

RESEARCH

Open Access



Deciphering the landscape of lncRNA-driven ceRNA network in schizophrenia etiology

Anirban Mukhopadhyay^{1†}, Prithvi Singh^{2†}, Ravins Dohare^{2*} and B. K. Thelma^{1*}

Abstract

Background The unifying hypothesis of competing endogenous RNA (ceRNA) wherein crosstalk between coding (mRNAs) and long non-coding RNAs (lncRNAs) via microRNA (miRNA) response elements, creates a pervasive regulatory network across the transcriptome, has been implicated in complex disorders including schizophrenia. Even with a wide range of high-throughput data, the etiology of schizophrenia remains elusive, necessitating a more holistic understanding of the altered genetic landscape, shifting focus from solely candidate gene studies and protein-coding variants.

Objective We developed lncRNA-associated ceRNA networks to elucidate global molecular/regulatory signatures underlying schizophrenia using diverse data in the public domain.

Methods Microarray dataset associated with peripheral blood mononuclear cells (PBMCs) of schizophrenia and control patients was used to identify differentially expressed mRNAs. Weighted gene co-expression network analysis (WGCNA) was used to identify highly correlated hubs, and genes from these overlapping Kyoto Encyclopedia of Genes and Genomes (KEGG) and gene ontology (GO) term gene sets were considered key mRNA players. StarBase, Human MicroRNA Disease Database, and miRWalk were used to derive mRNA-miRNA and miRNA-lncRNA relationships. Finally, the key mRNAs, interacting lncRNAs and miRNAs were chosen to reconstruct sub-ceRNA networks based on network centrality scores.

Results Bioinformatics analysis revealed the involvement of three differentially expressed mRNAs, namely *ADRA1A*, *HAP1* and *HOMER3* in the schizophrenia ceRNA networks with lncRNAs *NEAT1*, *XIST*, and *KCNQ1OT1* modulating their activity by a suggestive sequestering of miR-3163, miR-214-3p and miR-2467-3p, respectively.

Conclusions Furthermore, based on contextual evidence, we propose how ceRNAs could orchestrate crosstalk between neurostructural dynamics and immune/inflammatory processes and enable unifying these disparate models of schizophrenia etiology.

Keywords WGCNA, lncRNAs, PPIN, ceRNA

[†]Anirban Mukhopadhyay and Prithvi Singh have contributed equally to this study as co-first authors.

*Correspondence:

Ravins Dohare
ravinsdohare@gmail.com
B. K. Thelma
thelmabk@gmail.com

Full list of author information is available at the end of the article

Introduction

Schizophrenia presents itself as a severe psychiatric disorder in early to late adolescence with a complex manifestation of positive symptoms (e.g., hallucinations and delusions), negative symptoms (e.g., social withdrawal, blunted affect) and pervasive cognitive deficits associated with functional decline [1, 2]. Though not as common as other psychiatric disorders with a lifetime prevalence of 0.32% [3] affected worldwide, it exacts a high toll on society via multifaceted indices such as economic liabilities, human rights violations and suicides [4, 5]. Its pathophysiology is perplexing as uncovered through advanced genomic [6], developmental neurobiology [7], and systems biology investigations [8, 9] with irregularities in cellular, molecular, neuroanatomical, and neurophysiological domains [10] being implicated. This diverse milieu of factors and their enigmatic interplay contributes to its elusive etiology.

As far as the genetics of schizophrenia are concerned the strong links between schizophrenia and over 100 susceptibility loci, along with identified CNVs and SNVs, show promise. Thousands of common alleles with small effects collectively contribute substantially to schizophrenia risk. These findings may lead to new therapeutic insights. However, we must remember: (i) associations between genetic variants and schizophrenia do not necessarily imply causal pathways; (ii) many associations extend beyond schizophrenia to other mental disorders. The specifics of schizophrenia's origins and genotype-environment interactions are largely unknown, warranting caution in assessing the various genetic contributors to its development [11]. The evolution of pharmacological interventions to alleviate the patient's condition has been extremely slow since the advent of the first antipsychotics [12]. Efforts toward biomarker discovery for early identification of individuals at risk, improving diagnostic accuracy and precision, predicting treatment response, and to obtain new druggable targets are notable [13]. However, the prevalent body of work regarding this has mainly focused on the coding part of the genome but the mosaic manifestation of schizophrenia warrants a far more holistic understanding of the underlying pathophysiology.

Toward this end, integrating existing knowledge of schizophrenia etiology with the recent shift in our understanding of the ncRNAs as junk/black matter of the genome to being vital regulatory molecules is of prime importance [14–16]. By virtue of their ability to silence/alter expressions of multiple targets simultaneously, ncRNAs can affect entire signaling pathways [17]. Not surprisingly, understanding the role of ncRNAs in physiological and pathological conditions has significantly enriched our recognition and understanding of

alternate/additional molecular pathways involved. More than a hundred miRNAs and though in its infancy ~ 30 lncRNAs have been found dysregulated across the prefrontal cortex, superior temporal gyrus, parietal cortex, amygdala, serum, and peripheral blood in schizophrenia [18]. SNPs in both miRNAs and lncRNAs have also been shown to have significant associations with the schizophrenia phenotype [19]. Collectively, substantial evidence has been generated as to the dysregulation of ncRNAs in schizophrenia and that the disruption of the networks they regulate is critical to schizophrenia as they are enriched with target genes pertaining to various neurophysiological processes [20, 21]. Considering all these, a new paradigm wherein the clinical utility of ncRNAs in the form of a next-generation is now being seriously assessed [22].

Nevertheless, making sense of the huge amount of data on ncRNAs in the public domain for targeted therapeutics is a herculean task [23–26]. Integrating the raw sequencing data from multiple sources and fitting them under logical models is one way of understanding how lncRNAs collectively interact with the coding genome. A possible route is the ceRNA theory, wherein ncRNAs such as lncRNAs that share common MREs with mRNAs can act as siphons and competitively sequester miRNAs, thus forming a complex regulatory network [27]. Any differential expression in these RNAs harboring common MREs could thereby lead to imbalances in the regulatory network and disease development [28–30]. ceRNA networks developed for diseases such as sarcopenia have identified lncRNAs, mRNAs and miRNAs which add to disease risk with very high accuracy [31]. Several lines of evidence have already shown a close association of ceRNA networks with several forms of cancer but very little is known for schizophrenia [32]. As substantial evidence of an altered immune landscape in schizophrenia has accumulated [33–35] and recent research has solidified the probable role of lncRNAs in orchestrating an altered immune landscape in the disease [36], we narrowed down the analysis to focus on identifying immune/inflammatory signals by using a relevant expression dataset from publicly available database with the propensity to identify these peripheral signals, if any and performed bioinformatics analyses to highlight the lncRNA-associated ceRNA networks. It is hypothesized that such strategies may potentially reveal putative novel pathways and/or give credence to erstwhile proposed theories for disease etiology. These may identify/uncover novel candidate biomarkers and aid in understanding molecular pathways underlying schizophrenia.

The novelty of our study lies in usage of HTS mRNA expression profile followed by hub module identification via WGCNA, PPI, enrichment, and ceRNA network

analyses. This study is the first of its kind where schizophrenia biomarkers are extrapolated via a robust and multi-stage protocol. These predictive biomarkers may be beneficial for patients' early diagnosis and treatment as they play a vital role in schizophrenia pathogenesis. Further validation is required via wet laboratory experimentations in order to prove the efficacy and accuracy of these biomarkers, which comes in as a limitation of the present study. Also, the availability of fewer datasets poses another limitation and a comprehensive meta-analysis study would be much more beneficial in near future.

Materials and methods

Selection of schizophrenia-associated mRNA expression profile and DEA

We accessed NCBI-GEO [37] (<https://www.ncbi.nlm.nih.gov/geo/>) to retrieve schizophrenia-associated mRNA expression profiles utilizing “schizophrenia” as a suitable keyword. All results were further shortlisted as per the following inclusion criteria: (i) the dataset(s) must be “ncRNA expression profiling by array” type with all its samples belonging to “Homo sapiens”; (ii) the dataset(s) must include raw as well as processed data; (iii) the dataset(s) must be submitted to GEO from last 10 years till present (i.e., 2012 to 2024); (iv) the dataset(s) must contain at least 25 samples; (v) dataset(s) must comprise schizophrenia and healthy control patient samples; (vi) patient samples within dataset(s) must be acquired from PBMCs. Studies devoid of any review articles, abstracts, case reports, non-human samples and cell-line-based experimental study designs were excluded. The series matrix file of the selected dataset was downloaded followed by further QCs (i.e., normalization and \log_2 transformation). The ARSyNseq function available within the NOISeq package [38, 39] was utilized (with unknown batch settings) to acquire batch-corrected expression values in R. Probe IDs were mapped to their corresponding HGNC symbols via ArrayExpress online portal [40] (<https://www.ebi.ac.uk/biostudies/array-express>) with respect to the sequencing platform of the selected dataset. An average was taken for the expression value of genes mapping to more than one probe ID to avoid redundancy. An unpaired two-sample t test was utilized for computing p-values and \log_2 (fold change) values of all genes between schizophrenia and normal patients via limma package in R [41]. All p-values were also corrected via BH method in R. The genes were considered as differentially expressed corresponding to a BH – p – value < 0.01 and $|\log_2(\text{fold change})| > 0.5$ [42]. DEGs having $\log_2(\text{fold change}) > 0.5$ and $\log_2(\text{fold change}) < -0.5$ were designated as upregulated and downregulated, respectively. PCA method was utilized to assess the sample aggregation degree. It is an

unsupervised method that can be used to understand the difference between two or more sample groups [43, 44]. Unsupervised PCA/dimensionality reduction was performed via R software based on the DEGs expression with respect to samples [45, 46].

WGCN construction and hub module selection

WGCNA implemented in R [45, 47] assisted in constructing a WGCN from schizophrenia-associated DEGs followed by the detection of representative modules. Primarily, goodSamplesGenes function was used to check the data for any missing values and LV genes. Next, the pickSoftThreshold function assisted in choosing β based on SFT. The power adjacency function assisted in transforming similarity matrix into a weighted adjacency matrix. Thereafter, we computed TOM and dissTOM followed by clustering dendrogram (hierarchical) construction via hclust function. DTC algorithm was applied to identify gene modules from branches of the tree [48]. ME and ME_{diss} were computed followed by joining module(s) with similar high-expression profiles based on ME dendrogram. The module with significantly highest correlation between MM and k_{in} was finalized, and the genes with MM > 0.9 were regarded as hub genes for further analysis.

PPIN, pathway, and GO term enrichment analyses

All the DEGs obtained from WGCNA hub module were submitted to the STRING [49] (<https://string-db.org/>) v11.5 database for constructing PPIN corresponding to medium confidence (i.e., interaction score > 0.4). This network was further visualized using Cytoscape v3.9.1 [50]. In line with recent integrative OMICS approaches [44, 46, 51–53], all significant (p – value < 0.05) pathways and GO terms using KEGG [54], GO-BP, GO-MF, and GO-CC [55] libraries available within Enrichr web server [56, 57] (<https://maayanlab.cloud/Enrichr/>) were compiled corresponding to WGCNA hub module DEGs.

Schizophrenia-associated 3-node ceRNA network construction and topological analysis

The miRNAs interacting with the functionally enriched schizophrenia-associated hub mRNAs were acquired from miRWalk 2.0 [58] (<http://mirwalk.umm.uni-heidelberg.de/>) and ENCORI databases [59] (<https://rnasyu.com/encori/>), respectively. Combined miRWalk and ENCORI make up for each others drawbacks thereby leading to a robust prediction scheme. ENCORI is the second most cited database for such predictions, and miRWalk harbors experimental data from luciferase assays, microarrays, NGS, pSILAC, and western blot experiments. Furthermore, where miRWalk made up for ENCORI's last update of 2021 by being updated twice

a year and containing predictions from MirTarBase, ENCORI was crucial in understanding the lncRNA interactions which miRWalk lacked [60]. miRNAs binding on 3'UTR region, having an interaction score > 0.95 , and binding gap = 1 were considered as significant and retrieved from miRWalk. The list of miRNAs were validated from available literature and those associated with schizophrenia were finally retained. lncRNAs interacting with schizophrenia-associated miRNAs were cataloged using ENCORI. All data were extracted using a low stringency of ≥ 1 in both CLIP data and degradome data. Finally, with multiple lines of evidence indicating that TFs may also be involved in ceRNA crosstalk, TFs interacting with the hub mRNAs as their targets were acquired using TF2DNA [61] (https://www.fiserlab.org/tf2dna_db/) at a significant p - value < 0.0001 .

Results

Schizophrenia-associated mRNA expression profile selection and DEA

Based on the abovementioned inclusion and exclusion criteria, a schizophrenia-associated mRNA expression profile possessing accession number GSE54913 was selected. It comprised 12 healthy controls and 18 schizophrenia PBMC samples. The QC analysis revealed that the expression values were already normalized and \log_2 -transformed in the preprocessed series matrix file. Post batch correction, all the probe IDs were mapped to their corresponding HGNC symbols (protein-coding) with respect to Arraystar Human lncRNA microarray V2.0 platform. Finally, the expression values corresponding to duplicate gene symbols were averaged leading to 12971 unique genes. Corresponding to a BH - p - value < 0.01 and $|\log_2(\text{fold change})| > 0.5$, 2169 DEGs were finally screened. The distribution of upregulated ($n = 950$) and downregulated ($n = 1219$) schizophrenia-associated DEGs along with nonsignificant genes ($n = 10802$) were visualized using a volcano plot (Fig. 1A). The \log_2 (fold change) value of total genes varied with respect to the $-\log_{10}$ (BH - p - value). *CCL22* [$\log_2(\text{fold change}) = 2.49$] and *TFF1* [$\log_2(\text{fold change}) = -2.12$] reported the highest fold change values across upregulated and downregulated DEGs. Heatmap plot shows the expression distribution of top 10 up and top 10 downregulated DEGs across all patient samples (Fig. 1B). Interestingly, *TNFRSF*, *PROK2*, *DUSP4*, *CCL22*, *PRICKLE2*, *MDGA1* reported previously as associated with schizophrenia [62–67] were among the top 10 up and top 10 downregulated DEGs. Among all the DEGs, *PGK1* (BH - p - value = 3.81×10^{-14}) was observed to be the most significant. All the DEG expression variability was dimensionally reduced using PCA [44–46, 68] with respect to sample type leading to

distinct cluster formations (Fig. 1C). % of explained variances accounted for by top 5 PCs is shown by a Scree plot in Fig. 1D. We observed a clear separation between control and schizophrenia sample groups along PC1 (58.8%) and PC2 (7.9%) dimensions, respectively.

WGCN construction and hub module selection

The expression data of 2169 schizophrenia-associated DEGs and sample information were given as an input to WGCNA. WGCN was established at $\beta = 12$ (corresponding to $R^2 = 0.8$) with no sample outliers and LV genes. Figure S1A–D shows plots for β in consideration with SFT criteria. The clustering dendrogram (hierarchical) and DTC algorithm gave fourteen color-coded modules (i.e., black, blue, brown, cyan, green, greenyellow, magenta, pink, purple, red, salmon, tan, turquoise, yellow) ranging in sizes from 34 to 522 (Fig. 2A). The modules with highly co-expressed gene patterns were merged together by cutting the dendrogram at a height of 0.2 (which corresponds to a correlation of 0.8) as shown in Fig. S2. After merging, fourteen modules were clubbed into four color-coded modules (i.e., black, brown, salmon, magenta) ranging in sizes from 36 to 1152. The clustering dendrogram (hierarchical) based on dissTOM and ME with original ($n = 14$) and merged ($n = 4$) color modules is shown in Fig. 2B. WGCN is shown as a heatmap plot depicting TOM among merged color modules in Fig. S3. Based on the most significant correlation between MM and k.in (Table S1), the brown module (MM vs k.in = 0.85, p - value = 6.0×10^{-155}) was picked as the hub module. Scatterplot of MM versus k.in across brown module is shown in Fig. 2C. Heatmap of brown module DEGs along with their corresponding ME levels is shown in Fig. 2D. Finally, a total of 119 DEGs were identified from the brown hub module corresponding to MM > 0.9 .

PPIN, pathway, and GO term enrichment analyses

A total of 118 out of 119 DEGs from hub module successfully mapped to their corresponding protein names via STRING database. Corresponding to an interaction score > 0.4 , the PPIN comprised 35 nodes and 27 edges as shown in Fig. S4. Figure S5 shows centrality distributions like betweenness, closeness, ND, TC, NC, and ASPL of PPIN. We entered all 119 DEGs from hub module into Enrichr. A total of 11, 16, 37, 12 KEGG pathways, GO-CC, GO-MF, GO-BP terms were obtained (Tables S2–S5) corresponding to p - value < 0.05 . Venn plot as shown in Fig. 3A illustrates three overlapping hub genes (i.e., *ADRA1A*, *HAPI*, *HOMER3*) between significant pathway, GO-BP, GO-MF, and GO-CC genesets. The box-and-whisker plots show the relative expression distribution of *ADRA1A*, *HAPI*, and *HOMER3* across

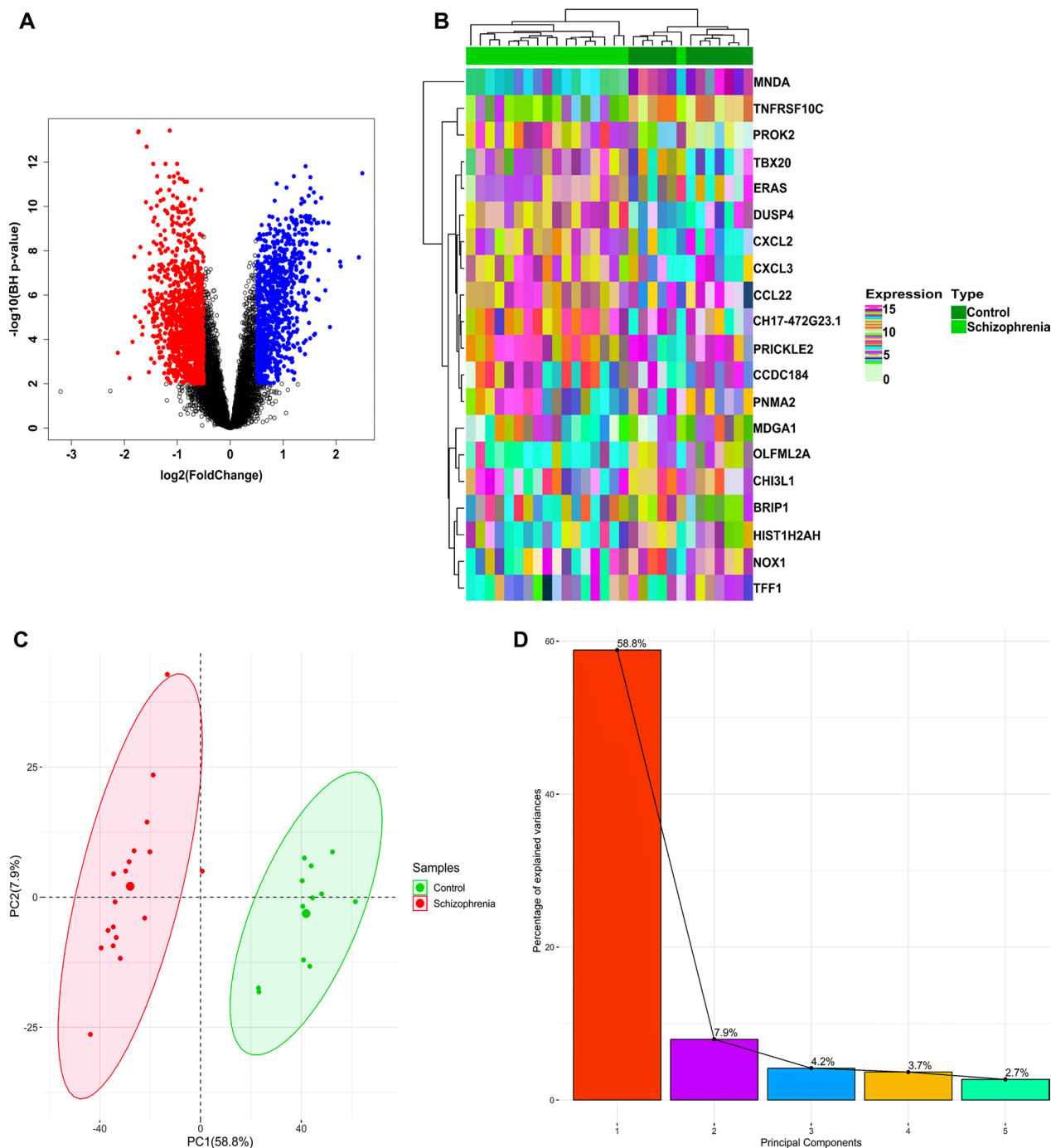


Fig. 1 **A** Volcano plot showing the distribution of 2169 schizophrenia-associated significant DEGs (upregulated: 950+ downregulated:1219) and nonsignificant (10802) genes across GSE54913 dataset. **B** Annotation heatmap showing the expression distribution of top 10 down and top 10 upregulated schizophrenia-associated DEGs. Cluster dendrograms representing Euclidean distance-based hierarchical clustering for both columns and rows are presented along the top and left sides of the plot. Sample type annotation bar is presented at the top of heatmap. **C** PCA plot showing the expression variability of 2169 schizophrenia-associated DEGs across GSE54913 dataset. The relative expression level of all DEGs dimensionally reduced in compliance with sample type leading to distinct cluster formations were signified by solid circular points in the plot. Green and red-colored points within ellipses signify control and schizophrenia samples. The % of total variation accounted for by the 1st (58.8%) and 2nd (7.9%) PCs are shown on the x- and y-axes, respectively. **D** Scree plot displaying the % of explained variances captured by their corresponding PCs

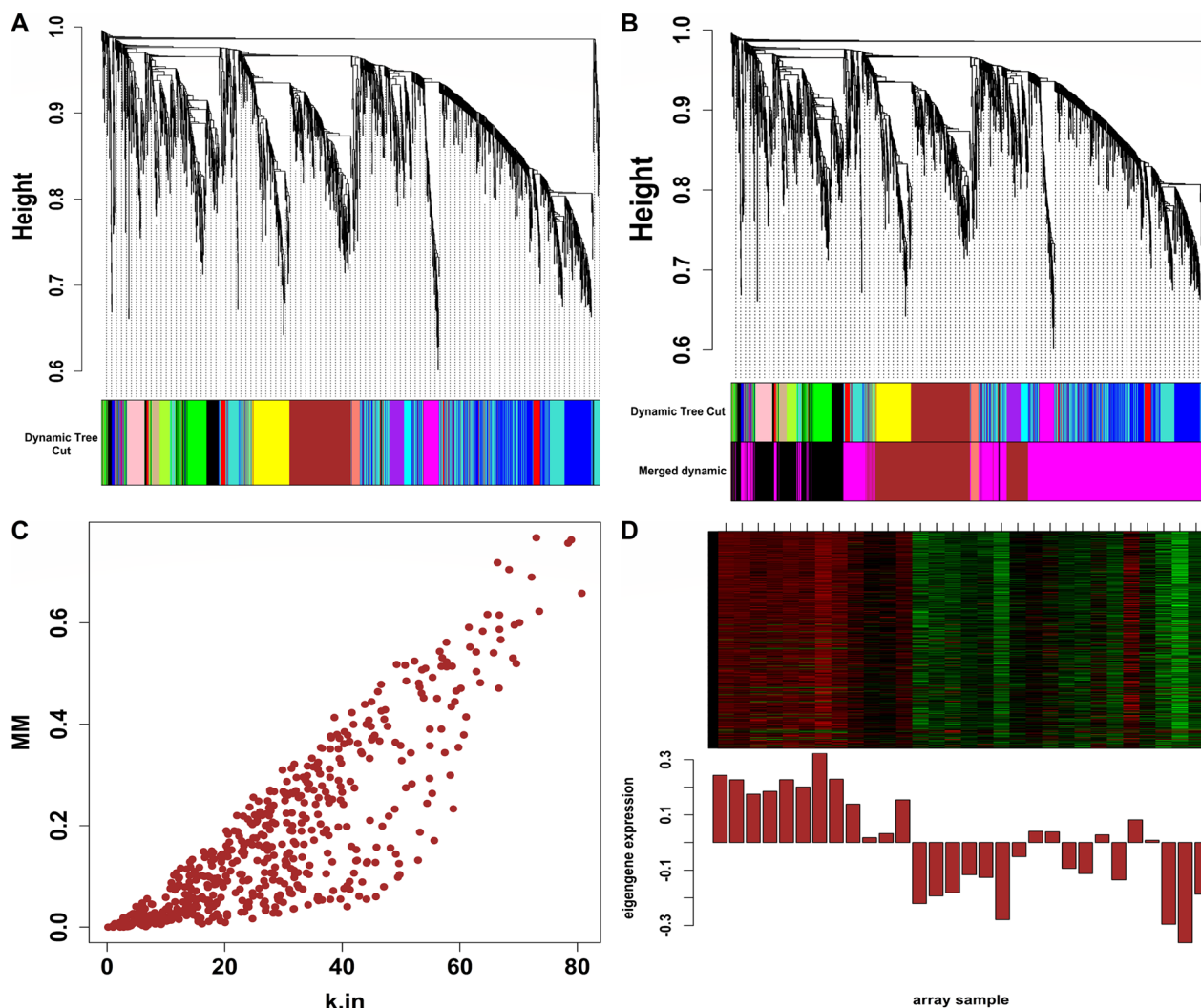


Fig. 2 **A** Clustering dendrogram (hierarchical) of 2169 schizophrenia-associated DEGs clustered based on dissTOM, and fourteen color-coded modules obtained using DTC. These modules contained highly similar expression profiles with the following sizes: black (117), blue (428), brown (283), cyan (34), green (144), greenyellow (54), magenta (70), pink (76), purple (66), red (132), salmon (36), tan (39), turquoise (522), yellow (168). **B** Clustering dendrogram (hierarchical) of DEGs clustered based on dissTOM together with original (14) and merged (4) module colors. The merged module sizes were as follows: brown (551), black (430), salmon (36), magenta (1152). **C** Scatterplot showing significant (p -value < 0.05) correlation of MM with k.in across brown module genes. **D** Expression heatmap of brown module genes where the rows and columns correspond to genes and samples. The red and green color bands in the heatmap signify higher and lower expression level across brown module genes. Also, the corresponding ME expression levels (along y-axis) across all samples (along x-axis) are displayed at the bottom panel of module heatmap in the form of barplot

control and schizophrenia patient samples (Fig. 3B–D). As observed, mRNA expression levels of all three hub genes were significant across control and schizophrenia samples.

Schizophrenia-associated 3-node ceRNA network construction and topological analysis

The schizophrenia-associated 3-node ceRNA network comprised 767 nodes and 3030 edges as shown in Fig. 4. The breakup of nodes and edge pairs is summarized in

Table S6. Tables S7–S8 shows top 3 lncRNAs and miRNAs within ceRNA network ranked based on betweenness, degree, and closeness centralities. Within this network, degree of lncRNAs, miRNAs and mRNAs ranged from 1 to 117, 2 to 50, and 24 to 90, respectively. Average degrees of lncRNAs, miRNAs, and mRNAs were 4.64, 21.18, 47.66, respectively. As observed from these centralities, *ADRA1A* hub gene was repressed and regulated by maximum miRNAs while lncRNA *NEAT1* interacted with the highest number of miRNAs. Numerous

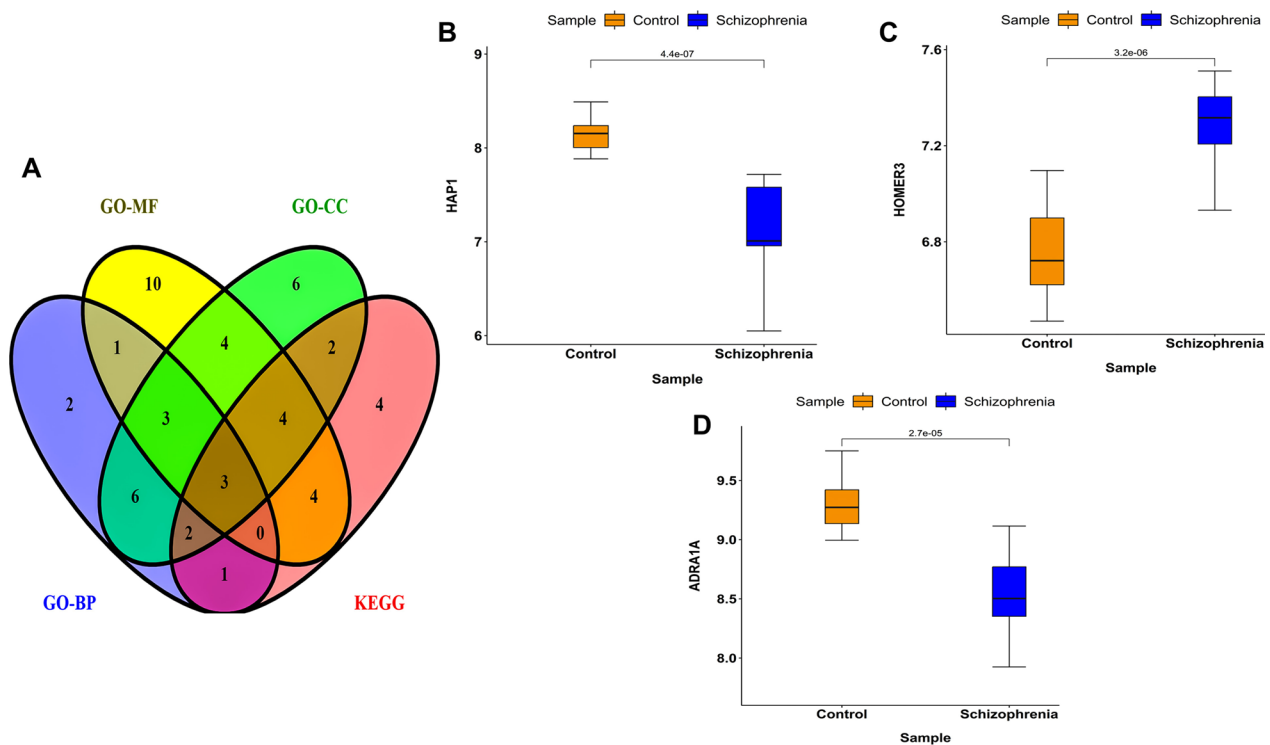


Fig. 3 **A** Overlapping hub genes between significant GO-BP, GO-MF, GO-CC, and pathway genesets. The red, blue, yellow, and green-colored areas signify KEGG, GO-BP, GO-MF, GO-CC genesets, respectively. Box-and-whisker plots showing expression intensity distribution of **B** HAP1, **C** HOMER3, **D** ADRA1A across control and schizophrenia patient samples. The top and bottom of the boxes signify 75th and 25th percentile of distribution. Horizontal lines within the boxes represent the median values while minimum and maximum values label the axes endpoints. P-values shown at the top of boxplots represent significance levels between sample groups for each hub gene

miRNAs, lncRNAs, and mRNAs participating in higher-order subnetwork motifs were observed and the top three higher-order subnetwork motifs based on highest centrality scores of betweenness, degree, and closeness have been reported. The first-ranked subnetwork motif comprised one miRNA (miR-3163), one lncRNA (*NEAT1*), and one hub gene (*ADRA1A*). The second-ranked subnetwork motif comprised one miRNA (miR-214-3p), one lncRNA (*XIST*), and one hub gene (*HOMER3*). And, the third-ranked subnetwork motif comprised one miRNA (miR-2467-3p), one lncRNA (*KCNQ1OT1*), and one hub gene (*ADRA1A*) (Fig. 5A–C). Figure S6 shows centrality distributions like betweenness, closeness, ND, TC, NC, and ASPL of 3-node ceRNA network.

Discussion

Rare/ultra-rare protein-coding variants de novo or captured through WES of familial forms of schizophrenia have provided insights into a few genes from dopaminergic and neurodevelopmental pathways in schizophrenia [69–72] but heritability and etiology remain unexplained. Regulatory variants such as ncRNAs are emerging to be essential players in our understanding of the biology/

etiology of common conditions such as schizophrenia [73, 74]. As one of the most common types of ncRNAs, lncRNAs are believed to play a pivotal role in the ceRNA machinery and elicit a significant effect in both physiological and pathological mechanisms. Multiple lines of evidence have implicated them in various psychiatric disorders [75–77]. Their differential expression in tissue, cell types, and developmental levels indicates that lncRNA expression is tightly regulated [78–80]. These give further credence to the idea that lncRNA-associated ceRNA networks may play a crucial role in schizophrenia etiology. However, the dire lack of studies on lncRNAs in the public domain has made it difficult for bioinformatic analyses to annotate their role in disease biology sufficiently. This is exacerbated further by the dearth of HTSeq studies in schizophrenia, including lncRNAs and the lack of postmortem data. To account for these, we employed an approach to shortlist coding genes and their interacting miRNAs and then extract the lncRNA-miRNA interactions reported in the public domain, thus making the mRNA-lncRNA-disease interaction hypothesis-free.

Furthermore, recent studies have indicated the link between brain and periphery via the circulatory system,

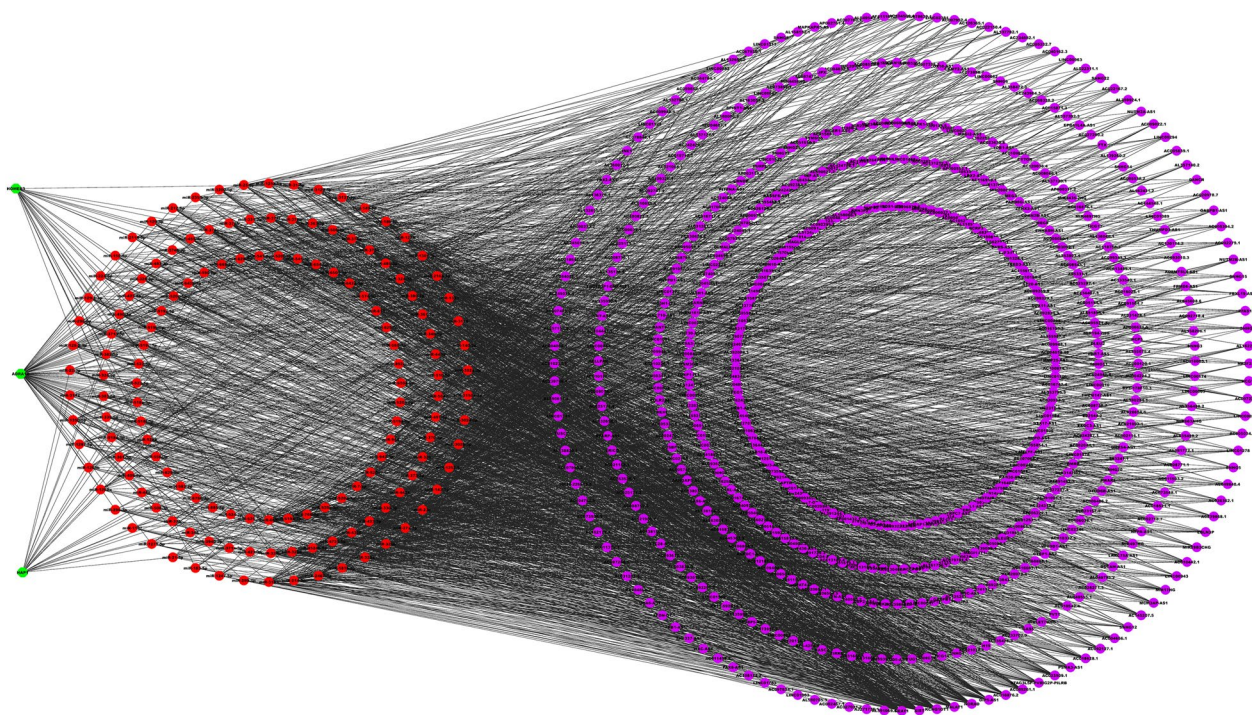


Fig. 4 Schizophrenia-associated 3-node ceRNA network comprising 767 nodes and 3030 edges. Magenta-colored diamond nodes represent the lncRNAs, red circular nodes represents the miRNAs, and green-colored octagonal nodes represents the hub genes

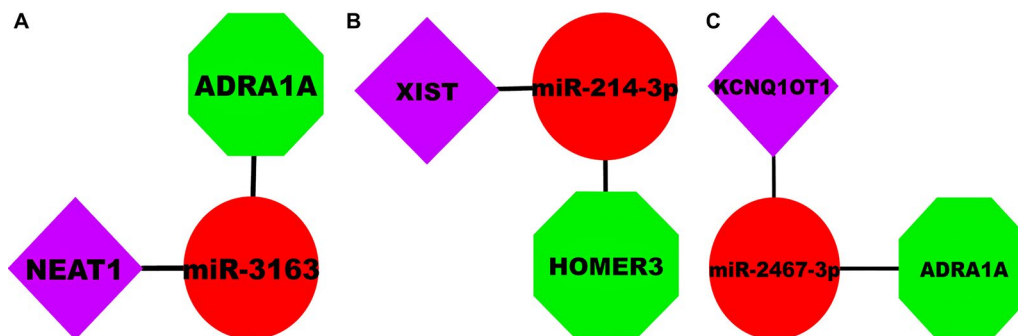


Fig. 5 **A** Top higher-order subnetwork motif based on betweenness, degree, and closeness comprising one miRNA (miR-3163), one lncRNA (NEAT1), and one hub gene (ADRA1A). **B** The second higher-order subnetwork motif comprising one miRNA (miR-214-3p), one lncRNA (XIST), and one hub gene (HOMER3). **C** Third higher-order subnetwork motif comprising one miRNA (miR-2467-3p), one lncRNA (KCNQ10T1), and one hub gene (ADRA1A). Magenta-colored diamond nodes represent the lncRNAs, red circular nodes represents the miRNAs, and green-colored octagonal nodes represents the hub genes

which contains secreted regulatory molecules and hormones produced in the diffused NES that impact the peripheral markers' gene expression pattern [81–84]. These findings confirm that schizophrenia is a systemic disorder and support the notion that biomarkers in peripheral samples such as WB, PBMCs, lymphoblasts and olfactory epithelium may be insightful. Another line of evidence that dictated the choice of blood expression profiles for the analysis was based on the current evidence wherein immune/inflammatory processes are

located in the disorder [33–35] and the strong connections established between altered immunity and lncRNAs [36, 85]. Understanding the networks at play in the peripheral system might help generate a holistic view of the underlying connection.

In the enrichment analysis using the highest-order WGCNA module, three genes were found overlapping in all the significant pathway and GO term libraries tested.

ADRA1A was enriched for terms such as neuroactive ligand-receptor interaction, cytosolic Ca²⁺ ion transport,

positive regulation of GABAergic synaptic transmission. *HOMER3* was enriched for glutamatergic synapse and G protein-coupled glutamate receptor binding and was a cellular component of dendrites. *HAPI* was associated with pathways involved in neurodegeneration, neurogenesis, neurotrophin binding and similar to *HOMER3* was found located in the dendrites. All of the pathways have either been directly reported in schizophrenia etiology before or are of substantial importance in the processes involved in schizophrenia pathophysiology [86–91]. Thereby, any perturbation in their expression could potentially disturb these pathways and initiate or maintain the disease phenotype. With this hypothesis, we assessed the lncRNAs and miRNAs that could putatively dysregulate these key mRNAs leading to disease manifestation.

Among the three lncRNAs, *NEATI* has recently been reported to be upregulated [$\log_2(\text{fold change}) > 2$] in Brodmann area 46, hippocampus and striatum. *NEATI* is highly enriched in the mammalian brain and is an indispensable structural component of paraspeckles which are membrane-less cellular bodies involved in several cellular processes such as splicing and transcriptional modulation through chromatin structure modifications with emerging evidence suggesting their altered abundance with several innate immune activating responses stimuli such as sequestering to *IFNGRI* [92]. *NEATI* itself has been cited as lncRNA-type immunoregulator (i) affecting monocyte-macrophage functions and T cell differentiation [93], (ii) assembly of inflammasomes by recruitment, maturation, and stabilization of CASP1 in activated macrophages [94], (iii) elicits pro-proliferative and anti-apoptotic roles and migration, invasion, and inflammatory cytokines secretion [95], (iv) exhibits innate immunity responses against viral infections [96]. Furthermore, multiple studies have shown miRNA sequestering tendencies of *NEATI*, thereby attenuating target gene activity [97–101]. Based on our bioinformatic analyses, we propose that *NEATI* could be sequestering miR-3163 because of its higher number of transcripts in the disease state, thereby elevating the repression of *ADRA1A* which was downregulated in cases in the DEA (Fig. 3B).

The second lncRNA, *XIST* has also been previously associated with multiple mental disorders [102–104]. *XIST* is involved in the inactivation of the X chromosome, which has a long-standing reputation for harboring genes important for brain development and function [105]. Outside of its silencing roles, *XIST* i) stimulates proliferation and differentiation of naive CD4⁺ T cells [106], (ii) is delocalized in B cells of female-biased autoimmunity [107], (iii) in-part promotes CD11c⁺ atypical B cell formation [107], and (iv) has been shown to perturb *PDL1* levels by probable competitive binding of

miR-34a-5p [108]. Even though the expression profile of *HOMER3* in schizophrenia is unknown, *HOMER1* (member of the three-member HOMER family) has been shown to be up and downregulated in schizophrenia depending on the tissue type with variants in both found to be associated with schizophrenia [109]. Overexpression of *XIST* has been reported in bipolar disorder and major depressive disorder (phenotypes closely associated with schizophrenia) as well but is highly tissue-specific [102]. Therefore, in a similar fashion as *NEATI*, *XIST* could be competitively sequestering to miR-214-3p, a miRNA already known to target the *Qki* [110], thereby leading to the altered *HOMER3* levels.

The third lncRNA, *KCNQ1OT1*, targeting *KCNQ1*, though actively involved in epigenetic phenomenon via chromatin modifications, HMT G9a, and *PRC2* [111], has no direct association with schizophrenia yet. However, it does seem to sponge miR-15a, leading to immune evasion and malignant progression of prostate cancer via upregulating *PDL1*, an essential immune checkpoint [112]. This might explain its expression correlation with CD4⁺, CD8⁺, and cytotoxic T cell levels and several other immune cell subsets in another ceRNA reported in colorectal cancer [85]. Furthermore, it might be indirectly associated with increased sudden cardiac arrest in schizophrenia patients [113]. The *KCNQ1* protein forms functional potassium channels [114]. Multiple lines of evidence, structural variants and mice knockouts, have shown *KCNQ1* to be associated with LQT1, a condition synonymous with increased adverse cardiac events [115–117]. It is established that all atypical antipsychotics affect the cardiac potassium pump and that about ~ 6 – 10% of schizophrenia patients show a longer QT interval under treatment [118, 119]. We propose that the expression of *KCNQ1* as dictated by altered *KCNQ1OT1* levels could be a putative cause of these adverse drug reactions.

Further investigations into this aspect could potentially lead to pre-emptive treatment strategies. Though the levels of *KCNQ1OT1* in schizophrenia are not known, we can extrapolate from available knowledge that rs8234 [120] leads to lower expression of *KCNQ1* and is also associated with reduced processing speed, reduced white matter FA and higher risk for schizophrenia [121], thereby implying that lower levels of *KCNQ1* are associated with these impaired phenotypes. Elevated *KCNQ1OT1* levels could also propagate this scenario. Considering these derived associations, studies establishing *KCNQ1OT1* levels in schizophrenia could be informative.

We could thereby imply that elevated *KCNQ1OT1* transcripts could be competitively sequestering to miR-2467-3p and inhibiting the expression of *ADRA1A*, thereby leading to its downregulated state in the DEA.

Interestingly, *ADRA1A* is also associated with several cardiac conditions [122–124]. This gives a glimpse into the intricate mechanism in which ceRNAs could be acting in the pathophysiology of schizophrenia.

In conclusion, this study identified lncRNAs *NEAT1*, *XIST* and *KCNQ1OT1*-associated ceRNA networks which could be potentially relevant to schizophrenia by interacting with schizophrenia-relevant genes, *ADRA1A* and *HOMER3*. Furthermore, the affinity of the mRNAs to neurodevelopmental processes and that of the lncRNAs to immune/inflammatory processes might indicate a mechanism to unite the two most significant models proposed in schizophrenia etiology. Of note, though the current analyses is based on data specific to schizophrenia, neuroinflammation and its effect on neurodynamics is a well-established phenomenon in a variety of psychiatric illnesses such as depression, bipolar depression and obsessive–compulsive disorder [125]. ceRNAs established through this study and new ones discovered by using similar methods have the potential of uncovering further such pathways. Further refinements in such prediction strategies have the potential of unveiling additional interactions in schizophrenia biology, which, eventually, systems biology approaches coupled with artificial intelligence and machine learning technologies can integrate into a holistic picture. However, it is also important to note that the prediction strategy deployed in this study does not take into account the miRNA and potential ceRNA expression levels. This is important as it is well-established that both miRNAs and ceRNAs have temporal, spatial, and disease-specific expression patterns. Furthermore, studies have shown that ceRNAs and miRNAs with concentrations within a particular range are capable of eliciting such crosstalks. Even though we have provided evidence to give strong credence to the highlighted ceRNA axes, these must still be validated by qRT-PCR, luciferase reporter systems and co-IP assays. Furthermore, we have discussed in favor of the standalone components of the ceRNA networks. We believe that additional investigations into their roles in the diseased state would be valuable in assessing their role as important biomarkers for schizophrenia. Further wet lab experimentations would be an asset in proving the efficacy and accuracy of the predicted biomarkers. Also, design of lead compounds as potential drugs post successful clinical trials could be helpful for the treatment of schizophrenia in near future.

Abbreviations

ncRNA	Non-coding RNA
lncRNA	Long non-coding RNA
SNP	Single nucleotide polymorphism
miRNA	MicroRNA

mRNA	Messenger RNA
ceRNA	Competing endogenous RNA
MRE	MiRNA response element
GEO	Gene expression omnibus
NCBI	National Center for Biotechnology Information
DEA	Differential expression analysis
QC	Quality check
HGNC	HUGO Gene Nomenclature Committee
BH	Benjamini-Hochberg
DEGs	Differentially expressed genes
WGCN	Weighted gene co-expression network
WGCNA	Weighted gene co-expression network analysis
ME	Module eigengene
MEdiss	MEdissimilarity
k.in	Intramodular connectivity
MM	Module membership
PPIN	Protein–protein interaction network
STRING	Search tool for the retrieval of interacting genes/proteins
GO	Gene ontology
BP	Biological process
MF	Molecular function
CC	Cellular compartment
KEGG	Kyoto encyclopedia of genes and genomes
ENCORI	The encyclopedia of RNA interactomes
TF	Transcription factor
CLIP	Cross-linking and immunoprecipitation
PBMC	Peripheral blood mononuclear cell
PCA	Principal component analysis
PC	Principal component
SFT	Scale-free topology
TOM	Topological Overlap Matrix
HTSeq	High-throughput sequencing
WB	Whole blood
ADRA1A	Adrenoceptor Alpha 1A
HOMER3	Homer scaffold protein 3
HAP1	Huntingtin associated protein 1
IFNGR1	Interferon gamma receptor 1
PDL1	Programmed cell death receptor ligand 1
Qki	Schizophrenia-associated gene quaking
PRC2	Polycomb repressive complex 2
HMT	Histone methyltransferase
LQT1	Long QT syndrome type 1
FA	Fractional anisotropy
qRT-PCR	Quantitative real-time reverse-transcription polymerase chain reaction
co-IP	co-immunoprecipitation
LV	Low-variance
DTC	Dynamic tree cut
CNV	Copy number variation
SNV	Single nucleotide variant
Ca ²⁺	Calcium
NGS	Next-generation sequencing
CCL22	C–C motif chemokine ligand 22
TFF1	Trefoil factor 1
TNFRSF	Tumor necrosis factor receptor superfamily
PROK2	Prokineticin 2
DUSP4	Dual specificity phosphatase 4
PRICKLE2	Prickle planar cell polarity protein 2
MDGA1	MAM domain containing glycosylphosphatidylinositol anchor 1
PGK1	Phosphoglycerate kinase 1
NEAT1	Nuclear paraspeckle assembly transcript 1
XIST	X inactive specific transcript
KCNQ1	Potassium voltage-gated channel subfamily Q member 1
WES	Whole exome sequencing
NES	Neuroendocrine system
CASP1	Caspase 1

Supplementary Information

The online version contains supplementary material available at <https://doi.org/10.1186/s43042-024-00542-1>.

Supplementary Material 1

Acknowledgements

The authors would like to thank the University of Delhi South Campus and Jamia Millia Islamia for providing infrastructure, journal access, and internet facilities. Prithvi Singh would like to thank the ICMR for awarding him Senior Research Fellowship [Grant Number: BMI/11(89)/2020]. This work is also partially supported by the Science & Engineering Research Board (SERB), Government of India [File Number: EEQ/2023/000980].

Author contributions

Anirban Mukhopadhyay involved in conceptualization, methodology, software, formal analysis, data curation, writing—original draft, and writing—review and editing. Prithvi Singh involved in methodology, software, formal analysis, data curation, writing—original draft, and writing—review and editing. Ravins Dohare involved in writing—review and editing, supervision, and project administration. BK Thelma involved in writing—review and editing, supervision, and project administration. All authors read and approved the final manuscript.

Funding

This research work did not receive any external funding.

Data availability

The data underlying this article is available in NCBI-GEO at <https://www.ncbi.nlm.nih.gov/geo/query/acc.cgi?acc=GSE66890> and can be accessed with GSE66890.

Declarations

Competing interests

The authors declare that they have no conflict of interest.

Author details

¹Department of Genetics, University of Delhi (South Campus), New Delhi 110021, India. ²Centre for Interdisciplinary Research in Basic Sciences, Jamia Millia Islamia, New Delhi 110025, India.

Received: 15 November 2023 Accepted: 17 June 2024

Published online: 24 June 2024

References

- Patel KR, Cherian J, Gohil K, Atkinson D (2014) Schizophrenia: overview and treatment options. *P T* 39:638–645
- Rahman T, Lauriello J (2016) Schizophrenia: an overview. *FOC* 14:300–307. <https://doi.org/10.1176/appi.focus.20160006>
- Perälä J, Suvisaari J, Saarni SI, Kuoppasalmi K, Isometsä E, Pirkola S et al (2007) Lifetime prevalence of psychotic and bipolar I disorders in a general population. *Arch Gen Psychiatry* 64:19. <https://doi.org/10.1001/archpsyc.64.1.19>
- Poreddi V, Reddemma K, Math S (2013) People with mental illness and human rights: a developing countries perspective. *Indian J Psychiatry* 55:117. <https://doi.org/10.4103/0019-5545.111447>
- Hor K, Taylor M (2010) Review: Suicide and schizophrenia: a systematic review of rates and risk factors. *J Psychopharmacol* 24:81–90. <https://doi.org/10.1177/1359786810385490>
- Giusti-Rodríguez P, Sullivan PF (2013) The genomics of schizophrenia: update and implications. *J Clin Invest* 123:4557–4563. <https://doi.org/10.1172/JCI66031>
- Luvannyam E, Jain MS, Pormento MKL, Siddiqui H, Balagtas ARA, Emuze BO et al (2022) Neurobiology of schizophrenia: a comprehensive review. *Cureus* 14:e23959. <https://doi.org/10.7759/cureus.23959>
- Liu J, Li M, Luo X-J, Su B (2018) Systems-level analysis of risk genes reveals the modular nature of schizophrenia. *Schizophr Res* 201:261–269. <https://doi.org/10.1016/j.schres.2018.05.015>
- Huang K-C, Tsao TT-H, Wang T-Y, Lee S-A (2016) Transcriptome analysis of systems biology for schizophrenia. In: Shen Y-C, editor. *Schizophrenia treatment - the new facets*, InTech; <https://doi.org/10.5772/66864>.
- Kasai K, Iwanami A, Yamasue H, Kuroki N, Nakagome K, Fukuda M (2002) Neuroanatomy and neurophysiology in schizophrenia. *Neurosci Res* 43:93–110. [https://doi.org/10.1016/S0168-0102\(02\)00023-8](https://doi.org/10.1016/S0168-0102(02)00023-8)
- Henriksen MG, Nordgaard J, Jansson LB (2017) Genetics of schizophrenia: overview of methods. *Find Limit Front Hum Neurosci* 11:322. <https://doi.org/10.3389/fnhum.2017.00322>
- Hunter R, Barry S, Gaughan T (2013) 1835—antipsychotics for schizophrenia: too little progress after 50 years? *Eur Psychiatry* 28:1. [https://doi.org/10.1016/S0924-9338\(13\)76799-3](https://doi.org/10.1016/S0924-9338(13)76799-3)
- Patel S, Sharma D, Uniyal A, Akhilesh GA, Tiwari V (2022) Recent advancements in biomarker research in schizophrenia: mapping the road from bench to bedside. *Metab Brain Dis* 37:2197–2211. <https://doi.org/10.1007/s11011-022-00926-5>
- Richard BC (2017) Non-coding RNA: it's not junk. *Dig Dis Sci* 62:1107–1109. <https://doi.org/10.1007/s10620-017-4506-1>
- Palazzo AF, Lee ES (2015) Non-coding RNA: what is functional and what is junk? *Front Genet*. <https://doi.org/10.3389/fgene.2015.00002>
- Palazzo AF, Koonin EV (2020) Functional long non-coding RNAs evolve from junk transcripts. *Cell* 183:1151–1161. <https://doi.org/10.1016/j.cell.2020.09.047>
- Statello L, Guo C-J, Chen L-L, Huarte M (2021) Gene regulation by long non-coding RNAs and its biological functions. *Nat Rev Mol Cell Biol* 22:96–118. <https://doi.org/10.1038/s41580-020-00315-9>
- Esteller M (2011) Non-coding RNAs in human disease. *Nat Rev Genet* 12:861–874. <https://doi.org/10.1038/nrg3074>
- Gibbons A, Udawela M, Dean B (2018) Non-coding RNA as novel players in the pathophysiology of schizophrenia. *Noncoding RNA* 4:11. <https://doi.org/10.3390/nrna4020011>
- Merello V, Durand D, Lescalette AR, Vrana KE, Hong LE, Faghihi MA et al (2015) Associating schizophrenia, long non-coding RNAs and neuro-structural dynamics. *Front Mol Neurosci*. <https://doi.org/10.3389/fnmol.2015.00057>
- Wang Z, Tong Q, Liao H, Rao S, Huang X (2018) Long non-coding RNAs in schizophrenia. *Neurol Psychiatry Brain Res* 30:132–136. <https://doi.org/10.1016/j.npbr.2018.09.003>
- Borga C, Meeran SM, Fassan M (2019) Non-coding RNAs, a real next-gen class of biomarkers? *Noncoding RNA Res* 4:80–81. <https://doi.org/10.1016/j.ncrna.2019.10.001>
- Winkler M, El-Daly SM, Fabbri M, Calin GA (2021) Noncoding RNA therapeutics—challenges and potential solutions. *Nat Rev Drug Discov* 20:629–651. <https://doi.org/10.1038/s41573-021-00219-z>
- Leone S, Santoro R (2016) Challenges in the analysis of long noncoding RNA functionality. *FEBS Lett* 590:2342–2353. <https://doi.org/10.1002/1873-3468.12308>
- Williams GT, Pickard MR (2016) Long non-coding RNAs: new opportunities and old challenges in cancer therapy. *Transl Cancer Res* 5:S564–S566. <https://doi.org/10.2103/tcr.2016.09.04>
- Sacco LD, Baldassarre A, Masotti A (2011) Bioinformatics tools and novel challenges in long non-coding RNAs (lncRNAs) functional analysis. *IJMS* 13:97–114. <https://doi.org/10.3390/ijms13010097>
- Salmena L, Polisenio L, Tay Y, Kats L, Pandolfi PP (2011) A ceRNA hypothesis: the rosetta stone of a hidden RNA language? *Cell* 146:353–358. <https://doi.org/10.1016/j.cell.2011.07.014>
- Bai Z, Sun H, Li X, Wu J, Yuan H, Zhang G et al (2021) Time-ordered dys-regulated ceRNA networks reveal disease progression and diagnostic biomarkers in ischemic and dilated cardiomyopathy. *Cell Death Discov* 7:296. <https://doi.org/10.1038/s41420-021-00687-7>
- Song C, Zhang J, Qi H, Feng C, Chen Y, Cao Y et al (2017) The global view of mRNA-related ceRNA cross-talks across cardiovascular diseases. *Sci Rep* 7:10185. <https://doi.org/10.1038/s41598-017-10547-z>
- Zhang X, Feng S, Fan Y, Luo Y, Jin L, Li S (2020) Identifying a comprehensive ceRNA Network to reveal novel targets for the pathogenesis of parkinson's disease. *Front Neurol* 11:810. <https://doi.org/10.3389/fneur.2020.00810>

31. Wang Y, Zhao Z-J, Kang X-R, Bian T, Shen Z-M, Jiang Y et al (2020) lncRNA DLEU2 acts as a miR-181a sponge to regulate SEPP1 and inhibit skeletal muscle differentiation and regeneration. *Aging* 12:24033–24056. <https://doi.org/10.18632/aging.104095>
32. Qi X, Zhang D-H, Wu N, Xiao J-H, Wang X, Ma W (2015) ceRNA in cancer: possible functions and clinical implications. *J Med Genet* 52:710–718. <https://doi.org/10.1136/jmedgenet-2015-103334>
33. Debnath M (2015) Adaptive immunity in schizophrenia: functional implications of T cells in the etiology, course and treatment. *J Neuroimmune Pharmacol* 10:610–619. <https://doi.org/10.1007/s11481-015-9626-9>
34. Debnath M, Berk M, Maes M (2020) Changing dynamics of psychoneuroimmunology during the COVID-19 pandemic. *Brain Behav Immun-Health* 5:100096. <https://doi.org/10.1016/j.bbih.2020.100096>
35. Ma H, Cheng N, Zhang C (2022) Schizophrenia and alarmins. *Medicina* 58:694. <https://doi.org/10.3390/medicina58060694>
36. Mukhopadhyay A, Deshpande SN, Bhatia T, Thelma BK (2023) Significance of an altered lncRNA landscape in schizophrenia and cognition: clues from a case–control association study. *Eur Arch Psychiatry Clin Neurosci* 273:1677–1691. <https://doi.org/10.1007/s00406-023-01596-9>
37. Clough E, Barrett T (2016) The gene expression omnibus database. *Methods Mol Biol* 1418:93–110. https://doi.org/10.1007/978-1-4939-3578-9_5
38. Tarazona S, Furió-Tarí P, Turrà D, Pietro AD, Nueda MJ, Ferrer A et al (2015) Data quality aware analysis of differential expression in RNA-seq with NOISeq R/Bioc package. *Nucleic Acids Res* 43:e140. <https://doi.org/10.1093/nar/gkv711>
39. Tarazona S, García-Alcalde F, Dopazo J, Ferrer A, Conesa A (2011) Differential expression in RNA-seq: a matter of depth. *Genome Res* 21:2213–2223. <https://doi.org/10.1101/gr.124321.111>
40. Parkinson H, Kapushesky M, Shojatalab M, Abeygunawardena N, Coulson R, Farne A et al (2007) ArrayExpress—a public database of microarray experiments and gene expression profiles. *Nucleic Acids Res* 35:D747–D750. <https://doi.org/10.1093/nar/gkl995>
41. Ritchie ME, Phipson B, Wu D, Hu Y, Law CW, Shi W et al (2015) limma powers differential expression analyses for RNA-seq and microarray studies. *Nucleic Acids Res* 43:e47–e47. <https://doi.org/10.1093/nar/gkv007>
42. Chang A, Loy CJ, Lenz JS, Steadman A, Andama A, Nhung NV et al (2023) Circulating cell-free RNA in blood as a host response biomarker for the detection of tuberculosis. *Infect Dis (Except HIV/AIDS)*. <https://doi.org/10.1101/2023.01.11.23284433>
43. Zhu M, Gong Z, Wu Q, Shi X, Su Q, Zhang Y (2020) Sanguinarine suppresses migration and metastasis in colorectal carcinoma associated with the inversion of EMT through the Wnt/ β -catenin signaling. *Clin Transl Med* 10:1–12. <https://doi.org/10.1002/ctm.21>
44. Zhao Z, Li T, Dong X, Wang X, Zhang Z, Zhao C et al (2021) Untargeted metabolomic profiling of cuprizone-induced demyelination in mouse corpus callosum by UPLC-Orbitrap/MS reveals potential metabolic biomarkers of CNS demyelination disorders. *Oxid Med Cell Longev* 2021:7093844. <https://doi.org/10.1155/2021/7093844>
45. Xing J, Cai H, Lin Z, Zhao L, Xu H, Song Y et al (2023) Examining the function of macrophage oxidative stress response and immune system in glioblastoma multiforme through analysis of single-cell transcriptomics. *Front Immunol* 14:1288137. <https://doi.org/10.3389/fimmu.2023.1288137>
46. Zhao Z, Zheng R, Wang X, Li T, Dong X, Zhao C et al (2022) Integrating lipidomics and transcriptomics reveals the crosstalk between oxidative stress and neuroinflammation in central nervous system demyelination. *Front Aging Neurosci* 14:870957. <https://doi.org/10.3389/fnagi.2022.870957>
47. Langfelder P, Horvath S (2008) WGCNA: an R package for weighted correlation network analysis. *BMC Bioinform* 9:559. <https://doi.org/10.1186/1471-2105-9-559>
48. Singh P, Rai A, Dohare R, Arora S, Ali S, Parveen S et al (2020) Network-based identification of signature genes KLF6 and SPOCK1 associated with oral submucous fibrosis. *Mol Clin Oncol* 12:299–310. <https://doi.org/10.3892/mco.2020.1991>
49. Szklarczyk D, Gable AL, Lyon D, Junge A, Wyder S, Huerta-Cepas J et al (2019) STRING v11: protein–protein association networks with increased coverage, supporting functional discovery in genome-wide experimental datasets. *Nucleic Acids Res* 47:D607–D613
50. Shannon P (2003) Cytoscape: a software environment for integrated models of biomolecular interaction networks. *Genome Res* 13:2498–2504. <https://doi.org/10.1101/gr.1239303>
51. Ding Y, Zhao Z, Cai H, Zhou Y, Chen H, Bai Y et al (2023) Single-cell sequencing analysis related to sphingolipid metabolism guides immunotherapy and prognosis of skin cutaneous melanoma. *Front Immunol* 14:1304466. <https://doi.org/10.3389/fimmu.2023.1304466>
52. Lin Z, Sui X, Jiao W, Wang Y, Zhao J (2022) Exploring the mechanism and experimental verification of puerarin in the treatment of endometrial carcinoma based on network pharmacology and bioinformatics analysis. *BMC Comp Med Ther* 22:150. <https://doi.org/10.1186/s12906-022-03623-z>
53. Lin Z, Sui X, Jiao W, Chen C, Zhang X, Zhao J (2022) Mechanism investigation and experiment validation of capsaicin on uterine corpus endometrial carcinoma. *Front Pharmacol* 13:953874. <https://doi.org/10.3389/fphar.2022.953874>
54. Kanehisa M, Goto S (2000) KEGG: kyoto encyclopedia of genes and genomes. *Nucleic Acids Res* 28:27–30. <https://doi.org/10.1093/nar/28.1.27>
55. Gene Ontology Consortium (2004) The gene ontology (GO) database and informatics resource. *Nucleic Acids Res* 32:258D – 261. <https://doi.org/10.1093/nar/gkh036>
56. Chen EY, Tan CM, Kou Y, Duan Q, Wang Z, Meirelles GV et al (2013) Enrichr: interactive and collaborative HTML5 gene list enrichment analysis tool. *BMC Bioinform* 14:128. <https://doi.org/10.1186/1471-2105-14-128>
57. Kuleshov MV, Jones MR, Rouillard AD, Fernandez NF, Duan Q, Wang Z et al (2016) Enrichr: a comprehensive gene set enrichment analysis web server 2016 update. *Nucleic Acids Res* 44:W90-97. <https://doi.org/10.1093/nar/gkw377>
58. Sticht C, De La Torre C, Parveen A, Gretz N (2018) miRWalk: An online resource for prediction of microRNA binding sites. *PLoS ONE* 13:e0206239. <https://doi.org/10.1371/journal.pone.0206239>
59. Li J-H, Liu S, Zhou H, Qu L-H, Yang J-H (2014) starBase v2.0: decoding miRNA-ceRNA, miRNA-ncRNA and protein–RNA interaction networks from large-scale CLIP-Seq data. *Nucl Acids Res* 42:D2-7. <https://doi.org/10.1093/nar/gkt1248>
60. Kariuki D, Asam K, Aouizerat BE, Lewis KA, Florez JC, Flowers E (2023) Review of databases for experimentally validated human microRNA–mRNA interactions. *Database* 2023:baas014. <https://doi.org/10.1093/database/baad014>
61. Pujato M, Kieken F, Skiles AA, Tapinos N, Fiser A (2014) Prediction of DNA binding motifs from 3D models of transcription factors: identifying TLX3 regulated genes. *Nucleic Acids Res* 42:13500–13512. <https://doi.org/10.1093/nar/gku1228>
62. Hoeseth EZ, Ueland T, Dieset I, Birnbaum R, Shin JH, Kleinman JE et al (2017) A study of TNF pathway activation in schizophrenia and bipolar disorder in plasma and brain tissue. *SCHBUL*. <https://doi.org/10.1093/schbul/sbw183>
63. Verhoeven WMA, Egger JIM, Hovens JE, Hoefsloot L (2013) Kallmann syndrome and paranoid schizophrenia: a rare combination. *Case Rep* 2013:bcr2012007387–bcr2012007387. <https://doi.org/10.1136/bcr-2012-007387>
64. An N, Bassil K, Al Jowf GI, Steinbusch HWM, Rothermel M, De Nijs L et al (2021) Dual-specificity phosphatases in mental and neurological disorders. *Prog Neurobiol* 198:101906. <https://doi.org/10.1016/j.pneurobio.2020.101906>
65. Chen X, Long F, Cai B, Chen X, Chen G (2018) A novel relationship for schizophrenia, bipolar and major depressive disorder Part 3: Evidence from chromosome 3 high density association screen. *J Comp Neurol* 526:59–79. <https://doi.org/10.1002/cne.24311>
66. Bayat A, Iqbal S, Borredy K, Amiel J, Zweier C, Barcia G et al (2021) PRICKLE2 revisited—further evidence implicating PRICKLE2 in neurodevelopmental disorders. *Eur J Hum Genet* 29:1235–1244. <https://doi.org/10.1038/s41431-021-00912-y>
67. Li J, Liu J, Feng G, Li T, Zhao Q, Li Y et al (2011) The MDGA1 gene confers risk to schizophrenia and bipolar disorder. *Schizophr Res* 125:194–200. <https://doi.org/10.1016/j.schres.2010.11.002>
68. Hasler-Rapacz J, Ellegren H, Fridolfsson AK, Kirkpatrick B, Kirk S, Andersson L et al (1998) Identification of a mutation in the low density

- lipoprotein receptor gene associated with recessive familial hypercholesterolemia in swine. *Am J Med Genet* 76:379–386
69. John J, Sharma A, Kukshal P, Bhatia T, Nimgaonkar VL, Deshpande SN et al (2018) Rare variants in tissue inhibitor of metalloproteinase 2 as a risk factor for schizophrenia: evidence from familial and cohort analysis. *Schizophr Bull*. <https://doi.org/10.1093/schbul/sbx196>
 70. John J, Kukshal P, Sharma A, Bhatia T, Nimgaonkar VL, Deshpande SN et al (2019) Rare variants in protein tyrosine phosphatase, receptor type A (PTPRA) in schizophrenia: evidence from a family based study. *Schizophr Res* 206:75–81. <https://doi.org/10.1016/j.schres.2018.12.012>
 71. John J, Bhattacharyya U, Yadav N, Kukshal P, Bhatia T, Nimgaonkar VL et al (2020) Multiple rare inherited variants in a four generation schizophrenia family offer leads for complex mode of disease inheritance. *Schizophr Res* 216:288–294. <https://doi.org/10.1016/j.schres.2019.11.041>
 72. John J, Kukshal P, Bhatia T, Chowdari KV, Nimgaonkar VL, Deshpande SN et al (2017) Possible role of rare variants in Trace amine associated receptor 1 in schizophrenia. *Schizophr Res* 189:190–195. <https://doi.org/10.1016/j.schres.2017.02.020>
 73. Li S, Li J, Liu J, Wang J, Li X, Huo Y et al (2022) Regulatory variants at 2q33.1 confer schizophrenia risk by modulating distal gene TYW5 expression. *Brain* 145:770–786. <https://doi.org/10.1093/brain/awab357>
 74. Ignatieva EV, Matrosova EA (2021) Disease-associated genetic variants in the regulatory regions of human genes: mechanisms of action on transcription and genomic resources for dissecting these mechanisms. *Vavilovskii Zhurnal Genet Selektcii* 25:18–29. <https://doi.org/10.18699/VJ21.003>
 75. Lang Y, Zhang J, Yuan Z (2019) Construction and dissection of the ceRNA-ceRNA network reveals critical modules in depression. *Mol Med Rep* 19:3411–3420. <https://doi.org/10.3892/mmr.2019.10009>
 76. He L, Zou P, Sun W, Fu Y, He W, Li J (2021) Identification of lncRNA NR_028138.1 as a biomarker and construction of a ceRNA network for bipolar disorder. *Sci Rep* 11:15653. <https://doi.org/10.1038/s41598-021-94122-7>
 77. Li R, Wang Q, Qiu Y, Meng Y, Wei L, Wang H et al (2021) A potential autophagy-related competing endogenous RNA network and corresponding diagnostic efficacy in schizophrenia. *Front Psychiatry* 12:628361. <https://doi.org/10.3389/fpsy.2021.628361>
 78. Cabili MN, Trapnell C, Goff L, Koziol M, Tazon-Vega B, Regev A et al (2011) Integrative annotation of human large intergenic noncoding RNAs reveals global properties and specific subclasses. *Genes Dev* 25:1915–1927. <https://doi.org/10.1101/gad.17446611>
 79. Ramos AD, Diaz A, Nellore A, Delgado RN, Park K-Y, Gonzales-Royal G et al (2013) Integration of genome-wide approaches identifies lncRNAs of adult neural stem cells and their progeny in vivo. *Cell Stem Cell* 12:616–628. <https://doi.org/10.1016/j.stem.2013.03.003>
 80. Hangauer MJ, Vaughn IW, McManus MT (2013) Pervasive transcription of the human genome produces thousands of previously unidentified long intergenic noncoding RNAs. *PLoS Genet* 9:e1003569. <https://doi.org/10.1371/journal.pgen.1003569>
 81. Ikegami T, Bundo M, Sunaga F, Asai T, Nishimura F, Yoshikawa A et al (2013) DNA methylation analysis of BDNF gene promoters in peripheral blood cells of schizophrenia patients. *Neurosci Res* 77:208–214. <https://doi.org/10.1016/j.neures.2013.08.004>
 82. Cheng J, Wang Y, Zhou K, Wang L, Li J, Zhuang Q et al (2014) Male-specific association between dopamine receptor D4 gene methylation and schizophrenia. *PLoS ONE* 9:e89128. <https://doi.org/10.1371/journal.pone.0089128>
 83. Nour El Huda AR, Norsidah KZ, Nabil Fikri MR, Hanisah MN, Kartini A, Norlelawati AT (2018) DNA methylation of membrane-bound catechol-O-methyltransferase in Malaysian schizophrenia patients. *Psychiatry Clin Neurosci* 72:266–279. <https://doi.org/10.1111/pcn.12622>
 84. Nabil Fikri RM, Norlelawati AT, Nour El-Huda AR, Hanisah MN, Kartini A, Norsidah K et al (2017) Reelin (RELN) DNA methylation in the peripheral blood of schizophrenia. *J Psychiatr Res* 88:28–37. <https://doi.org/10.1016/j.jpsychires.2016.12.020>
 85. Liu J, Lv W, Li S, Deng J (2021) Regulation of long non-coding RNA KCN-Q10T1 network in colorectal cancer immunity. *Front Genet* 12:684002. <https://doi.org/10.3389/fgene.2021.684002>
 86. Liu Y, Li Z, Zhang M, Deng Y, Yi Z, Shi T (2013) Exploring the pathogenic association between schizophrenia and type 2 diabetes mellitus diseases based on pathway analysis. *BMC Med Genomics* 6:S17. <https://doi.org/10.1186/1755-8794-6-S1-S17>
 87. De Jonge JC, Vinkers CH, Hulshoff Pol HE, Marsman A (2017) GABAergic mechanisms in schizophrenia: linking postmortem and in vivo studies. *Front Psychiatry* 8:118. <https://doi.org/10.3389/fpsy.2017.00118>
 88. Boczek T, Mackiewicz J, Sobolczyk M, Wawrzyniak J, Lisek M, Ferenc B et al (2021) The role of G protein-coupled receptors (GPCRs) and calcium signaling in schizophrenia. Focus on GPCRs activated by neurotransmitters and chemokines. *Cells* 10:1228. <https://doi.org/10.3390/cells10051228>
 89. Coyle JT, Basu A, Benneyworth M, Balu D, Konopaske G (2012) Glutamatergic synaptic dysregulation in schizophrenia: therapeutic implications. *Handb Exp Pharmacol*. https://doi.org/10.1007/978-3-642-25758-2_10
 90. Archer T (2010) Neurodegeneration in schizophrenia. *Expert Rev Neurother* 10:1131–1141. <https://doi.org/10.1586/ern.09.152>
 91. Karageorgiou V, Milas GP, Michopoulos I (2019) Neutrophil-to-lymphocyte ratio in schizophrenia: a systematic review and meta-analysis. *Schizophr Res* 206:4–12. <https://doi.org/10.1016/j.schres.2018.12.017>
 92. Zan J, Zhao X, Deng X, Ding H, Wang B, Lu M et al (2021) Paraspeckle promotes hepatocellular carcinoma immune escape by sequestering IFNGR1 mRNA. *Cell Mol Gastroenterol Hepatol* 12:465–487. <https://doi.org/10.1016/j.jcmgh.2021.02.010>
 93. Gast M, Rauch BH, Haghikia A, Nakagawa S, Haas J, Stroux A et al (2019) Long noncoding RNA NEAT1 modulates immune cell functions and is suppressed in early onset myocardial infarction patients. *Cardiovasc Res* 115:1886–1906. <https://doi.org/10.1093/cvr/cvz085>
 94. Zhang P, Cao L, Zhou R, Yang X, Wu M (2019) The lncRNA Neat1 promotes activation of inflammasomes in macrophages. *Nat Commun* 10:1495. <https://doi.org/10.1038/s41467-019-09482-6>
 95. Wang Y, Hou L, Yuan X, Xu N, Zhao S, Yang L et al (2020) lncRNA NEAT1 targets fibroblast-Like synoviocytes in rheumatoid arthritis via the miR-410-3p/YY1 Axis. *Front Immunol* 11:1975. <https://doi.org/10.3389/fimmu.2020.01975>
 96. Ma H, Han P, Ye W, Chen H, Zheng X, Cheng L et al (2017) The long noncoding RNA NEAT1 exerts antiviral effects by acting as positive feedback for RIG-I signaling. *J Virol* 91:e02250-e2316. <https://doi.org/10.1128/JVI.02250-16>
 97. Zhang P, Lu B, Zhang Q, Xu F, Zhang R, Wang C et al (2020) lncRNA NEAT1 sponges miRNA-148a-3p to suppress choroidal neovascularization and M2 macrophage polarization. *Mol Immunol* 127:212–222. <https://doi.org/10.1016/j.molimm.2020.08.008>
 98. Gao M, Liu L, Zhang D, Yang Y, Chang Z (2020) Long non-coding RNA NEAT1 serves as sponge for miR-365a-3p to promote gastric cancer progression via regulating ABCC4. *OTT* 13:3977–3985. <https://doi.org/10.2147/OTT.S245557>
 99. Guo Z, He C, Yang F, Qin L, Lu X, Wu J (2019) Long non-coding RNA-NEAT1 a sponge for miR-98-5p, promotes expression of oncogene HMGA2 in prostate cancer. *Biosci Rep* 39:BSR20190635. <https://doi.org/10.1042/BSR20190635>
 100. Xie Q, Lin S, Zheng M, Cai Q, Tu Y (2019) Long noncoding RNA NEAT1 promotes the growth of cervical cancer cells via sponging miR-9-5p. *Biochem Cell Biol* 97:100–108. <https://doi.org/10.1139/bcb-2018-0111>
 101. Yan H, Liang H, Liu L, Chen D, Zhang Q (2019) Long noncoding RNA NEAT1 sponges miR-125a-5p to suppress cardiomyocyte apoptosis via BCL2L12. *Mol Med Report*. <https://doi.org/10.3892/mmr.2019.10095>
 102. Ji B, Higa KK, Kelsoe JR, Zhou X (2015) Over-expression of XIST, the master gene for X chromosome inactivation, in females with major affective disorders. *EBioMedicine* 2:909–918. <https://doi.org/10.1016/j.ebiom.2015.06.012>
 103. Yan X-W, Liu H-J, Hong Y-X, Meng T, Du J, Chang C (2022) lncRNA XIST induces Aβ accumulation and neuroinflammation by the epigenetic repression of NEP in Alzheimer's disease. *J Neurogenet* 36:11–20. <https://doi.org/10.1080/01677063.2022.2028784>
 104. Chanda K, Mukhopadhyay D (2020) lncRNA Xist, X-chromosome instability and Alzheimer's disease. *CAR* 17:499–507. <https://doi.org/10.2174/1567205017666200807185624>

105. Nguyen DK, Disteche CM (2006) High expression of the mammalian X chromosome in brain. *Brain Res* 1126:46–49. <https://doi.org/10.1016/j.brainres.2006.08.053>
106. She C, Yang Y, Zang B, Yao Y, Liu Q, Leung PSC et al (2022) Effect of LncRNA XIST on immune cells of primary biliary cholangitis. *Front Immunol* 13:816433. <https://doi.org/10.3389/fimmu.2022.816433>
107. Yu B, Qi Y, Li R, Shi Q, Satpathy AT, Chang HY (2021) B cell-specific XIST complex enforces X-inactivation and restrains atypical B cells. *Cell* 184:1790–1803.e17. <https://doi.org/10.1016/j.cell.2021.02.015>
108. Li J, Che L, Xu C, Lu D, Xu Y, Liu M et al (2022) XIST/miR-34a-5p/PDL1 axis regulated the development of lung cancer cells and the immune function of CD8⁺ T cells. *J Recept Signal Transduct* 42:469–478. <https://doi.org/10.1080/10799893.2021.2019274>
109. Mudge J, Miller NA, Khrebtukova I, Lindquist IE, May GD, Huntley JJ et al (2008) Genomic convergence analysis of schizophrenia: mRNA sequencing reveals altered synaptic vesicular transport in post-mortem cerebellum. *PLoS ONE* 3:e3625. <https://doi.org/10.1371/journal.pone.0003625>
110. Irie K, Tsujimura K, Nakashima H, Nakashima K (2016) MicroRNA-214 promotes dendritic development by targeting the schizophrenia-associated gene quaking (Qki). *J Biol Chem* 291:13891–13904. <https://doi.org/10.1074/jbc.M115.705749>
111. Pandey RR, Mondal T, Mohammad F, Enroth S, Redrup L, Komorowski J et al (2008) Kcnq1ot1 antisense noncoding RNA mediates lineage-specific transcriptional silencing through chromatin-level regulation. *Mol Cell* 32:232–246. <https://doi.org/10.1016/j.molcel.2008.08.022>
112. Chen Q-H, Li B, Liu D-G, Zhang B, Yang X, Tu Y-L (2020) LncRNA KCNQ1OT1 sponges miR-15a to promote immune evasion and malignant progression of prostate cancer via up-regulating PD-L1. *Cancer Cell Int* 20:394. <https://doi.org/10.1186/s12935-020-01481-8>
113. Vohra J (2020) Sudden cardiac death in schizophrenia: a review. *Heart Lung Circ* 29:1427–1432. <https://doi.org/10.1016/j.hlc.2020.07.003>
114. Wang Y, Eldstrom J, Fedida D (2020) Gating and regulation of KCNQ1 and KCNQ1 + KCNE1 channel complexes. *Front Physiol* 11:504. <https://doi.org/10.3389/fphys.2020.00504>
115. Huang H, Kuenze G, Smith JA, Taylor KC, Duran AM, Hadziselimovic A et al (2018) Mechanisms of KCNQ1 channel dysfunction in long QT syndrome involving voltage sensor domain mutations. *Sci Adv* 4:eaar631. <https://doi.org/10.1126/sciadv.aar2631>
116. Crotti L, Celano G, Dagradi F, Schwartz PJ (2008) Congenital long QT syndrome. *Orphanet J Rare Dis* 3:18. <https://doi.org/10.1186/1750-1172-3-18>
117. Moss AJ, Shimizu W, Wilde AAM, Towbin JA, Zareba W, Robinson JL et al (2007) Clinical aspects of type-1 long-QT syndrome by location, coding type, and biophysical function of mutations involving the KCNQ1 gene. *Circulation* 115:2481–2489. <https://doi.org/10.1161/CIRCULATIONAHA.106.665406>
118. Ramos-Ríos R, Arrojo-Romero M, Paz-Silva E, Carballal-Calvo F, Bouzón-Barreiro JL, Seoane-Prado J et al (2010) QTc interval in a sample of long-term schizophrenia inpatients. *Schizophr Res* 116:35–43. <https://doi.org/10.1016/j.schres.2009.09.041>
119. Cao H, Zhou Y, Li T, Yao C, Yang W, Kong S et al (2021) The prevalence, risk factors and clinical correlates of QTc prolongation in Chinese hospitalized patients with chronic schizophrenia. *Front Psychiatry* 12:704045. <https://doi.org/10.3389/fpsy.2021.704045>
120. Amin AS, Giudicessi JR, Tijssen AJ, Spanjaart AM, Reckman YJ, Klemens CA et al (2012) Variants in the 3' untranslated region of the KCNQ1-encoded Kv7.1 potassium channel modify disease severity in patients with type 1 long QT syndrome in an allele-specific manner. *Eur Heart J* 33:714–723. <https://doi.org/10.1093/eurheartj/ehr473>
121. Bruce HA, Kochunov P, Paciga SA, Hyde CL, Chen X, Xie Z et al (2017) Potassium channel gene associations with joint processing speed and white matter impairments in schizophrenia. *Genes Brain Behav* 16:515–521. <https://doi.org/10.1111/gbb.12372>
122. Matsunaga T, Yasuda K, Adachi T, Gu N, Yamamura T, Moritani T et al (2007) Alpha-adrenoceptor gene variants and autonomic nervous system function in a young healthy Japanese population. *J Hum Genet* 52:28–37. <https://doi.org/10.1007/s10038-006-0076-3>
123. Zhang J, Simpson PC, Jensen BC (2021) Cardiac α 1A-adrenergic receptors: emerging protective roles in cardiovascular diseases. *Am J Physiol-Heart Circ Physiol* 320:H725–H733. <https://doi.org/10.1152/ajpheart.00621.2020>
124. Jensen BC, Swigart PM, De Marco T, Hoopes C, Simpson PC (2009) α 1-adrenergic receptor subtypes in nonfailing and failing human myocardium. *Circ Heart Fail* 2:654–663. <https://doi.org/10.1161/CIRCHEARTFAILURE.108.846212>
125. Najjar S, Pearlman DM, Alper K, Najjar A, Devinsky O (2013) Neuroinflammation and psychiatric illness. *J Neuroinflammation* 10:816. <https://doi.org/10.1186/1742-2094-10-43>

Publisher's Note

Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.