

## ORIGINAL ARTICLE

# The function of DREAM gene mediated by NF- $\kappa$ B signal pathway in the pathogenesis of osteosarcoma

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## Summary

**Purpose:** To explore the function of DREAM gene mediated by NF- $\kappa$ B signal pathway in the pathogenesis of osteosarcoma.

**Methods:** This study included 13 Sprague Dawley (SD) rats with osteosarcoma (treatment group) and 13 healthy rats (control group). NF- $\kappa$ B, DREAM and P105 mRNAs expression levels were determined using quantitative PCR (qPCR). The expression levels of NF- $\kappa$ B, DREAM and P105 proteins were evaluated using ELISA and western blot. Also, DREAM protein expression in rats was determined by immunofluorescence.

**Results:** NF- $\kappa$ B and DREAM levels in the treatment group were significantly higher than those in the control group ( $p < 0.05$ ). However, P105 mRNA expression level in the treatment group was significantly lower than in the control group ( $p < 0.05$ ). Results obtained from ELISA and western blot showed that NF- $\kappa$ B and DREAM expression levels in

the treatment group were significantly higher than in the control group ( $p < 0.05$ ). NF- $\kappa$ B and DREAM levels in the treatment group were  $4.3 \pm 0.12 \mu\text{g/l}$  and  $6.8 \pm 0.21 \mu\text{g/l}$ , respectively. These levels in the control group were  $0.96 \pm 0.11 \mu\text{g/l}$  and  $1.25 \pm 0.18 \mu\text{g/l}$ , respectively. P105 expression level in the treatment group was  $0.37 \pm 0.11 \mu\text{g/l}$  which was significantly lower than that in the control group ( $1.63 \pm 0.21 \mu\text{g/l}$ ) ( $p < 0.05$ ). Immunofluorescence results showed that DREAM expression level was significantly higher in the treatment group ( $p < 0.05$ ).

**Conclusion:** NF- $\kappa$ B signal pathway promoted the expression of DREAM gene and also promoted the pathogenesis and worsening of osteosarcoma.

**Key words:** DREAM gene, glial cells, immunofluorescence, NF- $\kappa$ B signal pathway, osteosarcoma, P105 gene

## Introduction

Malignancies caused by habits, lifestyle and environmental factors are increasing [1]. Osteosarcoma is a malignancy of bone with increased morbidity and its clinical manifestations include persistent and progressive ostealgia leading to intractable pain [2], which impact the patient quality of life (QoL). Statistical data [3] show that the morbidity of osteosarcoma increases by 0.68% each year [4]. In 2015, there were 124,000 patients with osteosarcoma in China, which emphasizes the importance of investigating the mechanism of osteosarcoma occurrence and development as well

as the need for developing of new diagnostic and treatment methods [5]. Recent studies found that NF- $\kappa$ B has been involved in many signaling pathways [6]. For example, abnormal levels of key modulators such as Toll Like Receptor 4 (TLR4) in NF- $\kappa$ B signaling pathway were detected in breast and colon cancers [7,8]. It has been shown that the expression level increased with deterioration of the patient condition. It was reported that the downstream regulatory element antagonist modulator (DREAM) was an important member of neuronal calcium sensor (NCS) family, and was involved in

intracellular release of neurotransmitters, the activity of Ca<sup>2+</sup> channel and gene transcription [9]. It has also been reported that DREAM could bind to the promoter region and inhibit the expression of the target genes [10]. DREAM has been reported to be involved in the transmission of pain, yet the relationship between DREAM and osteosarcoma, and the pathway through which DREAM is involved in this disease is not completely understood [11].

In this study we tried to explore the relationship between NF- $\kappa$ B-based DREAM gene and osteosarcoma in order to provide theoretical and experimental evidence for the diagnosis and treatment of this malignant disease.

## Methods

### General information

In this study, 13 SD rats with osteosarcoma, aged 4.1±1.2 weeks on average were used as the treatment group. This included 5 male and 8 female animals. Thirteen healthy SD rats (5 males and 8 females) were used for the control group. The average age for the control group was 4.5±1.1 weeks.

### Reagents

RAN extract kit (Xinmai Biological Technology Co., Ltd., China), Quantitative Fluorescence PCR kit (ABI, USA), rabbit anti-human NF- $\kappa$ B, rabbit anti-human DREAM, rabbit anti-human P105 monoclonal antibodies (ACRIS, USA), HRP-labeled mouse anti-rabbit polyclonal antibodies (secondary antibodies, Suzhou, Jinweizhi, China), fluorescence-labeled secondary antibody (Thermo, USA), 10% goat serum (Suzhou, Bosai, China), immunohistochemistry kit (Roche, USA). Other reagents were purchased from Shanghai Guoyao Co., Ltd, China.

### Instruments

Quantitative Fluorescence PCR amplifier (ABI, USA), microplate reader (Beijing Liuyi, China), protein microelectrophoresis apparatus (Beijing Liuyi, China), gel imaging system (BIO-RAD, USA), low-temperature and high-speed centrifuge (Hellich, Germany), fluorescence microscope (Olympus, Japan).

### RNA extraction

Samples were thawed and 500  $\mu$ l RNA Plus were added. Samples were then centrifuged at 1000 g for 10 min at 4°C and the supernatant was discarded. Chloroform (200  $\mu$ l) was added and mixed well, and the mixture was placed on ice for 15 min. Samples were then centrifuged at 1000 g for 15 min at 4°C. The supernatant was transferred into a RNase-free EP tube, and equal volume of isopropanol was added. After 10 min on ice, samples were centrifuged at 1000 g for 5 min at 4°C and the supernatant was discarded. Ethanol (750  $\mu$ l, 75%) was added and mixed well. Samples were then centrifuged at 1000 g for 10 min at 4°C and the su-

pernatant was discarded. Residual ethanol was removed and appropriate volume of RNase-free water was added. The extracted RNA was weighted and used for reverse transcription.

### qPCR

qPCR was performed according to the manufacturer's instructions (TAKARA, Tokyo, Japan). Primers were synthesized by Shanghai Sangon Biological Technology Co., Ltd., China. The sequences of these primers are presented in Table 1.

**Table 1.** The primers for qPCR

Primers	Sequences
NF- $\kappa$ B-F	CTAGCTAGCTACGGCATCGATCG
NF- $\kappa$ B-R	CGTAGGAGTCGATCGATATAGCTACG
Dream-F	CGTAGGCTAGCATGATCGATAGCC
Dream-R	CTAGGAGATCGATCGATCGATCGAC
P105-F	CGTAGCTAGCTACGAGGCATCGATC
P105-R	CGTAGCTACGATCGATAGATCAGTC
GAPDH-F	GTCGATGGCTAGTCGTAGCATCGAT
GAPDH-R	TGCTAGCTGGCATGCCCGATCGATC

### ELISA

ELISA was performed as described in the instructions (TAKARA). The protein standard was diluted (1:50) with the Assay Buffer in the ELISA kit, and the standard curve was plotted. The sample was diluted with PBS (pH=7.2, 1:100) and 100  $\mu$ l of sample were added into each well of 96-well plates. The sample was incubated with 50  $\mu$ l assay buffer at room temperature for 2 hrs, and 3,3', 5,5' tetramethylbenzidine (TMB) substrate was then added for visualization. The absorbance was measured at a wavelength of 495 nm. The NF- $\kappa$ B, DREAM and P105 levels were calculated based on the standard curve [12].

### Western blotting

This was carried out according to the manufacturer's instructions for protein extraction (AXYGEN, Tewksbury, USA). Samples (0.5 mg) were collected from in both groups and 20  $\mu$ l of the sample were used for SDS-PAGE. Proteins were then transferred onto PVDF membrane, which was blocked for 2 hrs. The membrane was incubated with primary antibody (1:1000) at room temperature followed by 2-h incubation with secondary antibody at room temperature. The membrane was washed 5 times (10 min each) [13] and finally electrochemical luminescence (ECL) was used for visualization [9].

### Immunohistochemistry procedures

Samples obtained from both groups were fixed with 10% formaldehyde and embedded with paraffin. Paraffin sections (4  $\mu$ m in thickness) were fixed on the slides and heated at 70°C for 1 hr. Sections were de-waxed with xylol and dehydrated with graded absolute ethanol; residual ethanol was removed by ultrapure water. The sections were washed with PBS (pH 7.2) for 5 min×5 times. Finally, the sections were placed in an

autoclave (121°C, 2 min), and after cooling, the sections were placed in phosphate buffer saline (PBS) at room temperature for 30 min. The sections were incubated in 0.3% Triton X-100 buffer for 30 min and washed with 0.01 M PBS for 5 min (2-3 times). The sections were then blocked in 10% goat serum for 2 hrs and incubated with primary antibody (1:1000) at room temperature for 2 hrs and then washed with PBS for 10 min (3-5 times). Then, the sections were incubated with secondary antibody (1:700) at room temperature for 20 min and washed with PBS for 10 min (3-5 times). Finally, the sections were placed on polylysine-coated slides, mounted with glycerol:PBS (7:3) and observed under a microscope.

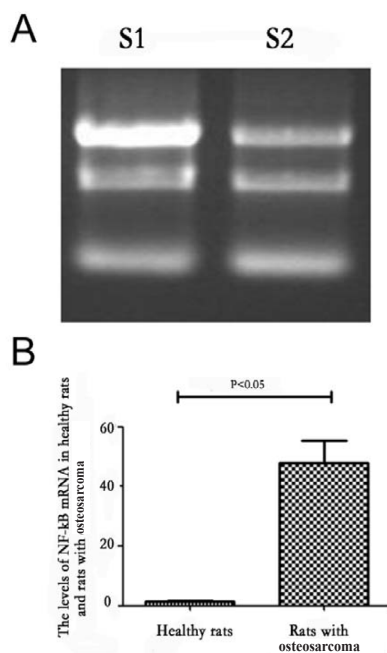
#### Statistics

SPSS version 19.0 software (IBM, Armonk, NY, USA) was used for statistical analysis. Categorical data were compared by chi-square test with  $\alpha = 0.05$ ,  $p < 0.05$  indicating significant difference and  $\alpha = 0.01$ ,  $p < 0.05$  indicating very significant difference.

## Results

#### NF- $\kappa$ B mRNA expression level

Total RNA was extracted and RNA was examined with electrophoresis. As shown in Figure 1A, the total RNA was not significantly degraded, indicating that the extracted RNA could be used in qPCR (Figure 2). NF- $\kappa$ B mRNA expression level in the treatment group was 48.2-fold higher than that in the control group (Figure 1) ( $p < 0.05$ ).



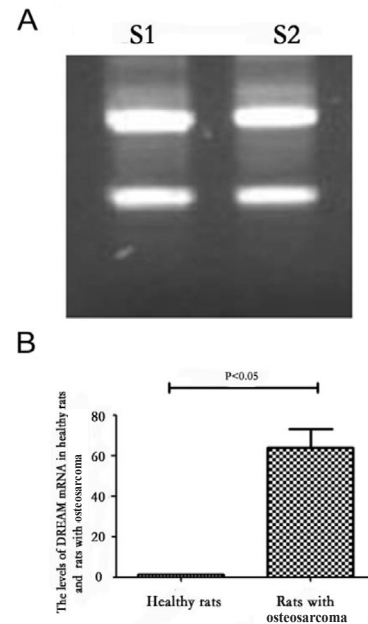
**Figure 1.** NF- $\kappa$ B mRNA expression level in healthy rats and rats with osteosarcoma determined by electrophoresis and qPCR. **A:** The electrophoresis of total RNA, S1 and S2 represents the total RNA extracted from different rats; **B:** qPCR results.

#### DREAM mRNA expression level

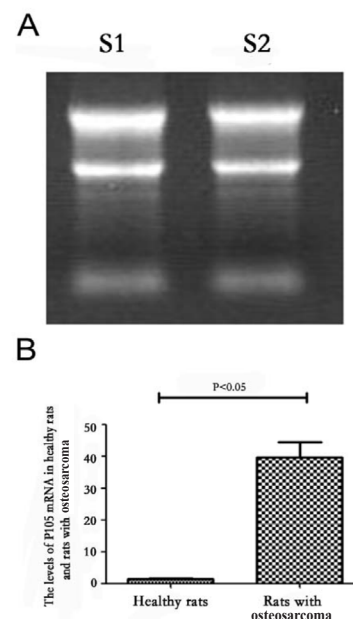
DREAM mRNA in the treatment group was 65.3-fold higher than that in the control group (Figure 2) ( $p < 0.05$ ).

#### P105 mRNA expression level

P105 mRNA expression level in the treatment group was 40.4-fold higher than that in the control group (Figure 3) ( $p < 0.05$ ).



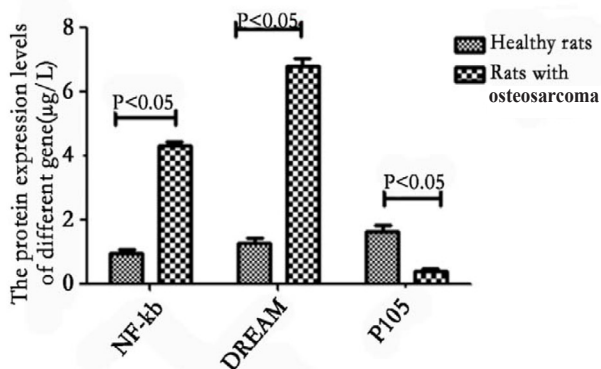
**Figure 2.** DREAM mRNA expression level in healthy rats and rats with osteosarcoma determined by electrophoresis and qPCR. **A:** The electrophoresis of total RNA, S1 and S2 represents the total RNA extracted from different rats; **B:** qPCR results.



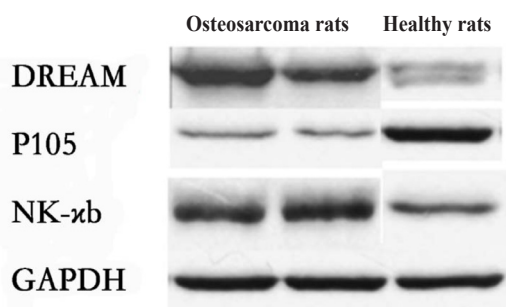
**Figure 3.** P105 mRNA expression level in healthy rats and rats with osteosarcoma determined by electrophoresis and qPCR. **A:** The electrophoresis of total RNA, S1 and S2 represents the total RNA extracted from different rats; **B:** qPCR results.

*NF-kB, DREAM and P105 proteins expression levels*

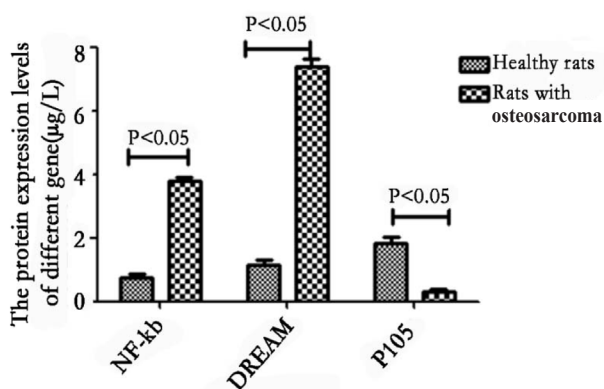
Results obtained from ELISA revealed that the expression levels of NF-kB ( $4.3 \pm 0.12 \mu\text{g/l}$ ) and DREAM ( $6.8 \pm 0.21 \mu\text{g/l}$ ) in the treatment group were significantly higher than those in the control group ( $0.96 \pm 0.11 \mu\text{g/l}$ ,  $1.25 \pm 0.18 \mu\text{g/l}$ , respectively) ( $p < 0.05$ ) (Figure 4). P105 protein expression level the treatment group ( $0.37 \pm 0.11 \mu\text{g/l}$ ) was significantly lower than that in the control group ( $1.63 \pm 0.21 \mu\text{g/l}$ ) ( $p < 0.05$ ) (Figure 4).



**Figure 4.** NF-kB, DREAM and P105 expression levels in healthy rats and rats with osteosarcoma (ELISA).



**Figure 5.** NF-kB, DREAM and P105 expression levels in healthy rats and rats with osteosarcoma (Western blot). NF-kB and DREAM were significantly higher and P105 was significantly lower in rats with osteosarcoma compared with healthy rats.



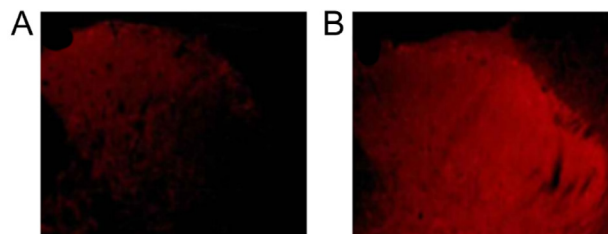
**Figure 6.** Semi-quantitative measurement of the Western blot results. Expression of NF-kB and DREAM were significantly higher and P105 was significantly lower in rats with osteosarcoma compared with healthy rats.

Results obtained from western blot revealed that the expression levels of NF-kB and DREAM in the treatment group were significantly higher than those in the control group ( $p < 0.05$ ).

Compared with the control group, P105 protein expression level was significantly lower than that in the treatment group ( $p < 0.05$ ; Figure 5). These results were consistent with the semi-quantitative measurement of the proteins in the gel imaging system (Figure 6).

*Immunofluorescence*

The intensity of fluorescence in the tissue lesions in the treatment group was significantly higher than that in the control group (Figure 7). This suggested that the DREAM protein expression level in osteosarcoma tissue was significantly higher than that in the bone tissue in healthy rats.



**Figure 7.** DREAM expression levels in healthy rats and rats with osteosarcoma (immunofluorescence). Red indicates positive expression of DREAM. **A:** healthy rats. **B:** rats with osteosarcoma.

**Discussion**

Previous evidence [13] showed that anaesthetics injection could significantly inhibit nerve ending, affect the release of neurotransmitters in nerve cells, and delay nerve conduction [14]. Thus inhibition of nerve cells could indirectly inhibit the femoral pain caused by osteosarcoma. In this study, we detected significantly higher levels of NF-kB and DREAM mRNAs expression in rats with osteosarcoma suggesting that NF-kB and DREAM were significantly related to osteosarcoma. However, the expression level of P105 (a protein that inhibited NF-kB) was significantly lower in rats with osteosarcoma. NF-kB and DREAM protein expression levels were significantly higher in rats with osteosarcoma, however on the contrary, the expression level of P105 was significantly lower in rats with osteosarcoma, which was consistent with the result of qPCR.

We concluded that DREAM gene could mediate the pathogenesis and lead to deterioration of osteosarcoma through NF-kB signaling pathway.

This study did not investigate the interaction between DREAM gene and osteosarcoma cells [15], and how DREAM gene promoted the generation and proliferation of osteosarcoma cells [16]. A previous study [17] showed that DREAM gene could regulate the cell cycle [18] and accelerate cell pro-

liferation through promoting the production of tubulins [19,20].

### Conflict of interests

The authors declare no conflict of interests.

### References

- Song H, Han Y, Pan C et al. Activation of Adenosine Monophosphate-activated Protein Kinase Suppresses Neuroinflammation and Ameliorates Bone Cancer Pain: Involvement of Inhibition on Mitogen-activated Protein Kinase. *Anesthesiology* 2015;123:1170-1175.
- Liu M, Liu Y, Hou B et al. Kinesin superfamily protein 17 contributes to the development of bone cancer pain by participating in NR2B transport in the spinal cord of mice. *Oncol Rep* 2015;33:1365-1371.
- Nijs J, Meeus M, Versijpt J et al. Brain-derived neurotrophic factor as a driving force behind neuroplasticity in neuropathic and central sensitization pain: a new therapeutic target? *Exp Opin Ther Targets* 2015;19:565-576.
- Ni K, Zhou Y, Sun Y, Liu Y, Gu XP, Ma ZL. Intrathecal injection of selected peptide Myr-RC-13 attenuates bone cancer pain by inhibiting KIF17 and NR2B expression. *Pharmacol Biochem Behav* 2014;122:228-233.
- Xie M, Wang SH, Lu ZM, Pan Y, Chen QC, Liao XM. UCH-L1 Inhibition Involved in CREB Dephosphorylation in Hippocampal Slices. *J Mol Neurosci* 2014;53:59-68.
- Chen Y, Chen AQ, Luo XQ et al. Hippocampal NR2B-containing NMDA receptors enhance long-term potentiation in rats with chronic visceral pain. *Brain Res* 2014;1570:43-53.
- Pan R, Di H, Zhang J et al. Inducible Lentivirus-Mediated siRNA against TLR4 Reduces Nociception in a Rat Model of Bone Cancer Pain. *Mediat Inflamm* 2015;2015:523896.
- Shi L, Zhang HH, Xiao Y, Hu J, Xu GY. Electroacupuncture Suppresses Mechanical Allodynia and Nuclear Factor Kappa B Signaling in Streptozotocin-Induced Diabetic Rats. *CNS Neurosci Ther* 2012;19:83-90.
- Ye Y, Dang D, Viet CT, Dolan JC, Schmidt BL. Analgesia Targeting IB4-Positive Neurons in Cancer-Induced Mechanical Hypersensitivity. *J Pain* 2012;13:524-531.
- Kiyatkin ME, Feng B, Schwartz ES, Gebhart GF. Combined genetic and pharmacological inhibition of TRPV1 and P2X3 attenuates colorectal hypersensitivity and afferent sensitization. *Gastrointest Liver Physiol* 2013;305:638-648.
- Gui Q, Xu C, Zhuang L et al. A new rat model of bone cancer pain produced by rat breast cancer cells implantation of the shaft of femur at the third trochanter level. *Cancer Biol Ther* 2013;14:193-199.
- Mohana-Kumaran N, Hill DS, Allen JD, Haass NK. Targeting the intrinsic apoptosis pathway as a strategy for melanoma therapy. *Pigment Cell Melanoma Res* 2014;27:525-539.
- Maetschke SR, Madhamshettiwar PB, Davis MJ, Ragan MA. Supervised, semi-supervised and unsupervised inference of gene regulatory networks. *Brief Bioinformatics* 2014;15:195-211.
- Zhong Y, Qin Y, Dang L et al. Alteration and localization of glycan-binding proteins in human hepatic stellate cells during liver fibrosis. *Proteomics* 2015;15:3283-3295.
- Cui H, Li H, Li QL, Chen J, Na Q, Liu CX. Dickkopf-1 induces apoptosis in the JEG3 and BeWo trophoblast tumor cell lines through the mitochondrial apoptosis pathway. *Int J Oncol* 2015;46:2555-2561.
- Li M, Lin kong L, Gou Y, Yang F, Liang H. DNA binding, cytotoxicity and apoptosis induction activity of a mixed-ligand copper (II) complex with taurine Schiff base and imidazole. *Mol Biomol Spectroscopy* 2014;128:686-693.
- Sivakamavalli J, Selvaraj CB, Singh SK, Vaseeharan B. Exploration of protein-protein interaction effects on  $\alpha$ -2-macroglobulin in an inhibition of serine protease through gene expression and molecular simulations studies. *J Biomol Struct Dynamics* 2014;32:1841-1854.
- Lamb A, Chen JJ, Blanke SR, Chen LF. Helicobacter pylori activates NF- $\kappa$ B by inducing UBc13-mediated ubiquitination of lysine 158 of TAK1. *J Cell Biochem* 2013;114:2284-2292.
- Chou YE, Hsieh MJ, Chiou HL et al. CD44 Gene Polymorphisms on Hepatocellular Carcinoma Susceptibility and Clinicopathologic Features. *BioMed Res Int* 2014;2014:231474.
- Liu Y, Tang W, Xie L et al. Prognostic significance of dickkopf-1 overexpression in solid tumors: a meta-analysis. *Tumor Biol* 2014;35:3145-3154.