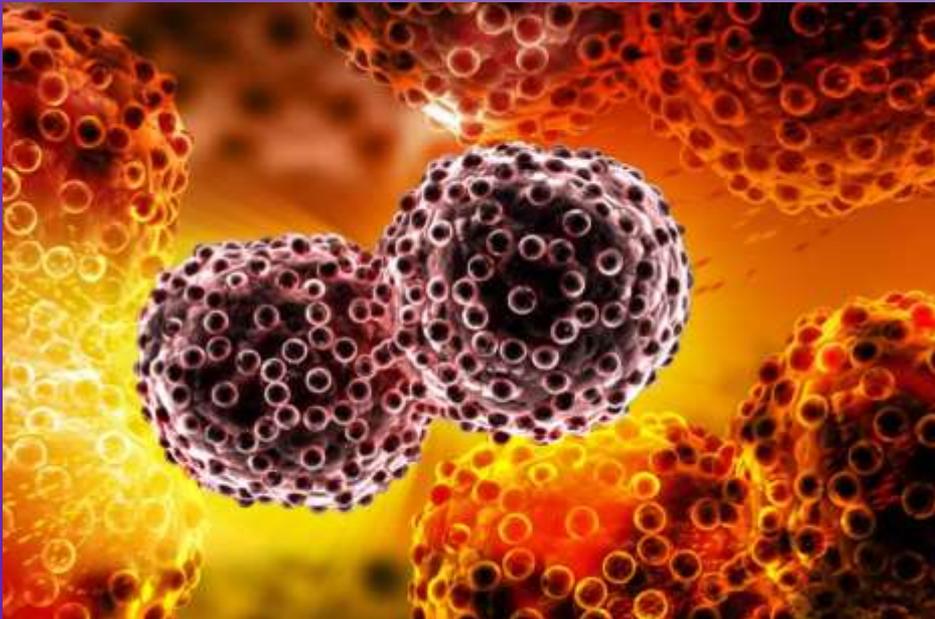


# Neoplasia 4



Dr. Eman Kreishan, M.D.

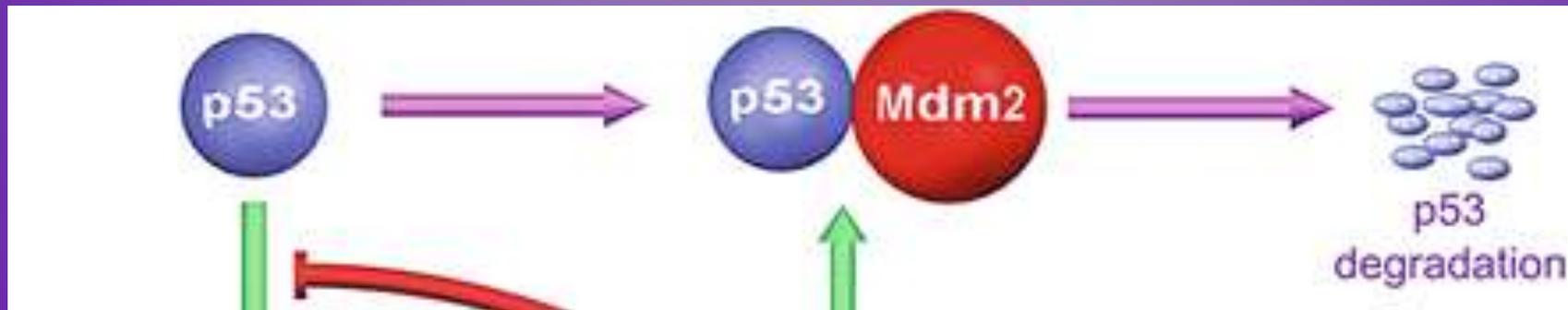
29-12-2021

## 2.TP53: Guardian of the Genome

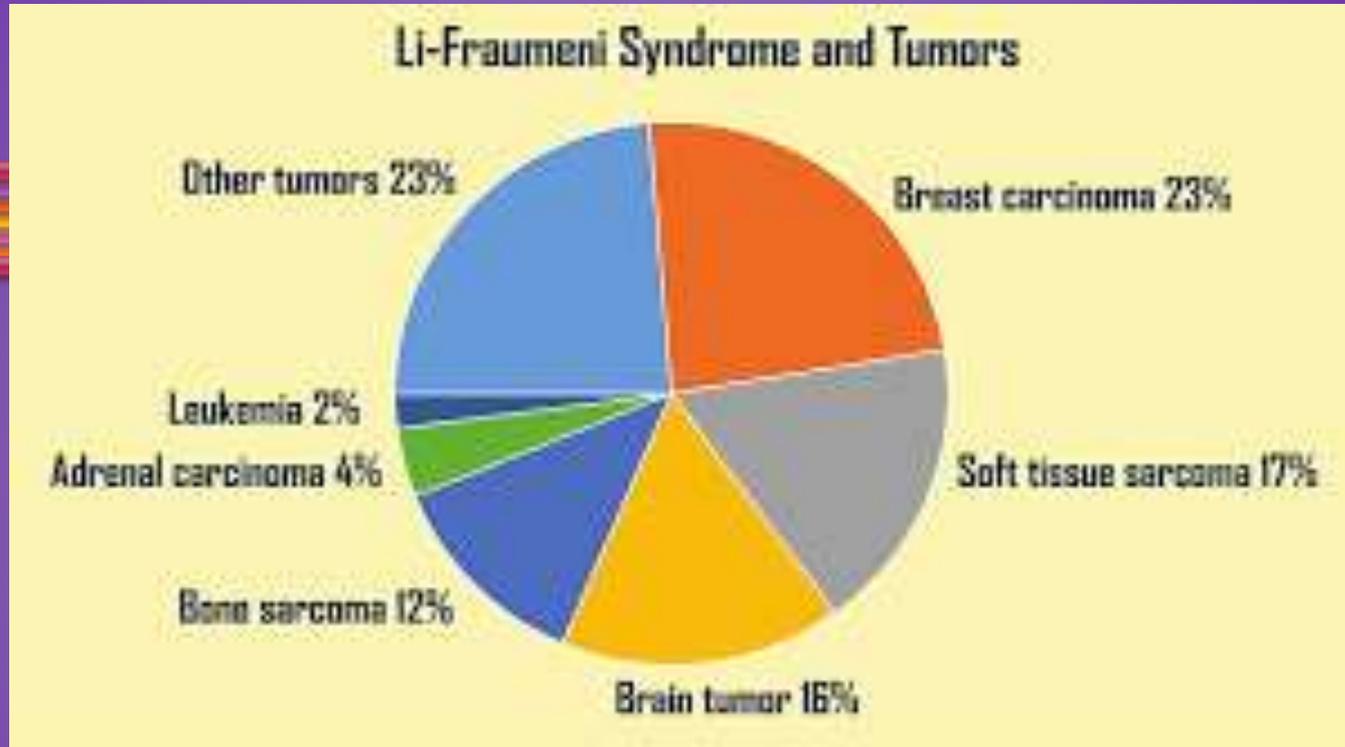
- The p53 protein is a transcription factor that thwarts neoplastic transformation by three interlocking mechanisms:
  - activation of temporary cell cycle arrest (termed quiescence).
  - induction of permanent cell cycle arrest (termed senescence).
  - triggering of programmed cell death (termed apoptosis)
- p53 plays a central role in maintaining the integrity of the genome.



In nonstressed, healthy cells, p53 has a short half-life (20 minutes) because of its association with MDM2, a protein that targets p53 for destruction



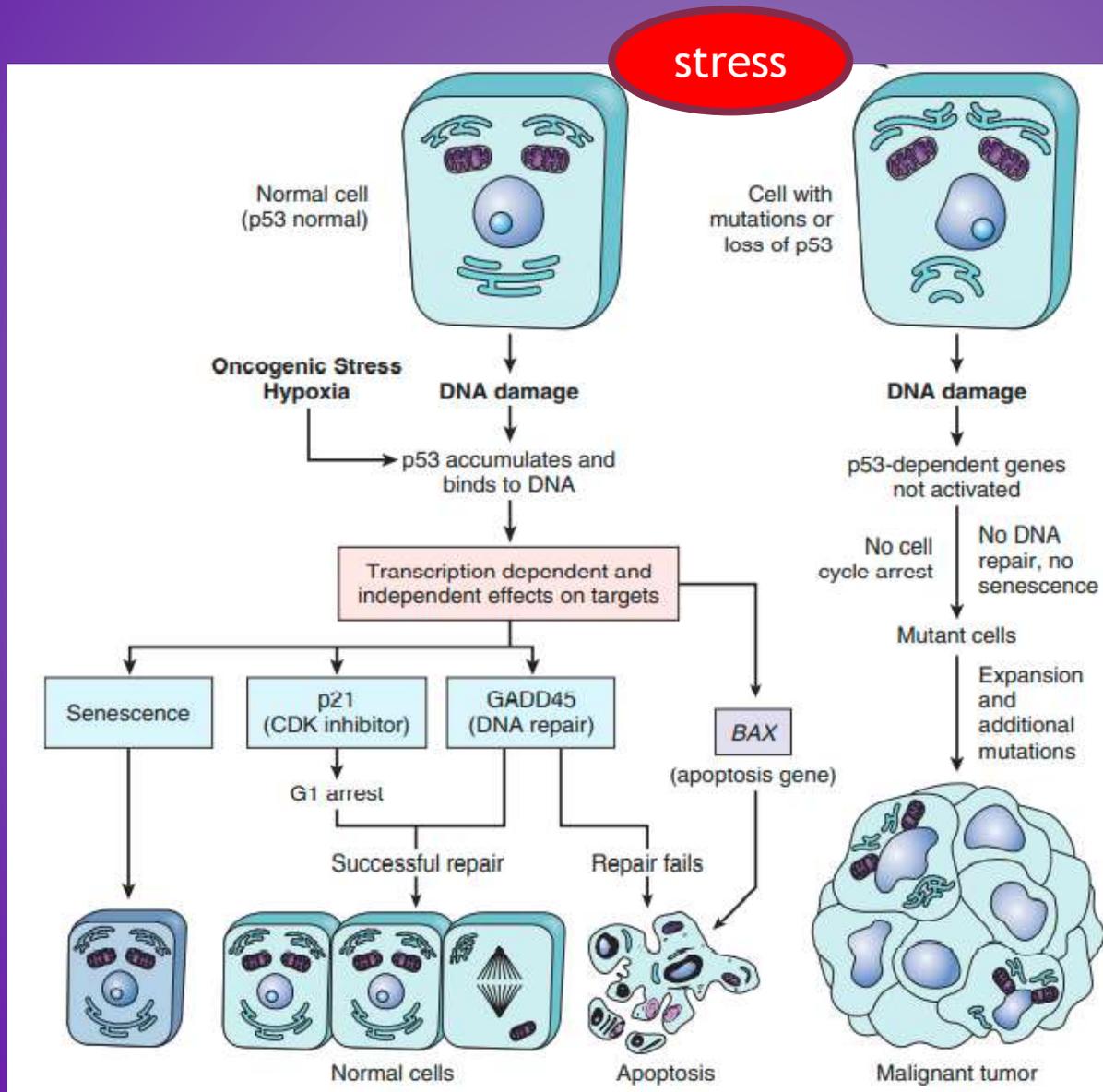
Li-Fraumeni syndrome (LFS) is an inherited condition caused by mutation in TP53



Patients with the Li-Fraumeni syndrome have a 25-fold greater chance of developing a malignant tumor by 50 years of age compared with the general population



➤ p53 can be viewed as a central monitor of internal stress, directing the stressed cells toward one of the previous pathways.



**stress**

- ✓ Ionizing radiation
- ✓ Carcinogens
- ✓ Mutagens

# 3. Transforming Growth Factor- $\beta$ Pathway

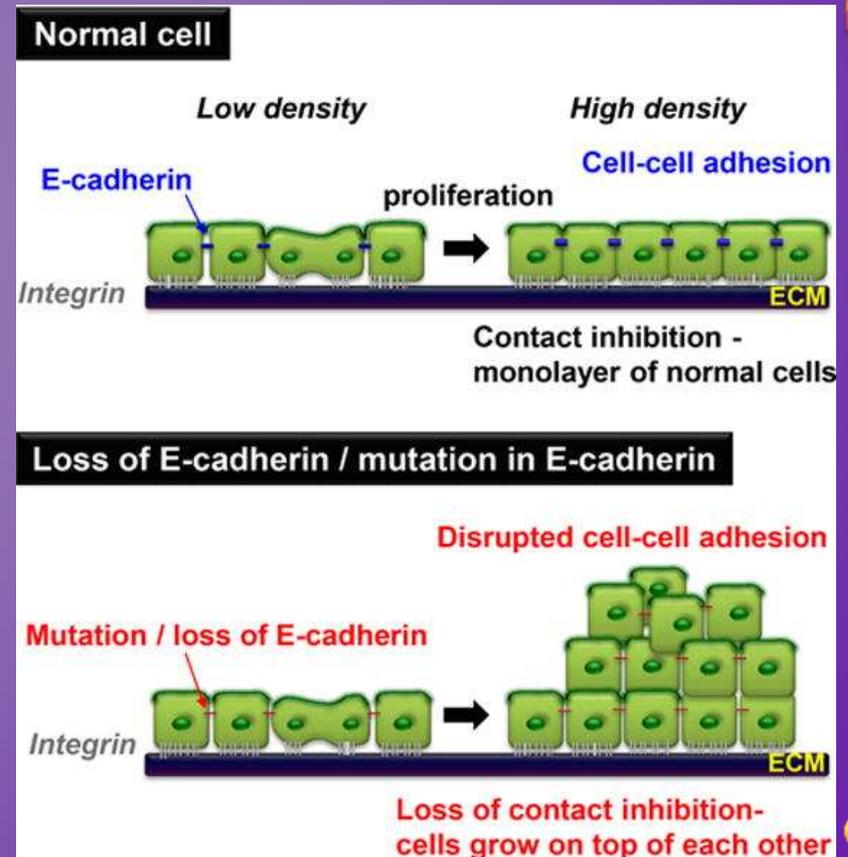
- TGF- $\beta$  is a potent inhibitor of proliferation.
- Seen in most normal epithelial, endothelial, and hematopoietic cells.
- In many forms of cancer, the growth-inhibiting effects of the TGF- $\beta$  pathways are impaired by mutations affecting TGF- $\beta$  signaling.
- Mutations affecting the TGF- $\beta$  receptor are seen in cancers of the colon, pancreas, stomach, and endometrium

## 4. Contact Inhibition.

- Normally, nontransformed cells stop proliferating once they form confluent monolayers.
- But
- When cancer cells are grown in the laboratory, their proliferation fails to be inhibited when they come in contact with each other



- E-cadherin binding between cells is important in mediating contact inhibition of proliferation when cells reach confluence.
- Loss of E-cadherin expression results in loss of contact inhibition and is associated with increased cell motility and advanced stages of cancer

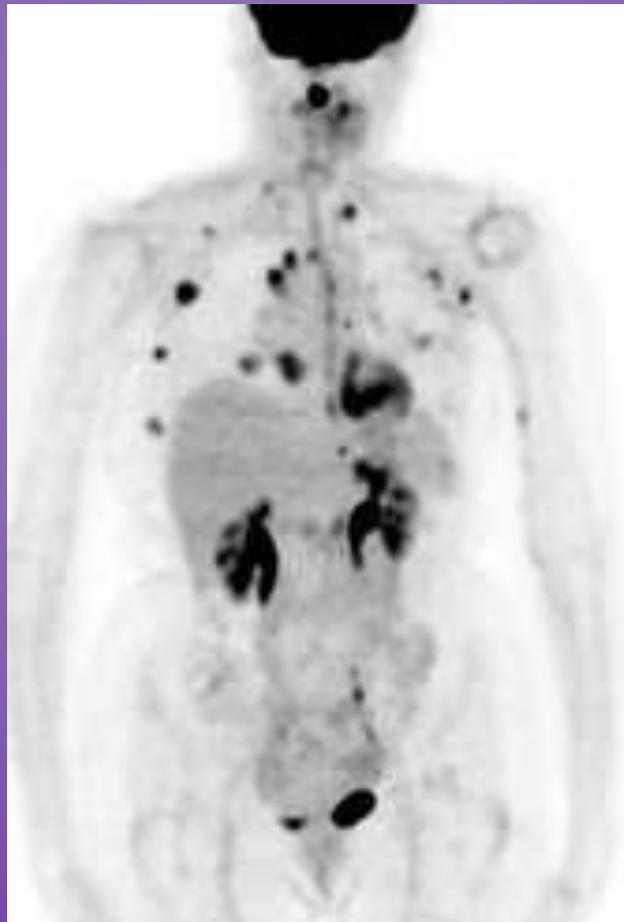


# III Altered Cellular Metabolism

- ❑ Even in the presence of ample oxygen, cancer cells demonstrate a distinctive form of cellular metabolism characterized by high levels of glucose uptake and increased conversion of glucose to lactose (fermentation) via the glycolytic pathway
- ❑ This phenomenon, called the Warburg effect and also known as aerobic glycolysis



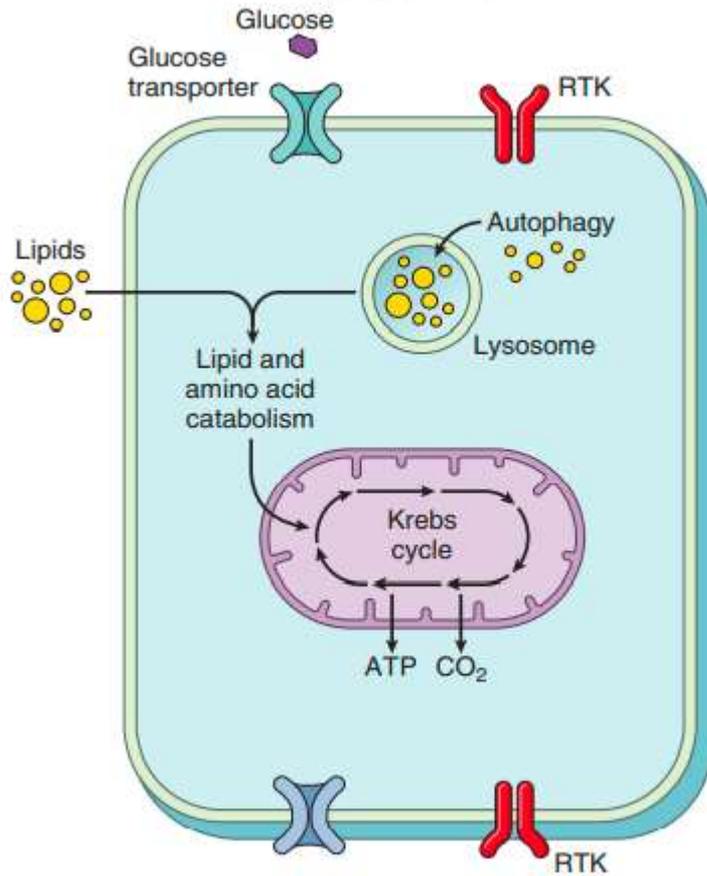
- Clinically, the “glucose-hunger” of tumors is used to visualize tumors via positron emission tomography (PET) scanning, in which patients are injected with a glucose derivative that is preferentially taken up into tumor cells



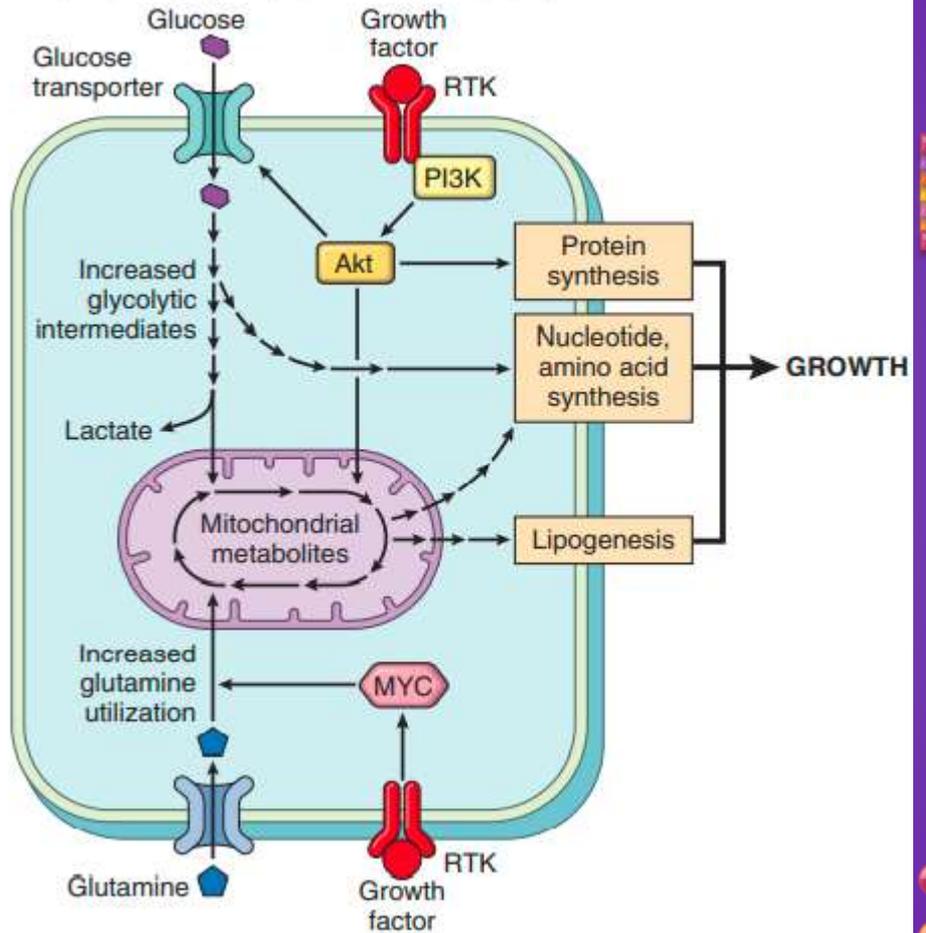


- aerobic glycolysis generates two molecules of ATP per molecule of glucose.
- While
- oxidative phosphorylation generates up to 36 molecules of ATP per molecule of glucose.
- So why cancer cell rely on seemingly inefficient glycolysis ?
- The answer to this question: Aerobic glycolysis provides rapidly dividing tumor cells with metabolic intermediates that are needed for the synthesis of cellular components

### QUIESCENT CELL

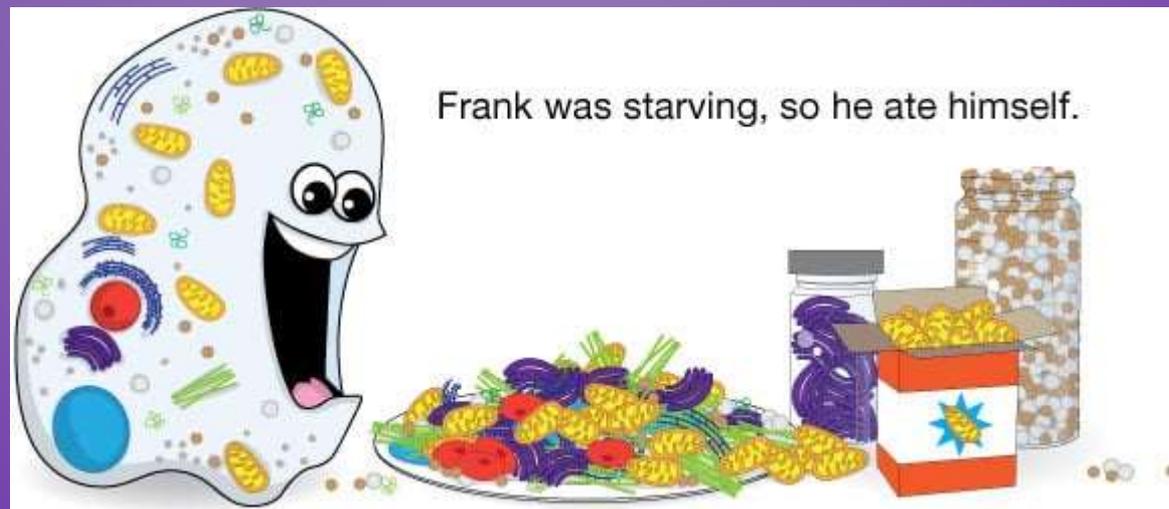


### GROWING CELL (NORMAL OR TUMOR)



Beyond the Warburg effect, there are two other links between metabolism and cancer

- 1. Autophagy
- 2. oncometabolism.



# 1. Autophagy

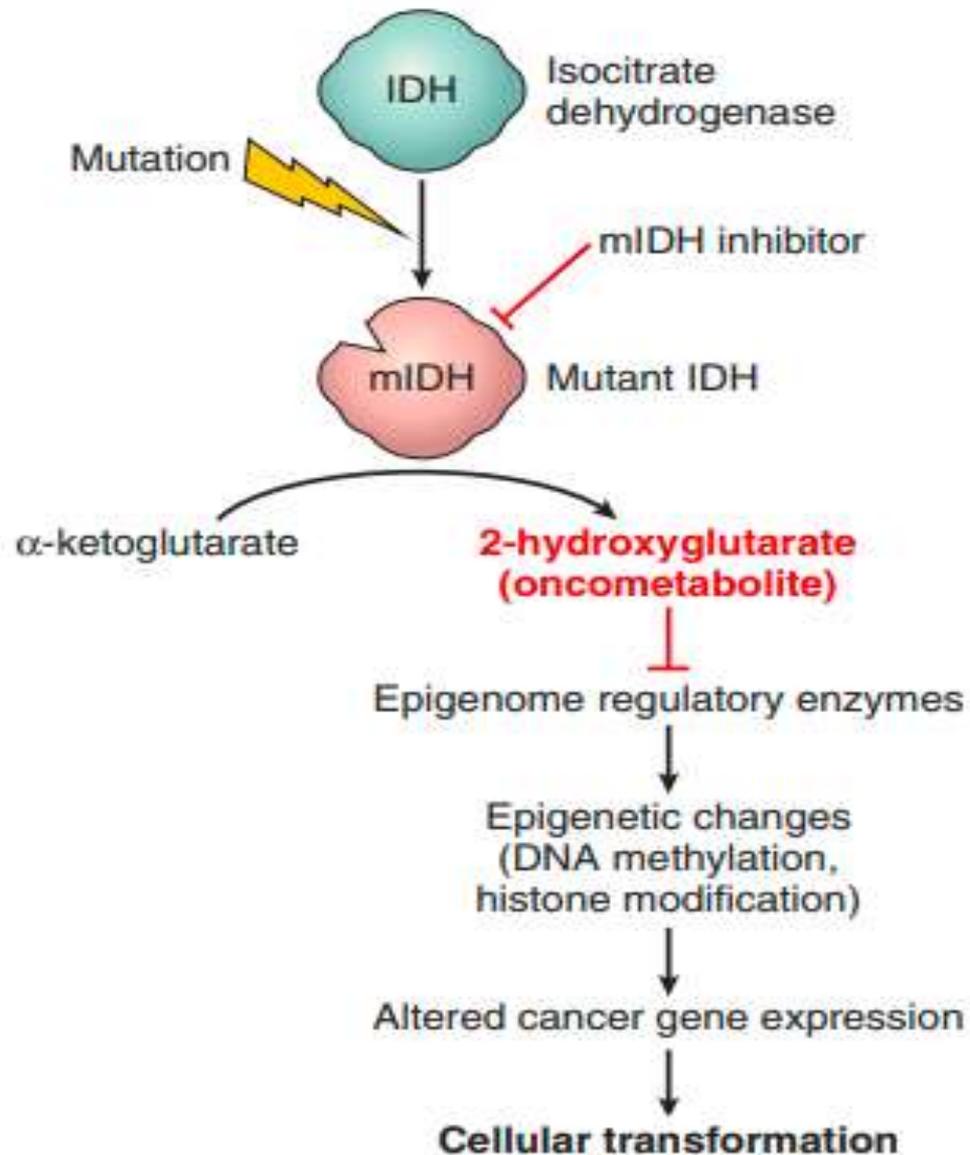
- Autophagy is a state of severe nutrient deficiency in which cells not only arrest their growth, but also cannibalize their own organelles, proteins, and membranes as carbon sources for energy production.
- Tumor cells often seem to be able to grow under marginal environmental conditions without triggering autophagy, suggesting that the pathways that induce autophagy are deranged .
- under conditions of severe nutrient deprivation, tumor cells may use autophagy to become “dormant,” a state of metabolic hibernation that allows cells to survive hard times for long periods

## 2. Oncometabolism

- They are mutations in enzymes that participate in the Krebs cycle.
- Of these, mutations in isocitrate dehydrogenase (IDH) have garnered the most interest, as they have revealed a new mechanism of oncogenesis termed oncometabolism.
- Oncogenic IDH mutations have been described in :
  - ❖ Cholangiocarcinomas.
  - ❖ gliomas.
  - ❖ acute myeloid leukemias.
  - ❖ sarcomas.



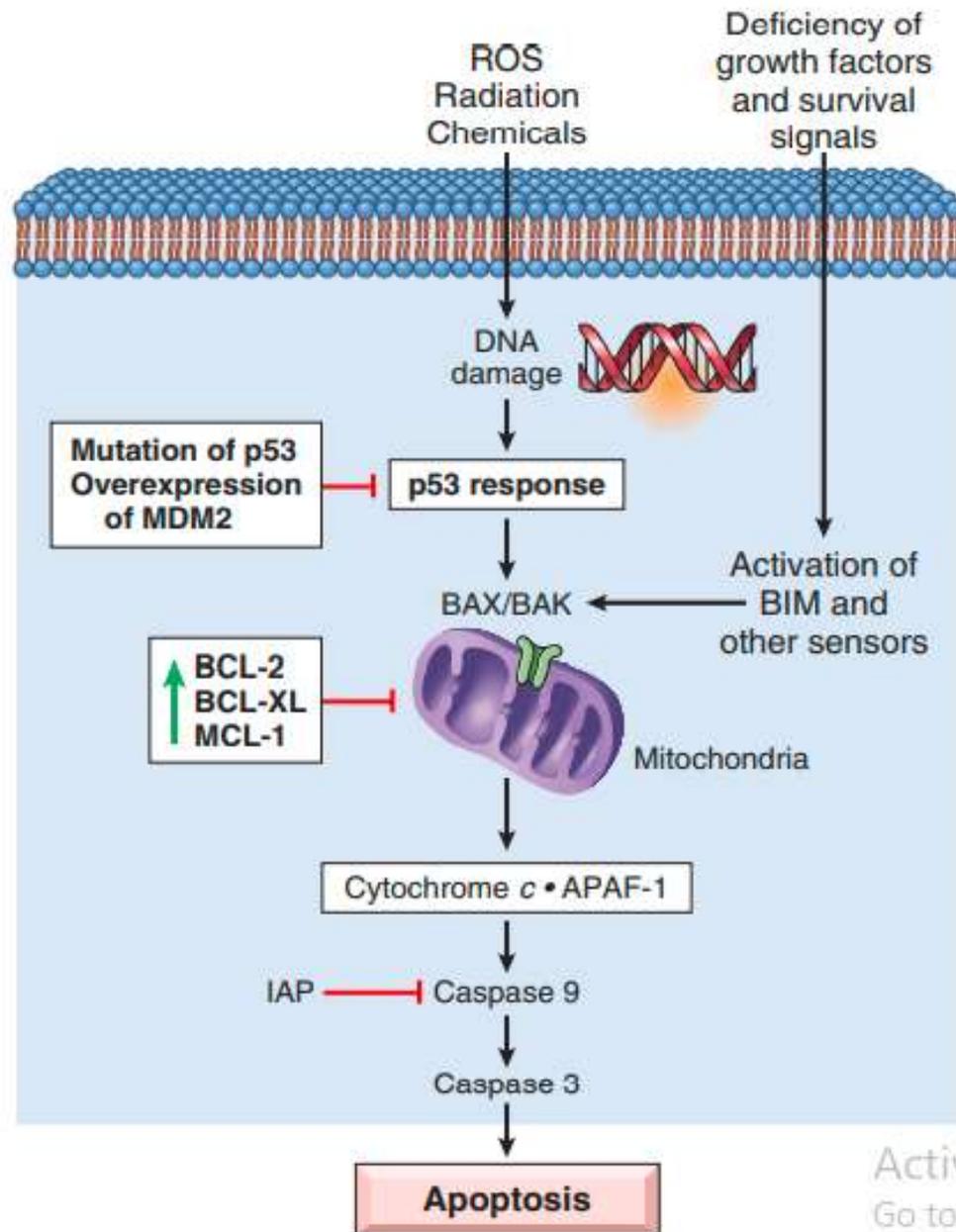
mutated IDH acts as an oncoprotein by producing 2-HG, which is considered a prototypical oncometabolite.



# IV Evasion of Cell Death

- Tumor cells frequently contain mutations in genes that regulate apoptosis, making the cells resistant to cell death.
- evasion of apoptosis by cancer cells occurs mainly by way of acquired mutations and changes in gene expression that disable key components of the intrinsic pathway.





Activa  
Go to Se



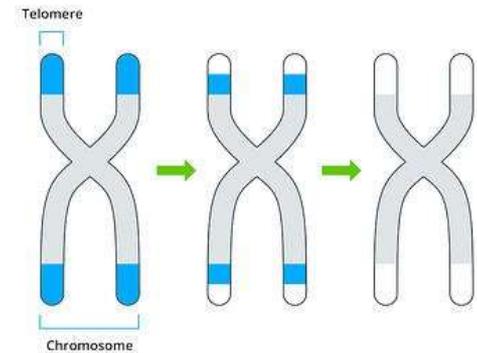
# Major mechanisms by which apoptosis is evaded by cancer cells

- 1. Loss of TP53 function:
  - prevents the upregulation of PUMA, a pro-apoptotic BH3-only that is a direct target of p53.
  - As a result, cells survive levels of DNA damage and cell stress that otherwise would result in their death
- 2. Overexpression of anti-apoptotic members of the BCL2 family:
  - Overexpression of BCL2 is a common event leading to the protection of tumor cells from apoptosis, e.g follicular lymphoma

## V. Limitless Replicative Potential (Immortality)

### AGING PROCESS

Telomeres shorten with age



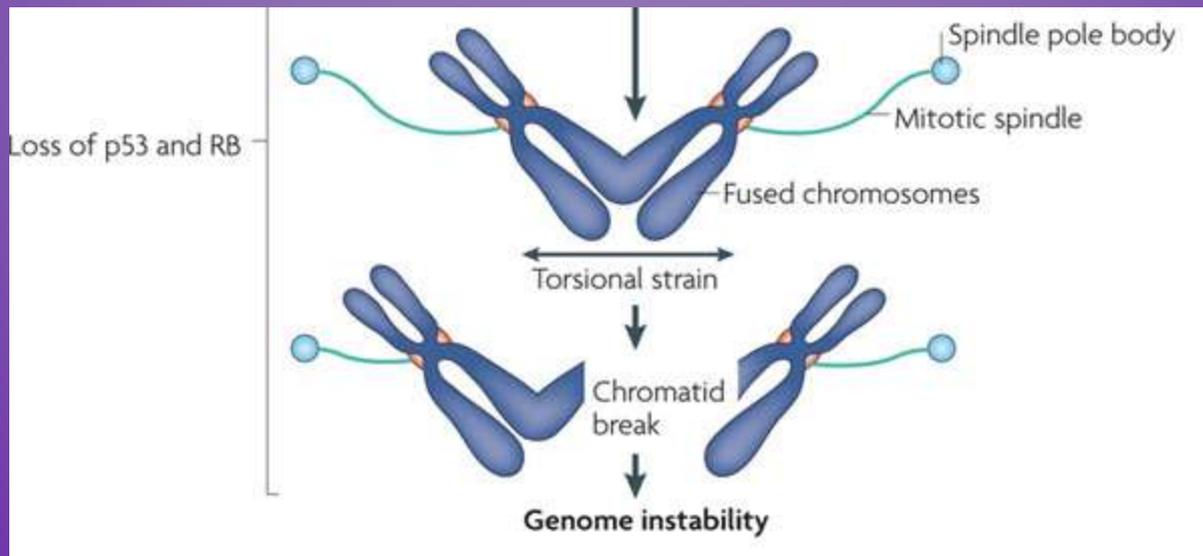
- Tumor cells, unlike normal cells, are capable of limitless replication.
- most normal human cells have a capacity of at most 70 doublings. Thereafter, the cells lose the ability to divide and enter replicative senescence.
- This phenomenon occurs due to progressive shortening of telomeres at the ends of chromosomes



- Limitless Replicative Potential (Immortality) of the tumor cells is due to:
  - telomere maintenance
    - By: lengthening of telomeres
    - upregulation of the enzyme telomerase



- Markedly eroded telomeres are recognized by the DNA repair machinery as double-stranded DNA breaks, leading to cell cycle arrest and senescence, mediated by TP53 and RB.
- In cells in which TP53 or RB mutations are disabled by mutations, the nonhomologous end-joining pathway is activated as last effort to save the cell, joining the shortened ends of two chromosomes.



# VI. Sustained Angiogenesis

- Even if a solid tumor possesses all of the genetic aberrations that are required for malignant transformation, it cannot enlarge beyond 1 to 2 mm in diameter unless it has the capacity to induce angiogenesis.
- Neovascularization has a dual effect on tumor growth:
  - perfusion supplies needed nutrients and oxygen.
  - angiogenesis contributes to metastasis



- Neovascularization not entirely normal; the vessels are leaky and dilated, and have a haphazard pattern of connection, features that can be appreciated on angiograms



Angiogram of meningioma



# How do growing tumors develop a blood supply?

- angiogenesis is controlled by a balance between angiogenesis promoters and inhibitors; in angiogenic tumors this balance is directed toward promoters.
- molecular basis of the angiogenesis involves:
  - increased production of angiogenic factors.
  - E.g proangiogenic basic fibroblast growth factors (bFGF)
  - loss of angiogenic inhibitors;
  - E.g angiostatin and endostatin

## The local balance of angiogenic and anti-angiogenic factors is influenced by several factors:

- 1. Relative lack of oxygen due to hypoxia stabilizes HIF1 $\alpha$ , an oxygen-sensitive transcription factor, which then activates the transcription of proangiogenic cytokines such as VEGF.
- 2. Mutations involving tumor suppressors and oncogenes in cancers also tilt the balance in favor of angiogenesis.
  - E.g , p53 stimulates
    - ❖ expression of antiangiogenic molecules, such as thrombospondin-1
    - ❖ represses expression of proangiogenic molecules, such as VEGF. Thus, loss of p53 in tumor cells provides a more permissive environment for angiogenesis.



Thank you.

