MicroRNA-34a suppresses the breast cancer stem cell-like characteristics by downregulating Notch1 pathway

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Breast cancer is the most common cancer among women worldwide. Despite exciting developments in early detection and systemic therapy, it remains a major cause of cancer-related death because of metastasis, relapse, and treatment resistance. Growing evidence indicated that one of the most important reasons behind this was the presence of a small population of stem-like cells called cancer stem cells (CSCs), such as breast cancer stem cells (BCSCs). Breast cancer stem cells were the first CSCs to be reported and are among the best characterized. Identification of BCSCs from tumor samples and breast cancer cells relies mainly on CD44+/CD24− or aldehyde dehydrogenase 1 (ALDH1) phenotypes. Breast cancer stem cells are endowed with stem cell properties including the capacity of self-renewal and multilineage differentiation. They play important roles in tumor formation, progression, and therapy resistance in breast cancer. Thus, effective targeting of BCSCs has the potential to improve outcomes for women with breast cancer.

In the past decades, the role of microRNAs (miRNAs) functioning as oncogenes or tumor suppressors in cancer has been reported. They are considered to be emerging potential candidates for cancer diagnosis, prognosis, and therapy. MicroRNA-34a (MiR-34a) is one of the first and best studied miRNAs associated with tumorigenesis. It is highly expressed in normal tissues and commonly repressed in carcinoma such as neuroblastoma, colon cancer, breast cancer, and non-small-cell lung cancer. Previous studies have reported that ectopic expression of miR-34a suppresses cell proliferation, migration, and invasion in various cancer cells. It also regulates drug resistance in breast cancer by targeting a variety of oncogenes. However, the role and mechanism of miR-34a in the regulation of breast cancer stemness needs to be further elucidated.

Recent studies also noted that elevated expression of Notch1 was proposed as a poor prognostic marker in breast cancer. Accumulating evidence has shown that Notch1 signaling was associated with tumorigenesis, lymph node metastasis, and chemoresistance in human breast cancer. Furthermore, as a stem cell gene, Notch1 is also involved in...
the maintenance and self-renewal of BCSCs. Therefore, Notch1 signaling has received increasing attention as an important therapeutic target for breast cancer.

In the present study, we showed that low levels of miR-34a expression were detected in BCSCs. Overexpression of miR-34a suppressed breast cancer stemness in vitro. Furthermore, we proved Notch1 as an important target of miR-34a in the regulation of cell proliferation, migration, stemness, and chemotherapeutic resistance. Our study not only identified the miR-34a/Notch1 pathway as a potential therapeutic target for breast cancer, but also suggested it is a viable target for paclitaxel (PTX) treatment to overcome therapy resistance.

Materials and Methods

Clinical samples. All samples were collected from the First Affiliated Hospital of Dalian Medical University (Dalian, China) and were confirmed with histopathological examination. Informed consent was obtained from each patient. This research was approved by the medical ethics committee of the First Affiliated Hospital of Dalian Medical University.

Cell line and reagents. The MCF-7 cell line was purchased from the Cell Bank of the Chinese Academy of Sciences (Shanghai, China). The cells were cultured in DMEM/F12 medium (HyClone, Logan, UT, USA) added with 10% FBS (Gibco Laboratories, Gran Island, NY, USA). All cells were maintained at 37°C in the presence of 5% CO2. Paclitaxel was purchased from Sigma (St. Louis, MO, USA).

Transfection of MCF-7 cells. MicroRNA-34a mimics and the negative control (miR-Ctrl) were synthesized by Invitrogen (Carlsbad, CA, USA). Notch1 siRNA and control siRNA were purchased from GenePharma (Shanghai, China); pcDNA3.1-Notch1 plasmid was constructed by GenePharma. MCF-7 cells were grown on 6-well plates to confluence and were transfected with Lipofectamine 2000 (Invitrogen) according to the manufacturer’s instructions.

Total RNA extraction and quantitative RT-PCR. Total RNA was extracted with TRIzol Reagent (Invitrogen). For miRNA analysis, quantitative RT-PCR (qRT-PCR) was carried out with a TaqMan reverse transcription kit and TaqMan MicroRNA Assay kit (Applied Biosystems, Foster City, CA, USA); U6 was used as control. For mRNA analysis, qRT-PCR was carried out with SYBR Green (Qiagen, Valencia, CA, USA); GAPDH was used as control. Primers for mature miR-34a and U6 were purchased from Ambion (Austin, TX, USA). All experiments were carried out in triplicate. The data were analyzed according to the comparative Ct (2-ΔΔCt) method.

Western blot analysis. Cells were lysed in 1× RIPA buffer (Sigma). The samples were separated by SDS-PAGE and transferred to PVDF membranes. The primary antibodies of Notch1 (1:500), Hes-1 (1:200), and ALDH1 (1:200) were obtained from Santa Cruz Biotechnology (Santa Cruz, CA, USA). Relative protein expression levels were quantified by optical density analysis and normalized to GAPDH (1:1000; Santa Cruz).

Luciferase assays. The MCF-7 cells were seeded into 6-well plates and cotransfected with miR-34a mimics, miR-Ctrl, and pLUC vector containing firefly luciferase reporter gene and the wild-type or mutated 3’-UTR of the Notch1 gene. Forty-eight hours after transfection, luciferase assays were carried out using a luciferase assay kit (Promega, Madison, WI, USA) according to the manufacturer’s protocol. Three independent experiments were carried out.

Immunohistochemistry. Immunohistochemistry (IHC) was carried out as previously described. Formalin-fixed and paraffin-embedded tissue sections were incubated with Notch1 primary antibody (dilution 1:100; Santa Cruz). Slides were evaluated by two independent observers and scored on a scale of 0–3: 0, absent positive tumor cells; 1, weak cell staining or <10% positive cells; 2, moderate cell staining or 10–50% positive cells; and 3, intense cell staining or >50% positive cells.

Isolation of BCSCs. For isolation of BCSCs, 1 × 10⁶ MCF-7 cells were incubated with CD44 and CD24 primary mouse IgG antibodies (Gibco Gran Island, NY, USA) for 10 min at 4°C. After the unbound antibodies were removed by centrifuge, cells were resuspended in 80 μL buffer. Then 20 μL goat anti-mouse IgG MicroBeads (Miltenyi Biotec, Bergisch Gladbach, Germany) were added to the buffer. The cells were incubated for another 10 min at 4°C. Cells were washed and preceded to magnetic separation.

Flow cytometry analysis. After transfection for 72 h, the cells were collected and stained with conjugated anti-human CD44-FITC and CD24-PE antibodies (Invitrogen) on ice in the dark for 50 min. Then samples were analyzed by flow cytometry using a BD Canto II flow cytometer (BD Biosciences, San Jose, CA, USA).

Cell proliferation assay. Cell proliferation was measured with the Cell Counting Kit-8 (CCK-8) assay kit (Dojindo, Kumamoto, Japan). Different groups of cells were plated at 96-well plates at 2 × 10⁴ per well in a final volume of 100 μL. At 24, 48, 72, and 96 h post-plating, 10 μL CCK-8 solution was added to each well and incubated for 2 h at 37°C. Then the absorbance was measured at 450 nm.

Migration and invasion assays. The migration and invasion assays were carried out using a Transwell chamber (Corning, NY, USA). For migration assays, 5 × 10⁴ cells in serum-free media were placed into the upper chamber. For invasion assays, 1 × 10⁵ cells in serum-free media were placed into the upper chamber with an insert coated with Matrigel (BD Biosciences, San Jose, CA, USA). Next, medium containing 10% FBS was added to the lower chamber. After 24 h of incubation, the cells remaining on the upper membrane were eliminated, and the cells having migrated or invaded through the membrane were fixed and stained with methanol and 0.1% crystal violet. The cells were counted, and imaged using an IX71 inverted microscope (Olympus, Tokyo, Japan).

Mammosphere formation assay. Different groups of cells (1 × 10³/cm²) were cultured in serum-free DMEM/F12 supplemented with 2% B27 (Invitrogen), 20 ng/mL human recombinant epidermal growth factor (Peprotech, Rocky Hill, NJ, USA), 20 ng/mL basic fibroblast growth factor (b-FGF) (PreproTech), 4 μg/mL heparin (Sigma), 2 mmol/L L-glutamine (Sigma) and 5 μg/mL insulin (Sigma). After culturing for approximately 10 days, the mammospheres were counted and scored under an inverse microscope. Sphere formation efficiency = colonies/input cells × 100%.

Statistical analysis. Statistical analysis was done using spss software version 16.0 (SPSS, Chicago, IL, USA). All experiments were carried out at least three times. Data are shown as the mean ± SEM unless otherwise noted. In all cases, statistical significance was set as a P < 0.05.

Results

MicroRNA-34a directly targets and functionally suppresses Notch1 in MCF-7 cells. Bioinformatic approaches have identified multiple mRNAs as direct targets of miR-34a. Among the predicted targets, we chose Notch1 to investigate further because of its important roles in human breast tumorigenesis.
and progression \(^{(21,22)}\) and stem cell maintenance. \(^{(26)}\) MicroRNA target searches using Targetscan and Miranda confirmed that Notch1 has a putative miR-34a binding site within its 3'-UTR (Fig. 1a). To investigate whether miR-34a may functionally regulate Notch1, we assessed Notch1 mRNA and protein expression in miR-34a mimic-transfected cells. First, the transfection efficiency of miR-34a mimics was evaluated (Fig. 1b). Next, the expression levels of Notch1 mRNA and protein were examined. We found that miR-34a mimics showed significant suppressive effects on Notch1 mRNA and protein expression (Fig. 1c,d). These results suggested that miR-34a may regulate Notch1 expression at both transcriptional posttranscriptional levels. Luciferase assay was also carried out. Figure 1(e) showed that miR-34a could downregulate the luciferase activity of the Notch1 wild-type 3'-UTR construct, whereas the luciferase activity was not significantly attenuated in the target region of the mutated 3'-UTR construct (Fig. 1e). These data confirmed that miR-34a regulated Notch1 by directly interacting with the 3'-UTR of the gene in MCF-7 cells.

In addition, we assessed the expression of the Notch target gene Hes-1. The result showed Hes-1 mRNA expression was reduced significantly in miR-34a overexpressing cells (Fig. 1f). All the findings suggested that alteration of miR-34a expression may not only affect the expression of Notch1, but also influence its downstream pathway.

MicroRNA-34a expression is downregulated in breast cancer tissues and negatively correlated with tumor stage, metastasis, and expression of Notch1. To further study the importance of Notch1 repression by miR-34a, expression of miR-34a and Notch1 were examined in 45 breast cancer specimens and 16 normal adjacent breast tissues (NATs). The association between miR-34a expression and the clinicopathological parameters of breast cancer tissues is shown in Table 1. The

### Table 1. Association between microRNA-34a (miR-34a) expression and clinicopathological parameters of breast cancer patients (n = 45)

| Clinicopathologic parameter | No. of cases | Median expression of miR-34a | P-value |
|-----------------------------|--------------|------------------------------|---------|
| Age, years                  |              |                              |         |
| ≤50                         | 21           | 0.53 ± 0.07                  | <0.05   |
| >50                         | 24           | 0.80 ± 0.09                  |         |
| Tumor size, cm              |              |                              |         |
| ≤2                          | 14           | 0.77 ± 0.12                  | >0.05   |
| >2                          | 31           | 0.63 ± 0.07                  |         |
| Lymph node metastasis       |              |                              |         |
| No                          | 18           | 0.93 ± 0.10                  | <0.05   |
| Yes                         | 27           | 0.50 ± 0.05                  |         |
| TNM stage                   |              |                              |         |
| I                           | 11           | 1.03 ± 0.15                  | <0.05   |
| II                          | 18           | 0.70 ± 0.08                  | <0.05   |
| III                         | 12           | 0.41 ± 0.07                  | <0.05   |
| IV                          | 4            | 0.29 ± 0.05                  |         |
average expression of miR-34a was significantly downregulated in breast cancer tissues compared to the NATs (Fig. 2a). MicroRNA-34a expression levels in patients with lymph node metastases ($n = 27$) was also lower than that in patients without lymph node metastases ($n = 18$) (Fig. 2b). Additionally, we examined miR-34a expression in patients with different TNM stages. The level of miR-34a was reduced with progression of clinical stage, but no significant difference was observed between stage III and stage IV (Fig. 2c). All the results indicated that reduced expression of miR-34a may play an important role in the initiation, progression, and metastasis of breast cancer. Notch1 expression was detected using qRT-PCR and IHC in all clinical specimens. Consistent with a recent report, Notch1 was found to be overexpressed in breast cancer tissues compared to NATs (Fig. 2f). Moreover, an inverse correlation between the expression of miR-34a and Notch1 was observed (Fig. 2d). In addition, analysis of IHC scores showed that Notch1 was negatively associated with miR-34a expression (Fig. 2g). These results confirmed that the miR-34a/Notch1 pathway was essential in regulating breast cancer initiation and progression.

**MicroRNA-34a regulates cell proliferation, migration, and invasion by targeting Notch1.** Based on our findings described above, we hypothesized that miR-34a may inhibit cell proliferation and suppress cell migration and invasion through downregulation of Notch1 expression. To test this hypothesis, MCF-7 cells were transiently transfected with miR-Ctrl, miR-34a mimics, control siRNA, or Notch1 siRNA. The CCK-8 assays were carried out to quantify the MCF-7 cell proliferation. As shown in Figure 3(a), miR-34a significantly inhibited the proliferation of MCF-7 cells compared to miR-Ctrl 72 h after transfection (Fig. 3a). There was no significant difference in proliferation rate between miR-34a overexpressing cells and Notch1 siRNA transfected cells. We then examined cell migration and invasion by Transwell assay. The miR-34a overexpressing cells showed substantial inhibition in both migration and invasion of the MCF-7 cells (Fig. 3b). The knockdown of Notch1 resembled the inhibitory effects of miR-34a. These data indicated that miR-34a may suppress the function of human breast cancer cells through targeting Notch1.

**MicroRNA-34a suppresses BCSCs in MCF-7 cells partly by targeting Notch1.** There is accumulating evidence that the presence of CSCs is one of the most important reasons for tumorigenesis and metastasis. As Notch1 plays an important role in the maintenance of BCSCs, we hypothesized that miR-34a could inhibit BCSCs by downregulating Notch1. To examine the role of miR-34a/Notch1 in the regulation of BCSCs, we first compared miR-34a and Notch1 expression levels between CD44+/CD24− BCSCs and non-CD44+/CD24− breast cancer cells. As shown in Figure 4(a,b), the expression of miR-34a was significantly downregulated, and Notch1 mRNA expression was upregulated, in BCSCs compared with non-CSCs (Fig. 4a,b). These results suggest that miR-34a may be a negative regulator in the maintenance of BCSCs by targeting Notch1. To further investigate the efficiency of miR-34a in regulating BCSCs, we transfected miR-34a mimics or Notch1 siRNA into MCF-7 cells and quantified the number of cells with the CSC markers (CD44+/CD24−) by flow cytometry. At
72 h after transfection, we found that the percentage of CD44+/CD24-/C0 cells had decreased by approximately 55.1% in the miR-34a mimics group and 37.9% in the Notch1 siRNA group, compared to the controls (Fig. 4c). We also detected the expression of another CSC marker, ALDH1, and found it was significantly downregulated in both the miR-34a mimics group and the Notch1 siRNA group (Fig. 4d). Our data confirmed that miR-34a suppressed BCSC propagation in MCF-7 cells, at least partly, by downregulating Notch1.

Restoration of Notch1 counteracts the inhibitory effects of miR-34a on MCF-7 cells. To further validate whether the inhibitory effects of miR-34a on MCF-7 cells are mediated by Notch1, we transfected miR-34a mimics into MCF-7 cells with pcDNA3.1 vector or pcDNA3.1-Notch1 plasmid, which encoded the full-length coding sequence of Notch1 intracellular domain without 3'-UTR. The Transwell and CCK-8 assays showed that Notch1 restoration significantly increased cell migration and proliferation, which were suppressed by miR-34a (Fig. 5a, b). Relative to the control, expression of pcDNA3.1-Notch1 reversed the negative effects of miR-34a on Notch1 and Hes-1 protein expression in MCF-7 cells (Fig. 5c). Moreover, the repression of ALDH1 by miR-34a was also rescued by expression of Notch1 (Fig. 5c). Flow cytometry analysis indicated that the ectopic expression of Notch1 counteracted the inhibition of the CD44+/CD24- population by miR-34a overexpression (Fig. 5d). All the results above provide further evidence supporting Notch1 as an important functional target for miR-34a in MCF-7 cells.

MiR-34a increases chemosensitivity to PTX in MCF-7 cells through inhibition of breast cancer stemness. Cancer stem cells are considered one of the important reasons behind therapy resistance. As miR-34a may suppress BCSCs, we hypothesized that overexpression of miR-34a might increase the sensitivity of breast cancer cells to a conventional chemotherapy drug, PTX. First, the CCK-8 assay was carried out to determine whether miR-34a may increase the cytotoxicity of PTX in breast cancer cells. As Figure 5(a) shows, miR-34a overexpression dramatically reduced the percentage of viable cells in MCF-7 cells. The combination therapy of miR-34a and PTX led to a more significant reduction in cell viability (Fig. 6a). Next, mammosphere formation assays were carried out to determine whether the promotion of chemosensitivity to PTX was due to suppression of BCSCs. We found that both the size and number of the mammospheres were significantly reduced in miR-34a overexpressing cells. Furthermore, mammosphere-forming ability was decreased dramatically in cells treated with combination therapy compared to cells treated with PTX alone (Fig. 6b). We then detected the expression of ALDH1 in the cells. The expression of ALDH1 was greatly reduced in cells that received combined treatment compared to cells treated with PTX alone (Fig. 6c). These results supported that miR-34a regulated the proliferation of BCSCs, and overexpression of miR-34a could improve the chemosensitivity to PTX through inhibiting the propagation of BCSCs.

We next used Western blot analysis to examine the expression of ATP-binding cassette sub-family G member 2 (ABCG2), Notch1, and Hes-1 in MCF-7 cells. ABCG2 expression was dramatically reduced in miR-34a mimic-transfected cells compared to miR-Control (Fig. 6c), suggesting that the increase in breast cancer chemosensitivity induced by miR-34a may be attributable to the modulation of ABCG2. Furthermore,
Notch1 and Hes-1 were also dramatically decreased in cells treated with combination therapy (Fig. 6c) compared to those treated with PTX alone.

Discussion

In this study, we investigated the role of the miR-34a/Notch1 pathway in the regulation of breast cancer stemness. Breast cancer stem cells are considered to be responsible for tumor initiation, progression, distant metastases, and chemoresistance in breast cancer.\(^{(28)}\) Evidence implies that aberrant activation of several developmental pathways is involved in the formation of CSCs. Notch signaling is one such pathway that plays critical mechanistic roles in the maintenance and differentiation of BCSCs.\(^{(29)}\) As one of the four Notch receptors (Notch1–4),\(^{(30)}\) Notch1 is reported to play critical roles in BCSC activity.\(^{(28)}\) Binding of the Notch ligand, Jagged1, Jagged2, or DLL1-3, to the Notch1 receptor leads to cleavage of the transmembrane receptor, which results in release of the Notch1 intracellular domain into the nucleus and activation of downstream genes, including Hes-1\(^{(30)}\), Hey-1\(^{(31)}\), and others.

Our data confirmed that Notch1 was a direct target of miR-34a in MCF-7 cells. Both Notch1 and its downstream target Hes-1 were downregulated in miR-34a overexpressed cells. Moreover, rescue experiments showed that the repression of Hes-1 by miR-34a was partly reversed after expression of Notch1. All the results implied that miR-34a was an important negative regulator of Notch1/Hes-1 signaling. As there are many other Notch1 target genes, further research is needed to establish whether they are all influenced by miR-34a.

Consistent with these results, inverse correlations between miR-34a and Notch1 expression were observed in the breast cancer specimens. In this study, we first showed, using IHC, that miR-34a was negatively associated with Notch1 protein expression. As miR-34a expression was negatively correlated with tumor stage and metastasis, our results implied that the miR-34a/Notch1 pathway is essential in regulating breast cancer initiation, progression, and metastasis. In the following experiments, we found that knockdown of Notch1 repressed proliferation, migration, and invasion in MCF-7 cells, reproducing the function of miR-34a overexpression. It indicated that miR-34a exerted inhibitory effects on MCF-7 cells by downregulating the Notch1 pathway. The subsequent rescue experiments also confirmed it.
MicroRNA has been thought to play an important role in regulation of CSCs. In the current study, we found that miR-34a was significantly downregulated in BCSCs. Overexpression of miR-34a decreased the percentage of CD44+/CD24−/CD105− cells and reduced the expression of stemness marker ALDH1 in breast cancer cells. These results implied that miR-34a may act as a negative regulator in BCSCs. Similar to our results, miR-34a is considered a suppressor in multiple types of CSCs. Pronounced inhibitory effects on tumor growth and metastasis have been observed by overexpression of miR-34a in the CSCs of prostate cancer, non-small-cell lung cancer, and glioma. Notch1 signaling is considered an important regulator in BCSCs. It was reported that inhibition of Notch1 by Pso resulted in growth arrest and suppression of epithelial–mesenchymal transition (EMT) in BCSCs, whereas higher expression of Notch1 was associated with chemoinsensitivity and radioresistance in BCSCs. In our study, silencing of Notch1 reproduced the miR-34a suppression of CD44+/CD24− cells, indicating that miR-34a may suppress BCSCs through Notch1. As CD44 was reported to be another direct target of miR-34a, we suspected the miR-34a suppression of the CD44+/CD24− population was not through Notch1 inhibition. To test this, rescue experiments were carried out. The results showed that ectopic expression of Notch1 partially reversed the effect of miR-34a on the CD44+/CD24− population, indicating that Notch1 was involved in the miR-34a inhibitory effect, at least in part. Furthermore, the detection of another breast cancer stemness marker, ALDH1, also confirmed the critical roles of Notch1 in the miR-34a regulation of BCSCs. Consistent with our results, recent research in colon cancer showed that miR-34a modulated self-renewal and differentiation in colon cancer stem cells by targeting Notch1. These results indicated that the miR-34a/Notch1 pathway plays an essential part in the regulation of cancer stemness. MicroRNA-34a has many potential target genes, several of which have been experimentally validated to govern cancer cell stemness, including NMYC, CD44, NANOG, and SOX2. Therefore, the regulatory mechanisms of miR-34a on CSCs need further exploration.
In many cases of tumor recurrence, conventional chemotherapy faces the problem of therapy resistance of cancer cells. Cancer stem cells have been postulated to play an important role in multiple drug resistance. Paclitaxel is a medicine for breast cancer treatment. However, drug resistance limits its clinical applications. Previous studies suggested that enrichment of BCSCs may be one important reason for PTX resistance. Our study first found that miR-34a increased sensitivity to PTX in breast cancer cells and the mechanism is related to the suppression of BCSCs. BCSCs are relatively resistant to chemotherapy. This resistance may be mediated by signaling pathways that is involved in stem cell self-renewal, including Notch, Wnt, and Hedgehog pathways. In this study, mammosphere formation and ALDH1 expression was significantly reduced in miR-34a overexpressing cells when treated with PTX. Notch1 and Hes-1 expression were also significantly downregulated. These results suggested that miR-34a may increase the chemosensitivity of BCSCs to PTX by suppressing the Notch1/Hes-1 pathway. Recent research has also indicated that Notch1/Hes-1 signaling plays a significant role in maintenance and differentiation of various types of stem cells. Originally cloned from multidrug-resistant breast cancer cells, ABCG2 is considered one of the characteristic features of CSCs. It is believed that the inherent ABCG2 allows CSCs to survive chemotherapy and repopulate the tumor after exposure to chemotherapy drugs. Our results showed that ABCG2 expression was downregulated in miR-34a mimic-transfected cells, but not in cells treated with PTX alone, which indicates that a high level of ABCG2 may be one of the reasons for BCSC resistance to PTX. As ABCG2 is a direct target of the Notch pathway, miR-34a may regulate ABCG2 expression through inhibiting the Notch1 pathway. A recently published research report is consistent with our results. It showed that miR-34a was downregulated in MCF-7/ADR cells. Overexpression of miR-34a suppressed the mammosphere formation ability and the CD44+/CD24− population in MCF-7/ADR cells by targeting Notch1. In addition, ectopic miR-34a expression sensitized MCF-7/ADR cells to doxycycline. All of these findings indicate that the miR-34a/Notch1 pathway may play a critical part in the inhibition of CSCs and the promotion of chemotherapy sensitivity in breast cancer. Our study also implied that ABCG2 may be involved in the regulation of the miR-34a/Notch1 pathway in BCSCs. In conclusion, our research suggested that miR-34a may inhibit BCSCs and increase sensitivity to PTX by downregulating the Notch1 pathway. These results indicate that the miR-34a/Notch1 pathway plays an important role in regulating BCSCs and could serve as a therapeutic target for overcoming PTX resistance in human breast cancer. Our findings strongly suggest that miRNA targeting stem cell signaling pathways could provide an efficient approach for breast cancer therapy.
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