

Network-based disease gene prioritization based on Protein–Protein Interaction Networks

Palak Kaushal¹ · Shailendra Singh¹

Received: 19 March 2020 / Revised: 17 July 2020 / Accepted: 19 July 2020 / Published online: 6 August 2020 © Springer-Verlag GmbH Austria, part of Springer Nature 2020

Abstract

The process to identify genes responsible for a disease is a complex task. The various experimental techniques developed to identify disease-causing genes suffer from the problem of high-cost and high time consumption. Thus, with the increasing amount of biological information available online various computational techniques have been developed to complete this complex task of identification of disease-causing genes. A more accepted view is that the genes related to similar diseases reside in the same neighborhood of the molecular network. In this review, various categories of computational techniques for disease gene prioritization have been highlighted and compared. The work majorly focuses on various categories of approaches that use protein–protein interaction networks with data from heterogeneous sources and heterogeneous biological types. Furthermore, a comparison of these approaches is done and also some issues related to them are discussed.

Keywords Network disease gene prioritization · Protein-protein interaction network · Candidate gene prioritization

1 Introduction

The advancement in technology has uncovered various truths about life. Bioinformatics is one such field that uses advances in the areas of information technology, computer science and communication technology to handle the complicated problems of life sciences, more specifically in biotechnology. Thus, using computational techniques to solve such problems has fast-forwarded the process.

Human beings are made up of genes that are responsible for the functionality and characteristics of the individual. Human being acquires a total arrangement of qualities from each parent, and additionally a tremendous exhibit of social and financial encounters from his/her family. Since relatives speak to most firmly comparable genomic associations and share the same natural encounters along these lines' family history is frequently observed as one of the most grounded

 Palak Kaushal palak.phd19cse@pec.edu.in
 Shailendra Singh shailendra_sing@yahoo.com

¹ Department of Computer Science and Engineering, Punjab Engineering College (Deemed to be University), Chandigarh 160012, India elements for some diseases, for example, cardiovascular diseases, diabetes, cancer, and so on.

Uncovering these disease-causing genes among the candidate genes is thus a major step towards the pathogenesis of diseases. In research after some point in their analysis researchers filter which genes to consider for further experimentation and which one to drop. Disease gene prioritization aims at selecting these disease-causing genes among the large pool of candidate genes by computational examination of both open and private genomic information. Its principle objective is to maximize the yield by narrowing down the gene set to be considered and thus helping in focus on the most promising candidate genes. Thus, disease gene prioritization helps determine the functionality of genes, early diagnosis of disorders and designing effective strategies for treatment.

Disease gene prioritization provides various benefits such as:

- It can help in the development of tools that will provide personalized information to the individual about the risk of developing a certain disease.
- It helps health professionals to design prevention programs for each person according to their mark-up.

• It allows effective selection of the treatments for the patients which are most likely to help them without causing any adverse reactions.

Identifying disease-causing genes and the functionality of various components of genes is a key challenge. Various high-throughput techniques such as genome wide association studies (GWAS) (Hirschhorn and Gadjos 2011), (Ott et al. 2011), linkage analysis, large-scale RNA interference screens (Boutros and Ahringer 2008) are being developed to distinguish disease-causing genes but these mostly resulted in a long list of candidate genes. Subsequently, these experimental methodologies are very time-consuming and expensive as they require several resources. For these various computational systems are being produced for prioritization of hopeful genes. These strategies work by performing estimations iteratively and some additionally coordinate complex, heterogeneous information sets, for example, sequence information, expression information, functional annotation, and other biomedical writing to give a rundown of organized gene list which would be useful for future review in a more educated manner.

In this review, different computational techniques have been discussed with the main attention on network-based disease gene prioritization. In the second section, various types of disease gene prioritization have been discussed. In the third section, various categories of network-based techniques are highlighted; with integration with heterogeneous data types discussed in the fourth section. In the fifth section of the paper, the workflow of the network-based disease gene prioritization process has been explained. In the sixth section discussion about techniques and problems that arise in the gene prioritization process are discussed.

2 Disease gene prioritization techniques

On the basis of strategy and type of data used, various computational techniques for candidate gene prioritization can be extensively classified into the under-mentioned categories: filtering-based techniques, similarity-based techniques, and network-based techniques. Table 1 lists some of the advantages and disadvantages of these techniques.

2.1 Filtering-based techniques

Filtering-based techniques work on the basis of the properties of genes. The properties of genes are defined and then filters are created. With the application of each filter, the list of candidate genes gets reduced leaving at the end the smaller output list of candidate genes that have a higher probability of being linked with the disease. For example, a tool named 'TEAM' (Tool for the integration of Expression, and linkage and Association Maps) (Franke et al. 2004) have three-level filtering options for analysis of genes: candidate gene region analysis, whole chromosome analysis, and genespecific analysis. Filtering-based techniques are also used in combination to other techniques for narrowing down the list of most promising candidate genes. GeneDistiller (Seelow et al. 2008) is a web-based application which offers a customizable prioritization of genes as per user requirements. The user can read the different kinds of information about the genes, select specific genes by applying some filters, sort the genes on basis of parameters and also prioritize genes as per required specification. For the prioritization task, the user can also assign different weights to different parameters considered while calculating the final score. But sometimes due to the strict filtering mechanism, filtering-based techniques sometimes also filter out the genes only if one criterion is not met thus producing false negatives.

Table 1 Advantages and disadvantages of different types of gene prioritization techniques

Туре	Advantages	Disadvantages
Filtering	Reduces the list of candidate genes Processes a great many records in a small amount of time	False negatives produced Genes that do not match single criteria are filtered out without considering others
Similarity-based	More promising results due to relation to already known facts Integrate both knowledge base and raw data	Only identifies genes about which some prior knowledge is available Biased towards a specific contemplated subset of genes Lack of predictable representation or association of key concepts
Network-based	Easier interpretability A better understanding of disease pathways	Only limited to genes present in a network Requires a lot of experimental resources Performance affected by the quality of the interaction network Limited power if the prior disease information is scarce

2.2 Similarity-based techniques

Similarity-based techniques perform prioritization by calculating the similarity between candidate genes and seed genes. The similarity is identified either on the basis of disease-related keywords searched from disease-related documents or on the basis of similarity between properties of genes. Yu et al. (2008) have investigated various vocabularies and representations and used various ranking algorithms to perform prioritization. Perez-Iratxeta et al. (2002) developed a scoring system using data mining to prioritize genes using information from Medical Subject Headings (MeSH) (Lowe and Barnett 1994). The authors used information from MEDLINE and NCBI Ref-Seq database to derive relationships among functional terms, chemical terms and pathological conditions. A software named ENDEAVOUR (Aerts et al. 2006) performs gene prioritization on the basis of similarity with the training properties obtained from various data sources individually and then combining the results of all the ranks obtained from different sources into one list. Adie et al. (2006), developed a web-based server SUSPECT which uses the weighted combination of sequence-based and annotation-based approaches to prioritize genes. van Driel et al. (2006) used text mining to calculate disease similarity information by calculating the cosine of angle between the vector representation of each Online Mendelian Inheritance In Man (OMIM) record. In Schlicker et al. (2010) the authors introduced an approach MedSim, which uses functional comparisons to rank genes. The approach particularly automatically annotates GO terms with disease entries to create functional profiles of genes.

Over the time, various methods to calculate similarity between genes and diseases have been developed. Some these methods measure similarity on the basis the probability of the appearance of GO terms, their distances to the closest common ancestor term, the kappa statistics, cosine similarity, and many others. Pesquita et al. (2009), the authors have reviewed various methods used in biomedicine to calculate the similarity and provided the categorization, comparative assessment and various implications of the methods. Although the text mining-based approaches have performed well but they experience the ill effects of the issue of absence of steady representation or association of key ideas which often lead to redundant data. In addition, for the well characterized diseases, i.e., those diseases for which association of genes have already been identified in the past, there is more information retrieval about them using text mining techniques as compared to more newly identified diseases.

2.3 Network-based techniques

A network-based technique primarily uses the topology of the network for ranking the genes. In these techniques, the interactions among the proteins or genes in the organisms are represented using graphs, where hubs represent the entities and the edges represent the connections among them. This graphical representation helps in the visualization of the network which enhances the understanding of the complete biological structure. Various pieces of evidence propose that practically related qualities prompt to comparative phenotype (Oti and Brunner 2007). In addition, many studies have suggested that the genes responsible for the same or comparative diseases are generally located in one of the same biological modules such as in a pathway (Wood et al. 2007), protein complex (Lage et al. 2007), or a subnetwork of protein interactions (Lim et al. 2006). Thus, using these biological modules to understand the cause of the disease is quite helpful. The set-back to such techniques is the scarcity of knowledge of the disease which limits its progress.

3 Network-based disease gene prioritization

Based on their structure and properties, biological networks are divided into three types (Morris et al. 2015a): pathways, interaction networks, and similarity networks. While pathways are used to represent metabolic, signaling or regulatory pathways; interaction networks illustrate the interactions among biological products like genes, amino-acid residues, proteins, metabolites, small molecules, diseases, etc. for example gene regulation networks, metabolic networks, protein interaction networks, and signal transduction networks. In similarity type, nodes represent some biological entities, while edges represent the relation among nodes on the basis of some similarity measure forming networks like metabolic correlation networks using profiling data (Weckwerth et al. 2004), gene or transcript correlation network using expression data (Bergmann et al. 2004) or etc. Amongst the above discussed biological modules, it has been noticed that Protein-Protein Interaction Networks (PPINs) can possibly distinguish the disease-causing genes as these add to a better understanding of disease pathways (Safari-Alighiarloo et al. 2014).

A Potein–Protein Interaction Network (PPIN) is often abstracted as a graph model, where G (V, E) is an undirected graph with a set of nodes-V denoting proteins and set of edges-E denoting interactions among the proteins. Thus determining the properties of genes using the interactions, is what became the basic building component for the development of computational approaches for disease gene prioritization. These approaches work on the principle of "guilt-by-association" (Oti and Brunner 2007) according to which the genes that are functionally or physically related to disorders are more likely to be positioned closer to each other. Thus, on the basis of proximity to disease genes the likelihood of candidate genes being related to the disease can be computed.

Protein-protein interaction networks model physical interactions and functional relationships among the proteins. With the principle objective to identify protein interactions various large-scale experiments have also been conducted such as a high-throughput yeast two-hybrid (Y2H) system (Ito et al. 2000) which discover direct binary interactions among the genes, tandem affinity purification followed by mass spectrometry (Morris et al. 2014). In addition, various text mining applications that provide manually validated and/or computationally predicted PPIs from biological data are available for public use (Blaschke et al. 1999). Thus large-scale identification experiments lead to the generation of billions of interactions and these interactions have been managed in databases such as DIP (Xenarios et al. 2002), BIND (Bader et al. 2003), STRING (Szklarczyk et al. 2011), MINT (Licata et al. 2012), etc. This interaction information is further used to construct a PPI network. Since visualizing the interactions and network is a difficult task various bioinformatics tools such as GenMAPP (Dahlquist et al. 2002), Osprey (Breitkreutz et al. 2003), VisANT (Hu et al. 2005), CellDesigner (Funahashi et al. 2003), PIANA (Aragues et al. 2006), Cytoscape (Cline et al. 2007), Shannon et al. (2003) have been developed along with the various plug-ins. These tools have made the work of the researchers easier. Despite the incompleteness and biased nature of PPI data, PPI networks recently due to its high-coverage and high-quality are one of the most widely used biological networks in predicting and detecting protein complexes (Stelzl et al. 2005). Various topological parameters can be used to identify the collective, subnetwork and individual behavior of the network components. On the basis of topological parameters, the network-based prioritization techniques are broadly classified into local measures-based techniques and global measures-based techniques.

3.1 Local measures-based techniques

The early methods in gene prioritization focused on local network information of the network. Table 2 contains a list of some of the local measures which can be used for analyzing networks.

The most straightforward approach is based on the interconnectedness of the genes, i.e., whether the given genes are connected with disease genes directly in the PPI network. This can be determined either using a direct-neighborhood approach or shortest path approach. Krauthammer et al. (2004) proposed molecular triangulation as a method to identify genes responsible for genetic variations. The authors used text-mining approaches to extract interactions from research literature available online. Each node was initially assigned a primary-evidence score which was then projected to nearest neighbors. The evidence score of a node is the summation of near neighbors' secondary-evidence score received from nearest neighbors. This evidence score was further used to identify the genes, as the gene which is nearer to more seed genes will have a higher score. Oti et al. (2006) used the direct-neighborhood based approach for predicting disease genes by counting the number of first-degree candidate genes known to be linked with disease genes.

But direct-neighborhood based approaches failed to take into account the fact that the disease genes are also the part of same pathways. Dezső et al. (2009) proposed an algorithm that builds a shortest-path network which connects condition-specific disease genes. The authors calculated the significance score of each node on the basis of the number of paths from the particular node in the shortest path network to the total paths in the complete network. Xi et al. (2016) compared the performance of three different human PPI networks from three different interaction sources that are literature-curated (LC), experimentally derived (EXP) and predicted PPIs. The authors used five topological features

Table 2	List of local	parameters
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Parameter	Description
1 N index	Proportion of number of interactions with disease genes to total number of interactions to all genes
Shortest distance	Shortest distance between two genes
Degree	Number of links to a gene
2 N index	Proportion of links to disease genes to total links to neighbors genes
Positive topology coefficient	Measure the degree of sharing partner between a gene and disease gene
Connectivity	Number of neighbors of a gene
Average shortest path Distance	The average length of all shortest paths between a gene and any other gene
Average distance to disease genes	The extent to which the protein communicate to disease genes
Eccentricity	Maximum non-infinite length of the shortest path between <i>n</i> th and another node in the network

namely node degree, 1 N index, 2 N index, the average distance to known disease gene and positive topological coefficient to train a k-Nearest Neighbor (kNN) classifier to predict the genes with a higher likelihood of being involved with the disease. Hsu et al. (2011) considered two factors: one direct interaction between two genes and the second number of connectors between genes for calculating the interconnectedness score of the gene on the basis of which genes were prioritized. Zhu et al. (2012) formulated a vertexsimilarity-based approach based on the similarity between two genes. The authors had used both direct neighborhood and shortest path approach to calculate the similarity score between two genes. Li et al. (2014) proposed a simple localized algorithm SPranker which performed prioritization on the basis of topological similarity calculated on the basis of the shortest path from the disease gene. Table 3 contains the list of summary of local measures-based techniques.

3.2 Global measures-based approaches

While the local measures consider only the neighborhood of the node, the global measures consider the complete topology of a network for ranking genes. Various techniques based on global measures have been proposed by researchers to perform disease gene prioritization some of which are discussed as follows.

3.2.1 Graph centrality

Wang et al. (2011) proposed to integrate different overlapping disease signatures on the basis of graph centrality. The authors used six graph centrality measures listed in Table 4 to quantify the importance of a gene in disease, which is along with their definitions on the basis of which prioritization was performed. Higher the value of the centrality measure more is the probability of a gene being related to the disease.

3.2.2 Random walk with restart (RWR)

A random walk on graph is defined as a transition from the present node to a randomly chosen neighbor iteratively starting at a given source node, s. Random walk with restart is a variant of random walk in which the walk is restarted at node every s time step with probability r following equation:

$$p^{(t+1)} = (1-r).Wp^{(t)} + r.p^{(0)},$$

where *W* represents a column-normalized adjacency matrix and $p^{(t)}$ is a vector, where the *i*th element of the vector represents the probability of being at node *i* at time step *t* and $p^{(0)}$ is the initial probability vector.

Köhler et al. (2008) defined the similarity between the genes in the network using RWR. The gene ranking was done on the basis of the steady-state probability vector obtained after the change between the values of two iterations is very small (below 10^{-6}). Erten et al. (2011) proposed a gene prioritization scheme on the basis of topological similarity in which the global signature of the location of gene is used to perform disease gene prioritization. The topological profile was constructed using the proximity of protein to every other protein in the network. The authors assessed topological similarity using random walk proximity as a feature. They proposed three different schemes on the basis of topological similarity: average topological similarity with seed genes (ATS); topological similarity with average profile of seed genes (TSA); topological similarity with the representative profile of seed genes (TSR).

Li and Li (2012) proposed two different algorithms based RWR using multigraphs. A multigraph is a graph constructed using different gene networks from multiple data sources and then merging them forming a one single network. The first algorithm RWRM (random walk with restart for multigraphs) simply extends random walk with restart on multigraphs. The second algorithm complex heterogeneous network works by combing multigraph gene network and phenotype information and then performing random walk. Le and Kwon (2013) tried to further enhance the performance of RWR based methods by weight adjustment technique in which weight reinforcement of interactions close to known disease genes is done.

3.2.3 Diffusion kernel

The diffusion kernel K of a graph is defined as

$$K = e^{-\beta L},$$

where β is the magnitude of diffusion and L is Laplacian of the graph.

Köhler et al. (2008) used the method of diffusion kernel to rank genes on the basis of the score computed using the following formula:

$$Score(j) = \sum_{i \in \text{ disease gene family}} K_{ij}.$$

Zhang et al. (2011) proposed a Bayesian regression approach that uses diffusion kernels on PPI networks that prioritize genes on the basis of Bayes factor which calculates the strength of similarity between disease phenotypes using the gene proximity profile containing pairwise similarity between every pair of genes.

Table 3 Summary of local r	Summary of local measures-based techniques					
Class	References	Method name	Dataset	Type of network	Measures	Techniques Used
Direct neighborhood	Krauthammer et al. (2004)	. 1	Physical Interactions from literature analysis	Human molecular network	MLS scores: highest points of respective linkage peaks	Molecular-triangulation method
	Oti et al. (2006)	I	Literature-based human PPIs, and human mapped interactions from three species nematode, baker's yeast and fruit fly	Human and non-human PPI mapped to human proteins using orthology relations	Gene located within loci in which disease gene located	Direct-neighborhood
Shortest-path	Dezső et al. (2009)	1	PPI data from public databases, Differentially expressed genes identified by <i>t</i> test	Differentially expressed genes mapped onto PPI	Topological significance scores	Shortest path
	Hsu et al. (2011)	ICN	PPI data from nine databases; FAN from STRING	PPIN and Functional Asso- ciation Network (FAN)	Alternate paths, direct links, and shortest path	Summation of closeness values to seed genes
Combination of the direct neighborhood and short- est path	Jianzhen and Li (2006)	1	Three different human PPI networks from sources- literature-curated, experi- mentally derived and predicted PPIs made from baker's yeast, nematode, fruit fly, and mouse by interologs; hereditary disease genes from the morbid Map table in OMIM	Three different PPI network	Node degree, average distance to known disease gene, 1 N index, 2 N index, Positive topologi- cal coefficient	KNN classification algorithm
	Zhu et al. (2012)	I	Protein interactions from public databases, litera- ture co-citations	Human PPIN	Gene vectors for each pair of connected genes	Summation of vertex simi- larity scores between gene and each seed gene
	Li et al. (2014)	SPranker	Human PPI data from HPRD; disease-related from orphanet and other literatures	Human PPIN	Topological similarity	Shortest path-based

Name	Description
Degree centrality	The number of edges connecting node <i>i</i> and its neighbors
Betweenness centrality	The average fraction of shortest paths that pass through the node i
Closeness centrality	A measure of how quickly information disseminate from the node to other reachable nodes
Subgraph centrality	The total number of network closed loops which the protein takes part in
Eigenvector centrality	The <i>i</i> th component of the principal eigenvector of adjacent matrix A
Information centrality	The harmonic mean of lengths of all the shortest paths which ends at the protein

3.2.4 Network propagation

Vanunu et al. (2010) proposed a method, PRINCE which uses prioritization function following logistic regression model-based approach to assigning confidence scores to the genes. The method is similar to RWR with the major difference of using weight matrix which is derived from the adjacency matrix. The key idea was to normalize each edge weight by the degrees of both of its endpoints in contrast to the random walk with restart which considers only one endpoint.

3.2.5 Page rank with priors

Page Rank with Priors (PRP), another algorithm that is used for gene prioritization is an extension of Page Rank. In this algorithm, a prior probability is assigned to each node and further with some probability factor it chooses amongst its neighbors which node to move next. The iterative equation (Gonçalves et al. 2012) it uses is as follows:

$$p_{v}^{(i+1)} = \beta \cdot p_{v}^{(0)} + (1 - \beta) \cdot \sum_{\{u \in V, (u,v) \in E\}} p_{u}^{(i)} \cdot \frac{w(u,v)}{d(u)},$$

where β is back probability denoting the probability of jumping to initial node at each step. Chen et al. (2009) used page rank with priors to rank genes based on the set of known disease genes. Sinsha and Chitturi (2016) highlighted the modified versions of the page rank algorithm to deal with the existing problems of gene prioritization such as bias nature towards neighbors of high degree nodes and central nodes.

3.2.6 Topology potential

Li et al. (2015) proposed a gene prioritization method by considering each protein as a material particle. Each particle around itself generates a potential field and all the interaction and thus results in the formation of a topological field over the entire network. The authors ranked the proteins on the basis of their topology potential value and selected the top x % proteins to identify essential genes as per the requirement. The authors also integrated other centrality measures with topology potential to enhance the performance of the system.

3.2.7 Machine learning

Machine learning has also been used in the field of disease gene prioritization. Lui et al. (2016) defined a Generalized Bi-relational Network (GBN) and used a series of common structure-based features named number of neighbor (NG), Jaccard coefficient, common neighbors (CN), neighbor of neighbors (NN), total neighbors (TN), Adar similarity(Adar), friends measure(FM), cosine similarity, preferential attachment score(PAS), Katz measure for classes of path weighting features. Common features, 4 classes of path weighting features and union of all features were used to compare of supervised-learning models: logistic regression, decision tree (DT), random forest (RF), and K-Nearest neighborhood (KNN). All path weighting features were also calculated using the unsupervised model. Lui et al. (2020) have applied the popular technique, i.e., machine learning for network-based classification. The authors have used supervised learning using the neighborhood of each gene's network as its feature vector using the influence matrix, adjacency matrix, and node-embedding matrix.

3.2.8 Soft-computing techniques

Grewal et al. (2016) proposed to assign different weightage to different measures and thus used aggregation operators. Aggregation combines different values into a single value which has a combined effect of all the values. The authors extracted values of four different measures, assigned each a fuzzy association score and then combined them using aggregation operators. The aggregation score finally computed for each gene was used to form a prioritization list.

3.2.9 Community detection

Indulekha et al. (2018) presented an algorithm based on community detection in a PPI network to perform the task of gene prioritization. The main idea followed is the identification of community in a graph which is a collection of closely connected nodes. These detected communities are used in analyzing the properties of the network. The authors have used Gervan–Newman (2004) algorithm for the process of community detection which works using the edge betweenness parameter.

Table 5 contains a summary of global measures-based techniques.

4 Integration of heterogeneous data types for disease gene prioritization

The performance of a prioritization technique is heavily influenced by the data provided to the system, because if the seed gene set is too small, the detected pattern is insufficiently informative. With the increasing availability of data, the focus has shifted from using single omics data to integrating it with more heterogeneous data. This multiomics approach allows better and deeper understanding of the complexity of phenotypes and also helps deal with biasness and missing nature of data. Using different types of biological information related to a disease enhances the knowledge about the disease and has reported to improve the performance of prioritization techniques. Thus, researchers proposed combining protein network information with different types of biological data.

There are mainly two approaches which are followed for the process of integration of data. The first approach involves consideration of data from different sources separately while accessing the genes and then finally aggregating the resultant multiple ranked lists into one final ranking list. The integration of lists is done using one of the many integration techniques like N-dimensional Order Statistic (NDOS) (Stuart et al. 2003), discounted rating system (DRS) (Li and Patra 2010), kernel based fusion (Yu et al. 2011), etc. The alternate approach is integrating the information from various data sources into a single network. A comprehensive network with all types of data is constructed in which different layer contains different type of data and are connected to each other through gene-phenotypic associations, and then the task of prioritization is performed. Various publicly accessible databases like OMIM (Amberger et al. 2019) provides phenotypic-genotypic relationships in human. In Zhang et al. (2019), the authors have constructed quadruple layer heterogeneous network to perform gene prioritization.

4.1 Gene ontology

The gene ontology gives controlled vocabularies of characterized terms speaking to quality gene properties. These cover three spaces: cellular component, molecular function, and biological process. It is organized as a coordinated non-cyclic chart, where every term has characterized connections to at least one different term in a similar space, and now and then to different areas. Li et al. (2014) also proposed another algorithm, i.e., SPGOranker, an improvement over SPranker which uses GO term similarity. The improved algorithm integrates the molecular functional similarity with the SPranker which works on the shortest distance method. The validation results obtained show the improvement in detecting true disease-causing genes with the integration of GO annotations.

Gentili et al. (2019) have proposed two heuristics using similarity-based on Gene Ontology-Biological Node Relevance (BNR) and Biological Random Walk (BRW). In the former technique, the authors have sorted genes on the basis of the score calculated as an intersection between biological information and annotations. BRW is a majorly RWR with the main difference that in BRW the matrices calculated depend on the biological information of the available genes.

4.2 Gene expression

Gene expression is an interpretation of data encoded in quality into protein or RNA structures that are available and working in the cell. Communicated qualities incorporate qualities that are interpreted into delivery person RNA (mRNA) and afterward converted into protein, and in addition, qualities that are deciphered into RNA, for example, exchange and ribosomal RNAs, yet not converted into protein. Proposed ESFSC, a method that simulating Random Walker for the identification of disease-related genes using topological properties of genes and gene expression correlation. The authors formulated the seed set based on known disease genes and their k-nearest neighbor, and initial probability scores were assigned to genes on the basis of the location of the gene. Furthermore, random walk with restart was implemented which was guided by similarity transition matrix and correlational transition matrix constructed on the basis of topological similarity properties and gene expression profiles, respectively. The final ranking of the genes was then done based on the steady-state probabilities obtained by combing results of random walk of two different matrices.

4.3 Orthology

Orthologs are homologous proteins that are gotten from a typical precursor. They generally have high comparable amino corrosive successions and hold the same or fundamentally the same as capacities. Peng et al. (2012) used the orthologous property of genes to perform gene prioritization. The authors proposed a method ION which combines three features: connections among the genes, the orthologous property of genes and features of neighbors. Initially, the orthologous score was being assigned to each gene and

Class	References	Method Name	Dataset	Type of network	Measures	Techniques used
Graph centrality	Wang et al. (2011)	1	Genes from different disease-related gene signatures	Context-constrained protein interaction network	Degree centrality, between- ness centrality, closeness centrality, sub graph centrality, Eigen vector centrality, information centrality	High centrality value of a gene
Random walk with restart	Köhler et al. (2008)	I	PPI data of human, mouse, fruit fly, nematode, bak- er's yeast; disease-gene families from OMIM	Interactions from four non- human species mapped to orthologous human proteins in the human PPI network	Steady-state probability vector indicating similar- ity between genes	RWR
	Erten et al. (2011)	Vavien	Disease-gene associations from OMIM; human PPI data from NCBI Entrez	Disease-related gene prod- ucts mapped to human PPI network	Random walk proximity and Pearson correlation coefficient	Three different schemes using topological similarity with genes
	Li and Li (2012)	RWRM	Disease genes from OMIM and other literatures; PPI from HPRD	Merged multigraph gene network	Steady probability	RWR
	Li and Li (2012)	CHN	Disease genes from OMIM and other literatures; PPI data from HPRD; Gene Ontologies from GO project	Heterogeneous network connecting a merged mul- tigraph gene network with phenotype network	Steady probability	RWR
	Le and Kwon (2013)	ORIENT	Public databases and data from other literatures	 3 weighted human func- tional linkage networks; 2 weighted human PPINs and 1 unweighted human PPIN 	Neighbor-favoring weight reinforcement, density of subgraph, number of shortest paths, genomic data	RWR-guiding by neighbor- favoring weight reinforce- ment
Diffusion kernel	Zhang, et al. (2011)	1	PPI data from public databases; phenotype similarity profile using text mining; known asso- ciations between disease phenotypes and genes from OMIM	5 different PPINs	Gene proximity profiles, phenotype similarity profile using text mining technique	Bayesian linear regression
Network propagation	Vanunu et al. (2010)	PRINCE	PPI data from large-scale experiments and HPRD; disease-protein asso- ciations from GeneCards (Rebhan et al. 1997)	PPI network	Disease similarity informa- tion	Logistic regression-based model
Page rank with priors	Sinsha and Chitturi (2016)	- (9	Human PPI from public databases	PPI network	Closeness score	Page rank with priors
Topological potential	Li et al. (2015)	I	PPI data and essential pro- teins of baker's yeast	PPI network	Topology potential and its integration with network centrality measures	Protein's essentiality cal- culated from its topology potential

Class	References	Method Name Dataset	Dataset	Type of network	Measures	Techniques used
Machine learning	Liu et al. (2016)	1	Open chemical-gene asso- Generalized bi-relational ciation network network	Generalized bi-relational network	Structure-based features, 4 classes of path-based features	Supervised and unsupervised models
Soft-computing techniques Grewal et al. (2016)	Grewal et al. (2016)	1	Disease genes from OMIM; PPI network PPI data from BioGRID	PPI network	Adjacency to seed genes, degree of a gene, betweenness centrality, distance from the seed genes	Aggregation operators
Community detection	Indulekha et al. (2018)	I	STRING	PPI network	Gervan–Newman algorithm Graph partitioning (Newman and Girvan 2004) using edge betweenness	 Graph partitioning

Table 5 (continued)

then the adjacency matrix was calculated based on the edge clustering coefficient. Then the rank of each gene is calculated on the basis of orthologous score and neighbor induced score.

4.4 Protein complexes

Yang et al. (2011) proposed a method RWPCN which perform prediction and prioritization of genes using human protein complexes and PPI network. The integrated network consisted of three layers with the phenotype network at top connecting phenotypes based on similarity scores, protein complex network connecting phenotypically-related protein complexes in the middle and PPI network connecting two interacting at the bottom. The authors have used both random walk algorithm and flow propagation for assigning scores to proteins which are further used for ranking them for prioritization. Jiang et al. (2014) proposed a random-set scoring model using protein complexes and text mining of biomedical literature for prioritizing the genes in a protein network. The authors' collected gene-associated phenotype data from three different sources and the vocabulary filters defining phenotypic profiles from four sources and the cosine coefficient between the two represent the semantic similarity.

4.5 Tissue-specific information

Deng et al. (2016) proposed disease gene prioritization on a heterogeneous network using tissue-specific information. The heterogeneous network was built by the integration of tissue-specific PPI networks with phenotypic features. The authors implemented the proposed heterogeneous network approach on other existing prioritization approaches: Random Walk with Restart (RWR), PRINCE, Guo's Method used individually.

Xi et al. (2016) prioritized atherosclerosis-related genes using text mining by performing the systematic analysis: pathway analysis, functional clustering analysis, and gene network analysis. The functional clustering analysis of genes that including gene ontology (GO) analysis identified overrepresented genes. The pathway analysis identified the most highly enriched pathway and the gene network analysis prioritized genes following the hub method. Table 6 contains a summary of methods using the heterogeneous type of data.

4.6 Protein expression profile

Ren et al. (2019) have evaluated the performance of local ranking and global ranking methods by integrating protein expression profiles with the PPI network. Three different protein sets with prior disease knowledge are used. For local ranking methods, they ranked genes using the number of

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Class	References	Method name	Dataset	Type of network	Measures	techniques used
Gene ontology	(Li, et al., 2014)	SPGOranker	Human PPI data from HPRD; GO terms from GO Project	Human PPI network with GO mapped terms	Topological similarity and GO similarity of the candi- date genes	Functional similarity as maxi- mum molecular functional similarity between proteins of corresponding GO terms
	Gentili et al. (2019)	BNR	PPI data from public databases; GO from Gene Ontology Consortium; (Ghiassian et al. 2015)	PPI network	BNR score based on the overlap between the enriched set and Gene Annotations	Functional similarity of known disease genes with similarity measured on the basis of GO annotation
	Gentili et al. (2019)	BRW	PPI data from public databases; GO from Gene Ontology Consortium; (Ghiassian et al. 2015)	PPI Network	Biological teleporting prob- ability	Random walk with restart
Gene expression	Zhang et al. (2014a, b) ESFSC	ESFSC	Five PPI datasets (human, fruit fly, mouse, baker's yeast and nematode)	Interactions from the four non-human species mapped to homologous human genes in human PPI network	Topological properties, gene expression profiles	Weighted fusion of results of two types of random walk with restart methods
Orthology	Peng et al. (2012)	NOI	PPI from baker's yeast; Orthologs from different reference organisms	PPI network	Orthologous property of protein, connectivity, and features of its neighbors	Linear combination of neighbor-induced score and orthologous property score
Protein complexes	Yang et al. (2011)	RWPCN	Human PPI data and protein complexes downloaded from public databases	Three-level network-top: phenotype network, middle: protein complex network, bottom: PPIN	Gene-phenotype associa- tions, connection strengths, flow propagation, density of graph	kNN for phenotype neighbor set, random network algo- rithm for protein complex network
	Jiang et al. (2014)	1	Disease and gene-associated phenotypes using text- mining of biomedical text and PPI data from public database	PPI data linked to biomedi- cal text records	Pair-wise semantic similarity between gene-associated phenotype and disease phenotype	Random-set scoring method
Tissue-specific information Deng et al. (2016)	Deng et al. (2016)	1	Expression data from three resources and PPI data from four public databases	Two-layer heterogeneous network-integration of tissue-specific information and phenotypic features	Tissue-specific gene expres- sion and phenotypic features	Random walk with restart, PRINCE, Guo's method used separately
Protein expression profile	Ren et al. (2019)	1	HINT; OMIM; two cancer proteome datasets-CRC from normalized prot- eomic expression profile from (Zhang et al. 2014a, b), breast cancer from (Mertins et al. 2016)	PPI network integrated with protein differential expres- sion profiles	LR-directly connected pro- tein neighbors; GR-random walk restarting on one of 3 networks	Direct neighborhood, Heat kernel rank method

Class	References	Method name Dataset	Type of network	Measures	techniques used
Gene ontology and KEGG Liu et al. (2020)	Liu et al. (2020)	BioGRID; STRING-EXP; InBioMap; GIANT-TN, STRING, DisGeNET	Human PPIN	Neighborhoods as feature vectors of adjacency matrix, influence matrix and node-embedding matrix	Logistic regression with L2 regularization

disease genes directly related to the gene and for global ranking, heat kernel method for restarting random walk on one of the three networks with prior disease knowledge is used.

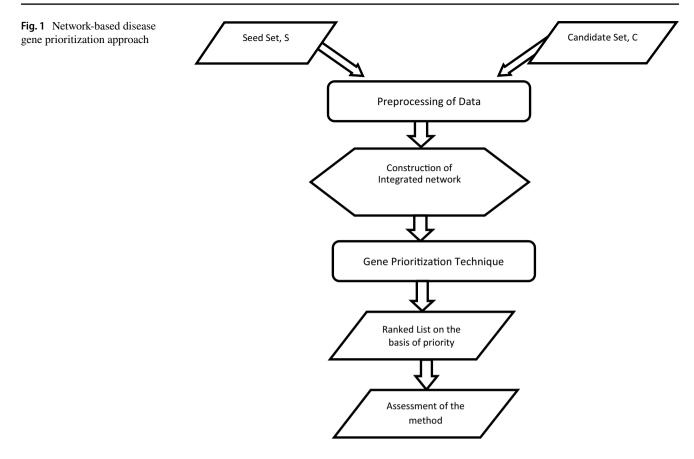
Table 6 contains the summary of proposed network-based techniques using a heterogeneous type of data.

5 A basic workflow of network-based disease gene prioritization

A gene prioritization problem can be formulated as given a disease (D) of interest and a list of genes, the task is to rank these genes based on the likelihood of the genes to be involved with disease. The approach to the problem using the network-based technique is shown in Fig. 1 with details of each as follows:

- Collection of candidate genes: The quality of the prioritization process is greatly affected by the set of genes that needs to be prioritized. In addition, the size of the candidate set is a major factor, i.e., it can be a group of genes or the entire genome. There are various primary and secondary data sources such as microarray data, data from public repositories, data extracted from other biomedical literature available online which can be used for experimentation purposes.
- Collection of disease-related information: With the advancing research, the disease-related knowledge is now available abundantly which can either be extracted from the biomedical literature online or from public databases that have been specially formulated to gather the information. This disease-related information is called the seed set(S).
- Preprocessing of data: There are different ways in which data is represented such as a matrix of numbers, graphs, list of terms, etc. The way data is represented also influence the way the prioritization technique is being used. In addition, in case of data integration data from multiple sources needs to be merged efficiently.
- Merging of information: Next the merging of both types of data, i.e., candidate data and disease-related information is done. This is an optional step and depends on the computational strategy being implemented for prioritization.
- Implementation of computational strategy: After the formulation and preprocessing of the data set, the computational approach for prioritization is being implemented on it. These computational approaches are of various types and have been discussed in detail in the previous sections. Thus, on the basis of various features, the process of prioritization is performed which gives as output

Table 6 (continued)



a list of genes ranked on the basis of the probability of these genes to be involved in the disease.

 Assessment of prioritization: Proper assessment of the system is very important to analyze the effectiveness of the system such as benchmarking, cross-validation, using the negative dataset, functional enrichment, etc. Various performance measures such as the area under ROC curves, sensitivity, specificity, fold enrichment, etc. are used to validate and compare the performance of the system with other existing systems.

6 Discussion

Disease gene prioritization aims at identifying the genes which are most likely to be related to the disease. It is helpful for doctors to identify target genes and designing efficient treatment systems. It also is helpful in the prevention and early diagnosis of disease. In this review, various approaches to network-based disease gene prioritization based on PPI networks have been discussed. Although with advancing technology various approaches have been proposed still there are problems which need to be handled.

The biological data is the core of gene prioritization models and the performance of any prioritization model highly depends on the quality of data. One of the main problems with the data is the incompleteness of the data. Although there are many techniques available for identifying interactions among genes still there are missing links in the data. These missing links limit the performance of the system. Mean or median of observed values could be one possible way to interpolate missing data. In addition, the biological data is retrieved using parsing of available literature, so there is a possibility of errors due to falsely identified genes or missing links. This degradation in the quality of data could be improved by integrating data from various sources.

Data integration from different sources is assumed to deal with the problem of missing and falsely identified data. But acquiring and integrating data from various sources itself faces the problem of lack of consistent representation of data, as the same concept can be represented in different ways which sometimes leads to redundant data. Almost all approaches work on the basis of the prior knowledge available about the disease, but due to incompleteness of data, the results are biased towards the genes previously identified to have some relation to the disease. The approaches which have training set dependent on the disease are biased towards the well-studied set of genes.

So, one way to deal with these problems is to first integrate data from different data sources and then process that data by retrieving only the data which have significance in multiple data sources and leaving those with lesser significance. Another way is to use heterogeneous data related to genes such as ontology, annotations, pathways, etc. to improve the performance of the system. However, combining data from multiple resources is also a difficult and time-consuming task.

Another problem related to gene prioritization approaches is the regular updation of data sources. With the passage of time, the datasets also keep changing. So whenever the dataset is updated, the techniques which are parameter dependent needed to be returned to optimize the performance. Since all changes in a system cannot be automated it is difficult for the researchers to keep updating the data frequently.

Many researchers have proposed approaches based on the integration of heterogeneous types of biological data into a single network. Even though these approaches performed better as compared to others but integrating and organizing biological data into layers of networks is a difficult task as all elements are interrelated. In addition, biological information about various species is not available.

Different approaches use a different type of data and format. So, there is no standard data to compare the performance of different approaches. In addition, there is a need for improvement in benchmarking efforts to provide the global platform for the comparison of approaches.

7 Conclusions and future scope

In this review, the importance of the disease gene prioritization technique has been highlighted. We discussed various categories into which the technique has been categorized. The filtering-based techniques excludes the gene even if it does not match a single criterion without considering others. The similarity-based methods often fail to handle diseases about which no prior association information is known. Thus, major focus was to point out the progress made in disease gene prioritization techniques based on the PPI network. Gene prioritization techniques use various properties of proteins and genes to rank them on the basis of their locational proximity to the disease genes. An improvement over it is to use data from multiple resources which reduces the effect of missing and false data. Integration could be done in two ways either by first combing data from heterogeneous sources and then perform ranking or by individually ranking genes from different resources and then combine the results of ranked lists into one. But the performance of these topology-based methods is reasonable as the results are biased by the network topology. Thus, the performance of prioritization techniques could be enhanced by integrating different types of biological knowledge about genes with the network information. This integration attributes to further performance enhancement of techniques as knowledge integration covers rich information that could not be captured by network analysis. This integration of information can be made more productive with the help of functional analysis. Functional clustering analysis identifies the disease-causing genes based on the annotations which are significantly enriched. This method also identifies the annotations which are overly represented. Using enrichment analysis to combine different types of information can help researchers to use annotations that are more functionally enriched which might yield better results. Higher performance enhancement can be expected when more complete datasets are used.

Funding None.

Availability of data and material Data sharing not applicable to this article as no datasets were generated or analyzed during the current study.

Compliance with ethical standards

Conflict of interest The authors declare that they have no competing interest.

Code availability Not applicable.

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