

Metabolomics studies of prostate cancer using gas chromatography-mass spectrometery

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Background: Metabolomics is a powerful analytical approach that is widely used for early diagnosis of many tumors. In this study, we performed a comparative metabolomics analysis to identify metabolic differences in prostate cancer.

Methods: We applied gas chromatography-mass spectrometry (GC-MS) to analyze the metabolic differences between normal prostate epithelial cells and prostate cancer cells (PC-3, LNCaP, and DU145 cells). We performed pairwise comparisons of the metabolomes for the intracellular and extracellular fluid using principal component analysis (PCA), partial least squares discriminant analysis (PLS-DA), and Student's *t*-test.

Results: Our results revealed significantly different expression patterns among the metabolite groups, including amino acids, organic acids, sugars, and cholesterol. Of these four categories, cholesterol showed potential for combination with prostate-specific antigen (PSA) to improve diagnosis of prostate cancer.

Conclusions: GC-MS may be an effective approach to reduce the frequency of invasive biopsies. Analysis of the diagnostic significance of prostate cancer markers will help to identify more meaningful tumor markers for prostate cancer diagnosis and treatment, contribute to the understanding of the pathogenesis of prostate cancer, and provide the basis for new ideas.

Keywords: Prostate cancer; metabolomics; cholesterol metabolism; gas chromatography-mass spectrometery (GC-MS); tumor biomarker

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Introduction

There have been numerous clinical studies into the methods for early tumor diagnosis, including identifying tumor markers and pathology, ultrasonic techniques, and nuclear magnetic resonance. Despite these advances, many patients are still diagnosed with advanced or metastatic cancer after the optimum treatment point (1,2). Therefore, identification of additional biomarkers or development of new technologies that allow early diagnosis of cancers

remains an important issue.

Recently, metabolomics has attracted increasing attention and been widely used for early cancer diagnosis (3). The occurrence and development of tumors in the human body inevitably cause changes in metabolites, and nucleotide metabolism has been suggested as a cancer marker (4). In clinical practice, more than three-quarters of patients with ovarian cancer were diagnosed with advanced cancer and must undergo surgical removal and chemotherapy. Even

with intensive therapy, about one-half of these patients experienced relapse within 2 years (5). However, early diagnosis of ovarian cancer would greatly improve the patient survival rate (6). A previous study showed that combination of the tumor markers CA125, CA72-4, CA15-3, and M-CSF and detection through artificial neural network analysis improved the accuracy of early diagnosis of ovarian cancer; the specificity of this method reached 98% with 71% sensitivity compared to 46% sensitivity for CA125 alone (7). In addition, metabolomics testing has been applied in the early diagnosis of breast cancer, illustrating that metabolomics analysis can provide broader more screening indicators (8).

Prostate cancer mainly occurs in middle-aged men and is often diagnosed at late stage. Thus, early diagnosis of prostate cancer would have far-reaching significance for patients (9,10). With the aid of high-throughput liquid/gas chromatography-mass spectrometry (LC/GC-MS), a metabolomics study performed on 262 clinical prostate cancer specimens identified 1,126 intermediate metabolites (10). For example, creatinine levels gradually increased from early to metastatic prostate cancer, and sarcosine was detected in rectal specimens from patients with prostate cancer, suggesting that LC/GC-MS is an effective method for early diagnosis and clinical staging of prostate cancer.

Current cancer therapeutics is mainly directed against tumor cells, targeting development and growth processes, proliferation, and metastasis arising from abnormal pathways. Metabolomics can help to identify key metabolites during the development of the tumor and improve the efficacy by tumor targeted therapy, thereby establishing a new direction for research and clinical applications (11). The most important evaluation of this application is identification of metabolic biomarkers for cancer diagnosis and prognosis. Recently, the application of magnetic resonance spectroscopy imaging (MRSI) technologies for tumor evaluation has attracted a lot of attention (12). However, in clinical work, the co-existence of breast cancer with metabolic or other integrated disease such as insulin resistance, obesity, hypertension, or dyslipidemia will result in relatively poor diagnosis (13).

In this study, metabolic differences between normal prostate epithelial cells and prostate cancer cells at various stages were analyzed with GC-MS to identify prostate cancer-specific metabolites. The analysis of prostate cancer markers with diagnostic significance will provide more meaningful tumor biomarkers for prostate cancer diagnosis and treatment, further our understanding of prostate cancer pathogenesis, and establish a foundation for new ideas.

Methods

Materials

Reagents for cell growth media (e.g., Leibovitz's L-15 medium, RPMI medium 1640, epidermal growth factor, Ham's F-12 nutrient mixture, McCoy's 5A medium) and methanol were purchased from CNW Technologies GmbH (Germany). Other commercially available reagents were analytical grade. Derivatives reagents were purchased from AMP (USA). Watsons distilled water was used for all experimental equipment.

Growth medium

Dulbecco's Modified Eagle's Medium (DMEM) containing 80–90% basal medium supplemented with 10–20% fetal bovine serum and 1% bis anti-stock solution (penicillin and streptomycin) were purchased from Gibco (USA). The final concentrations of penicillin and streptomycin were 100 U/mL and 100 µg/mL, respectively (10).

Cell culture

Prostate cancer cell lines PC-3, DU145, and LNCaP and the normal prostate epithelial cell line RWPE were purchased from the American Type Culture Collection (ATCC, USA). The cell lines were cultured in DMEM at 37 °C in 5% CO₂ under sterile conditions as previously described (14,15). The filtered culture supernatant was stored in a sealed bottle at 4 °C (16).

Sample grouping

The samples of normal human prostate epithelial cells (RWPE cells), normal human prostate epithelial extracellular fluid (RWPE solution), androgen-independent human prostate cancer cells (DU145 cells), androgen-independent human prostate cancer cells extracellular fluid (DU145 solution), androgen-dependent LNCaP human prostate cancer cells (LNCaP cells), androgen-dependent LNCaP human prostate cancer cells extracellular fluid (LNCaP solution), androgen-independent PC-3 human prostate cancer cells (PC-3 cells), and androgen-independent PC-3 human prostate cancer cells extracellular



Figure 1 PCA plot for each group. The sample numbers used in the PCA plot for group 1, 2, 3, 4, 5, 6, 7 and 8 are two, respectively. The PCA plot is generated by analyzing the principle component with Simca-P13.0 after drawing the peak information matrix extracted from the total ion graph. PCA, principal component analysis.

fluid (PC-3 solution) were divided into groups 1, 2, 3, 4, 5, 6, 7 and 8, respectively (n=2 each). Group 9 was included as a quality control and indicates instrument stability during the detection process.

GC-MS analysis

A 200-µL sample was used for GC-MS metabolomic analysis on an Agilent 7890A/5975C GC-MS as previously described (17) using an Agilent J&W HP-5ms capillary column (30 m × 0.25 mm × 0.25 µm). Instrument parameters were set as follows: inlet temperature, 280 °C; electrospray ionization ion source temperature, 230 °C; quadrupole temperature, 150 °C; carrier gas, high-purity helium (purity greater than 99.999%); splitless injection volume, 1.0 µL (18). The following temperature program was used: 80 °C for 2 min, increase to 320 °C at 10 °C/min, and maintain at 320 °C for 6 min. Mass spectra were collected in full scan mode from m/z 50-550. Random sequences of consecutive samples were analyzed to avoid random errors from instrumental signal fluctuations (19). Calculation of the fold change: First, we calculated the difference in the mean value of the peak intensity for metabolites in two groups and the ratio between the mean value of the two groups. Then we calculated the log2 value of the ratio. The final result indicates the fold change. Positive values indicate significant metabolites differences between the two groups, and negative

values indicate the opposite.

Data analysis

The data were analyzed in R using the XCMS software package for GC-MS data preprocessing (20), including removal of column bleed and impurity peaks introduced during sample preparation. The final result was stored as a two-dimensional data matrix including each observable (sample) and peak intensities (21). All data were normalized to the total signal integration. The data matrix was edited using Simca-P software (version 13.0) and analyzed using principal component analysis (PCA). The data of the metabolomes in extracellular and intracellular fluid were analyzed by PCA, partial least squares discriminant analysis (PLS-DA), and Student's *t*-test. A P value <0.05 was considered significant.

Results

Overall analysis

We recovered 1,474 samples of fragment ion. Metabolic differences within a group and comparisons between samples were determined by body composition analysis. The most intuitive data format is unit variance (UV) scaling and mean-centering after formal analysis in Simca-P. However, differences between groups were analyzed using PCA. We identified two main components with cumulative $R^2X = 0.568$ and $Q^2 = 0.409$. The PCA score plot is shown in *Figure 1*. R^2X is a non-supervisory metric that indicates the quality of the PCA model for identifying the main parameters. When R^2X is greater than 0.4, the modeling is reliable. Differences in metabolism can be explained using PCA in combination with relative PLS-DA to reflect real differences in the experimental group in the middle of the figure 1).

Metabolic differences between groups 1 and 2

The differences of metabolites were compared between group 1 (RWPE cells) and group 2 (RWPE solution). PCA identified two main components accounting for metabolic differences between the groups with cumulative $R^2X = 0.918$ and $Q^2 = 0.612$. To uncover any significant differences in metabolite levels, we used supervisory PLS-DA. The PLS-DA score plot showed significant differences between the two groups, and we calculated the variable influence on projection (VIP) scores using an orthogonal (O) PLS-

Table 1 Metabolic differences between groups 1 and 2

VIP	m/z	rt (min)	Name	P value	Fold change (2/1)	
1.095	373	11.73	5-pentanediamine	0.023	-1.777	
1.098	342	13.94	D-erythro-pentitol	0.021	3.090	
1.102	75	7.70	1,2-bis(hydroxymethyl) cyclohexane	0.017	1.025	
1.121	174	12.84	1H-indole-3-ethylamine	0.000	2.460	
1.115	200	8.78	3-methylvalerate	0.005	8.341	
1.074	407	16.68	4-amino-1-oxo-1,2- dihydrophthalazine	0.042	8.144	
1.075	341	12.72	4-aminobutyric acid	0.041	2.452	
1.112	311	7.28	4-hydroxybenzoxazolone	0.008	1.590	
1.121	174	12.67	A-aminoisobutyrate	0.000	2.449	
1.087	392	8.23	A-hydroxybutyric acid	0.030	-0.675	
1.083	166	6.80	A-hydroxycyclohexene	0.034	-0.400	
1.099	341	20.12	Eicosanoids	0.019	-4.755	
1.071	103	17.12	D-fructose	0.044	8.418	
1.121	129	17.27	D-galactose	0.000	5.082	
1.121	133	17.52	D-glucitol	0.000	7.972	
1.118	157	16.76	D-glucose	0.002	8.959	
1.121	117	17.44	D-mannose	0.000	7.861	
1.106	339	19.94	Estradiol	0.013	-3.925	
1.097	221	5.92	Glycol	0.022	-2.814	
1.121	103	17.71	Galactose	0.000	5.391	
1.074	325	10.57	Glycerate	0.042	0.771	
1.108	205	9.81	Glycerin	0.012	1.154	
1.078	174	10.27	Glycine	0.039	4.965	
1.090	174	12.23	Glycylglycine	0.027	2.595	
1.068	188	8.66	Glyoxylate	0.047	2.453	
1.110	144	11.61	Homocysteine	0.010	2.218	
1.108	432	19.14	Inositol	0.012	1.144	
1.120	86	8.44	Isoleucine	0.000	5.301	
1.121	147	6.88	Lactate	0.000	2.702	
1.070	226	16.49	L-asparagine	0.045	-6.774	
1.120	86	8.13	Leucine	0.001	5.246	
1.120	72	7.22	L-valine	0.001	4.333	
1.082	242	19.67	N-acetylglucosamine	0.034	-1.303	

Table 1 (continued)

Table 1 (continued)

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	VIP	m/z	rt (min)	Name	P value	Fold change (2/1)
	1.079	232	7.97	Oxalic acid	0.037	3.896
	1.121	60	17.62	Palmitic acid	0.000	2.610
	1.086	180	9.86	Phosphate	0.031	0.457
	1.121	447	13.34	Pregn-5-en-11-one	0.000	-1.093
	1.120	319	15.44	Ribitol	0.001	-3.022
	1.081	132	9.56	Serine	0.036	4.254
	1.106	96	12.48	Fine	0.013	2.682
	1.117	284	19.46	Stearate	0.003	4.474
	1.083	132	18.38	Myristate	0.034	-2.960
1						

VIP, variable importance in the projection; rt, retention time.

DA model and P values using Student's *t*-test. VIP >1 and P<0.05 were taken as the thresholds for significance. We identified more than 42 differentially expressed metabolites, mainly sugars, organic acids, and amino acids (*Table 1*), between the groups, indicating differences between the intracellular fluid and extracellular fluid metabolomes of normal prostate epithelial cells.

Metabolic differences between groups 1 and 3

Group 1 was compared with group 3 (DU145 cells) to reveal any differences between the intracellular fluid metabolites. PCA revealed two main components with cumulative R^2X =0.862 and Q^2 =0.341. To reveal any significant differences between the metabolomes of the two groups, further analysis was performed using supervisory PLS-DA. The PLS-DA score plot showed significant differences between the two groups (P<0.05), indicating three main components and a quadrature component specific to the metabolites, and yielded more than 23 differentially expressed metabolites (*Table 2*), including cholesterol, stearic acid, 4-aminobutyric acid, and estradiol.

Metabolic differences between groups 1 and 5

The differences of intracellular fluid metabolites between group 1 and group 5 (LNCaP cells) were compared. PCA determined two main components with cumulative R^2X =0.859 and Q^2 =0.355, revealing metabolic differences Table 2 Metabolic differences between groups 1 and 3

Fold

Table 3 Metabolic differences between groups 1 and 5

VIP	m/z	rt (min)	Name	P value	Fold change (3/1)
1.365	69	12.86	1H-indole ethylamine	0.003	1.532
1.341	519	12.73	4-aminobutyric acid	0.020	7.055
1.360	288	12.67	A-aminoisobutyrate	0.006	1.230
1.364	234	6.77	A-hydroxycyclohexene	0.003	2.220
1.361	353	28.29	Cholesterol	0.006	20.429
1.360	180	17.12	Fructose	0.007	3.301
1.361	160	17.27	Galactose	0.006	0.328
1.358	133	17.52	D-sorbitol	0.008	0.315
1.334	376	17.44	D-mannose	0.025	0.026
1.356	262	6.49	D-threo-2,5-hexodiulose	0.009	1.870
1.305	339	19.94	Estradiol	0.047	5.526
1.334	221	5.92	Ethylene glycol	0.025	0.205
1.325	205	17.71	Dulcitol	0.032	0.515
1.319	191	18.01	Glucose	0.036	0.574
1.339	325	10.57	Glycerate	0.021	1.358
1.347	190	9.81	Glycerin	0.016	2.561
1.317	135	19.14	Inositol	0.038	1.779
1.316	76	6.86	Lactate	0.038	1.581
1.365	258	16.46	Asparagine	0.003	0.029
1.351	242	19.67	N-acetylglucosamine	0.013	0.081
1.357	60	17.62	Palmitic acid	0.008	24.400
1.367	147	15.44	Ribitol	0.001	0.102
1.368	60	19.46	Stearate	0.000	28.068

VIP, variable importance in the projection; rt, retention time.

between the groups. PLS-DA further revealed more than 46 metabolites that were significantly different between the two groups (*Table 3*), including cholesterol, glycine, homocysteine, proline, and serine.

Metabolic differences between groups 1 and 7

The differences of intracellular fluid metabolites between group 1 and group 7 (PC-3 cells) were compared. PCA determined two main components with cumulative R^2X =0.88 and Q^2 =0.425. The PLS-DA score plot revealed

VIP	m/z	rt (min)	Name	P value	change (5/1)
1.260	373	11.73	5-pentanediamine	0.020	-1.362
1.274	69	12.86	1H-indole-3-ethanamine	0.010	0.951
1.253	87	7.18	2-heptanone	0.026	1.730
1.283	173	16.68	4-amino-1-oxo-1,2- dihydrophthalazine	0.002	4.475
1.273	519	12.73	4-aminobutyric acid	0.010	2.593
1.254	151	7.29	4-hydroxybenzoxazolone	0.024	0.287
1.225	169	12.67	A-aminoisobutyrate	0.047	0.476
1.274	96	7.07	Acetic acid	0.009	1.191
1.245	234	6.77	A-hydroxycyclohexene	0.031	1.372
1.236	74	6.72	Alanine	0.038	0.531
1.242	341	20.12	Eicosanoids	0.034	1.342
1.280	353	28.29	Cholesterol	0.004	4.792
1.282	180	17.12	D-fructose	0.003	1.560
1.236	160	17.27	D-galactose	0.039	-0.457
1.274	73	17.52	Sorbitol	0.009	1.508
1.277	160	16.76	D-glucose	0.007	1.032
1.273	262	6.49	D-threo-2,5-hexodiulose	0.010	0.874
1.266	339	19.94	Estradiol	0.015	1.497
1.246	221	5.92	Glycol	0.031	-1.812
1.235	103	17.71	Dulcitol	0.040	-0.866
1.283	346	18.11	Glucose	0.002	-1.719
1.276	325	10.57	Glycerate	0.007	0.629
1.266	72	9.82	Glycerin	0.015	0.944
1.282	174	10.27	Glycine	0.003	4.073
1.265	162	12.23	Glycylglycine	0.016	2.830
1.266	216	8.66	Glyoxylate	0.015	3.141
1.285	144	11.61	Homocysteine	0.001	8.610
1.283	75	8.44	Isoleucine	0.002	0.777
1.277	76	6.86	Lactate	0.007	0.566
1.285	226	16.49	L-asparagine	0.000	4.281
1.233	86	8.13	Leucine	0.041	1.898
1.281	158	10.08	L-threonine	0.004	4.530

Table 3 (continued)

7.22

L-valine

1.250 72

0.028

1.663

24010 0 (00000000000000)	Table 3	(continued))
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VIP	m/z	rt (min)	Name	P value	Fold change (5/1)
1.265	242	19.67	N-acetylglucosamine	0.016	-2.397
1.225	152	7.92	Oxalic acid	0.047	0.526
1.233	60	17.62	Palmitic acid	0.041	2.475
1.235	270	9.86	Phosphate	0.039	-0.223
1.275	450	13.33	Pregn-5-en-11-one	0.009	-1.125
1.265	143	10.15	Proline	0.016	4.371
1.227	174	11.89	Putrescine	0.046	2.336
1.273	240	10.38	Pyrrole-2-carboxylic acid	0.010	3.227
1.283	147	15.44	Ribitol	0.002	-1.334
1.284	132	9.56	Serine	0.001	5.429
1.273	168	12.48	Spermine	0.010	3.225
1.280	60	19.46	Stearate	0.005	2.850
1.228	132	18.38	Myristic	0.045	1.408

VIP, variable importance in the projection; rt, retention time.

significant differences (P<0.05) with two main components and identified more than 36 significant metabolite differences (*Table 4*), with the largest differences for glucose, homocysteine, and serine.

Metabolic differences between groups 2 and 4

The differences of extracellular fluid metabolites fluid metabolites between group 2 and group 4 (DU145 solution) were compared. PCA determined two main principal components with cumulative $R^2X = 0.83$ and $Q^2 = 0.183$. The PLS-DA score plot showed significant differences between the groups and received a master component and a quadrature component (*Table 5*). The appearance of the master component indicates that the main component in the metabolic compound has been extracted, and the quadrature component represents the removal of interferents. The OPLS-DA model identified more than 20 differential metabolites, with significantly elevated cholesterol in group 4 (P<0.05).

Metabolic differences between groups 2 and 6

The differences of extracellular metabolites between group

Table 4 Metabolic differences between groups 1 and 7

VIP	m/z	rt (min)	Name	P value	Fold change (7/1)
1.154	342	13.94	D-red E sugar alcohol	0.047	2.574
1.192	69	12.86	1H-indole ethylamine	0.016	0.900
1.175	87	7.18	2-heptanone	0.030	1.713
1.153	173	16.68	4-amino-1-oxo-2- dihydrophthalazine	0.047	2.280
1.206	519	12.73	4-aminobutyric acid	0.004	2.539
1.200	122	7.29	4-hydroxybenzoxazolone	0.009	0.156
1.153	169	12.67	A-amino isobutyric acid	0.047	0.597
1.200	96	7.07	Acetic acid	0.009	1.173
1.180	234	6.77	A-hydroxycyclohexene	0.025	1.404
1.179	74	6.72	Alanine	0.026	0.625
1.202	180	17.12	D-fructose	0.007	1.869
1.208	160	17.27	D-galactose	0.002	3.116
1.208	73	17.52	Sorbitol	0.002	2.393
1.208	160	16.76	D-glucose	0.002	3.886
1.197	376	17.44	D-mannose	0.011	1.308
1.204	339	19.94	Estradiol	0.006	1.706
1.172	221	5.92	Glycol	0.032	-2.013
1.191	205	17.71	Dulcitol	0.016	-0.801
1.209	346	18.01	Glucose	0.002	4.292
1.210	341	10.57	Glycerate	0.000	0.490
1.197	73	9.82	Glycerin	0.011	0.739
1.156	174	10.27	Glycine	0.045	2.327
1.160	162	12.23	Glycylglycine	0.042	2.787
1.210	144	11.61	Homocysteine	0.000	8.841
1.197	135	19.14	Inositol	0.011	1.103
1.201	75	6.86	Lactate	0.008	0.724
1.205	226	16.49	L-asparagine	0.004	2.148
1.158	72	7.22	L-valine	0.044	1.331
1.188	243	19.67	N-acetylglucosamine	0.018	-2.782
1.157	286	9.86	Phosphate	0.044	-0.432
1.208	450	13.33	Pregn-5-en-11-one	0.002	-1.429
1.209	147	15.44	Ribitol	0.001	-2.310
1.181	132	9.56	Serine	0.024	3.069
1.173	168	12.48	Spermine	0.031	3.192
1.209	60	19.46	Stearate	0.001	2.743
1.160	325	10.33	Succinic acid	0.042	0.425
VIP. va	ariabl	le impo	rtance in the proiection: rt.	retentio	n time.

Table 5 Metabolic differences between groups 2 and 4

			0 1		
VIP	m/z	rt (min)	Name	P value	Fold change (4/2)
1.436	75	7.70	1,2-bis(hydroxymethyl) cyclohexane	0.004	-0.811
1.406	311	7.28	4-hydroxybenzoxazolone	0.016	-1.318
1.256	316	28.19	Cholesterol	0.006	3.878
1.441	173	17.12	D-fructose	0.014	-1.831
1.257	161	17.38	D-galactose	0.000	-10.707
1.442	73	17.52	D-glucitol	0.001	-2.004
1.118	160	16.76	D-glucose	0.002	-8.283
1.219	376	17.44	D-mannose	0.000	-9.476
1.372	262	5.92	Glycol	0.021	0.776
1.424	183	17.71	Galactose	0.019	-0.228
1.402	220	9.81	Glycerin	0.046	0.354
1.230	290	14.75	Indolepropionate	0.004	-2.827
1.014	178	19.14	Inositol	0.041	-0.172
1.203	56	8.45	Isoleucine	0.010	-0.839
1.440	76	6.86	Lactate	0.038	-0.206
1.426	61	8.14	Leucine	0.003	-0.446
1.428	72	7.22	L-valine	0.011	-0.915
1.307	242	19.67	N-acetylglucosamine	0.018	-3.630
1.324	400	24.38	Oleic acid amide	0.030	-2.499
1.442	147	15.44	Ribitol	0.047	-0.691

VIP, variable importance in the projection; rt, retention time.

2 and group 6 (LNCaP solution) were compared. PCA determined two main components with cumulative $R^2X = 0.822$ and $Q^2 = -0.0154$, indicating significant metabolic differences between the two groups (P<0.05). The PLS-DA score plot indicated significant difference between the two groups and received a master component and a quadrature component (*Table 6*). Fifteen metabolites were significantly increased in group 6 relative to group 2, including cholesterol, serine, alanine, and saccharides.

Metabolic differences between groups 2 and 8

The differences of extracellular metabolites between group 2 and group 8 (PC-3 solution) were compared. Two

Table 6 Metabolio	differences	between	groups 2	and 6
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1.436 75 7.70 1,2-bis(hydroxymethyl) cyclohexane 0.004 -0.437 1.431 293 12.86 1H-indole-3-ethylamine 0.008 -0.216 1.429 200 8.78 3-methacrylic acid 0.009 -2.202 1.406 311 7.28 4-hydroxybenzoxazolone 0.025 -0.858 1.440 74 6.72 Alanine 0.002 1.722 1.388 342 20.13 Eicosanoids 0.038 0.950 1.431 443 28.29 Cholesterol 0.001 1.255	;
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1.441 173 17.12 D-fructose 0.001 1.255	
1.438 168 17.38 D-galactose 0.003 0.310	
1.442 73 17.52 D-glucitol 0.000 1.768	
1.380 392 16.78 D-glucose 0.043 0.540	
1.404 343 17.44 D-mannose 0.027 0.212	
1.372 262 5.92 Glycol 0.049 0.538	
1.424 183 17.71 Galactose 0.013 -0.271	
1.402 220 9.81 Glycerin 0.028 -0.483	
1.385 144 11.61 Homocysteine 0.040 0.294	
1.440 76 6.86 Lactate 0.001 -1.001	
1.436 182 16.49 L-asparagine 0.005 -0.281	
1.426 61 8.14 Leucine 0.012 0.468	
1.428 72 7.22 L-valine 0.010 0.645	
1.389 167 7.92 Oxalic acid 0.037 -0.107	
1.407 60 17.62 Palmitic acid 0.025 -0.150	
1.404 451 13.33 Pregn-5-en-11-one 0.027 -0.413	
1.442 147 15.44 Ribitol 0.001 2.388	
1.426 132 9.56 Serine 0.011 2.005	
1.419 132 18.38 Myristate 0.016 1.014	

VIP, variable importance in the projection; rt, retention time.

principal components were obtained with cumulative R^2X =0.888 and Q^2 =0.54 by PCA. The PLS-DA score plot demonstrated significant differences (P<0.05) between the two groups and received a master component and a quadrature component. More than 30 significantly different metabolites were identified (*Table 7*) with 10 increased in group 8, including cholesterol, alanine, serine, stearic acid,

Table 7 Metabolic differences between groups 2 and 8

VIP	m/z	rt (min)	Name	P value	Fold change (8/2)
1.296	75	7.702	1,2-bis(hydroxymethyl) cyclohexene	0.002	-0.819
1.255	293	12.865	1H-indole ethylamine	0.034	-0.392
1.245	200	8.776	3-methylpentanoic acid	0.042	-0.857
1.257	311	7.280	4-hydroxybenzoxazolone	0.032	-1.017
1.256	169	12.667	A-aminoisobutyric acid	0.033	-0.144
1.269	234	6.771	Cholesterol	0.024	3.063
1.297	74	6.724	Alanine	0.002	1.727
1.297	342	20.131	Eicosanoids	0.002	2.559
1.297	173	17.125	Fructose	0.002	-1.652
1.285	168	17.381	Galactose	0.011	-0.986
1.290	73	17.518	D-sorbitol	0.007	-0.585
1.296	343	17.440	D-mannose	0.002	-1.002
1.266	262	5.920	Ethylene glycol	0.026	0.709
1.265	322	17.710	Dulcitol	0.026	-0.584
1.265	346	18.013	Glucose	0.026	2.363
1.286	104	9.812	Glycerin	0.011	-0.278
1.287	144	11.606	Homocysteine	0.009	-1.051
1.272	181	19.142	Inositol	0.021	-0.154
1.290	56	8.448	Isoleucine	0.007	-0.515
1.266	76	6.860	Lactate	0.026	-0.539
1.281	70	8.140	Leucine	0.014	-0.508
1.276	242	19.672	N-acetylglucosamine	0.018	-3.725
1.279	488	24.384	Oleic acid amide	0.016	-3.109
1.276	235	7.961	Oxalic acid	0.018	2.374
1.253	60	17.616	Palmitic acid	0.035	2.125
1.298	449	13.330	Pregn-5-en-11-one	0.001	-0.940
1.288	147	15.437	Ribitol	0.009	0.722
1.235	159	9.555	Serine	0.050	0.829
1.252	241	19.460	Stearate	0.036	3.386
1.294	132	18.379	Myristate	0.004	1.955

VIP, variable importance in the projection; rt, retention time.

arachidic acid, and carbohydrates.

Metabolic differences between groups 3 and 4

The differences of metabolites were compared between group 3 and group 4. PCA determined two main components with cumulative $R^2X = 0.823$ and $Q^2 = 0.102$, indicating significant metabolic differences between the two groups (P<0.05). Furthermore, the PLS-DA score plot revealed significant differences and received a master component and a quadrature component. The OPLS-DA model identified 27 significantly different metabolites (*Table 8*), with galactose, sugars, leucine, L-valine, and phosphoric acid significantly increased.

Metabolic differences between groups 5 and 6

The differences of metabolites were compared between group 5 and group 6. PCA determined two main components with cumulative $R^2X = 0.898$ and $Q^2 = 0.521$, indicating significant metabolic differences between the two groups (P<0.05). A PLS-DA score plot showed significant differences and received a master component and a quadrature component. More than 37 differentially expressed metabolites were identified (*Table 9*), with 20 increased in the extracellular fluid, including sugars, L-valine, leucine, and 3-methylvaleric acid.

Metabolic differences between groups 7 and 8

The differences of metabolites were compared between group 7 and group 8. PCA determined two main components with cumulative $R^2X = 0.921$ and $Q^2 = 0.661$. The PLS-DA score plot indicated significant differences between the two groups and received a master component and a quadrature component. The OPLS-DA model identified more than 40 differences in metabolites (*Table 10*), including carbohydrates, glycine, leucine, serine, L-threonine, and other organic acids.

Discussion

Metabolomics can reveal the metabolic microenvironment

Table 8 Metabolic differences between groups 3 and 4

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Table 9 Metabolic differences between groups 5 and 6

			U 1						• •		
VIP	m/z	rt (min)	Name	P value	Fold change (4/3)	VIP	m/z	rt (min)	Name	P value	Fold change (6/5)
1.29	1 66	7.702	1,2-bis(hydroxymethyl)	0.032	0.623	1.126	373	11.73	5-norvaline	0.018	0.017
			cyclohexane			1.145	69	12.86	1H-indole-3-ethylamine	0.001	2.541
1.30	7 69	12.859	1H-indole-3-ethylamine	0.020	2.532	1.146	384	22.97	1-monopalmitate	0.000	-0.453
1.30	2 200	8.776	3-methylvalerate	0.024	7.025	1.140	87	7.18	2-heptanone	0.006	-2.297
1.33	4 233	8.205	A-hydroxy butyrate	0.000	6.831	1.092	181	7.12	2-pentanone	0.048	-0.112
1.29	1 166	6.802	A-hydroxycyclohexene	0.032	-0.566	1.130	200	8.78	3-methylvalerate	0.014	8.457
1.31	0 74	6.724	Alanine	0.018	-2.010	1.146	174	12.67	A-aminoisobutyric acid	0.001	1.935
1.29	0 341	20.124	Eicosanoids	0.032	-2.005	1.146	96	7.07	Acetic acid	0.001	-1.494
1.32	6 353	28.288	Cholesterol	0.006	-7.547	1.146	233	8.21	A-hydroxy butyrate	0.000	4.745
1.27	1 180	17.120	D-fructose	0.047	3.076	1.143	74	6.72	Alanine	0.003	-0.549
1.33	3 129	17.270	D-galactose	0.000	4.508	1.133	341	20.12	Eicosanoids	0.012	-4.202
1.32	5 73	17.518	D-alucitol	0.007	5.277	1.146	180	17.12	D-fructose	0.000	5.810
1 20	3 157	16 762	D-alucose	0.031	2 473	1.141	129	17.27	D-galactose	0.004	5.324
1.20	0 262	6 / 87	D-throo-2 5-boxodiuloso	0.046	1 328	1.146	133	17.52	D-glucitol	0.000	7.903
1.27	6 220	10.045	Estradiol	0.025	-1.020	1.144	157	16.76	D-glucose	0.002	8.845
1.20	5 100	17,710	Colostan	0.035	-4.403	1.146	117	17.44	D-mannose	0.000	8.672
1.32	5 103	17.710	Galaciose	0.006	5.733	1.122	202	10.04	D-three-2,5-nexodiulose	0.021	-0.745
1.29	5 345	18.011	Glucopyranose	0.029	-3.094	1.140	339	19.94	Chical	0.006	-4.388
1.30	8 325	10.573	Glycerate	0.019	0.389	1.120	102	0.92	Giycol	0.019	-0.956
1.29	5 72	9.820	Glycerin	0.029	-0.236	1.145	72	0.82	Glucorin	0.001	1 3/7
1.28	3 135	19.139	Inositol	0.038	-0.501	1.140	17/	9.02 10.27	Glycenn	0.001	-1.347
1.32	2 75	8.436	Isoleucine	0.009	1.327	1.100	162	12.23	Glycylalycine	0.038	_1 107
1.33	1 73	6.867	Lactate	0.002	1.513	1.102	216	8.66	Glyoxylate	0.036	-0.335
1.31	7 226	16.494	L-asparagine	0.012	-7.652	1 1 4 6	144	11.61	Homocysteine	0.000	-6.097
1.31	0 86	8.134	Leucine	0.018	4.021	1 133	319	19.14	Inositol	0.001	0.680
1.31	6 72	7.222	L-valine	0.013	3.063	1.146	75	8.44	Isoleucine	0.000	1.795
1.30	8 138	9.875	Phosphate	0.019	2.555	1.144	73	6.87	Lactate	0.002	0.766
1.27	6 323	15.434	Ribitol	0.043	1.369	1.146	226	16.49	L-asparagine	0.000	-10.587
1.27	2 284	19.460	Stearate	0.046	-1.326	1.146	86	8.13	Leucine	0.001	3.879
VIP,	variable	importa	nce in the projection; rt, ret	ention tim	е.	1.145	72	7.22	L-valine	0.001	3.315
						1.142	314	9.87	Phosphate	0.004	0.655

VIP, variable importance in the projection; rt, retention time.

Ribitol

Serine

Stearate

Myristate

Pyrrole-2-carboxylic acid 0.046

1.094 240 10.38

132

284

1.126 132 18.38

15.43

9.56

19.46

1.144 323

1.119

1.123

0.002

0.024

0.021

0.018

-0.687

2.090

0.830

-2.240

-3.354

Table 10 Metabolic differences between groups 7 and 8

VIP	m/z	rt (min)	Name	P value	Fold change (6/5)
1.110	75	7.70	1,2-bis(hydroxymethyl) cyclohexane	0.028	-0.247
1.137	69	12.86	1H-indole-3-ethylamine	0.004	2.401
1.125	87	7.18	Heptanone	0.014	-2.163
1.127	200	8.78	3-methylvalerate	0.013	7.615
1.113	173	16.68	4-amino-1-oxo-1,2- dihydrophthalazine	0.025	0.680
1.107	519	12.73	4-aminobutyric acid	0.030	0.385
1.139	174	12.67	A-aminoisobutyric acid	0.002	1.688
1.097	96	7.07	Acetic acid	0.038	-0.527
1.138	233	8.21	A-hydroxy butyrate	0.003	4.557
1.119	234	6.77	A-hydroxycyclohexene	0.019	2.970
1.097	459	16.22	Arabinofuranosyl	0.039	0.488
1.141	180	17.12	D-fructose	0.000	3.416
1.136	129	17.27	D-galactose	0.005	2.826
1.127	133	17.52	D-glucitol	0.013	2.868
1.141	157	16.76	D-glucose	0.000	4.738
1.141	117	17.44	D-mannose	0.000	5.802
1.139	339	19.94	Estradiol	0.002	-4.824
1.119	58	5.94	Glycol	0.020	1.703
1.137	103	17.71	Galactose	0.004	5.279
1.132	204	18.01	Glucopyranose	0.009	7.922
1.135	341	10.57	Glycerate	0.006	0.378
1.128	72	9.82	Glycerin	0.012	-0.412
1.141	174	10.27	Glycine	0.001	2.028
1.111	216	8.66	Glyoxylate	0.026	0.628
1.141	144	11.61	Homocysteine	0.000	-7.673
1.137	135	19.14	Inositol	0.004	-0.791
1.137	75	8.44	Isoleucine	0.004	1.013
1.139	73	6.87	Lactate	0.002	1.162
1.141	226	16.49	L-asparagine	0.000	-8.607
1.133	86	8.13	Leucine	0.007	2.486
1.125	144	9.00	L-norvaline	0.015	4.558
1.129	158	10.08	L-threonine	0.011	4.488
1.141	72	7.22	L-valine	0.000	2.901

Table 10 (continued)

Table 10 (continued)

VIP	m/z	rt (min)	Name	P value	Fold change (6/5)
1.109	60	17.62	Palmitic acid	0.028	2.959
1.136	314	9.87	Phosphate	0.005	0.750
1.114	450	13.33	Pregn-5-en-11-one	0.024	-0.853
1.107	240	10.38	Pyrrole-2-carboxylic acid	0.030	1.075
1.121	147	15.44	Ribitol	0.018	0.744
1.138	132	9.56	Serine	0.003	2.024
1.121	341	10.33	Succinic acid	0.018	0.452

VIP, variable importance in the projection; rt, retention time.

of cells, thereby identifying changes in gene regulation and metabolic activity and reactions (22,23). Tumor cell metabolism is inseparable from the surroundings because tumor cell growth requires key metabolites from the microenvironment (24-27). In evaluating the diagnosis, prognosis, and therapeutic efficacy for a disease, biomarkers play an increasingly important role. GC-MS-based metabolomics analyses have potential effects in evaluating the development of cancer through metabolic screening and earlier identification of more sensitive diagnostic markers (24-27). In this study, we found significant differences in metabolite expression between prostate cancer cells and normal prostate epithelial cells. These biomarkers, including cholesterol, amino acid, homocysteine, proline, serine, alanine, and saccharides, showed significantly different average levels between tumor groups and the normal control group; detection of the intracellular and extracellular fluids showed good consistency.

Cholesterol was identified with a relatively high significance in all comparisons. Therefore, we focused on the role of cholesterol metabolism in the growth of prostate cancer cells. Cholesterol is an important building block for cell membranes, synthesis of bile acids, vitamin D, raw steroid hormones, and their derivatives (28). Acetyl-CoA is the starting material for forming isopentenyl pyrophosphate (IPP), which is converted into squalene and subsequently into cholesterol. As a synthetic steroid hormone precursor, cholesterol can be enzymatically converted into androgens, which may affect the androgen receptor signaling pathway and promote the acceptance of androgen deprivation therapy for prostate cancer patients with castration-resistant tumor growth (29,30). High physiological cholesterol levels can promote androgen synthesis in the prostate gland, and studies have demonstrated a connection between the occurrence of prostate cancer and high cholesterol levels (31). Rapid reproduction of tumor cells might also be associated with high cholesterol levels, as previous studies showed that artificially raising cholesterol levels promoted prostate cancer proliferation, migration, and invasion, whereas lowering cholesterol levels and interfering with growth factor signaling pathways could induce tumor cell apoptosis (29,30).

Glucose was also significantly increased in prostate cancer groups herein. A previous report indicated that patients with diabetes for 2–5 years exhibited increased incidence of prostate cancer; thus, patients with diabetes should pay attention to cholesterol levels in screening for prostate cancer (32). Because tumor cell energy metabolism occurs mainly through anaerobic glycolysis of glucose, hyperglycemia will promote tumor cell growth. Furthermore, long-term exposure to elevated blood sugar levels can gradually thicken the basement membrane of capillaries, decrease the permeability, impair mitochondrial respiratory enzymes and cellular respiration barriers, and increase glycolysis, which ultimately selects for tumor cells (33).

The serine protease hepsin and cysteine-rich secretory protein 3 (CRISP3) have been reported as diagnostic markers for prostate cancer. Immunohistochemical studies demonstrated high concentrations of serine protease in prostate cancer and prostatic intraepithelial neoplasia (PIN) (34). CRISP3 is a secreted protein produced in the male reproductive tract and is present at high levels in seminal plasma samples. Immunohistochemical staining of prostate tissue showed high levels of CRISP3 in PIN and prostate cancer samples. The relationship between CRISP3 and prostate cancer accompanied by radical prostatectomy in patients with tissue micro- β 1 protamine was evaluated, and CRISP3 was identified as an independent predictor for prostate cancer recurrence (35,36).

In summary, our results showed that GC-MS-based metabolomics comparison of normal prostate epithelial cells and prostate cancer cells could reveal similarities and differences in prostate cancer-specific capture. Our OPLS-DA pairwise modeling analysis, combined with Student's t-test, identified significant differences in metabolite expression, including amino acids, organic acids, sugars, and cholesterol. Of the four categories, combined with prostate-specific antigen (PSA), cholesterol showed obvious potential as a biomarker for clinical diagnosis of prostate cancer. Furthermore, our pairwise comparisons of the extracellular

fluid and intracellular fluid of normal and cancer cells reflected the differences between normal prostate epithelial cells and prostate cancer cells, which could reduce the necessity for invasive biopsy. Thus, metabolomics studies of prostate cancer using GC-MS can help identify more meaningful tumor markers for prostate cancer diagnosis and treatment, facilitate exploration of the pathogenesis of prostate cancer, and provide the basis for new ideas.

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Footnote

Conflicts of Interest: All authors have completed the ICMJE uniform disclosure form (available at http://dx.doi. org/10.21037/tcr.2016.06.15). The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. The study was conducted in accordance with the Declaration of Helsinki (as revised in 2013).

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