

# Variability in Measurements of *Manduca sexta* Midgut Gene Expression

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## Abstract

- Using metabolic data that has been collected over the past several years from cohorts of *Manduca sexta*, we analyzed the variability that arose between cohorts, fourth and fifth instars, tissues, PCR plates, and animal weights. RNA was isolated from the anterior, middle, and posterior midgut and reverse transcribed to cDNA. Real-time PCR was used to quantify expression of four genes by the relative quantification method using *18s* ribosomal RNA as an internal control. The genes we looked at were the potassium amino acid transporter *KAAT1*, the aminopeptidase *msAPN3* (*APN*), the cation chloride cotransporter *masBSC* and the e subunit of the V-type H-ATPase (*VATPase*).
- General linear models were fit and evaluated to predict  $\Delta Ct$  and the standard deviation for *KAAT1*, *APN*, *masBSC*, and *VATPase*.
- Gene expression changes between tissues and instars were calculated at for the genes.
- The performances of statistical procedures were compared with duplicate and triplicate measurements to obtain the desired power.

## Data Collection

- The data is subdivided by: Cohort (a group of *M. sexta* grown and analyzed together), Plate (by date), Primer (*KAAT1*, *APN*, *VATPase*, *masBSC*, or *18s control*), Tissue (anterior midgut, posterior midgut, or middle midgut), Instar (4<sup>th</sup> or 5<sup>th</sup>), and Weight (in grams).
- For each sample, six Ct values are measured (three with *18s control* and three with one of the genes).
- After the performances of statistical procedures were compared with duplicate and triplicate measurements to obtain the desired power, it was determined that triplicate measurements were necessary.
- Ct is the number of cycles necessary for the amount of gene expressed to meet a predetermined threshold.
- Using these Ct values, we can compute  $\Delta Ct$  and  $\Delta\Delta Ct$  where  $\Delta Ct = \text{Avg}(Ct_{\text{Gene}}) - \text{Avg}(Ct_{18s})$  and  $\Delta\Delta Ct = \Delta Ct - \Delta Ct^*$ .
- For  $\Delta Ct^*$ , the average of the  $\Delta Ct$  values for that particular gene were used.

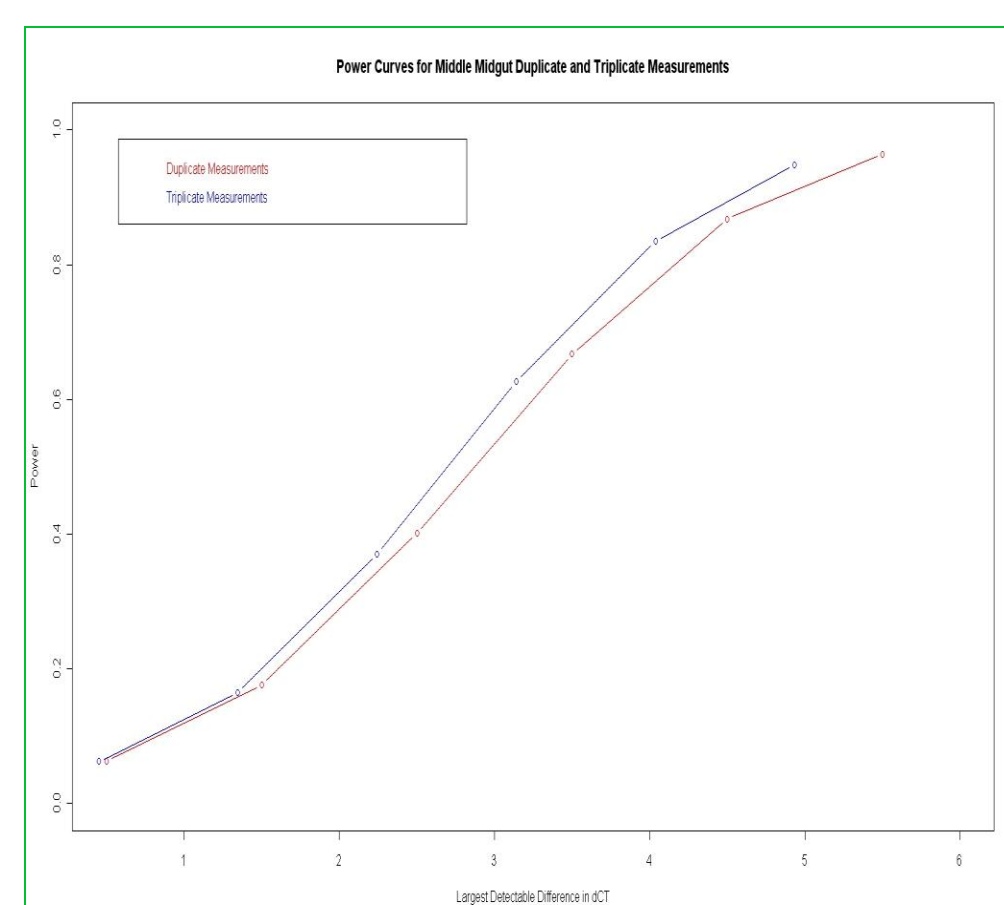


Figure 1: Power Curve for Middle Midgut Replicate Measurements

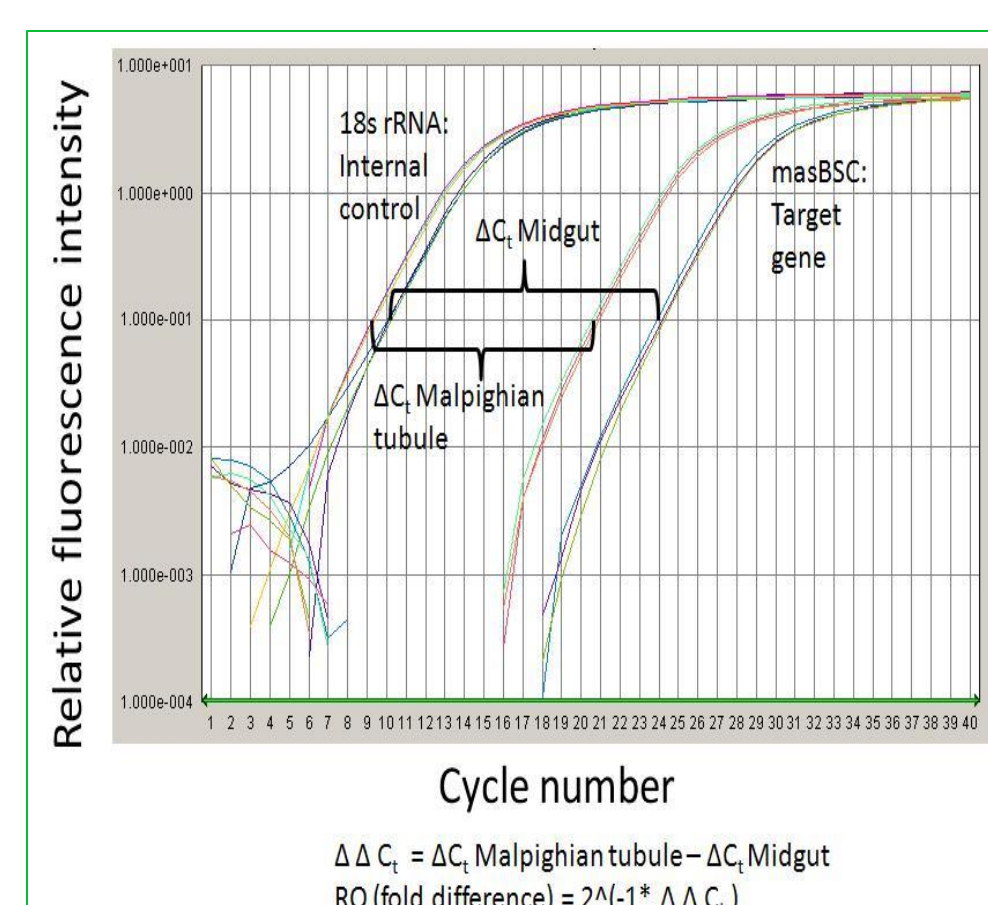


Figure 2: Ct and  $\Delta Ct$  Expression

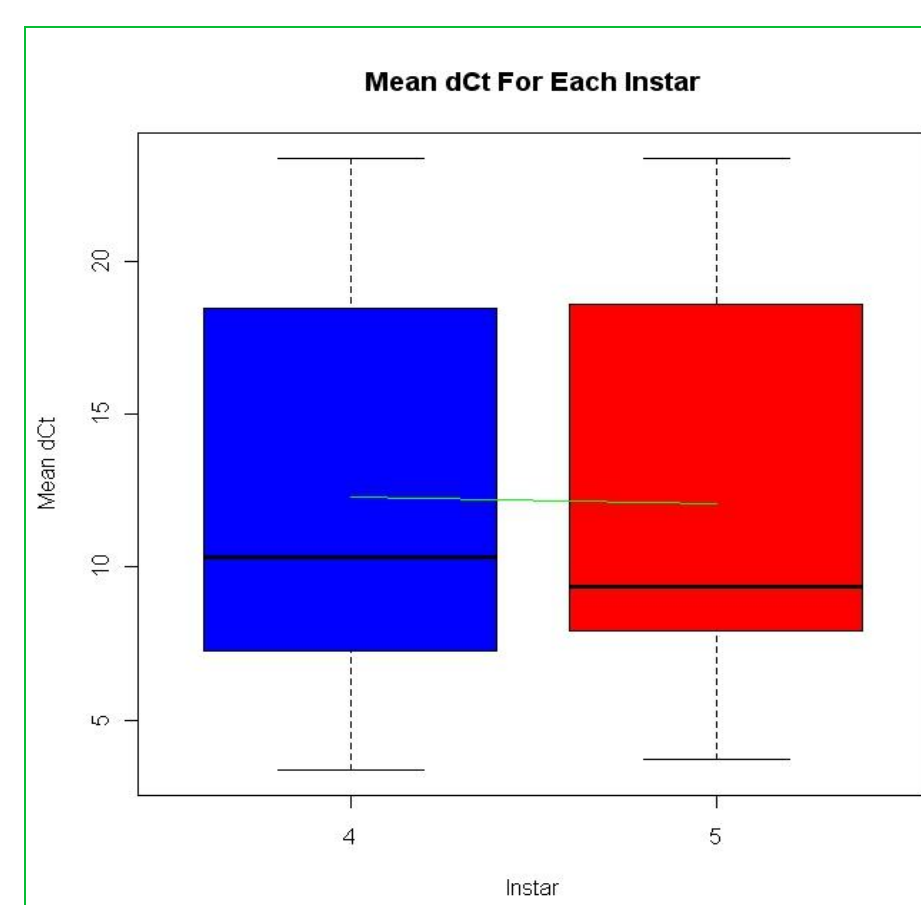


Figure 3: Mean  $\Delta Ct$  for Each Instar from Full Data Set

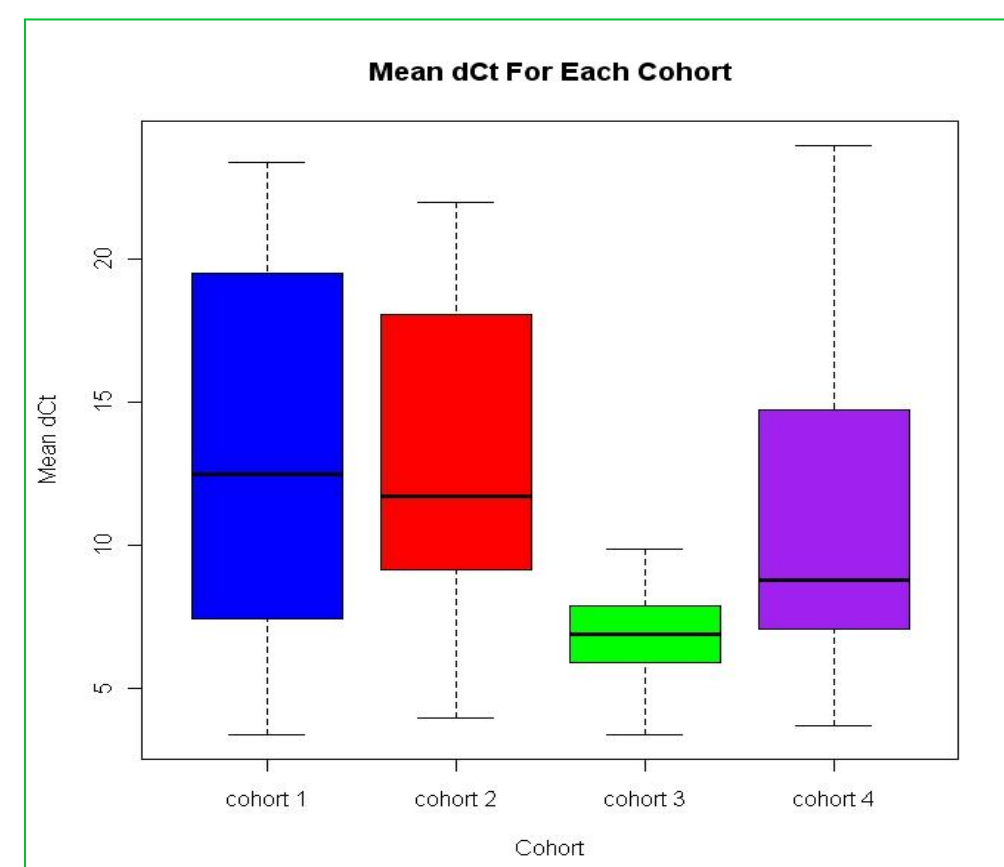


Figure 4: Mean  $\Delta Ct$  for Each Cohort from Full Data Set, experimental issues with Cohort 3

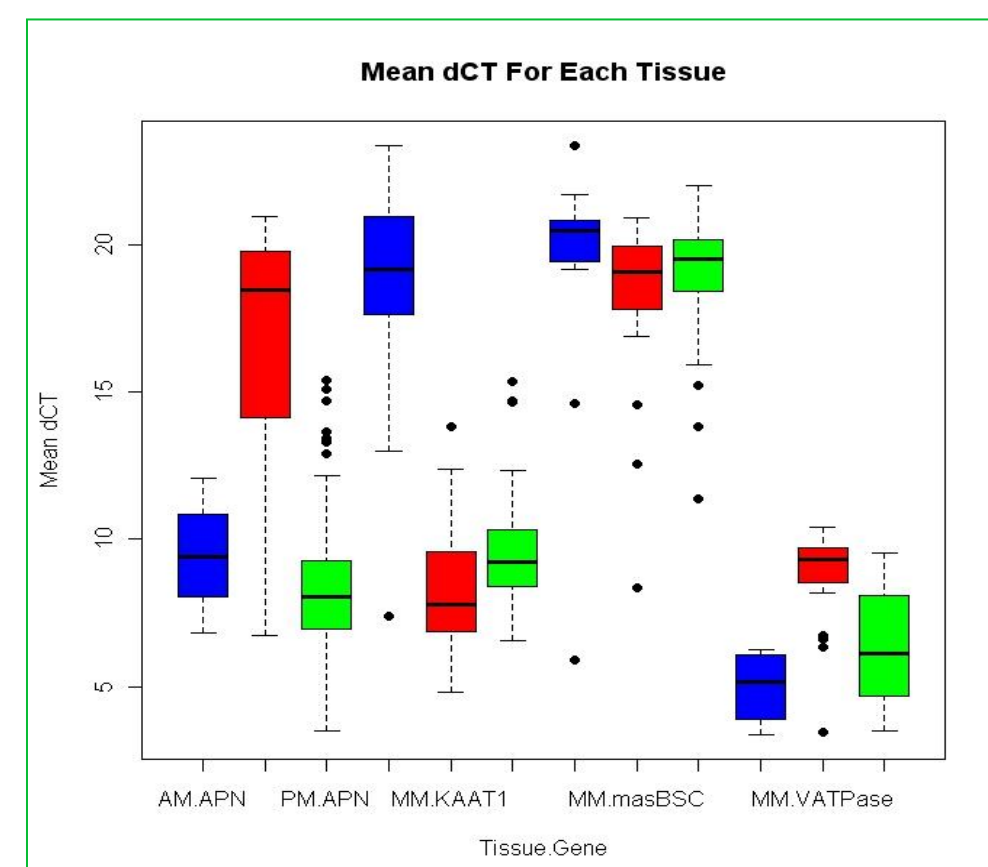


Figure 5: Mean  $\Delta Ct$  for Each Tissue from Full Data Set

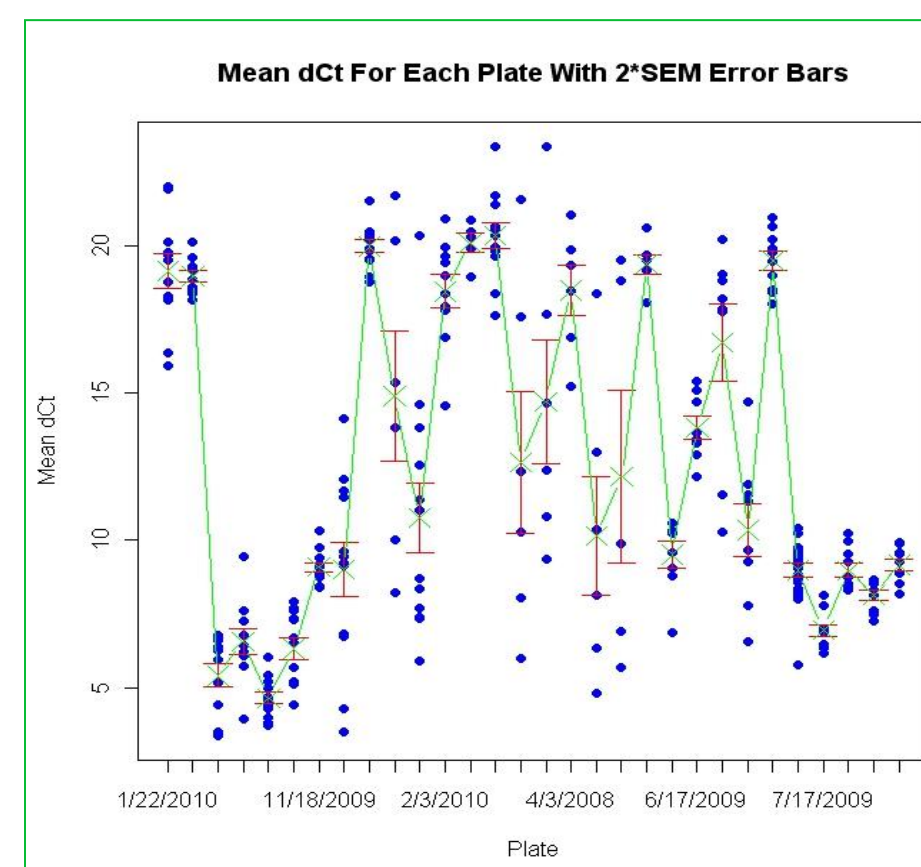


Figure 6: Mean  $\Delta Ct$  for Each Plate from Full Data Set

## Descriptive Statistics

- Descriptive statistics from the entire data set show overall trends.
- For *KAAT1*, gene expression was more than 1500-fold higher in middle midgut and more than 300 fold higher in posterior midgut compared to anterior midgut. No significant differences among midgut regions were observed for *APN*, *masBSC*, or *VATPase*.
- Expression between Instars varied by gene.

## $\Delta Ct$ modeling

- $\Delta Ct$  models were fit and evaluated using the overall predictor variables: Cohort, Plate, Gene, Tissue, Instar, and Weight. Interaction terms for all possible combinations of the predictor variables were also included. From the fully saturated model, stepwise analysis was used to eliminate variables that did not significantly affect the prediction of  $\Delta Ct$ . The best overall models for each gene contain the significant explanatory variables.
- The overall model for *KAAT1* is:  $\Delta Ct = \text{Instar} + \text{Tissue} + \text{Weight} + \text{Plate} + \text{Instar:Plate}$ ; Adjusted R-Squared = 0.7270
- The overall model for *APN* is:  $\Delta Ct = \text{Plate} + \text{Weight}$ ; Adjusted R-Squared = 0.8697
- The overall model for *masBSC* is:  $\Delta Ct = \text{Instar} + \text{Tissue} + \text{Plate} + \text{Weight} + \text{Instar:Plate} + \text{Instar:Weight}$ ; Adjusted R-Squared = 0.7629
- The overall model for *VATPase* is:  $\Delta Ct = \text{Plate}$ ; Adjusted R-Squared = 0.5075

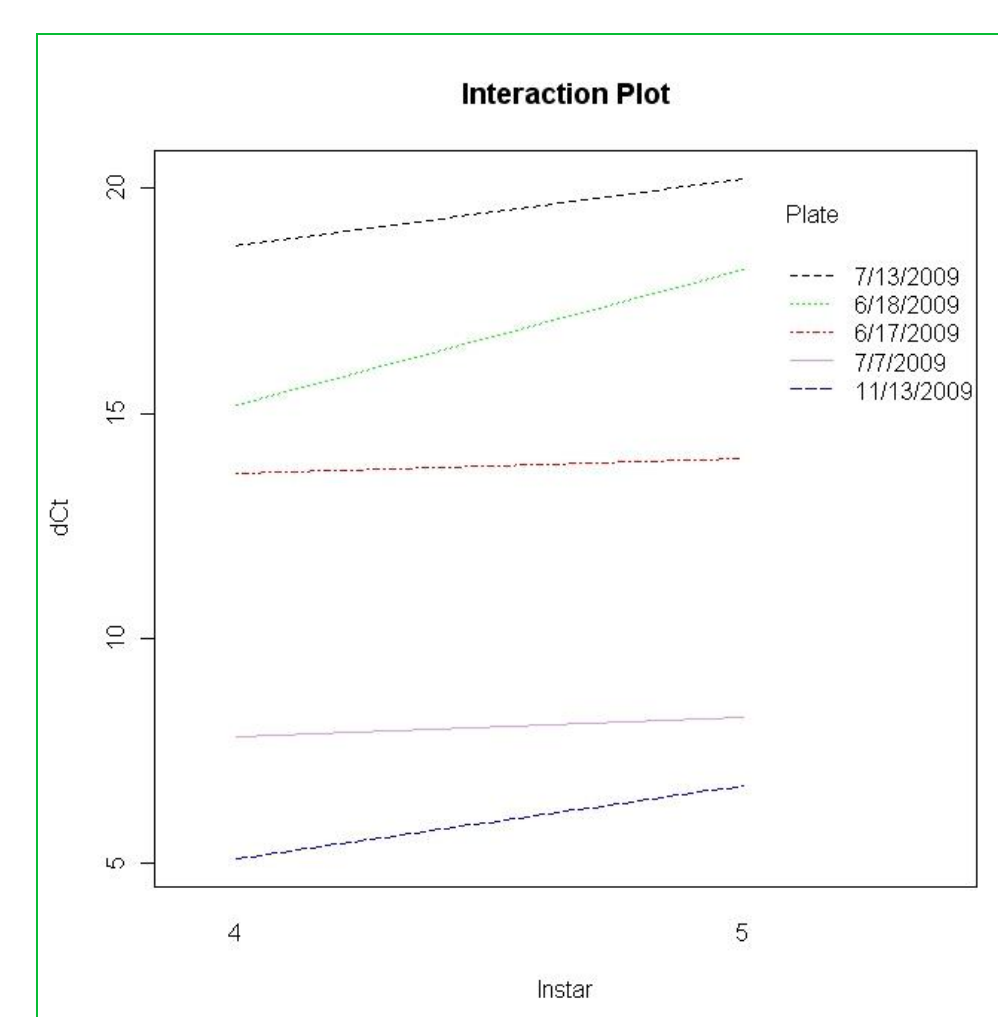


Figure 7: Interaction Plot for  $\Delta Ct$  of *KAAT1*

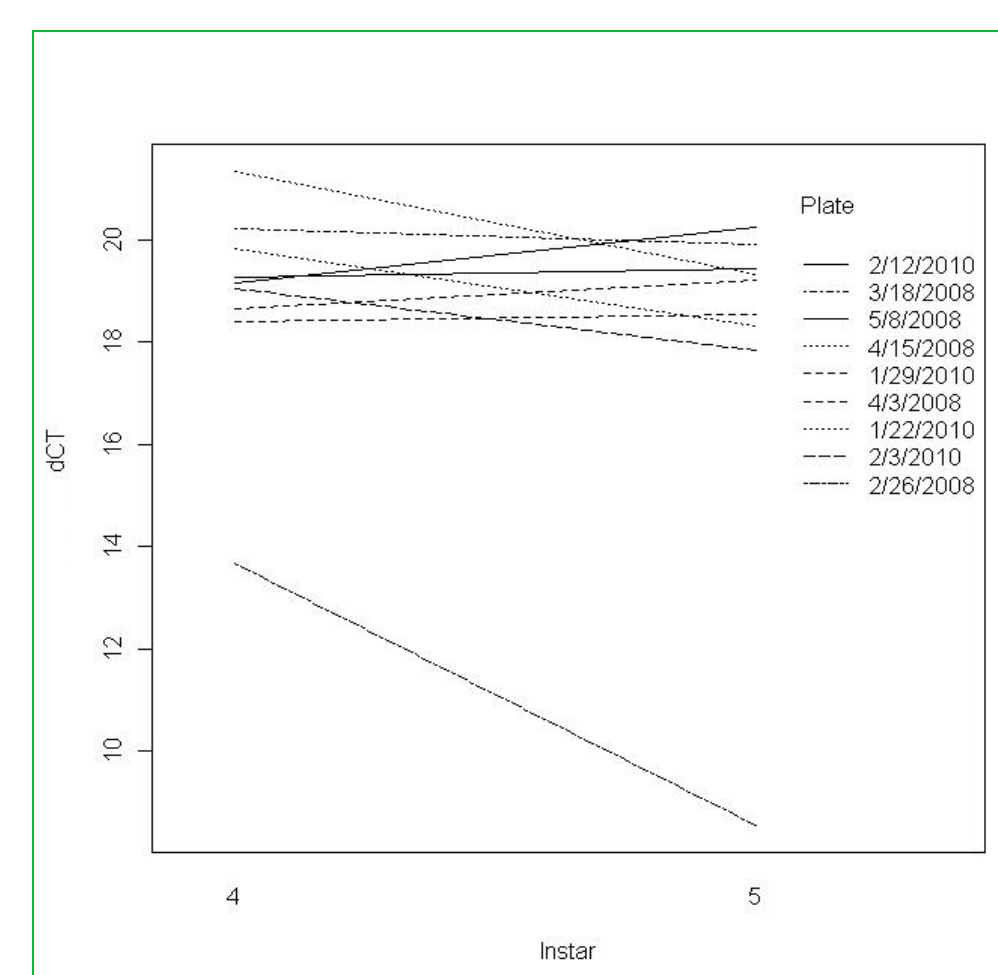


Figure 8: Interaction Plot for  $\Delta Ct$  of *masBSC*

Source	DF	Type III SS	Mean Square	F Statistic	P-value
Instar	1	29.173	29.173	19.9565	< 0.001
Tissue	1	42.650	42.650	29.1760	< 0.001
Weight	1	19.231	19.231	13.1555	< 0.001
Plate	9	108.545	12.061	8.2504	< 0.001
Instar:Plate	9	56.853	6.317	4.3214	< 0.001
Residuals	37	54.087	1.462		

Table 1: ANOVA table for  $\Delta Ct$  of *KAAT1*

Source	DF	Type III SS	Mean Square	F Statistic	P-value
Plate	3	773.25	257.51	82.2980	< 0.001
Weight	1	12.80	12.802	4.0876	0.0514
Residuals	33	103.35	3.132		

Table 2: ANOVA table for  $\Delta Ct$  of *APN*

## SD modeling

- Models for the standard deviation (SD) of the Ct measurements were fit and evaluated using the same overall predictor variables as above. Interaction terms for all possible combinations of the predictor variables were also included. From the fully saturated model, stepwise analysis was used to eliminate variables that did not significantly affect the prediction of SD. The best overall models for each gene contain the significant explanatory variables.
- The overall model for *KAAT1* is:  $SD = \text{Plate}$ ; Adjusted R-Squared = 0.1739
- The overall model for *APN* is:  $SD = \text{Instar} + \text{Plate}$ ; Adjusted R-Squared = 0.0731
- The overall model for *masBSC* is:  $\Delta Ct = \text{Plate} + \text{Instar} + \text{Weight} + \text{Instar:Weight}$ ; Adjusted R-Squared = 0.0506
- The overall model for *VATPase* is:  $SD = \text{Instar} + \text{Plate}$ ; Adjusted R-Squared = 0.0869

Source	DF	Type III SS	Mean Square	F Statistic	P-value
Plate	9	0.2088	0.0232	2.3563	0.0268
Residuals	49	0.4824	0.0098		

Table 3: ANOVA table for SD of *KAAT1*

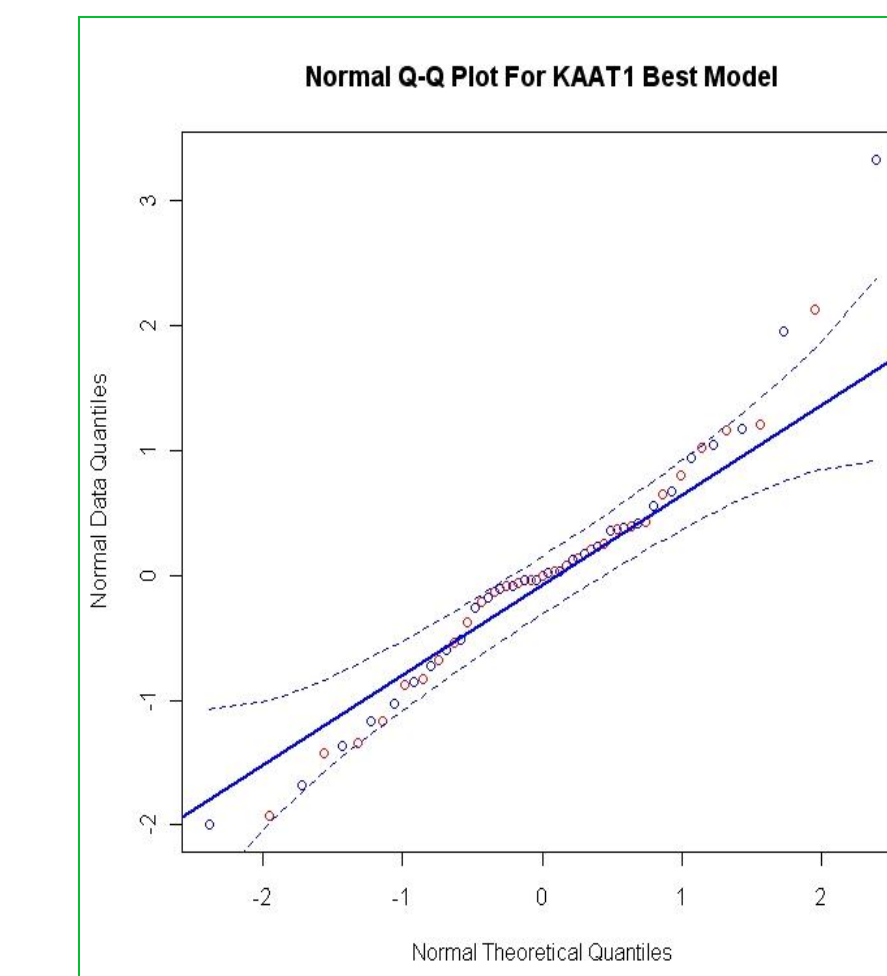


Figure 9: Normal Quantile-Quantile Plot for  $\Delta Ct$  of *KAAT1*

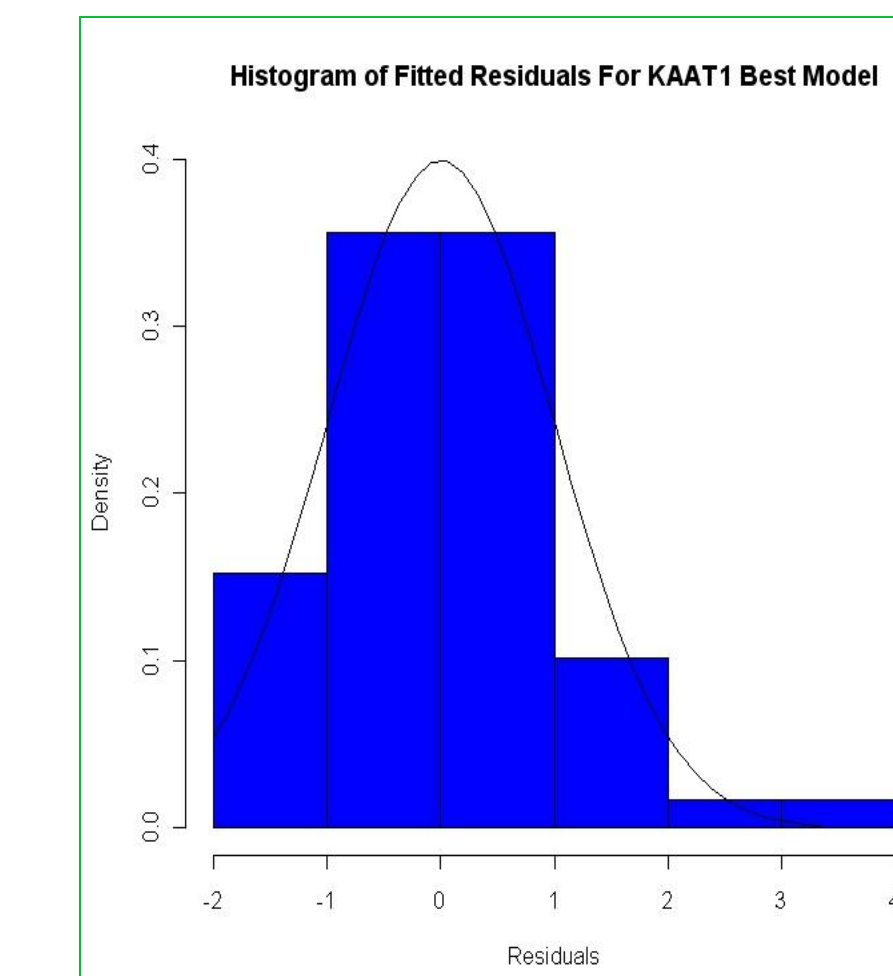


Figure 10: Histogram of Fitted Residuals for  $\Delta Ct$  of *KAAT1*

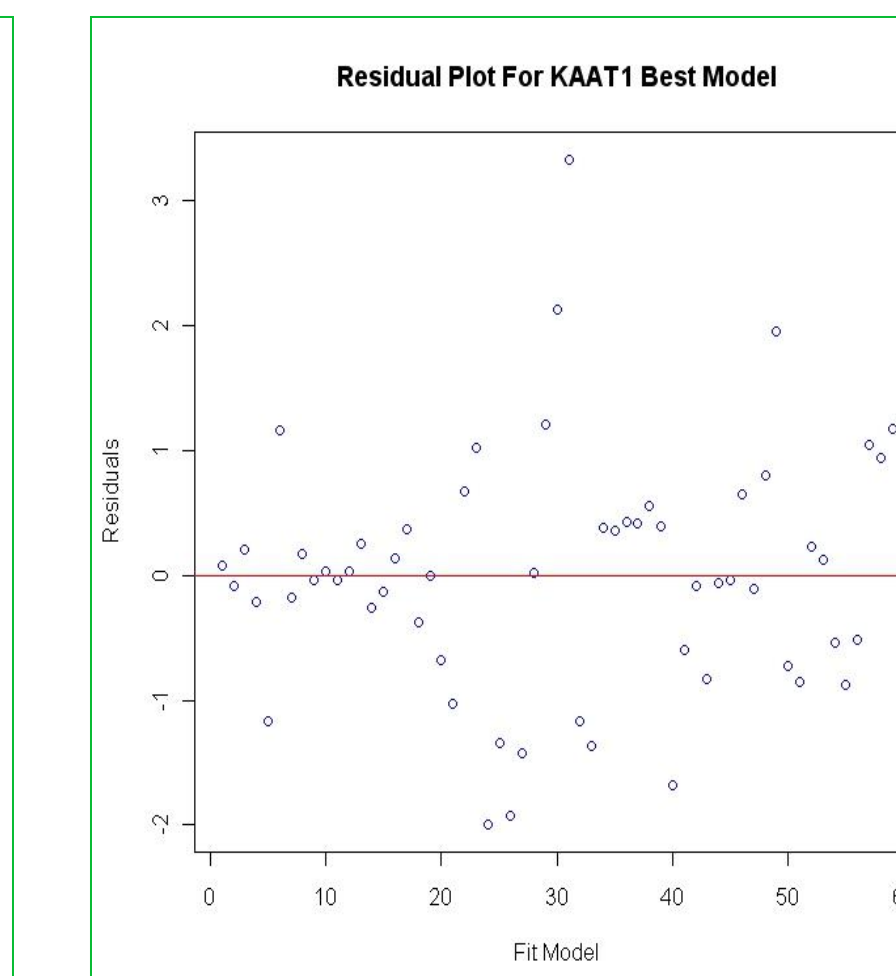


Figure 11: Residual Plot for  $\Delta Ct$  of *KAAT1*

## RQ Error Bars

- The PCR software calculates the standard deviation for the average  $\Delta Ct$  by using  $\sqrt{s_1^2 + s_2^2}$ , where  $s_1$  estimates the standard deviation for the gene measurements and  $s_2$  approximates the standard deviation for the *18s control* measurements. However, this does not take into account the triplicate measurements for the gene and control.
- Using standard error (se) instead incorporates the number of replicate measurements. Thus, it is better to use  $\sqrt{\frac{s_1^2}{3} + \frac{s_2^2}{3}}$ .
- So, for fold difference in expression (RQ), error bars were calculated based on the range of RQs calculated from the  $\Delta\Delta Ct$  values  $\pm$  standard error.

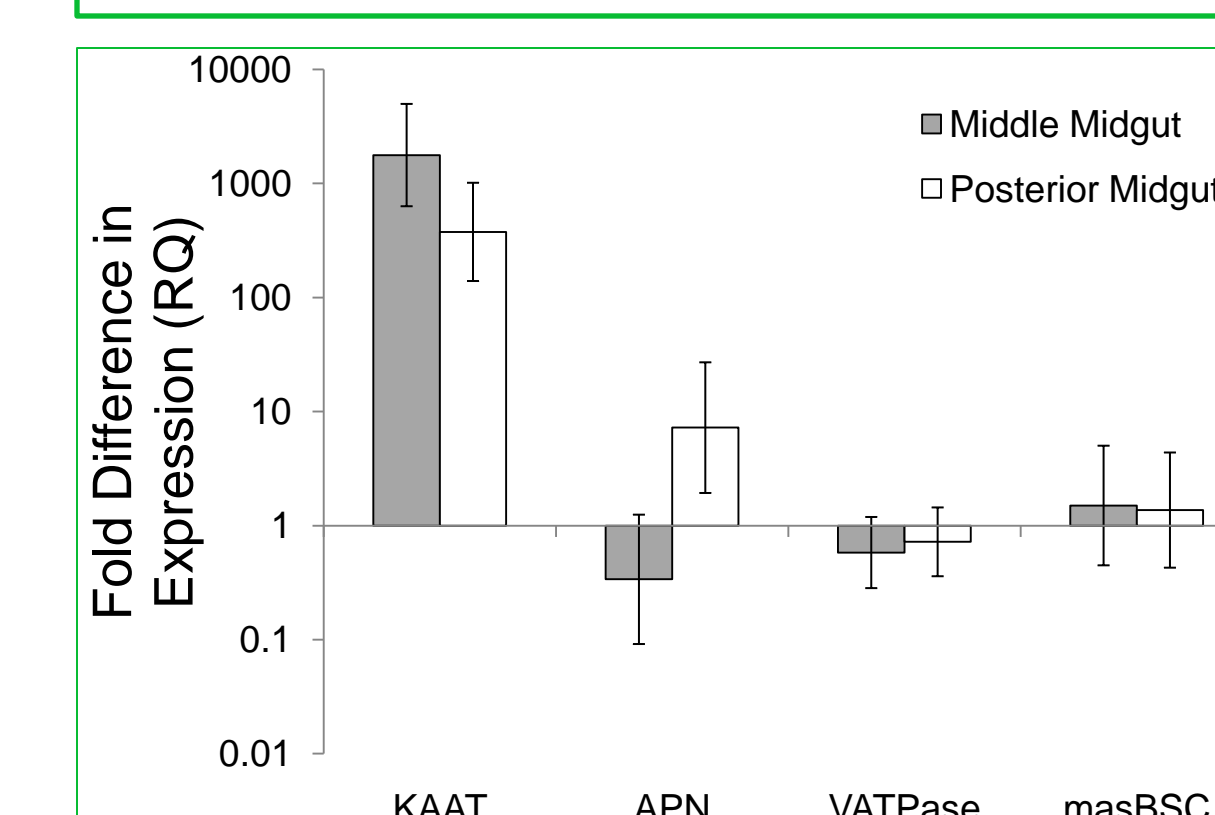


Figure 12: RQ in comparison to anterior midgut for each gene with SE error bars

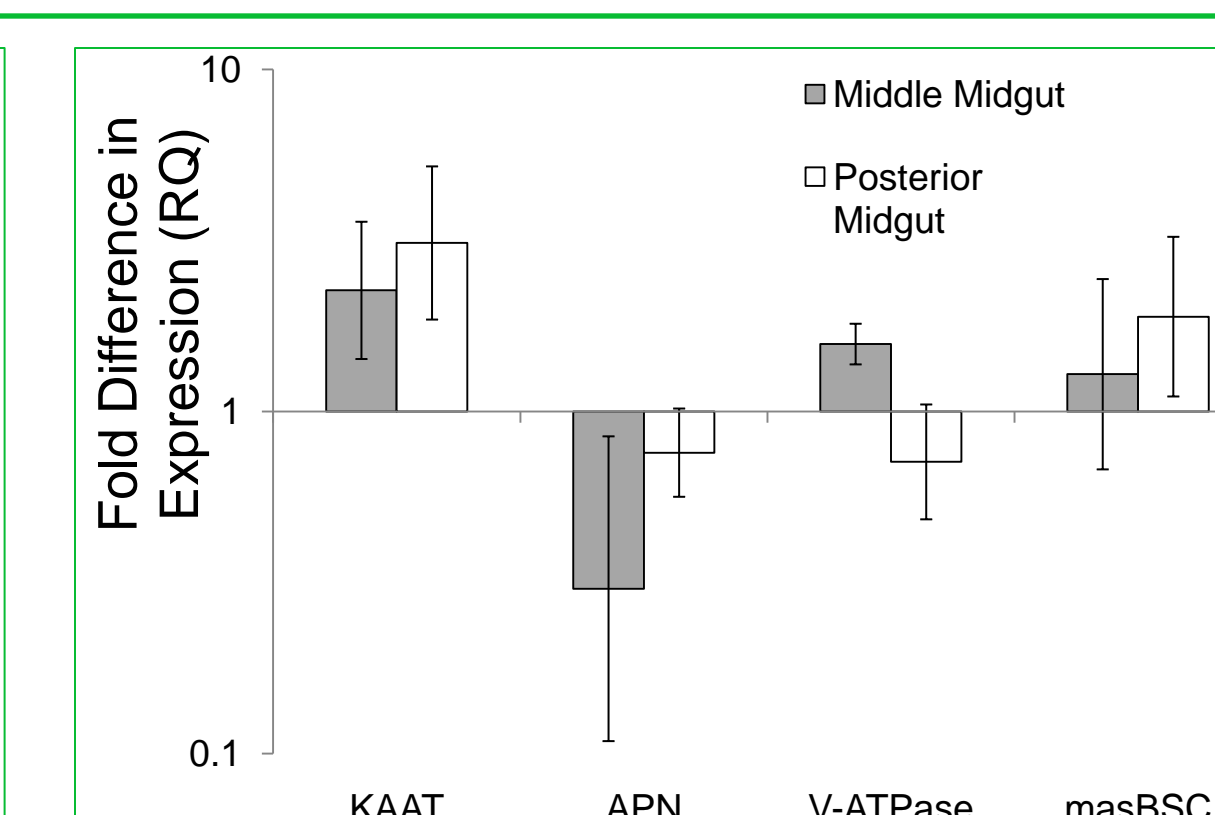


Figure 13: RQ of 5<sup>th</sup> instar larvae in comparison to 4<sup>th</sup> instars for each gene with SE error bars

## Conclusions and Future Research

- Triplicate measurements were shown to have higher power than duplicate measurements, but the powers may be close enough to move to duplicate measurements. More research needs to be done with a focus on replicate measurements to see if the time, materials, and money saved by doing duplicate measurements are worth a drop in power.
- The best models for predicting  $\Delta Ct$  for *KAAT1*, *APN*, *masBSC*, and *VATPase* provided fits with Adjusted R-Squared values all above 0.5 and only one below 0.7.
- The best models for predicting SD for *KAAT1*, *APN*, *masBSC*, and *VATPase* provided fits with Adjusted R-Squared values all below 0.2. One of the major assumptions in fitting general linear models is that the variance in the number of cycles to hit a threshold is constant. Our models indicate that the variability in Ct measurements is heterogeneous (i.e. not all of the standard deviations are equal).
- Future research should look at minimizing the variability that was detected. Also, future work should look at more design changes to increase randomization of treatment assignments.

## Acknowledgements

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