Integrated analysis of human influenza A (H1N1) virus infectionrelated genes to construct a suitable diagnostic model

WENBIAO CHEN; KEFAN BI; JINGJING JIANG; XUJUN ZHANG; HONGYAN DIAO*

State Key Laboratory for Diagnosis and Treatment of Infectious Diseases, National Clinical Research Center for Infectious Diseases, Collaborative Innovation Center for Diagnosis and Treatment of Infectious Diseases, The First Affiliated Hospital, College of Medicine, Zhejiang University, Hangzhou, 310003, China

Key words: Human influenza A, H1N1 virus, Gene, Diagnosis model

Abstract: The genome characteristics and structural functions of coding proteins correlate with the genetic diversity of the H1N1 virus, which aids in the understanding of its underlying pathogenic mechanism. In this study, analyses of the characteristic of the H1N1 virus infection-related genes, their biological functions, and infection-related reversal drugs were performed. Additionally, we used multi-dimensional bioinformatics analysis to identify the key genes and then used these to construct a diagnostic model for the H1N1 virus infection. There was a total of 169 differently expressed genes in the samples between 21 h before infection and 77 h after infection. They were used during the proteinprotein interaction (PPI) analysis, and we obtained a total of 1725 interacting genes. Then, we performed a weighted gene co-expression network analysis (WGCNA) on these genes, and we identified three modules that showed significant potential for the diagnosis of the H1N1 virus infection. These modules contained 60 genes, and they were used to construct this diagnostic model, which showed an effective prediction value. Besides, these 60 genes were involved in the biological functions of this infectious virus, like the cellular response to type I interferon and in the negative regulation of the viral life cycle. However, 20 genes showed an upregulated expression as the infection progressed. Other 36 upregulated genes were used to examine the relationship between genes, human influenza A virus, and infection-related reversal drugs. This study revealed numerous important reversal drug molecules on the H1N1 virus. They included rimantadine, interferons, and shikimic acid. Our study provided a novel method to analyze the characteristic of different genes and explore their corresponding biological function during the infection caused by the H1N1 virus. This diagnostic model, which comprises 60 genes, shows that a significant predictive value can be the potential biomarker for the diagnosis of the H1N1 virus infection.

Introduction

Influenza is a highly contagious acute respiratory disease caused by infection of the host respiratory tract that is triggered by influenza viruses. It is characterized by strong and fast infectivity, general susceptibility, high incidence, and is prone to mutational changes (Uyeki *et al.*, 2019). Globally, it has caused several explosive epidemics making it a public health problem of gravest concern (Fineberg, 2014). A novel swine-origin Influenza A (H1N1) virus, one of the most common infectious viruses in humans, is classified within the myxoviridae family of negative-stranded RNA viruses (Rewar *et al.*, 2015). This human influenza could be traced back to the 1918 'Spanish flu,' which approximately infected 500 million people. Since then, in birds and

mammals, this virus has led to multiple outbreaks or widespread human influenza (Lyons and Lauring, 2018). A prime example was observed in 2009, and that global pandemic dealt a heavy blow to the public health care sector (Sun *et al.*, 2016). Therefore, to tackle this infectious disease, it is imperative to add research on this existing basic theory by using molecular techniques that seek effective measures to prevent and control this infectious virus.

The seasonal epidemics and occasional pandemics caused by the H1N1 influenza virus are due to its rapid genetic mutation (Zeldovich *et al.*, 2015). During the interaction process between the mutating influenza virus and the human immune barrier, the accumulation of several genetic mutations not only attained immune escape but also weakened the efficacy of the human seasonal influenza vaccine (White and Lowen, 2018). Hence, it is necessary to study the characteristics of the gene mutations of influenza viruses and understand their underlying pathogenic

www.techscience.com/journal/biocell



This work is licensed under a Creative Commons Attribution 4.0 International License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

^{*}Address correspondence to: Hongyan Diao, diaohy@zju.edu.cn Received: 19 July 2020; Accepted: 26 November 2020

Doi: 10.32604/biocell.2021.012938

mechanism. Besides, during the infection phase which ranged from mild to more severe pneumonia, the dynamic gene expression changes and complex interactions between different genes present in the developmental stage of the disease lead to significant pathophysiological changes. Hence, understanding the gene dynamics and related functional changes caused by the H1N1 virus infection is critical to elucidate the underlying pathogenesis of this virus and to improve its clinical diagnosis and treatment (Josset et al., 2012). Previous genetic studies showed that F35L gene mutations in the polymerase acidic protein fragment of the H1N1 virus played a significant role in the emergence of any pandemic. Consequently, the polymerase acidic protein fragment was considered as a possible target for the treatment of Influenza A viruses. This was because of its essential role in the transcription and replication processes in viruses (Lutz Iv et al., 2020). Using the genome-wide association study (GWAS) method, Cheng et al. (2015) discovered that high expression of the TMPRSS2 gene found in humans increased the severity of illness associated with influenza virus infection; whereas, mutations in the MPRSS2 gene also increased the susceptibility of human infection with H7N9 avian influenza virus. However, the mechanisms by which gene mutations affect the infectious ability of the H1N1 virus, how the host immune system adapts to mutations in these genes mutations, and how the alteration of dynamic gene expression responds to the H1N1 virus induction is largely unidentified.

Early detection of H1N1 promotes individual treatment decisions and provides early data for predicting epidemics. However, early diagnosis of influenza is difficult in clinical practice (Memoli et al., 2008). The currently available for diagnosis of influenza infections, including viral isolation in cell culture, immunofluorescence assays, nucleic acid amplification tests, immunochromatography-based rapid diagnostic tests. But they are less practical in resource-limited regions due to their high cost and highly trained professionals (Vemula et al., 2016). Moreover, most of these influenza tests can detect and distinguish influenza A virus from influenza B virus, but the ability to further subtype influenza A virus is limited (Malanoski and Lin, 2013; Vemula et al., 2016). Furthermore, the recent newer diagnostic approaches, such as gene expression signatures in the peripheral blood and molecular surveillance of putative virulence factors in the experimental stage and were characterized by uncertainty (Azar and Landry, 2018). Therefore, accurate and early diagnosis of influenza viral infections are critical for the enhancement of HIN1 clinical management. Here, we used different samples to determine the gene expression difference between 21 h before infection and 77 h post-infection to construct an infectious diagnostic model multi-dimensional bioinformatics using the analysis. Subsequently, a diagnostic model was constructed, which showed good diagnostic performance for infections associated with the H1N1 virus. The genes from this model were then associated with the influenza virus infection, biological function, and infection-related reversal drugs. The study flowchart is illustrated in Fig. S1. This study could provide new insight for correlating genetic biomarkers for the research on the H1N1 virus pathogenesis and its clinical application.

Materials and Methods

Data set information and genes analysis

The data set comparing gene expression profiles before and after the manifestation of the H1N1 virus infection were downloaded from the Gene Expression Omnibus (GEO) database (https://www.ncbi.nlm.nih.gov/geo/) (GSE73072). The dataset (GSE73072) from the GEO database was designed by Duke University under a contract awarded by the DARPA Predicting Health and Disease program. During each challenge study, subjects had peripheral blood taken prior to inoculation with the virus (baseline), immediately prior to inoculation (pre-challenge), and at set intervals following challenge. RNA was extracted at Expression Analysis from whole blood. The information details of GSE73072 could be referred to the website: https://www. ncbi.nlm.nih.gov/geo/query/acc.cgi?acc=GSE73072. The samples of infectious time used in this research were represented in Tab. 1. All statistical analyses on the gene expression data were analyzed using the Linear Models for Microarray (limma) package in R language, and only genes with a fold change > 1.5 or < 0.67 and P-value < 0.05 were considered to be differentially expressed. Subsequently, the differently expressed gene sets were imported into the STRING database (https://string-db.org/) and run using the protein-protein interaction (PPI) network. Next, the PPI network was constructed using the Cytoscape software. The STRING database (http://string-db.org) aims to provide a critical assessment and integration of protein-protein interactions, including direct (physical) as well as indirect (functional) associations. The detailed procedure of the use of the STRING database could be referred to in Damian et al. manuscript (Szklarczyk et al., 2015).

WGCNA analysis for the selection of infectious modules

The WGCNA R package was used to construct the weighted gene co-expression network of the differently expressed genes. WGCNA is a systems biology analysis method to construct scale-free networks using gene expression data.

TABLE 1

Analysis of the clinical information of the samples

The infection time	Sample size
Hour –21	22
Hour 0	24
Hour 5	48
Hour 12	48
Hour 21	24
Hour 29	24
Hour 36	24
Hour 45	24
Hour 53	24
Hour 60	24
Hour 69	23
Hour 77	24

First, the similarity matrix was constructed using the gene expression data, which means calculating the absolute value of the Pearson correlation coefficient between two genes with the following formula: $S_{ij} = |1 + cor(X_i + Y_j)/2|$, where X_i and Y_i were the expression values of the i and j genes, respectively. Next, the genes expression similarity matrix was transformed into a weighted adjacency matrix using the following formula: $a_{ij} = |1 + cor(X_i + Y_j)/2|^p$, where is the soft threshold that denoted the calculation of the Pearson correlation coefficient to the power of β for each pair of genes. However, this step can strengthen strong correlations and reduce the emphasis on weak ones at the exponential level. Consequently, to estimate its connectivity property in the network, the adjacency matrix was transformed into a topological overlap matrix (TOM) (Langfelder and Horvath, 2008). The expression profiling gene data sets acquired in the above steps were used to construct the weighted coexpression network, and the screening of the module causing H1N1 infection was performed. Then, the differentially co-expressed gene sets in this module were constructed into an interactive subnet, and the core candidate genes causing the H1N1 infection were screened according to the node degree of the network. Based on the TOM value, genes were clustered using the ordinary-linkage hierarchical clustering method, and the set minimum number of genes in each network module was 20 and a cutoff height parameter of 0.8. Lastly, the hub genes with a Pearson correlation coefficient >0.8 were exported for further screening.

Functional analysis of key modules

The molecular function of key modules was determined based on Gene Ontology (GO) analyses using the clusterProfiler R package and P < 0.05 taken as the threshold for statistical significance between groups. The associational network of the biological function items and genes was depicted using the Cytoscape software.

Identification of diagnostic model

Here, we applied a random forest algorithm to construct a diagnostic model based on the main genes used to predict the H1N1 virus infection. This random forest algorithm was executed, using the randomForest R package with a threshold of ntree = 500. Random forest is an ensemble classification algorithm integrating multiple decision trees through the idea of integrated learning. Its basic unit is the decision tree, whereby each tree depends on a random vector, and all these vectors in the random forest are independent and identically distributed. The area under the curve (AUC) was used to define the diagnostic prediction. Lastly, the diagnostic model gene expression levels between 1-, 2-, and 3-days post-infection were calculated using the analysis of Variance (ANOVA).

The diagnostic model genes related to the screening of candidate molecule drugs

To discover novel candidate therapeutic drugs for the anti-H1N1 virus, we selected individual up-regulated genes from the diagnostic model and mapped them to the connectivity map (CMAP) to investigate the cellular function of genes. The CMAP shows an effective matching algorithm, and the connected graph may significantly enrich the true positive molecule drug indication gene (Cheng *et al.*, 2014). To identify the similarity, a calculation of the expression profiles of both the submitted genes and each drug-treated cell line was done. Here, the higher the similarity, the higher the consistency between the gene alternation and the submitted genes after the drug treatment.

Results

H1N1 virus infection-related gene selection and WGCNA analysis

The estimated mean human incubation period for most influenza A virus infections is 1-3 days long, and within 3-4 days of post-infection, these viruses elicit strong inflammatory responses, which causes the clinical manifestations (Li and Cao, 2017). Therefore, to reveal HINI infection-associated genetic changes in humans, we analyzed the differentially expressed gene profiles between 22 samples of 21 h exposure time course before infection and 24 samples of 77 h exposure time course after infection of samples. As illustrated in Fig. 1A, 169 differently expressed genes were identified, in which 152 of them were upregulated, and 17 were downregulated. The heat cluster map analysis showed that those genes represented a significant difference between the two cohorts (Fig. 1B). Consequently, the 169 genes were subjected to PPI analysis, and as shown in Fig. 1C, we obtained a network that contained a total of 1725 genes and 2561 gene-gene interaction pairs.

Then, the WGCNA analysis was used to examine the coexpression modules of the 1725 genes. This algorithm was performed based on an unsigned topological overlap matrix, which applied a soft threshold power of $\beta = 3$ to exhibit an approximate scale-free topology (Fig. 2A). Also, as illustrated in Fig. 2B, these 1725 genes were allocated to 7 different modules according to their degree of connectivity. According to the standard of the hybrid dynamic shear tree, the minimum number of genes required in each gene network module was set at 20. Subsequently, we calculated the Pearson correlation coefficient (PC) and the P-value of the corresponding correlation for each module to determine the correlation between the gene modules and the infection caused by the H1N1 virus. The result illustrated in Fig. 2C showed that different modules such as green (PC = 0.55, P =7e–05), turquoise (PC = 0.54, P = 1e-04), and yellow (PC = 0.65, P = 1e-06) were significantly associated with the H1N1 virus infection. Lastly, we calculated the gene significance (GS) value for each module, and the results, as shown in Fig. 2D, showed that the GS of green, turquoise, and yellow were significantly higher than that of other modules.

Biological function of 3 modules

Here, we calculated the different degrees of nodes in each network module according to the gene expression relationships in the above 3 co-expression modules. It was observed that a small number of these genes had an obvious concentration, and their changes in expression will coexpress with other adjacent nodes through interaction,



FIGURE 1. Identification of differentially expressed genes and PPI analysis. (A) The differently expressed genes between 21 h before infection and 77 h after infecting samples. The red, green, and black nodes represented upregulated, downregulated, and undifferentiated genes. (B) The heat cluster map of the significantly differentially expressed genes. (C) The network of PPI analysis. The orange and green nodes represented differentially expressed genes and PPI extended genes.

which affects the downstream biological function. Therefore, these genes with higher node degrees are probably the key genes involved during HCC development. Hence, we only selected the top 20 genes with a higher node degree as the key gene in the co-expression network of each module. Subsequently, we carried out the GO analysis on all the 3 modules (including 60 genes) to explore the biological function of these genes. The biological function of 60 genes was depicted in Tab. S1. As illustrated in Fig. 3A, the genes of these 3 modules were significantly enhanced in virus infectious function, like the Type I interferon signaling, cellular response to Type I interferon, and response to Type I interferon. Lastly, Fig. 3B shows the interaction network of the biological pathways-genes which signified that the several biological functions were interacting with each other via some key genes such as OAS3, OAS1, IFNB1, and MX1.

Construction of prognostic model and validation

Based on the 60 core genes, we used a random forest algorithm test to construct the H1N1 infection diagnostic model. As shown in Fig. 4A, a comparison was done between before infection and 77 h post-infection time course to examine the differently expressed levels of the 60 genes in the infected samples, and particularly only the 20 genes were significantly represented in cluster heap. Then, the diagnostic model was used to verify 3 validation datasets, which included 22 samples of before infection and 120 samples of 1-day post-infection, 120 samples of 1-day postinfection, and 72 samples of 2-days post-infection, and 72 samples of 3-days post-infection. The AUC of the receiver operating characteristic curve showed that the diagnostic model for 0–24 h, 24–48 h, and 48–72 h of infection, were 0.773, 0.794, and 0.831, respectively (Fig. 4B). Additionally, we analyzed the expression levels of the 20 genes across 1, 2, and 3 days. As illustrated in Fig. 5, it was noted that all the expression levels of these genes were upregulated with the increase in the progression of infection days (P < 0.05). These results proposed that the prognostic model made up of 60 genes were a potential biomarker for the diagnosis of infection caused by the H1N1 virus.

Identification of gene-related drug molecular for anti-H1N1 virus

A total of 36 upregulated genes were selected from 60 different gene expressions to search for the infection-related reversal molecular drugs. This was achieved by calculating the different expression profiles of the submitted genes and each drug-treated cell line. Notably, many molecular drugs such as rimantadine, interferons, shikimic acid, and ribavirin, which are clinically used to treat influenza were observed to be associated with genes of the prognostic model (Tab. 2). These results indirectly validated that the prognostic model made up of 60 genes had a potential clinical application value in the treatment of infections caused by the H1N1 virus.

Discussion

The time interval between the entry of the influenza pathogen into the human body and the onset of the earliest clinical



FIGURE 2. Analysis of the significant modules based on H1N1 virus infection-related genes using the WGCNA analysis. (A) Scale independent index for analysis of various soft threshold power. The red numbers in the plots stand for the corresponding soft thresholding powers. 3 was the optimal soft-thresholding power value by approximate scale-free topology analysis. (B) Identification of the module via WGCNA analysis. Each color represented a module containing a set of highly connected genes. (C) Relationships of consensus module and different phenotypes. The orange and blue stand for positive and negative relationships, respectively. (D) Distribution of indicators of gene significance for each module.

manifestations is referred to as the incubation period (Clark and Lynch, 2011). Due to the very-short incubation period of the influenza virus, the time course before and after the onset of an illness is also very-short. Hence, influenza patients lack obvious clinical manifestations, and the progression of this disease can lead to its aggravation or become a potential source of infection (Rewar et al., 2015). Therefore, early identification of influenza latent infected patients is an effective measure that prevents its outbreak. Here, we constructed a diagnostic model for the H1N1 virus infection process based on the characteristic of the H1N1 virus infection-related genes using different multianalysis dimensional bioinformatics procedures. We established that the diagnostic model was a potential biomarker for the diagnosis of the infection caused by the H1N1 virus. Our study examined the molecular biomarker for the H1N1 virus infection through bioinformatics methods, which provides a new view for studying the underlying mechanism of influenza infection and finding its clinical target.

The Influenza A virus is characterized based on genetic diversity and its susceptibility to different genetic mutations. However, much of our understanding of the influenza evolution comes from different sequencing analyses within a certain pathological range. This not only represents significant viral lineage changes within each infected host cell but also explains little information on the extent of genetic alternation after the host infection (Poon et al., 2016). To reveal this genetic alternation on the host after infection with the H1N1 virus, we made different expression analysis on the genes of samples obtained between 21 h before infection and 77 h post-infection. Subsequently, we selected the two-time nodes as the research object largely because the first day is the initial time of infection, whereas the third day is the most obvious period of generalized clinical manifestations after infection while avoiding the sample with severe clinical symptoms. Next, using the multi-dimensional bioinformatics analysis, we not only identified 60 genes from the 3 modules that proved to be potential biomarkers for the diagnosis of infection caused by the H1N1 virus but also we established that among these genes, 20 of them were associated with the progression of the HIN1 virus infectious. These findings are consistent with previous studies, which investigated that these 20 genes are involved in the pathogenesis of infections caused by the influenza virus. Horio et al. (2020) discovered that the ALOX5 gene was associated with the regulation of influenza virus replication through the daidzein activated signal



FIGURE 3. Biological function of 3 modules (60 genes). (A) The enrichment of GO analysis. (B) Biological pathways-genes interaction network.

transduction pathway, which indicated that it is an antiviral activity target. Elsewhere, the MX1 was shown to encode a guanosine triphosphate (GTP)-metabolizing protein that plays a role in the cellular antiviral response. Additionally, it could restrict the replication of the influenza A virus by targeting distinct sites of its nucleoprotein (Fatima et al., 2019). However, most of the gene mutations are not specific to H1N1, just like the annually genetic variation of influenza could not be fixed in a specific gene (Davidson, 2018). Moreover, much less is known about the genetic control of virus-host interactions in H1N1 disease (To et al., 2015). Herein, unlike these previous studies that established that a single gene was involved in the mechanism of viral infection, this diagnostic model that we constructed is composed of multiple genes, which can overcome various shortcomings such as lack of specificity and stability and susceptibility to external factors.

Besides, we used multidimensional bioinformatics to construct a H1N1 diagnostic model and analyze the biological function and drug targets of model genes. Bioinformatics has a wider application scope, a more complete coverage, and a more refined division of labor. The development of bioinformatics provides new ideas for the study of viruses and genes (Oulas *et al.*, 2019). Moreover, our study complemented previous bioinformatics

studies on H1N1. Liu *et al.* (2016) performed multidimensional algorithms to investigate a large scale of gene microarray data to constructed viral challenge model, which could predict each subject's state of infection, including exposed nor infected, exposed but not infected, pre-acute phase of infection, acute phase of infection, post-acute phase of infection. Whereas our diagnostic model was aimed to found out patients with early H1N1 infection. A comprehensive analysis of our results and those of previous studies further contributes to mining out targeted genes associated with HIN1 infection and their clinical value.

In this study, the biological function of these 60 genes was also analyzed, and it was discovered that the Type I interferon and viral genome replication were the main gene enrichment items. In recent years, many research groups have adopted many different strategies to search for host factors involved in the virus genome replication cycle (Fan et al., 2019). The study of viral proteins related to the replication process of the influenza virus genome and the continuous discovery of virus-host interaction have contributed us to understand more accurately the life cycle of the influenza virus and the development of anti-influenza drugs (Jorba et al., 2009). Such as RNA polymerases, which are required for the genome transcription and replication of influenza A virus, have become ideal targets for the development of anti-influenza drugs (Du et al., 2018). Besides, gene fragment exchange and mismatch during replication in the virus genome was the main pathogenesis involved during mutation in viruses (Lowen, 2017). However, due to the complexity of genetic interactions between viral gene fragments, our understanding of the mechanisms involved during virus genome replication, which leads to mutations, remains inadequate (White and Lowen, 2018). Therefore, these results may provide new genetic targets for identifying these viral replication mutations, particularly during molecular interactions with host genes after viral infection. Moreover, our gene-related drug molecular association analysis found out that several clinical universal drug molecules for the therapy of influenza indirectly proved that this diagnostic model was an effective biomarker for the diagnosis of the H1N1 virus infection. For instance, we disclosed that the drug molecular analysis of shikimic acid inhibits the activity of neuraminidase and promotes the activity of important molecules that inhibit the activity of the influenza virus. Of note, the shikimic acid is a precursor of the synthetic drug ostamivir phosphate, which is an effective inhibitor used to treat a variety of seasonal influenza viruses (Martínez et al., 2015). Hence, the results of this study can provide genetic target support for the study and establishment of anti-influenza drugs.

Comparing to previous similar studies, our study has both shortcomings and advantages. Zaas *et al.* (2009) conducted a systematic statistical analysis to develop a blood mRNA expression signature that classifies symptomatic human respiratory viral infection. Whereas we use the multi-dimensional bioinformatics analysis method to build the diagnostic model, which is more advanced and comprehensive. In addition, our diagnostic models of genes were performed for biological analysis to further clarify the pathogenesis of these genes in H1N1. However, in contrast



(A) The cluster heap of 60 genes expression between 21 h before infection and 77 h after infection samples. The purple box indicated the 20 genes were significantly different expression. (B) The AUC of the receiver operating characteristic curve was used to predict the ability of the diagnostic model after 1-, 2-, and 3-days of infection.

to Zaas et al. (2009) and Liu et al. (2016) studies, the associated analysis between the diagnostic model and influenza infectious stage in our study was not enough. Liu et al. (2016) constructed viral challenge model, which could predict each subject's state of infection, including exposed nor infected, exposed but not infected, pre-acute phase of infection, acute phase of infection, post-acute phase of infection. And Zaas et al. (2009) not only included live rhinovirus, respiratory syncytial virus, and influenza A in their study, but also developed the gene signatures to classify human respiratory viral infection, such as symptomatic, asymptomatic, infected, and uninfected samples. One of the advantages of our study was a large scale of HIN1 infection samples were included in the investigation, which could overcome experimental errors and deviations. Whiles, our results still need to be validated

in actual influenza samples. The study carried by Liu *et al.* (2016) and Zaas *et al.* (2009) verified their gene signature in peripheral blood for serum and plasma from infectious samples. Given this, the clinical application of the diagnostic model in our study is not very clear and needs further validation. We suggested that combining our research with previous research results may be more helpful to study the clinical targets of influenza infection.

In conclusion, this study has constructed a diagnostic model based on the H1N1 virus infection-related genes and has verified that this model is a potential biomarker for the diagnosis of the infection caused by the H1N1 virus. Besides, our research provides an integrated procedure for the discovery of gene characteristics and their corresponding biological function during the infection caused by the H1N1 virus, and to also establish drug targets against anti-influenza.



FIGURE 5. Analysis of 20 gene expression levels after 1 day, 2 days, and 3 days H1N1 virus infection.

TABLE 2

Identification of gene-related drug molecular for anti-H1N1 virus

Rank	Score	Name	Description	P-value
1	-89.53	Rimantadine	Antiviral	< 0.05
2	-99.45	Interferons	innate and adaptive immune systems	< 0.05
3	-99.45	Shikimic acid	inhibitors of neuraminidase	< 0.05
4	-99.93	Ribavirin	Antiviral	< 0.05
5	-98.89	Immunoglobulin	Immunoglobulin superfamily/Immunoglobulin-like domain containing	< 0.05
6	-78.53	Triamcinolone	Glucocorticoid receptor agonist	< 0.05
7	-56.32	Zidovudine	Reverse transcriptase inhibitor	< 0.05
8	-11.23	Valaciclovir	DNA polymerase inhibitor	< 0.05
9	-44.78	Tenofovir	Reverse transcriptase inhibitor	< 0.05
10	-42.98	Vitamin C	L-ascorbic acid	< 0.05

Author Contribution: The authors confirm contribution to the paper as follows: Study conception and design: Hongyan Diao; data collection: Wenbiao Chen, Kefan Bi, Jingjing Jiang, Xujun Zhang; analysis and interpretation of results: Wenbiao Chen, Kefan Bi, Jingjing Jiang; draft manuscript preparation: Hongyan Diao, Wenbiao Chen. All authors reviewed the results and approved the final version of the manuscript.

Availability of Data and Materials: All data was collected from the public database.

Funding Statement: This work was supported by the major national S&T projects for infectious diseases (2018ZX10301401), the Key Research & Development Plan of Zhejiang Province (2019C04005), the National Key Research, and the Development Program of China (2018YFC2000500).

Conflicts of Interest: The authors declare that they have no conflicts of interest to report regarding the present study.

References

- Azar MM, Landry ML (2018). Detection of influenza A and B viruses and respiratory syncytial virus by use of Clinical Laboratory Improvement Amendments of 1988 (CLIA)-waived point-ofcare assays: A paradigm shift to molecular tests. *Journal of Clinical Microbiology* 56: e00367-18. DOI 10.1128/JCM.00367-18.
- Clark N, Lynch J (2011). Influenza: Epidemiology, clinical features, therapy, and prevention. *Seminars in Respiratory and Critical Care Medicine* **32**: 373–392. DOI 10.1055/s-0031-1283278.
- Cheng J, Yang L, Kumar V, Agarwal P (2014). Systematic evaluation of connectivity map for disease indications. *Genome Medicine* **6**: 540. DOI 10.1186/s13073-014-0095-1.
- Cheng Z, Zhou J, To KK, Chu H, Li C, Wang D, Yang D, Zheng S, Hao K, Bossé Y, Obeidat M, Brandsma CA, Song YQ, Chen Y, Zheng BJ, Li L, Yuen KY (2015). Identification of TMPRSS2 as a susceptibility gene for severe 2009 pandemic A(H1N1) influenza and A(H7N9) influenza. *Journal of Infectious Diseases* 212: 1214–1221. DOI 10.1093/infdis/jiv246.
- Davidson S (2018). Treating influenza infection, from now and into the future. *Frontiers in Immunology* **9**: 517. DOI 10.3389/ fimmu.2018.01946.
- Du Y, Xin L, Shi Y, Zhang TH, Wu NC, Dai L, Gong D, Brar G, Shu S, Luo J, Reiley W, Tseng YW, Bai H, Wu TT, Wang J, Shu Y, Sun R (2018). Genome-wide identification of interferonsensitive mutations enables influenza vaccine design. *Science* 359: 290–296. DOI 10.1126/science.aan8806.
- Fan H, Walker AP, Carrique L, Keown JR, Serna Martin I, Karia D, Sharps J, Hengrung N, Pardon E, Steyaert J, Grimes JM, Fodor E (2019). Structures of influenza A virus RNA polymerase offer insight into viral genome replication. *Nature* 573: 287–290. DOI 10.1038/s41586-019-1530-7.
- Fatima U, Zhang Z, Zhang H, Wang XF, Xu L, Chu X, Ji S, Wang X (2019). Equine Mx1 restricts Influenza A virus replication by targeting at distinct site of its nucleoprotein. *Viruses* 11: 1114. DOI 10.3390/v11121114.
- Fineberg HV (2014). Pandemic preparedness and response-lessons from the H1N1 influenza of 2009. New England Journal of Medicine 370: 1335–1342. DOI 10.1056/NEJMra1208802.
- Horio Y, Sogabe R, Shichiri M, Ishida N, Morimoto R, Ohshima A, Isegawa Y (2020). Induction of a 5-lipoxygenase product by daidzein is involved in the regulation of influenza virus

replication. *Journal of Clinical Biochemistry and Nutrition* **66**: 36–42. DOI 10.3164/jcbn.19-70.

- Jorba N, Coloma R, Ortín J (2009). Genetic trans-complementation establishes a new model for influenza virus RNA transcription and replication. *PLoS Pathogens* 5: e1000462. DOI 10.1371/journal.ppat.1000462.
- Josset L, Belser JA, Pantin-Jackwood MJ, Chang JH, Chang ST, Belisle SE, Tumpey TM, Katze MG (2012). Implication of inflammatory macrophages, nuclear receptors, and interferon regulatory factors in increased virulence of pandemic 2009 H1N1 influenza A virus after host adaptation. *Journal of Virology* 86: 7192–7206. DOI 10.1128/JVI.00563-12.
- Langfelder P, Horvath S (2008). WGCNA: An R package for weighted correlation network analysis. BMC Bioinformatics 9: 559. DOI 10.1186/1471-2105-9-559.
- Li H, Cao B (2017). Pandemic and avian Influenza A viruses in humans: Epidemiology, virology, clinical characteristics, and treatment strategy. *Clinics in Chest Medicine* 38: 59–70. DOI 10.1016/j.ccm.2016.11.005.
- Liu TY, Burke T, Park LP, Woods CW, Zaas AK, Ginsburg GS, Hero AO (2016). An individualized predictor of health and disease using paired reference and target samples. *BMC Bioinformatics* 17: 47. DOI 10.1186/s12859-016-0889-9.
- Lowen AC (2017). Constraints, drivers, and implications of Influenza A virus reassortment. *Annual Review of Virology* **4**: 105–121. DOI 10.1146/annurev-virology-101416-041726.
- Lutz Iv MM, Dunagan MM, Kurebayashi Y, Takimoto T (2020). Key role of the Influenza A virus PA gene segment in the emergence of pandemic viruses. *Viruses* 12: 365. DOI 10.3390/v12040365.
- Lyons DM, Lauring AS (2018). Mutation and epistasis in Influenza virus evolution. *Viruses* **10**: 407. DOI 10.3390/v10080407.
- Malanoski AP, Lin B (2013). Evolving gene targets and technology in influenza detection. *Molecular Diagnosis & Therapy* 17: 273– 286. DOI 10.1007/s40291-013-0040-9.
- Martínez JA, Bolívar F, Escalante A (2015). Shikimic acid production in *Escherichia coli*: From classical metabolic engineering strategies to omics applied to improve its production. *Frontiers in Bioengineering and Biotechnology* **3**: 145.
- Memoli MJ, Morens DM, Taubenberger JK (2008). Pandemic and seasonal influenza: Therapeutic challenges. *Drug Discovery Today* 13: 590–595. DOI 10.1016/j.drudis.2008.03.024.
- Oulas A, Minadakis G, Zachariou M, Sokratous K, Bourdakou MM, Spyrou GM (2019). Systems bioinformatics: Increasing precision of computational diagnostics and therapeutics through network-based approaches. *Briefings in Bioinformatics* 20: 806–824. DOI 10.1093/bib/bbx151.
- Poon LL, Song T, Rosenfeld R, Lin X, Rogers MB, Zhou B, Sebra R, Halpin RA, Guan Y, Twaddle A, DePasse JV, Stockwell TB, Wentworth DE, Holmes EC, Greenbaum B, Peiris JSM, Cowling BJ, Ghedin E (2016). Quantifying influenza virus diversity and transmission in humans. *Nature Genetics* 48: 195–200. DOI 10.1038/ng.3479.
- Rewar S, Mirdha D, Rewar P (2015). Treatment and prevention of pandemic H1N1 influenza. Annals of Global Health 81: 645–653. DOI 10.1016/j.aogh.2015.08.014.
- Sun Y, Wang Q, Yang G, Lin C, Zhang Y, Yang P (2016). Weight and prognosis for influenza A(H1N1)pdm09 infection during the pandemic period between 2009 and 2011: A systematic review of observational studies with meta-analysis. *Infectious Diseases* 48: 813–822. DOI 10.1080/ 23744235.2016.1201721.

- Szklarczyk D, Franceschini A, Wyder S, Forslund K, Heller D, Huerta-Cepas J, Simonovic M, Roth A, Santos A, Tsafou KP, Kuhn M, Bork P, Jensen LJ, von Mering C (2015). STRING v10: Protein-protein interaction networks, integrated over the tree of life. *Nucleic Acids Research* 43: D447–D452. DOI 10.1093/nar/gku1003.
- To KKW, Zhou J, Chan JF, Yuen KY (2015). Host genes and influenza pathogenesis in humans: An emerging paradigm. *Current Opinion in Virology* 14: 7–15. DOI 10.1016/j. coviro.2015.04.010.
- Uyeki TM, Bernstein HH, Bradley JS, Englund JA, File TM, Fry AM, Gravenstein S, Hayden FG, Harper SA, Hirshon JM, Ison MG, Johnston BL, Knight SL, McGeer A, Riley LE, Wolfe CR, Alexander PE, Pavia AT (2019). Clinical practice guidelines by the Infectious Diseases Society of America: 2018 update on diagnosis, treatment, chemoprophylaxis, and institutional outbreak management of seasonal influenzaa. *Clinical Infectious Diseases* **68**: e1–e47. DOI 10.1093/cid/ciy866.
- Vemula SV, Zhao J, Liu J, Wang X, Biswas S, Hewlett I (2016). Current approaches for diagnosis of influenza virus infections in humans. *Viruses* 8: 96. DOI 10.3390/v8040096.
- White MC, Lowen AC (2018). Implications of segment mismatch for influenza A virus evolution. *Journal of General Virology* 99: 3–16. DOI 10.1099/jgv.0.000989.
- Zaas AK, Chen M, Varkey J, Veldman T, Hero III AO, Lucas J, Huang Y, Turner R, Gilbert A, Lambkin-Williams R, Øien NC, Nicholson B, Kingsmore S, Carin L, Woods CW, Ginsburg GS (2009). Gene expression signatures diagnose influenza and other symptomatic respiratory viral infections in humans. *Cell Host & Microbe* 6: 207–217. DOI 10.1016/j.chom.2009.07.006.
- Zeldovich KB, Liu P, Renzette N, Foll M, Pham ST, Venev SV, Gallagher GR, Bolon DN, Kurt-Jones EA, Jensen JD, Caffrey DR, Schiffer CA, Kowalik TF, Wang JP, Finberg RW (2015). Positive selection drives preferred segment combinations during influenza virus reassortment. *Molecular Biology and Evolution* 32: 1519–1532. DOI 10.1093/molbev/msv044.

Supplementary Figure



FIGURE S1. The flow chart of this research.

Supplementary Table

TABLE S1

Biological function of 60 genes

Gene	Annotation
TUBB1	Tubulin beta-1 chain; Tubulin is the major constituent of microtubules. It binds two moles of GTP, one at an exchangeable site on the beta chain and one at a non-exchangeable site on the alpha chain (By similarity); Belongs to the tubulin family
ORC6	Origin recognition complex subunit 6; Component of the origin recognition complex (ORC) that binds origins of replication. DNA-binding is ATP-dependent. The specific DNA sequences that define origins of replication have not been identified yet. ORC is required to assemble the pre- replication complex necessary to initiate DNA replication. Does not bind histone H3 and H4 trimethylation marks H3K9me3, H3K27me3 and H4K20me3
ARHGDIG	Rho GDP-dissociation inhibitor 3; Inhibits GDP/GTP exchange reaction of RhoB. Interacts specifically with the GDP- and GTP-bound forms of post- translationally processed Rhob and Rhog proteins, both of which show a growth-regulated expression in mammalian cells. Stimulates the release of the GDP-bound but not the GTP-bound RhoB protein. Also inhibits the GDP/GTP exchange of RhoB but shows less ability to inhibit the dissociation of prebound GTP
EMC2	ER membrane protein complex subunit 2; Tetratricopeptide repeat domain containing
RBM28	RNA-binding protein 28; Nucleolar component of the spliceosomal ribonucleoprotein complexes; RNA binding motif containing
MLEC	Malectin; Carbohydrate-binding protein with a strong ligand preference for Glc2-N-glycan. May play a role in the early steps of protein N-glycosylation (By similarity); Oligosaccharyltransferase complex subunits
OAS3	2'-5'-oligoadenylate synthase 3; Interferon-induced, dsRNA-activated antiviral enzyme which plays a critical role in cellular innate antiviral response. In addition, it may also play a role in other cellular processes such as apoptosis, cell growth, differentiation and gene regulation. Synthesizes preferentially dimers of 2'-5'- oligoadenylates (2-5A) from ATP which then bind to the inactive monomeric form of ribonuclease L (RNase L) leading to its dimerization and subsequent activation. Activation of RNase L leads to degradation of cellular as well as viral RNA, resulting in the inhib []
SSR1	Translocon-associated protein subunit alpha; TRAP proteins are part of a complex whose function is to bind calcium to the ER membrane and thereby regulate the retention of ER resident proteins. May be involved in the recycling of the translocation apparatus after completion of the translocation process or may function as a membrane-bound chaperone facilitating folding of translocated proteins; Minor histocompatibility antigens
FNTB	Protein farnesyltransferase subunit beta; Essential subunit of the farnesyltransferase complex. Catalyzes the transfer of a farnesyl moiety from farnesyl diphosphate to a cysteine at the fourth position from the C- terminus of several proteins having the C-terminal sequence Cys- aliphatic-aliphatic-X
HCN2	Potassium/sodium hyperpolarization-activated cyclic nucleotide-gated channel 2; Hyperpolarization-activated ion channel exhibiting weak selectivity for potassium over sodium ions. Contributes to the native pacemaker currents in heart (If) and in neurons (Ih). Can also transport ammonium in the distal nephron. Produces a large instantaneous current. Modulated by intracellular chloride ions and pH; acidic pH shifts the activation to more negative voltages (By similarity); Cyclic nucleotide gated channels
PSMB7	Proteasome subunit beta type-7; Component of the 20S core proteasome complex involved in the proteolytic degradation of most intracellular proteins. This complex plays numerous essential roles within the cell by associating with different regulatory particles. Associated with two 19S regulatory particles, forms the 26S proteasome and thus participates in the ATP-dependent degradation of ubiquitinated proteins. The 26S proteasome plays a key role in the maintenance of protein homeostasis by removing misfolded or damaged proteins that could impair cellular functions, and by removing prot []
DERL1	Derlin-1; Functional component of endoplasmic reticulum-associated degradation (ERAD) for misfolded lumenal proteins. May act by forming a channel that allows the retrotranslocation of misfolded proteins into the cytosol where they are ubiquitinated and degraded by the proteasome. May mediate the interaction between VCP and the misfolded protein. Also involved in endoplasmic reticulum stress-induced pre-emptive quality control, a mechanism that selectively attenuates the translocation of newly synthesized proteins into the endoplasmic reticulum and reroutes them to the cytosol for prot []
SMAD2	Mothers against decapentaplegic homolog 2; Receptor-regulated SMAD (R-SMAD) that is an intracellular signal transducer and transcriptional modulator activated by TGF-beta (transforming growth factor) and activin type 1 receptor kinases. Binds the TRE element in the promoter region of many genes that are regulated by TGF-beta and, on formation of the SMAD2/SMAD4 complex, activates transcription. May act as a tumor suppressor in colorectal carcinoma. Positively regulates PDPK1 kinase activity by stimulating its dissociation from the 14-3-3 protein YWHAQ which acts as a negative regulator

(Continued)

Table S1 (c	ontinued).
Gene	Annotation
ITGA2B	Integrin alpha-IIb; Integrin alpha-IIb/beta-3 is a receptor for fibronectin, fibrinogen, plasminogen, prothrombin, thrombospondin and vitronectin. It recognizes the sequence R-G-D in a wide array of ligands. It recognizes the sequence H-H-L-G-G-G-A-K-Q-A-G-D-V in fibrinogen gamma chain. Following activation integrin alpha-IIb/beta-3 brings about platelet/platelet interaction through binding of soluble fibrinogen. This step leads to rapid platelet aggregation which physically plugs ruptured endothelial cell surface; CD molecules
MCM6	DNA replication licensing factor MCM6; Acts as component of the MCM2-7 complex (MCM complex) which is the putative replicative helicase essential for 'once per cell cycle' DNA replication initiation and elongation in eukaryotic cells. The active ATPase sites in the MCM2-7 ring are formed through the interaction surfaces of two neighboring subunits such that a critical structure of a conserved arginine finger motif is provided in trans relative to the ATP-binding site of the Walker A box of the adjacent subunit. The six ATPase active sites, however, are likely to contribute differential []
NPFFR1	Neuropeptide FF receptor 1; Receptor for NPAF (A-18-F-amide) and NPFF (F-8-F-amide) neuropeptides, also known as morphine-modulating peptides. Can also be activated by a variety of naturally occurring or synthetic FMRF-amide like ligands. This receptor mediates its action by association with G proteins that activate a phosphatidylinositol- calcium second messenger system
TM7SF2	Delta(14)-sterol reductase; Involved in the conversion of lanosterol to cholesterol
ACAA2	3-ketoacyl-CoA thiolase, mitochondrial; Abolishes BNIP3-mediated apoptosis and mitochondrial damage
FANCC	Fanconi anemia group C protein; DNA repair protein that may operate in a postreplication repair or a cell cycle checkpoint function. May be implicated in interstrand DNA cross-link repair and in the maintenance of normal chromosome stability. Upon IFNG induction, may facilitate STAT1 activation by recruiting STAT1 to IFNGR1; Fanconi anemia complementation groups
FCER1G	High affinity immunoglobulin epsilon receptor subunit gamma; Associates with a variety of FcR alpha chains to form a functional signaling complex. Regulates several aspects of the immune response. The gamma subunit has a critical role in allowing the IgE Fc receptor to reach the cell surface. Also involved in collagen-mediated platelet activation and in neutrophil activation mediated by integrin; Belongs to the CD3Z/FCER1G family
MED27	Mediator of RNA polymerase II transcription subunit 27; Component of the Mediator complex, a coactivator involved in the regulated transcription of nearly all RNA polymerase II-dependent genes. Mediator functions as a bridge to convey information from gene-specific regulatory proteins to the basal RNA polymerase II transcription machinery. Mediator is recruited to promoters by direct interactions with regulatory proteins and serves as a scaffold for the assembly of a functional preinitiation complex with RNA polymerase II and the general transcription factors
POLR2J	DNA-directed RNA polymerase II subunit RPB11-a; DNA-dependent RNA polymerase catalyzes the transcription of DNA into RNA using the four ribonucleoside triphosphates as substrates. Component of RNA polymerase II which synthesizes mRNA precursors and many functional non-coding RNAs. Pol II is the central component of the basal RNA polymerase II transcription machinery. It is composed of mobile elements that move relative to each other. RPB11 is part of the core element with the central large cleft (By similarity)
UBXN7	UBX domain-containing protein 7; Ubiquitin-binding adapter that links a subset of NEDD8- associated cullin ring ligases (CRLs) to the segregase VCP/p97, to regulate turnover of their ubiquitination substrates; UBX domain containing
RAPGEF6	Rap guanine nucleotide exchange factor 6; Guanine nucleotide exchange factor (GEF) for Rap1A, Rap2A and M-Ras GTPases. Does not interact with cAMP; PDZ domain containing
ACOX2	Peroxisomal acyl-coenzyme A oxidase 2; Oxidizes the CoA esters of the bile acid intermediates di- and tri- hydroxycholestanoic acids; Belongs to the acyl-CoA oxidase family
ARHGAP32	Rho GTPase-activating protein 32; GTPase-activating protein (GAP) promoting GTP hydrolysis on RHOA, CDC42 and RAC1 small GTPases. May be involved in the differentiation of neuronal cells during the formation of neurite extensions. Involved in NMDA receptor activity-dependent actin reorganization in dendritic spines. May mediate cross-talks between Ras- and Rho-regulated signaling pathways in cell growth regulation. Isoform 2 has higher GAP activity (By similarity); Belongs to the PX domain-containing GAP family
ANAPC2	Anaphase-promoting complex subunit 2; Together with the RING-H2 protein ANAPC11, constitutes the catalytic component of the anaphase promoting complex/cyclosome (APC/C), a cell cycle-regulated E3 ubiquitin ligase that controls progression through mitosis and the G1 phase of the cell cycle. The APC/C complex acts by mediating ubiquitination and subsequent degradation of target proteins: it mainly mediates the formation of 'Lys-11'-linked polyubiquitin chains and, to a lower extent, the formation of 'Lys-48'- and 'Lys-63'-linked polyubiquitin chains. The CDC20-APC/C complex positively re []
GALNT14 MSC	Polypeptide N-acetylgalactosaminyltransferase 14 Musculin; Transcription repressor capable of inhibiting the transactivation capability of TCF3/E47. May play a role in regulating antigen-dependent B-cell differentiation; Basic helix-loop-helix proteins

(Continued)

Gene	Annotation
KNTC1	Kinetochore-associated protein 1; Essential component of the mitotic checkpoint, which prevents cells from prematurely exiting mitosis. Required for the assembly of the dynein-dynactin and MAD1-MAD2 complexes onto kinetochores. Its function related to the spindle assembly machinery is proposed to depend on its association in the mitotic RZZ complex
CD8B	T-cell surface glycoprotein CD8 beta chain; Integral membrane glycoprotein that plays an essential role in the immune response and serves multiple functions in responses against both external and internal offenses. In T-cells, functions primarily as a coreceptor for MHC class I molecule:peptide complex. The antigens presented by class I peptides are derived from cytosolic proteins while class II derived from extracellular proteins. Interacts simultaneously with the T-cell receptor (TCR) and the MHC class I proteins presented by antigen presenting cells (APCs). In turn, recruits the Src []
GNAI1	Guanine nucleotide-binding protein G(i) subunit alpha-1; Guanine nucleotide-binding proteins (G proteins) function as transducers downstream of G protein-coupled receptors (GPCRs) in numerous signaling cascades. The alpha chain contain the guanine nucleotide binding site and alternates between an active, GTP-bound state and an inactive, GDP-bound state Signaling by an activated GPCR promotes GDP release and GTP binding. The alpha subunit has a low GTPase activity that converts bound GTP to GDP, thereby terminating the signal. Both GDP release and GTP hydrolysis are modulated by numer []
MAGI2	Membrane-associated guanylate kinase, WW and PDZ domain-containing protein 2; Seems to act as scaffold molecule a synaptic junctions by assembling neurotransmitter receptors and cell adhesion proteins. May play a role in regulating activin-mediated signaling in neuronal cells. Enhances the ability of PTEN to suppress AKT1 activation. Plays a role in nerv growth factor (NGF)-induced recruitment of RAPGEF2 to late endosomes and neurite outgrowth; Membrane associated guanylate kinases
TGAL	Integrin alpha-L; Integrin alpha-L/beta-2 is a receptor for ICAM1, ICAM2, ICAM3 and ICAM4. Integrin alpha-L/beta-2 is also a receptor for F11R. Involved in a variety of immune phenomena including leukocyte-endothelial cell interaction, cytotoxic T-cell mediated killing, and antibody dependent killing by granulocytes and monocytes. Contributes to natural killer cell cytotoxicity. Involved in leukocyte adhesion and transmigration of leukocytes including T-cells and neutrophils. Required for generation of common lymphoid progenitor cells in bone marrow, indicating a role in lymphopoiesis []
GCRIB	Protein scribble homolog; Scaffold protein involved in different aspects of polarized cells differentiation regulating epithelia and neuronal morphogenesis. Most probably functions in the establishment of apico-basal cell polarity. May function in cell proliferation regulating progression from G1 to S phase and as a positive regulator of apoptosis for instance during acina morphogenesis of the mammary epithelium. May also function in cell migration and adhesion and hence regulate cell invasion through MAPK signaling. May play a role in exocytosis and in the targeting synaptic vesicle []
PTGS2	Prostaglandin G/H synthase 2; Converts arachidonate to prostaglandin H2 (PGH2), a committed step in prostanoid synthesis. Constitutively expressed in some tissues in physiological conditions, such as the endothelium, kidney and brair and in pathological conditions, such as in cancer. PTGS2 is responsible for production of inflammatory prostaglandins. Up regulation of PTGS2 is also associated with increased cell adhesion, phenotypic changes, resistance to apoptosis and tumo angiogenesis. In cancer cells, PTGS2 is a key step in the production of prostaglandin E2 (PGE2), which plays imp []
SYCP1	Synaptonemal complex protein 1; Major component of the transverse filaments of synaptonemal complexes (SCS), formed between homologous chromosomes during meiotic prophase. Required for normal assembly of the central element of the synaptonemal complexes. Required for normal centromere pairing during meiosis. Required for normal meiotic chromosome synapsis during oocyte and spermatocyte development and for normal male and female fertility
SLC35A1	CMP-sialic acid transporter; Transports CMP-sialic acid from the cytosol into Golgi vesicles where glycosyltransferases function; Belongs to the nucleotide-sugar transporter family. SLC35A subfamily
CHUK	Inhibitor of nuclear factor kappa-B kinase subunit alpha; Serine kinase that plays an essential role in the NF- kappa-B signaling pathway which is activated by multiple stimuli such as inflammatory cytokines, bacterial or viral products, DNA damages or other cellular stresses. Acts as part of the canonical IKK complex in the conventional pathway of NF-kappa-I activation and phosphorylates inhibitors of NF-kappa-B on serine residues. These modifications allow polyubiquitination of the inhibitors and subsequent degradation by the proteasome. In turn, free NF-kappa-B is translocated into []
FIT2	Interferon-induced protein with tetratricopeptide repeats 2; IFN-induced antiviral protein which inhibits expression of vira messenger RNAs lacking 2'-O-methylation of the 5' cap. The ribose 2'-O-methylation would provide a molecular signatur to distinguish between self and non-self mRNAs by the host during viral infection. Viruses evolved several ways to evade thi restriction system such as encoding their own 2'-O-methylase for their mRNAs or by stealing host cap containing the 2'-O methylation (cap snatching mechanism). Binds AU-rich viral RNAs, with or without 5' triphosphorylat []
ALOX5	Arachidonate 5-lipoxygenase; Catalyzes the first step in leukotriene biosynthesis, and thereby plays a role in inflammator processes; Belongs to the lipoxygenase family
FNB1	Interferon beta; Has antiviral, antibacterial and anticancer activities; Belongs to the alpha/beta interferon family
IRF4	Interferon regulatory factor 4; Transcriptional activator. Binds to the interferon- stimulated response element (ISRE) of the MHC class I promoter. Binds the immunoglobulin lambda light chain enhancer, together with PU.1. Probably plays a role in ISRE-targeted signal transduction mechanisms specific to lymphoid cells. Involved in CD8(+) dendritic cell differentiation

Gene	Annotation
	by forming a complex with the BATF-JUNB heterodimer in immune cells, leading to recognition of AICE sequence (5'- TGAnTCA/GAAA-3'), an immune-specific regulatory element, followed by cooperative binding of BATF and IRF4 and []
AQP4	Aquaporin-4; Forms a water-specific channel. Osmoreceptor which regulates body water balance and mediates water flow within the central nervous system; Belongs to the MIP/aquaporin (TC 1.A.8) family
CFI	Complement factor I; Responsible for cleaving the alpha-chains of C4b and C3b in the presence of the cofactors C4-binding protein and factor H respectively; Belongs to the peptidase S1 family
MX1	Interferon-induced GTP-binding protein Mx1; Interferon-induced dynamin-like GTPase with antiviral activity against a wide range of RNA viruses and some DNA viruses. Its target viruses include negative-stranded RNA viruses and HBV through binding and inactivation of their ribonucleocapsid. May also antagonize reoviridae and asfarviridae replication. Inhibits thogoto virus (THOV) replication by preventing the nuclear import of viral nucleocapsids. Inhibits La Crosse virus (LACV) replication by sequestering viral nucleoprotein in perinuclear complexes, preventing genome amplification, bud []
UBE2D2	Ubiquitin-conjugating enzyme E2 D2; Accepts ubiquitin from the E1 complex and catalyzes its covalent attachment to other proteins. <i>In vitro</i> catalyzes 'Lys- 48'-linked polyubiquitination. Mediates the selective degradation of short-lived and abnormal proteins. Functions in the E6/E6-AP- induced ubiquitination of p53/TP53. Mediates ubiquitination of PEX5 and autoubiquitination of STUB1 and TRAF6. Involved in the signal-induced conjugation and subsequent degradation of NFKBIA, FBXW2-mediated GCM1 ubiquitination and degradation, MDM2-dependent degradation of p53/TP53 and the activation of []
ARNTL	Aryl hydrocarbon receptor nuclear translocator-like protein 1; Transcriptional activator which forms a core component of the circadian clock. The circadian clock, an internal time- keeping system, regulates various physiological processes through the generation of approximately 24 hour circadian rhythms in gene expression, which are translated into rhythms in metabolism and behavior. It is derived from the Latin roots ' <i>circa</i> ' (about) and 'diem' (day) and acts as an important regulator of a wide array of physiological functions including metabolism, sleep, body temperature, blood pressu []
OAS1	2'-5'-oligoadenylate synthase 1; Interferon-induced, dsRNA-activated antiviral enzyme which plays a critical role in cellular innate antiviral response. In addition, it may also play a role in other cellular processes such as apoptosis, cell growth, differentiation and gene regulation. Synthesizes higher oligomers of 2'-5'-oligoadenylates (2-5A) from ATP which then bind to the inactive monomeric form of ribonuclease L (RNase L) leading to its dimerization and subsequent activation. Activation of RNase L leads to degradation of cellular as well as viral RNA, resulting in the inhibition []
IFI35	Interferon-induced 35 kDa protein; Not yet known
GINS3	GINS complex subunit 3
SUMO3	Small ubiquitin-like modifier 3
ALDH3A1	Aldehyde dehydrogenase, dimeric NADP-preferring; ALDHs play a major role in the detoxification of alcohol-derived acetaldehyde (Probable). They are involved in the metabolism of corticosteroids, biogenic amines, neurotransmitters, and lipid peroxidation (Probable). Oxidizes medium and long chain aldehydes into non-toxic fatty acids. Preferentially oxidizes aromatic aldehyde substrates. Comprises about 50 percent of corneal epithelial soluble proteins (By similarity). May play a role in preventing corneal damage caused by ultraviolet light (By similarity)
NDUFA5	NADH dehydrogenase [ubiquinone] 1 alpha subcomplex subunit 5; Accessory subunit of the mitochondrial membrane respiratory chain NADH dehydrogenase (Complex I), that is believed not to be involved in catalysis. Complex I functions in the transfer of electrons from NADH to the respiratory chain. The immediate electron acceptor for the enzyme is believed to be ubiquinone
ST3GAL4	CMP-N-acetylneuraminate-beta-galactosamide-alpha-2,3-sialyltransferase 4; Catalyzes the formation of the NeuAc-alpha-2,3-Gal-beta- 1,4-GlcNAc-, and NeuAc-alpha-2,3-Gal-beta-1,3-GlcNAc- sequences found in terminal carbohydrate groups of glycoproteins and glycolipids. It may be involved in the biosynthesis of the sialyl Lewis X determinant; Belongs to the glycosyltransferase 29 family
POLR1B	DNA-directed RNA polymerase I subunit RPA2; DNA-dependent RNA polymerase catalyzes the transcription of DNA into RNA using the four ribonucleoside triphosphates as substrates. Second largest core component of RNA polymerase I which synthesizes ribosomal RNA precursors. Proposed to contribute to the polymerase catalytic activity and forms the polymerase active center together with the largest subunit. Pol I is composed of mobile elements and RPA2 is part of the core element with the central large cleft and probably a clamp element that moves to open and close the cleft (By similarity)
MBD1	Methyl-CpG-binding domain protein 1; Transcriptional repressor that binds CpG islands in promoters where the DNA is methylated at position 5 of cytosine within CpG dinucleotides. Binding is abolished by the presence of 7-mG that is produced by DNA damage by methylmethanesulfonate (MMS). Acts as transcriptional repressor and plays a role in gene silencing by recruiting AFT7IP, which in turn recruits factors such as the histone methyltransferase SETDB1. Probably forms a complex with SETDB1 and ATF7IP that represses transcription and couples DNA methylation and histone 'Lys-9' trimethylat []

(Continued)

Gene	Annotation
TNFSF14	Tumor necrosis factor ligand superfamily member 14; Cytokine that binds to TNFRSF3/LTBR. Binding to the decoy receptor TNFRSF6B modulates its effects. Activates NFKB, stimulates the proliferation of T-cells, and inhibits growth of the adenocarcinoma HT-29. Acts as a receptor for Herpes simplex virus; CD molecules
PAK4	Serine/threonine-protein kinase PAK 4; Serine/threonine protein kinase that plays a role in a variety of different signaling pathways including cytoskeleton regulation, cell migration, growth, proliferation or cell survival. Activation by various effectors including growth factor receptors or active CDC42 and RAC1 results in a conformational change and a subsequent autophosphorylation on several serine and/or threonine residues. Phosphorylates and inactivates the protein phosphatase SSH1, leading to increased inhibitory phosphorylation of the actin binding/depolymerizing factor cofilin []
CTDP1	RNA polymerase II subunit A C-terminal domain phosphatase; Processively dephosphorylates 'Ser-2' and 'Ser-5' of the heptad repeats YSPTSPS in the C-terminal domain of the largest RNA polymerase II subunit. This promotes the activity of RNA polymerase II. Plays a role in the exit from mitosis by dephosphorylating crucial mitotic substrates (USP44, CDC20 and WEE1) that are required for M-phase-promoting factor (MPF)/CDK1 inactivation; CTD family phosphatases