed mRNAs, lncRNAs, and circRNAs were screened, and their potential biological functions were predicted by bioinformatics analysis. These results may bring new perspectives on the pathogenesis of D-T2DM and promote the development of new therapeutic approaches targeting RNAs.

DATA AVAILABILITY STATEMENT

All clean data have been submitted to Sequence Read Archive with accession number SRP274496.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by the Ethics Committee of Beijing University of Chinese Medicine (BUCM) (2017BZHYLL0105). The patients/participants provided their written informed consent to participate in this study.

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AUTHOR CONTRIBUTIONS

SG and GJ designed the experiments. BL and XB wrote the manuscript. PL and TA interpreted data and revised the manuscript. JL, YW, JZha, and XY performed experiments. TA, TW, JZhu, and YH performed data collection and analysis. All authors reviewed the manuscript and agreed to the publication of this article.

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SUPPLEMENTARY MATERIAL

The Supplementary Material for this article can be found online at: https://www.frontiersin.org/articles/10.3389/fendo. 2020.558344/full#supplementary-material

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Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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