

# Long noncoding RNA SNHG16 acts as an oncogene in Wilms' tumor through sponging miR-200a-3p

X.-S. ZHAO, N. TAO, C. ZHANG, C.-M. GONG, C.-Y. DONG

<sup>1</sup>Department of Pediatric Surgery, The First Hospital of Jilin University, Changchun, China

Xuesong Zhao and Na Tao contributed equally to this work

**Abstract.** – **OBJECTIVE:** Recently, the role of long noncoding RNA (lncRNAs) in tumor progression has attracted much attention. The aim of this study was to investigate the role of lncRNA SNHG16 in the development of Wilms' tumor, and to explore the underlying mechanism.

**PATIENTS AND METHODS:** Real Time-quantitative Polymerase Chain Reaction (RT-qPCR) was used to detect SNHG16 expression in Wilms' tumor patients' tissues. Function assays, including wound healing assay, and transwell assay, were conducted to detect the change of biological behaviors in Wilms' tumor cells after gain or loss of SNHG16. Besides, the luciferase reporter gene assay was performed to explore the underlying mechanism.

**RESULTS:** The expression level of SNHG16 was significantly up-regulated in Wilms' tumor tissues when compared with adjacent normal tissues. Cell migration and invasion abilities were significantly repressed via down-regulation of SNHG16. However, opposite results were obtained after down-regulation of SNHG16 *in vitro*. After down-regulation of SNHG16, the expression of miR-200a-3p increased significantly. However, the expression of miR-200a-3p was remarkably reduced via up-regulation of SNHG16 *in vitro*. Furthermore, SNHG16 acted as a competing endogenous RNA via sponging miR-200a-3p in Wilms' tumor.

**CONCLUSIONS:** SNHG16 promoted the metastasis of Wilms' tumor via sponging miR-200a-3p. Our findings might provide a new prospect for the diagnosis and therapy of Wilms' tumor.

**Key Words:** Long noncoding RNA, SNHG16, Wilms' tumor, miR-200a-3p.

## Introduction

Wilms' tumor is the most frequent pediatric renal cancer, which affects one in 10,000 children annually. Currently, the overall survival rate of

Wilms' tumor is more than 90%<sup>1</sup>. When embryonic nephrogenic cells fail to undergo terminal differentiation, Wilms' tumor occurs. In recent years, advances have been made in combination therapy to improve the prognosis of most patients. However, almost 10% of patients with Wilms' tumor may develop metastasis and recurrence, contributing to poor prognosis<sup>2,3</sup>. Therefore, there is an urgent need to understand the underlying mechanism of Wilms' tumor progression and to find out potential therapeutic strategies.

MicroRNAs (miRNAs), a sub-type of noncoding RNA (ncRNA), participate in a variety of cellular processes and pathways in cancer development. LncRNA ZNF667-AS1 promotes the progression of cervical cancer and is correlated with poor prognosis<sup>4</sup>. LncRNA MEG8 enhances epigenetic induction of epithelial-mesenchymal transition (EMT) in pancreatic carcinoma cells<sup>5</sup>. By modulating OIP5 expression, lncRNA OIP5-AS1 promotes cell proliferation and inhibits cell apoptosis in bladder cancer<sup>6</sup>. The expression level of lncRNA-CCHE1 is positively associated with the malignancy of colorectal carcinoma by regulating the ERK/COX-2 pathway<sup>7</sup>. Activated by ZEB1, lncRNA HCCL5 accelerates cell viability, cell migration, EMT, and the malignancy of hepatocellular carcinoma<sup>8</sup>. LncRNA SNHG16, as a newly discovered lncRNA, has been reported as a vital regulator in tumor development. However, the clinical role and biological mechanisms of SNHG16 in the metastasis of Wilms' tumor have not been fully elucidated.

Our study found that SNHG16 expression was remarkably up-regulated in Wilms' tumor tissues. Meanwhile, SNHG16 promoted the migration and invasion of Wilms' tumor cells *in vitro*. Furthermore, we explored the underlying mechanism of SNHG16 function in Wilms' tumor.

## Patients and Methods

### Tissue Specimens

50 Wilms' tumor patients who received surgery at The First Hospital of Jilin University were enrolled in this study. Tissue samples were collected from these patients for subsequent experiments. All collected tissues were maintained at  $-80^{\circ}\text{C}$ . Written informed consent was obtained from each subject before the operation. This study was approved by the Ethics Committee of The First Hospital of Jilin University.

### Cell Lines

Cells were collected and digested from fresh Wilms' tumor tissues. All cells were cultured in Dulbecco's Modified Eagle's Medium (DMEM; Hyclone, South Logan, UT, USA) containing 10% fetal bovine serum (FBS; Hyclone, South Logan, UT, USA) and penicillin. Besides, the cells were maintained in an incubator with 5%  $\text{CO}_2$  at  $37^{\circ}\text{C}$ .

### Cell Transfection

After synthesis, short hairpin RNA (shRNA) targeting SNHG16 (sh-SNHG16) or scrambled oligonucleotides (NC), lentivirus targeting SNHG16 (SNHG16) or empty vector (EV) were cloned into pGLVHI/GFP+Puro vector (GenePharma, Shanghai, China). Subsequently, Wilms' tumor cells were transfected with sh-SNHG16, NC, and SNHG16 lentivirus (LV) or EV, respectively. Real Time-quantitative Polymerase Chain Reaction (RT-qPCR) was used to detect the transfection efficiency.

### RNA Extraction and RT-qPCR

Total RNA in tissues and cells was extracted by using TRIzol reagent (Thermo Fisher Scientific; Waltham, MA, USA). Subsequently, total RNA was reverse-transcribed into complementary deoxyribose nucleic acid (cDNAs) through Reverse Transcription Kit (TaKaRa Biotechnology Co., Ltd., Dalian, China). Glyceraldehyde 3-phosphate dehydrogenase (GAPDH) was used as an internal reference. Primers used for RT-qPCR were as follows: SNHG16 forward 5'-CCCTGGAAGTCTCTGCC-3', reverse 5'-TACCAAGTTATCACACAG-3'; GAPDH forward 5'-GGGAGCCAAAAG-GC-3', reverse 5'-GAGTCCTTCCACGA-3'. The thermal cycle was as follows: 30 sec at  $95^{\circ}\text{C}$ , 5 sec for 40 cycles at  $95^{\circ}\text{C}$ , and 35 sec at  $60^{\circ}\text{C}$ . The relative expression level of target genes was calculated by the  $2^{-\Delta\Delta\text{Ct}}$  method.

### Wound Healing Assay

Cells were first seeded into 6-well plates and cultured overnight. After scratched with a pipette tip, the cells were cultured in serum-free DMEM. Wound distance was viewed under light microscope (Olympus, Tokyo, Japan) every 24 h. Each assay was independently repeated for three times.

### Transwell Assay

A total of  $5 \times 10^4$  transfected cells in serum-free DMEM were replanted into upper chamber (Corning, Corning, NY, USA) of 6-well plate pre-coated with Matrigel Matrix (Corning, BD Biosciences, San Jose, CA, USA). Meanwhile, lower chamber was added with DMEM and FBS. 24 h later, after wiped by cotton swab, the top surface of chambers was immersed with 1% paraformaldehyde for 10 min and stained with crystal violet for 30 min. Three fields were randomly selected for each sample. Finally, the number of invading cells was counted under a Leica DMI4000B microscope (Leica Microsystems, Wetzlar, Germany).

### Luciferase Reporter Gene Assay

DIANA LncBASE Predicted v.2 was used to search for miRNAs that contained complementary sites with SNHG16. The 3'-untranslated region (3'-UTR) of SNHG16 was cloned into pGL3 vector (Promega, Madison, WI, USA) as wild-type (WT) 3'-UTR. Site-direction mutagenesis of the miR-200a-3p binding site in SNHG16 3'-UTR was conducted through quick-change site-directed mutagenesis kit (Stratagene, Cedar Creek, TX, USA), as mutant (MUT) 3'-UTR. Subsequently, they were transfected into Wilms' tumor cells. Luciferase activity was finally determined by the Dual-Luciferase reporter assay system (Promega, Madison, WI, USA).

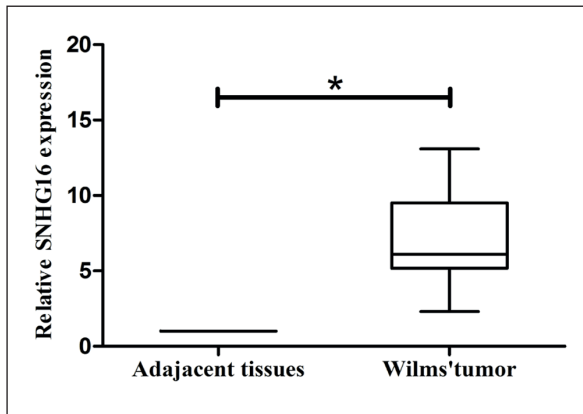
### Statistical Analysis

GraphPad Prism 5.0 (La Jolla, CA, USA) was used for all statistical analysis. Experimental data were expressed as mean  $\pm$  standard deviation (SD). The Student's *t*-test was utilized to compare the difference between the two groups.  $p < 0.05$  was considered statistically significant.

## Results

### SNHG16 Expression Level in Wilms' Tumor Tissues

To determine the biological function of SNHG16 in the tumorigenesis of Wilms' tumor, we first detected SNHG16 expression in 50 paired



**Figure 1.** Expression levels of SNHG16 in Wilms' tumor tissues and cell lines. SNHG16 expression was significantly up-regulated in Wilms' tumor tissues compared with adjacent tissues. Data were presented as mean  $\pm$  standard error of the mean. \* $p < 0.05$ .

Wilms' tumor tissues and adjacent tissues by RT-qPCR. The results showed that SNHG16 was significantly up-regulated in Wilms' tumor tissues when compared with adjacent tissues (Figure 1).

#### **Knockdown of SNHG16 Inhibited Migration and Invasion Abilities of Wilms' Tumor Cells**

The cells were first collected and digested from Wilms' tumor tissues. Subsequently, the cells were transfected with sh-SNHG16 or NC, respectively. Transfection efficiency was verified by RT-qPCR (Figure 2A). Wound healing assay demonstrated that knockdown of SNHG16 significantly reduced the migration of Wilms' tumor cells (Figure 2B). Besides, the transwell assay demonstrated that SNHG16 knockdown remarkably reduced the invasion of Wilms' tumor cells (Figure 2C).

#### **Overexpression of SNHG16 Promoted Migration and Invasion Abilities of Wilms' Tumor Cells**

The cells were first collected and digested from Wilms' tumor tissues. Subsequently, the cells were transfected with SNHG16 lentivirus or NC, respectively. Similarly, transfection efficiency was detected by RT-qPCR (Figure 3A). Wound healing assay illustrated that overexpression of SNHG16 significantly increased the migrated distance of Wilms' tumor cells (Figure 3B). Besides, the results of transwell assay indicated that overexpression of SNHG16 promoted the invasive ability of Wilms' tumor cells (Figure 3C).

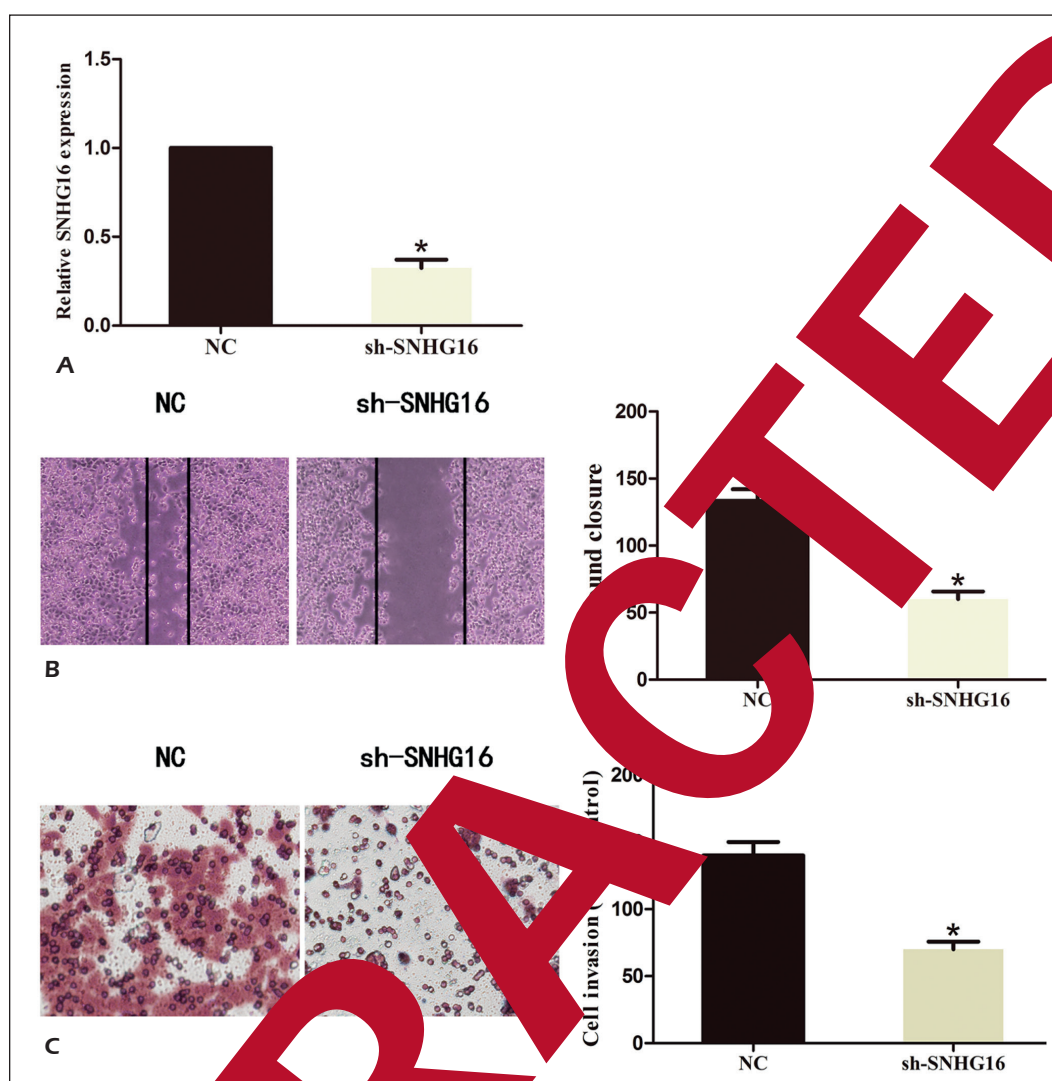
#### **The Association Between MiR-200a-3p and SNHG16 in Wilms' Tumor Tissues and Cells**

DIANA LncBASE Predicted was used to search for miRNAs that contained complementary base with SNHG16. As shown in Figure 4A, miR-200a-3p was selected from the miRNAs that interacted with SNHG16. As shown in Figure 4B, RT-qPCR results demonstrated that the expression of miR-200a-3p was significantly higher in sh-SNHG16 group than that of NC group. However, the expression of miR-200a-3p was significantly lower in SNHG16 lentivirus group than NC group (Figure 4C). To further identify the association between miR-200a-3p and SNHG16, luciferase reporter gene assay was conducted. As shown in Figure 4D, co-transfection of SNHG16-WT and miR-200a-3p remarkably decreased luciferase activity. However, no significant changes in luciferase activity were observed after co-transfection of SNHG16-MUT and miR-200a-3p. Furthermore, correlation analysis was conducted in Wilms' tumor tissues. The results found that miR-200a-3p expression was negatively correlated with SNHG16 expression in Wilms' tumor tissues (Figure 4E).

#### **Discussion**

In recent years, increasing researches have revealed that noncoding RNAs function as important regulators in Wilms' tumor. This may help to understand the molecular mechanism in the development of Wilms' tumor. So, lncRNA SOX-2OT promotes the development of Wilms' tumor by regulating miR-363/FOXP4 axis. LINC00473 functions as an oncogene in Wilms' tumor<sup>9</sup> by antagonizing miR-195. MiR-21 regulates PTEN, which also inhibits the proliferation and metastasis of Wilms' tumor cells<sup>10</sup>. MiR-613 represses cell proliferation and migration in Wilms' tumor by targeting FRS2. All these findings may provide a potential target for the treatment of Wilms' tumor<sup>11</sup>.

Small nucleolar RNA host gene 16 (SNHG16), one of the noncoding RNAs, functions as an oncogene in multiple malignant tumors. SNHG16 promotes the progression of cervical cancer through the miR-216-5p/ZEB1 signal pathway<sup>12</sup>. SNHG16 enhances cell proliferation and migration in gastric cancer<sup>13</sup>. SNHG16 promotes the growth and migration, whereas represses the apoptosis of colorectal cancer cells through the



**Figure 2.** Knockdown of SNHG16 in Wilms' tumor cells. **A**, SNHG16 expression in Wilms' tumor cells transfected with control shRNA (NC) or SNHG16 shRNA (sh-SNHG16) was detected by RT-qPCR. **B**, Wound healing assay showed that knockdown of SNHG16 significantly decreased migrated distance of Wilms' tumor cells (magnification: 40 $\times$ ). **C**, Transwell assay showed that the number of invaded cells was significantly reduced via knockdown of SNHG16 (magnification: 40 $\times$ ,  $p < 0.05$ ).

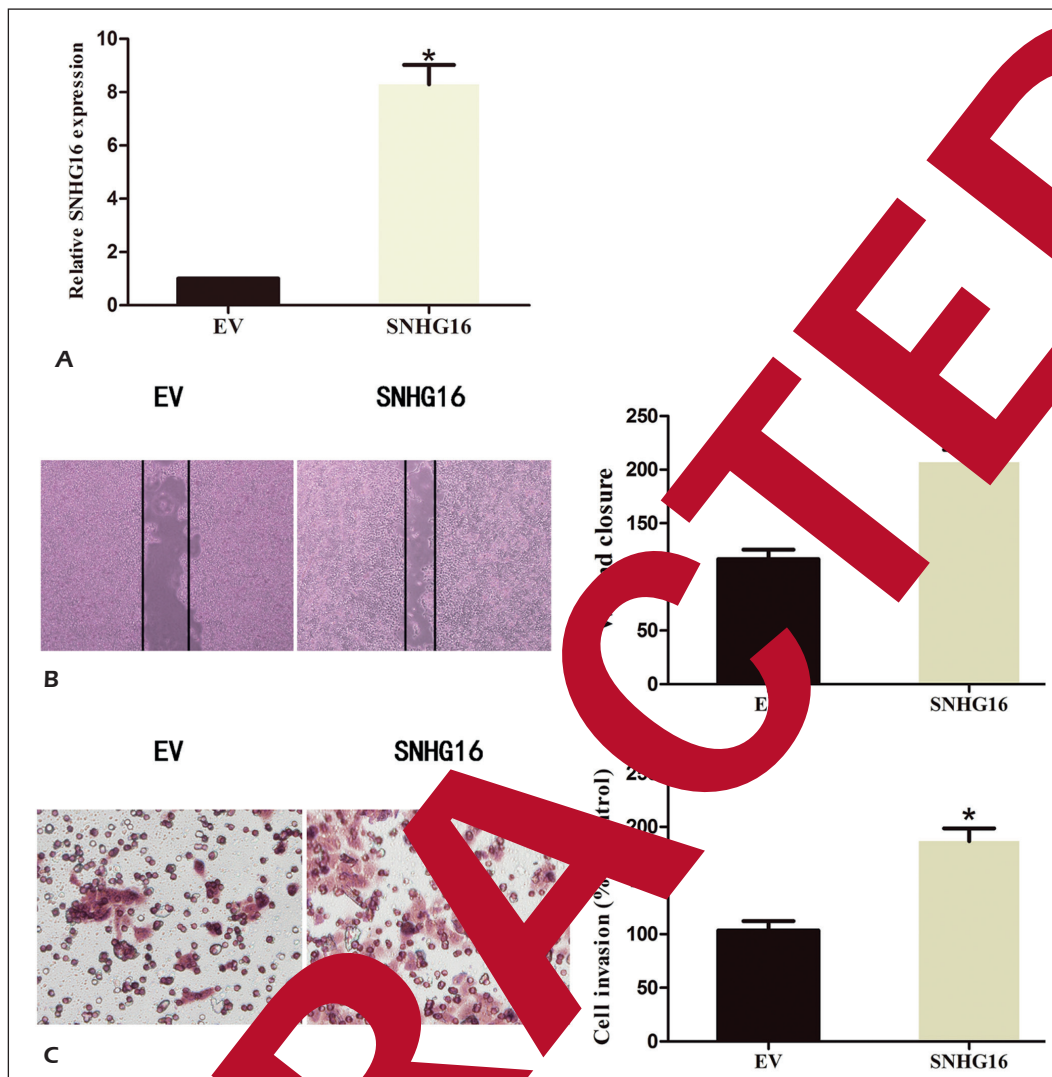
Wnt pathway<sup>14</sup>. SNHG16 accelerates cell viability in bladder cancer by targeting p21. Meanwhile, it is associated with poor prognosis of bladder cancer patients, however, its exact role in Wilms' tumor remains unknown so far. In the present study, we have the first time investigated the role of SNHG16 in Wilms' tumor.

Our results revealed that SNHG16 was highly expressed in Wilms' tumor tissues. After SNHG16 was knocked down, the migration and invasion of Wilms' tumor cells were significantly inhibited. After SNHG16 over-expression, the migration and invasion of Wilms' tumor cells

were significantly promoted. All the above results indicated that SNHG16 acted as an oncogene in Wilms' tumor and promoted its metastasis.

Recently, increasing studies have uncovered the mechanism that lncRNAs function as competing endogenous RNAs for microRNAs, thereby participating in tumor progression. Consistently, lncRNA TP73AS1 significantly promotes cell apoptosis and depresses cell proliferation in colorectal cancer by functioning as a competing endogenous RNA for miR-103 to modulate PTEN expression<sup>16</sup>. By sponging miR-27b-3p, lncRNA KCNQ10T1 facilitates the proliferation



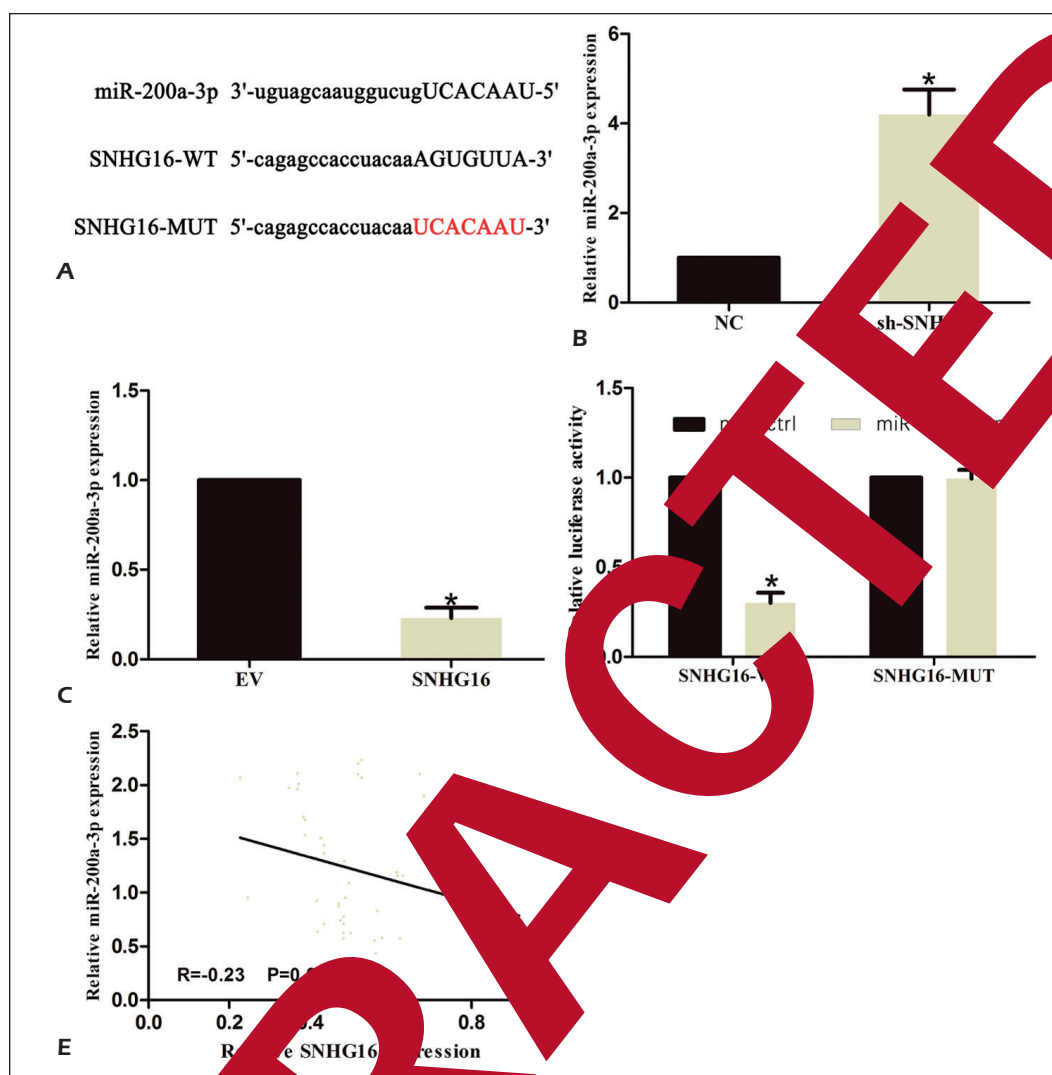


**Figure 3.** Overexpression of SNHG16 promoted Wilms' tumor cell migration and invasion. **A**, SNHG16 expression in Wilms' tumor cells transfected with empty vector (EV) or SNHG16 lentivirus (SNHG16) was detected by RT-qPCR. GAPDH was used as an internal control. **B**, Wound healing assay showed that overexpression of SNHG16 significantly increased the migrated distance of Wilms' tumor cells (magnification: 40 $\times$ ). **C**, Transwell assay showed that the number of invaded cells was significantly elevated via overexpression of SNHG16 (magnification: 40 $\times$ ). \* $p < 0.05$ .

and invasion of non-small cell lung cancer cells by up-regulating HSP90A1<sup>17</sup>.

To further reveal how SNHG16 functioned in Wilms' tumor, miRDIAPY and miRDIAPY v.2 were used to predict the potential microRNAs of SNHG16. As a result, miR-200a-3p was screened out for further experiments. MiR-200 family (including miR-200a, -200b, -200c, -141, and -429) has been reported to inhibit cell proliferation, metastasis, and EMT in various malignant tumors. miR-200a-3p inhibits cell proliferation and promotes cell apoptosis of renal cell carcinoma

through regulating SPAG9<sup>18</sup>. MiR-200a-3p, regulated by lncRNA HULC, inhibits the metastasis and reverses EMT of hepatocellular carcinoma<sup>19</sup>. Our results showed that SNHG16 knockdown significantly up-regulated miR-200a-3p expression. However, an opposite trend was observed after SNHG16 overexpression. Further experiments revealed that SNHG16 acted as a sponge for miR-200a-3p in Wilms' tumor. In addition, miR-200a-3p expression was negatively correlated with SNHG16 expression in Wilms' tumor tissues.



**Figure 4.** The association between miR-200a-3p and SNHG16 in Wilms' tumor tissues and cells. **A**, The binding sites of miR-200a-3p on SNHG16. **B**, miR-200a-3p expression increased significantly in sh-SNHG16 group when compared with NC group. **C**, MiR-200a-3p expression decreased obviously in SNHG16 lentivirus (SNHG16) group when compared with EV group. **D**, Co-transfection of miR-200a-3p and SNHG16-WT strongly decreased luciferase activity. However, no significant changes in luciferase activity were observed after co-transfection of miR-200a-3p and SNHG16-MUT. **E**, MiR-200a-3p expression was negatively correlated with SNHG16 expression in Wilms' tumor tissues. The results represented the average of three independent experiments. Data were presented as mean  $\pm$  standard error of the mean. \* $p < 0.05$ .

### Conclusions

We found that SNHG16 was remarkably up-regulated in Wilms' tumor, which could enhance its metastasis by sponging miR-200a-3p. All these findings suggested that SNHG16 might contribute to therapy for Wilms' tumor as a prospective target.

### Conflict of Interests

The authors declared that they have no conflict of interests.

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