MicroRNA-133a-3p inhibits cell proliferation, migration and invasion in colorectal cancer by targeting AQP1

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Abstract. Recently, miR-133a-3p has been identified as a marker for human colorectal cancer (CRC) and the association between miR-133a-3p and aquaporin 1 (AQP1) has been described in endothelial cells. However, the regulatory functions of the miR-133a-3p/AQP1 axis remain unclear in CRC. The present study analyzed the expression of miR-133a-3p and AQP1 in CRC tissues (n=56) and cell lines using reverse transcription-quantitative PCR and western blot analysis. The \( \chi^2 \) test was used to assess the associations between miR-133a-3p/AQP1 and clinicopathological features of patients with CRC. Next, the functional role of miR-133a-3p/AQP1 in CRC was evaluated in vitro by performing Cell Counting Kit-8 and Transwell assays. Moreover, the online software tool TargetScan7.1 was used to predict AQP1 as the target gene of miR-133a-3p, followed by validation using a luciferase reporter assay. The results showed that miR-133a-3p was significantly downregulated, while AQP1 was upregulated in CRC tissues and cell lines compared with corresponding controls. Clinically, it was demonstrated that miR-133a-3p/AQP1 expression was significantly associated with tumor TNM stage (P=0.020). Functional experiments indicated that miR-133a-3p-overexpression remarkably suppressed, while AQP1-knockdown promoted, cell proliferation, migration and invasion in CRC cells. Mechanically, AQP1 was identified and validated as a target gene of miR-133a-3p in CRC cells. The expression level of AQP1 mRNA was not correlated with miR-133a-3p expression in CRC tissues. Furthermore, AQP1-knockdown induced, while overexpression reversed, the suppressive effects of miR-133a-3p on CRC cells. Taken together, these findings suggested that miR-133a-3p might be a tumor suppressor by suppressing cell proliferation, migration and invasion via targeting AQP1.

Introduction

Colorectal cancer (CRC) is one of the most prevalent malignant gastrointestinal tumor types worldwide and is the leading cause of tumor-associated deaths (1,2). The previously identified risk factors for CRC include obesity, smoking, hereditary factors and chronic intestinal inflammation, accompanied with main symptoms, such as weakness, fatigue and unexplained weight loss (3-5). Currently, great progress has been made in the primary therapeutic strategy for patients with CRC, including surgery, chemotherapy and radiotherapy (6). Unfortunately, the long-term survival of patients with CRC remains poor with <50%, particularly in patients at advance stage, or with local recurrence and distant metastasis (7,8). A major challenge for treatment of advanced metastatic disease is due to insufficient knowledge on the molecular mechanisms underlying the initiation and development of CRC.

MicroRNAs (miRNAs/miRs), composed of 19-25 nucleotides, are a group of short non-coding endogenous RNA molecules that function as negative regulators on gene expression via binding to the 3’ untranslated regions (3’UTRs) of target mRNAs (9,10). Accumulating evidence has suggested that miRNAs are extensively involved in tumor development by participating in biological processes, including cell proliferation, apoptosis, migration and invasion, especially in CRC (11-13). miR-133a-3p, a member of the miRNA family, has been recently studied for its tumor suppressive role in various cancer types by targeting different related molecules. For instance, Huang et al (14) reported that overexpression of miR-133a-3p inhibits the proliferation, migration and invasion abilities of gallbladder carcinoma cells through directly targeting recombination signal-binding protein Jκ. In esophageal squamous cell carcinoma (ESCC), miR-133a-3p inhibits cell propagation, invasion and migration and facilitated apoptosis by targeting collagen type I α1 (15). The similar suppressive effects of miR-133a-3p on cell proliferation and migration were also demonstrated in retinoblastoma (16), gastric cancer (17) and prostate cancer (18). Notably, a recent study by Zhou et al (19) showed that overexpression of miR-133a-3p inhibits cell proliferation with G1 arrest of CRC cells. Moreover, hsa-miR-133a-3p has been identified as a selective marker for human colon cancer by extensive screening of miRNA populations (20). However, the clinical significance of miR-133a-3p and its regulatory function on the malignant behaviors in CRC have not been elucidated yet.

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Aquaporin 1 (AQP1), a member of water channel protein family, is responsible for water passive transport quickly across biological membranes (21). Previous studies have described the important roles for AQP1 acting as an oncogene in carcinogenesis and tumor behavior, including glioblastoma multiforme (22), ovarian cancer (23), osteosarcoma (24) and ESCC (25). Notably, the expression of AQP1 is an independent poor prognostic factor for stage II and III CRC (26,27), but the biological function of AQP1 in CRC remains unidentified. Notably, a recent study by Jiang et al (28) illustrated that the myocyte-specific enhancer factor 2C and miR-133a-3p regulatory circuit could maintain the homeostasis and physiological function of AQP1 in endothelial cells. Nevertheless, whether AQP1 is a target gene of miR-133a-3p in CRC cell functions still unclear.

In the present study, the expression of miR-133a-3p/AQP1 was determined in CRC tissues and the association between miR-133a-3p/AQP1 expression and clinicopathological features of patients with CRC was evaluated. By performing gain-of-function and loss-of-function assays, the effects of miR-133a-3p or AQP1 on CRC cell proliferation, migration and invasion were investigated. Whether miR-133a-3p regulated CRC cell functions via targeting AQP1 was further validated.

Materials and methods

Clinical tissue samples. A total of 56 paired tumor tissues and matched adjacent normal tissues (at least 5-cm away from tumor margin) taken from left colon side were collected from patients histologically diagnosed as CRC (age range, 28-81 years) by two independent pathologists during surgical resection between March 2018 and October 2019 at the Third Affiliated Hospital of Hebei Medical University (Hebei, China). Before enrollment, all patients signed the informed written consent and were confirmed not to receive any chemotherapy or radiotherapy. The basic clinical features of all patients are summarized in Table I. Collected tissue samples were immediately frozen in liquid nitrogen and kept at -80°C in a refrigerator. The experimental protocols obtained the approval from The Medical Ethics Committee of the Third Affiliated Hospital of Hebei Medical University (Hebei, China).

Cell culture. The four human CRC cell lines (DLD-1, SW1116, SW480 and HCT116) and a normal colon epithelial cell line (FHC) were provided by the Cell Bank of Type Culture Collection of The Chinese Academy of Sciences. Apart from SW1116 cells cultured in Dulbecco's modified Eagle's medium (both HyClone; Ccvita). All media were supplemented with 10% fetal bovine serum (FBS; Gibco; Thermo Fisher Scientific, Inc.) and placed at 37°C in a humidified incubator with 5% CO2.

Cell transfection. For miR-133a-3p-overexpression or AQP1-knockdown, miR-133a-3p mimics (5'-UUUGGUCCCC UUCAACCGACG-3'), mimics negative control (NC, 5'-CAG CUGGUUGAAGGGACCAA-3'), miR-133a-3p inhibitor (5'-GGGCAATGGAATCCTGTGAT-3'), inhibitor NC (5'-TTC TCCGAACGTGTCACGTTTC-3'), small interning RNA targeting AQP1 (si-AQP1) and si-NC were chemically synthesized by Guangzhou RiboBio Co., Ltd. In addition, the coding sequences of AQP1 were synthesized by RiboBio and then cloned into pcDNA3.1 to construct a AQP1 expression vector (pcDNA3.1-AQP1). Empty pcDNA3.1 vector was served as a NC. DLD-1, SW480 or HCT116 cells were plated in 6-well plates at a density of 3x10^4 cells per well and cell transfection was performed using Lipofectamine® 2000 (Invitrogen; Thermo Fisher Scientific, Inc.) for 48 h at 37°C, according to the manufacturer’s instructions. The concentration of all miRNAs was 50 nM and the concentration of siRNAs was 30 nM. For rescue experiments, the concentration of pcDNA3.1-AQP1 was 10 µg. After 48 h transfection, cells were harvested for subsequent experiments.

Reverse transcription-quantitative (RT-q)PCR. Total RNA was extracted from tissue samples or cell lines with TRIzol® reagent (Invitrogen; Thermo Fisher Scientific, Inc.) and cDNA was synthesized at 37°C for 60 min and at 98°C for 10 min using the TaqMan microRNA Reverse Transcription kit (Applied Biosystems; Thermo Fisher Scientific, Inc.) or ABScript II cDNA First Strand Synthesis kit (Invitrogen; Thermo Fisher Scientific, Inc.). Quantitative real-time PCR was carried out with TaqMan miRNA Assay Probes (Applied Biosystems; Thermo Fisher Scientific, Inc.) or SYBR Premix Ex Taq™ Real-Time PCR Kit (Thermo Fisher Scientific, Inc.) on an Applied Biosystems 7500 Sequence Detection system (Applied Biosystems; Thermo Fisher Scientific, Inc.) using the following primer sequences: miR-133a-3p, forward, 5'-UUUGGUCCCC UUCAACCGACG-3' and reverse, 5'-UAAACCAAGGUA AAUUGUCGA-3'; U6, forward, 5'-CGTCTGCGAGCACAC TAC-3' and reverse, 5'-TTC ACG AAT TTG CGT GTC AT-3'; AQP1, forward, 5'-ACCTGCTGGCCCCATTTGACTA-3' and reverse, 5'-CCAGGCGACTCCCAATGAA-3'; β-actin, forward, 5'-CTGCTTGAGATGTGGTGC-3' and reverse, 5'-CAGCTCAGTAAAGTCGCC-3'. The thermocycling conditions were as follows: Pre-degeneration at 95°C for 3 min and 40 cycles of 95°C for 30 sec, annealing and elongation at 60°C for 1 min. All of the reactions were run in triplicate. Relative expression of miR-133a-3p and AQP1 normalized to U6 and β-actin, respectively, and was calculated using the 2^(-ΔΔCt) method (29). All experiments were biologically repeated three times.

Cell proliferation assay. Transfected cells at a density of 4x10^3 cells per well were seeded into 96-well plates and incubated for 0, 24, 48 or 72 h. At each time point, cells in each well were incubated with 10 µl Cell Counting Kit-8 (CCK-8) solution (Beyotime Institute of Biotechnology) according to the manufacturer's instruction. After incubation for another 2 h at 37°C, the absorbance at each time point was measured at a wavelength of 450 nm using a microplate reader. All experiments were biologically repeated three times.

Transwell assay. Cell migration and invasion were assessed with Transwell chambers (Corning, Inc.) precoated with and without 50 µl of Matrigel™ Basement Membrane Matrix (BD Biosciences) for 2 h at 37°C, respectively. For the Transwell assay, transfected DLD-1, SW480 or HCT116 cells were suspended in PBS-free culture medium and added to the upper chamber (2x10^4 cells/well). Meanwhile, 500 µl of medium containing 20% FBS (Gibco; Thermo Fisher Scientific, Inc.) was added to the lower chamber. After 24 h incubation at 37°C, the cells that migrated to the lower
miR-133a-3p expression and clinicopathological characteristics in 56 patients with colorectal cancer.

| Characteristics          | Value, n | Low (n=31) | High (n=25) | P-value |
|--------------------------|----------|------------|-------------|---------|
| Age, years               |          |            |             |         |
| <60                      | 24       | 13         | 11          | 0.877   |
| ≥60                      | 32       | 18         | 14          |         |
| Sex                      |          |            |             |         |
| Male                     | 33       | 17         | 16          | 0.489   |
| Female                   | 23       | 14         | 9           |         |
| Tumor size, cm           |          |            |             |         |
| <5                       | 36       | 20         | 16          | 0.968   |
| ≥5                       | 20       | 11         | 9           |         |
| Stage                    |          |            |             |         |
| I/II                     | 32       | 22         | 10          | 0.020†  |
| III/IV                   | 24       | 9          | 15          |         |
| Differentiation          |          |            |             |         |
| Well/moderate            | 26       | 13         | 13          | 0.453   |
| Poor                     | 30       | 18         | 12          |         |

P<0.05. miR, microRNA.

Statistical analysis. All experiments were performed in triplicate and data are presented as mean ± standard deviation. Statistical analysis was performed using GraphPad Prism version 6.0 software (GraphPad Software, Inc.). All patients with CRC were classified into low-expression group and high-expression group using the median value (0.385 for miR-133a-3p and 2.54 for AQP1) as the cut-off. The χ² test was used to assess the associations between miR-133a-3p or AQP1 and clinicopathological features of patients with CRC. Spearman's correlation analysis was conducted to assess the correlation between miR-133a-3p and AQP1. Two groups were compared using unpaired Student's t-test or one-way ANOVA, followed by Tukey's post hoc test, was used for more than two groups. P<0.05 was considered to indicate a statistically significant difference.

Results

Downregulation of miR-133a-3p in CRC is associated with TNM stage. The expression of miR-133a-3p was determined in paired tumor and matched adjacent normal tissues in a cohort of 56 patients with CRC. The results from RT-qPCR analysis showed that miR-133a-3p expression was significantly downregulated in CRC tissues compared with matched normal tissues (Fig. 1A). Similarly, miR-133a-3p expression within CRC cell lines (DLD-1, SW1116, SW480 and HCT116) was remarkably increased in comparison to the normal colon epithelial cell line FHC (Fig. 1B). By analyzing the association between miR-133a-3p expression and clinicopathological parameters, it was reported that miR-133a-3p expression was significantly associated with tumor stage (P=0.020), but not associated with age, sex, tumor size and differentiation (Table I).
miR-133a-3p directly decreases AQP1 expression by binding to its 3′UTR. To explore the functional targets of miR-133a-3p in CRC, online software tool TargetScan7.1 predicted that the 3’UTR of AQP1 contains miR-133a-3p binding sites (Fig. 3A). Next, AQP1 3’UTR-WT or AQP1 3’UTR-MUT was transfected with miR-133a-3p mimics or mimics NC into DLD-1 and SW480 cells. The luciferase reporter assay showed that the luciferase activities of AQP1-WT-transfected DLD-1 (Fig. 3B) or SW480 (Fig. 3C) cells significantly decreased upon miR-133a-3p-overexpression. However, the inhibitory effects were abolished when the putative miR-133a-3p seed binding regions in the AQP1 3’UTR were mutated. Moreover, the effect of miR-133a-3p on AQP1 expression was analyzed. As shown in Fig. 3D, the protein expression of AQP1 was downregulated after miR-133a-3p mimics transfection in DLD-1 and SW620 cells. The results demonstrated that miR-133a-3p can negatively regulate AQP1 expression by interacting with its 3’UTR, which supported AQP1 mRNA as a putative target of miR-133a-3p. In addition, the expression of AQP1 mRNA in paired tumor and matched adjacent normal tissues was determined in a cohort of 56 patients with CRC. As depicted in Fig. 3E, the AQP1 mRNA level was significantly upregulated in CRC tissues compared with matched normal tissues. Using the median value of AQP1 mRNA as the cut-off, the results from χ² test showed that increased AQP1 mRNA expression level was significantly associated with tumor stage (P=0.010; Table II). However, the expression level of AQP1 mRNA was not correlated with miR-133a-3p expression in CRC tissues (Fig. 3F).

AQP1 promotes CRC cell proliferation, migration and invasion. To investigate the functional role of AQP1 in CRC in...
Figure 2. miR-133a-3p suppresses the proliferation, migration and invasion of CRC cells. DLD-1 and SW480 cells were transfected with miR-133a-3p mimics or mimics NC for 48 h. (A) RT-qPCR results showing the transfection efficiency of miR-133a-3p in transfected DLD-1 and SW480 cells. (B) CCK-8 assay tested the effects of miR-133a-3p mimics on cell proliferation of transfected DLD-1 and SW480 cells. Transwell assay was performed to assess (C) cell migration and (D) invasion in transfected DLD-1 and SW480 cells. HCT116 cells were transfected with miR-133a-3p inhibitor or inhibitor NC for 48 h. (E) RT-qPCR results showing the transfection efficiency of miR-133a-3p in transfected HCT116 cells. (F) CCK-8 assay tested the effects of miR-133a-3p inhibitor on cell proliferation of transfected HCT116 cells. (G) A Transwell assay was performed to assess cell migration and invasion in transfected HCT116 cells. *P<0.01 and ***P<0.001 compared with respective NC. RT-q, reverse transcription-quantitative; miR, microRNA; NC, negative control; CCK-8, Cell Counting Kit-8.
vitro, the expression level of AQP1 protein in four CRC cell lines was determined. As shown in Fig. 4A, the protein level of AQP1 was upregulated in CRC cell lines (DLD-1, SW1116, SW480, and HCT116) compared with the normal colon epithelial cell line FHC. Subsequently, si-AQP1 was transfected into DLD-1 and SW480 cells to perform loss-of-function assays. As depicted in Fig. 4B, the protein expression of AQP1 was downregulated after si-AQP1 transfection in DLD-1 and SW480 cells compared with si-NC transfection. Similar with miR-133a-3p-overexpression, knockdown of AQP1 significantly impaired cell proliferation (Fig. 4C and D), migration (Fig. 4E) and invasion (Fig. 4F) in DLD-1 and SW480 cells. Moreover, the protein level of AQP1 was overexpressed in HCT116 cells following transfection with pcDNA3.1-AQP1, as demonstrated by western blot analysis (Fig. 4G). Contrary to AQP1-knockdown, AQP1-overexpression markedly promoted cell proliferation (Fig. 4H), migration and invasion (Fig. 4I) in HCT116 cells. These data indicated that AQP1 is the target of miR-133a-3p and played a role in CRC cell proliferation, migration and invasion.

Restoration of AQP1 reverses the suppressive effects of miR-133a-3p on CRC cell proliferation, migration and invasion. Furthermore, rescue experiments were performed to investigate whether AQP1 was the downstream functional regulator involved in miR-133a-3p-mediated CRC cell functions. DLD-1 and SW480 cells were co-transfected with miR-133a-3p mimics and pcDNA3.1-AQP1 or empty

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**Figure 3. miR-133a-3p regulates AQP1 by binding to its 3'UTR.** (A) Putative miR-133a-3p binding sites in the AQP1 3'UTR were revealed using TargetScan. Dual luciferase reporter assay confirmed the binding between miR-133a-3p and AQP1 in (B) DLD-1 and (C) SW480 cells. (D) Western blot assay of AQP1 protein levels in DLD-1 and SW480 cells transfected with miR-133a-3p mimics or mimics NC. (E) Reverse transcription-quantitative PCR results show AQP1 mRNA levels in tumor and matched adjacent normal tissues of patients with CRC (n=56). (F) Spearman's correlation analysis was applied to investigate the correlation between the expressions of miR-133a-3p and AQP1 mRNA in CRC tissues. "P<0.01 compared with mimics NC. UTR, untranslated region; AQP1, aquaporin 1; WT, wild-type; MUT, mutant; miR, microRNA; NC, negative control; CRC, colorectal cancer; miR, microRNA.
Figure 4. AQP1 promotes CRC cell proliferation, migration and invasion. (A) Expression of AQP1 protein was detected in four human CRC cell lines (DLD-1, SW1116, SW480 and HCT116) and a normal colon epithelial cell line (FHC). DLD-1 and SW480 cells were transfected with si-AQP1 or si-NC for 48 h. (B) Expression of AQP1 protein was detected in transfected DLD-1 and SW480 cells using western blot analysis. (C and D) Proliferation of transfected DLD-1 and SW480 cells was assessed by CCK-8 assay. Transwell assay was performed to assess (E) cell migration and (F) invasion in transfected DLD-1 and SW480 cells. (G) Expression of AQP1 protein was detected in HCT116 cells transfected with pcDNA3.1-AQP1 or pcDNA3.1 using western blot analysis. (H) Proliferation of transfected HCT116 cells was assessed using a CCK-8 assay. (I) Transwell assay was performed to assess cell migration and invasion in transfected HCT116 cells. "P<0.01 and ""P<0.001 compared with si-NC or pcDNA3.1. AQP1, aquaporin 1; CCK-8, Cell Counting Kit-8; NC, negative control; si, small interfering.
pcDNA3.1. Western blot analysis first confirmed that decreased AQP1 expression induced by miR‑133a‑3p‑overexpression was reversed by pcDNA3.1‑AQP1 transfection (Fig. 5A). The in vitro functional experiments, including CCK‑8 and Transwell assays, consistently demonstrated that overexpression of AQP1 significantly abolished the suppressive effects of miR‑133a‑3p‑overexpression on cell proliferation (Fig. 5B), migration (Fig. 5C) and invasion (Fig. 5D) in DLD‑1 and SW480 cells. These data suggested that miR‑133a‑3p negatively regulated CRC cell proliferation, migration and invasion via targeting AQP1.

Discussion

The present study demonstrated that miR‑133a‑3p expression was downregulated in CRC tissues compared with adjacent normal tissues. Moreover, decreased miR‑133a‑3p expression was associated with tumor stage. Similarly, the expression of miR‑133a‑3p was reduced and linked with clinicopathological parameters of non‑small cell lung cancer (30), hepatocellular carcinoma (31) and prostate cancer (18). In addition, miR‑133a‑3p has been found to be significantly downregulated in human papillomavirus‑infected oropharyngeal squamous cell carcinoma (32), bladder cancer (33), breast cancer (34) and oral squamous cell carcinoma (OSCC) (35). Consistent with the current data, hsa‑miR‑133a‑3p has been identified as selective marker for human colon cancer by extensive screening of miRNA populations (20). These data suggested that miR‑133a‑3p might be a tumor suppressor in CRC.

Further functional experiments showed that miR‑133a‑3p exerted suppressive effects on CRC cell proliferation, migration and invasion. As demonstrated by Zhou et al (19), miR‑133a‑3p is downregulated in CRC tissues and its overexpression inhibits cell proliferation and induces G1/S arrest in CRC cells. Different from this study, the current data not only highlighted the decreased miR‑133a‑3p expression in CRC tissues, but also indicated its association with the tumor stage of patients with CRC. The in vitro data not only showed the suppressive role of miR‑133a‑3p on cell proliferation, but also manifested its suppressive effects on cell migration and invasion in CRC cells. On the other hand, addition of miR‑133a‑3p reduces cell viability, and increases apoptosis and cell cycle arrest in retinoblastoma (16). miR‑133a‑3p‑overexpression could block the activation of autophagy to ruin the abnormal glutaminolysis and further inhibit the proliferation and migra-
tion/invasion of gastric cancer cells (17). Overexpression of miR-133a-3p suppresses the proliferation, invasion and mitosis of OSCC cells (35). Upregulating miR-133a-3p inhibits cancer stem cell-like phenotypes in vitro and in vivo, as well as attenuates anoikis resistance in vitro in prostate cancer cells (18). In gallbladder carcinoma, Huang et al (14) demonstrated the inhibitory effects of miR-133a-3p on the proliferation, migration and invasion in vitro. These previous studies demonstrate the suppressive effects of miR-133a-3p on the proliferation and malignant behavior of CRC cells.

A previous study by Zhou et al (19) demonstrated that miR-133a-3p suppresses cell proliferation with G1 arrest of CRC cells by targeting SUMO-specific protease 1 expression. Yu et al (36) revealed that miR-133a-3p targets RhoA, which is involved in cytoskeletal reorganization that drives cell motility in CXCL12/CXCR4-induced CRC progression. The present study validated that AQP1 was another target of miR-133a-3p and negatively regulated by miR-133a-3p in CRC cells. Clinical analysis showed that increased AQP1 mRNA expression level was associated with tumor stage. The in vitro data suggested that miR-133a-3p exerted its suppressive role in CRC cells might via targeting AQP1. In fact, AQP expression is increased in CRC tissues using immunohistochemical staining (37). AQP1 was identified as a promising candidate as a prognostic biomarker for CRC at TNM stage II and III (26,27). Kang et al (38) found a significant correlation between AQP1 expression and lymph node metastasis in patients with surgically resected colon cancer. Functionally, forced overexpression of AQP1 has been shown to increase angiogenesis, invasion and metastasis in pre-clinical studies of colon adenocarcinoma (39). In the other tumors, including ovarian cancer (23), osteosarcoma (24), breast cancer (40) and melanoma (41), knockdown of AQP1 inhibits cell proliferation and invasion. Notably, the association between miR-133a-3p and AQP1 has also been described in endothelial cells (28). Based on these previous studies, it was thus speculated that miR-133a-3p expression also influences AQP1 not only in non-malignant endothelial cells but also in CRC. Importantly, AQP1 was involved in miR-133a-3p-mediated regulation of CRC cell functions, functioning as an oncogene. Meanwhile, there were some limitations to the present study, including the lack of in vivo validation for the function of miR-133a-3p/AQP1 axis. Additional targets of miR-133a-3p and the correlation between them should be explored, as well as the use of additional clinical samples to investigate the role of the miR-133a-3p/AQP1 axis in the prognosis of patients with CRC.

In summary, low miR-133a-3p expression levels and high AQP1 expression levels were associated with tumor stage. The current data further showed that miR-133a-3p-overexpression suppressed CRC cell proliferation, migration and invasion, which might be associated with suppression of AQP1 induced by miR-133a-3p. These results may improve our understanding of the role of miR-133a-3p in AQP1-induced proliferation, migration and invasion of CRC, which provides potential therapeutic targets for CRC treatment.

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