

Lewis E. Braverman Award Lecture



Enhancing Iodide Transport in Thyroid & Breast Cancer

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No Disclosures

Learning Objectives

- Describe the pathways that regulate iodide uptake in normal tissue.
- Understand the mechanisms for reduced iodide uptake in thyroid and breast cancers.
- Describe the approaches to augment NIS expression in cancer.
- Evaluate the potential for iodide uptake augmentation in cancer therapy.

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- Modifying NIS membrane insertion to enhance iodide uptake in thyroid and breast cancer.

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The relative to absolute lack of natural avidity for I^{131} of practically all cancers of the thyroid and the natural variability in function of those tumors which do concentrate radioiodine.

1. The limitations to the treatment of the thyroid with radioactive iodine are defined as follows:

a. The relative to absolute lack of natural avidity for I^{131} of practically all cancers of the thyroid and the natural variability in function of those tumors which do concentrate radioiodine.

b. The physician-induced impairment to natural or induced avidity for radioiodine of certain tumors, i.e., by the administration of iodine or iodine-containing drugs or by the administration of non-cancericidal amounts of radiation, isotopic or x-ray.

c. The damaging effects of the radiation from radioiodine on normal or vital tissues, i.e., the blood and blood-forming organs.

Transactions of the American Goiter Association 1951

TABLE 1. HUMAN BREAST TISSUE UPTAKE STUDIES

| Patient No. | Pathologic diagnosis | Excess of counts/min/mg (abnormal minus normal)* | SD |
|-------------|----------------------|--|----|
| 1 | Fibroadenoma | +40 | ±7 |
| 2 | Carcinoma | +144 | ±5 |
| 3 | Fibroadenoma | +44 | ±7 |
| 4 | Carcinoma | +28 | ±8 |
| 5 | Carcinoma | +46 | ±5 |
| 6 | Fibroadenoma | +18 | ±7 |

* Differences in ^{131}I uptake between normal and abnormal human breast tissue received at biopsy. Abnormal tissue counts were 36% higher than normal tissue counts ($P < 0.05$, Sign Test).

Human Breast Uptake of Radioactive Iodine

BERNARD A. ESKIN, MD, FACOG, JANET A. PARKER, MD, JAMES G. BASSETT, MD and DAVID L. GEORGE, PhD

Obstet Gynecol 44:398, 1974

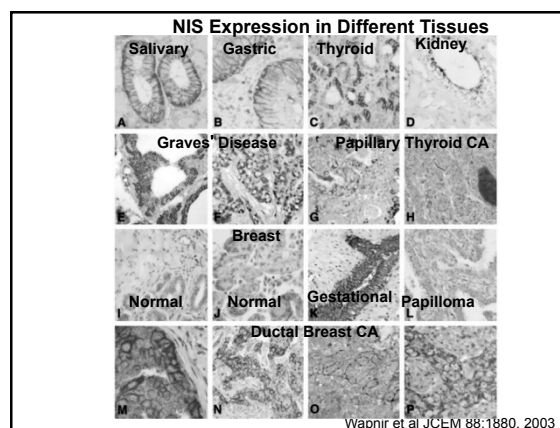
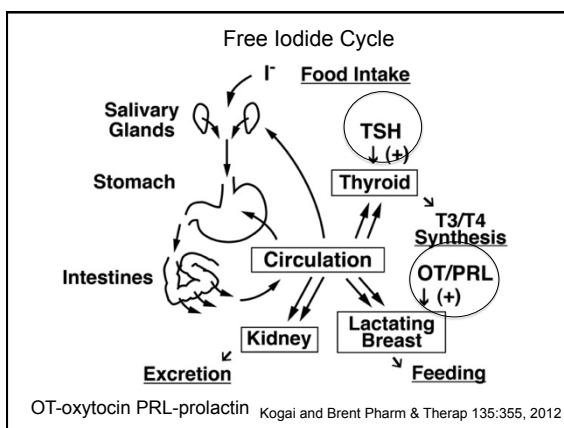
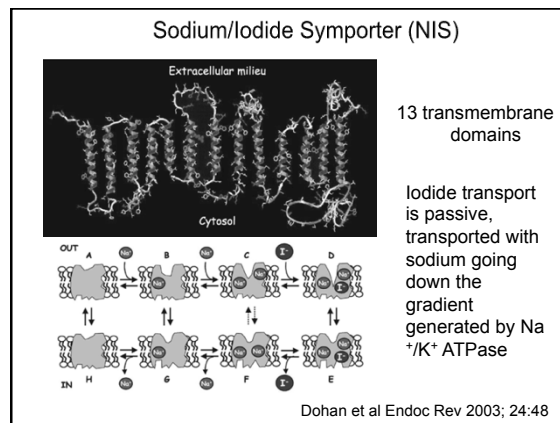
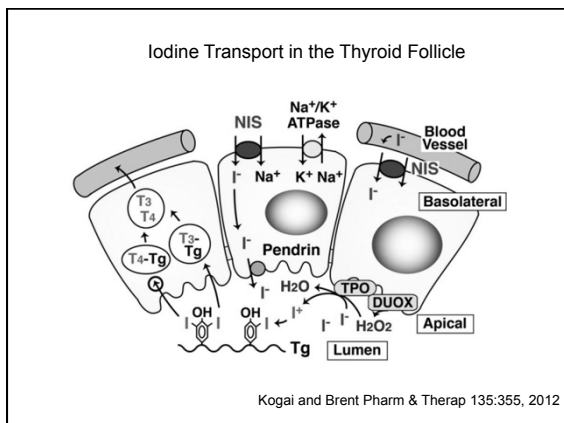
TABLE 2. COMPARISON OF ^{131}I UPTAKE VALUES: CLINICALLY NORMAL VERSUS CLINICALLY ABNORMAL BREASTS

| | No. of breasts | Mean uptake (%) (±SD) | 95% confidence limits |
|---------------------|----------------|-----------------------|-----------------------|
| Clinically normal | 57 | 6.9 ± 0.46 | ±0.9 |
| Clinically abnormal | 8 | 12.5 ± 1.02 | ±2.4 |

t: 5.04; $P < 0.005$

Bernard Eskin, MD-ATA Emeritus Member
Professor of Obstetrics and Gynecology
Drexel University College of Medicine

Eskin et al Obstet Gynecol 44:398, 1974

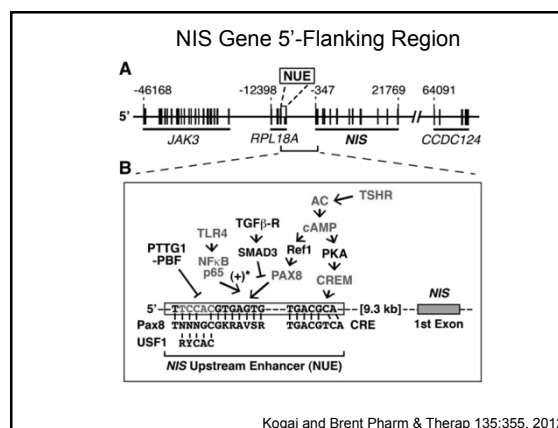
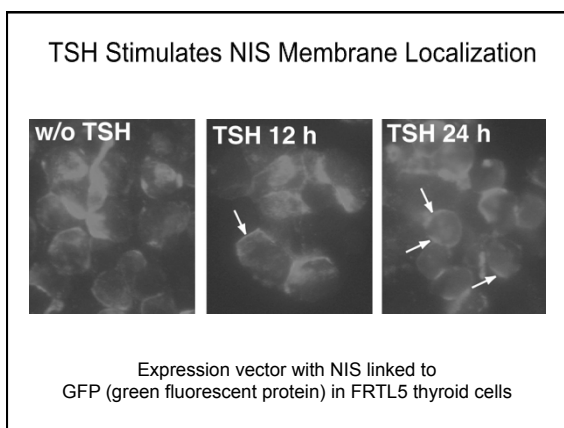
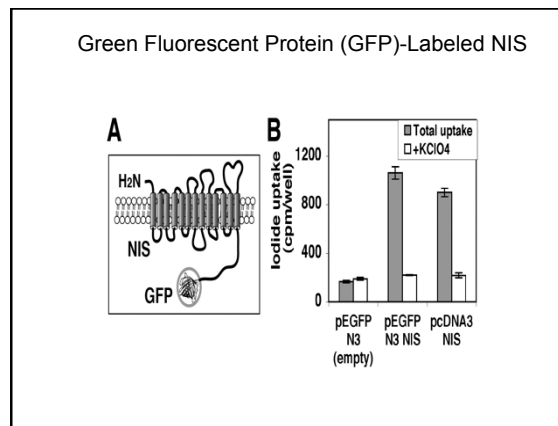
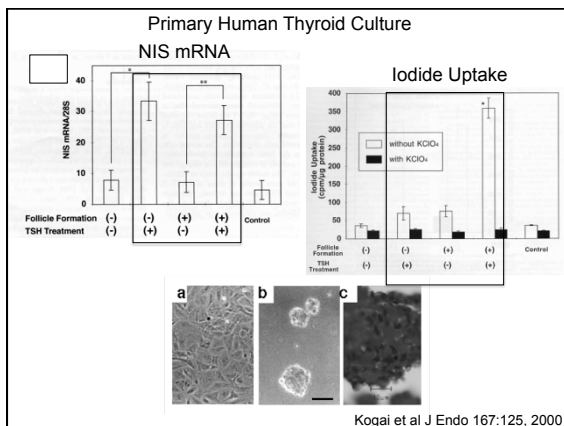


Hierarchy of Tissue NIS Activity

- Graves' disease/toxic nodule (TSH Receptor driven)
- Normal Thyroid (TSH Receptor driven)
- Lactating Breast
- Salivary Gland/Gastric Mucosa
- Choroid Plexus and Placenta (?)
- Thyroid Cancer (some stimulated by high concentration TSH)
- Breast Cancer

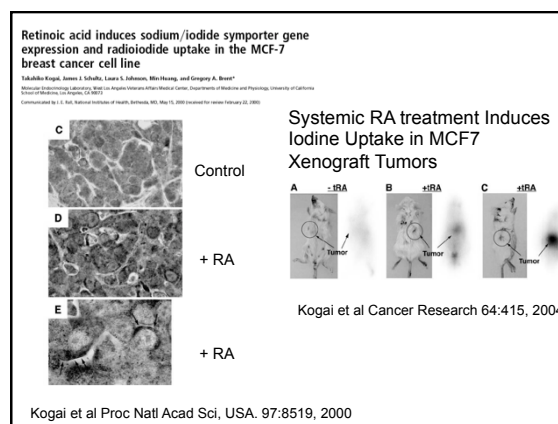
Enhancing Iodide Transport in Thyroid & Breast Cancer

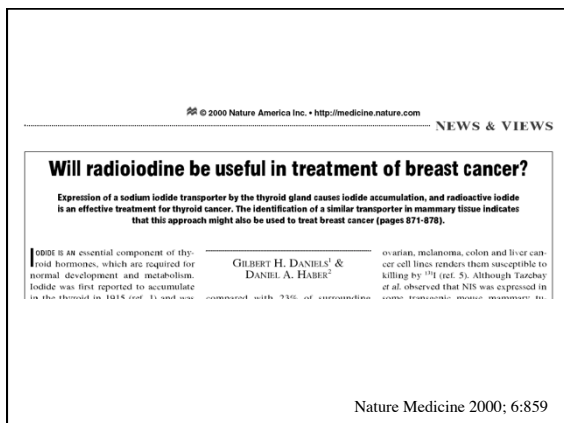
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NIS Induction in Thyroid Cancer

| Agent | In Vitro | Clinical |
|---|---------------------------|----------------------|
| TSH | ++++ | ++++ |
| Retinoids | + | +/- (~20% of tumors) |
| PPAR γ Agonists | + | +/- (anecdotal) |
| Histone Deacetylase Inhibitors (depsipeptide, trichostatin A) | ++ (also in rodent model) | - |
| Demethylation (5-azacytidine) | +/- | - |





NIS Regulation and Iodide Uptake

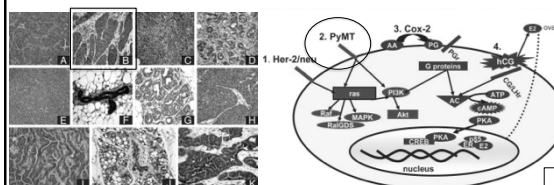
- NIS gene upregulation is necessary, but not sufficient, to increase iodide uptake.
- NIS gene regulation differs significantly between thyroid, which is TSH-dependent and breast.
- Retinoic acid (RA) regulates NIS gene expression in breast cancer, but high concentrations are required to augment iodide uptake. RA analogs and dexamethasone stimulate NIS at lower concentrations than all trans RA, but don't increase the maximal response.
- Approaches that augment NIS membrane insertion and function are likely more generalizable, have the potential to translate into improved therapies for thyroid and breast cancer, as well as cancers treated with NIS gene therapy.

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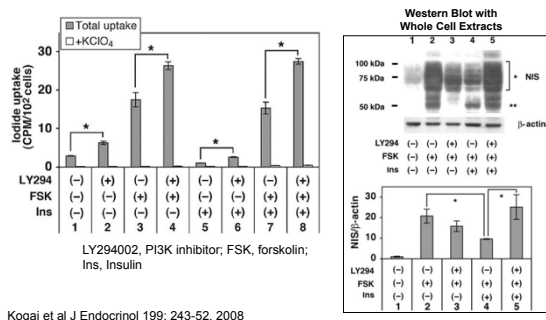
Signaling through 3',5'-Cyclic Adenosine Monophosphate and Phosphoinositide-3 Kinase Induces Sodium/Iodide Symporter Expression in Breast Cancer

KATHERINE A. B. KNOSTMAN, JE-YOEL CHO, KWON-YUL RYU, XIAOQIN LIN, JAMES A. M-CURRIEY, TIMOTHY H. LA, CATHERINE H. LIU, EMMA DI CARLO, RUTH KERI, MING ZHANG, DAE Y. HWANG, WILLIAM C. KISSEBERTH, CHARLES C. CAPEN, and SIBBY M. JIANG

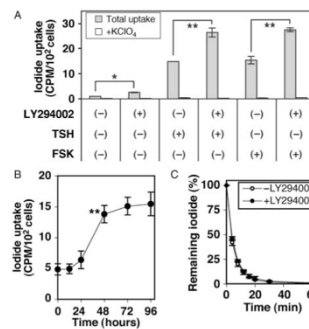


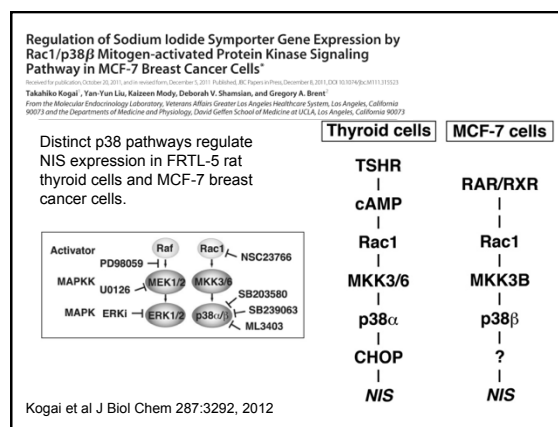
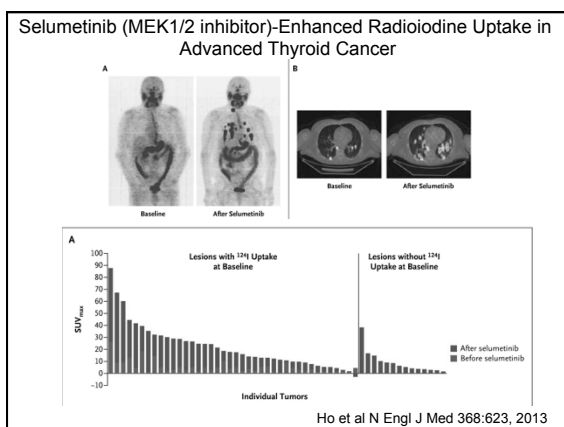
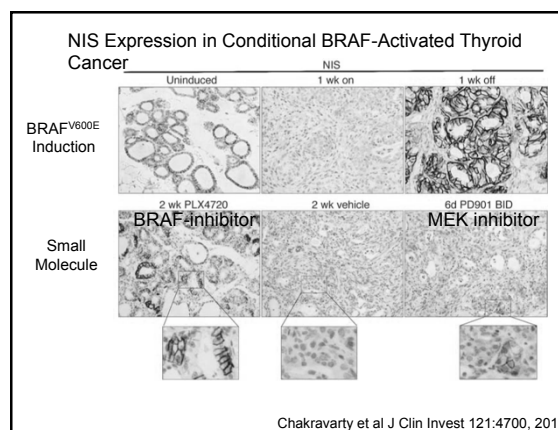
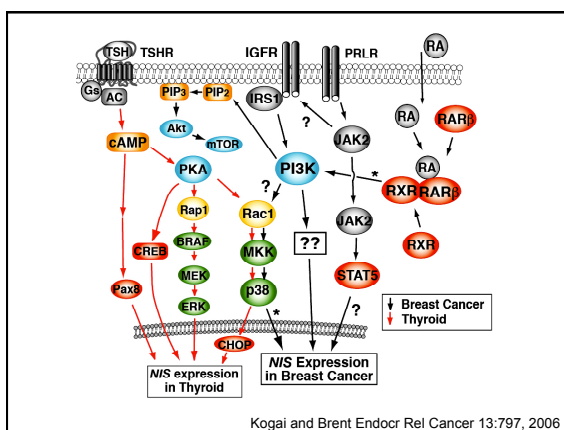
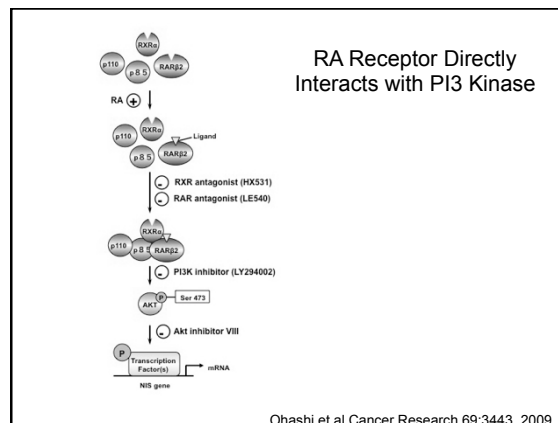
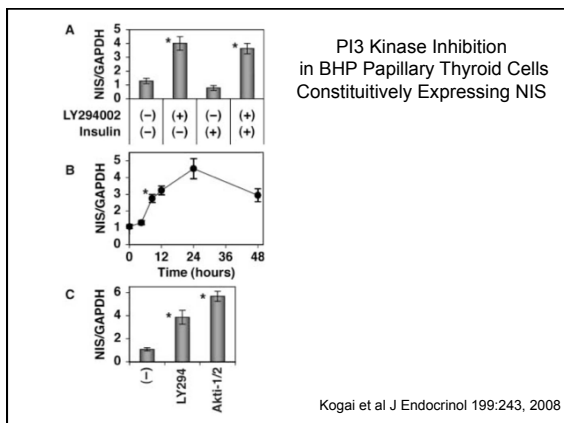
Knostman et al JCEM 89:5196, 2004

PI3K Inhibition Induces NIS Expression in FRTL5 Rat Thyroid Cells

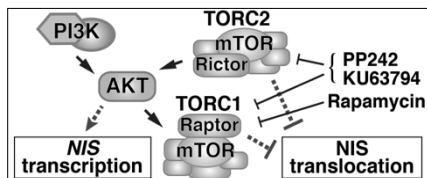


PI3 Kinase Inhibition and Iodide Uptake in FRTL5 Thyroid Cells



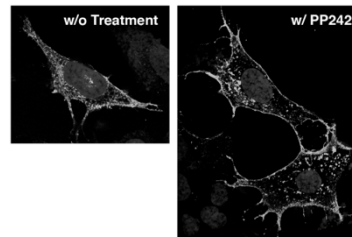


PI3K/AKT/mTOR pathway and NIS regulation



Kogai and Brent *Pharm & Therap* 135:355, 2012

Expression of NIS-GFP fusion protein in BHP 2-7 cells

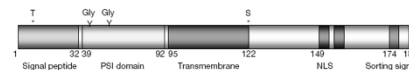


➤ Cells were transfected with pEGFP-NIS, treated with or without PP242 (2μM), and observed with confocal microscopy (objective lens, 63x).

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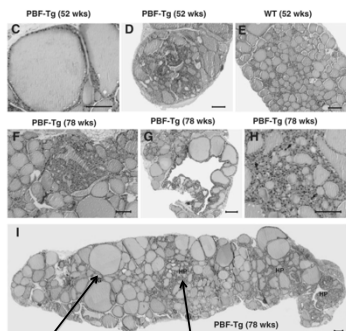
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PBF-(Pituitary Tumor Transforming Gene) Binding Factor



- Professor Chris McCabe, Birmingham University
- Collaborator-Professor Jayne Franklin, Birmingham University
- PBF binds to PTTG
- Upregulated in thyroid and breast cancer
- Binds NIS and reduces membrane insertion
- Src phosphorylates PBF Tyrosine 174, required for NIS interaction.
- The Src inhibitor, PP1, reduced PBF-NIS interaction and increased iodide uptake in thyroid cancer cells.
- Smith *et al* JCEM 98:2876, 2013

Progressive Thyroid Growth and Appearance of Macrofollicular and Hyperplastic Lesions Associated with PBF Overexpression



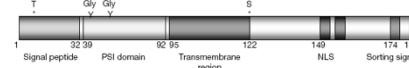
Increased Expression
TSH-Receptor
Cyclin D1

Reduced Expression
NIS

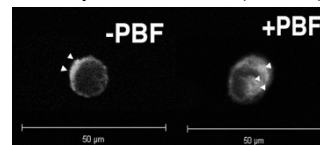
Iodide uptake
reduced 70%

Read *et al* *Cancer Research* 71:6153, 2011

PBF-(Pituitary Tumor Transforming Gene) Binding Factor

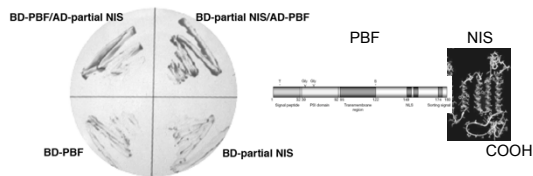


Thyroid Cancer Cells (BHP 2-7)



Expression vector with NIS linked to GFP (green fluorescent protein)

Interaction between NIS C-terminal portion and PBF reproduced in yeast two hybrid system



Combination of full length NIS and PBF did not result in yeast growth.

Yeast system utilized to screen small molecule compounds in library from the Developmental Therapeutics Program at National Cancer Institute, with 6 positive compounds from about 15,000 screened.

Summary and Future Directions

- Signal transduction pathway inhibition and stimulation shows significant promise for enhancing radioiodine treatment for thyroid, breast, and other cancers.
- Many of the agents tested act at multiple sites, influencing NIS gene expression, NIS mRNA stability, NIS protein transport and membrane insertion.
- Combination of agents that increase NIS gene expression and membrane insertion should be explored.
- The relatively short time period required to upregulate iodide uptake for adequate radioiodide treatment should permit the use of effective agents that might otherwise be rejected due to long-term toxicity.
- An improved understanding the role of postranslational modifications of NIS, important interacting proteins, cytoplasmic transport and membrane insertion will be critical to successful treatment strategies.