

Long non-coding RNA MIAT promotes non-small cell lung cancer progression by sponging miR-1246

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Abstract. – **OBJECTIVE:** Recently, long non-coding ribonucleic acids (lncRNAs) have attracted more attention for their roles in tumor progression. The aim of this study was to investigate the exact role of lncRNA MIAT in the progression of non-small cell lung cancer (NSCLC) and to explore the possible underlying mechanism.

PATIENTS AND METHODS: MIAT expression in NSCLC tissue samples was detected by quantitative Real Time-Polymerase Chain Reaction (qRT-PCR). The association between the expression of MIAT and the prognosis of NSCLC patients were explored. Furthermore, the wound healing assay and the transwell assay were conducted in vitro. In addition, the luciferase assay and the RNA immunoprecipitation assay (RIP) were used to elucidate the underlying mechanism.

RESULTS: The MIAT expression in NSCLC tissues was significantly higher than that of the corresponding normal tissues. Moreover, MIAT expression was positively correlated with the overall survival time of NSCLC patients. The migration and invasion of cells were significantly promoted after MIAT over-expression in vitro. Meanwhile, the cell migration and cell invasion were obviously inhibited after MIAT knock-down in vitro. Bioinformatics analysis predicted that microRNA-1246 (miR-1246) was a novel target for MIAT. The expression of miR-1246 was significantly down-regulated after the overexpression or down-regulation of MIAT, respectively. Further mechanistic assays showed that miR-1246 was a direct target of MIAT in NSCLC.

CONCLUSION: MIAT enhanced the NSCLC cell migration and invasion via targeting miR-1246, which might be a potential biomarker in NSCLC.

Words:

Long non-coding RNA, Non-small cell lung cancer (NSCLC), MIAT, miR-1246.

Introduction

Lung cancer is one of the most frequent cancers in the world with high incidence and mortality. It is also the leading cause of tumor-related deaths^{1,2}. It is estimated that 234,030 new cases of lung cancer are diagnosed globally in 2018³. Non-small cell lung cancer (NSCLC) accounts for about 85% of lung cancer cases. A tremendous advance has been made in exploring the molecular tumorigenesis and therapeutic treatment of NSCLC. However, its 5-year survival rate is still lower than 15%⁴. Therefore, it is urgent to realize the underlying molecular mechanism of NSCLC and to find out new therapeutic targets for patients.

Long non-coding ribonucleic acids (lncRNAs) are a type of noncoding RNAs with more than 200 nucleotides in length. Numerous studies have shown that lncRNAs are a new frontier in the research of malignant diseases. For example, the lncRNA PVT1 is significantly up-regulated in gastric cancer, which contributes to the poor prognosis of patients⁵. By sponging to miR-124-3p, lncRNA OGFRP1 participates in the proliferation of NSCLC of cells⁶. In addition, activated by ZEB1, the lncRNA HCCL5 accelerates cell viability, cell migration, epithelial-mesenchymal transition (EMT) and the malignancy of hepatocellular carcinoma⁴.

As another subgroup of non-coding RNAs, microRNAs (miRNAs) are small RNAs with about 19–22 nucleotides in length. MiRNAs are involved in the repression or degradation of target RNA transcripts. It has been reported that a single miRNA modulates a diverse of protein-coding or noncoding RNAs in human cells. For example, miR-1269a acts as an onco-miRNA in NSCLC via down-regulating SOX6⁷. Through

targeting PDCD4 in human breast cancer, miR-NA-183-5p inhibits cell apoptosis, which may offer a potential therapeutic target for breast cancer⁸.

Previous researches have suggested that lncRNA MIAT plays an important role in tumor biology and development. However, the exact function of MIAT in NSCLC has not been fully elucidated. Our work found that the MIAT expression was significantly up-regulated in NSCLC tissues. MIAT promoted the NSCLC cell migration and invasion *in vitro*. Moreover, further experiments explored the underlying mechanism of MIAT function in NSCLC development.

Patients and Methods

Cell Lines and Clinical Samples

60 NSCLC patients who received surgery at the Fujian Cancer Hospital and the Fujian Medical University Cancer Hospital were enrolled in this study. Before the operation, written informed consent was obtained. No radiotherapy or chemotherapy was performed for any patient before the operation. Tissues were collected from the surgery and were stored immediately at -80°C for subsequent use. All tissues were confirmed by an experienced pathologist. This investigation was approved by the Ethics Committee of Fujian Cancer Hospital and the Fujian Medical University Cancer Hospital required.

SPCA1, H1299, PC-9, H1975 and H1975 normal human bronchial epithelial cell (16HBE) were obtained from the Shanghai Cell Bank (Shanghai, China). All cells were cultured in Dulbecco's Modified Eagle's Medium (DMEM; Gibco, Rockville, MD, USA) consisting of fetal bovine serum (FBS; Gibco, Rockville, MD, USA) and penicillin. Besides, the cells were maintained in an incubator with 5% of CO_2 at 37°C .

Cell Transfection

Once synthesized, the lentiviral virus targeting MIAT was cloned into pLenti-EF1a-EGFP-E2A-Puro vector (Bioss Inc, San Diego, CA, USA). The pLenti-EF1a-EGFP-E2A-Puro-2931 was used to package MIAT lentiviruses (MIAT and empty vector (control)), which were then transfected into SPCA1 NSCLC cells. The MIAT expression in transfected cells was conducted using quantitative Real-time-Polymerase Chain Reaction (qRT-PCR).

GenePharma provided us lentivirus expressing short-hairpin RNA (shRNA) against MIAT

(MIAT/shRNA). MIAT/shRNA was cloned into pGPH1/Neo vector (GenePharma, Shanghai, China), which was then transfected into NSCLC cells.

RNA Extraction and qRT-PCR

The Total RNA in tissues and cells was extracted by TRIzol reagent (Invitrogen, Carlsbad, CA, USA). Subsequently, the extracted RNA was reverse-transcribed to complementary deoxyribose nucleic acid (cDNA) through the reverse Transcription Kit (Takara Biotechnology Co., Ltd., Dalian, China). The primers used in this study were as follows: MIAT primers forward: 5'-GGTTCACAAACAACTG-3', reverse: 5'-TCCGCTTTGGCATTCTAGG-3'; β -actin primers forward: 5'-GATGGAAATCGTCAAGGCT-3' and reverse: 5'-TGGCACTTCTGGAAATGC-3'. The thermal cycle was as follows: 30 s at 95°C , 5 s for 40 cycles at 95°C , 35 s at 60°C .

Wound Healing Assay

Cells were transferred into 6-well plates (Corning, Corning, NY, USA) and cultured in DMEM medium overnight. Once scratched with a sterile tip, the cells were cultured in serum-free DMEM. Wound closure was viewed at different time points.

Transwell Assay

5×10^4 cells in 200 μL serum-free DMEM were transformed to the upper chamber of an 8 μm pore size insert (Millipore, Billerica, MA, USA) coated with or without 50 μg Matrigel (BD Biosciences, San Jose, CA, USA). Meanwhile, the lower chamber was added with DMEM and FBS. 48 h later, after wiped by cotton swab, the top surface of chambers was immersed for 10 min with precooled methanol. Then they were stained with crystal violet for 30 min. Three fields were randomly selected for each sample, and the number of migrating cells was counted.

Luciferase Reporter Gene Assay

For the luciferase reporter gene assay, the 3'-UTR of MIAT was cloned into pGL3 vector (Promega, Madison, WI, USA), namely wild-type (WT) 3'-UTR. The quick-change site-directed mutagenesis kit (Stratagene, Cedar Creek, USA) was used for site-directed mutagenesis of miR-1246 binding site in MIAT 3'-UTR, namely mutant (MUT) 3'-UTR. Subsequently, the cells were

transfected with WT-3'-UTR or MUT-3'-UTR and miR-ctrl or miR-1246 for 48 h. Finally, the luciferase activity was detected by the dual luciferase reporter assay system (Promega, Madison, WI, USA).

RNA Immunoprecipitation Assay (RIP)

Magna RIP RNA-Binding Protein Immunoprecipitation Kit (Millipore, Billerica, MA, USA) was used for RIP assay. Co-precipitated RNAs were detected by qRT-PCR.

Statistical Analysis

Statistical Product and Service Solutions (SPSS) 20.0 (IBM SPSS Statistics for Windows, Armonk, NY, USA) was used for all statistical analysis. Data were presented as mean $\pm$ standard deviation (SD). Chi-square test, Student *t*-test and Kaplan-Meier method were selected when appropriate. $p < 0.05$ was considered statistically significant.

Results

MIAT Expression in NSCLC Tissues and Cells

Firstly, qRT-PCR was conducted to determine MIAT expression in 60 NSCLC tissues and NSCLC cell lines. As a result, MIAT was significantly up-regulated in NSCLC tissue samples (Figure 1A). Meanwhile, the MIAT expression in NSCLC cells was significantly higher than the normal human bronchial epithelial cell line (16HBE) (Figure 1B).

High Expression of MIAT Was Correlated with Poor Overall Survival of NSCLC Patients

The survival of patients after surgery was analyzed through the Kaplan-Meier method. According to the median expression of MIAT, 60 NSCLC patients were divided into two groups, including high-MIAT group and low-MIAT group. The result of Kaplan-Meier analysis showed that the high MIAT level indicated a worse survival of NSCLC patients (Figure 1C).

Overexpression of MIAT Promoted the Migration and Invasion of NSCLC Cells

SPCA1 NSCLC cells were chosen for the overexpression of MIAT. Transfection efficiency was confirmed by qRT-PCR (Figure 2A). Results of wound healing assay revealed that after MIAT was overexpressed, the migration ability of NSCLC cells was significantly enhanced (Figure 2B). Furthermore, transwell assay also found that after MIAT overexpression *in vitro*, the number of migrated cells and invaded cells increased remarkably (Figure 2C, 2D).

Knockdown of MIAT Inhibited the Migration and Invasion of NSCLC Cells

H1299 NSCLC cells were selected for the knockdown of MIAT. Transfection efficiency was confirmed by qRT-PCR as well (Figure 3A). Wound healing assay demonstrated that after MIAT was knocked down, the migration ability of NSCLC cells was significantly inhibited (Figure 3B). Similarly, transwell assay indicated that after MIAT was knocked down in the NSCLC cells, the number of migrated and invaded cells decreased significantly (Figure 3C, 3D).

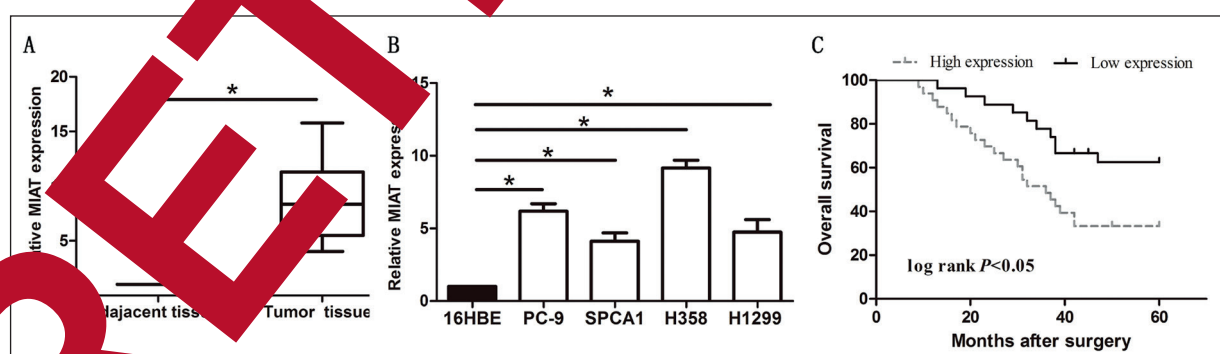


Figure 1. Up-regulated expression level of MIAT in NSCLC tissues and cell lines. **A**, MIAT expression was significantly higher in NSCLC tissues compared with adjacent tissues. **B**, The expression level of MIAT relative to β -actin was determined in human NSCLC cell lines and normal human bronchial epithelial cell (16HBE) by qRT-PCR. **C**, The higher expression of MIAT was associated with the worse overall survival of NSCLC patients. Data were presented as mean $\pm$ standard error of the mean. * $p < 0.05$.

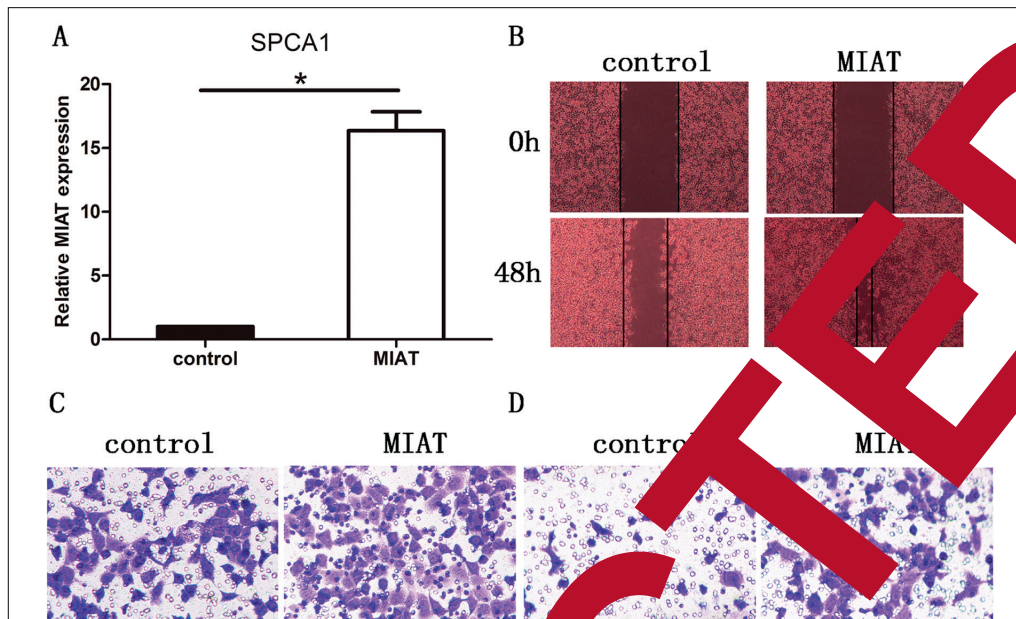


Figure 2. Overexpression of MIAT promoted the migration and invasion of SPCA1 NSCLC cells. **A**, The MIAT expression in SPCA1 NSCLC cells transduced with MIAT lentiviruses (MIAT) and empty vector (control) was detected by qRT-PCR. β -actin was used as an internal control. **B**, Wound healing assay showed that the overexpression of MIAT significantly increased the migration of SPCA1 NSCLC cells (magnification: 10 $\times$). **C**, Transwell assay showed that the number of migrated cells increased significantly *via* overexpression of MIAT in SPCA1 cells (magnification: 40 $\times$). **D**, Transwell assay showed that the number of invaded cells increased significantly *via* overexpression of MIAT in SPCA1 cells (magnification: 40 $\times$). The results represented the average of three independent experiments (mean $\pm$ standard error of the mean). * $p < 0.05$, as compared with control cells.

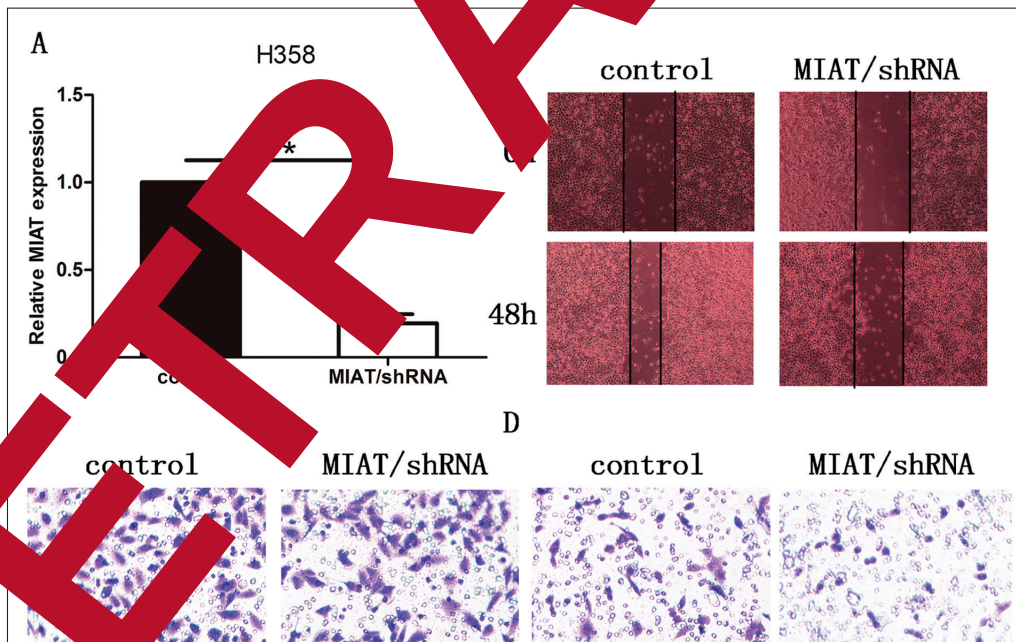


Figure 3. Knockdown of MIAT inhibited the migration and invasion of H358 NSCLC cells. **A**, The MIAT expression in H358 NSCLC cells transduced with MIAT shRNA (MIAT/shRNA) and empty vector (control) was detected by qRT-PCR. β -actin was used as an internal control. **B**, Wound healing assay showed that the knockdown of MIAT significantly inhibited the migration of H358 NSCLC cells (magnification: 10 $\times$). **C**, Transwell assay showed that the number of migrated cells significantly decreased *via* knockdown of MIAT in H358 cells. **D**, Transwell assay showed that the number of invaded cells significantly decreased *via* knockdown of MIAT in H358 cells (magnification: 40 $\times$). The results represented the average of three independent experiments (mean $\pm$ standard error of the mean). * $p < 0.05$, as compared with control cells.

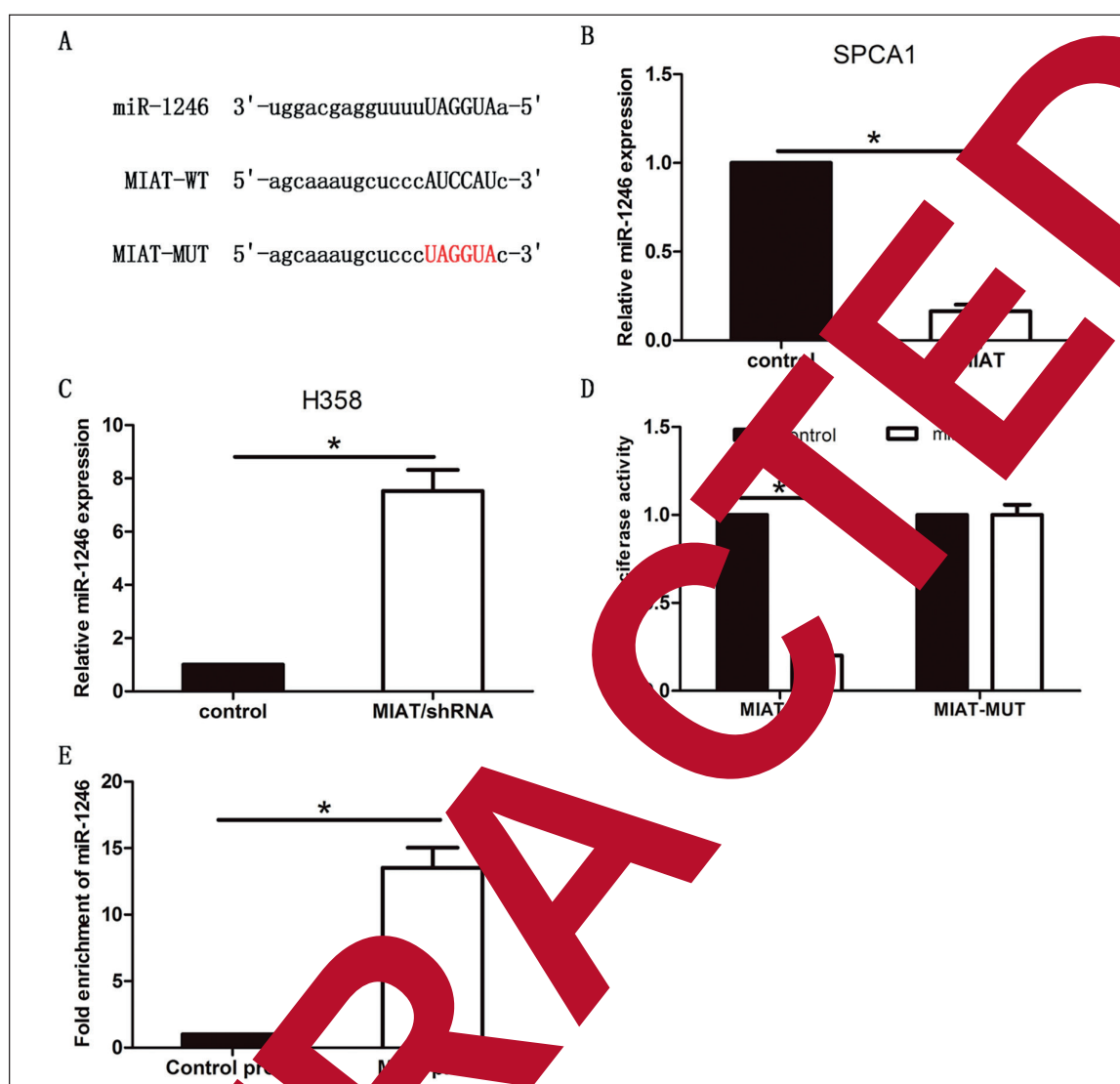


Figure 4. Reciprocal regulation between MIAT and miR-1246. **A**, The binding sites of miR-1246 on MIAT. **B**, The MiR-1246 expression decreased significantly in MIAT lentivirus group compared with control group. **C**, The MiR-1246 expression increased significantly in MIAT/shRNA group compared with control group. **D**, The co-transfection of miR-1246 and MIAT-WT strongly decreased luciferase activity. Co-transfection of miR-control and MIAT-WT did not change luciferase activity. Meanwhile, co-transfection of miR-1246 and MIAT-MUT did not change luciferase activity either. **E**, RIP assay results demonstrated that miR-1246 could be remarkably enriched in MIAT group compared with control group. The results represented the average of three independent experiments. Data were presented as mean $\pm$ standard error of the mean. * $p < 0.05$.

The Interaction Between MiR-1246 and MIAT in NSCLC

Starbase (<http://starbase.sysu.edu.cn/>) and miRNA-RNAhybrid (<http://mirna-rna-hybrid.org/>) was used to predict miRNAs that which contained complementary base with MIAT. miR-1246 is a tumor suppressor which can suppress cancer cell proliferation. Therefore, we focused on miR-1246 among these miRNAs which were interacted with MIAT (Figure 4A). Indeed, the qRT-PCR assay showed that the ex-

pression of miR-1246 in MIAT lentivirus cells was significantly lower than that of the control cells (Figure 4B). Meanwhile, the expression of miR-1246 in MIAT/shRNA cells was significantly higher than that of the control cells (Figure 4C). Furthermore, the luciferase reporter gene assay revealed that co-transfection of MIAT-WT and miR-1246 significantly decreased the luciferase activity. However, no significant changes were observed in luciferase activity after the

co-transfection of MIAT-MUT and miR-1246 (Figure 4D). Subsequent RIP assay demonstrated that miR-1246 could be remarkably enriched in MIAT group compared with control group. This suggested that MIAT might work as a miR-1246 sponge (Figure 4E). In summary, these data demonstrated that miR-1246 was a direct target of MIAT.

Discussion

An increasing number of researches have explored the important regulatory roles of ncRNAs in the mammalian genes. It has been reported that the ncRNA dysfunction is involved in epigenetic alterations, which contributes to tumorigenesis and metastasis. Therefore, numerous studies based on tumor-related ncRNAs may provide novel ideas for the diagnosis and treatment of malignancies. It has already been reported that ncRNAs contribute to the malignancy of tumor cells, especially for NSCLC. By targeting CD73/NT5E, the overexpression of miR-30a-5p inhibits the proliferation of NSCLC6 cells. In addition, miR-106b-5p facilitates cell proliferation and suppresses cell apoptosis in NSCLC through the regulation of BTG3 expression⁹.

Located on chromosome 22q12, MIAT (myocardial infarction associated transcript) was originally identified to be involved in myocardial infarction (MI), contributing to the risk of MI¹⁰. Recent researchers have found that MIAT is involved in numerous diseases, including malignant tumors. For example, MIAT serves as an oncogene in pancreatic cancer by promoting cell proliferation and metastasis, which can be reversed by miR-155-5p. By sponging miR-155-5p, MIAT enhances the progression of breast cancer *via* serving as a sponge of DUSP7¹². By modulating miR-141/DDX5 signaling pathway, MIAT facilitates the growth and metastasis of gastric cancer¹³. In addition, MIAT enhances colorectal cancer growth and metastasis by regulating miR-132/Dishevelin-1 pathway¹⁴. We showed that MIAT was significantly up-regulated in NSCLC tissues and cells. Besides, there was a significant correlation between patients' prognosis and MIAT expression level. Furthermore, MIAT overexpression in NSCLC cells, cell migration and invasion abilities were significantly promoted. However, after MIAT was knocked down in NSCLC cells, cell migration and invasion abilities were significantly in-

hibited. The above results indicated that MIAT promoted tumorigenesis of NSCLC and might act as an oncogene.

Recently, the reciprocal influence between lncRNAs and miRNAs has emerged. Similar sequences targeted by miRNAs are found, meanwhile, miRNAs can be sequestered away from mRNA. LncRNAs have been reported to participate in the tumor progression as competing endogenous RNAs. For example, lncRNA CRNDE facilitates the progression of colorectal carcinoma through binding to miR-101¹⁵. Through inhibiting miR-200b-3p, lncRNA H19 promotes the proliferation and metastasis of melanoma¹⁶. Numerous studies are reported that normally expressed miRNAs are needed for tumorigenesis. Some reports have suggested that miR-1246 functions as either a tumor suppressor or an oncogene. MiR-1246 is low-expressed in cervical cancer, which is negatively related to the development of cervical cancer and HPV infection status¹⁷. Through targeting CCNG2, cytoplasmic miR-1246 facilitates the proliferation and invasion of breast cancer. This might induce drug resistance in breast cancer¹⁸. In addition, miR-1246 promotes chemoresistance and cancer stemness in oral carcinomas by targeting CCNG2¹⁹. Through the conversion of the expression of miR-1290, miR-1246 functions as a tumor-initiator and promotes the progression of NSCLC²⁰. Moreover, miR-1246 enhances the migration of NSCLC cells through targeting cytoplasmic polyadenylation element-binding protein 4²¹.

In the present study, the miR-1246 expression was significantly down-regulated after the overexpression of MIAT. However, miR-1246 expression was obviously upregulated after knockdown of MIAT. The luciferase reporter gene assay confirmed that miR-1246 could directly bind to MIAT. Moreover, miR-1246 was significantly enriched by MIAT RIP assay. The results above suggested that MIAT might promote tumorigenesis of NSCLC *via* targeting miR-1246.

Conclusions

We observed that MIAT was remarkably up-regulated in NSCLC, and was negatively correlated with poor prognosis of patients. Besides, MIAT could enhance NSCLC metastasis through targeting miR-1246. Our findings suggested that MIAT might contribute to therapy for NSCLC as a candidate target.

Conflict of Interest

The Authors declare that they have no conflict of interests.

Acknowledgements

The study was granted by the Fujian Science and Technology Program (2018Y2003); Natural Science Foundation of Fujian Province (2017J01263).

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