

Single-cell expression profiling of islets generated by the Human Pancreas Analysis Program



In this Correspondence, we introduce the Human Pancreas Analysis Program and discuss ongoing efforts with a specific focus on the continuous release of integrated single-cell RNA sequencing (scRNA-seq) measurements across pancreatic tissues. Although it has been over 50 years since Willy Gepts described the pancreatic pathology in type 1 diabetes (T1D), detailed understanding of the initial molecular perturbations that occur during disease pathogenesis is still incomplete. Two nontrivial constraints hamper insights into these processes: (1) the inability to safely biopsy the human pancreas of living donors; and (2) the substantial disease progression and beta cell destruction that has occurred by the time patients are clinically diagnosed with T1D. These limitations have meant that the majority of T1D studies have been performed on peripheral leukocytes from the blood, which is not the site of pathogenesis. A revolution in single-cell transcriptomic technologies during the past decade has influenced the molecular profiling of islets. Several primary single-cell pancreatic islet atlases for mouse and humans have become available^{1–8}. However, the limited numbers of cells and relatively small numbers of human donors used for the abovementioned studies could not provide comprehensive coverage of the human pancreatic islet transcriptome. In 2016, the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) charged a group of investigators with forming the Human Pancreas Analysis Program (HPAP)⁹. The goal of this initiative is to use cutting-edge but robust and tested technologies in pancreatic tissues and to release high-quality datasets for the T1D community. A central mission of HPAP is to organize and share data resulting from the study of these tissues through an open-access resource database called [PANC-DB](#). Owing to the early success of HPAP-T1D, in 2020 HPAP-T2D was also funded by NIDDK to define the molecular pathogenesis of islet dysfunction by studying human pancreatic tissue samples from organ donors with T2D¹⁰.

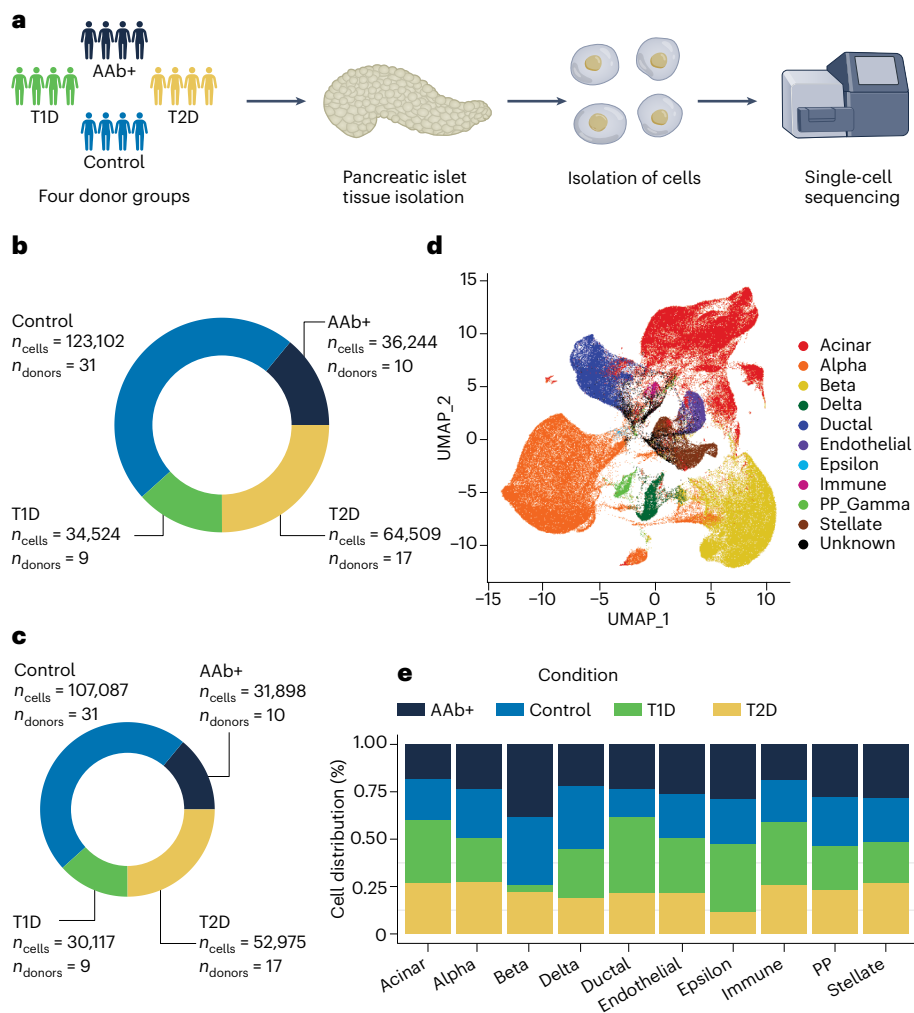


Fig. 1 | scRNA-seq reveals the cell populations of human pancreatic islets. a, Overview of the scRNA-seq workflow using human pancreatic islet tissue samples. **b**, Number of cells and donor distribution across different biological conditions before filtering. **c**, Number of cells and donor distribution across different biological conditions after filtering. **d**, UMAP plot showing the proper classification of islet cells. **e**, Stacked bar chart showing the percentage-wise distribution of cell types across different biological conditions.

Currently, the acceptance criteria for HPAP relates to donors who are younger than 40 years of age and have had T1D for 7 years or

less, or donors without diabetes who are 40 years or younger with one or more T1D-associated autoantibody (AAb). These criteria

have evolved over time from data demonstrating that residual insulin-positive islets and insulinitis are more likely to be found using these acceptance criteria. Our goal is to process tissue from at least nine donors with recent-onset T1D per year, although the unpredictable nature of organ donor recovery does not allow us to provide a precise timeline for new donors. Multiple data modalities from molecular to functional measurements are being generated by HPAP, where raw measurements from individual donors become available on PANC-DB in real time. Among these data modalities, single-cell transcriptomic measurements are distinct, considering that the high-throughput nature of this technology and the maturity of computational techniques for these assays have been under active development for robust data integration across donors. Although the raw FASTQ files for scRNA-seq data are uploaded to PANC-DB once scRNA-seq libraries from each donor have been sequenced, HPAP periodically releases fully processed integrated scRNA-seq data on PANC-DB's 'Interactive Analysis' section once new batches of data from 10 donors have been sequenced and passed various quality control metrics (Supplementary Fig. 1). In this Correspondence, we highlight various aspects of the release of scRNA-seq data integration across HPAP donors.

The first set of scRNA-seq measurements collected by HPAP (about 80,000 cells from pancreatic islets of 24 human donors) consisted of three categories: healthy, AAb-positive but normoglycemic (AAb+), and diagnosed with T1D¹¹. The latest scRNA-seq integration (February 2023) highlighted in this Correspondence includes around 260,000 high-quality human pancreatic islet cells from 67 donors consisting of four categories: non-diabetic ($n = 31$), AAb+ ($n = 10$), T1D ($n = 9$) and T2D ($n = 17$), forming, to our knowledge, the largest existing scRNA-seq dataset of human pancreatic tissues (Fig. 1b). After quality control (QC) and data pre-processing^{12,13}, including doublet removal^{14,15} and normalization¹⁶, the total number of cells was 222,077 from 67 donors (Fig. 1c). Next, based on the marker genes described in (Supplementary Information: Note 1), we used the scSorter method¹⁷ and annotated cells into 10 clusters as shown in the uniform manifold approximation and projection (UMAP) analysis (Fig. 1d). The percentage of cells for each cell type across different conditions is shown in Fig. 1e. Each release of our integrative analysis using scRNA-seq measurements in pancreatic tissues has three

major components, aiming to save many hours of computational work for diabetes investigators. (1) A fully documented R code relying on Seurat's pipeline used to process the latest release of data integration with detailed explanations of the pre-processing, normalization and scaling, cell annotation and other computational issues incorporated in the processed data. In our opinion, this code and accompanying explanations can provide training opportunities to individuals who are learning various aspects of scRNA-seq analysis. (2) Processed data based on Seurat's pipeline in two formats (rds and h5ad), enabling investigators to apply their own filtering, cell annotation and additional computational work to scRNA-seq data. (3) An interactive tool called CellxGene, developed by the Chan Zuckerberg initiative to navigate and visualize single cells from each release (Fig. 1). CellxGene¹⁸ exploits modern web development techniques and enables interactive visualization of large numbers of cells, allowing hypotheses to be tested with functionalities including subsetting, differential expression and others, to help the community to explore the HPAP data. With every new batch of donors, these components are being updated and released on PANC-DB, providing a reliable reference for single-cell pancreatic islet biology studies, especially into diabetes-related conditions. Together, our expanding single-cell transcriptomic map of human pancreatic islet cells and the continuous release of processed scRNA-seq measurements across HPAP donors aim to democratize access to high-quality molecular profiling data in islets, facilitating the discovery of new cures for T1D and T2D.

Reporting Summary





Further information on research design is available in the Nature Portfolio Reporting Summary linked to this article.

Data availability

All pancreatic islet sequencing data have been uploaded to PANC-DB (<https://hpap.pmacs.upenn.edu/>) and the interactive session can be accessed on the cellxgene database hosted on PANC-DB (https://faryabi6.pmacs.upenn.edu/view/T1D_T2D_public.h5ad/). The raw islet sequencing data in the form of FASTQ files for each HPAP sample can be obtained from the PANC-DB database. The processed data can be downloaded in two formats, RDS or h5ad, which can be loaded for analysis using Seurat¹² and Scanpy¹⁹ pipelines.

Code availability

The scripts used for data processing and analysis of the scRNA-seq data are available on GitHub (<https://github.com/faryabiLab/HPAP-scRNA-seq-Workflow-2022>). The cellxgene interactive tool with HPAP data can be accessed via the cellxgene database (https://faryabi6.pmacs.upenn.edu/view/T1D_T2D_public.h5ad/)

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Competing interests

The authors declare no competing interests.

Additional information

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Data collection

scRNA-seq

For samples prepared using 'The Single Cell 3' Reagent Kit v2', the following chemistry was performed on an Illumina HiSeq4000: Read 1: 26 cycles, i7 Index: 8 cycles, i5 index: 0 cycles, and Read 2: 98 cycles. For samples prepared using 'The Single Cell 3' Reagent Kit v3 and v3.1', the following chemistry was performed on an Illumina HiSeq 4000: Read 1: 28 cycles, i7 Index: 8 cycles, i5 index: 0 cycles, and Read 2: 91 cycles. Cell Ranger (10x Genomics; v3.0.1) was used for bcl2fastq conversion, aligning (using the hg38 reference genome), filtering, counting, cell calling, and aggregating (--normalize=none)

Data analysis

scRNA-seq data processing using Seurat package.

The merged filtered feature-barcode matrix included counts from all the HPAP samples adding up to around 260,000 cells. We built the pipeline for downstream analysis using standard scRNA-seq packages such as Seurat v4.1.0, scDbfFinder v1.8.0, SingleCellExperiment v1.16.0, sctransform v0.3.3, and scSorter v0.0.2 for building our pipeline carried out the following filtering steps.

Initial Pre-processing. In the first step, we considered only those cells that contained expression values >0 for at least 200 genes using the min.features parameter. The min.cells parameter indicates to include only features detected in at least three cells.

Doublet finding using scDbfFinder. Doublets are commonly found in scRNA-seq data generated from droplet-based protocols. They arise due to cell capture or sorting mistakes, especially when thousands of cells are involved. Doublets are undesirable in scRNA-seq data as they lead to artifactual findings. We employed the scDbfFinder method to identify and remove potential doublets. The scDbfFinder uses an object of class SingleCellExperiment that contains at least the counts. It trains an iterative classifier on the neighborhood of real cells and artificial doublets. We measured the doublets for each donor sample separately by passing a vector of sample ids given as a parameter to the scDbfFinder function. The program was run on multiple threads using the BPPARAM parameter to achieve faster computation. The scDbfFinder

automatically chooses the doublet rate for 10x data; therefore, we left this parameter empty. The output includes two key columns, `scDbfFinder.score` and `scDbfFinder.class`. While the former represents the doublet score assigned for each cell, the latter shows whether the cell was assigned as a doublet or singlet.

Second-stage pre-processing. We further filtered the data based on `nFeature_RNA` and `nCount_RNA`, representing the number of genes detected in each cell and the total number of molecules (UMIs) detected within a cell. While the low `nFeature_RNA` in a cell may be dead/dying or represent an empty droplet, the high `nCount_RNA` and `nFeature_RNA` indicate that the cell may be a doublet or multiplet. This filtering, along with the filtering of mitochondrial reads (`Percent.mt`), is a crucial pre-processing step because removing such outliers from these groups will also remove some doublets or dead/empty droplets. In addition, we removed the cells marked as doublets from the `scDbfFinder` in the previous step.

Normalizing and scaling data using single cell transform (SCT). Seurat's `SCTransform` (SCT) function was used to normalize the counts that measure the differences in sequencing depth per cell for each sample. The SCT method is built on the regularized negative binomial model to perform normalization and variance stabilization of single-cell RNA-seq data. It removes the variation due to sequencing depth (nUMIs). The `vars.to.regress` parameter allowed us to regress the variation from other sources, such as the percentage of mitochondrial reads. The output of the SCT model is the normalized and scaled expression levels for all the transcripts. Lastly, the `variable.features.n` parameter is used to select the variable features and is set as 3,000.

PC calculation and clustering. We performed principal-component analysis (PCA) based on the top 3,000 most variable genes obtained from the SCT transformed data. We first calculated 50 PCs, and then the dimensionality was determined using an elbow plot showing each PC's standard deviation. Based on the elbow plot, we chose the top 20 PCs.

The `FindNeighbors` function in Seurat was used to compute the k-nearest neighbors in the dataset. The calculations were made on the reduced dimensions of the 20 PCs determined based on the elbow plot in the previous step. After calculating k-nearest neighbors, the `FindClusters` function, built on the concept of shared nearest neighbors (SNN), clustering algorithm was used to cluster the cells at the resolution of 0.8. Finally, the uniform manifold approximation and projection (UMAP) dimensional reduction technique was run on the selected 20 PCs.

Automatic cell annotation using the single-cell sorter method (scSorter). We employed the marker-based `scSorter` cell annotation method to assign cells to known cell types based on the marker genes. The cell type annotations were made based on the marker genes. The `scSorter` method is based on a semi-supervised learning algorithm. It does not require all genes but only a set of marker genes and highly variable genes from the expression data to perform the analysis. The `scSorter` function expects the pre-processed data as input. Therefore, we used the previously normalized, scaled, and transformed expression matrix generated by the SCT method as input. The top 3,000 most variable genes selected by the SCT method were also given as input for the `scSorter` method. Additionally, the `scSorter` function accepts "weight" for the marker genes. Therefore, we assigned equal weights to all markers through the `default_weight` option.

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Population characteristics

All donors were screened for autoantibodies prior to organ harvest, and AAb positivity was confirmed again post tissue processing and islet isolation. The contribution of covariates on our findings was assessed. Covariates were NOT found to affect cell clustering, and therefore, not affect our findings: autoantibody type, age, amylase levels, BMI, cold ischemic time, collection period, c-peptide levels, culture days, CyTOF purity, DCD or DBD, group (T1D, AAB +, or control), HbA1c%, individual, lipase levels, ancestry, sex, viability, or warm ischemic time.

Recruitment

Pancreatic islets were procured by the HPAP consortium (RRID:SCR_016202; <https://hpap.pmacs.upenn.edu>), part of the Human Islet Research Network (<https://hirnetwork.org/>), with approval from the University of Florida Institutional Review Board (IRB # 201600029) and the United Network for Organ Sharing (UNOS). A legal representative for each donor provided informed consent prior to organ retrieval. For T1D diagnosis, medical charts were reviewed and C-peptide levels were

measured in accordance with the American Diabetes Association guidelines (American Diabetes Association 2009). All donors were screened for autoantibodies prior to organ harvest, and AAb positivity was confirmed again post tissue processing and islet isolation.

Ethics oversight

Pancreatic islets were procured by the HPAP consortium under the Human Islet Research Network (<https://hirnetwork.org/>) with approval from the University of Florida Institutional Review Board (IRB # 201600029) and the United Network for Organ Sharing (UNOS).

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