

# H19: an example of IncRNA- mediated chemoresistance

Daniele Ammeti Gabriele Di Giustino Lorenzo Graziani

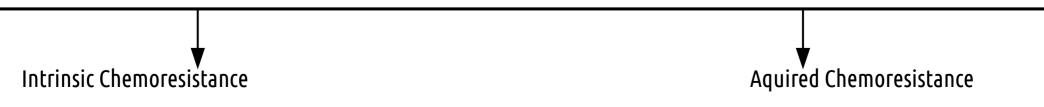
### Colorectal Cancer and Chemotherapy

**Colorectal cancer** (CRC) is the third most prevalent cancer type and the third leading cause of cancer related deaths worldwide.

Adjuvant chemotherapy has been demonstrated to extend life expectancy and improve the possibility of cure in patients with advanced colorectal cancer.

However, most colorectal cancers remain **unresponsive to chemotherapy** and thus it is still a life-threatening disease and a big challenge to the clinics.

Drug resistance acquisition is one of the main issues in chemotherapy



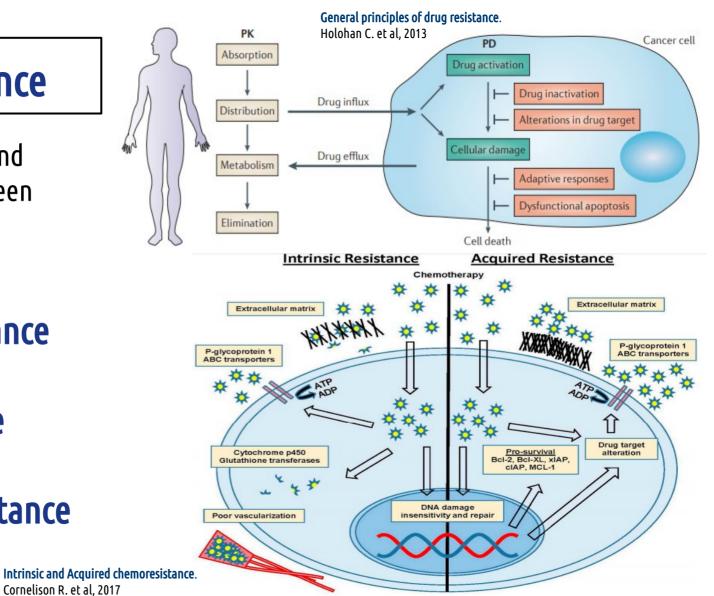
### **Cancer Chemoresistance**

A diverse range of anatomic and molecular mechanisms have been implicated in drug resistance.

Pharmacokinetic Resistance

Physics of the tumor site

Pharmacodynamic Resistance



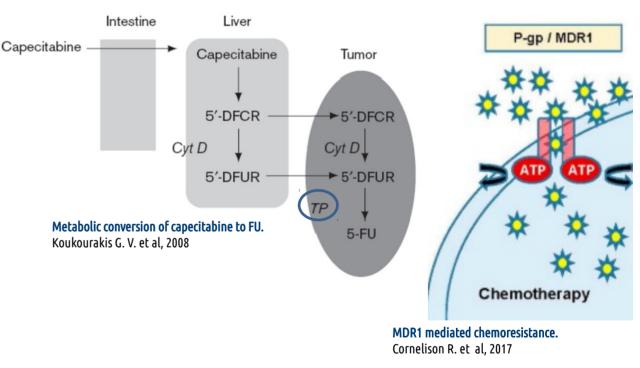
### Mechanisms of Chemoresistance

Drug transport and metabolism

<u>Drug Efflux</u>: Several cell membrane transporter proteins promoting drug efflux.

<u>Drug activation and inactivation</u>: drug inactivation or lack of activation.

Alterations in drug targets



#### <u>Change in expression of Target</u>: Genetic or epigenetic mutations that causing the over-expression of target molecules.

<u>Change in binding domain of Target</u>: Mutation in specific target molecules that don't block their activity.

#### **Mechanisms of Chemoresistance**

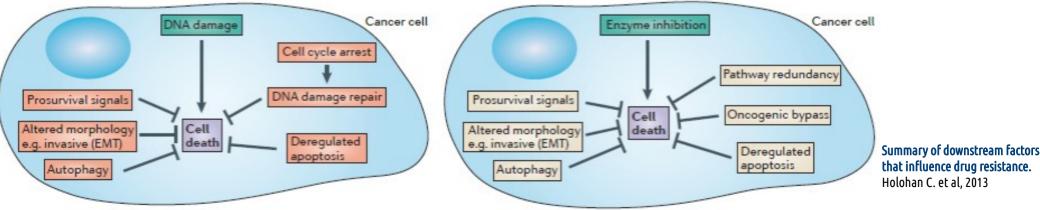
#### Dysfunction of DNA damage repair

Chemotherapeutic drugs induce DNA damage which may contribute to the acquisition of cytotoxicity. Cancer cells tend to be more resistant as a result of abnormal DNA damage by misregulation of DNA repair and DDR pathways.

#### Downstream resistance mechanisms

<u>Downregulation of Apoptosi</u>s: Genetic/Epigenetic mutations causing overexpression of anti-apoptotic proteins or TFs that controls apoptotic pathways and downexpression of pro-apoptotic proteins.

<u>Autophagy</u>: Can facilitate cancer cell survival during metabolic stresses caused by anticancer agents.



#### **LncRNAs**

LncRNA expression is widely altered in cancers and that lncRNAs participate in various aspects of tumorigenesis:

Cell proliferation, Apoptosis, Migration and Invasion, Drug Resistance.

#### What are LncRNAs?

**LncRNAs** include different types of RNA polymerase II (Pol II)- transcribed molecules with sizes **over 200 nt** in length.

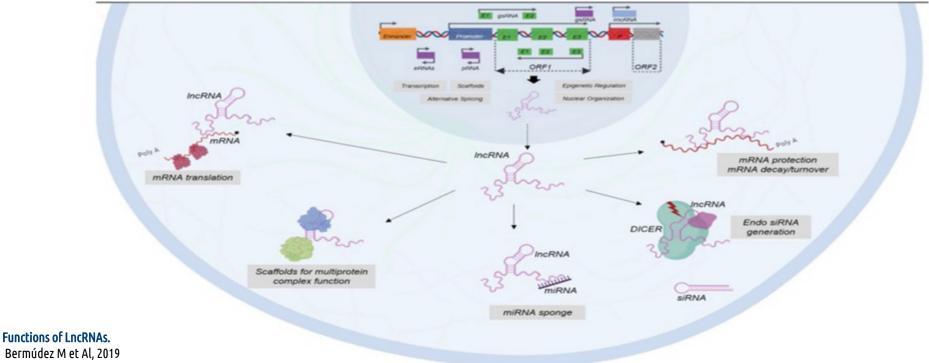
There are an estimated abundance of 5,400 to **more than 10,000 lncRNAs transcripts in humans**. They often harbor a poly-A tail and can be spliced, similar to mRNAs.

It has been shown that **lncRNAs functions depend on their subcellular location**: a wide range of subcellular localization patterns, including nucleus, cytoplasm and both.

#### **LncRNAs: Functions**

Roles in nuclear structures: they help to the structure of nuclear speckles, paraspeckles, and interchromatin granules.

**Roles in regulation of gene expression** at transcriptional and post-transcriptional levels in multiple biological processes and cellular contexts.



#### **LncRNAs in Drug resistance**

LncRNA	Function
GIHCG	Potential target in 5-FU and Oxaliplatin resistance mechanisms.
MIR100HG	Coordinately MIR100HG, miR-100 and miR-125b overexpression drives Cetuximab resistance by targeting five negative regulators of Wnt signaling which have a potential clinical relevant interaction with EGFR.
UCA1	UCA1 can decrease the sensitivity of CRC cells to 5-FU by sponging miR-204-5p resulting in attenuating apoptosis. Moreover, UCA1 expression levels are increased in Cetuximab resistant cells and can be transferred to sensitive cells through exosomes increasing resistant cells number.
LINC00152	LIN00152 confers Oxa and 5-FU chemoresistance by sponging miR-193a-3p by ERBB4 modulation and then inducing the activation of AKT signaling pathway that mediates cell survival and chemoresistance. miR-193a-3p also targets NOTCH1 regulating CRC growth, metastasis, stemness, and chemoresistance.
HOTAIR	HOTAIR could regulate the progression and Cisplatin and Paclitaxel chemoresistance enhancements in CRC by targeting miR-203a-3p and the activity of Wnt/β-catenin signaling pathway.
PCAT-1	PCAT-1 regulates the invasiveness and 5-FU resistance in CRC cells and that PCAT-1 may promote CRC cell invasion by modulating the expression of c-Myc.
PVT1	PVT1 is associated with 5-FU resistance in human CRC tissues and cells by inhibiting apoptosis and upregulating the expression of MRP1, P-gp, mTOR, and Bcl-2
XIST	XIST promotes Doxorubicin resistance through sponging miR-124 which targets SGK1 increasing cell survival, loss of control in cell cycle, inhibiting apoptosis, and increasing chemoresistance.
MALAT1	Overexpression of MALAT1 enhances chemoresistance in 5-FU resistant cells through potentiation of multidrug resistant genes such as MDR1, MRP1, BCRP, and ABC. Moreover, modulates EZH2 pathway in Oxa resistance
H19	H19 mediated Methotrexate resistance via activating Wnt/β-catenin signaling, which help to develop H19 as a promising therapeutic target for MTX resistant CRC. Besides, CAFs promote stemness and Oxa chemoresistance in CRC by transferring exosomal H19 to CRC sensitive cells through sponging miR-141.
SLC25A25-AS1	SLC25A25-AS1 has a pivotal role in CRC cells promoting chemo sensitivity to 5-FU and DOX via Erk and p38 pathway modulation. Hence, SLC25A25-AS1 was determined to play a tumor suppressive role in CRC.
snaR	snaR has a negative regulator role in responsible of the development of 5-FU resistance through cell growth of CRC cells. Nonetheless, snaR detailed roles have not yet been established.
ENST00000547547	ENST00000547547 reduced the chemoresistance of 5-FU via competitive sponging to miR-31 which targets ABCB9 involved in chemotherapy induced apoptosis. This suggests that IncRNA ENST00000547547 may be a positive prognostic factor for 5-FU-based chemotherapy.
TUG1	TUG1 mediates MTX resistance in colorectal cancer via sponging miR-186 that targets CPEB2 increasing its protein levels that play an important role in turnorigenesis and chemoresistance.
PVT1	PVT1 is a significant regulator in tumorigenesis and cisplatin resistance of CRC by inhibiting apoptotic pathways in CRC and may serve as a promising target for CRC therapy.
MEG3	MEG3 promotes chemosensitivity to Oxa by inducing cytotoxicity in CRC cells promoting apoptosis. In addition, MEG3 sponges miR-141 that targets PDCD4.

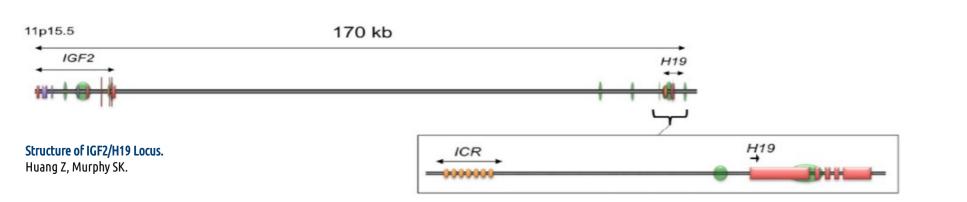
LncRNAs are involved in cancer cell drug resistance with different regulated targets/pathways

#### LncRNA H19

H19 gene is located in 11p15.5 downstream the insulin-like growth factor 2 (Igf2) gene and encodes for a 2,3kb capped, spliced and polyadenylated RNA.

H19 is highly expressed from the onset of embryogenesis to fetal life in vital organs such as the fetal adrenal, liver, and placenta but is downregulated in postnatal stages.

#### Plays pivotal roles in embryonal development and growth regulation



#### Imprinting regulation of H19 Expression

Located in an imprinted region of chromosome 11.

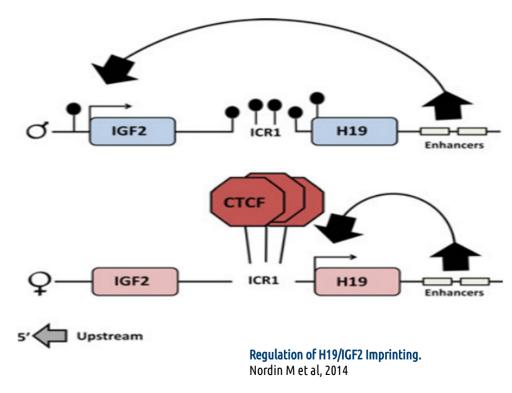
H19 and Igf2 are oppositely imprinted and co-expressed embryonic development suggesting a common mechanism of regulation.

Important regulation elements Open chromatin Open chromatin Dense chromatin **ICR1** is important to the imprinting state of both H19 and IGF2 H19 ICR1 Iqf2 and is rich in CpG residues. Enhanc Open chromatin Two downstream **enhancers** where open in chromatin Dense chromatin structure on both parental alleles and could work on either lqf2 or H19. IGF2 H19 ICR1 **CAGCCC motifs** in ICR1 that binds **CTCF proteins**.

**Regulation of H19/IGF2 Imprinting.** Nordin M et al, 2014

### Imprinting regulation of H19 Expression

- Enhancers could work on either Igf2 or H19 but:
- The methylation of the paternal H19 by **DNMT** inhibits his expression and thus gives enhancers a chance to work on the Igf2 gene.
- **ICR1** and the H19 promoter are unmethylated on the maternal chromosome, leading to transcription of maternal H19.
- The binding of **CTCF** to CAGCC unmetylated motif in ICR1 in maternal chromosome prevent downstream enhancers from accessing Igf2.



#### LncRNA H19 in Cancer

**H19** can act as either an **oncogene or tumour suppressor**: the role of H19 may differ at different times in life, or display a cell dependent and/or tumour type-dependent function.

H19 is **upregulated** in several cancers as, esophageal cancer, hepatocellular carcinoma, ovarian cancer, bladder cancer, breast cancer and **colorectal cancer**.

It is implicated in cancer progression processes such as metastasis (enhances EMT), proliferation and drug resistance. In particular in CRC it can led to **Methotrexate** or **5-Fu** resistance.

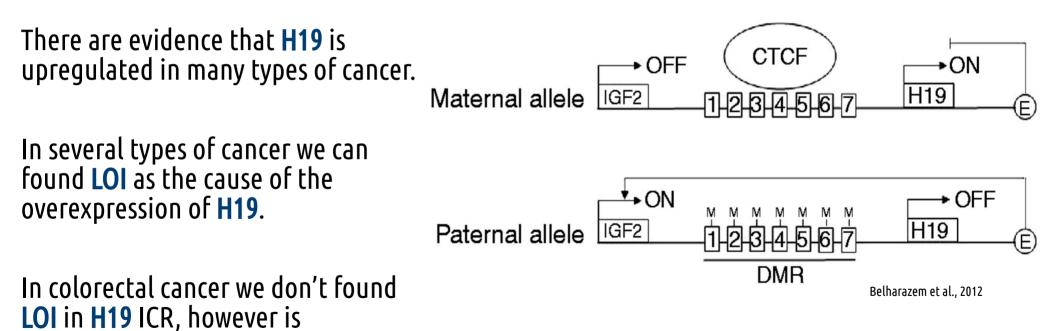
H19 is the lncRNA with the most substantial correlation to CRC patient survival, serving as an independent predictor for OS and disease-free survival (DFS).

#### This lncRNA has been related with poor prognosis

### Loss of imprinting and cancer

We find **LOI** in many types of cancer.

overexpressed.

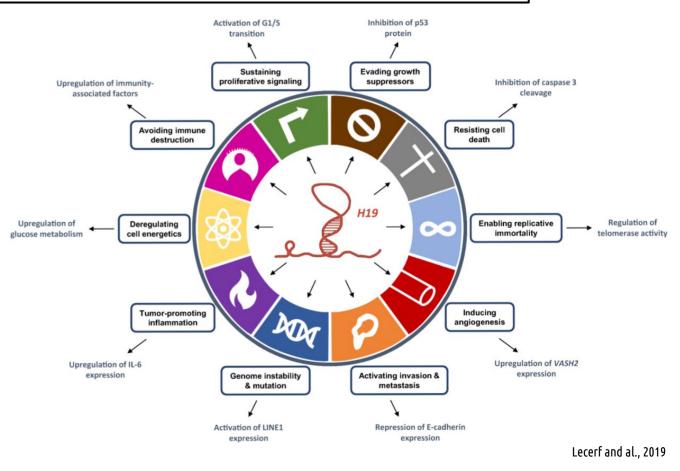


#### H19 expression in tumors influences several hallmarks of cancer

Promotes epithelial to mesenchymal transition in colorectal cancer via Wnt/βcatenin pathway.

Promotes the migration and invasion of colon cancer cells via MAPK signaling pathway.

Promotes chemoresistance against several chemotheraphics like **methotrexate** and **5-FU**.

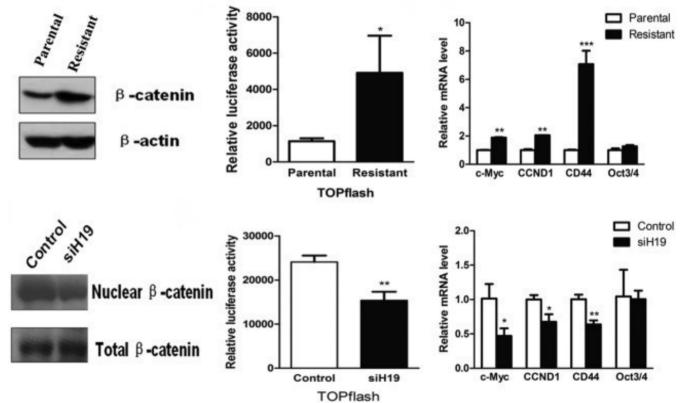


### Chemoresistance mediated by H19 in tumors

H19 mediates methotrexate chemoresistence via Wnt/β-catenin pathway.

Methotrexate inhibits dihydrofolate reductase (DHFR).

Knockdown of H19 improves the sensitivity to methotrexate of resistant cells.



#### Does H19 plays a role in colorectal cancer 5-Fu chemoresistance?

Often colorectal cancer is resistant to **5-Fu** theraphy.

Is necessary to find new targets for treatment of CRC **5-Fu** resistant cases.

**Theraphy-induced authophagy** is a mechanism of resistance to anticancer agents.

H19 promotes 5-Fu resistance in other types of tumor.

Wang et al. Cell Death and Disease (2018)9:1149 DOI 10.1038/s41419-018-1187-4

Cell Death & Disease

**Open Access** 

#### ARTICLE

#### Long non-coding RNA H19 confers 5-Fu resistance in colorectal cancer by promoting SIRT1-mediated autophagy

Meng Wang<sup>1</sup>, Dong Han<sup>2</sup>, Ziming Yuan<sup>1</sup>, Hanqing Hu<sup>1</sup>, Zhixun Zhao<sup>1</sup>, Runkun Yang<sup>1</sup>, Yinghu Jin<sup>1</sup>, Chaoxia Zou<sup>2</sup>, Yinggang Chen<sup>1</sup>, Guiyu Wang<sup>1</sup>, Xu Gao<sup>2</sup> and Xishan Wang<sup>1,3</sup>

### 5-Fu based chemotheraphy

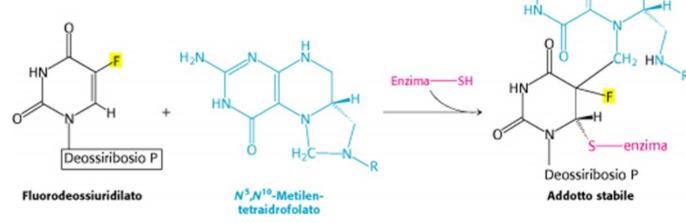
**5-Fu** is a nucleoside analog inhibitor. Is a pyrimidine analog.

It blocks **deoxythymidylate** synthesis acting as a competitive inhibitor in **thymidylate synthase**.

It is used in chemotheraphy for many types of cancer.

Often colorectal cancer is resistant to **5-Fu** theraphy.

5-Fu + PRPP ---> 5F-UMP + PP Uracil phosphoribosyltransferase (it also actives 5-Fu)



H<sub>2</sub>N

Next 5F-UMP must be converted to fluorodeoxyuridilate

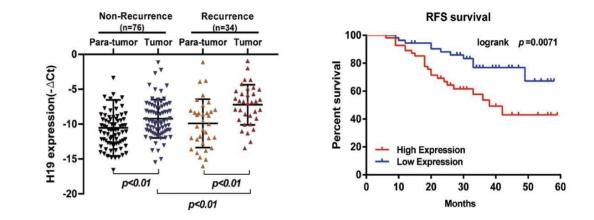
#### H19 is correlated with colorectal cancer recurrence

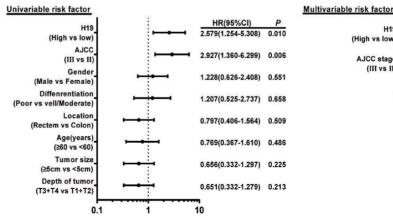
H19 indicates a poor prognosis of colorectal cancer.

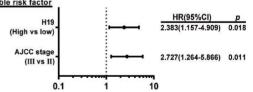
**H19** is an independent prognosis factor for CRC aggressiveness.

Expression of **H19** could be significant to predict a clinical outcome.

H19 play a role in colorectal cancer recurrence







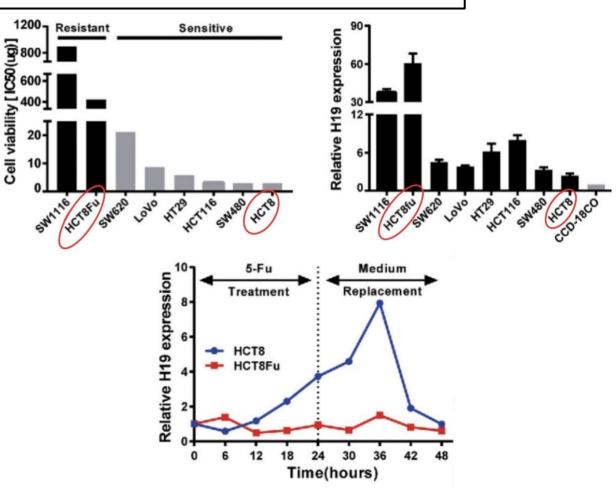
#### H19 increases the cells chemoresistance to 5-Fu

Creation and identification of cell lines **5-Fu** resistant.

**H19** is more expressed in cell lines 5-Fu resistant.

In drug sensitive cells, H19 is induced by treatment with 5-Fu.

Expression of H19 is correlated with cells 5-Fu chemoresistance

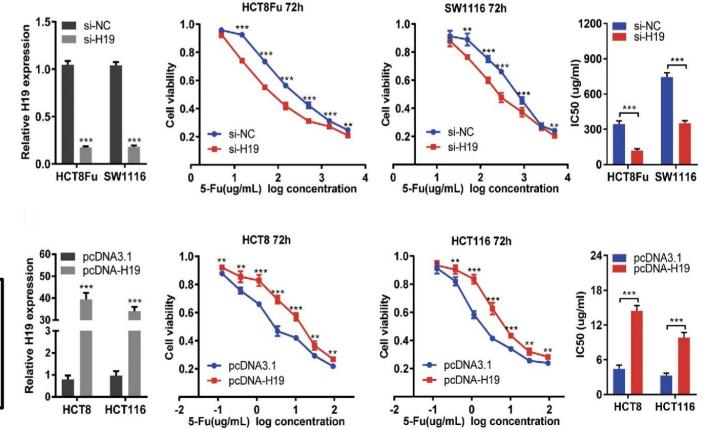


#### H19 plays a pivotal role in the chemoresistence to 5-Fu

Overexpression and knockdown of H19 was performed to see the effect on **5-Fu** chemoresistance.

H19 increases IC50 value of **5-Fu** in cell cultures.

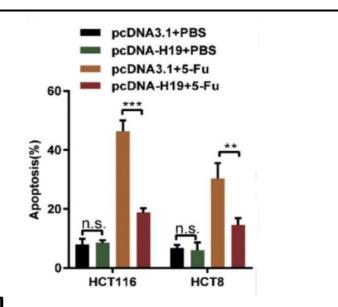
H19 permits cells to survive in higher concentration of 5-Fu

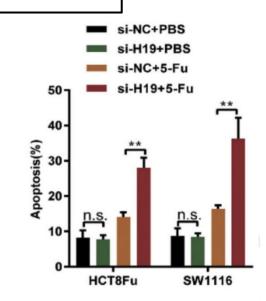


### H19 influences apoptosis in presence of 5-Fu

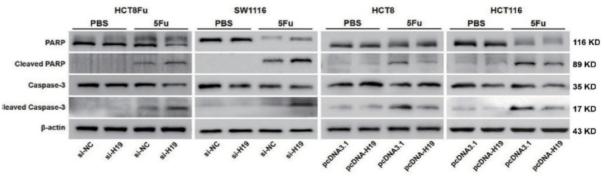
Knock down H19 cell lines increases cell apoptosis when treated with 5-Fu.

After treatment with **5-Fu** levels of cleaved **PARP** and **Caspase-3** increases.





H19 enhances resistance to 5-Fu via reducing cell death only under 5-Fu stress

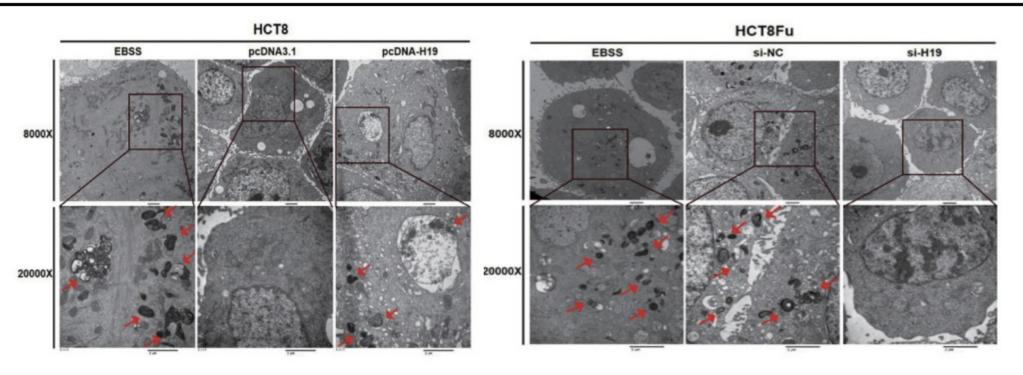


#### H19 induces cancer chemoresistance via the autophagy pathway

HCT8 HCT8Fu P62 62 KD Western blotting showed that H19 significantly upregulated the formation LC3I 16 KD of autophagy marker LC3-II 14 KD LC3II 43 KD β-actin pcDNA3. CDNA.H19 si-NC si-H19

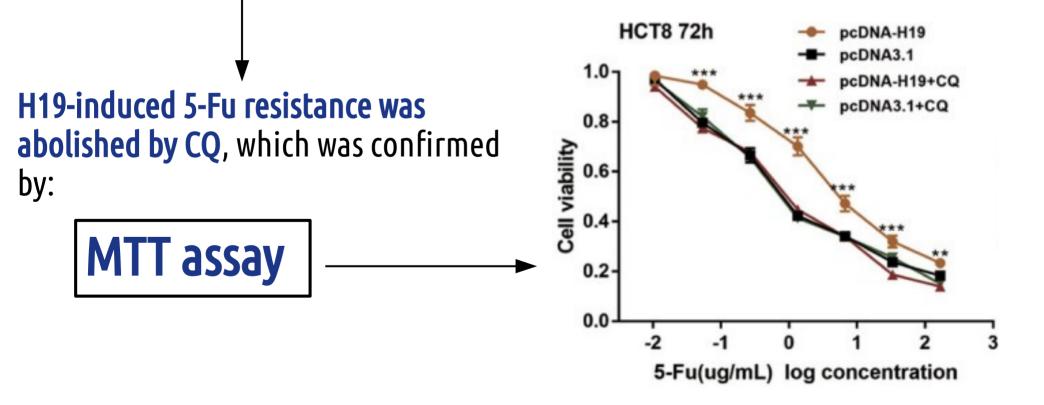
#### H19 induces cancer chemoresistance via the autophagy pathway

**Transmission electron microscopy** showed an **increase** in the formation of **autophagic vesicles in the H19 overexpressed** HCT8 cells, and **lesser autophagic vesicles in the H19 knocked down** HCT8Fu cells



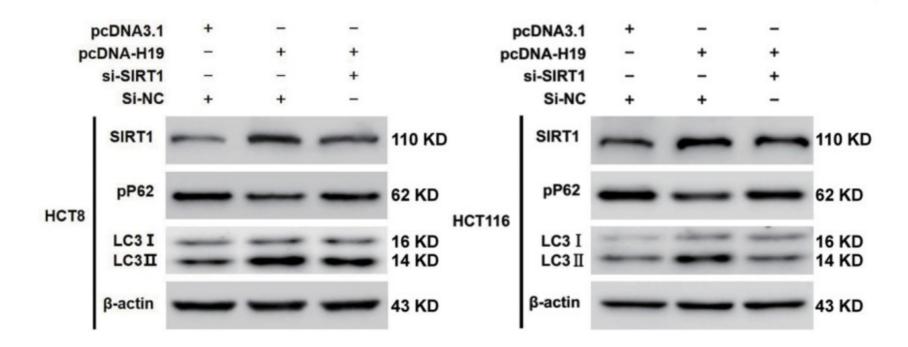
#### H19 induces cancer chemoresistance via the autophagy pathway

Addition of CQ could block the autophagic flux in the cells.



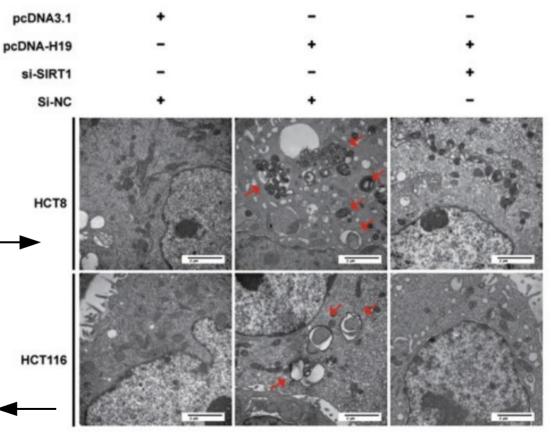
Western blotting was performed to analyze SIRT1 expression status in pcDNA-H19 transfected CRC cells. HCT8 **HCT116** SIRT1 110 KD 110 KD SIRT1 60 KD 60 KD Beclin-1 Beclin-1 Results showed that only the expression of ATG7 71 KD 71 KD ATG7 SIRT1 was upregulated ATG5 32 KD ATG5 32 KD after pcDNA-H19 transfected both in HCT8 21 KD ATG12 21 KD ATG12 and HCT116 cells 43 KD 43 KD β-actin β-actin PCDNA3. 1 NA.H19 ocowa3.1 watthe

## **Western blotting** was used to detect LC-3I, LC-3II, p62, and SIRT1 **expression** in HCT8 and HCT116 cells transfected **with pcDNA-H19 and/or si-SIRT1**

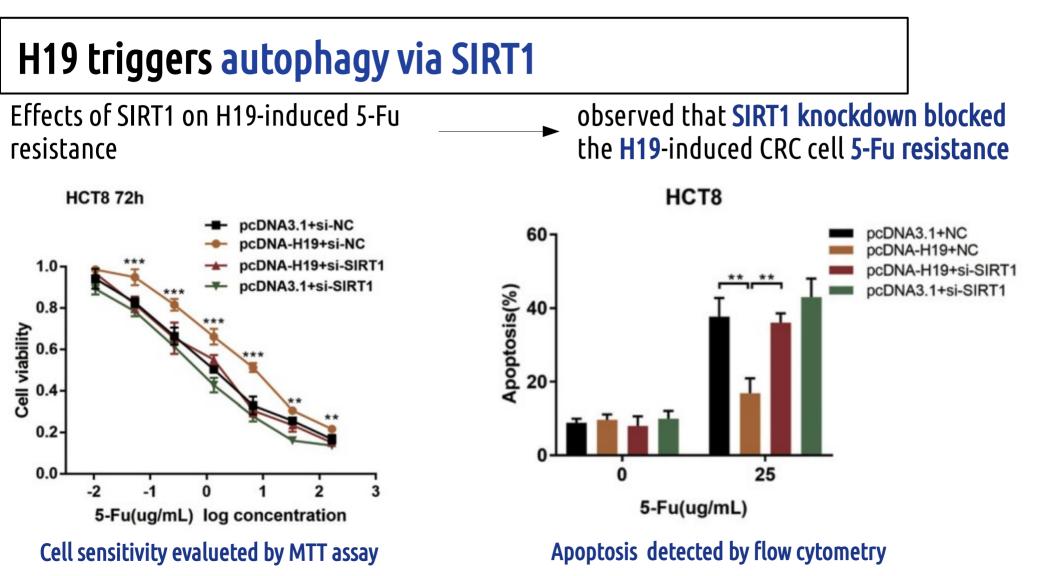


Overexpression of H19 dramatically induced <sup>P</sup> LC3 aggregation and increased the autophagosomes in CRC cells, which was markedly attenuated by the silence of SIRT1

All the above data indicated that H19 induces autophagy of CRC cells via upregulating the expression of SIRT1

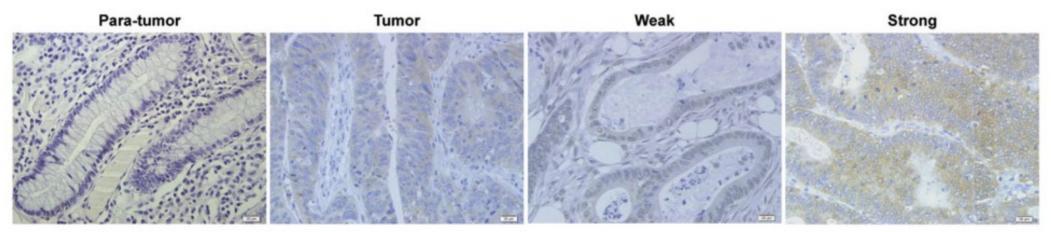


transmission electron microscopy



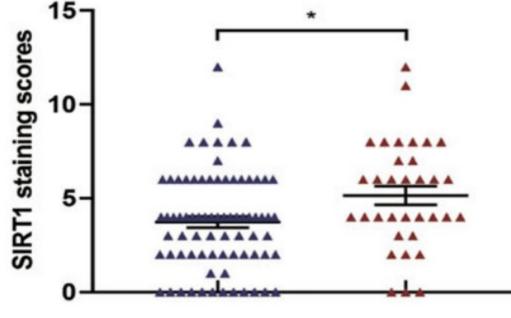
#### The **expression of SIRT1** was detected by **immunohistochemical analysis**.

#### Results showed that SIRT1 protein was located in both cytosol and nuclei of CRC cells



Expression of SIRT1 was analyzed by IHC in the CRC tissues and paired adjacent normal samples

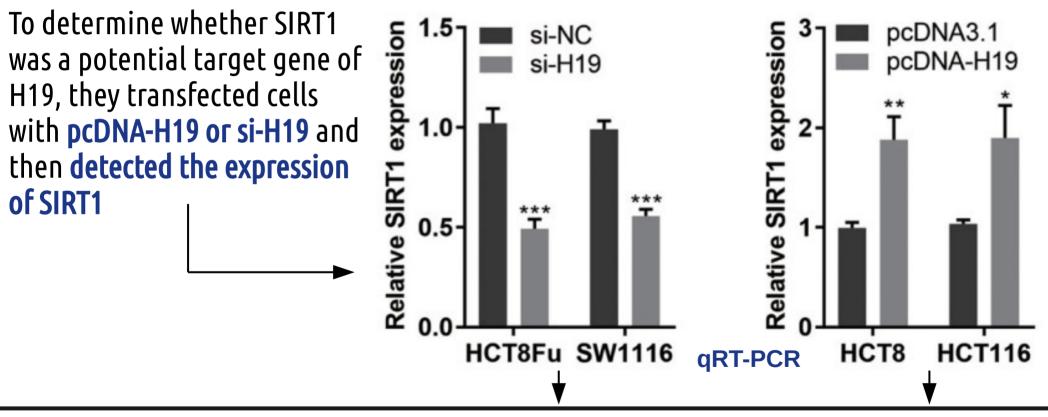
Recurrent CRC tissues from patients with recurrence had stronger SIRT1 expression compared with that of non-recurrence CRC tumor tissues.



This phenomenon indicated that SIRT1 had underlying association with 5-Fu chemoresistance in CRC

#### Non-recurrence Recurrence

IHC analysis was performed to determine the SIRT1 staining scores in CRC tissues with distinct recurrence status.



H19 overexpression led to SIRT1 mRNA and protein levels increase at 72 h post transfection, and vice versa.

#### H19 sponges miR-194–5p as ceRNA

H19 is included in micro-RNA ribonucleoprotein complex (miRNP), probably through binding with miR-194–5p

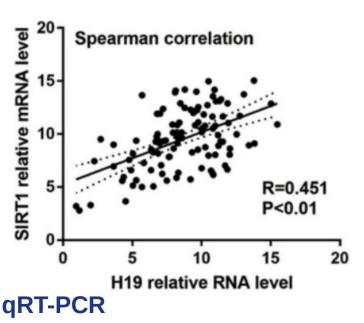
Luciferase and RIP analysis confirmed the binding of H19 to miR-194-5p.

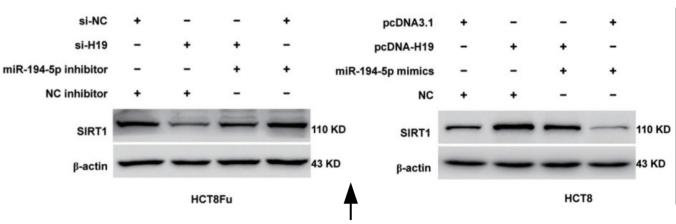
Results of the reversal experiment showed that while H19 down-regulation led to decreased expression of SIRT1, simultaneous miR-194- 5p down-regulation was able to reverse the inhibition of SIRT1 expression in HCT8Fu resistant cell line.

### H19 sponges miR-194-5p to modulate SIRT1 expression

H19 correlated with SIRT1 expression in patients

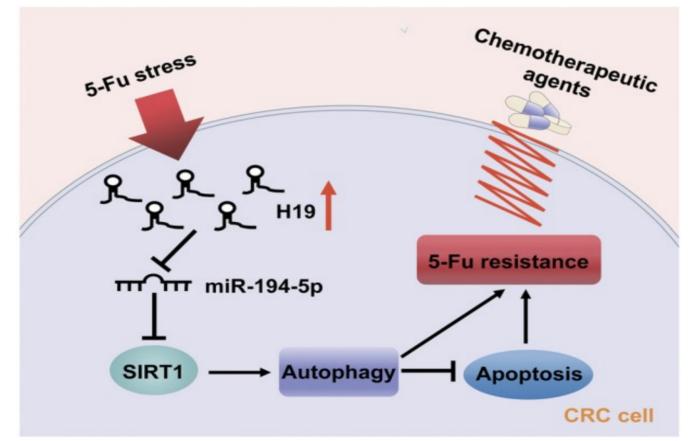
## Positive correlation between H19 and SIRT1 expression in CRC tissues.





These results confirmed that H19 abolishes the miR-194-5pmediated repressive activity on SIRT1 by competitively binding miR-194-5p.

#### H19 sponges miR-194-5p to modulate SIRT1 expression



The functional model underlying the mechanism of H19 on tumor chemoresistance

#### CONCLUSION

•H19 is upregulated in CRC recurrence samples appears to be a potential biomarker for predicting 5-Fu chemoresistance.

•SIRT1 dependent autophagy pathway could affect 5-Fu chemoresistance in colon cancer cells, which was modulated by H19/miR-194-5p axis.

•As the amount of H19 is associated with the risk of CRC recurrence, the measurement of H19 post-surgery may be an effective approach to predict patients' outcome

# Are conventional chemotherapeutic regimens including 5-Fu suitable for CRC patients with a high amount of H19?

#### CRC patients with a high amount of H19 may be treated with conventional chemotherapy in combination with anti-H19 treatment and/or an autophagy inhibitor.

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