

Internal tandem duplication and tyrosine kinase domain mutations in *FLT3* alter the response to daunorubicin in Ba/F3 cells

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Abstract. Internal tandem duplication (ITD) and activating point mutations, mainly at aspartic acid 835 in the tyrosine kinase domain (TKD), are frequently identified in the Fms-related tyrosine kinase 3 (*FLT3*) receptor gene in acute myeloid leukemia. The ITD in *FLT3* (*FLT3*-ITD) confers resistance to several chemotherapeutic drugs; however, the relative effects of *FLT3*-ITD and *FLT3*-TKD mutations on the efficacy of these drugs have not been reported. In the present study, ITD or TKD mutant forms of *FLT3* in Ba/F3 cells were expressed, as in the absence of interleukin-3 (IL-3) the growth of these cells is completely dependent on *FLT3* oncogenic signals. As a result, the 50% effective dose for daunorubicin was significantly higher in both Ba/F3-*FLT3*-ITD clones, and also in one of the two Ba/F3-*FLT3*-TKD clones when cells were cultured without IL-3. This phenomenon was not observed for cytarabine in either Ba/F3-*FLT3*-ITD or Ba/F3-*FLT3*-TKD cells. Collectively, these results indicate that ITD and TKD mutations in *FLT3* may confer daunorubicin resistance in Ba/F3 cells.

Introduction

Fms-like tyrosine kinase 3 (*FLT3*) is a member of the class III receptor tyrosine kinase receptor family (1) and is the most frequently mutated gene (20-30%) in acute myelogenous leukemia (AML) (2-4). Activating mutations, as well as overexpression of *FLT3*, are prevalent in AML, with a role in leukemogenesis (3,5-8). In adult AML, ~24% of such mutations are internal tandem duplications (ITD) in the juxtamembrane domain (2,3), which result in ligand-independent dimerization and tyrosine phosphorylation of the receptor (9). In addition, activating point mutations in the *FLT3* tyrosine kinase domain

(TKD; *FLT3*-TKD), mainly at aspartic acid 835, are identified in ~7% of AML patients (10).

ITD in *FLT3* (*FLT3*-ITD) is associated with a higher leukocyte count, increased relapse risk, decreased disease-free survival (DFS) and decreased overall survival (OS) (11). Furthermore, multivariate analyses have shown that *FLT3*-ITD is the most significant factor for predicting an adverse outcome in AML (11-14). By contrast, *FLT3*-TKD mutations have a smaller effect compared with *FLT3*-ITD, but tend to worsen the DFS and OS (10), with the differences being statistically significant for OS in patients aged ≤60 years (15).

FLT3-ITD alters chemotherapy responses *in vitro* and *in vivo* and confers resistance to doxorubicin, which depends on p53 (16). Additionally, DNA repair contributes to the *FLT3*-ITD drug-resistant phenotype of primary AML (17). Several studies demonstrate drug resistance conferred by *FLT3*-ITD (16,18,19); however, thus far, no studies have demonstrated the effect of mutations in the *FLT3* TKD on anticancer drug resistance.

The present study examined the effects of *FLT3*-ITD and *FLT3*-TKD on cytotoxic drugs by employing an IL-3 dependent cell line, Ba/F3. In this cell line, interleukin-3 (IL-3)-independent cell growth occurs in response to stably transduced oncogenic signaling, such as via *FLT3*-ITD and -TKD (20). This system was used to evaluate the effect of *FLT3*-ITD and -TKD oncogenic signals on the cytotoxicity of daunorubicin (DNR) and cytarabine (Ara-C). As a result, *FLT3*-ITD and -TKD signals were observed to alter the response to DNR.

Materials and methods

Generation of Ba/F3 cells expressing *FLT3*-ITD and *FLT3*-TKD. Our previous studies established the Ba/F3 *FLT3*-WT and -ITD cells (6,21). To generate stably expressing Ba/F3-*FLT3*-TKD cells, pcDNA *FLT3*-TKD (D835Y) was generated using pcDNA*FLT3*-WT (6) and the Quick change site directed mutagenesis kit XL (Stratagene, La Jolla, CA, USA) with the following primers: Sense, 5'-CTTTGGATT GGCTCGATATATCATGAGTGATTC-3' and anti-sense, 5'-GAATCACTCATGATATATCGAGCCAATCCAAAG-3'. The construct was confirmed by sequence analysis and transfected into Ba/F3 cells using a CLB-Transfection device (Lonza, Basel, Switzerland). Stably transfected Ba/F3 clones

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were isolated by limiting dilution and selection with 400 $\mu\text{g}/\text{ml}$ neomycin in RPMI (Gibco BRL, Thermo Fisher Scientific, Rockville, MD, USA) containing 10% heat-inactivated fetal bovine serum, 100 ng/ml recombinant mouse IL-3 (R&D Systems, Minneapolis, MN, USA) and 50 $\mu\text{mol}/\text{l}$ 2-mercaptoethanol. Cells were cultured at 37°C in a humidified 5% CO_2 atmosphere.

mRNA analysis. cDNA was prepared from cells using reverse transcriptase (Transcriptor First Strand cDNA Synthesis kit; Roche, Indianapolis, IN, USA). Reverse transcription-quantitative polymerase chain reaction (RT-qPCR) was performed using the Quantitect SYBR-Green PCR reagent (Qiagen, Miami, FL, USA) according to the manufacturer's protocol and using an Opticon Mini Real-time PCR Instrument (Bio-Rad, Hercules, CA, USA), as described previously (22). The primer sequences were: *FLT3* forward, 5'-TCAAGTGCTGTGCATACAATTCCC-3' and reverse, 5'-CACCTGTACCATCTGTAGCTGGCT-3'; and *GAPDH* forward, 5'-GAAGGTGAAGGTCGGAGT-3' and reverse, 5'-GAAGATGGTGATGGGATTTC-3'. The thermal cycling conditions for *FLT3* and *GAPDH* were incubation at 95°C for 15 min, followed by 35 cycles of 95°C for 30 sec, 55°C for 30 sec and 72°C for 45 sec. The copy number of each sample was calculated as previously described (21).

Assessment of viable cells. The proportion of viable cells was determined using a dye reduction assay involving a tetrazolium salt, 2-(2-methoxy-4-nitrophenyl)-3-(4-nitrophenyl)-5-(2,4-disulfophenyl)-2H-tetrazolium, monosodium salt (WST-8; Dojindo, Tokyo, Japan), which is a modification of the 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium assay. The effective dose (ED_{50}) values were calculated from the data obtained from the cell growth assays. Exponentially growing cells were seeded at 1×10^4 cells per well in flat-bottomed 96-well plates, with or without IL-3 in the medium. Seven different doses were selected for DNR (Sigma, St. Louis, MO, USA) (1.5, 3.1, 6.2, 12.5, 25, 50 and 100 nM) and Ara-C (Sigma) (0.15, 0.31, 0.62, 1.25, 2.5, 5 and 10 μM). No DNR or Ara-C was added to the controls cells. Assays were performed 2 days after the addition of the drugs. For IL-3(-) cells, exponentially growing cells were washed twice with phosphate-buffered saline and seeded without IL-3. Viable cells (%) were calculated as the ratio of the absorbance (490 nm) of DNR or Ara-C-treated cells to the absorbance of untreated cells. At least three independent experiments were performed. The calculated ratios were analyzed and the ED_{50} values were obtained using tools at <http://www.vector.co.jp/soft/win95/edu/se248471.html>.

Statistical analysis. Data are expressed as the mean \pm standard error of the mean and $P < 0.05$ (denoted by one asterisk) was considered to indicate a statistically significant difference. Comparison of the means was performed using Student's t-test (http://www.physics.csbsju.edu/stats/t-test_bulk_form.html).

Results

Generation of Ba/F3-*FLT3*-TKD cells. Our previous study established the generation of Ba/F3-*FLT3*-ITD cells (21), and for the present study, to clarify whether *FLT3*-ITD or *FLT3*-TKD mediate any specific anticancer drug effects,

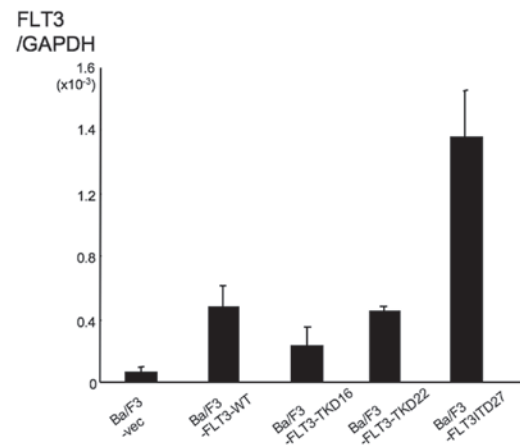


Figure 1. Expression of *FLT3* transgene in Ba/F3 cells. Reverse-transcription quantitative polymerase chain reaction (PCR) analyses of *FLT3* using newly established Ba/F3-*FLT3*-TKD16 and Ba/F3-*FLT3*-TKD22 lines and the previously generated Ba/F3-vec, Ba/F3-*FLT3*-WT (6) and Ba/F3-*FLT3*-ITD27 (21) lines. *FLT3* transcript levels were adjusted relative to the expression of *GAPDH*. The data presented were obtained from three independent PCR amplifications.

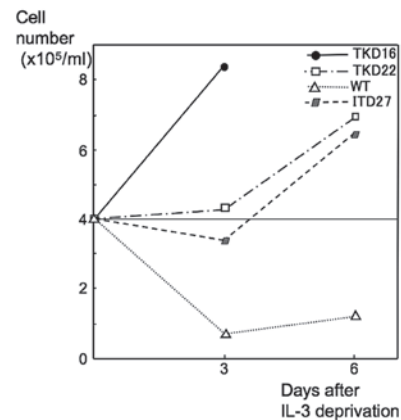


Figure 2. Effect of the *FLT3*-TKD transgene on the growth of Ba/F3 cells. To measure cell proliferation, Ba/F3-*FLT3*-TKD (TKD16, TKD22) cells together with Ba/F3-*FLT3*-WT and Ba/F3-*FLT3*-ITD (ITD27) cells were counted at days 3 and 6 following IL-3 deprivation, using a hemocytometer and the trypan blue exclusion method. The plotted values were obtained from an average of four counts, and the result is a representative of two independent experiments. IL-3, interleukin-3.

Ba/F3-*FLT3*-TKD cells were also generated. The pcDNA *FLT3*-TKD (D835Y) vector was electroporated into Ba/F3 cells and stably transfected lines were isolated by limiting dilution with medium containing neomycin. Among >20 lines obtained, two clones, Ba/F3-*FLT3*-TKD16 and Ba/F3-*FLT3*-TKD22, exhibited increased levels of *FLT3* expression compared with the parental vector (pcDNA3.1) transfected Ba/F3-vec cells (Fig. 1). To confirm that the *FLT3*-TKD transgene was functionally active, Ba/F3-*FLT3*-TKD16 and Ba/F3-*FLT3*-TKD22 cells were deprived of IL-3. These two lines showed factor-independent growth, as previously reported (21,23). Similar growth was observed for Ba/F3-*FLT3*-ITD (positive control), but not for Ba/F3-*FLT3*-WT (negative control) (Fig. 2).

ED₅₀ of DNR increases in IL-3-deprived Ba/F3-FLT3-ITD27, -ITD29 and -TKD22 cells. Cell viability and ED_{50} values were

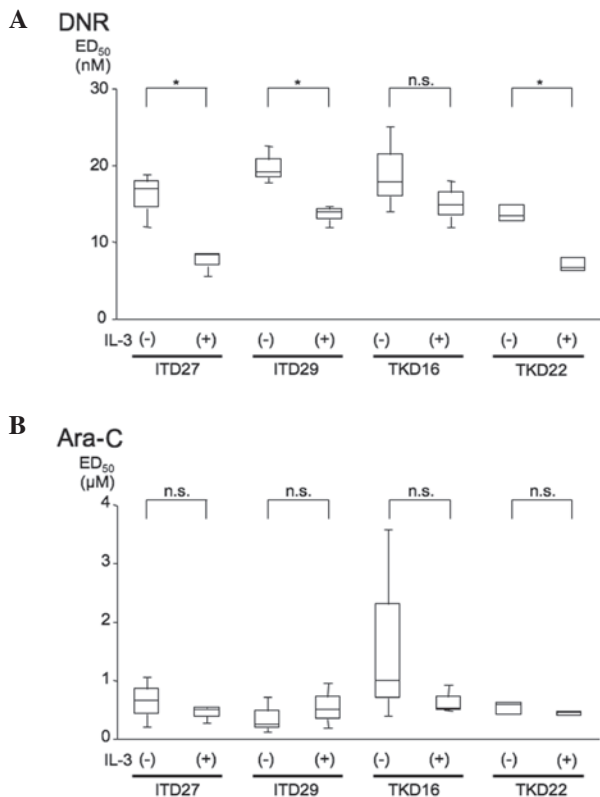


Figure 3. ED₅₀ values for (A) DNR and (B) Ara-C. The ED₅₀ values were calculated from the data obtained from the cell growth assays. WST-8 assays were performed on cells grown with or without IL-3 in the medium and 2 days after the addition of drugs: DNR (1.5, 3.1, 6.2, 12.5, 25, 50 or 100 nM) and Ara-C (0.15, 0.31, 0.62, 1.25, 2.5, 5 or 10 μM). Control cells were grown without the addition of DNR or Ara-C. Viable cells (%) were determined by the ratio of the absorbance (490 nm) of DNR or Ara-C-treated cells relative to the absorbance of untreated cells. The ratio of viable treated cells to untreated cells was used to calculate ED₅₀ values. At least three independent experiments were performed. These data are shown as boxplots representing the 25 and 75 percentiles, median and 5-95 range. Data are expressed as the mean ± standard error of the mean and *P<0.05 was considered to indicate a statistically significant difference. ED, effective dose; DNR, daunorubicin; IL-3, interleukin-3; n.s., not significant.

examined in the Ba/F3-*FLT3*-ITD and Ba/F3-*FLT3*-TKD cells. In Ba/F3-*FLT3*-ITD27, -ITD29 and -TKD22 cells, the ED₅₀ value was significantly increased in the absence of IL-3, compared with the controls (Fig. 3A). Additionally, in Ba/F3-*FLT3*-TKD16 cells, the median value was higher [IL-3(-), 17.7 nM; IL-3(+), 14.8 nM], although this difference was not statistically significant (Fig. 3A). By contrast, there were no differences in the ED₅₀ value for Ara-C between IL-3(-) and IL-3(+) cells (Fig. 3B). These results indicate that *FLT3*-ITD, as well as the mutation of the *FLT3*-TKD, may confer DNR resistance to Ba/F3 cells.

Discussion

The present data suggest that in AML patients with *FLT3*-ITD or *FLT3*-TKD mutations, DNR is not efficacious and only causes toxicity. This is consistent with the findings of a clinical trial showing that while the majority of AML patients benefit from intensified anthracycline dosing regimens, high-dose DNR did not provide a significant survival benefit in patients who had the *FLT3*-ITD mutation (24).

Lee *et al* (25) also support this notion that *FLT3*-ITD causes resistance to doxorubicin; dual treatment of PML-RARα *FLT3*-ITD transgenic mice with *FLT3* inhibitor SU11657 and doxorubicin increased sensitivity. Pardee *et al* (16) recently reported that *FLT3*-ITD confers resistance to doxorubicin in a p53-dependent manner. In addition to the well-known role of p53 in apoptosis induction, it has also been shown to induce multiple prosurvival and DNA repair genes (26). Consistent with this, *FLT3*-ITD-expressing AML cell lines and primary patient samples have increased the levels of reactive oxygen species, double-strand DNA breaks and increased DNA repair capacity (17,27).

The present findings are consistent with and support the above. However, using murine myeloid HF6 and human myeloid K562 cells, our previous study found that *FLT3*-ITD induced Ara-C resistance through repression of equilibrative nucleoside transporter 1 expression (19), which was not observed in the present study. This discrepancy may be due to the use of different cell lines. The present study employed Ba/F3 cells, a murine B-lymphoid cell line, which is distinct from HF6 and K562 cells. The Ba/F3 cells were used due to their IL-3 deprivation characteristic, which can reveal the effect of *FLT3* oncogenic signals. This enabled a specific DNR response to be identified.

The study also highlights the *FLT3*-TKD mutations, which may confer resistance to anthracycline. Although the data are from a cell line model and are somewhat preliminary, these results may indicate the benefit of therapy combining anthracycline and *FLT3* inhibitors for patients carrying *FLT3*-ITD and *FLT3*-TKD mutations.

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