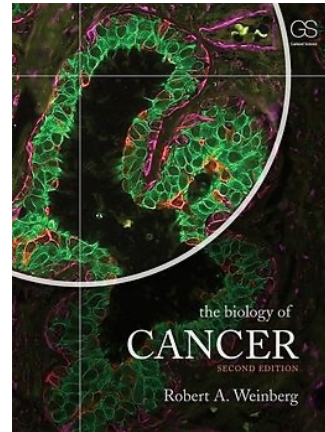
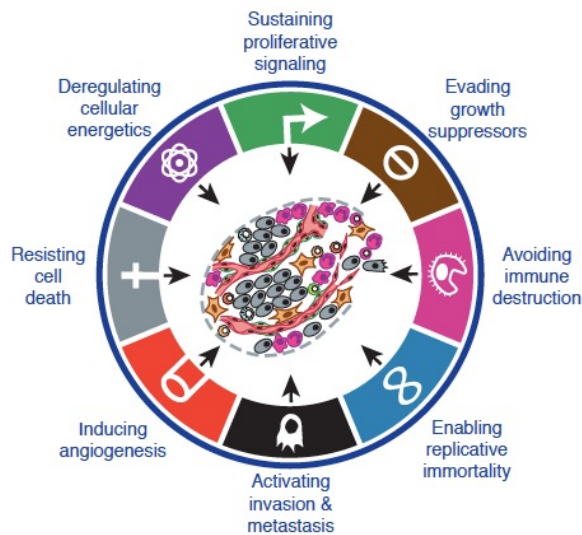


# The hallmarks of cancer - BIO-392

Hanahan & Weinberg, 2011  
Cell 144:646-674  
(see Moodle, week 1)

## Recommended textbook:

Titel: The Biology of Cancer  
2<sup>nd</sup> edition, 2014  
Garland Science  
Autor: [Robert A. Weinberg](#)  
EAN: 9780815345282  
ISBN: 978-0-8153-4528-2



1

## Introduction to oncology: Outline Constam part

### Core hallmark capabilities:

March 5: Sustained proliferation I

March 12: Sustained proliferation II

*Today*

April 2: Evading growth suppression

April 9: Establishing replicative immortality

April 23: Spring break

May 7: Activating invasion and metastasis

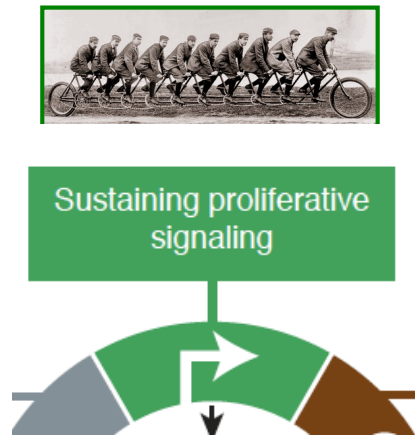
May 14: Evading apoptosis

2

# TODAY

## Hallmark capability 1: Sustained proliferative signaling

Weinberg, selected parts of chapters 5 & 6



### ☑ Receptor tyrosine kinases (RTK)

- ✓ Discovery
- ✓ Oncogenic mutations
- ✓ Therapeutic inhibitors

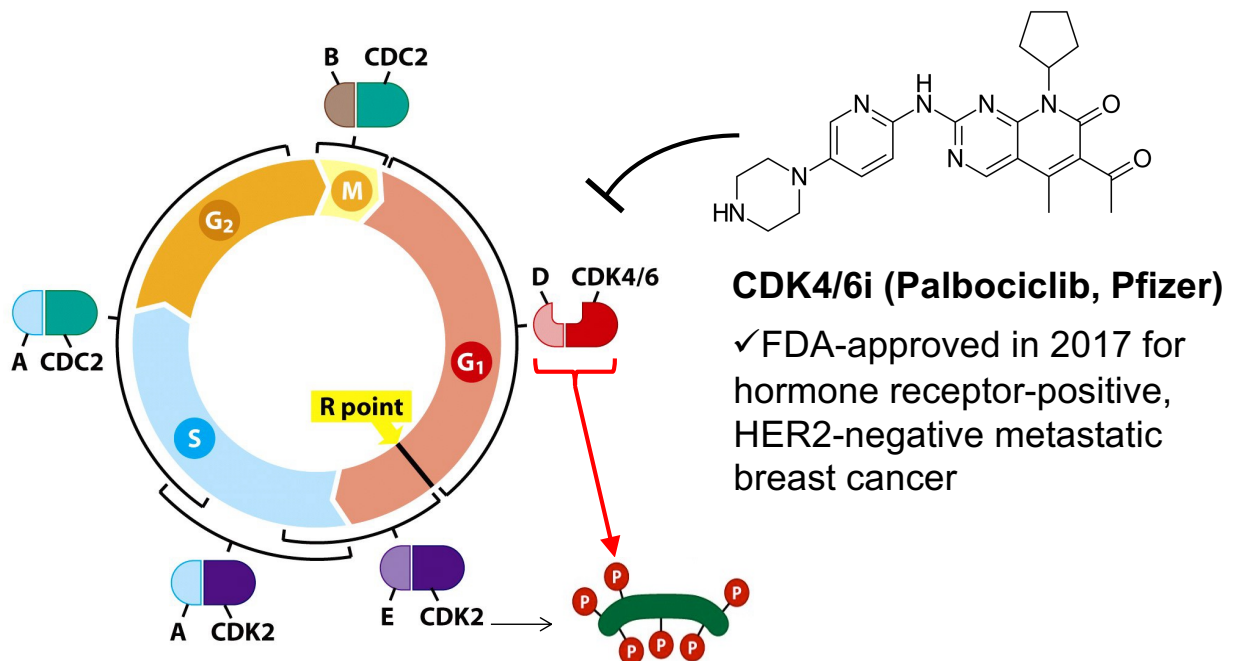
### ☑ RTK signal transduction

- ✓ Ras family of small GTPases
- ✓ Drugging oncogenic KRAS
- ✓ PI3K/Akt signaling (Ras effectors)

### ☐ JAK/STAT signaling & inhibitors

### ☐ Wnt/ $\beta$ -catenin signaling in colon cancer 3

## Why not simply block CDK4 and CDK6?

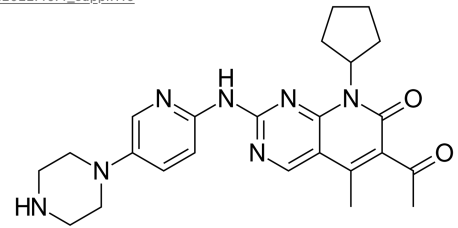
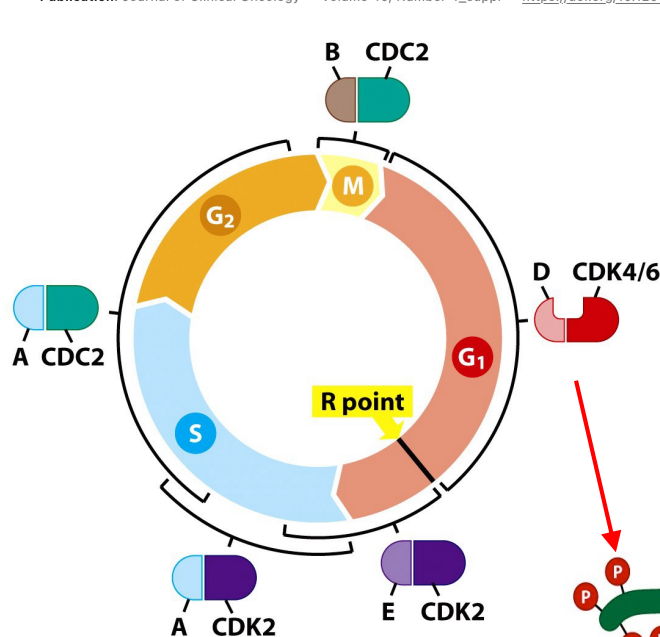


# A randomized phase II trial of MEK and CDK4/6 inhibitors versus tipiracil/trifluridine (TAS-102) in metastatic *KRAS*/*NRAS* mutant (mut) colorectal cancer (CRC).

2022

Authors: Michael Sangmin Lee, Tyler J. Zemla, Kristen Keon Ciombor, Autumn Jackson McRee, Mehmet Akce, Shaker R. Dakhil, Brandy L. Jaszewski, Fang-Shu Ou, Tanius S. Bekali-Saab, and Scott Kopetz | [AUTHORS INFO & AFFILIATIONS](#)

Publication: Journal of Clinical Oncology • Volume 40, Number 4\_suppl • [https://doi.org/10.1200/JCO.2022.40.4\\_suppl.116](https://doi.org/10.1200/JCO.2022.40.4_suppl.116)

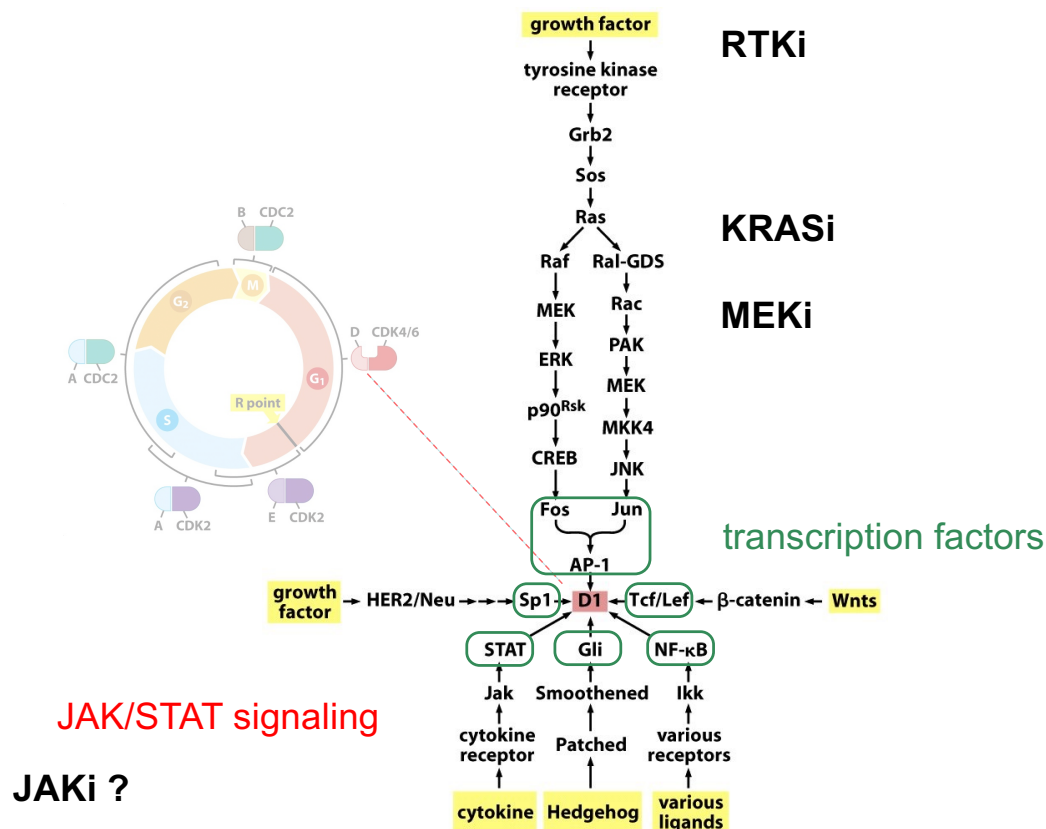


## CDK4/6i (Palbociclib, Pfizer)

...but ineffective, e.g. in metastatic colorectal cancer

5

## Targeting upstream regulators of cyclin D expression ?



We have seen:  
RTKs transphosphorylate upon ligation by homodimeric ligands

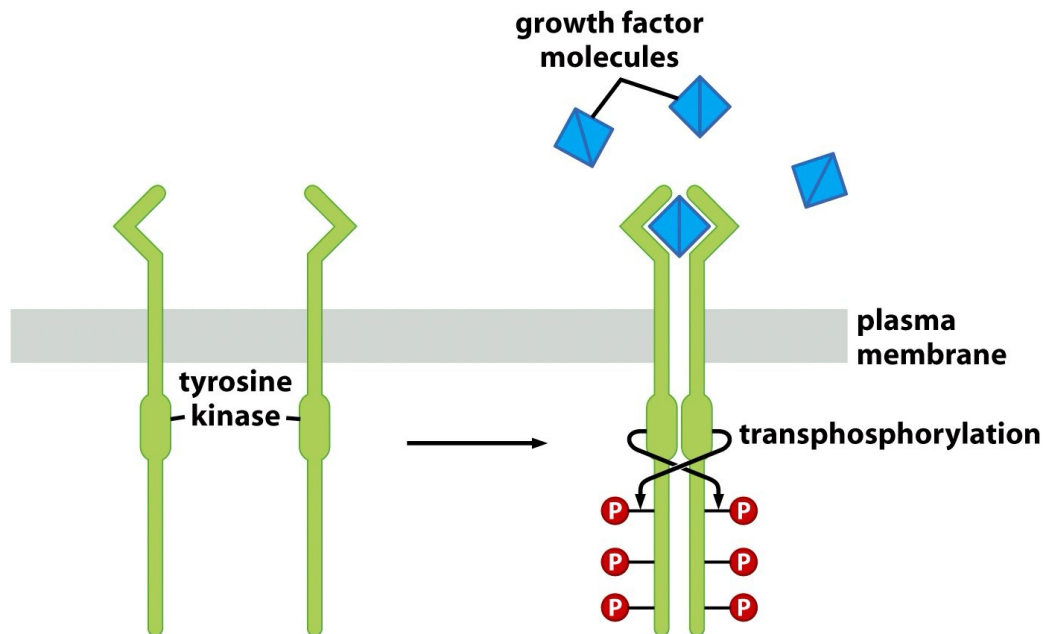
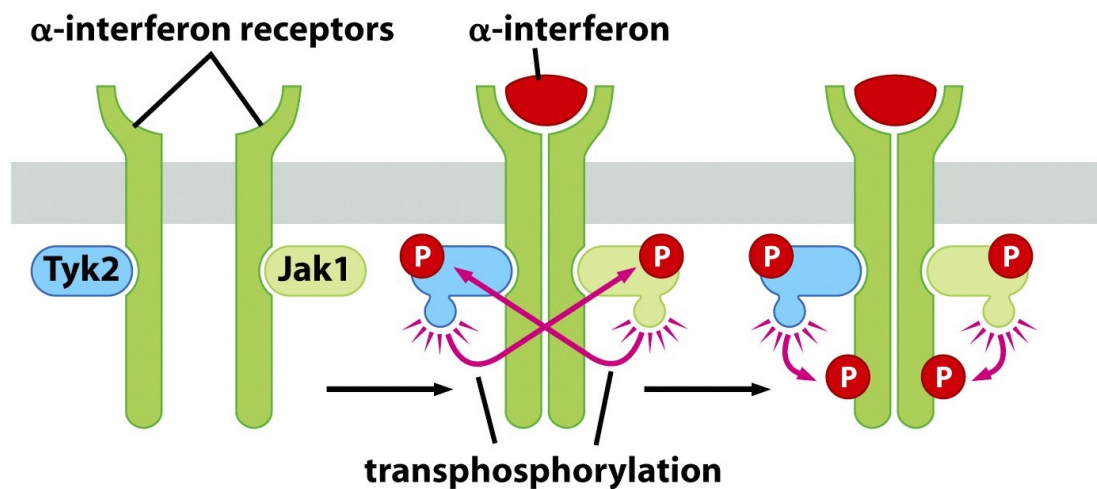


Figure 5.15 *The Biology of Cancer* (© Garland Science 2007)

A variation on the theme:  
Cytokine receptors associate with cytoplasmic Janus kinases

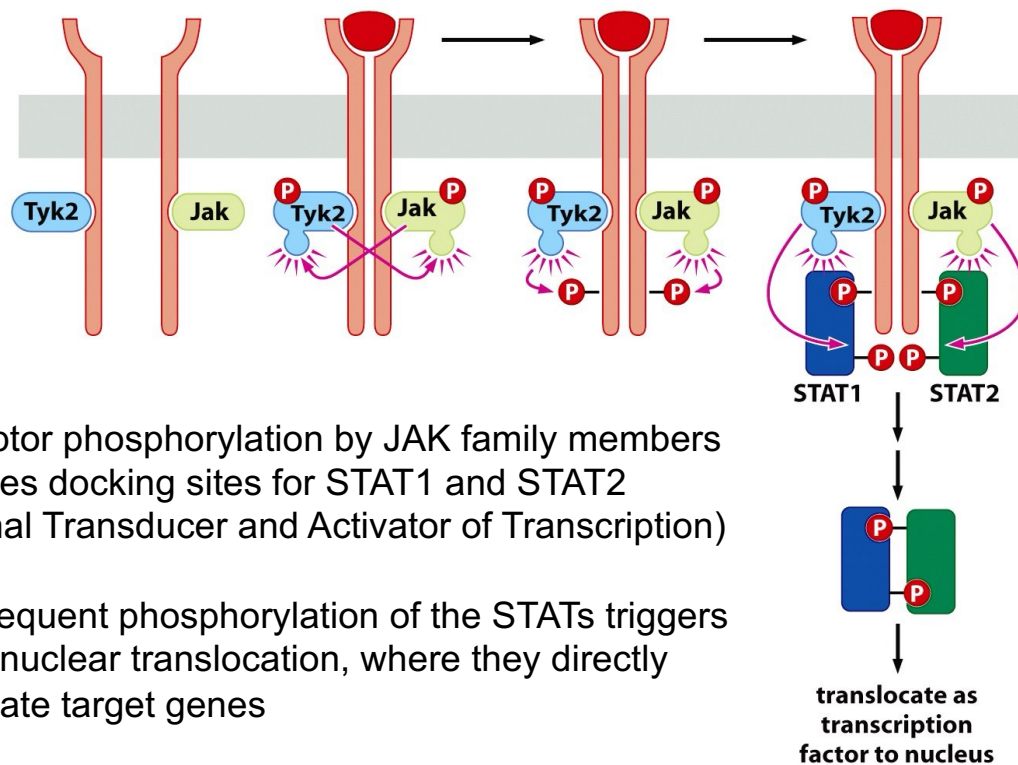


Cytokine receptors function like RTKs, except that they have “outsourced” their TK domain to a family of interacting partners, the JAKs (Tyk2, JAK2, 2 and 3)

Figure 5.20 *The Biology of Cancer* (© Garland Science 2007)



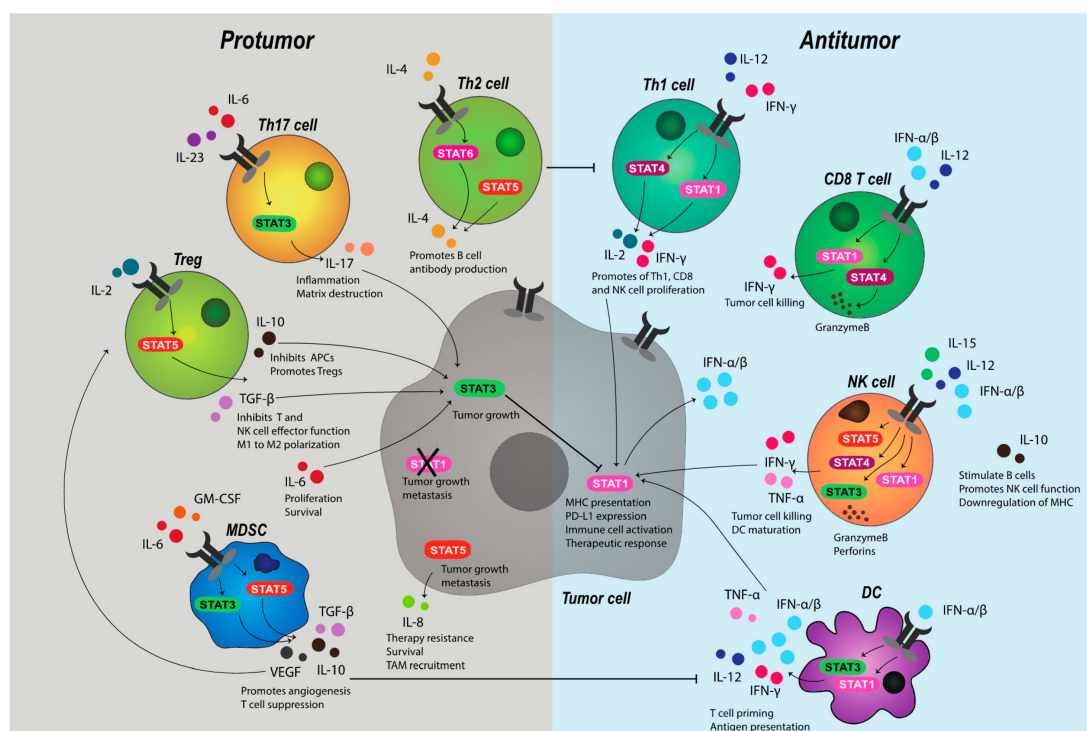
## Phosphorylation by JAKs induces nuclear translocation of STATs



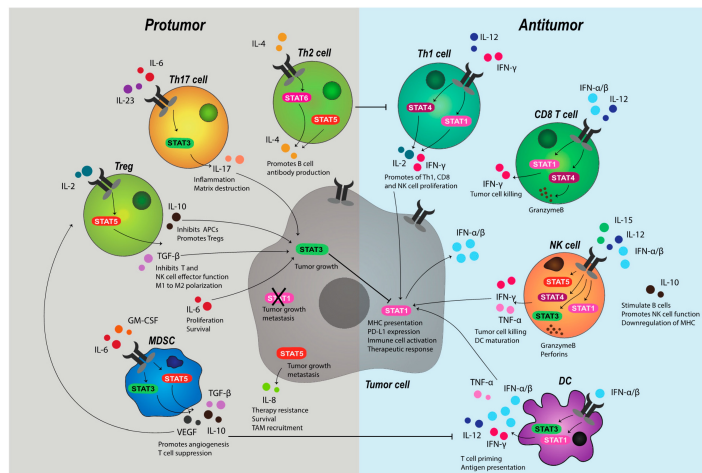
- receptor phosphorylation by JAK family members creates docking sites for STAT1 and STAT2 (Signal Transducer and Activator of Transcription)
- subsequent phosphorylation of the STATs triggers their nuclear translocation, where they directly regulate target genes

Figure 6.22 *The Biology of Cancer* (© Garland Science 2007)

## Beyond cell cycle regulation: STATs have numerous pro- and anti-tumor functions



## No clinically approved JAK inhibitors yet



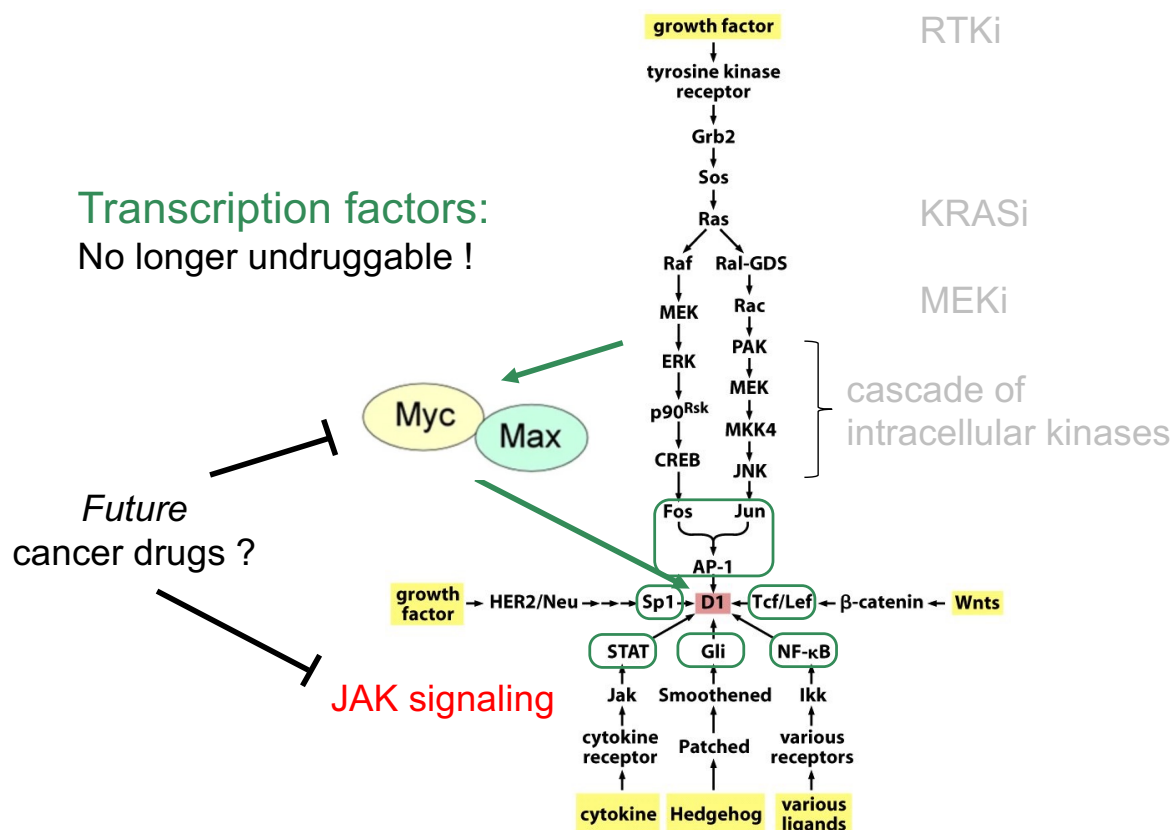
→ JAK inhibitors as anti-cancer therapeutics?

*“...JAKinibs that have shown promise in preclinical and early patient trials have failed to enter the clinic due to **high toxicity and off-target immune-suppression,...**”*

Owen et al. 2019, Cancers 11(12)

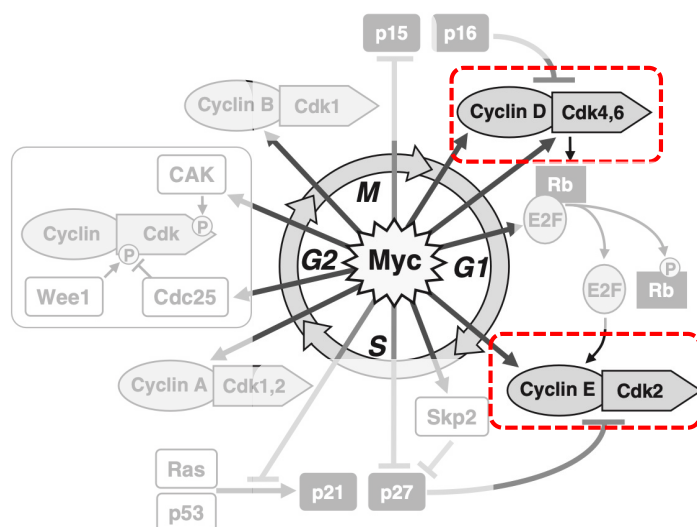
Agent	Disease(s)	Phase	Status*	ClinicalTrials.gov identifier(s)
Ruxolitinib + Chidamide	Peripheral Blood Stem Cell Transplantation	Phase 2	Recruiting	NCT05088226
				NCT04582604
Ruxolitinib + Radiation and Temozolomide	Glioma	Phase 1	Active, not recruiting	NCT03514069
Ruxolitinib + Trastuzumab	Metastatic HER2 Positive Breast Cancer	Phase 1/2	Completed	NCT02066532
Itacitinib + Everolimus	Classical Hodgkin Lymphoma	Phase 1/2	Recruiting	NCT03697408
Itacitinib + Low-Dose Ruxolitinib	Myeloproliferative Neoplasms (MPN)	Phase 2	Completed	NCT03144687
Itacitinib + Osimertinib	Non-Small Cell Lung Cancer	Phase 1/2	Active, not recruiting	NCT02917993
Itacitinib + Alemtuzumab	T-Cell Prolymphocytic Leukemia	Phase 1	Recruiting	NCT03989466
Itacitinib + Ibrutinib	Diffuse Large B-Cell Lymphoma	Phase 1/2	Completed	NCT02760485
Itacitinib + Corticosteroids	Acute Graft-versus-host disease	Phase 3	Completed	NCT03139604
Itacitinib + Gemcitabine and Nab-Paclitaxel	Pancreatic Cancer	Phase 1/2	Completed	NCT01858883
Itacitinib + Dabrafenib and Trametinib	Melanoma	Phase 1	Active, not recruiting	NCT03272464
Itacitinib + Pembrolizumab	Colorectal Cancer	Phase 1	Completed	NCT02646748
Fedratinib + Decitabine	Myeloproliferative Neoplasms (MPN)	Phase 1	Recruiting	NCT05524857
Fedratinib + Nivolumab	Myelofibrosis	Phase 2	Recruiting	NCT05393674
Decitabine + Ruxolitinib or Fedratinib	Accelerated/Blast Phase Myeloproliferative Neoplasms	Phase 2	Recruiting	NCT04282187

## Targeting alternative regulators of cell cycle genes: MYC ?



13

## Expression of cyclin D and multiple other cell cycle genes is stimulated by the MYC proto-oncogene

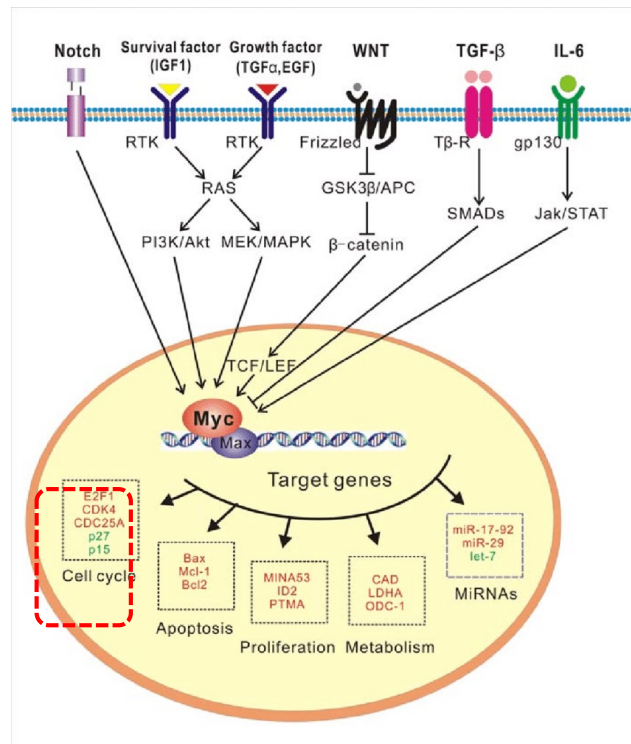


- Oncogenes: Genes that promote cancer when mutated or amplified
- “Proto-oncogenes”: Wild-type genes with the *potential* to become oncogenic upon upregulation, or upon gene amplification or mutation

## Blockade of MYC will target multiple hallmarks

### What is MYC?

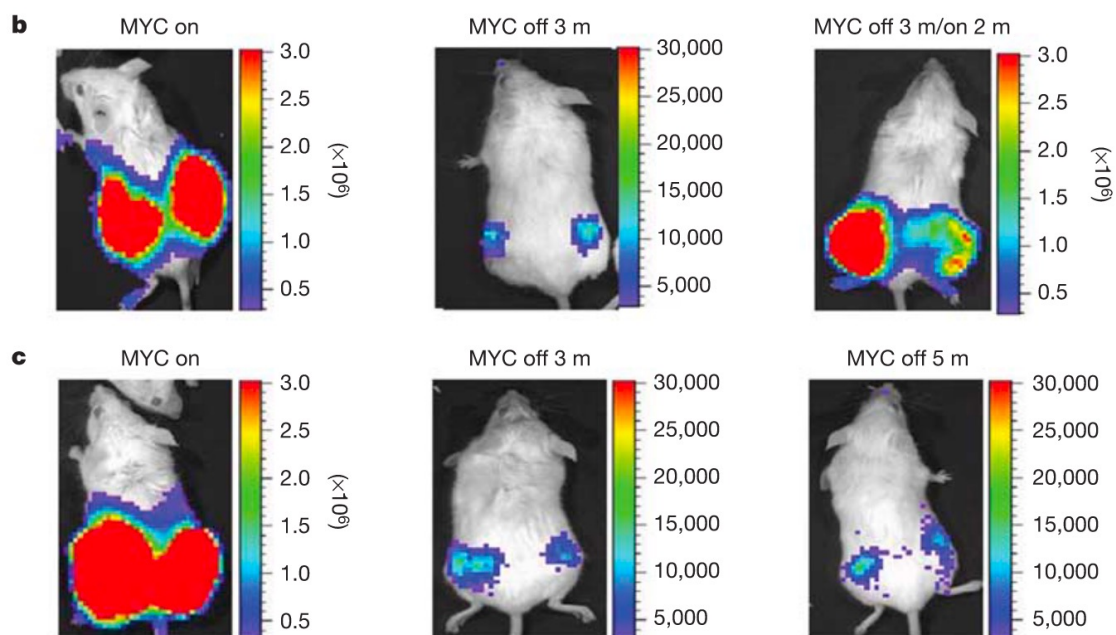
- Avian **myelocytomatosis** viral oncogene homolog (**MYC**)
- One of the four “Yamanaka factors” (cell reprogramming): Thousands of target genes
- Upregulated in most cancer types, e.g. due to altered growth factor signaling
- Promotes *multiple* cancer hallmarks, incl. proliferation



Huang et al. 2014, Current Pharmaceutical Design 20(42):6543-54

15

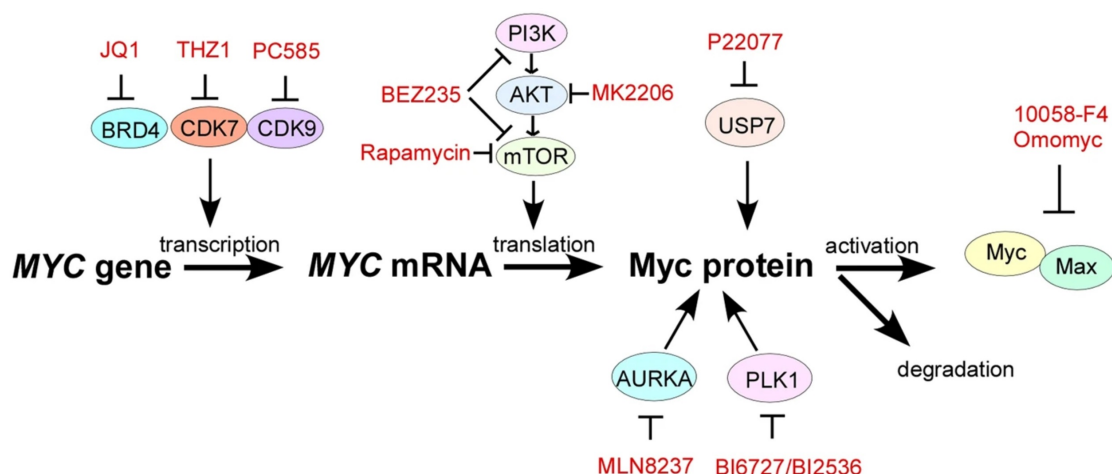
## Addition of mouse hepatocellular carcinoma to transgenic MYC overexpression



Shachaf et al. 2004, Nature 431:1112-1117

16

## Therapeutic strategies under development to target MYC



- Omomyc: A cell-penetrating miniprotein (truncated bHLH)
- Blocks binding of MYC to its obligate partner MAX
- An Omomyc transgene can eradicate cancer in multiple tissues in mouse models, regardless of their driver mutations → *huge potential* !

## MYC targeting by OMO-103 in solid tumors: a phase 1 trial

Stay tuned...

Received: 7 February 2023

Accepted: 4 January 2024

Published online: 06 February 2024

Check for updates

Elena Garralda<sup>1,7</sup>, Marie-Eve Beaulieu<sup>2,7</sup>, Víctor Moreno<sup>3</sup>,  
 Silvia Casacuberta-Serra<sup>2</sup>, Sandra Martínez-Martin<sup>2</sup>, Laia Foradada<sup>2</sup>,  
 Guzman Alonso<sup>1</sup>, Daniel Massó-Vallés<sup>2</sup>, Sergio López-Estévez<sup>2</sup>, Toni Jauset<sup>2</sup>,  
 Elena Corral de la Fuente<sup>4</sup>, Bernard Doger<sup>3</sup>, Tatiana Hernández<sup>3</sup>,  
 Raquel Perez-Lopez<sup>1</sup>, Oriol Arqués<sup>1</sup>, Virginia Castillo Cano<sup>2</sup>, Josefa Morales<sup>2</sup>,  
 Jonathan R. Whitfield<sup>1</sup>, Manuela Niewel<sup>1</sup>, Laura Soucek<sup>1,2,5,6</sup> &  
 Emiliano Calvo<sup>4</sup>

A dose-escalation phase 1 study in all-comers solid tumors:

- ✓ safety and preliminary signs of drug activity
- ✓ target engagement
- ✓ biomarkers predicting response



# TODAY

## Hallmark capability 1: Sustained proliferative signaling

Weinberg, selected parts of chapters 5 & 6



☑ Receptor tyrosine kinases (RTK)

☑ RTK signal transduction

☑ JAK/STAT signaling

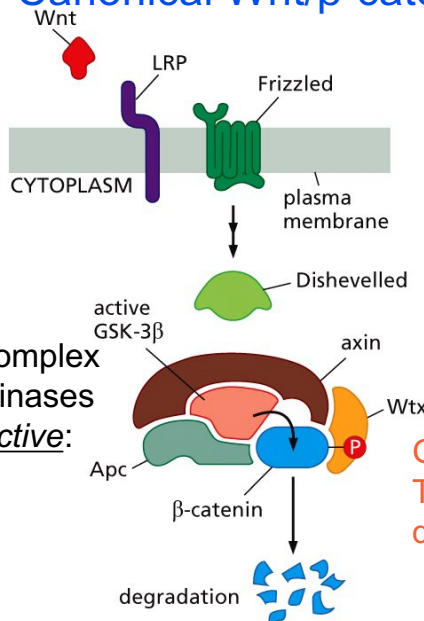
☐ Wnt/ $\beta$ -catenin signaling

- Role in intestinal stem cells & in colon cancer
- Target genes in stem cells include MYC
- Cancer cell differentiation therapy

19

## Canonical Wnt/ $\beta$ -catenin signaling pathway

Wnt OFF



Essential to memorize !

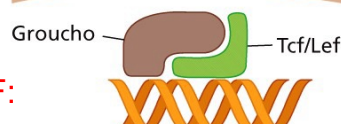
$\beta$ -catenin destruction complex of APC and kinases (GSK3 $\beta$ ) is active:

Glycogen synthase kinase 3  $\beta$ :  
Targets  $\beta$ -catenin for proteasomal degradation by phosphorylating it

degradation

nuclear membrane

TCF target genes are OFF:

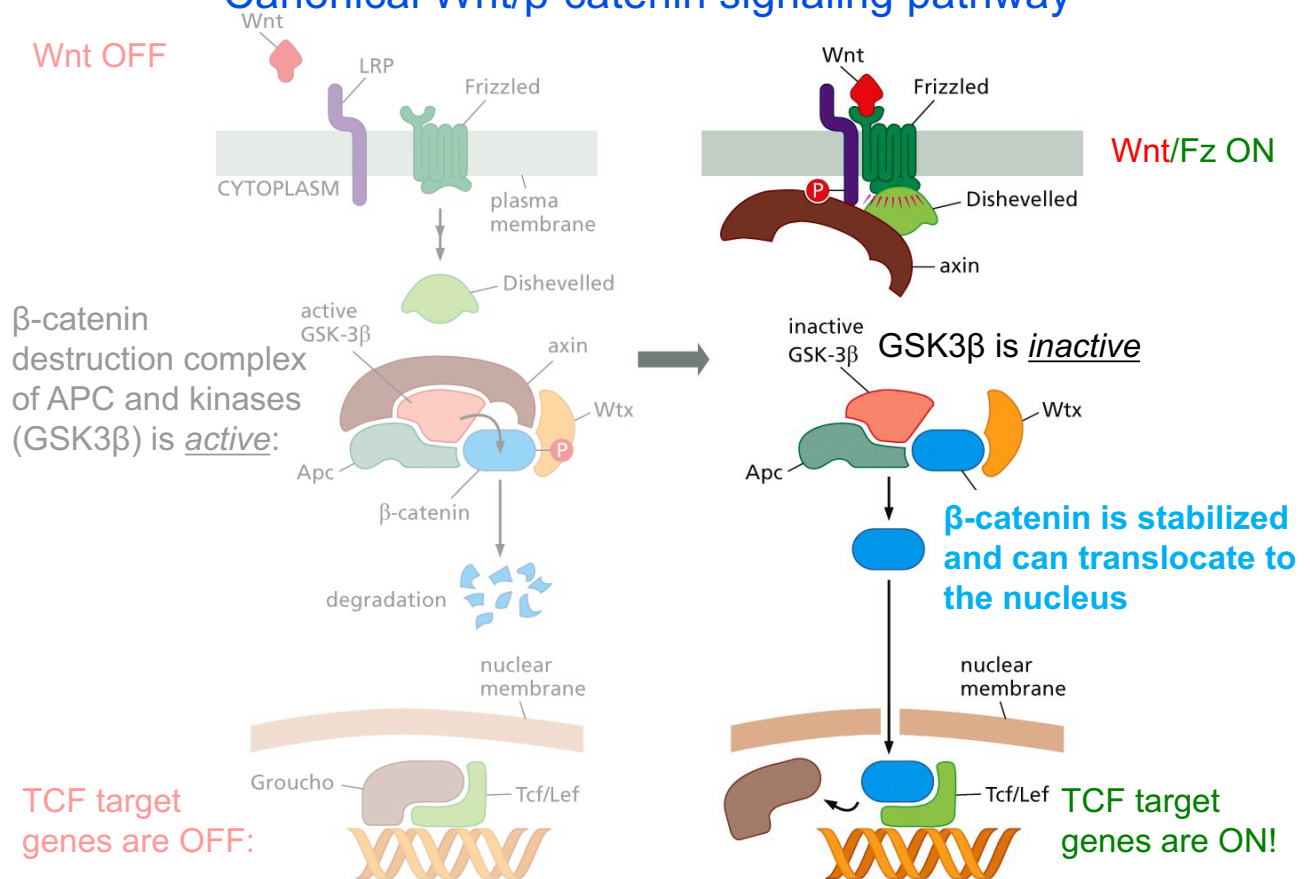


T cell factor (TCF) proteins  
(aka Lymphoid Enhancer Binding Factor)

20



## Canonical Wnt/ $\beta$ -catenin signaling pathway

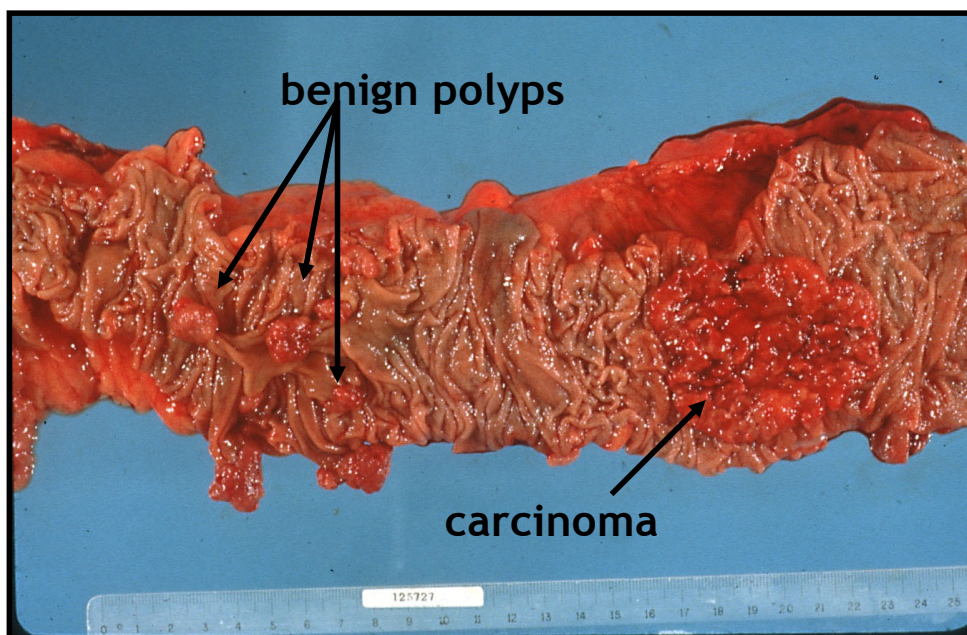


## Familial Adenomatous Polyposis (FAP)

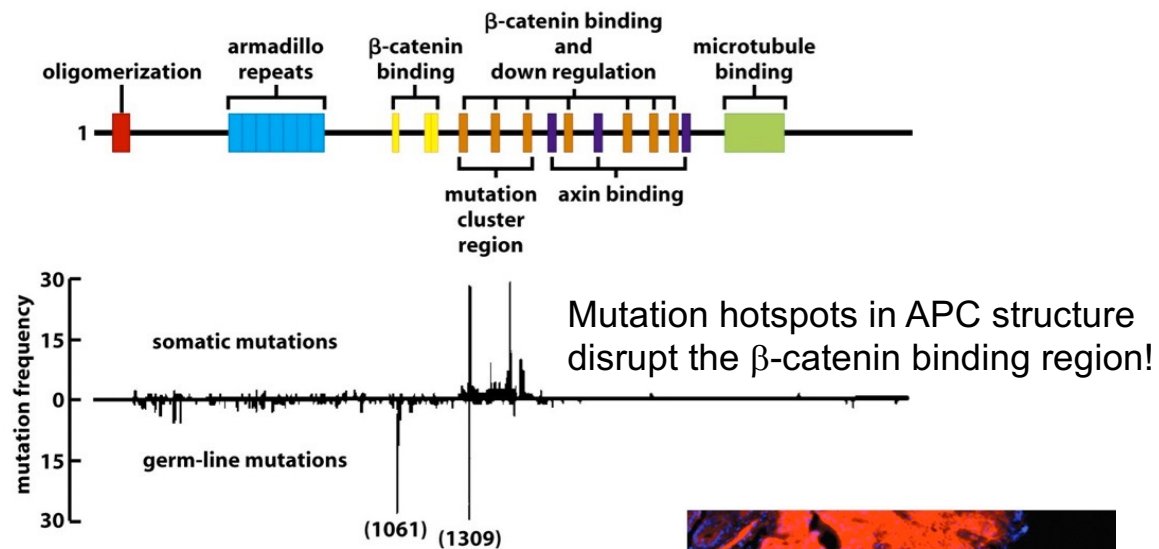
**Adenoma:** a benign tumor of glandular origin

**Polyposis:** hundreds of benign small polyps

**>90% risk for colorectal carcinoma (CRC) before age of 50y**



## Mutations in Adenomatous Polyposis Coli (APC) protein



**Red:**  $\beta$ -catenin in colon of  $Apc^{Min/+}$  mice  
**Blue:** nuclei of normal cells

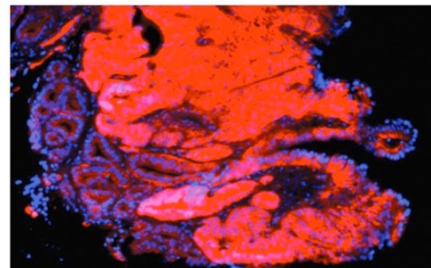
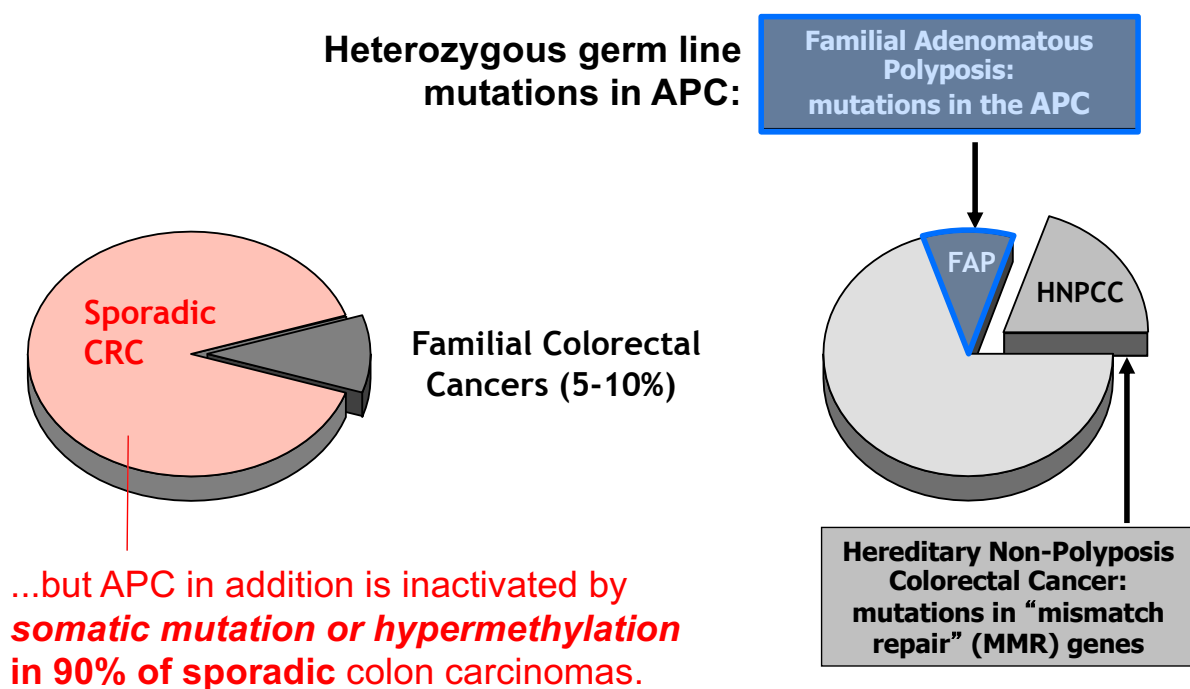


Figure 7.22+25 The Biology of Cancer (© Garland Science 2007)

23

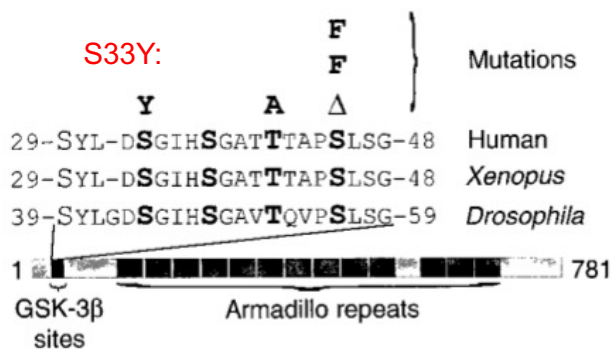
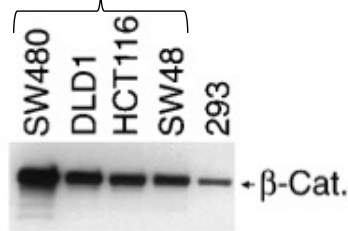
## Familial Adenomatous Polyposis (FAP) accounts for (only) 1% of all hereditary colorectal cancers...



24

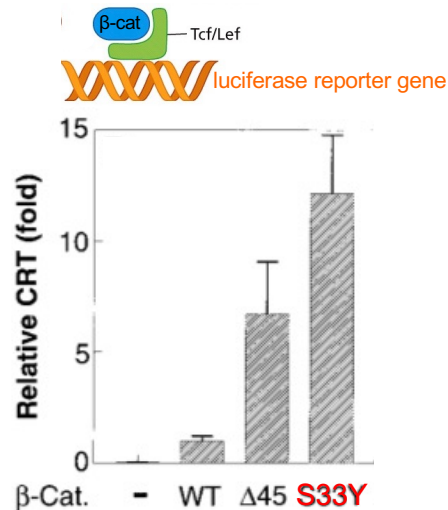
In some APC<sup>WT</sup> colorectal cancers and melanoma,  $\beta$ -catenin itself is mutated at GSK3 $\beta$  phosphorylation sites

Colorectal carcinoma (CRC) cell lines:



Morin et al. 1997 Science

e.g. S33Y mutation or S45 deletion stabilizes  $\beta$ -catenin in SW480 colon carcinoma cells and potentiates the induction of a Tcf reporter gene compared to wild-type:



25

## Concept: Oncogenes and tumor suppressor genes

function	type of alteration <sup>1</sup>	examples
oncogene	gain-of-function (GoF)	EGFR RAS $\beta$ -catenin
tumor suppressor	loss-of-function (LoF)	APC NF-1 PTEN
		} not yet covered

<sup>1</sup> can include genetic mutations or epigenetic alterations

The relative impact of such alterations on a given cancer type depends on the role of the affected pathway in the corresponding normal tissue (example: WNT/ $\beta$ -catenin signaling).

26

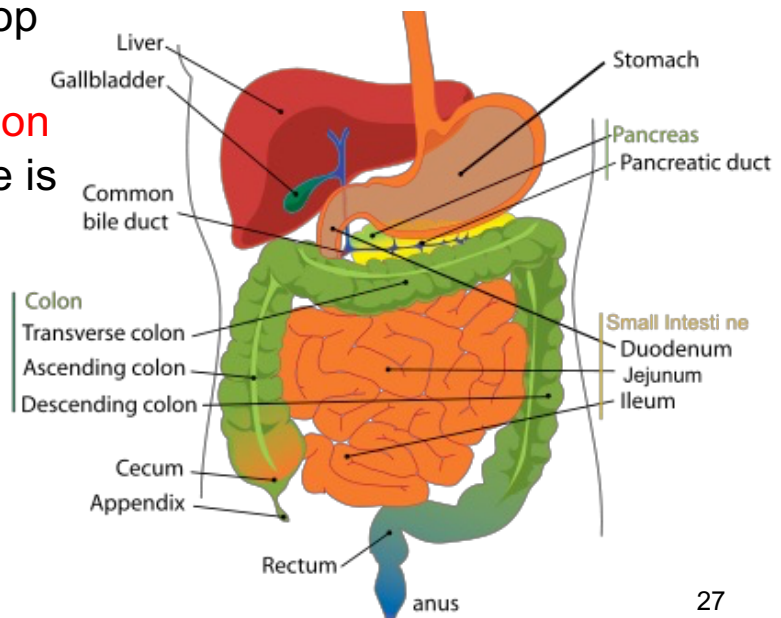


## Relative contribution of different signaling pathways to cancer: Dependent on the tissue?

- FAP patients are also at risk for a broad spectrum of **extra-colonic manifestations**

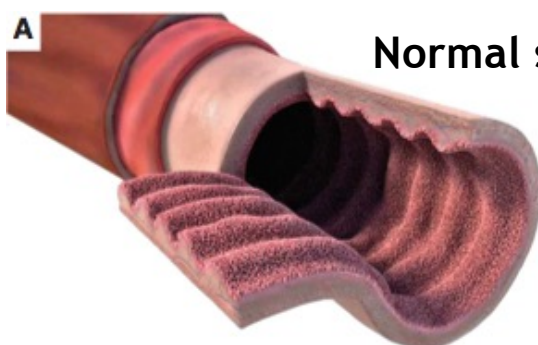
- Predisposition to develop adenomatous polyps is most pronounced in **colon and rectum** (penetrance is close to 100% already <30 years after birth)

- Why is hyperactive  $\beta$ -catenin most oncogenic in the colon (human) or intestine (mouse) ?

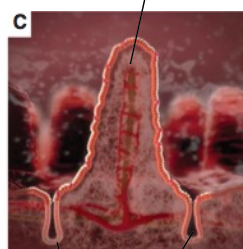
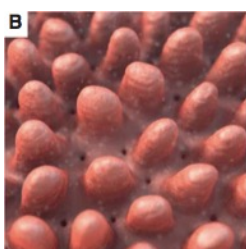


27

## Crypt-villus architecture of intestine and colon



Normal small intestinal architecture

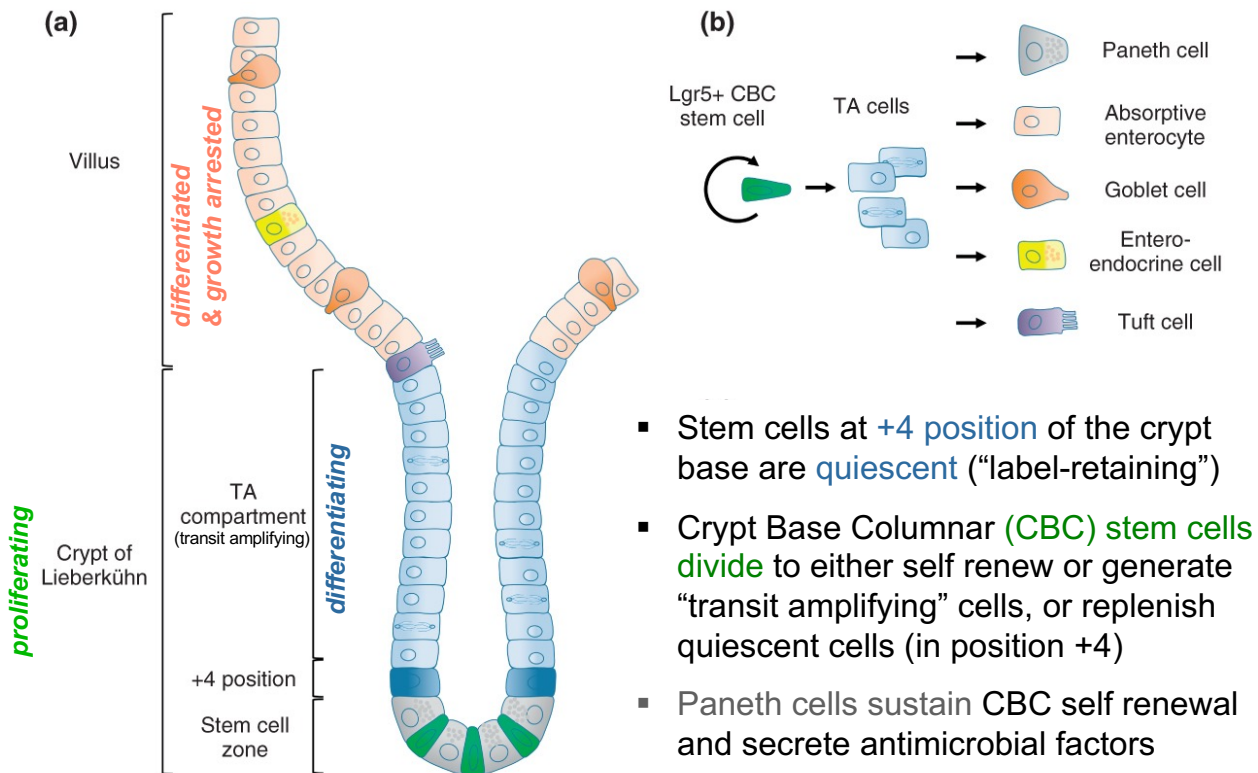


crypts of Lieberkühn

## Adenomatous polyp:



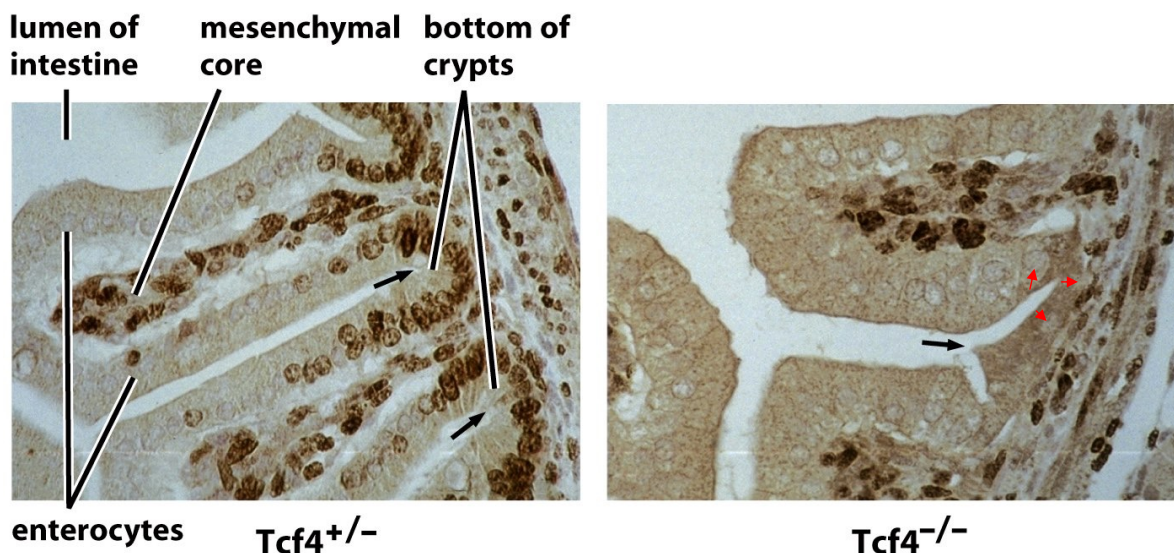
## Tissue homeostasis in normal intestine



29

P Rizk et al. WIREs Syst Biol Med 2012. Copyright © 2012 Wiley Periodicals, Inc.

## Loss of Wnt/ $\beta$ -catenin/TCF signaling depletes crypt stem cells

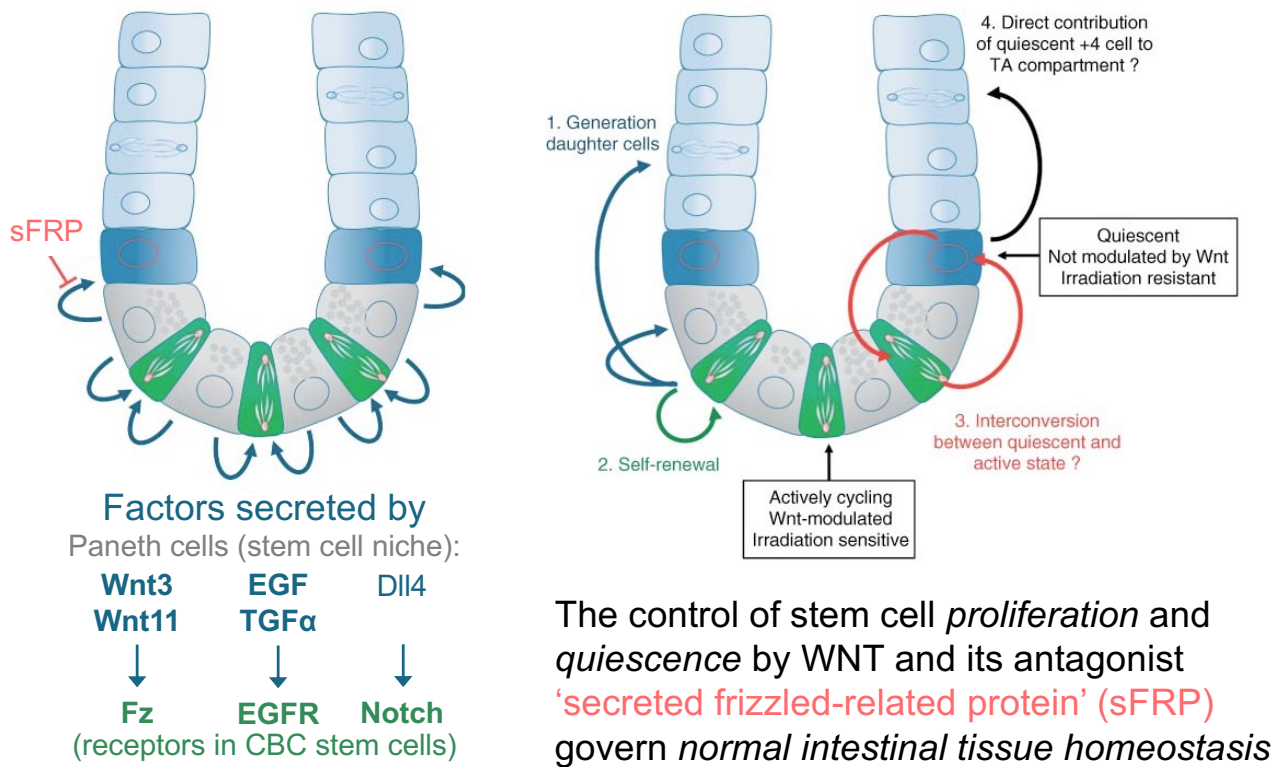


- ⇒ immunostaining of the S-phase marker protein Ki67 reveals cell proliferation in wild-type crypts
- ⇒ Loss of Ki67 staining and progressive loss of enterocytes in Tcf4 KO revealed that canonical Wnt signaling is essential for crypt stem cell proliferation

30

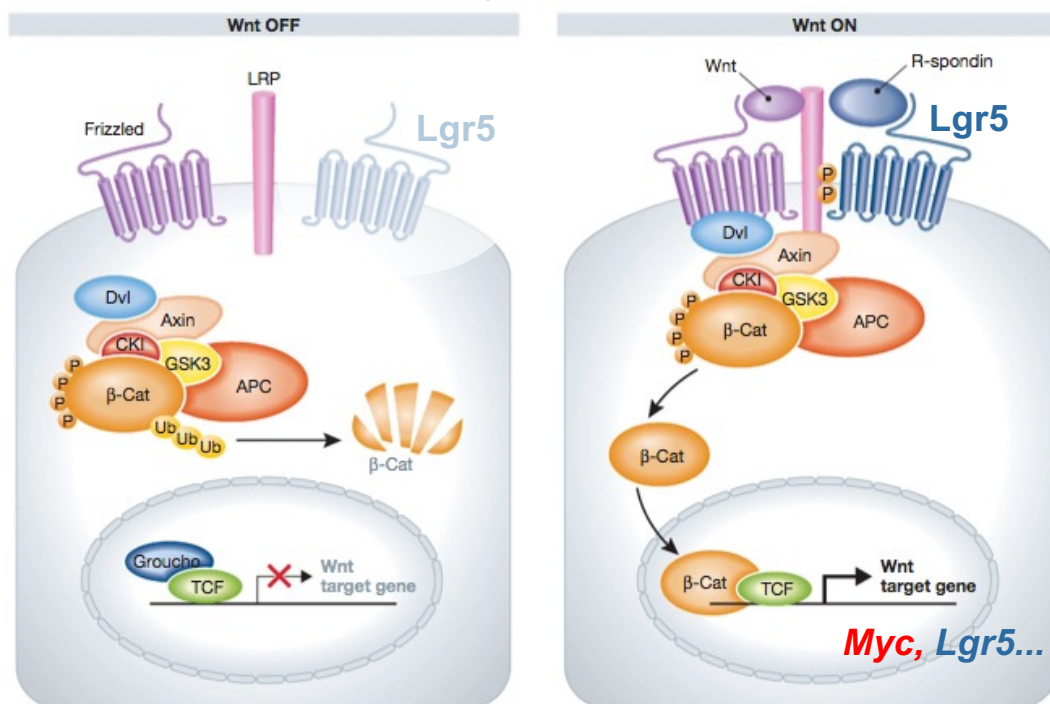


## CBC stem cells are wired to respond to WNT/ $\beta$ -catenin already in healthy crypts



P Rizk et al. WIREs Syst Biol Med 2012. Copyright © 2012 Wiley Periodicals, Inc.

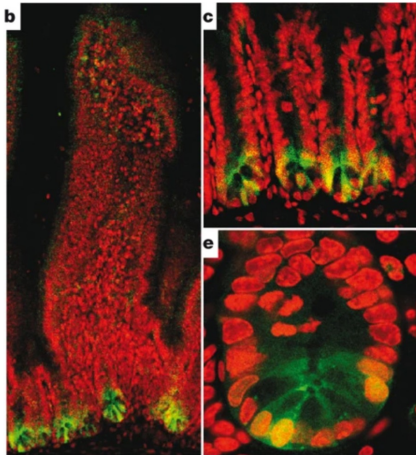
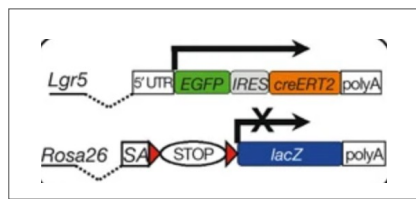
## Leucine-rich repeat containing G protein-coupled receptors (Lgr)



- Binding of Rspo to Lgr5 blocks Fzd endocytosis into lysosomes.
- *Positive feedback* by Lgr5 is essential for *sustained* Wnt/Fz signaling

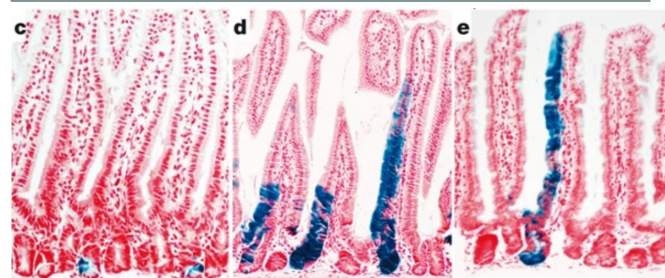
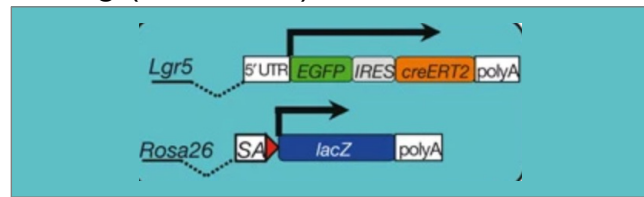


## Genetic lineage tracing of the CBC progeny using *Lgr5*<sup>CreIRESseGFP</sup>



→ *Lgr5* expression marks CBC cells

+ drug (tamoxifen) to activate CreERT2



1 day

5 days

60 days

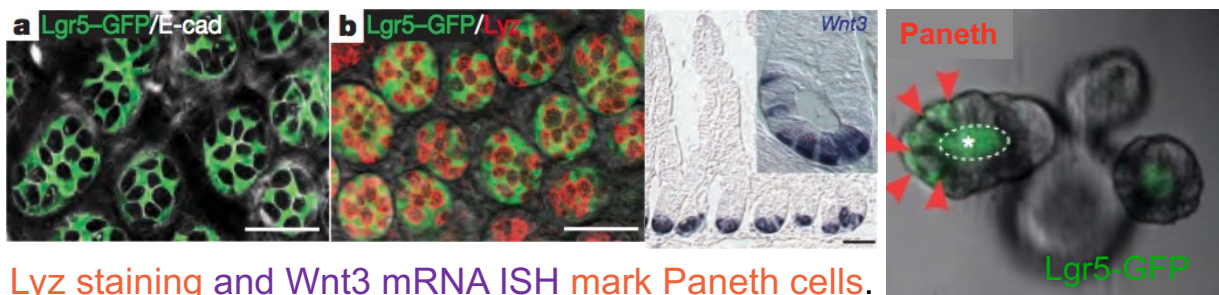
tamoxifen

→ Excision of lox-stop-lox cassette activates the histological marker lacZ (blue staining)

33

Barker et al. 2007, Nature 449:1003-1007

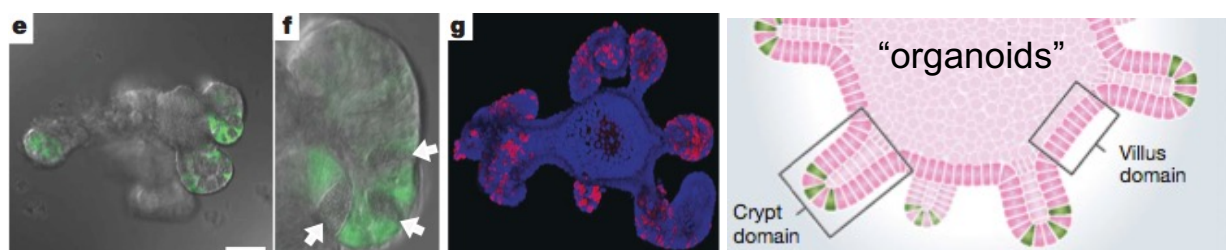
## Sustained Wnt signaling maintains CBC proliferation *in vitro*



**Lyz staining and Wnt3 mRNA ISH mark Paneth cells.**

***Lgr5*::GFP transgene marks Wnt-receiving CBC stem cells.**

Paneth cells sustain growth of CBC-derived organoids upon coculture.



Recombinant Wnt3a (+EGF +Noggin +Notch agonist) can substitute for Paneth cells to maintain **CBC proliferation (EdU incorporation, magenta)**

34

Sato et al. 2009 Nature; Sato et al. 2011 Nature

## TODAY

### Hallmark capability 1: Sustained proliferative signaling

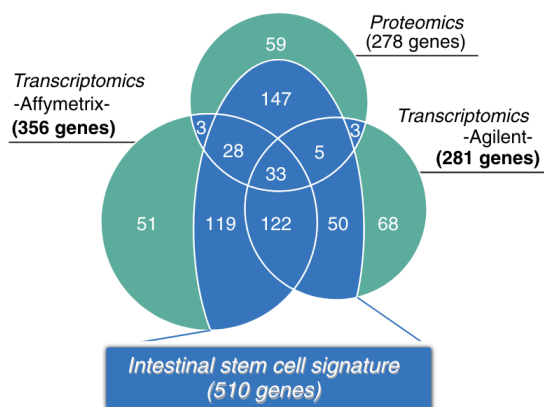
Weinberg, selected parts of chapters 5 & 6



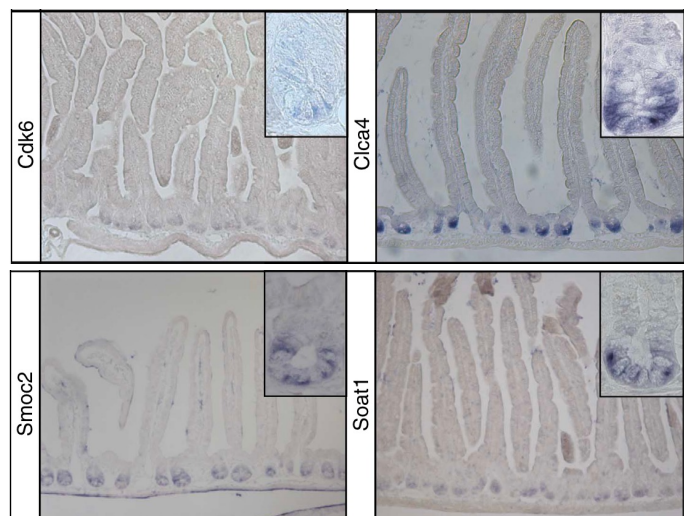
- ☑ Receptor tyrosine kinases (RTK)
- ☑ RTK signal transduction
- ☑ JAK/STAT signaling
- ☐ Wnt/ $\beta$ -catenin signaling
  - ✓ Role in intestinal stem cells & in colon cancer
  - Target genes in stem cells include MYC
  - Cancer cell differentiation therapy

35

## Transcriptome analysis of intestinal stem cells

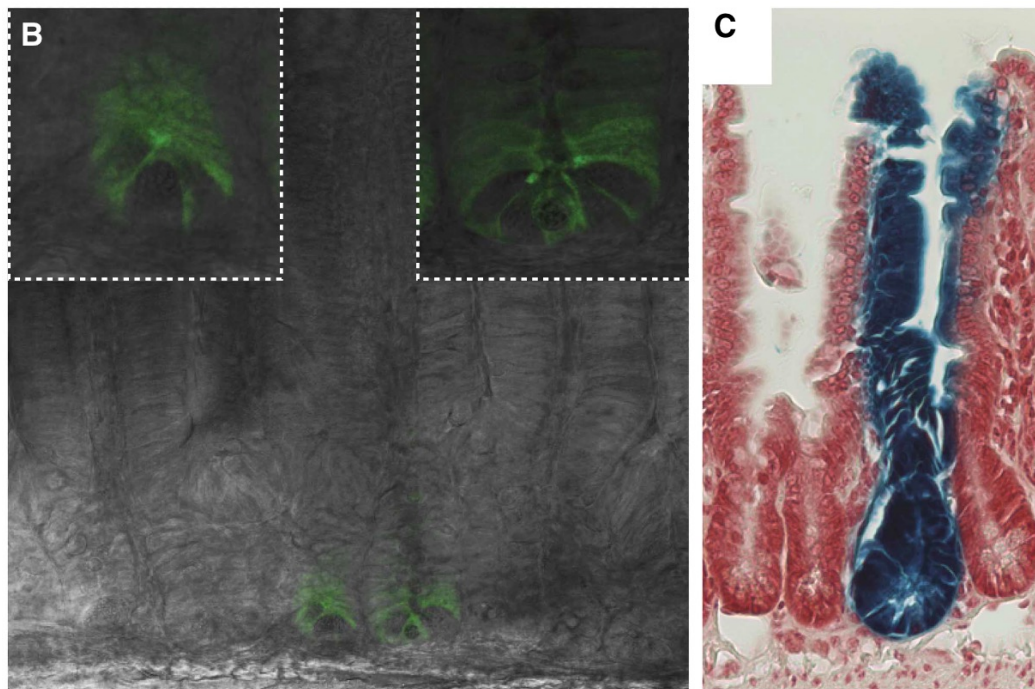


### Validation by mRNA in situ hybridization



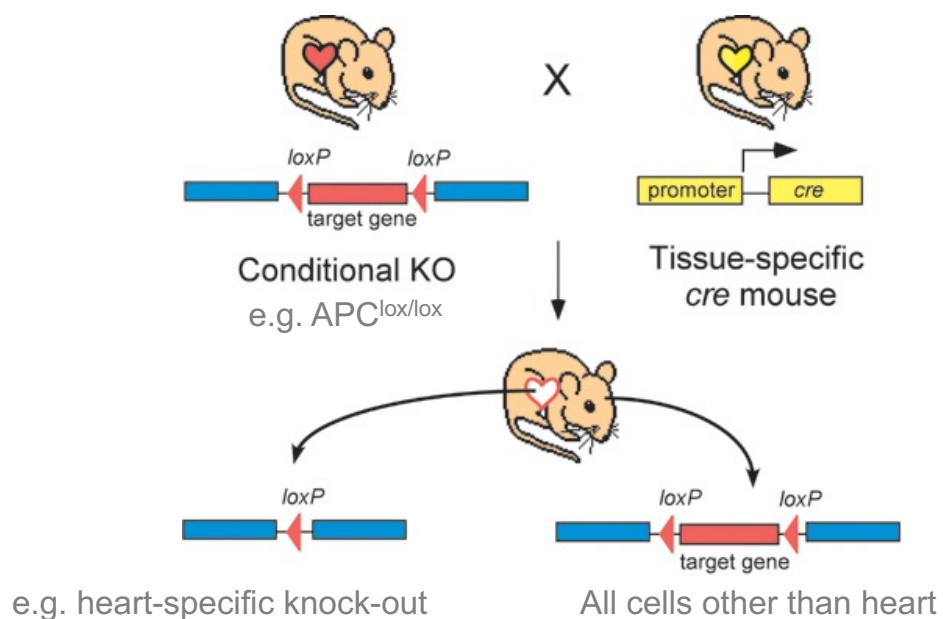
## Genetic lineage tracing of normal intestinal stem cell progeny using lox-stop-lox Rosa26-lacZ reporter mice

Smoc2-EGFP-ires-CreERT2/R26RLacZ mice



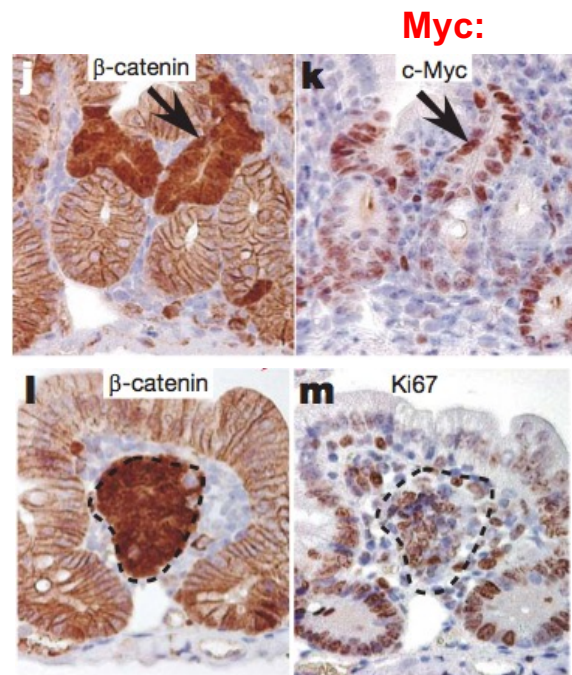
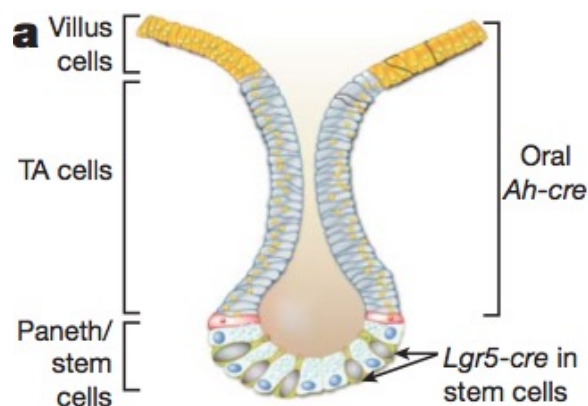
Muñoz et al. 2012, Embo J 31:3079-3091

## Mouse tumor models: Cell/tissue-specific gene *deletion* using the Cre/lox technique





## Identification of Lgr5+ CBC as tumor-initiating cells



Lgr5-CreERT2; APC<sup>lox/lox</sup> mice:

→ **"Constitutive"** β-catenin signaling in long-lived Lgr5+ CBC induces the c-Myc oncogene → Proliferation (Ki67)

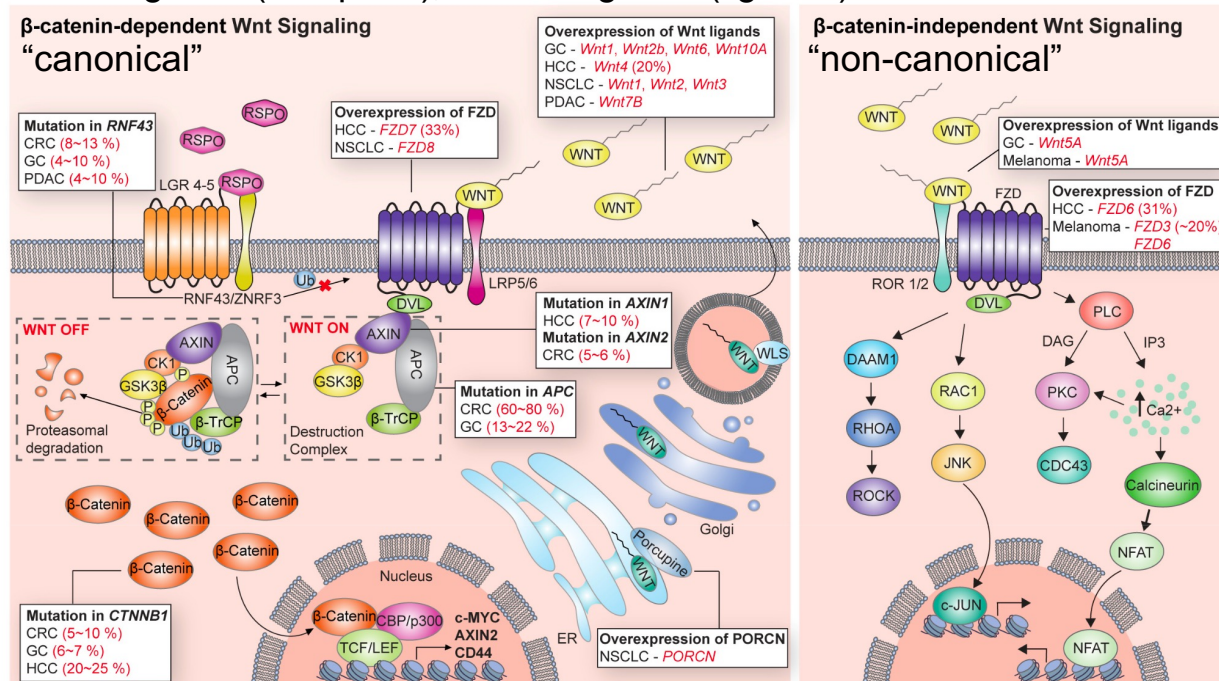
By contrast, APC deletion by Ah-Cre in TA cells rarely induces adenomas

39

Barker et al. 2009 Nature

## Overview of WNT pathway alterations by cancer type

10 FZD genes (receptors), 19 WNT genes (ligands):



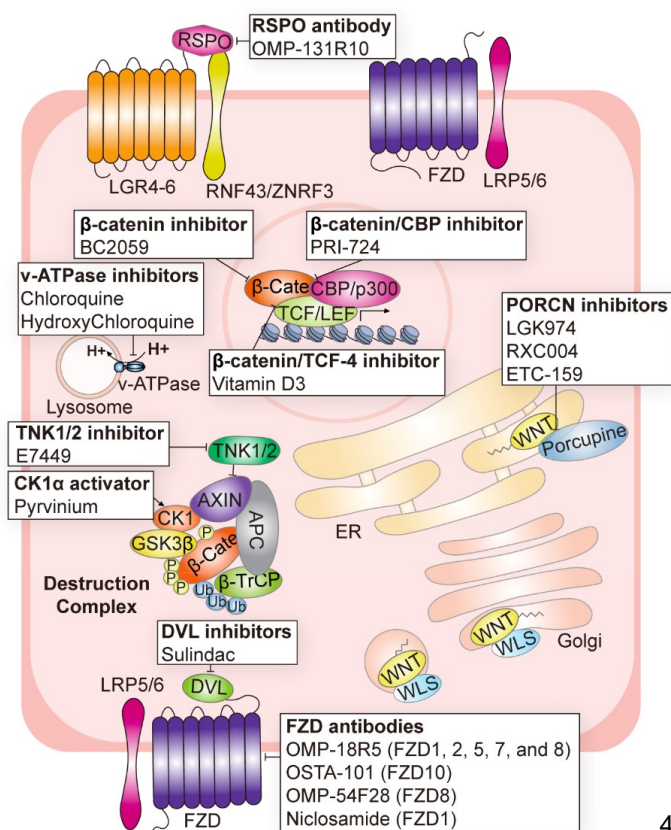
Not intended for memorization !

## WNT pathway-targeting compounds in clinical trials

**Several drugs in clinical trials, but still no FDA-approved WNT pathway inhibitor so far !**

Major obstacle:

Side effects due to essential roles of Wnt signaling in stem cells and tissue homeostasis.

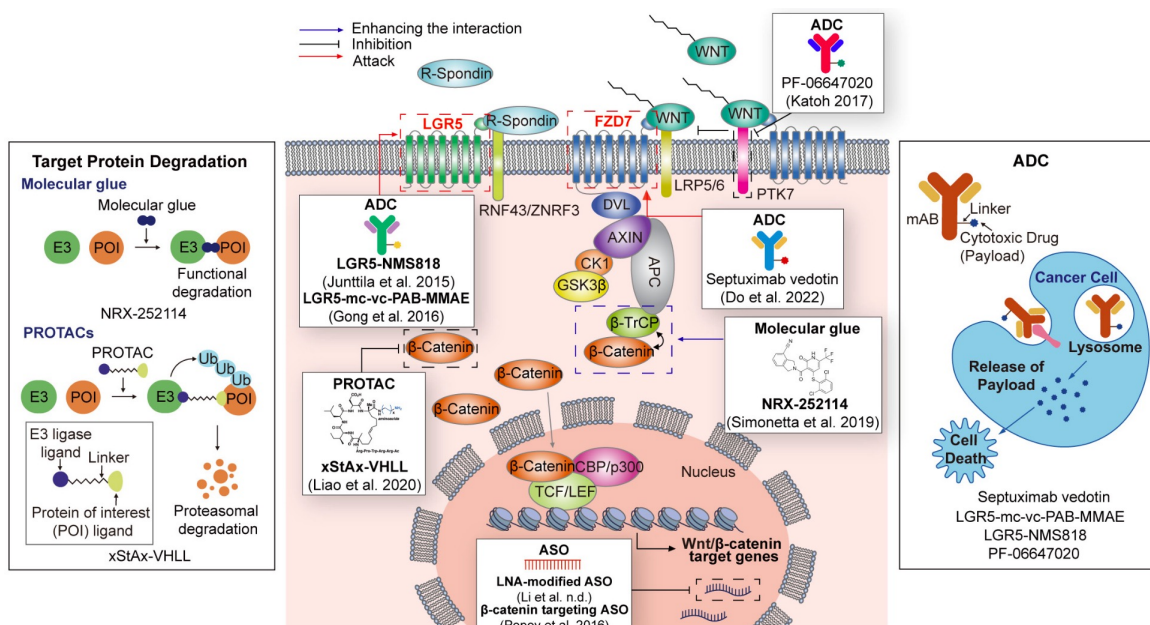


Park et al. 2023, Cells 12(8):1110

41

## The latest wave of WNT-targeting strategies

- ADC: Antibody drug-conjugates
- Molecular glues
- PROTAC: PROteolysis TArgeting Chimera (a bifunctional molecule)



Park et al. 2023, Cells 12(8):1110

42

## Mono- and polyubiquitination involves isopeptide bonds

Ub monomer:

- 76 amino acids; 7 Lys residues
- **K48**: Attach next Ub (to trigger **degradation**)
- **K63** ubiquitination: other functions

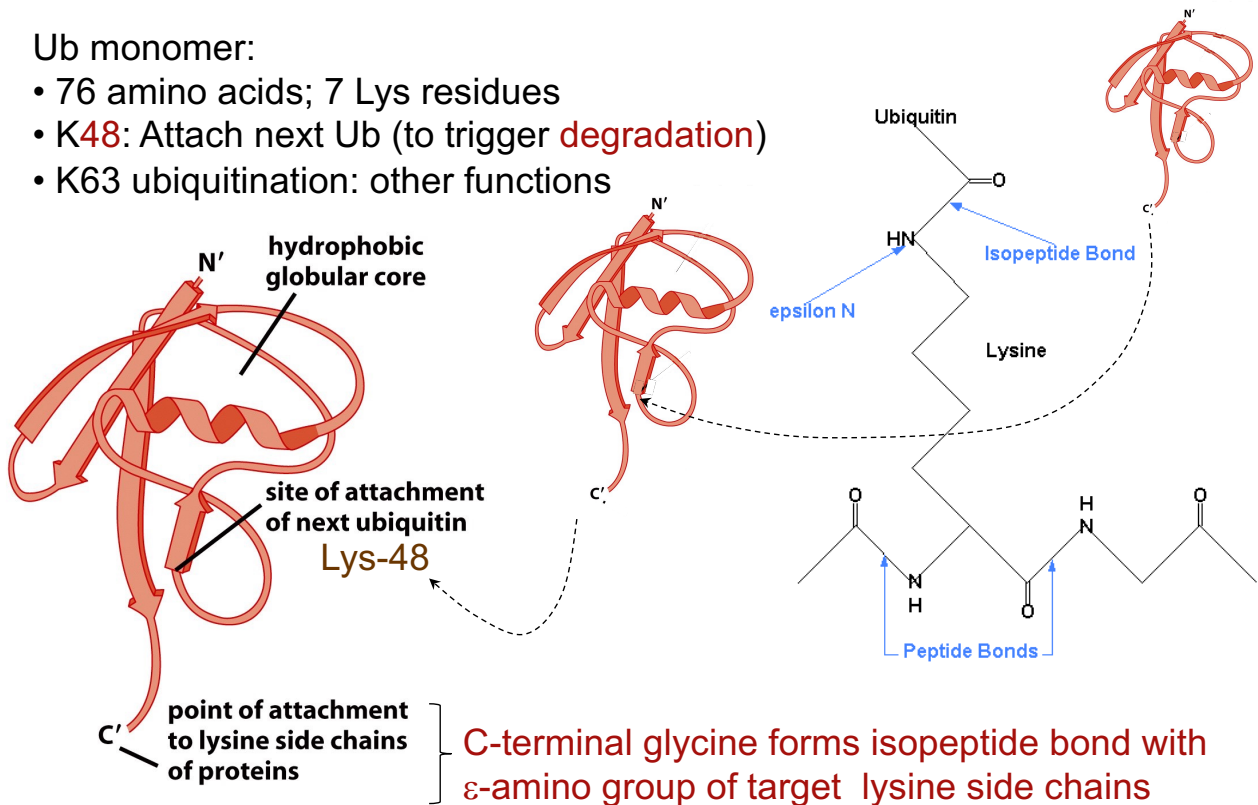
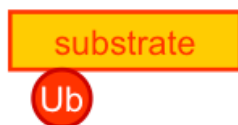


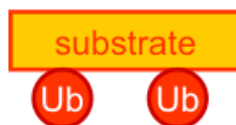
Figure 7.26b *The Biology of Cancer* (© Garland Science 2007)

## Different types of ubiquitination

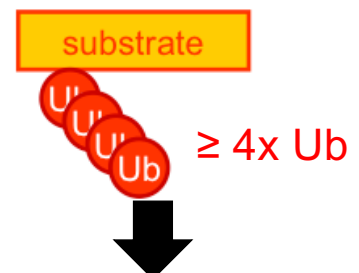
### MONO-Ub



### MULTI-Ub



### POLY-Ub



Various effects:

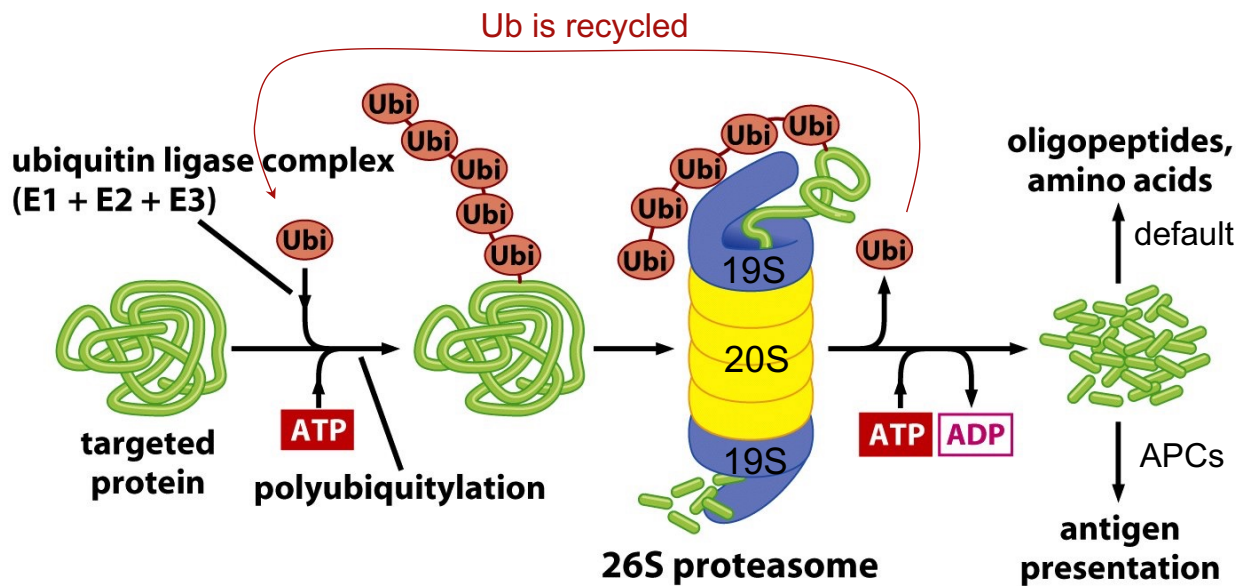
- can change protein conformation
- mediates **association to Ub-binding motif (UBM)-containing proteins** such as Hrs
- triggers **endocytosis of RTKs** & other cell surface receptors to target them to **lysosomes**

**Degradation by 26S proteasome**  
Cyclins,  $\beta$ -catenin, TP53, SMADs, ...

**Or (rarely): Proteolytic processing**  
(e.g. NF- $\kappa$ B)



## K48 polyubiquitin marks proteins for proteasomal degradation

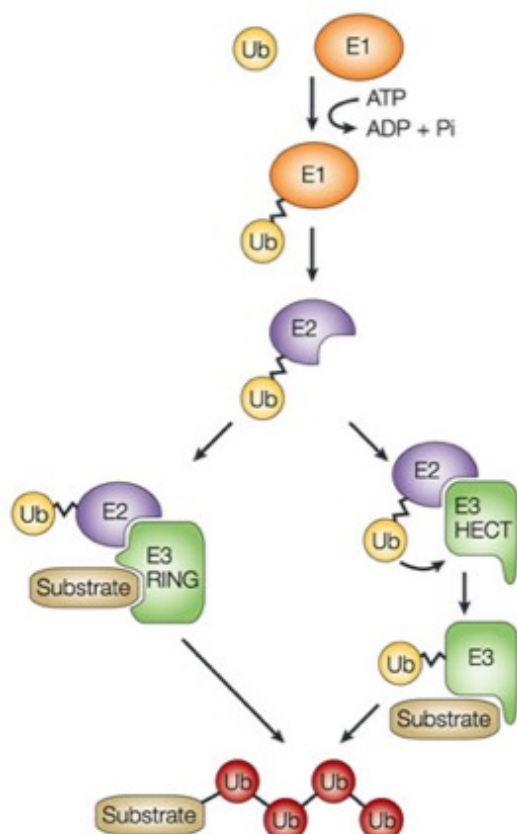


ATP-dependent ubiquitination

19S: multiple regulatory subunits; ATP-dependent unfolding of target proteins  
20S: several proteolytic subunits

Figure 7.26a *The Biology of Cancer* (© Garland Science 2007)

## Ubiquitination is mediated by specific Ub ligases



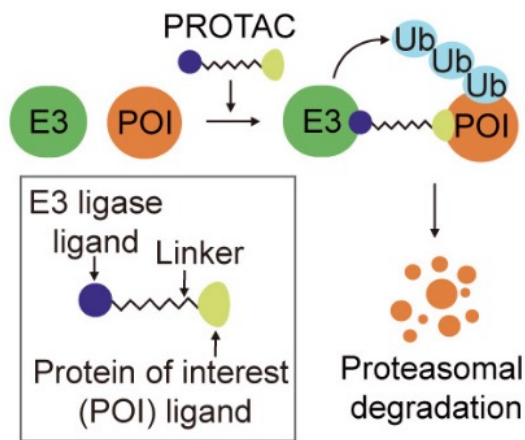
**E1: Activation of the C-terminus of ubiquitin (thioester bond)**

approx. 20 E2 ligases

**> 500 substrate-specific E3 ligases, two classes:**

a) RING domain (**adaptor**)  
b) HECT domain (**enzyme**)  
=> substrate specificity

## PROteolysis TArgeting Chimera (a bifunctional molecule)



### Goal & strategy:

Target your protein of interest (POI) for proteasomal degradation

...by connecting it to a specific "E3 Ub ligase"

...in this case via a *linker* that contains a specific E3-binding peptide ("ligand")

Or even *without* a ligand using a "molecular glue" that *directly* links the POI to its own known E3 ligase: **See today's exercise, question 5.**

47

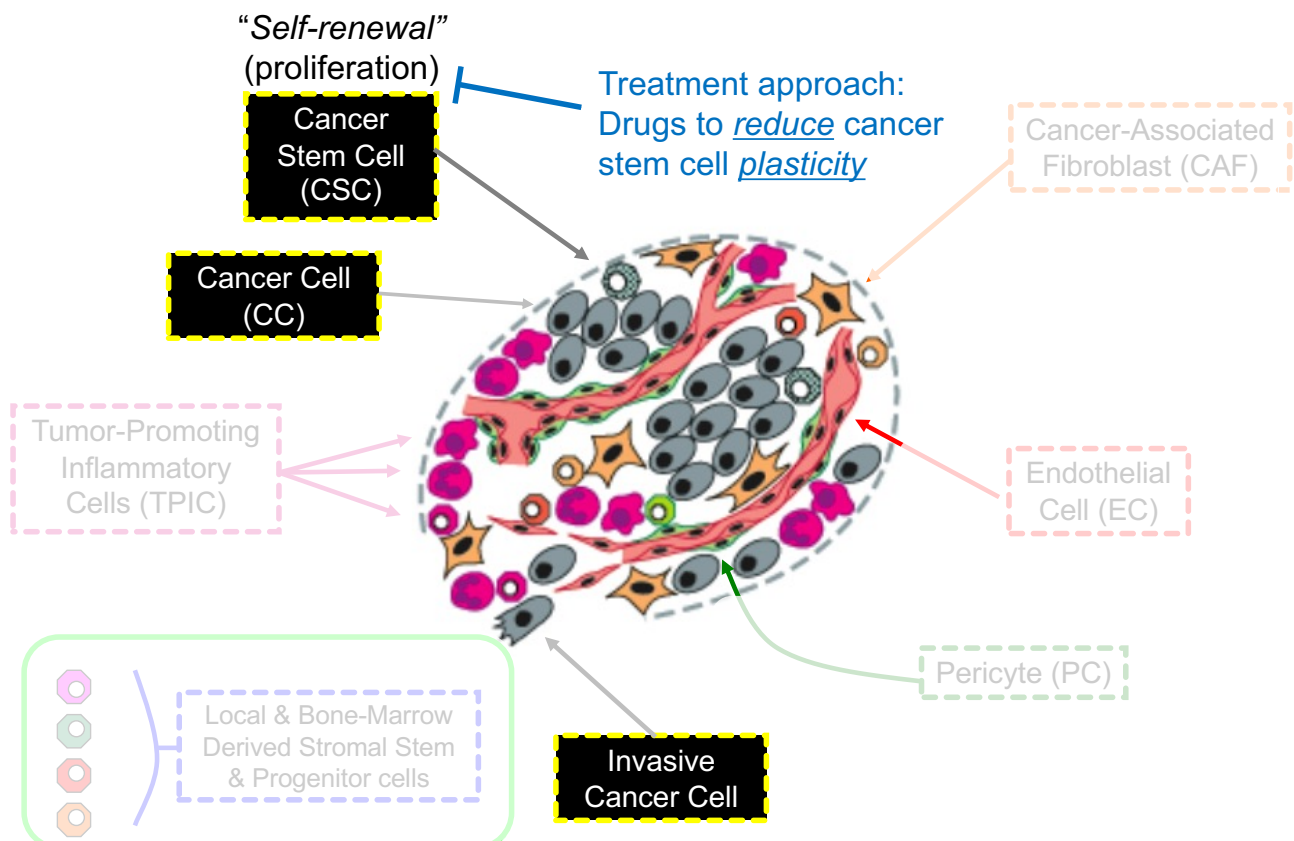
## Other strategies to counteract pro-tumor functions of WNT

- Block essential *downstream* targets (e.g. MYC)
- Can we block other essential "stemness" factors to thereby force cancer stem cells to differentiate *despite* the presence of activated  $\beta$ -catenin?

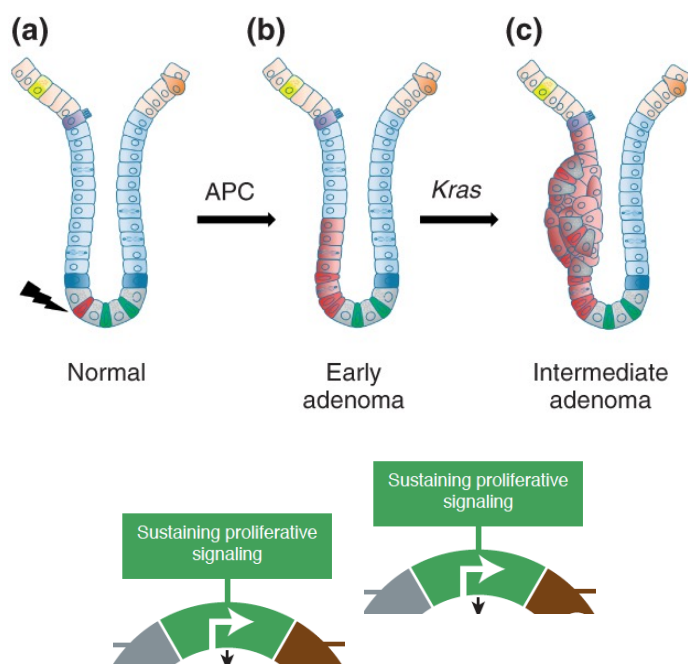
48

50

Genetic and epigenetic perturbations *within* cancerous cells or “cancer stem cells” clearly can initiate the process



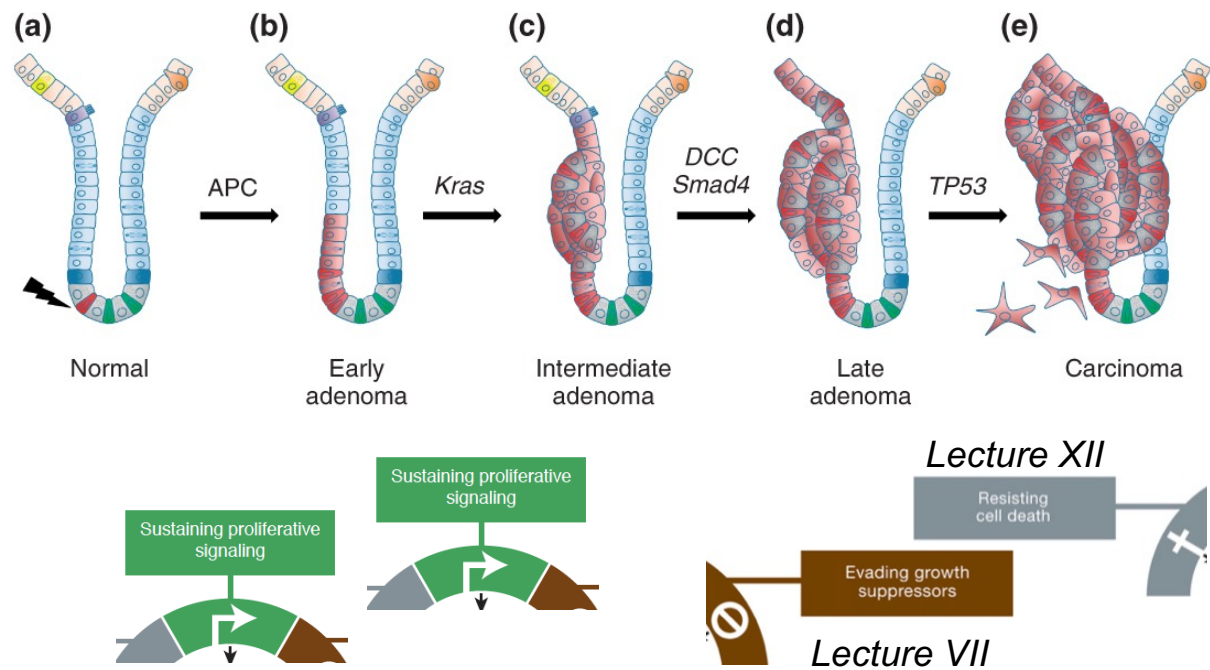
From normal tissue homeostasis to cancer hallmark capability:  
 $\beta$ -catenin hyperactivation initiates colorectal cancer



1. « **Constitutive** »  $\beta$ -cat signaling hinders APC mutant cells to exit the TA compartment of crypts

2. Addition of an oncogenic mutation in Kras promotes progression to a benign adenoma (polyp)

## Progression to CRC requires additional hallmark capabilities



53

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# Questions?

54