Deconstructing Intratumoral Heterogeneity through Multiomic and Multiscale Analysis of Serial Sections

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Abstract

Cancerous tumors may contain billions of cells including distinct malignant clones and nonmalignant cell types. Clarifying the evolutionary histories, prevalence, and defining molecular features of these cells is essential for improving clinical outcomes, since intratumoral heterogeneity provides fuel for acquired resistance to targeted therapies. Here we present a statistically motivated strategy for deconstructing intratumoral heterogeneity through multiomic and multiscale analysis of serial tumor sections. By combining deep sampling of IDH-mutant astrocytomas with integrative analysis of single-nucleotide variants, copy-number variants, and gene expression, we reconstruct and validate the phylogenies, spatial distributions, and transcriptional profiles of distinct malignant clones, which are not observed in normal human brain samples. Importantly, by genotyping nuclei analyzed by single-nucleus RNA-seq for truncal mutations identified from bulk tumor sections, we show that existing strategies for inferring malignancy from single-cell transcriptomes may be inaccurate. Furthermore, we identify a core set of genes that is consistently expressed by the truncal clone, including *AKR1C3*, whose expression is associated with poor outcomes in several types of cancer. This work establishes a robust and flexible strategy for precisely deconstructing intratumoral heterogeneity in clinical specimens and clarifying the molecular profiles of distinct cellular populations in any kind of solid tumor.

Introduction

Cancerous tumors are complex ecosystems containing huge numbers of malignant and nonmalignant cells. Malignant cells evolve over time by acquiring mutations through diverse mechanisms that promote genetic[1] and epigenetic[2] heterogeneity, which may occur in a neutral fashion[3] or as a Darwinian response to therapeutic or other environmental pressures[4]. Nonmalignant cells comprise diverse tumor microenvironments (TMEs) that vary within and

among tissues and individuals and may be influenced by malignant cells to adopt tumor-

suppressive[5] or tumor-supportive[6] behaviors. The genetic, epigenetic, and microenvironmental

diversity of individual tumors is collectively described as intratumoral heterogeneity (ITH)[7].

Clarifying the extent of ITH is an important goal for precision medicine, since most mutations are

not shared between malignant clones from different individuals[8–12] and ITH provides the

substrate for acquired resistance to targeted therapies[7,13,14]. To frame this goal more precisely:

Clarifying ITH requires understanding the evolutionary histories, prevalence, and defining

molecular features of distinct malignant clones and nonmalignant cell types of the TME.

Investigators have typically studied ITH by applying multiomic assays to a small number

of bulk subsamples from the same tumor. Multi-region analyses of renal carcinoma[15], breast

cancer[16], colorectal cancer[17], glioblastoma[18], and others[19] have all identified substantial spatial

variation in mutation frequencies and other molecular phenotypes, suggesting clonal diversity

and variable TMEs. Although these studies highlight extensive ITH, their design is high-

dimensional in omics feature space but low-dimensional in sample space, which can lead to

biased inference and inflated false-positive error rates for individual molecular features[20].

Furthermore, the small number of analyzed bulk samples limits the conclusions that can be

drawn about distinct malignant clones and nonmalignant cell types. Recent efforts using single-

cell methods have provided new perspectives on ITH [21–23], but it remains non-trivial to isolate

and sequence DNA and RNA from the same cell at scale. As such, malignancy is often inferred

for single cells from the presence of copy-number variations (CNVs), which are themselves

inferred from single-cell RNA-seq (scRNA-seq) data. However, scRNA-seq data are confounded

by technical factors related to tissue dissociation, sampling bias, noise, contamination, and

sparsity[24–28], which muddle the relationships between malignant cell genotypes and molecular

phenotypes, particularly for cancers that lack consistent CNVs.

We have shown that variation in the cellular composition of intact human brain samples

drives covariation of transcripts that are uniquely or predominantly expressed in specific kinds of

cells[29,30]. We have also shown that the correlation between a gene's expression pattern and the

abundance of a cell type is a proxy for the extent to which the same gene is differentially

expressed by that cell type[29]. These findings suggest that molecular profiles of malignant clones

can be determined by correlating genome-wide molecular patterns with clonal abundance,

which can be revealed through integrative analysis of variant allele frequencies (VAFs)[31,32] over

a large number of bulk subsamples. In principle, such patterns should be highly robust since

they derive from millions or even billions of cells and do not suffer from the technical and

practical limitations imposed by studying single cells. Similar logic extends to nonmalignant cell

types of the TME[29].

Here we describe a novel approach for deconstructing ITH through multiomic and

multiscale analysis of individual tumor specimens. By amplifying IDH-mutant astrocytomas into

a large number of standardized biological replicates through serial sectioning, we exploit

variation in the cellular composition of intact tumor sections to reveal molecular signatures of

distinct malignant clones and nonmalignant cell types of the TME. Through integrative analysis

of single-nucleotide variants (SNVs) and CNVs, we precisely define the evolutionary histories

and spatial distributions of malignant clones. By comparing these distributions to gene

expression data derived from the same tumor sections, we reveal clone-specific transcriptional

profiles and validate them orthogonally through comparisons with normal human brain and

analyses of individual nuclei from interpolated tumor sections. Our findings suggest that a core

set of genes is consistently expressed by the truncal clone of human astrocytomas, offering new

therapeutic targets and a generalizable strategy for precisely deconstructing ITH and clarifying

the molecular profiles of distinct cellular populations in any kind of solid tumor.

Results

Case 1: analysis of clonal composition

To put these ideas into practice, we obtained a resected specimen from a primary diffuse glioma

that was removed from the left cerebral hemisphere of a 40 y.o. female who presented with

language deficits (**Fig. 1a-c**). Molecular pathology revealed evidence for mutations in *IDH1* and

TP53 (**Fig. 1d-e**), no evidence for chromosome 1p/19q codeletion (data not shown), and KI67

labeling of 6% (data not shown), consistent with a CNS WHO grade 2 astrocytoma, IDH-mutant.

We reasoned that sub-sampling (via serial sectioning) would introduce variation in cellular

composition across sections, which would in turn drive covariation of molecular markers for

distinct subpopulations of malignant and nonmalignant cells. We therefore cut 81 cryosections

along the tumor specimen's longest axis (**Fig. 1f**), followed by automated DNA/RNA extraction

from each section (**Table S1**). To identify mutations and characterize the clonal landscape, we

performed WES on DNA isolated from sections 14, 39, 69, and the patient's blood. Mutations

detected in blood or in genes with very low tumor expression levels were excluded. Of the

remaining 33 mutations (**Table S2**), including an in-frame deletion in *ATRX*, which is often

mutated in IDH-mutant astrocytomas[33], 18 were validated by Sanger sequencing, five were

validated by deep sequencing of PCR amplicons spanning each mutation (amp-seq; **Table S3**),

and ten (mostly indels) could not be validated (**Table S2**). Among the 23 validated mutations, 16

were detected by WES in all three tumor sections and seven were detected in only one section,

suggesting clonal heterogeneity among malignant cells (**Fig. S1a**).

To determine the relative abundance and spatial distributions of cells carrying mutations

within the tumor specimen, we quantified VAFs for validated somatic mutations in each tumor

section. We first used droplet digital PCR (ddPCR) to quantify VAFs for IDH1 R132H and

observed that this method was highly reproducible (**Fig. S1b**). However, given the limited

amount of DNA from each tumor section (**Table S1**), it was not feasible to quantify all VAFs in

this fashion. We therefore tested whether amp-seq yielded VAFs for IDH1 R132H that were

comparable to those obtained by ddPCR. We observed high concordance between these

methods (**Fig. S1b**) and subsequently used amp-seq to quantify VAFs for all validated somatic

mutations over all tumor sections, with theoretical VAF detection sensitivity of < 1%.

Amp-seq was performed in two sequencing runs: an initial run consisting of 25

amplicons (mean coverage: 3.0×10^3 reads/mutation/section) and a second run consisting of

nine amplicons (mean coverage: 1.7×10^4 reads/mutation/section). To analyze the stability of

amp-seq-derived VAFs, we downsampled reads spanning IDH1 R132H or TP53 L145P and

calculated the root-mean-square-error (RMSE) and Pearson correlation between VAFs from full

and downsampled read depths. This analysis revealed monotonic improvement in VAF

estimates as a function of read depth (**Fig. S1c-d**). Notably, VAFs derived from 100-200x

coverage were far noisier than VAFs derived from full coverage, indicating that conventional

WES data are inadequate for precisely estimating VAFs and malignant cell abundance.

We performed unsupervised hierarchical clustering of amp-seq data to identify mutations

with similar VAF patterns within the tumor sample (**Fig. 1g** and **Table S4**). This analysis

revealed three distinct clusters. Cluster 1 included 15 mutations with VAFs that decreased in the

latter sections of the tumor sample, which were separated according to sequencing run to

display the effects of read depth (**Fig. 1h,i**). Cluster 2 included four mutations with VAFs that

increased in the latter sections of the tumor sample (**Fig. 1j**). Cluster 3 included three mutations

with VAFs that peaked in the middle sections of the tumor sample (**Fig. 1k**).

Focusing on the sequencing run with higher coverage, we observed that five mutations

in cluster 1 (including IDH1 R132H) had VAFs over all tumor sections that were statistically

indistinguishable (**Fig. 1h**). Two other mutations (TP53 L145P and ACCS A197T) followed a

similar pattern but at different scales. For example, VAFs for TP53 L145P were two-fold higher

than VAFs for IDH1 R132H (**Fig. 1h**). We tested the hypothesis that CNVs might underlie these

patterns by performing qPCR for these genes in each tumor section and the patient's blood. We

observed approximately diploid copy numbers for both genes in all analyzed sections (**Fig.**

S1e), indicating that observed VAFs for these mutations are unlikely to result from CNVs.

Instead, VAFs for TP53 L145P appear to reflect copy-neutral loss of heterozygosity for

chromosome 17p (chr17p LOH) that occurred early in the tumor's evolution (but after the L145P

point mutation). Notably, the frequencies of chr17p LOH (derived from B-allele frequencies)

were highly concordant between WES and amp-seq data (r=0.99, **Fig. S1f** [top]). In contrast,

the lower VAFs for ACCS A197T suggest that this mutation appeared after the other mutations

comprising cluster 1.

To determine the clonal composition and evolutionary history of the tumor specimen

more precisely, we analyzed genome-wide CNVs and their relationships to SNVs quantified by

amp-seq. CNVs were called from WES (n=3 sections) and DNA methylation (n=68 sections)

data using FACETS[34] and ChAMPS[35], respectively, yielding highly concordant frequencies for

copy number changes (r=0.92, **Fig. S1f** [bottom] and **Table S5**). Through combined analysis of

SNV and CNV frequencies over all tumor sections, we produced an integrated model of tumor

evolution. Specifically, we used PyClone[31] to jointly analyze SNV and CNV frequencies, which

identified seven distinct clusters and their overall prevalence. Subsequently, the evolutionary

history of the tumor specimen was reconstructed using CITUP[32], which produced the most likely

phylogenetic tree (**Fig. 1l**) and frequencies of six malignant clones over all sections (**Fig. 1m**

and **Table S6**). These analyses confirmed the truncal nature of mutations in *IDH1* and *TP53*[33],

while revealing wide variation in the purity of individual tumor sections (range: 38.3 - 84.8%;

Table S6).

Case 1: analysis of gene expression

Intuitively, genes whose expression patterns correlate most strongly with the abundance of a

cell type should include optimal biomarkers. This intuition can also be proven mathematically

and empirically. **Fig. 2a-c** illustrates a hypothetical example in which the goal is to identify

optimal transcriptional markers of malignant cells in a human brain tumor. A conventional

strategy would involve physically isolating individual cells, transcriptionally profiling them by

single-cell RNA-seq (scRNA-seq), inferring the malignancy of individual cells from the scRNA-

seq data based on the presence of driver mutations (CNVs and/or SNVs), and performing

differential expression analysis for each gene between all malignant and nonmalignant cells (for

example, using a t-test; **Fig. 2b**). **Fig. 2c** shows an alternative analytical path that leads to the

same place: by correlating expression levels of the same hypothetical gene from **Fig. 2b** with a

dichotomous variable denoting malignant cell abundance (1=malignant cells, 0=nonmalignant

cells), the resulting statistical significance is identical to that obtained by differential expression

analysis.

Although the t-test and correlation produce identical results when the independent

variable is dichotomous, this is not the case when the independent variable is continuous.

However, we have shown via pseudobulk analysis of scRNA-seq data from normal adult human

brain that: i) the correlation between the expression pattern of a gene and the [continuous]

abundance of a cell type accurately predicts differential expression of that gene in that cell type,

and ii) cell-type-specific gene coexpression relationships accurately predict cellular abundance

in pseudobulk samples[29]. To determine whether these findings extend to malignant cells, we

repeated this analysis using scRNA-seq data from 10 adult human astrocytomas[22] (**Fig. 2d**).

Genome-wide gene coexpression analysis of pseudobulk samples obtained by randomly

aggregating scRNA-seq data revealed a malignant cell coexpression module whose

eigengene[36] (i.e., first principal component, which summarizes the characteristic expression

pattern of the module over all samples) closely tracked the actual abundance of sampled

malignant cells (**Fig. 2e-f**). Furthermore, the genes that were most significantly up-regulated in

malignant cells per differential expression analysis of the underlying scRNA-seq data (**Fig. 2d**)

also had the highest correlations to malignant cell abundance (k_{ME}) in pseudobulk data (**Fig.**

2g). These results show that gene expression profiles of malignant cells can be revealed by

correlating genome-wide expression patterns with malignant cell abundance in heterogeneous

tumor samples.

Based on this reasoning, we explored the relationships between clonal abundance and bulk gene expression data, which were produced from the same tumor sections used to define clonal abundance (**Fig. 1f**). We first performed genome-wide gene coexpression analysis to identify groups of genes with similar expression patterns over all tumor sections, which may reflect variation in the abundance of distinct cellular populations. We identified 38 modules of coexpressed genes (arbitrarily labeled by colors), which were summarized by their eigengenes and hierarchically clustered (**Table S7, Fig. 3a-c**). As we have shown previously[29,30,37,38] many modules were significantly enriched with markers of nonmalignant cell types (**Fig. S2a-d**). By comparing cumulative clonal abundance (**Fig. 1m**) to module eigengenes over all tumor sections, we identified five gene coexpression modules whose expression patterns closely tracked the abundance of clone 1 (turquoise: r = 0.97, **Fig. 3d**), clone 3 (blue: r = 0.84, **Fig. 3e**), clone 4 (black: r = 0.83, **Fig. 3f**), clone 5 (midnightblue: r = 0.71, **Fig. 3g**), and clone 6 (steelblue: r = 0.69, data not shown). We did not identify a module that was significantly correlated with clone 2, which represented only 0.001% of cells (**Fig. 1l**).

To characterize these modules, we performed enrichment analysis with biologically relevant gene sets (**Fig. 3d-g**). We first asked whether genes within clonal CNV boundaries (**Fig. 1l** and **Table S5**) were significantly enriched (for gains) or depleted (for deletions) in the bulk coexpression modules most strongly associated with each clone (**Table S8**). Notably, all such gene sets were significantly enriched in the appropriate module and expected direction (e.g., chr7 gain for clone 1 [**Fig. 3d**]**,** chr2p deletion for clone 3 [**Fig. 3e**], and chr10p gain for clone 5 [**Fig. 3g**]). We next analyzed publicly available gene sets from diverse sources (**Table S9**). We found that the largest (turquoise) module, which closely tracked the abundance of clone 1 (i.e., tumor purity), was significantly enriched with markers of oligodendrocyte progenitor cells (OPCs) and radial glia, genes comprising the 'classical' subtype of glioblastoma proposed by Verhaak et al.[39] and numerous gene sets related to microglial infiltration and activation. The second largest (blue) module, which tracked clone 3, was significantly enriched with neuronal

gene sets as well as genes that are down-regulated pursuant to *IDH1* mutations. The black

module, which tracked clone 4, was enriched with astrocyte markers as well as genes that are

differentially regulated during development and glioma. The midnightblue module, which tracked

clone 5, was enriched with markers of smooth muscle cells, genes comprising the

'mesenchymal' subtype of glioblastoma[39,40], and gene sets related to epithelial-mesenchymal

transition and invasiveness. The steelblue module, which tracked clone 6, was enriched with

markers of non-resident immune cells (data not shown).

To further characterize the transcriptional signatures associated with each clone, we

used multiple linear regression to model genome-wide expression levels as a function of clonal

abundance. To account for collinearity and the dominant effect of clone 1, we used a group

lasso model with bootstrapped clonal abundance vectors (real or permuted) as predictors (**Fig.**

S2e-i). We restricted our focus to genes that were significantly and stably modeled by a single

clone (in addition to clone 1, per the group lasso model, **Table S10**). Enrichment analysis of

these genes largely recapitulated enrichment analysis of gene coexpression modules

associated with each clone, including the associations of different clones with different cell types

(**Table S11** and **Fig. S2i**).

The associations of different clones with different cell types suggest two non-mutually

exclusive possibilities. First, different clones may preferentially express different cell-type-

specific transcriptional programs. Second, different clones may preferentially associate with

different nonmalignant cell types in the TME, leading to correlated gene expression patterns.

Although such possibilities are ideally studied at the level of individual cells, all sections from

this case were consumed during bulk data production. However, we reasoned that bona fide

transcriptional signatures of malignant clones should be absent from non-neoplastic human

brains. To test this hypothesis, we profiled gene expression in 361 cryosections from four

neurotypical adult human brain samples (**Table S12**) and performed genome-wide differential

coexpression analysis by subtracting normal correlations from tumor correlations, such that

tumor-specific gene coexpression relations would be retained (**Fig. S3a, Table S13, Table**

S14). This analysis revealed tumor-specific gene coexpression modules that tracked the

abundance of distinct clones and largely recapitulated the transcriptional signatures described in

Fig. 3 and **Fig. S2**, including preserved enrichment of clone-specific CNV gene sets (**Fig. S3b-**

e). However, enrichment results for nonmalignant cell-type-specific gene sets became less

significant, with the exception of OPCs and radial glia for clone 1, which became more

significant (**Fig. S3b-e**). These results suggest that derived clones may occupy distinct

microenvironments, while the truncal clone retains signatures of progenitor cells that may reflect

the cell of origin.

Case 2: analysis of clonal composition

To test our strategy on a more complex case, we obtained a resected specimen from a

recurrent diffuse glioma that was removed from the right cerebral hemisphere of a 58 y.o. male

(**Fig. 4a-c**) approximately 28 years after the primary resection. Molecular pathology revealed

evidence for mutations in *IDH1* and *TP53* (**Fig. 4d-e**), no evidence for chromosome 1p/19q

codeletion (data not shown), and KI67 labeling of 4% (data not shown), consistent with a

recurrent CNS WHO grade 2 astrocytoma, IDH-mutant. Building on our observations from case

1, we applied the same strategy to case 2, with five modifications. First, we increased power by

analyzing more sections (**Table S15**). Second, we rotated the sample 90° halfway through

sectioning to capture intra-tumoral heterogeneity in orthogonal planes (**Fig. 4f**). Third, we

inferred CNVs from RNA-seq data instead of DNA methylation data. Fourth, we increased the

average sequencing depth for amp-seq data. And fifth, we analyzed single nuclei from

interpolated sections to validate predictions from bulk sections (**Fig. 4f**).

To identify somatic mutations, we performed WES on DNA from two sections in each

plane (22, 46, 85, 123; **Table S16**) and the patient's blood. 227 mutations were identified and 74

were selected for amp-seq by clustering WES VAFs to reveal candidate mutations most likely to

mark distinct clones (**Table S17**). Of these, 58 mutations were verified by amp-seq (**Table S18**).

As with case 1, downsampling reads spanning IDH1 R132H or TP53 G245V revealed

monotonic improvements in VAF estimates as a function of read depth (**Fig. S4a-b**). We

therefore restricted further analysis of amp-seq data to 27 mutations with high coverage over all

tumor sections or strong VAF correlations to other mutations (**Fig. S4c**). Hierarchical clustering

of these amp-seq data (**Table S18**) revealed five clusters of mutations with similar VAF patterns

within the tumor sample (**Fig. 4g-l**), suggesting multiple malignant clones.

Because mutations in *IDH1*, *TP53*, and *ATRX* are considered diagnostic for

astrocytoma[33], we expected these to be truncal and were therefore surprised that IDH1 R132H

fell in a separate cluster from mutations in *TP53* and *ATRX* (**Fig. 4j-k**). To explore this

discrepancy, we analyzed VAFs for all three mutations after controlling for gene dosage. This

analysis revealed greater discordance between VAFs for *IDH1* and *TP53* / *ATRX* mutations in

sectioning plane 1 vs. sectioning plane 2 (**Fig. 4m**). We also observed that all genes in mutation

cluster 4 (including *IDH1*) are located on chr2q. These observations suggested that the

discrepancy between *IDH1* and *TP53* / *ATRX* mutation VAFs might be explained by a subclonal

deletion in chr2q pursuant to the IDH1 R132H mutation, as has been previously reported[41–43]. To

test this hypothesis, we quantified CNVs from WES (n=4 sections) and RNA-seq (n=90

sections) data using FACETS[34] and CNVkit[44], respectively, which yielded highly concordant

frequencies for copy number changes (r=0.97, **Fig. S4d** and **Table S19**), including a chr2q

deletion event. As expected, frequencies of the chr2q deletion event were substantially higher in

sectioning plane 1 vs. sectioning plane 2 (**Fig. 4n**) and almost perfectly correlated with the

observed discordance between *IDH1* and *TP53* / *ATRX* mutation VAFs (r=0.98, **Fig. S4e**).

Through combined analysis of SNV and CNV frequencies over all tumor sections, we

generated an integrated model of tumor evolution using the same approach described for case

1, including the most likely phylogenetic tree (**Fig. 4o**) and frequencies of five malignant clones

over all sections (**Fig. 4p** and **Table S20**). Compared to case 1, there was substantially less

variation in the purity of individual tumor sections (range: 71.4 - 81.6%; **Table S20**). We

confirmed the truncal nature of mutations in *IDH1*, *TP53*, and *ATRX*, along with gains of chr7,

chr8, and chr9. To more closely examine the sequence of early mutational events, we

performed single-nucleus DNA sequencing using MissionBio's Tapestri microfluidics platform[45].

We took advantage of an existing panel of cancer genes, which included primers flanking one

IDH1 and two *TP53* loci. We were also able to infer chr17 and chr2q copy-number changes

using mutations that fell within the targeting panel. We analyzed 4,433 nuclei from plane 1

(section 29) and 3,736 nuclei from plane 2 (sections 113 and 115). Clustering nuclei from each

plane revealed clonal frequencies that broadly matched those obtained by bulk analysis (**Fig.**

S4f, Table S21). Interestingly, we observed a subpopulation of clone 1 (clone 1a: 4.1 - 6.6%)

with IDH1 R132H -/+ and TP53 G245V -/+/+ genotypes (**Fig. S4f**). These genotypes suggest

that *TP53* LOH occurred mechanistically in this case through duplication of the mutant allele

prior to loss of the wild-type allele, and may also explain the slightly lower VAFs for TP53

G245V compared to the mutation in *ATRX* (**Fig. 4j**).

Case 2: analysis of gene expression

We explored relationships between clonal abundance and bulk gene expression data using the

same strategies described for case one. Genome-wide gene coexpression analysis identified 68

modules of coexpressed genes, which were summarized by their eigengenes and hierarchically

clustered (**Fig. 5a-c**). As expected[29,30,37,38], many modules were significantly enriched with

markers of nonmalignant cell types (**Fig. S5a-d**). By comparing clonal abundance (**Fig. 4p,**

Table S20) to module eigengenes over all tumor sections, we identified five gene coexpression

modules whose expression patterns closely tracked the abundance of clone 1 (red: r = 0.65,

Fig. 5d), clone 2 (violet: r = 0.82, **Fig. 5e**), clone 3 (black: r = 0.8, **Fig. 5f**), clone 4 (ivory: r =

0.86, **Fig. 5g**), and clone 5 (lightcyan: r = 0.82, data not shown).

Enrichment analysis using gene sets defined by clonal CNV boundaries (**Fig. 4o** and

Table S19) confirmed expected over-representation (for gains) or under-representation (for

deletions) in the bulk coexpression modules most strongly associated with each clone (**Fig. 5d-**

g, Table S22, Table S23). Further analysis using publicly available gene sets from diverse

sources (**Table S9**) revealed that the red module, which tracked the abundance of clone 1 (i.e.,

tumor purity), was significantly enriched with markers of radial glia and microglia, as well as

genes comprising the mesenchymal subtype of glioblastoma. The violet module, which closely

tracked the abundance of clone 2, was significantly enriched with genes from reported

astrocytoma expression programs, as well as TNFalpha signaling and extracellular matrix

components. The black module, which closely tracked the abundance of clone 3, was

significantly enriched with markers of neurons and genes involved in chromatin remodeling. The

ivory module, which closely tracked the abundance of clone 4, was enriched with markers of

ependymal cells and myeloid cells. The lightcyan module, which closely tracked the abundance

of clone 5, was significantly enriched with genes involved in EGFR and NF-kB signaling, as well

as genes comprising the proneural subtype of glioblastoma (data not shown).

To further characterize the transcriptional signatures associated with each clone, we

used multiple linear regression to model genome-wide expression levels as a function of clonal

abundance. To account for collinearity, we used a regular lasso model with bootstrapped clonal

abundance vectors (real or permuted) as predictors (**Fig. S5e-i**). We restricted our focus to

genes that were significantly and stably modeled by a single clone (**Table S24)**. Enrichment

analysis of these genes largely recapitulated enrichment analysis of gene coexpression

modules associated with each clone, including CNVs and the associations of different clones

with different cell types (**Fig. S5i, Table S25**).

To validate gene expression signatures of malignant clones and nonmalignant cell types

identified from bulk tumor sections, we performed single-nucleus RNA-seq (snRNA-seq) on

tumor sections 17, 53, 93, and 117 (**Fig. 4f, Table S26**). Using a protocol adapted from

TARGET-Seq[46,47], we profiled gene expression in 288 flow-sorted nuclei per section. Following

data preprocessing and quality control, 809 nuclei (70.2%) with an average of >200K unique

reads/nucleus were retained for further analysis. Uniform manifold approximation and projection

(UMAP) analysis revealed that nuclei did not segregate by section ID (**Fig. S7a, Table S27**).

To determine whether nuclei segregated by cancerous state, we analyzed the

malignancy of each nucleus. Unlike some tumors, astrocytomas are not defined by truncal

CNVs, which can drive gene expression changes that are used to infer malignancy in snRNA-

seq data[23,33,48,49]. We therefore genotyped all nuclei through single-nucleus amplicon sequencing

(snAmp-seq) of cDNA spanning mutations in the truncal clone (**Fig. 4o**). This analysis provided

sufficient information to call malignancy for 75% of nuclei. Projecting malignancy status onto the

UMAP plot revealed clear segregation of malignant and nonmalignant nuclei (**Fig. S7b**).

To further classify nuclei as specific malignant clones or nonmalignant cell types, we

took a two-step approach. First, we hierarchically clustered all nuclei using a Bayesian distance

metric calculated by Sanity[25] that downweights genes with large error bars, revealing 12

clusters. Second, we asked whether genes in the bulk coexpression modules most strongly

associated with each malignant clone or nonmalignant cell type were upregulated in distinct

snRNA-seq clusters compared to all other genes (**Fig. S6a-j**). This analysis revealed specific

and significant upregulation of genes from the red (**Fig. 5d**), violet (**Fig. 5e**), black (**Fig. 5f**), and

lightcyan (data not shown) modules in snRNA-seq clusters 2, 1, 7, and 10 (**Fig. 6a**), suggesting

that these clusters correspond to malignant clones 1, 2, 3, and 5, respectively. Genes in the

ivory module (**Fig. 5g**) were significantly upregulated in snRNA-seq clusters 3 and 5, suggesting

that both of these clusters represent clone 4 (**Fig. 6a**). Similarly, we observed specific and

significant upregulation of genes from the purple (**Fig. S5a**), yellow (**Fig. S5c**), green (**Fig. S5d**),

and orange (data not shown) modules in snRNA-seq clusters 9, 4, 12, and 6 (**Fig. 6a**),

suggesting that these clusters correspond to nonmalignant astrocytes, microglia, neurons, and

endothelial cells, respectively. Genes in the tan module (**Fig. S5b**) were significantly

upregulated in snRNA-seq clusters 8 and 11, suggesting that both of these clusters represent

nonmalignant oligodendrocytes (**Fig. 6a**).

We performed several additional analyses to verify these findings. First, we projected

snRNA-seq cluster assignments onto the UMAP plot (**Fig. 6b**) and observed that cluster

assignments were consistent with the malignancy map produced by genotyping nuclei via

snAmp-seq (**Fig. S7b**). Second, we performed UMAP analysis for malignant cells only, followed

by trajectory analysis with Slingshot[50] (**Fig. 6c**). This analysis revealed patterns of clonal

evolution that recapitulated the phylogenetic tree inferred from integrative analysis of bulk tumor

sections (**Fig. 4o**). Third, we compared estimates of cellular abundance obtained from bulk and

single-nucleus data for adjacent tissue sections. This analysis revealed highly consistent

estimates for the relative abundance of malignant clones (r ≥ 0.94; **Fig. S7c**) and nonmalignant

cell types (r ≥ 0.90; **Fig. S7d**).

Supervised clustering with differentially expressed genes revealed clear separation of

snRNA-seq clusters (**Fig. 6d**). Overall, malignant clones were more transcriptionally active than

nonmalignant cell types, with the exceptions of clone 4:1 and endothelial cells (**Fig. 6d**, right).

Enrichment analysis of genes that were significantly up-regulated in snRNA-seq clusters

confirmed the identities of nonmalignant cell types (**Fig. S8, Table S28**). For malignant clones,

enrichment analysis of snRNA-seq clusters supported and refined inferences from bulk data

(**Fig. 5d-g**, **Fig. S5i**, **Fig. S7**, **Table S9**). For clone 1, consistent enrichments for markers of

radial glia and genes comprising the mesenchymal subtype of glioblastoma were observed in

bulk and snRNA-seq data. In contrast, markers of microglia were less significantly enriched in

clone 1 nuclei from snRNA-seq data versus bulk data, and markers of oligodendrocyte

progenitor cells (OPCs) were more significantly enriched. For clone 2, markers of astrocytes

were more significantly enriched in snRNA-seq data versus bulk data. Clone 3 was consistently

enriched with genes involved in chromatin remodeling, but neuronal markers were less

significantly enriched in snRNA-seq data. Clone 4 showed strong enrichment for markers of

ependymal cells in all analyses, while clone 5 was significantly enriched with genes comprising

the proneural subtype of glioblastoma in all analyses. Interestingly, genes involved in mitosis

were most highly expressed by clone 1, clone 4:2, and endothelial cells (**Fig. 6d**, right).

Because clones in this case were characterized by disparate CNVs (**Fig. 4o**), we asked

how malignancy calls compared between algorithms that infer CNVs from snRNA-seq data and

malignant genotypes derived from snAmp-seq data. We used CopyKat[48], InferCNV[23], and

CaSpER[49] to call CNVs from snRNA-seq data. These analyses revealed substantial variation in

malignancy calls for different algorithms (**Fig. 6d**) as well as differences from bulk CNV calls

(e.g., no gains in chr7p, chr8p, and chr9q; **Fig. S7e**). Taking the snAmp-seq genotyping as

ground truth, CopyKat and InferCNV were more sensitive but less specific than CaSpER,

leading to discrepant calls. For example, nonmalignant astrocytes and oligodendrocytes:2 were

mostly called malignant by CopyKat and InferCNV, while clone 4:2 was mostly called

nonmalignant by these two algorithms. CaSpER's classification of nuclei from these populations

was mostly correct, but it failed to recognize most malignant nuclei for clones 3 and 5. In

addition, clone 4:1 was mostly classified as nonmalignant by all three algorithms. Overall, no

method for inferring malignancy from CNVs achieved accuracy > 61% (**Fig. 6d**).

Multiscale gene expression profiling of this case allowed us to compare the consistency

of transcriptional signatures associated with distinct malignant clones and nonmalignant cell

types in bulk and snRNA-seq data. Based on our previous findings in normal human brain[29] and

Fig. 2, we expected differential gene expression in snRNA-seq data to predict gene expression

correlations to cellular abundance in bulk RNA-seq data, and vice versa. Genome-wide analysis

confirmed this relationship for all malignant clones and nonmalignant cell types (**Fig. S9**), further

demonstrating that gene expression profiles of distinct cellular populations can be revealed by

correlating genome-wide expression patterns with cellular abundance in heterogeneous

samples.

 Integrative analysis

 We next sought to compare transcriptional profiles of malignant cells between case one and

 case two through integrative analysis. However, despite the fact that both tumors were

 diagnosed as grade 2 IDH-mutant astrocytomas, only one SNV was shared between the cases.

 Furthermore, the shared SNV (IDH1 R132H) was absent in ~21% of malignant cells in case 2

 following loss of chr2q (**Fig. 4o**). We therefore asked whether the truncal clones (i.e., clone 1),

 which presumably included all of the mutations required to initiate these tumors along with

 passenger mutations, had consistent transcriptional profiles in case 1 and case 2. For each

 case, we analyzed genome-wide correlations to the cumulative abundance of clone 1

 (equivalent to tumor purity). Comparing these results between cases, we observed a highly

 significant relationship (**Fig. 7a, Table S29**). Enrichment analysis of genes whose expression

 patterns were most positively correlated with clone 1 in both cases implicated gene sets

 comprising the 'classical' subtype of glioblastoma proposed by Verhaak et al.[39], markers of

 radial glia, infiltrating monocytes, and extracellular matrix components (**Fig. 7a-b**; red). In

 contrast, genes whose expression patterns were most negatively correlated with clone 1 in both

 cases largely implicated gene sets related to neurons and neuronal function (**Fig. 7a-b**; blue).

 We further characterized genes whose expression patterns were most positively

 correlated with the truncal clone in both cases (**Fig. 7a**; red) by cross-referencing them with

 human protein-protein interaction (PPI) data from the STRING database[51,52]. This analysis

 revealed eight distinct clusters of interacting proteins (**Fig. 7c**). The largest of these (green)

 included several SOX transcription factors and was significantly enriched with genes involved in

 WNT and MYC signaling (**Fig. 7d**). The second largest cluster (yellow) was significantly

 enriched with genes involved in DNA repair, and the third largest cluster (orange) was

 significantly enriched with genes involved in RNA splicing (**Fig. 7d**). The remaining clusters

 were significantly enriched with genes involved in mRNA transport (brown), DNA replication

 (turquoise), specific cellular compartments and protein complexes (pink, gray), and immune

response (purple) (**Fig. 7d**).

To provide further validation for these findings, we performed immunostaining for

AKR1C3. Out of 15,288 genes, *AKR1C3* bulk expression correlations to tumor purity ranked fifth

in case one and first in case two (**Fig. 7a** [asterisk], **Table S29**). *AKR1C3* was also significantly

upregulated in malignant vs. nonmalignant nuclei per snRNA-seq (**Fig. 6m**, right).

Immunostaining confirmed substantial upregulation of AKR1C3 in tumor vs. normal human brain

at the protein level (**Fig. 7e**, **f**). To provide cellular resolution, we co-stained for AKR1C3 and

IDH1 R132H using an antibody that recognizes the mutated IDH1 protein. As expected, this

analysis revealed broad overlap between cells expressing AKR1C3 and cells expressing IDH1

R132H (**Fig. 7g-i**).

Discussion

We have described a novel strategy for deconstructing ITH through multiomic and multiscale

analysis of serial tumor sections. By amplifying each tumor specimen into standardized

biological replicates through serial sectioning, we obtained a large number of representative

subsamples of each tumor with variable cellular composition. Because section size and number

can be tailored to experimental needs, this strategy provides flexibility for a variety of concurrent

assays while preserving spatial information. We performed WES to identify mutations in a small

number of distant sections, followed by deep sequencing of PCR amplicons spanning mutation

sites to quantify SNV frequencies with high confidence in a large number of sections. Although

clusters of SNVs with highly correlated VAFs suggested distinct clones, we found that

integrative analysis of SNV and CNV frequencies (inferred from bulk DNA methylation data

[case 1] or bulk RNA-seq data [case 2]) was required to accurately reconstruct clonal

phylogenies. Using this approach, we identified the six most prevalent clonal populations of

malignant cells in case 1 and five in case 2 and quantified their abundance in all tumor sections.

By comparing clonal abundance to genome-wide expression patterns over all tumor

sections, we identified transcriptional profiles of distinct malignant clones in each case. Clone

expression profiles were orthogonally validated through comparisons with normal human brain

(case 1) and snRNA-seq using nuclei isolated from interpolated tumor sections (case 2).

Enrichment analysis of these profiles revealed several interesting findings. First, gene sets

defined by clonal CNV boundaries were significantly enriched (for gains) or depleted (for

deletions) in the expected clone expression profiles, providing further confirmation of clonal

identities. Second, gene sets representing transcriptional subtypes of glioblastoma[39] were

significantly associated with distinct clones in each case, suggesting stereotyped patterns of

malignant cell differentiation that may reflect different microenvironments[53]. Third, in both cases,

markers of neural stem cells (radial glia) were most significantly enriched in the truncal clone.

And fourth, markers of ependymal cells were significantly and specifically enriched in clone 4

from case 2. To our knowledge, malignant ependymal cells have not previously been described

in human astrocytomas. Because ependymal cells differentiate from neural stem cells during

normal brain development[54], the presence of malignant ependymal cells is consistent with a

neural stem cell as the cell of origin for case two.

Although both cases were diagnosed as IDH-mutant grade 2 astrocytomas, they shared

only one SNV (IDH1 R132H), which was truncal in both cases but lost from 21% of malignant

cells (clone 3) in case 2 due to chr2q deletion. The extent of clonal heterogeneity, even for the

same type of tumor, begs the question of how gene expression correlations to clonal abundance

should be compared and integrated across cases. We reasoned that aggregating gene

expression correlations to the truncal clone (equivalent to tumor purity) would identify the most

specific and consistent transcriptional features of all malignant cells in both astrocytomas (as

illustrated in **Fig. 2**). This deceptively simple strategy has profound implications for target

discovery in cancer biology, because correlations between molecular abundance and tumor

purity can be aggregated from huge numbers of bulk samples from similar cases that

collectively represent many billions of cells. In statistical and economic terms, this strategy likely

represents the shortest path to identifying the most robust molecular features of malignant cells,

including the non-oncogene dependencies that are thought to vastly outnumber recurrently

mutated genes[55], for any kind of solid tumor.

Here, performing this analysis for only two cases, we observed a highly significant

genome-wide correlation between gene expression profiles of the truncal clone, which suggests

that a core set of genes is consistently expressed by the founding population of malignant cells

in IDH-mutant astrocytomas. This result is particularly striking given the biological and technical

differences between case 1 (primary astrocytoma, microarray gene expression data) and case 2

(recurrent astrocytoma, RNA-seq gene expression data). Cross-referencing these genes with

human PPI data[52] revealed distinct groups of interacting proteins that were significantly enriched

with cancer-related pathways and processes, including WNT and MYC signaling, RNA splicing,

and DNA repair. Furthermore, many of the genes whose expression patterns correlated most

strongly with malignant cell abundance in both cases (**Table S29**) have been implicated in other

types of cancer. For example, *AKR1C3*, which encodes a prostaglandin synthase involved in

androgen production[56], is significantly upregulated and associated with poor outcomes in

hepatocellular carcinoma[57], prostate cancer[58], and pediatric T-cell acute lymphoblastic

leukemia[59]. These findings point to the exciting possibility that malignant cells from diverse

cancers caused by distinct mutations may nevertheless share transcriptional dependencies that

can be exploited therapeutically.

It is also important to note that transcriptional phenotypes of malignancy, including

upregulation of *AKR1C3*, persisted in clone 3 from case 2 despite loss of the driver mutation

IDH1 R132H following chr2q deletion. IDH1 R132H perturbs genome-wide expression patterns

by increasing production of the oncometabolite D-2-hydroxyglutarate[60], which competes with

endogenous a-ketoglutarate to alter the activities of enzymes that are required to maintain

normal DNA methylation[61]. Our findings support previous studies indicating that altered DNA

methylation patterns can persist and perpetuate malignant phenotypes despite loss of the

mutated protein that caused them[41–43]. This example is illustrative because it highlights the

limitations of conventional gene panels for cancer diagnostics, which provide binary calls for the

presence or absence of common oncogenic mutations. In this case, such panels would indicate

the presence of IDH1 R132H and recommend treatment that targets this mutation[62]. However,

with knowledge of this tumor's clonal phylogeny, we can see that such treatment will be entirely

ineffective for one-fifth of malignant cells, since the mutated IDH1 protein is no longer there. In

this case, it is these cells that will likely form the basis for therapeutic resistance.

There are several important methodological implications and limitations of our approach.

First, each tumor specimen analyzed in this study represents a fraction of overall tumor volume;

future efforts will analyze multiple, geographically distinct tumor subsamples to evaluate the

consistency of clonal architecture. Second, our approach requires a large number of sections to

detect meaningful correlations (for example: 25 sections provide ~85% power to detect

moderate correlations [|r| > 0.5, P < .05])[63]. Third, DNA and RNA must be co-isolated from each

section (i.e., from the same population of cells). Fourth, deep sequencing is required to

establish high-confidence VAFs for SNVs, which are in turn required to estimate clonal

frequencies. Fifth, limited variability in clonal frequencies may impact the ability to detect

corresponding molecular signatures. Sixth, some types of mutations are not yet captured by our

approach (e.g., noncoding SNVs, rearrangements, chromothripsis, etc.). And seventh,

collinearity in the abundance of malignant and / or nonmalignant cell types may produce

spurious correlations (which can be mitigated by differential coexpression analysis with normal

tissue, as done for case one, or sectioning in multiple planes, as done for case two). For this

reason, we also recommend validating transcriptional profiles of malignant clones using one or

more orthogonal techniques. We found that multiscale integration of bulk sections and single

nuclei allowed us to leverage the complementary strengths of each sampling strategy.

Specifically, bulk sections facilitate multiomic integration while yielding robust molecular

signatures driven by millions of cells, while single nuclei enable precise validation of predictions

made from bulk data. However, the success of this approach depends on accurate classification

of malignant nuclei. In our study, we found that popular algorithms for identifying malignant

nuclei based on inferred CNVs from gene expression data [23,48,49] were only ~60% accurate.

Therefore, our approach will benefit from improved algorithms for inferring malignancy and / or

scalable methods for profiling gene expression and malignant cell genotypes in parallel.

In summary, we have described a novel and flexible strategy for deconstructing ITH

through multiomic and multiscale analysis of serial tumor sections. Importantly, our strategy is

generalizable to other molecular species and any kind of solid tumor. Ongoing efforts seek to

incorporate additional cases, multiomic assays, and data modalities, while increasing efficiency

through automation. By shining a bright light on the most robust molecular properties of

malignant cells, we hope that these efforts will expand the therapeutic search space for human

cancers.

Methods

Pseudobulk analysis of scRNA-seq data

Single-cell RNA-sequencing (scRNA-seq) data from Venteicher et al.[22] comprising 6243 cells

from 10 IDH-mutant adult astrocytomas were downloaded from Gene Expression Omnibus

(https://www.ncbi.nlm.nih.gov/geo/; accession ID = GSE89567). To generate a pseudobulk

gene expression matrix from these data, 10% of all cells were randomly sampled and

expression levels were summed for each gene from all sampled cells (this process was

repeated 100x to generate a matrix with 100 pseudobulk samples). Using cell-class labels

provided by the authors, the identities of all cells comprising each pseudobulk sample were

tracked. Genome-wide differential expression analysis was performed by comparing all sampled

malignant cells to all sampled nonmalignant cells using a two-sided t-test. In parallel, genome-

wide gene coexpression analysis was performed as described[29]. Briefly, genome-wide biweight

midcorrelations (bicor) were calculated using the WGCNA R package[64] and all genes were

clustered using the flashClust[65] implementation of hierarchical clustering with complete linkage

and 1 – bicor as a distance measure. The resulting dendrogram was cut at a static height of

0.277, corresponding to the top 1% of bicor values. All clusters consisting of at least 10 genes

were identified and summarized by their module eigengene[36] (i.e., the first principal component

obtained by singular value decomposition) using the moduleEigengenes function of the WGCNA

R package[64]. Highly similar modules were merged if the Pearson correlation of their module

eigengenes was > 0.85. This procedure was performed iteratively such that the pair of modules

with the highest correlation > 0.85 was merged, followed by recalculation of all module

eigengenes, followed by recalculation of all correlations, until no pairs of modules exceeded the

threshold. The pseudobulk gene coexpression module most strongly associated with malignant

cells was identified by maximizing the correlation between the module eigengene and the actual

fraction of sampled malignant cells in each pseudobulk sample. Genome-wide Pearson

correlations to this module eigengene (k_{ME} values)[36] were then calculated and compared to the

results of single-cell differential expression analysis (t-values).

Sample acquisition

The tumor specimen from case one (WHO grade II primary astrocytoma, IDH-mutant) was

obtained from a 40 y.o. female patient following surgical resection at the University of California,

San Francisco (UCSF), along with the patient's blood (UCSF case ID: SF9495). The tumor

specimen from case two (WHO grade II recurrent astrocytoma, IDH-mutant) was obtained from

a 58 y.o. male patient following surgical resection at UCSF, along with the patient's blood

(UCSF case ID: SF10711). Four postmortem control human brain samples from two brain

regions (anterior cingulate cortex [ACC] and entorhinal cortex [EC]) were also obtained from

routine autopsies of two individuals (41 and 75 y.o. females) at UCSF. Control samples were

examined by a neuropathologist (E.J.H.) and found to exhibit no evidence of brain disease.

Tissue samples for nucleic acid isolation were immediately frozen on dry ice without fixation. For

tumor histology, a smaller subsample was formalin-fixed and paraffin-embedded (FFPE) using

standard procedures. All tumor samples were obtained with donor consent in accordance with

protocols approved on behalf of the UCSF Brain Tumor Center Tissue Core.

Serial sectioning

Tissue cryosectioning was performed on a Leica CM3050S cryostat at -20°C. Each sample was

oversectioned to account for the possibility of low RNA quality or quantity from some

cryosections; after excluding these (see below), most, but not all, analyzed sections were

adjacent to one another. For the first case, 81 sections were cut and utilized as shown in **Fig.**

1f. For each of the four control samples, ~120 sections were cut and 94 were utilized for gene

expression profiling. For the second case, 140 sections were cut and utilized as shown in **Fig.**

4f. In addition, the plane of sectioning for the second case was rotated 90 degrees at the

halfway point to provide additional spatial variation (**Fig. 4f**). These sectioning strategies

resulted in 73% power to detect weak correlations ($|r| > 0.3$, $P < .05$) for case one and 83%

power for case two[63]. To control for differences in the cross-sectional area of each tissue

sample, section thickness was varied as needed to ensure sufficient and comparable amounts

of nucleic acids could be extracted from sections for multiomic analysis. Quality control and

usage information for all sections can be found in **Table S1** (case one), **Table S12** (control

samples), and **Table S15** (case two). Frozen sections were collected in RNase-free 1.7 ml

tubes (Denville Scientific Inc, South Plainfield, NJ) and stored at -80°C.

Nucleic acid isolation and quality control

Tissue cryosections were thawed on ice and homogenized by pipette in QIAzol (Qiagen Inc.,

Valencia, CA). For control samples, RNA was extracted from each section with the miRNeasy

mini kit (Qiagen Inc., Valencia, CA). For tumor samples, DNA and RNA were isolated

simultaneously from each section with the AllPrep DNA / RNA / miRNA kit (Qiagen Inc.,

Valencia, CA). All nucleic acid isolation from tissue sections was performed using a QIAcube

automated sample preparation system according to the manufacturer's instructions (Qiagen

Inc., Valencia, CA). Sections were processed in random batches of 12 on the QIAcube to avoid

confounding section number with potential technical sources of variation associated with nucleic

acid isolation.

Frozen blood was thawed and resuspended in red blood cell lysis solution (Qiagen Inc.,

Valencia, CA). White blood cells were removed by centrifugation at 2000g for 5 mins and

repeated until white blood cells were depleted. Remaining red blood cells were resuspended in

extraction buffer (50 mM Tris [pH8.0], 1 mM EDTA [pH8.0], 0.5% SDS and 1 mg / ml Proteinase

K [Roche, Nutley, NJ]) and incubated overnight at 55°C. The extracted DNA was RNAse

treated (40 µg / ml) (Roche, Nutley, NJ) for 1 h at 37°C before being phenol chloroform

extracted and ethanol precipitated. The resulting DNA was resuspended in TE buffer (10 mM

460 Tris, 1 mM EDTA [pH7.6]).

RNA and DNA were analyzed using a Nanodrop 1000 spectrophotometer (Thermo

Scientific Inc., Waltham, MA) to quantify concentrations, OD 260 / 280 ratios, and OD 260 / 230

ratios. Further validation of RNA and DNA concentrations was performed using the Qubit RNA

HS kit and Qubit dsDNA HS kit on the Qubit 2.0 Fluorometer (Life Technologies Inc., Carlsbad,

CA). RNA integrity (RIN) was assessed using an Agilent 2100 Bioanalyzer (Agilent

Technologies Inc., Santa Clara, CA). Sections for which RIN ≥ 5 (case one median = 7.6, case

two median = 8.3), OD 260 / 280 ratio ≥ 1.80 (case one median = 2.03, case two median =

1.94), and concentration by Nanodrop ≥ 9 ng / µl (case one median = 25.4 ng / µl, case two

median = 9.25 ng / µl) were selected.

Whole exome sequencing (WES) and data preprocessing

WES was performed at the UCSF Institute for Human Genetics genomics core facility (San

Francisco, CA). Exome libraries were prepared from 1 μg of genomic DNA from each analyzed

section using the Nimblegen EZ Exome kit V3 (Roche, Nutley, NJ). Paired-end 100 bp

sequencing was performed on a HiSeq2500 sequencer (Illumina Inc., San Diego, CA). The

analysis of WES data was performed as previously described[66]. Briefly, paired-end sequences

were aligned to the human genome (University of California, Santa Cruz build hg19) using the

Burrows-Wheeler Aligner (BWA)[67]. Uniquely aligned reads were further processed to achieve

deduplication, base quality recalibration, and multiple sequence-realignment with the Picard

suite[68] and Broad Institute Genome Analysis ToolKit (GATK)[69]. After processing, a mean

coverage of 131-151x and 104-122x was achieved for case one and case two, respectively.

Single-nucleotide variant (SNV) and small insertion / deletion (indel) calling workflow

SNVs were identified using MuTect[70] and indels were identified with Pindel[71] using default

settings. SNVs were further filtered to only retain variants with frequency > 0.10 in at least one

tumor section and < 6 variant reads in the patient's blood. Indels were filtered to only retain

variants with > 5 variant reads in a given tumor section and < 13 total reads in the patient's

blood. If multiple indels were detected at the same genomic location, only the indel with the

most supporting reads was retained. Identified mutations were annotated for their mutational

context using ANNOVAR[72] and were also cross-referenced with dbSNP[73] (Build ID: 132) and the

1000 Genomes[74] (Phase 1). SNV and indel events were converted to hg38 coordinates and

assigned HGVS compliant names using Ensembl's Variant Effect Predictor[75].

Droplet Digital PCR (ddPCR)

Variant allele frequencies (VAFs) of the IDH1 R132H mutation were determined in 69 tumor

sections from case one and the patient's blood using the PrimePCR IDH1 R132H mutant assay

and the QX100 Droplet Digital PCR system (Bio-Rad Inc., Hercules, CA). An initial serial dilution

of a positive control was performed to optimize the input concentration of genomic DNA from

each section and to assess the reliability of the assay. Duplicate reactions were performed to

quantify the reproducibility of the assay (**Fig. S1b**). Data were analyzed and 95% Poisson

confidence intervals were calculated using QuantaSoft software (Bio-Rad Inc., Hercules, CA).

Amplicon sequencing (amp-seq) and data preprocessing

Groups of mutations with similar allele frequency distributions in WES data were identified by

hierarchical clustering. Biweight mid-correlations (bicor) were used to estimate the proximities of

somatic mutations and 1-bicor was used as a dissimilarity measure. A subset of representative

mutations from distinct clusters was validated by Sanger sequencing and deep sequencing of

PCR amplicons (amp-seq) derived from tumor sections and the patient's blood. Primers were

designed using Primer-BLAST[76] to yield an amplicon of around 500 bp (case one) or 100 bp

(case two) with the mutation located within the center of the amplicon (**Tables S3 and S17**).

Amplicons were generated for 42 mutations in case one (n = 69 sections; **Table S3**) and 75

mutations in case two (n = 85 sections; **Table S17**). For case one, the mutation-containing

region was amplified by PCR using the FastStart high-fidelity PCR system (Roche, Nutley, NJ)

or the GC-Rich PCR system (Roche, Nutley, NJ) as instructed by the manufacturer using

specific annealing temperatures (**Table S3**). The resulting amplicons were purified using the

NucleoSpin gel and PCR cleanup kit following the manufacturer's instructions (Macherey-Nagel

Inc., Bethlehem, PA) and submitted for Sanger sequencing with the same primers used to

generate the amplicons. For case two, 50ng of gDNA was used as template per sample in each

reaction and 35 cycles of PCR amplification were performed with KAPA HiFi HotStart Ready

Mix (2x, KAPA Biosystems, Wilmington, MA). Multiplexed PCR reactions were purified using a

2X volume ratio of KAPA pure SPRI beads (KAPA Biosystems, Wilmington, MA). Purified PCR

reactions were quantified using the Qubit dsDNA HS kit and Qubit 2.0 fluorometer. For both

cases, the concentration of each amplicon was adjusted to 0.2 ng/µl. Barcoded libraries for

each section were generated using the Nextera XT DNA Kit (Illumina Inc., San Diego, CA). After

library preparation the barcoded libraries were pooled using bead-based normalization supplied

with the Nextera XT kit. The pooled libraries were sequenced with paired-end 250 bp reads in a

single flow cell on an Illumina MiSeq (Illumina Inc., San Diego, CA) in case one and an Illumina

HiSeq 4000 in case two. In case one, libraries were sequenced in two runs, whereas all

amplicons were sequenced in the same run for case two. Sequence reads were demultiplexed

and basecalled using "bcl2fastq" (Illumina Inc., San Diego, CA). FASTQ files were aligned to a

custom genome (based on the amplicon sequences) using BWA-MEM[77]. The SAMtools suite[78]

was used to create and index BAM files and create pileup files based on reads with a base

quality score > 30. Read counts supporting the reference or variant within each amplicon were

determined using the read counts function from VarScan 2[79] and these counts were used to

calculate VAFs.

Downsampling analysis of amp-seq data

Amplicon reads originating from the reference or alternative alleles for *IDH1* or *TP53* were

randomly downsampled to various coverage levels (n = 1000 random downsamples per

coverage level) for each section to quantify the effect of reduced coverage on VAF estimates.

VAFs were recalculated for each downsampled coverage level and compared to full coverage

VAF estimates over all sections using Pearson's correlation or root-mean-square error (RMSE),

as illustrated in **Fig. S1c-d** (case one) and **Fig. S4a-b** (case two).

Hierarchical clustering of variant allele frequencies (VAFs)

Groups of mutations with similar VAF patterns were identified by hierarchical clustering over all

tumor sections. VAFs were clustered with Ward's D method and 1 – Pearson's correlation as a

dissimilarity measure. The number of clusters was determined from the consensus of elbow[80]

and silhouette plot[81] methods, using the cluster package in R[82].

DNA methylation data production and preprocessing

The sample order of genomic DNA from serial sections of case one was randomized to avoid confounding section number with potential sources of technical variation. DNA was concentrated with Genomic DNA Clean & Concentrator 10TM columns (Zymo Research, Irvine, CA) in batches of 12 samples, resulting in approximately two-fold concentration (median concentration after processing: 45ng / μl). The sample order was randomized again and concentrated DNA was shipped on dry ice to the University of California, Los Angeles (UCLA) Neurogenomics Core facility (Los Angeles, CA) for analysis using Illumina 450K microarrays (Illumina Inc., San Diego, CA).

Raw idat files were processed using the ChAMP R package[83]. Initial probe filtering was performed using the load.champ R function[84–86]. Probes with detection P-value > 0.01 (11,799 probes) or beadcount < 3 in at least 5% of samples were removed (n = 760), leaving 461,797 probes for analysis. The Illumina 450K microarrays contain two different assay types (Infinium I and Infinium II). Each assay has different sensitivity and dynamic range, which means that joint normalization leads to type II bias due to the lower sensitivity of the Infinium II assay[87]. We therefore performed beta-mixture quantile normalization (BMIQ) using the "champ.norm" function from ChAMP, which accounts for the different assay types[88].

Additional preprocessing of the methylation data was performed with the SampleNetwork R function[89], which identifies outlying samples, performs data normalization, and corrects for technical batch effects. The standardized sample network connectivity (Z.K) criterion was used to exclude one outlying sample (section #69, whose DNA concentration was substantially lower than other sections), leaving 68 sections. No batch effects associated with ArrayID or ArrayPosition were observed.

Gene expression data production and preprocessing

Total RNA from case one (n = 69 sections) was shipped on dry ice to the UCLA Neurogenomics

Core facility (Los Angeles, CA) for analysis using Illumina HT-12 v4 human microarrays

(Illumina Inc., San Diego, CA). The order of the sections was randomized prior to shipment to

avoid confounding potential technical artifacts with potential biological gradients of gene

expression. Two control samples from the same pool of total human brain RNA (Ambion

FirstChoice human brain reference RNA Cat#AM6050, Life Technologies Inc., Carlsbad, CA)

were included with each of the five datasets. For each of the five datasets (case one and four

control samples), all microarray samples (n = 72 – 96 / dataset) were processed in the same

batch for amplification, labeling, and hybridization. Amplification was performed using the

Ambion TotalPrep RNA amplification kit (Life Technologies Inc., Carlsbad, CA). Raw bead-level

data were minimally processed by the UCLA Neurogenomics Core facility (no normalization or

background correction) using BeadStudio software (Illumina Inc., San Diego, CA).

For each dataset the minimally processed expression data were further preprocessed

using the SampleNetwork R function[89]. Using the standardized sample network connectivity

(Z.K) criterion[89], the following numbers of outliers were removed from each dataset: ACC1 (n =

2), ACC2 (n = 11), EC1 (n = 0), EC2 (n = 2), and case one (n = 1). Exclusion of outliers resulted

in the following numbers of remaining sections in each dataset: ACC1 (n = 92), ACC2 (n = 83),

EC1 (n = 94), EC2 (n = 92), and case one (n = 69). After removing outliers each dataset was

quantile normalized[90] and technical batch effects were assessed[89]. Significant batch effects (P <

.05 after Bonferroni correction for univariate ANOVA) were corrected using the ComBat R

function[91] with no covariates as follows: ACC1 = ArrayID, ACC2 = ArrayID, EC1 = ArrayID and

ArrayPosition, EC2 = QCBatch and ArrayID. No batch effects were observed for case one.

Multiple technical batch effects were corrected sequentially. Analysis was restricted to 30,425

probes that were re-annotated[92] as having either "perfect" (n = 29,272) or "good" (up to two

mismatches; n = 1,153) sequence alignment to their target transcripts. Probes were further

collapsed to unique genes (n = 20,019) by retaining one probe per gene with the highest mean

expression over all sections.

For case two, RNA-sequencing was used to profile gene expression for all sections (n =

96). Full-length RNA was made into libraries using the KAPA stranded mRNA library prep kit

(Roche, Nutley, NJ) following the manufacturer's instructions, with a mean insert size of 300 bp.

One ng of library (composed of library and ERCC spike-in controls, Life Technologies Inc.,

Carlsbad, CA) was added as input, and all libraries were normalized according to the

manufacturer's instructions. During this process samples were randomized in both section order

and plane to avoid conflating biological and technical covariates. Sequencing was performed on

eight lanes of a HiSeq4000 at the Center for Advanced Technology (CAT) at UCSF with single-

end 50 bp sequencing using dual-index barcoding.

Reads were assessed with FastQC to ensure the quality of sequencing data by verifying

high base quality scores, lack of GC bias, narrow distribution of sequencing lengths, and low

levels of sequence duplication or adapter sequences[93]. Next, reads were subjected to adapter

trimming using Cutadapt[94] with minimum length = 20 and a quality cutoff of 20. Reads were

subsequently aligned using default settings with the Bowtie2 program[95] to the Genome

Reference Consortium Human Build 37[96]. Finally, an expression matrix was generated using the

FeatureCounts program with UCSC's library of genomic features[97] (n = 23,900 features). Genes

with zero variance were removed (n = 30). Data were normalized with the RUVg package,

regressing out 10 factors derived from principal component analysis of the ERCC spike-in

control expression matrix[98]. The number of factors was determined empirically by evaluating

relative log-expression (RLE) plots and gene-gene correlation distributions. Finally, the

SampleNetwork R function[89] was used to identify and remove six outlier sections based on the

standardized sample connectivity criterion (Z.K).

Copy number analysis by qPCR

The copy numbers for *TP53* and *ACCS* in case one were determined by SYBR Green-based

qPCR. Primers were designed using Primer-BLAST[76] and positioned immediately adjacent to

but not including the SNV (ACCS F: TCTCTATGGCAACATCCGGC, R:

CAGCCATGCAGCAACAGAAG; RPPH1 F: CGGAGGGAAGCTCATCAGTG, R:

CCGTTCTCTGGGAACTCACC, TERT F: CTCGGATCATGCTGAGGACC, R:

TTGTGCAATTCTGTGCCAGC, TP53 F: CAGTCACAGCACATGACGGA, R:

GGGCCAGACCTAAGAGCAAT). qPCR was performed on genomic DNA from all 69 tumor

sections and the patient's blood using the LightCycler 480 SYBR Green I master mix and

LightCycler 480 qPCR machine according to the manufacturer's recommendations (Roche,

Nutley, NJ). Measurements were triplicated and data were analyzed using the standard curve

method. Copy numbers were determined for *TP53* and *ACCS* and two control genes on

different chromosomes: ribonuclease P RNA component H1 (*RPPH1*) and telomerase reverse

transcriptase (*TERT*) (data not shown). Relative copy number was determined by dividing the

mean copy number of *TP53* and *ACCS* by the mean copy number of each reference gene

separately to get a ratio and multiplying the ratio by two to obtain the diploid chromosome

number. The relative copy number normalized to one of the reference genes (*RPPH1*) is shown

in **Fig. S1e**.

Copy number variation (CNV) calling (bulk data)

CNVs were quantified using multiple technologies and algorithms to generate reliable estimates.

Although WES remains the gold-standard method for calling CNVs, DNA methylation and RNA-

seq data provide cost-effective options that can be triangulated with sparse WES data to reduce

false positives. Unless otherwise noted, default parameters were used. For case one we used

the champ.CNA function, included with the ChAMP R package[35], to call CNVs from DNA

methylation data. For both cases, we called CNVs from exome data using FACETS[34] with

critical values of 25 (case one) and 450 (case two). Finally, we used CNVkit with circular binary

segmentation to call CNVs from bulk RNA-seq data[44,99,100].

Generation of clonal trees with corresponding frequencies

CNVs were filtered to ensure that they were called in exome data and either DNA methylation

data (case one) or RNA-seq data (case two) and covered more than 10% of a chromosomal

arm. CNV coordinates were defined based on the intersection of ranges from both methods

(**Tables S5** and **S19**). Using the frequencies of CNV / SNV mutations and tumor purity

estimated from the *TP53* locus as input to PyClone[31], we determined cluster membership for

SNP and CNV events. We then used the PyClone output as the input to the CITUP algorithm[32]

to generate the most likely clonal tree (i.e., the tree with the minimum objective value) and

derive clonal frequencies. In cases where there was an approximate tie between objective

values, the tree was manually chosen based on biologically plausible principles. To visualize

results we used the data.tree[101] and DiagrammeR[102] packages in R.

Gene coexpression network analysis

Genome-wide biweight midcorrelations (bicor) were calculated using the WGCNA R package[64]

for case one (n = 20,019 genes) and case two (n = 23,870 genes). All genes were clustered

using the flashClust[65] implementation of hierarchical clustering with complete linkage and 1 –

bicor as a distance measure. Each resulting dendrogram was cut at a static height (0.875 for

case one and 0.562 for case two) corresponding to the top 30% and 20% of values of the

correlation matrix for case one and case two, respectively. All clusters consisting of at least 15

members for case one or five members for case two were identified and summarized by their

module eigengene[36] (i.e. the first principal component obtained by singular value

decomposition) using the moduleEigengenes function of the WGCNA R package[64]. Highly

similar modules were merged if the Pearson correlation of their module eigengenes was > 0.80.

This procedure was performed iteratively such that the pair of modules with the highest

correlation > 0.80 was merged, followed by recalculation of all module eigengenes, followed by

recalculation of all correlations, until no pairs of modules exceeded the threshold (case one:

Table S7; case two: **Table S22**).

Module enrichment analysis

The WGCNA measure of module membership, k_{ME}, was calculated for all genes with respect to

each module. k_{ME} is defined as the Pearson correlation between the expression pattern of a

gene and a module eigengene and therefore quantifies the extent to which a gene conforms to

the characteristic expression pattern of a module[36] (case one: **Table S8**; case two: **Table S23**).

For enrichment analyses, module definitions were expanded to include all genes with significant

k_{ME} values, with significance adjusted for multiple comparisons by correcting for the false-

discovery rate[103]. If a gene was significantly correlated with more than one module, it was

assigned to the module for which it had the highest k_{ME} value. Enrichment analysis was

performed for all modules using a one-sided Fisher's exact test as implemented by the

fisher.test R function.

Lasso modeling of gene expression

The machine learning variable-selection method lasso (least absolute shrinkage and selection

operator) and group lasso were performed using the R package Seagull[104–106]. Modeling was

performed for each case with gene expression patterns as dependent variables and clonal

frequency vectors as independent variables. For case one, clone 2 was excluded from modeling

due to its low frequency and clone 6 was excluded since it was defined by a single CNV.

Because clone 1 corresponds to the tumor purity vector, which represents the major vector of

variation in this dataset, many genes experience inflated correlations to clone 1. To counteract

this effect group lasso was performed. The truncal clone (clone 1) was placed in its own group

and all remaining clones to be modeled were placed in a separate group. This procedure

improved modeling performance for case one (**Fig. S2f-g**) but not case two (**Fig. S5f-g**), which

may reflect the greater variance in tumor purity for case one. As such, modeling results for case

two presented in the manuscript derive from the regular lasso model. For each gene, models

were bootstrapped (n = 100) to address collinearity among clonal frequency vectors[107] (as

shown in **Fig. S2h** and **Fig. S5h**). We also generated empirical null distributions for model

performance by permuting each gene's expression profile prior to bootstrapping (n = 100).

When performing group-lasso modeling, only models with one surviving clonal frequency

vector (not including the truncal clone) were considered. When performing lasso modeling, only

models with one surviving clonal frequency vector were considered. To quantify model stability,

we calculated the number of times out of 100 bootstraps that the most frequent surviving

independent variable was the sole surviving variable. This stability metric was calculated for all

gene models, including the permuted models. From the resulting distributions of stability values,

a 5% FDR threshold was determined. For case one, the stability value of 73 represents the

point beyond which 5% or fewer of the models were permuted models. Similarly, for case two

the 5% FDR threshold for the stability metric was 45. Gene set enrichment analysis was

performed via a one-sided Fisher's exact test for all genes with significant model stability for the

same clonal frequency vector (**Tables S6** and **S20** for case one and case two, respectively),

with genes separated by the sign of the coefficient for the independent variable (**Tables S10**

and **S24** for case one and case two, respectively).

Differential gene coexpression analysis

Using the WGCNA R package[64], pairwise biweight midcorrelations (bicor) were calculated

among all 30,425 high-quality probes over all sections (n = 69–94) in each of five datasets (case

one + four normal human brain samples), generating five identically proportioned correlation

matrices (30,425 X 30,425). These correlations were then scaled to lie between [0,1] using the

strategy of Mason et al.[108]. To identify gene coexpression relationships that were present in

tumor but absent or weaker in normal human brain, each scaled bicor matrix produced from

normal human brain was subtracted[109] from the scaled bicor matrix produced from case one,

resulting in four "subtraction matrices", or SubMats. The consensus of the four SubMats was

formed by taking the minimum value at each point in the four matrices using the parallel

minimum (pmin) R function, and the resulting "Consensus SubMat" was used as input for gene

coexpression analysis (**Fig. S3a**). By definition, gene coexpression modules identified with this

strategy will consist of groups of genes with expression patterns that are highly correlated in the

astrocytoma but not in any of the normal human brain samples (**Fig. S3a**).

Probes in the Consensus SubMat were clustered using the flashClust[65] implementation

of a hierarchical clustering procedure with complete linkage and 1 – Consensus SubMat as a

distance measure. The resulting dendrogram was cut at a static height of ~0.38, corresponding

to the top 2% of values in the Consensus SubMat. All clusters consisting of at least 10 members

were identified and summarized by their module eigengene[36] using the moduleEigengenes

function of the WGCNA R package[64]. Highly similar modules were merged if the Pearson

correlation of their module eigengenes was > 0.85. This procedure was performed iteratively

such that the pair of modules with the highest correlation > 0.85 was merged, followed by

recalculation of all module eigengenes, followed by recalculation of all correlations, until no pairs

of modules exceeded the threshold. The WGCNA[64] measure of intramodular connectivity (k_{ME})

was calculated for all probes (n = 47,202) with respect to each module by correlating each

probe's expression pattern across all 69 tumor sections with each module eigengene.

Single-nucleus DNA-sequencing and analysis

Three sections from case two (sections 29 and 113 / 115, which were combined) were analyzed

by MissionBio, Inc. (MissionBio, San Francisco, CA) using their Tapestri microfluidics platform

for single-nucleus DNA amplicon sequencing[45]. Using an in-house protocol, 4,433 (section 29)

and 3,736 (sections 113 / 115) nuclei were extracted and recovered for analysis with the

Mission Bio AML panel, which includes primers flanking one *IDH1* and two *TP53* loci. In

addition, chr17 chromosomal copy number changes and *TP53* zygosity were inferred from a

germline heterozygous intronic mutation upstream of TP53 G245V that happened to fall within

the targeting panel (NC_000017.11:g.7674797T>A). Sequencing was performed on a MiSeq

(Illumina Inc., San Diego, CA), yielding an average of 6,801 (section 29) or 6,433 (sections 113 /

115) reads per nucleus, with alignment rates of ~90%. Hierarchical clustering of nuclei for

mutations of interest was performed separately for section 29 and sections 113 / 115 using

complete linkage and Euclidean distance, with k = 4 chosen based on silhouette[81] and elbow

plots[80]. Genotype calls for the clusters were manually annotated as described in **Fig. S4f** and

Table S21.

Single-nucleus RNA-sequencing and analysis

Library prep and sequencing

Four sections (17, 53, 93, 117) from case two were used to generate single-nucleus RNA-seq

(snRNA-seq) data. Our approach was adapted from TARGET-Seq[46], a protocol utilizing dual-

indexing of sample barcodes and unique molecular identifiers (UMIs) of captured transcripts.

Briefly, for each section, lysis was performed by dounce homogenization with staining of nuclei

by Hoescht3342 and subsequent flow-sorting into three 96-well plates per section. Each plate

was randomized and subsequently processed individually and in random order. We used the

SmartScribe kit (Takara Bio USA, San Diego, CA) for RT-PCR, followed by PCR with the

SeqAmp PCR kit (Takara Bio USA, San Diego, CA). Unlike TARGET-Seq, the RT reaction was

performed using only polyA primers (**Table S26**). ERCC spike-in control RNA was added to the

wells according to manufacturer's instructions to facilitate identification and correction of batch

effects. Wells for each plate were pooled in equivolume proportions and an Agilent 2100

Bioanalyzer (Agilent Technologies Inc., Santa Clara, CA) was used to assess sample quality

and cDNA concentrations were quantified using a Qubit 2.0 Fluorometer with the dsDNA-High

Sensitivity kit (Life Technologies Inc., Carlsbad, CA), yielding mean cDNA concentration of

1ng/ul. Concentrations were normalized prior to tagmentation (Nextera Kit, Illumina Inc., San

Diego, CA) and amplification of 3' ends, as in TARGET-Seq[46]. Sequencing was performed using

the 150-cycle high-throughput kit on an Illumina NextSeq550 at SeqMatic (Fremont, CA) with

dual-indexed sequencing and read parameters as in TARGET-seq.

Data preprocessing

snRNA-seq raw reads were demultiplexed and basecalled using "bcl2fastq" (Illumina Inc., San

Diego, CA). Barcodes were filtered using the "umi_tools" package[110] whitelist function, with a

Hamming distance of 2 and the density knee method to determine the number of true barcodes.

809 / 1152 nuclei (70.2%) passed this initial quality control step. Reads were assessed with

FastQC to ensure the quality of sequencing data by verifying high base-quality scores, lack of

GC bias, narrow distribution of sequencing lengths, and low levels of sequence duplication or

adapter sequences[93]. Next, reads were subjected to adapter trimming using the Trimmomatic

algorithm[111] with a minimum length of 30, a minimum quality of 4 with a 15 bp sliding window,

and otherwise default settings. A mean of 445,082 reads / nucleus was achieved at this stage.

Reads were subsequently aligned using ENCODE RNA-seq settings (except for

outFilterScoreMinOverLread, which was set to 0) with the STAR program[112] to the Genome

Reference Consortium Human Build 38[96]. Finally, an expression count matrix was generated

using the FeatureCounts program[113] with Gencode's library of gene features (version 21)[114],

subset using the "gene" attribute (n = 60,708 features). Deduplication of UMIs was performed

using a custom R script, resulting in a mean number of 206,638 unique reads / nucleus, a 46%

deduplication rate. Features with counts less than one in more than 90% of cells were removed

(n = 57,021 final features). Data were normalized with the RUVg package, regressing out 10

factors derived from PCA of the ERCC spike-in control expression matrix[98]. Normalized counts

were further processed using the Sanity package[25], with 1000 bins and a minimum and

maximum variance of 0.001 and 1000, respectively. Internuclear distance was determined using

the Sanity_distance function with a signal to noise parameter of 1 and inclusion of error bars.

snRNA-seq clustering and differential expression analysis

snRNA-seq data were hierarchically clustered using the hclust function in R with Ward's method

and the distance metric derived by Sanity[25]. This distance metric uses a Bayesian approach by

giving less weight to gene expression estimates with large error bars when calculating cell

distances. The optimal number of clusters (k = 12) was determined using elbow[80] and silhouette

plots[81] with the cluster package in R[82]. Differential expression analysis (t.test) was performed

between each cluster and all other clusters using Sanity-adjusted expression values for all

genes. The resulting distributions of t-values were then compared for genes comprising the bulk

coexpression modules most strongly associated with each malignant clone / nonmalignant cell

type and all other genes (white and black distributions, respectively, in **Fig. S6a-j**; significance

was evaluated with a one-sided Wilcoxon rank-sum test). Module genes were defined as those

that were significantly correlated with corresponding bulk coexpression module eigengenes as

determined by the FDR threshold[103]. If a gene was significantly correlated with more than one

module eigengene, it was assigned to the module for which it had the highest k_{ME} value.

CNV calling

The snRNA-seq count matrix was used as input to CopyKat[48]. Nuclei snRNA-seq clusters

determined to be non-malignant by snAmp-seq were used as normal control cells. "KS.cut" was

set to 2, "ngene.chr" was set to 20, and Ensembl gene names were used. InferCNV[23] was

provided with a vector of nonmalignant cells (as previously determined) based on clustering and

snAmp-seq in "subclusters" mode, with a cutoff parameter of 1, and denoising turned on,

"ward.D" as clustering method, "qnorm" as subcluster partition method, and tumor subcluster p-

value of 0.05. The Hidden Markov model was not used. The program CaSpER[49] was run with

the raw snRNA-seq count matrix as input and default settings, again using snRNA-seq clusters

of nuclei determined to be malignant by snAmp-seq as negative controls. For each of these

algorithms, the outputs were clustered based on Euclidean distance using Ward's D method.

Clusters with no CNV signal were labeled nonmalignant while all other clusters were presumed

to represent malignant cells.

Sensitivity and specificity were calculated using the snAmp-seq data as ground truth.

True positives (TP) were defined as the intersection of malignant calls by the CNV calling

algorithm and the snAmp-seq data. True negatives (TN) were defined as the intersection of

nonmalignant calls by the CNV calling algorithm and the snAmp-seq data. False negatives (FN)

and false positives (FP) were similarly defined. Nuclei with insufficient data were excluded from

the analysis. Sensitivity was defined as: TP / (TP + FN), while specificity was defined as: TN /

(TN + FP). Accuracy was defined as (TP + TN) / (TP + FP + TN + FN).

UMAP and trajectory analysis

UMAP was performed for all nuclei (n = 809) with a starting seed of 15, 30 neighbors, a spread

of 3, a minimum distance of 2, and 1 – Pearson correlation as a distance metric using the "uwot"

R package[115] after selecting the first 30 principal components of the Sanity-corrected expression

matrix including all genes. UMAP was also performed separately for all cells associated with

malignant clusters using the Sanity-corrected expression matrix. After selecting the first 15

principal components, the "uwot" package was used with a seed of 15, 20 neighbors, a spread

of 3, a minimum distance of 2, and 1-Pearson correlation as the similarity metric. All other

settings were left as defaults. Trajectory analysis was performed with the Slingshot R package[50]

on the UMAP plot. The "simple" distance method was used and all other parameters were left

as their default values.

Gene set enrichment analysis

Enrichment analysis (one-sided Fisher's exact test) was performed for each snRNA-seq cluster

using genes that were differentially expressed in that cluster relative to all other clusters using a

one-sided Wilcoxon rank-sum test. Resultant p-values were further FDR-corrected to q-

values[103]. Gene sets used for enrichment analysis are listed in **Table S9.**

Amp-seq genotyping

Single-nucleus amplicon-seq (snAmp-seq) was adapted from the TARGET-seq protocol[46].

Primers flanking the following mutations (marking the truncal clone) were designed with

Primer3[116]: IDH1 R132H, TP53 G245V, and RUFY1 K218N (**Table S26**). To overcome lack of

heterogeneity in sequencing, random spacers were added to the beginning (5' end) with 0 - 5

nucleotides from the sequence CGTAC. Finally, a common sequence was added to the 5' end

of the primer for a second round of PCR (**Table S26**). We selected wells that passed QC for

snRNA-seq analysis and processed each plate separately and in random order. Amplification of

the first round of PCR was performed with the KAPA 2G Ready Mix (Roche Inc., Nutley, NJ)

with the same PCR program as for TARGET-Seq[46]. The program "Barcrawl"[117] was used to

create custom dual-index barcodes for the amplification PCR. At this stage 10% of wells were

checked using an Agilent 2100 Bioanalyzer (Agilent Inc., Santa Clara, California) to determine

whether products of appropriate size were produced. All wells were quantified with a Qubit 2.0

Fluorometer using the dsDNA-High Sensitivity kit (Life Technologies Inc., Carlsbad, CA) and

normalized prior to the next step. The second round of PCR used custom sequencing primers

that were partially complementary to the previous sequences, with custom dual-index barcodes

generated from BarCrawl[117] and Illumina P5 / P7 sequences. Sequencing was performed using

a 300 cycle Miseq v2 Nano kit on a MiSeq (Illumina Inc., San Diego, CA).

snAmp-seq data were demultiplexed and basecalled using "bcl2fastq" (Illumina Inc., San

HDiego, CA). Reads were assessed with FastQC to ensure the quality of sequencing data by

verifying high base quality scores, lack of GC bias, narrow distribution of sequencing lengths,

and low levels of sequence duplication or adapter sequences[93]. Next, reads were subjected to

adapter trimming using the Trimmomatic algorithm[111] with a minimum length of 30, a minimum

quality of 4 with a 15 bp sliding window, and otherwise default settings[111]. Reads were

subsequently aligned with the STAR program to a custom version of the genome containing

only the amplicons of interest. Default parameters were altered such that no multiple alignments

or splicing events were allowed. The median number of reads per nucleus for each amplicon

was (IDH1 R132H: 177; TP53 G245V: 246; RUFY1 K218N: 209). Read counts supporting the

reference or variant allele within each amplicon were determined using the read counts function

from VarScan 2[79] and these counts were used to calculate variant frequencies. Nuclei were

sorted into three categories: called nuclei (calls by VarScan 2 of two or more mutant or two or

more wild-type [WT] calls of the three loci with either one or zero indeterminate calls),

discrepant nuclei (two WT and one mutant call), and insufficient data nuclei (two or more loci in

which VarScan 2 was unable to call a genotype). The breakdown for these categories is as

follows: 75% called nuclei, 1% discrepant nuclei, and 24% insufficient data nuclei (**Table S27**).

Inter-case analysis

Combined Pearson correlations to tumor purity for the 15,288 genes shared between case one

and case two were determined by calculating the weighted average of the z-scores produced by

Fisher's transformation, dividing this value by the joint standard error, and applying the inverse

Fisher transformation[29]. To define significant genes for enrichment analysis (**Fig. 7a-b**), a

minimum absolute value for Pearson's correlation of > 0.3 or < -0.3 was required in both cases

along with an FDR-corrected q-value of < 0.05. Enrichment analysis was performed as

described above, with gene sets listed in **Table S9**. Significant positively correlated genes were

subjected to protein-protein interaction (PPI) analysis using the STRING database[51]. We used

the STRINGdb[51,52], network[118], intergraph[119], and ggnetwork[120] packages to visualize the results

of STRING PPI analysis. The "physical" network flavor and minimum score of 900 was utilized

to guarantee that all depicted interactions were actual PPIs with experimental evidence.

Clusters with more than five members were chosen from the set of interaction clusters

generated from all genes that had positive correlations and passed the correlation cutoffs listed

above. Enrichment analysis of PPI clusters was performed as described above, with gene sets

listed in **Table S9**.

Histology and immunostaining

Tumor tissue was fixed in 10% neutral-buffered formalin, processed, and embedded in paraffin.

Tumor sections (5 µm) were prepared and stored at -20ºC prior to use. Hematoxylin and eosin

staining was performed using standard methods. As part of clinical evaluation, the proliferative

index and TP53 mutation status were estimated based on review of immunostained slides for

KI67 or TP53, respectively. Briefly, in regions with increased signal the percent of tumor cells

staining was estimated based on review of ten 200x fields.

Anti-AKR1C3 was selected based on statistical considerations pursuant to bioinformatic

analyses and after preliminary validation of efficacy in human tissue via The Human Protein

Atlas[121] (http://www.proteinatlas.org). Primary antibodies and conditions were IDH1 R132H (DIA-

H09, Dianova, mouse clone H09, dilution 1:50); AKR1C3 (Catalog# AB84327, Abcam, rabbit

polyclonal, dilution 1:600 for single immunohistochemistry and 1:1200 for dual

immunofluorescence); and TP53 (1:25, Novocastra, catalog # P53-D07-L-CE-H). Heat antigen

retrieval was performed in Tris-EDTA at pH8. Following antigen retrieval, sections for

immunohistochemistry were treated with 3% methanol-hydrogen peroxide at 22°C for 16 min.

All immunostaining and multiplex immunostainings were performed using a Discovery

XT autostainer or Benchmark XT (Ventana Medical Systems, Inc., USA). For signal detection,

the Multimer HRP kit (Ventana Medical Systems, Inc., USA) followed by either DAB or

fluorescent detection kits were used. Fluorophores with the least autofluorescence on FFPE

tissue were selected to minimize false positives: Cyanine 5 (Cy5) (DISCOVERY CY5 Kit,

Cat#760238, Roche Diagnostics Corporation, Indianapolis, USA) and rhodamine (DISCOVERY

Rhodamine Kit, Cat#760233, Roche Diagnostics Corporation, Indianapolis, USA). Slides were

then counterstained with DAPI (Sigma Aldrich, USA) at 5 µg/ml in PBS (Sigma Aldrich, USA) for

15 minutes, mounted with prolong Gold antifade mounting media reagent (Invitrogen, USA) and

stored at -20ºC prior to imaging. Positive and negative controls were included for each marker.

Images of stained slides were acquired using either a light microscope (Olympus BX41

microscope using UC90 Cooled CCD 9 Megapixel camera) or Zeiss Cell Observer

epifluorescence microscope equipped with an AxioCam 506M camera and an Excellitas X-Cite

120Q light source and processed with Photoshop CS6 (Adobe systems, San Jose, CA).

Nonmalignant tissue analyzed in **Fig. 7** was obtained from a patient with epilepsy and

corresponds to normal tissue adjacent to epileptic foci.

Data analysis and figure production

Unless otherwise stated, all analyses were performed in the R computing environment

(https://www.r-project.org). Figures were produced with the aid of the R packages ggplot2[122],

data.table[123], RColorBrewer[124], gridExtra[125], ComplexHeatmap[126], Circlize[127], and ggsignif[128].

Data and code availability

All data are publicly available for download under NCBI Bioproject ID PRJNA953039. Code for

processing data and producing figures featured in this manuscript is available on GitHub:

https://github.com/oldham-lab/Deconstructing-Intratumoral-Heterogeneity-through-Multiomic-

and-Multiscale-Analysis.../tree/main

References

1.   Burrell, R. A., McGranahan, N., Bartek, J. & Swanton, C. The causes and consequences

1121  of genetic heterogeneity in cancer evolution. *Nature* **501**, 338–345 (2013).

1122 2. Mazor, T., Pankov, A., Song, J. S. & Costello, J. F. Intratumoral heterogeneity of the

1123  epigenome. *Cancer Cell* **29**, 440–451 (2016).

1124 3. Williams, M. J., Werner, B., Barnes, C. P., Graham, T. A. & Sottoriva, A. Identification of

1125  neutral tumor evolution across cancer types. *Nat. Genet.* **48**, 238–244 (2016).

1126 4. Nowell, P. C. The clonal evolution of tumor cell populations. *Science* **194**, 23–28 (1976).

1127 5. van der Woude, L. L., Gorris, M. A. J., Halilovic, A., Figdor, C. G. & de Vries, I. J. M.

1128  Migrating into the Tumor: a Roadmap for T Cells. *Trends Cancer* **3**, 797–808 (2017).

1129 6. Christofides, A. *et al.* The complex role of tumor-infiltrating macrophages. *Nat. Immunol.*

1130  **23**, 1148–1156 (2022).

1131 7. Marusyk, A., Janiszewska, M. & Polyak, K. Intratumor heterogeneity: the rosetta stone of

1132  therapy resistance. *Cancer Cell* **37**, 471–484 (2020).

1133 8. Vogelstein, B. *et al.* Cancer genome landscapes. *Science* **339**, 1546–1558 (2013).

1134 9. Chalmers, Z. R. *et al.* Analysis of 100,000 human cancer genomes reveals the landscape

1135  of tumor mutational burden. *Genome Med.* **9**, 34 (2017).

1136 10. Lawrence, M. S. *et al.* Mutational heterogeneity in cancer and the search for new cancer-

1137  associated genes. *Nature* **499**, 214–218 (2013).

1138 11. Martincorena, I. *et al.* Universal patterns of selection in cancer and somatic tissues. *Cell*

1139  **171**, 1029-1041.e21 (2017).

1140 12. Alexandrov, L. B. *et al.* The repertoire of mutational signatures in human cancer. *Nature*

1141  **578**, 94–101 (2020).

1142 13. Pribluda, A., de la Cruz, C. C. & Jackson, E. L. Intratumoral heterogeneity: from diversity

1143  comes resistance. *Clin. Cancer Res.* **21**, 2916–2923 (2015).

1144 14. Vitale, I., Shema, E., Loi, S. & Galluzzi, L. Intratumoral heterogeneity in cancer

1145  progression and response to immunotherapy. *Nat. Med.* **27**, 212–224 (2021).

1146 15. Gerlinger, M. *et al.* Intratumor heterogeneity and branched evolution revealed by

multiregion sequencing. *N. Engl. J. Med.* **366**, 883–892 (2012).

16. Seol, H. *et al.* Intratumoral heterogeneity of HER2 gene amplification in breast cancer: its

clinicopathological significance. *Mod. Pathol.* **25**, 938–948 (2012).

17. Losi, L., Baisse, B., Bouzourene, H. & Benhattar, J. Evolution of intratumoral genetic

heterogeneity during colorectal cancer progression. *Carcinogenesis* **26**, 916–922 (2005).

18. Sottoriva, A. *et al.* Intratumor heterogeneity in human glioblastoma reflects cancer

evolutionary dynamics. *Proc Natl Acad Sci USA* **110**, 4009–4014 (2013).

19. Dagogo-Jack, I. & Shaw, A. T. Tumour heterogeneity and resistance to cancer therapies.

Nat. Rev. Clin. Oncol. **15**, 81–94 (2018).

20. Gerlovina, I., van der Laan, M. J. & Hubbard, A. Big data, small sample. *Int. J. Biostat.* **13**,

(2017).

21. Tirosh, I. *et al.* Single-cell RNA-seq supports a developmental hierarchy in human

oligodendroglioma. *Nature* **539**, 309–313 (2016).

22. Venteicher, A. S. *et al.* Decoupling genetics, lineages, and microenvironment in IDH-

mutant gliomas by single-cell RNA-seq. *Science* **355**, (2017).

23. Patel, A. P. *et al.* Single-cell RNA-seq highlights intratumoral heterogeneity in primary

glioblastoma. *Science* **344**, 1396–1401 (2014).

24. Young, M. D. & Behjati, S. SoupX removes ambient RNA contamination from droplet-

based single-cell RNA sequencing data. *Gigascience* **9**, giaa151. (2020).

25. Breda, J., Zavolan, M. & van Nimwegen, E. Bayesian inference of gene expression states

from single-cell RNA-seq data. *Nat. Biotechnol.* **39**, 1008–1016 (2021).

26. Zhang, M. J., Ntranos, V. & Tse, D. Determining sequencing depth in a single-cell RNA-

seq experiment. *Nat. Commun.* **11**, 774 (2020).

27. Denisenko, E. *et al.* Systematic assessment of tissue dissociation and storage biases in

single-cell and single-nucleus RNA-seq workflows. *Genome Biol.* **21**, 130 (2020).

28. Caglayan, E., Liu, Y. & Konopka, G. Neuronal ambient RNA contamination causes

misinterpreted and masked cell types in brain single-nuclei datasets. *Neuron* **110**, 4043-

4056.e5 (2022).

29.   Kelley, K. W., Nakao-Inoue, H., Molofsky, A. V. & Oldham, M. C. Variation among intact

tissue samples reveals the core transcriptional features of human CNS cell classes. *Nat.*

Neurosci. **21**, 1171–1184 (2018).

30.   Oldham, M. C. *et al.* Functional organization of the transcriptome in human brain. *Nat.*

Neurosci. **11**, 1271–1282 (2008).

31.   Roth, A. *et al.* PyClone: statistical inference of clonal population structure in cancer. *Nat.*

Methods **11**, 396–398 (2014).

32.   Malikic, S., McPherson, A. W., Donmez, N. & Sahinalp, C. S. Clonality inference in

multiple tumor samples using phylogeny. *Bioinformatics* **31**, 1349–1356 (2015).

33.   Louis, D. N. *et al.* The 2021 WHO Classification of Tumors of the Central Nervous

System: a summary. *Neuro Oncol.* **23**, 1231–1251 (2021).

34.   Shen, R. & Seshan, V. E. FACETS: allele-specific copy number and clonal heterogeneity

analysis tool for high-throughput DNA sequencing. *Nucleic Acids Res.* **44**, e131 (2016).

35.   Feber, A. *et al.* Using high-density DNA methylation arrays to profile copy number

alterations. *Genome Biol.* **15**, R30 (2014).

36.   Horvath, S. & Dong, J. Geometric interpretation of gene coexpression network analysis.

PLoS Comput. Biol. **4**, e1000117 (2008).

37.   Raju, C. S. *et al.* Secretagogin is expressed by developing neocortical gabaergic neurons

in humans but not mice and increases neurite arbor size and complexity. *Cereb. Cortex*

28, 1946–1958 (2018).

38.   Lui, J. H. *et al.* Radial glia require PDGFD-PDGFRβ signalling in human but not mouse

neocortex. *Nature* **515**, 264–268 (2014).

39.   Verhaak, R. G. W. *et al.* Integrated genomic analysis identifies clinically relevant subtypes

of glioblastoma characterized by abnormalities in PDGFRA, IDH1, EGFR, and NF1.

Cancer Cell **17**, 98–110 (2010).

40. Phillips, H. S. *et al.* Molecular subclasses of high-grade glioma predict prognosis,

delineate a pattern of disease progression, and resemble stages in neurogenesis. *Cancer*

Cell **9**, 157–173 (2006).

41. Mazor, T. *et al.* Clonal expansion and epigenetic reprogramming following deletion or

amplification of mutant IDH1. *Proc Natl Acad Sci USA* **114**, 10743–10748 (2017).

42. Favero, F. *et al.* Glioblastoma adaptation traced through decline of an IDH1 clonal driver

and macro-evolution of a double-minute chromosome. *Ann. Oncol.* **26**, 880–887 (2015).

43. Pusch, S. *et al.* IDH1 mutation patterns off the beaten track. *Neuropathol. Appl. Neurobiol.*

37, 428–430 (2011).

44. Talevich, E., Shain, A. H., Botton, T. & Bastian, B. C. CNVkit: Genome-Wide Copy

Number Detection and Visualization from Targeted DNA Sequencing. *PLoS Comput. Biol.*

12, e1004873 (2016).

45. Eastburn, D. J., Sciambi, A. & Abate, A. R. Identification and genetic analysis of cancer

cells with PCR-activated cell sorting. *Nucleic Acids Res.* **42**, e128 (2014).

46. Rodriguez-Meira, A., O'Sullivan, J., Rahman, H. & Mead, A. J. TARGET-Seq: A Protocol

for High-Sensitivity Single-Cell Mutational Analysis and Parallel RNA Sequencing. *STAR*

Protocols **1**, 100125 (2020).

47. Rodriguez-Meira, A. *et al.* Unravelling Intratumoral Heterogeneity through High-Sensitivity

Single-Cell Mutational Analysis and Parallel RNA Sequencing. *Mol. Cell* **73**, 1292-1305.e8

(2019).

48. Gao, R. *et al.* Delineating copy number and clonal substructure in human tumors from

single-cell transcriptomes. *Nat. Biotechnol.* **39**, 599–608 (2021).

49. Serin Harmanci, A., Harmanci, A. O. & Zhou, X. CaSpER identifies and visualizes CNV

events by integrative analysis of single-cell or bulk RNA-sequencing data. *Nat. Commun.*

11, 89 (2020).

50. Street, K. *et al.* Slingshot: cell lineage and pseudotime inference for single-cell

transcriptomics. *BMC Genomics* **19**, 477 (2018).

51. Szklarczyk, D. *et al.* STRING v11: protein-protein association networks with increased

coverage, supporting functional discovery in genome-wide experimental datasets. *Nucleic*

Acids Res. **47**, D607–D613 (2019).

52. Szklarczyk, D. *et al.* The STRING database in 2021: customizable protein-protein

networks, and functional characterization of user-uploaded gene/measurement sets.

Nucleic Acids Res. **49**, D605–D612 (2021).

53. Garcia-Diaz, C. *et al.* Glioblastoma cell fate is differentially regulated by the

microenvironments of the tumor bulk and infiltrative margin. *Cell Rep.* **42**, 112472 (2023).

54. Spassky, N. *et al.* Adult ependymal cells are postmitotic and are derived from radial glial

cells during embryogenesis. *J. Neurosci.* **25**, 10–18 (2005).

55. Hahn, W. C. *et al.* An expanded universe of cancer targets. *Cell* **184**, 1142–1155 (2021).

56. Penning, T. M. AKR1C3 (type 5 17β-hydroxysteroid dehydrogenase/prostaglandin F

synthase): Roles in malignancy and endocrine disorders. *Mol. Cell. Endocrinol.* **489**, 82–

91 (2019).

57. Zhou, Q. *et al.* A Positive Feedback Loop of AKR1C3-Mediated Activation of NF-κB and

STAT3 Facilitates Proliferation and Metastasis in Hepatocellular Carcinoma. *Cancer Res.*

81, 1361–1374 (2021).

58. Liu, C. *et al.* Intracrine androgens and AKR1C3 activation confer resistance to

enzalutamide in prostate cancer. *Cancer Res.* **75**, 1413–1422 (2015).

59. Bortolozzi, R. *et al.* AKR1C enzymes sustain therapy resistance in paediatric T-ALL. *Br. J.*

Cancer **118**, 985–994 (2018).

60. Dang, L. *et al.* Cancer-associated IDH1 mutations produce 2-hydroxyglutarate. *Nature*

462, 739–744 (2009).

61. Xu, W. *et al.* Oncometabolite 2-hydroxyglutarate is a competitive inhibitor of α-

ketoglutarate-dependent dioxygenases. *Cancer Cell* **19**, 17–30 (2011).

62.   Mellinghoff, I. K. *et al.* Vorasidenib in IDH1- or IDH2-Mutant Low-Grade Glioma. *N. Engl.*

J. Med. (2023) doi:10.1056/NEJMoa2304194.

63.   Faul, F., Erdfelder, E., Buchner, A. & Lang, A.-G. Statistical power analyses using

G*Power 3.1: Tests for correlation and regression analyses. *Behav. Res. Methods* **41**,

1149–1160 (2009).

64.   Langfelder, P. & Horvath, S. WGCNA: an R package for weighted correlation network

analysis. *BMC Bioinformatics* **9**, 559 (2008).

65.   Langfelder, P. & Horvath, S. Fast R Functions for Robust Correlations and Hierarchical

Clustering. *J. Stat. Softw.* **46**, (2012).

66.   Johnson, B. E. *et al.* Mutational analysis reveals the origin and therapy-driven evolution of

recurrent glioma. *Science* **343**, 189–193 (2014).

67.   Li, H. & Durbin, R. Fast and accurate long-read alignment with Burrows-Wheeler

transform. *Bioinformatics* **26**, 589–595 (2010).

68.   Broad Institute, G. Repository. *Picard Toolkit.* (Broad Institute, 2019).

69.   Van der Auwera, G. A. *et al.* From FastQ data to high confidence variant calls: the

Genome Analysis Toolkit best practices pipeline. *Curr. Protoc. Bioinformatics* **11**, 11.10.1-

11.10.33 (2013).

70.   Cibulskis, K. *et al.* Sensitive detection of somatic point mutations in impure and

heterogeneous cancer samples. *Nat. Biotechnol.* **31**, 213–219 (2013).

71.   Ye, K., Schulz, M. H., Long, Q., Apweiler, R. & Ning, Z. Pindel: a pattern growth approach

to detect break points of large deletions and medium sized insertions from paired-end

short reads. *Bioinformatics* **25**, 2865–2871 (2009).

72.   Wang, K., Li, M. & Hakonarson, H. ANNOVAR: functional annotation of genetic variants

from high-throughput sequencing data. *Nucleic Acids Res.* **38**, e164 (2010).

73.   Sherry, S. T. *et al.* dbSNP: the NCBI database of genetic variation. *Nucleic Acids Res.* **29**,

308–311 (2001).

74. 1000 Genomes Project Consortium *et al.* A global reference for human genetic variation.

Nature **526**, 68–74 (2015).

75. McLaren, W. *et al.* The ensembl variant effect predictor. *Genome Biol.* **17**, 122 (2016).

76. Ye, J. *et al.* Primer-BLAST: a tool to design target-specific primers for polymerase chain

reaction. *BMC Bioinformatics* **13**, 134 (2012).

77. Li, H. Aligning sequence reads, clone sequences and assembly contigs with BWA-MEM.

arXiv (2013) doi:10.48550/arxiv.1303.3997.

78. Li, H. *et al.* The Sequence Alignment/Map format and SAMtools. *Bioinformatics* **25**, 2078–

2079 (2009).

79. Koboldt, D. C. *et al.* VarScan 2: somatic mutation and copy number alteration discovery in

cancer by exome sequencing. *Genome Res.* **22**, 568–576 (2012).

80. Thorndike, R. L. Who belongs in the family? *Psychometrika* **18**, 267–276 (1953).

81. Rousseeuw, P. J. Silhouettes: A graphical aid to the interpretation and validation of cluster

analysis. *Journal of Computational and Applied Mathematics* **20**, 53–65 (1987).

82. Maechler, M., Rousseeuw, P., Struyf, A., Hubert, M. & Hornik, K. cluster: Cluster Analysis

Basics and Extensions. Available online at: https://CRAN.R-project.org/package=cluster.

(2022).

83. Morris, T. J. *et al.* Champ: 450k chip analysis methylation pipeline. *Bioinformatics* **30**,

428–430 (2014).

84. Aryee, M. J. *et al.* Minfi: a flexible and comprehensive Bioconductor package for the

analysis of Infinium DNA methylation microarrays. *Bioinformatics* **30**, 1363–1369 (2014).

85. Fortin, J.-P., Triche, T. J. & Hansen, K. D. Preprocessing, normalization and integration of

the Illumina HumanMethylationEPIC array with minfi. *Bioinformatics* **33**, 558–560 (2017).

86. Zhou, W., Laird, P. W. & Shen, H. Comprehensive characterization, annotation and

innovative use of Infinium DNA methylation BeadChip probes. *Nucleic Acids Res.* **45**, e22

(2017).

87.   Dedeurwaerder, S. *et al.* Evaluation of the Infinium Methylation 450K technology.

Epigenomics **3**, 771–784 (2011).

88.   Teschendorff, A. E. *et al.* A beta-mixture quantile normalization method for correcting

probe design bias in Illumina Infinium 450 k DNA methylation data. *Bioinformatics* **29**,

189–196 (2013).

89.   Oldham, M. C., Langfelder, P. & Horvath, S. Network methods for describing sample

relationships in genomic datasets: application to Huntington's disease. *BMC Syst. Biol.* **6**,

63 (2012).

90.   Bolstad, B. M., Irizarry, R. A., Astrand, M. & Speed, T. P. A comparison of normalization

methods for high density oligonucleotide array data based on variance and bias.

Bioinformatics **19**, 185–193 (2003).

91.   Johnson, W. E., Li, C. & Rabinovic, A. Adjusting batch effects in microarray expression

data using empirical Bayes methods. *Biostatistics* **8**, 118–127 (2007).

92.   Barbosa-Morais, N. L. *et al.* A re-annotation pipeline for Illumina BeadArrays: improving

the interpretation of gene expression data. *Nucleic Acids Res.* **38**, e17 (2010).

93.   Andrews, S. *et al.* FastQC: a quality control tool for high throughput sequence data.

Available online at: http://www.bioinformatics.babraham.ac.uk/projects/fastqc. (2010).

94.   Martin, M. Cutadapt removes adapter sequences from high-throughput sequencing reads.

EMBnet j. **17**, 10 (2011).

95.   Langmead, B. & Salzberg, S. L. Fast gapped-read alignment with Bowtie 2. *Nat. Methods*

9, 357–359 (2012).

96.   International Human Genome Sequencing Consortium *et al.* Initial sequencing and

analysis of the human genome. *Nature* **409**, 860–921 (2001).

97.   Rosenbloom, K. R. *et al.* ENCODE whole-genome data in the UCSC Genome Browser:

update 2012. *Nucleic Acids Res.* **40**, D912-7 (2012).

98. Risso, D., Ngai, J., Speed, T. P. & Dudoit, S. Normalization of RNA-seq data using factor

analysis of control genes or samples. *Nat. Biotechnol.* **32**, 896–902 (2014).

99. Olshen, A. B. *et al.* Parent-specific copy number in paired tumor-normal studies using

circular binary segmentation. *Bioinformatics* **27**, 2038–2046 (2011).

100. Venkatraman, E. S. & Olshen, A. B. A faster circular binary segmentation algorithm for the

analysis of array CGH data. *Bioinformatics* **23**, 657–663 (2007).

101. Glur, C. data.tree: General Purpose Hierarchical Data Structure. Available online at:

https://CRAN.R-project.org/package=data.tree. (2020).

102. Iannone, R. DiagrammeR: Graph/Network Visualization. Available online at:

https://CRAN.R-project.org/package=DiagrammeR. (2022).

103. Storey, J. D. & Tibshirani, R. Statistical significance for genomewide studies. *Proc Natl*

Acad Sci USA **100**, 9440–9445 (2003).

104. Klosa, J., Simon, N., Westermark, P. O., Liebscher, V. & Wittenburg, D. Seagull: lasso,

group lasso and sparse-group lasso regularization for linear regression models via

proximal gradient descent. *BMC Bioinformatics* **21**, 407 (2020).

105. Tibshirani, R. Regression Shrinkage and Selection via the Lasso . *J R Stat Soc Series B*

Stat Methodol **58**, 267–288 (1995).

106. Yuan, M. & Lin, Y. Model selection and estimation in regression with grouped variables. *J.*

Royal Statistical Soc. B **68**, 49–67 (2006).

107. Laurin, C., Boomsma, D. & Lubke, G. The use of vector bootstrapping to improve variable

selection precision in Lasso models. *Stat. Appl. Genet. Mol. Biol.* **15**, 305–320 (2016).

108. Mason, M. J., Fan, G., Plath, K., Zhou, Q. & Horvath, S. Signed weighted gene co-

expression network analysis of transcriptional regulation in murine embryonic stem cells.

BMC Genomics **10**, 327 (2009).

109. Tesson, B. M., Breitling, R. & Jansen, R. C. DiffCoEx: a simple and sensitive method to

find differentially coexpressed gene modules. *BMC Bioinformatics* **11**, 497 (2010).

110. Smith, T., Heger, A. & Sudbery, I. UMI-tools: modeling sequencing errors in Unique

Molecular Identifiers to improve quantification accuracy. *Genome Res.* **27**, 491–499

(2017).

111. Bolger, A. M., Lohse, M. & Usadel, B. Trimmomatic: a flexible trimmer for Illumina

sequence data. *Bioinformatics* **30**, 2114–2120 (2014).

112. Dobin, A. *et al.* STAR: ultrafast universal RNA-seq aligner. *Bioinformatics* **29**, 15–21

(2013).

113. Liao, Y., Smyth, G. K. & Shi, W. featureCounts: an efficient general purpose program for

assigning sequence reads to genomic features. *Bioinformatics* **30**, 923–930 (2014).

114. Harrow, J. *et al.* GENCODE: the reference human genome annotation for The ENCODE

Project. *Genome Res.* **22**, 1760–1774 (2012).

115. Melville, J. uwot: The Uniform Manifold Approximation and Projection (UMAP) Method for

Dimensionality Reduction. (2021).

116. Untergasser, A. *et al.* Primer3--new capabilities and interfaces. *Nucleic Acids Res.* **40**,

e115 (2012).

117. Frank, D. N. BARCRAWL and BARTAB: software tools for the design and implementation

of barcoded primers for highly multiplexed DNA sequencing. *BMC Bioinformatics* **10**, 362

(2009).

118. Butts, C. T. network : A Package for Managing Relational Data inR. *J. Stat. Softw.* **24**,

(2008).

119. Bojanowski, M. intergraph: Coercion Routines for Network Data Objects. Available online

at: http://mbojan.github.io/intergraph. (2015).

120. Briatte, F. ggnetwork: Geometries to Plot Networks with "ggplot2". Available online

at: https://CRAN.R-project.org/package=ggnetwork. (2021).

121. Karlsson, M. *et al.* A single-cell type transcriptomics map of human tissues. *Sci. Adv.* **7**,

(2021).

122.   Wickham, H. *ggplot2: Elegant Graphics for Data Analysis (Use R!)*. 276 (Springer, 2016).

123.   Dowle, M. & Srinivasan, A. data.table: Extension of `data.frame`. Available online

at: https://CRAN.R-project.org/package=data.table. (2021).

124.   Neuwirth, E. RColorBrewer: ColorBrewer Palettes. Available online at: https://CRAN.R-

project.org/package=RColorBrewer. (2022).

125.   Auguie, B. gridExtra: Miscellaneous Functions for "Grid" Graphics. Available online

at: https://CRAN.R-project.org/package=gridExtra. (2017).

126.   Gu, Z., Eils, R. & Schlesner, M. Complex heatmaps reveal patterns and correlations in

multidimensional genomic data. *Bioinformatics* **32**, 2847–2849 (2016).

127.   Gu, Z., Gu, L., Eils, R., Schlesner, M. & Brors, B. circlize Implements and enhances

circular visualization in R. *Bioinformatics* **30**, 2811–2812 (2014).

128.   Ahlmann-Eltze, C. & Patil, I. ggsignif: R Package for Displaying Significance Brackets for

"ggplot2." (2021) doi:10.31234/osf.io/7awm6.

Figures

a

b

c

f

Serial sectioning

Frozen tumor   n=81

Sectioning plane

d   IDH1 R132H

e   TP53

- ⬤ Gene expression (n = 69)
- ⬤ Exome (n = 3)
- ⬤ Amp-seq (n = 69)
- ⬤ DNA methylation (n = 68)
- ⬤ Quality control (n = 12)
- Total sections (n = 81)

g   **Clustering of Amp−seq VAFs**

Cl. 2   Cl. 3   Cl. 1

2

3

1

ZFYVE16 D874N
BRINP1 R622N
GPR173 A41T
OR52N2 R236H
SLC20A2 R611H
ADGRG6 C41F
NTRK1 E377G
SUSD4 N37Ter
C2 R162N
H4C12 G102D
MUC16 I7543F
ACCS A197T
TBCC R12S
GDPD2 A104T
TP53 L145P
CTNNA3 D364G
IDH1 R132H
TEC F92L
FAM193B P556A
IAPP N55S
PASD1 T679A
PLA2G4D A692V

Pearson correlation
−1   0   1

h   **Cluster 1**
mean depth: 1.6x10⁴ reads

VAF   0.9   0

1   Section ID   81

— ACCS A197T
— TP53 L145P
— CTNNA3 D364G
— IDH1 R132H
— TEC F92L
— **FAM193B P556A**
— IAPP N55S

i   **Cluster 1**
mean depth: 3.7x10³ reads

0.9   0

1   Section ID   81

— SUSD4 N37Ter
— C2 R162N
— H4C12 G102D
— MUC16 I7543F
— TBCC R12S
— **GDPD2 A104T**
— PASD1 T679A
— PLA2G4D A692V

j   **Cluster 2**
mean depth: 4.4x10³ reads

VAF   0.3   0

1   Section ID   81

— ZFYVE16 D874N
— BRINP1 R622N
— **GPR173 A41T**
— OR52N2 R236H

k   **Cluster 3**
mean depth: 2.9x10³ reads

VAF   0.2   0

1   Section ID   81

— SLC20A2 R611H
— ADGRG6 C41F
— NTRK1 E377G

l   **Clonal tree**

Non-malignant
34.2%

IDH1 R132H
TP53 L145P
Chr 17p LOH
Chr 7 gain
Cluster 1 without
ACCS A197T

Clone 1
24.8%

ACCS A197T

Chr 2p del
Chr 4p del
GPR173 A41T

Clone 2
0.001%

Clone 3
13.0%

Chr 10p gain
SLC20A2 R611H
ADGRG6 C41F
NTRK1 Q377G

Chr2q del

ZFYVE16 D874N
BRINP1 R622N
OR52N2 R236H

Clone 4
1.9%

Clone 5
13.8%

Clone 6
12.2%

m   **Cellular fraction**

Percentage   100   0

1   Section ID   81

☐ Nonmalignant
Clone 1
Clone 2
Clone 3
Clone 4
Clone 5
Clone 6

Figure 1 | Multiomic analysis of serial tumor sections reveals the clonal composition of a primary grade 2 IDH-mutant astrocytoma (case 1).

Axial T2 **(a)** and axial FLAIR **(b)** images demonstrate a round, well-defined T2 and FLAIR hyperintense intraaxial left temporoparietal mass that is non-enhancing and consistent with a low-grade glial neoplasm. **c)** Image of the frozen tumor sample prior to cryosectioning and nucleic acid isolation. **d-e)** Immunostaining for IDH1 R132H (**d**) and TP53 (**e**). Images: 400x. Scale bars: 50 μm. **f)** Schematic of serial sectioning strategy and section usage plan. Amp-seq = deep sequencing of PCR amplicons spanning mutations identified by exome sequencing. **g)** Hierarchical clustering of mutations, using 1 – Pearson correlation of amp-seq variant allele frequencies (VAFs) over all tumor sections (n = 69) as a distance measure, reveals three clusters. Amp-seq was performed in two sequencing runs (denoted by bold and regular fonts). **h-k)** VAF patterns comprising cluster 1 **(h,i)**, cluster 2 **(j)**, and cluster 3 **(k)**. Cluster 1 was split to illustrate the effects of high **(h)** and low **(i)** coverage. **l)** Clone phylogeny (with arbitrary branch lengths) derived from integrated analysis of SNVs (from amp-seq data) and CNVs (from DNA methylation data). Percentages represent the average abundance of each cellular fraction over all analyzed sections (n = 68). **m)** Estimated cellular fractions for all clones and nonmalignant cells over all sections (n = 68).

a

Mutations identified by exome sequencing

b

d

Effect on TP53 VAF between full and downsampled coverage

c

Effect on IDH1 VAF between full and downsampled coverage

e

f

Concordance of exome, DNA methylation and amp−seq CNV calls

Figure S1 | Mutation validation (case 1).

a) Nonsynonymous mutations were identified by exome sequencing of tumor sections 14, 39, 69, and the patient's blood. Green track: variant allele frequencies (VAF) for each mutation in each section. Black tracks: mutation validation by Sanger sequencing and amp-seq, which is more sensitive. Blue track: gene mutation frequencies in TCGA astrocytomas (n = 286). Red track: mean expression percentiles for each gene over all tumor sections. **b)** Amp-seq and droplet-digital PCR (ddPCR) yielded consistent estimates of IDH1 R132H variant frequencies (n = 69 tumor sections; rep. 1 and rep. 2 denote technical replicates using the same input DNA). Shaded areas represent two standard errors. **c-d)** Downsampling of amp-seq reads for IDH1 R132H **(c)** and TP53 L145P **(d)** was performed in each tumor section to achieve desired coverage levels (x-axis). For each downsampling (n = 1,000), the root mean square-error (RMSE; top) and Pearson's correlation (bottom) was calculated with respect to the true VAF (calculated using all reads) over all sections (n = 69). **e)** Relative copy number was determined by SYBR Green qPCR for *TP53* and *ACCS* loci using genomic DNA from 69 tumor sections and blood. The mean of triplicate measurements, normalized to RNaseP (*RPPH1*) copy number, is shown. Shaded areas represent two standard errors. **f)** Top: Concordant estimates of chr17p loss-of-heterozygosity (LOH) in the same tumor sections (n = 3) were obtained from exome data by analyzing changes in B-allele frequencies and from amp-seq data by analyzing TP53 L145P VAF, which is equivalent to chr17p LOH frequency since both events are truncal. Bottom: Concordant estimates of CNV frequencies in the same tumor sections (n = 3) were obtained using FACETS[34] and ChAMPS[35] to analyze exome and DNA methylation data, respectively.

Figure 2 | Correlation to malignant cell abundance predicts single-cell differential expression analysis of malignant vs. nonmalignant cells.

a-d) Analysis schematic. An adult malignant glioma consisting of malignant cells (pink) interspersed with nonmalignant cells **(a)**. **b)** Single-cell RNA-seq (scRNA-seq) reveals a hypothetical gene (gene *X*) that is significantly up-regulated in malignant vs. nonmalignant cells. **c)** Correlating the same gene's expression pattern with a binary vector encoding malignant cell abundance (1 = malignant, 0 = nonmalignant) produces identical results. **d)** Left: scRNA-seq data from 10 adult human IDH-mutant astrocytomas[22] were randomly sampled and aggregated to create 100 pseudobulk samples. Right (top): Genome-wide differential expression (DE) was analyzed for all sampled cells. Right (bottom): Genome-wide gene coexpression was analyzed for all pseudobulk samples. Each pseudobulk module was summarized by its module eigengene (PC1), which was compared to malignant cell abundance, and the correlation between each gene and each module eigengene (module conformity, or k_{ME}) was calculated. **e)** A pseudobulk malignant cell module featuring the top 15 genes ranked by k_{ME}. By correlating the module eigengene to pseudobulk tumor purity **(f)**, we see that this module is driven by variation in malignant cell abundance among pseudobulk samples. **g)** The extent of DE (t-value) identified by scRNA-seq of malignant vs. nonmalignant cells predicts the correlation between gene expression and malignant cell abundance (pseudobulk k_{ME}).

Figure 3 | Gene coexpression modules are highly correlated with clonal abundance (case
1).
a) Hierarchical clustering of gene coexpression modules over all tumor sections (n = 69). **b)**
Module eigengenes (ME) illustrate the relative expression levels of genes in each module over
all tumor sections. **c)** The number of genes used to form each ME. **d-g)** Top left: MEs with the
strongest correlations to clonal abundance (defined cumulatively). Locally weighted smoothing
(LOESS) lines are shown; correlation is based on data points. Bottom left: the 12 genes with the
highest correlations to the ME (k_{ME}). Right: enrichment analysis of gene coexpression modules
using published gene sets. FDR-corrected p-values (q-values) from one-sided Fisher's exact
tests are shown. Positive values represent enrichments of genes that were significantly
positively correlated to the ME, while negative values represent enrichments of genes that were
significantly negatively correlated to the ME. Gene sets representing chromosomal gains or
losses include all genes within affected regions (as described in **Fig. 1l** and **Table S5**). See
Table S9 for descriptions and sources of featured gene sets.

Figure S2 | Linear modeling of gene expression using clonal frequencies reveals concordant gene-set enrichments with coexpression modules (case 1).

a-d) Left: snapshots of additional gene coexpression modules enriched for markers of nonmalignant cell types (expression patterns for the top 12 genes ranked by k_{ME} are shown). Right: heatmaps of gene set enrichment results for each module. Modules included genes that were most specifically and significantly correlated (after FDR correction) to the module eigengene (ME), and enrichment was assessed with a one-sided Fisher's exact test (followed by FDR correction; see panel **i** for legend). **e)** Correlation heatmap for the cumulative frequency vectors of identified clones. **f-g)** Lasso regression[104] was used to model the expression of all genes (n = 20,018) as a function of clonal frequencies over all tumor sections (n = 69). Violin plots illustrate the distributions of t-values for all models where the indicated clone was the only explanatory variable that survived lasso selection. Permutations were performed by randomly scrambling clonal frequencies (n = 100) prior to lasso regression. Real and permuted clonal frequency vectors were bootstrapped (n = 100) to address collinearity. P-values denote the significance of the Anderson-Darling test, which evaluates whether two distributions are likely to be derived from the same distribution. **f)** Results of a standard lasso model. **g)** Results of a group lasso model where the truncal clone (equivalent to tumor purity) was placed in a separate group due to its strong effect on gene expression (**Fig. 3c**); note the general improvement in Anderson-Darling test P-values. **h)** Density plot showing the number of times (out of 100 bootstraps) that the same explanatory (clonal frequency vector) variable was retained by the group lasso regression model, or 'stability'. Only group lasso models where retained explanatory variables included the truncal clone and up to one other clone were considered. The vertical line demarcates the point to the right of which only 5% of values belong to the permuted distribution, i.e. a 5% FDR rate. **i)** Enrichment analysis (one-sided Fisher's exact test) of genes that were significantly (FDR < .05) and stably (FDR < .05) associated with each clone. Gene sets are described in **Table S9**. Heatmap depicts -log10 FDR-corrected p-values (q-values; shared legend for **a-d**) after comparing each gene set to all genes with stability > 73 for a given clone (one-sided Fisher's exact test). Positive values represent enrichments for genes with significant positive correlations to the ME (**a-d**) or significant positive modeling coefficients (**i**), while negative values represent enrichments for genes with significant negative correlations to the ME (**a-d**) or significant negative modeling coefficients (**i**).

Figure S3 | Differential coexpression analysis of glioma and normal human brain preserves gene coexpression modules associated with malignant clones (case 1).

a) Genome-wide gene coexpression relationships were calculated for each of the five tissue specimens (one astrocytoma and four normal brain controls) over all tissue sections, resulting in five correlation matrices with the same dimensions. Unbiased differential coexpression analysis was performed as illustrated. ACC = anterior cingulate cortex; EC = entorhinal cortex. **b-e)** Left: differentially coexpressed module eigengenes (ME) with the strongest correlations to clonal abundance (defined cumulatively). Locally weighted smoothing (LOESS) lines are shown; correlation is based on data points. Right: enrichment analysis of differentially coexpressed module genes using published gene sets. FDR-corrected p-values (q-values) from one-sided Fisher's exact tests are shown. Positive values represent enrichments of genes that were significantly positively correlated to the ME, while negative values represent enrichments of genes that were significantly negatively correlated to the ME. Gene sets representing chromosomal gains or losses include all genes within affected regions (as described in **Fig. 1l** and **Table S5**). See **Table S9** for descriptions and sources of featured gene sets.

Figure 4 | Multiomic analysis of serial tumor sections reveals the clonal composition of a recurrent grade 2 IDH-mutant astrocytoma (case 2).

Axial T2 **(a)** and axial FLAIR **(b)** images demonstrate a non-enhancing, expansile, infiltrating glioma centered in the right insula and involving the basal ganglia, inferior frontal lobe, and temporal lobe. Cystic degeneration was present in the tumor. **c)** Image of the frozen tumor specimen prior to cryosectioning and nucleic acid isolation. **d)** The tumor was determined to harbor the IDH1 R132H mutation based on immunostaining with an antibody specific to the mutant protein. **e)** TP53 immunostaining demonstrated nuclear expression with an estimated staining index of 20%. All histological images were captured at 400x. Scale bars denote 50 μm. **f)** Schematic of serial sectioning strategy and section usage plan. **g)** Hierarchical clustering of mutations, using 1 – Pearson correlation of amp-seq VAFs over all tumor sections (n = 85) as a distance measure, reveals five clusters. **h-l)** VAF patterns comprising cluster 1 **(h)**, cluster 2 **(i)**, cluster 3 **(j)**, cluster 4 **(k)**, and cluster 5 **(l)**. **m)** Controlling for gene dosage reveals discordance of IDH1 R132H VAF with respect to truncal *ATRX* and *TP53* mutations, which is explained by a subclonal deletion of chromosome 2q (including *IDH1*) that occurred after the *IDH1* point mutation. **(n)** Heatmap of the chromosome 2q deletion event frequency (as determined by FACETS[34]), with LOESS fit line (black) and smoothed 95% confidence interval (gray envelope). **o)** Clone phylogeny (with arbitrary branch lengths) derived from integrated analysis of SNVs (from amp-seq data) and CNVs (from RNA-seq data). Percentages represent the average abundance of each cellular fraction over all analyzed sections (n = 85). **p)** Estimated cellular fractions for all clones and nonmalignant cells over all sections. Black vertical line denotes orthogonal sample rotation.

a Effect on IDH1 VAF between full and downsampled coverage

1000 resamples per coverage

b Effect on TP53 VAF between full and downsampled coverage

1000 resamples per coverage

d Concordance of exome and RNA−seq CNV calls

N=4 sections, Pearson's r=0.97

e Concordance of amp−seq and RNA−seq chr2q deletion calls

N=85 sections, Pearson's r=0.98

f Section 29

Section 113/115

Figure S4 | Mutation validation (case 2).
a-b) Downsampling of amp-seq reads for IDH1 R132H (**a**) and TP53 G245V (**b**) was performed in each tumor section to achieve desired coverage levels (x-axis). For each downsampling (n = 1,000), the root mean square-error (RMSE; top) and Pearson's correlation (bottom) was calculated with respect to the true VAF (calculated using all reads) over all sections (n = 85). **c)** Nonsynonymous mutations were identified by exome sequencing of tumor sections 22, 46, 85, 123, and the patient's blood. Green track: variant allele frequencies (VAF) for each mutation in each section. Black track: mutations validation by amp-seq. Blue track: gene mutation frequencies in TCGA astrocytomas (n = 286). Red track: genome-wide mean expression percentiles over all sections (n = 90). **d)** Concordant estimates of CNV frequencies in the same tumor sections (n = 4) were obtained using FACETS[34] and CNVkit[44] to analyze exome and RNA-seq data, respectively. **e)** Concordant estimates of chromosome 2q deletion frequencies in the same tumor sections (n = 85) were obtained using amp-seq (**Fig. 4m**) and RNA-seq, which was analyzed by CNVkit. **f)** Clone phylogeny (with arbitrary branch lengths) derived from single-nucleus amp-seq (snAmp-seq) of mutations affecting the *IDH1* and *TP53* loci for section 29 (n = 4,433 nuclei) and sections 113/115 (n = 3,736 nuclei). Clone names are derived from **Fig. 4o**, and the percentages of nuclei assigned to each clone are shown.

a Clustering of gene coexpression modules (case 2)

b Module eigengenes (ME)

c Number of genes

d Clone 1 is correlated with red ME

ME vs. clonal abundance
Pearson correlation: 0.65 (p = 2.1e−11)

Genes most highly correlated to ME

Enrichment of module genes

e Clone 2 is correlated with violet ME

ME vs. clonal abundance
Pearson correlation: 0.82 (p = 3.4e−22)

Genes most highly correlated to ME

Enrichment of module genes

f Clone 3 is correlated with black ME

ME vs. clonal abundance
Pearson correlation: 0.8 (p = 2.6e−20)

Genes most highly correlated to ME

Enrichment of module genes

g Clone 4 is correlated with ivory ME

ME vs. clonal abundance
Pearson correlation: 0.86 (p = 1.6e−25)

Genes most highly correlated to ME

Enrichment of module genes

Figure 5 | Gene coexpression modules are highly correlated with clonal abundance (case
2).
a) Hierarchical clustering of gene coexpression modules over all tumor sections (n = 90). **b)**
Module eigengenes (ME) illustrate the relative expression levels of genes in each module over
all tumor sections. **c)** The number of genes that formed each ME. **d-g)** Top left: MEs with the
strongest correlations to clonal abundance (defined cumulatively). Locally weighted smoothing
(LOESS) lines are shown; correlation is based on data points. Bottom left: the 12 genes with the
highest correlations to the ME (k_{ME}). Right: enrichment analysis of gene coexpression modules
using published gene sets. FDR-corrected p-values (q-values) from one-sided Fisher's exact
tests are shown. Positive values represent enrichments of genes that were significantly
positively correlated to the ME, while negative values represent enrichments of genes that were
significantly negatively correlated to the ME. Gene sets representing chromosomal gains or
losses include all genes within affected regions (as described in **Fig. 4** and **Table S19**). See
Table S9 for descriptions and sources of featured gene sets.

a
Purple module snapshot

b
Tan module snapshot

c
Yellow module snapshot

d
Green module snapshot

e
Cumulative clonal abundance correlations

f
T-values of lasso model

g
T-values of group lasso model

h
Real and permuted stability metrics
95th percentile cutoff of permuted is 45

i
Enrichments of LASSO model

Figure S5 | Linear modeling of gene expression using clonal frequencies reveals concordant gene-set enrichments with coexpression modules (case 2).
a-d) Left: snapshots of additional gene coexpression modules enriched for markers of nonmalignant cell types (expression patterns for the top 12 genes ranked by k_{ME} are shown). Right: heatmaps of gene set enrichment results for each module. Modules included genes that were most specifically and significantly correlated (after FDR correction) to the module eigengene (ME), and enrichment was assessed with a one-sided Fisher's exact test (followed by FDR correction; see panel **i** for legend). **e)** Correlation heatmap for the cumulative frequency vectors of identified clones. **f-g)** Lasso regression[104] was used to model the expression of all genes (n = 20,246) as a function of clonal frequencies over all tumor sections (n = 85). Violin plots illustrate the distributions of t-values for all models where the indicated clone was the only explanatory variable that survived lasso selection. Permutations were performed by randomly scrambling clonal frequencies (n = 100) prior to lasso regression. Real and permuted clonal frequency vectors were bootstrapped (n = 100) to address collinearity. P-values denote the significance of the Anderson-Darling test, which evaluates whether two distributions are likely to be derived from the same distribution. **f)** Results of a standard lasso model. **g)** Results of a group lasso model where the truncal clone (equivalent to tumor purity) was placed in a separate group. Unlike case 1, the group lasso model did not outperform the standard lasso model. **h)** Density plot showing the number of times (out of 100 bootstraps) that the same explanatory (clonal frequency vector) was retained by the standard lasso regression model, or 'stability'. The vertical line demarcates the point to the right of which only 5% of values belong to the permuted distribution, i.e. a 5% FDR rate. **i)** Heatmap of FDR-corrected p-values (q-values; shared legend for panels **a-d**) after comparing each gene set to all genes with stability > 45 for a given clone (one-sided Fisher's exact test). Positive values represent enrichments of genes with significant positive correlations to the ME (**a-d**) or significant positive modeling coefficients (**i**), while negative values represent enrichments of genes with significant negative correlations to the ME (**a-d**) or significant negative modeling coefficients (**i**).

Figure 6 | Single-nucleus analysis supports and refines inferences from bulk data.
a) Heatmap of P-values (one-sided Wilcoxon rank-sum test) comparing differential expression t-
values for genes comprising each bulk coexpression module (colors, x-axis) to all other genes in
each SN cluster versus all other clusters. **b)** UMAP plot of all nuclei (n = 809) with
characterizations of clusters from (**a**) superimposed. **c)** UMAP plot of malignant nuclei (n = 360),
with results of Slingshot trajectory analysis[50] superimposed. **d)** Heatmap of scaled $\log_2$
expression vectors for the five most upregulated genes in each snRNA-seq cluster vs. all other
clusters (one-sided Wilcoxon rank-sum test). Far left: malignancy vector determined by snAmp-
seq of cDNA spanning mutations in the truncal clone. Left: malignancy vectors inferred from
CNV analysis of snRNA-seq data using the CopyKat[48], InferCNV[23], or CaSpER[49] algorithms
(blue = nonmalignant; all other colors = malignant). Right: bar plots depict the total number of
unique reads (UMIs) for each nucleus and the average number of UMIs for genes comprising
the Gene Ontology category 'mitotic chromosome condensation' (GO: 0030261). Red vertical
line: max expression of mitotic genes in neurons, which presumably represents background
noise.

**Overlapping gene expression signatures in bulk coexpression
modules and single-nucleus clusters**

**Figure S6 | Bulk coexpression module genes map definitively onto single-nucleus
clusters.**
a-j) Modules of coexpressed genes from bulk tumor sections (n = 90) that were most strongly
associated with specific clones (**Fig. 5**) or nonmalignant cell classes (**Fig. S5**) were evaluated
for differential expression in each snRNA-seq cluster vs. all other clusters (white distributions: t-
test results for all module genes). Genes that were not associated with each module were
evaluated in the same fashion (black distributions), and a one-sided Wilcoxon rank-sum test
was used to determine whether module genes were significantly upregulated in a given snRNA-
seq cluster relative to all other genes (*** = P < 1e-10).

Figure S7 | Single-nucleus analysis supports and refines inferences from bulk data.
a) UMAP plot of snRNA-seq data (n = 809 nuclei) with the tumor section IDs that served as the source for each nucleus superimposed. **b)** UMAP plot of snRNA-seq data with malignancy superimposed. Malignancy was determined by genotyping all nuclei via single-nucleus amplicon sequencing (snAmp-seq) of cDNA spanning mutations in the truncal clone. **c)** Frequencies of malignant clones in snRNA-seq data (n = 360 nuclei from four tumor sections) and bulk data (n = 16 tumor sections), with correlations in legend. **d)** Relative abundance of nonmalignant cell types in snRNA-seq data (n = 449 nuclei from four tumor sections) and bulk data (n = 16 tumor sections), with correlations in legend. Estimates were scaled and centered for comparability. Bulk estimates for (**c-d**) are derived from clonal abundance and module eigengene values featured in **Fig. 4p** and **Fig. S5a-d**, respectively, averaged across the four sections flanking each section analyzed by snRNA-seq (snRNA-seq section 17: bulk sections 14, 16, 18, 19; snRNA-seq section 53: bulk sections 50, 51, 54, 55; snRNA-seq section 93: bulk sections 91, 92, 94, 95; snRNA-seq section 117: bulk sections 114, 116, 118, 119). **e)** Log-ratio output of the CopyKat CNV algorithm[48]. Left: snAmp-seq malignancy assignments and snRNA-seq cluster assignments. Right: sum of the absolute value of CopyKat CNV calls (chromosomal arms in gray could not be called due to inadequate gene coverage).

Figure S8 | Gene set enrichment analysis supports the functional distinctness of snRNA-seq clusters.
Clustered heatmap of FDR-corrected p-values (q-values) from one-sided Fisher's exact tests comparing featured gene sets with genes that were significantly upregulated (FDR < .05) in each snRNA-seq cluster vs. all other clusters by the one-sided Wilcoxon rank-sum test.

Concordance of k_{ME} and differential expression t-values

Single−nucleus DE (t−value percentile)

Figure S9 | Concordance of k_{ME} and differential expression t-values from bulk and single-
nucleus experiments.
a-j) Differential expression (DE) t-values (calculated by t-test for all genes between each
snRNA-seq cluster and all other clusters) largely predict the extent to which gene expression
patterns are correlated (k_{ME} values) to the bulk coexpression modules most strongly associated
with each clone or nonmalignant cell type.

a Correlation to clone 1 in both cases

r = 0.45, P < 1E−300

Correlation in case two
Correlation in case one

b Enrichments of highly correlated genes

Verhaak: classical subtype
Ashkan: radial glia
Engler: inflitrating monocytes (astro)
Fietz: ECM genes
G2C: synaposome
ABA: neurons
Stanford: cerebral cortex
G2C: clathrin−coated vesicles

−Log10 q−value

c STRING PPI of highly correlated genes

201 proteins, 586 interactions (P < 2E−16)

PHC1 RING1 NXF1 NUP85 SNRPA SNRNP70 SNRPG BCL6 CD72 CETN2 XPC POLG2 ATM COL4A5 COL1A1 VCAM1 SOX2 SOX9 RBBP8 CD44 CTNNB1 SOX6 WNT5A NDC80 WNT3 GATA1 RFC4 CENPA MYC CDK2 RAD9A CDKN2A

d Enrichments of STRING PPI clusters

Reactome: signaling by WNT
PID: MYC pathway
GOBP: mononuclear cell differentiation
GOBP: regulation of immune response
GOBP: RNA splicing
GOBP: RNA processing
Kauffmann: DNA repair
GOBP: response to DNA damage
Reactome: transport of mRNA to cytplasm
GOCC: nuclear pore
GOCC: nuclear ubiquitin ligase
GOCC: PRC1 complex
GOCC: nuclear kinetichore
GOCC: centromeric region
Reactome: activation of ATR
Reactome: G2/M checkpoints

−Log10 q−value

g

AKR1C3 is up-regulated in IDH1 R132H+ malignant cells

e Tumor — AKR1C3

f Normal brain — AKR1C3

g IDH1 R132H

h AKR1C3

i IDH1 R132H/AKR1C3/DAPI

Case 1

Figure 7 | Integrating correlations to malignant cell abundance reveals core transcriptional features of astrocytomas.

a) Gene expression correlations (n = 15,288 genes) to malignant cell abundance in case 1 and case 2. Red and blue denote significantly correlated genes that were used for enrichment analysis **(b)**, and the star denotes *AKR1C3*. **b)** -Log$_{10}$ FDR-corrected p-values (q-values) from one-sided Fisher's exact tests analyzing gene set enrichment in red and blue genes from **(a)**. **c)** Validated protein-protein interactions (PPI) from STRINGdb[52] for red genes from **(a)**. The 201 proteins shown formed networks of five or more proteins, with the number of interactions equal to the number of edges. **d)** -Log$_{10}$ FDR-corrected p-values (q-values) from one-sided Fisher's exact tests analyzing gene set enrichment for each STRINGdb interaction cluster in **(c)**. **e-f)** AKR1C3 immunostaining in FFPE tissue adjacent to the sectioned region of case 1 **(e)** and non-neoplastic human brain **(f)**. Image: 200x; scale bar: 50 µm. **g-i)** Immunofluorescent co-staining of IDH1 R132H (white), AKR1C3 (green), and nuclei (blue [DAPI]) in case one demonstrating expression of AKR1C3 in malignant cells carrying the truncal IDH1 R132H mutation. Scale bar denotes 50µm.

Supplementary Figure and Table Legends

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Author Contributions

M.C.O. conceived the approach. P.G.S. and S.J.S. reduced the approach to practice, generated all datasets, and performed most experiments and analyses. M.C.O., P.G.S., and S.J.S. wrote the manuscript. D.J.B. provided laboratory management, experimental assistance, and figure preparation. R.E. helped analyze amp-seq data. B.E.J., T.M., K.W.K, and J.F.C. analyzed WES data for case 1. D.A.L., M.B.P., and M.W.M. assisted with case selection and tumor sample acquisition. E.J.H. provided neuropathological guidance and obtained suitable control samples. M.S.B. and R.O.P. helped obtain funding and provided conceptual guidance. J.J.P. provided neuropathological guidance for both cases and performed immunohistochemistry. All authors discussed results and aided in manuscript preparation.

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