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Jarrard et al.

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(54) **UNBIASED DNA METHYLATION MARKERS
DEFINE AN EXTENSIVE FIELD DEFECT IN
HISTOLOGICALLY NORMAL PROSTATE
TISSUES ASSOCIATED WITH PROSTATE
CANCER: NEW BIOMARKERS FOR MEN
WITH PROSTATE CANCER**

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patent is extended or adjusted under 35
U.S.C. 154(b) by 0 days.

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(65) **Prior Publication Data**

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filed on Nov. 3, 2011.

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28, 2013, provisional application No. 61/806,566,
filed on Mar. 29, 2013.

(51) **Int. Cl.**
C40B 30/04 (2006.01)
C12Q 1/68 (2018.01)
C12Q 1/6886 (2018.01)

(52) **U.S. Cl.**
CPC **C12Q 1/6886** (2013.01); **C12Q 2600/154**
(2013.01)

(58) **Field of Classification Search**
CPC **C12Q 1/6886**; **C12Q 2600/154**
See application file for complete search history.

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International Search Authority, Notification of Transmittal of the
International Search Report and the Written Opinion of the Inter-
national Searching Authority, or the Declaration; International App.
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Primary Examiner — Reza Ghafoorian

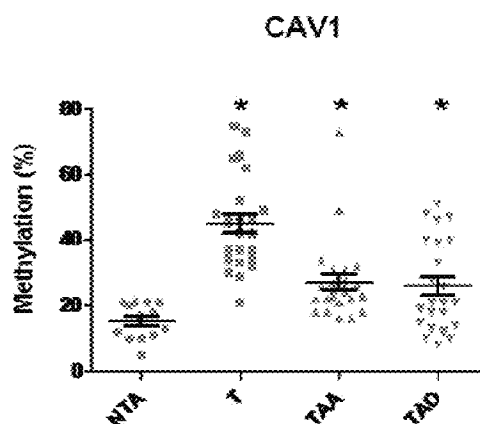
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(57) **ABSTRACT**

A method of detecting the presence of a prostate cancer field
defect in a human subject comprising the step of (a) obtain-
ing genomic DNA from the human subject and (b) quanti-
tating methylation in at least one target region selected from
the group consisting of CAV1, EVX1, MCF2L, FGF1,
NCR2 and WNT2 and EXT1 and SPAG4 target, wherein
significant methylation changes indicate the presence of
prostate cancer or a prostate cancer field defect, wherein the
change is relative to tissue from a second human subject who
does not have prostate cancer.

12 Claims, 39 Drawing Sheets

Specification includes a Sequence Listing.



CAV1 (caveolin 1, caveolae protein), Chr7**SEQ ID NO:1**

agaagc ctgcggctgc cccctcgccg ccgaggctct gggggtcctg cgggtcctgc
gtgctgagcc ggggcgtgcg cgggcggggg ccttcggacc gcgcggcggg gcctgccttg
acccttgccg gcgggcgggg gaggcaggcg cgccttcgag agtacagagg ggtgtggtgt
cctctgcgag atcctcttaa aaagctggct acgcgcaggc ggtttctgtg cacggagccg
tagctgtcgg agcggttagt togatttcga gctcgagggt tccccgcgg ccaggctgac
ttctcatcgc ttgtttttct ttttgcattt ttctccac cgccgttgcc gccctccccg
tcctggccgt ccgcccctcc cctctgcag ggacatctct acaccgttcc catccgggaa
cagggcaaca tctacaagcc caacaacaag gccatggcag acgagctgag cgagaagcaa
gtgtacgacg cgcacaccaa ggagatcgac ctggtcaacc gcgaccctaa acacctcaac
gatgacgtgg tcaaggtaag ccaaggcgac caacagggaa gggctgggac agctctcctc
tggcagttag ccogtgcctc cttottttagc attgcogtgt acgcacacc cccccgcc
cctacacgcg cacacacaca cadacacaga gttttgtggg tttgatgtgt gggagctccc
gcagtcggca gaaacgttac atctcccttc ccccatctcc ccccaatagt tagttcagct
gaaattcagc taaagtgagt tttgtagaag ttctataaac tacactttta tcctagcaaa
tgagcctatt gacctcagca acagaaggcc catactcctt gggacgggtga gatggttcct
atccattccc aggttgaaaag totagtgaca ggtccccact gcacgtggca ttaagacagt
cagataattg tgtcaggtct tgtgctgagg atgagtcaga atacaagatg ggcattgtcc
cccaactaaa acgatgggaa gtgattttct taaa

Fig. 1

EVX1 (even-skipped homeobox 1), Chr7**SEQ ID NO:2**

accgtgcccc tccgctcccc gggcctccca ctgcgcccac ccttcacttc ggcgagggcc
aggaggaaga cactcccttc ccttagggca ggatggctgg ggggaccac ctgagcaact
ctctctgcta tctgcgttct ggcgggggtc tctactgtg ttctggcatt ggcgggactg
agggtgacag cagtgccttg agtgoggggt gctgaggggg cggatgcaag tcctggactt
gggggattcg aagctcacc caagcaccca gtgtttcaac tgctcgggga atgcttcaat
tgctcgggga agacacttcc cccaggcgag ggcaagatca aacgcgata cgggcagttt
gtggctggca ggggtgtaaga ggcattggagg cgcggaagcc aggagtccat aaaggaccgt
aaaattgcgg ccacttggg cagcccgggt gctgcagccc tccgaccagt ttgcacgtcg
gtcagaggto caaattacct tgtaacttcc cgggcttgcg ggcgccaggt cggaaatggt
cccaatggto taattgcctt tggctctcgg ttgcatttga aaaggcagag atcgggtcct
cccccttcc cctttccttc ctagtccac ttctccaccc aaaggaaaag gagctgcagg
gggctggagc cccacccttc tcagaggtag gcccaaagg gggctggttt aactggagaa
ccctcccca ccaaaggcta atgggaaagg ggtggatagc ccggaaggga gtttccctct
gtgccaaaca tcacotcccc agaaggggt agaaaactgg gcgcggttg gtggggggga
ggagagggga gccaccagc agacactcct ccacagaact gtaggagtgg gtggaaagag
cctgggggag ggggggagaa agaccacccc ctggtcttgg cagccaacgc cttgttgaat
acctgcacct accccttact atcttatcac cgatttcacc cagcctcctt ccataaccc
tcagaacaac ctggactcca ctacatatata

Fig. 2

MCF2L (cell line derived transforming sequence-like), Chr13**SEQ ID NO:3**

```
cc tgaggggtct gttccagggg agccagggct ctccgtgtcc cgacgcggtt
gectcaccac atgcccccca ggaaatgctg aaatacagca ggaactgcga gggggctgag
gacctgcagg aggcgctgag ctccatcctg ggcatacctga aggcctgaa cgactccatg
cacctcatcg ctatcacccg ctatgacgta aggcgcccag atgcccggtc ttccdcgcgc
cctccgtgga atacaccagc ccagcaactt ggccggcctcc ctgcacacgc cctcgccttt
ggtgtgaatg tgcagggtct gggcaggagg totgggggtgg tccctagata agcccactcc
caggccccac agccgggtcc acagacccca cagccgggtc cacagacccc actgggctct
ctgggacgtg gagaaaatca ggaagcgtcc cttgcttgga gggcacgcat ctccagcagg
aacgcagctc agacctctc actccttgct ttctcctggg gaggaggcgt ggctcggagc
agacgtgact tctgttttct gggctgcgat ttgcaggctg gtgacttaga gcaagtggcc
ccagaaggca gatgtcactt tcccogtaga gcccacatc aggtcacagc ttattcatct
tttgtccgtc tttatgtcca cccagcactc attctcaggt gttttttttt taactaatag
agttgattta ttgcagcaat ttttggtttg tgagataatt gagtataaat cagaggccct
gaggcttccc ctagtgttga catttagcat ggggtgccaca cctgccacac atgggtgaact
agcgtgatg ctgattagtg actgagggcc gttccccttg gagctcactc tgggtgctgt
gcattctgag gtttggacag gcgtgtaaca tccacaccc agcgttagag catcacacag
agcagcttca ctgtcctaga agcccatgtg ccccgccagt ccataccctcc tccccagcc
cctggcacct gctgacctgt cagtctccac gagcttgc
```

Fig. 3

FGF1 (fibroblast growth factor 1), Chr5**SEQ ID NO: 4**

ATAATCGTGAGAAGGAAGCTCATGCTTCTGTCTCGACTGGCTTGTAAGTCTAGTCAAGAAGACTTGAGGGC
TGATGAGCTTTTCAGAGATGGAAATAGAGGATACTGTGCCCCGTGGCCTCTGCTCTGCCCAGCCCCCTACC
AGTAACCAACAATTTCCAGAAGAATTTCCAAATTCCTTCTCCAAAGTCTCCACTGGCTCCACTTTCAATT
TGCTTGCAGAAAAAGTCTAAATGCTTTGGAACAGCATCATTCAAGGTCTCTATGATCTGACTCCAAGCT
AGCTTGCACCTAACCTGTGTGTCCCTGAAAACCCCCCGCTCAGCGGCATCAGCCATGCATGCTGGGCGAAG
ATGCCCTCTACTTGCCCCACCCCTGGGCCTCTGTTCAAGTGATTCTTTATTCATGCCACATATGTAAAA
CCTGTTTGTCTCTCTGCTGAGATGCCACATCTTCCAGAAAGTCTCTGACCCCTTCTCTTCAGCCCTC
CATCCATCCCCCAGCCCTTGGCACACCTTCACAGCACTTATCATAGCTTGTCATGGTATTTATGACTTA
GCTTCTCACCTTCTTTCAAGGACAGGAAGCTTATCTCATTCATCCTGAATAATCACACAAAAATAATAGC
TAAAAATTATGAGATGTTAGAATGCATATTTTATTTATATGAGGCAATGTGCTAGGTGCTTCCCTTGCACTA
TCTTGTTGCAACCTTTTGACAAACACGTGAGGTAGGTATATCACTGGCCTCCTTTTATAAAGGAAGCTCAG
AGAGATGAATTGACTTTCTGGACTTAAGTTCAGGAAGCTTCACTTCAAACCCATGCCCTTGACCATGACT
TCACTTTTATTACCTAACTGTGTCTGGGTGAGTTCCTTGATATAAGTCCTTACTGGGGCCGGGGCAGGGA
GGGTGTCAAGAGGATGGGACAGTGAAGACAAGAGCAGCCTCCCCAAGGTCATGTGACAAGTCACGGTCAC
ATAAACATCACGAATGCGGGAGCTTTAGCGACCACATTTTCTCTACACCTTTTACCTAGGAAATGGAAGT
CACAGTTTTCAAAGGGAACTAAACGTTTTTGACTGTGCAAAGGATTAGATGACAGTATGTTGAATGCAAA
TTGATTGAGTCTGATTAAATTTGGATGGTGTGTGCCAAGTCACACAGCCCTGTTGGACCAGGTGCCTGAA
GCAAAGAAGCTTTCTTGACCCAGCTACCATGGCCTCTGCCTGAGCCTGGGAGGAGACATTTAACAAGGGA
AATTCCTTCTCCCTCCCTCACTGGACTGAACCTGTCCCTTTTCTTAAAGAAAGGGAGTGGCGTGGAGCCCA
GGCCTCCCCCAGGGCCTGCCTGCTCAGCTCCAGAC

Fig. 4

NCR2 (natural cytotoxicity triggering receptor 2), Chr6**SEQ ID NO: 5**

```
tt tagagggaggt gaggtgtaga agaaagcaga ctcaactgtg acacagcaga
gaccatctgc ctttccagag cttactgcag ctgaaaagac agataatagt gtgtgggcag
aggggtgaacc tggagacttg aaggaaacag gcccctcttc ttggtggaca gtagaggaaa
ataaaggaaa aaatcaggggt gaggaactg accaaactgg gctcaaaatc catgcatgct
cactgacact tttctggcag cagtggccag gacgagactt catccttgtg aggtgggtat
ggcaaccaac cctgcgagta gtgggatggg gaaggggttg cctctgcacc tatgtgcaat
tatgtggcag tctctgacca cttcctgggt ttctctgctc gattgcaggg gggacatatg
gtggaaaacc atgatggagc tcaggagcct ggatacccaa aaagccacct gccaccttca
acaggtcacg gaccttcctt ggacctcagt ttctctacct gtagagagag aaatattata
tcacactgtt gcaaggacta agataagcga tgatgatgat gaacacactt tgtgaataat
aaaattatct gaatgtttta ttctgttgtt ttcttaagtt tcttcaaac tctgtctgca
tccgcacatt tgatctctag gggaccagct tctctagttt gccctctttc ctccatcata
accttttctt atcttcagtt cacctgatgt cccctgtacg tctgggagct gccttagatg
ctgttataat caggggaaggg cactgtacac aagcccagtg agtagaaagg ctgtgggcga
gcaaggcttg gaaacaagac ctgggtttgt tttctcagct cagccctgta tgaactcgga
cagataggtc actgcccctc tctgaacgtc cgtttctttc tctagaaaat gaaggggtg
gagatgagtt ctgaaacccc ttcccatga ggataagtca ataagcatga actcaacacc
tgccctgtgc cagctcaggg accaagcacc acaggacaca aacaaaagga gccagcctgg
gaacacagtt gtgagtcocat aggtggcggg gccctgtgac aagattccag cacaggctga
gggaagggga cagtggaggg ggagcaaagc tgaaaatatg tggctggaga gggatagaaa
agcaggacac tagtgggtac cagacagtgg gggaaggagc ccaacaagga tgaggaaactt
tgctgtgaag tcatgttagt caggatgcca tgaccttcca tgagcccgaa agagggcaca
cagtcaccagg aag
```

Fig. 5

**WNT2 (wingless-type MMTV integration site family member 2),
Chr7**

SEQ ID NO:6

```
aaacacccaa cttcacttta agaacatcct tcattgatac
aaaggtttgt gatcttggat cagagataat gaactgcaat cctggcacag ttcttggctg
tgcagttaat aatattatgt agatgtttat tgtttttaaa ttttagaatc aaaatttact
tatagttaca gaacagaggt cctcgacttt agtcactcat tcttttatca tccaaataaa
atgtctccag tccctccatc agcggctgtg catgggaaac caccctccca ccccaaccaa
gctccttgcc cagtgcctct gaagacccca gggggagtat cctgccogeta tagcctgttg
ctctgggtgtg gcccaacttat ccattgatcc attggtattt ggcttggaca ctggccacca
cccattcttc attccctoca aagcagcact agcagagatt gtcactgggtg acacattttc
cttgagattc tgatgtcttg gaggcataag gtaggaaaca atctctaatt gaataacgat
ttccccgttc ttagaaatgt aatgccagct tctgccgcag gaattcttca ccgtgtaac
cctccatagg ccccagactc ccgccacggt gcaggggttt ctacacttct cctctgcact
cctgggtctg gatgattctg aacctgaact gcatattaga atcaatcaac tgaggaaoca
caagtacctt caaggcccag gcccaagtc caccctaggt tctaatttgc ccagtctggg
gagaggctgg aaatgatccc caggtgattt taatatgtag ccaggagtga cacctactga
cctgccctct ccagttgcca ggaagaaagc ctcaaattcc tgttatttta ctatgtggag
taatttcacc ctttttgttt cccctctctt tcaagaccat gaaatccctc aaactgtagc
cagattgtaa aagaacattt ttcccttttt ccgccagcta tacacacata tgcaggcctt
taaaaactgg atcataccac atatattgtt ctacattttg cttttatcgc ttgactt
```

Fig. 6

Probe sequences for methylation array**CAV1:**

CHR07FS115953929 115953929 115953978
ATCGACCTGGTCAACCGCGACCCTAAACACCTCAACGATGACGTGGTCAA
(SEQ ID NO:78)

EVX1:

CHR07FS027250107 27250107 27250156
TTGTCACTTCCCGGGCTTCGCGGCCAGGTCGGAAATGGTCCCAATGGT
(SEQ ID NO:79)

MCF2L:

CHR13FS112788866 112788866 112788915
TCTTCTCCTGGGGAGGAGGCGTGGCTCGGAGCAGACGTGACTTCTGTTTT
(SEQ ID NO:80)

FGF1

CHR05FS142028596 142028596 142028645
ACAAGCTATGATAAGTGCTGTGAAGGTTGTGCCAAGGGCTGGGGGGATGG
(SEQ ID NO:81)

NCR2:

CHR06FS041426494 41426494 41426555
GTTTCCTCACCTGTAGAGAGAGAAATATTATATCACACTGTTGCAAGGACTA
AGATAAGCGA (SEQ ID NO:82)

CHR06FS041426614 41426614 41426665
GTTTCCTAAGTTTCCTTCAAACCTCTGTCTGCATCCGCACATTTGATCTCTAG
(SEQ ID NO:83)

CHR06FS041426769 41426769 41426818
TTATAATCAGGGAAGGGCACTGTACACAAGCCCAGTGAGTAGAAAGGCTG
(SEQ ID NO:84)

WNT2 :

CHR07FS116730563 116730563 116730619
CGGCAGAAGCTGGCATTACATTTCTAAGAACGGGGAAATCGTTATTCAATTA
GAGAT (SEQ ID NO:85)

Fig. 7

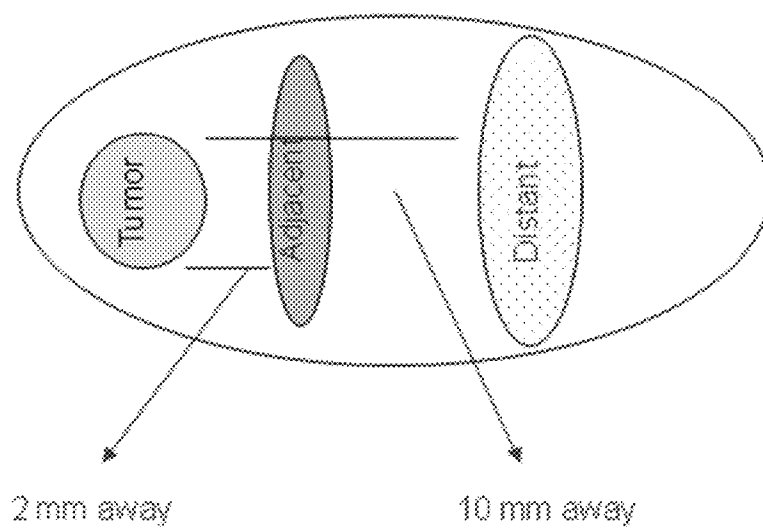


Fig. 8

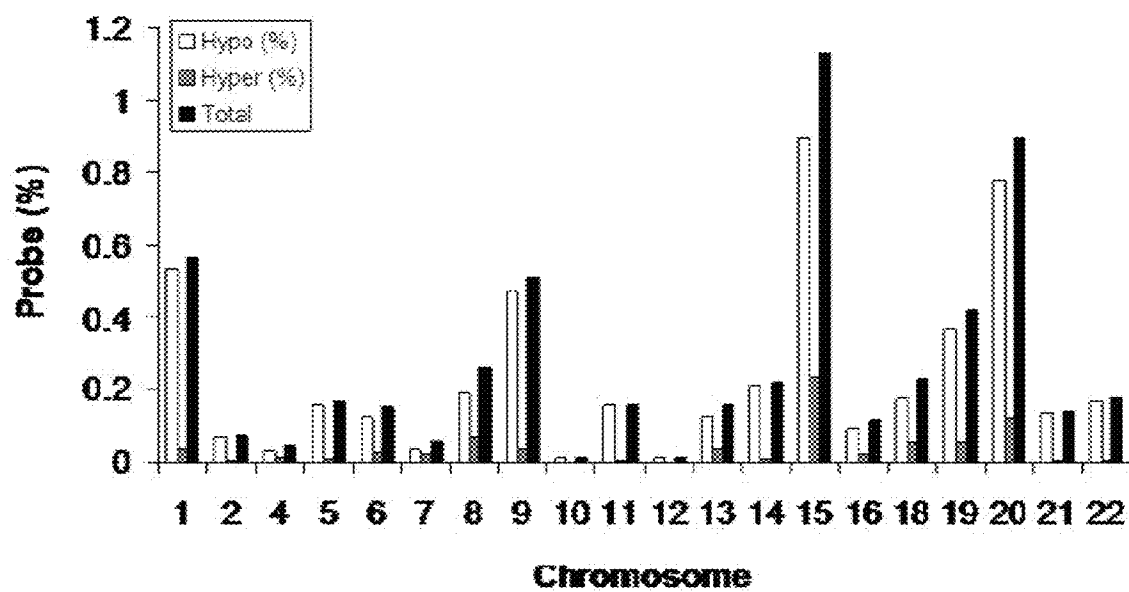
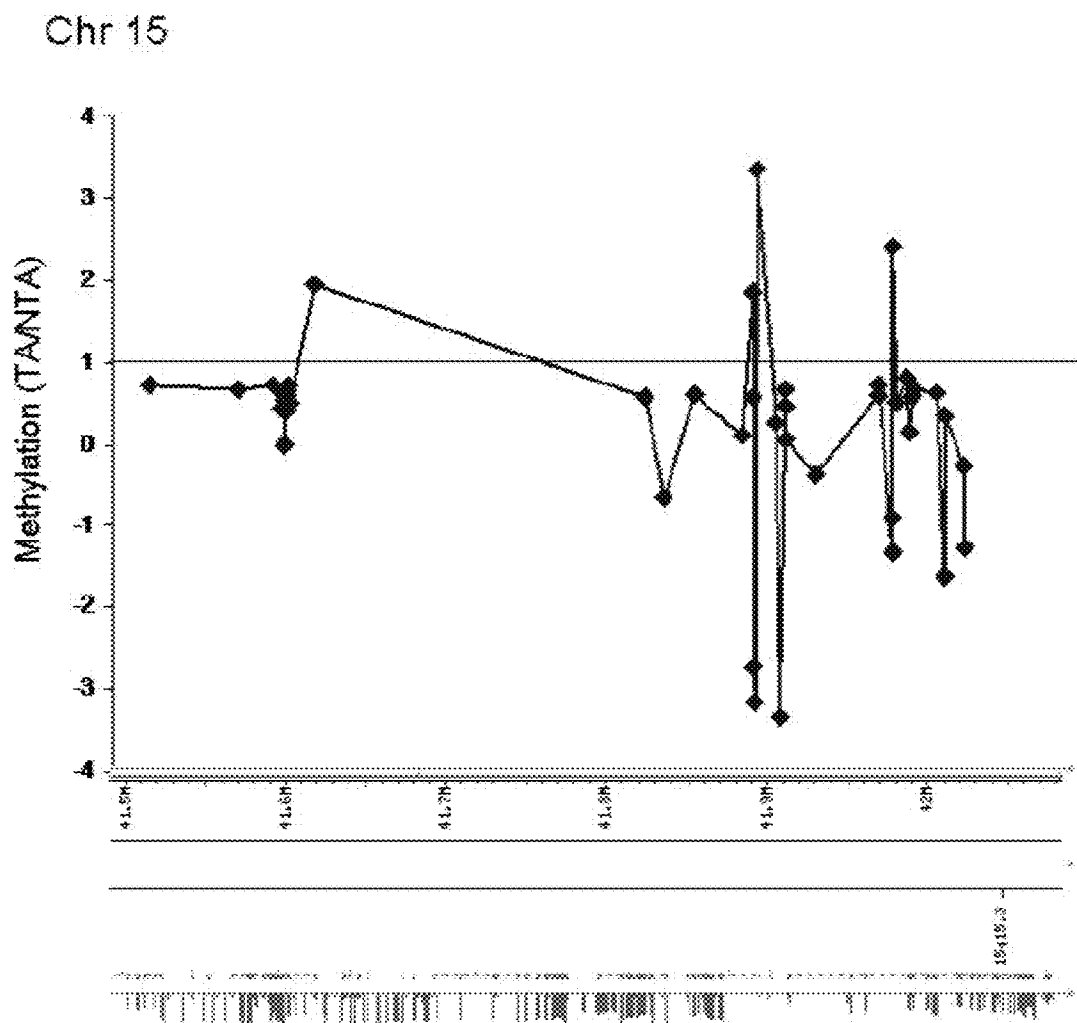


Fig. 9A



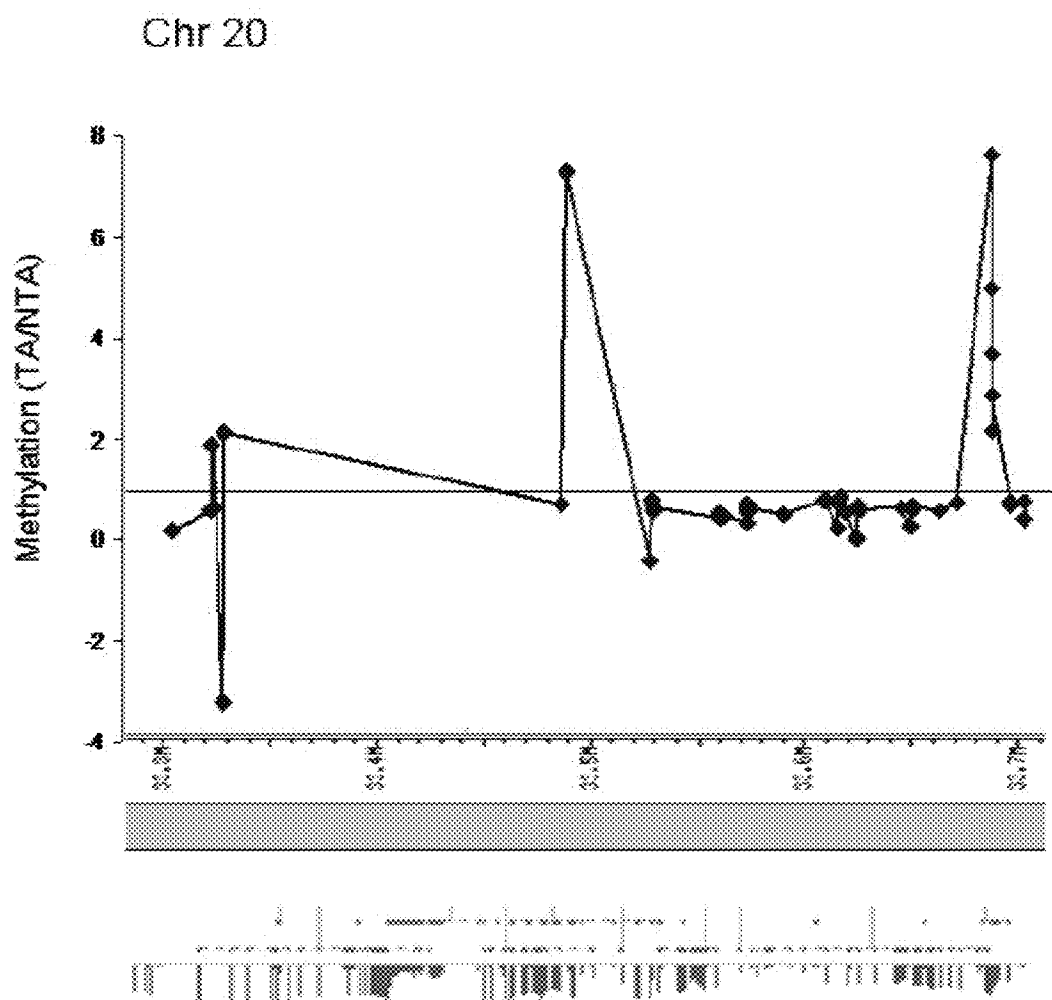


Fig. 9C

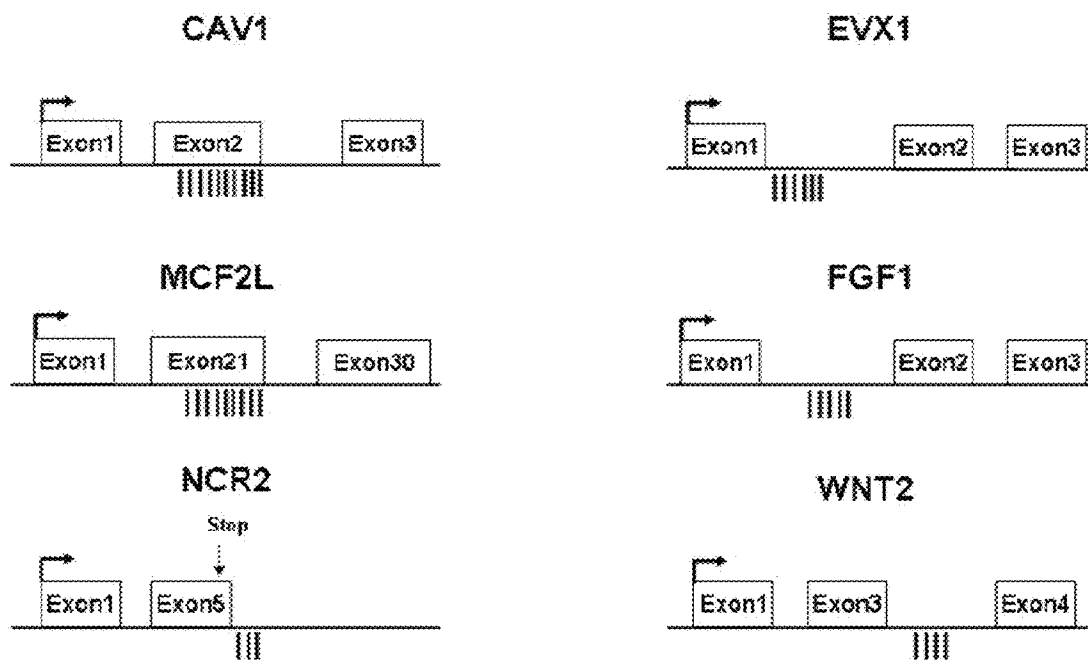


Fig. 10

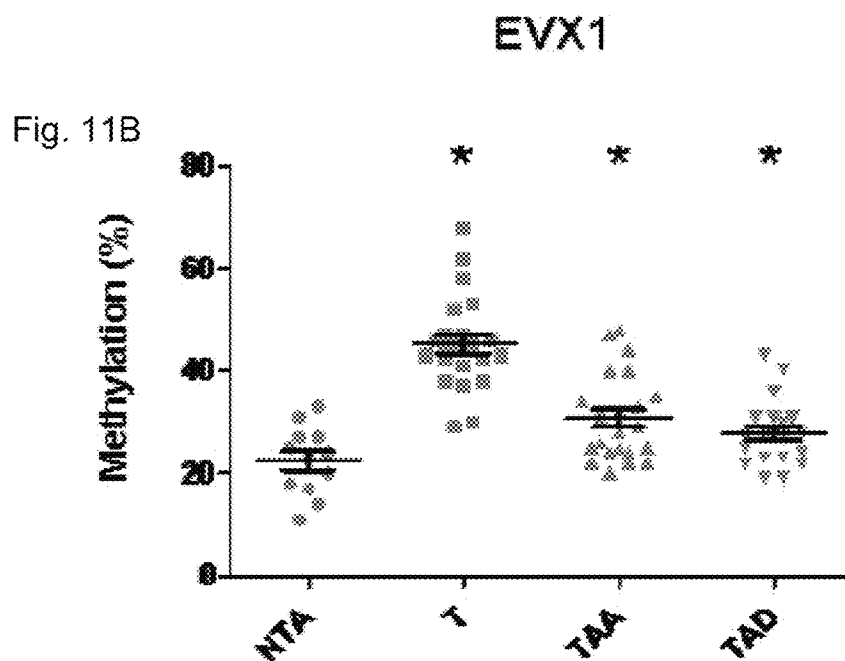
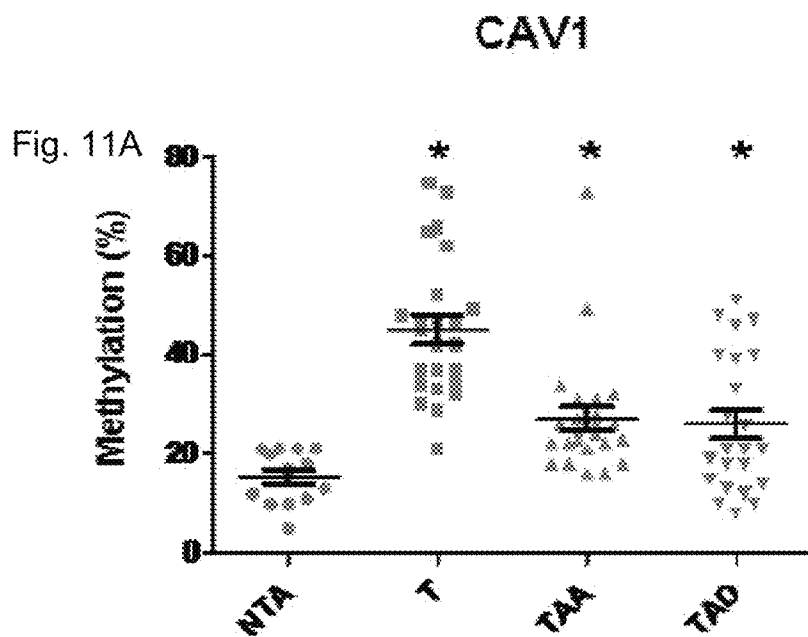


Fig. 11 A & B

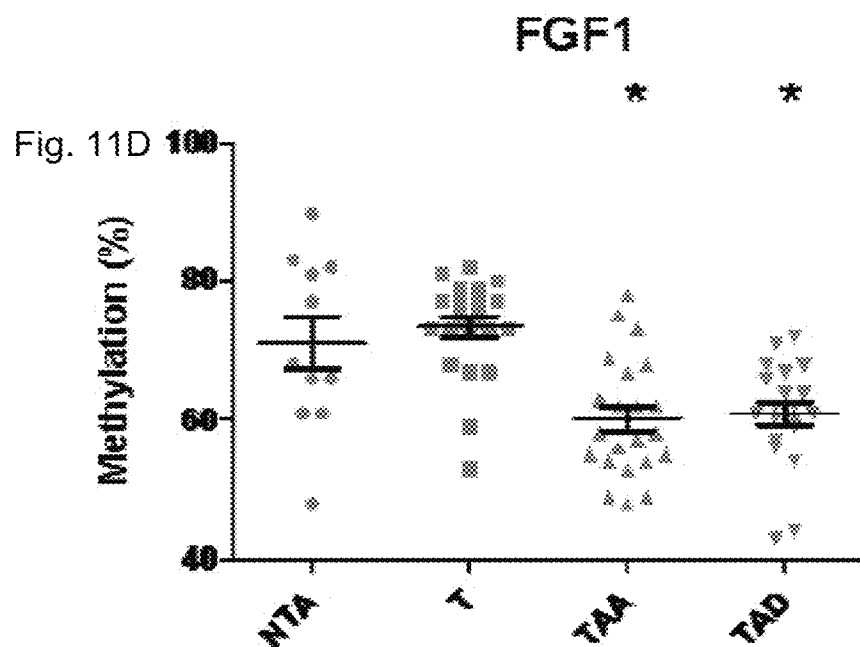
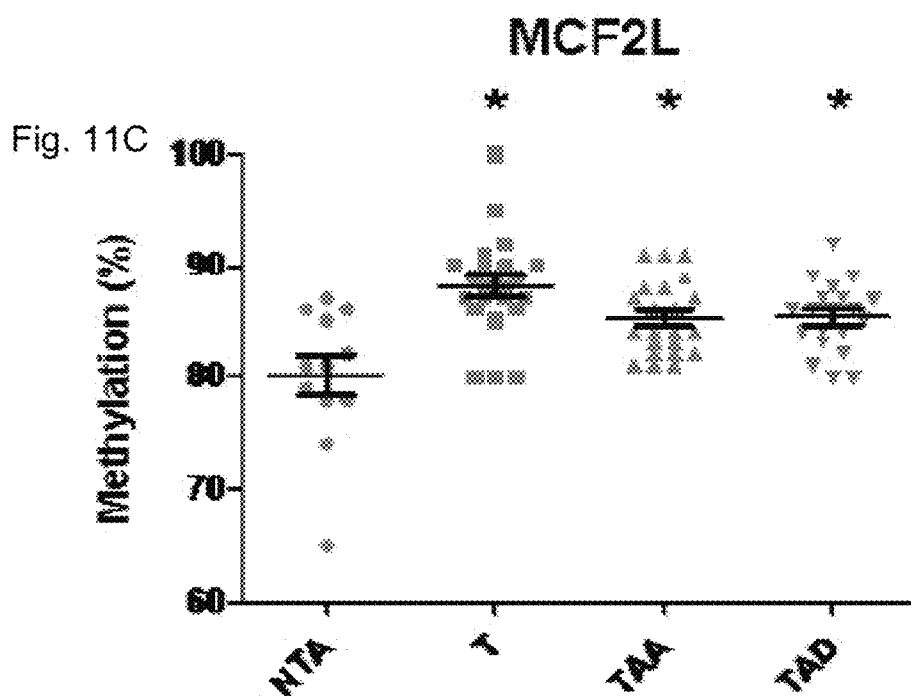


Fig. 11 C & D

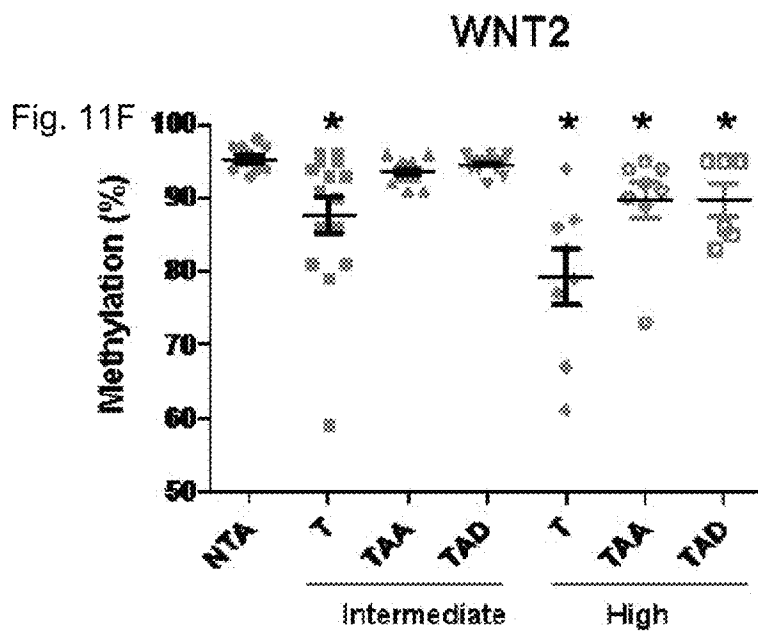
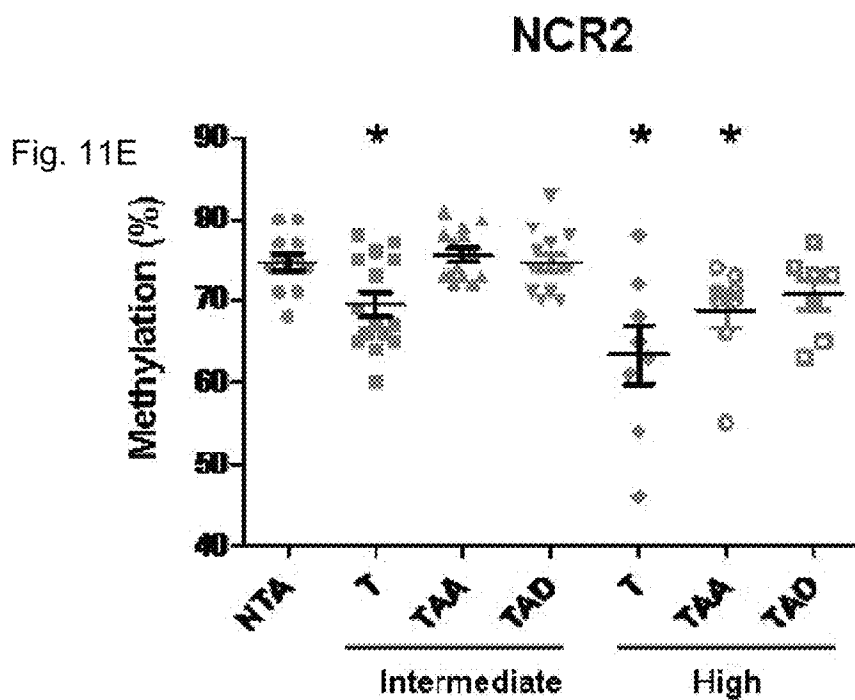


Fig. 11 E & F

CAV1	F-GGGTAATATTTATAAGTTTAATAATAAGGT (SEQ ID NO:43) R-biotin-TAAAACTATCCCAACCCCTTC (SEQ ID NO:44) Seq-AAGTTTAATAATAAGGTTATGGTAG (SEQ ID NO:45)
EVX1	F-GGAGGAGAGGAAGTTAGGAGTTTATAAAGGA (SEQ ID NO:46) R-biotin-CAAATACAACCCAAAACCAAAAACAAT (SEQ ID NO:47) Seq-GAAGTTACGAGTTTATAAAGGAT (SEQ ID NO:48)
FGF1	F-GGATGGGATAGTGAAGATAAGAGT (SEQ ID NO:49) R-biotin-TTCAACATACTATCATCTAATCCTTTACAC (SEQ ID NO:50) Seq-TTTTTTTAAGGTTATGTGATAA (SEQ ID NO:51)
MCF2L	F-biotin-GAGTTGAGTTTTATTTGGGTATTTGAAG (SEQ ID NO:52) R-ACCCCCAAATTACTAACTAATATATTCC (SEQ ID NO:53) Seq-CAAATTACTAACTAATATATTCCA (SEQ ID NO:54)
NCR2	F-biotin-GTTGTGGGAGAGTAAGGTTTGGAATAA (SEQ ID NO:55) R-CTCATCTCCACCCCCTTCATTTT (SEQ ID NO:56) Seq-CCCCCTTCATTTTCT (SEQ ID NO:57)
WNT2	F-TTTTGGAGGTATAGGGTAGGAAATAA (SEQ ID NO:58) R-biotin-AATTCAAATCATCCAAACCCAAA (SEQ ID NO:59) Seq-AGGAAATAATTTTAAATTGAATA (SEQ ID NO:60)

Fig. 12

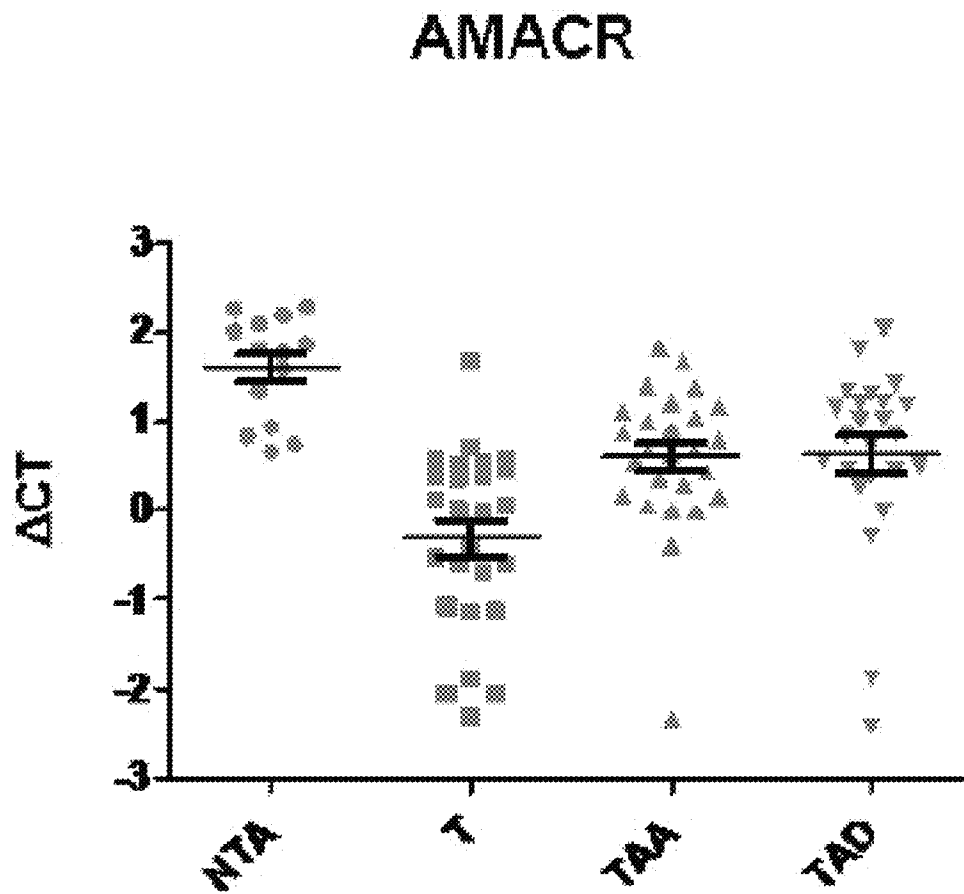


Fig. 13

CAVI promoter (SEQ ID NO:61)

catgtgtttt aaggcagaga tggaacttgg gcgatgggcg gggggtgggg
gaggtgggaa gggacggcctt aggacagggc aggattgtgg attgtttctg
ccgccttggt tgccataact gggcatctct gcaggcgcgt cggctccctc
caccctgct gagatgatgc actgcgaaaa cattcgctct ccccgggacg

Fig. 14

EVX1 promoter**Island 1 (SEQ ID NO:62)**

agctgccaag gcagaagggg gaagcgggtc ccagaaccac ccacctcggg ctgtccccac
cgcgaggacc cagcagtcctg gcgccccac cacggcctgg aagatgacgg agggcccaag
actaatattc acgacagcca gaccacgctt attgtttaga aggaagctcc ctttgttctt
actttttaac caaagagaag cgaaaacatt tttttcctga tcacattttc accgacacct
gagccgacaa gccagctcct ggcccccggc tcaggactcc tcgctctctc ccttctcggg
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tctccccga gccgggcggg cagactgcgg aggcaggccc cacacgcgcc gcttttcga
gcccggtttt cttcaggagc gaagctgttc cagctgacct gcgcgtctgg gggcctatgc
ccggcttcog attccattta aaacgacctg cgcattctat ctccgtcgc tccccgggt
tcccaccac cccctcggg cccgggcccag gccagcccag ccccgccgga agccaagctg
ggagcttttg aagtcoggag aatttcaatc cgagaggagc cggctggacc ggagcccgtc
gccccagcgg gggaagggac ggggggcctg ccgtgtggca ggtgggggat ggggtgtccc
cgccgcgaga aatgagaagc cgcggggcct ggagcggcct ccacctcagc tgetatcacc
ccctctccgc tgtcatggga tt

Island 2 (SEQ ID NO:63)

ttttttgt cttctttcct ttaaaaacc aaccgctctt aatgtgaggt tgatgaaagg
atgcttttgg aagaagtga c atttggttaa aaogttttcc cctaattgcg ccggtggaaa
ggggcggggg tgggtgtggt tccctaggct cctaagactg gccagtcagc tttgaaagag
cggggcagaa gtccggagag gg

Fig. 15

EVX1 promoter

Island 3 (SEQ ID NO:64)

cttatgagtc aaacctctat gaacccaac cttttgtac tggggagggc tgaaccctg
cccaaatag cgcgggtgaaa gctactgct tctcccaagt aggggctcc agtactgcca
cagcaggggc cgcattcctg ggcctcttc attcgaaaaa cctctttcca ggagacttcg
ctgattctga acgaatactt

Fig. 15 (Continued)

MCF2L promoter**Island 1 (SEQ ID NO:65)**

actataagg gggagtactg cgtcaccttc atctttttat ccctttggcc ttgctccgtg
cctgaaagct caccacactg gaacgtccag gtgcacatgt gccactggac accgggatgt
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gcacgcacgc cctgttggac tctggaatgc tgggtgcattg ttgccaaatg ccggaatggt
acacggatgc tctgttggac gctggaatgc tgggtgcattg ttgccggatg ctggaatggt
gcaogcatgc tctgttggac gctggaatgc tgggcacatgt g

Island 2 (SEQ ID NO:66)

a accacaaaag gatagctgcg gttttgggcg aggagagctc agagagtctt ttgcatatgg
ccctgtgatg ggggcatgg cctgtcatag acacgagctg gaatctgcag gtggcagcca
ggacgctgcg tgtgtcaggt gcacagtgtg gcttgggtgcc aacctggcg aggggtggaga
gccccgtgcc tgcagcgogc gcttccctca ctgggtcctg cgtccttggg caggcgatgc
ccctgggggg aggggctggt ccatccccg ccagccacgg acccacgcat ggaccacgcg
accacgggac ctgcttacct gggcgcgcg cggttgcat gcggccacac ggaaggggcg
cgctgggctg ctgcggcctc tgcagcttct acacctgcca cggggcgggc ggaggtaaag
ggagggcgcg gccaggcgcg gcccccgga ggcagctgca ctgctcggt cactcgcg
cttcgcggt gcccgcaaac caggaggcg tggagacctg gaacggggg gaagggcggg
ggcacttggt cggcacccgc ggggctccca ggggacctg gcggtgacac gaatttctag
gtgaccttg cggtgacacg aatttctagg tgacctgtgt gatacactag gtgacctagt
gacacaggtg acaattccag gtgaccgcg cggtgacctg cggggctccc aggtgacctc
gttgggtgag cccggggctc cccgacgacc gcggcggtga cacgcggggc tcccaggtga
ccccggcggt gcactcacag gactcccagg tgacctcgcg tggtagacac cggggcggg
cgcgcgcg ttcgcttcc gccgagcgcg cccccggc cggggcgca gcgcgcgc
ccctcccggt ggcgcggaac caatcctggg caggaggcg gcggctggag gctgaaagcg
ctgcgctggc cccctcccg cctccgccc gccccctc

Fig. 16

FGF1**Island 1 (SEQ ID NO:67)**

gcttcc tccgtgtgcct gctccatatt ctgggtttctc tccagagctc gcgtccactg
cctgccagtc agcagatgga tgactctgtt cacctcagcc gcgacacgcc ccacagcgag
tgcagcagtc gtccctgcag atgggctgct cctggctgcg tccattctct cagtaaatag
cctctccatt catccttccg gtccctctat gcccg

Island 2 (SEQ ID NO:68)

a gccgtccctg tcatcttccc tttctctctc cccatcagcc tgcgagggaac taaaagccgg
cgatctttcc ttgtgttatt tctttctttt tttttttttt tttttgagac ggagtctcgc
tctgtccccc aggtctggagt gcagtggccc gatctcagct cactgcaagc tccgcctccc
aggttcacac ctttctccctg cctcagcctc ccaagtagct gggactacag gcgcccgcga
ccgcgcccag ctaatttttt gtatttttag tagagacggg gtttcaccga gttagccagg
atggtctcga tctcctgacc tcatgacccg cccacctcgg cctcccaaag tgctgggatt
acaggcgtga gccaccgcgc ccggcctggt tctttctctt tttcttgag accgagtcctc
gtctgtttgc ccaggctgga gtacagtggc atgatctcag ctactgcaa cctctgtctc
ccaggttcaa gcaattctcc tgctcagcc ttcgagtag ctgggactaa aggtcccggt
caccaccgtt gccagctaa ttttt

Island 3 (SEQ ID NO:69)

gattatct tggaatagca cagggttttg ttttttttct gttttttggt tttcttgag
acggagtctc gctgttggtg ctccaggtcg agtgcaatgc cacaatctca
gtccatcaca acctccgctt ccgggttca agcgattctc ctgctcagc
ctcctgagta gctgggatta caggcatgcg ccaccatgcc cg

Fig. 17

Island 4 (SEQ ID NO:70)

cct ccttcacatggg tattccacat tgcttacaca gtgacagggg ttaaaaaaca aactaaaggc
tgggcggtgggt ggctcacgcc tgtaatecca gcactttggg aggctgaggc gggtaggatca
cgaggtcagg agatcgagac catcttggct aacacgggtga aaccccgctct ctactaaaaa
tacaaaaaat tagccggggcg cggtaggcagg cgcctgtagt ccagctact caggaggctg
aggcaggaga atggcgtgaa cctggggaggc ggagcttgca gtgagccgag attgtgccac
tgcaatccgg cctgggctaa agagcgggac tccgtct

Island 5 (SEQ ID NO:71)

a tgtattgatg atcacattca ctactcacac ttacaaagta cagctcccag gcggggcgcg
gtggcttacg cctgtaatcc cagcactttg ggaggccgag gcaggcggat cacgaggtca
tgagttcaag accagcctgg ccaacatggt gaaaccccat ctctactaaa aatataaaaa
ttagcctggt gtgggtggcg

Fig. 17 (Continued)

NCR2

Island 1 (SEQ ID NO:72, located between exons two and three)

gtt gtgaacttgt gtttttccgt tttatatgta tatgccactt gtttttttgt tttgttttat
ttcgtttttga ggccggagtct cgtctctgtct ggagtgcagt ggtgcaatct cggctcactg
caacctccac ctccagggtt caagcgattc tcttgcctca gcctccggtg tagctgggac
tacaggcgcc tgcacc

Island 2 (SEQ ID NO:73, located between exons two and three)

aag tagctgggat tacaggcgcc tgctaccacg cctggctaata tttttgtatt ttagtagaga
cgtgggtctca ccatgttggc caggctgggtc tcaaactcct gacctcaagt gatccacctg
cctcggcctc caaaactgcc gggattacag gcgtgagcca ccacgcctgg ccgctaacaa
gtaattttta agtatca

Island 3 (SEQ ID NO:74, located between exons four and five)

tttaacttt tgaacttttc cgaagctttc catattttct atgtcctcca agtgcccatc
atatctttta ttttctcctt tcattgacct ctgtctttct tcagagcttt ctggaaacct
ttgccgcttc tcggccaccc acctgcttag aagcccatg cgggcgcggg ggtgctgtgg
gctccaggcg gattgggogg g

Island 4 (SEQ ID NO:75, located between exons four and five)

ccagaatcc caactcagta agaccttgta aatccatgac attagcccca attcccatc
gtcccaaata ccataacctt tccacctgc acctgaagtg cgcagtcac agcacaagct
cctgtatgt cagcttctct gaacgtcacc gcggtactct cctgacatc tgctgttct
ccaggacaa tgctttctcc g

Fig. 18

WNT2 promoter**Island 1 (SEQ ID NO:76)**

gc caaccacctt ttcttttcta agtgtctgga tttacttcaa gaaaatgagg gacaaagaag
ggtggaggta agctttcgtt tattccctg cttcacgggg gaaggagggt tgtgagcata
agcatgtaag tacatgagag gctgtgtgct ctttgggtgcc tatcataccc tccccatggc
cggcgtgcac acacggcgag cagaaaagct ccccgcccc gctgcctgcc gccccacggc
ccctccctgc acctcccgcc cgaccgaagc agaccaagca gaattccct gggtcgcggc
ccagcgatac ggagcggccc tggcgaggag ccctgctctt cccgagtcgt gggtggcgcg
gtgcttgttt ccctccctc cctttccgga cccaaacggg gatgtatctg ggtcagcctg
ggagggggcg gacctgccag ggaccagcgt gggggaaggg ggtggcgatg acagcatctt
tcagggtttt ggctctctg agcttcgct cgtccagcct ctcaccgcgc tcgctgcggg
cgagggctga cgtcttgcc agtcaggcc cgagggtggg ctggagagag ggagagcccc
tccttcgat ctgggcggca cccctcccc caagccctgc gaacaattcg cctcccacac
atacacacag ggcatactc tattccccag agcacgctcc tcgggcgggc agtgagtccc
tcgccccag gaaaagagca atggaacagt tcacggccgc cacgagttcc tgggtcttct
tcctttccgg tgataaacgg cgcggctaca agccagctac tgctcaaat gctccaccg
cgggcccag cccctctctc ttggctgggc gggggcccag gtccaggacc gagggctcct
taacctccac aaggcgaca ggctgagcgc ccaggcgga ggaggtgcaa gggcgcacac
ccccggcgaa cgcctggctg cctcggttc tctctatgtg

Fig. 19

Island 2 (SEQ ID NO:77)

ataga cgcggcagct ccaaatttac aagtgcctagc ttttcacccc agcttcaggg agagaagcga
agcaatgagt tgagaatcat ctctggattc ttgtatocca tgcatagtaa totccttacc
ccctggcccc ctctctcggt tcttcacatt gcaagctcag ggaactgttt gccagcggat
ggcctcggca atccggaacg cagcctccga gagcccacgg atgctctttg goctggagct
tccctaaagg ttctgttatt cgcgtgtgct cgtaaccatg cagcgatggt ccccttccc
cgctcacct catccccaga catctcttgc catcatttca tgcacccgtg tctaaaacc
cgcgtttctc cccacccccg ccaggcgcag ccccc

Fig. 19 (Continued)

EXT1 (exostosin glycosyltransferase), Chr8**SEQ ID NO:18**

catcttttttg agtattgttt attgtaatgt aagaaccagt catgcctggg
gtacactcaa gctggatcct tgccataagg gcaggctggg gtgaatggtg
gtacactcct ggtaaagtgt acatgataag aaatatatat ttgggccagg
cacattgtcc tgcacctgta atcacagaac ttggggaggc taaggcaggc
aaattgcttc aggccaggag ttagagacca gcctggccaa catggtgaaa
acctcctctc aactaaaaat acgaagatta gctgggcgtg gtggctcctg
cccgtagtcc cagctactcg ggaggttgag gcatgagaat cgcttgaacc
cgggaggtgg aggttgccagt gagctgagat cacaccactg ctttccagcc
tgggcaacag agtgagactc tgtctcaaaa atttggtctc tgccccctga
cacccaactg ctaaaaccct tgtaatttcc tgagtgatag aggtgataag
aatgtcttcc acagaattcc caaatccctt ggaatttcct gggtgataaa
ccttttgttc taatgaggtg attcttagtg ggttcctgga tagcttcaaa
gtggtgatgt catcagaaag actaaactgt cattagaagc ttggaacttc
taaccacccc taccctatt ctccaggagg gagagagggg ctggaaattg
tttaattatc tatcatgcct atgtgatgaa acccctcaa aatttctaaa
ctatgaggtt tggagagcct ccaggttgat aaccatatec acatgccggg
aggatggtgc accccgactc catggggata gaagcctctg tgtttgggac
ttttctggac atcacacagt gtacctcttc atctggctgt tcatgtgtat
ccattatgtc ctttttaata aatcagtaat agtaagctgt tttcttgagt
tctgtgaccc cttctagcaa acgattgaac ttgaggaggg agtcatgaga
tcccctgact tgtaggcagt tggtgagaag tataggagac ccagacttgt
gattggcatt tgaagtgagg gataatcttg tggctctgag ccctaacct
gtggtgtctg cattaaactc gggttaattac tgtcagaatt gaattcaatc
attagatatc aagtaggttt ccaggaagtt ggagaacttg ttgttggtgt
gaggggaaga aaccataag tttggtgtca gagcattgcc agtagagaaa
caggtcccc ccacatatga gttggatggt gttatgctct tggtagggca
tttgttttga

Fig. 20

SPAG4 (sperm associated antigen 4), Chr20 T**SEQ ID NO:39**

tctcccga ccttggatct gaggcaggag atgcctcccc cgcgggtggt
caagagcttt ctgagtaagg gccaggccag ctgcgatccc ctctgacct
cgggttcccc tctccgaact ccagttctct ctgagcccc ggccccggt
tgagtatcga gccctctctc gagcctcaac tcattcctag ccccatcca
attatcctag ccgacctct cttcctgagc cccaggccca cccccggccc
ctcccaagcc cttctgaac ccggacacca cgcaggctga gccccgcctc
tccttgcgt gggccctct ctgacctct gtctggcct caggcctgct
cttccagggg ctgagcgtgt tgttatccct ggcaggagac gtgctggtca
gcatgtacag gtcagaggaa gggacgctgg cgcgccagga acagctcttt
ggagggggtg gggagcaggg ccggaacctt gctggcgctt gagccgattc
agatctgatt gagtcatgtt ggcaagagct gggctctagga ccttggggtg
gggactggag ggttgagcag gtccggggcct cagcctccct cgggttcccc
agggaggtct gttccatccg cttcctgttc acggctgtgt cgctgctgag
cctctttctg tcaggtgagg ggcagtgaat tccttgagc ccttgcctg
ggtgctttgg aggcaaacc agcacatttt ctctacatc ctcggtcctg
cagctcctgg cattccctg cagaaccccc taattcccc tcagactccc
acggctcctc ccaggcttaa cccctcaag cctctttcca ctgtccctt
atgccgggga aaccattct cttccttttc cttctgagac cctcctctt
ctttctccag cattctggct ggggcttctg tacctggtct ctcttttga
gaatgtgagt tggggagact gtcttggggg agggggttgg cagggttgta
accggagat tgtgggggtc cctggactg tcggtctgct ggggtggggg
ta

Fig. 21

Probe sequences for methylation array**EXT1:**

CHR08FS119036611 119036611 119036660
CACCATCCTCCCGGCATGTGGATATGGTTATCAACCTGGAGGCTCTCCAA
(SEQ ID NO:86)

SPAG4:

CHR20FS033669015 33669015 33669064
ATCTGATTGAGTCATGTTGGCAAGAGCTGGGTCTAGGACCCTGGGGTGGG
(SEQ ID NO:87)

Fig. 22

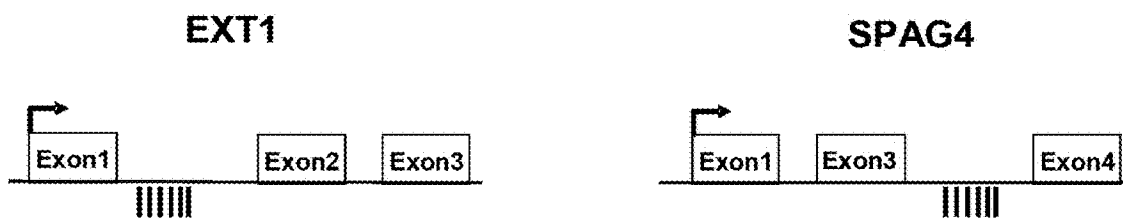


Fig. 23

Fig. 24A

EXT1 methylation in Human prostate tissue

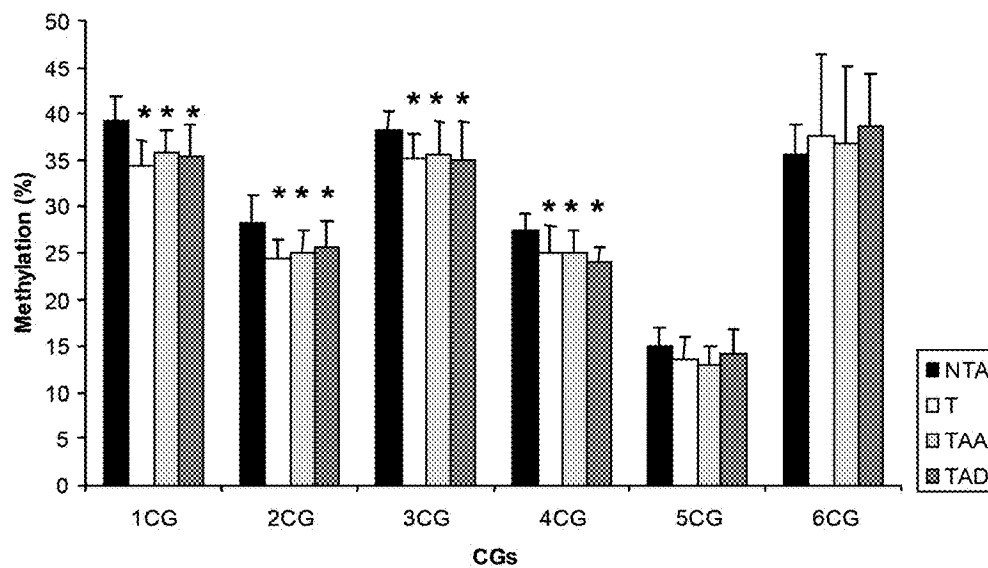
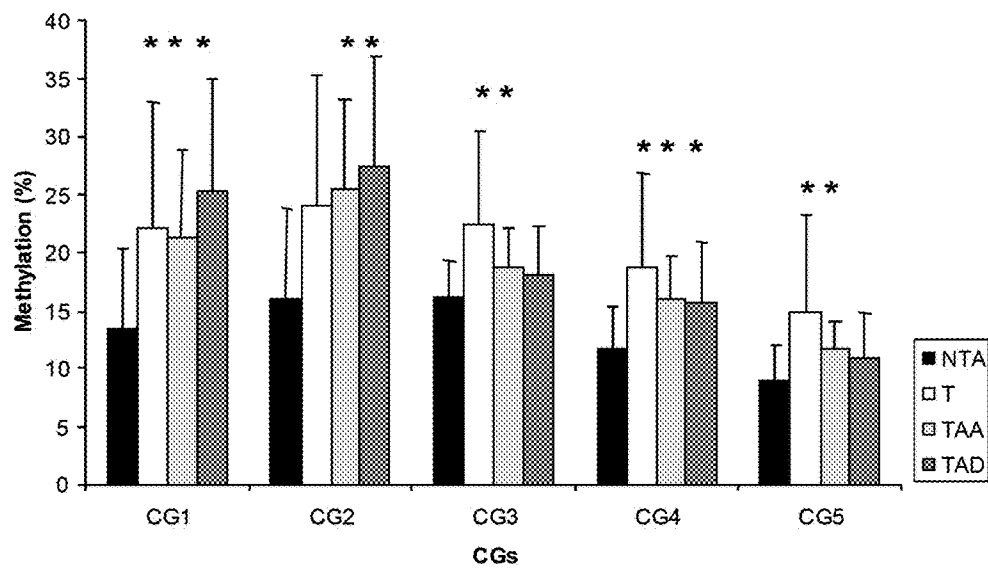


Fig. 24B

SPAG4 methylation in human prostate tissues



EXT1	F-TAGGAGTTAGAGATTAGTTTGGTTAATATG (SEQ ID NO:88) R-biotin-CCAAATTTTAAAACAAAATCTCACTCTAT (SEQ ID NO:89) Seq-CAACTCACTACAACCTCCA (SEQ ID NO:90)
SPAG4	F-GGTAGGAGAAGTGTTGGTTAGTATGT (SEQ ID NO:91) R-biotin-CCTAAACCCAACCTTTACCA (SEQ ID NO:92) Seq- TTAGTATGTATAGGTTAGAGGAAG (SEQ ID NO:93)

Fig. 25

EXT1**Island 1 (SEQ ID NO:94), 458bps**

CGTCCTCCCCGCGGGCAGTGCCGGCCCCGAGCAGCGCTTCGCAGGCCCCC
GCGCGAACGCTGCCGACCGCCGCGTTTCGGTCGCCGAATGTTACCCGGTTC
TGAATGTTACACTTACACATTCCATTCCCGACACGACAGCGCTGACCTCA
TCCATCCACGCAGCCCGCGCTGCCATTGGCCGAGCGTCACGTCCGGGGGG
GGCGGTGCTTCCGCTGCGCCCATTCATAACCCCCGGCCGCGGGCCGAGGC
GCCGGCGCGGCGTTGGGGGCGTAGGGGGCGCAGGGAGCCGGGGCTCCCGG
GTTGCAAGCTGCCGGCGGGCTGCCGGGCAGGTGGAGCGCGGGACGGCCCCG
GTGCGAGCCCCGCGGCCCCCTCGGCGCGCCAGGCCCGGATCTCGGCCTGC
GCCGTGCCGGGGACCAGAGGCGCCTGCGGAAACGCGGCGGCCGGGAAGG
AGGCACCG

Fig. 26

SPAG4**Island 1 (SEQ ID NO:95), 2190 bps**

GAGGTCAGGAGTTACGACCAGCCTGGCCAACATGGTAAAAACCCCGTCTC
TACAAAAATACAAAAATTAGCCAGGCATGATGGCGGGTGTCTGTAAATCCC
AACTACTCGGGAGGCTGAGGCAGGAGAATCGCTTGAACCCGGGAGGCGGA
GGTTGCACTGAGCCGAGATTGCACTACTGCCCTCCAGCCTGGGCGACACA
GCAGGACTCTGTCTCAAAAAATAAAAATAAAAATAAAAATAAAAATGCTGG
GCGCAGTGGCTCATGCCTGTAATCCCAGCACTTTAGGAGGCCGGGGCGGG
TGGATCACCTGAGATCGGGAGTTCAAGACCAGCCTGACTAACATGGAGAA
ACCCCGTCTCTACTAAAAATACAAAATTAGCCAGGCATGGTGGTGCATGT
CTGTAAATCCAGCCACTCAGGAGGCTGAGGCGGGAGAATCGCTTGAACCC
GGGAGGCGGAGGTTGCAGTGGACCAAGATCGCGCCATTGCACTCCAGCCT
GGGCAACAGAATGAGACTCCATCTCAAAAAAAAAAAAAAAAAAGAAAGAAAG
AAAGAAAGAAAGAAAGAAAGAAAGAAAGAAAGAAAGAAAGAAAGAAAGAA
AGAAAAAACTGTATAGACTGAGTGCCATTTTAGATGGGGTTTCTCTGGG
AAGTGCTGTGACATCATCGCTTGCTGTAAAGAGGCCGGGCGCGGTGGCT
GACGCCCTGTACTCCAGCGCTTTGGGAGGCCGAGGCGGGAGGATCGCTTG
AGCCTAGGAGTTCAAGTTACAATGAGCTATGATCAGGCCACTGCACTCC
AGCCTGGGCAATGAGAAAGACCCTGTCTCTTAAACAACAACAAGTCAGA
AGGAGAGGCTGCCATGGCTACGGCTCCAGGTGACGTCACGGCCAGCTCCG
TGACGCGCGGCCAGGGCAGCCCGCGGAGACCGAGGCTCCTCTGTGACGTC
AGCAGCCCGCCGGGACACAGCGGGAGGGCAGGTGCGGCCGCGGGGCTGC
CGACTTCACGACAGGCTCCGTGGGGTCCCCGCGGCGCGCAGCGGCTGAAGG
AGGCCCCAGGGCCTTGGCGACCGCAGCGGCGGCTTTAGCGTCAGTGACTA
GGCAGCAGGGGGTCAGGATGCGGCGAAGCTCCCGCCCGGGCTCGGCCTCG
TCCTCGCGCAAGCACACGCCCAACTTTTTTCAGCGAGAACAGCTCAATGAG
CATCACTCGGAGGACAGCAAAGGGCTCCGGTCAGCGGAGCCCGGGCCTG
GGGAGCCCGAGGGCAGAAGAGCCCGGGGCCGAGCTGCGGTGAGCCCGCC
TTGAGCGCGGGAGTGCCCCGAGGAACCATGGGCGAGGAAGCTCTCAGCA
GAAGCCAGCGCCTCGGAGCCACAACCTGGCAGACAGCCTGTGGCGCGCAA
CCGTGAGGGCGGGGCTCGGGTGCAGGGCGGGTTCGACCCCGGGTGAGCC
AGTGGAGGGGGCGGGCCTAAAGGGCGGTGCTGGGCGGGGACGGGGCTAA
GATGATATCTGGGCACCTCCTACAAGGTGGGTCTGTAGGGTAAAGGGAT
GGTGCTAAATGAGATCCCTTAAGGGGCGGAGCCTCGGTGTCTTGACGGT
TATGGGAAGGGCGGGGAAAATCTTGTGGTTGGGTGCCACTGAGGGGGCG
CGGCCTCAATGTAGCGTGAGTGGCTCCCAGGACAATTGGGTTCACACAA
GATCTAAGGCTGGGGGCGGGTCATCCGTTTGGGGGAGGGACCACTCTTT
TTTTTTTTTTTTTGCAACGGAGTTTCGCTCCTGTTGCCCATGCCATGCAA
TGGCATGATCTCGGCTCACCGCAACCTCCGCCTCCCGGGTTCAAACGATT
CTCCCGCCTCAGCCTCCCGAGTAGCTGGGATTACAGGCGTGCGCCACCAT
GCCCCGCCAATTTTTGTGTTTTTAGTAGAGACGGGGTTTCTCCGTGTTAA
TCAGGCTGGCCTCGAACTCCCGACCTCAGGTGATCCGCCCGCCTCGGCCT
CCCAATCGCTGGGATTACAGGCGTGAGCCACCGCGCCCGGCCAGGAGAC
CAACTCTGACGGAGCCTCCCTGAGGGGCGGGGCTTCAGAGGGCGGAGCT
GGAGCCGGGATAGGGCTGCGGTGGGACCAAAGCCTGTGAGAGACTTCCCA
GCTGTCTGGCTGTGGACTGAGCAATCTGCGGCCCGGTCT

Fig. 27

SPAG4**Island 2 (SEQ ID NO:96), 282 bps**

CGGCCCGGTCTCGAGGGGAAAATAGGTCTGTGGTCCGCAAGGCCCCAGTG
GAGCCCTTGGGTTCCTCGCAGAACCGACTGGGTCTCCAGTAGTCTCTGAGG
AGCCGCTCGACCTTCTCCCGACCTGGATCTGAGGCAGGAGATGCCTCCC
CCGCGGGTGTTCAAGAGCTTTCTGAGTACGGGCCAGGCCAGCTGCGATCC
CCTCTGACCCCTCGGGTTCCCTCTCCGAACTCCAGTTCTCTCTGAGCCCC
CGGCCCCCGTTTGAGTATCGAGCCCCCTCTCCG

Island 3 (SEQ ID NO:97), 234bps

CGGCAGCAGTCGCTCTGTCCGACGGTTCGATGGTCCCTCCGCCCGCCTG
CAGCCCCACGTGTTCCCTGGGAATTGCTGGGCTTTTGAAGGCGACCAAGG
CCAGGTGGTGATCCAACTGCCGGGGCCGAGTGCAGCTGAGCGACATCACTC
TGCAGCATCCACCGCCCGAGCGTGGAGCACACCGGAGGAGCCAACAGCGCC
CCCCGCGATTTGCGGGTCTTTGTGAGTGCGGACG

Fig. 27 (continued)

Fig. 28A

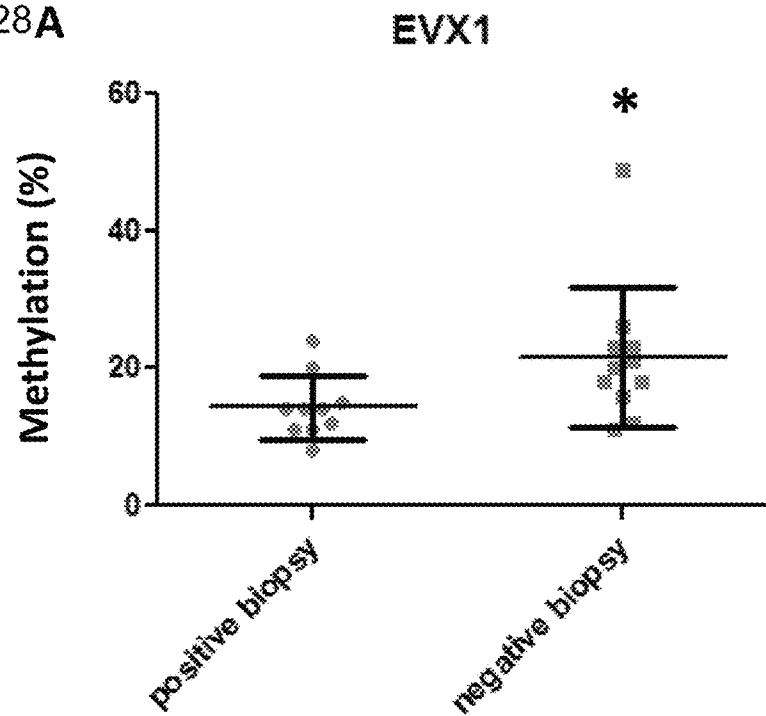


Fig. 28B

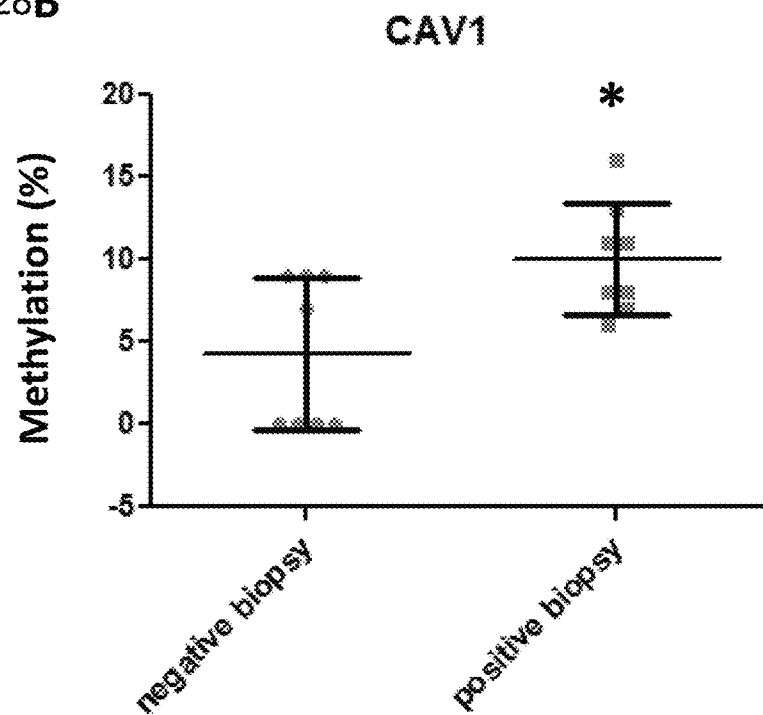


Fig. 28C

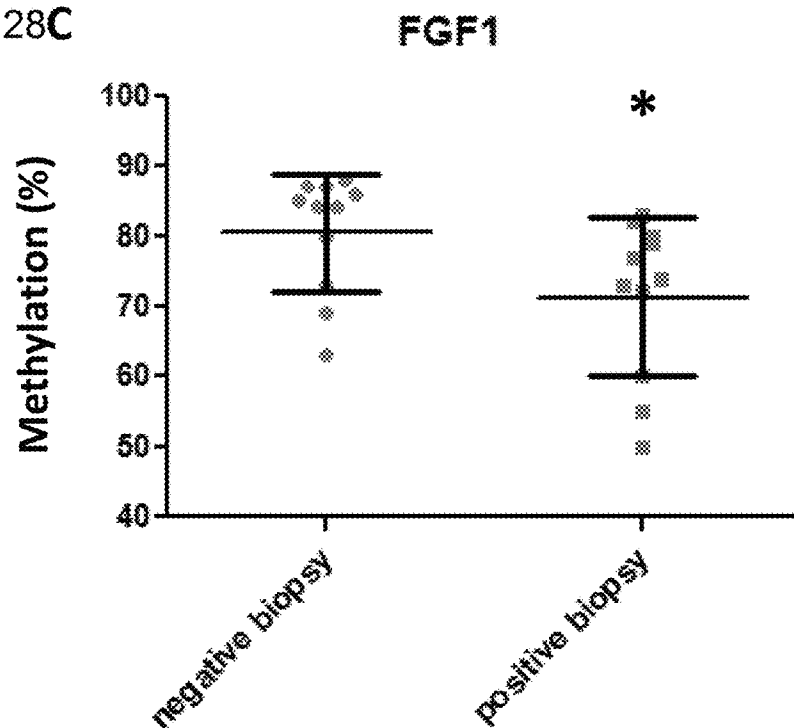
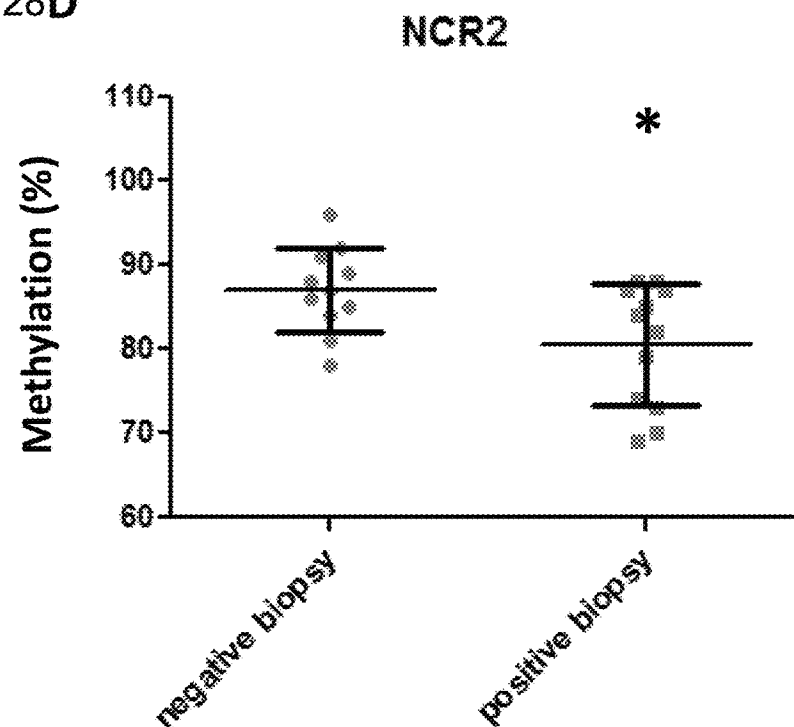


Fig. 28D



DNA isolation from paraffin-embedded prostate biopsies

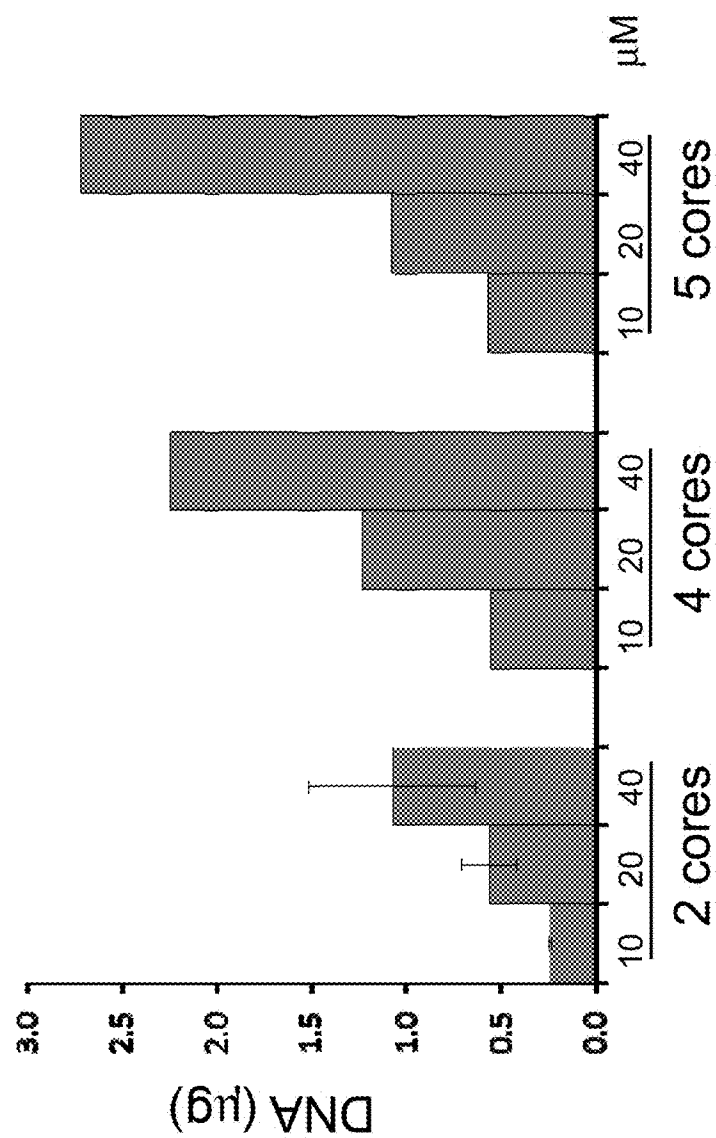


Fig. 29

1

**UNBIASED DNA METHYLATION MARKERS
DEFINE AN EXTENSIVE FIELD DEFECT IN
HISTOLOGICALLY NORMAL PROSTATE
TISSUES ASSOCIATED WITH PROSTATE
CANCER: NEW BIOMARKERS FOR MEN
WITH PROSTATE CANCER**

**CROSS-REFERENCE TO RELATED
APPLICATION**

This application claims the benefit of U.S. Provisional Patent Application Ser. No. 61/806,218 filed on Mar. 28, 2013; U.S. Provisional Patent Application Ser. No. 61/806,566 filed on Mar. 29, 2013; and is a continuation-in-part of U.S. application Ser. No. 13/288,607 filed on Nov. 13, 2011. All of these applications are incorporated by reference in their entirety.

**STATEMENT REGARDING FEDERALLY
SPONSORED RESEARCH OR DEVELOPMENT**

Not applicable.

BACKGROUND

It is estimated that 198,280 men were diagnosed with prostate cancer and 27,360 men died from prostate cancer (PCa) in 2009 in the USA (Jemal et al., (2009) *CA Cancer J Clin* 59, 225-249). The predominant tools for early detection of prostate cancer are prostate specific antigen (PSA) testing and digital rectal exam (DRE). However, 65% to 70% of men with total PSA ranging between 4.0-10.0 ng/ml have a negative prostate biopsy result. In addition, 15% of PCa patients have PSA levels <4.0 ng/ml, indicating a weak predictive ability (Thompson et al., (2004) *N Engl J Med* 350, 2239-2246). PSA-based screening also detects non-significant cancers leading to an estimated 50% of overdiagnosis (Fritz et al., (2009) *The New England Journal of Medicine* 360). A urine-based test examining an RNA molecule termed PCA-3 is currently undergoing FDA trials. Prostate biopsy is used to confirm disease. However, because of sampling errors repeated sets of samples are commonly required to make a diagnosis (Gann et al., (2010) *JCO* 28, 7). Typical biopsy schemes include 10-12 or more tissue cores removed under local anesthetic. Re-biopsy is often required two to three times in order to rule out cancer because of sampling errors. Cancers can also be missed because of sampling problems.

There is a clear need for biomarkers that allow easier and more accurate diagnosis and prognosis of prostate cancer.

SUMMARY OF THE INVENTION

In one embodiment, the present invention is a method of detecting the presence of a prostate cancer field defect in a human subject comprising the steps of obtaining genomic DNA from the human subject, amplifying at least one target region, and preferably at least two, three or four regions, selected from the group consisting of CAV1, EVX1, MCF2L, FGF1, NCR2, WNT2, EXT1 and SPAG4 target regions, purifying the amplification product; and quantitating the methylation in the target regions, wherein significant methylation changes indicate the presence of prostate cancer field defect, wherein the change is relative to tissue from a second human subject who does not have prostate cancer.

2

Preferably, the significant methylation change is $p < 0.05$ or at least $\pm 50\%$ of the pyrosequencing percentages or fold-changes shown in Table 1.

In another embodiment, the present invention is the amplification product described above.

In another embodiment, the present invention is a combination of the amplification product described above and materials useful to determine methylation status.

In another embodiment, the genomic DNA is obtained from prostate tissue. In another embodiment, the genomic DNA is obtained from body fluid preferably selected from the group consisting of urine and semen. Most preferably the bodily fluid is urine.

In a preferred embodiment, primer sets are used for amplification of the target region and at least one primer within each set of primers is biotinylated.

In yet another preferred embodiment, the methylation is quantified via pyrosequencing.

In another embodiment, the quantitation of methylation comprises analyzing whether the CAV1, EVX1 or MCF2L regions are hypermethylated or FGF1, WNT2 or NCR2 regions are hypomethylated as a positive correlation to prostate cancer field defect. Preferably, the target loci comprise sequences selected from the group consisting of SEQ ID Nos:1-6. Preferably, the target loci are amplified using at least one set of primers in FIG. 12.

In another embodiment, the quantitation of methylation comprises analyzing whether the SPAG4 regions are hypermethylated or EXT1 regions are hypomethylated as a positive correlation to prostate cancer field defect. Preferably, the target loci comprise sequences selected from the group consisting of SEQ ID Nos:18 and 39. Preferably, the target loci are amplified using at least one set of primers in FIG. 25.

In another embodiment, the quantitation of methylation comprises analyzing whether the CAV1, EVX1, MCF2L or SPAG4 regions are hypermethylated or FGF1, WNT2, NCR2 or EXT1 regions are hypomethylated as a positive correlation to prostate cancer field defect. Preferably, the target loci comprise sequences selected from the group consisting of SEQ ID Nos:1-6, 18 and 39. Preferably, the target loci are amplified using at least one set of primers in FIGS. 12 and 25.

In another embodiment, the human subject is a prostate cancer patient.

In another embodiment, the invention is a method of diagnosing high grade prostate cancer field defect in a human subject comprising the steps of: (a) obtaining genomic DNA from the human subject; and (b) quantitating the methylation in at least one target region selected from the group consisting of NCR2 and WNT2 target, wherein significant methylation changes indicate the presence of high grade prostate cancer field defect or prostate cancer, wherein the change is relative to tissue from a second human subject who does not have prostate cancer; and (c) treating the human subject for high grade prostate cancer field defect based the results of steps (a) and (b).

In another embodiment, the invention is a method of screening biomarkers for prostate cancer comprising the steps of: (a) obtaining genomic DNA from a human subject; and (b) quantitating the methylation in at least one target region selected from the group consisting of SEQ ID NOS: 1-6 and 18, 39; wherein significant methylation changes indicate the presence of prostate cancer field defect or prostate cancer, wherein the change is relative to tissue from a second human subject who does not have prostate cancer.

In another embodiment, the invention is a method of screening biomarkers for prostate cancer comprising the

steps of (a) obtaining genomic DNA from a human subject; and (b) quantitating the methylation in at least one target region selected from the group consisting of SEQ ID NOs: 61-77 and 94-97; wherein significant methylation changes indicate the presence of prostate cancer field defect or prostate cancer, wherein the change is relative to tissue from a second human subject who does not have prostate cancer.

Other objects, advantages and features of the present invention will become apparent from the following specification taken in conjunction with the accompanying drawings.

BRIEF DESCRIPTION OF DRAWINGS

The invention will be better understood and features, aspects and advantages other than those set forth above will become apparent when consideration is given to the following detailed description thereof. Such detailed description makes reference to the following drawings, wherein:

FIG. 1 shows the sequence of the target region for CAV1 (SEQ ID NO:1).

FIG. 2 shows the sequence of the target region for EVX1 (SEQ ID NO:2).

FIG. 3 shows the sequence of the target region for MCF2L (SEQ ID NO:3).

FIG. 4 shows the sequence of the target region for FGF1 (SEQ ID NO:4).

FIG. 5 shows the sequence of the target region for NCR2 (SEQ ID NO:5).

FIG. 6 shows the sequence of the target region for WNT2 (SEQ ID NO:6).

FIG. 7 shows probe sequences used in the methylation array for the genes CAV1, EVX1, MCF2L, FGF1, NCR2 and WNT2.

FIG. 8 is a diagram demonstrating microdissection of prostate tissue.

FIG. 9A shows genome-wide distribution of DNA methylation array differences at 385,000 loci in histologically normal tumor-associated (TA) prostate tissues compared to non-tumor associated (NTA) tissues. Significant differences in methylation between TA and NTA prostate tissues were generated using a cut-off of probe score of $-\log_{10} [p]$ that ranged from 2 to 10 resulting in around 1,000 probes on each chromosome and 18,101 probes in total. After statistical analysis comparing the log₂-ratios between the NTA and TA groups, significant methylation differences between groups were determined using a t-test ($P < 0.05$). A total of 615 probes were differentially methylated in TA tissues with 537 demonstrating hypomethylation and 78 hypermethylation. The percentage (axis) is the significantly altered probe number versus the total probe number analyzed for each chromosome. Chromosomes 15 and 20 were differentially methylated to a greater extent than other chromosomes.

FIG. 9B shows the significant methylation changes across 41,522,036-4,2004,151 on chromosome 15p. The data are represented as a ratio of Mean TA/NTA.

FIG. 9C shows the significant methylation changes across 33,343,402-33,565,080 on chromosome 20p. The data are represented as ratio of Mean TA/NTA.

FIG. 9D is a heat map of significant DNA methylation array changes using unsupervised hierarchical clustering. Using more stringent criteria (t-test, $p < 0.01$), 87 probes are shown comparing sets of NTA (left) to TA (right) and hierarchically ordered from top to bottom by relatively hypermethylation to hypomethylation. Green indicates relative hypomethylation whereas the red shaded areas demon-

strate hypermethylation. The heat map was generated with JAVA TMEV™ (MultiExperiment View).

FIG. 10 is a schematic representation of CpGs analyzed by Pyrosequencing. The ratio of ObsCpG/ExpCpG and GC percentage for all regions are: CAV1 1.2, 60%; EVX1 0.8, 60%; FGF1 1.0, 50%; MCF2L 1.0, 60%; NCR2 0.5, 50%; WNT2 1.0, 50%.

FIG. 11A-D shows CAV1, EVX1, MCF2L and FGF1 methylations. To analyze CAV1 methylation, we analyzed methylation of ten CpGs and eight out of the ten CpGs showed significantly increased methylation in T (tumor), TAA (tumor-associated adjacent) and TAD (tumor-associated distant) prostate tissue compared to NTA (non-tumor-associated normal prostate tissue). The figure shows methylation percentages of the sixth CpG and they are 14%, 45%, 27% and 26% for NTA, T, TAA and TAD prostate tissues, respectively. *t-test. $P < 0.05$ was used for all figures below. To analyze EVX1 methylation, we tested six CpGs for EVX1 and four out of the six showed significantly increased methylation in T, TAA and TAD compared to NTA prostate tissues. This figure shows methylation percentage of the third CpG and they are 22%, 45%, 31% and 28% for NTA, T, TAA and TAD prostate tissues, respectively. For MCF2L, the region detected contains nine CpGs and three out of the nine CpGs showed significantly increased methylation in T, TAA and TAD compared to NTA prostate tissue. This figure shows the methylation for the first CpG and they are 80%, 88%, 85% and 85% for NTA, T, TAA and TAD prostate tissues, respectively. For FGF1, all four CpGs we analyzed showed significantly decreased methylation in TAA and TAD compared to NTA prostate tissue, but no significant change in T prostate tissue. This figure shows methylation percentage of the third CpG and they are 71%, 73%, 60% and 61% for NTA, T, TAA and TAD prostate tissues, respectively.

FIG. 11E-F shows NCR2 and WNT2 methylations. For NCR2, three CpGs were analyzed within the target region. In the prostate with high grade (Gleason grade ≥ 8 , H) the third CpG showed significantly decreased methylation in T and TAA prostate compared to NTA prostate tissue. However, in the prostate with intermediate grade (Gleason grade 6 & 7, Int), the methylation change of this CpG was only significant in T prostate. This figure shows methylation of the third CpG and they are 75%, 69%, 63%, 68% and 70% for NTA, T (Int), T (H), TAA(H) and TAD(H), respectively. For WNT2, we detected methylation of four CpGs. In the prostate with high grade, two of them showed significantly decreased methylation in all T, TAA and TAD prostate tissues compared to NTA prostate tissue. However, in the prostate with intermediate grade, methylation change was only significant in T prostate tissue. This figure shows methylation of the first CpG and they are 95%, 87%, 79%, 89% and 89% for NTA, T (Int), T (H), TAA (H) and TAD (H), respectively.

FIG. 12 shows the sequences of primers used for pyrosequencing.

FIG. 13 shows AMACR expression in NTA, T, TAA and TAD prostate tissues which will be used in quantitative methylation Pyrosequencing. AMACR expression was assayed with quantitative RT-PCR, the data are shown as ΔCT . Two NTA and three TA (T, TAA, TAD) specimens were excluded from experiential group due to higher AMACR expression.

FIG. 14 shows the sequence of the expanded region of CAV1 to screen for methylation changes associated with PCs.

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FIG. 15 shows the sequence of the expanded region of EVX1 to screen for methylation changes associated with PCa.

FIG. 16 shows the sequence of the expanded region of MCF2L to screen for methylation changes associated with PCa.

FIG. 17 shows the sequence of the expanded region of FGF1 to screen for methylation changes associated with PCa. Since there is no CPG island within the promoter region, all the regions shown are within introns between exons one and three.

FIG. 18 shows the sequence of the expanded region of NCR2 to screen for methylation changes associated with PCa.

FIG. 19 shows the sequence of the expanded region of WNT2 to screen for methylation changes associated with PCa.

FIG. 20 shows the sequence of the target region for EXT1 (SEQ ID NO:18).

FIG. 21 shows the sequence of the target region for SPAG4 (SEQ ID NO:39).

FIG. 22 shows probe sequences used in the methylation array for the genes EXT1 and SPAG4 (SEQ ID NOs:86-87).

FIG. 23 is a schematic representation of CpGs analyzed by Pyrosequencing. The ratio of ObsCpG/ExpCpG and GC percentage for all regions are: EXT1 0.8, 60%; SPAG4 0.55, 60%.

FIGS. 24A and 24B show EXT1 and SPAG4 methylations. To analyze EXT1 methylation, we analyzed methylation of six CpGs and four out of the six CpGs showed significantly increased methylation in T (tumor), TAA (tumor-associated adjacent) and TAD (tumor-associated distant) prostate tissue compared to NTA (non-tumor-associated normal prostate tissue). The figure shows methylation percentages of all six CpGs. *t-test. $P < 0.05$ was used for all figures below. To analyze SPAG4 methylation, we tested five CpGs for SPAG4 and five out of the five showed significantly increased methylation in T, TAA and TAD compared to NTA prostate tissues. These figures show methylation percentage of the all five CpGs.

FIG. 25 shows the sequences of primers used for target amplification and pyrosequencing (SEQ ID NOs:88-93).

FIG. 26 shows the sequence of the expanded region of EXT1 to screen for methylation changes associated with PCa (SEQ ID NO:94).

FIG. 27 shows the sequence of the expanded region of SPAG4 to screen for methylation changes associated with PCa (SEQ ID NOs:95-97).

FIGS. 28A, 28B, 28C and 28D show methylation of the EVX1, CAV1, FGF1 and NCR2 in urine from the patients with positive or negative biopsies for prostate cancer.

FIG. 29 shows DNA isolation from paraffin-embedded prostate biopsies.

DESCRIPTION OF THE PRESENT INVENTION

In General

Like other human cancers, prostate cancer development and progression is driven by the interplay of genetic and epigenetic changes (Schulz et al., (2009) *Semin Cancer Biol* 19, 172-180). Changes in somatic DNA methylation constitute a superb source of cancer biomarkers for several reasons. These changes can be detected using PCR methods at single-copy sensitivity and small DNA fragments are more stable in blood and body fluids than RNA or protein species. In addition, acquired DNA methylation differences have

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been reported for nearly every human cancer. Finally, somatic hypermethylation of CpG island sequences may be more consistent for a given cancer than genetic changes (Nelson et al., (2009) *Endocrinology* 150, 3991-4002). Patterns of DNA methylation in tumors may also discriminate aggressive vs. nonaggressive disease and predict responsiveness to specific treatments (Nelson et al., (2009) *Endocrinology* 150, 3991-4002).

Genetic and epigenetic alterations do not appear to be limited to the cancerous cells, as recent data indicates tissue adjacent or distant to the tumor is also abnormal (Norm et al., (2009) *Prostate* 69, 1470-1479). This field defect (also termed field effect) has been identified in colon and head and neck cancer, as well as prostate based on alterations in gene expression (YP, Y. (2004) *Journal of Clinical Oncology* 22; Chandran et al., (2005) *BMC Cancer* 5, 45) and genomic loss of imprinting (Agnieszka et al., (2009) *International Journal Of Oncology* 35, 87-96). Aberrant methylation patterns in the GSTP1, RARb2, APC and RASSF1A promoters have been detected in normal epithelial or stromal tissue adjacent to cancer (Aitchison et al., (2007) *Prostate* 67, 638-644; Hanson et al., (2006) *J. Natl. Cancer Inst.* 98, 255-261; Henrique et al., (2006) *Mol Cancer Res* 4, 1-8). These genes are altered in the tumor and represent a single gene approach to analyzing the field effect. Results vary as to whether this field effect is limited to the tissue adjacent to the tumor or whether it is found in distant 'normal' tissue.

By use of the present invention, one can reassure men who have a negative biopsy that no cancer is present by testing for the presence of the field defect without additional future biopsies and avoid the complications directly associated with increasing the biopsy number and frequency. If methylation changes associated with a biopsy field defect are detected, more detailed imaging with an MRI and endorectal probe and a more aggressive detection strategy requiring anesthesia and 30-50 biopsies will typically be undertaken to detect and/or characterize the disease. This approach is associated with additional risks associated with anesthesia, infection, bleeding and others, and is not performed routinely. In addition, it is likely these patients would be monitored much more closely.

In developing the present invention, the inventors have analyzed histologically normal tissues from men with and without prostate cancer utilizing a high-throughput technique that simultaneously scans 385,000 regions of the genome. Using a human ENCODE methylation array (Roche Nimblegen), the inventors have found distinct alterations in methylation at specific loci or "target regions". The inventors associated methylation changes at these loci with the presence of prostate cancer. Analysis of these loci in tissue samples from patients will enhance the detection of prostate cancer.

By "histologically normal", we mean prostate tissue that has no evidence of disease in the specimen itself, based on standard morphologic and histochemical criteria used by pathology. By "normal" or "non-tumor associated (NTA)", we mean prostate specimen which not only does not contain cancer itself, as defined by a pathologist, but also does not contain cancer elsewhere in the prostate. By "tumor associated (TA)", we mean a prostate specimen which does not show evidence of cancer, but is taken from a prostate with

evidence of cancer in another location. One would appreciate that both “non-tumor associated” and “tumor associated” prostate specimens in this application are “histologically normal” prostate specimens.

Standard PCR methods generally entail amplification of a target region using a pair of forward and reverse primers that are designed to be complementary to sequences flanking the target region. The size of a fragment that can be amplified using PCR can range from less than 50 base pairs (bp) to greater than 10,000 base pairs. Similarly, sequencing of a target region can be accomplished by designing sequencing primers that are complimentary to a sequence less than 50 bp upstream of the target gene or more than 1000 bp upstream depending on the sequencing technology selected. Therefore it is possible to design many permutations of sequencing primers or PCR primer sets that are capable of amplifying a given target region. For example, given a sample containing genomic DNA comprising a 500 bp target gene or region, a primer set can be designed to amplify i) the explicit target region; or ii) a region encompassing the target region including upstream and downstream sequence. If the mini-

num requirement is a 20 bp primer and the amplified fragment size can range from 500 to 10,000 bp, the number of potential primer sets that can be used to amplify the target region is on the order of 10^4 .

This invention discloses a number of preferred primers for amplification of specific target regions. However, one skilled in the art will appreciate that the target regions disclosed in the present invention can be amplified by other than the described primers, which have been presented for purposes of illustration. A number of PCR amplification and sequencing schemes are contemplated and therefore, the scope of the appended claims should not be limited to the description of the embodiments contained herein.

Biomarker Candidates

The inventors identified eight biomarker candidates associated with the genes CAV1, EVX1, MCF2L, FGF1, WNT2, NCR2, EXT1 and SPAG4 which showed significant changes ($p < 0.05$) in methylation in target regions when normal and tumor-associated tissues are compared (Table 1). The CAV1, EVX1, MCF2L and SPAG4 regions showed hypermethylation, and the FGF1, WNT2, NCR2 and EXT1 regions showed hypomethylation.

TABLE 1

Gene	Location	Function	Fold Change	
			Microarray	Pyrosequencing
CAV1	7q31.1	Tumor suppressor gene candidate A negative regulator of the Ras-p42/44 MAP kinase cascade Negative regulation of JAK-STAT cascade A scaffolding protein within caveolar membranes	7.6	30% increased in tumor, 12% in tumor-associated, adjacent and distant
EVX1	7p15-p14	Sequence-specific DNA binding, transcription factor A role in the specification of neuronal cell types.	7.1	23% increased in tumor, 6-13% in tumor-associated, adjacent and distant
FGF1	5q31	Fibroblast growth factor receptor signaling pathway Positive regulation of epithelial cell proliferation Embryonic development, cell growth, tumor growth and invasion	0.77	11-15% decreased in tumor-associated, adjacent and distant
MCF2L	13q34	Rho guanine nucleotide exchange factor activity	4.5	8% increased in tumor, 5% in tumor-associated, adjacent and distant
NCR2	6p21.1	Increases efficiency of activated NK cells To mediate tumor cell lysis	0.6	11% decreased in tumor, adjacent and distant for high grade 5% decreased in tumor for intermediate grade
WNT2	7q31.2	Wnt receptor signaling pathway, calcium modulating pathway Implicated in oncogenesis and in several developmental processes (embryogenesis)	0.7	16% decreased in tumor, 5% in adjacent and distant for high grade 8% decreased in tumor for intermediate grade
EXT1	8q24.11	exostosin glycosyltransferase It is a putative tumor suppressor protein, involved in glycosaminoglycan biosynthesis, signal transduction, negative regulation of cell cycle, as well as skeletal development.	0.6	5% decreased in tumor, adjacent and distant histologically normal prostate tissue.
SPAG4	20q11.21	sperm associated antigen 4 Structural molecule activity, Spermatogenesis.	2.1	9% increased in tumor, 8% in adjacent and 12% distant histologically normal prostate tissue

By “gene loci” or “target region”, we mean the gene regions described in FIGS. 1-6 and 20-21. These are the gene regions in which we correlated either hypermethylation or hypomethylation with a prostate cancer field defect. FIG. 12 describes preferred primer sequences for determining methylation perturbations in these selected target regions. FIGS. 12 and 25 describes preferred primer sequences for determining methylation perturbations in these selected target regions.

In a second embodiment, by “gene loci” or “target region”, we mean the gene regions described in FIGS. 20-21. These are the gene regions in which we correlated either hypermethylation or hypomethylation with a prostate cancer field defect. FIG. 25 describes preferred primer sequences for determining methylation perturbations in these selected target regions.

EMBODIMENTS OF THE PRESENT INVENTION

In one embodiment, one can diagnose and/or treat prostate cancer in a human subject by detecting a prostate cancer field defect in histologically normal tissue biopsy specimens taken from men who may have prostate cancer. Based on the results of the detection methods described herein, the subject may be diagnosed with prostate cancer and/or treated for prostate cancer via conventional therapies. It is an advantage of the present invention that fewer biopsies are needed for the detection of prostate cancer. In a preferred embodiment, the presence of prostate cancer field defect can be detected based on only 1-2 core biopsy specimens taken from anywhere in the prostate. Preferably, one would examine one, two, three, four, five, six, seven or eight targets disclosed in Table 1. In addition, in individuals who have had a negative biopsy but whose PSAs continue to rise, analysis of the previously obtained specimens for methylation status in the target regions will direct whether additional evaluation needs to be performed. For example, if the methylation status in any of the target regions is abnormal, a more intensive biopsy set requiring anesthesia would be performed. If not, the patient can be reassured.

In one typical embodiment, prostate tissue samples are obtained via standard transrectal ultrasound and biopsy protocols using an 18 gauge needle (Brooks et al. (2010) *J. Natl. Med. Assoc.* 102(5), 423-429). In another embodiment, prostate tissues are obtained from paraffin blocks of prostate biopsy samples that have already been obtained and examined.

To examine the methylation status of the target regions, one would typically wish to obtain genomic DNA from the tissue samples. The purified genomic DNA is then typically subject to sodium bisulfite modification. We present data demonstrating the ability to obtain enough DNA for analysis using prostate tissue either fresh or paraffin-embedded (See FIG. 29).

In general, bisulfite modified DNA is subjected to PCR reaction containing a single or multiple pair(s) of primers and probes at specific gene loci of at least one of the CAV1, EVX1, MCF2L, FGF1, WNT2, NCR2, EXT1 and SPAG4 loci detailed in FIGS. 1-6 and 20-21. The DNA amplification and methylation quantification will be evaluated in one or multiple tubes included as part of a kit. In one embodiment, one would then subject the bisulfite DNA to Methylation-Specific-Quantitative PCR (MS-QPCR) such as MethyLight (WO 00/70090) or HeavyMethyl WO 02/072880). A typical kit for the Mehtylight assay of this embodiment would contain primers and probes of target regions detailed in

FIGS. 1-6, and 20-21, and wild type reference gene primers such as Beta-Actin, PCR buffer, dNTP, MgCl₂, polymerase, positive and negative methylation controls and a dilution reference. In another embodiment, the present invention is the amplification product described above. In a typical embodiment, the DNA targets are bisulfate-modified DNA. In another typical embodiment, the amplification product comprises the amplification product of 2, 3, 4, 5, 6, 7, or 8 of the targets combined in a vessel, such as a tube or well. Preferably, the DNA amplification product is at least 90% target DNA, most preferably 95% or 99%.

In another embodiment, the present invention is a combination of the bisulfite-treated DNA described above and materials useful to determine methylation status.

In another embodiment, one would subject the bisulfite DNA to PCR amplification to amplify at least one of the target regions detailed in FIGS. 1-6 and 20-21. The PCR products would be subject to pyrosequencing for detection of methylation. The kit for this assay would contain at least one pair of primers for target regions detailed in FIGS. 1-6 and 20-21, either forward or reverse primer is biotinylated, PCR buffer, dNTPs, MgCl₂, Taq polymerase for bisulfite DNA amplification. A sequencing primer and controls, which typically include positive and negative methylation controls and a dilution reference are typically also included.

In another embodiment, bisulfite treated DNA (initial PCR amplification is needed if bisulfited DNA is less than 20 ng) is subjected to an Invader® assay to detect changes in methylation. The Invader® assay entails the use of Invader® chemistry (Hologic Inc.; invaderchemistry.com; Day, S., and Mast, A. Invader assay, 2004; Chapter in Encyclopedia of Diagnostic Genomics and Proteomics. Marcel Dekker, Inc., U.S. Pat. Nos. 7,011,944; 6,913,881; 6,875,572 and 6,872,816). In the Invader® assay, one would use a structure-specific flap endonuclease (FEN) to cleave a three-dimensional complex formed by hybridization of C/T specific overlapping oligonucleotides to target DNA containing a CG site.

The kit for this assay would typically contain the primers and probes of single or multiple target regions detailed in FIGS. 1-6 and 20-21, and controls, which typically include a reference gene such as Beta-Actin, positive and negative methylation controls and a dilution reference.

In another embodiment, the PCR products are purified, denatured to single-strand and annealed to a sequencing primer for methylation quantification by pyrosequencing at the specific gene loci of at least one of the loci described above.

In all embodiments, one would examine the amplification products for a significant change in methylation pattern. One may examine several criteria to evaluate significant change. For example, a finding of $\pm 50\%$ of the fold-change listed in Table 1 in methylation values of at least one gene loci at one site selected from the group consisting of CAV1, EVX1, MCF2L, FGF1, WNT2, NCR2, EXT1 and SPAG4 would indicate the presence of a prostate cancer field effect. Significant change can also be any statistically meaningful change in methylation pattern relative to normal tissue from men with no history of prostate cancer. For example, significant change may be characterized by a p value less than 0.05. As described below, one may wish to use pyrosequencing as a quantitation method and evaluate the sample for the pyrosequencing percentage, as indicated in Table 1.

One may also wish to examine the change in methylation at specific CpG islands. (The Example below discloses specific characterization of CpG islands for the eight target regions.) Preferably, one would determine the methylation

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status of two, three, four, five, six, seven or eight of the gene loci detailed in FIGS. 1-6 and 20-21.

As described above, there are many techniques for measuring DNA methylation. For example, one can use Methylation-Specific-Quantitative PCR (MS-QPCR) or to measure DNA Methylation. (See: Eads C. A., MethyLight: a high-throughput assay to measure DNA methylation. *Nucleic Acids Res.* 2000 Apr. 15; 28(8):E32; 2. Darst R. P., Bisulfite sequencing of DNA. *Curr Protoc Mol Biol.* 2010 July; Chapter 7: Unit 7.9.1-17, and Cottrell S. E., et al., A real-time PCR assay for DNA-methylation using methylation specific blockers, *Nucleic Acids Res.* 2004; 32(1): e10.).

The Examples focus on a preferred method, but one of skill in the art would understand that other methods would be suitable. One simply needs to evaluate the methylation status of CpG islands within the target regions. Examples 1 and 2 below disclose methylation changes at specific CG rich regions, and we anticipate seeing similar changes in adjacent CpG islands not necessarily measured in Examples 1 and 2. Any change in CpG island methylation at one or multiple CG dinucleotides within this island, is considered a positive marker for prostate cancer field defect. One may wish to start with the expanded regions disclosed in Example 3 below.

Preferably, one primer within each set of primers is biotinylated, and the biotinylated PCR products are purified, or captured, with Streptavidin sepharose beads. In a preferred embodiment, one would use the primers detailed in FIGS. 12-25.

Preferably, the methylation is quantified with PyroMark™MD Pyrosequencing System (Qiagen) using PyroPyroMark® Gold Q96 Reagents (Qiagen, Cat#972804) (QIAGEN PyroMark Gold Q96 Reagents Handbook 08/2009, (36-38)). Other approaches for methylation quantification include, for example, methylation specific QPCR or quantitative bisulfite sequencing of methylation.

It is an advantage of the present invention that markers for prostate cancer can be detected noninvasively in bodily fluids, such as urine or semen. The bodily fluid screening method currently used is based on PSA levels in serum and has very poor specificity. Biopsies are more specific, but can produce significant clinical complications, including infection, bleeding and urinary retention. Therefore, in one preferred embodiment of the present invention, the methylation status of the target regions is determined from a urine sample.

In another embodiment, the present invention is a method of identifying biomarkers whose DNA methylation changes associate with high grade PCa, using the protocol described above and in the Examples below. By "high grade", we mean PCa with a Gleason Score 8-10 and a tumor volume of 25-80%. For example, a finding of $\pm 50\%$ of the fold-change in methylation values of at least one gene loci selected from WNT2 and NCR2 would indicate the presence of a high grade PCa field effect. Additional biomarkers for high grade PCa may be identified using the protocol described above and in the Examples below and may also be included in kits.

Generally, patient urine can be obtained, spun and the cell pellet utilized for DNA extraction using protocols as published (Yoshida et al., *International Journal of Cancer*, n/a-n/a; Mehrotra et al., (2008) *Prostate* 68, 152-160). One may wish to use DNA methylation urine-based screen for PCa disclosed below in Example 4. One would then analyze the genomic DNA samples as described above for solid

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tissue samples. Presence of methylation changes correlating to field effect diagnosis would be analyzed in the same manner as described above.

Generally, when pyrosequencing primers (such as the preferred primers in FIG. 12) are used, significant methylation changes of at least one of the eight target regions would indicate a prostate cancer field defect. In various embodiments, significant change is indicated by a value of at least $\pm 50\%$ of the pyrosequencing percentages shown in Table 1 or $\pm 50\%$ of the fold-level change in Table 1 or a $p < 0.05$ change in specific CpG island methylation patterns.

In a second embodiment, when pyrosequencing primers (such as the preferred primers in FIG. 12 or 25) are used, significant methylation changes of at least one of the two target regions according to SEQ ID NOs: 18 and 39 would indicate a prostate cancer field defect. In various embodiments, significant change is indicated by a value of at least $\pm 50\%$ of the pyrosequencing percentages shown in Table 1 or $\pm 50\%$ of the fold-level change in Table 1 or a $p < 0.05$ change in specific CpG island methylation patterns.

In a third embodiment, when pyrosequencing primers (such as the preferred primers in FIG. 12 and/or FIG. 25) are used, significant methylation changes of at least one of the eight target regions according to SEQ ID NOs: 1-6, 18 and 39 would indicate a prostate cancer field defect. In various embodiments, significant change is indicated by a value of at least $\pm 50\%$ of the pyrosequencing percentages shown in Table 1 or $\pm 50\%$ of the fold-level change in Table 1 or a $p < 0.05$ change in specific CpG island methylation patterns.

It is another advantage of the present invention that changes in methylation levels of the disclosed markers for prostate cancer can be detected in histologically normal prostate tissue or bodily fluid from men with no history of prostate cancer.

Yet another embodiment of the invention recognizes that the markers can also be used to monitor changes to the prostate as a result of future drug treatments that modify methylation or to assess the clinical severity of an at-risk or cancer patient.

In another embodiment of the present invention, one may wish to use evaluation of methylation status of at least one of the eight target regions for the diagnosis of other cancers, such as breast or colon cancer.

In another embodiment, the present invention is a method of amplifying on of the eight target DNA sequences comprising

(a) providing a reaction mixture comprising a double-stranded bisulfite converted target DNA and (i) at least one pair of primers selected from the group designed to amplify at least one gene selected from the group consisting of CAV1, EVX1, MCF2L, FGF1, WNT2, NCR2, EXT1 and SPAG4, wherein the primer pair comprises a first and a second primer that are complementary to the target DNA sequence, (ii) a polymerase and (iii) a plurality of free nucleotides comprising adenine, thymine, cytosine and guanine; (iv) PCR reaction buffer; (v) $MgCl_2$

(b) heating the reaction mixture to a first predetermined temperature for a first predetermined time to separate the strands of the target DNA from each other;

(c) cooling the reaction mixture to a second predetermined temperature for a second predetermined time under conditions to allow the first and second primers to hybridize with their complementary sequences on the target DNA and to allow the polymerase to extend the primers; and

(d) Repeating steps (b) and (c) at least 10 times.

In one embodiment, the primers are methylated. In another embodiment, the primers are not methylated. In one

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embodiment, one would use a primer pair designed to amplify one target. In another embodiment, one would use primer pairs designed to amplify 2, 3, 4, 5, 6, 7, or 8 target regions.

Kit Claims

In another embodiment, the present invention is a kit designed for PCa field defect detection. Typically, the kit comprises at least a set of primers, wherein the primers preferably comprise forward and reverse primers designed to amplify a target region selected from the group consisting of CAV1, EVX1, MCF2L, FGF1, NCR2, WNT2, EXT1 and SPAG4 target (SEQ ID NOs: 1-6, 18 and 39), or selected from the group consisting of SEQ ID NOs: 61-77 and 94-97, and other components essential for DNA amplification, preferably, polymerase, dNTP, buffer and a magnesium salt which can release Mg^{2+} . Typically, one can use $MgCl_2$ or $MgSO_4$. In other embodiments, the kit comprises primers designed to amplify two, three, four, five, six, seven or eight targets.

In one embodiment, the primers preferably comprise a forward primer selected from the group consisting of SEQ ID NOs: 43, 46, 49, 52, 55 and 58, and a reverse primer selected from the group consisting of SEQ ID NOs: 44, 47, 50, 53, 56 and 59, and other components essential for DNA amplification, preferably, polymerase, dNTP, buffer and a Magnesium salt which can release Mg^{2+} . Typically, one can use $MgCl_2$ or $MgSO_4$.

In a second embodiment, the aforementioned kit comprises an alternative set of primers, wherein the primers preferably comprise a forward primer selected from the group consisting of SEQ ID NOs: 88 and 91, and a reverse primer selected from the group consisting of SEQ ID NOs: 89 and 92.

In a third embodiment, the aforementioned kit comprises a combined set of primers, wherein the primers preferably comprise a forward primer selected from the group consisting of SEQ ID NOs: 43, 46, 49, 52, 55, 58, 88 and 91, and a reverse primer selected from the group consisting of SEQ ID NOs: 44, 47, 50, 53, 56, 59, 89 and 92.

In one preferred embodiment, the kit further comprises FAM or Hex fluorophore-labeled methylation and unmethylation-specific probes and is suitable for a closed tube assay for MS-QPCR. In another preferred embodiment, the kit further comprises sequencing primers and is suitable for bisulfite pyrosequencing-based assay. Preferably, the sequencing primers are selected from the group consisting of SEQ ID NOs: 45, 48, 51, 54, 57 and 60. Even more preferably, the kit further comprises Streptavidin sepharose beads, enzyme mixture, substrate mixture and dinucleotides.

In a second preferred embodiment, the kit further comprises sequencing primers selected from the group consisting of SEQ ID NOs: 90 and 93.

In a third preferred embodiment, the kit further comprises sequencing primers selected from the group consisting of SEQ ID NOs: 45, 48, 51, 54, 57, 60, 90 and 93.

In another embodiment, the kit comprises components for an Invader® assay to detect changes in methylation. The Invader® assay entails the use of Invader® chemistry (Hologic Inc.) which is composed of two simultaneous isothermal reactions. A primary reaction specifically and accurately detects single-base pair changes measuring methylation. A second reaction is used for signal amplification and result readout.

EXAMPLES

Example 1

Prostate cancer (PCa) is typically found as a multifocal disease suggesting the potential for molecular defects within

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the morphologically normal tissue. In Example 1, the inventors compared non-tumor associated (NTA) prostate to histologically indistinguishable tumor-associated (TA) prostate tissues and detected a distinct profile of DNA methylation alterations (0.2%) using genome-wide DNA arrays. Hypomethylation (87%) occurred more frequently than hypermethylation (13%). Analysis of TA tissues adjacent and distant from tumor foci revealed a persistence of this methylation defect. Further evaluation and validation of six loci distinguished TA from NTA patients. Still further evaluation and validation of two additional loci distinguished TA from NTA patients. The inventors found a subset of markers which were solely associated with the presence of high grade disease. These findings demonstrate a widespread methylation defect occurs in the peripheral prostate tissues of men with PCa that may be utilized to identify the presence of the disease.

Introduction

'Field cancerization', 'field effect' or 'field defect' were terms first utilized in head and neck tumors to describe an increased frequency of cancer development found outside the visible boundaries of the primary tumor¹. These genetically or epigenetically compromised cells in histologically normal appearing tissues have the potential to give rise to not only multifocal tumors, but additional cancers after therapy. Although described in colorectal, bladder and esophageal cancer (Jothy et al. (1996) Field effect of human colon carcinoma on normal mucosa: relevance of carcinoembryonic antigen expression. *Tumour Biol* 17, 7; Takahashi, T., et al. (1998) Clonal and Chronological Genetic Analysis of Multifocal Cancers of the Bladder and Upper Urinary Tract, *Cancer Research* 58, 5835-5841; Miyazato, et al. (1999) Microsatellite instability in double cancers of the esophagus and head and neck, *Diseases of the Esophagus* 12, 132-136; Ushijima, T. (2007) Epigenetic Field for Cancerization, *Journal of Biochemistry and Molecular Biology*, Vol. 40, No. 2, March 2007, pp. 142-150 40, 9), a field effect has not been clearly defined for prostate cancer (PCa). Features suggesting the presence of a field effect in PCa include regional multifocality at diagnosis, as well as the increased incidence with aging (Eastham, J. A., et al. (2007) Prognostic Significance of Location of Positive Margins in Radical Prostatectomy Specimens, *Urology* 70, 965-969). Defining an epigenetic field defect associated with PCa would have important clinical ramifications with regard to recurrence and recent interest in focal ablative therapies (Mouraviev, V., et al. Prostate cancer laterality as a rationale of focal ablative therapy for the treatment of clinically localized prostate cancer, *Cancer* 110, 906-910 (2007)).

PCa development and progression is driven by the interplay of genetic and epigenetic changes (Schulz, W. A. & Hoffmann, M. J. Epigenetic mechanisms in the biology of prostate cancer, *Semin Cancer Biol* 19, 172-180 (2009)). One important epigenetic process is the reversible methylation of cytosine at CpG dinucleotides, a sequence under-represented in the genome except at CpG islands (Brid, A. DNA methylation patterns and epigenetic memory, *Genes Dev* 16, 16 (2002)). DNA methylation regulates gene expression and participates in the nuclear organization of higher organisms. Alterations in DNA methylation are a hallmark of cancer. Typically, adjacent histologically normal tissues are the standard against which many genomic and epigenetic alterations in cancers are identified. In light of the relevance of a potential field defect to both molecular and clinical studies, little is known regarding its distribution and extent in PCa. In part, this has reflected a limitation of techniques for assessing DNA methylation at specific

sequences throughout the genome, as well as a lack of specimens without histological evidence of PCa.

In the Example below, the inventors utilized an immunocapture approach to enrich methylated DNA and combine this with DNA microarrays. During an evaluation of control tissues for genome-wide methylation profiles in cancer, the inventors found marked methylation changes in tumor associated (TA) histologically normal appearing prostate tissues extending across susceptible prostate tissues.

Results

Distinct Patterns of DNA Methylation Define Tumor Associated (TA) and Non-Tumor Associated (NTA) Prostate Tissues

As an initial study of the proper controls for cancer analyses, the inventors undertook an analysis of genome-wide methylation changes in histologically normal prostate tissues from men with cancer and compared those to men without cancer. We utilized 385,000 locus arrays based on the Encyclopedia of DNA Elements (ENCODE) 18 sequence that tiles a series of biologically significant regions in the human genome and includes all chromosomes except chromosomes 3 and 17. DNA was initially prepared from four TA and five NTA prostate specimens, digested with restriction enzymes and enriched for methylated DNA by immunoprecipitation (IP) with an antibody against 5-methylcytidine as described (User's, N.S.P.I.N. & Guide: DNA Methylation Analysis). Peripheral zone prostate tissues were utilized for these studies as PCa demonstrates a predilection for this region. We carefully evaluated all NTA specimens to confirm the lack of PCa within the prostate by both H&E staining in three dimensions and α -methylacyl-CoA racemase (AMACR) expression (FIG. 13). Furthermore, the proportion of epithelium to stroma was similar between tissue groups. After labeling, differential hybridization and scanning, we used a probe score cut-off of $-\log_{10} [p]$ range 2-10 to generate about 1,000 probes for each chromosome and a total of 18,101 probes. We then compared the $\log_2$ -ratios at individual probes for TA and NTA tissues to evaluate methylation.

Striking differences in methylation were noted when TA and NTA tissues were compared. With $P < 0.05$, 615 loci were identified to be differentially methylated in TA tissues, with 537 (87%) hypomethylated and 78 (13%) hypermethylated (FIG. 9A). Chromosome 15 demonstrated the greatest number of differentially methylated loci (1.13%) in TA tissues, followed by chromosome 20 (0.9%), 1 (0.57%) and 9 (0.51%). Across genomic regions specific areas demonstrated either hyper- or hypomethylation (FIG. 9B and FIG.

9C). Fold changes in methylation for TA vs. NTA prostate specimens ranged from 0.02-7.59 (data not shown).

Using more stringent statistical parameters ($P < 0.01$), the inventors identified 87 loci which showed significantly differential methylation in TA prostates. These loci were subject to unsupervised hierarchical clustering using TMEV software to generate a heat map. This global view of methylation profile clearly distinguishes TA from NTA prostate tissues (FIG. 9D). Among the 87 loci, 69 were hypomethylated and 18 hypermethylated in TA tissues (Table 2). Of these, 49 probes were associated with 38 genes and 38 probes were non-gene related. Accession numbers for these genes are listed in Table 3.

TABLE 2

Location of Differentially Methylated Probes			
Chromosome	Total Probe	Tumor-Associated vs Normal	
		Hypomethylation	Hypermethylation
1	5	P14KB (2), NR (3)	
2	3	ACCN4 (1), TRPM8 (1), NR (1)	
4	1		NR (1)
5	5	SEPT8 (2), FGF1 (1), NR (2)	
6	6	NCR2 (3), TFEB (1), NR (2)	
7	7	WNT2 (1), GRM8 (1), NR (1)	EVX1 (1), GRM8 (1), CAV1 (1), NR (1)
8	1	EXT1 (1)	
9	2	IER5L (1), NR (1)	
11	7	NRXN2 (2), NR (5)	
13	6	F7 (1), NR (2)	MCF2L (2), NR (1)
14	3	NR (3)	
15	11	TP53BP1 (1), MAP1A (2), FRMD5 (3), NR (1)	FRMD5 (2), SERF2 (1), NR (1)
16	3	RAB11FIP3 (1), NR (1)	DEC2 (1)
18	5	SERPINB2 (1), NR (3)	SERPINB8 (1)
19	3	LILRA5 (1), LENG12 (1)	CNOT3 (1)
20	8	GDF5 (1), CEP250 (2), ERGIC3 (1), FER1L4 (1), NR (1)	FAM83C (1), SPAG4 (1)
21	7	NR (6)	NR (1)
22	4	DEPDC5 (1), SYN3 (1), PISD (1), NR (1)	
Total	87	69	18

Significant methylated probes between normal and tumor-associated prostate were generated from Methylation array using a cut-off probes score $-\log_{10} [p]$ ranged from 2-10 to generate 18,101 probes in total, and then $\log_2$ ratio for these probes were compared between TA and NTA, t-test $P < 0.01$. Sixty-nine probes were hypomethylated, 36 probes related to 27 non-gene regions. NR represents not related to any gene.

TABLE 3

Gene Symbol	Gene Name	Accession #
P14KCB	Phosphatidylinositol 4-kinase, catalytic, beta	NM_002651 (SEQ ID NO: 7)
ACCN4	Amiloride-sensitive cation channel, pituitary	NM_182847 (SEQ ID NO: 8)
TRPM8	Transient receptor potential cation channel, subfamily M, member 8	NM_024080 (SEQ ID NO: 9)
SEPT8	Septin	AF440762 (SEQ ID NO: 10)
FGF1	Fibroblast growth factor 1 (acidic)	NM_000800 (SEQ ID NO: 11)
NCR2	Natural cytotoxicity triggering receptor 2	AJ010100 (SEQ ID NO: 12)
TFEB	Transcription factor EB	NM_007162 (SEQ ID NO: 13)
EVX1	Even-skipped homeobox 1	NM_001989 (SEQ ID NO: 14)
CAV1	Caveolin 1	NG_012051.1 (SEQ ID NO: 15)
WNT2	Wingless-type MMTV integration site family member 2	BC078170 (SEQ ID NO: 16)
GRM8	Glutamate receptor, metabotropic 8	NM_000845 (SEQ ID NO: 17)
EXT1	Exosoloses (multiple) 1	BC001174 (SEQ ID NO: 18)
IER5L	Immediate early response 5-like	NM_203434 (SEQ ID NO: 19)
NRXN2	Neurexin 2	NM_138734 (SEQ ID NO: 20)

TABLE 4-continued

Methylation Percentage Of All Analyzed CpGs For Each Gene																		
	CAV1			EVX1			MCF2L			FGF1			NCR2 ¹			WNT2 ¹		
	NTA	TAA	TAD	NTA	TAA	TAD	NTA	TAA	TAD	NTA	TAA	TAD	NTA	TAA	TAD	NTA	TAA	TAD
CG6	14.9	27.2*	26.4*	36.7	44.8*	40.6*	75.3	81.0	82.1									
CG7	18.9	28.0*	26.0				89.6	94.3	93.6									
CG8	8.25	15.4*	14.7*				57.8	57.2	55.8									
CG9	15.8	22.7	19.5				39.8	31.4	38.1									
CG10	17.9	26.7*	28.6*															

*P < 0.05

¹High grade tumor only

Specific Methylation Loci are Associated with a High-Grade PCa Field Defect.

An important issue in PCa is the early identification and treatment of lethal high grade PCa. The inventors Analyzed a subset of TA tissues that were associated with either intermediate or high grade cancer using pyrosequencing. When compared to NTA tissues, an analysis of NCR2 and WNT2 demonstrated significant hypermethylation and hypomethylation, respectively, in TA tissues associated with high-grade specimens (FIG. 11E-F). This was not seen in TA tissues associated with intermediate grade PCa.

Discussion

Research has theorized that a field defect may underlie the development of multifocal cancers (Slaughter D. P., Southwick H. W., Smejkal, W.; Field cancerization in oral stratified squamous epithelium; Clinical implications of multicentric origin, *Cancer* 6, 6 (1953)). Initial efforts in characterizing this process focused on genetic alterations (Braakhuis, B. J. M., Tabor, M. P., Kummer, J. A., Leemans, C. R. & Brakenhoff, R. H., A Genetic Explanation of Slaughter's Concept of Field Cancerization, *Cancer Research* 63, 1727-1730 (2003); Garcia, S. B., Park, H. S., Novelli, M. & Wright, N. A. Field cancerization, clonality, and epithelial stem cells: the spread of mutated clones in epithelial sheets, *The Journal of Pathology* 187, 61-81 (1999)), but more recently epigenetic changes have been proposed as a etiology (Hu, M., et al. Distinct epigenetic changes in the stromal cells of breast cancers, *Nat Genet* 37, 899-905 (2005); Wolff, E. M., et al., Unique DNA Methylation Patterns Distinguish Noninvasive and Invasive Urothelial Cancers and Establish an Epigenetic Field Defect in Premalignant Tissue, *Cancer Research* 70, 8169-8178). In the present study, we conclusively demonstrate, using unbiased methylation arrays, that significant changes in DNA methylation occur at specific loci within histologically normal tissues associated with PCa. Furthermore, these changes are widespread and not restricted to the immediate peritumor environment. These changes also permit a clear distinction between tumor associated and non-tumor associated prostate tissue.

To date, epigenetic profiling of tumor-associated histologically normal tissues has not been performed in solid tumors. Our genome-wide assessment of specific loci demonstrates that hypomethylation was seen more commonly than hypermethylation in TA prostate tissues. These changes occurred in 0.2% of the 385,000 loci studied. DNA hypomethylation may occur early in solid tumor carcinogenesis based on its identification in precancerous lesions, including prostatic intraepithelial neoplasia (Feinberg, A. P., Ohlsson, R. & Henikoff, S., The epigenetic progenitor origin of human cancer, *Nat Rev Genet* 7, 21-33 (2006); Suzuki, K., et al. Global DNA demethylation in gastrointestinal cancer

is age dependent and precedes genomic damage, *Cancer Cell* 9, 199-207 (2006)). This may lead to chromatin instability and contribute to the neoplastic phenotype. Our data extend these findings and suggest that epigenetic alterations may precede even the histologic changes identified with these precursor lesions. These DNA methylation changes may reflect diet and other environmental exposures (Richardson, B. C., Role of DNA Methylation in the Regulation of Cell Function: Autoimmunity, Aging and Cancer, *The Journal of Nutrition* 132, 2401S-2405S (2002); Mathers J C, S. G., Relton C L, Induction of epigenetic alterations by dietary and other environmental factors, *Adv Genet.* 71, 37 (2010)) and represent a potential avenue for prevention.

Epigenetic alterations limited solely to the immediate peritumor environment suggest a response of the surrounding tissue to the primary cancer. Single gene epigenetic studies have identified these changes in a subset of specimens adjacent to the primary PCa (Mehrotra, J., et al., Quantitative, spatial resolution of the epigenetic field effect in prostate cancer, *Prostate* 68, 152-160 (2008); Aitchison, A., Warren, A., Neal, D. & Rabbitts, P. RASSF1A promoter methylation is frequently detected in both pre-malignant and non-malignant microdissected prostatic epithelial tissues, *Prostate* 67, 638-644 (2007); Hanson, J. A., et al., Gene Promoter Methylation in Prostate Tumor-Associated Stromal Cells, *J. Natl. Cancer Inst.* 98, 255-261 (2006); Henrique, R., et al., Epigenetic heterogeneity of high-grade prostatic intraepithelial neoplasia: clues for clonal progression in prostate carcinogenesis, *Mol Cancer Res* 4, 1-8 (2006)). In contrast, in the present epigenomic profiling study, we found that these alterations consistently extended to regions distant from tumor foci. In bladder cancer, a disease also characterized by multifocality and recurrence, there is no dependence on distance from the primary tumor (Wolff, E. M., et al., Unique DNA Methylation Patterns Distinguish Noninvasive and Invasive Urothelial Cancers and Establish an Epigenetic Field Defect in Premalignant Tissue, *Cancer Research* 70, 8169-8178). A similar widespread field defect was demonstrated during evaluation of Insulin-like Growth Factor 2 (IGF2) loss of imprinting in peripheral prostate tissues (Bhusari, S., Yang, B., Kueck, J., Huang, W. & Jarrard, D. F., Insulin-like growth factor-2 (IGF2) loss of imprinting marks a field defect within human prostates containing cancer, *The Prostate*, 2011 Mar. 22). There has been recent interest in the treatment of PCa using focal ablative therapy (Mouraviev, V., et al., Prostate cancer laterality as a rationale of focal ablative therapy for the treatment of clinically localized prostate cancer, *Cancer* 110, 906-910 (2007)). The current findings suggest a field of susceptibility that might be utilized to help select patients who would be poor candidates for this approach.

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In the current study, we focused on a high-resolution genome-wide analysis of methylation status rather than on specific gene promoter regions. The ENCODE18 human genome project includes gene-enriched areas thought to be biologically significant, a fact that potentially may generate a bias in our analyses. The majority of probes fell within CpG islands (Saxonov, S., Berg, P. & Brutlag, D. L., A genome-wide analysis of CpG dinucleotides in the human genome distinguishes two distinct classes of promoters, *Proceedings of the National Academy of Sciences of the United States of America* 103, 1412-1417 (2006); Fatemi, M., et al., Footprinting of mammalian promoters: use of a CpG DNA methyltransferase revealing nucleosome positions at a single molecule level, *Nucleic Acids Research* 33, e176), but none fell into defined gene promoter regions. Hypermethylation within promoters has been linked to decreased gene expression (J Y, P., Promoter hypermethylation in prostate cancer, *Cancer Control* 17, 11; Cooper, C. S. & Foster, C. S., Concepts of epigenetics in prostate cancer development, *Br J Cancer* 100, 240-245 (2008)), but the function of CpG islands outside these regions remains uncertain. Given the potential for long-range epigenetic silencing, these changes may herald alterations in gene expression affecting distant regions (Clark, S. J., Action at a distance: Epigenetic silencing of large chromosomal regions in carcinogenesis, *Human Molecular Genetics* 16, R88-R95 (2007)), or, alternatively, reflect altered nuclear structure.

The current findings have several additional implications. PSA-based screening has been widely criticized for its failure to specifically identify lethal PCa (Adami, H.-O., The prostate cancer pseudo-epidemic, *Acta Oncologica* 49, 298-304). This study raises the possibility of using a tissue test, or potentially urine-based test, for the detection of disease (and specifically high-grade disease) based on abnormalities found in not only the tumor but in the associated TA tissues. This would be expected to demonstrate increased sensitivity by increasing the percentage of affected cells able to be detected. In addition, the assessment of alterations that occur in PCa have typically compared tumor to 'normal' tissues within the same prostate gland. The current study indicates that the histologically normal tissue from men who have PCa already contains methylation abnormalities, which may lead to an underestimation of epigenetic changes that exist in the associated cancers.

Example 2

Material and Methods

Tissue Samples

Samples termed non-tumor associated (NTA, mean 63, age range 55-81 years old) were obtained from organ donation or cystoprostatectomy. The presence of any associated PCa was ruled out by extensive histological evaluation. Tumor-associated (TA, mean 61, age range 57-64 years old) prostate tissues were obtained from patients who underwent radical prostatectomy for PCa (Table 5). This study was approved by the institutional review boards at the University Pittsburgh and the University of Wisconsin-Madison. A separate validation group of 14 NTA (mean 60, age range 55-70 years old) and 12 TA (mean 58, age range 53-64 years old) samples were also assessed.

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TABLE 5

Subject clinical and pathological characteristics					
	Methylation Array		Pyrosequencing		
	NTA	TA	NTA	TA	T, TAA, TAD
Number	5	4	14	11	26
Age (yr)	63 (55~81)	61 (57~64)	60 (55~70)	59 (51~67)	58 (44~69)
Tumor Volume (%)		6.3		5.1	27.1
Gleason grade					
Intermediate		4		6	16
High					10
Pathological stage					
T2				3	
T2a				1	1
T2b					2
T2c		3		6	14
T3a		1		1	2
T3b					4
PSA (ng/ml)		7.7		5.9	6.9

NTA: non-tumor-associated normal,

TA: tumor-associate,

T: tumor,

TAA: tumor-associated adjacent,

TAD: tumor-associated distant.

Stages for three patients are unavailable.

Intermediate: 3 + 3, 3 + 4;

High: 4 + 4, 4 + 5, 5 + 5.

To define the relationship of methylation to tumor foci, histological sections containing both cancer and normal regions were generated from 26 (mean 58, age range 44-69 years old) radical prostatectomy specimens under the direction of a genitourinary pathologist. Microdissection was performed to obtain tumor (T), normal tissue adjacent (2 mm) to tumor foci (TAA) and at a greater distance (10 mm, TAD) as previously described (FIG. 8) (Bhusari, S., Yang, B., Kueck, J., Huang, W. & Jarrard, D. F., Insulin-like growth factor-2 (IGF2) loss of imprinting marks a field defect within human prostates containing cancer, *The Prostate*, 2011 Mar. 22). The clinical and pathological characteristics of the PCa study population are presented in Table 5. Of these patients, 16 had an intermediate grade cancer (Gleason score between 6 and 7; tumor volumes 5-70%) and 10 had high grade cancer (Gleason score 8-10; tumor volumes 25-80%). Prostate specimens were confirmed to have no tumor by both H&E staining in three dimensions and AMACR expression. For AMACR analysis, RNA was extracted using an RNeasy Mini Kit (Qiagen, CA), and 300 ng RNA was reverse transcribed with Omniscript® (Qiagen, CA). Quantitative real time PCR for total AMACR was performed using primer sequences as reported³³ (incorporated herein by reference).

DNA Methylation Microarrays

Genomic DNA was isolated using the DNeasy Blood & Tissue kit (Qiagen, CA). DNA used for microarray analysis was additionally incubated with RNaseA for 30 mins at 37° C. to prevent any RNA contamination. Roche NimbleGen ENCODE HG18 DNA methylation arrays were utilized. These arrays contain 385,000 50-75mer oligonucleotides (probes) that cover biologically significant pilot regions of the human genome at 60-bp spacing.

Sample preparation for the microarray was performed following the manufacturer's protocol. Briefly, up to 6 micrograms of high-quality genomic DNA was digested with MseI (New England Biolabs, Ipswich, Mass.) to pro-

duce 200-1,000 bp fragments while keeping CpG islands intact, and was then heat denatured to single strand DNA fragments. Methylated DNA fragments were immunoprecipitated (IP) overnight at 4° C. with 1 µg of antibody against 5-methyl cytidine (Abcam, Cambridge, Mass.) and incubated with agarose beads for two hours. The DNA: antibody:bead mixture was digested with Proteinase K overnight at 55° C. before purified with phenol-chloroform. Methylated immunoprecipitated (MeDIP) DNA and flowthrough were validated with PCR primers specific for methylated and un-methylated regions as described by Weber et al (Weber, M., et al. Chromosome-wide and promoter-specific analyses identify sites of differential DNA methylation in normal and transformed human cells. *Nat Genet* 37, 853-862 (2005)). Enriched DNA was amplified with the WGA2 Kit (Promega, Madison, Wis.). The labeling of IP and input DNA, microarray hybridization and scanning were performed by NimbleGen (Reykjavik, Iceland) as described (Roche. NimbleGen Arrays User's Guide DNA Methylation Arrays Version 7.2, (2010). Data were extracted from scanned images using NimbleScan 2.4 extraction software (NimbleGen Systems, Inc.). The samples were assayed in duplicate.

Sodium Bisulfite Modification and Quantitative Pyrosequencing

Sodium bisulfite modification of genomic DNA was carried out using the EpiTect Bisulfite Kit (Qiagen, CA) according to the manufacturer's protocol. Bisulfite modified DNA was then amplified using PCR with either the forward or reverse biotinylated primer in preparation for Pyrosequencing (Jörg Tost, El Abdalaoui, H., and Ivo Glynne Gut., *Serial pyrosequencing for quantitative DNA methylation, BioTechniques*, 40, 6 (2006)). The PCR and sequence primers for Pyrosequencing were designed using PyroMark Assay Design 2.0 (Qiagen), and positioned on or adjacent to the probe sites which showed significant ($p < 0.01$) methylation changes. The analyzed regions for specific loci are listed in FIG. 10, while primer sequences are listed in FIG. 12. The biotinylated PCR products were captured with Streptavidin sepharose beads, denatured to single strand and then annealed to the sequencing primer for the Pyrosequencing assay. SssI methylase-treated bisulfite-converted DNA from HPEC (human prostate epithelial cell) and PPC1 cells were used as positive controls, and water substituted for DNA was used as a negative control. The methylation was quantified with the PyroMark™MD Pyrosequencing System (Qiagen, CA) within the linear range of the assay. All the samples were analyzed in at least two independent experiments, both in duplicate.

Data Analysis

Scaled $\log_2$ -ratio GFF file and P-value GFF file were used for microarray analysis. These were extracted from scanned images provided by Nimblegen (NimbleGen Systems, Inc.). The scaled $\log_2$ -ratio data is the ratio of the test sample and input signals co-hybridized to the array. Scaling was performed by subtracting the bi-weight mean for all features of the array. From the scaled $\log_2$ -ratio data, a fixed-length window was placed around each consecutive probe and the one-sided Kolmogorov-Smirnov (KS) test was applied to determine whether the probes were drawn from a significantly more positive distribution of intensity $\log$ -ratios than those in the rest of array. The resulting score for each probe is the $-\log_{10}$ p-value. The probe IDs were first chosen based on a p-value $-\log_{10} [p]$ that ranged from 2 to 10 resulting in around 1,000 probes on each chromosome and 18,101 probes in total. After statistical analysis comparing the $\log_2$ -ratios between the NTA and TA groups, significant

methylation differences between groups were determined using t-test ($P < 0.05$). Significantly changed probes were clustered by Java MultiExperiment View (MEV 4.6.2) with unsupervised Hierarchical Clustering (Saeed Al, B. N., Braisted J C, Liang W, Sharov V, Howe E A, et al., TM4 microarray software suite, *Methods in Enzymology* 411, 60 (2006)).

For quantitative Pyrosequencing, the methylation at each CpG site was expressed as a percentage. A t-test was used to test for differences between groups, $P < 0.05$ was considered statistically significant. The Spearman test was used to determine correlations, with significance set at $P < 0.05$; r represents the measure of the relationship between two variables, and varies from -1 to +1.

Example 3

CpG Islands

Based on the teachings of Examples 1 and 2, one can also check the CpG islands that are located in the promoter regions of the genes showing significant methylation changes correlating with PCa, preferably the region within about 5 kb upstream of the transcription start site (TSS), because the methylation of these CpG islands will change the gene expressions and affect gene functions. The inventors' primary research (data not shown) showed that one may wish to start with genes CAV1, EVX1, MCF2L and WNT2. The expanded regions of each of the six genes for preferred screening of methylation changes are detailed in FIGS. 14-19.

FGF1 and NCR2 do not have CpG islands within the promoter regions. For FGF1, the expanded regions for preferred screening of methylation changes would be 300 bps upstream and 1 kb downstream of the target region reported in Example 1, as well as about 5 Kb upstream of the translation start site ATG (detailed in FIG. 17). For NCR2 the expanded regions for preferred screening of methylation changes would be the region between exon two and three and the two CpG islands between exon four and five (detailed in FIG. 18).

Example 4

Development of a DNA Methylation Urine-Based Screen for Lethal PCa

As disclosed in Example 1, specific loci associated with field defect appear to be preferentially altered in lethal, high grade PCa, which is responsible for the majority of PCa deaths. Establishing the role epigenetic changes play in the development of lethal PCa can lead to better diagnosis and treatment of high grade PCa. We envision that epigenetic field defect characterized by changes in DNA methylation in histologically normal appearing cells within the prostate can be utilized to identify patients with lethal disease.

Introduction

In 2010, PCa was the most commonly diagnosed cancer in Wisconsin men (Fu V X, Dobosy J R, Desotelle J A, Almassi N, Ewald J A, Srinivasan R, Berres M, Svaren J, Weindrich R, Jarrard D F., Aging and cancer-related loss of insulin-like growth factor 2 imprinting in the mouse and human prostate, *Cancer Res.* 2008 Aug. 15; 68(16):6797-802), and is the second most common cause of cancer death (after lung cancer), with over 600 men succumbing to the disease (Jemal A, Siegel R, Xu J, Ward E., Cancer statistics, 2010. 1. *CA Cancer J. Clin.* 2010 September; 60(5):277-300). Over 70% of PCa deaths occur in men diagnosed with high grade (Gleason Score 8-10) disease or high volume

intermediate grade disease (Gleason Score 6-7), making the detection of these variants at an earlier time point critical (Stephenson A. J., Kattan M. W., Eastham J. A., Bianco F. J., Jr., Yossepowitch O., Vickers A. J., Klein E. A., Wood D. P., Scardino P. T., Prostate cancer-specific mortality after radical prostatectomy for patients treated in the prostate-specific antigen era, *J. Clin. Oncol.* 2009 Sep. 10; 27(26): 4300-5). Low volume (<10%) intermediate and lower grade cancers have a much more indolent natural history. Several striking features of PCa include its multifocality and marked increase in incidence with aging. These characteristics suggest a 'field defect' may be an important component in the etiology of PCa. To date, cancer diagnosis has focused on the finding of cancer cells, typically by biopsy, yet the presence of alterations associated with histologically normal prostate tissue is as yet an untapped resource in both the diagnosis and understanding of the etiology of this disease.

Over 600,000 diagnostic prostate biopsies are performed annually in the United States. The false negative rate is as high as 34%, and roughly 20-35% of patients sent for repeat biopsy are ultimately diagnosed with cancer (Djavan B, Zlotta A, Remzi M, Ghawidel K, Basharkhah A, Schulman C C, Marberger M. Optimal predictors of prostate cancer on repeat prostate biopsy: A prospective study of 1,051 men, *J. Urol.* 2000 April; 163(4):1144-8). Prostate biopsy is associated with risk of bleeding, urinary distress and hospitalization for infection that increases with each subsequent biopsy. Alternatively, patients whose biopsies are initially negative with an elevated PSA represent a serious clinical dilemma, and are at risk for additional evaluation costs and procedures, including saturation biopsy that is performed in the operating room under anesthesia. Men in this situation experience significant anxiety as well (Katz D A, Jarrard D F, McHorney C A, Hillis S L, Wiebe D A, Fryback D G., Health perceptions in patients who undergo screening and workup for prostate cancer, *Urology* 2007 February; 69(2): 215-20). The development of a non-invasive test to augment PSA screening would be of enormous benefit to society.

Currently utilized screening tests (serum prostate specific antigen (PSA) and digital rectal exam have only a modest predictive value (Strope S A, Andriole G L, Prostate cancer screening: Current status and future perspectives, *Nat. Rev. Urol.* 2010 September; 7(9):487-93). PSA isoforms add little specificity. Body fluids including semen and urine may contain molecular information regarding the presence of PCa. PCa and prostate epithelial cells are shed into biologic fluids, particularly when the prostate is subjected to physical manipulation, thus creating the potential for their noninvasive detection in either urine or expressed prostatic fluid. Attempts at detecting PC cells in urine by traditional cytology are thwarted by unacceptably low sensitivities, although specificities were consistently high (Fujita K., Pavlovich C. P., Netto G. J., Konishi Y., Isaacs W. B., Ali S., DeMarco A., Meeker A. K., Specific detection of prostate cancer cells in urine by multiplex immunofluorescence cytology, *Hum. Pathol.* 2009 July; 40(7):924-33). This is due primarily to low numbers of PC cells present in urine cytology preparations. Analyzing cells shed from the abnormal prostate bypasses this important hurdle and represents the first effort of its kind in prostate and many other cancers.

To date, one of the few field defect alterations found in both non-cancerous peripheral prostate tissue and in associated prostate tumors is our finding of a loss in the typical imprint of the IGF2 gene (Fu V. X., Dobosy J. R., Desotelle J. A., Almassi N., Ewald J. A., Srinivasan R., Berres M., Svaren J., Weindruch R., Jarrard D. F., Aging and cancer-related loss of insulin-like growth factor 2 imprinting in the

mouse and human prostate, *Cancer Res.* 2008 Aug. 15; 68(16):6797-802). We have demonstrated that this is not a peritumor phenomenon (i.e. adjacent response to the cancer), but is widely prevalent even in distant areas within the peripheral prostate (Bhusari S., Yang B., Kueck J., Huang W., Jarrard D. F., Insulin-like growth factor-2 (IGF2) loss of imprinting marks a field defect within human prostates containing cancer, *Prostate* 2011 Mar. 22). Our lab has expanded these studies to other epigenetic phenomenon and recently using a series of Nimblegen™ ENCODE18 Methylation Arrays, which survey the whole human genome, have identified 87 loci (out of 385,000 loci surveyed) that exhibit altered methylation ($p < 0.01$) in the peripheral prostate tissue of men who have the disease when compared to those that do not (FIG. 9D). Interestingly these methylation defects are found both in gene and relatively gene-free areas of the genome. To date, we have screened 16 of these loci and validated 6 (CAV1, EVX1, MCF2L, FGF1, WNT2 and NCR2) using quantitative bisulfite Pyrosequencing in an additional cohort of 40 patients (FIG. 11). Notably, we found that methylation at the WNT2 and NCR2 were associated with the field defect in high grade, but not intermediate grade, cancers (FIG. 11E-F). This striking finding suggests these high grade cancers may have a molecular fingerprint present in the adjacent normal tissues that could assist in the earlier diagnosis of the disease. Finally, analyses of associations between tumor volume, PSA, and the extent of methylation demonstrated a significant association between FGF1 and increased tumor volume ($P = 0.036$, $r = 0.4616$) (see Example 1). In addition to histological confirmation of the absence of cancer in these prostate tissues, we also performed AMACR expression analysis, a specific marker for the presence of PCa (Ananthanarayanan V., Deaton R. J., Yang X. J., Pins M. R., Gann P. H., Alpha-methylacyl-CoA racemase (AMACR) expression in normal prostatic glands and high-grade prostatic intraepithelial neoplasia (HGPIN): association with diagnosis of prostate cancer, *Prostate* 2005 Jun. 1; 63(4):341-6), to rule out contamination with cancer cells (data not shown). In sum, these data demonstrate that particular methylation changes occur at specific loci in tumor associated tissues and that several of these markers are altered preferentially in high grade cancers.

Significance

By defining these epigenetic changes one can leverage this information to improve diagnosis and cure of high grade PCa. This analysis has the potential to provide an assay that will decrease the morbidity associated with PCa diagnosis and improve prognostication. This panel of markers can be used on non-cancer prostate biopsy tissue to validate negative findings and decrease in the near term the number and frequency of biopsies being performed in men with elevated PSAs. In addition, we envision the application of these markers to develop a non-invasive urine test that can be used as an adjunct to further identify men with a higher risk lethal PCa. The approaches to achieve these goals are described in detail below.

Confirm that Methylation Alterations Associated with a Field Defect in High Grade/High Volume PCa can be Detected in the Urine (Prophetic Example)

Prostate cells are shed into the urine. Previous small studies have focused on cancer-specific methylation alterations in the urine (Fujita K., Pavlovich C. P., Netto G. J., Konishi Y., Isaacs W. B., Ali S., De Marco A., Meeker A. K., Specific detection of prostate cancer cells in urine by multiplex immunofluorescence cytology, *Hum. Pathol.* 2009 July; 40(7):924-33; Rogers C. G., Gonzalgo M. L., Yan G., Bastian P. J., Chan D. Y., Nelson W. G., Pavlovich C. P.,

High concordance of gene methylation in post-digital rectal examination and post-biopsy urine samples for prostate cancer detection, *J. Urol.* 2006 November; 176(5):2280-4) and have demonstrated feasibility, but lower sensitivity because of the presence of rare cancer cells. In contrast, normal prostate epithelial cells are found within the urine at a much higher rate (Fujita K., Pavlovich C. P., Netto G. J., Konishi Y., Isaacs W. B., Ali S., De Marco A., Meeker A. K., Specific detection of prostate cancer cells in urine by multiplex immunofluorescence cytology, *Hum. Pathol.* 2009 July; 40(7):924-33). We seek to evaluate methylation changes found in normal cells associated with prostate cancer to determine if these changes predict the presence of cancer within this biofluid. Notably, our markers are also abnormal in cancer cells.

We will take validated tissue markers (six markers disclosed in Example 1 and others validated from the above described experiments in this Example) and apply them to urine specimens from men undergoing prostate biopsy throughout Wisconsin. We will confirm that methylation differences can be detected in the urine from men with cancer versus those without.

We envision that prospective urine samples from 250 men with high PSA values undergoing prostate biopsy will be obtained after an 'attentive' digital rectal examination. Of these samples 100 will be obtained through the Wisconsin Network for Health Research (WNHR). A further control group of 50 age-matched controls seen in the urology clinic with normal PSA values will be consented, obtained and tested. Briefly, after prostate examination, 20 ml of the initial stream will be collected, mixed with EDTA and stored on ice as described (Rogers C. G., Gonzalgo M. L., Yan G., Bastian P. J., Chan D. Y., Nelson W. G., Pavlovich C. P., High concordance of gene methylation in post-digital rectal examination and post-biopsy urine samples for prostate cancer detection, *J. Urol.* 2006 November; 176(5):2280-4).

Genomic DNA will be extracted from the pellet using a column as above. DNA will then be sodium bisulfite treated and quantitative Pyrosequencing performed using our panel of loci CAV1, EVX1, MCF2L, FGF1 and NCR2, as well as additional markers validated from the above described experiments in this Example. Methylation of individual loci will be compared between the TA and NTA groups using two-tailed student's t-tests conducted at a significance level of 0.026 (a rough false discovery rate). Additional analyses will be performed using logistic regression to determine if multiple loci, total PSA, free PSA, PSA density, or age improves the ability to predict which individuals belong to the TA group. Assuming that 150 of the 300 subjects belong to the TA group and the other 150 belong to the NTA group, we will have at least 80% power for detecting as significant a 0.3557 standard deviation shift in the mean methylation value between groups. Further subgroup analyses will be performed based on tumor volume, age, pathologic stage, and cancer grade.

In conjunction with the above approaches, we will seek to develop alternate technologies to quantitate methylation to permit widespread application. The original Nimblegen methylation arrays allows detection of methylation at specific sites, but not at basepair resolution. However, complete analysis of the prognostic potential of these sites will require a thorough analysis of the entire locus to identify specific nucleotides where methylation is predictive of disease course. Although the pyrosequencing approach is an established technique within our laboratory, one of its limitations

is that it can only scan a limited number of methylation sites encompassing 100-300 bp within a single run and it is time consuming and expensive.

We will confirm alternate technologies which improve assay sensitivity and commercial applicability by: i) developing a methylation-sensitive qPCR multiplex approach based on amplification of multiple specific methylated loci (Campan M., Weisenberger D. J., Trinh B., Laird P. W. MethyLight. *Methods Mol. Biol.* 2009; 507:325-37), and ii) implementing direct sequencing of samples by utilizing next generation sequencing technology (available from the UW Biotech Center) to digitally detect methylation sites at basepair resolution. We will rely on methylation-specific priming combined with both methylation and unmethylation-specific fluorescent probes. This assay is faster with an accompanying ability to sensitively detect very low frequencies of hypermethylated alleles (Campan M., Weisenberger D. J., Trinh B., Laird P. W. MethyLight. *Methods Mol. Biol.* 2009; 507:325-37). Direct sequencing utilizes established sequence capture techniques (for 25-30 loci) and then methylation analyses as described (Gu H., Smith Z. D., Bock C., Boyle P., Gnirke A., Meissner A., Preparation of reduced representation bisulfite sequencing libraries for genome-scale DNA methylation profiling, *Nat. Protoc.* 2011 April; 6(4):468-81). Briefly, the Agilent Sureselect™ system will be used to capture approximately 50 kb nucleotides surrounding each of these loci (approximately 0.1% of entire genome) for at least 100 of the samples. The enriched samples can be barcoded and sequenced in a high-throughput fashion using the Illumina HiSeq™ instrument (or a similar alternate machine) at the UW Biotechnology Center (80 million reads/lane) to identify specific sites of methylation by comparing sequences with bisulfite-converted material, thus providing a digital readout on the percentage of methylation at a specific site in a given sample.

We anticipate being able to detect methylation differences at one or multiple loci in men that have cancer and specifically high grade cancer. By increasing the pool of markers validated in tissues, we will decrease the likelihood that significant markers will not be detected in urine. Given the markers in TA prostate tissues identified so far are also abnormal in the cancer themselves, we anticipate the sensitivity of this approach will be much higher than approaches with markers specifically altered in cancer (Fujita K., Pavlovich C. P., Netto G. J., Konishi Y., Isaacs W. B., Ali S., De Marco A., Meeker A. K. Specific detection of prostate cancer cells in urine by multiplex immunofluorescence cytology. *Hum. Pathol.* 2009 July; 40(7):924-33). Statistical analyses for the methylated loci will likely be improved by the use of PSA, family history, digital rectal exam in statistical analyses.

We perform roughly 500 prostate biopsies a year at UW providing a larger pool of urine samples if necessary. Obtaining urine samples from the Wisconsin Network for Health Research (WNHR) will validate our finding to patients throughout Wisconsin. Roughly 10 ug of DNA can be extracted from 20 ml of urine using this approach (Rogers C. G., Gonzalgo M. L., Yan G., Bastian P. J., Chan D. Y., Nelson W. G., Pavlovich C. P., High concordance of gene methylation in post-digital rectal examination and post-biopsy urine samples for prostate cancer detection, *J. Urol.* 2006 November; 176(5):2280-4). The presence of competing cells of other etiology (including bladder, kidney and WBC) may have altered methylation changes. If this is encountered we will seek to enrich for the prostate cell population by utilizing antibodies to anti-NKX3.1 as described (Fujita K., Pavlovich C. P., Netto G. J., Konishi Y.,

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Isaacs W. B., Ali S., De Marco A., Meeker A. K. Specific detection of prostate cancer cells in urine by multiplex immunofluorescence cytology, *Hum. Pathol.* 2009 July; 40(7):924-33). Given the cancer association of the markers identified, it would be unlikely other cell types will be altered in normal tissues from other sources.

Example 5

In an experiment analogous to Example 1, a subset of two genes was chosen for further evaluation, based on genomic location, putative biological function, extent of methylation and primer success in a separate validation using a set of 24 TA and NTA prostate specimens. Quantitative Pyrosequencing was employed to allow a more accurate evaluation of the extent of DNA methylation. Internal controls for the adequacy of bisulfite conversion were performed. Two loci, which were associated with the genes EXT1 and SPAG4 showed significant methylation changes ($P < 0.05$). The locus associated with SPAG4 was hypermethylated and the locus associated with EXT1 was hypomethylated. The location of the probes and CG's assessed by Quantitative Pyrosequencing are shown in FIGS. 23 and 25. The two loci in pyrosequencing are close or overlap the methylation array regions but sequences (FIG. 22) are different. The sequences listed in FIG. 20-21 have covered both array region (FIG. 22) and pyrosequencing regions. These data demonstrate that TA tissues have a methylation profile distinct from men without cancer (NTA) and that these changes alter specific regions of the genome.

Identification of a Widespread Methylation Field Defect in the Peripheral Prostate.

Preferential alteration in tissues adjacent to PCa tumor foci, i.e., field defect, suggests a peritumoral response. To evaluate whether tissues adjacent to PCa tumor foci are preferentially altered, the extent of field defect was assessed in 26 additional histologically normal tissues by looking at the methylation status of these two differentially methylated markers. The inventors micro-dissected normal tissues adjacent (TAA, 2 mm) and distant (TAD, >10 mm) from the main tumor focus for each of the specimens (FIG. 8). Histological 3-dimensional H&E staining and AMACR expression determined by qPCR were applied to rule out any contamination by tumor cells or the presence of high grade prostatic intraepithelial neoplasia (HGPIN), a putative cancer precursor (Ayala, A. G. & Ro, J. Y. Prostatic Intraepithelial Neoplasia: Recent Advances. *Archives of Pathology & Laboratory Medicine* 131, 1257-1266 (2007)). Increased AMACR expression was found in two NTA and three TA tissues that were subsequently excluded from further analysis (FIG. 13).

When compared to NTA tissues, hypermethylation of probes associated with SPAG4 and hypomethylation of EXT1 demonstrated significant changes in both TAA, as well as TAD tissues (FIG. 24 and Table 6). Notably, there was no difference in the extent of methylation seen at different distances from the tumor when TAA and TAD tissue sets were compared. Significant methylation changes were also seen in tumor samples when compared to NTA tissues for EXT1 and SPAG4, revealing a persistence of these changes in the associated cancer. These data indicate that the epigenetic field defect in the prostate is widespread and not solely localized to the immediate peritumor environment.

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TABLE 6

	Methylation Percentage Of All Analyzed CpGs For Each Gene					
	EXT1			SPAG4		
	NTA	TAA	TAD	NTA	TAA	TAD
CG1	39.4	34.7*	34.2*	13.5	21.4*	25.2*
CG2	28.3	24.1*	24.5*	15.9	25.4*	27.3*
CG3	38.2	35.1*	35.0*	16.1	18.7*	18.1
CG4	27.2	24.3*	24.0*	11.6	15.9*	15.6*
CG5	14.8	12.8	14.0	9.0	11.5*	10.8
CG6	32.5	36.3	38.5			

*P < 0.05

Example 6

CpG Islands

Based on the teachings of Examples 1, 2 and 5, one can also check the CpG islands that are located in the promoter regions of the genes showing significant methylation changes correlating with PCa, preferably the region within about 5 kb upstream of the transcription start site (TSS), because the methylation of these CpG islands will change the gene expressions and affect gene functions. The inventors' primary research (data not shown) showed that one may wish to examine genes EXT1 and SPAG4. The expanded regions of each of these two genes for preferred screening of methylation changes are detailed in FIGS. 26-27.

Both EXT1 and SPAG4 have CpG islands within the promoter regions. For EXT1, the expanded regions for preferred screening of methylation changes would be from 373 bps upstream to 84 downstream of transcription start site (TSS) FIG. 26 (SEQ ID NO:94). For SPAG4 the expanded regions for preferred screening of methylation changes would be from 1100 bps upstream of TSS through the first exon (SEQ ID NO:95), 1180 bps downstream of TSS (intron 1 and exon2, SEQ ID NO:96) and 3640 bps downstream of TSS (intron 9 and exon10, SEQ ID NO:97).

Example 7

DNA Methylation Urine-Based Screen for PCa

A widespread epigenetic field defect can be used to detect prostate cancer in patients with histologically negative biopsies (Truong et al., "Using the Epigenetic Field Defect to Detect Prostate Cancer in Biopsy Negative Patients" (2012) *J Urol*, in press). Prostate biopsies are performed on the patients who have elevated PSA levels. Prostatic massage will be given to each patient to increase the amount of prostate cells voided in the urine, and then voided urine will be collected from them. Those patients classified as having adenocarcinoma will be used in the positive biopsy samples, and the patients with this current biopsy negative and all previous negative biopsy will be used in the negative biopsy samples. The urine is centrifuged for 15 minutes at 1200 rpm at 4° C., the excess supernatant is removed and pellet at -80° C. immediately.

Genomic DNA from urine and biopsy tissue is extracted using Qiagen DNeasy Blood and Tissue Kit, Bench Protocol: Animal Tissues (Qiagen). The DNA is then treated with sodium bisulfite using the Qiagen EpiTect Bisulfite Handbook protocol (Qiagen, Valencia, Calif.) to modify the DNA to turn all the unmethylated cytosine to uracil. The bisulfite modified DNA is amplified by polymerase chain reaction

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(PCR) using gene specific primers, with either the forward or reverse primer biotinylated. The genes amplified include CAV1, EVX1, WNT2, MCF2L, NCR2, FGF1, EXT1 and SPAG4. Five microliter of the PCR products will be applied for Pyrosequencing to ascertain the actual percent methylation within the gene. The assay is run in a PyroMark™MD Pyrosequencing System (Qiagen). All samples are analyzed with two independent trials and t-test will be used to test for differences in methylation between the positive and negative

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biopsy urine samples with $p < 0.05$ considered statistically significant.

FIG. 28 shows methylation of the genes in urine from the patients who have either positive or negative biopsies for prostate cancer. We have tested the methylation for the six markers EVX1, CAV1, FGF1, MCF2L, WNT2 and NCR2. EVX1, CAV1, FGF1 and NCR2 showed significant methylation difference between the biopsy positive and negative groups, t-test * $P < 0.05$.

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<211> LENGTH: 1325

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 5

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 <212> TYPE: DNA
 <213> ORGANISM: Homo sapiens

<400> SEQUENCE: 7

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<211> LENGTH: 2857

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

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<212> TYPE: DNA

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<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 9

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<211> LENGTH: 2881

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 10

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<210> SEQ ID NO 11
<211> LENGTH: 3755
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

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<400> SEQUENCE: 11

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cgggctttta	tacggctcac	agacacccaa	tgaggaatgt	ttgttcctgg	aaaggctgga	480
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cctcaagaag	aatgggagct	gcaaacgcgg	tctcggact	cactatggcc	agaaagcaat	600
cttgtttctc	ccctggccag	tctctctga	ttaaagagat	ctgttctggg	tgttgaccac	660
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gtgcgcgtaa	ccccagccc	acagagcctg	aatttgtaag	caacttgctt	ctaaatgccc	780
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<210> SEQ ID NO 12

<211> LENGTH: 1000

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 12

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<210> SEQ ID NO 13
 <211> LENGTH: 2364
 <212> TYPE: DNA
 <213> ORGANISM: Homo sapiens

<400> SEQUENCE: 13

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<210> SEQ ID NO 14

<211> LENGTH: 1858

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 14

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<211> LENGTH: 2338

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 16

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<210> SEQ ID NO 17

<211> LENGTH: 3572

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 17

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<210> SEQ ID NO 18
<211> LENGTH: 1310
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

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<400> SEQUENCE: 18

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<210> SEQ ID NO 19
<211> LENGTH: 2724
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

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<400> SEQUENCE: 19

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gattacagaa aaaaaaaaaa aaaa 2724

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<211> LENGTH: 3535

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 20

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<210> SEQ ID NO 21

<211> LENGTH: 6456

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

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<211> LENGTH: 3075

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 22

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<211> LENGTH: 6236

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 23

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<213> ORGANISM: Homo sapiens

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 <213> ORGANISM: Homo sapiens

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<211> LENGTH: 1618

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 27

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gaatcgacat tctcatcaac tgtccagca gctcctgcgg tctccattc tgcaggtgcg	600
gccgggaact tcctgtgcc cgtggcgcc ttgtccttca acgccttcaa gaccgtgatg	660
gacatcgata ccagcggcac cttcaatgtg tctcgtgtgc tctatgagaa gttcttccgg	720
gaccacggag ggggtatcgt gaacatcact gccaccctgg ggaaccgggg gcaggcgctc	780
caggtgcatg caggctccgc caaggccgct gtggacgcga tgacgcggca cttggctgtg	840
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cctctggctt	cctacgtgac	gggggcccgtg	ctgggtggccg	atggcggggc	atggttgacg	1080
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aaaacactga	ggtgctccca	tctgtgcgtg	gcccagcagc	tgggatggtc	ctccagctgc	1560
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<210> SEQ ID NO 28

<211> LENGTH: 4273

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 28

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gccatggggc	tgcccccgcg	gcgccgccgg	gccgagggca	gctgagggcg	ggtgcgaaga	180
tgggcgagga	cagagcaggg	cccagagccc	agccccagca	gcccggggcg	cccgccgcgcg	240
cccggccgcg	ccgcccaggg	gatgcccgcg	cccgcgcgcg	cgccctgagc	gcctttgtct	300
gcccggccgc	cccttccgca	ccactagcct	ctcgggagca	tggcgctggc	cccgcgggcc	360
tcgcccccg	gctcggagcc	gcccggggcc	gaccgggagc	cggcgggggc	ggacggggcg	420
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cccgaaccgc	agtcccccgg	cctggatgag	cctgcgcccc	gggcccgtgc	agatggcggg	540
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aacgggcagc tgggctgcag tgaccccgct ttctcaccgc ccagtcgcac aaagcggtc	1620
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aagaccgggg ctgccaagg ggcagagggt ggtggagagg agaggagaa agggaagtcc	2820
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caggaggggg cctgtgcttc tcggggtctg cccccaggc acagcgggtg cccccgcag	3720
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ctggccaccc gctgcgtgtg tgtgcgcgcg cgtgtacgtg tggccccaca tccgcgcct	3840
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aatcagtgta aacttgagg agagatTTTT ctatcatgta gagtaggtat tttttataga	3960
ttgaagggtg atcaatTTTT taatactttc aagagaaaac tgtgtataca catgaaatat	4020
atatatatat atatatatat atatgtataa tatataaaga ctggcaccct gcctctctgt	4080
gccagggccc agccctgggt acatggcacc actcagcagt gctgtcactg taagcatgga	4140
ctcccaggag acagtgtggg aaacgctcct gctttaattc cccgagaaac ggctcttcct	4200
gcctggatgc aggagggcag gggccaccac agattaaagc tgttactgca caaaaaaaaa	4260
aaaaaaaaaa aaa	4273

<210> SEQ ID NO 29

<211> LENGTH: 1922

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 29

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ttcaagcatc tggcaaaagc aagccccacc cagaacctct tcctctcccc atggagcatc	180
tcgtccacca tggccatgggt ctacatgggc tccaggggca gcaccgaaga ccagatggcc	240
aagggtgctc agtttaatga agtgggagcc aatgcagtta ccccatgac tcagagaac	300
tttaccagct gtgggttcat gcagcagatc cagaagggtg gttatcctga tgcgattttg	360
caggcacaag ctgcagataa aatccattca tccttcctgt ctctcagctc tgcaatcaat	420
gcattccacag ggaattatTT actggaaagt gtcaataagc tgtttggtga gaagtctgcg	480
agcttcctggg aagaatatat tcgactctgt cagaaatatt actcctcaga accccaggca	540
gtagacttcc tagaatgtgc agaagaagct agaaaaaga ttaattcctg ggtcaagact	600
caaaccaaaag gcaaaatccc aaacttgta cctgaagggt ctgtagatgg ggataccagg	660
atggtcctgg tgaatgctgt ctacttcaaa ggaaagtggg aaactccatt tgagaagaaa	720
ctaaatgggc tttatccttt ccgtgtaaac tcggctcagc gcacacctgt acagatgatg	780
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tccactggct tggagctgct ggaagtgaataaacctatg acaaaactca caagtggacc	960
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ggacgggcca atttctcagg gatgtcggag aggaatgacc tgtttctttc tgaagtgttc	1140
caccaagcca tgggtgatgt gaatgaggag ggcactgaag cagccgctgg cacaggaggt	1200
gttatgacag ggagaactgg acatggaggc ccacagtttg tggcagatca tccttttctt	1260
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tgacaacctt attaatcatt tggctcttcta aaatgggata atgcccattt agattttcct	1560
tactatcagt ttatttttat aacattaact ttactttgt tatttattat tttatataat	1620

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ggtgagtttt taaattattg ctcaactgcct atttaattgta gctaataaag ttatagaagc 1680
agatgatctg ttaatttctt atctaataaa tgcctttaat tgttctcata atgaagaata 1740
agtaggtatc cctccatgcc cttctgtaat aaatatctgg aaaaaacatt aaacaatagg 1800
caaatatatg ttatgtgcat ttctagaaat acataacaca tatatatgtc tgtatcttat 1860
attcaattgc aagtatataa taaataaacc tgcttccaaa caacaataaa aaaaaaaaaa 1920
aa 1922

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<210> SEQ ID NO 30
<211> LENGTH: 1319
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

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<400> SEQUENCE: 30
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gggaagagga caactcaaga aacgtattct tctctcccat gagcatctcc tctgccctgg 180
ccatgggtctt catgggggca aagggaagca ctgcagccca gatgtcccag gcactttgtt 240
tatacaaaga cggagatatt caccgagggt tccagtcact tctcagtga gttaacagaa 300
ctggcactca gtacttgctt agaactgcc aacagactctt tggagaaaag acgtgtgatt 360
tccttcacaga ctttaaagaa tactgtcaga agttctatca ggcagagctg gaggagtgtg 420
cctttgctga agacactgaa gagtgacagga agcatataaa tgactgggtg gcagagaaga 480
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tccttggtga tgccatttat ttcaaggaa agtggaatga gcaatttgac agaaagtaca 600
caaggggaat gctctttaa accaacgagg aaaaaagac agtgcagatg atgtttaagg 660
aagctaagtt taaaaatggg tatgcggtg aggtacacac ccaggctcctg gagctgccct 720
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aaaaaaaaaa aaaaaaaaaa aaaaaaaaaa aaaaaaaaaa aaaaaaaaaa aaaaaaaaaa 1260
aaaaaaaaaa aaaaaaaaaa aaaaaaaaaa aaaaaaaaaa aaaaaaaaaa aaaaaaaaaa 1319

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<210> SEQ ID NO 31
<211> LENGTH: 2831
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

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<400> SEQUENCE: 31
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ccgacccccg tcgtcagaac aaccccgagg ccaactcccc aaccccaatt ccgcttcgag 120
ccgctatcgc gatagcgccc gggcccgagg cgcgagaaaa aggcggcgagg cgctcgccct 180

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ccccgectgt	cgcgatacgc	tctcagcgg	cggcgccagc	tctgtgctgt	ccgtctccaa	240
gagagtatga	agagagtgcg	tctgtagggc	aggggaagatg	gcggacaagc	gcaaactcca	300
aggtgagatt	gatcgctgcc	tcaagaaggt	gtccgagggc	gtggagcagt	ttgaagatat	360
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aaagaaggag	attaagaagc	tacaacggct	gagggaccaa	atcaagacat	gggtagcgtc	480
caacgagatc	aaggacaaga	ggcagcttat	agacaaccgc	aagctcattg	agacgcaaat	540
ggaacggttc	aaagttgtgg	aacgagagac	caaaacccaa	gcttacagca	aagagggcct	600
gggcttgccc	cagaaggtag	atcctgccca	gaaggagaag	gaagaggttg	gccagtggct	660
cacgaatacc	atcgacacgc	tcaacatgca	ggtggaccag	tttgagagtg	aagtggagtc	720
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cagcacccgc	ccagaaatca	aggcccttga	gcctctgagc	tccttgaagt	ccatggcgga	1920
acgggagcgc	atcagctctg	gcattgagga	ccctgtgcca	acgtgcacc	tgaccgagcg	1980
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caaggcccta	aagaagcagt	catggcgatt	ccacaccaag	tacatgatgt	ggttccagag	2400
gcacgaggag	cccaagaacca	tactgacga	gtttgagcag	ggcacctaca	tctactttga	2460
ctacgagaag	tggggccagc	ggaagaagga	aggcttcacc	tttgagtacc	gctacctgga	2520
ggaccgggac	ctccagtgc	accggccctc	ccctctaccc	acccctctcc	ccttgcatgc	2580

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tgatccccct gccaggtga gggccctgcc ctggaagact ggagggaggc cccaagccac	2640
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ccctgggggc cggggggcga gggtctcccc ctctctccct cccagtgag ggacattttt	2760
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aaaaaaaaa a	2831

<210> SEQ ID NO 32

<211> LENGTH: 1329

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 32

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atggcaccat ggtctcatcc atctgcacag ctgcagccag tgggaggaga cgccgtgagc	180
cctgccctca tggttctgct ctgcctcggg aacctctcca aagccacct ctgggtgag	240
ccaggctctg tgatcagccg ggggaactct gtgacctcc ggtgtcaggg gaccctggag	300
gcccaggaat accgtctggt taaagaggga agcccagaac cctgggacac acagaacca	360
ctggagccca agaacaaggc cagattctcc atcccatcca tgacagagca ccatgcaggg	420
agataccgct gttactacta cagccctgca ggctgggtcag agcccagcga cccctggag	480
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acctcaggag agaacgtgac cctccagtgt ggctcacggc tgagattcga cagggtcatt	600
ctgactgagg aaggagacca caagctctcc tggaccttg actcacagct gacccccagt	660
gggcagttcc aggccctggt cctgtgggc cctgtgacct ccagccacag gtggatgctc	720
agatgctatg gctctcagc gcatatctg caggatggt cagaacccag tgacctctg	780
gagattccgg tctcaggagc agctgataac ctgagtcctg caaaaacaa gtctgactct	840
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ggcttgatcc tgggtggtct tgggattctg atatttcagg attggcacag ccagagaagc	960
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<210> SEQ ID NO 33

<211> LENGTH: 2553

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 33

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<210> SEQ ID NO 34
 <211> LENGTH: 3191
 <212> TYPE: DNA
 <213> ORGANISM: Homo sapiens

<400> SEQUENCE: 34

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<211> LENGTH: 2383

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 35

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<210> SEQ ID NO 36

<211> LENGTH: 7814

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 36

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gggagactgt cttggggtag ggggttgga ggtgtgaac cgggagattg tgggggtccc    1020
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<210> SEQ ID NO 40
<211> LENGTH: 1455
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

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<400> SEQUENCE: 40

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<210> SEQ ID NO 41
<211> LENGTH: 4683
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

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<400> SEQUENCE: 41

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caagatgact tctctgcccc aagcttgga cagctaaagg gaaaaacagt gcaagatgag    60

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gtg						4683

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<211> LENGTH: 3047

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 42

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<210> SEQ ID NO 43
<211> LENGTH: 30
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

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<400> SEQUENCE: 43

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gggtaataatt tataagttta ataataaggt 30

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<210> SEQ ID NO 44
<211> LENGTH: 21
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

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<400> SEQUENCE: 44

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<210> SEQ ID NO 45
<211> LENGTH: 25
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

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<400> SEQUENCE: 45

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aagtttaata ataaggttat ggtag 25

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<210> SEQ ID NO 46
<211> LENGTH: 31
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

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<400> SEQUENCE: 46

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ggaggagagg aagttaggag ttataaagg a 31

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<210> SEQ ID NO 47

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<211> LENGTH: 27
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 47

caaatacaac ccaaaaccaa aaacaat 27

<210> SEQ ID NO 48
<211> LENGTH: 23
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 48

gaagttacga gtttataaag gat 23

<210> SEQ ID NO 49
<211> LENGTH: 24
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 49

ggatgggata gtgaagataa gagt 24

<210> SEQ ID NO 50
<211> LENGTH: 30
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 50

ttcaacatac tatcatctaa tcctttacac 30

<210> SEQ ID NO 51
<211> LENGTH: 22
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 51

tttttttaag gttatgtgat aa 22

<210> SEQ ID NO 52
<211> LENGTH: 30
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 52

gagttgagtt ttattttggg tattttgaag 30

<210> SEQ ID NO 53
<211> LENGTH: 29
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 53

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acccccaaat tactaaacta atatattcc 29

<210> SEQ ID NO 54
<211> LENGTH: 25
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 54

caaattacta aactaatata ttcca 25

<210> SEQ ID NO 55
<211> LENGTH: 28
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 55

gttgtgggag agtaagggtt ggaaataa 28

<210> SEQ ID NO 56
<211> LENGTH: 23
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 56

ctcatctcca ccccttcat ttt 23

<210> SEQ ID NO 57
<211> LENGTH: 15
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 57

cccccttcat tttct 15

<210> SEQ ID NO 58
<211> LENGTH: 26
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 58

ttttggaggt atagggtagg aaataa 26

<210> SEQ ID NO 59
<211> LENGTH: 24
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 59

aattcaaaat catccaaacc caaa 24

<210> SEQ ID NO 60
<211> LENGTH: 23
<212> TYPE: DNA

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<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 60

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<210> SEQ ID NO 61

<211> LENGTH: 200

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 61

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gggcacatctct gcaggcgctt cggtctccctc caccctctgt gagatgatgc actgcgaaaa 180

cattcgctct ccccggggacg 200

<210> SEQ ID NO 62

<211> LENGTH: 802

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 62

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cgcgaggacc cagcagctctg gcgccccac caccgcttgg aagatgacgg agggcccaag 120

actaatattc acgacagcca gaccacgctt attgtttaga aggaagctcc ctttgttctt 180

actttttaac caaagagaag cgaaaacatt tttttcctga tcacattttc accgacacct 240

gagccgacaa gccagctcct gggccccggc tcaggactcc tcgctctctc ctttctcggg 300

gccctgtcgc cgttgaaagg cccgctgcag gctggggagg gtgatcgggg ccgcgggcca 360

tctccccga gccggggggg cagactgcgg aggcaggccc cacacgcgcc gcttttcgga 420

gcccgggtttt cttcaggagc gaagctgttc cagctgacct gcgcgtctgg gggcctatgc 480

ccggcttccg attccattta aaacgacccg cgcattctat ctccgtcgcc tccccggggt 540

tccccccac cccctccgg cccgggccag gccagcccag ccccgcgga agccaagctg 600

ggagcttttg aagtcggag aatttcaatc cgagaggagc cggtggacc ggagcccgtc 660

gccccagcgg ggggaaggac ggggggcctg ccgtgtggca ggtgggggat ggggtgtccc 720

cgcccgagaga aatgagaagc cgccgggctt ggagcggcct ccacctcagc tgctatcacc 780

ccctctccgc tgtcatggga tt 802

<210> SEQ ID NO 63

<211> LENGTH: 200

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 63

ttttttgtct tctttccttt aaaaacccaa ccgctcttaa tgtgaggttg atgaaaggat 60

gtttttggaa gaagtgacat ttggttaaaa cgttttcccc ctaatgcgcc ggtggaaagg 120

ggcgggggtg ggtgtggttc cctaggctcc taagactggc cagtcagctt tgaaagagcg 180

gggcagaagt cgggagaggg 200

<210> SEQ ID NO 64

<211> LENGTH: 200

-continued

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 64

cttatgagtc aaacctctat gaacccaac cttttgtac tcggggaggc tgaaccctg	60
cccaaatag cgcggtgaaa gctactgcct tctcccaagt aggggcctcc agtactgcc	120
cagcaggggc cgcattcctg gcgcctcttc attcgaaaaa cctctttcca ggagacttcg	180
ctgattctga acgaatactt	200

<210> SEQ ID NO 65

<211> LENGTH: 400

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 65

actataaggg ggagtactgc gtcacctca tctttttatc cctttggcct tgctccgtgc	60
ctgaaagctc accacactgg aacgtccagg tgcacatgtg ccaactggaca ccgggatgtt	120
gccggatgct cttttggacg ctggaatgct ggtgcattgt tgccggatgc tggaatggtg	180
cacgcacgct ctgttgacg ctggaatgct ggtgcattgt tgccggatgc tggaatggtg	240
cacgcatgcc ctgttgact ctggaatgct ggtgcattgt tgccaaatgc cggaatggta	300
cacggatgct ctgttgacg ctggaatgct ggtgcattgt tgccggatgc tggaatggtg	360
cacgcatgct ctgttgacg ctggaatgct ggcgcattgt	400

<210> SEQ ID NO 66

<211> LENGTH: 1000

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 66

aaccacaaaa ggatagctgc ggttttgggc gaggagagct cagagagttt cttgcatatg	60
gccctgtgat ggcggccatg gccctgcata gacacgagct ggaatctgca ggtggcagcc	120
aggacgctgc gtgtgtcgag tgcacagtgt ggcttggcgc caaccatggc gaggggtgag	180
agccccgtgc ctgcagcgcg cgttccctc actgggtcct gcgtccttg gcaggcgatg	240
cccctgcggg gaggggctgg tccatccccg gccagccacg gacccacgca tggacccagc	300
gacccacgga cctgcttacc tgggcgcggc gcgggtgaca tgcggccaca cggaaggggc	360
gcgctgggct gctgcggcct ctgcagcttc tacacctgcc acggggcggc cggaggtaaa	420
gggaggcggc ggccaggcgc ggcccgcggg aggcagctgc actcgctcgg tccactcgcg	480
gcttcgcggc tgcccgcaaa ccaggagggc gtggagaccc ggaaccgggg ggaaggcgcg	540
gggcacttgt gcggcaccgc cggggctccc aggggacctc ggcggtgaca cgaatttcta	600
ggtgaccttg gcggtgacac gaatttctag gtgacctgtg tgatacacta ggtgacctag	660
tgacacaggt gacacttcca ggtgaccgcg gcggtgaccc gcggggctcc cagggtgacct	720
cgttggtgag ccccggggct ccccgacgac cgcggcggtg acacgcgggg ctcccagggtg	780
accccgggcg tgcaactcaca ggactcccag gtgacccgcg gtggtgacac accggggcgcg	840
gcgcgcgcgc cttccgcttc cgcgagccgc cccccgcgc ccccgggcgc agcgcgcgcgc	900
cccctcccgc tggcgcggaa ccaatcctgg gcagggaggc ggcggctgga ggctgaaagc	960
gtgcccgtgg cccctcccc gcctccgcgc cgcctccctc	1000

<210> SEQ ID NO 67

-continued

<211> LENGTH: 210

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 67

```

gcttctctcg tgctgcctc atattctggg ttctctccag agctcgctc cactgcctgc      60
cagtcagcag atggatgact ctgttcacct cagccgcgac acgccccaca gcgagtgcag    120
cagtcgtcct gccagatggg ctgctcctgg ctgcgtccat tctctcagta aatagcctct    180
ccattcatcc ttccggctcc tctatgccg                                     210

```

<210> SEQ ID NO 68

<211> LENGTH: 566

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 68

```

agccgctcct gtcattcttc cttctctctt ccccatcagc ctgcgaggga ctaaaagccg      60
gcgatttttc cttgctgtat ttctttcttt tttttttttt ttttttgaga cggagtctcg    120
ctctgtcccc caggctggag tgcatgggcc cgatctcagc tcaactgcaag ctccgcctcc    180
caggttcaca cttttctcct gctcagcct cccaagtagc tgggactaca ggccgccgcc      240
accgcgcccc gctaattttt tgtattttta gtagagacgg gggttcaccg agttagccag     300
gatggtctcg atctcctgac ctcatgacct gccacccctg gcctcccaaa gtgctgggat     360
tacaggcgctg agccaccgag ccgggcctgt ttctttctct tttttcttga gaccgagtct    420
cgctctgttg ccagggctgg agtacagtgg catgatctca gctcactgca acctctgtct     480
cccagggtta agcaattctc ctgcctcagc ctcccgagta gctgggacta aaggctcccg     540
tcaccaccgt tgcccagcta attttt                                     566

```

<210> SEQ ID NO 69

<211> LENGTH: 200

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 69

```

gattattttg gaatagcaca gggttttgtt tttttttcgt tttttggttt ttcttgagac      60
ggagtttcgc tgttgttgcg caggctggag tgcaatgcca caatctcagc tcatcacaac    120
ctccgcctcc cgggttcaag cgattctcct gcctcagcct cctgagtagc tgggattaca     180
ggcatgcgcc accatgcccg                                     200

```

<210> SEQ ID NO 70

<211> LENGTH: 340

<212> TYPE: DNA

<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 70

```

cctccttcac gggatttcca cattgcttac acagtgcagc ggattaaaaa caaaactaaa      60
ggctgggcgt ggtggctcac gcctgtaatc ccagcacttt gggaggctga ggccgggtgga    120
tcacgaggtc aggagatcga gaccatcttg gctaacacgg tgaaaccccc tctctactaa     180
aaatacaaaa aattagccgg gcgcggtggc aggcgcctgt agtcccagct actcaggagg     240
ctgaggcagg agaatggcgt gaacctggga ggccgagctt gcagtgcgac gagattgtgc     300
cactgcgaatc cggcctgggc taaagagcgg gactccgtct                                     340

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<210> SEQ ID NO 71
<211> LENGTH: 200
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 71

atgtattgat gatcacattc actactcaca cttacaaagt acagctccca ggccgggccc 60
gggtggcttac gcctgtaatc ccagcacttt gggaggccga ggcaggcgga tcacgaggtc 120
atgagttcaa gaccagcctg gccaacatgg tgaaacccca tctctactaa aaatataaaa 180
attagcctgg tgtggtggcg                                200

<210> SEQ ID NO 72
<211> LENGTH: 200
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 72

gttgtgaact tgtgtttttc cgttttatat gtatatgcca cttgtttttt tgttttgttt 60
tatttcgttt tgaggcgagg tctcgtctcg tctggagtgc agtggtgcaa tctcggtcca 120
ctgcaacctc cacctccagg gttcaagcga ttctcctgcc tcagcctccg gtgtagctgg 180
gactacaggc gcctgccacc                                200

<210> SEQ ID NO 73
<211> LENGTH: 200
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 73

aagtagctgg gattacaggc gcctgctacc acgcctggct aattttttgt attttagtag 60
agacgtggtc tcaccatggt gcccaggctg gtctcaaaact cctgacctca agtgatccac 120
ctgcctcggc ctccaaaact gccgggatta caggcgtgag ccaccacgcc tggccgctaa 180
caagtaattt taaagtatca                                200

<210> SEQ ID NO 74
<211> LENGTH: 200
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 74

tttaactttt gaacttttcc gaagctttcc atattttcta tgtcctccaa gtgcccatca 60
tatcttttat tttctctttt cattgacctc tgtctttctt cagagctttc tggaacett 120
tgccgcttct cggccaccca cttgcttaga agcccatgc gggccgctgg gtgctgtggg 180
ctccaggcgg attgggcggg                                200

<210> SEQ ID NO 75
<211> LENGTH: 200
<212> TYPE: DNA
<213> ORGANISM: Homo sapiens

<400> SEQUENCE: 75

ccagaatccc aactcagtaa gaccttgtaa atccatgaca ttagecccaa ttccactcg 60
tcccaaatcc cataaccttt ccacctgca cctgaagtgc gcagtcacca gcacaagctc 120
ctgtatgctc agcttctctg aacgtcaccg cggctactct cctgacatct gcctgttctc 180
cgaggacaat gctttctccg                                200

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<210> SEQ ID NO 76
 <211> LENGTH: 1002
 <212> TYPE: DNA
 <213> ORGANISM: Homo sapiens

<400> SEQUENCE: 76

```

gccaaaccacc tttcttttcc taagtgtctg gatttacttc aagaaaatgc gggacaaaga      60
aggggtggagg taagctttcg tttattcccc tgcttcacgg gggaaggagg tttgtgagca      120
taagcatgta agtacatgag aggcgtgttg ctctttggtg cctatcatac cctccccatg      180
gccggcgtgc acacacggcg agcagaaacg ctcccccgcc ccgctgcctg ccgccccacg      240
cgccctccct gcacctcccg ccgaccgac gcagaccaag cagaacttcc ctgggtcgcg      300
gcccagcgat acggagcggc cctggcgagg agccctgtct tccccgagtc gtgggtggcg      360
cgggtcctgt ttccctcccc tccctttccg gacccaaacg gggatgtatc tgggtcagcc      420
tgggagggggc cggacctgcc agggaccagc gtgggggaag ggggtggcga tgacagcatc      480
tttcagggtt ttggcgtctc tgagcttcgc ctctccagc ctctaccgc gctcgtgcc      540
ggcgagggct gacgtcttgg ccagtcacagg cccgagggtg ggctggagag agggagagcc      600
cgtcttccg atctggggcg cacccttcc cccacgccct gcgaacaatt cgctccac      660
acatacacac aggcgcatac tctattcccc agagcacgct cctcgggcgg gcagtgagtc      720
cctccgcccc aggaaaagag caatggaaca gtacacggcc gccacgagtt cctgggtctc      780
cttcttttcc ggtgataaac ggcgcggtta caagccagct actgctcaaa atgctccacc      840
cgcgggccca agccctctc tcttggttgg gcggggggcc aggtccagga ccgagggtcc      900
cttaacctcc acaaggcgca caggctgagc gccagggcgg caggaggtgc aaggcgcac      960
accccgggcg aacgcctggc tgctcggtt cctctctatg tg                                1002

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<210> SEQ ID NO 77
 <211> LENGTH: 400
 <212> TYPE: DNA
 <213> ORGANISM: Homo sapiens

<400> SEQUENCE: 77

```

atagacgcgg cagctccaaa tttacaagtg ctagctcttc atcccagctt caggagagaga      60
agcgaagcaa tgagttgaga atcatctctg gattcttgta tcccatgcat agtaatctcc      120
ttatcccctg gcccccttcc tcgtttctc acattgcacg ctccaggact tgtttgccag      180
cggatggcct cggcaatccg gaacgcacgc tccgagagcc caccgatgct ctttgccctg      240
gagcttccct aaagggttct gtattcgctg gtgctcgtaa ccatgcagcg atgttcccc      300
ttccccgcct cacctcatcc ccagacatct cttgccatca tttcatgcac ccgtgtctaa      360
aaccgcgcgt ttctccccac ccccgccagg cgcagcacc      400

```

<210> SEQ ID NO 78
 <211> LENGTH: 50
 <212> TYPE: DNA
 <213> ORGANISM: Artificial Sequence
 <220> FEATURE:
 <223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 78

```

atcgacctgg tcaaccgga ccctaaacac ctcaacgatg acgtggtcaa      50

```

<210> SEQ ID NO 79
 <211> LENGTH: 50

-continued

<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 79

ttgtcacttc cggggttcg cggcgccagg tcggaaatgg tcccaatggt 50

<210> SEQ ID NO 80
<211> LENGTH: 50
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 80

tcttctctcg gggaggaggc gtggtcgga gcagacgtga cttctgtttt 50

<210> SEQ ID NO 81
<211> LENGTH: 50
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 81

acaagctatg ataagtctg tgaaggttgt gccaaaggct ggggggatgg 50

<210> SEQ ID NO 82
<211> LENGTH: 62
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 82

gtttcctcac ctgtagagag agaaatatta tatcacactg ttgcaaggac taagataagc 60

ga 62

<210> SEQ ID NO 83
<211> LENGTH: 52
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 83

gtttcctaag tttcctcaa actctgtctg catccgcaca tttgatctct ag 52

<210> SEQ ID NO 84
<211> LENGTH: 50
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 84

ttataatcag ggaagggcac tgtacacaag cccagtgagt agaaaggctg 50

<210> SEQ ID NO 85
<211> LENGTH: 57
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

-continued

<400> SEQUENCE: 85

cggcagaagc tggcattaca ttctaaagaa cggggaaatc gttattcaat tagagat 57

<210> SEQ ID NO 86

<211> LENGTH: 50

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 86

caccatcctc ccggcatgtg gatatgggta tcaacctgga ggctctccaa 50

<210> SEQ ID NO 87

<211> LENGTH: 50

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 87

atctgattga gtcattgttg caagagctgg gtctaggacc ctgggggtggg 50

<210> SEQ ID NO 88

<211> LENGTH: 30

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 88

taggagttag agattagttt ggtaatatg 30

<210> SEQ ID NO 89

<211> LENGTH: 30

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 89

ccaaattttt aaaacaaaat ctactctat 30

<210> SEQ ID NO 90

<211> LENGTH: 19

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 90

caactcacta caacctcca 19

<210> SEQ ID NO 91

<211> LENGTH: 26

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 91

ggtaggagaa gtgttggtta gtatgt 26

<210> SEQ ID NO 92

<211> LENGTH: 20

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<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 92

cctaaaccca actcttacca                20

<210> SEQ ID NO 93
<211> LENGTH: 24
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 93

ttagtatgta taggttagag gaag          24

<210> SEQ ID NO 94
<211> LENGTH: 458
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 94

cgctctcccc gcgggcagtg ccggccccga gcagcgettc gcagggcccc gcgcgaacgc    60
tgccgaccgc cgcgttcggt cgccgaatgt taccgggttc tgaatgttac acttacacat    120
tccattcccg acacgacagc gctgacctca tccatccacg cagcccgcgc tgccattggc    180
cgagcgtcac gtcggggggg ggcggtgctt ccgctgcgcc cattcataac ccccgggcgc    240
gggcccaggg gccggcgcgg cgttgggggc gtagggggcg cagggagccg gggctcccgg    300
gttgcaagct gccggcgggc tgccgggcag gtggagcgcg ggacggcccc gtgcgagccc    360
cgcgccccct cggcgcgccc aggcccgcat ctgcgcctgc gccgtgccgg ggaccagagg    420
cgcttcgcca aacgcggcgg ccggggaagg aggcaccg                458

<210> SEQ ID NO 95
<211> LENGTH: 2190
<212> TYPE: DNA
<213> ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 95

gaggtcagga gttcacgacc agcctggcca acatggtaaa acccgtctc tacaaaaata    60
caaaaattag ccaggcatga tggcgggtgt ctgtaatccc aactactcg gaggtgagg    120
caggagaatc gcttgaaccc gggaggcgga ggttgactg agccgagatt gcactactgc    180
cctccagcct gggcgacaca gcaggactct gtctcaaaaa ataaaaataa aataaaaaata    240
aaaatgctgg gcgcagtggc tcatgcctgt aatcccagca cttaggagg ccggggcggg    300
tggtacacct gagatcgga gttcaagacc agcctgacta acatggagaa acccgtctc    360
tactaaaaat acaaaattag ccaggcatgg tgggtcatgt ctgtaatccc agccactcag    420
gaggctgagg cgggagaatc gcttgaaccc gggaggcgga ggttgactg gaccaagatc    480
gcgccattgc actccagcct gggcaacaga atgagactcc atctcaaaaa aaaaaaaaaa    540
agaaagaaag aaagaaagaa agaagaaag aaagaaagaa agaaagaaag aaagaaagaa    600
agaaaaaac tggtatagac tgagtcccat ttagatggg gttttctggg aagtgtgtg    660

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acatcatcgc ttgctgtaaa agaggccggg cgcggtggct gacgectgta ctcccagcgc	720
tttgggaggc cgaggcggga ggatcgttg agcctaggag ttcgaagta caatgagcta	780
tgatcaggcc actgcactcc agcctgggca atgagaaaga ccctgtctct taaacaacaa	840
caaagtcaga aggagaggct gccatggcta cggctccagg tgacgtcacg gccagctccg	900
tgacgcgcgg ccagggcagc ccgcggagac cgaggctcct ctgtgacgtc agcagccggc	960
cgggacacag cgggagggca ggtgcggccg cggggcctgc cgacttcacg cagggtccgt	1020
ggggctcccc cggcgcgcag cggctgaagg agggcccagg gccttgccga ccgcagcggc	1080
ggcttttagc tcagtgacta ggcagcaggg ggtcaggatg cggcgaagct cccgcccggg	1140
ctcggcctcg tcctgcgcga agcacacgcc caacttttct agcgagaaca gctcaatgag	1200
catcacctcg gaggacagca aagggtctcg gtcagcggag cccgggcctg gggagccga	1260
gggcagaaga gcccggggcc cgagctgcgg tgagcccgc ttgagcgcgg gagtgcgccg	1320
aggaaccaca tgggcaggaa gctctcagca gaagccagcg cctcggagcc acaactggca	1380
gacagcctgt ggcgcggcaa ccgtgagggg cggggcctcg ggtgcgggcg gggtcgaccc	1440
cgggtgagcc agtgagggg gcggggccta aagggcggtg ctgggcgggg acggggctaa	1500
gatgatattc gggcacctcc tacaagggtg gtcctgtagg gtaaagggat ggtgctaaat	1560
gagatccctt aaggggcgga gcctcgggtg cctggacggt tatgggaagg ggcggggaaa	1620
atcttggtgt tgggtgccac tgaggggcg cggcctcaat gttagcgtga gtggctccca	1680
ggacaatttg gttccaccaa gatctaaggc tggggcgggg tcatccgttt gggggaggga	1740
ccaactcttt tttttttttt ttgcaacgg agtttcgctc ctgttgccca tgccatgcaa	1800
tggcatgac tcggctcacc gcaacctccg cctcccgggt tcaaacgatt ctcccgcctc	1860
agcctcccga gtactcggga ttacaggcgt gcgccaccat gcccgcccaa tttttgtgtt	1920
tttagtagag acgggggttc tccgtgttaa tcaggctggc ctcgaaactc cgacctcagg	1980
tgatccgccc gcctcggcct cccaaatcgc tgggattaca ggctgagcc accgcgcccg	2040
gccaggagac caactcttga cggagcctcc ctgaggggcg gggcttcaga gggcggagct	2100
ggagccggga tagggctgcg gtgggaccaa agcctgtgag agacttccca gctgtctggc	2160
ttgtggactg agcaatctgc ggcccggctc	2190

<210> SEQ ID NO 96

<211> LENGTH: 282

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

<400> SEQUENCE: 96

cggcccggtc tcgaggggaa aataggtctg tggtcgcga gggcccagtg gagcccttgg	60
gttcccgcag aaccgactgg gtctccagta gtctctgagg agccgctcga cttctccccg	120
accctggatc tgaggcagga gatgcctccc ccgcgggtgt tcaagagctt tctgagtacg	180
ggccaggcca gctcgcgac cctctgaccc tcgggttccc ctctccgaac tccagttctc	240
tctgagcccc cggcccccggt ttgagtatcg agcccctctc cg	282

<210> SEQ ID NO 97

<211> LENGTH: 234

<212> TYPE: DNA

<213> ORGANISM: Artificial Sequence

<220> FEATURE:

<223> OTHER INFORMATION: synthetic oligonucleotide

-continued

<400> SEQUENCE: 97

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ggggccgagt gcagctgagc gacatcactc tgcagcatcc accgccacgc gtggagcaca      180
ccggaggagc caacagcgcc ccccgcgatt tcgcggtctt tgtgagtgcg gacg          234

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We claim:

1. A method of amplifying at least one of the eight target DNA sequences comprising the steps of:

- (a) providing a reaction mixture comprising: (i) a double-stranded bisulfite modified target DNA; wherein the target DNA is from histologically normal prostate tissue of the a subject and (ii) at least one pair of primers selected from the group designed to amplify at least one gene selected from the group consisting of SEQ ID NO:1, EVX1, MCF2L, FGF1, WNT2, NCR2, EXT1 and SPAG4, wherein the primer pair comprises a first and a second primer that are complementary to the target DNA sequence, (iii) a polymerase and (iv) a plurality of free nucleotides comprising adenine, thymine, cytosine and guanine;
- (b) heating the reaction mixture to a first predetermined temperature for a first predetermined time to separate the strands of the target DNA from each other;
- (c) cooling the reaction mixture to a second predetermined temperature for a second predetermined time under conditions to allow the first and second primers to hybridize with their complementary sequences on the target DNA and to allow the polymerase to extend the primers; and,
- (d) repeating steps (b) and (c) at least 10 times wherein an amplified target DNA sample is formed.
2. The method of claim 1 wherein (v) PCR reaction buffer and (vi) MgCl₂ are additionally added to step (e).
3. The method of claim 1 wherein the primers are methylated.
4. The method of claim 1 wherein the primers are not methylated.
5. The method of claim 1 wherein the primer pairs are designed to amplify one target.
6. The method of claim 1 wherein the primer pairs are designed to amplify 2, 3, 4, 5, 6, 7, or 8 gene targets.

7. A method of amplifying at least one of the seven target DNA sequences comprising the steps of:

- (a) providing a reaction mixture comprising: (i) a double-stranded bisulfite modified target DNA; wherein the target DNA is from histologically normal prostate tissue of the a subject and (ii) at least one pair of primers selected from the group designed to amplify at least one gene selected from the group consisting of EVX1, MCF2L, FGF1, WNT2, NCR2, EXT1 and SPAG4, wherein the primer pair comprises a first and a second primer that are complementary to the target DNA sequence, (iii) a polymerase and (iv) a plurality of free nucleotides comprising adenine, thymine, cytosine and guanine;
- (b) heating the reaction mixture to a first predetermined temperature for a first predetermined time to separate the strands of the target DNA from each other;
- (c) cooling the reaction mixture to a second predetermined temperature for a second predetermined time under conditions to allow the first and second primers to hybridize with their complementary sequences on the target DNA and to allow the polymerase to extend the primers; and,
- (d) repeating steps (b) and (c) at least 10 times wherein an amplified target DNA sample is formed.
8. The method of claim 7 wherein (v) PCR reaction buffer and (vi) MgCl₂ are additionally added to step (e).
9. The method of claim 7 wherein the primers are methylated.
10. The method of claim 7 wherein the primers are not methylated.
11. The method of claim 7 wherein the primer pairs are designed to amplify one target.
12. The method of claim 7 wherein the primer pairs are designed to amplify 2, 3, 4, 5, 6, or 7 gene targets.

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