Induction of IncRNA NORAD accounts for hypoxia-induced chemoresistance and vasculogenic mimicry in colorectal cancer by sponging the miR-495-3p/ hypoxia-inducible factor-1α (HIF-1α)

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ABSTRACT

Hypoxic microenvironment represents the hallmark of solid tumors including colorectal cancer (CRC) and facilitates angiogenesis and chemoresistance, leading to poor prognosis. IncRNA NORAD acts as an oncogenic gene to orchestrate cancer progression by regulating cell proliferation and migration. Notably, an emerging study corroborates the elevation of NORAD during hypoxic conditions in pancreatic cancer. Nevertheless, its biological role in hypoxia-evoked CRC remains unclear. Herein, enhanced expression of NORAD and hypoxia-inducible factor-1α (HIF-1α) was validated in CRC tissues. Furthermore, there was a positive association between NORAD and HIF-1α in CRC tissues. CRC cells exposed to hypoxia exhibited a stronger ability to form vasculogenic mimicry (VM) and resistance to 5-fluorouracil (5-FU), concomitant with higher expression of NORAD. NORAD knockdown restrained hypoxia-induced VM formation and VM marker VE-cadherin expression. Moreover, knockdown of NORAD counteracted CRC cell resistance to 5-FU by decreasing cell viability and increasing cell apoptosis. Additionally, NORAD loss reduced hypoxia-induced HIF-1α expression and subsequent epithelial-mesenchymal transition (EMT) by increasing E-cadherin and inhibiting N-cadherin expression. Intriguingly, HIF-1α overexpression reversed NORAD downregulation-mediated inhibition of VM formation and 5-FU resistance. There was a low expression of miR-495-3p in CRC tissues. Furthermore, NORAD could act as a competitive endogenous RNA of miR-495-3p to regulate HIF-1α. Importantly, inhibition of miR-495-3p muted the efficacy of NORAD loss in hypoxia-induced EMT, VM, and chemoresistance. Thus, the current data highlight that NORAD knockdown may antagonize hypoxia-triggered CRC malignancy by suppressing VM formation and chemoresistance by sponging miR-495-3p/HIF-1α to regulate EMT, supporting a promising therapeutic target for refractory hypoxia in CRC.

Introduction

Colorectal cancer (CRC) is a common solid tumor and the world’s fourth most deadly tumor, accounting for over 700, 000 deaths annually [1]. According to the American Cancer Society statistics in 2020, CRC accounts for 9% of all new diagnoses of cancer cases in men and 8% in women globally [2]. Although the overall CRC frequency is declining since 1994 due to advancement in treatment options, the incidence of CRC in adolescents and adults younger than 50 years is particularly alarming, increasing by 2% annually [3]. Chemotherapy constitutes the standard strategy for CRC patients; however, approximately 40%–50% of CRC stage II and III relapse due to resistance to current chemotherapeutic drugs [4].

Hypoxia represents a hallmark of tumor microenvironment (TME) in majority of solid tumors that can adapt hypoxic condition to promote the plasticity and heterogeneity of tumors. Like many solid tumor, hypoxia microenvironment adaptations facilitate tumor cell resistance to chemotherapy, resulting in poor clinical outcomes [5,6]. Research on angiogenesis in tumors confirms the inseparable role of hypoxia in vasculogenic mimicry (VM) [7]. In contrast to traditional tumor angiogenesis, VM is comprised of tumor cells and can form tubule-like structures to support tumor continued growth by carrying nutrients and oxygen to tumor, contributing to its malignant progression. During these processes, tumor cells under hypoxic conditions induce the
activation of hypoxia inducible factor-1α (HIF-1α) that is a key responder adapted to intratumoral hypoxia. Accumulation evidence suggests that HIF-1α is the most critical regulator of cancer cell invasion, chemoresistance, and VM formation in tumor microenvironment as it affects various cellular processes, such as epithelial-mesenchymal transition (EMT) [5,8,9]. Therefore, HIF-1α has been recognized as an important cancer drug target [5,6,8]. Currently, given the key function of hypoxic microenvironment in tumor progression, targeting hypoxia has become a promising therapeutic strategy to overcome hypoxia-associated resistance in cancer therapy [6].

Increasing evidence supports the involvement of non-coding RNAs in tumor progression, particularly long noncoding RNAs (lncRNAs) [10]. LncRNAs are over 200 nucleotides long and comprise an emerging new class of endogenous non-coding RNAs along with miRNAs to regulate various pathophysiological processes, such as cell growth, invasion and differentiation [8,11]. LncRNA NORAD is a highly conserved and abundant lncRNA that can maintain genomic stability by sequestering PUMILIO proteins and assembling the critical topoisomerase complex [12,13]. For the past few years, NORAD has moved into the limelight within cancer research where its expression is dysregulated in multiple cancers, including CRC [14,15]. In endometrial cancer, NORAD orchestrates cancer progression by acting as a tumor suppressor [14]. Contradictorily, higher expression of NORAD is associated with advanced CRC and promotes cell migration, and invasion [15]. Furthermore, upregulation of NORAD contributes to cisplatin resistance in non-small-cell lung cancer [16]. Notably, a recent study substantiated the upregulation of NORAD after hypoxia in pancreatic cancer and enhanced hypoxia-induced EMT [17]. Moreover, NORAD enhances the angiogenic capacity of human umbilical vein endothelial cells under hypoxic conditions [18]. Moreover, NORAD exhaustion inhibits prostate cancer progression by competitively binding to miR-495-3p [19]. Intriguingly, miR-495-3p can serve as an inhibitor of CRC cell proliferation, migration, and invasion and acts as a chemoradiotherapy-sensitive gene in CRC patients [20,21]. Moreover, a recent study confirmed the downregulation of miR-495 in nonsmall cell lung cancer under hypoxia.

In the current study, bioinformatics tools predicted a potential target binding between lncRNA NORAD/miR-495-3p and miR-495-3p/HIF-1α. Therefore, we hypothesized that NORAD may exert a critical role in hypoxia-induced malignancy of CRC by sponging miR-495-3p to regulate HIF-1α. Herein, we aimed to elucidate the function of NORAD in hypoxia-induced VM formation and chemoresistance in CRC cells. We first determined the expression of NORAD and HIF-1α in CRC tissues and hypoxia-treated cells. Additionally, we further elaborated its function in VM formation and chemoresistance in CRC cells responding to hypoxia exposure and substantiated that NORAD knockdown antagonized hypoxia-triggered VM formation and chemoresistance by sponging miR-495-3p/HIF-1α to regulate EMT. Thus, these findings of our study provide a new therapeutic target for CRC chemoresistance.

Materials and methods

Patient specimens and ethics statement

Twenty-five human CRC tissues and corresponding paratumor specimens (13 males and 12 females, 37-65 years) were enrolled and obtained from patients during surgical procedure between January 2017 to November 2019 at Zhengzhou Central Hospital Affiliated to Zhengzhou University. None of the patients underwent the systemic anti-carcinoma intervention. The obtained specimens were promptly frozen in liquid nitrogen at −80°C until processed. All samples were obtained from patients that had written the informed consent, and experimental procedures were conducted according to the Declaration of Helsinki and approved by the Research Ethics Committee of Zhengzhou Central Hospital Affiliated to Zhengzhou University (No. SYXK (Yu) 2018–0005).

Cell culture and hypoxia simulation

Human CRC cell lines HCT116 and SW480 were purchased from the American Tissue Culture
Collection (Manassas, VA, USA). All cells were cultured in DMEM medium supplemented with 10% fetal bovine serum (Invitrogen, Carlsbad, CA, USA), and penicillin/streptomycin (100 U/ml). Under hypoxic conditions, cells were seeded in an incubator with a humidified atmosphere (5% CO₂, 1% O₂, and 94% N₂). For the normoxic environment, cells were placed in 5% CO₂ and 21% O₂. All cells were maintained at 37°C.

**Construction of recombinant HIF1α plasmid**

Total RNA was extracted using TRIzol reagent (Invitrogen) followed by the first-strand cDNA synthesis using the SuperScript II First Strand Synthesis System (Invitrogen) that was used to prepare HIF1α cDNA using PCR. Then, the pCDNA3.1(+) plasmids (Invitrogen) were digested and inserted by HIF1α cDNA to obtain the recombinant pCDNA-HIF1α plasmid according to previous study [17].

**Cell transfection**

The siRNA sequences for NORAD (si-NORAD) and negative control (si-NC) and oligonucleotide sequences of miR-495-3p mimics, miR-con, miR-495-3p inhibitor (anti-miR-495-3p), and inhibitor control (anti-NC) were provided by GenePharma Biotechnology (Shanghai, China). Cell transfection was performed as previously described [15,20]. Briefly, cells were seeded in a 6-well plate and grown till 70–80% confluency. Subsequently, cells were transfected with the above siRNA, miRNA mimics, inhibitors or recombinant HIF1α plasmids using Lipofectamine 3000 (Invitrogen). After 48 h, cells were collected to evaluate the effect of transfection on the expression of NORAD and miR-495-3p.

**qRT-PCR**

Total RNA from CRC cells and tissues was isolated using TRIzol Reagent (Invitrogen) and then used to prepare cDNA. Subsequently, RT-PCR was conducted to analyze gene transcription levels according to the protocols of the SYBR Premix Ex TaqTM II Kit (Takara, Japan) [17]. The reaction conditions were as follows: 95°C, 10 min denaturation; 95°C, 15s; 60°C, 1 min; 40 cycles. For normalization, β-actin was used as an internal reference for mRNA (NORAD, HIF1α, VE-cadherin, E-cadherin, and N-cadherin). U6 was used as an internal control for miR-495-3p transcript. All primer sequences were shown in Table 1 and purchased from Sangon Biotech (Shanghai, China). The relative RNA abundance was quantified using the 2^ΔΔCt method [15,17,22].

**Three-dimensional cell culture**

The formation of tube-like vascular channels was analyzed using three-dimensional Matrigel (BD Biosciences, San Jose, CA, USA) in vitro, as previously described [23]. Briefly, cells under various treatments were trypsinized and re-suspended. Before loading CRC cells, Matrigel (0.1 mL/well) was added to each well of plates and solidified at 37°C. Then, cells at a density of 1×10⁵/mL were seeded on plates coated with Matrigel and incubated under normoxic or hypoxic conditions. Approximately 24 h later, tube-like structures in each well were taken under a microscope at 200× magnification, and the degree of tube formation was evaluated by quantifying the number in five random fields without overlap.

**CCK-8 assay for cell viability**

Viability of CRC cells was assessed using the CCK-8 assay [9]. Briefly, CRC cells were treated with the indicated condition under 5-FU incubation. Subsequently, 10 µl of CCK-8 solution (Nanjing Jiancheng Bioengineering Institute, Nanjing, China) was added and the reaction was maintained at 37°C for 4 h. Optical density at 450 nm was captured using

| Gene       | Primer sequence (5’-3’)                  |
|------------|------------------------------------------|
| NORAD      | Forward: 5’-TGGTGTCCGAGAGAGAAATG-3’      |
|            | Reverse: 5’-CCTCCTTCAAAACGCCTCCT-3’      |
| HIF1α      | Forward: 5’-GTCGCAACATGGAAGTTTG-3’       |
|            | Reverse: 5’-GACAGTGTAGTTGTTTCT-3’        |
| VE-cadherin| Forward: 5’-GTTCACCTTCTGCAGATTGATG-3’    |
|            | Reverse: 5’-GATGGTGAGGAATGTAAG-3’        |
| E-cadherin | Forward: 5’-CTTCTGCTGATCCTGATGATG-3’     |
|            | Reverse: 5’-TCTTCTTCTCCTCCACCTCTT-3’     |
| N-cadherin | Forward: 5’-GGATGAAAAAACCGGGATGAA-3’     |
|            | Reverse: 5’-TCTTCTTCTCCACCTCCTTCT-3’     |
| β-actin    | Forward: 5’-CCTCCTTCCAGCCTCTTCCT-3’      |
|            | Reverse: 5’-GATACGGTTTGGCAGGATG-3’       |
| miR-495-3p | Forward: 5’-AAAGAACAUUGUGACACUUCCUU-3’   |
|            | Reverse: 5’-AAAGUGCCAGCAUUUGUUUUU-3’     |
| U6         | Forward: 5’-CTGCCCTCGCGACCA-3’            |
|            | Reverse: 5’-AACGCTTCAGAATTTTGCGT-3’      |
a spectrophotometer (Bio Rad, Hercules CA, USA). Three replicates for each group were performed in parallel.

**Apoptotic detection using flow cytometer**

Cell apoptosis was analyzed by flow cytometry according to a previous study [20]. In brief, after treatment with si-NORAD, HIF1α, or anti-miR-495-3p together with 5-FU, cells under hypoxic conditions were collected and rinsed with pre-cooled PBS. Then, binding buffer was added to resuspend cells, followed by incubation with 10 μl of Annexin V-FITC and 5 μl of PI (Beyotime, Shanghai, China). All procedures were conducted according to the protocols provided by the Annexin-V-FITC Apoptosis Detection Kit. After 15 min incubation, cell apoptotic rate was analyzed using a FACScan flow cytometer (BD Biosciences, San Jose, CA, USA).

**Western blotting**

The treated cells were enrolled and lysed to extract total protein using the RIPA extraction reagent (Beyotime). Protein concentration was quantified using the BCA kit (Beyotime). Standard Western blotting assay was conducted as described previously [17]. Briefly, equal amounts of protein were isolated by 12% SDS-PAGE, followed by transferring to the PVDF member via semi-dry electrophoresis. After blocking for 2 h at room temperature, the membranes were probed with primary antibodies against human HIF1α (1:1000), E-cadherin (1:2000) and N-cadherin (1:10,000) (all from Abcam, Cambridge, MA, USA) at 4°C overnight. After rinsing, membranes were further treated with horseradish peroxidase (HRP)-conjugated secondary antibodies for 2 h at room temperature. The protein bands were then developed using ECL reagent (Beyotime) and quantified using an Image J software.

**Prediction of lncRNA-miRNA-mRNA associations**

Starbase (http://starbase.sysu.edu.cn) was used to predict the correlation between lncRNA NORAD and miR-495-3p. The target binding site between miR-495-3p and HIF1α was predicted by Targetscan (http://www.targetscan.org/vert_71/).

**Dual-Luciferase reporter assay**

The correlation between lncRNA NORAD, miR-495-3p and HIF1α was elucidated using the Dual-Luciferase reporter assay [17]. Briefly, the 3'UTR sequences of NORAD or HIF1α containing wild-type (WT) or mutant (Mut) binding sites of miR-495-3p were cloned into a luciferase reporter plasmid pGL3 (Promega Corporation, Madison, WI, USA). Then, the constructed WT-NORAD, WT-HIF1α, Mut-NORAD, or Mut-HIF1α reporter plasmids were transfected into cells together with miR-495-3p mimics or miR-con. After 48 h of reaction, the dual-luciferase reporter assay system (Promega) was applied to evaluate luciferase activity by normalizing to Renilla luciferase activity.

**RNA immunoprecipitation (RIP) assay**

The endogenous relationship between lncRNA NORAD and miR-495-3p was validated using a Magna RIP™ RNA-Binding Protein Immunoprecipitation Kit (Millipore, Bedford, MA, USA) [19]. In brief, NORAD-wt or NORAD-Mut was inserted into pcDNA3.1-MS2 vectors to construct pcDNA3.1-MS2-NORAD-wt or pcDNA3.1-MS2-NORAD-Mut plasmids. Then, the above prepared plasmids were co-transfected with pMS2-GFP into HCT116 cells using Lipofectamine 2000 (Invitrogen). Approximately 48 h later, cells were lysed and incubated with RIP buffer containing magnetic beads conjugated with human anti-Ago2 antibody or IgG antibody. The utilization of IgG was used as a control for RIP procedure. Ultimately, the coprecipitated RNAs were subjected to qRT-PCR.

**Statistical analysis**

Data are shown as mean ± S.D. and represent at least three independent experiments and were analyzed using SPSS 19.0 software. Student’s t-test was utilized for two-group comparisons. For comparison between multiple groups, one-way ANOVA with post-hoc Student-Newman-Keuls tests was used. Pearson’s correlation coefficient analysis was applied to analyze the potential correlations between groups. P-value <0.05 was an indicator of a statistical significance.
Results

Elevated expression of lncRNA NORAD and HIF-1α in CRC tissues

To discern the potential function of lncRNA NORAD in CRC progression, we determined its expression in CRC tissues. Noticeably, NORAD was prominently increased in CRC tissues relative to the paratumor samples (Figure 1(a)). Moreover, in contrast to non-tumor tissues, higher expression of HIF-1α was also observed in CRC tissues (Figure 1(b)). Importantly, a positive association between NORAD and HIF-1α was validated in CRC tissues (Figure 1(c)).

Hypoxia enhances CRC cell malignancy and induces lncRNA NORAD expression

Tube formation assay confirmed that exposure to hypoxic conditions enhanced tube-like structure VM formation in CRC cells (HCT116 and SW480 cells) relative to the normoxic environment (Figure 1(d)). Furthermore, HCT116 cells exposed to hypoxia exhibited higher cell viability under 5-FU incubation than those incubated under normoxic conditions (Figure 1(e)). Consistently, SW480 cells exhibited stronger resistance to 5-FU when cells were incubated under hypoxic conditions (Figure 1(f)). These data indicate that hypoxia enhances VM and chemoresistance of CRC cells. Intriguingly, higher expression of NORAD was substantiated in hypoxic exposure than normoxic exposure (Figure 1(f)).

Knockdown of lncRNA NORAD counteracts hypoxia-induced VM formation

To further elucidate the potential role of NORAD in hypoxia-evoked malignance in CRC, si-NORAD was transfected into HCT116 (Figure 2(a)) and SW480 (Figure 2(b)) to mute NORAD expression. Moreover, qRT-PCR confirmed that transfection with si-NORAD also restrained NORAD expression in hypoxia-treated CRC cells (Figure 2(c,d)). Importantly, hypoxia-induced VM formation was

Figure 1. Expression of NORAD and HIF-1α in CRC tissues and hypoxia-treated CRC cells. (a, b) The expression of NORAD (a) and HIF-1α (b) were analyzed by qRT-PCR. (c) Correlation between NORAD and HIF-1α in CRC tissues. (d) CRC cells (HCT116 and SW480) were exposed to hypoxia or normoxia. Then, tube formation was assessed by Three-dimensional culture. (e, f) CCK-8 assay was performed to detect cell viability in response to 5-FU treatment under hypoxic conditions. (g) The expression of NORAD in hypoxia-stimulated CRC cells was detected by qRT-PCR. *P < 0.05.
abrogated after NORAD knockdown in HCT116 (Figure 2(e)) and SW480 (Figure 2(f)) cells. Concomitantly, hypoxia elevated VM marker VE-cadherin expression, which was overturned after NORAD knockdown (Figure 2(g)).

**IncRNA NORAD over-turns hypoxia-induced 5-FU resistance in CRC cells**

We further investigated the function of NORAD knockdown in hypoxia-induced chemoresistance, and corroborated that treatment with 5-FU suppressed HCT 116 cell viability under hypoxic conditions (Figure 3(a)). Noticeably, si-NORAD transfection further decreased cell viability under hypoxic exposure relative to that in the 5-FU groups (Figure 3(a)). Similarly, loss of NORAD under hypoxic environment also aggravated the inhibitory effects of 5-FU on SW480 cell viability (Figure 3(b)). Moreover, 5-FU treatment increased HCT116 (Figure 3(c)) and SW480 (Figure 3(d)) apoptosis upon hypoxic condition, which were further increased after NORAD knockdown. These findings suggest that NORAD silencing sensitizes CRC cells to 5-FU.
Enhancement of IncRNA NORAD expression affects hypoxia-induced HIF-1α signaling to regulate VM formation and 5-FU resistance

The previous observation in the current study corroborated the positive association between IncRNA NORAD and HIF-1α in CRC tissues. We therefore further explored the involvement of NORAD in HIF-1α signaling in CRC. As shown in Figure 4(a), hypoxia exposure strikingly up-regulated HIF-1α mRNA levels, which was suppressed after NORAD knockdown. Similar changes in HIF-1α protein levels were observed in HCT116 cells (Figure 4(b)). Furthermore, hypoxia induced EMT by decreasing E-cadherin mRNA (Figure 4(c)) and protein expression (Figure 4(d)) and increasing N-cadherin expression (Figure 4(c,d)). Notably, si-NORAD transfection reversed hypoxia-induced expression of E-cadherin and N-cadherin. Of note, a functional assay substantiated that overexpression of HIF-1α by pcDNA-HIF-1α recombinant vector transfection muted the inhibitory efficacy of NORAD cessation in hypoxia-induced VM (Figure 4(e)) and VE-cadherin transcripts (Figure 4(f)). Additionally, HIF-1α elevation under hypoxic conditions attenuated cell response to 5-FU relative to NORAD-loss groups by increasing cell viability (Figure 4(g)) and decreasing apoptosis (Figure 4(h)).

IncRNA NORAD acts as a miR-495-3p sponge to regulate HIF-1α

Convincing evidence has supported that IncRNAs regulate cancer progression by acting as competing endogenous RNAs to modulate miRNA expression and function. The bioinformatics data Starbase predicted a potential target binding between IncRNA NORAD and miR-495-3p (Figure 5(a)). Compared to non-tumor tissues, lower expression of miR-495-3p was determined in CRC tissues (Figure 5(b)). Furthermore, a negative correlation between NORAD and miR-495-3p was demonstrated in CRC tissues (Figure 5(c)). Further luciferase reporter
assay confirmed that co-transfection with WT-NORAD and miR-495-3p obviously decreased luciferase activity, indicating the direct binding of NORAD and miR-495-3p (Figure 5(d)). AGO2 immunoprecipitation analysis also corroborated that the AGO2 antibody could pull down both endogenous NORAD and miR-495-3p (Figure 5(e)), further confirming their binding potential. Targetscan software confirmed a potential binding between miR-495-3p in the 3’ UTR of HIF-1α (Figure 5(f)). Moreover, miR-495-3p overexpression dramatically mitigated HIF-1α transcription (Figure 5(g)). Luciferase reporter analysis showed that miR-495-3p could directly target HIF-1α.

**Figure 4.** NORAD affects hypoxia-induced HIF-1α signaling to regulate VM formation and 5-FU resistance in CRC cells. (a, b) After transfection with si-NORAD, the mRNA (a) and protein levels (b) of HIF-1α under hypoxia-treated HCT116 cells were determined. Then, the transcript (c) and protein (d) expression of E-cadherin and N-cadherin were further analyzed. (e-h) Following treatment with si-NORAD and HIF-1α recombinant vector, cells were exposed to hypoxia conditions. After that, VM formation (e), VE-cadherin transcript (f), 5-FU-induced cell viability (g) and apoptosis (h) were analyzed. *P < 0.05 vs. control group, †P < 0.05 vs. hypoxia-treated group.

*IncRNA NORAD involves hypoxia-induced VM and chemoresistance by sponging miR-495-3p/HIF-1α*

We further investigated the involvement of miR-495-3p/HIF-1α in NORAD function in hypoxia-induced CRC cell characteristics. As shown in Figure 6(a,b), NORAD cessation restrained HIF-1α, N-cadherin expression under hypoxic conditions but increased E-cadherin expression. However, miR-495-3p knockdown antagonized NORAD loss-mediated HIF-1α, E-cadherin, and N-cadherin expression under hypoxic conditions (Figure 6(a,b)). In addition, knockdown of NORAD attenuated hypoxia-induced
VM formation (Figure 6(c)) and VE-cadherin expression (Figure 6(d)), whereas miR-495-3p loss muted the above efficacy of NORAD. Moreover, downregulation of NORAD further aggravated 5-FU-evoked reduction in cell viability (Figure 6(e)) and enhancement in cell apoptosis (Figure 6(f)). Nevertheless, loss of miR-495-3p reversed NORAD-mediated 5-FU resistance by increasing cell viability and reducing apoptosis (Figure 6(e,f)).

**Discussion**

Colorectal cancer (CRC) is one of the most prevalent malignancies with an increasing incidence worldwide, especially in people aged <50 years [3]. Being a common solid tumor, a hypoxic microenvironment is the most typical feature of CRC that promotes a more aggressive phenotype [5,24]. In the present research, we confirmed the upregulation of IncRNA NORAD in CRC tissues, similar to previous findings [15,25]. Analogously, a previous study confirmed the up-regulation of NORAD in serum of CRC patients that was positively related with CRC metastasis and patients' poor prognosis [23,25]. Moreover, NORAD knockdown inhibits CRC cell proliferation, migration, tumor growth, and stem-like cell invasion [25,26]. However, its role in tumor microenvironment remains elusive. Intriguingly, we substantiated the upregulation of NORAD in CRC cells upon hypoxia exposure. Concomitantly, NORAD expression was positively associated with HIF-1α expression in CRC tissues. Thus, these findings suggest that NORAD may exert a potential role in hypoxia-evoked carcinogenesis in CRC.

Angiogenesis is a predominant and essential process that ensures blood supply for tumor survival, growth, and metastasis. Vasculogenic mimicry (VM) is a recently revealed angiogenetic
process in malignant tumors. Unlike traditional endothelial vessels in tumors, VM is defined as the capability of tumor cells to mimic vasculogenic networks. Generation of intratumoral oxygen gradients by hypoxia results in the plasticity and heterogeneity of tumor cells to express vascular cell markers and line vasculature to form VM [27,28]. A large body of evidence indicates that hypoxia enhances VM formation, resulting in tumor invasion, growth, and poor patient prognosis [7,27,29]. The current data confirmed that NORAD knockdown antagonized hypoxia-induced VM formation and VM marker VE-cadherin expression in CRC cells. Intriguingly, previous findings corroborated that downregulation of NORAD decreased human umbilical vein endothelial cell viability and angiogenic ability under hypoxic conditions [18]. Therefore, NORAD may serve as an oncogenic target for tumor angiogenesis in CRC.

Chemotherapy is a main and standard treatment for CRC patients, in particular 5-fluorouracil (5-FU). Nevertheless, clinical drug resistance constitutes the primary obstacle for CRC treatment, leading to tumor recurrence and poor clinical outcomes [30,31]. Adaptation to hypoxic microenvironment leads to tumor chemoresistance [5,24]. The current study confirmed the upregulation of NORAD in CRC cells exposed to hypoxia. Importantly, loss of NORAD sensitized CRC cells to 5-FU by decreasing cell viability and increasing cell apoptosis, indicating the key roles of NORAD in 5-FU resistance in CRC. Noticeably, the expression of NORAD is elevated in cisplatin-resistant non-small-cell lung cancer cells, contributing to chemoresistance [16].

Figure 6. NORAD regulates hypoxia-induced VM and chemoresistance by sponging miR-495-3p/ HIF-1α signaling. HCT116 cells under hypoxia were treated with si-NORAR, anti-miR-495-3p. Then, the protein levels of HIF-1α, E-cadherin, N-cadherin were determined by Western blotting (a, b). Then, VM formation (c) and VE-cadherin transcript (d) were further explored. (e, f) Cell resistance to 5-FU was evaluated by determining cell viability (e) and apoptosis (f). *P < 0.05 vs. hypoxia-treated group. †P < 0.05 vs. hypoxia and si-NORAD-treated group.
Next, we found that NORAD downregulation reduced HIF-1α expression and there was a positive association between NORAD and HIF-1α expression in CRC tissues. As a proverbial hypoxic response factor, HIF-1α elicits the indispensable role in tumor hypoxic microenvironment and is involved in multiple aspects of tumor progression, including cancer growth, angiogenesis, and chemoresistance [24,32]. It is known that induction of HIF-1α upon hypoxia exposure drives EMT that is closely linked to chemoresistance and VM formation in cancer [28,33]. In this study, knockdown of NORAD attenuated hypoxia-induced HIF-1α and subsequent EMT by increasing E-cadherin expression and reducing N-cadherin expression. Of note, overexpression of HIF-1α reversed the inhibitory effects of NORAD loss on hypoxia-induced VM formation and 5-FU resistance. Thus, hypoxia-induced NORAD up-regulation that might contribute to hypoxia-evoked VM and chemoresistance by affecting HIF-1α-mediated EMT process. Noticeably, accumulating evidence indicates that HIF-1α has been implicated in driving EMT in cancer by regulating several key pathways, such as Twist, Snail and Forkhead box M1 (FoxM1) [34,35]. However, how hypoxia induces NORAD expression in CRC? Furthermore, the mechanism by which HIF regulates EMT remains unclear. These questions will be further elucidated in our next plan.

Acceptably, IncRNAs often exert their roles by serving as the competitive endogenous RNA (ceRNA) to sponge miRNAs in various cancers [11,30,36]. For instance, NORAD promotes colorectal cancer stem-like cell invasion by functioning as a miR-203a sponge [26]. Intriguingly, online software StarBase predicted a potential binding site for miR-495-3p in this research. Similar to a previous study [20], miR-495-3p expression was decreased in CRC tissues. In addition, we also observed a negative correlation between NORAD and miR-495-3p in CRC tissues. Importantly, the current data indicated that NORAD could function as competitive endogenous RNA to regulate HIF-1α expression by directly sponging miR-495-3p. Of note, miR-495 can act as a suppressor in CRC cell proliferation, migration, and invasion [20,37]. More interestingly, previous evidence supported miR-495 as a chemoradiotherapy-sensitive gene in CRC patients [21]. Additionally, miR-495-3p is also involved in VM formation in glioma [38]. Noticeably, the present data highlighted that blockage of miR-495-3p expression overturned the NORAD loss-mediated inhibition of HIF-1α-EMT signaling, and subsequent VM formation and 5-FU resistance in CRC cells under hypoxic conditions. Conclusion

In summary, NORAD expression was elevated in CRC tissues and hypoxia-treated CRC cells. More importantly, NORAD knockdown antagonized hypoxia-induced VM formation and chemoresistance to 5-FU by sponging miR-495-3p to regulate HIF-1α-EMT signaling. The current findings highlight a new mechanism involved in how NORAD contributes to hypoxia-driven CRC malignancy. Consequently, this research may provide a promising therapeutic target for refractory hypoxic tumors, including CRC. However, what is the detailed mechanism of hypoxia up-regulating expression of NORAD? Furthermore, the present findings just indicate the critical role of NORAD knockdown in attenuating hypoxia-evoked CM and chemoresistance in vitro; nevertheless, whether targeting NORAD exerts the ideal anti-CRC efficacy in vivo. Does miR-495-3p-mediated HIF-1α-EMT signaling account for NORAD efficacy in vivo? All of these questions will be elaborated in our next plan.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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Data availability statement

All data generated or analyzed during this study are included in this published article.

Author contributions

Huili Wu: Conceptualization; Data curation; Formal analysis; Investigation; Methodology; Project administration; Resources; Software; Supervision; Validation; Visualization. Lei Zhang:
Data curation; Investigation; Methodology; Project administration; Resources; Software; Supervision; Validation; Visualization; Roles/Writing - original draft. **Yong Zhang**: Data curation; Investigation; Methodology; Formal analysis; Data curation; Resources; Software; Supervision; Validation; Writing - review & editing. **Xingguo Xiao**: Data curation; Methodology; Investigation; Formal analysis; Data curation; Supervision; Validation; Resources; Software. **Feifei Chu**: Data curation; Software; Validation, Methodology; Formal analysis. **Li Zhang**: Data curation; Methodology; Investigation; Software; Validation, Formal analysis.

**Ethics approval and consent to participate**

Experiments involved in Human Participants were approved by the Research Ethics Committee of Zhengzhou Central Hospital Affiliated to Zhengzhou University and performed according to the Declaration of Helsinki.

**Consent to participate**

Informed consent was collected from all participants.

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