TCM-CMap: A Novel Computational Methodology to Link Gene Perturbation to Therapeutic Targets in Complex TCM Prescriptions

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Abstract

Traditional Chinese medicine (TCM) is a valuable drug discovery resource known for its therapeutic effects. However, the mechanisms of action (MOAs) of TCM prescriptions are often unknown due to limited target information and the complexity of multiple ingredients and targets. This study introduces TCM-CMap (Connecting Map from Gene Perturbation to Therapeutical Targets for TCM), a framework designed to prioritize active ingredients and targets within TCM prescriptions by integrating transcriptomics-based gene perturbation data with a random walk algorithm. This methodology bridges the gap between gene perturbation in TCM prescriptions and their therapeutic target. Using the Suhuang antitussive capsule (Suhuang) for treating cough variant asthma (CVA) as a case study, we identify and experimentally verify that quercetin and luteolin directly interact with *Il17a*, *Pik3cb*, *Pik3cd*, *Akt1*, and *Tnf*. These interactions inhibit the IL-17 signaling pathway and inactivate *PI3K*, *Akt*, and *NF-κB*, preventing lung inflammation and treating CVA. Our findings demonstrate the potential of the TCM-CMap methodology to provide insights into the molecular MOAs of TCM prescriptions, advancing TCM drug discovery.

Keyword: TCM prescriptions; MOAs; Gene perturbation; Random walk algorithm

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Abstract

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1. Introduction

Traditional Chinese medicine (TCM) has been extensively used in China and other countries, presenting exclusive advantages in drug discovery as significant resources. TCM prescriptions adopt the strategy of multiple ingredients, targets, and pathways to achieve optimal therapeutic effects [1]. However, besides complex ingredients, there could also be many drug-drug interactions in one TCM prescription, making it challenging to clarify the molecular MOAs of TCM prescriptions *via* wet experiments or human experience.

With the development of computational methods, various cutting-edge techniques have been applied to discover the MOAs of TCM, such as molecular docking, machine learning methods [2,3], and network-based methods [4,5]. In particular, network-based methods can extract internal relations according to network topological characteristics, thus revealing hidden relationships, such as drug-disease associations and drug-drug interactions [6]. The premise behind network-based methods is the observation that genes with similar phenotypes and related functions are located close to each other in the protein-protein interaction (PPI) network. However, in these traditional strategies for network analysis in TCM, the interactions between two ingredients and two herbs are usually ignored [7]. Recently, Cheng et al. proposed a novel methodology for analyzing drug combinations and drug-disease associations by calculating the overall network distance between the subnetwork of their targets in PPI [8]. We applied the network distance model to identify herb pairs and quantify their interactions and showed that the network distance algorithm can better capture the biological interactions between herb ingredients [9].

As we know, one drug could create effects by binding to certain therapeutical targets and thus causing downstream cascade reactions. Despite the advantages of network methods in TCM, the lack of reliable target information on ingredients is one of the most challenging problems[10]. Due to the development of high-throughput sequencing and system biology, multi-omics data are often integrated

into computational target predicting methods, such as molecular docking [11],

machine learning methods [12], and network-based methods [13], to improve

prediction accuracy [14], especially the network perturbation method. For example,

the random walk algorithm can be used to prioritize the critical drug targets of the

compound based on the topological characteristics of the horizontal disturbance

of the gene transcriptome among the PPI network [15]. Xiao et al., for instance, used

differentially expressed genes to establish the weighted gene co-expression

network to obtain the hub genes[16]. Another network perturbation called local

radiality was developed to prioritize the targets by integrating topological data

and the perturbed gene information [17]. However, as the application domain of

these methods was designed to determine drug-drug or drug-disease associations,

they have rarely been applied to analyze the complex systems of TCM

prescriptions. Nevertheless, multiomic integration methods have achieved

considerable success in the study of TCM[18], for instance, interpreting TCM

syndrome classifications by integrating proteomic and metabolomic data[19],

exploring the therapeutic effects of bioactivity ingredients in herbs by integrating

lipidomic and transcriptomic data[20], and identifying diagnostic markers of TCM

herb based on network pharmacological analysis of TCM metabolomic data[21].

These exciting findings show the potential of integrating multi-omic data to

explore the MOAs of TCM prescriptions.

Cough variant asthma (CVA) is a type of asthma with bronchial hyperreactive

eosinophilic airway inflammation and airway remodeling. Severe and frequent

coughs will damage the respiratory tract and aggravate respiratory infection,

which has affected patients' quality of life and caused a considerable burden to

society [22,23]. CVA has the features of paroxysmal, spasmodic, and repetitive coughs,

which corresponds to the "wind cough" syndrome in TCM theory. The Suhuang

antitussive capsule (Suhuang) is one of the TCM prescriptions used to treat the

"wind cough" syndrome. Suhuang, which consists of nine herbs, *Ephedrae Herba*

(MAHUANG), *Perillae Folium* (ZISUYE), *Pheretima* (DILONG), *Cicadae Periostracum*

(CHANTUI), *Arctii Fructus* (NIUBANGZI), *Schisandrae Chinensis Fructus*

(WUWEIZI), *Peucedani Radix* (QIANHU), *Eriobotryae Folium* (PIPAYE), and *Perillae*

Fructus (ZISUZI), is mainly used to treat cough, throat itching, and other diseases caused by "wind evil invading lung", especially for CVA and post-infectious cough (PIC). Although Suhuang has significant clinical therapeutic effects, its mechanisms of action remain unclear. Our laboratory has made progress in previous studies on the MOAs of Suhuang for CVA [19,24-26]. However, despite this progress, the main active ingredients, their specific therapeutic targets, and the MOAs have still not been systematically clarified. Therefore, more comprehensive research is needed to explain the efficacy of Suhuang for treating CVA.

In this study, we have introduced a novel network perturbation method known as TCM-CMap. This approach is designed to effectively identify therapeutic targets and bioactive ingredients within Traditional Chinese Medicine (TCM) prescriptions. TCM-CMap achieves this by integrating transcriptional gene perturbation data with Protein-Protein Interaction (PPI) networks. The schematic representation of our study can be observed in Fig. 1 and Fig. S1, with the following key steps: Initially, we extracted three crucial types of network graphs from publicly available databases, including the TCM-ingredient-target, disease-gene associations, and PPI networks. Subsequently, we employed a random walk algorithm within the PPI network to enhance transcriptional changes. This process assigned scores to each target. A higher perturbation score indicates a significant proximity of the target to the perturbed genes. We also further conducted molecular docking simulations and wet experiments to validate our prioritized targets and their corresponding ingredients. We firmly believe that the TCM-CMap methodology introduced in our study will provide invaluable insights into unraveling the MOAs underlying complex TCM prescriptions by connecting the gene perturbation of TCM prescription to its key therapeutical targets.

In this study, we have introduced an innovative network perturbation method, TCM-CMap. This method is specifically crafted to adeptly identify therapeutic targets and bioactive ingredients within Traditional Chinese Medicine (TCM) prescriptions. TCM-CMap accomplishes this task by seamlessly integrating transcriptional gene perturbation data with Protein-Protein Interaction (PPI)

networks. The schematic overview of our study is presented in Fig. 1 and Fig. S1, illustrating the following pivotal steps: Initially, we extracted three essential types of network graphs from publicly accessible databases, encompassing the TCM-ingredient-target network, disease-gene associations network, and PPI networks；subsequently, we applied a random walk algorithm within the PPI network to amplify transcriptional changes. This procedure assigned scores to each target, with a higher perturbation score signifying a more significant proximity of the target to the perturbed genes; to further validate our prioritized targets and their corresponding ingredients, we use Suhuang for CVA as a case study to identify key target and active ingredients. These findings were verified by both molecular docking simulations and wet experiments, suggesting this approach effectively connects the gene perturbation of TCM prescriptions to their crucial therapeutic targets, thereby enhancing our understanding of their therapeutic efficacy. We strongly believe that the TCM-CMap methodology introduced in our study will provide invaluable insights into unraveling the Mechanisms of Action (MOAs) that underlie complex TCM prescriptions.

2. Materials and methods

2.1 Data collection

The relevant ingredients were collected from six TCM databases, including the Encyclopedia of Traditional Chinese Medicine (ETCM) [27], the Traditional Chinese Medicine Systems Pharmacology (TCMSP) [28], the Traditional Chinese Medicine Integrated Database (TCMID) [29], the Traditional Chinese Medicine on Immuno-Oncology (TCMIO) database [30], the Traditional Chinese Medicine Information Database (TCM-ID) [31] and Medical Subject Headings (MESH). Only compounds that could be found in the PubChem database [32] were kept for further study. Ingredient-target relationships from the STITCH database [33] and combined scores > 700 were kept for further study. Subsequently, the properties of components were calculated by ADME-lab [34]. Disease-related vital targets were also collected. For example, CVA, or "cough variant asthma," was utilized as a keyword to collect CVA-

related genes from the literature. Unlike associated genes from GeneCards [35],

OMIM [36], and DisGeNET [37], only those reported as target genes were kept for

further study.

The RNA-seq of a TCM prescription can be collected from GEO or manually

prepared by experiments. The differentially expressed genes (DEGs) analysis was

performed by Deseq2 package in R for further network perturbation calculation.

2.2 DEG-weighted PPI network construction

Protein-protein interactions (PPIs) were extracted from the STRING database [38].

The obtained targets were standardized to Entreze ID by the MyGene package in

Python.

First, the binary network was constructed by PPIs with matrix A_{N*N} with N genes;

$A_{i,j}$ is the connection between gene i and gene j with $A_{i,j} = 1$ if i and j are connected

else 0.

We obtained the log2 foldchange value of all the genes as a vector $F = (f_1, f_2, ...f_N)$

with f_i as the log2 foldchange value of a specific gene i. The DEG-weighted PPI

network (as matrix B) can be established by taking the |log2 foldchange| value of

genes as the weight of nodes and the average weight of two nodes as the weight of

edges.

2.3 Proximity-weighted PPI network construction

Functionally closely related targets tend to be closer to each other in the PPI

network, and the shortest path in the network can be used to quantify the

interactions of two targets in the DEG-weighted PPI network.

A proximity-weighted PPI network was constructed to quantify the interactions

between targets of TCM prescriptions, disease genes, and DEGs. The proximity

network for DEGs and disease genes can be defined as matrix $C_{M \times K}$. M is the set of

DEGs, and K is the set of the targets of TCM prescriptions. We define the distance

between any node DEG i in M and node j in K as C_{ij}:

$$C_{ij} = wsp(i,j) \tag{1}$$

where wsp is the Shortest_path function and it is calculated by the NetworkX
package in Python. The pairwise weighted shortest path is calculated as a
proximity-weighted PPI network.

Next, we construct our DEG-target association network from matrix $C_{M \times K}$ via Z
score transformation according to the distance value. Z-scored C_{ij} is calculated for
each value in C, and the *p*-value is expressed as Z:

$$\overline{C} = \frac{\sum_{i \in M} \sum_{j \in K}(c_{ij})}{\|M\|\|K\|} \tag{2}$$

$$Z - Score(C_{ij}) = \frac{c_{ij} - \overline{c}}{Standard} Deviation\ (C) \tag{3}$$

218 Only target-target pairs with *p*-value < 0.025 were kept connected, and the final
219 transformed proximity-weighted PPI network is defined as D.

$$D_{ij} = C_{ij}, if\ p\ value < 0.025\ else\ D_{ij} = 0 \tag{4}$$

2.4 Prioritization of the CVA treatment genes using the local radiality network
perturbation method

The union potential targets from multiple ingredients were collected in the TCM
prescriptions study. The hypothesis was that the critical targets of active
ingredients would activate downstream pathways in a cascade, thus regulating the
neighbor targets in the PPI network. On the other hand, the therapeutic disease-
related genes would also be significantly regulated by the TCM prescription. They
would thus be closely related to the DEGs in the PPI network.

Radiality is a well-known centrality measure describing the level of node
reachability of a node via different shortest paths of the network. It was
acknowledged that deregulated genes were closer to known targets than most
proteins in the network. Based on this hypothesis, local radiality (LR) (Isik et al.,
2015) was applied to prioritize the critical disease-associated genes by combining

perturbed genes and functional interaction network information. The LR score of

node *i* in the network D is calculated as follows:

$$LR(i) = \frac{\sum_{dg \in DG} |sp(i, dg, G)|}{|DG|}$$ (5)

Here, the function |sp| calculates the weighted shortest path that connects the

gene dg and the node n in D; |DG| indicates the total number of connected genes.

The LR utilizes drug perturbation data (i.e., connected genes) and topological

information (i.e., shortest path distance). Thus, it implements the hypothesis

about the proximity of DEGs, targets, and disease genes. In our study, LR (n)

represents the critical score of disease genes for causing gene perturbation of TCM

prescription/TCM medicine.

2.5 Prioritization of the active ingredients and action targets using the random walk

method

It was reported that a drug's targets and DEGs were typically closely connected in

PPI within three steps [39]. Here, network perturbation methods are applied to infer

the critical targets by aggravating the gene perturbation of all neighborhood DEGs

to determine the active ingredients acting on these crucial targets and pathways.

We used a random walk with restart (RWR) algorithm called heat diffusion to

screen an essential target query that interacted with DEGs closely. The RWR

network perturbation algorithm is described as follows: Diffusion applies heat to

each target as the heat source in the target-DEG network, and the heat flows

through connecting edges to adjacent targets or DEGs. It then produces a list of

targets ranked by the heat they accumulated. A target with many connections will

have a higher rank, and an isolated target will tend to have a low rank, which has

screened the key targets. The specific calculation formula is the following:

$$d = h * \exp(-Lt)$$ (6)

$$L = D - A$$ (7)

Where "h" is a vector representing the original query or signal. "d" is another

vector, which is the result of the diffusion process. The degree matrix D is a diagonal matrix where each diagonal element corresponds to the degree (number of connections) of a node in the graph. The adjacency matrix A encodes the connectivity between nodes. It represents how the original signal has spread or diffused over the network. L is the Laplacian matrix of the network graph and is defined as the difference between the degree matrix (D) and the graph's adjacency matrix (A). The expression "exp(*)" is the matrix exponential . "t" is a scalar parameter representing the total time of diffusion. It controls how far and quickly the original signal spreads over the network. A larger value of t will allow the signal to spread further, while a smaller value will limit its spread. Here, we conduct a diffusion process on a graph target-DEG network, where "h" represents the transcript gene perturbation values of nodes, and the Laplacian matrix is used to model the diffusion behavior. The parameter 't' controls the extent and speed of the diffusion. The result of this process is the vector 'd,' which represents the gene perturbation score of targets and DEGs after diffusion. We use a default value of t = 0.1 [40].

2.6 Case study: Identifying the active ingredients and MOAs of Suhuang for CVA

Male Wistar rats were intraperitoneally injected with ovalbumin (OVA) to establish the CVA rat model [26]. The rats from the experimental group were intragastrically administrated 7 g/kg of Suhuang crude drug for two weeks. Subsequently, the rats were sacrificed by euthanasia. The lungs from the control, CVA, and CVA+Suhuang groups were collected and subjected to transcriptome sequencing.

The Deseq2 package in R. Gene obtained the differentially expressed genes (DEGs) analysis set enrichment analysis (GSEA) based on Go Ontology (GO) and Kyoto Encyclopedia of Genes and Genomes (KEGG) datasets to understand these DEGs' biological functions and related pathways. RcisTarget transcription factor (TF) analysis was conducted to find the critical genes to determine the key DEGs' specific regulated mechanisms. Moreover, the Connectivity Map (CMap) was

adopted to excavate the functional connections between CVA and the genetic perturbation of Suhuang [41]. In order to study whether the gene expression of DEGs in different tissues is consistent with the meridian classifications of Suhuang in TCM theory, the gene expression of DEGs at the transcription level was extracted from the Human Protein Atlas databases. More detail about the CVA model and average RNA data analysis for Suhuang can be seen in **Supplementary Note 1**. Finally, the TCM-CMap method was used to prioritize Suhuang's crucial genes and targets for CVA.

2.7 Verifying the critical targets and active ingredients

Verification of targets and pathways: RAW264.7 cells were plated in 6-well plates at a density of 2×10^6 cells and pretreated with different concentrations of Suhuang (0.1 μg/ml, 0.2 μg/ml, 0.4 μg/ml), and then stimulated with 1 μg/ml LPS for six h. Total RNA was isolated from cells using Trizol reagent (Takara, Otsu, Japan) according to the manufacturer's protocol. RNAs were reverse transcribed to cDNAs for quantitative PCR. The primer sequences were as follows:

Table 1. Sequences of the primers used for real-time PCR.

Primer name	Forward primer sequences	Reverse primer sequences
Mouse IL-17A	CTGATGCTGTTGCTGCTGCTG	ACACGCTGAGCTTTGAGGGATG

Validation of active ingredient and target interaction: We used AutoDock Vina for molecular docking [42]. According to the scores of MCODE [43], the core targets of Suhuang for treating CVA were selected. Then, their crystal structures were downloaded from the RCSB Protein Data Bank (PDB) [44]. Next, these crystal structures were modified by PyMol to remove the original ligands and water molecules and then saved in the PDBQT format. The three-dimensional structures of related compounds were downloaded from PubChem. Then, the bond energy of the compound ligand molecules was processed via Chem3D 15.0 to reduce intermolecular repulsion and saved in the PDB format. Finally, the three-

dimensional crystal structures of target proteins and corresponding compound ligands were introduced into AutoDock Vina.

Verification of active ingredients: RAW264.7 cells were plated in 96-well plates at a density of 1×10^4 cells. RAW264.7 cells were treated with LPS (1 μg/mL) and different concentrations of luteolin, quercetin, and Dexamethasone (2.5, 5, 10, 20, 40, 80 μM). Then, the cells were incubated for 24 h, and the content of NO in cell culture supernatant was determined by using the Griess reaction. The NO inhibition rate of different drugs was calculated according to the following formula:

$$Inhibitory\ ratio(\%) = \frac{C_{drug} - C_{blank}}{C_{LPS} - C_{blank}} \times 100$$

where C_{blank} is the content of NO in unprocessed cell culture, C_{LPS} is the content of NO in LPS-induced cell culture, and C_{drug} is the content of NO in cell culture treated with LPS and different concentrations of drugs. The IC_{50} values for luteolin, quercetin, and Dexamethasone were determined on three replicates of 6 concentrations. Statistical analysis and the IC_{50} values were calculated using GraphPad Prism version 8.0.2 software from GraphPad Software Incorporated.

3. Results

3.1 Data statistics on the herb-ingredient-target network of Suhuang

In total, 1,377 ingredients were collected from six TCM databases. The overlapping ingredients among these six databases are shown in Fig. 2A. The number of ingredients varied among different databases, with 849 ingredients from TCMIO, followed by TCMSP, and only 250 ingredients from ETCM. Furthermore, the TCMSP and TCMIO databases shared the most common compounds (n = 406). Primarily, we found only 14 compounds appearing in all six databases, suggesting the necessity of data integration to address the data complexity.

The ingredients in Suhuang are derived from nine herbs, with $N_{MAHUANG}$ = 452, $N_{WUWEIZI}$ = 323, N_{PIPAYE} = 240, N_{QIANHU} = 152, N_{ZISUYE} = 144, N_{ZIZUZI} = 135, $N_{NIUBANGZI}$ = 89, $N_{CHANTUI}$ = 15, and N_{DILONG} = 1(Fig. 2B). MAHUANG shared the most common

components with PIPAYE and WUWEIZI (n = 21 and 21 separately). Except for two animal drugs, DILONG and CHANTUI, the other seven herbs have a high percentage of compounds with good OB and DL ranging from around 80% to 95% (Fig. 2C). As shown in Fig. 2D, 60.6% of ingredients were predicted to bind with less than five targets of the compounds. Only 63 ingredients owned more than ten targets.

3.2 DEG analysis and their tissue distribution

To grasp the gene perturbation of Suhuang for CVA, RNA-seq data were tested in three groups: control, CVA, and Suhuang. Compared to the control group, a total of 589 genes were identified as differentially expressed genes (DEGs, *p*.adjust < 0.05 and |log2 foldchange| > 2) for the CVA group, with 465 upregulated and 124 downregulated (Fig. 3A). Furthermore, a total of 790 genes were identified as DEGs when comparing the Suhuang group to the CVA group, with 300 upregulated and 490 downregulated (Fig. 3B). In total, 338 common DEGs were identified between CVA/Control and Suhuang/CVA (Fig. 3C), suggesting that these abnormal DEGs in the disease condition returned to the normal level after the treatment of Suhuang (Fig. 3D).

Fig. 4A shows the distribution of TCM properties of the nine herbs in Suhuang, including four natures, five flavors, 12 kinds of meridian classifications, and six main efficacies. Regarding the nature of Suhuang, it has warm and cold medicinal characteristics. Regarding the flavors, pungent was the most frequent. In TCM theory, the pungent flavor tended to affect the surface and upper parts of the human body. Furthermore, CVA is a respiratory disease. Accordingly, all herbs in Suhuang were classified to the lung meridian except DILONG. These herbs, especially MAHUANG and CHANTUI, have been reported to have extensive effects, such as refrigeration, analgesia, relieving wheeling, immunological enhancements, immuno-suppression, and hypoglycemia.

Considering that the meridian classifications in the TCM theory might provide a reasonable interpretation of Suhuang's therapeutic effects on CVA, we further

investigated whether the tissue distributions of these DEGs at the transcription level were consistent with the meridian distribution of Suhuang from TCM theory. As shown in Fig. 4B, the lung was one of the top 10 highest averaged expressed tissues, and the top 10 tissues were not significantly different. On the other hand, except for the top 10 genes, the expression of DEGs in normal human lung tissue was significantly higher than the other 53 tissues. Interestingly, the expression of the DEGs in the liver and urinary bladder tissues was the highest, which was consistent with the liver meridian of CHANGTUI and DILONG and the bladder meridian of MAHUANG and DILONG (Fig. 4A). Taken together, we verified that the results of gene perturbation of Suhuang were in line with the meridian classifications in TCM theory and that Suhuang for treating CVA was closely related to the functional regulation in the lung tissue.

3.3 Identifying CVA-related pathways via *pathway enrichment analysis*

Three enrichment analysis methods, GO, KEGG, and GESA, were performed to systematically grasp these DEGs' biological functions. We also utilized the CMap and TF analysis to identify the underlying molecular mechanisms further.

In total, 263 GO-biological processes (GO: BP) terms and 26 KEGG pathways were enriched significantly by GO and KEGG analysis, respectively (*p*.adjust value < 0.05, Table S1-2). We also mapped the DEGs onto GSEA analysis for GO: BP gene sets, and the EnrichmentMap plugin in Cytoscape was utilized to identify the hierarchical relationships of these pathways (Table S3). Consequently, the top enriched GO: BP terms for Suhuang were related to inflammatory cytokines in the immune system, such as response to interleukin-1, response to interferon-gamma, and negative regulation of the immune system process (Fig. 3E-F). Therefore, it appears that Suhuang might relieve CVA by extensively regulating the pathways associated with the immune system. According to KEGG pathway enrichment analysis, half of the top 20 significantly enriched pathways were associated with CVA, such as the Asthma pathway, IL-17 signaling pathway, TNF signaling pathway, and Toll-like receptor signaling pathway (Fig. 5A).

Meanwhile, we mapped the DEGs onto the CMap database to find similar gene

signatures. The top and bottom 10 MOAs, respectively, were illustrated in Fig. 5B.

The MOAs in Suhuang for treating CVA were positively associated with inhibiting

PI3K and negatively associated with activating NF-κB, suggesting that Suhuang

may treat CVA through inhibiting PI3K and NF-κB signaling pathway (Fig. 5B, Fig.

S2).

Interestingly, both KEGG and GSEA showed that the IL-17 signaling pathway was

a significant enrichment pathway in Suhuang for treating CVA (Fig. 5A and C, Table

S4). However, it was studied that the IL-17 signaling pathway was closely related

to Th1 airway inflammation in asthma, while CVA was generally recognized as Th2

airway inflammation [45-47]. Therefore, we inferred that Suhuang may have other

therapeutic effects on Th1 asthma (Fig. 5D). The NF-κB pathway from GSEA and

CMap analysis was also significantly enriched (Fig. 5E and F). In brief, multiple

pathway enrichment methods indicated that Suhuang may regulate these

pathways to treat CVA in model rats.

According to transcription factor (TF) analysis, 86 motifs were significantly

enriched. The result for the top three TFs based on motifs was listed in Fig. 5G.

RELA was an essential member of the NF-κB family, with 29 DEGs enriched in this

related motif. BCL3, with 31 DEGs enriched in this related motif, was highly similar

to the IκB family of NF-κB inhibitors [48,49]. These two TFs participated in many

cellular responses, such as cell proliferation and transformation, apoptosis,

inflammation, and immune response, by binding NF-κB or other TFs and

regulating target genes (Fig. 5H). These results were consistent with our previous

findings about the critical role of the NF-κB signaling pathway in Suhuang for

inhibiting non-resolving inflammation and treating acute lung diseases. Our

previous work found that Suhuang could relieve acute lung injury by inhibiting the

NF-κB signaling pathway [19].

3.4 Prioritization of the therapeutic genes using the local radiality network perturbation method

Generally speaking, the weighted shortest path (S) between DEGs and CVA genes was negatively correlated with the corresponding |log2foldchange|, suggesting that the more significantly the DEGs expressed, the more functionally close it was to CVA genes (Fig. 6A) in PPI. In addition, DEGs could be classified into three clusters by hierarchical clustering analysis according to the weighted shortest path among 54 disease genes. The weighted shortest path between the CVA genes and DEGs from cluster Ⅱ (average |log2 foldchange|$_\text{Ⅱ}$=4.086, average S$_\text{Ⅱ}$ = 1.977) was significantly lower than that of the other two cluster DEGs (average S$_\text{Ⅰ, Ⅲ}$ = 5.025 and 3.172, average |log2 foldchange|$_\text{Ⅰ, Ⅲ}$=2.50,3.10) (Fig. 6B, Fig. 6C), suggesting the importance of the DEGs from cluster Ⅱ. Therefore, further pathway enrichment analysis was performed based on DEGs of cluster Ⅱ. We found that the enriched pathways were similar to those from all the DEGs, suggesting that cluster Ⅱ DEGs could characterize Suhuang perturbation and could be considered as signature genes (Fig. 6D). These results indicated that the weighted proximity network based on DEGs could reveal the vital therapeutic genes of Suhuang for treating CVA.

Then, the LR of network perturbation was leveraged to quantify the importance of disease genes. As shown in Figure 6G, *Tnf* obtained the highest importance score, 0.47, followed by *Tpsb2* (0.48) and *Mmp12* (0.48). *Tnf* was enriched in the IL-17 signaling pathway and was a crucial gene. *Tpsb2* has been implicated as a mediator in the pathogenesis of asthma and other allergic and inflammatory disorders [50]. *Mmp12*, which encodes a member of the peptidase M10 family of matrix metalloproteinases (MMPs), may play a role in aneurysm formation, and mutations in this gene are associated with lung function and chronic obstructive pulmonary disease (COPD) [51].

Il17a (score = 1.00) was significantly enriched in the IL-17 signaling pathway, and *Pik3cd* (score = 0.92), enriched in the PI3K-Akt signaling pathway, was also

prioritized using our network perturbation method.

Taken together, 15 genes involved in IL-17 and PI3K-Akt signaling pathways were
prioritized using network perturbation methods.

3.5 Prioritization of the critical targets and corresponding ingredients using the
random walk with restart network perturbation method

First, 928,485 target-DEG interactions (T-Gs) were calculated as proximity matrix
C_{MxN}. Furthermore, 19,009 T-Gs were identified as significant interactions and kept
for the proximity network construction ($z < 0$, $p < 0.025$), covering 694 targets (Fig.
S4A). We introduced these target genes into the KEGG pathway enrichment
analysis. IL-17, PI3K-Akt, and NF-κB signaling pathways were significantly
enriched ($p < 0.01$) (Table S1).

With target-DEG interactions, the random walk algorithm was performed to find
the key targets. Fig. 7A illustrates the top 20 targets with the highest heat values.
Primarily, we found that *Il13*, *Rela* enriched in the IL-17 signaling pathway and
Ywhab, *Rela*, *Pik3cb* enriched in the PI3K-Akt signaling pathway are among the top
20 targets (Fig. 7A), suggesting Suhuang may influence these two pathways to
relieve CVA.

Interestingly, 499 of 694 targets were not significantly changed at the
transcription level and were kept in our proximity network. More importantly,
according to the heat values from network perturbation, 16 of the top 20 targets
were not DEGs, such as *Rela*, *Ywhab*, and *Pik3cb* (Fig. 7A). These results suggested
that our network inference methods could reveal potential targets that were not
significantly expressed at the transcription level. We also investigated the
functions of these 499 targets via KEGG pathway enrichment. We found that the
PI3K-Akt and IL-17 signaling pathways were significantly enriched again (Fig.
S4B). Forty-five targets were enriched in the PI3K-Akt signaling pathway, and 23
were enriched in the IL-17 signaling pathway.

3.6 Experimental validation of the active ingredients and corresponding targets.

To identify active ingredients, 23 and 45 targets enriched in IL-17 and PI3K-Akt

signaling pathways were selected as critical targets. Correspondingly, molecular

docking was performed on the 17 and 21 active compounds predicted to interact

with these targets (Fig. 7B-C), respectively. The enriched targets and

corresponding ingredients, as well as binding interactions, were shown in Fig. 7D.

In particular, quercetin represented low binding energy with *Il17a*, *Pik3cb*, *Pik3cd*,

and *Akt1* as -7.4, -7.6, -8.8, -6.9 kcal/mol, respectively. In addition, luteolin also

showed stable docking results with *Tnf* and *Akt1,* whose binding energy values

were -8.7 and -6.8 kcal/mol, respectively. The above results illustrated that

quercetin and luteolin could alleviate lung inflammation by regulating IL-17 and

PI3K-Akt signaling pathways and might be the main active compounds of Suhuang

for treating CVA.

More importantly, according to Real-time PCR, we found that the mRNA expression

of *Il17a* was reduced by Suhuang significantly (Fig. 8A). Quercetin and luteolin

showed lower IC_{50} than positive control drug Dexamethasone (Fig. 8B).

Finally, we propose a novel MOA of Suhuang for treating CVA (Fig. 8C). We found

that PI3K-Akt, NF-κB, and IL-17 signaling pathways were involved in the

pathophysiological process of CVA. On the one hand, Phosphoinositide 3-kinases

(PI3Ks) are involved in the immune response. The lipid products of PI3K activate

Akt and then release NF-κB from the cytoplasm by phosphorylating a variety of

TFs such as RELA and BCL3 [52-54]. Activated NF-κB can induce many

proinflammatory cytokines and produce lung inflammation. On the other hand,

upon exposome stimulations, bronchial epithelial cells release IL-25, IL-33, and

thymic stromal lymphopoietin. These cytokines promote the proliferation of Th17

cells and drive them to release IL-17, leading to lung inflammation [55,56]. Therefore,

we were able to predict the MOAs of the primary active compounds in Suhuang

during the treatment of CVA: quercetin and luteolin could directly inhibit the IL-

17 signaling pathway and simultaneously inactivate PI3K, inhibiting Akt and NF-

κB, and thereby preventing the occurrence of lung inflammation and treating CVA. This multi-compound, multi-target, and multi-pathway treatment of CVA provided a scientific explanation for the drug combination of Suhuang.

3.7 Association between TCM properties and the proximity distance of their targets with DEGs

The target-DEG shortest path of different targets varied from 0 to 1.287 (Fig. S4A), indicating that the interactions of these targets with DEGs differed. As the targets were predicted to interact with different ingredients from the nine herbs in Suhuang, we investigated whether the shortest path of target-DEG from different components was related to their respective herbs and properties (Fig. 9A).

Generally speaking, the target-DEG shortest path of targets from Zisuye was significantly lower than that of targets from other herbs (Fig. 9B). Additionally, Zisuye also tended to have more significant target-DEG shortest path in the transformed proximity network than other herbs, according to Fisher's exact test (*p-value* = 3.56 × 10^{-64}) (Fig. 10A). These results revealed the essential roles of targets from Zisuye, which were consistent with our prior knowledge that Zisuye was the monarch ("JUN") medicine of Suhuang based on TCM theory. In terms of TCM properties, we found that the targets of cold nature, the pungent flavor, and the lung and spleen meridian tended to have significantly lower proximity with DEGs (*p-value* < 10^{-4}) as well as more significant target-DEG pairs (Fisher's exact test, *p*- value< 10^{-4}) when compared to their counterparts in TCM theory (Fig. 10A).

We found that the proximity of target-CVA gene and target-interesting pathway gene interactions was significantly lower than that of target-DEG interactions, suggesting that the significant targets we kept for network perturbation interacted strongly with CVA genes and were more likely to be the therapeutic targets (Fig. 10B). In particular, we identified six exciting targets which were not only DEGs of Suhuang but also related to CVA, including *Il17a*, *Tnf*, *Ifng*, *Il10*, *Ccr4*, and *Ido1*. Thus, we believe that Suhuang's ingredients predicted to interact with these six targets

deserve further verification (Fig. 10C).

More importantly, we found that targets from the lung and large intestine meridian
exhibited significantly lower proximity in the transformed proximity network
simultaneously (Fig. 10C). This reminded us that the lung and large intestine
meridian played essential roles in Suhuang. This was consistent with the TCM
theory of the "lung large intestine connection" [57]. Specifically, based on our
previous work, Suhuang could alleviate airway inflammation-associated lung
injury by promoting Hepatocyte growth factor (HGF) secretion in an intestinal
endocrine-dependent pathway. Moreover, the critical role of the lung meridian was
in line with the tissue distribution of DEGs in the lung (Figure 4B).

In summary, by comparing the proximity of target-DEG interactions from the
different herbs and properties of Suhuang, we found that the properties of
Suhuang based on TCM theory could explain its mechanisms of treating CVA to
some extent. We also reflected on the multi-component, multi-target, and multi-
pathway characteristics of TCM.

4. Discussion

Identifying the bioactive ingredients and key targets is difficult due to the lack of
target information. Thanks to the development of computational biology and
multi-omic methods, these large-scale data at different levels allow us to explore
the scientific connotation of TCM for treating diseases. To understand the
molecular MOAs of TCM treatments at the phenotype level, we proposed a novel
method, TCM-CMap, to infer the therapeutic targets of TCM prescription using a
gene perturbation network of the TCM prescription and the random walk
algorithm. After finding potential targets, we worked backward to identify the
bioactive ingredients according to the predicted ingredient-target pairs.

TCM-CMap completed the multiple data fusions required to uncover the MOAs of
TCM formulae, such as PPI, gene profiling, disease genes associations, and herb-
ingredient-targets. More importantly, advanced network proximity and network

perturbation were used to integrate all the data. Our results showed that our
network-based inference method could help to capture some bioactive targets that
were not observed as significantly changed genes at the transcript level. For
example, *Pik3cb*, a non-differentially expressed gene with a high rank by Diffusion,
was closely interactive with adjacent target genes and showed a strong affinity
with quercetin in Suhuang. Moreover, network proximity methods could help
uncover the underlying association by considering the global topological
characteristics. By calculating the network proximity of CVA-DEG, we quantified
the importance of CVA-related genes in the gene perturbation of Suhuang. By
calculating the target-DEG distance, we quantified the importance of targets of
Suhuang for gene perturbation. However, although the "shortest step" network
distance was applied in the previous model, the nodes and link attributions from
the PPI network were not considered. To further optimize the algorithm, it is
necessary to integrate the diversity of biological networks.

TCM-CMap can accurately predict targets and active ingredients, further
accelerating the MOA exploration of TCM and drug discovery from TCM. In this
case study, our method accurately predicted the known vital targets and the active
ingredients of Suhuang and uncovered one novel ingredient. We successfully
identified 17 active ingredients acting on the IL-17 signaling pathway and 21
acting on the PI3K-Akt-NFκB signaling pathway, such as decursin and rosmarinic
acid. It was reported that quercetin and luteolin could treat allergic asthma by
acting as critical targets related to PI3K-Akt and IL-17 signaling pathways, which
was also verified in vivo [58,59]. Decursin could improve inflammatory diseases by
regulating multiple pathways, including the PI3K-Akt-NFκB signaling pathway [60].
Rosmarinic acid could also alleviate airway inflammation by inhibiting NFκB
activation [61]. Currently, few studies are available about the therapeutic effects of
these compounds on asthma by regulating the IL-17 signaling pathway. In addition,
TCM-CMap also helped to discover a novel MOA: quercetin and luteolin could
directly inhibit the IL-17 signaling pathway and simultaneously inactivate PI3K,
inhibiting Akt and NF-κB, thereby preventing the occurrence of lung inflammation
and treating CVA. In summary, TCM-CMap provides a novel insight into the deep

understanding of how the complex systems of TCM prescriptions treat diseases by the MOAs of multi-compound, multi-target, and multi-pathway.

We also proposed a novel paradigm for deciphering TCM theories by investigating the relationships between our prioritized targets and the distributions of these properties. TCM theory was essential in using TCM formulae, such as nature, flavors, and meridians in TCM properties. First, for meridian theory, we found that the tissue expression attendance of DEGs followed the lung meridian of Suhuang. Second, Zisuye had closer interactions with DEGs than other herbs that are considered to play significant therapeutic effects, which is in line with its monarch role in TCM theory. Studies have shown that the extraction of Zisuye could effectively alleviate airway inflammation and high airway responsiveness in the asthma mouse model induced by ovalbumin [62,63]. Specifically, Zisuye contains various active ingredients, including flavonoids and phenolic acids such as luteolin and rosmarinic acid, with anti-inflammatory activity [64,65]. These ingredients in Zisuye may be the therapeutic material basis in Suhuang for treating CVA. Third, in terms of the "JUN-CHEN-ZUO-SHI" theory of combination, we found that NIUBANGZI and WUWEIZI had significant target-DEG shortest path according to Fisher's exact test, with p values 1.63×10^{-53} and 2.08×10^{-18}, respectively. Accordingly, this also suggested that the active compounds corresponding to the crucial targets from NIUBANGZI and WUWEIZI had therapeutic roles in Suhuang for treating CVA, which was also consistent with our prior knowledge that NIUBANGZI and WUWEIZI were the minister ("CHEN") medicines based on TCM theory. Additionally, the main active components of NIUBANGZI and WUWEIZI, such as arctigenin and schizandrin, were found to relieve airway inflammation and treat asthma [66,67]. Fourth, the results of the property distributions of Suhuang's targets based on TCM theory were also consistent with modern scientific research. If the transformed proximity network was noticed, the proximity of targets of the pungent flavor was also lower than that of other flavors (Fig. 9B). It had previously been reported that transient receptor potential (TRP) channels were responsible for various sensory reactions, including heat, cold, pain, stress, vision, and taste [68]. For example, TRP channel subfamily V-1 (TRPV1) was sensitive to capsaicin

interrelated with the pungent flavor, and TRP channel subfamily M-8 (TRPM8) was related to the cold sensory [69-71]. They also played a role in respiratory diseases, nervous and mental diseases, diabetes, and cancer. Therefore, the property classifications of Suhuang might be associated with regulating these proteins. To sum up, our TCM-CMap could help us better understand TCM theory in formulae at the molecular level[72].

There are some limitations in this study. For example, our network perturbation method considered first-level neighborhood genes in PPI, namely LR. Many other advanced network perturbation methods are worth trying.

In summary, this study addresses the challenge of identifying bioactive ingredients and key targets in TCM due to limited target information. Leveraging computational biology and multi-omic methods, we introduce a novel approach called TCM-CMap to understand the molecular mechanisms of TCM treatments. TCM-CMap integrates various data sources, including protein-protein interactions, gene profiling, disease-gene associations, and herb-ingredient-targets, employing network proximity and perturbation methods to uncover therapeutic targets not detected at the transcript level. This approach accurately predicts targets and active ingredients, facilitating the exploration of TCM mechanisms and drug discovery, exemplified by identifying active ingredients in Suhuang for treating Cough Variant Asthma and offering insights into TCM theory.

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Reference

Kim, H. U., Ryu, J. Y., Lee, J. O. & Lee, S. Y. A systems approach to traditional oriental medicine. *Nature Biotechnology* **33**, 264-268, doi:10.1038/nbt.3167 (2015).

Zhang, R., Li, X., Zhang, X., Qin, H. & Xiao, W. Machine learning approaches for elucidating the biological effects of natural products—Nat *Prod Rep* **38**, 346-361, doi:10.1039/d0np00043d (2021).

Wang, Y., Jafari, M., Tang, Y. & Tang, J. Predicting Meridian in Chinese traditional medicine using machine learning approaches. *PLoS Computational Biology* **15**, e1007249, doi:10.1371/journal.pcbi.1007249 (2019).

Zhang, R., Zhu, X., Bai, H. & Ning, K. Network Pharmacology Databases for Traditional Chinese Medicine: Review and Assessment. *Frontiers in pharmacology* **10**, 123, doi:10.3389/fphar.2019.00123 (2019).

Jafari, M., Wang, Y., Amiryousefi, A. & Tang, J. Unsupervised Learning and Multipartite Network Models: A Promising Approach for Understanding Traditional Medicine. *Frontiers in pharmacology* **11**, 1319, doi:10.3389/fphar.2020.01319 (2020).

Menche, J. *et al.* Disease networks. Uncovering disease-disease relationships through the incomplete interactome. *Science (New York, N.Y.)* **347**, 1257601, doi:10.1126/science.1257601 (2015).

Tian, S. *et al.* Exploring pharmacological active ingredients of traditional Chinese medicine by pharmacotranscriptomic map in ITCM. *Brief Bioinform* **24**, doi:10.1093/bib/bbad027 (2023).

Cheng, F., Kovács, I. A. & Barabási, A. L. Network-based prediction of drug combinations. *Nature communications* **10**, 1197, doi:10.1038/s41467-019-09186-x (2019).

Wang, Y., Yang, H., Chen, L., Jafari, M. & Tang, J. Network-based modeling of herb combinations in traditional Chinese medicine. *Briefings in bioinformatics* **22**, doi:10.1093/bib/bbab106 (2021).

Gu, S. & Lai, L. H. Associating 197 Chinese herbal medicine with drug targets and diseases using the similarity ensemble approach. *Acta Pharmacol Sin* **41**, 432-438, doi:10.1038/s41401-019-0306-9 (2020).

Luo, Z. *et al.* Integrated Systems Pharmacology and Surface Plasmon Resonance Approaches to Reveal the Synergistic Effect of Multiple Components of Gu-Ben-Ke-Chuan Decoction on Chronic Bronchitis. *J Inflamm Res* **14**, 1455-1471, doi:10.2147/jir.S303530 (2021).

Theodoris, C. V. *et al.* Transfer learning enables predictions in network biology. *Nature* **618**, 616-624, doi:10.1038/s41586-023-06139-9 (2023).

Selvaraj, N. *et al.* Network-based Drug Repurposing: A Critical Review. *Curr Drug Res Rev* **14**, 116-131, doi:10.2174/2589977514666220214120403 (2022).

Ma, X. *et al.* Bioinformatics-assisted, integrated omics studies on medicinal plants. *Brief Bioinform* **21**, 1857-1874, doi:10.1093/bib/bbz132 (2020).

15   Musa, A. *et al.* A review of connectivity map and computational approaches
in pharmacogenomics. *Briefings in bioinformatics* **19**, 506-523,
doi:10.1093/bib/bbw112 (2018).

16   Xiao, Y. *et al.* Novel Drug Candidate Prediction for Intrahepatic
Cholangiocarcinoma via Hub Gene Network Analysis and Connectivity
Mapping. *Cancers* **14**, doi:10.3390/cancers14133284 (2022).

17   Isik, Z., Baldow, C., Cannistraci, C. V. & Schroeder, M. Drug target
prioritization by perturbed gene expression and network information.
Scientific reports **5**, 17417, doi:10.1038/srep17417 (2015).

18   Zhu, X. *et al.* Multi-omics approaches for in-depth understanding of
therapeutic mechanism for Traditional Chinese Medicine. *Frontiers in*
pharmacology **13**, 1031051, doi:10.3389/fphar.2022.1031051 (2022).

19   Qin, W. *et al.* Preservation of mitochondrial homeostasis is responsible for
the ameliorative effects of Suhuang antitussive capsule on non-resolving
inflammation via inhibition of NF-κB signaling and NLRP3 inflammasome
activation. *J Ethnopharmacol* **271**, 113827, doi:10.1016/j.jep.2021.113827
(2021).

20   Gocho, Y. *et al.* Network-based systems pharmacology reveals
heterogeneity in LCK and BCL2 signaling and therapeutic sensitivity of T-
cell acute lymphoblastic leukemia. *Nature cancer* **2**, 284-299,
doi:10.1038/s43018-020-00167-4 (2021).

21   Zhang, W. *et al.* Integrated strategy for accurately screening biomarkers
based on metabolomics coupled with network pharmacology. *Talanta* **211**,
120710, doi:10.1016/j.talanta.2020.120710 (2020).

22   Padem, N. & Saltoun, C. Classification of asthma. *Allergy and asthma*
proceedings **40**, 385-388, doi:10.2500/aap.2019.40.4253 (2019).

23   Diab, N., Patel, M., O'Byrne, P. & Satia, I. Narrative Review of the Mechanisms
and Treatment of Cough in Asthma, Cough Variant Asthma, and Non-
asthmatic Eosinophilic Bronchitis. *Lung* **200**, 707-716,
doi:10.1007/s00408-022-00575-6 (2022).

24   Qin, W. *et al.* Suhuang antitussive capsule inhibits NLRP3 inflammasome
activation and ameliorates pulmonary dysfunction via suppression of
endoplasmic reticulum stress in cough variant asthma. *Biomed*
Pharmacother **118**, 109188, doi:10.1016/j.biopha.2019.109188 (2019).

25   Tong, X. *et al.* Suhuang Antitussive Capsules-Ameliorative Effects on LPS-
Induced Sputum Obstruction in Mice Through Promoting HGF Secretion.
Front Pharmacol **10**, 1422, doi:10.3389/fphar.2019.01422 (2019).

26   Jiang, H. *et al.* β-Hydroxybutyric acid upregulated by Suhuang antitussive
capsule ameliorates cough variant asthma through GSK3β/AMPK-Nrf2
signal axis. *J Ethnopharmacol* **307**, 116013, doi:10.1016/j.jep.2022.116013
(2023).

27   Xu, H. Y. *et al.* ETCM: an encyclopaedia of traditional Chinese medicine.
Nucleic Acids Res **47**, D976-d982, doi:10.1093/nar/gky987 (2019).

28   Ru, J. *et al.* TCMSP: a database of systems pharmacology for drug discovery

from herbal medicines. *J Cheminform* **6**, 13, doi:10.1186/1758-2946-6-13
(2014).

29 Zhang, L. X. *et al.* TCMSID: a simplified integrated database for drug
discovery from traditional chinese medicine. *Journal of cheminformatics* **14**,
89, doi:10.1186/s13321-022-00670-z (2022).

30 Liu, Z. *et al.* TCMIO: A Comprehensive Database of Traditional Chinese
Medicine on Immuno-Oncology. *Front Pharmacol* **11**, 439,
doi:10.3389/fphar.2020.00439 (2020).

31 Huang, L. *et al.* TCMID 2.0: a comprehensive resource for TCM. *Nucleic Acids*
Res **46**, D1117-d1120, doi:10.1093/nar/gkx1028 (2018).

32 Wang, Y. *et al.* PubChem: a public information system for analyzing
bioactivities of small molecules. *Nucleic Acids Res* **37**, W623-633,
doi:10.1093/nar/gkp456 (2009).

33 Szklarczyk, D. *et al.* STITCH 5: augmenting protein-chemical interaction
networks with tissue and affinity data. *Nucleic Acids Res* **44**, D380-384,
doi:10.1093/nar/gkv1277 (2016).

34 Dong, J. *et al.* ADMETlab: a platform for systematic ADMET evaluation
based on a comprehensively collected ADMET database. *J Cheminform* **10**,
29, doi:10.1186/s13321-018-0283-x (2018).

35 Safran, M. *et al.* GeneCards Version 3: the human gene integrator. *Database*
(Oxford) **2010**, baq020, doi:10.1093/database/baq020 (2010).

36 Hamosh, A. *et al.* Online Mendelian Inheritance in Man (OMIM), a
knowledgebase of human genes and genetic disorders. *Nucleic Acids Res* **30**,
52-55, doi:10.1093/nar/30.1.52 (2002).

37 Piñero, J. *et al.* The DisGeNET knowledge platform for disease genomics:
2019 update. *Nucleic Acids Res* **48**, D845-d855, doi:10.1093/nar/gkz1021
(2020).

38 Szklarczyk, D. *et al.* The STRING database in 2023: protein-protein
association networks and functional enrichment analyses for any
sequenced genome of interest. *Nucleic Acids Res* **51**, D638-d646,
doi:10.1093/nar/gkac1000 (2023).

39 Jaaks, P. *et al.* Effective drug combinations in breast, colon and pancreatic
cancer cells. *Nature* **603**, 166-173, doi:10.1038/s41586-022-04437-2
(2022).

40 Carlin, D. E., Demchak, B., Pratt, D., Sage, E. & Ideker, T. Network propagation
in the cytoscape cyberinfrastructure. *PLoS Comput Biol* **13**, e1005598,
doi:10.1371/journal.pcbi.1005598 (2017).

41 Subramanian, A. *et al.* A Next Generation Connectivity Map: L1000 Platform
and the First 1,000,000 Profiles. *Cell* **171**, 1437-1452.e1417,
doi:10.1016/j.cell.2017.10.049 (2017).

42 Trott, O. & Olson, A. J. AutoDock Vina: improving the speed and accuracy of
docking with a new scoring function, efficient optimization, and
multithreading. *J Comput Chem* **31**, 455-461, doi:10.1002/jcc.21334
(2010).

43 Bader, G. D. & Hogue, C. W. An automated method for finding molecular
complexes in large protein interaction networks. *BMC Bioinformatics* **4**, 2,
doi:10.1186/1471-2105-4-2 (2003).

44 Burley, S. K. *et al.* RCSB Protein Data Bank: powerful new tools for exploring
3D structures of biological macromolecules for basic and applied research
and education in fundamental biology, biomedicine, biotechnology,
bioengineering and energy sciences. *Nucleic Acids Res* **49**, D437-d451,
doi:10.1093/nar/gkaa1038 (2021).

45 Kuruvilla, M. E., Lee, F. E. & Lee, G. B. Understanding Asthma Phenotypes,
Endotypes, and Mechanisms of Disease. *Clin Rev Allergy Immunol* **56**, 219-
233, doi:10.1007/s12016-018-8712-1 (2019).

46 Agache, I. *et al.* Advances and highlights in asthma in 2021. *Allergy* **76**,
3390-3407, doi:10.1111/all.15054 (2021).

47 Niimi, A. Narrative Review: how long should patients with cough variant
asthma or non-asthmatic eosinophilic bronchitis be treated? *J Thorac Dis*
13, 3197-3214, doi:10.21037/jtd-20-2026 (2021).

48 Bu, Y. *et al.* Targeting NF-κB RelA/p65 phosphorylation overcomes RITA
resistance. *Cancer Lett* **383**, 261-271, doi:10.1016/j.canlet.2016.10.006
(2016).

49 Poveda, J. *et al.* Bcl3: a regulator of NF-κB inducible by TWEAK in acute
kidney injury with anti-inflammatory and antiapoptotic properties in
tubular cells. *Exp Mol Med* **49**, e352, doi:10.1038/emm.2017.89 (2017).

50 Winter, N. A. *et al.* Sputum mast cell/basophil gene expression relates to
inflammatory and clinical features of severe asthma. *J Allergy Clin Immunol*
148, 428-438, doi:10.1016/j.jaci.2021.01.033 (2021).

51 Hunninghake, G. M. *et al.* MMP12, lung function, and COPD in high-risk
populations. *N Engl J Med* **361**, 2599-2608, doi:10.1056/NEJMoa0904006
(2009).

52 Ozes, O. N. *et al.* NF-kappaB activation by tumour necrosis factor requires
the Akt serine-threonine kinase. *Nature* **401**, 82-85, doi:10.1038/43466
(1999).

53 Madrid, L. V., Mayo, M. W., Reuther, J. Y. & Baldwin, A. S., Jr. Akt stimulates
the transactivation potential of the RelA/p65 Subunit of NF-kappa B
through utilization of the Ikappa B kinase and activation of the mitogen-
activated protein kinase p38. *J Biol Chem* **276**, 18934-18940,
doi:10.1074/jbc.M101103200 (2001).

54 Wang, V. Y. *et al.* Bcl3 Phosphorylation by Akt, Erk2, and IKK Is Required for
Its Transactivation Activity. *Mol Cell* **67**, 484-497.e485,
doi:10.1016/j.molcel.2017.06.011 (2017).

55 Choy, D. F. *et al.* TH2 and TH17 inflammatory pathways are reciprocally
regulated in asthma. *Sci Transl Med* **7**, 301ra129,
doi:10.1126/scitranslmed.aab3142 (2015).

56 Brandt, E. B., Bolcas, P. E., Ruff, B. P. & Khurana Hershey, G. K. IL33
contributes to diesel pollution-mediated increase in experimental asthma

severity—allergy **75**, 2254-2266, doi:10.1111/all.14181 (2020).

57 Liu, P. *et al.* Study on traditional Chinese medicine theory of lung being
connected with large intestine. *J Tradit Chin Med* **32**, 482-487,
doi:10.1016/s0254-6272(13)60059-x (2012).

58 Zhou, K. *et al.* Integrated plasma pharmacochemistry and network
pharmacology to explore the mechanism of Gerberae Piloselloidis Herba in
treatment of allergic asthma. *Journal of ethnopharmacology* **298**, 115624,
doi:10.1016/j.jep.2022.115624 (2022).

59 Liu, X. *et al.* A systematic pharmacology-based in vivo study to reveal the
effective mechanism of Yupingfeng in asthma treatment. *Phytomedicine*
114, 154783, doi:10.1016/j.phymed.2023.154783 (2023).

60 Shehzad, A., Parveen, S., Qureshi, M., Subhan, F. & Lee, Y. S. Decursin and
decursinol angelate: molecular mechanism and therapeutic potential in
inflammatory diseases. *Inflamm Res* **67**, 209-218, doi:10.1007/s00011-
017-1114-7 (2018).

61 Liang, Z. *et al.* Therapeutic effects of rosmarinic acid on airway responses
in a murine model of asthma. *Int Immunopharmacol* **41**, 90-97,
doi:10.1016/j.intimp.2016.10.010 (2016).

62 Chen, M. L., Wu, C. H., Hung, L. S. & Lin, B. F. Ethanol Extract of Perilla
frutescens Suppresses Allergen-Specific Th2 Responses and Alleviates
Airway Inflammation and Hyperreactivity in Ovalbumin-Sensitized Murine
Model of Asthma. *Evid Based Complement Alternat Med* **2015**, 324265,
doi:10.1155/2015/324265 (2015).

63 Yang, H. *et al.* Perilla Leaf Extract Attenuates Asthma Airway Inflammation
by Blocking the Syk Pathway. *Mediators Inflamm* **2021**, 6611219,
doi:10.1155/2021/6611219 (2021).

64 Luo, C. *et al.* A Review of the Anti-Inflammatory Effects of Rosmarinic Acid
on Inflammatory Diseases. *Front Pharmacol* **11**, 153,
doi:10.3389/fphar.2020.00153 (2020).

65 Conti, P. *et al.* The powerful anti-inflammatory action of luteolin: Potential
increase with IL-38. *Biofactors* **47**, 165-169, doi:10.1002/biof.1718 (2021).

66 Lee, M. Y. *et al.* Anti-asthmatic effect of schizandrin on OVA-induced airway
inflammation in a murine asthma model. *Int Immunopharmacol* **10**, 1374-
1379, doi:10.1016/j.intimp.2010.07.014 (2010).

67 Fang, R. *et al.* PDK1/Akt/PDE4D axis identified as a target for asthma
remedy synergistic with β2 AR agonists by a natural agent arctigenin.
Allergy **70**, 1622-1632, doi:10.1111/all.12763 (2015).

68 Koivisto, A. P., Belvisi, M. G., Gaudet, R. & Szallasi, A. Advances in TRP
channel drug discovery: from target validation to clinical studies. *Nat Rev*
Drug Discov **21**, 41-59, doi:10.1038/s41573-021-00268-4 (2022).

69 McKemy, D. D., Neuhausser, W. M. & Julius, D. Identification of a cold
receptor reveals a general role for TRP channels in thermosensation.
Nature **416**, 52-58, doi:10.1038/nature719 (2002).

70 Peier, A. M. *et al.* A TRP channel that senses cold stimuli and menthol. *Cell*

108, 705-715, doi:10.1016/s0092-8674(02)00652-9 (2002).

871   Salazar, H. *et al.* A single N-terminal cysteine in TRPV1 determines activation by pungent compounds from onion and garlic. *Nat Neurosci* **11**, 255-261, doi:10.1038/nn2056 (2008).

872   Hoel, E. P., Albantakis, L. & Tononi, G. Quantifying causal emergence shows that macro can beat micro. *Proc Natl Acad Sci U S A* **110**, 19790-19795, doi:10.1073/pnas.1314922110 (2013).

Figures legend

Fig. 1. The schema of the TCM-CMap methodology's sequential steps for connecting gene perturbation to therapeutic targets in the complex system of TCM prescriptions. **(A) Data Collection:** TCM-ingredient-target relationships, disease-gene associations, and protein-protein interactions (PPIs) were extracted. **(B) Gene Perturbation Data:** Gene perturbation data were obtained through RNA-seq analysis on CVA rats, identifying differentially expressed genes (DEGs). **(C) Functional Enrichment:** Various pathway enrichment methods, including KEGG, GSEA, RcisTarget, and CMap, were employed to enrich DEGs with relevant functions at different levels. **(D) DEG-Weighted PPI:** Gene perturbation data were mapped onto the PPI network to construct a DEG-weighted Protein-Protein Interaction Network. **(E) Target-DEG Association Network and network propagation**: The proximity between targets and DEGs was calculated to identify vital target-DEG interactions. Network random walk algorithms (LR and hot diffusion) were used to propagate gene perturbation and score each target, with higher gene perturbation scores indicating more essential roles of therapeutic targets. **(F) Validation:** Prioritized targets and corresponding ingredients were further validated through molecular docking and wet experiments.

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Signaling Pathway. **(E)** GSEA plot for NF-κB Signaling Pathway. **(F)** The expressional heatmap of the DEGs enriched in NF-κB Signaling Pathway. **(G)** The information about the top motif enrichment and its TF annotation. NES: Normalized enrichment score of the enriched motifs in the geneset. The motifs whose NES > 3.0 are considered essential. **(H)** The DEG regulatory network about the motif-TF annotations.

Fig. 6. The association between DEGs and CVA-related genes. (A) The scatter plot of the network distance between the DEGs and CVA genes and the log2 foldchange absolute values of the DEGs. The Pearson correlation coefficient (R) and two-sided t-distribution p values (p) for the comparison are shown in the plot. The linear regression trendline (black) and its 95% confidence interval (shaded gray area) are shown in the graph. The colors suggest the clusters of the DEGs. **(B)** Comparison of the network distance between the DEGs of three clusters and CVA genes. *P-values* were calculated by t.test. ****p < 0.0001, vs. the cluster Ⅱ group. **(C)** Comparison of the log2 foldchange absolute values of the DEGs of three clusters. **(D)** The top 20 significant signaling pathways were enriched by introducing 73 DEGs into the KEGG pathway enrichment analysis. **(E)** The heatmap of the network distance between 73 DEGs of cluster 2 and CVA genes. The row genes are CVA genes, and the column genes are the DEGs of cluster 2. **(F)** The distribution of the DEGs of cluster 2. The genes of the left nest were significantly enriched in the IL-17 signaling pathway, and the genes of the right nest were enriched in the PI3K-AKt signaling pathway. The genes of the deepest color belonged to CVA genes. **(G)** The LR of the top 14 CVA-related genes with the significantly low network distance (p-value < 0.025) is based on the network propagation method.

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Fig. S1. The workflow of TCM-CMap.
Fig. S2. The connection map of DEGs for MOAs.
Fig. S3. Based on the network proximity model, The calculated network distance between the DEGs of Suhuang and the CVA-related genes.
Fig. S4. The target-DEGs distance analysis. (A) The network distance distribution of all the target-DEG interactions (n = 928,485). The red part of the density plot was the target-DEG interactions with the significantly low network distance (n = 19,009) based on the one-sided test of normal distribution (z < 0, p < 0.025). **(B)** The topmost significant signaling pathways were enriched by introducing 499 targets that were not DEGs into the KEGG pathway enrichment analysis.

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Table 1. Sequences of the primers used for real-time PCR.

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1145 **Supplementary Fig. 1.**

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1147 **Supplementary Fig. 1. The workflow of TCM-CMap.**

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1149 **Supplementary Fig. 2.**

Perturbagen class

score ▾	type	name	description
99.90		Tumor necrosis factor superfamily LOF	
99.53		Rho GTPase activating proteins LOF	
99.09		Lipocalins GOF	
98.48		Kinase anchoring proteins LOF	
98.37		AHSP Pathway LOF	
2.56		PI3K Signaling LOF	
2.42		GPCR Subset GOF	
1.59		General transcription factors group 2 LOF	
0.94		X linked mental retardation group 2 LOF	
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1161   **A**

1162

1163   **B**

1164

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