Two-target quantitative PCR to predict library composition for shallow shotgun

sequencing

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Abstract

Shotgun sequencing enables retrieving high resolution information from complex

microbial communities. However, the technique is limited by missing information about

host-to-microbe ratios observed in different sample types. This makes it challenging to

plan sequencing experiments, especially in the context of high sample multiplexing

and/or limited sequencing output. We evaluated a qPCR-based assay to predict host-to-

microbe ratio prior to sequencing. Using a two-target assay aimed at conserved human

and bacterial genes, we predicted human-to-microbe ratios in two sample types and

validated it on independently collected samples. The assay enabled accurate prediction

for a broad range of sample compositions.

Introduction

Shotgun sequencing allows interrogation of the metagenomic composition of

ecological niches and has been increasingly utilized to characterize human-associated

microbial communities. Shallow shotgun sequencing – sequencing to a per-sample read

depth of 10^5 to 10^6 reads – provides taxonomic resolution greater than 16S amplicon

sequencing and functional characterization of metagenomes, while being less

expensive than whole genome sequencing or deep sequencing (typically 10^7 to 10^9

reads/sample) (1). However, there is a trade-off between cost and adequacy which is

especially problematic for samples of variable ratios of host to microbial DNA, where

microbial reads may be displaced by human reads in a mixed sample (2). While this is

generally not a concern for samples with high bacterial load, such as stool samples,

samples with low or variable microbial DNA relative to human DNA are common in other

regions of the body, such as the lung, nasopharynx, stomach, and duodenum (2, 3, 4,

5). Microbial taxonomic and functional analyses of metagenomic data require sufficient

reads to draw robust conclusions. The ability to predict the proportion of microbial reads

prior to sequencing would allow researchers to customize sequencing strategies for

desired analyses, while optimizing the cost and time spent on metagenomic sequencing.

In this study, we used quantitative PCR to predict the ratio of human to microbial

reads obtained from sequencing using three targets: the 16S rRNA gene, 18S rRNA

gene, and human beta-actin (ACTB) to quantitate DNA of bacterial, fungal, or human

origin, respectively (6-8). We compared the ratios of bacterial to human DNA

determined via qPCR to the percent microbial/human DNA determined via shallow

shotgun sequencing in samples with variable bacterial DNA. We derived a prediction

model from oropharyngeal swabs and stool samples, and evaluated it in a set of

independently collected samples, including rectal swabs and vaginal secretion samples.

Finally, we generated an easy-to-use tool based on qPCR data to predict sample

composition and sequencing depth required given a desired analytical outcome.

Results and Discussion

To assess the impact of shallowing sequencing depth on different bacterial DNA

proportions, we rarefied shotgun sequencing data from 4 sample types – stool,

oropharyngeal, rectal, and vaginal – to depths of 1000 to 1 million reads/sample. We

then determined the alpha diversity of each rarefaction using three metrics: richness,

Shannon index, and Berger-Parker index. Alpha diversity decreased in a sample type-

specific manner as sequencing depth decreased (**Fig. 1**). Notably, while vaginal

samples have the lowest alpha diversity in all three metrics of the four sample types,

alpha diversity decreased at the slowest rate as sequencing depth decreased (**Fig. 1**).

Conversely, while rectal swab samples had similar Shannon index and Berger-Parker

index values at 10^6 microbial reads to oropharyngeal and stool samples, alpha diversity

in rectal samples diminished at a greater rate as sequencing depth decreased (**Fig. 1B-**

C). Since this effect is sample type-specific, it is critical to predict sample composition *a*

priori to ensure sufficient reads for the desired analysis for the given sample type.

qPCR is a widespread and robust technique available in many molecular biology

laboratories. Its availability as well as cheap associated costs, especially compared to

experiments involving high-throughput sequencing techniques, makes it an ideal

candidate to use to predict sample composition prior to sequencing. In this study, we

assessed the potential of qPCR to predict sample-specific ratios of human to microbe

DNA using different amplification targets. Using a multivariate approach, 5 models were

generated mapping 16S rRNA gene, 18S rRNA gene, and human beta-actin (ACTB)

qPCR-derived cycle thresholds (Ct) to observed percentage of microbial reads for a

sample set consisting of oropharyngeal swabs and stool samples. Microbial reads were

defined as any read which did not align/match with a human genome reference. The

following models were tested: (A) a linear fit using 16S rRNA gene and ACTB Ct values,

(B) a linear fit using 16S rRNA gene, 18S rRNA gene, and ACTB Ct values, (C) a linear

fit using logit transformed 16S rRNA gene and ACTB Ct values, (D) a linear fit using

logit transformed 16S rRNA gene, 18S rRNA gene, and ACTB Ct values, and (E) a

nonlinear regression model based on the logistic growth equation using 16S rRNA gene

and ACTB Ct values (**Supplementary figure 1A**). We compared goodness-of-fit for

each model and observed R^2-values of 0.880, 0.880, 0.920, 0.920, and 0.990 for

models A – E, respectively (**Figure 2A, Supplementary figure 1A**). Observed residuals

had a min-max range of 67.56, 68.50, 58.93, 59.07, and 42.61 for models A – E,

respectively (**Supplementary figure A**). Based on these findings, model E turned out to

be the best fitting model to predict sample composition using qPCR, with an equation

of % microbial reads = (2.7201549)/((99.50267)*e^(-0.7218*(ACTB-16S))+ 0.02733). In

addition, 18S rRNA Ct value was not found to be an informative predictor and was

hence removed from the model. In **Figure 2B**, we show the goodness-of-fit and

residuals observed with model E across the range of qPCR differences (-8.16% to

+34.45%). We observed homogeneous fit and variance indicating that the model

performs well for all observed host to microbe DNA ratios. However, we also observed

that the model loses accuracy at each end of the range due to the s initial dataset used

and sigmoidal curve generated, with limits approximately at 4% and 98%. This bias is

likely introduced at different steps of the process. For instance, sequencing error, and

resulting false negative and positive hits when mapping reads to the human database

are likely to account for this bias. Another potential source of bias could be introduced

by the carryover of contaminants between sequencing runs, hence resulting in a

composition change which is not picked up by the qPCR conducted *a priori*.

Using the equation derived from model E, we evaluated our approach on two different,

independently collected sample types including vaginal secretions and rectal swabs. In

Fig 2C, we show the relation between observed microbial reads percentages and the

difference in Ct between 16S and ACTB qPCR, derived from our validation dataset,

alongside a curve of expected values derived from model E. We observed the

difference between predicted and observed microbial reads percentages to range from -

18.80% to +19.22% with a mean of +0.944% (**Supplementary figure 1B**). In **Fig 2D**,

we show that this difference is consistent across the range of observed % microbial

reads. Compared to the other models, model E best described the validation dataset,

with a median difference of 0.25% and a standard deviation of 9.10% **(Supplementary**

table 1B). For comparison, model E described the initial sample set of

oropharyngeal/stool samples with a median difference of 0.14% and a standard

deviation of 4.35% **(Supplementary table 1A).** Since the model performed similarly

between the two datasets, we concluded that the model was able to describe a relation

between 16S and β-actin qPCR and shotgun sequencing metagenomic data in a

sample type-independent manner for microbial densities between 4% and 98%.We then

developed a tool based on our model and the rarefaction curves on different samples

type which predicts % microbial reads based on qPCR data and suggests a target

number of reads based on sample type and desired analysis **(Supplementary).**

The limitations of our study are as follows: The samples used in our study were low in

fungal content. Therefore, our model may not accurately predict microbial content in

sample sets where the majority of samples are rich in fungal content.

Moreover, as our results are based on protocols using specific reagents and

technologies for both sequencing and qPCR, our tool may not accurately predict

sequencing results when protocols, reagents, and/or technologies differ. However,

given that we have established a robust link among 16S qPCR, B-actin qPCR, and

sample content by sequencing, our approach can be easily adapted to fit different

experimental settings.

Conclusion

We have shown that shallowing shotgun sequencing depth can reduce measured alpha

diversity in all measured sample types, with more diverse communities being more

strongly negatively affected. We found that qPCR can function as a predictive tool for

sample composition that was strongly correlated with shotgun sequencing data. We

were able to create a model that can describe and predict variable sample types. We

hope that our tool and methodology may help fellow researchers screen for

sequenceable samples or allow for better optimization of sequencing.

Methods

qPCR

Samples were probed separately for the 16S rRNA gene, the 18S rRNA gene, and the

human β-actin gene. All reactions were conducted in duplicate and RNase-free water

was used as negative control. Each well contained 2 μL of sample DNA, 5 μL of

Taqman Universal PCR mix (Applied Biosystems, Foster City, CA), 0.3 μM of forward

primer, 0.3 μM of reverse primer, and 0.2 μM of primer probe. PCR was performed on a

QuantStudio 6 Flex (Thermo Fisher Scientific, Waltham, MA) platform. Cycling was

done as follows: 10 minutes at 95ºC followed by 45 cycles of 95ºC for 15 seconds and

60ºC for 1 minute.

For 16S qPCR, we used forward primer "TCCTACGGGAGGCAGCAGT" (Invitrogen,

Carlsbad, CA) and reverse primer "GGACTACCAGGGTATCTAATCCTGTT" (Invitrogen,

Carlsbad, CA).(3) We used a FAM probe "CGTATTACCGCGGCTGCTGGCAC" with

NFQ-MGB quencher (Applied Biosystems, Foster City, CA).(3)

For 18S qPCR, we used forward primer "GGRAAACTCACCAGGTCCAG" (Integrated

DNA Technologies, Coralville, IA) and reverse primer "GSWCTATCCCCAKCACGA"

(Integrated DNA Technologies, Coralville, IA).(1) We used a FAM probe

"TGGTGCATGGCCGTT" with NFQ-MGB quencher (Applied Biosystems, Foster City,

CA).(7)

For human qPCR, we used a β-actin gene specific forward primer

"CGGCCTTGGAGTGTGTATTAAGTA" (Invitrogen, Carlsbad, CA) and reverse primer

"TGCAAAGAACACGGCTAAGTGT" (Invitrogen, Carlsbad, CA).(5) We used a VIC

probe "TCTGAACAGACTCCCCATCCCAAGACC" with 3QSY quencher (Applied

Biosystems, Foster City, CA).(8)

Library preparation and sequencing

Libraries were prepared using Nextera Flex (Illumina, San Diego, CA) kits with the

Nextera XT indices (Illumina, San Diego, CA). Barcoded sample libraries were pooled

together to a concentration of 17.6 ng/ul which measured with a high-sensitivity DNA

assay on a Qubit (Thermo Fisher Scientific, Waltham, MA) platform. A Mid-output

reagent kit (Illumina, San Diego, CA) was used to sequence on the Miniseq, while a SP

reagent kit (Illumina, San Diego, CA) was used on the Novaseq platform, both in

2x150bp mode.

Read filtering and Taxonomic profiling

We filtered human reads from non-human reads using KneadData based on a human

genome index for Bowtie 2 (9, 10). We considered sequence reads that did not match

the database as microbial reads in our analyses. Taxonomic annotation was conducted

using MetaPhlAn 2.0 and the ChocoPhlAn database (11). Rarefactions were performed

using seqtk-1.3 to subsample the microbial reads of individual samples (12). Subsample

compositions will be identified using MetaPhlAn2, and OTU tables were generated (11).

Diversity indexes were calculated using Past 4 (13).

Model generation

We used XLSTAT version 2019.4.2 (Addinsoft Inc., New York, NY) to generate

multivariate linear regressions using either 16S and ACTB qPCR cycle and microbial

reads percentages (Models A and C) or 16S, 18S, and ACTB qPCR cycle thresholds

and microbial reads percentages (Models B and D). Multivariate linear regressions

(models C and D) were also performed following a logit transformation of microbial

reads percentages. Finally, for model E, we generated the non-linear regression model

using the logistic growth equation in GraphPad Prism version 8.3.0 for Windows

(GraphPad Software, San Diego, CA).

Figures

Figure 1. Alpha diversity indices are shown across a range of simulated

sequencing depths from 1E3 to 1E6 reads per sample. (A) Sample-specific

rarefaction curves of species richness. (B) Shannon index calculated across a range of

rarefactions, by sample type. (C) Sample dominance, measured with the Berger-Parker

index, across a range of sequencing depths, stratified by sample type.

Figure 2. Statistical model to predict sample composition using qPCR prior to

high-throughput sequencing (A) Sigmoidal model generated from oropharyngeal

swabs and stool samples depicting the relationship between the difference of human

(ACTB) and bacterial (16S) qPCR values (Ct) with the percentage of microbial reads (R^2

=0.990). Nonlinear regression line (solid) is based on the following logistic growth

equation: % microbial reads = (2.7201549)/((99.50267)*e^(-0.7218*(ACTB-16S))+

0.02733). One-tailed 95% prediction interval is depicted with a dotted line. **(B)** Model

residuals. **(C)** Fitting of validation sample set on prediction model. The orange dots

represent values derived from a validation sample set composed of vaginal secretions

and rectal swabs samples and correlate well (R^2 = 0.930) with the prediction model

(solid black line). **(D)** Difference between expected and observed composition across

the range of microbial content.

Supplementary Figure 1. (1A) Residuals for 5 multivariate models generated using a

sample set comprised of oropharyngeal swabs and stool samples. i) Model A

represents a linear fit taking into account microbial and human-derived qPCR values; ii)

model B represents a linear fit taking into account microbial, fungal, and human-derived

qPCR values; iii) model C represents a linear fit taking into account microbial and

human-derived qPCR values after a logit transform of the data; iv) model D represents a

linear fit taking into account microbial, fungal, and human-derived qPCR values after a

logit transform of the data; and v) model E represents a nonlinear regression model

based on the logistic growth equation taking into account microbial and human-derived

qPCR values. Error bars depict 1 standard deviation centered around the mean. **(1B)**

Difference between observed and predicted percentage of microbial reads, by model,

using a validation dataset comprised of independently collected rectal swabs and

vaginal secretion samples.

Supplementary Table 1. (1A) Table summarizing residual values and model type of

the 5 statistical models (A-E) tested in this study. **(1B)** Residual values of the 5 models

when applied to an independent, validation dataset.

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(A)

R² = 0.990

(B)

(C)

R² = 0.930

(D)