

# 1 TRAFIKK: systematic prediction and mechanistic 2 interpretation of anticancer drug synergies

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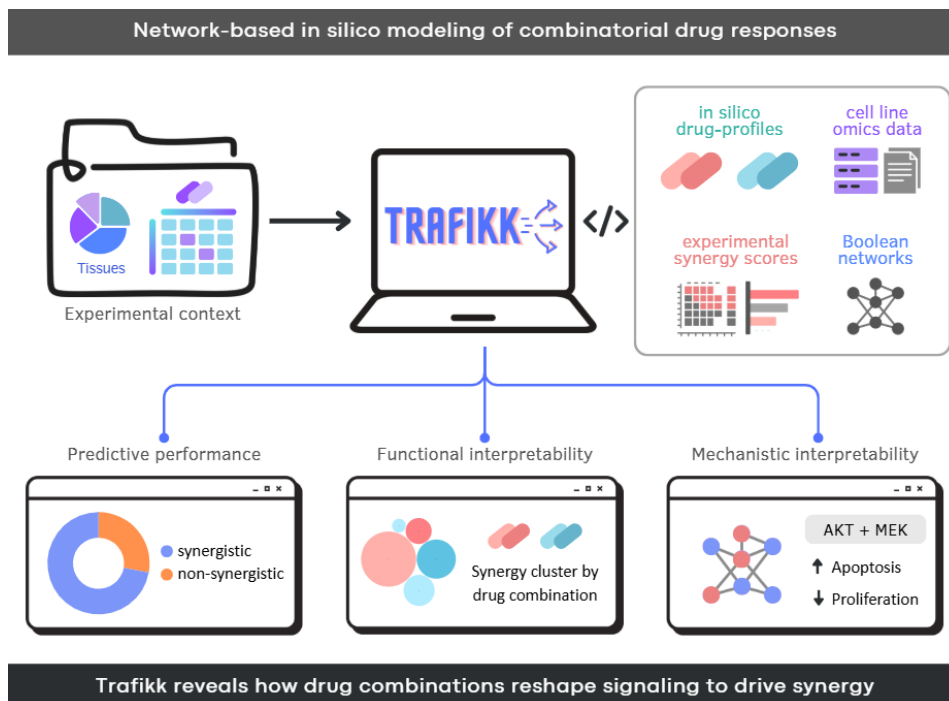
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## 28 Abstract

29 Effective drug combination therapies can improve cancer treatment, yet the mechanistic basis of drug  
30 synergy remains poorly understood. Most computational approaches prioritize predictive accuracy  
31 over molecular mechanistic interpretability, providing hence limited insights into how synergistic  
32 effects emerge across signalling contexts. We developed Trafikk, a molecular-signalling network-  
33 based framework that simulates drug perturbations in cell line-specific computational models to mirror  
34 functional outcomes in experimental combination screens. Across two independent large-scale  
35 datasets, Trafikk identified synergistic combinations with >77% recall. Functional response  
36 predictions revealed both conserved and context-dependent mechanisms. While AKT-MEK co-  
37 inhibition consistently disrupted coordinated survival and apoptotic signalling in 742 cell lines, PI3K-  
38 BCL2 synergy arose through distinct death programs shaped by cell-context-specific network  
39 constraints. Trafikk combines predictive performance with mechanistic interpretability, capturing how  
40 and why drug synergy emerges across cellular contexts. Source code, installation instructions and  
41 usage tutorial are freely available at <https://github.com/druglogics/trafikk>.



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## 45 **Introduction**

46           Combinatorial drug therapies have been suggested as a means to overcome adaptive and  
47 selective anti-cancer drug resistance. Discovery of effective combinations has, however, been  
48 challenged by yet poorly understood context-dependence, making one-size-fits-all discoveries rare  
49 and the experimental scale required for their discovery demanding. Large pan-cancer drug screens  
50 have confirmed that synergistic effects confer biological selectivity, with responses varying markedly  
51 across cellular backgrounds due to differences in mutations, pathway activities, and other context-  
52 dependent factors (1-3). While these studies highlight the necessity of finding effective drug  
53 combinations, they also expose the practical limitations of experimental screening alone, motivating  
54 the development of computational methods to prioritize promising drug pairs for testing their efficacy  
55 in pre-clinical cell models. Synergistic drug responses can be highly context-specific, reflecting that  
56 cancer arises from the dysregulation of interconnected signalling pathways rather than from isolated  
57 molecular interactions (4). These pathways form complex networks that integrate genetic, epigenetic,  
58 and environmental cues to regulate cell-fate decisions, such as proliferation and apoptosis. As a  
59 result, drug perturbations propagating through these networks rarely act in isolation, and are shaped  
60 by feedback mechanisms, which may not be fully captured by experimental screening alone (4, 5).

61           Advances in drug discovery frameworks have substantially improved the prediction of drug  
62 synergy by integrating chemical features, drug-target information, and cellular molecular profiles,  
63 enabling scalable and biologically informed modelling of nonlinear drug interactions (6, 7). However,  
64 although these approaches incorporate contextual molecular features to improve prediction accuracy,  
65 many operate as black boxes and provide limited insight into the mechanistic basis of synergistic  
66 responses (8). Network-based approaches offer a natural framework to address this limitation by  
67 explicitly modelling signalling interactions and their downstream consequences. In this context,  
68 Boolean modelling has been applied to simulate drug combination effects in cancer cells (9, 10) and  
69 other diseases (11, 12). Although Boolean modelling relies on discrete state representations, it  
70 provides a qualitative and mechanistic description of regulatory network dynamics that is well suited  
71 to capturing context-dependent signalling responses (6, 7).

72           Importantly, signal propagation analyses have shown that Boolean models can move beyond  
73 static outcomes, enabling a more nuanced characterization of how perturbations spread through  
74 Boolean networks and shape system-level responses (13, 14). In this context, we recently developed  
75 BooLEVARD, a computational framework that quantifies signal propagation in Boolean models (15).  
76 While Boolean network-based approaches have been applied to drug response modelling and  
77 combination analysis (16-18), existing methods typically focus on predictive performance and  
78 qualitative mechanistic exploration. To our knowledge, no framework has systematically integrated  
79 quantitative signal propagation, predictive assessment of drug synergy, and mechanistic  
80 interpretability, leaving an unmet need for frameworks that bridge mechanistic modelling with  
81 actionable drug prioritisation.

82           To address these limitations, we developed Trafikk, a computational framework to simulate  
83 drug perturbations in biological condition-specific Boolean models with signal-propagation analysis;  
84 the framework enables systematic generation of functional response profiles for single drugs and drug  
85 combinations. These profiles support network-level analyses that go beyond synergy classification,  
86 allowing identification and mechanistic interpretation of synergistic responses in terms of redistributed  
87 signalling and pathway engagement. Applied to two independent large-scale drug screens (1, 2),  
88 Trafikk robustly recapitulated experimentally observed synergistic responses across multiple cellular  
89 contexts and revealed that similar phenotypic outcomes can arise from distinct mechanistic signalling  
90 programs. This was exemplified with cases where single drugs act dominantly, as well as cases where  
91 non-redundant interactions between drugs give rise to broader combinatorial effects.

## 92 **Results**

### 93 **Trafikk delivers a robust predictive performance in independent drug screens**

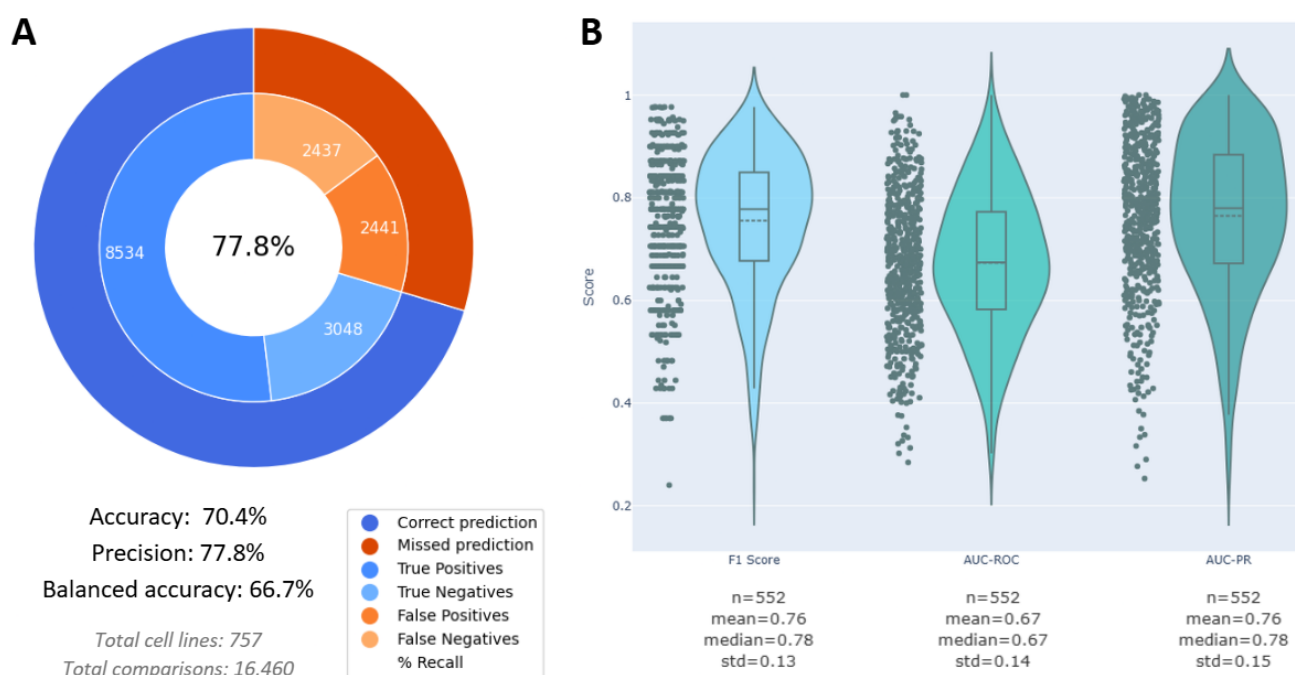
94           To first evaluate whether the computational pipeline could reproduce experimentally observed  
95 drug synergy responses *in silico*, we assessed the performance of each model calibrated by all cell  
96 lines by comparing predictions to binarized Bliss synergy scores in two independent drug-screen

97 datasets. The Sanger-2024 dataset was used for in-depth analyses across 757 cell lines due to  
98 broader model coverage of drug targets and combinations.

99 On the Sanger-2024 dataset, the overall performance of Trafikk across 16,460 cell line–drug  
100 combination comparisons reached a mean accuracy of 70.4% and a balanced accuracy of 66.7%,  
101 with both recall and precision at 77.8% (**Fig 1A**). Across 522 evaluable cell lines, the median AUC-  
102 ROC was 0.67 (mean 0.67 ± 0.14) and the median AUC-PR was 0.78 (mean 0.76 ± 0.15) (**Fig 1B**).  
103 Consistent performance was observed across cancer types (**Supplementary Figs S2 and S3**).

104 Trafikk application to the independent Merck-2016 dataset yielded comparable classification  
105 accuracy (75.1%), supporting the general applicability of the pipeline. However, discrimination metrics  
106 could be computed for only a subset of cell lines (13 out of 38), due to limited class balance. Detailed  
107 performance metrics for Merck-2016 are provided in **Supplementary Fig S4**. Despite these  
108 constraints, overall classification performance remained directionally consistent with the primary  
109 analysis.

110 Together, these results indicate that the pipeline can *in silico* recreate experimental drug-  
111 combination responses, motivating further analyses of performance variability and mechanistic  
112 drivers. All subsequent analyses were performed using the Sanger-2024 dataset.



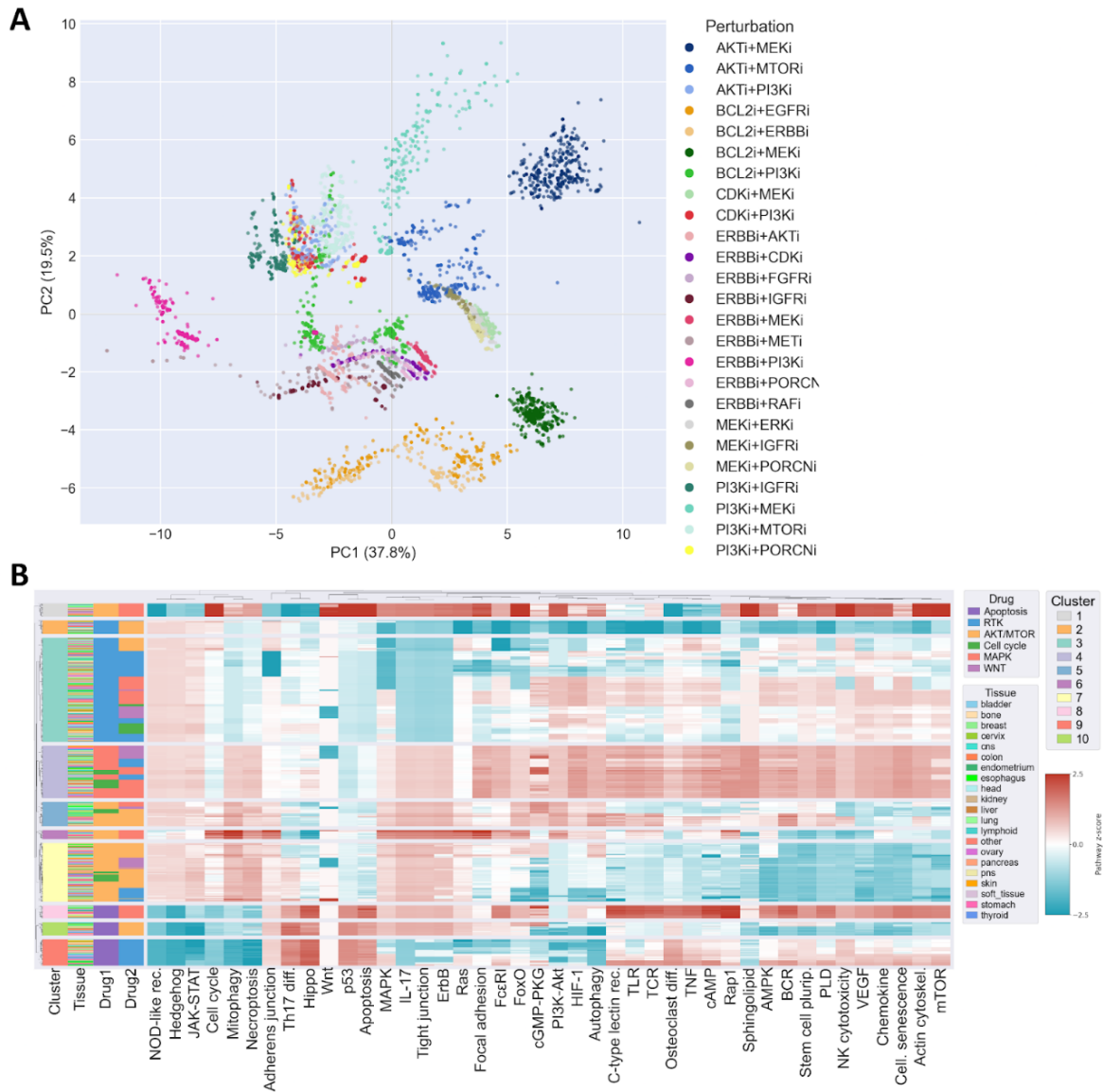
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114 **Fig 1.** Predictive performance of calibrated in silico synergy predictions. **(A)** Ring plot showing mean accuracy, recall, and precision for  
115 predicting experimentally observed synergistic drug combinations across 16,460 cell line–combination comparisons in the Sanger-2024  
116 dataset. **(B)** Violin plots showing the distribution of F1 score, ROC–AUC, and PR–AUC values across cell lines. Each point corresponds to  
117 a cell line metric. Centre lines indicate medians, boxes the interquartile range, and whiskers 1.5× the interquartile range.

## 118 **Functional responses cluster primarily by drug combination rather than by cellular** 119 **context**

120 The nodes of the CFDv2 model were significantly enriched in 42 non-redundant KEGG  
121 pathways (**Supplementary Fig S5**). Pathway-level functional scores (of true positive and negative  
122 predictions) derived from these pathways were used for the downstream analyses reported below.  
123 These pathway-level scores are derived from the same Boolean simulations used to compute Bliss  
124 synergy excess from viability-related nodes serving as proxies for proliferation and apoptosis in Oris,  
125 and therefore represent a mechanistic decomposition of the perturbation effects underlying the  
126 synergy calculation (**Fig 1**).

127 Results of principal component analysis (PCA) revealed that the applied drug combinations  
128 constitute a major source of functional variability across cell lines, leading to a clear stratification in  
129 functional space (**Fig 2A**, **Supplementary Fig S6**). Unsupervised hierarchical clustering of pathway  
130 scores identified ten functional clusters with distinct response patterns (**Fig 2B**, **Fig 3**,  
131 **Supplementary Fig S1**). Clusters enriched in BCL2-targeting combinations (clusters 8-10) were  
132 characterized by the highest relative pathway scores for apoptosis and p53-associated programs  
133 consistently across cell lines, with quantitative variation between contexts (**Fig 2A**). A second group  
134 of clusters (clusters 2-7) showed response patterns dominated by one of the signalling axes targeted  
135 by the combination, including ERBB-centred (clusters 2-3), MEK-centred (cluster 4), and  
136 PI3K/AKT/mTOR-centred combinations (clusters 5-7), each displaying distinct relative modulation of  
137 immune-related, junctional, metabolic or cell-cycle-associated pathways.



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**Fig 2. Global functional landscape of pathway responses to drug combinations. (A)** Principal component analysis (PCA) of functional pathway scores, restricted to true positive and true negative responses. Each point represents a cell line treated with a given drug combination, and colours indicate the specific combination. **(B)** Heatmap of z-scored pathway scores for all combinations and cell lines, ordered according to the same hierarchical clustering (K = 1). Rows correspond to samples and columns to pathways.

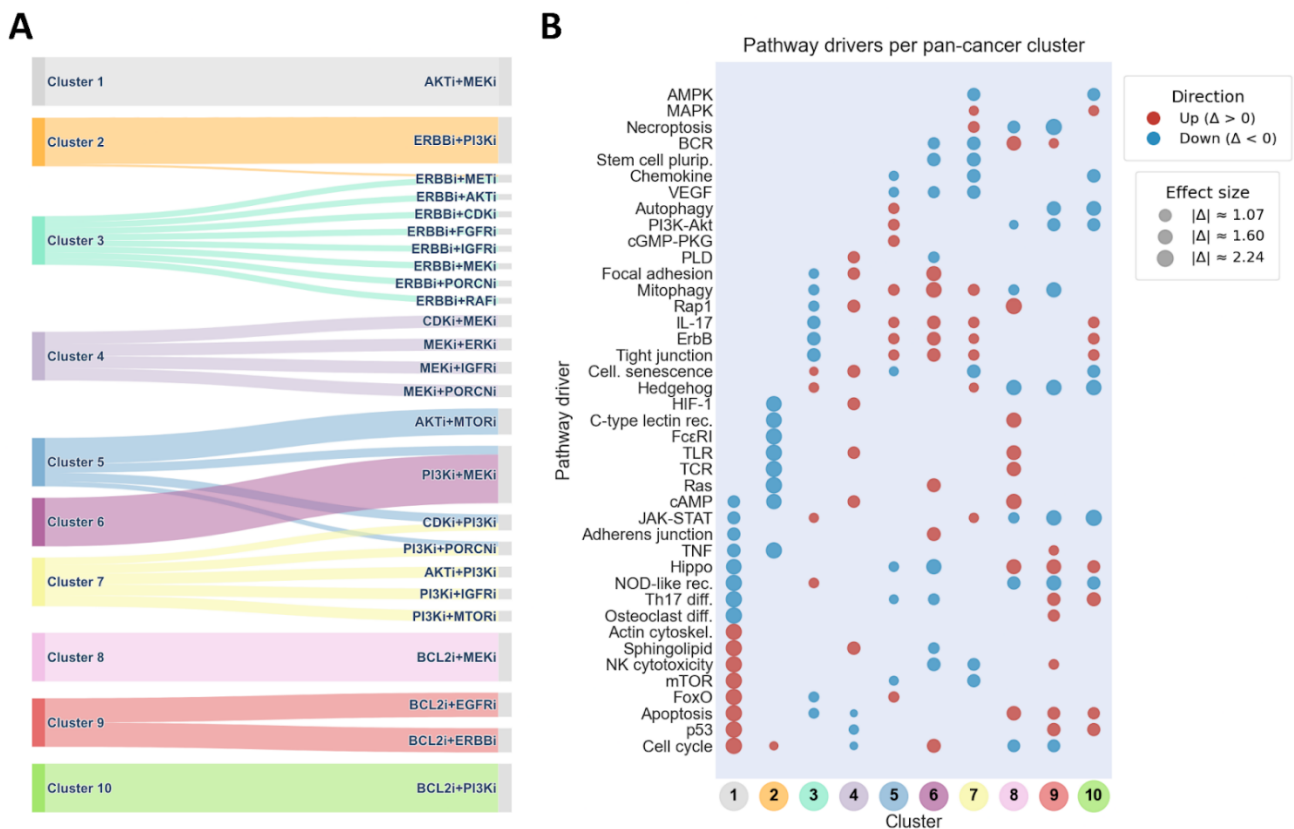
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Markedly, AKT-MEK co-inhibition (cluster 1) was associated with a broader redistribution of pathway level scores than the other MEK-driven combinations (cluster 4), and AKT/PI3K/mTOR-driven combinations (clusters 5-7) (**Fig 2B, 3**). Among the top significantly modulated pathways FDR < 0.01) were cell cycle- and stress-associated programs (*Cell cycle*, *p53*, *Apoptosis*, *mTOR*, *FoxO*), as well as immune- and cytoskeleton-related pathways (*Natural killer cytotoxicity*, *actin cytoskeleton*). In parallel, the most downweighted pathways included inflammatory and developmental signalling

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149 axes (*Th17 differentiation, TNF, Hippo, JAK-STAT*), consistent with a combined response pattern  
 150 rather than a single dominant program. By comparison, MEK-driven combination responses displayed  
 151 a more restricted functional profile. Downweighted pathways were largely limited to apoptosis (*Cell*  
 152 *cycle, Apoptosis, p53*), whereas upweighted pathways primarily involved adaptive signalling  
 153 programs (*HIF-1, cAMP, phospholipase D*). In contrast, AKT/PI3K/mTOR-driven combinations were  
 154 characterized by prominent contributions from pathways closely associated with PI3K-AKT signalling  
 155 and cell survival, as well as recurrent modulation of adhesion and immune-related pathways,  
 156 consistent with a more axis-centred response. Overall, functional responses grouped primarily  
 157 according to drug combination rather than cell line, with pathway modulation patterns reflecting the  
 158 targeted signalling axis.



159  
 160 **Fig 3. Cluster-specific functional programs underlying drug combination responses. (A)** Sankey diagram linking drug combinations  
 161 to functional clusters obtained by silhouette-optimized hierarchical clustering and pathway-level functional scores ( $K = 10$ ). **(B)** Dot plot  
 162 showing cluster-specific pathway drivers. For each cluster, the top eight significantly enriched and depleted pathways (up and down) were  
 163 identified by combining in-cluster versus out-of-cluster samples (Wilcoxon rank-sum test,  $FDR < 0.01$ ) with a consistency threshold of  $\geq 65\%$ .  
 164 Dot colour indicates the sign of the effect ( $\Delta = \mu_{in} - \mu_{out}$ ), and dot size reflects its absolute magnitude.

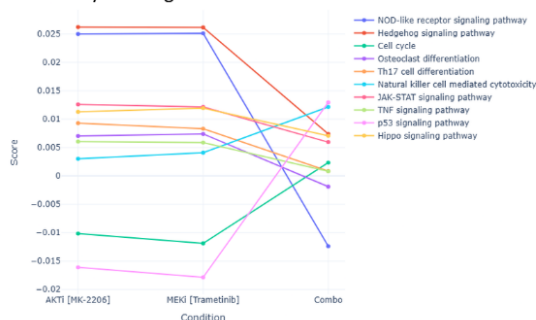
## 165 Mechanistic pathway dynamics explain the AKTi and MEKi combination effect

166 To investigate how synergistic drug combinations translate into biological effects, we analysed  
167 the AKT inhibitor MK-2206 and the MEK inhibitor trametinib, a recurrent and robust combination  
168 across the cell line models. This pair was selected based on consistent pathway-level signatures  
169 across cancer types, indicating a combinatorial response independent from cancer type (**Fig 2A, 3A**).  
170 Importantly, this combination was first identified as synergistic based on Bliss excess computed from  
171 viability-related output nodes, and the pathway-level analysis presented here dissects the signalling  
172 mechanisms underlying that quantitatively predicted effect.

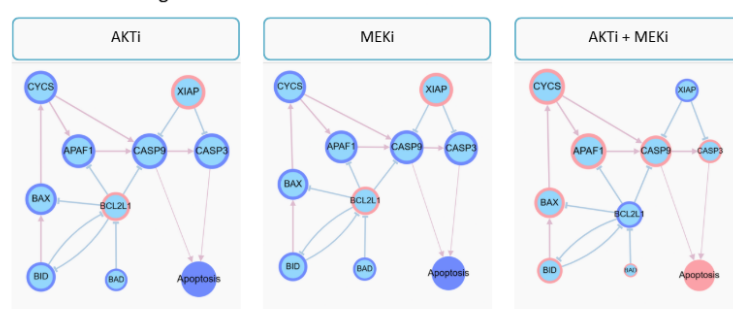
173 In pathway-level analysis, AKT or MEK inhibition alone induced limited and partially  
174 overlapping pathway perturbations, whereas their combination produced a distinct reprogramming of  
175 signal propagation. In particular, this combination led to the activation of stress- and apoptosis-  
176 associated pathways, including p53 signalling, while attenuating survival and differentiation programs,  
177 which reveals non-additive pathway responses (**Fig 4A**).

178 By mapping these effects onto the base network, we revealed that synergy originated from  
179 shifting the network balance, not from simply amplifying individual drug effects. While monotherapies  
180 maintained survival buffering, the combination of AKT and MEK inhibitors suppressed BCL2L1-  
181 mediated inhibition, triggered BAX activation, and initiated cytochrome-c-dependent CASP9-CASP3  
182 signalling. This overcame XIAP-mediated restraint (**Fig 4B**). These results show that synergy occurs  
183 when combined perturbations break down survival buffering, pushing the cell toward an irreversible  
184 apoptotic state.

A Pathway-level signal flow



B Network-level signal flow



185

186 **Fig 4. Pathway-level effects of a synergistic drug combination.** (A) Pathway-level signal scores (precomputed from node-level data,  
187 Equation 4) are shown for AKTi, MEKi, and their combination. Pathways are ranked by an impact metric (Equation 5) that quantifies how  
188 much the combination differs in magnitude from the stronger single-drug effect. Median summarizes pathway-level scores across cancer  
189 types (equation 4). (B) Network-level signal propagation within the base network under the same conditions. A reduced visualization of the  
190 network is shown for pathway simplification purposes. Node scores across cancer types are overlaid, size reflects the absolute magnitude  
191 of the node score, and colour indicates the score sign, red for upregulated and blue for downregulated. The combination induces pathway  
192 and node-level changes not explained by single-drug effects, highlighting coordinated signal redistribution associated with synergy.

193 **TP53 status reveals distinct, context-dependent signalling routes converging on the**  
194 **same cellular fate**

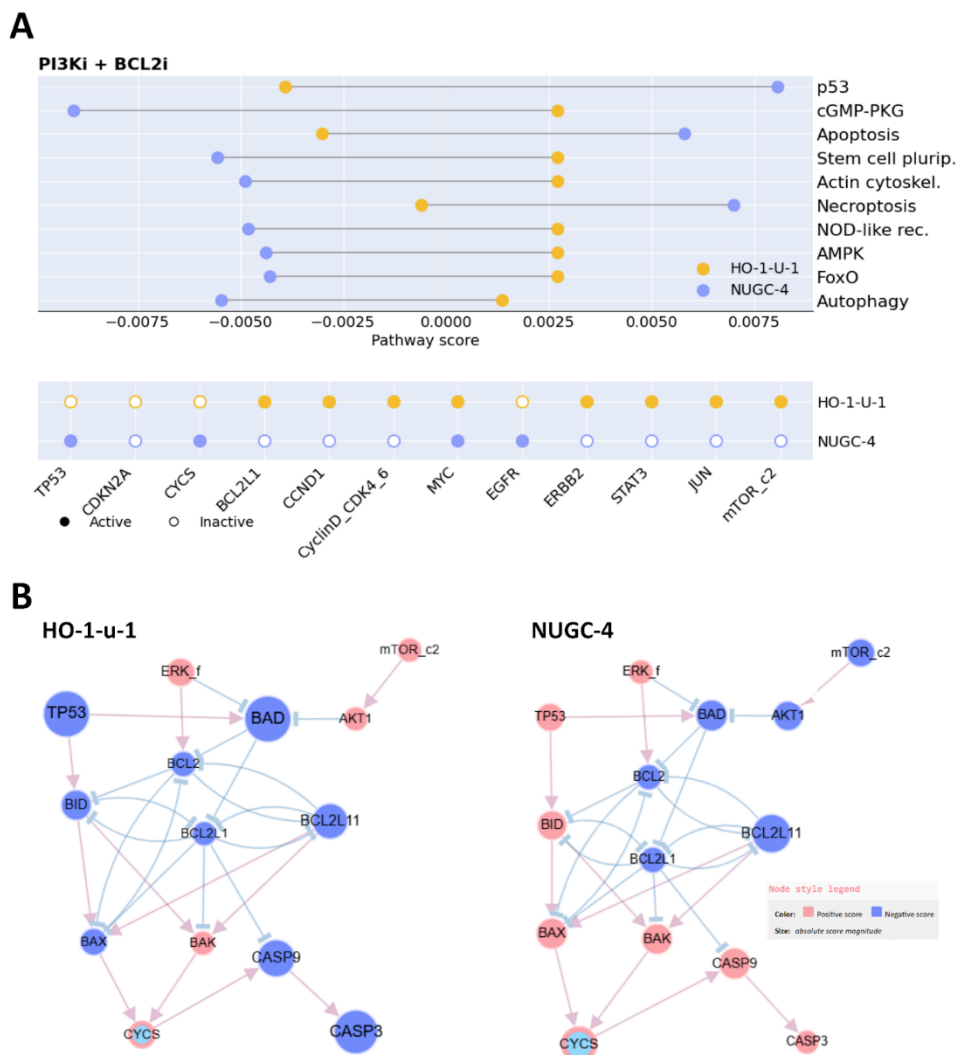
195 To investigate mechanistic sources of the functional heterogeneity within drug combinations,  
196 we first quantified pairwise differences in pathway-level responses across cell lines for each  
197 combination. Among all tested conditions, combined PI3K and BCL2 inhibition displayed the highest  
198 overall discordance between the cell lines (**Supplementary Fig S7**). We therefore selected this  
199 combination for in-depth analysis.

200 To uncover and exemplify the discordance, we used the most divergent cell line pair under  
201 combined PI3K and BCL2 inhibition: HO-1-u-1, derived from salivary gland carcinoma, and NUGC-4,  
202 derived from gastric cancer. Several of the pathways showing the largest differences between these  
203 cell lines were related to cell death and stress responses, including apoptosis, necroptosis, and  
204 autophagy-associated signalling (**Fig 5A**, upper panel). These pathways exhibited differences in both  
205 magnitude and direction between HO-1-u-1 and NUGC-4, indicating divergent downstream functional  
206 responses to the same perturbation.

207 To contextualize these differences, we examined the baseline calibration states to constrain  
208 model inference (**Fig 5A**, lower panel). Notably, TP53 was constrained as inactive in HO-1-u-1 and  
209 active in NUGC-4, reflecting cell-line-specific baseline differences that are expected to influence  
210 downstream signalling responses.

211 We next examined how these differences were reflected at the network level by focusing on  
212 the apoptotic subnetworks (**Fig 5B**). Although both cell lines exhibited synergistic responses to PI3K  
213 and BCL2 co-inhibition, their inferred apoptotic signalling patterns differed substantially. In NUGC-4,

214 multiple apoptotic components showed higher activity, consistent with a strong engagement of  
215 apoptotic signalling. In contrast, HO1-u-1 displayed limited activation of apoptotic nodes.  
216 Nonetheless, BAK and cytochrome c (CYCS) showed increased activity in HO-1-u-1, suggesting  
217 engagement of mitochondrial dysfunction despite reduced overall apoptotic signalling. Taken  
218 together, these results show that differences in baseline signalling states, exemplified by TP53  
219 activity, can give rise to distinct downstream functional responses to identical drug combinations  
220 across cell lines.



221











222 **Fig 5. Cell-line-specific functional and apoptotic signalling differences under combined PI3K and BCL2 inhibition. (A)** Pathway-  
223 level comparison of functional responses between HO-1-u-1 and NUGC-4 following combined PI3K and BCL2 inhibition. The dumbbell plot  
224 displays the 10 pathways showing the largest differences between cell lines, selected based on an absolute fold change greater than 1.5.  
225 Pathway scores quantify the signed bias of signal propagation toward each pathway in the Boolean models. The lower panel shows the

226 baseline calibration states used to constrain model inference for each cell line. Filled circles indicate nodes constrained as active (1), and  
 227 open circles indicate nodes constrained as inactive (0). (B) Cell-line-specific apoptotic signalling networks inferred from the same underlying  
 228 network topology. Node colour represents the inferred activity state, and node size reflects the relative magnitude of node activity.  
 229 Differences between HO-1-u-1 and NUGC-4 illustrate how identical perturbations lead to distinct patterns of signal propagation through the  
 230 apoptotic subnetwork. Cytochrome c (CYCS) is highlighted for reference.

## 231 Trafikk provides a unified mechanistic and context-specific framework for drug 232 synergy prediction

233 Trafikk builds upon a range of existing tools, pipelines, and methods for drug synergy  
 234 prediction. Here, we position Trafikk within the current state of the art (Table 1, Supplementary Table  
 235 4).

236 Table 1. Trafikk in the landscape of computational drug synergy prediction methods.

| Method  | Primary reported metric   | Mechanistic explanation | Training data | Requires mono-therapy response | Scale                     |
|---|---|-------------------------|---------------|--------------------------------|---------------------------|
| <b>NO TRAINING DATA REQUIRED</b>  |   |                         |               |                                |                           |
| Resolution: Single Samples  |   |                         |               |                                |                           |
| <b>TRAFIKK</b><br>PR-AUC 0.76; ROC-AUC 0.67   |  <b>0.76</b><br>(PR-AUC)             | Yes                     | No            | No                             | 25 combos × 757 CL        |
| <i>Only method combining no training data, single-sample resolution, and explicit mechanistic interpretation.</i> |   |                         |               |                                |                           |
| Resolution: across Multiple Samples   |   |                         |               |                                |                           |
| <b>SyndrumNET</b><br>ROC-AUC 0.68   |  <b>0.68</b><br>(ROC-AUC)            | Partial                 | No            | No                             | ~1.1M combos × 6 diseases |
| <b>Cheng-Barabási</b><br>ROC-AUC 0.59   |  <b>0.59</b><br>(ROC-AUC)            | No                      | No            | No                             | 24 FDA combos             |
| <b>Pathway Cross-talk</b><br>7/10 experimental matches  |  <b>7/10 matches</b><br>(non-AUC)    | Yes                     | No            | No                             | 390 combos × 5 CL         |
| <b>TRAINING DATA REQUIRED</b>   |   |                         |               |                                |                           |
| Resolution: Single Samples  |   |                         |               |                                |                           |
| <b>CASynergy</b><br>PR-AUC 0.88; ROC-AUC 0.87   |  <b>0.88</b><br>(PR-AUC)             | Partial                 | Yes           | No                             | ~70k combos × 76 CL       |
| <b>TranSynergy</b><br>ROC-AUC 0.91; PR-AUC 0.60   |  <b>0.91</b><br>(ROC-AUC)            | Partial                 | Yes           | No                             | 523 combos × 35 CL        |
| <b>Network Propagation</b><br>ROC-AUC 0.75, 0.68  |  <b>0.75</b><br>(ROC-AUC)            | Partial                 | Yes           | Yes                            | 167–370 combos × 85 CL    |
| <b>PSS</b><br>ROC-AUC 0.62; Pearson r 0.33  |  <b>0.62</b><br>(ROC-AUC)            | Yes                     | Yes           | No                             | 150 combos × 5 CL         |
| <b>DIPx</b><br>Spearman r 0.50; 0.26  |  <b>Spearman r 0.50</b><br>(non-AUC) | Yes                     | Yes           | No                             | 903 combos × 75 CL        |
| <b>IDACombo</b><br>Pearson r 0.93–0.96  |  <b>Pearson r 0.93</b><br>(non-AUC)  | No                      | Yes           | Yes                            | ~5000 combos (NCI-60)     |

237

238 Abbreviations: CL, cell line; PSS, Protein Synergy Scores; ROC-AUC, area under the receiver operating characteristic curve; PR-AUC,  
 239 area under the precision-recall curve.

240 Several approaches, including TranSynergy (17) and CASynergy (8) integrate prior-  
241 knowledge networks, omics data, and drug-sensitivity measurements to train machine learning  
242 models that predict drug combinations, either as binary classifications or continuous scores (e.g.  
243 Loewe) (19). These methods typically rely on a training phase that optimizes predictive performance  
244 based on available data in a given condition (e.g. cancer type). This dependency on training data is  
245 also shared by other approaches, such as Network Propagation (20), IDACombo (21), DIPx (22), and  
246 Protein Synergy Scores (PSS) (**Table 3**) (18), the latter of which combines Boolean modelling with  
247 data-driven optimization and has shown good performance in breast cancer context. In contrast, a  
248 subset of network-based approaches, including the methods by Cheng-Barabási (23), SydrumNET  
249 (24), and Pathway Cross-talk (25), do not require training. These approaches leverage prior-  
250 knowledge networks and drug-target information to assess how drug combinations perturb disease-  
251 relevant regions of the network, typically through topological or proximity-based measures. While this  
252 makes them more readily applicable across conditions, their predictions are generally not tailored to  
253 specific cellular contexts.

254 Trafikk adopts a different strategy by integrating condition-specific omics data to generate cell  
255 line-specific Boolean models that serve as digital representations of the biological system. Once  
256 calibrated, these models can simulate arbitrary perturbations, including unseen drug combinations,  
257 without requiring additional data-driven training. Beyond prediction, Trafikk distinguishes itself through  
258 its mechanistic interpretability. While some other methods provide partial interpretability, such as  
259 pathway-level insights in DIPx or Pathway Cross-talk, protein-level contributions in Protein Synergy  
260 Scores (PSS), or post hoc explanations in deep learning approaches like TranSynergy and  
261 CASynergy (e.g. Shapley Additive Explanations (SHAP) or enrichment analyses), these are typically  
262 limited in scope or indirect through independent analyses. In contrast, Trafikk directly exposes the  
263 propagation of signals through the network, enabling coherent interpretation at the node, pathway,  
264 and network-module levels. This allows researchers not only to predict whether a combination is  
265 synergistic, but also to understand how and why the synergy emerges within a given biological  
266 context.

## 267 **Discussion**

268           In this study, we present a mechanistic, network-based computational approach to  
269 systematically evaluate cancer drug combination responses under cell line-specific molecular  
270 contexts. The framework integrates cell-line-specific molecular context with drug-induced  
271 perturbations of signalling networks to model downstream cell-fate decisions related to proliferation  
272 and apoptosis. By using Bliss independence to quantify synergies, the pipeline enables direct  
273 comparison between simulated and experimental outcomes. Across two independent large-scale  
274 drug combination studies, this approach achieved consistent predictive performance, with both  
275 precision and recall above 77% for synergistic combinations. In addition, the proposed framework  
276 emphasizes mechanistic interpretability, allowing direct inspection of how drug effects propagate  
277 through signalling pathways. Together, these results demonstrate that network-based signal-  
278 propagation modelling can reproduce experimentally observed drug combination effects and provide  
279 mechanistic insight into the emergence of synergy.

280           To date, several computational approaches spanning machine learning and network-based  
281 models exists that leverage large-scale screening data and biological interaction information to  
282 identify synergistic combinations (6, 7, 27). However, only a few methods are available to support  
283 biological interpretation of combination synergies through feature attribution or pathway-level analysis  
284 (8). In the present study, in addition to predicting drug synergies, we analyse how single and combined  
285 drug perturbations reshape signalling activity. The motivation is two-fold; by focusing on pathway- and  
286 signal-propagation responses, the Trafikk framework first examines synergy as a result of combined  
287 drug perturbations and then evaluates it against experimental drug-screening data. This allows single  
288 and combination perturbations to be analysed and compared. Such a pathway perspective is  
289 increasingly relevant as there is a growing interest in higher-order drug combinations of more than  
290 two drugs, where experimental coverage remains limited and mechanistic insight can help guide  
291 exploration of the massive combinatorial search space.

292 Through the functional signal exploration enabled by the pipeline, we observed that drug  
293 combination identity was the primary source of variability in pathway-level response profiles, largely  
294 independent of the tissue origin of the treated cell lines. This is consistent with experimental  
295 observations from the large-scale drug screens used for validation, where several combinations  
296 induced relatively homogeneous viability responses across diverse cellular contexts(1, 2). Such  
297 behaviour is also expected given that the underlying network captures core, cancer-relevant signalling  
298 programs governing generic cell-fate decisions, rather than tissue-specific regulatory mechanisms.  
299 Interestingly, most combinations were functionally dominated by a single agent, indicating that one  
300 drug often dictates the signalling trajectory of the pair; such dominance effects have also been  
301 reported in molecular profiling studies and drug combination screens, and inferred from phospho-  
302 signalling datasets (3, 28). Notably, AKT-ERK dual inhibition, a recurrently reported synergistic  
303 combination (29, 30), deviated from this dominance pattern and produced a composite signalling  
304 signature. More generally, this example illustrates how synergistic drug responses can emerge when  
305 combined perturbations reorganize network signal flow in ways not accessible to single agents,  
306 highlighting the interpretive value of pathway- and signal-propagation analysis.

307 Beyond these global trends, our framework also revealed between-cell line heterogeneity for  
308 the same combination. Notably, PI3K-BCL2 co-inhibition produced synergistic effects in HO-1-u-1  
309 and NUGC-4, yet with distinct signalling programs, illustrating that shared phenotypic outcomes do  
310 not require uniform execution mechanisms. Such divergence is consistent with the view that cell death  
311 pathways are not merely triggered but integrated within the molecular context of each cell line,  
312 including differences in p53 status and apoptotic priming. In this scenario, loss of functional p53 in  
313 HO-1-u-1 (31) may bias the response toward p53-independent, mitochondria-associated regulated  
314 cell death, in line with reports that p53 can redirect lethal stress toward mitochondrial respiration-  
315 dependent, apoptosis-dependent death programs (32). By contrast, NUGC-4, which retains wild-type  
316 p53 (33), exhibits broader engagement of canonical apoptotic components, and apoptosis can indeed  
317 be experimentally induced in this line via caspase-dependent mechanisms (33). Together, these  
318 observations indicate that phenotypic synergy can arise through distinct execution routes depending

319 on apoptotic wiring, reinforcing that mechanistically similar drug synergies need not converge at the  
320 level of cell-death implementation.

321 As with other Boolean network-based approaches (34), the scope of Trafikk reflects a trade-  
322 off between network size and computational tractability. Recent methodological advances, such as  
323 the BooLEVARD framework developed by our group, enable quantitative analysis of signal  
324 propagation in Boolean models and facilitate this type of mechanistic analysis of perturbation effects  
325 (15). As network size and connectivity increase, the complexity of the attractor landscape grows  
326 rapidly, leading to a substantial rise in the cost of explicit signal-propagation analysis. For this reason,  
327 Boolean models often rely on abstractions that capture key signalling logic without explicitly  
328 representing all molecular details. In this context, generic or composite nodes may represent multiple  
329 biological instances, providing a practical way to balance biological expressiveness and  
330 computational feasibility while preserving interpretability.

331 Likewise, while the calibration procedure prioritizes models that admit stable states under  
332 baseline conditions, certain perturbations may shift model dynamics toward cyclic attractors (35),  
333 limiting the availability of steady-state readouts. Trafikk allows to partially mitigate this effect by  
334 increasing model ensemble size or adjusting sampling constraints, at the expense of additional  
335 computation. Finally, the use of Bliss independence provides a well-established (36) and conceptually  
336 compatible reference for synergy assessment within Boolean frameworks (10), while naturally  
337 abstracting away temporal dynamics, dose dependencies, and kinetic parameters that lie beyond the  
338 scope of logic-based modelling.

339 In conclusion, this study demonstrates that mechanistic network-based modelling can  
340 reproduce experimental drug combination responses while directly explaining how synergy emerges  
341 from drug-network interactions. By making pathway activity, signal propagation and cell-fate  
342 outcomes explicit, the framework offers a complementary alternative to purely predictive models.  
343 Looking ahead, combining such mechanistic representations with machine learning approaches could  
344 further improve both predictive performance and biological interpretability. In this way, Trafikk

345 provides a practical foundation for interpreting large-scale drug screens and guiding the rational  
346 exploration of combination therapies.

## 347 **Methods**

### 348 **Drug screen datasets**

349 To evaluate the performance of the Trafikk pipeline, we used two independent experimental  
350 drug synergy datasets to compare our synergy predictions. The primary dataset was generated by  
351 the Wellcome Sanger Institute and thus named Sanger-2024 (2). The secondary dataset generated  
352 by Merck & Co., named Merck-2024 was mainly reserved for validation (1). Both datasets measured  
353 cell-based drug synergies for double perturbations under various cell line conditions (**Table 2**).

354 **Table 2. Experimental drug synergy datasets.**

| <b>Experimental Dataset</b> | <b>Single Drugs</b> | <b>Combinations</b> | <b>Dose-combination matrix</b> | <b>Cell lines</b> | <b>Cancer Types</b> |
|-----------------------------|---------------------|---------------------|--------------------------------|-------------------|---------------------|
| Sanger-2024                 | 29                  | 51                  | 2 x 7                          | 757               | 26                  |
| Merck-2016                  | 38                  | 583                 | 4 x 4                          | 39                | 6                   |

355

356 The Sanger-2024 dataset is a recently published large-scale drug screen that  
357 comprises 51 drug combinations tested across 757 cancer cell lines spanning 26 cancer  
358 types (2), and was used for downstream mechanistic and pathway-level analyses due to its  
359 scale and biological diversity. The Merck-2016 dataset is a large-scale drug screen that  
360 includes 538 drug combinations tested in 39 cancer cell lines across six cancer types (1),  
361 and was used as an independent benchmark to assess the generalizability of the pipeline.

362 Bliss excess for a drug combination was computed as defined in **Equation 1**:

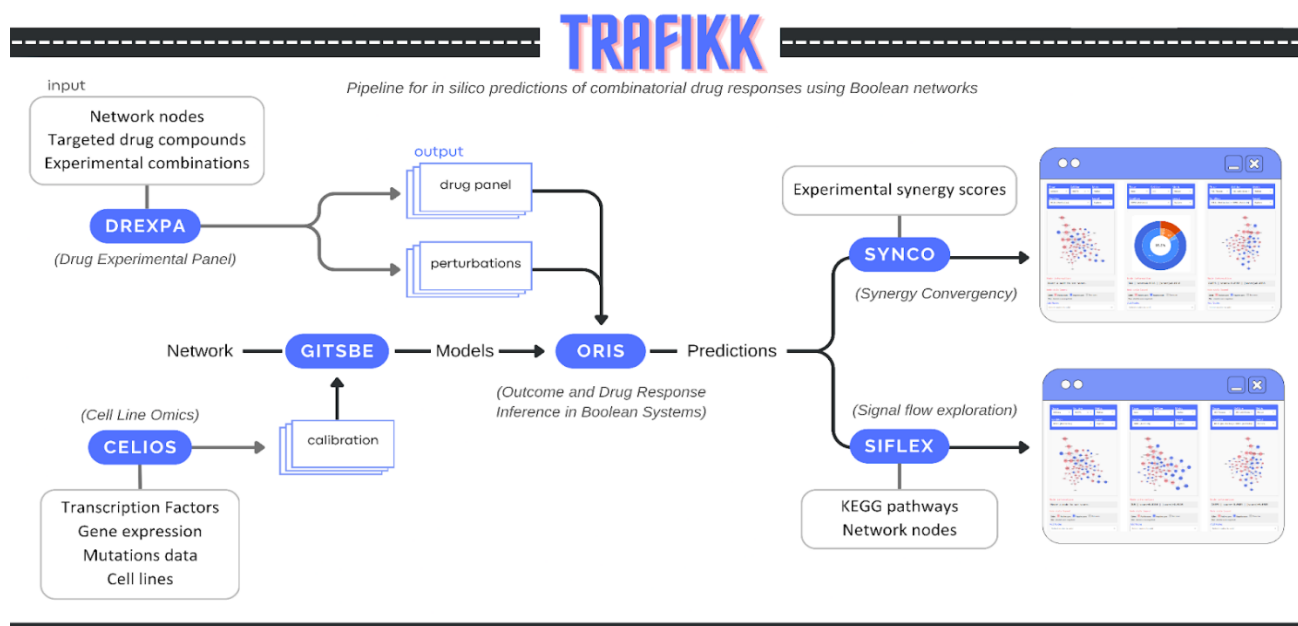
$$E_{Bliss} = V_{AB} - V_A V_B \quad (1),$$

363 where  $V_{AB}$  denotes the viability under the combined perturbation, and  $V_A$  and  $V_B$  correspond to the  
364 respective single-perturbation conditions.

365 Bliss synergy scores were retained as continuous values for descriptive analysis. For  
366 performance evaluation, synergy identification was operationalized as a binary classification task.  
367 Drug-cell line pairs with  $\Delta\text{Bliss} < 0$  were classified as synergistic, whereas  $\Delta\text{Bliss} \geq 0$  were classified  
368 as non-synergistic. In this viability-based formulation, negative values reflect deviation from Bliss  
369 additivity toward greater-than-expected reduction in viability, but do not necessarily imply a large or  
370 biologically significant synergistic effect. Importantly, the interpretation of numerical thresholds is  
371 scale-dependent and cannot be directly transferred from effect- or percentage-based Bliss  
372 implementations. Because the primary objective of this evaluation was directional classification rather  
373 than effect size stratification, the binary framework distinguishes only between deviation toward  
374 synergy ( $\Delta\text{Bliss} < 0$ ) and non-synergistic responses, without assigning biological weight to marginal  
375 deviations from zero.

## 376 **Trafikk pipeline**

377 Trafikk is a computational pipeline for *in silico* prediction of combinatorial drug responses using  
378 a network calibrated to specific cell-line contexts. The pipeline builds ensembles of logic-based  
379 network models, in which simulations of drug perturbations are performed to assess their impact on  
380 cancer signalling pathways. Trafikk is built upon existing software, including DrugLogics for  
381 generating the models (10), and BooLEVARD for computing the synergy scores and performing signal  
382 propagation analysis (15), and extends them with modules for data preparation, model calibration,  
383 and large-scale drug-screen analysis. The pipeline is organised into modules (**Fig 6**), which are  
384 outlined in the following sections. First, a network is calibrated in *Celios* with the biological context of  
385 each cell line, and an ensemble of models is generated in *Gitsbe* for each cell-line-network  
386 (**Supplementary Methods**). Then, the experimental drug combinations are translated into *in silico*  
387 combinations in *Drexpa* and evaluated in *Oris* to compute *in silico* synergy scores. The predicted  
388 synergy scores are compared with the experimental values in *Synco*, and *Siflex* is then used to  
389 investigate drug effects at the functional level and to generate mechanistic hypotheses. Full  
390 documentation is available at <https://github.com/druglogics/trafikk>.



391

392 **Fig 6. Overview and modular architecture of the Trafikk pipeline.** The workflow illustrates the sequential integration of context-specific  
393 network calibration (Celios), ensemble model generation (Gitsbe), in silico drug translation (Drexpa), synergy scoring (Oris), predictive  
394 benchmarking (Synco), and functional analysis of drug effects.

### 395 Base network model

396 In the Trafikk pipeline, a base signalling network is required to initialise and optimise cell line-  
397 specific models. We used the Cell Fate Decision (CFD) model as the base network, as it captures  
398 core cancer-relevant pathways involved in cell survival, proliferation, and apoptosis in a tumour-  
399 agnostic manner.

400 To improve coverage of drug targets present in the Sanger-2024 datasets, we manually  
401 expanded the network (CFDv2). The original model already covered a subset of drug targets, and the  
402 expansion was limited to three drug target nodes and seven supporting interactions. Each node is  
403 annotated with the HGNC protein symbol(s), and each edge includes a PubMed identifier (PMID) for  
404 validation. Full model details are provided in **Supplementary Tables S1–S2**.

### 405 Celios module

406 To personalise the base network with cell-line-specific parameters, we first collected and  
407 integrated omics information using the Celios (Cell Line Omics) module to define node activities.  
408 Using the entities represented in the CFDv2 model, the module integrates gene mutation, gene

409 expression, and transcription factor activity information, specific to the selected cell lines, with the  
410 generic network (**Supplementary Methods**). We limited the analysis to binarized mutations, CNV  
411 (GISTIC +2 coded as 1 and GISTIC -2 coded as 0) (Mermel, et al., 2011), and transcription factor  
412 activity as input to generate the activity matrix (**Supplementary Table S3**). The output is a calibration  
413 file for each cell line that will later be used in the next modules. Celios also adds a condition to the  
414 calibration file to select models in a *proliferation*-like state in the Gitsbe module, requiring the  
415 normalized *globaloutput* to be equal to 1. Here, the *globaloutput* represents the weighted aggregate  
416 activity of the module outputs, rescaled to the 0,1 interval (**Supplementary Methods**).

### 417 Drexpa module

418 To represent the drug panel and combinations from the experimental drug screen datasets in  
419 the Trafikk pipeline, we developed the Drexpa (Drug Experimental Panel) module to automatically  
420 generate pipeline drug profiles (PD\_profiles) for each drug and the respective combinations. Drexpa  
421 integrates information from multiple public resources, including GDSC, OpenTargets Platform,  
422 UniProt, BindingDB, and ChEMBL, to query protein targets associated with each drug in the  
423 experimental dataset (**Supplementary Methods**). Each protein target is mapped to the CFDv2 model  
424 nodes, and drugs without a mapped target are excluded from the analysis. Therefore, we focused on  
425 a portion of experimental datasets (**Table 3**). With the drug panel, Drexpa generates a perturbation  
426 file for each cell line. Depending on the format of the drug screen dataset, it can be a generic  
427 perturbation file or specific to each cell line (**Supplementary Methods**).

428 **Table 3. In silico drug screening data.**

| Pipeline Dataset | Single drugs | Unique target profiles* | Cell lines | Cancer Types | Combinations |
|------------------|--------------|-------------------------|------------|--------------|--------------|
| Sanger-2024      | 17           | 15                      | 757        | 26           | 25           |
| Merck-2016       | 7            | 6                       | 38**       | 6            | 21           |

429  
430 \* Unique target profiles correspond to single protein targets or a set of protein targets associated with an experimental drug.

431 \*\* The screen included the ovarian cancer cell line UWB1.289 and its BRCA1-reconstituted derivative (UWB1.289+BRCA1).  
432 However, no distinct SIDM was available for the BRCA1-reconstituted derivative and therefore the derivative line was  
433 excluded from the analyses.

434 Oris module

435 Oris (Outcome and Drug Response Inference in Boolean Systems) is a module built on top of  
436 the recently described BooLEVARD (15) for estimating drug combination effects from ensembles of  
437 Boolean models. Oris operates on model ensembles previously calibrated to experimental data and  
438 quantifies the impact of single and combined perturbations on downstream signalling, providing a  
439 mechanistic proxy for drug sensitivity at the network level.

440 To reduce the computational burden on large models or large perturbation sets, Oris  
441 implements a sampling step. Models are randomly selected and their performance is evaluated using  
442 BooLEVARD's CountPaths method (15); models that complete within a user-defined threshold are  
443 retained. Sampling continues until the requested number of models is reached or no more valid  
444 models remain.

445 For synergy quantification, a subset of output nodes was designed to represent proliferation  
446 and apoptosis (**Supplementary Methods**). For each model instance and perturbation condition, Oris  
447 computes node-level path-count scores and, when multiple stable states satisfy imposed constraints  
448 (e.g. media conditions or other calibration data), averages them to obtain a single model-level  
449 response.

450 A viability score is defined with smooth normalisation, as defined in **Equation 2**:

$$V = \frac{1}{2} \left[ \tanh \left( \frac{\sum_{i \in P} p_i - \sum_{j \in N} p_j}{s} \right) + 1 \right] \quad (2),$$

451 where  $p_k$  denotes the signed path-count score of output node  $k$ ,  $P$  denotes pro-proliferative nodes,  
452  $N$  denotes antiproliferative nodes, and  $s$  was calibrated from the empirical distribution of the raw  
453 viability signal to avoid saturation of the hyperbolic tangent mapping. Viability scores (**Equation 2**)  
454 were subsequently capped at the corresponding unperturbed value and normalised by the control,  
455 such that the unperturbed condition attained a value of  $V = 1$ .

456 In addition to computing synergy scores, Oris can quantify signed signal transduction paths  
457 toward all nodes in the network, enabling mechanistic inspection of how perturbations affect signal  
458 propagation signalling across the model (**Supplementary Methods**).

#### 459 Synco module

460 To automatically evaluate all pipeline predictions against experimental datasets, we used the  
461 Synco (Synergy Comparison) module from DrugLogics, which integrates and compares *in silico*  
462 predictions with experimental synergy scores (**Supplementary Methods**). The module was adapted  
463 to integrate Oris synergy output and harmonise both *in silico* and experimental synergy data, enabling  
464 the calculation of standard decision-analytic metrics, such as accuracy, precision, and recall, as well  
465 as standard classification metrics, including the Area Under the Receiver Operating Characteristic  
466 Curve (AUC-ROC), the Area Under the Precision-Recall Curve (AUC-PR), and the F1 Score, and  
467 summarised using different plots (<https://github.com/ViviamSB/SYNCO>).

#### 468 Siflex module

469 In addition to synergy data, the Oris module also generates node-level path-count scores,  
470 which can be used to interpret the activation and inhibition of signalling pathways inside the base  
471 model. Therefore, to investigate the synergistic drug effects at the functional level and generate  
472 mechanistic hypotheses, we developed the Siflex (Signal Flow Exploration) module, which focuses  
473 on explaining where and how these synergistic effects manifest. The module processes Oris outputs  
474 alongside the base network and KEGG pathway annotations.

475 First, to interpret node-level signalling information at a functional level, a pathway-based  
476 analysis of single and double-perturbation outcomes is performed by integrating BooLEVARD-derived  
477 path-count scores (15) into pathway-level activity measures. Nodes in the network were annotated to  
478 pathways using the KEGG database (26). Pathway enrichment is assessed using a hypergeometric  
479 test with Benjamini-Hochberg correction ( $FDR \leq 0.01$ ), and only significant enriched pathways were  
480 retained for downstream analyses. In addition, pathway overlap was quantified using the  
481 Szymkiewicz-Simpson coefficient.

482 For each model instance, node-level signed path-count scores are averaged across the  
483 selected stable states, yielding a single value  $p_i$  per node. These values were transformed into  
484 normalised node-level scores according to **Equation 3**:

$$X_i = \frac{\text{sign}(p_i)\log(1 + |p_i|)}{\sum_{j \in \mathcal{N}} |\log(1 + |p_j|)|} \quad (3),$$

485 where  $\mathcal{N}$  denotes the set of all nodes in the model. This transformation applies signed logarithmic  
486 scaling to attenuate large-magnitude path-count values while preserving directionality, followed by  
487 normalisation by the total absolute signal across the model.

488 Pathway-level scores were then computed by aggregating node-level scores for each pathway  
489 according to **Equation 4**:

$$S_k = \text{median}\{X_i : i \in \mathcal{N}_k\} \quad (4),$$

490 where  $\mathcal{N}_k$  denotes the set of nodes annotated to pathway  $k$ . The median was used to obtain a robust  
491 summary of pathway-level activity.

492 These pathway-level scores are then used as input to support systematic comparison and  
493 visualization of single-drug and combination responses in Siflex. For combinations previously  
494 classified as synergistic using Bliss independence, Siflex computes a pathway impact score that  
495 quantifies the additional pathway perturbation induced by the combination relative to either single  
496 drug. For a given pathway  $k$ , the impact score is defined as **Equation 5**:

$$I_k = ||S_K(AB)| - \max(|S_k(A)|, |S_K(B)|)| \quad (5),$$

497 where  $S_k$  denotes the pathway-level scores under drug  $A$ , drug  $B$ , and the combination  $AB$ . This  
498 score is used to rank pathways and select subsets for downstream network- and pathway-level  
499 exploration (**Supplementary Methods**), without redefining or re-estimating drug synergy.

500 Together, this framework provides a consistent link between node-level signal propagation,  
501 pathway-level summarization, and downstream exploration of synergistic drug effects. By integrating  
502 normalized pathway scores and the pathway impact metrics within a modular analysis pipeline, Siflex  
503 enables systematic comparison of single-drug and combination responses across biological contexts.  
504 Detailed descriptions of data processing steps, visualization options, and interactive exploration are  
505 provided in **Supplementary Methods**.

## 506 **Unsupervised analysis of pathway-level functional responses**

507 Pathway-level functional scores (**Equation 4**) were used as input for unsupervised analyses  
508 aimed at characterizing global response patterns across drug combinations and cellular contexts.  
509 Prior to multivariate analyses, feature matrices were standardized across samples by centring each  
510 pathway score to zero mean and scaling to unit variance (z-scores). False positives and false  
511 negatives were not used in this analysis.

512 Principal component analysis (PCA) was performed on the standardized pathway-level  
513 functional scores to identify dominant sources of variability across double-drug perturbations.  
514 Projections were computed using singular value decompositions and visualized in two dimensions.  
515 To identify recurrent functional response patterns, unsupervised hierarchical clustering was applied  
516 to the pathway-level functional scores. Hierarchical clustering was performed using average linkage,  
517 and the optimal number of clusters was determined by silhouette optimization, resulting in  $K = 10$   
518 functional clusters (**Supplementary Fig S1**).

519 Cluster assignments were used for downstream analyses and visualization. To identify cluster-  
520 specific pathway drivers, pathway scores within each cluster were compared against all remaining  
521 samples using a Wilcoxon rank-sum test. P values were adjusted for multiple testing using the  
522 Benjamini-Hochberg procedure, and pathways were considered cluster-specific if they met an FDR  
523 threshold of  $< 0.01$  and showed consistent enrichment or depletion in at least 65% of cluster members.

524 In addition, cosine distances between pathway-level functional signatures were computed  
525 pairwise across cell lines within each drug combination to assess intra-combination functional

526 variability. These distances were used to quantify the consistency of functional responses across  
527 cellular contexts for a given combination.

## 528 **Use of Generative Artificial Intelligence (AI)**

529 During manuscript preparation, the authors used ChatGPT (OpenAI, GPT-4.5) and Grammarly for  
530 language refinement, structural editing, and improvement of clarity and readability. The tools were  
531 used to support phrasing and conciseness. The graphical abstract and Fig 6 were solely created by  
532 the authors using Canva, with no third-party copyrighted material. Table 3 was generated with  
533 assistance from the AI tool Claude (Anthropic). The authors reviewed and validated all outputs. No  
534 generative AI tools were used for data analysis, result interpretation, or the generation of original  
535 scientific content. All conceptual development, methodological design, analysis, and final editorial  
536 decisions were performed by the authors, who take full responsibility for the content of the manuscript.

## 537 **Conflict of interest**

538 The authors declare no competing interests.

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## 550 **Data availability**

551 Trafikk's source code, installation instructions, and usage tutorial are freely available at  
552 <https://github.com/druglogics/trafikk>.

## 553 **Author Contributions**

554 M.F. and V.S.B. contributed equally to this work in conceptualisation, investigation, formal  
555 analysis, data curation, writing (original draft), and visualisation. V.S.B developed the code for the  
556 Celios, Drexpa, and Synco modules. Kr.L. developed the code for the DrugProfiler database tool used  
557 in the Drexpa module. M.F., with support from J.Z. in conceptualization, developed the code for the  
558 Oris module. V.S.B and M.F. developed the code for the Siflex module. E.T., J.Z., T.A., Ka.L., and  
559 Å.F. contributed to supervision and writing (review & editing). T.A., Ka.L. and Å.F were responsible  
560 for project administration and funding acquisition.

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## 654 **Supporting information**

655 **Supplementary Fig S1.** Silhouette optimization for hierarchical clustering of pathway-level functional  
656 scores.

657 **Supplementary Fig S2.** Predictive performance across 26 cancer types in the Vis-2024 dataset. Ring  
658 plots summarizing classification performance for each of the 26 cancer types in the Vis-2024 dataset.  
659 For each cancer type, outer rings represent correct versus missed predictions, and inner rings show  
660 true positives, true negatives, false positives, and false negatives. Accuracy, precision, and balanced  
661 accuracy are reported below each plot, along with the number of evaluated cell lines per tissue, and  
662 recall is reported in the center of each ring.

663 **Supplementary Fig S3.** Distribution of performance metrics across cancer types in the Vis-2024  
664 dataset. **(A)** Heatmap showing F1 score, ROC–AUC, and PR–AUC values per cancer type. **(B)** Violin  
665 plots displaying the distribution of ROC–AUC scores across selected tissues. The dashed horizontal  
666 line indicates the random classification threshold (ROC-AUC = 0.5). The accompanying table  
667 summarizes per-tissue statistics, including mean, median, minimum, maximum, standard deviation,  
668 and the number of cell lines with ROC-AUC > 0.5.

669 **Supplementary Fig S4.** Predictive performance in the O’Neil-2016 dataset. **(A)** Ring plot  
670 summarizing overall classification performance across cell line-combination comparisons in the  
671 O’Neil-2016 dataset. **(B)** Box plots showing F1 score, ROC–AUC, and PR–AUC distributions across

672 evaluable cell lines. Metrics were computed only for cell lines containing both synergistic and non-  
673 synergistic experimental combinations. (C) Heatmap displaying per-cell line performance metrics (F1  
674 score, ROC-AUC, PR-AUC).

675 **Supplementary Fig S5.** Overlap coefficient matrix between KEGG pathways significantly enriched  
676 for the model nodes (FDR < 0.01). For each pathway pair, the Szymkiewicz-Simpson overlap  
677 coefficient was computed based on gene sets restricted to the model foreground. Pathways were  
678 hierarchically clustered (average linkage, Euclidean distance) and only the lower triangle is displayed  
679 for clarity.

680 **Supplementary Fig S6.** Principal component analysis (PCA) of pathway-level functional scores  
681 derived from BooLEVAR. Each point represents a cell line under a given double-perturbation  
682 condition, restricted to true positive and true negative responses. Faceted panels show individual  
683 combinations with points colored by tissue of origin.

684 **Supplementary Fig S7.** Inter-cell line heterogeneity across drug combinations. Scatterplots show  
685 pairwise cosine distances between cell-line functional pathway signatures for each drug combination.  
686 Each point represents a pair of cell lines treated with the same combination. Combinations are  
687 ordered along the y-axis based on median cosine distances, ranging from more broadly  
688 heterogeneous patterns to more consistent responses, and points are colored according to the  
689 functional cluster assignment.

690 **Supplementary Table S1.** Node annotations for the Cell Fate Decision (CFDv2) network.

691 **Supplementary Table S2.** Edge annotations for the Cell Fate Decision (CFDv2) network, including  
692 interaction types and regulatory directionality.

693 **Supplementary Table S3.** Calibration data used to generate cell line-specific Boolean models.

694 **Supplementary Table S4.** Trafikk in the landscape of computational drug synergy methods.  
695 Calibration data used to generate cell line-specific Boolean models. Abbreviations: CL, cell line; PPI,  
696 protein-protein interaction; CNV, copy number variation; TF, transcription factor; HSA, Highest Single

697 Agent; IDA, Independent Drug Action; PCI, pathway cross-talk index; PSS, Protein Synergy Scores;  
698 ROC-AUC, area under the receiver operating characteristic curve; PR-AUC, area under the precision-  
699 recall curve; SHAP, Shapley Additive Explanations.

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