

# Therapeutic Target for Cancer Metastasis : Regulation of TGF- $\beta$ by Post Translational Modification

# Contents

## Cancer metastasis

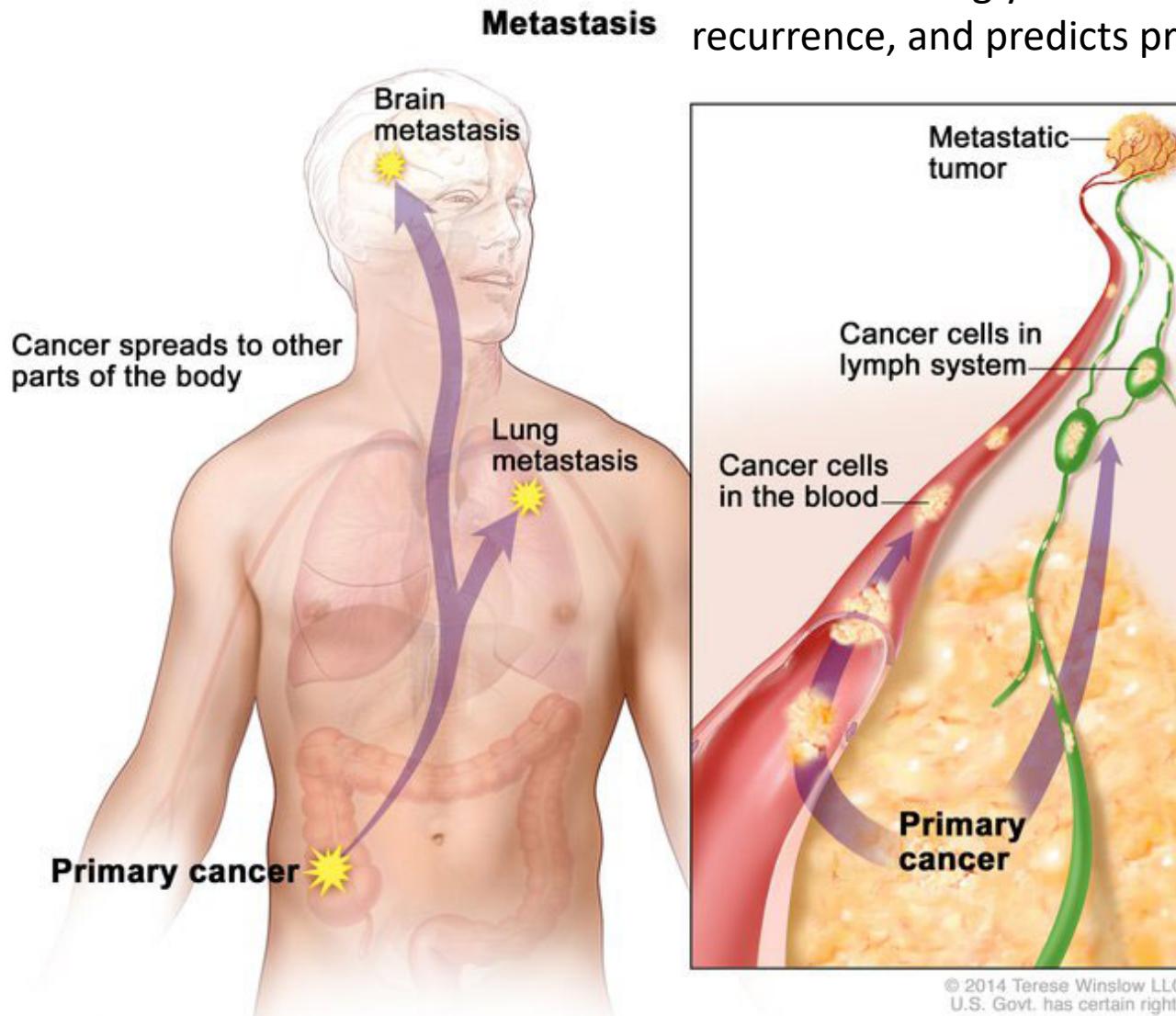
- Cancer metastasis
- Epithelial-to-Mesenchymal Transfer

## Metastasis inhibition – Blocking TGF $\beta$ pathway

- TGF $\beta$  (inducing EMT) is promising target for cancer metastasis
- Control of TGF $\beta$  signaling by Ubiquitination

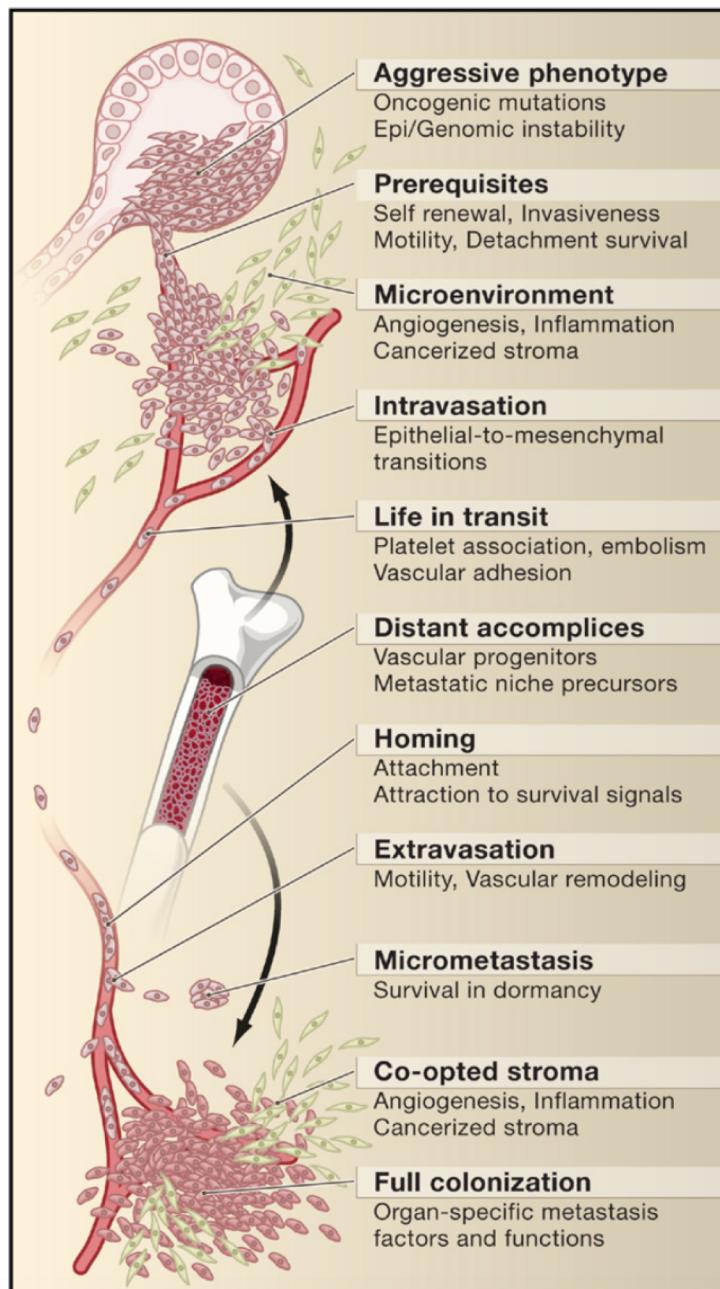
# Cancer metastasis

- Cause of 90% of deaths from solid tumors
- Gene profiling for metastasis in primary tumors correlates strongly with the likelihood of metastatic recurrence, and predicts prognosis of the patients.



© 2014 Terese Winslow LLC  
U.S. Govt. has certain rights

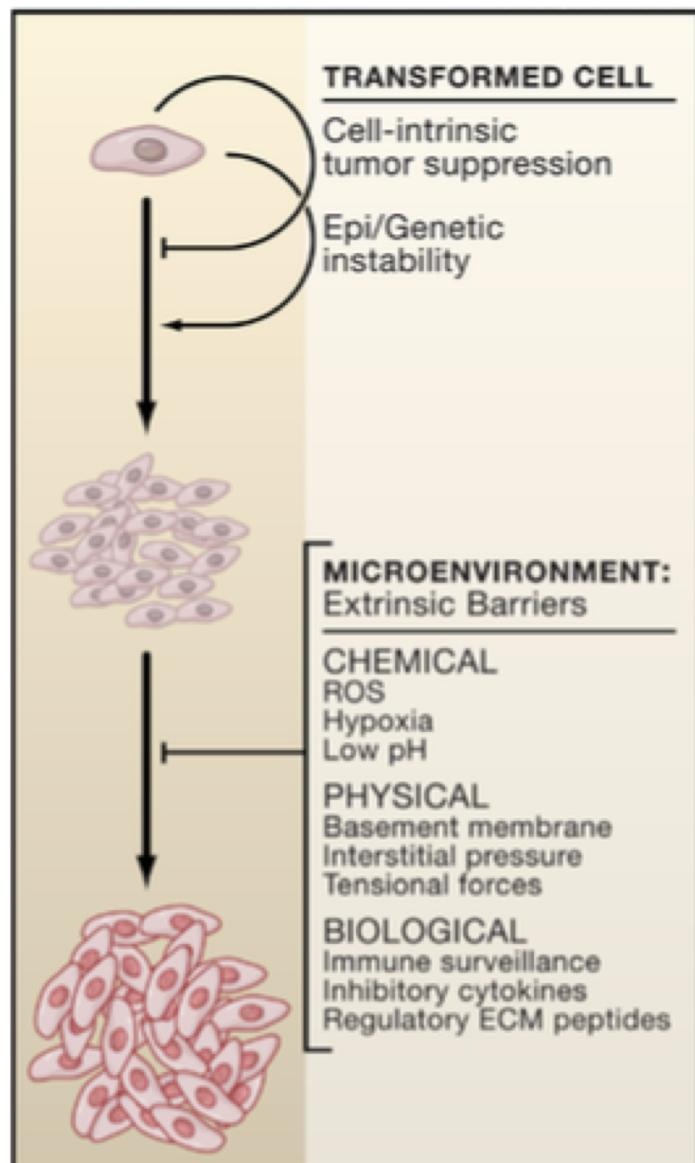
# Prerequisites for Metastasis



Cancer cells must evade or co-opt multiple rules and barriers that were refined for long years of organismal evolution.

- Tolerance for apoptosis Inappropriate proliferation...  
Tolerance for tumor microenvironment (Hypoxia, reactive oxygen, limited nutrients)
- Loss of cellular adhesion (E-cadherin), Increased motility and invasiveness  
Collusion with Immune response (NF-κB, MMP9, HGF), stromal cells (TGF-β, IL-10, IL-23...)
- Entry and survival in the circulation (lymph, vessel)  
Angiogenesis, co-opting blood platelets.
- Exit into new tissue and colonization  
Integrins for secondary organs, Cancer stem cells

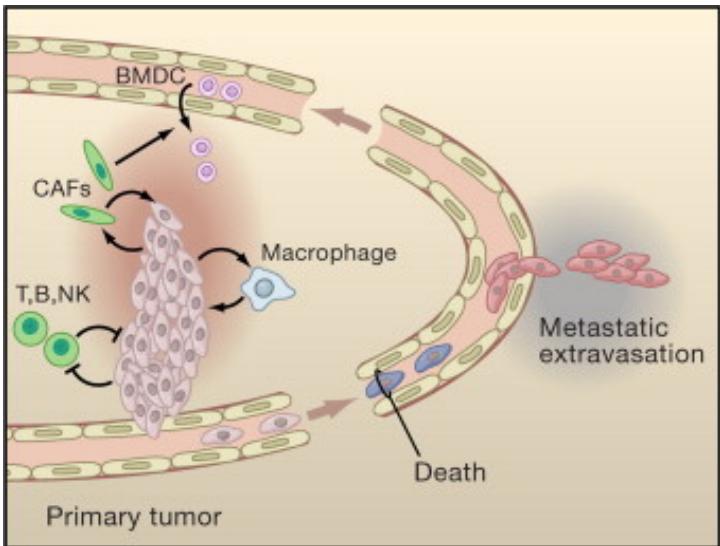
# Cancer Evolution for Metastasis



Cancer cells must evade or co-opt multiple rules and barriers that were refined for long years of organismal evolution.

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# Cancer Evolution for Metastasis



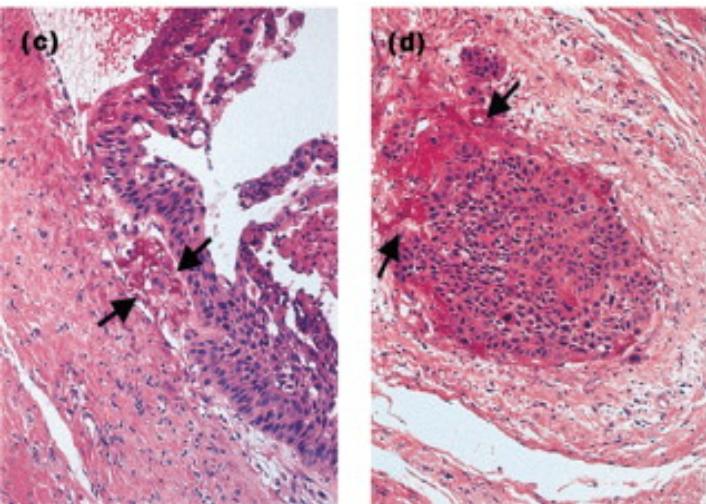
G. P. Gupta et al. Cell 127, 679 (2006)

Cancer cells must evade or co-opt multiple rules and barriers that were refined for long years of organismal evolution.

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# Prerequisites for Metastasis

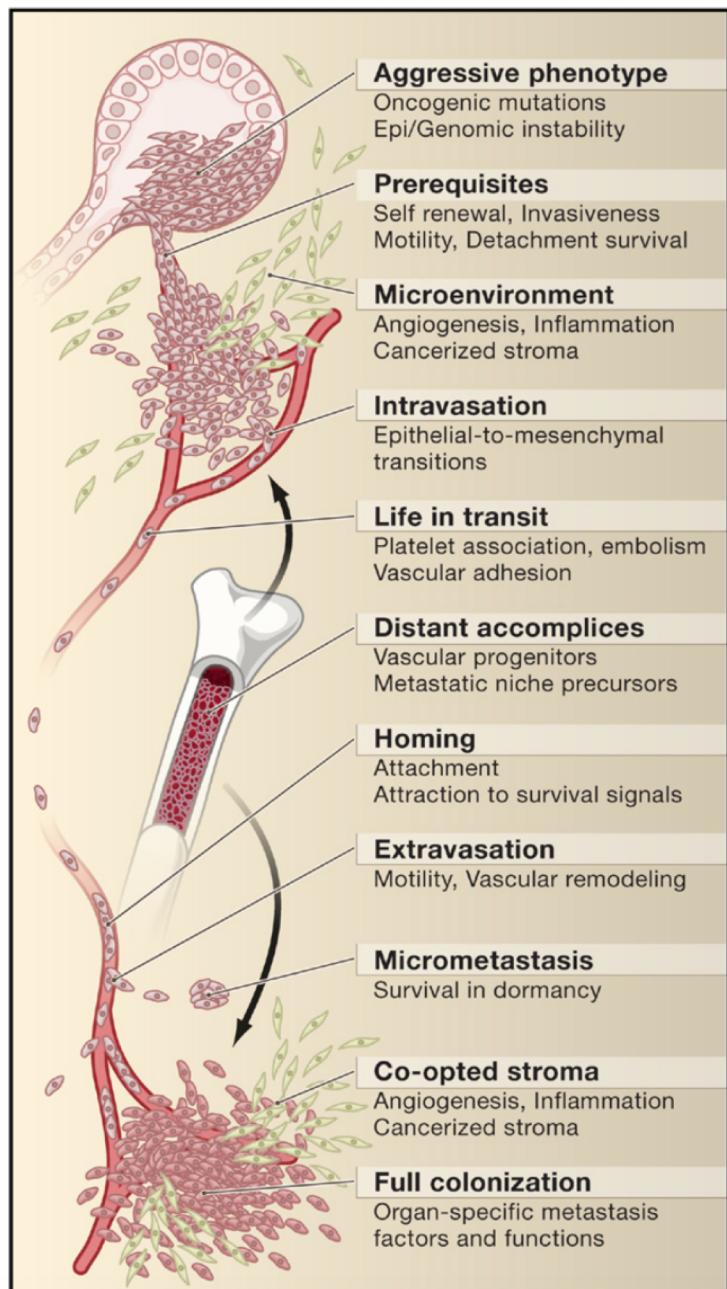
Cancer cells must evade or co-opt multiple rules and barriers that were refined for long years of organismal evolution.



Carcinoma located within blood vessels.  
Squamous-cell carcinoma (扁平上皮癌) of tongue (舌). Fibrin deposition (arrows) and tissue-like architecture.

- Tolerance for apoptosis Inappropriate proliferation...  
Tolerance for tumor microenvironment (Hypoxia, reactive oxygen, limited nutrients)
- Loss of cellular adhesion (E-cadherin, extracellular matrix), Increased motility and invasiveness  
Collusion with Immune response (NF- $\kappa$ B, VEGF, HGF), stromal cells (TGF- $\beta$ , IL-10, IL-23...)
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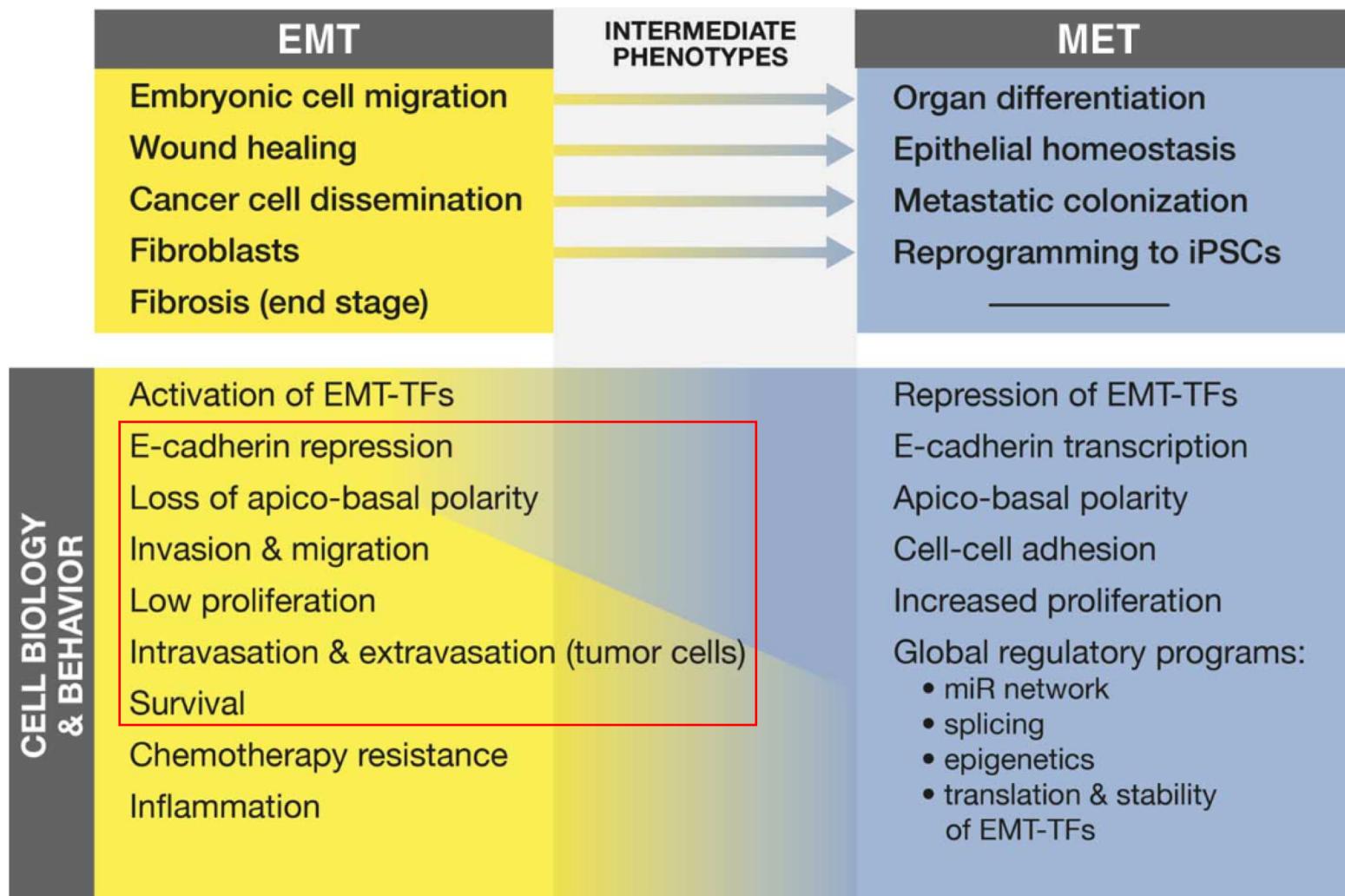
## Cancer metastasis

- Cancer metastasis
- Epithelial (上皮)-to-Mesenchymal (間葉) Transfer

## Metastasis inhibition – Blocking TGF $\beta$ pathway

- TGF $\beta$  (inducing EMT) is promising target for cancer metastasis
- Control of TGF $\beta$  signaling by Ubiquitination

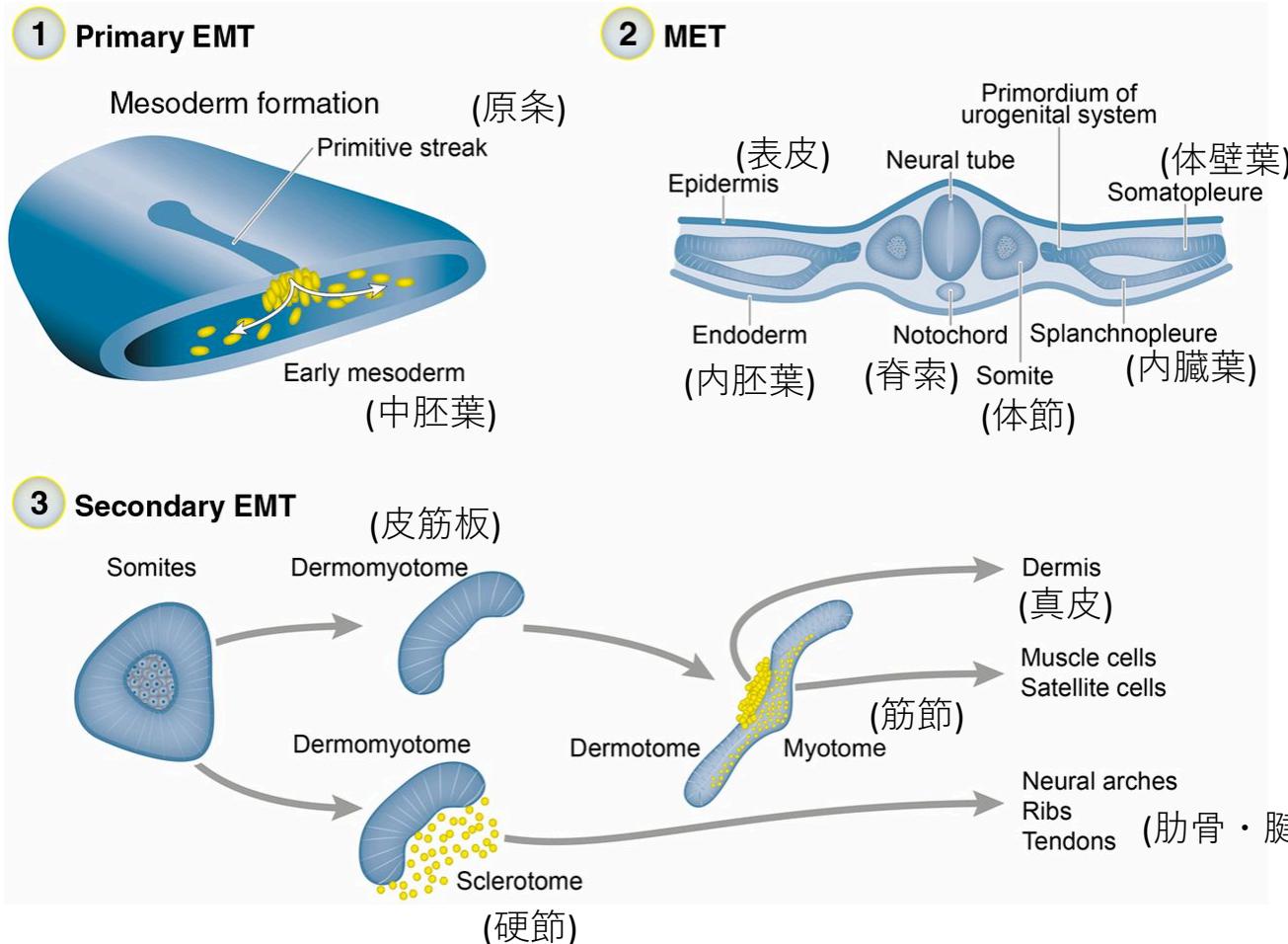
# Cancer cells escape from carcinomas have characteristics of “EMT”



- (EMT-induced cells gain property of stem cells)

M Angela Nieto, *Science* 342, 1234850 (2013)

# Epithelial-to-Mesenchymal Transition (EMT)



\*mesoderm --> muscle, body cavity(体腔)...

\*endoderm --> digestive tract, liver, ...

## EMT

- Embryonic cell migration
- Wound healing
- Cancer cell dissemination
- Fibroblast formation

## MET

- Organ differentiation
- Epithelial homeostasis
- Metastatic colonization

## Features of EMT

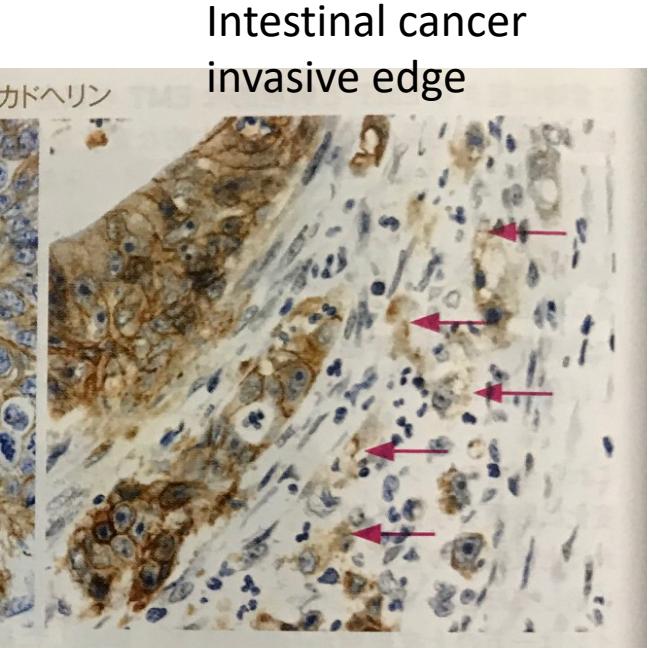
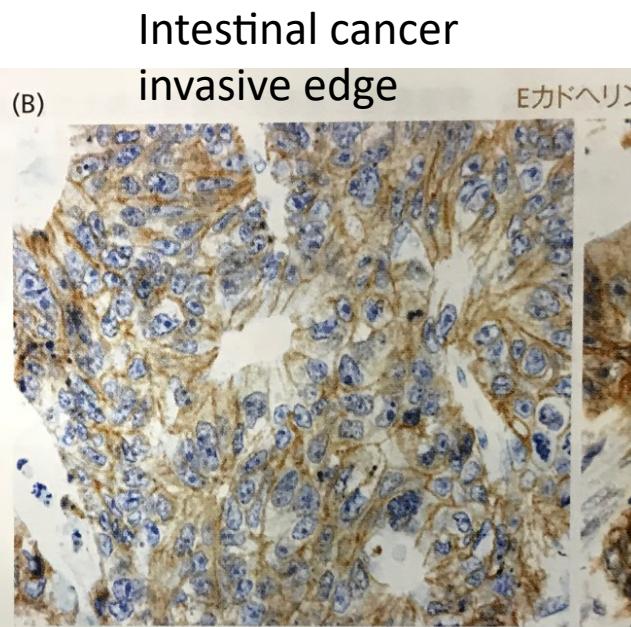
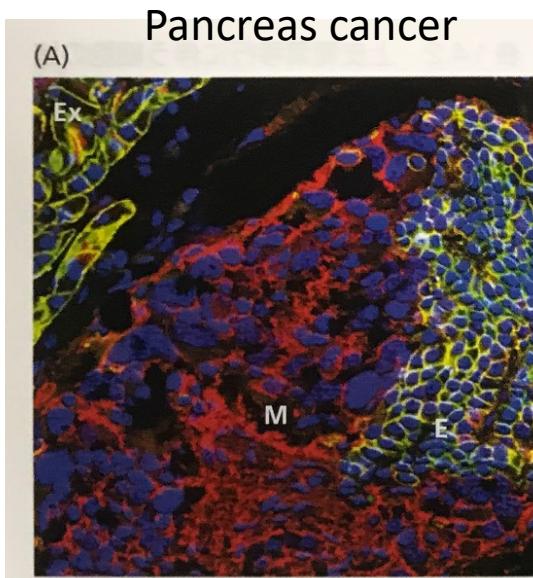
- N-cadherin, vimentin... (mesenchymal marker)
- EMT-TFs (transcription factor), such as ZEB1, Twist, Snail...

## Features of MET

- E-cadherin,  $\alpha$ -catenin... (Epithelial marker)

Embryonic development undergo 2 or 3 rounds of EMT and MET to form each organs. 11

# EMT may occur in cancer cells...



Decrease of Epithelial marker is found in tumor cells. And the many features of EMT match the requirement of cancer metastasis, so it is thought that EMT should occur in cancer metastasis.

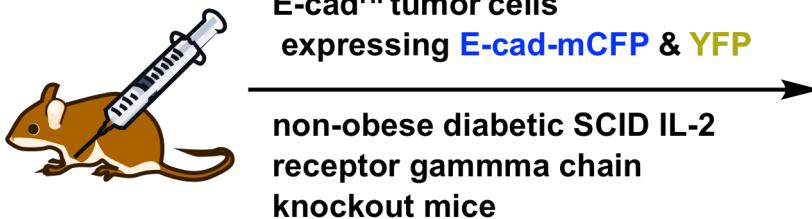
## Features of EMT

- N-cadherin, vimentin... (mesenchymal marker)
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## Features of MET

- E-cadherin, α-catenin... (Epithelial marker)

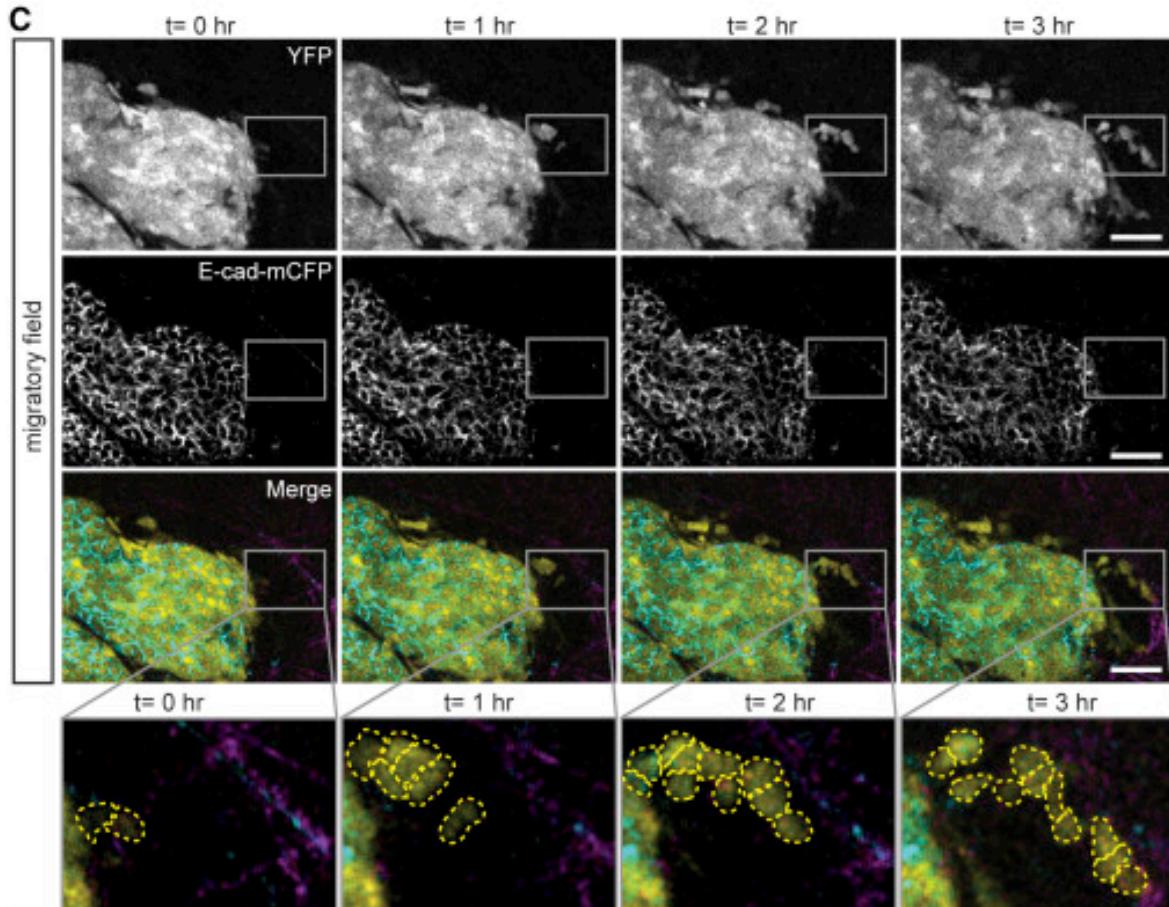
In model mice, EMT occur in metastasis.



E-cad<sup>HI</sup> ... Epithelial expression

E-cad<sup>LO</sup> ... Mesenchymal expression

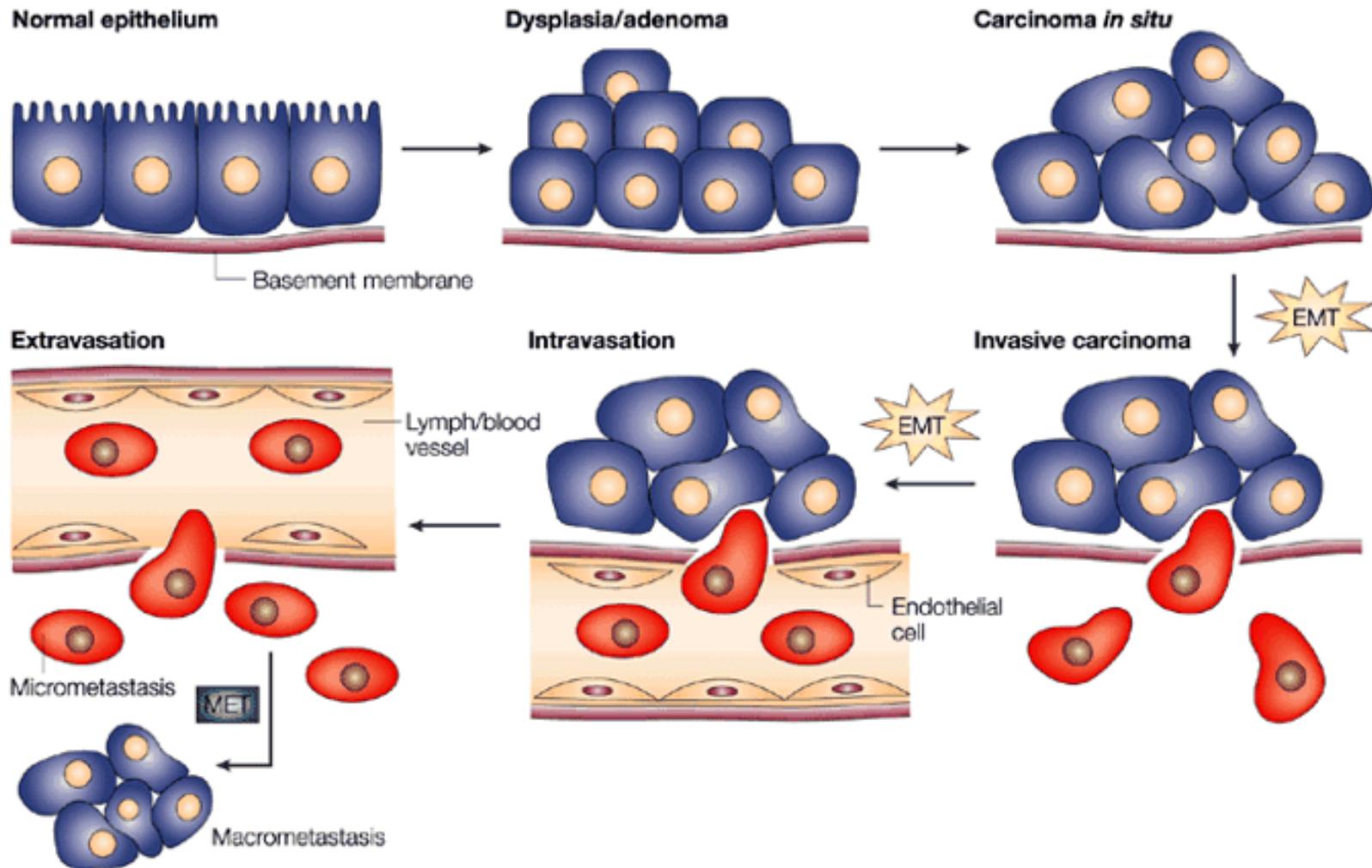
Yellow ... tumor cells



Motile tumor cells have undergone EMT without artificially modifying EMT regulators.

E. Beerling et al. Cell Reports  
14, 2281 (2016)

# Assumed role of EMT and MET in cancer metastasis



J. P. Thiery *Nature Reviews Cancer* 2, 442 (2002)

*Nature Reviews | Cancer*

# Short summary

- Cancer metastasis is critical problem for patients, because it causes death or poor prognosis.
- In metastasis step, tumor cells should clear many hurdles from various environmental pressures.
- Cancer cells evolve through their own epi/genomic instability or interaction with environment, and then gain mesenchymal features to survive harsh conditions.
- EMT program, which is primarily known in embryonic cells, is now thought to be the important step in tumor metastasis.

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## Cancer metastasis

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## Metastasis inhibition – Blocking TGF $\beta$ pathway

- TGF $\beta$  (inducing EMT) is promising target for cancer metastasis
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# EMT is new target for cancer?

- EMT is essential for progression and metastasis in the tumor metastasis.
- EMT-TFs are associated with chemo-resistance in cancer (see table below).

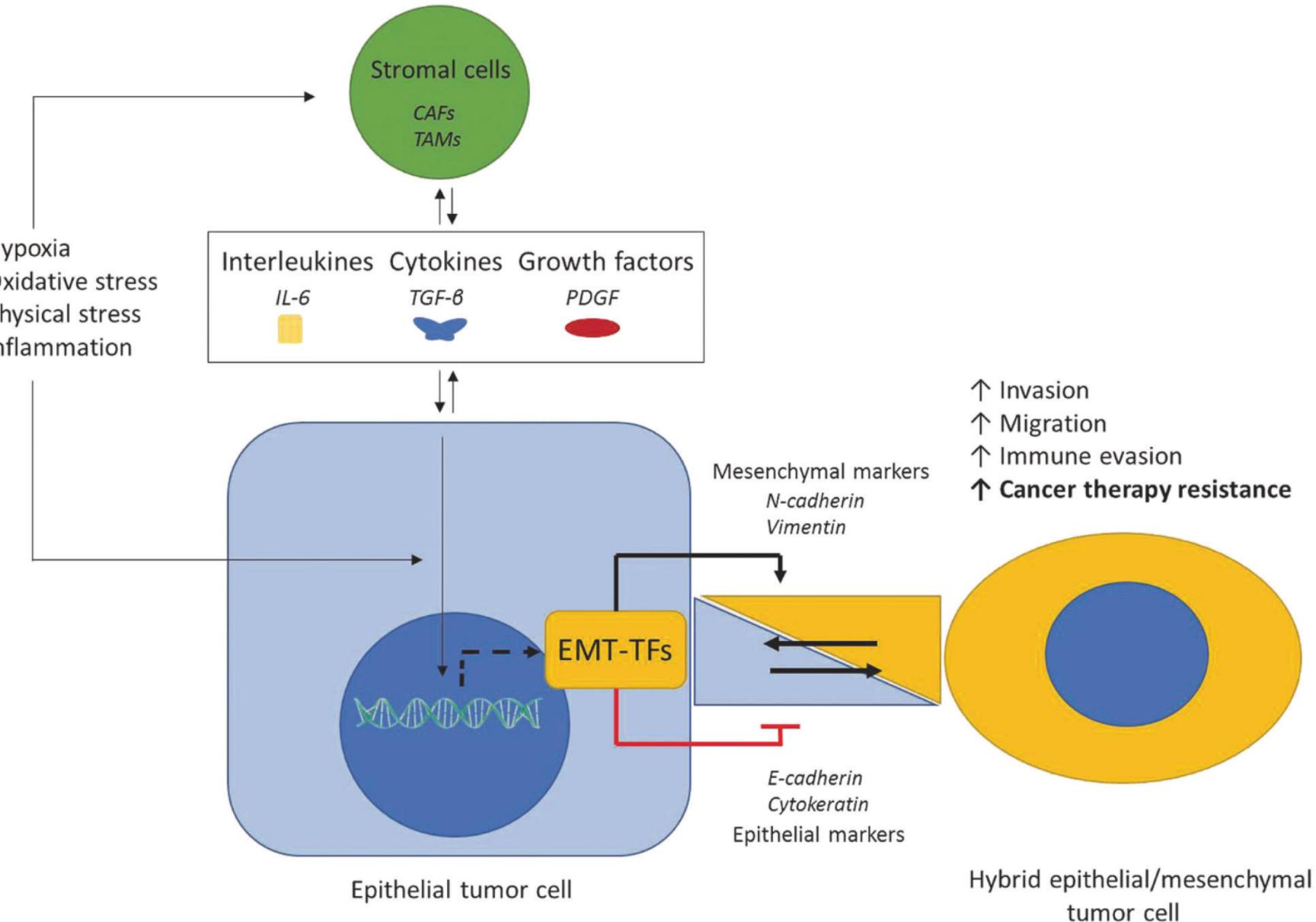
EMT-TF	Drug [83–129]	Cell line
TWIST1	Paclitaxel	Head and neck squamous cell carcinoma
	Paclitaxel, vincristine, cisplatin	Nasopharyngeal carcinoma
	5-Fluorouracil	Oral squamous cell carcinoma
	Paclitaxel, doxorubicin, letrozole, tamoxifen, fulvestrant, trastuzumab	Breast carcinoma
	5-Fluorouracil, gemcitabine	Hepatocellular carcinoma
	Cisplatin	Pancreatic cancer
	Anthracycline	Bladder cancer
	Paclitaxel	Epithelial ovarian carcinoma
	5-Fluorouracil	Colon cancer
	Oxaliplatin	Colorectal cancer
TWIST2	Cisplatin	Epithelial ovarian cancer
SNAI1	Cisplatin, gefitinib, erlotinib	Head and neck squamous cell carcinoma
	Cisplatin	Nasopharyngeal carcinoma
	Cisplatin	Non-small cell lung cancer
	Doxorubicin, camptothecin, 5-Fluorouracil	Breast carcinoma
	Oxaliplatin	Hepatocellular carcinoma
	5-Fluorouracil, gemcitabine	Pancreatic cancer
	Cisplatin	Prostatic cancer
	Radiation, paclitaxel, cisplatin	Epithelial ovarian cancer
	Oxaliplatin	Colorectal cancer
	Cisplatin	Nasopharyngeal carcinoma
SNAI2	Gefitinib	Lung adenocarcinoma
	Tamoxifen, fulvestrant, trastuzumab	Breast carcinoma
	Gemcitabine	Pancreatic cancer
	Radiation, paclitaxel, cisplatin	Epithelial ovarian cancer
	Cisplatin	Nasopharyngeal carcinoma
ZEB1	Nintedanib, erlotinib, crizotinib, gefitinib	Non-small cell lung cancer
	Docetaxel	Lung adenocarcinoma
	Radiation, doxorubicin, tamoxifen, fulvestrant, trastuzumab	Breast carcinoma

EMT-TFs can affect...

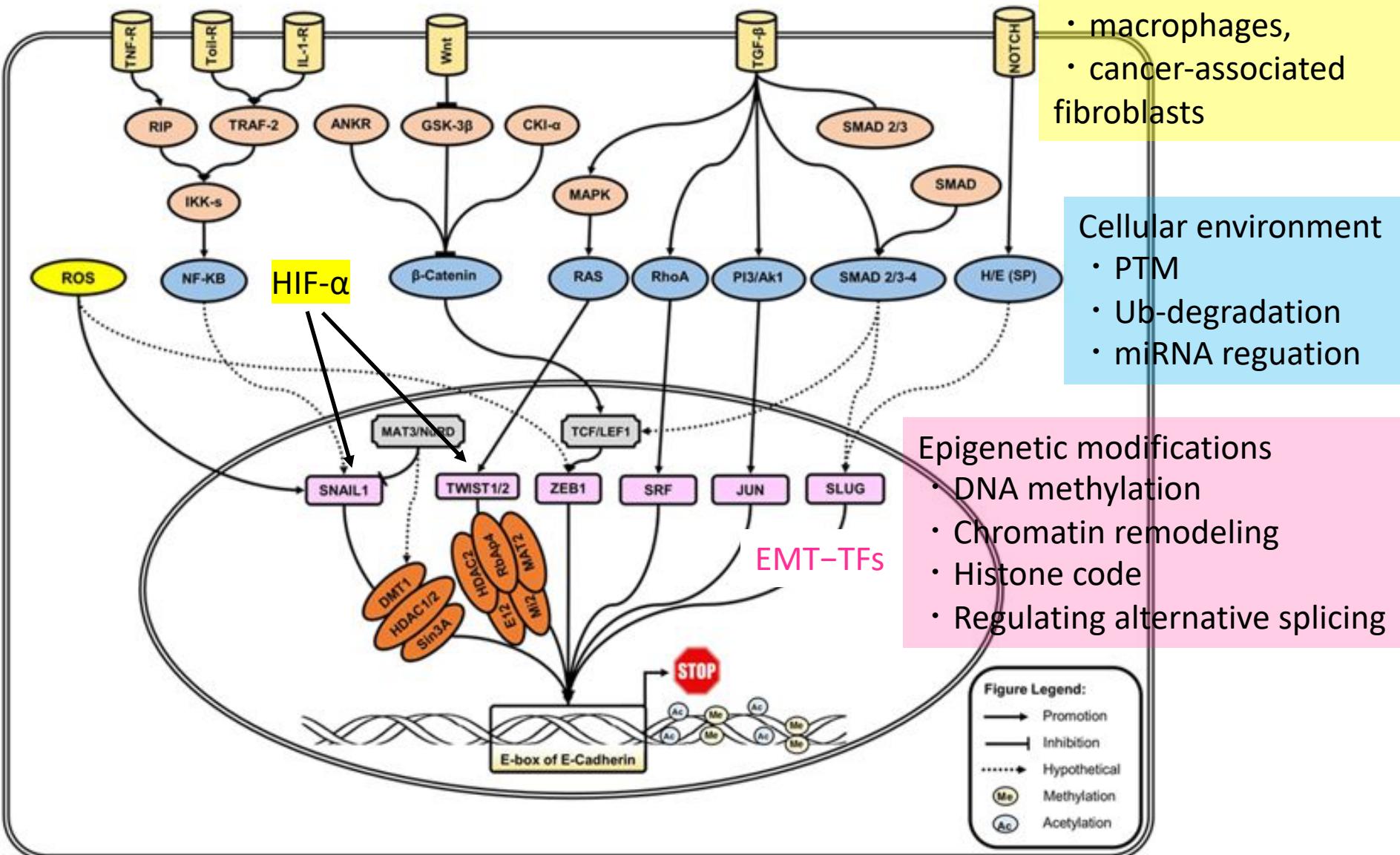
- drug metabolism by changing the expression of drug-transporters
- render tumor cells less sensitive to therapy induced apoptosis
- kinase inhibitor resistance (?)

EMT can result in extensive changes in the cytoskeleton and the tumor cell surface repertoire, which alters tumor immunogenicity on the cell surfaces.

# Molecular mechanism of EMT

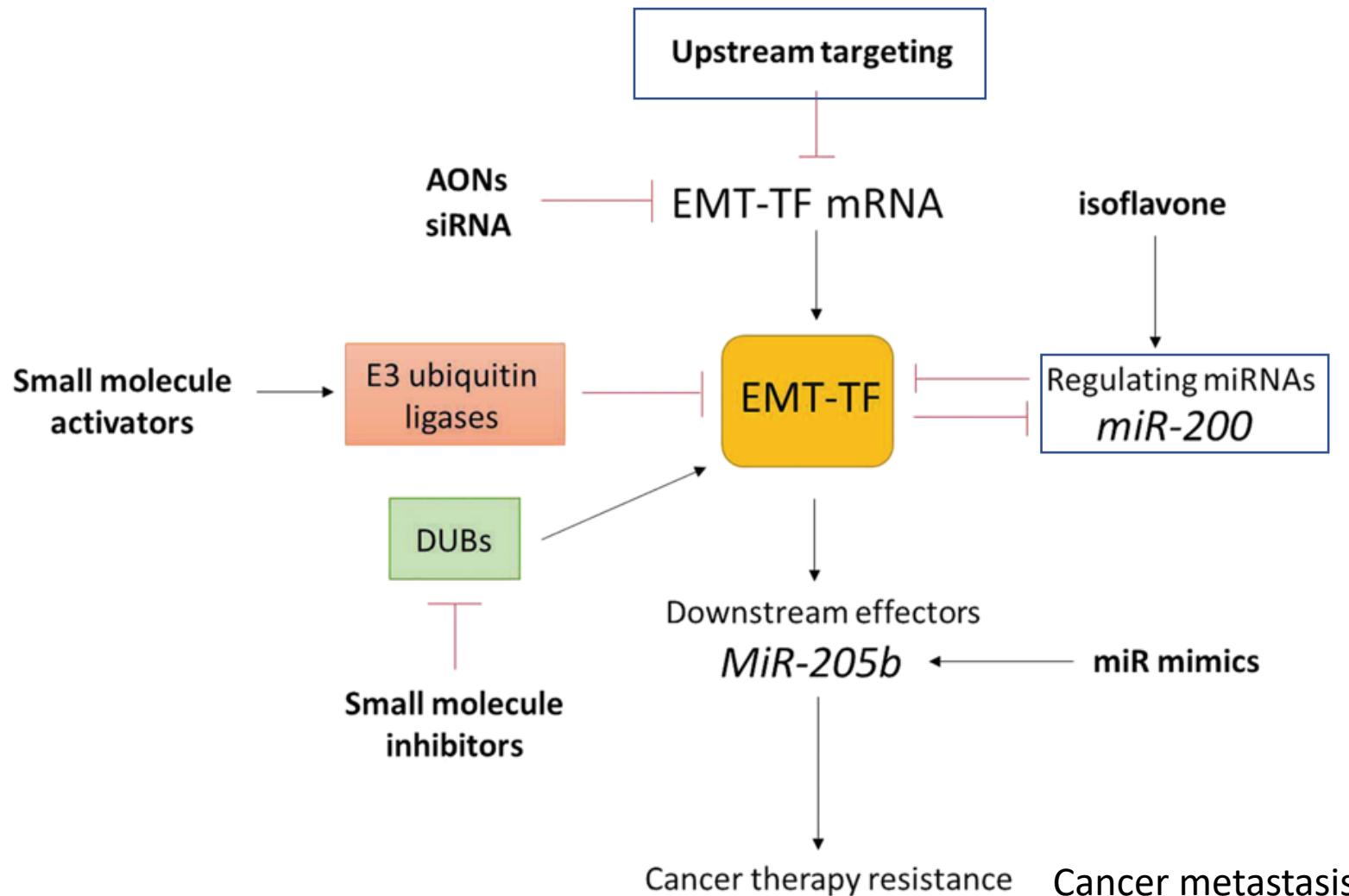


# EMT-inducible signal pathway



# Anti-cancer strategy toward EMT

- Targeting EMT-TFs or EMT-TFs signaling pathways (siRNA, miRNA, small inhibitor/activator)
  - Reduction of EMT-TFs results in MET (partly)
  - Combination therapy with chemotherapy



To prevent EMT of cancer cells, blocking TGF $\beta$  pathway seems to be promising.

Combination of  $\alpha$ TGF $\beta$  +  $\alpha$ PD-L1 provoked tumor regression.

# LETTER

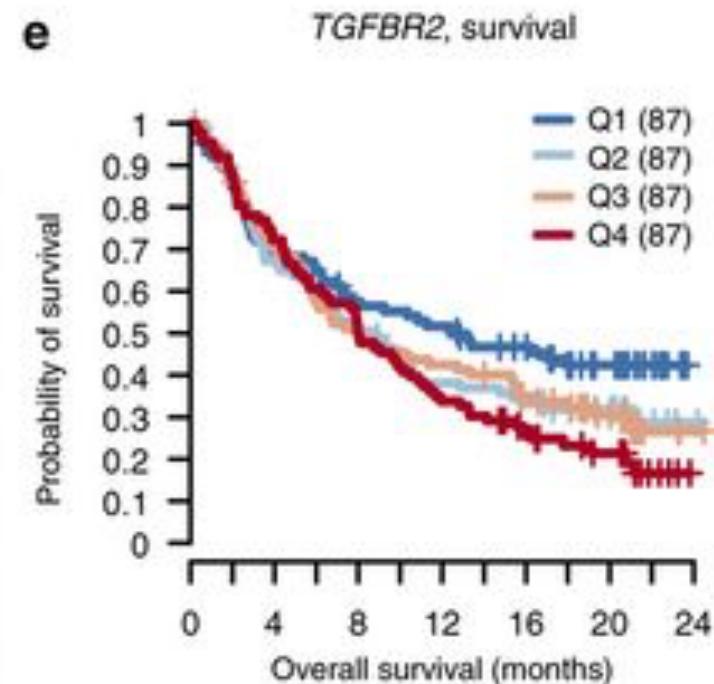
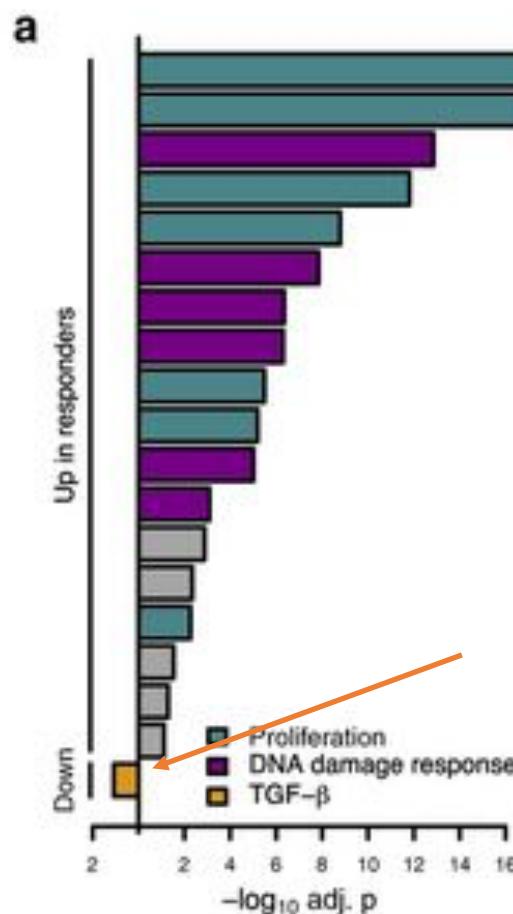
doi:10.1038/nature25501

## TGF $\beta$ attenuates tumour response to PD-L1 blockade by contributing to exclusion of T cells

Sanjeev Mariathasan<sup>1\*</sup>, Shannon J. Turley<sup>1\*</sup>, Dorothee Nickles<sup>1\*</sup>, Alessandra Castiglioni<sup>1</sup>, Kobe Yuen<sup>1</sup>, Yulei Wang<sup>1</sup>, Edward E. Kadel III<sup>1</sup>, Hartmut Koeppen<sup>1</sup>, Jillian L. Astarita<sup>1</sup>, Rafael Cubas<sup>1</sup>, Suchit Jhunjhunwala<sup>1</sup>, Romain Banchereau<sup>1</sup>, Yagai Yang<sup>1</sup>, Yinghui Guan<sup>1</sup>, Cecile Chalouni<sup>1</sup>, James Ziai<sup>1</sup>, Yasin Şenbabaoğlu<sup>1</sup>, Stephen Santoro<sup>1</sup>, Daniel Sheinson<sup>1</sup>, Jeffrey Hung<sup>1</sup>, Jennifer M. Giltnane<sup>1</sup>, Andrew A. Pierce<sup>1</sup>, Kathryn Mesh<sup>1</sup>, Steve Lianoglou<sup>1</sup>, Johannes Riegler<sup>1</sup>, Richard A. D. Carano<sup>1</sup>, Pontus Eriksson<sup>2</sup>, Mattias Höglund<sup>2</sup>, Loan Somarriba<sup>3</sup>, Daniel L. Halligan<sup>3</sup>, Michiel S. van der Heijden<sup>4</sup>, Yohann Loriot<sup>5</sup>, Jonathan E. Rosenberg<sup>6</sup>, Lawrence Fong<sup>7</sup>, Ira Mellman<sup>1</sup>, Daniel S. Chen<sup>1</sup>, Marjorie Green<sup>1</sup>, Christina Derleth<sup>1</sup>, Gregg D. Fine<sup>1</sup>, Priti S. Hegde<sup>1</sup>, Richard Bourgon<sup>1</sup> & Thomas Powles<sup>8</sup>

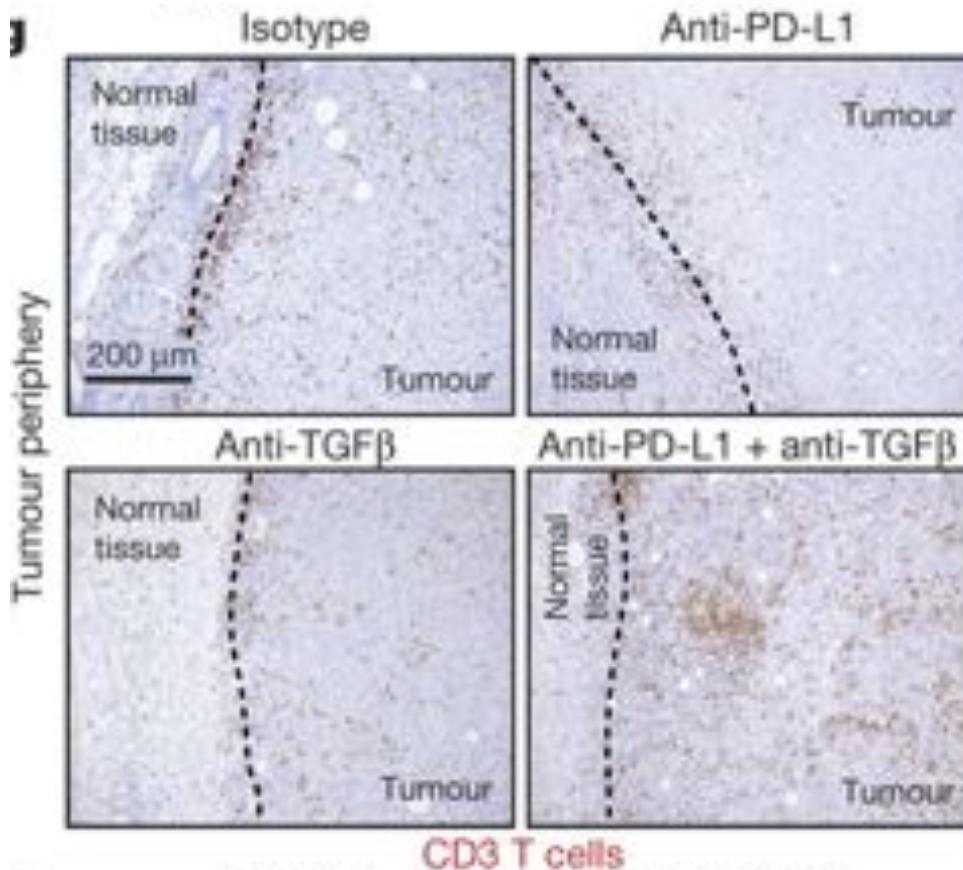
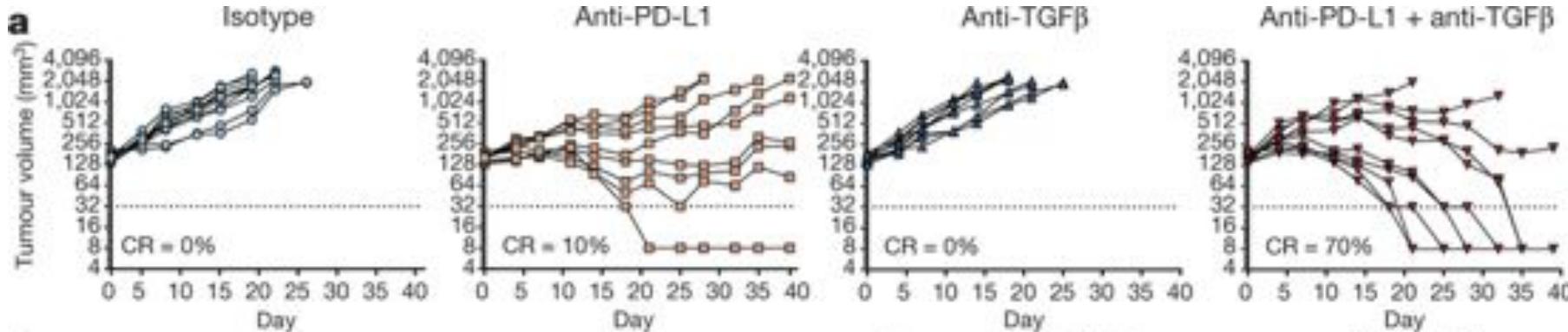
# Lack of response to anti-PD-L1 was associated with a signature of TGF- $\beta$ signaling in fibroblasts (from a large cohort of patients of MUC treated with anti-PD-L1 (atezolizumab).

Pathways associated with response to atezolizumab and cancer-immune phenotypes



TGFBR2 gene expression is significantly associated with non-response.

# Combination of $\alpha$ TGF $\beta$ + $\alpha$ PD-L1 provoked tumor regression.



EMT6 mouse mammary carcinoma model  
(immune-excluded phenotype)

Anti-TGF $\beta$  treatment significantly reduced  
TGF $\beta$  receptor signaling (pSMAD2/3).

Combined antibody led increase in tumor-infiltrating T cells.

# Contents

## Cancer metastasis

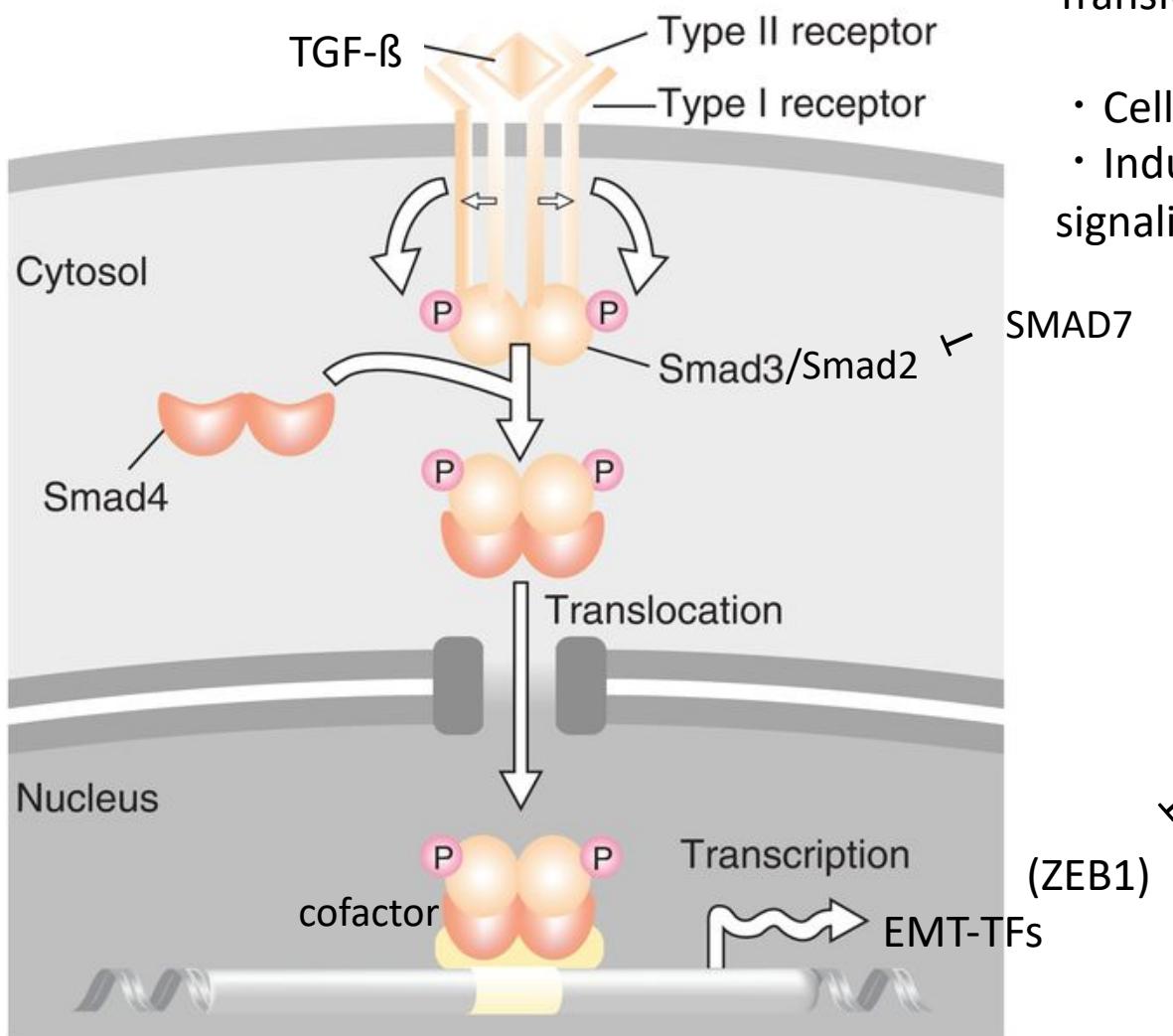
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# TGF- $\beta$ Signal ... one of the upstream pathways of EMT.

A



Transforming growth factor (TGF)- $\beta$

- Cell growth inhibitory function
- Induce EMT-TFs through SMADs signaling

SMAD7

miRNA200 family inhibits transcription of EMT-TFs induced by TGF $\beta$ .

P. A. Gregory et. al. Nature cell biology, 10, 593, 2008.

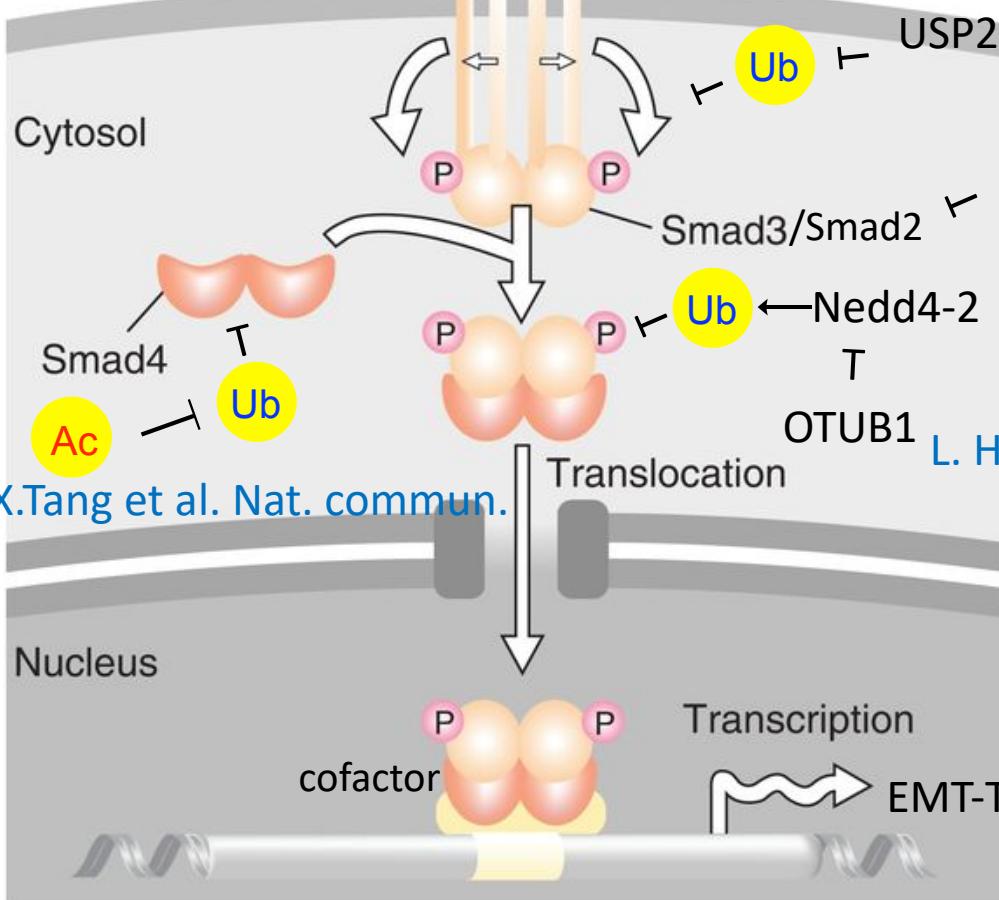
(ZEB1)

# TGF- $\beta$ Signal is regulated by ubiquitin

A

TGF- $\beta$ -SMAD signal path is maintained by many ubiquitination.

TGF- $\beta$   
Type II receptor  
Type I receptor



Zhao et al. 2018, Cell Reports 22, 2442.

SMAD7  
OTUD1

Z. Zhang et al. 2017, 8, 2116

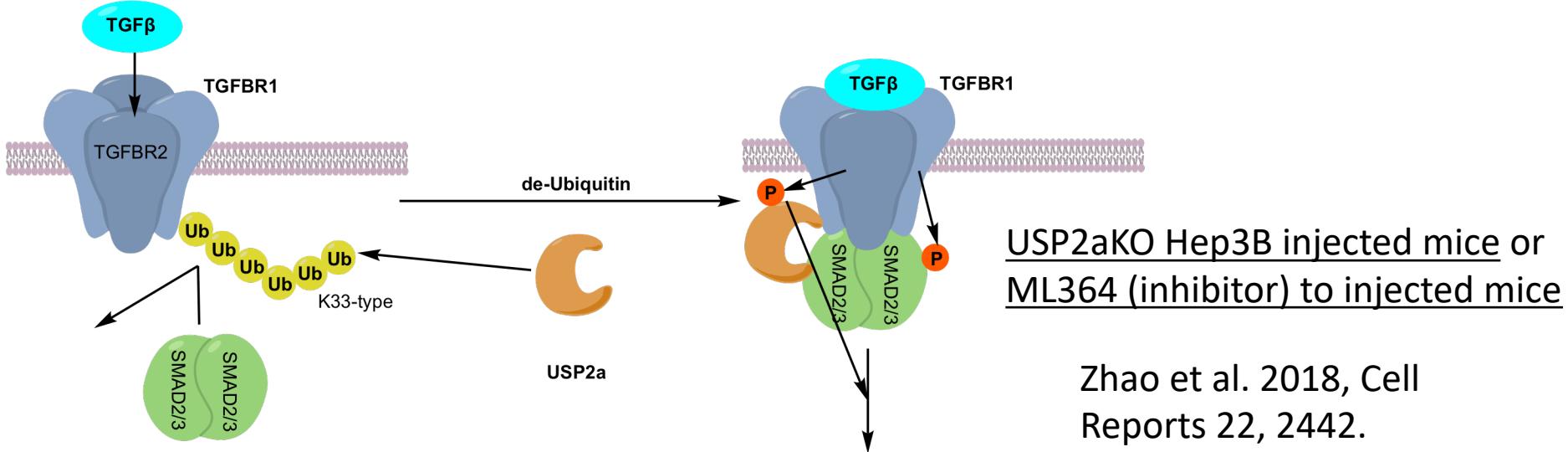
L. Herhaus et al. Nature commun. 2013, 4, 2519

miRNA200 family  
P. A. Gregory et. al. Nature cell biology, 10, 593, 2008.

(ZEB1)

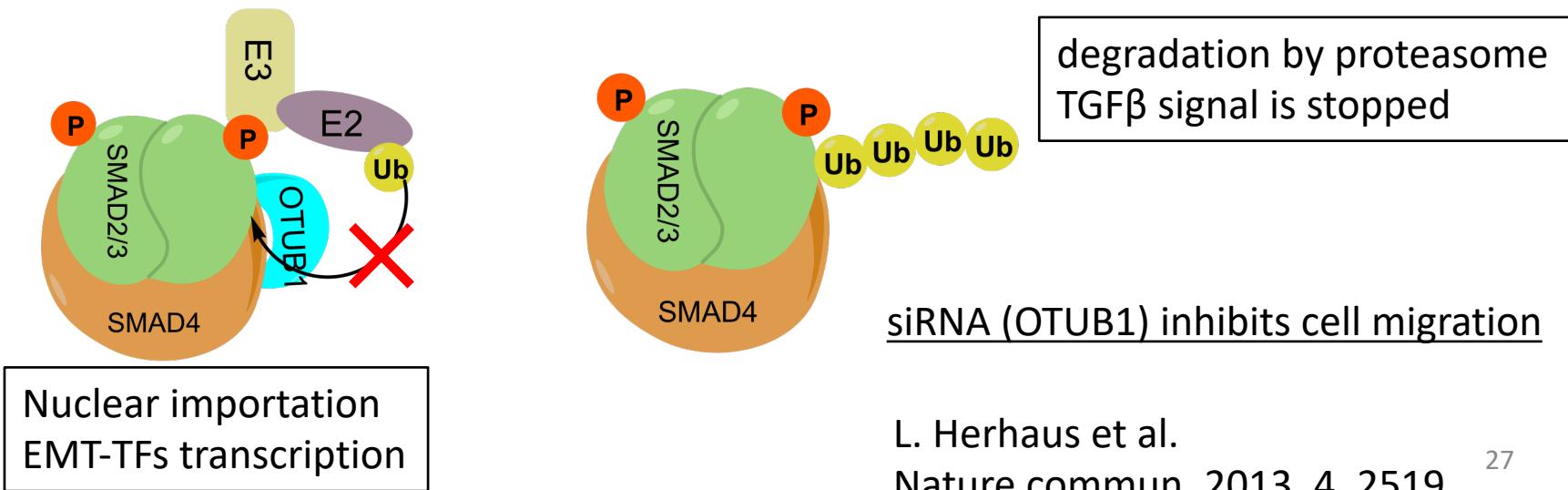
# Role of Ubiquitin in inhibition of the TGF $\beta$ signaling

- Steric hinderance (K33-type)

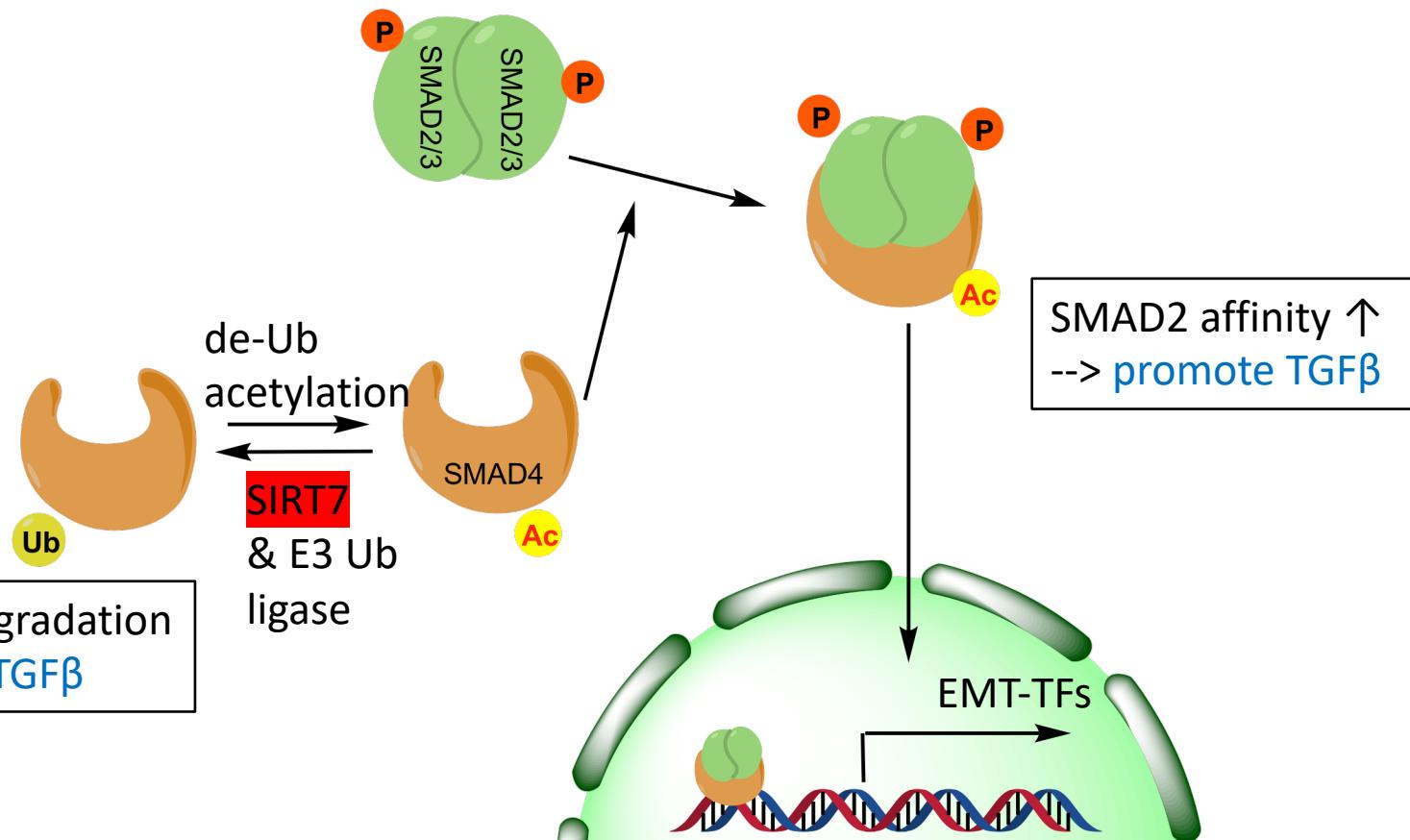


Zhao et al. 2018, Cell Reports 22, 2442.

- Degradation (K48-type)



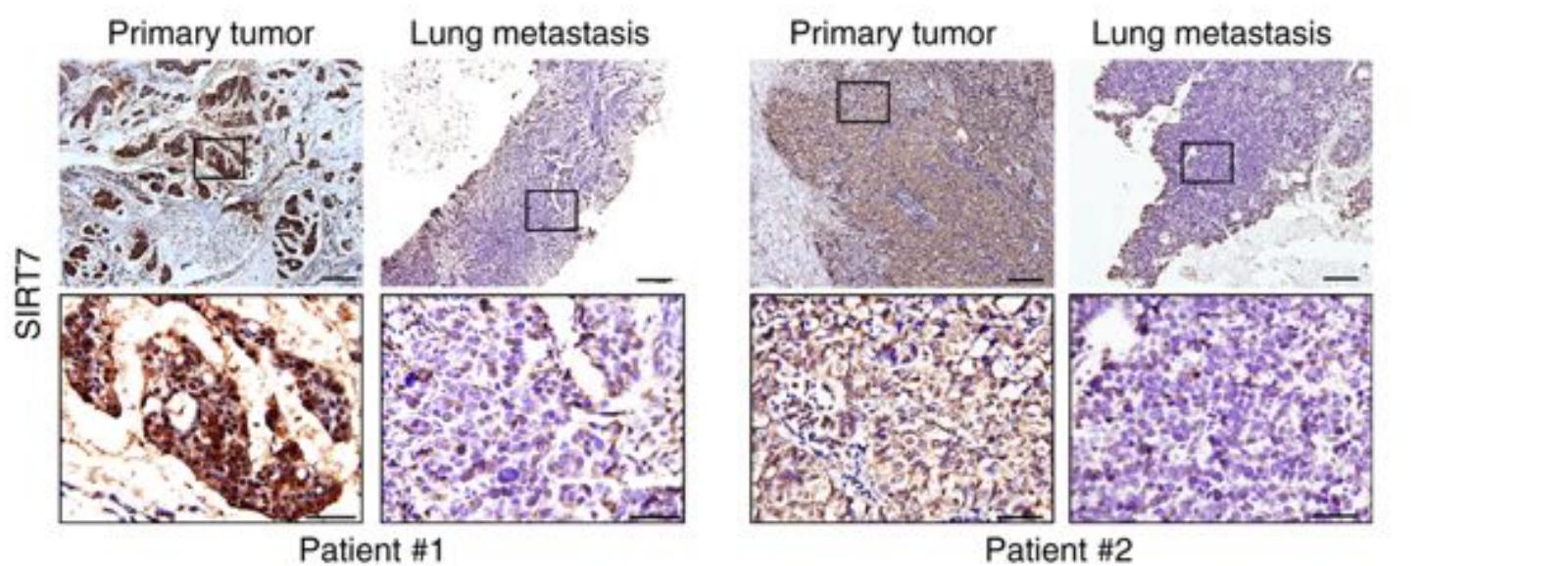
# SIRT7 antagonizes TGF- $\beta$ signaling and inhibits breast cancer metastasis



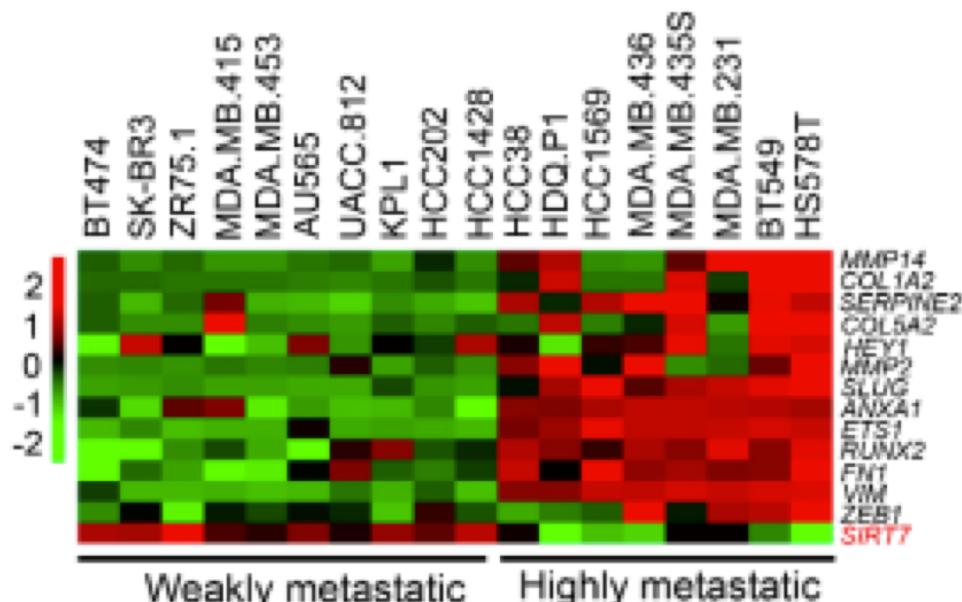
Resveratrol activates SIRT7 and inhibit TGF $\beta$ ,  
metastasis is inhibited in model mouse.

# SIRT7 is downregulated in breast cancer lung metastasis

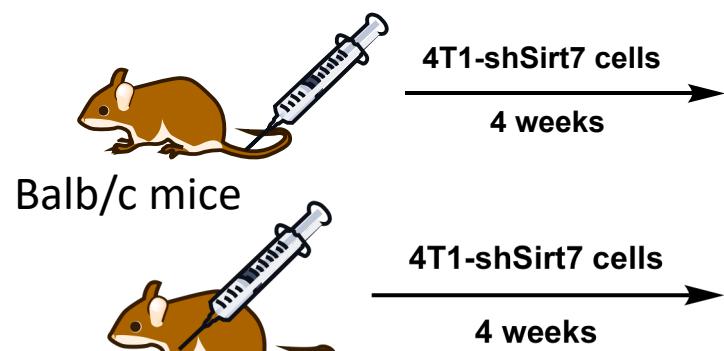
brown : IHC staining of SIRT7



- SIRT7 was downregulated in lung metastasis compared to in primary tumors.
- SIRT7 level is inversely correlated with metastatic capacity of various breast cancer cell lines.



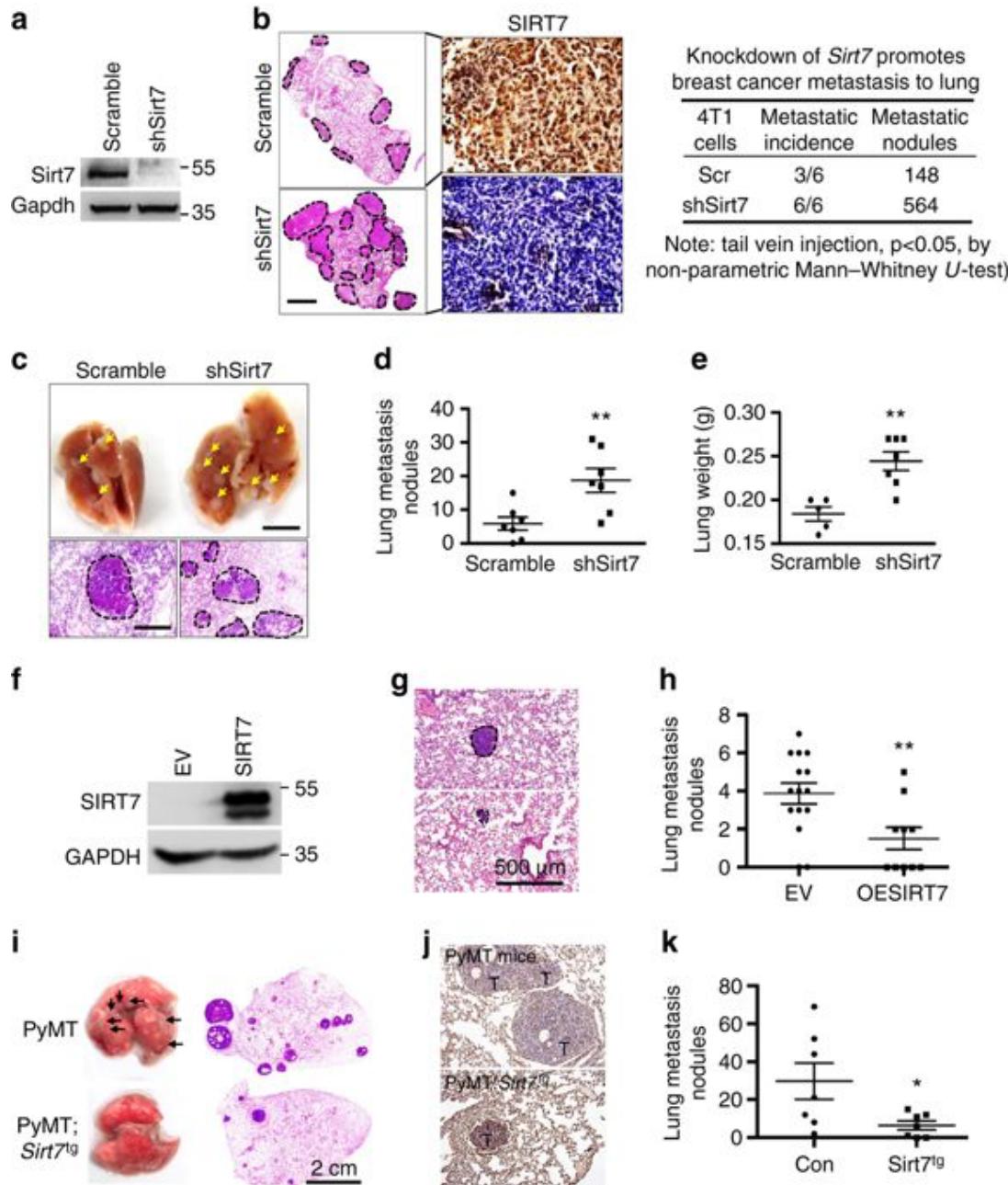
# SIRT7 inhibits breast cancer lung metastasis



SIRT7 KD promotes lung metastasis.

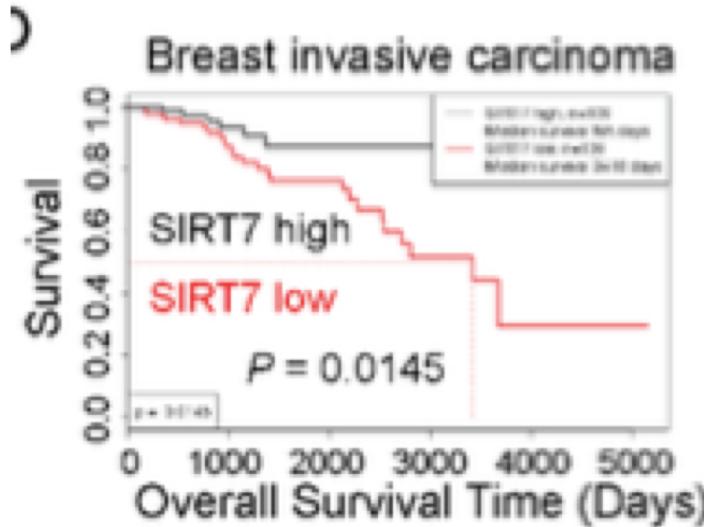


SIRT7 over expressing prevents lung metastasis.



# SIRT7 expression is associated with TGF- $\beta$ signaling

KEGG\* analysis in TCGA\*\*-RNA-seq data set obtained from 1097 individuals



\*Kyoto Encyclopedia of Genes and Genomes  
Database for bioinformatics, based on molecular interaction network (signal path, metabolism...)

\*\*Database of The Cancer Genome Atlas  
(National Cancer Institute &  
National Human Genome Research Institute)

## a SIRT7 negatively associated genes

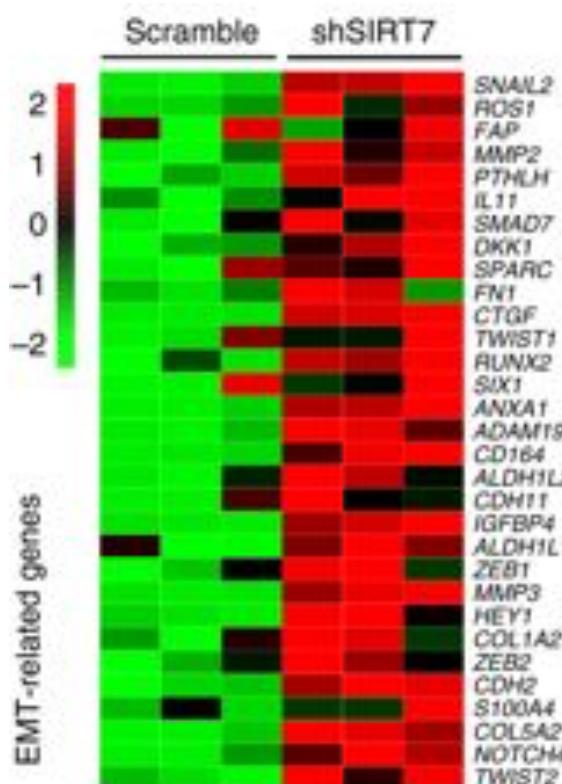
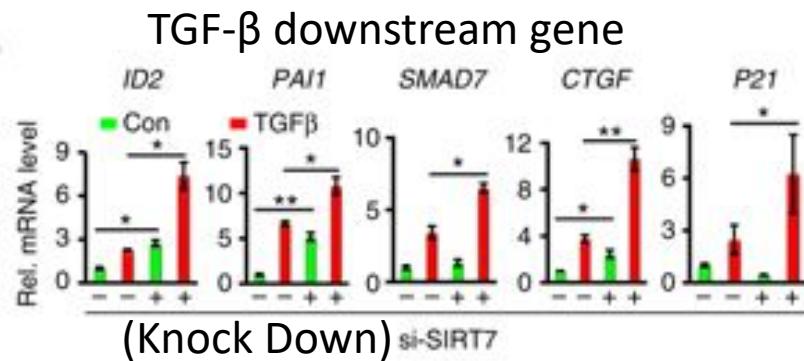
Pathway	p.geomean	stat.mean	p.val	q.val	set.size
hsa04510 Focal adhesion	0.00011	-3.83625	1E-04	0.01	55
hsa04512 ECM-receptor interaction	0.00035	-3.68957	4E-04	0.01	28
hsa04972 Pancreatic secretion	0.00177	-3.39427	0.0018	0.035	15
hsa04630 Jak-STAT signaling pathway	0.00221	-3.00039	0.0022	0.035	27
hsa04020 Calcium signaling pathway	0.00254	-2.8989	0.0025	0.035	36
hsa04360 Axon guidance	0.00306	-2.84102	0.0031	0.035	32
hsa04350 TGF-beta signaling pathway	0.00356	-2.90561	0.004	0.04	21
hsa04810 Regulation of actin cytoskeleton	0.00406	-2.70267	0.0041	0.035	52
hsa04270 Vascular smooth muscle contraction	0.00698	-2.53492	0.007	0.054	31
hsa02010 ABC transporters	0.01495	-2.34241	0.015	0.103	13
hsa04540 Gap junction	0.03588	-1.84057	0.0359	0.201	26
hsa04974 Protein digestion and absorption	0.03743	-1.83086	0.0374	0.201	21
hsa00510 N-Glycan biosynthesis	0.03864	-1.87511	0.0386	0.201	10
hsa00562 Inositol phosphate metabolism	0.04081	-1.82046	0.0408	0.201	14
hsa04310 Wnt signaling pathway	0.04824	-1.69809	0.0482	0.215	24
hsa04970 Salivary secretion	0.04995	-1.702	0.05	0.215	15

\*Extra Cellular Matrix

SIRT7 is important for TGF $\beta$  signal ??

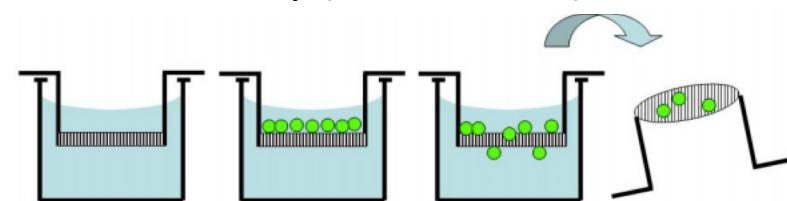
# SIRT7 indeed inhibits TGF- $\beta$ signaling and EMT.

b

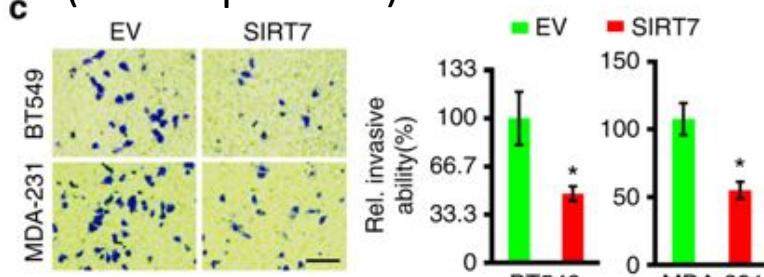


Genes which mediate EMT is enriched by SIRT7 KD.

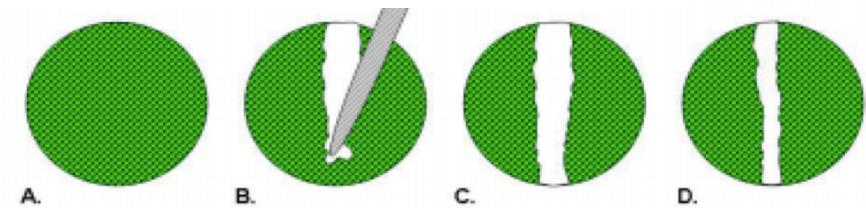
<Trans well assay (cell invasion)>



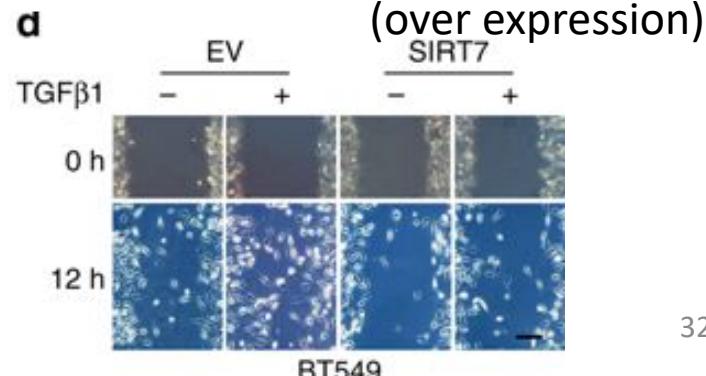
Pharmaceutics 2011, 3, 107-204  
(over expression)



<Trans well assay (cell migration)>

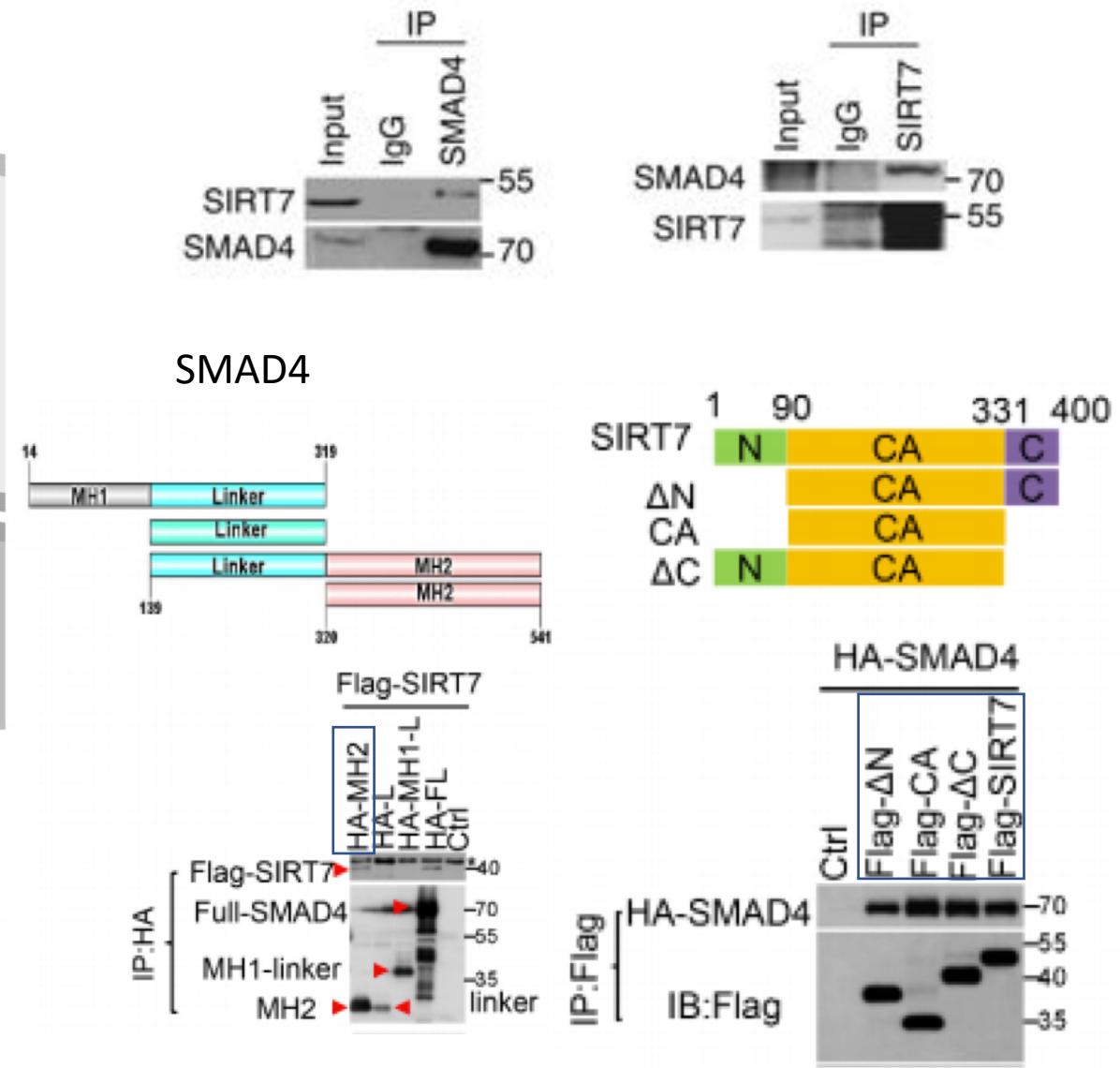
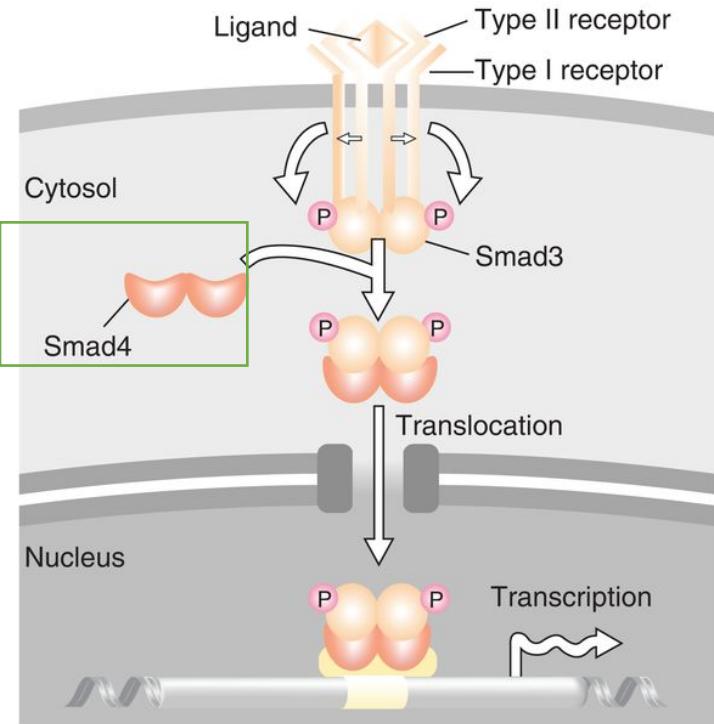


d



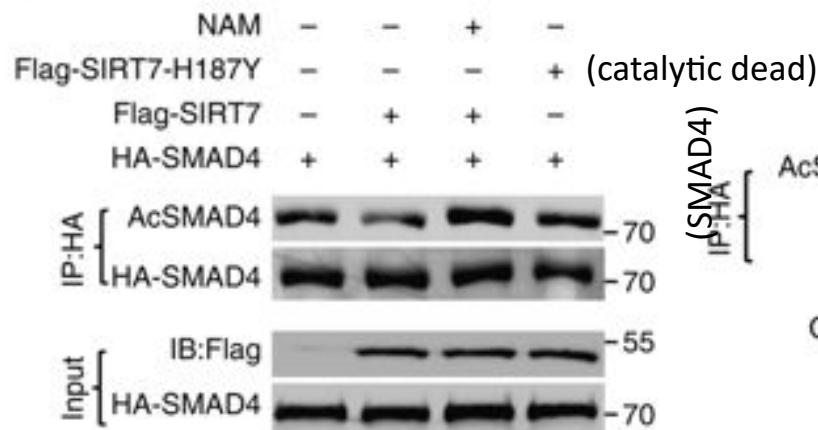
# SIRT7 interacts with SMAD4, especially SMAD4(MH2)-SIRT7(Catalytic domain).

A



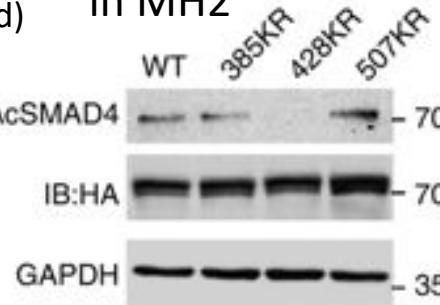
# SIRT7 deacetylates SMAD4(K428)

e



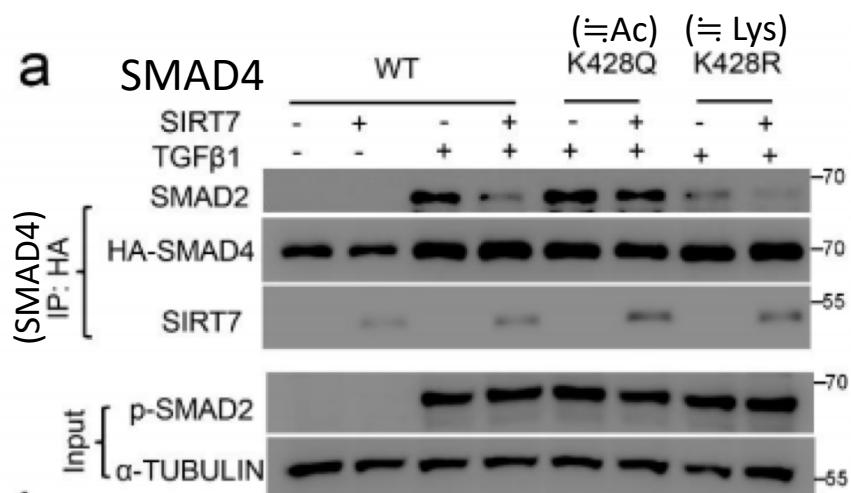
f

SMAD4 KR mutants  
in MH2



SMAD4(K428Ac) is important for SMAD2-SMAD4 binding, nuclear localization by TGF- $\beta$  signal.

a



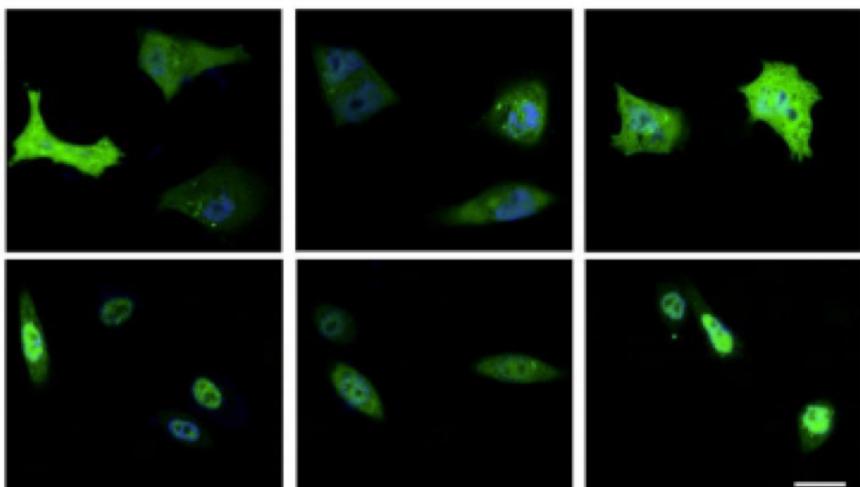
Con

TGF $\beta$

WT

Localization of SMAD4  
K428R

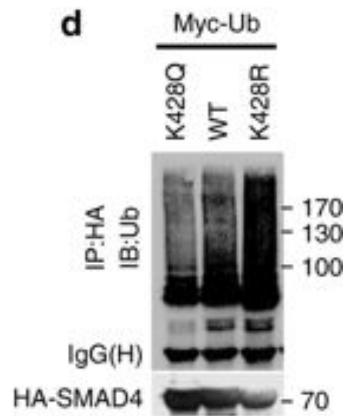
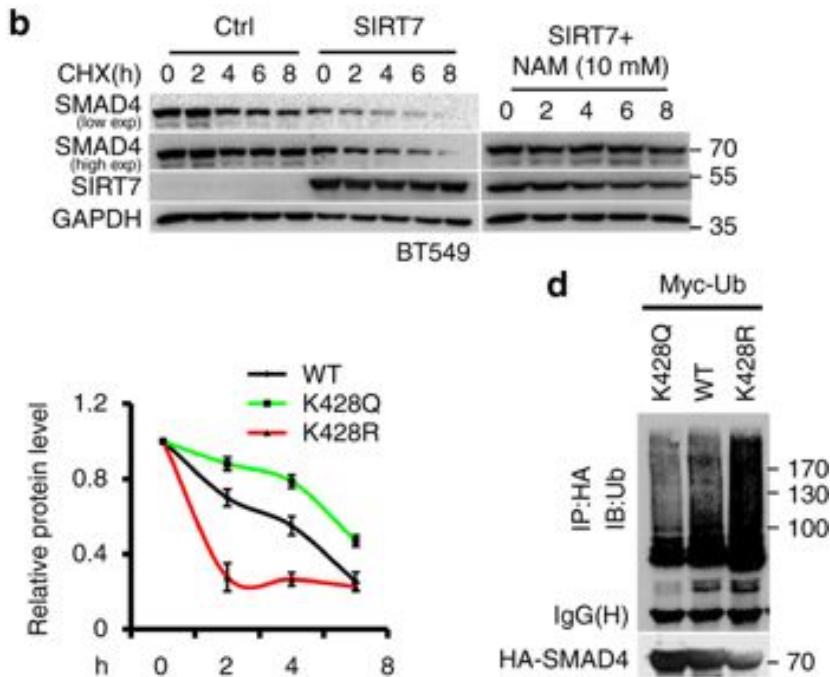
K428Q



weak signal  
weak localization

b

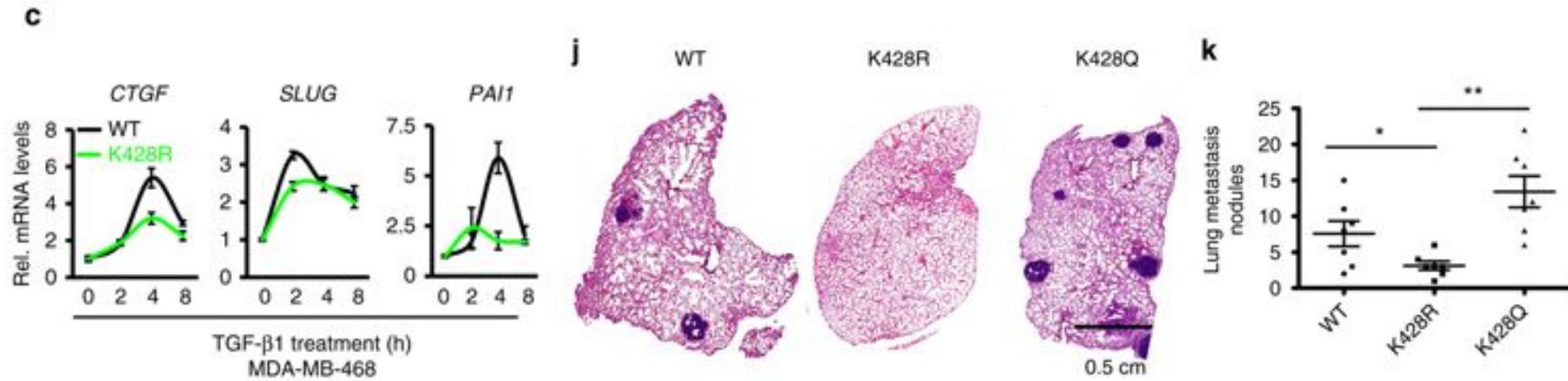
# SMAD4(K428) is important for its degradation (Ubiquitination)



SMADK428 (TGF $\beta$ )  
Ac(Q) ... SMAD2 binding  $\uparrow$  ( $\uparrow$ )  
Ub degradation  $\downarrow$  ( $\uparrow$ )

K (R) ... SMAD2 binding  $\downarrow$  ( $\downarrow$ )  
(SIRT7) Ub degradation  $\uparrow$  ( $\downarrow$ )

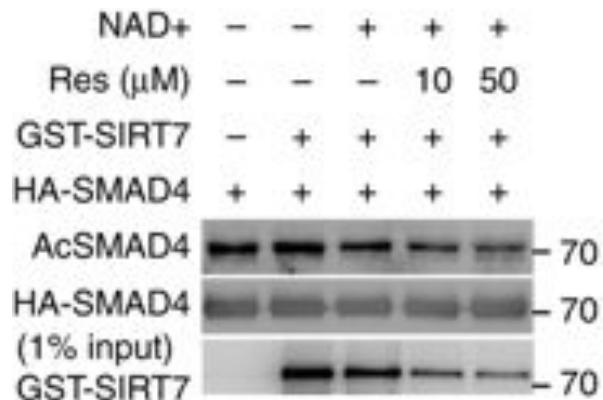
## SMAD4 (Ac) is important for TGF $\beta$ -induced metastasis



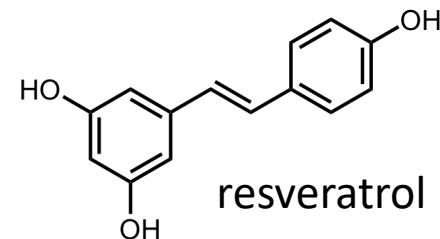
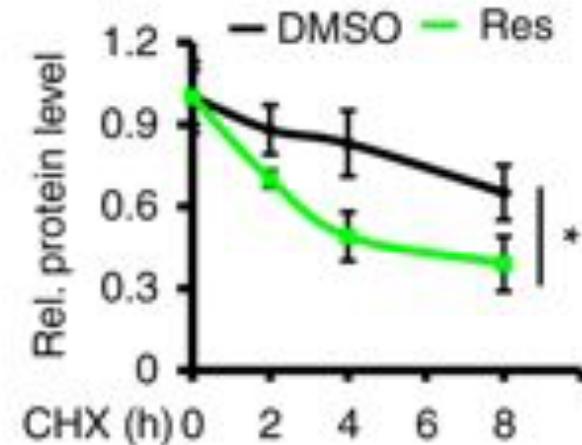
# Resveratrol activates SIRT7 and inhibits lung metastasis.

(\*Resveratrol is known as SIRT1 activator)

a (in vitro)

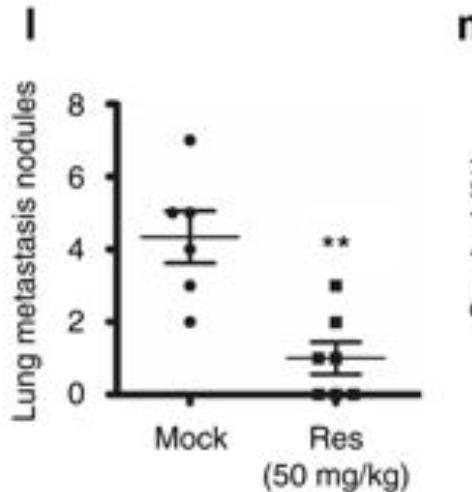
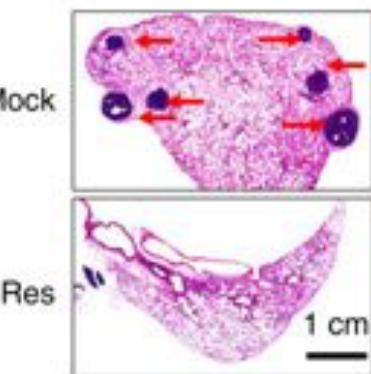


SMAD4 in BT549 cells

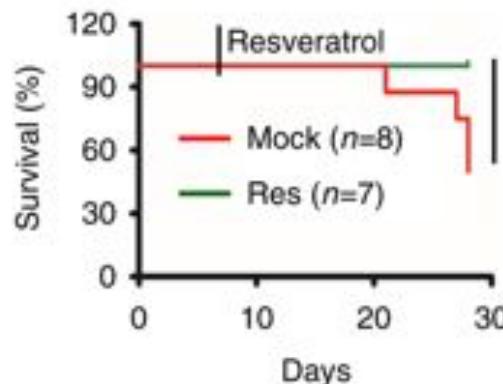


Bulb/c mice injected with 4T1 cells

k



m



# Summary

- EMT is critical step for tumor metastasis, so blocking EMT can be an effective treatment for cancer metastasis.
- EMT is induced by cellular crosstalk with extracellular environment, then intracellular environment is maintained (epigenetically).
- TGF $\beta$  signaling pathway is one of EMT-inducing pathways, and blocking TGF $\beta$  in combination with conventional anti-cancer treatment.
- TGF $\beta$  signaling is mediated by SMADs, which are regulated by Ubiquitination. These PTMs control activity or stability of SMADs.



# Role of Ubiquitin in inhibition of the TGF $\beta$ signaling

- Steric hinderance (K33-type)
- Degradation (K48-type)

