Cell type-specific weighting-factors to solve solid organs-specific limitations of single

cell RNA-sequencing

Short title: Cell type-specific weighting-factors for solid organ scRNA-seq

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Abstract

While single-cell RNA-sequencing (scRNA-seq) is a popular method to analyze gene expression and cellular composition at single-cell resolution, it harbors shortcomings: The failure to account for cell-to-cell variations of transcriptome-size (i.e., the total number of transcripts per cell) and also cell dissociation/processing-induced cryptic gene expression. This is particularly a problem when analyzing highly heterogeneous solid tissues/organs, which requires cell dissociation for the analysis. As a result, there exists a discrepancy between bulk RNA-seq result and virtually reconstituted bulk RNA-seq result using its composite scRNA-seq data. To fix this problem, we propose a computationally calculated coefficient, "cell type-specific weighting-factor (cWF)". Here, we introduce a concept and a method of its computation and report cWFs for 76 cell-types across 10 solid organs. Their fidelity is validated by more accurate reconstitution and deconvolution of bulk RNA-seq data of diverse solid organs using the scRNA-seq data and the cWFs of their composite cells. Furthermore, we also show that cWFs effectively predict aging-progression, implicating their diagnostic applications and also their association with aging mechanism. Our study provides an important method to solve critical limitations of scRNA-seq analysis of complex solid tissues/organs. Furthermore, our findings suggest a diagnostic utility and biological significance of cWFs.

Abbreviations: cWF, cell type-specific weighting factor; r-woRNAseq, real whole-organ RNA-seq; syn-woRNAseq, synthetic whole-organ RNA-seq; V-scRNAseq, virtual single cell RNA-seq.

Introduction

Since the advent of single-cell RNA-sequencing (scRNA-seq) technologies early this century, this method is becoming one of the essential tools in biomedical fields [1]. While scRNA-seq provides useful information of cellular composition and gene expression at single cell resolution, it has limitations.

It is well-known that the total number of RNA molecules per cell, also known as transcriptome-size, varies from-cell-to-cell [2-4]. However, in scRNA-seq analyses, the transcripts are sequenced in individual cells and their transcript-counts are normalized, allowing the comparison of the relative abundance of each transcript-species across individual cells/cell-types [5-9]. This internal normalization process of the analyses cancels out the putative transcriptome size-variations among different cells, concealing potentially important functional differences among the cells.

This differential transcriptome-size can be determined by counting the library depth of the cells and/or by including normalizing spike-in RNA in the samples [2, 3, 10, 11]. Alternative, it can be quantified by PCR-based methods [12, 13]. However, these approaches are applicable only to culture cells, blood/immune cells, and cancer cells which are relatively uniform cell types and do not require cell dissociation. In contrast, they are not applicable to solid tissues/organs composed of highly heterogeneous cell types. Individual cells can be dissociated from solid tissues/organs and then analyzed by scRNA-seq. However, the cell-dissociation and subsequent harvesting and/or purification steps induce cryptic gene expression [14]. Due to such limitations, it is difficult to measure and compare the absolute transcript-counts of each gene in individual cells of the complex solid tissues/organs such as the heart, brain, kidney, etc.

Furthermore, the differential transcriptome-size has biological importance. Several studies indicate that the cell-size influences the overall cellular transcription [15-18]. It is also

reported that c-myc amplifies the global transcription in tumor cells [2, 19], lymphocytes and

embryonic stem cells [20]. Another study shows that the global transcription is repressed by

the loss of MECP2, a methyl CpG binding protein, in embryonic stem cell-derived neurons

[21]. The genome structure, such as ploidy/gene-dosage and nucleosome state, affects the

overall transcription [12, 22, 23]. In additions, it is shown that the total mRNA-contents of

tumor cells are associated with the extent of the cancer progression [24]. These results illustrate

biological importance of accounting for the transcriptome size differences among cells.

In addition to the transcriptome-size, cell dissociation/processing-induced cryptic gene

expression is another problem with scRNA-seq, in particular with solid tissues/organs [14].

The scRNA-seq analyses of the solid tissues and organs require enzymatic digesting and

mechanical dissociation of individual cells. Spatial scRNA-seq requires tissue processing such

as sectioning and laser-mediated harvesting [8, 9]. Such technical procedures induce cryptic

gene expression [14]. The currently available scRNA-seq largely disregard this problem.

In this study, we address and overcome these limitations/problems associated with solid

tissues/organs by developing a method to compute coefficients, cell type-specific weighting-

factors (cWFs), to offset the transcriptome size- and cell dissociation/processing-induced

problem. Furthermore, we also calculate cWFs for 76 cell-types across 10 solid organs and use

them to illustrate their diagnostic and biological utilities.

Results

The cell type-specific weighting factor (cWF)

First, the major premise is follows:

If the transcriptome size differences and the cell dissociation/processing-induced cryptic gene

expression (abbreviated as "cryptic gene expression" hereafter for convenience) are corrected

in the conventional scRNA-seq, the bulk (i.e., tissue/organ) RNA-seq should be the sum of

gene expression of each composite cell-type weighted by cell-type ratios.

We evaluated this premise. The synthetic whole-organ data were constructed from

single-cell transcript counts combined according to the experimentally determined fraction of

each cell-type in the organ (see Materials and methods). Briefly, the synthetic whole-organ

RNA-seq data are calculated as the sum of the normalized transcript counts weighted by the

known ratios of the composite cell-types of the organs, using the signature genes for

distinguishing the cell-types for each organ. The signature genes were determined by the

random forest classifier. These synthetic data for 10 organs (brain, fat, heart, kidney, liver, lung,

pancreas, skin, skeletal muscle, spleen) were then compared to the corresponding real whole-

organ RNA-seq data (Fig 1 and S1 Table). The comparisons were performed by calculating

their Pearson correlation coefficients.

Fig 1. Incomplete reconstitution of the whole organ RNA-seq by the composite scRNA-seq. The

similarity is shown as violin plot of the Pearson correlation coefficient for each number of the signature

genes (100, 300, 500) for each organ (indicated above each plot). The corresponding raw data are found in

S1 Table. SkMuscle: skeletal muscle.

The result shows low Pearson correlation coefficients (< 0.75) for most of the organs

(brain, heart, kidney, liver, lung, pancreas, skin, skeletal muscle) regardless of the number (100,

300, 500) of the top-ranked signature genes used. Particularly low coefficients are found with

the brain (< 0.6 for 100, 300, 500 signature genes), the fat (< 0.5 for 300, 500 signature genes),

the heart (< 0.4 for 300, 500 signature genes), the pancreas (< 0.3 for 100, 300, 500 signature

genes), the skin (< 0.2 for 100, 300, 500 signature genes), and the skeletal muscle (< 0.1 for

100, 300, 500 signature genes). These low Pearson correlation coefficients suggest that the

transcriptome-size of individual cell-types varies, resulting in the large gaps.

These results fail to satisfy the above-described major premise; hence, the differential

transcriptome size-variations and/or the cryptic gene expression are unrepresented in the

scRNA-seq data of the solid organs. To solve this problem, we developed an algorithm to

compute such unrepresented factors (Fig 2 and see Materials and methods). The concept of the

algorithm is schematically described in Fig 2 and as follows: In the real scRNA-seq data

analyses, the total transcript counts per cell (i.e., the transcriptome-size) of the real scRNA-seq

data are normalized (i.e., the total counts per cell are equal among all composite cell-types of

the organs). This results in the loss of a factor representing the putative differences of the

transcriptome-size and/or the cryptic gene expression across cell-types. This factor is computed

as the cell type-specific weighting-factor (cWF) (indicated as w_1, w_2, w_3, etc. in the Fig 2).

Fig 2. Graphical description of the overall concept of the cell type-specific weighting factors (cWFs).

The top row describes the case without the cWFs, failing to reconstitute the real whole-organ RNA-seq data

by the synthetic whole-organ RNA-seq data generated by assembling the composite scRNA-seq data without

the cWFs. The bottom describes the case with the cWFs, accurately reconstitute the real whole-organ RNA-

seq data by the synthetic whole-organ RNA-seq data generated by assembling the composite scRNA-seq

data with the cWFs (w_1, w_2, w_3). The wiggling lines are cellular transcripts where different gene transcripts

are in different colors. The ratios of the cellular transcript-counts in the synthetic and real whole-organ RNA-

seq are indicated by the numbers at the top of the colored transcripts.

Fig 3. The cWFs for each cell-type in each organ. The values of the cWFs for each cell-type (bottom of each plot) for each number of the signature genes (indicated above each plot) for each organ (indicated at the top of the corresponding plots) are shown as box plots. The corresponding raw data are found in S2 Table. The cell-types are indicated as abbreviations and their full names are found in S2 Table. SkMuscle: skeletal muscle.

Using this algorithm, we computed cWFs for 76 cell-types across 10 organs (Fig 3 and S2 Table). The result shows significant variations of the cWFs among different cell-types in

many of the organs, uncovering the body-wide degree of such variations. In particular, the following cell-types show significantly higher cWFs than the others within the same organ: astrocyte (AS) in the brain, endothelial cell (EC) in the fat, muscle cell-types in the heart and the skeletal muscle (CM in the heart, MC in the skeletal muscle), epithelial cell of proximal tubule (PTEC) in the kidney, epithelial cell (EP) and neuroendocrine cell (NE) in the lung, fibroblast-like cell (FB-like) in the skin, and T-cell (T) in the spleen. This result suggests that these cell-types contain larger amounts of transcripts (i.e., the larger transcriptome-size) than the others in the corresponding organs. Furthermore, the results show that such variable degrees of differences in the transcriptome-size are widespread across diverse cell-types and organs.

Validation of cWFs

We validate the computed cWFs by three methods: Reconstitution (Fig 4), deconvolution (Figs 5 and 6) of the whole-organ RNAseq data using their composite scRNA-seq data, and the comparison of the cWFs to the experimentally measured transcript-contents (Fig 7).

First, we validated the cWFs by the reconstitution (Fig 4 and S3 Table, and see Materials and methods). Using the mean value of cWFs for each cell-type, we weighted the transcript counts for each cell-type. We then summed these weighted transcript counts for all composite cell-types of each organ according to their ratios to construct the synthetic whole-organ RNA-seq (syn-woRNAseq(+cWF)), data. Then, they are compared to the corresponding real whole-organ RNA-seq (r-woRNAseq) data. The result shows the Pearson correlation coefficients of 0.8 – 1.0 between the syn-woRNAseq(+cWF) and r-woRNAseq for all 10 organs with all or at least one of the 100, 300, 500 signature genes (Fig 4). These are significant improvements from the 0 – 0.75 of the Pearson correlation coefficients without the cWFs (Fig 1). The heart shows the Pearson correlation coefficients of almost 1.0 with the cWFs (Fig 4), as compared to those of 0.25 – 0.7 without the cWFs (Fig 1). Even for the spleen where the

Pearson correlation coefficients are 0.75 – 0.8 without the cWF (Fig 1), the cWF (i.e., syn-

woRNAseq(+cWF)) improves the Pearson correlation coefficients up to 0.9 – 1.0 (Fig 4). The

results demonstrate that cWFs correct the large gap between the synthetic whole-organ

RNAseq without the cWFs (syn-woRNAseq(-cWF)) and r-woRNAseq, supporting the notion

that cWFs reflect the transcriptome size-variations of the cells and their requirement for the

accurate single-cell analyses.

Fig 4. Accurate reconstitution of the whole organ RNA-seq by the composite scRNA-seq and cWFs.

The similarity is shown as violin plot of the Pearson correlation coefficient for each number of the signature

genes (100, 300, 500) for each organ (indicated above each plot). The corresponding raw data are found in

S3 Table. SkMuscle: skeletal muscle.

Next, the validation by the deconvolution (Fig 5) was performed. We developed a

deconvolution method that integrates cWFs in a Bayesian framework, as schematically

described in Fig 5A.

Fig 5. Accurate deconvolution of the whole organ RNA-seq by cWFs. (A) Graphical description of the overall concept of the deconvolution method with the cWFs. Shown is the case of an organ consisting of 3 cell-types (1, 2, 3) with 7 different genes (wiggling lines of different colors). The mean of the cWFs: w_1, w_2, w_3 for each cell-type 1, 2 and 3, respectively. The virtual transcript counts ($x_1^{(t)}$, $x_2^{(t)}$, $x_3^{(t)}$ where the different

genes are indicated by the wiggling lines of different colors for each cell-type) and the ratio ($r_1^{(t)}$, $r_2^{(t)}$, $r_3^{(t)}$)

of virtual cell-type 1, 2 and 3 at each iteration, t, are as indicated. Their initial conditions are $x_1^{(0)}$, $x_2^{(0)}$, $x_3^{(0)}$,

$r_1^{(0)}$, $r_2^{(0)}$, $r_3^{(0)}$. The iteration (t= 1, …, T) is performed until both **X** and **r** converge (see Materials and

methods). Upon completing the iterations, the sum of the virtual transcript counts weighted by the cWFs

(indicated as "Virtual scRNAseq") weighted by the virtual cell-type ratios (indicated as "Predicted cell-type

ratio) generates the synthetic whole-organ transcriptome (indicated as "syn-woRNAseq (+cWF)"), as shown

at the far right of this panel. **(B)** Bar graph showing the cell type-ratios computed by our deconvolution

method (V-scRNAseq) for each organ. The deconvolution was performed with the cWFs computed using

the optimal number of the signature genes for each organ (indicated in the accompanying S4 Table). The

reference cell-type ratios and the ratios estimated by the conventional deconvolution methods without cWFs,

MuSiC and DWLS, are shown as comparisons. The bar graphs are composed of the cell-types computed to

be present for each organ by our method. **(C)** The quantitative similarity of the computed ratios to the

reference ratios is shown by heatmap of RMSE for our method with cWFs (V-scRNAseq), MuSiC, and

DWLS. RMSE: Root Mean Squared Errors. The corresponding raw data are found in S4 Table. SkMuscle:

skeletal muscle.

Briefly, it works as follows (see also Materials and methods): The mean of the cWF

(w_1, w_2, w_3 in Fig 5A, the lower case 1, 2, 3 indicate cell-type 1, 2, 3) is used to compute virtual

transcript counts ("x" in Fig 5A) for each gene (indicated as wiggling lines of different colors

in Fig. 5A) and the ratio (indicated as "r" in Fig 5A) of each cell-type in each organ (painted

in different colors in Fig 5A). Using the signature-gene set, the computation is iteratively

performed by the sampling method of No-U-Turn Sampler (NUTS), in the Bayesian

framework with two hyperparameters, α and β, to account for the combinatorial influence of

the cell-type ratios and the gene expression patterns of each cell-type on the whole-organ-level

transcriptome, respectively. For the iteration (t = 1, …, T), the initial condition is set as $x_1^{(0)}$

and $r_1^{(0)}$ for the transcript counts and the ratio of cell-type 1 (see the diagram labels as

"Prediction" in Fig 5A). Those for cell-types 2 and 3 are indicated accordingly (see the diagram

labels as "Prediction" in Fig 5A). Such initial conditions are the cWF-weighted transcript count

for each gene and the reference cell-type ratio, respectively. The iteration is repeated until all

sampling variables converge with the signature-gene set. The counts of the non-signature gene

set are computed by an analytic approach in the Bayesian framework with a hyperparameter,

γ, which has the similar nature of β as above. The "r" is fixed as the above-estimated value,

and only "x" in the non-signature gene set is computed.

The deconvolution results for 10 organs using this method were compared to the real

cell-composition data of the corresponding organ (Fig 5, B and C). The results were also

compared to those of two conventional deconvolution methods without the cWF, MuSiC and

DWLS [25, 26]. These two were chosen as they have been applied to 1 – 4 organs and appear

to outperform the other published methods. The prediction of the cell-type ratios show that our

method (V-scRNAseq) outperforms the methods without the cWFs (MuSiC, DWLS) for 9

organs (brain, fat, heart, kidney, lung, pancreas, skin, skeletal muscle, spleen). For these organs,

the cell-type ratios predicted by our method are more similar to those of the real data than those

predicted by MuSiC or DWLS (Fig 5B and S4 Table). Notably, our method corrected the

abnormally large ratios of cardiac muscle and muscles in the heart and the skeletal muscle,

respectively, estimated by MuSiC and DWLS (Fig 5B and S4 Table). The lower root-mean-

squared error (RMSE) for these 9 organs with our method (Fig 5C and S4 Table) further

confirms the better performance of our method (Fig 5C and S4 Table). For the liver, our method

failed (Fig 5, B and C, and S4 Table), despite the high performance in the reconstitution (Fig

4). This may be due to the predominantly hepatocyte composition of the liver. Our method

assumes the symmetric Dirichlet distribution as prior distribution which influences the

posterior distribution – hence, the method is less suitable for the organ, such as the liver,

consisting of a single dominant cell-type.

In addition to the cell-type ratios, we also computed the virtual transcriptome of 23,131

(Brain, Fat, Heart, Lung, Spleen), 22,742 (Kidney), 23,104 (Liver), 15,682 (Pancreas), 21,233

(Skin) and 14,129 (the skeletal muscle) genes in each of the "virtual" cell-type and compared

them to those of the real cell-type for the 10 organs (Fig 6 and see Materials and methods). Our

approach computes a posterior distribution and its Expected *A Posteriori* (EAP) for counts of

each transcript for each cell-type. Hence, we calculated Pearson correlation coefficients for

each cell-type, using the EAPs of all genes in virtual and real cell-types for each organ (Fig 6

and S5 Table).

Fig 6. Computation of the complete transcriptome of the composite cell-types of 10 mouse organs. The

heatmap of Pearson correlation coefficients for the transcriptome of all virtual and real cell-types across all

10 organs. The Pearson correlation coefficients are calculated for 23,131 (Brain, Fat, Heart, Lung, Spleen),

22,742 (Kidney), 23,104 (Liver), 15,682 (Pancreas), 21,233 (Skin) and 14,129 (the skeletal muscle) genes.

The corresponding raw data are found in S5 Table. SkMuscle: skeletal muscle.

Their Pearson correlation coefficients indicate that the virtual transcriptomes are comparable to the real ones across all cell-types and organs. They also recapitulate the transcriptomics-relatedness of the same/related cell types across different organs (Fig 6). For example, the similarity of endothelial cells in multiple organ such as brain, fat, heart, liver and lung is recapitulated in the virtual transcriptomes among these organs (Fig 6). The relatedness of each of the immune system cells across multiple organs is also represented (Fig 6).

The reconstitution and deconvolution results demonstrate that cWFs enable the accurate representation of individual cells in the context of the whole-organs of highly heterogenous compositions, presumably by weighting the variations of the transcriptome-size of different cell-types. We further validate this account by directly comparing the cWFs variations to those of the experimentally-determined total mRNA-contents of the corresponding cell-types.

Fig 7. Comparison of the cWFs to the experimentally-determined total mRNA-contents of human PBMC cell-types. The comparison is shown as bar graphs of the experimentally-determined mRNA-amounts per cell (mRNA amount per cell: empty bar) and the computed cWFs (cWFs: filled-bar) for each cell-type. The bars are shown as mean ± S.E. (standard error). B: B-cell, CD14Mono: CD14^{+} monocytes, Neu: Neutrophil, NK: Natural killer cell, T: T-cell. The validation of the cWFs by reconstitution and

deconvolution are found in S1 Fig (raw data are in S6 – S8 Tables). The corresponding raw data for Fig 7

are found in S9 Table.

The measurement of such variations for individual single-cells of solid organs are

difficult and the methods to measure such variations are limited to cultured cells and

systemic/circulating cells such as immune cells, and tumor cells [2, 10, 13, 24]. Therefore, we

used the experimentally-determined total mRNA-contents of the cell-types composing human

peripheral blood mononuclear cells (PBMCs) and compared them to the computed cWFs of

the corresponding cell-types (Fig 7).

We used bulk and single-cell RNA-seq data of human PBMCs [27-30] and computed

the cWFs of B-cells, CD14$^+$ monocytes, CD16$^+$ monocytes, dendritic cells, neutrophils, natural

killer (NK) cells, plasmablasts (PB), T-cells, and the others (e.g., red-blood-cells, platelets,

etc.) (see Materials and methods). The reconstitution and deconvolution analyses confirmed

that they correct the biased gene-expression in the scRNA-seq data caused by the normalization

of the transcriptome-size, as indicated by the higher Pearson correlation coefficients (S1A Fig,

and, S6 and S7 Tables) and lower RMSE/higher Person correlation coefficient (S1B Fig, and,

S8 Table) with the cWFs in the reconstitution and deconvolution analyses, respectively.

The total mRNA-amounts are experimentally measured and determined for B-cells,

CD14$^+$ monocytes, neutrophils, NK cells, and T-cells of PBMCs [11]. We made side-by-side

comparison of the computed cWFs and their experimentally-measured transcriptome-size of

the corresponding cell-types (Fig 7 and S9 Table). The result shows that the computed cWFs

accurately recapitulate the 3.5 - 10.8-fold higher transcriptome-size of the CD14$^+$ monocytes

compared to the B-, T-, NK cells, or neutrophils, respectively (i.e., CD14$^+$ monocytes: 1.4

pg/cell vs. B-/T-/NK-cells: 0.4 pg/cell, Neutrophils: 0.13 pg/cell). It also recapitulates the 3-

fold higher values of the B- and T-cells than that of neutrophils (i.e., 0.4 vs. 0.13 pg/cell). The

experimental values of the mRNA-amounts of B- and T-cells are approximately the same,

which is also recapitulated by virtually the same cWFs of these two cell-types. These side-by-

side comparisons provide another layer of evidence supporting the account that cWFs indeed

represent the transcriptome size-variations among different cell-types.

Utilities of cWFs

Previously, biological and diagnostic utilities of differential transcriptome size are reported [2,

12, 15-24]. Hence, we explored such utilities for cWFs. We hypothesized that the

transcriptome-size of each cell-type differentially change over aging and that such a phenotype

could underlie the aging mechanism and could also be exploited as a new type of aging-

biomarker. To test this hypothesis, we examined whether the patterns of the cWFs change over

the course of aging. Furthermore, we examined whether such putative changes of the cWFs

actually indicate the progression of aging.

For this purpose, we used the *Tabula Muris Senis*, the atlas of the multiple-organ single-

cell transcriptomics across multiple aging stages of mouse [29, 31]. This atlas provides both

the whole-organ RNA-seq data and their corresponding composite scRNA-seq data. Using

these data, we computed cWFs of the composite cell-types of 5 organs (brain, heart, kidney,

lung, spleen) across 3 aging-stages (3, 18, and 24 months-old) of mice. The 3, 18, 24 months-

old (mos.) in mouse correspond to 25 - 26 years-old, 60 - 80 years-old, and ≥ 80 years-old in

human, respectively [32]. These 5 organs were chosen for the following two reasons: 1) they

performed well in both the reconstitution and deconvolution validations (Figs 4 and 5); 2) their

equivalent whole-organ/single-cell data are also present in our 10 organs-analysis described

above.

Using these datasets, we computed the cWFs of all composite cell-types for each organ.

The reconstitution (S2 Fig, and, S10 and S11 Tables) and deconvolution (S12 Table) analyses

confirmed that they correct the biased representations of the gene expression and cell-type

compositions, respectively, in the scRNA-seq data with one or more of the signature gene set(s)

for each aging-stage. Based on these results, we selected the best performing numbers of the

signature genes for each organ and aging-stage by omitting the conditions that failed to

significantly improve the reconstitution (highlighted in pink in S12 Table) and selecting the

ones with the lowest RMSE and the highest Pearson correlation coefficients in the

deconvolution analysis (highlighted in light-green in S12 Table). This screening selected the

cWFs computed with the following conditions: Brain (3 mos. – 500 signature genes, 18 mos.

– 300 signature genes, 24 mos. – 300 signature genes), Heart (3 mos. – 100 signature genes,

18 mos. – 500 signature genes, 24 mos. – 300 signature genes), Kidney (3 mos. – 300 signature

genes, 18 mos. – 500 signature genes, 24 mos. – 500 signature genes), Lung (3 mos. – 500

signature genes, 18 mos. – 300 signature genes, 24 mos. – 300 signature genes), Spleen (3 mos.

– 300 signature genes, 18 mos. – 100 signature genes, 24 mos. – 500 signature genes).

With these selected cWFs, we examined whether their relative differences change over

the course of aging. For this purpose, we compared the ratios of the cWFs of a pair of two

distinct cell-types in each organ across three aging-stages (Fig 8 and S13 Table). The analysis

detected their statistically significant ($p < 0.01$ by U-test) changes of many of the cell type-

pairs in all organs over the course of aging.

Fig 8. Differential cWFs during aging of mouse. The changes of the ratios of cWFs of cell type-pairs across three aging-stages (3 months-old: 3 mos., 18 months-old: 18 mos., 24 months-old: 24 mos.) are shown as heatmap for each organ (Brain, Heart, Kidney, Lung, Spleen). The cell type-pairs are indicated at the left of each heatmap. The ratios are the pairwise ratios of the corresponding cell-types. For example, AS vs. EC indicates the ratio of the cWF for AS (numerator) and EC (denominator). The ratios are indicated as $\log_{10}$ of the medians. Shown are the pairs resulted in p < 0.01 by U-test in one or more of the three pairwise aging stage-comparisons (18 mos. vs. 3 mos., 24 mos. vs. 3 mos., 24mos. vs. 18 mos.). The analysis was conducted with those showing the significant improvements in the reconstitution (S2 Fig, and, S10 and S11 Tables) and the best deconvolution results (S12 Table) for each organ. The full names of the cell type abbreviations and the raw data of the heatmap are found in S13 Table.

We next investigated whether such differential pairwise ratio-changes of the cWFs

predict the progression of aging. For this purpose, we applied a machine learning algorithm,

LightGBM [33], to the dataset of the pairwise cWF ratios between the cell type-pairs listed

above (see Methods). First, each organ dataset was independently evaluated (Fig 9). The result

shows high predictability with the pairwise cWF ratios between the brain, the lung, the heart,

and the kidney cells, as indicated by their high prediction index scores (i.e., accuracy, macro-

recall, macro-precision, macro-F1 score) of 0.88 – 0.98 (Fig 9A).

A	Accuracy	macro−Precision	macro−Recall	macro−F1 Score
Brain	0.983	0.984	0.983	0.983
Heart	0.883	0.893	0.883	0.882
Kidney	0.883	0.883	0.883	0.881
Lung	0.967	0.967	0.967	0.967
Spleen	0.517	0.514	0.517	0.514

Fig 9. Prediction of the aging-stage by

the differential cWFs of each organ.

(A) The prediction scores (accuracy,

macro-precision, macro-recall, macro-

F1 score) for each organ (Brain, Heart,

Kidney, Lung, Spleen) are shown. **(B)**

The top-ranked features (i.e., pairwise

cell-types) important for the prediction

are shown as bar graphs for each organ.

The feature importance is indicated by

gain. The corresponding raw data are

found in S14 Table.

The LightGBM prediction with all organs combined also shows high performance as

indicated by its prediction index scores of 1 (Fig 10A). The feature importance analysis shows

the top-ranked cell type-pairs are those of the lung and the brain, supporting the higher

performance results with the cell-types of these organs when they are independently analyzed

(Fig 9A). The cell-types indicated as important contributors to the prediction listed above for

the individual organ analyses also ranked higher in this all-organ-combined analysis (Fig 10B

and S14 Table). Taken together, the results demonstrate that the differential cWF ratios of the

brain, the lung, the heart and the kidney accurately predict the progression of aging, suggesting

a possible role of the differential transcriptome-size among the cells in these organs in the aging

mechanism. The results also indicate a possibility of using these indices to determine the

progression of aging.

Fig 10. Prediction of the aging-stage by the differential cWFs of all 5 organs combined. (A) The prediction scores (accuracy, macro-precision, macro-recall, macro-F1) by combining the cWF of all pairwise cell-types across all organs are shown. **(B)** The top 30 important features (i.e., the pairwise ratios of the cWFs) for the prediction are shown as bar graphs for each organ. The feature importance is indicated by gain. The cell type-pairs and their organs are indicated as organ-name_cell-type pair (e.g., Lung_CCE vs. NK: the CCE vs. NK pair of the lung). The corresponding raw data are found in S14 Table.

Discussion

In this study, we report a computational method to calculate cWFs, coefficients to offset the lack of the representation of transcriptome size variations and differential cryptic gene expression among different cells of solid organs (Fig 2). Using this method, we computed and describe cWFs for 76 cell-types across 10 organs (Fig 3). We show that they indeed account for the relative variations of the transcriptome-size of the cells and their differential cryptic gene expression by demonstrating their requisite role for accurately reconstituting and deconvolving the whole-organ RNA-seq data using their composite scRNA-seq data weighted by the corresponding cWFs (Figs 4 – 6). We also show that they recapitulate the experimentally-determined total mRNA content-differences, using PBMC data (Fig 7).

Furthermore, we show that cWFs differentially change among diverse cell-types across various organs over aging and can be used to effectively predict aging progression in the aging mouse model (Figs 8 – 10). These results suggest a possible role of differential transcriptome size-change over lifetime in the aging mechanism. The results also indicate their possible diagnostic applications as biomarkers for aging progression and/or aging associated diseases.

Despite the usefulness of cWFs, some limitations must be noted. One limitation is the requirement of both bulk and single-cell RNA-seq data of the organs and the tissues of interest. Our method requires both of these datasets for the target organs/tissues to infer the cWFs of the composing cell-types. However, this may become less of a limiting factor as the availability of such data is exponentially growing. Once we determine the cWFs for the specific cell-types of organs, the same cWFs can be used for the same cell-types of the same organs regardless of their sources. Therefore, the cWFs reported in this study can be used for the same 76 cell-types and 10 organs for other studies. Another requirement is that the method needs at least a rough a priori knowledge about the cell-type compositions (i.e., the ratio of cell-types) of the organs and the tissue of interest -i.e., the method works only in a supervised framework. This limitation

450 could also become less limiting as a growing body of scRNA-seq data provides information on

451 the cell-type compositions of previously less characterized organs/tissues.

Materials and methods

Datasets

For the whole-organ RNA-seq data, two murine datasets are used: One from 11 weeks-old male

C57BL6/N Jcl mice and derived from 'iOrgans Atlas' (http://i-organs.atr.jp) [34, 35] and the

other from 3, 18, and 24 months-old male C57BL6/N mice and derived from the *Tabula Muris*

Senis [29]. For the scRNA-seq datasets, used are the brain, the fat, the heart, the liver, the lung,

and the spleen data from 11 weeks-old male C57BL6/JN mice described in *Tabula Muris* [36].

The kidney data are from 3 months-old male C57BL6/JN mice in *Tabula Muris Senis* [31].

The skeletal muscle and the pancreas data are from 8-10 weeks-old female C57BL6/J reported

in Mouse Cell Atlas [37]. The skin data are from 9 weeks-old female C57BL6/J mice [38]. The

aging mouse scRNA-seq datasets in the brain, the heart, the kidney, the lung and the spleen are

from 3, 18, 24 months-old male C57BL6/JN mice in *Tabula Muris Senis* [29, 31]. The human

PBMC datasets are GSM2871599 in GSE107572 (bulk RNA-seq) [43, 44] and GSM4557334

in GSE150728 (scRNA-seq) [30], both are from healthy donors.

Data preprocessing

Cell-type labels of the organs used in this study are as described in each corresponding original

single-cell study, except for those of the skeletal muscle, the pancreas, and the heart (the *Tabula*

Muris Senis, but not the *Tabula Muris,* data) and the human PBMC. For the skeletal muscle

and the pancreas, the multiple labels of the cell-types of the similar gene expression patterns in

the original study are combined into the single label as follows (*** indicating arbitrary

characters). For the skeletal muscle, 'B cell_***', 'Dendritic cell', and 'T cell' into 'Lymphatic

cell', 'Erythroblast_***', 'Granulocyte monocyte progenitor cell', 'Macrophage_***' and

'Neutrophil_***' into 'Myeloid cell', 'Muscle cell_***' into 'Muscle cell'. For the pancreas,

'B cell' and 'T cell' into 'Lymphatic cell', 'Dendritic cell', 'Erythroblast_***', 'Granulocyte',

and 'Macrophage_***' into 'Myeloid cell', 'Endothelial cell_***' into 'Endothelial cell',

'Smooth muscle cell_***' into 'Smooth muscle cell', 'Stromal cell_***' into 'Stromal cell',

'Dividing cell' and 'Glial cell' into 'Others'. For the heart dataset in *Tabula Muris Senis* [31],

the labels were replaced with the ones in *Tabula Muris* [20] using single-cell reference mapping

by '*Seurat*' v4 [39], as follows. First, the reference scRNA-seq data in *Tabula Muris* were

preprocessed by '*Seurat*' analyses with the log-normalization (where the scale factor is 10^6),

the highly variable genes selection with default parameters, the scaling for all genes, and

principal component analysis (PCA) acquiring 200 principal components (PCs). The number

of PCs used for the downstream analysis was determined at p-value below 0.0001 in JackStraw

analysis, resulting in 33 PCs. Using these 33 PCs reference data, the query heart scRNA-seq

datasets from *Tabula Muris Senis* [31] were annotated by the functions of

'FindTransferAnchors()' and 'TransferData()' in '*Seurat*'. For the human PBMC, we

combined cell-type labels as follows: 'Class-switched B' and 'B' into 'B', 'CD8m T', 'CD4m

T', 'CD4n T', 'CD4 T', 'gd T' and 'CD8eff T' into 'T', 'IgG PB' and 'IgA PB' into 'PB',

'pDC' and 'DC' into 'DC', 'RBC', 'Platelet', 'Activated Granulocyte' and 'SC & Eosinophil'

into 'Others'. The gene symbol-matching between the scRNA-seq and the whole-organ RNA-

seq data was conducted by using entrez gene IDs derived from 'org.Mm.egALIAS2EG' in an

R package, '*org.Mm.eg.db*'. ERCC-labelled genes were removed as they are spike-in genes. In

addition, the counts of the three genes (*Rn45s, Akap5, Lrrc17*) were removed as they are non-

mRNA artifacts significantly influencing the total counts. The normalization was performed

by adjusting the total counts of each cell in the scRNA-seq datasets to a million. The same

normalization process was also applied to each of the whole-organ RNA-seq data.

Calculation of reference cell-type ratios

The reference cell-type ratios were as described in each original single-cell study, except for

the heart and the brain. For the heart, the cell-type ratios described in *Tabula Muris* [36] were

based on the separate analysis of the cardiac muscles and the non-muscle cells, resulting in a

large under-estimation of the cardiac muscle ratio – 3.1% [36]. In contrast, the ratio determined

by multiple other methods and considered as the gold-standard in the cardiovascular fields is

30 - 40% [40-46]. According to this gold-standard ratios, we made the following modifications:

We set the ratio of the cardiac-muscle cells at 30% and the remaining at 70%. The latter, then,

was divided by the non-muscle cell types by maintaining their ratios the same to those in the

Tabula Muris data. For the brain, the cell-type ratio reported in the NIH database

(https://www.nervenet.org/papers/brainrev99.html#Numbers) was used to modify those in the

Tabula Muris scRNA-seq data [36], as follows. First, we divided the brain cell-type classes

into four classes: 'neurons', 'glial cells', 'endothelial cells', 'others', and then set the ratio of

these classes at 75 : 23 : 7 : 4, respectively, accordingly to their estimated ratios in the NIH

murine brain database (https://www.nervenet.org/papers/brainrev99.html#Numbers). Second,

we further divided 'neurons', 'glial cells', and 'others' into more cell-type classes according to

Tabula Muris [36]. The 'neurons' were further divided into 'neuron-excitatory neurons and

some neuronal stem cells' and 'neuron-inhibitory neurons'. The 'others' class was divided into

'brain pericyte-NA' and 'oligodendrocyte precursor cell-NA'. For the 'glial cells' class, we

introduced three assumptions: 1) the 'glial cells' can be classified into four cell-types,

'microglial cell-NA', 'astrocyte-NA', 'Bergmann glial cells-NA', and 'oligodendrocyte-NA',

according to *Tabula Muris* [36]; 2) the ratios of these four glial cell types follow those of

Tabula Muris [36] among them, and 3) the ratio of 'microglial cells-NA' in the whole brain is

0.1, as it is reported that the 'microglial cells' account for 10 – 15 % of the whole brain cells.

On the basis of these assumptions, the ratios of each brain cell type was estimated as

'macrophage-NA' (ca. 0.2%), 'microglial cell-NA' (10.0%), 'astrocyte-NA' (ca. 2.2%),

'Bergmann glial cell-NA' (ca. 2.1%), 'brain pericyte-NA' (ca. 1.5%), 'endothelial cell-NA'

(ca. 6.4%), 'neuron-excitatory neurons and some neuronal stem cells' (ca. 47.5%), 'neuron-

inhibitory neurons' (ca. 21.3%), oligodendrocyte-NA' (ca. 8.7%) and 'oligodendrocyte

precursor cell-NA' (ca. 1.9%) and used as the reference. For the human PBMC, the reference

cell-type ratios are as described [27, 28], except for those of "CD16$^+$ monocytes" and "PB and

Others". The ratios of these cell-types are derived as follows: The ratios of the cell-type label

"the others" was divided to 'CD16$^+$ monocytes' (ca. 7.21%), 'PB' (ca. 0.24%), 'Others' (ca.

3.77%), according to their RNA-seq data-based ratios.

Selection of signature gene sets

Random Forest (RF) was performed to extract signature genes for distinguishing cell-types

from one another in each organ using the scRNA-seq count data derived from the cell-type

reference datasets described in the above section. In this study, the '*randomForest*' package in

R was used for tuning and producing a classifier by RF. The scRNA-seq data were first divided

by 8:2 into the training and the test data. Using the training data, we determined two parameters,

'mtry' and 'ntree' for producing an RF-model. The parameter 'mtry' means the number of

features used for an RF-model and was tuned by a function 'tuneRF()', while the parameter

'ntree' means the number of trees generated in an RF-model and was set as 500, which is

sufficient to converge error rate in cell-type classification. The produced RF-model was

validated by using the test data and F1-score calculated by a function 'F1_Score()' in an R

package '*MLmetrics*'. Then we confirmed the validity of the model by F1-score over 0.8.

Following the classifier production, the important features in the classifier were extracted as

the signature genes for each cell-type, where we used 'Mean Decrease in Gini' values as the

importance indicator for each gene.

Computation of the cell type-specific weighting-factors (cWFs)

The overall concept for computing the cWFs is graphically described in Fig 2 and is as follows:

The observed scRNA-seq counts are normalized (i.e., the total counts per cell is the same for

all individual cells). Hence, the putative differential transcriptome-size among various cell-

types is lost from the count data. The cWFs (w_1, w_2, w_3, etc.) offset such loss. In their

computation, we calculated at least 100 cWFs for each virtual-cell/cell-subject of each cell-

type and made them follow Gaussian distribution, instead of one cWF per cell-type. Based on

this concept, we developed a model as follows:

$$m\mathbf{y} = \sum_j w_j \mathbf{x}_j \ (j \in C^m) \tag{1}$$

where $\mathbf{y} \in \mathbb{R}^n$, $w_j \geq 0$ and $\mathbf{x}_j \in \mathbb{R}^n$ denote the normalized whole-organ RNA-seq counts

vector, the cWF for each cell subject j, and the normalized scRNA-seq counts vector for each

cell subject j, respectively. The n is the total number of the signature genes for the organs. In

this study, 100, 300, and 500 signature genes were selected according to the ranking on the

basis of 'Mean Decrease in Gini' values calculated by the RF analyses. The numbers, 100, 300,

and 500 were arbitrarily selected but the smaller number of signature genes is computationally

more cost-effective (see the details also in the section below). The combination of cell subjects,

C^m was selected at random while maintaining the reference cell-type ratio described above

with the total number of cell subjects, m, which is arbitrarily set to 100. In addition, we set C^m

containing at least 1 cell subject in each cell-type. With this model, w_j was calculated by

solving a quadratic problem under the constraint that the resulting value is non-negative as

follows:

$$573 \qquad \widetilde{w}_j = \text{argmin}_{w_j} \sum_i^S \left| m\mathbf{y}_i - \sum_j w_j \mathbf{x}_j \right|^2 \; s.t. \; w_j \geq 0 \qquad (2)$$

Here, S is the number of whole-organ RNA-seq count data. This quadratic problem was solved

by using '*osqp*' package in R. The process of both random-selection of the cell subject

combination and $\widetilde{w}_j$ calculation was recursively performed until more than 100 w_j were

generated for all selected cell subjects. In every recursion, Pearson correlation coefficients were

calculated between the real whole-organ RNA-seq and the corresponding synthetic whole-

organ RNA-seq generated with or without the weighting-factors. Then, by assuming that the

distribution of the weighting-factors follows Gaussian distribution, we calculated the mean and

variance of the weighted counts for each cell subject as follows:

$$582 \qquad \tilde{\mathbf{x}}_j \sim \mathcal{N}\left(\mu_{w_j} \mathbf{x}_j, \sigma_{w_j}^2 \text{diag}(\mathbf{x}_j \odot \mathbf{x}_j) \right) \qquad (3)$$

where, $\tilde{\mathbf{x}}_j$, μ_{w_j}, and $\sigma_{w_j}^2$ denote the weighted count vector for the cell subject j, the mean of the

cWFs for the cell subject j, and the variance of the cWFs for the cell subject j, respectively.

The operator $\odot$ represents the element-wise product between two vectors. On the basis of the

computed mean and variance of the weighting-factors for each cell subjects, the weighted count

vector of cell-type k was calculated by assuming that they follow Gaussian distribution as

follows:

$$589 \qquad \bar{\mathbf{x}}_k \sim \mathcal{N}\left(\frac{1}{N_k} \sum_j \mu_{w_j} \mathbf{x}_j, \frac{1}{N_k} \sum_j \sigma_{w_j}^2 \text{diag}(\mathbf{x}_j \odot \mathbf{x}_j) \right) \; (j \in C^k) \qquad (4)$$

590 where, k, C^k, and N_k denote a cell-type, a set of subjects labelled with cell-type k, and the

591 number of subjects in C^k, respectively.

Computing the cell-type ratios & gene expression patterns

594 The overall concept is graphically described as Fig 5A and the model is as follows:

$$595 \qquad \mathbf{y} = \mathbf{X}\mathbf{r} \qquad (5)$$

where, $\mathbf{y}$, $\mathbf{X} = [\bar{\mathbf{x}}_1, ..., \bar{\mathbf{x}}_k, ..., \bar{\mathbf{x}}_K]$, and $\mathbf{r}$ are the whole-organ RNA-seq data vector, the matrix

of the virtual transcript counts where the columns are the weighted-counts for each cell-type

calculated as above, and the coefficient vector corresponding to the cell-type ratio, respectively.

To compute $\mathbf{X}$ and $\mathbf{r}$, we employed Bayes' theorem. To apply Bayes' theorem, Gaussian noise

$\mathcal{N}(\mathbf{0}, \beta\mathbf{I})$ was added to Equation (5) and a probabilistic model was developed as follows:

$$P(\mathbf{y}|\mathbf{X}, \mathbf{r}) = \mathcal{N}(\mathbf{y}|\mathbf{Xr}, \beta\mathbf{I}) \qquad (6)$$

where, β denotes a hyperparameter. According to the Bayes' theorem, the posterior

distribution of $\mathbf{X}$ and $\mathbf{r}$ was obtained as

$$P(\mathbf{X}, \mathbf{r}|\mathbf{y}) \propto P(\mathbf{y}|\mathbf{X}, \mathbf{r})P(\mathbf{X})P(\mathbf{r}) \qquad (7)$$

where, $P(\mathbf{X})$ and $P(\mathbf{r})$ denote prior distribution of $\mathbf{X}$ and $\mathbf{r}$, respectively. $P(\mathbf{X})$ and $P(\mathbf{r})$ are

given as follows:

$$P(\mathbf{X}) = \prod_{k=1}^{K} P(\bar{\mathbf{x}}_k) = \prod_{k=1}^{K} \mathcal{N}(\bar{\mathbf{x}}_k|\boldsymbol{\mu}'_k, \boldsymbol{\Sigma}_k^{-1}) \qquad (8)$$

$$P(\mathbf{r}) = Dirichlet(\mathbf{r}|\alpha\mathbf{1}_K) \qquad (9)$$

where, α and $\mathbf{1}_K$ denote a hyperparameter and the K-dimensional all-ones vector. In prior

distribution $P(\mathbf{X})$, $\mathcal{N}(\bar{\mathbf{x}}_k|\boldsymbol{\mu}'_k, \boldsymbol{\Sigma}_k^{-1})$ is the same as Equation (4). In other words, $\boldsymbol{\mu}'_k =$

$\frac{1}{N_k}\sum_j \mu_{w_j}\mathbf{x}_j$ and $\boldsymbol{\Sigma}_k^{-1} = \frac{1}{N_k}\sum_j \sigma_{w_j}^2 \text{diag}(\mathbf{x}_j \odot \mathbf{x}_j)$. To maximize the posterior distribution, we

employed an extension of Hamiltonian Monte Carlo (HMC) sampler, the No-U-Turn Sampler

(NUTS) by a software, 'stan', which was performed on R program by an R package, '*rstan*',

and used only signature gene sets for sampling, as the running time is reduced. The probabilities

of hyperparameters, α and β were set as zero-truncated standard normal distribution. In

addition, we set zero for the negative values in the sampled elements of $\mathbf{X}$. The 'stan' sampling

parameters, such as the number of iterations, max_treedepth, adapt_delta, thin, etc., were

appropriately chosen to converge well the sampled distributions. The convergence was

evaluated by R-hat values (Gelman-Rubin statistics) in all sampling variables below 1.1, which

is a generally accepted value for convergence evaluation. For the expression pattern of non-

signature genes, we set another noise parameter γ in Equation (6), instead of β and estimated

$\bar{\mathbf{x}}_k$ (the expression patterns in non-signature genes) by the following probability equation:

$$P(\bar{\mathbf{x}}_k|\mathbf{y},\bar{\mathbf{r}},\{\bar{\mathbf{x}}_l\}_{l\neq k}) \propto P(\mathbf{y}|\mathbf{X},\bar{\mathbf{r}})P(\bar{\mathbf{x}}_k) \tag{10}$$

624   where, $\bar{\mathbf{r}}$ denotes the mean values of $\mathbf{r}$ determined by the sampled distribution above.

625   Then, $P(\bar{\mathbf{x}}_k|\mathbf{y},\bar{\mathbf{r}},\{\bar{\mathbf{x}}_l\}_{l\neq k})$ follows Gaussian distribution and its mean and variance can be

626   calculated by the following equations:

$$\mathbb{E}[\bar{\mathbf{x}}_k] = (\gamma r_k^2\mathbf{I} + \Sigma_k^{-1})^{-1}\left(\gamma r_k\mathbf{y} + \Sigma_k^{-1}\boldsymbol{\mu}_k' - \gamma\sum_{l\neq k}r_k r_l\bar{\mathbf{x}}_l\right) \tag{11}$$

$$\mathrm{Var}[\bar{\mathbf{x}}_k] = \gamma r_k^2\mathbf{I} + \Sigma_k^{-1} \tag{12}$$

In the resulting $\mathbb{E}[\bar{\mathbf{x}}_k]$, all negative values were set to zero. The hyperparameter γ was set as

either of $10^{-5}, 10^{-4}, \ldots, 10^5$. The estimating calculation was recursively performed until the

root mean square error (RMSE) of $\bar{\mathbf{x}}$ between iterations gets below 1 or until at most 100 times

enough to converge, where one iteration is the estimating calculations of Equation (11) and

(12) for all k (i.e., all cell-types) and for each iteration, $\bar{\mathbf{x}}_l$ is from the prior iteration. The

optimal value of the hyperparameter γ was determined by the least RMSE between the original

whole-organ RNA-seq (i.e., $\mathbf{y}$) and the estimated one (i.e., $\bar{\mathbf{y}}$).

Selection of the optimal number of the signature genes

The optimal number (100, 300, or 500) of the signature genes were determined based on the

three criteria as follows: 1) Improvement of the Pearson correlation coefficient between the r-

woRNAseq and the syn-woRNAseq(+cWF), 2) Convergence in the deconvolution, 3) Higher

similarity to the reference cell type composition (i.e., lower RMSE). The results with the

selected optimal number of the signature genes were used in the comparisons with those

obtained by MuSiC and DWLS, and also for the analyses with the aging data and for the cWFs

analysis of the human PBMC data described below.

MuSiC and DWLS

647 MuSiC was conducted as described [26]. DWLS was performed as described [25], except that

648 a function, 'solve.QP()' (R package: '*quadprog*') was substituted by 'solve_osqp()' (R

649 package: '*osqp*') for quadratic problem solver.

Comparison of the real and virtual scRNA-seq counts of 10 organs

652 The mean counts of each cell-type in each organ were compared by Pearson correlation

653 coefficients. For the virtual scRNA-seq, the estimated mean count for each cell-type was

654 normalized to a million. For the real scRNA-seq, the mean count for each individual cell was

655 normalized to a million and averaged for each cell-type.

Analysis of differential cWFs in aging progression

The distribution of the pairwise cWF ratios was calculated for each aging-stage. The ratios of

the pairwise cWFs in each cell-type, instead of the cWFs themselves, were used as the cWFs

are relative values calculated from the normalized count datasets of the real whole-organ RNA-

seq and thus the cWFs values themselves can be used only for their comparison among the

cell-types within each organ at each aging-stage (i.e., the cWFs cannot be compared across the

aging-stages). Hence, their pairwise ratios were used for the comparisons across the aging-

stages. For each pairwise cell-type within an organ, the distribution of the cWF ratios was

calculated for all pair combinations of the consisting cells. For example, assuming that cell-

type X has 1,000 cells and cell-type Y has 500 cells with one cWF per cell, respectively, the

distribution of the ratio of cWFs of cell-type X vs. Y consisting of 500,000 values of the ratios

was calculated. When a cell-type contains zero value of cWF, we substituted the zero value for

the second minimum cWF value in the cell-type to avoid the division by zero. Next, for each

cell-types pair, we performed Mann-Whitney U-test to make statistical evaluations of the

differences of their ratio-distributions between the aging-stages (i.e., 18 mos. vs. 3 mos., 24

mos. vs. 3 mos., 24 mos. vs. 18 mos.). Zeros were generated if the resulting values were below

the lower bound of R program, 1e-308.

Machine learning prediction of the aging-stages by the differential

cWF ratios

For this analysis, we omitted the data of the cell-types pairs of which statistical analysis

described above resulted in $p \geq 0.01$ across all pairs of the aging-stages. Using the remaining

data, we performed LightGBM classifier analysis [33]. We first generated input data for

LightGBM classifier analysis using the cWF ratio distributions obtained as described in the

above section. The 100 cWF ratio distribution-values were randomly sampled for each cell-

types pair for each aging-stage. The sampled values were at random combined with each other,

resulting in the matrix of "the 100 cWFs ratio distribution values" x "the number of the cell-

type pairs" for each aging-stage. Using these matrices for all three aging-stages as the input

data, we generated a LightGBM classifier of aging-stages on Python, using the '*lightgbm*'

package [33]. The input data was divided by 8:2 into training data and test data. The training

data was used for tuning the parameters of LightGBM. The tuning was performed by the

'*optuna*' package [47], searching for the best parameters to maximize macro-F1 score.

Specifically, the searched parameters are max_depth, num_leaves, subsample, subsample_freq,

colsample_bytree, min_child_samples, ranging from 3 to 12, 2 to 256, 0.1 to 1.0, 1 to 7, 0.1 to

1.0, and 5 to 100, respectively. The model was generated using the best parameters and

evaluated using test data by accuracy, macro-Precision, macro-Recall, and macro-F1_score.

These evaluations were performed by a Python package, 's*cikit-learn*' [48]. In addition, we

also extracted feature importance based on 'gain' from the model and confirmed the high-

ranked contributors in the model (i.e., aging-stage classification).

Supporting information

S1 Fig. Reconstitution and deconvolution of the bulk human PBMC RNA-seq by the composite

scRNA-seq. **(A)** Reconstitution results with and without (no) cWFs are compared. The results with the

100, 300, 500 signature genes are shown. The similarity is shown as violin plot of the Pearson

correlation coefficients. The corresponding raw data are found in tables S6 and S7. **(B)** Bar graph

showing the cell type-ratios computed by the deconvolution method (V-scRNAseq) for each organ. The

deconvolution was performed with the cWFs computed using the optimal number of the signature genes

for each organ (indicated in the accompanying table S8). The bar graphs are composed of the cell-types

computed to be present for each organ by our method. The similarity scores (RMSE: Root Mean

Squared Errors, Pearson correlation coefficient) are indicated at the top of the bar. The corresponding

raw data of S1 Fig. are found in S6, S7, S8 Tables.

S2 Fig. Reconstitution of the whole organ RNA-seq of the aging model mouse by the composite

scRNA-seq. The results with and without (no) cWFs are compared for each aging-stage (3 mos., 18

mos. 24 mos.) for each number of the signature gens (100, 300, 500) and for each organ (Brain, Heart,

Kidney, Lung, Spleen). The similarity is shown as violin plots of the Pearson correlation coefficients.

The corresponding raw data are found in S10 Table (no cWFs) and S11 (with cWFs). The corresponding

raw data of S2 Fig. are found in S10 and S11 Tables. All supplementary tables below are available at

https://github.com/k-teji/VscRNAseq.

S1 Table (Separate file)

The raw data of Fig. 1.

S2 Table (Separate file)

The raw data of Fig. 3.

S3 Table (Separate file)

The raw data of Fig. 4.

S4 Table (Separate file)

The raw data of Fig. 5, B and C.

S5 Table (Separate file)

The raw data of Fig. 6.

S6 Table (Separate file)

The raw data of S1 Fig. (Pearson correlation coefficients for the result with no cWFs).

S7 Table (Separate file)

The raw data of S1A Fig. (Pearson correlation coefficients for the result with cWFs).

S8 Table (Separate file)

The raw data of S1B Fig. The best performing result (the lowest RMSE and the highest Pearson

correlation coefficient) shown in S1B Fig. is highlighted in light green.

S9 Table (Separate file)

The raw data of Fig. 7.

S10 Table (Separate file)

The raw data of S2 Fig. (Pearson correlation coefficients for the result with no cWFs).

S11 Table (Separate file)

The raw data of S2 Fig. (Pearson correlation coefficients for the result with cWFs).

S12 Table (Separate file)

Deconvolution of the aging-mouse whole-organ RNA-seq data. The results omitted due to the lack of the significant improvement by the cWFs in the reconstitution are highlighted in pink. The results used in the analyses shown in Figs. 7, 8, 9 (the pairwise comparisons between the two aging-stages show $p<0.01$ by U-test) are highlighted in light-green.

S13 Table (Separate file)

The raw data of Fig. 8.

S14 Table (Separate file)

The raw data of Fig. 9 (sheet 1) & Fig. 10 (sheet 2).

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KT, SK, Visualization: KT, Supervision: TNS, Writing-original draft: TNS, KT, Writing-

review & editing: TNS, KT, SK.

Completing interests: T.N.S. is the inventor of the patents filed on the cell type-specific

weighting-factors and holds shares of Karydo TherapeutiX, Inc., which owns the right to this

patent. K.T. and S.K. are also employed by Karydo TherapeutiX, Inc. Correspondence and

requests for materials should be addressed to T.N.S. (island1005@gmail.com).

Data and materials availability: The public datasets are as indicated and the raw data as

supplementary tables and the code for our algorithm are available at https://github.com/k-

teji/VscRNAseq.

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