LncRNA SNHG1 promotes cell proliferation in laryngeal cancer via Notch1 signaling pathway

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Abstract. – OBJECTIVE: We aimed at elucidating the potential function of long noncoding ribonucleic acids (IncRNAs) small nucleolar RNA host gene 1 (SNHG1) in the progression of laryngeal cancer (LC) and its underlying mechanism.

PATIENTS AND METHODS: Relative level of SNHG1 in LC tissues and controls was determined by quantitative real-time polymerase chain reaction (qRT-PCR). Its expression in LC patients with different tumor stages and statues of lymph node metastasis was examined as well. Correlation between SNHG1 expression and prognosis of LC patients was evaluated by the Kaplan-Meier method. SNHG1 siRNA (si-SNHG1) was constructed for downregulation of SNHG1 expression. Potential effects of downregulated SNHG1 on viability and proliferation of LC cells were detected by cell counting kit-8 (CCK-8) and colony formation assay, respectively. After knockdown of SNHG1, relative levels of Notch1 and hairy, and enhancer of split homolog-1 (Hes1) were determined by qRT-PCR and Western blot. Regulatory effects of SNHG1/Notch1 axis on biological behaviors of LC were finally evaluated.

RESULTS: SNHG1 was upregulated in LC tissues than that of controls. Besides, its level was higher in LC with T3-T4 relative to those of T1-T2. Higher abundance of SNHG1 was identified in LC patients with lymph node metastasis compared with those non-metastatic patients. Survival analysis indicated that LC patients with high-level SNHG1 had worse overall survival. Knockdown of SNHG1 in Tu212 and Hep2 cells downregulated relative levels of Notch1 and Hes1. Moreover, SNHG1 knockdown resulted in decreased viability and proliferative ability of LC cells. Notch1 overexpression could reverse the regulatory effects of SNHG1 on viability and proliferation of LC cells.

CONCLUSIONS: LncRNA SNHG1 is highly expressed in LC tissues. It promotes the proliferation of LC cells by inhibiting Notch1 pathway, thereby promoting the progression of LC.

Key Words:

Laryngeal cancer, SNHG1, Notch1, Proliferation.

Introduction

Laryngeal cancer (LC) is the most common aggressive malignancy of the head and neck. The incidence of LC has increased in recent years. The major features of LC include hoarseness, difficulty in swallowing and breathing, and neck mass². Studies have reported that the etiology of LC involves both genetic factors and environmental factors, but its molecular mechanism is still unclear³. At present, therapeutic approaches for LC, including chemotherapy, radiotherapy and surgical intervention have been advanced. However, the prognosis of LC patients is still poor^{4,5}. This study focuses on the potential pathogenesis of LC, providing far-reaching clinical significances for LC treatment.

Long noncoding ribonucleic acids (IncRNAs) are a type of RNAs ranging in length from 200 nt to 100,000 nt. They regulate gene expressions at epigenetic, transcriptional, and post-transcriptional levels⁶. Chen et al⁷ have shown differentially expressed lncRNAs in different tissues, exerting key regulatory roles in a series of cellular processes, such as metabolism, proliferation, and apoptosis. Many tumor-related lncRNAs have been reported. LncRNA NF-KappaB interacting (LncRNA NKILA), regulates proliferative and invasive abilities of LC cells. LncRNA HOXA11-AS is associated with progression of laryngeal squamous cell carcinoma. Downregulation of lncRNA AFAP1-AS1 inhibits tumor growth by inducing apoptosis and suppressing metastasis in thyroid cancer⁸⁻¹¹. Cui et al¹² have found that the SNHG1/miR-101-3-p/SOX9/Wnt/β-catenin axis contributes to the aggravation of cancer progression in non-small cell lung cancer. However, the mechanism of SNHG1 in the progression of LC is unclear.

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The Notch signaling pathway is an intercellular pathway that regulates cell fate¹³, proliferation¹⁴, apoptosis¹⁵, stem cell survival and self-renewal^{16,17}. The Notch pathway has been reported to exert an important role in tumor cell reprogramming to GSLC phenotype^{18,19}. To date, four Notch receptors (Notch1-4) with the corresponding ligand delta-1, delta-3, delta-4, Jagged-1, and Jagged-2, respectively, have been identified²⁰. As a transmembrane receptor, Notch1 is capable of regulating the growth and proliferation of glioma²¹. Krikelis et al²² illustrated the upregulation of Notch-related genes in LC cells.

In this study, we examined SNHG1 level in LC patients and its potential correlation to the prognosis of LC. Subsequently, regulatory effects of SNHG1 on cellular behaviors of LC cells *via* Notch1 pathway were elucidated.

Patients and Methods

Sample Collection

LC tissues and paracancerous tissues (>3 cm away from the tumor edge) were surgically resected from 42 LC patients admitted in Renmin Hospital of Wuhan University from December 2016 to September 2018. Tissue samples were immediately preserved in liquid nitrogen. Enrolled LC patients did not receive preoperative anti-tumor treatments and were pathologically diagnosed with LC. This research was approved by the Renmin Hospital of Wuhan University Ethics Committee. Each patient or their guardian was informed consent.

Cell Culture

Tu212 and Hep2 cell lines were provided by Cell Bank, Chinese Academy of Science (Shanghai, China). Cells were cultured in RIPA-1640 (Roswell Park Memorial Institute (RPMI)-1640, Gibco, Grand Island, NY, USA) containing 10% FBS (fetal bovine serum: Gibco, Grand Island, NY, USA) and 1% penicillin/streptomycin, and preserved in a 37°C, 5%CO₂ incubator. Corresponding treatment was performed at the cell confluence of 60%.

Cell Transfection

Until 60% of confluence, cell transfection was performed using Lipofectamine[™] 2000 (Invitrogen, Carlsbad, CA, USA). Transfection vectors used in this study included si-SNHG1, si-NC,

complementary deoxyribonucleic acid (cDNA) pcDNA-Notch1 and pcDNA-NC. The medium was replaced at 6 h.

RNA Extraction and Quantitative Real-Time Polymerase Chain Reaction (qRT-PCR)

Total RNA was extracted from LC cells using TRIzol reagent (Invitrogen, Carlsbad, CA, USA). RNA was subjected to determination of purity and concentration using a spectrophotometer. The complementary deoxyribonucleic acid (cDNA) was obtained by reverse transcription of RNA and amplified by PCR. Primer sequence were as follows: SNHG1, F: 5'-CCGCTCGAGATTTAG-GTGACACTATAGAAGTTCTCATTTTTC-TACTGCTCG-3', R: 5'-ATAGTTTAGCGG-CCGCTTTTTTTTTTTTTTTTTTTTATGTAAT-CAATCATTTTAT-3'; Notch1, F: 5'-ATGACT-GCCCAGGAAACAAC-3', R: 5'-GTCCAGC-CATTGACACACAC-3'; Hes-1, F: 5'-CAACAC-GACACCGGACAAAC-3', R: 5'-CGGAGGT-GCTTCACTGTCAT-3'; Glyceraldehyde 3-phosphate dehydrogenase (GAPDH), F: 5'-CGGAGT-CAACGGATTTGGTCGT-3', R: 5'-GGGAAG-GATCTGTCTCTGACC-3'.

Cell Viability Determination

Cells were seeded in a 96-well plate with 5 replicate wells per group. At the appointed time points, $10~\mu L$ of cell counting kit-8 (CCK-8) solution (Dojindo, Kumamoto, Japan) was applied per well. After incubation for 2 h, the recorded absorbance at 450 nm using a microplate reader was used for plotting the growth curve.

Colony Formation Assay

Cells were prepared for suspension and seeded in the 6-well plate (Corning, Corning, NY, USA) with 2.5×10³ cells per well. Each group had 3 replicate wells. Cells were incubated for 7 days. After fixation in 95% ethanol and dye with 1% violet crystal for 20 min, colonies were captured for counting under a microscope.

Western Blot

Proteins were extracted from cells and loaded for electrophoresis. After transferring on a polyvinylidene difluoride (PVDF) membrane (Millipore, Billerica, MA, USA), it was blocked in 5% skim milk for 2 h, incubated with primary antibodies at 4°C overnight and secondary antibodies (Abcam, Cambridge, MA, USA) for 2 h. Bands were exposed by enhanced chemiluminescence

(ECL) and analyzed by Image Software (Version X; Silver Springs, MD, USA).

Statistical Analysis

Statistical Product and Service Solutions (SPSS) 16.0 (SPSS Inc., Chicago, IL, USA) was used for all statistical analysis. Data were represented as mean \pm SD (standard deviation). The *t*-test was used to analyze intergroup differences. The Kaplan-Meier method was introduced for evaluating the overall survival and differences between curves were analyzed by the log-rank test. p<0.05 indicated a significant difference.

Results

Highly Expressed SNHG1 in LC Predicted a Poor Prognosis

Compared to paracancerous tissues, SNHG1 was highly expressed in LC as qRT-PCR data

revealed (Figure 1A). Besides, SNHG1 expression remained higher in LC with T3-T4 relative to those with T1-T2 (Figure 1B). In comparison to non-metastatic LC patients, those with lymph node metastasis presented a higher level of SN-HG1 (Figure 1C). The Kaplan-Meier analysis indicated that LC patients with high-level SN-HG1 had worse survival than those with a low level (Figure 1D). The above data indicated the involvement of SNHG1 in LC, which may be related to poor prognosis of LC.

SNHG1 Knockdown Inhibited the Growth of LC Cells

It is reported that SNHG1 is highly expressed in colorectal cancer cells and promotes the tumorigenesis by upregulating CCND2²³. To further investigate the role of SNHG1 in LC, we silenced the expression of SNHG1 in Tu212 and Hep2 cells by transfection of si-SNHG1 (Figure 2A). Knockdown of SNHG1 markedly suppressed viability

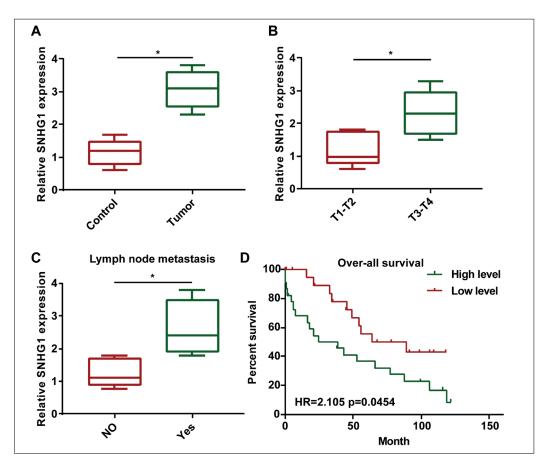


Figure 1. Upregulation of SNHG1 in LC predicted a poor prognosis *A*, SNHG1 was highly expressed in LC compared to paracancerous tissues. *B*, SNHG1 expression remained higher in LC with T3-T4 relative to those with T1-T2. *C*, LC patients with lymph node metastasis presented a higher level of SNHG1 compared with non-metastatic ones. **D**, Kaplan-Meier analysis indicated that LC patients with high-level SNHG1 had worse survival than those with low level.

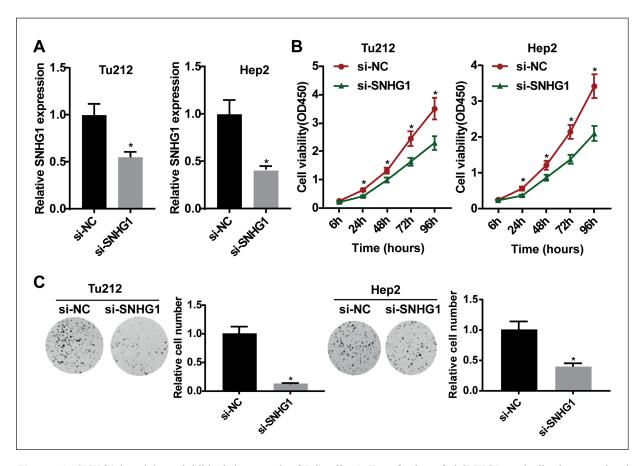


Figure 2. SNHG1 knockdown inhibited the growth of LC cells *A*, Transfection of si-SNHG1 markedly downregulated SNHG1 level in Tu212 and Hep2 cells. *B*, CCK-8 assay showed that knockdown of SNHG1 markedly suppressed viability of LC cells. *C*, Colony formation assay showed that knockdown of SNHG1 inhibited proliferative ability in Tu212 and Hep2 cells.

of LC cells (Figure 2B). Meanwhile, colony formation assay revealed the inhibited proliferative ability in Tu212 and Hep2 cells transfected with si-SNHG1 (Figure 2C). Hence, the knockdown of SNHG1 was proved to inhibit the growth of LC cells.

SNHG1 Knockdown Inhibited the Notch1 Pathway

SNHG1 has been identified to promote the proliferative, migratory and invasive abilities of pituitary tumor cells by activating TGFBR2/SMAD3 and RAB11A/Wnt/β-catenin pathway²⁴. Here, we found that SNHG1 knockdown suppressed the mRNA levels of Notch1 and Hes1 in TU212 and Hep2 cells (Figure 3A, 3C). Western blot also showed the downregulated protein levels of Notch1 and Hes1 due to SNHG1 knockdown (Figure 3B, 3D). We believed that SNHG1 negatively regulated expressions of Notch1 and Hes1 in LC cells.

SNHG1 Regulated Proliferative Ability of LC Cells Via the Notch1 Pathway

We speculated the involvement of Notch1 pathway in SNHG1-regulated progression of LC. Firstly, we found the downregulated mRNA levels of Notch1 and Hes, due to SNHG1 knockdown that were partially reversed after co-transfection of si-SNHG1 and pcDNA-Notch1 (Figure 4A, 4C). Similar trends were yielded at the protein levels of Notch1 and Hes1 as well (Figure 4B, 4D). CCK-8 assay showed that Notch1 overexpression reversed the inhibited viability in LC cells with SNHG1 knockdown (Figure 4E). The above results demonstrated that SNHG1 promoted LC cells to proliferate by mediating Notch1 and Hes1.

Discussion

The key role of lncRNA in cancer progression has been extensively studied²⁵. Dysregulated ln-

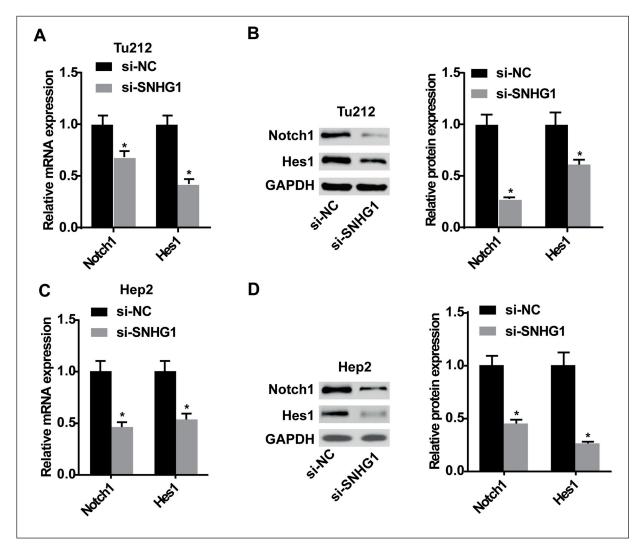


Figure 3. SNHG1 knockdown inhibited the Notch1 pathway *A*, *B*, SNHG1 knockdown suppressed the mRNA and protein levels of Notch1 and Hes1 in TU212 cells. *C*, *D*, SNHG1 knockdown suppressed the mRNA and protein levels of Notch1 and Hes1 in Hep2 cells.

cRNAs are found to be associated with many cancers²³. A large number of lncRNAs present vital functions in tumor-related pathways, thus mediating the occurrence and progression of tumors by various aspects²⁶⁻²⁸. Previous studies have found that SNHG1 is upregulated in tumors, including colorectal cancer and lung cancer^{29,30}. In this paper, SNHG1 was highly expressed in LC patients, especially in those with worse tumor stage. LC patients with high-level SNHG1 were tended to suffer worse prognosis.

A growing number of evidence has proved the carcinogenic role of SNHG1 in tumors. SNHG1 is identified to be upregulated in lung cancer cells. *In vitro* experiments showed that SNHG1 knockdown inhibits lung cancer cells to proliferate³¹.

Zhang et al³² suggested that SNHG1 accelerates the proliferation of liver cancer by inhibiting expressions of p53 and its target genes. Besides, high level of SNHG1 indicates a poor prognosis of liver cancer. The specific mechanism of SN-HG1 in LC, however, remains unclear³³. This study showed that SNHG1 knockdown inhibited relative levels of Notch1 and Hes1. Meanwhile, the viability of LC cells was suppressed by SN-HG1 knockdown.

The Notch pathway has been reported³⁴ to exert anti-tumor or tumorigenic effects in various human malignancies. Li et al³⁵ have reported that the Notch pathway inhibits tumorigenesis of cervical cancer. Notch1 is a key factor of the Notch pathway. The classical target genes

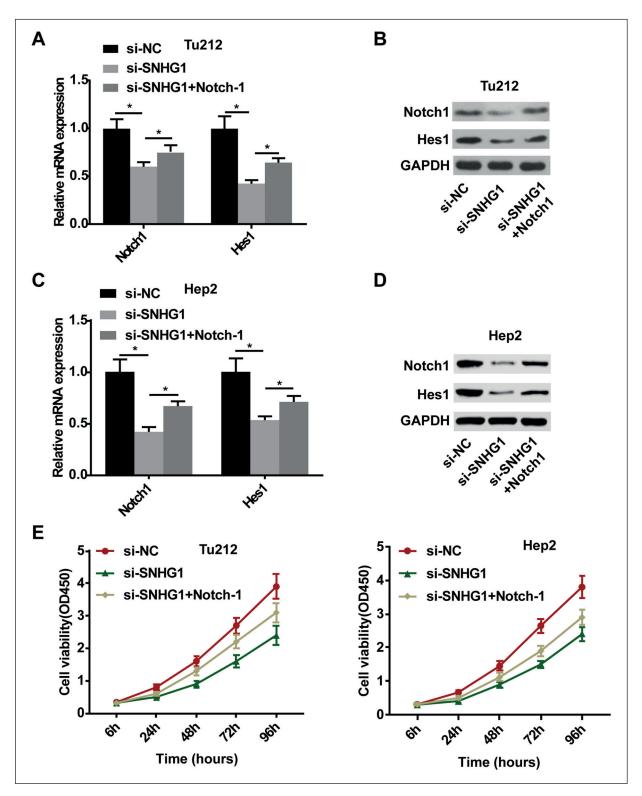


Figure 4. SNHG1 regulated the proliferative ability of LC cells *via* the Notch1 pathway *A*, *B*, Downregulated mRNA and protein levels of Notch1 and Hes1 due to SNHG1 knockdown were partially reversed after co-transfection of si-SNHG1 and pcDNA-Notch1 in TU212 cells. *C*, *D*, Downregulated mRNA and protein levels of Notch1 and Hes1 due to SNHG1 knockdown were partially reversed after co-transfection of si-SNHG1 and pcDNA-Notch1 in Hep2 cells. *E*, CCK-8 assay showed that Notch1 overexpression reversed the inhibited viability in LC cells with SNHG1 knockdown.

of Notch1 include hairy enhancer of split (Hes) and Hes related with YRPW motif (Hey)³⁶. Yuan et al³⁷ have found that proliferation and metastasis of NSCLC cells are regulated by Notch1/Hes1. In the present study, knockdown of SNHG1 in LC cells downregulated Notch1 expression. Overexpression of Notch1 reversed the decreased viability due to knockdown of SNHG1. It is indicated that SNHG1 regulated the proliferative ability of LC cells by mediating Notch1 and Hes1.

Conclusions

We found that lncRNA SNHG1 is highly expressed in LC tissues. It promotes the proliferation of LC cells by inhibiting Notch1 pathway, thereby promoting the progression of LC. SN-HG1 may be a potential therapeutic and prognostic target for LC.

Conflict of Interest

The Authors declare that they have no conflict of interests.

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