

Long noncoding RNA PCAT-1 accelerates the metastasis of pancreatic cancer by repressing RBM5

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Abstract. – OBJECTIVE: The role of long non-coding RNAs (lncRNAs) is vital in tumor progression. Our study aims to identify the role of PCAT-1 in the metastasis of pancreatic cancer.

PATIENTS AND METHODS: Real time-quantitative polymerase chain reaction (RT-qPCR) was used to measure PCAT-1 expression in 50 pancreatic cancer patients' tissues. Furthermore, to identify the function of PCAT-1 in pancreatic cancer *in vitro* wound healing assay and transwell assay were conducted. Besides, RT-qPCR and Western blot assay were performed to explore the underlying mechanism.

RESULTS: The expression level of PCAT-1 was significantly upregulated in pancreatic cancer samples compared with adjacent tissues. Moreover, cell migration and cell invasion were inhibited by knockdown of PCAT-1 in pancreatic cancer cells. Moreover, the mRNA and protein expression of RBM5 was upregulated via knock down of PCAT-1 in pancreatic cancer cells. Furthermore, the RBM5 expression level was negatively related to PCAT-1 expression level in pancreatic cancer tissues.

CONCLUSIONS: This study suggests that PCAT-1 acts as an oncogene in pancreatic cancer and promotes metastasis via inhibiting RBM5, which might be a potential therapeutic strategy in pancreatic cancer.

Key Words:

Long noncoding RNA, PCAT-1, Pancreatic cancer, RBM5.

Introduction

Pancreatic cancer is the most aggressive and lethal malignancy worldwide. Approximately 46,420 patients were newly diagnosed with pancreatic cancer, and 39,590 cases died of pancreatic cancer in America in 2014, which may be the second most common cause of cancer-related deaths by 2030^{1,2}. Despite significant advances have been made in

understanding carcinogenesis of pancreatic cancer and new therapeutic treatments, pancreatic cancer remains a huge threat for the society. In 2005-2011, the 5-year survival rate remained only 8%, which was 4-5% higher than that in 1975-1989³. Most pancreatic cancer patients died eventually because of cancer metastasis. Therefore, it's urgent to understand the underlying mechanism of pancreatic cancer metastasis and to find out potential therapeutic targets.

Defined as endogenous cellular RNAs, long non-coding RNAs (lncRNAs) have been reported to play an important role in tumorigenesis and tumor progression. For example, by regulating vasculogenic angiogenesis, lncRNA MALAT1 is reported to promote tumorigenicity and cell metastasis in gastric cancer⁴. Overexpression of lncRNA GAS5 inhibits the progression of non-small cell lung cancer through inhibiting miR-23a⁵. lncRNA LINC00092 acts as an important driver of metastatic progression in the progression of ovarian cancer⁶. Repression of lncRNA NEAT1 promotes the development of prostate cancer by disturbing the cell cycle and inhibiting the proliferation of prostate cancer cells⁷. Moreover, lncRNA NR_036575.1 acts as an oncogene in thyroid cancer by promoting cell proliferation and cell migration and could be applied as a potential biomarker and therapeutic target⁸. However, the clinical role and the biological mechanisms of PCAT-1 in the development of pancreatic cancer remain unexplored.

In our study, we found out that PCAT-1 expression level was remarkably higher in pancreatic cancer tissues. Moreover, downregulation of PCAT-1 inhibited cell migration and invasion in a pancreatic cancer cell *in vitro*. Moreover, our further experiment revealed that PCAT-1 functioned in pancreatic cancer development by regulating RBM5.

Patients and Methods

Tissue Specimens and Cell Lines

50 pancreatic cancer patients received surgery at The First Hospital of Jilin University, and their tissue samples were enrolled for this research. Tissues got from the surgery were stored immediately at -80°C . Written informed consent was achieved from patients. This study was approved by the Ethics Committee of The First Hospital of Jilin University. Human pancreatic cancer cell lines BX-PC3, CFPAC-1, Panc-1 and Capan-2 were got from the Institute of Biochemistry and Cell Biology, Chinese Academy of Science (Shanghai, China), and an immortalized pancreatic ductal epithelial cell line H6C7 was offered by Prof. Ming-sound Tsao (Ontario Cancer Institute, Toronto University, Toronto, Canada). Culture medium was Dulbecco's Modified Eagle's Medium (DMEM; Gibco, Rockville, MD, USA) with 10% fetal bovine serum (FBS; Life Technologies, Gaithersburg, MD, USA) and penicillin. Besides, the incubator for cell culture contained 5% CO_2 at 37°C .

Cell Transfection

Then shRNA (lentiviral small hairpin RNA) targeting PCAT-1 was cloned into the pCDL3.1 (GenePharma, Shanghai, China) and the empty vector was taken as control. They were packaged in 293T cells for following transfection of pancreatic cancer cells with Lipofectamine 2000 (Invitrogen, Carlsbad, CA, USA). Total time of quantitative polymerase chain reaction (RT-qPCR) was used to detect the transfection efficiency.

RNA Extraction and RT-qPCR

The total RNA was extracted by using TRIzol reagent (Invitrogen, Carlsbad, CA, USA). And then, the total RNA was reverse-transcribed to cDNAs through reverse transcription kit (TaKaRa Biotechnology Co., Ltd., Dalian, China). Following are the primers using for RT-qPCR: PCAT-1 forward 5'-TGAGAGGCAATCTGTGGAACC-3', reverse 5'-GGTGGCTCCCTGCTTTA-3'; Glyceraldehyde 3-phosphate dehydrogenase (GAPDH) primers forward 5'-GGGAGCCAAAAGGGT-AT-3' and reverse 5'-GAGTCCTTCCACGATAC-CA-3'. The cycle was as follows: 30 sec at 95°C , 30 sec for 40 cycles at 95°C , 35 sec at 60°C .

Western Blot Analysis

Reagent radioimmunoprecipitation assay (RIPA) (Beyotime, Shanghai, China) was utilized to extract protein from cells. Protein concentrations

were quantified by bicinchoninic acid (BCA) protein assay kit (TaKaRa Biotechnology Co., Ltd., Dalian, China). Sodium dodecyl sulphate-polyacrylamide gel electrophoresis (SDS-PAGE) was used to extract the target proteins which were transferred to polyvinylidene difluoride (PVDF) membranes (Millipore, Billerica, MA, USA). Cell Signalling Technology provided us rabbit anti-GAPDH, rabbit anti-RBM5, and goat anti-rabbit secondary antibody (CST, Danvers, MA, USA). Immunoblotting (NIH, Bethesda, MD, USA) was applied for the assessment of the protein expression.

Transwell Assay

5×10^4 transfected cells were seeded to top chamber of 24-well insert (Corning, Corning, NY, USA) added with 200 μL serum-free DMEM. The inserts were previously coated with 50 μg Matrigel (BD Biosciences, Franklin Lakes, NJ, USA). The bottom chamber was added with DMEM containing FBS. These cells were cultured for 48 h. Then, the top surface of chamber was wiped by cotton swab and immersed by precooled methanol for 20 min. Crystal violet was used for staining of the inserts.

Statistical Analysis

Statistical Product and Service Solutions (SPSS) 18.0 (PASW Statistics for Windows, Chicago, IL, USA) was performed for the statistical analysis. In this study, the Student *t*-test was used. The statistical significance was defined as $p < 0.05$.

Results

PCAT-1 Expression Level in Pancreatic Cancer Tissues

RT-qPCR was conducted for detecting PCAT-1 expression in 50 patients' tissues. Results showed that PCAT-1 was significantly upregulated in tumor tissue samples when compared with adjacent tissues (Figure 1).

PCAT-1 Expression Level in Pancreatic Cancer Cells

Then PCAT-1 expression was detected in pancreatic cancer cells by RT-qPCR. The results showed that PCAT-1 expression level of pancreatic cancer cells was higher than that of H6C7 (Figure 2A). According to the expression level in the cells, we chose CFPAC-1 and Panc-1 cell lines for shRNA transfection. The transfection efficiency was detected by RT-qPCR (Figure 2B).

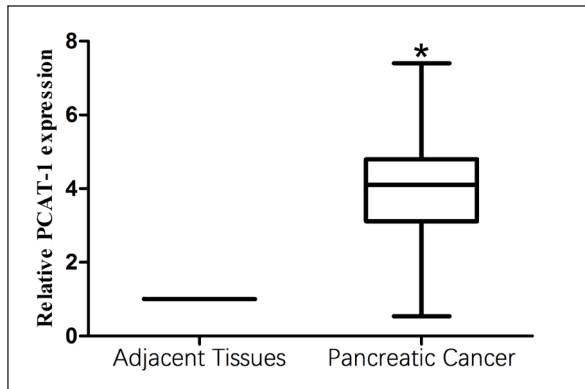


Figure 1. Expression levels of PCAT-1 in pancreatic cancer tissues. PCAT-1 expression was significantly increased in the pancreatic cancer tissues compared with adjacent tissues. Data are presented as the mean \pm standard error of the mean. * $p < 0.05$.

Knockdown of PCAT-1 Inhibited Migrated Ability in Pancreatic Cancer Cells

The results of wound healing assay revealed that knockdown of PCAT-1 reduced the migrated distance of CFPAC-1 pancreatic cancer cells (Figure 3A). Besides, the knockdown of PCAT-1 reduced the migrated distance of Panc-1 pancreatic cancer cells (Figure 3B).

Knockdown of PCAT-1 Inhibited Invaded Ability of Pancreatic Cancer Cells

The outcome of the transwell assay also revealed that PCAT-1 was knocked down in pancreatic cancer cells, the number of invaded cells was remarkably decreased in CFPAC-1 pancreatic

ic cancer cells (Figure 4A). Moreover, the number of invaded cells was remarkably decreased via knockdown of PCAT-1 in Panc-1 pancreatic cancer cells (Figure 4B).

The Association Between RBM5 and PCAT-1 in PC3 Pancreatic Cancer Tissues and Cells

Our further experiments revealed that RBM5 was remarkably low expressed in pancreatic cancer tissues compared with adjacent tissues (Figure 5A). The correlation analysis revealed that the negative association was seen between RBM5 and PCAT-1 expression in pancreatic cancer tissues (Figure 5B). The RT-qPCR results showed that RBM5 was upregulated in PCAT-1 shRNA group compared with the empty vector group *in vitro* (Figure 5C). Western blot assay showed that the protein level of RBM5 could be upregulated by knocking down PCAT-1 (Figure 5D).

Discussion

Previous researches suggest that lncRNAs are the critical regulators in the progression of pancreatic cancer. For instance, downregulation of lncRNA HOST2 represses cell proliferation and promotes cell apoptosis in pancreatic cancer, which may offer a potential therapeutic target for pancreatic cancer⁹. Regulated by ALKBH5, lncRNA KCN15-AS1 inhibits cell migration and cell motility in pancreatic cancer¹⁰. Through

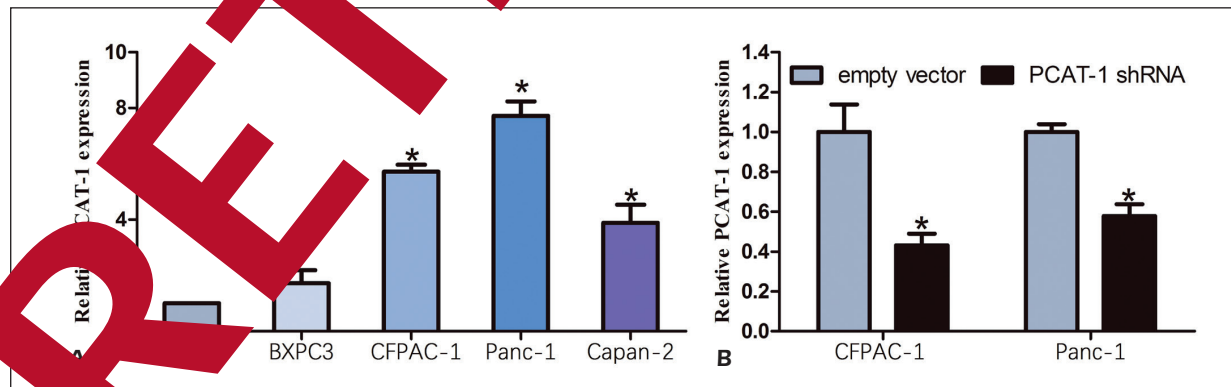


Figure 2. Expression levels of PCAT-1 in pancreatic cancer cell lines. **A**, RT-qPCR results showed that expression levels of PCAT-1 were higher in the human pancreatic cancer cell lines compared with H6C7 (immortalized pancreatic ductal epithelial cell line). **B**, The PCAT-1 expression of CFPAC-1 and Panc-1 pancreatic cancer cells was lower in PCAT-1 shRNA group than that in empty vector group. GAPDH was used as an internal control. Data are presented as the mean \pm standard error of the mean. * $p < 0.05$.

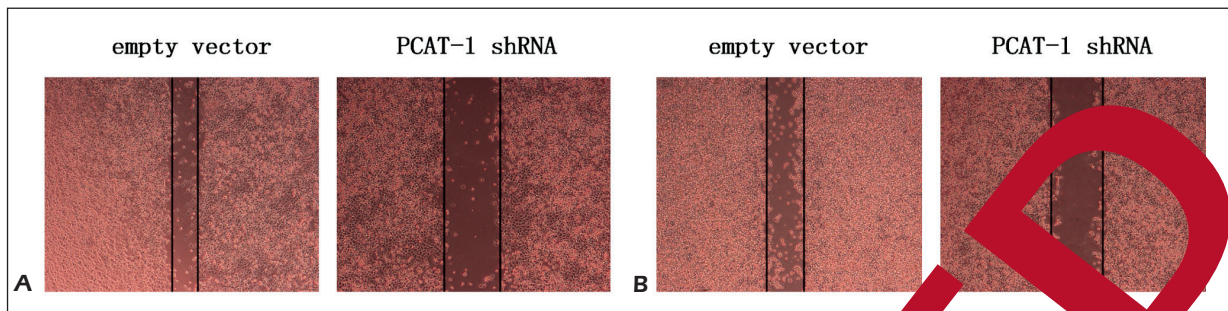


Figure 3. Knockdown of PCAT-1 inhibited pancreatic cancer cell migration. *A*, Wound healing assay showed that knockdown of PCAT-1 significantly decreased cell migrated distance of CFPAC-1 pancreatic cancer cells. *B*, Wound healing assay showed that knockdown of PCAT-1 significantly decreased cell migrated distance of Panc-1 pancreatic cancer cells.

targeting miR-221/SOCS3, lncRNA GAS5 suppresses cell proliferation, cell metastasis and gemcitabine resistance in pancreatic cancer¹¹. lncRNA H19 promotes cell proliferation and cell migration in pancreatic cancer which is modulated by miR-194¹². In addition, lncRNA MEG8 enhances the epigenetic induction of the epithelial-mesenchymal transition in pancreatic cancer cells¹³.

Some evidence has proved that prostate cancer-associated ncRNA transcripts 1 (PCAT-1) firstly discovered in prostate cancer, participates in the progression of several cancers¹⁴. For instance, PCAT-1 plays an important role in tumorigenesis of hepatocellular carcinoma by modulating TP53-miR-215-PCAT-1 axis¹⁵. Upregulation of PCAT-1 promotes metastasis of osteosarcoma by interacting with EZH2 and repressing p21 expression¹⁶. PCAT-1 promotes cell proliferation and invasion of cervical cancer which is associated with poor prognosis of patients¹⁷. In addition, upregulation of PCAT-1 promotes the development of bladder cancer and may be a potential biomarker and therapeutic target¹⁸. Our study revealed that PCAT-1 was

upregulated in both pancreatic cancer samples and cells. Besides, after PCAT-1 was knocked down, pancreatic cancer cell migration and invasion capacities were found to be inhibited. The results above indicated that PCAT-1 promoted metastasis of pancreatic cancer and might act as oncogene.

RBM5 located on the cancer inhibitor region 3p21.3, RBM5 binding motif 5 (RBM5) participates in the progression of several carcinomas¹⁹. For example, the expression level of RBM5 is significantly downregulated in lung adenocarcinoma and can be used as a diagnostic marker for these patients^{20,21}. RBM5 functions as a tumor suppressor gene in the progression of gastric cancer by enhancing the activity of p53 transcription²². RBM5 is significantly down-expressed in pancreatic ductal adenocarcinoma which is related to the clinicopathological characteristic of the patients²³. In addition, RBM5 depresses tumorigenesis of gliomas by inhibiting Wnt/beta-catenin signaling and inducing cell apoptosis²⁴. Our further experiments identified that RBM5 expression could be upregulated by knockdown of PCAT-1. Moreover, RBM5 expression in pancreatic cancer tissues

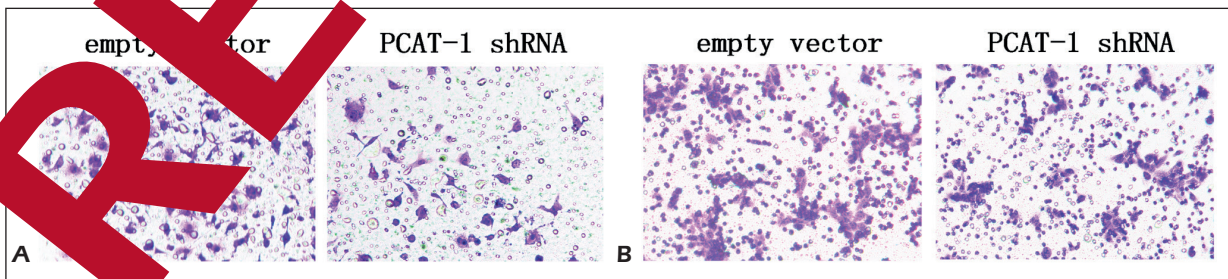


Figure 4. Knockdown of PCAT-1 inhibited pancreatic cancer cell invasion. *A*, Transwell assay showed that number of invaded cells was significantly decreased via knockdown of PCAT-1 in CFPAC-1 pancreatic cancer cells (40×). *B*, Transwell assay showed that number of invaded cells was significantly decreased via knockdown of PCAT-1 in Panc-1 pancreatic cancer cells (40×).

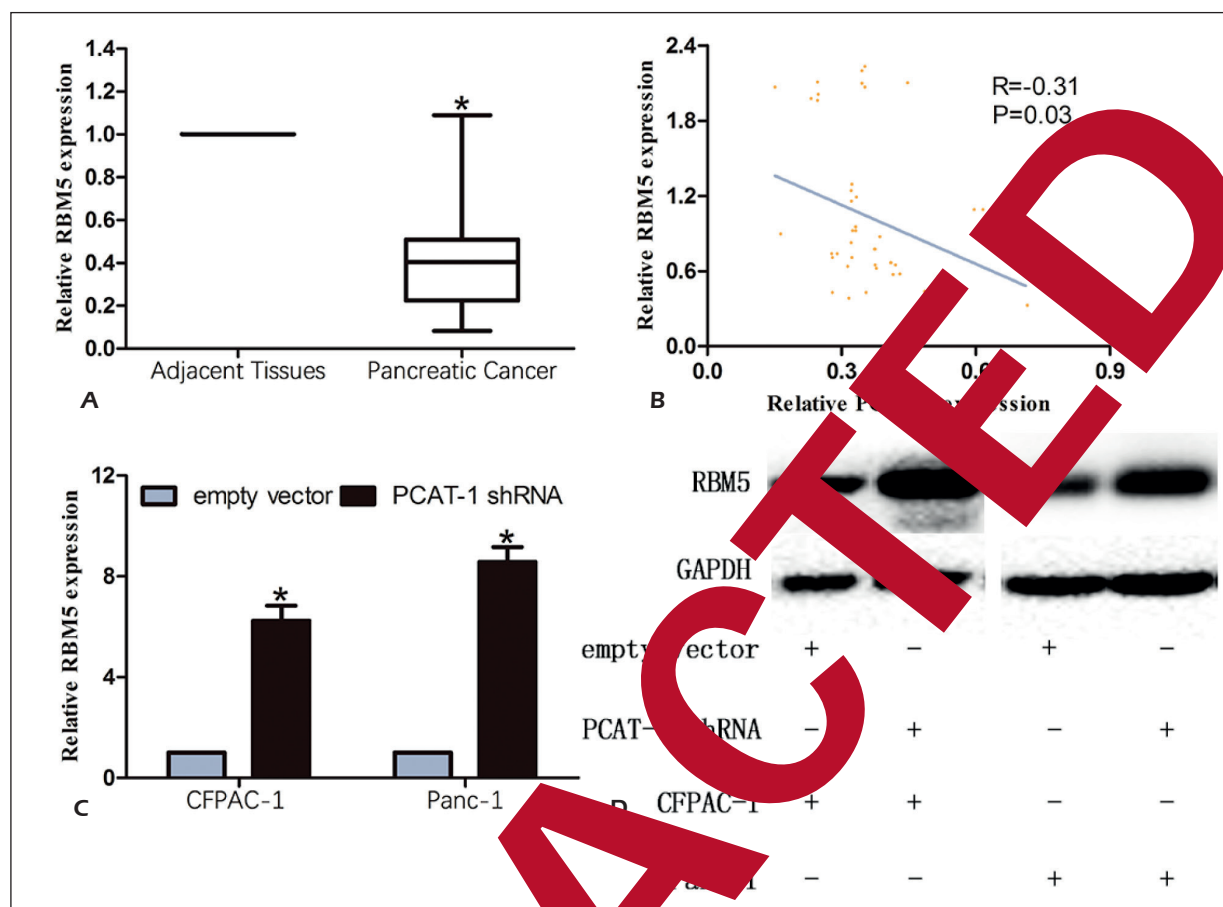


Figure 5. The association between PCAT-1 and RBM5 in pancreatic cancer tissues and cells. **A**, RBM5 was significantly downregulated in pancreatic cancer tissues compared with adjacent tissues. **B**, The negative correlation between the expression level of RBM5 and PCAT-1 in pancreatic cancer tissues. **C**, qPCR results showed that RBM5 expression was higher in PCAT-1 shRNA compared with the empty vector in pancreatic cancer cells. **D**, Western blot assay revealed that RBM5 protein expression of pancreatic cancer cells was increased by PCAT-1 shRNA compared with empty vector. The results represent the average of three independent experiments. **D** was presented as the mean \pm standard error of the mean. * $p < 0.05$.

was negatively related to PCAT-1 expression. All the results above suggest that PCAT-1 might promote tumorigenesis of pancreatic cancer via suppressing RBM5.

Conclusions

PCAT-1 and PCAT-1-AS1 remarkably upregulated and PCAT-1 could enhance cell invasion and migration in pancreatic cancer by repressing RBM5. Our results suggest that PCAT-1 may serve as a cancer-related target that contributes to therapy for pancreatic cancer.

Conflict of Interests

The Authors declared that they have no conflict of interests.

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