

The 1st International Electronic Conference on Cancers Exploiting Cancer Vulnerability by Targeting the DNA Damage Response 01–14 FEBRUARY 2021 | ONLINE



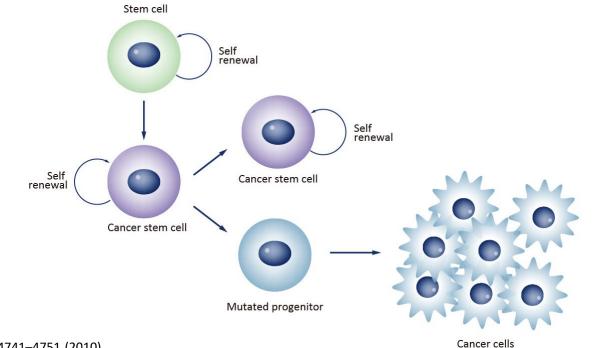
## Anti-inflammatory combinatorial therapy to enhance killing efficacy with patientderived preclinical models

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#### **Cancer stem cells (CSCs)**



- **Drug-resistant** cancer phenotypes is a challenge for anti-cancer therapy.
- CSCs are relatively quiescent cells capable of self-renewal.
- CSCs are identified as one of the ways by which chemoresistance develops.

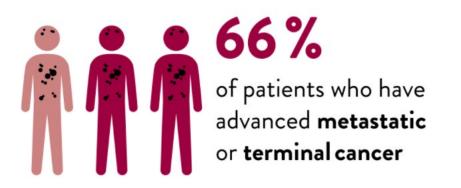


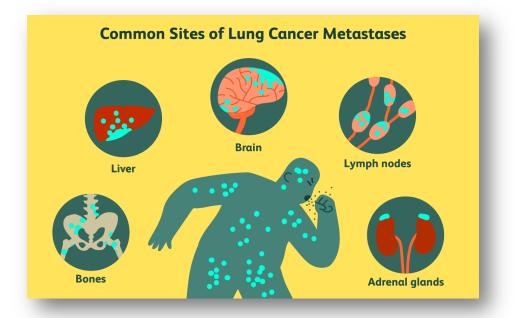
Singh, A. & Settleman, J. EMT, Oncogene 29, 4741–4751 (2010). Batlle, E. & Clevers, H. Nat. Med. 23, 1124–1134 (2017). Danila, D. C., Pantel, K., Fleisher, M. & Scher, H. I. Cancer J. 17, 438–450 (2011).

#### **Cancer metastasis**



- Cancer **metastasis** is the major cause of cancer morbidity and mortality
- accounts for about 90% of cancer deaths
- a process in which cancer cells disseminate from the primary tumor, settle and grow at a site other than the primary tumor site.

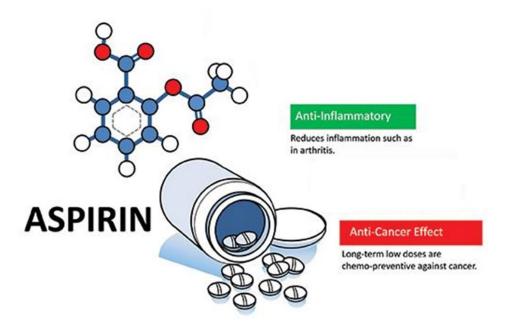




#### **COX-2** and cancer



- An inhibition of redox-responsive cyclooxygenase (COX) enzymes is often attributed to the mechanism of **aspirin**.
- COX-2 regulates tumour growth, invasion and metastasis in breast cancer.
- the pro-neoplastic effects of COX-2 action





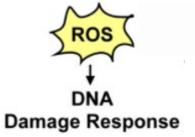
Jana D, Sarkar D K, Ganguly S, et al. [J]. Indian journal of surgical oncology, 2014, 5(1): 59-65. Botting, R. M. J. Physiol. Pharmacol. 57, 113–124 (2006). Hashemi Goradel N, Najafi M, Salehi E, et al. [J]. Journal of cellular physiology, 2019, 234(5): 5683-5699.

#### Reactive oxygen species (ROS) are a group of short-lived, highly reactive, oxygencontaining molecules

**ROS and DNA damage** 

- induce **DNA damage** and affect the DNA damage response (**DDR**).
- **COX-2** expression could be triggered by **ROS**
- ROS favors the expression of an inflammatory phenotype that leads to the **induction** of COX-2.

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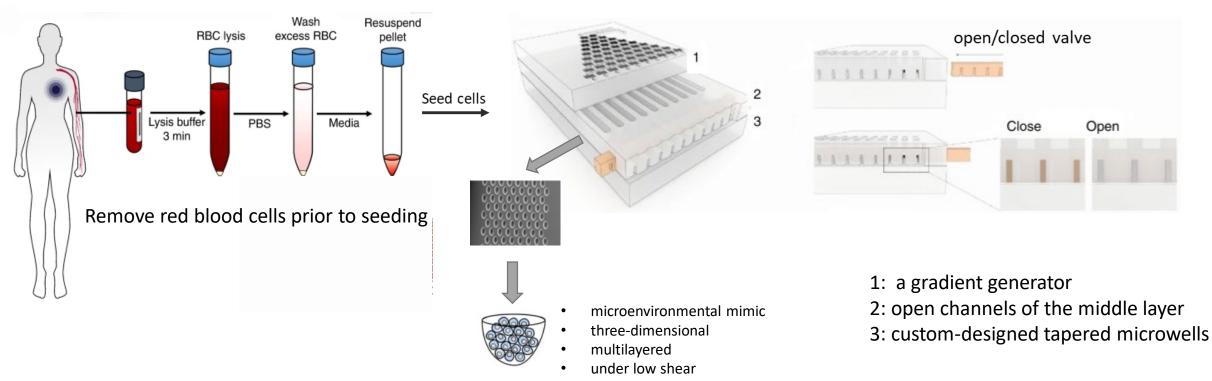




### **Circulating tumor cells (CTCs) cluster assay**



- CTCs are a rare subset of cells found in the blood of patients with solid tumors.
- We demonstrate an efficient approach to evaluate drug response using patient-derived CTC cultures obtained from liquid biopsy.

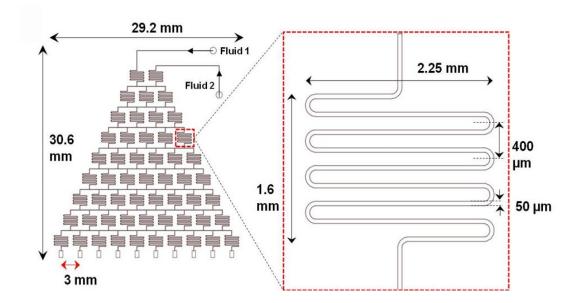


Yang, C., Xia, B. R., Jin, W. L., & Lou, G. (2019). Cancer Cell International, 19(1), 341. Khoo, B. L. et al. Sci. Adv. 2, e1600274 (2016). Khoo B L, Grenci G, Lim J S Y, et al. 2019, 120(4): 407.

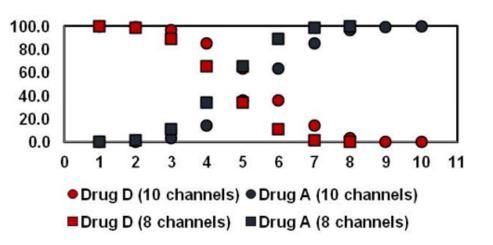
#### **Combinatorial therapy**



DA treatment: In this proof of concept study, a range of therapeutic drug concentrations for 0–500 mg/ml aspirin (A) and 0–1  $\mu$ M doxorubicin (D) were screened with a microfluidic culture and drug-screening assay validated for primary cell cultures.



Schematics of the gradient generator



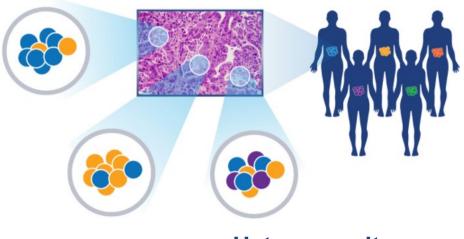
Distribution of two drugs in combination with the effect of gradient generator

#### Significance of liquid biopsy and CTCs



- Cancer is a dynamic disease. During the course of disease, cancers generally become more heterogeneous.
- Heterogeneous response of therapy highlights the importance of patient-derived preclinical models.
- lack of a robust anticancer **drug screening** system to monitor patients during treatment.
- Our CTC assay obtained from liquid biopsy is **efficient**, **non-invasive**, **inexpensive** and **drug screening** for personalized treatment.

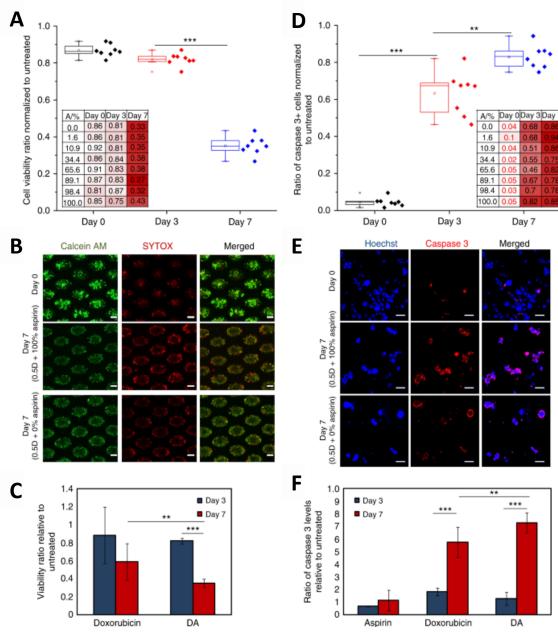
Methods	Limitation
Imaging techniques	false-negative findings
Tumor biopsies	invasive, cancer gene reflecting incompletely
Multiwell plates	multiple passages, phenotypes changes
Other CTC expansions	pre-enrichment required, low efficiency



Heterogeneity

#### DA therapy improved killing efficacy and apoptosis

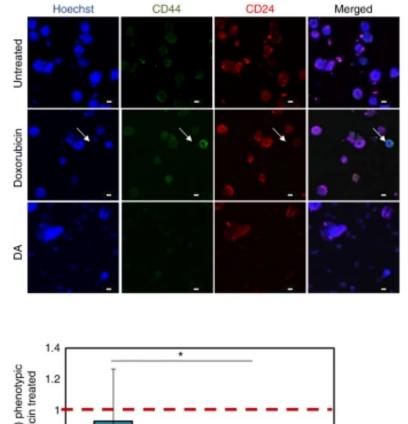


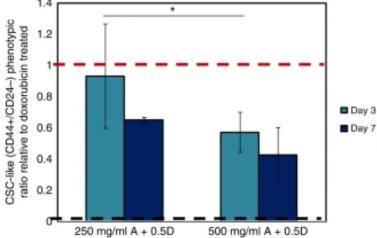


- Viability ratio breast cancer cell line MDA-MB-231 cultures decreases after prolonged exposure to combinatorial DA treatment.
- Killing efficacy of DA treatment surpassed that of treatment with doxorubicin alone after 7 days of exposure, as determined by the live and apoptotic cell proportions.

#### DA therapy reduced cancer stem cells







- Increase in CSCs post treatment have a high potential to form secondary metastases, leading to cancer relapse.
- CD44<sup>+</sup>/CD24<sup>-</sup> phenotype corresponded to the proportion of CSC-like cells
- DA treatment with **500 mg/ml** aspirin resulted in a significant **reduction of CSC proportion.**

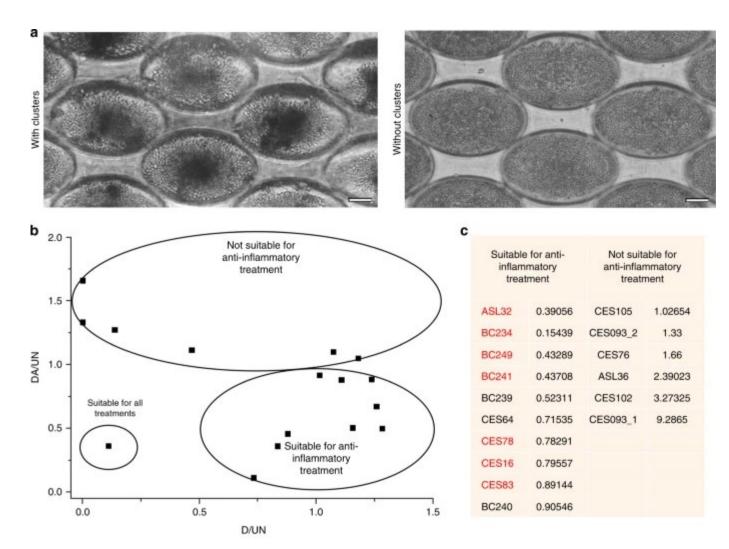
#### DA therapy in clinical cohorts



 Representative images of microwell array with clusters (left) and without clusters (right). Scale bar is 50 µm.

• Patient samples that responded in terms of killing efficacy are marked in red.

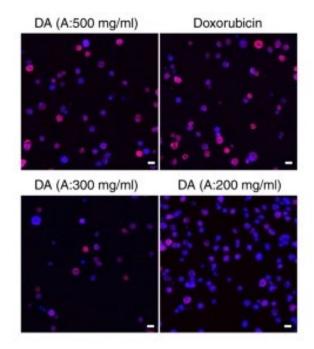
 Heterogeneity of patient profiles and the reliable patient-derived models are importance for screening similar anti-inflammatory and anticancer strategies



# DA treatment acts via a COX-independent pathway mediated by anti-inflammatory mechanisms

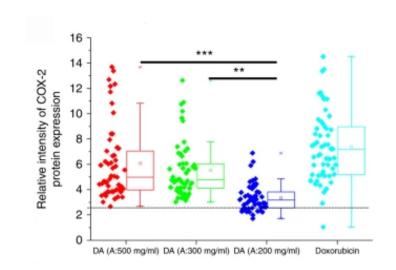


- COX-2 protein expression was **reduced** under combinatorial DA treatment.
- COX-2 reduction is directly associated with **malignancy and resistance**.
- Reduction in COX-2 protein expression was significantly greater under low-dose aspirin (200 mg/ml).
- DA treatment is more **effective** in its anti-cancer effects.



Immunostaining for COX-2 protein. Scale bar is 10 μm.

DA: combinatorial treatment with 0.5 D and 500 mg/ml aspirin. Doxorubicin treatment: treatment with 0.5  $\mu$ M dosage of doxorubicin Khoo B L, Grenci G, Lim J S Y, et al. 2019, 120(4): 407.

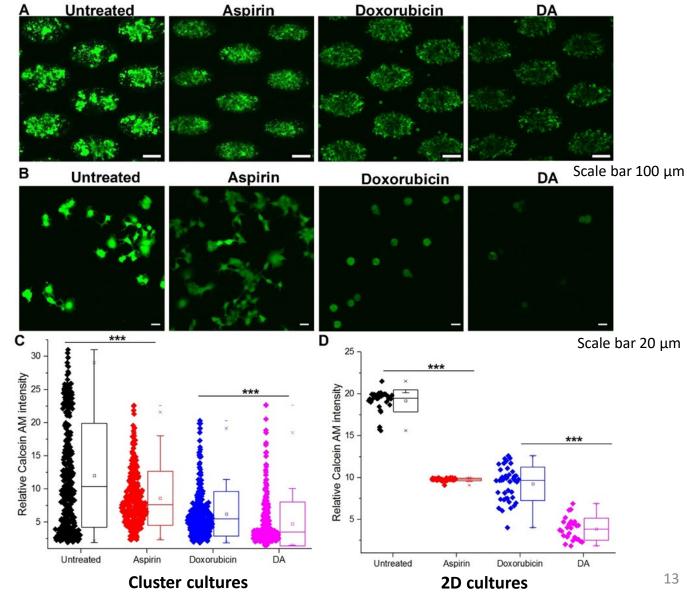


Relative intensity levels of COX-2 protein after 7 days of drug exposure.

#### DA treatment reduces intracellular oxidative activity



- Calcein AM is also an indicator of intracellular oxidative activity.
- The differential intensity of Calcein AM suggests a reduction in intracellular oxidative activity in samples under both single drug aspirin and combinatorial DA therapy.
- Intracellular oxidative activity is a factor in metabolism and a key regulating process for several core functions including cell proliferation and transcription.



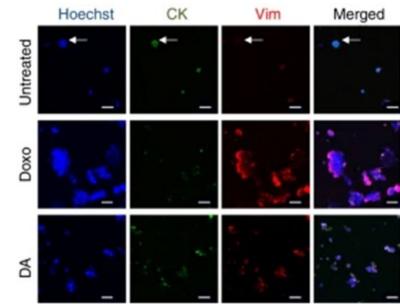
#### DA treatment revert cells to a less metastatic phenotype

- Increased ROS levels causes cancer development and metastasis during or after chemotherapy.
- Extracellular **ROS** help to facilitate the formation of multifoci tumors and act as a springboard for **metastatic tumor cells**.
- Cancer cells usually present as a hybrid phenotype and express intermediate levels of **epithelial (E)** and **mesenchymal (M)** characteristics.
- With DA treatment, the proportion of cells with **epithelial-like phenotypes** were **increased** within 72 h and more apparent after 7 days.

. 1	Day 3			Day 7	
	Epithelial-like	Intermediate		Epithelial-like	Intermediate
ି≣	0.80	0.99	ି <b>ଗ</b>	11.65	1.24
Aspirin concentration	0.57	1.22	ation	7.55	1.43
t l	1.07	0.71	뒫	4.65	1.77
ĕ	2.14	0.37	Cer	2.10	1.35
<u>S</u>	3.16	0.38	Š	3.15	1.22
.E	1.43	0.60	.E	1.31	1.13
spi	1.40	0.81	Aspirin	0.25	0.88
Ϋ́	1.00	1.00	×.	1.00	1.00

Cytokeratin (CK): a cytoplasmic marker for **epithelial** phenotypes Vimentin (Vim): a cytoplasmic marker for **mesenchymal** phenotypes

Perillo B, Di Donato M, Pezone A, et al. Experimental & Molecular Medicine, 2020: 1-12.



Immunostaining for CK and Vim





#### Discussion



- Compared with the treatment with doxorubicin alone, the intracellular oxidative activity in the sample under combinatorial DA treatment was reduced, as demonstrated by the intensity of Calcein AM. We demonstrated that the treatment outcomes were mediated by the reduction of COX-2, which was associated with inflammation triggered by ROS.
- Overall, the **preclinical model** could be used as a proof of concept to demonstrate the efficacy of antiinflammatory combinatorial therapies by influencing oxidative stress. Similar research could provide a basis for more **DNA-related cancer treatment** research in the future.

#### Acknowledgements



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## Thank you!