

# LncRNA SNHG16 promotes migration and invasion through suppression of CDKN1A in clear cell renal cell carcinoma

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**Abstract.** – **OBJECTIVE:** Researchers have discovered the important role of long noncoding RNAs (lncRNAs) in tumorigenesis. In this study, lncRNA SNHG16 was studied to identify whether it influences metastasis of clear cell renal cell carcinoma (ccRCC).

**PATIENTS AND METHODS:** SNHG16 expression was detected by quantitative real-time polymerase chain reaction (qRT-PCR) in both ccRCC cells and tissue samples. The association between prognosis of ccRCC patients and the expression of SNHG16 was analyzed through Kaplan-Meier method. Moreover, functional assays including wound healing assay and transwell assay were conducted. Bioinformatics analysis, qRT-PCR and Western blot assay were used to explore the underlying mechanism. Furthermore, animal experiments were conducted to explore the function of SNHG16 *in vivo*.

**RESULTS:** SNHG16 expression level was higher in ccRCC samples when compared with adjacent ones. Moreover, cell migration and cell invasion capacities were inhibited after SNHG16 was silenced *in vitro*. In addition, lncRNA and protein expression of CDKN1A was up-regulated after silencing SNHG16. Furthermore, the expression level of CDKN1A was negatively related to the expression of SNHG16 in ccRCC tissues. The experiments *in vivo* showed that silence of SNHG16 remarkably repressed the metastasis of ccRCC.

**CONCLUSION:** These results suggest that silencing SNHG16 can inhibit cell migration and invasion by upregulating CDKN1A in ccRCC.

**Key words:** Long noncoding RNA, SNHG16, Clear cell renal cell carcinoma, CDKN1A.

## Introduction

Renal cell carcinoma (RCC) accounts for the most common kidney cancer. Men are more likely to be diagnosed of RCC with the ratio of 1.6:1.0. Clear cell RCC (ccRCC), originating from the epithelium of the proximal tubule of the nephron, is the most common type of RCC with a prevalence of 70–80%. Although most ccRCC patients can be cured by surgical excision, 30% of newly diagnosed ccRCC cases presents with a median survival time of 13 months due to local and distant metastasis<sup>1</sup>. Therefore, it is urgent to explore the underlying mechanism and find a new therapeutic strategy.

Long noncoding RNAs (lncRNAs) are one of the newly discovered subgroups of noncoding RNAs (ncRNAs) which are longer than 200 nucleotides. Although lncRNAs cannot be translated into proteins, lncRNAs play a crucial role in a variety of biological processes, including proliferation, migration and metastasis in cancers. Notably, through negatively modulating miR-330-3p, LINC00052 serves as a tumor inhibitor in pancreatic cancer<sup>2</sup>. By competitively bind to miR-144, lncRNA LINC00483 modulated epithelial-mesenchymal transition and radiosensitivity in lung adenocarcinoma *via* interacting with HOXA10<sup>3</sup>. Moreover, lncRNA ZNF1 is significantly increased in hepatocellular carcinoma and gastric cancer which contributes to the development and progression of hepatocellular cancer<sup>4</sup>.

lncRNA SNHG16 functions as a novel oncogene in tumorigenesis. However, the function of SNHG16 in ccRCC remains unknown so far.

Our study revealed that the expression of SNHG16 was remarkably higher in ccRCC tissues. Moreover, silence of SNHG16 suppressed the migration and invasion of ccRCC cell *in vitro* and *in vivo*. Furthermore, the underlying mechanism how SNHG16 functioned in ccRCC development was also studied.

## Patients and Methods

### Cell Lines and Clinical Samples

48 ccRCC patients were enrolled for human tissues who received surgery at Liaoning Cancer Hospital & Institute. No radiotherapy or chemotherapy was performed before the surgery. Samples got from the surgery were saved immediately at  $-80^{\circ}\text{C}$ . The Research Ethics Committee of Liaoning Cancer Hospital & Institute approved this study. Written informed consent was offered by the patients.

### Cell Culture

Human renal cancer cells (Caki-1, ACHN 786-O) and human kidney epithelial cells (HK2) were got from American Type Culture Collection (ATCC). Culture medium consisted of fetal bovine serum (FBS; Invitrogen Life Technologies), Dulbecco's Modified Eagle's Medium (DMEM) as well as penicillin. Besides, cells were cultured in an incubator containing 5%  $\text{CO}_2$  at  $37^{\circ}\text{C}$ .

### Cell Transfection

Lentivirus expressing short interfering RNA (shRNA; Biossetia Inc., San Diego, CA, USA) targeting SNHG16 was cloned into the pLenti-EF1a-EGFP-F2A-Puro vector (Biossetia Inc., San Diego, CA, USA). The SNHG16 shRNA (sh-SNHG16) and the negative control shRNA were packaged and used for transfection in ccRCC cells. 48 h later, quantitative real-time polymerase chain reaction (qRT-PCR) was used to detect SNHG16 expression level in the cells.

### RNA Isolation and RT-PCR

Total RNA (Invitrogen, Carlsbad, CA, USA) was used to separate the total RNA. The reverse transcription kit (TaKaRa Biotechnology Co., Ltd., Dalian, China), the total RNA was reverse transcribed to complementary deoxyribose nucleic acids (cDNAs). The primer sequences are as follows: SNHG16 forward:

5'-GTGCCTCAGGAAGTCTC... and reverse: 5'-ATCCAAACA... ATCA... G-CAC-3'; glyceraldehyde 3-phosphate dehydrogenase (GAPDH), forward: 5'-... AAAAATCA... T-GGGGCAATGCTGG-3' and reverse: 5'-... AT-GGCATGGACTGTG... TCAT... Normal cycle was as follows: 30 sec at  $95^{\circ}\text{C}$ , 40 cycles at  $95^{\circ}\text{C}$ , 35 sec at  $60^{\circ}\text{C}$ .

### Wound Healing Assay

After transfected with shRNAs, Caki-1 cells were cultured in DMEM medium overnight. After scratched with a plastic pipette tip, cells were cultured in DMEM. Each assay was repeated independently. Wound closure was viewed at 24 h.

### Transwell Assay

For detecting cell invaded ability,  $5 \times 10^4$  Caki-1 cells in 200  $\mu\text{L}$  serum-free DMEM were seeded into a transwell chamber of an 8  $\mu\text{m}$  pore size (Corning Costar, Billerica, MA, USA) coated with Matrigel (BD Biosciences, Franklin Lakes, NJ, USA). DMEM and FBS was added into the bottom chamber. 48 h later, the top surface of the chamber was immersed for 10 min with 70% ethanol after wiped by cotton swab. The cells were stained in crystal violet for 30 min. The data for invaded membrane was counted in three fields.

### Bioinformatics Analysis

In this research, Starbase v2.0 (<http://starbase.sysu.edu.cn/starbase2/rbpLncRNA.php>) was used to predict the target proteins of SNHG16.

### Western Blot Analysis

Protein was extracted from cells by Reagent radioimmunoprecipitation assay (RIPA) (Beyotime, Shanghai, China). Bicinchoninic acid (BCA) protein assay kit was used for quantifying protein concentrations (TaKaRa Biotechnology Co., Ltd., Dalian, China). Sodium dodecyl sulphate-polyacrylamide gel electrophoresis (SDS-PAGE) was utilized to separate the target proteins. After replaced to the polyvinylidene fluoride (PVDF) membranes (Millipore, Billerica, MA, USA), they were incubated with antibodies. Rabbit anti-GAPDH, rabbit anti-CDKN1A and goat anti-rabbit secondary antibody were provided by Cell Signaling Technology (CST, Danvers, MA, USA). Image J software (NIH, Bethesda, MD, USA) was applied for assessment of protein expression.

### Tumor Metastasis Assay

Transfected cells were injected into tail vein of NOD/SCID mice (6 weeks old). The mice were sacrificed, and the lung were extracted after 4 weeks. Then the number of metastatic nodules in the lung was counted. The research was approved by the Animal Ethics Committee of Liaoning Cancer Hospital & Institute.

### Statistical Analysis

Statistical analysis was conducted by Statistical Product and Service Solutions (SPSS) 20.0 (SPSS, Chicago, IL, USA). Data were presented as mean ± SD (standard deviation). Student *t*-test and Kaplan-Meier method were performed to the data. It was considered of statistically significance, when  $p < 0.05$ .

## Results

### SNHG16 Expression Level in ccRCC Tissues

Firstly, SNHG16 expression was detected by qRT-PCR in 48 patients' tissues. As a result, SNHG16 was significantly upregulated in tumor tissue samples (Figure 1A). Those patients were divided into high SNHG16 expression group and low SNHG16 expression group according to the median expression. Kaplan-Meier analysis showed that patients in high SNHG16 expression group had a poorer disease-free survival when compared with the low SNHG16 expression group (Figure 1B).

### Silence of SNHG16 Inhibited Migration and Invasion of Caki-1 Cells

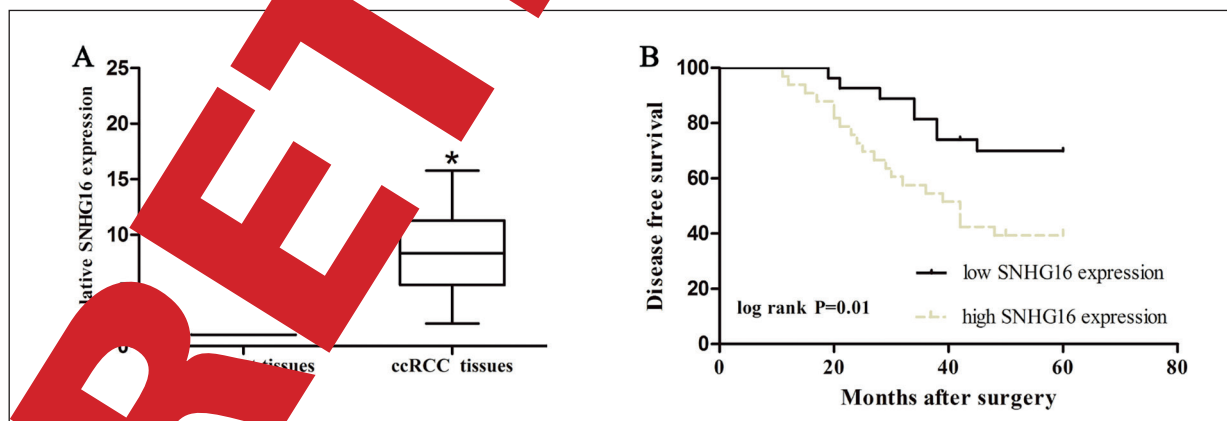
SNHG16 expression level of ccRCC cells was higher than that of HK2 cells (Figure 2A). Caki-1 ccRCC cell line was selected to silence SNHG16. Then SNHG16 expression was detected by qRT-PCR (Figure 2B). Moreover, results of wound healing assay showed that silence of SNHG16 significantly depressed the ability of migration in ccRCC cells (Figure 2C). The outcome of transwell assay also showed the number of invaded cells was remarkably decreased after SNHG16 was silenced in cck8 cells (Figure 2D).

### The Interaction Between CDKN1A and SNHG16 in ccRCC

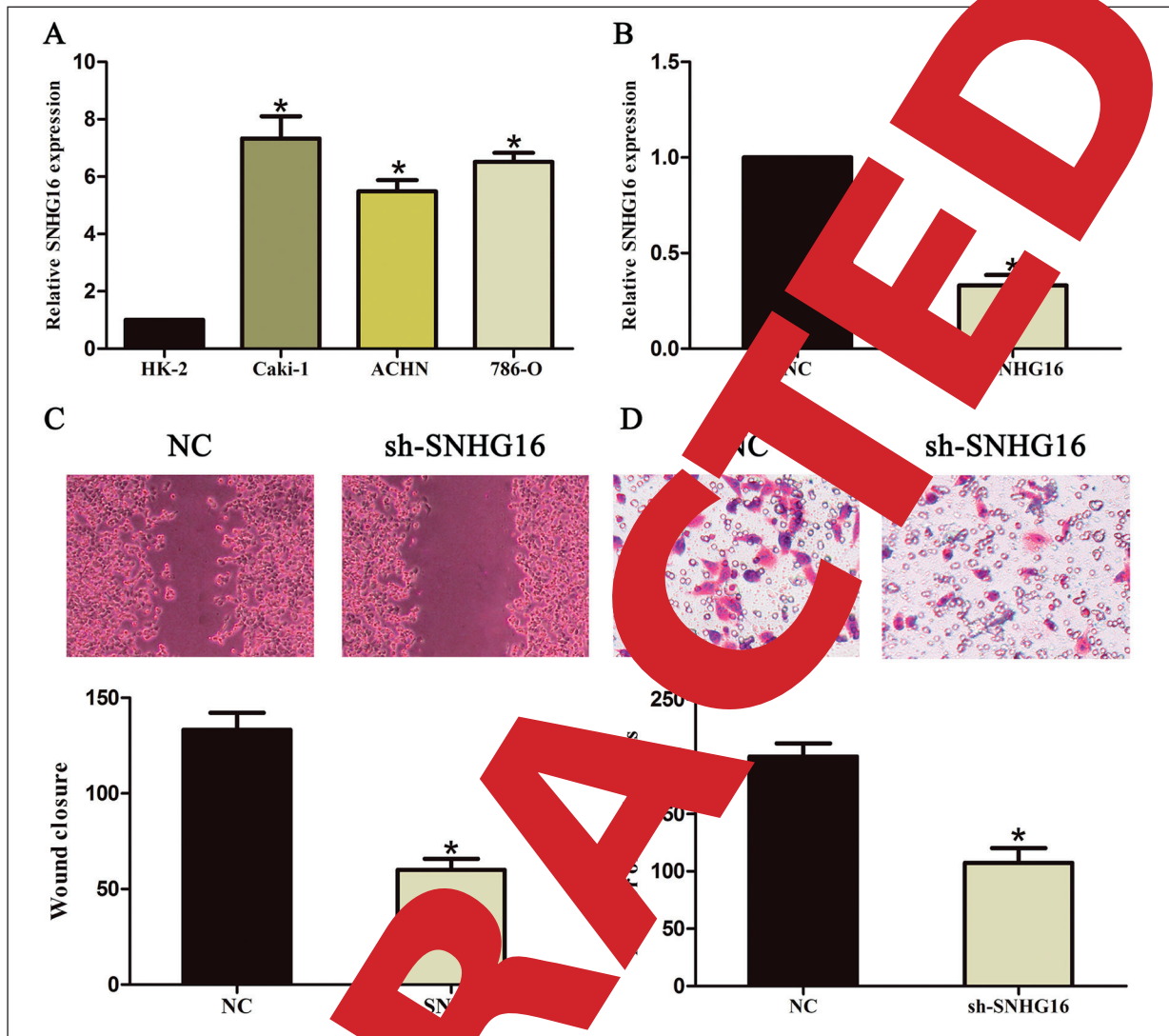
The results of bioinformative analysis, CDKN1A was predicted as one of the potential target proteins of SNHG16. Besides, qRT-PCR results showed that expression level of CDKN1A in ccRCC cells was significantly higher in SNHG16 overexpression (sh-NC+SNHG16) group when compared with the control level in negative control (NC) group (Figure 3A). The result of Western blot assay showed that after SNHG16 was silenced, CDKN1A could be upregulated at protein level (Figure 3B). Furthermore, correlation analysis demonstrated that CDKN1A expression level was negatively correlated to SNHG16 expression in ccRCC tissues (Figure 3C).

### Silence of SNHG16 Inhibited Tumor Metastasis In Vivo

The ability of SNHG16 in tumor metastasis was detected *in vivo*. The number of metastatic



**Figure 1** SNHG16 expression level of ccRCC patients. **A**, SNHG16 expression was significantly increased in the ccRCC tissues compared with adjacent tissues. **B**, High level of SNHG16 was associated with poorer disease-free survival of ccRCC patients. Data are presented as the mean ± standard error of the mean. \* $p < 0.05$ .



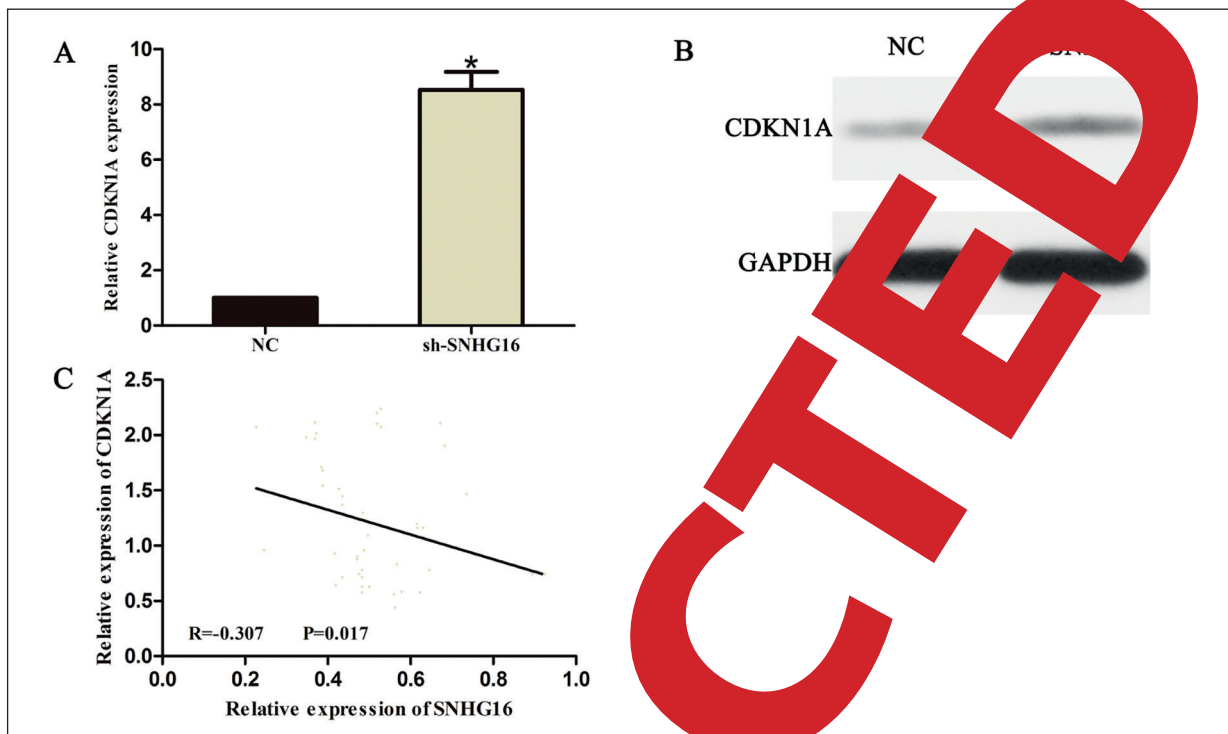
**Figure 2.** Silence of SNHG16 inhibited Caki-1 cell migration and invasion. **A**, Expression levels of SNHG16 relative to GAPDH were determined in human ccRCC cell lines and human kidney epithelial cell (HK-2) by qRT-PCR. **B**, SNHG16 expression in ccRCC cells treated with SNHG16 shRNA (sh-SNHG16) and the negative control (NC) was detected by qRT-PCR. GAPDH was used as an internal control. **C**, Wound healing assay showed that silence of SNHG16 significantly decreased cell migration in ccRCC cells (magnification: 20 $\times$ ). **D**, Transwell assay showed that number of invaded cells was decreased *via* silence of SNHG16 in ccRCC cells (magnification: 40 $\times$ ). The results represent the average of three independent experiments (mean  $\pm$  standard error of the mean). \* $p < 0.05$ , compared with the control cells.

nodules in the tumor from the sh-SNHG16 group was significantly reduced compared to NC group (Figure 3). Moreover, the expression level of SNHG16 and CDKN1A in extracted tumor tissues was detected by qRT-PCR. The results showed that SNHG16 was upregulated in sh-SNHG16 group compared with NC group (Figure 4B). CDKN1A was downregulated in sh-SNHG16 group compared with NC group (Figure 4C). Above results suggested that silence of SNHG16 could

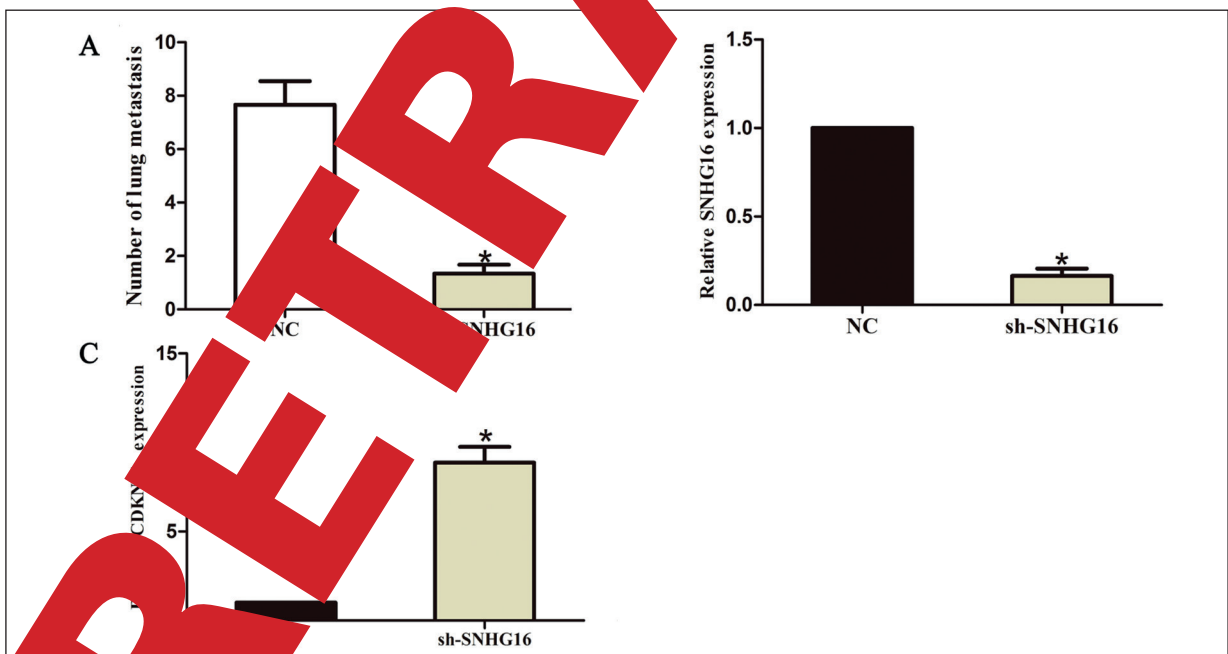
inhibit tumor metastasis *via* upregulating CDKN1A *in vivo*.

## Discussion

LncRNAs take part in a variety of important biological processes, which include the growth and metastasis of cancer. Moreover, lncRNAs may offer potential therapeutic targets in the



**Figure 3.** Interaction between SNHG16 and CDKN1A. **A**, RT-qPCR results showed that CDKN1A expression was increased in SNHG16 shRNA (sh-SNHG16) compared with the negative control (NC). **B**, Western blot assay revealed that CDKN1A protein expression was increased in SNHG16 shRNA (sh-SNHG16) compared with the negative control (NC). **C**, The linear correlation between the expression level of CDKN1A and SNHG16 in lung metastatic tissues. The results represent the average of three independent experiments. Data are presented as the mean  $\pm$  SD of three independent experiments. \* $p < 0.05$ .



**Figure 4.** Breakdown of SNHG16 inhibited tumor metastasis *in vivo*. **A**, The number of metastatic nodules in the lung from the sh-SNHG16 group was significantly reduced compared to negative control (NC) group. **B**, The relative expression of SNHG16 in metastatic nodules was examined by RT-qPCR. **C**, The relative expression of CDKN1A in metastatic nodules were examined by RT-qPCR. Data are presented as the mean  $\pm$  SD of three independent experiments. \* $p < 0.05$ .

future for most cancers. A lot of lncRNAs participate in the development of ccRCC. Consistently, lncRNA DHRS4-AS1 inhibits the progression of ccRCC and promotes the apoptosis of ccRCC cells<sup>8</sup>. By downregulating the expression of miR-196a, lncRNA TUG1 promotes cell proliferation and cell migration in ccRCC<sup>9</sup>. LncRNA DHRS4-AS1 functions as a tumor inhibitor and may be a potential prognostic biomarker in ccRCC<sup>8</sup>. LncRNA OTUD6B-AS1 suppresses cell proliferation in RCC and is associated with poor prognosis through Wnt/ $\beta$ -catenin signaling pathway<sup>10</sup>.

Small nucleolar RNA host gene 16 (SNHG16) is one of noncoding RNAs which has been reported to function as an oncogene and promote tumor progression in multiple cancers. Upregulation of SNHG16 contributes to cell proliferation and cell migration in gastric cancer<sup>11</sup>. SNHG16 enhances cell viability and cell migration, reduces cell apoptosis in colorectal cancer through regulating the Wnt pathway and lipid metabolism<sup>12</sup>. SNHG16 promotes the tumorigenesis of cervical cancer through miR-216-5p/ZEB1 signal pathway<sup>13</sup>. By silencing p21 epigenetically, SNHG16 accelerates tumor proliferation in bladder cancer which is associated with poor prognosis of the patients.

Our study revealed that SNHG16 was over-expressed in both ccRCC carcinoma samples and cells. The high expression of SNHG16 was associated with the poor prognosis of ccRCC. After SNHG16 was knocked down, the migratory ability of ccRCC was found to be inhibited. Meanwhile, after SNHG16 was knocked down, the invaded ability of ccRCC was found to be inhibited. Above results indicated that SNHG16 promoted metastasis of ccRCC and may be an oncogene.

To further explore the underlying mechanism of SNHG16 in ccRCC, bioinformatics analysis was utilized to predict the potential target proteins of SNHG16, among which Cyclin dependent kinase inhibitor, especially CDKN1A (p21<sup>Cip1</sup>) was a canonical polycomb target gene and tumor suppressor. Consistently, by up-regulating CDKN1A, a positive feedback loop, EZH2 controls the proliferation of T cells, Treg cells, B cell and enable the proliferation of T cells. CDKN1A gene is significantly correlated with prognosis of patients with gastric carcinoma resection<sup>16</sup>. CDKN1A could inhibit the response of cutaneous tumor to chemotherapy by manipulating langerhans cells and promoting Treg cell generation<sup>17</sup>. In the present study, we firstly discovered the interaction between CDKN1A and SNHG16.

The results showed that the expression level of CDKN1A could be upregulated after knockdown of SNHG16. Furthermore, CDKN1A expression in ccRCC tissues was negatively related to SNHG16 expression. Experiments *in vivo* showed that the lower-expressed SNHG16 resulted in the less lung metastasis nodules and the lower-expressed CDKN1A compared with the negative control group. Above results above suggested that silence of SNHG16 might inhibit the metastasis of ccRCC through up-regulating CDKN1A.

## Conclusions

Above data indicated that SNHG16 was remarkably upregulated in ccRCC tissues and was associated with ccRCC patients' poor survival. Besides, silence of SNHG16 could inhibit cell proliferation and invasion in ccRCC through up-regulating CDKN1A *in vitro* and *in vivo*. These findings indicated that SNHG16 may contribute to therapy of ccRCC as a candidate target.

## Conflict of Interest

The authors declare that they have no conflict of interests.

## Acknowledgements

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