



OPEN Discovery of miRNA–mRNA regulatory networks in glioblastoma reveals novel insights into tumor microenvironment remodeling

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Adult glioblastoma (GBM) is a highly aggressive primary brain tumor, accounting for nearly half of all malignant brain tumors, with a median survival rate of only 8 months. Treatment for GBM is largely ineffective due to the highly invasive nature and complex tumor composition of this malignancy. MicroRNAs (miRNA) are short, non-coding RNAs that regulate gene expression by binding to messenger RNAs (mRNA). While specific miRNA have been associated with GBM, their precise roles in tumor development and progression remain unclear. In this study, the analysis of miRNA expression data from 743 adult GBM cases and 59 normal brain samples identified 94 downregulated miRNA and 115 upregulated miRNA. Many of these miRNA were previously linked to GBM pathology, confirming the robustness of our approach, while we also identified novel miRNA that may act as potential regulators in GBM. By integrating miRNA predictions with gene expression data, we were able to associate downregulated miRNA with tumor microenvironment factors, including extracellular matrix remodeling and signaling pathways involved in tumor initiation, while upregulated miRNA were found to be associated with essential neuronal processes. This analysis highlights the significance of miRNA in GBM and serves as a foundation for further investigation.

Keywords microRNA, Glioblastoma, Tumor microenvironment, Extracellular matrix, Growth signaling

Glioblastoma multiforme (GBM) is classified as a grade IV *IDH*-wildtype diffuse glioma¹. GBM is the most aggressive malignant primary brain tumor which accounts for nearly half of all malignant brain tumors, and affects approximately 7 out of every 100,000 older adults every year². The majority of GBM patients succumb to the malignancy with a median survival time of approximately 8 months from diagnosis². A common hallmark of GBM is its rapid infiltration and growth into the surrounding brain parenchyma, posing significant challenges for surgical resection³. Furthermore, the presence of GBM stem cells complicates treatment efficacy due to their chemo- and radioresistance^{4,5}. In sum, there is a critical need to gain a deeper understanding of GBM biology before effective treatment strategies can be realized.

GBM is a malignancy characterized by a complex tumor microenvironment (TME) that encompasses intricate interactions between transformed neuronal cells at different stages of differentiation^{6,7} as well as non-cancerous cells including neurons and fibroblasts, which significantly contribute to tumor growth and progression^{8–10}. The GBM microenvironment also features a diverse range of immune cells, such as macrophages and T regulatory lymphocytes which possess suppressive qualities that can create a “cold” tumor environment^{9,11,12}. In sum, through direct interactions or crosstalk with resident cells, GBM cells hijack the TME and surrounding extracellular matrix (ECM) to enhance tumor malignancy^{9,13,14}.

MicroRNAs (miRNA) are short non-coding RNA molecules essential for post-transcriptional gene regulation, capable of silencing the expression of various genes, both protein-coding and non-coding^{15–17}. Through partial Watson–Crick complementarity, miRNA hybridize with RNA molecules and exert their regulatory functions

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by inducing RNA cleavage or translational repression^{16,18}. Emerging studies suggest that dysregulated miRNA expression plays a role in promoting tumor hallmarks in GBM¹⁹, and can serve as prognostic markers for patient survival²⁰. Furthermore, preclinical studies have highlighted the potential of miRNA modulation as a treatment strategy for GBM^{21,22}.

While many miRNA associated with GBM progression have been reported, most remain unexplored. Understanding their new roles may reveal new insights into GBM biology and novel therapeutic strategies. However, the current knowledge gap stems in part from outdated and low-quality miRNA expression data from GBM patient miRNA microarray studies. Although next-generation technologies, including miRNA-seq and Nanostring data, are becoming more available, these datasets still face limitations, such as small sample sizes, low sensitivity, incomplete miRNA detection, uneven sample distribution, and insufficient matched controls^{23–31}. In the absence of more optimal datasets, integrating available data increases the sample size and improves the statistical power and robustness of analyses. Indeed, two previous studies investigated the role of specific miRNA hits identified through the integration of multiple adult and pediatric GBM profiling datasets^{32,33}. Extending previous research, we integrated additional datasets to create the largest-to-date collection of miRNA expression data from adult primary GBM patients. This study, therefore, provides the most comprehensive analysis of miRNA in GBM to date, with potential for further investigation as more data become available.

Our integrated analysis of miRNA prediction algorithms and protein-coding gene expression revealed links between downregulated miRNA and ECM factors and key growth and immune signaling pathways, and between upregulated miRNA and neuronal processes, suggesting a role in neuronal differentiation during GBM development. The potential for miRNA to promote GBM aggressiveness by remodeling the TME is particularly promising for therapeutic exploration. Our analyses identified both oncogenic and tumor-suppressive miRNA with novel functions in the molecular mechanisms driving GBM progression. These findings, together with the recent Nobel Prize in miRNA research, suggest novel hypotheses for miRNA regulation in GBM and may inspire innovative miRNA-targeted therapies³⁴.

Materials and methods

Data acquisition

Publicly available miRNA expression datasets were identified using the search terms, ‘microRNA’ and ‘glioblastoma’ on NCBI GEO and NCI databases between May 2023 and January 2024. All identified datasets were manually screened and filtered based on the following criteria: each dataset required a minimum of 3 brain tumor samples and 3 non-cancerous brain tissue controls. This study focuses on adult primary *IDH*-wildtype GBM. At the time of analysis, any samples identified as pediatric, recurrent, secondary or *IDH*-mutant were removed.

Data processing and quality control

Unprocessed miRNA expression data was accessed from the NCBI GEO and NCI platforms for GSE158284, GSE109628, GSE90603, GSE65626, GSE25631, GSE91014 (TCGA), GSE165937, GSE214252 and PDC000204 datasets. The following analyses were performed using the R programming language. Protocols can be shared upon request. For GSE158284, GSE109628 and GSE91014, miRNA expression data was imported using the *AgiMicroRna* package (2.48.0)³⁵. For GSE90603 and GSE65626, CEL files were imported and read using the *oligo* package (1.60.0)³⁶. For GSE25631, an illumina probe summary file was loaded using the *limma* package (3.54.2)³⁷. Raw counts from GSE165937, GSE214252 and PDC000204 were downloaded and converted into an *edgeR*-compatible *DGEList* object (3.40.2)³⁸.

For microarray datasets, raw expression data underwent quantile normalization and background correction using microarray platform-specific packages including *AgiMicroRna* (2.48.0), *oligo* (1.60.0) and *limma* (3.54.2)^{35,36,39,40}. Low-expression miRNA probes were removed from analyses if probes were not expressed or if expression values were below the mean expression of negative-control probes in a minimum of 50% of arrays within each individual dataset. For count-based datasets, raw counts were processed and normalized using the trimmed mean of M-samples method via the *EdgeR* package (3.40.2)³⁸. Low expression miRNA were removed if they had a count value lower than 10 in a minimum of 70% of samples within each individual dataset. For consistency across datasets, miRNA nomenclature was converted to miRBase v22 using the *miRBaseConverter* package⁴¹.

Each dataset was screened for sample outliers by assessing the miRNA expression distribution across samples using unsupervised principal component analysis (PCA). In the GSE158284 and GSE25631 datasets, potential outliers were detected by PCA clustering and additional platform-specific quality control tools were used. For GSE158284, the *arrayQualityMetrics* package was used to calculate the outlier detection threshold represented by the Kolmogorov–Smirnov statistic between the distribution of individual and combined data⁴². Five irregularly clustered samples exceeded the calculated outlier detection threshold of 0.233 (Supplementary Fig. S1). For GSE25631, the platform-specific detection *P*-values were used as a measure of sample quality. Sixteen samples that clustered distantly based on PCA showed to have a 15% increased proportion of failed probes (*P*-value < 0.0001) (Supplementary Fig. S1). These five (GSE158284) and sixteen (GSE25631) sample outliers were removed from subsequent analyses. Quality control measures in the remaining datasets did not reveal any samples of poor quality.

Differential expression analysis

Differential expression analysis was performed using the *limma* package for microarray data and *EdgeR* for count-based data^{37,38}. *EnhancedVolcano* was used to generate volcano plots of differentially expressed miRNA based on the log₂ fold change ratio and false discovery-adjusted *P*-values (Benjamini–Hochberg)⁴³. Differentially expressed miRNA hits were identified based on an adjusted *P*-value < 0.05 and log₂ fold change

greater than or less than 1. Differential expression analysis results were integrated across datasets as following: an integrated meta log fold change value was summarized by the mean of all log fold changes across datasets using the MetaVolcano R package⁴⁴, whereas an integrated meta adjusted *P*-value was determined through a sample size-weighted Fisher's test using the metapro package⁴⁵. miRNA differentially expressed across all datasets were ranked based on the index value which incorporates meta fold change and meta *P*-value. These results were visualized using the EnhancedVolcano⁴³ package and their certainty was assessed through literature review. For the leave-one-out validation, the integrated differential expression analysis was repeated nine times with each iteration excluding data from one specific dataset. Changes in significantly dysregulated hits were evaluated in comparison to the original list of hits.

Target prediction analysis

We identified 3 datasets which contain miRNA and protein-coding gene expression data for the same patient samples (GSE90598, GSE165286 and PDC000204). Unprocessed expression data was publicly available for GSE90598 and PDC000204. For GSE165286, raw fastq were processed using Salmon to generate transcript-level quantifications against a partial transcriptome index constructed from the Ensembl hg38 *Homo sapiens* reference genome (release 100)^{46,47}. Quantified data were condensed to gene-level counts using the tximport package before conversion into an EdgeR-compatible dataset for analysis⁴⁸. We performed platform-specific individual dataset processing, quality control, and differential expression analysis. These results were integrated using MetaVolcanoR and metapro packages as previously described. The list of dysregulated protein-coding genes was used for target prediction analysis.

Using the mirDIP tool, we conducted a bidirectional miRNA-target prediction between upregulated miRNA and downregulated protein-coding genes or downregulated miRNA and upregulated protein-coding genes⁴⁹. The top 1% predicted interactions from mirDIP sources including miranda May 2021, RNA22, DIANA, mirDB v6 and TargetScan v7.2 were used for subsequent pathway profiling. Predictions identified across multiple mirDIP sources were filtered to create a list of unique miRNA-target interactions. These predictions were compared with experimentally validated interactions sourced from the DIANA-TarBase v9.0 and miR-TarBase v10.0 platforms^{50,51}.

Bootstrap analysis

Protein-coding genes were randomly bootstrap sampled without replacement over 1000 iterations using the python programming language. The number of genes sampled corresponded to the number of upregulated and downregulated protein-coding genes. A bidirectional miRNA-target prediction was performed for each set of randomized gene lists and the corresponding dysregulated miRNA list as described above using the mirDIP python API. The bootstrapped-based prediction analysis calculated the number of interactions between dysregulated miRNA and randomly sampled genes. Confidence intervals (CI) were calculated for each bootstrap sampled distribution to determine if the actual observed number of interactions identified was unique compared to the distribution of the number of random interactions.

Pathway analysis

We performed a hypergeometric enrichment test using the gProfiler g:GOST pathway analysis tool⁵². The list of predicted upregulated and downregulated targets was ordered by confidence scores of miRNA-target interactions and was inputted into the gProfiler platform. The Reactome database was used to identify biological pathways associated with dysregulated targets. A network map was developed using the Cytoscape EnrichmentMap tool to visualize significant pathways with a g:SCS adjusted *P*-value threshold < 0.05⁵³. Pathways were categorized using the Reactome pathway browser tool. Using gene lists associated with each pathway, dot plots were created to identify the predicted targets of miRNA implicated in ECM remodeling, growth, immune-related and core neuronal pathways.

Results

Largest collection of miRNA expression data from adult primary GBM

Our bioinformatics pipeline systematically acquired, processed, and analyzed individual GBM datasets to explore differential miRNA expression patterns (Fig. 1). We searched public repositories (NCBI GEO and NCI) for miRNA expression datasets meeting specific criteria, identifying 139 datasets. Given the distinct molecular and genetic profiles of adult and pediatric GBM, and thus differing disease mechanisms^{54,55}, our analysis focused solely on adult GBM. We filtered for datasets containing adult primary IDH-wildtype GBM samples with at least three tumor and three non-cancerous brain tissue controls, excluding recurrent, secondary, or IDH-mutant samples. Nine datasets including GSE158284, GSE109628, GSE90603, GSE65626, GSE25631, GSE91014 (TCGA), GSE165937, GSE214252, and PDC000204 met these criteria and were selected, irrespective of methodological and clinical variations (Table 1). Three datasets (GSE65626, GSE109628, GSE214252) contained patient-matched non-cancerous controls; whereas GSE90603 has partially matched samples. All profiling data originated from fresh-frozen brain samples, except for the PDC000204 controls, which were from post-mortem tissues. In total, our in-silico analysis comprises expression data from 743 adult GBM brain tissues and 59 non-cancerous brain controls.

To account for study heterogeneity, each of the nine datasets was processed and analyzed individually using appropriate tools for microarray, RNA sequencing, and Nanostring platforms. Stringent, platform-specific quality control measures were applied to ensure high-quality results. Five samples from GSE158284 and sixteen from GSE25631 were identified as low quality and removed from further analysis. Principal component analysis (PCA) visualization of the processed miRNA profiling data clearly distinguished non-cancerous brain tissues from GBM samples in most datasets (Fig. 2a–i).

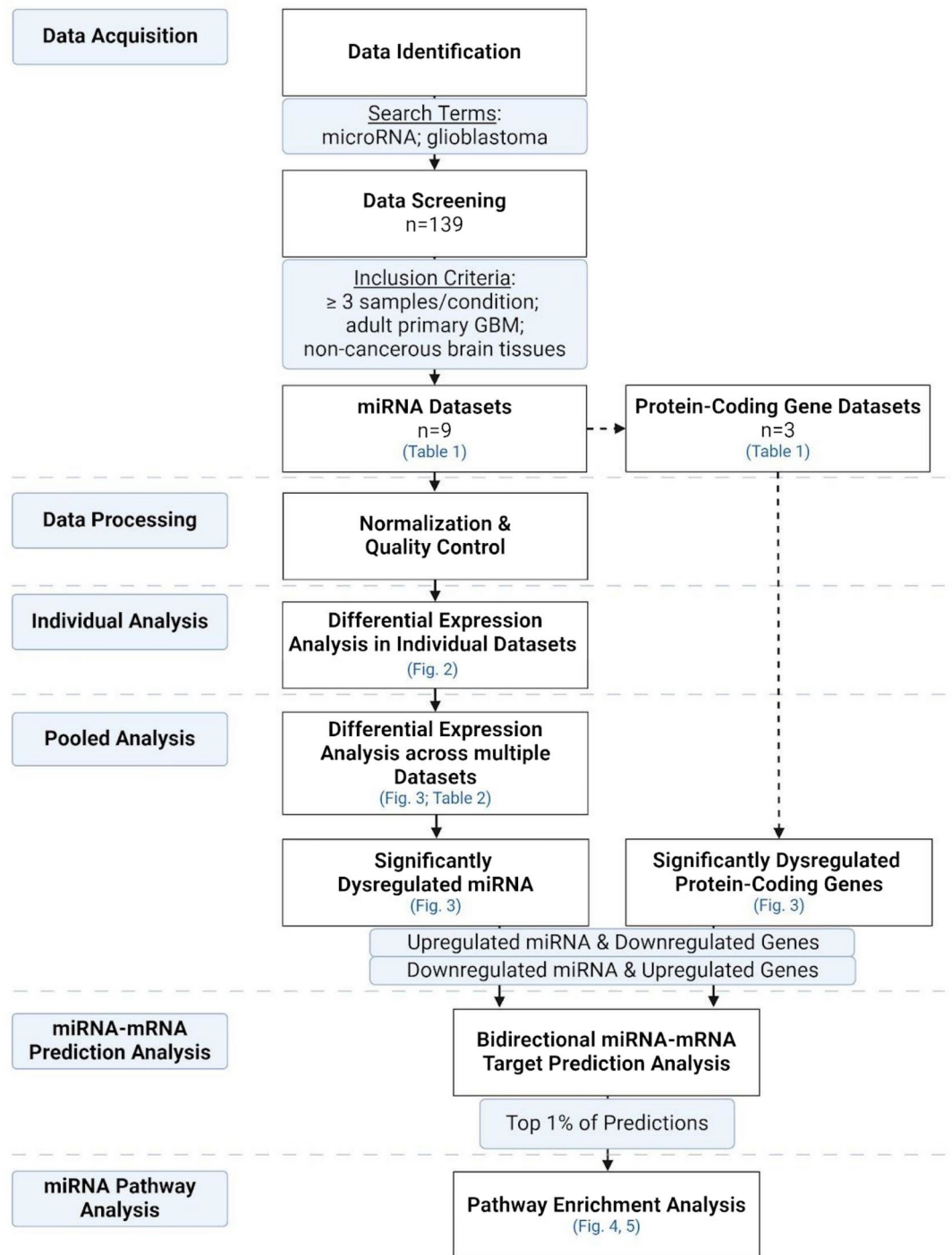


Fig. 1. Schematic overview of the miRNA analysis pipeline.

Differential expression analysis of integrated datasets identifies dysregulated miRNA in GBM

Differential expression analysis was performed individually on each dataset to identify dysregulated miRNA in GBM compared to controls (Fig. 2a–i). These results were then integrated using a weighted Fisher's test based on mean log fold change, revealing 209 significantly dysregulated miRNA (adjusted P -values < 0.05); 94 downregulated and 115 upregulated miRNA in GBM compared to non-cancerous brain tissues (Fig. 3a; Table 2; Supplementary Table S1). This list of widely dysregulated miRNA in GBM represents a valuable resource for future studies. Within these candidates, the top five downregulated miRNA were miR-139-5p, miR-124-3p, miR-128-3p, miR-7-5p, and miR-129-5p; the top five upregulated miRNA were miR-21-5p, miR-21-3p, miR-182-5p, miR-10a-5p, and miR-155-5p (Table 2; Supplementary Table S1).

Dataset ID	Sample size*		Age (mean \pm SD)	Gender (F:M ratio)	Platform (miRNA)	Platform (protein-coding genes)	References
	GBM	Control					
GSE158284	17	10	63.8 (17.7)	4:13	Human miRNA Microarray (V3)	–	30
GSE109628	12	9 [#]	69.6 (12.1)	4:8	Agilent-031181 Unrestricted_Human_miRNA_V16.0_Microarray	–	29
GSE90603	16	7[#]	53.8 (17.0)	6:10	Affymetrix Multispecies miRNA-4 Array	Affymetrix Human Gene 2.1 ST Array	28
GSE65626	3	3 [#]	50 (8.54)	0:3	Affymetrix Multispecies miRNA-4 Array	–	–
GSE25631	62	5	46.72 (12.6)	21:41	Illumina Human v2 MicroRNA expression beadchip	–	26,27
GSE91014 (TCGA)	509	10	57.7 (13.9)	189:320	Agilent-016436 Human miRNA Microarray 1.0 G4472A	–	31
GSE165937	9	4	–	–	Nanostring human miRNA panel (NS_H_MIR_V3A)	Illumina HiSeq 4000 (Homo sapiens)	25
GSE214252	17	3 [#]	–	–	Illumina HiSeq 4000 (Homo sapiens)	–	23
PDC000204	98	8^{**}	58.7 (12.3)	42:56	Illumina HiSeq 4000 (Homo sapiens)	Illumina HiSeq 4000 (Homo sapiens)	24

Table 1. Information regarding datasets identified to contain miRNA expression profiling data. Datasets that also include protein-coding gene profiling data are written in bold. Clinical information including age (mean \pm SD) and gender (female:male ratio) is provided for GBM patients. *Sample size was calculated following filtering based on inclusion criteria and quality control analysis. **Control samples were obtained from post-mortem patients. [#]Datasets contain fully or partially matched control samples.

To assess the relative influence of each dataset on the overall analysis, we performed leave-one-out cross-validation by integrating differential expression analysis results from all datasets except one. Removing most datasets resulted in fewer than 6% change in the number of significant hits compared to the original list (Supplementary Table S2). The largest impact was observed when GSE158284 was removed, resulting in a 16.75% loss of significant hits (Supplementary Table S2). However, 83–99% of the significantly dysregulated hits remained consistent across all leave-one-out analyses, indicating that no single dataset unduly skewed the results.

Comprehensive analysis of miRNA-mediated mechanisms in GBM

To unravel the mechanisms underlying miRNA involvement in GBM progression, we investigated mRNA targets and pathways associated with the dysregulated miRNA identified in our analysis. This involved integrating differential miRNA expression data, target prediction algorithms, protein-coding gene expression analysis, and pathway analysis (Fig. 1). This was performed using three datasets from our collection of nine, which also contained protein-coding gene expression profiling data (Table 1). Similar to the miRNA analysis pipeline, each dataset was processed and analyzed individually to account for methodological differences (Supplementary Fig. S2). Integrated differential expression analysis of protein-coding genes identified 1478 upregulated and 1189 downregulated genes in GBM compared to controls (Fig. 3b; Supplementary Table S3).

To integrate miRNA data with GBM expression data, we first proceeded with the basic assumption that miRNA are repressors of gene expression. Therefore, downregulated protein-coding genes were assessed for targeting by upregulated miRNA, and vice-versa. This analysis identified 603 putative target genes of the 115 upregulated miRNA, representing 1,902 unique miRNA-target interactions (Supplementary Table S4). Similarly, we identified 423 upregulated target genes of the 94 downregulated miRNA, representing 946 unique interactions (Supplementary Table S5).

To validate that the miRNA-target predictions were not due to chance, we used bootstrap sampling to generate random lists of protein-coding genes and then identified miRNA-target interactions between these random gene sets and the dysregulated miRNA. Using the mirDIP software, we identified 4587 (95% CI 3978–5224) and 4535 (95% CI 4054–5084) interactions between the upregulated miRNA and 1,189 random genes, and the downregulated miRNA and 1478 random genes, respectively (Supplementary Fig. S3). In contrast, our actual number of interactions was 2948 and 1902, respectively (Supplementary Fig. S3). Because the observed number of interactions exceeded the 95% confidence interval of the random distribution, this analysis demonstrates that the identified miRNA-target interactions are non-random.

To further validate our predictions, we compared our findings to experimentally validated miRNA-mRNA interactions from the DIANA-TarBase and miRTarBase databases. We found that 500 of 1902 (26.29%) upregulated miRNA-downregulated target interactions and 180 of 946 (19.02%) downregulated miRNA-upregulated target interactions were experimentally validated in either miRTarBase or DIANA-TarBase (Supplementary Fig. S4, Supplementary Tables S4, S5). While most interactions remain unstudied, the presence of these experimentally validated interactions strengthens our findings.

miRNA are associated with ECM remodeling genes in GBM

To explore the molecular mechanisms by which dysregulated miRNA contribute to GBM pathogenesis, we performed functional pathway enrichment analysis on the predicted miRNA-target interactions using gProfiler. Analysis of pathways associated with upregulated genes targeted by downregulated miRNA revealed significant enrichment in 25 Reactome pathways, including ECM organization and growth signaling (adjusted

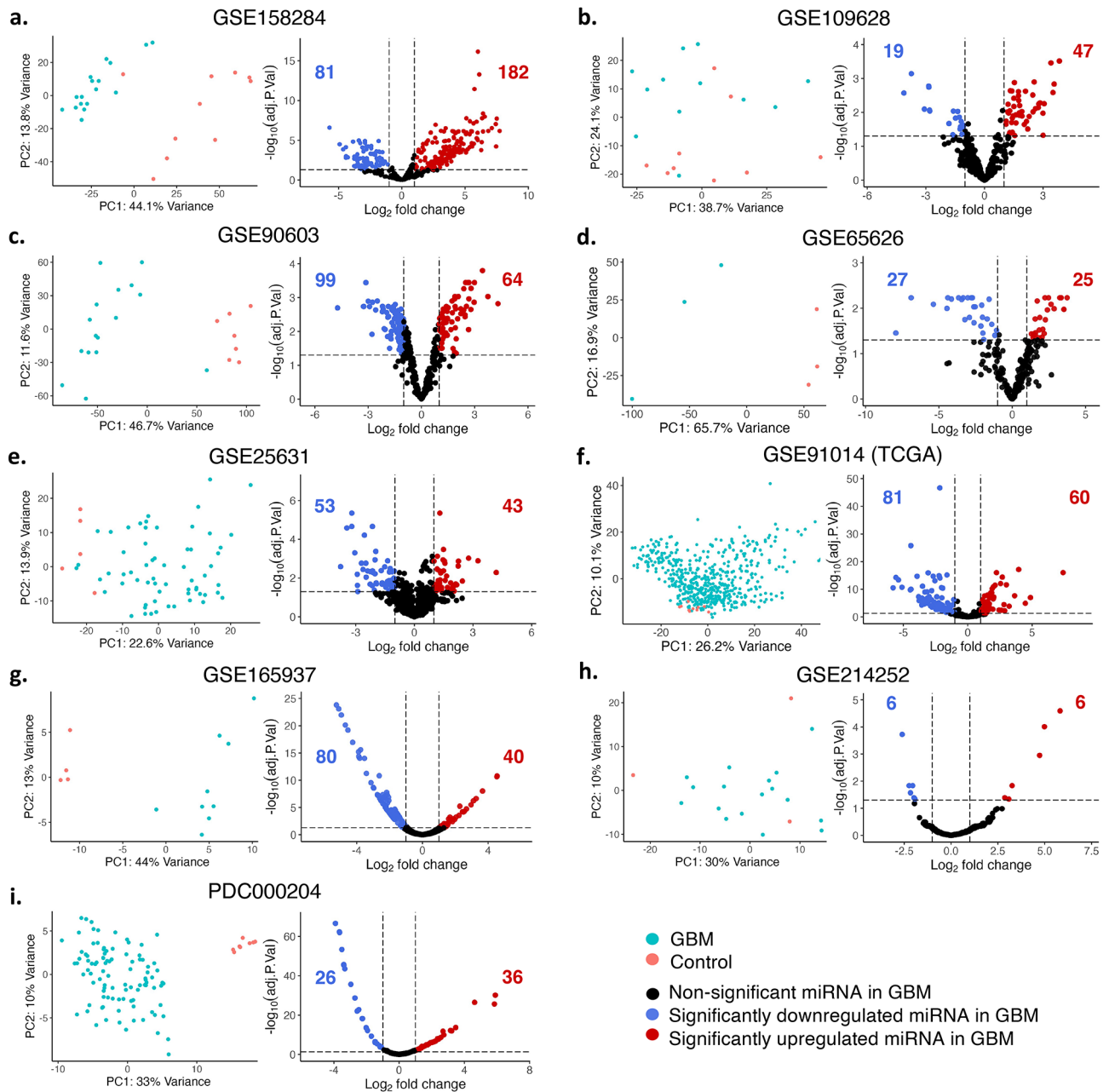


Fig. 2. PCA and volcano plots identify differences in miRNA expression between GBM and controls in nine datasets. Each panel highlights data from one dataset: GSE158284 (a), GSE109628 (b), GSE90603 (c), GSE65626 (d), GSE25631 (e), GSE91014 (TCGA) (f), GSE165937 (g), GSE214252 (h) and PDC000204 (i). Left side of each panel shows PCA clustering based on miRNA expression data, with GBM brain samples in light blue and non-cancerous brain samples in light red. On the right side, volcano plots illustrate differentially expressed miRNA. Total number of significantly dysregulated hits in GBM (q -value < 0.05 , \log_2 fold change > 1) is noted for each dataset. Significantly upregulated miRNA are highlighted in dark red, while downregulated miRNA are in dark blue.

$p < 0.05$) (Fig. 4a; Supplementary Table S6). The ECM organization pathway showed the most significant enrichment (adjusted $p < 0.0001$), with other ECM-related pathways also highly ranked. Further investigation of downregulated miRNA targeting upregulated ECM-related genes (Fig. 4b) revealed four enriched collagen organization pathways (Fig. 4a). miR-29b-3p and miR-29c-3p were identified to target *COL1A2*, *COL3A1*, *COL5A1* and *COL6A3*, suggesting that they may be regulators of collagen expression. Further interactions with collagen-associated genes was predicted to occur through miR-521, miR-7-5p, miR-628-5p, and miR-4443 by targeting *COL4A6*, *COL1A2*, *COL4A1*, and *COL5A1*, respectively. Additionally, we identified miR-29b-3p and miR-29c-3p to target *LAMC1*, and miR-1182 to target *LAMC2*, two genes encoding for laminin, a class of crucial ECM proteins. Additional ECM-regulating miRNA include miR-638, which targets *BCAN*, a gene

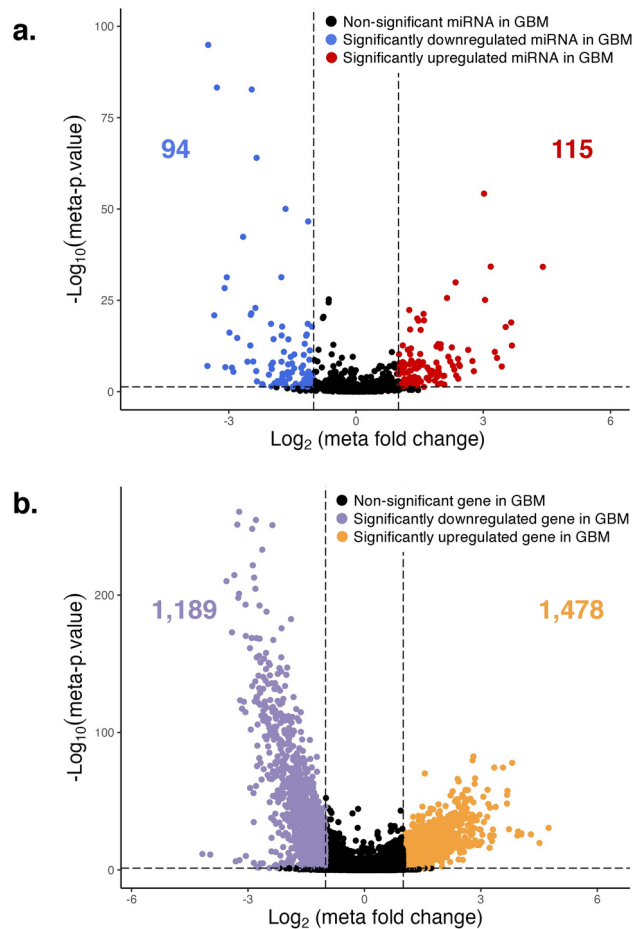


Fig. 3. Identification of miRNA and protein-coding genes widely dysregulated in GBM. Volcano plot illustrating dysregulated miRNA (a) and protein-coding genes (b) in GBM across all 9 and 3 datasets, respectively. Total number of significantly dysregulated hits in GBM (q -value < 0.05 , \log_2 fold change > 1) is noted for plot. Significantly upregulated genes are highlighted in red (a) and orange (b), while downregulated genes are in blue (a) and purple (b).

that encodes a member of the lectican family of chondroitin sulfate proteoglycans specifically expressed in the brain⁵⁶. miR-218-5p targets *TNC*, a gene that encodes a protein that contains multiple EGF-like and fibronectin type-III domains implicated in guidance of migrating neurons as well as axons during development, synaptic plasticity, and neuronal regeneration⁵⁷. miR-218-5p also targets *FBN2*, which encodes for a component of connective tissue microfibrils and may be involved in elastic fiber assembly⁵⁸. Furthermore, we discovered three miRNA implicated in ECM degradation by regulating MMPs, including miR-1225-5p and miR-485-5p targeting *MMP14*, and miR-3200-5p targeting *MMP19*. In summary, we identified several downregulated miRNA in GBM that regulate genes involved in ECM organization, primarily through the regulation of collagen formation and degradation. The dysregulation of miR-29b-3p and miR-29c-3p, with their predicted targeting of multiple collagen-related genes, suggests a significant impact on collagen networks within the GBM ECM.

miRNA influence on growth- and immune-related pathways in GBM

Our pathway analysis also revealed significant associations between downregulated miRNA and their upregulated targets within growth factor and immune signaling pathways. Specifically, we identified associations with nine receptor tyrosine kinase-related pathways and three interleukin-related signaling pathways (Fig. 4a). Further investigation of downregulated miRNA and their predicted upregulated target genes (Fig. 4c) showed that miR-29b-3p and miR-29c-3p target *VEGFA*, miR-7-5p targets *EGFR*, and miR-149-5p, miR-218-5p, and miR-219a-5p target *PDGFRA*—key receptor tyrosine kinases implicated in GBM development⁵⁹. Additionally, miR-132-3p targets *HBEGF* and *EGF1*, miR-139-5p targets *FOS* and *JUN*, and miR-149-5p and miR-218-5p target *TCF12*, all of which are involved in tumor progression^{60–64}.

Our results also implicate the involvement of miRNA in cytokine signaling in GBM. We identified several downregulated miRNA associated with factors that recruit tumor-associated macrophages, including miR-346 (targeting *LIF* and *OAS2*) and miR-1229-3p (targeting *CCR5*)^{65–67}. Several miRNA were also implicated in tumor necrosis factor signaling, such as miR-495-3p (targeting *TNFRSF1B*) and miR-330-5p and miR-326 (targeting *TNFSF14*). Additionally, we identified miRNA that regulate downstream mediators of cytokine

Downregulated miRNA				Upregulated miRNA			
hsa-miR-139-5p	hsa-miR-127-3p	hsa-miR-495-3p	hsa-miR-575	hsa-miR-21-5p	hsa-miR-199b-5p	hsa-miR-1539	hsa-miR-595
hsa-miR-124-3p	hsa-miR-149-5p	hsa-miR-138-1-3p	hsa-miR-2861	hsa-miR-21-3p	hsa-miR-301b-3p	hsa-miR-532-3p	hsa-miR-8084
hsa-miR-128-3p	hsa-miR-432-5p	hsa-miR-6743-5p	hsa-miR-4253	hsa-miR-182-5p	hsa-miR-373-5p	hsa-miR-106a-5p	hsa-miR-502-3p
hsa-miR-7-5p	hsa-miR-29c-3p	hsa-miR-760	hsa-miR-765	hsa-miR-10a-5p	hsa-miR-17-3p	hsa-miR-17-5p	hsa-miR-214-3p
hsa-miR-129-5p	hsa-miR-338-5p	hsa-miR-328-3p	hsa-miR-758-5p	hsa-miR-155-5p	hsa-miR-183-5p	hsa-miR-18b-5p	hsa-miR-10b-3p
hsa-miR-137-3p	hsa-miR-490-3p	hsa-miR-3200-5p	hsa-miR-936	hsa-miR-10b-5p	hsa-miR-130a-3p	hsa-miR-551b-3p	hsa-miR-144-3p
hsa-miR-218-5p	hsa-miR-487b-3p	hsa-miR-642a-5p	hsa-miR-6511a-3p	hsa-miR-196b-5p	hsa-miR-199a-3p	hsa-miR-337-5p	hsa-miR-146b-5p
hsa-miR-769-5p	hsa-miR-138-5p	hsa-miR-149-3p		hsa-miR-210-3p	hsa-miR-20a-5p	hsa-miR-590-5p	hsa-miR-32-5p
hsa-miR-139-3p	hsa-miR-656-3p	hsa-miR-4443		hsa-miR-196a-5p	hsa-miR-450a-5p	hsa-miR-223-3p	hsa-miR-454-3p
hsa-miR-323a-3p	hsa-miR-338-3p	hsa-miR-513a-3p		hsa-miR-199b-3p	hsa-miR-23a-3p	hsa-miR-483-3p	hsa-miR-93-3p
hsa-miR-330-3p	hsa-miR-323a-5p	hsa-miR-129-1-3p		hsa-miR-106b-5p	hsa-miR-1246	hsa-miR-34a-5p	hsa-miR-215-5p
hsa-miR-433-3p	hsa-miR-410-3p	hsa-miR-1288-3p		hsa-miR-27a-3p	hsa-miR-503-5p	hsa-miR-19a-3p	hsa-miR-505-3p
hsa-miR-448	hsa-miR-1224-5p	hsa-miR-1182		hsa-miR-135b-5p	hsa-miR-362-3p	hsa-miR-545-3p	hsa-miR-15b-3p
hsa-miR-129-2-3p	hsa-miR-29b-3p	hsa-miR-876-3p		hsa-miR-20a-3p	hsa-miR-362-5p	hsa-miR-181a-2-3p	hsa-miR-450b-5p
hsa-miR-504-5p	hsa-miR-485-5p	hsa-miR-330-5p		hsa-miR-93-5p	hsa-miR-142-3p	hsa-miR-629-3p/5p	hsa-miR-376b-3p
hsa-miR-203a-3p	hsa-miR-885-5p	hsa-miR-770-5p		hsa-miR-15b-5p	hsa-miR-542-5p	hsa-miR-550a-3p/5p	hsa-miR-30b-3p
hsa-miR-491-5p	hsa-miR-485-3p	hsa-miR-892b		hsa-miR-25-3p	hsa-miR-532-5p	hsa-miR-339-3p	hsa-miR-431-5p
hsa-miR-383-5p	hsa-miR-1229-3p	hsa-miR-1225-5p		hsa-miR-193a-3p	hsa-miR-16-2-3p	hsa-miR-106b-3p	hsa-miR-3651
hsa-miR-12136	hsa-miR-769-3p	hsa-miR-1914-3p		hsa-miR-1825	hsa-miR-424-3p	hsa-miR-660-5p	hsa-miR-374b-3p
hsa-miR-517c-3p	hsa-miR-326	hsa-miR-596		hsa-miR-339-5p	hsa-miR-424-5p	hsa-miR-629-3p	hsa-miR-629-5p
hsa-miR-874-3p	hsa-miR-1296-5p	hsa-miR-1275		hsa-miR-130b-3p	hsa-miR-34a-3p	hsa-miR-877-3p	hsa-let-7a-3p
hsa-miR-138-2-3p	hsa-miR-577	hsa-miR-636		hsa-miR-455-3p	hsa-miR-16-5p	hsa-miR-615-3p	hsa-miR-30d-3p
hsa-miR-628-3p	hsa-miR-628-5p	hsa-miR-1185-5p		hsa-miR-96-5p	hsa-miR-148a-3p	hsa-miR-602	hsa-miR-654-3p
hsa-miR-132-3p	hsa-miR-105-5p	hsa-miR-638		hsa-miR-224-5p	hsa-miR-199a-5p	hsa-miR-320e	hsa-miR-144-5p
hsa-miR-873-5p	hsa-miR-521	hsa-miR-187-5p		hsa-miR-142-5p	hsa-miR-1290	hsa-let-7i-3p	hsa-miR-937-3p
hsa-miR-219a-2-3p	hsa-miR-346	hsa-miR-487a-5p		hsa-miR-92b-3p	hsa-miR-455-5p	hsa-miR-99a-3p	hsa-miR-550b-2-5p
hsa-miR-522-3p	hsa-miR-1250-5p	hsa-miR-668-3p		hsa-miR-550a-3p	hsa-miR-500a-3p	hsa-miR-423-3p	hsa-miR-1537-3p
hsa-miR-375-3p	hsa-miR-889-3p	hsa-miR-3131		hsa-miR-18a-5p	hsa-miR-195-3p	hsa-miR-1910-5p	hsa-miR-378f
hsa-miR-329-3p	hsa-miR-219a-5p	hsa-miR-3200-3p		hsa-miR-542-3p	hsa-miR-20b-5p	hsa-miR-296-5p	

Table 2. List of significantly downregulated and upregulated miRNA across all datasets in GBM. All hits highlighted have a meta P -value < 0.05 and meta fold change > 1 . Significant miRNA hits are ranked based on their index score which incorporates meta P -value and meta fold change.

signaling, including miR-139-5p and miR-936 (targeting *SOCS2*) and miR-2861 (targeting *SOCS3*), family members previously linked to increased immune cell infiltration in GBM⁶⁸. In summary, our findings highlight a set of downregulated miRNA predicted to regulate upregulated mRNA encoding crucial growth and immune-related signaling molecules in GBM.

miRNA regulation of neuronal processes in GBM

Finally, we performed pathway enrichment analysis to investigate the molecular role of the downregulated predicted targets of upregulated miRNA hits. Conversely, we determined that upregulated miRNA and their predicted downregulated targets are significantly associated with 35 Reactome pathways (adjusted P -values < 0.05), predominantly reflecting core neuronal processes highlighted by their association with nine neurotransmitter release cycle, two receptor activation and two synapse interaction pathways (Fig. 5a, Supplementary Table S5). To examine their specific roles, we identified predicted targets of several dysregulated miRNA candidates involved in synaptic-related pathways (Fig. 5b). Our analysis identified miRNA that target key genes involved in governing vesicular trafficking and exocytosis during synaptic release, comprising miR-10b-3p, miR-34a-5p, miR-193a-3p targeting *SYT1*, miR-135b-5p targeting *CPLX2*, and miR-337-5p targeting *VAMP2*. Our results also implicate miRNA in synaptic formation through regulation of neurexins, including miR-455-3p, miR-10b-3p which target *NRXN1* and miR-595 which targets *NRXN3*. In addition to regulators of synaptic function across multiple neurotransmitters, our analysis identified miRNA that specifically disrupt glutamatergic signaling through miR-10b-3p targeting *GRIN2A*, miR-34a-5p targeting *GRM7*, miR-455-3p targeting *SLC1A2*, and miR-20b-5p targeting *SLC17A7*. GABAergic signaling was also subject to miRNA control through miR-34a-5p targeting *GABRA3*, miR-10a-5p targeting *GABRB2*, and miR-376b-3p targeting *SLC6A1*. Overall, we identified upregulation of multiple miRNA with predicted roles in neuronal activity and synaptic communication.

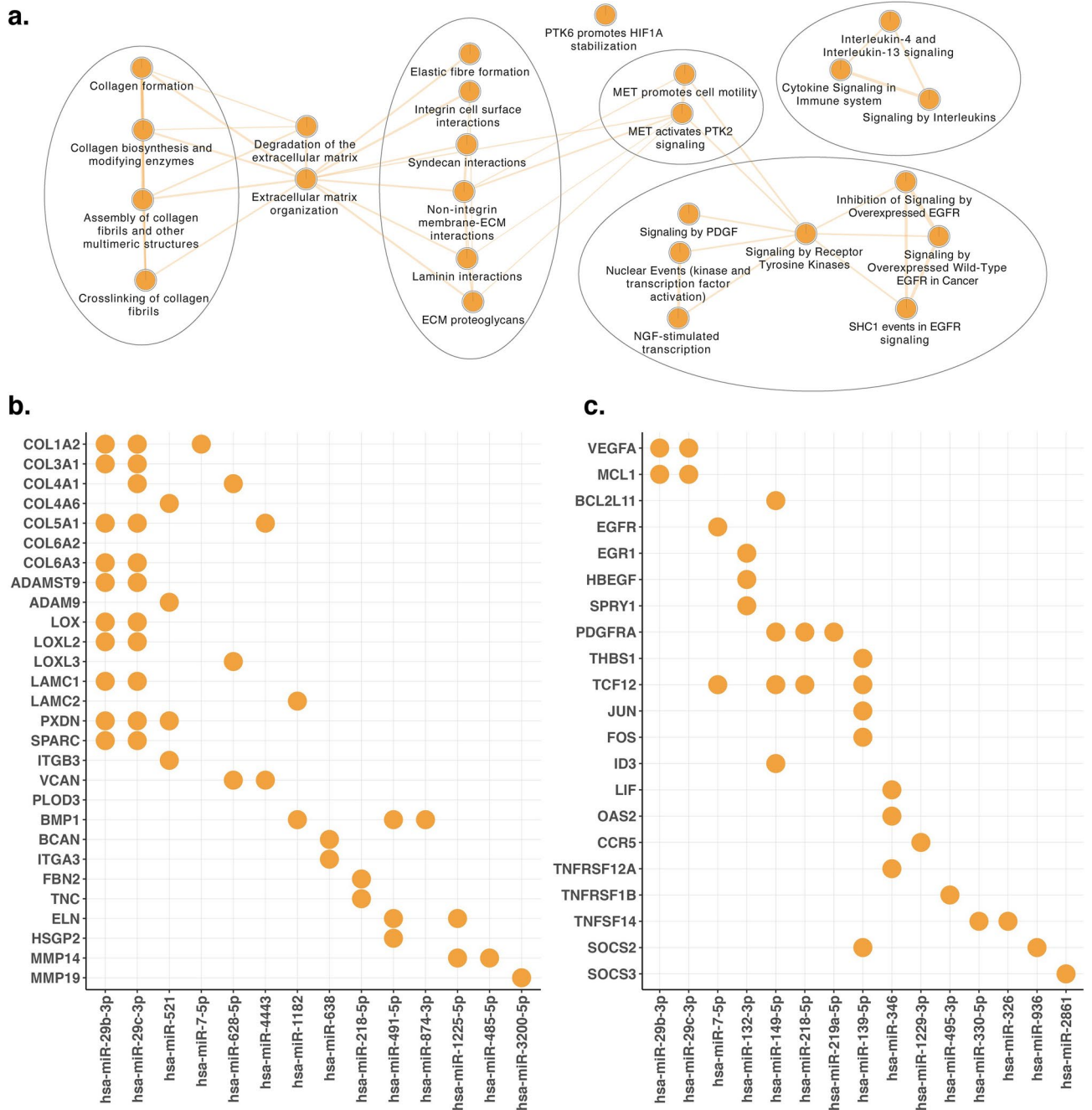


Fig. 4. Pathways linked with downregulated miRNA hits showcase their involvement in ECM remodeling, growth, and immune-related signaling. **(a)** Network map of pathway enrichment analysis from upregulated genes targeted by downregulated miRNA. **(b)** Dot plot revealing targets of candidate downregulated miRNA associated with ECM remodeling pathways. **(c)** Dot plot revealing targets of candidate downregulated miRNA associated with growth-stimulating and immune-related signaling pathways.

Discussion

Many miRNA linked to GBM progression have been studied, but most remain unexplored due to outdated and low-quality expression data, particularly from microarray platforms. By integrating available datasets, we created the largest-to-date collection of miRNA expression data from adult primary GBM patients, providing the most comprehensive analysis of miRNA in GBM to date. To our knowledge, this study uses the largest collection of GBM miRNA expression data, encompassing 743 GBM tissues and 59 non-cancerous brain controls. Only two previous studies have reported on miRNA expression in both adult and pediatric GBM samples. Wang and Lu examined miRNA expression profiles in 125 brain and 207 serum samples from GBM patients³², while Bayat and colleagues investigated microarray datasets from 670 GBM patients³³. In contrast, our analysis incorporates

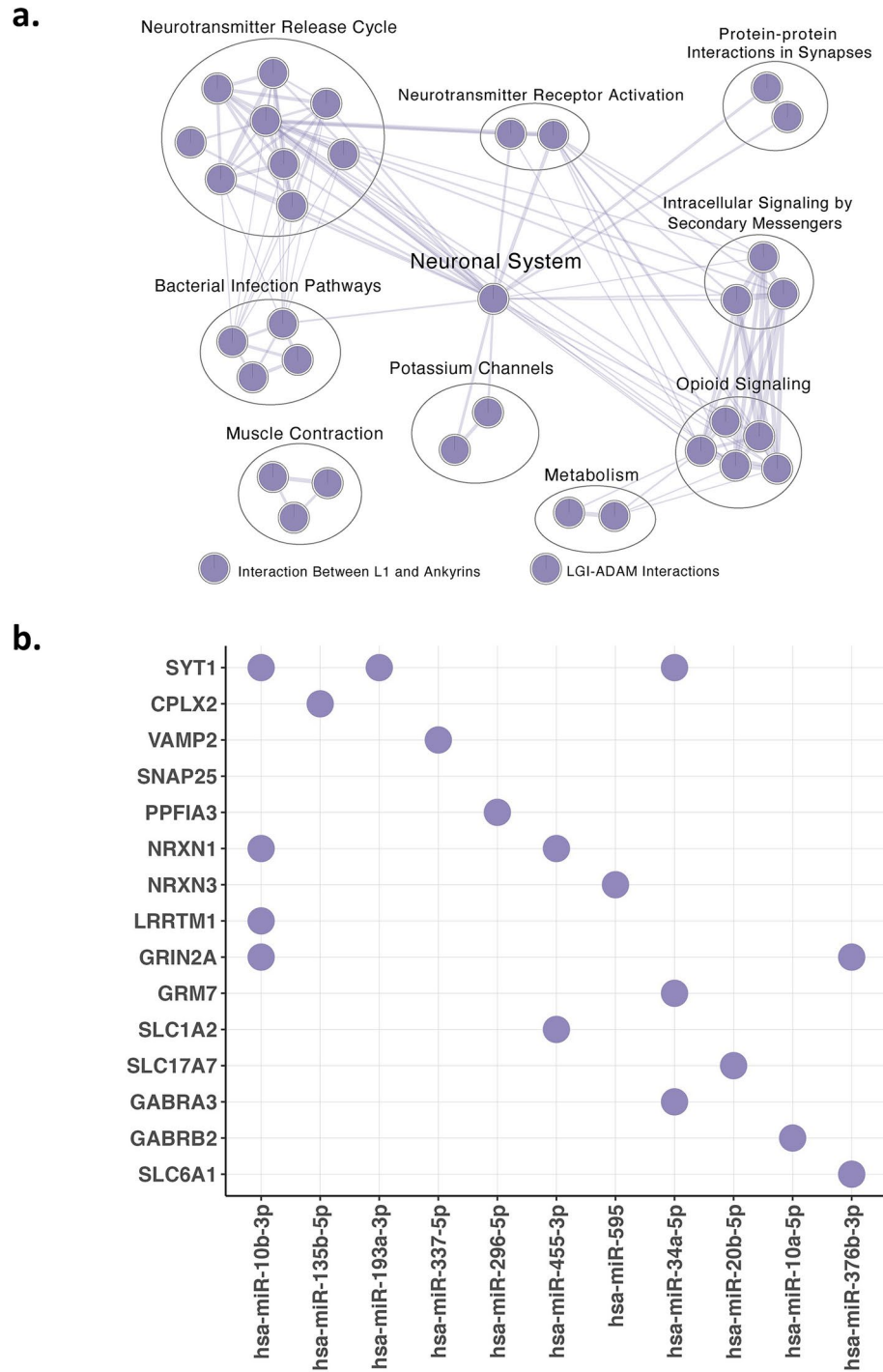


Fig. 5. Pathways linked with upregulated miRNA hits highlight their involvement in core neuronal processes. **(a)** Network map of pathway enrichment analysis from downregulated genes targeted by upregulated miRNA. **(b)** Dot plot revealing targets of candidate upregulated miRNA associated with core neuronal pathways.

additional profiling data and is exclusively focused on carefully curated datasets of adult primary GBM tumors. Stringent quality control measures were implemented to ensure data integrity and eliminate low-quality samples.

However, our analysis is not without limitations. The use of microarray data, which does not capture the full spectrum of miRNA expression, limited the number of miRNA analyzed across all datasets after filtering out low-expression miRNA. This limitation highlights the need for future high-throughput profiling of miRNA in GBM. Another limitation was the integration of data from various platforms. To address this, we performed leave-one-out cross-validation, demonstrating that no single dataset unduly influenced the results, thereby supporting the feasibility of our integrated approach. Integrating the differential expression analysis results from all nine datasets allowed the identification of consistently dysregulated miRNA across multiple studies.

Furthermore, Our integrated analysis, using a weighted Fisher's test, identified 94 significantly downregulated and 115 significantly upregulated miRNA in adult primary GBM compared to non-cancerous brain tissue. Among the dysregulated miRNA, several have been previously associated with GBM pathogenesis. For instance, the upregulated miR-21 and miR-10b are reported to contribute to GBM tumour growth in vitro and in vivo^{33,69}. Similarly, downregulated hits including miR-139 and miR-124 are reported to have tumor suppressive functions in GBM^{70,71}. The identification of these previously characterized miRNA strengthens the confidence in our methodology and findings.

We also identified several downregulated miRNA with no reported link to GBM (miR-12136, miR-323a-5p, miR-521, miR-1250-5p, miR-642a-5p) and several that have been linked to GBM (miR-874-3p, miR-628-3p, miR-219a-2-3p, miR-487-3p, miR-885-5p, miR-628-5p, miR-889-3p, miR-6743-5p), but specific roles have not been investigated. Similarly, we identified upregulated miRNA not previously reported as dysregulated in GBM (miR-199b-5p, miR-500a-3p, miR-1539, miR-660-5p) and a subset with uncharacterized roles (miR-1825, miR-550a-3p, miR-551b-3p, miR-590-5p, miR-337-5p, miR-339-3p, miR-595, miR-602, miR-320e, miR-877-3p) are also identified. Importantly, the increased statistical power afforded by our larger sample size enabled the identification of miRNA not previously investigated in GBM, opening avenues for novel discoveries and potentially revealing previously unknown regulatory mechanisms in GBM biology.

To investigate potential mechanisms underlying the roles of these miRNA in GBM development, we next examined the targetome of all dysregulated miRNA. Because miRNA target prediction algorithms often fail to account for tissue-specific differences in gene expression and miRNA-mRNA interactions, we integrated miRNA prediction algorithms with differential expression analysis of protein-coding genes, focusing on dysregulated miRNA and protein-coding genes with reciprocally directed expression changes.

This analysis revealed strong associations between miRNA dysregulation and gene networks involved in ECM organization. The normal brain ECM is characterized by a low-stiffness composition, dominated by hyaluronan, glycosaminoglycans, and proteoglycans^{72,73}. However, ECM remodeling, leading to a denser, stiffer matrix, promotes aggressive cell invasion^{74,75}. This remodeling process involves ECM degradation by matrix metalloproteinases (MMPs)^{76,77} and the secretion of fibrous components such as collagen, laminin, and fibronectin^{78,79}. Altered ECM composition modifies tumor biomechanics, promoting treatment resistance by influencing proliferation, invasion, migration, and survival^{74,79}. In our analysis, miR-29b-3p and miR-29c-3p emerged as key miRNA predicted to target multiple ECM genes. Interestingly, we found that miR-218-3p mediates ECM remodeling by regulating *TNC*, a role previously shown to promote GBM progression⁸⁰. The remaining predicted interactions are novel in the context of GBM and suggest a key role for miRNA in overall ECM composition. Dysregulation of these miRNA in GBM is hypothesized to alter the tumor microenvironment (TME), enhancing GBM progression and invasiveness. This is supported by studies showing that increased collagen or laminin levels correlate with more aggressive GBM phenotypes^{81,82}. Specifically, collagen promotes GBM cell mobility and metastasis^{83–85} potentially through destabilization of cell polarity and cell–cell adhesion, and stimulation of growth factor signaling⁸⁶. Therefore, downregulation of these miRNA is predicted to derepress ECM components, particularly collagen, and promote GBM invasiveness. Overall, our results highlight the importance of understanding miRNA-mediated mechanisms regulating ECM in GBM.

We also identified several downregulated miRNA predicted to regulate growth factor and immune-related signaling. While most of these interactions are novel in the context of GBM, our analysis did reveal several bonafide miRNA-target interactions including miR-7-5p with EGFR⁸⁷, miR-218-5p with PDGFRA⁸⁸, and TCF12⁸⁹ which instill confidence on our findings. Our analysis suggests that miRNA dysregulation may influence key aspects of GBM aggressiveness. Firstly, we propose that miRNA are associated with GBM through the regulation of key pathways involved in disease progression, including VEGFA, EGFR, PDGFRA signaling⁵⁹. Although these pathways are commonly upregulated in GBM and associated with aggressive phenotypes, the role of miRNA in these processes is not well understood. Second, our study suggests a potential role for miRNA in regulating the recruitment of pro-tumoral immune cells through targeting components of cytokine signaling, including *LIF* and *OAS2*^{65,66}. These findings implicate miRNA in immune cell infiltration, TME remodeling, and GBM progression, consistent with previous studies demonstrating that specific miRNA mediate the recruitment and activation of tumor-associated immune cells^{90,91}.

We also identified multiple miRNA predicted to regulate genes crucial for neuronal activity, particularly synaptic communication. The reliability of our prediction pipeline is supported by the identification of the previously reported and experimentally validated interaction between miR-34a-5p and *GRM7*⁹². The association of these neuronal pathways with mature neurons suggests that our analysis may reflect a decreased proportion of mature neurons in GBM compared to non-cancerous brain controls. Because tissue specimens are typically bulk samples, several factors could contribute to the observed lower levels of neuronal processes. These include a lower proportion of mature neurons and the presence of dedifferentiated GBM cells, which, while shown to communicate with surrounding brain tissue and integrate into neural circuits to promote aggressiveness, only form functional synapses with surrounding mature neurons in approximately 10% of cases^{10,93–95}. The presence of other cancer-associated cells, such as immune cells, may further contribute to the observed relative decrease in neuronal processes.

In conclusion, this study provides a valuable resource describing the landscape of miRNA expression in GBM and highlights the need for large-scale, miRNA-focused clinical studies to further elucidate the roles of all miRNA in this disease. Despite limitations in current datasets, we have identified numerous dysregulated miRNA warranting further investigation as potential therapeutic targets. The potential role of miRNA in promoting GBM aggressiveness by reshaping the TME is particularly intriguing and represents a promising avenue for therapeutic exploration. These findings, coupled with the recent excitement surrounding the Nobel Prize awarded for miRNA discovery, generate novel hypotheses regarding miRNA regulation in GBM biology,

suggesting innovative miRNA-targeted therapeutic strategies³⁴. Advancements in RNA and RNAi therapeutics further enhance the potential of miRNA-based therapies for GBM⁹⁶.

Data availability

The data that support the findings of this study are available from the corresponding author upon request.

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Author contributions

I.A.G., A.R. and L.S. conceptualized and interpreted the results. I.A.G. and A.R. conducted data curation and analysis. J.T.S.C. and T.J.S. also contributed to data analysis. I.A.G., A.R. and L.S. wrote the paper. All authors revised and approved the manuscript.

Declarations

Competing interests

The authors declare no competing interests.

Additional information

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