

Prostate Cancer, Radiotherapy, Hypoxia and Immune Response

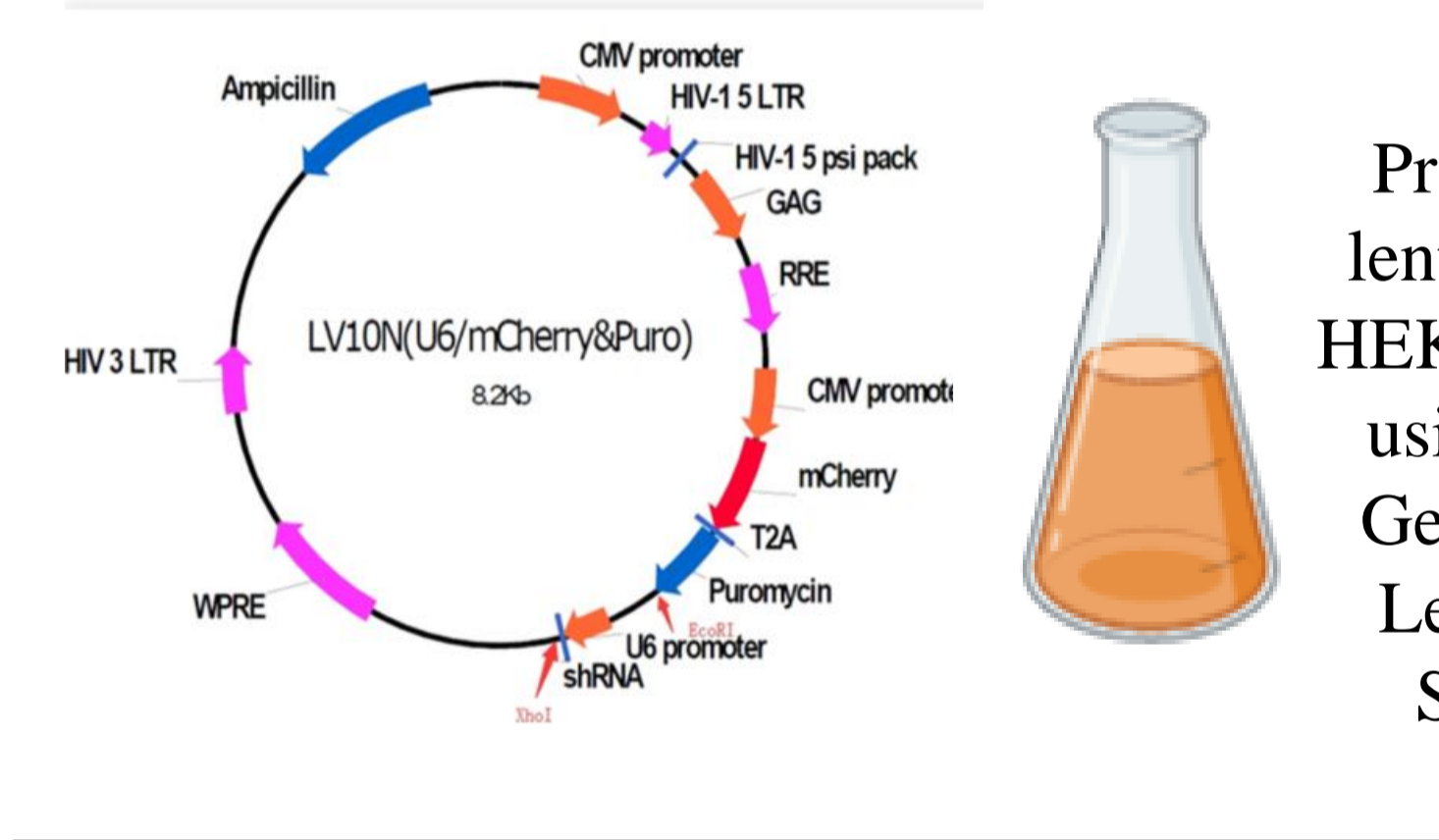
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Radiation therapy is the primary therapy for treating cancer patients, and especially prostate cancer. In parallel, radiotherapy promotes the activation of immune responses and expression of immunological molecules that have the potential to affect T-cell infiltration. This dual role of radiation in the course of therapy offers a background for immunological interference and combination of radiation with immune checkpoint inhibitors and cytokines that are already available in clinical practice. Recently, studies have shown that the Hypoxia inducible factor HIF-1 α regulates the expression of PD-L1 in cancer cells, contributing to the immune escape of cancer cells. Hypoxia and HIF1 α also define resistance of cancer cells to radiotherapy. We examined the role of hypoxia and of HIF1 α in defining expression of PD-L1 in prostate cancer PC cell lines and the eventual role of HIF1 α targeting in PC immunotherapy.

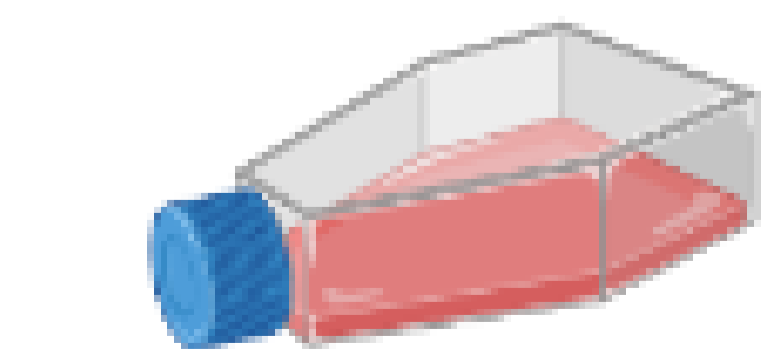
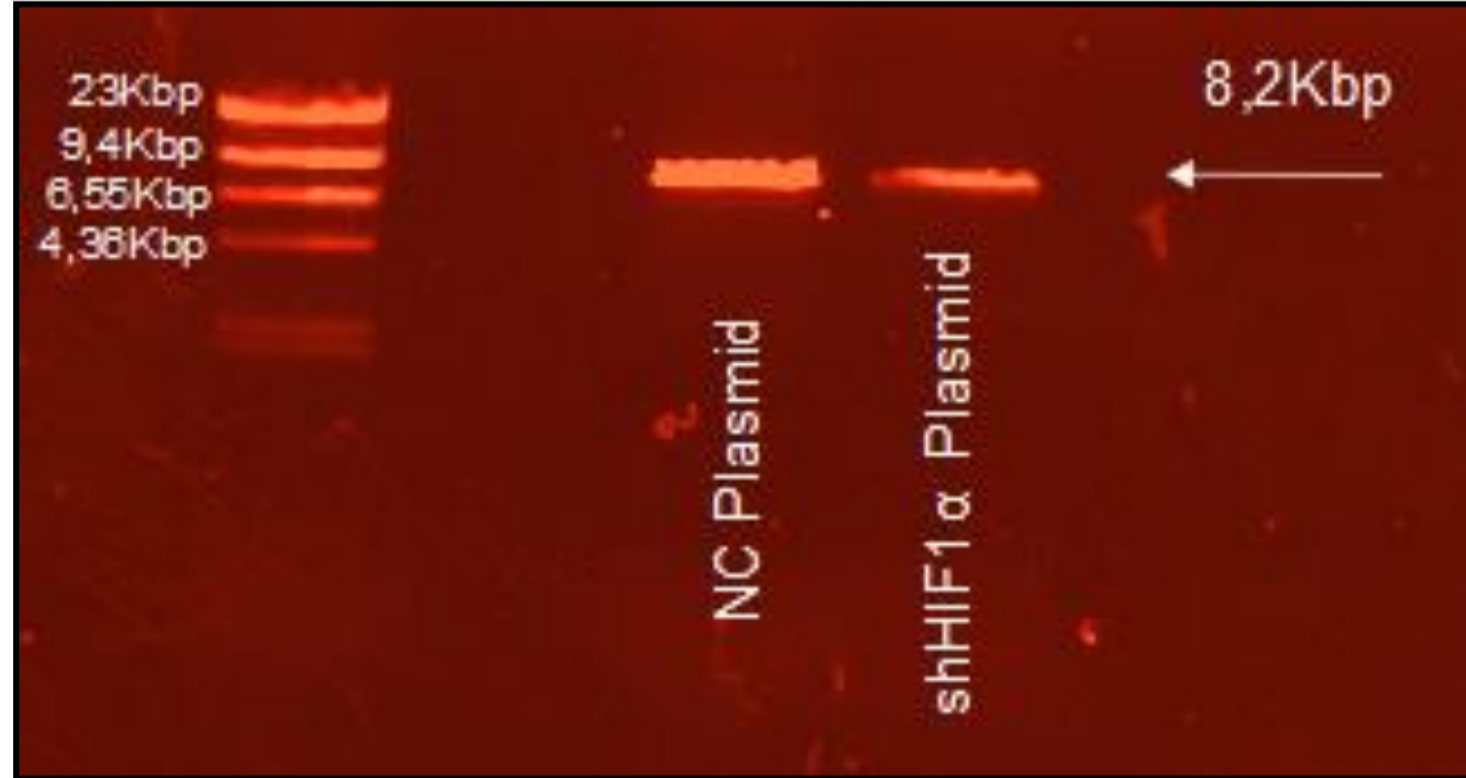
Experimental Protocols

Permanent silencing of HIF1 α genes in prostate cancer cell lines 22Rv1, DU145, PC3

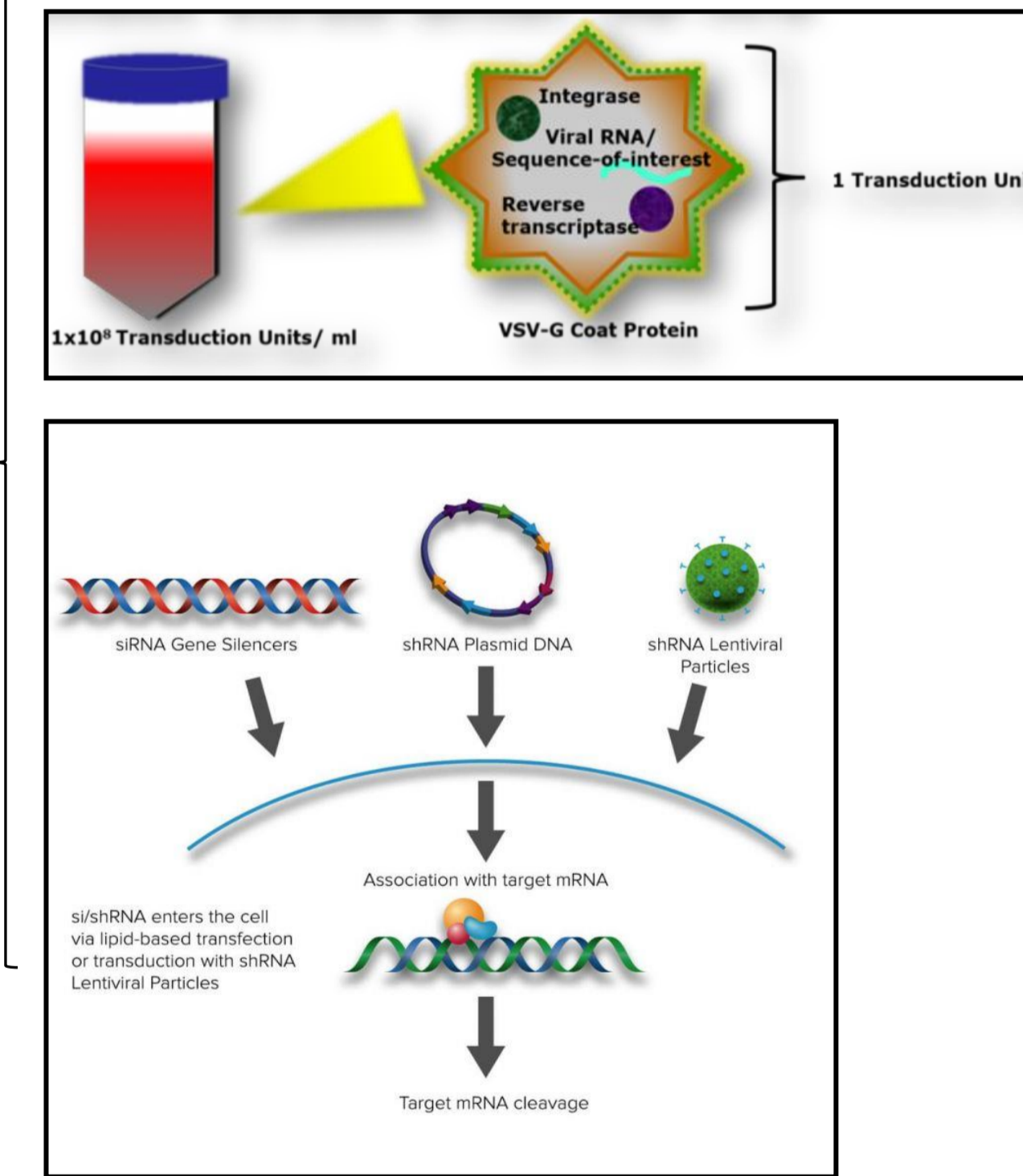
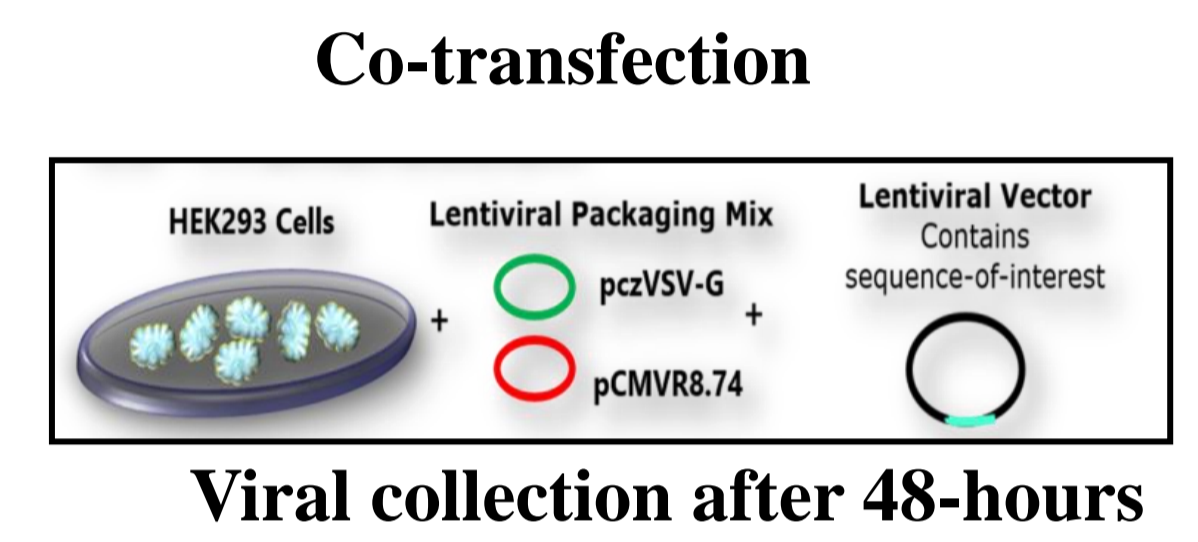
Preparation and transformation of DH5-alpha bacteria, extraction of DNA plasmid from transformed bacterial colony and confirmation that the extracted plasmids are the desirable ones



Producing lentivirus in HEK293 cells using a 2nd Generation Lentiviral System



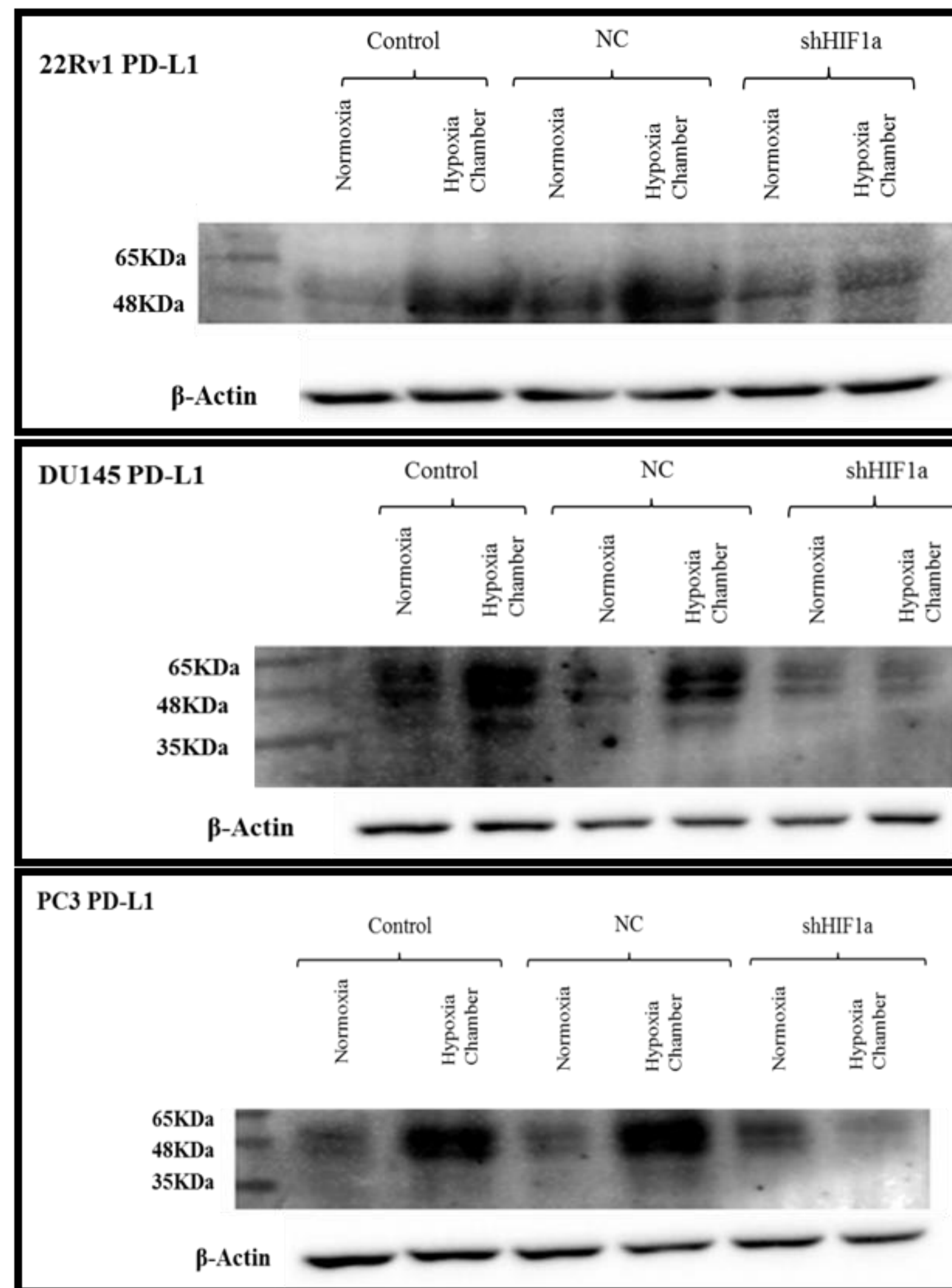
Infection of Target cells (22Rv1, DU145, PC3)



The shRNA becomes stably integrated into the host cell genome leading to the permanent knockdown

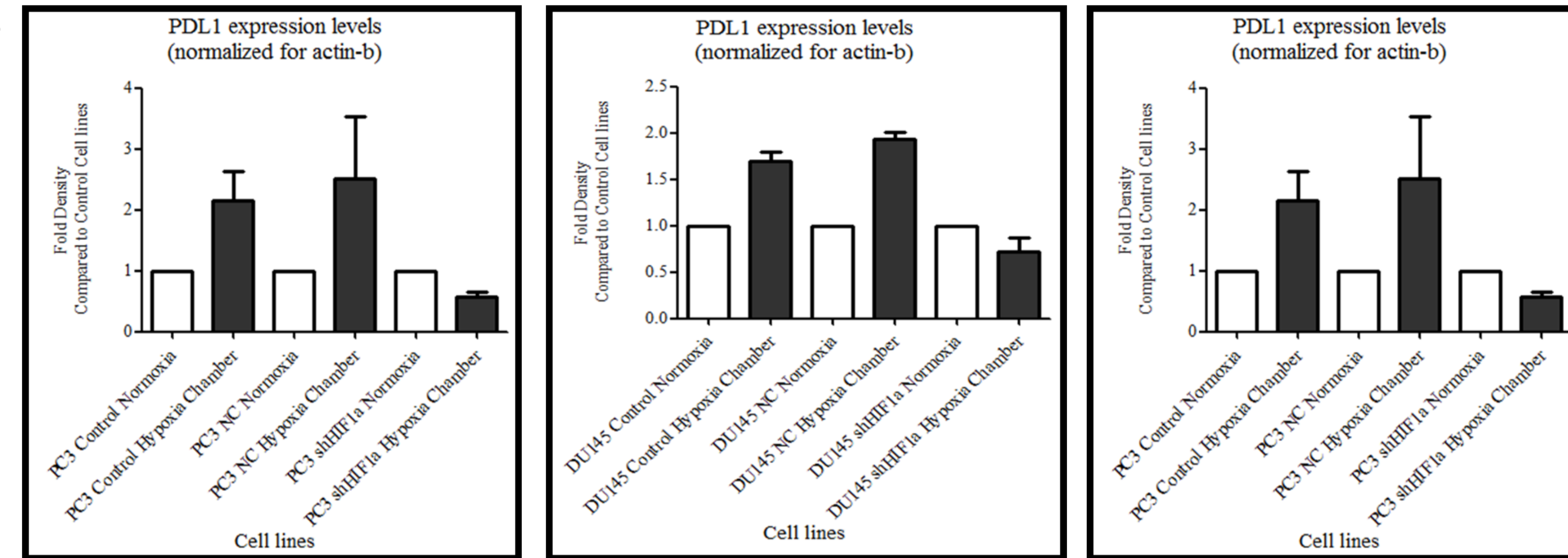
Induction of Hypoxic conditions via Hypoxia Chamber

Results

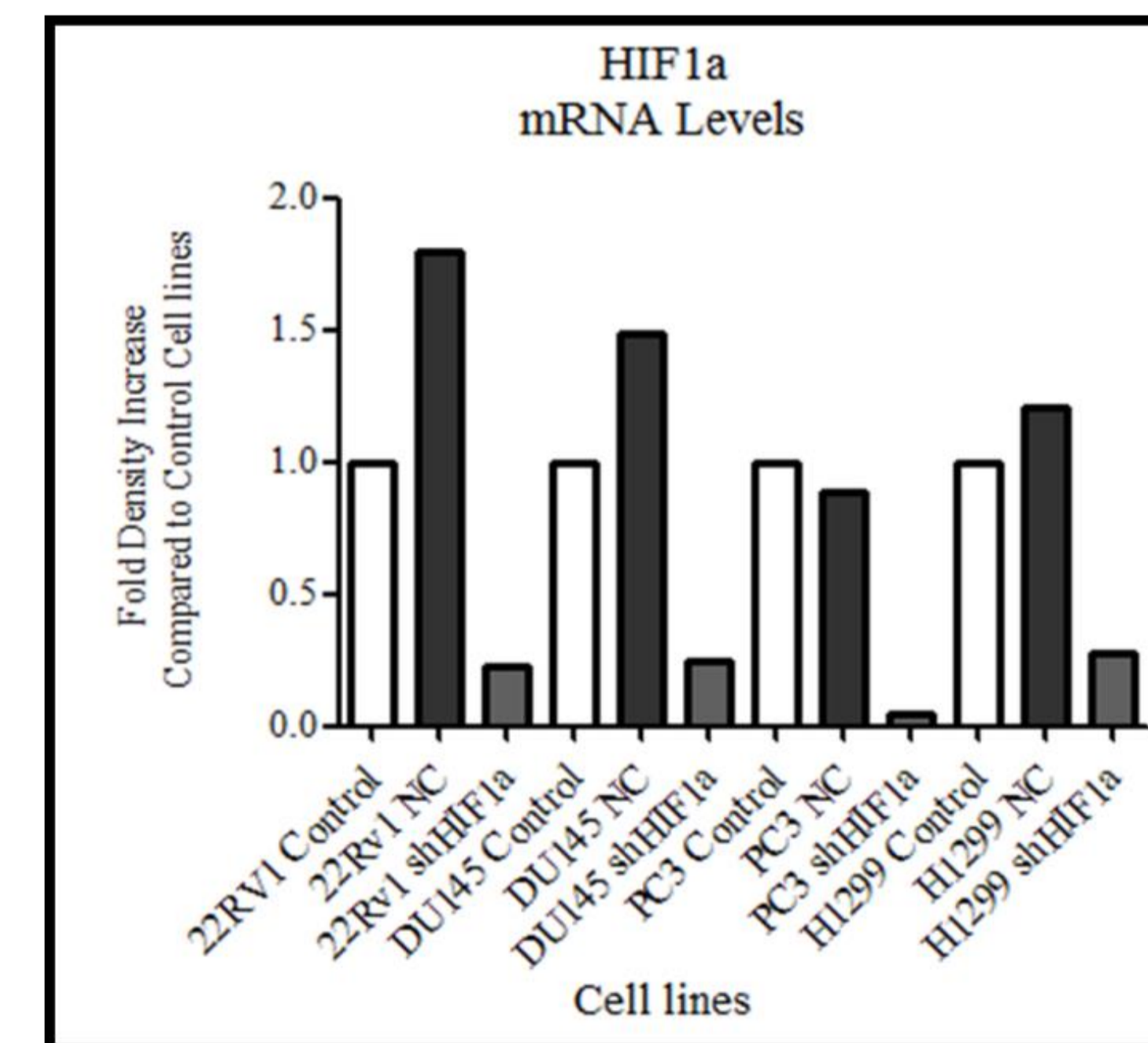


Western blot images (A) and band densitometry (B) showing the expression pattern of PD-L1 in the 22Rv1 (androgen dependent), and DU145 and PC3 (androgen independent) prostate cancer cell lines, under normoxia and hypoxia. The response is examined in parental cell lines and cell lines with stably suppressed HIF1 α gene (shHIF1 α). PD-L1 is up-regulated under hypoxic conditions, a phenomenon that is abrogated after silencing of HIF1 α gene.

(B)



(C)



RT-PCR analysis of the mRNA expression of the HIF1 α gene (normoxic conditions), of the 22Rv1, DU145, PC3 shHIF1 α cell lines in comparison with the control cell lines, showing effective suppression of the HIF1 α mRNA levels in sh-cell lines.

Conclusions

- Despite the development of targeted therapies, there is no significant progress in prostate cancer (PC) that promises better results and improved prognosis.
- Hypoxic conditions lead to increased levels of PD-L1 gene expression in PC cell lines, promoting immune escape of cancer cells.
- PD-L1 up-regulation under hypoxic conditions is mediated by HIF1 α , and its silencing suppressed the response of PC-cell lines to hypoxia.
- Suppression of HIF1 α emerges as an eventual target to enhance immune response and hypoxia-mediated radioresistance.

References

- Noman, M. Z., Desantis, G., Janji, B., Hasmim, M., Karray, S., Dessen, P., ... & Chouaib, S. (2014). PD-L1 is a novel direct target of HIF-1 α , and its blockade under hypoxia enhanced MDSC-mediated T cell activation. *Journal of Experimental Medicine*, 211(5), 781-790.
- Dai, X., Pi, G., Yang, S. L., Chen, G. G., Liu, L. P., & Dong, H. H. (2018). Association of PD-L1 and HIF-1 α coexpression with poor prognosis in hepatocellular carcinoma. *Translational oncology*, 11(2), 559-566.
- Bolla, M., Gonzalez, D., Warde, P., Dubois, J. B., Mirimanoff, R. O., Storme, G., ... & Collette, L. (1997). Improved survival in patients with locally advanced prostate cancer treated with radiotherapy and goserelin. *New England Journal of Medicine*, 337(5), 295-300.
- Bilusic, M., Madan, R. A., & Gulley, J. L. (2017). Immunotherapy of prostate cancer: facts and hopes. *Clinical Cancer Research*, 23(22), 6764-6770.