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Micro-environmental control of tumor differentiation and invasiveness

CAROLINE GÉLABERT



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Abstract

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The transforming growth factor β (TGF β) family participates in embryonic development and adult tissue homeostasis. In early stages of tumorigenesis, TGF β promotes cell cycle arrest and apoptosis; however, in advanced malignancies, TGF β promotes tumor cell migration and metastasis via the induction of epithelial-to-mesenchymal transition (EMT). A new aspect of the regulation of TGF β signalling is the participation of non-coding RNAs, molecules that are not translated into proteins but are nevertheless important regulators of gene expression. The expression of the long non-coding RNA *LINC00707* was identified being down-regulated by TGF β by engaging the transcription factor KLF6. *LINC00707* resides in the cytoplasm where it interacts with and sequesters the Smad proteins, which mediate TGF β signals. Thus, when TGF β signaling downregulates *LINC00707*, the Smad complex is free to enter the nucleus and regulate its target genes implicated in the EMT process. It is also important to consider the biology of cells in their microenvironment. The growth of solid tumors leads to regional deprivation of nutrients within a tumor. Glutamine deprivation in mesenchymal and epithelial hepatocellular carcinoma cell lines showed a large change in gene expression related to TGF β signaling in cells adapted to glutamine deprivation, suggesting a dependence of TGF β signaling on glutamine metabolism. In mesenchymal cells, we observed a mesenchymal-to-epithelial transition associated with reduced metabolic activity and a reduced generation of reactive oxygen species. Mitochondrial reactive oxygen species are known for their capacity to regulate various signalling pathways associated with diverse cellular responses. This work also identified the polarity protein Par3 as a negative regulator of mitochondrial activity in glioblastoma cells. Moreover, Par3 leads to suppressed invasiveness and sustained clonogenicity of glioblastoma cells.

In summary, this work describes novel regulatory mechanisms that affect different aspects of cancer biology in both epithelial (carcinoma) and nonepithelial (glial) tumor cells. A central component that unifies these new mechanisms of cancer cell regulation is the TGF β signaling pathway. In addition to its novel findings, this work opens several questions whose investigation can provide deeper mechanistic understanding of the action of the key RNAs or proteins analysed in this thesis.

Keywords: Cancer, cell signaling, TGF β , non-coding RNAs, metabolism

Caroline Gélabert, Department of Medical Biochemistry and Microbiology, Box 582, Uppsala University, SE-75123 Uppsala, Sweden.

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List of Papers

This thesis is based on the following papers, which are referred in the text by their Roman numerals.

- I. **Gélabert, C.**, Papoutsoglou, P., Ahlström, E., Ameer, A., Heldin, C.-H., Caja, L., and Moustakas, A. (2023) The long non-coding RNA LINC00707 interacts with Smad proteins to regulate TGF β signaling and cancer cell invasion. *Cell Communication and Signaling*, re-submitted after revision.
- II. **Gélabert, C.**, Campisano S., Golán I.C., Beyene N.T., Heldin, C.-H., Chisari A., Sancho P., Moustakas, A. and Caja, L. (2023). Glutamine deprivation alters TGF- β signaling in hepatocellular carcinoma. *Cell Death and Disease*, Manuscript.
- III. Dadras, M.S., Caja, L., Mezheyski, A., Liu, S., **Gélabert, C.**, Gomez-Puerto, M.C., Gallini, R., Rubin, C.-J., ten Dijke, P., Heldin, C.-H. and Moustakas, A. (2021) The polarity protein Par3 coordinates positively self-renewal and negatively invasiveness in glioblastoma. *Cell Death and Disease*, 12: 932.

The following paper is not included in the thesis:

Chisari A, Golán I, Campisano S, **Gélabert C**, Moustakas A, Sancho P, Caja L. (2021) Glucose and Amino Acid Metabolic Dependencies Linked to Stemness and Metastasis in Different Aggressive Cancer Types. *Frontiers in Pharmacology*, 12: 723798, Review.

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Abbreviations

AP-1: activated protein-1	CSC: cancer stem cell
aPKC: atypical protein kinase C	CTHRC1: collagen triple helix repeat containing 1
ARTS: apoptosis-related protein in the TGF β -signaling	DAP: death-associated protein
ASK: apoptosis signal-regulating kinase 1	Daxx: Death domain-associated <i>protein 6</i>
ASO: antisense nucleotides	DLG: disc large
ATF: activating transcription factor	DNA: deoxyribonucleic acid
ADP: adenosine diphosphate	E-Cadherin: epithelial cadherin
AMP: adenosine monophosphate	ECM: extracellular matrix
ATP: adenosine triphosphate	EGF: epidermal growth factor
Bcl: B-cell lymphoma 2	EGFR: epidermal growth factor receptor
BDNF: brain-derived neurotrophic factor	EMA: European medicine agency
BIM: <i>Bcl-2-like protein 11</i>	EMT: epithelial-to-mesenchymal transition
Bmf: Bcl2 modifying factor	EPR: epithelial cell program regulator
Bmi-1: B lymphoma Mo-MLV insertion region 1 homolog	ERK: extracellular signal-regulated kinase
BMP: bone morphogenic protein	FAD: flavin adenine dinucleotide
CAF: cancer-associated fibroblast	FDA: food and drug administration
CASC: cancer susceptibility candidate	FKBP: FK506-binding protein
CCP: cytoplasmic carboxypeptidase	FOXP: forkhead box protein
CKI: cyclin-dependent kinase inhibitor	GAG: glycosaminoglycan
CSAP: cilia and spindle-associated protein	GBM: glioblastoma

GCN: general control nonderepressible

GDF: growth differentiation factor

GLUT: glucose transporter

GPx: glutathione peroxidase

GSC: glioma stem cell

GSK: glycogen synthase kinase

GLS: glutaminase

GTP: guanosine triphosphate

HCC: hepatocellular carcinoma

HIFa: *Hypoxia-inducible factor 1-alpha*

IFN- γ : interferon-gamma

IL: interleukin

JAK: Janus kinase

JmjC: Jumonji-C

JNK: c-Jun N-terminal kinase

KLF6: Krüppel like factor 6

LAP: latency-associated peptide

LFAR1: liver fibrosis-associated lncRNA1

Lgl: lethal giant larvae

LKB: liver kinase B

LLC: large latent complex

lncRNA: long non-coding RNA

lncRNA-ATB: lncRNA activated by TGF β

lncRNA CTBP1-AS2: lncRNA C-terminal binding protein1- antisense RNA 2

lncRNA MACC-AS1: lncRNA metastasis associated in colon cancer-antisense 1

lncRNA-TUG: lncRNA taurine up-regulated

LTBP: latent TGF β -binding protein

MAPK: mitogen-activated protein kinase

MAP: microtubule-associated protein

MEK: MAPK/extracellular signal-regulated kinase

MET: mesenchymal-to-epithelial transition

MGMT: *O*⁶-methylguanine DNA methyltransferase

MH: Mad Homology

MMP: metalloprotease

mRNA: messenger RNA

miRNA: micro RNA

MIS: Müllerian inhibiting substance

mTOR: mammalian target of rapamycin

NADH: nicotinamide adenine dinucleotide, hydrogenated/reduced

N-Cadherin: neural cadherin

NORAD: non-coding RNA activated by DNA damage

NRE: nuclear retention element

NSC: neural stem cell

NXF: nuclear RNA export factor

P21: protein of 21 kDa

P38: protein of 38 kDa

P4HA3: prolyl 4-hydroxylase alpha3

p53: protein of 53 kDa

PALS1: protein associated with Lin-Seven 1

Par: partition-defective
 PATJ: Pals1-associated tight junction
 PDGF: platelet-derived growth factor
 PD-L1: programmed death-ligand 1
 PHD2 : prolyl hydroxylase domain protein 2
 PI3K: phosphoinositide 3'-kinase
 piRNA: piwi interacting RNA
 PTEN: phosphatase and tensin homolog
 PTP1B: protein-tyrosine phosphatase 1B
 PVT: plasmacytoma variant translocation
 Raf: rapidly accelerated fibrosarcoma
 Ras: rat sarcoma virus oncogene
 REDD: regulated in development and DNA damage response
 R-Smad: receptor-activated Smad
 RNA: ribonucleic acid
 ROS: reactive oxygen species
 SCN1A: sodium voltage-gated channel alpha subunit 1
 SDC4: syndecan-4
 siRNA: small interfering RNA
 SLC1A5: solute carrier family 1 member 5
 SMASR: Smad3-associated lncRNA
 SNHG6: small nucleolar RNA host gene
 snRNP: small nuclear ribonucleoprotein
 SOD: superoxide dismutase

STAT: signal transducer and activator of transcription
 TAK1: TGF β -activated kinase-1
 TCA: tricarboxylic acid
 TF: transcription factor
 TGF β : transforming growth factor beta
 TGF β R: transforming growth factor beta receptor
 T-bet: T-box expressed in T cells
 Th: T helper
 TIAM: T-lymphoma and metastasis 1
 TLR: Toll-like receptor
 TRAF: TNF receptor associated factor
 TRX: thioredoxin
 TTL: tubulin tyrosine ligase
 VEGF: *vascular endothelial growth factor*
 ZEB: zinc finger E-box-binding homeobox
 ZO: zonula occludens

Petit résumé en français

Short summary in French

Le corps humain est composé d'environ 50,000 milliards de cellules. Chacune de ces cellules est organisée comme un petit organisme composé de différents éléments aux fonctions bien précises : certains ont pour rôle de produire l'énergie nécessaire à la cellule pour survivre et proliférer si nécessaire, d'autres digèrent et dégradent les déchets produits par la cellule, ou encore d'autres détectent lorsque la cellule est en mauvaise santé et induit sa mort afin d'éviter les dommages au niveau de l'organisme. Le noyau de la cellule peut être vu comme son cerveau: il contient l'information génétique (sous forme de code A,T,C,G) qui permet à la cellule de produire les éléments nécessaires (appelés protéines) à son bon fonctionnement et de s'adapter à son environnement. D'une manière simplifiée, le code génétique est lu par la cellule, ce qui produit une molécule intermédiaire appelée ARN messager, elle-même lue et traduite en protéine. Le génome humain code pour environ 20,000 protéines et leur expression est finement régulée selon les besoins de la cellule.

Plus récemment, les avancées informatiques ont montré qu'une grande partie de l'ADN code pour un certain type d'ARN qui n'est jamais traduit en protéine : ces molécules sont appelées des ARN non codants. A quelques exceptions près, il était admis depuis longtemps que seuls les protéines, codées par les ARN messagers, avaient vraiment un rôle dans la cellule. Alors pourquoi les cellules dépenseraient-elles de l'énergie à produire des ARN non codants? De récentes études ont montré que ces ARN non codants sont en fait très importants pour la régulation de l'expression de l'ADN (pour que le bon gène soit exprimé au bon moment et au bon endroit) ou de la fonction de certaines protéines au sein de la cellule. Comme l'a très justement dit mon cousin Paul « les protéines c'est les ouvriers, les ARN non codants c'est la police ». C'est sur ce type de molécule que se porte le projet principal de cette thèse.

Je m'intéresse en particulier aux ARN non codants régulés par TGF β , qui est une protéine capable d'induire l'expression de certains gènes. Ces gènes régulés par TGF β sont principalement liés à la migration cellulaire, mécanisme très important lors du développement embryonnaire (migration des cellules pour former tel organe à tel endroit) ou lors d'une cicatrisation (il faut que les cellules migrent dans la blessure pour pouvoir la refermer). Ce-

pendant, l'activation de la migration cellulaire au sein d'une tumeur est liée à la dissémination métastatique des cellules tumorales, c'est à dire l'invasion de cellules tumorales dans la circulation sanguine et la colonisation d'un deuxième organe. C'est cette généralisation du cancer qui est létale pour le patient. J'ai montré dans une **première publication** que l'ARN non codant *LINC00707* affecte la migration cellulaire en interagissant et en séquestrant un ensemble de protéines appelé Smad dans le cytoplasme de la cellule, et ainsi l'empêche d'accéder au noyau de la cellule où ils ont pour rôle d'activer les gènes responsables de la migration cellulaire. Lorsque la cellule entre en contact avec TGF β , l'expression de *LINC00707* est réduite, le complexe Smad est donc libéré et peut accéder à ses gènes cibles dans le noyau. La migration cellulaire est ainsi activée. Ce mécanisme a été démontré dans des lignées cellulaires issues de cancer du cerveau, prostate et peau.

En plus d'une capacité de migration très accrue par rapport aux cellules non cancéreuses, les cellules cancéreuses sont caractérisées par une prolifération incontrôlée, une résistance aux signaux de morts qui les rendent immortelles ainsi qu'une résistance aux radio- et chimiothérapies. Une caractéristique à laquelle je m'intéresse particulièrement dans un deuxième projet est l'utilisation de l'énergie par les cellules cancéreuses. La prolifération et migration consomment beaucoup d'énergie, les cellules cancéreuses ont donc besoin d'un gros apport d'énergie. La source d'énergie des cellules sont principalement le glucose et la glutamine. Ces nutriments sont disponibles dans la circulation sanguine, il est donc facilement imaginable que les cellules situées au bord de la tumeur ont facilement accès à ces nutriments car elles sont directement en contact avec la circulation sanguine. Qu'en est-il des cellules situées au cœur de la tumeur, où l'accès à l'oxygène et nutriments est limité ? Dans une **deuxième publication**, j'ai étudié l'effet du manque de glutamine en comparant les caractéristiques de cellules de cancer du foie exposées à de la glutamine ou privées de glutamine. J'ai montré que le manque de glutamine ralentit la prolifération des cellules, leur capacité à se renouveler et à migrer, et donc une diminution de l'agressivité tumorale. Cela peut s'expliquer par une diminution de la production de « dérivés réactifs de l'oxygène » qui peuvent être vus comme des toxines pour les cellules produites en parallèle de la prolifération cellulaire. Ces toxines sont associées à l'agressivité tumorale de par leur capacité à induire l'invasion tumorale, mécanisme démontré dans le cancer du cerveau dans une **troisième publication**.

Plus d'informations en anglais !

1 Introduction

The first cells ever observed were a group of vegetal cells in 1665 by the biologist Robert Hooke from a thin layer of cork that he described as an irregular honey-comb. He was actually looking at empty dead cell walls of plant tissues. Bacteria were simultaneously discovered in water samples by the biologist Anton van Leeuwenhoek who described their motility, which is a characteristic of living organisms. It took approximately a hundred years to observe the first animal cell and its nucleus under a microscope due to the fragility of animal tissues and the absence of wall around animal cells that makes them more difficult to observe. At this time, the quality of the microscopes did not allow them to describe the internal structure but the botanist and physiologist Schwann and Schleiden hypothesised that cells were the fundamental unit of life in the middle of the 19th century. The development of electron microscopy in the middle of the 20th century revealed the cell structure in detail and the existence of organelles inside the cells which initiated the understanding of cell function in parallel with the development of biochemistry, genetics and molecular biology.

Cell biology is essential to understand life and diseases. The human body is made of 10,000 to 100,000 billion cells and every single cell can be seen as a self-sustainable entity, containing all the necessary components for its well-being within 10 to 100 μm . Cells must be able to produce energy, degrade their waste, develop senses to monitor the environment and even sense when it is time to proliferate or die. They also need to adapt and interact with their environment and neighbouring cells. To do so, the function of each component of each cell is tightly controlled. Any mistake in regulation can possibly lead to a dysfunction at the organism level and generate different kind of diseases, for instance cancer that is a typical cell disease. The present work focuses on different aspects of cancer cell biology, from cell signaling to cell metabolism and regulation of oxidative stress.

1.1 Cancer

Cancer is a leading cause of death worldwide. Every year, 14 million of new cancer cases are diagnosed and 8 million people die of cancer worldwide (Torre et al., 2016). Cancer potentially develops in all organs but men are

mostly affected by prostate, lung, and colorectal whereas women are more affected by breast, lung, thyroid and colorectal cancer (Kim et al., 2018). Cancer is characterized by dynamic changes in the genome, genome-widespread epigenetic alterations and chromosomal aberrations leading to the gain or loss of molecular function reflecting changes to physiological processes. Typically, tumor cells develop from normal cells that contain DNA mutations and acquire new properties such as uncontrolled cell division. As long as the abnormal cells are under control by the immune system and do not spread away from the tissue of origin, they are considered as benign tumors. Malignant cancer cells are characterized by their capabilities of tissue invasion and sustained angiogenesis, self-sufficiency in growth signals, insensitivity to anti-growth and apoptosis signals and limitless replicative potential (Hanahan and Weinberg, 2011).

1.2 Glioblastoma

Glioblastoma (GBM) is the most common and malignant type of glial tumors in the brain. Yet, it is a rare malignancy with a prevalence estimated at 1/100,000 and usually diagnosed in 45 to 70-year-old people. The prognosis of GBM patients is poor, with a survival of approximately 12 months after diagnosis. The first care treatment of GBM involves surgical resection followed by radiotherapy and chemotherapy with temozolomide, a DNA alkylating agent that extends survival by approximately 2.5 months. Temozolomide promotes the hypermethylation and inactivation of the *O*⁶-methylguanine DNA methyltransferase (MGMT) responsible for the repair of DNA double-stranded breaks, which causes cell cycle arrest in the G2/M phase and eventually cell death (Nagel et al., 2017). The classification of GBM includes three subtypes: classical, mesenchymal and proneural. They are characterized by their transcriptomic profile and genetic mutations: the mesenchymal subtype typically contains p53 and phosphatase and tensin homolog (PTEN) mutations, the classical subtype usually contains PTEN mutations only and the proneural subtype is characterized by phosphoinositide 3'-kinase (PI3K) mutations. The mesenchymal subtype is the most aggressive due to its high angiogenic and invasive capacities (Saito et al., 2019). There are three potential cells of origin of GBM: neural stem cells (NSCs) with a high regenerative plasticity and developmental potential (Jacques et al., 2010), NSC-derived astrocytes that generate mature astrocytes through symmetric division in adults (Chow et al., 2011) and oligodendrocyte precursor cells that is the main dividing cell population in the adult brain (Rebetz et al., 2008). Cell of origin can sometimes be traced as tumor cells retain some gene expression profile of the cells of origin but the cell of origin often remains unknown. Common features of these three subtypes (classical, mesenchymal and proneural) are their high proliferation rate

and chemoresistance. They are able to form secondary tumors inside the brain and very rarely outside the brain (Anderson et al., 2020).

1.3 Hepatocellular carcinoma

Hepatocellular carcinoma (HCC) is the fifth most common tumor worldwide and comprises 75%-85% of cases of liver cancer. HCC usually affects people after 40 years of age (Bray et al., 2018). HCC are believed to originate from genetically damaged hepatocytes, the main type of cell present in the liver, or from lesions in hepatic progenitor cells (Tummala et al., 2017). HCC arises from liver cirrhosis, which is caused by environmental sources such as alcohol, bad diet or viral hepatitis. If detected early, HCC is easily removable by surgery but when detected in later stage, chemotherapy is needed. The most common chemical agents in chemotherapy against HCC are sorafenib, regorafenib and lenvatinib, three receptor tyrosine kinase inhibitors that are often combined or sequentially administered. Sorafenib and regorafenib are small multi-tyrosine kinase inhibitors that block the vascular endothelial growth factor (VEGF) and platelet-derived growth factor (PDGF) receptor tyrosine kinase activities (Raza and Sood, 2014). In addition, regorafenib induces apoptosis via the inhibition of the STAT3 signaling by inducing src homology 2 domain-containing phosphatase 1 (SHP1) (Tai et al., 2014). Lenvatinib is similar but more efficient than sorafenib in targeting angiogenesis in HCC (Yamamoto et al., 2014). The overall survival of late HCC patients is still low because of its high metastatic capacities to the lung, bones and lymph nodes (Natsuizaka et al., 2005).

1.4 Prostate cancer

Prostate cancer is the most common type of cancer in men worldwide. Prostate tissue is made of three types of cells: luminal, basal and neuroendocrine. Luminal or basal phenotypes are observed in prostate cancer, therefore, it is believed that both luminal (Wang et al., 2009) or basal (Wang et al., 2013) cells can be the cell of origin of prostate cancer. Prostate cancer is characterized by recurrent genetic alterations in the androgen pathway, the PI3K/Akt pathway (Taylor et al., 2010), the TGF β /SMAD4 pathway (Ding et al., 2011), the loss of PTEN/p53 pathway that allows MYC to drive proliferation, leading to an increased cell proliferation and metastasis (Nowak et al., 2015). The prognosis for prostate cancer patients is rather good when the tumor is removed in early stage, but metastatic prostate cancer remains incurable despite the different available treatments. Radiotherapy and surgical castration are the most common prostate cancer treatment combined with chemotherapy. Five drugs are currently approved by the food and drug ad-

ministration (FDA): docetaxel, cabazitaxel, abiraterone, enzalutamide and sipuleucel-T. One strategy is to block cell division by binding and stabilizing microtubules (docetaxel or cabazitaxel in docetaxel-resistant tumors). The androgen pathway being dysregulated in prostate cancer, it is often targeted either by preventing the testosterone synthesis or by blocking the androgen receptor (abiraterone and enzalutamide). Sipuleucel-T is an immune-based treatment agent (Komura et al., 2018).

2 TGF β signaling and function

2.1 The TGF β family and its receptors

Transforming growth factor beta (TGF β) is a prototype of a large family of secreted proteins involved in various cellular processes in the adult organism and during embryonic development. The human TGF β family has thirty-three genes that encode for secreted cytokines that include the activins, the bone morphogenic proteins (BMPs), the growth differentiation factors (GDFs), inhibins, nodal, the Müllerian inhibiting substance (MIS) and the three TGF β isoforms (TGF β 1, β 2 and β 3), the latter being collectively referred as TGF β s (Tzavlaki and Moustakas, 2020).

TGF β s are synthesized as a latent protein made of two parts; the latency-associated peptide (LAP) and a C-terminal polypeptide known as mature TGF β . These two domains together form a large latent complex (LLC) that does not have any biological function. The TGF β activation process involves the secretion of the LLC covalently bound with latent TGF β binding proteins (LTBPs) to the extracellular matrix (ECM), where the LLC and LTBPs interact with additional proteins of the ECM such as fibrillins and fibronectins. Mechanical forces generated by the binding of the LAP to integrins and the binding to the ECM proteins result in the proteolysis of the LLC-associated proteins and release active TGF β dimer to its receptors and co-receptors (Annes et al., 2004; Miyazono and Heldin, 1989; Shi et al., 2011).

The TGF β s bind to a complex of transmembrane kinase receptors, the TGF β type I (TGF β RI) and type II (TGF β RII) receptors. Binding of a TGF β ligand induces assembly of two type I and two type II receptors. There are seven human type I receptors and five type II receptors, and individual members of the TGF β family bind to specific combinations of type I and type II receptors. TGF β 1, β 2 and β 3 can bind to the single TGF β RII, however, they associate with two different types of TGF β RI (also called ALK-1 and ALK-5) (Heldin and Moustakas, 2016). The interaction between TGF β and the TGF β receptors involves the help of co-receptors including betaglycan, a membrane-anchored proteoglycan with glycosaminoglycan (GAG) chains that brings the TGF β to the TGF β receptor II (Lopez-Casillas et al., 1994). Once the ligand bound to the complex of type I/type II receptors with the contribution of co-receptors, conformation of the receptor is modified allosterically which leads to phosphorylation of TGF β RI on serine residues by the TGF β RII kinase, causing the dissociation of the negative regulator of

the type I receptor, FK506-binding protein (FKBP12), and the activation of the type I receptor kinase (Huse et al., 1999). In general, the activated TGF β -receptors are able to phosphorylate serine and threonine amino acids on their substrate proteins and thus initiate the cascade of signal transduction responsible for biological response (Huang et al., 2011).

2.2 TGF β signaling pathways

The major signaling effectors of TGF β are the SMAD proteins after phosphorylation of their C-terminal serines by the activated TGF β RI. The phosphorylated SMADs known as the “receptor-activated SMADs” (R-SMADs) dissociate from the receptor, two R-SMADs form a trimeric complex with the “co-SMAD”, SMAD4, in order to translocate into the nucleus (Macias-Silva et al., 1996). Once in the nucleus, the SMAD complex, in collaboration with other transcription factors, is able to repress or activate target gene expression. The SMAD family comprises five R-SMADs (SMAD1, 2, 3, 5 and 8), one co-SMAD (SMAD4) and two inhibitory SMADs (SMAD6 and 7). SMAD6 and 7 are able to exert negative feedback by blocking R-SMAD phosphorylation or promoting receptor ubiquitylation, dephosphorylation and lysosomal degradation (Murayama et al., 2020). SMAD 2 and SMAD 3 act as R-SMADs for activin and TGF β signaling, whereas SMAD1, SMAD5, and SMAD8 mediate responses to BMPs and GDFs (Miller et al., 2019). Structurally, the R-SMADs and co-SMAD can be divided in three main parts; an N-terminal Mad Homology 1 domain (MH1), a central linker and a C-terminal Mad homology 2 domain (MH2) (**Figure 1**). The MH1 domain contains a nuclear localization signal and binds to DNA (SMAD2, 3, 4). SMAD4 also contains its nuclear export signal in its MH1 domain. The MH2 domain, the most highly conserved domain, contains the epitopes for receptor interaction (SMAD2, 3) and SMAD oligomerization (SMAD2, 3, 4). SMAD2 and 3 also carry their nuclear export signal on their MH2 domain. The linker region contains phosphorylation sites and is important for the regulation of the stability, subcellular localization and activity of SMADs due to the presence of ubiquitin ligase-binding motifs on SMAD2 and 3 (Wu et al., 2001).

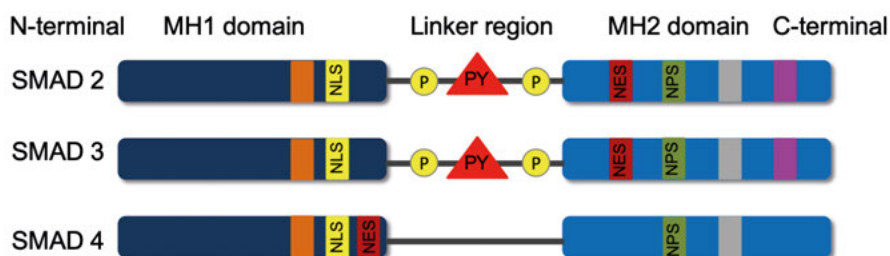


Figure 1 Schematic representation of the SMAD proteins

The orange box represents the DNA binding motif, the yellow box represents the nuclear localization signal (NLS), the red triangle represents the ubiquitin ligase motif (PY), the yellow circle represents the phosphorylation sites., the red box represents the nuclear export signal (NES), the green box represents the nucleopore signal (NPS), the grey box represents interaction sites between Smad2,3 and 4 and the pink box represents the interaction site with the TGF β receptors.

The SMADs are not the only TGF β -regulated signaling mediators. Other signaling proteins, known for their participation in other major pathways (e.g. receptor tyrosine kinases), are also often referred as “non-SMAD”, and initiate parallel pathways that eventually cooperate with the SMADs (**Figure 2**) or crosstalk with additional signaling pathways such as Wnt or Notch. The mitogen-activated protein kinase (MAPK) family that include the extracellular-regulated kinases (ERK1 and 2), Jun N-terminal kinases (JNKs) and p38 MAPKs is an important family classified as non-SMAD pathway. ERK 1 and 2 are activated by the Ras - Raf - MEK1/2 cascade usually induced by mitogenic stimuli but also by TGF β after phosphorylation of ShcA (Lee et al., 2007). The JNK and p38 MAPKs are activated by MAPK kinases (MAPK kinase 4-7 and MAPK kinase 3-6 respectively), activated themselves by the TGF β -activated kinase-1 (TAK1) and the auto-ubiquitinated TNF Receptor Associated Factor 4 and 6 (TRAF4, TRAF6) upon TGF β receptor oligomerization (Chen et al., 2015; Thakur et al., 2009; Yamashita et al., 2008). In addition to the JNK/ p38 pathways, the activation of TRAF6 results in recruitment and phosphorylation of AKT by PI3K (Hamidi et al., 2017). TGF β , via PI3K, activates mTORC2, which in turn can phosphorylate and activate AKT promoting cell survival.

The different TGF β -activated pathways can cooperate and regulate each other in order to fine-tune their activation or to interact with new partners. First, activated AKT prevents phosphorylation of SMAD3, thus attenuating SMAD3-dependent signaling. Another inhibitor of the SMAD pathway is TRAF4 that targets Smurf2 for polyubiquitylation and subsequent degradation of the TGF β type I receptor and SMAD proteins, therefore acting as an inhibitor of TGF β signaling (Zhang et al., 2013). The MAPK pathways can

be modulated by TGF β and other stimuli (cytokines, cell-cell contacts etc) in a SMAD-independent manner, but reports also suggest SMAD-dependent mechanisms. One example of the crosstalk between the SMADs and MAPK pathways is the interaction between SMAD2/3 and c-Jun or Fos to activate the transcription factor Activated Protein-1 (AP-1) (Sundqvist et al., 2020; Zhang et al., 1998). Structurally, AP-1 is one of the transcription factors composed of heterodimers of Jun, Fos or the activating transcription factor (ATF) activated by the MAPK family that are involved in cell proliferation, death, migration, survival and eventually tumorigenesis when dysregulated. Finally, phosphorylated ERK1/2 are believed to boost the SMAD activity by extra phosphorylation of the SMAD in their linker region and therefore enhance downstream events (Hayashida et al., 2003).

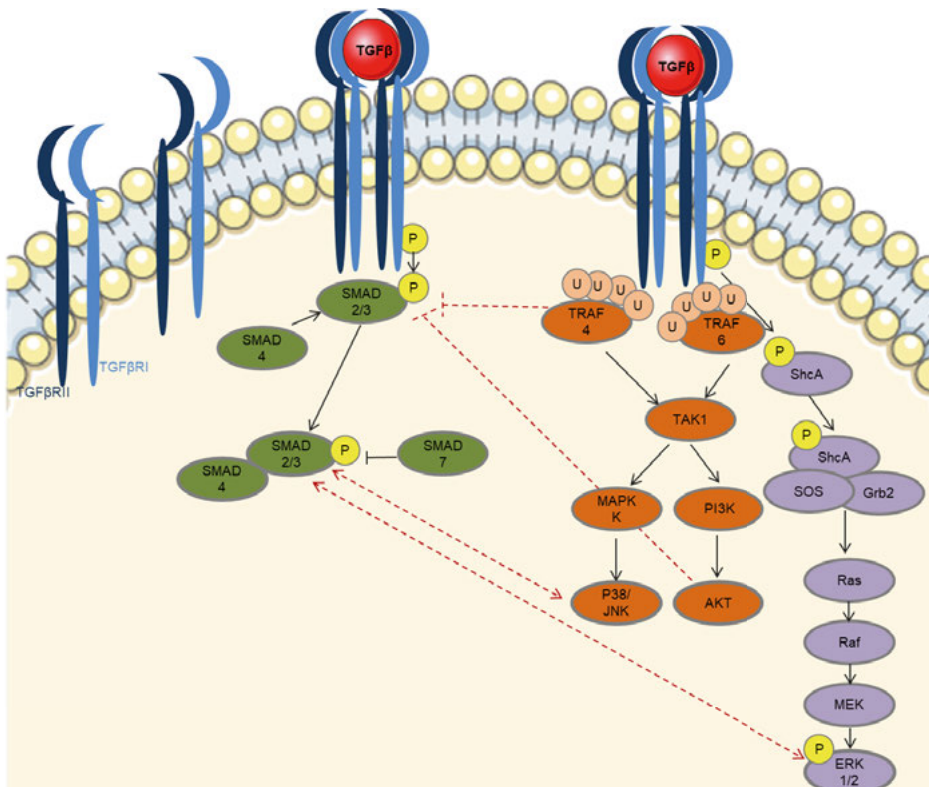


Figure 2 Schematic representation of the SMAD and non-SMAD TGF β -activated pathways. The dotted red lines represent the possible cross-talk between the TGF β -activated pathways.

Considering the wide range of TGF β -regulated pathways associated with a wide spectrum of target genes, TGF β plays a highly pleiotropic and complex role on cellular responses in a cell type-dependent manner.

2.3 TGF β -mediated physiological responses

The TGF β pathway regulates many cellular functions in physiological and pathological contexts. Under physiological conditions and during early stage of tumor development, TGF β regulates cell cycle progression by inducing the cyclin-dependent kinase inhibitors (CKI) including p15, p16, p21 and p27, and causing growth arrest in the G1 phase of the cell cycle (Datto et al., 1995; Massague, 2008). The proteasomal pathway is also needed to degrade the CyclinD1 that promotes the G1-S transition (Zhang et al., 2002).

Apoptosis is an important process for embryo development, adult homeostasis and is very often dysregulated in cancer. TGF β is a well-known inducer of apoptosis especially in hepatocytes and prostate epithelial cells. For instance, the SMAD complex is able to induce the pro-apoptotic members of the Bcl2 family BIM and Bmf (Ramjaun et al., 2007). BIM induction is regulated through SMAD3 that induces the MAPK phosphatase to attenuate ERK activation/phosphorylation and promote the accumulation of BIM (Ramesh et al., 2008). Another effector of TGF β -dependent apoptosis induced by the Smad complex is the death-associated protein kinase (DAP-kinase) (Jang et al., 2002). In addition, downstream components of the apoptotic machinery such as Daxx (Perlman et al., 2001) or the apoptosis-related protein in the TGF β -signaling (ARTS) (Larisch et al., 2000) positively modulate the TGF β -induced apoptosis. The non-SMAD signaling cascade activated by TRAF6 also contributes to prostate cancer cell apoptosis (Hamidi et al., 2017).

TGF β is a potent modulator of the differentiation of immune cells and a modulator of inflammatory responses. TGF β inhibits the differentiation of effector T helper (T_h) cells also known as CD4⁺ cells which are stimulated by antigens and release cytokines in order to recruit other immune cells. Mechanistically, TGF β inhibits the expression of T-bet, the main regulator of T_h1 differentiation and interferon- γ (IFN- γ) activation (Park et al., 2007) via GATA-3, which is the main regulator of the differentiation of T_h2 helper cells. TGF β inhibits FOXP3 that controls the differentiation of T cells (Gorelik et al., 2002). Due to its regulation of the cell cycle, TGF β induces cell cycle arrest of B cells (which synthesize antibodies) and T cells (which recognize antigenic epitopes) by up-regulation of cell cycle inhibitors (p15, p21, p27) and therefore affect the performance of the acquired immune response (Wolfraim et al., 2004). On the contrary, TGF β promotes the differentiation of another type of T helper cells, the T_h17 cells which target bacterial and fungal pathogens (David and Massague, 2018). Overall, the inhibitory effect of TGF β may promote tumorigenesis by evasion of the immune surveillance. On the other hand, the suppressive effect of TGF β on the expression of inflammatory cytokines such as IFN- γ and interleukins 2 (IL-2) in a SMAD-dependant manner (McKarns et al., 2004), suggests a protective role against tumor-promoting chronic inflammation.

TGF β is a major inducer of epithelial-to-mesenchymal transition (EMT) (Xu et al., 2009). EMT is a biological process that allows an epithelial cell to undergo morphological and transcriptional changes that enable it to become a mesenchymal cell with increased migratory capacity and invasiveness (Xu et al., 2009). This process is needed in the context of embryo development, when undifferentiated cells spread through the embryo to form a new differentiated tissue at a specific place. In order to detach from the surrounding cells and migrate, cells need to rearrange their actin cytoskeleton into stress fibers, to break their cell-cell junctions and to reorganize the ECM. TGF β represses the expression of epithelial genes such as E-cadherin and ZO-1 involved in cell-cell junctions, and simultaneously induces the expression of mesenchymal genes such as N-cadherin, fibronectin or vimentin involved in the cell-cell junctions, reorganization of ECM and reorganization of the cytoskeleton respectively. TGF β signaling is directly responsible for the transcriptional induction of a panel of transcription factors (TFs) that provide the necessary stimuli to induce EMT (EMT-TFs), such as SNAI1, SNAI2, ZEB1, ZEB2, TWIST1 and TWIST2, many of which (SNAI1, ZEB1, ZEB2) associate with TGF β signal transducers of the SMAD family and control their activity (Choi et al., 2007; Vervoort et al., 2013). Interestingly and in line with the importance of TGF β during embryogenesis, the mesenchymal transition is also accompanied by a modification of the stemness characteristics of the cells. Cells undergoing EMT reset their epigenetic landscape to modify the expression of their differentiation genes regulated by specific EMT-TFs, especially TWIST1 or SNAI1, via the activation of a large number of genes leading to a complete reprogramming of the cells, including a gain of stem cell-like properties (Batlle et al., 2013; Schmidt et al., 2015; Tsirigoti et al., 2022). Although certain characteristics of the cells are permanently altered by the process of EMT (Schmidt et al., 2015; Tsubakihara et al., 2022), which can partially be explained by a stable epigenetic footprint (Bedi et al., 2014), the reverse process is called mesenchymal-to-epithelial transition (MET) and is associated with the reactivation of epithelial markers (Chao et al., 2010), a return in the cell cycle (Tsai et al., 2012) and the partial reactivation of differentiation genes (Li et al., 2017).

TGF β can also remodel cell metabolism. The adaptation of metabolic substrates and enzymes is required for the cells to adjust their energy and metabolite production (Liu and Chen, 2022). Glucose metabolism is essential for cell survival. It has been shown that TGF β increases the mRNA level of glucose transporter GLUT1 in mouse embryonic fibroblasts and mammary cancer cells (Kitagawa et al., 1991; Nilchian et al., 2020). Intracellular glucose is largely used to produce energy (ATP), mostly by oxidative phosphorylation. The intermediate product between glucose and the first metabolite able to enter the TCA cycle, the acetyl-coA, is pyruvate. The conversion of pyruvate to acetyl-coA is regulated by the enzyme pyruvate dehydrogenase, whose activity has been shown to be decreased by TGF β in fibrotic hu-

man kidneys leading to a switch from oxidative phosphorylation to aerobic glycolysis that supports proliferation and protein synthesis (Smith and Hewitson, 2020). The process of EMT is accompanied with the reprogramming of lipid metabolism in order to increase fatty acid oxidation needed to sustain the increased mitochondrial oxidation of mesenchymal cells in hepatocellular carcinoma (Soukupova et al., 2021). In non-small cell lung cancers, the induction of EMT is correlated with the overexpression of the enzyme prolyl 4-hydroxylase $\alpha 3$ (P4HA3) by TGF β , an enzyme that regulates the use of intracellular amino acids. P4HA3 converts proline to hydroxyproline, which contributes to the collagen accumulation needed for mesenchymal cells to invade (Nakasuka et al., 2021).

2.4 Aberrant TGF β signaling in cancer

TGF β plays a dual role in cancer development, from tumor suppressor during the initial stages of tumorigenesis to tumor promoter at later stages. The current model is that TGF β loses its tumor suppressive role and gain tumor promoting abilities during tumorigenesis.

In the context of cancer, the process of EMT allows cancer cells to detach from the primary tumor and invade the surrounding tissues, leading to the colonisation of distant organs (Moustakas and Heldin, 2007). Once tumorigenesis has progressed, cancer cells also tend to acquire increasing resistance to the growth inhibitory response of TGF β and start secreting abnormal levels of TGF β , leading to tumor progression (Massague, 2008). Finally, although the pro-apoptotic effects of TGF β are well-known, TGF β is also described as anti-apoptotic in certain types of cancer, for instance in mouse breast cancer where TGF β induces the anti-apoptotic long non-coding RNA lncRNA-SMAD7 (Arase et al., 2014).

In certain types of cancer, such as colorectal cancer or pancreatic cancer, TGF β signaling is inactivated due to mutations on TGF β receptors I and II (Bharathy et al., 2008) and SMADs (mostly SMAD4), events associated with an increased aggressiveness (Lin et al., 2019). On the contrary, TGF β signaling is highly activated and promotes invasion and metastasis of many types of cancer, including prostate cancer (Vo et al., 2013).

In addition to the diverse mutations and inactivation of the TGF β -signaling components, TGF β cooperates with oncogenic pathways and facilitates the development of aggressive, less differentiated and invasive tumors. The combined action of epidermal growth factor (EGF) and TGF β signaling is a classic example of oncogenic cooperation and context-dependence. Both EGF and TGF β activate common signaling pathways (i.e RAS-MAPK or PI3K-AKT pathways), which in turn activate transcription factors such as Jun or Fos able to interact with the SMADs and trigger activation of a

TGF β -induced SMAD-dependent breast cancer invasion program (Sundqvist et al., 2020).

3 Long non-coding RNAs

3.1 3.1 Non-coding RNAs: definition

RNAs are crucial molecules in cells. The central dogma of molecular biology is that RNAs are mediators of genetic information from DNA to protein. This is correct but does not fully describe the complexity of genetic systems. The protein-coding mRNAs represent only 2% of the total genome and encode for approximately 20,000 different proteins in human cells. The genes for non-coding RNAs, which represent the large majority of the total genome and excluding rRNA and tRNA genes, have been considered as junk DNA for many years. More recently, the development of high-throughput transcriptome analysis has revealed the importance and complexity of these molecules. The classification of the non-coding RNAs is arbitrarily based on their size: the small non-coding RNAs that include the microRNAs (about 20 nucleotides), the piRNAs (about 30 nucleotides), the circular RNAs (100 to 10,000 nucleotides) and the long non-coding RNAs that exceed 200 nucleotides (Hombach and Kretz, 2016).

3.2 3.2 Long non-coding RNAs: classification and fate

Long non-coding RNAs (lncRNAs) are expressed in bacteria, plant and animals and represent 16,000 to over 100,000 expressed genes in human cells (Harrow *et al.*, 2012; Iyer *et al.*, 2015). Similar to all mRNAs transcribed by RNA polymerase II, lncRNAs are capped by 7-methyl guanosine (m⁷G) at their 5' ends, spliced (often less efficiently than mRNAs), polyadenylated at their 3' ends and sometimes carry small open reading frames but usually show limited protein coding potential (Chillon and Marcia, 2020). They carry their own promoter or share it with an adjacent protein-coding gene potential (Chillon and Marcia, 2020). In addition to their size which exceeds 200 nucleotides, lncRNAs are defined by their genomic location with respect to their neighbouring protein-coding genes. The antisense lncRNAs are transcribed from the opposite strand to that of the sense protein-coding gene and further subdivided according to their relative location to the protein coding gene: the 5' end of the antisense lncRNAs can be close to the 5' end of the sense mRNA, close to the 3' tail of the mRNA or the 5' or 3' ends of the two RNAs can be partially or fully complementary. The intronic lncRNAs

are contained in the intronic sequences of protein-coding genes and do not overlap with exons. Divergent lncRNAs share a common promoter with a protein-coding gene but are transcribed in opposite direction. In the contrary, intergenic RNAs are located in between protein-coding genes and carry their own promoter. LncRNAs can function in *cis*, influencing the expression and/or chromatin state of nearby genes or in *trans*, regulating the expression of genes far away from where the lncRNA is transcribed (Vance and Ponting, 2014).

Once transcribed, the sequence of lncRNAs transcripts defines their localization in the cell. The nuclear localization of lncRNAs is usually determined either by a weak splicing leading to their temporal accumulation in the nucleus (Mele et al., 2017) or by the presence of nuclear retention element (NRE) which contains an U1 snRNA-binding site and C-rich motifs that recruits U1 snRNP, a small nuclear ribonucleoprotein able to associate with Polymerase II and resulting in the accumulation of lncRNAs on chromatin (Azam et al., 2019).

The ones that are not retained in the nucleus are spliced and exported to the cytoplasm according to the presence of the nuclear RNA export factor (NXF1) (Zuckerman et al., 2020). More rarely, nuclear-encoded lncRNAs can be translocated to the mitochondria via an unknown mechanism (Rackham et al., 2011) or loaded into extracellular vesicles by protein binding (Statello et al., 2018).

3.3 Long non-coding RNAs: molecular functions

Depending on their localization and their specific interactions with DNA, RNA and proteins, lncRNAs can modulate chromatin function, alter the stability and translation of cytoplasmic mRNAs and interfere with signaling pathways.

In the nucleus, *cis* or *trans* lncRNAs can regulate gene expression by direct interaction with the chromatin resulting in a conformation change of the chromatin. The RNA-DNA interaction is mediated by the formation of a DNA-RNA triplex and can induce both gene silencing and activation. The negative charge of RNA can neutralize the positively charged histone tails, leading to chromatin de-compaction and therefore gene expression (Dueva et al., 2019). RNA-mediated opening of chromatin therefore functions as a regulator of rapid switch of gene expression (Dueva et al., 2019). LncRNAs can also interact with enhancer RNAs and help for the recruitment of transcription factors that activate gene transcription (Postepska-Igielska et al., 2015). In addition to the triple-helix formation, lncRNAs can form R-loop structures with the chromatin, and the R-loop structure itself is recognized by specific transcription factors resulting in the activation or repression of the target gene (Boque-Sastre et al., 2015). Their protein-binding potential

allow them to interact with various transcription factors and act as a molecular scaffold (Holdt et al., 2013; Yap et al., 2010), molecular guide or decoy by sequestering chromatin modifiers from promoters of target genes (Jain et al., 2016). At the post-transcriptional level, lncRNAs can affect pre-mRNA splicing by interacting with splicing factors (Yin et al., 2012) or with the pre-mRNA itself (Yap et al., 2018).

In the cytoplasm, lncRNAs can modulate mRNA stability by pairing to complementary mRNA and subsequently recruiting proteins responsible for their degradation (Kretz et al., 2013). Another way for lncRNAs to affect cell function is to pair with and sponge miRNAs in order to reduce their availability to target mRNAs. Of note, the stoichiometry between the lncRNA and miRNA is critical in the lncRNA-mediated sponging mechanism, the effect on the target mRNA being noticeable only when the relative concentration of the miRNA is greatly inferior compared to the abundance of the competitive lncRNA (Salmena et al., 2011). Due to their ability to bind to protein, lncRNAs can positively or negatively affect protein translocation to the nucleus (Lee et al., 2016) or bind to proteins involved in the regulation of key signaling pathways (Xu et al., 2021) and therefore affect gene expression and biological responses.

3.4 Long non-coding RNAs in cancer

3.4.a Long non-coding RNAs: a potential therapeutic target

The abundance and diversity of non-coding RNAs makes them attractive therapeutic targets for cancer treatment and other diseases. Over the past decade, various RNA-based therapies have been developed and showed promising results in pre-clinical and clinical trials (Winkle et al., 2021). So far, most of the RNA-based therapies that are in development aim to mimic or inhibit miRNAs. Long non-coding RNAs are also being developed and tested, but the broader modes of action of long non-coding RNAs (transcriptional and post-translational regulation, protein interaction) compared with miRNAs require a deeper understanding of their biological functions. Current preclinical studies consist of the targeting of natural antisense transcripts that act as gene expression inhibitors in *cis*, two of them showing promising results; one in the modulation of the brain-derived neurotrophic factor (BDNF) (Modarresi et al., 2012; Padmakumar et al., 2021) involved in memory formation and the other one in the upregulation of the gene *SCN1A* which causes the brain disorder Dravet syndrome, when down-regulated (Hsiao et al., 2016).

Currently, 12 RNA-based therapeutics gained the FDA and/or the European Medicine Agency (EMA) approval. These 12 approved RNA-based therapies target the liver, muscle or nervous system via intravitreal or subcu-

taneous injection and rely on the use of siRNAs that cause gene down-regulation or antisense nucleotides (ASOs) that cause mRNA degradation, modify the pre-mRNA splicing or block protein translation (Winkle et al., 2021).

The advantage of using non-coding RNAs instead of chemical compounds is that RNAs are naturally occurring molecules in human cells and therefore cells have all the machineries needed for their processing. Another advantage is that non-coding miRNAs usually directly or indirectly target one pathway at multiple levels, thus giving a broader, yet specific, response. However, for now, most of the RNA-based clinical trials using siRNAs or ASOs are unsuccessful because of the lack of control of the drug delivery. RNA structures are very unstable, negatively charged and hydrophilic, making their diffusion through the lipid membrane very difficult (Akinc et al., 2008). The problem of the specificity of delivery to a certain cell type or organ as well as the lack of control in terms of quantity uptaken per cell, possibly causing off-target effects or overdosing, remain to be improved (Jin et al., 2015). Another challenge for RNA-based therapies is the immune response triggered by the detection of double- or single-stranded RNAs as a viral defence mechanism via the Toll-like receptor (TLRs) and the activation of various downstream immune responses (Alexopoulou et al., 2001). One way to limit the immunogenicity of naked RNAs is to neutralize their charge and therefore their interaction with proteins, including TLRs (Sledz et al., 2003). Other technologies are being developed and tested such as miRNA-mimics and anti-miRNAs but no lncRNA-based therapeutics have been approved for clinical trials yet.

3.4.b Long non-coding RNAs regulated by TGF β

More and more long non-coding RNAs are described as effectors of TGF β signaling in cancer. The vast majority of lncRNAs controlled by TGF β regulate the epithelial-to-mesenchymal transition. The first lncRNA demonstrated to be positively regulated by TGF β was the *lncRNA-ATB*. *LncRNA-ATB* overexpressed in lung cancer and associated with poor prognosis (Wei et al., 2018), upregulates the expression of miR-200c/ TWIST1 pathway by sponging *miR-200c*, a negative regulator of ZEB1/2, leading to an increased EMT in breast cancer (Li et al., 2018) and hepatocellular carcinoma (Yuan et al., 2014) cells.

Cell proliferation is also affected by lncRNAs regulated by TGF β in cancer. The lncRNA *TUG1* is induced by TGF β and increases cell proliferation capacities via the EMT pathway in pancreatic cancer by upregulating the expression of matrix metalloproteases (MMP) MMP2 and MMP9, two metalloproteases that contribute to cancer cell proliferation (Qin and Zhao, 2017). Another interesting example is the long non-coding RNA *EPR* that interacts with chromatin and attenuates cell proliferation by positively regu-

lating the cell cycle inhibitor p21/Cdkn1a, both transcriptionally and post-transcriptionally. *EPR* is downregulated by TGF β /SMAD signaling, promoting cell proliferation (Rossi et al., 2019). The lncRNA *CTBPI-AS2* is up-regulated in colorectal cancer and activates the TGF β /SMAD2/3 pathway by inhibiting its competitive miRNA miR-95-5p, which results in an inhibition of cell proliferation and invasion (Li et al., 2021).

The activation of TGF β signaling itself is regulated by TGF β -dependant lncRNAs by promoting (*lnc-LFARI*) or inhibiting (*lnc-TSI*) the interaction between the SMADs and the TGF β receptors (Wang et al., 2018; Zhang et al., 2017). Another way by which lncRNAs regulate TGF β signaling is to modulate the power of the SMAD pathway. The lncRNA *NORAD* facilitates the nuclear transport of the SMAD complex in the nucleus by interacting with importin β 1 (Kawasaki et al., 2018), the lncRNA *ELIT1* interacts with SMAD3 and acts as a co-factor by recruiting SMAD3 to the promoters of its target genes including *SNAIL* (Sakai et al., 2019) and the SMAD3-associated lncRNA *SMASR*, on the contrary, prevents SMAD3 phosphorylation and therefore the activation of its target genes (Xu et al., 2021). *SNHG6* reduces the expression of SMAD7, the inhibitor of the SMAD pathway (Wang et al., 2019). The expression of TGF β 1 or TGF β 2 is also directly affected by the lncRNA *PVT1* that up-regulates the transcription of TGF β 1 (Li et al., 2022; Zhang et al., 2018) and *CASC9* that stabilizes the mRNAs that encode for TGF β 1 or TGF β 2 (Luo et al., 2019).

In gastric cancer, the lncRNA *MACC-AS1* is induced by TGF β secreted by mesenchymal stem cells. *MACC-AS1* antagonizes *miR-145-5p* that promotes fatty acid oxidation, leading to an increased tumor self-renewal and chemoresistance (Zhao et al., 2018).

3.4.c The long non-coding RNA *LINC00707*

The long non-coding RNA *LINC00707* is located on chromosome 10, is made of 3,087 nucleotides, contains 5 exons and expressed as a unique splice-variant (NCBI reference sequence: NR-038291.1, **Figure 3**).

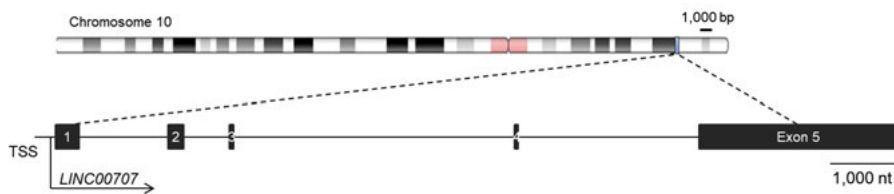


Figure 3. Genomic organization of the *LINC00707* gene on chromosome 10. Exons are shown as black boxes and introns as lines, the arrow indicates direction of transcription. TSS = transcription start site. Scale bar on the chromosome: 1,000 base pairs, scale bar on the *LINC00707* transcript: 1,000 nucleotides.

Various functions have been recently attributed to *LINC00707* in different normal and cancer cell models. *LINC00707* is upregulated and sponges miRNAs such as *miR-370-3p* in human bone marrow-derived mesenchymal stem cells to promote osteogenesis (Jia et al., 2019). In cancer, *LINC00707* sponges *miR-485-5p*, an inhibitor of cell proliferation via its direct inhibition of O-GlcNAcylation which stabilizes the protein Bmi-1 to increase the proliferation of colorectal cancer cells (Wang et al., 2020), or *miR-382-5p* (Guo et al., 2021) and *miR-374c-5p* (Fang et al., 2022) to modulate the expression of their downstream target genes VEGFA and syndecan-4 (SDC4) respectively, leading to an increased proliferation and tumor growth of cervical cancer. *LINC00707* interacts with HuR, an RNA-binding proteins involved in the stabilization or degradation of mRNAs. The interaction between *LINC00707* and HuR reinforce the stabilization of the mRNAs VAV3 and F11R, encoding for proteins respectively implicated in cell adhesion and in the formation of tight junctions. The stabilization of these two mRNA promotes proliferation and metastasis in gastric cancer (Xie et al., 2019). In normal tissue, *LINC00707* is highly expressed in placenta and bladder but its functions in these organs remain unknown (Fagerberg et al., 2014).

4 Cell polarity and cancer aggressiveness

Cell polarity refers to the spatial organization of cells or of cell components either in shape or architecture. The apico-basal polarity of epithelial cells refers to the secretory, apical phase of the cells that face a lumen, and the basal side of the cell that interacts with the ECM, basement membrane. The apico-basal polarity is a result of cell-cell interaction and cell-ECM interactions and is tightly regulated in order to regulate their asymmetric division and directed cell migration (Rodriguez-Boulan and Macara, 2014). The development and maintenance of cell polarity is a result of multiple signals from polarity proteins, epithelial cadherin (E-cadherin) and focal adhesion contacts with the ECM. These signals organize the cytoskeleton and organelle localization and loss of these signals is associated with the transition from epithelial to mesenchymal phenotypes that develop front-to-back polarization (Aigner et al., 2007; Whiteman et al., 2008). Such invasive cells exhibit rather a front-rear polarity which directs their migration toward certain stimuli or chemoattractants.

Despite the different morphological organization, brain cells also need to be polarized in order to communicate via neurotransmitters, migrate or direct the neurite and dendrite projections (Sakakibara and Hatanaka, 2015). The polarization of the different cell types is controlled by different protein complexes, some of them being restricted to epithelial cells and others being involved in different cell types.

4.1 Par3/Par6/PKC complex

The apico-basal polarity of epithelial cells is defined by the asymmetric distribution of the evolutionary conserved complexes Crumbs/PALS1/PATJ (Crumbs complex) restricted to epithelial cells, the Scribble/lethal giant larvae (Lgl)/ Disc large (DLG) (Scribble complex) and the Par3/Par6/PKC complex (Par complex). The Crumbs and Par complexes are localized in the apical zone, near the tight junctions of the cells (Chen and Zhang, 2013; Tan et al., 2020) whereas the Scribble complex is localized on the basolateral side of the cells (Trojanovsky et al., 2021). Mechanistically, there is a feedback loop between the three polarity complexes in order to maintain the epithelial cell polarity: the protein Crumbs recruits PALS1 which recruits Par6

to mediate the phosphorylation of Par3 through atypical protein kinase C (aPKC) and the phosphorylation of LGL via the activation of small GTPases of the Rho family (Betschinger et al., 2003; Horikoshi et al., 2009).

The formation of the Par3/Par6 complex, the direct interaction between Par3 and aPKC, as well as the aPKC kinase activity are required for the apical domain formation. The Par complex participates in the formation of cell-cell tight junctions through the direct interaction of Par3 with the junctional adhesion molecules (JAMs) and small GTPases of the Rho family such as Cdc42 (Joberty et al., 2000); however, the formation of tight junctions does not entirely depend on the polarity complex. Loss of epidermal Par3 leads to disturbed skin barrier, altered expression and localization of tight junctions and increased thickness of the epidermis (Ali et al., 2016). In neurons, the aPKC of the Par complex is activated by the Wnt pathway which in turn inhibits GSK3 β , MAPK2, and activate LKB1 and TIAM1 and leads to neuronal polarization (Hapak et al., 2018).

4.2 Cell polarity disruption in cancer

Tight junctions, asymmetric division and apico-basal polarity are very often altered in cancer. A genome-wide screen of polarity complex genes in various types of cancer has revealed that Par3 is commonly deleted in carcinomas and in glioblastomas, events associated with poor prognosis. The consequence of this deletion is an increased cancer cell aggressiveness due to cell polarity disruption, which is restored by Par3 rescue (Rothenberg et al., 2010). Loss of cell polarity proteins leads to the impairment of cell-cell junctions, which is one of the first steps of EMT prior to metastatic progress (Xue et al., 2013). Par3 silencing promotes tumorigenesis through induction of matrix metalloproteases, destruction of ECM, all mediated by an inappropriate aPKC-dependant JAK/STAT3 activation (McCaffrey et al., 2012). The Par3 complex also modulates EMT by regulating EMT markers. In normal conditions, one of the roles of aPKC is to degrade SNAIL, thus inhibiting EMT. In breast cancer, loss of apical-basal polarity prevents aPKC-mediated SNAIL phosphorylation and stabilizes the SNAIL protein to promote EMT and invasion (Jung et al., 2019).

5 Reactive oxygen species

5.1 Source and production

Cell metabolism involves mitochondrial activity to produce the energy needed for the cells to proliferate and survive. The mitochondrial respiratory chain consists of five multi-subunit protein complexes located in the mitochondrial intermembrane space (respiratory complexes I-V) and two factors (the cytochrome c and coenzyme Q10) (Rich and Marechal, 2010). The role of the mitochondrial respiratory chain is to produce adenosine triphosphate (ATP), a usable form of energy by the cells, by oxidation of glucose and other sugars. During this process, electrons are transferred from NADH, an intermediate of the TCA cycle, to oxygen by respiratory complexes in the inner mitochondrial membrane which create a transmembrane electrochemical gradient. First, the NADH produced by the TCA cycle is converted to NAD^+ by the complex I, this reaction releases two electrons. The complex II catalyses the conversion of succinate into fumarate followed by an oxidation of FADH_2 into FAD, which releases two more electrons. The four electrons produced by complex I and II are transferred to the coenzyme ubiquinone (Q) which is reduced to ubiquinol (QH_2), which in turn oxidizes the complex III by the transfer of two electrons. Complex III gives two electrons to cytochrome C which passes them to complex IV. Complex IV uses these electrons to catalyse the reduction of molecular oxygen (O_2) into water (H_2O). Each reaction (except the reaction of complex II) is coupled with proton translocation to the cytoplasm to maintain the charge difference necessary for the electron transportation. The electron transport chain and the movement of protons creates an electrochemical proton gradient known as mitochondrial membrane potential. Mitochondria dissipate the membrane potential by the re-entry of protons inside the mitochondria via complex V, which is coupled to the production of ATP by ADP.

During this process, it happens that NADH and/or oxygen are incompletely reduced and give rise to the superoxide radical O_2^- produced by the one-electron reduction of O_2 (**Figure 4**). Oxygen can also be reduced by two electrons (peroxide O_2^{2-}), associate with hydrogen (hydroxyl radical OH^\bullet and hydroxyl ion OH^-) or two hydroxyl ions can associate to form hydrogen peroxide H_2O_2 . All these reactive molecules and free radicals derived from oxygen are called Reactive Oxygen Species (ROS) (Mazat et al., 2020). Mistakes in the mitochondrial chain resulting in ROS production are more likely

to happen in highly metabolically active cells, when mitochondria are overwhelmed by too high energetic demands. Endogenous ROS production involves not only the mitochondria, but also several enzymatic reactions including NADPH oxidases, xanthine oxidase, uncoupled endothelial nitric oxide synthase, arachidonic acid and its metabolic enzymes like lipoxygenase and cyclooxygenase (Gorrini et al., 2013).

ROS are unstable and easily transfer their extra electron, catalysing various reactions in cells (Zorov et al., 2014). To prevent the damage from ROS, cells possess several antioxidant enzymes such as superoxide dismutases (SOD) MnSOD and Cu/ZnSOD, which are located in the mitochondria and the cytosol, respectively, where they convert superoxide into hydrogen peroxide (Sheng et al., 2014). Hydrogen peroxide is then converted into water by the enzyme glutathione peroxidase (GPx) that is active both in the mitochondria and in the cytoplasm (**Figure 4**).

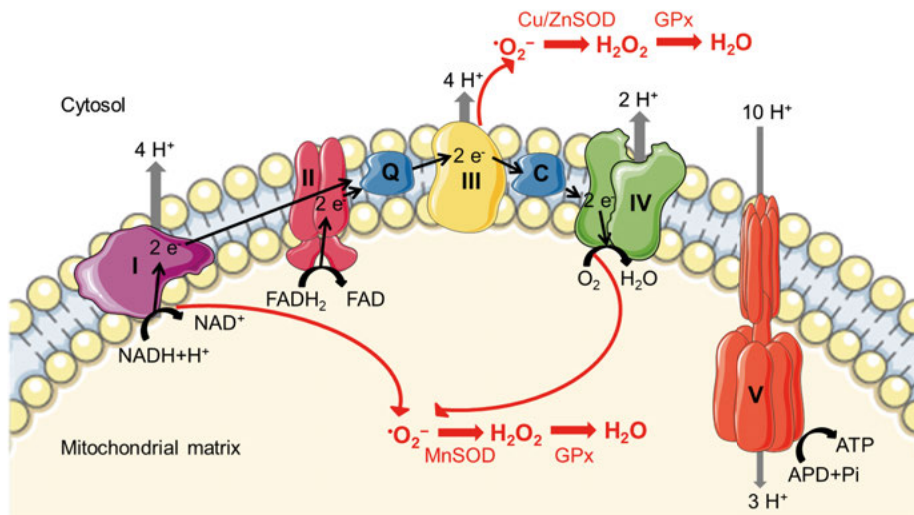


Figure 4 Schematic representation of mitochondrial ROS production by the electron transport chain and antioxidant enzymes.

The five complexes of the electron transport chain are indicated in roman numbers and the co-factors cytochrome C and coenzyme Q10 are indicated with the letters C and Q respectively. Grey arrows represent the transport of H⁺ and straight black arrows represent the electron transport. Red arrows represent the generation of the superoxide radical ·O₂⁻ and its neutralization by the antioxidant enzymes superoxide dismutase (SOD) and glutathione peroxidase (GPx).

5.2 Reactive oxygen species in cancer

ROS have cellular signaling capabilities. Cancer cells contain elevated quantity of ROS due to their high metabolic and proliferation rate and ROS have been associated with various cell responses, both pro-tumorigenic and anti-tumorigenic.

On one hand, high level of ROS can cause oxidation of lipids and modify the permeability of cell membranes (Wong-Ekkabut et al., 2007), affect protein activity via the modification of cysteine residues within proteins (van der Reest et al., 2018), or DNA structure by inducing single- or double-stranded breakage and DNA damage response, base modifications, deoxyribose modification and DNA cross-linking (Fan et al., 2019). ROS are also able to directly modulate signaling pathways, for instance the hyperactivation of the mammalian target of rapamycin (mTOR) via the PI3K/AKT survival pathway by oxidizing and inactivating the phosphatases PTEN and PTP1B, negative regulators of PI3K/Akt signaling (Leslie et al., 2003). ROS also activate the MAPK pathways, inducing growth factor receptor activation and MAPK/ERK pro-proliferative signaling (Hashmi et al., 2018; Wang et al., 2011). Finally, ROS also promote tumor angiogenesis and metastasis by oxidation of prolyl hydroxylase domain protein 2 (PHD2) which leads to the oncogenic stabilization of HIF-1 α protein during hypoxia (Jung et al., 2008; Park et al., 2010). In order to promote metastasis, and in addition to the previous examples (e.g., the MAPK and PI3K/AKT pathways), ROS regulate additional transcriptional activities (e.g., SNAIL) to enhance cancer cell migration and invasion (Alexandrova et al., 2006; Barnett et al., 2011; Basuroy et al., 2010).

On the other hand, ROS can promote anti-tumorigenic signaling. An excess of ROS in the cells promotes cell death through the intermediate of the apoptosis signal-regulating kinase 1 (ASK1) via activation of the ASK1/JNK and ASK1/p38 signaling pathways (Goldman et al., 2004). ROS-mediated oxidation of thioredoxin (TRX, a small redox protein) causes ASK1 activation (the TRX partner), thereby triggering the suppression of anti-apoptotic factors through the activation of the downstream MAPK pathway (Cheng et al., 2014; Madan et al., 2013). ROS-mediated activation of the JNK and p38 signaling pathways can also induce cell cycle arrest, preventing cancer cell growth and proliferation (Xie et al., 2016; Zhang et al., 2019).

6 Cancer metabolism

Cell metabolism is the conversion of available nutrients to usable energy for living cells. Metabolic reactions are categorized as catabolic, which is the break-down of compounds and usually associated with a release of energy, or anabolic, which is the build-up of compounds such as proteins, lipids or nucleic acids and usually consumes energy. One of the main nutrients that regulate cell metabolism is glutamine, an amino acid that initiates multiple cell processes.

6.1 Glutamine metabolism

Glutamine is an abundant amino acid available in the bloodstream or synthesized by the cells by catabolism of other amino acids. Glutamine is then catabolized via a process known as glutaminolysis after transport into the mitochondria and conversion into glutamate by glutaminases (GLS) (Yoo et al., 2020). Mitochondrial glutamate is then converted into α -ketoglutarate and free ammonia by glutamate dehydrogenase and feeds into the tricarboxylic acid (TCA) cycle in order to produce ATP (Yoo et al., 2020). Moreover, glutamine is used to synthesize other non-essential amino acids, glutathione or purine- and pyrimidine-based nucleotides (Yoo et al., 2020).

In addition to the use of glutamine to produce energy and new cell intermediates, glutamine can regulate post-translational modifications on tubulin, a major component of microtubules that controls structure and shape to all eukaryotic cells (Roll-Mecak, 2020). Microtubules are involved in the regulation of multiple processes such as proliferation, migration or intracellular cargo transport. In order to accommodate all these functions, microtubules associate with specific microtubule-associated proteins (MAPs) recruited by specific and dynamic post-translational modifications carried by tubulin proteins (Roll-Mecak, 2020). The reversible glutamylation on microtubules consists in the addition of a chain of glutamate on the C-terminal tails of tubulin and is controlled by evolutionarily conserved enzymes. The enzyme tubulin tyrosine ligase (TTL) together with its co-factor cilia and spindle-associated protein (CSAP) function as tubulin glutamate ligases, which add multiple glutamates to specific substrate proteins via a tyrosine (Bompard et al., 2018). Conversely, side chain glutamates are removed by tubulin deglu-

tamylases of the cytoplasmic carboxypeptidase (CCP) family (Rogowski et al., 2010).

When glutamate is not used by the cells to regulate post-translational modifications, α -ketoglutarate generated from glutaminolysis can be used as an energy donor via the TCA cycle, a precursor for amino acid biosynthesis or a regulator of epigenetic processes via protein modification and binding of other proteins. Indeed, α -ketoglutarate acts as a cofactor for the enzyme Jumonji-C that contains a histone demethylase domain (Tsukada et al., 2006). The activation of the Jumonji-C enzyme therefore triggers histone demethylation, and in parallel balances the reaction via the release of succinate and formaldehyde that antagonize the activity of the histone demethylase. Histone lysine demethylation can signal either gene expression activation or repression depending on the particular lysine residue that is methylated. Glutamine, a precursor of α -ketoglutarate, is therefore indirectly implicated in the regulation of epigenetic regulation of the chromatin (Pan et al., 2016).

6.2 Glutamine metabolism in cancer cells

6.2.a Metabolic adaptation

Tumor initiation and progression require the metabolic reprogramming of cancer cells in order to meet their increased bioenergetics, biosynthetic and redox demand. The metabolic reprogramming of cancer cells is today admitted as a hallmark of cancer (Hanahan and Weinberg, 2011). *In vivo*, important nutrients such as glucose and glutamine are available in the bloodstream and supplied by catabolism of carbohydrates and proteins respectively consumed via diet. In the context of solid tumors, accessibility of a given tumor cell to nutrients is modulated by its proximity to the vasculature: cells located in the periphery of the tumor and therefore adjacent to the vasculature have access to nutrients whereas cells in the core of the tumor have diminished access to nutrients and oxygen (Boroughs and DeBerardinis, 2015). In terms of metabolic adaptation, nutrient-deprived cells first decrease their demand for ATP in order to maintain an adequate ATP/ADP ratio (Gameiro and Struhl, 2018) or convert two molecules of ADP, the precursor of ATP, into one molecule each of AMP and ATP (Klepinin et al., 2020). In addition to a lower metabolic activity, nutrient-deprived cells can decrease their mTOR kinase activity in order to increase autophagy and catabolize existing proteins, thus providing an intracellular glutamine supply to sustain mitochondrial function (Duran et al., 2012). Nutrient deprivation-induced autophagy is triggered by a limited number of amino acids: glutamine, arginine, methionine and lysine. The lack of these amino acids is sensed by the cells and induces AKT activation by a GCN2/ATF4/REDD1 signaling pathway that activates mTORC2 (Jin et al., 2021). As a mechanism that sustains

cancer cell malignancy, TGF β contributes to the induction of glutamine catabolism via up-regulation of the transporter solute carrier family 1 member 5 (SLC1A5), responsible for the transport of glutamine inside the cell and later inside mitochondria, as well as the up-regulation of the enzyme GLS1 that converts glutamine into glutamate to enhance α -ketoglutarate entry to the TCA cycle (Soukupova et al., 2017). Finally, certain Ras-transformed cancer cells counteract the lack of glutamine by the degradation of unsaturated fatty acids to support ATP production (Kamphorst et al., 2013).

6.2.b Glutamine deprivation on cancer aggressiveness

Regional glutamine deficiency in tumors has been studied by transient glutamine deprivation. It was reported that glutamine deprivation affects cancer-associated fibroblast (CAFs) motility, which are able to activate the signaling complex of AKT2/TRAF6/p62 that controls polarization, in order to direct CAF mobility toward glutamine (Mestre-Farrera et al., 2021). In cervical carcinoma HeLa and in breast cancer cells, extracellular matrix stiffness increases microtubule glutamylation (regulated by glutamine concentration) leading to increased cell invasion (Torrino et al., 2021). Glutamine metabolism also affects cell responses to TGF β , the regulator of cell invasion via the process of EMT, as explained above. It was shown in pancreatic ductal cancer that glutamine depletion increases the level of SNAI2/Slug, the TGF β -induced EMT-TF, which in turn induces the process of EMT via MEK/ERK signaling and ATF4 (Recouvreux et al., 2020). In ovarian cancer, however, glutamine depletion reduces the invasive capacity of the cells via the down-regulation of MMPs, mediated by the transcriptional regulator of MMP gene expression and key regulator of EMT in ovarian cancer, ETS1. The strategy to impair ETS1-induced gene expression varies in different cell lines, either via its down-regulation at the gene level or via its reduced translocation to the nucleus (Prasad and Roy, 2021) .

In addition to the modulation of cancer cell invasion via the regulation of polarity complexes, microtubule glutamylation and expression of epithelial markers, glutamine deprivation has been shown to induce epithelial differentiation of breast cancer stem cells into epithelial subtypes by a reduced nuclear localization of β -catenin. Interestingly, basal and luminal breast cancer cells respond differentially towards changes in extracellular and intracellular glutamine, basal cells with mesenchymal phenotype being more dependent on extracellular glutamine supply than luminal cells (Jariyal et al., 2021). Another surprising effect of glutamine deprivation is the regulation of immune escape by tumors. Renal carcinoma cells deprived in glutamine exhibit higher level of programmed death-ligand 1 (PD-L1) induced by the EGFR/ERK/c-Jun pathway which results in a decreased immune response associated with poor prognosis (Ma et al., 2020). Finally, and in agreement with the statement that glutamine controls the energy production of cancer

cells needed to sustain cell viability, the lack of glutamine induces apoptosis in glial and glioblastoma cell lines via the assembly of GLS1, the enzyme that converts glutamine to glutamate, into filaments. The filament organization of GLS1 is triggered by the lack of glutamate and leads to a decrease of asparagine synthesis that impairs the mitochondrial activity, causing ROS-induced apoptosis (Jiang et al., 2022).

7 Present investigation

The aim of this thesis was to identify new actors of TGF β signaling, from non-coding RNAs to regulators of metabolism (papers I-III). These studies were conducted in a large panel of cell lines, tumoral or immortalized, listed in the following table. A particular emphasis was given to glioblastoma (paper III) that focuses on the effect of cell polarity complex disruption in invasion and stem-cell renewal.

Cell line	Organ	Cell type	Mutations	Gender	Reference
PC3U	Prostate	Cancer cell line - Epithelial	TP53, PTEN	Male	(Carroll et al., 1993; Fraser et al., 2012)
HaCaT	Skin	Immortalized cell line – Epithelial	TP53	Male	(Lehman et al., 1993)
U2987MG	Brain	Astrocytoma cell line	Unknown	Male	(Savary et al., 2013)
U3031MG	Brain	GBM cell line, Mesenchymal subtype	Loss of chromosome 10, PTEN	Female	(Dadras et al., 2021)
U3034MG	Brain	GBM cell line, Mesenchymal subtype	Loss of chromosome 10, PTEN	Male	(Dadras et al., 2021)
U3005MG	Brain	GBM cell line, Proneural subtype	Loss of chromosome 10, PTEN	Male	(Dadras et al., 2021)
HLF	Liver	Cancer cell line – Mesenchymal subtype	TERT, TP53	Male	(Hsu et al., 1993; Qiu et al., 2019)

SNU-499	Liver	Cancer cell line - HBV induced	ARID1A, AXIN1A, TP53	Male	(Kang et al., 1996; Qiu et al., 2019)
Hep3B	Liver	Cancer cell line – Epithelial – HBV induced	AXIN1, RB1	Male	(Yu et al., 2019)

7.1 PAPER I: TGF β -induced down-regulation of *LINC00707* promotes signaling and migration

Background: TGF β is a cytokine involved in various cellular processes in the adult organism and during embryonic development. In the context of cancer, TGF β modulates and mediates the development of EMT, correlated with invasive growth and metastasis in different types of tumors. In addition, several non-coding RNAs have been reported to be regulated by TGF β and thus contribute to EMT.

Summary: In this study, we describe the long intergenic non-coding RNA *00707* (*LINC00707*) as a TGF β -responsive gene. By combining transcriptomic data from human keratinocytes and glioblastoma cells, we found that TGF β signaling down-regulates the expression of *LINC00707*. These findings have been extended to additional cancer cell types (prostate, lung and breast). *LINC00707* is downregulated via the transcription factor Krüppel Like Factor 6 (KLF6) as a regulator of *LINC00707*. *In situ* hybridization, cell fragmentation and RNAscope experiments have shown that *LINC00707* resides less in the nucleus and more into the cytoplasm where it forms distinct and large clusters. In keratinocytes, RNA sequencing data and gene ontology analysis revealed that stimulation by TGF β or silencing of *LINC00707* up-regulate the expression of genes involved in extracellular matrix organization and cell-substrate adhesion. In agreement with the gene ontology analysis, loss or gain-of-function experiments with *LINC00707* revealed enhanced or reduced invasiveness of cancer cells, respectively. Mechanistically, *LINC00707* interacts with and retains the SMAD complex in the cytoplasm. Upon TGF β stimulation, *LINC00707* down-regulation releases the SMAD proteins and allows their accumulation in the cytoplasm and therefore the regulation of TGF β target genes responsible for the modulation of the invasive capacities of cancer cells. These data provide a new component of TGF β -mediated cancer cell invasion, implicating *LINC00707* as a negative regulator of this process.

7.2 PAPER II: Glutamine deprivation alters TGF β signaling in hepatocellular carcinoma

Background: Tumor cells rely on glutamine to fulfill their metabolic demands and sustain their proliferation. The elevated consumption of glutamine and localization of the cells within the tumor can lead to intratumoral nutrient depletion, causing metabolic stress that potentially impacts tumor progression. Glutamine deprivation affects cancer cell aggressiveness via its effect on stemness, migration, on the regulation of the redox state or on cell proliferation. However, the adaptation to long term glutamine starvation and the differential response to glutamine starvation between mesenchymal or epithelial hepatocellular carcinoma cells, including the association with high or low TGF β signaling remain unknown.

Summary: Our study shows that epithelial and mesenchymal hepatocellular carcinoma can adapt to long term starvation without undergoing senescence or apoptosis. However, glutamine metabolism is needed to maintain a certain proliferative rate, clonogenic and self-renewal capacities, the decrease of these features being associated with a decrease of ROS production. A large panel of genes is differentially expressed in glutamine-deprived cells, most of the up-regulated genes being related to cell differentiation and most of the down-regulated genes being related to extracellular matrix reorganization and cell adhesion. Consistently, the glutamine-deprived cells showed a weak response to TGF β stimulation, associated with a decrease of cell adhesion and invasive capacities. More interestingly, glutamine metabolism seems to be needed to maintain a mesenchymal phenotype with invasive capacities. Indeed, the absence of glutamine in the HCC culture medium leads to a reinforcement of the epithelial phenotype or even a switch from the mesenchymal to the epithelial phenotype, associated with a dramatic decrease of mesenchymal gene expression and a loss of invasive capacity of the cells. We therefore conclude that glutamine deprivation pushes the cells to become more epithelial, this effect being logically more obvious in mesenchymal cells.

7.3 PAPER III: Par3 promotes glioblastoma stem cell self-renewal while inhibiting cell invasion

Background: This paper emphasizes the fact that brain malignancy is characterized by invasiveness to the surrounding tissue and by the presence of stem-like cells known as glioblastoma stem cells (GSCs). Whether mechanisms that generate and maintain the GSCs are also responsible for the invasiveness of GBM is unclear.

Summary: The protein Par3 is a cytoplasmic protein and member of the polarity complex Par3/Par6/aPKC. Furthermore, Par3 is commonly deleted in carcinomas and in glioblastomas, which is associated with poor prognosis. In this paper, we study the role of the Par3 protein (encoded by *PARD3*) in patient-derived GSCs. These cells were depleted from Par3 which resulted in a decreased neurosphere forming capacity and enhanced invasiveness. This phenotype was corroborated by genome-wide transcriptomic analysis, revealing gene profiles associated with low stemness and high invasiveness in GSCs with suppressed Par3 expression. The genome-wide transcriptomic analysis after Par3 silencing also revealed a low expression of mitochondrial enzymes that generate ATP. Accordingly, silencing Par3 reduced ATP production and concomitantly increased reactive oxygen species. To investigate whether Par3 exerts its effect on invasion and stemness alone or together with the Par3/Par6/aPKC complex, and the importance of mitochondrial ROS on invasiveness and stemness, invasion assays and sphere assays were performed in different GBM cell lines (control or Par3 knock down) treated or not with specific chemicals: a PKC inhibitor, MitoPQ that blocks the production of mitochondrial ROS or MitoTempo, which increases the production of mitochondrial ROS. The present findings support the notion that Par3 exerts homeostatic redox control, which could limit the tumor cell-derived pool of oxygen radicals. These functions of Par3 go beyond its contribution to junctional contacts between cells and establish roles in controlling invasive escape and tumorigenic survival in non-epithelial tumors such as GBM. In this paper we demonstrate that Par3 is as a regulator of glioblastoma invasiveness and stemness via the regulation of mitochondrial ROS production.

8 Future perspectives

8.1 Paper I: TGF β -induced down-regulation of *LINC00707* promotes signaling and migration

We performed a whole-genome transcriptomic analysis to identify lncRNA genes regulated by TGF β . We found that TGF β signaling downregulates *LINC00707*. Furthermore, we observed that *LINC00707* suppressed cancer cell invasion, as well as pro-mesenchymal responses to TGF β by suppressing SMAD-dependent signaling. This is achieved by the association of *LINC00707* with SMAD proteins that retain them in the cytoplasm, necessitating *LINC00707* elimination in order to allow SMAD translocation into the nucleus. We completed this study by investigating *LINC00707* expression *in vivo* and observed that there was negative correlation with SMAD2 phosphorylation in tumor tissues. We conclude that TGF β signaling decreases *LINC00707* expression and induces cancer cell invasion via SMAD signaling.

Although significant progress has been made in the understanding of TGF β signaling by *LINC00707*, there are several questions that remain open. First, we show that TGF β regulates *LINC00707* in an indirect manner, via the intermediate action of the transcription factor KLF6. KLF6 binds to the *LINC00707* promoter in order to maintain gene expression and is dissociated from the promoter by TGF β signaling, which induces the *LINC00707* repression. It is known that KLF6 receives phosphorylation from the TGF β -induced MAP kinases (Dionyssiou et al., 2013), which could explain its dissociation from the *LINC00707* promoter upon TGF β stimulation. However, chromatin immunoprecipitation using a MEK inhibitor did not show any effect of the binding of KLF6 on the *LINC00707* promoter (data not shown), failing to support this hypothesis. Another possibility would be that TGF β implicates another transcription factor that actively represses the *LINC00707* expression. This potential transcription factor possibly binds to the *LINC00707* promoter nearby the KLF6 binding site, resulting in the dislocation of KLF6. Mechanistically, we show that *LINC00707* associates with the SMAD complex in order to sequester it in the cytoplasm. The mechanism by which *LINC00707* dissociates from the SMAD complex at an early time-point of TGF β signaling remains unclear. One possibility would be that the TGF β -induced phosphorylation of SMAD2 and SMAD3 changes their con-

formation and therefore release *LINC00707* from their bound complex. Another possibility would be that TGF β stimulation increases the expression of another *LINC00707*-binding protein with higher affinity in order to relocate *LINC00707* and release the SMAD complex. This hypothesis could be tested by mass spectrometric analysis followed by RNA immunoprecipitation (RIP) and chromatin-RNA immunoprecipitation (chiRP). Moreover, a complete screen of the *LINC00707*-binding proteins would identify new *LINC00707* partners possibly involved in biological processes other than TGF β signaling and cell invasion. For instance, transcriptomic analysis showed that *LINC00707* positively regulates the expression of interferon- γ -related genes, suggesting an implication of *LINC00707* in immune responses. It would be of interest to validate and understand this observation. Finally, we showed *in vivo* that *LINC00707* expression is negatively correlated with the translocation of SMAD2 to the nucleus. The technic we have used does not allow us to determine whether *LINC00707* expression and its effect on SMAD2 translocation are specific to a certain cell type within the tumor. Finally, it would be interesting to know whether this effect of *LINC00707* on TGF β signaling and cell invasion is a general mechanism observed in every type of tumor. If so, *LINC00707* expression might be used as a prognostic tool for tumor invasion.

8.2 PAPER II: Glutamine deprivation alters TGF β signaling in hepatocellular carcinoma

We studied the effect of long-term glutamine deprivation, that mimics pathophysiological processes occurring in tumor cells located in the core of solid tumors, by creating resistant cell lines to glutamine deprivation. Using a hepatocellular carcinoma model, we performed transcriptomic analysis to compare gene expression in cells repleted with or deprived of glutamine. We found a number of up-regulated genes involved in cell differentiation and down-regulated genes involved in cell adhesion and matrix reorganization. TGF β being a master regulator of these biological processes, led us hypothesize that TGF β signaling might be affected by the lack of glutamine. Indeed, transcriptomic analysis showed similar affected pathways as in the absence of TGF β and a decreased number of genes affected by TGF β in the absence of glutamine compared with the control, suggesting that TGF β signaling requires glutamine metabolism to be fully efficient. Using 2D and 3D culture experiments and consistently with transcriptomic analysis, the lack of glutamine leads to a decrease of sphere formation capacity, cell adhesion and invasion, which can be explained by a decrease of cell adhesion-related genes as well as a decrease of mesenchymal markers, especially in mesenchymal cell lines.

The implication of glutamine metabolism in TGF β responses reveals a new aspect of TGF β biology but still needs further investigations. It is reported that TGF β affects glucose and glutamine metabolism but the mechanism by which glutamine metabolism directly affects the activation of TGF β -activated pathways is established here, but the mechanism remains unknown. One possible intermediate between glutamine metabolism and TGF β signaling could be the mTOR kinase, which is regulated by the concentration of nutrients and is required for TGF β signaling. Second, we need to understand the reason why mesenchymal cells show a greater dependency on glutamine than epithelial cells. Indeed, the lack of glutamine strongly decreased the cell invasion capacity and the stemness frequency of mesenchymal cells. Consistently with these observations, mesenchymal cells are mostly found on the periphery of the tumor *in vivo*, therefore receiving adequate levels of glutamine and thus becoming able to invade surrounding tissues. We aim to extend these findings in two more aggressive types of tumor, the pancreatic ductal adenocarcinoma (PDAC) and glioblastoma. Preliminary data also show a decrease of stemness frequency after glutamine deprivation in PDAC and GBM, accompanied with a decrease of the expression of the mesenchymal gene *SNAI1* in PDAC (not yet tested in GBM). Finally, another aspect of glutamine metabolism is its indirect involvement in the regulation of epigenetic changes via its regulation of histone methylation. It would be of interest to study the possible epigenetic changes regulated by the lack of glutamine and their implication in cancer aggressiveness, and even the TGF β -induced epigenetic changes and how they could be altered by the lack or presence of glutamine.

8.3 PAPER III: Par3 promotes glioblastoma stem cell self-renewal while inhibiting cell invasion

In this paper, we explored the role of polarity machinery in glioblastoma aggressiveness and unravelled new roles of the polarity protein Par3, often completely or partially lost in glioblastoma patients and associated with poor prognosis. Beyond its role on cell polarity, we describe Par3 as a regulator of glioblastoma invasion and stem-cell renewal. Although Par3 does not directly regulate gene expression, transcriptomic analysis showed that loss of Par3, concomitantly with experiments in cell culture, contributes to down-regulation of self-renewal inducing factors and stem cell transcription factors (*SOX2*, *NESTIN*). On the other hand, Par3 silencing increases cell invasion. We explained the effect of Par3 on stem-cell renewal and invasiveness by the alteration of mitochondrial enzymes resulting in an increase of reactive oxygen species production. The increase of ROS production decreases the stem cell self-renewal capacity of the cells while increasing cell invasion.

Mechanistically, we show that Par3 co-localizes with mitochondria and affects mitochondrial ROS generating activity. However, the mode of interaction between Par3 and the mitochondria remains unknown. It would be of interest to investigate whether this interaction is direct, via proteins of the mitochondrial outer membrane, or if it involves additional partners, possibly proteins of the Par3/Par6/aPKC complex. In addition, it would be interesting to understand how the co-localization of Par3 with the mitochondria affects the activity of the electron transport chain and ATP production. Once located on the mitochondrial membrane, Par3 could possibly disturb the activity of the enzymes of the electron transport chain (NADH dehydrogenase, succinate dehydrogenase, ATP synthase). Another possibility is the disruption of the conformation or location of one of the five complexes involved in the electron transport chain by Par3. In addition, one can wonder about the fate of the excess of ROS in the cells. It is known that intracellular ROS regulate a large number of signaling pathways involved in various cellular processes and a variation of ROS concentration leads to an alteration of these pathways. In this study, the specific pathways affected by the loss of Par3-induced ROS production remain unknown. Finally, we conducted this study in glioblastoma cell lines derived from patients. It would be interesting to investigate whether the implication of Par3 occurs in an early or late stage of tumorigenesis, for instance by investigating the effect of Par3 silencing in neural progenitors.

The *LINC00707*, Par3 and glutamine deprivation projects cover different aspect of cancer cell biology including cell signaling, non-coding RNA and metabolism. In the future, it would be interesting to use transcriptomic data that we generated to develop a new project that connects these different fields. More and more non-coding RNAs are described as regulators of cell metabolism in cancer, diabetes or cardiovascular diseases (Mongelli et al., 2019). One example of a metabolic pathway regulated by non-coding RNAs in cancer would be the regulation of the glycolytic pathway of HCC in hypoxic conditions by the lncRNAs *RAET1K* (Zhou et al., 2020) and *Ftx* (Li et al., 2018b).

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