

Global Breast Cancer Conference 2011

# Individualization for Therapeutic Management of Luminal Subtype Breast Cancer



**TOHOKU**  
UNIVERSITY

Shin-ichi Hayashi

Tohoku University  
Graduate School of Medicine

# Individualization of Breast Cancer and Transition of Predictive and Prognostic Factors

Traditional risk estimation of relapse by clinicopathological factors



Biological characteristics of tumors

ER, PgR, Her2, Ki67 (Intrinsic subtype)

Oncotype DX, Mammaprint (IVDMIA)

In Vitro Diagnostic Multivariate Index Assay

Judgements must be made in the care of individual patients of whether to use or withhold each treatment modality. (St. Gallen 2009)

Understanding the molecular biological background of breast cancer

# Present Classification for Eligibility of Therapy in Breast Cancer

- HER2-positive (HER2 type)  
Anti-HER2 + Chemotherapy
- Triple negative (Basal-like) (Sub-classification should be needed)  
Chemotherapy

- HR-positive (Luminal type)

Hormonal therapy alone or Chemotherapy + Hormonal therapy

(Luminal A)

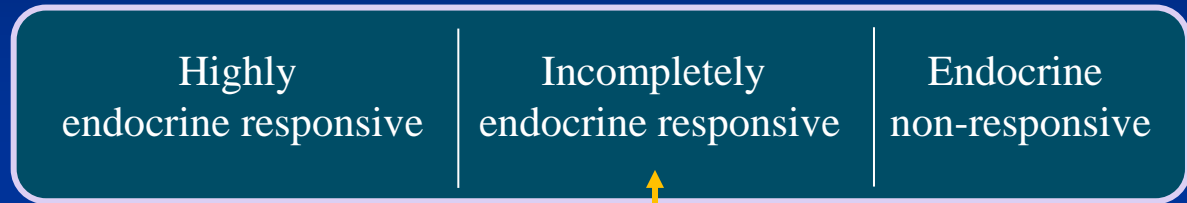
(Luminal B)

Classified by the expression of ER, PgR, Her2, Ki-67, clinicopathological factors, Oncotype DX

# Classification of Hormonal Response

Patient population      20~30%                      50~60%                      20%

**St. Gallen  
Consensus 2007**



ER and PgR – low  
ER or PgR – negative

**St. Gallen  
Consensus 2009**



Included primary resistant cases to hormonal therapy

# Estrogen Responsive DNA Microarray

Comprehensive DNA microarray analysis of 10000 genes

Identified 200 estrogen regulated genes

*J Mol Endocrinol 29: 175 (2002)*

Custom-made estrogen responsive cDNA microarray



Basic studies using this microarray

*Oncogene 22: 5011 (2003)*

*Cancer Sci 95: 496 (2004)*

*J Mol Endocrinol 32: 649 (2004)*

*Biomed Pharmacotherapy 58: 1 (2004)*

Clinical application for diagnosis of hormone-dependent cancer

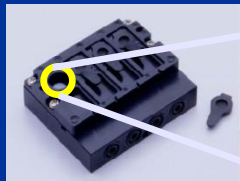
Screening of novel prognostic factors

*Clin Cancer Res 10: 1962 (2004)*

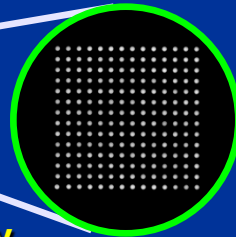
*Oncogene 24: 4531 (2005)*

*Endocrine-Related Cancer, 14: 279 (2007)*

New focused array



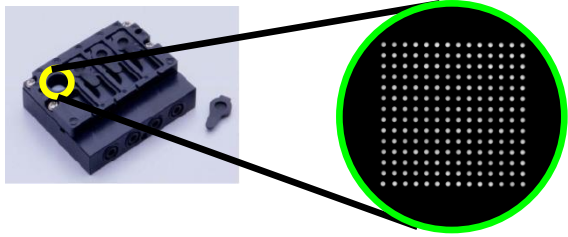
3D-microarray



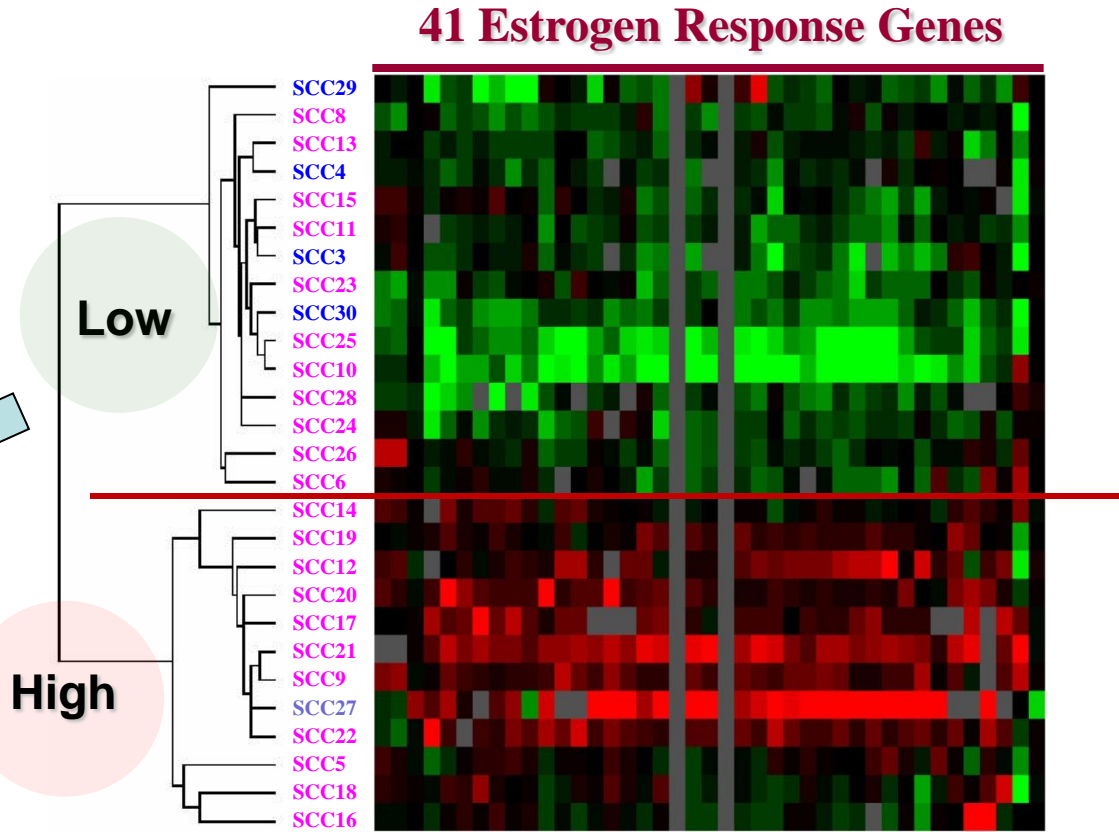
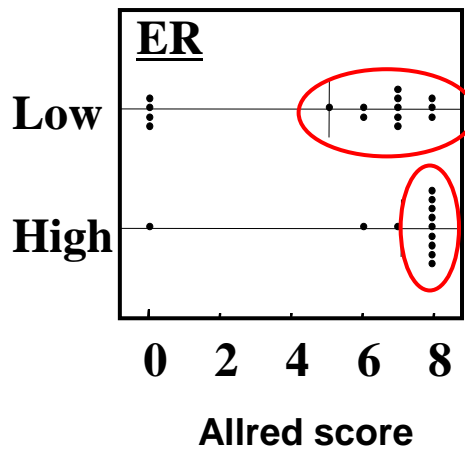
**HDAC6, EGR3, IGFBP4**

- Prediction of hormone therapy
- Classification of patients for individualized therapy
- Monitoring of hormone therapy

# Expression Profile of Estrogen Responsive Genes in Primary Breast Cancer Analyzed by Focused DNA Microarray



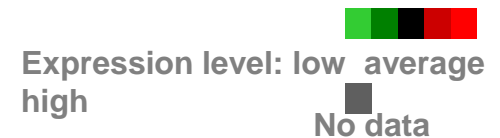
Analyzed by estrogen-response 3D-microarray



Patient number

Red: ER(+)

Blue: ER(-)



# Relationship among ER protein, Transcription Activity, and Target Genes

Present predictive marker

Expression status of ER

Expression profile of target genes

Target genes (PgR)

Estrogen

E2

ER

Transcription

Transcription activity of ER

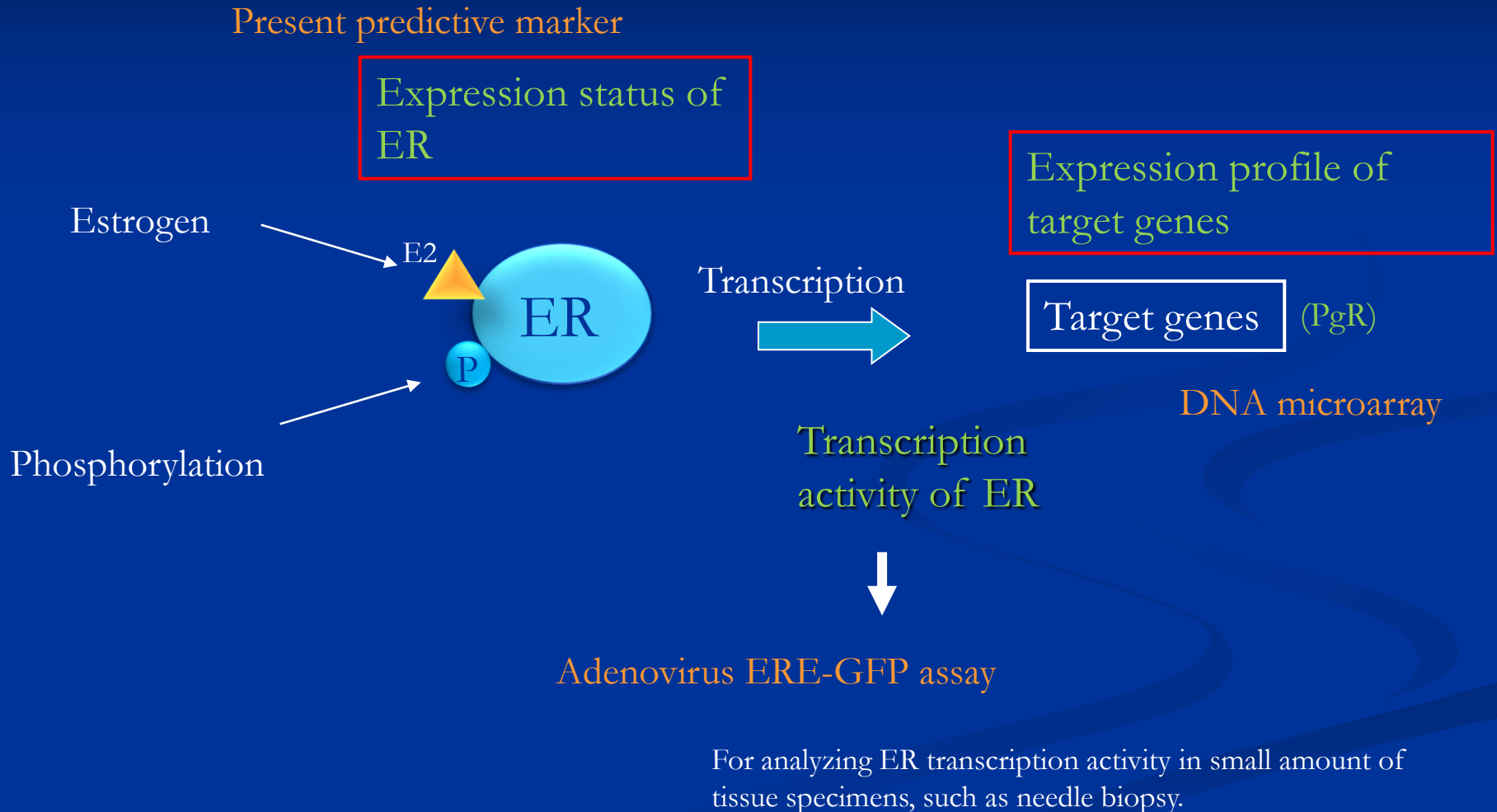
DNA microarray

Phosphorylation

P

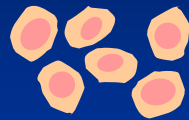
Adenovirus ERE-GFP assay

For analyzing ER transcription activity in small amount of tissue specimens, such as needle biopsy.

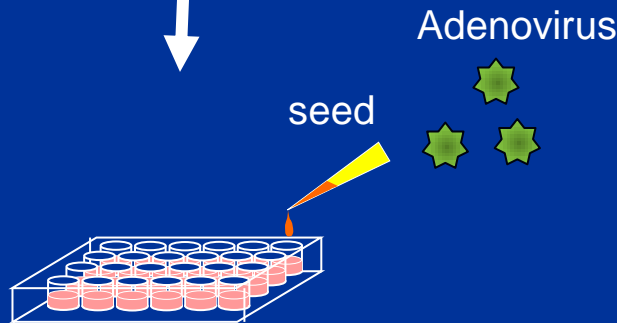


# ERE-GFP Assay by Adenovirus Vector

Breast cancer tissue

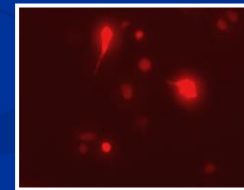


collagenase treatment  
(37°C, 1-3 h)



AdV-ERE-GFP

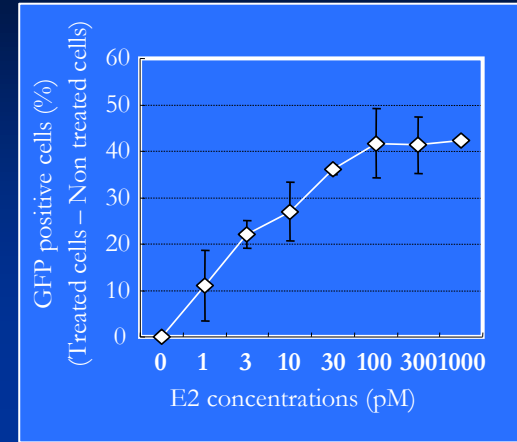
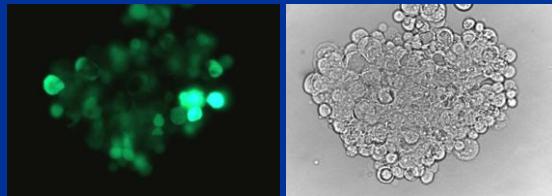
Ad-CMV-DsRed  
for control



After 3 days



Observation and measurement of GFP  
luminous cells by fluorescence microscopy





# Relation between Clinical Characterization and ER Activity in 62 Patients with Breast Cancer

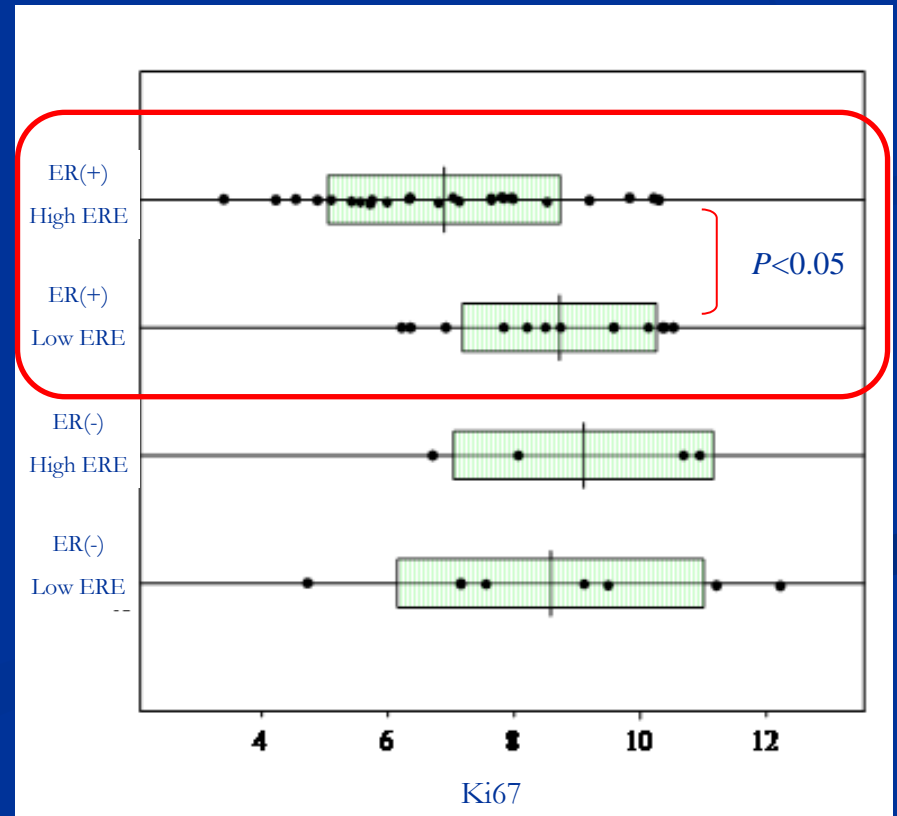
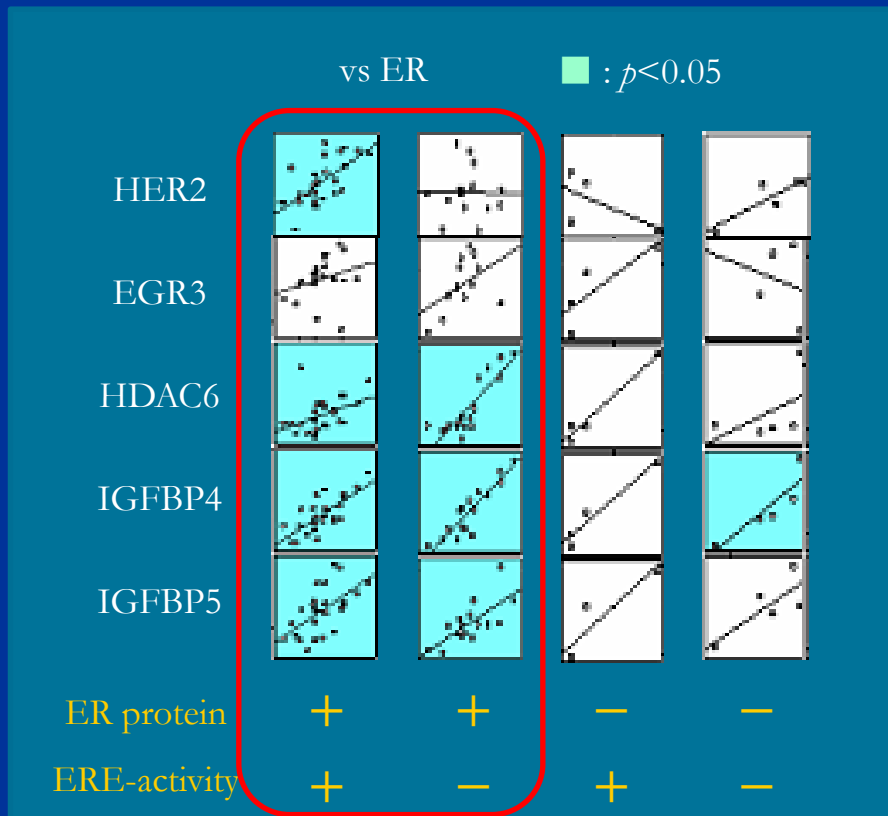
	n	P Value		n	P Value		n	P Value
<b>Total</b>	62		<b>ER</b>			<b>Grade (NA)</b>		
<b>Age</b>			negative	13	0.1427*	2	30	0.2952*
< 50	27	0.1366*	positive	46	0.1427*	3	19	0.2952*
≥ 50	35		unknown	3		unknown	11	
<b>Menopausal</b>			<b>PgR</b>			<b>Grade (NM)</b>		
pre	28	0.0188*	negative	17	0.0403*	1	9	0.1862**
post	33		positive	46		2	9	
No (men)	1		unknown	3		3	32	
						unknown	12	
<b>Size</b>			<b>Her2</b>			<b>Grade (NG)</b>		
< 2 cm	27	0.6129*	negative	31	0.1115*	1	7	0.5350**
≥ 2 cm	30		positive	23		2	9	
unknown	5		unknown	8		3	33	
						unknown	13	
<b>Stage</b>			<b>V</b>			<b>Ly</b>		
0	3	0.7199**	-	53	0.9626*	0	30	0.6525**
1	13		+	4		1	21	
2	33		unknown	5		2	3	
3	5					3	3	
unknown	8					unknown	5	

\*Mann-Whitney test, \*\*Kruskal-wallis test

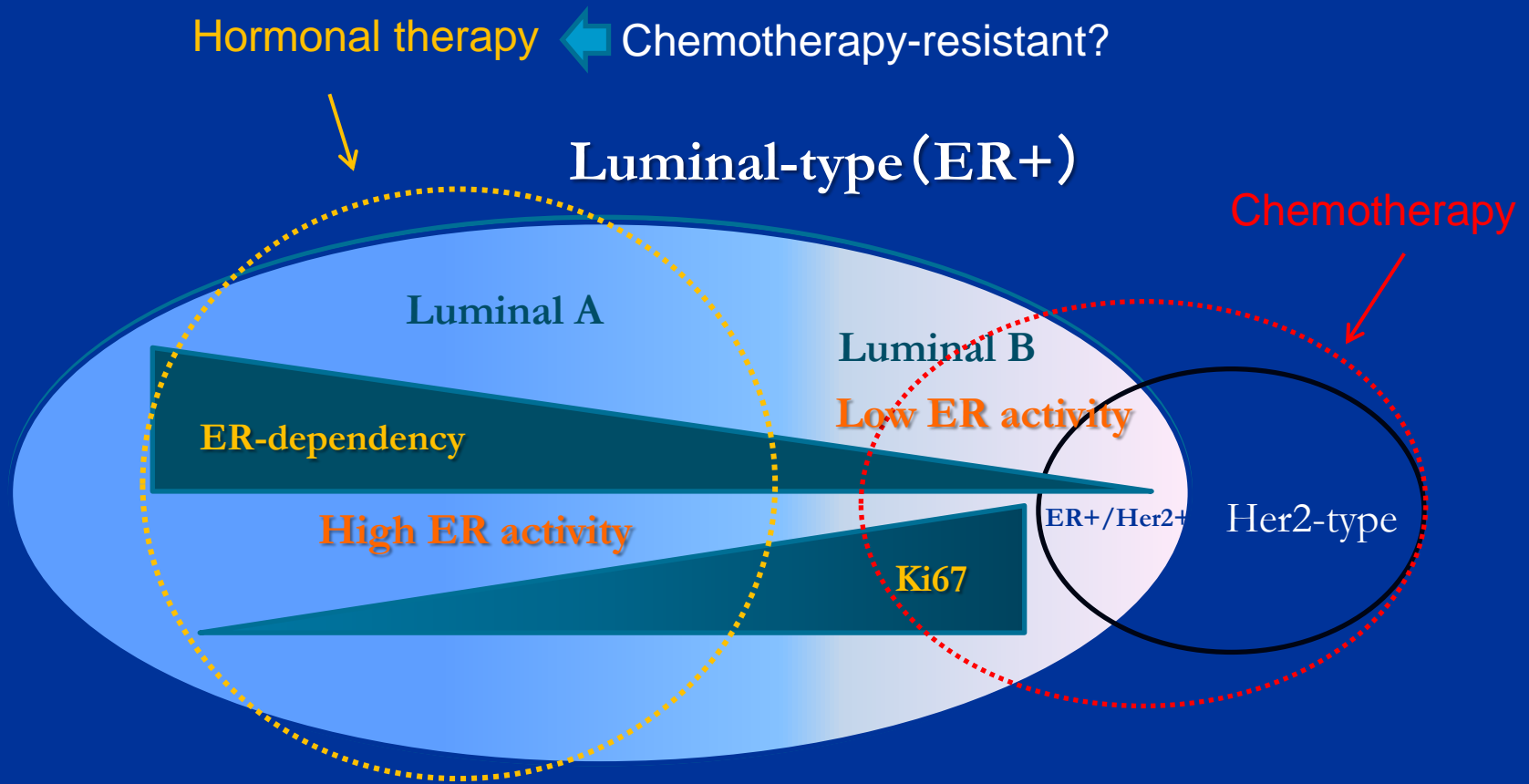
Gohono et al. in preparation.

# mRNA Expression of ER-related Genes in the ERE-GFP Analyzed Cancers and Its Relation with ER-activity and ER-protein

		n	ER	PgR	HER2	Efp	EGR3	HDAC6	IGFBP4	IGFBP5
ER Protein	Positive	42								
	Negative	13	<u>0.0208</u>	<u>0.0224</u>	0.1215	0.6733	0.8195	0.4093	0.1665	0.8501
	Unknown	2								
ER Activity	Positive	31	0.2839	0.0616	0.7816	0.2813	0.5949	0.2397	0.4101	0.3675
	Negative	26								



# Heterogeneity of Luminal-type Breast Cancer

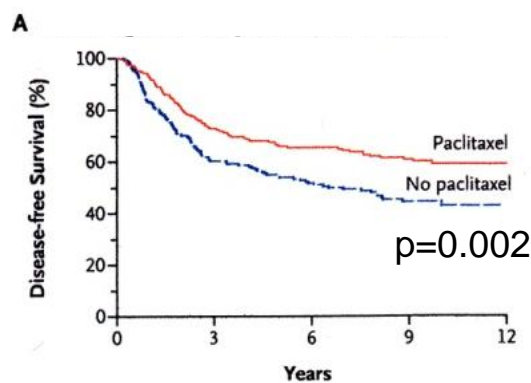


- Expression status of ER is not consistent with ER activity.
- In the luminal-type breast cancer, high ER activity cases shows low Ki67 expression, and corresponds to Luminal A subtype. They have high ER-dependency and probably efficacious to hormonal therapy.

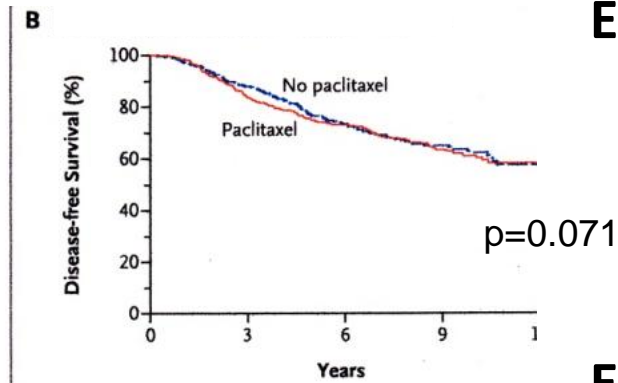
# ER $\alpha$ Expression and Response to Paclitaxel

## AC vs AC+PAC

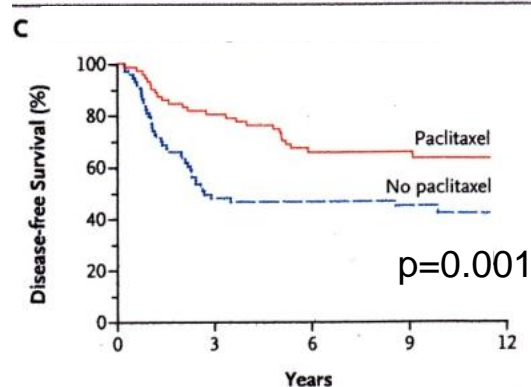
ER-/Her2-



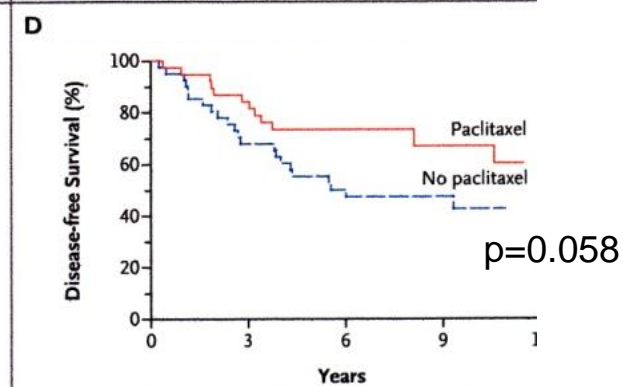
ER+/Her2-



ER-/Her2+



ER+/Her2+



Disease-free survival among patients treated with or without paclitaxel according to estrogen receptor status and HER2 expression.

Hayes DF, et.al ; N Engl J Med. 2007 Oct 11;357(15):1496-506.

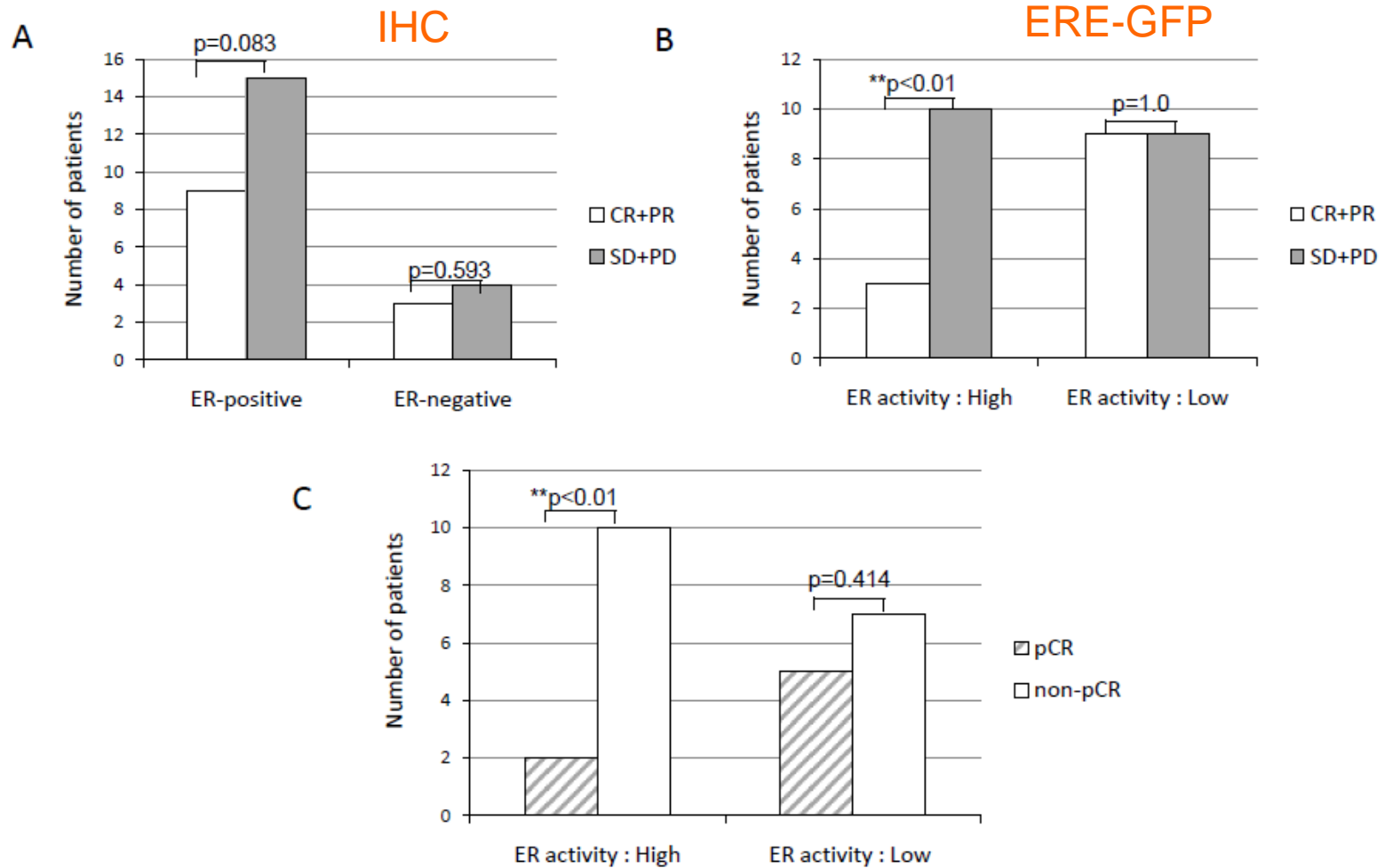
# Clinical Response to Taxanes in NAC-treated Patients

Characteristic	cCR rate of patients No. /Total (%)	cCR+cPR rate of patients No. /Total (%)
<b>ER</b>		
-positive (n=126)	5/126 (4.0) ] *p=0.028	54/126 (42.9) ] *p=0.051
-negative (n=64)	8/64 (12.5) ]	37/64 (57.9) ]
<b>HER2</b>		
-positive (n=71)	6/71 (8.5) ] p=0.498	36/71 (50.7) ] p=0.601
-negative (n=119)	7/119 (5.9) ]	65/119 (54.6) ]
Total (n=190)		

cCR = Clinical complete response

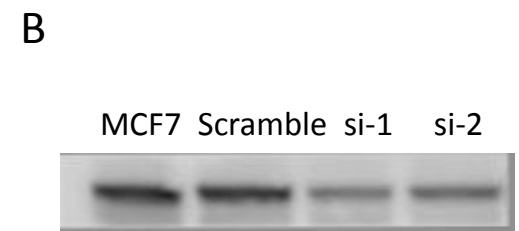
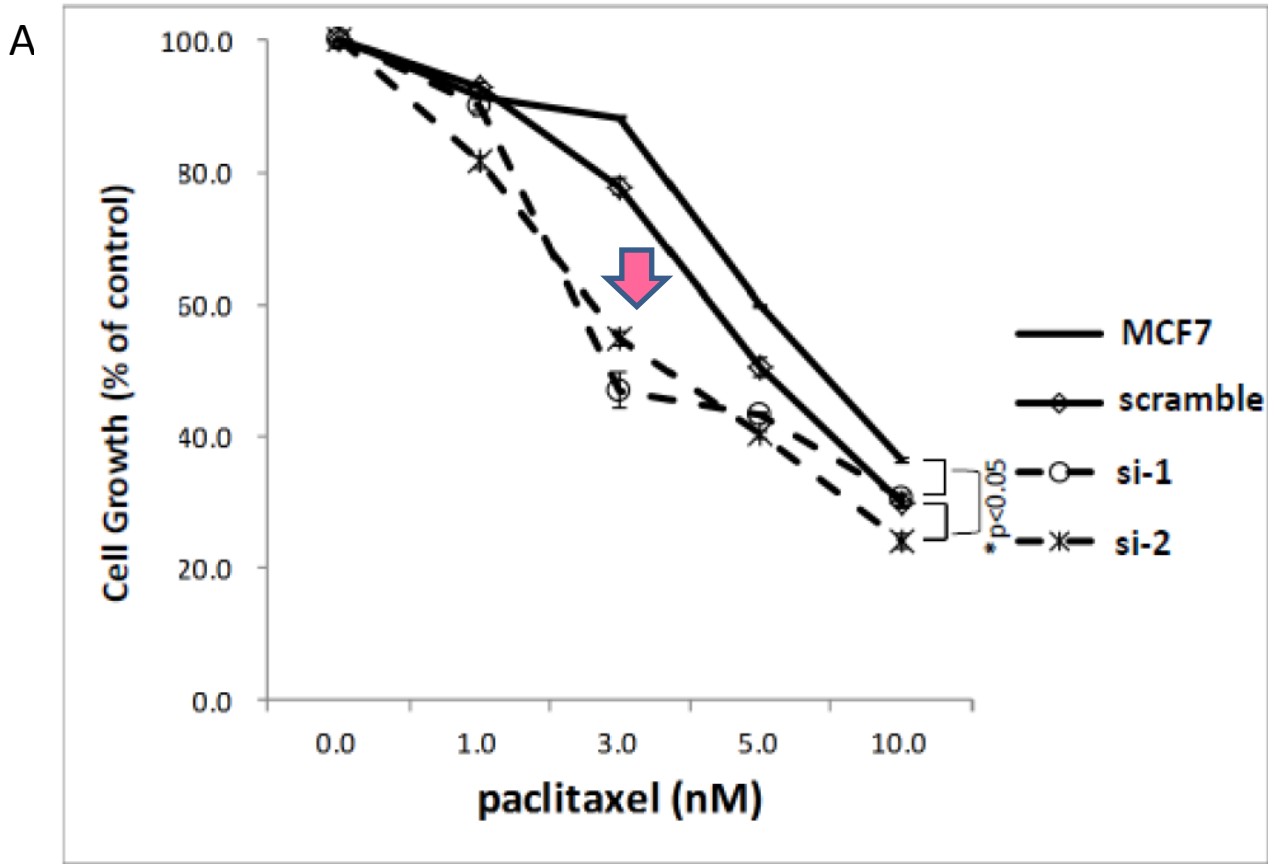
Neoadjuvant chemotherapy: July, 2006 ~ January, 2008 (n=190)

# Clinical Evaluation and ER Expression of Activities in Pre-NAC Breast Cancer



ERE-GFP in pathological response

# ER $\alpha$ Expression and Sensitivity to Paclitaxel in MCF-7

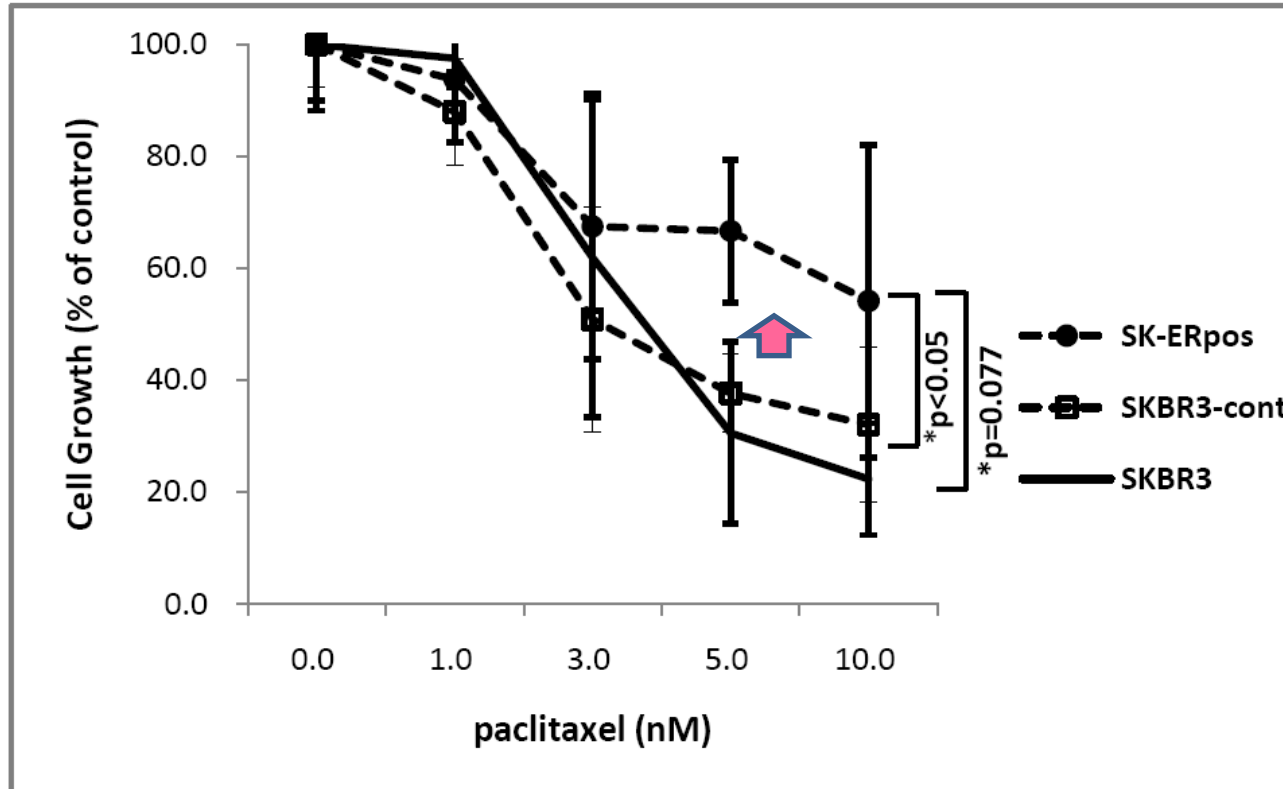


**C**

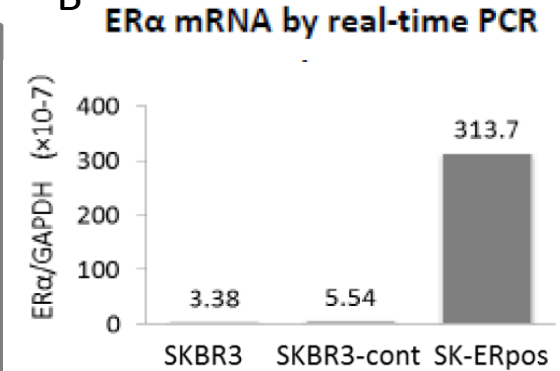
IC50 Values (nM)	
MCF7	6.66
Scramble	5.09
si-1	2.80
si-2	3.57

# Ectopic ER $\alpha$ Expression Reduced Sensitivity to Paclitaxel in SKBR3 Cells

A



B

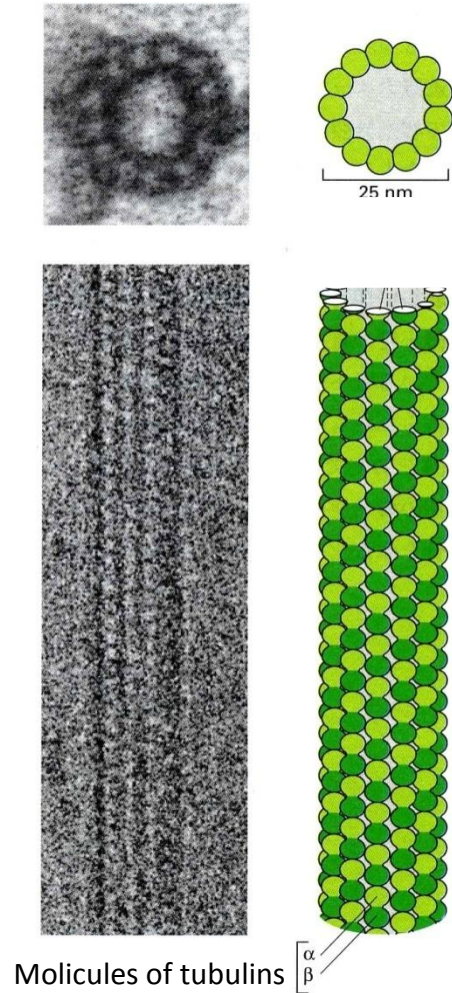


C

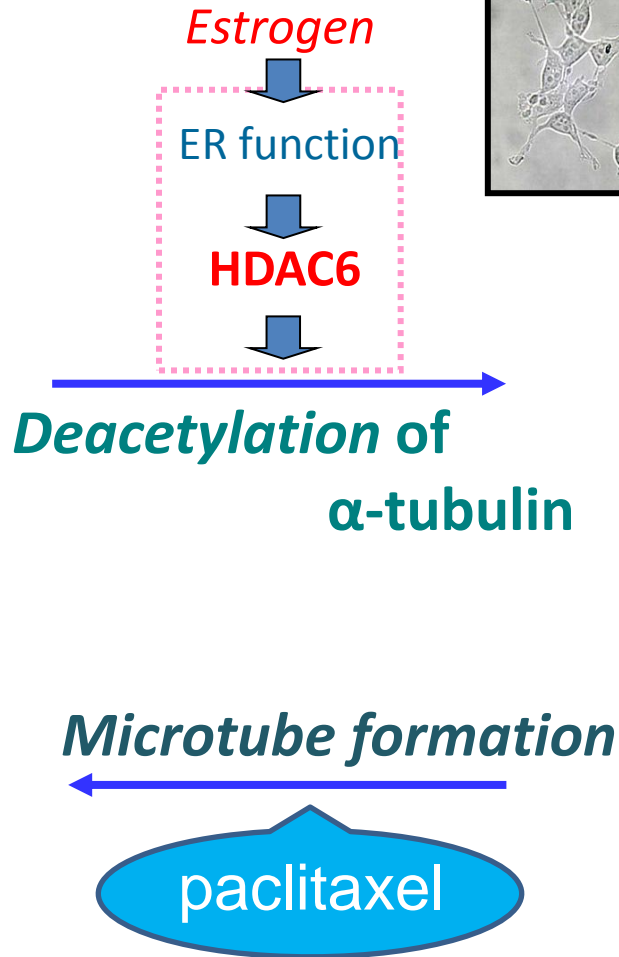
IC50 Values (nM)	
SKBR3	3.60
SKBR3-cont	3.08
SK-ERpos	> 10



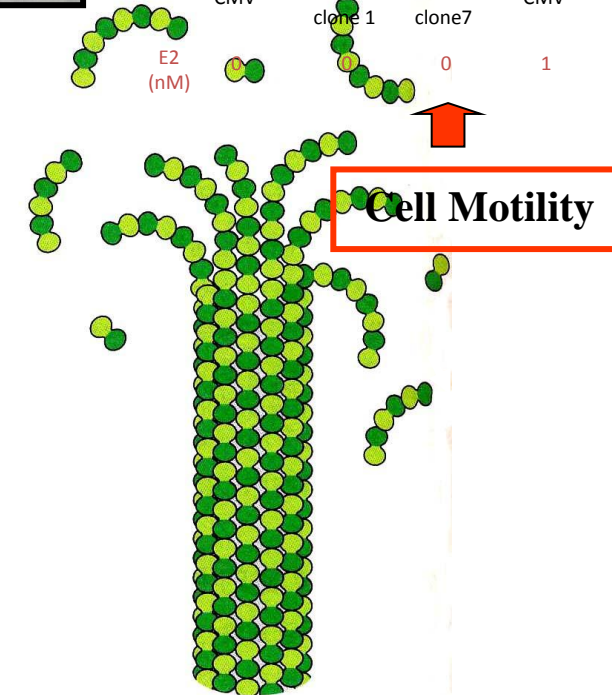
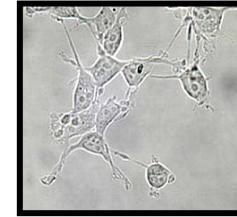
# Estrogen and HDAC6 Induces the Cell-motility by Tubulin Deacetylation in MCF-7 Cells



**Inhibition of cell division**

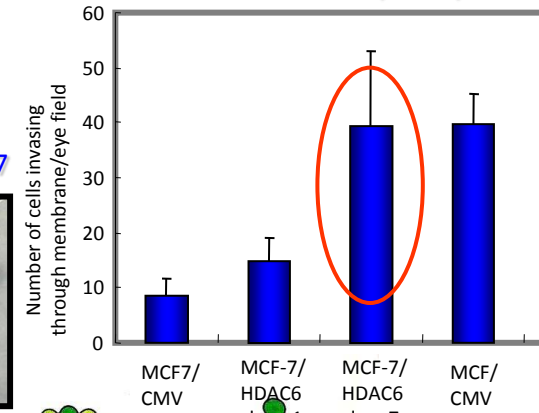


MCF7/HDAC6 clone7



**Destabilization of tubulin**

Cell motility assay

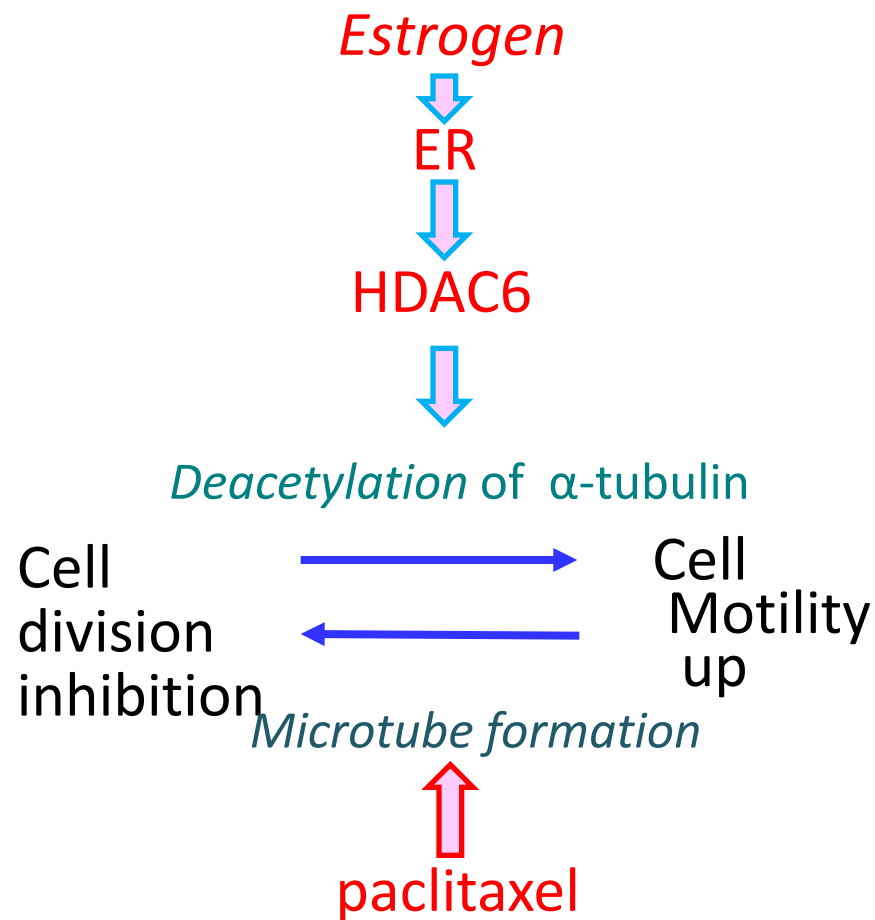
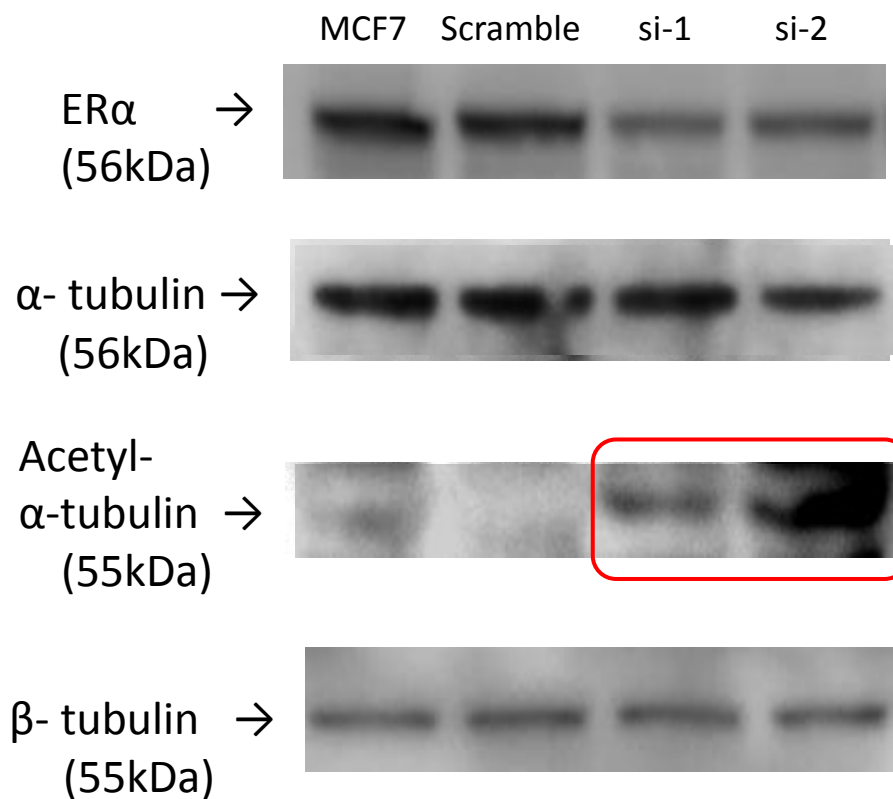


E2 (nM)

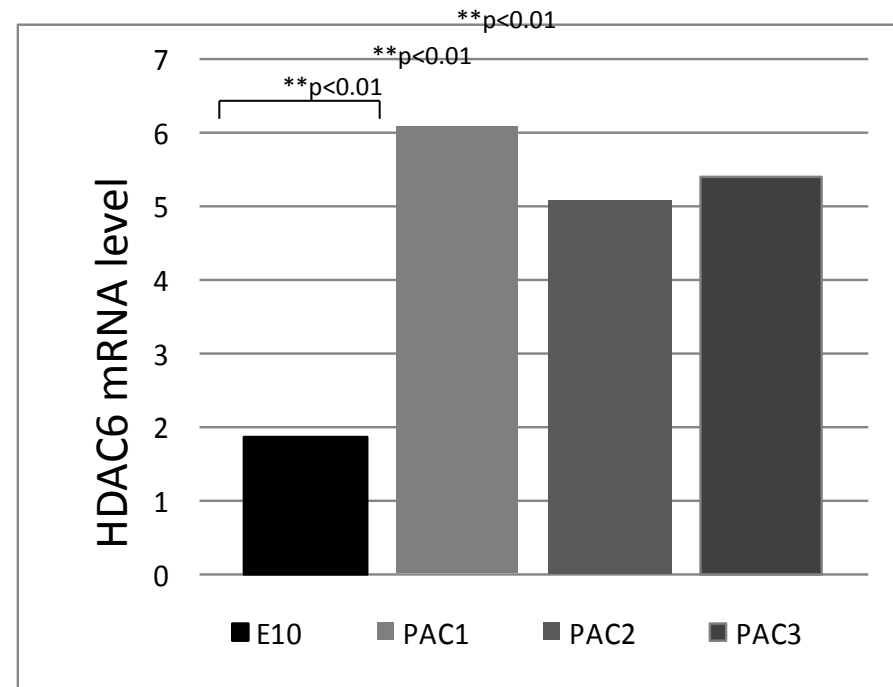
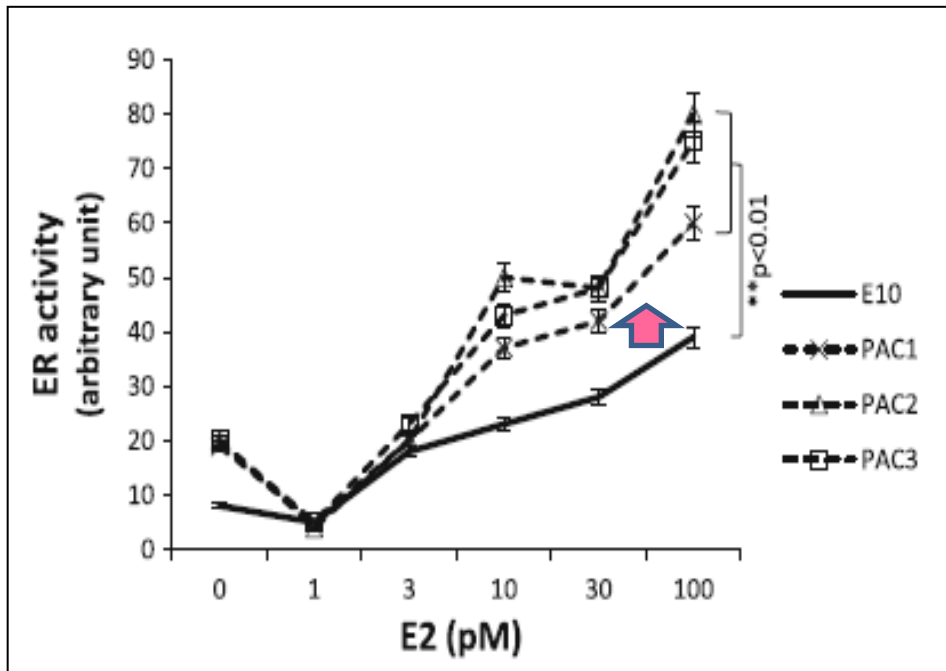
0 1

# Acetylation of Tubulin in ER-nockdown MCF-7 Cells

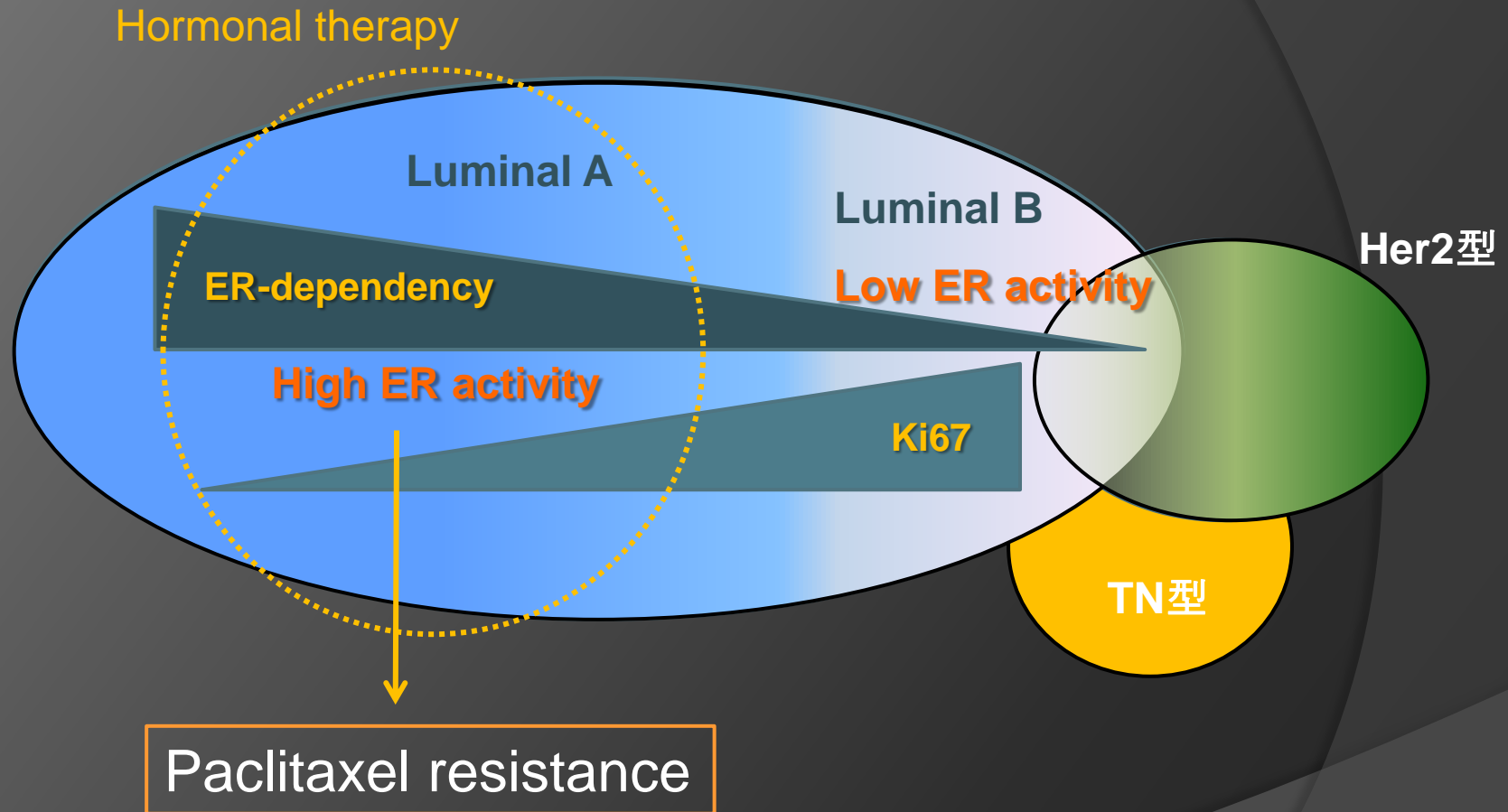
A



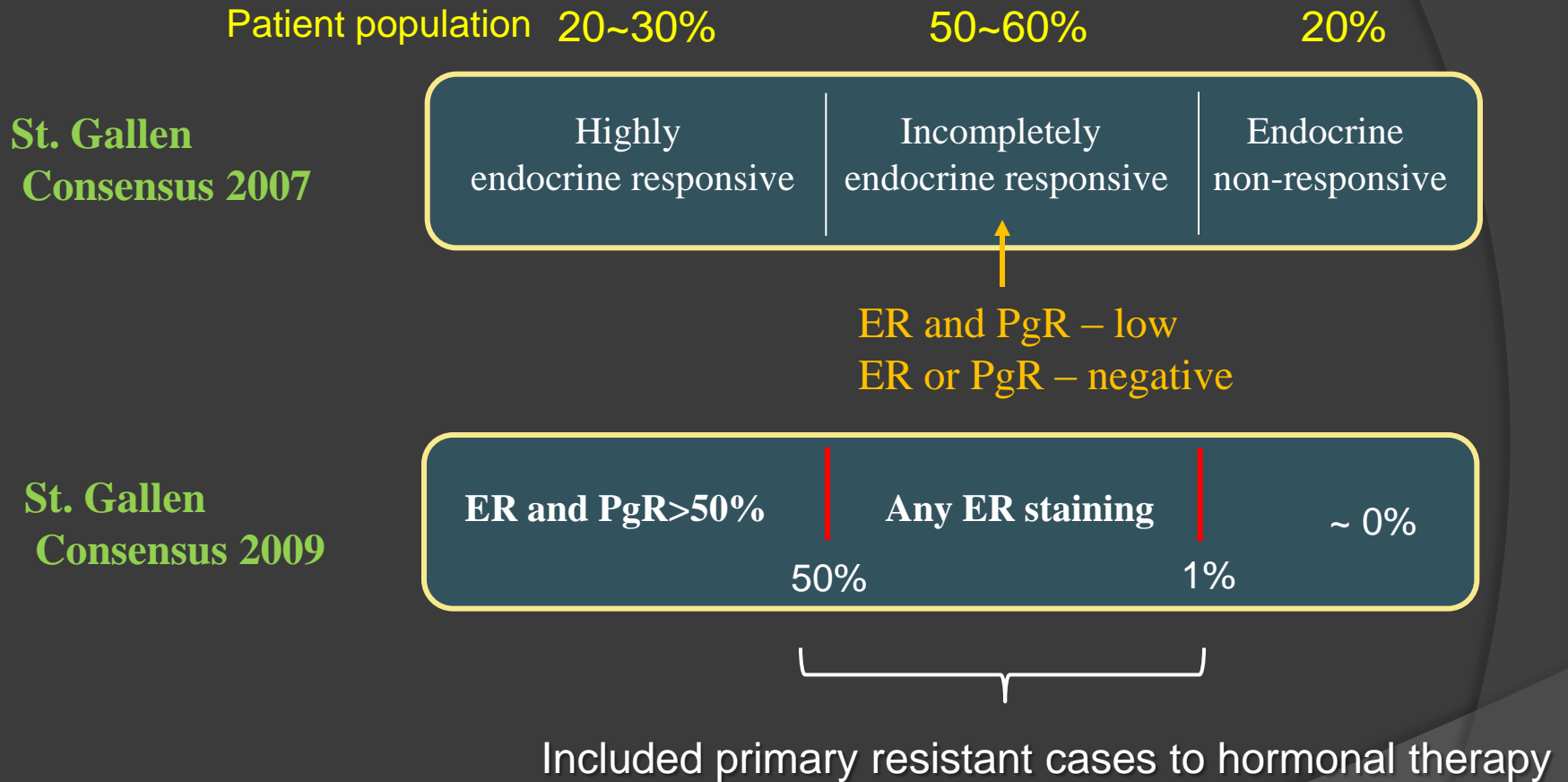
# ER activity and HDAC6 expression in Paclitaxel-resistant MCF-7 cells



# Heterogeneity of Luminal-type Breast Cancer

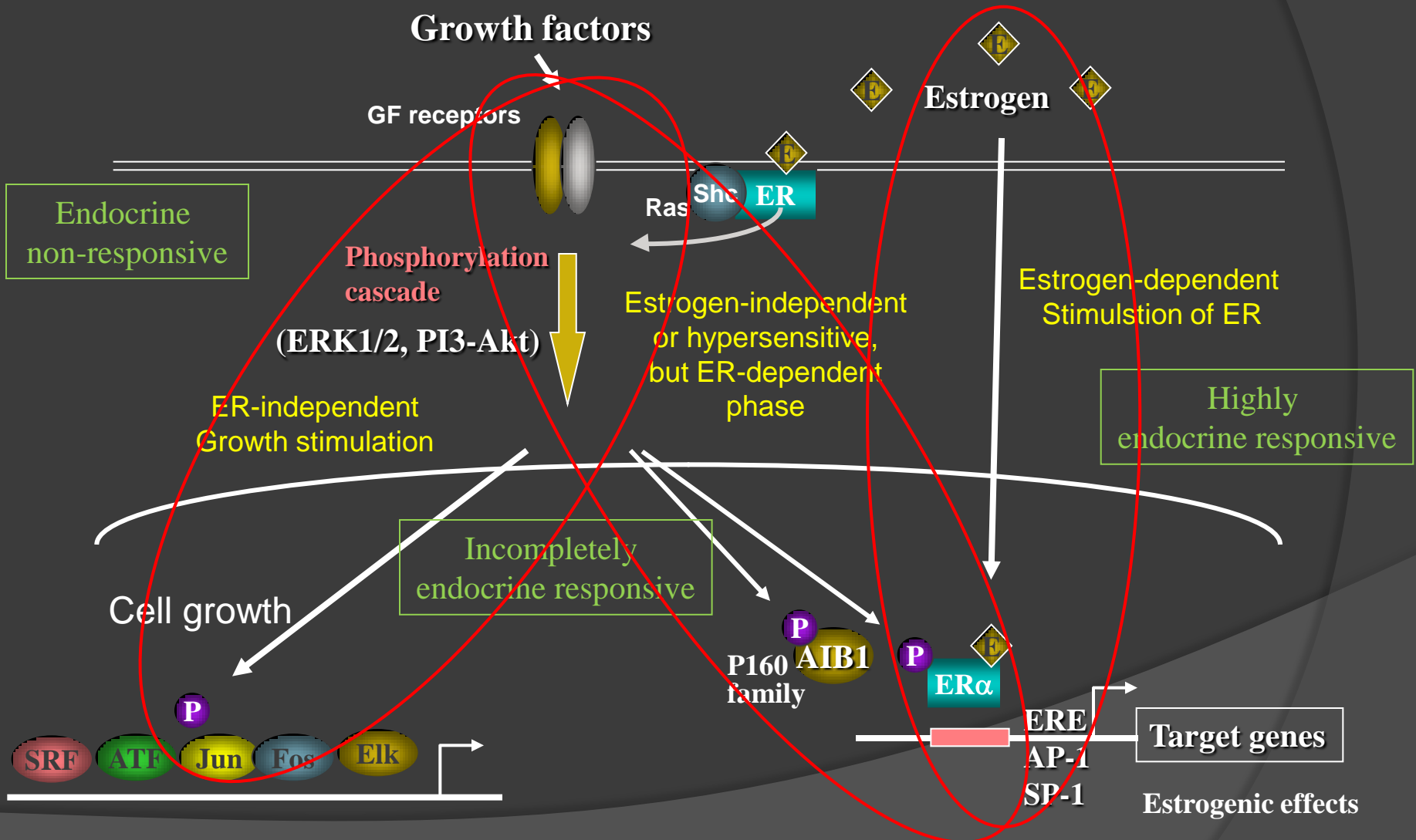


# Classification of Hormonal Response



**Intracellular estrogen signaling pathway in individuals**

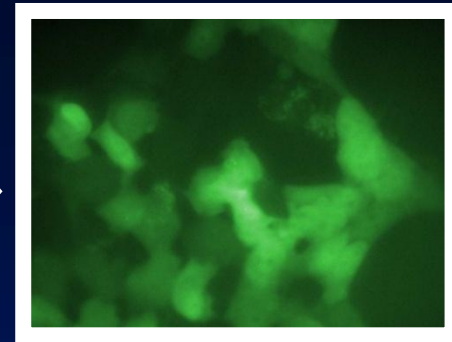
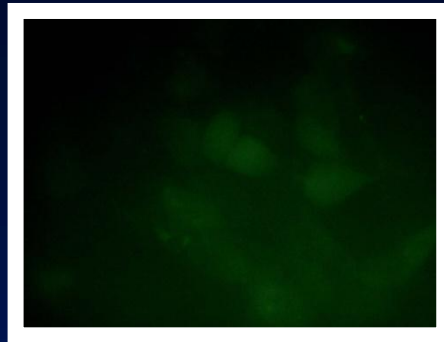
# Multiple Estrogen Signaling Pathway in Breast Cancer Cells



**MCF7-E10**

Parental cells

**T47D-TE8**

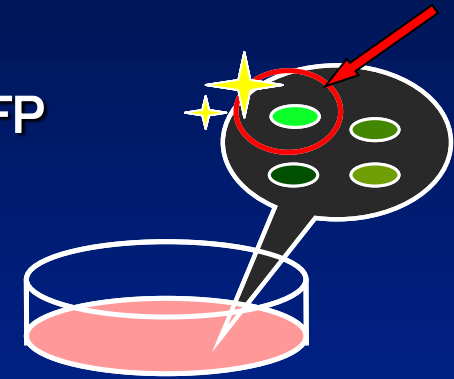


*Cancer Res. 65: 4653-4662, 2005*

None

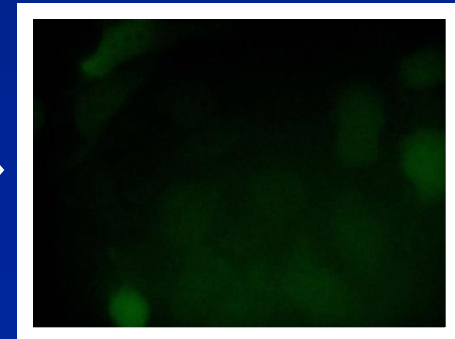
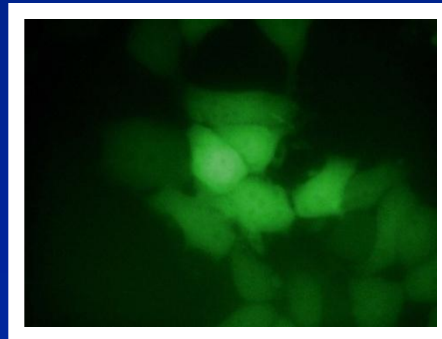
+ Estrogen

Long term estrogen-deprivation culture of ERE-GFP transfected MCF-7 cells (MCF-7-E10)



Select the GFP-positive colony

**Depletion resistant**



**E2-independent but  
ER-dependent activation**

None

+ Fulvestrant

# Established Cell Lines for AI-resistant Models

**Type I**

**GFP+**

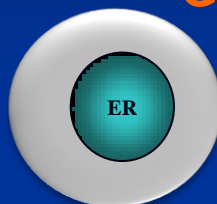


ER-high  
Ligand-independent  
activation

**A1, A2, C5**

**Type II**

**GFP -**

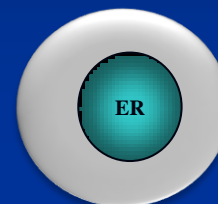


ER-low  
Phosphorylation-high

**A4, C7, K2**

**Type III**

**GFP -**



▲ GF-  
dependent

**U3, U8, U23, U25**

**Type IV**

**GFP+**



Androgen-dependent

**G1T, R6T**

**Type V**

**GFP+**

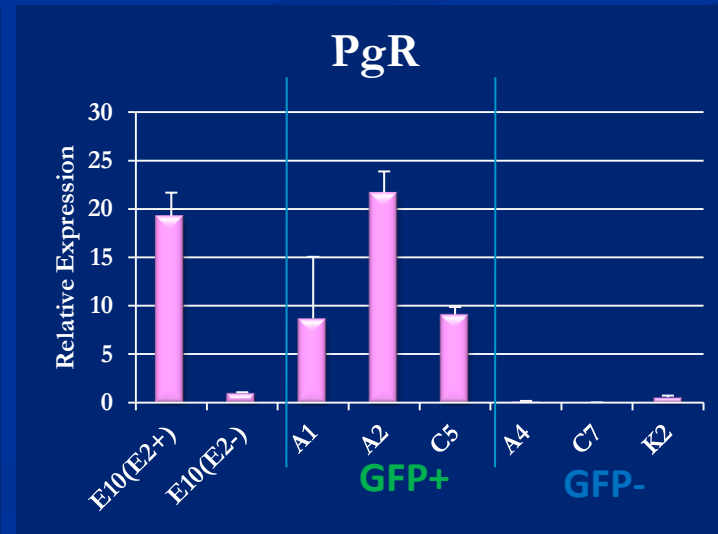
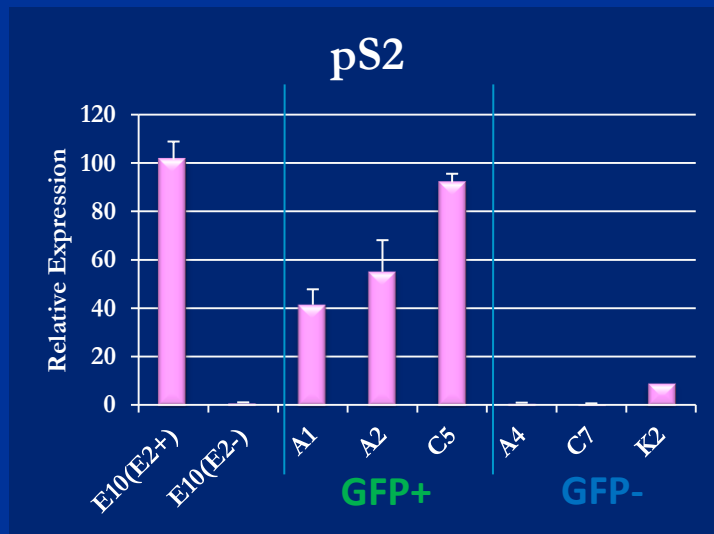
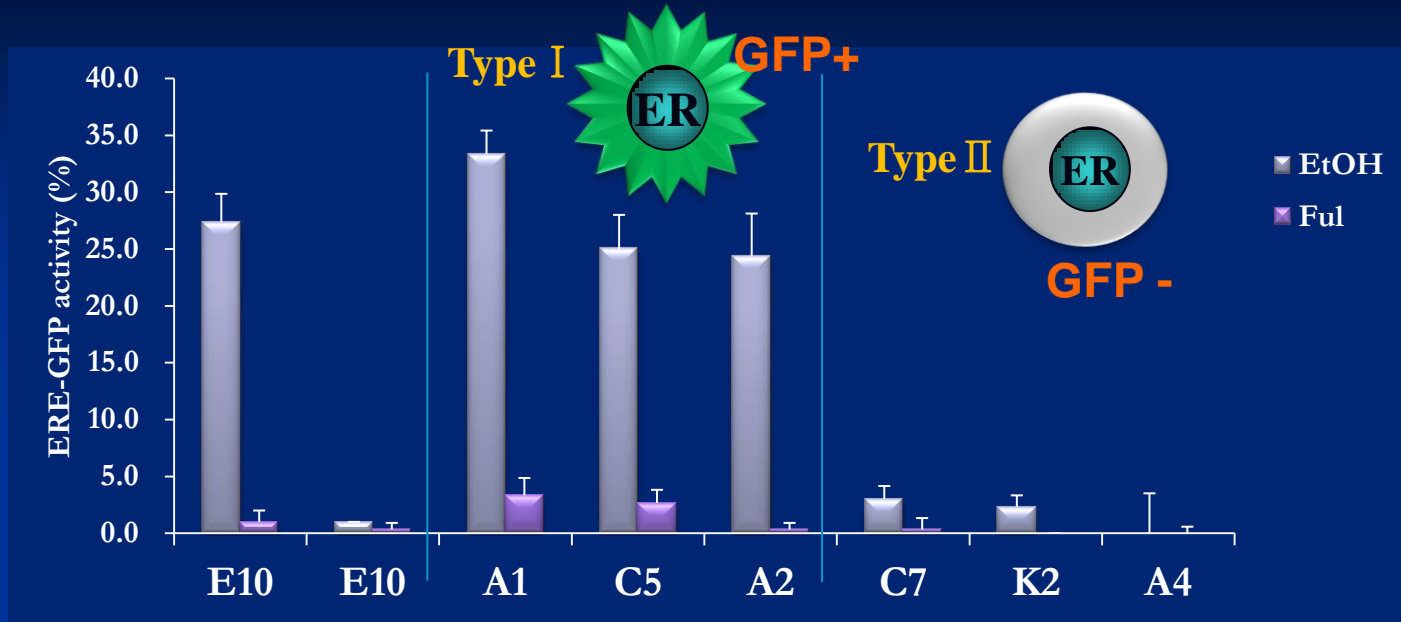


AI-resistant

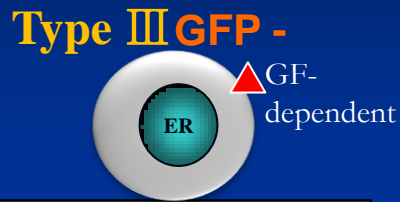
**LR2, LR3**



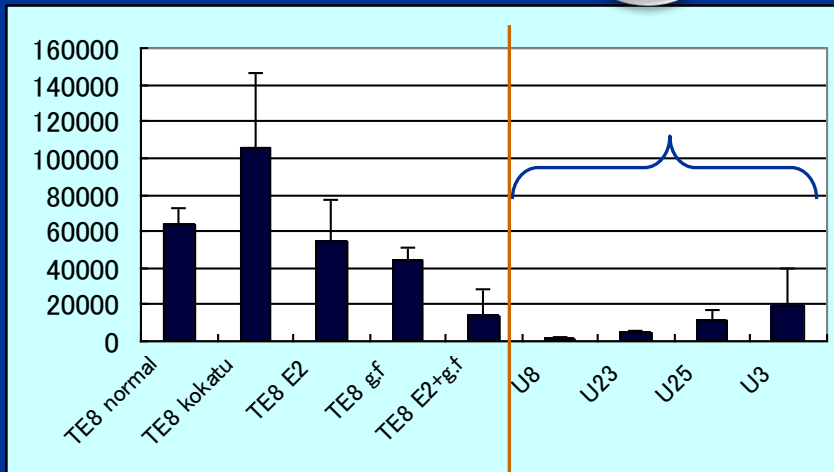
# ER Activity of EDR-MCF7-E10 Cells



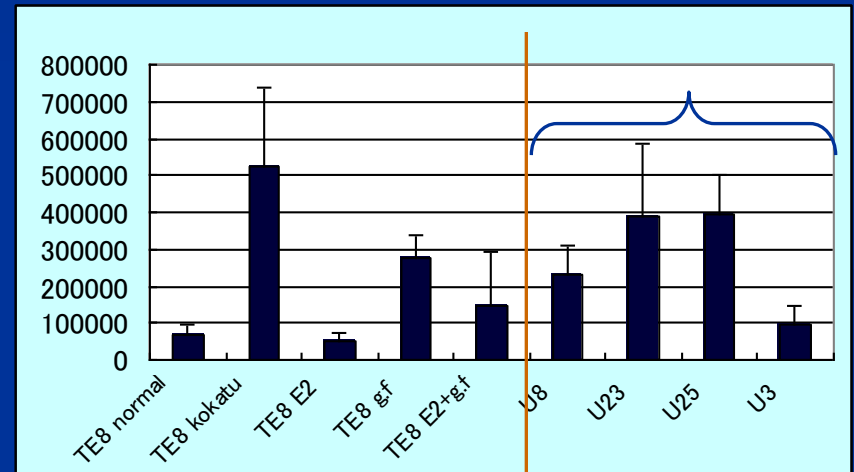
# Expression of ER and Her2 in EDR-T47D-TE8 (Type III)



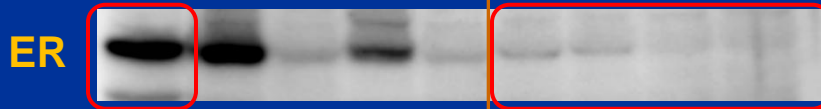
## ER $\alpha$ RT-PCR



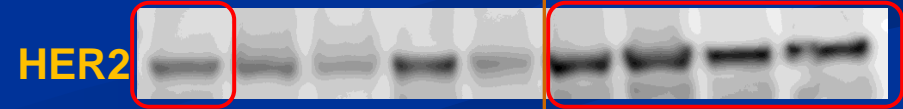
## HER2 RT-PCR

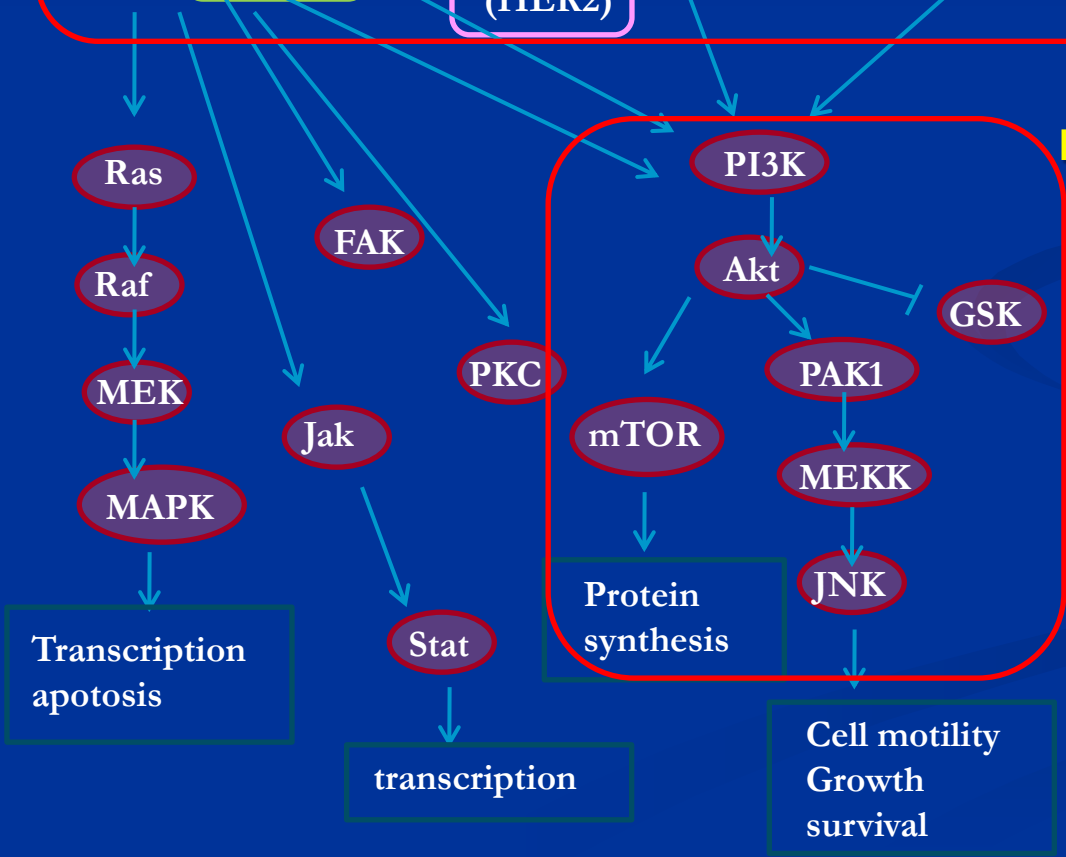
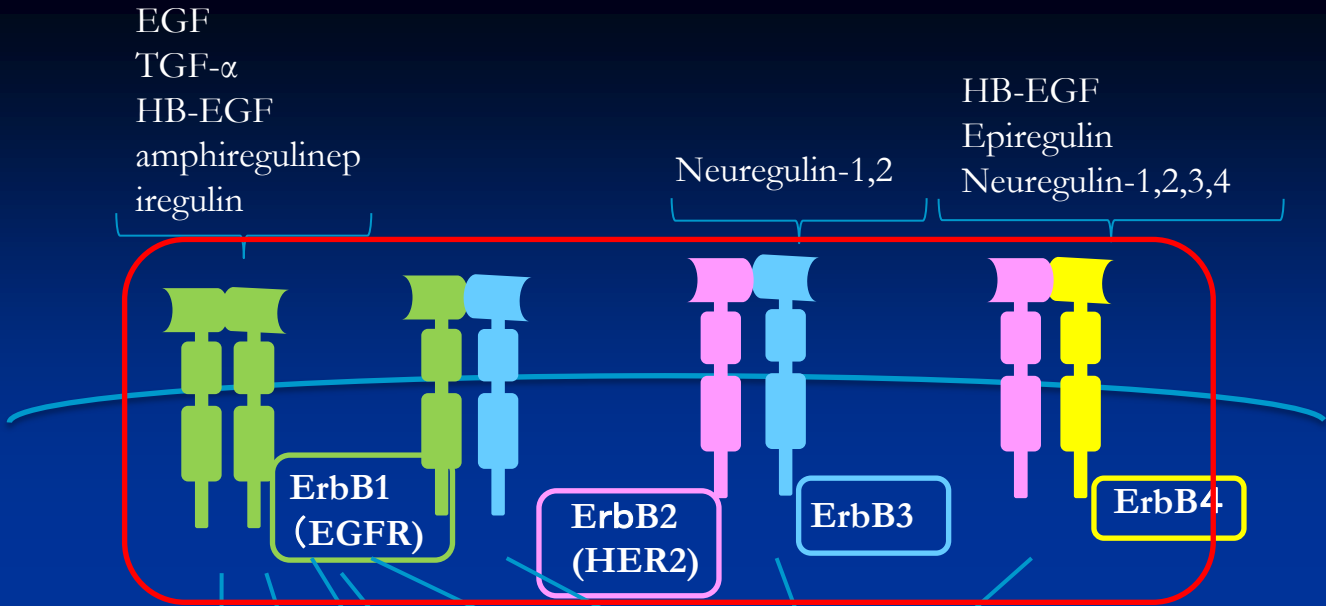


## Western blot

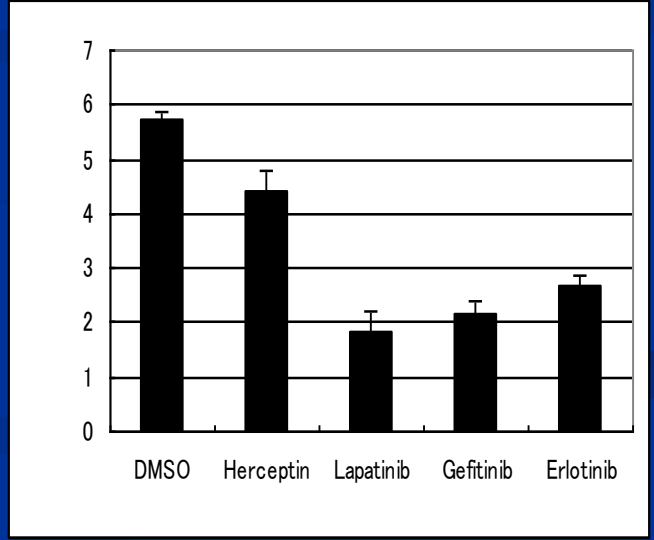


## Western blot

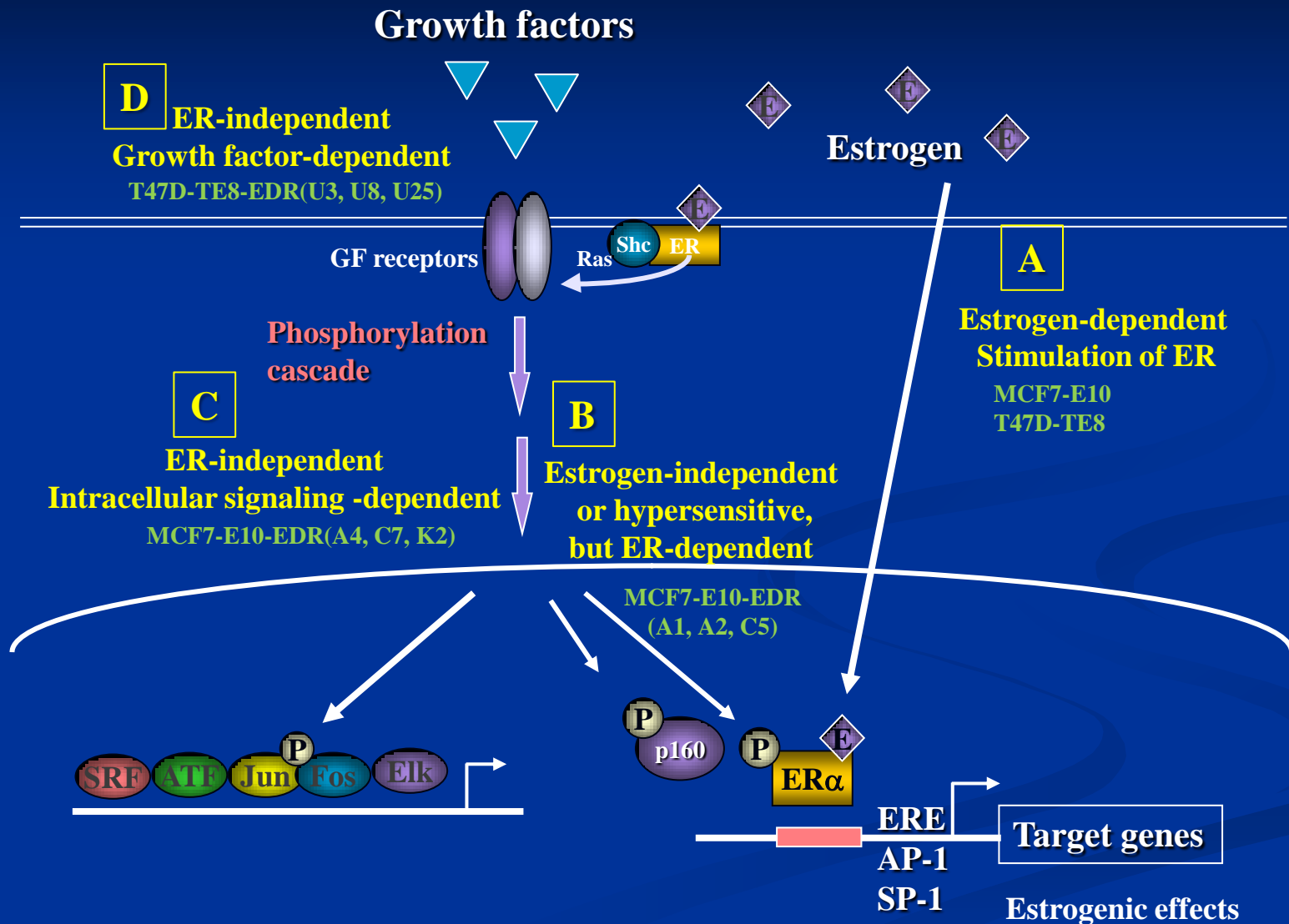




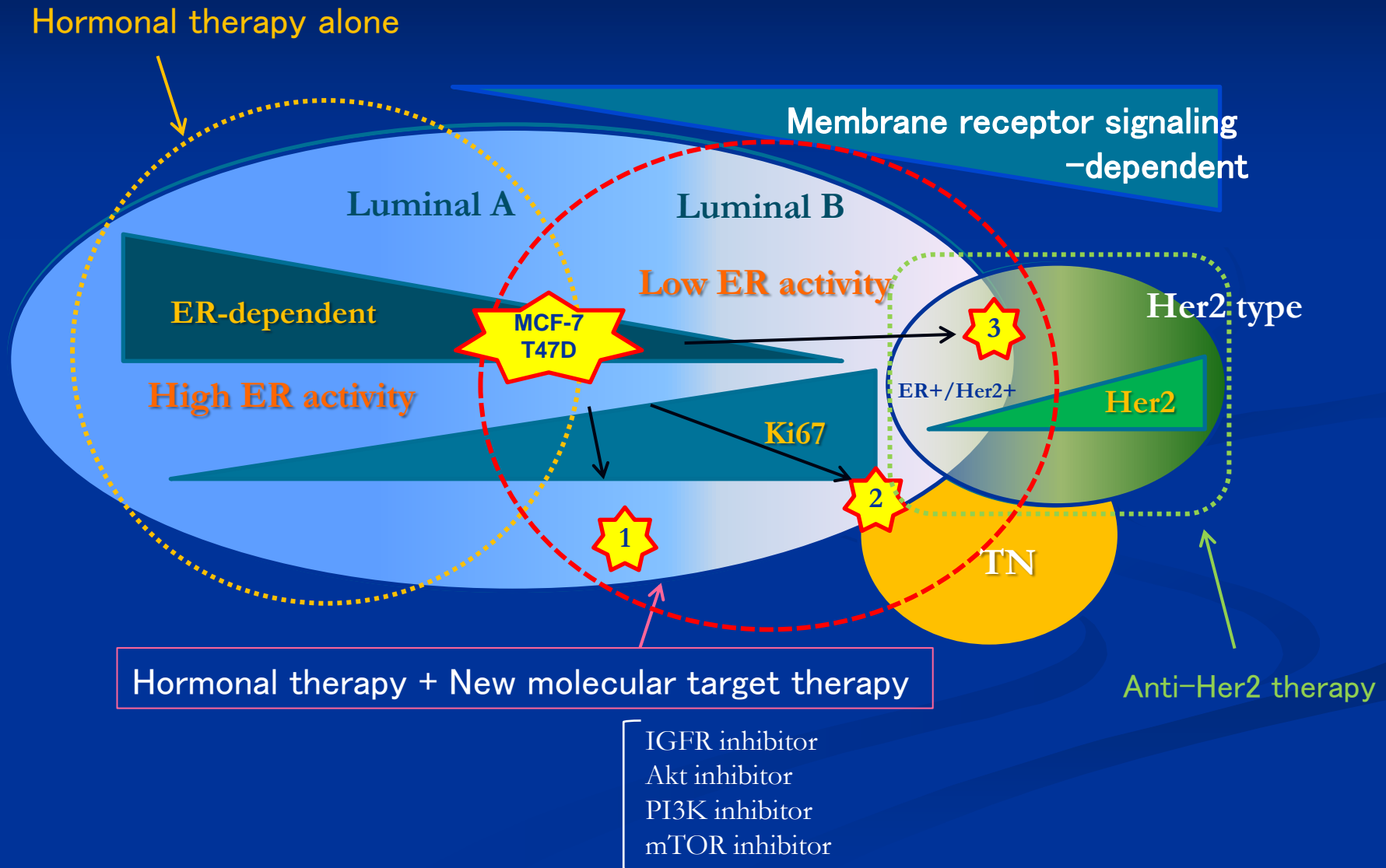
**Effect of Her family-targeting drugs**



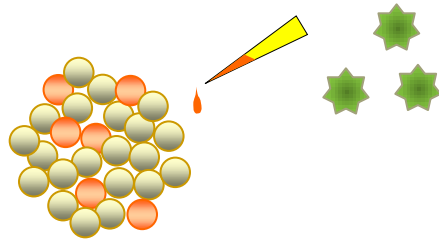
# Estrogen Signaling Pathway in Breast Cancer Cells



# Flexibility of Luminal-type Breast Cancer and Possible Eligibility of New Molecular targeting Therapy



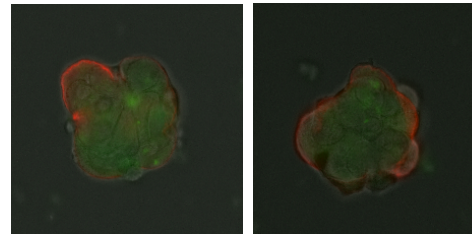
# ER activity in Breast Cancer Mammosphere



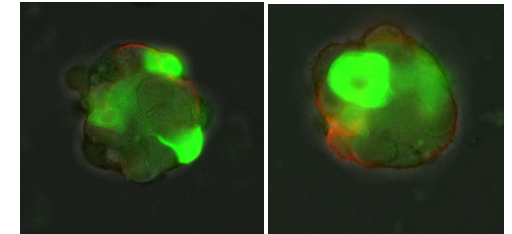
→ Fluorescence analysis

Ad-ERE-GFP

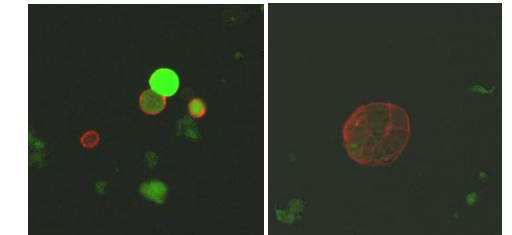
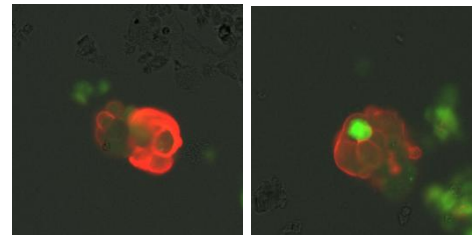
Pt91  
 Subtype : Luminal A  
 Metastasis : (+)  
 Spheroid formation : 228  
 CD44+/CD24-/Hoechst- : 0%



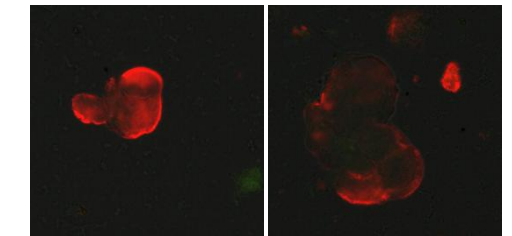
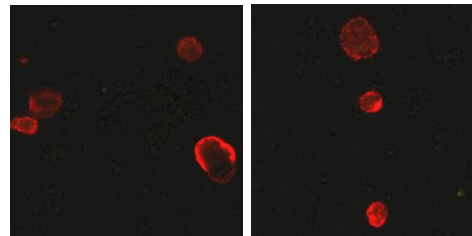
GFP (Green) , CD44 (Red)



Pt94  
 Subtype : Luminal A  
 Metastasis : (+)  
 Spheroid formation : 62  
 CD44+/CD24-/Hoechst- : 1.6%



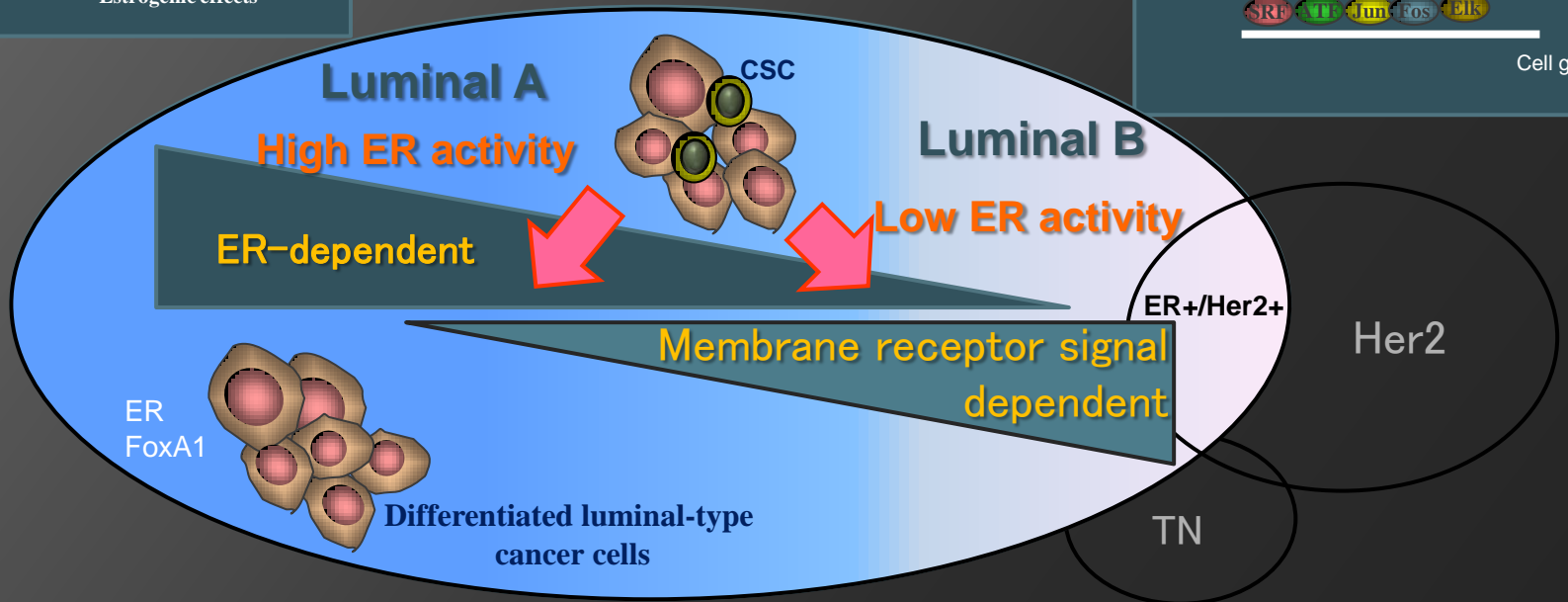
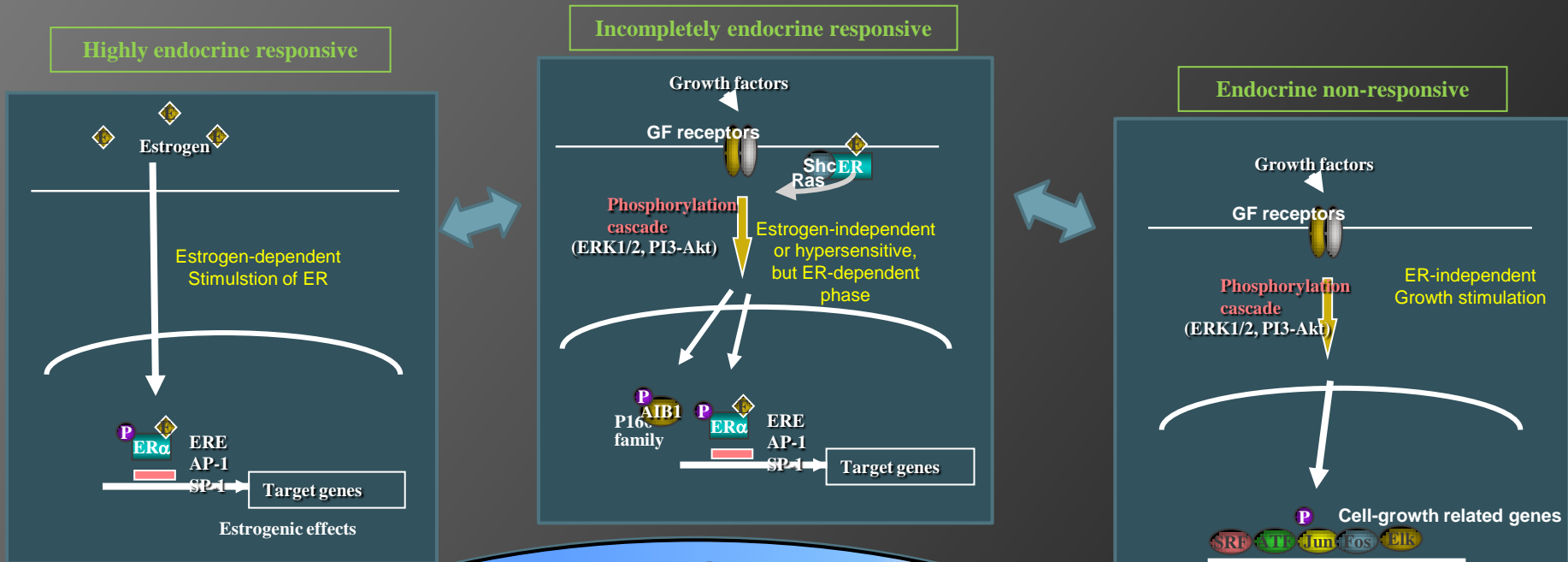
Pt101  
 Subtype : Basal-like  
 Metastasis : (-)  
 Spheroid formation : 173  
 CD44+/CD24-/Hoechst- : 1.3%



EtOH

+ E2

# Heterogeneity of Intracellular Signaling in Luminal-type



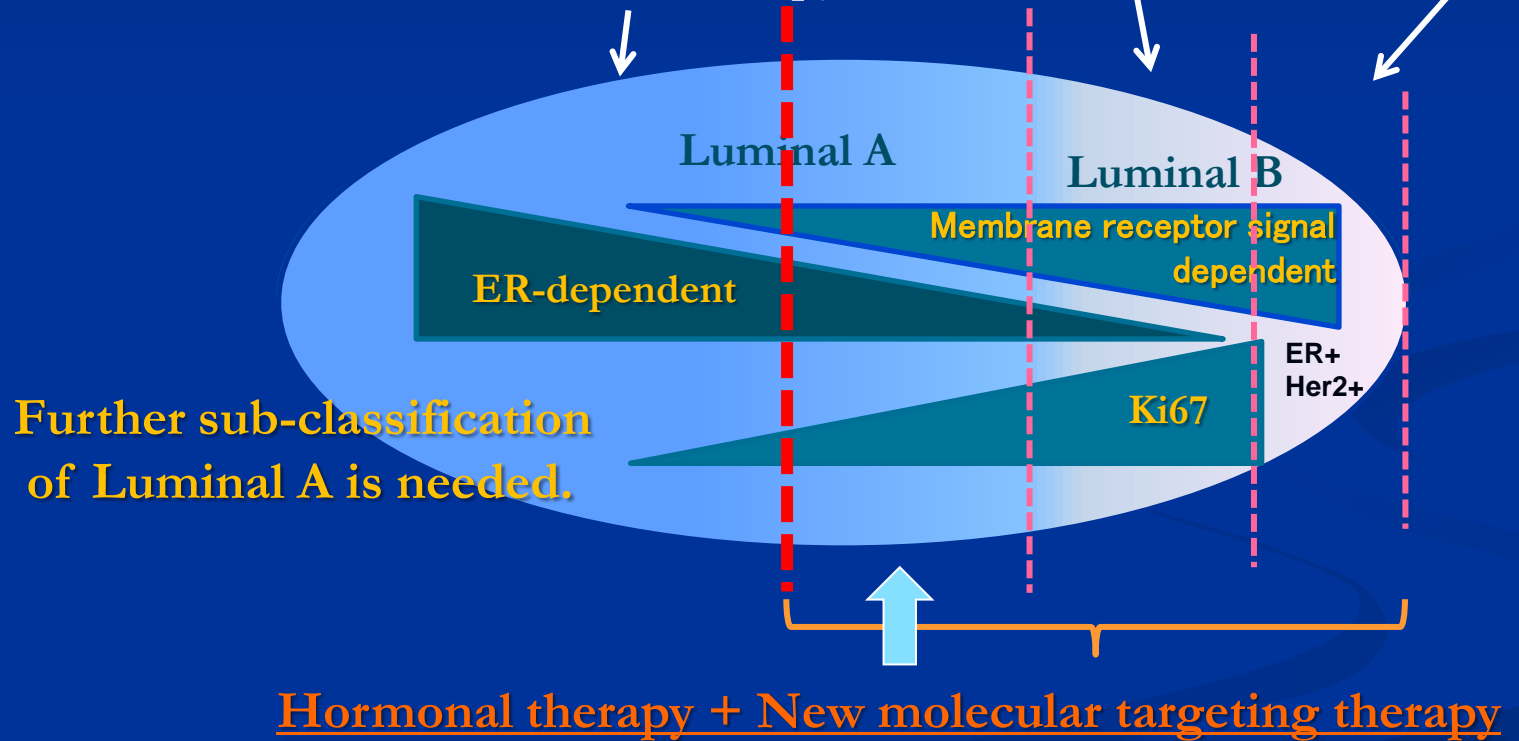
# Classification of Luminal type for Therapeutic Management

## Present eligibility

Luminal B (Her2+): Chemotherapy + Anti-Her2 therapy

Luminal B (Ki67-high): Chemotherapy + Hormonal therapy

Luminal A: Hormonal therapy alone



For example, AI+Lapatinib+IGFR-I (Akt-I, mTOR-I)



# Collaborators

## Tohoku University

**Hiromi Konno**  
**Chiyuki Uematsu**  
**Tatsuyuki Gohn**  
**Chika Tazawa**  
**Toshifumi Niwa**  
**Takako Ito**  
**Toru Higuchi**

**Natsu Fujiki**  
**Megumi Endo**  
**Miho Tanaka**  
**Yuri Shinagawa**  
**Toru Hanamura**  
**Ayaka Inaba**  
**Nozomi Sato**

## Saitama Cancer Center

**Yuri Yamaguchi**  
**Yuko Seino**  
**Hiroyuki Takei**  
**Emi Tokuda**  
**Masahumi Kurosumi**  
**Hanako Oba**



**Reserch Institute for Clinical Oncology**

**Department of Molecular and Functional Dynamics**