# Original Article Differential IncRNA expression profiles in recurrent gliomas compared with primary gliomas identified by microarray analysis

Yi Chen<sup>1\*</sup>, Jian-Jin Wu<sup>2\*</sup>, Xian-Bin Lin<sup>1\*</sup>, Yi Bao<sup>3</sup>, Zhen-Hua Chen<sup>1</sup>, Cheng-Ran Zhang<sup>1</sup>, Zheng Cai<sup>1</sup>, Jue-Yu Zhou<sup>4</sup>, Mao-Hua Ding<sup>5</sup>, Xiao-Jun Wu<sup>1</sup>, Wei Sun<sup>1</sup>, Jun Qian<sup>1</sup>, Lei Zhang<sup>1</sup>, Lei Jiang<sup>1</sup>, Guo-Han Hu<sup>1</sup>

<sup>1</sup>Department of Neurosurgery, Changzheng Hospital, Affiliated to Second Military Medical University, Shanghai, China; <sup>2</sup>Department of Vascular and Endovascular Surgery, Changzheng Hospital, Affiliated to Second Military Medical University, Shanghai, China; <sup>3</sup>Department of Endocrinology, Changzheng Hospital, Affiliated to Second Military Medical University, Shanghai, China; <sup>4</sup>Institute of Genetic Engineering, Southern Medical University, Guangzhou, China. <sup>5</sup>Department of Neurosurgery, Xuzhou Central Hospital, Xuzhou, China. \*Equal contributors.

Received January 24, 2015, Accepted March 25, 2015; Epub April 15, 2015; Published April 30, 2015

Abstract: Glioma, especially high-grade glioma, is highly malignant with high rate of recurrence and poor prognosis. The mechanisms of glioma progression and recurrence have not been elucidated. Previous studies showed that long non-coding RNAs (IncRNAs) involved in the development and progression of glioma. However, the roles of IncRNAs in the recurrence of glioma remain unknown. We use high throughput microarray to screen the differentially expressed IncRNAs and mRNAs in recurrence gliomas compared with primary gliomas. We found a total of 1,111 IncRNAs were differentially expressed in recurrent group. Among these, 639 IncRNAs were up-regulated, while 472 IncRNAs were down-regulated (fold Change  $\geq$ 2.0). GO (Gene ontology) and pathway analysis revealed that the potential functions of differentially expressed IncRNAs were closely connected with the processes of cancer progression and pathogenesis. LncRNA classification and subgroup analysis further identified three important clusters of differentially expressed IncRNAs pairs which have potential gene regulatory functions. This study for the first time showed abundant differentially expressed IncRNAs in recurrent gliomas. Some IncRNAs may play important roles in glioma recurrence, such as previously reported H19, CRNDE, HOTAIRM1 or unreported AC016745.3, XLOC\_001711, RP11-128A17.1. Moreover, this study set a basis for future researches on specific IncRNA which may contribute to the recurrence of glioma. Further studies on these IncRNAs will help to elucidate the mechanism of glioma recurrence at genetic level and find therapeutic targets for glioma patients.

Keywords: IncRNA, microarray, glioma, recurrent

#### Introduction

Glioma is the most common malignant brain tumor in adult. Based on the pathological features, gliomas can be classified as World Health Organization (WHO) grade I-IV. Almost all highgrade (WHO grade III-IV) gliomas recur after tumor resection. The median survivals are 30-39 weeks for patients with high grade gliomas [1]. The high rates of recurrence and inefficient treatments contribute to the poor prognosis of patients with gliomas. Despite the development of multi-mode treatments that include surgical resection, radiotherapy, chemotherapy as well as target therapy in the past decades, the outcome of glioma, especially high grade glioma, is still unsatisfactory [2]. To improve treatment efficiency, a further understanding of molecular mechanism of glioma recurrence is urgently needed.

Genome-wide profiling studies have revealed that only about 2% of the human genome sequence encodes protein, while more than 90% of the genome is actively transcribed [3-5]. It suggests that most of the non-coding transcripts may have regulatory function. Among these, one kind of the non-coding RNAs (ncRNAs), microRNAs (miRNAs) are well documented to play important roles in regulating gene expression. NcRNAs can be grouped into two classes based on transcripts length: Short ncRNAs and IncRNAs. Short ncRNAs have a length under 200 nucleotides which include small interfering RNAs (siRNAs), miRNAs and so on. LncRNAs are mRNA-like transcripts lacking

significant open reading frames and longer than 200 nucleotides in length. Most of them are transcribed by RNA polymerase II and polyadenylated [6, 7]. Initially, IncRNAs are regarded to be transcriptional noise [8]. However, the discovery of imprinted H19 gene and X-inactivespecific transcript (XIST) gene makes IncRNAs fade in people's sight. A increasing number of IncRNAs have been identified to be involved in some important biological processes, such as imprinting control, cell differentiation, tumorigenesis and so on [6]. Recent evidences showed that IncRNAs were not only differentially expressed between glioma and normal brain tissue, but also differentially expressed among different WHO grades. Some of these aberrant IncRNAs were regarded to regulate the tumorigenesis in glioma even reflect patient prognosis, although the precise mechanism is not well clarified [9-11]. However, there is no study of IncRNA expression profile between primary and recurrent gliomas. It remains unknown whether IncRNAs are associated with the process of glioma recurrence.

To explore the association between IncRNAs and the process of glioma recurrence, we identified the expression profiles of IncRNA and mRNA between recurrent gliomas and primary gliomas by microarray. The potential functions of the IncRNAs were analyzed by GO and pathway analysis based on the differentially expressed mRNAs. For further screening important IncRNAs, IncRNA classification and subgroup analysis were performed. This study was aimed to set a basis for searching specific IncRNAs which might be helpful to elucidate the mechanism of glioma recurrence at genetic level.

# Materials and methods

# Acquirement of patient samples

The three paired samples were obtained from 3 recurrent glioma patients (**Table 1**) of Changzheng Hospital, Shanghai, China. None of them received chemotherapy or radiation before the first surgery. Each patient underwent gross total resection of primary glioma under microscope. Two of them who were diagnosed as WHO III and IV glioma received treatment of temozolomide (TMZ) and radiation after the first surgery. The other one who was diagnosed as primary WHO II glioma received treatment of TMZ only after the first surgery.

They all recurred and received the second surgery for recurrent gliomas. The diagnosis was confirmed by histopathology. All patients were provided written informed consent before samples were collected and frozen in liquid nitrogen. The study was in accordance with the 1964 Helsinki declaration and its later amendments or comparable ethical standards and approved by the Specialty Committee on Ethics of Biomedicine Research, Second Military Medical University of China.

# RNA extraction

The RNAs were isolated from the primary and recurrent glioma tissue using TRIzol reagent (Invitrogen, CA) according to the manufacturer's protocol. The NanoDrop ND-1000 spectrophotometer was used to measure RNA quantity and quality. The RNA integrity was assessed by standard denaturing agarose gel electrophoresis.

# Microarray and data analysis

We performed sample labeling and array hybridization in accordance with the Agilent One-Color Microarray-Based Gene Expression Analysis protocol (Agilent Technology) with minor modifications. Concisely, mRNA was purified from total RNA by removal of rRNA (mRNA-ONLY™ Eukaryotic mRNA Isolation Kit, Epicentre). Then, a random priming method (Arraystar Flash RNA Labeling Kit, Arraystar) was applied to amplify and tanscribe each sample into fluorescent cRNA along the entire length of the transcripts without 3' bias. The Human LncRNA Array v3.0 (8 x 60 K, Arraystar) was employed to hybridize the labeled cRNAs. About 30,586 IncRNAs and 26,109 coding transcripts could be detected by this third-generation IncRNA microarray. We carefully constructed the IncRNAs according to the most authoritative public transcriptome databases (Refseq, UCSC knowngenes, Gencode, etc), as well as landmark publications. The specific exon or splice junction probe, which could identify individual transcript accurately, was used to represent each transcript. Positive probes for housekeeping genes as well as negative probes were printed onto the array for hybridization quality control. The hybridized arrays were washed, fixed and scanned with the Agilent DNA Microarray Scanner (part number G2505C).

 Table 1. Characteristics of three cases

Case	Sex	Age	Sample	Pathological Diagnosis	WHO Grade	Extent of resection for primary glioma	Chemotherapy (temozolomide)	Radiation	Recurrence interval (month)
1	Female	43	P1	Diffuse Astrocytoma	II	Gross total resection under microscope	Yes	No	33
			R1	Anaplastic Astrocytoma	Ш				
2	Male	59	P2	Glioblastoma	IV	Gross total resection under microscope	Yes	Yes	14
			R2	Glioblastoma	IV				
3	Male	58	P3	Anaplastic Astrocytoma	Ш	Gross total resection under microscope	Yes	Yes	9
			R3	Anaplastic Astrocytoma	III				

### Table 4. Some differentially expressed enhancer IncRNAs and their nearby coding genes

Seqname	GeneSymbol	Fold change - LncRNAs	Regulation - LncRNAs	Genome Relationship	NearbyGene	NearbyGeneSymbol	Fold change - mRNAs	Regulation - mRNAs
ENST00000422178	AC016745.3	3.901481	up	downstream	NM_012184	FOXD4L1	2.6691191	up
ENST00000453213	RP11-492E3.1	2.0042102	up	downstream	NM_016307	PRRX2	2.6813676	down
ENST00000440633	LINC00545	2.2315919	down	upstream	NM_001629	ALOX5AP	2.2498186	up
ENST00000456100	AL163953.3	2.5419899	down	upstream	NM_006832	FERMT2	2.0666781	down
ENST00000454625	GS1-421I3.2	2.1695855	down	downstream	NM_001008535	AKAP14	2.1786642	down

Table 5. Some differentially expressed lincRNAs and their nearby coding genes

Seqname	GeneSymbol	Fold change - LncRNAs	Regulation - LncRNAs	Genome Relationship	NearbyGene	NearbyGeneSymbol	Fold change - mRNAs	Regulation - mRNAs
TCONS_00003906	XLOC_001711	2.1538904	down	downstream	ENST00000325926	RPRM	11.962624	down
TCONS_00029753	XLOC_014147	2.1586285	up	upstream	NM_001193414	TUBA8	3.3856396	up
TCONS_00029754	XLOC_014147	2.060898	up	upstream	NM_001193414	TUBA8	3.3856396	up
TCONS_00001281	XLOC_000567	4.3178215	down	upstream	NM_138794	LYPLAL1	5.2807164	down
TCONS_00002232	XLOC_000566	3.6056213	down	upstream	NM_138794	LYPLAL1	5.2807164	down

Table 6. Some differentially expressed antisense IncRNAs and their corresponding sense mRNAs

Seqname	GeneSymbol	Fold change - LncRNAs	Regulation - LncRNAs	Genome Relationship	NearbyGene	NearbyGeneSymbol	Fold change - mRNAs	Regulation - mRNAs
ENST00000559509	RP11-128A17.1	2.2520785	up	natural antisense	NM_170674	MEIS2	3.5500179	up
ENST00000559509	RP11-128A17.1	2.2520785	up	natural antisense	NM_170677	MEIS2	2.0640461	up
ENST00000433474	RP11-109P14.9	3.3556245	up	natural antisense	NM_001031740	MANEAL	4.2485947	up
ENST00000515569	CTC-575N7.1	4.2262584	down	natural antisense	NM_175856	CHSY3	2.5092305	down
ENST00000554678	RP11-203M5.8	2.0347683	up	natural antisense	NM_000270	PNP	2.7215837	up



Figure 1. Box plots of IncRNAs (A) and mRNAs (B). "P" represents primary glioma, "R" represents recurrent glioma.

The array images were analyzed by Agilent Feature Extraction software (version 11.0.1.1). The GeneSpring GX v12.1 software package (Agilent Technologies) was used to perform quantile normalization and data processing. When the raw data had been quantile normalized, IncRNAs and mRNAs that at least 3 out of 6 samples had flags in Present or Marginal ("All Targets Value") were chosen for further data analysis. Volcano Plot filtering was used to identify differentially expressed IncRNAs and mRNAs with statistical significance between the two groups. Fold Change filtering was used to identify differentially expressed IncRNAs and mRNAs (fold change  $\geq 2.0, P < 0.05$ ).

### GO and pathway analysis

GO analysis was performed to analyze the function of differentially expressed mRNAs by associating them with GO categories. Derived from Gene Ontology (www.geneontology.org), the GO categories include three integrated networks of defined terms which describe gene property. Pathway analysis was used to determine the significant biological pathways of these differentially expressed mRNAs. We performed the pathway analysis based on the latest KEGG (Kyoto Encyclopedia of Genes and Genomes) database. The P value of Fisher's exact test denoted the significance of the pathway. The less the *P* value was, the more significant of the pathway was (P < 0.05 was considered statistically significant).

LncRNA classification and subgroup analysis

Enhancer IncRNAs, LincRNAs (large intergenic noncoding RNAs) and antisense IncRNAs were three clusters of IncRNAs with gene regulatory functions. They were classified based on Orom UA's study [12], Guttman M's papers [13, 14] and data base annotation, respectively. By integrating these IncRNAs with the differentially expressed mRNAs, we performed IncRNA-mRNA co-expression analysis. Differentially expressed enhancer IncRNA and nearby coding gene (distance <300 kb) pairs were screened by the criterion that both enhancer IncRNA and its nearby coding genes were changed more than 2.0 fold. The lincRNA and associated coding gene pairs were also screened when they both were changed more than 2.0 fold.

# Statistical methods

The differentially expressed IncRNAs and mRNAs between the primary glioma group and recurrent glioma group were compared using a paired t-test (P < 0.05 was considered statistically significant). Fisher's exact test was used for pathway analysis to select significant pathways, respectively (P < 0.05 was considered statistically significant). False discovery rate (FDR) was calculated from Benjamini Hochberg FDR to correct the P value.

# Result

# Quality assessment of IncRNAs and mRNAs data

We used Box-Plot to visualize the distributions of the intensities from all samples. The distributions of the log2-ratios among the six samples were almost the same after quantile normalization (**Figure 1**). We used Scatter-Plot to visual-



**Figure 2.** Scatter plots of IncRNAs (A) and mRNAs (B). They are used to visualize the expression variation between two groups. The values of X and Y axes in the Scatter-Plot were the averaged normalized log2 scaled signal values of groups. The green lines indicate where fold change value is 2.0. The IncRNAs and mRNAs above the top green line and below the bottom green line indicated more than 2.0 fold change between two compared groups.



**Figure 3.** Hierarchical Clustering of IncRNAs. The relationships among the expression levels of six samples are showed clearly by this dendrogram. "Red" indicates high relative expression and "green" indicates low relative expression. "P" indicates primary glioma and "R" indicates recurrent glioma.

ize the IncRNAs and mRNAs expression variation between two groups. The Scatter-Plots showed that abundant IncRNAs and mRNAs were changed more than 2.0 fold between two compared groups (**Figure 2**).

### Hierarchical clustering

Hierarchical Clustering was used for analysis of IncRNAs expression data of six samples. Based on their expression levels, cluster analysis arranged samples into groups. Therefore, we could hypothesize the relationship among samples. The IncRNAs expression patterns of six samples were showed by dendrogram (**Figure 3**).

# Expression profile of IncRNAs and mRNAs

Volcano Plot filtering was applied to screen the differentially expressed



**Figure 4.** Volcano plots of IncRNAs (A) and mRNAs (B). Volcano plot is used for visualizing differential expression between two groups. The vertical lines correspond to 2.0-fold up and down, respectively, and the horizontal line represents a *p*-value of 0.05. So the red point in the plot represents the differentially expressed IncRNAs and mRNAs with statistical significance.

Seqname	GeneSymbol	Fold Change	P-value	Regulation
ENST00000415338	RP5-998N21.4	83.4596327	0.007	up
ENST00000428289	RP11-196G18.3	79.1648301	0.001	up
NR_051996	MGC32805	76.3391949	0.000	up
ENST00000457996	RP11-439A17.9	75.7762829	0.003	up
ENST00000471990	ADAMTS9-AS1	52.7837886	0.001	up
ENST00000449386	RP4-792G4.2	51.0472876	0.001	up
ENST00000493124	ADAMTS9-AS1	47.8919752	0.000	up
ENST00000437267	BX571672.2	46.8798484	0.014	up
ENST00000454263	TRIM43B	46.2437653	0.001	up
uc004abd.1	DQ573539	45.5054089	0.011	up

Table 2. Top 10 up-regulated IncRNAs in the recurrent group compared with the primary group

IncRNAs and mRNAs with statistical significance (fold change  $\geq 2.0$ , P < 0.05) between the two groups (**Figure 4**). A total of 1,111 IncRNAs and 1,233 mRNAs were differentially expressed between the recurrent and the primary glioma group. Among these, 639 IncRNAs and 627 mRNAs were up-regulated in the recurrent group compared with the primary group, while 472 IncRNAs and 606 mRNAs were down-regulated (fold change  $\geq$ 2.0, *P* <0.05). It was noteworthy that IncRNAs H19, HOTAIRM1 (HOX antisense intergenic RNA myeloid 1) and CRNDE (Colorectal neoplasia differentially expressed) was up-regulated for 3.0 fold, 4.1 fold and 11.2 fold, respectively. The three IncRNAs were previously demonstrated to play important roles in glioma. The top 10 up-regulated (**Table 2**) and down-regulated IncRNAs (**Table 3**) are listed.

1	0	0 1 1		,0,1
Seqname	GeneSymbol	Fold Change	P-value	Regulation
TCONS_00001368	XLOC_000669	99.0401229	0.009	down
ENST00000490341	TUBA4B	78.7176547	0.007	down
NR_038200	M1	45.2325513	0.003	down
ENST00000439198	RP11-324I22.2	36.1382223	0.004	down
ENST00000511064	RP11-679C8.2	31.3017411	0.001	down
NR_038199	M1	26.7071748	0.001	down
TCONS_00011943	XLOC_005452	24.3911391	0.024	down
TCONS_00023300	XLOC_011169	21.8388805	0.001	down
NR_024539	POPDC3	19.0093338	0.000	down
NR_038220	LOC170425	18.6276796	0.000	down

Table 3. Top 10 down-regulated IncRNAs in the recurrent group compared with the primary group

### GO and pathway analysis

In order to reveal the potential roles of differentially expressed IncRNAs, GO analysis and KEGG pathway annotation were applied to the differentially expressed mRNAs which was the target gene pool of IncRNAs. The Gene ontology (GO) covers three domains: biological process, cellular component and molecular function. Using GO analysis, we found that most up-regulated mRNAs were involved in biological regulation (biological process), membrane (cellular component) and binding (molecular function). The most down-regulated mRNAs were involved in response to stimulus (biological process), cytoplasm (cellular component) and protein binding (molecular function). The classifications of GO molecular function for up-regulated and down-regulated mRNAs were listed (Figure 5).

Pathway analysis indicated that 41 pathways corresponded to the up-regulated mRNAs and 27 pathways corresponded to down-regulated mRNAs. The up-regulated mRNAs were involved in systemic lupus erythematosus, antigen processing and presentation, etc. On the other hand, the down-regulated mRNAs were involved in FoxO signaling pathway, GnRH signaling pathway, ErbB signaling pathway, GnRH signaling pathway, Pathways in cancer, etc. Many of them were cancer related pathways which might contribute to the recurrence of glioma. Top 10 enriched pathway for up-regulated and downregulated mRNAs were listed (**Figure 6**).

# LncRNA classification and subgroup analysis

Enhancer IncRNAs are a cluster of IncRNAs with enhancer-like function. They can mediate

positive regulation in their nearby gene [12]. LincRNAs (large intergenic noncoding RNAs) are a group of IncRNAs which are highly conserved and involved in diverse biological processes, including embryonic stem cell pluripotency, cell proliferation and so on [13, 14]. Antisense IncRNAs are transcribed from the opposite DNA strands. They are proposed to regulate the sense mRNA with a variety of mechanisms including transcription-related modulation, RNA-DNA interactions, nuclear RNA duplex formation and cytoplasmic RNA duplex formation [15]. Here, we found 36 differentially expressed enhancer IncRNA-nearby gene pairs, 58 differentially expressed IncRNAnearby gene pairs and 17 antisense IncRNAcorresponding sense mRNA pairs, respectively. Some of the differentially expressed enhancer IncRNA-nearby gene pairs (Table 4), IncRNAnearby gene pairs (Table 5) and antisense IncRNA-corresponding sense mRNA pairs (Table 6) were listed.

# Discussion

There are increasing evidences that IncRNAs play important roles in cancer [16]. High throughput microarray analysis is a useful method to screen differentially expressed IncRNAs in cancer. Using this method, researchers have identified many important IncRNAs which play critical roles in glioma and help to clarify the pathogenesis at genetic level [17, 18]. Certain IncRNAs not only regulate the process of proliferation and apoptosis in glioma, but also reflect the prognosis of glioma [19-21]. For example, Han et al. found 1,308 IncRNAs and peroxisome proliferator-activated receptor (PPAR) signaling pathway were aberrantly



Figure 5. The classification of GO molecular function for up-regulated mRNAs (A) and down-regulated mRNAs (B).

expressed in a GBM tissue compared with a normal control. Among these IncRNAs, ASLNC22381 and ASLNC2081 may target insulin like growth factor 1 (IGF-1) signaling and contribute to glioma progression and recurrence [18]. However, all existing studies have only analyzed the expression profile of IncRNA between gliomas and normal brain tissue or among different grade gliomas. It remains unknown whether IncRNAs are aberrant expressed between recurrent gliomas and primary gliomas, let alone the functions of IncRANs in glioma recurrence.

In this study, we gave an overview of IncRNAs profile between recurrent glioma and primary glioma. A total of 1,111 IncRNAs (639 up-regulated and 472 down-regulated) were differentially expressed in recurrent gliomas in comparison with primary gliomas. It is noteworthy that the three obviously up-regulated IncRNAs H19, HOTAIRM1 and CRNDE were previously report-

	91
Systemic lupus erythematosus - Homo sapiens (human)	
Staphylococcus aureus infection - Homo sapiens (human)	
Allograft rejection - Homo sapiens (human)	
Graft-versus-host disease - Homo sapiens (human)	
Phagosome - Homo sapiens (human)	
Type I diabetes mellitus - Homo sapiens (human)	
Antigen processing and presentation - Homo sapiens (human)	
Autoimmune thyroid disease - Homo sapiens (human)	
immune network for IgA production - Homo sapiens (human)	
Alcoholism - Homo sapiens (human)	





EnrichmentScore (-log10(Pvalue)) Sig pathway of DE gene

4

В

А

FoxO signaling pathway - Homo sapiens (human) GnRH signaling pathway - Homo sapiens (human) Chagas disease (American trypanosomiasis) - Homo sapiens (human) ErbB signaling pathway - Homo sapiens (human) Adipocytokine signaling pathway - Homo sapiens (human) MAPK signaling pathway - Homo sapiens (human) Toll-like receptor signaling pathway - Homo sapiens (human) Pathways in cancer - Homo sapiens (human) Renal cell carcinoma - Homo sapiens (human) Salmonella infection - Homo sapiens (human) 0 1 2 3 EnrichmentScore (-log10(Pvalue))

Figure 6. Top 10 enriched pathways for up-regulated mRNAs (A) and down-regulated mRNAs (B).

ed to be up-regulated in glioma and other cancers. H19, which had been demonstrated as an oncogenic IncRNA in breast and colon cancer, was also identified to be higher expressed in high grade glioma than low grade glioma. The functional study revealed that H19 could induce invasion of glioma cell by driving miR-675 [25]. Since invasion is an important factor for glioma recurrence. The property of inducing invasion of glioma cell suggests H19 is an important IncRNA that related to glioma recurrence. Another IncRNA HOTAIRM1, which was found to be highly expressed in the fetal brain, was also found to be increased with ascending glioma

grade [11, 26]. The fetal IncRNA reactivated in high grade glioma suggested a critical role in malignant progression. The other IncRNA CRNDE was found to be up-regulated in glioma cell line. The siRNA-mediated knock down of it could promote cell apoptosis and inhibit cell proliferation. It suggested that CRNDE contributed to cell apoptosis and cell proliferation of glioma [27]. All of these results revealed the potential roles of IncRNAs in glioma and their relationship to glioma malignant properties. These differentially expressed IncRNAs, such as H19, HOTAIRM1, CRNDE, in this study may relate to the recurrence of glioma.

Int J Clin Exp Med 2015;8(4):5033-5043

For the reason that the functions of most IncRNAs have not been well studied, there is no data base can be applied to identify the functional annotations of IncRNAs. In order to find the functional roles of the differentially expressed IncRNAs, we performed GO and pathway analysis based on the differentially expressed mRNAs which are the potential targets of IncRNAs. Using this method, we showed the possible functions of the differentially expressed IncRNAs indirectly. The GO results gave us an overview of the biological process, cellular component and molecular function of the differentially expressed mRNAs. Most of the items were involved in critical processes in cancer pathogenesis such as protein binding, signal transducer activity, protein binding, etc. The pathway analysis showed that the potential targets were involved in many cancer related pathways including MAPK signaling pathway, pathway in cancer, etc. These results indicated the general functional roles of the differentially expressed IncRNAs in glioma recurrence.

In addition to the GO and pathway analysis, we performed IncRNA classification to screen three clusters of IncRNAs with potential gene regulatory function. Since IncRNAs can regulate gene in cis pattern [22], identification of differentially expressed IncRNA and nearby gene pairs may help to find some important IncRNAmRNA pairs that contribute to the recurrence of glioma. Thus, we performed IncRNA-mRNA coexpression analysis and found many differentially expressed IncRNA-mRNA pairs in the recurrent group compared with the primary group. The mRNA in IncRNA-mRNA pair may be the target of IncRNA. Some of these targets are closely related to cancer or neural differentiation. For example, the up-regulated mRNA FOXD4L1 (forkhead box protein D4-like 1) corresponding to up-regulated enhancer IncRNA AC016745.3 could up-regulate genes to maintain proliferative neural precursors in an immature state [23]. The down-regulated mRNA RPRM (reprimo) corresponding to down-regulated IncRNA XLOC\_001711 was demonstrate to be a tumor suppressor in pituitary tumors [24]. The up-regulated sense mRNA MEIS2 (myeloid ecotropic insertion site 2) corresponding to upregulated antisense IncRNA RP11-128A17.1 was reported to highly expressed in human neuroblastoma cell lines and promote cell proliferation [25]. It suggests that these differentially expressed IncRNA-mRNA pairs may also play critical roles in glioma recurrence.

Since TMZ is the first-line chemotherapeutic agent for the treatment of glioma, it is hard to collect the recurrent glioma sample that acquired from no TMZ treated patient. All of the three patients had received TMZ treatment after the first surgery. Thus, the confounding of TMZ treatment effect on expression profile should be considered. However, it remains to be assessed whether TMZ treatment influences the expression profile of IncRNA. Besides, the small sample size and lack of RT-PCR to validate the results may also affect the precision and reliability of this study. The results of this study need to be further validated in future.

In conclusion, this study for the first time revealed a set of IncRNAs that were differentially expressed in the recurrent gliomas compared with the primary gliomas. Some of these IncRNAs may play important roles in glioma recurrence, such as previously reported H19, CRNDE, HOTAIRM1 or unreported AC016745.3, XLOC\_001711, RP11-128A17.1. This study set a basis for future researches on specific IncRNA which may contribute to the recurrence of glioma. Further studies on these IncRNAs will help to elucidate the mechanism of glioma recurrence at genetic level and find therapeutic targets for glioma patients.

# Acknowledgements

This study was financially supported by the National Natural Science Foundation of China (No. 81172398, No. 81270038 and No. 81201565). The authors want to thank KangCheng Bio-tech Inc, Shanghai, China for the assistance in microarray and bioinformatic analysis.

### Disclosure of conflict of interest

### None.

Address correspondence to: Drs. Guo-Han Hu and Lei Jiang, Department of Neurosurgery, Changzheng Hospital, Affiliated to The Second Military Medical University, No. 415 Fengyang Road, Huangpu, Shanghai, China. Tel: +86-021-81885673; +861376178-4970; E-mail: huguohan6504@sina.com (GHH); jl-13jan@hotmail.com (LJ)

### References

- [1] Lamborn KR, Yung WK, Chang SM, Wen PY, Cloughesy TF, DeAngelis LM, Robins HI, Lieberman FS, Fine HA, Fink KL, Junck L, Abrey L, Gilbert MR, Mehta M, Kuhn JG, Aldape KD, Hibberts J, Peterson PM and Prados MD. Progression-free survival: an important end point in evaluating therapy for recurrent high-grade gliomas. Neuro Oncol 2008; 10: 162-170.
- [2] Omuro A and DeAngelis LM. Glioblastoma and other malignant gliomas: a clinical review. JAMA 2013; 310: 1842-1850.
- [3] Esteller M. Non-coding RNAs in human disease. Nat Rev Genet 2011; 12: 861-874.
- [4] Kapranov P, Willingham AT and Gingeras TR. Genome-wide transcription and the implications for genomic organization. Nat Rev Genet 2007; 8: 413-423.
- [5] Gibb EA, Brown CJ and Lam WL. The functional role of long non-coding RNA in human carcinomas. Mol Cancer 2011; 10: 38.
- [6] Mercer TR, Dinger ME and Mattick JS. Long non-coding RNAs: insights into functions. Nat Rev Genet 2009; 10: 155-159.
- [7] Ponting CP, Oliver PL and Reik W. Evolution and functions of long noncoding RNAs. Cell 2009; 136: 629-641.
- [8] Struhl K. Transcriptional noise and the fidelity of initiation by RNA polymerase II. Nat Struct Mol Biol 2007; 14: 103-105.
- [9] Bian EB, Li J, Xie YS, Zong G and Zhao B. LncRNAs: New players in gliomas, with special emphasis on the interaction of Incrnas with EZH2. J Cell Physiol 2015; 230: 496-503.
- [10] Sun Y, Wang Z and Zhou D. Long non-coding RNAs as potential biomarkers and therapeutic targets for gliomas. Med Hypotheses 2013; 81: 319-321.
- [11] Zhang X, Sun S, Pu JK, Tsang AC, Lee D, Man VO, Lui WM, Wong ST and Leung GK. Long noncoding RNA expression profiles predict clinical phenotypes in glioma. Neurobiol Dis 2012; 48: 1-8.
- [12] Orom UA, Derrien T, Beringer M, Gumireddy K, Gardini A, Bussotti G, Lai F, Zytnicki M, Notredame C, Huang Q, Guigo R and Shiekhattar R. Long noncoding RNAs with enhancer-like function in human cells. Cell 2010; 143: 46-58.
- [13] Guttman M, Amit I, Garber M, French C, Lin MF, Feldser D, Huarte M, Zuk O, Carey BW, Cassady JP, Cabili MN, Jaenisch R, Mikkelsen TS, Jacks T, Hacohen N, Bernstein BE, Kellis M, Regev A, Rinn JL and Lander ES. Chromatin signature reveals over a thousand highly conserved large non-coding RNAs in mammals. Nature 2009; 458: 223-227.
- [14] Khalil AM, Guttman M, Huarte M, Garber M, Raj A, Rivea Morales D, Thomas K, Presser A, Bernstein BE, van Oudenaarden A, Regev A,

Lander ES and Rinn JL. Many human large intergenic noncoding RNAs associate with chromatin-modifying complexes and affect gene expression. Proc Natl Acad Sci U S A 2009; 106: 11667-11672.

- [15] Faghihi MA and Wahlestedt C. Regulatory roles of natural antisense transcripts. Nat Rev Mol Cell Biol 2009; 10: 637-643.
- [16] Prensner JR and Chinnaiyan AM. The emergence of IncRNAs in cancer biology. Cancer Discov 2011; 1: 391-407.
- [17] Yan Y, Zhang L, Jiang Y, Xu T, Mei Q, Wang H, Qin R, Zou Y, Hu G, Chen J and Lu Y. LncRNA and mRNA interaction study based on transcriptome profiles reveals potential core genes in the pathogenesis of human glioblastoma multiforme. J Cancer Res Clin Oncol 2014; 141: 827-38.
- [18] Han L, Zhang K, Shi Z, Zhang J, Zhu J, Zhu S, Zhang A, Jia Z, Wang G, Yu S, Pu P, Dong L and Kang C. LncRNA profile of glioblastoma reveals the potential role of IncRNAs in contributing to glioblastoma pathogenesis. Int J Oncol 2012; 40: 2004-2012.
- [19] Qin X, Yao J, Geng P, Fu X, Xue J and Zhang Z. LncRNA TSLC1-AS1 is a novel tumor suppressor in glioma. Int J Clin Exp Pathol 2014; 7: 3065-3072.
- [20] Yao J, Zhou B, Zhang J, Geng P, Liu K, Zhu Y and Zhu W. A new tumor suppressor LncRNA ADAMTS9-AS2 is regulated by DNMT1 and inhibits migration of glioma cells. Tumour Biol 2014; 35: 7935-7944.
- [21] Wang P, Liu YH, Yao YL, Li Z, Li ZQ, Ma J and Xue YX. Long non-coding RNA CASC2 suppresses malignancy in human gliomas by miR-21. Cell Signal 2015; 27: 275-282.
- [22] Orom UA and Shiekhattar R. Long non-coding RNAs and enhancers. Curr Opin Genet Dev 2011; 21: 194-198.
- [23] Klein SL, Neilson KM, Orban J, Yaklichkin S, Hoffbauer J, Mood K, Daar IO and Moody SA. Conserved structural domains in FoxD4L1, a neural forkhead box transcription factor, are required to repress or activate target genes. PLoS One 2013; 8: e61845.
- [24] Xu M, Knox AJ, Michaelis KA, Kiseljak-Vassiliades K, Kleinschmidt-DeMasters BK, Lillehei KO and Wierman ME. Reprimo (RPRM) is a novel tumor suppressor in pituitary tumors and regulates survival, proliferation, and tumorigenicity. Endocrinology 2012; 153: 2963-2973.
- [25] Zha Y, Xia Y, Ding J, Choi JH, Yang L, Dong Z, Yan C, Huang S and Ding HF. MEIS2 is essential for neuroblastoma cell survival and proliferation by transcriptional control of M-phase progression. Cell Death Dis 2014; 5: e1417.