

targeting TAM/M function warrant evaluation. Such concepts might be evaluated *in vivo* using the herein established orthotopic mouse model.

BSCI-09. MULTIOMIC SINGLE CELL ANALYSIS REVEALS EMERGING PRINCIPLES OF TUMOR IMMUNE MICROENVIRONMENT INHERENT TO NSCLC BRAIN METASTASES

Lei Wen, Changguo Shan, Da Liu, Cheng Zhou, Linbo Cai; Guangdong Sanjiu Brain Hospital, Guangzhou, China

Brain is one of the most common sites for distant metastasis of lung cancer. Treatment naïve lung cancer patients diagnosed with brain metastasis are left with very limited options. Checkpoint inhibition is a powerful immunotherapy strategy but delivers benefit only to a small population of patients. Here we harnessed the power and resolution of single cell RNA sequencing and single cell TCR/BCR sequencing to investigate the tumor immune microenvironment (TIME) of NSCLC brain metastases. We enrolled treatment naïve lung cancer patients with brain metastasis. The enrolled subjects covered different histology types and driver gene mutation status. We revealed the emerging principles of innate and adaptive immune components inherent to NSCLC brain metastases. We also uncovered several significant intercellular communication patterns that potentiates cancer cell seeding and fosters cancer cell proliferation. Those results served as a starting point to design optimal immunotherapy strategies for advanced lung cancer patients with limited options.

BSCI-10. INVASIVE GROWTH OF BRAIN METASTASES IS DRIVEN BY CANCER CELL-PSTAT3+ REACTIVE ASTROCYTE CROSSTALK

Matthew Dankner¹, Sarah Maritan¹, Rebecca Zhuang², Maxime Caron³, Neibla Priego⁴, Manuel Valiente⁴, Kevin Petrecca⁵, Peter Siegel¹; ¹Goodman Cancer Research Centre, McGill University, Montreal, QC, Canada, ²University of British Columbia, Faculty of Medicine, Vancouver, BC, Canada, ³McGill University Genome Centre, Department of Human Genetics, Montreal, QC, Canada, ⁴Spanish National Cancer Research Center (CNIO), Madrid, Spain, ⁵Montreal Neurological Institute-Hospital, Department of Neurology and Neurosurgery, Montreal, QC, Canada

BACKGROUND: Brain metastases (BrM) with a highly invasive (HI) histological growth pattern are associated with poor prognosis compared to minimally invasive (MI) masses. Compared to MI lesions, HI BrM form greater contacts with cells in the peritumoral brain, particularly reactive astrocytes (RAs). RAs expressing phosphorylated STAT3 (pSTAT3+RAs) have been shown to promote BrM colonization. Here, we investigate the role of pSTAT3+RAs in promoting invasive growth of HI BrM. **METHODS:** We performed immunohistochemistry to identify pSTAT3+RAs in HI and MI human and patient-derived xenograft BrM. We assessed how pharmacological STAT3 inhibition or RA-specific STAT3 genetic ablation affected HI and MI BrM growth *in vivo*. scRNA-seq data generated from HI BrM astrocytes were integrated with published RA secretome data to identify STAT3 targets expressed by RAs that may drive invasion. Cancer cell invasion was modeled *in vitro* using a brain slice-tumor co-culture assay. **RESULTS:** HI BrM display increased pSTAT3-positivity within RAs when compared to MI lesions. Pharmacological STAT3 inhibition with Legasil (Silibinin) or genetic ablation decreased *in vivo* growth of HI, but not MI, BrM. Brain slice cultures treated with STAT3-activating cytokines induced cancer cell invasion, a response that was ablated following STAT3 inhibition. Chi3L1 was identified as a STAT3 target expressed by RAs. Cancer cells treated with recombinant Chi3L1 showed greater invasion into brain slice cultures compared to untreated cells. **CONCLUSIONS:** pSTAT3+RAs are over-represented in HI BrM, rendering HI BrM preferentially sensitive to STAT3 inhibition. pSTAT3+RAs functionally contribute to BrM invasion within the brain, in part through Chi3L1-mediated activity. This work identifies STAT3 and Chi3L1 as clinically relevant therapeutic targets in management of HI BrM.

BSCI-11. TARGETING PI3K/AKT/MTOR PATHWAY TO PREVENT MELANOMA BRAIN METASTASIS

Cedric Tehrani¹, Laura Fankhauser¹, Patrick N. Harter², Colin D. H. Ratcliffe³, Pia S. Zeiner², Julia M. Messmer¹, Dirk C. Hoffmann¹, Katharina Frey¹, Dana Westphal⁴, Michael W. Ronellenfisch², Erik Sahai³, Wolfgang Wick^{1,5}, Matthia A. Karreman^{1,5}, Frank Winkler^{1,5}; ¹Clinical Cooperation Unit Neurooncology, German Cancer Research Center, Heidelberg, Germany, ²Frankfurt Cancer Institute, Frankfurt, Germany, ³Tumour Cell Biology Laboratory, The Francis Crick Institute, London, United Kingdom, ⁴Department of Dermatology, Medical Faculty and University Hospital Carl Gustav Carus, TU Dresden, Dresden, Germany, ⁵Neurology Clinic

and National Center for Tumor Diseases, University Hospital Heidelberg, Heidelberg, Germany

BACKGROUND: Patients developing brain metastasis (BM) still face a poor survival due to limited treatment options. BM prevention using low dose drug schedules could be a more potent strategy with less side effects than treating established BM. This could add a real benefit to the ongoing challenge of facing the frequent BM formation in high-risk malignant melanoma (MM) patients. **METHODS:** Aiming to study the dynamics of PI3K/Akt/mTOR (PAM) pathway activation during the brain metastatic cascade, *in vivo* molecular imaging with an Akt biosensor was performed. Long-term intravital multiphoton microscopy through a chronic cranial window in mice was employed to investigate timing and effectiveness of PAM pathway inhibition for BM prevention. **RESULTS:** *In vivo* molecular imaging revealed the activation of PAM pathway as a prerequisite for extravasation of circulating MM cells in the brain. However, established human BM present with heterogeneous activation of the PAM pathway. Moreover, in two MM mouse models, PAM pathway inhibition with the brain-penetrant dual PI3K/mTOR inhibitor GNE-317 resulted in only moderate effects on established BM. In contrast, giving low dose GNE-317 in a preventive schedule successfully reduced growth rate and number of BM in both mouse models. Longitudinal intravital multiphoton microscopy suggests that the first, rate-limiting, steps of BM formation can be effectively targeted by dual PI3K/mTOR inhibition. **CONCLUSION:** PAM pathway activation is key for the critical early steps of MM metastatic brain colonization. These findings reveal that early PAM pathway inhibition is a promising strategy to prevent the formation of clinically relevant BM.

BSCI-12. INHIBITION OF MELANOMA BRAIN METASTASIS BY TARGETING MIR-146A

Jiwei Wang^{1,2}, Emma Rigg², Taral R. Lunavat², Wenjing Zhou¹, Zichao Feng¹, Tuyen Hoang², Rolf Bjerkvig², Frits Thorsen^{1,3}; ¹Department of Neurosurgery, Qilu Hospital of Shandong University and Brain Science Research Institute, Shandong University, Key Laboratory of Brain Functional Remodeling, Shandong, Jinan, China, ²Department of Biomedicine, University of Bergen, Bergen, Norway, ³Molecular Imaging Center, Department of Biomedicine, University of Bergen, Bergen, Norway

BACKGROUND: Melanoma has the highest propensity of any cancer to metastasize to the brain, with late-stage patients developing brain metastasis (MBM) in 40% of cases. Survival of patients with MBM is around 8 months with current therapies, illustrating the need for new treatments. MBM development is likely caused by molecular interactions between tumor cells and the brain, constituting the brain metastatic niche. miRNAs delivered by exosomes released by the primary tumor cells may play a role in niche establishment, yet the mechanisms are poorly understood. Here, the aim was to identify miRNAs released by exosomes from melanomas, which may be important in niche establishment and MBM progression. **MATERIALS AND METHODS:** miRNAs from exosomes collected from human astrocytes, melanocytes, and MBM cell lines were profiled to determine differential expression. Functional *in vitro* validation was performed by cell growth and migration assays, cytokine arrays, qPCR and Western blots. Functional *in vivo* studies were performed after miR knockdown in MBM cell lines. An *in silico* docking study was performed to determine drugs that potentially inhibit transcription of miR-146a to impede MBM development. **RESULTS:** miR-146a was the most upregulated miRNA in exosomes from MBM cells and was highly expressed in human and animal MBM samples. miR-146a mimics activated human astrocytes, shown by increased proliferation and migration, elevated expression of GFAP *in vitro* and in mouse brain tumor samples, and increased cytokine production. In animal studies, knockdown of miR-146a in MBM cells injected intracardially into mice reduced BM burden and increased animal survival. Based on the docking studies, deserpidine was found to be an effective inhibitor of MBM growth *in vitro* and *in vivo*. **CONCLUSIONS:** MiR-146a may play an important role in MBM development, and deserpidine is a promising candidate for clinical use.

BSCI-13. MTH1 EXPRESSION IS UPREGULATED IN BRAIN METASTASES OF MALIGNANT MELANOMA

Marco Timmer; Neurosurgery, Cologne, Germany

OBJECTIVE: MuT Homolog1 (MTH1) is an enzyme involved in DNA repair in normal cells and is often up-regulated in cancer cells. The enzyme catalyses the hydrolysis of oxidised dNTPs, to prevent their incorporation into DNA or RNA, resulting in mutations or cell damage/death. Cancer cells can have a high concentration of ROS, due to defective redox regulation. This results in the damage of DNA and oxidises free dNTPs, which in turn leads to mutations in DNA replication or cell death. Identifying MTH1 in brain metastases could present a target for treatment with MTH1-inhibitors. **METHODS:** The quantification of MTH1 expression was shown using

Western Blot analysis. 16 tumours were obtained during neurosurgery, 8 metastatic and 8 recurrent tumours of the same patient, and immediately frozen using liquid nitrogen. The proteins were extracted using RIPA lysis buffer. Western Blot was performed and detection followed via peroxidase linked secondary antibodies. RESULTS: MTH1 expression was shown to be up-regulated in brain metastases (1,442±0,6374) versus normal brain tissue (0,4133±0,277). However, in the recurrent tumour of the brain metastases, MTH1 was not expressed in a significantly higher amount compared the control tissue and less than in the brain metastases (0,6941±0,4146). CONCLUSION: The high expression of MTH1 in cerebral metastases is not uncommon for many cancers and thus presents a therapeutic target for MTH1-inhibitors, provided these are able to cross the blood brain barrier. Comparison to the primary melanoma tumour would be useful in showing significant differences of the metastases. Lower levels of MTH1 in recurrent brain metastases may suggest dedifferentiation from the original metastases. It may present a target for specific treatment of brain metastases of melanoma.

BSCI-14. TGLI1 IS AN ACTIONABLE THERAPEUTIC TARGET IN BREAST CANCER BRAIN METASTASES

Daniel Doheny, Sara Manore, Grace Wong, Dongqin Zhu, Sherona Sirkison, Tadas Rimkus, Marlyn Angelou, Noah Aguayo, Angelina Regua, Anderson O'Brian Cox, Cristina Furduliu, Alexandra Thomas, Adrianna Henson Masters, Roy Strowd, Hui-Wen Lo; Wake Forest School of Medicine, Winston-Salem, NC, USA

Breast cancer is the second leading cause of brain metastases in women; patients with breast cancer brain metastasis (BCBM) survive a median of 14.1 months following diagnosis. Cancer stem cells are thought to be one of the driving forces behind distant metastasis, treatment resistance, and late-stage recurrence. Despite advances made in understanding breast cancer stem cells (BCSC), it remains challenging to effectively target BCSC underscoring the need to identify and inhibit novel mediators of BCSC for treating BCBM patients. The hedgehog-smoothened pathway is an important mediator of breast cancer stem cells (BCSC); however, FDA-approved therapies targeting smoothened have demonstrated limited clinical efficacy in breast cancer. Truncated glioma-associated oncogene homolog 1 (tGLI1) was discovered in our laboratory as an alternative GLI1 splice variant that functions as a tumor-specific gain-of-function transcription factor and terminal effector of the hedgehog pathway. Our laboratory recently reported that tGLI1 promotes preferential metastasis to the brain in breast cancer by activating BCSC and astrocytes in the tumor microenvironment (Oncogene 39:64–78, 2020). tGLI1 knockdown abrogated BCBM, providing the rationale to therapeutically target tGLI1. This study aimed to determine if tGLI1 can be therapeutically targeted. Cell-based chemical screens followed by validations demonstrated that ketoconazole, an FDA-approved azole antifungal, and novel derivatives specifically inhibit tGLI1 leading to suppression of BCSC *in vitro* and BCBM *in vivo*. Mechanistic studies suggest that KZC-dependent cell kill is, in part, mediated through downregulation of tGLI1 target genes *OCT4*, *Nanog*, and *VEGFA*. Based on these data, we opened a window-of-opportunity study in patients with BCBM to determine if ketoconazole penetrates the blood-brain barrier (BBB) and alters tGLI1 signaling in humans (NCT03796273). Preliminary sample analysis demonstrates ketoconazole crosses the blood-tumor barrier and that tGLI1 expression correlates with tGLI1 signaling in resected samples. Collectively, these data establish tGLI1 as an actionable target for BCBM.

BSCI-15. OSTEOPONTIN PLAYS A CRUCIAL ROLE IN INVASIVENESS OF TRIPLE NEGATIVE BREAST CANCER CELLS IN THE CONTEXT OF HUMAN MICROGLIA

Kamil Wojnicki¹, Agata Kochalska¹, Katarzyna Poleszak¹, Adria-Jaume Roura¹, Ewa Matyja², Tomasz Czernicki³, Anna Gieryng¹, Bożena Kaminska¹; ¹Laboratory of Molecular Neurobiology, Nencki Institute of Experimental Biology, Polish Academy of Sciences, Warsaw, Poland, ²Department of Experimental and Clinical Neuropathology, Mossakowski Medical Research Centre, Polish Academy of Sciences, Warsaw, Poland, ³Department of Neurosurgery, Medical University of Warsaw, Warsaw, Poland

The triple-negative breast cancer (TNBC) is the most malignant among breast cancers and has the high risk of developing metastasis into the brain. Metastases of breast cancers are increasing and pose a clinical challenge as the current treatments are not effective due to the unique brain microenvironment for metastatic breast cancer cells. While the contribution of brain macrophages to the formation of the metastatic niche is established, factors responsible for the crosstalk between cells remain elusive. SPP1 encoding a secreted phosphoprotein 1 (osteonin) is highly overexpressed in malignant breast cancers. We evaluated the role of SPP1 in invasion and metastasis of human breast cancer cells. We found the increased invasion of triple-negative MDA-MB-231 (MDA-231) cells in the presence of human

microglial HMSV40 cells. Using Western blot analysis demonstrated the elevated levels of focal adhesion kinase (FAK) and signal transducer and activator of transcription 3 (STAT3) in MDA-231 cells in co-cultures. Moreover, blocking SPP1 and integrin interactions with the synthetic RGD peptide, efficiently diminished both basic and microglia-induced invasion of MDA-231. To assess the role of SPP1 in cell invasion, we established the MDA-231 cells with knocked-down SPP1 expression using shRNA (shSPP1). Interestingly, the shSPP1 cells were unresponsive towards HMSV40 microglia. We have previously found that an antibiotic minocycline reduces SPP1 expression in glioma cells. We performed cell toxicity studies on 4 breast cancer cell lines and various non-malignant cells. All tested malignant cancer cells were more sensitive to minocycline than non-cancerous cells and breast cancer cells derived from TNBC were the most susceptible. Altogether, we demonstrate that microglia support invasion of breast cancer cells via SPP1/osteopontin triggering the integrin signalling, and minocycline by downregulating SPP1 expression may reduce both basic and microglia-induced cancer invasion. Therefore, we propose that minocycline could be a new therapeutics targeting metastatic brain cancers.

BSCI-16. OLFACTORY RECEPTOR 5B21 DRIVES BREAST CANCER METASTASIS

Mao Li^{1,2}, Markus Schweiger^{1,2}, Ichiro Nakano³, Daniel Ryan^{1,2}, Litia Carvalho^{1,2}, Bakhos Tannous^{1,2}; ¹Experimental Therapeutics and Molecular Imaging Laboratory, Department of Neurology, Neuro-Oncology Division, Massachusetts General Hospital, Boston, MA, USA, ²Neuroscience Program, Harvard Medical School, Boston, MA, USA, ³Department of Neurosurgery and Comprehensive Cancer Center, University of Alabama at Birmingham, Birmingham, AL, USA

Olfactory receptors (ORs), responsible for the sense of smell, play an essential role in physiological processes (even outside the nasal epithelium) and cancer. In breast cancer, however, the expression and role of ORs remain understudied. We examined the significance of ORs transcript abundance in breast cancer metastasis to different tissues including the brain, bone, and lung. While we found 20 OR genes to be differentially expressed in different metastasis versus primary tumor, OR5B21 displayed high relation with all metastases. Knockdown of OR5B21 significantly decreased the invasion and migration of breast cancer cells in culture as well as metastasis to different organs including the brain, *in vivo*. On the other hand, overexpression of OR5B21 in the primary cells had the opposite effect. Mechanistically, OR5B21 was associated with epithelial to mesenchymal transition through STAT3/NFκB/CEBPβ signaling pathway. We propose OR5B21 (and potentially other ORs) as a novel oncogene contributing to breast cancer metastasis, and as a potential target for therapy.

BSCI-17. TARGETING SIRPA AS A THERAPEUTIC STRATEGY FOR THE TREATMENT OF BREAST CANCER BRAIN METASTASIS

Elizabeth R. Stirling, Steven M. Bronson, William N. Crowe, Adam Wilson, Mitra Kooshki, Dawen Zhao, Pierre L. Triozzi, Glenn J. Lesser, David RSoto-Pantoja; Wake Forest School of Medicine Comprehensive Cancer Center, Winston-Salem, NC, USA

Triple-negative breast cancer (TNBC) is a highly aggressive subtype of breast cancer characterized by the lack of druggable targets and an incidence of brain metastasis from the primary site of approximately 35%. There is no standard treatment for managing brain metastasis associated with TNBC; therefore, new strategies are urgently needed to overcome disease mortality. The CD47/SIRPα signaling pathway is implicated in tumor progression due to bypassing innate and adaptive immune surveillance. Most strategies targeting this pathway focus on targeting the receptor CD47; however, targeting SIRPα as a potential strategy to mitigate tumor burden remains understudied. Analysis of gene expression database shows that SIRPα expression is significantly elevated in invasive breast cancer when compared to primary. Furthermore, single-cell data indicates that SIRPα is expressed in basal epithelial cells in TNBC tumors aside from the myeloid compartment. Our immune staining against SIRPα in patient biopsies shows a five-fold increase in SIRPα expression in metastatic brain tumors compared to the primary lesions. Therefore, targeting SIRPα may be a new immunotherapeutic strategy to treat breast cancer brain metastases. Anti-SIRPα treatment of mice bearing brain metastatic 4T1Br3 orthotopic tumors showed reduced tumor volume and tumor weight by over 50% compared to isotype control-treated mice. Furthermore, in a model of intracardial brain metastasis, treatment with SIRPα antibody was associated with a 60% increase in survival compared to isotype control-treated mice. RNA sequencing of tumors indicated that SIRPα blockade is associated with a reduction in genes linked to mitochondrial respiratory chain and increases in negative regulation of the cell cycle. Furthermore, *in vitro* SIRPα targeting enhanced the cell-mediated cytotoxicity of microglia against 4T1Br3 breast cancer cells. This suggests that SIRPα blockade may influence both tumor and innate immune cells to limit brain metastatic breast cancer growth and enhance survival.