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Introduction

- Gastric cancer is one of the most common cancers worldwide and the second most common cause of cancer-related deaths in the world.
- Infection with *Helicobacter pylori* (*H. pylori*) is the main factor associated with the development of intestinal-type gastric cancer.
- The infection induces a cascade of inflammatory events leading to non-atrophic gastritis, multifocal atrophic gastritis, intestinal metaplasia, dysplasia and cancer.
- microRNA (miRNA) are small 18-23 nucleotide molecules product of the degradation of primary miRNA by Drosha and Dicer.
- Several miRNA have been associated with the inflammatory cascade induced by *H. pylori* modulating the production of cytokines and tissue damage observed in patients with gastritis.
- Preliminary data shows differential miRNA signatures in advanced stages of gastritis.
- Our previous observations show that African Americans have increased frequency of *H. pylori* infection and increased incidence of advanced gastric lesions when compared to other ethnic groups.
- Our goals in this work were:** 1) to identify common miRNA signatures that may be used as biomarkers of disease aggressiveness; 2) to establish their role in the induction of inflammatory cytokines using cellular models.

Preliminary data

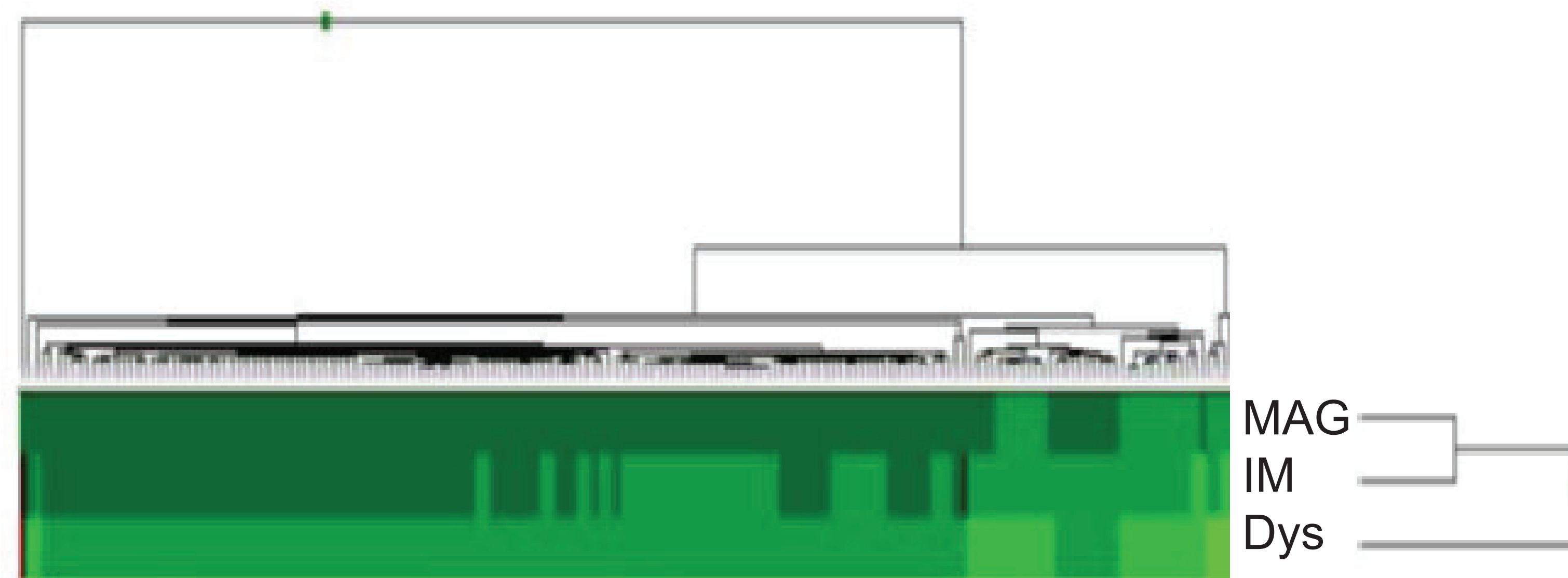


Figure 1. Microarray-based analysis suggest that patients with dysplasia exhibit a different pattern of miRNA when compared to less aggressive forms of gastritis

Materials and Method

miRNA Deep Sequencing Analysis

- Extract total RNA from gastric tissues of African American and Caucasian individuals with gastritis
- Quantify and validate the RNA samples
- Create miRNA libraries for deep sequencing
- Run miRNA sequencing using reagents and protocols from Illumina

Bioinformatics Analysis

- Each sample (output from Illumina) was mapped to mature human miRNAs (from miRBase)
- Differential expression, using the miRNA signatures from normal tissues, was determined using the R package EBSeq (v.1.5.3). The fold change between advanced gastric lesions and normal tissues was determined.

Cellular Assays

- AGS cells were transfected with miRNA-specific siRNA inhibitors and vector controls for 24 and 48 hours
- Total RNA was extracted and the levels of specific miRNA and cytokines (*IL1B*, *IL6*, *IL8*, *IL10*, *TGFB*, *TNFA*, *VEGFA*) were determined by real-time PCR. We used as housekeeping gene *GAPDH*.

Results

African American		Caucasian		Fold Change		
miRNA ID	Fold change	miRNA ID	Fold change	miRNA ID	AA	EA
hsa-let-7c-5p	3.06	hsa-let-7e-5p	0.49	hsa-let-7b-5p	0.81	0.61
hsa-let-7g-5p	2.86	hsa-miR-142-3p	5.11	hsa-miR-1260a	1.43	1.99
hsa-let-7i-5p	2.09	hsa-miR-142-5p	4.41	hsa-miR-126-5p	1.72	1.31
hsa-miR-21-5p	1.94	hsa-miR-146b-5p	2.80	hsa-miR-146a-5p	4.60	2.42
hsa-miR-3182	3.59	hsa-miR-148b-3p	0.48	hsa-miR-155-5p	4.13	2.73
hsa-miR-486-5p	2.20	hsa-miR-150-5p	4.19	hsa-miR-215-5p	52.35	34.80
hsa-miR-6857-3p	3.08	hsa-miR-196a-5p	4.70			
hsa-miR-7843-5p	3.31	hsa-miR-196b-5p	15.95			
hsa-miR-9-5p	10.50	hsa-miR-3135a	0.51			
		hsa-miR-320a	0.49			
		hsa-miR-342-3p	2.09			
		hsa-miR-6880-5p	2.43			

Table 1. miRNA signature associated to advanced lesions in AA

Table 2. miRNA signature associated to advanced lesions in EA

Table 3. Common miRNA signature associated to advanced lesions

Results, cont'd

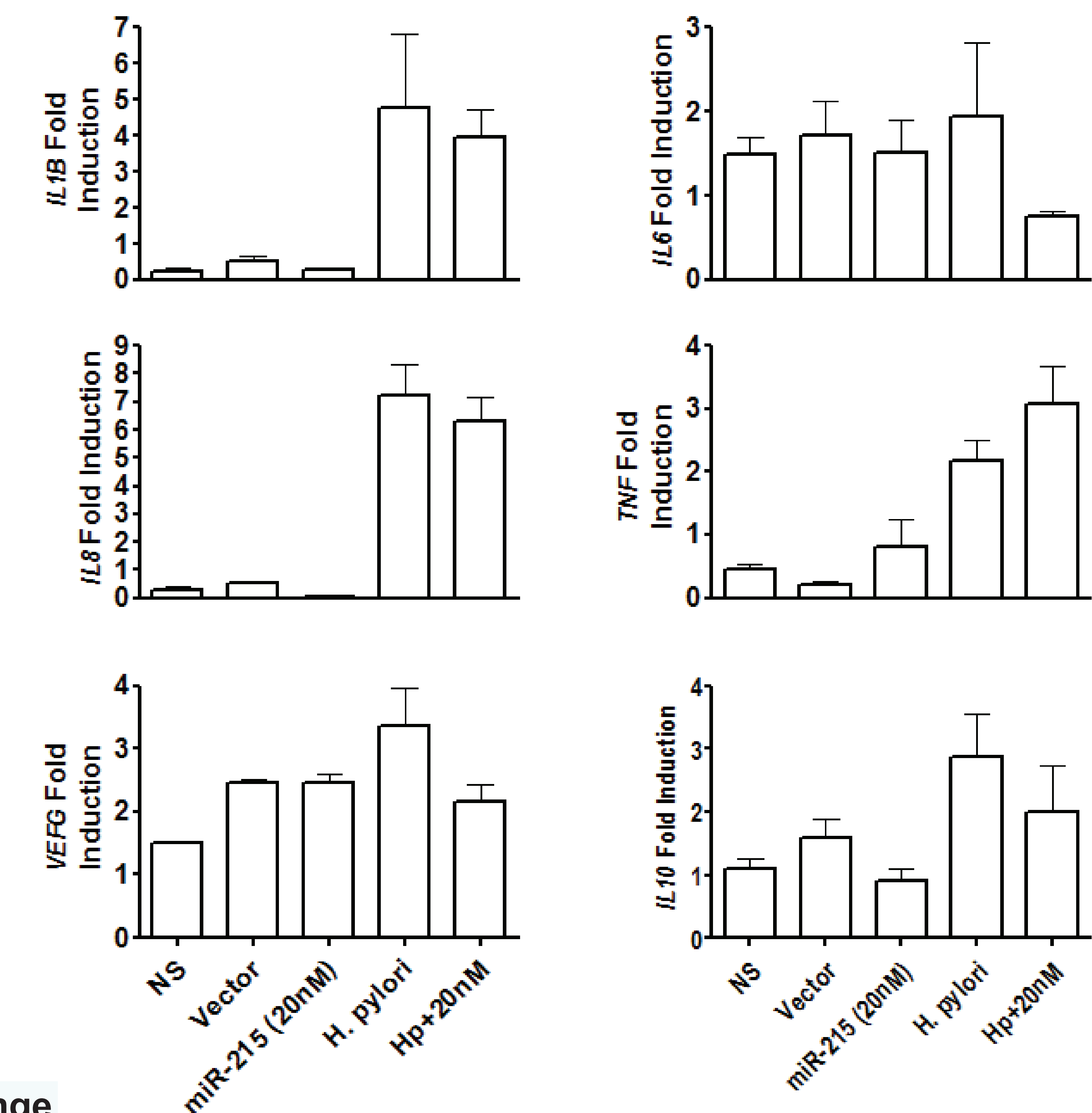


Figure 1. Differential expression of mRNA encoding pro-inflammatory cytokines (*IL1B*, *IL6*, *IL8*, *TNFA*, *VEGFA*) and anti-inflammatory *IL10* in the absence of miR-215.

Conclusions

- Specific miRNA signatures are differentially associated with advanced gastric lesions in African American and Caucasian individuals
- A common set of miRNA can be identified in advanced gastric lesions of African American and Caucasian individuals
- Opposite effects of miR-215 can be observed on the induction of *IL6* and *TNFA* mRNA
- Further experiments are required to fully understand the role played by this set of common miRNA in the development of gastritis

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