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Epithelial-to-Mesenchymal Transition and invadopodia markers in breast cancer: Lumican a key regulator

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20 Abstract

21

22 A great hallmark of breast cancer is the absence or presence of estrogen receptors $ER\alpha$ and 23 ERβ, with a dominant role in cell proliferation, differentiation and cancer progression. Both 24 receptors are related with Epithelial-to-Mesenchymal Transition (EMT) since there is a 25 relation between ERs and extracellular matrix (ECM) macromolecules expression, and therefore, cell-cell and cell-ECM interactions. The endocrine resistance of ER α endows 26 27 epithelial cells with increased aggressiveness and induces cell proliferation, resulting into a 28 mesenchymal phenotype and an EMT status. $ER\alpha$ signaling may affect the transcriptional 29 factors which govern EMT. Knockdown or silencing of ER α and ER β in MCF-7 and MDA-MB-30 231 breast cancer cells respectively, provoked pivotal changes in phenotype, cellular 31 functions, mRNA and protein levels of EMT markers, and consequently the EMT status. Mesenchymal cells owe their migratory and invasive properties to invadopodia, while in 32 epithelial cells, lamellipodia and filopodia are mostly observed. Invadopodia, are actin-rich 33 34 protrusions of plasma membrane, promoting proteolytic degradation of ECM and tumor 35 invasion. Cortactin and MMP-14 govern the formation and principal functions of invadopodia. In vitro experiments proved that lumican inhibits cortactin and MMP-14 36 37 expression, alters the formation of lamellipodia and transforms mesenchymal cells into epithelial-like. Conclusively, lumican may inhibit or even reverse the several metastatic 38 39 features that EMT endows in breast cancer cells. Therefore, a lumican-based anti-cancer therapy which will pharmacologically target and inhibit EMT might be interesting to be 40 41 developed.

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43 Keywords

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45 EMT; invadopodia; breast cancer; lumican

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1) Cell migration and invadopodia

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51 Cell migration is a mechanical physiological process occurring during embryogenic 52 morphogenesis, bone homeostasis, tissue repair and regeneration. Cell invasion consisting 53 in the breaching of tissue barriers like endothelial basement membrane is a basic function of 54 immune cells to respond and to prevent infections. Invasion takes place during disease 55 progression such as cancer invasion of extracellular matrix (ECM) and final metastasis [1].

There are distinct types of cell migration: cells can migrate as individual cells or collectively in group of cells moving together, just retained by intercellular interactions. Cells can move in two different mechanical ways referred to "amoeboid" or "mesenchymal" movements [2, 3]. In general, amoeboid movement is protease-independent, but requires pores or channels (more than 3-5 μ m in diameter) for cells to squeeze through, whereas mesenchymal movement is protease-dependent and is necessary to traverse nanoporous matrices such as basement membranes [4, 5].

63

64 Cells migrating by an amoeboid movement move at high speeds (4 mm/min) gliding on the 65 substratum and developing relatively weak adhesion and traction [1, 2, 6], whereas cells 66 migrating individually by a mesenchymal mode dynamically form cytoplasmic protrusions 67 and adhesions to the microenvironment, perform cell body translocation, release of 68 adhesions and detachment of the cell's rear which regulate speed and directional 69 persistence [3, 7-11]. All cells migrating by mesenchymal movement are more aggressive to 70 surrounding tissues as they can widen spaces and gaps by degrading ECM components 71 through an extracellular proteolysis [2]. Cell migration needs dynamic interactions between 72 the migrating cells and the surrounding microenvironment. In particular, dynamic 73 attachment, traction and detachment of cells or cell protrusions to the substratum allow cell 74 movement. In experimental studies cell movement is induced by nutrients which attract cells in two different ways according to the different environment: a two-dimensional (2D) 75 76 locomotion by which cells can move only in two directions, and a three-dimensional (3D) 77 movement by which cells are able to move or interact with the microenvironment structure 78 in all the three spatial dimensions. In both types of migration the cells have to acquire a 79 motile phenotype by developing some plasma membrane protrusions through an actin 80 cytoskeleton remodeling and formation of actin-based structures which allow the cells to 81 adhere to as well to probe and sense different molecules of ECM [12-14]. Actin filaments 82 form the cytoskeleton in mammalian cells and undergo constant remodeling during cell 83 migration [15]. In particular, new actin filaments are continuously synthetized at the leading 84 edge of migrating cells to form new plasma membrane protrusions which promote and 85 drive cell migration direction [12, 16]. Cell adhesion to the ECM is ensured by an integrinactin linkage system, where integrins are the major and best-characterized transmembrane 86 87 receptors which favor dynamic interactions between ECM and actin cytoskeleton during cell 88 movement [3].

90 The 2D locomotion is characterized by the formation of cytoplasmic protrusions showing 91 different shapes: filopodia (needle shape), pseudopodia (round), lobopodia (cylindrical) and 92 lamellipodia (flat veils) [17]. Uropods which have many more "folds" or "ridges", magnupodia (thick and very long protrusions extending more than 330 µm away from the 93 94 cell) and tenupodia (very thin straight processes often connecting distant cells) were also 95 described [18, 19]. The most common cytoplasmic protrusions for cell migration are 96 filopodia and lamellipodia; the firsts are thin, finger-like cytoplasmic projections formed by 97 parallel bunches of actin filaments, whereas the second ones look like flat broad 98 membranous protrusions located at the leading edge of the migrating cells [20, 21].

99

100 In 3D movement, cells develop specialized types of integrin-mediated adhesions through 101 plasma membrane protrusions named podosomes and invadopodia, collectively known as 102 invadosomes, which establish a close contact with the ECM and are able to invade dense 103 connective tissues by performing a proteolytic matrix degradation [14, 22, 23]. Tumor cells 104 could activate invadosomes to firstly degrade the basement membrane surrounding the 105 primary tumor, then to invade the connective tissue and penetrate into the lymphatic or 106 blood vessels (intravasation phase). Cancer cell nucleus has a limited deformability so that 107 the ECM proteolytic degradation seems to be necessary mainly to enlarge the pores in the 108 matrix, allowing the nucleus migration [24].

109

The role of invadopodia in proteolytic degradation of vascular basement membranes seems to be essential also during intravasation and metastasis [25, 26]. Invadopodia could play other important roles such as orienting tumor cells toward chemotactic signals as they are also involved in chemotaxis during migration in both 2 and 3D [27].

114

115 Podosomes are actin structures connecting the cytoskeleton with the plasma membrane 116 and appear like small plasma membrane protrusions distributed at the cell surface, 117 measuring only 0.4 μ m in length and 1 μ m in diameter and undergoing constant 118 disassembly and reformation [28, 29]. They are associated with normal cells, such as 119 macrophages, osteoclasts, dendritic cells, epithelial cells, smooth muscle cells and 120 fibroblasts and consist in a branched actin core containing proteins involved in actin 121 polymerization and a surrounding ring rich in β^2 and β^3 integrin receptors and adhesion 122 proteins such as talin, vinculin and paxillin [3, 4, 30, 31]. Podosomes act like probing or 123 palpating organelles well distributed on cell membrane of the myelomonocytic lineage, such 124 as macrophages [32], immature dendritic cells [33] and osteoclasts [34]. They are mainly 125 related to cell migration and diapedesis of blood leukocytes even though they may assume 126 an invasive function in facilitating the tumor cell invasion process by a proteolytic activity 127 [22, 29, 35, 36].

128

Invadopodia, firstly described in melanoma and invasive breast cancer cells [37, 38], arefinger-like protrusions developing from the ventral side of the invading cells and correspond

to specialized tightly-packed, organelle-free, actin-rich protrusions of the plasma membrane 131 132 structures as actin polymerization is crucial for the formation and function of invadopodia. 133 They are morphologically similar to podosomes but they appear larger than podosomes with a length which may reach 2-5 μ m and a diameter up to 8 μ m [39], even though other 134 135 authors reported smaller size because invadopodia can cluster together [40]. Moreover, 136 cells are able to form numerous podosomes (more than 100) but only few invadopodia 137 (between one and ten) [39]. Furthermore, podosomes have a lifetime of several minutes 138 whereas invadopodia can persist for over 1 hour [41].

139

140 Differently to podosomes, invadopodia lack a ring structure as observed at the transmission 141 electron microscope, the actin filaments appear throughout the core of the invadopodial 142 protrusion, excluding other cytoplasmic structures from the core area [42]. Both podosomes 143 and invadopodia are constituted by a dense filamentous (F)-actin core containing actin-144 regulating proteins, with polymerization activators and, filament crosslinkers, nucleators 145 and binders, surrounded by proteins involved in regulation, adhesion and scaffolding, 146 including integrins, kinases, GTPases, and adaptor proteins. Major molecules of 147 invadosomes include the scaffold protein Tks5, the actin regulators cortactin, Wiskott-148 Aldrich syndrome protein family members (WASP or N-WASP) and cofilin, and MMP-14 [43].

149

2) Relation of invadopodia with cancer

151

152 Invadopodia are described in invading cells, such as metastatic tumor cells [39, 44]. In fact, 153 they are always closely located to the ECM and represent enzymatically matrix-degrading 154 structures burrowing across tissue barriers through the release of matrix metalloproteases 155 (MMPs) which mainly include MMP-14, MMP-2 and MMP-9 [12, 16, 39, 40]. These MMPs, 156 and in particular MMP-14, are secreted to the site of invadopodia adhesion through vesicles 157 [45]. Even though the main function of invadopodia in tumors is to promote the proteolytic 158 matrix degradation to favor cancer cell invasion, other functions have been suggested: the 159 proteolytic action of these cytoplasmic protrusions to create space in the ECM could favor 160 tumors growth or alternatively the pericellular proteolytic activity at invadopodia surface 161 could activate various growth factors to drive tumor growth [43] and favor angiogenesis [46, 162 47].

163

164 Both podosomes and invadopodia can degrade the ECM and increase the ability of cells to cross tissue barriers, but ECM degradation is deeper and more focused when promoted by 165 invadopodia [39]. Podosomes usually degrade the exposed surface of the matrix, whereas 166 invadopodia, are able to penetrate deeper among the ECM components [42]. Invadopodia 167 168 have to be considered high dynamic structures which support adhesion-secretionmovement: after a stimulus, they first assemble interaction between cell and ECM 169 170 components, such as fibronectin or vitronectin molecules, then they release MMPs 171 degrading the matrix and finally disassemble again, allowing cell movement [48].

172 One major protein which is required for the assembly of invadopodia by regulating the F-173 actin-enriched invadopodial cytoskeleton is cortactin, a substrate of Src family tyrosine 174 kinases. By promoting invadopodia formation, function and disassembly, it is related to 175 cancer cell migration, invasion, intravasation, extravasation and metastasis [49-53]. An 176 overexpression of cortactin is frequently reported in several types of invasive cancers so 177 that it is widely used as a marker of invadosomes [48]. Similarly, inhibition of cortactin leads 178 to the inhibition of invadopodia formation and reduces metastasis to distant organs [54, 179 55].

180

181 Different morphologic conformations of invadosomes such as aggregates, individual dots, 182 rosettes or linear shaped structures along type I collagen fibrils can be observed in the same 183 cell, thus supporting the concept of invadosome plasticity [22]. The relationship between 184 podosomes and invadopodia is not clearly defined in the literature: it was also suggested 185 that podosomes and invadopodia may share a common primordial precursor able to adapt 186 to its microenvironment and modulate its morphology in relation to the different substrates 187 [39, 44, 56, 57]. Moreover, a close distinction in function between pseudopodia and 188 invadosomes seems to be discussed: some authors suggested that a high degree of 189 molecular integration and cross talk between pseudopodia and invadopodia allowing 190 efficient invasion coupled migration in both 2 and 3D may be also possible [27, 58]. 191 Formation of both invasive protrusions (invadopodia) and locomotory protrusions 192 (pseudopodia) is regulated by stromal cells in the tumor microenvironment like fibroblasts 193 in squamous cell carcinoma [59] and macrophages in breast carcinoma [60, 61]. Moreover, 194 ECM rigidity seems to influence the formation of invadopodia so that alterations in matrix 195 stiffness may be related to cancer disease and progression [61]. It is worth noticing that 196 dense fibrillar collagen so as transient mechanical strains promote the maturation of 197 invadopodia and enhances cancer cell invasion in vitro [40, 42]. In particular, it was 198 demonstrated that fibrillar collagen I is a physiological inducer of a novel class of 199 invadosomes called "linear invadosomes" which might act as collagen I fibril sensors and are 200 able to remodel the ECM [62]. In addition, hypoxia of peritumoral stroma can promote 201 mesenchymal invasion in breast cancer cells through the upregulation of structural 202 components of the actin cytoskeleton machinery involved in invadopodium formation [63].

203

3) Lumican, a Class II Small Leucine Rich Proteoglycan, as a regulator of Epithelial-to Mesenchymal Transition

206

ECM is a three-dimensional network of macromolecules which provides structural and biochemical support to the surrounding cells. ECM also regulates intracellular communication and affects cell behavior. Through the fine-tuned interactions between cell surface receptors and ECM components, gene expression and diverse functional properties are affected. ECM remodeling can occur in both physiological and pathological conditions [64].

213 Proteoglycans (PGs) are key components of the ECM. PGs are constituted by a core protein 214 to which linear and highly anionic chains of glycosaminoglycans (GAGs) are covalently 215 attached. PGs are so called as multifunctional key effectors, since they are involved in a 216 plethora of pathophysiological processes, such as cancer [65-67]. PGs expression is 217 remarkably altered during tumor development and growth and their remodeling on the 218 tumor ECM and cell membranes influences major cancer cell properties, such as cell 219 proliferation, migration, invasion, angiogenesis and adhesion [68]. The most abundantly 220 expressed PGs in ECM are the Small Leucine-Rich PGs (SLRPs). Their organization is 221 pericellular and their core protein substituted by negatively charged GAG chains enable the 222 interactions of SLRPs with matrix effectors, such as cytokines, growth factors and cell 223 surface receptors. These interactions lead to the regulation of crucial cell functional 224 features, i.e.: migration, autophagy, angiogenesis and metastatic potential of cancer cells 225 [69-71]. SLRPs comprise of 18 members classified into five classes according to the 226 conservation and homology at the protein and genomic levels. Lumican is a Class II SLRP, 227 characterized by high molecular heterogeneity according to the tissue due to its 228 glycosylation. Human lumican core protein is a protein of 338 amino acids, including an 18 229 amino acid signal peptide and three major domains, a negatively charged N-terminal 230 domain containing cysteine and sulfated tyrosine residues, a central part containing 9 231 Leucine Rich Repeats (LRR), a terminal domain of 66 amino acids containing 2 conserved 232 cysteine and 2 LRRs. The structure of lumican is illustrated in Figure 1.

233

234 Lumican expression is abundant in the ECM of many tissues, such as skin, kidney, breast, 235 colon, pancreas, cartilage, etc. [72]. In certain tissues, lumican is linked positively with 236 tumor aggressiveness, while in some other tissues, negatively [73]. In breast carcinoma, as 237 well as in melanoma, lumican expression is increased in the stroma [74-78]. Increased 238 expression of lumican in the stroma of breast carcinomas is not a prognostic factor for 239 breast cancer. However, enhanced lumican expression is related with increased levels of 240 metastasis, decreased levels of estrogen receptors (ERs) expression and the young age of 241 the patients. On the other hand, the decreased lumican expression is reported to be related 242 with poor clinical outcome and survival of the patient [76, 78].

243

244 Several published studies refer to the anti-cancer action of lumican, although the anti-245 tumorigenic mechanism behind it, is still not totally clarified. Data from our research group 246 have suggested an anti-cancer effect of lumican in melanoma. In vitro, the core protein of 247 lumican (37 kDa) was reported to increase melanoma cell adhesion [79], and its glycosylated 248 form (57 kDa) inhibited cell migration and invasion, with simultaneous changes in the actin 249 network and focal adhesion complexes [80-83]. At in vivo level, when syngeneic mice were 250 injected with B16F1 melanoma cells stably transfected with lumican expressing plasmid 251 (Lum-B16F1), the size and the number of the lung metastatic nodules were significantly 252 decreased in comparison with the Mock-B16F1 cells [84]. Angiogenesis was also altered, as 253 the number of the blood vessels in the metastatic nodules was decreased [85].

Interaction of lumican with ECM key components mediated by membrane receptors or 254 255 MMP-14, renders lumican a possible anticancer effector [73, 86]. Lumican (57 kDa) 256 decreased the migration of endothelial cells, by inhibiting the expression and the activity of 257 MMP-9 and MMP-14 through the interaction with integrins [87]. Several cell functions 258 affected by lumican, are integrin mediated. Interaction of lumican with $\alpha 2\beta 1$ integrin affects 259 the phosphorylation of FAK and alters the actin network [81]. The interaction of lumican 260 with integrins was also reported in osteosarcoma, as lumican had an impact on 261 osteosarcoma cell adhesion *via* inhibition of TGF β -2. The altered expression and activity of 262 TGF β -2 triggered downstream modification of the signaling cascade of pSmad2, enhanced the activity of β 1 integrin with simultaneous decreased FAK phosphorylation. It is not 263 264 clarified yet if TGF- β is a mediator of Epithelial-to-Mesenchymal Transition (EMT)/ 265 Mesenchymal-to-Epithelial Transition (MET), in synergy with lumican. MMP-14 is another 266 crucial mediator of the anti-tumorigenic mechanism of lumican, as it plays pivotal role in cell 267 migration, invasion and angiogenesis through the activation of downstream MMPs, as well 268 as through regulation of the activation of migration-related molecules, such as integrins and 269 several signaling pathways [88, 89].

270

271 EMT is an important biological mechanism of normal development, where normal, epithelial 272 cells undergo a plethora of biochemical changes and end up with altered phenotype and 273 altered cellular functional properties. More specifically, epithelial cells are transformed into 274 mesenchymal, spindle-like shaped cells with enhanced cell migration, as well as invasive and 275 metastatic properties in the case of malignancies. There are some specific molecular events 276 that trigger the initiation of EMT, such as activation of transcription factors, re-arrangement 277 of cytoskeletal proteins and altered expression of microRNAs. MET is the reverse procedure 278 of EMT, where mesenchymal cells are transformed into an epithelial status [90].

279

280 It was recently reported that the expression of estrogen receptors ER α and ER β of breast 281 cancer cells is related with EMT. Breast cancer is the most common type of cancer among 282 women and a great hallmark of breast cancer is the presence or absence of estrogen 283 receptors (ER α and ER β). ER α is extensively studied, since it is the major ER subtype in the 284 mammary epithelium, so it can serve as a prognostic marker, too. Moreover, 70% of breast 285 cancer cases are featured as ER α (+), rendering the 17 β -estradiol (E2)/ER α signaling as very 286 important. ER α provides cells with enhanced migratory and invasive capacities, which 287 eventually turns the epithelial cells into mesenchymal, triggering an EMT status [91]. This 288 may be explained by the fact that most transcriptional factors implicated in EMT, are 289 affected by ER α signaling [92, 93]. Bouris *et al.*, reported that the knockdown of ER α in the 290 low-invasive, epithelial MCF-7 cells, provokes a potent EMT status, as well as significant 291 alterations in the gene expression of several macromolecules of the ECM and cell functional 292 properties of breast cancer. The silencing of $ER\alpha$ was achieved using shRNA lentiviral 293 particles, triggering an altered phenotype, enhanced cell proliferation, migration and 294 aggressiveness, tremendous decrease of the gene expression of the epithelial marker E-

cadherin and simultaneously great enhancement of the gene expression of mesenchymalmarkers, such as vimentin, and slug/SNAIL-2.

297

298 The addition of lumican in MCF-7 cells, either control or the ER α silenced, affected the 299 receptor-associated functional features of breast cancer, the gene expression of matrix 300 macromolecules, as well as the EMT status. Concerning MCF-7 cells, cell morphology was 301 affected, since lumican rendered MCF-7 cells as more epithelial. Lumican triggered cell 302 accumulation, as well as a more globular phenotype. The number of cell-cell junctions has 303 increased, and the cells are in tight contact. Lumican endowed MCF-7 cells with a more 304 grouped, ovoid and more flattened shape, as compared to the untreated cells. The gene 305 expression of EMT markers was notably affected, as the epithelial marker E-cadherin was 306 increased, while vimentin was further decreased. The effect of lumican was also profound in 307 the cell functional properties, such as migration and invasion, as well as the expression 308 profile of crucial matrix effectors in MCF-7 cells. Lumican suppressed cell migration, which 309 comes in agreement with the observations in cell morphology. Cell invasion was also 310 suppressed, although MCF-7 cells exert low invasive dynamic [94].

311

312 Although the biological role of ER α is extensively studied, the biological role of ER β is not 313 clearly elucidated. To examine it, Piperigkou et al. suppressed its expression using a shRNA 314 against human ER β , through which a suppression of ER β mRNA by 70% was achieved [95]. The MDA-MB-231 cells that had undergone ER β suppression, tend to gain a more epithelial 315 316 phenotype and more cell-cell adhesion junctions, leading to a potent MET state. Cell 317 morphology and especially epithelial-to-mesenchymal transition has been well correlated 318 with the high invasive potential of breast cancer cell [91, 95, 96]. Gene expression of EMT 319 markers was affected, with significantly enhanced levels of E-cadherin, as well as decreased 320 levels of vimentin, zeb-1, slug/SNAIL-2 and fibronectin. Cell functional properties were also 321 affected, associated with the alteration MMPs and TIMPs alteration of expression and 322 activity.

323

324 Upon treatment with lumican, crucial alterations were observed in cell morphology of MDA-325 MB-231. Lumican-treated MDA-MB-231 cells exhibit a significant increase in the I/L ratio 326 and cell-cell contacts, in agreement with the significant inhibitory effect of lumican in the 327 invasion of MDA-MB-231 cells. The cell populations display heterogeneity, as flattened and 328 spindle-like cells co-exist and the number of cell-cell junctions seems to be increased. 329 Similarly, shER β MDA-MB-231 cells upon treatment with lumican, exerted a more epithelial 330 phenotype, as their shape was observed as wider, ovoid and flattened, with increased I/L 331 ratio and rare cytoplasmic protrusions like lamellipodia and filopodia [97].

332

Lumican treatment endowed significant downregulation in the gene expression of
 mesenchymal markers, such as slug/snail-2, zeb-1, vimentin and fibronectin. The gene
 expression of the epithelial marker E-cadherin was tremendously increased in the highly

invasive MDA-MB-231 cell line, while slightly increased in the shER β MDA-MB-231, 336 rendering lumican a potent regulator of EMT. Cell functional properties, such as 337 338 proliferation, migration and invasion were downregulated upon lumican treatment, and in 339 most assays in an ER β dependent mode. It is worth noticing that lumican significantly 340 inhibited both the proteolytic activity levels of MMP-14 and as well the gene expression 341 levels of MMP-7, coming in agreement with the observed effect of lumican in cell functional 342 properties. Conclusively, lumican altered cell morphology, including cell-cell junctions and 343 provoked EMT/MET reprogramming. These data underline the anticancer effect of lumican, 344 related to the ER status and could be potentially applied for designing novel pharmaceutical 345 agents for breast cancer therapy [97].

346

347 4) Lumican as an effector on invadopodia formation

348

349 Taking into consideration the anti-migratory and anti-invasive effects of lumican, as well as 350 the fact that the invadopodia are formed at the leading edge of cancer cells, enabling their 351 migration and invasion, it was of great importance to investigate the lumican effect on 352 invadopodia formation. It was reported that when melanoma cells were grown onto 353 lumican coating, cell morphology was altered and localization of actin filaments was re-354 arranged [82]. Coulson-Thomas et al. seeded bone derived prostate cancer cells upon 355 lumican coating, which provoked modification of the elongated shape of the cells into more 356 rounded, as well as reduction of the number of the cellular protrusions, such as lamellipodia 357 and invadopodia [98]. Apart from the actin filaments, intermediate filaments, such as 358 keratin cytoskeleton, play pivotal role in the process of cell migration.

359

360 Keratin 8 and 18 are expressed separately in normal keratinocytes, however they are found 361 to be co-expressed in planocellular cancer cells, in the form of 8/18 filaments. This coexpression of keratin 8/18 filaments enables the invasion of normal keratinocytes in the 362 basement membrane [99]. It is already reported that keratin 8 re-organization provokes 363 364 increased levels of cell motility, high levels of keratin 8 and 18 are signals of metastatic 365 progression and poor clinical outcome in squamous cell carcinomas (SCCs) [100-102]. On the 366 other hand, decreased expression of keratin 8 and keratin 18 have been correlated with low 367 $\alpha 6\beta 4$ integrin expression, cancer cell migration and invasion [103]. When Coulson-Thomas 368 et al., seeded prostate cancer cells upon lumican coating, both keratin 8 and 18 expression 369 was decreased, as well as their organization from cellular protrusions was modified into 370 perinuclear localization [98]. In addition, upon lumican treatment, de-stabilization of focal adhesion complexes was observed to lead to inhibition of cell migration. More specifically, 371 372 Zona occludens protein 1 (ZO-1), a protein which plays pivotal role in cell migration, since it 373 is localized in lamellipodia and in intracellular tight junctions, presented a decreased 374 expression and was concentrated in the cell membrane and not in the cellular protrusions 375 [104].

376

Based on the anticancer effect of lumican that effectively regulates ERs-associatedfunctional properties of breast cancer cells, expression of matrix macromolecules and EMT,

379 the analysis of lumican effects in cell morphology and invadopodia formation of invading 380 breast cancer cells was performed by our group (Karamanou et al., submitted to FEBS 381 Journal [105]). The effects of lumican were evaluated in three breast cancer cell lines, the 382 highly metastatic ER β -positive MDA-MB-231, the respective ER β -suppressed (shER β MDA-383 MB-231) and the low invasive ER α -positive MCF-7 breast cancer cells. We investigated cell 384 morphological aspects of invading cells in various matrices by scanning electron microscopy. 385 The obtained data suggested that the expression of invadopodia marker (cortactin), focal 386 adhesion proteins (vinculin, talin), hyaluronan and its receptor variants and biosynthetic 387 enzymes (CD44, CD44s, CD44-v2, -v3, -v8, HAS-1, -2, -3) were altered by the presence of 388 lumican in association with the level of expression of ERs. The expression of CD44 and 389 CD44s was high in MDA-MB-231 cells, moderate in shER β MDA-MB-231 and significantly 390 decreased in the low-metastatic MCF-7 cells, underlying a correlation of CD44 with the ER 391 status.

392

393 Morphological changes that cells undergo after invasion were evaluated after seeding onto 394 different matrix-coated surfaces. Cells were cultured for both 24 and 48 hours and seeded 395 on the upper surface of a Millipore filter coated with collagen type I and were observed by 396 Scanning Electron Microscopy (SEM) (Figure 2). Regarding MDA-MB-231 breast cancer cells, 397 SEM analysis revealed their elongated, spindle-like shape, as well as their numerous 398 cytoplasmic protrusions. The cellular surface of MDA-MB-231 was irregular and non-399 smooth. Upon 100nM lumican treatment in serum-free conditions for 48h, MDA-MB-231 400 breast cancer cells seemed more flattened with a smoother surface and a decreased 401 number of invadopodia, as seen in Figure 1. Similarly, 48h lumican treatment evoked 402 morphological changes in MCF-7 breast cancer cells during invasion in different collagen 403 substrates. SEM analysis revealed the flattened and globular morphology of MCF-7 cells, as 404 well as a diminished number of invadopodia and even few microvilli. After 24h of treatment 405 with 100nM lumican, SEM revealed morphological alterations in MCF-7, as they appeared as 406 more grouped more globularly-shaped. The cytoplasmic membrane was observed as 407 smooth with absence of microvilli, microvesicles and invadosomes. Exosomes were also 408 observed (Karamanou et al., submitted to FEBS J, [105]).

409

410 As already referred, invadopodia are membrane protrusions of invasive cancer cells, 411 involved in the focal pericellular degradation of ECM. It is very critical to evaluate the three 412 breast cancer cell lines of different estrogen receptor status. Lumican affected the 413 expression levels of invadopodia markers, vinculin and talin and cortactin in the most 414 invasive breast cancer cell lines. Vinculin role is crucial, as it interacts with integrins to the 415 cytoskeleton at the focal adhesion complexes, and eventually controls the cytoskeletal 416 mechanics, as well as lamellipodia formation. These proteins of the focal adhesion 417 complexes were evaluated in the breast cancer cell lines in absence and presence of 418 lumican. Vinculin expression was found to be increased in the highly invasive MDA-MB-231 cells, and moderately decreased in shER^βMDA-MB-231 cells. Lumican downregulated 419

420 vinculin in both the highly metastatic MDA-MB-231 cells, as well as the shER β MDA-MB-421 231 cells, is suggesting the anti-metastatic potential that lumican endows. Talin followed a 422 similar profile, with profound effect of lumican in both MDA-MB-231 and shER^βMDA-MB-423 231 cells. Using immunofluorescence, the ability of cortactin to create aggregates with actin 424 leading to the initiation of invadopodia formation was observed in the highly metastatic 425 MDA-MB-231 cells. Upon lumican treatment, cortactin expression was reduced, as well as 426 the cytoplasmic and pericellular staining. Thus, lumican is able to inhibit the initiation of the 427 formation of cellular protrusions by decreasing the expression of cortactin. As expected, in 428 low invasive and low-metastatic MCF-7 cells, the staining of cortactin was very weak, in 429 agreement with the low invasive and low metastatic potential of these cells. Presence of 430 lumican rendered staining of cortactin even weaker, underlying the effect of lumican even 431 in a low-invasive cell line (Karamanou et al., submitted to FEBS J, [105]).

432

433 In addition, our group recently demonstrated that collagen-binding integrins, such as $\alpha 1$ 434 and $\alpha 2$ in MDA-MB-231 cells, were downregulated in MCF-7 cells by the presence of 435 lumican. It is quite interesting to note that the binding of integrins to focal adhesions transmits signals from the extracellular environment to the intracellular network, and 436 437 inversely, mediated by integrins downstream signaling pathways, such as FAK, ERK1/2, 438 MAPK 42/44, and AKT, which were found to be downregulated by lumican. Altogether our 439 recent data suggest that lumican interacts through integrins, and downregulate FAK 440 phosphorylation, which lead to the downregulation of phosphorylation of p130Cas and AKT. 441 The decreased phosphorylation of p130Cas of the downstream signaling events results in 442 the decrease of lamellipodia formation and MMP-14 activity, leading to an inhibition of cell 443 migration.

444

445 Moreover, the expression of several matrix molecules, such as hyaluronan (HA), hyaluronan 446 synthases (HASes), CD44 and invadopodia markers, integrins and signaling effectors was 447 investigated by our group. All these findings, together with the observations by other researchers suggest that lumican effect is due to its ability to downregulate the 448 449 phosphorylation of major cellular kinases of cell migration and proliferation/survival signaling, such as AKT, ERK, FAK [73, 81, 82, 106-108]. Conclusively, lumican interacts with 450 451 integrins, downregulates FAK phosphorylation, which eventually results to the decreased 452 phosphorylation of p130Cas and AKT. This downregulation of the above signaling cascade 453 results to the decrease of the formation of cellular protrusions, such as lamellipodia, and 454 MMP-14 activity, leading eventually to the inhibition of cell migration (Karamanou et al., 455 submitted to FEBS J, [105]). Figure 3 summarizes the effect of lumican on EMT, matrix 456 molecules and RTKs.

457

Increased expression levels of MMP-14 are found to be localized at the surface of
melanoma cells in primary tumors and especially in the invasive cellular protrusions [109,
110]. Snail is a major transcriptional factor in EMT, which is reported to be increased in

461 cancer tissues and closely correlated with cancer progression, including melanoma [111]. 462 Snail also provokes EMT, increases migration, invasion, as well as MMP-14 activity. At the 463 late-stage melanoma and during metastasis, the epithelial marker E-cadherin is significantly 464 decreased and it has been reported that the inhibition of the Snail-triggered EMT leads to 465 the inhibition of metastasis [112]. In parallel, lumican is reported to down regulate B16F1 466 melanoma cell lung metastasis [84]. In addition, the effect of lumican was investigated on 467 the expression and activity of MMP-14 in Snail-transfected-B16F1 melanoma cells in vitro as 468 well as its effects in melanoma metastasis in vivo in a mice model following screening of 469 cancer implicated matrix effectors, invadopodia markers and intracellular signaling 470 pathways. It was observed that lumican reduced the levels of SNAIL-induced cell 471 proliferation and cell migration by blocking MMP-14, as well as melanoma primary tumor 472 development. Therefore, a lumican-based therapy targeting SNAIL-induced MMP-14 activity 473 could be beneficial for melanoma treatment, underlining the regulatory effect of lumican in 474 EMT [112].

475

476 In ovarian cancer, lumican was also reported to be one of the genes that affects the 477 Epithelial-to-Mesenchymal Transition (EMT) status. Recently, Jingjing Wu et al., reported 478 that HMGA2 is one of the few gene markers that can differentiate most type I 479 (mesenchymal gene status) from type II (epithelial gene status) cancer cell lines [113]. 480 Thuault et al., also identified HMGA2 as a transcriptional regulator of SNAIL 1, a key EMT 481 molecule. HMGA2 enhances tumor transformation in different cell types [114]. For instance, 482 when it is overexpressed, it can be related with aggressive tumor growth, early metastasis 483 and poor prognosis in several cases, such as pancreatic and breast cancer. When HMGA2 is 484 repressed, the epithelial phenotype is restored with significant increase of E-cadherin. 485 Similarly, in ovarian cancer cells, HMGA2 increases cell transformation. Several HMGA2-486 regulated genes were associated with EMT, one of which is lumican. Based on the literature 487 regarding the anti-cancer effect of lumican and its role as tumor suppressor by inhibiting 488 EMT, as well as identifying lumican as a target of HMGA2 in ovarian cancer, evidence is 489 provided that HMGA2 promotes ovarian tumorigenesis through EMT regulation [113].

490

491 The role of lumican in EMT in response to injury is also reported [115]. It has been observed 492 that lumican is immunolocalized in human postoperative capsular specimens. Detailed 493 examination was followed using organ cultures of injured mouse lenses from both wild type 494 and lumican knockout animals, to investigate the possibility that lumican modulates EMT of 495 lens epithelial cells (LECs) in response to injury or to exposure to TGF- β 2. The results 496 obtained from wild type mice indicated that in uninjured lenses there was no lumican 497 expression, whereas in lenses subjected to capsular injury, lumican protein was initially 498 detected after 12h of culture and thereafter staining was gradually increased. The cells 499 around the capsular break appeared elongated at day 5 and a fibroblast-like morphology 500 may be assumed, indicating that EMT was in progress. Moreover, α SMA was detected in the 501 fibroblast-like lens cells. In lumican knockout mice epithelial-shaped cells were present at

502 the same time point and α SMA was detected in lens cells at day 10, however at weaker 503 intensity as compared with the wild type mice. By incubating the cultures with TGF- β 2, strong lumican expression was detected at 24h, whereas in the absence of TGF- β 2 only faint 504 505 staining was observed. In addition, at day 10, wild type LECs cultured in the absence of TGF- β 2 remained epithelial-like, and they become positive for lumican but remained negative for 506 507 α SMA. In conclusion, the results taken together indicate that lumican was upregulated 508 before EMT of the LECs and that loss of lumican attenuates injury-induced EMT of LECs 509 [115].

510

511 Another case where lumican is reported to regulate EMT is the ventilation-induced EMT 512 through extracellular signal-regulated kinase pathway [116]. In acute lung injury, mechanical ventilation is used in patients, since it damages pulmonary epithelial cells through 513 514 production of inflammatory cytokines and excess deposition of lumican. The mechanisms 515 underlying the interactions between mechanical ventilation and lung injury are not totally 516 clarified. The main hypothesis is that lung damage and EMT upregulate lumican because of high tidal volume mechanical stretch and as a consequence, MIP-2 and TGF- β 1 are 517 modulated through the extracellular signal- regulated kinase (ERK 1/2 pathway). The 518 519 experimental model used was C57BL/6 both wild-type and lumican knockout, exposed 520 either to low or high tidal volume. It is worth noticing that high tidal volume signs activation of lumican and ERK 1/2 in wild-type mice, as well as decrease of E-cadherin staining. 521 522 Conclusively, lumican promotes mechanical ventilation of high tidal volume, which induces 523 lung injury and EMT through the activation of the ERK 1/2 pathway [116]. Lumican effect on 524 invadopodia formation is presented in Table 1.

525

526 5) Clinical Benefits of the Anti-Cancer Effect of Lumican

527

528 The data of this review suggest that the treatment with lumican may serve for therapy of 529 breast cancer. However, regarding the mechanisms of the anticancer effect of lumican, 530 further studies are needed, and especially concerning the cell signaling that relates with 531 invadopodia functions, in order to shed light in cancer metastasis treatment. Through mass-532 spectrometry-based proteomics, lumican was found to be unregulated in oral lichen planus 533 (OLP-T) and oral squamous cell carcinoma (OSCC-T) groups in comparison with adjacent and 534 control groups of patients. Therefore, lumican was identified as important pathogenesis 535 biomarker of OLP that underlines its malignant potential [117].

536

537 One more article relates the lumican expression patterns and the clinical, pathological and 538 oncological outcomes in patients with pancreatic ductal adenocarcinoma (PDAC), as well as 539 the role of lumican in PDAC progression. Using microarray staining and COX regression 540 analysis, it was reported that lumican was present in the stroma surrounding PDAC cells in 541 mostly 50% of primary tumors and the direct xenografts. Patients with early stage of cancer 542 and positive staining for stromal lumican were related with a profound decrease in 543 metastatic recurrence after surgery and 3-times longer survival in comparison with patients with negative staining for stromal lumican. Conclusively, there is a positive correlation
between stromal lumican in primary PDAC tumors and prolonged survival after tumor
resection [118].

547

548 Moreover, the prognostic value of lumican expression was also evaluated by 549 clinicopathological data and tissue samples collected from stages II and III of colon cancer. 550 Lumican expression in epithelial cells overall in the tumor was associated to a longer disease 551 specific survival in stage II cancer patients, as well as a longer disease-free survival [119]. 552 Lumican also serves as biomarker for metastatic and recurrent giant cell tumor of bone in 553 lung cancer [120].

554

555 6) Conclusions and Perspectives

556

557 Invadopodia constitute an attractive target for metastasis promotion and inhibition. Data 558 from our research group demonstrated that incubation of breast cancer cells with the anti-559 cancer effector lumican may inhibit or even reverse the several metastatic features that 560 EMT endows. Since EMT is correlated with migration and invasion, as well as with the 561 initiation of metastasis, a lumican-based anti-cancer therapy which will pharmacologically 562 target and inhibit EMT might be interesting to be developed. Although lumican peptides 563 might be susceptible to proteolytic degradation by the various proteases and could not be 564 used easily for therapeutic purposes, protected derivatives and/or nanoformulations could 565 be alternatives for their administration in solid tumors. Taking into consideration the growing field of nanotechnology and its raising applications in therapeutics, it may also be 566 567 plausible to suggest that local overexpression of lumican in solid tumors using 568 nanoformulations may be another useful approach or combined approaches could drive 569 expression of lumican locally as a promising tool to consider for preventing invasion and 570 metastasis at distant sites.

571

573

572 **Conflict of Interest statement**

- 574 The authors declare that there are no conflicts of interest.
- 575

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577

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868 Figure 1 : Schematic representation of lumican structure. Lumican is a 338 amino acids 869 protein. An 18 amino acid signal peptide is included, which permits the secretion of lumican 870 into ECM, as well as three major domains: a) a negatively-charged N-terminal domain 871 containing four cysteines with disulfide bonds and potential sites for tyrosine sulfation, b) a 872 central part which is highly conserved and is described to contain 11 leucine rich repeats, c) 873 a C-terminal domain of 66 amino acids which contains two conserved cysteines and two 874 LRRs. The LRRs motifs are shown as blue boxes, and numbered from N-terminal to C-875 terminal. There are four potential sites for substitution by N-linked KS or oligosaccharides, 876 situated at position 87, 126, 159, 251 of the core protein of human lumican.

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878 Figure 2 : Observation of MDA-MB-231 cells by SEM, set on Millipore[®] filter coated with 879 type I collagen. First panel (images 1,2): MDA-MB-231 cells cultured for 24h, appeared with 880 mesenchymal phenotype, spindle-like shape and a plethora of cellular protrusions, like lamellipodia or filopodia. The arrow in image 1 depicts the spindle-like shape. In image 2, 881 882 100 nM lumican seems to endow MDA-MB-231 cells with a more rounded shape and 883 diminished number of cellular protrusions. Second panel (images 3,4): MDA-MB-231 884 cultured for 48h. The mesenchymal morphology is still evident, although cells seem to be 885 more flattened. In image 4, 100nM lumican rendered cells with a more globular shape and 886 the cell surface seemed smooth.

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888 Figure 3 : Schematic representation of lumican effect in EMT, focal adhesion proteins, 889 cellular functions and signaling pathways. Highly-invasive, mesenchymal MDA-MB-231 cells 890 are transformed into epithelial-like upon 100nM lumican treatment after 48h of cell culture. 891 Lumican diminishes the number of cellular protrusions, since it decreases the expression of 892 cortactin; major protein of invadopodia formation, and vinculin; protein of focal adhesions. 893 Lumican also affects the activity and expression of MMP-14, and as a consequence cellular 894 migration, invasion, and several RTKs, such as FAK signaling pathway. The structure of 895 invadopodium is presented in the insert. MMP-14 is depicted on the edge of invadopodium, 896 facilitating migration and invasion. Vinculin and talin are essential for the integrins 897 connection to cytoskeleton.

Table 1. Lumican effect on EMT and invadopodia formation according to cancer.

Pathological condition	Effect on EMT	Effect on invadopodia	References
Bone-derived prostate cancer	 Re-organization of keratin 8 and 18 into pericellular localization Destabilization of focal complexes Decrease of ZO-1 expression 	 Lamellipodia and invadopodia are diminished 	[98]
Highly-invasive breast cancer	 Altered expression of invadopodia markers (vinculin, talin, cortactin) Heterogeneity in cell populations (co-existence of spindle-like and flattened cells) Tendency to regain an epithelial phenotype 	 Decrease in the number of lamellipodia and filopodia 	Karamanou <i>et al.,</i> submitted to FEBS J, [105]
Low-invasive breast cancer	 Morphological alterations Globularly-shaped cells Altered gene expression of EMT markers (increase of E-cadherin, decrease of vimentin) 	 Diminished number of invadopodia and absence of microvilli, microvesicles and invadosomes Release of exosomes 	Karamanou <i>et al.,</i> submitted to FEBS J, [105]
Melanoma	 Cell migration is affected Expression of invadopodia markers is altered Blocking of MMP-14 activity 	 Invasive cellular protrusions are affected 	[109-112]
Ovarian Cancer	 HMGA2, key EMT molecule is affected Promotion of tumorigenesis through EMT regulation 	Not reported	[113]
Lung injury	 Promotion of mechanical ventilation of high tidal volume Induction of EMT through ERK 1/2 pathway MIP-2 and TGF-beta expression are modulated 	Not reported	[116]









