

CD13抑制剂乌苯美司对A549细胞顺铂敏感性的影响及其机制

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摘要 目的:检测CD13抑制剂乌苯美司联合顺铂对A549细胞增殖、细胞凋亡的影响,并探讨其机制。方法:应用噻唑蓝比色法检测细胞增殖;流式细胞Annexin V-FITC/PI双染色法检测细胞凋亡;Western blot方法检测p53、PARP-1、Bcl-2、Bcl2-xL和Caspase蛋白水平;酶活性底物法检测CD13活性;Hoechst33342染色联合流式细胞术检测侧群细胞。结果:乌苯美司单药对A549细胞增殖无显著影响($P>0.05$),乌苯美司(100 μg/mL)联合顺铂作用A549细胞24、48、72 h后,乌苯美司可显著增强8、16 μmol/L顺铂对A549细胞的增殖抑制($P<0.05$),并呈时间依赖性,72h时,8、16 μmol/L顺铂组和顺铂联合组的细胞增殖率分别为(62.06±7.60)% vs.(27.92±5.84)%和(19.22±1.57)% vs.(0.67±0.42%)($P<0.05$);但对64 μmol/L顺铂的细胞增殖率无明显影响($P>0.05$)。16 μmol/L顺铂联合组细胞凋亡的比例明显增加($P<0.05$)。乌苯美司对P53、PARP-1、Bcl-2、Bcl2-xL及Capsize蛋白水平无明显影响,但显著抑制A549细胞CD13活性和降低A549侧群细胞比例($P<0.05$)。结论:CD13抑制剂乌苯美司体外条件下显著提高低剂量顺铂对A549细胞的抑制作用,可能成为CD13阳性非小细胞肺癌患者顺铂的增敏剂。

关键词 CD13 乌苯美司 顺铂 非小细胞肺癌 侧群细胞

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Effects of Ubenimex, a CD13 Inhibitor, on the Chemosensitivity of A549 Cells to Cisplatin

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Abstract Objective: This study was designed to investigate the effects of ubenimex, a CD13 inhibitor, (ubenimex alone and ubenimex with cisplatin), on A549 cell proliferation and apoptosis. This study also aimed to determine the possible underlying mechanisms. **Methods:** A549 cells were cultured in RPMI 1640 medium supplemented with 10% fetal bovine serum. The cultured cells were then treated with ubenimex at varying concentrations or a combination of ubenimex (100 μg·mL⁻¹) and cisplatin at varying concentrations. Methyl thiazolyl tetrazolium assay was used to determine the cell proliferation ratio. Flow cytometer was then used to analyze the cell apoptotic rates (AnnexinV-FITC/PI double-staining). The protein expressions of p53, Bcl-2, and Bcl2-xL, as well as the cleavage of PARP-1 and caspase were determined through Western blot. Spectrophotometrical assay was performed using alanine-p-nitroanilido as a substrate to detect CD13 activity. Hoechst 33342 staining combined with flow cytometry analysis was performed to detect the side population (SP) cells in A549 cells. **Results:** Ubenimex alone did not significantly inhibit A549 cell proliferation ($P>0.05$). By contrast, ubenimex significantly increased the chemosensitivity of A549 cells to cisplatin at 8 μM or 16 μM in a time-dependent manner. After the A549 cells were treated with different concentrations of cisplatin (i.e., 8, 16, 32, and 64 μM) and ubenimex (100 μg·mL⁻¹) for 24, 48, and 72 h, the cell proliferation ratios were obtained. In particular, at a cisplatin concentration of 8 μM, the cell proliferation ratios of the cisplatin group against the combined treatment of cisplatin with ubenimex (100 μg·mL⁻¹) were 89.44±15.84% versus 62.18±5.35% (24 h), 64.81±5.86% versus 33.09±3.14% (48 h), and 62.06±7.6% versus 27.92±5.84% (72 h). At 16 μM of cisplatin, the cell proliferation ratios (cisplatin against the combined treatment) were 84.61±3.73% versus 54.50±4.22% (24 h), 22.09±5.74% versus 3.62±3.28% (48 h), and 19.22±1.57% versus 0.67±0.42% (72 h). Ubenimex did not significantly increase the chemosensitivity of A549 cells to cisplatin (64 μM). Cellular apoptotic rates were also significantly increased in the combined treatment group [cisplatin (16 μM) and ubenimex] compared with that in the cisplatin group alone. Ubenimex alone cannot change the protein expression of p53, Bcl-2, and Bcl2-xL, as well as the cleavage of PARP-1 and caspase. By contrast, ubenimex can significantly inhibit the CD13 activity of A549 cells and decrease the percentage of SP cells of A549 cells ($P<0.05$). **Conclusion:** Ubenimex can significantly enhance the chemosensitivity of low-dose cisplatin on A549 cells in vitro. Therefore, ubenimex may be used as a sensitizer of cisplatin for human non-small cell lung cancer with CD13 expression.

Keywords CD13; Ubenimex; Non-small cell lung cancer; Cisplatin; Side population cells

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目前肺癌是全球最常见的恶性肿瘤^[1],非小细胞肺癌(non-small cell lung cancer, NSCLC)约占80%。化疗是NSCLC主要治疗手段,顺铂是化疗首选药,但毒性限制了其应用。因此,探索如何提高顺铂的敏感性,对提高疗效和减轻毒性尤为重要。

近期研究发现CD13抑制剂乌苯美司能提高5-FU对肝癌的敏感性^[2]和抑制肝癌干细胞的存活^[2-3],但其能否提高顺铂对NSCLC细胞的敏感性,尚缺乏研究。本实验主要探讨乌苯美司对顺铂在A549细胞的增敏作用及其机制,为临床应用提供理论依据。

1 材料与方法

1.1 实验材料

A549细胞株购于中国医学科学院基础研究所细胞中心。RPMI1640细胞培养基、胎牛血清、磷酸盐缓冲液购于HyClone®公司;无酚红HBSS缓冲盐、0.25%胰酶购于Gibco®公司;噻唑蓝、Hochest33342、利血平、碘化吡啶(PI)、L-亮氨酸-P-硝基酰基苯胺盐酸盐、N-(2-羟乙基)哌嗪-N'-2-乙烷磺酸(HEPES)购于Sigma-aldrich®公司;Annexin V-FITC细胞凋亡检测试剂盒购于碧云天®生物技术研究所;蛋白提取试剂盒、P53、β-actin、Bcl-2、Bcl-xL、PARP-1和Caspase抗体购自Santa Cruz®公司;顺铂注射液(5 mg/mL)购自云南个旧生物药业有限公司;乌苯美司原料药由浙江普洛康裕制药有限公司惠赠。

1.2 实验方法

1.2.1 细胞培养 A549细胞应用10%胎牛血清的RPMI 1640培养基在37℃、5%CO₂培养箱中培养。细胞长满瓶底80%~90%时用0.25%胰蛋白酶消化传代,取对数生长期的细胞进行实验。

1.2.2 MTT 将细胞按 5×10^3 个/孔接种于96孔板内。12 h后加药,终体积为200 μL。设乌苯美司、顺铂、二者联合及空白对照4组,浓度为:乌苯美司25、50、75、100 μg/mL;顺铂2、4、8、16、32、64 μmol/L;联合组中乌苯美司100 μg/mL,顺铂2、4、8、16、32、64 μmol/L;对照组加入等体积PBS。边缘孔加入PBS作为调零孔。每组设6个复孔。加药24、48、72 h后每孔加入20 μL MTT溶液(5 mg/mL),避光孵育4 h,弃去细胞培养液,加入DMSO150 μL/孔,避光震荡20 min,用酶标仪检测各孔570 nm处吸光度(OD值)。细胞增殖率=(实验组OD值-调零孔OD值)/(对照OD值-调零孔OD值)×100%。

1.2.3 细胞凋亡检测 将细胞按 1.5×10^5 个/60 mm皿接种于60 mm皿内。12 h后加药,终体积为5 mL。设乌苯美司、顺铂、二者联合及空白对照4组,浓度为:乌苯美司100 μg/mL;顺铂8和16 μmol/L;联合组中乌苯美司为100 μg/mL,顺铂为8和16 μmol/L。对照组加入等体积PBS。处理24 h后收集细胞,用预冷PBS洗涤

2次,重悬于PBS中,调整细胞浓度为 1×10^5 个/mL。按细胞凋亡检测试剂盒说明书进行凋亡检测。

1.2.4 细胞凋亡蛋白检测 细胞接种及处理同1.2.3。加药24 h后,0℃PBS润洗,RIPA缓冲液裂解,4℃12 000 g离心10 min,取上清用BCA法测蛋白浓度。蛋白和加样缓冲液混合后95℃加热5 min,50 μg/孔上样,用10%聚丙烯酰胺凝胶进行电泳分离。电泳结束后采用湿法将蛋白电转移至醋酸纤维素膜上,加入含0.05% Tween 20的PBS(PBST)的5%脱脂牛奶,室温封闭膜1 h。膜经PBST漂洗后,加入稀释于含5% BSA的PBST中的一抗,4℃下振摇孵育过夜。膜经PBST漂洗10 min×3次后,加入稀释于含5%脱脂牛奶的PBST中的HRP标记二抗,室温孵育1 h后,再次经PBST漂洗10 min×3次。最后膜上结合的二抗加上ECL发光底物,暗室曝光显影。

1.2.5 CD13酶活性检测^[4] 细胞接种和加药同1.2.3。加药24 h后,弃去上清,PBS洗1遍,各培养皿中加入含有1.0 mM L-亮氨酸-P-硝基酰基苯胺盐酸盐的PBS 5 mL,避光孵育60 min,按200 μL/孔将培养皿中的培养基接种至96孔板中,以含有1.0 mM L-亮氨酸-P-硝基酰基苯胺盐酸盐的PBS为调零孔,每组设6个复孔,用酶标仪检测各孔405 nm处OD值。酶活性率=(实验组OD值-调零孔OD值)/(空白组OD值-调零孔OD值)×100%。

1.2.6 SP细胞检测 将细胞按 5×10^5 个/100 mm皿接种于100 mm皿内,12 h后加药,终体积为10 mL。乌苯美司为50 μg/mL和100 μg/mL两组;对照组加入等体积的PBS。加药24、48 h后,收集细胞,按照已建立的SP细胞检测方法进行操作^[5]。

1.3 统计学处理

采用SPSS17.0软件进行统计分析。实验数据以 $\bar{x}\pm s$ 表示,两组间采用独立样本t检验, $P<0.05$ 为差异有统计学意义。

2 结果

2.1 细胞增殖率

乌苯美司单药在所检测浓度和时间范围对A549细胞增殖无影响(图1A)。因100 μg/mL组抑制作用较一致,故选定为联合应用浓度。乌苯美司显著增强8和16 μmol/L顺铂对A549细胞增殖的抑制,并呈时间依赖性,但对64 μmol/L顺铂无明显作用($P>0.05$,图1B和表1)。

2.2 细胞凋亡率

乌苯美司(100 μg/mL)单药对细胞凋亡无影响($P>0.05$),但其可增强16 μmol/L顺铂的细胞凋亡率:联合组和单药顺铂组的细胞凋亡率分别为(38.43±3.51)% vs.(22.48±4.7)% ($P=0.010$,图2)。

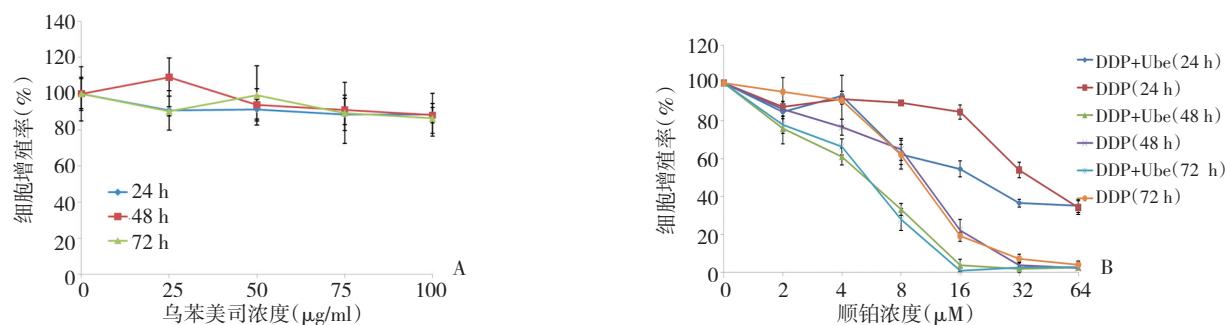
A: Ubenimex; B: Ubenimex ($100 \mu\text{g}/\text{mL}$) + 不同浓度顺铂; DDP: 顺铂; Ube: 乌苯美司

图1 乌苯美司和顺铂24、48和72h对A549细胞增殖的影响

Figure 1 Cell proliferation ratio of ubenimex and cisplatin on A549 cells at varying concentrations and in different treatment durations (24, 48, and 72 h)

表1 乌苯美司联合顺铂24、48和72h对A549细胞增殖的影响 $(\bar{x} \pm s) \%$

Table 1 Effects of ubenimex (Ube) combined with various concentrations of cisplatin (DDP) on cell viabilities of A549 cells after various treatment periods Cell proliferation ratio of Ube and DDP on A549 cells at varying concentrations and in different treatment periods (24, 48, and 72 h)

组别	24 h		48 h		72 h	
	细胞活性率	P	细胞活性率	P	细胞活性率	P
DDP (8 $\mu\text{mol/L}$)	89.44 \pm 15.84	0.022	64.81 \pm 5.86	0	62.06 \pm 7.6	0
DDP (8 $\mu\text{mol/L}$) + Ube (100 $\mu\text{g/mL}$)	62.18 \pm 5.35		33.09 \pm 3.14		27.92 \pm 5.84	
DDP (16 $\mu\text{mol/L}$)	84.61 \pm 3.73	0.003	22.09 \pm 5.74	0.001	19.22 \pm 1.57	0.004
DDP (16 $\mu\text{mol/L}$) + Ube (100 $\mu\text{g/mL}$)	54.50 \pm 4.22		3.62 \pm 3.28		0.67 \pm 0.42	
DDP (32 $\mu\text{mol/L}$)	54.00 \pm 4.13	0.064	3.78 \pm 3.78	0.026	7.15 \pm 2.27	0.043
DDP (32 $\mu\text{mol/L}$) + Ube (100 $\mu\text{g/mL}$)	36.50 \pm 2.07		1.65 \pm 1.32		2.58 \pm 2.72	
DDP (64 $\mu\text{mol/L}$)	34.17 \pm 3.63	0.902	2.15 \pm 0.43	0.703	3.94 \pm 1.97	0.384
DDP (64 $\mu\text{mol/L}$) + Ube (100 $\mu\text{g/mL}$)	35.01 \pm 3.46		2.54 \pm 0.16		2.74 \pm 0.91	

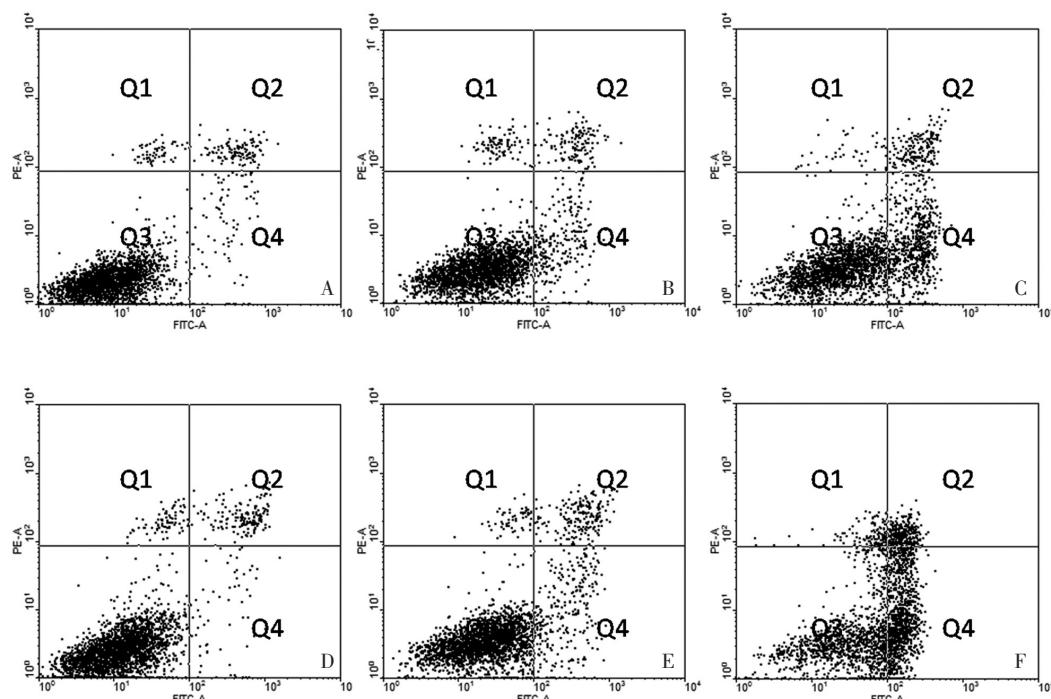
A: control; B: cisplatin 8 $\mu\text{mol/L}$; C: cisplatin 16 $\mu\text{mol/L}$; D: Ubenimex (100 $\mu\text{g/mL}$); E: Ubenimex (100 $\mu\text{g/mL}$) + cisplatin at 8 $\mu\text{mol/L}$; F: Ubenimex (100 $\mu\text{g/mL}$) + cisplatin at 16 $\mu\text{mol/L}$

图2 乌苯美司联合低剂量顺铂对A549细胞凋亡的影响

Figure 2 Effects of ubenimex combined with low dose of cisplatin on A549 cell apoptosis

2.3 Western blot检测细胞凋亡相关蛋白

乌苯美司单药对P53、PARP-1、Bcl-2、Bcl2-xL及Caspase等蛋白无明显影响。而与8或16 μmol/L顺铂联合时,磷酸化-P53和总P53蛋白水平增高(图3)。

2.4 细胞CD13活性率

乌苯美司显著抑制A549细胞中的CD13活性,单药组和空白对照组中的CD13活性率分别为(28.23 ± 0.64)% vs. (100 ± 1.25)%, ($P < 0.05$);联合组和顺铂单药组中CD13活性率分别为:8 μmol/L组为(31.79 ± 2.08)% vs. (95.99 ± 0.82)%;16 μM组为(29.90 ± 0.73)% vs. (81.38 ± 1.01)%。

2.5 侧群(side population,SP)细胞比例

A549细胞中SP细胞比例为(2.50 ± 0.54)%,乌苯美司能显著抑制A549细胞中的SP细胞比例,其比例约为0($P < 0.05$,图4)。

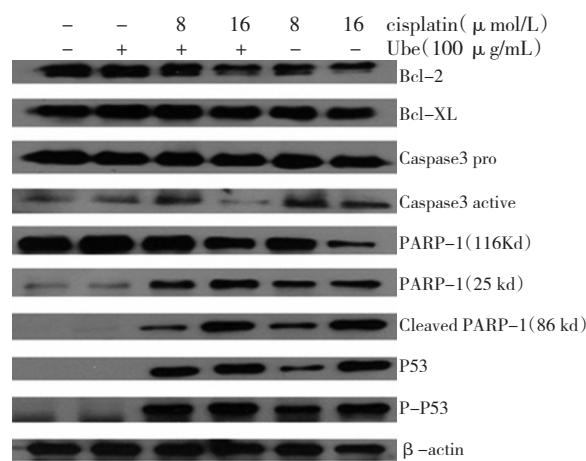
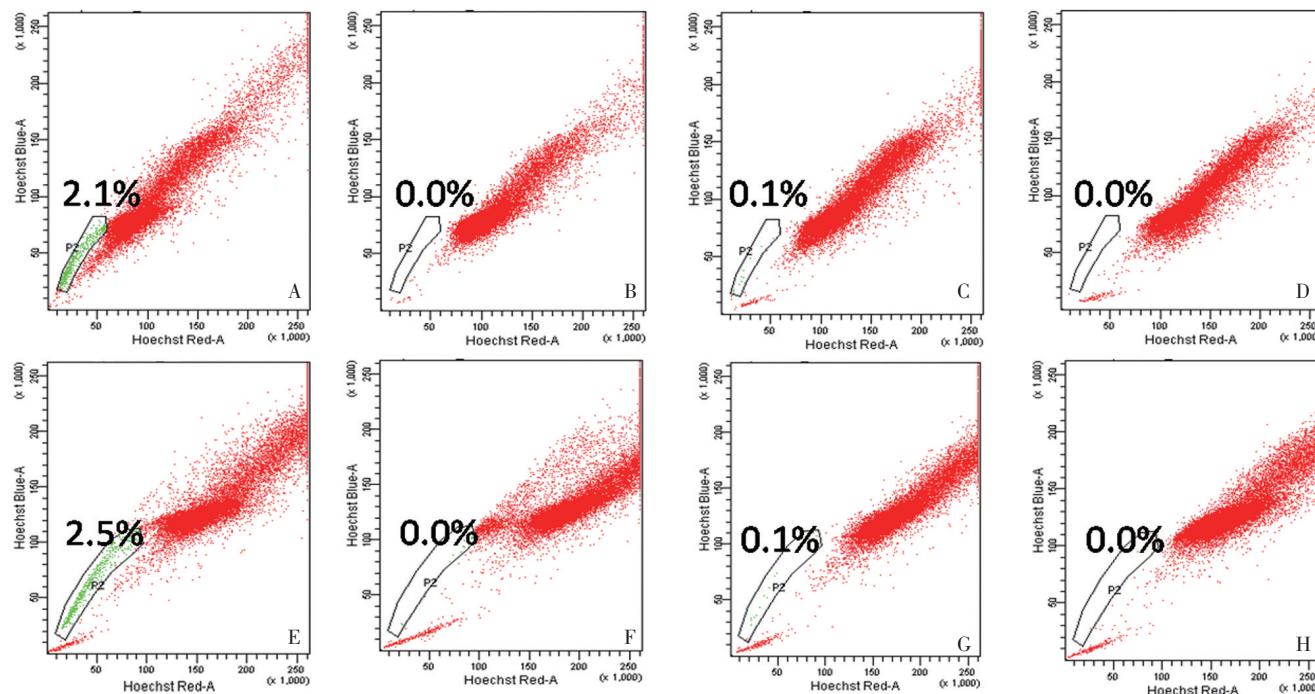


图3 乌苯美司联合顺铂24 h对A549细胞Bcl-2、Bcl-XL、Caspase3、PARP-1、p53蛋白的影响

Figure 3 Effects of ubenimex combined with various concentrations of cisplatin on the protein expression of Bcl-2, Bcl-XL, Caspase3, PARP-1, and p53 in A549 cells after a 24 h treatment



A、E:control;B、F:Ube 25 μmol/L;C、G:Ube 50 μg/mL;D、H:Ube 100 μg/mL;A、D:Ube 100 μg/mL;A~D:24 h;E~H:48 h
图4 乌苯美司对A549细胞侧群细胞比例的影响(24和48 h)

Figure 4 Effects of ubenimex on the percentage of side population cells in A549 cells after a 24 or 48 h treatment

3 讨论

CD13又称为氨肽酶N,在卵巢癌^[6]、甲状腺癌^[7]和NSCLC^[8,9]等多种肿瘤中存在活性,CD13与肿瘤细胞增殖、浸润和肿瘤血管生成^[10]、肿瘤干细胞存活以及顺铂、紫杉醇的耐药密切相关^[6,11]。因此,抑制CD13活性成为肿瘤治疗的新策略。乌苯美司是从链霉菌属的培养液中分离获得的一种CD13抑制剂,既往研究多认为乌苯美司仅是通过激活T细胞和NK细

胞的杀伤活力,增强机体免疫和降低放化疗毒副反应而发挥抗肿瘤作用^[12],对乌苯美司能否增强化疗药物疗效的研究甚少。因此,本研究拟探讨乌苯美司能否提高NSCLC中顺铂的敏感性。

本研究发现乌苯美司可提高低浓度顺铂对A549细胞增殖的抑制作用,但对高浓度顺铂无明显增效作用。可能是高浓度顺铂导致细胞死亡接近最大值。乌苯美司单药对A549细胞凋亡无影响,但可提

高 $16 \mu\text{mol/L}$ 顺铂组的细胞凋亡率。凋亡蛋白检测发现乌苯美司对凋亡相关蛋白无明显影响,而联合组中的磷酸化P53和总P53蛋白水平提高,这与细胞凋亡检测结果一致。由此可见,乌苯美司提高顺铂对A549细胞敏感性的机制之一是诱导细胞凋亡增加,可能与激活P53通路有关。

本研究进一步发现乌苯美司可显著抑制A549细胞中CD13活性和下调SP细胞的比例。van Hensbergen等^[6]发现抑制CD13活性可显著提高顺铂对卵巢癌的疗效。Ho等^[13]最早发现A549中SP细胞富集了肺癌干细胞,对多种化疗药物抵抗。A549的SP细胞显著高表达ABCG2、MDR1等耐药蛋白^[5]。因此,CD13活性抑制和SP细胞比例下调或许是乌苯美司提高顺铂敏感性的另一机制。

总之,本研究发现乌苯美司体外条件下显著提高低浓度顺铂对A549细胞杀伤作用,其机制可能是抑制CD13活性、激活P53通路和下调肺癌干细胞比例。因此,乌苯美司可能成为CD13阳性的NSCLC患者中顺铂的增敏剂,有助于提高化疗疗效和减低毒性,为优化NSCLC临床治疗提供了理论依据。

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