

LncRNA PAPAS aggravates the progression of gastric cancer through regulating miRNA-188-5p

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Abstract. – **OBJECTIVE:** To uncover the biological effect of long non-coding RNA (lncRNA) PAPAS on the progression of gastric cancer (GC) by mediating microRNA-188-5p (miRNA-188-5p) level.

PATIENTS AND METHODS: The relative level of PAPAS was determined in GC tissues and cell lines by quantitative Real Time-Polymerase Chain Reaction (qRT-PCR). The Kaplan-Meier method was introduced to assess the prognostic potential of PAPAS in the overall survival of GC patients. Regulatory effects of PAPAS on proliferative, migratory, and invasive abilities of HGC-27 and AGS cells were detected by cell counting kit-8 (CCK-8), Transwell, and wound closure assay, respectively. Subsequently, the binding relation between PAPAS and miRNA-188-5p was verified by Dual-Luciferase reporter gene assay. Correlation between expression level of PAPAS and miRNA-188-5p in GC tissues was explored. Finally, rescue experiments were conducted to uncover the role of PAPAS and miRNA-188-5p in the progression of GC.

RESULTS: PAPAS was upregulated in GC tissues and cell lines compared to normal tissues. GC patients expressing high level of PAPAS offered worse prognosis compared to those with low level. The silence of PAPAS remarkably attenuated proliferative, migratory, and invasive abilities of HGC-27 cells. Overexpression of PAPAS in AGS cells offered the opposite trends. MiRNA-188-5p was the direct target of PAPAS, which was negatively regulated by PAPAS. MiRNA-188-5p was able to reverse the regulatory effects of PAPAS on proliferative, migratory, and invasive abilities of HGC-27 cells.

CONCLUSION: LncRNA PAPAS is upregulated in GC and closely related to lymphatic metastasis, distant metastasis, and poor prognosis in GC patients. PAPAS aggravate the malignant progression of GC by negatively regulating miRNA-188-5p level.

Keywords:

LncRNA PAPAS, MiRNA-188-5p, Gastric cancer (GC).

Introduction

Gastric cancer (GC) ranks second in tumor mortality globally. Early-stage GC lacks typical symptoms, leading to the low defective rate of GC. The majority of GC patients are diagnosed at an advanced stage, lose the optimal therapeutic opportunity^{1,2}. Although screening and therapeutic strategies for GC have been advanced, the 5-year survival rate is less than 30%^{3,4}. The pathogenesis of GC is a complex process, involving multiple genetic changes⁴⁻⁶. It is necessary to search for valuable prognostic and prognostic biomarkers for GC, thus improving the overall survival⁷⁻⁹.

With the rapid progress in the high-throughput sequencing, numerous non-coding transcripts have been discovered. Previously, mRNAs were believed to be the genetic center⁷⁻⁹. With in-depth analyses on the human whole genome transcriptome, only 1-2% genes are capable of encoding proteins. Non-coding RNAs are the majority of genome transcriptome, which are classified into microRNAs (miRNAs) and long non-coding RNAs (lncRNAs)¹⁰⁻¹². LncRNAs regulate gene expressions through many mechanisms^{13,14}. Authors^{15,16} have showed that lncRNA PAPAS exert a carcinogenic role in tumor progression. Nevertheless, its role in the progression of GC remains unclear.

MiRNAs are short, non-coding RNAs that suppress target gene expressions by degrading target genes or inhibiting their translation at a post-transcriptional level¹⁷. In recent years, abnormally expressed miRNAs have been identified to be oncogenes or tumor suppressors participating in the progression of GC^{18,19}. In this paper, we aim to investigate the potential functions of PAPAS and miRNA-188-5p in influencing the malignant phenotypes of GC cells. Our results may provide a theoretical basis for the clinical treatment of GC.

Patients and Methods

Collection of GC Samples

34 GC tissues and matched adjacent tissues were surgically resected. None of them received preoperative anti-tumor therapies. Their clinical indexes were collected for further analyses. Patients and their families have been fully informed. This investigation was approved by the Ethics Committee of the First Affiliated Hospital, Fujian Medical University.

Cell Culture

GC cell lines (AGS, BGC-823, SGC-7901, and HGC-27) and epithelial cells of the gastric mucosa (GES-1) were provided by the American Type Culture Collection (ATCC; Manassas, VA, USA). Cells were cultured in Dulbecco's Modified Eagle's Medium (DMEM; Gibco, Rockville, MD, USA) containing 10% fetal bovine serum (FBS; Gibco, Rockville, MD, USA) and maintained in a 37°C, 5% CO₂ incubator. The cell passage was conducted at 80-90% confluence using 1×trypsin+ ethylenediaminetetraacetic acid (EDTA).

Transfection

Transfection plasmids were provided by GenePharma (Shanghai, China). Cells were pre-seeded in the 6-well plates and transfected using Lipofectamine 2000 (Invitrogen, Carlsbad, CA, USA) at 40% confluence. At 48 h, cells were harvested for subsequent experiments.

Cell Counting Kit-8 (CCK-8) Assay

Cells were seeded in the 96-well plate with 2×10^3 cells per well. At the established time points, absorbance at 450 nm of each sample was recorded using the CCK-8 kit (Dojindo Laboratories, Kumamoto, Japan) for depicting the viability curves.

Transwell Migration Assay

Cell density was adjusted to a dose of 5.0×10^5 /mL. 2×10^5 cell suspension was applied in the upper side of transwell chamber (Millipore, Billerica, MA, USA). The 700 μ L of medium containing 10% FBS was applied in the bottom. After 48 h of incubation, cells migrated to the bottom side were subjected to 15 min fixation in methanol, followed by 20 min crystal violet staining and cell counting using a microscope. The number of migratory cells was counted in 5 randomly selected fields per sample.

Wound Healing Assay

Cells were seeded in a 6-well plate at a density of 5.0×10^5 cells/well. Up to 90% confluence, a 1 mL pipette tip was used to create an artificial wound in the confluent cell monolayer. The percentage of wound closure was calculated at 0 and 24 h, respectively.

Quantitative Real Time-Polymerase Chain Reaction (qRT-PCR)

Total RNA was extracted from cells using TRIzol reagent (Invitrogen, Carlsbad, CA, USA), purified by DNase I treatment and reversely transcribed into complementary DNA using nucleic acid (cDNA) synthesis Primescript RT Reagent (TaKaRa, Otsu, Shiga, Japan). The obtained cDNA was subjected to qRT-PCR using SYBR[®]Premix Ex Taq II (TaKaRa, Otsu, Shiga, Japan). QRT-PCR reaction conditions were as follows: 94°C for 30 s, 55°C for 30 s and 72°C for 90 s, for a total of 40 cycles. Glyceraldehyde 3-phosphate dehydrogenase (GAPDH) and U6 were used as internal references. Each sample was performed in triplicate. The relative level calculated by the $2^{-\Delta\Delta Ct}$ method and analyzed by iQ5 2.0 (Bio-Rad, Hercules, CA, USA). Primer sequences used in this study were as follows: PAPAN, F: 5'-GCAATCCTACTTAACGTC-3', R: 5'-GCGTAGCGATGTCGTCGCGCAACGGA-3'; miR-188-5p, F: 5'-CGGAATGTAACCATCCTCAACTG-3', R: 5'-ATGCGGTGTCGTGGCAGCTCG-3'; U6: F: 5'-GCTTCGGCAGCACATATACTAAAAT-3', R: 5'-CGCTTCAGAATTTGCGTGTGCAT-3'; GAPDH: F: 5'-CGCTCTCTGCTCCTCCTGTTC-3', R: 5'-ATCCGTTGACTCCGACCTTCAC-3'.

Dual-Luciferase Reporter Gene Assay

Cells were co-transfected with pmirGLO-PAPAN-WT/pmirGLO-PAPAN-MUT/pmirGLO and microRNA-188-5p mimics/NC using Lipofectamine 2000. 24 h later, co-transfected cells were harvested for determining the luciferase activity using a dual-luciferase reporter assay system (Promega, Madison, WI, USA).

Statistical Analysis

GraphPad Prism 5 V5.01 (La Jolla, CA, USA) was used for data analyses. Data were expressed as mean \pm standard deviation. Intergroup differences were analyzed by the *t*-test. Kaplan-Meier curves were introduced to assess survival analysis. $p < 0.05$ was considered as statistically significant.

Results

PAPAS was Highly Expressed in GC

We collected 34 GC tissues and matched normal ones. As qRT-PCR data revealed, PAPAS was upregulated in GC tissues relative to controls (Figure 1A). *In vitro* abundance of PAPAS was identically higher in GC cells relative to that of epithelial cells of the gastric mucosa (Figure 1B). It is believed that PAPAS could be an oncogene involved in the progression of GC.

PAPAS Expression was Correlated with Lymphatic Metastasis, Distant Metastasis and Overall Survival of GC

According to the collected clinical data of enrolled GC patients, we analyzed the correlation between PAPAS level and pathological characteristics of GC patients. As depicted in Table I, PAPAS level was positively correlated to lymphatic metastasis and distant metastasis of GC patients, rather than age, gender, and TNM staging. Kaplan-Meier curves were introduced to assess the survival of GC patients. The worse prognosis was observed in GC patients with high expression of PAPAS than those with low expression (Figure 1C).

PAPAS Promoted Proliferative, Migratory and Invasive Abilities of GC

Knockdown and overexpression levels of PAPAS were constructed in HGC-27 and AGS cells, respectively. Transfection of si-PAPAS markedly downregulated PAPAS level in HGC-27 cells and conversely, the transfection of pcDNA-PAPAS upregulated its level in AGS cells (Figure 2A). Decreased viability, migratory cell number, and wound closure percentage were observed in HGC-27 cells transfected with si-PAPAS. On the contrary, transfection of pcDNA-PAPAS enhanced the abovementioned indexes in AGS cells (Figure 2B-2D).

MiR-188-5p Was the Target Gene of PAPAS

MiR-188-5p was predicted to be the target of PAPAS by bioinformatics method revealed in our previous work (data not shown). Subsequently, dual-luciferase reporter gene assay illustrated a markable decrease in luciferase activity after co-transfection of PAPAS-WT and miRNA-188-5p in HGC-27 cells, verifying the binding relation between PAPAS and miRNA-188-5p (Figure 3A). The silencing of PAPAS upregulated miRNA-188-5p level

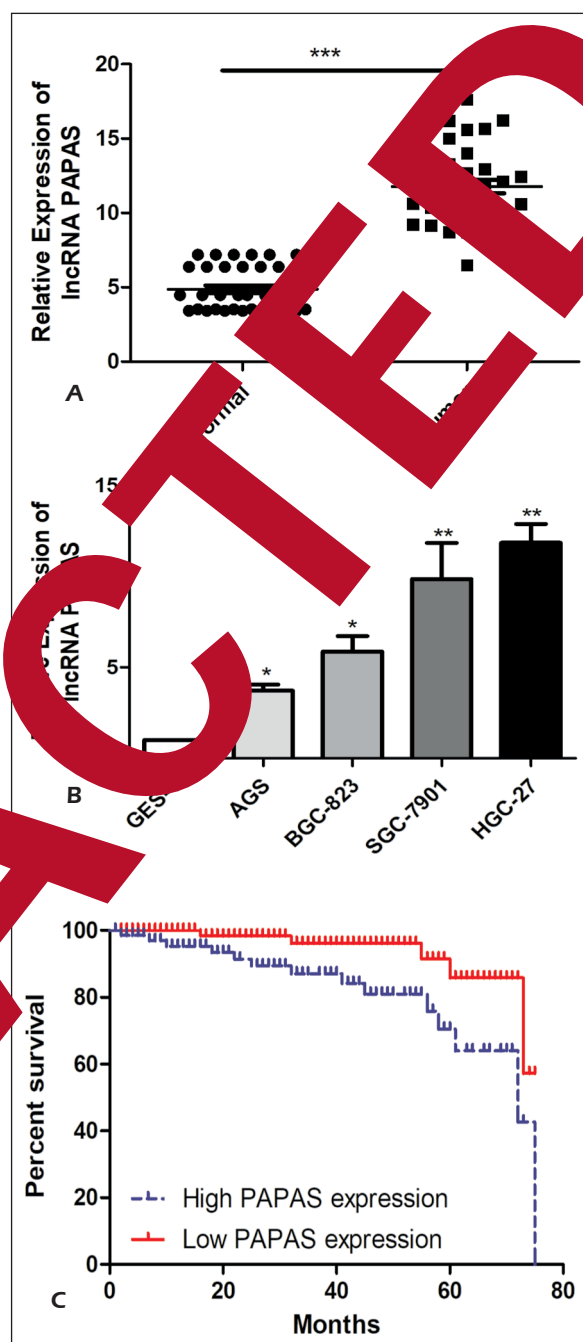


Figure 1. PAPAS was highly expressed in GC. **A**, Relative level of PAPAS in GC tissues and matched normal tissues. **B**, Relative level of PAPAS in GC cell lines (AGS, BGC-823, SGC-7901 and HGC-27) and epithelial cells of gastric mucosa (GES-1). **C**, Kaplan-Meier methods were introduced for assessing the overall survival in GC patients with high or low expression of PAPAS.

in HGC-27 cells and on the contrary, PAPAS overexpression downregulated miRNA-188-5p level in AGS cells (Figure 3B). Relative levels of miRNA-188-5p were determined in both GC tis-

Table I. Association of lncRNA PAPAS expression with clinicopathologic characteristics of gastric cancer.

| Parameters | No. of cases | PAPAS expression | | p-value |
|------------------------------|--------------|------------------|----------|---------|
| | | Low (%) | High (%) | |
| Age (years) | | | | |
| <60 | 14 | 8 | 6 | |
| ≥60 | 20 | 9 | 11 | |
| Gender | | | | 0.492 |
| Male | 17 | 9 | 7 | |
| Female | 17 | 8 | 10 | |
| T stage | | | | 0.00 |
| T1-T2 | 19 | 11 | 8 | |
| T3-T4 | 15 | 6 | 9 | |
| Lymph node metastasis | | | | |
| No | 21 | 14 | 7 | |
| Yes | 13 | 3 | 10 | |
| Distance metastasis | | | | 0.016 |
| No | 19 | 13 | 6 | |
| Yes | 15 | 4 | 11 | |

ues and cell lines, which were lowly expressed in GC relative to controls (Figures 3C, 3D). Furthermore, a negative correlation was identified between the expression levels of miRNA-188-5p and PAPAS in 34 cases of GC tissues (Figure 3E).

PAPAS Influenced the Progression of GC Through MiRNA-188-5p

It is speculated that miRNA-188-5p may be involved in PAPAS-mediated GC progression. We first tested the transfection efficiency of miRNA-188-5p mimics and inhibitor in AGS and HGC-27 cells, respectively (Figure 4A). Of note, the over-expression of miRNA-188-5p reversed the promotive effect of PAPAS on cell proliferation, migration, and wound closure in AGS cells. The silence of miRNA-188-5p identically reversed the inhibitory effect of PAPAS on cellular behavior in HGC-27 cells (Figure 4B). Hence, miRNA-188-5p was necessary for the progression of GC regulated by PAPAS.

Discussion

lncRNAs are a group of functional RNAs in the form of primary or spliced transcripts. They do not belong to small RNA groups (i.e., miRNAs) or structural RNAs (i.e., tRNA and rRNA). Through epigenetic, transcriptional, and post-transcriptional regulations, lncRNAs participate in various biological processes¹²⁻¹⁴. Invasive and metastasis are the key events in tumor

progression. Enhanced invasiveness stimulates tumor cells to spread to distant organs and further forms metastases^{20,21}. Metastatic spread is the most common cause of poor prognosis of GC²². There are plenty of lncRNAs discovered to influence the invasive and metastatic abilities of GC

PAPAS is a newly discovered lncRNA. It is reported that PAPAS is upregulated in liver cancer and closely related to poor prognosis of affected patients^{15,16}. The specific function of PAPAS in GC has been rarely reported. In this paper, PAPAS was found to be highly expressed in GC tissues and cell lines. Upregulated level of PAPAS indicated the aggravation of GC. Furthermore, by analyzing the clinical data of enrolled GC patients, PAPAS level was identified to be positively correlated to lymphatic metastasis, distant metastasis, and overall survival of GC patients. Hence, we believed that PAPAS exerted a carcinogenic role in GC. To uncover the *in vitro* effect of PAPAS on AGS and HGC-27 cells, a series of functional experiments were conducted. The silence of PAPAS remarkably attenuated proliferative, migratory, and invasive abilities of HGC-27 cells. Overexpression of PAPAS in AGS cells obtained the opposite trends.

Accumulating evidence has proved the interaction between lncRNAs and miRNAs^{9,10}. As we all know, miRNAs mediate downstream gene expressions by targeting corresponding mRNAs. Based on these findings, a novel regulatory loop lncRNA-miRNA-mRNA has been emerged, presenting a crucial function in tumor progres-

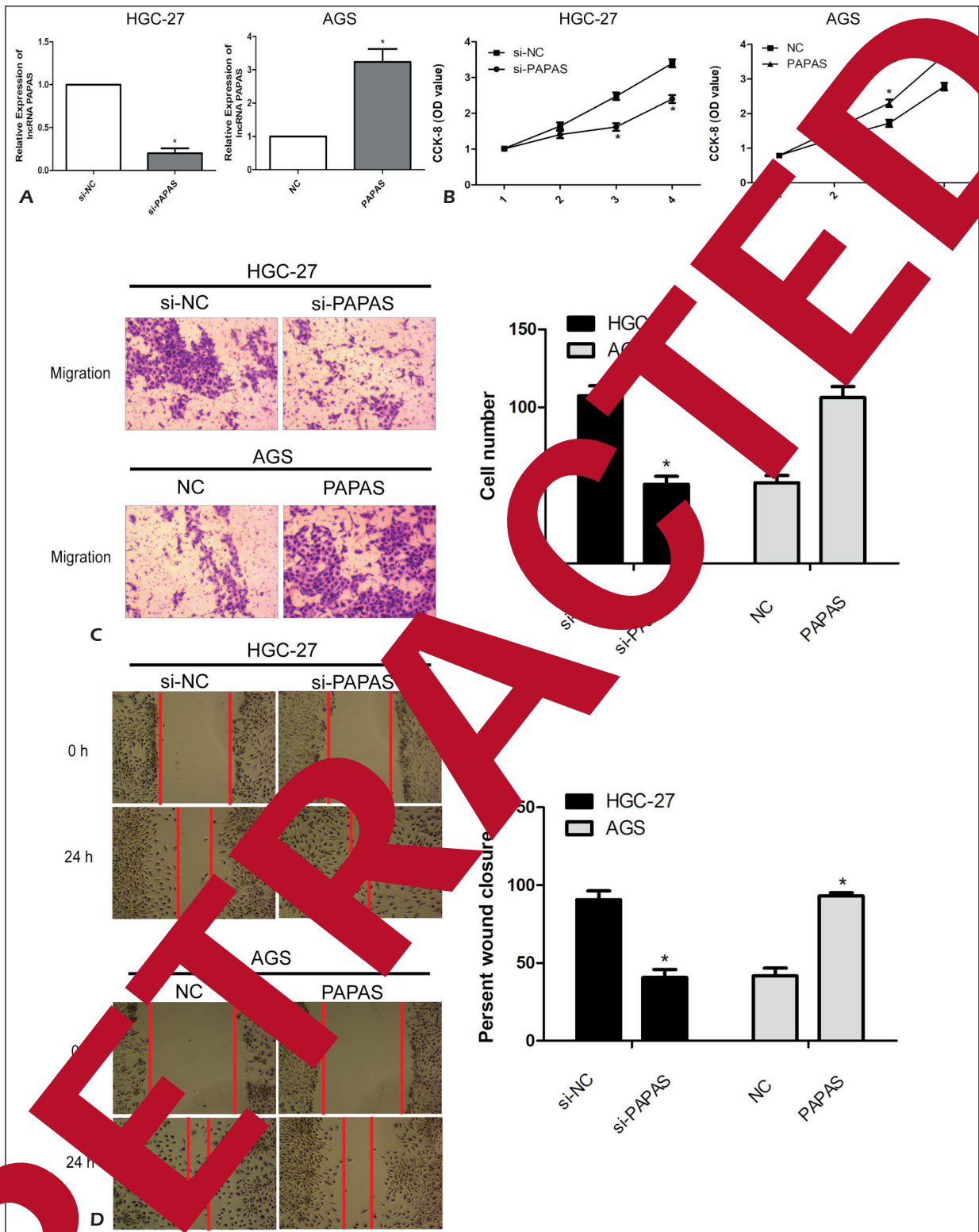


Fig 3 PAPAS expression was correlated with lymphatic metastasis, distant metastasis and overall survival of GC. **A**, Transfection efficiency of si-PAPAS and pcDNA-PAPAS in HGC-27 and AGS cells, respectively. **B**, CCK-8 assay showed the viability of HGC-27 cells transfected with si-NC or si-PAPAS, and in AGS cells transfected with NC or pcDNA-PAPAS. **C**, Transwell assay indicated the migratory cell number in HGC-27 cells transfected with si-NC or si-PAPAS, and in AGS cells transfected with NC or pcDNA-PAPAS (magnification $\times 40$). **D**, Wound healing assay detected percentage of wound closure in HGC-27 cells transfected with si-NC or si-PAPAS, and in AGS cells transfected with NC or pcDNA-PAPAS (magnification $\times 10$).

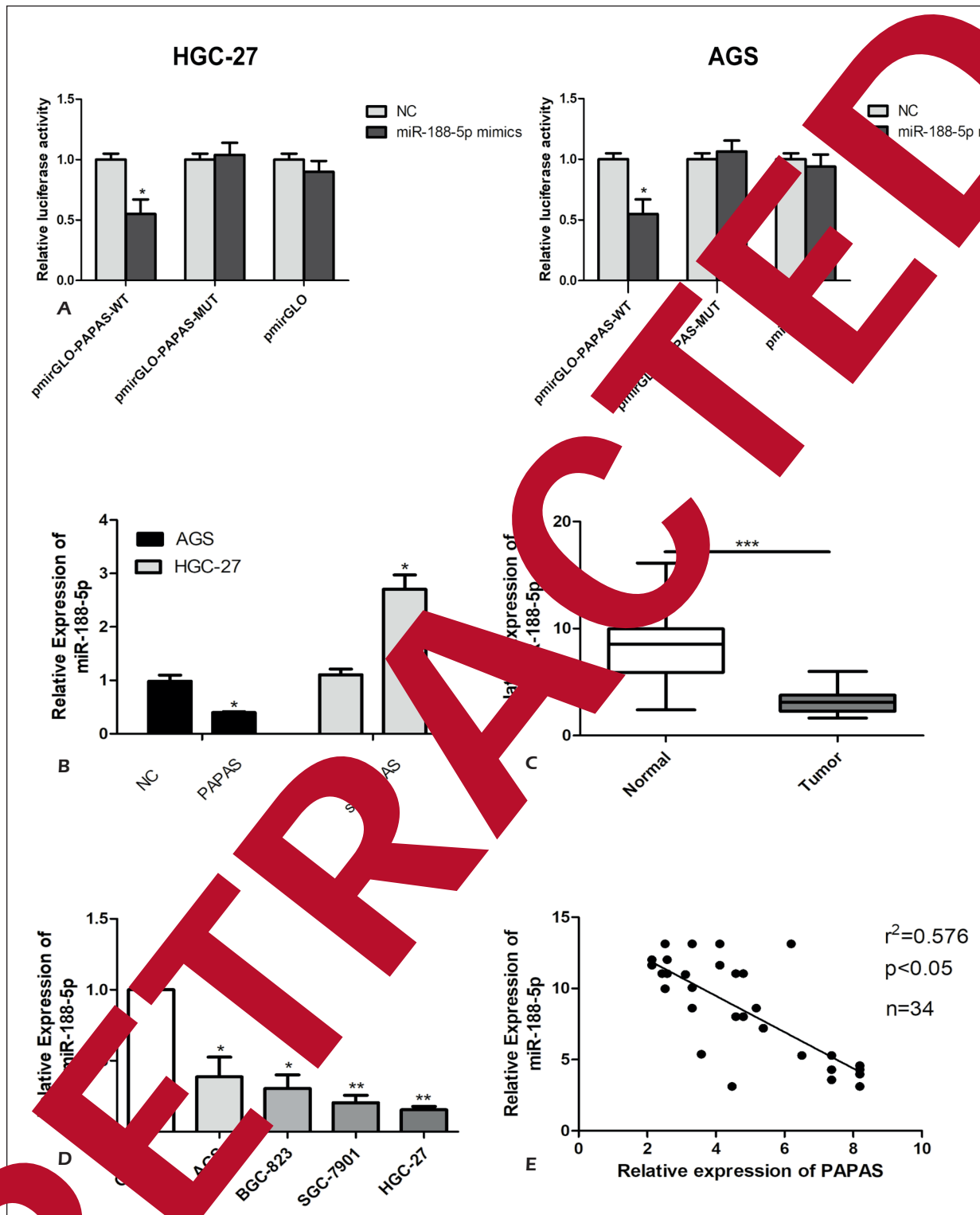


Figure 2 MiR-188-5p was the target gene of PAPAS. **A**, Relative luciferase activity in HGC-27 and AGS cells co-transfected with PAPAS-WT/pmirtGLO-PAPAS-MUT/pmirtGLO and NC/miR-188-5p mimics. **B**, Relative level of miR-188-5p in HGC-27 and AGS cells after transfection of si-PAPAS or pcDNA-PAPAS in HGC-27 and AGS cells, respectively. **C**, Relative level of miR-188-5p in tumor tissues and matched normal tissues. **D**, Relative level of miR-188-5p in GC cell lines (AGS, BGC-823, SGC-7901 and HGC-27) and epithelial cells of gastric mucosa (GES-1). **E**, Negative correlation between expression levels of miR-188-5p and PAPAS.

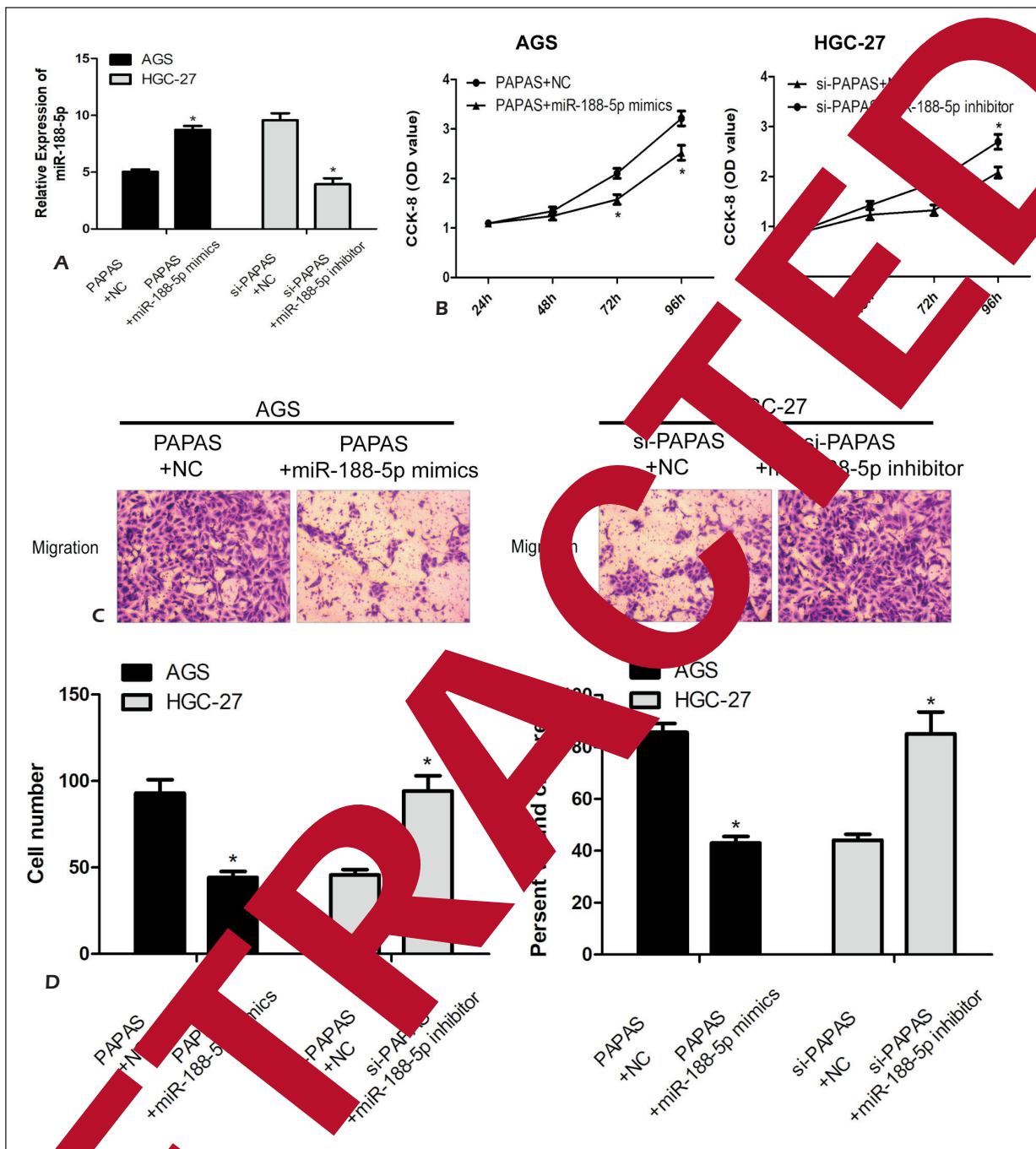


Fig 4. PAPAS influenced the progression of GC through miR-188-5p. AGS cells were transfected with pcDNA-PAPAS + NC or pcDNA-PAPAS + miR-188-5p mimics. HGC-27 cells were transfected with si-PAPAS + NC or si-PAPAS + miR-188-5p inhibitor. **A**, Relative level of miR-188-5p. **B**, CCK-8 assay showed the viability. **C**, Transwell assay indicated the migratory cell number (negative control = 40). **D**, Wound healing assay showed the percentage of wound closure.

sion. Previous bioinformatics analysis has determined the binding sequences in promoter regions of PAPAS and miRNA-188-5p. We detected that miRNA-188-5p was negatively regulated by PAPAS in GC. To verify whether PAPAS could interact with miRNA-188-5p to further influence

GC progression as a ceRNA, we conducted rescue experiments. Notably, miRNA-188-5p was able to reverse the regulatory effects of PAPAS on proliferative, migratory, and invasive abilities of GC cells. Therefore, PAPAS interacted with miRNA-188-5p to aggravate the progression of GC.

Conclusions

LcRNA PAPAS is upregulated in GC and closely related to lymphatic metastasis, distant metastasis, and poor prognosis of GC patients. PAPAS aggravate the malignant progression of GC by negatively regulating miRNA-188-5p level.

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Conflict of Interests

The Authors declared that they have no conflict of interests.

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