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## **Molecular Insights into Oxidative Stress in T2DM-Driven CAD: Clinical Implications and Biomarker Innovation**

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## INTRODUCTION

Type 2 diabetes mellitus (T2DM) affects 462 million people globally and is linked to complications like retinopathy, nephropathy, neuropathy, and coronary artery disease (CAD). T2DM increases CAD risk, contributing to 75% of related mortality. Genetic predispositions and distinct mechanisms differentiate DM-CAD from other forms, such as CAD, caused by hypertension or degenerative changes, requiring gene expression profiling and transcriptome and reactome analyses to identify and establish molecular markers and improve its diagnosis, prognosis, and treatment strategies. This study aims to identify differentially expressed gene biomarkers for early diagnosis of T2dm T2DM-associated CAD risk.



## GEO2R Analysis of T2DM-induced CAD (GSE250283)

## **METHOD**

### **Dataset Information :**

**Platform**: GPL16956 Agilent-045997 Array **Samples**: T2DM-CAD (n=52) vs Controls (n=50) **Tissue**: Peripheral Blood.

- Gene Expression Omnibus (GEO) datasets GSE250283 and GSE90074 analyzed using R (v4.1.0)
- DEGs identified using limma package (fold change 21.5, adjusted p-value <0.05)
- Pathway enrichment analysis conducted using KEGG, Reactome, and Gene **Ontology (GO) databases**
- Hub genes identified using protein-protein interaction (PPI) network analysis (STRING database).

## **RESULTS & DISCUSSION**

#### **DEGs identified:**

• Upregulated:

NLRP3 (log2FC: 3.1, adj.p = 1.1e-5) TLR4 (log2FC: 2.8, adj.p = 1.8e-5) STAT3 (log2FC: 2.5, adj.p = 2.2e-5)

• Downregulated: **PPARG (log2FC: -2.2, adj.p = 1.5e-5)** SIRT1 (log2FC: -1.9, adj.p = 2.7e-5) ADIPOR1 (log2FC: -1.7, adj.p = 3.4e-5)

## Pathway Analysis

#### **Significant Pathways:**

- Inflammasome activation (p = 8.4e-7)
- **Toll-like receptor signalling** (p = 1.2e-6)

Pathway Enrichment Analysis of T2DM-induced CAD KEGG, Reactome, and GO Database Results (GSE250283)

KEGG Pathways	Reactome Pathways	GO: Biological Process
NOD-like receptor signaling1.2e-7	Inflammasome activation p=8.4e-7	Inflammatory response p=5.2e-7
Insulin signaling pathway p=2.5e-6	linnate immune system p=1.9e-6	Response to oxidative stress.4e-7
Toll-like receptor signaling=3.8e-6	NLRP3 inflammasome p=2.2e-6	Glucose homeostasis p=3.1e-6
• NF-kappa B signaling p=5.2e-6	Cytokine signaling p=4.7e-6	Response to cytokine p=5.8e-6
MAPK signaling pathway p=7.4e-6	ROS production p=6.8e-6	Cell death regulation p=8.3e-6



#### Enriched Pathways in T2DM-induced CAD



#### Fig. 2 : GEO2R analysis of T2DM induced CAD



Fig. 3: A network of the interactions of genes and proteins associated with T2DM associated CAD

- Insulin resistance pathway (p = 2.8e-6)
- Mitochondrial dysfunction (p = 3.5e-6)

Fig. 1 :summary of Pathway enrichment analysis of T2DMinduced CAD

The heatmap demonstrated distinct transcriptional signatures distinguishing control, T2DM, and T2DM-CAD groups, indicating progressive molecular alterations. Volcano plot analysis identified significant upregulation of proinflammatory genes and downregulation of metabolic regulators. These DEGs corresponded with enriched pathways, including inflammasome activation, TLR signaling, insulin resistance, and mitochondrial dysfunction, suggesting their relevance as candidate biomarkers in T2DM-CAD.

### CONCLUSION

- Oxidative stress emerges as a critical driver of T2DM-CAD pathogenesis, with 85% of identified DECIS involved in ROS production or antioxidant defense.
- Three interconnected molecular mechanisms: oxidative stress, inflammation, • and metabolic dysfunction form a detrimental cycle in DM-CAD development
- Proposed multi-target therapeutic approach: antioxidants (Nrf2 activators), anti-inflammatory agents (JAK/NLRP3 inhibitors), and metabolic modulators (SIRT1/PPAR activators)

## FUTURE WORK / REFERENCES

#### Technical Validation might be required using RT-qPCR for the top 10 DEGs

#### and a Western blot for protein changes.

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