

Summer 8-10-2023

Tryphostin (AG 879): A Potential Drug to Treat Glioblastoma

Nathan K. Jobalia

Creighton University, University of Nebraska Medical Center

Indumati Ramireddy

University of Nebraska Medical Center

Poonam Yadav

University of Nebraska Medical Center

Raghupathy Vengoji

University of Nebraska Medical Center

Surinder K. Batra

University of Nebraska Medical Center

See next page for additional authors

Tell us how you used this information in this [short survey](#).

Follow this and additional works at: <https://digitalcommons.unmc.edu/surp2023>

Recommended Citation

Jobalia, Nathan K.; Ramireddy, Indumati; Yadav, Poonam; Vengoji, Raghupathy; Batra, Surinder K.; and Shonka, Nicole, "Tryphostin (AG 879): A Potential Drug to Treat Glioblastoma" (2023). *Posters: 2023 Summer Undergraduate Research Program*. 15.

<https://digitalcommons.unmc.edu/surp2023/15>

This Poster is brought to you for free and open access by the Summer Undergraduate Research Program at DigitalCommons@UNMC. It has been accepted for inclusion in Posters: 2023 Summer Undergraduate Research Program by an authorized administrator of DigitalCommons@UNMC. For more information, please contact digitalcommons@unmc.edu.

Author

Nathan K. Jobalia, Indumati Ramireddy, Poonam Yadav, Raghupathy Vengoji, Surinder K. Batra, and Nicole Shonka

Tryphostin (AG 879): A Potential Drug to Treat Glioblastoma.

Summer Undergraduate
Research Program
2023

Nathan Jobalia^{1,4}, Ramireddy Indumati¹, Poonam Yadav¹, Raghupathy Vengoji¹, Surinder K. Batra^{1,2,3}, Nicole Shonka⁵.
¹Department of Biochemistry and Molecular Biology, ²Fred and Pamela Buffett Cancer Center, ³Eppley Institute for Research in Cancer and Allied Disease, ⁴Creighton University, Omaha, NE, 68178, ⁵Department of Internal Medicine, Division of Oncology and Hematology, University of Nebraska Medical Center, Omaha, NE, 68198, USA.

Background

- Glioblastoma (GBM) is one of the most aggressive, primary-malignant tumors of the central nervous system, associated with high morbidity and mortality rates. Accounting for 45.2% of adult brain tumors, GBM has a 5.5% survival rate.¹ Despite various modern approaches including radio- and chemo-therapies and surgery, GBM remains incurable.²

- Normally, nerve growth factor receptors (NGFR's) regulate cell proliferation, survival, cell cycle progression, apoptosis, and cell migration by binding to nerve growth factor (NGF).

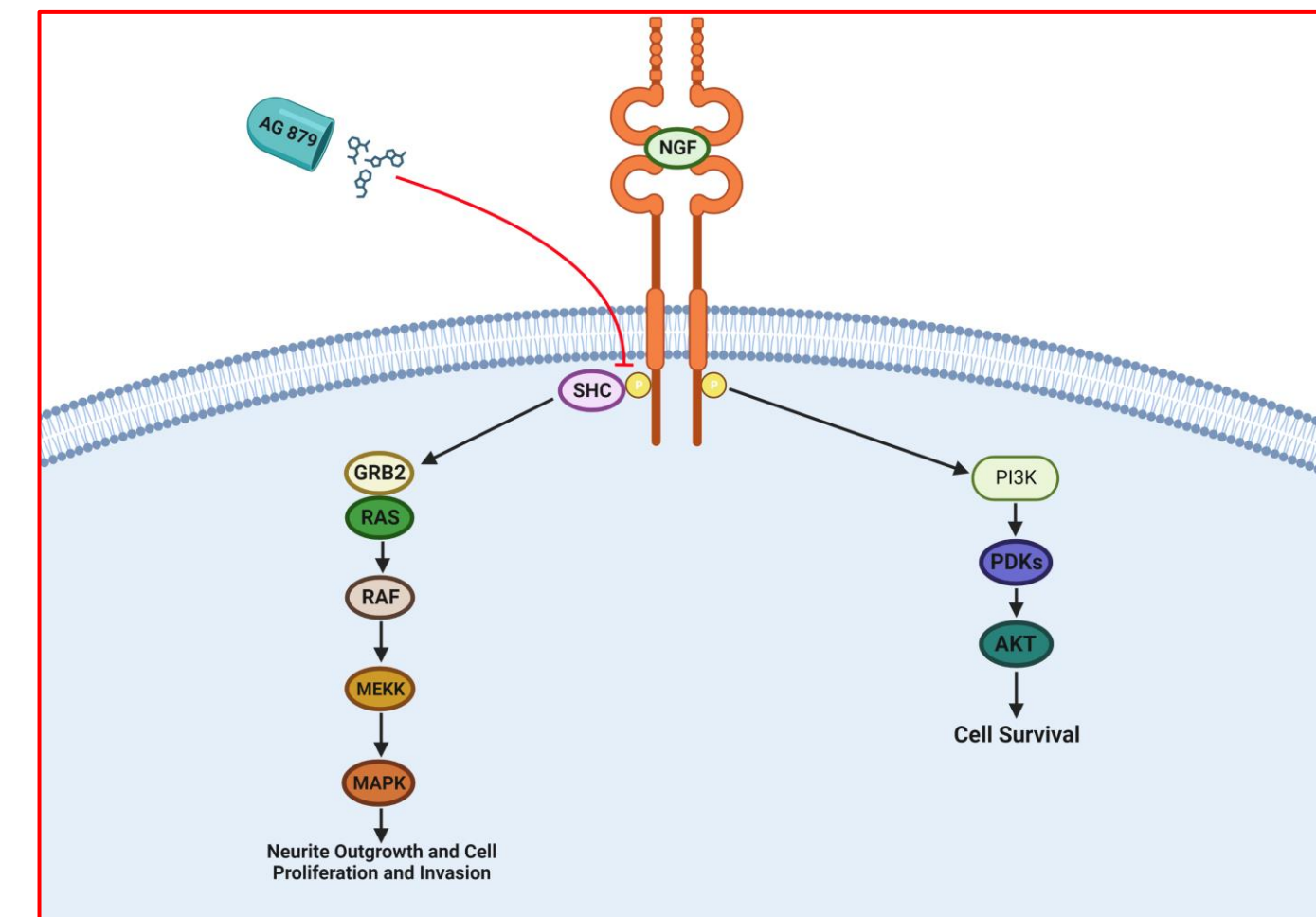


Fig. 1. NGFR signaling in cancer and AG 879 inhibition.

- Tumorigenic NGFR inhibits p53 transcription by directly interacting with its DNA binding domain and through direct association with MDM2, enhancing MDM2-mediated p53 ubiquitination and proteasomal degradation.
- Tryphostin AG 879 (also known as AG 879) is a known tyrosine kinase A (TrkA) inhibitor in the NGFR pathway.³
- AG879 inhibits phosphorylation at Y490 on TrkA activation domains, inhibiting neurite outgrowth and cell proliferation.⁴

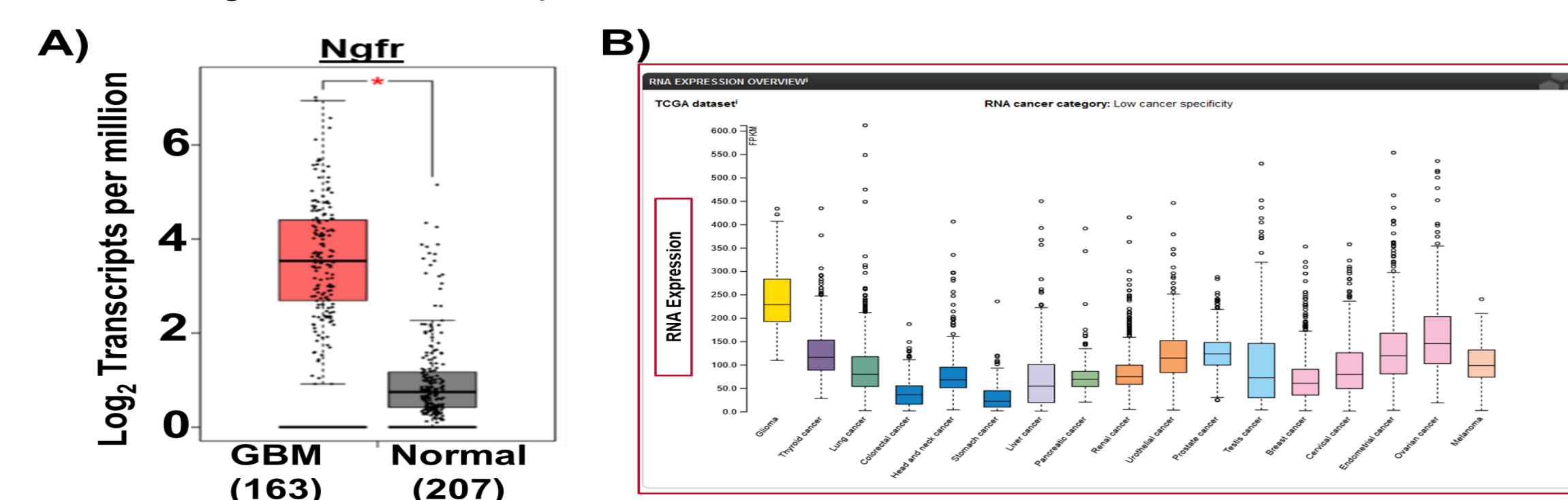
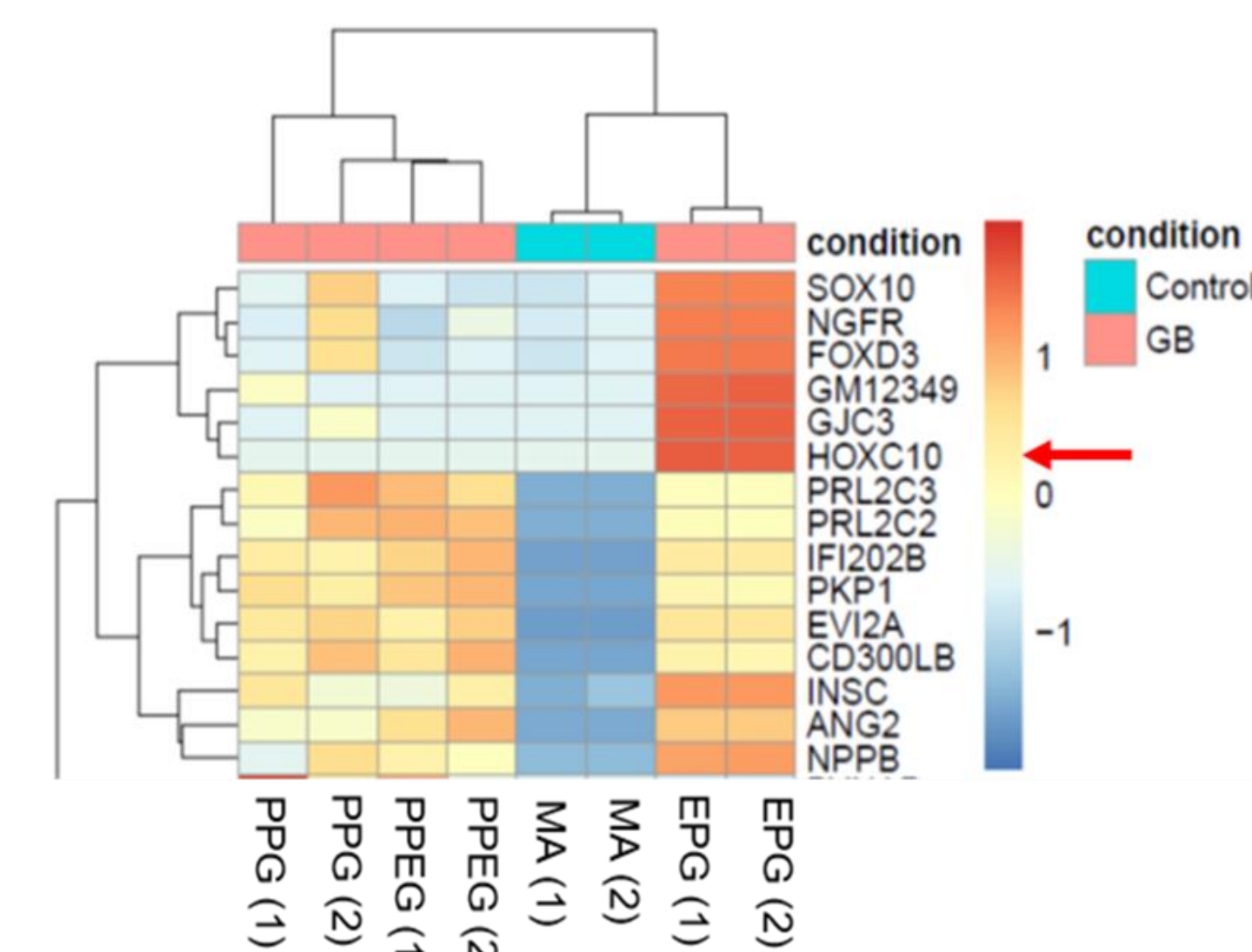


Fig. 2. NGFR expression increased in GBM. (A) Gene Expression Profiling Interactive Analysis (GEPIA) on NGFR expression in GBM. (B) TCGA Data of NGFR RNA expression in various types of cancer.

Methods

- U251 and U118 cells were cultured in DMEM high-glucose media.
- Cells were split and seeded into 96-well plates to conduct MTT analysis.
- Cells were split and seeded into 10mm plates to conduct lysate collection and protein estimation.
- Lysates were also used to conduct Western Blot analysis.
- Gels were transferred and probed for β -actin and phospho-Akt.

Results



MA – mouse astrocytes; PPG – PTEN^{-/-}; p53^{R172H/+} & GFAP Cre; PPEG – PTEN^{H/+}; p53^{R172H/+}; EGFRVIII & GFAP Cre; EPG – EGFRVIII, p16^{-/-} & GFAP Cre.

Fig. 3. NGFR expression increased in EPG mouse syngeneic cell lines, which possess an EGFRVIII overexpression and tumor suppressor p16 deletion. RNA-seq analysis was done in MA, PPG, PPEG and EPG mouse GBM syngeneic cell lines.

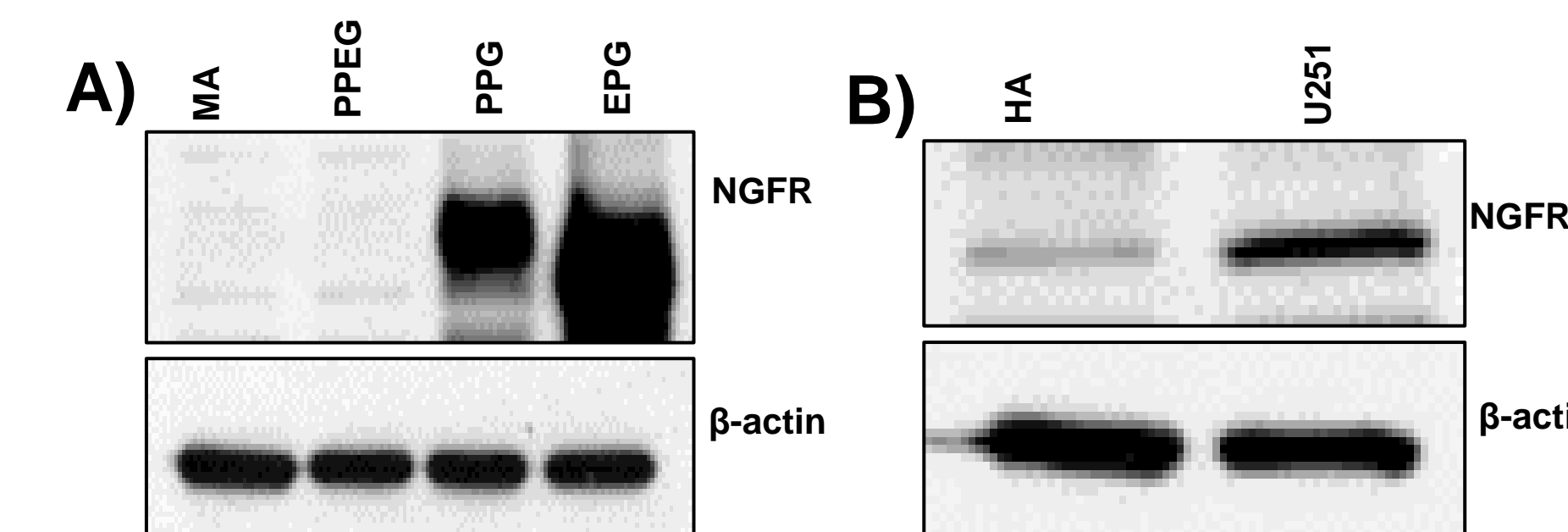


Fig. 4. NGFR expression inside GBM cell lines. NGFR expression was assessed in various models (A), including mouse astrocytes (MA), PPEG, PPG, and EPG. NGFR expression was heightened in PPG and EPG models relative to other models. β -actin was used as a loading control. NGFR expression was also assessed in the human GBM cell line U251, using human astrocytes as a control (B). NGFR expression was heightened in cells possessing GBM. β -actin was used as a loading control.

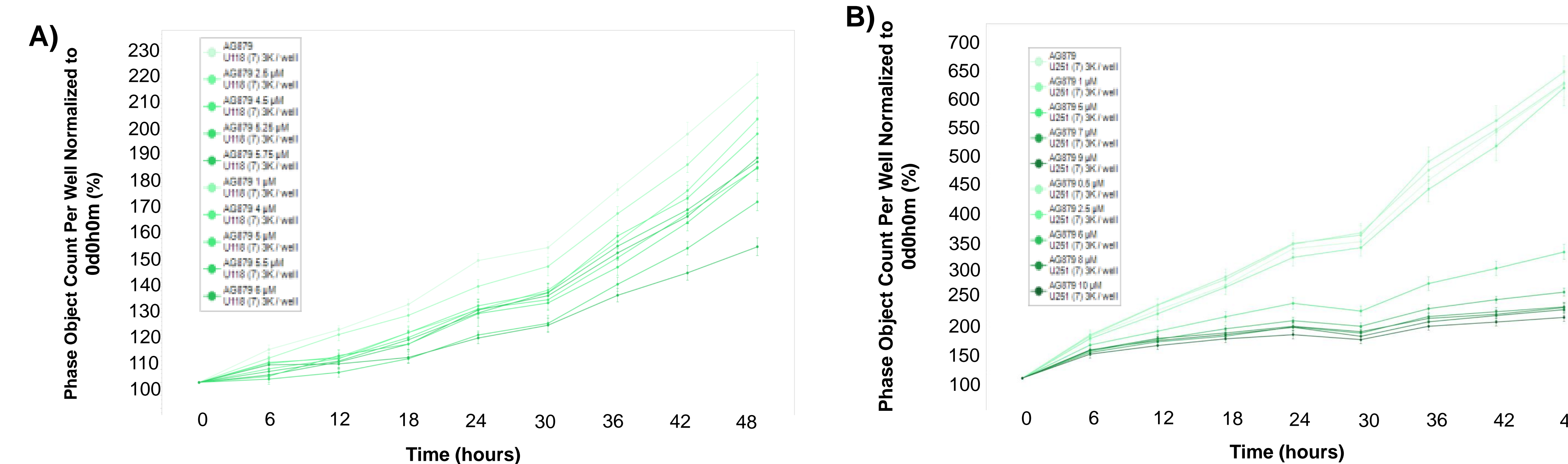


Fig. 5. AG 879 inhibits U118 and U251 GBM cell growth in a concentration-dependent manner. U118 (A) and U251 (B) GBM cell lines were treated with varying concentrations of AG 879 (portrayed by changing color density). Their growth was tracked over 48 hours using IncuCyte[®] S3 Live-Cell Analysis system, which highlighted the drug's dose-dependent inhibition.

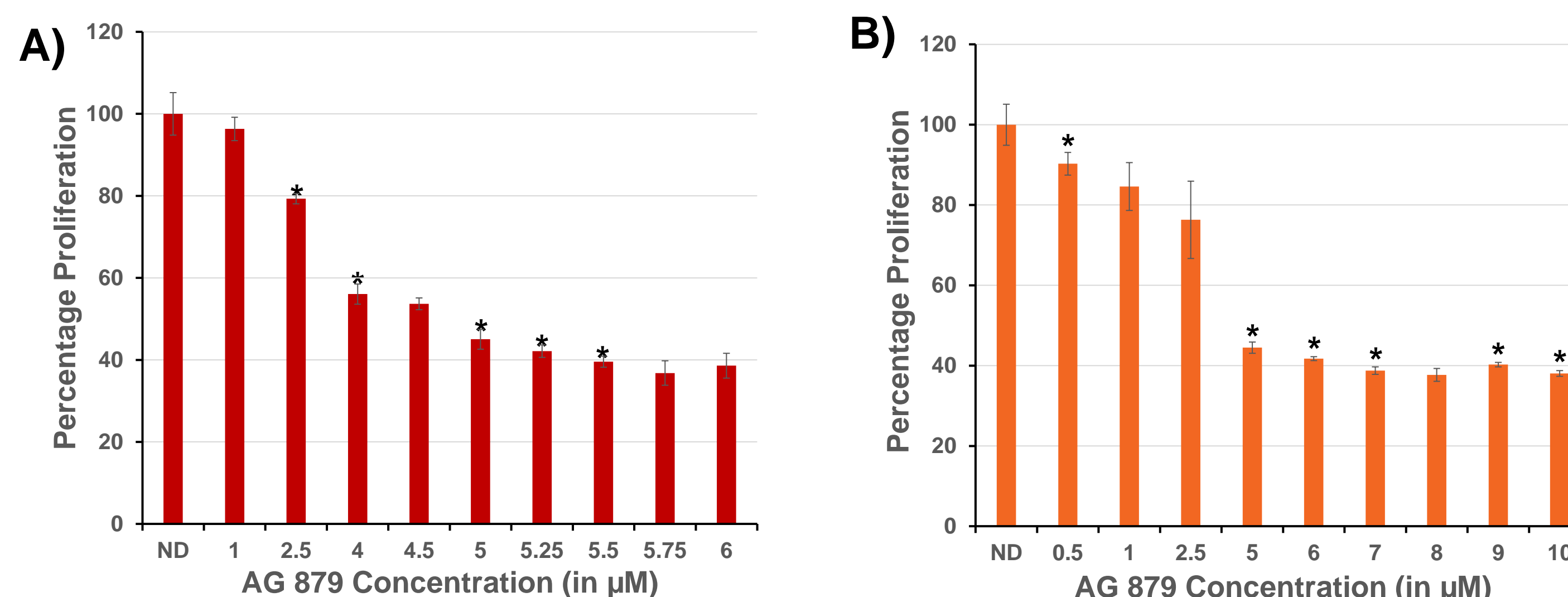


Fig. 6. AG 879 shows dose dependent growth inhibition. To assess the survivability of GBM cells against varying concentrations of AG 879, MTT analysis was used. Such values demonstrated dose-dependent inhibition caused by AG 879 in U118 (A) and U251 (B) GBM cell lines. From it, IC₅₀ values were identified. *P-values less than 0.05 were considered as statistically significant.

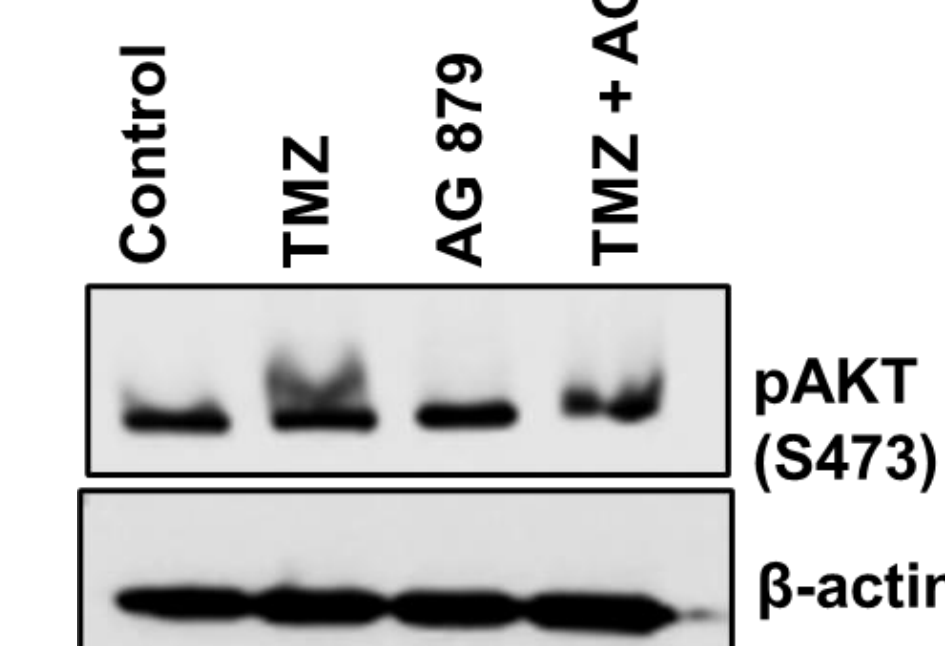


Fig. 7. AG 879 and TMZ combination decreases AKT activation (cell survival). U251 cells were treated with IC₂₅ of TMZ, AG 879 or combination of both for 72 hours and lysates were analyzed for AKT activation. β -actin serves as the loading control.

Summary and Discussion

- In both human and mice GBM cell lines, NGFR expression is heightened compared to normal.
- AG 879 shows dose-dependent growth inhibition in both U251 and U118 GBM cell lines, as demonstrated through MTT analysis. This was further confirmed through IncuCyte[®] system analysis.
- Combination treatments of TMZ and AG 879 showed decreased proliferation of GBM cells compared to controls and individual drugs themselves.
- AG 879, a TrkA inhibitor, kills cancer cells by inhibiting phosphorylation of NGFR, which inhibits subsequent signaling cascades and prevents neurite outgrowth, cell proliferation, and invasion⁴.
- In the future, research can identify the blood-brain barrier permeability of AG 879, mechanisms by which AG 879 elicits its anti-tumorigenic potential, and further assess the possibility of combination treatments on mice.

References

- Kanderi T, Gupta V. Glioblastoma Multiforme. [Updated 2022 Sep 12]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK558954>
- Farina Hanif, Kanza Muzaffar; kakhkashan Perveen; Saima Mehmood Malhi; Shabana Usman Simjee. "Glioblastoma Multiforme: A Review of its Epidemiology and Pathogenesis through Clinical Presentation and Treatment". *Asian Pacific Journal of Cancer Prevention*, 18, 1, 2017, 3-9. doi: 10.22034/APJCP.2017.18.1.3
- Ohmichi, Masahide, et al. "The Tyrosine Kinase Inhibitor Typhostin Blocks the Cellular Actions of Nerve Growth Factor." *Biochemistry*, vol. 32, no. 17, May 1993, pp. 4650-58, <https://doi.org/10.1021/bi00068a024>.
- Norman, Bryan H., and Jeff S. McDermott. "Targeting the Nerve Growth Factor (NGF) Pathway in Drug Discovery. Potential Applications to New Therapies for Chronic Pain." *Journal of Medicinal Chemistry*, vol. 60, no. 1, Jan. 2017, pp. 66-88, <https://doi.org/10.1021/acs.jmedchem.6b00964>.