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ABSTRACT

Neuroblastoma is a common pediatric cancer, where preclinical studies have suggested

chemotherapy resistance is driven by a mesenchymal-like gene expression program. However,

the poor clinical outcomes imply we need a better understanding of the relationship between

patient tumors and preclinical models. Here, we generated single-cell RNA-seq maps of

neuroblastoma cell lines, patient-derived xenograft models (PDX), and a genetically engineered

mouse model (GEMM). We developed an unsupervised machine learning approach to compare

the gene expression programs found in preclinical models to a large cohort of human

neuroblastoma tumors. The dominant adrenergic programs were well preserved in preclinical

models, but contrary to previous reports do not unambiguously map to an obvious cell of origin.

The mesenchymal-like program was less clearly preserved, and primarily restricted to cancer-

associated fibroblasts and Schwann-like cells *in vivo*. Surprisingly however, we identified a

subtle, weakly expressed, mesenchymal-like program in otherwise adrenergic cancer cells in

some high-risk tumors. This program appears distinct from mesenchymal cell lines but was

maintained in PDX and a similar program could be chemotherapy-induced in our GEMM after

only 24 hours, suggesting an uncharacterized therapy-escape mechanism. Collectively, our

findings advance the understanding of neuroblastoma heterogeneity and can inform the

development of new treatments.

BACKGROUND

Neuroblastoma is the most common extracranial pediatric solid tumor, which arises in the developing sympathetic nervous system, usually in the adrenal gland[1]. Overall survival in high-risk neuroblastoma is typically reported as approximately 50%, with survivors sometimes suffering long-term consequences of chemotherapy[2]. This is despite new therapies showing clear promise in cell lines and mouse models[3], indicating we have an incomplete understanding of how neuroblastoma patient tumor heterogeneity is reflected in preclinical models.

Pediatric tumors, including neuroblastoma, exhibit very few recurrent somatic mutations compared to adults[4] and heterogeneity at the level of cell state[5] is thought to be a major driver of therapy resistance[6-10]. For example, it was recently shown that neuroblastoma *cell lines* express two discreet super-enhancer-driven gene expression programs, referred to as the "adrenergic" and the (comparatively chemoresistant) "mesenchymal" program[6,10]. These programs exhibited mutually exclusive expression, which was not driven by genetic differences, as cells expressing one program could readily interconvert to the other *in vitro*.

Single-cell RNA-seq represents the ideal tool to study such non-genetic tumor heterogeneity. Indeed, in the past 3 years, at least 7 different studies[11-17] have reported single-cell RNA-seq maps of neuroblastoma patient tumors. However, the primary conclusions of these studies disagreed considerably, with 6 different cell types posited as the neuroblastoma cell-of-origin (chromaffin cell[14], sympathoblast[13,15], Schwann cell precursors[11], neuroblast[17], "sympatho- and chromaffin cells"[16] and "a subtype of TRKB+ cholinergic progenitor"[16]). Additionally, arguments were made both in favor of[11-13,16] and against[14,15,17] the *in vivo* relevance of the cell-line-derived[6,10] putatively-chemoresistant mesenchymal-like gene expression program. Thus, the gene expression programs driving therapy resistance in neuroblastoma, and which preclinical models can be used to study/target these programs remains unclear.

Here, we generated single-cell RNA-seq data from neuroblastoma preclinical models and

compared the gene expression programs identified in these preclinical models against human

tumors. To achieve this, we developed a novel computational method called "automatic

consensus nonnegative matrix factorization" (acNMF; details below). Using acNMF, we

determined that the dominant adrenergic gene expression programs were preserved across

human tumors and preclinical models, but did not cleanly map to a unique cell of origin. In

contrast, the presumptive drug-resistant mesenchymal program demonstrated less consistent

behavior, and while clearly expressed in cell lines, exhibited high expression primarily in cancer-

associated normal cells *in vivo*. Notably, we identified a distinct weak-mesenchymal program in

predominantly adrenergic cells of high-risk tumors that could be elicited 24 hours after

administering chemotherapy *in vivo*. Overall, our findings improve the understanding of

neuroblastoma tumor heterogeneity in patient tumors and preclinical models, which will help

inform drug development for this catastrophic disease.

  RESULTS

  Automatic consensus non-negative matrix factorization (acNMF) can accurately recover

  gene expression programs in single-cell RNA-seq data.

NMF is an unsupervised learning approach often used to estimate gene expression programs in

single-cell RNA-seq datasets. Using this method, each program is represented as a vector of

weights (or "loadings") assigned to each gene (see e.g., Fig. 3e). The activity of each program is

estimated in individual cells, scoring high if genes with high weights are highly expressed in that

cell (see e.g., Fig. 3g). Like other methods, NMF can discover discrete cell types, but also

potentially pathway activity and cell state programs—the factors believed to influence therapy

resistance in neuroblastoma. However, there is no existing method to determine *a priori* the

number of gene expression programs in a single-cell RNA-seq dataset, which can lead to

inconsistent NMF-based representations of similar data. This makes it difficult to compare

neuroblastoma tumors and preclinical models across multiple datasets. To overcome this, we

first aimed to create a method for identifying the number of gene expression programs (typically

called "k") in our datasets. We eventually developed a generalizable method called acNMF (Fig.

1a).

Briefly (see Methods for complete details), we initially developed acNMF using a simulated

single-cell RNA-seq dataset with 13 cell types and one shared "activity program." Our

inspiration came from observing how the existing cNMF algorithm[18] behaved on this dataset.

We noticed that the 14 ground truth gene expression programs could be identified at most

values of k, with other programs fitting noise (Fig. 1b). By plotting the value of k against the

number of reproducibly identified gene expression programs in independent splits of the data,

we could find an inflection point (Fig. 1c, Supplementary Figures 1a-d), where all ground truth

programs were recovered and noise-filtered (Fig. 1d-h; Supplementary Figures 1e-r). In the

simulated data, the 14 ground truth gene expression programs were recovered at a k value of

111 22. At k=14, only 13 of the 14 programs were recovered (Supplementary Figure 1s). This finding

112 implies that recovering ground truth gene expression programs using NMF-based methods

113 should be decoupled from selecting the appropriate k. This is an important general

114 consideration when applying NMF to single-cell RNA-seq data, challenging the idea that finding

115 an optimal k value necessarily recovers k biologically meaningful programs. We used this

116 method to estimate gene expression programs throughout this manuscript (Fig 1i,

117 Supplementary Figure 1t; see subsequent sections).

Figure 1: Overview of acNMF methodology and performance in simulated data.

(a) Schematic representation of acNMF approach for recovering gene expression programs in a

single-cell RNA-seq dataset denoted **Y**. The dataset is (i) randomly split 50/50, then (ii) each split

is factorized independently into a basis matrix of gene expression programs (GEPs) **W** and a GEP

activity matrix **H** using cNMF at a range of values of k (e.g. 5-200). At each k the redundant

GEPs from each split are (iii) reaggregated by a community detection algorithm. This community

125  number is then (iv) determined for a range of values of k and a range of Jaccard length values,

126  parameters which are chosen to maximize the number of GEP-communities replicated in each

127  split. Critically, the number of ground truth GEPs is typically smaller than the value of k (GEPs <

128  k, hypothetical example highlighted in blue).

129 (b) The number of GEPs reproducibly recovered in both splits of the simulated dataset (y axis)

130  plotted against the value of k from NMF (x axis), over a range of values of the Jaccard length

131  (color scale). The approach is repeated 200 times for each pair of values of k and Jaccard length

132  and a loess regression curve is fit through these points, with 95% confidence intervals shown.

133 (c) Optimal rank k (x axis) is determined by calculating the inflection point (i.e., maximum residual

134  value (gray profile)) of smoothed data in (b) (blue line).

135 (d) UMAP plot of simulated scRNA-seq data, where each dot is a cell colored by the thirteen ground-

136  truth simulated cell types.

137 (e) Like (d), but with black dots highlighting cells expressing the activity program, which (akin to a

138  biological process/pathway) is expressed across multiple simulated cell types.

139 (f) UMAP plot showing a representative example of a recovered ground truth cell identity GEP by

140  acNMF in the simulated single cell RNA-seq dataset. Dots are colored by the activity score of the

141  recovered gene expression program.

142 (g) Like (f) but showing the successful recovery of the activity program. Similar plots for all other

143  recovered programs are shown in Supplementary Figure 1e-r.

144 (h) Dot plot comparing Jaccard similarity index values of 14 inferred acNMF GEPs with the 14

145  ground truth GEPs after multiple testing correction (blue X's represent non-significant

146  comparisons). Both the size and color of the points are scaled by Jaccard similarity.

147 (i) Like (b), but for the GOSH dataset. Data shown for a Jaccard length of 20, which was optimized

148  using acNMF. 41 GEPs were reproducibly recovered in independent splits of the data, at a $k = 80$

149  (highlighted by the red lines). Similar plots for all datasets in this paper are shown in

150  Supplementary Figure 1t.

151   GEP; Gene expression program.

The acNMF approach produces an interpretable representation of a human

neuroblastoma single-cell RNA-seq dataset.

We first applied acNMF to the published "GOSH" dataset from Kildisiute *et al.*[15]. The five

samples therein cover low-to-high risk neuroblastoma and included one sample from normal

adrenal gland. Previously, the insights derived from this dataset were confined to the

identification of six cell types. However, the acNMF approach identified 41 gene expression

programs (at k = 80; Fig. 1(i)), suggesting possible new insights. We sought to annotate these

41 gene expression programs. Despite efforts at automation, annotation of single-cell RNA-seq

is subjective[19]—especially in rare/understudied tissues like neuroblastoma. Thus, two co-

authors (Y.K. and P.G.) blindly and independently annotated the gene expression programs.

This was done using a web-based platform we developed, presenting each annotator with a

catalogue of relevant information, including, the dominant gene weights (loadings) for each

program, program-program co-expression patterns, inferred copy number profiles, gene

ontology term enrichments, cell type annotations from SingleR[20], and 282 neuroblastoma-

relevant marker gene sets that we curated from the literature[10-15,17,21-28]. The web-based platform

presented to annotators is available at pscb.stjude.org.

The two annotators assigned qualitatively similar annotations to 37 out of 41 programs (Fig.

2(a); Supplementary Table S1). Upon discussion with coauthor R.C., a consensus was reached

on the final annotations (Fig. 2(a); Supplementary Table S1). The annotations contained 4

broad groups of cell types, neuroblastoma cancer cells, immune cells, stromal cells, and

endothelial cells (Fig. 2(a)). We also identified 7 "activity" programs that identified processes

such as the cell cycle and antigen presentation by MHC. A total of 32 discrete cell types or cell

states were recovered, with 7 assigned to the stromal group, 3 to endothelial, 19 to immune and

3 assigned to neuroblastoma cancer cells, aided by inferred copy number data (Supplementary

Figure 2(a-f); see Methods; further details in subsequent subsections). We refer to these 3

neuroblastoma-specific programs as "Adrenergic I (sympathoblast-like)", "Adrenergic II (pre-

neuronal-like)" and "Neuroblastoma-MYC" (NB-MYC). All three neuroblastoma programs were

strongly enriched for the classical cell line derived adrenergic signature (Fig 3(a-c); 8.1×10^{-66}

for Adrenergic I, $P = 1.7 \times 10^{-72}$ Adrenergic II, 1.1×10^{-23} for Neuroblastoma-MYC from one-

sided Wilcoxon rank sum test, signature defined by Van Groningen *et al.*[10]). Thus, the

adrenergic program is preserved in patient tumors but can potentially be subdivided.

Figure 2: Gene expression programs recovered by acNMF in the GOSH neuroblastoma single-cell

RNA-seq dataset.

(a) Heatmap showing the activity scores (color scale) for the 41 recovered programs (y axis) across

each single cell (x axis) in the GOSH dataset. The final consensus annotation for each gene

expression program is shown on the right, colored by the type of program. Tick marks indicate

whether the two blinded annotators agreed or not, and the far-right column indicates whether the

annotators reached a high, middle, or low level of confidence in the final annotation.

For all 3 adrenergic programs the top curated human cell-type signature enrichment was

sympathoblast (Fig. 3d, $P = 1 \times 10^{-6}$, 3.6×10^{-3}, 7.6×10^{-6} for adrenergic I, adrenergic II, NB-

MYC respectively, marker genes curated from Kameneva *et al.*[13]). However, there was

complexity beyond a clean resemblance to sympathoblasts.

Specifically, the Adrenergic I (sympathoblast-like) program was defined by the expression of

genes involved in the production of adrenaline and noradrenaline, whose expression is

maintained in chromaffin cells (Fig. 3(e-g)). This includes tyrosine hydroxylase (*TH*), dopamine

beta hydroxylase (*DBH*), dopa decarboxylase (*DDC*) ("Chromaffin and progenitors" gene list

curated from Jansky *et al.*[17]). Notably, markers specific to mature chromaffin cells (*PNMT* and

PENK) were not enriched, consistent with the idea neuroblastoma cells do not resemble mature

chromaffin cells[25,29,30].

The Adrenergic II (pre-neuronal-like) program over-expressed markers of neuroblasts defined

by Hanemaaijer *et al.*[23] and Jansky *et al*[17]. The top 5 program-defining marker genes included

neuronal specific genes, neurofilament light chain (*NEFL*), neuronatin (*NNAT*), brain acid

soluble protein 1 (*BASP1*) and neurofilament medium chain (*NEFM*). This program can be co-

expressed with the Adrenergic I program (Fig. 3g & 3i, Supplementary Figure 3a-c). Thus, these

programs were independent, but not mutually exclusive.

The NB-MYC program was only expressed in the high-risk patient sample (PD43255) and was

characterized by lower expression of marker genes of differentiating chromaffin and neuronal

cell types (Fig. 3d, 3f, Supplementary Figure 3a). The defining genes of this program were

dominated by translation initiation and elongation factors (Supplementary Figures 3d & 3e),

consistent with the undifferentiated pathology and hyper-aggressive growth of high-risk

neuroblastoma. The top marker genes of the adrenergic I & II programs were expressed 2-3-

fold lower in the high-risk tumor (Fig. 3(j-k)). This is consistent with low-risk tumors exhibiting

differentiating histology (Fig. 3l)[31].

Collectively, these results point to a possible source of the disagreement on neuroblastoma's

"cell of origin", showing neuroblastoma can co-express a mixture of independent programs,

each resembling different developmental cell types (Fig. 3(g, i), Supplementary Figure 3b-c).

Thus, marker genes of multiple cell types will always be identifiable and pursuing a clean

mapping between neuroblastoma cells and a specific developmental cell type may represent a

futile exercise for determining neuroblastoma's specific cell of origin.

Cancer associated fibroblasts of the neuroblastoma tumor microenvironment strongly

express mesenchymal features associated with neuroblastoma cell lines.

We identified 9 gene expression programs in the GOSH dataset that statistically resembled the

neuroblastoma cell line-derived mesenchymal gene signature, with some very strong

enrichments (e.g., $P = 1.78 \times 10^{-88}$ for Program 40 for enrichment of Van Groningen

"mesenchymal" signature, Supplementary Table S1). This seems to mean mesenchymal

neuroblastoma cells have been identified in these tumors. However, one of these programs was

exclusively expressed in fibroblasts of the reference normal adrenal sample (Fig. 3(m-n); $P =$

3.75×10^{-40} for mesenchymal enrichment). The shared gene expression features of fibroblasts

and mesenchymal-like neuroblastoma cell lines suggest a source of the disagreements about

whether mesenchymal-like neuroblastoma cells exist *in vivo*. Indeed, in the 4 neuroblastoma

tumors, our acNMF decomposition again identified several programs strongly resembling

mesenchymal-like neuroblastoma cell lines. However, in all cases, we annotated these as non-

cancerous fibroblast cell populations, not mesenchymal-like neuroblastoma cells (Fig. 3(o-q);

these annotations leveraged inferred copy number - details in subsequent section).

Additionally, acNMF revealed a more complex landscape of cancer associated fibroblasts

(CAFs) than previously reported in neuroblastoma[27]. Specifically, we identified IGF1+ (P = 1.92

× 10^{-7}), POSTN+ (P = 3 × 10^{-15}) and contractile myofibroblast populations (P = 2.5 × 10^{-3}). We

also identified inflammatory CAFs (P = 2.9 × 10^{-9}) expressing interleukin (*IL6*, *IL33*) and

complement component genes (*C7*, *C3*), using marker genes from Lavie *et al.*[27]. Overall, our

acNMF-based decomposition of the GOSH dataset yielded us a conceptual model to describe

the behavior of neuroblastoma cancer cells (Fig. 3(r)) but did not identify clear evidence for

mesenchymal-like neuroblastoma cells *in vivo*. We next explore whether these characteristics

are consistent in other human datasets and preclinical models.

Figure 3: Cells expressing multiple adrenergic and mesenchymal-like gene expression programs are evident in neuroblastoma tumors.

(a) Boxplots showing the mean expression (y axis) of the genes from the classical Van Groningen
mesenchymal (MES; orange box) or adrenergic (ADRM; purple box) signature, in cells that are
highly expressing (activity $h > 50$) the acNMF-identified "Adrenergic I (sympathoblast-like)"
program in the GOSH dataset. The yellow box shows the mean expression of all other genes in
these cells.
(b) Like (a) but for the "Adrenergic II (pre-neuronal-like)" program.
(c) Like (a) but for the "Neuroblastoma-MYC" program.
(d) Boxplots showing the mean gene expression (y axis) of sympathoblast marker genes (curated
from Kameneva *et al.*) in cells highly expressing (activity $h > 50$) each of the 3 acNMF recovered
adrenergic programs, or in normal sympathoblasts (obtained from the Descartes Cell Atlas).
(e) QQ-plot showing the gene weights (loading scores) (y axis) for the "Adrenergic I (sympathoblast-
like)" program. Key sympathoblast marker genes have been highlighted in green, and key
neuronal marker genes in blue.
(f) Like (d) but for the "Chromaffin and progenitors" marker gene set, curated from Jansky *et al*.
(g) UMAP plot of the GOSH dataset; each point represents a single-cell, colored by the activity of
the "Adrenergic I (sympathoblast-like)" program.
(h) Like (e) but for the "Adrenergic II (pre-neuronal-like)" program.
(i) Like (g) but for the "Adrenergic II (pre-neuronal-like)" program.
(j) Boxplot showing the mean gene expression of "Chromaffin and progenitors" marker genes
(curated from Jansky *et al.*) in the cancer cells of the 4 neuroblastoma samples profiled in the
GOSH dataset. Boxes are colored by tumor risk classification.
(k) Like (j) but for the "Neuroblast" marker gene set curated from Hanemaaijer *et al*.
(l) Representative H&E stains of low, intermediate and high-risk human neuroblastoma tumors,
illustrating varying degrees of differentiated features.
(m) Boxplots showing the mean expression (y axis) of the genes from the classical Van Groningen
mesenchymal (MES; orange box) or adrenergic (ADRM; purple box) signature, in cells that are

highly expressing (activity $h > 50$) the acNMF-identified "Normal fibroblasts" program in the

GOSH dataset. The yellow box shows the mean expression of all other genes in these cells.

(n) QQ-plot showing the gene loading scores (y axis) for the "Normal fibroblasts" program. A subset

of genes classically used as markers of mesenchymal-like neuroblastoma cells are highlighted in

red.

(o) Like (m) but for the "IGF1+ myofibroblasts" program.

(p) Like (m) but for the "POSTN+ myofibroblasts" program.

(q) Like (m) but for the "Inflammatory fibroblasts" program.

(r) A schematic diagram overlaying the acNMF-recovered programs on normal sympathoadrenal

differentiation[32].

The reproducibility of neuroblastoma gene expression programs across human tumors

and preclinical models.

We next assembled 3 more of the publicly available datasets, from Dong *et al.*, Jansky *et al.*

and the PMC dataset from Kildisuite *et al.*[14-17], totaling 50 samples. Additionally, to assess the

preservation of the human programs in preclinical models, we performed single-cell RNA-seq

profiling across 13 neuroblastoma cell lines, 17 patient derived xenografts (PDX), and 11

samples from a genetic mouse model (GEMM)[33] (metadata for this (largest of its kind) cohort

assembled in Supplementary Table S2, and in our web platform).

We applied the acNMF decomposition to each of these datasets independently, yielding

between 17 (cell lines) and 45 (Dong *et al.*) gene expression programs per-dataset

(Supplementary Figure 1t, Supplementary Table S3). To pairwise cross-compare the programs

from each dataset we represented the programs as nodes on a graph. We drew an edge

between nodes if the program was replicated in another dataset (*FWER* < 0.01 by an

asymmetric Jaccard similarity test; Fig. 4(a); Supplementary Figure 4(a); see Methods). The

resulting graph's structure indicated that similar gene expression programs had often been

recovered in multiple datasets, including preclinical models. Consensus hubs (see Methods)

were evident for gene expression programs representing several immune cell types,

neuroblastoma-specific programs, stromal cells such as fibroblasts and activity programs such

as the cell cycle and hypoxia (Fig. 4(a-d)).

The adrenergic I (sympathoblast-like) program from GOSH was directly or indirectly connected

to programs in all other datasets (Fig. 4(b)). These connected programs retained the

characteristic hallmarks including expression of genes like *DBH*, *TH* and *CHGA* (Fig. 4 (e-h)).

The adrenergic II pre-neuronal-like program was also observed in multiple other datasets (Fig. 4

(f & h)) and the "neuroblastoma-MYC" (high risk) program formed a dense hub (Fig. 4(c)), with

similar programs recovered in high-risk tumors in all datasets and all preclinical models (Fig.

4(i)).

This cross-dataset analysis also revealed 3 groups of novel programs expressed in

neuroblastoma cancer cells. We were able to find an explanation for one, which was expressed

in *ALK* activated tumors (Fig. 4(a); supported by 1 patient tumor and 2 PDXs, but no other

preclinical model). Additionally, we found 5 programs unique to a single human neuroblastoma

tumor implying a possible long tail of divergent neuroblastoma programs that currently remain

unexplained and are absent in our profiled preclinical models.

The mesenchymal-like programs observed in the GOSH dataset formed a large

mesenchymal/fibroblast subgraph. Interestingly, programs from cancer cell lines were also

connected to this fibroblast subgraph. For example, a program expressed exclusively in the

GIMEN cell line[10] was directly connected to the inflammatory fibroblasts program in the GOSH

dataset (Fig. 4(d)), again consistent with similar gene expression features in mesenchymal-like

neuroblastoma cells in culture and untransformed fibroblasts *in vivo* (Fig. 3(o-q)).

Overall, this cross-dataset integrated map argues that, despite disagreement in the literature,

neuroblastoma single-cell RNA-seq datasets are reasonably consistent, and that the dominant

adrenergic programs are preserved in all preclinical models. However, the status of

mesenchymal-like tumor cells and cell lines requires further exploration. Note: this graph-based

representation of these datasets (Fig. 4(a)) is available as part of our interactive web-based

platform (accessible at pscb.stjude.org).

Figure 4: The reproducibility of neuroblastoma gene expression programs across human tumors and preclinical models.

(a) A graph of gene expression programs identified by acNMF across 7 neuroblastoma single-cell RNA-seq datasets, from humans, PDX, GEMM and cell lines. Nodes represent a single

program's gene weights (i.e. loading scores), and an edge connects similar nodes by a Jaccard

similarity test. The colors highlight related communities of nodes. The black boxes highlight

regions of interest, which are shown in detail in panels (b-d).

(b) Inset showing a detailed view of region (b) from panel (a). This region has connected Adrenergic

I and Adrenergic II programs. In this inset, nodes have been colored by dataset, rather than

community (as in panel (a)).

(c) Like (b) but for a dense interconnected community of "Neuroblastoma MYC" programs.

(d) Like (c) but showing a region for a community of gene expression programs expressed in cancer

associated fibroblasts. A neuroblastoma program, exclusive to the GIMEN cell line, is connected

to this community of nodes.

(e) QQ-plot showing the gene weights (loading scores) (y axis) for the "Adrenergic I (sympathoblast-

like)" program recovered in the PMC dataset. Similar to Fig. 3(e) from the GOSH dataset key

sympathoblast marker genes have been highlighted in green, and key neuronal marker genes in

blue.

(f) Like (e) but for the "Adrenergic II (pre-neuronal-like)" program.

(g) Like (e) but for program 24 "Adrenergic I (sympathoblast-like)" in the Dong *et al.* dataset.

(h) Like (e) but for program 19 "Adrenergic II (pre-neuronal-like)" in the Dong *et al.* dataset.

(i) Like (e) but showing the "Neuroblastoma MYC" program from Dong *et al*. Top marker genes,

similar to those identified in the GOSH dataset, have been highlighted in red.

Note: An interactive version of the graph plot (panel a), and QQ-plots (panels e-i) for every program

in every dataset are available in our web platform.

Cells highly expressing a mesenchymal-like program are consistent with non-cancerous cells in all datasets except cell lines.

Our cross-dataset analysis above also revealed other candidate mesenchymal-like neuroblastoma cells, including Schwann-like cells (e.g., Dong dataset, Program 27, $P = 1 \times 10^{-9}$ for enrichment of Descartes Schwann cell markers, $P = 5.3 \times 10^{-43}$ for Van Groningen mesenchymal enrichment; Supplementary Figure 5a). We were interested in whether any of these could plausibly represent *in vivo* mesenchymal neuroblastoma cancer cells.

Thus, we applied InferCNV[34] across all datasets (see Methods), a computational method for inferring copy number variant (CNV) profiles from single-cell RNA-seq data. However, the CNV profiles of mesenchymal-like cells were always similar to the reference normal, whereas aberrations in adrenergic cells were typically obvious (Supplementary Figure 2, Supplementary Figures 5a-c). The exception was cell lines, where both mesenchymal and adrenergic cells were always consistent with cancer cells (Supplementary Figure 5d-f).

However, this basic InferCNV analysis cannot rule out a small proportion of mesenchymal-like cancer cells. Thus, we constructed a machine learning model, that by leveraging the inferred copy number profiles of the high-confidence-cancer and high-confidence-normal cells, could *predict* the cancer/normal status of the ambiguous mesenchymal-like cells on a per-cell basis (Supplementary Figure 5g; Supplementary Table 4 & 5; see Methods). These models could predict the cancer/normal status of the held-out cancer/normal-endothelial cells with median accuracy approaching 100% (Fig. 5a, Supplementary Figure 5h). We applied the trained models to the held-out ambiguous population of mesenchymal-like cells (candidate mesenchymal neuroblastoma cells, cancer associated fibroblasts, or Schwann-like cells). The model never classified mesenchymal cells as cancer cells beyond the model's misclassification rate, estimated from normal endothelial cells (Fig. 5b-c; Supplementary Figure 5i-n). Thus, these

analyses did not reveal convincing evidence for subsets of neuroblastoma cells highly

expressing a mesenchymal-like gene expression program *in vivo*.

We further probed these putative fibroblast and Schwann-like cells using a highly sensitive

spatial transcriptomics assay, multiplexed RNA *in situ* hybridization (RNA-ISH) (Fig 5d,

Supplementary Figure 6a-c). We applied this to our GEMM, which develops neuroblastoma

because of Cre-conditional activation of the *human* copy of *MYCN* in dopamine beta

hydroxylase (*Dbh*) expressing cells—thus, human *MYCN* expression should generally be

excluded from non-cancer cells. In all tumors, the human *MYCN* transcript was highly

expressed across most of the tissue, but absent from some large regions (Fig. 5e,

Supplementary Figure 7a-d), which resemble Schwannian stroma (Fig. 5f, Supplementary

Figure 7e). These *MYCN*-absent regions clearly co-expressed the myofibroblast markers *Tagln*

and *Acta2* (Fig. 5e), consistent with the idea these mesenchymal cells are fibroblasts, not

cancer cells. Regions excluding *MYCN* also expressed the inflammatory fibroblast marker *C3*

(Fig. 5e). Interestingly, we identified some cells seemingly co-expressing all combinations of

chosen fibroblast markers, consistent with the idea of intermediate subpopulations (Fig 5g).

Schwann cell markers *Sox10* and *Plp1* were also excluded from regions expressing human

MYCN (Fig. 5h; Supplementary Figure 7e). Collectively, despite strong transcriptional

resemblance to neuroblastoma mesenchymal cell lines, the data indicate these *in vivo* cells are

predominantly Schwann-like cells and previously uncharacterized fibroblast subpopulations (see

Discussion).

Rare high-risk neuroblastoma tumors express a weakly enriched mesenchymal-like

signature *in vivo*.

Interestingly, we identified some drug pretreated tumors that seem to represent a partial

exception to the above. In high-risk sample NB14 from the Jansky *et al.* dataset, the tumor's

cancer cells were broadly (but weakly) statistically enriched for the Van Groningen

mesenchymal gene expression signature (Fig 5i; Program 12 P = 1.7 × 10^{-6}; Supplementary

Figure 8a-b). Notably, these cells were still predominantly adrenergic (Fig. 5i, purple boxes).

This is different from the behavior of cell lines, where the expression of mesenchymal-like genes

corresponds to a loss of expression of adrenergic genes[6,10] (Fig. 5i).

We initially suspected this was artefactual but surprisingly also identified a high-risk pretreated

human tumor in our PDX cohort exhibiting a similar weak enrichment of the mesenchymal

signature across most cancer cells of the tumor (Fig. 5i; Program 1, P = 1.6 × 10^{-12} in

SJNBL063820, Supplementary Figure 8c-d). We obtained this PDX tissue[35] and used

immunohistochemistry to stain for COL1A1 protein, a classical neuroblastoma mesenchymal

marker[10]. Remarkably, greater than 95% of the neoplastic cells of SJNBL063820 expressed

COL1A1 in the cytoplasm and membrane, but staining was not evident in two negative control

PDXs (Fig. 5j). Thus, this weak-mesenchymal phenotype can be recapitulated in PDX.

Interestingly, two treatment naïve high-risk *MYCN* amplified tumors (T200, T230) from the Dong

dataset, while still adrenergic (Supplementary Figures 8e-f), also showed broad overexpression

of the transcription factor *TWIST1*, a known driver of epithelial-to-mesenchymal transition[36]

(ranked #9 on Program 11 (T200-specific) and #27 on Program 33 (T230-specific)). Curiously,

both programs were also weakly but significantly co-expressed with the mesenchymal-fibroblast

Program 7 (r_s = 0.07 P = 1.4 × 10^{-33} and r_s = 0.06, P = 7.1 × 10^{-25} respectively), consistent with a

very weak or proto-mesenchymal cell state expressed in otherwise adrenergic cells. In general,

433 these findings uncover a complex landscape of mesenchymal-like gene expression programs *in*

434 *vivo*, where some behaviors appear different to cell line models (see Discussion).

Figure 5: The cancer/normal status of ambiguous mesenchymal-like cells in neuroblastoma tumors.

a) Violin plots comparing the balanced accuracy (y axis) for prediction of cancer/normal status of known cancer or immune cells for the 3 different initial models (x axis) across 13 different tumor samples (shown for both "InferCNV" and "manual" features (see methods)). GLM, generalized linear model; RF, random forest; SVM, support vector machine.

b) Boxplots showing the predicted probability of each cell being a cancer cell from the GLM model (y axis) for the ambiguous-mesenchymal cells (light blue), for high confidence cancer cells held out from the initial model fitting (green) and for normal endothelial cells held out from the initial model fitting (dark blue). The predictions are shown for models using features defined based on InferCNV (left 3 boxes) or from manual bins of 50 adjacent genes (right 3 boxes). The contingency tables (right panels) estimate whether the number of mesenchymal-like cells classified as cancer cells differs statistically from the misclassification rate of normal endothelial cells, calculated by a Fisher's exact test. This panel shows a representative sample PD46693 from the GOSH dataset.

c) Like (b) but for the Dong sample T200, all other samples are in Supplementary Figure 5 and 8.

d) QQ-plot showing the Jaccard Similarity (y axis) of other programs with Program #37 (Myofibroblastic CAF) in our GEMM dataset.

e) Representative RNA-ISH image of CAF markers in GEMM tumors. Neuroblastoma markers (human *MYCN*, and *Ddc*) were used to define cancer cells. DAPI counterstaining confirmed the presence of cells located in regions that lack *MYCN* expression. The co-expression of CAF markers was identified within the *MYCN*-absent stromal regions (NB831 shown).

f) H&E staining of mouse tumors identifies regions of densely packed dark stained neuroblastoma cells, and pink-staining stromal cells in our GEMM, which resemble the *MYCN*-absent regions of mesenchymal marker expression in our RNA-ISH experiments.

g) Bar plot showing the co-expression of CAF markers in GEMM tumors (y axis). All combinations of CAF marker expression were quantified in stromal cells (x axis), and they are represented as proportions of the total cell numbers identified in each sample.

463   h) Representative image of GEMM tumors stained with *MYCN* and the Schwann cell marker *Plp1* in

464   NB839. *Plp1* expression was restricted to *MYCN*-absent regions in these tumors.

465   i) Boxplot showing the mean expression (y axis) of genes in neuroblastoma cancer cells from the

466   sample NB14 from Jansky *et al*. Boxes are genes from the classical Van Groningen mesenchymal

467   (MES; orange box) or adrenergic (ADRN; purple box) signatures, with the yellow box showing

468   the expression of all other genes. The middle panel shows our PDX sample SJNBL063820 and

469   the right panels shows the predominantly mesenchymal neuroblastoma cell line GIMEN.

470   j) Immunohistochemical staining for the mesenchymal-marker gene COL1A1 in our SJNBL063820

471   PDX sample (left) and in two other PDX samples SJNBL046145 (middle) and SJNBL047443

472   (right).

A mesenchymal-like gene expression program can be chemotherapy induced in neuroblastoma cells *in vivo*.

The identification of proto-mesenchymal features (e.g. *TWIST1* expression) led us to

hypothesize that the weak mesenchymal-like programs in the drug pretreated tumors (NB14,

SJNBL063820) could have been chemotherapy induced. To test this, we treated 5 of our

GEMMs with a single pharmacologically relevant dose of cisplatin (a mainstay of neuroblastoma

treatment), along with 6 vehicle-treated control mice (see Methods). We harvested these tumors

24 hours after treatment and performed single-cell RNA-seq (see Methods; Supplementary

Figure 9a).

Encouragingly, the drug treated samples clustered separately from the vehicle treated samples

(Fig. 6a). To determine which genes had been induced/repressed we created "pseudo bulk"

expression profiles using all cells of each tumor and performed functional enrichment (drug vs

vehicle) using GSEA, testing the mSigDB "Hallmark" gene sets (Fig. 6b-d) (see Methods). As

expected, "Apoptosis" was among the top chemotherapy-induced gene sets (Fig. 6c-d and 6i, P

= 0.03; Supplementary Table 6). Remarkably, induced genes were also highly enriched for

"Epithelial to Mesenchymal Transition (EMT)" (Fig. 6c-d and 6g, P = 7.4 × 10^{-3}). We probed this

further using acNMF, where in drug treated samples, we identified (for the first time) clear

mesenchymal-like programs expressed in cancer cells (Fig. 6e). Additionally, cisplatin-treated

samples were the first where our machine learning model classified cells highly expressing a

mesenchymal program as cancer cells (P < 2.2 × 10^{-16} for NB853, P = 9.5 × 10^{-11} for NB847,

Supplementary Figures 9b-f).

While the repressed genes were quite consistent across all drug-treated samples, e.g., the loss

of the MYC target genes (Fig. 6b-d and 6f), the patterns of induced genes showed greater

variation (Fig. 6b and 6f-j). The EMT signal was strongest in NB839, NB847, NB849 and NB853

(Fig. 6g) where the classical Van Groningen mesenchymal signature was also enriched (Fig.

6h). These tumors also had the highest induction of apoptosis genes (Fig. 6i), with a loss of the

adrenergic genes in NB847 (Fig. 6j)—reminiscent of trends we had only previously observed in

cell lines (Fig. 6k; Fig 5i). We performed RNA-velocity analysis in NB847 and NB853, which was

consistent with the mesenchymal programs resulting from an acute cell state transition (Fig. 6l-

n, Supplementary Figure 10a). Overall, these recently drug-treated tumors demonstrate that a

mesenchymal-like gene expression program can be chemotherapy induced in neuroblastoma.

Our GEMM, which expresses human *MYCN* in cancer cells, again allowed us to validate these

conclusions by an orthogonal RNA-ISH assay. This time, we assessed the co-localization of

human *MYCN* and the classical EMT marker *Twist1* (Supplementary Figure 10b-c) across 4

drug and 4 vehicle treated samples. While *Twist1* expression was evident to some degree in

both drug and vehicle treated samples, the co-localization of *MYCN* and *Twist1* was much

higher in drug treated samples, again consistent with the induction of a mesenchymal program

(Fig. 6o and 6q).

Overall, the landscape of mesenchymal programs in neuroblastoma differs between cell lines

and other tumor models. In the *in vivo* setting, this involves weakly enriched expression in still

predominantly adrenergic cells (Fig. 6r), which our GEMM data showed could relate to a

mesenchymal response during chemotherapy. Further assessment of the relevance of the

mesenchymal programs in cell lines to the behaviors of tumors *in vivo* should provide a clear

basis for future research (see Discussion).

Figure 6: An acutely chemotherapy treated neuroblastoma genetic mouse model strongly

overexpresses a mesenchymal-like program in cancer cells.

a) UMAP plot of single-cell RNA-seq data obtained from the tumors of all 11 mice. Each point

represents a single cell, colored by whether it was obtained from a cisplatin-treated or a vehicle-

treated mouse. Brighter colored chroma indicates cisplatin treated animals.

b) Heatmap of normalized gene expression values highlighting differentially expressed genes

identified using DESeq2.

c) Dot plot showing GSEA enrichment scores for the top mSigDB "Hallmark" gene sets. Expression

in pseudobulk cancer cells was compared between (n=6) cisplatin treated mice and (n=5) vehicle

treated mice. A negative enrichment score implies the gene set was more highly expressed in drug

treated mice.

d) GSEA plots summarizing key induced and repressed gene sets. The colored tick marks show the

rank of the genes in the gene set of interest and the colored curves show the running enrichment

score.

e) Statistical enrichment of Van Groningen mesenchymal (MES) signature (y axis) in gene

expression programs (x axis) expressed in high-confidence cancer cells in our GEMM. *P*-values

were calculated using a Wilcoxon rank sum test (rank of MES genes vs all other genes).

f) Boxplot showing the pseudobulk expression in cancer cells from all 11 mice for genes in the

Hallmark gene set "MYC targets V1". Order of samples is NB831, NB837, NB855, NB856,

NB864 (vehicle treated, blue); NB839, NB847, NB849, NB853, NB883, NB887 (cisplatin

treated, red). The red line indicates the median of vehicle treated samples.

g) Like (f) but for Hallmark gene set "Epithelial to mesenchymal transition".

h) Like (f) but for the Van Groningen mesenchymal signature (MES) genes.

i) Like (f) but for the Hallmark gene set "Apoptosis".

j) Like (f) but for the Van Groningen adrenergic (ADRN) signature.

k) Boxplots showing the mean expression (y axis) of the genes from the classical Van Groningen

mesenchymal (MES; orange box) or adrenergic (ADRM; purple box) signature, in cells that are

highly expressing (activity $h > 50$) the acNMF-identified program 36, which has characteristics

547   consistent with cancer cells and is expressed primarily in cisplatin treated mouse NB847. The

548   yellow box shows the mean expression of all other genes in these cells.

549   l) UMAP plot showing RNA-velocity analysis of mouse NB853. The cellular trajectory, inferred

550   from splicing dynamics, shown by the arrows, is consistent with cancer cells actively

551   transitioning to a mesenchymal state, which is marked by the expression of the mesenchymal-

552   cancer Program 39 (color scale).

553   m) Detailed view of the box in (l).

554   n) Like (l) but for the sample NB847 and mesenchymal Program 36.

555   o) Representative RNA-ISH images for co-localization of *Twist1* with human *MYCN* in vehicle

556   treated (top panels, NB855) and drug treated samples (bottom panels, NB887).

557   p) Bar plot showing the percentage of *Twist1*^{+} cells in each of our sampled mouse slides (y axis),

558   quantified using the HALO software. (*, $P < 0.05$ by t-test, error bars represent SEM)

559   q) Bar plot showing the percentage of *Twist1*^{+} cells (y axis) in either vehicle treated, or cisplatin

560   treated tumors that do or do not co express *MYCN* (colors). (*, $P < 0.05$; **, $P < 0.01$ by t-test)

561   r) Schematic representation of the distinct mesenchymal-like gene expression programs that can be

562   identified across neuroblastoma datasets and preclinical models. These programs have a varying

563   statistical resemblance to the classical cell line derived Van Groningen mesenchymal signature

564   (MES), but despite this, may capture qualitatively different aspects of neuroblastoma cell biology.

DISCUSSION

Several single-cell RNA-seq maps of neuroblastoma patient tumors have now been published[6,10]. However, their conclusions were in marked disagreement, with 6 different cell types proposed as the neuroblastoma cell of origin and major disagreements on evidence for a cell line-derived drug resistant mesenchymal-like cell state *in vivo*. To address these issues, we have performed the first integrative analysis of single-cell RNA-seq data from human neuroblastoma tumors and preclinical models. To achieve this, we developed a novel NMF-based computational method and a front-end user interface for interpreting the resulting gene expression programs, which provides a new public resource for interrogating neuroblastoma biology (pscb.stjude.org). Using these tools, we discovered that classical neuroblastoma adrenergic and mesenchymal programs can be subdivided, with implications for drug resistance and cell of origin.

Specifically, we identified novel neuroblastoma adrenergic programs, mimicking the sympathoadrenal developmental lineage, and showed that neuroblastoma tumors are co-expressing marker genes of multiple developmental cell types. The co-expression pattern of these programs potentially explains why so many conflicting cell types have been proposed as the neuroblastoma cell of origin, because neuroblastoma cells concurrently express features of e.g. sympathoblasts and developing chromaffin/neuronal cells. These behaviors were preserved between human tumors and preclinical models. We propose a conceptual mapping of neuroblastoma gene expression programs to sympathoadrenal development in Fig. 3r, naming these adrenergic programs "Adrenergic I (sympathoblast-like)", "Adrenergic II (pre-neuronal-like)" and "Neuroblastoma-MYC".

We also found that the classical cell-line-derived mesenchymal-like program has differences between human tumors and preclinical models. First, while the neuroblastoma mesenchymal signature was clearly identifiable in neuroblastoma cell lines, we could not identify strong

evidence that a similar program is expressed in cancer cells in human tumors—neither by

inferred copy number nor by RNA ISH. Regardless, it is logically impossible to conclude the

non-existence of such cells. Indeed, they could be identifiable in other tumors, by profiling larger

numbers of cells, or by using more sensitive technologies (e.g., our RNA ISH experiments had

difficulty distinguishing cancer vs fibroblast/Schwann-like cells at the boundaries of stromal

regions, it is conceivable some cell types could have dropped out of the single-cell profiling, and

tools for inferring copy number are imperfect[37]). Despite this, we can conclude that such cells

are likely less abundant than fibroblasts and Schwann-like cells, which strongly express a

similar mesenchymal-like signature and thus, on the basis of marker gene expression, are

easily confused for mesenchymal-like neuroblastoma cells. These analyses also identified novel

subpopulations of cancer associated fibroblasts in most datasets/tumors, which we could

validate using RNA ISH in our GEMM, revealing at least inflammatory, myofibroblast and

potentially intermediate subpopulations. Similar cell types are critical in regulating

immunosuppression, metastasis and progression in other cancers[27] and determining the

biological/therapeutic relevance of these new cell types in neuroblastoma will form the basis for

future research.

Lastly, we identified rare, high-risk, drug pretreated tumors, which weakly express

mesenchymal-like features in cancer cells that remain predominantly adrenergic. This contrasts

with the behavior in cell lines, where a mesenchymal state coincides with loss of adrenergic

features. This may be related to the concept of "high risk tumors with mesenchymal-like

features", which was recently proposed by Jansky *et al*[17], but in contrast to Jansky we showed

these cells at least partially resemble the classical Van Groningen mesenchymal signature. We

also identified a potential source of this phenotype, showing that a mesenchymal-like program

could be strongly induced *in vivo* in an acutely chemotherapy treated GEMM. This is consistent

with observations across several other cancers that EMT can represent an apoptosis escape

mechanism that leads to drug resistance[38,39]. It appears high-risk neuroblastoma cells may be

primed to undergo such a transition. It is tempting to speculate that targeting this process could

circumvent chemoresistance and it is plausible that some mesenchymal-like cell lines may

represent a good model for this behavior. Because of the very short 24-hour treatment window,

this finding also implies that the expression of mesenchymal-like genes need not necessarily

emerge in relapsed neuroblastoma tumors by purifying selection, as previously speculated[6,10,40].

However, the clinical significance of these drug-induced and weakly enriched mesenchymal

programs, and their potential role in facilitating escape from chemotherapy induced apoptosis,

remains to be determined. In general, our results argue that mesenchymal-like programs in

neuroblastoma could be subdivided into at least (1) a weak mesenchymal-like signature co-

expressed in still-predominantly-adrenergic cells of some high-risk tumors, which (2) could

potentially be chemotherapy induced; (3) the classical mesenchymal-like signature in cell lines,

which also strongly express features similar to (4) cancer associated fibroblasts and Schwann-

like cells found in tumors. As these represent (at least partially) qualitatively different entities, we

propose naming these (1) Mes-weak, (2) Mes-EMT-like, (3) Mes-classical, and (4) Mes-

sympathoadrenal-differentiation (Fig. 6r).

Finally, our findings only touch on the biological insights that could be gained from an

interpretable integrated representation of single-cell RNA-seq data from human neuroblastoma

and preclinical models. For example, our NMF-based models recovered a rich representation of

the immune component of neuroblastoma tumors, largely recapitulated in our GEMM. We have

made all the data and models available in our interactive web-based platform (pscb.stjude.org),

which we encourage readers to review, discuss and use as a map for future discoveries.

METHODS

Establishing a neuroblastoma genetic mouse model.

LSL-MYCN;Dbh-iCre mice[33] (129X1/SvJ) were obtained from Michael A. Dyer's lab (St. Jude). This study was carried out in strict accordance with the recommendations in the Guide to Care and Use of Laboratory Animals of the National Institute of Health. The protocol was approved by the Institutional Animal Care and Use Committee at St. Jude Children's Research Hospital. All mice were housed per approved IACUC protocols, on a 12−12 light cycle (light on 6 am off 6 pm) and provided food and water ad libitum. Neuroblastoma-like tumors comparable to human neuroblastoma arose in the abdomen from either the adrenal gland or the celiac and superior cervical ganglia with a penetrance of approximately 50%, at a median of about 6 months old. The tumor volumes were monitored by ultrasound using the Vevo 3100 system (Fujifilm-Visualsonics, Toronto, Canada), and once an adrenal tumor had reached 500mm^3 in diameter, the mice were treated with either a single pharmacologically relevant[41] 2 mg/kg dose of cisplatin ($n = 6$), or vehicle control ($n = 5$), by intraperitoneal injection. The mice were euthanized at 24 hours, and tumors were immediately harvested and subjected to single-cell RNA-seq, using the protocols described below.

Orthotopic patient-derived xenografts

Flash-frozen fragments of orthotopic patient-derived xenografts were obtained through the St. Jude Childhood Solid Tumor Network (https://cstn.stjude.cloud/)[35,42]. Approximately 50-100 mg of frozen tissue underwent nuclei extraction using manual disruption within a chilled Tween containing buffer[43]. To generate fresh xenograft tissue, cells were injected into the para-adrenal space using ultrasound guidance[44] into immunocompromised nude mice. Tumors were

harvested from xenograft-bearing mice, and approximately 250-500 mg of tissue were

dissociated using the Papain Dissociation System (Worthington Biochemical)[43].

Single-cell/single-nuclear RNA-seq data generation and preprocessing

Mouse: Single cells from mouse tumors were obtained through dissociation using the Papain

Enzymatic dissociation method following the Worthington kit (cat. No. LK003150), and final

dissociated cells were suspended in the DMEM medium.

Cell Lines: The following NB cell lines were maintained in the following culture conditions (5%

CO_2, 37° C, RPMI medium (10%FBS, 2mM L-glutamine, 100IU/ml penicillin, 100μg/ml

streptomycin); BE2C, BE2M17, CHP134, CHP212, GIMEN, IMR5, KELLY, MHHNB11, NGP,

SKNAS, SKNFI, SKNSH, TGW. Cells were harvested, and viabilty was measured using Lunc

Cell Counter AO/PI dye. We processed samples that showed greater than 90% viability.

Library Preparation and Sequencing: The dissociated/suspended single cells were filtered and

strained through a 40μm strainer and cells were counted using the Luna cell counter. Next, they

were loaded into Chromium Chips from Single cell 3' Gene expression V3.1 kit (10X Genomics,

Pleasanton, CA) with target capture of 6000 cells. The cDNA generation, library preparation,

and QC was performed following 10X Genomics protocol. The library was sequenced in

Novaseq-V1 reagents, and the sequenced data were processed using the Cell Ranger Software

(10X Genomics) mapped to mm10 (mouse) or GRCh38 (cell line). Poor quality and outlier cells

were identified and removed. Analysis downstream of acNMF, was conducted on normalized

read counts (SCTransform, Seurat R package) of the resulting cells.

Automatic Consensus Non-negative Matrix Factorization (acNMF)

For each dataset, raw read counts were merged into a single matrix containing all samples.

50,000 cells were subsampled per dataset, and then randomly split into two subsets containing

roughly equal numbers of cells. cNMF[18] (https://github.com/dylkot/cNMF/) was applied to each

split independently by performing 200 NMF iterations per rank (k), spanning a range of k = 2 to k

= 200. Outlier replicates, defined by Euclidean distance, were filtered at a rate of 10%. The

consistency of gene expression programs between the data splits was assessed by calculating

the Jaccard similarity index of Z-score normalized (see Kotlier *et al*.[18] for details) gene weight

coefficients at each value of k. P-values for all pairwise comparisons between the columns of

the component matrices were calculated using the jaccard.test.mca function from the

'jaccardtest' R package[45] followed by Bonferroni multiple testing correction. This was carried out

over a range of Jaccard lengths. All significant pairs (P < 0.05) of components between data

splits were then represented as node pairs in an undirected network graph using the R package

igraph[46]. Community detection was performed on the underlying graph using edge

betweenness centrality, and the number of distinct communities were recorded. These

communities represent replicated gene expression programs between data splits, and these

were used as the basis of comparison to determine optimal parameters for rank (k) and Jaccard

length on each dataset. For each Jaccard length the number of discrete communities was

plotted against all values of k, and a loess regression was performed to facilitate curve

smoothing. The inflection point of these concave curves was calculated using the 'elbow' R

package (https://nicolascasajus.fr/elbow/). Cost values, representing residual values after the

inflection point, were used to evaluate the stability of the solution. A linear regression was

performed on cost values of each Jaccard length curve, and the slope was recorded. The

optimal Jaccard length was established by determining which slope was closest to -1.0, which

represents a solution whereby the number of reproducible programs remains approximately

constant for all values of k greater than ground truth (Supplementary Figure 1d). Using the

established parameters for rank (k) and Jaccard length, final reproducible programs for each

dataset were calculated by averaging over all nodes (i.e., cNMF gene loading scores (i.e.

weights)) per community in the network graph.

Identifying gene expression programs replicated across different datasets using a network graph

To determine which gene expression programs were replicated across datasets, or between

human tumors and preclinical models, all pairwise comparisons between programs from all

datasets were performed using an asymmetric Jaccard similarity test, fixing the Jaccard length

to that tuned for each dataset above, followed by Bonferroni correction (keeping connections at

FWER < 0.05). We visually represented connected nodes in a network graph (e.g., Fig. 4a) –

the layout of which was established using the force-directed Fruchterman-Reingold algorithm.

The network structure facilitated the interpretation of these programs, with communities

detected by modularity scores calculated from random walks of the graph.

Web-based platform for annotation, exploration, and cross-dataset integration of acNMF output.

For each gene expression program, an interactive web-based report was created, which was

used to support annotation and interpretation. To estimate variability between subjective

annotators, the GOSH dataset was independently annotated by co-authors P.G. and Y.K, and a

consensus annotation was subsequently reached by discussing and merging these annotations,

including subjective assignment of confidence levels. The web-based reports were created

using the R package *knitr*[47], which for each program summarized a rich catalogue of biologically

relevant information/enrichments, including 282 marker gene lists we curated from the literature.

The interactive plots were created using *plotly*[48]. The broader network-based representation

comparing gene expression programs across datasets, as well as the tools for organizing the

reports and cataloguing/displaying relevant metadata was created using *Shiny*[49]. The complete

web platform is accessible at pscb.stjude.org.

RNA *in situ* hybridization (RNA ISH) and HALO analysis

RNA ISH was performed in fresh frozen mouse tissue samples (NB837, NB839, NB853, NB855,

NB856, NB864, NB883, NB887) using the RNAscope HiPlex V2 assay Reagent Kit. These data

were generated by Advanced Cell Diagnostics (7707 Gateway Blvd., Newark, CA 94560, USA).

Briefly, fresh frozen tissue sections were pretreated with 10% NBF and protease prior to

hybridization with the target oligo probes (Mm-Tagln, Mm-Acta2, Mm-C3, Mm-Sox10, Mm-Plp1,

Hs-MYCN, Mm-Twist1, and Mm-Ddc). Immediately following hybridization, the RNAscope

Fluorescent V2 Assay was performed with the preamplifier, amplifier, and RNAscope HiPlex

FFPE Reagent to reduce autofluorescence. Fluorophores T1-T4 were then hybridized

sequentially, followed by RNAscope DAPI counterstain. After imaging, the first group of

multiplexed fluorophores were then cleaved, and the process was repeated for each additional

group of fluorophores. Fluorescence images were acquired using a Polaris 40X full-slide digital

slide scanner. The resulting multispectral images were then uploaded into HALO Image

Analysis platform v3.5.3577.140 (Indica Labs), and the High-Plex FL v2.0 module was used to

construct the image analysis algorithms. These included nuclei detection, cytoplasmic

segmentation, and FISH detection criteria based on intensity thresholds for each probe in each

sample.

CNV Inference in scRNA-seq data

We used InferCNV[34] to identify regions of copy number variation from single-cell RNA-seq,

which we used as evidence to differentiate between cancer and non-cancerous "normal" cells.

InferCNV was run on each patient/sample independently. Reference normal cells were selected

from clear immune cells, identified by acNMF (selecting cells expressing an immune program at

$h > 100$). In the case of the GOSH dataset, we used the author's original immune cell

annotations, which were essentially identical to the acNMF annotations. In cell lines, we defined

the reference normal using immune cells from the Dong dataset. InferCNV's six-state Hidden

Markov Model (i6) predicted CNV regions and states, with posterior probabilities of CNV regions

assigned to a given state using a Bayesian network at a value of P(Normal) = 0.3 (all other

parameters were used at default settings).

Machine learning classifiers for predicting cancer/normal status of mesenchymal-like

cells using inferred copy number profiles.

To predict the cancer/normal status of mesenchymal-like cells on a per-cell basis, we tested 3

classification models, a regularized logistic generalized linear model (GLM), a random forest

(RF), and a support vector machine (SVM), which all achieved comparable performance. These

were implemented in the R packages *glmnet*, *randomForest,* and *SVM* (linear kernel)

respectively. We identified cancer cells, endothelial cells, or ambiguous mesenchymal-like cells

if an appropriate program was expressed in that cell at $h > 100$. We randomly split clear cancer

cells into 75% training set and 25% test set. Cell-specific copy number estimates, which were

treated as the model's input features, were obtained from inferCNV's predicted regions of copy

number variation (inferCNV-features) or were obtained manually, by taking the average

standardized TPM expression level in groups of 50 collocated genes along the genome

(manual-features). For each sample, a classifier was then trained using sample-specific cancer

cells and immune cells (representing normal cells). For each sample, these trained models were

then applied to the held-out reference normal endothelial cells, or the held-out ambiguous

mesenchymal-like cells, outputting a predicted class of 0 (normal) or 1 (cancer) for each cell.

These results were then assembled into a 2 × 2 contingency table, where we applied a Fisher's

exact test to compare the frequency with which the model classified mesenchymal-like cells as

cancer cells, against the frequency it misclassified reference normal endothelial cells as cancer

cells. Note that for model training/testing in the GEMM data, because the mice were genetically

identical, we pooled the immune cells and endothelial cells in the drug-treated and vehicle-

treated groups, which increased the size of the reference normal pool of cells and should

improve power.

Differential expression, gene set enrichment analysis, and RNA-velocity analysis of

cisplatin treated GEMM.

We performed differential expression analysis of our cisplatin treated vs vehicle treated GEMM

using the R package DESeq2[50] by 'pseudobulking' cells from each mouse using the

aggregate.Matrix function in the R package Matrix.utils. All genes were ranked by logFC

between vehicle and cisplatin treated mice, and then were subjected to GSEA[51] for functional

enrichments of the mSigDB Hallmarks gene set, using default parameter settings. Trajectory

inference and pseudotime analysis were performed with the R package Monocle3[52]. RNA

velocity was assessed by applying the dynamical module of scVelo[52] (v0.2.5) under default

settings.

Spatial pathology analyses and immunohistochemistry.

For H&E staining, the harvested mouse tumor tissue was embedded in Tissue-Tek O.C.T.

embedding medium (Sakura Finetek) and flash frozen on a metal block in liquid nitrogen then

preserved at –80°C until further processing. Each tissue block was equilibrated to -20°C in a

cryostat chamber (CM3050S, Leica BioSciences) for 30 minutes before making 10-μm sections

collected onto Superfrost slides. The slides were incubated at 37°C for 1 minute and transferred

to a container containing pre-chilled methanol for 30 minutes at -20C in the upright position.

After methanol fixing, the excess methanol was wiped out from the bottom of the slides without

disrupting the tissue section. After methanol fixation, the slides were immersed into water 10

times gently and incubated in hematoxylin solution for 1 minute followed by immersing slides 10

times into 800 ml water. The slides were then submerged 10 times into Bluing buffer and

immersed into water to remove the excess Bluing buffer. Next, slides were dipped into 96%

ethanol 10 times followed by incubation with Eosin for 30 seconds. The excess Eosin was

removed by immersing slides 10 times into 3 different containers containing 100% ethanol. After

that, tissue slides were mounted, and images were acquired using Axioscan slide scanner

(Zeiss, Oberkochen, DE) up to a 20X scalable magnification. For our immunohistochemistry

analysis of fresh frozen slides used for the RNA ISH experiments serial unstained sections of

murine NB-like tumors were fixed in acetone for 20 minutes. Fixed slides were then wet loaded

on the Ventana Discovery Ultra autostainer (Roche, Basel, CH) using the Ventana Discovery

Ultra antigen retrieval CC1 (catalogue #950-500) for 64 minutes followed by the application of

anti-PHOX2B antibody (Abcam, ab183741) at a 1:100 dilution for 60 minutes. OmniMap anti-

rabbit HRP (catalogue #760-4311) for 16 minutes, followed by the ChromoMap DAB kit

(catalogue #760-159) for 8 minutes, followed by counterstained with hematoxylin, and the post-

counterstain Bluing Reagent (catalogue #760-2037) for 8 minutes was used for the detection

and visualization of PHOX2B in tissue sections. Slides immunolabeled for COL1A1 (Cell

Signaling Technology, Danvers, MA; catalogue #66948) were deparaffinized and underwent

HIER Staining performed on Leica Bond RX autostainer (Leica Biosystems, Bannockburn, IL)

using Epitope Retrieval solution 2 (ER2, AR9640, Lecia Biosystems) for 30 minutes followed by

incubation with the primary antibody at 1:500 for 15 minutes and visualization with a secondary

rabbit anti-mouse antibody (Abcam, ab133469) and the Bond Polymer Refine Detection kit

(DS9800, Leica Biosystems). Positive and negative tissue controls and isotype controls were

used for examining the specificity of staining and species cross-reactivity for both PHOX2B and

COL1A1 in comparison with the experimental tissue slides. Slides were then cleaned with

warm water and detergent, dehydrated, and coverslipped for pathology review and imaging.

Data and code accessibility

Simulated scRNA-seq datasets were obtained through CodeOcean

(https://doi.org/10.24433/CO.9044782e-cb96-4733-8a4f-bf42c21399e6) using the

Step1_Simulate.ipynb Jupyter Notebook. Default parameters, defined by the implementation of

the R package 'splatter' on a published scRNA-seq dataset, were used to generate five replicate

simulations across three conditions of varying signal:noise levels. The raw readcounts from

each of these simulations were subjected to the acNMF approach described below

(https://rchapple2.github.io/acNMF/). The gene and cell parameters generated from this code

were used to evaluate the recovery of programs following the acNMF analysis.   Human

datasets were downloaded via the following accession numbers. Dong: GSE137804. Jansky:

EGAS00001004388. Kildisiute: EGAD00001008345. Cell line and mouse data deposited in

GSE229224 and GSE229226, respectively. PDX deposited in GSE228957.

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