**Comprehensively characterizing evolutionarily conserved differential dosage**

**compensations of the X chromosome during development and in diseases**

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## Abstract

The active X chromosome in mammals is upregulated to balance its dosage to autosomes

during evolution. However, it is elusive why the currently known dosage compensation

machinery showed uneven and small influence on X genes, necessitating systemic

investigation of X dosage in different angles and identification of new dosage regulators.

Here, based on >20,000 transcriptomes, we identified two X gene groups (genome ploidy-

sensitive [PSX] and ploidy-insensitive [PIX] genes), showing distinct but evolutionarily-

conserved (in both primates and mouse) dosage compensations (termed X-over-Autosome

dosage Ratio, or XAR). We then explored XAR in diseases and in stem cells, where XAR is

potentially important. We demonstrated that XAR-PIX was downregulated while XAR-PSX

upregulated across cancer types at both RNA and protein levels. In contrast, XAR-PIX was

upregulated while XAR-PSX downregulated during stem cell differentiation. Interestingly,

XAR-PIX, but not XAR-PSX, was significantly lower and associated with autoantibodies and

inflammation in lupus patients, suggesting that insufficient dosage of PIX genes may

contribute to lupus pathogenesis. We further identified and experimentally validated two

new XAR regulators, *TP53* and *ATRX*. Collectively, we provided insights to further unravel

the mystery of X dosage compensation in mammals and its pathophysiological roles in

human diseases.

## Introduction

In mammals, females have two X chromosomes while males have only one and females

evolved to silence one copy of X to match the single X copy in males, a phenomenon called X

chromosome inactivation (XCI) (Disteche 2012) with exceptions of escaping genes (Dunford,

et al. 2017). Initiated early in female embryo development, XCI is essentially stable for life

after complete (Vallot, et al. 2016). To balance the dosage between the single active X

chromosome and other autosomes with two active copies, both sexes evolved to upregulate

the active X chromosome (Disteche 2012; Deng, et al. 2013; Larsson, et al. 2019), although

with controversies (Xiong, et al. 2010; Julien, et al. 2012).

Meanwhile, some possible mechanisms underlying X upregulation in mammals were

revealed, mainly through epigenetic regulation, including transcription elongation and

initiation enhancement and RNA stability improvement (Deng, et al. 2013). Expectedly,

*KAT8* (lysine acetyltransferase 8, also known as *MOF* or *MYST1*), *MSL1* (male-specific lethal 1

homolog), and *MSL2*, whose homologs are responsible for X upregulation in Drosophila,

were found to behave similarly in mammals and regulate histone acetylation to enhance

transcription preferably on X chromosome (Deng, et al. 2013). However, it is intriguing that

*KAT8* affected X genes unevenly and only a small percentage of X genes showed

considerable effect sizes.

Recently, using published single-cell RNA sequencing datasets, Larsson and colleagues

reported that the frequency of transcriptional bursts was the driving force behind X

upregulation in mouse, and they proposed that trans-acting enhancer-binding regulators

may be the underlying factor behind the higher transcriptional burst frequency of X

chromosome (Larsson, et al. 2019). However, these factors were unknown and the

hypothesis of enhancer factors in X upregulation was not verified.

*TP53* is a highly-conserved gene important for various stress responses (Lu, et al. 2009). It

was reported to interact with key MSL components, *KAT8* and *MSL2* (Kruse and Gu 2009; Li,

et al. 2009). The p53 binding sites (Nguyen, et al. 2018) in *KAT8* (one site in promoter) and

*MSL2* (three sites in promoter) indicate direct regulation of *KAT8* and *MSL2* transcription by

p53. ATRX, an X-linked telomere-associating protein studied by our team (He, et al. 2015; Hu,

et al. 2016), is a chromatin remodeler that functions in genome stabilization and

heterochromatin formation (Dyer, et al. 2017; Teng, et al. 2021). ATRX works with XIST and

PRC2 to remodel chromatins (Ren, et al. 2020) and ATRX loss can affect X inactivation in

embryonic trophoblast (Garrick, et al. 2006). Importantly, it has been reported that TP53

and ATRX (also known as RAD54) physically interact with each other (Linke, et al. 2003) and

work together in the same pathway (Seah, et al. 2008; Oppel, et al. 2019; Gulve, et al. 2022).

Both genes are involved in genome-wide histone modifications (Allison and Milner 2004;

Dyer, et al. 2017), thus capable of regulating a large number of genes. We therefore

hypothesized that TP53 and ATRX probably regulate X dosage compensation.

Interestingly, *TP53* mutations contributed to the sex discrepancy of cancer incidences by

differentially regulating X-linked genes between two sexes (Haupt, et al. 2019). Notably,

*TP53* mutations are the most frequent events across all cancers (Hainaut and Pfeifer 2016),

and more than 91% of tumors with *TP53* mutations show functional loss of both *TP53* copies

(Donehower, et al. 2019). p53 is also implicated in immune regulation of autoimmune

diseases (Munoz-Fontela, et al. 2016). On the other hand, X-linked genes have been

implicated in many diseases, including cancer (Haupt, et al. 2019) and autoimmune diseases

like systemic lupus erythematosus (SLE) (Hewagama, et al. 2013). Abnormal X dosage has

also been reported in both cancer and SLE (Pageau, et al. 2007; Syrett, et al. 2019). For

example, X upregulation has been contributed to the loss of Barr body (the inactivated X

chromosome) in breast and ovarian cancers. X dosage also plays an important role in cancer

initiation, because excessive X upregulation by somatic X reactivation under chronic stress

leads to cancer (Yang, et al. 2020).  However, the dynamics of X-over-autosome dosage

ratios (XAR) remain to be studied systematically across cancers, which accumulates a large

number of high-throughput sequencing datasets, for example, The Cancer Genome Atlas

(TCGA) (Davoli, et al. 2013). More importantly, large numbers of cancer mutations and

genome-wide expression profiles from TCGA have the potential to reveal new regulators of

XAR, including both protein-coding and long noncoding RNA (lncRNA) genes, to uncover the

elusive mechanism of dosage compensation in humans. However, these possibilities have

not been explored yet.

In this work, we identified two distinct groups of genes (PIX and PSX) on X chromosome and

characterized their dosage compensations in about 20,000 RNA sequencing (RNA-Seq)

samples from TCGA and the Genotype-Tissue Expression (GTEx) project (GTEx-Consortium

2013), and thousands of proteomic samples from Clinical Proteomic Tumor Analysis

Consortium (CPTAC). We provided a systemic view of both XAR-PIX and XAR-PSX in human.

We showed that the differential dosage between PIX and PSX genes were evolutionarily

conserved. Interestingly, XAR-PIX and XAR-PSX were affected differently in sex-biased

diseases and during stem cell differentiation which is closely linked with XCI (Hall, et al.

2008). Lastly, we identified and experimentally validated two new XAR regulators, *TP53* and

*ATRX*. In summary, our work contributed to better understanding of X dosage compensation

under different conditions.

**Results**

**Two groups of X chromosome genes with distinct sensitivities to genome ploidy**

We are interested in which genes on X chromosome require less dosage compensation,

since only a subset of X chromosome genes were affected after *KAT8* knockdown (Deng, et

al. 2013). To this end, we examined X chromosome gene sensitivities to genome ploidy,

defined by the absolute Pearson's correlation coefficients between protein-coding gene

expression levels (n=615 X chromosome genes and n=16,622 autosome genes remained,

**Table S1**) with genome ploidies of cancer samples from TCGA. Based on the approximately

normal distribution of these correlations, we identified two groups of X chromosome genes,

termed ploidy-sensitive X chromosome (PSX) genes, and ploidy-insensitive X chromosome

(PIX) genes (see **Methods**), separated by the mean of the correlation distribution (**Fig. 1A**).

As expected, PSX and PIX genes showed distinct expression distribution. PSX genes (n=286,

**Table S1**) had highly similar expression pattern to autosome genes (**Fig. 1B**), while PIX genes

(n=329, **Table S1**) had much lower expression levels, with a median of about 2/3 of PSX

genes expression (**Fig. 1C**). Of note, no preference for genes escaping X inactivation was

observed in PSX or PIX. Interestingly, we found three PIX-specific gene clusters on X

chromosome, compared to PSX genes (**Fig. 1D**). The PIX cluster located at around 100Mb

(hg38) contained eight out of nine Transcription Elongation Factor A Protein-Like (TCEAL)

genes, encoding nuclear phosphoproteins.

**Different features and regulation of PIX and PSX genes**

The distinct expression pattern between PIX and PSX genes prompted us to explore their

differential genomic features. First, we found that the lengths (excluding introns) of PIX

genes spanned a large range from 2kb to 8kb, while lengths of PSX genes peaked at around

4kb (**Fig. 1E**). This trend was similar when including introns (**Fig. S1A**). Although GC content

of mRNAs is critical for their storage and decay (Courel, et al. 2019), we found similar GC

content between PIX and PSX genes (**Fig. S1B**). Moreover, we observed lower conservation

of PIX genes than PSX genes (**Fig. 1F**), which resembled the faster-X effect in non-coding

regions on X chromosome (Meisel and Connallon 2013). RNA half-lives were reported to be

longer for X-linked than autosomal genes (Deng, et al. 2013). Inspired by this, we examined

the mRNA half-lives of PIX and PSX genes and found that PIX (4.9h) tended to have shorter

mRNA half-lives than PSX genes (6.6h) (**Fig. 1G**), consistent with lower expression levels of

PIX than PSX genes.

**Evolutionally conserved differential dosage compensation between PIX and PSX genes**

Based on these two groups of X chromosome genes (PIX and PSX), we calculated two

dosage ratios of X chromosome over autosome (XAR, see **Methods**) to evaluate their dosage

compensation, termed XAR-PIX and XAR-PSX, respectively. As expected, XAR-PSX dosages

were around one across GTEx tissues (**Fig. 2A**), but mostly above one across TCGA cancer

types (**Fig. 2B**). In contrast, XAR-PIX dosages were much lower than XAR-PSX and fluctuated

around 0.6 both across GTEx tissues and across TCGA cancer types. Furthermore, the

difference between XAR-PIX and XAR-PSX was also observed in non-human primates (**Fig.

S2A**) and mouse (**Fig. S2B**) across tissues, except for the brain. It suggests that PIX and PSX

gene classification and their dosage compensation are evolutionally conserved.

Variations in TCGA cancers were generally larger than GTEx tissues for both XAR-PSX and

XAR-PIX, reflecting abnormal dosage regulation across cancers. Surprisingly, across TCGA

cancer types, we observed that XAR-PSX dosages were significantly increased (**Fig. 2C**), while

XAR-PIX showed the opposite trend (**Fig. 2D**), compared to normal tissues from GTEx.

Moreover, most magnitudes of changes (or effect sizes) of both XAR-PSX and XAR-PIX were

moderate to large, as indicated by the Cohen's D statistics. Of note, most tissues or cancer

types showed no XAR difference between males and females, especially for XAR-PIX (**Fig.

S3A-D**), which suggests that the possibility of XAR-PSX upregulation due to reactivation of

the inactivated X in females (Chaligne, et al. 2015) can be excluded. Accordingly, when

investigating proteomic data generated by mass spectrometry, the opposite trend between

XAR-PIX and XAR-PSX was also observed when we compared primary tumors with normal

tissue samples in CPTAC **(Fig. S2C-D)**.

**168** **XAR-PSX and XAR-PIX were differentially associated with stemness**

**169**

**170** It is well-known that XAR of stem cells changes dramatically during epigenetic

**171** reprogramming of early embryo development. On the other hand, increased stemness is an

**172** important feature or cancer cells (Malta, et al. 2018). We thus examined the relationship

**173** between XAR and stemness in cancer. We observed mostly positive correlations with cancer

**174** stemness for XAR-PSX, but mostly negative correlations for XAR-PIX, across cancer types (**Fig.**

**175** **3A**). We further examined XAR in embryonic stem cells (ESC) and induced pluripotent stem

**176** cells (iPSC) using gene expression data from the Progenitor Cell Biology Consortium (PCBC).

**177** As expected, we found no difference between ESC and iPSC, for both XAR-PIX and XAR-PSX

**178** (**Fig. 3B**), probably because ESC and iPSC had similar expression pattern (Bock, et al. 2011).

**179** However, we found much lower XAR-PIX and XAR-PSX in male than in female iPSC (**Fig. 3C**),

**180** but the signals of sex difference in ESC were weak.

**181**

**182** We noticed that XAR-PSX was between 1.1 to 1.2 in both ESCs and iPSCs, although ESCs and

**183** some iPSCs have two active X chromosomes (Bar, et al. 2019). This may be related to early

**184** embryonic development, during which XAR-PSX has peaked (as expected, close to 1.9 in

**185** female and 1.4 in male) at embryo day 4 (E4) and decreased dramatically to be equal in both

**186** sexes (around 1.2) (**Fig. 3D**), which was consistent with our observations of XAR-PSX in ESC

**187** and iPSC cell lines.

**188**

**189** We further examined XAR dynamics during iPSC differentiation culturing. Interestingly, we

**190** found that XAR-PSX was reduced along iPSC culturing time (**Fig. 3E**), but XAR-PIX showed the

opposite trend (**Fig. 3F**), in both human and mouse. These patterns were consistent with

overall reduction of XAR-PIX and elevation of XAR-PSX across cancer types above.

**Insufficient PIX gene dosage in autoimmune patients**

Both altered X-inactivation and X-linked risk genes were associated with SLE, we thus

investigated which type of XAR (XAR-PIX or XAR-PSX) was dysregulated in SLE. By

reanalyzing a previous dataset from SLE patients and healthy controls (Hung, et al. 2015),

we found that XAR-PIX, but not XAR-PSX, were specifically down-regulated in SLE patients

compared with healthy controls (**Fig. 4A**), which means insufficient dosage of X genes in SLE

patients. Moreover, SLE patients with anti-Ro autoantibodies showed lower XAR-PIX dosage

than those without anti-Ro autoantibodies (**Fig. 4B**). Similarly, SLE patients with more active

interferon response (indicated by the Interferon Signature Metric, or ISM) showed lower

XAR-PIX dosage (**Fig. 4C**). These findings may provide insights to understand SLE

pathogenesis.

**TP53 and ATRX are new regulators of X dosage compensation**

We found that only about 8.8% (29/329) and 10.5% (30/286) of PIX and PSX genes showed

expression changes of more than 1.2-fold after knockdown of the key MSL component *KAT8*

in mouse (Deng, et al. 2013). To identify new regulators of XAR, we examined TCGA

mutation spectrums that may be associated with XAR in each cancer type. We reasoned

that mutated XAR regulators should result in differential XAR compared with wildtype

regulators. In total, we obtained 209 and 515 potential regulators (FDR < 0.5) for XAR-PIX

and XAR-PSX in male tumors, respectively (**Fig. 5A, Fig. S4A**). For the top 200 regulators,

gene ontology (GO) analysis was performed and similar GO terms were found for XAR-PIX

and XAR-PSX regulators, mainly about post-translational modifications, including histone

methylation, peptidyl-lysine methylation, and protein methylation (**Fig. S4B-C**).

Among the potentially new regulators of XAR, we found that *TP53* and *ATRX* were promising

regulators for XAR-PIX in both males and females (**Fig. 5A, Fig. S4D**), based on previous

literatures mentioned above. They are both genome-wide chromatin remodelers, capable of

regulating a large number of genes. We chose them for further investigation also for the

following two reasons. We found that the top 200 XAR-PIX dependent genes formed a PPI

network mostly centered on TP53 and ATRX (**Fig. S5**). TP53 was also a center node in the PPI

network (**Fig. S4E**) with RNA-binding proteins (RBPs) associated with XAR-associated

lncRNAs (**Supplementary Results, Fig. S4F, Table S2**).

Next, we constructed *TP53*-knockout (*TP53*-KO) cells from two *TP53*-wildtype (*TP53*-WT) cell

lines, one male (HT1080) and one female (MCF7, containing three active X and no inactive X

chromosomes (Sirchia, et al. 2005)), by using CRISPR technologies (**Fig. S4G**, see **Methods**),

followed by RNA-seq. We observed XAR-PIX increase after *TP53*-KO in both sexes (**Fig. 5B**

and **Fig. 5C**), in contrast to the unchanged XAR-PSX (**Fig. 5D** and **Fig. 5E**). We further

demonstrated that *TP53* may partly regulate XAR-PIX by repressing KAT8, since *TP53*-KO

enhanced *KAT8* expression in both sexes (**Fig. 5F**). *TP53*-KO had a larger effect in female cells

(8% vs. 6% increase of XAR-PIX) than male cells, which may due to MCF7 cells containing

three active X chromosomes and *TP53* affected *MSL1* in female cells only.

Finally, we examined the role of ATRX in XAR. We investigated XAR before and after *ATRX*

knockout in two studies. Interestingly, ATRX-KO reduced both XAR-PIX and XAR-PSX in

mouse iPSCs (**Fig. 5G**) and GBM cells (**Fig. 5H**). Similarly, we examined MSL expression

changes after ATRX-KO, we observed consistent down-regulation of both MSL1 and MSL2 in

either GBM or iPSC cells in mice, although KAT8 was found up-regulated in mouse iPSC cells

while it was unchanged in GBM cells (**Fig. S6A**). To further support *ATRX* as a new regulator

of XAR, we examined whether X-linked genes are more sensitive to the change of *ATRX*

expression. For autosomal and X-linked genes co-expressed with *ATRX*, we compared their

coefficient estimates of *ATRX* expression by linear regression models. We reasoned that

larger absolute values of ATRX coefficients indicate higher impact on gene expression. As a

result, *ATRX* regression coefficients were significantly higher in X-linked genes than in

autosomal genes across a variety of tumors, at both mRNA (**Fig. S6B**) and protein level (**Fig.**

**S6C**).

**Discussions**

Here, we identified and comprehensively characterized two distinct groups of genes on the

X chromosome. Integrating large-scale sequencing data from both cancer and normal

samples greatly enhanced our ability to investigate both pathological and physiological roles

of XAR. Our findings may help resolve XAR controversies described in our previous study

(Xiong, et al. 2010). We summarized our findings in **Figure 6**. Our results showed that

dosages of PIX and PSX genes were converging during stem cell differentiation but diverging

in cancer cells. However, in SLE patients, only dosages of PIX genes, but not PSX genes, were

down-regulated compared to healthy individuals. Finally, TP53 and ATRX were identified

and validated as two XAR regulators.

Although most genes from the TCEAL family, located within one of PIX gene clusters, were

not intensively studied, most reports suggested that they acted as tumor suppressors,

especially for *TCEAL7* (Lafferty-Whyte, et al. 2010; Yue, et al. 2019). For these tumor

suppressors, lower sensitivity to dosage may protect both males and females from cancer

equally. Interestingly, the chrX region around 100Mb showed the lowest expression level

after zygote genome activation (ZGA) at E4 during embryo implantation (Petropoulos, et al.

2016).

Of note, *TP53* mRNA itself is a critical regulator of cellular stress (Haronikova, et al. 2019). A

previous study found that the deadenylase poly(A)-specific ribonuclease (PARN) destabilized

*TP53* mRNA while p53 increase activated PARN (Devany, et al. 2013), indicating a negative

feedback loop between *TP53* mRNA and p53 protein levels. We observed that *TP53* mRNA

was universally up-regulated in cancer samples, compared with non-cancerous samples,

across cancer types (**Fig. S7**). Moreover, XAR-PIX was lower in tumors than non-cancerous

samples across cancer types. These results were consistent with observations that p53

mutations (or higher *TP53* mRNA) were associated with lower XAR-PIX in cancer and *TP53*-

KO resulted in XAR-PIX increase.

The frequency of transcriptional bursts and possible trans-acting enhancer-binding

regulators were proposed to be the driving force behind X upregulation in mouse (Larsson,

et al. 2019). Interestingly, p53 can bind pervasively to genome-wide enhancers (Younger

and Rinn 2017) and regulate the transcriptional burst of target genes (Friedrich, et al. 2019),

further supporting our finding of *TP53* regulating XAR. Moreover, the crosstalk between

*TP53* and nonsense-mediated decay (NMD) pathway may contribute to XAR regulation by

*TP53* (Gewandter, et al. 2011; Deng, et al. 2013). Therefore, *TP53* may regulate XAR by

various mechanisms. We expect XAR regulation by *TP53* would be conserved among

mammals, due to ultra-conservation of *TP53* during evolution (Lu, et al. 2009). However,

further efforts are needed to support our hypothesis.

XAR in most cancers showed no difference between sexes, suggesting negligible

contribution to XAR changes in cancer by reactivation of the inactivated X in females. Since

*TP53* mutation-induced aneuploidies were not specific to X chromosome, they were unlikely

to drive both XAR-PSX and XAR-PIX to change in such a coordinated way across cancers, as

observed in this study. At least, XAR-PIX should be less affected by aneuploidies, by PIX

definition.

Several limitations of this study represent directions for future research. First, it is unknown

how distinct dosages of PIX and PSX genes were maintained and why did they show

divergent trends in cancers compared to normal tissues. Second, despite the high cost and

long period of CRISPR-based *TP53*-KO experiments, it would further solidify our conclusion if

CRISPR-mediated *TP53*-KO can be established in more cell lines of different lineages. Third,

additional XAR regulators remain to be identified by other ways, because this analysis was

limited by mutation frequencies in cancer patients. Genome-wide screening experiments in

the future probably will identify more XAR regulators. Until then, the problem of abnormal

XAR-PIX and XAR-PSX in cancer may be solved.

**Materials and Methods**

**Datasets**

Gene expression levels (transcripts per million, or TPM) and related clinical information of RNA-seq samples from The Cancer Genome Atlas project (TCGA, https://portal.gdc.cancer.gov) and the Genotype-Tissue Expression project (GTEx, https://www.gtexportal.org), processed by the same computational pipeline, were obtained from the UCSC Xena database (https://xenabrowser.net) (Goldman, et al. 2020). For GTEx, tissues with less than 30 samples were excluded. Gene expression levels of cell lines sequenced by the Progenitor Cell Biology Consortium (PCBC) (Salomonis, et al. 2016) were downloaded from Synapse (https://www.synapse.org/#!Synapse:syn1773109/wiki/54962). Gene expression levels of ESCs during differentiation culturing for both human and mouse were downloaded from (Barry, et al. 2017). Somatic mutations for TCGA tumor samples were obtained the GDC Portal (https://portal.gdc.cancer.gov). Genome ploidy information for TCGA samples were downloaded from (Taylor, et al. 2018). Cancer stemness of TCGA samples were obtained from (Malta, et al. 2018). Processed single-cell RNA sequencing data for embryonic stem cells during preimplantation were downloaded from (Petropoulos, et al. 2016). Gene expression levels of SLE RNA-seq data were obtained from (Hung, et al. 2015). Half-life data of mRNAs were obtained from (Tani, et al. 2012). Our RNA-seq data for *TP53*-WT and *TP53*-KO cell lines (MCF7 and HT1080) from this study were deposited in the SRA database (PRJNA777384). Tissue-specific gene expression levels (Read counts) for non-human primates were downloaded from NHPRTR (http://nhprtr.org/) (Peng, et al. 2015). Gene expression levels (Fragments Per Kilobase of transcript per Million mapped reads, or FPKM) for the standard mouse strain, C57BL/6JJcl were collected from (Li, et al. 2017). Quantitative proteomic expression levels (TMT ratios) for tumors were obtained from CPTAC (https://pdc.cancer.gov/pdc/), covering data from 11 studies (PDC000120,

PDC000116, PDC000110, PDC000127, PDC000204, PDC000221, PDC000153, PDC000234,

PDC000270, PDC000125 and PDC000198). RNA-seq data for mouse ATRX knockout cell lines

were collected from Gene Expression Omnibus (GEO, https://www.ncbi.nlm.nih.gov/geo/),

including datasets GSE178113 (Qin, et al. 2022) and GSE107878 (Deneault, et al. 2018).

LncRNA expression profiles for GTEx and TCGA samples were downloaded from RefLnc

([http://reflnc.gao-lab.org/](http://reflnc.gao-lab.org/)) (Jiang, et al. 2019).

**Defining PIX, PSX, and autosomal genes for dosage compensation estimation**

For both X chromosome and autosomes, only protein-coding genes were considered and

those with median expression levels TPM<=1 in GTEx samples were further excluded. For

the remaining X chromosome genes, Pearson correlations (R) between gene expression and

genome ploidy (Taylor, et al. 2018) were calculated in each cancer (except CHOL, DLBC, UCS,

KICH, and BRCA) separately from TCGA, using only male samples to avoid the confounding

of possible reactivation of the inactivated X in female samples. Then, the median of absolute

R (absR) was calculated for each gene and the average of these absR medians (MR) was

determined for these genes. Lastly, X chromosome genes with absR medians less or higher

than MR were defined as PIX and PSX genes, respectively. Remaining PIX, PSX, and

autosome genes were used for XAR-PIX and XAR-PSX calculation.

**Comparison of genomic features for PIX and PSX genes**

Gene lengths were calculated for each gene either including or excluding introns, based on

GENCODE v25 (Harrow, et al. 2012). PhastCons100way scores were downloaded from the

UCSC Genome Browser (https://hgdownload.soe.ucsc.edu/downloads.html) and gene

conservation were calculated by averaging phastCons100way scores within exonic regions.

GC content for each gene were calculated from its mRNA sequence as the percentage of G

and C bases.

**362   Calculation of XAR-PSX and XAR-PIX**

First, median expression levels of PSX, PIX, and autosomal genes were calculated. Then,

XAR-PSX or XAR-PIX were defined as the ratio of PSX or PIX median over autosomal median,

instead of the mean (Xiong, et al. 2010). The magnitude (Cohen's D) of XAR difference

between TCGA and GTEx was estimated by the function cohens_d from the R package

rstatix (v0.6). For non-human species, genes were classified according to their homologous

gene categories (PSX, PIX or autosomal genes) in humans, and then XAR-PSX and XAR-PIX

were calculated as above, based on their processed gene expression levels (TPM). For

proteomic expression levels, TMT ratios were used to calculate XAR, while XAR-PSX and

XAR-PIX were compared between primary tumors and solid tissue normal samples.

**373   Association of XAR with somatic mutations**

Damaging   mutations   were   defined   as   Missense_Mutation,   Nonsense_Mutation,

Nonstop_Mutation,  Splice_Region,  Splice_Site,  Translation_Start_Site,  Frame_Shift_Del,

Frame_Shift_Ins, In_Frame_Ins, or In_Frame_Del. For each gene, samples were grouped by

whether having damaging mutations in each cancer for each gender. Genes with less than

20 damaging mutations were not considered. XAR between these two groups were

compared using two-sided $t$-test and $P$-values were corrected using false discovery rate

(FDR).

**382   Gene ontology analysis**

GO enrichment analyses were performed using R package clusterProfiler (v4.2.2). Enriched

biological processes were identified by right-tailed Fisher's exact test, and Benjamini-

Hochberg correction was used for multiple comparisons. For potential protein-coding

regulators of XAR, genes expressed in at least in one tumor were used as the background

gene set. For lncRNA analysis, neighboring protein-coding genes of XAR-associated lncRNAs

were used as background gene set.

**ATRX regression coefficients comparison between autosomal and X-linked genes**

For autosomal and X-linked genes, linear regression models with ATRX expression were fit at

the mRNA or proteomic level in each tumor, in which *ATRX* coefficient estimates were

collected and converted to absolute form for comparison between the two gene groups.

**Data visualization**

The R package ggpubr (v.04, based on ggplot2) was used for basic data visualizations in this

study. The heatmaps of stemness correlation with XAR were visualized by R package

ComplexHeatmap (v2.2). Genomic distribution of PIX and PSX genes were visualized by R

package circlize (v0.4). Correlation heatmaps between XAR predictions and observations

were visualized by R package ggcorrplot2 (v0.1). Cumulative distribution of expression levels

were visualized by R package ggplot2 (v3.3).

**Cell culture and CRISPR-Cas9 knockout**

MCF7 and HT1080 cells were obtained from the American Type Culture Collection (ATCC).

All cells were cultured in high-glucose DMEM containing 10% fetal bovine serum (FBS) and 1%

penicillin/ streptomycin and maintained at 37 °C with 5% $CO_2$.

The sgRNAs of *TP53* were designed on the CHOPCHOP website

(https://chopchop.cbu.uib.no) as described before (Montague, et al. 2014). sgRNAs with

highly predicted efficiency and lower off-target were chosen for in vitro transcription. The

sgRNA sequence targeted *TP53* were as follows: sgRNA-1, 5'-TATCTGAGCAGCGCTCATGG-3'

and sgRNA-2, 5'-GGTGAGGCTCCCCTTTCTTG-3'. The sgRNA oligos were cloned into the

pDR274 vector and in vitro transcribed using the MEGAshortscript T7 transcription kit

(Thermo Fisher), then purified using the MEGAclear kit (Thermo Fisher). The sgRNAs were

then dissolved in RNase-free water and quantified using NanoDrop 1000 (Thermo Fisher).

To generate *TP53* knockout cells, electroporation of Cas9 RNP to the cells was performed as

previously reported (Kim, et al. 2014). Specifically, 10 μg TrueCut Cas9 Protein v2 (Thermo)

and 2 μg each of the in vitro transcribed sgRNAs were incubated together at 37°C for 20 min,

and $5 \times 10^5$ MCF7 or HT1080 cells (70%-90% confluent) were harvested and centrifuged at

90× g for 10 min. Then the Cas9 RNP was electroporated to the cell pellet by Lonza 4D-

Nucleofector (Lonza) under a pre-optimized program.

**Western Blotting**

Cells were harvested and lysed with RIPA buffer (Beyotime). Cell extracts of equal total

protein (20 μg each) were separated by SDS-PAGE and transferred to Nylon membrane

(Merck Millipore). The membranes were blocked with 5% nonfat milk in TBST washing

buffer (10 mM Tris pH 8.0, 150 mM NaCl with 0.5% Tween-20) for 1 h at room temperature,

then incubated at 4°C overnight with anti-*TP53* (1:1000; sc-126,Santa Cruz) and anti-GAPDH

(1:5000; P30008M, Abmart) primary antibodies. After washing, the membranes were

incubated with fluorescence-conjugated secondary antibodies and detected with Odyssey

Imagers.

**RNA extraction and real-time quantitative PCR**

Total RNA was extracted from cultured cells using RNAiso Plus (Takara) and reverse

transcribed into cDNA by the PrimeScript™ RT reagent Kit (Takara) , following the

manufacturer's protocol. Then real-time quantitative PCR was performed using TB Green®

Premix Ex Taq™ II (Takara) on the Real-Time PCR Thermal Cycler qTOWER3 (Analytik Jena).

Primers used in this study (forward/reverse; 5' to 3') were as follows:

*KAT8*: TCACTCGCAACCAAAAGCG/GATCGCCTCATGCTCCTTCT

*MSL1*: CCCATCACCGTTACCATTACG/GGAACAGCCAAGACTGAAGTTT

*MSL2*: GTAGCCACTGACTTATGTTCCAC/GCTGCAAATTAGGGCAACAGAC

GAPDH: GGAGCGAGATCCCTCCAAAAT/GGCTGTTGTCATACTTCTCATGG

Data analysis was performed using the 2(-ΔΔCT) method, and mRNA expression levels were

normalized to GAPDH.

**RNA sequencing of MCF7 and HT1080 cell lines**

Total RNA was extracted using TransZol Up Plus RNA Kit (Cat#ER501-01, Trans) following the

manufacturer's instructions and checked for RNA integrity by an Agilent Bioanalyzer 2100

(Agilent technologies, Santa Clara, CA, US). Qualified total RNA was further purified by

RNAClean XP Kit (Cat#A63987, Beckman Coulter, Inc. Kraemer Boulevard Brea, CA,USA) and

RNase-Free DNase Set (Cat#79254, QIAGEN, GmBH, Germany). Sequencing libraries were

constructed following steps from the manufacturer's instructions (VAHTS Universal V6 RNA-

seq Library Prep Kit for Illumina®, Vazyme, NR604-02), followed by paired-end (2x 150bp)

RNA-seq by Illumina HiSeq 2500. Cleaned reads were aligned to the human genome (hg38)

by Kallisto (v0.46, default parameters) (Bray, et al. 2016) to obtain gene expression levels

(TPM), based on gene annotations from GENCODE v25 (Harrow, et al. 2012). Reads were

also mapped to hg38 using HISAT2 (v2.0.4, default parameters), and alignments of *TP53*-WT

samples were visualized by IGV (v2.5.2) for manual inspection to confirm TP53 status.

## Data availability

462  The RNA-seq data generated in this study have been submitted to the NCBI BioProject

463  database        (https://www.ncbi.nlm.nih.gov/bioproject/)        under        accession        number

464  PRJNA777384.

## Declaration of interests

467  The authors declare no competing interests.

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## Author contributions

474  MBG and YYX conceived the project. MBG and ZWF collected the data, performed the

475  analysis, and interpreted the results. MBG wrote the manuscript with input from ZWF. ZWF

476  and BHC performed the experimental validation. ZSY was involved in project discussion. YYX

477    was involved in critical discussions and reviewed the manuscript. All authors approved the

478    manuscript.

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663    **Figures and Legends**

Fig. 1

**Fig. 1, Identification and characterization of PSX and PIX genes on X chromosome.** (**A**)

Classification X chromosome genes based on absolute values of Pearson correlations (x-axis)

compared to the average absolute correlation value (blue vertical line). (**B-C**) Cumulative

distribution of expression levels of PSX (**B**) and PIX (**C**) genes on X chromosome, compared

to autosomal genes, using samples from the TCGA project or the GTEx project. A total of 100

samples were randomly selected and their median expression levels for genes were shown

for visualization. Vertical lines indicate medians. (**D**) PIX and PSX genes distribution on X

chromosome. PIX enriched regions were marked by arrows. (**E-G**) Comparing gene length (**E**),

gene sequence conservation (**F**), and mRNA half-life (two-sided $t$-test, **G**) between PIX and

PSX genes. PIX: ploidy-insensitive X chromosome genes, PSX: ploidy-sensitive X chromosome

genes.

**Fig. 2, Differential dosages of PSX and PIX genes across normal tissues and cancer types. (A)**
XAR-PSX and XAR-PIX across 27 normal tissues from GTEx were close to one, except for
blood and testis. **(B)** XAR-PSX and XAR-PIX across 33 cancer types from TCGA. **(C)** XAR-PSX
were higher in cancers than in matched normal tissues. Effect sizes were indicated by
Cohen's D statistics in blue (negligible[N]<0.2, 0.2<=small[S]<0.5, 0.5<=moderate[M]<0.8,

large[L]>=0.8). (**D**) XAR-PIX were lower in cancers than in matched normal tissues. Effect

sizes were indicated by Cohen's D statistics in blue.

(**C-D**) Two-sided Wilcoxon test *P*-value significance: ns >0.05, * <= 0.05, ** <=0.01, *** <=

0.001, **** <= 0.0001. Matching of tumor types to normal tissues were as follows: ACC,

Adrenal Gland; BRCA, Breast; COAD, Colon; ESCA, Esophagus; GBM, Brain; HNSC, Salivary

Gland; KICH, Kidney; KIRC, Kidney; KIRP, Kidney; LGG, Brain; LIHC, Liver; LUAD, Lung; LUSC,

Lung; OV, Ovary; PAAD, Pancreas; PRAD, Prostate; PCPG, Adrenal Gland; READ, Colon; SARC,

Adipose Tissue; SKCM, Skin; STAD, Stomach; TGCT, Testis; THCA, Thyroid; UCS, Uterus; UCEC,

Uterus.

XAR: X-over-autosome dosage ratio, ACC: Adrenocortical carcinoma, BLCA: Bladder

urothelial Carcinoma, BRCA: Breast invasive carcinoma, CESC: Cervical squamous cell

carcinoma and endocervical adenocarcinoma, CHOL: Cholangiocarcinoma, COAD: Colon

adenocarcinoma, CCRCC: Clear cell renal cell carcinoma, DLBC: Lymphoid neoplasm diffuse

large B-cell lymphoma, ESCA: Esophageal carcinoma, GBM: Glioblastoma multiforme, HNSC:

Head and neck squamous cell carcinoma, KICH: Kidney chromophobe, KIRC: Kidney renal

clear cell carcinoma, KIRP: Kidney renal papillary cell carcinoma, LAML: Acute myeloid

leukemia, LGG: Brain lower grade glioma, LIHC: Liver hepatocellular carcinoma, LUAD: Lung

adenocarcinoma, LUSC: Lung squamous cell carcinoma, MESO: Mesothelioma, OV: Ovarian

serous cystadenocarcinoma, PAAD: Pancreatic adenocarcinoma, PCPG: Pheochromocytoma

and paraganglioma, PDA: Pancreatic ductal adenocarcinoma, PRAD: Prostate

adenocarcinoma, READ: Rectum adenocarcinoma, SARC: Sarcoma, SKCM: Skin Cutaneous

melanoma, STAD: Stomach adenocarcinoma, TGCT: Testicular germ cell tumors, THCA:

Thyroid carcinoma, THYM: Thymoma, UCEC: Uterine corpus endometrial carcinoma, UCS:

Uterine carcinosarcoma, UVM: Uveal melanoma.

**Fig. 3, XAR-PSX and XAR-PIX were inversely associated with stemness.** (**A**) Cancer stemness

(RNAss) was positively correlated with XAR-PSX (top) and negatively with XAR-PIX (bottom).

colors indicate -log10 P-values, and sizes of rectangles represent Pearson correlation.

Correlations with FDR<0.1 were marked by circles. (**B**) Comparison of XAR-PIX (top) and

XAR-PSX (bottom) between ESCs and iPSCs from females or males. (**C**) Comparison of XAR-

PIX (top) and XAR-PSX (bottom) between sexes from ESCs or iPSCs. (**D**) XAR-PSX dynamics of

embryonic stem cells (grouped by sex) during preimplantation from day 3 (E3) to 7 (E7). (**E**)

Strong negative correlation of XAR-PSX with differentiation culturing time in both human

(top) and mouse (bottom). (**F**) Strong positive correlation of XAR-PIX with differentiation

culturing time in both human (top) and mouse (bottom). (**B-D**) Two-sided Wilcoxon test.

**Fig. 4, XAR in autoimmune disease.** (**A**) XAR-PIX (top) and XAR-PSX (bottom) in SLE patients

compared to healthy controls. (**B**) XAR-PIX (top) and XAR-PSX (bottom) in SLE patients with

anti-Ro autoantibodies compared to those without anti-Ro. (**C**) XAR-PIX (top) and XAR-PSX

(bottom) in SLE patients with more active interferon response (ISM) compared to those with

less ISM.

(**A-C**) Two-sided Wilcoxon test.

**Fig. 5, *TP53* and *ATRX* were two regulators of XAR.** (**A**) Significance of XAR-PIX difference (y-

axis, two-sided *t*-test) between wildtype and mutated genes across cancers in male. *TP53*

and *ATRX* were marked by arrows. For better visualization, only genes with FDR<1 were

shown as points and those with FDR<1e-4 labeled. (**B-C**) Cumulative distribution of PIX and

autosomal gene expression levels for HT1080 (**B**) and MCF7 (**C**), before and after *TP53*-KO.

Vertical lines indicate median expression used to calculate XAR-PIX dosages. (**D-E**)

Cumulative distribution of PSX and autosomal gene expression levels for HT1080 (**D**) and

MCF7 (**E**), before and after *TP53*-KO. Vertical lines indicate median expression used to

calculate XAR-PSX dosages. (**F**) Gene expression changes of MSL complex subunits *KAT8*,

*MSL1*, and *MSL2* in MCF7 (left) and HT1080 (right) cells, before and after *TP53*-KO. (**G**) *ATRX*

knockout (KO) in mouse induced pluripotent stem cells (iPSCs) significantly reduced both

XAR-PIX (middle) and XAR-PSX (right). (**H**) *ATRX* knockout (KO) in human GBM cells

significantly reduced both XAR-PIX (middle) and XAR-PSX (right). (**F-H**) Two-sided *t*-test, *

*P*<= 0.05, ** <=0.01, *** <= 0.001, **** <= 0.0001.

**Fig. 6**, **Major findings of this study**. Differential dosages of two groups of X chromosome

genes (PIX and PSX) were observed in human and animals at both mRNA and protein levels.

X dosages were converging during stem cell differentiation but diverging in cancer. X dosage

compensation was lower in blood cells of SLE autoimmune patients than in healthy

individuals. TP53 and ATRX were identified and validated as two XAR regulators. XAR: X-

over-autosome dosage ratio, PIX: ploidy-insensitive X genes, PSX: ploidy-sensitive X genes.