

1 **Robust metabolic transcriptional components in 34,494 patient-derived samples and cell lines**

2

3 V.C. Leeuwenburgh<sup>1,2,#</sup>, C.G. Urzúa-Traslaviña<sup>1,#</sup>, A. Bhattacharya<sup>1</sup>, M.T.C. Walvoort<sup>2</sup>, M. Jalving<sup>1</sup>,

4 S. de Jong<sup>1</sup>, R.S.N. Fehrmann<sup>1</sup>

5

6 <sup>1</sup> Department of Medical Oncology, University Medical Center Groningen, University of Groningen,

7 Groningen, the Netherlands

8 <sup>2</sup> Department of Chemical Biology, Stratingh Institute for Chemistry, University of Groningen, the

9 Netherlands

10 # Contributed equally

11

12

13 **Corresponding author / Lead contact:**

14 Rudolf S.N. Fehrmann, MD, PhD

15 Department of Medical Oncology, University Medical Center Groningen

16 P.O. Box 30.001, 9700 RB Groningen, the Netherlands

17 Tel. +31503612821, Fax +31503614862

18 E-mail: r.s.n.fehrmann@umcg.nl

19 **ABSTRACT**

20 Patient-derived expression profiles of cancers can provide insight into transcriptional changes  
21 that underlie reprogrammed metabolism in cancer. These profiles represent the average  
22 expression pattern of all heterogeneous tumor and non-tumor cells present in biopsies of tumor  
23 lesions. Therefore, subtle transcriptional footprints of metabolic processes can be concealed by  
24 other biological processes and experimental artifacts. We, therefore, performed consensus  
25 Independent Component Analyses (c-ICA) with 34,494 bulk expression profiles of patient-derived  
26 tumor biopsies, non-cancer tissues, and cell lines. c-ICA enabled us to create a transcriptional  
27 metabolic landscape in which many robust metabolic transcriptional components and their  
28 activation score in individual samples were defined. Here we demonstrate how this landscape can  
29 be used to explore associations between the metabolic transcriptome and drug sensitivities,  
30 patient outcomes, and the composition of the immune tumor microenvironment. The metabolic  
31 landscape can be explored at <http://www.themetaboliclandscapeofcancer.com>.

## 32 INTRODUCTION

33 Reprogrammed energy metabolism is a hallmark of cancer (Hanahan and Weinberg, 2011).  
34 Metabolic reprogramming supports the survival, proliferation, and maintenance of cancer cells  
35 by ensuring sufficient biosynthetic capacity, redox potential, and energy (Pavlova and Thompson,  
36 2016; Vazquez et al., 2016). Additionally, metabolic reprogramming enables tumor cells to adapt  
37 to challenging microenvironmental conditions, such as hypoxia and low nutrient availability, and  
38 become resistant to cancer treatment (Huang et al., 2014; Viale and Draetta, 2016). Moreover,  
39 metabolic reprogramming of cancer cells influences the composition and function of immune  
40 cells present in the tumor microenvironment (TME), affecting the anti-cancer immune response  
41 to immunotherapy (Le Bourgeois et al., 2018; Quail and Joyce, 2013).

42 Metabolic dependencies have been successfully exploited to treat cancer, as illustrated by  
43 the efficacy of antifolate drugs such as methotrexate (Walling, 2006). More recent knowledge  
44 about cancer cell metabolism has resulted in novel therapeutic targets, such as glutaminase and  
45 mutant forms of IDH1/2, currently being evaluated in pre-clinical models and phase I/II clinical  
46 trials (Shah and Chen, 2020; Tang et al., 2021). However, adverse effects or lack of effectiveness  
47 still hamper the clinical development of most metabolic therapies. A potential reason is that many  
48 metabolic targeting drugs are developed based on insights derived from model systems of human  
49 cancer, which do not fully reflect the complexities of cancer in humans (Ghaffari et al., 2015). In  
50 particular, cell line models lack the immune cells present in the TME (Hynds et al., 2018; Jiang et  
51 al., 2016; Vincent and Postovit, 2017) and often require specific metabolic conditions to grow  
52 (Ben-David et al., 2018; Hynds et al., 2018).

53 Evidence is emerging that transcriptional changes play an important role in the metabolic  
54 plasticity of cancer cells: gene expression can influence metabolite levels, and metabolic changes  
55 can result in altered gene expression (Desvergne et al., 2006; Martin-Martin et al., 2018; Peng et  
56 al., 2018). The availability of large numbers of gene expression profiles — from a broad spectrum  
57 of cancer types — in the public domain provides a unique opportunity to study metabolic  
58 reprogramming in patient-derived cancer tissue.

59 Almost without exception, these gene expression profiles were generated from complex  
60 biopsies that contain tumor cells and cells present in the TME (e.g., immune cells). Accordingly,  
61 these profiles represent the average gene expression pattern of all cells present in the biopsy.  
62 Therefore, detecting metabolic processes relevant to cancer biology in expression profiles from  
63 complex biopsies can be challenging, especially when their transcriptional footprints (TFs) are  
64 subtle and concealed by more pronounced TFs from other biological processes or experimental  
65 artifacts.

66 In the present study, we used consensus Independent Component Analyses (c-ICA), a  
67 statistical method capable of separating the average gene expression profiles generated from  
68 complex biopsies into additive transcriptional components (TCs). This enabled us to detect both  
69 the pronounced and more subtle transcriptional footprints of metabolic processes. We  
70 performed c-ICA with 32,409 gene expression profiles obtained from the Gene Expression  
71 Omnibus (GEO) and The Cancer Genome Atlas (TCGA), as well as 2,085 gene expression profiles  
72 obtained from the Cancer Cell Line Encyclopedia (CCLE) and the Genomics of Drug Sensitivity in  
73 Cancer portal (GDSC) (Barret et al., 2013; Barretina et al., 2012; Yang et al., 2013). Comprehensive  
74 characterization of the TCs with gene set enrichment analysis (GSEA) identified TCs associated

75 with metabolic processes, i.e., metabolic TCs (mTCs). This enabled us to create a metabolic  
76 landscape showing the activity of these mTCs in all 34,494 samples. We demonstrate how this  
77 landscape ([www.themetaboliclandscapeofcancer.com](http://www.themetaboliclandscapeofcancer.com)) can be used to explore associations  
78 between the metabolic transcriptome and drug sensitivities, patient outcomes, and the  
79 composition of immune cells in the TME.

80

## 81 **RESULTS**

### 82 **A subset of transcriptional components is associated with metabolic processes**

83 Previously, we collected gene expression data from four databases: the Gene Expression Omnibus  
84 (GEO dataset,  $n = 21,592$ ), The Cancer Genome Atlas (TCGA dataset,  $n = 10,817$ ), the Cancer Cell  
85 Line Encyclopedia (CCLE dataset,  $n = 1,067$ ), and the Genomics of Drug Sensitivity in Cancer (GDSC  
86 dataset,  $n = 1,018$ ) (**Figure 1A**), totaling 34,494 samples (Bhattacharya et al., 2020). Overall,  
87 28,200 expression profiles originated from patient-derived complex tissue cancer biopsies, 4,209  
88 from complex tissue biopsies of non-cancerous tissue, and 2,085 from cell lines. The samples in  
89 these four databases encompass 89 cancer tissue types and subtypes and 19 non-cancerous  
90 tissue types. For GEO and CCLE data sets, the expression profiles were generated with Affymetrix  
91 HG-U133 Plus 2.0. Expression profiles within the GDSC dataset were generated with Affymetrix  
92 Human Genome U219, and TCGA profiles were generated with RNA sequencing.

93 Gene expression profiling measures the net expression level of individual genes, thus  
94 reflecting the integrated activity of underlying regulatory factors, including experimental, genetic,  
95 and non-genetic factors. To gain insight into the number and nature of these regulatory factors  
96 and their effects on gene expression levels, i.e., their transcriptional footprints, we previously

97 performed consensus-independent component analysis (c-ICA) on each of the abovementioned  
98 four datasets separately (Bhattacharya et al., 2020), resulting in four sets of transcriptional  
99 components (TCs). In every TC, each gene has a specific weight. This weight describes how  
100 strongly and in which direction the underlying transcriptional regulatory factor influences the  
101 expression level of that gene. c-ICA also provides a 'mixing-matrix' per dataset, in which each  
102 column corresponds to a TC and each row corresponds to a sample. Values in the mixing matrix  
103 are interpreted as measurements of the activity of the TCs in an individual sample; we refer to  
104 these as 'activity scores'. Ultimately, the analysis yielded 855, 1383, 466, and 467 TCs for GEO,  
105 TCGA, CCLE, and GDSC datasets, respectively (**Figure 1A**).

106 Gene set enrichment analysis (GSEA) with 608 gene sets that describe metabolic processes  
107 was performed to identify TCs enriched for metabolic processes. The gene sets were selected  
108 from the gene set collections Biocarta ( $n = 7$ ), the Kyoto Encyclopedia of Genes and Genomes  
109 (KEGG,  $n = 64$ ), the Gene Ontology Consortium (GO,  $n = 508$ ), and Reactome ( $n = 29$ ) within the  
110 Molecular Signatures DataBase (MSigDB, v6.1; for the systematic selection strategy see  
111 **Methods**). We performed consensus clustering on the enrichment scores of the 608 metabolic  
112 gene sets to identify potential biological redundancy in the metabolic gene set definitions (**Figure**  
113 **S1**). This resulted in 50 clusters of gene sets, which can be ascribed to different metabolic themes  
114 (**Table S1**). Based on these 50 enrichment clusters, 132 (GEO), 151 (TCGA), 136 (CCLE), and 136  
115 (GDSC) mTCs were defined (**Figure 1A and B**); see **Methods** for the systematic selection strategy).  
116 These mTCs represent the metabolic transcriptional footprints present in our broad set of  
117 samples, i.e., patient-derived samples, cancer cell line samples, and non-cancer samples.  
118 However, some of the identified mTCs may capture the transcriptional footprints of experimental

119 factors. Therefore, we investigated how much of the variance in activity scores of each mTC could  
120 be explained by experimental batches. For GEO mTCs, experimental batches were determined by  
121 the provided GSE identifiers (i.e., experiment series identifiers). For TCGA mTCs, experimental  
122 batches were determined by the tissue source site of samples (e.g., 2H, Erasmus MC, esophageal  
123 carcinoma). We observed that 12/132 GEO mTCs showed a potential putative batch effect with  
124 more than 10% explained variance (**Figure S2A**). However, six of the 12 GEO mTCs with a putative  
125 batch effect also explained more than 10% of the variance in gene expression of samples  
126 belonging to a single tissue subtype (**Figure S2A**). One of the 151 TCGA mTCs showed a putative  
127 batch effect with 20.5% explained variance (**Figure S2B**). This mTC, TCGA mTC 43, also showed  
128 tissue-specificity for thymoma, a tissue type that is not present in the GEO dataset. These  
129 observations might indicate that the mTCs showing a putative batch effect in fact describe tissue-  
130 specific biology of tissues that are only present in a single experiment in our dataset.

131

### 132 **Metabolic TCs are robust across different datasets and platforms**

133 Pair-wise comparison of mTCs between datasets, based on gene weights, showed that 91-99% of  
134 mTCs per dataset were highly correlated ( $|r_s| \geq 0.5$ , P-value < 0.05 as a threshold) with at least  
135 one mTC identified in another dataset (**Figure 1C, D** and **Figure S3A-G**). This indicates that most  
136 of the mTCs were cross-platform and cross-dataset robust.

137 Given the selected correlation threshold ( $|r_s| \geq 0.5$ , P-value < 0.05), 72 mTCs could be  
138 identified with a highly similar gene weight pattern in all four datasets (**Figure 1D**). Thus, these  
139 mTCs capture a transcriptional footprint that is very similar in both patient-derived complex  
140 biopsies and cell lines. As cell lines lack a TME, these 72 mTCs were considered to capture

141 metabolic processes that reflect tumor cell characteristics. Six GEO mTCs were identified that  
142 were highly correlated with TCGA mTCs, but not highly correlated with any CCLE or GDSC mTC  
143 (**Figure 1D**). These mTCs, therefore, might capture transcriptional footprints that are specific for  
144 complex biopsies obtained from patient-derived cancer tissue and may originate from the TME  
145 or capture a transcriptional footprint from tissue only present in the GEO and TCGA datasets. One  
146 pair of mTCs was identified with a gene weight pattern that was highly similar in CCLE and GDSC  
147 datasets only, capturing a metabolic transcriptional footprint that could only be found in cell line  
148 models (**Figure 1D**).

149

#### 150 **Metabolic TCs identify new genes potentially involved in metabolic processes**

151 Among the 'top' genes in every mTC —defined as the genes with an absolute weight > 3 in an mTC  
152 — many genes were member of the 608 metabolic gene sets (**Figure 2A** and **2B**, **Figure S4**).  
153 However, even for the mTCs with the absolute highest gene set enrichment scores for a metabolic  
154 gene set, at least 20% of top genes were not members of any of the metabolic gene sets. Because  
155 these genes were nevertheless part of an mTC, they may be potentially involved in the metabolic  
156 processes that showed enrichment.

157 For example, two strongly correlated mTCs, GEO mTC 54 and TCGA mTC 127 ( $|r_s| = 0.77$ ),  
158 both showed enrichment for glycolysis and the metabolic process of ADP (**Figure 2C** and **2D**, **Table**  
159 **S1**). GEO mTC 54 contained 262 top genes, of which 155 (59.1%) were also among the top genes  
160 in TCGA mTC 127. Both mTCs contained multiple top genes that are known targets of the HIF-1  
161 complex, and genes previously found to be part of a hypoxic signature (Benita et al., 2009; Ye et  
162 al., 2018). Several top genes of both GEO mTC 54 and TCGA mTC 127 (e.g., *FAM162A*, *C4orf3*,



163 *C4orf47*, and *ANKRD37*) are currently not a member of any of the 608 metabolic gene sets.  
164 However, these data suggest that these four genes are involved in glycolysis and are possibly  
165 hypoxia related. Indeed, several studies have indicated that at least *FAM162A* and *ANKRD37* are  
166 regulated by the transcription factor HIF-1 $\alpha$  (Cople et al., 2012; Sørensen et al., 2015).

167 As a second example, we investigated two highly correlated mTCs, GEO mTC 11 and TCGA  
168 mTC 141 ( $r_s = 0.68$ ), which showed enrichment for mitochondrial metabolic processes such as  
169 oxidative phosphorylation and the TCA cycle (Figure 2E and 2F, Table S1). GEO mTC 11 contained  
170 427 top genes, of which 270 (63.2%) were among the top genes in TCGA mTC 141. In these two  
171 mTCs, *C6orf136* and *IMMT* are top genes currently not assigned to any of the 608 metabolic gene  
172 sets. *C6orf136* and *IMMT* were previously identified in functional mitochondria' proteome  
173 profiles (Lefort et al., 2009). These results suggest that mTCs could assign metabolic functions to  
174 genes currently not members of known gene sets describing metabolic processes.

175

### 176 **Clustering sample activity scores of mTCs reveal multiple metabolic subtypes**

177 To investigate the heterogeneity of the metabolic transcriptome in a broad range of cancer  
178 subtypes, we hierarchically clustered the mixing matrix provided by consensus-ICA that contains  
179 the activity score of mTCs in every sample (Figure 3A, 3B and S5A, S5B). We selected the cutoff  
180 heights of the resulting dendrograms so that every cluster – referred to as metabolic subtype –  
181 contained at least 50 samples (Figure S5C and S5D). This clustering analysis divided the 21,592  
182 GEO samples into 67 metabolic subtypes with a median of 276 samples per subtype (range 54-  
183 1,252) and the 10,817 TCGA samples into 58 metabolic subtypes with a median of 167 samples

184 per subtype (range 52-536). For an overview of the metabolic subtypes and their sample  
185 composition, see [Figure S6](#), [S7](#), and [Table S2](#). Two types of patterns emerged.

186 The first pattern consisted of tumor types with samples that belong to one dominant  
187 metabolic subtype. For example, 102/133 (76.7%) of thyroid cancer samples in the GEO dataset  
188 fell into one metabolic subtype (subtype 27, [Figure S6](#), [Table S2](#)). Similarly, 446/509 (87.6%) of  
189 thyroid cancer samples in the TCGA dataset fell into metabolic subtype 43 ([Figure S7](#), [Table S2](#)).  
190 In line with the biology of thyroid tissue, both GEO metabolic subtype 27 and TCGA metabolic  
191 subtype 43 were characterized by high activity scores of mTCs enriched for thyroid hormone  
192 metabolism (GEO mTC 64 and TCGA mTC 87; [Table S1](#)).

193 The second pattern consisted of several tumor types that were not characterized by a few  
194 dominant metabolic subtypes. Instead, their samples were divided across multiple metabolic  
195 subtypes. For example, the 3,512 breast cancer samples in the GEO dataset were divided across  
196 33 metabolic subtypes ([Figure 3C](#)). These metabolic subtypes did not follow the breast cancer  
197 classification based on ER and HER2 receptor status ([Figure 3C](#) and [Table S2](#)). In line with this  
198 observation in the GEO dataset, the 1,100 breast cancer samples in the TCGA dataset were also  
199 scattered across 29 metabolic subtypes.

200 Several metabolic subtypes likewise contained samples from multiple tumor types. For  
201 example, GEO metabolic subtype 22 contained samples from 25 tumor types, including 42 ovarian  
202 cancer samples (22% of all ovarian cancer), 33 synovial sarcoma samples (97% of all synovial  
203 sarcoma), and 15 Ewing's sarcoma samples (58% of all Ewing's sarcoma; [Figure S6](#) and [Table S2](#)).  
204 GEO mTC 111 had the highest absolute median activity score in GEO metabolic subtype 22 ([Table](#)

205 **S2**). This mTC showed enrichment for the metabolism of nicotinamide adenine dinucleotide  
206 phosphate (NADP) and genes involved in the activation of an innate immune response (**Table S1**).

207 These results show that the classification of samples based on metabolic subtype yields  
208 different patterns than current classification systems, such as histotype or receptor status in  
209 breast cancer.

210

### 211 **Metabolic subtypes are associated with distant relapse-free survival in breast cancer**

212 We then investigated if metabolic subtypes could have clinical relevance. We had previously  
213 collected distant relapse-free survival (DRFS) data for 1,207 breast cancer samples (Bense et al.,  
214 2017). As mentioned earlier, breast cancer samples in the GEO dataset were divided across 33 of  
215 the 67 metabolic subtypes. Of these 33 subtypes, eight contained > 50 breast cancer samples with  
216 data available for DRFS: subtypes 15, 16, 20, 31, 32, 33, 34, and 35. We found that patients from  
217 breast cancer samples assigned to metabolic subtypes 16 and 33 showed the best and worst  
218 DRFS, respectively (P-value =  $1.08 \cdot 10^{-23}$ , Log-Rank test; **Figure 3D**). Distributions of standard  
219 prognostic factors within these eight metabolic subtypes are presented in **Table S3**. These results  
220 show that metabolic subtypes are associated with disease outcomes in breast cancer.

221

### 222 **The activity of mTCs is associated with drug sensitivity**

223 The CCLE and GDSC databases contain the sensitivities of cell lines to a large panel of drugs  
224 expressed as IC<sub>50</sub> values. With a threshold of  $|r_s| > 0.2$ , we observed associations between the  
225 activity scores of 61 CCLE mTCs, 90 GDSC mTCs, and the IC<sub>50</sub> values of 238 drugs (**Table S4**).

226 For example, in the GDSC dataset, an increase in activity score of GDSC mTC 3 was  
227 associated with a decrease in  $IC_{50}$  value of (i.e., increased sensitivity to) nutlin-3a ( $|r_s| = 0.42$ ;  
228 **Figure 4A** and **4B**). Nutlin-3a targets the p53 pathway through inhibition of MDM2. In line with  
229 this, GDSC mTC 3 showed strong enrichment for genes involved in the p53 pathway, with *MDM2*  
230 ranked as the second gene (**Table S1**). GDSC mTC 3 was strongly correlated with CCLE mTC 4 ( $|r_s| =$   
231  $0.84$ ), GEO mTC 57 ( $|r_s| = 0.79$ ), and TCGA mTC 110 ( $|r_s| = 0.74$ ) (**Figure 4D**), suggesting that this  
232 mTC was captured in cell line datasets as well as in the two patient-derived datasets. Indeed, an  
233 increase in activity score of CCLE mTC 4 was associated with a decrease in  $IC_{50}$  value of nutlin-3a  
234 as well ( $|r_s| = 0.25$ ; **Figure 4E**). Cell lines with wildtype *TP53* had a higher activity score of GDSC  
235 mTC 3 (**Figure 4C**). Also, cell lines with wildtype *TP53* had a higher activity score of CCLE mTC 4  
236 (**Figure 4F**).

237 In another example, the activity score of GDSC mTC 18 was found to be associated with the  
238  $IC_{50}$  values of 142 drugs ( $|r_s|$  range  $0.20 - 0.44$ ; **Figure 4G**). An increase in activity score of GDSC  
239 mTC 18 in a sample was associated with a higher  $IC_{50}$  value (i.e., increased resistance) for 135 of  
240 these drugs, including the widely used DNA synthesis-inhibiting antimetabolites 5-fluorouracil  
241 ( $|r_s| = 0.41$ ) and methotrexate ( $|r_s| = 0.38$ ). GDSC mTC 18 was strongly correlated with CCLE mTC  
242 28 ( $|r_s| = 0.84$ ), GEO mTC 35 ( $|r_s| = 0.59$ ), and TCGA mTC 58 ( $|r_s| = 0.55$ ), indicating that this mTC  
243 is also captured in both cell line datasets and the two patient-derived datasets. In line with this,  
244 CCLE mTC 28 was associated with a higher  $IC_{50}$  value (i.e., increased resistance) for 7 drugs  
245 including topoisomerase inhibitors topotecan ( $|r_s| = 0.35$ ) and irinotecan ( $|r_s| = 0.34$ ) (**Figure 4H**).  
246 All four of the highly correlated mTCs were enriched for genes involved in glutathione  
247 metabolism, cellular ketones and xenobiotics, and drug detoxification (**Table S1**). Specifically,

248 genes belonging to the aldo-keto reductase family 1 (AKR1) were among the top genes in these  
249 mTCs. Previous studies have reported a role for the glutathione system in resistance to irinotecan  
250 and 5-fluorouracil (Goto et al., 2002), and specifically the AKR1 family in resistance to e.g.  
251 methotrexate and irinotecan (Heibin et al., 2012; Matsunaga et al., 2020; Selga et al., 2008). In  
252 contrast, we observed that an increased activity score of GDSC mTC 18 was associated with a  
253 decrease in  $IC_{50}$  value (i.e., increased sensitivity) for only seven drugs ( $|r_s|$  range 0.20-0.41; **Figure**  
254 **4G**). The drug with the highest negative correlation was tanespimycin (17-AAG), an Hsp90  
255 inhibitor ( $|r_s| = 0.41$ ). An increased activity score of CCLE mTC 28 was associated with decrease  
256 in  $IC_{50}$  value for tanespimycin as well ( $|r_s| = 0.26$ ; **Figure 4H**). A direct link between the functions  
257 of glutathione and Hsp90 in oxidative stress has been suggested, as well as a relationship between  
258 tanespimycin sensitivity and *NQO1* expression, a gene coding for an enzyme reducing quinones  
259 to hydroquinones that is involved in detoxification pathways (Gaspar et al., 2009; Kim et al.,  
260 2015). In line with these findings, we found that the *NQO1* gene is present near the top of GDSC  
261 mTC 18, CCLE mTC 28, GEO mTC 35, and TCGA mTC 58.

262 As a final example, increased activity of GDSC mTC 108 was associated with a lower  $IC_{50}$   
263 value (i.e., increased sensitivity) to the MEK inhibitor trametinib ( $|r_s| = 0.48$ ) and a higher  $IC_{50}$   
264 value (i.e., increased resistance) to the histone deacetylase inhibitor vorinostat ( $|r_s| = 0.46$ ; **Figure**  
265 **4I** and **Table S4**). GDSC mTC 108 was correlated with CCLE mTC 97 ( $|r_s| = 0.32$ ). Consistent with  
266 the observation for GDSC mTC 108, we found that increased activity of CCLE mTC 97 was  
267 associated with a lower  $IC_{50}$  value (i.e., increased sensitivity) to the MEK inhibitor mirdametinib  
268 ( $|r_s| = 0.24$ ) and a higher  $IC_{50}$  value (i.e., increased resistance) to the histone deacetylase inhibitor  
269 panobinostat ( $|r_s| = 0.43$ ; **Figure 4J** and **Table S4**). This contrasting sensitivity for MEK and histone

270 deacetylase inhibition is in line with data from a study that used *BRAF*-mutated melanoma cell  
271 lines. The authors showed that cell lines with acquired resistance to MEK inhibitors subsequently  
272 became sensitive to treatment with the histone deacetylase inhibitor vorinostat (Wang et al.,  
273 2018). They concluded that the MEK-inhibitor resistance mechanism results from the activation  
274 (or reactivation) of MAPK cascades (Wagle et al., 2014). These findings are in line with our  
275 observation that both GDSC mTC 108 and CCLE mTC 97 were enriched for genes involved in the  
276 negative regulation of the MAPK cascade ([Table S1](#)). These examples demonstrate how mTCs can  
277 capture cross-dataset robust metabolic transcriptional footprints relevant for drug response.

278  
279 **The activity of mTCs is associated with the immune composition of the tumor**  
280 **microenvironment**

281 We determined the association between the activity of mTCs and the immune composition of the  
282 TME ([Table S5](#); see [Methods](#) for details). The immune composition for all samples in the GEO and  
283 TCGA dataset was determined by inferring fractions of 22 immune cell types using the CIBERSORT  
284 algorithm (Chen et al., 2018). We observed that the mTCs that were correlated with immune cell  
285 fractions could be divided into two groups. The first group included mTCs that were only identified  
286 in the patient-derived datasets. The second group contained mTCs that were identified in both  
287 the patient-derived and the cell line datasets.

288 For example, the activity score of GEO mTC 123 was associated with estimated fractions of  
289 CD8+ T cells ( $|r_s| = 0.40$ ),  $\gamma\delta$  T cells ( $|r_s| = 0.36$ ), activated CD4 memory T cells ( $|r_s| = 0.34$ ), and  
290 regulatory T cells ( $|r_s| = 0.32$ , [Figure 5A](#)). Belonging to the group of mTCs only identified in the  
291 patient-derived datasets, GEO mTC 123 was correlated highly with only TCGA mTC 34 ( $|r_s| = 0.28$ ).

292 In line with this, the activity score of TCGA mTC 34 was also associated with CD8+ T cell fractions  
293 ( $|r_s| = 0.58$ , **Figure 5B**). Both GEO mTC 123 and TCGA mTC 34 showed enrichment for genes  
294 involved in immunological processes such as leukocyte activation and cytokine metabolism and  
295 metabolic processes such as phosphatidylinositol and phospholipid metabolism (**Table S1**). The  
296 fact that both GEO mTC 123 and TCGA mTC 34 have no high correlation to mTCs in the cell line  
297 datasets suggests that they indeed capture transcriptional activity from non-cancerous cells in  
298 the immune TME.

299 GEO mTC 14 is illustrative of the second group of mTCs correlated with immune cell  
300 fractions and identified in both the patient-derived and the cell line datasets. The activity scores  
301 of GEO mTC 14 were correlated with the fractions of M1 macrophages ( $|r_s| = 0.65$ ) and M2  
302 macrophages ( $|r_s| = 0.59$ ; **Figure 5C**). GEO mTC 14 was correlated with TCGA mTC 70 ( $|r_s| = 0.44$ )  
303 and with CCLE mTC 124 ( $|r_s| = 0.47$ ), and GDSC mTC 33 ( $|r_s| = 0.33$ ). All four mTCs were enriched  
304 for genes involved in the metabolism of extracellular macromolecules (**Tables S1**). Genes coding  
305 for several types of collagens were among the top-ranked in these mTCs. This is in line with  
306 previous reports indicating that macrophages can function as collagen-producing cells in the TME  
307 (Schnoor et al., 2008; Vaage and Harlos, 1991). GEO mTC 14 and TCGA mTC 70 showed a high  
308 activity score in subsets of breast cancers, lung cancers, and sarcomas (**Figure S8A and S8B**). A  
309 negative activity score of GEO mTC 14 and TCGA mTC 70 was observed in a subset of  
310 hematological cancers and hematological cancer cell lines in both GDSC and CCLE mTCs. Because  
311 these mTCs were present in both patient data sets and cell line datasets, this indicates that the  
312 captured metabolic processes reflect tumor cell characteristics, which are associated with the  
313 fraction of macrophages present in the immune TME.

314 By correlating inferred immune cell fractions of samples with the activity scores of mTCs in  
315 samples, the relationship between the metabolic transcriptome and the various components of  
316 the immune TME could be assessed.

317

## 318 **DISCUSSION**

319 In the present study, we used consensus-Independent Component Analysis (c-ICA) in combination  
320 with Gene Set Enrichment Analysis (GSEA) to identify a broad set of robust metabolic  
321 Transcriptional Components (mTCs). With these mTCs, the transcriptional metabolic landscape  
322 was defined in patient-derived cancer tissue, cancer cell lines, and non-cancer samples. We also  
323 showed how this metabolic landscape could be used to generate hypotheses by exploring  
324 associations between metabolic processes and drug sensitivities, patient outcomes, and the  
325 composition of the immune tumor microenvironment.

326 We used the wealth of publicly available pan-cancer transcriptomic data to study human  
327 metabolism on a large scale. Previous work used either single-cell sequencing or bulk cell  
328 transcriptomic profiles to study metabolism in specific cancer types (Hakimi et al., 2016; Xiao et  
329 al., 2019), or pan-cancer, but based on a single platform (Cubuk et al., 2018; Rosario et al., 2018).  
330 Our present study differs from this previous work in two essential aspects. Firstly, we used c-ICA  
331 to segregate the average expression patterns of complex biopsies into statistically independent  
332 components (Biton et al., 2014; Kong et al., 2008). Previous studies investigated average gene  
333 expression profiles of complex biopsies and can therefore only distinguish the gene expression  
334 signature and regulation of more pronounced metabolic processes. With c-ICA it is possible to  
335 identify statistically independent regulatory factors and their transcriptional footprints and



336 distinguish both pronounced from more subtle metabolic processes. This enabled us to determine  
337 the association of both pronounced and subtle metabolic processes with, e.g., patient outcome  
338 and the composition of the TME in a complex biopsy. Secondly, the present study is the most  
339 extensive transcriptional analysis of metabolism and the first that integrated patient-derived data  
340 from GEO and TCGA with cell line data from CCLE and GDSC. The samples in these four datasets  
341 were obtained from a multitude of independently constructed, publicly available cohorts, and the  
342 expression profiles were generated using different technologies (microarray or RNA-sequencing).  
343 This integrated dataset enabled us to demonstrate that most of the identified mTCs were robust  
344 and independent from dataset-specific and platform-specific characteristics. The observed  
345 overlap, or lack of overlap, between patient-derived and cell line-derived mTCs can help  
346 researchers understand how metabolic genes and pathways identified in cell lines can be  
347 translated to a patient tissue context and vice versa.

348 Furthermore, we hypothesize that metabolic processes identified only in patient-derived  
349 samples and not in cell line samples are more likely to originate from cells in the tumor  
350 microenvironment. These microenvironment-specific metabolic processes will not be captured  
351 by mTCs in cell line datasets. This is because bulk expression profiles of cancer cell line samples  
352 do not harbor transcriptional footprints associated with non-cancerous cells.

353 The metabolic landscape enabled us to classify samples based on the transcriptional activity  
354 of metabolic processes, resulting in metabolic subtypes. However, this metabolic classification  
355 was often not in full alignment with current classification systems based on aspects such as  
356 histotype. We demonstrated that metabolic subtypes were associated with disease outcomes for  
357 breast cancer, emphasizing the relevance of metabolic pathway-based classification in cancer.

358 The heterogeneity (metabolic and otherwise) within and between cancer types is well recognized,  
359 and alternative subtyping based on metabolite profiling and the metabolic transcriptome have  
360 been proposed before (Reznik et al., 2018; Rosario et al., 2018; Tang et al., 2014). More  
361 specifically, clinically significant metabolism-based classifications have been proposed in breast  
362 cancer (Cappelletti et al., 2017; Serrano-Carbajal et al., 2020; Wang et al., 2019). The most active  
363 mTCs in a metabolic subtype relevant to disease outcome could thus be used to generate new  
364 hypotheses for treatment targets. Additionally, the association between the activity of mTCs and  
365 drug sensitivity could help to design these future therapeutic strategies.

366 Metabolic heterogeneity and plasticity are not limited to cancer cells but are also applicable  
367 to the immune cells present in the tumor micro-environment. Immune cells undergo metabolic  
368 changes when activated, and their metabolic status can overlap with the metabolic state of cancer  
369 cells (Andrejeva and Rathmell, 2017). For example, the Warburg effect is classically seen as an  
370 example of a metabolic transformation in cancer cells. However, it is also observed in activated T  
371 cells (Bantug et al., 2018; Patel and Powell, 2017; Wang and Green, 2012). In the context of  
372 metabolism, this complex interplay between cancer cells and immune cells present in the micro-  
373 environment gives a new dimension to the use of drugs that target metabolic processes  
374 (O'Sullivan et al., 2019; Patel et al., 2019). For instance, inhibiting glutamine metabolism has been  
375 shown to inhibit tumor growth and increase the sensitivity of triple-negative breast cancers to  
376 immune checkpoint blockade (Oh et al., 2020), and reducing oxidative stress has been shown to  
377 prevent the generation of tumor-associated macrophages (Zhang et al., 2013). Furthermore,  
378 modulating metabolism in T cells from glycolytic to an OXPHOS-weighted profile has been shown  
379 to improve CAR T cell immunotherapy (Fraiatta et al., 2018; O'Sullivan and Pearce, 2015; Sukumar

380 et al., 2017). Our transcriptional metabolic landscape can contribute to knowledge on  
381 immunometabolism and, combined with the association of mTCs with drug sensitivity, also  
382 contribute to the formulation of new hypotheses on how to metabolically engage the tumor and  
383 its immune microenvironment, thus improving the response to immunotherapy.

384 Further research to gain an even more comprehensive understanding of metabolism in  
385 patient-derived cancer samples should ideally integrate genomics, transcriptomics, proteomics,  
386 and metabolomics to capture the complexity of metabolic processes within cancer cells (Buescher  
387 and Driggers, 2016). Recent initiatives are the Recon1, Edinburgh Human Metabolic Network  
388 (EHMN), and Human1 projects (Brunk et al., 2018; Ma et al., 2007; Robinson et al., 2020).  
389 However, challenges for these initiatives lie in the limited set of samples for which these high-  
390 dimensional multi-omics features are available and the use of predominantly cell line samples.  
391 Paired datasets on a large scale are needed to unleash the full potential of such an integrated  
392 approach.

393 To facilitate the use of our transcriptional metabolic landscape, we have provided access  
394 to all data via a web portal ([www.themetaboliclandscapeofcancer.com](http://www.themetaboliclandscapeofcancer.com)). In this portal, users can  
395 explore genes, metabolic processes, and tissue types of interest. We invite researchers and  
396 clinicians to use this portal as a guide to the metabolic transcriptome in cancer or as a starting  
397 point for further research into cancer metabolism.

398

## 399 **MATERIALS AND METHODS**

### 400 **Resource availability**

401 Further information and requests for resources should be directed to the Lead Contact, Rudolf  
402 S.N. Fehrmann (r.s.n.fehrmann@umcg.nl).

403  
404 **Data and code availability**  
405 Data can be explored at <http://themetaboliclandscapeofcancer.com>. Code is available at  
406 [github.com/MetabolicLandscape/](https://github.com/MetabolicLandscape/)

#### 407 408 **Data acquisition**

409 A detailed description of the data acquisition of the four datasets has been described previously  
410 (Bhattacharya et al., 2020). In short, the GEO dataset contained microarray expression data  
411 generated with Affymetrix HG-U133 Plus 2.0 (accession number GPL570). A two-step search  
412 strategy was applied to select healthy or cancer tissue samples – automatic filtering on keywords  
413 followed by manual curation. Samples from cell lines, cultured human biopsies, and animal-  
414 derived tissue were excluded. The TCGA dataset contained the preprocessed and normalized level  
415 3 RNA-seq (version 2) data for 34 cancer datasets available at the Broad GDAC Firehose portal  
416 (<https://gdac.broadinstitute.org/>). The profiles in the CCLE dataset were generated with  
417 Affymetrix HG-U133 Plus 2.0. The CCLE project conducted a detailed genetic characterization of  
418 a large panel of human cancer cell lines. Expression data within the CCLE project was generated  
419 with Affymetrix HG-U133 Plus 2.0. The GDSC dataset contained expression data generated with  
420 Affymetrix HG-U219. The GDSC project aims to identify molecular features of cancer that predict  
421 response to anti-cancer drugs.

422

## 423 **Preprocessing, normalization, and quality control**

424 A more detailed description has been provided previously (Bhattacharya et al., 2020). In short,  
425 preprocessing and aggregation of raw expression data (CEL files) within the GEO dataset, CCLE  
426 dataset, and GDSC dataset was performed according to the robust multi-array average algorithm  
427 RMAExpress (version 1.1.0). Quality control was performed on the GEO dataset, CCLE dataset,  
428 and GDSC dataset separately with principal component analysis (PCA). Duplicate CEL files were  
429 removed by generating a message-digest algorithm 5 (MD5) hash for each CEL file. The expression  
430 levels for each probeset (in the GEO dataset, CCLE dataset, and GDSC dataset) or gene (in the  
431 TCGA dataset) were standardized to a mean of zero and variance of one to remove probeset-  
432 specific or gene-specific variability in the datasets.

433

## 434 **Consensus independent component analysis**

435 We used consensus independent component analysis (c-ICA) to segregate the average gene  
436 expression patterns of complex biopsies into statistically independent transcriptomic  
437 components. The input gene expression dataset was preprocessed using whitening  
438 transformation, making all profiles uncorrelated and giving them a variance of one. Next, ICA was  
439 performed on the whitened dataset using the FastICA algorithm, resulting in the extraction of  
440 estimated sources (ESs) and a mixing matrix (MM). The number of principal components which  
441 captured 90% of the variance seen in the whitened dataset was chosen as the number of ESs to  
442 extract. Each ES contains all genes with a specific weight. This weight represents the direction and  
443 magnitude of the influence of an underlying transcriptional regulatory process on that gene  
444 expression level. The MM contains the coefficients of ESs in each sample, representing the activity

445 of an ES in the corresponding sample. We performed 25 ICA runs with different random  
446 initialization weight factors to assess the robustness of the ESs and exclude ICA results derived  
447 from convergence at local solutions. ESs extracted from these runs were clustered together if the  
448 absolute value of the Pearson correlation between them was  $> 0.9$ . We calculated consensus  
449 transcriptional components (TCs) by taking the mean vector of weights in the co-clustering ESs.  
450 We considered a consensus TC robust when clustering included individual TCs from  $> 50\%$  of the  
451 runs. The consensus TCs, in combination with the original input expression profiles, were used to  
452 obtain the consensus mixing matrix (MM) with the individual activity scores of the consensus TCs  
453 in each sample via matrix inversion.

454

#### 455 **Identification of transcriptional components enriched for metabolic processes**

456 First, we selected gene sets defining metabolic processes from five gene set collections obtained  
457 from the Molecular Signatures Database (MSigDb version 6.1); BioCarta, Gene Ontology –  
458 Biological Process (GO-BP), Gene Ontology – Molecular Function (GO-MF), KEGG, and Reactome.  
459 From BioCarta, gene sets were selected manually based on their title. Selected gene sets  
460 described metabolic pathways or regulatory pathways regulated by metabolic processes. From  
461 GO-BP, all gene sets were selected that contained the motif 'METABOLIC\_PROCESS' in the title.  
462 Also, gene sets that included the name of a metabolite or class of metabolites combined with the  
463 motif '\_TRANSPORT' in the title were selected.

464 Furthermore, gene sets not containing these title motifs but associated with (cancer)  
465 metabolism were manually selected based on metabolic pathway names. From GO-MF, all gene  
466 sets were selected that included the name of a metabolite or class of metabolites combined with

467 the motif '\_ACTIVITY' or '\_BINDING' in the title. From KEGG, all gene set containing the motif  
468 "METABOLISM" or "BIOSYNTHESIS" in the title in combination with the name of a known  
469 metabolic route was selected. Furthermore, gene sets concerning metabolism-related regulatory  
470 pathways were chosen based on their titles. From Reactome, all gene set that falls within the  
471 hierarchy of the "Metabolism"-pathways were selected (see [reactome.org/PathwayBrowser](http://reactome.org/PathwayBrowser)).  
472 The metabolism of Abacavir was not included. A complete list of all metabolic gene sets selected  
473 is presented in [Table S1](#).

474 To identify transcriptional components enriched for metabolic processes, gene set  
475 enrichment analysis (GSEA) was performed using the selected metabolic gene sets. Enrichment  
476 of each metabolic gene set was tested according to the two-sample Welch's t-test for unequal  
477 variance between the metabolic set of genes under investigation versus the set of genes that was  
478 not under investigation. To compare gene sets of different sizes, we transformed Welch's t  
479 statistic to a Z-score.

480 A biological process can be captured by multiple gene sets in several gene set collections.  
481 Therefore, it is possible that within the selection of 608 gene sets, multiple gene sets describe the  
482 same metabolic process. These will then show a similar pattern in gene set enrichment scores of  
483 transcriptional components. To reduce this redundancy, consensus clustering was performed  
484 gene set-wise on the GSEA data for the GEO, TCGA, CCLE, and GDSC datasets. Consensus  
485 clustering was performed using the ConsensusClusterPlus-package (v1.51.1) within R, using the  
486 default hierarchical clustering algorithm and Pearson correlation distance, a maximum amount of  
487 clusters (maxK) of 150, 2000 resamplings (reps), with 80% row and 80% column resampling  
488 (pFeature and pItem, respectively). The optimal number of clusters ( $k$ ) was determined as the  $k$

489 at which the relative change in area under the CDF curve was minimized ( $<0.01$ ). This resulted in  
490 a  $k$  of 50 clusters (**Figure S1**).

491 The 50 clusters of gene sets were subsequently used to select transcriptional components  
492 based on their enrichment for metabolic processes. Per gene set cluster, the three TCs with the  
493 highest absolute enrichment score for any gene set in that cluster were selected. In addition to  
494 this, the three TCs with the highest absolute mean enrichment score for all gene sets in that  
495 cluster were selected. The selected TCs were then referred to as metabolic Transcriptional  
496 Components (mTCs). In the end, four different sets of mTCs were identified (GEO mTCs, TCGA  
497 mTCs, CCLE mTCs, GDSC mTCs)

498

#### 499 **Approximation of batch effects and tissue specificity of mTCs**

500 First, the explained variance of every component from the perspective of a sample (as a  
501 percentage) was estimated using the squares of the mixing matrix weights of a sample divided by  
502 the sum of the squares. This percentage explained variance matrix for samples was then  
503 summarized into a mean explained variance for studies by summarizing samples belonging to the  
504 same study (through the annotated GEO series accession number or TCGA tissue source site  
505 code). In the figures, only the highest explained variance available for any study is given. Similarly,  
506 tissue specificity was approximated by calculating the mean explained variance for tissue types  
507 by summarizing samples belonging to the same tissue subtype.

508

#### 509 **Pair-wise gene-level correlations of mTCs between datasets**



510 To correlate two mTCs of different datasets, the subset of genes with an absolute weight  
511 higher than 3 in two mTCs was selected. Then, the overlap between these two sets of top genes  
512 was determined. Using the gene weights of the overlapping genes in both mTCs, pair-wise  
513 correlations were calculated. Specifically, Spearman correlations were performed in R using the  
514 *pspearman*-package (v0.3-0) in R, with a t-distribution approximation to determine the P-value.  
515 As the number of genes with an absolute weight above 3 was different for every mTC, the size of  
516 the overlap in genes between two mTCs changed. The significance of the Spearman correlation  
517 found between two mTCs, therefore, was dependent on the number of overlapping genes. Hence,  
518 the significance of the found size of the overlap in genes between mTCs should be determined.  
519 To this end, for a pair of mTCs, two sets of random gene identifiers were selected from all possible  
520 gene identifiers. The amount of randomly selected genes per set corresponded to the number of  
521 genes with a weight >3 in both mTCs. Subsequently, the overlap in gene identifiers between the  
522 two random sets of gene identifiers was determined. By repeating this 10,000 times, the chance  
523 of finding a given overlap between two sets of genes could be determined.

524 Ultimately, mTCs were said to be concordant when their correlation was > 0.5, with a P-  
525 value < 0.05, given that there was a significant overlap in genes (P-value of overlap <0.05).

526  
527 **Clustering of Metabolic Transcriptional Components, Genes and Samples**

528 For each of the four datasets, the mixing matrix (MM) containing activity scores was clustered  
529 both on samples and mTCs. To this end, hierarchical clustering was performed using ward-D2 as  
530 the method and 1-cor(data) as the distance function. Heatmaps were created using R's *gplots*  
531 package (v3.0.1). Based on the MM clustering for every dataset, metabolic subtypes were

532 defined. To determine the sizes of clusters of samples that would make up a metabolic subtype,  
533 the dendrograms resulting from hierarchical clustering of the samples were systematically cut at  
534 dissimilarity values ranging from 0.0 to 8.0 with increments of 0.2. For each of the four datasets  
535 GEO, TCGA, CCLE, and GDSC, the cutoff was chosen at the dendrogram height at which the  
536 smallest cluster reached a size of 50 samples (**Figure S6**).

537  
538 **CIBERSORT**  
539 Relative and absolute immune fractions for 22 immune cell types were estimated for all samples  
540 in GEO and TCGA datasets using the CIBERSORT algorithm running with default parameters, 1000  
541 permutations, and selecting 'absolute nosumto1' as output. This output was then associated with  
542 the activity of the mTCs through spearman correlation.

543  
544 **Statistical Analyses**  
545 Univariate OS on breast cancer samples from GEO and univariate DRFS analyses on melanoma  
546 samples from TCGA were performed using a cox regression model through *survminer* (v0.4.3) and  
547 *survival* (v2.43-3) packages in R. Confidence intervals were set at 0.95. Significance was tested  
548 through the Log Rank test. Scripts are available at [github.com/MetabolicLandscape/](https://github.com/MetabolicLandscape/). Pearson  
549 correlations were performed in R using the *cor.test()*-function from the *stats* package (v.3.5.1).  
550 Spearman correlations and the corresponding exact P-values were calculated using the  
551 *pspearman*-package (v0.3-0) in R, with a t-distribution as an approximation.

552  
553 **ACKNOWLEDGMENTS**

554 This research was supported by grants awarded by the Young Academy Groningen (to R.S.N.F.,  
555 M.T.C.W., and V.C.L.), the Netherlands Organization for Scientific Research (NWO-VENI grant 916-  
556 16025 to R.S.N.F), the Dutch Cancer Society (RUG 2013-5960 to R.S.N.F, RUG 2014-6691 to S.J.,  
557 Young Investigator Grant 10913/2017-1 to M.J.), the European Union through the Rosalind  
558 Franklin Fellowship (COFUND project 600211 to M.T.C.W.), and a grant from the Hanarth Fonds,  
559 The Netherlands (2019N1552 to R.S.N.F).

560

#### 561 **AUTHOR CONTRIBUTIONS**

562 R.S.N.F, V.C.L., C.G.U, and A.B collected and compiled the data. R.S.N.F., V.C.L., and C.G.U  
563 performed data analyses. All authors contributed to the data interpretation, writing of the  
564 manuscript, and the final decision to submit the manuscript.

565

#### 566 **COMPETING INTERESTS**

567 All authors declare no competing interests.

568 **REFERENCES**

- 569 • Andrejeva, G., and Rathmell, J.C. (2017). Similarities and Distinctions of Cancer and Immune  
570 Metabolism in Inflammation and Tumors. *Cell Metab* 26, 49-70.
- 571 • Bantug, G.R., Galluzzi, L., Kroemer, G., and Hess, C. (2018). The spectrum of T cell metabolism  
572 in health and disease. *Nat Rev Immunol* 18, 19-34.
- 573 • Barret, T., Wilhite, S.E., Ledoux, P., Evangelista, C., Kim, I.F., Tomashevsky, M., Marshall, K.A.,  
574 Phillippy, K.H., Sherman, P.M., Holko, M., et al. (2013). NCBI GEO: archive for functional  
575 genomics data sets - update. *Nucleic Acids Research* 41, D991-D995.
- 576 • Barretina, J., Caponigro, G., Stransky, N., K., V., Margolin, A.A., Kim, S., Wilson, C.J., Lehár, J.,  
577 Kryukov, G.V., Sonkin, D., et al. (2012). The Cancer Cell Line Encyclopedia enables predictive  
578 modelling of anticancer drug sensitivity. *Nature* 483, 603-607.
- 579 • Ben-David, U., Siranosian, B., Ha, G., Tang, H., Oren, Y., Hinohara, K., Strathdee, C.A.,  
580 Dempster, J., Lyons, N.J., Burns, R., et al. (2018). Genetic and transcriptional evolution alters  
581 cancer cell line drug response. *Nature* 560, 325-330.
- 582 • Benita, Y., Kikuchi, H., Smith, A.D., Zhang, M.Q., Chung, D.C., and Xavier, R.J. (2009). An  
583 integrative genomics approach identifies Hypoxia Inducible Factor-1 (HIF-1)-target genes that  
584 form the core response to hypoxia. *Nucleic Acids Research* 37, 4587-4602.
- 585 • Bense, R.D., Sotiriou, C., Piccart-Gebhart, M.J., Haanen, J., van Vugt, M., de Vries, E.G.E.,  
586 Schroder, C.P., and Fehrmann, R.S.N. (2017). Relevance of Tumor-Infiltrating Immune Cell  
587 Composition and Functionality for Disease Outcome in Breast Cancer. *J Natl Cancer Inst* 109.

- 588 • Bhattacharya, A., Bense, R.D., Urzua-Traslavina, C.G., de Vries, E.G.E., van Vugt, M., and  
589 Fehrmann, R.S.N. (2020). Transcriptional effects of copy number alterations in a large set of  
590 human cancers. *Nat Commun* *11*, 715.
- 591 • Biton, A., Bernard-Pierrot, I., Lou, Y., Krucker, C., Chapeaublanc, E., Rubio-Perez, C., Lopez-  
592 Bigas, N., Kamoun, A., Neuzillet, Y., Gestraud, P., et al. (2014). Independent component  
593 analysis uncovers the landscape of the bladder tumor transcriptome and reveals insights into  
594 luminal and basal subtypes. *Cell Rep* *9*, 1235-1245.
- 595 • Brunk, E., Sahoo, S., Zielinski, D.C., Altunkaya, A., Drager, A., Mih, N., Gatto, F., Nilsson, A.,  
596 Gonzalez, G.A.P., Aurich, M.K., et al. (2018). Recon3D enables a three-dimensional view of  
597 gene variation in human metabolism. *Nat Biotechnol* *36*, 272-+.
- 598 • Buescher, J.M., and Driggers, E.M. (2016). Integration of omics: more than the sum of its parts.  
599 *Cancer Metab* *4*, 4.
- 600 • Cappelletti, V., Iorio, E., Miodini, P., Silvestri, M., Dugo, M., and Daidone, M.G. (2017).  
601 Metabolic Footprints and Molecular Subtypes in Breast Cancer. *Dis Markers* *2017*, 7687851.
- 602 • Chen, B., Khodadoust, M.S., Liu, C.L., Newman, A.M., and Alizadeh, A.A. (2018). Profiling  
603 Tumor Infiltrating Immune Cells with CIBERSORT. *Methods Mol Biol* *1711*, 243-259.
- 604 • Copple, B.L., Bai, S., Burgoon, L.D., and Moon, J.O.K. (2012). Hypoxia-inducible Factor-1 $\alpha$   
605 Regulates Expression of Genes in Hypoxic Hepatic Stellate Cells Important for Collagen  
606 Deposition and Angiogenesis. *Liver int.* *31*, 230-244.
- 607 • Cubuk, C., Hidalgo, M.R., Amadoz, A., Pujana, M.A., Mateo, F., Herranz, C., Carbonell-  
608 Caballero, J., and Dopazo, J. (2018). Gene Expression Integration into Pathway Modules  
609 Reveals a Pan-Cancer Metabolic Landscape. *Cancer Res* *78*, 6059-6072.

- 610 • Desvergne, B., Michalik, L., and Wahli, W. (2006). Transcriptional Regulation of Metabolism.  
611 *Physiol Rev* 86, 465-514.
- 612 • Fraietta, J.A., Lacey, S.F., Orlando, E.J., Pruteanu-Malinici, I., Gohil, M., Lundh, S., Boesteanu,  
613 A.C., Wang, Y., O'Connor, R.S., Hwang, W.T., et al. (2018). Determinants of response and  
614 resistance to CD19 chimeric antigen receptor (CAR) T cell therapy of chronic lymphocytic  
615 leukemia. *Nat Med* 24, 563-571.
- 616 • Gaspar, N., Sharp, S.Y., Pacey, S., Jones, C., Walton, M., Vassal, G., Eccles, S., Pearson, A., and  
617 Workman, P. (2009). Acquired resistance to 17-allylamino-17-demethoxygeldanamycin (17-  
618 AAG, tanespimycin) in glioblastoma cells. *Cancer Res* 69, 1966-1975.
- 619 • Ghaffari, P., Mardinoglu, A., and Nielsen, J. (2015). Cancer Metabolism: A Modeling  
620 Perspective. *Front Physiol* 6, 382.
- 621 • Goto, S., Kamada, K., Soh, Y., Ihara, Y., and Kondo, T. (2002). Significance of nuclear  
622 glutathione S-transferase pi in resistance to anti-cancer drugs. *Jpn J Cancer Res* 93, 1047-1056.
- 623 • Hakimi, A.A., Reznik, E., Lee, C.H., Creighton, C.J., Brannon, A.R., Luna, A., Aksoy, B.A., Liu,  
624 E.M., Shen, R., Lee, W., et al. (2016). An Integrated Metabolic Atlas of Clear Cell Renal Cell  
625 Carcinoma. *Cancer Cell* 29, 104-116.
- 626 • Hanahan, D., and Weinberg, R.A. (2011). Hallmarks of Cancer: The Next Generation. *Cell* 144,  
627 646-674.
- 628 • Heibein, A.D., Guo, B., Sprowl, J.A., Maclean, D.A., and Parissenti, A.M. (2012). Role of aldo-  
629 keto reductases and other doxorubicin pharmacokinetic genes in doxorubicin resistance, DNA  
630 binding, and subcellular localization. *BMC Cancer* 12, 381.

- 631 • Huang, M., Shen, A.J., Ding, J., and Geng, M.Y. (2014). Molecularly targeted cancer therapy:  
632 some lessons from the past decade. *Trends Pharmacol Sci* 35, 41-50.
- 633 • Hynds, R.E., Vladimirov, E., and Janes, S.M. (2018). The Secret Lives of Cancer Cell Lines. *Dis*  
634 *Model Mech* 11, 1-5.
- 635 • Jiang, G.L., Zhang, S.J., Yazdanparast, A., Li, M., Pawar, A.V., Liu, Y.L., Inavolu, S.M., and Cheng,  
636 L.J. (2016). Comprehensive comparison of molecular portraits between cell lines and tumors  
637 in breast cancer. *Bmc Genomics* 17.
- 638 • Kim, Y.S., Seo, H.W., and Jung, G. (2015). Reactive oxygen species promote heat shock protein  
639 90-mediated HBV capsid assembly. *Biochem Biophys Res Commun* 457, 328-333.
- 640 • Kong, W., Vanderburg, C.R., Gunshin, H., Rogers, J.T., and Huang, X. (2008). A review of  
641 independent component analysis application to microarray gene expression data.  
642 *Biotechniques* 45, 501-520.
- 643 • Le Bourgeois, T., Strauss, L., Aksoylar, H.-I., Daneshmandi, S., Seth, P., Patsoukis, N., and  
644 Boussiotis, V.A. (2018). Targeting T Cell Metabolism for Improvement of Cancer  
645 Immunotherapy. *Frontiers in Oncology* 8, 1-17.
- 646 • Lefort, N., Yi, Z., Bowen, B., Glancy, B., De Filippis, E.A., Mapes, R., Hwang, H., Flynn, C.R.,  
647 Willis, W.T., Civitarese, A., et al. (2009). Proteome profile of functional mitochondria from  
648 human skeletal muscle using one-dimensional gel electrophoresis and HPLC-ESI-MS/MS. *J*  
649 *Proteomics* 72, 1046-1060.
- 650 • Ma, H., Sorokin, A., Mazein, A., Selkov, A., Selkov, E., Demin, O., and Goryanin, I. (2007). The  
651 Edinburgh human metabolic network reconstruction and its functional analysis. *Mol Syst Biol*  
652 3, 135.

- 653 • Martin-Martin, N., Carracedo, A., and Torrano, V. (2018). Metabolism and Transcription in  
654 Cancer: Merging Two Classic Tales. *Frontiers in Cell and Developmental Biology* 5, 1-8.
- 655 • Matsunaga, T., Okumura, N., Saito, H., Morikawa, Y., Suenami, K., Hisamatsu, A., Endo, S., and  
656 Ikari, A. (2020). Significance of aldo-keto reductase 1C3 and ATP-binding cassette transporter  
657 B1 in gain of irinotecan resistance in colon cancer cells. *Chem Biol Interact* 332, 109295.
- 658 • O'Sullivan, D., and Pearce, E.L. (2015). Targeting T cell metabolism for therapy. *Trends*  
659 *Immunol* 36, 71-80.
- 660 • O'Sullivan, D., Sanin, D.E., Pearce, E.J., and Pearce, E.L. (2019). Metabolic interventions in the  
661 immune response to cancer. *Nat Rev Immunol* 19, 324-335.
- 662 • Oh, M.H., Sun, I.H., Zhao, L., Leone, R.D., Sun, I.M., Xu, W., Collins, S.L., Tam, A.J., Blosser, R.L.,  
663 Patel, C.H., et al. (2020). Targeting glutamine metabolism enhances tumor specific immunity  
664 by modulating suppressive myeloid cells. *J Clin Invest*.
- 665 • Patel, C.H., Leone, R.D., Horton, M.R., and Powell, J.D. (2019). Targeting metabolism to  
666 regulate immune responses in autoimmunity and cancer. *Nat Rev Drug Discov* 18, 669-688.
- 667 • Patel, C.H., and Powell, J.D. (2017). Targeting T cell metabolism to regulate T cell activation,  
668 differentiation and function in disease. *Curr Opin Immunol* 46, 82-88.
- 669 • Pavlova, N.N., and Thompson, C.B. (2016). The Emerging Hallmarks of Cancer Metabolism.  
670 *Cell Metab* 23, 27-47.
- 671 • Peng, X., Chen, Z., Farshidfar, F., Xu, X., Lorenzi, P.L., Wang, Y., Cheng, F., Tan, L., Mojumdar,  
672 K., Du, D., et al. (2018). Molecular Characterization and Clinical Relevance of Metabolic  
673 Expression Subtypes in Human Cancers. *Cell Reports* 23, 255-269.

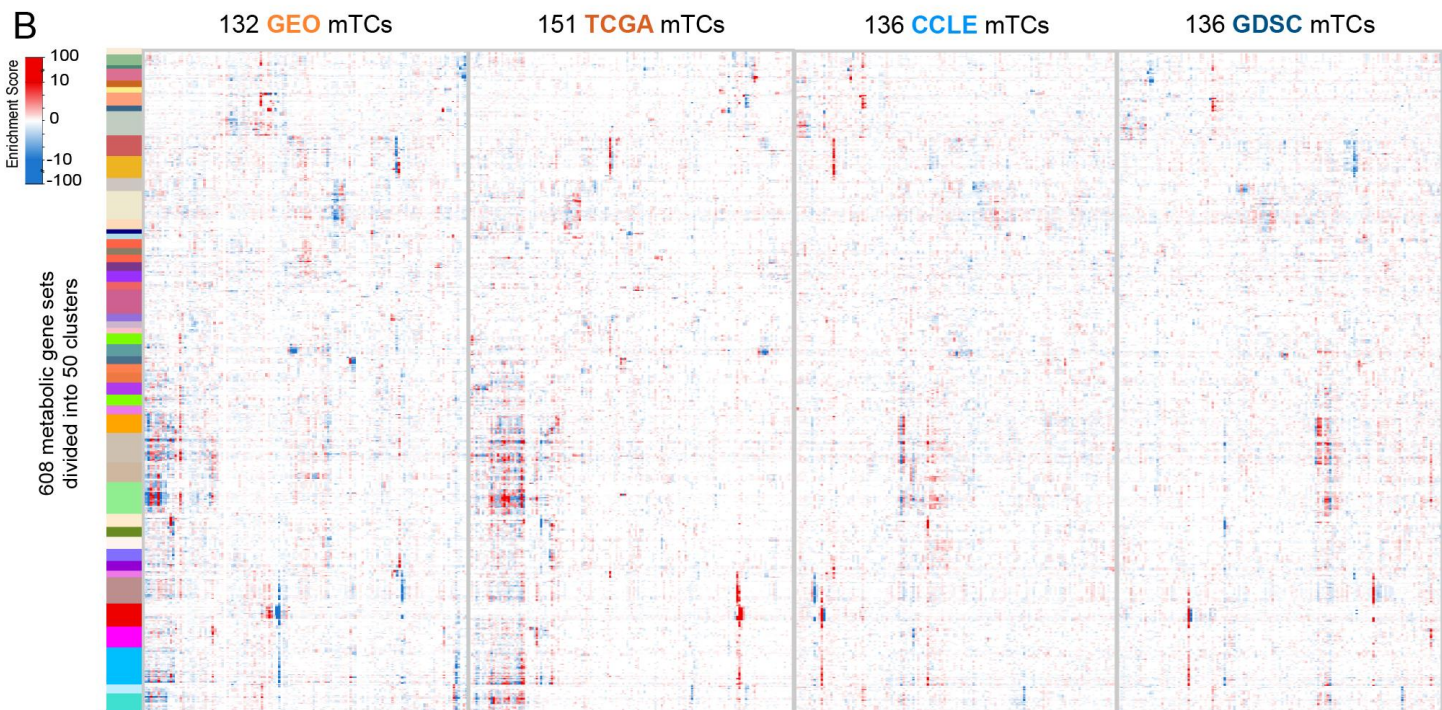
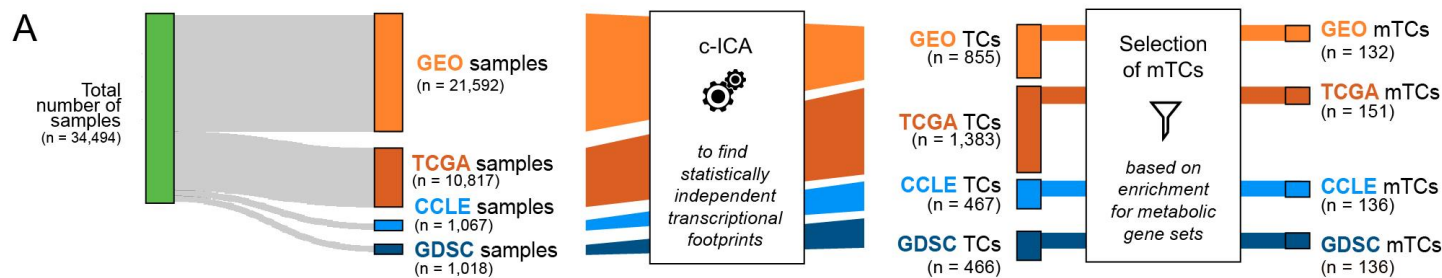


- 674 • Quail, D.F., and Joyce, J.A. (2013). Microenvironmental regulation of tumor progression and  
675 metastasis. *Nat Med* *19*, 1423-1437.
- 676 • Reznik, E., Luna, A., Aksoy, B.A., Liu, E.M., La, K., Ostrovskaya, I., Creighton, C.J., Hakimi, A.A.,  
677 and Sander, C. (2018). A Landscape of Metabolic Variation across Tumor Types. *Cell Syst* *6*,  
678 301-313 e303.
- 679 • Robinson, J.L., Kocabas, P., Wang, H., Cholley, P.E., Cook, D., Nilsson, A., Anton, M., Ferreira,  
680 R., Domenzain, I., Billa, V., et al. (2020). An atlas of human metabolism. *Science Signaling* *13*,  
681 eeaz1482.
- 682 • Rosario, S.R., Long, M.D., Affronti, H.C., Rowsam, A.M., Eng, K.H., and Smiraglia, D.J. (2018).  
683 Pan-cancer analysis of transcriptional metabolic dysregulation using The Cancer Genome  
684 Atlas. *Nat Commun* *9*, 5330.
- 685 • Schnoor, M., Cullen, P., Lorkowski, J., Stolle, K., Robenek, H., Troyer, D., Rauterberg, J., and  
686 Lorkowski, S. (2008). Production of type VI collagen by human macrophages: a new dimension  
687 in macrophage functional heterogeneity. *J Immunol* *180*, 5707-5719.
- 688 • Selga, E., Noe, V., and Ciudad, C.J. (2008). Transcriptional regulation of aldo-keto reductase  
689 1C1 in HT29 human colon cancer cells resistant to methotrexate: role in the cell cycle and  
690 apoptosis. *Biochem Pharmacol* *75*, 414-426.
- 691 • Serrano-Carbajal, E.A., Espinal-Enriquez, J., and Hernandez-Lemus, E. (2020). Targeting  
692 Metabolic Deregulation Landscapes in Breast Cancer Subtypes. *Front Oncol* *10*, 97.
- 693 • Shah, R., and Chen, S. (2020). Metabolic Signaling Cascades Prompted by Glutaminolysis in  
694 Cancer. *Cancers (Basel)* *12*.

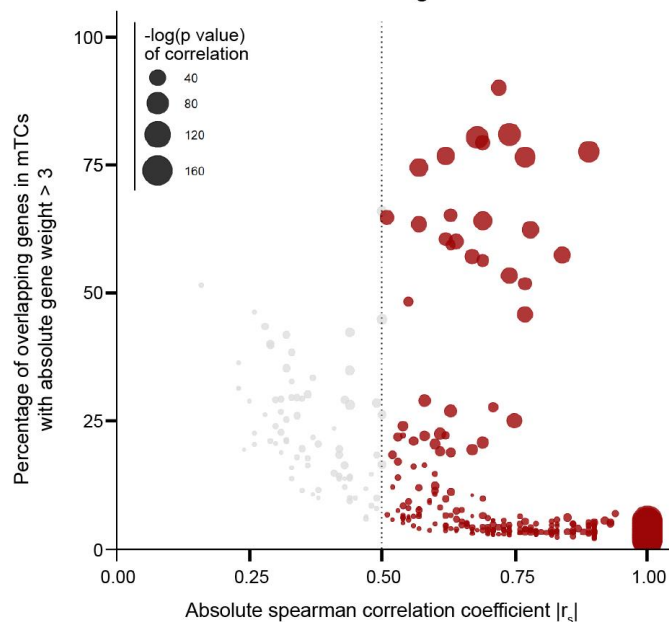
- 695 • Sørensen, B.S., Knudsen, A., Wittrup, C.F., Nielsen, S., Aggerholm-Pedersen, N., Busk, M.,  
696 Horsman, M., Høyer, M., Bouchelouche, P.N., Overgaard, J., et al. (2015). The usability of a  
697 15-gene hypoxia classifier as a universal hypoxia profile in various cancer cell types.  
698 *Radiotherapy and Oncology* *116*, 346-351.
- 699 • Sukumar, M., Kishton, R.J., and Restifo, N.P. (2017). Metabolic reprogramming of anti-tumor  
700 immunity. *Curr Opin Immunol* *46*, 14-22.
- 701 • Tang, X., Lin, C.C., Spasojevic, I., Iversen, E.S., Chi, J.T., and Marks, J.R. (2014). A joint analysis  
702 of metabolomics and genetics of breast cancer. *Breast Cancer Res* *16*, 415.
- 703 • Tang, Z., Xu, Z., Zhu, X., and Zhang, J. (2021). New insights into molecules and pathways of  
704 cancer metabolism and therapeutic implications. *Cancer Commun (Lond)* *41*, 16-36.
- 705 • Vaage, J., and Harlos, J.P. (1991). Collagen production by macrophages in tumour  
706 encapsulation and dormancy. *Br J Cancer* *63*, 758-762.
- 707 • Vazquez, A., Kamphorst, J.J., Markert, E., Schug, Z.T., Tardito, S., and Gottlieb, E. (2016).  
708 Cancer metabolism at a glance. *J Cell Sci* *129*, 3367-3373.
- 709 • Viale, A., and Draetta, G.F. (2016). Metabolic features of cancer treatment resistance. *Resent*  
710 *Results in Cancer Res* *207*, 135-156.
- 711 • Vincent, K.M., and Postovit, L.M. (2017). Investigating the utility of human melanoma cell lines  
712 as tumour models. *Oncotarget* *8*, 10498-10509.
- 713 • Wagle, N., Van Allen, E.M., Treacy, D.J., Frederick, D.T., Cooper, Z.A., Taylor-Weiner, A.,  
714 Rosenberg, M., Goetz, E.M., Sullivan, R.J., Farlow, D.N., et al. (2014). MAP kinase pathway  
715 alterations in BRAF-mutant melanoma patients with acquired resistance to combined  
716 RAF/MEK inhibition. *Cancer Discov* *4*, 61-68.

- 717 • Walling, J. (2006). From methotrexate to pemetrexed and beyond. A review of the  
718 pharmacodynamic and clinical properties of antifolates. *Invest New Drug* *24*, 37-77.
- 719 • Wang, L., Leite de Oliveira, R., Huijberts, S., Bosdriesz, E., Pencheva, N., Brunen, D., Bosma, A.,  
720 Song, J.Y., Zevenhoven, J., Los-de Vries, G.T., et al. (2018). An Acquired Vulnerability of Drug-  
721 Resistant Melanoma with Therapeutic Potential. *Cell* *173*, 1413-1425 e1414.
- 722 • Wang, R., and Green, D.R. (2012). Metabolic checkpoints in activated T cells. *Nat Immunol* *13*,  
723 907-915.
- 724 • Wang, R., Zhao, H., Zhang, X., Zhao, X., Song, Z., and Ouyang, J. (2019). Metabolic  
725 Discrimination of Breast Cancer Subtypes at the Single-Cell Level by Multiple Microextraction  
726 Coupled with Mass Spectrometry. *Anal Chem* *91*, 3667-3674.
- 727 • Xiao, Z., Dai, Z., and Locasale, J.W. (2019). Metabolic landscape of the tumor  
728 microenvironment at single cell resolution. *Nat Commun* *10*, 3763.
- 729 • Yang, W., Soares, J., Greninger, P., Edelman, E.J., Lightfoot, H., Forbes, S., Bindal, N., Beare, D.,  
730 Smith, J.A., Thompson, I.R., et al. (2013). Genomics of Drug Sensitivity in Cancer (GDSC): a  
731 resource for therapeutic biomarker discovery in cancer cells. *Nucleic Acids Research* *41*, D955-  
732 961.
- 733 • Ye, I.C., Fertig, E.J., DiGiacomo, J.W., Considine, M., Godet, I., and Gilkes, D.M. (2018).  
734 Molecular Portrait of Hypoxia in Breast Cancer: A Prognostic Signature and Novel HIF-  
735 Regulated Genes. *Mol Cancer Res* *16*, 1889-1901.
- 736 • Zhang, Y., Choksi, S., Chen, K., Pobezinskaya, Y., Linnoila, I., and Liu, Z.G. (2013). ROS play a  
737 critical role in the differentiation of alternatively activated macrophages and the occurrence  
738 of tumor-associated macrophages. *Cell Res* *23*, 898-914.

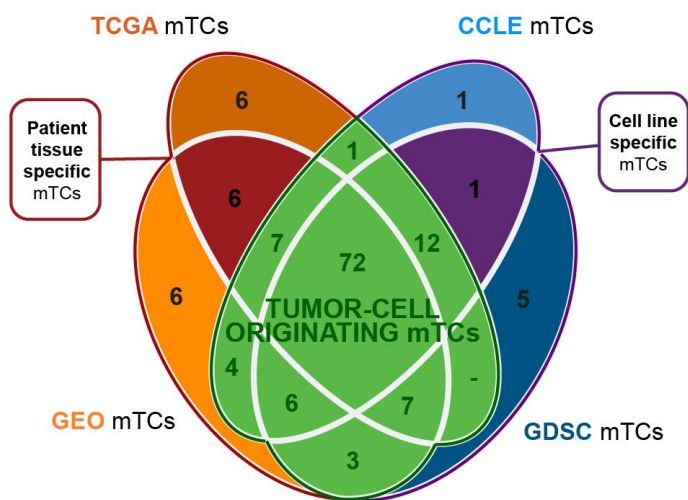
739 **FIGURES**



**C** GEO mTC ↔ TCGA mTC gene-level correlations



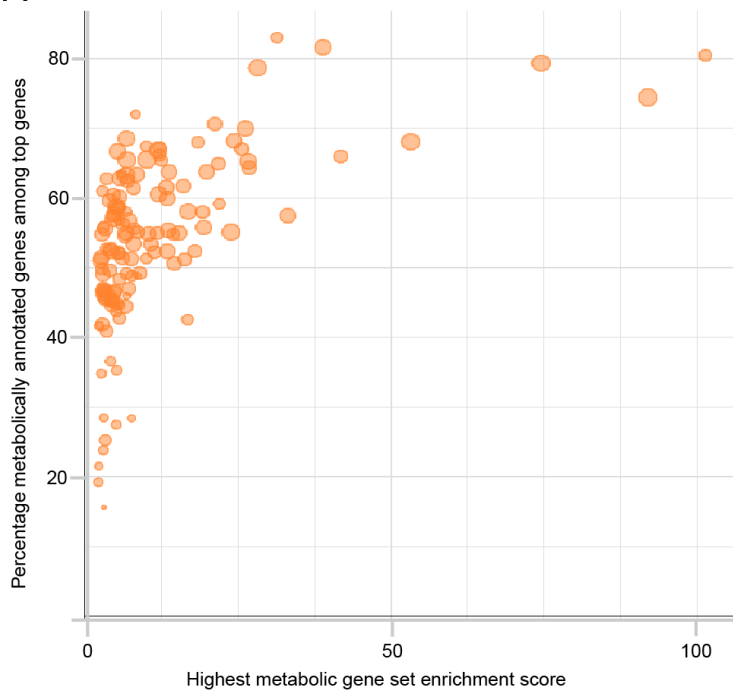
**D**



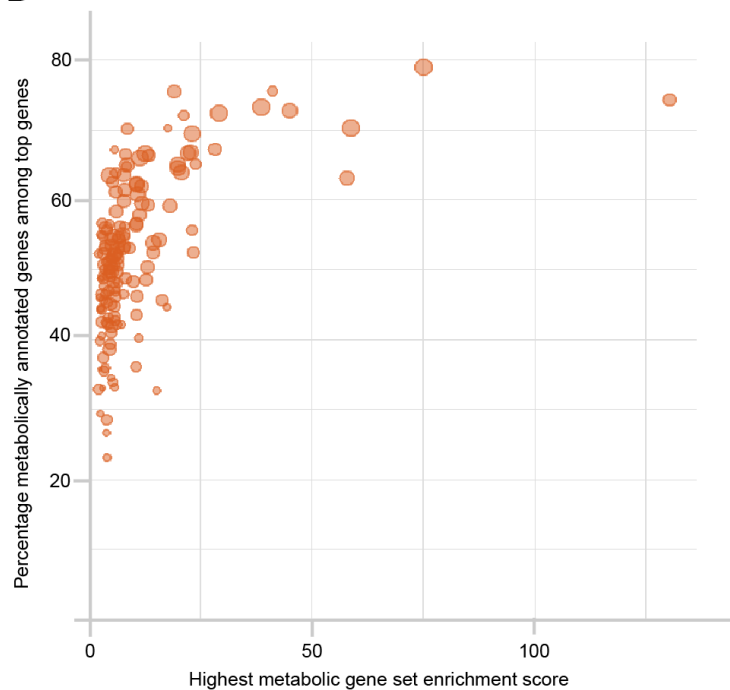
740 **Figure 1 – Identification of metabolic transcriptional components (mTCs).** **(A)** Workflow for  
741 identification of mTCs. Consensus-Independent Component Analysis (c-ICA) applied to identify  
742 transcriptional components (TCs). Subsequent systematic selection of TCs enriched for metabolic  
743 processes resulted in 132, 151, 136, and 136 mTCs for the GEO, TCGA, CCLE, and GDSC datasets,  
744 respectively. **(B)** Hierarchically clustered heatmaps showing the enrichment of the 608 metabolic  
745 gene sets of mTCs identified in GEO, TCGA, CCLE, and GDSC datasets. **(C)** Scatter plot showing  
746 absolute spearman correlation coefficients (x-axis), versus the percentage of overlapping top  
747 genes (genes with absolute weight >3) between GEO mTCs and TCGA mTCs (y-axis). Only  
748 significant pair-wise correlations (with P-values <0.05) are shown. Colored dots show correlations  
749 > 0.5, the size of the dots represent the P-value of these spearman correlations. **(D)** Venn diagram  
750 quantifying overlap of mTCs between each dataset based on their pair-wise correlations. Two  
751 mTCs are counted as shared between datasets, when they have a high absolute spearman  
752 correlation ( $|r_s| > 0.5$ ). Three groups of (shared) mTCs, mentioned in the text, are designated.

753

**A** GEO mTCs



**B** TCGA mTCs



**C** Top genes of GEO mTC 54

Rank	Gene Symbol	Absolute gene weight
1	MIR210HG	31.99
2	PFKFB4	26.43
3	PDK1	19.80
4	P4HA1	19.60
5	ANKRD37	19.45
6	CA9	19.41
7	HILPDA	18.12
8	LDHA	16.95
9	PGK1	16.71
10	FUT11	16.44
11	KDM3A	15.93
12	NDRG1	15.90
13	EGLN3	15.84
14	HK2	15.23
15	ADM	15.01
16	BNIP3	15.00
17	FAM162A	14.92
...	...	...
24	C4orf47	12.85
38	ENO1	10.23
49	C4orf3	9.61

**D** Top genes of TCGA mTC 127

Rank	Gene Symbol	Absolute gene weight
1	PFKFB4	20.81
2	PGK1	19.59
3	PDK1	18.14
4	P4HA1	17.84
5	BNIP3	17.51
6	KDM3A	17.11
7	HK2	16.53
8	ENO1	14.68
9	GAPDH	14.22
10	FAM162A	13.91
11	GPI	13.44
12	NDRG1	13.28
13	BNIP3L	13.02
14	LDHA	12.91
15	C4orf3	12.63
16	ALDOA	12.41
17	TPI1	12.15
...	...	...
24	CA9	11.44
41	ANKRD37	8.82
56	C4orf47	7.36

**E** Top genes of GEO mTC 11

Rank	Gene Symbol	Absolute gene weight
1	ATP5F1B	16.69
2	UQCRC2	14.82
3	PDHA1	14.71
4	PPARGC1A	14.46
5	ATP5F1A	14.05
6	CHCHD10	13.94
7	ACO2	13.57
8	SDHA	13.11
9	ATP5MC3	12.79
10	FASTKD1	12.46
11	GOT1	12.45
12	COQ9	12.03
13	COX4I1	11.93
14	NDUFV1	11.60
15	SUCLG1	11.47
16	CYC1	11.35
17	COX5A	11.34
...	...	...
19	C6orf136	11.30
32	IMMT	9.64
47	CS	8.99

**F** Top genes of TCGA mTC 141

Rank	Gene Symbol	Absolute gene weight
1	ATP5F1B	15.82
2	ATP5MC3	15.06
3	PDHA1	13.44
4	FASTKD1	12.92
5	UQCRC2	12.55
6	IMMT	11.63
7	ACO2	11.46
8	ATP5F1A	11.05
9	COQ9	10.78
10	CS	10.56
11	ATP5PB	10.14
12	MDH1	10.11
13	DLAT	10.09
14	UQCRH	10.03
15	DLD	9.90
16	NDUFAF4	9.60
17	NDUFS1	9.56
...	...	...
35	PPARGC1A	8.15
38	C6orf136	8.05
60	CHCHD10	6.88

754 **Figure 2 - Metabolic TCs identify new genes potentially involved in metabolic processes. (A-B)**

755 Scatterplots showing the highest metabolic gene set enrichment score for every GEO (A) and

756 TCGA (B) mTC (x-axis) versus the percentage of metabolically annotated genes among the top

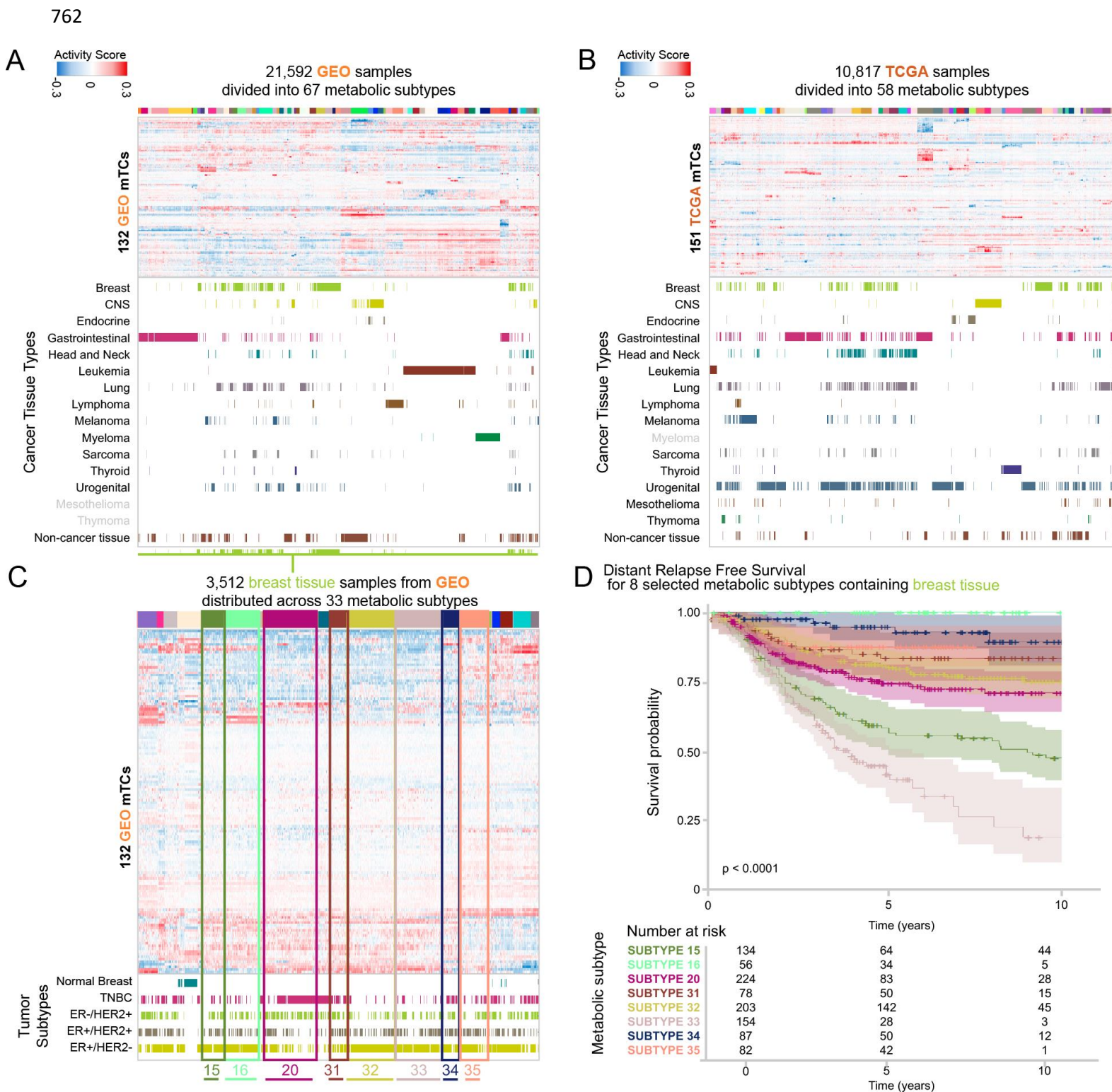
757 genes (genes with absolute weight >3) in those mTCs. Size of dots correspond to the absolute

758 amount of metabolically annotated genes in the corresponding mTC. **(C-D)** Top genes in GEO mTC

759 54 and TCGA mTC 127. Text colored white shows genes that are a member of at least one of the

760 608 defined metabolic gene sets. Lines signify genes that are top genes in both GEO and TCGA

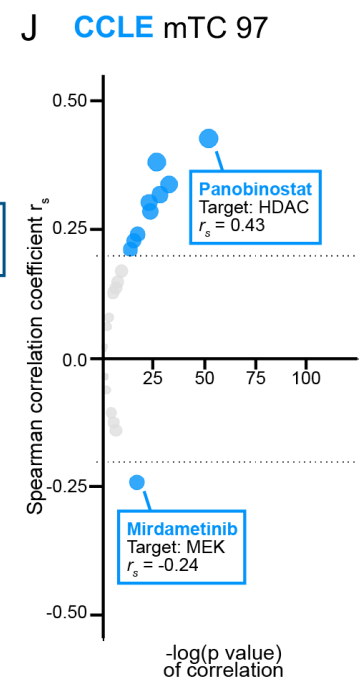
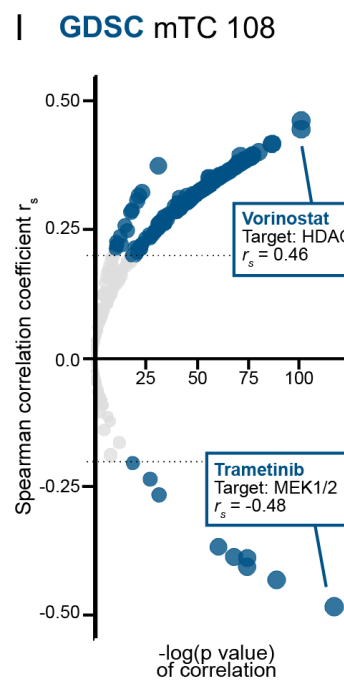
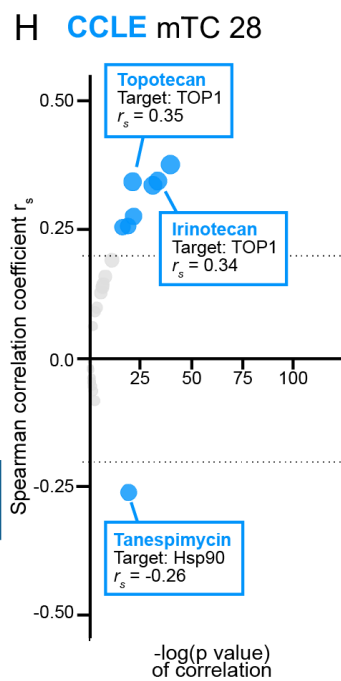
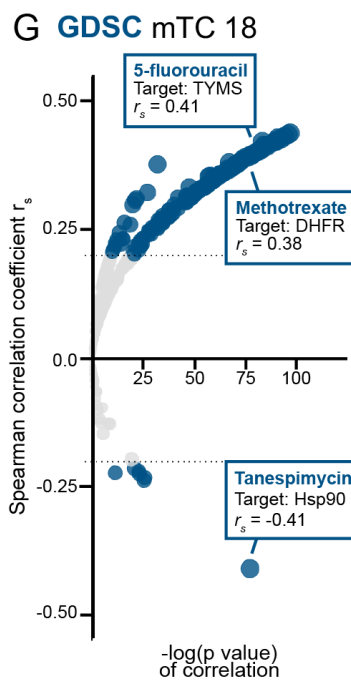
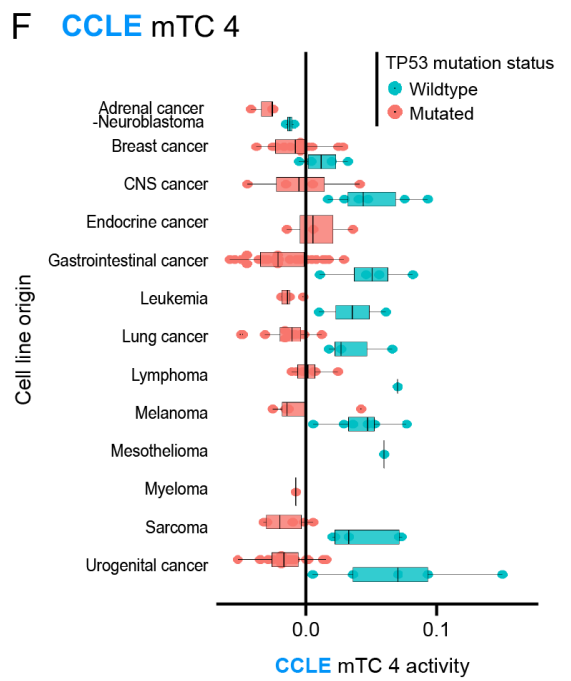
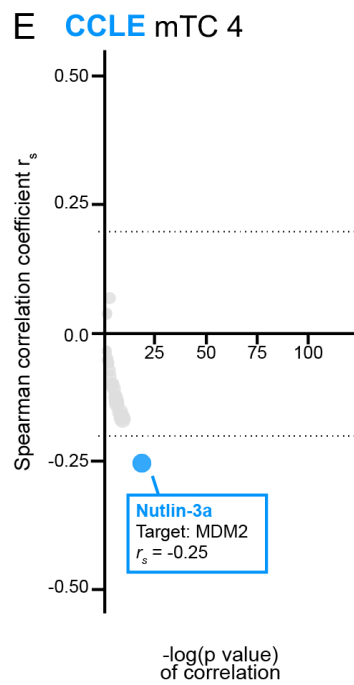
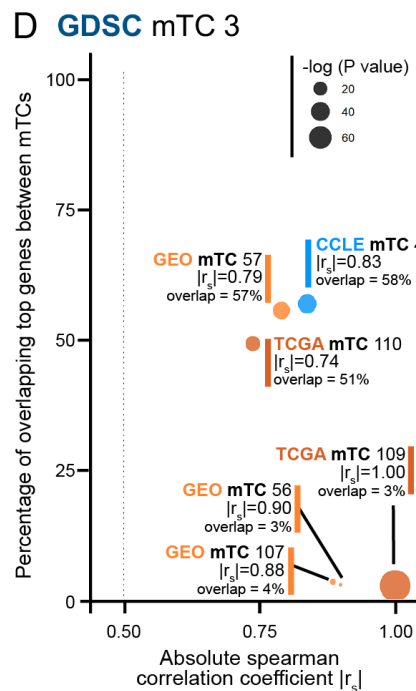
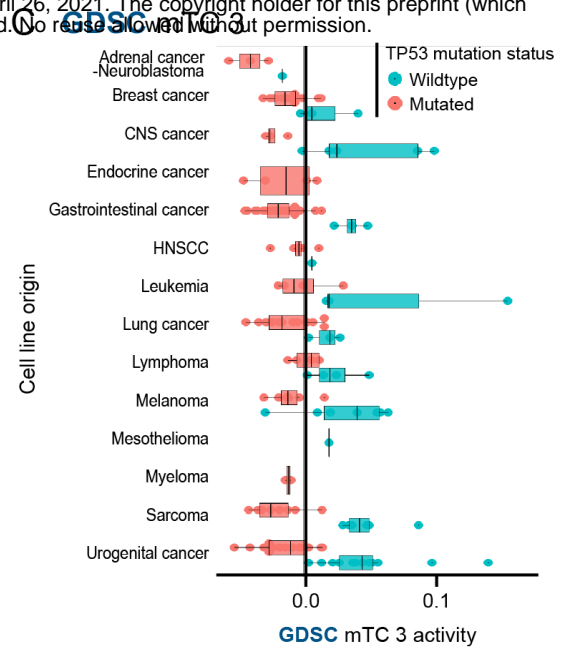
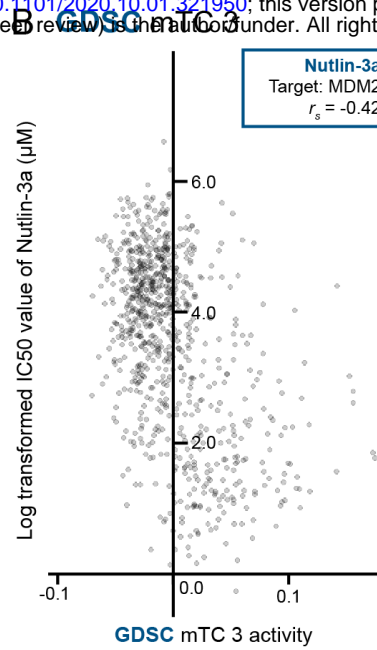
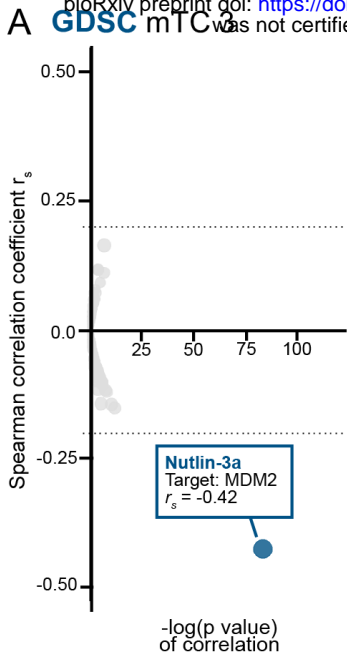
761 mTCs. **(E-F)** Top genes in GEO mTC 11 and TCGA mTC 141.





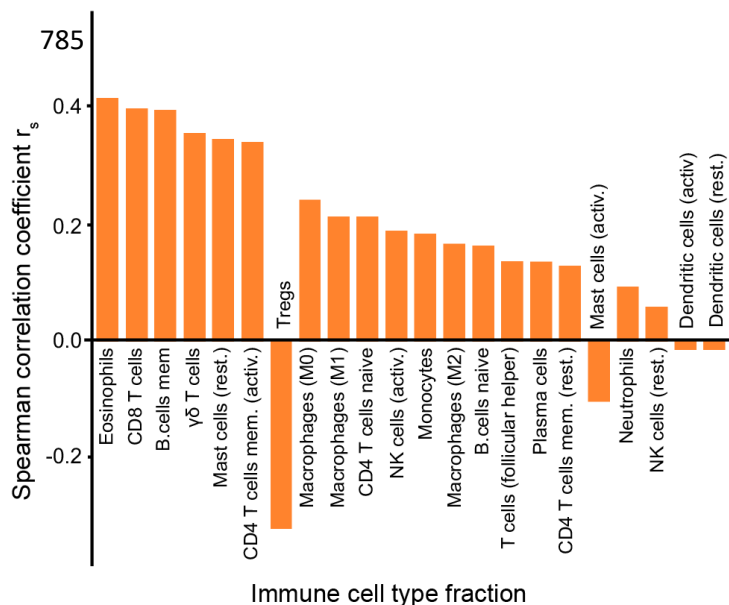
763 **Figure 3 – Clustering activity scores of mTCs reveal multiple metabolic subtypes**

764 **(A)** 21,592 GEO samples were hierarchically clustered based on mTC activity scores and divided  
765 into 67 metabolic subtypes. **(B)** 10,817 TCGA samples were hierarchically clustered based on mTC  
766 activity scores and divided into 58 metabolic subtypes. **(C)** Metabolic landscape of the subset of  
767 breast tissue samples in the GEO dataset. Subtypes with DFS data were selected for survival  
768 analysis are highlighted. Grey labels designate tissue types that are present in other datasets, but  
769 are not present in the given dataset. **(D)** Distant relapse-free survival of breast cancer patients in  
770 the GEO dataset. Patient-derived samples were stratified per metabolic subtype. Kaplan Meier  
771 curves are shown with a confidence interval of 0.95.

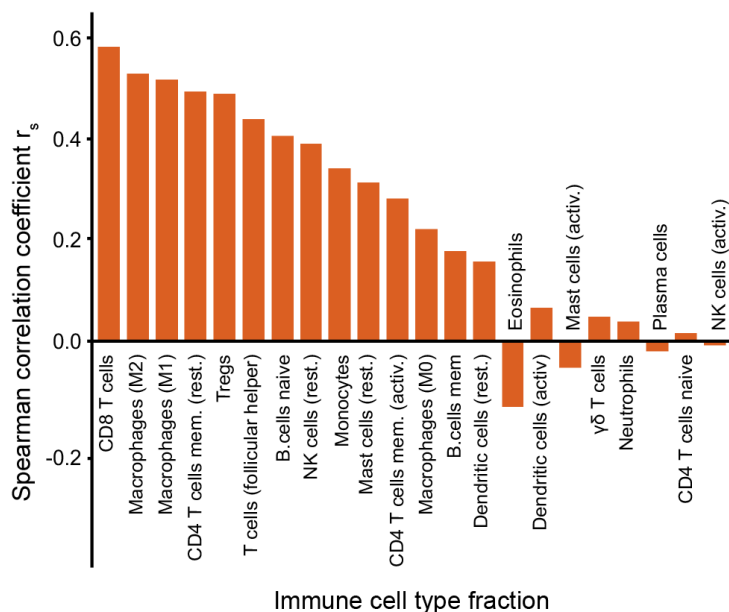


773 **Figure 4 – Associations between mTCs and drug sensitivity for selected examples. (A)** Spearman  
774 correlations between drug IC50 values and the activity of GDSC mTC 3 **(B)** Scatter plot showing  
775 the association between the (log-transformed) IC50 value of Nutlin-3a and activity of GDSC mTC  
776 3 in samples. **(C)** Box plot of activity of GDSC mTC 3 across cell lines, colored for their *TP53*  
777 mutation status. **(D)** Pair-wise correlations between GDSC mTC 3 and mTCs from GEO, TCGA and  
778 CCLE datasets. Every dot corresponds to an mTC with a correlation to GDSC mTC 3  $\geq 0.5$ . Dot sizes  
779 correspond to the P-value of the spearman correlation coefficient; the y-axis gives the percentage  
780 of overlapping top genes between the two mTCs involved in the correlation. **(E)** Spearman  
781 correlations between drug IC50 values and the activity of CCLE mTC 4 **(F)** Box plot of activity of  
782 CCLE mTC 4 across cell lines, colored for their *TP53* mutation status. **(G-J)** Spearman correlations  
783 between drug IC50 values and the activity of GDSC mTC 18, CCLE mTC 28, GDSC mTC 108 and  
784 CCLE mTC 97.

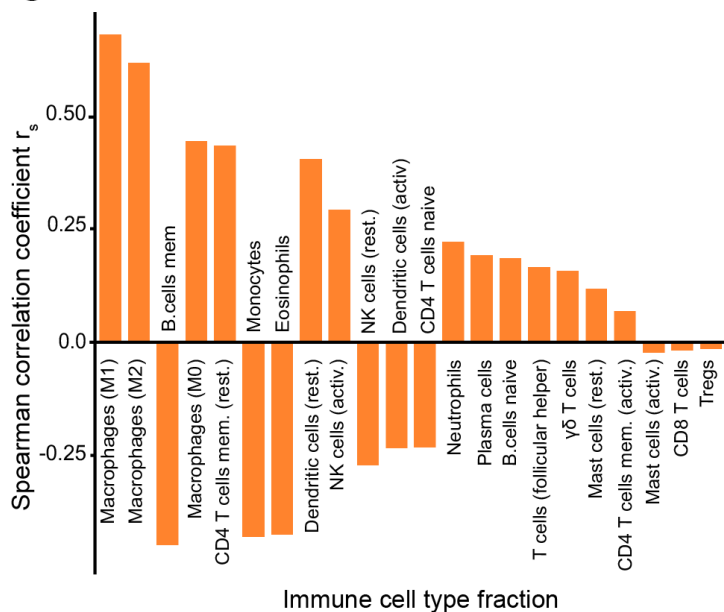
### A GEO mTC 123



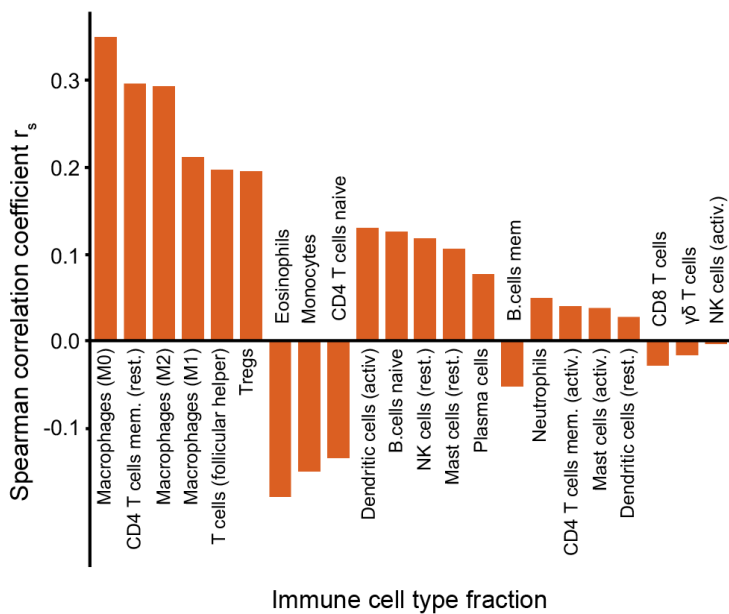
### B TCGA mTC 34



### C GEO mTC 14



### D TCGA mTC 70



786 **Figure 5 – Associations between mTCs and the composition of the immune tumor**  
787 **microenvironment for selected examples. (A-B)** Spearman correlations between CIBERSORT  
788 estimated immune cell fractions and the activity of GEO mTC 123 and TCGA mTC 34. **(C-D)**  
789 Spearman correlations between CIBERSORT estimated immune cell fractions and the activity of  
790 GEO mTC 14 and TCGA mTC 70.

791 **SUPPLEMENTARY INFORMATION**

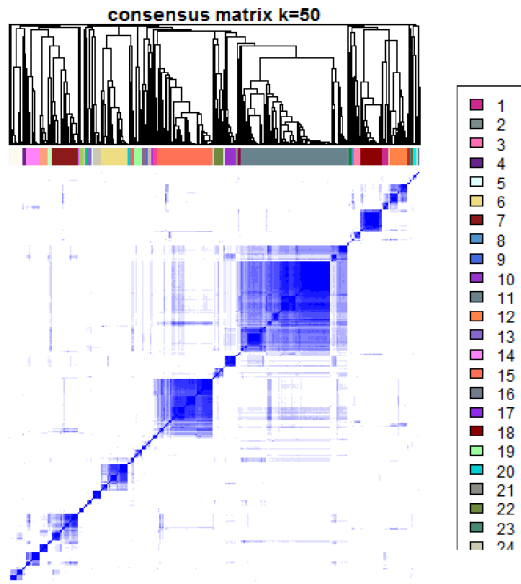
792 Contains supplementary Figures S1 – S8 and their legends.

793 To accommodate the editorial process, and due to file constraints, Supplementary Tables S1 – S5

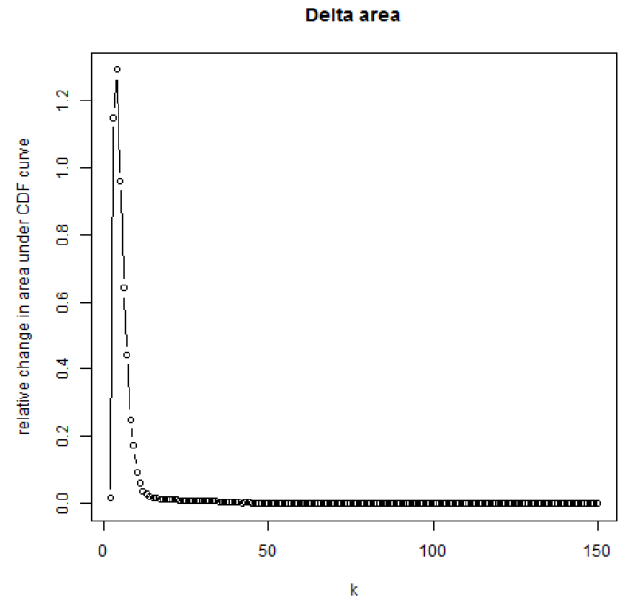
794 are available as excel files but omitted from the generated composite pdf file.

795

A



B

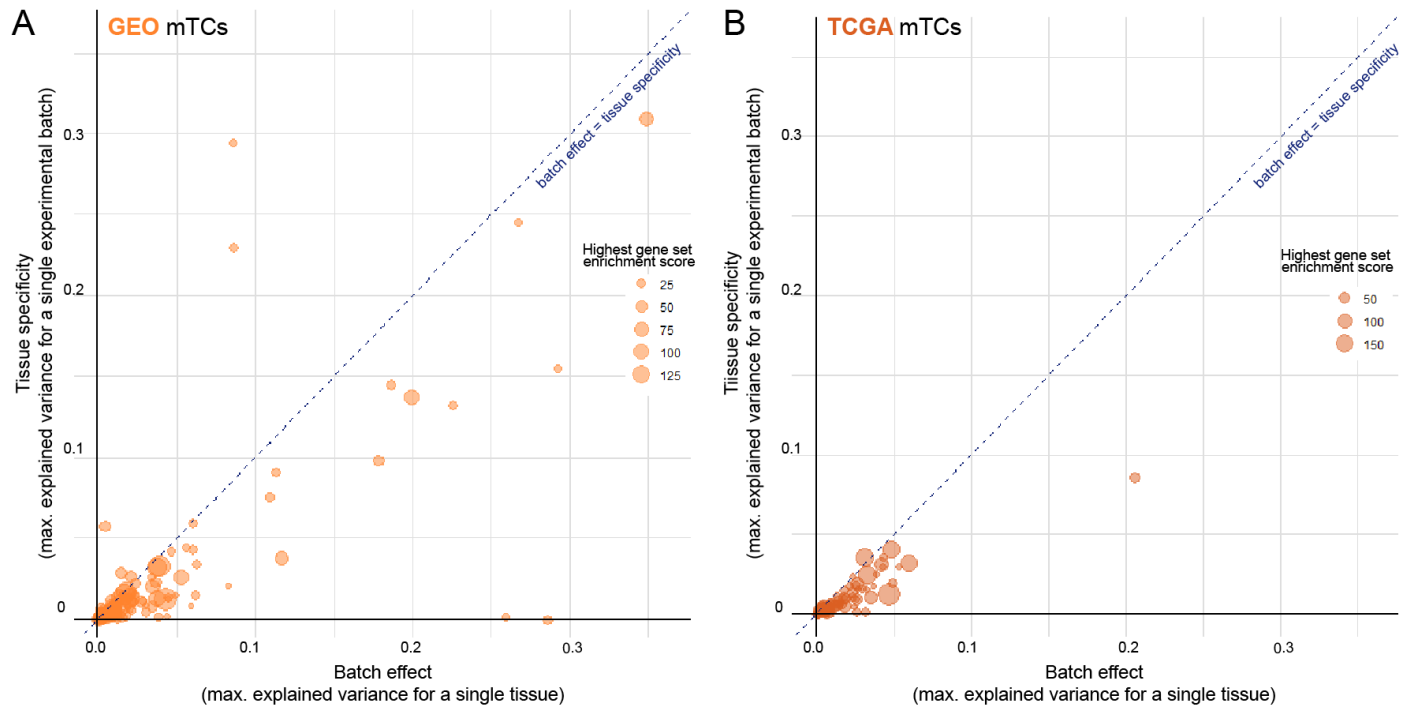


796

797 **Figure S1 – Related to Figure 1;**

798 **(A)** Consensus clustering gene set enrichment scores of all TCs in the GEO dataset. Consensus  
799 matrix for a  $k$  of 50 gene set clusters. **(B)** Consensus clustering gene set enrichment scores of all  
800 TCs in the GEO dataset. Relative change in area under the consensus CDF curve with increasing  $k$ .  
801





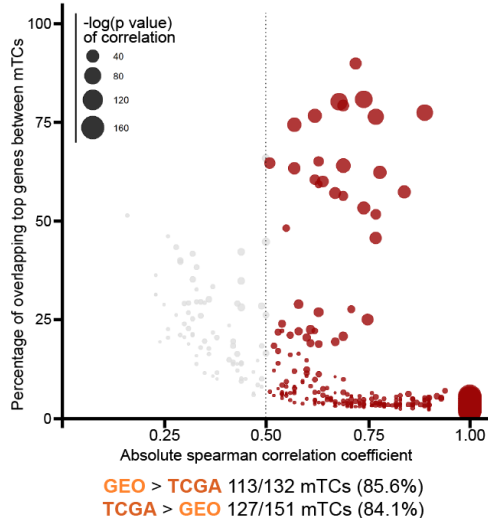
802

803 **Figure S2 – Related to Figure 1;**

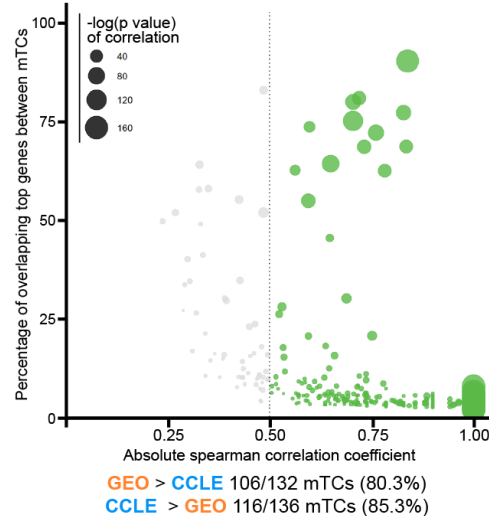
804 Scatter plots showing the maximum batch effect and tissue specificity for GEO **(A)** and TCGA **(B)**  
805 mTCs. Size of the dots correspond to the highest gene set enrichment score of that mTC. The  
806 magnitude of the batch effect in an mTC is estimated by the maximum fraction of the sample  
807 variance in an experimental batch that is explained by that mTC. Similarly, the tissue specificity  
808 of an mTC is estimated by the maximum fraction of the sample variance in a tissue type that is  
809 explained by that mTC.

810

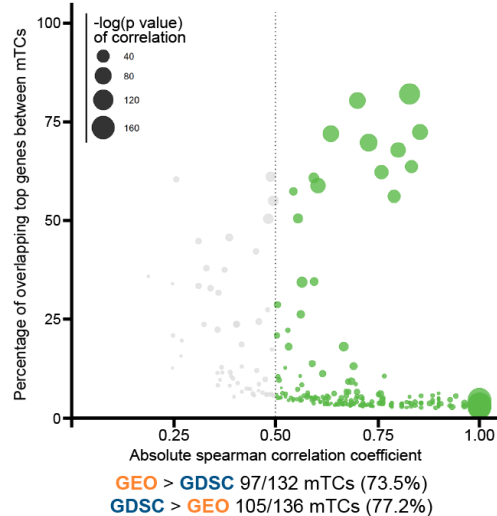
**A** GEO mTC <> TCGA mTC gene-level correlations



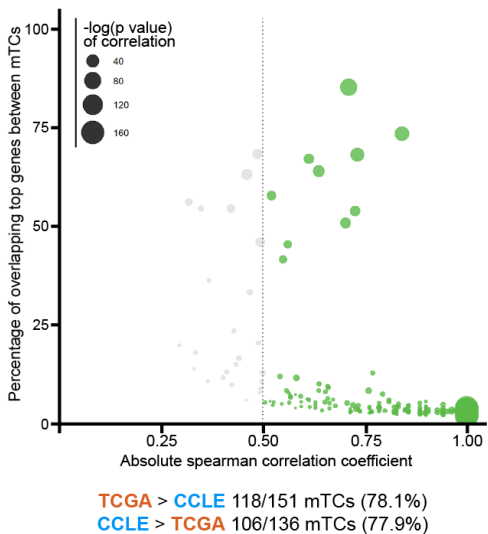
**B** GEO mTC <> CCLE mTC gene-level correlations



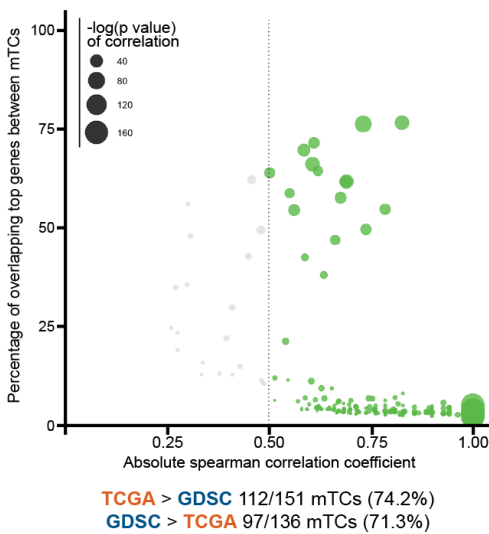
**C** GEO mTC <> GDSC mTC gene-level correlations



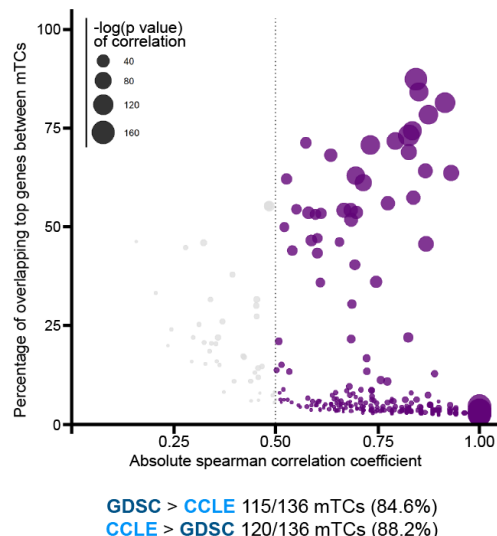
**D** TCGA mTC <> CCLE mTC gene-level correlations



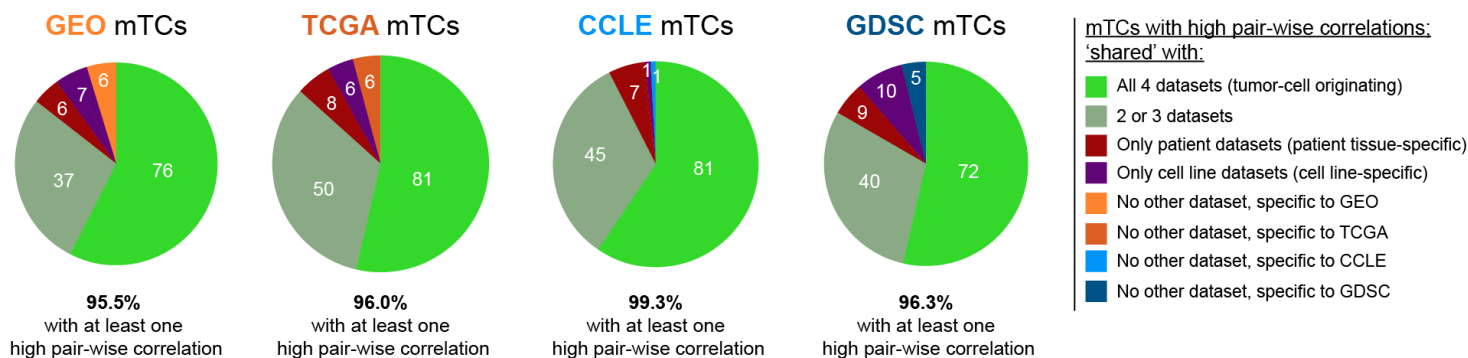
**E** TCGA mTC <> GDSC mTC gene-level correlations



**F** CCLE mTC <> GDSC mTC gene-level correlations



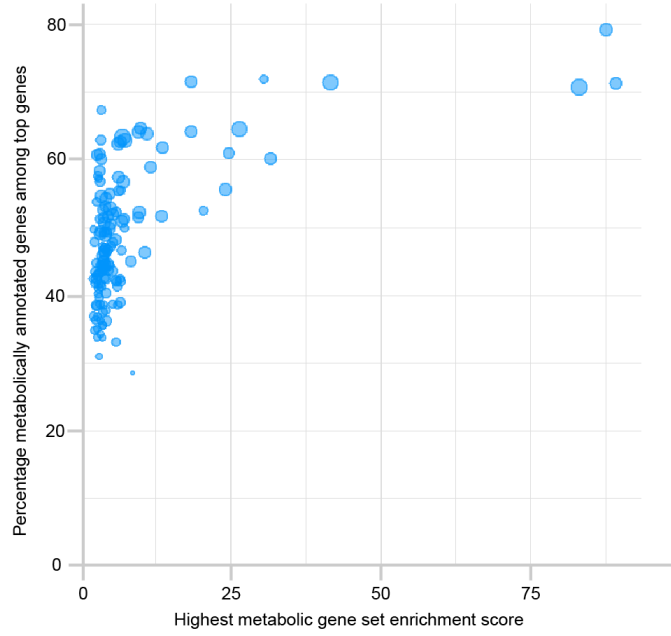
**G** Quantifying mTCs with high pair-wise correlations per dataset



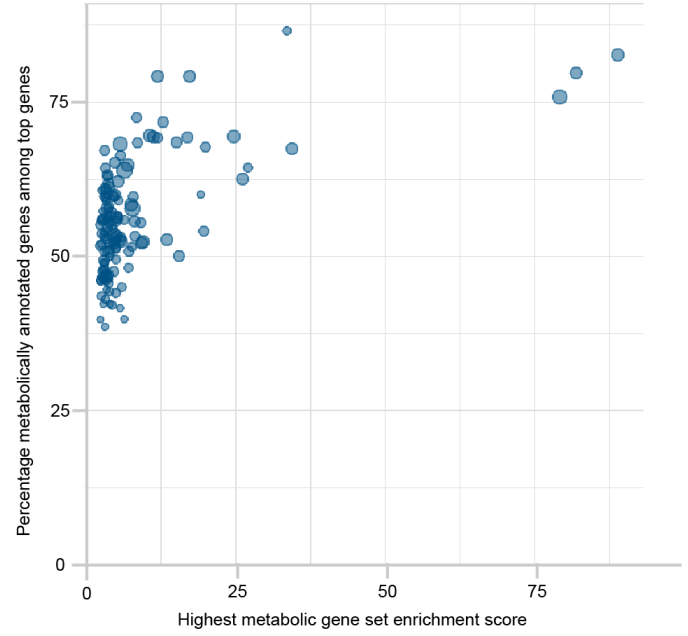
811 **Figure S3 – Related to Figure 1;**

812 Scatter plot showing absolute spearman correlation coefficients (x-axis), versus the percentage  
813 of overlapping top genes (genes with absolute weight >3) between mTCs from different datasets  
814 (y-axis). Only significant pair-wise correlations (with P-value <0.05 and top gene overlap  
815 significance <0.05) are shown. Colored dots show absolute correlations > 0.5, the size of the dots  
816 represent the P-value of these spearman correlations. Scatter plots are shown for correlations  
817 between **(A)** GEO and TCGA mTCs, **(B)** GDSC and CCLE mTCs, **(C)** GEO and GDSC mTCs, **(D)** TCGA  
818 and GDSC mTCs, **(E)** GEO and CCLE mTCs, **(F)** TCGA and CCLE mTCs. **(G)** Pie graphs quantifying the  
819 amount of mTCs with high correlations for every dataset.

**A CCLE mTCs**



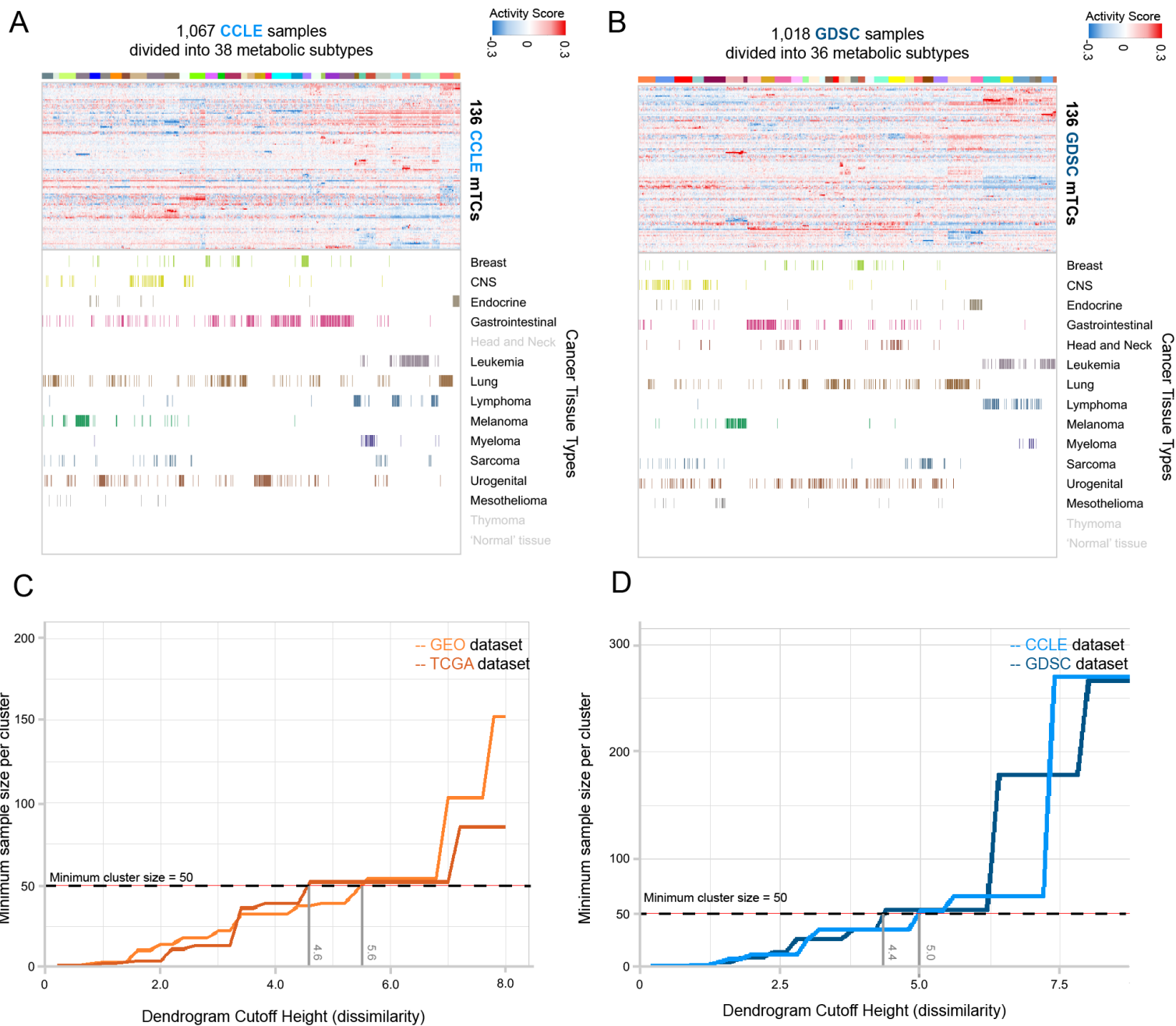
**B GDSC mTCs**



820

821 **Figure S4 – Related to Figure 2;** Dot plots showing the highest metabolic gene set enrichment  
822 score for every CCLE (A) and GDSC (B) mTC (x-axis) versus the percentage of metabolically  
823 annotated genes in the top genes (genes with absolute weight >3) in those mTCs (y-axis).

824



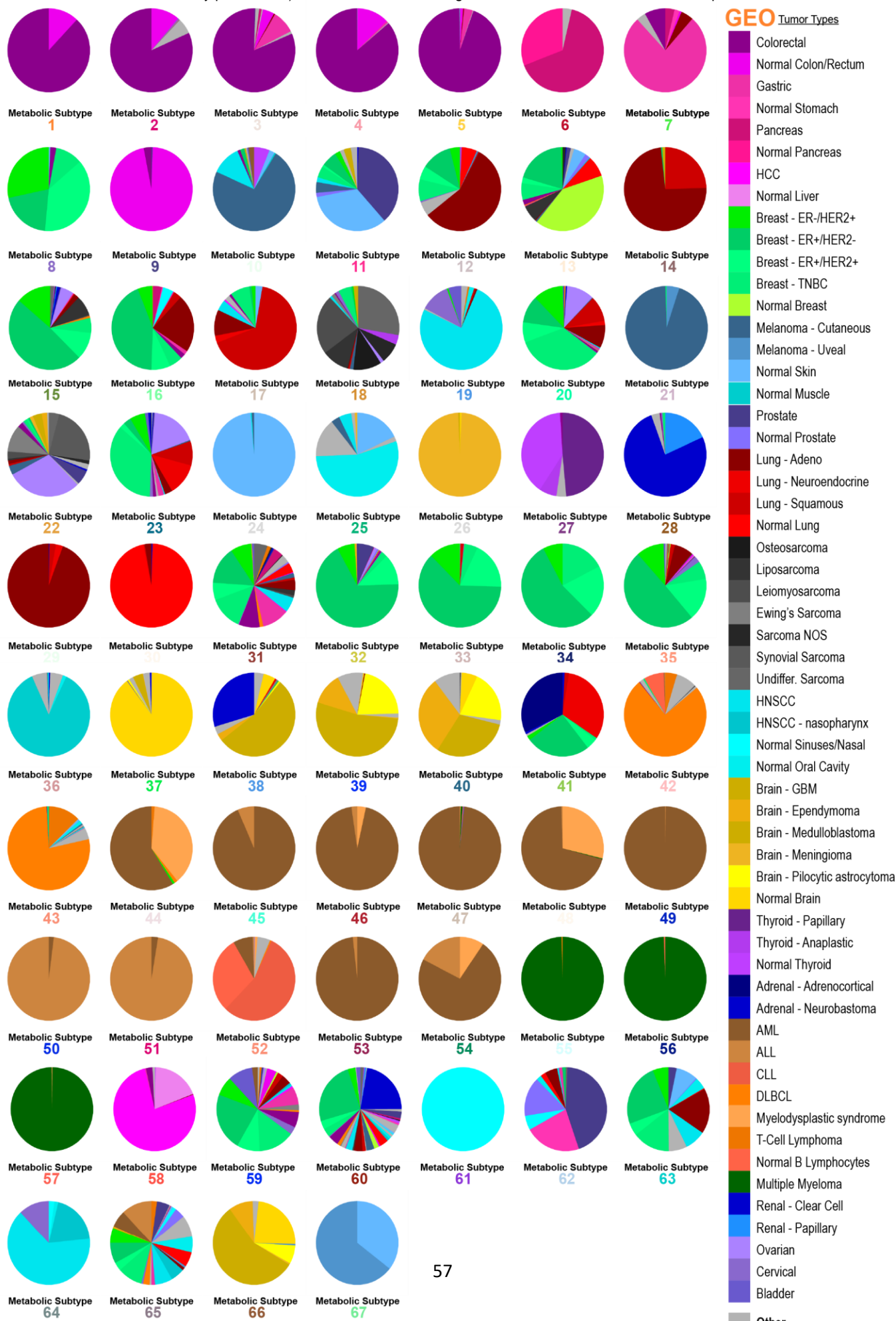
825 **Figure S5 – Related to Figure 3;**

826 **(A)** Metabolic landscape for CCLE samples. The 1,067 samples were hierarchically clustered and  
827 divided into 38 metabolic subtypes. **(B)** Metabolic landscape for GDSC samples. The 1,018  
828 samples were hierarchically clustered and divided into 36 clusters metabolic subtypes. Grey labels  
829 designate tissue types that are present in other datasets, but are not present in the given dataset.  
830 **(C)** Hierarchical clustering of activity scores of mTCs in samples from GEO and TCGA datasets used  
831 in order to define metabolic subtypes. The plot shows the minimum sample size of a cluster  
832 depending on the chosen cutoff height of the dendrogram resulting from hierarchical clustering.  
833 The heights at which the minimum cluster size reaches 50 is given for both GEO and TCGA  
834 datasets. **(D)** Hierarchical clustering of activity scores of mTCs in samples from CCLE and GDSC  
835 datasets used in order to define metabolic subtypes. The plot shows the minimum sample size of  
836 a cluster depending on the chosen cutoff height of the dendrogram resulting from hierarchical  
837 clustering. The heights at which the minimum cluster size reaches 50 is given for both CCLE and  
838 GDSC datasets.

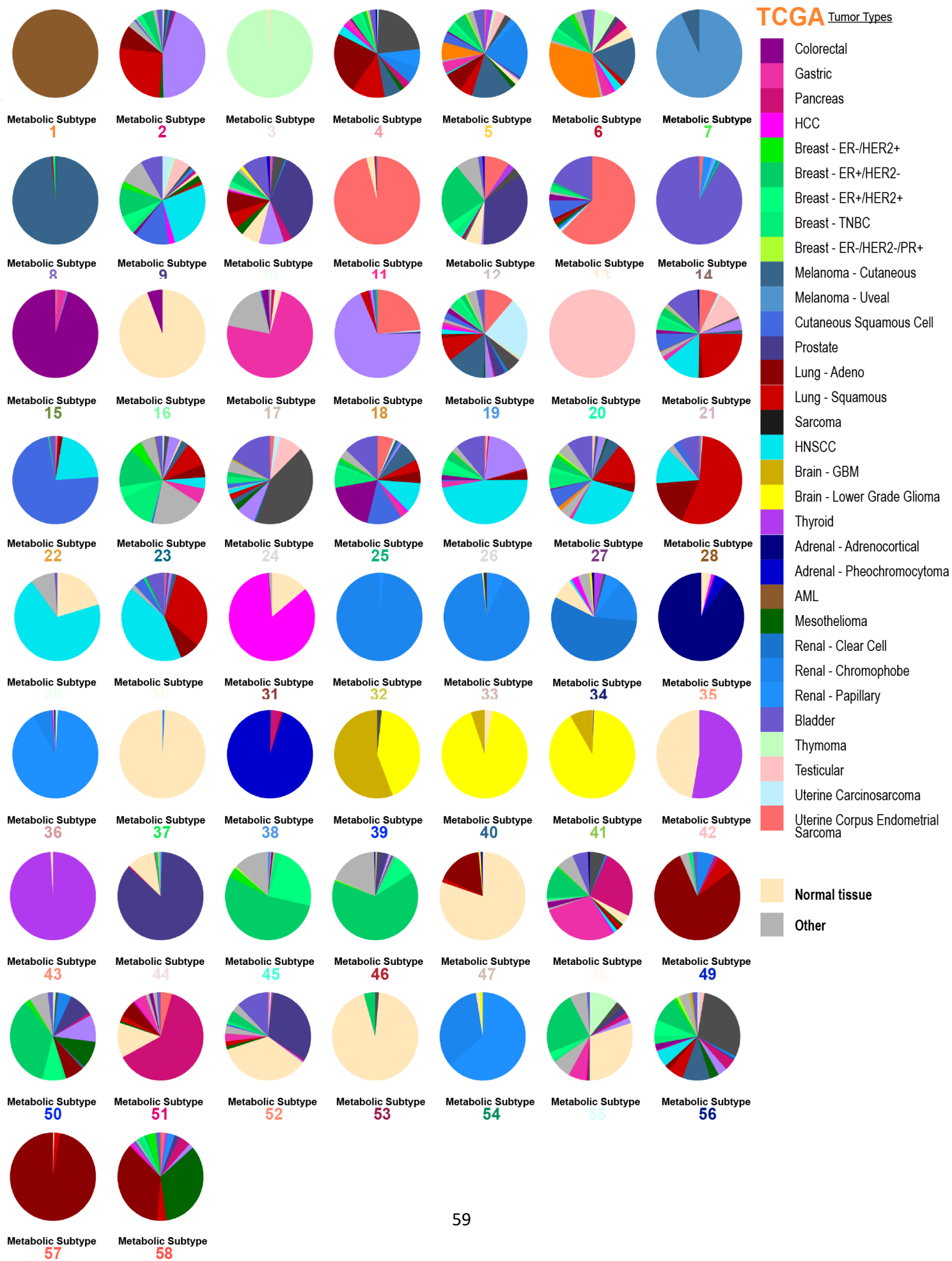
839



840



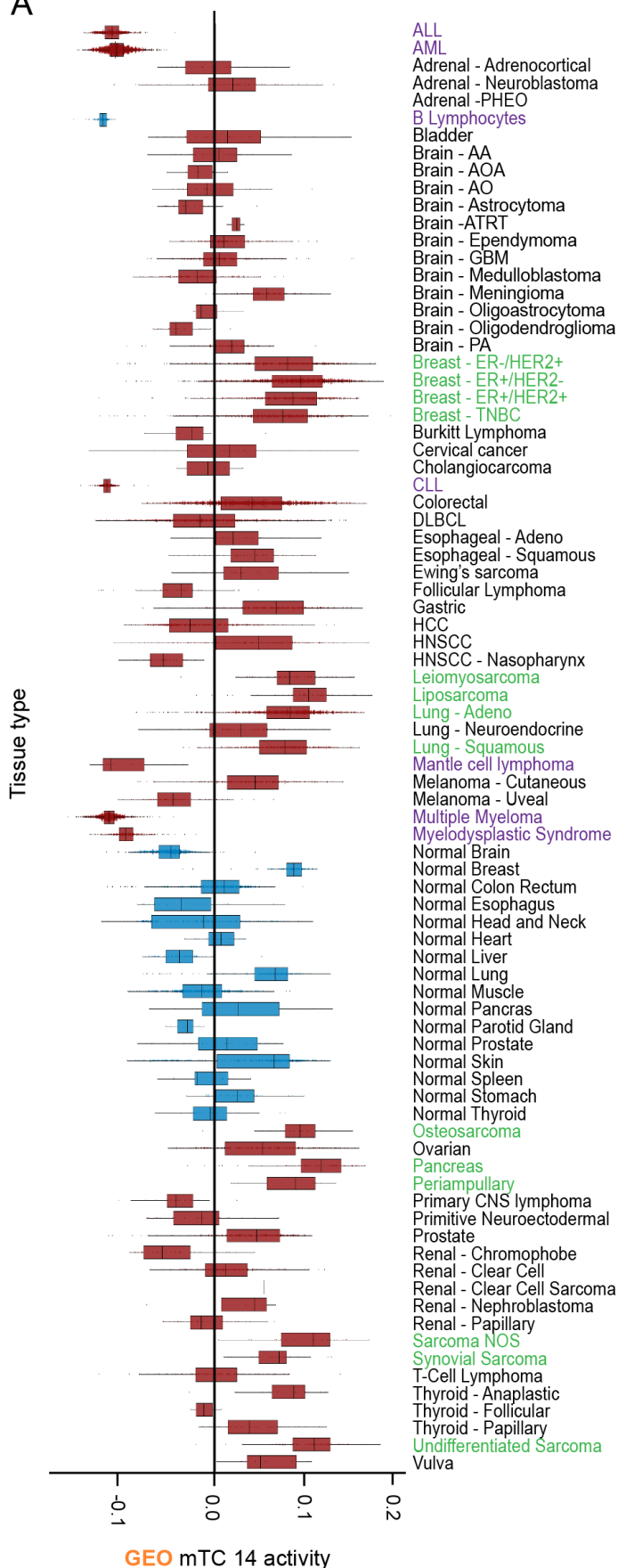
841 **Figure S6 – Related to Figure 3;** Pie graphs depicting the tissue type composition of the 67  
842 metabolic subtypes defined for the GEO dataset.



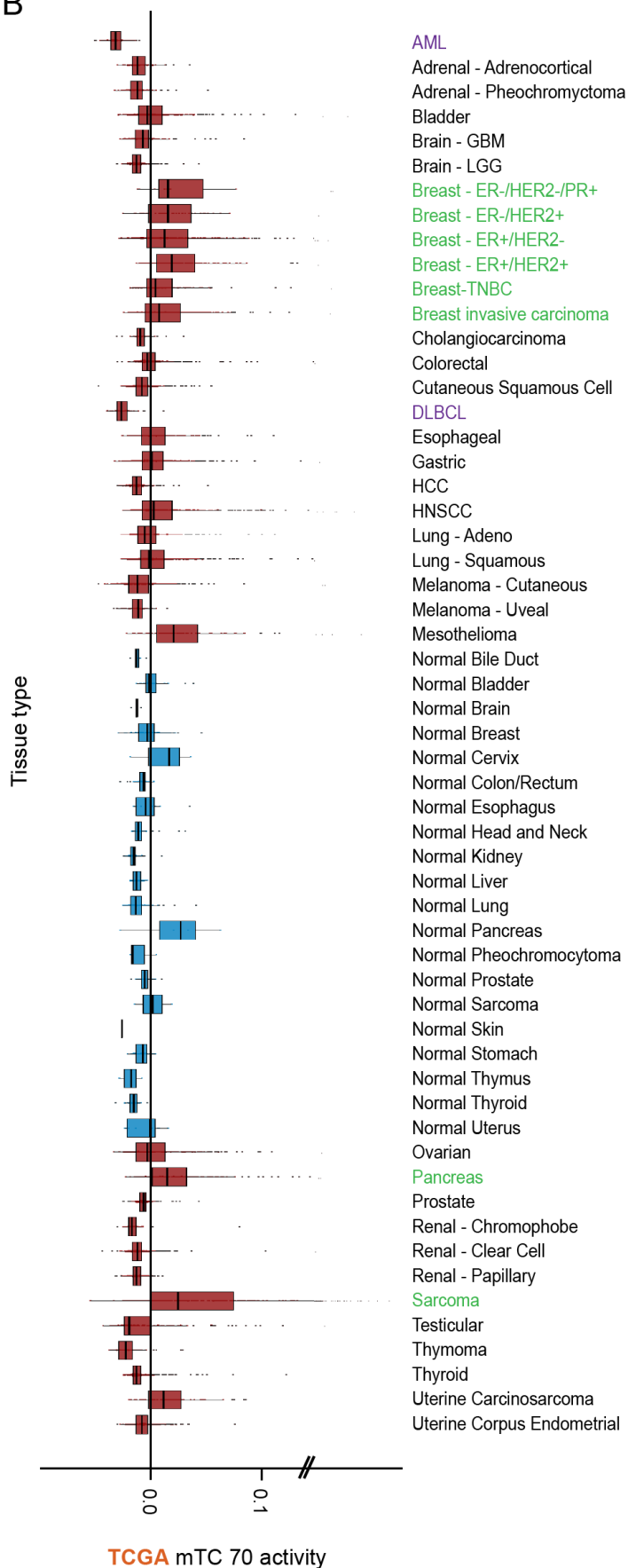
844 **Figure S7 – Related to Figure 3;** Pie graphs depicting the tissue type composition of the 58  
845 metabolic subtypes defined for the TCGA dataset.

846

A



B



847 **Figure S8 - Related to Figure 5; (A)** Activity of GEO mTC 14 in samples, grouped per tissue type.  
848 Tissue types with a higher median activity highlighted in the text are given a red axis label, tissue  
849 types with a lower median activity highlighted in the text are given a blue axis label. **(B)** Activity  
850 of TCGA mTC 70 in samples, grouped per tissue type. Tissue types with a higher median activity  
851 highlighted in the text are given a red axis label, tissue types with a lower median activity  
852 highlighted in the text are given a blue axis label.