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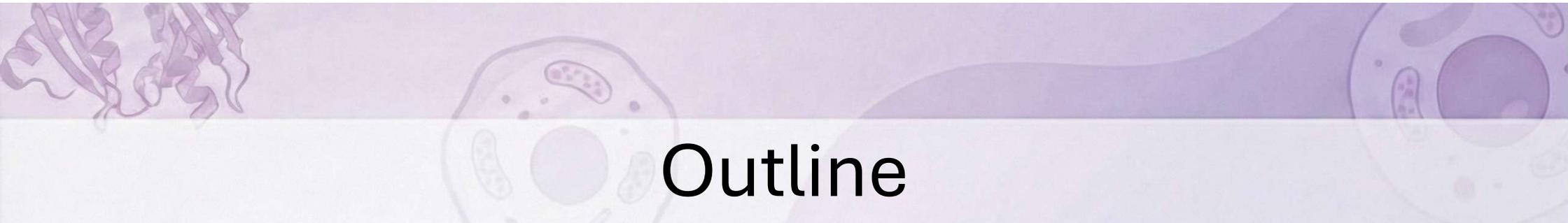


Dipartimento di  
Scienze della Vita

# Micropeptides CIP2A-BP encoded by LINC00665 inhibits triple-negative breast cancer progression

Binbin Guo, Siqi Wu, Xun Zhu, Liyuan Zhang, Jieqiong Deng, Fang Li, Yirong Wang, Shenghua Zhang, Rui Wu, Jiachun Lu & Yifeng Zhou

Presented by Chiara Mion and Lorenzo Murru



# Outline

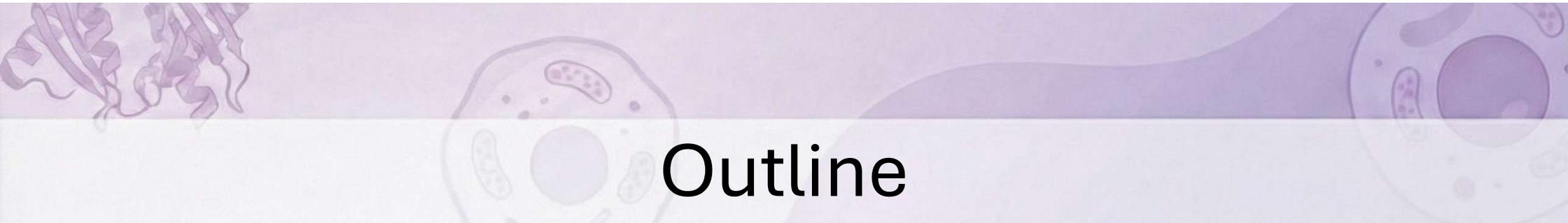
1. Theoretical framework: Unveiling the Hidden Microproteome;

2. The candidate: LINC00665 and its canonical oncogenic role;

3. Discovery of CIP2A-BP: From translational silencing to molecular decoy;

4. Translational impact: *In Vivo* validation and peptide therapy

5. Discussion and Conclusion



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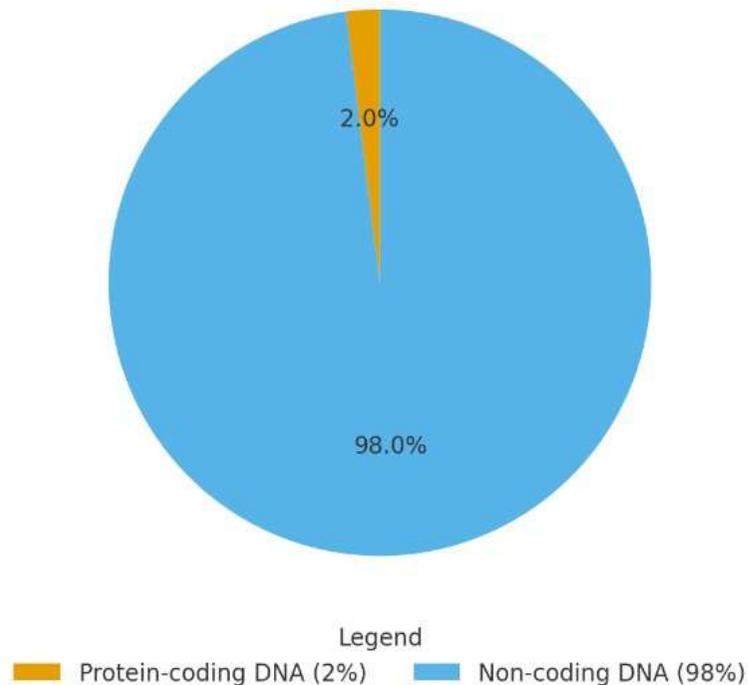
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# Breaking the Central Dogma: The "Non-Coding" paradox

## Composition of the Human Genome



### The historical Paradigm:

- Central Dogma: DNA → RNA → Protein;
- *The "100-Codon rule"*: ORFs < 100 aminoacids were discarded as noise.

### The reality:

- ~ 98% of the genome is transcribed as ncRNA;
- Are lncRNAs truly non-coding?

**Figure 1: Proportion of protein-coding vs. non-coding DNA in the human genome.**

## How do we see the invisible?

- **The limit of RNA-seq:** Detects abundance, not translation.
- **The solution: Ribosome profiling (Ribo-seq):**
  - Sequences «Ribosome Protected Fragments» (RPFs);
  - Maps precise position of active ribosomes.
- **Discovery:** Thousands of lncRNAs are actively translated.

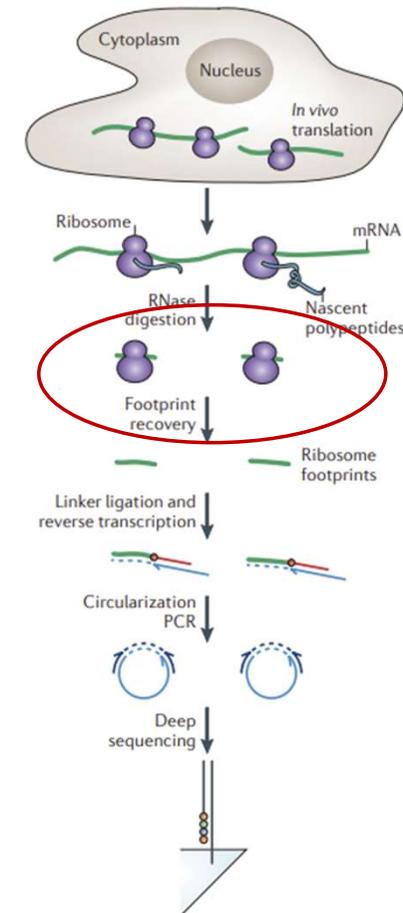


Figure 2: Schematic of the Ribo-seq Method [Ingolia, N. (2014)]

# Where are micropeptides encoded?

- **Types of Non-canonical ORFs (ncORFs):**

- **uORFs/dORFs:** Located in mRNA untranslated region (5'UTR and 3'UTR);
- **lncORFs:** Within long non-coding RNAs (intergenic/pseudogenes);
- **circORFs:** Encoded by circular RNAs (back-splicing junction).
- **pri-miORF:** Within primary miRNA transcripts.

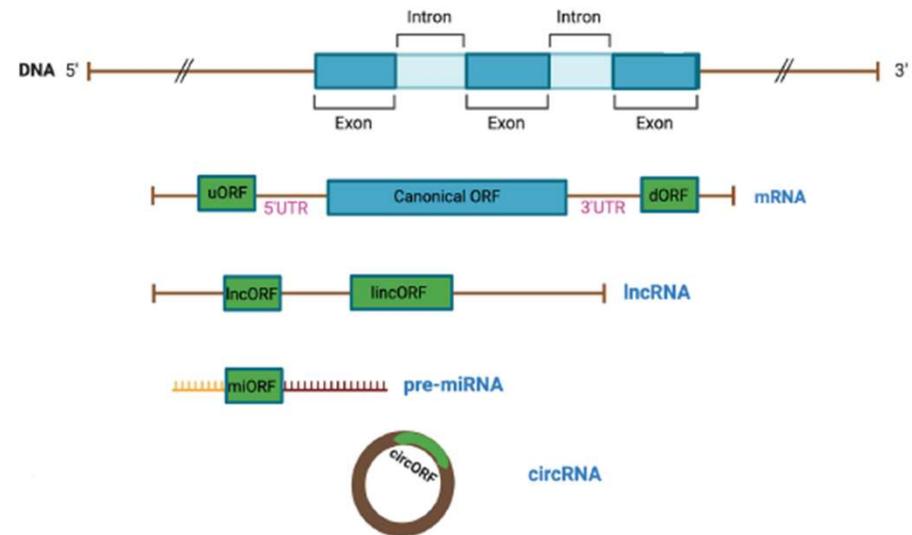


Figure 3: Genomic Classification of Non-Canonical ORFs [Ge, A.(2024)]

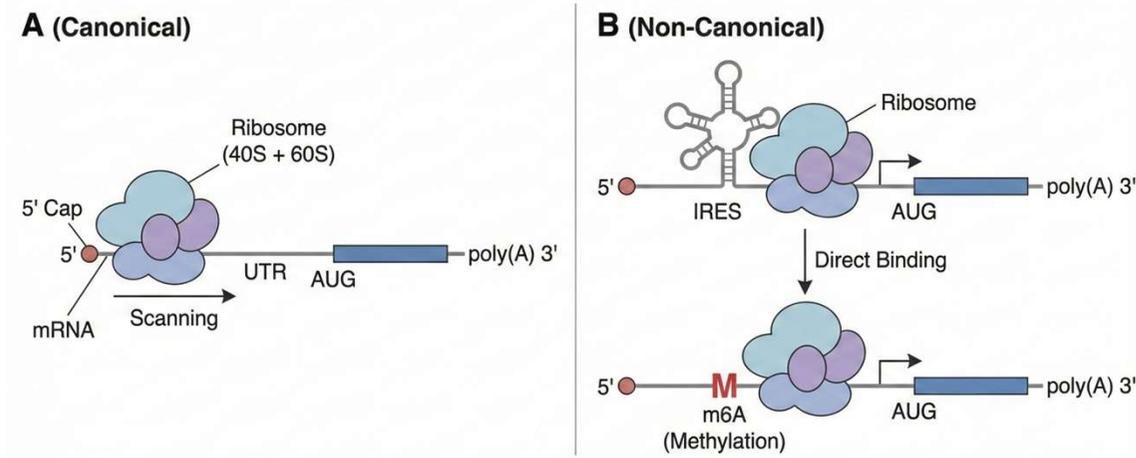


Figure 4: Canonical (A) vs. Non-Canonical (B) Translation Initiation

## Decoding the "Non-Coding": Translation Mechanisms

- **Challenge:** Many lncRNAs/circRNAs lack a 5' cap.
- **Alternative entry mechanisms:**
  - **Internal Ribosome Entry Site (IRES):** Direct ribosome recruitment (crucial for circRNAs);
  - **m<sup>6</sup>A modification:** N<sup>6</sup>-methyladenosine recruits factor (e.g., eIF4G2).

# Micropeptides: Definition & Features

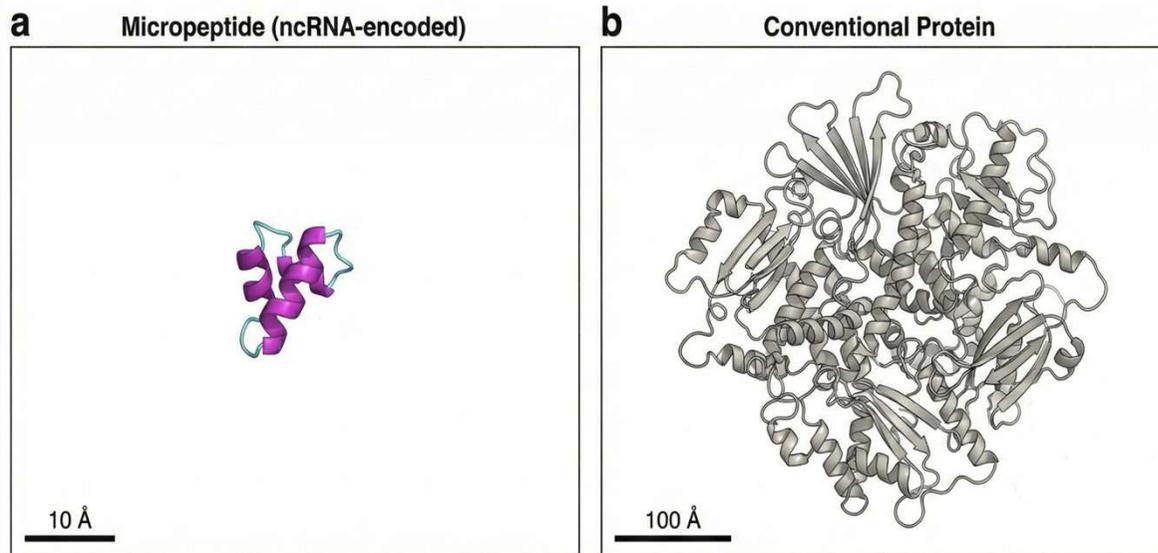


Figure 5: Structural contrast between a micropeptide (A) and a conventional protein (B)

- **Definition:** < 100 aminoacids (smORFs).
- **Key features:**
  - **Simple structure:** Single  $\alpha$ -helix or transmembrane domain;
  - **No enzymatic activity:** Too small for catalytic pocket;
  - **Evolutionary conservation:** High conservation implies biological function.
- **Role:** Modulators/Fine-tuners of larger complexes.

# Mechanism I: Scaffolding & Stabilization

- **Concept:** Micropeptides stabilize protein complexes.
- **Example: ASAP (encoded by LINC00467)**
  - **Target:** Mitochondrial ATP synthase;
  - **Action:** Binds subunits ATP5A + ATP5C;
  - **Effect:** Boosts ATP production → Promotes Colon Cancer growth.

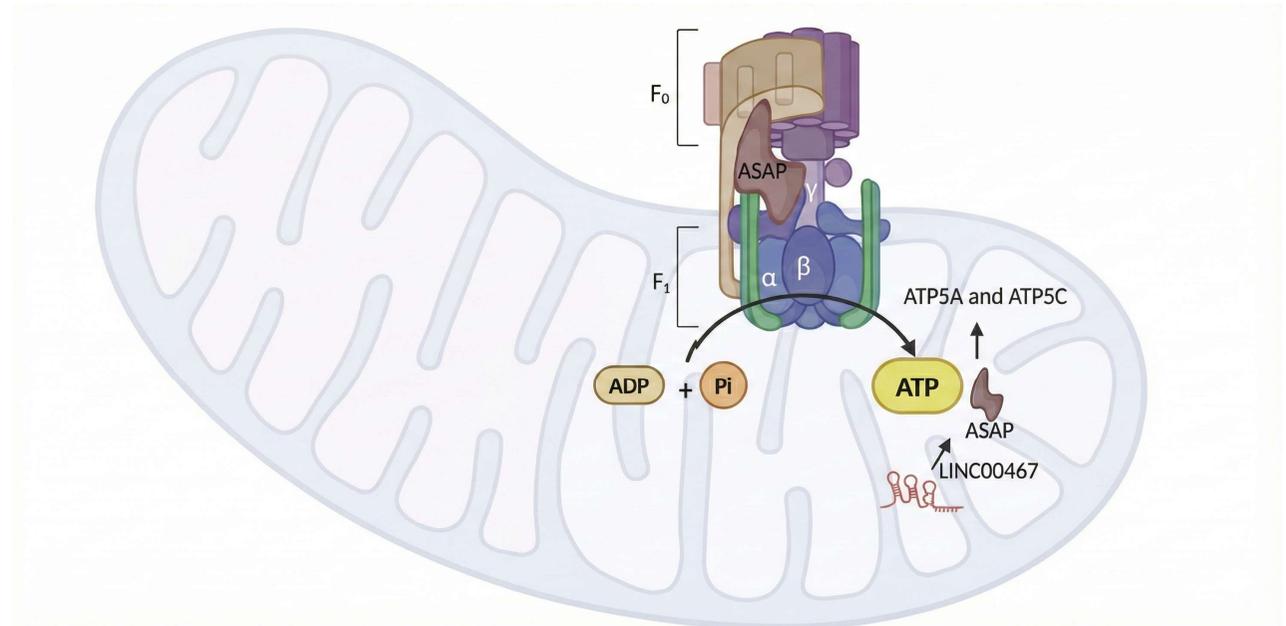


Figure 6: ASAP micropeptide regulates ATP synthase activity [Xiao, Y. (2024)]

## Mechanism II: Competitive inhibition (Decoy)

- **Concept:** Mimicking binding sites to displace partners.
- **Example: HOXB-AS3 Peptide**
  - **Target:** RBP hnRNP A1;
  - **Action:** Blocks hnRNP A1 binding to PKM mRNA
  - **Effect:** Suppresses metabolic reprogramming (Tumor suppressor)

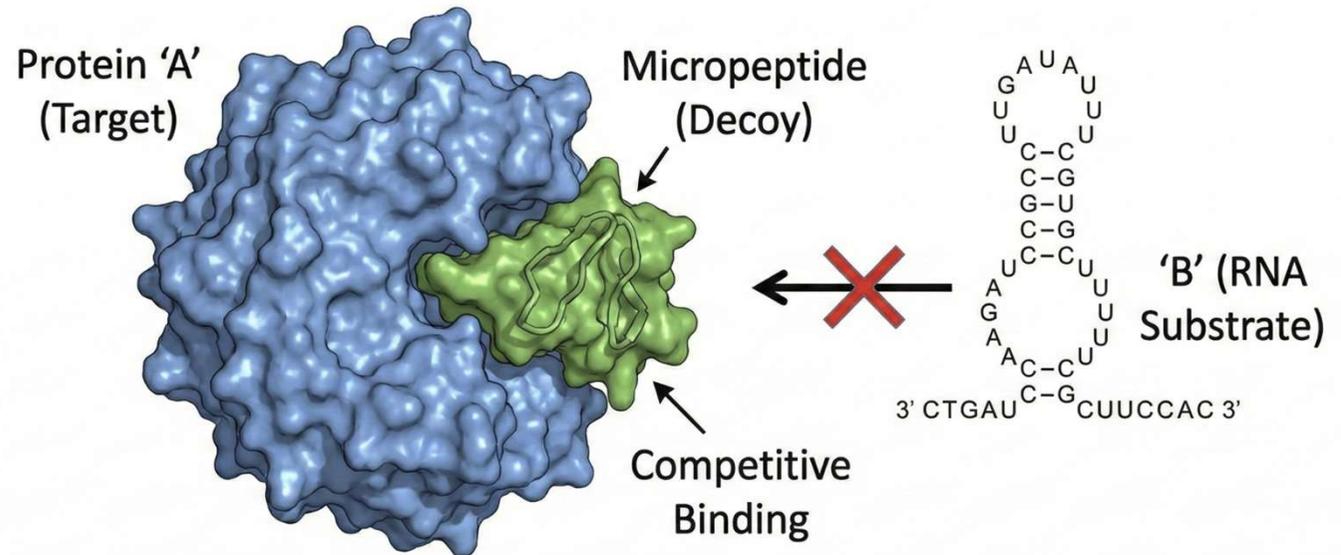


Figure 7: Mechanism of the Decoy effect

# Micropeptides in Physiology & Disease

## • Versatile Biological Roles:

- **Muscle:** Regulation of calcium pumps (e.g., Myoregulin/MLN);
- **Metabolism:** Oxidative phosphorylation and glycolysis;
- **Immunity:** Antigen presentation and inflammation;
- **DNA repair:** Recruitment of repair factors (e.g., DDUP).

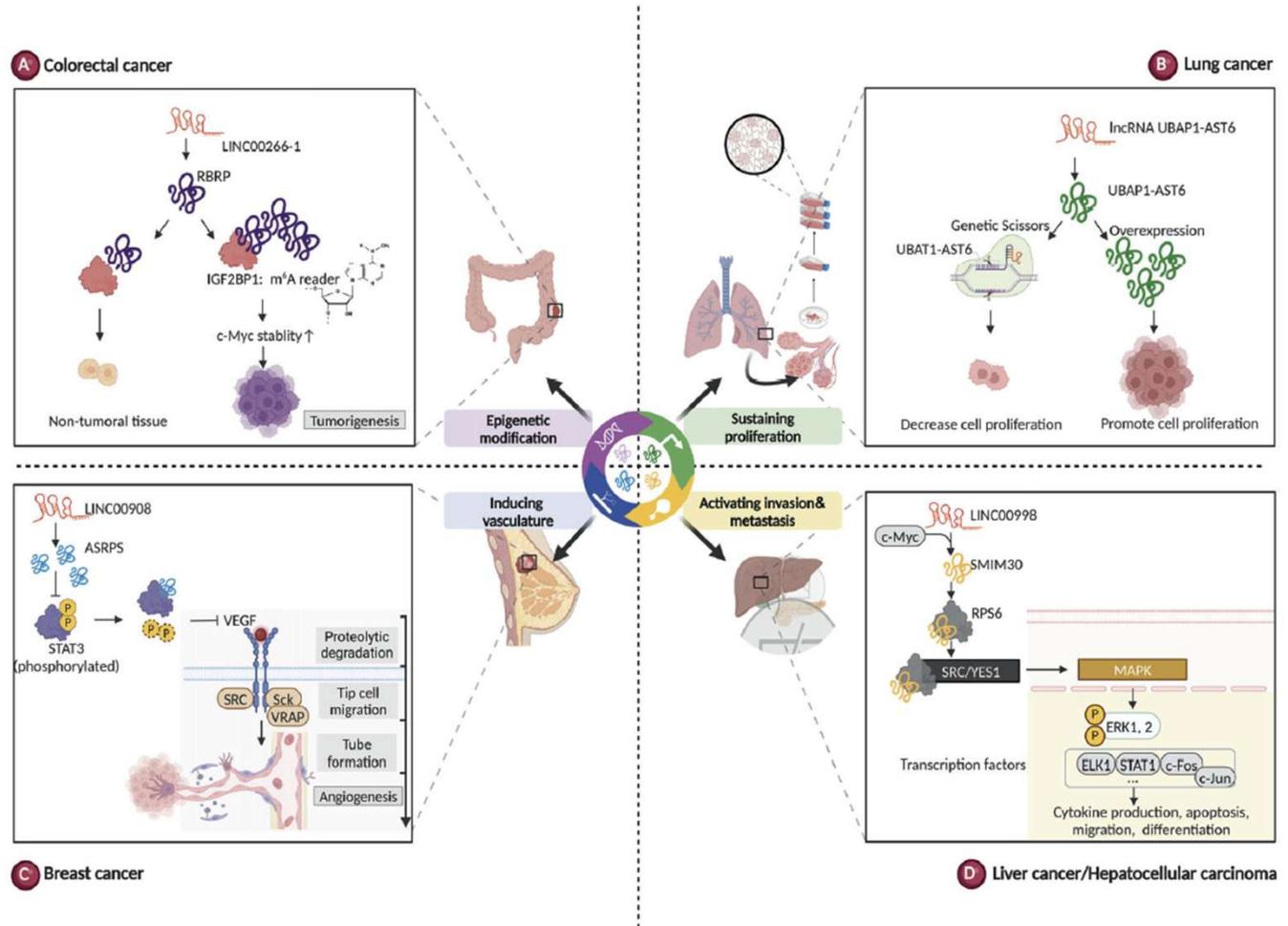


Figure 8: Diverse mechanisms of lncRNA-encoded micropeptides [Xiao, Y. (2024)]

# From general principles to specific target

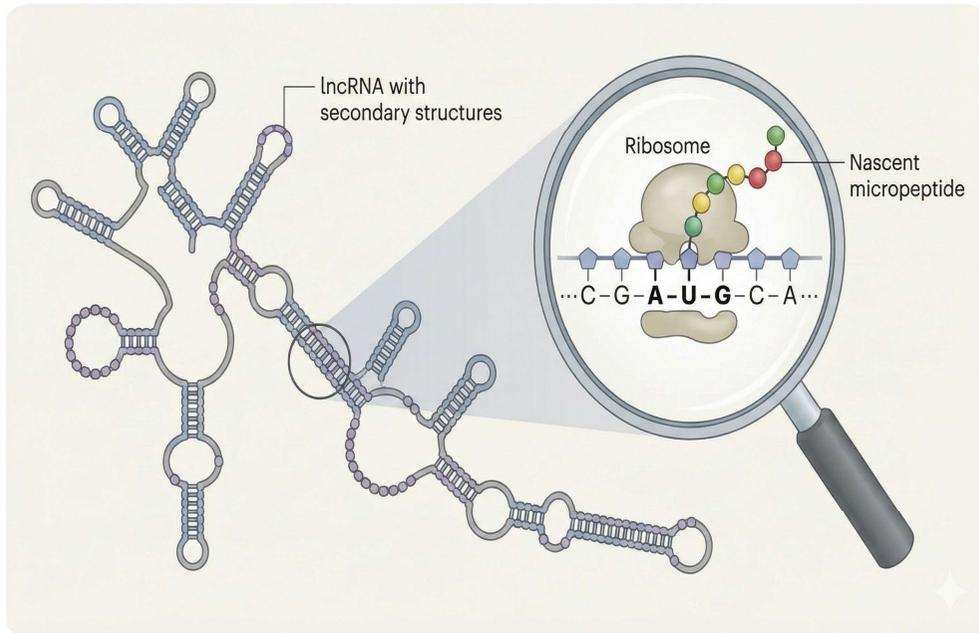


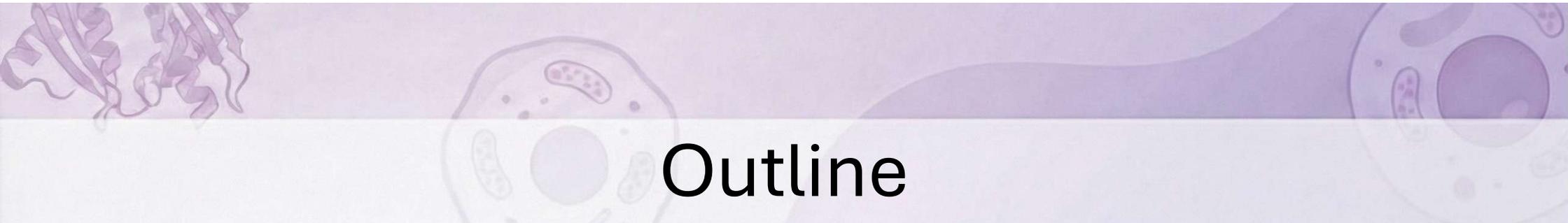
Figure 9: Hidden coding potential of lncRNAs

## The Theoretical Framework:

lncRNAs can harbor hidden, functional micropeptides.

## The research Gap:

Re-evaluating known cancer-associated transcripts for coding potential.



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# lncRNAs: long non-coding RNAs

*«Transcripts > 200 nucleotides  
with limited or no protein-coding  
capacity»*

**Recap from previous slides...**

Participate in a wide range of physiological and pathological processes through regulatory mechanisms

Involved in key aspects of cancer development (proliferation, differentiation, stemness, migration, invasion and apoptosis)

**MAY CONTAIN ncORFs  
ENCODING  
FUNCTIONAL  
MICROPEPTIDES**

# LINC00665: Long Intergenic Non-Coding RNA 00665

- Located on **human chromosome 19q13.12**
- First reported in 2018 by Dong-Yue Wen in hepatocellular carcinoma (HCC)
- **Pol II-transcribed lncRNA with a 5' cap**
- **Contains an ORF 1** encoding CIP2A-BP
- Length: ~400-9.000 nt, with **tissue-specific alternative splicing**

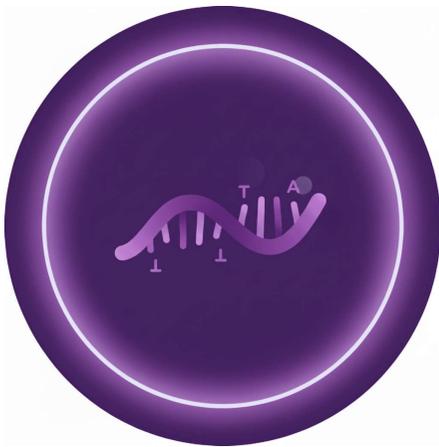
# LINC00665: Long Intergenic Non-Coding RNA 00665

- **Context-dependent role**
- Aberrantly expressed in **>10 cancer types**
- Associated with **poor prognosis** and **aggressive clinical features**

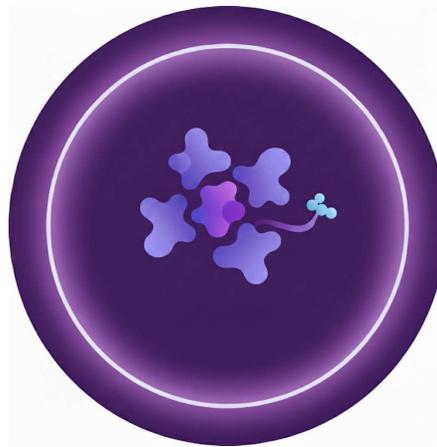
**LINC00665 is a promising diagnostic biomarker for breast cancer, gastric cancer and hepatocellular carcinoma**

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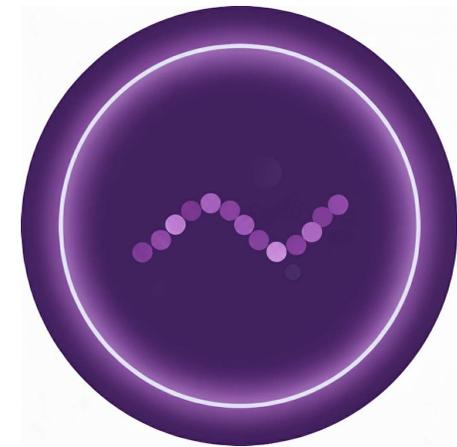
# Direct and indirect molecular interactions



COMPETING  
ENDOGENOUS RNA  
(ceRNA): miRNA SPONGE



DIRECT TARGET THE  
INTERACTION OF 10  
PROTEIN CODING GENES



ENCODES A MICRO-  
PEPTIDE CIP2A-BP

# ceRNA: Competing Endogenous RNA

“miRNAs sponging to regulate target mRNAs”

Complex interaction network

25miRNAs → 26mRNAs

Promotes tumor progression in 16 cancers

**LINC00665 acts as an oncogene through competitive miRNA binding**

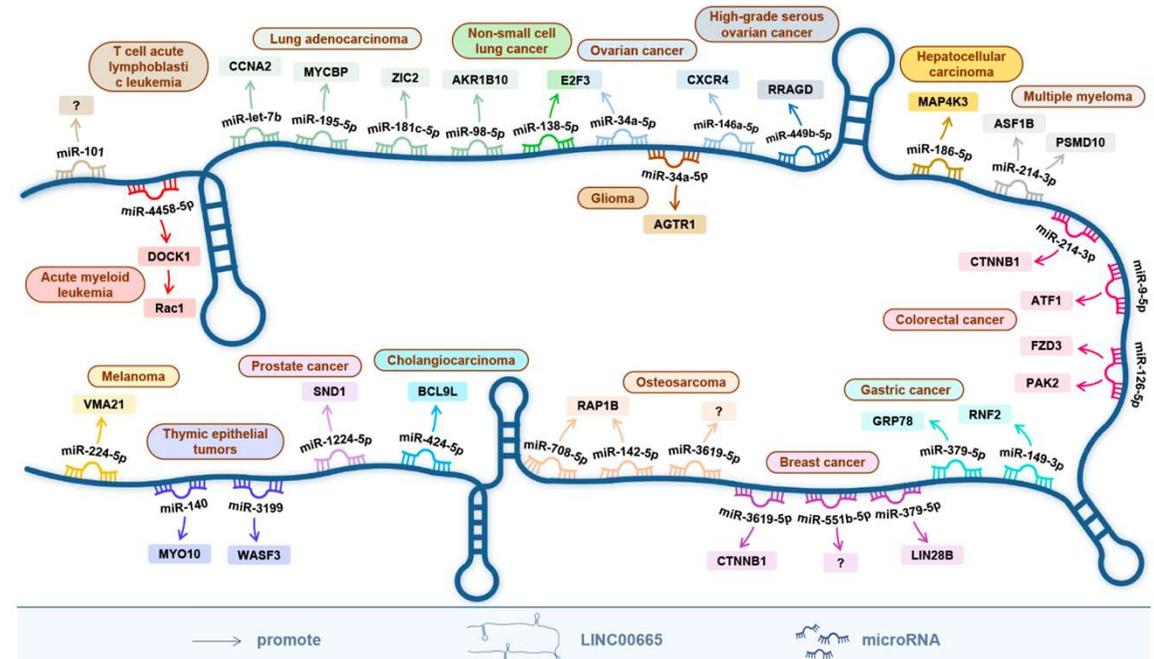


Fig. 10. ceRNA network centered on LINC00665

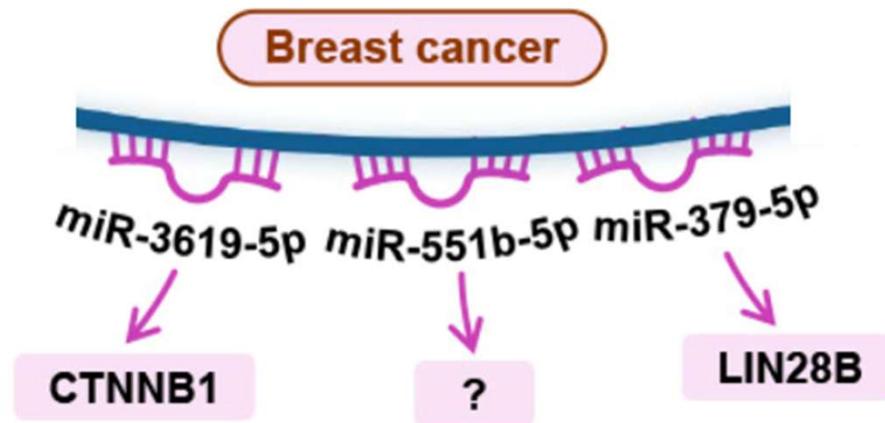


Fig. 11. ceRNA in breast cancer

## Examples in breast cancer:

- **miR-3619-5p** → CTNNB1 → Wnt/ $\beta$ -catenin pathway
- **miR-551b-5p** → proliferation and invasion
- **miR-379-5p** → LIN28B → Epithelial-Mesenchymal Transition (EMT)

## RNA-Protein Interaction

LINC00665 directly regulates ~10 protein-coding genes

- Chromatin regulatory complex: binds PRC2 → transcriptional activation of targets
- RNA-binding proteins (RBPs): alters mRNA stability, transport, translation

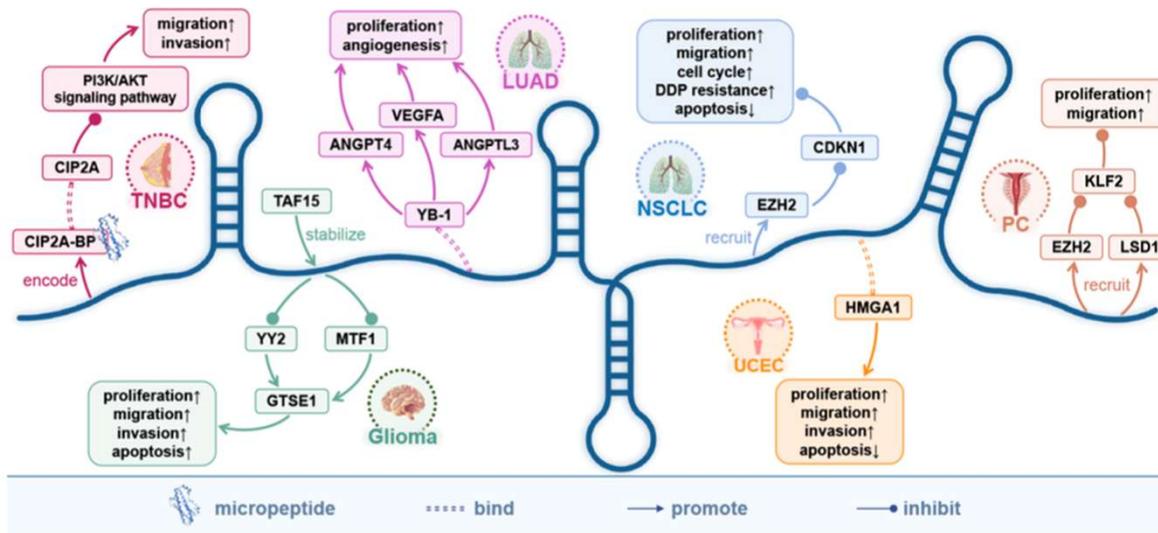


Fig.12. Direct targeting of LINC00665

**Changes protein levels  
independently of miRNAs**

# Micropeptide Function: CIP2A-BP

- LINC00665 contains a smORF encoding CIP2A-BP (~52 aa)
- Effect → suppress invasion and metastasis in Triple Negative Breast Cancer (TNBC)
- **In TNBC the LINC00665 expression is lower than in normal cells**

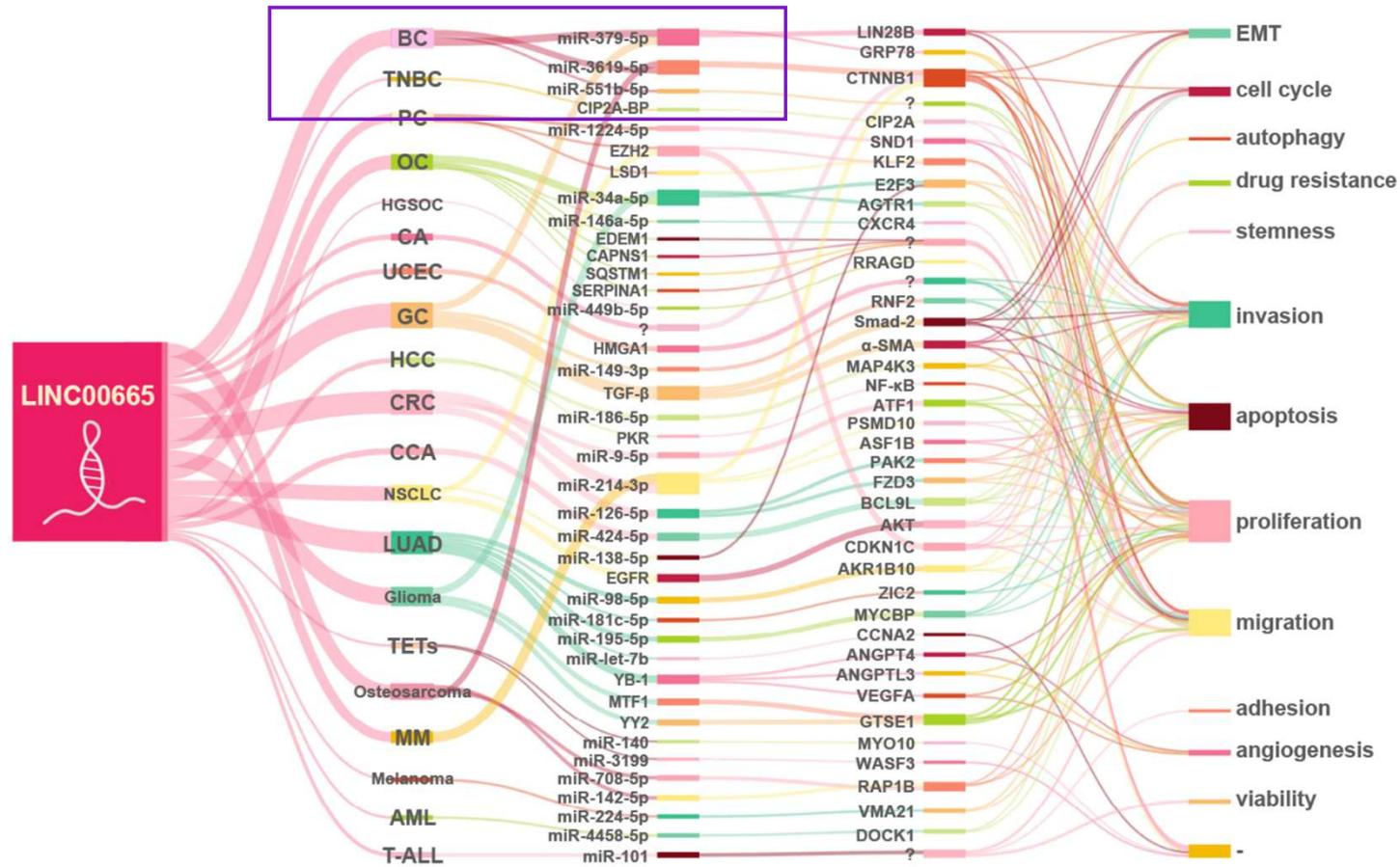


Fig. 13. The complex molecular regulatory mechanism of LINC00665 in tumors.

# Clinical relevance

1. **Promising diagnostic and prognostic biomarker** in breast, gastric and hepatocellular carcinoma
2. **Predictive marker** of response to cisplatin–paclitaxel in breast cancer therapy
3. **Involved in the modulation of different pathways** like Wnt/ $\beta$ -catenin, NF- $\kappa$ B, PI3K/AKT and TGF- $\beta$ /Smad
4. **Aberrant expression in  $\geq 18$  types of cancers**, including reproductive, digestive, respiratory, neurological, endocrine

# LINC00665 as a promising prognostic biomarker

| System             | Tumor Type                 | Sample Size  | Expression   | Prognostic/Diagnostic Value   | Ref. |
|--------------------|----------------------------|--------------|--|---|------|
| Digestive system   | Gastric cancer             | 49 patients  | Upregulation   | Positively associated with poor differentiation and TNM stage   | [23] |
|                    |                            | 116 patients | Upregulation   | Positively associated with tumor depth, lymph node metastasis and TNM stage; prognostic factor of OS ( $p < 0.05$ , HR = 2.703); AUC = 0.828  | [24] |
|                    | Hepatocellular carcinoma   | 122 patients | Upregulation   | Positively associated with lymph node metastasis and TNM stage; prognostic factor of OS ( $p < 0.05$ )  | [26] |
|                    |                            | 39 patients  | Upregulation   | Positively associated with poor differentiation, TNM stage and vascular invasion; prognostic factor of OS (MST: 46 versus 70 months, $p = 0.027$ , HR = 1.477); AUC = 0.614, sensitivity = 0.55, specificity = 0.53 | [3]  |
|                    | 76 patients                | Upregulation | Positively associated with tumor size and poor differentiation; prognostic factor of OS ( $p < 0.05$ ) | [27]  |      |
| Respiratory system | Colorectal cancer          | 46 patients  | Upregulation   | Positively associated with lymph node metastasis and poor differentiation   | [28] |
|                    | Cholangiocarcinoma         | 100 patients | Upregulation   | Positively associated with lymph node metastasis and TNM stage; prognostic factor of OS ( $p = 0.0375$ , HR = 1.835) and RFS ( $p < 0.001$ , HR = 2.554)  | [8]  |
|                    | Non-small cell lung cancer | 60 patients  | Upregulation   | Positively associated with tumor size, lymph node metastasis and TNM stage; prognostic factor of OS ( $p = 0.005$ ) and PFS ( $p = 0.002$ )   | [7]  |
|                    |                            | 60 patients  | Upregulation   | Positively associated with tumor size, lymph node metastasis and TNM stage  | [32] |
|                    | Lung adenocarcinoma        | 80 patients  | Upregulation   | Positively associated with tumor size, lymph node metastasis and TNM stage; prognostic factor of OS ( $p = 0.0115$ ) and RFS ( $p < 0.001$ )  | [1]  |
| Nervous system     | Glioma                     | 84 patients  | Upregulation   | Prognostic factor of OS ( $p = 0.035$ , HR = 1.44)  | [33] |
|                    |                            | -            | Upregulation   | Prognostic factor of OS ( $p < 0.05$ )  | [35] |
|                    |                            | -            | Downregulation   | Negatively associated with pathological grade   | [43] |
| Endocrine system   | Thymic epithelial tumors   | 48 patients  | Upregulation   | Prognostic factor of OS ( $p = 0.0241$ )  | [36] |
| Endocrine system   | Osteosarcoma               | -            | Upregulation   | Prognostic factor of OS ( $p = 0.047$ )   | [37] |
|                    |                            | 33 patients  | Upregulation   | Prognostic factor of OS ( $p < 0.05$ )  | [38] |
|                    |                            | 42 patients  | Upregulation   | Prognostic factor of OS ( $p = 0.011$ )   | [2]  |

TNM, Tumor-node-metastasis; OS, Overall survival; DFS, Disease-free survival; RFS, Recurrence-free survival; PFS, Progression-free survival; AUC, Area under the curve; MST, Median survival time; HR, Hazard ratio; FIGO, Federation internationale de gynécologie et obstétrique.

Fig. 14. aberrant expression of LINC00665 in different types of cancers

# Signaling pathways involved in LINC00665

1<sup>o</sup> TGF- $\beta$ /SMAD signaling pathway

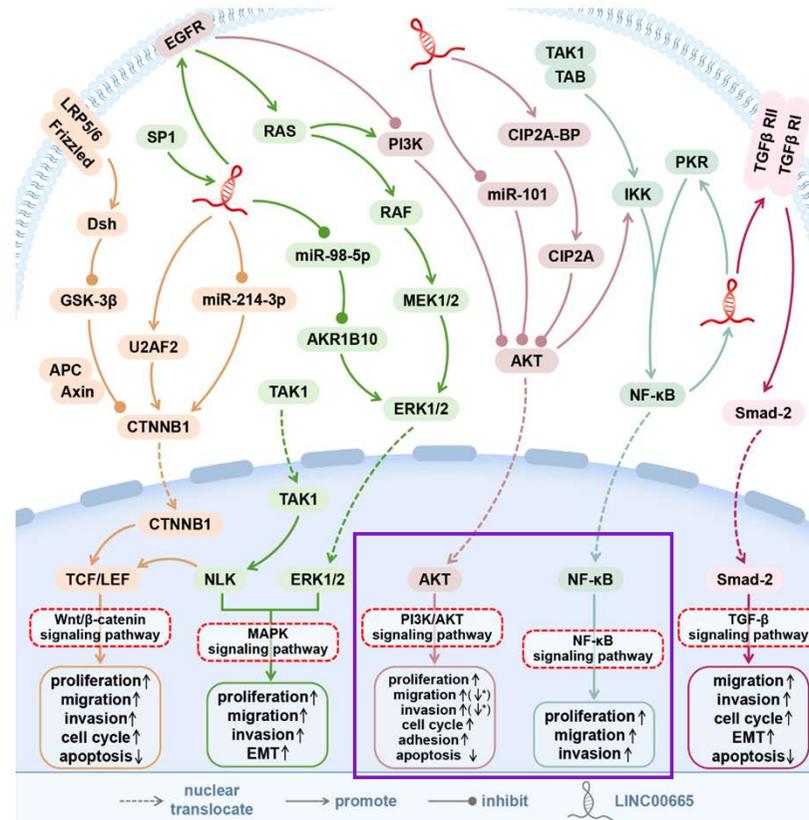


Fig. 15. Signaling pathways involved in LINC00665

2<sup>o</sup> PI3K/AKT/NF- $\kappa$ B signaling pathway

# LINC00665 and the efficacy of Anticancer Drugs

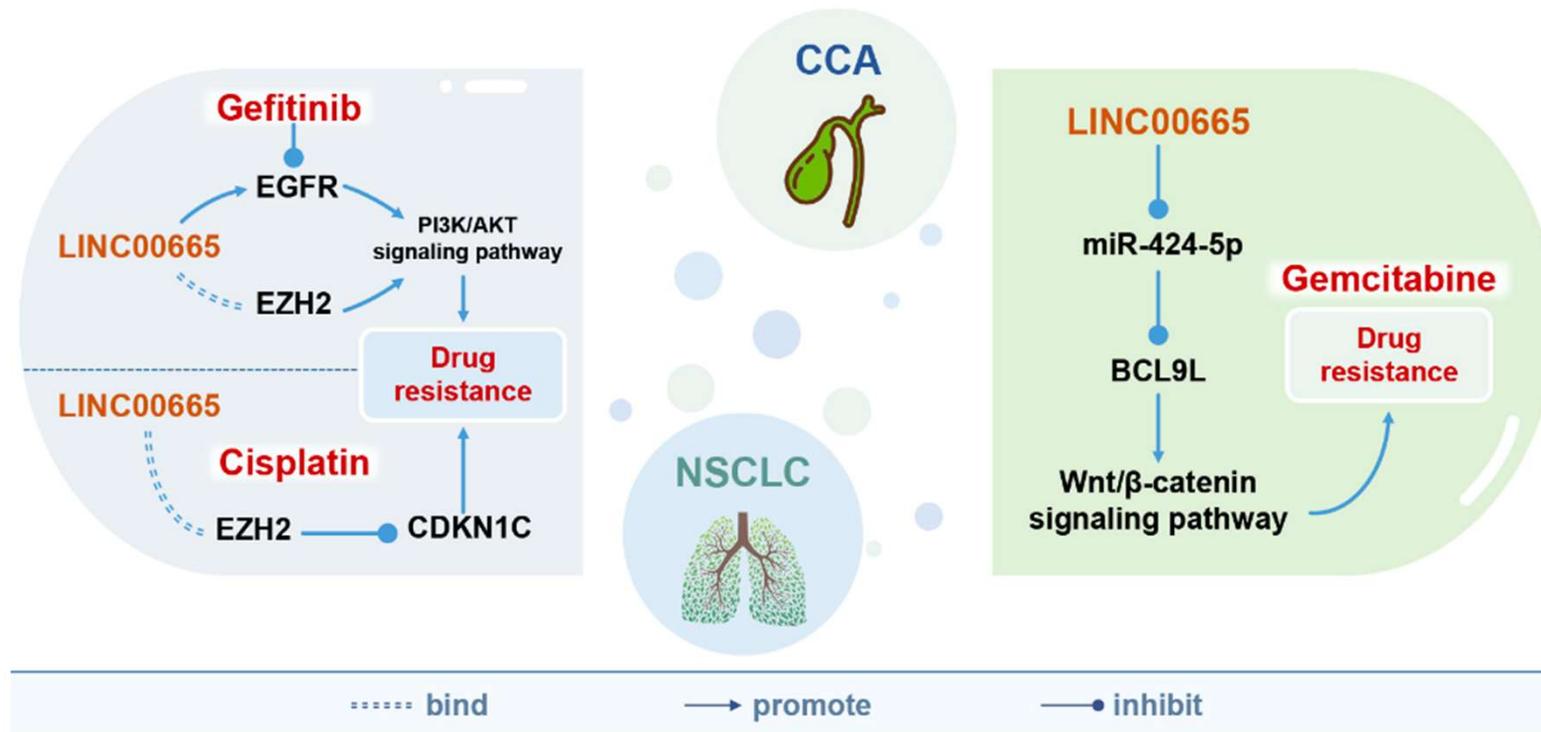
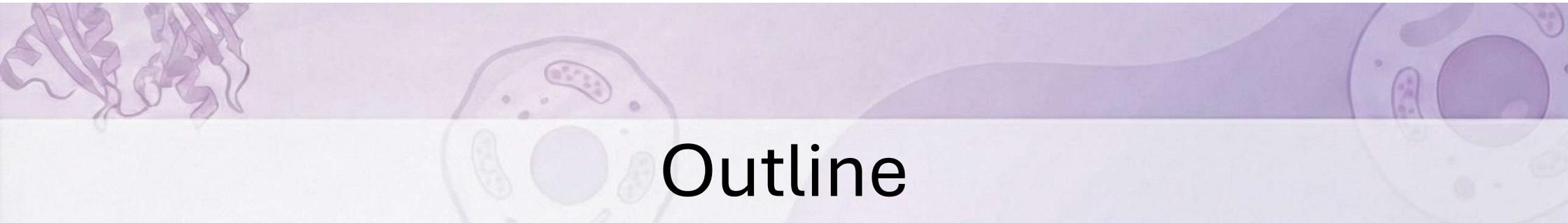


Fig. 16. Role of LINC00665 in resistance to anticancer drugs



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Micropeptide

LINC00665

CIP2A-BP validation

Mechanism and therapy

Discussion and conclusion

*Article*



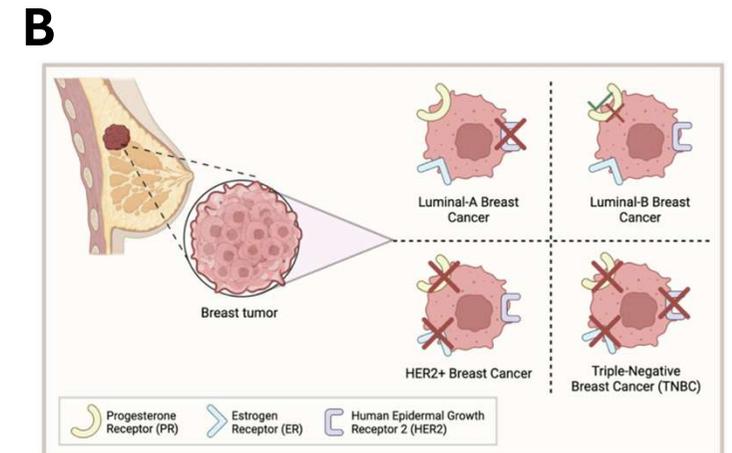
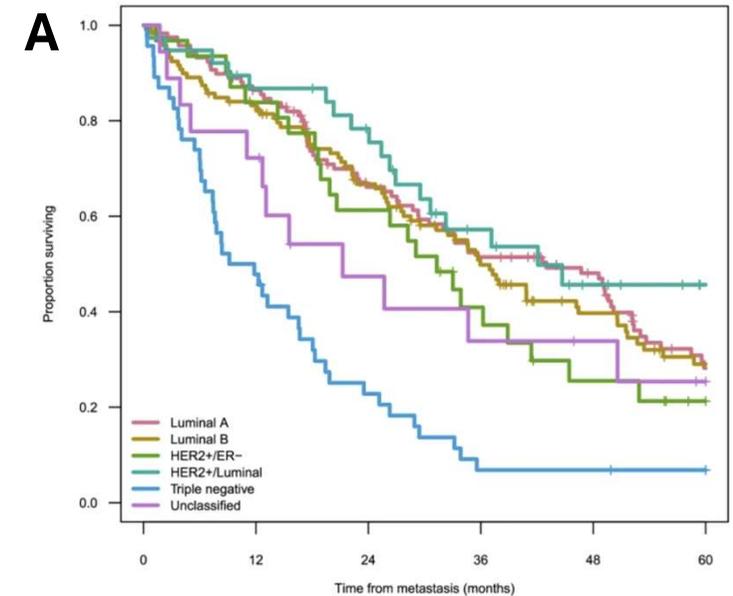
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# Micropeptide CIP2A-BP encoded by LINC00665 inhibits triple-negative breast cancer progression

Binbin Guo<sup>1,†</sup>, Siqi Wu<sup>1,†</sup>, Xun Zhu<sup>2,†</sup>, Liyuan Zhang<sup>3,†</sup>, Jieqiong Deng<sup>1</sup>, Fang Li<sup>1</sup>, Yirong Wang<sup>1</sup>, Shenghua Zhang<sup>1</sup>, Rui Wu<sup>1</sup>, Jiachun Lu<sup>4</sup> & Yifeng Zhou<sup>1,\*</sup> 

# The clinical Challenge: TNBC

- **Triple-Negative Breast Cancer (TNBC):**
  - ~15% of breast cancers;
  - Lacks ER, PR, and HER2 amplification;
  - **Clinical Features:** Aggressive behavior, early relapse, high metastatic risk;
- **The Problem:** Lack of targeted therapies (e.g., Tamoxifen/Herceptin do not work).



**Figure 17: TNBC definition and poor prognosis. (A) Kaplan-Meier curve showing reduced survival probability for TNBC compared to other subtypes [Sears, A.J. (2025)]. (B) Breast cancer subtypes classified by ER, PR, and HER2 receptor status [Kirbly, M. (2023)]**

## TGF- $\beta$ and lncRNAs

- **TGF- $\beta$  Signaling:** Known driver of EMT and metastasis in late-stage cancer;
- **lncRNAs:** >200nt transcripts, historically considered non-coding;
- ***The Hypothesis: Does TGF- $\beta$  regulate cancer progression by modulating the translation of specific lncRNAs?***

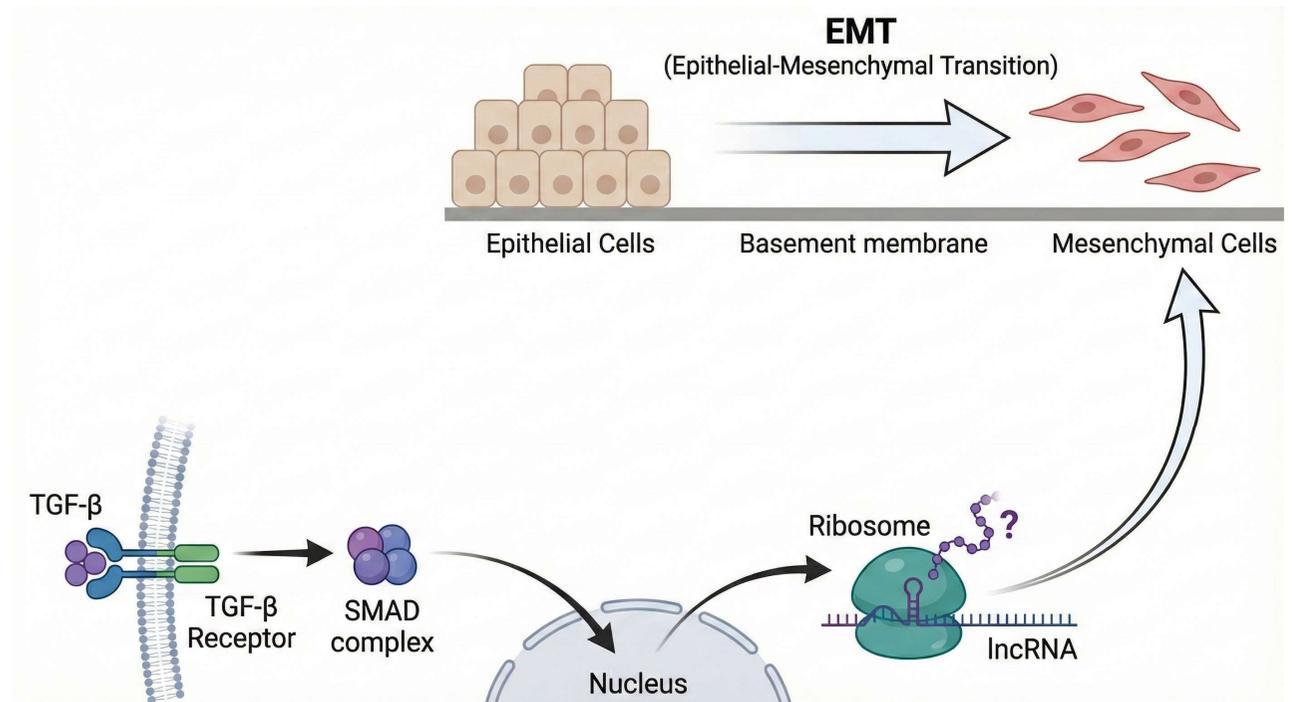


Figure 18: TGF- $\beta$  signaling may promote EMT by modulating the translation of specific lncRNAs

# Principal aims of the study

- **Aim 1:** Screen for lncRNAs regulated by TGF- $\beta$  at the **translational level**;
- **Aim 2:** Validate the coding potential and endogenous expression of the candidate;
- **Aim 3:** Determine clinical significance in TNBC patients;
- **Aim 4:** Elucidate the biological function (Tumor Suppressor vs. Oncogene).

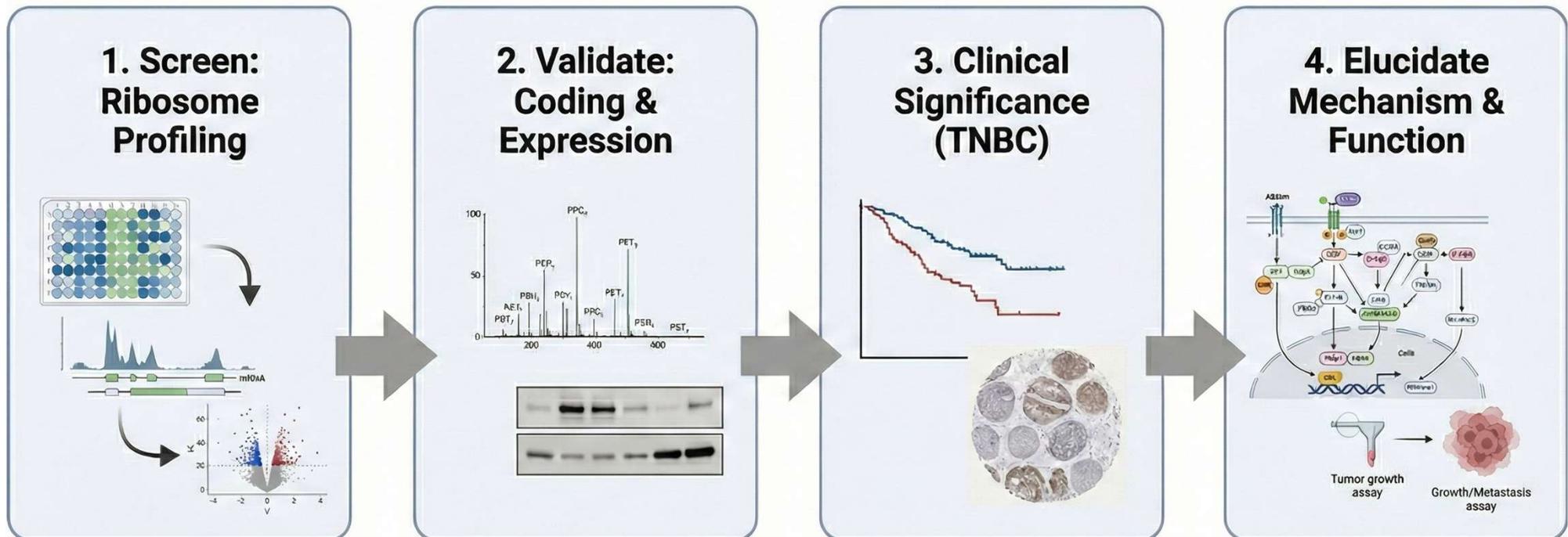
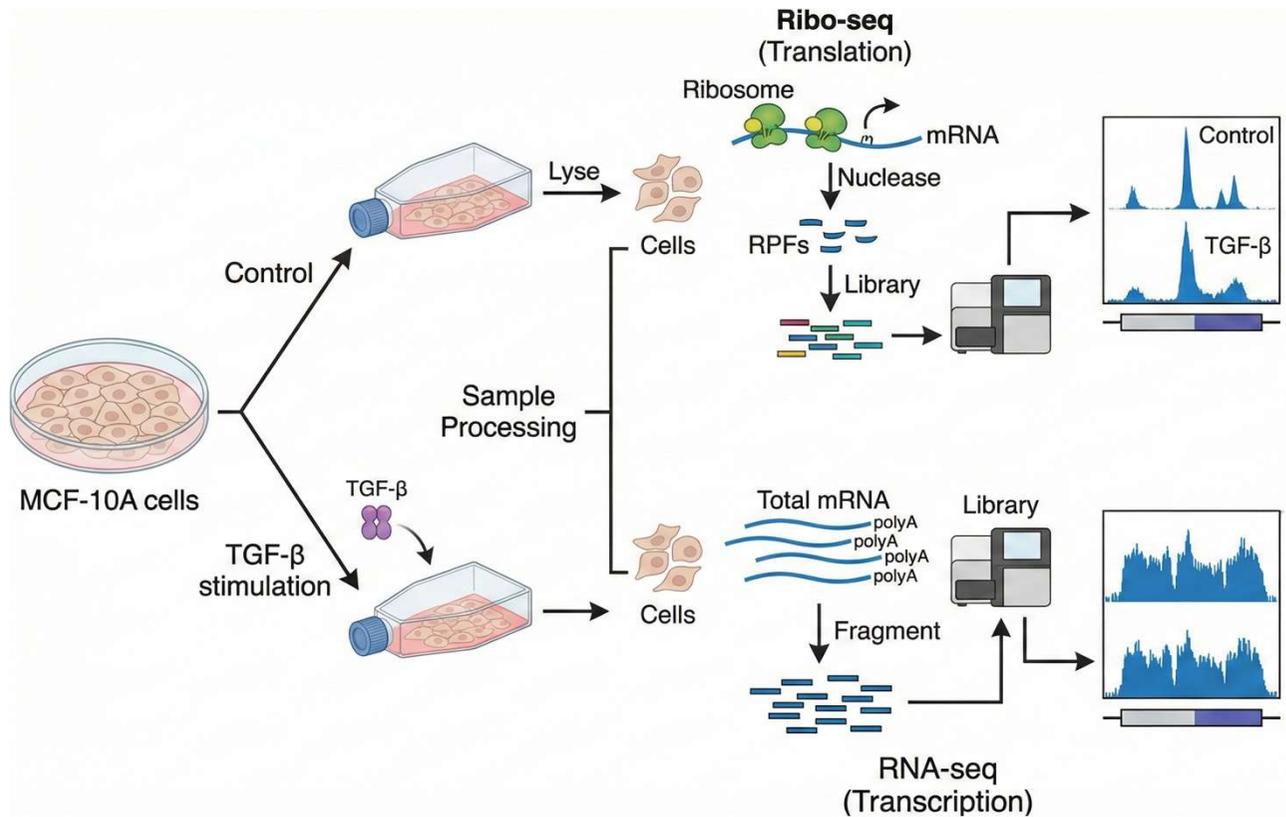


Figure 19: Experimental workflow for the identification, validation, and functional characterization of novel micropeptides in TNBC

# The screening strategy



- **Model:** MCF-10A.
- **Treatment:** TGF- $\beta$  stimulation.
- **Method:** Comparative Ribo-seq (Translation) vs. RNA-seq (Transcription).
- **Goal:** Find genes with changed translation but stable transcription.

Figure 20: Experimental schematic for identifying TGF- $\beta$ -induced translational regulation via comparative Ribo-seq and RNA-seq



# Coding potential analysis

- **In Silico Prediction:** 4 potential Open Reading Frames (ORFs).
- **Validation:** Vectors containing each ORF fused with a **His-tag**.
- **Result:** Only **ORF1** produced a detectable protein (~5.5 kDa).
- **Location:** Exon 1 (Chr 19).
- **Peptide:** 52 amino acids. Named **CIP2A-BP**.

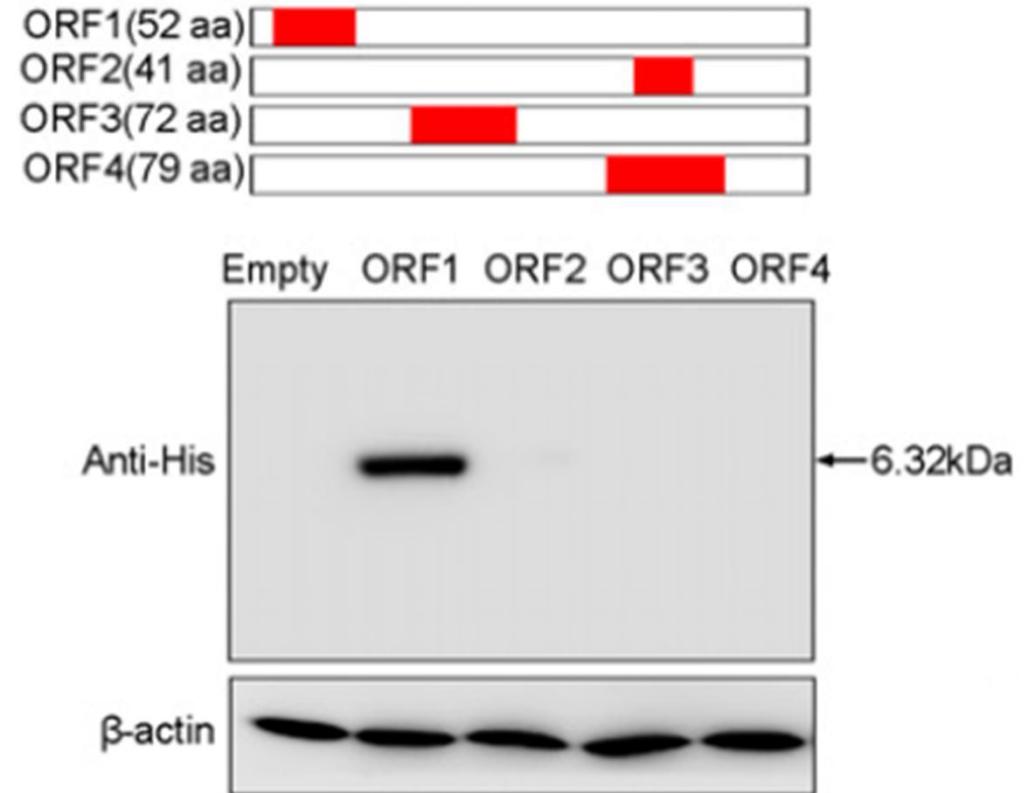


Figure 22: Western blot analysis of four putative open reading frames confirms that only ORF1 encodes a detectable micropeptide [Guo, B. (2020)]

# Proving Translation: The GFP-Fusion Experiment

## Strategy:

- Fusion of the ORF with GFP.

## Constructs:

- *Wild-Type (WT)*: Normal ATG start codon.
- *Mutant (Mut)*: Start codon mutated to ATT.

## Result :

- WT → Green Fluorescence.
- Mutant → No Fluorescence.

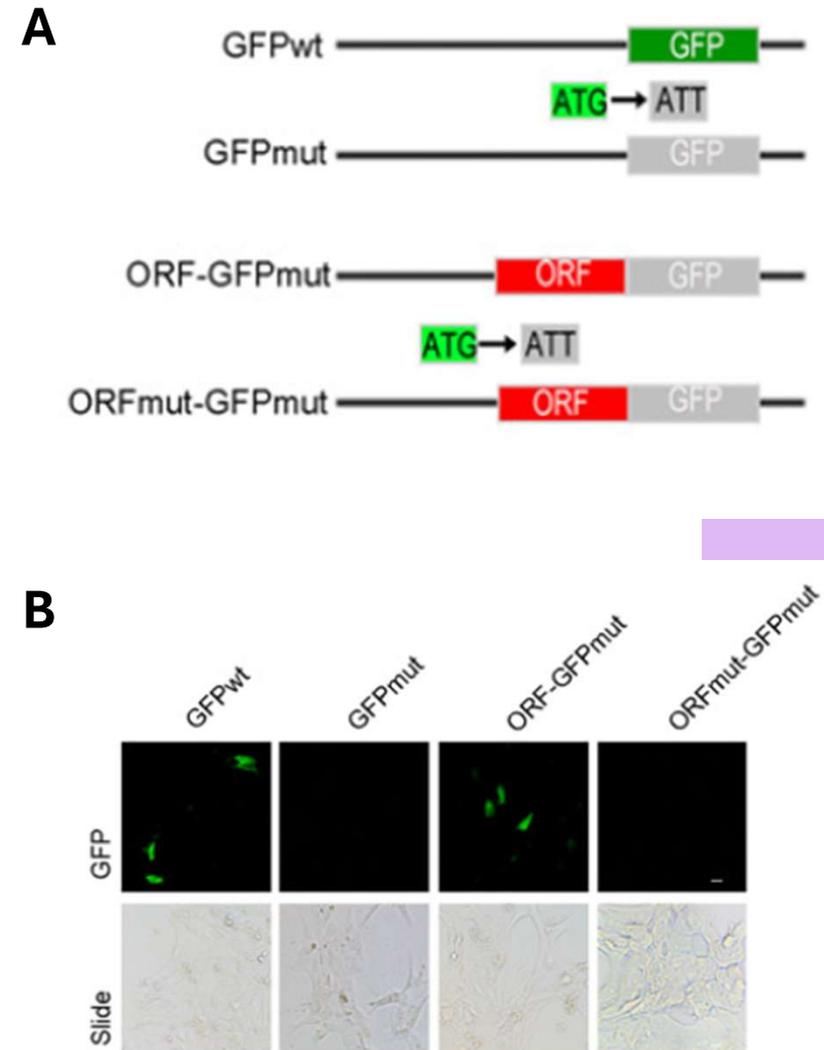
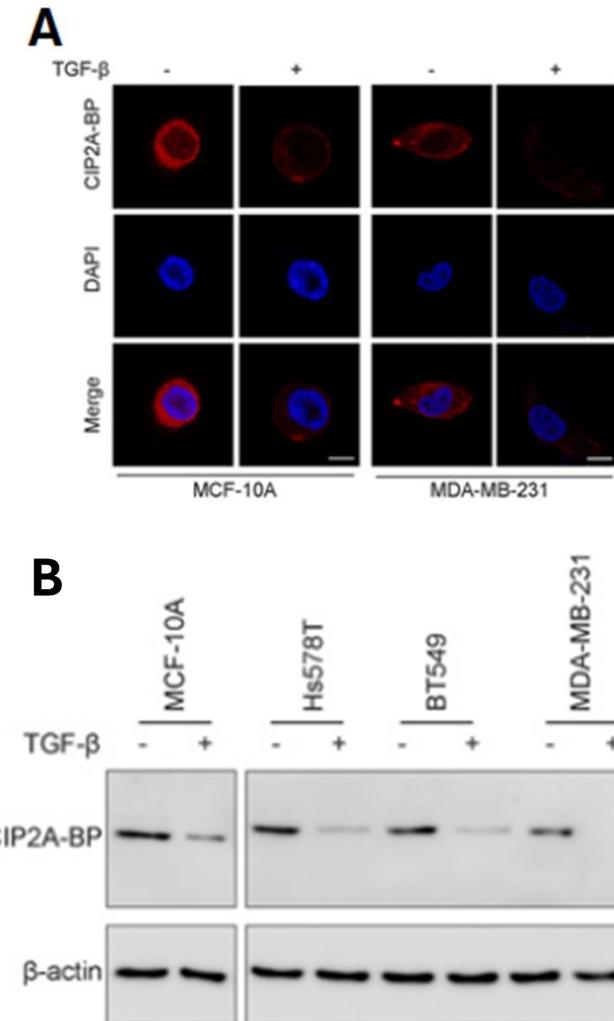


Figure 23: (A) Strategy: Mutated GFP requires the upstream ORF to initiate translation; (B) Fluorescence confirms the LINC00665 start codon is functional [Guo, B. (2020)]

# Endogenous peptide detection

- **Tool:** Custom polyclonal antibody generated against CIP2A-BP;
- **Localization:** Mainly **Cytoplasmic**;
- **Regulation:**
  - Expressed in normal cells (MCF-10A);
  - **Lower** in TNBC cells (Hs578T, BT549, MDA-MB-231);
  - **Reduced** by TGF- $\beta$  treatment in all cell lines.



**Figure 26: Detection of endogenous CIP2A-BP protein;**  
**(A) Immunofluorescence staining of MCF-10A and MDA-MB-231 cells, and**  
**(B) Western blot analysis of peptide expression in normal and TNBC cell lines treated with TGF- $\beta$**   
**[Guo, B. (2020)]**

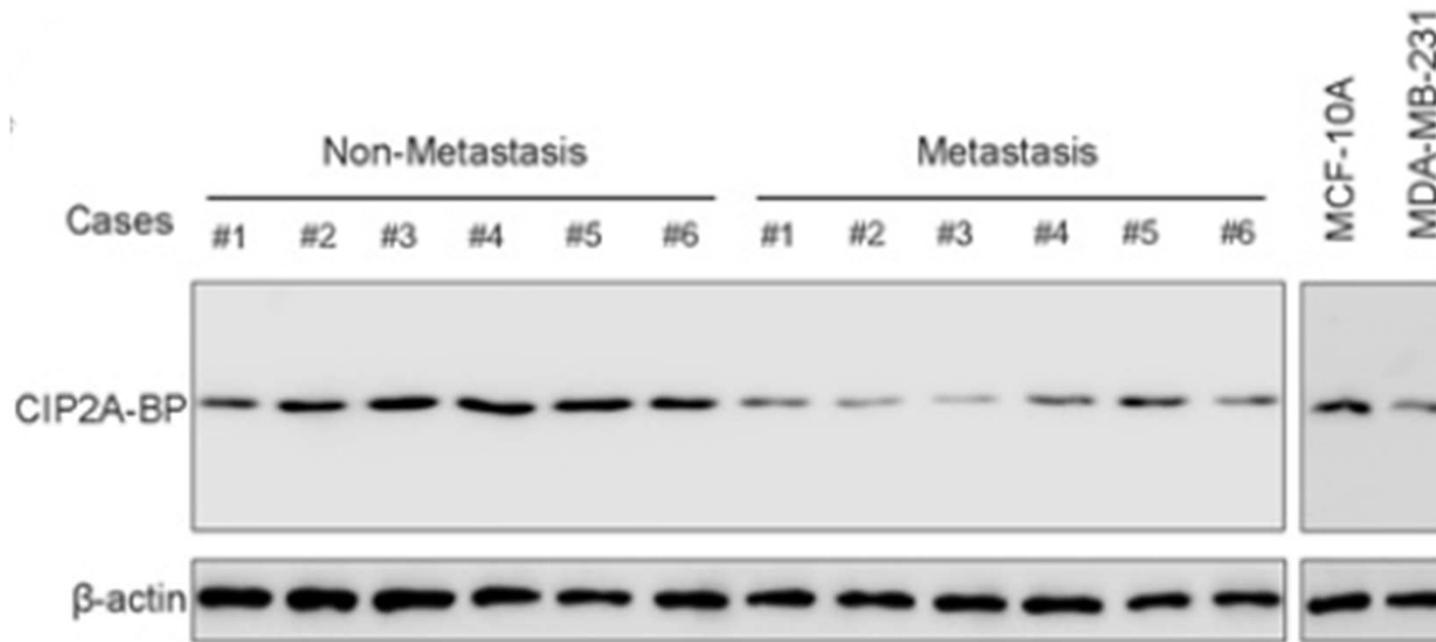


Figure 27: Western blot analysis comparing CIP2A-BP protein levels in non-metastatic versus metastatic TNBC patient tissues [Guo, B. (2020)]

## Clinical correlation: Metastasis

- **Sample:** Tissue from TNBC patients.
- **Comparison:** Non-Metastatic vs. Metastatic tumors.
- **Finding:** CIP2A-BP protein levels are markedly **lower** in metastatic tissues.

# Overall survival

- **Cohorts:** Two independent cohorts (Suzhou & Guangzhou).
- **Analysis:** Immunohistochemistry (IHC) on clinical samples
- **Result:** Low CIP2A-BP expression is significantly associated with **Poor Overall Survival**

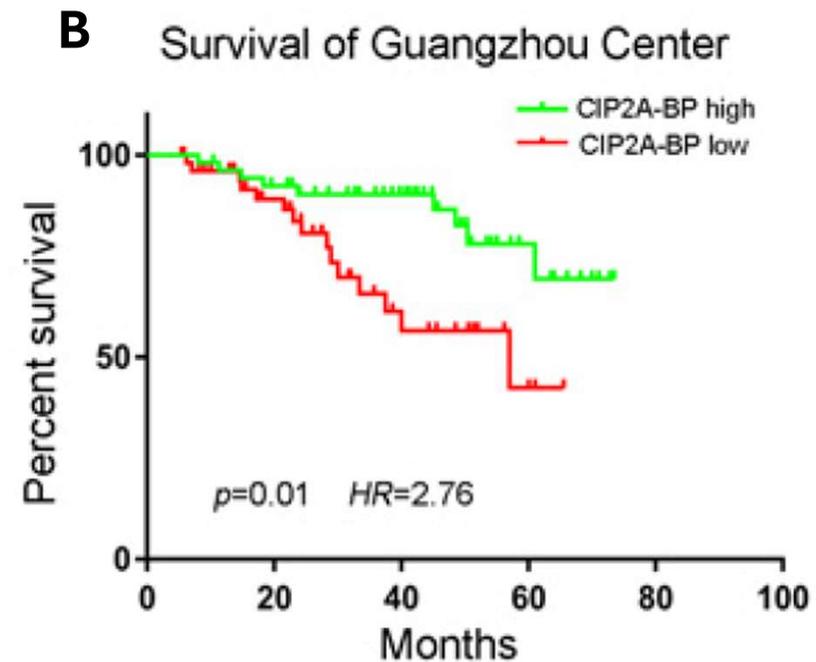
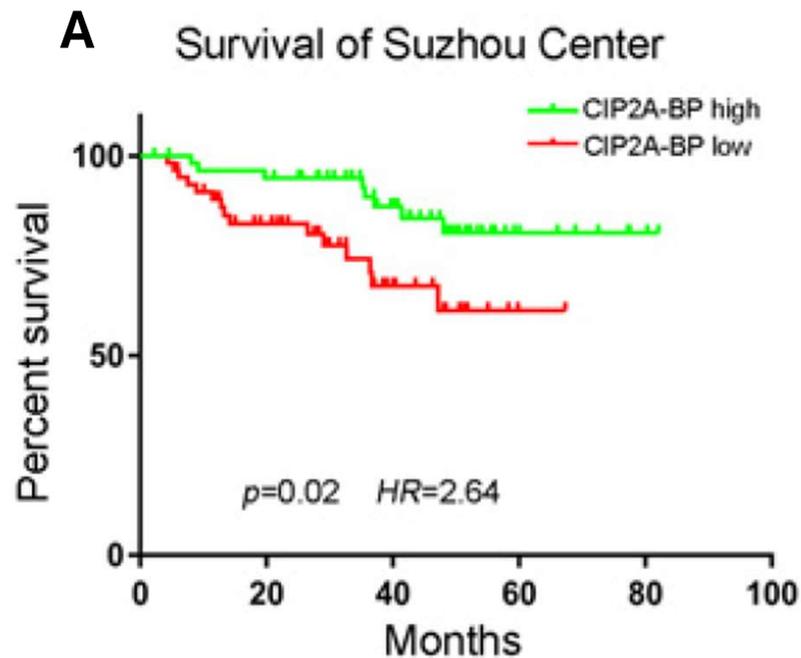


Figure 28: Kaplan-Meier overall survival curves for TNBC patients stratified by high vs. low micropeptide expression in the (A) Suzhou and (B) Guangzhou cohorts [Guo, B. (2020)]

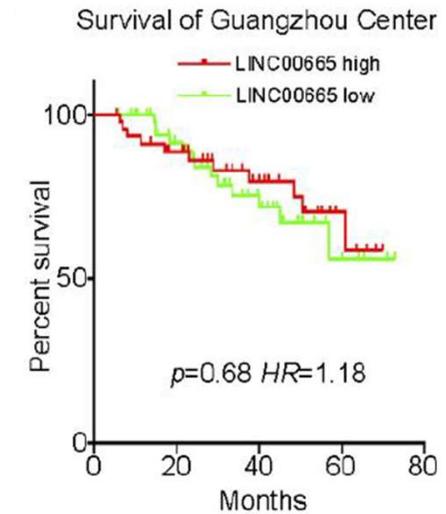
# RNA vs. Peptide

**Observation:**  
The *LINC00665* RNA transcript levels do NOT correlate with survival;

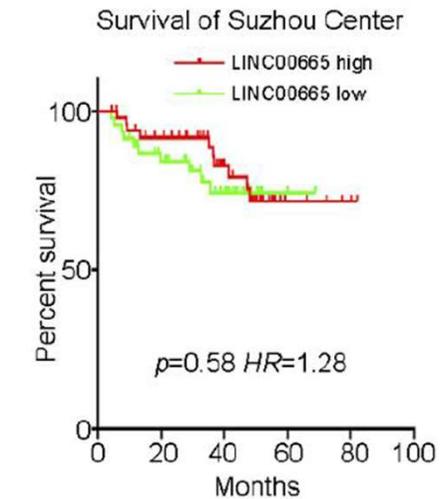
**Conclusion:**  
The prognostic marker is **CIP2A-BP**, not the lncRNA;

**Significance:**  
Highlights the importance of studying the "hidden proteome".

**A**



**B**



**Figure 29:** Kaplan-Meier overall survival curves for TNBC patients stratified by high vs. low *LINC00665* RNA expression in the (A) Guangzhou and (B) Suzhou cohorts show no significant difference [Guo, B. (2020)]

# Investigating Function: The Setup

- **Gain of Function:** Overexpression of CIP2A-BP (ORF).
- **Loss of Function:** CRISPR/Cas9 Knockout (KO) of the peptide.
- **Rescue:** Re-expression of the peptide in KO cells.
- **Models:** Hs578T and MDA-MB-231 cell lines.

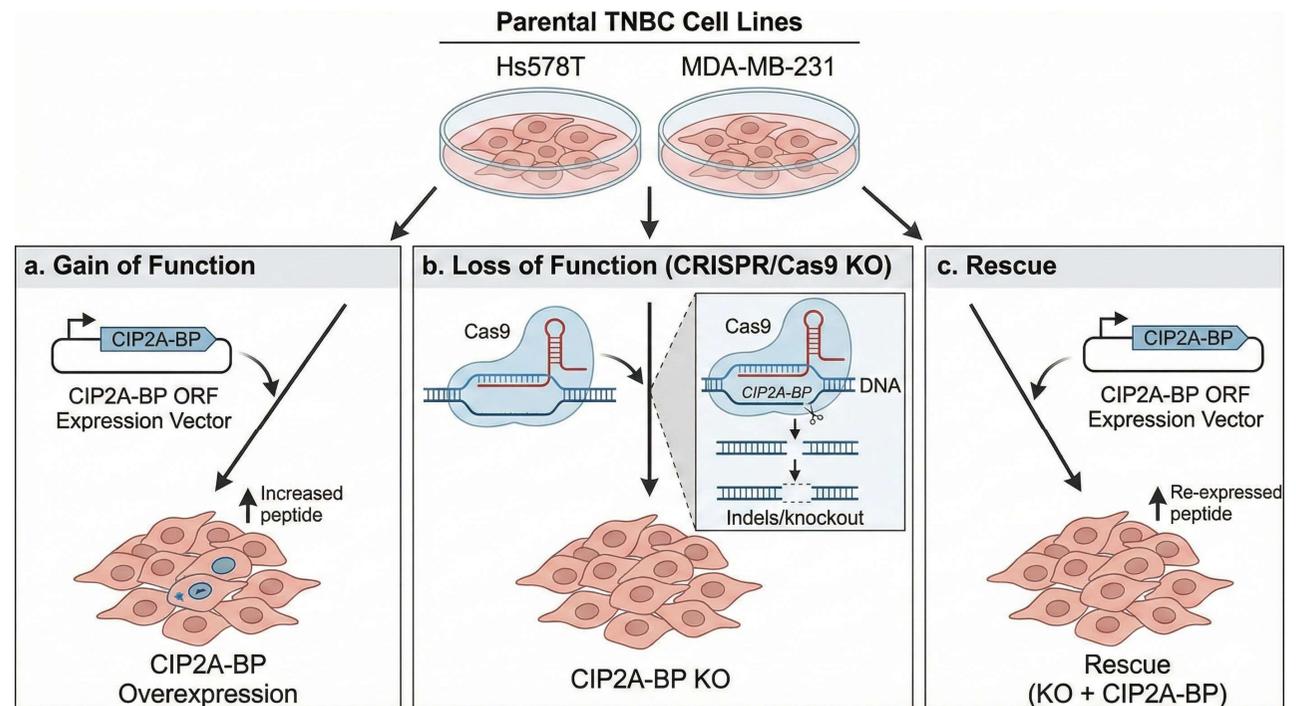
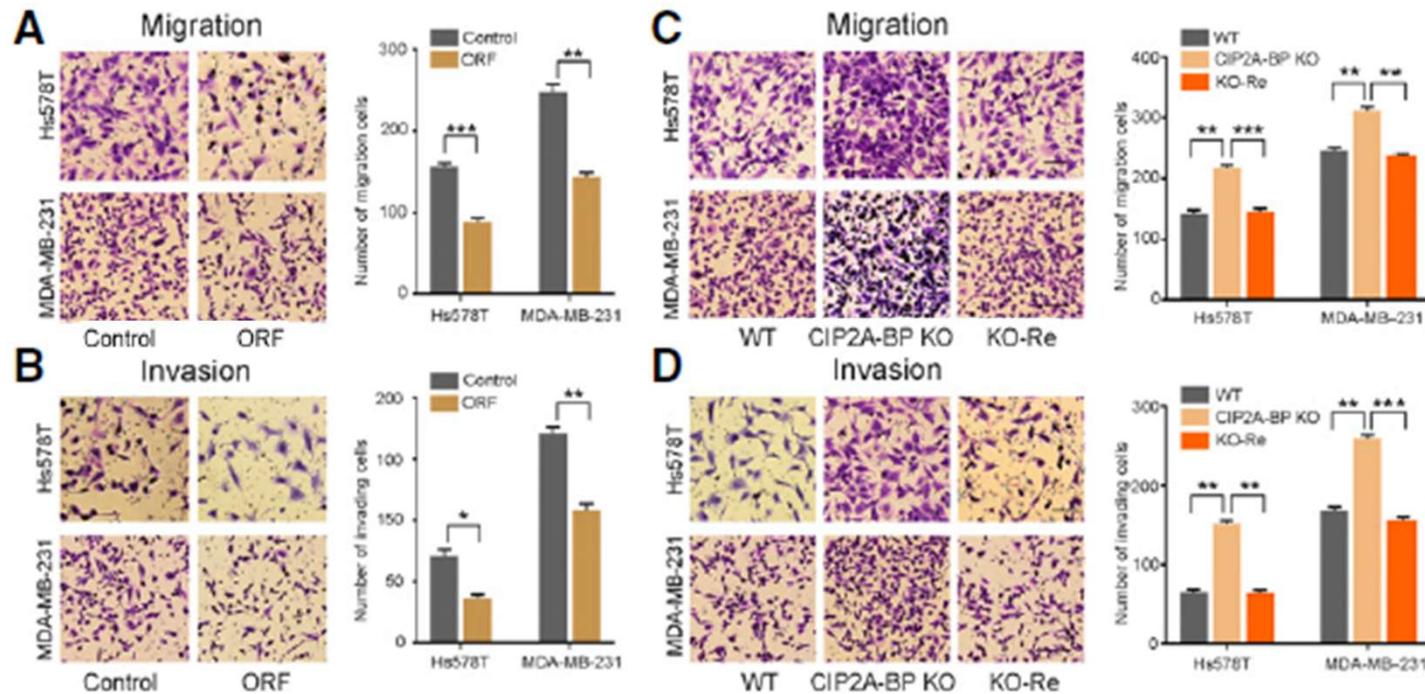


Figure 30: Experimental setup for genetic manipulation of CIP2A-BP in TNBC cell lines

## *In Vitro* Results: Migration and Invasion

- **Overexpression:** Significantly **reduces** migration and invasion;
- **Knockout:** Significantly **increases** migration and invasion;
- **Rescue:** Restores the phenotype to baseline.



**Figure 31: CIP2A-BP inhibits TNBC cell motility. Overexpression reduces (A, B), whereas knockout increases migration and invasion, a phenotype reversed by rescue experiments (C, D) [Guo, B. (2020)]**

## *In Vivo* validation: Lung metastasis

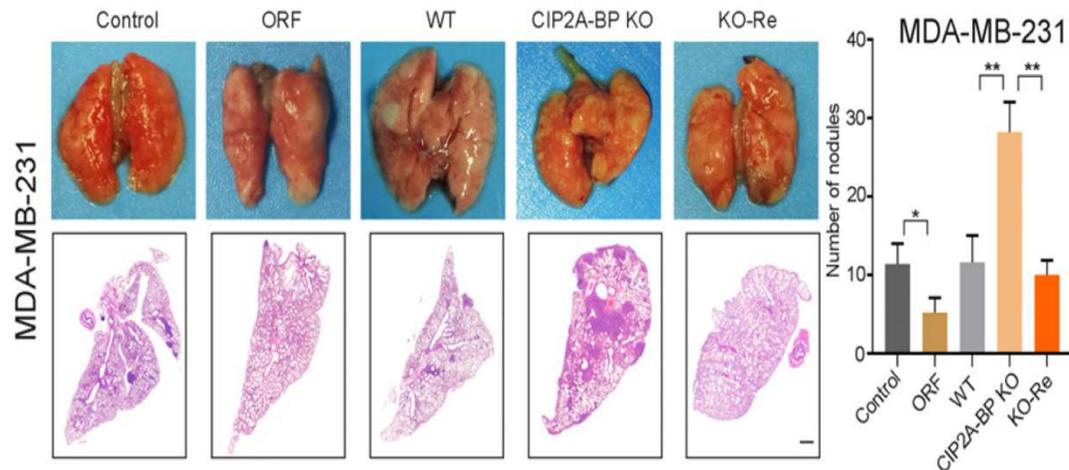


Figure 32: CIP2A-BP inhibits lung metastasis *in vivo*. (A, B) Overexpression reduces, while knockout increases metastatic nodule formation, a phenotype reversed by rescue [Guo, B. (2020)]

- **Model:** Tail vein injection of TNBC cells into nude mice;
- **Groups:** Control, ORF (Overexpression), WT, KO (Knockout), Rescue;
- **Result:**
  - ORF → Fewer lung nodules;
  - KO → **More** lung nodules;
- **Conclusion:** CIP2A-BP suppresses metastasis *in vivo*.

# Short Summary

- **Summary:**
  - *LINC00665* encodes a 52-aa peptide: **CIP2A-BP**;
  - TGF- $\beta$  specifically blocks its translation;
  - CIP2A-BP acts as a **Tumor Suppressor**;
  - Loss of CIP2A-BP drives metastasis in TNBC;
- **Next:** *How does TGF- $\beta$  block it? And what is the molecular target?*

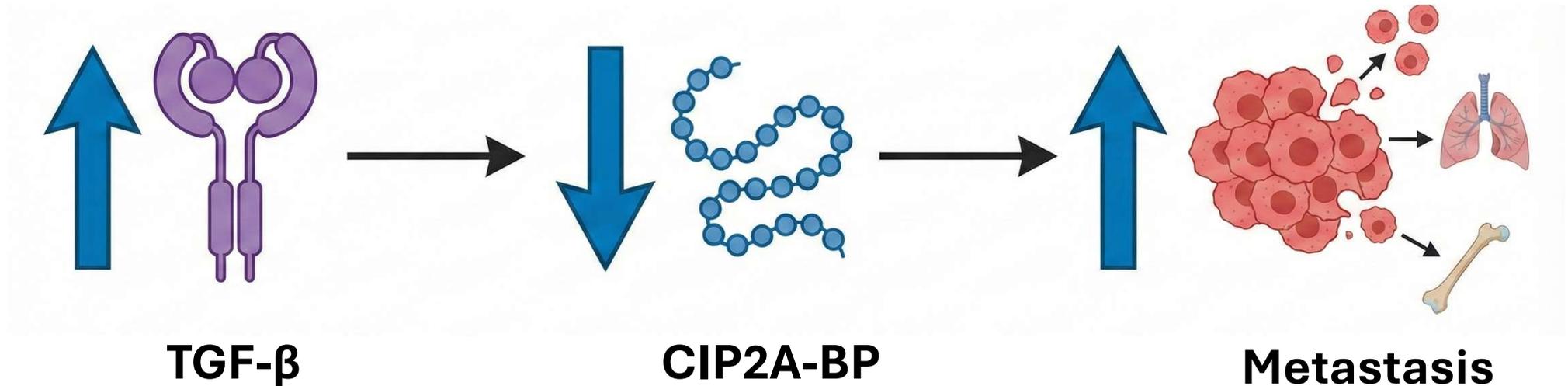
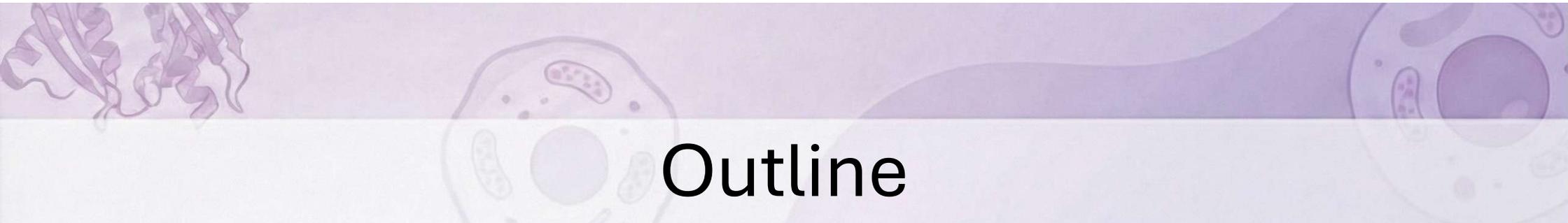


Figure 33: TGF- $\beta$  blocks translation of CIP2A-BP, thereby driving TNBC metastasis



# Outline

1. Theoretical framework: Unveiling the Hidden Microproteome;

2. The candidate: LINC00665 and its canonical oncogenic role;

3. Discovery of CIP2A-BP: From translational silencing to molecular decoy;

4. Translational impact: *In Vivo* validation and peptide therapy

5. Discussion and Conclusion

Micropeptide

LINC00665

CIP2A-BP validation

Mechanism and therapy

Discussion and conclusion

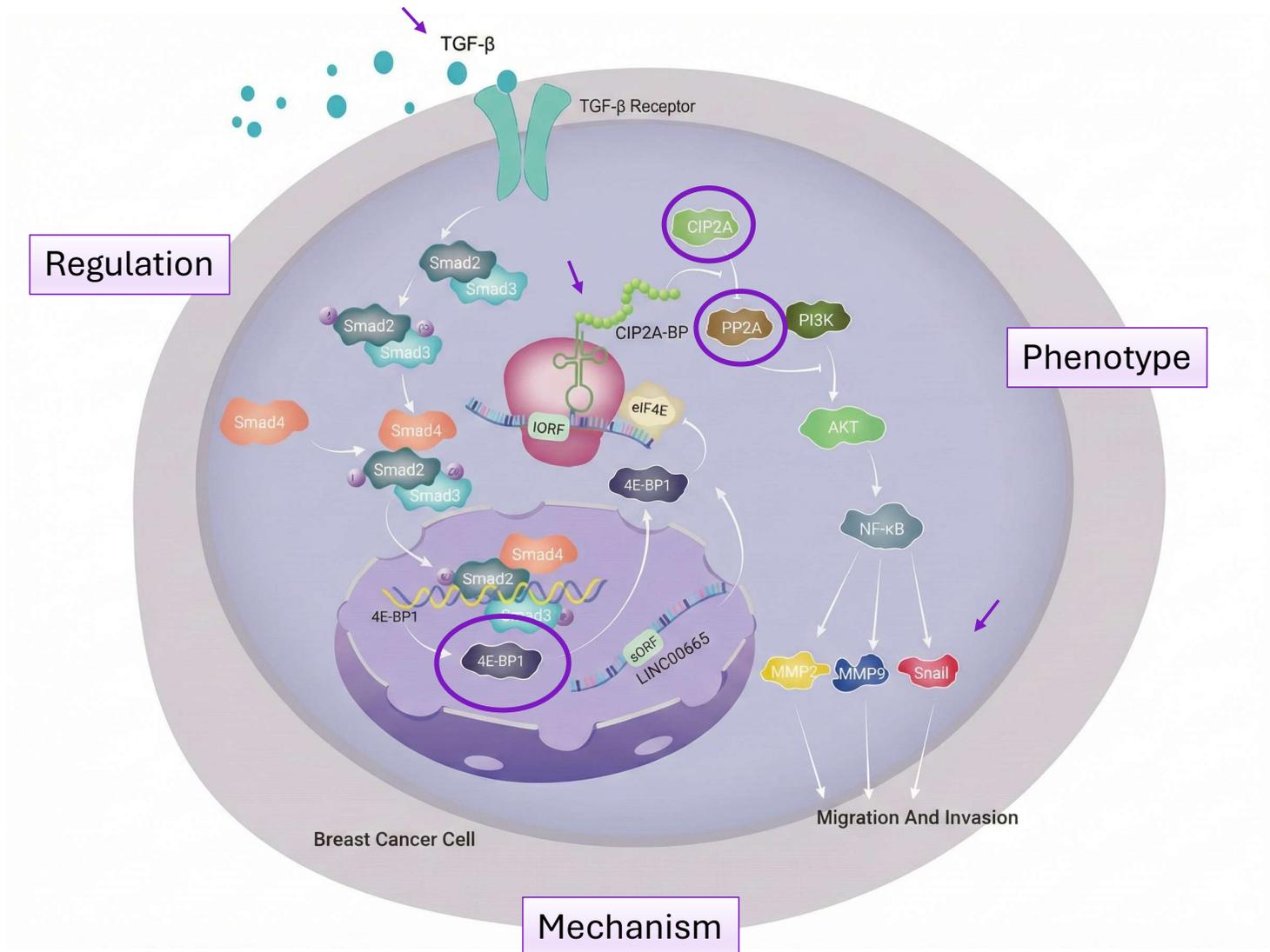


Figure 34. molecular Landscape of the LINC00665/CIP2A-BP Axis in Triple-Negative Breast Cancer (TNBC)

# Does TGF- $\beta$ treatment reduce CIP2A-BP translation through 4E-BP1?

TGF- $\beta$  treatment reduced the levels of CIP2A-BP and activated epithelial mesenchymal transition (EMT) and Smad signaling pathway in TNBC cell lines.

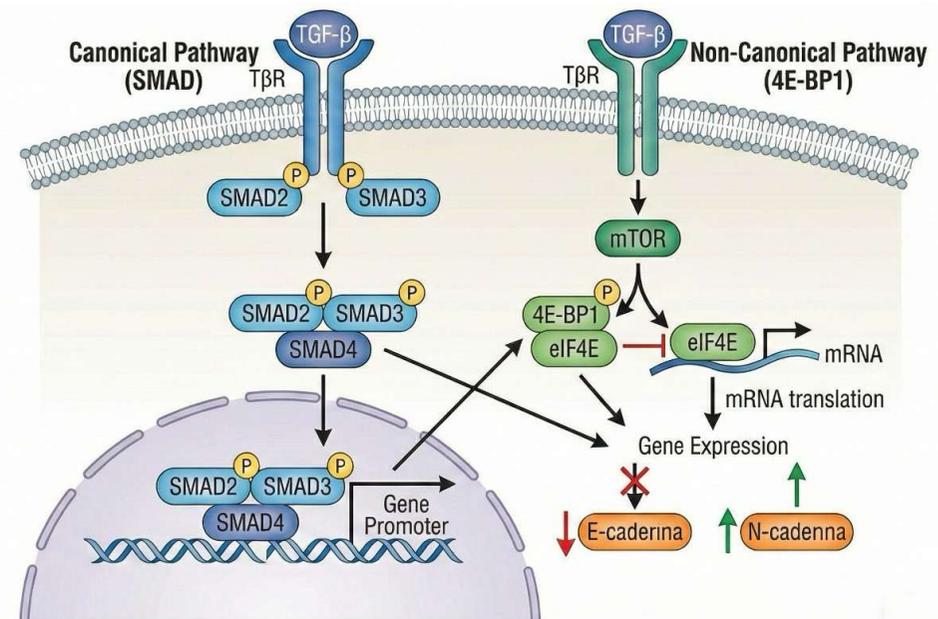
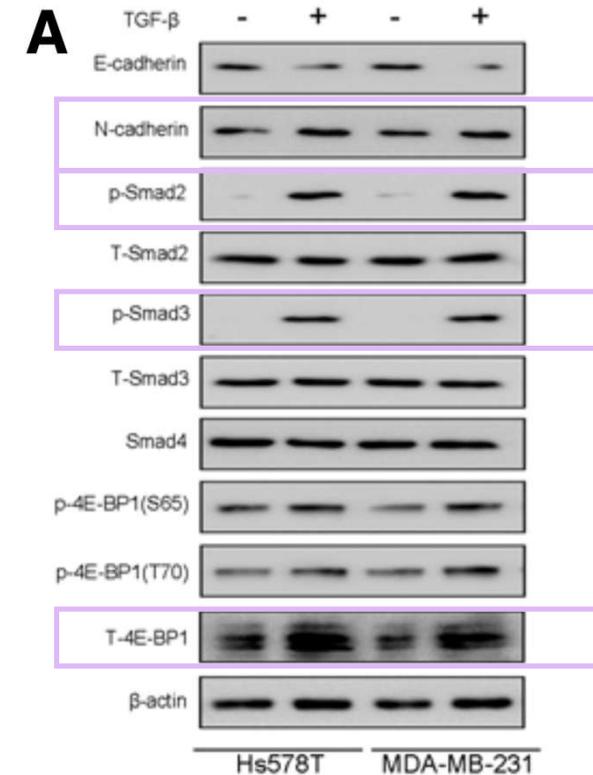


Figure 35. Schematic representation of TGF- $\beta$  signaling mechanism in TNBC cells

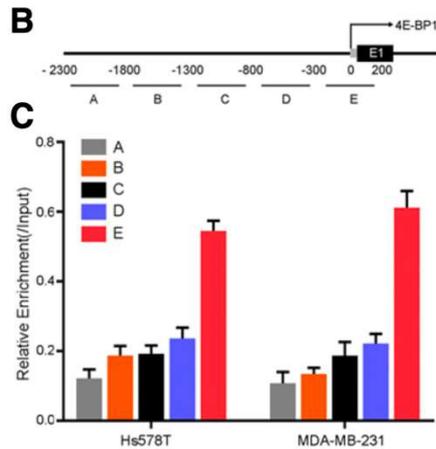
# Does TGF- $\beta$ treatment reduce CIP2A-BP translation through 4E-BP1?

## Immunoblotting analysis

- Downregulation of E-cadherin
- Upregulation of N-cadherin
- Increased level of p-Smad2 and p-Smad3
- **Upregulation of 4E-BP1**



**Figure 36. Effects of TGF- $\beta$  on the micropeptides CIP2A-BP through 4E-BP1**  
 (A) Immunoblotting analysis of expression of the indicated proteins in TNBC cells cultured with or without TGF- $\beta$



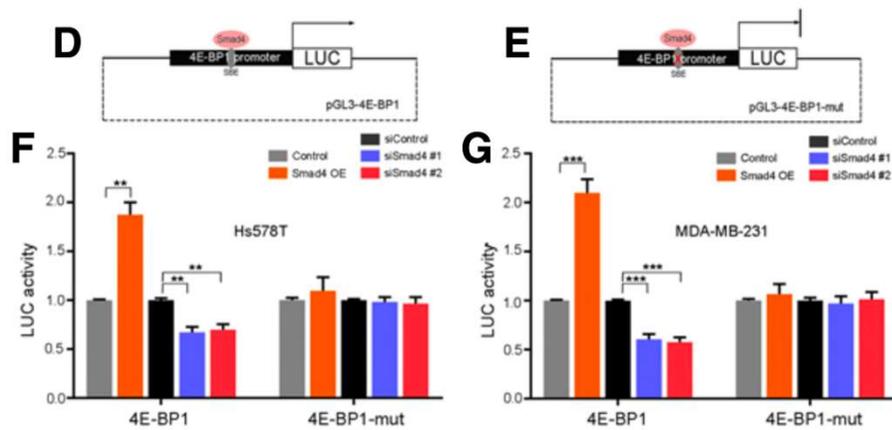
- ChIP

- Luciferase reporter assay

✓ Smad4 bind to the 4E-BP1 promoter adjacent to exon 1 which contained a potential Smad4 binding element

✓ Significantly upregulated luciferase activity in Smad4 overexpressed cells rather than down-regulated cells by Smad4 KD

**Smad4 is the transcription factor for 4E-BP1**



(B) & (C) Chromatin Immunoprecipitation assay

(D) Luciferase reported assay wt 4E-BP1 promoter

(E) Luciferase reported assay mutant 4E-BP1 promoter

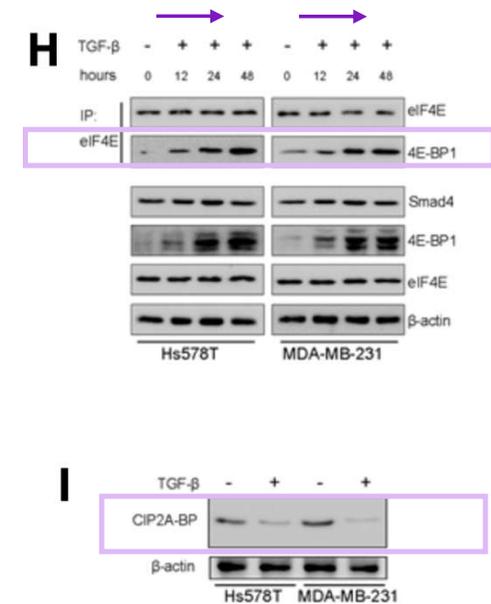
(F) & (G) Luciferase reported assay using mutant and wt 4E-BP1 promoter construct in TNBC cells with Smad4 OE or KD

## Does TGF- $\beta$ treatment in TNBC cell lines increase the binding of 4E-BP1 to eIF4E?

Co-IP

- ✓ The amount of eIF4E-associated 4E-BP1 increased in a time-dependent manner after TGF- $\beta$  treatment of TNBC cell lines, correlated with decreased level of CIP2A-BP.
- ✓ TGF- $\beta$ /Smad4 signaling pathway significantly reduce the expression of CIP2A-BP

**Activation of TGF- $\beta$ /Smad pathway leads to increased expression of 4E-BP1, which reduced expression of CIP2A-BP through directly binding to eIF4E**



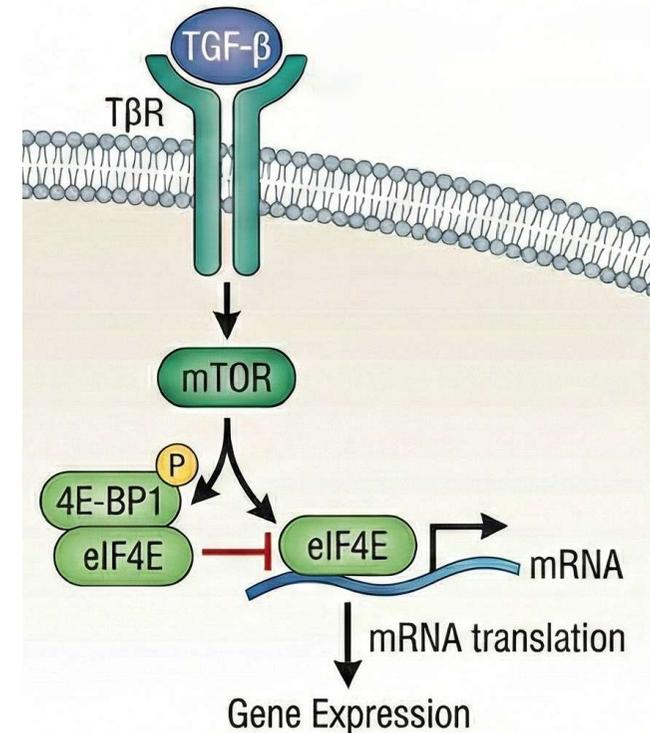
(H) Regulation of 4E-BP1 expression and binding to eIF4E by TGF- $\beta$   
 (I) Immunoblotting analysis of expression of micropeptide CIP2A-BP

## Does 4E-BP1 phosphorylation level influence LINC00665 translation?

mTOR/4E-BP1 signaling pathway regulates protein translation through hypophosphorylated 4E-BP1 but:

- Under high level of TGF- $\beta$ , LINC00665 translation is insensitive to regulation by mTOR signaling pathway

**Downregulation of CIP2A-BP in TNBC was a direct consequence of activation of TGF- $\beta$ /Smad signaling pathway.**

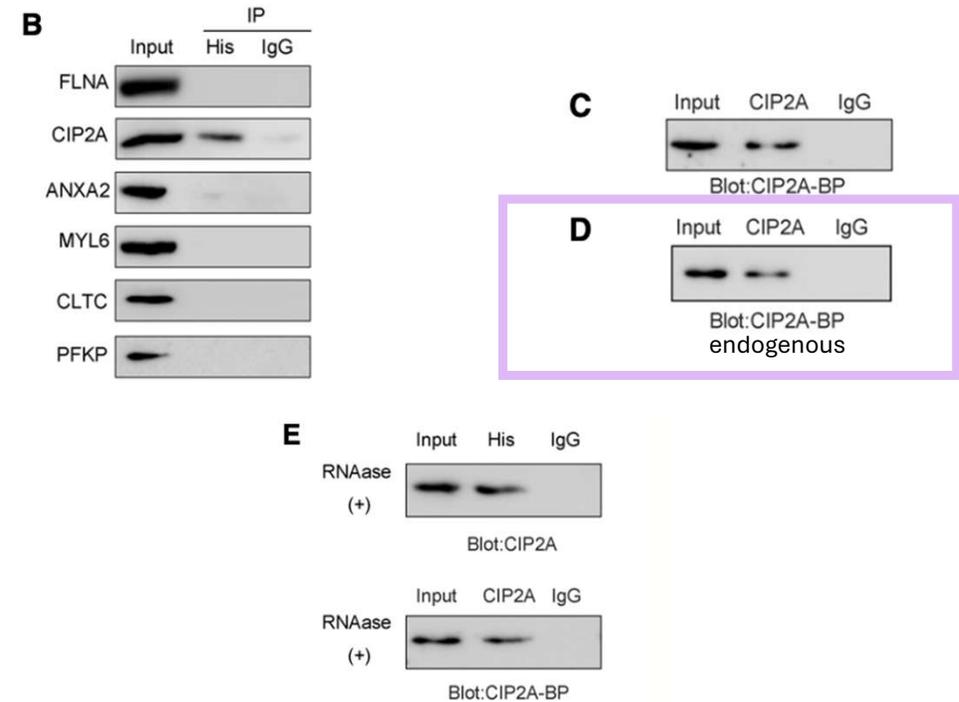


*Figure 39. Schematic representation of mTOR signaling mechanism in TNBC cells*

## Identification of CIP2A-BP interacting proteins:

- Co-IP
- Mass Spectrometry (MS)
- Western Blot analysis

**Only CIP2A binds to CIP2A-BP with an RNA independent interaction**



**Figure 40. Identification of CIP2A-BP interacting proteins**

(B) Co-IP and immunoblotting analysis using anti-His Ab and CIP2A-BP Ab on TNBC cell line transfected with LINC00665 ORF-His plasmid

(D) Immunoblotting of endogenous CIP2A-BP and endogenous CIP2A

(E) TNBC cells transfected with LINC00665 ORF-His plasmid were subjected to co-immunoprecipitation, and after RNase A treatment, the interaction with CIP2A-BP was detected.

# Cancerous inhibitor of PP2A cancer inhibitory factor - CIP2A

Oncogene that promotes tumor progression through inhibiting PP2A

## Sustains proliferative and survival pathways:

- ↑ AKT signaling
- ↑ MYC activity
- ↑ E2F1 activity

## Promotes metastasis through:

- ↑ MMP2 and MMP9 (ECM degradation)
- ↑ Snail (EMT and cell migration)

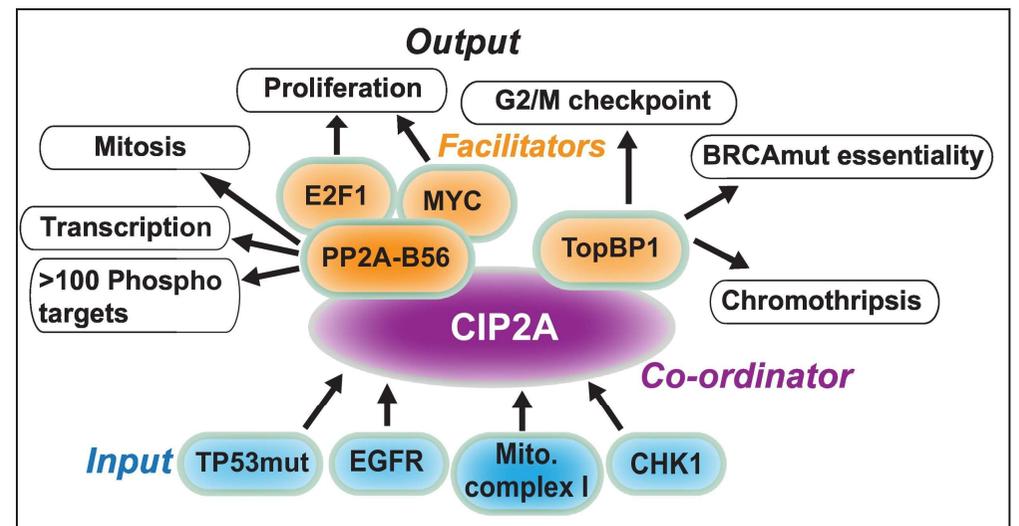


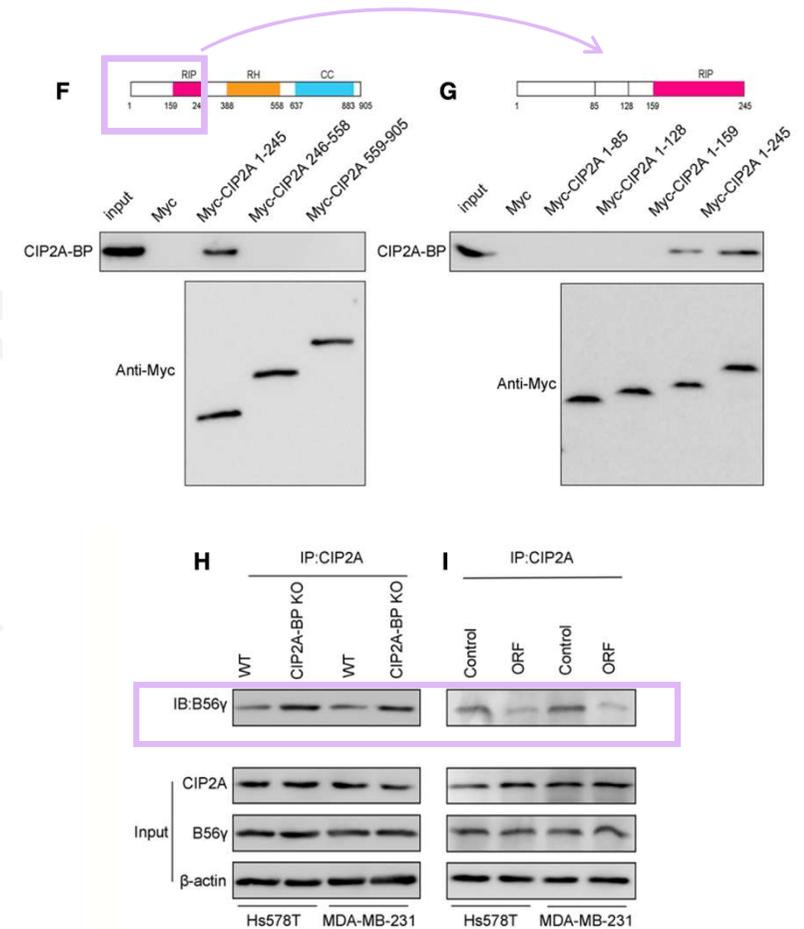
Figure 41. CIP2A's interactions and effects on the different pathways

# IDENTIFICATION OF THE BINDING SITE FOR CIP2A-BP:

- MYC-tagged CIP2A truncated protein fragments
  - Co-IP
  - WB analysis

**CIP2A-BP binding site at the N-terminus domain of CIP2A (amino acid 159–245)**

**PP2A's subunits B56 $\gamma$  and B56 $\alpha$  also bind to the N-terminus of CIP2A to maintain the stability of the dimer**



**Figure 42. Identification of CIP2A-BP interacting proteins**

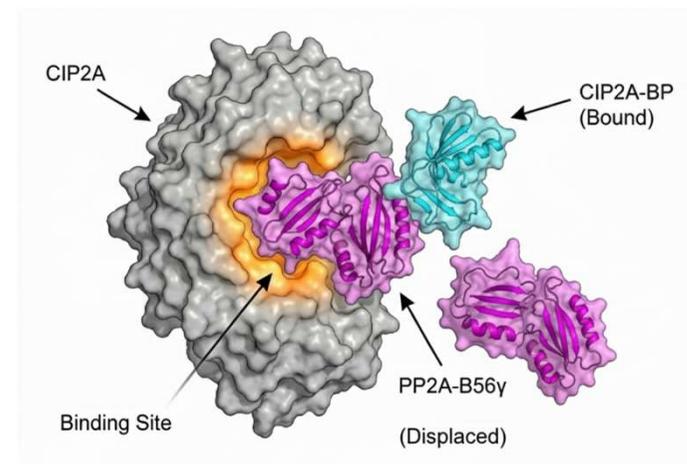
(F) & (G) co-immunoprecipitation-coupled WB analysis assay in full length CIP2A-BP and in a fragment

(H) & (I) co-immunoprecipitation assay to show the interaction between CIP2A and B56 $\gamma$  in TNBC

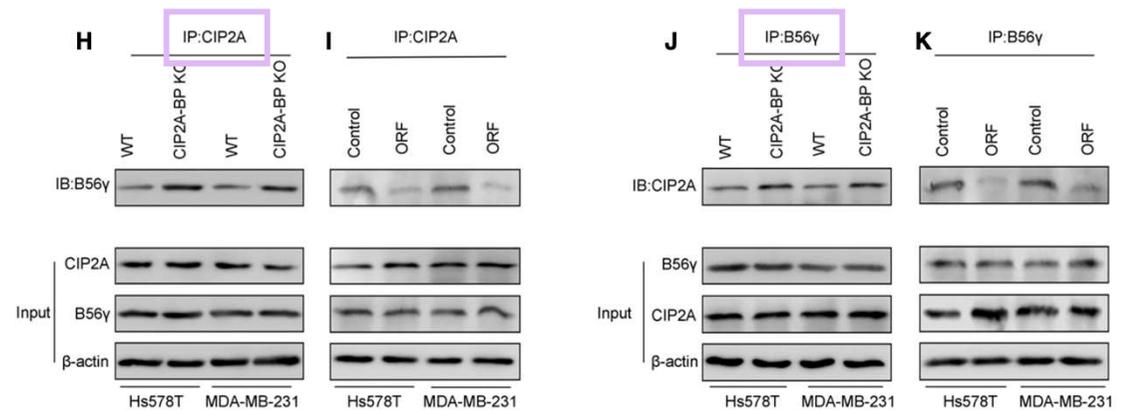
## Does this two subunits compete for the same CIP2A binding site?

The interaction between CIP2A and B56 $\gamma$  in TNBC cells was affected by CIP2A-BP expression

**CIP2A-BP competes for B56 $\gamma$ 's binding site on CIP2A, on the contrary it has no effect on B56 $\alpha$ 's binding to CIP2A**



**Figure 43. Modello strutturale della competizione biochimica tra CIP2A-BP e PP2A-B56 $\gamma$  per il legame con CIP2A**



(H) & (I) co-immunoprecipitation assay to show the interaction between CIP2A and B56 $\gamma$  in TNBC  
(J) & (K) co-immunoprecipitation assay to show the interaction between CIP2A and B56 $\gamma$  in TNBC

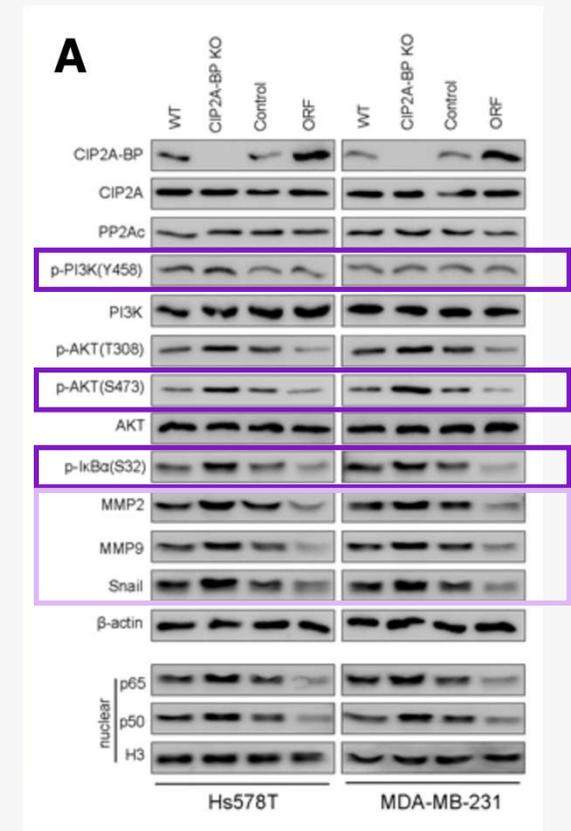
## What's the role of CIP2A-BP in the PI3K/AKT/NF- $\kappa$ B pathway?

- CIP2A-BP OE cell lines  $\rightarrow$  reduced phosphorylation in PI3K/AKT/NF- $\kappa$ B pathway and further affected the expression of MMP2, MMP9, and Snail\*
- CIP2A-BP KD cell lines  $\rightarrow$  increased AKT Thr308, AKT Ser473 and I $\kappa$ B $\alpha$  Ser32 phosphorylation  $\rightarrow$  **PI3K/AKT/NF- $\kappa$ B pathway activated**



- **CIP2A-BP overexpression  $\rightarrow$  phosphorylation downregulated**
- CIP2A-BP KD cell lines  $\rightarrow$  not effected

\* that transcription of MMP2, MMP9, and Snail was increased, but E-cadherin was decreased

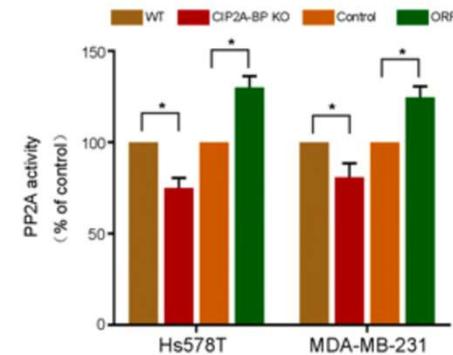
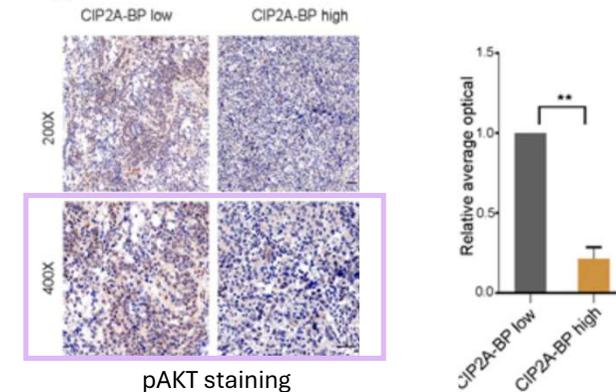


**Figure 44. investigating the role of CIP2A-BP in the PI3K/AKT/NF- $\kappa$ B pathway**

(A) Immunoblotting analysis in CIP2A-BP detecting the expression levels of the indicated proteins in CIP2A-BP KO, LINC00665 ORF overexpressed (OE) and respective controls of TNBC cells

# Determination of PP2A activity:

- CIP2A-BP knockdown significantly decreased PP2A activity, while CIP2A-BP overexpression increased it
- Immunohistochemistry analysis on clinical samples: high CIP2A-BP expression was significantly associated with downregulation of p-AKT.

**B****C**

(B) evaluation of PP2A activity in CIP2A-BP KO

(C) Immunohistochemistry (IHC) staining of p-AKT from TNBC primary tumor

CIP2A-BP can effectively inhibit activation of PI3K/AKT/NFkB pathway, and expression of downstream targets, including MMP2, MMP9, and Snail.

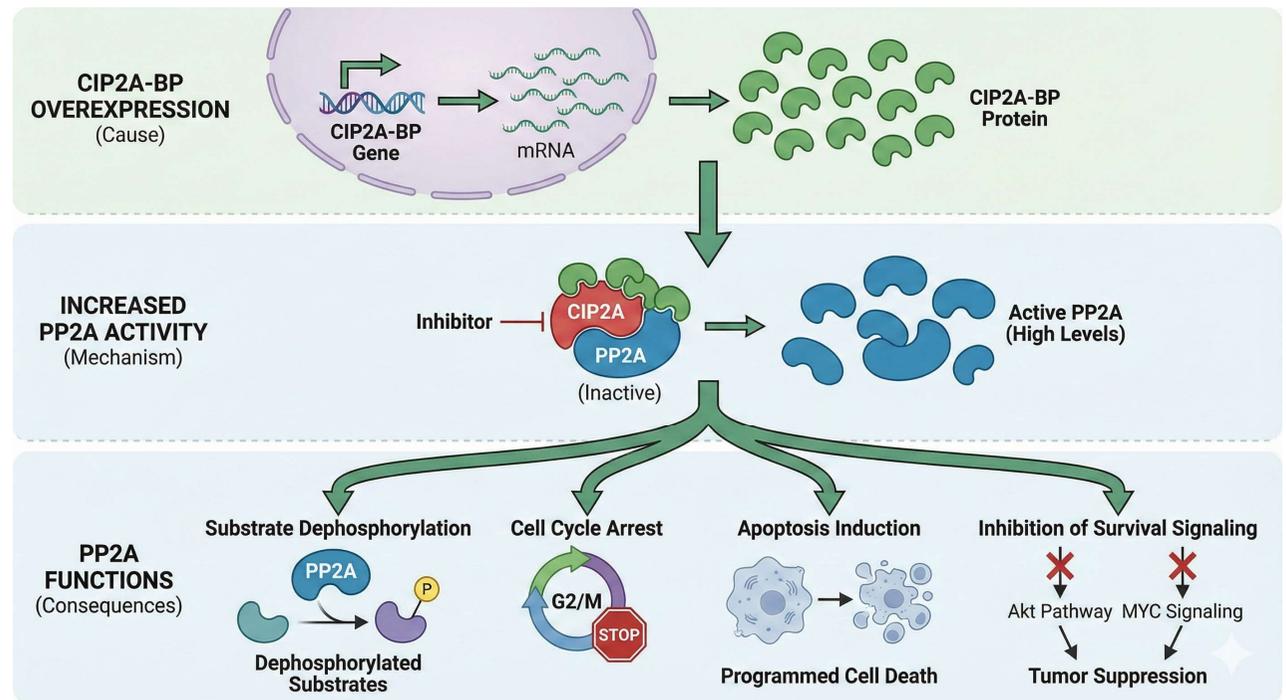
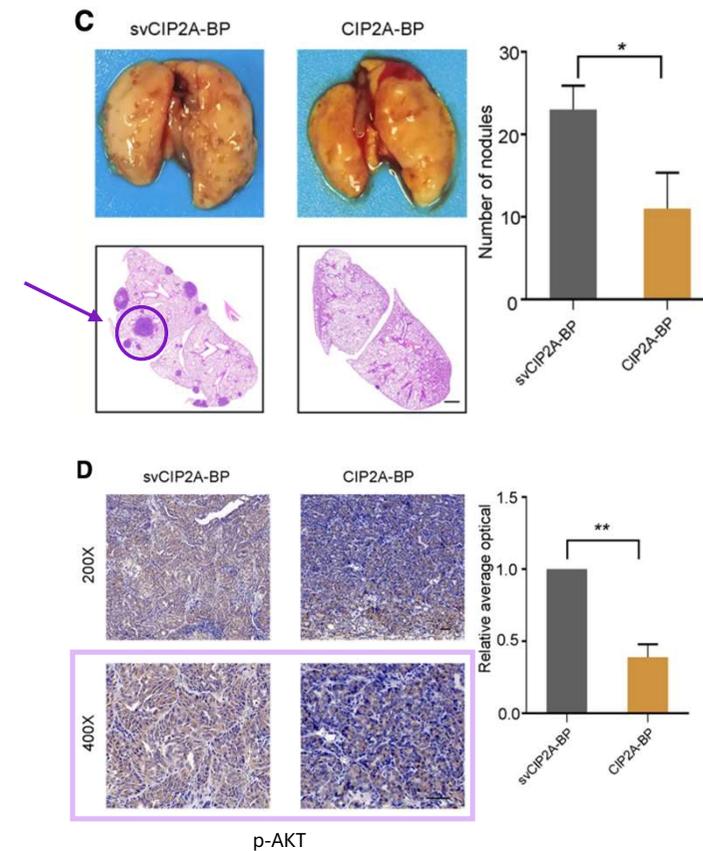


Figure 45. Molecular Mechanism of Tumor Suppression via CIP2A-BP Overexpression

## Investigate the effect of exogenous CIP2A-BP treatment on lung metastasis

- Mammary pad injection of CIP2A-BP significantly reduced the number of lung metastasis loci
- Exogenous CIP2A-BP treatment significantly reduced p-AKT level of primary tumor.

**CIP2A-BP inhibited AKT phosphorylation in primary tumor and lung metastasis in MMTV-PyMT mouse model.**



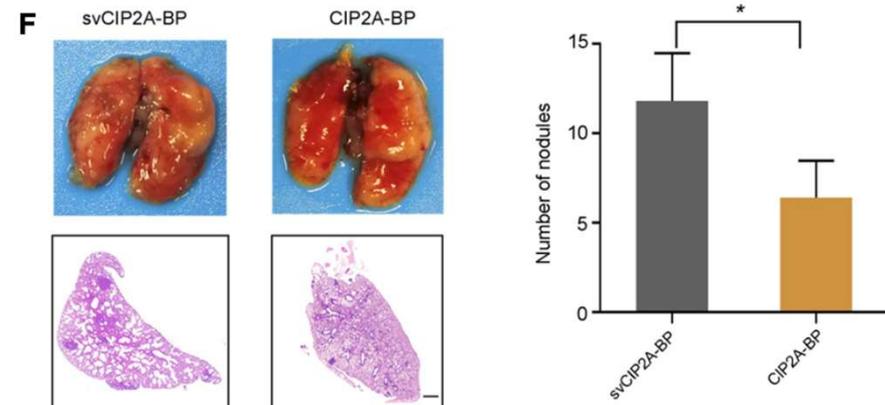
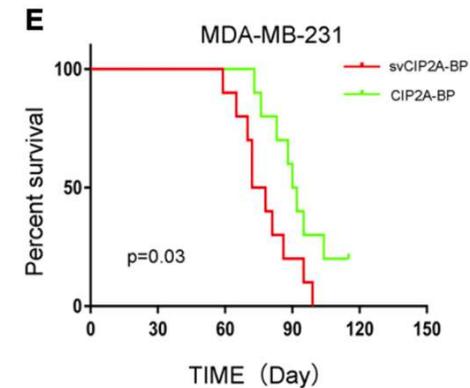
**Figure 46. Investigating the effect of CIP2A-BP on metastasis and invasion in TNBC**  
 (C) Macroscopic and histological analysis of lung metastatic nodules visualized 8 weeks post-transplantation. Right panel is the quantification of pulmonary metastases.  
 (D) IHC images of p-AKT of mammary tumors. Right panel is the quantification of IHC staining p-AKT.

## Has the micropeptide CIP2A-BP an antitumor activity?

- Significantly improved survival compared to control mice, and tissue HE staining\* indicated that CIP2A-BP also significantly reduced the number of lung metastases

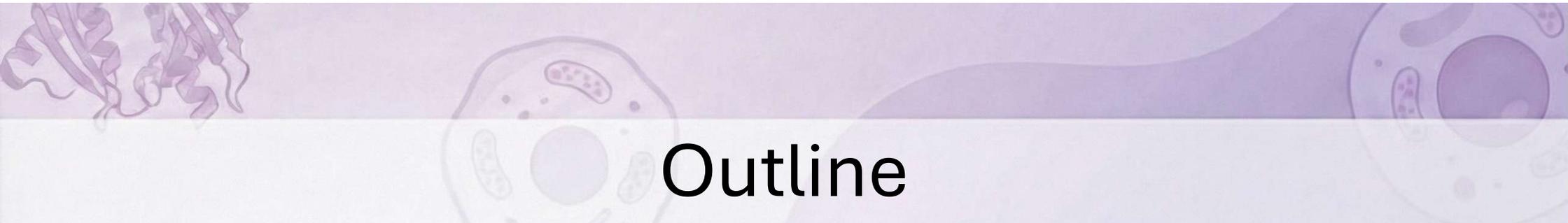
**CIP2A-BP can effectively suppress breast cancer metastasis and invasion, therefore improve overall survival.**

\* Tissue HE staining stands for Hematoxylin and Eosin staining



(E) Kaplan–Meier survival curves of nude mice transplanted with MDA-MB-231 cells and injected with CIP2A-BP or svCIP2A-BP.

(F) Macroscopic and histological analysis of the lungs of nude mice injected with MDA-MB-231 cells and CIP2A-BP or svCIP2A-BP via tail vein; lung metastatic nodules were visualized 8 weeks post transplantation. Right panel is the quantification of pulmonary metastases.



# Outline

1. Theoretical framework: Unveiling the Hidden Microproteome;

2. The candidate: LINC00665 and its canonical oncogenic role;

3. Discovery of CIP2A-BP: From translational silencing to molecular decoy;

4. Translational impact: *In Vivo* validation and peptide therapy

5. Discussion and Conclusion

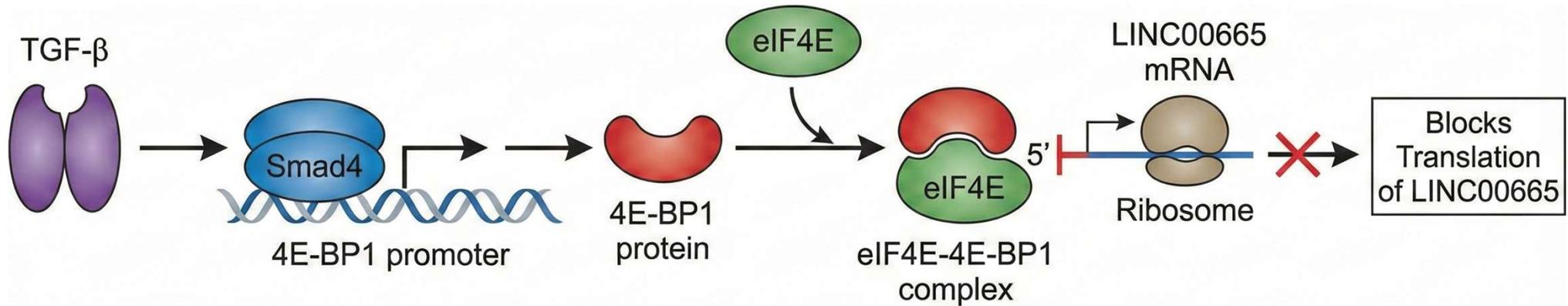


Figure: TGF-β/Smad4 upregulates 4E-BP1, which binds eIF4E to block LINC00665 translation

## Discussion: A new layer of regulation by TGF-β

•**Canonical View:** TGF-β is known to induce EMT and metastasis via transcriptional regulation (Smad complex).

•**Novel Finding:** TGF-β regulates metastasis at the **translational level**.

•**The Mechanism:**

- TGF-β activates Smad4, which acts as a transcription factor for **4E-BP1**.
- Accumulated 4E-BP1 binds eIF4E, specifically preventing the ribosome from translating the CIP2A-BP micropeptide.

# Discussion: The decoy-effect

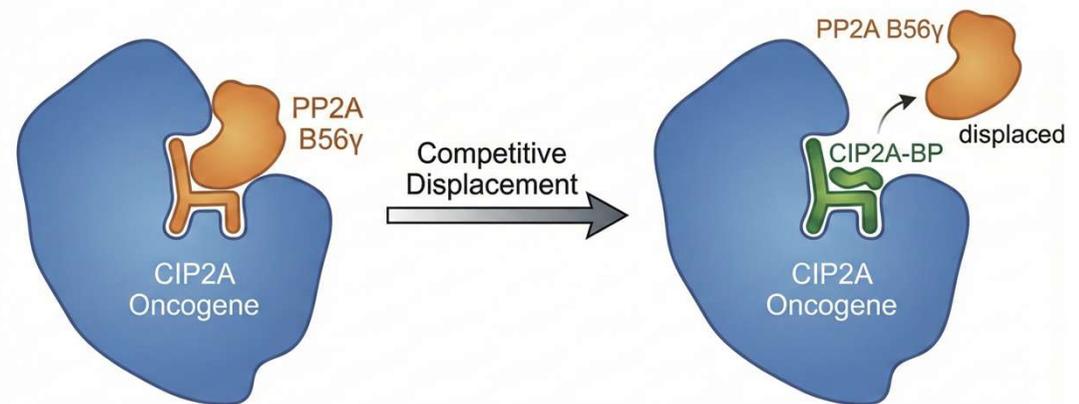
## •The Players:

- **CIP2A (Oncogene):** Inhibits the tumor suppressor PP2A.
- **PP2A (Tumor Suppressor):** A phosphatase that keeps cell growth in check.

## •The Interaction:

- CIP2A-BP binds to the N-terminus of CIP2A (aa 159–245)
- It acts as a **molecular decoy**, competing with the PP2A regulatory subunit (B56γ)

•**The Result:** CIP2A is sequestered → PP2A is released and reactivated.



*Figure: CIP2A-BP acts as a decoy, displacing B56γ from CIP2A to release and reactivate PP2A*

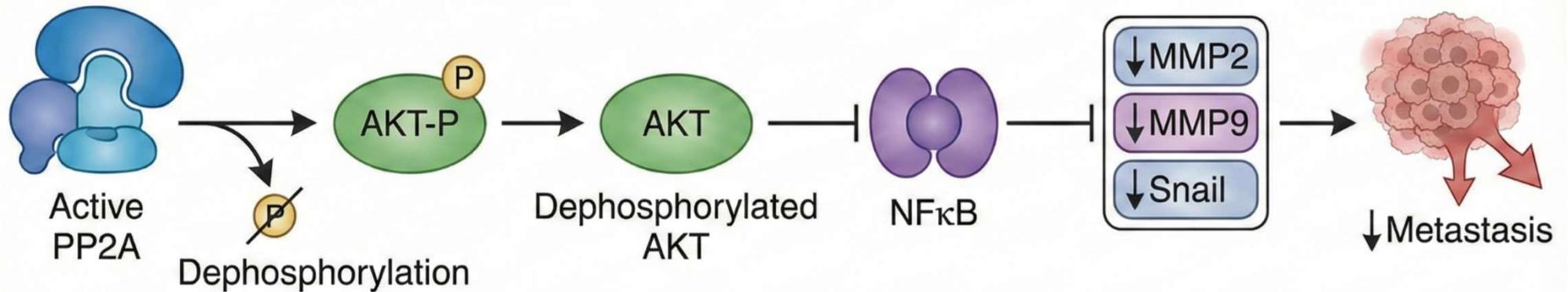


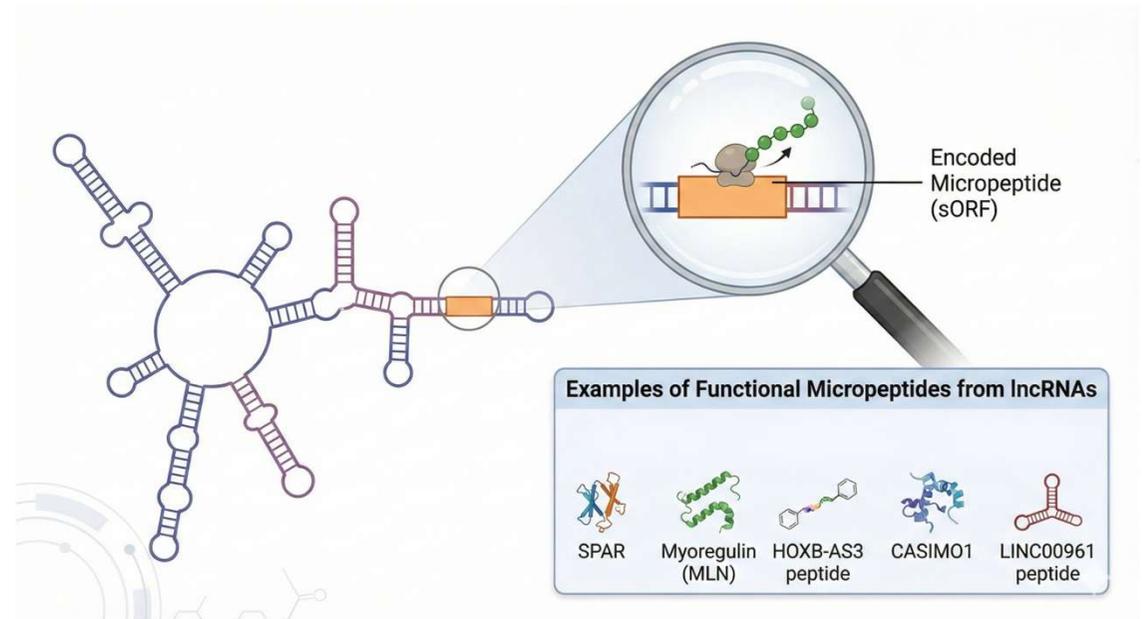
Figure: Reactivated PP2A dephosphorylates AKT, inhibiting NF-κB and metastasis drivers (MMP2/9, Snail)

## Discussion: Downstream signaling & phenotype

- **Restoring the Brake:** Reactivated PP2A dephosphorylates AKT (at Thr308/Ser473).
- **Stopping the Signal:** Inactive AKT leads to the inhibition of the NFκB pathway.
- **Phenotypic Outcome:**
  - Downregulation of metastasis drivers: **MMP-2, MMP-9, and Snail.**
  - Result: Suppression of cell migration, invasion, and lung metastasis.

# Discussion: The hidden proteome

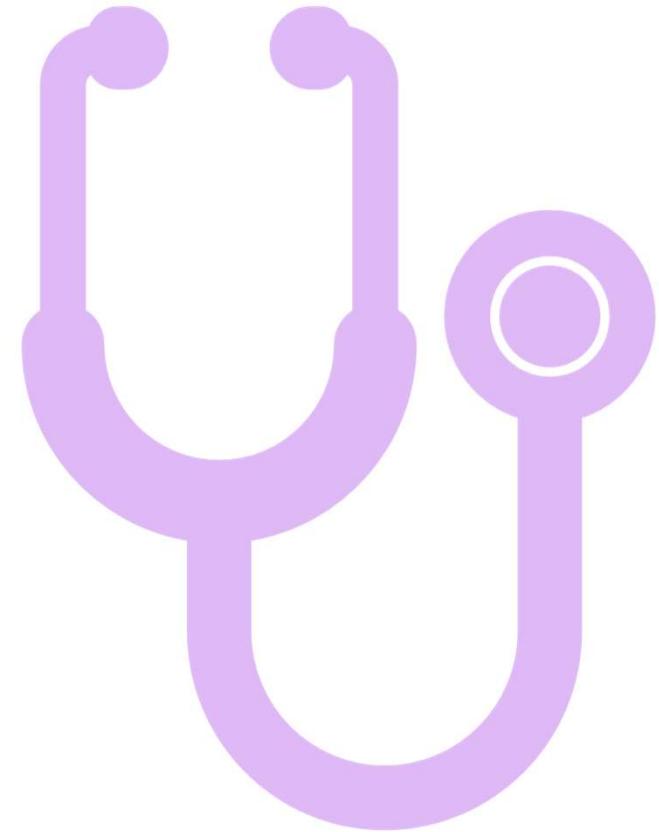
- **A Growing Class:** LINC00665 joins a growing list of lncRNAs that encode functional peptides (e.g., SPAR, HOXB-AS3).
- **Paradigm Shift:** Challenges the definition of "non-coding" RNA.
- **Implication:** Many "oncogenic" or "tumor-suppressive" lncRNAs may actually function through overlooked micropeptides.



*Figure: Different functional micropeptides encoded by lncRNAs*

## Future perspectives

- Add an **anti-tumor peptide** to the existing literature
- CIP2A-BP expression could be used as a **prognosis marker among TNBC**
- CIP2A-BP represents a **potential therapeutic candidate** to treat TNBC metastasis through augmenting PP2A activity



# Conclusion

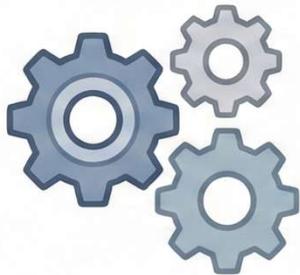
**Mechanism:** TGF- $\beta$  drives TNBC metastasis by translationally suppressing the **CIP2A-BP** micropeptide via 4E-BP1.

• **Function:** CIP2A-BP acts as a tumor suppressor by inhibiting the CIP2A oncogene and reactivating **PP2A**.

**Clinical Value:**

- Low peptide levels predict **poor survival** and metastasis.
- Direct peptide administration inhibits metastasis *in vivo*, offering a **novel therapeutic strategy**.

## Mechanism



## Prognosis



## Therapy



**Thanks for your attention!**



## Supplementary material

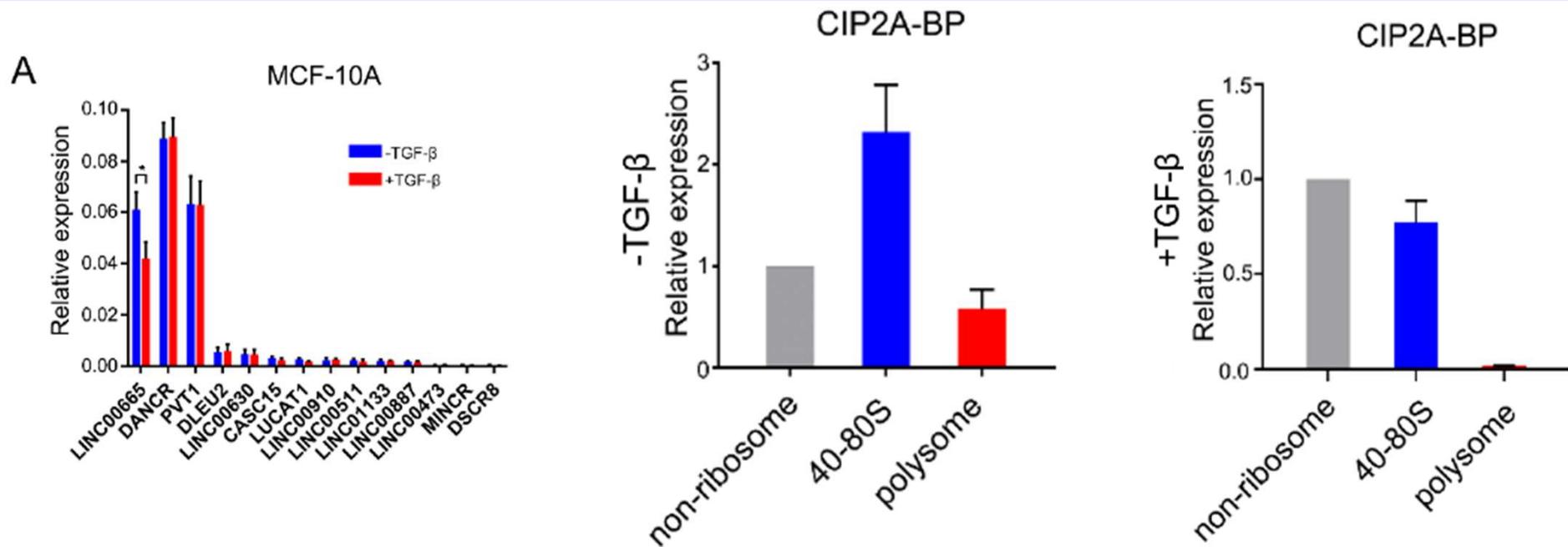


Figure S1: Polysome profiling identifies LINC00665 translational repression by TGF- $\beta$  despite stable RNA levels [Guo, B. (2020)]

### Selection rationale: Why LINC00665?

- **Screening approach:** Integrated analysis of Ribo-seq and RNA-seq in TGF- $\beta$  treated cells;
- **Candidate identification:** Out of 14 candidates, only LINC00665 showed translational repression with stable transcript levels;
- **Validation:** Polysome profiling confirms that TGF- $\beta$  shifts LINC00665 from active polysomes to non-translating fractions.

# Technical control: Antibody specificity

- **Custom tool: polyclonal antibody generated against CIP2A-BP sequence;**
- **Validation assay:** LINC00665 knockdown (shRNA) performed in MCF-10A and MDA-MB-231 cell lines;
- **Results:** The specific protein band disappears in shRNA-treated cells, confirming the detection of endogenous CIP2A-BP.

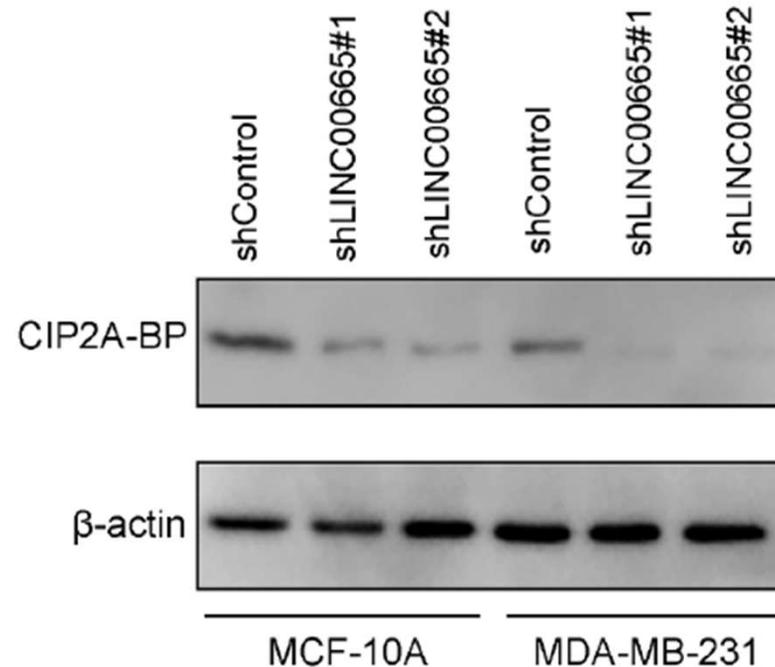


Figure S2: Western blot confirms antibody specificity: the CIP2A-BP band vanishes upon LINC00665 knockdown [Guo, B. (2020)]

# Validating the peptide size

- **Confirmation:** Western Blot with anti-GFP and anti-His antibodies;
- **Evidence:** The mutant construct produces **no protein band**;
- **Conclusion:** The signal is not an artifact; it relies on the specific ORF sequence.

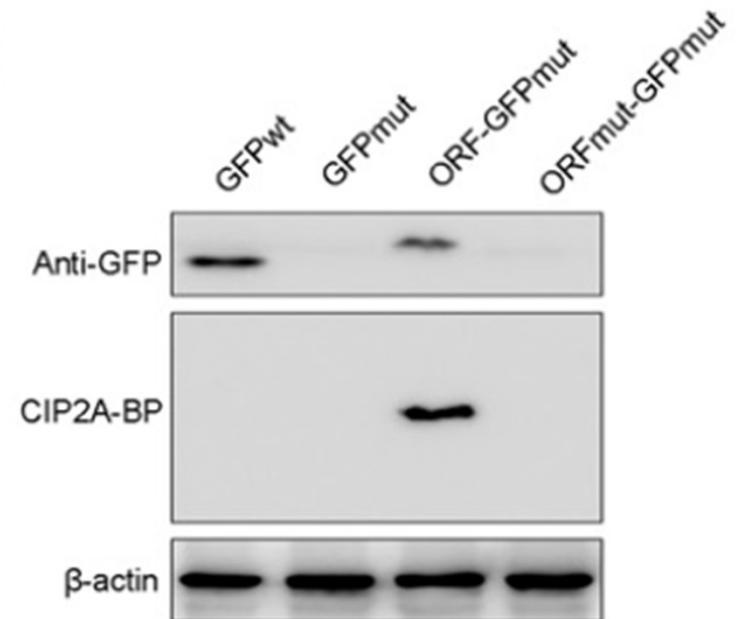
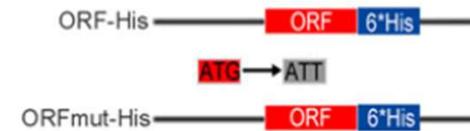


Figure S3: Start codon validation. (A) Mutation strategy (ATG → ATT); (B) Mutation abolishes peptide translation [Guo, B. (2020)]

# Polysome Profiling

- **Question:** Is the *endogenous* RNA actually translated?
- **Method:** Polysome Profiling (separating RNA by ribosome density);
- **Result:** *LINC00665* RNA is enriched in the **Polysome fraction** (actively translating);
- **Control:** Puromycin treatment (disassembles ribosomes) shifts the RNA to the non-ribosome fraction.

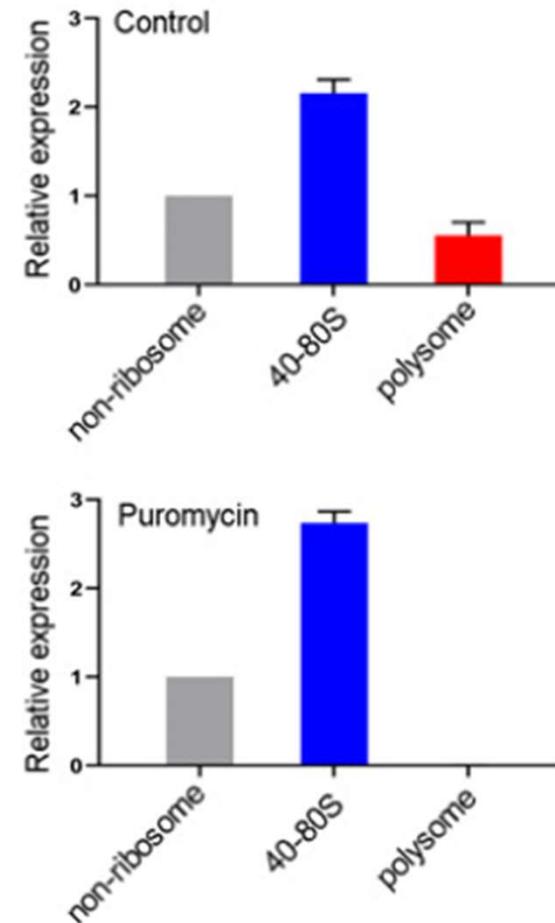


Figure S4: Polysome profiling. *CIP2A-BP* transcripts detected in the polysome fraction are eliminated by puromycin treatment [Guo, B. (2020)]

## In Vitro Results: Wound Healing

- **Assay:** Wound Healing (Scratch Assay).
- **Result:**
  - CIP2A-BP slows down wound closure (Tumor Suppressor).
  - Loss of CIP2A-BP accelerates wound closure.

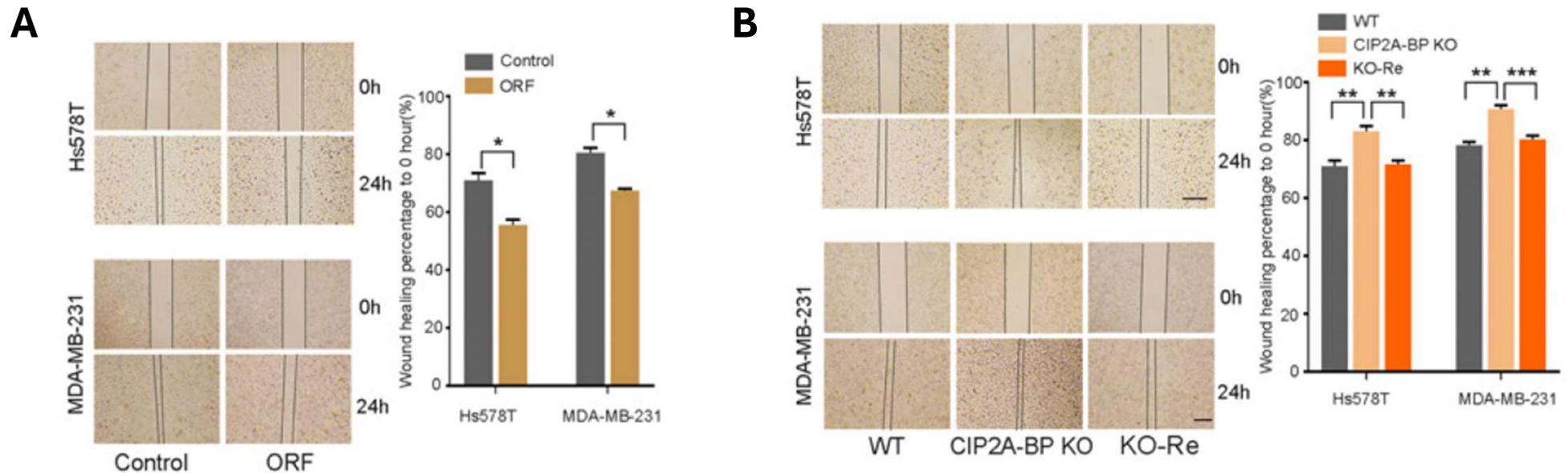


Figure S5: (A) Overexpression inhibits, and (B) knockout promotes wound healing, a phenotype reversed by rescue [Guo, B. (2020)]

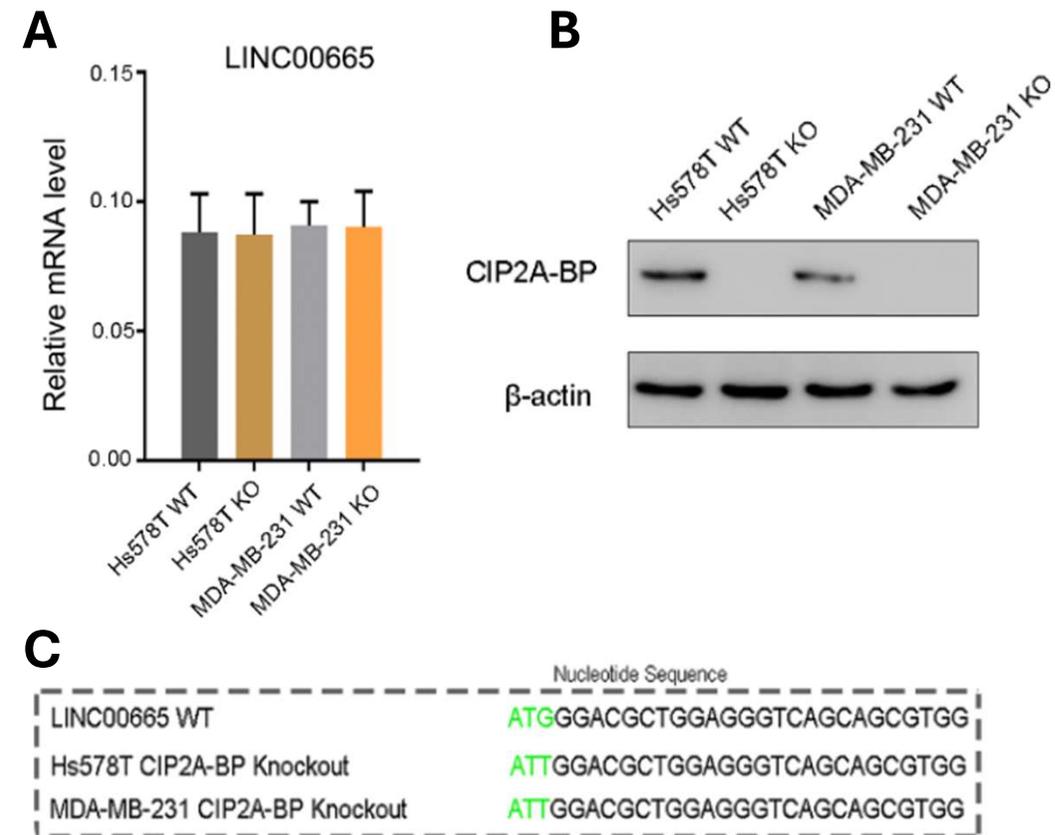
# Dissociating lncRNA Transcript from Peptide Function

• **Experimental Strategy:** CRISPR/Cas9-mediated mutation of the translation initiation site (**ATG** → **ATT**).

• **Molecular Validation:**

- **Transcription Intact:** The *LINC00665* RNA transcript is stable and expressed at Wild-Type levels;
- **Translation Abolished:** The CIP2A-BP micropeptide is undetectable;

• **Conclusion:** The loss of tumor suppression in KO cells is essentially due to the **absence of the peptide**, ruling out RNA-dependent functions (e.g., "sponge" effects).



**Figure S6: Specific CIP2A-BP peptide knockout validation;**  
**(A) LINC00665 mRNA levels remain unchanged;**  
**(B) Loss of CIP2A-BP peptide expression;** **(C) Sequencing confirms the ATG>ATT start codon mutation [Guo, B. (2020)]**

## Further confirm...

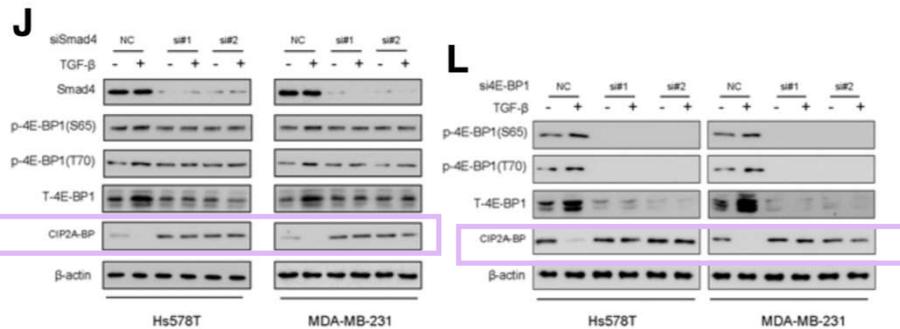
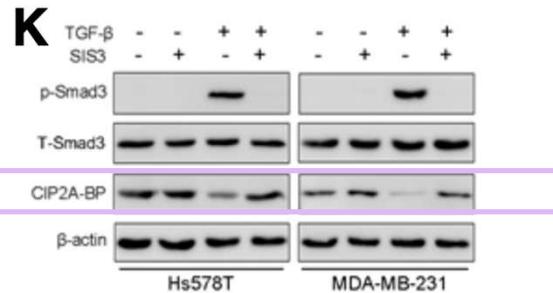
Downregulation of CIP2A-BP by TGF- $\beta$  treatment could be reversed by:

- siRNA knockdown of Smad4
- siRNA knockdown of 4E-BP1
- inhibition of Smad3 phosphorylation by Smad3 phosphorylation inhibitor (SIS3)



**↑ CIP2A-BP**

**Downregulation of CIP2A-BP in TNBC was a direct consequence of activation of TGF- $\beta$ /Smad signaling pathway.**



(K) TNBC cell lines transfected with SIS3  
 (J) TNBC cell lines transfected with Smad4 siRNA  
 (L) TNBC cell lines transfected with 4E-BP1 siRNA  
 [Guo, B. (2020)]

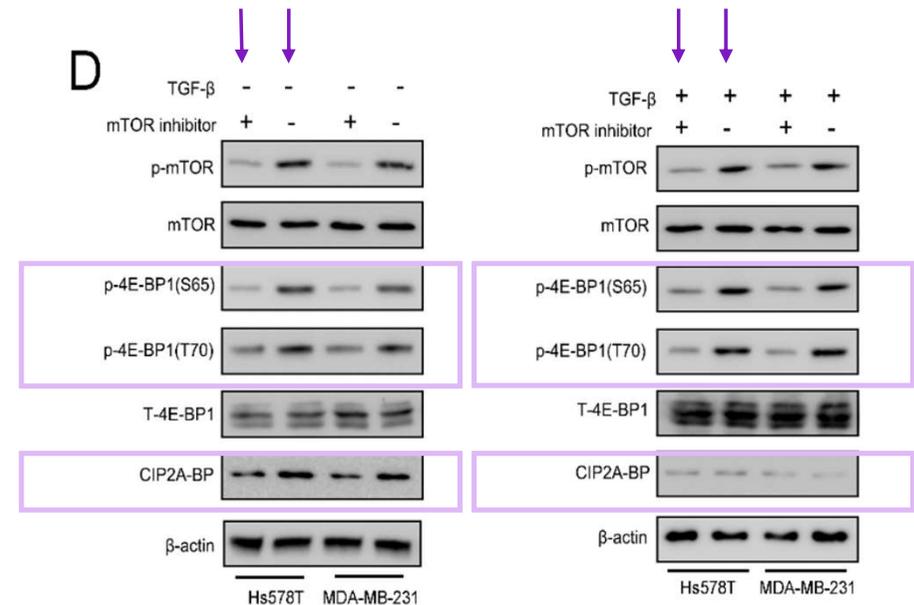
## CIP2A-BP Regulation by mTOR and TGF- $\beta$ Signaling

When I inhibit mTOR, I observe a downregulation of CIP2A-BP, confirming its involvement in **mTOR-dependent translation**. When I treat cells with TGF- $\beta$ , I also observe a downregulation of CIP2A-BP even in the absence of an mTOR inhibitor.

- mTOR active:  $\uparrow$  CIP2A-BP
- **mTOR inhibitor:  $\downarrow$  CIP2A-BP**
- TGF- $\beta$  treatment:  $\downarrow$  CIP2A-BP
- mTOR inhibitor + TGF- $\beta$  treatment:  $\downarrow$  CIP2A-BP
- **mTOR active + TGF- $\beta$  treatment:  $\downarrow$  CIP2A-BP**

**Under high level of TGF- $\beta$ , LINC00665 translation is insensitive to regulation by mTOR signaling pathway.**

Downregulation of CIP2A-BP in TNBC is a direct consequence of activation of TGF- $\beta$ /Smad signaling pathway.



**Figure S8. 4E-BP1 affect the translation of multiple mRNAs**

(D) TNBC cells were pretreated with specific antagonist against mTOR for 1h and then cultured with or without TGF- $\beta$ . The indicated proteins were determined by immunoblotting analysis. [Guo, B. (2020)]

# LINC00665 and the efficacy of Anticancer Drugs: Cisplatin

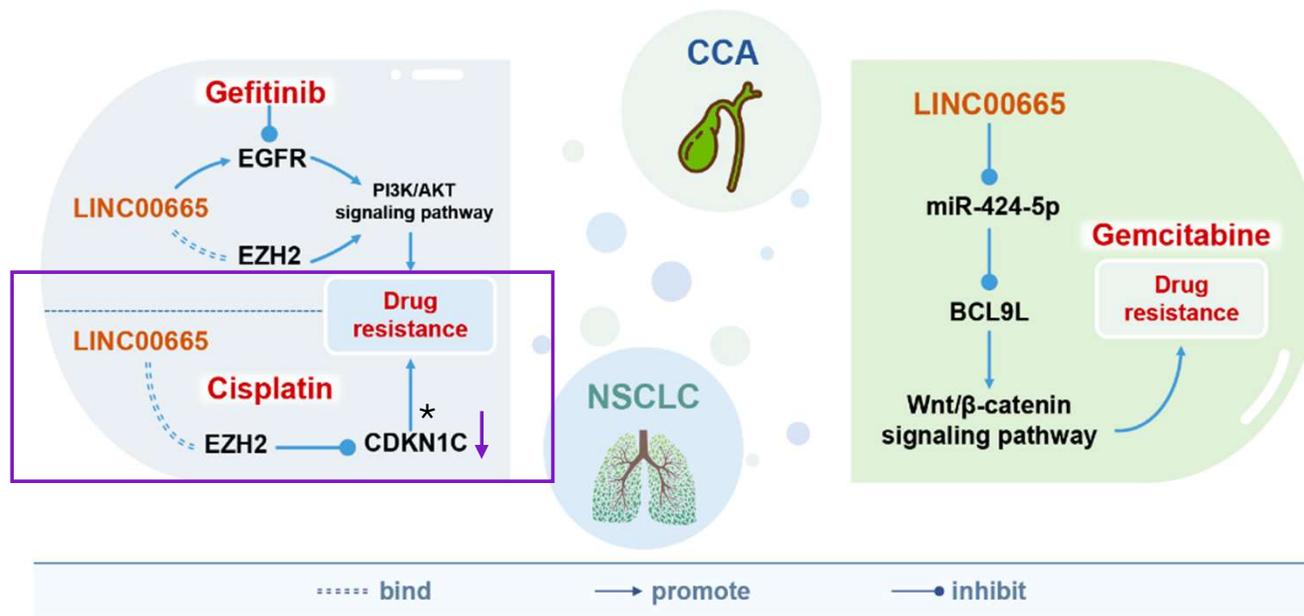


Fig. S9. Role of LINC00665 in resistance to anticancer drugs

\* CDKN1C tumor suppressor also known as p57

**Platinum-based chemotherapeutic drug** that kills cancer cells by inducing **DNA crosslinks**.

These lesions block DNA replication and transcription, causing **replication stress**, **double-strand breaks**, and ultimately **apoptosis** in rapidly dividing cancer cells.

In TNBC (especially BRCA-mutated subtypes) is more responsive because of defective DNA repair.