

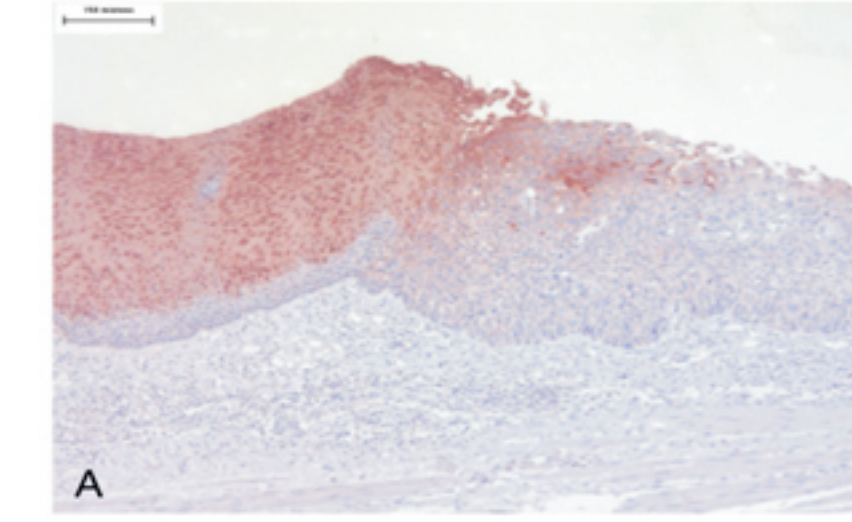
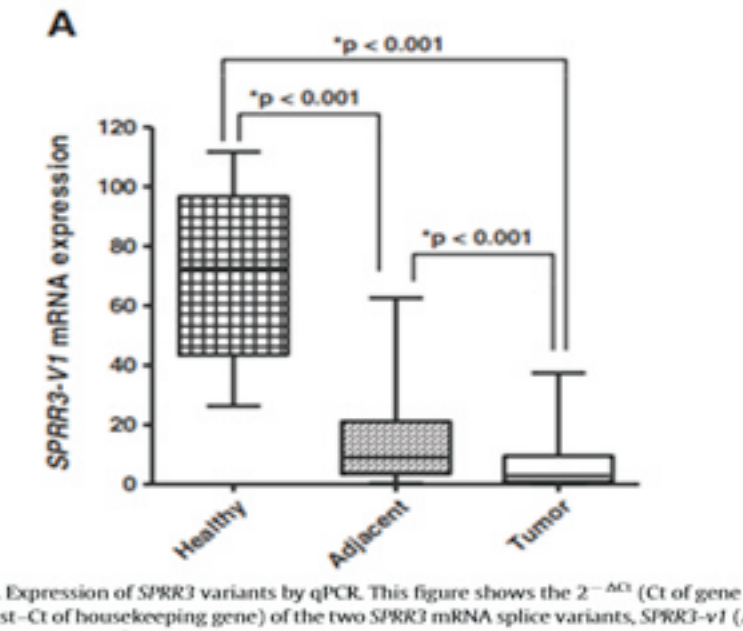
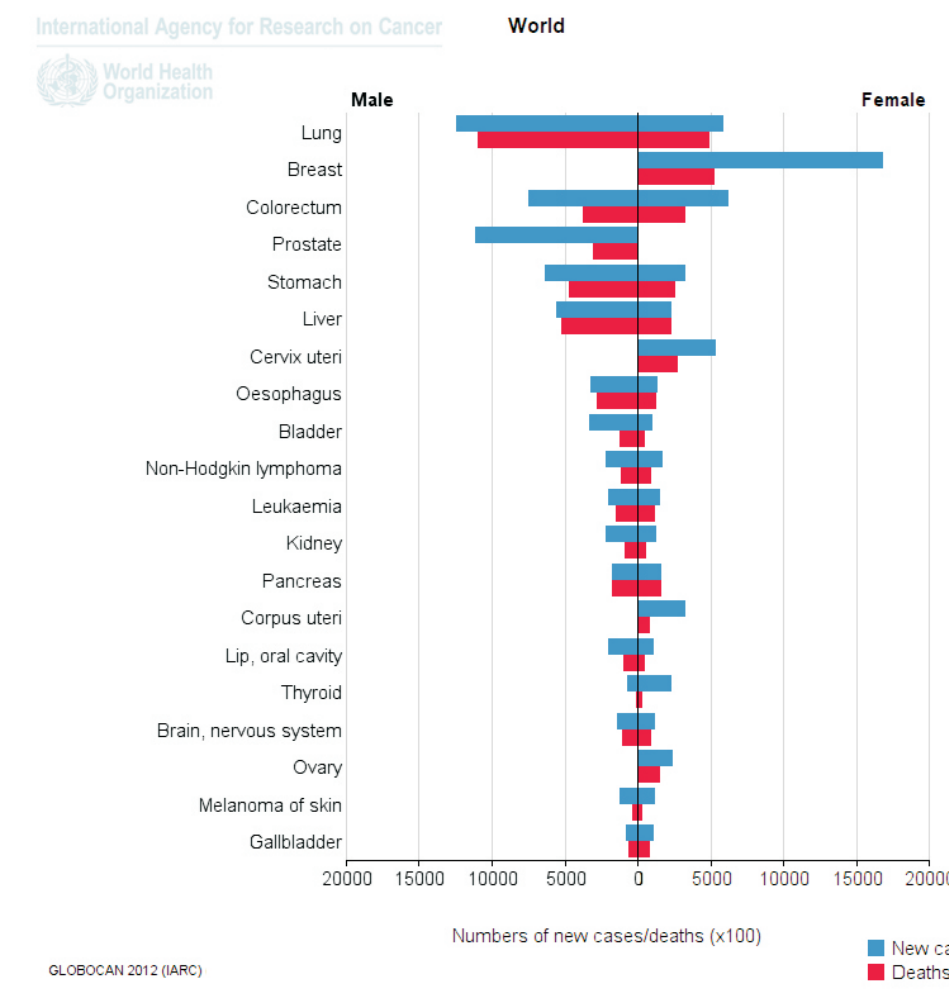
Brewer L¹; Neto, PN²; Lima, SCS²; Pinto, LFR^{1,2}; Simão, Ta¹

¹ Laboratório de Toxicologia e Biologia Molecular, Departamento de Bioquímica, Instituto de Biologia Roberto Alcântara Gomes (IBRAG), Universidade do Estado do Rio de Janeiro (UERJ)

² Programa de Carcinogênese Molecular- CPQ – Instituto Nacional de Câncer (INCA)

INTRODUCTION

- Esophageal cancer (EC) is the sixth most frequent cancer and is the sixth leading cause of cancer-related deaths worldwide and squamous cell carcinoma (ESCC) corresponds to 80% of the cases worldwide and in Brazil^{1,2}.
- Esophagin (SPRR3), a member of the SPRR family of cornified envelope precursor proteins, is strictly linked to keratinocyte terminal differentiation³.
- A previous study from our group showed a gradual loss of esophagin expression in malignant transformation of the healthy esophagus into ESCC⁴. However, the molecular mechanisms involved in *SPRR3* silencing are unknown.



- DNA methylation is the one of the most important and the best studied epigenetic mechanisms⁵.
- The methylation pattern is copied and maintained during DNA replication in a process catalyzed by DNA methyltransferases (DNMTs)⁵.

OBJECTIVE

Examine DNA methylation as a regulatory mechanism of esophagin expression in ESCC.

METHODOLOGY

- Three CpG sites (Site a, Site b and Site c) of esophagin gene were analyzed by pyrosequencing in esophageal tumor and matched surrounding non-tumor tissue from 15 patients with ESCC;
- A receiver operating characteristic (ROC) curve was plotted for the use of *SPRR3* methylation as a marker to distinguish tumoral esophagus from normal-appearing ESCC surrounding mucosa;
- RT-qPCR was performed to evaluate esophagin and *DNMT1* expression in the same samples.
- A correlation curve was plotted to examine the association between the studied markers.

RESULTS

Gradual decrease of esophagin expression levels in esophageal tissues

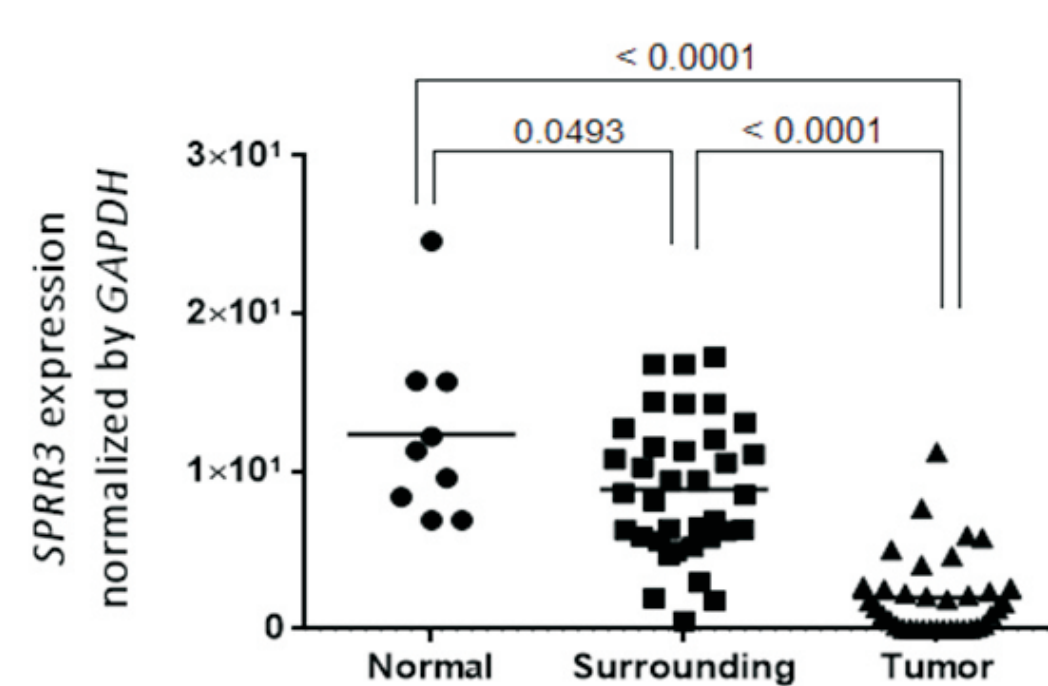


Figure 1: Comparison of *SPRR3* expression in healthy volunteers and ESCC patients.

The methylation levels of the evaluated CpG sites were significantly higher in tumors in comparison with the adjacent tissue

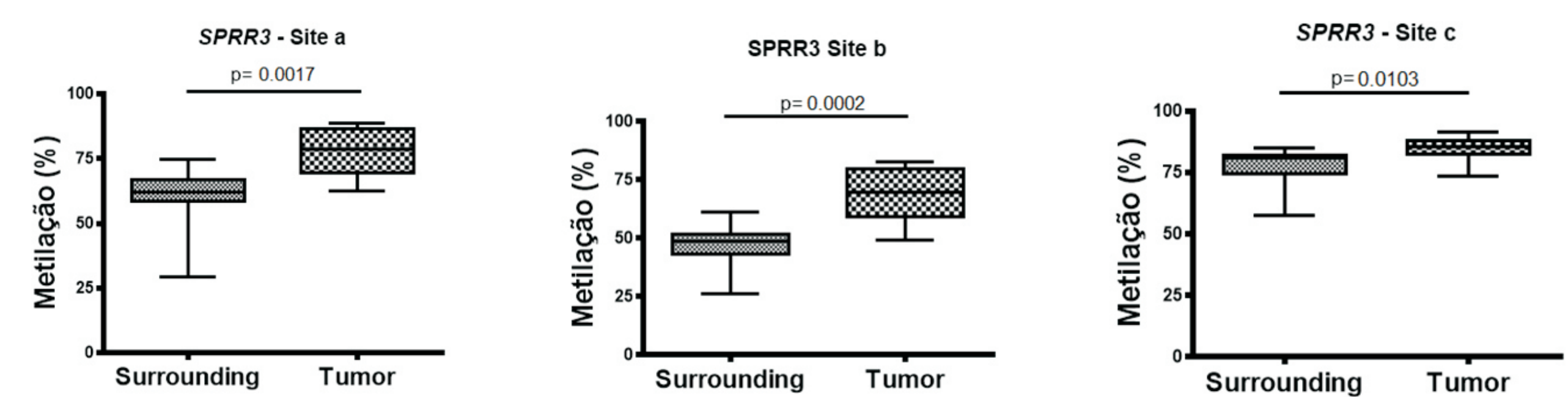


Figure 2: Comparison of three sites of *SPRR3* methylation in ESCC patients.

SPRR3 methylation is able to distinguish the adjacent mucosa from tumor samples

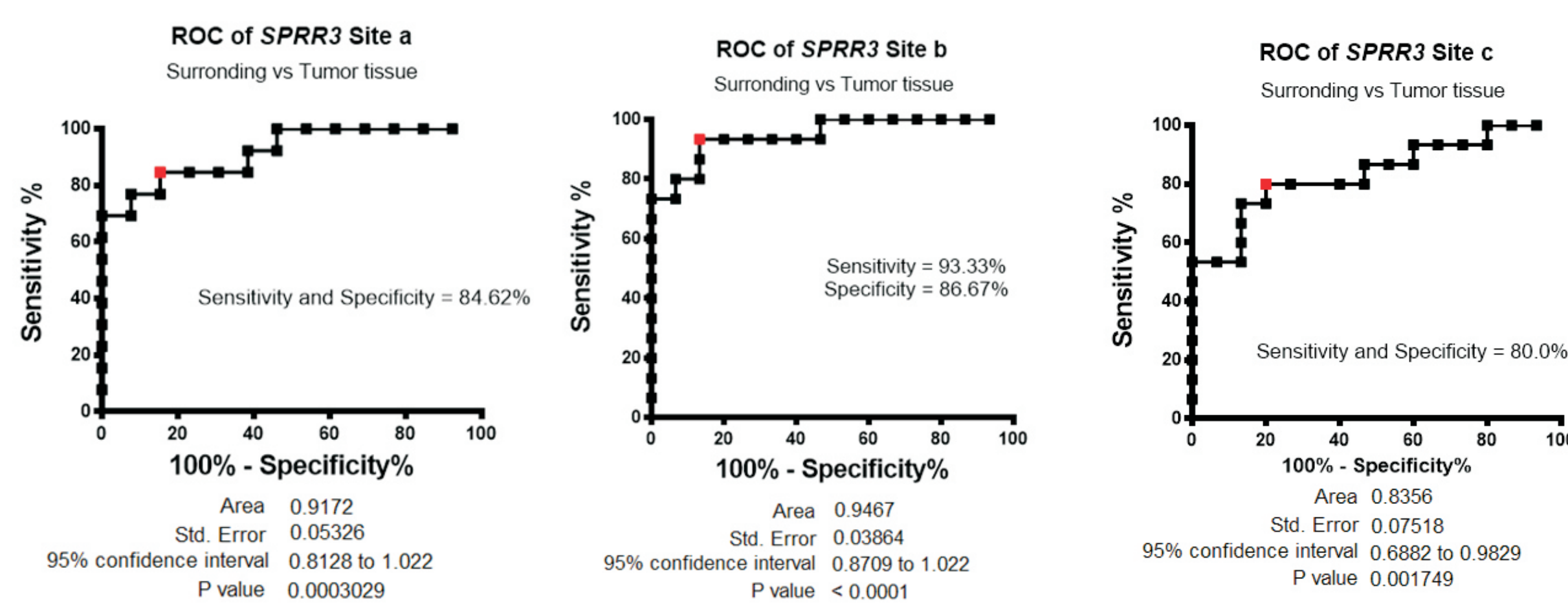


Figure 3: Receiver operating characteristic (ROC) curve for the discrimination of normal-appearing surrounding tissue and tumor tissue of ESCC patients, according to *SPRR3* methylation.

There is an inverse correlation between esophagin expression and DNA methylation for all CpG sites evaluated

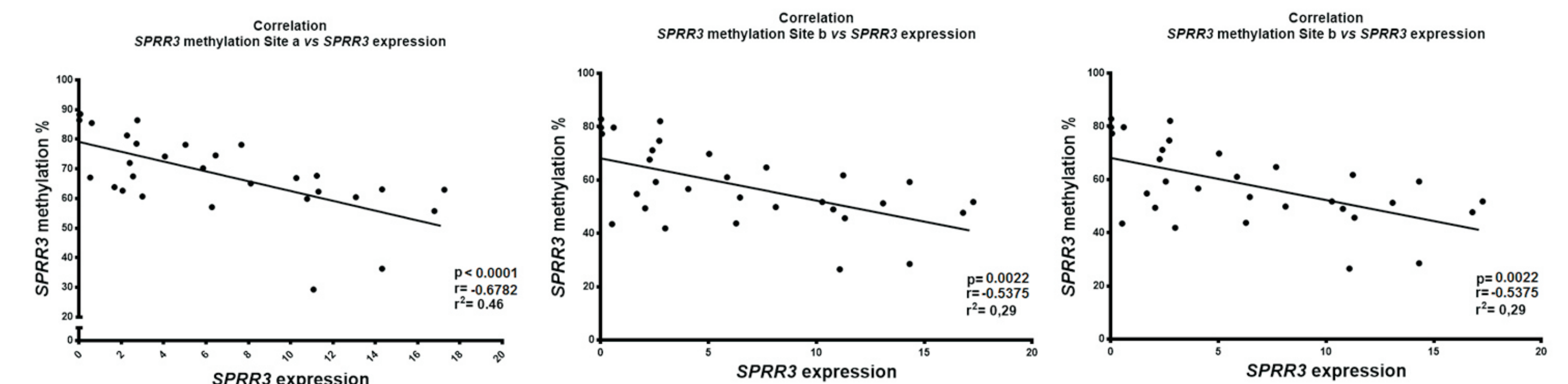


Figure 4: Correlation comparison of three sites of *SPRR3* methylation and *SPRR3* expression in ESCC patients.

There is an inverse correlation between *DNMT1* expression and esophagin DNA methylation for all CpG sites evaluated

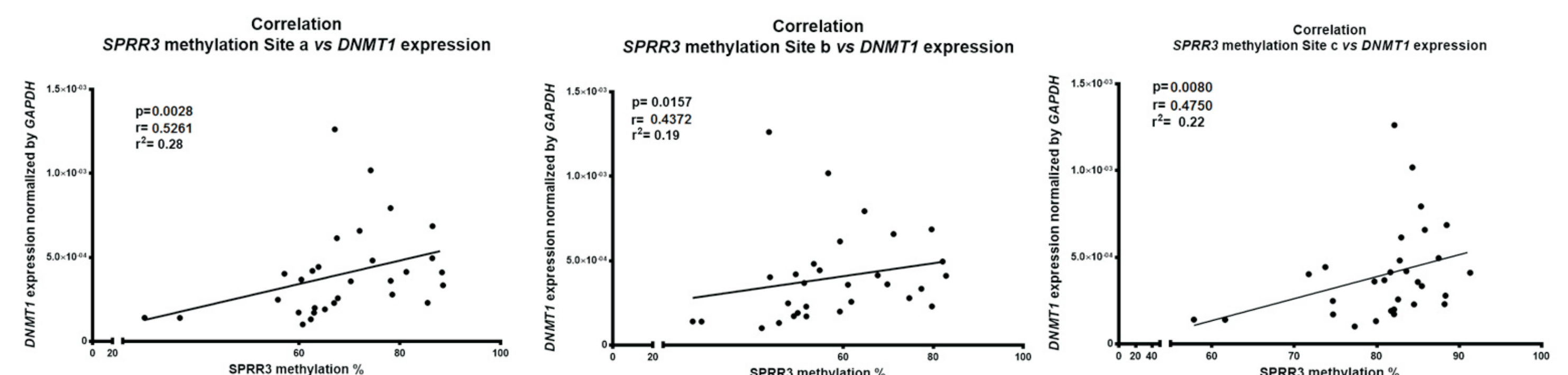


Figure 7: Correlation comparison of three sites of *SPRR3* methylation and *DNMT1* expression in ESCC patients

There is an inverse correlation between expression of *DNMT1* and *SPRR3*

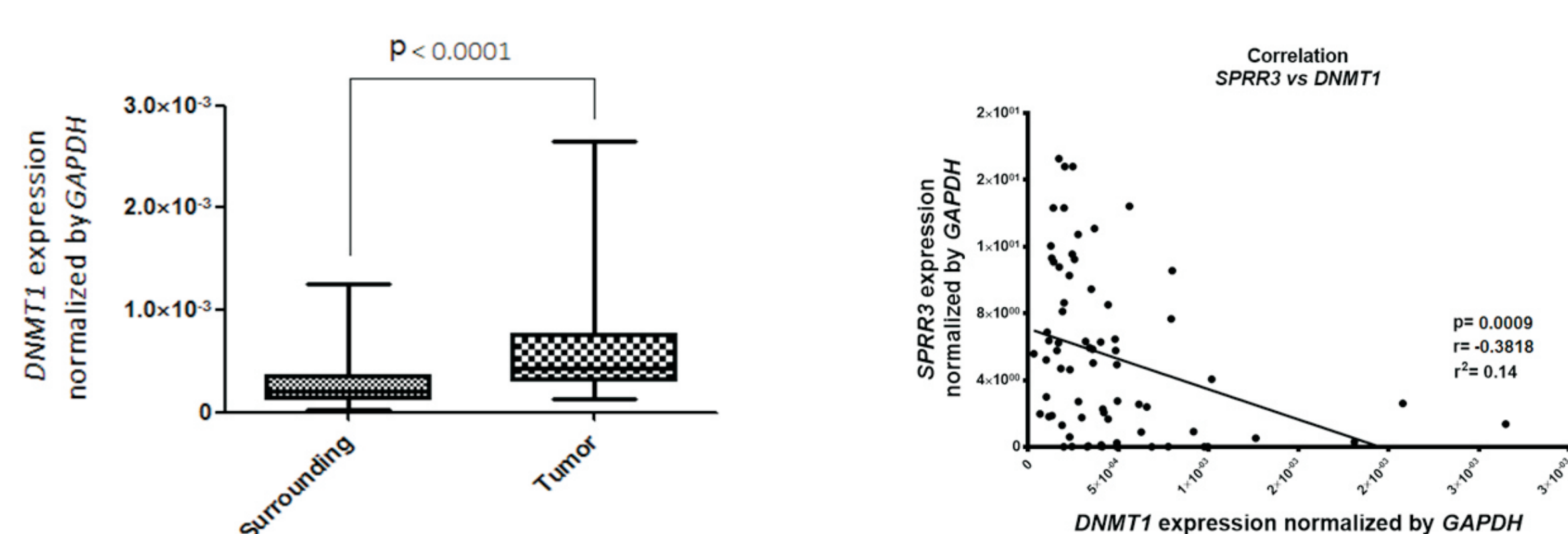


Figure 5: Comparison of *DNMT1* expression in ESCC patients.

Figure 6: Correlation between *SPRR3* and *DNMT1* expression in ESCC patients.

CONCLUSION

- Our data suggest DNA methylation induced by *DNMT1* as a possible mechanism for esophagin silencing in ESCC.

REFERENCES

- Parkin DM, et al (2005). CA Cancer J Clin. 55(2):74-108;
- INCA. Estimativa 2016/2017: Incidência de Câncer no Brasil. Instituto Nacional de Câncer José Alencar Gomes da Silva, Coordenação de Prevenção e Vigilância. Rio de Janeiro: INCA, 2016 [Internet]. Available from: <http://www.inca.gov.br/wcm/dncc/2015/index.asp>, accessed on 2016 Jan 7.
- Fischer DF et al. (1999). Genomics. Jan 1;55(1):88-99.
- De Simão et al (2011). Exp Mol Pathol. 2011 Oct;91(2):584-9. doi:10.1016/j.yexmp.2011.06.006. Epub 2011 Jul 12;
- Lopez-Serra, Esteller M. (2008) British Journal of Cancer, Reino Unido, 98, n. 12, p. 1881-1885
- Lima SC, et al (2011). Epigenetics. 6(10):1217-27

Funding sources: CNPq, FAPERJ, Ministério da Saúde

Projeto Gráfico: Serviço de Edição e Informação Técnico-Científica / INCA