MicroRNA-345 inhibits hepatocellular carcinoma metastasis by inhibiting YAP1

HUI ZHANG1*, HUI LIU2* and HUAQIANG BI2

Departments of 1Radiology and 2Hepatobiliary Surgery, Southwest Hospital, The Third Military Medical University, Chongqing 400038, P.R. China

Received December 12, 2016; Accepted May 15, 2017

DOI: 10.3892/or.2017.5772

Abstract. MicroRNAs (miRNAs) play critical roles in hepatocellular carcinoma (HCC). However, the expression and biological function of miR-345 in HCC remain unknown. The present study demonstrated that miR-345 expression was reduced in HCC tissues and cell lines. Decreased miR-345 expression was associated with unfavorable clinical features and poor prognosis. In vitro functional assays showed that miR-345 overexpression inhibited the migration and invasion of MHCC-97H cells while miR-345 knockdown promoted metastatic behavior of Hep3B cells. In vivo experiments showed that miR-345 overexpression inhibited while miR-345 knockdown promoted lung metastasis of HCC cells in nude mice. Mechanically, YAP1 was identified to be the downstream target of miR-345 in HCC cells. YAP1 overexpression reversed the inhibitory effects of miR-345 on MHCC-97H migration and invasion, while YAP1 knockdown reduced the promoting effects of miR-345 knockdown on the metastatic behavior of Hep3B cells.

Introduction

Hepatocellular carcinoma (HCC), a lethal disease affecting millions of people worldwide, is the second leading cause of cancer-related death (1). Patients with HCC in late stage have poor prognosis, with the 5-year survival rate less than 40% (2). The main reason for the poor survival rate is the occurrence of local and distal metastasis of HCC. Currently, the molecular mechanisms for HCC metastasis largely remain unknown. Investigating the mechanisms of HCC metastasis is important for improving the prognosis of HCC patients.

Materials and methods

Clinical tissues. HCC tissues and matched adjacent non-tumor tissues were collected from HCC patients who received surgical treatment in the Department of Hepatobiliary Surgery in Southwest Hospital of the Third Military Medical University during 2004 and 2012. All these patients had pathologically confirmed HCC. The clinical samples from these HCC patients were kept at -80°C immediately after the surgical resection. Ethics protocol for experiments involving HCC patient samples was approved by the Institutional Research Ethics Committee of Department of Hepatobiliary Surgery in Southwest Hospital of the Third Military Medical University. The demographic and clinicopathological data of 85 patients are shown in Table I.
Cell culture of HCC cells. HCC cell lines including Hep3B, Huh7, MHCC-97H and immortalized human hepatocyte LO2 were from the Cell Bank of Chinese Academy of Sciences (Shanghai, China). HCC cells were cultured in Dulbecco's modified Eagle's medium (DMEM; Gibco, Grand Island, NY, USA) along with 10% fetal bovine serum (fBS; Gibco). Cultured HCC cells were kept at 37˚C in a cell incubator in humidified atmosphere with 5% CO₂.

Transfection of HCC cells. miR-345 mimic (HmiR0210-MR03; GeneCopoeia, Inc., Guangzhou, China) and control vector (CmiR0001-MR03; GeneCopoeia) were transfected into MHCC-97H cells while miR-345 inhibitor (HmiR-AN0437-AM01; GeneCopoeia) and negative control vector (CmiR-AN0001-SN; GeneCopoeia) were transfected into Hep3B cells. YAP1 overexpression plasmid and the control plasmid were transfected into Hep3B cells overexpressing miR-345 while YAP1 siRNA and scramble siRNA were transfected into MHCC-97H cells with miR-345 knockdown. Cell transfection of HCC cells were carried out in 6-well plates with Lipofectamine 2000 (Invitrogen, Waltham, MA, USA). Cells after transfection were collected for western blot analysis, qRT-PCR, wound healing assay, Transwell assay and in vivo experiments.

Quantitative real-time reverse transcription-PCR (qRT-PCR). RNA was extracted from clinical tissues and HCC cells with TRIZol and RNeasy Mini kit (Qiagen). Reverse transcription reactions and quantitative real-time PCR were performed for these extracted RNA with the Transcriptional First Strand cDNA Synthesis kit and SYBR-Green PCR Master Mix (Applied Biosystems, Foster City, CA, USA). Primers for miR-345 and U6 were obtained from GeneCopoeia. U6 was used as the internal controls for miR-345.

Western blot analysis. The protein from HCC tissues and HCC cells were extracted with RIPA buffer and subjected to concentration measurements before loading into the 4-20% SDS-PAGE gels. After gel running, the separated proteins in SDS-PAGE gels were transferred to polyvinylidene fluoride membrane. These membranes were incubated with antibodies of YAP1 (1:1,000; Cell Signaling Technology, Danvers, MA, USA) and GAPDH (1:2,000; Santa Cruz Biotechnology, Santa Cruz, CA, USA) overnight at 4˚C. After incubating with secondary antibodies (1:3,000; Santa Cruz Biotechnology), the protein signals were detected using ECL reagents (Amersham Biosciences Corp., Piscataway, NJ, USA).

Transwell assays. Transwell assays were performed to evaluate the migration and invasion ability of HCC cells. Generally, HCC were suspended in 200 µl basal DMEM and seeded into the upper chamber. The lower chambers were filled with 600 µl DMEM with 20% fBS as chemoattractant. Forty-eight hours later, HCC cells migrated or invaded through the transwell membranes were stained with crystal violet. The numbers of the migrated or invaded HCC cells were counted.

Luciferase assay. 3'-UTR of YAP1 containing the binding sequence for miR-345 or the mutated 3'-UTR of YAP1 was used to construct the wild-type YAP1-3'UTR or mutant YAP1-3'UTR, respectively. HCC cells in 12-well plates were transfected with wild-type or mutant 3'-UTR of YAP1 along with miR-345 mimic or inhibitor. After co-transfection, the luciferase activity for the wild-type or mutant YAP1 3'-UTR was measured through luciferase reporter assay (Promega, Madison, WI, USA).

In vivo metastasis assay. To evaluate in vivo metastatic capacity of HCC cells, we performed tail vein injection in nude mice. HCC cells transfected with negative control vector or miR-345 inhibitor were injected into nude mice through tail veins. H&E staining was performed for the lungs of nude mice 8 weeks after tail vein injection. All animal experiments were approved by the Animal Care Committee of the Third Military Medical University.

Statistical analysis. The data are shown as the mean ± standard error (SE) and the statistical analysis was performed with the GraphPad. Student's t-test, Chi-square, correlation analysis and Kaplan-Meier analysis were used in the present study. P<0.05 was regarded as statistically significant.

Results

The expression of miR-345 is reduced in HCC tissues and cells. Eighty pairs of clinical tissues were collected to determine miR-345 expression level in HCC. qRT-PCR showed that HCC tissues had significantly decreased expression level of miR-345 compared with the matched non-tumor tissues.
For patients with metastasis, the level of miR-345 was significantly lower than that in those without metastasis. Furthermore, compared with patients in TNM stage of I-II, those in TNM stage of III-IV had significantly reduced level of miR-345. Lastly, we evaluated the expression level of miR-345 in HCC cell lines. Compared with that in LO2 cells, the level of miR-345 in HCC cell lines was significantly reduced (P<0.01; Fig. 1D).

Patients with low miR-345 level had relatively poor clinicopathological features and prognosis. Then, we examined whether decreased miR-345 level was associated with the clinicopathological features and prognosis of HCC patients. As shown in Table I, decreased miR-345 level was associated with metastasis (P<0.01) and TNM stage (P<0.01) of HCC patients. Furthermore, we performed survival analysis for miR-345. Patients with low level of miR-345 had in Kaplan-Meier analysis relatively lower level of miR-345 and significantly decreased rate of overall survival (Fig. 2A; P<0.01) and disease-free survival (Fig. 2B; P<0.01).

miR-345 inhibits the metastatic ability of HCC cells in vitro. As shown in Fig. 1D, among all HCC cells, Hep3B cells had the highest level of miR-345 while MHCC-97H cells had the lowest level of miR-345. We performed overexpression of miR-345 in MHCC-97H cells and knockdown of miR-345 in Hep3B cells. As shown in Fig. 3A, miR-345 mimic significantly increased the level of miR-345 in MHCC-97H cells (P<0.05; Fig. 3A). Subsequently, overexpression of miR-345 reduced the migration (P<0.05; Fig. 3B) and invasion of MHCC-97H cells, as suggested by wound healing assay and Transwell assay. On the contrary, miR-345 inhibitor significantly reduced miR-345 level in Hep3B cells (P<0.05; Fig. 4A), and led to increased migration (P<0.05; Fig. 4B) and invasion (P<0.05; Fig. 4C) of Hep3B cells.

miR-345 inhibits the lung metastasis of HCC cells in nude mice. To further confirm the in vitro effects of miR-345 on the metastatic behavior of GC cells, we performed tail vein

---

Figure 1. miR-345 expression level is decreased in HCC and associated with poor clinicopathological features. (A) miR-345 expression was decreased in HCC tissues (N=87) compared with the adjacent non-tumor tissues (N=87). (B) miR-345 expression was significantly lower in patients with metastasis than that in patients without metastasis. (C) miR-345 expression was significantly lower in patients of TNM I-II than that in patients of TNM III-IV. (D) The expression of miR-345 was decreased in HCC cell lines (Hep3B, Huh7 and MHCC-97H) compared with LO2 cells; n=3. T-test was performed for statistical analysis. *P<0.05.

Figure 2. miR-345 is associated with poor survival of HCC patients. (A) HCC patients with low level of miR-345 had significantly decreased overall survival rate. (B) HCC patients with low level of miR-345 had significantly decreased disease-free survival rate.
ZHANG et al.: EXPRESSION AND FUNCTION OF microRNA-345 IN HEPATOCELLULAR CARCINOMA

As shown in Fig. 5A, overexpression of miR-345 inhibited the metastatic ability of MHCC-97H cells (P<0.05; Fig. 5A), and the number of metastatic nodules in the lung of nude mice was significantly reduced in miR-345 overexpression group (P<0.05; Fig. 5B). On the other hand, knockdown of miR-345 promoted the lung metastasis of Hep3B cells and increased lung metastatic nodules in nude mice (P<0.05; Fig. 5C and D).

YAP1 is the downstream target of miR-345 in GC cells. To further elucidate the underlying mechanisms for the biological functions of miR-345, we used online database to search for the downstream target of miR-345. Among numerous predicted downstream targets, YAP1 is an attractive one since YAP1 is a well-known oncogenic protein in HCC (15,16). 3'-UTR of YAP1 contained the binding sequences for miR-345 as shown in Fig. 6A. Then, we performed luciferase assay to evaluate whether miR-345 could interact with the 3'-UTR of YAP1. Overexpression of miR-345 significantly reduced the luciferase activity of wild-type YAP1 3'-UTR (P<0.05; Fig. 6B) but had no effect on that of mutant YAP1 3'-UTR. In addition, inhibition of miR-345 increased the luciferase activity of wild-type YAP1 3'-UTR (P<0.05; Fig. 6B) but had no effect on that of mutant YAP1 3'-UTR, indicating that miR-345 can interact with YAP1 3'-UTR through the binding sequences. Furthermore, overexpression of miR-345 inhibited the expression of YAP1 in MHCC-97H cells (P<0.05; Fig. 6C). In addition, inhibition of miR-345 significantly enhanced the expression of YAP1 in Hep3B cells (P<0.05; Fig. 6D).

YAP1 is critical for the biological functions of miR-345 in HCC. After demonstrating that YAP1 was under the regulation of miR-345 in HCC, we further investigated whether YAP1 could mediate the biological function of miR-345 in HCC. YAP1 overexpression vector significantly increased YAP1 expression in MHCC-97H cells overexpressing miR-345 (P<0.05; Fig. 7A). Overexpression of YAP1 in MHCC-97H cells overexpressing miR-345 abrogated the inhibitory effect of miR-345 overexpression on migration (P<0.05; Fig. 7B) and
invasion (P<0.05; Fig. 7C) of MHCC-97H cells. YAP1 specific siRNA significantly reduced the YAP1 expression in Hep3B cells with miR-345 knockdown (P<0.05; Fig. 8A). Knockdown of YAP1 in Hep3B cells with miR-345 knockdown prevented the promoting effects of miR-345 inhibition on the migration (P<0.05; Fig. 8B) and invasion (P<0.05; Fig. 8C) of Hep3B cells.

**Discussion**

Molecular mechanisms are under intensive investigation to identify novel therapeutic targets for cancer treatment. miRNAs are a group of critical players in the development and progression of human cancers (5,7,8,17-19). Numerous studies have confirmed that miRNAs were actively involved in the metastatic processes of cancer cells (8).

Among numerous miRNAs, miR-345 has been identified as a promising tumor associated miRNA. In NSCLC (12), prostate (13) and pancreatic cancer (14), miR-345 played tumor suppressive roles by affecting apoptosis, proliferation and metastasis. However, miR-345 was found to play oncogenic role in rectal cancer by regulating drug resistance (20).

In the present study, we found that miR-345 was decreased in HCC tissues and cell lines. Decreased miR-345 expression was associated with the poor prognosis of HCC patients. Both in vitro functional assays and in vivo experiments demonstrated that miR-345 inhibited the migration and invasion of HCC cells. The above indicate that miR-345 played a significant role in the metastasis of HCC cells.
tumor suppressive role in HCC by regulating cell migration and invasion. miR-345 can potentially serve as a promising biomarker for HCC.

YAP1 is a well-known oncogenic protein in human cancer (21). In HCC, YAP1 was found to be overexpressed and could promote the growth and metastasis of HCC cells (22). In the present study, we confirmed that YAP1 was the downstream target of miR-345 supported by the data of luciferase assay and western blot analysis. Furthermore, YAP1 overexpression could abrogate the inhibitory effects of miR-345 on the HCC cell migration and invasion while YAP1 knockdown reversed the promoting effect of miR-345 inhibition on HCC cells migration and invasion, indicating that YAP1 was not only the downstream target of miR-345 but also the mediator of the biological functions of miR-345 in HCC.

In summary, the present study demonstrated that miR-345 was decreased in HCC tissues and cell lines. Decreased level of miR-345 was associated with decreased survival rate of HCC patients. miR-345 was found to reduce the migration and invasion ability of HCC cell both in vitro and in vivo. Moreover, we found for the first time that YAP1 was the downstream target of miR-345 in HCC. Inhibition of YAP1 was required for the inhibitory effects of miR-345 on the migration and invasion of HCC cells.

References

1. Venook AP, Papandreou C, Furuse J and de Guevara LL: The incidence and epidemiology of hepatocellular carcinoma: A global and regional perspective. Oncologist 15 (Suppl 4): 5-13, 2010.
2. Hao K, Luk JM, Lee NP, Mao M, Zhang C, Ferguson MD, Lamb J, Dai H, Ng IO, Sham PC, et al: Predicting prognosis in hepatocellular carcinoma after curative surgery with common clinicopathologic parameters. BMC Cancer 9: 389, 2009.
3. Ha M and Kim VN: Regulation of microRNA biogenesis. Nat Rev Mol Cell Biol 15: 509-524, 2014.
4. Gregory RI and Shiekhattar R: MicroRNA biogenesis and cancer. Cancer Res 65: 3509-3512, 2005.
5. Yates LA, Norbury CJ and Gilbert RJ: The long and short of microRNA. Cell 153: 516-519, 2013.
7. Calin GA and Croce CM: MicroRNA signatures in human cancers. Nat Rev Cancer 6: 857-866, 2006.
8. Hampton T: MicroRNA and metastasis. JAMA 298: 1998-1998, 2007.
9. Gramantieri L, Fornari F, Callegari E, Sabbioni S, Lanza G, Croce CM, Bolondi L and Negrini M: MicroRNA involvement in hepatocellular carcinoma. J Cell Mol Med 12: 2189-2204, 2008.
10. Ji J and Wang XW: New kids on the block: Diagnostic and prognostic microRNAs in hepatocellular carcinoma. Cancer Biol Ther 8: 1686-1693, 2009.
11. Giordano S and Columbano A: MicroRNAs: New tools for diagnosis, prognosis, and therapy in hepatocellular carcinoma? Hepatology 57: 840-847, 2013.
12. Chen L, Li X and Chen X: Prognostic significance of tissue miR-345 downregulation in non-small cell lung cancer. Int J Clin Exp Med 8: 20971-20976, 2015.
13. Chen QG, Zhou W, Han T, Du SQ, Li ZH, Zhang Z, Shan GY and Kong CZ: MiR-345 suppresses proliferation, migration and invasion by targeting Smad1 in human prostate cancer. J Cancer Res Clin Oncol 142: 213-224, 2016.
14. Srivastava SK, Bhardwaj A, Arora S, Tyagi N, Singh S, Andrews J, McClellan S, Wang B and Singh AP: MicroRNA-345 induces apoptosis in pancreatic cancer cells through potentiation of caspase-dependent and -independent pathways. Br J Cancer 113: 660-668, 2015.
15. Xu MZ, Yao TJ, Lee NP, Ng IO, Chan YT, Zender L, Lowe SW, Poon RT and Luk JM: Yes-associated protein is an independent prognostic marker in hepatocellular carcinoma. Cancer 115: 4576-4585, 2009.
16. Tschaharganeh DF, Chen X, Latzko P, Malz M, Gaida MM, Felix K, Ladu S, Singer S, Pinna F, Gretz N, et al: Yes-associated protein up-regulates Jagged-1 and activates the Notch pathway in human hepatocellular carcinoma. Gastroenterology 144: 1530-1542, 2013.
17. Cho WC: MicroRNAs: Potential biomarkers for cancer diagnosis, prognosis and targets for therapy. Int J Biochem Cell Biol 42: 1273-1281, 2010.
18. Bartels CL and Tsongalis GJ: MicroRNAs: Novel biomarkers for human cancer. Clin Chem 55: 623-631, 2009.
19. Farazi TA, Hoell JJ, Morozov P and Tuschl T: MicroRNAs in human cancer. Adv Exp Med Biol 774: 1-20, 2013.
20. Yu J, Li N, Wang X, Ren H, Wang W, Wang S, Song Y, Liu Y, Li Y, Zhou X, et al: Circulating serum microRNA-345 correlates with unfavorable pathological response to preoperative chemoradiotherapy in locally advanced rectal cancer. Oncotarget 7: 64233-64243, 2016.
21. Harvey KE, Zhang X and Thomas DM: The Hippo pathway and human cancer. Nat Rev Cancer 13: 246-257, 2013.
22. Farazi PA and DePinho RA: Hepatocellular carcinoma pathogenesis: From genes to environment. Nat Rev Cancer 6: 674-687, 2006.
23. Farazi PA and DePinho RA: Hepatocellular carcinoma pathogenesis: From genes to environment. Nat Rev Cancer 6: 674-687, 2006.