

[1]余腾骅,王智亮,赵晨晖,等.雌激素激活GPR30/ERK通路促进三阴性乳腺癌MDA-MB-468细胞迁移及侵袭[J].第三军医大学学报,2014,36(20):2077-2082.

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## 雌激素激活GPR30/ERK通路促进三阴性乳腺癌MDA

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Title: Estrogen enhances migration and invasion in triple-negative breast cancer MDA-MB-468 cells *via* activating GPR30/ERK signaling pathway

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关键词: 雌激素; GPR30/ERK通路; 三阴性乳腺癌; 细胞迁移及侵袭

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摘要: 目的 探讨雌激素/GPR30/ERK信号通路的激活对三阴性乳腺癌 (triple-negative breast cancer, TNBC) MDA-MB-468细胞迁移及侵袭的影响。 方法 免疫荧光及Western blot检测MDA-MB-468细胞中雌激素受体GPR30的蛋白表达量及细胞内定位, Western blot检测药物处理后细胞中磷酸化细胞外信号调节激酶 (phospho-extracellular regulate kinase, p-ERK) 的蛋白表达变化, 细胞划痕实验及Transwell小室实验分别检测细胞的迁移及侵袭能力的改变。 结果 雌激素受体GPR30在TNBC细胞系MDA-MB-468中高表达, 且主要位于细胞胞浆部位。17- $\beta$ 雌二醇 (E2) 和GPR30特异性激动剂 (G1) 可以显著活化细胞中GPR30/ERK信号通路 ( $P<0.05$ ), 上调p-ERK蛋白水平, 其相对表达量分别是空白对照组的 ( $2.07\pm 0.11$ ) 倍和 ( $1.98\pm 0.06$ )

倍。E2及G1药物处理后的细胞迁移能力得到显著提高 ( $P<0.05$ )，24 h后迁移入划痕区域的相对细胞数分别为空白对照组的 ( $2.10\pm 0.20$ ) 倍和 ( $2.14\pm 0.34$ ) 倍。细胞侵袭实验也可得到类似结果。GPR30特异性拮抗剂 (G15) 以及ERK特异性抑制剂 (U0126) 均可显著抑制E2和G1引发的以上改变 ( $P<0.05$ )。结论 雌激素通过活化TNBC细胞MDA-MB-468中GPR30/ERK信号通路，促进细胞迁移及侵袭的恶性潜能。靶向雌激素/GPR30/ERK通路可能成为TNBC的有效治疗手段。

**Abstract:** **Objective** To explore the effects of activated estrogen/GPR30/ERK signaling on the migration and invasion of triple-negative breast cancer (TNBC) cell line MDA-MB-468. **Methods** Immunofluorescent assay and Western blotting were used to test the expression and localization of estrogen receptor GPR30 in MDA-MB-468 cells. The expression level of phospho-extracellular regulate kinase (p-ERK) was detected by Western blotting. The changes of cell migration and invasion ability were examined by wound-healing assay and Transwell assay, respectively. **Results** Estrogen receptor GPR30 was detected with high expression level in MDA-MB-468 cells and was mostly expressed in the cytoplasm. After treating with 17- $\beta$  estradiol (E2) and GPR30 specific agonist (G1), the GPR30/ERK signaling was remarkably activated. The relative protein expressions of p-ERK in the E2 and G1 treatment groups were ( $2.07\pm 0.11$ ) and ( $1.98\pm 0.06$ ) times higher than those of the control group ( $P<0.05$ ), respectively. Moreover, E2 and G1 significantly increased the ability of cell migration. The relative migrated cell numbers in the E2 and G1 treatment groups were  $2.10\pm 0.20$  and  $2.14\pm 0.34$  times higher than those of the control group ( $P<0.05$ ), respectively. Transwell assays indicated the similar results as wound-healing assays. Interestingly, these changes induced by E2 and G1 could be significantly blocked by GPR30 specific antagonist (G15) and ERK specific inhibitor (U0126) ( $P<0.05$ ). **Conclusion** Estrogen increases the ability of cell migration and invasion through activating GPR30/ERK signaling in TNBC cells. Inhibition of estrogen/GPR30/ERK signaling represents a novel targeted therapy in TNBC.

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